



Developing an in vitro model of CKD-MBD induced α Klotho suppression



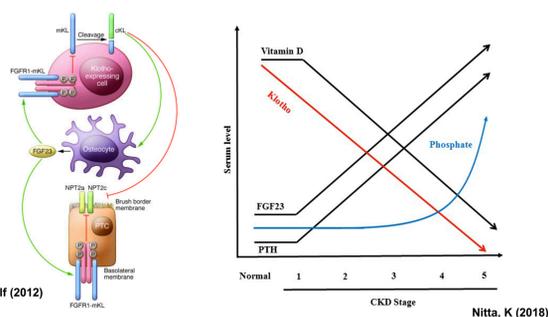
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ABSTRACT

Chronic Kidney Disease (CKD) affects approximately 1 in 10 Americans. Diabetic nephropathy is also associated with the development of chronic kidney disease-mineral bone disorder (CKD-MBD). CKD-MBD disrupts the normal bone-kidney endocrine axis responsible for regulating mineral metabolism, and hyperphosphatemia develops in late stage disease. Important clinical hallmarks of the CKD-MBD progression include elevated bioactive Fibroblast growth factor-23 (FGF23) and suppression of FGF23's co-receptor, α Klotho (α KL). In healthy individuals the hormone FGF23, primarily produced by bone, and α KL aid in maintaining normal phosphate and vitamin D homeostasis. It is currently unknown what drives the suppression of α KL expression, however increasing α KL expression in CKD-MBD models is being investigated as a novel therapeutic. Our study sought to develop a novel in vitro model of one of the clinical hallmarks of the progression of CKD-MBD, α KL suppression, to investigate both possible stimuli of its repression and downstream signaling events. The Human Embryonic Kidney (HEK) cell line was used to determine if changes in fluid shear stress, similar to those that occur in diabetic nephropathy, could lead to reduced α KL expression. HEK cells were plated and exposed to oscillatory fluid shear stress (OFSS) for intervals between 0-60 min to examine protein expression or 0-2 hours to assess gene expression. HEK cells were sensitive to mechanical stimulation as pathways including increased ERK phosphorylation occurred in response to OFSS. In response to longer bouts of OFSS α KL expression was significantly ($p < 0.05$) reduced. Dramatic changes in fluid shear stress may serve as a stimulus for reduced α KL expression in CKD-MBD. Further studies are underway to investigate downstream signaling events related to α KL suppression. Understanding both the stimuli of α KL suppression and related downstream signaling events could provide novel therapeutic targets for the treatment of CKD-MBD.

BACKGROUND



- Approximately 1:10 Americans have CKD-MBD
- CKD-MBD disrupts the normal bone-kidney endocrine axis and hyperphosphatemia develops in late stage disease
- Important clinical hallmarks of the CKD-MBD progression include elevated bioactive Fibroblast growth factor-23 (FGF23) and suppression of FGF23's co-receptor, α Klotho (α KL)
- FGF23 and α KL aid in maintaining normal phosphate and vitamin D homeostasis.
- It is currently unknown what drives the suppression of α KL expression, however increasing α KL expression in CKD-MBD models is being investigated as a novel therapeutic.

HYPOTHESIS

Oscillatory fluid shear stress serves as a stimuli for reduced α Klotho expression in kidney cells.

RESULTS

HEK cells are responsive to OFSS stimulation

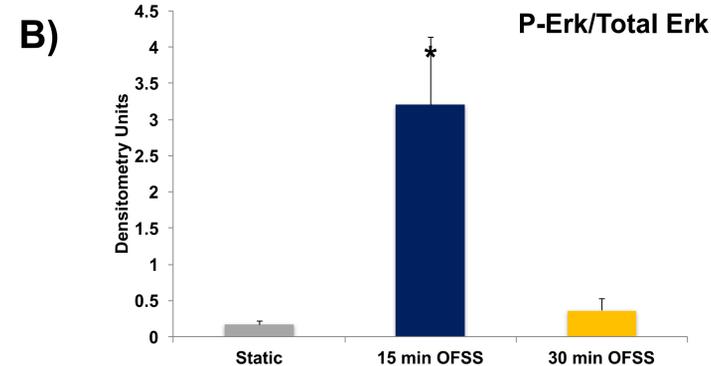
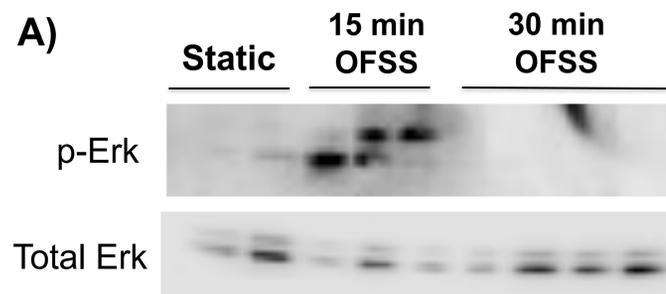


Figure 1. A) HEK cells were exposed to either static or OFSS conditions (15 min or 30 min) and harvested immediately for protein analysis. Western blot analysis was run to examine p-Erk and total Erk. B) The software program ImageJ was used to quantify p-Erk and total Erk (* $p < 0.05$).

OFSS stimulation suppresses α Klotho expression

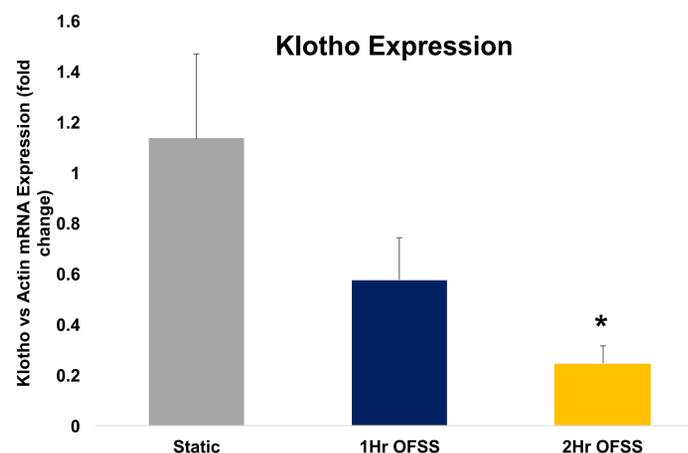


Figure 2. HEK cells were exposed to either static or OFSS conditions (1 or 2 hrs) and harvested the next day. qPCR analysis was performed examining Klotho expression and Actin (* $p < 0.05$).

SUMMARY & CONCLUSIONS

- Western blot showed increased ERK phosphorylation occurred in response to fluid shear stress
- qPCR demonstrated a significant decrease in α KL gene expression after 2 hours of fluid stress and a pattern of decreased gene expression after 1 hour
- Shear stress showed significant gene expression and changes in α KL matching those seen in CKD-MBD
- These preliminary findings show trends consistent with a novel in vitro model of CKD-MBD with decreases in α KL expression

FUTURE DIRECTIONS

- Repeat Western blot and qPCR experiments
- Repeat experiment in HK-2 (proximal tubule) cell line
- Examine expression levels of more signaling molecules to confirm other changes seen in CKD-MBD

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