Alpha-2-Macroglobulin, a Hypochlorite-Regulated Chaperone and Immune System Modulator

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Alpha-macroglobulins are ancient proteins that include monomeric, dimeric, and tetrameric family members. In humans, and many other mammals, the predominant alpha-macroglobulin is alpha-2-macroglobulin (α2M), a tetrameric protein that is constitutively abundant in biological fluids (e.g., blood plasma, cerebral spinal fluid, synovial fluid, ocular fluid, and interstitial fluid). α2M is best known for its remarkable ability to inhibit a broad spectrum of proteases, but the full gamut of its activities affects diverse biological processes. For example, α2M can stabilise and facilitate the clearance of the Alzheimer’s disease-associated amyloid beta (Aβ) peptide. Additionally, α2M can influence the signalling of cytokines and growth factors including neurotrophins. The results of several studies support the idea that the functions of α2M are uniquely regulated by hypochlorite, an oxidant that is generated during inflammation, which induces the native α2M tetramer to dissociate into dimers. This review will discuss the evidence for hypochlorite-induced regulation of α2M and the possible implications of this in neuroinflammation and neurodegeneration.

1. Structure and Function

α2M is a secreted protein that is present at 1.5–2 mg mL⁻¹ and 1.0–3.6 µg mL⁻¹ in human blood plasma and cerebral spinal fluid, respectively [1, 2]. The cage-like structure of α2M (720 kDa) is formed by the assembly of four 180 kDa subunits into two disulfide-linked dimers, which noncovalently associate to complete the tetrameric quaternary structure of the protein [3]. A bait region that contains a large number of protease cleavage sites is responsible for the incredibly diverse range of proteases that interact with α2M [4]. Cleavage of the α2M bait region, which is in close physical proximity to a reactive thioester bond, results in covalent trapping of proteases within a steric cage [5]. This process involves a substantial conformational change that generates a compact tetrameric form [6] and reveals the binding site for the low-density lipoprotein receptor-related protein-1 (LRP1) [7, 8] (Figure 1(a)). For the purpose of this review, the compact tetrameric protease-bound form of α2M is referred to as transformed α2M. Transformed α2M (covalently bound to up to two protease molecules) is rapidly cleared from the circulation via LRP1-facilitated endocytosis (Figure 1(a)). As such, α2M can efficiently inhibit a myriad of extracellular processes that are dependent on proteolysis.

Consistent with having an ancient origin in innate immunity, α2M is a promiscuous protein that noncovalently binds to a diverse range of nonprotease ligands including cytokines [9, 10], growth factors [9–14], apolipoproteins [15], and misfolded proteins [16–20]. Many noncovalent ligands of α2M including the Alzheimer’s disease-associated Aβ peptide [21], neurotrophins [14], and tumour necrosis factor-alpha (TNF-α) preferentially bind to transformed α2M which is generated following the reaction of native α2M with a protease or with small nucleophilic compounds that also target the α2M thioester bond [6]. In these cases, it is proposed that transformed α2M acts to limit the activities of noncovalently bound ligands by facilitating their disposal via LRP1 [10, 22] (Figure 1(a)). On the other hand, α2M can control signalling
pathways via alternative mechanisms. For example, the binding of \( \alpha_2 \text{M} \) to phosphorylated insulin-like growth factor binding protein-1 abrogates its inhibitory effects on insulin-like growth factor-1 (IGF-1); therefore, in some scenarios, \( \alpha_2 \text{M} \) can potentiate growth factor signalling [13]. Another example whereby \( \alpha_2 \text{M} \) is reported to potentiate growth factor signalling involves the pronerve growth factor (pro-NGF), which induces the expression of TNF-\( \alpha \) via stimulating the neurotrophin receptor p75 [11]. Although \( \alpha_2 \text{M} \) potentiates pro-NGF signalling in vitro, \( \alpha_2 \text{M} \) is reported to inhibit the activity of mature NGF by binding either to NGF or to Trk receptors [12, 23, 24].

The accumulation of misfolded proteins is inherently deleterious to living organisms and underlies the pathology of many human diseases including Alzheimer’s disease, Parkinson’s disease, and motor neuron disease. \( \alpha_2 \text{M} \) is one of a small number of secreted proteins that are known to possess holdase-type chaperone activity, which is the ability to stabilise misfolded proteins and prevent their aberrant aggregation [16–20, 25]. The chaperone function of \( \alpha_2 \text{M} \) has been demonstrated in vitro using a broad range of misfolded clients including denatured globular proteins and aggregation prone, intrinsically disordered substrates (e.g., A\( \beta \) peptide and Parkinson’s disease-associated alpha-synuclein). Furthermore, it has been shown that \( \alpha_2 \text{M} \) preferentially binds several plasma proteins in situ following experimentally-induced shear stress which causes plasma protein aggregation [18, 19]. The likely fate for complexes formed between native \( \alpha_2 \text{M} \) and misfolded proteins is clearance via LRP1 following interaction with a

Figure 1: Schematic diagram showing the function consequences of hypochlorite-induced modification of \( \alpha_2 \text{M} \). (a) Native \( \alpha_2 \text{M} \), a tetramer (shown in green), is constitutively present in biological fluids and covalently binds to a broad range of proteases. Binding to proteases results in a conformational change that exposes the binding site on \( \alpha_2 \text{M} \) for LRP1, which is responsible for the clearance of the protease-transformed \( \alpha_2 \text{M} \) complex (shown in dark blue). \( \alpha_2 \text{M} \) also binds to a large number of noncovalent ligands including cytokines and misfolded proteins. In many cases, noncovalent binding of ligands occurs preferentially to the protease-transformed conformation (not shown). In the instance that native \( \alpha_2 \text{M} \) binds noncovalently to a nonprotease substrate, protease interaction is required to enable clearance of the complex via LRP1. (b) Reaction with hypochlorite induces the dissociation of the native \( \alpha_2 \text{M} \) tetramer into dimers. This process abolishes the protease-trapping activity of \( \alpha_2 \text{M} \); however, the binding to some cytokines (i.e., TNF-\( \alpha \), IL-2, and IL-6) and misfolded proteins is enhanced. On the other hand, the binding of \( \alpha_2 \text{M} \) to other noncovalent ligands (i.e., \( \beta \)-NGF, PDGF-BB, TGF-\( \beta 1 \), and TGF-\( \beta 2 \)) is reduced. The dissociation of the native \( \alpha_2 \text{M} \) tetramer into dimers reveals the binding site on \( \alpha_2 \text{M} \) for LRP1. Therefore, \( \alpha_2 \text{M} \) dimers can facilitate the clearance of substrates in a protease-independent manner. N.B.: Inflammatory processes potentially elevate levels of protease-transformed \( \alpha_2 \text{M} \) and hypochlorite-modified \( \alpha_2 \text{M} \) dimers, concomitantly.
protease [16, 22, 25–27] (Figure 1(a)). However, protease-transformed αM can also inhibit Aβ aggregation via degrading the peptide because trapped proteases remain active following covalent binding to αM [18, 19]. The neuroprotective activity of αM against the toxicity induced by misfolded proteins has been demonstrated using several in vitro models [17, 25, 27, 28] and has also been demonstrated in rats directly injected with toxic Aβ oligomers [29]. Taken together, the results of these studies support the conclusion that the functions of αM are broadly important to extracellular protostasis.

2. α2M and Neurodegenerative Diseases

Interest in the role of αM in Alzheimer’s disease spans several decades. In part, this stems from early reports that polymorphisms in αM are associated with increased risk of Alzheimer’s disease in some populations [30–36]. However, opposing results have also been presented [37, 38], and more recent genome-wide association studies have not found any association [39]. It has recently been reported that serum αM is elevated in men with preclinical Alzheimer’s disease, which potentially represents a general response to neuronal injury [40]. The significance of elevated levels of αM is hard to determine, because aside from influencing Aβ aggregation and clearance, there are many other relevant biological processes that αM potentially influences. For example, apolipoprotein E (ApoE) is an endogenous ligand of αM in blood plasma, and the binding of αM to the ε4 isoform (the strongest known genetic risk factor for Alzheimer’s disease) is much less compared to the binding of αM to the ε2 and ε3 ApoE isoforms [15]. The functional importance of this interaction has yet to be solved.

There is strong evidence that native αM can inhibit the aggregation and toxicity of Aβ peptide (the major constituent of extracellular plaques in Alzheimer’s disease). Furthermore, the widely documented ability of αM to facilitate the clearance of the Aβ peptide is central to its neuroprotective action [17, 25, 27–29]. αM is found colocalised with the Aβ peptide in the brain in Alzheimer’s disease [41, 42], which supports the idea that the LRPI-mediated clearance of αM–Aβ complexes is impaired or overwhelmed. Similar to αM, there are conflicting reports regarding an association between polymorphisms in LRPI and the risk of Alzheimer’s disease (reviewed in [43]). Given that the accumulation of the Aβ peptide in the brain in Alzheimer’s disease appears to be the result of a defect in clearance, rather than elevated production of the peptide [44], it is important to understand the contribution of αM to the clearance of the Aβ peptide in greater detail.

Roles for αM in preventing or promoting neurodegeneration independent of Alzheimer’s disease are less clear. Nevertheless, αM is reported to bind to a broad range of misfolded proteins including the infectious prion protein that is responsible for transmissible spongiform encephalopathies [45] and α-synuclein, the major constituent of misfolded protein deposits in Parkinson’s disease [17]. In the case of the prion protein, it has been reported that binding to αM in vitro facilitates the conformational change in the prion protein that is responsible for its infectious characteristics [45]. On the other hand, similar to the protective effect of αM on Aβ toxicity, the binding of αM to α-synuclein is cytoprotective [17]. αM also potentially inhibits neurodegeneration by influencing the activity of neurotrophins such as NGF and pro-NGF or by inhibiting the activity of neurotrophin receptors directly [12, 23, 24]. The latter could have relevance in a range of neurodegenerative diseases including Alzheimer’s disease, Parkinson’s disease, and Huntington’s disease in which aberrant neurotrophin signalling is implicated [46]. Moreover, the ability of αM to bind to proinflammatory mediators such as TNF-α, IL-6, and IL-1β [47–49] supports the idea that αM has generalised importance in controlling inflammatory processes including in the central nervous system.

3. Hypochlorite, a Novel Regulator of α2M Functions

Hypochlorite (OCl–) is a powerful oxidant that is produced by the action of the enzyme myeloperoxidase during inflammation. Myeloperoxidase is not detected in the brains of healthy individuals; however, in neuroinflammatory disorders, myeloperoxidase is generated by activated microglia and astrocytes [50–54]. Infiltrating monocytes/macrophages and neutrophils can also contribute to myeloperoxidase production in the brain [50, 55]. Although the reasons for this are unclear, myeloperoxidase-immunoreactivity is also detected in neurons in Alzheimer’s disease [50, 51]. Interestingly, in a mouse model of Parkinson’s disease, ablation of the myeloperoxidase gene is protective, which supports the conclusion that myeloperoxidase is a major contributor to the oxidative damage generated by pathological neuroinflammatory processes [56].

Hypochlorite production is primarily considered important for defence against invading microbes [57]. The effectiveness of hypochlorite as a microbialcidal agent is linked to the potency with which hypochlorite damages proteins, inducing their misfolding [58, 59]. Given that reaction with hypochlorite is not specific to molecules of microbial origin, the generation of hypochlorite is associated with collateral damage to the host organism. As a result of aberrant inflammatory activity, hypochlorite-modified proteins accumulate in a large number of pathologies including Alzheimer’s disease [51], atherosclerosis [60], kidney disease [61], rheumatoid arthritis [52] and in experimental animal models of Parkinson’s disease [56] and multiple sclerosis [62]. Hypochlorite-induced modification can directly cause proteins to adopt immunostimulatory and cytotoxic properties. For example, hypochlorite-induced modification of apolipoprotein B-100, the major protein component of low-density lipoprotein particles, promotes macrophage foam cell formation and triggers platelet aggregation [63]. Additionally, hypochlorite-modified albumin is known to promote proinflammatory signalling [64], endothelial cell dysfunction [65], and apoptosis [66].

It is well-known that antioxidants are the first line of defence that protects the host from excessive oxidative damage during inflammation. However, evidence has emerged
that supports the conclusion that specialised hypochlorite-inducible systems are also important. Around a decade ago, it was demonstrated that the activity of the bacterial chaperone Hsp33 is directly enhanced following reaction with hypochlorite and the chaperone activity of hypochlorite-modified Hsp33 protects bacteria from hypochlorite-induced death [59]. More recently, it has been demonstrated that reaction with hypochlorite induces the dissociation of the native α2M tetramer into dimers and exposes the binding sites for monomeric Aβ on each subunit of transformed α2M [71]. Unlike native α2M, reaction with hypochlorite does not induce transformed α2M (generated using methyamine) to dissociate into dimers, and the resultant hypochlorite-induced damage reduces the binding of transformed α2M to LRP1 [71].

Although the chaperone activity of native α2M is enhanced following hypochlorite-induced modification, similar levels of hypochlorite-induced modification abolish the protease trapping function of α2M [72, 73]. Collectively, the evidence suggests that reaction with hypochlorite is a rapid switch that regulates the activities of α2M during inflammation. Supporting this idea, it has been reported that hypochlorite-induced modification of α2M also regulates its binding to cytokines and growth factors in a manner that increases its binding to TNF-α, IL-2, and IL-6 (involving

**Figure 2:** Theoretical model showing the binding sites for monomeric Aβ on native α2M and PZP. (a) The binding sites for monomeric Aβ (magenta; centred at amino acids 1314–1365 according to [21]) are normally concealed at the noncovalent interface of the (i) native α2M tetramer. (ii) Binding to proteases (yellow triangles) results in the partial opening of the noncovalent interface between α2M dimers and exposes the binding sites for monomeric Aβ on each subunit of transformed α2M. (iii) The binding sites for monomeric Aβ are also exposed by hypochlorite-induced dissociation of the native α2M tetramer into dimers. (iv) Native PZP (a disulfide-linked dimer) shares 82.7% sequence identity with α2M in the Aβ binding region (magenta). The dimeric quaternary structure of native PZP results in surface exposure of the binding sites for monomeric Aβ. Although the binding sites for other misfolded proteins are not known, intuitively, they are also located at the normally buried hydrophobic interface of noncovalently associated α2M dimers. (b) Image of the crystal structure of the transformed α2M tetramer from PDB 4ACQ [3] with the binding sites for monomeric Aβ shown in magenta, which is comparable to the model shown in (a (ii)). The crystal structures of native α2M or hypochlorite-modified α2M dimers have not been solved.
preferential binding to hypochlorite-induced $\alpha_2M$ dimers) and decreases its binding to $\beta$-NGF, PDGF-BB, TGF-$\beta_1$, and TGF-$\beta_2$ in vitro [74] (Figure 1(b)). Furthermore, hypochlorite-induced dissociation of $\alpha_2M$ enhances its cytotoxic effect against TNF-$\alpha$ in vitro [74]. Interestingly, it has been reported that the complement system, which includes several proteins that are closely related to $\alpha_2M$, is also activated by reaction with hypochlorite [75, 76]. Therefore, it is tempting to speculate that hypochlorite-induced regulation is a characteristic that is shared by this family of proteins.

Studies of the hypochlorite-induced regulation of $\alpha_2M$ are currently limited to in vitro systems; however, using the specific marker for reaction with hypochlorite 3-chlorotyrosine, it has been shown that $\alpha_2M$ is modified by hypochlorite in synovial fluid from inflamed joints [69]. Moreover, considering that hypochlorite levels are predicted to reach the low millimolar range in tissues during inflammation [77], it is plausible that hypochlorite-modified $\alpha_2M$ dimers are generated in biological fluids during inflammation. Of the studies reporting an association between mutation in $\alpha_2M$ and risk of Alzheimer’s disease, one study has reported that there is a synergistic effect between polymorphisms in $\alpha_2M$ and myeloperoxidase and an increased risk of Alzheimer’s disease [36]. The results of the latter study support the idea that the upregulation of $\alpha_2M$ is widely reported in diseases such as Alzheimer’s disease [83, 84], Parkinson’s disease [85], rheumatoid arthritis [86], Behcet’s syndrome [87], psoriasis [88, 89], Chagas disease [90], viral infection [91, 92], inflammatory bowel disease [93], and cancers [94, 95]. The latter observations support the idea that the upregulation of PZP could be a general stress response that is related to chronic inflammation. This limits the usefulness of PZP as a diagnostic marker; however, the results of studies of lymphoma and arthritis patients suggest that PZP levels are potentially useful for monitoring disease progression [95, 96].

The ability of native tetrameric $\alpha_2M$ to inhibit A$\beta$ aggregation is restricted to binding to soluble A$\beta$ oligomers formed early during the aggregation pathway [20]. In contrast, transformed $\alpha_2M$ and hypochlorite-modified $\alpha_2M$ dimers bind to monomeric A$\beta$ [21, 25], presumably via the hydrophobic binding site (centred at amino acids 1314–1365) identified by [21] (Figure 2). Intuitively, surface exposure of this site contributes to the efficiency with which hypochlorite-modified $\alpha_2M$ dimers inhibit A$\beta$ amyloid formation compared to native $\alpha_2M$ [25]. Similarly, the results of recent studies show that PZP binds to the monomeric A$\beta$ peptide and prevents the aggregation of the A$\beta$ peptide much more efficiently than native $\alpha_2M$ [97]. Whether or not PZP contributes to the clearance of the A$\beta$ peptide in vivo is currently unknown; however, it has been demonstrated that PZP levels are elevated in women with presymptomatic Alzheimer’s disease and PZP is found colocalised with microglia around A$\beta$ plaques in the brain in Alzheimer’s disease [83, 84]. Combined, these observations suggest that PZP is likely to participate in A$\beta$ homeostasis. Whether or not the role of PZP overlaps with or is discrete from that of $\alpha_2M$ remains to be determined.

5. Concluding Remarks

$\alpha_2M$ is a remarkably multifunctional protein that can influence a broad range of biological processes. Direct injection of $\alpha_2M$ into inflamed joints has been shown to have protective effects in a rodent model of osteoarthritis ([98]); however, the efficacy and safety of this as a human therapy is not yet known. An alternative $\alpha_2M$-based anti-inflammatory strategy involves the oral administration of proteases, which is proposed to increase levels of transformed $\alpha_2M$ in blood plasma [99, 100]. This strategy is clearly limited by the poor bioavailability of orally administered proteases, but this problem could potentially be overcome by the identification of bioavailable small molecule modifiers of $\alpha_2M$ function.

Growing evidence suggests that hypochlorite-induced dissociation of $\alpha_2M$ into dimers is a rapid switch that enhances the ability of $\alpha_2M$ to facilitate the clearance of disease-associated misfolded proteins and proinflammatory cytokines during inflammation. This is potentially a broadly important process that occurs in response to inflammation, including in neurodegenerative disorders in which neuroinflammation is known to be an early event that precedes other pathological changes (reviewed in [101]). A deeper understanding of the physiological relevance of hypochlorite-induced $\alpha_2M$ dimers has the potential to shed much needed light on the participation of $\alpha_2M$ in controlling inflammatory processes and extracellular protein homeostasis during neuroinflammation.
Conflicts of Interest

The authors declare that there is no conflict of interest regarding the publication of this paper.

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