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阿尔茨海默病患者红细胞膜蛋白表达的变化 *

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摘要 目的:探讨早发性和迟发性阿尔茨海默病(AD)患者红细胞(RBC)膜蛋白表达的变化。**方法:**选取2016年1月至2018年1月经青海省人民医院确诊为AD的患者40例,根据年龄将AD患者分为迟发性AD患者(年龄≥65岁)23例和早发性AD患者(年龄65岁)17例。选取同期同医院19名年龄≥65岁的健康体检者为迟发性AD对照组,16名年龄65岁的健康体检者为早发性AD对照组。采用流式细胞术检测全血样本中葡萄糖转运蛋白1(glucose transporter1, Glut1)、三磷酸腺苷结合盒转运蛋白A1(ATP-binding cassette transporter A1, ABCA1)、三磷酸腺苷结合盒超家族G成员2(ATP-binding cassette super-family G member 2, ABCG2)和三磷酸腺苷结合盒超家族B成员6(ATP-binding cassette sub-family B member 6, ABCB6)等转运蛋白以及胰岛素受体(insulin receptor, INSR)、质膜钙泵(plasma membrane Ca²⁺ ATPase, PMCA)等这些RBC膜蛋白的表达。**结果:**与同年龄段健康体检者对比,早发性AD患者RBC膜Glut1和INSR的表达水平显著增加(P 均<0.05),而ABCA1、ABCG2、PMCA和ABCB6表达无显著差异。与同年龄段健康体检者对比,迟发性AD患者RBC膜Glut1、INSR、ABCA1和ABCG2的表达显著增加(P 均<0.05),而PMCA和ABCB6表达无显著差异。**结论:**RBC膜Glut1、INSR、ABCA1和ABCG2蛋白表达的检测可能可作为AD病程诊断的新的参考标记物。

关键词:阿尔茨海默病;红细胞;膜蛋白

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Changes of Membrane Protein Expression of Red Blood Cells in the Alzheimer's Disease Patients*

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ABSTRACT Objective: To investigate the changes of membrane protein expression of red blood cell (RBC) in patients with early-onset and late-onset Alzheimer's disease (AD). **Methods:** 40 patients with AD were enrolled and diagnosed by Qinghai People's Hospital from January 2016 to January 2018. According to age, AD patients were divided into 23 patients with late-onset AD (age≥65) and 17 patients with early-onset AD (age 65). 19 healthy subjects (age≥65) were selected as the late-onset AD control group, 16 healthy subjects (age 65) were selected as early-onset AD control group in the same time and hospital. Expressions of RBC membrane proteins, such as glucose transporter1(Glut1), ATP-binding cassette transporter A1(ABCA1), ATP-binding cassette super-family G member 2(ABCG2), ATP-binding cassette sub-family B member 6(ABCB6), insulin receptor (INSR), and plasma membrane Ca²⁺ ATPase (PMCA), were detected by flow cytometry in whole blood samples. **Results:** Compared with healthy subjects of the same age, expressions of Glut1 and INSR were significantly increased in RBC membrane of patients with early-onset AD (all P <0.05), while expressions of ABCA1, ABCG2, PMCA and ABCB6 had no significant differences. Compared with healthy subjects of the same age, expressions of Glut1, INSR, ABCA1 and ABCG2 were significantly increased in RBC membrane of patients with late-onset AD (all P <0.05), while there was no significant difference in the expressions of PMCA and ABCB6. **Conclusions:** Detection of expressions of Glut1, INSR, ABCA1 and ABCG2 protein in RBC membrane may serve as new reference markers for the diagnosis of AD disease.

Key words: Alzheimer's disease; Erythrocyte; Membrane protein

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前言

阿尔茨海默病(AD)影响全球超过 4000 万人,主要表现为进行性痴呆,目前没有可靠的治疗方法或调节治疗方法,且没有早期诊断方法明确 AD 的进展^[1,2]。目前用于该病的生物标志物主要包括脑脊液 tau 蛋白和淀粉样蛋白的测定,而核磁共振成像 (Magnetic Resonance Imaging, MRI) 和其他成像方法具有副作用、耗时、以及昂贵等不便因素^[3,4]。因此,探索用于预测 AD 的发生、确定病情的进展情况、以及指导改善或预防性治疗效果的新生物标志物是有必要的。

人红细胞(RBC)膜蛋白作为生物标志物可为 AD 的诊断提供新的可能性。RBC 膜蛋白的表达和功能可作为多种疾病的生物标志物^[5,6]。例如,在多种复杂的代谢条件下,RBC 肾上腺素受体激活及相关三磷酸腺苷释放^[7]、钠 - 锂逆向转运^[8]、葡萄糖转运^[9]和胰岛素受体表达^[10]的改变等过程与疾病的敏感性、治疗结局及并发症等有密切关系^[11-13]。本研究主要分析和比较了早发性和迟发性 AD 患者全血样本中几种红细胞膜蛋白表达的变化。

1 对象与方法

1.1 实验对象

选取 2016 年 1 月至 2018 年 1 月经青海省人民医院确诊为 AD 的患者 40 例,AD 患者诊断的初步检验包括:个人和家庭病史评估、通过心理测试评估神经和精神状态。经初步检验,认为患者存在认知障碍可疑,对这些可疑患者进行临床诊断,诊断标准严格遵循 1984 年 Mckhann 等编制的美国国立精神病、语言机能障碍和卒中研究所及阿尔茨海默病和相关疾病协会(NINCDS-ADRDA) AD 诊断标准^[14,15]。采用 AD 评估量表 -

认知部分(AD Assessment Scale-cognition, ADAS-cog)、简易精神状态检查(Mini-Mental State Examination, MMSE)和时钟绘图实验(Clock Drawing Test, CDT)评估 AD 患者的认知。根据年龄将 AD 患者分为迟发性 AD 患者(年龄 ≥ 65 岁)23 例和早发性 AD 患者(年龄 65 岁)17 例。所有患者均知情同意。选择 35 名同期同医院的健康体检者为对照组,其中 19 名年龄 ≥ 65 岁的健康体检者为迟发性 AD 对照组,16 名年龄 65 岁的健康体检者为早发性 AD 对照组。根据体检者病史及影像学等临床检查排除中枢神经系统感染性、血管性病变以及正常脑压性脑积水、抑郁症等能引起认知障碍的精神和神经系统疾病。

1.2 流式细胞术分析

从青海省人民医院获取所有检测者的全血样本,血样储存于乙二胺四乙酸(Ethylene Diamine Tetraacetic Acid, EDTA)管中,4℃运输至青海省血液中心进行流式细胞仪分析。实验方法参照 Palaswan 等人的研究^[16,17]。简言之,用含有 1% 多聚甲醛的磷酸盐缓冲液(Phosphate Buffer solution, PBS)将 50 L 人全血样本稀释至 4 mL,37℃ 固定 5 min。 $1000 \times g$ 离心 5 min, 弃去上清液, 将沉淀重悬于 150 L PBS 溶液中, 加入 1 g/mL WGA-Alexa Fluor-647 和一抗,37℃ 染色 40 min。一抗的名称及使用浓度见表 1。PBS 洗 2 次,加二抗,二抗为藻红蛋白标记的山羊抗人二抗(Goat F(ab')2 Anti-Human IgG-Fc (PE), 稀释倍数为 1:100),二抗购自英国 Abcam 公司。4℃ 放置 30 min。PBS 洗 1 次,加入 0.5 mL PBS,过滤网上机。IgG2 为同型对照。根据前向散射(forward scattering, FSC)和侧向散射(lateral scattering, SSC)参数分离 RBC。测量 3 次,取平均值。相对抗体表达用一抗和二抗检测的平均荧光值除以用同型对照和二抗检测的平均荧光值来表示。

表 1 抗体信息

Table 1 The information of antibodies

名称	最终使用浓度	购买厂家
anti-Glut-1	2.5 $\mu\text{g}/\text{mL}$	美国 R&D 公司
anti-INSR	50 $\mu\text{g}/\text{mL}$	中国赛默飞世尔公司
anti-ABCA1	20 $\mu\text{g}/\text{mL}$	英国 Abcam 公司
anti-ABCG2	5 $\mu\text{g}/\text{mL}$	英国 Abcam 公司
anti-PMCA	4 $\mu\text{g}/\text{mL}$	中国赛默飞世尔公司
anti-ABCB6	5 $\mu\text{g}/\text{mL}$	英国 Abcam 公司
IgG2	5 $\mu\text{g}/\text{mL}$	中国赛默飞世尔公司

1.3 统计学分析

所有数据均采用统计分析软件 19.0 (Statistic Package for Social Science19.0, SPSS19.0) 进行统计学分析,两组间比较采用 t 检验,以 $P < 0.05$ 表示差异有统计学意义。

2 结果

2.1 早发性 AD 患者全血样中 RBC 膜蛋白的表达

为了探讨在 AD 患者血样中 RBC 膜蛋白的表达情况,我们采用流式细胞仪检测正常健康体检者和 AD 患者 RBC 膜中

的几种转运蛋白和胰岛素受体的表达水平。RBC 膜蛋白的选择主要基于生物信息学、全基因组关联分析(Genome-wide association study, GWA)、在线人类孟德尔遗传(Online Mendelian Inheritance of human, OMIM)以及红细胞数据库,选择可能参与阿尔茨海默病进程的 RBC 膜蛋白进行实验。与同年龄段健康体检者对比,早发性 AD 患者 RBC 膜 Glut1 转运蛋白和 INSR 的表达显著增加(P 均 < 0.05)。而健康体检者和早发性 AD 患者 RBC 膜 ABCA1 转运蛋白、ABCG2 转运蛋白、PMCA 和 ABCB6 转运蛋白的表达比较无显著差异($P > 0.05$),见图 1。

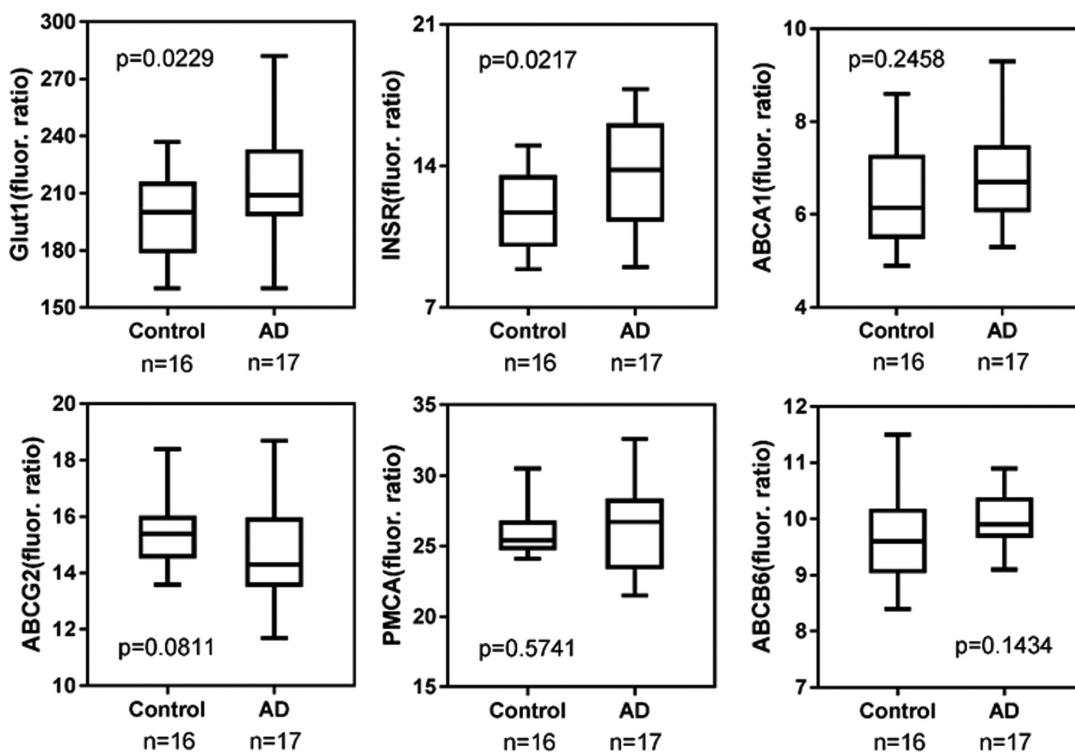


图 1 RBC 膜蛋白在早发性 AD 患者血样中的表达

Fig.1 Expression of RBC membrane protein in blood samples of patients with early onset AD

2.2 迟发性 AD 患者全血样 RBC 膜蛋白的表达

与同年龄段健康体检者对比, 迟发性 AD 患者 RBC 膜 Glut1 转运蛋白 INSR 的表达水平显著增加 (P 均 < 0.0001), 转

运蛋白 ABCA1 和 ABCG2 的表达水平也显著增加 (P 均 < 0.05)。

而健康体检者和迟发性 AD 患者 RBC 膜 PMCA 和 ABCB6 转运蛋白的表达水平无显著差异, 见图 2。

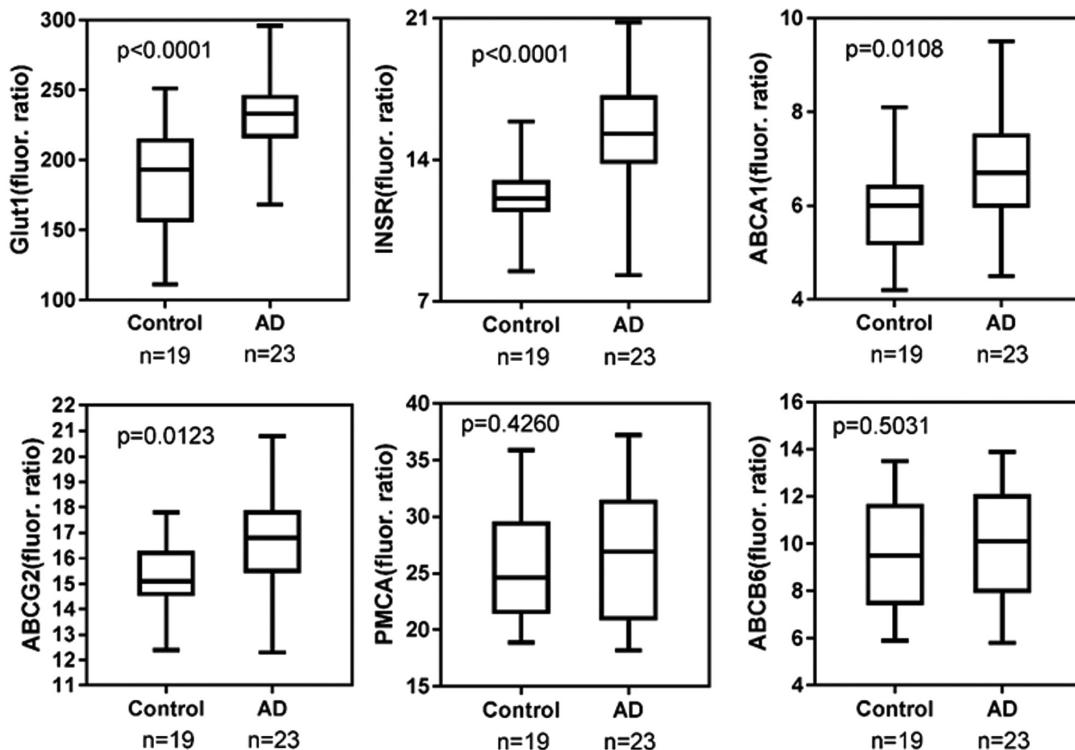


图 2 迟发性 AD 患者血样中 RBC 膜蛋白的表达

Fig.2 Expression of RBC membrane protein in blood samples of patients with late onset AD

3 讨论

Glut1 转运蛋白是人 RBC 中大量表达的膜蛋白, 每个细胞

约表达 105 个拷贝, 在人血脑屏障内皮细胞、心肌细胞、脂肪细胞、肾皮质系膜细胞及大脑星形胶质细胞等多种细胞中表达^[18-21]。

Glut1 表达受组织依赖性调节, 循环葡萄糖水平、缺氧以及激素

(包括胰岛素和生长激素)等均可调节其表达,而慢性高血糖症增加 RBC 中 Glut1 的表达^[22,23]。本研究表明早发性和迟发性 AD 患者 RBC 膜 Glut1 的表达均显著高于同龄健康对照者。我们推测脑组织中代谢饥饿或缺氧可引起血脑屏障内皮细胞中 Glut1 表达上调,这可能是调控 AD 患者 RBC 膜中 Glut1 表达增加的机制。

研究表明 INSR 在人 RBC 中的功能与其在其他组织中的功能基本相同,在非胰岛素依赖性糖尿病和高血压合并高胰岛素血症中观察到胰岛素与 RBC 中 INSR 的结合降低^[24,25]。本研究显示早发性和迟发性 AD 患者的 RBC 中 INSR 显着增加,这可能是由于中枢神经系统中相对胰岛素缺乏引起 INSR 的表达整体上调^[26]。ABCA1 转运蛋白参与高密度脂蛋白胆固醇的形成和胆固醇的逆向转运,将胆固醇从血管壁运送至肝脏和各种细胞中,ABCA1 转运蛋白存在于人 RBC 中^[27]。本研究也显示在迟发性 AD 患者中,ABCA1 转运蛋白在 RBC 膜中的表达显著增加,提示 ABCA1 可能参与 AD 病程晚期胆固醇转运的调节,而对 AD 病程早期胆固醇转运的调节作用不明显。

ABCG2 为初级血型成分,具有肿瘤多药耐药性,在异生素转运、抗癌药物耐药性以及尿酸转运中发挥重要作用^[28]。研究表明当 ABCG2 基因单核苷酸多态性 Q141K 突变时,RBC 中 ABCG2 的表达显著降低^[29]。本研究显示迟发性 AD 患者 RBC 中 ABCG2 表达显著高于同龄健康体检者。另有研究显示 ABCG2-Q141K 突变可降低 AD 的患病率^[30]。这些结果提示 ABCG2 可能与 AD 患者中枢神经系统中淀粉样蛋白聚合的清除有关^[31]。在本研究中,我们发现在 AD 患者和健康体检者中,PMCA 和 ABCB6 在 RBC 膜中的表达无差异。

在迟发性 AD 患者 RBC 膜中,Glut1、INSR、ABCA1 和 ABCG2 表达的增加提示这些蛋白可能也在中枢神经系统调控的组织中上调,并影响全身性转录和翻译过程。但是,还需要进一步的实验研究,临床研究可通过建立这些 RBC 膜蛋白表达与治疗 AD 的不同方案、治疗效果或并发症的关系来进一步确定 RBC 膜蛋白对 AD 治疗方案的选择性,基础研究可通过动物实验研究单独阻断或者联合阻断这些 RBC 膜蛋白对 AD 模型动物的认知功能、学习记忆功能、突触功能、神经元再生、神经元线粒体功能、神经元自噬等过程的影响。本研究提及的膜蛋白也涉及其他的代谢疾病,包括 2 型糖尿病和痛风等。因此,RBC 膜生物标志物也可反映重叠的病理机制。

红细胞膜含有 300 多种不同的膜蛋白,只有其中几种可能与 AD 的诊断有关,主要包括淀粉样蛋白 - A4 蛋白、 α - 突触核蛋白、早老素 -1、呆蛋白、乙酰胆碱酯酶、ABCA7、磷脂拼接酶和 Glut3 转运蛋白^[32]。目前,我们正在试图进行这些 RBC 膜蛋白的定量分析,以期为 AD 和其相关疾病的膜蛋白诊断标志物提供新的可能性,但特异性高亲和力抗体以及购买抗体成本阻碍此研究。

总之,早发性 AD 患者 RBC 膜 Glut1 转运蛋白和 INSR 的表达显著增加,迟发性 AD 患者 RBC 膜 Glut1 转运蛋白、INSR 以及转运蛋白 ABCA1 和 ABCG2 的表达显著增加。因此,RBC 膜 Glut1、INSR、ABCA1 和 ABCG2 蛋白表达的检测可能可作为 AD 病程诊断的新的生物标记物,希望为 AD 膜蛋白诊断标志物提供新依据。

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