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· 综述 ·

蛋白酪氨酸磷酸酶1B在视网膜疾病中的研究进展

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[摘要] 蛋白酪氨酸磷酸酶1B(protein tyrosine phosphatase 1B, PTP1B)是PTPs家族中的重要一员, 可负调控胰岛素信号转导。PTP1B及下游信号通路中的关键分子广泛表达于视网膜的各层结构中, 与多种视网膜疾病如糖尿病视网膜病变、视网膜色素变性(retinitis pigmentosa, RP)、Leber先天性黑矇症、增生性玻璃体视网膜病(proliferative vitreoretinopathy, PVR)等疾病的发生、发展相关。因此, PTP1B有望成为视网膜疾病治疗的潜在新靶点。

[关键词] 蛋白酪氨酸磷酸酶1B; 糖尿病; 视网膜病

Research progress on protein tyrosine phosphatase 1B in retinal diseases

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Abstract As a pivotal member of protein tyrosine phosphatases (PTPs) family, PTP1B is considered as a major negative regulator of insulin receptor (IR) signaling. Studies have shown that PTP1B and key molecules in the downstream signaling pathways are widely expressed in each layer of the retina, which are associated with the occurrence and development of various retinal diseases, such as diabetic retinopathy, retinitis pigmentosa, Leber congenital amaurosis, and proliferating vitreoretinopathy, etc. Therefore, PTP1B is expected to become a potential target for the treatment of retinal diseases.

Keywords protein tyrosine phosphatase 1B; diabetes mellitus; retinopathy

蛋白酪氨酸磷酸酶1B(protein tyrosine phosphatase 1B, PTP1B)作为一种典型的非跨膜酪氨酸磷酸酶, 是胰岛素信号的负性转导因子, 以PTP1B为研究靶点是当前防治糖尿病及肥胖等代谢性疾病的热点之一。PTP1B与视网膜病变的发生、发展相关, 其作用不完全依赖于对代谢的影响。

因此, 本文就PTP1B的结构功能、相关信号通路及在视网膜病变中的研究进展作一综述。

1 PTP1B 的结构及功能

蛋白酪氨酸磷酸酶(protein-tyrosine phosphatases,

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PTPs)家族是一类受体类胞质信号转导酶,通过使其底物酪氨酸残基发生去磷酸化^[1],从而调控多种细胞的代谢进程,维持机体稳态。PTP1B是PTPs家族中的一员,广泛存在于肝、肾、胰腺、肌肉和脂肪等组织中,于1988年首次从人胎盘中提取^[2],是PTPs家族中首个在哺乳动物体内被纯化鉴定的成员。PTPN1编码人体的PTP1B,全长74 kb,为单拷贝基因,定位于20号染色体上臂的q13.1-q13.2^[3]。1994年,Barford等^[4]首次报道了PTP1B的晶体结构,它包含了435个氨基酸残基,分子量为50 ku。PTP1B的C末端变构位点由35个氨基酸残基组成,该位点可锚定在内质网(endoplasmic reticulum, ER)的细胞质侧^[5],从而将PTP1B定位于细胞质膜表面^[6]。PTP1B与蛋白酪氨酸激酶(protein tyrosine kinase, PTK)共同维持细胞内蛋白酪氨酸的磷酸化水平,在调控细胞生命活动中起重要作用。

PTP1B是胰岛素信号通路中的负性调节蛋白。胰岛素受体(insulin receptor, IR)是由2个 α 和 β 亚基构成的四聚体^[7]。当胰岛素与受体的 α 亚基结合后,诱导 β 亚基构型发生改变,激活酪氨酸激酶域及3个酪氨酸残基Tyr1158, Tyr1162和Tyr1163的自身磷酸化^[8]。随后磷酸基团定位于胰岛素受体底物1(IR substrates, IRS-1)和IRS-2的酪氨酸残基,从而诱导IRS与含有SH2结构域的效应蛋白相互作用,进一步激活细胞内3-磷酸肌醇通路的级联下传,促进胰岛素信号转导,发挥其生理效应。而PTP1B通过诱导IR和底物去磷酸化,使胰岛素信号转导失活,从而产生胰岛素抵抗^[9]。流行病学调查研究^[10-14]表明:PTP1B基因多态性与糖尿病^[10-11]、高血压^[12]、肥胖^[13]等胰岛素抵抗疾病的发生、发展密切相关^[14]。鉴于PTP1B在胰岛素抵抗中的重要作用,因此开发选择性的PTP1B抑制剂成为治疗代谢性疾病的药物新热点^[15]。

PTP1B不仅能负性调控胰岛素信号,也是瘦素信号通路的关键调节因子。瘦素(Leptin)通过与受体(LepR)结合,激活JAK2/SATA3磷酸化,参与摄食、脂质代谢及能量平衡等生理过程^[16]。研究^[17]表明:PTP1B通过调节JAK2/SATA3去磷酸化水平,引起LepR不能对瘦素产生正常的应答,从而导致高瘦素血症及瘦素抵抗。

近年来研究^[18-21]表明:PTP1B通过调控下游底物如IGF-1, PERK, PDGF, BDNF等受体的磷酸

化水平,在细胞增殖与凋亡、转移及ER应激发挥重要作用,与免疫、神经系统及肿瘤等疾病的发生密切相关,但其确切的机制尚未完全明确。

2 PTP1B与视网膜疾病

PTP1B及下游的信号蛋白已被证实广泛表达于视网膜的各层结构中,包括视杆细胞、内皮细胞及色素上皮细胞^[22-23]等。最新资料^[24-25]显示:PTP1B调控的下游信号与视网膜中神经及色素细胞的生长、发育、营养、凋亡等密切相关。因此PTP1B在视网膜病变中的作用日益受到关注,以PTP1B为靶点干预成为视网膜病变防治的潜在方向之一。

2.1 糖尿病视网膜病

最新流行病学资料^[26]显示:约有25%的糖尿病患者伴有不同程度的视网膜病变,视网膜病变的患病率约为23.0%~43.0%,是致盲的主要原因之一。糖尿病可累及视网膜神经与血管,引起神经退行性变、胶质细胞增生、神经炎症、血-视网膜屏障破坏,黄斑水肿,新生血管生成及纤维化等病变,但其发病机制尚未完全明确。视网膜中IR信号通路的异常是引起糖尿病视网膜病变的关键因素^[27],因此寻找胰岛素信号通路中的关键靶点并干预是拓宽糖尿病视网膜病变的途径之一。Rajala等^[28]研究发现:在强光刺激下,PTP1B基因敲除小鼠光感受器退行性病变的程度明显要低于野生型小鼠,同时伴有IR信号通路的激活,提示PTP1B诱导视网膜神经细胞的损伤与胰岛素信号通路的负性调节密切相关;其进一步研究证实:糖尿病小鼠视网膜光感受器细胞中的PTP1B的mRNA及蛋白表达较正常小鼠明显增高;体外试验也发现高糖诱导视网膜及光感细胞中过度表达PTP1B,同时伴有细胞凋亡增加,推测诱导细胞凋亡可能是PTP1B过度表达引起糖尿病视网膜病变的病理生理机制。

IGF-1信号通路也存在于视网膜神经元中,并与视网膜的生长代谢、生理功能及生存状态密切相关,尤其对光感受器的生存具有重要作用,其信号通路受损可加重糖尿病性视网膜病变。在生理状态下,IGF-1作为一种神经营养因子,通过(在视网膜神经元)与受体结合激活磷酸肌醇3-激酶

(PI3K)/Akt通路, 抑制细胞发生凋亡。视杆细胞中PTP1B通过去磷酸化负性调控IGF-IR介导的信号转导, 降低IGF-1的神经保护作用。在Arroba等^[29]的研究中, PTPN1基因缺乏的患者视网膜中IGF-IR/Akt信号通路增强, 因此调控视网膜细胞中的IGF-IR信号可能是PTP1B靶向治疗糖尿病视网膜病变的机制之一。

2.2 视网膜色素变性

视网膜色素变性(retinitis pigmentosa, RP)作为一种致盲的遗传性视网膜变性疾病, 是视网膜变性中最常见的临床亚型, 主要表现为光感受器的退化^[30]。Punzo等^[31]研究表明: 在RP的小鼠模型中, 激活胰岛素/mTOR信号通路可抑制视网膜锥体细胞的死亡, 由此可见, 视网膜中IR/PI3K/Akt信号通路对于光感受器神经元的存活具有重要的意义。在生理条件下, 光照通过促进光感受器神经元中IR/PI3K/Akt信号转导^[32], 激活己糖激酶与线粒体, 从而延缓视网膜视锥细胞和视杆细胞的凋亡。而IR信号通路异常可引起光感受器变性, 进一步加重RP^[33]。PTP1B是IR信号的关键负性转导因子, 抑制剂可促进IR信号及下游的级联反应, 但能否对视网膜光感受器具有保护作用还有待进一步动物及临床研究证实。

2.3 Leber 先天性黑矇症

Leber先天性黑矇症(Leber congenital amaurosis, LCA)是一种严重的常染色体隐性遗传病, 患者双眼锥杆细胞的功能往往在出生时或出生后1年内完全丧失^[34], 目前缺乏特异性的治疗。Rajala等^[28]在研究Leber先天性黑矇的小鼠模型中意外发现该小鼠视网膜中的PTP1B活性显著提高。而PTP1B的下游信号通路IR/IGF与视网膜感光细胞的增殖及凋亡相关, 因此深入探讨PTP1B及信号通路在Leber先天性黑矇症的作用有望为其治疗提供新的思路和方向。

2.4 增生性玻璃体视网膜病

增生性玻璃体视网膜病(proliferative vitreoretinopathy, PVR)多发生于孔源性视网膜脱离后, 是玻璃体手术失败的常见原因, 预后较差。目前认为PVR的发生与视网膜色素上皮(retinal pigment epithelium, RPE)细胞的迁移密切相关。

在视网膜或脉络膜损伤时, RPE细胞通过受损的血-视网膜屏障暴露于血清, 在视网膜表面上形成病理膜, 萎缩的病理膜可导致复发性视网膜脱离和视力丧失。因而, 能否阻断RPE的迁徙是目前预防及治疗PVR疾病的关键。Du等^[35-36]发现视网膜脱落的大鼠RPE细胞中PTP1B的表达下降。经PTP1B抑制剂TCS-401或siRNA-PTP1B处理后的RPE细胞周期蛋白A和周期蛋白D1表达增加, 细胞增殖与分化明显。迁移实验^[37]进一步表明: PTP1B能降低RPE细胞的迁移活性, 抑制肌成纤维细胞的分化, 其作用与调控细胞外信号调节激酶(extracellular signal-regulated kinase, Erk)及蛋白激酶B(protein kinase B, Akt)的磷酸化水平有关。上述研究表明Erk和Akt信号传导通路可能在PVR形成过程中起重要作用, 而PTP1B作为Erk和Akt信号通路的关键调控分子, 可能成为深入研究PVR发生发展的有效策略之一。

3 结语

综上, PTP1B通过调控IR/PI-3K, IGF-IR/Akt, Erk等信号通路, 参与了多种视网膜疾病的发生和发展, 包括糖尿病视网膜病、RP及PVR等。因此以PTP1为靶点, 探索视网膜病变的防治是具有重要临床意义和广阔的前景。

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