Phosphorylated Glycogen Synthase Kinase-3β (GSK-3β) Improves Cognition in Rats with Diabetes-Associated Cognitive Decline

Corresponding Authors: Rong Lu, e-mail: lurong1212@163.com, Xu Zhang, e-mail: lsj860214@163.com

Source of support: This study was supported by the Zhejiang Medical and Health Science and Technology Program (2014KYB312) and the Taizhou Science and Technology Planning Project (121KY09-2)

Background: The serine/threonine kinase glycogen synthase kinase-3β (GSK-3β) is involved in a broad range of cellular processes, including cell proliferation, apoptosis, and inflammation. GSK-3β has been considered to play an important role in the pathogenesis of T2DM and AD, which is activated in both the periphery and central nervous system. However, the upstream and downstream factors and the underlying regulatory mechanisms of GSK-3β in T2DM and AD are unclear.

Material/Methods: Here, we investigated the production of cytochrome C, Caspase-3, and Caspase-9 in the hippocampus of DM rats and clarify the role of GSK-3β in these processes. Streptozotocin (STZ)-induced DM rats presented increased GSK-3β activity.

Results: We found that cytochrome C, Caspase-3, and Caspase-9 were overproduced in the hippocampus. Furthermore, the cytochrome C, Caspase-3, and Caspase-9 levels were restored after GSK-3β inhibitors Licl treatment.

Conclusions: Our results show that GSK-3β regulates the production of cytochrome C, Caspase-3, and Caspase-9 in STZ-induced rat brain and may therefore contribute to DM-caused cognitive dysfunction via inhibition of neural cell apoptosis.

MeSH Keywords: Enzyme Inhibitors • Glycogen Synthase Kinase 3 • Mild Cognitive Impairment • Neural Cell Adhesion Molecules

Full-text PDF: https://www.medscimonit.com/abstract/index/idArt/914653

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Type 2 diabetes mellitus (T2DM) is a metabolic disease characterized by insulin resistance and hyperglycemia [1]. It is reported that T2DM is strongly associated with dementia, with a 50% increase in the risk for dementia [2]. Strong evidence showed that T2DM could lead to impaired attention, executive functioning and verbal memory [3]. Many findings showed hypoglycemia, the components of metabolic syndrome, could lead to neuronal cell death and learning and memory damage, eventually cause dementia, such as Alzheimer’s disease (AD) [4].

GSK-3 includes 2 forms: GSK-3α and GSK-3β. GSK-3α encodes a protein of 51 kDa, while GSK-3β encodes a protein of 47 kDa [5]. They are both active in many physiological processes, controlled by phosphorylation at 2 levels: (i) inhibitory phosphorylation of serine residues S21/S9 in GSK3α/β and (ii) tyrosine phosphorylation at Y279/Y216 in GSK3α/β [6,7]. GSK3β has a role as “tau-kinase” in AD and contributes to phosphorylation of Tau protein [8]. The positive and negative regulators of GSK-3β are Tyr216, Ser9, and phosphorylated Tyr216, whose phenyl ring is twisted outward to allow the substrate to enter the active pocket, while phosphorylated Ser9/Ser 21 is incorporated as a pre-phosphorylated pseudo-substrate [5]. A T-loop block prevents entry of substrate proteins. GSK-3β, a multifunctional serine-threonine kinase, plays an important role in glycogen metabolism and has an important role in many cellular physiological events by phosphorylation of multifold substrate proteins, including Wnt and Hedgehog signal transduction pathways. Small molecular inhibitors of GSK-3β are new drugs for the treatment of chronic neurodegenerative disease [9], cancer [10], and type II diabetes [11], although the potential regulatory mechanisms of GSK-3β in T2DM and AD are still unclear.

In the present study, we examined whether activation of the PI3K/AKT/GSK pathway leads to phosphorylation of GSK3β (ser9), thus inhibiting apoptosis and reducing cognitive dysfunction in a rat model of diabetes.

Material and Methods

All procedures were performed in accordance with current guidelines for Animal Experimentation at the Institutional Animal Care and Use Committee of Taizhou University (approval 15th of March 2018). Adult male Sprague-Dawley rats (200–250 g) were housed in groups of 3 at 25±2°C, relative humidity of 50–60% and a natural 12/12-hour light/dark cycle.

Forty Sprague-Dawley male rat were used in the experiments. The rats were randomly divided into 3 groups: control group (n=10), DM group (n=10), and DM plus Licl group (n=10). Experimental rats received intraperitoneal injection with 60 mg/kg STZ. The DM rats were determined by fasting blood glucose ≥16.7 mmol/L 72 h after STZ injection. Body weight was measured weekly. The 24-h food and water intake were assessed at week 6.

Water Morris maze

The apparatus [12,13] was 150 cm wide, 50 cm high, and 40 cm deep, and water was maintained at 22±1°C. The hidden platform (10 cm in diameter) was submerged 1 cm below the water surface and was placed in the middle of the same quadrant during the whole training stage. For the next 4 days (days 1–4), the rats (n=10 in each group) were tested 3 times a day for a continuous interval of 5 min. In each experiment, a rat was placed in water facing the wall of the pool and allowed to search for the platform for 120 s. If the rat did not locate the platform within 120 s, it was gently placed on the platform for 20 s and the escape latency was recorded as 120 s. The average escape latency of the 3 trials was recorded as a daily result of the animals’ ability to learn. On the fifth day of the test, each rat was tested with the platform removed from the pool and the rats were allowed to swim for 120 s to search for the platform. We assessed spatial memory function by frequency over the platform and the residence time of each rat in the target quadrant.

Hematoxylin-eosin (HE) staining

Sprague-Dawley rats were anesthetized with 10% chloral hydrate (4 ml/kg) i.p. Then, the rats were perfused with 200 mL 0.9% NaCl solution and subsequently with 4% paraformaldehyde in 0.1 mol/L phosphate buffer at pH 7.4. Brains were rapidly removed and postfixed for 24 h in formalin. After postfixed tissues were embedded in paraffin wax, 5-μm-thick serial coronal sections were obtained and mounted on polyL-lysine-coated glass slides. For histological assessment of damage to the hippocampus, the paraffin-embedded brains were stained with hematoxylin-eosin (HE) according to standard protocol.

Electron microscopy

The brain was removed, pre-fixed in 2.5% glutaraldehyde solution at 4°C, and postfixed with 6% osmium tetroxide for 2 h. Then, they were rinsed with distilled water before undergoing a graded ethanol dehydration series. After they were infiltrated with a mixture of one-half acetone and one-half resin for 2 h, the tissues were polymerized in resin for 12 h. After 4 days, the tissues were embedded in resin and were cut into suitable squares. Then, they were stained with 4% uranyl acetate. Finally, sections from each hippocampus were observed under a transmission electron microscope.
Western blot analysis

After the behavioral tests, the rats were decapitated and brains were obtained. The brain tissue lysates were separated by SDS-PAGE, transferred to PVDF, and immunoblotted using specific antibodies against GSK-3β, p-GSK-3β, cytochrome C, Caspase-9 and Caspase-3 (1:1000, Abcam). The bound antibodies were detected using horseradish peroxidase-conjugated secondary antibodies and an enhanced chemiluminescence detection system.

Statistical analysis

All data are presented as mean ±SEM. Differences among 3 or more groups were compared by one-way analysis of variance (ANOVA), followed by Bonferroni post hoc testing for multiple comparisons (SPSS 17.0 software). P values of 0.05 or less were regarded as significant.

Results

Licl influenced body weight and blood glucose levels in STZ-induced diabetic rats

Blood glucose and body weight of rat were tested dynamically for 10 weeks. As shown in Table 1, there was a significant increase of blood glucose level in STZ-treated rats (p<0.01), whereas Licl administration dramatically reversed the blood glucose levels in diabetic rats (p<0.01). Moreover, an obvious reduction of body weights was observed in STZ-treated rats compared to the control group (p<0.01). Licl supplementation reversed the body weights in diabetic rat (p<0.01). The 24-h food and water intakes, measured at week 6, when the blood glucose and body weight had reached the steady state, were both increased by 3-fold in the diabetic rats compared with control group (Figure 1A, 1B).

Morris water maze test results

As shown in Figure 2A, the time it takes to find a platform dropped significantly during the 4 days of training. The rat of DM+Licl group had shorter escape latency than STZ-treated rats.

Table 1. Effect of Licl on Body weight and blood glucose levels (n=10, mean ±SEM) in the three groups of rats at onset and at the end of the test.

| Treatment       | Body weight(g) | Blood glucose(mmol/L) |
|-----------------|----------------|-----------------------|
|                 | Onset of study | End of study          | Onset of study | End of study          |
| Con             |                |                       |               |                       |
|                 | 241.37±3.98    | 288.45±4.06           | 5.87±2.04     | 5.42±1.68             |
| DM              |                |                       |               |                       |
|                 | 243.12±4.76    | 145.20±4.63*          | 5.44±2.22     | 27.31±3.38*           |
| DM+Licl         |                |                       |               |                       |
|                 | 239.67±5.25    | 187.50±3.84*          | 6.01±1.79     | 11.26±3.24*           |

* p<0.01 compared with Con group; * p<0.01 compared with DM group. Con – control; DM – diabetes; DM+Licl – Licl-treated groups.

Figure 1. Food and water intakes were measured at week 6 (A, B). Pound sign (*) denotes significant differences (p<0.01) between the STZ-treated and control (n=10) and asterisk (*) denotes significant differences (p<0.01) between the STZ-treated and Licl-treated groups.

Figure 2. (A) Morris water maze test results. The platform location was marked with a star (*) for 4 days of training. (B) Food and water intakes were measured at week 6. Pound sign (#) denotes significant differences (p<0.01) between the STZ-treated and control (n=10) and asterisk (*) denotes significant differences (p<0.01) between the STZ-treated and Licl-treated groups.

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rats (days 1–4, \( p < 0.01 \)). After 4 days of training, the platform was removed and the probe test was performed to measure the resident time and frequency of crossing the target quadrant (Figure 2B, 2C). Compared with the DM group, the number of crossings and time spent in the target quadrant dramatically decreased in Licl +DM group rats (\( p < 0.01 \)). These results revealed Licl could rescue the memory decline.

**Histopathological observations-HE staining**

Histopathological detection of the cerebral sections by hematoxylin and eosin staining indicates gross histological variation in the DM group as compared with the other 2 groups. Normal cell structures were observed in the control rats (Figure 3A). In the DM group, there was cell size shrinking, the cell number decreased, and there was aggregation of chromatin into dense staining. Hyperglycemia condition caused nerve cell damage in hippocampal regions, suggesting neurodegeneration in the rat brain of DM group (Figure 3B). However, GSK-3\( \beta \) inhibitor of Licl treatment dramatically restored this alteration (Figure 3C).

**Effects of Licl on apoptosis in the hippocampus of the rat**

The morphological features apoptotic neurons in the hippocampus of rats under transmission electron microscope are shown in Figure 4. Normal cell structures were observed in the control rats (Figure 4A). However, varying degrees of changes characteristic of apoptosis were observed in the hippocampus of STZ-induced rat (Figure 4B), which mainly included pyknosis of the nuclei and unevenly distributed nuclei. We also found that the organelles were reduced in size and the mitochondria appeared shrunken. Licl-treated reversed the situation of the DM group (Figure 4C).

**The Expression of GSK-3\( \beta \) and p-GSK-3\( \beta \) in the Hippocampus**

We detected the expression of GSK-3\( \beta \) using Western blotting in the hippocampus (Figure 5A). The total GSK-3\( \beta \) level was unchanged, while p-GSK-3\( \beta \) (Ser9) level dramatically decreased in the DM group, and Licl administration restored the p-GSK-3\( \beta \) (Ser9) level in Licl-STZ-treated rats (Figure 5B).
The expression of Cyt c in the hippocampus

We detected the expression of Cyt c using Western blotting in the hippocampus (Figure 6A). The level of cytochrome c in the DM group significantly increased compared with those in the Con and Licl+DM groups. DM increased mitochondrial cytochrome c release into cytosol, and Licl-STZ-treatment decreased cytochrome c release. However, there was no evident difference in the Con and Licl+DM groups (Figure 6B).

The expression of Caspase-9 in the hippocampus

We also detected the expression of Caspase-9 using Western blotting in the hippocampus (Figure 7A). The level of Caspase-9 in the DM group significantly increased compared with those in the Con and Licl+DM groups. However, there was no evident difference in the Con and Licl+DM groups (Figure 7B).

The expression of Caspase-3 in the hippocampus

We also detected the expression of GSK-3β using Western blotting in the hippocampus (Figure 8A). The level of Caspase-3 in the DM group significantly increased compared with those in the Con and Licl+DM groups. DM promoted Caspase-3 expression, which was inhibited by Licl-treatment. However, there was no evident difference in the Con and Licl+DM groups (Figure 8B).
Figure 5. The inhibitor Licl reduced phosphorylation of GSK-3β. Expression of p-GSK-3β was detected by Western blot (A), and the results are summarized in (B). *p<0.01, versus Con group; **p<0.01, versus DM group.

Figure 6. The inhibitor Licl reduced phosphorylation of Cyt c. Expression Cyt c was detected by Western blot (A), and the results are summarized in (B). *p<0.01, versus Con group; **p<0.01, versus DM group.

Figure 7. The inhibitor Licl reduced phosphorylation of Caspase-9. Expression of caspase was detected by Western blot (A), and the results are summarized in (B). *p<0.01, versus Con group; **p<0.01, versus DM group.
Discussion

In this study we investigated the protective effects of Licl, a small molecule inhibitor of GSK-3β, in neuronal cells. We provided evidence that Licl provides significant protection from DM-induced apoptosis in neuronal cells. Morris water maze testing of diabetes-associated cognitive decline offers an attractive strategy for confirming the neuroprotective effect of the GSK-3β inhibitor with DM rats. We established a rat model that consistently reproduces the histology of diabetes-associated cognitive decline observed in patients. Herein, we provided evidence that Licl inhibits neurons apoptosis induced by DM. We proved that p-GSK-3β is involved in the neuroprotection of Licl. The onset and progression of cognitive decline in rat brains were measured by Morris water maze testing. There was no significant difference between the control and DM+Licl groups during the 4 days of training. The rats of DM+Licl group had shorter escape latency than the STZ-treated rats. In the probe test, we found the number of crossings and time spent in the target quadrant dramatically decreased in the Licl +DM group. In addition, Licl treatment reversed the situation of the DM group, which exhibited apoptotic nuclear changes such as nuclear pyknosis, nucleolus solution, and unevenly distributed chromatin. Morris water maze testing and corresponding histologic findings clearly revealed Licl could rescue the memory decline.

Under normal circumstances, cytochrome C is a ubiquitous, heme-containing protein which is located in the space between the inner and outer mitochondrial membranes [14,15]. As a component of the electron transport chain, Cyt c accepts an electron from complex III and transfers the electron to complex IV, causing oxygen reduction into water [16,17]. As an apoptogenic agent, Cyt c releases to the cytoplasm from mitochondria. Some studies have demonstrated that Cyt c restance to the cytoplasm is a critical step in the initiation and/or amplification of apoptosis [18,19]. Based on the above mechanism, its release affects central nervous system diseases, including Alzheimer’s disease, Parkinson’s disease (PD), Huntington’s disease (HD), and amyotrophic lateral sclerosis (ALS) [20–22].

Caspases were discovered nearly a decade ago and are deemed as essential mediators of apoptotic cell death in nervous tissue [23,24]. So far, researchers have found 14 caspases which are involved in inflammation and apoptosis. Caspases play a key role in apoptosis function, either as upstream initiators of the proteolytic cascade (Caspases 8 and 9) or as downstream effectors (Caspases3, 6, and 7) that cleave cellular proteins. Caspase-9 is one of the key members of caspase family cysteine proteases, closely related with apoptosis. When cells are stimulated by apoptotic stimuli, Cyt c releases from mitochondria [25], it then binds to Apaf-1, Ced-4, and dATP and recruits Caspase-9, leading to its activation complexes. Downstream caspases, such as Caspase-3, -6, and -7, are cleaved by activated Caspase-9, which initiates the caspase cascade [26,27].

Caspase-3 is also one of the critical members of caspase family cysteine proteases; it is considered as a proapoptotic caspase family protein. Caspase-3 that has been regarded as “apoptotic” and may be involved in cellular processes not necessarily connected with cell death in the central nervous system [28,29]. Caspase-3 activation forms an apoptosis protein that can be detected in normal neural tissue. Caspase-3 may be involved in nervous tissue function in the regulatory proteolytic cascade.

GSK-3β is one of serine/threonine (ser/thr) kinase isoforms observed in mammals. It is well known that GSK-3β is involved in the regulation of different aspects of neural development, such as receptors trafficking and synaptic plasticity [30]. GSK-3β remains active in many tissues, and it is regulated by inhibitory phosphorylation on Ser9. Several kinases can phosphorylate Ser9 of GSK-3β in the signaling pathways of PKB targets

Figure 8. The inhibitor Licl reduced phosphorylation of Caspase-3 expression. Expression of Caspase-3 was detected by Western blot (A), and the results are summarized in (B). * p<0.01, versus Con group; * p<0.01, versus DM group.
GSK-3β in response to insulin and PKA phosphorylates GSK-3β in Ser9 in response to cAMP. GSK-3β dysregulation is involved in the pathogenesis of many disorders, such as neurodegenerative and mood disorders, diabetes, and neuroinflammation.

Studies have shown that GSK-3β inhibitor delays or inhibits the release of cytochrome C. Our experiment confirmed that Licl can increase the GSK-3β phosphorylation levels, thus inhibiting cytochrome C release, compared with the diabetic model group. Therefore, we hypothesized that Licl inhibits the action of nerve cell apoptosis by inhibiting the activity of GSK-3β.

Conclusions

The present study demonstrates that the GSK-3β inhibitor, Licl, can delay or inhibit the release of cytochrome C, suggesting that Pi3k/AKT/GSK-3β signaling is involved in diabetes-induced cognitive impairment via regulating mitochondrial apoptosis.

Conflicts of interest

None.

References:

1. Ferrannini E, Gastaldelli A, Iozzo P: Pathophysiology of prediabetes. Med Clin North Am, 2011; 95: 327–39
2. Biessels GJ, Staekenborg S, Brunner E et al: Risk of dementia in diabetes mellitus: A systematic review. Lancet Neurol, 2006; 5(1): 64–74
3. Palta P, Schneider AL, Biessels GJ et al: Magnitude of cognitive dysfunctions in adults with type 2 diabetes: A meta-analysis of six cognitive domains and the most frequently reported neuropsychological tests within domains. J Int Neuropsychol Soc, 2014; 20(3): 278–91
4. Graydon S, Menelli MD, Daniel M et al: Diabetes, dementia and hypoglycemia. Curr Diab Rep, 2016; 16(9): 87
5. Doble B, Woodgett JR: GSK-3β: Tricks of the trade for a multi-tasking kinase. Curr Opin Cell Biol, 2006; 18(2): 175–81
6. Cole A, Frame S, Cohen P: Further evidence that the tyrosine phosphorylation in Ser9 in response to cAMP. GSK-3β is required for glycogen synthase kinase-3 (GSK3) in mammalian cells is an auto-phosphorylation event. Biochem J, 2004; 377: 249–55
7. Hooper C, Killick R, Lovestone S: The GSK3β hypothesis of Alzheimer’s disease. J Neurochem, 2008; 104: 1439–39
8. Engel T, Hernandez F, Avila J et al: Full reversal of Alzheimer’s disease-like phenotype in a mouse model with conditional overexpression of glycogen synthase kinase-3. J Neurovirol, 2006; 26(19): 5083–90
9. Hooshmandi E, Ghasemi R, Iloun P et al: The neuroprotective effect of agmatine against amyloid β-induced apotosis in primary cultured hippocampal cells involving ERK, Akt/GSK-3β, and TNF-α. Mol Biol Rep, 2018; 7: 1–8
10. Kim L, Kimmel AR: GSK3, a master switch regulating cell-fate specification and tumorigenesis. Curr Opin Genet Dev, 2000; 10(5): 508–14
11. Wagman AS, Nuss JM: Current therapies and emerging targets for the treatment of diabetes. Curr Pharm Des, 2001; 7(6): 417–50
12. Cheng Q, Li R, Zhao L et al: Short-term sleep deprivation stimulates hippocampal neurogenesis in rats following global cerebrovascular ischemia/reperfusion. PLoS One, 2015; 10(6): e0125870215
13. Fu J, Wang H, Gao J et al: Rapamycin effectively impedes melanine-induced impairments of cognition and synaptic plasticity in wistar rats. Mol Neurobiol, 2017; 54(2): 819–32
14. Rak M, Bénit P, Chrétien D, Bouchereau J: Mitochondrial cytochrome c oxidase deficiency. Clin Sci (Lond), 2016; 130: 393–407
15. Jia D, Heng Li, Yang RH, Gao GD: Fish oil improves learning impairments of diabetic rats by blocking Pi3k/AKT/nuclear factor-κB-mediated inflammatory pathways. Neuroscience, 2014; 258: 228–37
16. Newmeyer DD, Ferguson-Miller S: Mitochondria: Releasing power for life and unleashing the machineries of death. Cell, 2003; 112: 481–90
17. Armstrong JS: Mitochondrial membrane permeabilization: The sine qua non for cell death. Bioessays, 2006; 28: 253–60
18. Liu X, Kim CN, Yang J: Induction of apoptotic program in cell-free extracts. requirement for dATP and cytochrome c. Cell, 1996; 86: 147–57
19. Skulachev VP: Cytochrome c in the apoptosis and antioxidant cascades. FEBS Lett, 1998; 423: 275–80
20. Green DR, Kroemer G: The pathophysiology of mitochondrial cell death. Science, 2004; 305: 626–29
21. Ghavami S, Shojaei S, Veyaneh B: Autophagy and apoptosis dysfunction in neurodegenerative disorders. Prog Neurobiol, 2014; 112: 24–49
22. Yuan J, Yankner BA: Apoptosis in the nervous system. Nature, 2000; 407: 802–9
23. Salvesen GS, Ashkenazi A: Snapshots: Caspases. Cell, 2011; 147: 476–76
24. Salvesen GS: Caspases and apoptosis. Essays Biochem, 2002; 38: 9–19
25. Thornberry NA: Caspases: A decade of death research. J Int Neuropsychol Soc, 2014; 20(3): 278–91