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1	LRP1 controls TNF release via the TIMP-3/ADAM17 axis in endotoxin-activated
2	macrophages.
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4	Running title: LRP1 regulates macrophage TNF release
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18	
19	Abbreviations used in this article: ADAM, a disintegrin and metalloproteinase; HSPG, heparan
20	sulfate proteoglycan; LRP1, low-density lipoprotein receptor-related protein 1; MTS, 3-(4,5-
21	dimethylthiazol-2-yl)-5-(3-carboxymethoxyphenyl)-2-(4-sulfophenyl)-2H-tetrazolium; RAP,
22	receptor-associated protein; TACE, TNF-α-converting enzyme; TIMP-3, tissue inhibitor of
23	metalloproteinases 3.
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30 Abstract: The metalloproteinase ADAM17 plays a pivotal role in initiating inflammation by releasing TNF from its precursor. Prolonged TNF release causes many chronic inflammatory 31 diseases, indicating that tight regulation of ADAM17 activity is essential for resolution of 32 inflammation. Here, we report that the endogenous ADAM17 inhibitor TIMP-3 inhibits ADAM17 33 activity only when it is bound to the cell surface, and that cell surface levels of TIMP-3 in 34 endotoxin-activated human macrophages are dynamically controlled by the endocytic receptor 35 LRP1. Pharmacological blockade of LRP1 inhibited endocytic clearance of TIMP-3, leading to an 36 increase in cell surface levels of the inhibitor that blocked TNF release. Following LPS stimulation, 37 38 TIMP-3 levels on the surface of macrophages increased 4-fold within 4 hours and continued to accumulate at 6 h, before a return to baseline levels at 8 h. This dynamic regulation of cell surface 39 TIMP-3 levels was independent of changes in TIMP-3 mRNA levels, but correlated with shedding 40 of LRP1. These results shed light on the basic mechanisms that maintain a regulated inflammatory 41 response and ensure its timely resolution. 42

43 Introduction

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A disintegrin and metalloproteinase 17 (ADAM17) regulates paracrine and autocrine immune 45 signalling, cell proliferation, tissue regeneration and cancer progression through its ability to cleave 46 47 or 'shed' the transmembrane precursors of multiple cytokine and growth factor proteins and receptors. Key ADAM17 substrates include the precursor form of the inflammatory cytokine TNF, 48 giving the enzyme its alternative name of TNF- α -converting enzyme (TACE) (1-4). While the 49 transmembrane TNF precursor has biological activity, in vivo studies indicate that the soluble form 50 of the cytokine plays indispensable roles in initiating paracrine signalling events central to acute 51 inflammatory responses (5, 6). 52

ADAM17 activity is rapidly induced in response to LPS or PMA stimulation, without any 53 increase in its cell surface expression. Many mechanisms have been proposed to explain this 54 phenomenon, including compartmentalisation of the enzyme in membrane micro-domains (7, 8) 55 and conformational changes in the ADAM17 ectodomain (9, 10), postulated to involve protein 56 57 disulfide isomerase (10, 11) and/or interaction of juxta-membrane regions of ADAM17 with the lipid bilayer (12). Phosphorylation of the intracellular domain of ADAM17 affects activity in some 58 cases (13-17), but not all (9). ADAM17 activity may also be regulated by substrate availability, 59 either by localisation (7), dimerization (18), intracellular domain phosphorylation (19) or 60 glycosylation (20). Regulation of ADAM17 intracellular trafficking by iRhoms (21-23) and the 61 sorting protein PACS2 (24) also contribute to the inter-related network of molecular mechanisms 62 regulating ADAM17 activation. 63

Prolonged or increased TNF release is associated with numerous inflammatory conditions, such as septic shock (25), rheumatoid arthritis (26), colitis (27, 28) and Crohn's disease (29), indicating that ADAM17 activity must be tightly regulated. Although activation of ADAM17 has been studied in detail, mechanisms controlling resolution of ADAM17 activity are less well understood.

Tissue inhibitor of metalloproteinases 3 (TIMP-3) inhibits ADAM17 activity by forming a high affinity 1:1 stoichiometric complex with the enzyme (30). *Timp3*-null mice exhibit increased TNF release (5, 31-33) and increased susceptibility to TNF-associated tissue damage in models of diabetes (31), atherosclerosis (34), kidney fibrosis (33), lung injury (35) and liver regeneration (5). These studies indicate that TIMP-3 is the primary physiological inhibitor of ADAM17 and that TIMP-3 is critical for termination of TNF release. 75 We have previously demonstrated that extracellular levels of TIMP-3 in chondrocytes are primarily regulated post-translationally, by endocytosis via the endocytic scavenger receptor low-76 density lipoprotein receptor-related protein 1 (LRP1) and subsequent degradation in lysosomes (36-77 38). Since LRP1 is also highly expressed in macrophages (39, 40), we investigated whether LRP1 78 79 also controls TIMP-3 levels in these cells and whether LRP1 has an impact on the duration of ADAM17 activity and TNF release. By studying primary human macrophages stimulated with 80 81 LPS, we were able to gain insight into physiological TIMP-3 and ADAM17 regulation that has not been observed in previous studies using macrophage-like cell lines (e.g. THP-1 or U937) or non-82 physiological stimuli (e. g. PMA). We found that LPS-induced shedding of LRP1 from activated 83 macrophages led to an accumulation of TIMP-3 on the cell surface, and consequent inhibition of 84 TNF release. LRP1 thus controls the duration of ADAM17 activity by regulating the abundance of 85 its inhibitor, and contributes to the regulated resolution of inflammation. 86

87 Materials and methods

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89 *Materials*

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91 FCS was from Life Technologies, RPMI-1640 medium from PAA Laboratories, recombinant human GM-CSF, M-CSF and IL-4 were from Peprotech. Ultra-pure LPS from E. coli 0111:B4 was 92 93 from Invivogen. Recombinant human TIMP-3, TIMP-3 blocking antibody (catalogue number MAB973, clone number 183551) and IL-6 receptor ELISA kit were from R&D Systems. For 94 immunoblotting, the TIMP-3 antibody (AB6000) was from Merck Millipore, and the actin antibody 95 (ab3280) from Abcam. LRP1 blocking antibody (01-05) was purchased from BioMac. Porcine 96 mucosal heparin, PMA and ionomycin were from Sigma-Aldrich (St Louis, MO, USA). Receptor 97 associated protein (RAP) was expressed in *E. coli* and purified as previously described (41), with 98 addition of a Triton X-114 washing step to remove LPS (42). Removal of LPS was confirmed by 99 the Limulus Amebocyte Lysate assay (Pierce). 100

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102 *Cell isolation and culture*

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104 Enriched populations of human monocytes and lymphocytes were isolated from the blood of healthy donors by elutriation. Macrophages were differentiated from monocytes by 5 days of 105 culture in RPMI-1640 medium supplemented with 50 ng/ml GM-CSF and 20 % FCS, or 100 ng/ml 106 M-CSF and 5 % FCS. Dendritic cells were differentiated from monocytes by 6 days of culture in 107 RPMI-1640 medium supplemented with 5 % FCS, 50 ng/ml GM-CSF and 10 ng/ml IL-4. CD4+ T 108 cells were obtained from enriched lymphocytes populations by negative magnetic separation 109 (Miltenyi Biotec) and cultured in RPMI-1640 medium supplemented with 10% FCS and 1% 110 penicillin/streptomycin. CD4+ T cells were stimulated with 20 ng/ml PMA and 0.5 µg/ml 111 ionomycin for 4 h. Cell viability was assessed using 3-(4,5-dimethylthiazol-2-yl)-5-(3-112 carboxymethoxyphenyl)-2-(4-sulfophenyl)-2H-tetrazolium (MTS, Promega) according to the 113 manufacturer's instructions. 114

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116 LRP1 blockade
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118 Cells were treated for 16 h with RAP (1 μ M), heparin (200 μ g/ml, Sigma-Aldrich), LRP1 blocking 119 antibody (10 μ g/ml, BioMac), TIMP-3 antibody (10 μ g/ml, catalogue number 183551, R&D

- Systems) or matching isotype controls (10 μ g/ml) in RPMI-1640 supplemented with 10 % FCS for 16 h. Cells were then stimulated with LPS (100 ng/ml) for 4 h.
- 122
- 123 Measurement of cytokine production
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125 Cells were stimulated with LPS (100 ng/ml) in RPMI-1640 supplemented with 10 % FCS for 1 - 48 126 h. Media were harvested and TNF secretion quantified using the OptEIA ELISA kit for human TNF 127 (BD Bioscience). The rate of TNF release per hour was estimated from cumulative TNF release 128 using the formula: $\Delta TNF/hour = \frac{[TNF]x - [TNF]y}{x-y}$, where x and y represent successive time points.

129

130 *Flow cytometry*

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Macrophages were detached by incubating in 2 mM EDTA/PBS for 10 min at 37 °C. Fc receptors 132 were blocked using 10% human AB serum. Cells were stained with fixable viability dye 133 (eBioscience), conjugated antibodies against ADAM17 (FAB9301F, R&D Systems), LRP-1 α-134 135 chain (12-0919-42, eBioscience), LRP1 β-chain (FAB6360A, R&D Systems), membrane TNF (HM2024F, Hycult Biotech) or matching isotope controls for 30 min at 4 °C, washed and fixed. 136 137 The antibody against the LRP1 β -chain recognises the intracellular portion of the β -chain, and cells 138 were thus permeabilised using the Cytofix/Cytoperm Kit (BD Bioscience) according to manufacturer's instructions. Samples were then analyzed on an LSRII (BD Bioscience) and viable, 139 single cells were analyzed with FlowJo software (TreeStar). 140

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- 142 *RNA extraction and quantitative real-time RT-PCR*
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Total RNA was extracted from cells with the RNeasy Mini kit (Qiagen) according to the manufacturer's instructions, chromosomal DNA was eliminated using DNase I digestion (Qiagen), then cDNA was synthesized from 500 ng total RNA with a High Capacity cDNA Reverse Transcriptase kit (Applied Biosystems). Gene expression was measured by the change-in-threshold ($\Delta\Delta$ Ct) method, based on quantitative real-time PCR in a ViiA 7 Real-Time PCR System (Applied Biosystems, Foster City, CA, USA) with TaqMan primer sets for human TNF, TIMP-3, LRP1, and RPLP0 (Applied Biosystems) and 5 µl of a 1:5 dilution of the 20 µl cDNA reaction.

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152 Surface biotinylation and TIMP-3 immunoblotting

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1x10⁷ macrophages were washed 3 times in ice-cold PBS, and incubated in 1 mg/ml Sulfo-NHS-154 LC-Biotin (Thermo Fisher Scientific) for 30 min on ice. To guench excess unbound biotin, cells 155 were washed 3 times in 100 mM glycine in PBS. Cells were lysed in RIPA buffer [50 mM Tris-156 HCl, pH 7.4, 150 mM NaCl, 1% Triton X-100, 0.5% sodium deoxycholate, 0.1% SDS, containing 157 complete protease inhibitor cocktail (Roche) and 10 mM 1,10-phenanthroline (Sigma-Aldrich)] and 158 total protein concentration was determined by DC-Protein Assay (Bio-Rad). Biotinylated surface 159 proteins were isolated from 500 µg of total cell lysate by adding high capacity avidin agarose beads 160 (Pierce) to the lysates (overnight, 4 °C). The avidin agarose beads were washed 3 times with RIPA 161 buffer containing 300 mM NaCl, and bound proteins eluted with SDS sample buffer (50 µl). For 162 analysis of TIMP-3 in conditioned medium, cells were treated in serum-free medium and proteins 163 concentrated by addition of 5 % trichloroacetic acid to the harvested medium before 164 immunoblotting. Samples were resolved on a NuPage 4-20% Tris-glycine gel (Invitrogen) and 165 transferred to PVDF using a TransBlot Turbo blotting system (BioRad). Blots were blocked in 5% 166 milk powder in PBS, and TIMP-3 detected using a rabbit polyclonal antibody (AB6000, Merck 167 Millipore). 168

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172 Statistical analysis was carried out with GraphPad Prism 6.0. Data are shown as mean + SEM.

173 Mean values were compares using two-tailed student's *t*-test or Mann-Whitney tests as appropriate.

174 P values of < 0.05 were considered statistically significant.

¹⁷⁰ *Statistical analysis*

175 **Results**

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177 Blockade of LRP1 endocytic pathway increases cell surface TIMP-3

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To evaluate if LRP1 regulates TIMP-3 levels in macrophages, we treated GM-CSF-differentiated primary human macrophages with recombinant RAP, an antagonist of ligand binding to LRP receptors, and measured levels of TIMP-3 on the cell surface and in the conditioned medium. Cell surface levels of TIMP-3 increased after 4 h of LPS stimulation, and were further elevated by blockade of the LRP1 pathway with RAP (Fig. 1A). RAP had no effect on cell surface TIMP-3 levels in unstimulated cells (Fig. 1A) or on levels of TIMP-3 in the conditioned medium (Fig. 1B).

TIMP-3 has been shown to bind to heparan sulfate proteoglycans and can be solubilised from these binding sites by heparin (43). We found that heparin reduced levels of TIMP-3 on the cell surface and greatly increased levels of the inhibitor in the medium of GM-CSF-differentiated primary human macrophages (Fig. 1A, B). This suggests that heparin redistributes TIMP-3 from the cell surface into the medium, and in so doing, blocks its endocytosis by LRP1 and increases total TIMP-3 levels.

The increase in cell surface TIMP-3 upon RAP treatment correlated with a marked inhibition of TNF release in response to LPS (Fig. 2A). Blockade of LRP1 with RAP similarly inhibited TNF release in primary human monocytes, M-CSF-differentiated macrophages and dendritic cells (Suppl. Fig. 1). RAP also inhibited ADAM17-dependent shedding of the IL-6 receptor (Fig. 2B). Heparin had no effect on ADAM17 shedding of TNF (Fig. 2A) or IL-6R (Fig. 2B), indicating that TIMP-3/heparin complexes in the medium are unable to inhibit cell surface ADAM17 activity.

197 RAP and heparin had no effect on cell viability (Fig. 2C), or on cell surface levels of proTNF
198 (Fig. 2D) or ADAM17 (Fig. 2E, F).

The effects of RAP could be recapitulated by treating cells with an LRP1 blocking antibody, which dose-dependently inhibited TNF release (Fig. 3A). Conversely, the ability of RAP (Fig. 3B) and the LRP1 blocking antibody (Fig. 3C) to inhibit TNF release were abrogated by co-treatment with a TIMP-3 blocking antibody.

203 LRP1 blockade thus increased levels of TIMP-3 on the surface of LPS-stimulated macrophages204 and inhibited ADAM17-mediated release of TNF.

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206 TIMP-3 accumulation on the cell surface correlates with the drop in TNF release

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We next investigated the dynamics of TIMP-3 regulation in LPS-stimulated macrophages. Stimulation of GM-CSF-differentiated primary human macrophages with LPS induced release of TNF from the cells, with maximal levels of the cytokine accumulating in the medium 8 hours after stimulation (Fig. 4A). From these data, the rate of TNF release per hour was calculated, and found to peak 2 h after addition of LPS (Fig. 4B).

Flow cytometry analysis indicated that cell surface levels of ADAM17 were unchanged by LPS stimulation (Fig. 4C). Using surface biotinylation, we observed that the amount of TIMP-3 on the surface of activated macrophages increased 4-fold within 4 hours of stimulation, and returned to baseline levels by 8 h after LPS addition (Fig. 4D). This dynamic regulation within the first 8 hours after stimulation was not accompanied by any change in TIMP-3 mRNA levels, although reduced mRNA expression was observed 24 hours after stimulation (Fig. 4E).

The anti-inflammatory cytokine IL-10 has previously been shown to inhibit TNF release by both TIMP-3-dependent and -independent mechanisms (44). We found that IL-10 and RAP inhibited TNF release additively (Fig. 4F), suggesting they act through different mechanisms.

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223 *LRP1 is shed from the cell surface during resolution of inflammation.*

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225 LRP1-mediated endocytosis can be regulated by shedding of the receptor, as it reduces the 226 endocytic capacity of the cell and the released LRP1 ectodomains act as decoy receptors (36, 45, 227 46). Shedding of LRP1 is mediated by proteases that cleave in the juxta-membrane region of the 228 short transmembrane β -chain of LRP1, releasing the large ligand-binding α -chain from the cell.

We found that LPS stimulation decreased levels of the LRP1 α-chain on the surface of LPSstimulated macrophages (Fig. 5A, B), while levels of the LRP1 β-chain were not affected (Fig. 5C). The α- and β-chain are generated by cleavage of a single polypeptide chain, and mRNA expression of this LRP1 precursor was similarly not affected by LPS treatment (Fig. 5D). This is consistent with previous reports showing that LPS induces metalloproteinase-dependent shedding of the LRP1 ectodomain (46-49).

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236 *Regulation of TIMP-3 by LRP1 is cell type-dependant*

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We examined whether LRP1 regulates TIMP-3 in other primary human immune cell types. Expression of LRP1 was high in monocytes, dendritic cells, GM-CSF- and M-CSF-differentiated macrophages (Fig. 6A), with lower expression in CD4+ T-cells (Fig. 6A). The pattern of TIMP-3 241 expression was similar, being highest in GM-CSF- and M-CSF-differentiated macrophages, and lowest in CD4+ T-cells (Fig. 6B). Treatment of CD4+ T-cells with PMA/ionomycin stimulated 242 243 them to release TNF, and this was inhibited by addition of 100 nM recombinant TIMP-3 (Fig. 6C), confirming that ADAM17 is responsible for the release. However, RAP had no effect on TNF 244 release from CD4+ T-cells stimulated with PMA/ionomycin (Fig. 6D) or anti-CD3/anti-CD28 (not 245 shown). Similarly, TNF release from CD4+ T-cells was not inhibited by an anti-LRP1 blocking 246 247 antibody (Fig. 6E) or an anti-TIMP-3 antibody (Fig. 6F). Equivalent results were observed in CD8+ T-cells (not shown). This suggests that LRP1 regulates TIMP-3 levels in myeloid lineages but not 248 249 in lymphoid lineages.

250 **Discussion**

Prolonged TNF release is associated with multiple chronic inflammatory conditions, indicating that
 mechanisms modulating ADAM17 activity are important for maintaining a regulated inflammatory
 response.

TIMP-3 is a negative regulator of ADAM17, with Timp3-null mice showing increased TNF 254 release and susceptibility to TNF-dependent tissue damage in a variety of models, such as chronic 255 hepatic inflammation (5), vasculitis (31), cardiac remodelling after myocardial infarction (32), 256 interstitial nephritis and fibrosis (33), atherosclerosis in ApoE-null mice (34), and bleomycin-257 induced lung injury (35). Here, we have shown that the endocytic receptor LRP1 dynamically 258 regulates cell surface levels of TIMP-3 in activated macrophages, and that LRP1 contributes to the 259 timely resolution of inflammatory responses. This temporal regulation is achieved by progressive 260 shedding of LRP1 from the cell surface. 261

Our findings are in agreement with previous murine studies that indicated an anti-inflammatory role for LRP1 in macrophages. Targeted deletion of LRP1 in macrophages increased LPSstimulated TNF release (39, 48) and increased susceptibility to atherosclerosis (39, 50-53). LRP1deficient cells exhibit increased NF- κ B activation (54), consistent with prolonged TNF release, and LRP1-deficient macrophages show an increased inflammatory phenotype (55). Our results have demonstrated that the underlying molecular mechanism for the anti-inflammatory role of LRP1 is its ability to regulate cell surface levels of TIMP-3 and thus to modulate TNF release.

We observed no decrease in cell surface levels of ADAM17 following LPS stimulation, in agreement with previous studies on LPS-stimulated monocytes (1) and THP-1 cells (56). PMA stimulation has been shown to stimulate endocytosis of ADAM17 in THP-1 cells (56), but PMA is a non-physiological activator that acts via protein kinase C, and not via the TLR4 pathway stimulated by LPS. To most closely recapitulate ADAM17 regulation in a physiological context, we thus restricted our study to LPS-stimulated primary human macrophages.

Blocking LRP1 had no effect on cell surface levels of TIMP-3 in the absence of LPS activation, 275 suggesting that TIMP-3 does not bind to LRP1 in the resting state. Xu et al. (15) proposed that 276 TIMP-3 associates with ADAM17 in an inactive complex under basal conditions, and that the 277 TIMP-3/ADAM17 complex dissociates upon activation. We propose that the released TIMP-3 278 binds to LRP1 and is endocytosed during the phase of peak TNF release (Fig. 7). With a slower 279 kinetic, LPS also induces LRP1 shedding, leading to an increase in cell surface levels of TIMP-3 by 280 4 h after stimulation, with consequent inhibition of ADAM17 activity and resolution of TNF 281 release. TIMP-3 is known to bind to heparan sulfate proteoglycans (HSPG) (43), and can be 282

released from cells by heparinase treatment (57), indicating that it may accumulate on cell surface HSPG once LRP1 is shed. Alterations in the sulfation of HSPG may thus affect the efficacy with which TIMP-3 is retained and could be of particular importance in chronic inflammatory conditions (58-60).

Shedding of LRP1 reduces the rate of ligand uptake both by reducing cell surface levels of the 287 receptor, and by the shed receptor acting as a decoy receptor for LRP1 ligands (36, 45, 46). LPS 288 was previously shown to stimulate shedding of LRP1 in macrophages, with shedding detected 289 within 30 minutes of the LPS treatment (46-48). Various LRP1 sheddases have been proposed, 290 291 including ADAM17 (46, 61) and other metalloproteinases such as ADAM10 (61), ADAM12 (62) and MT1-MMP (62), the serine proteinase tissue plasminogen activator (tPA) (63) and the aspartyl 292 proteinase β -secretase (β site of amyloid precursor protein-cleaving enzyme, BACE) (64). It is 293 unclear whether different sheddases act in different tissues, and differences between constitutive 294 and induced shedding of LRP1 have not been systematically investigated. Gorovoy et al. (46) 295 296 reported that ADAM17 is responsible for LPS-induced shedding of LRP1 in RAW 264.7 cells, suggesting that in macrophages, ADAM17 may initiate its own temporal regulation via LRP1 and 297 TIMP-3. 298

Our model in Fig. 7 also illustrates the importance of the LRP1/TIMP-3 axis, since disturbance 299 300 of this process would lead to sustained TNF release and prolonged inflammation. Increased expression of LRP1, which may impair TIMP-3 accumulation, has been observed in chronic 301 inflammatory conditions such as atherosclerosis (65, 66) and multiple sclerosis (67). Increased 302 levels of shed LRP1 have also been reported in chronic inflammatory states such as atherosclerosis 303 304 (68), rheumatoid arthritis (46), systemic lupus erythematosus (46), acute respiratory distress syndrome (69), and liver disease (45). We postulate that release of TNF is prolonged in these 305 conditions due to chronic exposure to activating stimuli, which leads to uninhibited ADAM17 306 activity on the cell surface. Such active ADAM17 may shed LRP1, and may lead to an increase of 307 cell surface TIMP-3, but at a level that is insufficient to block elevated ADAM17 activity. We have 308 recently engineered TIMP-3 mutants that are resistant to LRP1-mediated endocytosis and that have 309 a longer half-life in tissues (38). These mutants may help restore baseline levels of ADAM17 310 activity and promote resolution of inflammation in such conditions. 311

LRP1 does not universally regulate TIMP-3 levels and TNF release. Our results indicate that LRP1 expression is low in T cells, and LRP1 blockade had no effect on their TNF release. TNF expressed in different cell types is thought to have distinct and non-redundant functions, with macrophage-derived TNF playing a dominant role in host defence, and both macrophage- and Tcell-derived TNF contributing to tissue damage in an autoimmune hepatitis model (70, 71). Understanding the cell-specific regulation of TNF release may enable us to develop strategies to
block TNF release in a cell-selective rather than a systemic manner.

Resolution of inflammation is as important as its initiation, and dysregulated resolution is linked with numerous autoimmune diseases. In this study, we have demonstrated the new, previously unexplored concept that the endocytic receptor LRP1 contributes to resolution of inflammation by facilitating a dynamic increase in levels of TIMP-3 on the surface of activated macrophages, thereby terminating TNF release. These findings open new avenues for treating chronic inflammatory conditions.

- 325
- 326 Disclosures
- 327
- 328 The authors have no financial conflicts of interest.
- 329
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575 FIGURE LEGENDS



576 577

FIGURE 1. LRP1 blockade increased levels of TIMP-3 on the cell surface of LPS-stimulated primary 578 579 human macrophages. Macrophages were differentiated in vitro from primary human monocytes by treatment with GM-CSF (50 ng/ml) for 5 days and then treated with RAP (1 µM) or heparin (200 580 µg/ml) for 16 h, before stimulation with LPS (100 ng/ml) for 4 h. (A) Levels of TIMP-3 on the cell 581 surface were quantified by surface biotinylation and streptavidin pulldown, followed by 582 immunoblotting for TIMP-3. Actin levels in cell lysates were determined by immunoblotting of the 583 same samples. Blots show a representative experiment, and graph shows mean (+ SEM, n =3 donors) 584 TIMP-3 levels. (B) Levels of TIMP-3 in the conditioned medium (mean + SEM, n = 6 donors) were 585 quantified by immunoblotting. Blot shows representative experiment, with Ponceau S staining of the 586 same blot as a loading control. 587



Figure 2

589

FIGURE 2. LRP1 blockade inhibited ADAM17 activity in LPS-stimulated macrophages. 590 Macrophages were differentiated in vitro from primary human monocytes by treatment with GM-CSF 591 592 (50 ng/ml) for 5 days and then treated with RAP (1 µM) or heparin (200 µg/ml) for 16 h, before stimulation with LPS (100 ng/ml) for 4 h. (A) TNF release was quantified by ELISA (mean + SEM, n = 593 7 donors). (B) IL-6 receptor (IL-6R) release was quantified by ELISA (mean + SEM, n = 8 donors). (C) 594 Cell viability was determined by MTS assay (mean + SEM, n = 3 donors). (D) Levels of TNF on the 595 cell surface (mTNF) were determined by flow cytometry, gated on single, viable cells (mean + SEM, n 596 = 3 donors). (E) Representative experiment showing quantification of ADAM17 levels on the cell 597 surface by flow cytometry. (F) Quantification of cell surface levels of ADAM17 by flow cytometry 598 599 (mean + SEM, n = 3 donors).





FIGURE 3. Effects of LRP1 blockade were abrogated by TIMP-3 blocking antibodies. Macrophages 602 were differentiated in vitro from primary human monocytes by treatment with GM-CSF (50 ng/ml) for 603 5 days. (A) Macrophages were treated with anti-LRP-1 blocking IgG (1, 5 or 10 µg/ml) or the matching 604 isotype control IgG (1, 5 or 10 µg/ml) for 16 h, and then treated with LPS (100 ng/ml) for 4 h. TNF 605 release (mean + SEM, n = 3 donors) was quantified by ELISA. (B) Macrophages were treated with 606 RAP (1 µM) and an anti-TIMP-3 antibody (10 µg/ml) or matching IgG1 isotype control for 16 h, and 607 then treated with control medium or LPS (100 ng/ml) for 4 h. TNF release (mean + SEM, n = 6 donors) 608 was quantified by ELISA. (C) Macrophages were treated for 16 h with anti-LRP1 blocking antibody, 609 anti-TIMP-3 antibody (10 µg/ml) or matching isotype controls, and then treated with control medium or 610 LPS (100 ng/ml) for 4 h. TNF release (mean + SEM, n = 3 donors) was quantified by ELISA. 611 612



Figure 4

613 614

FIGURE 4. Time course of TNF release from LPS-stimulated macrophages. Macrophages were 615 differentiated in vitro from primary human monocytes by treatment with GM-CSF (50 ng/ml) for 5 616 days. (A - E) Macrophages were treated with control medium or LPS (100 ng/ml) for the indicated time 617 periods. (A) Cumulative TNF release (mean + SEM, n = 3 donors) was quantified by ELISA (O, 618 control; , LPS-treated). (B) From the data in A, the amount of TNF released per hour (mean + SEM, 619 n = 3 donors) was calculated. (C) Cell surface levels of ADAM17 (mean + SEM, n = 3 donors) were 620 determined by flow cytometry. (D) Levels of TIMP-3 on the cell surface were quantified by surface 621 biotinylation and streptavidin pulldown, followed by immunoblotting for TIMP-3. Actin levels in cell 622 lysates were determined by immunoblotting of the same samples. Blots show a representative 623 experiment, and graph shows mean (+ SEM, n =3 donors) TIMP-3 levels, with TIMP-3 blot spliced as 624 indicated. (E) TIMP-3 mRNA expression was determined by RT-PCR, and expressed relative to RPLP0 625 (mean + SEM, n = 3 donors). (F) Macrophages were treated with RAP (1 μ M) and/or IL-10 (100 626





629 630

FIGURE 5. LPS induced shedding of LRP1 from macrophages. Macrophages were differentiated in 631 vitro from primary human monocytes by treatment with GM-CSF (50 ng/ml) for 5 days, and then 632 treated with control medium or LPS (100 ng/ml) for the indicated time periods and analyzed as 633 described below. (A) Representative experiment showing flow cytometry analysis of LRP1 ectodomain 634 (α -chain) on the macrophage cell surface. (**B**) LRP1 α -chain expression on the cell surface (mean + 635 SEM, n = 5 donors) was quantified by flow cytometry. (C) LRP1 β -chain expression on the cell surface 636 (mean + SEM, n = 4 donors) was quantified by flow cytometry. (D) *LRP1* expression (mean + SEM, n 637 = 3 donors) was quantified by RT-PCR analysis and normalised to *RPLP0*. 638



Figure 6

639 640

FIGURE 6. LRP1 blockade had no effect on TNF release from CD4+ T cells. CD4+ T cells were 641 obtained from enriched lymphocytes populations by negative magnetic separation. (A) LRP1 mRNA 642 expression (mean + SEM, n = 4 donors) in GM-CSF macrophages (mean Ct = 21.62), M-CSF 643 macrophages (mean Ct = 20.37), monocytes (mean Ct = 22.00), CD4+ T cells (mean Ct = 27.86) and 644 dendritic cells (mean Ct = 22.28) was determined by RT-PCR and normalised to RPLP0 (mean Ct 645 values of 18.45 to 19.86). Results are shown relative to GM-CSF-differentiated macrophages, set as 1. 646 647 (B) TIMP-3 mRNA expression (mean + SEM, n = 4 donors) in GM-CSF macrophages (mean Ct = 20.29), M-CSF macrophages (mean Ct = 20.39), monocytes (mean Ct = 33.95), CD4+ T cells (mean 648 Ct = 31.75) and dendritic cells (mean Ct = 22.27) was determined by RT-PCR and normalised to 649 RPLP0 (mean Ct values of 18.45 to 19.86). Results are shown relative to GM-CSF-differentiated 650 651 macrophages, set as 1. (C) CD4+ T cells were stimulated for 4 h with PMA (20 ng/ml) and ionomycin (0.5 µg/ml) in the presence of purified recombinant TIMP-3 (0 or 100 nM, added 30 min after 652 653 stimulation). TNF release (mean + SEM, n = 3 donors) was quantified by ELISA. (D) CD4+ T cells

- were treated with RAP (1 μ M) or heparin (0.2 μ g/ml) for 16 h, and then stimulated with PMA (20 ng/ml) and ionomycin (0.5 μ g/ml) for 4 h. TNF release (mean + SEM, n = 4 donors) was quantified by ELISA. (E) CD4+ T cells were treated with an anti-LRP1 blocking antibody or the matching isotype control (10 μ g/ml, 16 h), and then stimulated with PMA (20 ng/ml) and ionomycin (0.5 μ g/ml) for 4 h. TNF release (mean + SEM, n = 3 donors) was quantified by ELISA. (F) CD4+ T cells were treated with an anti-TIMP-3 blocking antibody or the matching isotype control (10 μ g/ml, 16 h), and then stimulated with PMA (20 ng/ml) and ionomycin (0.5 μ g/ml) for 4 h. TNF release (mean + SEM, n = 3
- 661 662

donors) was quantified by ELISA.



Figure 7

663 664

FIGURE 7. Proposed model of LRP1 regulation of ADAM17 activity in macrophages. (A) Upon LPS 665 stimulation, ADAM17 activity increases rapidly and TNF is released (0 - 2 h after stimulation). Cell 666 surface levels of TIMP-3 are determined by the equilibrium between its binding to heparan sulfate 667 proteoglycans (HSPG) and its endocytosis by LRP1. (B) With a slower kinetic (2 - 4 h after 668 stimulation), LPS also induces shedding of LRP1, possibly by stimulating expression of an LRP1 669 'sheddase'. This leads to a reduction in TIMP-3 endocytosis by LRP1 and consequent accumulation of 670 671 TIMP-3 on the cell surface, where it inhibits ADAM17 activity. (C) Timely resolution of the inflammatory response requires shedding of LRP1 to allow TIMP-3 to accumulate on the cell surface. 672 673 (D) Inflammation is likely to be prolonged in conditions where LRP1 expression is increased or its shedding is impaired, with reduced accumulation of TIMP-3 leading to prolonged ADAM17 activity 674 and TNF release. 675



SUPPLEMENTAL FIGURE 1. LRP-1 blockade inhibits TNF release from LPSstimulated primary human myeloid cells. Primary human monocytes were obtained from peripheral blood mononuclear cells by elutriation. (A) Primary human monocytes were treated with RAP (1 μ M) and heparin (200 μ g/ml) and with LPS (100 ng/ml) for 4 h. TNF release (mean + SEM, n = 7 donors) was quantified by ELISA. (B) Macrophages were differentiated *in vitro* from primary human monocytes by treatment with M-CSF (100 ng/ml) for 5 days, treated with RAP (1 μ M) or heparin (200 μ g/ml) for 16 h, and then stimulated with LPS (100 ng/ml) for 4 h. TNF release (mean + SEM, n = 4 donors) was quantified by ELISA. (C) Dendritic cells were differentiated *in vitro* from primary human monocytes by treatment with GM-CSF (50 ng/ml) plus IL-4 (10 ng/ml) for 5 days, treated with RAP (1 μ M) or heparin (200 μ g/ml) for 16 h, and then stimulated with LPS (100 ng/ml) for 4 h. TNF release (mean + SEM, n = 4 donors) was quantified by ELISA.