

INTRODUCTION

The authors have nothing to disclose

GHTD is characterized by:

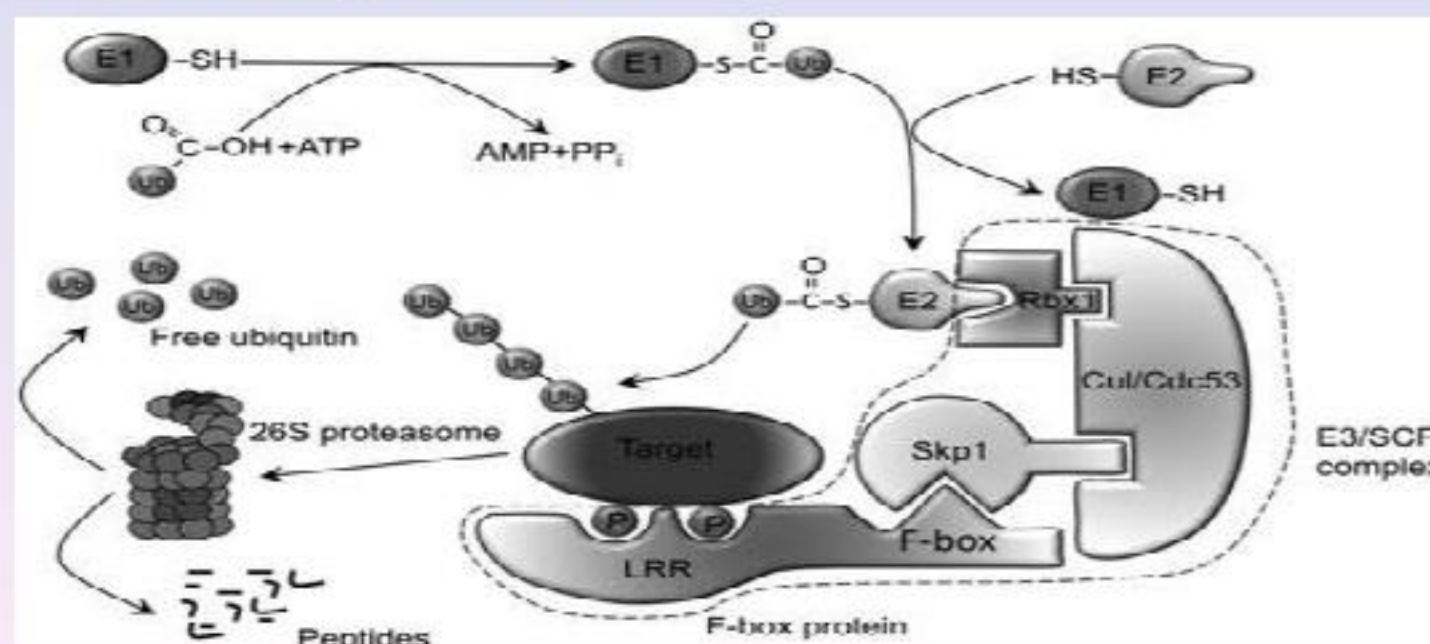
- ❖ over-expression of the E3 ubiquitin ligase, CIS.
- ❖ excessive GHR endocytosis and degradation
- ❖ impaired STAT3 phosphorylation¹

Induction of GHTD fibroblasts with 200 μ g/L hGH (GH200) and silencing mRNA CIS (siCIS) or with high dose of hGH, 1000 μ g/L (GH1000), suppresses excessive CIS and restores normal GH signalling.

Crosstalk between the GH and EGF signalling pathways is important for normal cellular development.²

The ubiquitin ligase SCF^{TrCP} is required for internalisation of the growth hormone receptor (GHR).³

β -transducin repeat-containing protein (β -TrCP), the F-box protein of the E3 ubiquitin ligase SCF, also plays a role in GHR endocytosis.³



The ubiquitin ligase system: β -TrCP is the substrate recognition subunit of the E3 ligase SCF ^{β -TrCP}

OBJECTIVE

To study the role of β -TrCP in the negative regulation of the GH/GHR and EGF/EGFR pathways in normal and GHTD cells.

METHODS

- ❖ Fibroblast cultures were developed from gingival biopsies of 1 GHTD patient and 1 control child.
- ❖ The protein expression and the cellular localization of β -TrCP were studied by Western Immunoblotting and Immunofluorescence, respectively:
 - At the basal state and after induction with 200 μ g/L hGH (GH200), either with or without siRNA CIS.
 - At the basal state and after inductions with 200 μ g/L hGH (GH200), 1000 μ g/L hGH (GH1000) or 50 ng/ml EGF.

RESULTS

Figure 1.

After GH200/siCIS, the protein expression and cytoplasmic-membrane localization of β -TrCP were increased in the control and in the patient.

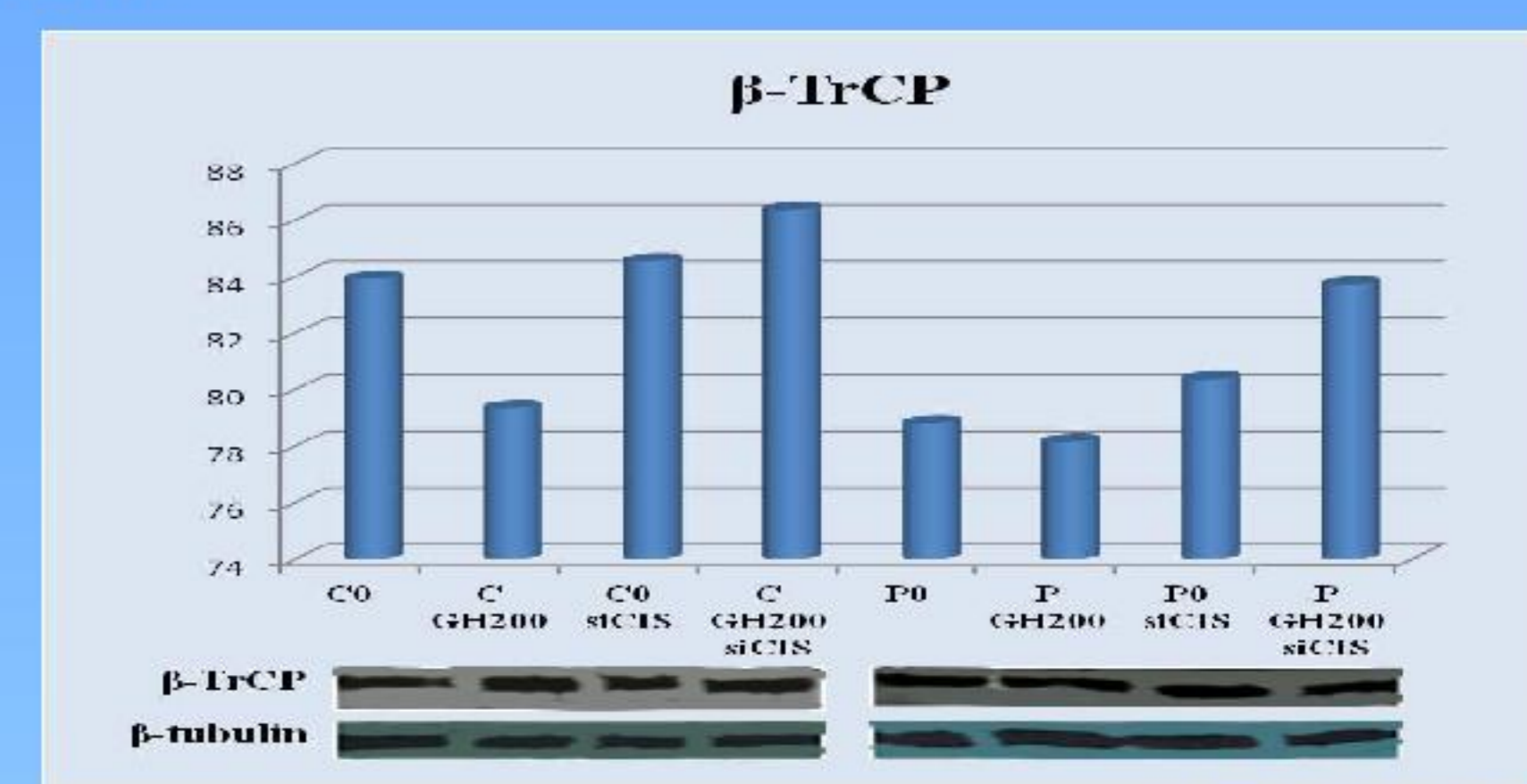
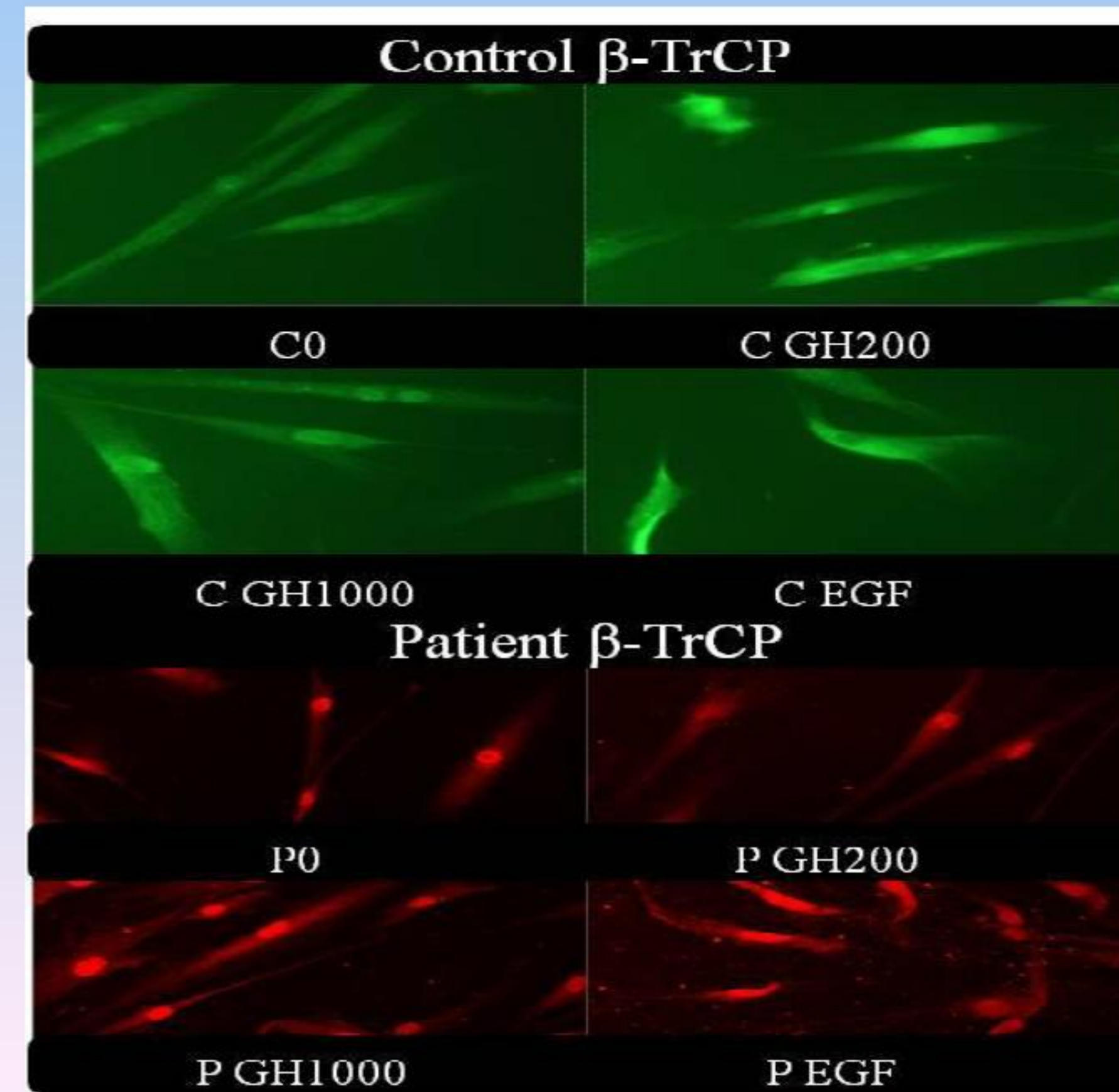
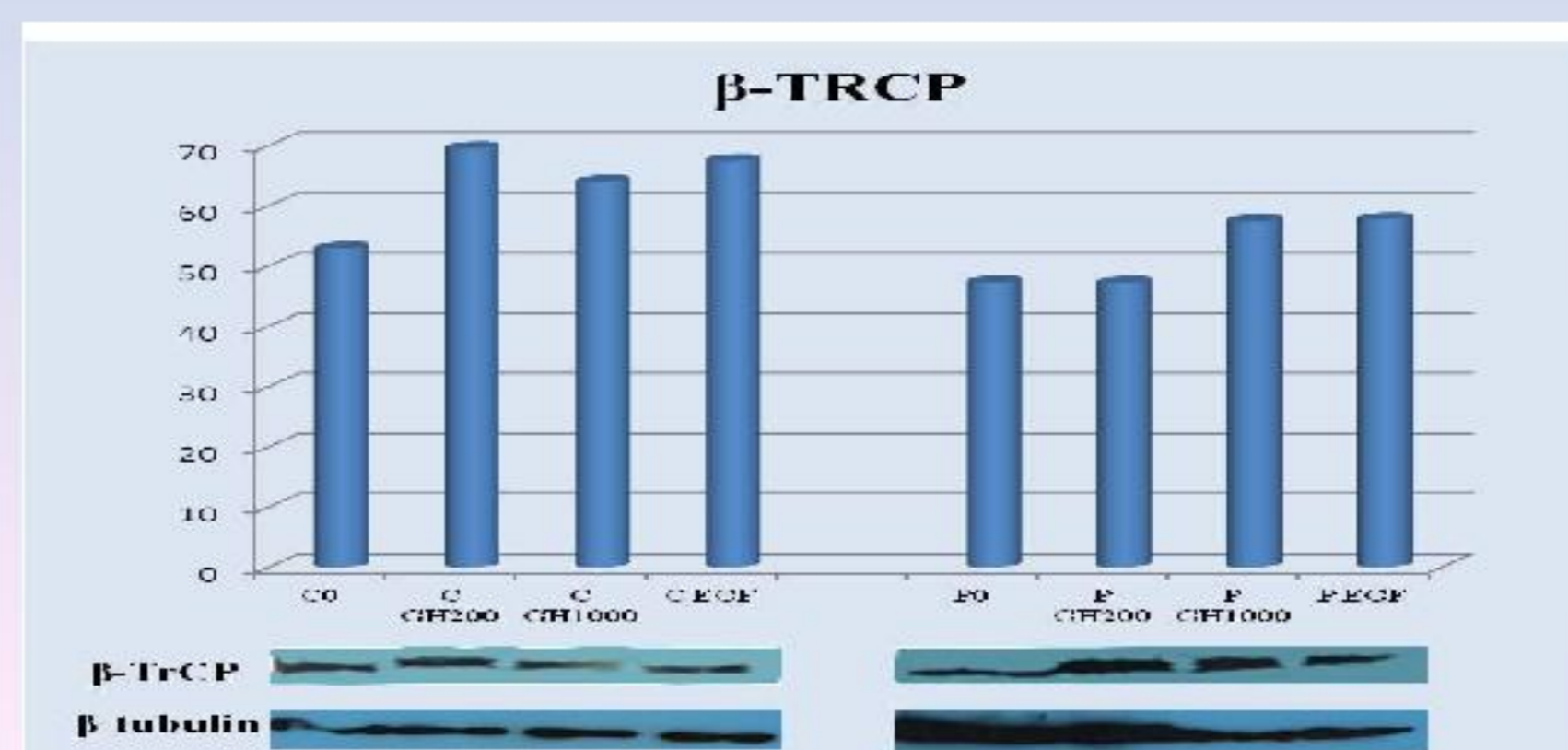


Figure 2.

After induction with GH200 in the control and GH1000 in the patient (*inductions of successful GH signalling*), the protein expression and cytoplasmic-membrane localization of β -TrCP were increased.

After induction with EGF, the protein expression and cytoplasmic-membrane localization of β -TrCP were also increased in both the control and the patient.



CONCLUSIONS

- ❖ When CIS is reduced, either after silencing of the CIS gene or after inductions of successful GH signalling, β -TrCP is increased and this may reflect a compensatory mechanism of negative regulation of the GH/GHR pathway in the control's and the patient's fibroblasts.
- ❖ β -TrCP also seems to participate in the negative regulation of the EGF/EGFR pathway in the control's and the patient's fibroblasts.
- ❖ β -TrCP seems to be activated more readily in the control's fibroblasts than in the GHTD's fibroblasts after inductions of successful GH and EGF signalling.

REFERENCES

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