



ESCOLA UNIVERSITÁRIA VASCO DA GAMA

MESTRADO INTEGRADO EM MEDICINA VETERINÁRIA

Acute phase proteins in queens with pyometra – Serum Amyloid Alpha

Telma Adriana Ferreira Santos
Coimbra, janeiro 2018



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Resumo

A resposta de fase aguda traduz uma reação sistêmica que implica a ativação de vários mecanismos fisiológicos, como resposta a um estado inflamatório, com o objetivo de restaurar a homeostase. As principais adaptações resultantes deste processo estão relacionadas com a síntese de proteínas de fase aguda. Embora estes mecanismos não estejam profundamente elucidados em felinos, o conhecimento que se obteve até à data suporta a importância da utilização destas proteínas como meios auxiliares de diagnóstico e prognóstico. A proteína sérica amiloide alfa (SAA) é considerada, em várias espécies, a apolipoproteína com maior sensibilidade. É a proteína mais rapidamente sintetizada no fígado, e a sua concentração aumenta drasticamente, atingindo concentrações 100 a 1000 vezes superiores aos valores normais nas primeiras 48 horas após a agressão. É por isso considerada como um potencial biomarcador para diagnóstico, monitorização e prognóstico.

O objetivo deste estudo foi avaliar as possíveis causas que justificassem a ausência de aumento da concentração de SAA em algumas gatas diagnosticadas com piómetra. Para tal foi aplicada a técnica de eletroforese bidimensional de forma a confirmar a presença de SAA em fêmeas diagnosticadas com piómetra. Devido às características da proteína em estudo o método analítico foi otimizado.

Os resultados obtidos mostraram que mesmo as fêmeas doentes com concentrações normais de SAA, apresentavam nitidamente o spot correspondente a esta proteína no gel de eletroforese. Concluiu-se assim, que a ausência de aumento da concentração de SAA em gatas com piómetra deve-se provavelmente à existência de diferentes isoformas desta proteína, o que exige a adequação dos métodos analíticos aplicados.

Palavras-chave: *resposta de fase aguda, proteínas de fase aguda, proteína sérica amiloide alfa, felinos, piómetra, diagnóstico*

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List of acronyms

Aa/Bis – Acrylamide/Bis-Acrylamide
APR – Acute phase response
APP – Acute phase protein
EDTA - Ethylenediamine tetra acetic acid
DTT - Dithiothreitol
IL – Interleukin
MS – Mass spectrometry
SR-BI – Scavenger receptor class B type I
SAA – Serum α -amyloid
TNF – Tumour necrosis factor
2DGE – Two-dimensional gel electrophoresis

Acute phase proteins in queens with pyometra – Serum Amyloid Alpha

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Abstract

The acute phase response (APR) is a systemic reaction that implies the activation of physiological mechanisms in response to an inflammatory state, aiming to restore homeostasis. One of the major adaptations is the acute phase proteins (APP) synthesis. Although this mechanism has not been completely understood in felines, the present knowledge supports the use of APP as important diagnostic and prognosis tools. Serum amyloid alpha (SAA) is an apolipoprotein and is considered the most sensitive APP in felines and in several other species. Besides the fact that its concentration increases dramatically after an inflammatory insult, it has also been recognized as the fastest reactant to increase after tissue injury, increasing 100 to 1000-fold in the first 48 hours, therefore being considered a strong potential biomarker in evaluation of pathological conditions, and also in monitoring tissue injury and response to therapy.

The aim of our study was to evaluate the cause behind the lack of SAA increase in some reported cases of cats with pyometra. For this purpose, two-dimensional polyacrylamide gel electrophoresis was applied in order to evaluate the presence of SAA in females diagnosed with pyometra, with different concentrations of the same protein when quantified by an automated analyser. The analytical method was optimized regarding the characteristics of the protein under study.

Our results showed that diseased females in which SAA concentration was normal when measured with an automated analyser, presented an evident SAA spot in the two-dimensional polyacrylamide gel electrophoresis. It was concluded that the low concentration of SAA probably resulted from the existence of different isoforms of this protein, which requires an adaptation of the analytical methods in use.

Key Words: acute phase response, acute phase proteins, serum amyloid alpha, feline, pyometra, diagnosis

1. Introduction

The acute-phase response (APR) is a systemic nonspecific and complex immunological reaction, considered as part of the innate immune system, that is activated in the early stages of aggression (Cerón, Eckersall, & Martínez-Subiela, 2005; Gómez-Laguna, Salguero, Pallarés, & Rodríguez-Gómez, 2010). This mechanism is triggered by tissue injury resulting from inflammatory, infectious, immunologic, neoplastic or traumatic factors, and the main purpose is to restore homeostasis, isolate and neutralize pathogens, minimize tissue damage and promote tissue repair (Giordano, Spagnolo, Colombo, & Paltrinieri, 2004; Niine *et al.*, 2017).

During the APR, due to tissue damage, inflammatory cytokines are produced and released, such as interleukin (IL)-1, IL-6 and tumour necrosis factor (TNF)- α . Both pro-inflammatory cytokines and endogenous glucocorticoids promote hepatic synthesis of plasma proteins, designated acute phase proteins (APP) (Eckersall, 1995; Gómez-Laguna *et al.*, 2010). Although several studies suggests that most tissues can express APP synthesis in variable amounts, even in healthy conditions, hepatocytes are the main target cell and because of that, the liver suffers major metabolic alterations (Eckersall *et al.*, 2001; Gahmberg & Andersson, 1978; Lin *et al.*, 2001; Marques *et al.*, 2017). Thereby, APP can be described as liver-derived molecules whose plasma concentrations increase or decrease during the inflammatory response (Jain, Gautam, & Naseem, 2011). Based on the variation of their serum concentration during the inflammatory process, APP are classified as positive (*e.g.* C-reactive protein, Serum amyloid- α – SAA and Haptoglobin) or negative (*e.g.* Albumin) (Eckersall & Bell, 2010).

Serum amyloid alpha is a small sized glycoprotein (12-14 kDa) from the apolipoprotein family, that can be found circulating bound to the surface of the high density lipoprotein 3 (HDL3) (Lepedda *et al.*, 2013; Tamamoto, Ohno, Ohmi, Goto-koshino, & Tsujimoto, 2008). This protein is classified as a positive major APP, since its concentration can increase more than a thousand-fold after tissue injury (Kisilevsky & Manley, 2012; Tamamoto *et al.*, 2008). Like most positive APP, this is mainly synthesized in the liver and, although in lower proportion, also in other tissues (*e.g.* gastrointestinal tract and integumentary system) (Berg, Thomsen, Andersen, Jensen, & Jacobsen, 2011; Lecchi, Dilda, Sartorelli, & Ceciliani, 2012; Marques *et al.*, 2017).

The specific physiological role of this inflammatory mediator remains to be elucidated (Table 1), but the fact that apolipoproteins have been highly conserved throughout evolution and the fact that there is a severe increase of the levels of SAA in response to potentially life-threatening physiological challenges suggests a protective role in the acute-phase response (Jensen *et al.*, 2017; Uhlir & Whitehead, 1999).

Table 1. Literature reported biological functions of SAA.

	Description	References
Inflammation	Chemotactic recruitment of inflammatory cells to inflammation site	(Cerón <i>et al.</i> , 2005)
	Direct inhibition of myeloperoxidase release and lymphocyte proliferation	(Soler <i>et al.</i> , 2011)
	Opsonization of Gram-positive and Gram-negative bacteria	(Hari-Dass, Shah, Meyer, & Raynes, 2005)
	Stimulation of the response of innate phagocytic cells	
	Indirect control of the inflammatory process	
Lipid metabolism	Inhibition of SR-BI-mediated selective lipid uptake	(Cai, De Beer, De Beer, & Van Der Westhuyzen, 2005)
	Mediation of lipid transport by shifting cholesterol balance from ester to free cholesterol	(Cai <i>et al.</i> , 2005)
Protein metabolism	Precursor of protein amyloid A, being involved in the pathogenesis of AA-amyloidosis	(Cai <i>et al.</i> , 2005)

(SR-BI, scavenger receptor class B type I)

In cats, SAA has been recognized as a useful inflammatory biomarker; nonetheless, it has been scarcely studied (Cerón *et al.*, 2005; Kajikawa, Furuta, Onishi, Tajima, & Sugii, 1999). Sasaki, Ma, Khatlani, Okuda, & Inokuma (2003) demonstrated that cats with pathologic abnormalities had higher concentration levels of SAA than healthy individuals. In addition, it was demonstrated that in felines, SAA is the fastest APP to increase after an inflammatory stimulus (Kajikawa *et al.*, 1999). Furthermore, Tamamoto *et al.* (2013) emphasized the potential of SAA as a significant and independent prognostic factor for inflammatory states in diseased cats.

Pyometra is a clinical relevant problem that may start as a sub-clinical unrecognized disorder which can rapidly evolve to sepsis (Hagman, Ström, Möller, & Egenvall, 2014; Miert, 1967). Thus, it can result in the death of the animal if not promptly diagnosed and treated. During the early stages of uterine bacterial infection, immune specific T and B lymphocytes, as well as other immune and pro-inflammatory molecules are activated. Moreover, endometrial cells facilitate the release of cytokines, such as TNF- α , involved in the activation of the acute phase response (Jursza-piotrowska & Siemieniuch, 2015). Given the marked inflammatory response, females with pyometra can be considered one of the best animal models to evaluate the APR in felines. It also reinforces the need for additional studies with the aim to identify endocrine biomarkers that facilitate the diagnosis of this life-threatening pathology.

In the recent study of Vilhena *et al.* (2018), serum concentrations of APP, including SAA, haptoglobin and albumin were determined in queens with pyometra. The previous research suggests that APP could be potential biomarkers for diagnosis and post-surgical prognostic monitoring in feline pyometra. However, and contrary to what would be expected, normal concentrations of this protein were observed in six diseased queens. The same SAA behaviour was previously described by Tamamoto *et al.* (2013) in cats with neoplastic, inflammatory and other diseases.

Given the above mentioned, our study aimed to evaluate the hypothesis of the existence of different isoforms of feline SAA to justify the lack of SAA increase when quantified by the described method.

For that purpose, samples enrolled in the study of Vilhena *et al.* (2018) were submitted to proteomic analysis. By definition, proteomics consists in the characterization of the entire protein complement of an organism, tissue or cell (Anderson & Anderson, 2000; Graves & Haystead, 2002). Two-dimensional gel electrophoresis (2DGE) and mass spectrophotometry (MS) are the current leading techniques used in proteomic analysis, since they allow comparison of proteome patterns between healthy and diseased individuals. Thus, when applied in diagnosis, may allow the identification of potential biomarkers (Adkins *et al.*, 2002; Gundacker *et al.*, 2006; Hu, Huang, Chen, & Yao, 2004; Miller & Gemeiner, 1992; Stoughton & Friend, 2005; Thadikkaran *et al.*, 2005).

2. Materials and methods

2.1. Samples and experimental setup

This study was approved by the Scientific Council of Vasco da Gama University School as complying with the Portuguese legislation for the protection of animals Law no. 92/1995 (A.R., 1995).

Analysed samples were obtained from aliquots of samples entailed in a previous study of our research team, as reported and described by Vilhena *et al.* (2018, 2018). Briefly, whole blood samples were collected by puncture of the jugular vein to plain tubes (Vacuette® Z serum clot activator, Greiner Bio-One International GmbH, Kremsmünster, Austria), left for 15 minutes to clot at room temperature, centrifuged at 2000 x *g* for 10 minutes at 4°C, and serum samples were stored at -20°C until analyses.

For the present study, a total of eight samples were selected and animal characterization is presented in **Table 2**. Samples were organized in two groups, Group A included five females diagnosed with pyometra and Group B included three healthy females used as controls. Animals of the group A (queens with pyometra) were further divided in two groups according with serum concentrations of SAA determined on the automated analyser: group A1, which included three animals with increased concentration of SAA, and group A2, which included two diseased queens with concentration of SAA in the reference range (**Table 2**). The laboratory reference range for SAA concentration <5 µg/ml (Vilhena *et al.*, 2018) was considered for this sub-division.

Pyometra was diagnosed in all animals based on clinical history, physical examination and results of complementary diagnostic exams, including abdominal ultrasonography and histopathology of the reproductive organs to confirm pyometra on diseased females, and to discard uterine pathology on queens of the control group.

2.2. Total serum protein and SAA quantification

Total serum protein concentration of each sample was measured at the Interdisciplinary Laboratory of Clinical Analysis Interlab-UMU, University of Murcia, Spain, using an automated biochemistry analyser (Olympus AU600®, Olympus Europe GmbH, Hamburg, Germany) in order to prepare samples for polyacrylamide gel electrophoresis.

Concentration of SAA in plasma samples was determined by a human turbidimetric immunoassay (LZ-SAA; Eiken Chemical Co.), validated for use in feline samples (Hansen, Schaap, & Kjelgaard-Hansen, 2006), using an automated biochemistry analyser (Olympus AU600®, Olympus Europe GmbH, Hamburg, Germany). A limit of detection of 0.38 µg/ml was considered.

2.3. Two-dimensional polyacrylamide gel electrophoresis

Each pair of samples were suspended in rehydration buffer consisting of 8M Urea, 2% CHAPS, 50 mM 1,4-Dithiothreitol (DTT), 0.5% IPG buffer and bromophenol blue (Bio-Rad, Hercules, CA, USA) for a final concentration of 150 µg/µL. Each individual 11 cm ReadyStrip™ IPG Strip (immobilized pH gradient, pH 7-11 linear, Bio-Rad) was re-hydrated with a final volume of 200 µL. The rehydration occurred overnight, protected from the light and at room temperature.

Horizontal isoelectric focusing was performed in Protean IEF Cell (Bio-Rad). After electrofocusing, the strips were frozen at -20 °C until further use.

Each strip was equilibrated, during 10 minutes with 6 M Urea, 0.375M Tris pH 6.8, 70% glycerol, 20% sodium dodecyl sulphate and 2% DTT. The same procedure was repeated, per 5 minutes, exchanging DTT for 2.5% iodoacetamide. Secondly, the stripes were fixed on the top of the 1.5 mm thick second-dimensional gels with stacking gel (1% agarose) at 70°C and prepared for the Protean II XL multi Cell (Bio-Rad).

Gels were prepared in the day before their use, with 45% Acrylamide/Bis-Acrylamide (Aa/Bis 30%) or 50% Aa/Bis30%, tris(hydroxymethyl)aminomethane (tris), miliQ, tetramethylethylenediamine and ammonium persulphate.

Each vertical electrophoresis program was performed using a pair of two samples according to a 600V, 30mA and 9W protocol that lasted five to six hours (Tvarijonaviciute, Gutiérrez, Miller, Razzazi-fazeli, & Tecles, 2012).

2.4. Two-dimensional polyacrylamide gel electrophoresis image analysis

In the end gels were stained with Page Blue protein staining solution (ThermoFisher Scientific, Waltham, MA, USA) based in the colloidal Coomassie blue G250 for later scanning in an ImageScanner II (GE Healthcare Europe GmbH, Uppsala, Sweden) and evaluation, using specific software (Image Master 2D Platinum 7.0, GE Healthcare Europe GmbH, Uppsala, Sweden).

3. Results

3.1. SAA quantification

Characterization of the animals entailed in this study, including total serum protein concentration (g/dl) and concentration of SAA ($\mu\text{g/ml}$) are presented in **Table 2**.

Table 2. Characterization of the animals entailed in this study, including total serum protein concentration (g/dl) and concentration of SAA ($\mu\text{g/ml}$)

			Age (years)	Breed	Weight (kg)	Total protein concentration (g/dl)	Concentration of SAA ($\mu\text{g/ml}$)
GROUP A	A1 - High [SAA]	H1	6	ES	3.5	5.41	63.60
		H2	6	ES	3.3	7.95	92.20
		H3	6	ES	3.8	5.91	93.80
	A2 - Low [SAA]	L1	20	ES	5.0	9.28	0.38
		L2	11	ES	2.8	8.14	0.38
GROUP B	Control Group	C1	14	ES	3.5	6.76	0.38
		C2	15	Persa	4.2	7.63	0.38
		C3	6	ES	3.7	7.33	0.38

(ES, European shorthair)

3.2. Two-dimensional polyacrylamide gel electrophoresis image analysis

Two-dimensional polyacrylamide gel electrophoresis image analysis was used for SAA spot detection, as well as for comparison of results between Groups A and B, and between samples with high and normal SAA concentration.

Due to the small molecular weight (14 to 15 kDa) of SAA, no clear results were obtained in the first gels which were prepared based on a standard protocol for serum proteins separation (Soler et al., 2011). Thereby, new gels were prepared with 50% Aa/Bis30%, and 2DGE was performed at 300V. With this increase in the matrix gel concentration, a better resolution was obtained, since protein separation was more patent. Moreover, the putative SAA spot (orange arrow) was detected in all queens from Group A, either with high or normal concentration of SAA.

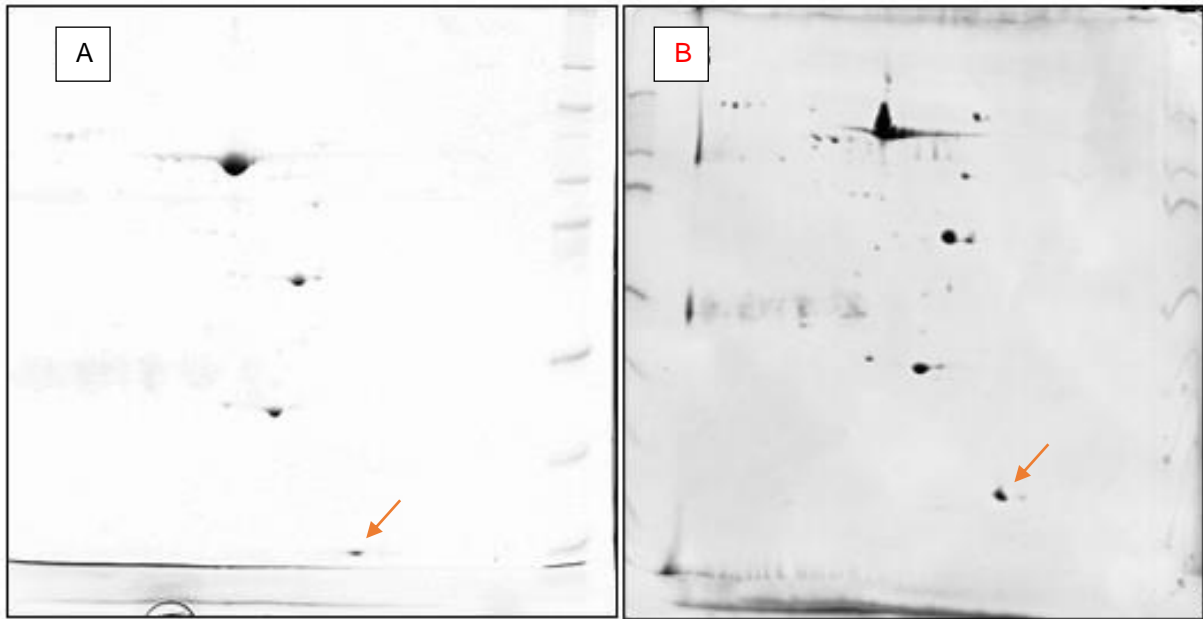


Figure 1. Two-dimensional gel electrophoresis image analysis of sample A2 (normal concentration of SAA) in a gel preparation with 45% Acrylamide/Bis-acrylamide 30% (Image A) and in a gel preparation with 50% Acrylamide/Bis-acrylamide 30% (Image B).

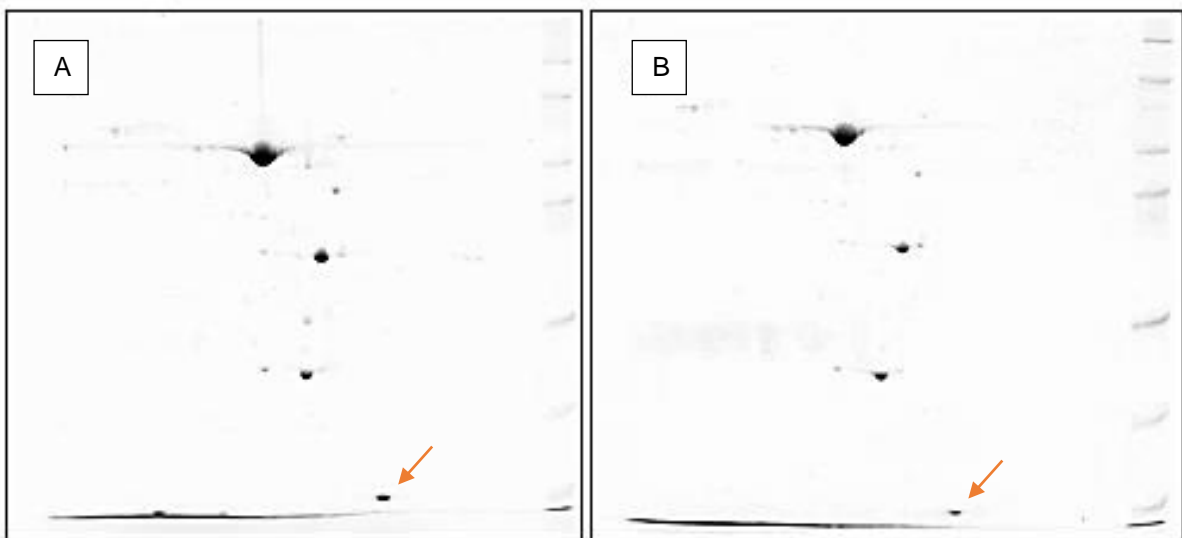


Figure 2 Two-dimensional gel electrophoresis image analysis of a sample from A1 group (high concentration of SAA; Image A) and of a sample from the A2 group (normal concentration of SAA; Image B), both gels prepared with 50% Acrylamide/Bis-acrylamide 30%.

4. Discussion

Protein studies were introduced recently as an essential tool to elucidate pathologic mechanisms (Graves & Haystead, 2002). Alterations of protein concentration, structure or even function are potential useful indicators of pathological abnormalities, what suggests that protein patterns may represent a foremost sensitive and specific way of diagnosis when compared with a single disease marker (Xiao, Prieto, Conrads, Veenstra, & Issaq, 2005). Biomarkers provide a dynamic and powerful

information for disease diagnosis, and also to the understanding of the spectrum of a specific pathology, what translates to other clinical applications such as monitoring therapy response and prognosis (Mayeux, 2004; Xiao *et al.*, 2005).

Although 2DGE and MS represent the leading techniques used in proteomics, due to the high sensitivity and specificity, there are technical issues that prevent their routine application in a clinical or hospital context. The technical difficulty, the time required to perform the protocols, and the numerous steps which result in a higher risk of human error and contamination of samples represent important limitations of this technique, being considered a time-consuming and intense labour process techniques (Graves & Haystead, 2002).

Regarding acute phase proteins profiles, the lack of knowledge on their interpretation is one of the main reasons for their scarce use in clinical practice to date. However, some studies have already shown that the assessment of the health status of an animal that does not include the study of the acute phase response should not be considered optimal (Eckersall, 2004).

Despite the difficulties imposed by the technique and the interpretation of data, the quality of the results allied with the importance of using APP as a method of diagnosis or as a successful way for monitoring treatment and prognosis, justified the importance of evaluating this same parameter in feline models. Although there are similar studies performed to evaluate the APR in queens and bitches with pyometra (Da browski, Kostro, & Szczubiał, 2013; Dabrowski, Kostro, Lisiecka, Szczubiał, & Krakowski, 2009), the mechanism was not thoroughly described in cats (Cerón *et al.*, 2005).

One of the major difficulties in isolating SAA using 2D gel electrophoresis is the molecular size of this inflammatory reactant. Thus, although the first gels were prepared according to protocols already described in other publications, an optimization was required to obtain more satisfactory results. Considering the characteristics of the protein in study, the gels depicted in Figure 1B, 2A and 2B were prepared with 50% Aa/Bis30% and vertical electrophoresis was performed at 300V. From the optimization of the polymerization process, smaller sized pores were obtained which allowed a better separation of the spot of interest.

In the study performed by Kajikawa *et al.* (1999), with the purpose to determine the proteins involved in the acute phase response in felines, SAA was determined to be the fastest reactant, beginning to increase approximately eight hours after the inflammatory/infectious/traumatic stimulus and reaching a maximum concentration between 36 and 48 hours (**Table 3**). Despite that, in the scope of a diagnosis, interpretation should not be based exclusively in SAA concentrations since recent studies evidenced that felines with inflammatory processes can exhibit normal values. Considering the previously described information, there are several factors that may justify the different concentrations of this APP in diseased animals.

Table 3. Time evolution of SAA concentration (mean \pm SD) after induced inflammation with and intramuscular injection of Lipopolysaccharides (LPS) or Turpentine oil (Kajikawa *et al.*, 1999)

	SAA concentration ($\mu\text{g/ml}$)	
	Injection of LPS	Injection of turpentine oil
0 th hour	44.7 \pm 12.5	29.1 \pm 15.1
8 th hour	96.6 \pm 33.1	76.5 \pm 23.3
24 th hour	146.6 \pm 20.4	85.5 \pm 33.9
36 th hour	118.4 \pm 30.7	115.2 \pm 17.6
48 th hour	---	118.4 \pm 3.5

Moreover, the uterus is an organ that is cyclically suffering physiological alterations during oestrus and pregnancy, and so, in reproductive disease such as pyometra, the development of an acute phase response can appear later than expected (Hollinshead & Krekeler, 2016; Jursza-piotrowska & Siemieniuch, 2015). Furthermore, biochemical changes resulting from this response may be fainter (Hollinshead, 2015).

In the present study, it was observed that all studied females with pyometra (group A) expressed the potential SAA spot, even females that manifested normal concentration of the same protein when measured by the automated biochemistry analyser (Olympus AU600®, Olympus Europe GmbH, Hamburg, Germany). Thus, the main possible reason for not detecting an SAA increment, as reported by Vilhena *et al.* (2018), may be related to the presence of different isoforms of feline SAA, not detectable by the applied analytical methodology. In this case, the method applied used a latex reagent sensitized with anti-human SAA antibodies, responsible for the passive agglutination process generated when in contact with the antigenic epitope of SAA (De Buck *et al.*, 2016). It is known that minor structural differences between protein isoforms can imply completely different biological properties and lead to distinct biological functions and interactions (Godovac-Zimmermann, Kleiner, Brown, & Drukier, 2005). In addition, the changes of the amino acid code of each isoform may result in a structural modification of the antigenic epitope of SAA that impairs the antibody-antigenic reaction needed for the determination of SAA concentration (De Buck *et al.*, 2016). This was already described in previous studies in pigs, in which the presence of different isoforms of SAA during inflammation was related with the lack of cross-reactivity of the antibodies used by the automated methods (Soler *et al.*, 2011). Thus, suitable analytical methods that distinguish between different isoforms are required.

Considering the previous information, and based on the literature, MS would be the next step in this investigation. This technique has been recognized as the technology of choice for direct protein identification and characterization when associated to 2DGE, since it allows to identify the proteins separated in the gel with high sensitivity and accuracy (Graves & Haystead, 2002). This step would allow the identification of all the spots and determine the exact location of SAA isoforms, by comparing gels between healthy and diseased animals. It would further enable the measurement of SAA

concentration of each isoform and the evaluation of the expression of this protein in different clinical situations.

5. Conclusions

Serum amyloid A behaves as a potential biomarker for diagnosis and monitoring of inflammatory processes in queens. However, based on the cases in which a lack of increase in concentration of this APP occur, the use of this biomarker should be carried out with caution and critical sense, associating other parameters to consolidate the interpretation of the values of SAA. According with our results, the existence of different isoforms of feline SAA may justify the lack of detection of this protein in the automated methods described in the literature. The results of this work underscore the need of further studies to identify and characterize the different isoforms of feline SAA, specifically through tandem mass spectrometry, and to develop new automated methods that are able to detect the different isoforms of feline SAA.

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