

## Research Center for Medical Sciences Core Research Facilities

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### General Summary

The Research Center for Medical Sciences of The Jikei University School of Medicine has been reorganized, and in April 2019 the Division of Molecular Cell Biology and the Division of Molecular Genetics of the Core Research Facilities for Basic Science were integrated and are now known as the Core Research Facilities. This integration has consolidated the facilitation of on-campus research support.

#### 1. Annual Registration System

This system is intended to supply research benches and other equipment to researchers of the university to perform experiments. Once registered, researchers can freely use the various devices in our institution. This system also provides, if necessary, technical advice and guidance on specific fine-morphological or biochemical approaches to a registrant's experiment. In 2019, 168 researchers registered at our annual registration system, and we provided research support 244 times for electron microscopy and 1 time for laboratory experiments.

#### 2. System for Providing Research Services

Advances in research technologies and equipment enable us to perform more precise and accurate observations of specimens in medical sciences. For researchers who cannot perform experiments owing to limits of time and funds, our staff can prepare samples for scanning electron microscopy and transmission electron microscopy, record images, or perform high-performance liquid chromatography and mass spectrometry. The service fee is minimal because services are limited to the university.

### Research Activities

#### *Possibility of nicotinamide phosphoribosyltransferase suppression as a molecular target*

Although brain tumors, particularly gliomas, are intractable and resist many first-line treatments, candidate target molecules have recently been identified by analyzing what is known about genes and proteins. Nicotinamide phosphoribosyltransferase (NAMPT) is the rate-limiting enzyme in the nicotinamide adenine dinucleotide (NAD<sup>+</sup>) biosynthetic salvage pathway which converts nicotinamide to nicotinamide mononucleotide. The converted nicotinamide mononucleotide is further metabolized to NAD<sup>+</sup> and serves as a coenzyme of various types of dehydrogenation. Previous research suggests that increases in NAMPT transcription and expression correlate with the growth or clinical grade of glioma. Therefore, because NAMPT modulation can be directly applicable as an adjuvant

remedy for radiotherapy or chemotherapy, we established cell lines that suppressed NAMPT expression with short hairpin interfering RNA. As a result, NAMPT inhibition alone suppressed cell growth and increased radiosensitivity, but the effects were transient. Furthermore, inhibition did not alter the sensitivity of glioma to the antineoplastic agent temozolomide. This involved other salvage pathways. We are creating a system to enhance and prolong the effect of NAMPT suppression.

*Human hepatocyte chimeric mice and an animal model of hepatitis virus infection*

We have established human hepatocyte chimeric mice with an efficient method that we had developed and also used chimeric mice to create an animal model of hepatitis B or C virus infection. We are intensely performing research on the efficacy of novel antiviral agents, the mechanism of progression to chronic infection, and ultrastructural alterations of intrahepatocellular organelle after viral eradication.

*Single nucleotide polymorphisms, and resistant-associated variants in the treatment of chronic hepatitis C virus infection*

Direct-acting antiviral agents are the first-line treatment for chronic hepatitis C virus infection. We are investigating the association of single nucleotide polymorphisms of the genes with the blood drug concentration, treatment response, and direct-acting antiviral agent-induced liver damage. Resistant-associated variants are also being investigated in detail.

*The association between serum microRNA expression levels and treatment outcome/prognosis in hepatocellular carcinoma*

We measure serum microRNA expression levels in an intrahepatic feeding artery, proper hepatic artery, and peripheral vein when we perform transcatheter arterial chemoembolization (TACE) for patients with hepatocellular carcinoma (HCC), and are investigating the association between serum microRNA expression levels and treatment outcome/prognosis in patients who have HCC and were treated with TACE/radiofrequency ablation (RFA).

*Comprehensive gene expression profiling analysis of microRNA/messenger RNA*

We are profiling and analyzing the expression of microRNA/messenger RNA in the liver tissue of hepatitis B virus (HBV)-infected human hepatocyte chimeric mice. We have found the novel interaction between microRNA and messenger RNA in HBV replication and lifecycle. We are also investigating the association between serum microRNA expression level and treatment outcome/prognosis in HCC patients who were treated with TACE/RFA.

*A new method for measuring cholesterol efflux capacity using liquid chromatography-ultrahigh-resolution mass spectrometry with stable isotope-labeled cholesterol*

The incidence of cardiovascular events correlates inversely with cholesterol efflux capacity (CEC) more than with the high-density lipoprotein cholesterol level. The measurement of CEC is used to qualify cardiovascular disease risk and is conventionally per-

formed with radioisotope-labeled cholesterol. So, we established a CEC measurement technique using stable isotope-labeled cholesterol as an alternative, and we compared our method with radioisotope- and fluorescence-labeled cholesterol methods using cells and patient serum. We incubated J774 cells labeled with [d 7] cholesterol (d 7-C) with patient serum, and d 7-C extracted from the cell culture medium was quantified by liquid chromatography-quadrupole time-of-flight mass spectrometry. The assay coefficient of variation of five consecutive measurements of three sets of samples ranged from 7.3% to 9.5%, and the interassay coefficient of variation determined by measuring 3 samples four times ranged from 4.1% to 8.5%, both indicating good precision. The CEC levels were measured for 41 outpatients with serum high-density lipoprotein cholesterol levels of 36 to 94 mg/dl (mean,  $61.7 \pm 18.0$  mg/dl) under cyclic adenosine monophosphate. Results were suggested that positive correlation between CEC levels using the stable isotope and radioisotope methods. It was stronger than the correlation between measurements using the fluorescence and radioisotope methods ( $r = 0.73$ ,  $P < 0.0001$  vs.  $r = 0.55$ ,  $P < 0.001$ ). Therefore, our newly developed using stable isotope method can be considered useful as a non-radioisotope method and thus deserves evaluation in future clinical studies.

*Effect of smoking inflammatory response to smoking cessation on human gingival fibroblast and periodontal ligaments cells*

The purpose of this study was to investigate the inflammatory response of human gingival fibroblasts and periodontal ligament cells during smoking (during nicotine stimulation) and the effect of repair period during smoking cessation (interruption of nicotine stimulation). Both cells were obtained from healthy periodontal tissue. The cells were cultured until they reached confluence, replaced with a medium containing 1  $\mu$ g/ml nicotine, and cultured for 24 hours. After that, the supernatant was replaced with a nicotine-free medium and the culture was carried out for 48 hours. Culture supernatants at each time point after nicotine stimulation and after nicotine discontinuation were collected, and interleukin 6 production was measured with enzyme-linked immunosorbent assay. Interleukin 6 production increased significantly ( $p < 0.001$ ) in both cells after nicotine stimulation, but decreased significantly after nicotine discontinuation ( $p < 0.001$ ). Scanning electron microscopy revealed many depressions on the surface of the cell membrane due to nicotine stimulation.

From these facts, it was demonstrated that smoking probably had an adverse effect on cells, and the possibility of a cell repair effect by smoking cessation was shown.

*Development of the adenovirus vector systems*

We have developed a protocol for curing HBV infection with an adenovirus vector (AdV). We established the efficient detection system of HBV genome replication applying AdVs (HBV103-AdV system) and identified several promising compounds. Furthermore, we succeeded in efficient cleavage of the HBV genome using a hepatocyte-specific genome editing system by AdV and we identified several promising genomic RNA candidates.

*Rapid identification and quantification of Lactobacillus rhamnosus-targeting real-time polymerase chain reaction using a TaqMan probe*

*Lactobacillus rhamnosus* is a gram-positive, rod-shaped bacterium and is commonly used as a probiotic to maintain intestinal health. Recently, surveillance of *Lactobacillus* bacteremia was conducted using biochemical or conventional polymerase chain reaction (PCR) assay; however, these assays are unable to quantify the target, and might detect a small number of DNA fragments or yield a false-positive result. In this study, we developed an *L. rhamnosus*-targeting quantitative PCR assay, which produces accurate and reproducible results based on the specificity of a TaqMan probe targeting the unique 16S ribosomal DNA sequence of *L. rhamnosus*. The assay specifically detected the targeted bacterium, *L. rhamnosus*, and no non-specific signals were generated under the study conditions. Using genomic DNA from the bacterial cells of *L. rhamnosus* (101 to 106 cells), the cycle threshold value showed a linear trend ( $R^2 = 0.9993$ ). This *L. rhamnosus*-targeting quantitative PCR assay can contribute to advance research into the effects of the organism on microflora, microbial infections, and the host.

#### *Protective actions of urocortin family peptide on pancreatic $\beta$ -cells*

It has been reported that urocortin family peptides exert cellular protective actions. We are now investigating actions of urocortin family peptides, especially, urocortin III, against toxic actions to pancreatic  $\beta$ -cells, such as hyperglycemic condition and nicotine exposure which resulted in reduced insulin release. As the first step of these approach, we tried to investigate the action of urocortin III on such conditions by insulin release. Urocortin III facilitate insulin release at the hyperglycemic condition and recovered the suppressive effect on insulin release by nicotine.

#### Publications

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