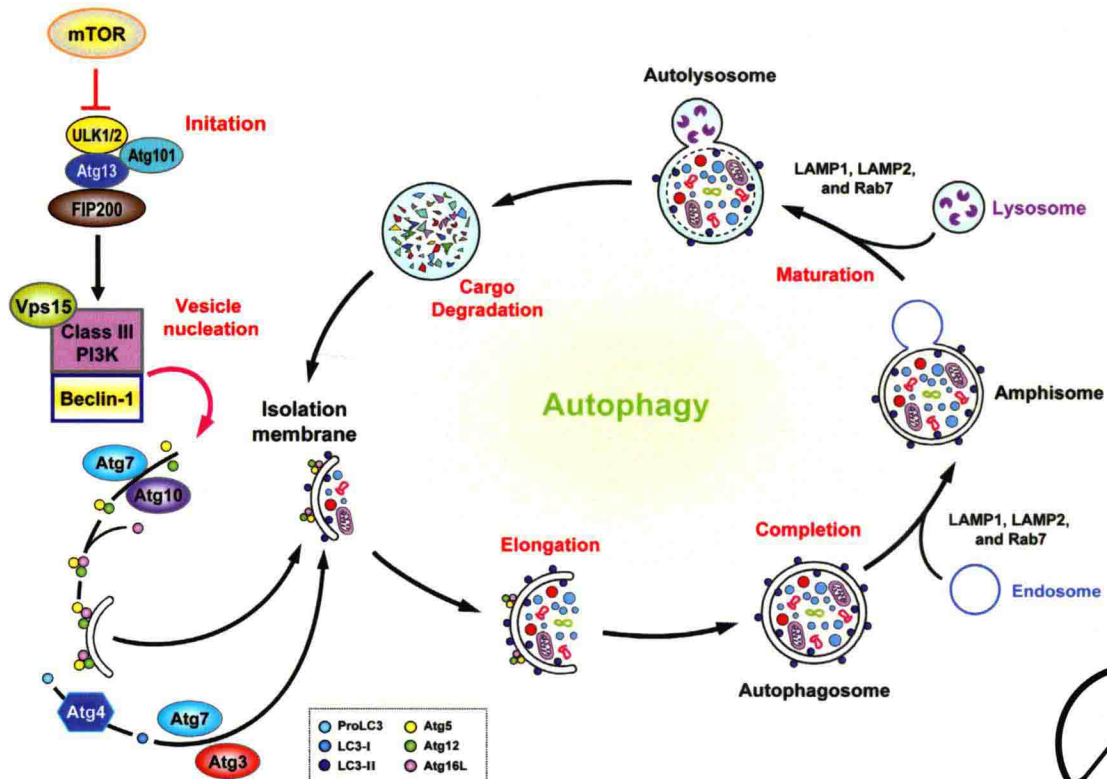


# AUTOPHAGY

CANCER, OTHER PATHOLOGIES,  
INFLAMMATION, IMMUNITY,  
INFECTION, AND AGING

VOLUME 2

EDITED BY  
M. A. HAYAT



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## VOLUME 2

*Edited by*

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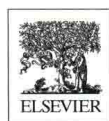
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# AUTOPHAGY

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# Dedication

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To

Julio A. Aguirre-Ghiso, Patrice Codogno, Eduardo Couve, Ana Maria Cuervo,  
Guido R. Y. De Meyer, Vojo Deretic, Fred J. Dice, William A. Dunn Jr, Eeva-Lisa  
Eskelinen, Sharon Gorski, Tomotake Kanki, Daniel J. Klionsky, Guido Kroemer,  
Beth Levine, Noboru Mizushima, Yoshinori Ohsumi, Brinda Ravikumar,  
David Rubinsztein, Isei Tanida, Sharon A. Tooze, Herbert W. Virgin, Eileen White,  
Tamotsu Yoshimori, and others.

The men and women involved in the odyssey of deciphering the molecular  
mechanisms underlying the complexity of the autophagy process that  
governs our lives.

Life in the Balance, Longevity the Goal  
Self-eating, recycling, cash-for-your clunkers:  
Trade up to the mitochondrial equivalent Prius.  
The road to rejuvenation is paved with destruction  
For clearing the rubble precedes reconstruction  
But remember that life's circular dance  
Depends on opposite forces in balance  
Excess destruction, too much biogenesis,  
Brings heart failure, cancer or neurodegeneris

*Roberta A. Gottlieb*



# Preface

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The ultimate goal of research in the field of autophagy is to decipher the molecular mechanisms underlying the exceedingly complex autophagic process and use them for the development of effective therapy against diseases. This goal becomes urgent considering that presently available treatments (chemotherapy, radiation, surgery, and hormone therapy) for major diseases such as cancer are only modestly successful. During the past two decades an astonishing advance has been made in the understanding of the molecular mechanisms involved in the degradation of intracellular proteins in yeast vacuoles and the lysosomal compartment in mammalian cells. Advances in genome-scale approaches and computational tools have presented opportunities to explore the broader context in which autophagy is regulated at the systems level.

This is Volume 2 of the four-volume series, *Autophagy: Cancer, Other Pathologies, Inflammation, Immunity, Infection, and Aging*, which will discuss almost all aspects of the autophagy process. The text is divided into four subheadings (Proteins, Pathogens, Immunity, and General Diseases) for the convenience of the reader. The contents of the volume are summarized below. The introductory chapter contains brief summaries of the large number of autophagic functions, including their roles in disease and health, especially with regard to both oncogenic and tumor-suppressive roles during tumor and cancer development. Autophagy protects us not only from cancer but also the development of other diseases, which are discussed here.

Atg5 and Atg7 are essential molecules for inducing autophagy. However, cells lacking these proteins can also form autophagosome/autolysosomes, and carry out autophagy-mediated protein degradation under certain stress conditions. Thus, mammalian macroautophagy (autophagy) can occur via at least two different pathways: the Atg5/Atg7-dependent conventional pathway and the Atg5/Atg7-independent pathway. Lipidation of LC3 does not occur during the latter pathway, and this pathway can compensate for the lack of Atg5-dependent autophagy in embryonic mutant mice. Molecular mechanisms underlying these two pathways are described. Some proteins (e.g., acyl coenzyme A binding protein) are secreted independently of the canonical ER–Golgi pathway. The role of autophagy and the Golgi-associated protein GRASP in the secretion of such proteins is explained.

Atg5 protein expression in T lymphocytes has been implicated in human diseases. For example, high Atg5 expression in peripheral T lymphocytes correlates with multiple sclerosis. For determining the mechanisms responsible for these diseases, the role of Atg5 protein is discussed. This gene is critical for T lymphocyte development, survival, and function. Autophagy is critical for promoting T lymphocyte survival by regulating intracellular organelle homeostasis.

A novel function of autophagy involves the differentiation of monocytes (a type of leukocyte) into macrophages (actively phagocytic cells). The stimuli that promote this

differentiation prevent apoptosis of monocytes. This differentiation is important because macrophages regulate the innate immune response in chronic inflammation. The activation of JNK during monocyte differentiation triggers cell survival by the induction of autophagy.

Lysosomes and their hydrolases (e.g., cathepsin) play a critical role in autophagy and subsequent cancer progression. Inhibition of cathepsins leads to the accumulation of autophagic vacuoles and impairment of the ability of cells to use degraded cell materials to restore homeostasis. The implication is that increased lysosomal biogenesis and proteolytic activity facilitate the promotion of invasive growth. It is known that autophagy is involved in resisting anticancer treatments (chemotherapy, radiotherapy). It is also known that cancer cells with long-term autophagy deficiency can evade the dependence on autophagy in order to survive. Although autophagy regulation is a promising addition to cancer therapy, caution is warranted in using this strategy in clinical practice. It is known that functional inactivation of UV irradiation resistance associated gene (UVRAG) is implicated in cancer. However, recent studies have indicated that this gene is also involved in monitoring endocytic membrane trafficking, maintaining chromosomal stability, and regulating apoptosis during chemotherapy and radiotherapy. Autophagy is required for the ability of UVRAG to suppress tumor progression. These and other functions of this gene are elaborated in this volume.

Primary biliary cirrhosis is an organ-specific autoimmune disease that may lead to liver failure. Autophagy, deregulated autophagy, and cellular senescence are involved in bile duct lesions in this disorder. Accumulation of LC3-positive autophagic vesicles and aggregation of p62 (a marker of deregulated autophagy) are present in damaged small bile ducts in the patients. It is known that acute alcohol consumption induces hepatic steatosis (fatty degeneration) that can evolve into steatohepatitis, which is characterized by necroinflammation and fibrosis. That acute alcohol use elevates CYP2E1, oxidative stress, and activation of JNK, which interact to reduce autophagy, resulting in fatty liver, is pointed out in this volume.

Persistent pulmonary hypertension (PPHN) of the newborn has a high mortality rate. Inadequate pulmonary artery relaxation and decreased blood vessel density in the lungs are the cause of this disorder. A cross-talk between autophagy and NADH oxidase activity in the developing lungs with PPHN plays an important role in regulating angiogenesis.

This volume presents protective and detrimental functions of autophagy in the heart. Although basal levels of autophagy are required for cardiomyocyte survival, dysregulation of autophagy is linked to a change in susceptibility to cell death. Sepsis is one of the leading causes of death worldwide, and is the most common precipitant of organ dysfunction. However, if the septic insult has passed, organs have the potential to regain function. Sepsis represents a hibernating state of the cell to protect it from apoptosis and death. Autophagy plays an essential role in protection against organ injury and prevention of cell death, enabling eventual recovery in survivors. The protective role of autophagy in liver and kidney injury is well known. Obesity (presence of excessive total body fat) contributes to susceptibility to many health disorders, including insulin resistance, hypertension, diabetes, and cardiac anomalies. The autophagy-lysosome pathway is essential for maintaining cardiomyocytes under physiological conditions as well as in metabolic syndrome. Although correlation of obesity and cardiac anomalies is controversial, it is explained here that the autophagic flux is disrupted in the murine heart under obesity. Cardiac autophagy is important in maintaining cardiac homeostasis under obesity.



Parkinson's disease is pathologically characterized by the presence of cytoplasmic inclusions such as Lewy bodies. The formation of these bodies is related to protein degradation systems (ubiquitin–proteasome and autophagy–lysosome). An alteration of these systems results in neurodegeneration and formation of these bodies. The autophagic process is impaired through alteration of the autophagosomal components in Lewy body disease.

Huntington's disorder is a fatal hereditary disease caused by an expansion of polyglutamine secretion in the huntingtin protein. The hallmark of this disease is accumulation of this mutant protein, especially of its N-terminal fragments. No effective treatment for these patients is available, despite enormous efforts. The best approach is to decrease the intracellular levels of this mutant protein without affecting the normal levels of the proteins.

Infectious diseases are a major health problem, especially in developing countries. Approximately 1400 agents of infectious diseases have been identified. An important function of autophagy is defense of the host cell against the pathogen. The host cell reacts to pathogen entry and induces autophagy. For example, CD36 is a widely expressed transmembrane protein that is recognized by several human pathogens (e.g., measles virus, streptococcus) which use this surface protein as the entry receptor. Following pathogen entry, autophagy degrades the pathogen by targeting bacteria to autophagosomes. Autophagy, similarly, can control *Mycobacterium tuberculosis* and *Listeria monocytogenes* infection. It is explained that CD46-mediated autophagy is involved in the degradation of pathogens.

Intracellular parasitic protists are known to manipulate host cell autophagy to establish or maintain infection within a host. Several different parasitic protists (e.g., *Toxoplasma*) are discussed in this volume, especially functions of autophagy proteins in these parasites. Tuberculosis is the major threat for humans, and understanding the strategies employed by *Mycobacterium tuberculosis* to evade cell defense is a challenge. Virulent bacteria unregulate interleukin-6 that interferes with IFN- $\gamma$ -induced signals, resulting in the inhibition of autophagy formation. Interleukin-6 lowers the Atg 12–Atg5 complex, which leads to inhibition of autophagosome biogenesis rather than autophagolysosome formation. On the other hand, autophagy and apoptosis of the host cell combat this invading pathogen.

*Helicobacter pylori* is a major cause of gastric pathologies, including peptic ulcer disease and gastric cancer. Infection involves modulation of the host environment by bacterial virulence factors (vacuolating A), which facilitates the formation of an intracellular survival niche in gastric cells, increasing the disease severity. This factor triggers autophagy that can decrease levels of vacuolating A and limit bacterial survival. However, prolonged exposure to this factor disrupts autophagy by disarming the pathway of the degradative enzyme cathepsin D.

Although alveolar macrophages present defense of the lung against infection by pathogens, *Mycobacterium tuberculosis* can proliferate in these macrophages by inhibiting phagolysosome biogenesis. Host defense mechanisms use autophagy to control the proliferation of intracellular pathogens. Intracellular pathogen invasion triggers autophagy induction. For example, alveolar macrophages also present defense of the lung against infection by pathogens, including *Mycobacterium tuberculosis*. On the other hand, several types of intracellular bacteria evade the elimination induced by the autophagic process. It is explained that inhibition of Cronin-1a (an actin-binding protein) facilitates the formation of autophagosomes around bacterial phagosomes. In other words, this protein inhibits autophagosome formation to this bacterium, allowing bacterial survival in alveolar macrophages.

Autophagy is recognized as an innate mechanism that degrades intracellular pathogens into autolysosomes. However, some types of viruses can evade, subvert, or exploit the autophagy to promote their growth, establish infection, and increase their pathogenicity; hepatitis C virus is a member of this group of viruses. The status of unfolded protein response and autophagy signaling on the regulation of innate immunity and hepatitis C virus replication are discussed. Some enveloped viruses induce autophagy through membrane fusion at the entry step of their life cycle. This fusion occurs between the virus membrane of the infected cell and the membrane of the uninfected target cell, triggering the autophagy in CD4 T lymphocytes that leads to their apoptosis responsible for the development of AIDS. This mechanism of killing specially the uninfected T lymphocytes through membrane fusion is explained in this volume.

By bringing together a large number of experts (oncologists, neurosurgeons, physicians, research scientists, and pathologists) in the field of autophagy, it is my hope that substantial progress will be made against the terrible diseases inflicting humans. It is difficult for a single author to discuss, effectively and comprehensively, various aspects of an exceedingly complex process such as autophagy. Another advantage of involving more than one author is to present different points of view on a specific controversial aspect of the role of autophagy in health and disease. I hope these goals will be fulfilled in this and other volumes of the series.

This volume was written by 65 contributors representing 10 countries. I am grateful to them for their promptness in accepting my suggestions. Their practical experience highlights the very high quality of their writings, which should build and further the endeavors of the readers in this important medical field. I respect and appreciate the hard work and exceptional insight into the autophagy machinery provided by these contributors.

It is my hope that subsequent volumes of the series will join this volume in assisting in the more complete understanding of the complex process of autophagy, and eventually in the development of therapeutic applications. There exists a tremendous and urgent demand by the public and the scientific community to address to treatments of major diseases. In the light of existing disease calamities, government funding must give priority to eradicating deadly malignancies over global military superiority.

I am grateful to Dr Dawood Farahi and Mr Philip Connelly for recognizing the importance of medical research and publishing through an institution of higher education. I am thankful to my students for their contribution to the preparation of this volume.

*M.A. Hayat*  
April 2013



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# Abbreviations and Glossary

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1AP	inhibitor of apoptosis protein
3-MA	3-methyladenine, an autophagy inhibitor
3-methyladenine	an autophagic inhibitor
5-FU	5 fluorouracil
AAP	protein that mediates selective autophagy
ACF	aberrant crypt foci
aggrephagy	degradation of ubiquitinated protein aggregates
aggresome	inclusion body where misfolded proteins are confined and degraded by autophagy
AIF	apoptosis-inducing factor
AIM	Atg8-family interacting motif
Akt	protein kinase B; regulates autophagy
Alfy	autophagy-linked FYVE protein
ALIS	aggresome-like induced structures
ALR	autophagic lysosome reformation
AMBRA-1	activating molecule in Beclin 1-regulated autophagy
AMP	adenosine monophosphate
amphisome	intermediate compartment formed by fusing an autophagosome with an endosome
AMPK	adenosine monophosphate-activated protein kinase
aPKC	atypical protein kinase C
APMA	autophagic macrophage activation
apoptosis	programmed cell death type 1
ARD1	arrest-defective protein 1
ASK	apoptosis signal regulating kinase
AT1	Atg8-interacting protein
ATF5	activating transcription factor 5
ATF6	activating transcription factor 6
Atg	autophagy-related gene or protein
Atg1	serine/threonine protein 1 kinase
Atg2	protein that functions along with Atg18
Atg3	ubiquitin conjugating enzyme analogue
Atg4	cysteine protease
Atg5	protein containing ubiquitin folds
Atg6	component of the class III PtdIns 3-kinase complex
Atg7	ubiquitin activating enzyme homologue
Atg8	ubiquitin-like protein

Atg9	transmembrane protein
Atg10	ubiquitin conjugating enzyme analogue
Atg11	fungus scaffold protein
Atg12	ubiquitin-like protein
Atg13	component of the Atg1 complex
Atg14	component of the class III PtdIns 3-kinase complex
Atg15	vacuolar protein
Atg16	component of the Atg12-Atg5-Atg16 complex
Atg17	yeast protein
Atg18	protein that binds to PtdIns
Atg19	receptor for the Cvt pathway
Atg20	PtdIns P binding protein
Atg21	PtdIns P binding protein
Atg22	vacuolar amino acid permease
Atg23	yeast protein
Atg24	PtdIns binding protein
Atg25	coiled-coil protein
Atg26	sterol glucosyltransferase
Atg27	integral membrane protein
Atg28	coiled-coil protein
Atg29	protein in fungi
Atg30	protein required for recognizing peroxisomes
Atg31	protein in fungi
Atg32	mitochondrial outer membrane protein
Atg33	mitochondrial outer membrane protein
Atg101	Atg13-binding protein
ATM	ataxia-telangiectasia mutated protein
autolysosome protein	lysosomal associated membrane protein 2
autolysosome	formed by fusion of the autophagosome and lysosome, degrading the engulfed cell components
autophagic body	the inner membrane-bound structure of the autophagosome
autophagic flux	the rate of cargo delivery to lysosomes through autophagy
autophagosome	double-membrane vesicle that engulfs cytoplasmic contents for delivery to the lysosome
autophagosome maturation	events occurring post-autophagosome closure followed by delivery of the cargo to lysosomes
autophagy	programmed cell death type 2
AV	autophagic vacuole
axonopathy	degradation of axons in neurodegeneration
BAD	Bcl-2 associated death promoter protein
Bafilomycin	inhibitor of the vacuolar-type ATPase
Bafilomycin A1(BAF-A1)	an autophagy inhibitor
BAG	Bcl-2-associated athanogene
BAG3	Bcl-2-associated athanogene 3
BAK	Bcl-2 antagonist/killer

<b>Barkor</b>	Beclin 1-associated autophagy-related key regulator
<b>BATS</b>	Barkor/Atg14(L) autophagosome targeting sequence
<b>BAX</b>	Bcl-2-associated X protein
<b>Bcl-2</b>	B cell lymphoma-2
<b>Beclin 1</b>	mammalian homologue of yeast Atg6, activating macroautophagy
<b>Beclin 1</b>	Bcl-2-interacting protein 1
<b>BH3</b>	Bcl-2 homology domain-3
<b>BH3-only proteins</b>	induce macroautophagy
<b>BHMT</b>	betaine homocysteine methyltransferase protein found in the mammalian autophagosome (metabolic enzyme)
<b>BID</b>	BH3-interacting domain death agonist
<b>Bif-1 protein</b>	interacts with Beclin 1, required for macroautophagy
<b>Bim</b>	Bcl-2 interacting mediator
<b>BNIP</b>	pro-apoptotic protein
<b>BNIP3 protein</b>	required for the HIF-1-dependent induction of macroautophagy
<b>bortezomib</b>	selective proteasome inhibitor
<b>CaMKK<math>\beta</math> protein</b>	activates AMPK at increased cytosolic calcium concentration
<b>CaMK</b>	calcium/calmodulin-dependent protein kinase
<b>CASA</b>	chaperone-assisted selective autophagy
<b>caspase</b>	cysteine aspartic acid specific protease
<b>CCI-779</b>	rapamycin ester that induces macroautophagy
<b>CD46 glycoprotein</b>	mediates an immune response to invasive pathogens
<b>chloroquine</b>	an autophagy inhibitor which inhibits fusion between autophagosomes and lysosomes
<b>c-Jun</b>	mammalian transcription factor that inhibits starvation-induced macroautophagy
<b>Clg 1</b>	a yeast cyclin-like protein that induces macroautophagy
<b>CMA</b>	chaperone-mediated autophagy
<b>COG</b>	functions in the fusion of vesicles within the Golgi complex
<b>COP1</b>	coat protein complex 1
<b>CP</b>	20S core particle
<b>CRD</b>	cysteine-rich domain
<b>CSC</b>	cancer stem cell
<b>CTGF</b>	connective tissue growth factor
<b>Cvt</b>	cytoplasm-to-vacuole targeting
<b>DAMP</b>	damage-associated molecular pattern molecule/danger-associated molecular pattern molecule
<b>DAPI</b>	death-associated protein 1
<b>DAPK</b>	death-associated protein kinase
<b>DAPK1</b>	death-associated protein kinase 1
<b>DDR</b>	DNA damage response
<b>DEPTOR</b>	DEP domain containing mTOR-interacting protein
<b>DFCP1</b>	a PtdIns (3) P-binding protein

<b>DISC</b>	death-inducing signaling complex
<b>DMV</b>	double-membrane vesicle
<b>DOR</b>	diabetes and obesity-regulated gene
<b>DRAM</b>	damage-regulated autophagy modulator
<b>DRAM-1</b>	damage-regulated autophagy modulator 1 induces autophagy in a p53-dependent manner.
<b>DRC</b>	desmin-related cardiomyopathy
<b>DRiP</b>	defective ribosomal protein
<b>DRP1</b>	dynamin related protein 1
<b>DUB</b>	deubiquitinases that accumulate proteins into aggresomes
<b>E2F1</b>	a mammalian transcription factor
<b>efferocytosis</b>	phagocytosis of apoptotic cells
<b>EGFR</b>	epidermal growth factor receptor
<b>EIF2<math>\alpha</math></b>	eukaryotic initiation factor 2 alpha kinase
<b>endosomes</b>	early compartments fuse with autophagosomes to generate amphisomes
<b>ERAA</b>	endoplasmic reticulum-activated autophagy
<b>ERAD</b>	endoplasmic reticulum-associated degradation pathway
<b>ERK</b>	extracellular signal regulated kinase
<b>ERK1/2</b>	extracellular signal regulated kinase 1/2
<b>ERT</b>	enzyme replacement therapy
<b>ESCRT</b>	endosomal sorting complex required for transport
<b>everolimus</b>	mTOR inhibitor
<b>FADD</b>	Fas-associated death domain
<b>FKBP12</b>	FK506-binding protein 12
<b>FoxO3</b>	Forkhead box O transcription factor 3
<b>FYCO1</b>	FYVE and coiled-coil domain containing 1
<b>GAA</b>	acid $\alpha$ -glucosidase
<b>GABARAP</b>	gamma-aminobutyric acid receptor-associated protein
<b>GAS</b>	group A streptococcus
<b>GATE-16</b>	Golgi-associated ATPase enhancer of 16 kDa
<b>GFP</b>	green fluorescent protein
<b>glycophagy</b>	degradation of glycogen particles
<b>GPCR</b>	G protein-coupled receptor
<b>GSK-3<math>\beta</math></b>	glycogen synthase kinase 3 beta; regulates macroautophagy
<b>GST-BHMT</b>	BHMT fusion protein used to assay macroautophagy in mammalian cells
<b>HAV</b>	heavy autophagic vacuole
<b>HCV</b>	hepatitis C virus
<b>HDAC</b>	histone deacetylase
<b>HDAC6</b>	histone deacetylase 6
<b>HIF</b>	hypoxia-inducible factor
<b>HIF1</b>	hypoxia-inducible factor 1
<b>HMGB1</b>	high mobility group box 1
<b>HR-PCD</b>	hypersensitive response programmed cell death