Silence of TANK-binding kinase 1 (TBK1) regulates extracellular matrix degradation of chondrocyte in osteoarthritis by janus kinase (JAK)-signal transducer of activators of transcription (STAT) signaling

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\textbf{ABSTRACT}

TANK-binding kinase 1 (TBK1) was previously reported to be critical for the regulation of osteoclast differentiation. However, its function in osteoarthritis (OA) has not yet been determined. This study aims to reveal the role of TBK1 in the extracellular matrix (ECM) degradation in OA. C57BL/6 J mice were subjected to anterior cruciate ligament transection (ACLT) surgery to establish an OA animal model. ATDC5 cells were treated with IL-1β to construct a cell model of OA. Changes in the expression of TBK1 were analyzed by qRT-PCR, Western blotting, and immunohistochemistry. Safranin O-fast green staining, ELISA, and Western blotting were performed to evaluate the ECM degradation. By searching GSE75181 and GSE61199 datasets, TBK1 was found to be highly expressed in the OA model. Its upregulation was also confirmed in ACLT mice and in a cell model of OA. Silencing of TBK1 reduced cartilage degradation, OARSI score, and serum levels of CTX-II and COMP. Silencing of TBK1 attenuated ECM degradation, as ADAMTS-4, MMP3, and MMP13 were downregulated, whilst SOX9, collagen II, and aggrecan were upregulated. Furthermore, TBK1 activates the JAK/STAT signaling pathway. Transfection of cells with the STAT3 overexpression plasmid blocked the beneficial effects of TBK1 silencing. In conclusion, TBK1 is highly expressed in OA. Silencing of TBK1 inhibited ECM degradation.

\textbf{Introduction}

Osteoarthritis (OA) is a very frequently-occurring degenerative disease that mainly affects individuals aged more than 65 years [1,2]. The quality of life for OA patients is significantly reduced since OA leads to knee or hip joint pain along with joint abnormality[3]. The main goal of OA management includes pain relief and the improvement of joint function[4]. The most commonly used non-surgical treatments like non-steroid anti-inflammatory drugs (NASIDs), are effective in pain relief, but cannot cure the disease [5]. Joint replacement is recommended by the orthopedist as an effective treatment option for patients with end-stage OA, however, the outcomes are often unsatisfactory and the lifespan of a prosthesis is limited[6]. Furthermore, the surgery requires substantial out-of-pocket costs[7]. Thus, improved understanding of OA is essential for the development of more effective treatment strategies.

TANK-binding kinase 1 (TBK1, synonyms: NAK or T2K), located on human chromosome 12, 12q14.1, consists of 2827 nucleotides and encodes a protein consisting of 942 amino acids. TBK1 consists of three domains: kinase domain, leucine zipper domain, and helix-loop-helix structure domain[8]. TBK1 is constitutively expressed in most tissues and is involved in a wide range of bodily activities. TBK1 plays a significant role in the innate immune response and is used in vaccine research, such as the small molecule inhibitor of TBK1, which can be used as an adjuvant for yellow fever vaccine [9,10]. As a non-classical pathway of IKK, TBK1 plays a variety of roles in the genesis and progression of different types of tumors. For instance, TBK1 was able to promote the transformation and invasion of breast epithelial cells resulting in breast cancer[11]. Moreover, TBK1 effectively regulated the differentiation and function of osteoclasts[12], indicating the
potential regulation of TBK1 in bone resorption-related diseases. However, its function in OA has not yet been determined.

The Janus kinase (JAK)-signal transducer of activators of transcription (STAT) signaling pathway is one of the most characterized signal transduction cascades involved in mediating various inflammatory and autoimmune diseases, such as rheumatoid arthritis and OA [13,14]. Under stimulation with interleukin-1beta (IL-1β), JAK/STAT3 signaling is activated in chondrocytes, which then induces the expression of matrix-degrading enzymes, such as matrix metalloproteinase 13 (MMP13) [15,16] and ultimately participates in the destruction of articular cartilage in OA. This study aimed to investigate the biological functions of TBK1 in the pathogenesis of OA. Both animal and cell models of OA were established, and the effects of lentivirus-mediated TBK1 silencing were investigated. The regulation of TBK1 and JAK/STAT3 signaling was then studied which further suggested TBK1 as a novel therapeutic target for OA treatment.

Materials and methods

Bioinformatic analysis

The GSE75181 and GSE6119 datasets were searched in the Gene Expression Omnibus database (GEO, http://www.ncbi.nlm.nih.gov/geo/). Differentially expressed genes were screened using the ‘limma’ package. For the GSE75181 dataset, cartilage specimens were obtained from 12 patients (10 women and 2 men; mean age, 67 years; range 54–76 years old) with knee OA. Of all the samples, GSM1944650-GSM1944661 served as the control, and GSM1944674-GSM1944683 served as the IL-1β-treated group. For the GSE6119 dataset, articular cartilage was isolated from the femoral heads of male Wistar rats. The chondrocytes obtained from rats were treated with IL-1β.

Gene ontology (GO) term function annotation and Kyoto Encyclopedia of Genes and Genomes (KEGG) pathway enrichment analysis with the ClusterProfiler package in R language were used to annotate differentially expressed genes from biological processes, cellular components and molecular functions, and the enrichment pathways were analyzed.

Animal model

Specific pathogen free (SPF) grade male C57BL/6 J mice, aged 10 weeks old were purchased from Vital River Laboratory Animal Technology Co., Ltd (Beijing, China). The use of animals in the current study was approved by the Animal Care and Use Committee of our hospital. The mice were randomly divided into four groups (n = 8 per group): sham surgery, anterior cruciate ligament transection (ACLT), ACLT+shNC, and ACLT+shTBK1. ACLT surgery on the right knee was conducted with prior anesthesia to mimic the animal model of OA as previously described[17]. The sham group of mice underwent the same procedure without ACLT. For establishing the lentivirus infection model, mice were first anaesthetised by isoflurane inhalation. The mice were then administered an intra-articular injection of shNC or shTBK1 in concentrated lentivirus supernatant (1 × 10^9 pfu) once weekly for a total of three weeks. The serum levels of cartilage metabolic markers, including C-terminal crosslinking telopeptide of type II collagen (CTX-II) and cartilage oligomeric matrix protein (COMP), were measured using the corresponding enzyme-linked immuno sorbent assay (ELISA) kits (Wuhan Huamei Biotech Co. Ltd., Wuhan, China). The mice were sacrificed after eight weeks of ACLT surgery, and cartilage was collected for histological analysis.

Histological analysis

The knee joints of five mice in each group were fixed with 4% paraformaldehyde and decalcified in 0.5 M ethylene diamine tetraacetic acid (EDTA). The samples were then embedded in paraffin and cut into 5 μm thick sections. For immunohistochemical staining, sections were incubated with anti-TBK1 primary antibody (1:50, BosterBio, Pleasanton, CA, USA) for 12 h at 4°C. Sections were then incubated with goat anti-rabbit IgG secondary antibody (1:1,000; Abcam, Cambridge, MA, USA). The stained sections were photographed under an Olympus microscope (× 40 magnification).
Sections of 5 μm thickness were stained with 0.1% Safranin O and 0.001% fast green (Sigma-Aldrich, St. Louis, MO, USA) according to a previously described method[18]. The Osteoarthritis Research Society International (OARSI) scoring system was used to evaluate cartilage destruction. The scoring system ranges from 0 (normal) to 6 (>80% loss of cartilage), and the scores were generated using multiple serial sections from the mouse knee.

Cell culture

The chondrogenic cell line ATDC5 was purchased from the European Collection of Authenticated Cell Cultures (Salisbury, UK). Cells were cultured in DMEM:Ham’s F12 (1:1) medium (Sigma-Aldrich) with 2 mM glutamine (Sigma-Aldrich) and 5% fetal bovine serum (Gibco, Grand Island, NY, USA). The cells were maintained at 37°C in a humidified incubator with 5% CO2. Subculture and medium renewal were performed every 2–3 days. To induce the phenotype of OA, ATDC5 cells were treated with 2.5, 5, or 10 ng/ml IL-1β (Sigma-Aldrich) for 12 h.

Cell transfection

PCMV6-TBK1 and control cloning vectors were purchased from OriGene (Rockville, MD, USA). siRNAs specifically targeting TBK1, scramble negative control siRNA (siNC), and the STAT3 over-expression plasmid (pcSTAT3) were synthesized and purified by RiboBio (Guangzhou, China). Transfection was performed for 48 h using Lipofectamine 2000 (Invitrogen, Carlsbad, CA, USA) according to the manufacturer’s instructions.

Quantitative real-time polymerase chain reaction (qRT-PCR)

Total RNA extracted from cartilage tissues (from 8 mice in each group) and ATDC5 cells using TRIzol (Invitrogen, Carlsbad, CA, USA) were reverse transcribed into cDNA according to the manufacturer protocol of PrimeScript™ RT Master Mix (Takara, Dalina, China). qPCR was performed using the TB Green Fast qPCR Mix (Takara). The primer sequences used for qPCR amplification were: TBK1, forward, 5’-ACTTGTGATCTCTATGCTGACA-3’, reverse: 5’-TTCTGGAAGTCCATACGC ATTG-3’; GAPDH, forward: 5’-ACTCAGAGAGTGTTCCT CG-3’, reverse: 5’-CCTTTGCTGCCACCTT CA-3’. TBK1 mRNA expression was normalized to GAPDH, and the fold change = 2-ΔΔCT was used for calculation.

Western blot

Total proteins in whole-cell lysates of ATDC5 cells were extracted using radio-immunoprecipitation assay (RIPA) lysis buffer (Beyotime). After centrifugation at 400 × g at 4°C for 15 min, the protein concentration of the extracts was determined using the Bicinchoninic Acid (BCA) Protein Assay Kit (Beyotime). A sample of 60 μg total protein was subjected to 10%–12% sodium dodecyl sulfate-polyacrylamide gel electrophoresis and electrophoretically transferred onto polyvinylidene fluoride (PVDF) membranes. The membranes were blocked in 5% fat-free milk for 1 h and then incubated with primary antibodies against TBK1 (1:500, BosterBio), ADAMTS-4 (1:500, Abcam), MMP3 (1:1,000, Abcam), MMP13 (1:1,000, Abcam), SOX9 (1:1,000, Abcam), aggrecan (1:1,000, Abcam), p-JAK1 (phospho Y705) (1:1,000, Abcam), p-JAK2 (phospho Y1007 + Y1008) (1:1,000, Abcam), JAK2 (1:1,000, Abcam), p-STAT3 (phospho Y705) (1:1,000, Abcam), STAT3 (1:1,000, Abcam), collagen II (1:1,000, Thermo Fisher Scientific) and GAPDH (1:2,000, Thermo Fisher Scientific) at 4°C overnight. After incubation with the secondary antibodies for 1 h, the blots were visualized using a chemiluminescent agent (ECL, Millipore, USA).

Statistical analysis

Data are presented as mean ± SD. Statistical analysis and graph drawing were conducted using GraphPad Prism 7.0 software. Differences between two groups were analyzed using Student’s t-test. One- or two-way one-way analysis of variance (ANOVA) was performed to analyze the differences between multiple groups. Statistical significance was set at p < 0.05.
Results

TBK1 was highly expressed in OA animal models

To identify the potential factors which correlated with OA pathogenesis, the differentially expressed genes in IL-1β-treated chondrocytes from the GSE75181 and GSE6119 datasets were analyzed. It was shown that TBK1 was highly expressed in OA models compared to that of the normal control (all \( p < 0.05 \), Figure 1(a–b)). To confirm the upregulation of TBK1 in OA, an animal model of OA was established by conducting ACLT surgery in mice. The mRNA level of TBK1 was higher in the cartilage tissue than that in the sham mice (\( p < 0.05 \), Figure 1(c)). The upregulation of TBK1 at the protein level was also confirmed by immunohistochemistry (Figure 1(d)). These data showed upregulation of TBK1 expression in the event of OA.

Silence of TBK1 inhibited the ECM degradation of OA mice

To investigate the function of TBK1 in the development of OA, ACLT mice were infected with the lentivirus shTBK1. qRT-PCR analysis showed that TBK1 was significantly silenced by shTBK1 infection when compared with shNC (\( p < 0.05 \), Figure 2(a)) and the OA manifestations induced by ACLT were relieved by shTBK1. Compared with shNC infection, shTBK1 remarkably attenuated cartilage degradation (Figure 2(b)), reduced OARSI score (\( p < 0.05 \), Figure 2(c)), and suppressed the serum levels of CTX-II and COMP (\( p < 0.05 \), Figure 2(d–e)). These data suggest that, silencing TBK1 is effective in attenuating ECM degradation in OA mice.

Silence of TBK1 inhibited ECM degradation in OA cell model

ATDC5 cells were treated with IL-1β to mimic a cell model of OA, and the expression of TBK1 was analyzed. As shown in Figure 3a–3b, both the mRNA (\( p < 0.05 \)) and protein levels of TBK1 were increased by IL-1β treatment in a dose-dependent manner. The function of TBK1 in a cell model of OA was studied. To this end, ATDC5 cells were transfected with siTBK1 or siNC and then stimulated with 10 ng/ml IL-1β for 12 h. qRT-PCR analysis showed that TBK1 expression was significantly silenced by siRNA transfection at both mRNA (\( p < 0.05 \), Figure 3(c)) and protein levels (Figure 3(d)). ECM degradation mediated by IL-1β was attenuated by TBK1 silencing. Compared to the siNC group, transfection of cells with siTBK1 remarkably downregulated the expression of ADAMTS-4, MMP3, and MMP13 (Figure 3(e)), and upregulated the expression of SOX9, collagen II, and aggrecan (Figure 3(f)). These data

Figure 1. TBK1 was highly expressed in OA animal model. Expression of TBK1 in OA model and the normal controls was searched from the (a) GSE75181 and (b) GSE6119 datasets. (c) An animal model of OA was established by conducting ACLT surgery in C57BL/6 J mice. TBK1 mRNA level in cartilage tissue was analyzed by qRT-PCR. TBK1 protein level in cartilage tissue was analyzed by (d) immunohistochemistry. *\( p < 0.05 \).
confirmed the effects of TBK1 silencing inhibiting ECM degradation in an OA cell model.

**TBK1 activated JAK/STAT signaling**

The following signaling pathways defined the biological functions of TBK1. KEGG analysis results displayed in Figure 4(a) screened out eight signaling pathways, of which JAK/STAT signaling was selected for use in the following studies since it has been widely reported to be critical in OA pathogenesis [14]. As shown in Figure 4(b), JAK/STAT signaling was predicted to be positively regulated by TBK1, validated in ATDC5 cells. Compared to the corresponding negative control, the overexpression of plasmid pcTBK1 remarkably increased the phosphorylated levels of JAK1, JAK2, and STAT3. In contrast, siTBK1 decreased the phosphorylation of these proteins (Figure 4(c)).

**Silence of TBK1 regulated ECM degradation via JAK/STAT signaling**

Furthermore, the involvement of JAK/STAT signaling in TBK1-mediated function has been studied. ATDC5 cells transfected with STAT3 overexpression plasmid (pcSTAT3) remarkably increased the protein expression of both total and phosphorylated forms of STAT3 (Figure 5(a)), suggesting that STAT3 was successfully overexpressed by transfection. Downregulation of ADAMTS-4, MMP3, and MMP13 (Figure 5(b)), as well as the upregulation of SOX9, collagen II, and aggrecan (Figure 5(c)) induced by siTBK1 were abolished by pcSTAT3. These data indicate that the beneficial effects of TBK1 silencing on ATDC5 cells were repressed by STAT3 activation.

**Discussion**

In recent years, treatment strategies for delaying or preventing OA progression have gained much attention. [19–21] However, current therapies mainly focus on pain relief and joint function improvement[4]. The lack of effective treatments highlights the urgent need for further understanding of OA pathogenesis. In this study, TBK1 was found to be significantly highly expressed in both animal and cell models of OA. Further investigations demonstrated that lentivirus-mediated TBK1 silencing attenuated ACLT-induced cartilage degradation in mice. The beneficial effects of TBK1 silencing were also confirmed in an OA cell model established by stimulating ATDC5 cells with IL-1β. The beneficial function of TBK1 silencing might be due to the regulation of JAK/STAT signaling. These findings provide a new understanding of

![Figure 2](image-url). Silencing of TBK1 inhibited ECM degradation in OA mice. ACLT mice were infected with lentivirus shTBK1 or shNC. (a) TBK1 mRNA level was detected by qRT-PCR. (b) Safranin O-fast green staining and (c) OARSI score were used for elevating cartilage destruction. (d) Serum CTX-II and (e) COMP were analyzed by the corresponding ELISA kits. *p < 0.05.
OA pathogenesis and suggest that TBK1 is a potential treatment target.

Articular chondrocytes are fully differentiated cells and are the only cell type in articular cartilage tissues. Chondrocytes are responsible for maintaining the homeostasis of articular cartilage by regulating the integrity of the cartilage mechanism and the stability of biological properties[22]. Under various stimulations, chondrocytes secrete a variety of proteolytic enzymes, chemokines and cytokines, including IL-1β to trigger the initiation of OA[23]. Therefore, ATDC5 cells were stimulated with IL-1β to mimic a cell model of OA.

Articular cartilage is composed of the ECM, which consists of collagen II and aggrecan. Collagen is interwoven to form the network structure of chondrocyte

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**Figure 3.** Silencing of TBK1 inhibited ECM degradation in OA cell model. ATDC5 cells were treated with various doses of IL-1β for 12 h, after which (a) mRNA and (b) protein levels of TBK1 were analyzed by qRT-PCR and Western blotting, respectively. ATDC5 cells were transfected with siTBK1 or siNC and then stimulated with 10 ng/ml IL-1β for 12 h. (c) mRNA and (d) protein levels of TBK1 were detected by qRT-PCR and Western blotting, respectively. (e) Matrix-degrading enzymes (ADAMTS-4, MMP3, MMP13), and (f) ECM-related molecules (SOX9, collagen II, aggrecan) were analyzed by Western blotting. *p < 0.05.

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**Figure 4.** TBK1 activated JAK/STAT signaling. (a) KEGG analysis for the following signaling pathways of TBK1. (b) KEGG analytical results showed the positive regulation of TBK1 on JAK/STAT signaling. (c) ATDC5 cells were transfected with the pcTBK1 overexpression plasmid, siTBK1 or the negative controls. Phosphorylation of JAK1, JAK2 and STAT3 was detected by Western blotting.
ECM. Collagen II and aggrecan can be regulated by SOX9 which has been identified as a key transcription factor for the regulation of cartilage ECM production [24,25]. ECM degradation is a manifestation of OA [26]. In the current study, ECM degradation was found in IL-1β treated ATDC5 cells, as matrix-degrading enzymes (ADAMTS-4, MMP3, and MMP13) were significantly upregulated, while ECM-related molecules (SOX9, collagen II, and aggrecan) were downregulated. More importantly, silencing of TBK1 was found to be effective in attenuating ECM degradation. Previously, TBK1 has been studied as a key transducer of the innate immune response and inflammation [27]. However, its role in bone-related diseases, including OA, has not been elucidated. Herein, we suggest for the first time the potential effects of TBK1 in OA, suggesting that TBK1 is a novel target for this disease.

JAK is a non-receptor protein tyrosine kinase family consisting of JAK1, JAK2, JAK3 and TYK2 [28]. JAK1, JAK2 and TYK2 are widely expressed in various tissues and cell types, but JAK3 expression is limited in the bone marrow and lymphatic system [29]. STAT is a family of cytoplasmic proteins that plays a critical role in transcription activation. It consists of seven family members, including STAT1, STAT2, STAT3, STAT4, STAT5a, STAT5b and STAT6. Numerous cytokines lead to the activation of JAK and trigger STAT phosphorylation [30]. In this study, JAK/STAT signaling was revealed to be a downstream signaling of TBK1. TBK1 was able to activate JAK1, JAK2, and STAT3. Moreover, by transfection of cells with STAT3 overexpression plasmid, we revealed that TBK1 silencing exerted its anti-OA functions, possibly by regulating JAK/STAT signaling.

**Conclusion**

TBK1 was found to be highly expressed in the OA model. Lentivirus-mediated TBK1 silencing attenuated ECM degradation. The beneficial function of TBK1 silencing might be due to the regulation of JAK/STAT signaling. These findings suggest that TBK1 is a potential target for OA treatment.

**Abbreviations**

TANK-binding kinase 1 (TBK1), osteoarthritis, extracellular matrix (ECM), anterior cruciate ligament transection (ACLТ), non-steroid anti-inflammatory drugs (NASIDs)

**Disclosure statement**

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

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**Ethics approval and consent to participate**

The experimental protocol of our study was performed in accordance with the Guide for the Care and Use of Laboratory Animals and approved by the Tianjin Medical University General Hospital.

**Availability of Data and Material**

The datasets used and analyzed during the current study are available from the corresponding author on reasonable request.
Author contributions
Peng Sun designed the experiment; Peng Sun and Yuan Xue performed the research; Yuan Xue analyzed the data; Peng Sun wrote the paper.

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