



Retinoids regulate TGF β signaling at the level of Smad2 phosphorylation and nuclear accumulation

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ARTICLE INFO

Article history:

Received 7 March 2008

Received in revised form 17 July 2008

Accepted 31 July 2008

Available online 13 August 2008

Keywords:

Smad
Retinoic acid
Transforming growth factor- β
Retinoid X receptor
Phosphorylation
Nuclear accumulation

ABSTRACT

Indirect regulation of transforming growth factor (TGF)- β signaling by retinoids occurs on a long-term timescale, secondary to transcriptional events. Studies by our group show loss of retinoid X receptor (RXR) α results in increased TGF β 2 in the midgestational heart, which may play a role in the cardiac defects seen in this model [S.W. Kubalak, D.R. Hutson, K.K. Scott and R.A. Shannon, Elevated transforming growth factor beta2 enhances apoptosis and contributes to abnormal outflow tract and aortic sac development in retinoic X receptor alpha knockout embryos, *Development* 129 (2002) 733–746.]. Acute and direct interactions between retinoid and TGF β signaling, however, are not clearly understood. Treatment of dispersed hearts and NIH3T3 cells for 1 h with TGF β and retinoids (dual treatment) resulted in increased phosphorylated Smad2 and Smad3 when compared to treatment with TGF β alone. Of all dual treatments, those with the RXR agonist Bexarotene, resulted in the highest level of phosphorylated Smad2, a 7-fold increase over TGF β 2 alone. Additionally, during dual treatment phosphorylation of Smad2 occurs via the TGF β type I receptor but not by increased activation of the receptor. As loss of RXR α results in increased levels of Smad2 phosphorylation in response to TGF β treatment and since nuclear accumulation of phosphorylated Smad2 is decreased during dual treatment, we propose that RXR α directly regulates the activities of Smad2. These data show retinoid signaling influences the TGF β pathway in an acute and direct manner that has been unappreciated until now.

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1. Introduction

TGF β is a pleiotropic cytokine which affects cell growth, differentiation, apoptosis, immune modulation and epithelial to mesenchymal transformation [2]. With or without the assistance of the TGF β type III receptor (T β RIII) [3] TGF β isoforms bind to the constitutively active type II receptor (T β RII) promoting its heterodimerization with and activation of the type I receptor (T β RI) [4]. T β RI then acts as a serine/threonine kinase that phosphorylates the C-terminal SXS motif of the most immediate downstream signal, TGF β -activated receptor Smads, Smad2 and Smad3 (Smad2/3) [4]. Smad2/3 can be phosphorylated at alternate motifs by other kinases outside of the canonical TGF β signaling scheme [5] modifying the downstream events normally ascribed to TGF β -mediated Smad signaling [6]. Once phosphorylated by T β RI, Smad2/3 heterodimerize with Smad4, i.e. the common Smad, aptly named because it is common to both the TGF β and bone morphogenetic protein (BMP) pathways [4]. The Smad4/Smad2/3 complex then accumulates in the nucleus [7] where it interacts with co-activators and -repressors to regulate the transcription of specific target genes [8].

There are several points of control between TGF β binding its receptor and affecting downstream transcriptional targets. SARA, the Smad anchor for receptor activation, regulates the subcellular localization of Smad2 and its availability to the kinase action of T β RI [9]. The inhibitory Smads, Smad6 and Smad7, block receptor Smad phosphorylation via competitive inhibition at the level of the receptor [10]. The expression of Smad7 is positively regulated by activation of the canonical TGF β cascade and therefore serves as a negative feedback mechanism to blunt TGF β signaling [11]. Smurfs, Smad-ubiquitin regulatory factors, are E3 ligases that mediate Smad and TGF β receptor ubiquitination and proteasomal degradation. Smurf2 has been shown to ubiquitinate newly activated Smad2 that has accumulated in the nucleus [12]. Smurfs also interact with Smad7 to regulate ubiquitination and proteasomal degradation of T β RI [13].

Once activated and in the nucleus, the transcriptional effects of TGF β -activated receptor Smads can be blunted by binding the transcriptional co-repressors Ski and Sno [14]. Additionally, the phosphatase activity of protein phosphatase 1A (PPM1A) is known to regulate the duration of TGF β 's transcriptional effects by decreasing the amount of SXS-motif-phosphorylated Smad2 (pSmad2) in the nucleus [15].

The retinoid derivatives of vitamin A show their own canonical signaling cascade, which ultimately regulates developmental

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patterning and apoptosis. Retinoids are enzymatically converted from vitamin A and act as the ligands which agonize retinoid receptors promoting their nuclear import [16], dimerization, and transcriptional effects [17–19]. Retinoid receptor hetero- (RXR/RAR) or homo- (RXR/RXR) dimers bind to retinoic acid response elements (RARE) or retinoid X response elements (RXRE), respectively, within the promoter regions of retinoid target genes such as Hox family members, the metabolic regulator phosphoenolpyruvate carboxykinase, and retinoid receptors themselves [20]. As such, retinoid receptors are transcriptional regulators, however, there is evidence to suggest that they serve additional purposes in the cell. It is known that retinoid signaling can affect TGF β signaling at the level of the receptor Smads. Cao et al. proposed that all-*trans* retinoic acid (atRA) mediates the activity of an unidentified Smad2 phosphatase leading to lower levels of activated Smad2 [21]. It is unclear if this purported phosphatase and PPM1A are one and the same. It has also been reported that antagonist-treated and therefore unliganded RAR binds Smad3 and increases Smad3-driven transcription [22]. Additionally the transcriptional corepressor TGF β -induced factor homeobox (TGIF) has been shown to regulate Smad2- and RXR-driven transcription

[22,23]. During high levels of TGF β signaling indicated by increased nuclear pSmad2, TGIF binds the Smads and prevents their interaction with transcriptional co-activators CBP and p300, effectively blunting Smad-mediated transcription [24,25]. Under conditions of decreased nuclear pSmad2, however, TGIF binds RXREs, blocking the transcriptional activity of RXR homodimers [26].

Clearly there is growing evidence that TGF β and retinoid pathways reciprocally regulate each other on a long-term time scale secondary to transcriptional and translational changes. Our findings herein represent the first report examining the acute effect of retinoids on TGF β -activated receptor Smad phosphorylation and nuclear accumulation.

2. Materials and methods

2.1. Cell lines and treatments

NIH3T3 cells were obtained from ATCC and maintained according to supplier's recommendations. RXR α knockout (RXR α -/-) and matched wild type littermate mouse embryonic fibroblasts (MEFs)

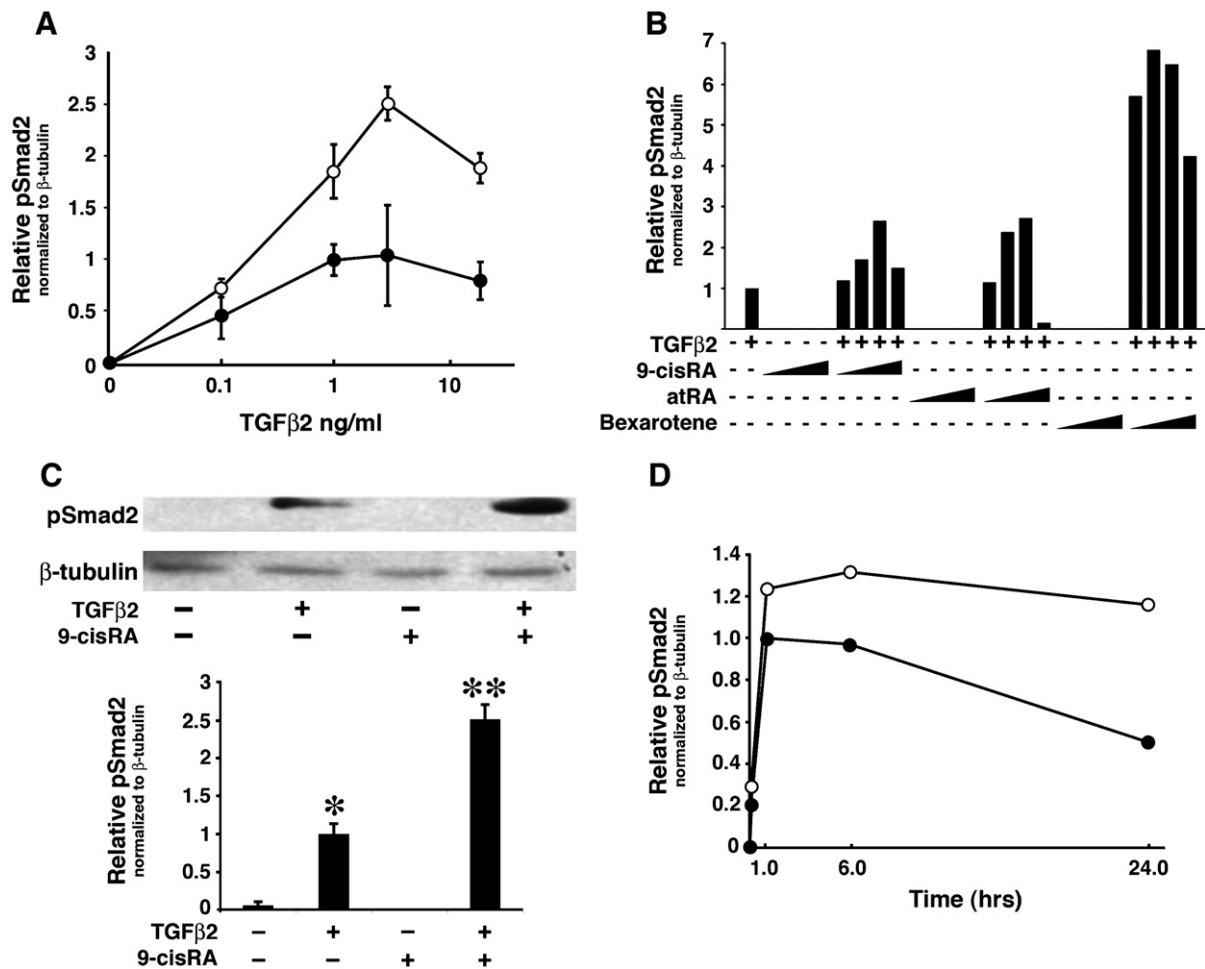


Fig. 1. Retinoids, in the presence of TGF β 2, increase pSmad2 levels above those seen after a one-hour treatment with TGF β 2 alone. (A) NIH3T3 cells were treated for 1 h with 0.1–20 ng/ml of TGF β 2 in the absence (closed circles) or presence (open circles) of 75 nM 9-cisRA. Total cellular proteins were subjected to Western blot and pSmad2 levels were densitometrically normalized to β -tubulin. The 1.0 ng/ml TGF β 2 treatments were averaged and assigned a value of one and all other values were further normalized to this data point. Results are mean \pm one S.E. (B) NIH3T3 cells were treated for 1 h with varying concentrations of three retinoid species in the absence or presence of 3 ng/ml TGF β 2. Retinoid concentration ranges: atRA – 10 nM, 50 nM, 100 nM, 400 nM; Bexarotene – 25 nM, 100 nM, 200 nM, 400 nM; 9-cisRA – 10 nM, 25 nM, 75 nM, 400 nM. Total cellular proteins were subjected to Western blot and pSmad2 levels were normalized to β -tubulin. To demonstrate relative differences between treatments, normalized pSmad2 levels obtained from TGF β 2 treatment were assigned a value of one. (C) NIH3T3 cells were treated with diluent, 3 ng/ml TGF β 2, 75 nM 9-cisRA or both for 1 h. Phosphorylated Smad2 and β -tubulin were detected using Western blot. To demonstrate relative differences between treatments, pSmad2 normalized to β -tubulin obtained from TGF β 2 treatment was assigned a value of one. Results are one S.E. of the mean. * indicates a *p*-value of .002 between control and TGF β 2 groups. ** Represents a *p*-value of .001 between TGF β 2 and TGF β 2 plus 9-cisRA groups. (D) NIH3T3 cells were treated for 5 min, 1 h, 6 h and 24 h with 3 ng/ml TGF β 2 in the absence (closed circles) or presence (open circles) of 75 nM 9-cisRA and total cellular proteins were subjected to Western blot. Phosphorylated Smad2 levels were normalized to β -tubulin, and further normalized to the one-hour TGF β 2 treatment. One representative time course of three separate experiments is shown.

were isolated from E12.5 embryos generated from timed RXR α +/- matings and maintained as previously described [27]. Embryonic tails were genotyped as described [1]. For dispersed heart cultures, hearts minus atria were dissected from E12.5 embryos. Hearts were placed in 0.05% trypsin EDTA (Gibco) and incubated at 37 °C with gentle trituration every 2 min until minimal intact tissue remained, approximately 6 min total. Dispersed heart media (DMEM+10% rat serum) was added to the mixture at a 1:1 concentration and cells were pelleted via centrifugation (200 \times g for 5 min). Supernatant was removed and pellets were resuspended in 100 μ l of media per heart followed by micromass plating in 35 mm cell culture dishes (Corning). Cultures were maintained at 37 °C, 5% CO₂. Twelve hours later, 900 μ l of media was added to each dish and cells were allowed to incubate for an additional 60 h. For one-hour treatments, 300,000 MEFs or NIH3T3 cells were plated in 35 mm dishes 24 h prior to use. All cells and dispersed hearts were serum starved for 2 h before addition of atRA (Sigma), 9-*cis*-retinoic acid (9-*cis*RA) (Sigma), Bexarotene (Toronto Chemical Company), TGF β 1 and TGF β 2 (R&D). Retinoids were diluted in DMSO (Sigma) and TGF β isoforms were diluted in 4 mM HCl with 0.1% bovine serum albumin (BSA). All “diluent” (i.e. control) treatments received appropriate volumes of DMSO and TGF β diluent. For T β RI kinase inhibition, cells were serum starved prior to addition of SB431542 reconstituted in DMSO. Cells were incubated for 30 min with inhibitor prior to addition of TGF β and retinoids.

2.2. Immunoblotting

Rabbit anti-phosphorylated Smad2 (Ser465/467, cat. #3108), mouse anti-Smad2 (#3103), rabbit anti-phosphorylated Smad2 (Ser245/250/255, #3108), rabbit anti-phosphorylated Smad3 (Ser425/425, #9520) and rabbit anti-Histone H3 (#9175) were obtained from Cell Signaling Technologies; mouse anti- β -tubulin (Accurate Chemical Company) and HRP-conjugated-anti-phosphorylated threonine (Santa Cruz Biotechnology) were used for Western blotting. Total proteins were harvested using a standard RIPA buffer (20 mM Tris pH 7.5, 100 mM NaCl, 0.5% NP-40, 0.5 mM EDTA, 0.5 mM PMSF) containing protease inhibitors (Complete Mini, Roche, Palo Alto, CA) or fractionated with the Ne-Per Cytoplasmic Nuclear Extraction Kit according to manufacturers recommendations (Pierce). Equal volumes were boiled with denaturing loading buffer (200 mM Tris-HCl pH 6.8, 50% Glycerol, 8% SDS, 400 mM DTT, 0.4% Bromophenol Blue) and run on a 10% denaturing polyacrylamide gel for 120 min at 130 V. Membrane protein enrichment for T β RI analysis was accomplished with a two-step RIPA protocol. Briefly, for step one, cells were lysed in RIPA, pelleted via centrifugation and the supernatant was reserved. For step two, the resulting pellet was resuspended in RIPA and subject to constant gentle rocking at 4 °C for 1 h with 10 s of maximum speed vortexing every 10 min. Following centrifugation the supernatants from step one and two were combined and utilized for further assays.

2.3. Immunocytochemistry

Five thousand NIH3T3 cells were seeded into 4-well chamber slides (Lab-Tek) and incubated overnight. Cells were serum starved for 2 h prior to a one-hour treatment with diluent or combinations of 3 ng/ml TGF β 2 and 75 nM 9-*cis*RA. Total Smad2 immunolocalization was performed using total Smad2 antibody (Cell Signaling Technologies # 3122) according to the manufacturer's suggested protocol. Anti-rabbit Alexa Fluor[®] 488 secondary antibody (Invitrogen) was applied at a concentration of 1:100 prior to coverslipping. Photographic documentation was performed with a Leica TCS SP2 AOBs confocal microscope. Relative nuclear Smad2 localization was determined by maintaining constant laser/gain settings throughout microscopic documentation and by counting nuclear pixel density using ImageJ software (freeware).

2.4. Immunoprecipitation of T β RI

Twenty microliters of agarose-conjugated rabbit anti-T β RI (Santa Cruz Biotechnology) was incubated overnight at 4 °C with 500 μ g of membrane-enriched proteins harvested from treated or untreated NIH3T3 cells. Agarose beads plus bait and prey proteins were pelleted, washed four times in RIPA buffer and resuspended in 2 \times denaturing loading buffer. SDS PAGE was performed as described above.

2.5. Luciferase assay

Mink lung epithelial cells (MLEC) stably transfected with a PAI-1-luciferase reporter construct were obtained from Dr. Daniel Rifkin and were maintained as previously described [28]. In 96-well format,

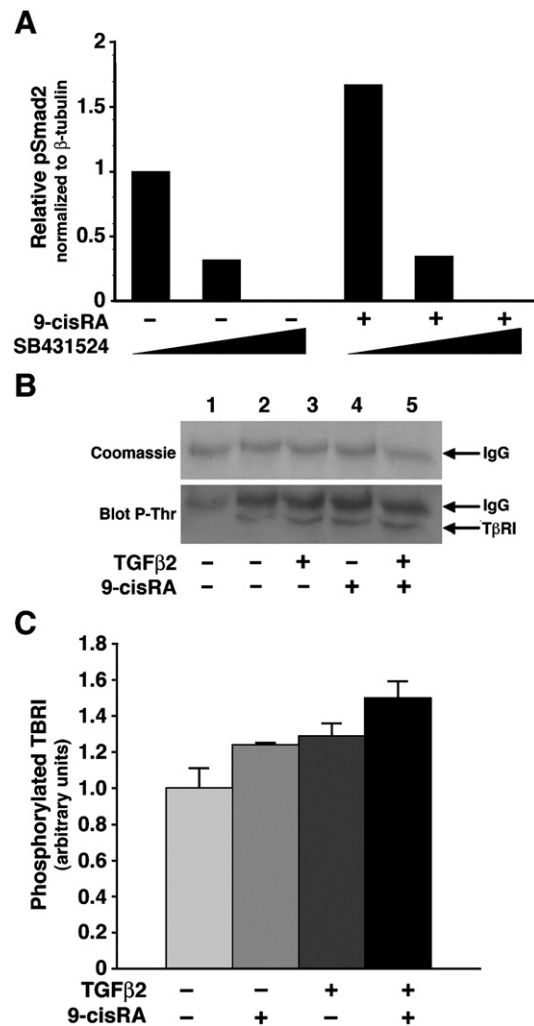


Fig. 2. Phosphorylation of Smad2 SXS motif occurs solely via T β RI during co-treatment with TGF β 2 and 9-*cis*RA. (A) NIH3T3 cells were pretreated for 30 min with 0, 1.0 or 10 μ M of T β RI inhibitor (SB431542) prior to addition of 3 ng/ml TGF β 2 in the absence or presence of 75 nM 9-*cis*RA. Total cellular proteins were subjected to Western blot and pSmad2 levels were normalized to β -tubulin levels using densitometry values obtained from Image J Software. For further normalization, TGF β 2 treatment in the absence of inhibitor was assigned a value of 1. (B) T β RI was immunoprecipitated from membrane fraction enriched proteins of NIH3T3 cells treated with diluent (Lane 2), 3 ng/ml TGF β 2 (Lane 3), 75 nM 9-*cis*RA (Lane 4) or both (Lane 5) for 1 h. Lane 1 shows quiescent NIH3T3 cells that have experienced no media change. Phosphorylation of T β RI was detected using HRP-conjugated anti-phospho-threonine primary antibody (P-Thr). (C) Densitometry values obtained from Image J Software were used to normalize phosphorylated T β RI levels to IgG. Diluent treatment was assigned an arbitrary value of 1.0 and results are shown as one S.E. of the mean.

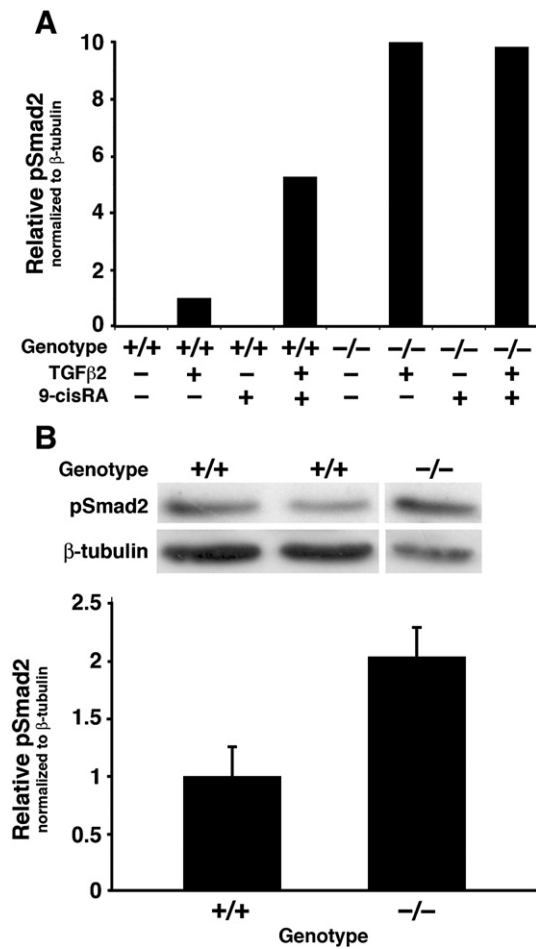


Fig. 3. Loss of RXR α leads to increased TGF β 2 mediated-Smad2 phosphorylation. (A) Wild type (+/+) and RXR α -/- (-/-) MEFs were treated for 1 h with 3 ng/ml TGF β 2, 75 nM 9-cisRA or both. Total cellular proteins were subjected to Western blot analysis and pSmad2 levels were densitometrically normalized to β -tubulin. Treatment of wild type cells with TGF β 2 alone was assigned a value of one for further normalization. (B) Wild type (+/+) and RXR α -/- (-/-) dispersed whole hearts were treated for 1 h with 3 ng/ml TGF β 2. Total cellular proteins were subjected to Western blot analysis and pSmad2 levels were normalized to β -tubulin levels using densitometry values obtained from Image J Software. To demonstrate relative differences between genotypes, normalized pSmad2 levels obtained from treatments of wild type hearts were assigned a mean value of one. Results are shown as one S.E. of the mean.

15,000 cells were plated per well in test media (DMEM+0.1% BSA) 3 h prior to use and treated for either 1 or 7 h with combinations of TGF β (3 ng/ml) and retinoids (75 nM). Following the one-hour treatment, the cells were washed with PBS and incubated for an additional 6 h in test media. Treatments were executed in triplicate and luciferase assay was performed using Bright Glo reagent (Promega) according to the manufacturer's suggested protocol. Luciferase levels were obtained by 30-second well readings on a 96-well format luminometer (Perkin-Elmer).

2.6. Densitometry

Immunoblot band intensities were determined using ImageJ software and pSmad levels were normalized to β -tubulin levels. β -tubulin was utilized as a loading control for densitometry and was considered more appropriate than total Smad2 as dephosphorylated Smad2 undergoes TGF β -activated proteasomal degradation [12]. This degradation occurs rapidly in response to TGF β and can affect the apparent levels of total Smad2 (Supplemental Figure 1 and [12]). β -tubulin levels were not affected by a one-hour treatment with the ligands used in these studies (Supplemental Figure 1).

2.7. Statistics

Parametric or non-parametric statistical tests were performed using SPSS software when appropriate. Statistical significance was assumed at a p -value=.05. For non-quantified experiments, representative data from a minimum of three independent trials are shown.

3. Results

3.1. One-hour co-treatment with TGF β and retinoids enhances pSmad2 accumulation compared to treatment with TGF β alone

While it is known that downstream interactions between TGF β and retinoid signaling pathways exist, it is unknown if they affect each other on an acute timescale. To explore potential acute interactions between TGF β and retinoids we treated NIH3T3, MEFs and dispersed heart cells for 1 h with combinations of TGF β 1 or TGF β 2 and retinoid isoforms of varying receptor affinities [29] and determined the levels of subsequent Smad2 and Smad3 phosphorylation. A one-hour time point was chosen because, as previously reported, a one-hour treatment with TGF β alone results in maximum accumulation of phosphorylated Smad2 from the undetectable levels seen at time zero [12]. Concentration-response studies with varying TGF β 2 concentrations in the absence or presence of 75 nM 9-cisRA resulted in maximum Smad2 phosphorylation at 3 ng/ml TGF β 2 (Fig. 1A). Phosphorylated Smad3 levels were similarly affected as a result of dual treatment (data not shown). Likewise, treatment with varying concentrations of 9-cis- or atRA combined with 3 ng/ml TGF β 2 altered the Smad2 phosphorylation profile in a manner that was

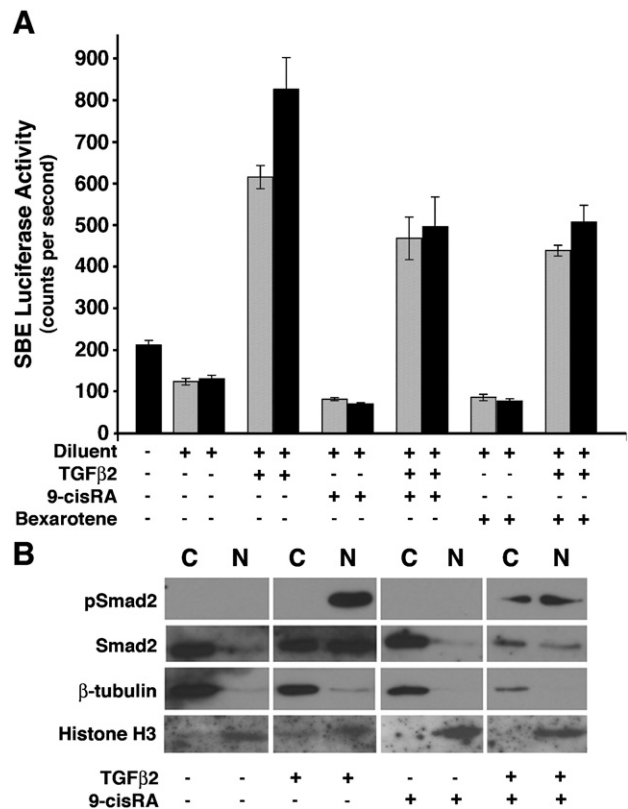


Fig. 4. Retinoid ligands blunt Smad2-nuclear accumulation and transcriptional activity. (A) MLEC cells harboring the PAI-1-luciferase construct were used to infer levels of TGF β -activated receptor Smad-driven transcription in the absence and presence of retinoids. Cells were treated with indicated treatments for one (light bars) or 7 h (dark bars), washed and assayed for luciferase levels 7 h after initiation of treatment. Results show one S.E. of mean. (B) NIH3T3 cells were treated for 1 h with diluent, 3 ng/ml TGF β 2, 75 nM 9-cisRA, or both. Cytoplasmic (C) and nuclear (N) proteins were enriched and subjected to Western blot. Histone H3 and β -tubulin were utilized as nuclear and cytoplasmic loading controls, respectively.

retinoid concentration-dependent (Fig. 1B). At maximally effective concentrations of 9-*cis*- or *atRA* combined with TGF β 2 (3 ng/ml), pSmad2 levels were nearly three fold increased over those seen with TGF β 2 treatment alone (Fig. 1C). A similar Smad2 phosphorylation profile was observed using TGF β 1 in concert with 9-*cis*RA (data not shown). Dual treatment with the RXR specific ligand, Bexarotene, in a concentration range which solely targets RXR resulted in a seven-fold increase in pSmad2 levels over those seen after treating with TGF β 2 alone (Fig. 1B). Additionally, time course experiments showed that TGF β 2 treatment results in a peak level of pSmad2 at one-hour posttreatment followed by a return toward basal levels 24 h later (Fig. 1D). Adding retinoids to the TGF β 2 treatment results in higher levels of pSmad2, which remain elevated at 24-hour posttreatment (Fig. 1D) demonstrating that retinoids not only potentiate the phosphorylation of Smad2 but also affect the dynamics of its dephosphorylation. Lastly, phosphorylation of the Smad2 linker domain was not affected by any combination of TGF β or retinoid treatment (Supplemental Figure 2 and data not shown) demonstrating that this potentiated phosphorylation effect is specific to the SXS motif of Smad2.

3.2. Phosphorylation of Smad2 during dual treatments occurs via T β RI

To begin to investigate the mechanism of the potentiation of Smad2 phosphorylation in the presence of TGF β and retinoids, NIH3T3 cells were pretreated with SB431542, a specific and potent inhibitor of TGF β -induced phosphorylation of Smad2 which acts on T β RI [30]. With inhibitor present, cells were treated for 1 h with TGF β 2 alone or in combination with 9-*cis*RA followed by Western blot analysis of pSmad2 levels. Loss of Smad2 phosphorylation was seen in a SB431542 dose-dependent manner for both TGF β 2 and TGF β 2 plus 9-*cis*RA treated cells (Fig. 2A). These data show that all phosphorylation of Smad2 occurs via action of T β RI regardless of the presence of retinoids and importantly rules out the action of alternate kinases. We next asked if retinoids in the presence of TGF β lead to increased activity of T β RI as assessed by detecting phosphorylation of threonines within T β RI itself. NIH3T3 cells were treated with combinations of 9-*cis*RA and TGF β 2 for 1 h and membrane proteins were extracted. Immunoprecipitation of T β RI was performed followed by Western blot using HRP-conjugated anti-threonine antibodies. In

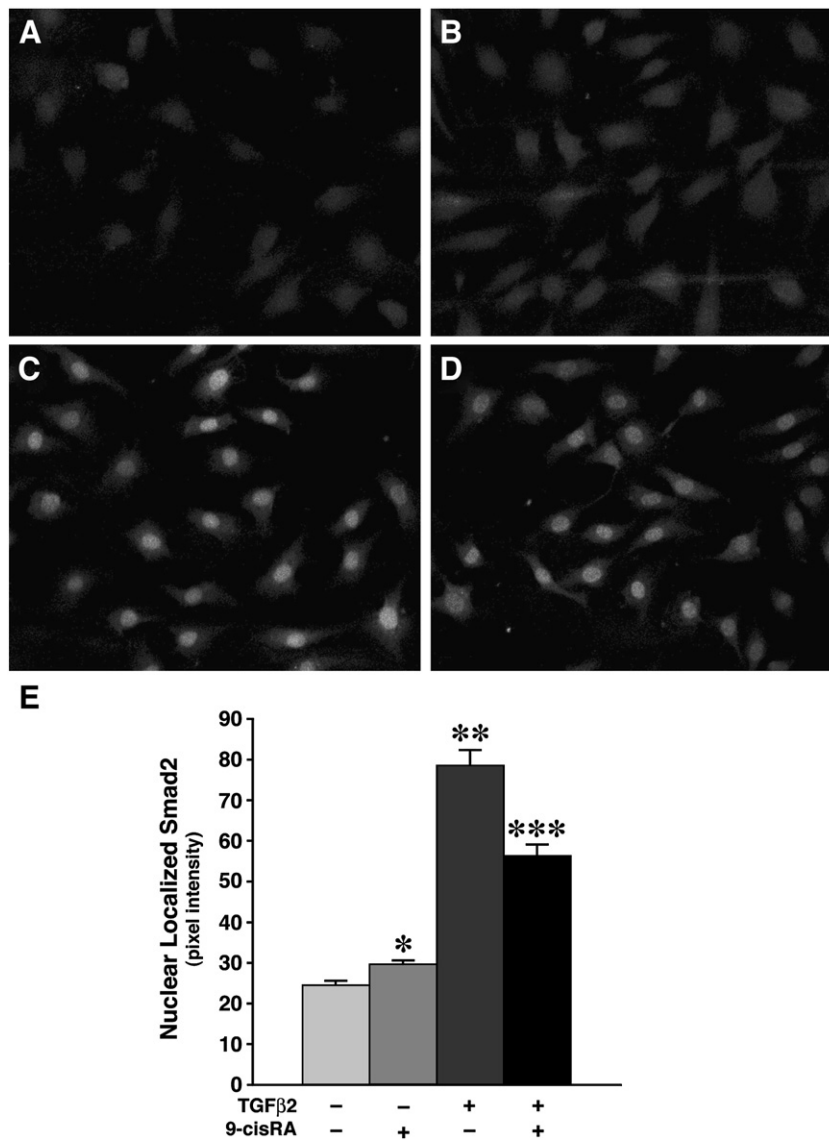


Fig. 5. During TGF β 2 treatment, Smad2 shows less nuclear localization in the presence of retinoids. (A) NIH3T3 cells were treated for 1 h with diluent, (B) 75 nM 9-*cis*RA, (C) 3 ng/ml TGF β 2, and (D) a combination of 3 ng/ml TGF β 2 plus 75 nM 9-*cis*RA. Immunocytochemistry of Smad2 was performed and subcellular localization determined by confocal microscopy. (E) Densitometry of nuclear regions was performed using ImageJ software and average nuclear pixel intensity is shown. Error bars denote one S.E. of the mean. * Represents a *p*-value of 0.001 between RA and diluent. ** Represents a *p*-value of 0.0001 between TGF β 2 and either diluent or RA. *** Represents a *p*-value of 0.0001 between TGF β 2 plus RA and all other treatments.

accordance with the literature [31,32], we found that untreated cells (no media change) show no detectable basal levels of T β RI threonine phosphorylation (Fig. 2B Lane 1) whereas a one-hour treatment with ligands resulted in T β RI phosphorylation (Fig. 2B Lanes 3–5). Phosphorylation in response to TGF β (Lane 3) was increased above that seen for diluent treatment (Lane 2). Densitometric analysis showed that treatment with 9-*cis*RA plus TGF β did not result in statistically significant elevation ($p=.151$) of phospho-threonine levels compared to levels seen with TGF β treatment alone (Fig. 2C) suggesting that increased activity of the type I receptor is not the mechanism by which pSmad2 is elevated during co-treatment with TGF β and retinoids.

Interestingly, our results showed that the act of changing media can result in a detectable level of phosphorylation of the T β RI and though beyond the scope of this study, we suspect that shear fluid stress may play a role in this effect. A 2004 article by Morgera et al., described that adding fluid shear stress in the presence of high glucose media (which is utilized in our experiments) led to a “30% increase in TGF β release compared to glucose stress alone” in a mesothelial cell model [33]. This released TGF β could act in an autocrine manner causing some phosphorylation of the T β RI.

3.3. MEFs and dispersed hearts from RXR α -/- embryos show increased pSmad2 following treatment with TGF β 2 in the absence of added retinoids

In order to determine the potential role of RXR α in TGF β 2-mediated Smad2 phosphorylation, wild type and RXR α -/- MEFs and dispersed heart cells were generated from E12.5 mice. Cells were

treated for 1 h with TGF β 2 in the absence or presence of 9-*cis*RA and pSmad2 levels were detected using Western blot. RXR α -/- MEFs (Fig. 3A) and dispersed hearts (Fig. 3B) showed higher levels of pSmad2 in response to a one-hour TGF β 2 treatment when compared to matched wild type controls. Moreover, when cells were co-treated with 9-*cis*RA and TGF β 2, pSmad2 levels were not elevated beyond that of TGF β 2 alone (Fig. 3A) suggesting that RXR α likely plays a direct role in controlling the levels of TGF β 2-mediated Smad2 phosphorylation in both the absence and presence of added RA.

3.4. Potentiation of Smad phosphorylation secondary to dual treatment does not yield increased receptor Smad-driven transcription

To determine the downstream signaling potential of the increased pSmad2/3 resulting from dual treatment versus that of treating with TGF β alone, we utilized MLEC cells stably transfected with PAI-1-luciferase reporter. We treated equal numbers of cells and assayed for luciferase production 7 h after a one- or seven-hour exposure to TGF β and/or retinoids. A one-hour exposure to TGF β 2 alone followed by a washout and six-hour serum free incubation resulted in similar levels of luciferase production as a seven-hour exposure to TGF β 2 (Fig. 4A). This finding alone demonstrates that the downstream effect of TGF β 2 is determined rapidly, and that continual exposure to ligand is not necessary to yield significant transcriptional changes. Interestingly, at seven-hour posttreatment, the one- and seven-hour dual treatments with TGF β 2 and 9-*cis*RA resulted in less luciferase production than seen after treatment with TGF β 2 alone (Fig. 4A) suggesting that although pSmad2/3 levels are escalated by 1 h after dual treatment, only a fraction of this pSmad pool is positively regulating transcrip-

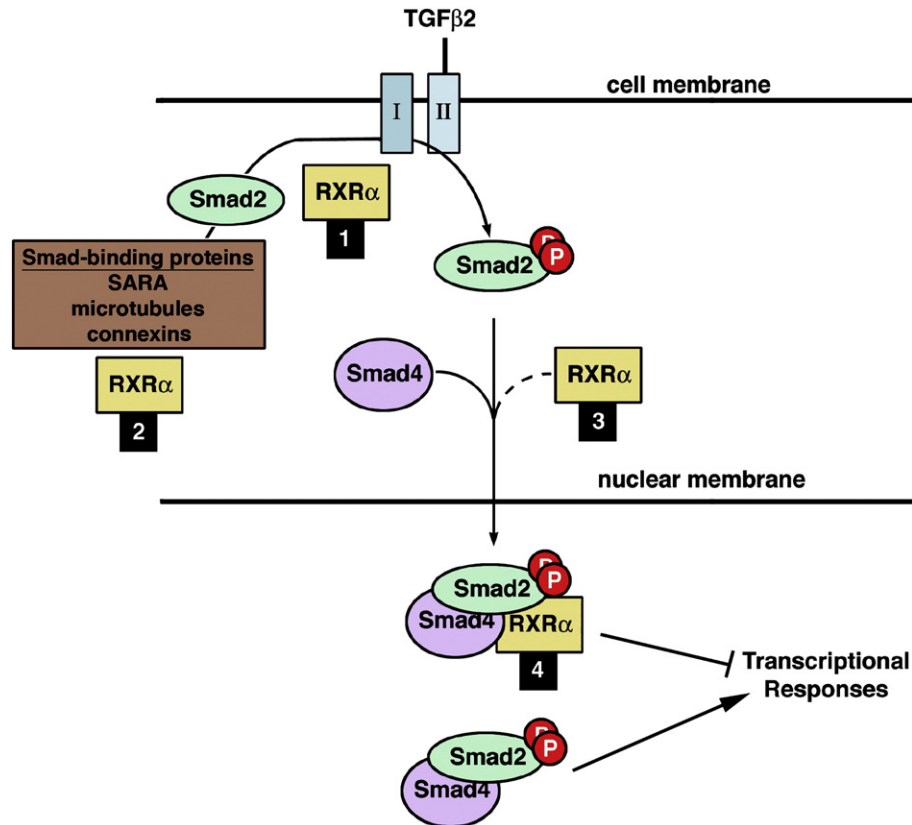


Fig. 6. Schematic of working hypothesis by which retinoid signaling via RXR α may directly regulate Smad phosphorylation and subcellular accumulation. Smad2 is phosphorylated by T β RI upon TGF β exposure. Retinoid receptors can directly bind receptor Smads (Box 1), creating a mechanism by which they may regulate Smad availability to the T β RI. Alternately Smad2 binding partners that are acutely responsive to retinoids may be responsible for the increased level of TGF β -mediated Smad2 phosphorylation seen during dual treatments (Box 2). Smad2 nuclear accumulation is blunted in the presence of retinoids suggesting that cytoplasmically localized retinoid receptors may control Smad2 nuclear uptake (Box 3). Likewise, in the presence of retinoids, receptor Smad-driven transcription is decreased. This effect may be secondary to decreased Smad nuclear accumulation or direct, negative effects of retinoid signaling on Smad-mediated transcription (Box 4).

tion. In order to determine the mechanism by which this occurs, we performed cytoplasmic and nuclear fractionation of NIH3T3 cells that were treated with combinations of retinoids and TGF β (Fig. 4B). Consistent with the above transcription results, in cells treated solely with TGF β , the entire pSmad2 pool shuttles to the nucleus, whereas with dual treatment, a proportion of the pSmad2 remains cytoplasmic. Similarly, we found that immunocytochemistry of dual-treated NIH3T3 cells (Fig. 5D, E) showed significantly less nuclear Smad2 than did cells treated with TGF β 2 alone (Fig. 5C, E). These findings can be explained by the ability of retinoid receptors to bind and sequester Smads [22] and to act as regulators for the nuclear uptake of its binding partners [34].

4. Discussion

Our data show that retinoids in the presence of TGF β can potentiate Smad2/3 phosphorylation and this potentiation is likely not due to transcriptional events as it occurs during a one-hour timeframe. Retinoid ligands alone had no effect on Smad2 phosphorylation (Fig. 1B–C) demonstrating that immediate activation of endogenous local, latent TGF β by retinoids is not contributing to the elevated pSmad2 seen with dual treatment in this system. Further, this work suggests that retinoid signaling controls the availability of Smad2 for phosphorylation by the T β RI as well as nuclear uptake of pSmad2. As it is known that retinoid receptors physically interact with Smads [22] and that unliganded RXR exists both in the cytosol and nucleus [16], we hypothesize that unliganded RXR α sequesters a portion of the total Smad2 pool, preventing it from being phosphorylated by the T β RI in the presence of TGF β (Box 1 Fig. 6). When RXR α is absent from the cytosol (as is the case during 9-*cis*RA treatment which promotes RXR α nuclear translocation [16] or in RXR α -/- MEFs) Smad2 is not sequestered by RXR α and proportionally more Smad2 can be phosphorylated under TGF β stimulation (Fig. 3B). Alternately, acute exposure to retinoids may affect other elements which bind Smad2, such as microtubules, SARA, or connexins [9,35,36] (Box 2 Fig. 6). Reorganization of these elements at or near the T β RI could modify the availability of Smad2 to be phosphorylated. An alternate hypothesis supported by the literature is that liganded RXR heterodimerizes with the vitamin D receptor (VDR) [37] lessening known Smad-VDR interplay thus allowing more Smads to be available for canonical TGF β signaling.

Our data suggest that the increased pSmad2 in dual-treated wild type cells does not escalate downstream pSmad2-mediated events secondary to decreased nuclear accumulation of Smad2 (Box 3 Fig. 6). We employed a Smad binding element reporter assay and showed that a one-hour treatment with TGF β 2 plus 9-*cis*RA results in less Smad2/3-driven transcription than a treatment with TGF β 2 alone. Similar findings were described by Cao et al., albeit after an 18-hour treatment with TGF β and atRA [21]. The mechanism by which retinoid receptors control Smad nuclear accumulation is still unclear however it may be explained by the fact that RXR α , in the presence of ligand, dimerizes with other nuclear receptors and translocates to the nucleus to mediate transcription thus blunting its purported shuttle function (Figs. 4B and 5). As pSmad2 is dephosphorylated in the nucleus [15], decreased nuclear uptake may also explain the sustained elevation of pSmad2 levels observed over a time course with dual treatment (Fig. 1D). Alternately, in dual-treated cells it is possible that RXR α shuttles to the nucleus and binds a portion of the nuclear pSmad2, preventing its transcriptional activities (Box 4 Fig. 6). Co-immunoprecipitation and live cell imaging studies utilizing fluorescently-tagged Smads and retinoid receptors are currently being undertaken to assess the extent of subcellular co-localization of these players during TGF β and retinoic acid treatments.

Interactions between retinoid receptors and Smads have important implications for RXR α null cells. In the RXR α -/- embryo we have noted elevated levels of proteins (i.e. fibronectin) [38] and events (i.e.

apoptosis) [1] that are positively regulated by TGF β . We suspect that in addition to elevated TGF β 2 levels detected in the RXR α -/-, the loss of RXR α -mediated negative regulation of pSmad2 driven transcription is responsible for the upregulation of events downstream of TGF β signaling and possibly many of the developmental defects seen in this mouse.

To determine the effects of Smad2 dosage in vivo, crosses between RXR α +/- and Smad2+/- mice are currently being performed. As decreased dosage of TGF β 2 results in a partial rescue of the cardiac phenotype seen in the RXR α -/- [1], we hypothesize that Smad2 heterozygosity will show a similar effect on the RXR α knockout mouse if TGF β 's effects are Smad-dependent. As TGF β can signal through Smad-independent pathways, it is important to determine the role of canonical signaling during cardiac development. It is clear that retinoids can influence canonical TGF β signaling on a long-term timescale dependent on transcriptional events and this study demonstrates that retinoids directly regulate Smad activity on a truncated timescale independent of retinoid-mediated transcription. This effect may be particularly relevant to the rapid growth and remodeling required by the developing embryo. Our observations contribute to the growing list of known interactions between retinoid and TGF β signaling and future studies will lead us to a better understanding of such crosstalk.

Acknowledgements

The authors would like to thank Dr. Rifkin for generously providing the stably transfected MLEC line and Mr. Jarrett Walsh for helpful discussions regarding this work. This work was supported by NIH Grant Number C06 RR018823 and C06 RR015455 from the Extramural Research Facilities Program of the National Center for Research Resources, NIH T32 HL07260 (LLH) and NIH/NHLBI R01 HL83116 (SWK).

Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at doi:10.1016/j.bbamcr.2008.07.028.

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