

**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY**

**UNDERSTANDING THE ROLE OF AFLATOXIN B<sub>1</sub> IN  
MODULATING THE TYPE I INTERFERON RESPONSE**

by

**PATRICK WILLIAMS NARKWA**

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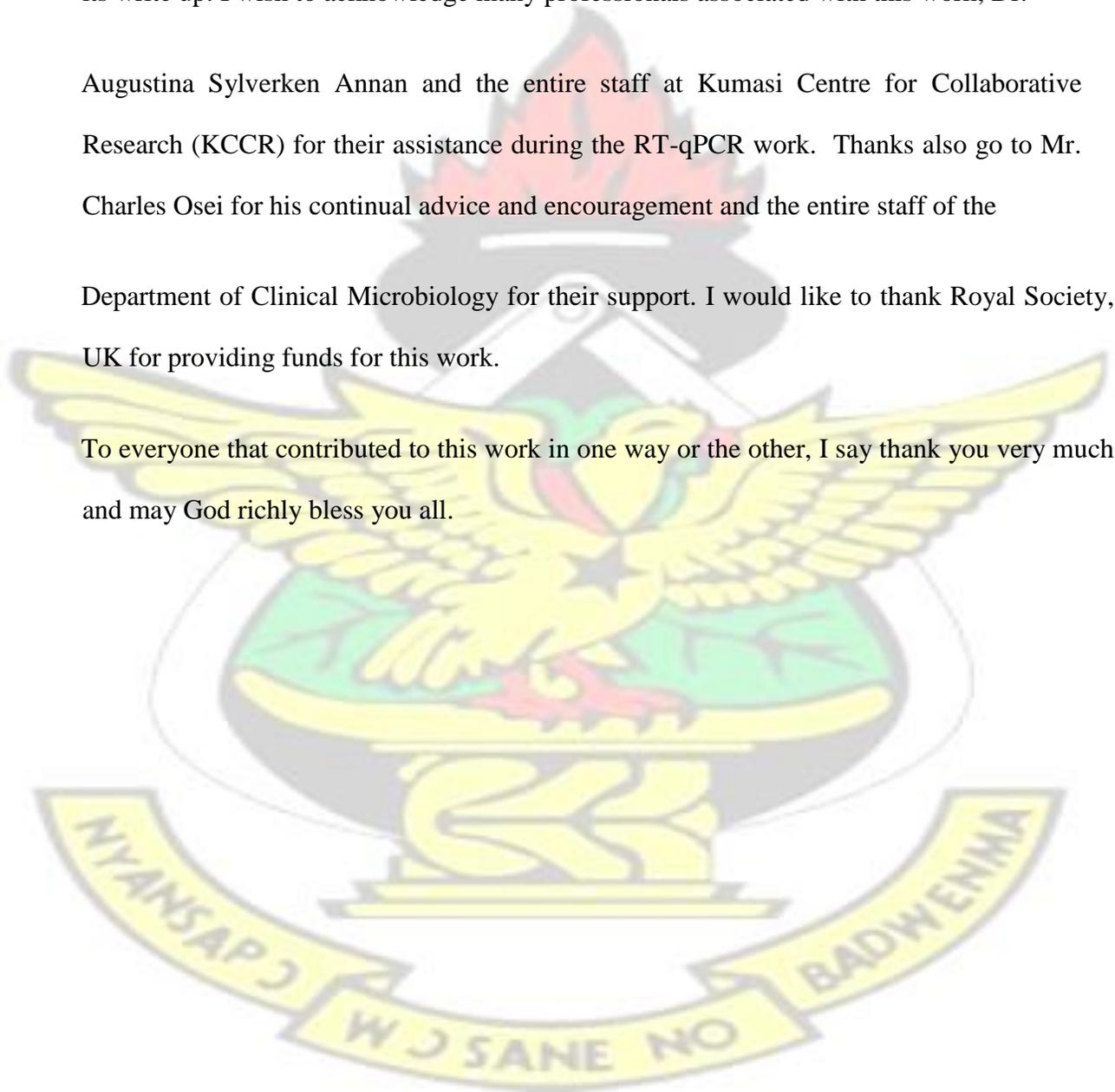
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# Table of Contents

Declaration.....	ii
Acknowledgements .....	iii
Table of Contents .....	iv
List of Figures... ..	viii
List of Tables... ..	ix
List of Abbreviations .....	x
Abstract.....	xiii
<b>CHAPTER ONE INTRODUCTION .....</b>	<b>1</b>
1.1 Background information .....	1
1.2 Problem Statement and Justification .....	7
1.3 Aim/Objectives .....	8
<b>CHAPTER TWO LITERATURE REVIEW .....</b>	<b>9</b>
2.1 Distribution of fungi that produce aflatoxins .....	9
2.2 Chemistry and types of aflatoxins.....	10
2.3 Physical and chemical properties of aflatoxins .....	12
2.4 Human exposure to aflatoxins .....	12
2.5 Metabolism of AFB <sub>1</sub> .....	15
2.6 Mechanisms of carcinogenesis of AFB <sub>1</sub> .....	18
2.7 AFB <sub>1</sub> -induced HCC in humans and experimental animals .....	19
2.8 Toxicological effects of aflatoxins in humans .....	22
2.9 Mechanism of immunomodulatory effects of AFB <sub>1</sub> in humans .....	24
2.10 Effects of AFB <sub>1</sub> in animal and human cell cultures .....	26
2.11 Effects of AFB <sub>1</sub> on viral replication .....	27
2.12 The Interferon system .....	29
2.13 Interferon regulatory factors .....	33
2.14 Virus induction of IFNs .....	35
2.15 Mechanisms of type I IFN signaling and gene activation .....	37
2.16 IFN responsive genes or elements .....	41



3.7.3 Separating protein by Sodium Dodecyl Sulfate Poly Acrylamide Gel	
Electrophoresis (SDS-PAGE) .....	70
3.7.4 Staining of polyacrylamide gels with Coomassie Blue .....	72
3.7.5 Electrotransfer of proteins onto the polyvinylidene fluoride (PVDF)	
membrane .....	73
3.7.6 Antibody probing.....	73
3.7.7 Chemiluminescent detection and data analysis .....	74
3.8 Determining the effects of AFB <sub>1</sub> on the antiviral activity of IFN- $\alpha$ .....	74
3.8.1 Quantifying Chandipura virus using plaque assay .....	75
3.9 Statistical analysis .....	78
CHAPTER FOUR THE EFFECTS OF AFB <sub>1</sub> ON THE TYPE I IFN RESPONSE .....	79
4.1 Introduction .....	79
4.2 Methods.....	80
4.2.1 The cytotoxic effects of AFB <sub>1</sub> on HepG2 cells in culture .....	80
4.2.2 Activation and measurement of type I IFN response pathway in HepG2	
cells .....	81
4.2.3 The effects of AFB <sub>1</sub> on the IFN inducible ISRE pathway in HepG2 cells .....	81
4.2.4 Statistical analysis .....	82
4.3 Results .....	82
4.4 Discussion .....	87
CHAPTER 5 THE EFFECTS OF AFB <sub>1</sub> ON THE mRNA AND PROTEIN LEVELS	
OF THE TYPE I IFN PATHWAY .....	90
5.1 Introduction .....	90
5.2 Methods.....	92
5.2.1 Quantifying the mRNA levels of the key components of the type I IFN	
pathway .....	92
5.2.2 Does the inhibition of the transcripts of <i>JAK1</i> , <i>STAT1</i> and <i>OAS3</i> by AFB <sub>1</sub>	
affect their translation into proteins as well? .....	93

5.2.3 Statistical analysis .....	94
5.3 Results .....	95
5.4 Discussion .....	101
CHAPTER 6 THE BIOLOGICAL SIGNIFICANCE OF THE THE SUPPRESSION OF THE TYPE I IFN PATHWAY BY AFB <sub>1</sub> .....	103
6.1 Introduction .....	103
6.1.1 Chandipura virus as a human pathogen .....	104
6.2 Methods.....	104
6.2.1 Investigating the impact of AFB <sub>1</sub> on the replication of chandipura virus .....	105
6.3 Results .....	105
6.4 Discussion .....	107
CHAPTER 7 GENERAL DISCUSSION .....	110
7.1 General discussion.....	110
7.2 Limitation(s) of the study.....	114
7.3 Conclusion(s) .....	114
7.4 Future perspectives.....	115
References.....	116
Appendices.....	138

## List of Figures

Fig.2.1 Chemical structure of AFB <sub>1</sub> .....	11
Fig.2.2 Biotransformation of AFB <sub>1</sub> .....	17
Fig.2.3 Biological effects of IFN- $\alpha/\beta$ .....	32
Fig.2.4 Model diagram of signaling pathway that is activated by IFN- $\alpha/\beta$ .....	40
Fig.3.1 Agarose gel analysis of the plasmid DNA purified from <i>E.coli</i> 5DH $\alpha$ using Endo Free Plasmid Maxi Kit from Qiagen.....	53
Fig.3.2 Agarose gel analysis of total RNA purification procedure using Thermo Scientific GeneJET RNA purification Kit.....	62
Fig.3.3 Standard curve generated using BSA .....	69
Fig. 3.4 Analysis of the quality of separation of protein by Coomassie blue staining.....	72
Fig. 3.5 Quantification of Chandipura virus titer using plaque assay.....	77
Fig.4.1A A graph showing the viability of HepG2 cells as determined by MTS assay...84	
Fig.4.1B A graph showing the induction of pISRE driven luciferase reporter gene activity by rIFN- $\alpha$ .....	85
Fig.4.1C A graph showing that AFB <sub>1</sub> suppressed the type I IFN response by inhibiting the activity of pISRE-luc.....	86
Fig.5.1 A Primers and probes amplification efficiency study.....	96
Fig.5.1B AFB <sub>1</sub> inhibits JAK1 gene transcription.....	97
Fig.5.1C AFB <sub>1</sub> inhibits STAT1 gene transcription.....	98
Fig.5.1D AFB <sub>1</sub> inhibits OAS3 gene transcription.....	99
Fig.5.1E AFB <sub>1</sub> down-regulates STAT1 protein synthesis .....	100
Fig.6.1 AFB <sub>1</sub> inhibits the replication of Chandipura virus in HepG2 cells.....	106
Fig.7.1 Proposed deregulation of type I IFN signaling pathway by AFB <sub>1</sub> .....	113

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## List of Tables

Table 3.1 Sequences of probes and primers.....	64
Table 3.2 Chart for preparing resolving gel.....	71
Table 3.3 Chart for preparing stacking gel.....	71
Appendix A.....	138
Table 1 Reagents and chemical used.....	138
Appendix B.....	140
Table 1 Commonly used buffers and other solutions.....	140
Appendix C.....	142
Table 1 Plasmids used.....	142
Table 2 Transfection complex preparation chart.....	143
Appendix D.....	143
Table 1 RT-qPCR reaction set up.....	143
Table 2A GAPDH optimization reaction set-up (0.3 $\mu$ M Forward primer X 0.3 $\mu$ M Reverse primer).....	143
Table 2B GAPDH optimization reaction set-up (0.2 $\mu$ M Forward primer X 0.2 $\mu$ M Reverse primer).....	144
Table 2C GAPDH optimization reaction set-up (0.1 $\mu$ M Forward primer X 0.1 $\mu$ M Reverse primer).....	144
Table 2D GAPDH primer optimization results.....	145
Appendix E.....	146
Table 1 Primary antibodies.....	146
Table 2 Secondary antibodies.....	146

## List of Abbreviations

AFB <sub>1</sub>	Aflatoxin B <sub>1</sub>
AFB <sub>2</sub>	Aflatoxin B <sub>2</sub>
AFG <sub>1</sub>	Aflatoxin G <sub>1</sub>
AFG <sub>2</sub>	Aflatoxin G <sub>2</sub>
AFM <sub>1</sub>	Aflatoxin M <sub>1</sub>
AFM <sub>2</sub>	Aflatoxin M <sub>2</sub>
BER	Base Excision Repair
cAMP	cyclic Adenosine Monophosphate
CBF	Core-Binding Factor,
CBP	CREB-Binding Protein
CD14	Cluster of Differentiation 14
c-jun/ATF2	c-jun, Activating Transcription Factor 2
CpG motifs	Cytosine-phosphate-Guanine
CREB	cAMP-Responsive Element Binding
CYP450	Cytochrome P450
DBD	DNA Binding Domain
DMEM	Dulbecco's Modified Eagle Medium
dsRBD	double stranded RNA Binding Domain
ECACC	European Collection of Authenticated Cells Cultures
eIF2	Eukaryotic Initiation Factor 2
EIF2AK2	Eukaryotic Initiation Factor 2 Alpha Kinase 2
Epo-R	Erythropoietin Receptor
ETR	Electron Transfer Reagent
FAO	Food and Agriculture Organization
G-CSF	Granulocyte-Colony Stimulating Factor
GH-R	Growth Hormone Receptor
GM-CSFR	Granulocyte Macrophage Colony-Stimulating Factor Receptor
GST	Glutathione-S-transferase
HCC	Hepatocellular carcinoma
HEPES	(4-(2-hydroxyethyl)-1-piperazineethanesulfonic acid
IAD	IRF Association Domain
IARC	International Agency for Research on Cancer
ICS	Interferon Consensus Sequence

ICSBP	Interferon Consensus Sequence-Binding Protein
IFNAR	Interferon Alpha Receptor
IFN- $\alpha$	Interferon-alpha
IFN- $\beta$	Interferon-beta
IL	Interleukin
IRFs	Interferon Regulatory Factor
ISGF3	Interferon Stimulated Gene Factor 3
ISGs	Interferon Stimulated Genes
ISRE	Interferon Stimulated Response Element
I $\kappa$ B	Inhibitor of NF- $\kappa$ B
JAK	Janus Kinase
JECFA	Joint Expert Committee on Food Additives
LPS	Lipopolysaccharide
MAL	Myelin And Lymphocyte Protein
MAPK	Mitogen-Activated Protein Kinase
MD2	Myeloid Differentiation protein 2
MDA5	Melanoma Differentiation-Associated gene 5
mEH	microsomal Epoxide Hydrolase
MEM	Minimum Essential Medium
MHC	Major Histocompatibility Complex
Myb	Myeloblastosis
MyD88	Myeloid Differentiation Primary Response gene 88
NADH	Reduced Nicotinamide Adenine Dinucleotide
NADPH	Reduced Nicotinamide Adenine Dinucleotide Phosphate
NCTC	National Collection of Type Cultures
NER	Nucleotide Excision Repair
NF- $\kappa$ B	Nuclear Factor kappa B
NK-cells	Natural Killer-cells
NLS	Nuclear Localization Signal
OAS	Oligo Adenylate Synthetase
PAMPS	Pathogen Associated Molecular Patterns
PES	Phenazine Ethosulfate
PHH	Primary Human Hepatocytes
PKR	Protein Kinase R
Prl-R	Prolactin Receptor
PRR	Pattern Recognition Receptors
RIG1	Retinoic acid-Inducible Gene 1
SH2	Src (sarcoma) Homology 2
STAT	Signal Transducer and Activator of Transcription
TICAM1	Toll-interleukin 1 receptor domain (TIR)-Containing Adaptor Molecule 1
TICAM2	Toll-interleukin 1 receptor domain (TIR)-Containing Adaptor Molecule 2

TIR	Toll-IL 1 Receptor
TIRAP	Toll-Interleukin 1 Receptor (TIR) Domain Containing Adaptor Protein
TLR	Toll-like Receptor
TNF- $\alpha$	Tumour Necrosis Factor-alpha
TP53	Tumour Suppressor 53 gene
TRAM	Toll-like Receptor 4 Adaptor Protein
Trif	TIR-domain-containing adapter-inducing interferon- $\beta$
Tyk2	Tyrosine kinase 2
WHO	World Health Organization



## Abstract

Prolonged dietary exposure to Aflatoxin B<sub>1</sub> (AFB<sub>1</sub>) is one of the major risk factors for the development of primary liver cancer or hepatocellular carcinoma (HCC). AFB<sub>1</sub> contamination of some Ghanaian staples has been reported to be very high. AFB<sub>1</sub> causes mutations in the tumour suppressor gene *TP53*. These mutations are known to be involved in the pathogenesis of HCC. However, how AFB<sub>1</sub> affects other anti-cancer pathways such as the type I interferon (IFN) pathway is largely unknown. The aim of the study was to test the hypothesis that AFB<sub>1</sub> inhibits the type I IFN response in human hepatoma cell lines (HepG2 cells) by directly interfering with key signaling proteins and thus increase the risk of HCC. In this study, the effect of AFB<sub>1</sub> on cell viability was investigated by MTS-based assay. The type I IFN response in HepG2 cells was induced using recombinant (r) IFN- $\alpha$  and measured by IFN stimulated response element (ISRE) luciferase reporter gene assay. In addition, the effects of AFB<sub>1</sub> on the mRNA levels of *JAK1*, *STAT1* and *OAS3* in HepG2 cells stimulated with rIFN- $\alpha$  were determined by RT-qPCR and confirmed by western blotting assay. Exposure of HepG2 cells to AFB<sub>1</sub> up to 3200  $\mu$ M for 24 hours followed by maintenance of cells in AFB<sub>1</sub> free media for 24, 48 and 72 hours decreased cell viability in a dose dependent manner. AFB<sub>1</sub> also suppressed/inhibited the IFN- $\alpha$  driven activation of a reporter promoter that contained the ISRE. When HepG2 cells which had been stimulated with rIFN- $\alpha$  were treated with AFB<sub>1</sub> the mRNA synthesis of *JAK1*, *STAT1* and *OAS3* was suppressed/inhibited. AFB<sub>1</sub> also inhibited the protein accumulation of *STAT1*. The biological significance of the inhibition/suppression of the type I IFN pathway by AFB<sub>1</sub> was investigated by employing the replication of chandipura virus in HepG2 cells stimulated with or without rIFN- $\alpha$  and treated with or without AFB<sub>1</sub>. Chandipura virus was titred by plaque assay on L929 cells. Paradoxically when chandipura virus was exposed to AFB<sub>1</sub> for 24 hours, the replication of the virus was reduced as measured by a decrease in the virus titer. Results from this study suggest that AFB<sub>1</sub> may also induce HCC by inhibiting the type I IFN response pathway which is known to have anticancer property. Since AFB<sub>1</sub> rather kills the IFN sensitive chandipura virus rather than rescuing them, it is speculated that AFB<sub>1</sub> and viruses might not co-operate directly to amplify HCC development and that further studies are required to determine how viruses co-exist with AFB<sub>1</sub> to catalyse carcinogenesis caused by AFB<sub>1</sub> in human liver.



## CHAPTER ONE INTRODUCTION

### 1.1 Background information

Aflatoxins are naturally occurring mycotoxins that were discovered in the 1960s after the devastating loss of poultry in England in which Turkey X disease caused the deaths of over 120,000 turkeys and other poultry which were fed with meals that contained peanut imported from South America (Blount, 1961). Aflatoxins are produced by fungal species that belong to the genus *Aspergillus*. The commonest species that produce these lethal mycotoxins are *Aspergillus flavus* and *Aspergillus parasiticus*. These fungi can infect grains and produce aflatoxins before the grains are harvested or when the grains are being stored. The grains are usually more prone to *Aspergillus* colonization when they are exposed to high temperatures and high humid environment for longer period of time or when they are damaged by environmental stresses like drought making the cereals more susceptible to *Aspergillus* infection (Wu and Khlangwiset, 2010). Maize and groundnuts are two food crops which are more susceptible to colonization by *Aspergillus* and they form part of meals of many Africans. Due to high levels of poverty in most areas of Africa, most people are unable to afford many food variety and hence rely heavily on maize and groundnut or cereals as a whole thus increasing aflatoxin exposure. Aflatoxin contamination in food is a worldwide health problem especially in the underdeveloped nations (Liu and Wu, 2010). It has been reported that more than 4.5 billion individuals globally are exposed to aflatoxin more especially in the developing nations (Strosnider *et al.*, 2006). Food meant for human and animal consumption have been reported to contain aflatoxins in some countries such as Ghana, Togo, Nigeria and Benin in the West African sub region (Oyelami *et al.*, 1996, Kpodo *et al.*, 2000, Awuah and Kpodo, 1996) probably

## Chapter 1 Introduction

because of suboptimal farming practices and poor storage conditions in these countries. For example, a study conducted by Kumi and colleagues in 2014 (Kumi *et al.*, 2014 ) to determine aflatoxin contamination of locally made food (weanimix) from maize and groundnuts reported a high levels of aflatoxin and fumonisin in weanimix in the EjuraSekyedumase district in the Ashanti Region of Ghana. They reported that 83.3% of weanimix samples had aflatoxin levels higher than the national permissible level of 15ppb with mean level of 145.2ppb.

Currently about eighteen (18) different kinds of aflatoxins have been identified. The representatives of the 18 that are of greater importance include aflatoxin B<sub>1</sub> (AFB<sub>1</sub>), aflatoxin B<sub>2</sub> (AFB<sub>2</sub>), aflatoxin G<sub>1</sub> (AFG<sub>1</sub>) and aflatoxin G<sub>2</sub> (AFG<sub>2</sub>). Some minor members of 18 different kinds of aflatoxins include aflatoxin M<sub>1</sub> (AFM<sub>1</sub>) and aflatoxin M<sub>2</sub> (AFM<sub>2</sub>). AFB<sub>1</sub> is a common contaminant of food stuffs meant for human consumption and is the most lethal carcinogen in both humans and experimental animals (Wild and Gong, 2010, Sudakin, 2003). Evidence from experimental and epidemiological studies has led to the classification of AFB<sub>1</sub> as group 1 human carcinogen by the International Agency for Research on Cancer (IARC) (IARC, 2002). AFB<sub>1</sub> contamination of diet coupled with its subsequent prolonged heavy exposure is a major risk factor that contribute to the development of primary liver cancer or hepatocellular carcinoma (HCC) (Wogan, 1992 , Wild and Hall, 2000). In addition to AFB<sub>1</sub> exposure, other environmental risk factors that predispose individuals to HCC include chronic hepatitis B and C virus infections, heavy alcohol consumption and iron overload Chen *et al.* (1997). A study conducted by Liu and Wu (2010 ) to assess the extent of aflatoxin-induced HCC in the world reported that of the 550,000 to 600,000 new HCC cases recorded in the world each year, about 25,200 to 155,000 may be attributable to aflatoxin exposure. They reported that majority of the cases

## Chapter 1 Introduction

occur in the West African sub-region, Southeastern part of Asia and China where both exposure of people to high levels of aflatoxins and hepatitis B virus infections are common.

Liu and Wu (2010 ) estimated that aflatoxin exposure may be a contributing factor in 4.6-28.2% of HCC worldwide.

HCC rapidly reduces quality of life and typically causes death six month to one year from diagnosis (Bosch *et al.*, 2005 ). According to the GLOBOCAN 2012 reports released by IARC in December 2013 (IARC, 2013), HCC is ranked as the sixth commonest cancer in the world with about 782,000 new cases diagnosed in 2012. According to the report HCC is the second cause of cancer deaths resulting in about 0.8 million (9.1%) of all deaths attributable to cancers globally in 2012. It has been reported that the number of new HCC cases is high in West Africa with an annual death rate of approximately 200,000 (Ladep *et al.*, 2014). In fact West Africa is ranked second aside Eastern Asia as the region affected most with HCC (Ladep *et al.*, 2014). For example in West African countries like Senegal, Gambia and Guinea Conakry, the incidence of HCC has been reported to be very high ranging from 30-50 cases per 100000 in men and 12-20 cases per 100000 in women (Nordenstedt *et al.*, 2010). In West Africa the death rate of HCC is almost equal to its incidence with most HCC sufferers dying within weeks of their diagnosis indicating how aggressive and dangerous HCC is (Ladep *et al.*, 2014, Jemal *et al.*, 2011).

The development of HCC is also affected by sex and age of the individuals. HCC is the fifth and the seventh most frequently diagnosed cancers in men and women respectively worldwide (Jemal *et al.*, 2011 ). A study conducted by Laryea *et al.* (2014) to review data from Kumasi Cancer Registry at the Komfo Anokye Teaching Hospital (KATH) in Kumasi for the year 2012 reported that HCC is the commonest cancer among males accounting for 21.1% of all cancers. In another study conducted at the Korle Bu Teaching Hospital

(KBTH) in Accra the capital of Ghana to review the cancer mortality patterns in Ghana over a 10- year period (from 1991 to 2000) in 2006, Wiredu and Armah (2006) reported that HCC is the leading cause of cancer deaths in males accounting for 21.5% of all cancer deaths in Ghana. Wiredu and Armah also reported that HCC is the third leading cause of cancer deaths in females accounting for 10.97% of all cancer deaths in Ghana.

Information available suggests that the risk of HCC development may be amplified through the synergistic effects of aflatoxin ingestion and HBV infection. The risk of HCC developing in people with chronic HBV infection and also exposed to aflatoxin is up to 30 times greater than the risk in individuals exposed to either of the two factors (Wu and Khlangwiset, 2010, Liu and Wu, 2010, Groopman *et al.*, 2008). These two risk factors (aflatoxin and HBV) are common in underdeveloped countries in the world including Ghana (Awuah and Kpodo, 1996, Allain *et al.*, 2003). Within these resource-limited countries; there is often significant rural-urban difference in HBV prevalence and aflatoxin exposure with both risk factors usually affecting rural populations strongly (Plymoth *et al.*, 2009). Information available on mycotoxin-induced changes of immunity and impairment of resistance to disease has been largely obtained from studies with aflatoxins (Hahon *et al.*, 1979). Aflatoxins have been reported to reduce greatly serum complement activity (Thurston *et al.*, 1974, Michael *et al.*, 1973), decrease or impair phagocytosis (Richard and Thurston, 1975), increase susceptibility to and mortality of certain infectious agents (Hamilton and Harris, 1971 , Edds *et al.*, 1973), interfere with acquired resistance (Pier and Heddleston, 1970), or inhibit cellular immune processes (Savel *et al.*, 1970 , Pier *et al.*, 1972).

In spite of these negative effects of AFB<sub>1</sub> in the human system, the innate immune system is constantly working to protect the individual against the harmful effects of aflatoxins and other disease causing agents. One component of the innate immune system that plays a key role in the first line of defense in eradicating pathogens (such as viruses) and tumour cells is the interferon (IFN) system. Some studies have been carried out to determine the effects of IFNs on human tumours or malignancies. For example in 1970, Gresser examined the capacity of IFN to reverse the phenotype of tumourigenic cells to normal phenotype and reported that IFN ensured a partial reversion in human osteosarcoma cells (Gresser, 1970). Indeed in 1986, IFN- $\alpha$ 2a and IFN- $\alpha$ 2b were licensed and approved for the treatment of Hairy Cell Leukemia, AIDS-related Kaposi's sarcoma and other malignancies (Bekisz *et al.*, 2010). Studies have shown that IFN-treatment induces the tumour suppressor gene p53 which plays a role in the apoptosis of some tumour cells (Bekisz *et al.*, 2010). Indeed Aziz *et al.* (2005) showed in their study that IFN- $\alpha$  has a significant protective effect against hepatic fibrogenesis and carcinogenesis. They reported that rat liver cells expressing ectopic IFN- $\alpha$  showed minimized fibrotic and cirrhotic processes when treated with the carcinogens AFB<sub>1</sub> and carbon tetrachloride. Although the study of Aziz *et al.* is yet to be performed in human liver cells to assess the capacity of viruses in inducing IFN production in the context of AFB<sub>1</sub> exposure, it showed IFN- $\alpha$  as a significant protective agent against liver cancer.

The signaling pathways through which IFNs exert their anti-tumour actions can vary. Studies have shown that one of the mechanisms by which IFNs exert their antitumour activity is through the induction of signal transducer and activator of transcription 1 (STAT1) protein (Stephanou and Latchman, 2003). When STAT 1 is activated, many pro-apoptotic and anti-proliferative genes that are required to prevent or reverse the

## Chapter 1 Introduction

tumourigenic processes are induced (Elahi *et al.*, 2008, Egwuagu *et al.*, 2006). The activity of STAT 1 is pivotal for tumour immune surveillance as it drives the induction of major histocompatibility complex molecules Class I (MHC I) required for presentation of antigens to cytotoxic T cells and natural killer cells and also elicits anti-tumour immune response (Rodriguez *et al.*, 2007). Another protein that is targeted by type 1 interferon is 2'-5' oligoadenylate synthetase (OAS). The expression of OAS results in the activation of another protein RNase L (a ribonuclease). The OAS/RNase L is an RNA decay pathway known to play significant role in the established endogenous anti-viral pathway (reviewed in Randall and Goodbourn, 2008). This pathway can break down ssRNA which may include mRNA of the host cell and viral RNA and thus inhibit protein synthesis of both the host cell and the viruses (Silverman, 2007). The importance of IFN- $\alpha/\beta$  in mediating antiviral response is established by the fact that mice that lack IFN- $\alpha/\beta$  receptors (Tay *et al.*, 1999, Nunez, 1999, Muller *et al.*, 1994) are unable to mount efficient responses to a large number of viruses.

The fact that AFB<sub>1</sub> causes HCC by inducing mutation in the tumour suppressor gene p53 has been well established. However, information on how AFB<sub>1</sub> could inhibit the type 1 IFN (IFN- $\alpha/\beta$ ) response as a way of causing HCC development is scanty. This study will explore the mechanisms by which AFB<sub>1</sub> could inhibit the type 1 IFN response using human hepatoma cell line as a model system. Results from this study could influence future therapeutic strategy for AFB<sub>1</sub>- induced HCC and also broaden our knowledge of the role of AFB<sub>1</sub> in HCC biology.

## 1.2 Problem Statement and Justification

Cereals form a major staple of diet of majority of Ghanaians and other developing nations yet sub-optimal farming practices and poor storage conditions in these developing nations make these food crops highly susceptible to aflatoxin contamination. Prolonged dietary exposures to aflatoxins particularly AFB<sub>1</sub> have been identified to increase the risk of development of HCC. Studies have shown that IFN- $\alpha$ , a member of type I interferon family shows a protective effect against hepatic fibrogenesis and carcinogenesis. However, information on how AFB<sub>1</sub> modulates the anti-viral and anti-tumour properties of type I interferon and possibly increase the risk of HCC is scanty.

Even though quite a number of studies have examined the effects of AFB<sub>1</sub> on the immune system of experimental animals (*in vivo*) and on animals and human immune cells *in vitro*, less is known about the exact role of AFB<sub>1</sub> in modulating the anti-viral and antitumour activities of IFN- $\alpha$ . Understanding the molecular mechanisms by which AFB<sub>1</sub> modulates the type 1 IFN response in human liver cells may provide information that may have practical application in the design and manufacture of new anti-cancer drugs and thereby provide avenues for future therapeutic interventions.

## 1.3 Aim/Objectives

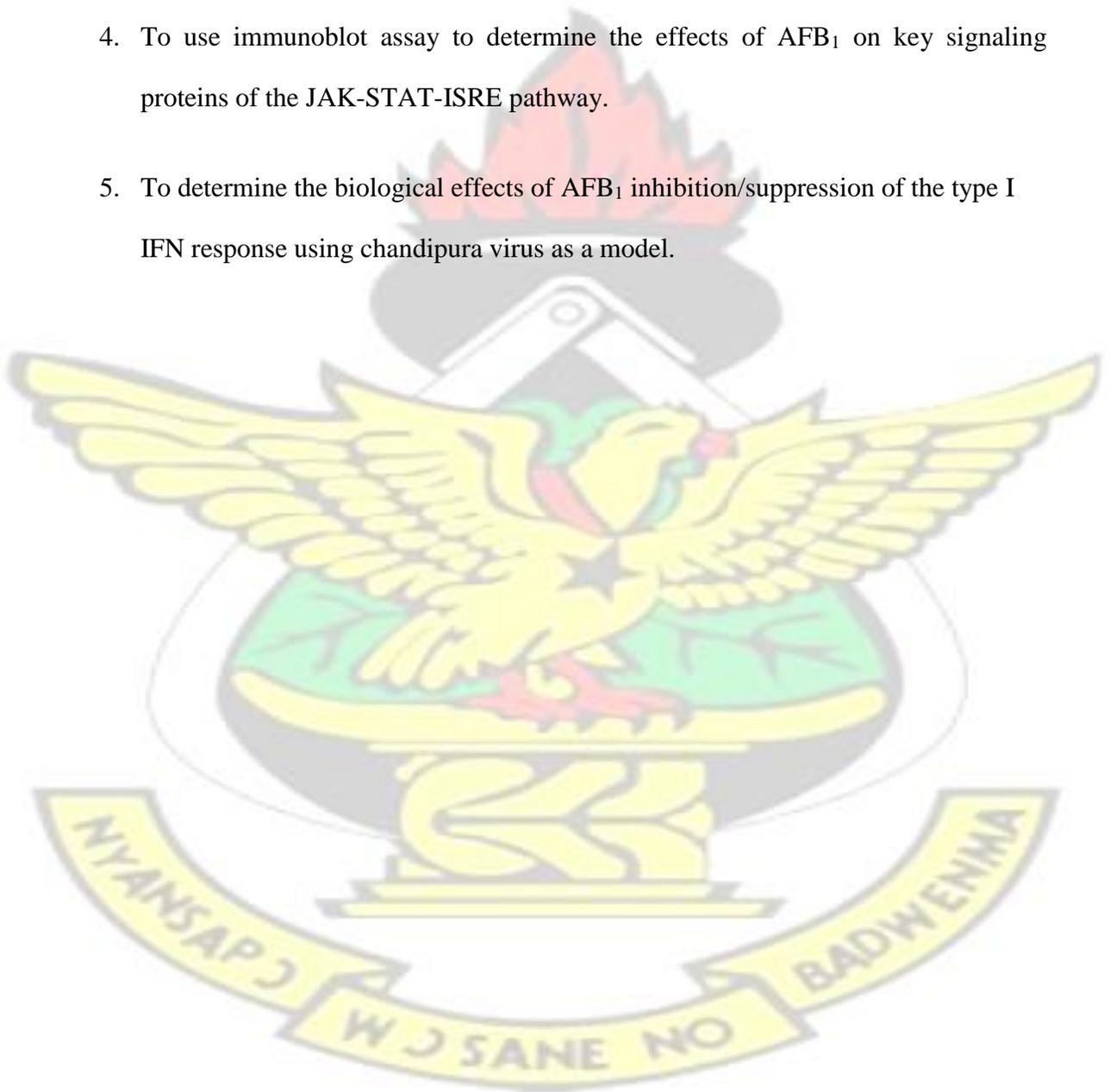
The aim of the study was to determine whether AFB<sub>1</sub> inhibits the type I IFN response and the mechanism involved.

The specific objectives were:

1. To determine the cytotoxic effects of AFB<sub>1</sub> on human hepatoma cell line (HepG2).

## Chapter 1 Introduction

2. To determine the inhibitory effects of AFB<sub>1</sub> on the type I IFN pathway with luciferase gene reporter assay.
3. To use RT-qPCR to determine the effects of AFB<sub>1</sub> on mRNA levels of key signaling proteins of the JAK-STAT-ISRE pathway
4. To use immunoblot assay to determine the effects of AFB<sub>1</sub> on key signaling proteins of the JAK-STAT-ISRE pathway.
5. To determine the biological effects of AFB<sub>1</sub> inhibition/suppression of the type I IFN response using chandipura virus as a model.



## CHAPTER TWO LITERATURE REVIEW

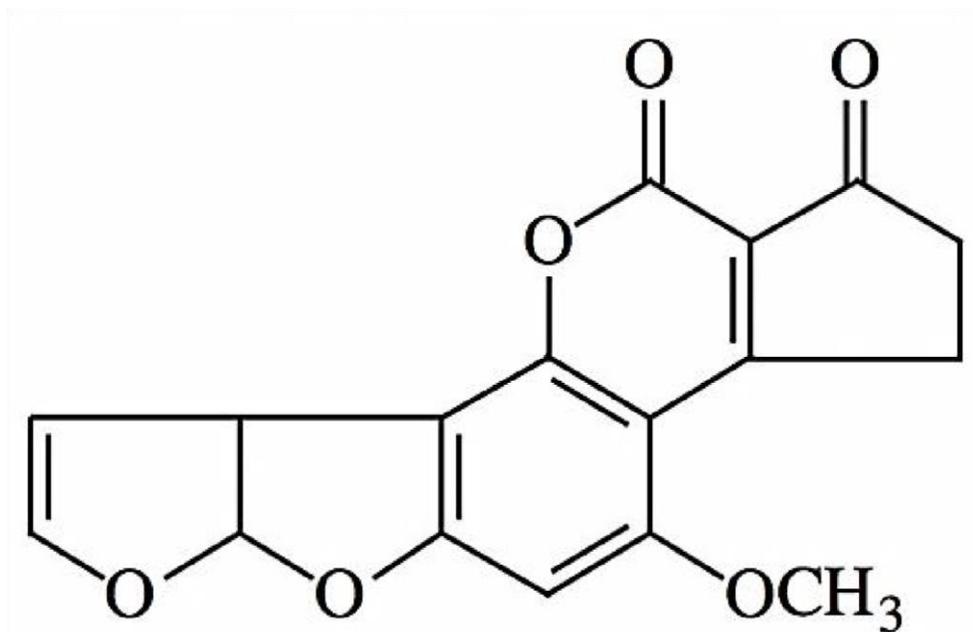
### 2.1 Distribution of fungi that produce aflatoxins

The fungi that produce aflatoxins mainly belong to the genus *Aspergillus*. The two most important species of *Aspergillus* responsible for the production of most aflatoxins in food crops worldwide are *Aspergillus flavus* and *Aspergillus parasiticus*. Although the two species have similar geographical ranges, *Aspergillus parasiticus* is less ubiquitous and is rare in Southeastern part of Asia. On the other hand *Aspergillus flavus* is ubiquitous and is commonly found in certain cereals that cultivated under environmental stresses such as drought. *Aspergillus flavus* and *Aspergillus parasiticus* colonize agricultural produce such as maize, spices, oilseeds, groundnuts, peanuts, walnuts, almonds, cottonseed, corn, millet etc and produce aflatoxins during growth periods, harvesting, threshing, drying, storage and transportation and usually produce AFB<sub>1</sub> and AFB<sub>2</sub> (Strosnider *et al.*, 2006). AFG<sub>1</sub> and AFG<sub>2</sub> are mostly produced by *Aspergillus parasiticus* (Strosnider *et al.*, 2006). Other fungal species belonging to the genus *Aspergillus* which also produce aflatoxins include *Aspergillus nomius*, *Aspergillus niger* and *Aspergillus australis*. The *Aspergillus* species are found mostly in soil, decaying vegetation, hay and grains undergoing microbiological deterioration. *Aspergillus* growth and aflatoxin production is dependent upon the temperature, humidity, host plant type, and the strain of fungus; high humidity usually required for growth (Williams *et al.*, 2004).

### 2.2 Chemistry and types of aflatoxins

Aflatoxins are a family of structurally related secondary metabolites that are produced by the fungi *Aspergillus flavus* and *Aspergillus parasiticus*. Secondary

metabolites are chemical substances produced that are produced by living organisms that are not essential for the growth of the producing organism. Chemically, the aflatoxins are highly substituted coumarins that contain a fused dihydrofurofuran moiety. There are six main groups of aflatoxins; four main naturally produced aflatoxins known as AFB<sub>1</sub> (**Fig 2.1**), AFB<sub>2</sub>, AFG<sub>1</sub> and AFG<sub>2</sub> and two additional metabolic products known as AFM<sub>1</sub> and AFM<sub>2</sub>. AFM<sub>1</sub> is an intermediate products of AFB<sub>1</sub> metabolism in humans and animals while AFM<sub>2</sub> is an intermediate products of AFB<sub>2</sub> metabolism in the milk of cattle fed on contaminated meals. Whereas the B designation of AFB<sub>1</sub> and AFB<sub>2</sub> resulted from the production of blue fluorescence colours under ultraviolet (UV) light on thin layer chromatographic plates, the G designation refers to the green fluorescent colours produced under ultraviolet (UV) light on thin layer chromatographic plates. The AFM<sub>1</sub> and AFM<sub>2</sub> were first isolated from milk of lactating animals fed on aflatoxin preparations hence the M designation. The subscript numbers 1 and 2 indicate the major and minor compounds respectively. AFB<sub>1</sub> and AFG<sub>1</sub> have an unsaturated bond at the 8, 9 position on the terminal furan ring. Studies have shown that epoxidation at this position is crucial for the carcinogenic potency (Groopman and Kensler, 2005).



**Fig. 2.1: Chemical structure of AFB<sub>1</sub>:** AFB<sub>1</sub> like all other aflatoxins is made up of dihydrofuran or tetrahydrofuran residues that are fused to a substituted coumarins ring. The difference between the AFB and the AFG molecules is that the AFG molecules have a lactone ring instead of the cyclopentenone ring. The AFB<sub>1</sub> and AFG<sub>1</sub> have double bonds at the positions 8 and 9 on the terminal furan and this confers the distinct carcinogenic properties to AFB<sub>1</sub> and AFG<sub>1</sub>. The structure of AFB<sub>1</sub> was adopted from Smela *et al.* (2002).

### 2.3 Physical and chemical properties of aflatoxins

Aflatoxins exist as colourless to pale-yellow crystalline substances at room temperature (IARC, 1993). They dissolve sparingly in water and hydrocarbons. However, they can be completely dissolved in methanol, acetone and chloroform but are insoluble in non-polar solvents. Aflatoxins can easily be degraded in light and air especially when exposed to oxidizing agents, ultraviolet light or strongly acidic or basic solutions. Aflatoxins breakdown at temperatures between 237°C and 299°C. Aflatoxins are not degraded under normal cooking temperatures but can be completely destroyed by autoclaving in the presence of ammonia or by treatment with bleach containing sodium hypochlorite.

### 2.4 Human exposure to aflatoxins

People usually become exposed to aflatoxins by consuming contaminated food. The fungal species that produce aflatoxins basically grow on corn and other grains, peanuts, tree nuts and cottonseed meal. Consumption of meat, eggs, milk and other edible products from animals that consume aflatoxin contaminated feed are also sources of potential exposure. Maize and nuts especially groundnuts are the major sources by which humans become exposed to aflatoxins because; (i) they are very prone to *Aspergillus* infection and subsequent contamination with aflatoxins, (ii) they are heavily consumed globally (Wu and Khlangwiset, 2010).

Generally food may contain AFB<sub>1</sub> and AFB<sub>2</sub> in concentration ratios of 1.0:0.1. In situations where AFB<sub>1</sub>, AFB<sub>2</sub>, AFG<sub>1</sub> and AFG<sub>2</sub> occur may be present in concentration ratios of 1.0: 0.1: 0.3:0.03 (Probst *et al.*, 2007). Even though moulds contamination is usually seen

## Chapter 2 Literature Review

as universal problem, the quantity of aflatoxins in cereal products can differ from less than 1µg/kg (1ppb) to more than 12,000 µg/kg (12000ppb) (Probst *et al.*, 2007). In a study to investigate the cause of death of some people in Kenya who were suspected to have consumed aflatoxin contaminated food, it was estimated that people were exposed to 50mg of AFB<sub>1</sub> on daily basis (Probst *et al.*, 2007). In a study to determine the immune status in relation to aflatoxin levels of Ghanaian adults chronically exposed to aflatoxin in their diets, Jiang *et al.* (2005) reported that on the average Ghanaians who were recruited into the study consumed at least 10µg (32µM) of AFB<sub>1</sub> per day in their diets. It has been reported that infants may become exposed to aflatoxins through the consumption of breast milk (Zarba *et al.*, 1992). A study conducted by Somogyi and Beck (1993), to determine the levels of aflatoxins in the breast milk of nursing mothers from Africa and Germany revealed that about 34% of breast milk samples from Africa contained aflatoxins but aflatoxins were not found in all the samples from Germany. They also reported that the commonest aflatoxin found in breast milk was AFM<sub>1</sub> which occurred at concentrations that ranged from 0.02 to about 1.8µg/L. However, the most abundant aflatoxin that was found AFB<sub>1</sub> which was detected at concentrations of 8.2µg/L.

Aflatoxin exposure may also be facilitated by the type of work an individual is engaged in. For example, humans also become exposed to aflatoxins by inhaling aflatoxin containing dust generated during the handling and processing of contaminated crops and feeds. Individuals who are at greater risk of occupational exposure to aflatoxins are farmers and agricultural workers. In a study conducted by Autrup *et al.* (1993) in Denmark in which blood samples of 45 animal-feed factory workers were taken and analyzed, it was reported that aflatoxin was detected in their blood after working for four weeks in the factory or unloading raw materials from the ships. Similarly, a study conducted by Ghosh *et al.* (1997

) to determine the levels of aflatoxins in respiratory samples of workers at rice and corn processing factory in India revealed that aflatoxins were present at concentrations of 0.00002 to 0.0008 $\mu\text{g}/\text{m}^3$ .

Information gathered from epidemiological studies has revealed that there is a significant statistical correlation between aflatoxin intake and the incidence of HCC globally. The Joint FAO/WHO Expert Committee on Food Additives (JECFA) using epidemiological data from China and data from animal toxicity studies conducted a quantitative risk assessment of aflatoxin in 1998 in order to estimate the impact of different regulatory standards on aflatoxin-induced HCC in populations with or without chronic

HBV infection. Based on previous cohort study that estimated cancer potency in both HBsAg positive and HBsAg negative individuals (Yeh *et al.*, 1989), the JECFA aflatoxin risk assessment chose two different cancer potency factors for aflatoxin: 0.01 cases per 100,000 per year per ng/kg bw/day aflatoxin exposure for individuals without chronic HBV infection and 0.30 corresponding cases for individuals with chronic HBV infection. Based on the assumption that all foods containing higher than standard levels of aflatoxins were discarded and that there were enough maize and nuts to preserve consumption patterns, JECFA determined that HCC incidence would decrease by about 300 cases per billion people per year if stricter aflatoxin standard was followed in nations with HBV prevalence of 25% (Joint FAO/WHO Expert Committee on Food Additives (JECFA), 1998). However, in nations where HBV prevalence was > 25%, the stricter aflatoxin standard would only save 2 HCC cases per billion people per year (Henry *et al.*, 1999 ). In 2008, another study conducted by Shephard (2008) who combined the estimates of JECFA with exposure assessments based on data collected from various studies in Africa on staple food

consumption and estimated the population risk for aflatoxin-induced HCC in selected subSaharan African nations reported that there was a very high population risk for HCC based on exposure to aflatoxin.

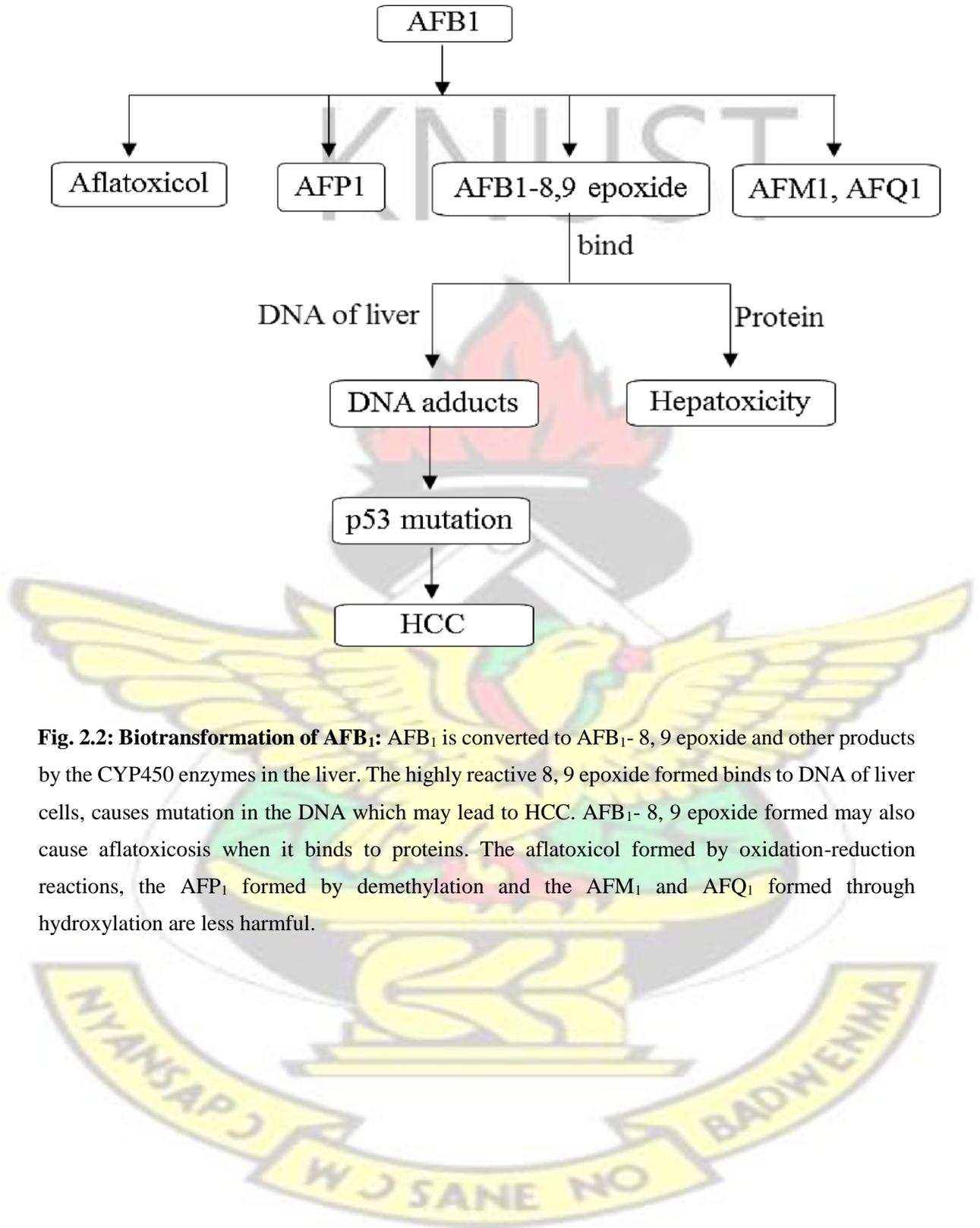
## 2.5 Metabolism of AFB<sub>1</sub>

Aflatoxins are metabolized into a variety of products such as aflatoxicol, aflatoxin Q<sub>1</sub>(AFQ<sub>1</sub>), aflatoxin P<sub>1</sub> (AFP<sub>1</sub>), and AFM<sub>1</sub> in the liver by cytochrome P450 (CYP450) group of enzymes when ingested (Fig. 2.2). In addition, when aflatoxins especially AFB<sub>1</sub> is transported to the liver, it converted to the reactive oxygen species; AFB<sub>1</sub>- 8, 9 epoxide intermediate by CYP450 enzymes especially CYP1A2, CYP3A4 (Wild and Gong, 2010., Sudakin, 2003). The AFB<sub>1</sub>- 8, 9 epoxide metabolites formed can be detoxified through conjugation with glutathione mediated by the enzyme glutathione- S- transferase (GST) to form a stable, non-toxic, polar product that is excreted in the bile (Kew, 2008). The aflatoxin-glutathione product also goes through systematic metabolic processes in the liver and kidneys leading to its excretion as mercapturic acid in the urine. However, if the amount of AFB<sub>1</sub> ingested in the diet exceeds the capacity of the GST enzymes to detoxify the epoxides formed or if, for any reason the activity of GST is decreased (for example by polymorphisms of the GST gene), the highly reactive AFB<sub>1</sub>-8, 9 epoxide may bind to liver proteins and lead to their failure resulting in acute aflatoxicosis. Alternatively, the 8, 9 epoxides may bind to and modify DNA of liver cells leading to the formation of promutagenic lesions that result in the activation of proto-oncogenes and the inactivation of the tumour suppressor genes. The AFB<sub>1</sub>- 8, 9 epoxide reacts with a N<sup>7</sup> atom of guanine to form a promutagenic DNA adduct (aflatoxin-N<sup>7</sup>-guanine). This aflatoxin-DNA adduct is

## Chapter 2 Literature Review

unstable and undergoes depurination leading to its excretion in the urine. The activity of GST is much higher in animal species that are resistant to the carcinogenicity of aflatoxin such as mice than in susceptible animal species such as rats. GST activity in humans is lower than either mice or rats, suggesting that humans are less capable of detoxifying aflatoxin-B<sub>1</sub>- 8, 9 epoxide (IARC, 1987).





**Fig. 2.2: Biotransformation of AFB<sub>1</sub>:** AFB<sub>1</sub> is converted to AFB<sub>1</sub>- 8, 9 epoxide and other products by the CYP450 enzymes in the liver. The highly reactive 8, 9 epoxide formed binds to DNA of liver cells, causes mutation in the DNA which may lead to HCC. AFB<sub>1</sub>- 8, 9 epoxide formed may also cause aflatoxicosis when it binds to proteins. The aflatoxicol formed by oxidation-reduction reactions, the AFP<sub>1</sub> formed by demethylation and the AFM<sub>1</sub> and AFQ<sub>1</sub> formed through hydroxylation are less harmful.

## 2.6 Mechanisms of carcinogenesis of AFB<sub>1</sub>

Studies have shown that aflatoxins cause genetic damage in cultured cells from humans and experimental animals and in humans and experimental animals exposed to aflatoxins *in vivo*. Types of genetic damage that are observed in cultured cells and animals include the formation of DNA adduct, albumin adduct, gene mutations, micronucleus formation, sister chromatid exchange and mitotic recombination (IARC, 1987).

In humans and susceptible animal species, AFB<sub>1</sub> is metabolically converted to unstable reactive AFB<sub>1</sub>-8, 9-*exo*-epoxide in the liver by several CYP450 enzymes mainly CYP4501A2 and CYP4503A4 (Mace *et al.*, 1997). The 8,9-*exo*-epoxide metabolites bind covalently to DNA preferentially on the N7- positions of guanines to form primary DNA adducts (8-9, dihydro-8-(N7-guanyl)-9-hydroxy aflatoxin; AFB<sub>1</sub>-N7-Gua (Gallagher *et al.*, 1994). The primary adduct is rapidly converted to two secondary lesions; an apurinic (AP) site and a stable ring-opened AFB<sub>1</sub>-Formamidopyrimidine (AFB<sub>1</sub>-FAPY) adduct (Smela *et al.*, 2002). The AP site as well as AFB<sub>1</sub>-FAPY adduct which is considered as the most mutagenic lesion (Smela *et al.*, 2002) are repaired by nucleotide excision repair (NER) or base excision repair (BER) (Waters *et al.*, 1992, Sarasin *et al.*, 1977). However, improper repair leads to AGG to AGT transversion mutations. In the HCC cells of patients exposed to aflatoxins, the mutations occur at codon 249 in the tumour suppressor gene *TP53* which result in the substitution of the amino acid arginine into serine (R249S) in the p53 protein (Hsu *et al.*, 1991, Aguilar *et al.*, 1993). Mutated R249S p53 expression may lead to inhibition of apoptosis, inhibition of p53 mediated transcription and stimulation of liver cell growth (Martin and Dufour, 2008). This mutation is detected in over 50% of HCC in high incidence areas of Africa and China (Hsu *et al.*, 1991, Bressac *et al.*, 1991). However, this

mutation is uncommon in regions where aflatoxin is not present at significant levels in the diet and in cancers other than HCC (Ozturk, 1991).

The tumour suppressor gene *TP53* encodes for tumour suppressor protein p53. p53 is usually maintained at low levels under normal conditions when it binds to ubiquitinligases such as Mdm2 (also referred to as Hdm2 in humans) and then degraded by proteasome enzymes (Lereau *et al.*, 2012). However, when certain stress factors are present in the cell, p53 undergoes post- translational processes which may include the phosphorylation on serine 15 (Pser15-p53). The phosphorylated p53 then binds specific DNA response elements which lead to trans-activation of genes involved in cell cycle arrest, apoptosis, DNA repair or senescence (Hollstein and Hainaut, 2010). These responses may result in the repair of damaged DNA which aid in maintaining the genetic integrity of the cells. The response may also stimulate apoptosis of damaged cells leading to their elimination from the system.

## **2.7 AFB<sub>1</sub>-induced HCC in humans and experimental animals**

As stated already the aflatoxins are common contaminants of many foods such as cereal grains, groundnuts, oilseeds that are mostly consumed by humans throughout the resource limited nations of the world (Eaton and Groopman, 1994). The greater portions of agricultural land in tropical and sub-tropical regions of the world like Africa and Asia lie in climatic regions favourable for *Aspergillus flavus* and *Aspergillus parasiticus* proliferation. These two species are noted for their high and efficient production of aflatoxins (Liu and Wu, 2010). Aflatoxin is a controllable risk factor in food yet the parts of the world in which the risk of production is particularly high have limited resources to implement most

aflatoxin control strategies (Liu and Wu, 2010). The early evidence that aflatoxins are carcinogens in humans came from epidemiological studies that correlated geographic variation in aflatoxin content of foods with geographic variation in the incidence of HCC. Studies have shown that prolonged exposure to aflatoxin is associated with an increase in the incidence of HCC in humans and sensitive animal species (Groopman *et al.*, 2008). Studies in Uganda, Swaziland, Thailand, Kenya, Mozambique and China demonstrated strong, significant positive correlations between estimated aflatoxin intake or aflatoxin levels in food samples and the incidence of HCC (IARC, 1993). In the United States, a 10% excess of HCC was observed in the southeast, where the estimated average daily intake of aflatoxin was high, compared with the North and West areas with low aflatoxin intake (IARC, 1993, IARC, 1987).

In an experiment to determine the toxicological hazard level of aflatoxins, Wogan *et al.*, 1974) fed rats with aflatoxins at levels of 1, 5, 15, 50 and 100 ppb and reported that these levels induced tumours at incidence of 4.5%, 9%, 19%, 80% and 100% respectively (Wogan *et al.*, 1974) thus suggesting that for cancer risk assessment, it is traditionally assumed that there is no threshold of exposure to a carcinogen below which there is no observable adverse effects (National Research Council (NRC), 2008). The adverse health consequences of aflatoxins in populations are quite varied, sometimes causing acute effects such as rapid death (Azziz-Baumgartner *et al.*, 2005) and chronic outcomes such as HCC (Ross *et al.*, 1992, Qian *et al.*, 1994). Aflatoxin-induced HCC risk varies significantly from one geographic region to another and even among different populations within the same country (Liu and Wu, 2010). In their study to assess the global burden of aflatoxin-induced

HCC, Liu and Wu (2010) found that sub-Saharan Africa is the most important region for HCC cases attributable to aflatoxin. In addition, Liu and Wu reported that Southeast Asia and China are also very key areas where aflatoxin related HCC is common. It is worth noting that in Mexico where HBV prevalence is low but aflatoxin contamination in food is relatively high, aflatoxin appears to be a significant risk factor in the development of HCC among those without HBV with an estimate of 152-924 HCC cases per year per 100,000 people (Liu and Wu, 2010). Wild and Hall (2000) reported that rural populations usually tend to have high levels of aflatoxin exposure than do urban dwellers probably because urban dwellers consume more diversified diets than the rural populace and may have food that is controlled for aflatoxin contaminants. It has also been reported that there is a strong seasonal variation in aflatoxin exposure that correlates with food availability (Tajkarimi *et al.*, 2007, Gnonlonfin *et al.*, 2008). To elucidate the importance of aflatoxin in the etiology of HCC, a total of 6,487 residents aged 30 to 35 years were recruited in a community based cohort study in the Penghu Islets in Taiwan. It was reported in that study that among the 33 HCC cases recorded, 31 (94%) were chronic hepatitis B surface antigen (HBsAg) carriers (Chen *et al.*, 1996). Chen *et al.* (1996) also reported that among the 20 HCC patients and 86 matched healthy controls whose serum samples were tested for AFB<sub>1</sub>, 13 (65%) HCC patients and 32 (37%) matched controls were seropositive for aflatoxins. In many populations in which HCC occurs at a high incidence, HBV infection and high levels of aflatoxin ingestion exist concurrently. Epidemiological studies support the existence of a synergy between chronic HBV infection and exposure to AFB<sub>1</sub>. It has been reported that the R249S mutation is almost exclusively present in HCC of patients exposed to both chronic HBV and AFB<sub>1</sub>, thus suggesting that DNA damage by HBV and AFB<sub>1</sub> may influence each other (Kew, 2003). Although the biological mechanism underlying this synergy is not fully understood it is believed that HBV and aflatoxin may influence each other through one of the following: firstly, when an individual is exposed to aflatoxin during HBV infection, HBV may decrease the repair of DNA and make the cells more permissive to the formation of mutations (Jia *et al.*, 1999). Secondly, during the development of chronic HBV infection, inflammatory stress may enhance AFB<sub>1</sub> metabolism and DNA damage, increasing mutagenesis (Chemin *et al.*, 1999). Thirdly, in pre-cancer or cancer HCC cells, the mutant R249S p53 protein may contribute to the survival of cells expressing viral antigens (Gouas *et al.*, 2009).

### **2.8 Toxicological effects of aflatoxins in humans**

Aflatoxins are remarkably potent often causing disease even when ingested in minute quantities (NRC, 1983). Aflatoxins cause disease throughout the body, but are most commonly known for causing acute or chronic liver disease and liver cancer. Aflatoxin exerts its toxicity in several ways when it is consumed. In the intestine, it may alter intestinal integrity (Gong *et al.*, 2008) or modulate the expression of cytokine proteins that signal to

each other and to immune system components. These effects may result in stunted growth in children and or immune suppression (Wu, 2010). The effects of aflatoxins on humans as with other lower animals depend upon dosage and duration of exposure. Humans usually become exposed to aflatoxins either by ingesting a high amount of aflatoxins in a very short time (acute exposure) or by ingesting a small amount of aflatoxins at a time, but over a long period (chronic exposure).

Acute exposure to high levels of aflatoxins can cause liver disease, mental impairment, abdominal pain, vomiting, and disruption of food digestion, coma and aflatoxicosis with a case fatality rate of approximately 25% (Cullen and Newberne, 1994). Certain conditions of the environment increase the probability of acute aflatoxicosis in humans. These conditions include the unavailability of food, environmental conditions that favour fungal growth and development in crops and commodities and the lack of regulatory systems for aflatoxin monitoring and control. Outbreaks of acute aflatoxicosis are a recurring public health problem throughout the world (CDC, 2004, Lye *et al.*, 1995) . Several cases of acute aflatoxicosis have been reported in Africa and they were associated with the consumption of home-grown maize contaminated with aflatoxins. Two of such acute aflatoxicosis outbreaks occurred in Kenya in 1982 during which 12 people died and in 2004 in which

317 cases were recorded with 125 people dying in the central provinces (Strosnider *et al.*, 2006, Probst *et al.*, 2007) . Experimental animal evidence suggests that chronic exposure to aflatoxins may lead to impaired immunity, reduced uptake of nutrients from the diets and growth retardation (Miller and Wilson, 1994 , Hall and Wild, 1994). Several studies of children in Benin and Togo have reported an association between aflatoxin-albumin adduct levels and impaired growth (Gong *et al.*, 2003 , Gong *et al.*, 2004). A study conducted in

Ghana by Jiang *et al.* (2005) showed that a higher level of AFB<sub>1</sub>-albumin adducts in plasma was associated with lower percentages of certain leukocyte immunophenotypes. Another study conducted among Gambian children found an association between serum aflatoxin-albumin levels and reduced salivatory secretory IgA levels (Turner *et al.*, 2003). HCC as a result of chronic aflatoxin exposure has been well documented generally in association with HBV or other risk factors (Qian *et al.*, 1994, Groopman *et al.*, 2008).

## **2.9 Mechanism of immunomodulatory effects of AFB<sub>1</sub> in humans**

The molecular mechanism (s) by which aflatoxins and other mycotoxins modulate the immune system is poorly understood. Evidence available on the other hand suggests that aflatoxins and other mycotoxins may exert their immunosuppressive effects by one of the following ways; they may inhibit replication of DNA, transcription and protein synthesis of genes needed to activate the innate and adaptive immune response through the use of many different mechanisms (Jolly *et al.*, 2008 ). For example, it has been reported that AFB<sub>1</sub>-8, 9-exo-epoxide formed as a result of AFB<sub>1</sub> metabolism binds preferentially to mitochondrial DNA in comparison with nuclear DNA thus hindering ATP production (Verma, 2004 , Bhat *et al.*, 1982). The damage that is caused to mitochondrial DNA is through adduction and mutations to the mitochondrial membranes which leads to increased cell size and disruption of energy production (Verma, 2004 , Bbosa *et al.*, 2013b). AFB<sub>1</sub> and its metabolites have been reported to affect protein synthesis by binding to biological molecules such as essential enzymes, block ribosomal translocase thus inhibiting protein synthesis (Eaton and Gallagher, 1994). In addition, aflatoxins have been reported to interfere with certain

enzymes and substrates that are required for initiation, transcription and translation processes which are involved in the synthesis of protein (Bbosa *et al.*, 2013a).

In addition to the above, quite a number of studies have attempted to look at the immunosuppressive effect of AFB<sub>1</sub> in humans. For example Jiang *et al.* (2015) investigated the effects of AFB<sub>1</sub> on the mRNA expression levels of certain cytokines namely IL-2, IL-4, IL-6, IL-10, IL-17, IFN- $\gamma$  and TNF- $\alpha$  in the small intestines (duodenum, jejunum and ileum) of broilers and reported a general reduction in the mRNA levels of IL-2, IL-4, IL6, IL-10, IL-17, IFN- $\gamma$  and TNF- $\alpha$  in AFB<sub>1</sub> treated group compared with the untreated or the control group. In addition Jiang *et al.* reported that AFB<sub>1</sub>- treated broilers showed a decreased proportion of intestinal T-cells subset compared to the control group. Other researchers have also demonstrated that AFB<sub>1</sub> suppressed/inhibited the mRNA and protein expression of IL-4, IL-6 and IL-10 from the peritoneal macrophages, splenic lymphocytes and macrophage cell lines (Bruneau *et al.*, 2012, Dugyala and Sharma, 1996, Marin *et al.*, 2002). However Li *et al.* (2014) reported that AFB<sub>1</sub> increased the levels of IL-6, IFN- $\gamma$  and TNF- $\alpha$  mRNA and protein expression in the serum and spleen of broilers fed with diet containing AFB<sub>1</sub> (0.074 mg/kg). A study conducted by Qian *et al.* (2014) to investigate the effects of AFB<sub>1</sub> on splenic lymphocyte phenotypes and the inflammatory cytokine production in male F344 rats reported that exposure of animals to AFB<sub>1</sub> resulted in a general dose-dependent decrease in IL-4 production by CD4<sup>+</sup> T cells. In addition AFB<sub>1</sub> suppressed/inhibited IFN- $\gamma$  and TNF- $\alpha$  production by CD4<sup>+</sup>T cells and CD3<sup>-</sup>CD8a NK cells respectively. It has also been reported that exposure of murine macrophages to AFB<sub>1</sub> *in vitro* resulted in a decreased secretion of

## Chapter 2 Literature Review

anti-inflammatory IL-10 and increased production of pro-inflammatory IL-6 (Bruneau *et al.*, 2012).

In their study to evaluate the effects of AFB<sub>1</sub> on STAT5A gene expression, Forouharmehr *et al.* (2013) treated bovine mammary epithelial cells with AFB<sub>1</sub> and quantified the mRNA levels of STAT5A by RT-qPCR. They reported that AFB<sub>1</sub> significantly suppressed/inhibited STAT5A gene expression at the transcript levels in a dose-dependent fashion and that the suppression/inhibition resulted in the reduction of proliferation and differentiation of mammary epithelial cells which affected milk protein quantity and quality. A study conducted by Rossano *et al.* (1999) to investigate the effects of AFB<sub>1</sub> at low concentrations (0.01-1.0pg/ml) on the release and expression of IL-1 $\alpha$ , IL-

6 $\alpha$ , TNF- $\alpha$  by human monocytes activated with bacterial lipopolysaccharide showed that at concentration of 0.05pg/ml, AFB<sub>1</sub> decreased each of the 3 cytokines and completely blocked the transcription of their mRNAs. The study also showed that the mRNA levels of  $\beta$ -actin was not affected by AFB<sub>1</sub> and this observation lead the authors to conclude that AFB<sub>1</sub> exerts its effects on the production of cytokines probably by specifically inhibiting the synthesis of certain mRNAs without affecting protein synthesis as a whole. They speculated that AFB<sub>1</sub> may inactivate some kinases that are involved in the activation of genes that code for cytokines. However, a study undertaken by Dugyala and Sharma (1996) showed that AFB<sub>1</sub> significantly increased mRNA levels of major cytokines produced by macrophages but suppressed their corresponding protein levels. Indeed, AFB<sub>1</sub> inhibition of viral interferon induction has been reported in experiments performed by infecting monkey kidney cells (LLC-MK) with influenza virus (Hahon *et al.*, 1979).

## 2.10 Effects of AFB<sub>1</sub> in animal and human cell cultures

*In vitro* studies have been done to study the effects of AFB<sub>1</sub> in animal and human immune system cells. The cells of the immune system undergo continual proliferation and differentiation even though they are susceptible to the toxic as well as the immunosuppressive effect of AFB<sub>1</sub> and other mycotoxins. A study conducted by Lereau *et al.* (2012) to determine the cytotoxic effects of AFB<sub>1</sub> on HepaRG cells reported that AFB<sub>1</sub> had no measurable cytotoxic effect on HepaRG cells upon exposure to concentrations up to 10 $\mu$ M (3.125 $\mu$ g/ml) after treating cells with AFB<sub>1</sub> for 4 hours followed by 48 hours of culture in medium without AFB<sub>1</sub> (Lereau *et al.*, 2012).

In another study, Cheng *et al.* (2002) investigated the cytotoxic effects of AFB<sub>1</sub> on duck peritoneal macrophages by incubating the cells with increasing concentrations of AFB<sub>1</sub> (0, 5, 10, 20, 50 and 100 $\mu$ g/ml) for 12 hours and reported that the viability of cells decreased significantly with increasing concentrations of AFB<sub>1</sub> (Cheng *et al.*, 2002). Furthermore, Al-Hammadi *et al.* (2014) conducted a study to investigate the toxic effects of AFB<sub>1</sub> on human lymphocytes *in vitro* and reported that exposure of human lymphocytes to AFB<sub>1</sub> resulted in the impairment in cellular oxygen consumption, caspase activation and necrosis underscoring the immunosuppressive activity in humans exposed to this lethal mycotoxin (Al-Hammadi *et al.*, 2014). In a related study, Hahon *et al.* (1979) investigated the cytotoxic effects of four basic related aflatoxins namely AFB<sub>1</sub>, AFB<sub>2</sub>, AFG<sub>1</sub> and AFG<sub>2</sub> on LLC-MK<sub>2</sub> cells in confluent monolayers. They reported that treating the confluent monolayers of LLC-MK<sub>2</sub> with AFB<sub>2</sub>, AFG<sub>1</sub> and AFG<sub>2</sub> concentrations up to 500  $\mu$ g did not affect the viability of the cells. However, when the cells were treated with AFB<sub>1</sub> concentration up to 500  $\mu$ g, there was a dose-dependent decrease in the viability of the cells

(Hahon *et al.*, 1979).

## 2.11 Effects of AFB<sub>1</sub> on viral replication

Epidemiological evidence available suggests that there is synergy between prolonged AFB<sub>1</sub> exposure and chronic HBV infection in hepatocarcinogenesis. Studies have shown that long term exposure to AFB<sub>1</sub> coupled with chronic HBV infection increases the risk of HCC development. Lereau *et al.* (2012) conducted a study to determine the short-term effects of AFB<sub>1</sub> exposure on HBV replication and reported that exposure up to 5  $\mu$ M AFB<sub>1</sub> concentrations well below the half maximum inhibitory concentration (IC 50) of >

50  $\mu$ M obtained in HepaRG cells decreased HBV replication after 48 hours as measured by decrease in viral antigens (HBsAg, HbeAg and large envelope proteins) in culture media. They also reported that intracellular HBV DNA, HBV transcript levels as well as HBsAg were also decreased. In addition they reported that HBV infection did not modify significantly the AFB<sub>1</sub>-DNA adducts formation or repair and that induction of p53 in response to AFB<sub>1</sub> was similar in infected and non-infected HepaRG cells. These data made the authors conclude that in HepaRG cell line AFB<sub>1</sub> and HBV do not cooperate to increase DNA damage caused by AFB<sub>1</sub> (Lereau *et al.*, 2012).

The ability of AFB<sub>1</sub> to suppress/inhibit influenza virus-induced IFN production in cell cultures was demonstrated by Hahon *et al.* (1979). In their study they investigated the effects of AFB<sub>1</sub> (1-500  $\mu$ g) on IFN induction by influenza virus in confluent LLC-MK<sub>2</sub> cell monolayer and reported that 100  $\mu$ g of AFB<sub>1</sub> was the most effective concentration in suppression/inhibiting IFN production. Further studies by Hahon *et al.* revealed that the degree of inhibition of IFN production by AFB<sub>1</sub> was dependent on the sequence in which AFB<sub>1</sub> and the viral inducers were administered onto the cell monolayers. They demonstrated that AFB<sub>1</sub> suppressed/inhibited IFN production by 66% when the cells were treated with AFB<sub>1</sub> (50  $\mu$ g) for at least 20 hours before the addition of the viral inducer. When AFB<sub>1</sub> and the viral inducers were added in tandem, IFN production was suppressed/inhibited by 40%. However, Hahon *et al.* demonstrated that adding AFB<sub>1</sub> 2 hours after the addition of the viral

inducers had a negligible influence on IFN production suggesting that AFB<sub>1</sub> does not impair the sequence of viral IFN induction once the action is initiated. In addition, Hahon *et al.* investigated the rate of growth of influenza virus in AFB<sub>1</sub> treated and untreated cells and reported that the levels of virus concentration attained in AFB<sub>1</sub> treated cells were two to four-fold higher compared with the untreated control.

The enhanced influenza viral growth rate observed in AFB<sub>1</sub> treated cells in the study of Hahon *et al.* was attributed to the ability of AFB<sub>1</sub> to inhibit IFN production (Hahon *et al.*, 1979).

Moreover, a study conducted by Barraud *et al.* (1999) to investigate the effects of AFB<sub>1</sub> exposure on the replication of duck hepatitis B virus in Pekin duck model during the initial stage of virus-AFB<sub>1</sub> interaction showed a significant increase in the titer of duck hepatitis B virus in the serum and liver of AFB<sub>1</sub> treated-ducks compared with dimethyl sulfoxide (DMSO) treated controls. The increase in viral replication observed in the Pekin duck model was confirmed *in vitro* in primary duck hepatocytes (Barraud *et al.*, 1999).

## 2.12 The Interferon system

Interferons (IFNs) are a family of signaling proteins that are manufactured and secreted by host cells in response to the presence of disease-causing agents such as viruses, bacteria and parasites. They are also synthesized and released by host cells in response to the presence of tumour cells. IFNs form one of the several components of the innate immune system that work to eradicate pathogens and tumour cells from the host. Currently three classes of IFNs have been discovered based on the receptor through which they signal and

on the amino acid sequence. These classes include type I, type II and type III IFNs. The type I, type II and type III are differentiated from each other through their amino acid sequence as reviewed in (Killip *et al.*, 2015).

The type I IFNs which comprises interferon-alpha (IFN- $\alpha$ ), interferon-beta (IFN- $\beta$ ), interferon-omega (IFN- $\omega$ ) and several other related molecules (Platanias, 2005) have similar amino acids sequence and were the first IFNs that were discovered. In mammals thirteen (13) different IFN- $\alpha$  gene types have been discovered. Also one to three IFN- $\beta$  genes (one in humans) and other genes such as IFN- omega (IFN- $\omega$ ), IFN-kappa (IFN- $\kappa$ ), IFN-delta (IFN- $\delta$ ) and INF-epsilon (IFN- $\epsilon$ ) have been identified as reviewed in (Hagberg and Ronnblom, 2015). The type I IFNs are known for the capacity to confer antiviral resistance on cells. Two members of the type I IFNs which play crucial roles in the innate immune response to pathogens are the IFN- $\alpha$  and IFN- $\beta$  genes. The other members of the type I IFN class play a relatively less defining role (reviewed in Randall and Goodbourn, 2008). The IFN- $\alpha$  is also referred to as leukocyte IFN. It is usually produced by leukocytes that have been infected with viruses. On the other hand, IFN- $\beta$  which is also known as fibroblast IFN is produced by epithelial cells or fibroblasts that have become infected with viruses as reviewed in (Killip *et al.*, 2015). The type I IFNs signal through a common receptor called type I IFN- $\alpha$  receptor (IFNAR) found on the surfaces of cells. The IFNAR comprises two chains namely IFNAR1 and IFNAR2 (de Weerd *et al.*, 2007 ). When engaged by the appropriate ligands, the receptor (IFNAR) works in activating a cascade of signal-transduction events in the host cells. This cascading process culminates in the transcription of different genes called IFN-inducible genes or IFN-stimulated genes (ISGs)

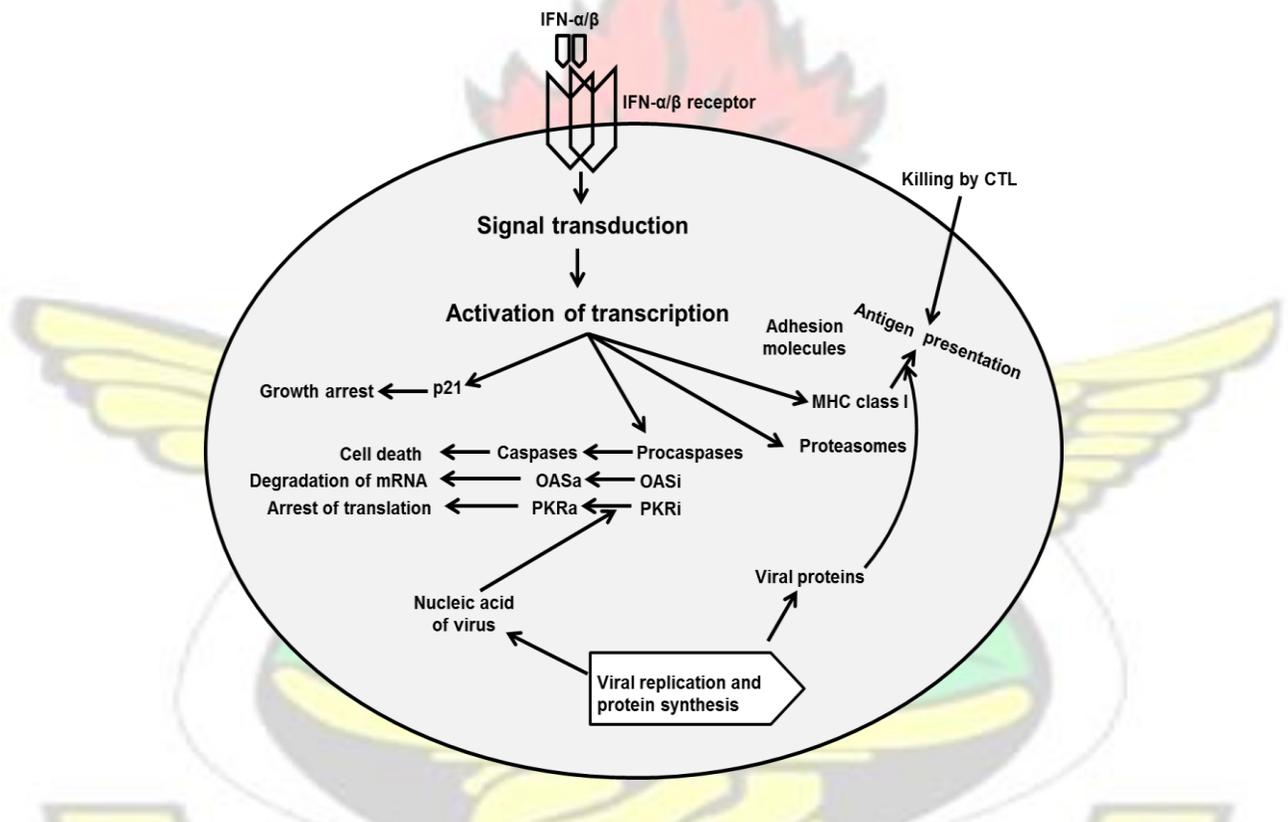
in the nucleus of the host cells. The transcription of ISGs ultimately leads to the establishment of antiviral state in the target cells. IFN- $\alpha/\beta$  the two major representatives of the type I IFN also regulate the immune system by activating effector-cell function. They also promote the development of the acquired immune response (reviewed in Randall and Goodbourn, 2008).

The type II IFNs are also known as the immune IFNs. The only representative of type II IFNs in humans is interferon-gamma (IFN- $\gamma$ ). Unlike type I IFNs which are produced in direct response to viral infections, the type II IFNs is produced after receptor engagement of T cells and natural killer (NK) cells during immune responses (reviewed in Hagberg and Ronnblom, 2015 ). Type II IFNs signal through a receptor known as interferon-gamma receptor (IFNGR) which has two subunits (Cohen and Parkin, 2001). The interaction between type II IFN and its receptor results in the phosphorylation and activation of STAT1 homodimer which ultimately induces the expression of genes containing IFN- $\gamma$  activated sequence (GAS) (reviewed in Hagberg and Ronnblom, 2015).

The type III IFNs were recently described and this group of cytokines consists of IFN- lambda1 (IFN- $\lambda$ 1), IFN-lambda2 (IFN- $\lambda$ 2) and IFN-lambda3 (IFN- $\lambda$ 3) and IFN-lambda4 (IFN- $\lambda$ 4) as reviewed in (Hagberg and Ronnblom, 2015 ). The IFN- $\lambda$ 1, IFN- $\lambda$ 2 and IFN- $\lambda$ 3 are also referred to as interleukin-29 (IL-29), interleukin- 28A (IL-28A) and interleukin-28B (IL-28B) respectively (Baccala *et al.*, 2005, Donnelly and Kotenko, 2010, Prokunina-Olsson *et al.*, 2013). Type III IFNs bind to IFN- $\lambda$  (IFNL) receptor which is mainly expressed by epithelial cells and also by plasmacytoid dendritic cells (pDCs), B cells

and monocytes (Sommereyns *et al.*, 2008, Yin *et al.*, 2012) and elicit an antiviral response similar to that of IFN- $\alpha$  &  $\beta$  (reviewed in Hagberg and Ronnblom, 2015).

In addition to the antiviral properties of IFNs which was established by Isaacs and Lindenmann (1957), IFNs have been proven to exhibit a myriad of biological effects which may include immunomodulatory and anti-tumour activities (Theofilopoulos *et al.*, 2005).



**Fig. 2.3: Biological effects of IFN- $\alpha$  and IFN- $\beta$ .** When IFN- $\alpha/\beta$  binds to its receptor, a sequence of signaling processes is initiated (see Fig. 2.4). The signaling process ultimately leads to the activation of IFN responsive proteins such as PKR, OAS, Mx etc. These proteins are normally enzymatic in nature and also lie latently in the host cells. The activation of these enzymes is dependent on the presence of viral co-factors such as dsRNA. When the viral co-factors are made available, these enzymes bring about a host of changes in the functions of the cells. Some of the changes may include translational arrest, apoptosis etc. All these changes cumulatively confer

antiviral state on the cell. There are other IFN-inducible factors that initiate cell cycle arrest and facilitate the processing and presentation (MHC class I) of viral particles to CTL for degradation.

Moreover, IFN- $\alpha/\beta$  has immunomodulatory functions which include: they promote the maturation of DCs, they up-regulate the activities of NK cells and CD8<sup>+</sup> T cells. They also induce the synthesis of IL-15 which promotes the division of memory CD8<sup>+</sup> T cells. Fig. 2.3 was redrawn from Randall and Goodbourn (2008).

### 2.13 Interferon regulatory factors

Interferon regulatory factors (IRFs) are a family of proteins or transcription factors that are involved in host immune response, haemotopoietic differentiation and immunomodulation (Paun and Pitha, 2007, Huang *et al.*, 2010). Nine members of the IRF family of transcription factors have been identified. These include IRF1, IRF2, IRF3, IRF4 (also known as PIP or ICSAT), IRF5, IRF6, IRF7, IRF8 (also known as ICSBP), and IRF9 (also known as ISGF3  $\gamma$ ) (Taniguchi *et al.*, 2001, Mamane *et al.*, 1999). IRFs contain a conserved amino (N)-terminal DNA binding domain (DBD) with five tryptophan repeats, that bear resemblance to the DBD of Myeloblastosis (myb) transcription factors (Veals *et al.*, 1992, Taniguchi *et al.*, 2001). The conserved N-terminal region is made up of about 120 amino acids, which folds into a structure that binds specifically to the IFN consensus sequence (ICS) which is located upstream of the IFN gene (Weisz *et al.*, 1992). All the IRFs except IRF1 and IRF 2 have carboxy (C)-terminal regions that have an IRF association domain (IAD) that is responsible for homo- and heteromeric interactions with other family members or transcription factors such as signal transducer and activator of transcription (STAT) (Taniguchi *et al.*, 2001, Mamane *et al.*, 1999).

Of the IRFs that have been identified, four of them namely IRF1, IRF3, IRF5 and IRF7 have been found to be positive regulators of type 1 IFN gene transcription (Honda *et al.*, 2006a). It has been shown that IRF1 is the first of the IRFs that was discovered to activate type 1 IFN gene promoters (Miyamoto *et al.*, 1988). The over-expression of IRF1 results in the induction of endogenous type 1 IFN genes. Matsuyama *et al.* (1993) reported in a study that although IRF1 induces type 1 IFN gene in some facets of TLR signaling, the induction of type 1 IFN was normally observed in virus-infected *Irf1*<sup>-/-</sup>-fibroblast. Genetargeting study has shown that IRF5 regulates the expression of inflammatory cytokine genes such as interleukin (IL)-12 and TNF- $\alpha$  but IRF5 is not needed for type 1 IFN gene induction by viruses or TLR agonists (Takaoka *et al.*, 2005). This indicates that the exact role of IRF1 and IRF5 in type 1 IFN induction is still not clear.

IRF3 and IRF7 are highly homologous and are now considered as key regulators of type 1 IFN gene expression induced by viruses. IRF3 is constitutively expressed and resides in latent form in the cytosol. Upon viral infection, IRF3 undergoes phosphorylation, dimerization and nuclear translocation (Yoneyama *et al.*, 1998, Lin *et al.*, 1998). The Cterminal region of human IRF3 has potential virus-mediated phosphorylation sites. These sites include serine 385, 386 (2 S site) and serine 396, 398, 402, 405, and threonine 404 (5 ST site). The phosphorylation of serine 396 was first observed in a study with a phosphospecific antibody (Servant *et al.*, 2003). Another report demonstrated that the phosphorylation of serine 386 is critical determinant for the activation of IRF3 (Mori *et al.*, 2004). Studies have shown that there is no direct evidence for the phosphorylation of the remaining 5 serine or threonine site (Honda *et al.*, 2006b). Unlike IRF3, IRF7 is expressed at a low concentration in most cells and is strongly induced by type 1 IFN- mediated signaling (Sato *et al.*, 1998b, Marie *et al.*, 1998). When IFNs bind to type 1 IFN receptor,

the hetero-trimeric transcriptional activator known as IFN stimulated gene factor 3 (ISGF3) is activated. ISGF 3 comprises IRF9, STAT1 and STAT2 and is responsible for the induction of the IRF7 gene. Like IRF3, IRF7 is found in the cytosol and upon viral infection, IRF7 undergoes serine phosphorylation in its C-terminal region which causes its dimerization and translocation into the nucleus. IRF7 forms a homodimer or heterodimer with IRF3 and each of these different dimers differentially acts on the type 1 IFN gene family members. Studies have shown that whereas the IRF3 is more potent in activating the IFN- $\beta$  gene than IFN- $\alpha$  genes, IRF7 activates both IFN- $\alpha$  and IFN- $\beta$  genes efficiently (Sato *et al.*, 1998b, Marie *et al.*, 1998).

The events in the cell that control the activity of IRF3 and IRF7 have been elucidated in recent years. These events constitute crucial antiviral pathways that are triggered by the detection of molecular patterns derived from viruses. There are at least two PRR systems in cells that detect the presence of viruses. These include Toll-like receptors (TLRs) found in the cell membrane and cytosolic PRRs such as retinoic acidinducible gene 1 (RIG-1) and melanoma differentiation-associated gene 5 (MDA5).

#### **2.14 Virus induction of IFNs**

Viral infections induce the expression of type I IFNs genes. When pathogens invade the system, certain protein molecules such as glycoproteins, nucleic acids, bacterial endotoxin (lipopolysaccharides), bacterial flagella, CpG motifs also referred to as pathogen associated molecular patterns (PAMPs) bind to specific receptors called pattern recognition receptor (PRRs) such as Toll-like receptors (located in the cell membranes) or RIG-1 and

MDA 5 (cystolic) (Honda *et al.*, 2006b). The binding of PAMPs to PRRs activate a cascade of events that finally lead to the release of IFNs.

Studies have shown that the release of IFN- $\beta$  is largely dependent on the activation of nuclear factor kappa B (NF- $\kappa$ B) and IFN regulatory factor-3 (IRF-3) (Paun and Pitha, 2007, Honda and Taniguchi, 2006). Before the cell is induced to release IFN, both NF- $\kappa$ B and IRF-3 lie latently in the cytoplasm. When the cell receives the appropriate signal, the

C-terminus of the IRF3 becomes phosphorylated resulting in conformational changes of IRF 3 protein. These changes cause IRF 3 to form dimmers which leads to unveiling of a nuclear-localization signal (NLS) (Panne *et al.*, 2007, Lin *et al.*, 1998, Dragan *et al.*, 2007). The phosphorylated IRF-3 moves to the nucleus of the cell where it is retained until it is dephosphorylated (Kumar *et al.*, 2000). Conversely, the NF- $\kappa$ B is usually bound to an inhibitor molecule called inhibitor of NF- $\kappa$ B (I $\kappa$ B) and lies inactive in the cytoplasm.

During viral infection, the signal that is generated causes phosphorylation of I $\kappa$ B. The phosphorylated I $\kappa$ B then combines with ubiquitin and becomes degraded by proteasomes.

When the NF- $\kappa$ B is freed from its inhibitors, the NLS of the p65 subunits of the NF- $\kappa$ B then becomes accessible and the NF- $\kappa$ B is translocated to the nucleus (Wullaert *et al.*, 2006, Hayden and Ghosh, 2004). For the optimal induction of IFN- $\beta$  gene, a c-jun/ATF2 heterodimer bind to the promoter of the IFN- $\beta$  gene. The IRF-3, NF- $\kappa$ B and c-jun/ATF2 complexes assemble in a co-operative manner to form what is called enhanceosome. The enhanceosome promote the assembly of basal transcriptional machinery which ultimately results in the production of IFN- $\beta$ .

The induction of IFN- $\alpha$  gene is not well understood (Civas *et al.*, 2002). Whereas the promoters of the IFN- $\beta$  genes have NF- $\kappa$ B sites, the promoters of the IFN- $\alpha$  gene lack the NF- $\kappa$ B sites. However, the promoters of the IFN- $\alpha$  gene contain several binding sites for members of the IRF family (reviewed in Randall & Goodbourn, 2008). It is not certain

as to which member of the IRF family stimulates the transcription of IFN- $\alpha$  gene but available evidence suggests that IRF-7 has a more relaxed DNA-binding specificity for IRF sites than other members of the IRF family (Morin *et al.*, 2002) and that IRF-7 stimulates IFN- $\alpha$  gene preferentially (Lin *et al.*, 2000, Au *et al.*, 1998) probably in association with IRF-3 (Morin *et al.*, 2002).

## 2.15 Mechanisms of type I IFN signaling and gene activation

Type I IFNs are one of the major subsets of cytokines that signal through Janus tyrosine kinases (JAKs) and STATs. There are four JAKs namely JAK1, 2, 3 and Tyk2 (O'Shea *et al.*, 2013). The STAT family of proteins consists of seven (7) different members: STAT1, 2, 3, 4, 5A, 5B and STAT 6 as reviewed in (Dutta and Li, 2013). The co-operative activities of JAKs and STATs regulate the expression of certain genes of the immune system.

All members of the type I IFN family use the same receptor called IFN- $\alpha$  receptor to initiate signaling (reviewed in Hagberg and Ronnblom, 2015 ). The IFN- $\alpha$  receptor has two subunits, IFNAR1 and IFNAR2 (de Weerd *et al.*, 2007). The IFNAR1 which has a molecular weight of 110-130kD is constitutively bound to tyrosine kinase 2 (Tyk2) and IFNAR2 which has a molecular weight of 55-95kD is constitutively bound to Janus kinase 1 (JAK1) (Mogensen *et al.*, 1999, Domanski and Colamonici, 1996). Prior to induction, STAT2 is also bound to IFNAR2 and it is weakly associated with STAT1 (Tang *et al.*, 2007, Stancato *et al.*, 1996, Precious *et al.*, 2005). When ligand (IFN- $\alpha/\beta$ ) binds to the receptor, both chains are induced to undergo dimerization and the receptor undergoes a

## Chapter 2 Literature Review

conformational change. This brings the Tyk2 and JAK 1 closer to each other resulting in the phosphorylation and activation of Tyk2 which in turn trans-phosphorylates JAK1 thereby activating it (van Boxel-Dezaire *et al.*, 2006, Novick *et al.*, 1994, Colamonici *et al.*, 1994). The activated Tyk2 phosphorylates tyrosine 466 on IFNAR1. The phosphorylation of IFNAR1 then creates a strong docking site for STAT 2. The STAT2 is in turn phosphorylated on tyrosine 690 by Tyk2. On the other hand, the activated JAK 1 phosphorylates STAT1 on tyrosine 701 (Stark *et al.*, 1998, Muller *et al.*, 1994a). Once STAT1 and STAT2 have become phosphorylated, they come together and form a heterodimer complex that is highly stable. When STAT1 is phosphorylated and subsequently forms a dimer with STAT2, a novel nuclear localization signal (NLS) is created (Banninger and Reich, 2004 ). The creation of NLS and the simultaneous phosphorylation of STAT2 inactivates the nuclear export of STAT2 (Frahm *et al.*, 2006) so that dimers become translocated into the nucleus and retained until they become dephosphorylated (Reich and Liu, 2006). The heterodimer complex of STAT1-STAT2 that is transported to the nucleus combines with a cytosolic transcription factor known as IRF-9 to form IRF-9-STAT1-STAT2 heterotrimer complex called the interferon stimulated gene factor-3 (ISGF3). The ISGF3 enters the nucleus and binds to the interferon-stimulated response element (ISRE) (Williams, 1991, Kessler *et al.*, 1988) that is present in the promoters of most IFN-responsive genes and brings about transcriptional activation of genes that switch on the anti-viral and anti-tumour effects.

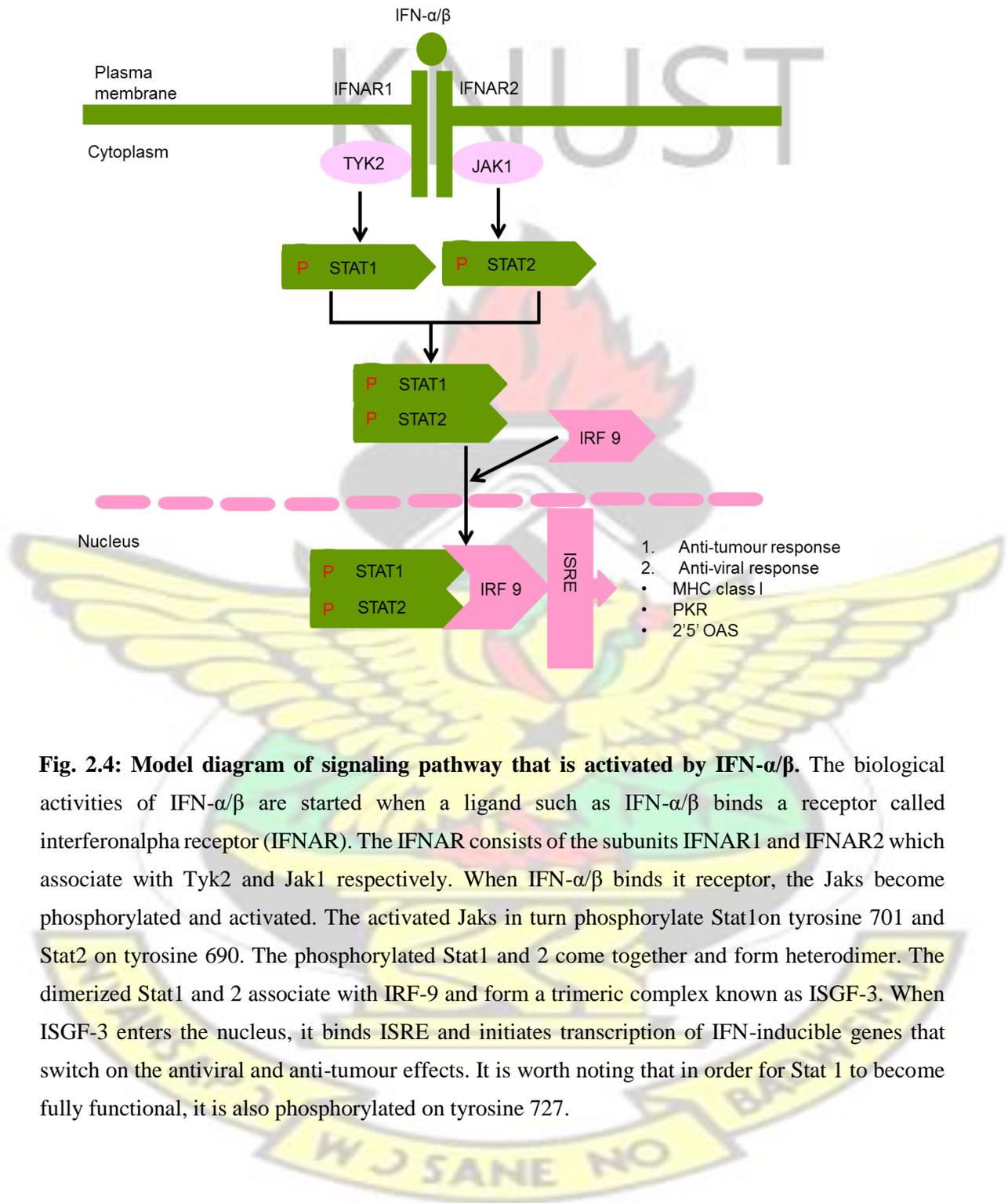
It was thought at first that the assembly of ISGF3 occurred in the nucleus but recent study by Tang *et al.* (2007 ) seem to suggest that assembly may be coordinated at the receptor. Tang *et al.* (2007) reported that IFNAR2 chain of the interferon receptor recruits the transcriptional co-factor CBF when stimulated by interferon. The CBF that is recruited

## Chapter 2 Literature Review

to the IFNAR2 catalyses the acetylation of IFNAR2. The IFNAR2 acetylation creates a docking site for IRF-9 that in turn also gets acetylated as do STAT1 and STAT2 that are bound to the receptor. The IRF-9 acetylation is required for DNA binding and the acetylation of the STAT factors may help in the assembling of ISGF3 complex (Tang *et al.*, 2007).

In addition to the above signaling pathways, other pathways are activated by interferon and these pathways can influence the outcome of IFN-induced transcription

(Platanias, 2005). Transcription activation by STAT1, whether activated by IFN- $\alpha/\beta$  or IFN- $\gamma$  also require phosphorylation on serine 727 for full activity and for mounting a full antiviral response. When serine 727 of STAT1 is phosphorylated, the interaction between STAT1 and basal transcription machinery as well as other adaptor proteins becomes facilitated. Conversely, STAT2 is not serine phosphorylated in response to IFN. However, STAT2 binds CBP/p300 and facilitates interaction with the basal transcriptional machinery (Bhattacharya *et al.*, 1996).



**Fig. 2.4: Model diagram of signaling pathway that is activated by IFN- $\alpha/\beta$ .** The biological activities of IFN- $\alpha/\beta$  are started when a ligand such as IFN- $\alpha/\beta$  binds a receptor called interferonalpha receptor (IFNAR). The IFNAR consists of the subunits IFNAR1 and IFNAR2 which associate with Tyk2 and Jak1 respectively. When IFN- $\alpha/\beta$  binds it receptor, the Jaks become phosphorylated and activated. The activated Jaks in turn phosphorylate Stat1 on tyrosine 701 and Stat2 on tyrosine 690. The phosphorylated Stat1 and 2 come together and form heterodimer. The dimerized Stat1 and 2 associate with IRF-9 and form a trimeric complex known as ISGF-3. When ISGF-3 enters the nucleus, it binds ISRE and initiates transcription of IFN-inducible genes that switch on the antiviral and anti-tumour effects. It is worth noting that in order for Stat 1 to become fully functional, it is also phosphorylated on tyrosine 727.

## 2.16 IFN responsive genes or elements

The ability of IFNs to fight against viruses is essential for the survival of the higher vertebrates against viral infection. IFNs are the first line of defense against viral infection; acting rapidly within hours or few days after infection. Studies have shown that when cells are treated with IFN- $\alpha/\beta$ , the activation and expression of several genes are up-regulated and the expression of all these genes combine to establish an antiviral state (reviewed in Randall and Goodbourn, 2008). For example a study conducted by Clemens (2005) to elucidate the role of IFN in establishing antiviral state reported that mice that were deficient in IFN- $\alpha$  and IFN- $\beta$  were highly susceptible to viral infections indicating that IFN- $\alpha$  and IFN- $\beta$  are crucial in fighting against viruses. It is important to note that no single gene is pivotal in the establishment of the antiviral state and that several genes work together to limit the replication of any given virus. Several genes and their resultant proteins are involved in the antiviral response. Information on the role of IFN responsive proteins such as PKR, OAS-3, Mx, ISG-15 and PML in establishing anti-viral state is available in literature. So under this section, I will attempt to discuss the role of the following IFN responsive proteins: PKR, OAS-3, Mx, ISG-15 and PML in: (i) regulating protein synthesis, (ii) regulating cell proliferation, (iii) regulating apoptosis and (iv) prevention of tumours.

The OAS is one of the enzymatic pathways induced by IFNs. When activated the OAS pathway initiates a cascade of events which culminate in the inhibition of protein synthesis which lead to the destruction of both viruses and infected cells and thus establishes the antiviral state (Sen, 2001, Muller *et al.*, 1994b).

The protein kinase R (PKR) encoded by the gene eukaryotic translation initiation factor 2- alpha kinase 2 in humans (EIF2AK2) (Feng *et al.*, 1992) is produced in inactive form. When activated by dsRNA (Patel *et al.*, 2000, Ito *et al.*, 1999), PKR phosphorylates eukaryotic translation initiation factor known as eIF-2. The eIF-2 then forms a complex with another protein eIF-2B and becomes inactivated. The inactivation of eIF-2 leads to the rapid inhibition of cellular mRNA translation and thereby prevents viral protein synthesis within the cell. Active PKR is also able to induce cellular apoptosis through complex mechanisms to further prevent the spread of viruses. PKR has also been involved in regulating cell proliferation, playing a role as tumour suppressor (reviewed in Randall and Goodbourn, 2008).

The Promyelocytic leukaemia (PML) gene is known to direct the synthesis of a protein referred to as PML protein. The PML protein in association with other PML nuclear bodies (PML-NBs) performs functions which may include establishing antiviral state, suppression of growth of tumours; apoptosis etc (reviewed in Randall and Goodbourn, 2008).

### **2.17 Anti-cancer activity and mechanism of IFNs**

When Isaacs and Lindenmann first discovered IFNs in 1957, they described them as proteins capable of inducing resistance to viral infections (Isaacs and Lindenmann, 1957). Some years later, the role of IFNs in preventing the growth of tumours was described. In 1960, Atanasiu and Chany showed that hamsters that were pre-treated with IFN preparations before being inoculated with polyoma virus showed delay in the appearance

of tumours (Atanasiu and Chany, 1960). Following the work of Atanasiu and Chany, Paucker *et al.* (1962) also described the anti-proliferative effects of IFNs by showing that L cells exposed to either UV-irradiated Newcastle Disease virus or to IFN led to a temporary slow-down in the cell growth. A year later Lampson *et al.* (1963) demonstrated that both crude and semi-purified IFN preparations administered into chicks prior to infection with the Rous sarcoma virus inhibited the development of tumours. Thereafter, the capacity of IFNs to inhibit the growth of viral-induced and transplantable tumours have been extensively studied. It has been shown that interferon treatment of mice after infection with leukemia virus was detected to reduce the features related to leukemia with an associated increase in mouse survival (Sarma *et al.*, 1969).

A host of studies have identified endogenous type I IFNs as playing key role in the recognition of tumours by the innate immune system and this role serves as a conduit to instant adaptive T cell response (Fuentes *et al.*, 2011, Diamond *et al.*, 2011). For example, it has been demonstrated that endogenous IFN- $\beta$  secreted by CD11<sup>+</sup>c dendritic cells (DCs) in response to the existence of tumour activate CD8 $\alpha$ <sup>+</sup> DC family of cells and this enhances the detection of tumour antigens by CD8<sup>+</sup>T cells *in vivo* (Fuentes *et al.*, 2013). The type I IFN-activated tumour recognition by the innate immune response is critically necessary for steering the early adaptive immune response against many tumours found in mice (Gajewski *et al.*, 2013, Spranger *et al.*, 2013). A study conducted by Indraccolo (2010) demonstrated that type I IFNs have antiangiogenic property which indirectly repress the growth and development of tumours (Indraccolo, 2010). Another evidential proof of the anti-cancer activity of type I IFNs was obtained from a study conducted by Jablonska *et al.*

(2010) who reported that in total absence of IFN- $\beta$ , neutrophils are greatly attracted to the place where the tumour is developing and that the increased attraction of neutrophils improves the vasculature and thus promotes the progression of the cancer (Jablonska *et al.*, 2010). Spaapen *et al.* (2014) conducted a study to determine the effects of intra-tumoural production of type I IFNs on tumour cells in murine melanoma cell line B16-F10. They inserted the IFN- $\beta$  gene into the B16-F10 cell lines which enabled the cells to produce large amount of IFN- $\beta$ . They reported that the introduction of the B16-F10 tumour cells into syngeneic C57BL16 mice culminated in total repression of tumours. In order to decipher the involvement of the type I IFN signaling in the therapeutic activity of IFN- $\beta$  on the target cells, the IFN- $\beta$  secreting B16-F10 tumour cells were transplanted into type I IFN receptor deficient mice by Spaapen *et al.* (2014). They reported that tumours grew progressively in these mice indicating that the role of IFN- $\beta$  in eradication of tumours depends on signaling through the host cells. Similarly the same results in the context of tumour repression was obtained by Spaapen *et al.* (2014) when the experiment was done with IFN- $\alpha$ .

The exact mechanism by which IFNs prevent the growth of certain tumours is not clear. However, a sizeable number of studies have attempted to unravel the molecular mechanism by which IFNs inhibit tumour growth. For the purposes of this thesis, the mechanism by which key elements (with emphasis on STAT1) of the JAK-STAT-ISRE arm of the type I IFN pathway prevent growth of tumours will be discussed.

### **2.17.1 Anti-cancer property and mechanism of STAT1**

The STAT1 signaling pathway activated by IFNs has been thought about to be tumour suppressive (Dunn *et al.*, 2006) and also activate genes that modulate immune

functions such as the establishment of antiviral state and apoptosis induction (Khodarev *et al.*, 2012). The anti-tumour function of STAT1 is considered to be critically crucial at the beginning of the tumour development and its role is to promote the eradication of cells that have become transformed by both the innate and the adaptive immune system (Tymoszuk *et al.*, 2014). Studies have shown that activation of STAT1 leads to the up-regulation of genes needed for processing and presentation of antigens in dendritic cells (Tymoszuk *et al.*, 2014). Aside its functions on immune cells; STAT1 has been shown in some studies to prevent tumour development in tumour epithelium (Raven *et al.*, 2011, Klover *et al.*, 2010) probably by promoting apoptosis and inhibiting cell proliferation in response to the presence of stimuli such as oncogenic cells (Kim and Lee, 2007). It has been reported that STAT1 induces apoptosis by promoting the expression of cell surface death receptor family and their ligands. For example, STAT1 has been shown to increase the expression of Caspases, Fas and FasL (Ouchi *et al.*, 2000, Lee *et al.*, 2000). STAT1 has been shown to suppress Mdm2 an inhibitor of the tumour suppressor protein p53 and as a result functions as co-activator of p53 (Pensa *et al.*, 2008, Kominsky *et al.*, 2000, Chin *et al.*, 1997, Allione *et al.*, 1999).

The tumour suppressive function of STAT1 has also been linked to the ability of STAT1 to regulate angiogenesis. It has been reported that STAT1 negatively regulate tumour angiogenesis and thus prevent the growth of tumour and metastasis by inhibiting VEGF biological activity and also suppresses the expression of pro-angiogene FGF- $\beta$  (Pensa *et al.*, 2008). STAT1 has also been implicated in preventing the metastasis of breast cancer. For example, Ilkovitch *et al.* (2008) reported that STAT1 can suppress the

expression of the urokinase-type plasminogen activator (uPA) gene in breast cancer and that this inhibition aid in preventing the spread of breast cancer.

Another evidential proof to support the fact that STAT1 plays a crucial role in inhibiting the growth and development of tumours was obtained from studies done with STAT1 deficient mice which were shown to develop tumours within shorter duration compared to STAT1 expressing controls (Raven *et al.*, 2011, Klover *et al.*, 2010).

### **2.17.2 Anti-cancer property and mechanism of STAT2**

Another component of the type I IFN dependent JAK-STAT-ISRE pathway that has been thought of to mediate the anti-tumour effects of the type I IFN is STAT2

(Schindler *et al.*, 1992, Fu *et al.*, 1992, Darnell Jr *et al.*, 1994, Romero-Weaver *et al.*, 2010, Du *et al.*, 2009, Clifford *et al.*, 2003). Some *in vivo* studies have been done to support the role of IFN-activated STAT2 in inhibiting the growth of tumour. For example Wang *et al.* (2003) reported in their study using STAT2 deficient transgenic mice which constitutively produced IFN- $\alpha$  (GIFN/Stat2<sup>-/-</sup>) in the central nervous system (CNS) that the mice died prematurely because there was a spontaneous formation of medulloblastoma (Wang *et al.*, 2003). In another study conducted by Yue *et al.* (2015) using wild type (WT) and Stat2<sup>-/-</sup> mice, it was reported that when WT and Stat2<sup>-/-</sup> were injected with murine B16-F1 melanoma tumour cell lines, the WT mice developed relatively smaller tumours compared to the Stat2<sup>-/-</sup> counterparts (Yue *et al.*, 2015).

Even though there are some evidence to support the tumour suppressor function of STAT2, the exact mechanism by which this is achieved is still under investigation. It has

been reported that loss of STAT2 could possibly lead to the down-regulation of some genes such as *Ifi204* and *Cxcl9* that have immunomodulatory function (Yue *et al.*, 2015). *Ifi204* for example is a type I IFN target gene that plays a key role in cell growth inhibition and macrophage cell differentiation (Lembo *et al.*, 1998, Dauffy *et al.*, 2006). *Cxcl9* on the other hand is an IFN target gene that is induced by IFN- $\alpha/\beta$  and IFN- $\gamma$  and its function is to act as T-cell chemo-attractant (Padovan *et al.*, 2002, Guirnalda *et al.*, 2013). Studies have shown that knocking down *Cxcl9* in mice could result in the formation of larger tumours due to immuno-surveillance escape (Guirnalda *et al.*, 2013).

Another mechanism by which STAT2 may inhibit tumour growth could be due to its ability to activate DCs in presenting tumour antigens. Yue *et al.* (2015) reported that STAT2<sup>-/-</sup> DCs were unable to effectively present tumour antigens to target cells *in vivo* (Yue *et al.*, 2015). The defective nature of the DCs in STAT2<sup>-/-</sup> mice could make STAT2<sup>-/-</sup> /<sup>-</sup> more permissive to form tumours due its inherent IFN signaling defect (Yue *et al.*, 2015, Park *et al.*, 2000).

### **2.17.3 Anti-cancer properties and mechanisms of JAK1, Tyk2, OAS-3 and IRF-9,**

Under this sub-section, the role of JAK1, Tyk2, OAS-3 and IRF-9 as drivers in preventing the growth and development of cancers will be discussed.

As stated already, JAK 1 is a member of the JAK family of proteins that is considered to be very essential in normal cell signaling processes that have been implicated in tumourigenesis (Aaronson and Horvath, 2002, Schindler *et al.*, 2007, Zhou *et al.*, 2014). It has been reported that JAK1 plays a role in the formation of tumour through its interaction

with STAT3 (Casey *et al.*, 2015). The activation of STAT3 by JAK1 leads to survival of cancer cells, proliferation, metastasis and promotion of angiogenesis (Kortylewski and Yu, 2008). In addition Song *et al.* (2011) reported that JAK1 is responsible for STAT3 activation in lung cancer and that inhibition of JAK1 with small molecules or RNA interference resulted in the loss of STAT3 activation and prevented lung cancer growth (Song *et al.*, 2011).

Another member of the JAK family which transduces cytokine and growth factor signaling is Tyk2. Tyk2 is commonly associated with five different receptor chains namely IFNAR1, interleukin (IL) 10 receptor 2 (IL-10R2), IL-12 receptor  $\beta$ 1 (IL-12R $\beta$ 1), IL-13 receptor  $\alpha$ 1 (IL-13R $\alpha$ 1) and glycoprotein 130 (gp130). Although Tyk2 has been reported to play a role in inflammation that may contribute to tumour development, progression and spread (Elinav *et al.*, 2013, Grivennikov *et al.*, 2010) due to its association with several receptor chains, its importance in tumour immuno-surveillance has also been reported (Ubel *et al.*, 2013). Tyk2 has been reported to play a critical role in the anti-cancer property of cytokines such as type I IFNs and IL-2 (Colombo and Trinchieri, 2002, Zitvogel *et al.*, 2015). In addition, the role of Tyk2 in type I IFN induced apoptosis in primary pro-B cells and pancreatic cells has also been reported (Gamero *et al.*, 2006, Marroqui *et al.*, 2015, Potla *et al.*, 2006). Studies have shown that the induction and interaction of Tyk2 with proapoptotic factors is highly essential in IFN- $\alpha$  induced B lymphocyte growth arrest or apoptosis (Shimoda *et al.*, 2010, Shimoda *et al.*, 2002).

The OAS pathway is another component of the type I IFN induced JAK-STATISRE pathway that has been reported to have tumour suppressive activity. The tumour suppressive activity of OAS3 pathway is executed by RNase L (endoribonuclease) a component of OAS

that requires 2-5A synthetase for its activity. A study conducted by Silverman (2003) reported that mutations in RNase L predispose men to an increased incidence of prostate cancer (Silverman, 2003). The role of RNase L in counteracting prostate cancer is believed to be due to its ability to degrade RNA, thus initiating a cellular stress response that leads to apoptosis (Silverman, 2003).

Initially identified as transcriptional regulatory factors, IRFs have also been reported to regulate cell differentiation, cell growth and apoptosis in different cells (Fragale *et al.*, 2013). Studies have shown that mutation in IRFs can increase the susceptibility to and progression of several cancers (Fragale *et al.*, 2013). Even though all IRFs have been reported to play one role or the other in the regulation of oncogenesis as they modulate cellular responses involved in anti-tumour immune functions (Savitsky *et al.*, 2010, Tamura *et al.*, 2008), only the role of IRF-9 will be discussed under this sub-section. The role of IRF-9 in inhibiting tumour development is linked to the anti-tumour property of type I IFNs (Belardelli *et al.*, 2002, Tsuno *et al.*, 2009). As already stated IRF9 is part of trimeric complex, known as ISGF3, which also include STAT1 and STAT2 (Kessler *et al.*, 1990, Taniguchi *et al.*, 2001). Studies have shown that type I IFNs activate *TP53* through ISGF3 binding to ISREs that are located in *TP53* promoter (Takaoka *et al.*, 2003). As one of the component of ISGF3, IRF9 has been reported to stimulate the p53 pathway upon exposure of cells to endogenously induced or exogenously administered type I IFNs (Yanai *et al.*, 2012). In addition, it has been reported that most of the ISGs that have anti-tumour activity require IRF-9 to be activated including some IRFs such as IRF-5 and IRF-7 (Fragale *et al.*, 2013).

## CHAPTER 3 MATERIALS AND METHODS

### 3.0 Introduction

Under this chapter, the experimental procedures that were used in this research were clearly described. References were made to background literature where necessary. It must be noted that most of the experiments were performed at the Virus Research Laboratory at the Department of Clinical Microbiology of the School of Medical Sciences at the Kwame Nkrumah University of Science and Technology (KNUST) in Kumasi. However, the RTqPCR experiments were performed at the Kumasi Centre for Collaborative Research (KCCR) in Kumasi. All reagents and chemicals used and their components have been comprehensively listed at the appendices.

### 3.1 Large-scale expansion and purification of plasmid DNA using the EndoFree Plasmid Maxi Kit

The plasmid DNA (pISRE-luc) was extracted from the *Escherichia coli* (*E. coli*) strain 5DH $\alpha$  (kindly donated by Professor David J. Blackbourn, University of Surrey). The *E. coli* strain 5DH $\alpha$  harboured plasmid DNA vector that expressed pISRE-luc. Frozen *E. coli* strain 5DH $\alpha$  which was revived on Luria Bertani (LB) agar (Sigma Aldrich, USA) containing 100 $\mu$ g/ml ampicillin (Thermo scientific, Germany) and incubated (37°C, 18 hours). A single colony of the bacteria was picked and inoculated into a 5 ml LB broth (Sigma Aldrich, USA) containing 100  $\mu$ g/ml ampicillin (Thermo scientific, Germany) and incubated (37°C, 8 hours) with vigorous shaking (300 rpm) to make a starter culture. After

## Chapter 3 Materials and Methods

8 hours of incubation, 500µl of the starter culture was transferred into 250ml of LB broth (Sigma Aldrich, USA) containing 100µg/ml of ampicillin (Thermo scientific, Germany) at a dilution of approximately 1:500 and incubated (37°C, 16 hours) with vigorous shaking (300 rpm). At a cell density of approximately  $3-4 \times 10^9$  cells/ml, the bacterial cells were harvested by centrifugation (6000 xg, 4°C, 15 minutes). The supernatants were discarded and the bacterial pellets were used for the plasmid DNA extraction using the EndoFree

Maxi Prep Kit (Qiagen, USA) following the manufacturer's instruction. Compositions of the buffers P1, P2, P3, ER, QBT, QC and QN used during the extraction process are shown in the appendix (**Appendix B, Table 1**).

A 10 ml of buffer P1 was added to each sample tube to the bacterial pellets to completely suspend the bacterial cells and begin the lysing process. Next 10 ml of buffer P2 was added to each tube and vigorously mixed to lyse the bacterial cells. The samples were then incubated at room temperature (25°C, 5 minutes). The proteins, genomic DNA and cell debris after lysis were precipitated by adding 10 ml of chilled buffer P3 to each sample and were immediately and thoroughly mixed with vigorous inverting. The lysates were then transferred into the barrel of the QIAfilter cartridges and then incubated at room temperature (25°C, 10 minutes). After 10 minutes, the lysates were filtered by gravity into fresh 50 ml falcon tubes. After this stage, 2.5 ml of buffer ER was added to each filtered lysate and then incubated on ice for 30 minutes. The ice-incubated filtered lysates were then transferred into the QIAGEN-tips which had been equilibrated with buffer QBT. The lysates were allowed to filter by gravity in the QIAGEN-tips after which the tips were washed two times by adding 30 ml of buffer QC in each wash step. After washing, the

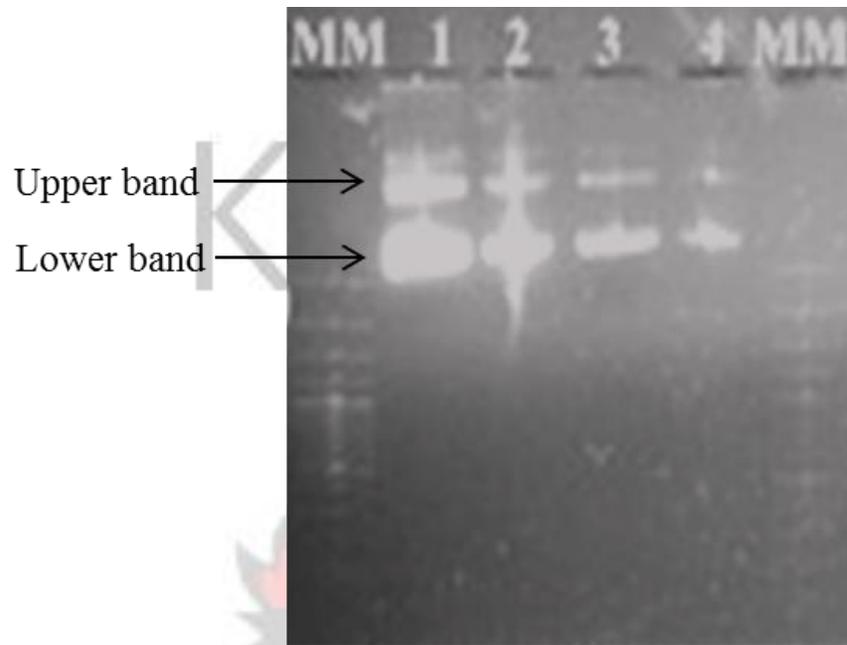
DNA of each sample was eluted into fresh tubes by adding 15 ml of buffer QN to each

QIAGEN-tip. The eluted DNA of each sample was precipitated by adding 10.5 ml of room temperature isopropanol to each tube and then centrifuged (5000 xg, 4°C, 60 minutes). The supernatants were discarded and the pelleted DNA washed with 5 ml of endotoxin-free room temperature 70% ethanol to remove the precipitated salts followed by centrifugation (5000 xg, 4°C, 60 minutes). The supernatants were discarded and the pelleted DNA was

### Chapter 3 Materials and Methods

air-dried for 10 minutes. The dried DNA of each sample was then redissolved in 100 $\mu$ l of endotoxin-free buffer TE. The quantity and the purity of the plasmid DNA was determined using NanoDrop 1000 version 3.8.1 (Thermo Scientific, USA). Agarose gel (Invitrogen, Spain) electrophoresis was later used to indicate the presence of the plasmid DNA (pISREluc) (**Fig. 3.1**).





**Fig.3.1: Agarose gel analysis of the plasmid DNA purified from *E.coli* 5DH- $\alpha$  using EndoFree Plasmid Maxi Kit from Qiagen.** The plasmid DNA eluted was diluted 1:10 (lane 1); 1: 100 (lane 2); 1: 1000 (lane 3) and 1: 10,000 (lane 4). Five microliters (5 $\mu$ l) of each of the dilutions was run on a 1% agarose gel at 60V for 50 minutes using ethidium bromide as a stain. MM: 1kb DNA ladder. The eluted sample contained pure plasmid DNA in supercoiled (lower band) and open circular (upper band) forms.

### 3.2. Culturing of cells

All the cells were kindly donated by Professor David J. Blackburn of the University of Surrey, UK. The cell lines used in this research were human hepatoma cell line HepG2 (ECACC 85011430) and mouse fibroblast cell line L929 (NCTC) (ECACC 85103115).

The cells were usually cultured in Dulbecco's Modified Eagle's Medium (DMEM) that contained high glucose, sodium pyruvate, L-glutamine and HEPES (Sigma Aldrich, Germany) supplemented with 10% v/v heat inactivated foetal bovine serum (FBS) (Sigma Aldrich, Germany), 1% v/v non-essential amino acids (Sigma Aldrich, Germany) and 1% v/v penicillin-streptomycin (Gibco by life technologies, UK) (this medium shall be referred to as growth medium in the succeeding sections) in T-75 and T-25 tissue culture flasks and incubated (37°C, 5% CO<sub>2</sub>, under humidified condition). At about 80-100% confluence, the cells were washed with phosphate buffered saline (PBS) and trypsinized with 0.25% trypsin-EDTA (Gibco life technologies, UK). Depending on the nature of the experiment, the cells were sub-cultured in 6 or 96-well plates. Before seeding in 6 or the 96-well plates, the cells were counted using a Neubauer haemocytometer and trypan blue dye exclusion method under x10 objective of the Nikon microscope.

The percentage viability was determined using the equation:

$$\% \text{ Viability} = \frac{\text{number of unstained cells (live cells)}}{\text{total number of cells (both dead and live cells)}} \times 100$$

### 3.3 Determining the cytotoxic effects of AFB<sub>1</sub> on HepG2 cells

The AFB<sub>1</sub> (Sigma Aldrich, Germany) which was used in the study was dissolved in dimethyl sulfoxide (DMSO) (Sigma Aldrich, Germany) to a stock concentration of 3200

$\mu\text{M}$ . The stock solution was stored in working aliquots wrapped in aluminium foil at  $-20^\circ\text{C}$  until ready to use. HepG2 cells were cultured in growth medium in duplicate wells of 96-well plates at density of  $5 \times 10^4$  cells per well. At 60% confluence, the cells were treated with increasing concentrations of AFB<sub>1</sub> (Sigma Aldrich, Germany) (0, 3.2, 32, 320 & 3200  $\mu\text{M}$ ) and incubated ( $37^\circ\text{C}$ , 5%  $\text{CO}_2$ , under humidified condition, 24 hours). Cells which were treated with 0.2% DMSO were used as controls because the AFB<sub>1</sub> was dissolved in DMSO. At 24 hours post-treatment, the AFB<sub>1</sub> containing medium was removed and the cells were treated with fresh growth medium without AFB<sub>1</sub>. The cytotoxic effect of AFB<sub>1</sub> on the HepG2 cells was evaluated after 24, 48 and 72 hours using the CellTiter 96<sup>®</sup>

Aqueous One Solution (Promega, USA) following the manufacturer's instruction. The CellTiter 96<sup>®</sup> Aqueous One Solution Cell Proliferation Assay is used to determine the number of cells viable in cytotoxicity or cell proliferation assays. The assay is based on the reduction of tetrazolium salt to water soluble formazan dye by metabolically active cells. The CellTiter 96<sup>®</sup> Aqueous One Solution contains an active tetrazolium compound called MTS ([3-(4, 5-dimethylthiazol-2-yl)-5-(3-carboxymethoxyphenyl)-2-(4sulfophenyl)-2H-tetrazolium, inner salt; MTS]). In addition to the tetrazolium salts, the One Solution also contains an electron transfer reagent (ETR) called phenazine ethosulfate (PES). The PES is reduced by reducing equivalents such as NADH or NADPH inside the cells. The reduced PES then reduces the MTS to intensely-coloured formazan outside the cell. The quantity of formazan produced is directly proportional to the number of living cells present in the culture well. The degree of cell proliferation or death can therefore be quantified by reading the absorbance of the formazan produced at wavelength of 490 nm using 96-well plate reader.

At the time point of treatment, 20 $\mu$ l of the Cell Titer AQueous One Solution (Promega, USA) pre-warmed to room temperature was added to each well of cells and incubated (37°C, 5% CO<sub>2</sub>, under humidified condition, 4 hours). At 4 hours of incubation the absorbance of each well of cells was measured at 490 nm wavelength using iMark

$$\% \text{ viability} = \frac{\text{Average absorbance of AFB}_1 \text{ treated cells} - \text{Average blank absorbance}}{\text{Average absorbance of AFB}_1 \text{ untreated cells} - \text{Average blank absorbance}}$$

Micro plate reader (Bio-Rad, USA). Each experiment was conducted three times in duplicates. Each of the three experiments was conducted independently.

The percentage viability was calculated as:

### **3.4 Determining the minimum concentration of rIFN- $\alpha$ that induces the maximum activity of rIFN- $\alpha$ inducible ISRE promoter**

After determining the maximum concentration of AFB<sub>1</sub> that was not toxic to HepG2 cells, the next stage was to determine the minimum concentration of rIFN- $\alpha$  that could induce the maximum activity of the rIFN- $\alpha$  responsive promoter (pISRE-luc) using the dual luciferase reporter gene assay technique. The rIFN- $\alpha$  will be referred to as IFN in the subsequent sections of this thesis.

#### **3.4.1 Transient transfection of cultured cells**

HepG2 cells were grown to about 80% confluence in growth medium in duplicate wells of 96-well plates. A transfection mixture that contained the appropriate amount of

DNA and Lipofectamine-2000 (Invitrogen, USA) (**Appendix C, Table 2**) in serum and antibiotic free medium was prepared and incubated for 20 minutes at room temperature. Then 10µl of the transfection mixture was added drop-wise to different areas of each well of cells and incubated (37°C, 5% CO<sub>2</sub>, under humidified condition, 24 hours). A reporter plasmid that expressed the firefly luciferase was co-transfected with a plasmid that constitutively expressed the *Renilla* luciferase to which the firefly luciferase activity was normalized.

At 24 hours post transfection, the cells were stimulated with or without increasing concentration of IFN (100, 200, 300 and 400 IU/ml) (PBL, Biomedical laboratories, USA). At 24 hours post-stimulation, the cells were harvested and luciferase reporter gene assay performed with a luminometer.

### 3.4.2 Dual luciferase reporter gene assay

The dual luciferase reporter gene assay which allows the simultaneous expression and measurement of two individual reporter enzymes produced by two reporter genes within a single system was used. The firefly luciferase from the firefly beetle called *Photinus pyralis* was used as the experimental reporter while the *Renilla* luciferase from *Renilla reniformis* also called sea pansy was used an internal control to normalize the data obtained from the experimental reporter. The firefly luciferase catalyses the oxidation of luciferin to oxyluciferin and emits light at about 560 nm. The *Renilla* luciferase oxidizes coelenterazine into coelenteramide and emits light at about 480 nm. During measurement, 100 µl of the firefly luciferase reagent (LAR II) is injected into each well that contains a sample cell lysate. The light output over 10 seconds is measured. Immediately after the first

measurement, 100  $\mu$ l of the reagent for the second luciferase (Stop & Glo<sup>®</sup> Reagent) is injected into each well and again the light output is measured. The function of the second reagent is to quench the first reaction and delivers the substrate for *Renilla* luciferase reaction.

The luciferase activity was therefore measured using the dual luciferase assay (DLA) (Promega, USA) following the manufacturer's instruction. The required volume of 1X passive lysis buffer (PLB), Luciferase Assay Reagent II (LARII) and Stop & Glo buffer were prepared according to the manufacturer's instruction. For example, the appropriate volume of the 1X PLB was prepared by adding 1 volume of 5X PLB to 4 volumes of distilled water. The appropriate volume of 1X Stop & Glo solution was prepared at a ratio of 1:50; for example by adding 20  $\mu$ l of the 50X Stop & Glo substrate to 980  $\mu$ l of Stop & Glo buffer in an eppendorf tube wrapped in aluminium foil to protect the solution from the direct effect of light. The LAR II solution was prepared by dissolving the lyophilized luciferase assay substrate in 10 ml of luciferase assay buffer II and then distributed into working aliquots and stored frozen at -80°C until ready to use.

Prior to performing the DLR assay, all the needed reagents were pre-warmed to room temperature. Also each of the two auto injectors (one for LAR II reagents and the other for Stop & Glo reagent) of the luminometer was primed with 400  $\mu$ l of distilled water. After priming with distilled water, the injector lines were finally prepared by priming injector 1 with 400  $\mu$ l of LAR II and injector 2 with 400  $\mu$ l of Stop & Glo reagents. The injectors 1 and 2 of the luminometer were automatically programmed to dispense 100  $\mu$ l of each reagents. The luminometer was also programmed to make a 10-second measurement for the firefly with a delay of 10 seconds followed by a 10 second measurement for the

*Renilla* luciferase. The data which was automatically saved to Excel spread sheet was retrieved and the pISRE-luc activity normalized to *Renilla* activity performed.

### **3.5 Determining the effects of AFB<sub>1</sub> on the type I IFN pathway**

HepG2 cells were grown in duplicate wells of 96-well plates at density of  $5 \times 10^4$  cells per well. At about 60% confluence, the cells were transiently co-transfected as described previously (**section 3.5.1**). At 24-hours post-transfection, the cells were stimulated with or without IFN (400 IU/ml) (PBL, Biomedical laboratories, USA) and treated with or without increasing concentration of AFB<sub>1</sub> (0.8, 1.6, 3.2, 6.4, 10 and 32  $\mu$ M) (Sigma Aldrich, Germany). At 24-hours post-stimulation and treatment, the cells were harvested, lysate prepared and dual luciferase reporter gene assay performed as previously described (**section 3.4.2**).

### **3.6 Quantifying the mRNA levels of some of the key genes of the JAK-STAT-ISRE pathway**

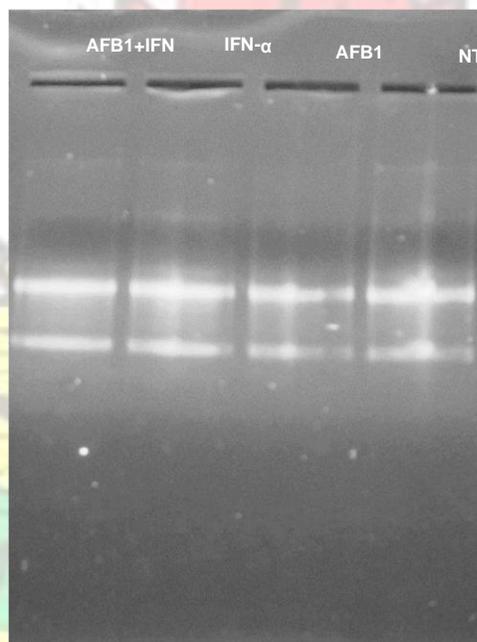
Reverse transcription-quantitative polymerase chain reaction (RT-qPCR) was employed to quantify the mRNA levels of representative genes such as JAK1, STAT1 and OAS-3 of the JAK-STAT-ISRE arm of the type I IFN response pathway. The various stages of RT-qPCR experiments are described in the subsequent sub-sections.

### 3.6.1 Isolating and purifying total RNA

The cellular total RNA was isolated and purified using GeneJET RNA purification kit (Thermo scientific, Germany) (**Appendix B, Table 1**) following the manufacturer's instruction. Briefly HepG2 cells which were grown in 6-well plates and stimulated with or without IFN (PBL, Biomedical laboratories, USA) and treated with or without AFB<sub>1</sub> (Sigma Aldrich, Germany) were harvested in 1.5 ml of cold PBS (Oxoid limited, UK).

Cells were transferred into RNase/DNase-free eppendorf tube and after centrifugation at (250 xg, 4°C, 5 minutes) the supernatant was discarded. Six hundred microliters (600 µl) of lysis buffer supplemented with 14.3M β-mercaptoethanol (Bio-Rad, USA) was added to each tube to re-suspend and lyse the pelleted cells. The lysate was passed through a blunt 20-gauge needle fixed onto RNase-free syringe 7 times to ensure complete homogenization of the lysate. Three hundred and sixty microliters (360 µl) of 99% analytical grade ethanol (Fisher scientific, UK) was added to the cell lysate. After gentle mixing, the homogenized lysate was transferred into the GeneJET RNA purification column inserted into a collection tube and then centrifuged (12000 xg, 4°C, 1 minute). The ethanol added (together with guanidine thiocyanate a chaotropic salt contained in the lysis buffer) caused the RNA to precipitate and bind to the silica membrane while the lysate is spun through the column thus separating the RNA from the rest of the solution. This step was repeated until all the lysate had been centrifuged. The GeneJET RNA purification column was washed 2 times to remove impurities such as residual salts from the RNA bound to the silica membrane of the column. Seven hundred microliters (700 µl) of wash buffer 1 was added to the GeneJET RNA purification column and then centrifuged (12000 xg, 4°C, 1 minute) to wash the membrane of the column. Six hundred microliters (600 µl) of wash buffer 2 was added to the GeneJET RNA purification column and then centrifuged (12000 xg, 4°C, 1 minute) to

wash for the second time. Two hundred and fifty microliters (250  $\mu$ l) of the wash buffer 2 was added and centrifuged (12000 xg, 4°C, 2 minutes). The flow-through in the first, second and the third wash steps were discarded and the GeneJET RNA purification column was re-spun (20000 xg, 4°C, 1 minute) to remove any residual fluid in the column. The collection tubes containing the flow-through solutions were discarded and each GeneJET RNA purification column was transferred into 1.5 ml sterile RNase-free micro-centrifuge tube. Hundred microliters (100  $\mu$ l) of nuclease free water was added to each GeneJET RNA purification column membrane and then centrifuged (12000 xg, 4°C, 1 minute) to elute the RNA. The quantity and the purity of the total RNA was determined using NanoDrop 1000, version 3.8.1 (Thermo scientific, USA) and was later confirmed by 1% agarose (Invitrogen, Spain) gel electrophoresis (**Fig. 3.2**). The eluted total RNA was stored at -80°C until ready to use.



**Fig.3.2: Agarose gel analysis of total RNA purification procedure using Thermo Scientific GeneJET RNA purification kit.** Five microliters (5 $\mu$ l) of total RNA from each treatment parameter was run on a 1% agarose gel at 60V for 50 minutes using ethidium bromide as a stain. This indicated the presence of RNA. NT: No treatment; AFB<sub>1</sub>: treated with AFB<sub>1</sub>; IFN: treated with rIFN- $\alpha$ ; AFB<sub>1</sub>+ IFN: treated with AFB<sub>1</sub> and IFN.

# KNUST

## **3.6.2 Synthesizing complementary DNA (cDNA) from total RNA**

RNA was converted to cDNA using the Maxima First Strand cDNA Synthesis kit with dsDNase (Thermo Scientific, Germany) following the instructions of the manufacturer. Any traces of genomic DNA present in the isolated cellular total RNA was removed in a reaction buffer in an RNase free microcentrifuge tube (1  $\mu$ l of 10 X ds DNA buffer, 1  $\mu$ l of ds DNase, 1  $\mu$ l of RNA and 7  $\mu$ l of nuclease free water bringing the reaction volume to 10  $\mu$ l). After gentle mixing and brief centrifugation (250 xg, 4 °C, 1 minute), the reaction mixture was incubated (37°C, 2 minutes) in water bath. The mixture was quickly placed on ice and after brief centrifugation it was maintained on ice. While on ice 4  $\mu$ l of 5 X reaction mix, 2  $\mu$ l of Maxima Enzyme mix and 4  $\mu$ l of nuclease free water were added to bring the final reaction volume to 20  $\mu$ l. The mixture was gently mixed and centrifuged (250 xg, 4 °C, 1 minute) after which it was incubated (10 minutes, 25 °C). The mixture was incubated for further 15 minutes at 50°C. The entire reaction was stopped by heating the mixture at 85°C for 5 minutes. The cDNA synthesized was stored frozen at -80°C until ready to use in the qPCR reaction. It must be stated that reverse transcriptase minus (RT-) negative control as well as no template control (NTC) were included in the cDNA synthesis processes to monitor genomic DNA as well as reagent contamination respectively.

### 3.6.3 Designing primers and probes for qPCR

The primers and probes that were used in analyzing *STAT 1*, *JAK 1* and *OAS3* in the qPCR experiments with GAPDH which was included as endogenous control were purchased from Biomers in Germany (Table 3.1).

**Table 3.1: Sequences of probes and primers**

Name of gene	Sequence of primers and probes	Fluorophores
<i>JAK1</i>	Probe: 5'AGCAGTCAGTGTGGCGTCATTCTCC-3' Forward primer 5'- CAATTGGCATGGAACCAACGAC-3' Reverse primer 5'-CAAATCATACTGTCCCTGAGCAAAC-3'	5' FAM- 3' BHQ-1
<i>STAT1</i>	Probe: 5'-CGCTCTGCTGTCTCCGCTTCCACTCC-3' Forward primer: 5'GTTGCTGAATGTCACTGAACTTACC-3' Reverse primer: 5'- AGCTGATCCAAGCAAGCATTGG-3'	5' FAM- 3' BHQ-1
<i>OAS3</i>	Probe 5'- AGCCTGGTGCCTGCCTTCAATGTCC-3' Forward primer: 5'-TCCGCCTGACATCCGTAGATC-3' Reverse primer: 5'-TCCTCCGCAGCTCTGTGAAG-3'	5' FAM- 3' BHQ-1
<i>GAPDH</i>	Probe: 5'- CCGTTGACTCCGACCTTCACCTTCC-3' Forward primer: 5'- AGCCACATCGCTCAGACACC-3' Reverse primer: 5'- TGACCAGGCGCCAATACG-3'	5'HEX- 3'TAMRA

All the primers were designed to suit the following thermal cycling condition: (i) an optimal melting temperature ( $T_m$ ) of 60 °C; (ii) the difference in  $T_m$  of any two pairs of primers was not more than 2 °C; (iii) the probes were designed to suit  $T_m$  of 68-70 °C about 8-10 °C higher than the  $T_m$  of primers.

#### 3.6.4 Measuring the efficiency of primers and probes

The efficiency of the probes and the primers that were used to amplify and detect the *STAT1*, *OAS3*, *JAK1* and *GAPDH* were determined using the  $C_T$  slope method. With this method a 10-fold serial dilutions of cDNA samples prepared from the total RNA of the different samples were used to construct standard curves for the targets (*STAT1*, *OAS3* and *JAK1*) and the endogenous reference (*GAPDH*). After amplification, the  $C_T$  values of the target and the endogenous reference genes were plotted against the log concentration of the starting cDNA used in the amplification process. The slope of each curve which is a regression coefficient calculated from the regression line of the standard curve was used to determine the efficiency. Normally the slope of the 10-fold serial dilution of the cDNA template is expected to be -3.32 which indicate an efficiency of 100%. The % of amplification efficiency was preferred to the slope values in this study. The recommended amplification efficiency range is 90-110% (Livak and Schmittgen, 2001). The calculations as well the data analysis were done using the Bio-Rad CFX 96 manager software (Bio-Rad, USA).

#### 3.6.5 Determining the limiting primer concentrations of the GAPDH

One target gene and the endogenous reference gene in this case the *GAPDH* were co-amplified at a time in the same tube. For example the *STAT1* and the *GAPDH* were initially successfully amplified in the same tube using the primer and probe concentrations (**Appendix D, Table 1**) recommended by Thermo Scientific the manufacturers of the

Maxima Probe/Rox qPCR enzyme master mix (2 X) used in the qPCR experiments. However, when either *OAS3* or the *JAK1* was amplified with *GAPDH* in the same tube, either the *OAS3* or the *JAK1* was not amplified. This was due to the fact that the concentration of the *GAPDH* which was used as the endogenous reference was probably far greater than the concentrations of either the *OAS3* or the *JAK1* in the starting sample. As a result, when the *GAPDH* was amplified with either *OAS3* or *JAK1* in the same tube using the recommended primer concentrations, the *GAPDH* used up the reaction components faster and that impaired the amplification of the more scarce target (*OAS3* or *JAK1*). To overcome this challenge so that both the target and the *GAPDH* could be amplified in the same tube, different combinations of the forward and the reverse primer concentrations of *GAPDH* (**Appendix D, Tables 2A, 2B and 2C**) were used to amplify *GAPDH*. The lowest concentrations of the forward and reverse primers of the *GAPDH* that gave the same  $C_T$  value as the maximum recommended concentrations (**Appendix D, Table 2D**) were then used to amplify the target and the *GAPDH* in the same tube.

### **3.6.6 Determining the relative gene expression level using the delta delta $C_T$ ( $\Delta\Delta C_T$ ) method**

The qPCR reactions were run using the cDNA produced (**section 3.6.2**) on a CFX 96 real time PCR analyzer (Bio-Rad, USA) using relative quantification. Each reaction was conducted in triplicates and negative controls were always included. The  $\Delta\Delta C_T$  method was employed to calculate the relative level of expression of the target genes when the amplification efficiency of the target and the amplification efficiency of the endogenous control were similar (+/-10). The  $\Delta\Delta C_T$  analysis of the data was automatically done using

the CFX 96 manager software (Bio-Rad, USA). The data were presented as fold change in gene expression normalized to an endogenous control (*GAPDH*) and relative to the untreated control sample usually referred to as the calibrator sample.

### **3.7 Determining the effects of AFB<sub>1</sub> on protein synthesis by western blotting**

The experimental procedures that were followed in determining the effects of AFB<sub>1</sub> on the protein synthesis of some of the key genes of the JAK-STAT-ISRE arm of the type I IFN pathway shall be discussed under this section of the thesis.

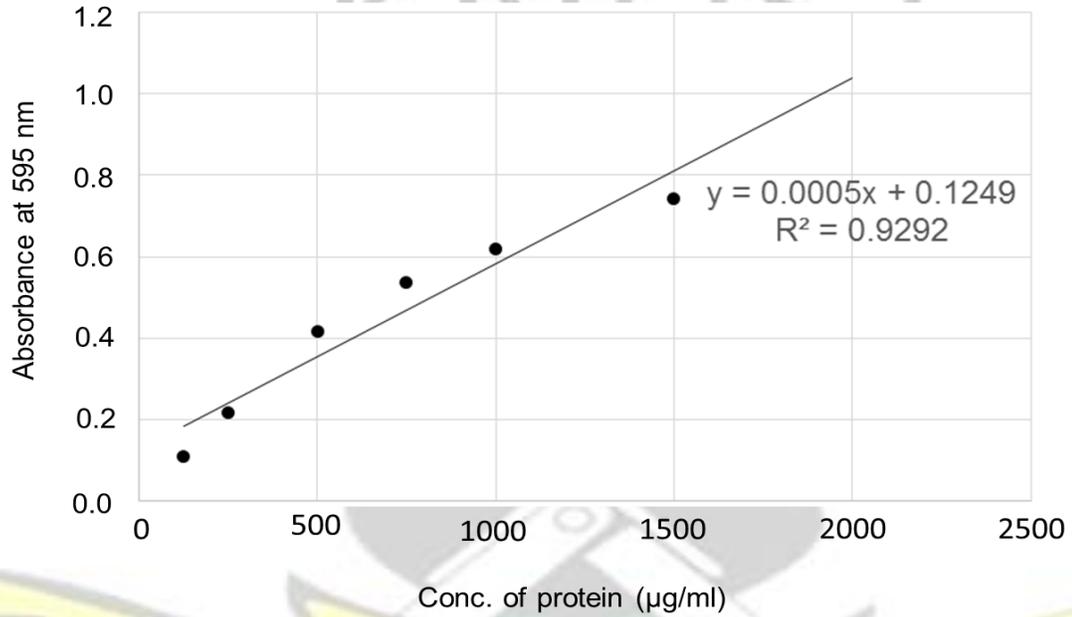
#### **3.7.1 Extracting total proteins from adherent cells**

The total proteins were isolated using Radioimmunoprecipitation assay (RIPA) buffer (Thermo scientific, Germany) following the instructions from the manufacturer. Briefly HepG2 cells which were grown in quadruplicate wells of the 6-well plates and stimulated with or without IFN (PBL, Biomedical laboratories, USA) and treated with or without AFB<sub>1</sub> (Sigma Aldrich, Germany) were harvested in appropriate volume of cold PBS and transferred into 2 ml eppendorf tubes. The tubes were centrifuged (1500 RPM; 4°C; 5 minutes) after which the supernatants were discarded. Hundred microliters (100 µl) of cold RIPA buffer (Thermo scientific, Germany) containing protease and phosphatase inhibitor cocktail as well as EDTA (all reagents were purchased from Thermo scientific, USA) were added to the cells in each tube. The tubes were incubated on ice for 30 minutes with intermittent vortexing every 10 minutes and then centrifuged (16,000 x g; 4°C; 10 minutes). After centrifugation the supernatants were gently transferred into newly labelled

1.5 ml eppendorf tubes already kept on ice and the pellet were discarded. The proteins were divided into working aliquots and stored at  $-20^{\circ}\text{C}$  until ready to use.

### 3.7.2 Determining protein concentration using Bradford assay

The concentrations of the protein samples were quantified by Bradford assay. The Bradford reagent (Bio-Rad, USA) contains Coomassie dye which binds to protein to form dye-protein complex. The absorbance of the dye-protein complex is measured at 595 nm using microplate reader or spectrophotometer. Prior to the assay, a standard curve was first constructed from known bovine serum albumen (BSA) protein standards (Bio-Rad, USA). Before starting the assay 1:10, 1:100, 1:1000 and 1:10000 dilutions of the unknown protein samples were prepared. Five microliters ( $5\mu\text{l}$ ) of each of the pre-diluted BSA standards and the unknown samples were pipetted into designated duplicate wells of the 96-well. Using the multichannel pipette  $150\mu\text{l}$  of the 1x Bradford reagent pre-warmed to room temperature was dispensed into each well and the reagent was carefully mixed with the proteins. The plate was incubated at room temperature for 5 minutes after which absorbance of the standards and the unknown were measured at 595 nm using iMark Microplate reader (Bio-Rad, USA). A blank containing only the Bradford reagent and distilled water was included in the assay. After reading the absorbance of the standards and the samples, the average of the blank values was subtracted from the averaged values of the standards and the unknown sample. A standard curve was constructed by plotting the absorbance values at 595 nm (y-axis) against the concentration of the standards in  $\mu\text{g/ml}$  (x-axis) (**Fig. 3.3**). The concentrations of the unknown samples were determined using the equation of the standard curve. The final concentrations of the unknown samples were adjusted by multiplying the value obtained by the dilution factor used.



**Fig.3.3: Standard curve generated using BSA.** A standard curve constructed by plotting the absorbance values at 595 nm (y-axis) against the concentration of the standards in µg/ml (x-axis). The concentrations of the unknown protein samples were determined using the equation of the standard curve.

### 3.7.3 Separating protein by Sodium Dodecyl Sulfate Poly Acrylamide Gel Electrophoresis (SDS-PAGE)

The SDS-PAGE (Bio-Rad, USA) is a common technique that is used to separate proteins based on their molecular sizes. The glass plate sandwiches were prepared after which 10% resolving gel (Bio-Rad, USA) was made using the recipe in the **Table 3.2**. When ready to pour the ammonium per sulfate (APS) (Sigma Aldrich, Germany) and the tetramethylethylenediamine (TEMED) (Sigma Aldrich, Germany) were added and the mixture well mixed by vortexing. Immediately the glass plate sandwiches were filled with the resolving gel to about 2/3. A layer of isopropanol was added to the top of the resolving gel to provide a uniform surface. The gel was allowed to polymerize for about 30 minutes and the isopropanol layer was poured off. Next the stacking gel was prepared using the recipe in the **Table 3.3**. The stacking gel (Bio-Rad, USA) was added to the resolving gel to the top of the glass plate sandwiches. The combs were inserted and the stacking gel was allowed to polymerize for about 30 minutes. While the stacking gel was polymerizing, the samples were prepared by adding equal volumes of fresh 2X sample buffer (Bio-Rad, USA) supplemented with 2- $\beta$  mercaptoethanol (BME) (Bio-Rad, USA) to the samples (ratio of 1:1). The heating block was pre-heated up to 95°C, the samples well mixed and then heated at 95°C for 5 minutes. The samples were quickly placed on ice. To ensure that all the samples had equal volumes the smaller volumes were topped up to the required level using 1X loading dye. When the gel had polymerized, the gel sandwiches were mounted in the electrophoresis apparatus. The comb was removed and 1X electrophoresis buffer was poured into the apparatus. Five microliters (5  $\mu$ l) of the protein ladder was loaded into the

designated well. To ensure that equal amount (20 µg) of protein was loaded into each well, the entire volume of each sample mixture was loaded into the respective well. The gel was run at 95V to concentrate the proteins in the wells and at 150 V for 85 minutes until all the dye run out of the apparatus.

**Table 3.2: Chart for preparing resolving gel (10%)**

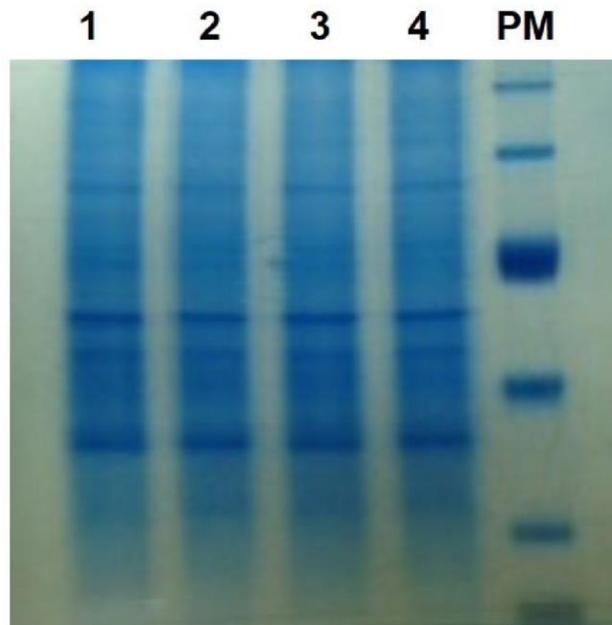
Stock concentration	Volume
30% w/v Acry/bis Acrylamide	5.0 ml
4x Tris-SDS-HCl, pH 8.8	3.75 ml
Distilled water	6.25 ml
10% Ammonium per sulfate (APS)	0.05 ml (50 µl)
TEMED	0.01 ml (10 µl)

**Table 3.3: Chart for preparing stacking gel**

Stock concentration	Volume
30% w/v Acry/bis Acrylamide	0.65 ml (650 µl)
4x Tris-SDS-HCl, pH 6.8	1.25ml
Distilled water	3.20 ml
10% Ammonium per sulfate (APS)	0.025 ml (25 µl)
TEMED	0.01 ml (10 µl)

### 3.7.4 Staining of polyacrylamide gels with Coomassie Blue

Where necessary, the quality of separation of protein was checked by staining a parallel polyacrylamide gel with Coomassie Blue solution with shaking for 1 hour at room temperature (Fig. 3.4). The gel was then destained in a destaining solution.



**Fig.3.4: Analysis of the quality of separation of protein by Coomassie Blue staining.** Coomassie Blue staining of SDS-PAGE showing protein bands. PM: 10 kDa pre-stained protein marker; lane 1: lysate from cells which were not treated; lane 2: lysate from cells treated with AFB<sub>1</sub>; lane 3: lysate from cells stimulated with rIFN- $\alpha$ ; lane 4: lysate from cells stimulated with rIFN- $\alpha$  and simultaneously treated with AFB<sub>1</sub>.

### **3.7.5 Electrotransfer of proteins onto the polyvinylidene fluoride (PVDF) membrane**

The gel was removed from the glass plate sandwich and then incubated in the transfer buffer for 10 minutes to equilibrate it. Quickly the gel sandwich was prepared. The sandwich was mounted in the transfer apparatus. The transfer buffer was added. The cooling block was placed in the unit and the proteins transferred for 1 hour at 200V. After transfer, the blot was removed and the side of the membrane that was facing the gel noted. The membrane was stored in 1X Tris-buffered saline with Tween-20 (TBST) (Bio-Rad, USA).

### **3.7.6 Antibody probing**

Before probing the PVDF membrane with the primary antibody, the nonspecific sites of the blot were blocked with 5% nonfat dried milk (marvel) in 1X TBST at room temperature for 60 minutes with shaking. The blot was probed with the primary antibody (1: 2500 dilution (*GAPDH*) and 1:1000 dilution (*STAT1*) of the primary antibody in 2% blocking solution) and incubated overnight at 2-8°C without shaking. After approximately 15 hours of probing, the blot was washed 6 times with 1X TBST for 5 minutes each. The blot was then probed with the horseradish peroxidase (HRP) conjugated secondary antibodies (1: 5000 dilution of the HRP-conjugated secondary antibody in 2% blocking solution) and incubated for 1 hour at room temperature with constant and gentle shaking. The blot was thoroughly washed 6 times with 1X TBST for 5 minutes each. The blot was stored in 1X TBST until images were taken. The primary and secondary antibodies were purchased from Thermo scientific (Germany).

### 3.7.7 Chemiluminescent detection and data analysis

The PVDF membrane was incubated with the Pierce ECL Western Blotting chemiluminescent detection substrate buffers 1 and 2 (Thermo scientific, Germany) following the manufacturer's instructions. The detection substrate buffers 1 and 2 were allowed to equilibrate to room temperature. Briefly the ECL chemiluminescent substrate buffers 1 and 2 were mixed in a 1:1 ratio immediately before used. About 3 ml of the chemiluminescent reagent was dispensed onto the glass surface of the C-DIGIT blot scanner (Li-COR Bioscience, USA). The blot was carefully placed with the protein side facing downward on the scanner to avoid trapping air bubbles. A plastic sheet protector was carefully placed on the blot and the blot was incubated with chemiluminescent reagent for 5 minutes at room temperature. An absorbent tissue was used to remove excess liquid.

The chemiluminescent signals were acquired and analyzed using the C- DIGIT blot scanner (Li-COR Bioscience, USA).

### 3.8 Determining the effects of AFB<sub>1</sub> on the antiviral activity of IFN- $\alpha$

The experimental work that involved the use of viruses was used to quantify viruses that were cultured in the presence and or absence of IFN (PBL, Biomedical laboratories, USA) and or AFB<sub>1</sub> (Sigma Aldrich, Germany). The Chandipura virus used in the study was kindly donated by Professor David J. Blackbourn (University of Surrey, UK). Chandipura virus is an enveloped single-stranded negative sense RNA virus that belongs to the family Rhabdoviridae. The sensitivity of the virus to interferon makes it very useful in interferon bioassays (Berger and Zimmer, 2011).

HepG2 cells were grown in 6-well plates at densities of  $5 \times 10^5$  cells per well. At about 80% confluence, the cells were stimulated with increasing concentrations IFN (4, 40, and 400 IU/ml) and simultaneously treated with AFB<sub>1</sub> (10 µl). Cells which were neither stimulated with IFN nor treated with AFB<sub>1</sub> were included as control. At 24 hours post stimulation and treatment, the IFN and AFB<sub>1</sub> containing media were removed and the cells were infected with Chandipura virus at multiplicity of infection (MOI) of 0.1 PFU/cell. No virus was added to the control wells. The plates were incubated (37°C, 5% CO<sub>2</sub>, 1hour) to allow the viruses to adsorb onto the surfaces of the cells. At 1 hour post-infection, the virus containing media were removed and the cells were washed twice with PBS. After the wash step, 2 ml of fresh growth media without IFN and AFB<sub>1</sub> was added to each well. The plates were incubated (37°C, 5% CO<sub>2</sub>, 24 hours) after which the cell culture supernatant from each sample was harvested and stored frozen in aliquots at -80°C until the virus titer was quantified by plaque assay.

### 3.8.1 Quantifying Chandipura virus using plaque assay

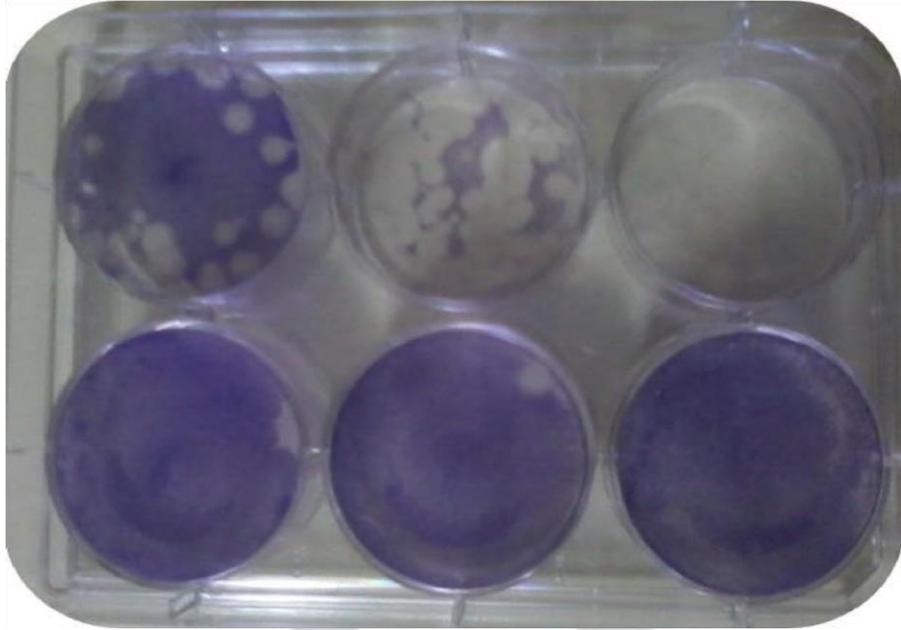
Plaque assay, a technique developed by Renato Dulbecco in 1952 is used to quantify viruses (Dulbecco and Vogt, 1953).

Plaque assay was done in L929 cells. The cells that were used in the plaque assay were the L929 cells. The L929 is a fibroblast-like cell line that was cloned from the parent strain L in 1948 (Sanford and *et al.*, 1948). L929 cell line is a very useful tool that is employed in many experimental processes such as material biocompatibility testing (Bretagnol and *et al.*, 2008, Serrano and *et al.*, 2005), drug cytotoxicity testing (Faria *et al.*,

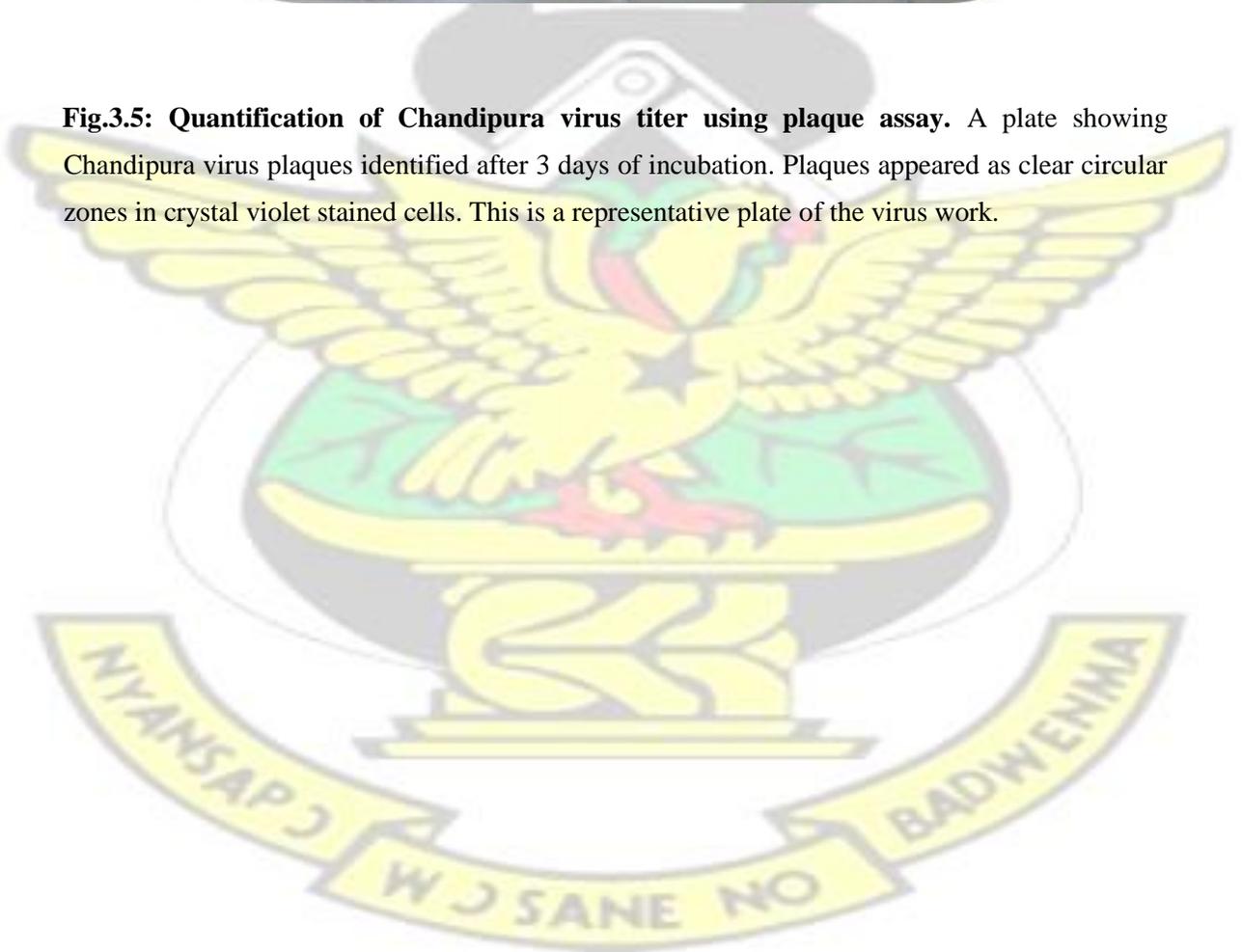
### Chapter 3 Materials and Methods

2009, Nordin *et al.*, 1991) and cell biology studies (Roelofs *et al.*, 2006, Taniguchi and *et al.*, 2006).

L929 cells were grown in DMEM containing high glucose, sodium pyruvate, L-glutamine, 25mM HEPES (Sigma Aldrich, Germany) supplemented with 10% heat inactivated FBS (Sigma Aldrich, Germany), 1% NEAA (Sigma Aldrich, Germany), and 1% penicillin-streptomycin (Gibco by life technologies, UK) in 6-well plates and incubated (37°C, 5% CO<sub>2</sub>) for 72 hours until the cells reached 100% confluence. A 10-fold serial dilutions of the virus stocks from the different treatment groups were made up to the 10<sup>-6</sup> using DMEM supplemented with 1% V/V penicillin-streptomycin. The L929 cell monolayers were then infected with 500 µl per 6-well plate and then incubated (37°C, 5% CO<sub>2</sub>) for 30 minutes. At 30 minutes of incubation the infected cell monolayers were covered with an overlay medium that contained 10% V/V of 1X MEM with Earle's salt, 1% V/V L-glutamine, 2% V/V of FBS, 1% V/V penicillin-streptomycin and 0.6% agarose. After the agarose containing medium had solidified, the plates were incubated (37°C, 5% CO<sub>2</sub>) for 72 hours. The plaques that were formed were stained by adding 2 ml of crystal violet stain to each 6-well plate. The plates were incubated at room temperature with gentle shaking for 30 minutes. The stain and the agarose overlay were carefully and gently removed by washing the plates under slow running tap water. After air-drying the plates, the numbers of plaques were counted and the virus titer for each sample was calculated as PFU/ml.

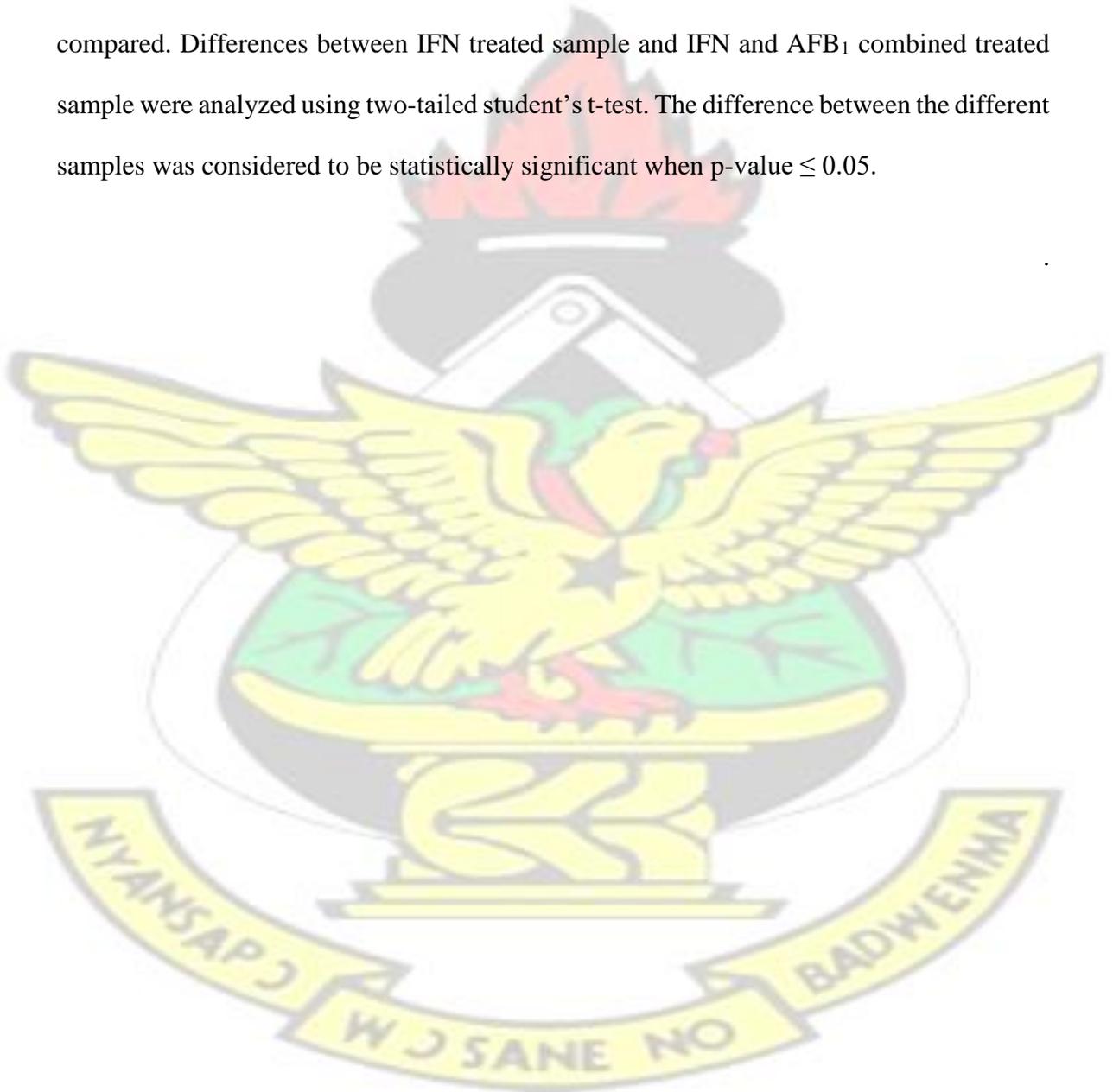


**Fig.3.5: Quantification of Chandipura virus titer using plaque assay.** A plate showing Chandipura virus plaques identified after 3 days of incubation. Plaques appeared as clear circular zones in crystal violet stained cells. This is a representative plate of the virus work.



### 3.9 Statistical analysis

All experiments were conducted in triplicates. Data were entered into excel spreadsheet and analyzed using excel and Graph pad. Averages of the three independent experimental results as well as the standard deviations were calculated using excel. The pISRE-luc activity of cells stimulated with IFN and cells treated with IFN and AFB<sub>1</sub> were compared. Differences between IFN treated sample and IFN and AFB<sub>1</sub> combined treated sample were analyzed using two-tailed student's t-test. The difference between the different samples was considered to be statistically significant when p-value  $\leq 0.05$ .



## CHAPTER FOUR THE EFFECTS OF AFB<sub>1</sub> ON THE TYPE I IFN RESPONSE

### 4.1 Introduction

AFB<sub>1</sub> is the most potent hepatocarcinogen among the different classes of aflatoxins known (Sudakin, 2003, Wild and Gong, 2010). It is produced mainly by the fungi, *Aspergillus flavus* and *Aspergillus parasiticus* under warm and humid conditions mainly in cereals such as maize, millet and groundnut (Wu and Khlangwiset, 2010). Two crops that are most susceptible to infection by *Aspergillus* are maize and groundnut and these constitute staples in many African countries. AFB<sub>1</sub> contamination in food is a serious global health problem particularly in the developing countries (Liu and Wu, 2010) where sub-optimal farming practices and poor storage conditions persist. For example Kumi and co-workers reported that 83.3% of locally made food (weanimix) from maize and groundnuts in the Ejura-Sekyedumase district in the Ashanti Region of Ghana had aflatoxin levels higher than the national permissible of 15 ppb (Kumi *et al.*, 2014) suggesting that many infants as well as adults Ghanaians are either directly or indirectly being exposed to high levels of aflatoxins.

As discussed previously (**section 2.12**) the IFN system which comprises the type I, II and III IFNs constitute a major components of the innate immune system that work to eradicate pathogens and tumour cells from the hosts. Studies have shown that prolonged exposure to AFB<sub>1</sub> is associated with increase in the incidence of HCC (**section 2.7**) (Groopman *et al.*, 2008, Hamid *et al.*, 2013) especially in the developing countries.

Therefore researching into the effects of the AFB<sub>1</sub> on the type I IFN pathway using the human hepatoma cell line (HepG2 cell) as a model system will provide better understanding of the mechanism by which AFB<sub>1</sub> could suppress the type I IFN pathway. The HepG2 cell line derived from the liver tissue was used since the liver plays a major role in the metabolism of many compounds including AFB<sub>1</sub> and also represents an important target organ in systemic toxicity (Davila *et al.*, 1998).

## 4.2 Methods

The methods that were employed in this section of the study were MTS-based cell proliferation assay and the dual luciferase reporter gene assay (**sections 3.3, 3.4.1 and 3.4.2**).

### 4.2.1 The cytotoxic effects of AFB<sub>1</sub> on HepG2 cells in culture

The AFB<sub>1</sub> (Sigma Aldrich, Germany) is an extremely toxic compounds which could not have been used directly on the cells. Therefore it was paramount to determine the working concentration of AFB<sub>1</sub> (Sigma Aldrich, Germany) that was not toxic to the cells. This concentration was used in the subsequent experiments. To accomplish this aim, the cytotoxic effects of AFB<sub>1</sub> on HepG2 cells was evaluated using the Cell Titer 96 AQueous One Solution (Promega, USA). The experiment was done by treating monolayers of HepG2 cells with increasing concentrations of AFB<sub>1</sub> (0-3200  $\mu$ M) for 24 hours after which the AFB<sub>1</sub> containing media were replaced with fresh growth media without AFB<sub>1</sub>. The viability of the cells was determined after 24, 48 and 72 hours using the MTS-based assay (**section 3.3**).

#### 4.2.2 Activation and measurement of type I IFN response pathway in HepG2 cells

Having established the working concentration of AFB<sub>1</sub>, the next task was to determine the concentration of IFN that would induce maximum activity of the IFN inducible promoter activity using the dual luciferase reporter gene assay. The dual reporter system allowed the simultaneous expression and measurement of two different reporter enzymes (one being experimental reporter with the other being control reporter) within a single system. The experimental reporter used in this study was pISRE-luc while pRLSV40 was used as the control reporter to which the activity of pISRE-luc was normalized. To achieve the purpose of this experiment, monolayers of HepG2 cells were transiently cotransfected with pISRE-luc (500 ng) and pRLSV40 (1 ng) using Lipofectamine-2000 as a transfection reagent in 96-well plate (**section 3.4.1**). At 24 hours post-transfection, the cells were stimulated with increasing concentrations of IFN (0 to 400 IU/ml). Twenty hours later, the pathway activity was measured using the dual luciferase reporter gene assay (**section 3.4.2**).

#### 4.2.3 The effects of AFB<sub>1</sub> on the IFN inducible ISRE pathway in HepG2 cells

After establishing the working concentrations for AFB<sub>1</sub> and IFN, the impact of AFB<sub>1</sub> on the type I IFN signaling in HepG2 cells was assessed, by measuring the pISREluc activity in cells stimulated with or without IFN and treated with or without AFB<sub>1</sub>.

HepG2 cells were cultured and monolayers of cells were transiently co-transfected with pISRE-luc (500 ng) and pRLSV40 (1 ng) as previously described (**section 3.4.1**) using Lipofectamine 2000 as a transfection reagent in 96-well plate. At 24 hours posttransfection,

the cells were stimulated with or without IFN (400 IU/ml) and simultaneously treated with increasing concentrations of AFB<sub>1</sub> (0.8-32 µM). Twenty hours later, the type I IFN signaling pathway activity was measured using the dual luciferase reporter gene assay (**section 3.4.2**).

#### 4.2.4 Statistical analysis

All data were entered into excel spread sheet and analyzed using excel and Graph Pad Prism (version 5.01). The differences in the viability of cells treated with AFB<sub>1</sub> at 24, 48 and 72 hours were analyzed using one way analysis of variance (ANOVA) with 95% confidence interval (CI). The type I IFN activity of cells stimulated with IFN and cells stimulated with IFN and simultaneously treated with AFB<sub>1</sub> were compared. Two-tailed student's t-test was used to compare the difference between the type I IFN activity of IFN stimulated cells and IFN and AFB<sub>1</sub> treated cells. The differences between the different samples were considered to be significant when the p-value ≤ 0.05.

### 4.3 Results

The results from the cytotoxicity assay revealed that AFB<sub>1</sub> killed the HepG2 cells in a dose-dependent fashion after exposure to AFB<sub>1</sub> concentrations up to 3200 µM. The concentration of AFB<sub>1</sub> at which ≥ 85% of the cells survived was established to be between 10-20 µM. It was observed that there was no significant difference in the viability upon AFB<sub>1</sub> exposure of HepG2 cells for 24, 48 and 72 (p-value ≤ 0.977) (**Fig. 4.1A**).

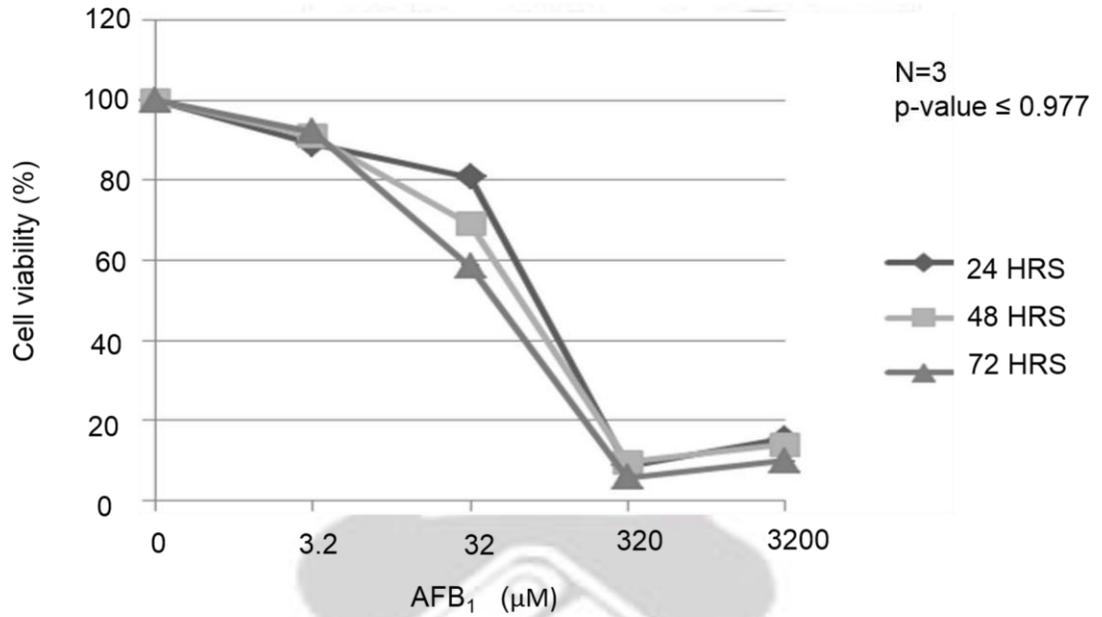
The results of the dual luciferase reporter gene assay indicated that increasing concentration of IFN resulted in corresponding increase in the type I IFN activity with

#### Chapter 4 The effects of AFB<sub>1</sub> on the type I IFN response

maximum activity being produced with concentrations of 200-400 IU/ml of IFN. It was observed that there was no significant difference in the type I IFN activity of cells stimulated with 200-400 IU/ml of IFN (**Fig. 4.1B**).

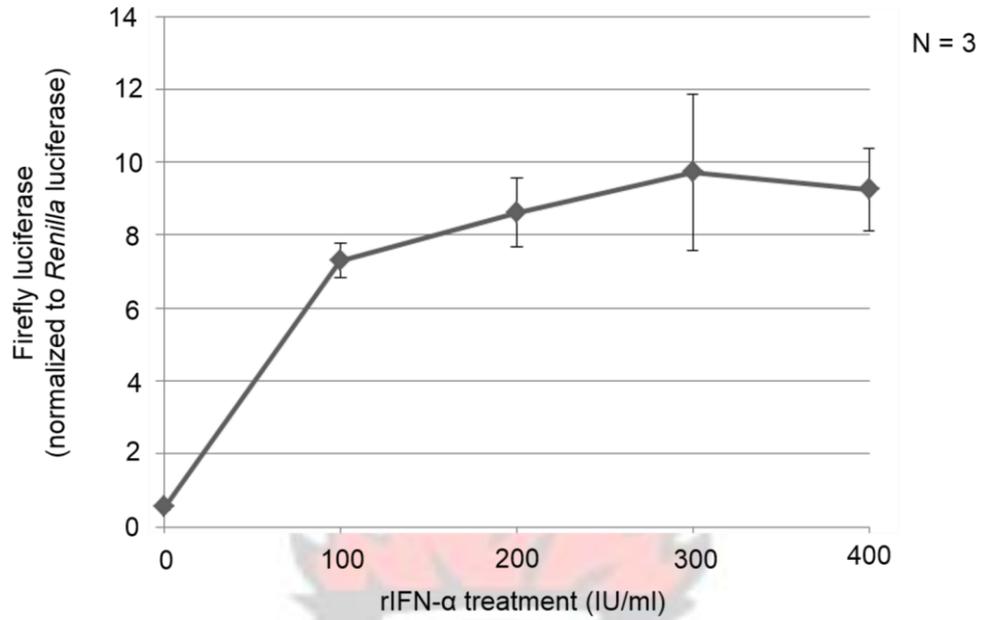
When HepG2 cells were stimulated with or without IFN and simultaneously treated with or without AFB<sub>1</sub>, the results indicated that the type I IFN pathway activity was highest in cells stimulated with IFN alone and that AFB<sub>1</sub> suppressed the type I IFN pathway activity in HepG2 cells in a dose-dependent fashion by inhibiting the pISRE-luc activity. It was observed that there was a significant difference in the type I IFN pathway activity in cells which were stimulated with IFN alone compared to cells which were stimulated with IFN and simultaneously treated with 10  $\mu$ M of AFB<sub>1</sub> (**Fig. 4.1C**)



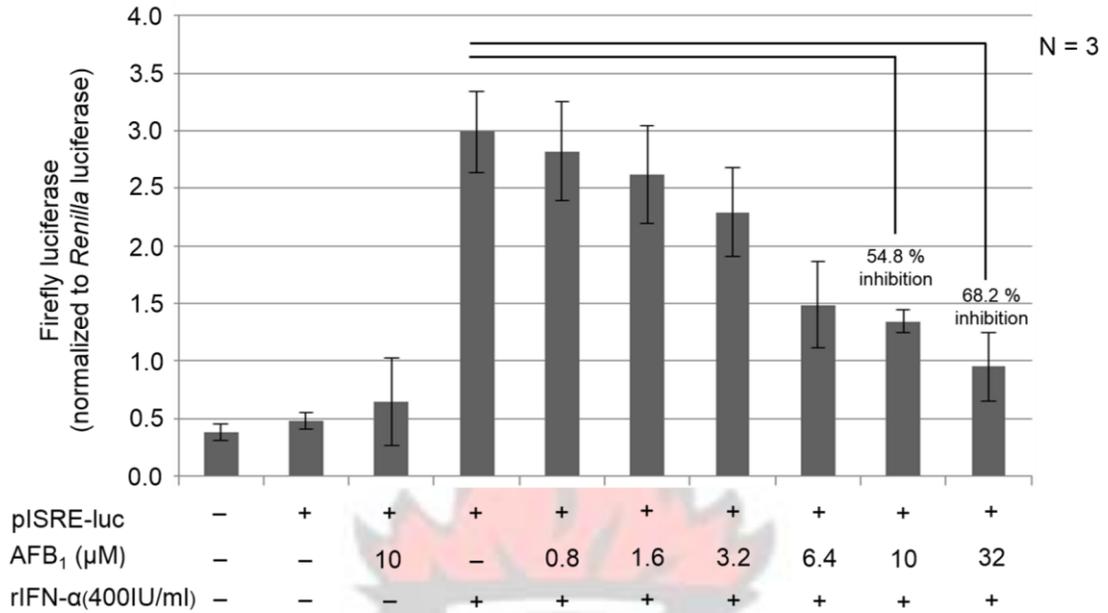


**Fig. 4.1A:** A graph showing the percentage viability of HepG2 cells as determined by MTS assay. The percentage viability of cells was calculated as ratio between AFB<sub>1</sub> treated cells and untreated cells. Data are presented as mean and standard deviation of three independent experiments each performed in duplicates, p-value ≤ 0.977 as determined by one-way ANOVA.

Error bars = STD (standard deviation) were too small to show.



**Fig. 4.1B:** A graph showing the induction of pISRE driven luciferase reporter gene activity by IFN- $\alpha$ . HepG2 cells were transiently co-transfected with pISRE-luc and pRLSV40. At 24 hours post-transfection, the cells were stimulated with increasing concentration of IFN- $\alpha$ . Luciferase activity was measured 24 hours later. The data are presented as mean and the standard deviation of three independent experiments each conducted in duplicate. There was no significant difference in pISRE-luc activity of cells treated with 300 and 400 IU/ml of IFN- $\alpha$  (pvalue  $\leq 0.7527$ ), Error bars = STD.



**Fig. 4.1C: A graph showing that AFB<sub>1</sub> suppressed the type I IFN response by inhibiting the activity of pISRE-luc.** HepG2 cells were transiently co-transfected with pISREluc and pRLSV40. At 24 hours post-transfection, the cells were stimulated with or without IFN-α and simultaneously treated with or without AFB<sub>1</sub>. Transfected cells which were stimulated with IFN-α but not treated with AFB<sub>1</sub> were calculated to have 100% pISRE-luc activity. The data are presented as mean and the standard deviation of three independent experiments each conducted in duplicate wells. There was a significant difference in pISRE-luc activity of cells treated with IFNα alone compared to cells treated with IFN-α and 10μM of AFB<sub>1</sub> (p-value ≤ 0.047) and cells treated with IFN-α and 32μM AFB<sub>1</sub> (p-value ≤ 0.024), Error bars = STD.

#### 4.4 Discussion

Information on studies on the effects of AFB<sub>1</sub> on the type I IFN pathway in HepG2 is very limited. However, quite a number of studies have attempted to investigate the effects

of AFB<sub>1</sub> on the viability of cells *in vitro*. For example Cheng *et al.* (2002) demonstrated in their study that the viability of duck peritoneal macrophages declined after exposure to AFB<sub>1</sub> concentration up to 320 µM for 12 hours. Conversely, Lereau *et al.* (2012) reported that AFB<sub>1</sub> had no measurable cytotoxic effects on HepaRG cells after treating the cells with AFB<sub>1</sub> for 4 hours at concentration up to 50 µM followed by 48 hours of maintenance in culture medium without AFB<sub>1</sub>. The reported results of Cheng *et al.*

(2002) is consistent with findings from this study. However, the results of (Lereau *et al.*, 2012) is at variance with the findings from this study. The difference between findings from this study and that of Lereau *et al.* (2012) could be attributed to differences in concentrations used as well as the length of exposure of cells to AFB<sub>1</sub>.

While in this study and that of Cheng *et al.* (2002) HepG2 and macrophages were exposed to AFB<sub>1</sub> concentrations of up to 3200 µM and 320 µM for 24 and 12 hours respectively, Lereau *et al.* (2012) exposed HepaRG cells to AFB<sub>1</sub> concentration up to 5 µM for 4 hours. Therefore the decline in cell viability observed in this study could be attributed to continual disturbance of the physiology of the cells owing to prolonged exposure to AFB<sub>1</sub>.

Another factor that could account for the difference observed in the study of Lereau *et al.* (2012) and this study was the types of cell lines that were used in the respective studies. While Lereau *et al.* (2012) used HepaRG cells, in this study HepG2 cells were used. Both HepaRG and HepG2 cells are human hepatoma cells. While HepaRG was derived from a female hepatocarcinoma patient, HepG2 was derived from male hepatocarcinoma patient. It has been reported that the basal gene expression levels of phase

I and phase II biotransformation enzymes in HepG2 are generally lower compared to HepaRG cells (Guillouzo *et al.*, 2007, Kanebratt and Andersson, 2008, Turpeinen *et al.*, 2009) suggesting that HepaRG cells could have a greater capacity of handling chemicals than HepG2 cells hence the difference observed in the two studies.

Aflatoxin contamination of both human and animal food has been found to be common in some West African countries like Ghana, Togo, Nigeria and Benin (Awuah and Kpodo, 1996, Kpodo *et al.*, 2000, Oyelami *et al.*, 1996) and this suggests that many Ghanaians are either directly or indirectly being exposed to high levels of aflatoxins primarily by eating contaminated food. Because prolonged heavy exposure of humans to AFB<sub>1</sub> is one of the significant environmental risk factors that contribute to the development of HCC (Hamid *et al.*, 2013, Wild and Hall, 2000) the concentrations of AFB<sub>1</sub> used in this study as well as the duration of exposure of cells to AFB<sub>1</sub> adopted could be appropriate since it is likely to represent what happens in humans who have been exposed to AFB<sub>1</sub> for decades.

As stated earlier, data or information on the effects of AFB<sub>1</sub> on the type I IFN pathway in literature is very limited. In this study, the luciferase reporter gene pISRE-luc was used to measure the activity of ISRE in response to IFN stimulation and AFB<sub>1</sub> treatment in HepG2 cells. The ISRE is a DNA motif that is found in the promoter regions of genes whose activities are regulated by the type I IFN. These genes are known as IFN stimulated genes (ISGs). The sequence of events which leads to the activation of ISRE begins when type I IFNs interact with their specific receptors. The interaction between the type I IFNs and their receptors set in motion a cascade of events that culminates in the transcription of certain genes (**section 2.15; Fig. 2.4**). Therefore, the suppression of type I IFNs pathway by AFB<sub>1</sub> through the inhibition of ISRE activity could weaken the immune system of

## Chapter 4 The effects of AFB<sub>1</sub> on the type I IFN response

individuals who are heavily exposed to AFB<sub>1</sub> for a longer period and hence make them more prone to infections.

# KNUST



## **CHAPTER 5 THE EFFECTS OF AFB<sub>1</sub> ON THE mRNA AND PROTEIN LEVELS OF THE TYPE I IFN PATHWAY**

### **5.1 Introduction**

The molecular mechanism by which aflatoxins and other mycotoxins modulate the immune system is poorly understood. However, available evidence in literature suggests that aflatoxins and other mycotoxins may exert their immunosuppressive effects by one of the following ways: they may inhibit (i) DNA replication, (ii) transcription and translation through the use of different mechanisms (Jolly *et al.*, 2008). It has been reported that many complicated and different post-transcriptional mechanisms could be involved in translating mRNAs into protein (Rasooly *et al.*, 2013). This observation suggests that higher mRNA levels will not always translate into higher protein synthesis. In the same manner, lower mRNA levels will not necessarily translate into lower protein synthesis suggesting that there could be a direct correlation between mRNA levels and protein production or mRNA levels may be inversely correlated to protein levels. For example Rasooly *et al.* (2013) reported that an increased mRNA levels does not correspondingly result in increase in the rate of protein synthesis. They reported in their study that even though low levels of AFB<sub>1</sub>, ricin and milk enhanced the production of recombinant proteins: luciferase firefly,  $\beta$ galactosidase and green fluorescent protein (GFP) in Human Embryonic Kidney 293 (HEK 293) and Vero African Green Monkey adult kidney cells, the mRNA levels were more than protein abundance (Rasooly *et al.*, 2013). The observation of Rasooly *et al.* (2013) was found to be consistent with the results of Guo *et al.* (2008) who reported that mRNA expression patterns could be accompanied by a 20-fold lower protein expression.

As previously stated, IFNs form a major component of the innate immune system that protect the body against cancers and viruses. The signaling pathways by which IFNs exert their anti-cancer actions can vary. One mechanism through which IFNs exert their anti-cancer activity is through the induction of STAT1 protein (Stephanou and Latchman, 2003). As a result this study focused on the JAK-STAT-ISRE arm of the type I IFN pathway. The JAK-STAT-ISRE pathway include several regulatory elements. However this study focused on *JAK1*, *STAT1* and *OAS3* which are the key signaling components of the JAK-STAT-ISRE arm of the type I IFN pathway which has been described previously (section 2.15).

As discussed previously (section 2.17.1) STAT1 signaling pathway activated by IFNs has tumour suppressive function (Dunn *et al.*, 2006) and also induces genes that modulate immune functions such as the establishment of antiviral state and induction of apoptosis (Khodarev *et al.*, 2012). Aside its involvement in the fighting against viruses, OAS3 has been reported to play a role in the induction of apoptosis and anti-proliferative responses of IFNs (section 2.18.3).

Because information available indicates that not all transcripts activity translate to protein, western blotting was used together with RT-qPCR to unravel the possible mechanism by which AFB<sub>1</sub> could suppress the type I IFN signaling pathway. Results generated will help in confirming the results of the dual luciferase reporter gene assay (Fig. 4.1C).

## 5.2 Methods

The methods that were employed in this section of the study were reverse transcriptase –quantitative polymerase chain reaction (RT-qPCR) and western blotting or immunoblot assay (sections 3.6-3.7.7).

### 5.2.1 Quantifying the mRNA levels of the key components of the type I IFN pathway

To determine whether AFB<sub>1</sub> had any measurable effects on the type I IFN signaling pathway at the transcription level, RT- qPCR was used to analyze the mRNA expression levels of *JAK1*, *STAT1* and *OAS 3* in HepG2 cells where the pathway was activated compared to the counterparts cells where the pathway was not activated.

RT-qPCR is normally used to quantify target nucleic acid by using either the absolute quantification or the relative quantification method. In this study the relative quantification method was employed to analyze the data from the RT-qPCR experiment. In relative quantification the ratio between the amount of target PCR products and control is determined. The normalized data from the RT-qPCR allows for comparison of differential gene expression in different samples. In this study the  $\Delta\Delta C_T$  method of relative quantification was used. To use the  $\Delta\Delta C_T$  method standard curves were constructed to determine the amplification efficiencies of the target and the endogenous reference gene in duplex RT-qPCR experiment. HepG2 cells were cultured as previously described (section 3.2). Monolayers of HepG2 cells were stimulated with IFN for 24 hours after which total RNA was extracted and then converted to cDNA as described previously (sections 3.6.1 and 3.6.2). A 10-fold serial dilutions (1:10<sup>-1</sup>-1:10<sup>-6</sup>) of the cDNA were made with nuclease

free water. Primers and probes specific for *JAK1*, *STAT1*, *OAS3* and *GAPDH* were used to determine the primer/probe binding efficiencies using qPCR. The primers and probes binding efficiency values were measured using the C<sub>T</sub> slope method.

Having established that the amplification efficiencies of the target and the endogenous reference gene were comparable (**Fig. 4.2A**), qPCR was used to quantify mRNA levels of *JAK1*, *STAT1* and *OAS3*. HepG2 cells were cultured as previously described (**section 3.2**). Monolayers of HepG2 cells were stimulated with or without IFN and simultaneously treated with or without AFB<sub>1</sub> for 24 hours after which total RNA was extracted and then converted to cDNA as described previously (**sections 3.6.1 and 3.6.2**). The mRNA levels of *JAK1*, *STAT1* and *OAS3* were quantified using specific primers and probes using Bio-Rad CFX 96 machine at KCCR.

### **5.2.2 Does the inhibition of the transcripts of *JAK1*, *STAT1* and *OAS3* by AFB<sub>1</sub> affect their translation into proteins as well?**

As previously stated (**section 5.1**), some genes can be affected at the transcription level but not at the translation phase. Therefore, after demonstrating through the RT-qPCR experiments that AFB<sub>1</sub> suppressed/inhibited the transcripts expression levels of *JAK1*, *STAT1* and *OAS3*, it was hypothesized that AFB<sub>1</sub> would ultimately suppress/inhibit the translation of *JAK1*, *STAT1* and *OAS3* mRNA into proteins as well. Since proteins are the functional end products of genes, if AFB<sub>1</sub> was to suppress the translation of the key components of the type I IFN signaling pathway, it would mean that the immune system of individuals exposed to AFB<sub>1</sub> would be compromised making those individuals more susceptible to infections and cancers. To test the hypothesis, western blotting was used to

analyze the effects of AFB<sub>1</sub> on *STAT1* at the protein synthesis or translation level. HepG2 cells were cultured as previously described (**section 3.2**). Monolayers of HepG2 cells were stimulated with or without IFN and simultaneously treated with or without AFB<sub>1</sub>. Twenty four hours later, the cells were harvested and total proteins extracted following standard protocol (**section 3.7.1**).

The concentrations of the unknown protein samples were determined by Bradford assay (**section 3.7.2**). First a standard curve was constructed from known BSA protein standards. The concentrations of the unknown protein samples were determined from the equation of the standard curve (**Fig. 3.3**).

Having determined the concentrations of the protein samples, equal amounts of the proteins were resolved by SDS-PAGE. After transfer onto PVDF membrane, the membrane containing the proteins was immunoblotted with antibodies to *STAT1* and *GAPDH* epitopes. The *GAPDH* was used to ensure that equal amounts of the proteins were loaded (**sections 3.7.3, 3.7.5 and 3.7.6 for details**).

### 5.2.3 Statistical analysis

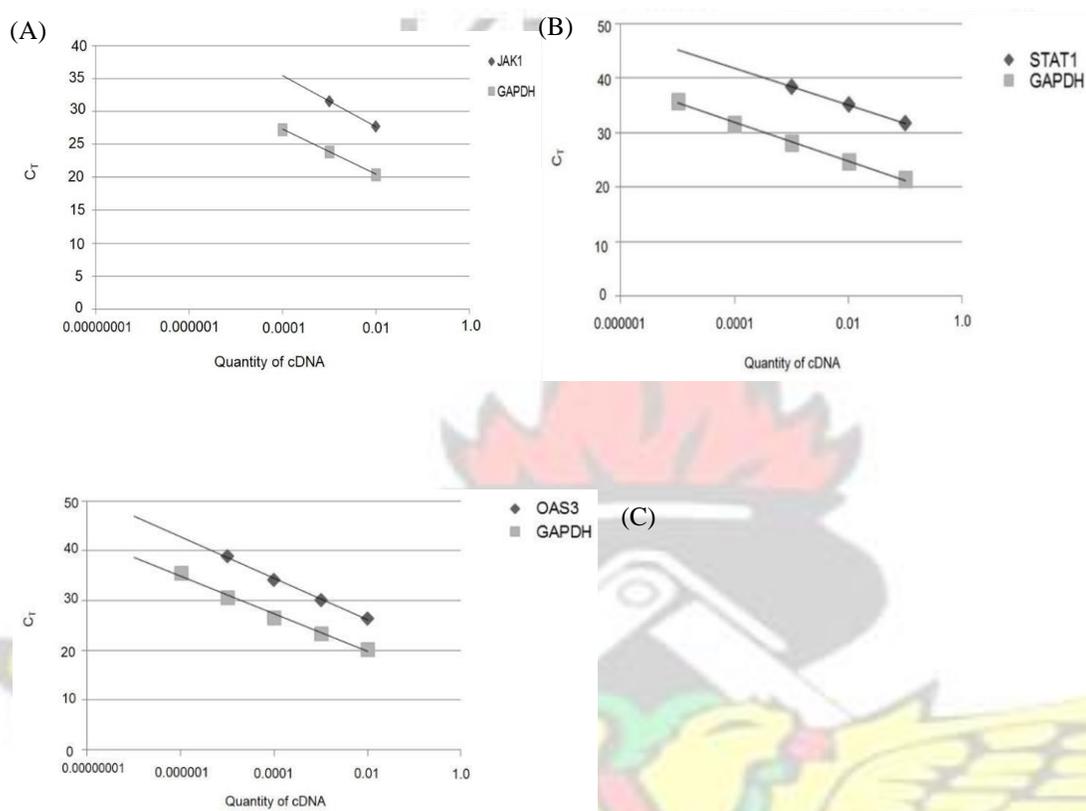
The data from the qPCR experiment was automatically entered into excel spread sheet on the Bio-Rad CFX 96 machine. The data was analyzed using the Bio-Rad CFX 96 manager software to determine the relative gene expression levels of *JAK1*, *STAT1* and *OAS3*. The differences in the gene expression levels of *JAK1*, *STAT1* and *OAS3* in HepG2 cells which were stimulated with IFN alone and in the cells which were stimulated with IFN and simultaneously treated with AFB<sub>1</sub> was analyzed using unpaired student's t-test.

The differences were considered to be significant when the p-value  $\leq 0.05$ .

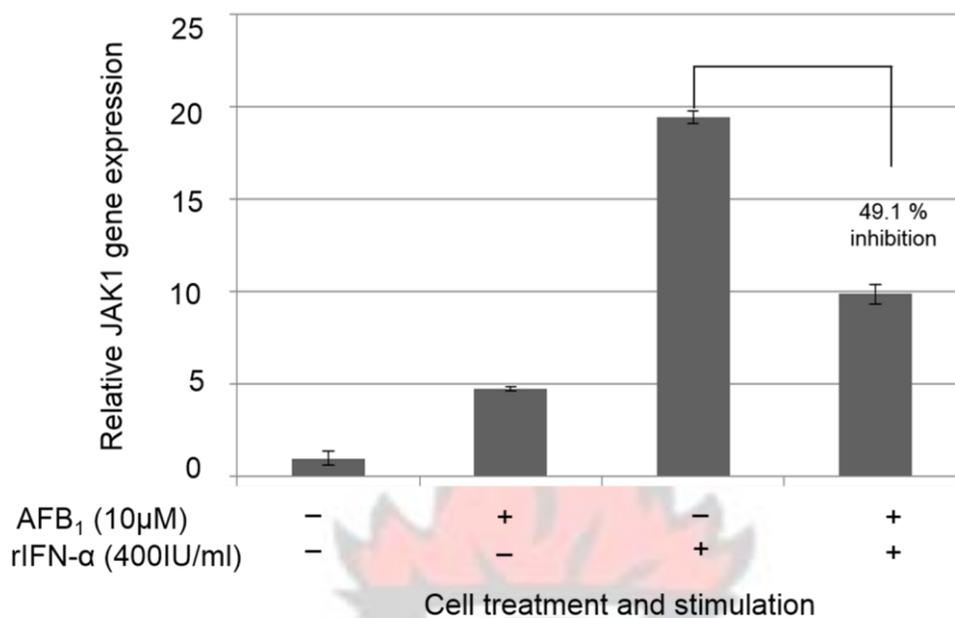
### 5.3 Results

The results of qPCR amplification efficiencies of *JAK1*, *STAT1* and *OAS3* in duplex reactions with *GAPDH* were 91.6%, 98.2% and 93.5% respectively (**Fig. 5.1A**). The results of the qPCR indicated that the relative expressions of *JAK1*, *STAT1* and *OAS3* was highest in cells which were stimulated with IFN alone. The results revealed that AFB<sub>1</sub> suppressed the mRNA transcript levels of *JAK1*, *STAT1* and *OAS3* by 49.1% (**Fig. 5.1B**), 47% (**Fig. 5.1 C**) and 39% (**Fig. 5.1D**) respectively. It was observed that there was a significant difference in the relative mRNA expressions in cells stimulated with IFN alone and cells stimulated with IFN and simultaneously treated with AFB<sub>1</sub> (*JAK 1*, p-value  $\leq 0.0001$ ; *STAT1*, p-value  $\leq 0.03$ ; *OAS3*, p-value  $\leq 0.05$ ).

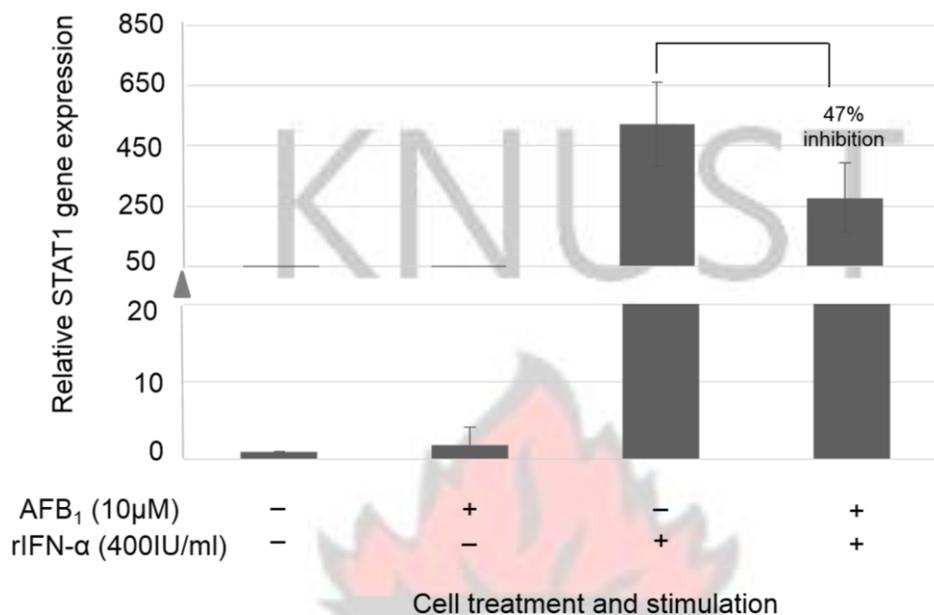
Western blotting analysis showed that HepG2 cells that were stimulated with IFN alone showed the highest concentration of *STAT1* protein levels. Conversely, the *STAT1* protein level decreased in cells that were stimulated with IFN and then simultaneously treated with AFB<sub>1</sub>. In other words AFB<sub>1</sub> reduced or inhibited *STAT1* protein accumulation in the cells (**Fig. 5.1E**).



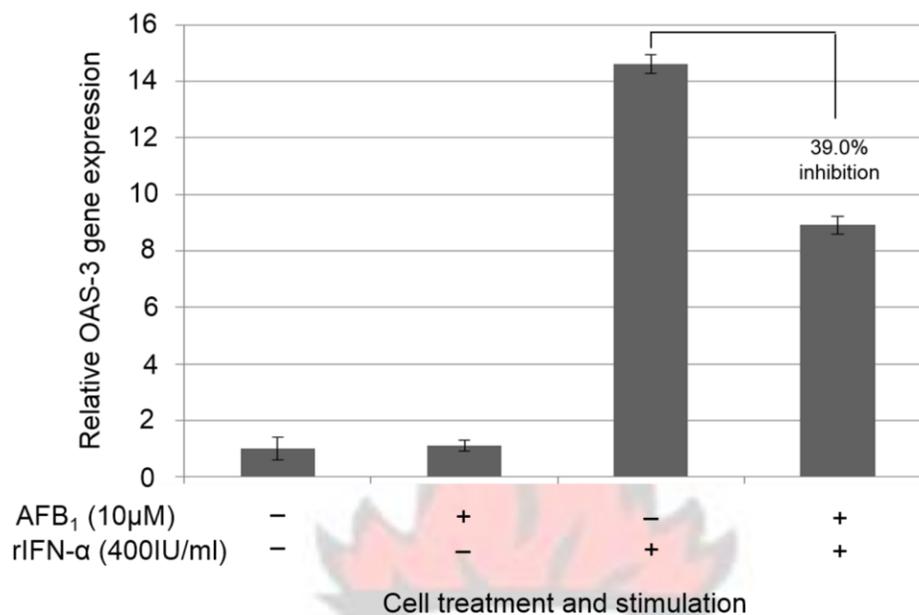
**Fig. 5.1 A: Primers and probes amplification efficiency study.** The efficiencies of the primers and probes for the targets *JAK1*, *STAT1*, *OAS3* and the endogenous control *GAPDH* in a duplex qPCR were determined by amplifying a sequential 10-fold dilutions of the cDNA. Primers and probes efficiency values were expressed in percentage and were measured using the C<sub>T</sub> slope method. The amplification efficiencies were calculated using the slope of the regression line in the standard curve. (A) The amplification efficiency of *JAK1* in a duplex reaction with *GAPDH* was 91.6%. (B) The amplification efficiency of *STAT1* in a duplex reaction with *GAPDH* was 98.2% and (C) The amplification efficiency of *OAS3* in a duplex reaction with *GAPDH* was 93.5%. Data are a representative of three independent experiments each conducted in triplicates. The amplification efficiency reference values were 90-110%.



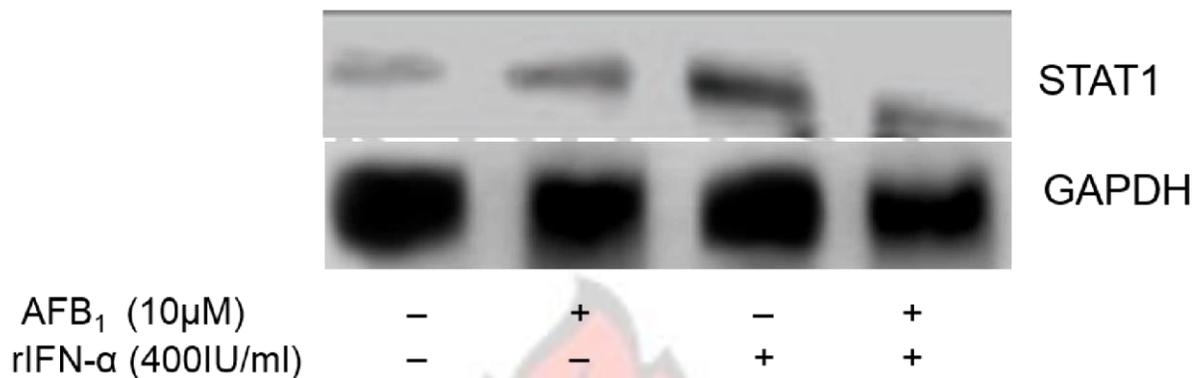
**Fig. 5.1B: AFB<sub>1</sub> inhibits JAK 1 gene transcription.** HepG2 cells were stimulated with or without IFN-α (400 IU/ml) and simultaneously treated with or without AFB<sub>1</sub> (10μM) for 24 hours followed by RT-qPCR analysis of *JAK1* transcription. The relative levels of JAK1 mRNA after normalization to GAPDH (endogenous control) was plotted. The *JAK 1* mRNA levels were determined by  $\Delta\Delta C_T$ . This is a representative data of three independent experiments each conducted in triplicate independent wells presented as mean and standard deviation, p-value  $\leq 0.0001$ , Error bars = STD.



**Fig. 5.1 C: AFB<sub>1</sub> inhibits STAT1 gene transcription.** HepG2 cells were stimulated with or without IFN-α (400 IU/ml) and simultaneously treated with or without AFB<sub>1</sub> (10μM) for 24 hours followed by RT-qPCR analysis of *STAT1* transcription. The relative levels of STAT1 mRNA after normalization to GAPDH (endogenous control) was plotted. The *STAT1* mRNA levels were determined by  $\Delta\Delta C_T$ . This is a representative data of three independent experiments each conducted in triplicate independent wells presented as mean and standard deviation, p-value  $\leq 0.03$ , Error bars = STD.



**Fig. 5.1D: AFB<sub>1</sub> inhibits OAS 3 gene transcription.** HepG2 cells were stimulated with or without IFN-α (400 IU/ml) and simultaneously treated with or without AFB<sub>1</sub> (10μM) for 24 hours followed by RT-qPCR analysis of *OAS3* transcription. The relative levels of OAS3 mRNA after normalization to GAPDH (endogenous control) was plotted. The *OAS3* mRNA levels were determined by  $\Delta\Delta C_T$ . This is a representative data of three independent experiments each conducted in triplicate independent wells presented as mean and standard deviation, p-value  $\leq 0.05$ , Error bars = STD.



**Fig. 5.1E:** Western blot analysis of the levels of STAT1 proteins after stimulation and treatment of HepG2 cells with rIFN-α and AFB<sub>1</sub> respectively. This data is a representative of three experiment conducted independently. The protein bands from the three experiment showed the same pattern.



## 5.4 Discussion

Even though the mechanism by which AFB<sub>1</sub> affects the immune system is poorly understood some evidence available in literature suggest that AFB<sub>1</sub> may suppress the immune system by inhibiting DNA replication, transcription and protein synthesis (Jolly *et al.*, 2008 ). For example AFB<sub>1</sub> and its metabolites have been reported to block RNA polymerase and ribosomal translocase and thus inhibit transcription (Eaton and Gallagher, 1994). In addition, aflatoxins have been reported to interfere with certain enzymes and substrates that are required for initiation, transcription and translation processes which are involved in the synthesis of proteins, reviewed in (Bbosa *et al.*, 2013a).

Results from the RT-qPCR experiments demonstrated that AFB<sub>1</sub> suppressed the mRNA levels of *JAK1*, *STAT1* and *OAS3*. This finding is consistent with the results of Jiang *et al.* (2015) who investigated the effects of AFB<sub>1</sub> on the mRNA expression levels of IL-2, IL-4, IL-6, IL-10, IL-17, IFN- $\gamma$  and TNF- $\alpha$  in the small intestines of broilers and reported that AFB<sub>1</sub> reduced the mRNA levels of IL-2, IL-4, IL-6, IL-10, IL-17, IFN- $\gamma$  and TNF- $\alpha$ . In addition other researchers have reported that AFB<sub>1</sub> suppressed/inhibited the mRNA levels of IL-4, IL-6 and IL-10 from the peritoneal macrophages, splenic lymphocytes and macrophage cell lines (Bruneau *et al.*, 2012, Dugyala and Sharma, 1996, Marin *et al.*, 2002). However Li *et al.* (2014) reported that AFB<sub>1</sub> increased the levels of IL-6, IFN- $\gamma$  and TNF- $\alpha$  mRNA expression in the serum and spleen of broilers (Li *et al.*, 2014).

The western blotting data showed that AFB<sub>1</sub> suppressed/inhibited the STAT1 protein levels a result which was consistent with the RT-qPCR data (**Fig. 5.1C**).The suppression of

STAT1 protein synthesis by AFB<sub>1</sub> observed in this study is consistent with the results of other researchers who have demonstrated that AFB<sub>1</sub> suppressed the protein levels of IL-4, IL-6 and IL-10 from the peritoneal macrophages, splenic lymphocytes and macrophage cell (Bruneau *et al.*, 2012, Dugyala and Sharma, 1996, Marin *et al.*, 2002). However, findings from the study of Li *et al.* (2014) is at variance with this study. They reported that

AFB<sub>1</sub> increased the IL-6, IFN- $\gamma$  and TNF- $\alpha$  protein levels in the serum and spleen of broilers Li *et al.* (2014).

STAT1 signaling pathway activated by type I IFNs has been thought about to be tumour suppressive (Dunn *et al.*, 2006). The anti-tumour function of STAT1 is considered to be crucial at the onset of tumour development (Tymoszuk *et al.*, 2014) and its role is to promote the eradication of cells that have become transformed by both the innate and adaptive immune system (Tymoszuk *et al.*, 2014). The activation of STAT1 leads to the up-regulation of genes needed for processing and presentation of antigens in dendritic cells (Tymoszuk *et al.*, 2014). Studies have shown that STAT1 prevent tumour development by promoting apoptosis and inhibiting cell proliferation in response to the presence of oncogenic cells (Kim and Lee, 2007). For example STAT1 has been reported to induce apoptosis by promoting the expression of Caspases, Fas and FasL (Ouchi *et al.*, 2000, Lee *et al.*, 2000). Taken all the evidence available in literature together, STAT1 is well known to play a crucial role in cancer immuno-surveillance. Therefore, the suppression/inhibition of STAT1 protein synthesis could possibly be another mechanism by which AFB<sub>1</sub> may cause cancer.

## CHAPTER 6 THE BIOLOGICAL SIGNIFICANCE OF THE SUPPRESSION OF THE TYPE I IFN PATHWAY BY AFB<sub>1</sub>

### 6.1 Introduction

The ability of IFNs to fight against viruses is essential for the survival of higher vertebrates against viral infection. The IFN- $\alpha/\beta$  which are members of the type I IFN family play crucial roles in conferring antiviral resistance in cells. Studies have shown that treatment of cells with IFN- $\alpha/\beta$  leads to the up-regulation of several genes and the upregulation of all those genes combine to establish antiviral state (reviewed in Randall and Goodbourn, 2008). For example, Clemens (2005) reported that mice that were deficient in IFN- $\alpha/\beta$  were highly susceptible to viral infections indicating that IFN- $\alpha/\beta$  are crucial in fighting against viruses.

After demonstrating that AFB<sub>1</sub> suppressed/inhibited the type I IFN pathway in HepG2 cells, it was hypothesized that AFB<sub>1</sub> would rescue viruses from the antiviral effects of the type I IFN response. If this hypothesis was found to be true then it could mean that AFB<sub>1</sub> could compromise the immune system of individuals exposed to AFB<sub>1</sub> making them more susceptible to viral infections. Therefore the study was conducted with the IFN sensitive chandipura virus as a model virus because: (i) Chandipura is a category II virus that causes mild disease to humans or is difficult to contract via aerosol in a laboratory setting, (ii) in adult humans chandipura virus is not associated with disease that is more severe than a mild refractory illness (Anukumar *et al.*, 2013), (iii) the virus easily forms

visible plaques due to its high rate of replication, (iv) it is sensitive to IFN making it a useful tool for IFN bioassay (Berger and Zimmer, 2011).

### **6.1.1 Chandipura virus as a human pathogen**

Chandipura virus which was isolated from the blood samples of patients from the Chandipura village located near Nagpur at the northern Maharashtra state in India (Bhatt and Rodriguez, 1967) has been associated with acute encephalitic illness in children in Andhra Pradesh in India (Rao *et al.*, 2004). During the outbreak which occurred from June-August 2003, 329 children were affected with 183 of them dying (Rao *et al.*, 2004). Following that another outbreak of encephalitis was observed in children in Gujarat State in western India in 2004 in which 26 cases with 18 deaths were recorded (Chadha *et al.*, 2005). In a study conducted by Tandale *et al.* (2008) to monitor acute encephalitis among children of North Telangana region of Andhra Pradesh between May 2005 and April 2006, Chandipura virus aetiology was identified in 25 out of 52 cases recorded (Tandale *et al.*, 2008).

Even though the virus has been isolated from sand flies in some West African countries like Nigeria and Senegal (Fontenille *et al.*, 1994, Traore-Lamizana *et al.*, 2001) suggesting a wide distribution, no human cases of infections caused by this virus has been reported outside India.

## **6.2 Methods**

The methods that were employed in this section of the study were virus culture and plaque assay (sections 3.8-3.8.1).

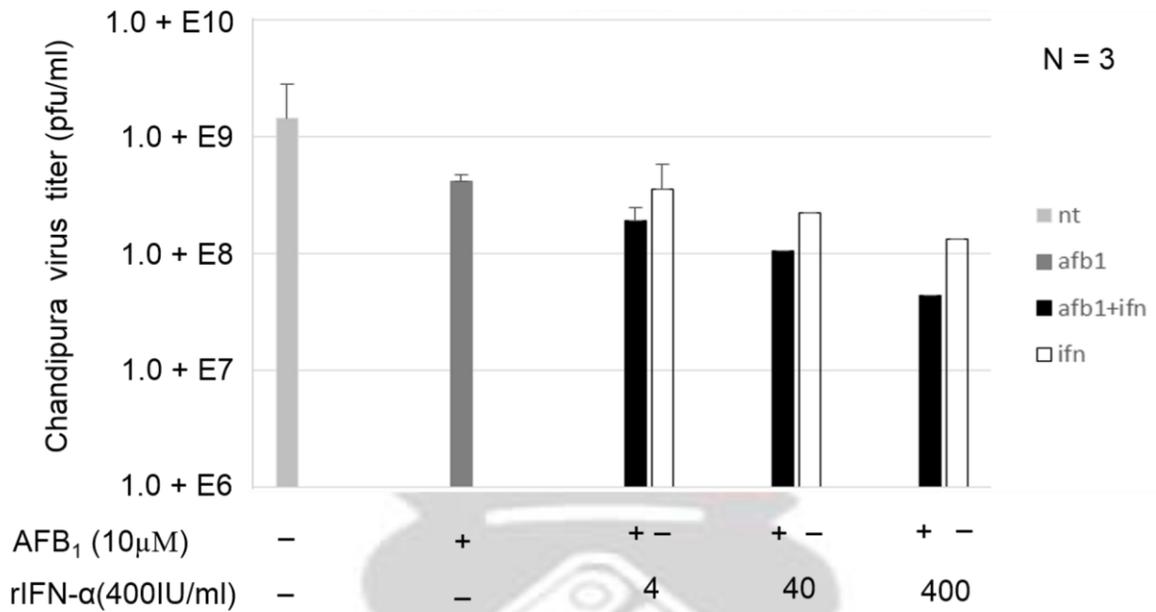
### 6.2.1 Investigating the impact of AFB<sub>1</sub> on the replication of chandipura virus

Under **chapters 4 and 5**, it was demonstrated that AFB<sub>1</sub> suppressed/inhibited the type I IFN pathway. To elucidate the biological significance of this observation, an IFN-sensitive virus was used to determine whether AFB<sub>1</sub> would rescue the virus from the antiviral effects of the type I IFN. Because of its sensitivity to IFN which makes it very useful tool for IFN bioassays (Berger and Zimmer, 2011), chandipura virus was used in this experiment.

The study was conducted by growing HepG2 cells as previously described (**section 3.2**). Briefly monolayers of HepG2 cells were stimulated with or without IFN (up to 400 IU/ml) and simultaneously treated with or without 10  $\mu$ M AFB<sub>1</sub>. Twenty four hours later, the cells were infected with chandipura virus at MOI of 0.1 PFU/cell. After 1 hour of adsorption, fresh growth medium containing neither IFN nor AFB<sub>1</sub> was added to the cells and further incubated. The cell culture supernatants were harvested 24 hours later and the chandipura virus titer quantified by plaque assay (**section 3.8.1**).

## 6.3 Results

The results from the virus culture and the plaque assay revealed that the virus titer was highest in cells which were neither stimulated with IFN nor treated with AFB<sub>1</sub>. It was observed that AFB<sub>1</sub> killed the Chandipura viruses and that the rate of killing was exacerbated by IFN (**Fig. 6.1**).



**Fig. 6.1: AFB<sub>1</sub> inhibits the replication of Chandipura virus in HepG2 cells.** Confluent monolayer of cells were stimulated with or without increasing concentrations of rIFN- $\alpha$  (4, 40 and 400 IU/ml) and simultaneously treated with or without AFB<sub>1</sub> (10  $\mu$ M) for 24 hours. The cells were infected with chandipura virus at MOI of 0.1 and 24 hours later, the cell culture supernatants were harvested and the virus titer quantified by plaque assay using mouse fibroblast (L929) cells. After incubation for 3 days, plaques were identified by crystal violet staining and counted. Data are presented as mean and standard deviation of three independent experiments conducted in duplicate independent wells. NT: cells which were neither stimulated with IFN nor treated with AFB<sub>1</sub>; AFB<sub>1</sub>: cells which were treated with only AFB<sub>1</sub>; AFB<sub>1</sub>+IFN: cells which were stimulated with IFN and simultaneously treated with AFB<sub>1</sub>; IFN: cells which were stimulated with IFN alone, Error bars = STD.

## 6.4 Discussion

The type I IFN pathway is well known for its antiviral property. Therefore after demonstrating at the transcription as well as protein synthesis level that AFB<sub>1</sub> inhibited/suppressed the type I IFN pathway, the expectation was that AFB<sub>1</sub> would ultimately suppress the antiviral pathway of the type I IFN and hence rescue viruses.

Quite a number of studies have utilized the replication of viruses to study the effects of different inhibitors or chemical groups on the antiviral effects of the type I IFN. For example Mutocheluh *et al.* (2011), utilized the replication of IFN sensitive encephalomyocarditis virus (EMCV) in vIRF-2 clone 3-9 and EV clone 5 cells to study the biological significance of vIRF-2 inhibition of the type I IFN pathway and reported that vIRF-2 rescued the EMCV from the antiviral effects of type I IFN (Mutocheluh *et al.*,

2011). In another study, Morrison and Racaniello (2009), also employed the replication of Enterovirus in human cervical carcinoma (HeLa S3), Vero and human hepatoma (Huh 7) cell lines to determine whether proteinase 2 A<sup>pro</sup> was essential for Enterovirus Replication in type I IFN treated cells and reported that proteinase 2 A<sup>pro</sup> rescued the Enterovirus from the antiviral effects of the type I IFN. However, proteinase 2 A<sup>pro</sup> could not rescue the replication of vesicular stomatitis virus and EMCV in type I IFN pre-treated cells (Morrison and Racaniello, 2009).

Taken together the above information, the replication of chandipura virus was utilized in this study to investigate the biological significance of the AFB<sub>1</sub> inhibition of type I IFN pathway in HepG2 cells. Contrary to the initial expectation that AFB<sub>1</sub> would rescue the IFN sensitive virus from the antiviral effects of the type I IFN, results generated from

the virus work pointed to the fact that AFB<sub>1</sub> rather killed the IFN-sensitive chandipura virus and that the rate at which the viruses were killed was exacerbated by IFN. The results obtained from this study was similar to that of Lereau *et al.* (2012) who reported that AFB<sub>1</sub> decreased the replication of HBV in HepaRG cells after exposure of HBV to AFB<sub>1</sub> concentration of up to 5  $\mu$ M (Lereau *et al.*, 2012).

However, a study conducted by Barraud *et al.* (1999) to investigate the effects of AFB<sub>1</sub> exposure on the replication of duck hepatitis B virus in Pekin duck model during the initial stage of virus-AFB<sub>1</sub> interaction showed a significant increase in the titer of duck hepatitis B virus in the serum and liver of AFB<sub>1</sub> treated-ducks compared with dimethyl sulfoxide (DMSO) treated controls (Barraud *et al.*, 1999). The increase in viral replication observed in the Pekin duck model was confirmed *in vitro* in primary duck hepatocytes (Barraud *et al.*, 1999). In addition, Hahon *et al.* (1979) investigated the effects of AFB<sub>1</sub> exposure on the replication of influenza virus in LLC-MK<sub>2</sub> cells and reported that the levels of virus concentration attained in AFB<sub>1</sub> treated cells were two to four-fold higher compared with the untreated control. The enhanced influenza viral growth rate observed in AFB<sub>1</sub> treated cells in the study of Hahon *et al.* was attributed to the ability of AFB<sub>1</sub> to inhibit IFN production (Hahon *et al.*, 1979).

Taken together, the results of Barraud *et al.* (1999) and Hahon *et al.* (1979) indicate that AFB<sub>1</sub> rescued some viruses from the antiviral effects of the type I IFN response. However, how AFB<sub>1</sub> inhibited the replication of chandipura virus in this study is unknown. Considering results from this study and that of Lereau *et al.* (2012), further studies may be required to unravel the exact mechanism by which AFB<sub>1</sub> kills some viruses. The reason

## Chapter 6 The biological significance of suppression of type I IFN pathway by AFB<sub>1</sub>

why AFB<sub>1</sub> might have affected the replication of chandipura virus in this study could be that the replication of chandipura virus may differ from that of other IFN sensitive viruses. Also, AFB<sub>1</sub> could be directly lethal to chandipura virus. It is also possible that AFB<sub>1</sub> may bind and block certain enzymes and substrates that are required for the replication of chandipura virus hence its ability to kill the virus.



## CHAPTER 7 GENERAL DISCUSSION

### 7.1 General discussion

The discovery of aflatoxins in the 1960s sparked lots of studies into the effects of AFB<sub>1</sub> on the health and the immune status of individuals exposed to it. These studies led to the demonstration that AFB<sub>1</sub> causes HCC in humans and experimental animals by inducing AGG to AGT transversion mutations in the tumour suppression gene TP53. This mutation which is detected in most AFB<sub>1</sub> induced HCC leads to (i) inhibition of apoptosis, (ii) inhibition of p53 mediated transcription and (iii) stimulation of liver cell growth leading to cancer (Aguilar *et al.*, 1993; Hsu *et al.*, 1991).

However, the mechanism by which AFB<sub>1</sub> causes HCC may not be limited to p53 mutation alone and that AFB<sub>1</sub> may also induce cancers by deregulating other anticancer signalling pathways. For example Ubagai *et al.* (2010) demonstrated that AFB<sub>1</sub> may also induce tumourigenesis by deregulating the IGF-IR signalling pathway suggesting that AFB<sub>1</sub> may also induce tumourigenesis by deregulating other anticancer pathways such as the type I IFN signalling pathway. In this study the hypothesis that AFB<sub>1</sub> would suppress/inhibit the type I IFN signalling pathway and thus provide another mechanism by which AFB<sub>1</sub> may cause cancer was tested. In addition, the study was also aimed at investigating the biological significance of the suppression/inhibition of the type I IFN pathway.

The study was divided into three phases. The phase I was aimed at determining the working concentration of AFB<sub>1</sub> and also investigating the effects of AFB<sub>1</sub> on the type I

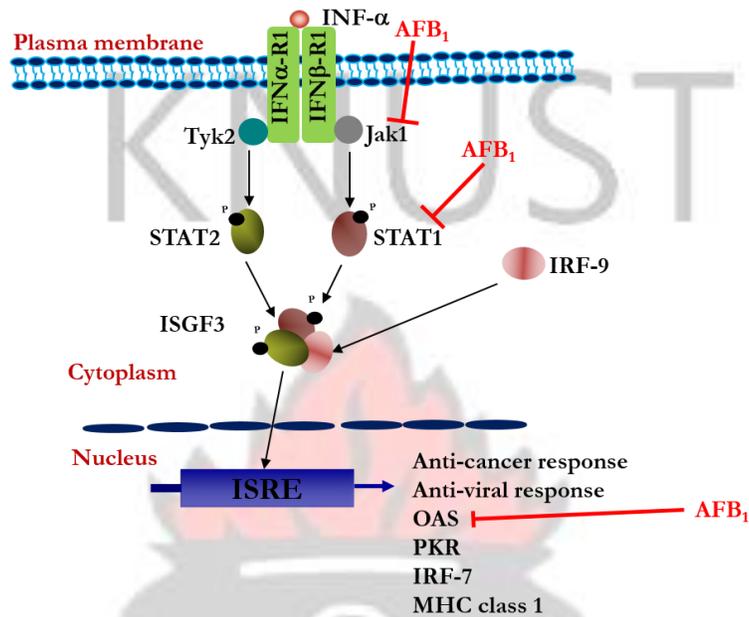
IFN pathway using the dual luciferase reporter gene assay. Initial results revealed that as the concentration of AFB<sub>1</sub> was increased the viability of the cells decreased. The decrease in cell viability suggested that AFB<sub>1</sub> could have probably affected certain physiological processes that were necessary for cell survival. For example, Al-Hammadi *et al.* (2014) reported that exposure of human lymphocytes to AFB<sub>1</sub> resulted in the impairment in cellular oxygen consumption, caspase activation and necrosis underscoring the immunosuppressive activity in humans exposed to this lethal mycotoxin.

It was also demonstrated that AFB<sub>1</sub> suppressed the type I IFN pathway in human liver derived cell line HepG2 cells. Since the type I IFN forms part of the innate immune system, the demonstration that AFB<sub>1</sub> suppresses the type I IFN pathway could suggest that the immune system of individuals exposed to AFB<sub>1</sub> could be compromised and thus predispose them to viral infections as well as cancers. In the HepG2 cells that were used as model system to mimic what happens in the liver *in vivo*, it was demonstrated that AFB<sub>1</sub> suppressed the mRNA expression levels of *JAK1*, *STAT1* and *OAS3*. In addition it was demonstrated that the suppression of the mRNA expression level of *STAT1* was accompanied by a corresponding decrease in STAT1 protein level (**Fig. 7.1**). The *JAK1* and *STAT1* transcriptional factors are components of the JAK-STAT signaling pathway while *OAS3* is a protein targeted by type I IFN signaling. The JAK-STAT pathway, via STAT1 is activated by IFN- $\alpha/\beta$ , growth factors etc. The STAT1 signaling pathway activated by IFN has tumour suppressive (Dunn *et al.*, 2006) and also activates a myriad of genes that modulate immune functions such as the establishment of antiviral state and induction of apoptosis (Khodarev *et al.*, 2012). Also the *OAS3* is known to initiate cellular stress response that leads to apoptosis (Silverman, 2003) and hence aid in fighting cancers.

## Chapter 7 General discussion

Therefore, the suppression of *STAT1* and *OAS3* mRNA expression in addition to the suppression of STAT1 protein synthesis will mean that the immune system will be greatly compromised and therefore predispose individuals to cancers and viral infections.

It is a well-known fact that the risk of HCC is amplified in the context of HBV and AFB<sub>1</sub> co-existing (Kew, 2003). Therefore, the ability of AFB<sub>1</sub> in enhancing the replication of viruses will support the fact that AFB<sub>1</sub> and viruses more specifically HBV co-operate in inducing HCC. In this study, the ability of AFB<sub>1</sub> in rescuing Chandipura virus was investigated. Even though the Chandipura virus used in this study has tropism for the cells of the nervous system (Anukumar *et al.*, 2013), its sensitivity to IFN made it possible to use. It was however observed that AFB<sub>1</sub> was lethal and therefore killed the Chandipura virus, a finding which is in agreement with that of Lereau *et al.* (2012) who reported that AFB<sub>1</sub> inhibited the replication of HBV in HepaRG cells. The mechanism underlying the inability of AFB<sub>1</sub> in rescuing some viruses is not clear and that further studies will be required to unravel that.



**Fig 7.1: Proposed deregulation of type I IFN signaling pathway by AFB<sub>1</sub>.** The type I signaling pathway begins when ligand such as IFN- $\alpha/\beta$  binds to IFNAR1/2 which are associated with Tyk2 and JAK1 respectively. The interaction between IFN- $\alpha/\beta$  and the receptor results in phosphorylation and activation of Tyk2 and JAK1. The activated JAKs in turn recruit and phosphorylate STAT1 and 2 on tyrosine 701 (727 as well) and 690 respectively. The phosphorylated and activated STAT1 and 2 come together and form heterodimer. The dimerized STAT1 and 2 recruits IRF-9 and form the ISGF-3 transcription factor complex. The ISGF-3 enters the nucleus and interacts with ISRE which results in the transcription of IFN-inducible genes that switch on the anti-cancer as well as the anti-viral defense system. The current study has demonstrated that AFB<sub>1</sub> suppresses/inhibits the mRNA expression levels of JAK1, STAT1 and OAS3 (indicated by red font and straight lines crossed at one end). In addition protein expression level of STAT1 was also demonstrated to be suppressed/inhibited by AFB<sub>1</sub>.

## 7.2 Limitation(s) of the study

Some factors may have affected some aspect of the results in the current study therefore need to be addressed in future studies. For example, in order to investigate the ability of AFB<sub>1</sub> in rescuing viruses from the antiviral activities of the type I IFN pathway, an IFN sensitive Chandipura virus was used. The Chandipura virus is known to have tropism for the cells of the nervous system (Anukumar *et al.*, 2013) and that its use on human liver derived cell line could have affected the result of the virus work. In place of the Chandipura virus, HBV which has tropism for liver cells could have been used. However the difficulty in procuring the virus from the foreign companies made it impossible for HBV to be used in the study. It is therefore recommended that other IFN-sensitive viruses such as EMCV and Dengue should be utilized in future IFN-bioassay works since they are more likely to give the expected results.

## 7.3 Conclusion(s)

Taken together, the current study has demonstrated that AFB<sub>1</sub> suppresses/inhibits the type I IFN response pathway by inhibiting the transcripts of *JAK1*, *STAT1* and *OAS3* and STAT1 protein which are the key signaling elements of the JAK-STAT-ISRE arm of the type I IFN pathway and that the inhibition of the type I IFN pathway could be another mechanism by which AFB<sub>1</sub> could cause HCC. The study showed that AFB<sub>1</sub> was lethal to chandipura virus suggesting that chandipura virus was not a suitable tool to be used to study the biological significance of the suppression/inhibition of the type I IFN response pathway by AFB<sub>1</sub>.

## 7.4 Future perspectives

To better understand the role of AFB<sub>1</sub> in modulating the type I IFN response, the following recommendations have been suggested:

- (i) The role of AFB<sub>1</sub> in modulating the type I IFN response in different cell lines must be investigated. It is a well-known fact that the liver plays a major role in the metabolism of many compounds and also represent an important target organ in systemic toxicity. This characteristic of liver explains why hepatic models are used in assessing the toxicity of many compounds *in vitro* (Davila *et al.*, 1998). Even though the HepG2 cells used in this study are suitable *in vitro* model system, it is recommended that the study be repeated using other liver cell lines such as HepaRG and HuH7 cells so that the results does not become cell line specific.
- (ii) Further studies are required to unravel the possible mechanism by which AFB<sub>1</sub> kills the viruses.

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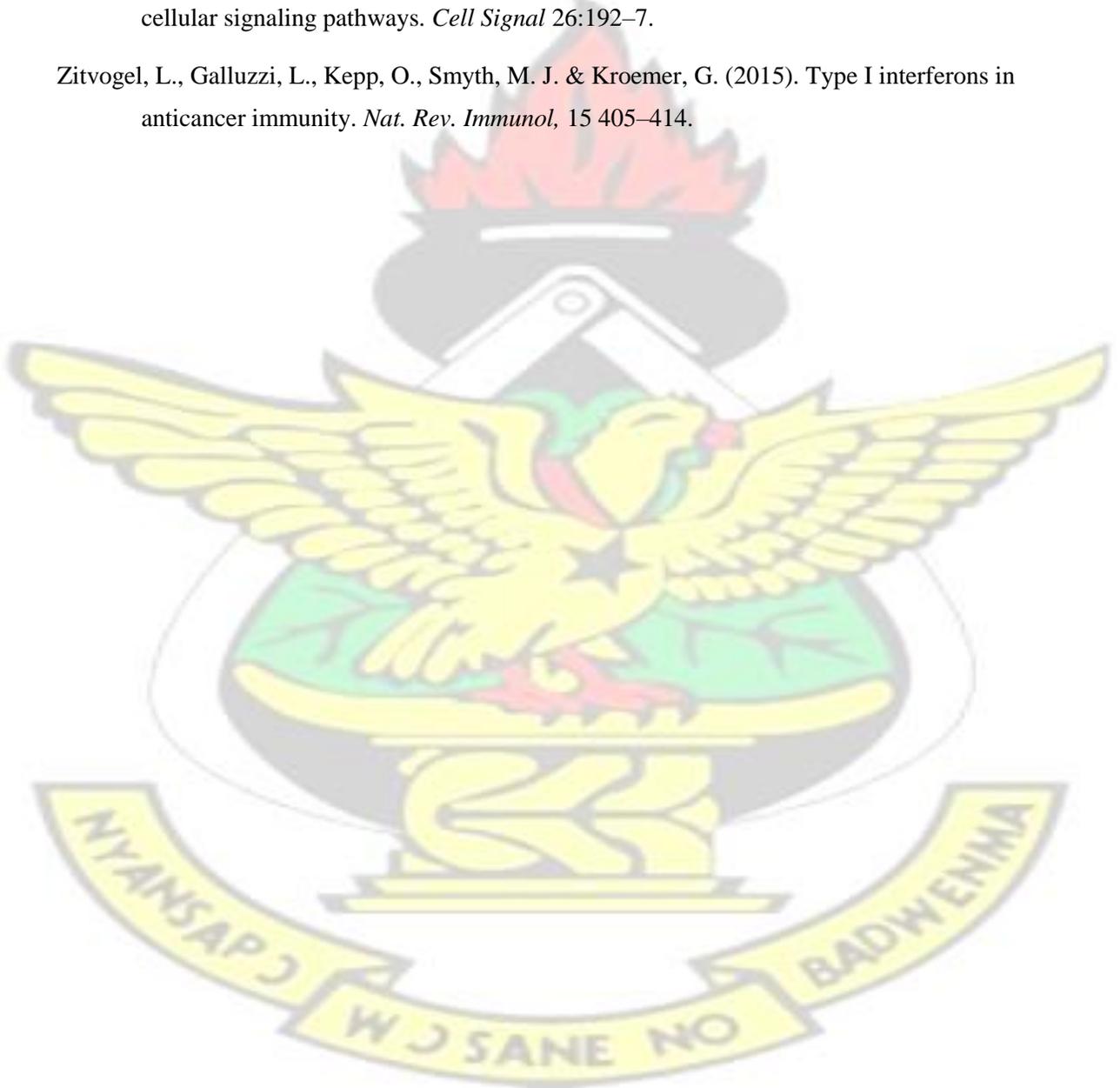
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## Appendices

### Appendix A:

**Table 1: Reagents and chemicals used**

Reagents / chemicals	Composition	Supplier /country
Aflatoxin B1 (AFB1)	Aflatoxin B1	Sigma Aldrich, Germany
Dulbecco's Modified Eagle's Medium with high glucose (DMEM)	4.5g/l glucose	Sigma Aldrich, Germany
Human interferon-alpha 2b (rIFN $\alpha$ 2b)	Recombinant human interferonalpha 2	PBL Biomedical Laboratories, USA
100X MEM non-essential amino acids	Non-essential amino acids	Sigma Aldrich, Germany
100X Halt™ phosphatase inhibitor cocktail	Sodium fluoride, sodium orthovanadate, sodium pyrophosphate, $\beta$ glycerophosphate	Thermo Scientific, USA
100X Halt Protease inhibitor cocktail	AEBSF, Aprotinin, Bestatin, E64, Leupeptin, Pepstatin, EDTA	Thermo Scientific, USA
30% Acrylamide / bis-acrylamide Solution	30 % w/v acrylamide; 0.8% w/v bis-acrylamide	Bio-Rad, USA
Absolute methanol (analytical grade)	methanol	Chem-Lab NV, Belgium
Absolute ethanol (analytical grade)	ethanol	Fisher Scientific, UK
5X reaction mixture (PCR) for cDNA synthesis	Reaction buffer, dNTPs Oligo (dT) <sub>18</sub> and random hexamer primers	Thermo Scientific, Germany
Maxima enzyme Mix	Maxima Reverse transcriptase and Thermo Scientific RiboLock RNase inhibitor	Thermo Scientific, Germany
Coomassie brilliant blue staining solution	0.05% w/v Coomassie Brilliant Blue, 40% v/v ethanol, 50% v/v water, 10% acetic acid	Prepared in the Lab
Quick start™ Bradford 1X Dye Reagent	Coomassie Brilliant Blue G-250 dye methanol and phosphoric acid	Bio-Rad, USA
Glycine	Glycine	Bio-Rad, USA
Tris	Tris	Bio-Rad, USA
10% Sodium dodecyl sulphate (SDS)	SDS pH 7.2	Bio-Rad, USA
Sodium chloride	Sodium chloride	VWR, Belgium
Ammonium per sulphate (APS)	Ammonium per sulphate	Sigma Aldrich, Germany

## Appendices

0.4% Trypan Blue solution	Trypan blue dye prepared in 0.081% sodium chloride and 0.06% potassium phosphate	Sigma Aldrich, Germany
Tetramethylethylenediamine (TEMED)	Tetramethylethylenediamine (TEMED)	Sigma Aldrich, Germany
Dual Luciferase Reporter Assay Kit	Luciferase assay reagent II(Beetle Luciferin ); Stop & Glo reagent (Coelenterazine)	Promega, USA
Penstrep	Penicillin & streptomycin	Gibco by life technologies, UK
Foetal Bovine serum	Growth factors, hormones, protein etc.	Sigma Aldrich, Germany
Protein markers	Pre-stained protein markers	Thermo Scientific, Germany
Pierce ECL Western blotting substrate	Detection reagent 1:Luminol/enhancer 2: Peroxide solution	Thermo Scientific, Germany
2-β-mercaptoethanol	2-β-mercaptoethanol	Bio-Rad, USA
Maxima Enzyme mix with ds DNase for cDNA synthesis	Maxima Reverse Transcriptase, Thermo Scientific RiboLock RNase inhibitor, ds DNase	Thermo Scientific, Germany
5X reaction Mix for cDNA synthesis	Reaction buffer, dNTPs, oligo (dT) <sub>18</sub> and random hexamer primers	Thermo Scientific, Germany
Nuclease free water	water	Thermo Scientific, Germany
0.5M Ethylenediaminetetraacetic acid (EDTA)	EDTA.2H <sub>2</sub> O; NaOH, pH 8.0	Thermo Scientific, Germany
2X Maxima Probe/ROX qPCR Master mix	Tag DNA polymerase, dNTPs, PCR buffer (Potassium Chloride, Ammonium Sulphate and Magnesium chloride)	Thermo Scientific, Germany
1X 0.25% w/v Trypsin EDTA	0.25% Trypsin, 0.025mM Phenol Red,0.02% EDTA and inorganic salts	Gibco by Life Technologies, UK
CellTiter 96 <sup>®</sup> AQueous One Solution	Tetrazolium compound, phenazine ethosulfate	Promega, USA
Ampicillin	Ampicillin	Thermo scientific, Germany
Luria Bertani broth	10g tryptone; 5g yeast extract; 10 g NaCl; 15g agar; topped up with distilled water to 1L mark	Sigma Aldrich, USA

## Appendices

Luria Bertani agar	10g tryptone; 5g yeast extract; 10 g NaCl; 15g agar; topped up with distilled water to 1L mark	Sigma Aldrich, USA
Ultra-Pure™ Agarose	Agar	Invitrogen, Spain
Pre-diluted protein standards	Bovine serum albumin	Bio-Rad, USA
Crystal Violet stain	0.5g crystal violet, 20ml of absolute ethanol, 0.9g NaCl, 100ml of 40% formaldehyde solution, 880 ml of distilled water to make 1litre	Prepared in the laboratory

### Appendix B:

**Table 1: Commonly used buffer and other solutions**

Buffer solution	Composition	Supplier
Buffer P1 (resuspension buffer)	50mM Tris-Cl, PH 8.0 10mM EDTA, 100 µg/ml RNase A	QIAGEN®, USA
Buffer P2 (lysis buffer)	200mM NaOH. 1% SDS (w/v)	QIAGEN®, USA
Buffer P3 (neutralization buffer)	3.0 M potassium acetate, pH 5.5	QIAGEN®, USA
Buffer QBT (equilibrium buffer)	750 mM NaCl, 50mM MOPS, pH 7.0; 15% isopropanol (v/v); 0.15% Triton X-100 (v/v)	QIAGEN®, USA
Buffer QC (wash buffer)	1.0M NaCl, 50mM MOPS, pH 7.0 15% isopropanol (v/v)	QIAGEN®, USA
Buffer QF (elution buffer)	1.25 M NaCl, 50mM Tris-Cl, pH 8.5; 15% isopropanol (v/v)	QIAGEN®, USA
Buffer QN (elution buffer)	1.6 M NaCl; 50 mM MOPS, pH 7.0; 15% isopropanol (v/v)	QIAGEN®, USA
TE	10mM Tris-Cl, pH 8.0; 1mM EDTA	QIAGEN®, USA
Lysis buffer for RNA purification	Proteinase, Tritirachium album serine, Guanidine thiocyanate supplemented with βmercaptoethanol before use	Thermo Scientific, Germany
Wash buffer 1	96-100% ethanol, Tris-EDTA	Thermo Scientific, Germany
Wash buffer 2	ethanol, Tris-EDTA	Thermo Scientific, Germany
Phosphate buffered saline	8g/L NaCl, 0.2g/L KCl, 1.15g/L Disodium hydrogen phosphate, 0.2g/L potassium dihydrogen phosphate	Oxoid Limited, UK

## Appendices

Pierce RIPA buffer	25mM Tris-HCl pH 7.6, 150mM NaCl, 1% NP-40, 1% sodium deoxycholate, 0.1% SDS	Thermo Scientific, Germany
Stacking gel buffer	0.5M Tris-HCl, pH 6.8	Bio-Rad, USA
Resolving gel buffer	1.5M Tris-HCl, pH 8.8	Bio-Rad, USA
10X Electrophoresis / Running buffer	Tris base 30.24 g, Glycine 142.5 g, add distilled water up to 800 ml mark, adjust pH to 8.4 with HCl and add distilled water to 1L mark	Prepared at the laboratory
1X Electrophoresis/Running buffer	100 ml 10X electrophoresis buffer, 1ml of SDS (0.1%) 900 ml dH <sub>2</sub> O	Prepared at the laboratory
10X Transfer buffer 1 L	Tris base 30.24 g, Glycine 142.5 g, add distilled water up to 800 ml mark, adjust pH to 8.4 with HCl and add distilled water to 1L mark	Prepared at the laboratory
1X Transfer buffer 1 L	100 ml 10X transfer buffer, 200 ml methanol (20%), 700 ml distilled water	Prepared at the laboratory
10 X Tris Buffered Saline	60.6 g Tris base, 87.6 g NaCl, add distilled water up to 800 ml mark, adjust pH to 7.6 with HCl and add distilled water to 1L mark	Prepared at the laboratory
1X Tris Buffered saline with Tween 20 (TBST)	100 ml of 10X Tris Buffered Saline, 900 ml of distilled water, 1ml of Tween 20 (0.1%)	Prepared at the laboratory
2X Loading sample buffer 10 ml	1 M Tris-HCl, pH 6.8, 4 ml 10% SDS, 2 ml glycerol, 2.5 ml β-mercaptoethanol, 500 μl bromophenol blue (1%)	Bio-Rad, USA
Stripping buffer	2% SDS, 62.5mM Tris-HCl pH6.8, 100mM Betamercaptoethanol	Prepared at the laboratory
Blocking buffer	5% w/v non-fat marvel dried skimmed milk in 1X Tris Buffered Saline with Tween-20	Prepared at the laboratory
50 X Tris acetate EDTA electrophoresis buffer	40mM Tris, 20mM acetic acid, 1mM M EDTA, pH 8.0	Thermo Scientific, Germany

## Appendices

1 X Tris acetate EDTA electrophoresis buffer	20 ml of 50 X Tris acetate EDTA electrophoresis buffer, 980 ml of distilled water	Prepared at the laboratory
6 X gel loading buffer	0.25% bromophenol blue, 0.25% xylene cyanol, 30% glycerol	Thermo Scientific, Germany
5X Passive lysis Buffer	50 mM Tris/Cl (pH 7.5), 150 mM NaCl, 2 mM EDTA, 1% (v/v) Nonident P-40	Promega, USA
1X passive lysis Buffer	1 part of 5X passive lysis to 4 parts of distilled water	Prepared at the laboratory

### Appendix C:

**Table 1: Plasmids used**

Name of plasmids/stock concentration	Final concentration	Property
pISRE-luc (1000ng)	500 ng/well (96-well plate)	luciferase reporter plasmid containing tandem repeats of the <i>ISG56</i> ISRE driving the expression of a firefly Luciferase reporter gene.
pRLSV-40 (1ng)	1 ng/well (96-well plate)	Contains a constitutively active CMV promoter driving the expression of a <i>Renilla</i> luciferase reporter gene.

**Table 2: Transfection complex preparation chart**

Plasmid Stock Conc.	Amount of DNA per well	Vol. in $\mu$ l per well	Total Amount for 14-wells in $\mu$ l
Dilute the plasmid DNA in 1.5 ml eppendorf tube as follows			

## Appendices

pISRE-luc (1000 ng)	500 ng	0.5	7.0
pRLSV40 (1ng)	1ng	1.0	14.0
Serum free medium	-	25	350
Gently mix the diluted DN A and incubate at room temperature for 5 min utes			
Dilute the Lipofectamine 2 000 in another 1.5 ml eppendorf tube as follows			
Lipofectamine 2000	-	1.5	21
Serum free medium	-	25	350
Gently mix the diluted Lipofectamine 2000 and incubate at room temperature for 5 minutes			
After 5 minutes of incubation, gently mix the diluted DNA and Lipofectamine and incubate at room temperature for 20 minutes			

## Appendix D

**Table 1: RT-qPCR reaction set-up**

Components	Vol.( $\mu$ l) per tube	Final conc.( $\mu$ M) in PCR mixture	Total volume ( $\mu$ l) required for 18 reactions
Nuclease free H <sub>2</sub> O	6		108
Stat1 forward primer	0.75	0.3	13.5
Stat1 reverse primer	0.75	0.3	13.5
Stat1 probe	0.5	0.2	9
GAPDH forward primer	0.75	0.3	13.5
GAPDH reverse primer	0.75	0.3	13.5
GAPDH probe	0.5	0.2	9
Rox master mix (2x)	12.5	4mM MgCl <sub>2</sub>	225
Total	22.5		
Add 2.5 $\mu$ l of the cDNA template to each tube			

**Table 2A: GAPDH optimization reaction set-up (0.3  $\mu$ M forward primer x 0.3  $\mu$ M reverse primer)**

Components	Vol.( $\mu$ l) per tube	Final conc. ( $\mu$ M) in PCR mixture	Total volume ( $\mu$ l) required for 4 reactions
nuclease free H <sub>2</sub> O	8		32
GAPDH forward primer	0.75	0.3	3
GAPDH reverse primer	0.75	0.3	3
GAPDH probe	0.5	0.2	2
Rox master mix (2x)	12.5	4mM MgCl <sub>2</sub>	50
Total	22.5		
Add 2.5 $\mu$ l of the cDNA template to each tube			

**Table 2B: GAPDH optimization reaction set-up (0.2  $\mu$ M forward primer x 0.2  $\mu$ M reverse primer)**

Components	Vol.( $\mu$ l) per tube	Final conc.( $\mu$ M) in PCR mixture	Total volume ( $\mu$ l) required for 4 reactions
Nuclease free H <sub>2</sub> O	8.5		34
GAPDH forward primer	0.5	0.2	2
GAPDH reverse primer	0.5	0.2	2
GAPDH probe	0.5	0.2	2
Rox master mix (2x)	12.5	4mM MgCl <sub>2</sub>	50
Total	22.5		
Add 2.5 $\mu$ l of the cDNA template to each tube			

**Table 2C: GAPDH optimization reaction set-up (0.1  $\mu$ M forward primer x 0.1  $\mu$ M reverse primer)**

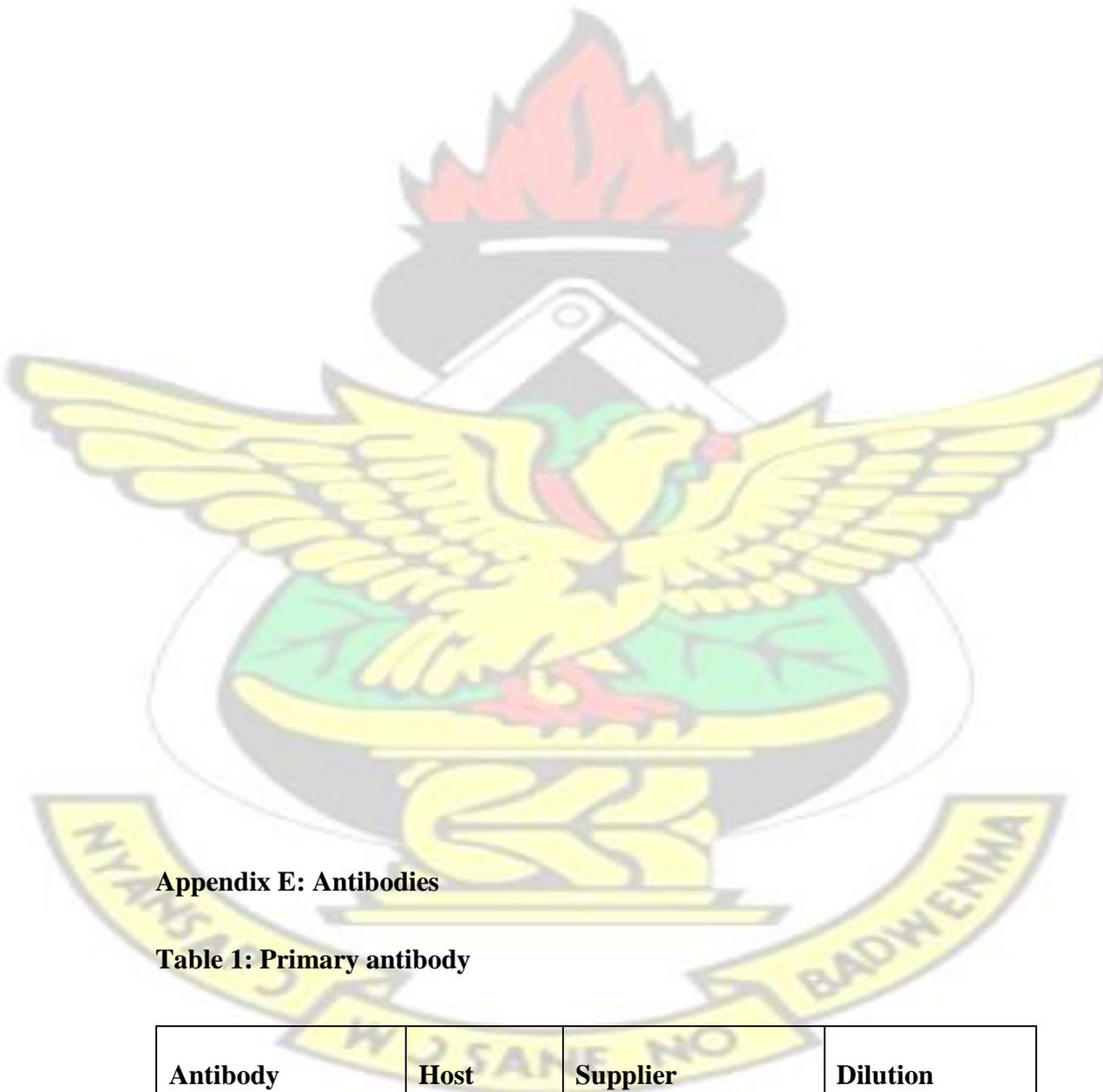
Components	Vol.( $\mu$ l) per tube	Final conc. ( $\mu$ M) in PCR mixture	Total volume ( $\mu$ l) required for 4 reactions
Nuclease free H <sub>2</sub> O	9		36
GAPDH forward primer	0.25	0.1	1
GAPDH reverse primer	0.25	0.1	1
GAPDH probe	0.5	0.2	2
Rox master mix (2x)	12.5	4mM MgCl <sub>2</sub>	50
Total	22.5		
Add 2.5 $\mu$ l of the cDNA template to each tube			

**Table 2D: GAPDH primer optimization**

Target	Primer combinations	Threshold Cycle (Ct)	C(t) Mean
GAPDH	0.3 $\mu$ M Forward primer x 0.3 $\mu$ M Reverse primer	24.18	24.18
GAPDH	0.3 $\mu$ M Forward primer x 0.3 $\mu$ M Reverse primer	24.13	24.13
GAPDH	0.2 $\mu$ M Forward primer x 0.2 $\mu$ M Reverse primer	24.50	24.50
GAPDH	0.2 $\mu$ M Forward primer x 0.2 $\mu$ M Reverse primer	24.64	24.64

## Appendices

GAPDH	0.1 $\mu$ M Forward primer x 0.1 $\mu$ M Reverse primer	25.10	25.10
GAPDH	0.1 $\mu$ M Forward primer x 0.1 $\mu$ M Reverse primer	24.12	24.12



### Appendix E: Antibodies

**Table 1: Primary antibody**

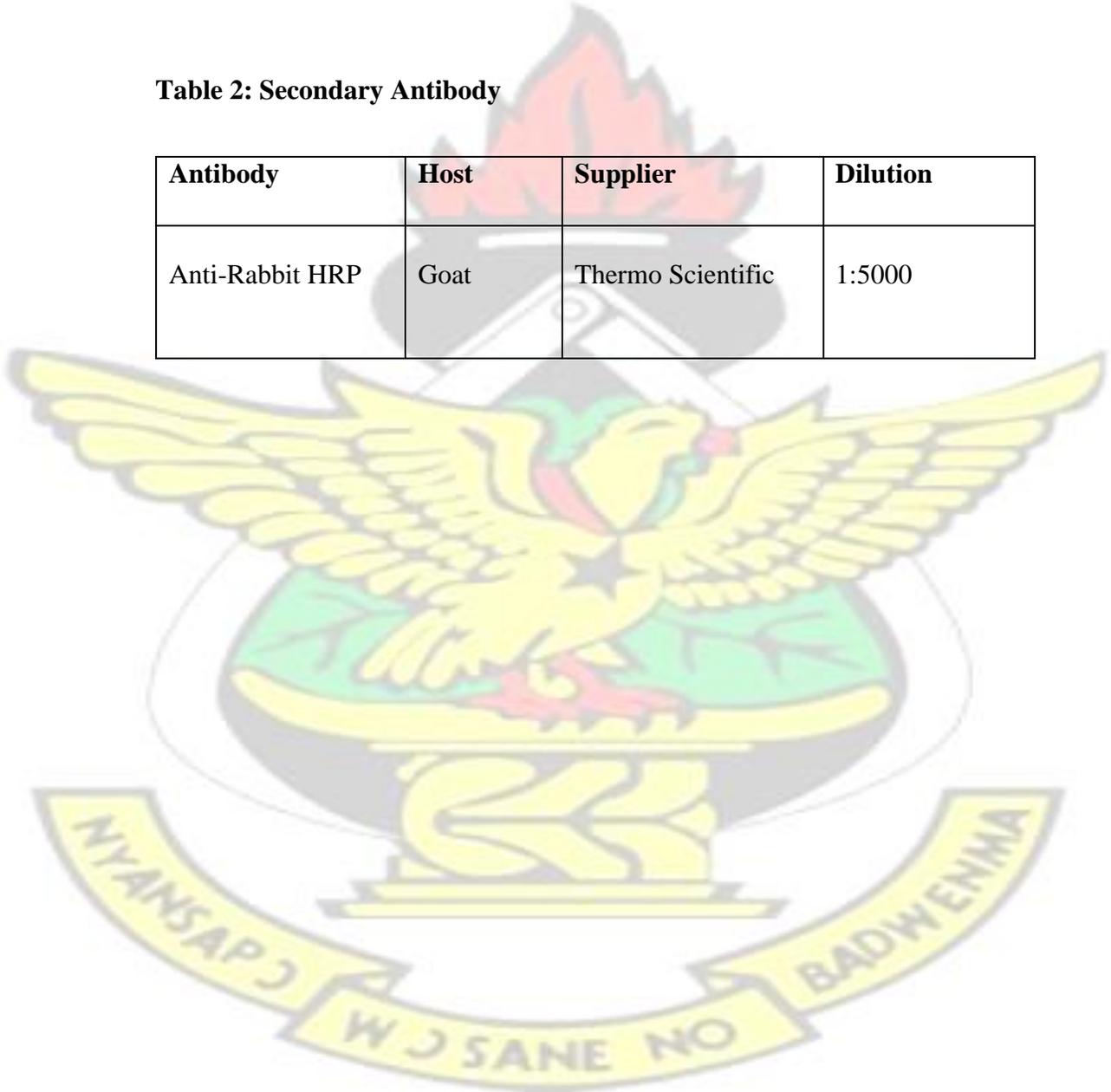
Antibody	Host	Supplier	Dilution

## Appendices

STAT1	Rabbit	Thermo Scientific	1:1000
GAPDH	Rabbit	Thermo Scientific	1:2500

**Table 2: Secondary Antibody**

<b>Antibody</b>	<b>Host</b>	<b>Supplier</b>	<b>Dilution</b>
Anti-Rabbit HRP	Goat	Thermo Scientific	1:5000



# KNUST



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