Downregulation of the Long Non-Coding RNA Meg3 Promotes Angiogenesis After Ischemic Brain Injury by Activating Notch Signaling

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Abstract Angiogenesis after ischemic brain injury contributes to the restoration of blood supply in the ischemic zone. Strategies to improve angiogenesis may facilitate the function recovery after stroke. Recent researches have demonstrated that dysfunction of long non-coding RNAs are associated with angiogenesis. We have previously reported that long non-coding RNAs (lncRNAs) are aberrantly expressed in ischemic stroke. However, little is known about long non-coding RNAs and theirs role in angiogenesis after stroke. In this study, we identified a rat lncRNAs, Meg3, and found that Meg3 was significantly decreased after ischemic stroke. Overexpression of Meg3 suppressed functional recovery and decreased capillary density after ischemic stroke. Downregulation of Meg3 ameliorated brain lesion and increased angiogenesis after ischemic stroke. Silencing of Meg3 resulted in a proangiogenic effect evidenced by increased endothelial cell migration, proliferation, sprouting, and tube formation. Mechanistically, we showed that Meg3 negatively regulated notch pathway both in vivo and in vitro. Inhibition of notch signaling in endothelial cells reversed the proangiogenic effect induced by Meg3 downregulation. This study revealed the function of Meg3 in ischemic stroke and elucidated its mechanism in angiogenesis after ischemic stroke.

Keywords LncRNAs · MEG3 · Ischemic stroke · Angiogenesis · Notch pathway

Introduction

Stroke is a leading cause of long-term disability in high-income countries and a leading cause of death worldwide. Each year, ~795,000 people experience a new or recurrent stroke, and 87% of the strokes are ischemic [1]. So far, effective stroke treatments remain limited despite the marked improvements that have been achieved in medical and endovascular recanalization therapy. Recent studies have shown that angiogenesis is activated after stroke, and that higher microvessel density is associated with less morbidity and longer survival [2]. Clinically, angiogenesis has important implications because induction of angiogenesis after ischemic stroke stimulates endogenous recovery mechanisms, which promote neurogenesis and increase neuronal and synaptic plasticity and therefore improve the neurological outcome [3]. Hence, proangiogenesis may represent a promising therapeutic strategy which requires more innovative elaborating for patients with ischemic stroke.

Angiogenesis after stroke is a well-orchestrated sequence of complex biological and molecular events which is precisely regulated by proangiogenic and antiangiogenic factors such as VEGF, BDNF, and bFGF [4]. Long non-coding RNAs (lncRNAs), which constitute a significant portion of the
mammalian genome, have emerged as key regulators implicated in angiogenesis [5]. A very recent study has demonstrated that the lncRNA, MALAT1, regulates endothelial cell function and promotes neovascularization after hind-limb ischemia [6]. We have previously demonstrated that lncRNAs are aberrantly expressed in ischemic stroke and involved in the pathophysiology of stroke (GSE78200). However, whether lncRNAs are involved in the regulation of angiogenesis after ischemic stroke remains poorly defined.

To address this issue, we analyzed our RNA-Seq datasets and identified a novel rat lncRNA which was human and mouse maternally expressed gene 3 (Meg3) ortholog. Meg3, also known as gene trap locus 2 (Gtl2) in mouse, encodes a long non-coding RNA which is widely expressed in many tissues and cells, such as brain and endothelial cells [6, 7]. Growing evidences suggest that Meg3 is a tumor suppressor lncRNA and its expression is lost in many tumors and cancer cell lines [8–11]. Overexpression of Meg3 has been shown to suppress tumor cell growth and promote cell apoptosis in vitro [12, 13]. Moreover, inactivation of Meg3 leads to a significant increase in expression of notch pathway genes and microvessel density in the brain of Meg3 knockout mice [14]. Notch signaling is an evolutionarily well-conserved pathway that plays a crucial role in the regulation of angiogenesis [15, 16]. Several members of the Notch family are specifically expressed in endothelial cells [17, 18]. In particular, mouse embryos lacking endothelial Notch1 show defects in angiogenesis and vascular development [19]. We and other groups have previously shown that notch signaling is activated after ischemic stroke and the upregulated notch promotes angiogenesis in the ischemia brain tissue [20, 21]. Thus, we presently evaluated whether Meg3 is involved in angiogenesis after ischemic stroke and, if yes, if its mechanism of action is by modulating the notch signaling.

Materials and Methods

Bioinformatic Analysis

RNA-Sequencing data (GSE78200) was downloaded from Gene Expression Omnibus which included five pairs of rat brain samples. Raw reads were cleaned by removing adapters and low quality reads before assembly. From the FASTQ files were mapped to the rat genome (RGSC 5.0/ rm5) and splice junctions were identified by TopHat. The output files were analyzed by Cufflinks to estimate the transcript abundances. Cufflinks generated transcript structure predictions were then compared to the reference annotation Ensembl GTF by Cuffcompare. The gene expression level was expressed in fragments per kilobase of exon per million reads mapped (FPKM) and calculated by the TopHat and Cufflinks package. BLASTN analysis of the putative lncRNAs was used to identify the homologous genes.

RACE and Generation of Full-Length MEG3 Sequence

To determine the transcriptional initiation and termination sites of rat MEG3, 5′ and 3′ rapid amplification of cDNA end (RACE) analyses were performed with 5′-full RACE and 3′-full RACE Core Set kits (Takara Bio, Japan) according to the manufacturer’s instructions. The gene-specific primers (GSPs) used for the PCR of the RACE analysis were as follows: 5′ RACE MEG3 outer GSP: 5′-TGATGAACACGAGCAGACAGATG-3′ and 5′ RACE MEG3 inner GSP: 5′-GGGG GTCCACAAAGAAGTTG-3′; 3′ RACE MEG3 GSP: 5′-CCCCTTGGTGAAGACCCCA-3′; products were cloned into pMD19-T vectors (Takara Bio, Japan) and then sequenced. The full length of rat MEG3 was cloned by 5′- and 3′-RACE and the PCR primers were as follows: forward, 5′-AGAAGGCAGAAGACTGAATAGAG-3′ and reverse, 5′-AGTTAAACAAAGAACCATTATTGTAGAAGCACC-3′. Products were cloned and then sequenced.

Animals

All animal procedures were approved by the ethics Committee of Shanghai Jiao Tong University and performed according to the guidelines of the US Department of Health for use and care of laboratory animals. A total of 268 adult male Sprague–Dawley rats (weight 240–250 g) were included in the study. Data are reported on 160 animals. One hundred eight animals were excluded from the study due to no neurologic abnormalities (30) or death (78). The rats were randomly assigned to 4 groups: control group (rats underwent control lentivirus injection), Meg3 group (rats underwent Meg3 lentivirus injection), sh-Ctrl group (rats underwent sh-Ctrl lentivirus injection), and sh-Meg3 group (rats underwent sh-Meg3 lentivirus injection). The animal experimental design is illustrated in Fig. 2a.

Construction of Lentiviral and Stereotactic Injection

The cloned Meg3 was inserted in the lentiviral expression vector pCDH-CMV-MCS-EF1-copRFP (System Biosciences SBI, CA, USA) located downstream of the cytomegalovirus promoter. An empty pCDH vector was used as control. sh-Meg3 which specifically targeted Meg3 was inserted into pGLV10/U6/RFP/Puro vector (GenePharma, Shanghai, China), and a scramble sequence was used as negative sh-Ctrl. Stereotactic injection was performed as described previously [22]. In brief, rats were placed in a stereotactic frame (World Precision Instruments Inc., China) under anesthesia, with reference to Paxinos and Watson’s Rat Brain map. A total volume of 10 μL of viral suspension containing 1 × 10^7 control, Meg3, sh-Ctrl, or sh-Meg3 particles was slowly injected.
into the striatum (bregma; 0.8 mm posterior, 3 mm dorsoventral, 4.5 mm lateral). The needle was left in place for an additional 5 min and then gently withdrawn. The bone hole was sealed, the wound was sutured, and the animals were returned to their cages after awake.

**MCAO Model**

Transient middle cerebral artery occlusion (MCAO) model in rat was performed as described previously [23]. Briefly, 3 days after injection, the rats were anesthetized with 4% isoflurane in 70% N₂O/30% O₂ using a mask. A 4-0 nylon suture with silicon was inserted into the internal carotid artery and gently advanced to occlude the middle cerebral artery (MCA). The body temperature was carefully monitored during the surgery and maintained at 37.0 ± 0.5 °C using a heating pad. After 2 h of MCA occlusion (MCAO), the suture was carefully removed to restore blood flow, and rats score <1 according to Zea-Longa five-point scale (0, no deficit; 1, failure to extend right paw; 2, circling to the right; 3, falling to the right; and 4, unable to walk spontaneously) were excluded from the study.

**TTC Staining and Evaluation of Infarction Volume**

Brains were sliced into 2 mm thick coronal sections in an adult rat brain matrix (World Precision Instruments Inc., Shanghai, China) 7 days after MCAO. The slices were stained in 2% 2, 3, 5-triphenyltetrazolium chloride (TTC) (Sigma, St, Louis, USA) for 30 min at 37 °C in the dark. Sections were imaged and digitized, and the border between infarct and non-infarct tissue was outlined using ImageJ. Infarct volume was calculated by subtracting the volume of intact area in the ipsilateral hemisphere from the whole volume of the contralateral hemisphere.

**Neurobehavioral Tests**

Neurobehavioral deficits were determined by modified neurologic severity score (mNSS) and adhesive-removal somatosensory test before MCAO and at 7, 14, and 28 days after MCAO by an investigator blinded to the treatments.

For modified neurological severity scores, neurological function was graded on a scale of 0 to 18 (normal score, 0; maximal deficit score, 18). mNSS is a composite of motor, sensory, reflex, and balance tests. In the severity scores of injury, 1 score point is awarded for the inability to perform the test or for the lack of a tested reflex; thus, the higher score, the more severe the injury is [24].

For the adhesive-removal somatosensory test, somatosensory deficit was measured both before and after surgery [25]. All rats were familiarized with the testing environment. In the initial test, two small pieces of adhesive-backed paper dots (of equal size, 113.1 mm²) were used as bilateral tactile stimuli occupying the distal radial region on the wrist of each forelimb. The rat was then returned to its cage. The time to remove each stimulus from forelimbs was recorded on five trials per day. Individual trials were separated by at least 5 min. Before surgery, the animals were trained for 3 days. Once the rats were able to remove the dots within 10 s, they were subjected to MCAO.

**Microfil Perfusion and Micro-CT Scanning**

Evaluation of angiogenesis using micro-CT was described previously [26, 27]. In brief, after anesthesia, 100 mL of heparinized saline and 20 mL of Microfil (Microfil MV-122, Flow Tech; USA) were successively perfused into the left ventricle with an angiocatheter. After Microfil perfusion, the brains were scanned by micro-CT (SkyScan 1176, Kontich, Belgium) at a resolution of 9 μm per voxel with a 1024 × 1024 pixel image matrix. For segmentation of blood vessels from background, noise was removed by a low-pass Gaussian filter. The blood vessels filled with Microfil were included with semiautomatically drawn contours at each two-dimensional section by the built-in “Contouring Program” (SkyScan CTAn software) for automatic reconstruction of 3D images of vasculature. The axial slices through the samples were then visualized. The vessel volume in the ischemic area represented by the voxels counted in the specified Microfil range was calculated.

**Immunofluorescence**

Immunofluorescence staining was performed according to the protocol previously described [28]. The primary antibodies used were as follows: rabbit anti-RFP (1:200; Abcam Inc., USA), mouse anti-PECAM-1 (1:50; Santa Cruz Biotechnology, Germany), rabbit anti-Ki67 (1:200; Cell signaling technology, USA). Each section was washed with PBS and incubated with proper secondary antibodies at room temperature for 2 h the following day. 1%BSA was used as a control to confirm the specificity of the antibody and DAPI (1:30) was used to detect the nucleus. Images were acquired using a Leica fluorescence microscope (Leica, Germany). Ki67+/CD31+ microvessels in the perifocal region was counted and quantified by an investigator who was blinded to the experimental groups.

**Cell Culture and Transfection**

Human microvascular endothelial cells (HMEC-1) were cultured in MCDB 131 medium (Gibco) containing 10% fetal
bovine serum, L-glutamine (2 mM), epidermal growth factor (10 ng/ml), and hydrocortisone (1 μg/ml) under standard conditions (5% CO2, 37 °C, 95% humidity). HMEC-1 were seeded into a 12-well plate at 5 × 10^4 cells and infected with lentivirus at an MOI of 100. The expression of Meg3 in the cells was determined by qPCR.

**Cell Proliferation Assay**

Transfected endothelial cells (1 × 10^4 cells/well) were seeded into a 96-well plate and cultured for 1–7 days. At different time points, the cell number was measured using a Cell-Counting Kit-8 (CCK8) proliferation assay kit (Dojindo, Japan). Briefly, cells were mixed with 10 μL of CCK-8 solution/well and incubated for 2 h at 37 °C; the amount of formazan dye generated by cellular dehydrogenase activity was then measured by absorbance at 450 nm with a microplate reader. The optical density values of each well represented the cell proliferation.

**Cell Migration Assay**

Transfected endothelial cells were plated into wells with culture inserts (Ibidi, Germany) and incubated overnight. The next day, the culture inserts were removed to leave a 500-μm scratched wound, and the cell monolayer was rinsed once with phosphate-buffered saline and cultured with or without N-[N-(3,5-difluorophenacetyl)-L-alanyl]-S-phenylglycinet-butylester (DAPT). Pictures were taken of the wounds at 0- and 12-h time points using a Leica microscope at five distinct positions. WimScratch software (Ibidi, Germany) was used to determine the migration distance as the reduction of the width of the open area.

**Tube Formation Assay**

Tube formation was performed as previously described [23, 29]. In brief, transfected endothelial cells (1 × 10^6) were seeded in a 96-well plate coated with 100 μl of growth factor-reduced Matrigel™ (BD, USA) and cultured with culture medium in the presence or absence of DAPT. Tube formation was quantified after 16 h by measuring the total tube loops in five random microscopic fields with a computer-assisted microscope (Leica, Germany).

**Spheroid-Based Angiogenesis Assay**

Endothelial cell spheroids of defined cell number were generated as described previously [6, 30]. In brief, transfected endothelial cells were suspended in culture medium containing 0.20% (wt/vol) carboxymethylcellulose (Sigma-Aldrich, USA) and seeded into non-adherent round-bottom 96-well plates. Under these conditions, all suspended cells contribute to the formation of a single spheroid per well of defined size and cell number (400 cells/spheroid). Spheroids were generated overnight, after which they were embedded into growth factor-reduced Matrigel™ (BD, USA). The spheroid-containing gel was rapidly transferred into prewarmed 96-well plates and allowed to polymerize 30 min, then 100 μL of culture medium with or without DAPT was added on top of the gel. After 24 h, in vitro angiogenesis was quantified by measuring the cumulative length of the sprouts or the maximal distance of the migrated cells (“sprout outgrowth length”) that had grown out of each spheroid using digital imaging microscope (Leica, Germany) analyzing ten spheroids per group with WimSprout software.

**Quantitative Real-Time PCR**

Total RNA from brain tissues and cultured cells were isolated using the Trizol reagent (Invitrogen, Life Technology, USA), and 1 μg of total RNA from each sample was reverse-transcribed into cDNA and subjected to quantitative real-time PCR (qRT-PCR) using the SYBR Green I Kit (Roche) according to the manufacturer’s protocol. The 2^ΔΔCt method was used to calculate the relative expression of each gene relative to the amount of β-actin or GAPDH. Primers used for real-time PCR are summarized in Table S1.

**Western Blot Analysis**

Western blotting was performed as previously described [23]. Briefly, equal amounts of protein were loaded onto 10% SDS-PAGE gels and blotted onto PVDF membranes. Membranes were blocked with 4% non-fat milk and incubated with primary antibodies against notch (1:1000, Cell Signaling Technology, USA), Hes-1 (1:1000, Cell Signaling Technology, USA), and Hey-1 (1:1000, LifeSpan Biosciences, Inc., USA) overnight. β-actin (1:1000, Abcam Inc., USA) was used as a loading control. After being washed, the membranes were incubated with HRP-conjugated secondary antibodies for 2 h at room temperature. Specific binding was detected with enhanced chemiluminescence reagents. The blots were semiquantified by ImageJ analysis software for comparisons.

**Statistical Analysis**

Parametric data from different groups were compared using one-way ANOVA followed by the Student–Newman–Keuls test. All data are presented as mean ± SD. A value of P < 0.05 was considered statistically significant.
Results

Meg3 Is Downregulated After Ischemic Stroke

We previously identified 1924 novel lncRNAs in rat brain using Solexa sequencing (GSE78200). Using sequence homology analysis, we noted that one of the novel lncRNAs was most likely the ortholog of human and mouse Meg3. Cuffdiff results revealed that there were 4 transcript variants and that CUFF2.3 was the main transcript variant as calculated by FPKM (Fig. 1a, b). To further validate this result, we identified the 5' and 3' transcription start and termination sites of the CUFF2.3 transcript by RACE analysis (Fig. 1c), and the sequences of the full-length CUFF2.3 (which we termed rat Meg3 was located on rat chromosome 6, rn5 chr6:142,821,657–142,853,211) are presented in Fig. S1. Meg3 is highly conserved between rat, mouse (90.3% homology), and human (80.5% homology) genomes (Fig. S2).

To evaluate the function of this newly identified lncRNA, the expression change of Meg3 over a period of time was investigated. Ischemic stroke in rats caused a decrease in Meg3 expression at day 1, a continuing decline to the low-point level at day 3, and then a gradual return to almost normal levels by 14 days after MCAO (Fig. 1d). These results indicated that Meg3 was down-regulated after MCAO.

Meg3 Knockdown Reduces Brain Lesions and Improves Neurological Outcomes

To evaluate the effect of Meg3 on ischemic stroke, we first performed Meg3 knockdown or overexpression in the rat brains using a lentivirus vector. Immunofluorescence showed that the RFP marker was stably expressed in the brain 7 days after MCAO (Fig. 2a, b). PCR results showed that rat injected with sh-Meg3 expressed low levels of Meg3 (0.4-fold), and the rat injected with the Meg3 expressed high levels of Meg3 (4.1-fold) compared to the control group 28 days post-MCAO (Fig. 2c).

Next, we examined whether Meg3 overexpression or downregulation affected the outcome after focal ischemia. TTC staining showed that the ischemic lesion volumes of the four groups were 229.3 ± 14.9 mm3 (control group), 264.5 ± 10.5 mm3 (Meg3 group), 223.0 ± 8.4 mm3 (sh-Ctrl group), and 174.7 ± 6.3 mm3 (sh-Meg3 group), respectively (Fig. 3a, b). There were significant differences in lesion volume among the control, Meg3, sh-Ctrl, and sh-Meg3 groups, suggesting that Meg3 affected histological outcome after focal ischemia.

We then determined whether Meg3 affected the neurological deficits after focal ischemia. Neurological outcomes using mNSS and adhesive removal test were measured at 1–4 weeks after MCAO. Compared with the sh-Ctrl group, the animals of the sh-Meg3 group exhibited significant
functional enhancement in mNSS and adhesive-removal maintaining time, while the Meg3 group exhibited relatively poor performance in the mNSS and adhesive-removal test 7 days after MCAO compared to the control.

Fig. 2 Lentivirus-mediated overexpression and knockdown of Meg3 in rat brain. a Schematic representation of the animal experimental design. b Schematic of lentivirus injection. Arrow indicates the lentivirus injection in the right striatum. Immunofluorescence stains of RFP distribution at day 7 after MCAO. Scale bar = 100 μm. c Bar graph shows the qRT-PCR analysis of Meg3 expression around the injection site 28 days after MCAO (n = 5/group). *P < 0.05 versus control, #P < 0.05 versus sh-Ctrl, &P < 0.05 versus Meg3

Fig. 3 Meg3 knockdown reduced brain infarct volumes and improved neurobehavioral outcomes. a, b Representative images and bar graph show the brain lesions in control, Meg3, sh-Ctrl, and sh-Meg3 groups 7 days post-MCAO (n = 5/group). c, d Bar graphs summarizing the result of mNSS and adhesive removal test in control, Meg3, sh-Ctrl, and sh-Meg3 groups at indicated times. *P < 0.05 versus control, #P < 0.05 versus sh-Ctrl, &P < 0.05 versus Meg3
group (Fig. 3c, d). These data suggest that knockdown of Meg3 significantly improved functional recovery after stroke.

**Meg3 Knockdown Promotes Angiogenesis After Ischemic Stroke**

Angiogenesis is a prerequisite for recovery from ischemic stroke; hence, the formation of blood vessels was analyzed by micro-CT scanning. The 3D reconstructed images showed that a much higher microvessel density in the Meg3 downregulated rats compared to the control group, whereas in the Meg3-overexpressing rats, there were less numbers of microvessels in the lenticulostriate artery area 14 days post-MCAO (Fig. 4a). CD31 immunofluorescence analysis further confirmed the results in the peri-infarct area at 14 and 28 days after MCAO (Fig. 4b). Dual-labeled immunofluorescence showed there were more Ki67/CD31-positive cells in the sh-Meg3 group and less numbers of Ki67/CD31-positive cells in the Meg3 group than in the control group (Fig. 4c). These results suggest that Meg3 downregulation could promote angiogenesis after focal ischemia.

**Meg3 Regulates Endothelial Cell Function and Vessel Growth In Vitro**

To further explore the angiogenic functions of Meg3, we constructed HMEC-1 cells with stable overexpression of Meg3 (HMEC-Meg3) and stable downregulation of Meg3 (HMEC-sh-Meg3). qRT-PCR analysis showed that lentiviral-mediated silencing of Meg3 resulted in a reduction of Meg3 (0.4-fold) in HMEC-sh-Meg3, and lentiviral-mediated overexpression of Meg3 resulted in upregulation of Meg3 (52.6-fold) in HMEC-Meg3 compared to controls (Fig. 5a).

Proliferation, migration, and sprouting of endothelial cells are crucial steps in angiogenesis. We further investigated the role of Meg3 in HMEC-1 cell function by CCK-8, scratched wound, tube formation, and spheroid

![Fig. 4 Meg3 knockdown promoted angiogenesis after ischemic stroke.](image-url)
angiogenesis assays. Compared with HMEC-sh-Ctrl, silencing of Meg3 increased endothelial cell proliferation and migration. In contrast, overexpression of Meg3 profoundly decreased endothelial cell proliferation and migration (Fig. 5b, c). Furthermore, compared with the control group, HMEC-Meg3 rarely formed capillary-like structures and sprouted fewer branch, whereas HMEC-sh-Meg3 increased sprout length, the number of branch points, and the number of sprouts per spheroid as indicated by tube formation and spheroid assays (Fig. 5d, e).

**Meg3 Knockdown Activates Notch Pathway in Endothelial Cells and Ischemic Stroke**

Notch signaling plays an important role in the regulation of angiogenesis. To gain insights into the mechanism by which Meg3 regulates angiogenesis, the expression change of notch signaling in ischemia brains and endothelial cells were performed. Western blot results also showed that the protein level of NICD, Hes-1, and Hey1 in the ischemic brain was decreased in the Meg3 group and increased in the sh-Meg3 group 7 days after MCAO.
compared to that in the control group (Fig. 6a, b). Similarly, the expressions of NICD, Hes-1, and Hey-1 were decreased in HMEC-Meg3 and increased in HMEC-sh-Meg3 (Fig. 6c, d). Taken together, these data indicate that Meg3 activates the notch pathway in endothelial cells and in ischemic stroke.

Notch Inhibition Impairs Meg3-Induced Angiogenic Migration and Sprouting

Next, we determined whether the effect of Meg3 on endothelial cells was mediated via the notch pathway. First, we used the classical inhibitor DAPT to block the notch pathway. Meg3 knockdown resulted in an increase of NICD in HMEC-sh-Meg3, and the upregulation of NICD was inhibited by DAPT in a dose-dependent manner (Fig. S3). Based on these data, 25 μM DAPT was selected for further studying of angiogenic function. The cell motility, tube length, and branch numbers in HMEC-sh-Meg3 were all significantly higher than in the HMEC-sh-Ctrl. Blocking the notch pathway was able to reverse the angiogenic activity induced by knockdown of Meg3 as indicated by scratch assay, tube formation, and spheroid assay (Fig. 7a–e). These results indicate that the notch pathway could mediate the angiogenic effect of Meg3.

Discussion

Although the expression profile of lncRNAs has been shown to change extensively after ischemia stroke [31] and growing evidence in cerebral ischemia points to a multitude of functions performed by lncRNA, including regulation of gene expression and neuronal survival [22, 32, 33], the role of lncRNAs in stroke is still largely unknown. Here, we identified a novel, previously unknown function of lncRNA-Meg3 which is downregulated after ischemic stroke and showed that inhibition of Meg3 expression improves neurobehavioral outcome and promotes angiogenesis both in vitro and in vivo. Importantly, we also found that Meg3 acts as a regulator of angiogenesis through activating the notch signaling pathway. This study may provide a novel mechanism and potential therapeutic target for ischemic stroke and angiogenesis-related diseases.

In this study, rat Meg3 was identified by RNA sequencing. Sequence homology analysis revealed that Meg3 is evolutionarily conserved between species, which indicates Meg3 is functionally important. Meg3 was initially discovered as a tumor-associated lncRNA and was reported to highly express in brain and endothelial cells [6, 34, 35]. Zhang found that Meg3 is associated with meningioma pathogenesis and meningioma loss of Meg3 expression has higher tumor grade [9]. Wang has reported that Meg3 expression was markedly decreased in glioma tissues and overexpression of the MEG3 could impair glioma cell proliferation [12]. However, to date, the function of Meg3 in stroke has not been studied. Our data showed that Meg3 knockdown significantly reduced infarct volume and improved neurological function recovery, which was associated with increased functional microvessels in the peri-infarct area as confirmed by micro-CT and Ki67/CD31 double immunofluorescence. The formation of new blood vessels via angiogenesis...
contributes to the restoration of blood supply in the ischemic zone [3, 4]. Endothelial cell proliferation and migration and capillary tube-like structure formation are essential steps of angiogenesis [36]. We further demonstrated that downregulation of Meg3 in endothelial cells result in increased cell mobility, proliferation, and tube formation. This angiogenesis effect of Meg3 was consistent with previous findings, which showed that loss of Meg3 was associated with brain blood vessel development in Meg3-null embryos [14]. These findings suggest that Meg3...
participates in angiogenesis and vessel remodeling process, which may contribute to long-term functional outcome after ischemic brain injury.

Age is a principal risk factor for stroke. Previous studies showed that aged brain is capable of mounting a vigorous angiogenic response after stroke; however, the vast majority of angiogenic response genes showed delayed upregulation in the aged rats [37, 38]. The Notch pathway is an ancient intercellular signaling mechanism, which is fundamental for the development of human tissues, organs, and systems. Current evidences have highlighted a key role of Notch signaling in the pathophysiology of age-related diseases, such as cardiovascular diseases and Alzheimer’s disease [39]. In particular, Notch signaling is activated in endothelial cells in response to ischemic stimuli [29]. Binding of notch receptors to ligands triggers the activation of notch intracellular cytoplasmic domain (NICD) which promotes the transcription of genes downstream (Hes-1 and Hey-1) in the Notch pathway. Previous work showed that Notch signaling determines the formation of native arterial collateral networks in ischemic stroke [40], and inhibition of Notch signaling impairs reparative angiogenesis after ischemia [41]. A number of studies have reported that the increased expression of Hes-1 plays an important role in angiogenesis [29, 42]. Notch1 and Hey-1/Hey-2 knockout mice do not express the arterial endothelial markers in the remaining large arteries [43]. In this study, we show that notch and notch target genes (Hes-1 and Hey-1) were suppressed after Meg3 overexpression and increased after Meg3 downregulation both in MCAO rats and in endothelial cells. In line with previous articles, changes in the Notch signaling pathway suggested that Meg3 may affect Notch signaling-mediated angiogenesis after stroke. Functional studies in mice, tumor models, and cell culture systems have shown that the angiogenic growth of the blood vessel network, the proliferation of endothelial cells, and the regulation of blood vessel sprouting and branching are controlled by Notch signaling [21, 44]. Activation of Notch-1 in normal vasculature induces a proangiogenic state [42]. Consistently, our data showed that Meg3 knockdown-induced endothelial cell proliferation, migration, and tube formation were reversed by notch inhibitor, suggesting notch mediated the angiogenic effect of Meg3. Taking together, our study indicates that Meg3 knockdown may promote angiogenesis after ischemic brain injury by activating the Notch signaling pathway.

Overall, this is the first study elucidating the function and mechanism of Meg3 in angiogenesis after ischemic stroke. Knockdown of Meg3 after stroke may thus promote angiogenesis and functional recovery from stroke. Meg3 may also be of therapeutic significance for promoting regeneration in cases of ischemic vascular disease.

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Compliance with Ethical Standards All animal procedures were approved by the ethics Committee of Shanghai Jiao Tong University and performed according to the guidelines of the US Department of Health for use and care of laboratory animals.

Conflict of Interest The authors declare that they have no conflict of interest.

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