Isorhamnetin inhibits IL-1β-induced expression of inflammatory mediators in human chondrocytes

JIN LI1, RUISHAN WU2, XIAOPING QIN3, DONGYANG LIU4, FENJIE LIN1 and QINGLU FENG5

1Department of Pain Management, The First Affiliated Hospital of Jinan University; 2Department of Laboratory, Guangdong Provincial Family Planning Science and Technology Research Institute; 3Department of Urology, The First Affiliated Hospital of Jinan University; 4Department of Gynecology and Obstetrics, The Second Affiliated Hospital of Guangzhou Medical University, Guangzhou, Guangdong 510000; 5Department of Pharmacy, The First Affiliated Hospital of Shenzhen University, Shenzhen, Guangdong 518000, P.R. China

Received May 25, 2016; Accepted April 10, 2017

DOI: 10.3892/mmr.2017.7041

Abstract. Isorhamnetin (ISH) is a flavonoid primarily obtained from the fruit of Hippophae rhamnoides L., which possesses anti-inflammatory properties. However, the effect of ISH on the expression of inflammatory mediators in response to interleukin (IL)-1β stimulation has not been elucidated. The present study investigated the effects of ISH on the expression of inflammatory mediators in human chondrocytes, induced by IL-1β. The results of the present study demonstrated that pretreatment with ISH inhibited the expression of stromelysin-1 and collagenase 3 in chondrocytes, induced by IL-1β. Pretreatment with ISH inhibited the IL-1β-stimulated synthesis of NO and prostaglandin E2 induced by IL-1β, in addition to the expression of inducible nitric oxide synthase and prostaglandin G/H synthase 2 in chondrocytes. Additionally, ISH inhibited the expression of nuclear factor (NF)-κB and transcription factor p65, and the degradation of NF-κB inhibitor α induced by IL-1β in chondrocytes. In conclusion, the results of the present study indicated that ISH exhibited anti-inflammatory and chondroprotective effects in IL-1β-stimulated chondrocytes. The results of the present study suggest that ISH may be a potential agent in the future treatment of osteoarthritis.

Introduction

Osteoarthritis (OA) is a common degenerative joint disease, characterized by loss of articular cartilage and inflammation of the synovium (1). In OA treatment, currently-used drugs, including non-steroidal anti-inflammatory drugs, are only temporarily effective and exhibit numerous side effects (2-4). Therefore, the development of novel, safe and more effective therapeutic strategies to treat OA is required.

Previous studies have demonstrated that inflammation is one of the primary contributors to the development of OA (5-7). Interleukin (IL)-1β, a pro-inflammatory and pro-catabolic cytokine, has been demonstrated to stimulate chondrocytes to produce NO, matrix metalloproteinases and proteins of the a distegrin and metalloproteinase with thrombospondin motifs family, and suppresses the synthesis of aggrecan and collagen type II (8).

Isorhamnetin (ISH), one of the primary active components isolated from the traditional Chinese herb pollen of Typha angustifoliae, or Hippophae rhamnoides L., is commonly used in the treatment of ischemic heart disease and circulatory disorders. Previous studies have demonstrated that isorhamnetin (ISH) exhibits a range of biological properties including anticancer, antioxidant and anti-inflammatory effects (9-11). Dou et al (12) reported that ISH alleviated inflammation by inhibiting the activity of myeloperoxidase, the levels of tumor necrosis factor-α and IL-6, the mRNA expression of pro-inflammatory mediators [inducible nitric oxide synthase (iNOS), intercellular adhesion molecule 1, prostaglandin G/H synthase 2 (COX2), IL-2 and IL-6] and the phosphorylation of nuclear factor (NF)-κB inhibitor α (IκBα) and transcription factor p65 (p56) in inflammatory bowel disease. Recently, a study demonstrated that ISH attenuated collagen-induced arthritis (13). However, the effect of ISH on the expression of inflammatory mediators in response to IL-1β stimulation has not been investigated. The present study investigated the effects of ISH on the expression of inflammatory mediators in human chondrocytes stimulated with IL-1β. In addition, the mechanism of the protective role of ISH in chondrocytes was examined.

Materials and methods

Preparation of chondrocytes. Following approval from the Institutional Ethics Committee Board of The First Affiliated Hospital of Jinan University (Guangzhou, China) and obtaining of written informed consent, cartilage was obtained

Correspondence to: Dr Qinglu Feng, Department of Pharmacy, The First Affiliated Hospital of Shenzhen University, 3002 Sungang West Road, Futian, Shenzhen, Guangdong 518000, P.R. China
E-mail: feng_qinglu@126.com

Key words: isorhamnetin, osteoarthritis, chondrocyte, interleukin-1β, nuclear factor-κB

Preparation of written informed consent, cartilage was obtained
from five female patients (64±6 years old) with OA who had undergone total knee joint replacement surgery at the First Affiliated Hospital of Jinan University between May and July 2014. The preparation of chondrocytes from cartilage was performed as previously described (14). The full-thickness articular cartilage was removed from the underlying bone and homogenized. Following enzymatic digestion with 0.25% trypsin for 30 min, the specimens were digested with 0.25 mg/ml collagenase I (Sigma-Aldrich; Merck KGaA, Darmstadt, Germany) in Dulbecco's modified Eagle's medium (DMEM; Invitrogen; Thermo Fisher Scientific, Inc., Waltham, MA, USA) containing 10% fetal bovine serum (FBS; Gibco; Thermo Fisher Scientific, Inc.) overnight at 37°C. The articular chondrocytes were cultured in DMEM containing 10% FBS, penicillin (100 units/ml; Sigma-Aldrich; Merck KGaA) and streptomycin (100 µg/ml; Sigma-Aldrich; Merck KGaA) at 37°C in a humidified atmosphere containing 5% CO₂. Chondrocytes were used for further experiments when they had reached 80-90% confluence, and passage 2-4 chondrocytes were used.

Cell viability assay. Cell viability was evaluated using an MTT assay. Human OA chondrocytes at a density of 1x10⁴ cells/well were pretreated with 10, 50 or 100 µg/ml ISH (Sigma-Aldrich; Merck KGaA) for 2 or 48 h at 37°C. Chondrocytes were subsequently incubated with or without 10 ng/ml IL-1β to stimulate for 24 h. The medium was removed, and 20 µl MTT (5 mg/ml; Sigma-Aldrich; Merck KGaA) was added to each well and cultured for an additional 4 h at 37°C. Following removal of the supernatant, 150 µl dimethyl sulfoxide was added to each well. The absorbance of each well was determined at a wavelength of 570 nm using a Dynatech MR5000 plate reader (Dynatech Laboratories, Inc., Chantilly, VA, USA).

Reverse transcription-quantitative polymerase chain reaction (RT-qPCR). Total RNA was isolated from chondrocytes using TRIzol (Invitrogen; Thermo Fisher Scientific, Inc.), according to the manufacturer's protocol. A total of 2 µg total RNA was reverse-transcribed using the PrimeScript RT reagent kit (Takara Biotechnology Co., Ltd., Dalian, China). The qPCR analysis was performed using an ABI PRISM 7700 Sequence Detector System and the SYBR-Green PCR Master Mix kit (Applied Biosystems; Thermo Fisher Scientific, Inc.), according to the manufacturer's protocol. The sequences of the human-specific primers were: Sense, 5'-TTTCCAAGACACTTCACA-3' and antisense, 5'-ATCTCCTTTGTACC GCTTCC-3' iNOS; sense, 5'-GAGAGATGTATCCCTCCA CAGTCA-3' and antisense, 5'-GACCAGGACACCAAGCAA AG-3' for COX-2; and sense, 5'-ATGACAATCCTCCTCAAGA T-3' and antisense, 5'-GATCCACAACGCATATT-3' for GAPDH. The PCR cycling program was as follows: 95°C for 3 min, followed by 35 cycles of 95°C for 20 sec, 59°C for 20 sec and 72°C for 20 sec, and a final extension at 72°C for 5 min. The data obtained were analyzed using the 2^ΔΔCq method (15).

Western blot analysis. Proteins were extracted from chondrocytes using radioimmunoprecipitation assay lysis buffer (Beyotime Institute of Biotechnology, Haimen, China) and the protein concentration was quantified using the Bradford assay. Equal amounts of protein (30 µg) were separated using SDS-PAGE on a 10% gel and blotted onto a nitrocellulose membrane (GE Healthcare Life Sciences, Little Chalfont, UK). Following blocking with 2% non-fat milk in TBS with 0.1% Tween-20 (TBST) at room temperature for 1 h, the blots were incubated with primary antibodies, including anti-iNOS (SAB4502012; Sigma-Aldrich; Merck KGaA), anti-COX2 (sc-19999), anti-phosphorylated p65 (sc-135769), anti-IκBα (sc-1643) and anti-GAPDH (sc-365062) (all 1:5,000; Santa Cruz Biotechnology, Inc., Dallas, TX, USA) at 4°C overnight. The membranes were subsequently incubated with the horseradish peroxidase-conjugated secondary antibody goat anti-rabbit immunoglobulin G (1:5,000; sc-2004; Santa Cruz Biotechnology, Inc.) or goat-anti-mouse immunoglobulin G (1:5,000; sc-2005; Santa Cruz Biotechnology, Inc.) for 1 h at room temperature. Protein bands were visualized using an enhanced chemiluminescence kit (GE Healthcare Life Sciences). Quantification was performed using Gel-Pro Analyzer software (version 4.0; Media Cybernetics, Inc., Rockville, MD, USA).

Measurement of matrix metalloproteinases (MMPs), NO and prostaglandin E2 (PGE2). The concentrations of stromelysin-1 (MMP-3; BMS2014-3), collagenase 3 (MMP-13; EHMMP13) and PGE2 (KHL1701) in the culture medium were measured using ELISA kits (Invitrogen; Thermo Fisher Scientific, Inc.), according to the manufacturer's protocol. The nitrite levels in the cell culture supernatant were measured using the Griess reaction, as previously described (16).

Statistical analysis. Data was analyzed using SPSS software version 13.0 (SPSS Inc., Chicago, IL, USA). Experimental data are presented as the mean ± standard deviation of triplicate independent samples. One-way analysis of variance followed by Dunnett's multiple comparisons post hoc test and Student's unpaired t-tests were used for the statistical analyses. P<0.05 was considered to indicate a statistically significant difference.

Results

Effect of ISH on chondrocyte viability and IL-1β-induced damage. Cell viability was evaluated following treatment with ISH using an MTT assay. The results demonstrated that there were no significant differences in absorbance among the treated groups, indicating that ISH exerted no cytotoxic effects on chondrocytes at the assayed concentrations (Fig. 1A).

The protective effect of ISH against IL-1β-induced cytotoxicity was investigated. As presented in Fig. 1B, treatment with IL-1β significantly decreased cell viability, and this effect was reversed by the addition of ISH at concentrations of 10, 50 or 100 µg/ml.

ISH inhibits the IL-1β-induced production of MMP-3 and MMP-13 in OA chondrocytes. As MMPs play important roles in the development and progression of OA, the effects of ISH on the production of MMP-13 and MMP-13 in IL-1β-treated human OA chondrocytes were investigated. As presented in Fig. 2, IL-1β significantly promoted the production of MMP-3 and MMP-13 in human OA chondrocytes compared with the control group. However, treatment with ISH significantly inhibited the increased production of MMP-3 and MMP-13 which had been induced by IL-1β.
ISH inhibits the IL-1β-induced expression of iNOS and COX-2 in OA chondrocytes. The effects of ISH on the expression of iNOS and COX-2 in IL-1β-treated human OA chondrocytes were investigated. The results of the RT-qPCR analysis demonstrated that IL-1β induced a significant upregulation of iNOS and COX-2 in IL-1β-stimulated human OA chondrocytes compared with the control group. ISH significantly suppressed the mRNA expression of iNOS and COX-2 in IL-1β-stimulated human OA chondrocytes (Fig. 3A and B). Western blot analysis demonstrated that ISH suppressed the protein expression levels of iNOS and COX-2 in IL-1β-stimulated human OA chondrocytes (Fig. 3C).

ISH inhibits the IL-1β-induced production of NO and PGE2 in OA chondrocytes. The effect of ISH on NO and PGE2 production in human OA chondrocytes induced by IL-1β was analyzed, following 24 h of incubation. The results of the present study demonstrated that treatment with IL-1β induced nitrite accumulation, which was significantly attenuated by ISH (Fig. 4A). Similarly, ISH significantly suppressed the IL-1β-induced production of PGE2 in human OA chondrocytes (Fig. 4B).

Effects of ISH on NF-κB activation and IkBα degradation in chondrocytes. In order to further analyze the effect of ISH on the NF-κB signaling pathway, western blotting was performed to analyze the effect of ISH on the expression of p65 and IkBα in IL-1β-stimulated human OA chondrocytes. As presented in Fig. 5, ISH suppressed the activation of p65 and the degradation of IkBα, induced by IL-1β, in human OA chondrocytes.

Discussion

To the best of our knowledge, the present study was the first to demonstrate that pretreatment with ISH inhibited the production of MMP-3 and MMP-13 in human OA chondrocytes stimulated with IL-1β. Pretreatment with ISH significantly inhibited the IL-1β-stimulated production of NO and PGE2, in addition to the expression of iNOS and COX-2 in human OA chondrocytes. Additionally, ISH inhibited the expression of p65 and the degradation of IkB-α, induced by IL-1β, in human OA chondrocytes.
Inflammatory cytokines, including IL-1β, serve important roles in the development of OA. It was previously demonstrated that IL-1β expression is increased in OA cartilage (17). IL-1β has been used as a pro-inflammatory factor to mimic the OA microenvironment for an in vitro study (18). In the present study, the effects of ISH on the expression of inflammatory mediators were assessed in human OA chondrocytes stimulated with IL-1β.

MMPs serve roles in cartilage degradation during OA. Previous studies have demonstrated that the expression levels of MMPs were increased in OA (19-21). In addition, IL-1β is able to upregulate the production of MMP-3 and MMP-13 in human OA chondrocytes (22). Consistent with the previous studies, the results of the present study demonstrated that ISH inhibited the IL-1β-induced production of MMP-3 and MMP-13 in human OA chondrocytes. The present data suggest that ISH exerts an anti-arthritic effect by inhibiting the expression of MMPs.

NO has been demonstrated to be an important inflammatory mediator in the pathogenesis of OA (23). NO is able to induce the production of PGE2 and inflammatory cytokines (24). PGE2 has been observed to be associated with the degeneration of articular cartilage, and its expression is elevated in patients with OA (25). Treatment with IL-1β is able to upregulate the expression of iNOS and COX-2, which induces the production of NO and PGE2 in chondrocytes (26). A recent study demonstrated that ISH-3-O-glucuronide suppressed the lipopolysaccharide-induced extracellular secretion of the pro-inflammatory mediators NO and PGE2, and the expression of the pro-inflammatory proteins iNOS and COX-2, in RAW264.7 macrophage cells (27). Consistent with previous results, the results of the present study demonstrated that ISH inhibited the IL-1β-induced production of NO and PGE2, and the expression of iNOS and COX-2, in a dose-dependent manner in human OA chondrocytes. It was hypothesized that...
the inhibition of NO and PGE2 by ISH may be associated with the regulation of the expression of iNOS and COX-2 in human OA chondrocytes.

NF-κB is an important factor in the development of OA (28). Under normal conditions, NF-κB is sequestered in the cytoplasm and bound to its inhibitor IκB. With certain stimuli, including IL-1β, p65 translocates from the cytoplasm to the nucleus to regulate the production of inflammatory mediators, including MMPs, NO and PGE2 (29,30). In human chondrocytes, the NF-κB inhibitor was demonstrated to decrease the production of MMP-3 and MMP-13 following stimulation with IL-1β (31). In the present study, it was observed that ISH decreased the activation of p65, and the degradation of IκBα, induced by IL-1β in human OA chondrocytes. In a previous study, Li et al (32) reported that ISH ameliorated the LPS-induced inflammatory response through downregulation of the NF-κB signaling pathway in RAW264.7 cells. The results of the present study demonstrated that ISH inhibited IL-1β-induced expression of inflammatory mediators in human OA chondrocytes through suppression of the activation of the NF-κB signaling pathway.

In conclusion, the results of the present study demonstrated that ISH exhibited anti-inflammatory and chondroprotective effects in IL-1β-stimulated human OA chondrocytes. The present study provides evidence to suggest that ISH may be an effective agent in the treatment of OA in the future.
References