

综述

蛋白质乳酸化修饰在肿瘤代谢和肿瘤免疫中的作用

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摘要: 蛋白质乳酸化修饰是一种以乳酸为前体的新型蛋白质翻译后修饰。在乳酸化修饰过程中, 乳酰基与组蛋白和非组蛋白上的赖氨酸残基共价结合, 通过调控基因表达和底物蛋白功能的方式, 参与胚胎发育、神经元活动、阿尔茨海默病、心力衰竭、肿瘤等多种生理及病理过程。在肿瘤的发生和发展中, 乳酸化修饰可通过影响肿瘤细胞和肿瘤微环境, 调控肿瘤细胞的增殖、转移和耐药等多个方面。本文简要介绍蛋白质乳酸化修饰概述、动态调控、生理及病理功能及其在肿瘤代谢重编程和肿瘤免疫中的作用, 为进一步探究乳酸化修饰在肿瘤中的调控机制以及靶向药物的研发提供理论基础。

关键词: 乳酸化; 肿瘤; 代谢重编程; 肿瘤免疫

The roles of protein lactylation in tumor metabolism and tumor immunity

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Abstract: Protein lactylation is a novel post-translational modification using lactic acid as a precursor. It regulates gene expression by covalently binding lactyl group to lysine residue of histones and non-histone proteins, and is involved in various physiological and pathological processes such as embryonic development, neuronal activity, Alzheimer's disease, cardiac failure and tumor. In this paper, we briefly introduce the overview, dynamic regulation, physiological and pathological functions of protein lactylation, as well as its role in tumor metabolic reprogramming and tumor immunity, so as to provide a basis for further study of the mechanism of lactate modification in tumors and the development of targeted drugs.

Key Words: lactylation; tumor; metabolic reprogramming; tumor immunity

Warburg效应是肿瘤的重要代谢特征, 即在常氧条件下, 肿瘤细胞优先以糖酵解途径进行代谢, 产生大量乳酸^[1]。乳酸的大量合成在促进肿瘤血管生成^[2]、侵袭^[3]和免疫逃逸^[4]中起关键作用。作为一种新型蛋白质翻译后修饰, 乳酸化修饰以乳酸

为前体, 通过乳酰基与蛋白质赖氨酸残基共价结合调控基因表达^[5]。代谢重编程和免疫逃避作为癌症的基本特征, 促进癌症的发生发展、转移复发^[6]。本文就蛋白质乳酸化修饰与肿瘤代谢重编程和肿瘤免疫的有关研究进行综述, 旨在从蛋白质

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乳酸化修饰这一角度为抑制肿瘤进展提供参考依据。

1 乳酸化修饰

受到多种细胞代谢产物具有组蛋白酰化功能的启发, Zhang等^[5]在2019年预测并验证了赖氨酸乳酸化(lysine lactylation, KLa)是一种新型的组蛋白翻译后修饰。研究人员利用质谱分析技术发现, 核心组蛋白赖氨酸残基上质量位移与添加一个乳酸基所引起的质量位移相同, 初步证实其为乳酸化修饰, 并通过开发泛乳酰赖氨酸抗体进一步证实并鉴定了人乳腺癌MCF-7细胞和小鼠骨髓源性巨噬细胞中的组蛋白乳酸化位点^[5]。除此之外, 研究团队还通过同位素代谢标记实验表明, 乳酸可以参与赖氨酸乳酸化修饰, 将乳酸代谢这一在生理和病理过程中广泛存在的代谢过程与乳酸化修饰正式联系在一起^[5]。

1.1 乳酸化修饰的动态调控

蛋白质翻译后修饰即蛋白质生物合成后进行的生化修饰, 通过引入磷酸基、甲基、乙酰基等官能团以动态调节蛋白质活性、位置和分子相互作用^[7], 增加了蛋白质功能的多样性。赖氨酸乙酰化修饰(lysine acetylation, Kac)是已被广泛研究的一种蛋白质翻译后修饰, 具有可逆性、进化保守性, 并受到高度调控^[8]。Kac的调控包括写入器“writer”、读取器“reader”以及擦除器“eraser”, 以该调控模式为范式, 目前已将其扩展至其他赖氨酸酰化修饰的调控^[9], 如赖氨酸琥珀酰化^[10]、巴丁酰化^[11]、丙酰化^[12]、丁酰化^[12]、丙二酰化^[13]、戊二酰化^[14]、2-羟基异丁基化^[15]和 β -羟基丁基化^[16]。乳酸化作为一种新型的赖氨酸酰化修饰, 同样具有特定的“writer”和“eraser”^[5,17], 但其“reader”尚未被发现。

1.1.1 组蛋白乳酸化修饰的动态调控

组蛋白乙酰转移酶具有广泛的酰基转移酶活性, 根据氨基酸序列和结构相似性, 可分为p300/CBP、GNAT和MYST家族^[18]。其中, p300酶功能最为全面^[19]。Zhang等^[5]的实验证明, p300酶同样可作为组蛋白乳酸化修饰的“writer”, 催化乳酰

基从L-乳酰辅酶A转移到组蛋白上。Yang等^[20]关于乳酸化调控肝内胆管癌的发病机制研究, 再次证实了p300能介导组蛋白乳酸化发生。HBO1蛋白作为MYST家族的一员, 同样可调控组蛋白乳酸化的发生^[21]。Niu等^[21]研究发现, 在HeLa和HEK-293T细胞中过表达HBO1会导致组蛋白乳酸化水平升高, 而敲除HBO1会致其下降; 体外实验也证明HBO1可直接催化组蛋白乳酸化修饰。与组蛋白乙酰转移酶类似, 组蛋白去乙酰化酶(histone deacetylases, HDACs)对非乙酰化的酰基也具有活性^[22]。在体外条件下, HDAC中的I类组蛋白去乙酰化酶HDAC1-3和III类组蛋白去乙酰化酶(sirtuins, SIRT)1-3可显著降低组蛋白L-乳酸化水平, 其中HDAC1-3是体外最有效的赖氨酸去乳酸化酶。进一步研究发现, HDAC1-3不仅能够去除组蛋白的L-乳酸化, 还能去除非组蛋白的D-乳酸化, 且对D-乳酸化的去乳酸化能力高于L-乳酸化^[19]。在体外条件下, HDAC1/2的去乳酸化修饰能力有限, HDAC3的去乳酸化能力最强。在细胞内, HDAC1和HDAC3是组蛋白乳酸化修饰的主要“eraser”^[19]。综上, p300、HBO1介导组蛋白乳酸化修饰书写, 而SIRT1-3、HDAC1-3介导其去除。

1.1.2 非组蛋白乳酸化修饰的动态调控

与组蛋白乳酸化相同, 非组蛋白乳酸化修饰同样受到p300和SIRT3、HDAC3的调控^[23,24]。Yang等^[23]鉴定出肝细胞癌9 275个乳酸化位点中非组蛋白乳酸化位点占到9 256个, 并通过计算肝细胞癌中所有乳酸化位点与p300酶和HDAC1-11蛋白表达的相关系数, 发现大多数乳酸化位点的修饰水平与HDAC1-3表达呈正相关。并进一步实验证明, 抑制p300酶可降低乳酸化程度, 而敲低HDAC3表达可增加乳酸化强度, 故认为p300和HDAC在非组蛋白乳酸化修饰中同样可起到“writer”和“eraser”的作用^[23]。Jin等^[24]研究发现, 在肝细胞癌中, SIRT3可以作用于包括周期蛋白E2在内的非组蛋白, 下调其乳酸化水平; 并通过晶体学实验证明SIRT3可以作为一种去乳酸化酶, 催化周期蛋白E2脱乳酸化修饰。除此之外, 赖氨酸乙酰转移酶8(lysine acetyltransferase 8, KAT8)也可以作为泛

乳酸化“writer”，将乙酰基写入涉及多种生物过程的许多蛋白质底物上^[25]。

与以上乳酸化修饰受到修饰酶、去修饰酶的严格调控不同的是，Gaffney等^[26]发现了非酶促乙酰基转移的乳酸化修饰，这类乳酸化修饰的主要目标是糖酵解酶，通过乳酸化使糖酵解酶活性下降，进而抑制糖酵解通路。该过程以糖酵解副产物甲基乙二醛为前体，通过乙二醛酶1生成S-D乙酰谷胱甘肽。S-D乙酰谷胱甘肽直接为赖氨酸残基提供乙酰基团，使赖氨酸发生乳酸化修饰，此步骤不依赖酶的参与。

1.2 乳酸化修饰的生理及病理功能

乳酸化修饰由乳酸代谢所介导，而其可修饰的底物蛋白种类多样且效应各异，为疾病的治疗提供了潜力靶点。在细胞分化方面，Li等^[27]发现，在转录因子Glis1结合并开启糖酵解基因表达而关闭体细胞基因表达之后，上调的糖酵解产生更多的乙酰辅酶A和乳酸，从而增强多能基因位点处的H3K27Ac和H3K181a水平，以加速细胞重编程作用。在神经系统方面，已有研究发现H4K121a和H3K181a可通过不同途径参与阿尔茨海默病的发生发展^[28,29]。H4K121a通过糖酵解-H4K121a-M2型丙酮酸激酶这一正反馈回路加重了阿尔茨海默病患者的小胶质细胞功能障碍^[28]。而H3K181a通过H3K181a/核因子- κ B(nuclear factor kappa-B, NF- κ B)信号轴上调白细胞介素-6(interleukin-6, IL-6)和IL-8，参与大脑衰老和阿尔茨海默病的发生^[29]。乳酸化修饰同样参与Ca²⁺过载引发的脑缺血再灌注损伤^[30]、抑郁症中焦虑行为的病理过程^[31]。在心血管疾病中， α -肌球蛋白重链K1897乳酸化水平下调会降低其与肌联蛋白的相互作用，导致心脏结构和功能受损，加剧心力衰竭^[32]。心梗后的组蛋白乳酸化通过促进修复基因转录，抑制心梗后过度炎症反应和促进血管生成，从而有利于心梗后的免疫稳态和环境修复^[33]。在肿瘤中，乳酸化参与了肿瘤发生发展^[34]、免疫逃避^[35]以及治疗耐药^[36]等。Chen等^[37]阐述了MRE11蛋白上的K673乳酸化在DNA损伤中的作用，认为靶向抑制MRE11蛋白上的K673乳酸化修饰可能是提高化疗敏感性可采

取的方法之一。Li等^[38]研究发现，H3K181a通过启动关键转录因子YBX1和YY1促进膀胱癌患者顺铂耐药，靶向抑制H3K181a可以有效恢复顺铂耐药上皮细胞对顺铂的敏感性，为克服膀胱癌耐药提供了理论基础。Pan等^[39]发现三萜类抗肿瘤化合物可通过降低乳酸表达，进一步抑制包括H3K9和H3K56在内的H3组蛋白乳酸化，以抑制肝癌干细胞的肿瘤发生。除此之外，乳酸化还与巨噬细胞极化^[4,40-43]、预防过度损伤^[44]、自身免疫性葡萄膜炎^[45]、糖尿病视网膜病变^[46]等多种疾病有关。

2 乳酸化修饰与肿瘤代谢

葡萄糖是细胞主要的碳源和能量来源，可通过有氧氧化和糖酵解途径供能，也可通过磷酸戊糖途径为细胞提供合成核酸和其他物质的原料，维持细胞正常生长。Warburg效应揭示了肿瘤细胞中异常的葡萄糖代谢，即在有氧条件下优先采用糖酵解代谢而非有氧氧化和氧化磷酸化(oxidative phosphorylation, OXPHOS)代谢，表明糖酵解代谢异常在肿瘤细胞代谢中意义重大。在多种恶性肿瘤中，乳酸化均可通过影响糖酵解促进肿瘤的进展^[23,47]。一方面，乳酸化可通过影响糖酵解途径中酶的表达水平对糖酵解过程进行调控^[23]；另一方面，乳酸化还可通过修饰组蛋白来直接影响相关代谢基因的表达。在非小细胞肺癌中，乳酸被发现能下调己糖激酶1、M型丙酮酸激酶和上调琥珀酸脱氢酶、异柠檬酸脱氢酶3的mRNA水平，而组蛋白乳酸化修饰也在这几种酶相应的启动子位点明显富集，表明乳酸对非小细胞肺癌细胞的代谢调节作用可能由乳酸诱导相关基因启动子上的组蛋白乳酸化介导^[47]。

乳酸化不仅可以通过糖酵解途径影响葡萄糖代谢，还可以对磷酸戊糖途径进行调控。Meng等^[48]研究发现，乳酸作为一种信号分子能够增强缺氧诱导因子-1 α 在DCBLD1蛋白(discodin, CUB and LCCL domain-containing protein 1)启动子区域富集，从而增加DCBLD1的转录表达。同时，DCBLD1上的乳酸化修饰可直接稳定DCBLD1蛋白水平。通过以上两种方式，DCBLD1水平增加并进

一步激活葡萄糖-6-磷酸脱氢酶参与的磷酸戊糖途径以促进宫颈癌的发展。

线粒体中的OXPHOS保持了癌细胞氧化葡萄糖的能力^[49], 乳酸化同样可能对OXPHOS产生影响^[50]。Lv等^[50]发现, 敲低甲基转移酶样15(methyltransferase-like 15, *METTL15*)后组蛋白H4K12和H3K9的乳酸化水平升高。同时, 敲除*METTL15*会下调线粒体基因编码蛋白的表达进而导致氧化磷酸化功能障碍, 使活性氧增加, 改变细胞代谢状态。该研究表明, 乳酸化水平改变与线粒体氧化磷酸化功能障碍之间可能存在联系, 但仍需更进一步实验证明。

在乙型肝炎相关肝细胞癌中, 乳酸化除了影响糖酵解之外, 还参与了多种代谢途径中酶的调控, 涉及的代谢途径包括三羧酸循环、氨基酸代谢、脂肪酸代谢以及核苷酸代谢等。三磷酸腺苷代谢作为其他代谢途径的基础, 其中的关键酶腺苷酸激酶2的K28位点可以被乳酸化修饰。乳酸化的腺苷酸激酶2通过抑制自身功能, 促进肝癌细胞的增殖和迁移^[25]。

3 乳酸化修饰与肿瘤免疫

肿瘤微环境(tumor microenvironment, TME)是肿瘤发生过程中所处的环境, 由细胞和非细胞成分组成, 包括适应性免疫细胞、髓系免疫细胞、血管细胞、固有免疫细胞和细胞外基质等^[51]。癌细胞通过招募和重塑以上细胞和细胞外基质以创造一个促瘤的TME, 其中免疫细胞功能异常是产生免疫抑制、促进免疫逃避的重要因素^[52]。以下主要阐述乳酸化修饰对T细胞、巨噬细胞、肿瘤浸润髓样细胞的影响。

3.1 乳酸化修饰与T细胞

T细胞按照功能和表面标志可以分为细胞毒性T细胞(cytotoxic T lymphocyte, Tc)、辅助T细胞(helper T cell, Th)、调节性T细胞(regulatory T cell, Treg)和记忆T细胞。Treg在肿瘤组织中的浸润往往与临床预后不良相关^[53], 而Tc在消除恶性肿瘤中发挥关键作用, 为机体提供保护性免疫^[54]。在鼠类肉瘤病毒癌基因(kirsten rat sarcoma viral

oncogene, *KRAS*)突变型结直肠癌肿瘤特异性细胞毒性T淋巴细胞(cytotoxic T lymphocyte, CTL)中, 组蛋白乳酸化通过启动与NF- κ B相互作用的环状RNA TXN7的转录, 促进其与NF- κ B p65亚基结合并掩盖p65核定位信号基序, 使NF- κ B失活以增加CTL活化后诱导自身细胞凋亡的敏感性, 促进肿瘤免疫逃逸和免疫治疗抵抗^[55]。Gu等^[56]研究发现, MOESIN蛋白在赖氨酸72位点的乳酸化通过转化生长因子- β (transforming growth factor- β , TGF- β)受体I而不是TGF- β 受体II增强Treg细胞中的TGF- β 信号, 调节Treg细胞的发育和功能以促进肿瘤细胞的免疫逃逸; 并且发现对于抗程序性死亡受体1(anti programmed cell death protein 1, aPD-1)治疗有反应的个体的MOESIN乳酸化水平低于无反应的个体。综上, 抑制MOESIN乳酸化有可能提高免疫治疗的疗效。细胞表面的外核苷酶CD39和CD73在形成免疫抑制TME中起关键作用^[57]。Sun等^[58]发现, 在多形性胶质母细胞瘤中, 乳酸一方面通过促进H3K181a在CD39和CD73启动子区域富集, 上调CD39和CD73表达, 促进免疫抑制; 另一方面通过增加CCR8(C-C motif chemokine receptor 8)及其配体CCL1和CCL18的表达, 活化Treg细胞, 扰乱Treg/Th17平衡, 增强免疫抑制。而乳酸产生抑制剂草氨酸在嵌合抗原受体T细胞(chimeric antigen receptor T-cell, CAR-T)治疗胶质母细胞瘤过程中, 既可下调免疫微环境中CD39和CD73的表达, 又可下调肿瘤浸润Treg细胞中CCR8的表达, 达到促进CAR-T细胞免疫激活的效应。因此, 抑制乳酸产生可能是胶质母细胞瘤治疗中增强CAR-T功能的潜在策略^[58]。

3.2 乳酸化修饰与肿瘤浸润髓样细胞

肿瘤浸润髓样细胞(tumor-infiltrating myeloid cells, TIMs)通过介导对免疫检查点抑制剂的抵抗, 促进TME形成免疫抑制。TME反之也可以通过其中的各种因子调节TIMs的功能^[59,60]。Xiong等^[61]发现, 在肿瘤浸润髓样细胞中, H3K181a通过上调METTL3的表达, 介导酪氨酸激酶Jak1 mRNA上的m⁶A修饰, 进一步通过METTL3-m⁶A-YTHDF1轴增强Jak1 mRNA在多聚核糖体中的翻译和信号传导及

转录激活子3(signal transducer and activator of transcription 3, STAT3)的信号转导,以增强TME的免疫抑制。除此之外, METTL3的锌指结构域中存在K281和K345两个位点的乳酸化修饰,使METTL3获得更强的m⁶A RNA结合能力,介导TME免疫抑制。这些发现表明了乳酸可以通过乳酸化组蛋白和乳酸化METTL3的方式促进TIMs中的免疫逃逸,而METTL3抑制剂可为肿瘤免疫治疗提供新的线索。

3.3 乳酸化修饰与巨噬细胞

巨噬细胞具有不同的表型,在炎症研究中, M1型和M2型巨噬细胞极化导致炎症反应的结果相反: M1型巨噬细胞一般被认为是促进炎症发生,而M2型巨噬细胞通常被认为抑制炎症发生^[62]。精氨酸酶1(arginase 1, Arg1)是M2型巨噬细胞的标志物之一,在M2型巨噬细胞中水平较高^[63]。Zhang等^[5]研究发现,在低氧条件下和M1巨噬细胞极化的后期,组蛋白乳酸化修饰增加,诱导M2表型相关基因,如Arg1的表达。综上,组蛋白乳酸化参与M1巨噬细胞极化并向M2表型转化,使得环境由促进炎症反应趋向抑制炎症发生。在TME中, M2型巨噬细胞在抑制炎症的同时促进肿瘤增殖^[62],参与肿瘤的免疫逃逸,提示组蛋白乳酸化可能参与肿瘤巨噬细胞介导的免疫逃逸。在黑色素瘤和肺肿瘤分离得到的肿瘤相关巨噬细胞(tumor-associated macrophage, TAM)中, Arg1的表达与组蛋白乳酸化水平呈正相关,也支持以上观点。在PTEN/p53缺陷的前列腺癌细胞中,磷脂酰肌醇3-激酶抑制剂(phosphatidylinositol 3-kinase inhibitor, PI3Ki)通过减少前列腺癌细胞中乳酸生成,使TAM中以H3K18为代表的蛋白质乳酸化水平继发性下降,从而导致TAM吞噬能力增强,抑制前列腺肿瘤生长。对于雄激素剥夺治疗(androgen deprivation therapy, ADT)/PI3Ki/aPD-1联合治疗耐药的前列腺癌,其耐药机制在于Wnt-β-catenin通路的激活进一步促进了乳酸分泌和组蛋白H3K18乳酸化,恢复了肿瘤细胞与TAM间的串扰,驱动ADT/PI3Ki/aPD-1联合治疗的耐药^[64]。在巨噬细胞中,视黄醇受体γ(retinoic acid receptor γ, RARγ)与肿瘤坏死因子受

体相关因子6(tumor necrosis factor receptor-associated factor 6, TRAF6)相互作用,抑制NF-κB信号激活和IL-6的产生,从而衰减结直肠癌细胞中的STAT3信号。而肿瘤来源的乳酸通过促进巨噬细胞RARγ启动子上的H3K18乳酸化,上调H3K18la并抑制RARγ基因转录,通过激活TRAF6-IL-6-STAT3信号传导使巨噬细胞发生促癌效应^[65]。

4 总结

乳酸化修饰广泛参与包括肿瘤、炎症在内的众多病理过程,其动态修饰目前尚未完全明确。已知的“writer”有p300、KAT8、HBO1;“eraser”包括HDAC3和STIRT3,但乳酸化的“reader”尚未被发现。针对乳酸化修饰生物正交化学探针(S)-2-羟基戊-4-戊酸钠(S-2-hydroxypent-4-ynoate, YnLac)的合成^[17],以及运用4D蛋白质组学技术^[23]等手段,乳酸化修饰特征性离子环状亚胺离子的发现^[66]增加了乳酸化位点挖掘的特异性和灵敏性,一方面有利于广泛寻找乳酸化位点、增加对于非组蛋白乳酸化修饰的认知、甚至绘制肿瘤的乳酸化蛋白全景图谱,为乳酸化下游的深度研究提供基础;另一方面可用于有针对性地寻找一些已知与肿瘤密切相关的蛋白质是否具有乳酸化修饰位点,并探究乳酸化是否改变了其功能,使乳酸化的研究更加精准。除此之外,深入探究乳酸化修饰在肿瘤中的作用并阐明完整的作用机制,可以为肿瘤诊断、治疗和耐药提供准确的靶点,并为靶向药物开发奠定理论基础。

作者贡献声明:

郭馨蔚:设计论文框架,起草文章,修改论文;

余和芬:拟定写作思路,修改论文,指导撰写文章并定稿。

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