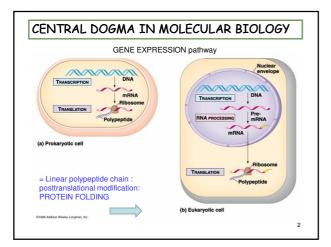
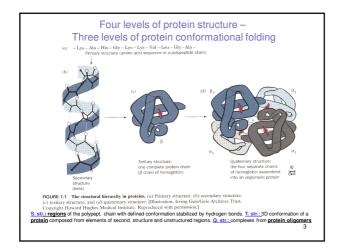
PROTEIN FOLDING and MISFOLDING, DISEASES ASSOCIATED WITH PROTEIN MISFOLDING & AGGREGATION

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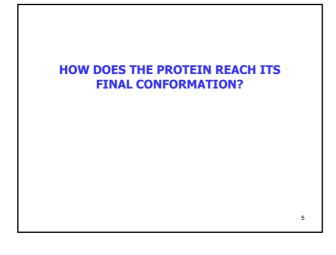


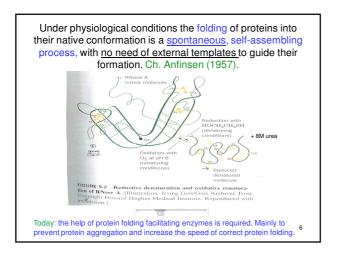




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POLYPEPTIDE CHAIN FOLDING

1) WHY?

THERMODYNAMICS

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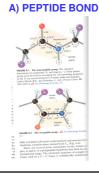
2) HOW?

STRUCTURE BUILDING RULES and SPACE RESTRICTIONS; NONCOVALENT INTERACTION STABILIZATION

WHY is the folding taking place?

- Spontaneous = driven thermodynamically; the folding obeys laws of thermodynamics: to achieve <u>the lowest</u> <u>energetic state</u> for the given primary structure of the polypeptide chain under present (physiological) conditions and in an acceptable time period (seconds) => is accompanied by the reduction of free energy and/or increase in entropy:
 - A + B =>>> AB + energy (heat, entropy) until the native state is reached. The folding/conformation is thus determined by the sum of interatomic interactions within given <u>AMINO ACID SEQUENCE</u>
- To attain the shape evolved by <u>natural selection</u> for the particular biological function

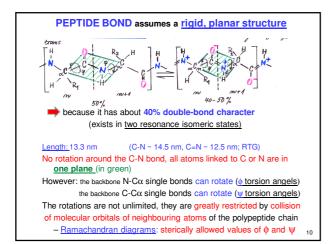
HOW do proteins reach their native 3D conformation from their primary structure? *Starting points:*



Two conformations: (i) TRANS-Peptide bonds (groups), with few exceptions, assume the trans-conformation that in

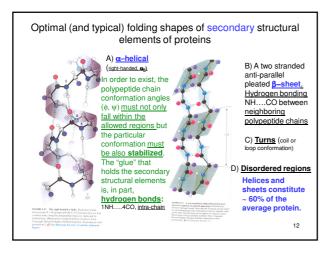
assume the trans-conformation: that, in which successive $C\alpha$ atoms are on opposite sides of the peptide bond joining them.

(ii) CIS-

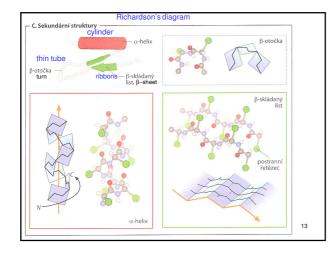


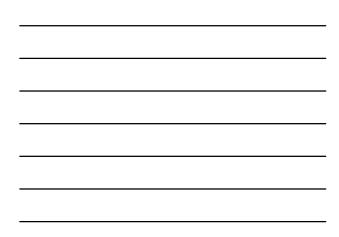


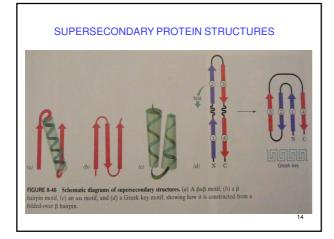
What folding shapes/structures may a polypeptide chain attain that would be optimally compatible with the sterically allowed values of ϕ and ψ ?











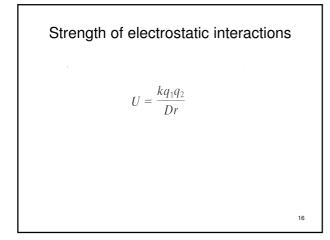


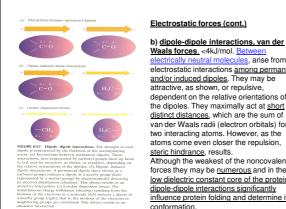
Noncovalent forces leading to protein folding into secondary structure elements and 3D conformation and contributing to protein's stability

NONCOVALENT ("WEAK") INTERACTIONS: 4-29 kJ/mol

1) Electrostatic forces

a) <u>ionic</u>, ionic or salt linkages, 4-25 kJ/mol. <u>Between</u> <u>charged groups</u>. Even though comparatively strong, their contribution to the stability of proteins in aqueous solutions is low due to a high dielectric constant (D=78,5) of water. Those on the surface of a protein do not usually interact with other charged groups of the protein but instead are stabilized by hydrogen bonding and polar interactions with water molecules. Asp-COO⁻⁺NH₃-Lys etc





Electrostatic forces (cont.)

Waals forces. <4kJ/mol. Between electrically neutral molecules, arise from electrostatic interactions <u>among permanent</u> and/or induced dipoles. They may be attractive, as shown, or repulsive, dependent on the relative orientations of the dipoles. They maximally act at <u>short</u> distinct distances, which are the sum of van der Waals radii (electron orbitals) for two interacting atoms. However, as the atoms come even closer the repulsion, steric hindrance, results. Although the weakest of the noncovalent forces they may be <u>numerous</u> and in the low dielectric constant core of the protein, dipole-dipole interactions significantly influence protein folding and determine its conformation. 17

Electrostatic forces (cont.) c) hydrogen bonds. H bonds, 12-40 kJ/mol, (4-29 kJ/mol), with ~10% covalent character. Between a weakly acidic donor group (D-H) and an acceptor (:A) that bears a lone pair of electrons. D-H......:A; <u>H (~proton) is "shared" by the two atoms</u> ~0.27-0.31 nm

In biology donors "D": weakly acidic O-H, N-H; S-H; rel. acidic C_α-H acceptors "A": highly electronegative :O, :N; :S; E.g. H bonds in α-helices and antiparallel β pleated sheets in proteins: N-H...-O-C (atoms of peptide bonds!) (in ideal α-helices between D and A at residues *n* and *n-4*, (*n-3*), respectively)

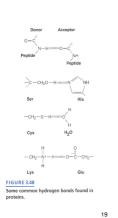
Many of the H bonds in proteins are members of networks in which each donor D is H bonded to two acceptors (a bifurcated hydrogen bond) and each acceptor A is H bonded to two donors.

On average, 68% of the H bonds in proteins are between backbone atoms: α -helices (1/3), 3¹⁰ helices (1/3), β pleated sheets (1/3). Only ~5% of the H bonds between backbone atoms are not wholly within a helix, sheet or turn.

Electrostatic forces (cont.) c) hydrogen bonds, H bonds (cont).

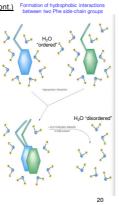
The strength of a hydrogen bond depends on the distance between donor and acceptor atoms (the highest is at a distance between 0.27 and 0.31 nm).

0.27 and 0.31 mm. Although the H bonds <u>contribute to</u> thermodynamic stability of a protein's <u>conformation</u>, their formation <u>may not be a</u> <u>major driving force for folding</u>. This is because peptide bonds and other hydrogen-bonding groups form H-bonds to the water solve (water is a strong H bonding donor and er solvent acceptor) from the protein before its folding (in a denatured state) and the energy required to brake them must be subtracted from that gained from formation of new H-bonds in the protein. As the H-bonds are electrostatic they are likely to be stronger in the low polarity protein interior than on the high polarity , aqueous surface.



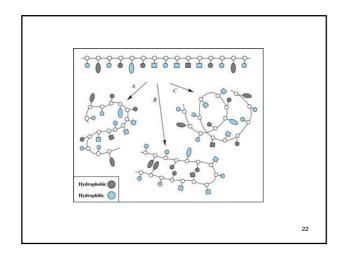


is not due to any intrinsic attraction between nonpolar groups. Rather: When two nonpolar side chains come together, the surface area exposed to solvent is reduced and some of the highly ordered water molecuand some of the highly ordered water molecu-les in the solvation shell are released to bulk solvent. The entropy of the system (i.e. net dis-order of water molecules in the system) is Increased. The INCREASE IN ENTROPY is thermodynamically favorable and IS THE DRIVING FORCE CAUSING NONPOLAR MOIETIES TO COME TOGETHER in aqueous solvent. A favourable Gibbs free energy change Acre 8.5 k (mol for acception of two Pape aid $\Delta G{\sim}\text{-}8.5$ kJ/mol for association of two Phe side chains in water is due to this gain in entropy (Fig.)

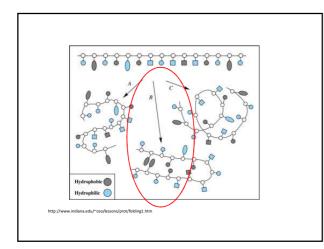


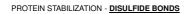
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2) Hydrophobic forces (cont.)	Side Chain	Hydropathy	
ndividual amino acids can be scaled	Ile	4.5	
according to the hydropathies	Val	4.2	
hydropathic and hydrophilic	Leu	3.8	
endencies) of their side chains; they	Phe	2.8	
are good predictors of which portions	Cys	2.5	
of the polypeptide chain are inside of	Met	1.9	
he protein, and which outside in	Ala	1.8	
contact with the aqueous solvent.	Gly	-0.4	
	Thr	-0.7	
N. Kauzmann (1958):	Ser	-0.8	
	Trp	-0.9	
TYDROPHOBIC FORCES ARE A	Tyr	-1.3	
MAJOR INFLUENCE IN CAUSING	Pro	-1.6	
	His	-3.2	
PROTEINS TO FOLD INTO THEIR	Glu	-3.5	
NATIVE 3D-CONFORMATION	Gln	-3.5	
	Asp	-3.5	
Protein folding is directed mainly	Asn	-3.5	
by internal residues.	Lys	-3.9	
	Arg	-4.5	

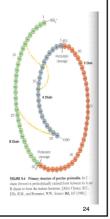




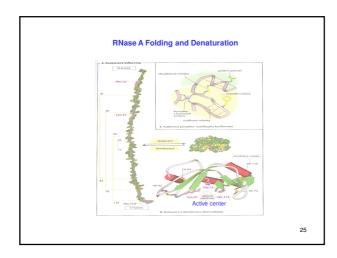


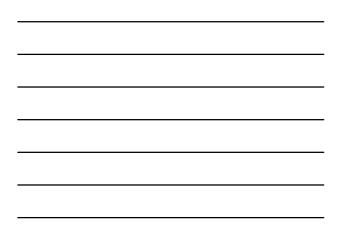


Formation of disulfide bonds Cys-S – S-Cys is not efficient in the cytoplasm due its relatively reducing character. They are <u>formed in ER</u>, which has an <u>oxidizing environment</u>, as a protein folds into its native conformation. Disulfide bonds give <u>additional 3D structural stability</u> to proteins destined primarily for secretion into more oxidized, "hostile", extracellular destinations with e.g. uncontrolled temperatures or pH and before further protein processing/maturation, e.g. removal of a prosequence structure (Fig.)









Summary - protein folding and stabilization

The process of transformation of a randomly ordered (denatured) polypeptide chain into a regular secondary structure (α -helix, β -sheet) results in the release of ~1/3 of the solvation shell water into the bulk solvent. This represents the release of ~2-4 kJ/mol/aa residue.

The additional 1/3 of water molecules is released from the polypeptide solvation shell when the native 3D conformation is achieved. By this way the native conformation of a protein reaches the one of the lowest Gibbs free energy accessible to its sequence within a physiological time frame. Thus folding is under thermodynamic and kinetic control.

Despite that all, the conformational stabilities of native proteins are low making them easily Despite that all, the <u>conformational stabilities of native proteins are low</u> making them easily susceptible to denaturation by altering the balance of weak stabilizing forces (e.g. by heat, chemicals-detergents, pH). This marginal stability of most proteins under physiol, conditions (~1.7 kJ/mol/aa res.) is an essential property that has arisen through <u>evolution of function</u> – to be flexible enough to carry out their physiological functions. [Average kinetic energy of thermal movement is ~2.5 kJ/mol at 37°C. Association energy of the covalent bond ~>-250 kJ/mol]

Some proteins may have two (more?) different stable conformations (prions). Their certain regions ("chameleon r.") may adapt either helical or sheet structure dependent on the context of the surrounding. See later. 2 26

Folding pathways -Levinthal paradox

What is the way a protein takes to fold to its native conformation? A protein randomly explores all of the available, "allowed", conformations to it until it eventually "stumbles" onto its native conformation? Calculations of C. Leventhal: this cannot be the case!

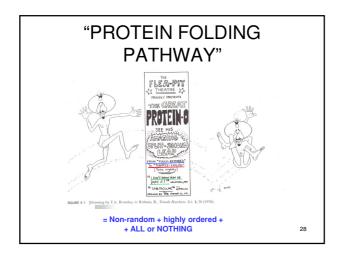
Assume that the 2*n* backbone torsional angles, **e** and **v**, of an *n*-residue protein each have (only) three stable conformations. This yields 3^{en} ~ 10ⁿ possible conformations for the protein, (which is a gross underestimate, if only because the side chains are ignored). If a protein can explore new conformations at the rate at which single bonds can reorient, it can find ~ 10¹³ conformations per second (an overestimate).

For a <u>small protein of *n* = 100 residues the time *t*, in seconds, required to explore all the conformations available to it is:</u>

 $t = 10^{100} : 10^{13} . sec^{-1} = \frac{10^{87} s !!!!}{10^{10} s !!!!}$

This is immensely more than the apparent age of the Universe (~15 billion years = 4.5 . 10¹⁷ s) !

Proteins must fold in an ordered manner rather than via a random search of all their possible conformations. Each protein species appears to have evolved a conserved and simplified pathway of 27 folding.



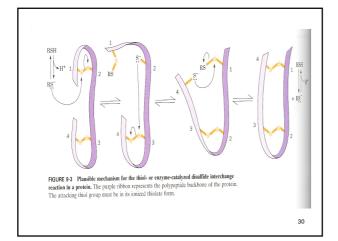


A similar paradox also exists concerning the <u>formation of correct</u> <u>disulfide bridges in the protein.</u> E.g. the overall probability of RNase A reforming its <u>four native disulfide</u> linkes at random is

$$\frac{1}{7} \times \frac{1}{5} \times \frac{1}{3} \times \frac{1}{1} = \frac{1}{105}$$

=> the RNase is only about 1% enzymatically active. It can be made fully active by exposing it to a "trace" of 2-mercaptoethanol, the reducing agent. However, a 10-h period is required in contrast to the <u>native environment when it takes only</u> minutes. Here, additional proteins, enzymes, e.g. protein disulfide isomerase (PDI), that <u>catalyze and accelerate disulfide interchange reaction</u> to <u>attain</u> thermodynamically more favourable conformations, are active (Fig.).

Clearly, the disulfide bonds from RNAse A do not reform at random. Protein disulfide isomerases.





3D-FOLDING PATHWAYS (very complex, still not fully understood)

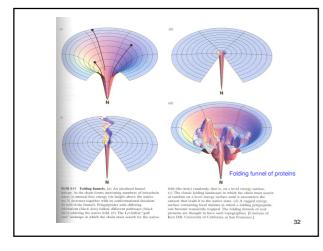
1) "Hydrophobic collapse" – the protein's <u>hydrophobic groups coalesce</u> so to expel most of their surrounding water molecules.

- > 5 ms. This initial state is known as the molecules.
 + formation of local secondary structure elements
 2) Intermediate folding events. The native-like elements are thought to take the form of subdomains, etc. 5 1000 msec. Cooperativity.

3) Final folding events. Complex. Several seconds.

The folding follows an energy surface or landscape-folding funnel that represents the energy states available to a polypeptide under the prevailing conditions. Polypeptides fold via a series of conformational adjustments that reduce their free energy and entropy until the native state is reached (Fig.).

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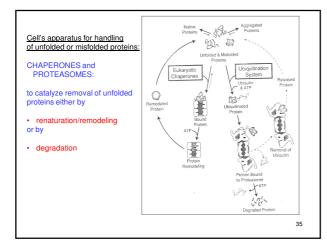
ENZYMES OF THE CELL NATURALLY FACILITATING CORRECT PROTEIN FOLDING

A)Protein disulfide isomerases: S-S bridges

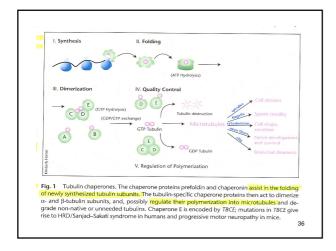
B)Peptidyl prolyl cis-trans isomerases: Xaa-Pro peptide bond conformation. Almost all the bonds are in the trans conformation; ~10% in the cis

C) Molecular chaperones: function to prevent or reverse improper C) Molecular chaperones: function to prevent or reverse improper associations/aggregations of polypeptide chain regions, particularly in multidomain and multisubunit proteins. They do so by binding to unfolded or aggregated polypeptide's solvent-exposed hydrophobic surfaces and subsequently releasing them, in a manner that facilitates their proper folding and/or 4D assembly. Pathological associations in vivo are promoted by the fact that the folding takes place in the presence of extremely high concentrations of that the folding takes place in the presence of extension in the folding takes place in the presence of extension in the presence of Many molecular chaperones are ATPases, requiring ATP for its function. Heat shock proteins, Hsp, chaperonines, etc. Energy-dependent process.

Folding into a compact conformation seems to be the main selective pressure against misfolding









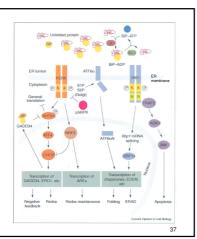
Pathology: UNFOLDED PROTEIN RESPONSE:

The capacity of the cell's unfolded protein control systems was exceeded:

GENE SIGNALLING PATHWAYS ACTIVATED BY UNFOLDED PROTEIN ACCUMULATION

= to cope with this risky condition by activating an effective response

BiP = chaperone ERAD = endoplasmic reticulum-associated degradation





ABNORMALITIES IN PROTEIN FOLDING AND ASSEMBLY MAY BE IMPORTANT MECHANISMS OF **DISEASES – CONFORMATIONAL DISEASES**

A) Protein degradation due to incorrect folding caused by mutation

CYSTIC FIBROSIS - the most common recessive genetic disease in the Caucasian population (1:2000)

Defective CFTR (cystic fibrosis transmembrane regulator): glycoprotein, 1480 aa, Clmembrane transporter in epithelial cells; DEFECT: deletion of Phe 508 (70%)

Clinic: highly viscous mucus that blocks the small airways in the lungs – persistent infections, death at ${\sim}30y.$ (Meconium ileus in newborns!).

Pathogenesis: deletion of Phe 508 results in an improper posttranslational Processing of oligosaccharide chains in ER => improper postarianautina => degradation by proteolytic surveillance system (proteasomes). DESPITE the fact that the MUTATED CFTR retains almost FULL biological activity!

(Treatment? Indian spice turmeric (curcumin) - mouse cell culture)

Uncontrolled protein aggregation due to protein's conformational change is a constant challenge in all compartments of living organisms. The failure of a peptide or protein to remain soluble may result in pathology. So far, more than 40 human diseases, often fatal, have been associated with aggregation of certain peptides/proteins, first into still soluble protein oligomers and then into insoluble amyloid fibrils. Fig. Amyloid fibrils form deposits extracellularly (amyloid plaques) and /or intracellularly (tangles). Figs.

• Amyloid: protein fibrils exhibiting a cross-β-core structure and specific staining characteristics with diagnostic dyes (thioflavins S and T, Congo red)

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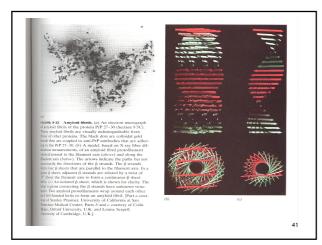
B) Protein/peptide aggregation into protein oligomers and amyloid fibrils

(ii) due to mutation (ii) due to increased production of amyloidogenic peptides (iii) due to intrinsic susceptibility to alternative folding (prions)

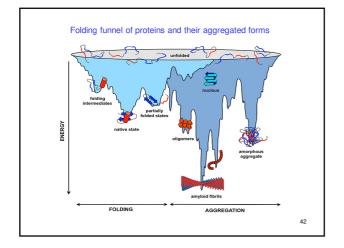
- Aggregation" diseases include
 <u>amyloidoses</u> deposition of fibrilar form of often mutant proteins in heart, liver, or kidney interferes with cellular function, resulting in cell death or organ failure (type 2 diabetes)
- (type 2 diabetes) <u>neurodegenerative diseases</u> Alzheimer d., Huntington d., Parkinson d., transmissible spongiform encephalopathies (TSEs). <u>The exact pathogenesis is not fully understood, but it now appears that in at</u>

least neurodegenerative d., the steps/protein forms = soluble protein oligomers, before their deposition into fibril plagues, induce toxic effects.

Various types of amyloidogenic proteins are unrelated and their native forms have widely different folds but their amyloid forms-fibrils have remarkably similar core structures: Each consists of an array of self-assembled filaments, 0.1-10µm long and 10 nm vide, formed from limited portions of proteins/peptides in the β-sheet forms with extensive hydrophobic interactions, their β-strand chains running perpendicular to the long axis of the fibril: the cross-β structure, cross-β spine.









Ad B (i): AMYLOIDOSES Aggregation due to protein mutation

Many aggregation-prone/amyloidogenic proteins are <u>mutant</u> forms of normally occurring proteins. These include e.g. lysozyme in the disease familial visceral amyloidosis, transthyretin in familial amyloid

transthyretin in familial amyloid polyneuropathy, fibrinogen in hereditary renal amyloidosis, immunoglobulin light chain AL in primary myeloma, cystathion β -synthase in homocysteinuria, etc.

Most such diseases do not become symptomatic until the 3^{rd} to 7^{th} decades of life and typically progress over 5 to 15 years ending in death.

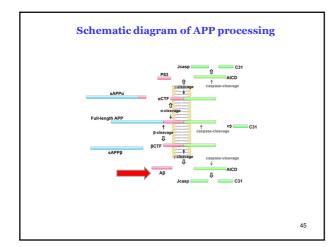


FIGURE 9-33 Super and its D67H mutant 43

Ad B (ii): ALZHEIMER DISEASE (AD) Aggregation due to an increased production? of an amyloidogenic peptide

<u>Clinic</u>: mainly elderly: 10% over 65y, 50% over 85y; progressing dementia, death after 4 – 8 years after diagnosis. The *most prevalent neurodegenerative disease*.

(Treatment: to block the secretases?)





 Pathogenesis: neurotoxic agents in AD are most likely soluble

 prefibrillar aggregates/oligomers of Aβ before their deposition in amyloid

 plaques (microinjection exp.- rhesus monkey).

 • Aβ oligomers bind to neuronal synapses.

 • Δβ oligomers bind to neuronal synapses.

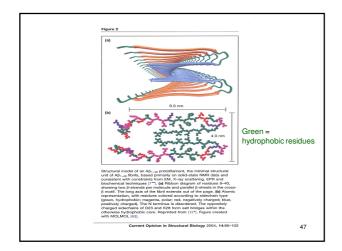
Aβ oligomers stimulate Tau phosphorylation => collapse of the microtubule network.

Whereas A β plaques do not correlate with cognitive decay, the tau neurofibrilary tangles do. Memory deficit is usually diagnosed only after the plaques had already reached their plateau!

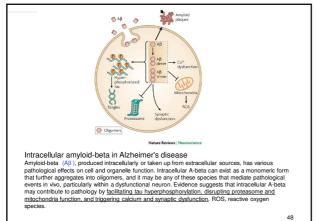
 $A\beta$ has a vastly different organization in oligomers than in plaques.

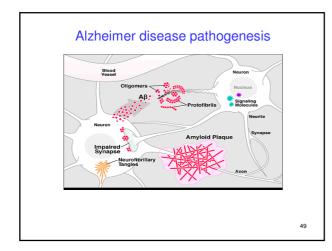
Enhanced expression of α -1-antichymotrypsin promotes A β polymerization.

 $\label{eq:accelerated production of A\beta} \begin{array}{l} \hline \mbox{Mutants of APP} & - accelerated production of A\beta \\ \hline \mbox{Down sy} & - accelerated production of A\beta \\ \mbox{apoE4 variant of apolipoprotein E (carrier of cholesterol). The main risk factor.} \end{array}$

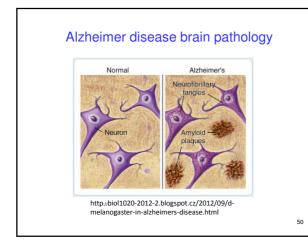












2013: Amyloid beta: Friend or Foe?

- L. Steinman: "Amyloid Aβ is highly therapeutic in a <u>mouse model of</u> multiple sclerosis, in models of stroke, brain trauma, optic nerve ischemia, myocardial infarction and brain trauma. Injections of amyloid made semi-paralyzed multiple sclerosis mice walk."
 "Low amyloid correlates with early cognitive decline?"
- S. Soriano: "Amyloid as a protective molecule against a variety of stresses? A. helps counteract the impact of cholesterol dysregulation." .
- . Mouse models: Fibril-forming six-amino-acid portions of several amyloid-forming proteins incl. amyloid beta appear to be working to remove dangerous chemicals involved in inflammation and immune response from the vicinity of injury. XXXXXX .
- •
- Three big anti-amyloid trials examining therapeutic effect of drugs = complete antibodies targeting amyloid beta = failed or were halted due to side effects. <u>However</u>: injection in mouse models of Alzheimer disease of <u>antibody fragments</u> consisting of active parts (trapping the etiological agent = amyloid beta oligomers) of one recombinant antibody, called bapineuzumab: 1) cleared from the mouse cerebral context the A-beta oligomers, 2) <u>learning and memory deficits were ameliorated.</u> 3) the levels of certain lipoproteins suspected to be the natural removers of A/beta peptide aggregates were recovered.

Scientists reveal how beta-amyloid may cause Alzheimer's ? (2013):

Carla Shatz: Beta-amyloid Aβ binds to mouse PirB (and, the researchers proved, to its human analog, LilrB2), boosting cofilin activity and busting synapses' structural integrity.
 Cofilin works by breaking down actin, a building-block protein essential to maintaining synaptic structure.

"No actin, no synapse," Shatz said.

PirB: a nerve cell surface protein ordinarily situated very close to synapses. PirB is a high-affinity receptor for beta-amyloid in its "soluble cluster" form, meaning that soluble beta-amyloid clusters stick to PirB quite powerfully. The PirB-lacking Alzheimer's mice were protected from the beta-amyloid-generating consequences: resistant to the memory breakdown and synapse loss.

AB also binds to RAGE (receptor for AGE) which activates inflammation processes.

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Deposition of A\beta is not limited to AD. A\beta plaques have been observed in vascular dementias, Parkinson disease with dementia, Levy body dementia as well as in the brains of aged individuals without any cognitive deficit.

Neuronal proteins such as tau, CE-B1-synuclein, and polyglutamine

aggregates, which are causally implicated in the neurodegenerative disorders Alzheimer's disease, Parkinson's disease, and Huntington's disease, respectively, can be released from donor cells and taken up by neighboring acceptor cells

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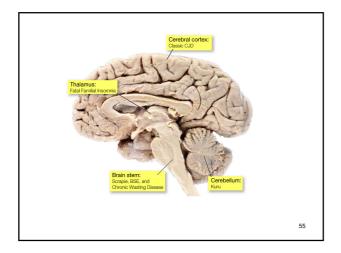
Ad B (iii): PRION DISEASES - infectious, transmissible origin of the protein misfolding and aggregation is its intrinsic susceptibility to alternative folding a) Scrapie – 1732, sheep, goats; ataxia; transmission by ingestion of the feed from the diseased sheep

- b) Creutzfeld-Jacob disease (CJD), per
- sporadic 1920, 85%, (1:1 million/y; 5-10 cases/y in the Czech rep.), progri loss of memory & skill, depression, gait stability problems, speech problems, paralysis, + 0,5(5y) familial 10-15%, hereditary mutation, "Oravian kuru"; Fatal familiar insomnia;
- iatrogenic cornea transplantation, surgery instruments, growth hormone,
- gonadotropin therapy (~100 cases) c) Kuru Papua, New Guinea people (cannibalism, brain); w loss of coordination, trembles. Daniel Carleton Gajdusek: -17 1966 - infectious disease! (long incubation period, death exp. on to chimpanzees

in 3–9 months) 1976 Nobel Prize



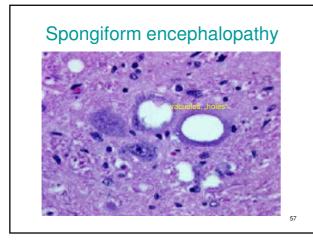
feeding cattle by meat & bone meal from scrapic sheep? A new variant of CJD – GB, 1955, young people (+ 20 years), due to ingestion of (nerve) tissues from BSE cows (> 30 months old) = Zoonotic. Loss of communication. e)





ALL of the diseases are fatal, (have similar symptoms), there is no cure. <u>Neurons develop large vacuoles</u> that gives brain tissue a spongelike microscopic appearance:

TRANSMISSIBLE SPONGIFORM ENCEPHALOPATHIES (TSE).



<u>1984: Stanley Prusiner</u>-isolated the infectious particle of scrapie disease and called it <u>prion</u> (for *pr*oteinaceous *in*fectious particle): <u>PrPsc</u>

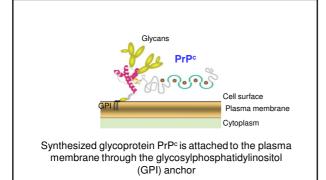


The scrapie particle is a **new kind of infectious agent**, one that <u>does not</u> <u>need a nucleic acid to replicate</u>. It is a single species of

MISFOLDED BODY PROTEIN PrPc !

NEW PARADIGM IN MOLECULAR BIOLOGY!

(Now we know that we can die from an infection by a misfolded protein only, no genes are required !?)

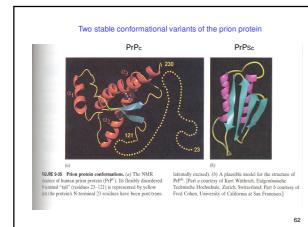


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- PrPC is a normal protein (prion protein) found on the membranes of cells. It is an expression product of a prp^C gene. PrP^C has 208/209 <u>amino acids</u> (in humans) -after posttranslational modification (from 253 aa), one <u>disulfide</u> bond, a molecular mass of 35–36 <u>kDa</u> and a mainly <u>alphahelical</u> structure. PrP^C is readily digested by proteases (incl.proteinase K) and can be degraded into amino acids. It can also be liberated from the cell surface *in vitro* by the enzyme <u>phosphoinositide phospholipase C</u> (PI-PLC), which cleaves the <u>glycophosphatidylinositol</u> (GPI) glycolipid anchor.
- PrP^C function is not fully known: roles in cell-cell adhesion and intracellular signaling *in vivo*?, cell-cell communication in the brain?, biological clock?, memory?
- PrP^c is highly conserved through mammals and expressed in all vertebrates as well as invertebrates.

- <u>Prions = PrP^{sc}</u> are the infectious <u>isoform</u> of the prion protein PrP^C. PrP^{sc} are not considered living organisms but are misfolded protein molecules which may propagate by transmitting a <u>misfolded protein</u> state.
- PrP^{Sc} has a different secondary and tertiary structure from PrP^C but identical primary sequence. The exact 3D structure of PrP^{Sc} is not known but it has a higher proportion of <u>β-sheet</u> structure in place of the normal <u>αhelix</u> structure (43%:30%) than PrP^C (3%:43%). Fig.
- Aggregations of these abnormal isoforms form highly structured <u>amyloid</u> fibers, which accumulate to form plaques. These aggregates are considered to be the cause of cell damage.
- Prions are species specific (have different strains) with different stable conformations.



Prions PrPSc

are (due to different space configuration):

resistant to

proteases (proteinase K, **body** proteases) – only partial hydrolysis, heat, boiling, UV radiation, $\underline{H_2O_2}$, $\underline{I_2}$, ethanol, lysol, peracetic acid and formalin treatments.

degraded by

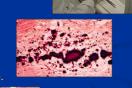
concentrated bases (NaOH, KOH), NaCIO (SAVO), water steam (for 20 min., 3 bar, 135°C)

keratinase

Prion detection

- Reaction of prion-containing tissue digested with proteinase (K) with an antibody against PrP^{Sc} (immuno-elfo)
- Histological examination of the brain
- Biological tests on mice, (+genetically modified mice).
 Syrian hamster.

PMCA



Tests: with blood, urine, brain, meat and lymphatic tissues

Prion Propagation

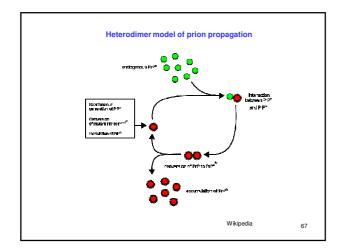
Current research suggests that the primary method of infection in animals is through ingestion. It is thought that prions may be deposited in the environment through the remains of dead animals and via urine, saliva, and other body fluids. They may then linger in the soil by binding to clay and other minerals.

Movement of prion proteins from ER (the site of their origin), via Golgi and cytosol to the cell membrane is mediated by vesicular transport. This also applies to infectious prion particles or, it can be carried out by endocytic vesicles for prions formed in the cell membrane. Transport of prions from the cell is apparently carried out by an extracellular form of the vesicles called exosomes. Viruses employ the same system of vesicles to reconstitute their particles and to get out from the cell and infect new cells. Viruses are in exosomes protected against the attacks of immune system. It was shown that they can also accept prions and further promote their propagation from cell to cell.

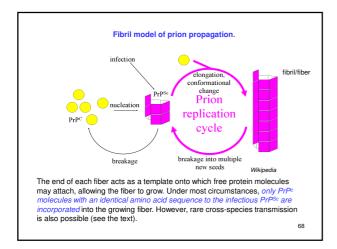
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HYPOTHETICAL PATHOGENESIS OF PRION DISEASES - PRION HYPOTHESIS

- Prion protein PrP^c converts into infection prion PrP^{Sc} due to spontaneous? change of the PrP^c conformation. (Under normal conditions the spontaneously converted forms of PrP^c are apparently eliminated by the protein folding quality control system of the cell).
- The PrP^c --> PrP^{sc} conversion becomes highly accelerated by exogenous PrP^{sc} ("chain reaction", Figs). PrP^{sc} is a stable conformational variant of normal PrP^c (Fig.).
- 3) To develop into a disease the expression of the corresponding normal PrP^c prion protein is required. Animals that do not express the normal form of the prion protein can neither develop nor transmit the disease.
- 4) All known prions induce the formation of an amyloid fold, in which the protein polymerises into an aggregate consisting of tightly packed beta sheets. Amyloid aggregates are fibrils, growing at their ends, and replicating when breakage causes two growing ends to become four growing ends. This altered structure is extremely stable and accumulates in infected tissue, causing tissue damage and cell death. 66









The most infectious prion appears to be a particle composed of 14-24 PrP monomers (~300-600 kDa). Brain tissue from CJD victims contains a protein that cross-react with Ab raised against $\underline{PrP^{sc}}$.

The inherited prion diseases can be diagnosed by finding mutation in the prion protein gene. No such pathogenic mutations are present in sporadic and acquired prion disease. A common PrP polymorphism at residue 129, where either methionine or

valine can be encoded, is a key determinant of genetic susceptibility to acquired and sporadic prion diseases, the large majority of which occur in homozygous individuals.

Typically, no signs of inflammation or fever are present in CJD.

GPI anchor-less form of the infectious prion (as a special *PrP^{Sc}* strain) is typical for the Gerstmann-Sträussler-Schinkler sy. Brains of genetically modified mouse models of this disease are free of vacuoles (no sponge-like appearance) but display a picture of a typical cerebral amyloid angiopathy, similar to AD brain situation. The mice further suffer from clotting of lymphatic veins by freely floating GPI-free prions.

Treatment?

 Heterologous PrP molecules, which differed by as little as one residue, interfere with the generation of PrP^{Sc} in scrapie-infected mouse cells (Priola et al. 1994) => interaction between dissimilar PrPSc and PrPc

molecules (= have different aa sequence) might slow the aggregation and accumulation of PrPSc by interfering with the interaction of similar PrP monomers.

To design a molecule that binds to prion protein and stabilizes its normal shape, thereby preventing propagation of the disease.

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Alzheimer's	Αβ	[Psi+]veast	Sup35	Huntington	Huntingtin	Repeats of G
Alzheimer's and tauopathies	Tau	[Ure2]	Ure3	Parkinson's	α-synuclein	
Diabetes II	Amylin	CJD	PrP	ALS (Lou Gehrig's)	Superoxide dismutase	
Injection amyloidosis	Insulin	BSE (mad cow)	PrP			
Dialysis amyloidosis	β2-micro- globulin					
Senile amyloidosis	Trans- thyretin					
Hereditary cystatin C amyloid angiopathy	Human Cystatin C					
		all and a second se				
Table 1. Am ome of the a	amyloid-as	sociated d	iseases ar	diseases. T nd the prote e amyloid	in that aber	-

SUMMARY

Prions PrPSc are infectious, species specific strains of proteins, that are responsible for a number of fatal mammalian diseases. They are highly protease-resistant and thus easily transmissible by ingestion. PrPsc are toxic to neurons and as such causative agents of transmissible by Ingestion. PIPer are toxic to hearbins and as such causative agents of transmissible spondform encephalopathies (TSEs). TSEs have been described in a number of species such as mink (TME), cat (FSE), elk (CWD) and of course sheep (scrapie), cattle (BSE) and humans (CJD). Normally, interspecies transmission of different PrP^{Se} strains doesn't induce the disease except the sheep-cattle (BSE) and recent cattle-human (new variant CJD) transmission avoid.

transmission events. To develop into a disease the spontaneously generated/ingested/inoculated PrPs

To develop into a disease the spontaneously generated/ingested/inculated PrPse molecules must increase in number. They propagate themselves by <u>converting cellular</u> <u>PrPs</u> into <u>PrPse</u>. The conversion mechanism has not been elucidated. Infectious PrPse molecules originate from native, naturally occurring non-infectious cellular protein PrPse by a <u>spontaneous change in its conformation or induced</u> <u>change by an introduced PrPse</u>. Clearly, <u>infectious PrPse</u> is a <u>mistolded B-sheet-rich</u> form of <u>PrPs</u>. This conformational conversion of some regions of <u>PrPs</u> gives the protein a fibrillogenic/amyloidogenic character leading to its aggregation into insoluble plaques. It appears that just the plaques are the toxic agents causing the pathclony <u>PrPse</u> can be transmitted from cell to cell

pathology. PrPSc can be transmitted from cell to cell.

SUMMARY (cont.)

Genetically well-defined prion proteins were also found in yeast. Critical for establishment and propagation of yeast prion aggregates are the prion-forming domains (PrD), which are rich in glutamines (Q) and asparagines (N). *In vitro*, the individual PrDs are able to spontaneously undergo conformational rearrangement ("chameleon" regions) in the absence of any other proteins or nucleic acids, to generate highly stable amyloid fibrils. One such fibril forming motif in the N-terminal domain of the best documented yeast prion. Sup 35 (translation termination factor) is a seven residue peptide, GNNQQNY. (G-Gly; Q-Gln; Y-Tyr). It forms amyloid-like fibrils and also closely related microcrystals. The X-ray diffraction analysis of the microcrystals allowed to determine the first fully objective atomic structure of the cross- β spine. The structure consists of the peptide molecules, each an extended strand stacking on each other to form parallel, in register sheets. The strunds which the sheard to above and below it in its sheet, using both main chain and by N- and Q- side-chains to form <u>a steric zipper</u> with strong van der Waals contacts and, less firmly, at Y residue by bridging water molecules (Fig.). In the Af model protein (from AD) the strong interaction at the sheet interfaces is provided by hydrophobic amino acid residues (Fig.). The basic building block of the fibril is a <u>pair of B-sheets. Yeast's prions</u> do not appear to cause disease in their hosts. Investigations of the yeast prion system suggest that <u>molecular</u> 74

In conclusion:

C. Dobson: "Peptides or proteins convert under some conditions from their soluble forms into highly ordered fibrilar aggregates. <u>The ability to form the amyloid</u> structures is an inherent or generic property of polypeptide chain atthough the propensity to do so varies dramatically. Such transitions can give rise to pathological conditions ranging from neurodegenerative disorders to systematic anyloidosis".

"Living organisms can take advantage of this ability to generate novel and diverse biological functions "(e.g. a domain of the human Pmel17 protein: it forms, inside melanosomes, fibrous striations upon which melanin granules form; yeast's Sup 35 enables the survival under changing conditions, simply by protein conformational change = the <u>guick adaptation-epigenetic mechanism</u>, before change in DNA).

"In light of the fact that cells have evolved protein folding quality control systems (chaperons and proteasomes), how prions managed to survive and replicate *in vivo* is puzzling".

Acknowledgements

The illustrations in this presentation were mainly reproduced from D. Voet and J.G. Voet, Biochemistry, 3rd Edition, J.Wiley & Sons, Inc. 2004 and from the Textbook of Biochemistry with Clinical Correlations (T.M. Devlin, ed.), 6th Edition, Wiley –Liss, Hoboken, 2006. 74