MiR-410-3p facilitates Angiotensin II–induced cardiac hypertrophy by targeting Smad7

Guizhi Jia, Chunguang Liang, Wenhui Li, and Hongliang Dai

ABSTRACT

MicroRNAs (miRNAs) have emerged as important regulators in the development of cardiovascular diseases. miR-410-3p was shown to play a protective or detrimental role in the progression in cardiovascular events. However, the exact role and the underlying mechanism of miR-410-3p in cardiac hypertrophy have not been documented. The current work was aimed to determine the role and underlying mechanism of miR-410-3p on Angiotensin II (Ang II) induced cardiac hypertrophy. FITC-phalloidin staining was used for determination of cardiomyocyte surface area. Quantitative reverse transcription polymerase chain reaction (qRT-PCR) was performed to identify mRNA expression level of hypertrophic markers. Smad7 protein expression level was analyzed using Western blot. Dual-luciferase reporter assay was used to examine the regulatory function of miR-410-3p on Smad7. MiR-410-3p was found significantly up-regulated in Ang II–induced cardiac hypertrophy. MiR-410-3p inhibitor remarkably alleviated cardiomyocyte hypertrophic changes. Dual-luciferase reporter assay result indicated that miR-410-3p directly targeted Smad7 and miR-410-3p inhibitor effectively prevented Ang II triggered down-regulation of Smad7. Moreover, Smad7 overexpression significantly reversed the pro-hypertrophic effect of miR-410-3p. In summary, our findings revealed that miR-410-3p mediated Ang II–induced cardiac hypertrophy via targeting inhibition of Smad7.

1. Introduction

Hypertension is the leading cause of diverse cardiovascular diseases and mortality among adults. It is documented that hypertension affects 31.1% of the world population and accounts for approximately 13.5% overall death worldwide [1,2]. Renin–Angiotensin system plays a pivotal role in blood pressure regulation in human body. Angiotensin II (Ang II), a bioactive octa-peptide, is the representative hormone in RAS. Accumulating evidence shows that Ang II contributes to pathological cardiac hypertrophy and the resultant heart failure, indirectly via increased blood pressure and/or directly acting on cardiomyocytes [3–5].

MicroRNAs have drawn more and more attention in cardiovascular research field [6,7]. Indeed, mounting evidence shows that 21–25 nt long oligonucleotide are critically involved in regulation of a series of biological processes in cardiovascular system, such as physiological and/or pathological cardiac hypertrophy, cell apoptosis, autophagy, cardiac inflammatory response, and remodeling [8–14]. Previously, accumulating evidence revealed that miR-410-3p was critically involved in cancer progression [15,16]. Until recently, researchers start to focus its functional significance in cardiovascular conditions, and limited number of reports suggested that miR-410-3p might play a protective or detrimental role in the progression of cardiovascular events [17–19]. However, the exact role and the underlying mechanism of miR-410-3p in hypertension/Ang II–induced pathological cardiac hypertrophy are completely unclear.

Given the significance of miR-410-3p in diverse cardiovascular conditions, we speculated that miR-410-3p might play critical roles in the progression of cardiac hypertrophy. The aims of this study were to characterize the role of miR-410-3p in Ang II triggered cardiac hypertrophy, and further dissect the underlying mechanism.
2. Materials and methods

2.1. Cell culture and treatment

Primary cultures of neonatal rat ventricular myocytes (NRVMs) were prepared as described previously [20]. In brief, hearts were isolated from newborn Sprague-Dawley rats. After discarding blood vessels and atria, the ventricular tissues were cut into pieces for subsequent digestive separation by trypsin (Sigma-Aldrich, St. Louis, MO). Afterward, the obtained cell suspension was subjected to 1 h differential adhesion to remove fibroblasts. Pure cardiomyocytes were then collected and cultured in DMEM supplemented with 10% fetal bovine serum. Brdu was added to minimize fibroblast proliferation. After 24 ~ 48 h culture, the fetal bovine serum content was reduced to 0.5% and cardiomyocytes were treated with Ang II (Sigma-Aldrich) in the presence or absence of Rno-miR-410-3p mimics, Rno-miR-410-3p inhibitor, and/or Smad 7 overexpression vector (GenePharma Co., Ltd, Shanghai, China). Cell transfection was performed using Lipofectamine 3000 (Invitrogen, USA).

2.2. FITC-phalloidin staining

As described previously, FITC-phalloidin staining was used for cardiomyocyte surface area determination [21]. After treatment, cells were washed with Phosphate Buffered Saline for three times. The cells were then fixed in 4% paraformaldehyde for 30 min, and permeabilized in in 0.1% Triton X-100 for 10 min. Subsequently, cells were blocked with 10% normal goat serum for 10 min, and stained by FITC-phalloidin (10 μg/ml, Sigma-Aldrich) for 30 min at 37°C. Stained cells were photographed under a fluorescence microscope and cell surface area was quantified using ImageJ software.

2.3. Quantitative reverse transcription polymerase chain reaction (qRT-PCR)

QRT-PCR was used to determine mRNA level [22]. Total RNA from NRVMs was extracted with TRIZol Reagent (Invitrogen, Carlsbad, CA, USA), and miRNA by miRcute miRNA Isolation Kit (TIANGEN, Beijing, China) according to the manufactures’ instructions. Reverse transcription for total RNA and miRNA was performed using PrimeScript RT reagent kit with gDNA eraser (Takara, Japan), and miRcute Plus miRNA First-Strand cDNA Kit (TIANGEN, Beijing, China), respectively. Relative gene expression of total RNA was determined by using SYBR green detection (Takara, Japan). Relative miRNA expression was determined using miRcute Plus miRNA qPCR Kit (SYBR, TIANGEN, Beijing, China). GAPDH and U6 were used for internal controls for mRNA and miRNA, respectively.

2.4. Dual-luciferase reporter assay

According to the previously reported method [23], HEK-293 T cells were transfected with reporter vectors containing WT or Mut constructs of Smad7 3’UTR, along with miR-410-3p mimics using Lipofectamine 3000. After 48 h, the Firefly luciferase activity was measured by dual-luciferase reporter assay system (Promega, Madison, WI, USA). Renilla luciferase activity was used as a control.

2.5. Western blotting

Western blotting was used to determine protein expression [20]. Total protein content was determined using a BCA protein assay kit (Pierce, Rockford, IL). Equal protein samples were subjected to sodium dodecyl sulfate-polyacrylamide gel electrophoresis and then the separated proteins were transferred onto polyvinylidene fluoride membranes (Millipore, USA). After blocked with 1% BSA for 1 h at room temperature, the membranes were immunoblotted with primary antibodies against Smad7 (Proteintech, Wuhan, China) and glyceraldehyde-3-phosphate dehydrogenase (GAPDH, Abcam, Cambridge, MA, USA) overnight. Afterward, the membranes were washed three times (5 min once) with Tris-buffered saline containing 0.1% Tween 20 and further incubated with horseradish peroxide-conjugated secondary antibodies for 2 h at room temperature. The bands were detected
using enhanced chemiluminescence reagents (Thermo Fisher Scientific).

2.6. Statistical analysis

The data are presented as mean plus standard deviation in at least three independent experiments. Student’s t test and One-way analysis of variance was used for comparison for two and multiple data sets, respectively. It was considered significant when P < 0.05.

3. Results

3.1. MiR-410-3p is upregulated in Ang II–induced hypertrophic cardiomyocytes

More recently, it was documented that miR-410-3p played a critical role in myocardial hypoxia/reoxygenation injury [17]. In the current work, we established an in vitro hypertrophic model in NRVMs using Ang II so as to identify the potential role of miR-410-3p in cardiac hypertrophy. As shown in Figure 1a, a dose dependent upregulation of cardiac hypertrophic markers, including ANP, BNP, and β-MHC was seen following different concentration of Ang II stimulation, with the most significant effect occurring at $1 \times 10^{-6}$ M (Figure 1a-c). Intriguingly, it was observed that miR-410-3p exhibited a similar change pattern to expression of hypertrophic markers upon $1 \times 10^{-7} \sim 10^{-5}$ M Ang II treatment (Figure 1d).

3.2. MiR-410-3p inhibitor suppresses Ang II–induced cardiomyocyte hypertrophy

To determine the role of miR-410-3p in Ang II–induced cardiac hypertrophy, NRVMs were transfected with miR-410-3p inhibitor and then were treated with $1 \times 10^{-6}$ M Ang II. As shown in Figure 2a, miR-410-3p level was significantly decreased in miR-410-3p inhibitor transfected cells when compared with control. Palloidin staining assay showed that Ang II–induced increment of cell size was significantly alleviated by miR-410-
Inhibitor (Figure 2b). In compatible with this, Ang II–induced upregulation of hypertrophic markers was also significantly blunted by miR-410-3p inhibitor (Figure 2c-e).

3.3. MiR-410-3p mimics inhibits the level of Smad7

To explore how miR-410-3p mediates Ang II provoked cardiac hypertrophy, we predicted the potential downstream target using Targetscan and miRDB. As shown in Figure 3a, using stringent screening criteria (TargetScan: Total context+ score < −0.2; miRDB: Target score > 90), we found that only Smad7 fell into intersection of target genes of Rno-miR-410-3p and Hsa-miR-410-3p. Bioinformatic analysis showed that the 3’UTR region of Smad7 mRNA contains a miR-410-3p binding sequence (Figure 3b). Further, dual-luciferase reporter assay showed that miR-410-3p mimics significantly decreased luciferase activity in cells transfected with Smad7-3’UTR WT vector, while no significant influence was found with miR-410-3p on luciferase activity in cells containing Smad7-3’UTR Mut vector (Figure 3c). In addition, our data showed that Ang II–induced decreases of Smad7 expression was remarkably reversed by miR-410-3p inhibitor (Figure 3d).

3.4. Smad7 overexpression antagonizes the effect of miR-410-3p mimics on cardiac hypertrophy

To explore the regulatory mechanism of Smad7 on miR-410-3p-induced cardiac hypertrophy, NRVMs were transfected with miR-410-3p mimics in the presence or absence of Smad7 overexpression vector. As shown in Figure 4a, Smad7 overexpression vector significantly reversed miR-410-3p mimics provoked down-regulation of Smad7.
Figure 3. MiR-410-3p mimics inhibits the level of Smad7. (a). Venn diagram showing the potential target genes of miR-410-3p from prediction algorithms TargetScan and miRDB. (b). Predicted target sequences for miR-410-3p in the 3'UTR of Smad7. (c). Dual-luciferase assay to determine binding relationship between miR-410-3p and Smad7. (d). Western blot analysis of Smad7 expression in cardiomyocytes in response to Ang II in the absence or presence of miR-410-3p inhibitor. **P < 0.01 compared with Ctr group; ##P < 0.01 compared with Ang II group.
Phalloidin staining results demonstrated that Smad7 overexpression remarkably reversed the pro-hypertrophic effect of miR-410-3p (Figure 4b). Besides, our data showed that miR-410-3p mimics produced up-regulation of hypertrophic markers was effectively reversed by Smad7 overexpression (Figure 4c-e).

4. Discussion

Anti-hypertrophic treatment has been considered an effective strategy for cardiovascular disease control [24]. MicroRNAs have been newly identified as critical regulators of pathological cardiac hypertrophy; targeting microRNAs might be expected to rescue abnormal cardiac hypertrophy [25,26]. In this study, our data show that miR-410-3p is up-regulated in hypertrophied cardiomyocytes upon Ang II treatment. Mechanistically, we provide evidence that miR-410-3p facilitates Ang II-provoked cardiac hypertrophy via down-regulation of Smad7.

MicroRNA modulates gene expression via targeting recognition the 3'-untranslated region (3'-UTR) of its downstream gene mRNA [27]. Previous studies showed that miR-410-3p was critically implicated in multiple human diseases [18,28–30]. As for cardiovascular system, available reports are limited and results seem inconsistent across studies. Previously it was disclosed that miR-410-3p acted as a protector in hypoxia-induced cardiomyocyte injury [31]. In line with this, overexpression of
miR-410-3p was also suggested a potential therapy for sepsis-induced myocardial injury [18]. In spite of that, a recent study, however, showed that miR-410-3p aggravated hypoxia/reoxygenation-induced cardiac injury [17]. In the present work, we found that miR-410-3p was a critical mediator for Ang II–induced cardiac hypertrophy. As such, miR-410-3p might exert different even opposite function in the progression of cardiovascular diseases. As far as cardiac hypertrophy is concerned, we believe that miR-410-3p is a detrimental factor and decreasing its level would represent a novel therapeutic strategy.

Sekelsky mothers against decapentaplegic homolog (Smad) family proteins are canonical rely molecules for transforming growth factor β (TGF-β) signaling, which has been demonstrated to play an important role in ventricular hypertrophy and fibrosis. Actually, different Smad proteins exhibit distinct functions. Thus, Smad family proteins can be divided into three subgroups as per their functional differences, i.e., the receptor-associated Smads, the common mediator Smads, and the inhibitory Smads [32]. Smad7 is a negative regulator of transforming growth factor β signaling through blocking receptor Smad phosphorylation via competitive binding to and degrading transforming growth factor β receptor, or disrupting Smad/Smad4 complex formation and further its binding to DNA in the nucleus [33]. Functionally, Smad7 acts as an anti-hypertrophic and cardio-protective factor in cardiovascular system [34–37]. In our study, we identified Smad7 mRNA as a direct target of miR-410-3p through luciferase reporter assay with the aid of bioinformatic analysis. Importantly, we further observed that miR-410-3p induced cardiac hypertrophy via down-regulation of Smad7 and that Smad7 down-regulation was integral to the pro-hypertrophic effect of miR-410-3p. Thus, we conclude that upon Ang II stimulation, miR-410-3p would be up-regulated and induced cardiomyocyte hypertrophy, which is dependent on the down-regulation of Smad7. This study simply confirmed the in vitro mediating effect of miR-410-3p on Ang II triggered cardiac hypertrophy. Future work is required to confirm this finding via in vivo animal studies and clinical assessment.

5. Conclusion

In conclusion, we for the first time have shown that miR-410-3p is up-regulated in Ang II-treated cardiomyocytes. The in vitro experiment confirmed that miR-410-3p is integral to Ang II–induced cardiac hypertrophy. Mechanically, miR-410-3p mediated Smad7 down-regulation was demonstrated to be an essential process in Ang II–provoked cardiac hypertrophy. Therefore, miR-410-3p would be a potentially effective target for cardiac hypertrophy intervention.

Highlights

- miR-410-3p was found significantly up-regulated in Ang II–treated cardiomyocytes
- miR-410-3p was shown to be critically involved in Ang II–induced cardiomyocyte hypertrophy.
- Down-regulation of Smad7 level represents an important mechanism underlying miR-410-3p-mediated cardiac hypertrophy upon Ang II stimulation.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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Availability of data and materials

The data used to support the findings of this study are included within the article.

Author contributions

Guizhi Jia: designed and conducted the study, wrote the original draft; Chenguang Liang: analyzed the data; Wenhui Li: conducted the study; Hongliang Dai: revised the manuscript, supervised the study and reviewed the final version.
Ethics approval and consent to participate

All procedures on the animals were approved by the Institutional Animal Care and Use Committee of Jinzhou Medical University (Jinzhou, China).

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