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# Identification of Potential Protein Biomarkers of Low Level Kidney Degradation

Christopher Lee Woolard Wright State University

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# IDENTIFICATION OF POTENTIAL PROTEIN BIOMARKERS OF LOW LEVEL KIDNEY DEGRADATION

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Science

By

# CHRISTOPHER L. WOOLARD

B.S., University of North Carolina – Chapel Hill, 2005

2009

Wright State University

# WRIGHT STATE UNIVERSITY SCHOOL OF GRADUATE STUDIES

1 December 2008

I HEREBY RECOMMEND THAT THE THESIS PREPARED UNDER MY SUPERVISION BY Christopher Woolard ENTITLED Identification of Potential Protein Biomarkers of Low Level Kidney Preclinical Degradation BE ACCEPTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF Master of Science.

> Camilla Mauzy, Ph.D. Thesis Advisor

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Mariana Morris, Ph.D. Department Chair

Committee on Final Examination

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# **ABSTRACT**

Woolard, Christopher Lee. M.S., Department of Pharmacology & Toxicology, Wright State University, 2009. Identification of Potential Protein Biomarkers of Low Level Kidney Degradation.

 The purpose of this research was the identification of potential dose-dependent and time-dependent serum protein biomarkers of low level kidney degradation in a rat model. Potential biomarkers were evaluated based on differential protein expression between control and dosed samples in rat serum. Proteins of interest demonstrated upregulation at a minimum 1.5 fold increase in protein concentration control versus dosed sample. In order to identify common biomarkers of kidney decrement, three nephrotoxins were chosen to target specific locations of the kidney: 1) D-Serine, which causes necrosis of the proximal straight tubules, 2) Puromycin, an antibiotic that degrades the Glomerular Basement Membrane (GBM), and 3) Bromoethyl Amine (BEA), which affects the proximal tubules as well. Rats were dosed with individual nephrotoxins and serum collected at Pre-dose, 24 hrs Post dose, and at terminal sacrifice for Puromycin and BEA, and at 12 hrs and 24 hrs post-dose from d-serine. The collected serum sample was enriched to remove abundant proteins, separated using 2D Difference in Gel Electrophoresis (DIGE), and screened for potential up-regulated biomarkers based on difference in fluorescent intensity using computer software. Finally, the proteins were trypsin digested and the resultant peptides identified by MALDI-TOF/TOF mass spectroscopy. The study results indicated hornerin as a potential biomarker though no dose- or time-dependent toxicity could be determined.

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# **I. INTRODUCTION**

# **A. Background**

A major challenge for health care professionals is the detection and accurate diagnosis of early onset renal degradation. Traditionally, clinicians have determined kidney health by measuring blood urea nitrogen (BUN) in serum and creatinine levels in urine (Duarte and Preuss). Unfortunately, these biological markers may not be evident until kidney functions have decreased by 30% - 50%, as measured by histopathology functional tests, nor do these biomarkers pinpoint specific regions of damage (Thukral et al). At such late stages of kidney degradation, full recovery by a patient is rare and the outcome is often a lifetime of mitigating symptoms by dialysis treatments or, if lucky, a kidney transplant.

In general, a patient has much better odds of full recovery if an accurate diagnosis is made early during onset of the damage. These odds are especially true when combating degenerative conditions like kidney failure. Standard methods of diagnosing a disease include visual diagnosis (cut or laceration), direct diagnosis (biopsy), and indirect diagnosis (biological markers, i.e. measurement of creatinine levels) (Veenstra). However, when diagnosing kidney diseases these tools are not effective simply because they are not available, too traumatic, or the marker response is too slow after kidney damage. Decreased renal function has no visible signs or pain and can only be diagnosed through direct and active medical diagnoses. While direct analysis of kidney tissue by biopsy can help diagnose specific ailments and direct therapeutic paths, clinical biopsies are not routine since they are invasive and can suffer from sampling errors (Kumar Sharma et al). Therefore indirect analysis has been the best tool for routinely testing the

growing number of patients who suffer from deteriorating kidney function such as chronic kidney disease.

Chronic kidney disease (CKD) demonstrates the need for improved renal diagnostic methods as it affects approximately 19 million people just in America, yet often goes undiagnosed until it becomes too late for a patient to fully recover. CKD is a general decrease in renal function occurring over months or years and has no specific treatment. Often the clinical signs of the disease only manifest as a resulting complication like pericarditis or anemia before diagnostic measurements are taken. The current diagnostic methods look for proteinuria or elevated serum creatinine levels (Snyder). Unfortunately both indicators are well documented as being too generic (Tomlanovich, Baboolal, Star) and can neither diagnose the type of renal injury nor be consistently reliable. For instance, serum creatinine is heavily influenced by many factors, such as muscle mass and tubular secretion, which means serum samples must be taken frequently over long periods of time to normalize results (Tomlanovich). New techniques utilizing proteomic research for diagnoses use biological fluid (biofluid) samples which are analyzed for any qualitative or quantitative changes in proteins that may indicate physiological injury. This study will focus on identifying potential kidney injury biomarkers by analyzing serum samples from rats dosed with Puromycin, Bromoethyl Amine (BEA), and D-serine, and examining differential protein expression.

The use of proteomics in biomarker discovery is well documented and consists of a wide array of dynamic techniques with updated and improved methodologies published weekly. A good example of these techniques successfully identifying useful protein biomarkers in a relatively short time to a new threat was published by Chen et al. and

their examination of the SARS virus. Chen et al compared 22 different plasma samples from four SARS patients with plasma samples from healthy controls. Subsequent 2D PAGE analysis found seven distinct proteins in SARS patients that were absent in healthy controls as well as eight spots up-regulated in all 22 samples. One of the up-regulated spots, peroxiredoxin II, was found to be in all 22 samples and later validated in  $\sim$ 36% of SARS patients. This detection rate is higher than HIV testing and may be used as a future serum biomarker for SARS. Thanks to their work, the quest to identify a validated protein biomarker for SARS can move into the next stage of development. The work by Chen et al. demonstrated that biomarker research techniques can be used successfully to rapidly identify biomarkers for disease diagnosis even if the disease is new and not fully understood. The biomarker techniques used by Chen et al. are part of biomarker research in general which can be divided into two main themes, biomarker discovery or diagnostic development.

Biomarker research is dividedby Veenstra et al. into two main development tracks, biomarker discovery and diagnostic development. Biomarker discovery uses mass spectroscopy techniques to identify proteins and characterize peptide sequences. The aim is to find a change in relative abundance of peptides from a unique protein present in samples obtained from disease cases compared with matched controls (Veenstra). Diagnostic development is a comparative approach to identifying a disease state by looking at overall protein peak patterns on a mass spectrometer. This approach uses a large sample size from hundreds of patients to find statistical differences between protein peaks then uses data mining with bioinformatic algorithms to find diagnostic protein peaks. However, the exact relation between the diagnostic proteins and the disease

condition are unknown since specific proteins are not identified (Veenstra). The proposed research will focus on biomarker discovery and the identification of specific proteins which may be used to track preclinical levels of kidney damage. In support of this mass spectroscopy based approach, this study will use 2D Difference in Gel Electrophoresis (DIGE) coupled with Matrix Assisted Laser Desorption Ion-Time of Flight/Time of Flight (MALDI-TOF/TOF) analysis of rat serum samples to specifically identify proteins as biomarkers of preclinical levels of kidney injury.

As of late, published proteomic results have focused on analyzing specific organ tissue with little published data using biological fluids like blood or urine. The search for protein biomarkers in blood poses a distinct interest for clinical applications since organ functions could be tested using blood samples, which are less invasive than tissue biopsies (Bandara, *A Correlation*). Published results show that protein expression can be characterized from biofluid samples such as serum, plasma, urine, and cerebrospinal fluid, as effectively as from samples of diseased tissue (Pang, James). The abundance of proteins and relative ease of biofluid sample collection mean that self monitoring of health could become routine and diseases could be diagnosed before physical symptoms manifest. Though published results from biofluid analysis lags behind tissue analysis, proteomic techniques used in analyzing biofluids have made rapid advancements and clinical uses may be in the very near future (Veenstra).

 Of the four main biofluids that are easily obtainable to researchers and clinicians alike, urine and serum samples are currently thought to be the best samples for examining kidney injury. While urine is a superior sample due to ease of collection, ample sample volume, and cost of analysis, this study will focus on analyzing serum. According to

Sharma et al., proteomic studies of urine presents many challenges such as protein degradation during storage as well as fluctuations in protein levels depending on timing of collection, diet of subjects, and gender (Sharma). Additionally, urine samples face many of the same problems as plasma samples, namely abundant proteins such as IgG and albumin. Sharma found that IgG leads to streaking of the 2D gels and that degraded albumin products may account for a large number of differentially regulated spots (Kumar Sharma et al.).

Using serum samples for this research project posed many challenges, primarily due to lack of published research on serum. Veenstra et al. found that 22 proteins make up 99% of all proteins in plasma and serum. The 22 common proteins are usually albumin, transferrins, immunoglobulins, and complement factors (Veenstra). The low abundant proteins are circulatory proteins from live, apoptotic, and necrotic cells which mean that very low levels of detection are required to pinpoint these proteins from such a small set of diseased cells. Discovering which proteins derive from damaged cells specific to a disease becomes much more difficult as a disease progresses and affects nearby organs. One study by Pieper et al. identified ~20,000 spots by image processing (Pieper). Of these ~20,000 spots, about 3,700 unique spots were found once redundant images were eliminated. From the 3,700 spots, 1,800 were identified which yielded 350 unique proteins (Pieper). Of the 350 unique proteins, found that almost 39% have been previously characterized as circulatory proteins. Another 9% of the identified proteins were characterized as proteins that are secreted into biofluids other than blood. Very low abundant proteins such as IL-6, metallothionein II, cathepsins, and peptide hormones were also identified. These low abundant proteins are known to be in serum at

concentrations less than 10 ng/ml (Pieper). The immunodepletion step followed by 2D gel separation technique allow researchers to quantitatively measure protein amounts between samples while leaving a visual record of the many isoforms a protein can assume (Veenstra).

Pieper et al performed a similar study using urine samples which yielded good results but were not as thorough. In this part of the study, the urinary proteome was characterized using a similar strategy of protein separation by 2D-PAGE followed by MS identification. The samples went through similar preparation steps including an immunodepletion step. The group found 1,400 distinct spots on gels and 420 proteins were identified by either MALDI-TOF peptide mass fingerprinting or LC-ESI MS/MS. Results identified 150 unique proteins, with  $\sim$ 50 known classical plasma proteins shown also present in urine (Veenstra). These results show that analyzing the serum produces more comprehensive results and can express more low abundant proteins since most of them will be transported by albumin and other transport proteins.

A study by Bandara et al proved that kidney injury biomarkers can be identified using 2D gel separation followed by MS characterization. The 2003 study looked at dserine as well as two other well characterized kidney toxins, cisplatin and 4-AP. The dserine results are of particular interest since it is one of the nephrotoxins studied in this project. Bandara et al found 11 main proteins exhibiting changes in expression levels as a result of d-serine induced nephrotoxicity. Several of the 11 proteins were found to overlap with results from the cisplatin and 4-AP samples, like the cellular enzyme fumarylacetoacetate hydrolase (FAH) found in d-serine and 4-AP. Of the proteins expressed in all samples from all toxicants tested, three very significant proteins were

identified as potential biomarkers for clinical diagnosis. The most promising of the three proteins was a rat-specific protein known as T-kininogen. This protein was found to exhibit distinct time and dose dependencies and showed different concentration levels compared to control samples and samples from rats dosed with L-serine. The time and dose dependencies are exemplified by measured increases in protein concentrations and by peak concentration level timing. Seven isoforms of T-kininogen were found, six in the d-serine samples and one from the 4-AP and cisplatin samples. The isoform concentrations were found to increase directly with the extent of the observed cellular damage demonstrating the dose-response relationship of d-serine toxicity. The peak concentration of T-kininogen occurred at the 24 hour period which correlated perfectly with the damage exhibited by the proximal tubule tissue. Peak kidney damage, as shown by BUN and plasma creatinine levels, was observed at 24 hours then improved as the kidneys returned to normal function over a three-week period without d-serine exposure.

 Three classes of kininogen, H- and L-kininogen are found in both rodents and humans while T-kininogen is only produced in rats (Greenbaum et al., 1992; Takano et al., 1997). The liver synthesizes all three kininogen isoforms but studies have also found the kininogen species to be secreted into blood. Kininogens play an important part in the release of bradykinin, a well-documented peptide hormone, by acting as a substrate for the kallikrein serine proteases. Kallikrein serine proteases cleave proteins to release bradykinin (Bandara).

Also of interest from Bandara et al. was the identification of retinol binding protein (RBP) in the d-serine study as RBP has previously been linked to renal toxicity. The regulation of RBP was treatment-specific – the changes were not observed in control

animals or the L-serine-treated group (Bandara). The identification of RBP is of interest because of its association with renal toxicity. Although RBP is required for the transport of vitamin A in blood, it is also reabsorbed and degraded in the renal proximal tubules (Goodman, 1977). Several reports have focused on the elevated presence of RBP in the urine of patients or animals with renal damage (Brouwer et al., 1988; 1989; Jung et al., 1993). The identification of RBP is also important as it confirms that new technologies such as proteomics can uncover established as well as novel markers of toxicity. Given the extensive work done by Bandara and group, the expectation is that t-kininogen and RBP will be identified as biomarkers as well. The difference with Bandara's study and the current study is the use of 2D DIGE technology instead of the standard 2D gels used previously.

#### **B. Kidney Anatomy and Physiology**

The kidney is a robust organ designed to filter waste products from the bloodstream and excrete them from the body. However, since nearly 25% of the cardiac output goes directly to the kidney, it becomes extremely susceptible to toxic injury from xenobiotics and drugs. Xenobiotics and drugs are metabolized and concentrated in the kidney from the blood stream placing potentially harmful substances into one localized area increasing potential tissue damage within the parenchyma (Toback, 1992; Bennett, 1997).

In the circulatory system about 25% of blood volume flows directly from the heart to the kidney where it is dispersed and filtered by tissue called nephrons. Collectively these nephrons make up the parenchyma (the functional bulk of the organ). Within each nephron there exists a complex system of structures designed to filter the blood, reabsorb necessary compounds, and excrete wastes as urine.

The first structure to filter blood is the Renal Corpuscle which consists of the Glomerulus and Bowman's capsule. The glomerulus is a capillary tuft which receives blood from the afferent arteriole and sends filtered blood to the renal vein for further processing. Bowman's capsule (glomerulus capsule) surrounds the glomerulus, is made of epithelial cells, and works with the glomerulus to act as the first filter of the nephron.

 The renal tubule is made up of the proximal tubule, the loop of Henle, and the distal convoluted tubule. The proximal tubule, especially along the straight, descending portion, is the area of primary interest when preventing or treating kidney failure. The proximal straight tubules are responsible for regulating reabsorbtion of fluids like salt and water, as well as organic solutes like glucose and amino acids, into the peritubular

capillaries. Because of the steady filtering and waste concentration, these cells are constantly exposed to toxic xenobiotics or metabolites at concentrations much higher than other cells are typically exposed. The constant filtering and reabsorbtion means that in the kidney, the renal tubular epithelial cells are the most susceptible to toxic injury. The health and status of the glomerulus and renal proximal tubules are the major concern when diagnosing kidney health so nephrotoxins in this study have been chosen based on where they cause damage.

**Figure 1**: Cross Section views of Rat Kidney



**Right Kidney Sectioned in Several Planes** 

# **C. Nephrotoxin Background**

# **1. D-Serine**

D-Serine is a well characterized nephrotoxin that has been studied since 1929 and is known to cause necrosis of the proximal straight tubules in the rat kidney. The exact mechanism of toxicity remains unknown although d-serine is known to concentrate in the damaged areas of the nephron (Imai et al, 1998). What is known is that d-serine is reabsorbed into the proximal tubules where it enters cells in the pars recta and becomes processed by d-amino oxidase (Silbernagl et al). The reaction with the d-amino oxidase enzyme produces toxic oxidative metabolites leading to necrosis of the epithelium cells lining the proximal tubules. The damage to the tubules results in glucosuria, diuresis, aminoaciduria, and proteinuria (Ganote). A histopathological study by Ganote et al. examined sections of rat kidney by light and electron microscopy and found that proteinuria and glucosuria are caused by the diffusion of protein and glucose from interstitial fluid to tubular fluid across the necrotic tubular epithelium. Ganote et al. observed the stages of necrosis and recovery over a period of 6 days, and noted that the cells showed shrinkage during initial stages then showed either immediate lysis of nuclear contents or swelling and loss of apical cytoplasm. Without the tubular epithelium the proteins and glucose concentrated in the interstitium, freely cross from the interstitial to the luminal fluids through the denuded glomerular basement membrane.

**Figure 2**: Stick model of d-serine



# **2. Puromycin**

Puromycin aminonucleoside (PAN) is an antibiotic that is often used to study glomerular injury. PAN causes the glomerular epithelial cells (GEC) to flatten which leads to a loss of filtration function as well as loss of epithelial cells along the glomerular basement membrane (GBM) resulting in proteinuria. (Fishman, J.A.)

The normal glomerular capillary wall keeps blood cells and most proteins in the blood but in patients with proteinuria, cellular degeneration allow proteins to leak across the glomerular wall into the urine. The barriers in the capillary wall that keep protein out of the urine are the endothelial cell lining the capillary lumen, the basement membrane under the endothelial cell and the cell on the outside surface of the capillary (epithelial cells). The epithelial cell (podocyte) normally has little "feet" (pods) that sit on the basement membrane and are connected by a thin membrane. The glomerular epithelial cells (podocytes) appear to be the most important barrier that prevents protein from leaking into the urine.



**Figure 3**: Image of filtration tubules in rat kidney

A study by Ryan et al found that focal detachment of the GEC from the GBM occurred at the same time that massive proteinuria was measured (Ryan). Additionally, it was observed that areas stripped of GEC corresponded to an increase of ferritin leakage, a well-known proteinuria marker, across the GBM. This leakage suggests that GEC detachment is a contributing factor to proteinuria in the PAN-induced nephrosis model.

In the study by Sanwal et al., plated cells sustained in media were dosed with 5, 10, 20, 50, 100, 200, and 500 ug/ml of puromycin. Morphologic analysis using fluorescence staining showed that PAN enhanced GEC apoptosis in a time- and dosedependent manner at 24 and 48 h and only induced necrosis of GEC at high concentrations. Signs of necrosis started at 100 ug/ml and but PAN induced the greatest amount of damage at 24 h at doses of 200 ug/ml and 500 ug/ml. Since PAN induced necrosis at higher concentrations and apoptosis at lower concentrations in a concentration-dependent manner, the data suggests that the severity of cellular injury determines whether cells die by necrosis or apoptosis (Sanwal).

The mechanism by which PAN causes apoptosis and necrosis of GECs is unclear, but it is known that hydrolysis of puromycin creates PAN. PAN, which is structurally similar to adenosine, inhibits *de novo* protein synthesis and can potentially prevent synthesis of nucleic acids. *In vitro* studies show that PAN causes premature chain termination by acting as an analog of the 3'-terminal end of aminoacyl-tRNA (de la Luna) and can attenuate *de novo* RNA synthesis and DNA synthesis in a variety of cells (Sanwal). Additionally, free radicals have been implicated in causing kidney injury after exposure to PAN. Diamond et al found that the xanthine oxidase pathway creates reactive oxygen species and may ultimately be the mechanism of nephrosis.

Figure 4: Model of Puromycin



# 3. Bromoethyl amine (BEA)

The alkylhalide 2-bromoethylamine hydro-bromide (BEA) produces renal injury in rats and mimics analgesic-related renal injury in humans. (Hedlund, L. W.) 2-Bromoethylamine hydrobromide (BEA) is a low molecular weight halogenated chemical which causes reproducible lesions in the renal papilla of experimental animals (Murray). Histologically, BEA produces necrosis of the thin ascending limb of the loop of Henle and collecting duct within 6 hrs of dosing followed by complete papillary necrosis in 7 to 14 days (Murray). Functionally, BEA causes impaired urinary concentrating ability as well as a loss of sodium, chloride, and under certain circumstances potassium (Arruda, Sabatini). There is also an apparent loss in the proportion of filtering juxtamedullary nephrons (Sabatini, Drug). Although the molecular mechanism of BEA-induced papillary necrosis is unknown, maintenance of the medullary concentration gradient is requisite to the development of papillary necrosis (Sabatini, *Role*). It is apparent that the physiological function of the renal medulla to sustain an osmotic gradient makes this portion of the nephron uniquely susceptible to damage to agents such as BEA.

**Figure 5:** Model of Bromoethyl amine

 $\searrow^{\text{NH}_2}$ Вr

HBr

# **D. Techniques and Instrumentation**

#### **1. Two-Dimensional Difference Gel Electrophoresis (2D DIGE)**

In the search for novel biomarkers, accurate and precise isolation of proteins is crucial to identifying small, low abundant proteins that may be up- or down-regulated as a direct result of organ degradation. One of the best techniques to visualize general protein expression levels is two-dimensional (2D) gel electrophoresis. A key concern regarding the use of 2D electrophoresis is the gel to gel reproducibility of the protein separations. In general, polyacrylamide gel separations are subject to internal errors from non-homogenous polymerization, temperature differentials, and fluctuations in electrical power (Speicher). These variables create slight differences between gels which make it difficult to match protein spots consistently across multiple gels. Inconsistent protein patterning requires powerful analytical software to examine thousands of protein spots to accurately identify identical and overlapping proteins across gels to measure the changing concentration. Thus, a high level of skill is needed to pour gels, run samples, and analyze spots to increase the statistical significance of the data (Speicher).

2D Difference Gel Electrophoresis represents an improvement over typical 2D gels because two samples and an internal standard can be all tagged with fluorescent dyes and run in the same gel at the same time. In a DIGE gel, a control sample and a disease sample are labeled with two different fluorescent tags called Cy Dyes. By running both samples in the same gel, a more accurate comparison of protein size (based on location in the gel) and relative quantities (based on fluorescent intensity) can be made without gel to gel variability. Additionally, DIGE gels allow more accurate comparisons between

different gels since an internal standard of all pooled samples is labeled with a third dye and added to every gel.

The first improvement lies in direct comparison between samples. The dyes allow two different sample groups to be labeled, mixed together, and separated on the same gel so they are exposed to identical electrophoretic conditions and gel inconsistencies. Any proteins present in both samples will migrate to the same areas of the gel and the different fluorescence spectra will indicate any definitive overlap. This accuracy reduces any technical variation, which may be as high as 20–30% (Molloy). The second improvement is the ability to more accurately compare samples between gels despite the variation that inherently exists in each individual gel. This feature is possible because of the internal pooled standard labeled with the third dye which is added to every gel. The pooled standard is crucial because it is made of equal parts from every sample thus contains every protein. By applying this standard to every gel, it provides a known landmark in each gel that is used to align multiple gels. This known correction factor gives a greater degree of confidence that protein expression differences and location are real, and not solely explained by chance or sample artifact (Hoorn).

The dyes used in this method are N-hydroxyl succinimidyl ester derivatives of Cy2, Cy3, and Cy5 and each dye has their own excitation and emission spectra. The dyes form an amide by reacting with the ε-amine group on lysine residues by nucleophilic substitution (Speicher). Since the dyes react with a polar amino acid they have a positive charge to replace the charge lost from the lysine and thus the original isoelectric point of each protein is retained (Speicher). The sensitivity of this technique depends on the technique used to label the sample with the fluorescent CyDyes. The two labeling

methods are called "minimal" and "saturation". Minimal labeling uses the CyDyes and provides a detection limit between 150 and 500 pg (Hoorn). Saturation labeling uses thiol-reactive maleimide groups to react with cysteine residues and has been shown to have a lower limit of detection than minimal labeling (Shaw). While the saturation method is more sensitive, it is more technically challenging and is normally used only when samples are not limited (Lilley).

The end result of the 2D DIGE technique allows direct comparison of two samples in one gel or multiple samples from multiple gels needing minimal digital or statistical corrections for gel variations and warping. This technology was recently validated by Tonge et al. with proteomic studies on mouse liver, Zhou et al. with the identification of esophageal scans cell cancer-specific protein markers, and Gharbi et al. analyzing the effects of the hepatotoxin, N-acetyl-p-aminophenol, on mouse liver protein expression.

# **2. DIGE Experimental Limitations**

While 2D DIGE is an excellent tool for proteomic studies, it is not without its limitations. The first significant obstacle is developing the optimal conditions for protein separation. Tissue and biofluids are incredibly complex mixtures that contain numerous interfering substances like proteases, salts, and nucleic acids which must be removed or inactivated (Hoorn). Removing these substances requires careful methods like desalting techniques or DNA/RNA nuclease treatments (Hoorn). Additionally, studies that search for small or low abundant proteins in blood must include an immunodepletion step before running the gel to remove large, over abundant carrier proteins like albumin, transferrins, and IgG. These proteins mask smaller proteins and the resultant huge smears in the gel make analysis impossible. Therefore, the immunodepletion step is especially crucial since serum samples contain a large number of proteins that range in concentrations by more than 10 orders of magnitude (Corzett). Though conditions for protein separation can be optimized, the DIGE technique still has physical limitations using current protocols.

According to Hoorn et al., the two major limitations to DIGE-based proteomics are the identification of low-abundant proteins and hydrophobic proteins. Issues with low abundant protein identification are the capabilities of visually picking out small spots, preparing them using many steps, and having enough stable protein to run through a mass spectrometer. Hoorn has found that even optimized systems often do not exceed mass spectrometry identification rates of 50%. The difficulty with hydrophobic proteins, such as integral membrane proteins, is solubilization. Strong detergents like sodium dodecyl sulfate (SDS) are required to suspend integral membrane proteins in solution but

SDS interferes with the isoelectric focusing (Hoorn ref 1, 39, 40). The use of chaotropic agents like thiourea with urea or zwitterionic detergents like 3-[(3-Cholamidopropyl) dimethylammonio]-1-propanesulfonate (CHAPS) help with solubilization without IEF interference (Hoorn ref 1, 39). Another solution is the separation of proteins based on molecular weight using two runs. The first run uses a cationic detergent benzyldimethyln –hexadecylamonnium chloride while the second run uses SDS. Macfarlane et al. showed that proteins migrate differently using these two detergents which helps to maintain high resolution while keeping hydrophobic proteins solubilized.

Hoorn et al. created an excellent summary of the strengths and limitations of the DIGE technique as follows:

1 Strengths of DIGE-based proteomics

Currently the only routine platform for quantitative proteomics Differential expression pattern with statistical output Low experimental variation due to mixing of experimental and control sample and inclusion of an internal standard Visualization of protein isoforms including splice variants and post-translational modifications Information on molecular weight and iso-electric point 2 Limitations of DIGE-based proteomics Less efficient for hydrophobic proteins (e.g., integral membrane proteins) Low identification rate of low abundance proteins Potential false positives using traditional statistics Difficult quantification and identification of proteins with overlapping spots 3 Possible solutions to overcome limitations Use of other detergents during iso-electric focusing Modified 2-DE (using 16-BAC and SDS) Modified statistical procedures Combination of targeted proteomics and DIGE-based proteomics Combination of DIGE-based proteomics with bioinformatics pathways analysis

# **3. Mass Spectrometry**

At a basic level, mass spectrometry can be described as the study of gas-phase ions. The careful manipulation and measurements of the gas-phase ions generate practical data which can be used to characterize molecular structures (Kinter). In a mass spectrometer, a sample is energized by an ion source, separated by its mass to charge (m/z) ratio in a mass analyzer, picked up by a detector, and presented visually as a mass spectrum (Skoog). There are several types of ion sources and mass analyzers available, each with specific strengths and weaknesses which can be combined depending on the characteristics of the study sample. For biological molecules in general, publications indicate that a Matrix Assisted Laser Desorption / Ionization (MALDI) ion source coupled with a Time-Of-Flight (TOF) mass analyzer produces highly sensitive, accurate, and precise mass spectra. The spectra can be further analyzed using Tandem Mass Spectrometry to obtain protein and peptide sequences.

#### **4. Matrix Assisted Laser Desorption/Ionization (MALDI)**

Matrix-Assisted Laser Desorption/Ionization (MALDI) was introduced in 1988 by Karas and Hillenkamp as another technique for separation of high molecular weight biomolecules such as proteins and peptides (Kinter 2.57). The MALDI ion source works by dissolving peptides in a solution of a UV-absorbing compound, called the "matrix", and placing the sample on a plate. As the solvent dries, the matrix compound crystallizes and peptide molecules are incorporated into matrix crystals. A UV laser light then vaporizes small amounts of the matrix /peptide ions are carried into the gas phase. Ionization occurs by protonation in the acidic environments produced by the acidity of most matrix compounds and by the addition of dilute acid to the samples. Because the laser desorption generates ions in discreet, short packets, MALDI is ordinarily combined with time-of-flight mass analysis. By combining MALDI with TOF analysis, two main benefits are achieved: very high sensitivities due to efficient protonation and high tolerance levels for contaminants. This high tolerance means that once a protein is digested, a MALDI spectrum can be obtained without further need for separation techniques like HPLC. By allowing for direct analysis of enzymatic digest analysis, MALDI is one of the fastest, most efficient means of ionizing and analyzing large biological molecules. (Kinter pg  $37 - 39$ ).

# **5. Mass Analyzers**

After a sample is ionized, the next step in mass spectrometry is the measurement of the mass to charge ratio (m/z) via mass analyzer. The sample ions are split into two general categories: molecular ions, which contain the entire analyte molecule, and fragment ions, which contain only a portion of the structure (Kinter). The molecular ion gives the molecular weight of the analyte while the analyte fragment ions give structural information. There are a wide variety of mass analyzers capable of making the necessary measurements such as quadrupole mass filter, ion trap, time-of-flight, magnetic sector, ion cyclotron resonance, among others (Kinter). The nature of the mass analyzer determines several characteristics of the overall MS experiment and the two most important are m/z resolution (often called "mass resolution") and the m/z range of ions that can be measured (often called "mass range") (Kinter).

 The factors that determine mass accuracy include fundamental parameters such as the m/z resolution used when making the measurement, type of mass analyzer used, and how the data were recorded, as well as practical parameters such as the quality of the instrument calibration (Kinter). Assuming proper calibration, quadrupole and ion trap mass analyzers operated at unit resolution will provide mass accuracies in the 100- to 200-ppm range (Kinter). Time-of-flight instruments using delayed extraction and reflectron ion optics with high data-acquisition speeds to give an m/z resolution greater than 10,000 provide mass accuracies in the 5- to 20-ppm range (Kinter pg  $42 - 43$ ).

# **6. TOF Mass Analyzers**

The Time-Of-Flight mass analyzer is a very simple yet incredibly effective and robust system. A TOF analyzer first creates an electric field produced from a very high potential, typically  $+20 \text{ kV}$  to  $+30 \text{ kV}$  (Kinter). Then, an analyte ion is accelerated through the field which imparts a fixed amount of kinetic energy. Once accelerated, the ion enters a field-free region where it travels at a velocity inversely proportional to its  $m/z$  (Kinter). Due to the inverse proportionality, light ions with a low  $m/z$  move faster than heavy ions with a high m/z. Therefore, the time required for an ion to travel through the field-free region is measured and this measurement can be used to back calculate the velocity (Kinter et al.), which ultimately allows one to calculate the m/z, using the equation:

$$
(\mathrm{V})\mathrm{z} = \frac{1}{2} \mathrm{m} \mathrm{v}^2
$$

Where (V) = kinetic energy in J,  $z =$  charge,  $m =$  mass in kg, and  $v =$  velocity in m/sec. The equation can be rearranged to give the velocity of the ion:

$$
\mathbf{v} = ((2\mathbf{V}\mathbf{z})/\mathbf{m})^{1/2}
$$

The most important factors that determine resolution include details of the ionization process such as the time span of the ionization event and the energetics of the ions produced; the instrument dimensions, particularly the length of the flight tube; and the accelerating voltage used (Kinter pg 48). While TOF mass analysis can produce accurate data due to the many advantages discussed previously, a single TOF analysis can only yield molecular weights since MALDI is a soft ionizing source, meaning analytes are ionized with little to no degradation in structure. In order to identify the proteins of interest; actual peptides will be sequenced from the fragment data. To accomplish this, analyte ions will be split and the m/z ratio measured using tandem mass spectrometry.

# **7. Tandem Mass spectrometry**

In tandem mass spectrometry, an analyte ion is examined in two stages in one experiment. The first stage is to separate parent ions by m/z and the second stage is to isolate and fragment the analyte in order to determine the m/z of the daughter ions (Kinter). Tandem mass spectrometers typically use "collisionally activated dissociation" (CAD) or "collisionally induced dissociation" (CID) which means that a mass-selected ion is hit with high energy gas molecules in a high pressure region. When the gas molecules collide with the ion, energy is transferred to the ion making it unstable and driving fragmentation reactions that occur prior to leaving the collision cell (Kinter). After fragmenting, the daughter ions produced are m/z analyzed in the second stage of mass analysis based on TOF similar to the first stage of analysis (Kinter pg  $52 - 53$ ).

# **8. Interpretation of product ion spectra**

The product ion spectrum is interpreted and the peptide is sequenced by mathematically matching it to a finite, albeit large, set of possible amino acid sequences from protein sequence databases (Kinter). By defining the set of possible amino acid sequences as the experimentally determined protein and gene sequences, the source protein sequence is also identified. Ideally, a protein is identified when a significant number of peptides can be matched to peptides derived from a particular database amino acid sequence (Kinter). While database mining can provide accurate peptide and protein identifications at incredible rates, the method does have drawbacks. Namely, mathematically matching spectra becomes statistical probability rather than a positive identification from direct methodical sequencing. The problem with statistical matching comes from the lack of absolute rules for judging significance of those scores beyond an intra-set ranking of possible matches between assigned scores and database information (Kinter). It is also particularly difficult to judge cut-off values for the incorrect matches, typical minimal cut-off scores for matches are ion scores of 100 and peptide ion scores of 50. Additionally, until every protein possible is known, computer-based sequencing methods may fail to identify a significant number of proteins for such reasons as low homology of the protein of interest to related database entries, post-translational modifications, or simply that the protein is unrelated to any database entry (Kinter pg 64 – 65). Despite these inherent drawbacks, database mining benefits usually far outweigh the costs since the aim is to find concentration changes in known proteins for future exploration.
For the most part, the relative strengths and weaknesses of MALDI versus ESIbased experiments are viewed differently by investigatiors. An indisputable strength of MALDI-TOF is the ease of instrument operation and the acquisition of high-sensitivity, high-resolution mass spectrum, and an indisputable weakness is the difficulty of obtaining any product ion spectra that might be needed to characterize a structure (Kinter pg 194 – 195).

#### **9. Western Blot**

 A Western Blot is an immunological assay where a sample mixture is first separated by 1D or 2D SDS-PAGE gels and the proteins are then electrophoretically transferred from the gel onto an immobilizing membrane. The membrane of choice is polyvinylidene fluoride (PVDF) which is a highly hydrophobic, nonpolar polymer that binds tightly to other nonpolar proteins through covalent bonding and Van der Waals forces. Once the proteins are bound to the membrane, two different antibodies, usually designated the primary and secondary, are used to detect the protein of interest. The primary antibody has been designed with a hypervariable region specific to a protein or single protein epitope captured on the immobilizing membrane. Once the primary is bound to the protein of interest, the secondary antibody reacts and binds to the segment of the primary antibody in the Fc or Fab region. The secondary antibody is usually labeled with a reporter enzyme or chemical which will produce a signal, either colorimetric or chemiluminescent, upon reaction with appropriate substrate, allowing visual identification of the protein of interest. There are several reporter enzymes, the standards are usually alkaline phosphatase (AP) or horseradish peroxidase (HRP) and each has their own advantages and disadvantages.

HRP is a heme-containing enzyme with a porphyrin ring exposed at the His 170 site by a coordinate bond between the histidine side chain Nε2 atom and the heme iron atom (Veitch). The reaction mechanism involves  $H_2O_2$  oxidizing the Fe (III) to form the HRP I intermediate (www.kpl.com). HRP I is in turn reduced by a hydrogen donor (typically aromatic phenols, phenolic acids, indoles, amines and sulfonates) via a one electron transfer to form another intermediate (HRP II) and a donor radical (Veitch,

KPL). HRP II is further reduced by an additional hydrogen donor via a one electron transfer to regenerate the original enzyme and another donor radical and then the two donor radicals combine to yield a detectable product (KPL). In the presence of excess H2O2 additional intermediates (HRP III and IV) may be generated which lead to inactive peroxidase (KPL). The main advantage of HRP versus AP is the high rate constant which means results appear quickly. The disadvantage of HRP is that excess substrate causes the additional HRP III and IV intermediates to accumulate which inactivates the peroxidase causing the signal to fade over time.

Alkaline phosphatase is a widely distributed, non-specific phosphomonoesterase which comprises a group of enzymes that catalyze the hydrolysis of phosphate esters. The reaction takes place in an alkaline environment through formation of a covalent phosphoseryl intermediate (E-P), generating an organic radical and inorganic phosphate. The enzyme also catalyzes phosphoryl transfer reactions to various alcohols (Kim, Reichling). Alkaline phosphatases occur widely in nature, and are found in many organisms from bacteria to man. With few exceptions, APs are homodimeric enzymes and each catalytic site contains three metal ions, i.e., two Zn and one Mg, necessary for enzymatic activity. The enzymes catalyze the hydrolysis of monoesters of phosphoric acid and also catalyze a transphosphorylation reaction in the presence of large concentrations of phosphate acceptors (Millan).

Alkaline phosphatase was the first zinc enzyme to be discovered in which three closely spaced metal ions (two Zn ions and one Mg ion) are present at the active center. Zn ions at all three sites also produce a maximally active enzyme. The active center Ser 102 becomes phosphorylated after nucleophilic attack on the monoester thus catalyzing

the hydrolysis. Zn1 coordinates the ester oxygen activating the leaving group in the phophorylation of Ser102 (Coleman). Likewise, Zn2 coordinates the ester oxygen of the seryl phosphate and activates the leaving group during the hydrolysis of the phosphoseryl intermediate. A water molecule (or hydroxide) coordinated to Zn1 following formation of the phosphoseryl intermediate acts as the nucleophile in the second step of the mechanism. Dissociation of the product phosphate from the E.P intermediate is the slowest, 35 s-1, and therefore the rate-limiting, step of the mechanism at alkaline pH (Coleman).

Because AP is easily farmed and harvested and the reaction is well characterized, AP is an effective reporter enzyme for western blots. The enzyme is easily bound to the secondary antibody, in this case Goat Anti-Rabbit IgG, and a substrate is reacted with the AP to form a precipitate proportional to the amount of protein bound on the PVDF membrane. A typical substrate is BCIP (5-bromo-4-chloro-3-indolyl phosphate) /NBT (nitroblue tetrazolium). BCIP hydrolysis produces an indigo precipitate after oxidation with NBT (Gallagher).

Common problems with using AP-labeled detection kits stems from the fact that the antigen is solubilized and electrophoresed in the presence of denaturing agents (SDS or urea), and some antibodies may not recognize the denatured form of the antigen transferred to the membrane (Gallagher). The results observed may be entirely dependent on the denaturation and transfer system used. For example, zwitterionic detergents have been shown to restore the antigenicity of outer membrane proteins in immunoblotting (Gallagher). Other potential problems include high background, nonspecific or weak cross-reactivity of antibodies, poor protein transfer or membrane

binding efficiency, and insufficient sensitivity (Gallagher). High background is a very common problem due to the natural ubiquity of AP in biological samples. However, high background can be mitigated by limiting membrane incubation in primary antibody to approximately two hours, washing the membrane with TBST and TBS between antibodies, and using a lower concentration of the AP labeled secondary antibody.

**Figure 6**: Diagram of Alkaline Phosphatase colorimetric protein detection using primary and secondary antibodies in Western Blot.



http://www.invitrogen.com/etc/medialib/en/images/ics\_organized/brands/molecularprobes.Par.75374.Image.-1.0.1.gif

#### **E. Rat Model Design**

 The rat model was chosen for this project because it is a well characterized model used in previous nephrotoxicity studies of rat urine. Additionally, rat serum can be drawn in greater volumes than from mice according to IAACUC regulations and the enrichment and 2D DIGE techniques used in this study require significant amounts of protein in order to produce reliable data. The serum samples for the BEA and Puromycin drugs came from Study 1 which was aimed at studying the low level nephrotoxicity of four drugs: BEA, d-serine, puromycin, and amphotericin B. However, problems arose during the study from a bacterial contamination of samples, equipment, and subjects resulting in loss of samples in irregular numbers. Because of the contamination, only the BEA, puromycin, and d-serine studies had reliable samples but the contamination of random samples threw off the statistical confidence of much of the data. The random number of viable samples led to the need to pool samples for the study which eliminated the ability to compare across and within each nephrotoxin in a truly statistical approach. However, based on previous metabonomic data using rat urine from the d-serine study, a second dserine study was conducted in order to strengthen obtained data.

 D-Serine study 2 was conducted similar to Study 1 with some changes in basic study design and in animal handling thanks to lessons learned from analysis of Study 1 data. The two major study design changes between d-serine study 1 versus study 2 were the source of controls and sample time points. In study 1, an internal control sample came from each rat by drawing a pre-dose sample for comparison against 24 hour post dose and 96 hours post dose blood draws. After 96 hours post dose, the rats were sacrificed and this sample labeled Terminal Sacrifice. Though an internal control is

desired and multiple samples from one rat have greater confidence of variable control, not enough serum was obtained for the multiple studies relying on the samples. Thus, in study 2 each rat was individually sacrificed at the designated time point and all the serum from the rat was collected at the time. Using this method ensured enough serum quantities for all the studies at hand. In addition to changing the method of sample serum draws, analysis of d-serine study 1 data by LC/MS/MS demonstrated most changes in protein concentrations occurred between 12 and 24 hours post dose. Therefore, instead of a serum sample taken pre-dose, 24 hours post dose and at terminal sacrifice like in study 1, subjects were sacrificed at 12 hours post dose and 24 hours post dose.

Animal/sample handling changes included randomly distributing rat subject cages among the three shelves in the housing room. Study 1 placed all the animals in groups according to their dose and kept all the same doses on the same shelves. LC/MS/MS analysis of study 1 showed protein variations that could be attributed directly to shelving placement of the rat subjects. Additionally, serum and urine samples taken in Study 2 were immediately mixed with protease inhibitor cocktails to minimize degradation during collection and storage times. Explicit details for Study 1 can be found in Attachment 1.

### **II. PURPOSE**

 The kidney is highly susceptible to damage from chemical and xenobiotic compounds because it receives 25% of cardiac output directly from the heart and functions as a filter by removing and concentration bodily wastes for excretion. The inherent danger to the kidneys is evident in the 19 million people who suffer from Chronic Kidney Disease (CKD) in the U.S. alone. Compounding the problem is that the overwhelming majority of CKD patients are not diagnosed until Stage IV (Severe CKD: dialysis or a kidney transplant needed in the near future) which is when clinical symptoms begin to manifest strongest. If kidney functions could be monitored on a routine basis by non-invasive means, more people could be properly diagnosed and treated earlier when full recovery is still an option. Currently, clinicians' measure urine samples for evidence of protein and creatinine while measuring blood serum for blood urea nitrogen (BUN) levels then combine the figures to estimate the Glomerular Filtration Rate (GFR). The drawbacks are that these tests are not always accurate and the GFR varies from person to person. The purpose of this project is to study the protein levels in healthy rats vs rats with low-level kidney degradation in an effort to identify small, lowabundant proteins that could serve as biomarkers in a highly sensitive test for low-level kidney degradation. Three well-characterized nephrotoxins will be used to target specific kidney sections in an effort to identify protein(s) useful for determining overall kidney health in a time- and dose-dependent manner.

# **III. HYPOTHESIS**

 The hypothesis of this study is that small, low-abundant proteins can be electrophoretically separated in order to compare and contrast the protein volumes of control rats vs diseased rats in order to identify protein biomarkers of low-level kidney degradation.

# **Specific Aims**

- (1) Enrich serum samples by removing large, over-abundant proteins (albumin, transferrins, IgG, etc.) using an immunodepletion chromatography column.
- (2) Separate enriched serum based on isoelectric point and molecular weight using 2-dimensional Difference in Gel Electrophoresis (DIGE)
- (3) Isolate proteins of interest from the 2D DIGE gels using analytical software
- (4) Sequence and identify protein peptides using MALDI-TOF/TOF mass spectrometry and MASCOT database
- (5) Research identified proteins for their potential as biomarkers

# **IV. EVALUATION OF MARS COLUMN**

#### **A. Methods**

### **1. Serum Enrichment**

The first attempt at removing high-abundant proteins from the rat serum samples used an HPLC version of the Multiple Affinity Removal System for Mouse Serum Proteins (MARS MS-3) column purchased from Agilent. This column uses antibodyantigen interactions to capture high-abundant proteins and remove them from the sample serum. Removing the high-abundant proteins allows one to visualize and study lowabundant proteins with proteomic analysis techniques such as 1D and 2D gel electrophoresis and mass spectrometry.

To begin the serum immunodepletion, Agilent's proprietary Buffer A and Buffer B were poured into the HPLC reservoirs and the HPLC lines were purged, first with Buffer A then with Buffer B, at a flow rate of 1.0 mL/min for 10 min without a column to ensure all lines were flushed of any mobile phase from previous use. Afterwards, the MARS column was installed in the HPLC and the column was conditioned using Buffer A. Next, the LC timetable was set up and two method blanks were run by injecting 200 µL of Buffer A without a column. The column was then attached and equilibrated for 4 min with Buffer A with a flow rate of 1 mL/min at room temperature.

Once the HPLC lines and MARS column were flushed and equilibrated, rat serum sample 119, a BEA control subject from study 1; sample 245, a control from D-Serine study 1; and sample 305, a Puromycin control subject from study1, were diluted 1:5 by combining  $90-\mu L$  of serum with  $360-\mu L$  of Buffer A. The diluted samples were filtered using a 0.22-µm spin filter for 1 min at  $16,000 \text{ x g}$ . Next, 450 µL of each diluted serum

was injected into the HPLC and run through the column at a flow rate of 0.5 mL/min using 100% Buffer A for 10 minutes. The Flow-Through (FT) fraction was collected by autosampler from 4 to 6 min in one minute intervals, giving 0.5 mL volumes then stored for later analysis. The bound proteins were eluted with 100% Buffer B at a flow rate of 1 mL/min for 7.0 min. The autosampler was programmed to collect the Elution (E) fractions from 11 min to 15 min collecting 1 ml per minute. Once the bound proteins were eluted, the column was regenerated by running 100% Buffer A for 11.0 min at a flow rate of 1 mL/min. Once the FT and E fractions were collected, they were concentrated and the buffer exchanged for 2M urea. This concentration/buffer exchange was done using an Amicon YM-5, a 5 kDa molecular weight cutoff spin tube in a standard 15 mL plastic collection tube. The HPLC protocol is depicted with a sample chromatogram from the Agilent manual in Figure 1.



#### **2. Protein Assay**

In order to run 2D DIGE gels, the exact protein concentration is needed in each sample since equal amounts of protein mass (in  $\mu$ g) are required for the imaging statistics to work properly. Additionally, regular 2D PAGE gels with silver staining require known protein concentrations so that the gels are not overloaded which decreases resolution and protein identification. For this study, the protein assay also serves as a quality control measure since the amount of protein in the FT and E fraction of each sample can be compared and used to indicate column removal efficiency.

The protein assay used most often was the Non-Interfering Protein Assay kit from GBiosciences. First, the kit was laid out along with a 2 mL 96 well plate (Fisher #07- 200-701) and the serum samples sitting in ice. A standard curve was set up by adding 25, 20, 15, 12.5, 8, 5, 4, 2, 1, and 0  $\mu$ L of BSA (2  $\mu$ g/ $\mu$ L) in triplicate to the plate followed by serum samples which were added in  $2 \mu L$  quantities in triplicate to the plate. Next,  $500$ µL of UPPA-1 was added to each well using a repeater pipet and 10 mL plastic syringe. Adhesive film (Fisher #05500-32) was placed over the plate and the entire plate was vortexed for approximately 30 seconds. The plastic film was removed and the samples allowed to incubate at room temperature for 2 -3 minutes. Next, 500 µL of UPPA-II was added to each well, a plastic adhesive film placed over top and vortexed briefly. The plate was weighed and then, a balancer plate was weighed and adjusted to within 0.05 g of the sample plate using water. The plates were centrifuged on a Dupont Sorvall RT6000D using 11093 rotor at  $3400 \times g$  and  $4^{\circ}$  Celsius for 15 minutes. While centrifuging, Reagent II was mixed by adding 100 parts Color Reagent A with 1 part Color Reagent B with enough for 1 mL per sample. After centrifuging, the supernatant

was discarded by inverting the plate in the sink and blotting off excess liquid on kim wipes. Next, 500 µL of UPPA-1 was added to each well, taking care to not disturb the pellet at the bottom. Then,  $100 \mu L$  of UPPA-II was added to each well and the plate was covered with plastic adhesive film and gently inverted a few times (Do NOT Vortex!). The plate and a balancer plate were again weighed and adjusted until balanced and centrifuged as before but for only 10 minutes. Afterwards, the supernatant was poured off and excess liquid blotted off with kim wipes. Then, 100 µL of Copper Solution (Reagent I) was added to each well and followed by 400 µL of nanopure water in each well. The plate was covered with plastic adhesive film and vortexed to dissolve the pellet. Next, 1 mL of Reagent II was added to each well and the samples allowed to incubate for 15 – 20 minutes at room temperature. Aftewards, 200 µL of each solution was transferred to a microtest 96 well plate (Fisher #12-565-501) using a 12 channel pipet. Lastly, 200 µL of nanopure water was added to three wells for Blanks. The plate was read using a Molecular Devices SpectraMax 190 at 480 nm and the data was collected using Softmax Pro software. All data was processed using Excel.

### **3. 2-Dimensional Polyacrylamide Gel Electrophoresis (2D PAGE)**

# **a. Separation in the 1st Dimension**

Isoelectric Point Gradient (IPG) strips were prepared to separate the serum proteins by isoelectric point in a pH gradient ranging from 4 to 7. First, the sample was pippetted into the lanes of a reswelling tray. Next, the plastic liners were removed from the IPG strips and the strips placed into the reswelling tray with the plastic backing facing down. Mineral oil was added on top of all the IPG strips to prevent them from drying out, the cover was placed on the reswelling tray to protect the sample and the IPG strips were allowed to incubate overnight to absorb all the proteins. The next day the IPG strips were carefully removed from the trays using tweezers, excess mineral oil was allowed to drip off onto kimwipes, and the strips were placed into a liner tray. Two electrode strips were cut to fit across the liner tray and 1 mL of water was pippetted onto each side of the electrode strip with excess water blotted off using kimwipes. The electrode strips were placed across the IPG strips at the top and bottom then the plastic electrodes clamped in place. The electrode/IPG tray conglomerate was clamped in place on the electrophoresis apparatus and mineral oil was used to fill any remaining gaps. The apparatus and its cooling system were turned on, set to 300V, and allowed to run overnight in an 18 hour gradient cycle reaching a max of 3000V.

As the serum is separated in the  $1<sup>st</sup>$  dimension, the gel tank and necessary buffers were prepared for running the gel in the  $2<sup>nd</sup>$  dimension the next day. Mike Wyder previously mixed stock buffer solutions in 10X concentrated form and kept them in a cold room. The lower tank buffer was prepared by pouring 8 L of Millipore water into the lower tank and mixed with stock buffer, which was diluted by mixing 1 L of 10X

concentrate with 1 L of Millipore water in a 2 L graduated cylinder. The diluted solution was left in the tank overnight with the cooling fan turned on and the tank covered overnight. The Upper buffer was prepared by diluting 300 mL of 10X Upper buffer solution to 3 L in a 4 L Erlenmeyer flask with Millipore water. The diluted solution was transferred to a 3 L plastic beaker and placed on a stir plate with stir bar and covered for the evening.

# **b. Separation in 2nd Dimension - Protocol**

The next day, the samples and apparatus were ready for separating the serum proteins in the  $2<sup>nd</sup>$  dimension. First, two 50 mL conical tubes of equilibration buffer were taken from the cold room and allowed to thaw. To one tube was added 800 mg of DTT and to the other tube was added 1 g of Iodoacetamide (IAA). The IAA tube was wrapped in aluminum foil since IAA is light sensitive. Both conical tubes were placed on a rocker plate to warm and dissolve the newly added chemicals. Once thoroughly mixed, the equilibration buffer/DTT and equilibration buffer/IAA solutions were filtered in their own disposable 0.22 micron vacuum filter beakers (covering the IAA beaker in aluminum foil again) to remove any particulates. In the mean time, the IPG strips were removed from the electrode tray using tweezers and kimwipes to blot off excess mineral oil. The strips were placed into a reswelling tray, covered with the DTT buffer, wrapped in aluminum, and placed on a BellyDancer for 15 minutes. After the 15 minutes, the DTT buffer was vacuumed up and the process repeated three more times, once more with DTT and twice with the IAA solution giving a total of four washes in equilibration buffers. Next, the gel apparatus was prepared by placing spacers into the slots in the upper tank and double paned, pre-cast gels purchased from Nextgen Sciences Inc (cat # PRS-703696) were placed into the tanks as well. Then, the Upper buffer was poured into the upper tank until the tops of the gels were barely covered, the IPG strips placed into the gel wells using tweezers, and the remaining buffer poured into the tank. The apparatus was enclosed and the gel run at 500 mA for 5 hours, 51 minutes. Once the proteins had separated, the gels were removed from the apparatus, cut from the glass plates, silver stained according to protocol, then digitally scanned for analysis.

### **c. Proteosilver Silver Stain**

Sigma's ProteoSilver™ Silver Stain Kit was used to silver stain the small, precast gels purchased from Invitrogen. The final volume for each solution mixed for this kit depended on the number of gels to be stained since each gel required 200 ml of each solution. First, the gels were placed into a clean tray (up to 2 gels per tray) to soak in Fix 1 solution (50% Ethanol, 10% Acetic Acid) from 1 hour to overnight. The gels were removed from the Fix 1 and placed into Fix 2 (30% Ethanol) for 10 minutes and then the gels were washed with Millipore water for 10 minutes. Afterwards, the gels were placed into Sensitizer solution for 10 minutes which was made right before use by diluting ProteoSilver Sensitizer 1:100 with Millipore water. After soaking in Sensitizer, the gels were washed with Millipore water twice for 10 minutes apiece. Next, the gels were placed into Silver solution for 10 minutes. The Silver solution was prepared by diluting the ProteoSilver Silver Solution from the kit 1:100 with Millipore water and was used immediately since the diluted solution only had an active life of 2 hours. The gels were then removed and washed for 1 minute using Millipore water. Once cleaned, the gels were placed in developer solution for 3 to 7 minutes depending on the amount of protein in the gel and the intensity of the staining desired. The Developer solution was made right before use by adding 5 ml of ProteoSilver Developer 1 chemicals and 0.1 ml of ProteoSilver Developer 2 chemicals to 95 ml of Millipore water. Like the other solutions, the developer was scaled up to give a final volume so that each gel would be immersed in 200 ml of solution. Once the protein spots were dark enough, but before the background became too elevated, 5 ml of the Stop solution included in the kit, was added directly to the Developer Solution and allowed to incubate for 5 minutes.

### **B. Results**

#### **1. Protein Assays and 2D PAGE**

After serum enrichment, samples were tested by protein assays and 2D gels to gauge the performance of the Agilent column. All initial tests showed that the Agilent MS-3 column did not remove enough high abundant proteins to allow visualization of low abundant proteins. The Agilent literature states that the MARS MS-3 column is capable of removing 80% of the albumin, transferrin, and IgG from rat serum. Literature searches online and from Agilent point out that approximately 98% of serum proteins are the over abundant proteins, of which albumin, transferrin, and IgG make up the majority. Assuming that 80% of the top three abundant proteins are removed by the Agilent column, that means 78.4% of all proteins should be removed from the serum samples. The NI protein assay from 12 June measured a protein concentration of 2.82  $\mu$ g/ $\mu$ l in the Elution fraction of sample 119 but 3.56  $\mu$ g/ $\mu$ l in the Flow Through fraction while the assay from 14 June measured a 39.38  $\mu$ g/ $\mu$ L concentration in the whole serum of sample 119. These values mean that 7.16% of the albumin, transferrin, and IgG were captured in the E fraction and 9.04% of the proteins washed through in the FT fraction. Given the abundance of the top three, one would have expected to see a greater concentration of proteins in the E fraction compared to the FT fraction. These values also indicated that a large majority of the proteins were being lost in the concentration/buffer exchange phase since one expects a greater protein recovery than 16.2% combined. The evidence that the Agilent column was not effective was further demonstrated in the large 2D, silver stained gels shown below.

**Figure 8**: **A)** Non- Interfering (NI) Protein Assay showing protein concentrations for E and FT fractions of Control Samples 119, 245, 305 **before** concentration & buffer exchange. **B)** NI Protein Assay showing protein concentrations for E and FT fractions and Whole Serum (WS) of Control Samples 119, 245, 305 **after** concentration & buffer exchange.



**B** 9.34 9.58 7.66 6.08 8.54 8.25 39.38 30.94  $\Omega$ 10 20 30 40 50 119 FT 245 FT 305 FT 119 FT 245 FT 305 FT 119 WS 305 WS 6 ul 6 ul 6 ul 1 ul 1 ul 1 ul 2 ul 2 ul **NI Protein Assay 14 June 07**

**Figure 9**: 2D PAGE of Sample 119 Flow Through after immunodepletion with Agilent MARS MS-3 HPLC



**Figure 10**: 2D PAGE of Sample 119 Whole Serum after immunodepletion with Agilent MARS MS-3 HPLC



 Comparison between the FT fraction gel and the Whole Serum gel shown in Figures 9 and 10 demonstrate that very little enrichment occurred using the Agilent MARS column. The large swaths of proteins and low spot resolution indicate that immunodepletion requires additional optimization in order to achieve significant results.

# **C. Discussion**

Based on the evidence from the protein assays and gel images, it was concluded that the Agilent HPLC MARS column did not work as advertised and optimization tests were needed. The large swaths of over abundant proteins prevent any ability to visualize smaller, low abundant proteins by 2D DIGE gel and would also prevent any image analysis. Optimization tests included reducing the amount of rat serum injected into the column and running the column at slower flow rates. Additionally, the centrifuge version of the MARS column was tested and both HPLC and spin columns were tested with commercially purchased mouse serum. The mouse serum was used as a control since the MARS column was advertised specifically for mouse serum.

#### **V. MARS COLUMN OPTIMIZATION**

# **A. Methods**

### **1. Serum Dilution**

To test the theory that the MARS column was overloaded with too much rat serum, sequentially less volumes of serum were diluted 1: 5 per the protocol and injected into the column. The spectrometry data was coupled with 1D gels to identify an optimal volume that would produce better separation of proteins. The test used 5 volumes, 10, 20, 30, 40, 50 µL, all of which were diluted 1:5 and run through the HPLC column according to Agilent's protocol as detailed previously on page 36. Results are shown in Figures 11 and 12.

#### **2. Flow Rate**

To test the theory that the overabundant proteins would bind with greater efficiency if given more time to interact with the stationary phase, the flow rate was reduced from 0.5 ml/min to 0.25 ml/min. The general protocol from Agilent was otherwise unchanged and followed the outline described previously on page 36 and shown in Figure 13.

### **3. Positive and Negative Control Tests**

The MARS MS-3 column was designed to remove the top three over-abundant proteins from mouse serum but this study used rat subjects. Since rat proteins have a different morphology from mouse proteins, the MARS HPLC column was tested using commercially purchased mouse serum. The Agilent HPLC protocol was strictly followed as described previously on page 36. Additionally, after testing the HPLC MARS MS-3 column, a MARS MS-3 spin column was tested to discern if the HPLC column was manufactured incorrectly or possibly damaged during shipping. Both commercially purchased mouse serum and control samples 119 and 305 from the study were used on the spin column according to Agilent protocol.

# **B. Results**

# **1. Serum Dilution**

**Figure 11**: Small 1D SDS-PAGE of collected FT and E fractions of rat control sample 119 from MARS HPLC column with sample volumes ranging from 10 – 40 ul. The samples are in lanes  $2 - 9$  and are as follows:

- 
- 
- 3) FT fraction of 10 ul of sample 119
- 4) E fraction of 20 ul of sample 119 9) FT fraction of 40 ul of sample 119
- 5) FT fraction of 20 ul of sample 119 10) See Blue Standard
- 1) See Blue Standard (6) E fraction of 30 ul of sample 119<br>
2) E fraction of 10 ul of sample 119 (7) FT fraction of 30 ul of sample 119
	- 2) FT fraction of 30 ul of sample 119<br>
	2012 B fraction of 40 ul of sample 119
	-
	-
	-



**Figure 12**: Small 1D SDS-PAGE of collected FT and E fractions of rat control sample 305 at  $10 - 40$  ul. The samples are in lanes  $2 - 9$  and are as follows:

- 
- 2) FT fraction of 10 ul of sample 305 7) E fraction of 30 ul of sample 305
- 3) E fraction of 10 ul of sample 305 8) FT fraction of 40 ul of sample 305
- 4) FT fraction of 20 ul of sample 305 9) E fraction of 40 ul of sample 305
- 5) E fraction of 20 ul of sample 305 10) See Blue Standard

Image file: sm0607-03



- 1) See Blue Standard 6) FT fraction of 30 ul of sample 305
	-
	-
	- -

The consistent band sizes and intensities across all samples in both gels demonstrate that there is no difference in column effectiveness as the amount of protein is decreased. This fact meant that either this specific column was defective due to either manufacturing or shipping problems or simply that rat proteins do not bind well to the Agilent column.

#### **2. Flow Rate**

Figure 13 shows the FT and E fractions after changing the HPLC run to collect more of the FT fraction from sample 119 and 305 in gel lanes  $2 - 8$ . This change in protocol is denoted by 01A at the end of the sample name. One unexpected result was the collection of a second elution peak for sample 305 run under the 01A protocol. This fraction was tested in Lane 8 to see if there were any significant differences from the other fractions. Lanes 9 and 10 show the FT and E fractions of sample 305 after the protocol was changed to a slower flow rate of 0.25 ml/min from the protocol 0.5 ml/min to give the top three proteins longer time to bind to the mouse-3 column. This change in protocol is denoted by 02 at the end of the sample name. The consistent protein bands across all FT and E fractions in the gel show that no binding improvement was achieved. Based on this result, it was inferred that rat protein homology differs from mouse proteins in ways that prevent the stationary phase from efficiently binding and removing overabundant proteins.

**Figure 13**: 1D SDS-PAGE of Samples 119 and 305 using Agilent HPLC MARS MS-3 column after change in protocol to test enrichment effects of slower flow rate.

- 1) See Blue Standard
- 2) FT fraction 20 ul of sample 119 01A run 1
- 3) E fraction 20 ul of sample 119 01A run 1
- 4) FT fraction 20 ul of sample 119 01A run 2
- 5) E fraction 20 ul of sample 119 01A run 2
- 6) FT fraction of 20 ul of sample 305 01A
- 7) E 1 fraction of 20 ul of sample 305 01A
- 8) E 2 fraction of 20 ul of sample 305 01A
- 9) FT fraction of 20 ul of sample 305 02
- 10) E fraction of 20 ul of sample 305 02

Image file: sm0607-04



## **3. Positive and Negative Control Tests**

Figure 14, lanes  $2 - 5$ , show collected FT and E fractions of mouse control serum purchased from Sigma. Samples of control mouse serum were run on the HPLC column by injecting 90 ul and following Agilent protocols. Once fractions were collected, a 1 ul sample and a 10 ul sample of each fraction was prepared according to protocols and run on a 1 D gel since the protein concentration was unconfirmed. Lanes  $6 - 9$  show the mouse control serum FT and E fractions after filtration using the Agilent Mouse-3 spin cartridge. Once the FT and E fractions were collected, a 1 ul sample and a 10 ul sample were prepared using protocols and run on a 1 D gel since protein concentration was unconfirmed.

**Figure 14:** 1D SDS-PAGE comparing Agilent MARS MS-3 HPLC and Spin columns using commercially purchased mouse serum enriched according to protocols

- 
- 
- 
- 
- 5) E mouse control HPLC 10 ul 10) See Blue Standard
- 1) See Blue Standard 6) FT mouse control Spin Column 1ul
- 2) FT mouse control HPLC 1 ul 7) E mouse control Spin Column 1 ul
- 3) E mouse control HPLC 1ul 8) FT mouse control Spin Column 10 ul
- 4) FT mouse control HPLC 10 ul 9) E mouse control Spin Column 10 ul
	-



**Figure 15**: Negative control rat samples from puromycin (subject #305) and bromoethylamine (BEA) (subject #119) nephrotoxicity studies. The samples were filtered through the Agilent mouse-3 spin cartridge in order to compare the depletion results with the HPLC column. The samples were run in duplicate according to Agilent protocol and separated by 1 D gel. The lanes are as follows:

- 
- 
- 
- 
- 5) E rat sample 305 run 2 10) See Blue Standard
- 1) See Blue Standard 6) FT rat sample 119 run 1
- 2) FT rat sample  $305$  run 1  $\overline{7}$  E rat sample 119 run 1
- 3) E rat sample  $305$  run 1 8) FT rat sample 119 run 2
- 4) FT rat sample 305 run 2 9) E rat sample 119 run 2
	-



 The distinct difference in protein band intensity between the Mouse FT and E fractions compared to the consistent protein band intensities of the Rat FT and E fractions indicate that the MARS MS-3 column does work well at enriching mouse serum samples but does not work as advertised on rat samples. The stationary phase of the MS-3 column is simply unable to adapt to the different protein morphologies and cannot enrich rat serum for use in this project. The corroboration with the spin column confirmed that the HPLC column was not damaged and merely cannot cope with rat serum.

### **C. Discussion**

All of the optimization tests demonstrated that the Agilent MARS column was performing at maximum effectiveness but was still unable to provide the resolution needed for a DIGE study. Injecting smaller sample volumes to decrease the amount of protein enriched by the column showed no improvement which meant that the column was not being overloaded. Slowing the flow rate to increase antigen-antibody interaction time did not increase enrichment resolution either. The final testing comparing rat serum with mouse serum both in the HPLC column and the spin column confirmed that the HPLC column was not a faulty anomaly but that the MS-3 stationary phase was simply unable to bind rat protein as effectively as advertised by Agilent. In order to advance the project, a new column was obtained from another lab that advertised as being effective at removing the top seven abundant proteins in rodents. The column was the IgY, chicken antibody, spin column from Proteome Labs called the IgY-R7. This column was purchased from Beckman-Coulter and field tested using commercially purchased rat serum from Sigma-Aldrich.

### **VI. PROTEOMET LAB IgY-R7 COLUMN TESTING**

### **A. Methods**

#### **1. Enrichment**

 A demonstration IgY column kit was obtained from a sales representative and tested for effectiveness using 1D Gels and BCA and Non-Interfering protein assays. Commercially available rat serum was purchased from Sigma Aldrich for the IgY tests so as not to waste study samples. The rat serum was run through the column according to the Proteome Lab protocol and concentrated using Microcon YM-10 and YM-3 spin cartridges.

Use of the ProteomeLab IgY-R7 Spin Column Proteome Partitioning Kit strictly followed the protocol included with the kit. To begin using a new column, the bottom snap was removed and the column was placed into a 2 mL collection tube and centrifuged for 30 sec at 2,000 rpm to remove the storage buffer. Next, the column was conditioned by performing two complete buffer runs without adding any sample.

A conditioning buffer run began by adding 500 µL of 1X Dilution Buffer to the column, inserting the top cap, inverting and shaking the column several times to fully immerse all the IgY beads, and placing the column in a 2 mL centrifuge collection tube. The column and collection tube were then centrifuged for 30 sec at 2,000 rpm. The collection tube was removed, end cap placed on the column, and the previous step repeated a total of four times. The next step to condition the IgY beads used 500  $\mu$ L of 1X Stripping Buffer and repeated the previous steps a total of four times. The final step to condition the column was to regenerate the IgY beads using  $600 \mu L$  of Neutralization Buffer and repeating the previous steps a total of one time. All three steps (wash, elution,

neutralization) constituted one conditioning run. The entire process was repeated a second time. The column only needed to be conditioned before its first use, no conditioning was necessary between uses on samples.

Before immunodepletion, 5 mL of 10X Dilution Buffer was mixed with 100 µL of Protease Inhibitor and diluted to 50 mL in a conical tube. The protease inhibitor was to help reduce protein degradation during the enrichment process. To begin sample immunodepletion, 15 µL of rat serum was diluted in 485 µL of Dilution Buffer and pipetted into the spin column. The column was sealed with the top cap, inverted and shaken, then incubated at room temperature for 15 minutes. The end cap was removed from the bottom of the column and the column was placed into a 2 mL collection tube and centrifuged for 30 sec at 2,000 rpm using a desktop mini-spin centrifuge. The collection tube with the Flow-Through (FT) fraction was set aside in ice and the end cap placed on the column. Next, 500 µL of Dilution Buffer was added and the beads and buffer mixed by inverting and shaking the column. Then, the end cap was removed, column placed into a 2 mL collection tube, and centrifuged for 30 sec at 2,000 rpm. The second and final FT fraction was collected and placed on ice. The same process was repeated three additional times with 500 µL of 1X Dilution Buffer to give the Wash fractions.

After washing and collecting the low-abundant proteins, the bound proteins were eluted and collected. To remove the bound proteins, the end cap was placed on the bottom, 500  $\mu$ L of 1X Stripping Buffer was added to the column, and the top cap was snapped into place. The beads were mixed by inverting and shaking the column then incubated at room temperature for  $2 - 3$  minutes. The end cap was removed and the

column placed into a 2 mL collection tube. The column and tube were centrifuged for 30 sec at 2,000 rpm. This process was repeated three more times for a total of 4 Elution fractions each approximately 500 µL in volume with each fraction being stored on ice during the interim. The column should not be exposed to Stripping Buffer longer than 15 minutes to ensure column stability. Immediately after the final Elution fraction, the end cap was attached,  $600 \mu L$  of Neutralization Buffer was added, and the top cap snapped on so the entire column could be inverted and shaken to mix the beads. The column was left to incubate at room temperature for 5 minutes then the end cap removed and the column placed into a 2 mL collection tube. The column and tube were centrifuged for 30 sec at 2,000 rpm. If another sample was ready it would be added to the column and the entire process repeated. If no other sample were ready, 500  $\mu$ L of 1X Dilution Buffer would be added with the caps in place and the beads mixed for storage until next use.

 After all nine fractions were collected and stored on ice, the two FT fractions, three W fractions, and 4 E fractions were pooled according to their respective groups into one 2 mL collection tube per group. The E fraction also included 220 µL of Neutralization Buffer to prevent protein degradation. After all samples were prepared for storage, they were labeled and placed in a  $-20^{\circ}$  Celsius freezer.

#### **2. 1-Dimensional Polyacrylamide Gel Electrophoresis (1D PAGE)**

For the 1D gel test, 15 ul of commercially available rat serum was diluted with 485 ul of IgY dilution buffer for a 1:33 dilution. The diluted sample was run through the column and the first generation FT fraction was collected (1 ml) and labeled Run 3. The column was then washed and abundant proteins were stripped off and collected to give the first generation Elution fraction (2 ml). Once the column was stable, 500 ul of the first generation FT fraction was run through the column as Run 4. The Run 4 FT fraction was collected (1 ml) and the bound proteins were stripped to give a second generation E fraction (2 ml) labeled Run 4 Elution. A BCA protein assay was next in an effort to quantify the protein concentrations in each fraction. Unfortunately, the concentrations were so small they were below the sensitivity of the assay. So, the fractions were concentrated by centrifugation using a Microcon YM-3 concentration tube. This tube uses a filter and centrifugal force to collect anything greater than 3 kDa in size. Once the samples were concentrated, a buffer exchange was performed by adding 1 ml of 2M urea to the tube and centrifuging the sample for 2 hours. A total of 2 buffer exchanges were performed. Once the samples were concentrated, a BCA assay was performed again in an effort to quantify the extent of the protein removal.

# **B. Results**

 Testing of the IgY column used rat serum purchased commercially from Sigma-Aldrich. The serum was enriched according to Proteome Lab protocols and the  $1<sup>st</sup>$ Generation FT1, FT2, W, and E fractions were labeled as Run 1 and a protein assay run to measure the protein concentrations. Afterwards, the 1G FT1 and FT2 fractions were combined and concentrated to give a single 1G FT fraction. This fraction was then diluted with Proteome Lab's Dilution Buffer to a final volume of 500 µL and run through the IgY column a second time. The  $2^{nd}$  Generation (2G) FT1, FT2, W, and E fractions from the further enriched serum were collected, labeled as Run 2, and assayed for protein concentration. The first chart showing the concentrations is shown below in Figure 16:

**Figure 16**: BCA protein assay used to measure the three fractions collected after enriching rat serum using an IgY antibody column on 27 Aug 07. The Run 1 (R1) label designated the FT, W, and E 1G samples collected after initially enriching whole rat serum. The Run 2 (R2) label designated the 2G FT, W, and E samples collected after further enriching the R1 FT fraction.



The low concentration values from the BCA assay were of concern so to ensure that no interfering substances distorted the assay, a Non-Interfering assay was repeated on the samples to confirm the results. The NI assay results were similar enough to the BCA assay results that one can assume the values accurate. The NI assay repeat is shown below in Figure 17.
Figure 17: NI Protein Assay of commercial rat serum enriched by IgY column, repeat of BCA assay on sample runs 1 & 2.



 In order for the samples to be separated by DIGE gels, the samples are required to have a concentration of  $1 \mu g/\mu$  at minimum however, the higher the concentration then the better. In order to figure out how much raw sample was needed for enrichment, the individual samples were concentrated once using the YM-3 spin cartridge and a NI assay was repeated. The results are shown below in Figure 18:

**Figure 18**: NI Protein Assay of commercially purchased rat serum enriched using IgY spin column and concentrated using the YM-3



Each fraction, Flow Through 1, Flow Through 2, Wash, and Elution, were individually measured after being concentrated. The values did not fit expected trends so another NI assay was repeated to ensure accurate results. The next assay contained nonconcentrated samples and final, concentrated samples paired together. The samples combined both FT fractions into one concentrated sample and combined all four E fractions into one concentrated sample. The results are shown below in Figure 19:

**Figure 19**: NI protein assay comparing IgY column enriched samples after- and beforeconcentration using YM-3 spin cartridge. The first four columns indicate samples after concentration and the last four columns indicate samples before concentration.



Figure 19 demonstrated a significant increase in protein concentration and that the IgY column was effective at removing abundant proteins as evident by the elevated values from the condensed E fractions relative to the condensed FT fractions. After measuring the protein concentrations of the enriched samples, small 2D PAGE gels were run in order to provide a visual comparison of the protein resolution provided by each column. The small 2D gels were chosen as a qualitative test because they gave cheaper and faster results. To run the gels, the samples were prepared by first concentrating the FT and E fractions then exchanging the buffer using a Microcon YM-10 spin cartridge and 2M urea. The buffer exchange was deemed necessary since the IgY kit uses a buffer that is very high in salt (150 mM NaCl). This high salt content would destroy any subsequent 2D gels that may be run. The gel results can be seen below in Figure 20 - 23:

Figure 20: Small 2D PAGE gels comparing 1<sup>st</sup> Generation FT and E fractions and 2<sup>nd</sup> Generation FT and E fractions after buffer exchange and YM-3 concentration to demonstrate the increased enrichment with each pass through the IgY spin column. **A)** Flow Through Fraction, rat serum, 1<sup>st</sup> Gen **B**) Elution Fraction, rat serum, 1<sup>st</sup> Gen **C**) Flow Through Fraction, rat serum, 2<sup>nd</sup> Gen **D**) Elution Fraction of rat serum, 2<sup>nd</sup> Gen





**C:** FT Fraction, Rat Serum, 2<sup>nd</sup> Gen **D:** E Fraction, Rat Serum, 2<sup>nd</sup> Gen





Despite the buffer exchange and protein concentration, the 2D gels showed better resolution of protein spots than the large gels of Agilent enriched samples. A wide range of proteins were evident based on both isoelectric point and molecular mass. The important result seen in the gels was that the Elution fraction does show increased removal of significant amounts of over abundant proteins like albumin, transferrin, and IgG. A visual comparison clearly showed a greater amount of protein in the albumin range in the E gel than the FT gel. Unfortunately, the 2 D gels still showed a lot of streaking and low resolution of protein spots. Other areas of concern were the numerous spots in the elution gels directly under the albumin blob and there appeared to be more proteins in the gel than the seven targeted over-abundant proteins listed: albumin, IgG, transferrin, fibrinogen, IgM, alpha 1-antitrypsin, and haptoglobin. The protein spots that appeared over multiple ranges of pHs and weights could just be artifacts of degradation or other isoforms for the same proteins. The 2D gels were a good test of the column's effectiveness but still took considerable time to run. In order to monitor the IgY column for degradation, a faster qualitative method was needed to act as a quality control for the enriched samples. Thus, a 1D SDS-PAGE gel was run (Figure 22) to see if visual results would be similar enough to the small 2D gel to act as a quality control for a pilot study.

The protein assay showed that there was 9.4 times the amount of protein in the Run 3 E fraction than in the Run 3 FT fraction. The greater amount of protein in the E fraction meant that most of the abundant proteins were removed in the first pass through the IgY column. The assay showed that the serial dilution worked well and removed additional abundant proteins as evidenced by more protein in the Run 4 FT fraction than in the Run 4 E fraction.



**Figure 21**: Average protein values for Run 3 and 4 after concentration using BCA assay

Once the protein concentrations were known, the fractions were run on a 1D gel and visualized using the genomics silver stain kit. Given the concentrations, 1 ul of each sample was used on the gel to see relative quantities. Image 1 shows the four fractions in the following order: Run 3 FT, Run 3 E, Run 4 FT, Run 4 E



**Figure 22**: 1D gel of Run 3 and 4 FT and E fractions after enrichment with IgY spin

The results showed that a 1D gel was an acceptable method of testing enriched samples since there was a clear difference in proteins based on the darkness of the stained protein bands. By combining the 1D gels with protein assays, the IgY columns could be suitably monitored for effectiveness throughout the pilot and full studies.

The last step in characterizing the effectiveness of the IgY column was to directly compare the IgY enriched samples versus the Agilent enriched samples with one NI assay. This assay is shown below in Figure 23:

**Figure 23**: NI Protein assay comparing IgY enriched samples versus Agilent MARS enriched samples.



Unfortunately, this assay did not provide relevant data as many of the calculated concentrations were found to be negative in value. The results from this assay were discarded since the other assays support the use of the IgY column as a suitable separation method for the study.

# **C. Discussion**

 Based on the results of the protein assays, 1D gels, and 2D gels, it was evident that the IgY spin column would successfully enrich the rat serum samples for use in this project. Based on the values from the protein assays, the samples required two passes through the column in order to remove enough of the over abundant proteins. To make up for the low protein concentrations, several aliquots would need to be enriched and concentrated using the YM-3 spin cartridges. To ensure all steps of the study would work as planned, a pilot study was initiated. All steps in the study were tested for optimal results using four samples, a control and high dose from Puromycin and D-Serine Study 1. Originally the pilot study called for a control and high dose from BEA as well but the protein concentration was not high enough to use the samples after enrichment and concentration.

#### **VII. PILOT STUDY**

## **A. Methods**

### **1. IgY Spin Column Enrichment**

The pilot study was an opportunity to define the optimal methods needed to ensure the IgY column removed the most amount of overabundant protein possible while still having enough sample to perform multiple DIGE gels. The pilot study samples were chosen from each drug study at a high dose and a control using the Terminal Sacrifice time points. From each sample, 15 µl of serum was pipette into an eppendorf tube and diluted with 485 µl of IgY dilution buffer. The IgY dilution buffer was made by diluting 100 µl of Sigma protease inhibitor cocktail to 10 ml with IgY dilution buffer. The diluted serum sample was then run through the IgY column which produced the  $1<sup>st</sup>$  Generation (1G) of FT, Wash, and E fractions  $(\sim 1.5 \text{ ml total})$ . The 1G FT and E fractions were concentrated using the Microcon YM-3 spin filters in the Sorvall centrifuge (3200 x g at 35 min, 4 C). Once the fractions were concentrated, the 1G FT samples were removed and mixed together by drug dose to create a pooled sample. The pooled sample was then diluted with IgY dilution buffer plus protease inhibitor to give a final volume of 500 ul. This pooled, 1G FT fraction was run through the IgY column once more to create the  $2<sup>nd</sup>$ Generation (2G) of FT, Wash, and E fractions. These 2G FT and E fractions were concentrated using the Microcon YM-3 spin filters as before. The figure below details the drug and dose of each rat used.

**Figure 24:** List of Animal subjects by dose and drug for pilot study using IgY column

	D-Serine		Puromycin		<b>BEA</b>	
	control (0	500	control (0	300	control (0	500
	mg/kg)	mg/kg	mg/kg)	mg/kg	mg/kg)	mg/kg
Rat subject	243	247	303	320	272	285
Rat subject	246	251	305	324	274	289

#### **2. CyDye Labeling of Proteins**

All work with the Cy Dyes must be done in as minimal light as possible since the dyes are light sensitive. All work from labeling to  $1<sup>st</sup>$  and  $2<sup>nd</sup>$  dimension separation of the proteins must be done with the lights off or with the experiments covered. First, the Cy Dyes needed to be reconstituted so once they were removed from the freezer and allowed to slowly warm for 5 minutes,  $5 \mu L$  of anhydrous DMF was added to the lyphohilized powder to create a 1 mM stock solution. The solution was vortexed for 30 seconds then centrifuged for 30 seconds at 12000 x g. Working solutions were made from the stock solution by adding 1.5 volumes (7.5  $\mu$ L) of DMF to a new eppendorf tube then mixed with the dyes. This dilution creates a final working solution of 400 pM which is recommended for labeling 50 µg of protein. Next, the pH was raised to the optimal value of 8.5 by adding diluted 50mM sodium hydroide and pH paper to check. After prepping the Cy Dyes, the samples were labeled by adding  $1 \mu L$  of Cy Dye to the eppendorf tube using Cy 2 to label the internal standard, Cy 3 to label the control sample, and Cy 5 to label the experimental sample. Once the samples were labeled the tubes were vortexed and centrifuged for 30 sec each and incubated on ice for 30 minutes. After labeling,  $7 \mu L$ of Pharmalyte buffer was added to each Cy Dye tube to quench the labeling reaction. Next, Rehydration Buffer (RHB) was prepared by adding 30 mM DTT and a calculated amount was added to the Cy Dye labeled samples to give a final volume of 345 µL. The samples, now labeled and in RHB, were kept in their eppendorf tubes and floated in a water sonication bath for 1 minute then placed on a shaker table for 15 minutes. The cycle of 1 min sonication, 15 minute shaker table, was repeated for a total of four cycles. The exact volumes of Cy Dye added to each sample are listed in the figure below:

$\mathbf{\sigma}$ 50ug each					
comp 1					
305/303 control vs 320/324					
	Cy <sub>2</sub> 303/305	Cy2 320/324	total Cy2	Cy3 303/305	Cy <sub>5</sub> 320/324
	67.7	33.2	100.9	135.4	66.5
comp 2					
243/246 control vs 285/289					
	Cy <sub>2</sub> 243/246	Cy2 285/289	total Cy2	Cy3 243/246	Cy <sub>5</sub> 285/289
	39.6	56.6	96.2	79.3	113.3

**Figure 25:** Example of volume of enriched, pooled sample added to Cy Dye for labeling

# 2. Separation in the 1<sup>st</sup> Dimension

After the samples were labeled, Isoelectric Point Gradient (IPG) strips were prepared to separate the serum proteins by isoelectric point in a pH gradient ranging from 4 to 7. First, the labeled samples were pippetted into the lanes of a reswelling tray. Next, the plastic liners were removed from the IPG strips and the strips placed into the reswelling tray with the plastic backing facing down. Mineral oil was added on top of all the IPG strips to prevent them from drying out, the cover was placed on the reswelling tray to protect the samples, the whole tray was wrapped in black plastic to block light, and lastly the IPG strips were allowed to incubate overnight to absorb all the proteins. The next day the IPG strips were carefully removed from the trays using tweezers, excess mineral oil was allowed to drip off onto kimwipes, and the strips were placed into a liner tray. Two electrode strips were cut to fit across the liner tray and 1 mL of water was pippetted onto each side of the electrode strip with excess water blotted off using kimwipes. The electrode strips were placed across the IPG strips at the top and bottom then the plastic electrodes clamped in place. The electrode/IPG tray conglomerate was

clamped in place on the electrophoresis apparatus and mineral oil was used to fill any remaining gaps. The apparatus and its cooling system were turned on, set to 300V, and allowed to run overnight in an 18 hour gradient cycle reaching a max of 3000V.

As the serum is separated in the  $1<sup>st</sup>$  dimension, the gel tank and necessary buffers were prepared for running the gel in the  $2<sup>nd</sup>$  dimension the next day. Mike Wyder previously mixed stock buffer solutions in 10X concentrated form and kept them in a cold room. The lower tank buffer was prepared by pouring 8 L of Millipore water into the lower tank and mixed with stock buffer, which was diluted by mixing 1 L of 10X concentrate with 1 L of Millipore water in a 2 L graduated cylinder. The diluted solution was left in the tank overnight with the cooling fan turned on and the tank covered overnight. The Upper buffer was prepared by diluting 300 mL of 10X Upper buffer solution to 3 L in a 4 L Erlenmeyer flask with Millipore water. The diluted solution was transferred to a 3 L plastic beaker and placed on a stir plate with stir bar and covered for the evening.

# **3. Separation in 2nd Dimension**

The next day, the samples and apparatus were ready for separating the serum proteins in the  $2<sup>nd</sup>$  dimension. First, two 50 mL conical tubes of equilibration buffer were taken from the cold room and allowed to thaw. To one tube was added 800 mg of DTT and to the other tube was added 1 g of Iodoacetamide (IAA). The IAA tube was wrapped in aluminum foil since IAA is light sensitive. Both conical tubes were placed on a rocker plate to warm and dissolve the newly added chemicals. Once thoroughly mixed, the equilibration buffer/DTT and equilibration buffer/IAA solutions were filtered in their own disposable 0.22 micron vacuum filter beakers (covering the IAA beaker in aluminum foil again) to remove any particulates. In the mean time, the IPG strips were removed from the electrode tray using tweezers and kimwipes to blot off excess mineral oil. The strips were placed into a reswelling tray, covered with the DTT buffer, wrapped in aluminum, and placed on a BellyDancer for 15 minutes. After the 15 minutes, the DTT buffer was vacuumed up and the process repeated three more times, once more with DTT and twice with the IAA solution giving a total of four washes in equilibration buffers. Next, the gel apparatus was prepared by placing spacers into the slots in the upper tank and double paned, pre-cast gels purchased from Nextgen Sciences Inc (cat # PRS-703696) were placed into the tanks as well. Then, the Upper buffer was poured into the upper tank until the tops of the gels were barely covered, the IPG strips placed into the gel wells using tweezers, and the remaining buffer poured into the tank. The apparatus was enclosed and the gel run at 500 mA for 5 hours, 51 minutes. Once the proteins had separated, the gels were removed from the apparatus, cut from the glass

plates, placed in Fix 1 solution (50% EtOH, 10% Acetic Acid, 1L total) for 30 min, and then left in Fix 2 (30% EtOH, 1 L total) overnight.

#### **4. Gel Scanning and Silver Staining**

The next day the gels were removed from Fix 2 and washed with Millipore water for 5 min in preparation for scanning. Each gel was placed on the glass plate from the scanner, a FUJI FLA-5100, and the gel fluorescently scanned: Cy 2 scanned at 437 nm with bpb1 filter with aperture, Cy 3 is scanned at 532 nm and modified Cy3/Cy5 filter from FUJI with aperture, and Cy 5 scanned at 635 nm with LPR filter with aperture. All scans were saved as 16 bit images at 100  $\mu$ m resolution with photomultiplier voltages at 400V.

After fluorescent scanning, the gels were silver-stained using a kit from Genomic Solutions. First, the gels were placed into Fix 1 which consisted of 1.6 L of Ethanol and 400 ml of Acetic Acid mixed and diluted to 4 L with Millipore water for 1 hour. Next, the gels were placed into Fix 2 which consisted of the dry chemicals in the Proprietary Fix 2 bottle and 1200 ml of Ethanol mixed and diluted to 4 L with Millipore water for 1 hour. The Glutaraldehyde included in the kit was omitted from the solution since the glutaraldehyde would interfere with mass spectroscopy identification. Then, the gels were washed a total of four times in Millipore water, each wash was 15 minutes in length. While washing in water, the Silver Nitrate Solution was prepared by mixing the liquid in the Silver bottle with 1 ml of Formaldehyde and diluting to 4 L with Millipore water. After washing in water, the gels were placed in the Silver Nitrate Solution for 45 minutes followed by a 1 minute wash in Millipore water. After washing, the gels were placed in

Developer solution for 5 to 8 minutes. Developer solution was prepared by mixing the bottle of dry chemical with 0.6 ml of Formaldehyde and diluting to 4 L with Millipore water. Lastly, Stop solution was mixed using the bottle of dry chemicals and 80 ml of Acetic Acid all diluted to 4 L with Millipore water. The gels were left in the final Stop solution for 10 minutes. After silver staining the gels, each was digitally scanned and the images saved to the network drives for later analysis.

 Once the gels were fluorescently scanned, the images were imported into the ProGenesis PG240 SameSpots software package. This software allows the user to match the Cy 2 labeled internal standards from each gel relative to a single reference gel. The software then measures the difference in fluorescent intensity between the Cy 3 labeled control spots and the Cy 5 labeled disease state spots. After the protein spots were aligned, the SameSpots software identified approximately 3,700 individual spots. However, many of the spots were artifacts or background staining so each spot was individually reviewed for intensity, shape, location, and area to mask false spots so the software would only compare true proteins. The lists of true spots are shown in gel images 1 and 2 listed below. The software used various statistical devices such as Principal Component Analysis (PCA) to determine which spots had the greatest difference in fluorescent intensity which was directly related to volume of protein in a spot. The final proteins identified for comparison are shown in the results section.

#### **5. Mass Spectroscpy Identification: In Gel Digestion Protocol**

The first step to identifying the proteins was to excise the spots from the gel. To do this each gel was placed on a light box and a print out of the silver stain images with the protein spots of interest labeled was tacked to corkboard on the wall. By carefully comparing the labeled print outs with the gels each spot was cut out using a razor blade and placed in an eppendorf tube then stored in the refrigerator. Next, the proteins were digested into peptide fragments using the enzyme trypsin and a protocol from the researchers at GRI.

 The first step in the digestion process was to make the necessary stock solutions where the final volumes depended on how many samples were to be digested . 30 mM Potassium Ferricyanide (PFC) solution was made by combining PFC powder from Sigma with Millipore water in a 49.4 mg/5ml ratio in a 15 ml conical tube. 100 mM Sodium Thiosulfate (STS) combined powdered STS from Sigma with Millipore water in a 79.1mg/5 ml ratio in a 15 ml conical tube. 1M Ammonium Bicarbonate (ABC) combined powdered ABC from Sigma with Millipore water in a 0.79 gm/10 ml ratio in a 15 ml conical tube. From the stock 1M ABC solution came the 75 mM, 50 mM, and 25 mM ABC working solutions. The working solutions used 750  $\mu$ l, 500  $\mu$ l, and 250 $\mu$ L in separate conical tubes and diluted to 10 ml using Millipore water. The final two solutions, DTT and Iodoacetamide (IAA), were made right before use with the IAA kept wrapped in aluminum foil. 10 mM DTT was made by combining powdered DTT from Sigma with 25 mM ABC in a ratio of 1.5 mg/1 ml in a 1.5 ml eppendorf tube. 55 mM Iodoacetamide was made by mixing powdered IAA from Sigma with 25 mM ABC in a ratio of 10 mg/1 ml in a 1.5 ml eppendorf tube.

 Day One of the In Gel Digestion protocol began with destaining the gel pieces. First, Farmers reagent was made by combining 30 mM Potassium Ferricyanide and 100 mM Sodium Thiosulfate in a 1:1 ratio in a 15 ml conical tube. Next, 50 µL of Farmers reagent was added to each gel piece in its eppendorf tube an allowed to incubate approximately  $3 - 5$  minutes until the silver stain was removed but before the gel pieces became a darker yellow than the Farmers reagent. After incubating, the Farmers supernatant was removed and 60  $\mu$ L of Millipore water was added and incubated for 10 minutes then the supernatant removed.

Next, the gel pieces were washed and dehydrated to shrink the polyacrylamide gel material so during the next stage, reduction/alkylation, the DTT and IAA would be evenly exposed to all of the proteins. Washing started by adding 50 µL of 25 mM ABC for 10 minutes in a vortex block then removing the supernatant. Then, 50  $\mu$ L of a working solution of 50 mM ABC and 100% Acetonitrile (ACN) mixed 1:1 was added, incubated for 10 minutes in a vortex block, and then the supernatant removed. The previous step with 50 µL of 50mM ABC:ACN was repeated once more. Extra washes were occasionally necessary to get the gels from large, translucent pieces to small, opaque white pieces which indicated all excess water had been removed. To ensure all water had been removed, the gel pieces were dried in a speed vacuum for approximately 10 minutes.

 Once the gel pieces were dehydrated, the proteins inside were reduced and alkylated to unfold the proteins so the trypsin could evenly digest all of the protein. Reduction of the disulfide bonds in the proteins was done by adding 20  $\mu$ L of 10 mM DTT in 25 mM ABC and incubated for 60 minutes at  $37^{\circ}$ C in a heating block containing

water. Afterwards, the sample was alklyated by adding 20  $\mu$ L of 55 mM IAA in 25 mM ABC directly into the eppendorf tube without removing the DTT solution. The IAA was left to incubate for 45 minutes  $37^{\circ}$ C in the dark in a heating block containing water as well.

 The next stage was another washing/dehydration of the gel pieces so the trypsin would be able to digest as much of the protein at once in an even manner. First, 50 µL of 25 mM ABC was added to the tubes, incubated for 10 minutes in a vortex block, and then the supernatant was removed. Next, 50  $\mu$ L of the 50 mM ABC:ACN (1:1) solution was added, incubated for 10 minutes in a vortex block, and then supernatant was removed. The previous step was repeated once more, occasionally twice more until all the gel pieces were small and opaque white in color. Lastly, the gel pieces were dried in a speed vacuum for approximately 10 minutes.

 Once dried and shrunk, the proteins in the gel were digested with the Trypsin enzyme. First, one vial of lyophilized Trypsin was dissolved with 200 µL of 50 mM acetic acid and mixed well. The stock solution was divided into 12.5 µL aliquots and stored in 0.5 ml eppendorf tubes and stored in the -20 $^{\circ}$ C freezer. One of the 12.5 µL aliquots was thawed and diluted with 112.5  $\mu$ L of 75 mM ABC. Then, 5  $\mu$ L of the diluted Trypsin (10 ng/ $\mu$ L in 75 mM ABC pH is  $\sim$  7.6) was added to the gel pieces and incubated at  $37^{\circ}$ C for 20 min in a water bath. After incubating, 45 µL of 25 mM ABC was added to the tube and then incubated at  $37^{\circ}$ C overnight in a water bath.

Day 2 of the process was the recovery of the peptide fragments, using  $\mu$ Zip Tips to place the peptides on a MALDI plate, followed by MALDI-TOF/TOF sequencing, and finally MASCOT database identification. Recovery of the peptides began with

prewashing 1.5 ml eppendorf tubes with 200  $\mu$ L of 0.1% Tetrafluoroacetate (TFA) in 60% Acetonitrile (ACN) then removing the supernatant. Next, the digested peptides from Day 1 were removed from the water bath and centrifuged. The supernatant from the gels was removed and placed into the newly washed eppendorf tubes. To the dried gel pieces was added 30 µL of 0.1% TFA in 60% ACN and then the supernatant removed and placed into the new eppendorf tube. The previous step was repeated 3 more times but with 10 minute incubation in a vortex block before recovering the supernatant and placing it in the new eppendorf tube. The final step was to dry the extracted peptides in the new tubes to a final volume of  $10 - 15 \mu L$  in the speed vacuum being careful to not completely dry the sample. If the samples did dry out completely then the peptides could still be recovered if 0.1% TFA in 60% ACN is added and the samples speed vacuumed down to  $10 - 15$   $\mu$ L again. Once the peptides were concentrated, the samples were prepared for plating on the MALDI plate using the  $\mu$ Zip Tips.

The  $\mu$ Zip Tips are 10  $\mu$ L pipette tips that use resin beads to provide a scaffolding substrate for protein peptides to bind as the digested mixture passes over the beads. The resin beads are conglomerates of organic chains 18 Carbon atoms in length providing consistent pore sizes to capture the peptides. The proteins are bound to the tips then eluted into a matrix that contains the peptides until analysis by MALDI mass spectrometry. The process began by setting up two glass vials, one with 100% Acetonitrile (ACN) and the other vial with 60% ACN mixed with 0.3% TFA, and setting up a 1.5 ml eppendorf tube with 0.3% TFA in Millipore water. Additionally, a new eppendorf tube was set up for each sample containing an aliquot of 2.5  $\mu$ L of 60% ACN  $0.3\%$  TFA. A fixed 10 µl pipette was used since the tips must remain wet once the

process is initiated since air will dry the beads and prevent peptide capture or, if peptides are already captured, prevent their elution into the matrix. The protocol began with pipetting 100% ACN to prepare the zip tip, disposing of the ACN into a waste jar, and repeating with 60% ACN; 0.3% TFA. Next, the zip tip was equilibrated with two washes of  $10 \mu L$  of  $0.3\%$  TFA. Then, the concentrated peptides extracted earlier were bound to the column by pipetting the sample up and down 10 times through the equilibrated zip tip. An aliquot was placed at the top of the tube and the rest of the sample pipetted through the column to ensure all the peptides came into contact with the zip tip. The captured peptides were washed twice with  $10 \mu L$  of 0.3% TFA to remove salts and contaminants. Next, the peptides were eluted by pipetting the aliquot of 60% ACN 0.3% TFA into the new tube. The zip tipped samples were placed into the speed vac until the pressure dropped to 750 mtorr as read by the digital gauge which left a final volume of approximately  $0.5 \mu L$  in the tube. Next, the matrix solution was made; this solution had to be made fresh 2 - 3 days to ensure accuracy on the MALDI. The matrix solution was made by dissolving  $\alpha$ -cyano-4-hydroxy-cinnamic acid in 60% ACN/0.1% TFA plus 10 mM Ammonium Phosphate monobasic to a final concentration of 5 mg/ml. Next,  $1 \mu L$ of matrix was mixed with the  $0.5 \mu L$  in the tube by pipetting up and down then spotting on the MALDI plate. The last step was to make up a MALDI standard by combining 1  $\mu$ L of pre-mixed standard from the freezer with 99  $\mu$ L of matrix. The mixed standard was spotted on the plate before and after the samples so the MALDI could be monitored to ensure the settings remained optimized throughout the run. Once the peptides were spotted onto the MALDI plate, the Applied Biosciences 4800 MALDI-TOF/TOF was optimized and then run. This second generation of the 4800 model allows the user to

control the speed of the ion before entering the collision cell where fragmentation occurs. By tuning the speed of impact, the user can determine how much fragmentation occurs allowing analysis of a wide range of daughter ions compared to the parent ion.

Once the peptides were sequenced based on mass/charge ratio and intensity, the data was input into the MASCOT database where the software matched the identified peptides with known sequences and identified the closest match. The general criteria for a confirmed identification are a minimum overall ion score of 100 and minimum individual peptide ion score of 50. Some peptide sequences matched more than one protein so all possible proteins were listed. The final list of all the spots and their identifications are listed below in Figures 25 - 30 in the results section.

# **C. Results**

**Figure 26:** BCA assays quantifying and comparing 1G FT/E/W fractions for all samples used in the pilot study. The assays should show greater values for the E fraction indicating removal of overabundant proteins. The values are used later for 2D DIGE gels. **A)** Set 1 **B)** Set 2 **C)** Set 3



After the BCA assays, 1D gels (Figure 27, A-D) were run to see which proteins were evident in the samples and to see if the overabundant proteins were being removed from the FT fractions as expected. The gels were performed according to protocols provided with the invitrogen kit. Images A and B compared the FT and E fractions of each sample, 1 ul of sample was used based on the high concentrations. The gels showed little difference between the samples, most likely because samples were not properly pipetted into each well causing samples to flow across neighboring lanes. There were some distinctions in band intensity between some FT and E fractions but overall every sample appears the same. Because of the likely contamination, Images C and D were run with fewer samples and every other lane was intentionally skipped. Unfortunately, there appeared to still be some lane contamination in Images C and D however, overall there was enough difference between the FT and E samples to conclude that overabundant proteins are being removed enough to proceed with the pilot study.

**Figure 27**: 1D SDS-PAGE of 1<sup>st</sup> Generation (1G) IgY enriched samples comparing FT and E fractions of pilot study samples. A&B) All pilot study samples, gels inconclusive due to evident lane contamination. C&D) Randomly selected pilot study samples showing some lane contamination but overall enough difference between FT & E fractions to proceed with pilot study.



Once the samples were all concentrated and characterized, the condensed FT fractions were again diluted to  $\sim$ 500 ul with IgY dilution buffer plus protease inhibitor and run through the IgY column to give the  $2<sup>nd</sup>$  Generation Flow Through and Elution fractions (2G FT and 2G E). The samples were immunodepleted, collected, and concentrated using the same steps and equipment listed previously.

Another BCA protein assay was used to quantify the final concentrations of the condensed FT and E fractions and compare the values to evaluate the performance of the IgY column. The BCA assay was performed the same as previous but 15 µl of sample were used to give a 5µl/well concentration.



**Figure 28:** BCA assay quantifying and comparing 2G FT/E fractions

Based on the BCA assay values, the IgY column was working as expected and improving depletion with each subsequent FT generation. Once the BCA assay was done, 1D gels were performed on select samples to gauge the efficiency of the IgY column. The gels were performed as previously outlined with the only difference being the use of 5 µl of sample to compensate for the lower protein concentrations. Figure 29 show that most of the overabundant proteins have been removed from the FT fractions and the 2D DIGE gels should work appropriately.

Figure 29: 1D SDS-PAGE of 2<sup>nd</sup> Generation (2G) IgY enriched samples comparing FT and E fractions of pilot study samples. Images A&B demonstrated clear distinction between bands of over abundant proteins in FT and E fractions proving the IgY column further enriched samples with additional passes through the column.







**Figure 30:** BCA protein assay comparing FT and E fractions from 1G and 2G of high dose samples (500 mg/kg) of d-serine, puromycin, and BEA after IgY enrichment, prior to YM-3 concentration.

After immunodepleting and characterizing the pilot study samples, it was determined that the protein concentrations for the D-Serine 500 mg/kg and BEA control samples were too low for use in this study. In order to continue the study, the D-Serine control and BEA disease state samples were mixed. The mixing of samples was deemed acceptable for this pilot study since all control subjects were fed the same mixture of corn oil. The NI assay is shown below:



**Figure 30:** NI assay of 2G pooled samples of pilot study

The images used are the scans of the gels after silver staining. After comparing the gels for differences in protein volume, the top protein spots that showed an increase in volume from control to disease state, called up-regulated, and the top proteins that showed a decrease in volume from control to disease state, called down-regulated, were identified for peptide sequencing by MALDI-TOF/TOF mass spectrometry and identification using the MASCOT database. The D-Serine/BEA gel (243/246 vs 285/289) contained 24 spots of interest, 18 up-regulated and 6 down-regulated. The Puromycin gel (303/305 vs 320/324) contained 18 spots of interest, 13 up-regulated and 5 down-regulated.

**Figure 32**: Pilot study 2D DIGE gels showing up- and down-regulated spots identified as potential biomarkers using SameSpots software. A) Gel 1 – samples 243/246 vs 285/289; 24 spots: 18 up-regulated and 6 down-regulated. B) Figure 33: Gel 2 303/305 vs 320/324; 18 spots: 13 up-regulated and 5 down-regulated



**Figure 33**: PowerPoint Summary of up-regulated proteins identified in IgY pilot study of d-serine control (243/246) vs BEA 500 mg/kg (285/289) – spots  $1 - 12$  listed



**Figure 34:** PowerPoint Summary of up-regulated proteins identified in IgY pilot study of d-serine control (243/246) vs BEA 500 mg/kg (285/289) spots 13 - 23 listed



**Figure 35:** PowerPoint Summary of proteins identified in IgY pilot study of puromycin control (303/305) vs Puromycin 300 mg/kg (320/324) spots 1- 9 listed



**Figure 36**: PowerPoint Summary of proteins identified in IgY pilot study of puromycin control (303/305) vs Puromycin 300 mg/kg (320/324) spots 10 - 18 of 18 listed



#### **D. Discussion**

 The greatest success of the pilot study was in learning, practicing, and optimizing the protocols necessary for the full study. However, the ultimate goal of identifying potential protein biomarkers did not produce as much promising data as anticipated. Most of the proteins identified were generic glycoproteins, which act as carrier proteins, or typical abundant proteins such as albumin, transferrin, and fibrinogen. The sequenced proteins demonstrated how difficult serum separation can be and the pervasiveness of abundant carrier proteins throughout the bloodstream. The difficulty in removing these proteins underscored the need to be diligent during the initial serum enrichment with the IgY column. One lesson gleaned was the need to enrich several aliquots of each sample twice. This redundancy was necessary to ensure each aliquot was filtered as thoroughly as possible yet contained a protein concentration high enough to stay above the DIGE gel lower limits of detection. The low sensitivity of the DIGE gels is an inherent weakness of the technique which limits the ability to find low abundant proteins. Because of the low sensitivity, the SameSpots software used to analyze the gels is only as accurate as the spot resolution in the gel and, the user refining the true spots versus the background. This limit makes it crucial to have an experienced user defining and outlining the spots for the software to analyze. After analyzing the pilot study results, the full study was initiated using the lessons learned.

#### **VIII. FULL STUDY**

## **A. Methods**

#### **1. Preparation of Samples**

The samples were prepared for pooling by first organizing the individual serum samples into their respective drug and dose groups. The Puromycin and BEA drug studies had 4 dose groups (a control, low, medium, and high dose) with each group containing 5 rat subjects at the beginning of the studies. Serum samples were collected from each rat subject at three time points: pre-dose, 24 hours post dose, and 96 hours post dose (terminal sacrifice) to give a total of 15 individual samples for the Puromycin and BEA studies. The 15 individual samples were condensed to create three pooled samples by combining the serum from all five rats according to time points.

The charts below breakdown the number of subjects in each dose group and the time points collected from each subject. For Puromycin and BEA, the charts below have an "x" in a box to indicate that a serum sample was collected from the rat subject for that time point at that dose. If a rat died before the specific time point, such as with BEA - 500 mg/kg where all subjects died before 24 hours, then the serum collected was labeled as "Terminal Sacrifice". Additionally, some bacterial contamination occurred during the animal study so some subjects were discarded entirely from the study. Because of the variation in number of subjects and time points among doses, the samples were pooled together using equal volumes from each subject so that a total volume of 75 µL was collected. This pooling was then split into 5 aliquots, each  $15 \mu L$  in volume. The aliquots were then placed in the  $-20^{\circ}$  Celsius freezer for storage until they could be enriched with the ProteomeLab IgY spin column.

For D-Serine, a second study was conducted with only three dose groups: a control-- 0 mg/kg, low dose--200 mg/kg, and high dose--500 mg/kg with two time points, 12 hours post dose and 24 hours post dose. The other difference between the D-Serine study and the Puromycin and BEA studies was the lack of internal control for each rat. The Puromycin and BEA studies collected three serum samples from each rat at a given time point. The D-Serine study sacrificed the rat subject at the necessary time point to collect the serum sample. This method ensured enough volumes of serum were collected with the tradeoff being a lack of positive control from the subject itself. The D-Serine study had no contamination issues or early deaths so all pooled samples contained five rats, from which 15 µL were combined and mixed to give a total volume of 75 µL. After mixing, the pooled sample was split into 5 aliquots of 15  $\mu$ L and placed in the -20 $^{\circ}$ Celsius freezer for storage.
#### **2. Serum Immnunodepletion using IgY spin column**

 The samples (seen in Amendment 3, pg 147) for the full study were enriched using the IgY R-7 spin column and ProteomeLab protocol as described previously in the pilot study section with a few tweaks to optimize immunodepletion. One change was the addition of 0.1 mL of Protease Inhibitor cocktail to 9.9 mL of IgY Dilution buffer working solution to protect against protein degradation while working with samples at room temperature. The Dilution buffer plus protease inhibitor was used only for the FT fractions. The Wash fractions used regular Dilution buffer that was diluted from 10X to 1X per protocol.

The other significant difference between the immunodepletion protocol for the pilot study versus the full study was the increased number of aliquots enriched. The individual full study samples were collected to give pooled samples containing 75 µL which was then split into 5 aliquots,  $15 \mu L$  each. The full study enriched four aliquots from each pooling creating a  $1<sup>st</sup>$  Generation FT sample for each aliquot with a spare aliquot in case a mistake was made during the process. After enrichment, the FT and E fractions were concentrated to approximately 500 µL using the Amicon YM-3 spin cartridges. If a sample was concentrated to less than  $500 \mu L$ , samples were diluted to the final volume of 500  $\mu$ L and stored in a -20 $^{\circ}$  Celsius freezer. Once all the 1G FT and E fractions were collected from each aliquot, NI protein assays and 1D gels were run to monitor the column efficiency. After the assays, the 1G FT samples from each aliquot were individually enriched a second time using the same protocol as before. The  $2<sup>nd</sup>$ Generation FT and E fractions were then collected and concentrated using Amicon YM-3 spin cartridges. ProteomeLab lists the effective life of the IgY spin columns as 100 runs

but column degradation was noticeable when centrifugation required higher speeds, 6000  $-7000$  x g, and longer spin times,  $1 - 2$  minutes. Once the paper filter in the plastic column was irrevocably degraded, the protocol described the transfer of the resin beads to a spare plastic column housing by mixing the beads in 500 µL of dilution buffer and pipetting the slurry into a spare column. The IgY kit came with two columns and six spare plastic housings. Once all the spare column housings were used, the column was retired from use. In all, 7 columns were required to enrich all the aliquots of the pooled samples twice.

After all the 1G aliquots were concentrated, the buffer was exchanged in the Microcon tubes by adding 4 mL of 2M urea, centrifuged for 70 min at 4000 rpm at  $4^{\circ}$ Celsius using a Thermo Centra CLR with a Thermo 243 rotor. A total of 3 buffer exchanges were performed with samples concentrated to a final volume between 200 - 400 ul. NI protein assays and small, 2D PAGE gels were run on the 2G samples to confirm the final enrichment and to measure the concentrations for the large DIGE gels. All NI protein assays and gels are shown below in the results.

# **A. Results**

## **1. Protein Assays**

**Figure 37:** Non-Interferring Protein Assays of Full Study Samples used to monitor column effectiveness and values for use in 2D DIGE gels.

**A)** Samples: Puromycin Control samples Pre dose/24 hour post dose/Terminal Sac BEA Control samples Pre dose/24 hour post dose/TerminalSac D- Serine 0 mg/kg 12 and 24 hours **B)** Samples: Puromycin 75 mg/kg Pre dose/24 hour post dose/Terminal Sac BEA 15  $\&$  500 mg/kg Pre dose/TS (15 mg/kg) and TS (500 mg/kg) D- Serine 200 mg/kg 12 and 24 hours **C)** Samples: Puromycin 150 mg/kg Pre dose/24 hour post dose/Terminal Sac BEA 50 mg/kg Pre dose/TS (15 mg/kg) and TS (500 mg/kg) D- Serine 500 mg/kg 12 and 24 hours **D)** Samples: Puromycin 300 mg/kg Pre dose/24 hour post dose/Terminal Sac









The protein assays show that the immunodepletion by the IgY columns was successful in two ways. First, the high protein concentration values across all samples. All samples had at least 1  $\mu$ g/ $\mu$ l of protein with many in the 2 – 4  $\mu$ g/ $\mu$ l range which indicated there would be enough protein for the DIGE gels after further enrichment. The second positive characteristic was the higher concentration value for the Elution fractions. The higher value for the Elution fractions indicated that the IgY column removed most of the high abundant proteins meaning greater resolution on the 2D gels. After the protein concentrations were measured, the samples were run on small 1D SDS-PAGE gels in order to visualize the amount of abundant proteins that were removed.

## **2. 1st Generation Samples 1D SDS-PAGE gels:**

All 1D gels were silver stained with Sigma's Proteosilver silver stain kit which can identify proteins in concentrations as small as  $0.1$  ng/ $\mu$ l. Given this high degree of sensitivity, all samples were diluted 1:10 with Millipore water to reach a final concentration between 100 and 400 ng/µl and a final volume of 10 ul. 10 ul of SeeBlue Plus 2 marker was placed in wells 1 and 12 of each gel and 10 ul of each sample was placed in FT & E pairs. Gels were run according to Invitrogen protocols using MOPS buffer at 120 V for approximately 1 hour 20 minutes. Gels were immediately stained according to Sigma's ProteoSilver Silver Stain kit protocol. Afterwards, the gels were scanned using LabScan v 5.0 software on an Amersham Image Scanner. All 1D gels were purchased from Invitrogen using the 4-12% gradient gels 1mm x 12 well, Catalog # NP0322BOX, Lot #'s 6071173 & 7120610. Invitrogen SeeBlue Plus 2 Prestained Standard was used as the marker for each gel. The results can be seen below in Figure 38.

**Figure 38**: 1D SDS-PAGE gels of 1<sup>st</sup> Generation (1G) FT  $\&$  E fractions after IgY column enrichment. Gels were used to monitor over abundant protein removal from pooled samples for use in full study. Images are as follows: **A)** Puromycin Controls; **B)** Puromycin 75 mg/kg dose; **C)** Puromycin 150 mg/kg; **D)** Puromycin 300 mg/kg; **E)** BEA Controls; **F)** BEA 15 mg/kg & 500 mg/kg; **G)** BEA 50 mg/kg; **H)** BEA 150 mg/kg; **I)** D-Serine 12 hr post dose; **J)** D-Serine 24 hr post dose



**B 188 See Blue Std Puromycin Approximate 75 mg/kg Molecular Weight (kDa) 98 62 49 38 28 17 14 6 3 Pre-Dose FT & E Puromycin 75 mg/kg 24 hr post FT & E Puromycin 75 mg/kg Term Sac. FT & E**













As a reference, listed below are the 7 proteins targeted for removal by the IgY column and their respective molecular weights. Immediately visible in the E fraction wells is the large albumin band at 68 kDa which shows up much darker in the E fraction compared to the FT fraction.



# **3. 2nd Generation FT fraction NI Protein Assay and small 2D gels**

**Figure 39:** NI Protein Assays measuring the final protein concentrations of the condensed, buffer exchanged 2G FT fractions of the Full Study samples. Results show IgY column still removing over abundant proteins and the values then used to calculate sample volumes needed for 2D DIGE gels.





 The protein concentration measurements of the final, condensed samples were used for calculating the volume needed to run the DIGE gels. The assay indicated potential problems with the Puromycin 24 hour 150 mg/kg and 300 mg/k samples because of low concentration values. However, a quick calculation showed that the volumes of samples needed for those two specific DIGE gel would not exceed the total 350 µL limit. Based on those calculations and time constraints, it was deemed necessary to continue with the study. After the NI assays, two FT fraction samples were run on a small, 2D gel as a final quality control measure to ensure that most overabundant proteins were removed from the serum samples. The samples tested were:

Gel 1: D-Serine 0 mg/kg 24 hr post dose Gel 2: Puromycin 300 mg/kg Terminal Sacrifice

In order to run the 2D gels, the two samples were prepared for separation in the first dimension based on isoelectric point. First, 200 ml of Rehydration Buffer was generated using GRI protocols. To the buffer was added 23.14 mg of DTT followed by vortexing and centrifuging the solution to dissolve all particulates. Next the rehydration buffer was sonicated for 1 minute, then placed on an end to end rotator for 15 minutes. This series was repeated three times for a total of four sonication/mixing cycles. Next, samples were pippetted into IPG trays and IPG strips, Immobiline Dry Strip  $pH$  4 – 7, 7 cm (GE, 17-6001-10, lot # 10 009958) , were placed into the tray wells and the ends were covered. The samples were allowed to reswell overnight. After all the protein samples had been fully absorbed by the IPG strip, the samples were run in the first dimension by placing the gel tray in a 1D gel box (zoom IPG) a new mod panel was added and filled with ultra-pure water. The cover was put into place and a gradient voltage was applied in the following cycle:  $0 -175$  V for 15 minutes,  $175 - 2000$  V for 45 minutes, and at 2000 V for 1 hour 45 minutes.

After the samples were separated in the first dimension, the IPG strips were removed and placed in the well of a small 2D gel cassette from Invitrogen. 10 ul of SeeBlue Plus 2 prestained standard was added to a separate well and the two gels were run at 110V for 1 hour 20 minutes. After separation in the second dimension, the gels were silver stained using the Proteolab SilverStain kit using the protocol included in the kit. After staining, the gels were placed on an Amersham scanner and scanned into the computer using LabScan software. The gels can be seen in Figure 40.

**Figure 40:** Small, 2D SDS-PAGE gels of 2<sup>nd</sup> Generation FT samples. The gels were a final quality control measure to ensure that over abundant proteins were removed and that adequate resolution of low abundant proteins would permit spot analysis. The images are listed as (A) D-Serine 0 mg/kg 24 hr small 2D gel; (B) Puromycin 300 mg/kg Term Sac small 2D gel





These small gels demonstrated a significant increase in protein resolution and over-abundant protein removal compared to the original gel tests of the Agilent MARS column. Based on the clarity of the results it was determined that the resolution was high enough to warrant continuation with the project and preparation for the large DIGE gels.

## **C. 2D DIGE Methods and Results**

Once the small 2D gels confirmed the removal of abundant proteins from the samples, the large, 2D DIGE gels were begun. All work, such as sample labeling with the fluorescent CyDyes, the separation in the first dimension, separation in the second dimension, fluorescent scanning, silver staining, and finally regular scanning of the silver stained gels, was done according to GRI protocols as described in earlier sections. The sample list set up for the gels is listed below in Figure 41.

**Figure 41:** Listing of the pairwise comparisons in each individual gel. P – Pre dose time point, 24 – 24 hours post dose time point, TS – Terminal Sacrifice time point.

control 24 vs 75 (24)
control TS vs 75 (TS)
control P vs 150 (P)
contol 24 vs 150 (24)
control TS vs 150 (TS)
Control P vs 300 (P)
Control 24 vs 300 (24)
Control TS vs 300 (TS)
Control TS vs 15 (TS
Control 24 vs 50 (24)
Control TS vs 50 (TS)
Control P vs 150 (P)
Control 24 vs 150 (24)
Control TS vs 150 (TS)
Control TS vs 500 (TS)
Control 12 vs 200 (12)
Control 24 vs 200 (24)
Control 12 vs 500 (12)
Control 24 vs 500 (24)

**Figure 42:** PowerPoint results of the final reference gel showing the location of the protein spots targeted as potential biomarkers and their subsequent identifications using MALDI-TOF/TOF mass spectrometry and MASCOT database searching. Image (A) 20 protein spots and their identification (B) 28 protein spots and their identification





#### **D. Protein Spot Selection Method and Results**

 The PG240 program was used to manipulate all data once imported into the program. First, the BEA 150 mg/kg Pre-Dose gel was designated the main reference gel. Next, the proteins spots from each gel were sorted by increased spot intensity based on a comparison of the Cy 5 labeled post-dose sample versus the Cy 3 labeled Pre-dose control (See figure XX). Thus, all gels act as single-point statistics with the spot intensity values based on a relative scale between the Cy 5 vs. Cy 3 dyes for each individual gel only. This lack of statistics could not be avoided since the samples had to be pooled due to time and money constraints. Once the spots were organized based on intensities, a cutoff value of 1.5 fold increase was set and all spots with relative increases of 1.5-fold or greater were cut and pasted into Excel spreadsheets. The number of protein spots varied from each gel. Some gels identified 25 spots, some gels listed over 300 spots. In order to quickly cull through all the spots and identify one spot listed in all gels, all the protein spots were grouped based on dose- and time-points and relative intensities for each drug. Then, a histogram was made to see which spots showed an increase in all three gels for each dose or time point (see Figure 44). Once spots were picked to represent a series of time points or doses from the histogram, those spots were combined into a larger pool to identify spots across all time points and doses. The ultimate goal was to identify as many protein spots as possible that showed an increase in all 22 gels. The spots that showed up in the most gels and had the greatest average differences in intensities were picked for MS identification.

**Figure 43:** Sample charts of protein spots and their relative increases vs control samples for three gels. Charts demonstrate the typical data set used for analysis when searching for dose- and time-dependent toxicity trends from the full study. Data imported from the PG240 SameSpots software.

Ref.	Cy <sub>3</sub>	Cy <sub>5</sub>
Spot #	Control Rat, Terminal Sac, 75 mg/kg	Dosed Rat, Terminal Sac, 75 mg/kg
Ref.		
Spot #	Reference Volume of Protein Spot	Relative Volume X-fold increase
2		2.084
12		2.231
20	л	3.14
40	и	2.983
44		2.029
45	٠	2.468
51		4.343
56	и	2.01
72		2.165





**Figure 44:** Histogram of protein spots in the three doses of the Puromycin, Terminal Sacrifice time point gels. The histogram showed which protein spots were up-regulated in multiple gels. The spots identified represented the Terminal Sac time point in the dose-dependent search. The spots listed in all three gels were combined with other histogram results to make the final spot selection.



**Figure 45:** Sample chart demonstrating the relative volumes between the diseased serum samples vs the control samples for protein spot tentatively identified as hornerin. Ideally, the relative volume changes would follow a pattern and indicate dose- and timedependent toxicity however the values did not support this hypothesis.



**Figure 46:** Graphs of the relative change in protein volume between the control sample vs the disease sample for each gel as time- and dose- increase. The graphs should show a general trend of increasing protein volume indicating greater amounts of the biomarker protein being produced as kidney functions decrease, either over time or from greater exposure to a nephrotoxin. Graphs: **A)** Puromycin dose-dependent hornerin expression **B)** Puromycin time-dependent hornerin expression **C)** BEA dose-dependent hornerin expression **D)** BEA time-dependent hornerin expression **E)** BEA hornerin expression differential **F)** D-Serine dose-dependent hornerin expression **G)** D-Serine time-dependent hornerin expression















## **E. Discussion**

The final results of the DIGE study did not identify a conclusive biomarker of low level kidney degradation. Of the 48 protein spots tagged by the SameSpots software, 13 spots had protein concentrations lower than the detection limit of the MALDI thus, no identification could be made. Additionally, three spots were contaminated with keratin so no identification was possible. Of the remaining spots, seven were Apolipoproteins which are found abundantly throughout serum and four spots were identified as Fetuin Beta which is a glycoprotein that is a member of the cystatin superfamily and also found in abundance throughout the body.

Other common proteins identified were the three Serine Protease Inhibitor spots and one  $\alpha$ -1 Proteinase inhibitor which are proteins designed to deactivate Serine Proteases. Serine Protease is a generic name that applies to enzymes which catalyze the hydrolysis of peptide bonds through a nucleophilic attack by a serine active site. Proteases are divided into four major clans: chymotrypsin-like, the subtilisin-like, the alpha/beta hydrolase, and signal peptidase clans. Since all the proteins in this study were digested with Trypsin, part of the chymotrypsin-like clan of serine proteases, the prevalence of these inhibitors is expected as they would be very common throughout mammals as a part of the regulatory process in the body.

Another set of similar proteins found abundantly throughout serum appeared as the six spots identified as Pregnancy Zone Protein and one spot identified as α-2 macroglobulin. These two proteins are glycoproteins which are strongly homologous to one another in structure and both inhibit proteinases in blood plasma. The inhibitors work by first binding to proteinases through a "bait" region which causes a

conformational change in the inhibitors. The change causes the second region, the thiolester, to emerge and covalently bond with a nucleophile on the proteinase which sterically hinders the proteinase from binding with other proteins thus, decreasing the overall enzymatic activity (Petersen et al.).

After eliminating the multiple spots of one protein, the single spots were reviewed. The first spot identified was Angiotensinogen. Angiotensinogen is a precursor protein that is part of the Renin-Angiotensin System (RAS), a multi-functional circulating system that helps regulate several organs. The scope and complexity of the RAS continues to expand as research delves further into the many layers of the body affected by RAS. The classical view of RAS where Renin is secreted by the liver, circulates throughout the body, reacting with Angiotensinogen to form Ang I, then is converted to the active form of Ang II by ACE, now includes Ang III, Ang IV, Ang 1- 7, multiple ACEs, and even intracellular RAS covering both endocrine, paracrine, and intracrine functions. Because of the ubiquitous nature of the RAS and its multiple physiological regulatory functions, it was eliminated as a potential biomarker of kidney degradation. (Fyhrquist et al.).

The next spot identified was Inter-alpha-inhibitor H4 heavy chain which is a part of the generic Inter-alpha-inhibitor family of plasma proteins. This family contains multiple polypeptide chains and a single, heavy chain designated I alpha IH4P with the rat PRR containing 6 repeats of a Gly-X-Pro motif in a collagen-like pattern. IAIH4P is produced in the liver where its production is triggered by acute, systemic inflammation however, little more is known about the exact physiological role this protein plays. While a 2008 study of human interstitial cystitis patients suggested IAIH4P as a

biomarker of kidney damage (Canter et al.), this study only found this protein to be a tentative identification due to an overall ion score of 97 with only two peptide ion scores of 33 and 64. The low score for such an abundant protein questions the validity of the identification and eliminates the protein as a potential biomarker in this study (Soury et al.).

Another protein spot identified in this study was glutathione peroxidase. glutathione peroxidase is the general name of an enzyme family with peroxidase activity whose main biological role is to protect the organism from oxidative damage. The biochemical function of glutathione peroxidase is to reduce lipid hydroperoxides to their corresponding alcohols and to reduce free hydrogen peroxide to water. Glutathione peroxidase is a selenium-containing tetrameric glycoprotein, that is, a molecule with four selenocysteine amino acid residues. As the integrity of the cellular and subcellular membranes depends heavily on glutathione peroxidase, the antioxidative protective system of glutathione peroxidase itself depends heavily on the presence of selenium. The mechanism is at the selenocystein site, which is in a se(-) form as resting state. This is oxidized by the peroxide to SeOH which is then trapped by a GSH molecule to Se-SG and by another GSH molecule to Se(-) again, releasing a GS-SG by-product (Epp et al., Muller et al.).

The final protein identification that showed promise was the Hornerin protein spot however, the identification for Hornerin was judged as tentative because of the low MALDI ion scores. Hornerin is a protein normally associated with epithelial cells so it is often used by the researchers at the Genome Research Institute (GRI) as a sign of keratin contamination. However, this study has identified it as a potential biomarker and the

result is supported thanks to the work done by a proteomics group run by Dr. Camilla Mauzy and Dr Pavel Shiyanov. Drs. Mauzy and Shiyanov identified Hornerin as a biomarker using LC-MS/MS and ELISA work on rat urine samples from d-serine study number 2 which was also used for this project. Hornerin is a protein found routinely in epithelial cells and is typically listed as approximately 280 to 300 kDa in size. However, Drs. Mauzy and Shiyanov have noticed a smaller protein band, approximately 55 kDa in size, consistently appearing in gel electrophoresis experiments but it has not been referenced in reviews of Hornerin. Despite the promising nature of hornerin based on studies by other groups, this particular project could not identify any dose- or timedependent toxicity for hornerin based on the statistics used in this project.

In general the X-fold increase data from this project is not useful for determining dose- or time-dependent toxicity because the pooled samples negate the ability to do statistics. If one of the rat subjects had an abnormally high expression but four subjects were normal, then the gel could show an increase that would be incorrectly attributed to all samples instead of the one outlier. Despite the lack of significant statistics, the PG240 data showing protein spot intensities was analyzed for trends that could indicate dose- or time-dependent toxicity. Immediately evident in the analysis was the fact that the values for the differences in intensity were higher for the control vs control gels than for later time points. That difference meant that the control samples were not consistent and the normalized volumes could not be trusted. While the dose-dependent graphs for d-serine showed an increase in hornerin as the dose increased and the time-dependent graph showed a decrease in hornerin from 12 hours to 24 hours, no other nephrotoxin graphs showed useful trends for dose- or time-dependent analysis. Since the d-serine data from

study 2 was the only one to show expected trends, one must consider that the older samples from the puromycin and BEA studies were degraded due to handling issues such as time and thaw cycles. Overall, the design of this study only allowed for the narrowing of a broad field to a few viable biomarker candidates. Once the candidates have been identified, other studies could be constructed to identify dose- and time-dependent toxicity for the biomarker.

 In order to determine dose- or time-dependent toxicity, further studies would need to be performed with sound statistical models. Further serum studies would require single animal subjects with control samples taken pre-dose then a single animal subject sacrifice at specific time points in order to collect enough serum. Additionally, gel work would not be recommended since too many variables are possible and the DIGE technique is not sensitive enough to quantitatively track such small concentrations. Instead, a mass spectroscopy study would be recommended such as an iTRAQ experiment or, barring use of mass spectroscopy, possibly an ELISA assay. Both experiments would provide greater sensitivity and direct quantification of known proteins of interest.

In final summation, the proteins identified in this study were all well characterized, abundant proteins known to exist throughout the body for multiple functions. The only protein spot showing any promise as a biomarker of low level kidney degradation was identified as hornerin. However, because of the inherent lack of statistical validation in this project, dose- and time-dependent toxicity trends could not be sufficiently verified. However, because of the promising nature of Hornerin as a potential biomarker due to identification in a urine study and a serum study, further

validation was deemed worthy but time and money restrictions limited the work to using Western blots. Rat serum and urine from the RHPB d-serine study 2 were probed by Western Blot to gain a semi-quantitative measure of the abundance and concentration change among exposed rat subjects. The Western data is shown in the next section.

### **IX. WESTERN BLOT**

## **A. Methods**

The primary antibody used for these western blots were custom designed in-house by Jeanette Frey et al. and manufactured by a commercial company. Western Blots were used to probe the serum samples from d-serine study 2 in order to visualize any change in Hornerin protein amount. The Western blot protocol was obtained from the detection kit from Promega. Samples were first diluted 1:10 since raw serum was used which meant the protein concentration was too high  $(\sim 35 - 40 \,\mu g/\mu l)$ . Once diluted, a calculated volume of each sample was added to an eppendorf tube for 8 µg/µl final concentration. The samples were denatured and reduced by mixing water, 5X SDS sample buffer, and βmercaptoethanol and then placed in an  $85^{\circ}$  C water bath for 5 minutes. The samples, control sample (0mg/kg, 24 hr), and Bio-Rad, Precision Plus Kaleidoscope protein standards, were then separated by 1D gel electrophoresis using Bio-Rad ready gels (10 well, 50  $\mu$ L wells) at 110V for approximately 75 minutes on ice. Once separated, the proteins were transferred onto Bio-Rad PVDF membrane using a semi-dry procedure. For this procedure, a Hoefer horizontal electrophoresis system was used by laying Whatman filter paper, PVDF membrane, Ready Gel, and more filter paper in a stack then running a constant 200 mA current through the stack for 1 hour to migrate the proteins onto the PVDF membrane. After the transfer, the PVDF membrane was blocked using 1% Blot-Qualified BSA solution. After blocking, the Hornerin proteins were probed with a custom primary antibody developed in-house by Jeanette Frey and mass produced by New England Peptide as a polyclonal antibody package with affinity purification. Two antibodies were obtained from the company but optimization experiments showed

antibody A2 (Project #1241) performed better displaying less background versus A1 (Project #1240). The primary antibodies were then probed with Goat Anti-Rabbit IgG secondary antibody from the Promega kit which used an Alkaline Phosphatase detection enzyme. Finally, the Promega detection substrate was added and the Hornernin protein appeared as purple bands. A picture was taken with a CCD camera, images sharpened for resolution, and labeled.

# **B. Results**

**Figure 47:** Western Blots of rat serum samples from d-serine study 2 used in the full study. Samples used a custom designed primary antibody with and goat anti-rabbit labeled alkaline-phosphatase secondary antibody. Images  $A - D$  show an individual rat (no sample pooling) for each dose and time point on each gel in order to visual any increase in hornerin expression as dose and time increase. Image E shows all samples for the 200 mg/kg dose in order to visual any up-regulation in protein expression as time increases.



**B** 









**Figure 48:** Western Blots of rat urine samples from d-serine study 2 used in the full study. Samples used a custom designed primary antibody with and goat anti-rabbit labeled alkaline-phosphatase secondary antibody. Images  $A - E$  show each individual rat (no sample pooling) for each dose and four time points after dosing to visualize any change in protein expression over time. The blots paired a subject that received 200 mg/kg with a subject that received 500 mg/kg to show any change in protein expression as dose increased.



**B** 



**C** 



**D** 




#### **C. Discussion**

The Western blot images of the serum samples did not show any appreciable difference in protein concentration between samples. The similar protein concentrations across all serum samples indicated that a steady amount of hornerin was present in the bloodstream at all times. The initial 2D DIGE and mass spectrometry work was much more sensitive thus the subtle shifts in concentrations were not evident in the western blots of the rat serum. However, western blots on the urine from the rats used in the dserine study 2 were tested to see if any differences were visible. ELISA tests on the urine samples by another group found up-regulation in hornerin between 0, 12, and 24 hours post dose and those changes can be seen in the western blots results. Additionally, histopathology of the rat kidneys showed dramatic increases in hornerin from control subjects to dosed subjects up to 24 hours post dose.

The urine western blots clearly showed that hornerin was not present before dosing with d-serine but hornerin did show up in significant amounts after dosing. Combining the serum and urine images one can surmise that consistent levels are present in the body and as epithelial cells along the proximal tubules are damaged, hornerin protein is released into the urine and excreted from the body. The distinct elevation in urine hornerin compared to the steady levels in serum suggests that hornerin would be a viable protein biomarker of kidney degradation but diagnosis would have to be made from urine samples. Serum levels could be measured for use as a baseline or as a possible ratio between hornerin levels at certain disease states and static levels in the serum for use as a biomarker.

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#### **REFERENCES**

- 1. Arruda, J.A.L., Sabatini, S., Mehta, P., Sodhi, B., and Baranowski, R.L., Functional characterization of drug induced papillary necrosis, *Kidney Int.*, 15, 264, 1979
- 2. Bandara L.R., Kelly M.D., Lock E.A., Kennedy S.. A Correlation between a Proteomic Evaluation and Conventional Measurements in the Assessment of Renal Proximal Tubular Toxicity. Toxicological Sciences 73, 195–206 (2003)
- 3. Bandara L.R., Kennedy S.. Toxicoproteomics a new preclinical tool, DDT Vol. 7, No. 7 April 2002
- 4. Bennett, W. M. (1997). Drug nephrotoxicity: an overview. Ren Fail 19, 221–4.
- 5. Canter MP, Graham CA, Heit MH, Blackwell LS, Wilkey DW, Klein JB, Merchant ML. Proteomic techniques identify urine proteins that differentiate patients with interstitial cystitis from asymptomatic control subjects. Am J Obstet Bynecol. 2008 May; 198(5):553.e1-6
- 6. Chen, J. H., Chang, Y. W., Yao, C. W., Chiueh, T. S., Huang, S. C., Chien, K. Y., Chen, A., Chang, F. Y., Wong, C. H., and Chen, Y. J. (2004) Plasma proteome of severe acute respiratory syndrome analyzed by two-dimensional gel electrophoresis and mass spectrometry. Proc. Natl. Acad. Sci. U. S. A. 101, 17039–17044
- 7. Coleman, JE, Structure and mechanism of alkaline phophatase. Annu Rev Biophys Biomol Struct. 1992;21:441-83
- 8. Corzett T.H., Fodor I.K., Choi M.W., Walsworth V.L., Chromy B.A., Turteltaub K.W., McCutchen-Maloney S.L.. Statistical Analysis of the Experimental Variation in the Proteomic Characterization of Human Plasma by Two-Dimensional Difference Gel Electrophoresis, Journal of Proteome Research 2006, 5, 2611-2619
- 9. De la Luna, S., Ortin, J., *pac* gene as efficient dominant marker and reporter gene in mammalian cells. *Meth. Enzymol.* 216, 376, (1992)
- 10. Duarte, C. G., and Preuss, H. G. (1993) Assessment of renal function—glomerular and tubular. Clin Lab Med 13, 33–52.
- 11. Epp O, Ladenstein R. The Refined Structure of the Selenoenzyme Glutathione Peroxidase at 0.2-nm Resolution. *Eur.J.Biochem. 133: 51-69*
- 12. Fyhrquist F., Saijonmaa O.. Renin-angiotensin system revisited. J Intern Med. 2008 Sep; 264(3):224-36
- 13. Fishman, J. A., and Karnovsky,M. J. (1985). Effect of aminonucleoside of puromycin on glomerular epithelial cells in vitro. Am. J. Pathol. 118, 398–407.
- 14. Gallagher, S.. Current Protocols in Protein Science (1996) 10.10.1-10.10.12 Copyright 2000 by John Wiley & Sons, Inc.
- 15. Ganote, C.E., Peterson, D.R., Carone, F.A., The Nature of D-Serine-Induced Nephrotoxicity, Am J Pathol 77 :269-282, 1974
- 16. Gharbi, S., Gaffney, P., Yang, A., Zvelebil, M.J., Cramer, R., Waterfield, M.D., and Timms, J.F., Evaluation of two-dimensional differential gel electrophoresis for protein expression analysis of a model breast cancer cell system. Mol. Cell. Proteom., 1, 91-98 (2002)
- 17. Hedlund, L. W., Maronpot, R. R.,Johnson, G. A., Cofer, G. P., Mills, G. I., and Wheeler, C. T., Magnetic Resonance Microscopy of Toxic Renal Injury Induced

by Bromoethylamine in Rats, *Fundam. Appl. Toxicol*. 16, 787–797

- 18. Hoorn E.J., Hoffert J.D., Knepper M.A.. The Application of DIGE-Based Proteomics to Renal Physiology, Nephron Physiol 2006;104:p61–p72
- 19. Imai, K., Fukushima, T., Santa, T., Homma, H., Huang, Y., Shirao, M., Miura, K., Whole body autoradiographic study on the distribution of 14C-D-serine administered intravenously to rats. Amino Acids (1998) 15: 351-361
- 20. Kaltenbach J.P., Ganote C.E., Carone F.A., Renal Tubular Necrosis Induced by Compounds Structurally Related to D-Serine, Experimental and Molecular Pathology 30, 209-214 (1979)
- 21. Kim EE, Wyckoff HW. Reaction mechanism of alkaline phophatase based on crystal structure. Two-metal ion catalysis. J Mol Biol. 1991 Mar 20;218(2):449-64
- 22. Kinter M., Sherman N.E., Protein Sequencing and Identification Using Tandem Mass Spectrometry, 2000 John Wiley & Sons
- 23. Knepper MA: Proteomics and the kidney. J Am Soc Nephrol 2002; 13: 1398–1408.
- 24. Lilley KS, Friedman DB: All about DIGE: quantification technology for differentialdisplay 2D-gel proteomics. Expert Rev Proteomics 2004; 1: 401–409.
- 25. Macfarlane DE: Two dimensional benzyldimethyl-n-hexadecylammonium chloridesodium dodecyl sulfate preparative polyacrylamide gel electrophoresis: a high capacity high resolution technique for the purification of proteins from complex mixtures. Anal Biochem 1989; 176: 457–463.
- 26. Millan, J.L.. Alkaline Phosphatases: Structure, substrate specificity and functional relatedness to other members of a large superfamily of enzymes. Purinergic Signalling (2006) 2: 335-341
- 27. Molloy MP, Brzezinski EE, Hang J, McDowell MT, VanBogelen RA: Overcoming technical variation and biological variation in quantitative proteomics. Proteomics 2003; 3: 1912–1929
- 28. Muller FL, Lustgarten MS, Jang Y, Richardson A, and Van Remmen H, Trends in oxidative aging theories. Free Radic Biol Med (2007) 43, 477-503
- 29. Murray, R., Lawson, D., and Linton, A., Analgesic nephropathy: clinical sysndrome and prognosis, *Br. Med. J.*, 1, 479, 1966.
- 30. Nathans, D., Gottlieb, D., Shaw, P.D. *Antibiotics* New York, NY , (1967) **1**, 259 )
- 31. Pang, J.X., Ginanni N., Dongre A.R., Hefta S.A., Opiteck G.J., Biomarker Discovery in Urine by Proteomics, Journal of Proteome Research 2002, 1, 161-169
- 32. Petersen, C.M.. Alpha 2-macroglobulin and pregnancy zone protein. Serum levels, alpha 2-macroblobulin receptors, cellular synthesis and aspects of function in relation to immunology. Dan Med Bull. 1993 Sep; 40(4):409-46
- 33. Pieper, R., Gatlin, C. L., Makusky, A. J., Russo, P. S., Schatz, C. R., Miller, S. S., Su, Q., McGrath, A. M., Estock, M. A., Parmar, P. P., Zhao, M., Huang, S. T., Zhou, J., Wang, F., Esquer-Blasco, R., Anderson, N. L., Taylor, J., and Steiner, S. (2003) The human serum proteome: Display of nearly 3700 chromatographically separated protein spots on two-dimensional electrophoresis gels and identification of 325 distinct proteins. Proteomics 3, 1345–1364
- 34. Reichling, J.J., Kaplan, M.M.. Clinical use of serum enzymes in liver diseases. Dig Dis Sci 1988, 33: 1601-1614
- 35. Ryan, G. B., and Karnovsky,M. J. (1975). An ultrastructural study of the mechanisms of proteinuria in aminonucleoside nephrosis.60, 152–161. Kidney Int. 8, 219–232.
- 36. Sabatini, S., Mehta, P. K., Hayes, S., Kurtzman, N.A., and Arruda, J.A.L., Drug induced Papillary necrosis: electrolyte extretion and nephron heterogeneity, *Am. J. Physiol.*, 241, F14, 1981.
- 37. Sabatini, S., Koppera, S., Manaligod, J. A., Arruda, J. A. L., and Kurtzman, N. A., Role of urinary concentrating ability in the generation of toxic papillary necrosis, *Kidney Int*., 23, 705, 1983.
- 38. Santoni V, Molloy M, Rabilloud T: Membrane proteins and proteomics: un amour impossible? Electrophoresis 2000; 21: 1054–1070.
- 39. Sanwal, V., Pandya, M., Bhaskaran, M., Franki, N., Ding, K.G., Kapasi, A., Valderrama, E., and Singhal, P.C., Puromycin Aminonucleoside Induces Glomerular Epithelial Cell Apoptosis, Experimental and Molecular Pathology 70, 54–64 (2001)
- 40. Sharma K., Lee S., Han S., Lee S., Francos B., McCue P., Wassell R., Shaw M.A., RamachandraRao S.P., Two-dimensional fluorescence difference gel electrophoresis analysis of the urine proteome in human diabetic nephropathy, Proteomics 2005, 5, 2648–2655
- 41. Shaw J, Rowlinson R, Nickson J, Stone T, Sweet A, Williams K, et al: Evaluation of saturation labeling two-dimensional difference gel electrophoresis fluorescent dyes. Proteomics 2003; 3: 1181–1195.
- 42. Silbernagl, S., Volker, K., and Dantzler, W. H. (1999). D-Serine is reabsorbed in rat renal pars recta. Am. J. Physiol. 276, F857–F863. Snyder S., Pendergraph B. Detection and Evaluation of Chronic Kidney Disease, Am Fam Physician, 2005 Nov 1; 72(9): 1733-4
- 43. Skoog D.A., Holler F.J., Nieman T.A., Principles of Instrumental Analysis.  $5^{th}$  ed. 1998
- 44. Snyder S, Pendergraph B, Detection and Evaluation of Chronic Kidney Disease. Am Fam Physician. November 1, 2005. Vol 72, Number 9
- 45. Soury E, Olivier E, Daveau M, Hiron M, Claeyssens S, Risler JL, Salier JP. The H4P heavy chain of inter-alpha-inhibitor family largely differs in the structure and synthesis of its prolin-rich region from rat to human. Biochem Biophys Res Commun. 1998 Feb 13;243(3):522-30.)
- 46. Speicher, D.W., ed, Proteome Analysis Interpreting the Genome. Pg 76-90 2004
- 47. Star RA: Treatment of acute renal failure. Kidney Int 54: 1817–1831, 1998
- 49. Thukral S.K., Nordone P.J., Hu R., Sullivan L., Galambos E., Fitzpatrick V.D., Healy L., Bass M.B., Cosenza M.E., Afshari C.A.. 'Prediction of Nephrotoxicant Action and Identification of Candidate Toxicity-Related Biomarkers', Toxicologic Pathology, 33:3, 343 – 355 (2007)
- 50. Toback, F. G. (1992). Regeneration after acute tubular necrosis. Kidney Int 41, 226– 46.
- 51. Tomlanovich S, Golbetz H, Perlroth M, Stinson E, Myers BD: Limitations of creatinine in quantifying the severity of cyclosporine-induced chronic nephropathy. Am J Kidney Dis 8: 332–337, 1986
- 52. Tonge, R., Shaw, J., Middleton, B., Rowlinson, R., Rayner, S., Young, J., Pognan, F., Hawkins, E., Currie, I. and Davison, M., Validation and development of fluorescence two-dimensional differential gel electrophoresis proteomics technology. Proteomics, 1, 377-396 (2001)
- 53. Veenstra T.D., Conrads T.P., Hood B.L., Avellino A.M., Ellenbogen R.G., Morrison R.S., Biomarkers: Minig the Biofluid Proteome, Molecular & Cellular Proteomics, 4.4, 409-418 (2005)
- 54. Veitch NC. Horseradish peroxidase: a modern view of a classic enzyme. Phytochemistry Vol 65, Issue 3, Feb 2004, pages 249-259
- 55. Zhou, G., Li, H., DeCamp, D., Chen, S., Shu, H., Gong, Y., Flaig, M., Gillespie, J.W., Hu, N., Taylor, P.R., Emmert-Buck, M.R., Liotta, L.A., Petricoin, E.F. III and Zhao, Y., 2-D differential in-gel electrophoresis for the identification of esophageal scans cell cancer-specific protein markers. Mol. Cell. Proteom., 1, 117-123 (2002)

56.

http://www.kpl.com/docs/techdocs/How%20KPL%20Purifies%20Its%20Antibodies.pdf

## **Ammendment 1: Study 1 Animal handling protocol.**

## **V.1. Experimental Design and General Procedures**

### **A. Experimental Design and General Procedures:**

This study will be divided into two phases. In the first phase, nephrotoxins that have been studied in Protocol # F-WA-2003-0074-A will be used at selected concentrations representative of toxicity and non-toxicity. The chemicals, dose range, method of dosing and regional toxicity in kidney are shown in Table 1. As described in Background (Section II.1), these dose ranges are determined based on the results generated under Animal Protocol # F-WA-2003-0074-A), in which the lowest dose caused no observable abnormality in clinical chemical and histopathology, while the highest dose resulted in mild histopathological lesions and/or clinical chemistry. In the second phase of the study, nephrotoxins that are not covered by Protocol # F-WA-2003-0074-A will be used.

Dosing Solution $(15 \text{ mL})$	Dose Range $(-0.25 \text{ kg} \text{ rat})$	Dosing Method $(10 \text{ mL/kg})$	<b>Regional Toxicity</b>
Bromoethylamine $(0 - 50 \text{ mg/mL})$	$0 - 500$ mg/kg	$i.p.$ injection	renal papillary necrosis & renal fibrosis
D-Serine $(0 - 20 \text{ mg/mL})$	$0 - 200$ mg/kg	$i.p.$ injection	proximal tubular necrosis
Puromycin $(0 - 15 \text{ mg/mL})$	$0 - 150$ mg/kg	$i.p.$ injection	glomerular injury
Amphotericin B $(0 - 2.5 \text{ mg/mL})$	$0 - 25$ mg/kg	$i.p.$ injection	distal tubular damage

Table 1. Chemical toxicants used in Phase I

Vehicle: Vegetable oil (i.e. corn, sesame, etc.) - Hydrophobic compounds / Normal saline - Hydrophilic compounds

### B. Phase I General Experimental Design:

Male Fischer 344 rats (200-225 gram) will be obtained from Charles River Laboratories and housed in Building 838. Food and water will be available for all animals *ad libitum*. On the seventh day after arrival 0.8 mL of blood, which serves as the baseline, will be collected from each rat via the lateral tail vein, using a 23 G needle attached to a 1 cc syringe. At the end of the 14-day quarantine/acclimation period, the animals will be randomly assigned to a control or one of the four treatment groups in each chemical treatment study (listed in Table 1) and housed in metabolism cages. Selection of each test chemical was based on a complete and site specific representation of the regions of the kidney, as described in the Animal Protocol  $#F-WA-2003-0074-A$ . Based on our previous histopathology/clinical pathology results, the low-dose treatment is expected to result in no observable abnormality in histopathology and clinical chemistry, while the high-dose treatment will result in mild histopathological lesions

and/or clinical chemistry. Two intermediate doses will also be included. The range of possible dosages for each chemical is listed in Table 1 shown above.

The schematic representation of the general experimental design is shown in Figure 1. Seventy-eight rats per chemical treatment experiment are required:

 $(n = 3/treatment group x 5 groups (ctl + dose) x 5 time pts + 3 animals @ time 0).$ Based on the results of Animal Protocol # F-WA-2003-0074-A and that reported in the open literature, the recovery period may cover a range up to 7 days.



 *Figure 1. Schematic representation of the general design of the experiment.* 

On day 0 at time 0, each animal will be given a single dose of either vehicle only or the test chemical at the selected doses by intraperitoneal injection at a volume of 10 mL/kg. Urine samples for proteomics and metabonomics analysis will be collected 24 h prior to dosing and daily thereafter from both control and treatment groups into 50 mL conical tubes containing 1.0 mL of 1% sodium azide maintained at 6-10°C using I-Cups (Bioanalytical Systems, Inc.).

On day 0 at time 0, three rats dosed with vehicle only will be sacrificed by  $CO<sub>2</sub>$ asphyxiation. Blood will be drawn via the inferior vena cava with an 18-20 G needle fitted to a 10 cc syringe, and the kidneys will be removed. Peripheral blood mononuclear cells (PBMC) and serum/plasma will be prepared from the collected blood for genomics,

proteomics, metabonomics, clinical chemistry and histopathological analyses. A list of traditional renal function and previously described renal injury tests shown in Table 2 will be performed. Kidney tissues will be frozen in liquid nitrogen for genomic profiling or fixed in 10% formalin for histopathological analysis. Tissue samples will be stained with hematoxylin and eosin followed by light microscopic evaluation. Since gene/protein expression can be influenced by the circadian rhythm, inclusion of this control group will help identify gene/protein expression changes unrelated to chemical exposure and thus eliminate them from the list of potential biomarkers.



Table 2. Serum and Urine Analytes (Parameters) for Determination of Renal Function Note: Select tests from the below table will be performed on collected sera.

At 6, 12, 24, 48 and 96 hours (or other time points depending on the toxicity profile of the chemicals as described above) post-dose, 3 rats per dose group (control plus 4 dose groups) will be sacrificed in the same manner. Urine, blood, and tissues will be collected, processed and analyzed as at time 0. The total animal usage for the Phase I study is shown below:

**Total # animals = 312** (78 animals per chemical x 4 chemicals)

ii. Time Series Exposure Experiments:

These experiments will be performed as described in Section V.1.B (Phase I experiments of this study). Specifically, male Fischer 344 rats (200-225 gram, from Charles River Laboratories will be housed in Building 838. On the seventh day after arrival 0.8 mL of blood (serving as the baseline) will be collected from each rat. At the end of the 14-day quarantine/acclimation period, the animals will be randomly assigned to a control or one of the four treatment groups in each chemical study and housed in metabolism cages. Selection of the doses will be guided by the results of the doseresponse experiment described above (Section V.1.C.i). As above, the low-dose treatment is expected to result in no observable abnormality in histopathology, clinical chemistry, renal function assays and metabonomic profiles while the high-dose treatment will result in mild nephrotoxicity. Two intermediate doses will also be included.

Seventy-eight rats per chemical treatment experiment are required ( $n = 3$ /treatment group; vehicle control and 4 dose groups). Based on the results of dose-response experiment, as well as that reported in the open literature, experimental exposure and recovery period may cover a range up to 14 days.

On day 0 at time 0, each animal will be given a single dose of either vehicle only or the test chemical at the selected doses by intraperitoneal injection (or oral gavage) at a volume of 10 mL/kg. Urine samples, for proteomics and metabonomics analysis, will be collected 24 h prior to dosing and daily thereafter from both control and treatment groups into 50 mL conical tubes containing 1.0 mL of 1% sodium azide maintained at 6-10°C using I-Cups (Bioanalytical Systems, Inc.).

On day 0 at time 0, 3 rats dosed with vehicle only will be sacrificed by  $CO<sub>2</sub>$ asphyxiation. Blood will be drawn via the inferior vena cava with an 18-20 G needle fitted to a 10 cc syringe, and kidney will be removed. Peripheral blood mononuclear cells (PBMC) and serum/plasma will be prepared from the collected blood for genomics, proteomics, metabonomics, clinical chemistry and histopathological analyses. Kidney tissues will be frozen in liquid nitrogen for genomics profiling or fixed in 10% formalin for histopathological analysis. Tissue samples will be stained with hematoxylin and eosin followed by light microscopic evaluation.

At 6, 12, 24, 48 and 96 hours (or other time points depending on the toxicity profile of the chemicals as described above) post-dose, 4 rats per dose group (control plus 4 dose groups) will be sacrificed in the same manner. Urine, blood and tissues collected, processed and analyzed as at time 0. The total animal usage for the Phase I study is shown below:

**Total # animals = 780** (10 chemicals  $X$  5 dose groups  $X$  5 time points  $X$  3 animals/time point) + (10 chemicals X 1 dose group (control) X 1 time point (time 0) X 3 animals/time point)

#### H. Clinical Chemistry, Renal Function Test and Histopathology Analysis

Blood samples will be collected in non-additive red top clot tubes (Becton-Dickinson) and serum recovered by centrifugation at 2,500 x g at  $25^{\circ}$ C for 10 min. Serum chemistry for specific analytes such as creatinine, urea, sodium, calcium and magnesium will be analyzed using a Roche Cobas Mira Clinical Chemistry Analyzer. Similarly, urinary creatinine, total protein, glucose, sodium, calcium, magnesium albumin hemoglobin, IgG, α1-microglobin, α2-microglobin, β2-microglobin, lactate dehydrogenase, aspartate aminotransferases, alanine aminotransferases and gamma glutamyltransferase will also be

determined. Other urinary proteins associated with renal injury such as N-acetyl-β-Dglucosamindase, adenosine deaminase binding protein, α-glutathione-S transferase, μglutathione-S transferase, neutrophil gelatinase-associated lipocalin, kidney injury molecule-1, clusterin, retinol binding protein, etc. will be determined using either Western blots or ELISA (see Table 2 for the entire list of serum and urinary analytes). Tissue samples collected for histopathology will be placed in 10% neutral-buffered formalin followed by sectioning (1-3 mm), paraffin embedding, cutting, placement on slides, and staining using hematoxylin and eosin.

#### **V.3.3.5. Weight**

The animals will be ordered at 200-225 grams. Based on the growth charts for male Fischer 344 rats available on the Charles River Laboratory website (www.criver.com) animals, prior to chemical exposure, should reach approximately 250 grams with a circulating blood volume of 17.50-21.00 ml, which is recommended for "safely" removing multiple blood samples within a 2-4 week period (NIH Office of Animal Care and Use, www.oacu.od.nih.gov).

#### **V.3.3.6. Sex**

Male: To ensure the genomics and proteomics data can be directly compared with that of the metabonomics experiment performed under the Animal Protocol # F-WA-2003-0074-A, only males will be utilized. However, if successful, a similar study may be conducted utilizing female rats to determine the effect of gender difference on genomics and proteomics to exposure to nephrotoxicants.

**Amendment 2:** Large 2D PAGE gels of Subject 305, comparison of serum before and after immunodepletion by Agilent MARS MS-3 HPLC chromatography column. The gels show that very little of the over abundant proteins were removed and that the Agilent column did not perform as advertised by Agilent. **A)** Subject 305, whole serum before enrichment. **B**) Subject 305 after 1 pass through the Agilent HPLC column.



**A** 



**Amendment 3:** Specific time points taken from each rat from puromycin and BEA study 1 and d-serine study 2 used in the Full Study. The table demonstrates the need for sample pooling and shows where study contaminations may have occurred as well as lethal doses.



Puromycin







# BEA











# D-Serine

