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ARTICLE *in* NATURE MEDICINE · SEPTEMBER 1997

Impact Factor: 27.36 · DOI: 10.1038/nm0897-855 · Source: PubMed

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Amyloid deposition is delayed in mice with targeted deletion of the serum amyloid P component gene

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The tissue amyloid deposits that characterize systemic amyloidosis, Alzheimer's disease and the transmissible spongiform encephalopathies always contain serum amyloid P component (SAP) bound to the amyloid fibrils. We have previously proposed that this normal plasma protein may contribute to amyloidogenesis by stabilizing the deposits. Here we show that the induction of reactive amyloidosis is retarded in mice with targeted deletion of the SAP gene. This first demonstration of the participation of SAP in pathogenesis of amyloidosis *in vivo* confirms that inhibition of SAP binding to amyloid fibrils is an attractive therapeutic target in a range of serious human diseases.

Amyloidosis is a disorder of protein metabolism in which normally soluble autologous proteins are deposited in the tissues as abnormal insoluble fibrils, which cause structural and functional disruption¹. All the acquired and hereditary forms of systemic amyloidosis affecting the major viscera are usually fatal, and amyloid localized to the brain is associated with Alzheimer's disease and the transmissible spongiform encephalopathies (prion diseases). In each different type of amyloidosis the fibrils are derived from different proteins that share neither sequence homology nor similar native folds. However, the core structure of the fibrils is always the same and consists of a cross- β -sheet arrangement of polypeptide chains with their long axes perpendicular to the fiber's long axis^{2,4}. This proteinase-resistant conformation is thought to underlie the persistence, and possibly also the pathogenicity, of amyloid fibrils *in vivo*, but another feature common to all types of amyloidosis is binding of the normal plasma protein, serum amyloid P component (SAP), to the fibrils^{1,5}. The interaction is highly specific, and the abundance of SAP in amyloid deposits relative to its trace concentration in the plasma is remarkable.

It has lately been shown in several different types of systemic amyloidosis, that reduction in the supply of fibril precursor proteins arrests amyloid deposition and often leads to regression of established deposits, with corresponding clinical benefit⁶. Amyloid is thus in a state of dynamic turnover *in vivo*, but there is no specific treatment that itself promotes amyloid regression. We have previously proposed that the universal presence of SAP in amyloid, bound to the fibrils, may stabilize the deposits, and that inhibition of this binding could be a therapeutic option^{7–10}. The evidence leading to this concept is, first, that the avid binding of SAP to amyloid fibrils¹¹ must be mutually stabilizing, purely on thermodynamic grounds. Second, the SAP in amyloid is intact and unaltered with respect to the circulating molecule⁹, and this native structure may thereby mask the abnormal configuration of the fibrils. Third, SAP itself is highly resistant to proteolysis¹², especially when it forms

complexes with its calcium-dependent ligands, and binding of SAP to amyloid fibrils *in vitro* protects them from proteolysis¹⁰. Fourth, SAP is catabolized *in vivo* only by hepatocytes¹³, suggesting that other cells, especially the macrophages most likely to be responsible for amyloid fibril clearance, do not recognize or degrade it. Finally, although human plasma SAP levels are tightly controlled¹⁴ and remain normal in patients with amyloidosis^{15,16}, in both mice and hamsters there is a strong positive correlation between circulating SAP concentrations and development of amyloidosis^{17–19}.

To investigate the role of SAP in amyloidogenesis *in vivo*, we have now generated SAP-deficient mice by targeted deletion of the SAP gene and have evaluated their development of reactive, systemic amyloid A (AA) amyloidosis in comparison with SAP-sufficient controls. Human AA amyloidosis is a serious and usually fatal complication of chronic inflammation; the amyloid fibrils are composed of amyloid A protein derived from the acute-phase reactant, serum amyloid A protein (SAA) (ref. 1). In mice, chronic inflammation elicited by repeated injections of casein²⁰ is associated with increased production of SAA (ref. 21), and AA amyloidosis is generally present in most animals after about 6 weeks. This is the most accessible experimental model of amyloidosis and closely resembles human AA amyloid disease.

SAP knockout mice

Mice in which the SAP gene had been eliminated by homologous recombination (SAP^{-/-}) (Fig. 1) had no circulating SAP, but developed normally and were fertile. Histology of the SAP^{-/-} animals at up to 6 months of age was normal, and no other obvious abnormality has been observed up to 11 months. When immunized with isolated mouse SAP they produced specific, high-titer, precipitating anti-mouse SAP antibodies, confirming absence of the autologous antigen. SAP^{-/-} heterozygotes expressed SAP constitutively and as an acute-phase reactant, but at significantly lower levels than wild-type SAP^{+/+} animals (Table 1).

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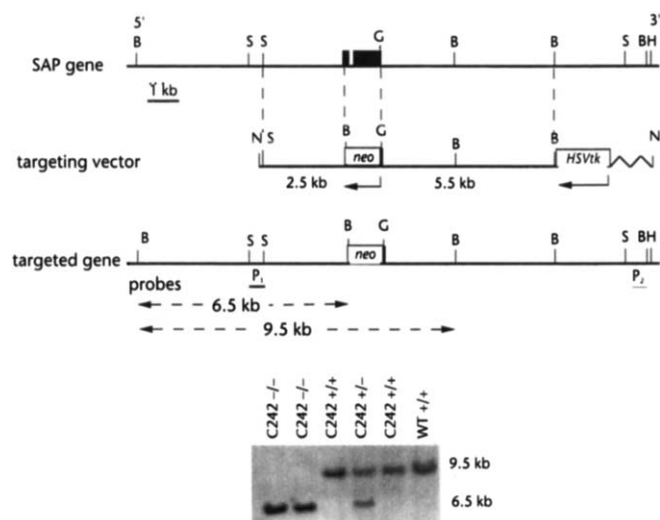


Fig. 1 Targeted disruption of the mouse SAP gene. *above*, The structure of the SAP gene, the targeting vector and the mutated allele. The coding regions are represented as filled boxes and the homologous fragments used in the targeting vector are delimited by dotted lines. Restriction enzymes used for cloning and Southern blot analysis were B, *Bam*HI; S, *Sph*I; G, *Bgl*II; H, *Hind*III; N, *Not*I. The double-headed arrows indicate sizes of fragments seen in Southern blot analysis of mutant and wild-type alleles after *Bam*HI digestion of genomic DNA hybridized to the 5' probe, P1, outside the area of homologous recombination. *below*, Representative Southern blot of *Bam*HI-digested mouse tail DNA from offspring of a cross between animals that were heterozygotes for the disrupted SAP gene from clone 242. The wild-type SAP allele runs at 9.5 kb, and the disrupted allele at 6.5 kb, because of the *Bam*HI site in the neomycin resistance cassette.

Induction of AA amyloidosis with casein

Mice without the SAP gene (SAP^{-/-}) and control SAP^{+/-} mice received daily injections of casein 5 days per week over a period of 66 days, and amyloid deposition was prospectively and serially monitored by quantitative scintigraphy with ¹²⁵I-labeled human SAP. This tracer binds specifically, but reversibly to amyloid fibrils *in vivo* and localizes on them in direct proportion to their quantity, in contrast to its prompt elimination in mice without amyloid deposits^{22,23}. More than 1000 human clinical studies, and autopsy correlations in humans and mice, have validated serial use of this method to quantify amyloid *in vivo* in all phases of deposition and regression as well as in the steady state²³⁻²⁵. Serial *in vivo* monitoring of live mice, which has not been done before during the induction of amyloidosis, confirmed the expected pattern in the SAP^{-/-} controls, with amyloid first appearing in some animals at day 37 and then progressively accumulating in all except one. However, deposition of amyloid was significantly delayed and reduced in the SAP^{-/-} mice (Fig. 2).

Parallel cohorts of SAP^{-/-} mice and SAP^{+/-} controls received casein in an identical protocol, but were not monitored before day 53 in order to avoid introduction of extraneous SAP. The difference in whole-body amyloid load between the groups at this time point (Fig. 3a) was confirmed by quantification of amyloid in the viscera by using both ¹²⁵I-labeled SAP retention and histochemical staining with Congo red (Fig. 3, b and c). Eight of 11 SAP^{-/-} mice had amyloid, 7 with massive deposits, compared with only 2 of 9 SAP^{+/-} mice with just trace amounts (*P* = 0.02). However, the serum concentrations of SAA, the actual precursor of the AA amyloid

fibril protein, measured at bleed-out, were the same in the SAP^{-/-} and the SAP^{+/-} mice: (mean ± s.d.) 17 ± 3 and 17 ± 8 mg/l, respectively.

Induction of AA amyloidosis with AEF and silver nitrate

In the casein model there is a long initial lag phase followed by rapid accumulation of AA amyloid in most animals and, even if inflammatory stimulation is halted before any amyloid appears, the mice remain primed for explosive amyloid deposition in the future. Very similar phenomena occur in human AA amyloidosis¹. The lag phase reflects the generation of a potent activity known as amyloid-enhancing factor (AEF), which is present in all amyloidotic tissues, but has not yet been biochemically characterized²⁶. Parenteral injection in mice of a minute quantity of amyloid tissue extract, together with the powerful inflammatory stimulus provided by a single injection of silver nitrate, induces AA amyloid deposition within 24–48 hours and rapid accumulation thereafter. When groups of ten SAP^{-/-} and control SAP^{+/-} mice received AEF and silver nitrate, they had similar amyloid deposits when killed on day 3. However, all AEF preparations contain SAP, and we therefore sought to determine whether this was required for the AEF activity. First, we investigated in SAP^{-/-} wild-type mice whether amyloid fibrils formed *in vitro* from pure synthetic peptides had AEF activity, but we found no amyloid in the recipients, albeit after just a single silver nitrate injection, in contrast to a recent report²⁷, in which AEF activity was seen after several such injections. These synthetic fibrils were therefore not tested in SAP^{-/-} mice. Second, we used immobilized sheep anti-mouse SAP antibodies to remove all the SAP from a standard AEF preparation, but this SAP-depleted material was fully active in SAP^{-/-} mice stimulated with silver nitrate. SAP is thus not required for AEF activity.

Induction of AA amyloidosis with AEF and casein

Although AEF dramatically accelerates amyloid deposition, the difference between SAP^{-/-} and control SAP^{+/-} or SAP^{+/+} animals was still seen when the mice received casein rather than silver nitrate after injection of SAP-depleted AEF (Fig. 4). This was not due to differences in SAA production between SAP-deficient and SAP-sufficient mice; their SAA levels at bleed-out were not significantly different: day 4, SAP^{-/-} (mean ± s.d.) 112 ± 91 mg/l, median (range) 98 (19–281); SAP^{+/-} 76 mg/l (38), 74 (15–145); day 16, SAP^{-/-} 258 mg/l (182), 172 (64–529); SAP^{+/-} 235 mg/l (158), 176 (78–515). However, prolonged casein stimulation with uninterrupted daily injections eventually induced comparable amounts of amyloid in SAP^{-/-} and SAP^{+/-} mice, even without administration of AEF, showing, as expected, that SAP is not essential for amyloidogenesis in this system.

Discussion

All known amyloid fibril proteins can be converted from the soluble to the fibrillar form *in vitro* in the absence of any other pro-

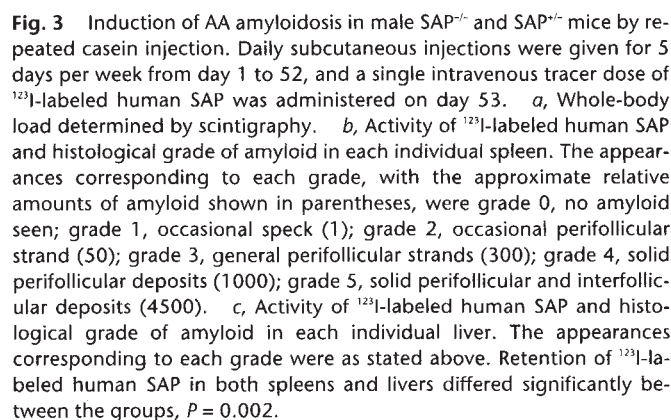
Table 1 Acute-phase SAP response in SAP^{-/-}, SAP^{+/-} and SAP^{+/+} mice

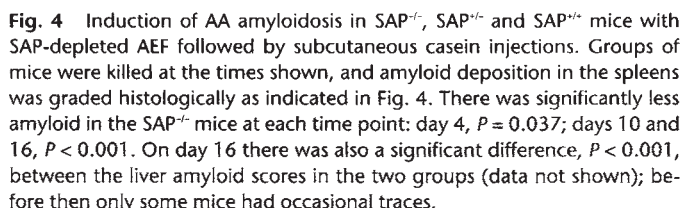
	Serum SAP concentration (mg/l) after					
	4 casein injections in 4 days			8 casein injections in 10 days		
	Mean ± s.d.	Range	(n)	Mean ± s.d.	Range	(n)
SAP ^{-/-}	0		(14)	0		(26)
SAP ^{+/-}	66 ± 37	15–160	(24)	48 ± 39	4–140	(13)
SAP ^{+/+}	165 ± 31	120–210	(13)	194 ± 104	40–460	(21)

Differences between SAP^{-/-} and SAP^{+/-} mice on day 4 and on day 10, *P* < 0.0001.

tein²⁸, and there are no clinical or experimental results suggesting that this process should require SAP *in vivo*. However, as indicated above, there is much circumstantial evidence that SAP contributes to the pathogenesis of amyloid deposition *in vivo*, and the present results strongly support this concept. Although

The present findings therefore validate our strategy of seeking inhibitors of SAP binding for use as drugs⁷⁻¹⁰ and, if they were effective, such agents would be applicable in all disorders in which amyloid is involved. SAP is present in amyloid deposits of all types, including those in Alzheimer's disease³¹⁻³³ and the prion diseases³⁴, and presumably contributes to their pathogenesis, as we have demonstrated here that it does in AA amyloidosis. If *in vivo* inhibition of SAP binding to amyloid fibrils retarded amyloid deposition, as observed here in the SAP^{-/-} mice, and/or accelerated amyloid regression, it would clearly be of clinical benefit.





Methods

Induction of amyloidosis. Mice received 0.5 ml of 10% (wt/vol) vitamin-free casein (ICN Pharmaceuticals, Cleveland, OH) in 0.1 M NaHCO₃ by subcutaneous injection daily for 5 or 7 days per week. For accelerated induction mice received a single, intravenous injection of glycerol-extracted AEF (ref. 39) on day 0 immediately followed by a single, subcutaneous injection of 0.5 ml of 2% (wt/vol) silver nitrate in water. Some of this AEF preparation, which contained 20 mg/l of SAP, was subjected to two sepa-

Serum protein immunoassays. SAP was measured by electroimmunoassay with sheep anti-mouse SAP antiserum^{40,41}, and SAA by dot-blot immunoassay standardized with purified acute-phase mouse high-density lipoprotein and using rabbit anti-mouse SAA antibody (kindly provided by E. Benditt) that was extensively absorbed before use with normal mouse serum containing <3 mg/l of SAA, followed by affinity-purified peroxidase-labeled goat anti-rabbit IgG antibody absorbed before use with normal mouse serum.

Statistics. Two-tailed Student's *t*-tests were used to analyze cumulative amyloid load estimates (Fig. 2) (untransformed data) and organ localization of ^{125}I -labeled SAP (Fig. 3, *b* and *c*) (log-transformed data). Incidence of amyloid in different groups (Fig. 2, Fig. 4, day 4) was compared by chi-square test. The histological amyloid grades described in Fig. 3 were assigned consecutive integer values from 1 (no amyloid) to 6 (heaviest deposits) and were compared by Mann-Whitney U-test (Fig. 4, days 10 and 16).

Acknowledgments

We thank G.W.H. Stamp for histological examination of untreated knockout mice, and J.R. Gallimore for technical assistance. This work was supported by the Medical Research Council and the Arthritis and Rheumatism Council for Research.

RECEIVED 16 APRIL; ACCEPTED 12 MAY 1997

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