



Centrum pro výzkum  
toxických látek  
v prostředí

# BIOMARKERS AND TOXICITY MECHANISMS

## 09b – Nuclear Receptors

# AHR – Arylhydrocarbon Receptor

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Tento projekt je spolufinancován Evropským sociálním fondem a státním rozpočtem České republiky.

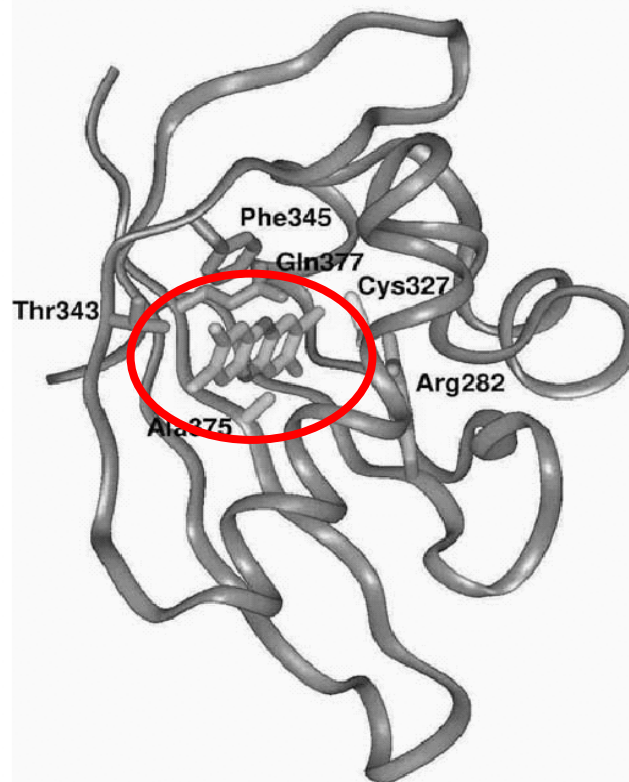


INVESTICE DO ROZVOJE VZDĚLÁVÁNÍ

# AhR (Arylhydrocarbon receptor)

AhR structure

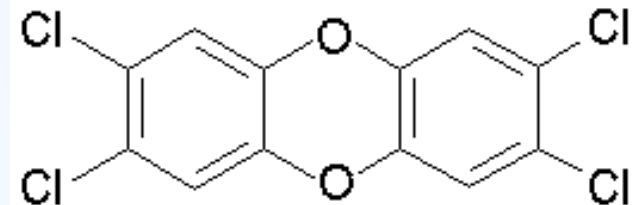
*Derison et al., Chem Biol Interact. 141: 3*



2,3,7,8-TCDD  
(dioxin) bound to AhR

# AhR

- Also known as „dioxin-receptor“ (and its modulation leads to so called „dioxin-like“ activity or toxicity)
- Ligand-activated transcription factor
  - Similar to all NRs
- AhR has effects on many different genes
- important mediator of toxicity of POPs – primary target of **planar aromatic substances**
  - regulator of xenobiotic metabolism and activation of promutagens
- Crossactivation/crosstalk with other NRs
- **Strongest known ligand - TCDD**
  - (not endogeneous !)



## AhR regulated genes

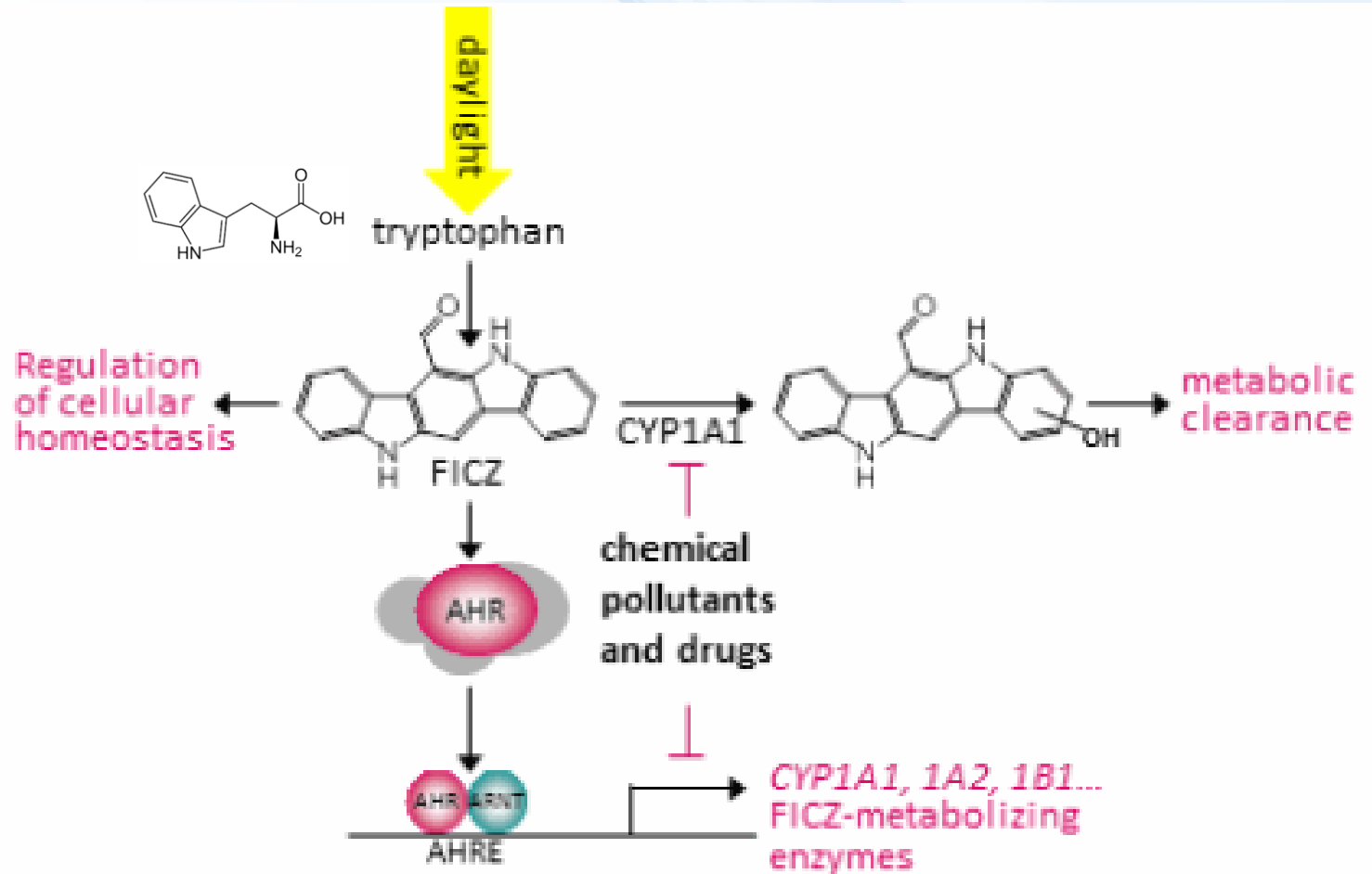
- Many genes contain **xenobiotic response elements (XRE)** or dioxin responsive elements (DRE) in their promoter region:
  - **Detoxification genes** phase I enzymes (CYP 1A1, CYP 1A2, CYP 1B1) and phase II enzymes (UDP-glucuronosyltransferase, GST-Ya, NADP(H):oxidoreductase)
    - **Detoxification after toxicant exposure**  
*... also with possible toxic consequences (oxidative stress, activation of promutagens accelerated clearance of hormones)*
  - **Other genes** - regulation of cell cycle and apoptosis
    - Bax (**apoptosis control**), p27Kip1, Jun B (MAP-kinase), TGF-b (**tumor growth factor**)
      - **Various adverse toxic effects**

# Physiological role of AhR

- **Physiological role for AhR still not known completely (?)**
    - Most likely – “protection” against toxicants → induction of detoxification
  - Many adverse effects documented in **AhR-deficient** mice
    - significant growth retardation;
    - defective development of liver and immune system;
    - retinoid accumulation in liver;
    - abnormal kidney and hepatic vascular structures.
    - resistant to BaP-induced carcinogenesis and TCDD-induced teratogenesis;
    - no inducible expression of CYP 1A1 and 2.
- this implies presence of **natural endogeneous ligand(s)**  
(not only exogeneous toxicants can bind AhR)

# What is the natural (endogenous) physiological ligand of AhR ?

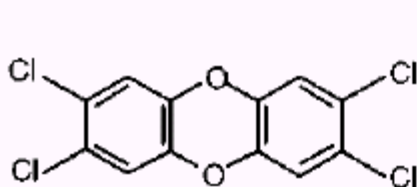
Potential candidate: 6-formylindolo[3,2-b]carbazole (FICZ)



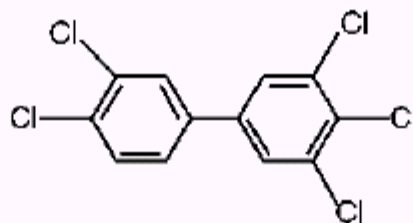
# Classical and “non-classical” AhR ligands

Classical = planar structures → direct binding to AhR

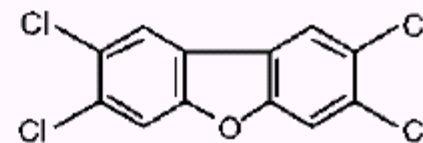
## “Classical” AhR Ligands and CYP1A1 Inducers



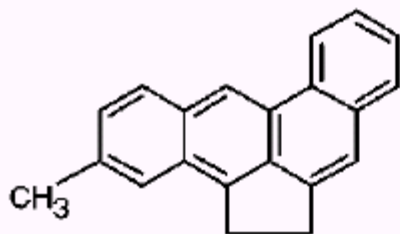
2,3,7,8-Tetrachlorodibenzo-p-dioxin



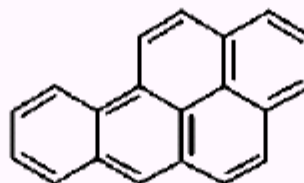
3,4,3',4',5-Pentachlorobiphenyl



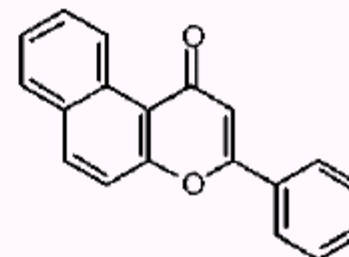
2,3,7,8-Tetrachlorodibenzofuran



3-Methylcholanthrene



Benzo(a)pyrene



β-Naphthoflavone

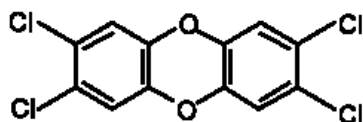
*Denison & Nagy, Annu. Rev. Pharmacol. Toxicol. 43:309*



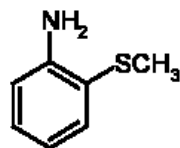
# „Non-classical“ AhR ligands – various structures

M.S. Denison et al. / *Chemico-Biological Interactions* 141 (2002) 3–24

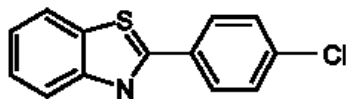
## “Classical” ligand



**2,3,7,8-Tetrachlorodibenzo-p-dioxin**



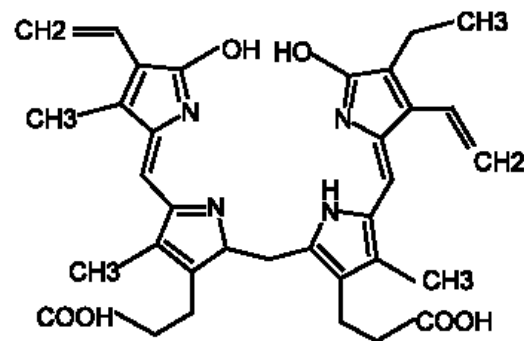
**2-(Methylmercapto)aniline**



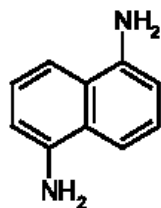
**2-(4'-Chlorophenyl)benzothiazole**



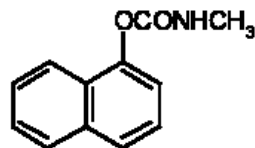
**SKF71739**



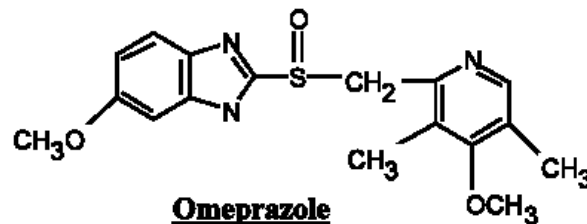
**Bilirubin**



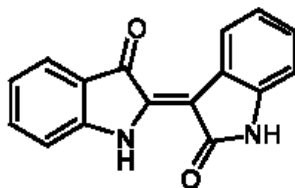
**1,5-Diaminonaphthalene**



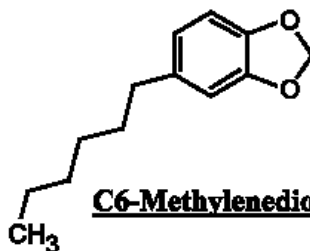
**Carbaryl**



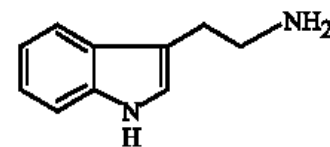
**Omeprazole**



**Indirubin**



**C6-Methylenedioxybenzene**

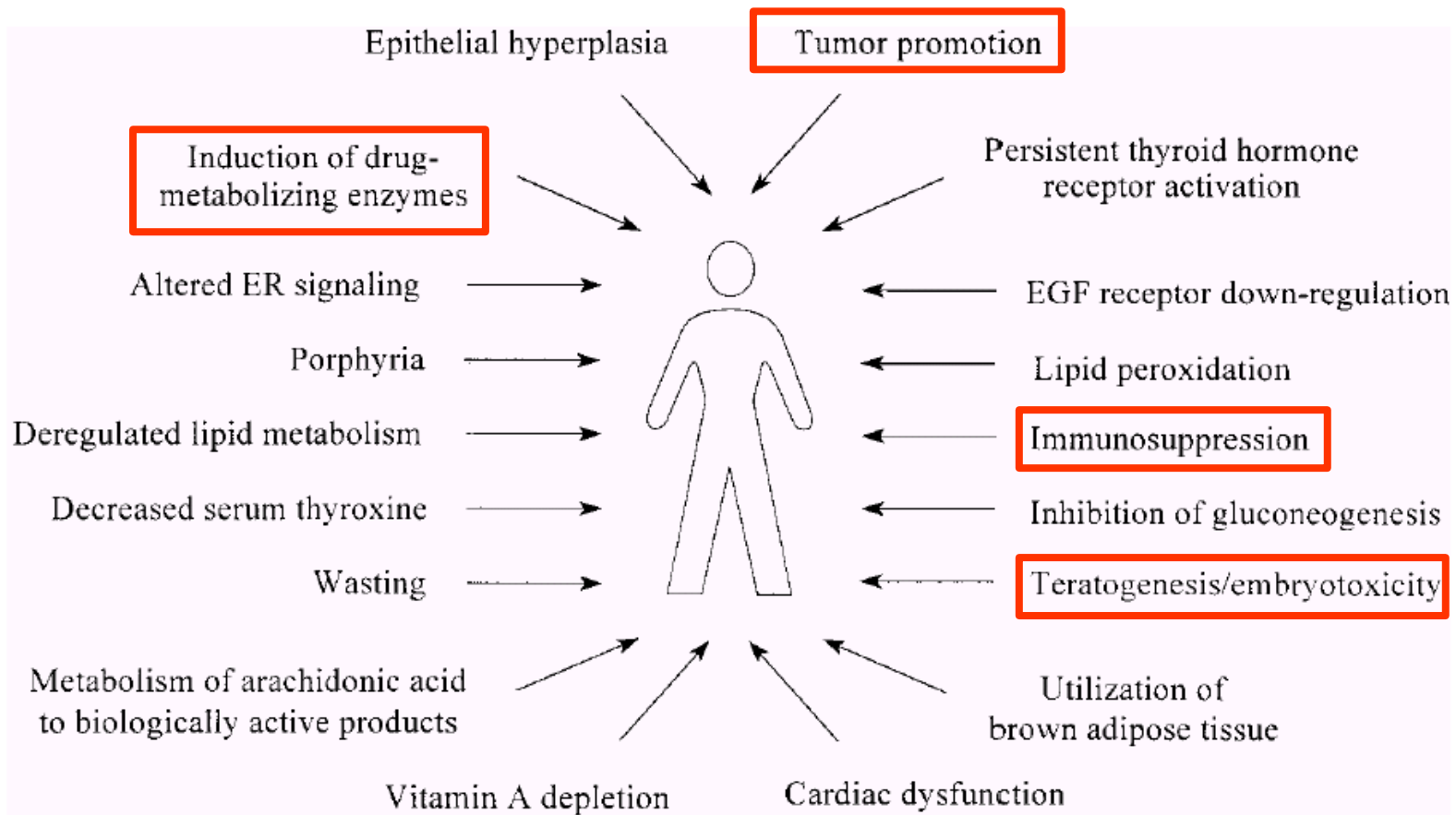
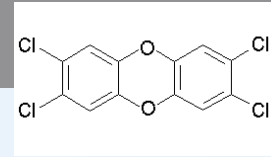


**Tryptamine**





# Biological responses to TCDD & AhR ligands



*Figure 1* Biological responses to TCDD. A wide variety of cellular processes have been shown to be affected by TCDD.

# Toxic equivalency factors (TEF)/TEQ concept

- Toxicity of compounds with similar toxicological properties as TCDD (activating AhR) may be evaluated by TEF/TEQ concept
  - TEF = Toxic Equivalency Factor (“characteristic” of the Chemical)
  - TEQ = Toxic Equivalent (sum of TEFs x concentrations)
- **TEFs are consensus values based on REPs (relative potencies) across multiple species and/or endpoints.**
  - TEFs are based upon a number of endpoints, from chronic in vivo toxicity to in vitro toxicity with the former having the greatest importance in determining overall TEF.
- **TEQs provide a simple**, single number that is indicative of **overall toxicity of a sample** (water, sediment, food) containing a mixture of dioxins and dioxin-like compounds.
- The total potency of a mixture can be expressed in TCDD TEQ concentration
  - i.e. TEQ = concentration corresponding to the effect that would be induced by TCDD

$$\text{TEQ} = \Sigma\{\text{compound}_1 \times \text{TEF}_1 + \dots$$
$$+ \text{compound}_n \times \text{TEF}_n\}$$



# Toxic equivalency factors for PCDDs, PCDFs and PCBs:

**Table 4.** Toxic Equivalent Factors established by the WHO (WHO-TEFs) for dioxins and dioxin-like PCBs [4]

PCDD Congener	WHO-TEF	PCDF Congener	WHO-TEF	PCB Congener	WHO-TEF
2,3,7,8-TCDD	1	2,3,7,8-TCDF	0.1	<i>Non-ortho</i>	
12,3,7,8-PeCDD	1	12,3,7,8-PeCDF	0.05	PCB#81	0.0005
123478-HxCDD	0.1	23478-PeCDF	0.5	PCB#77	0.0005
123678-HxCDD	0.1	123478-HxCDF	0.01	PCB#126	0.1
12,3,7,89-HxCDD	0.1	123678-HxCDF	0.1	PCB#169	0.01
1234678-HpCDD	0.01	234678-HxCDF	0.1	<i>Mono-ortho</i>	
OCDD	0.0001	12,3,7,89-HxCDF	0.1	PCB#105	0.0001
		1234678-HpCDF	0.01	PCB#114	0.0005
		1234789-HpCDF	0.01	PCB#118	0.0001
		OCDF	0.0001	PCB#123	0.0001
				PCB#156	0.0005
				PCB#157	0.0005
				PCB#167	0.00001
				PCB#189	0.0001

*Eljarrat & Barceló, Trends Anal. Chem.22: 655*

Final concentration is expressed as „Equivalents of TCDD“  
(e.g. ng TEQ / kg = ng TCDD / kg)

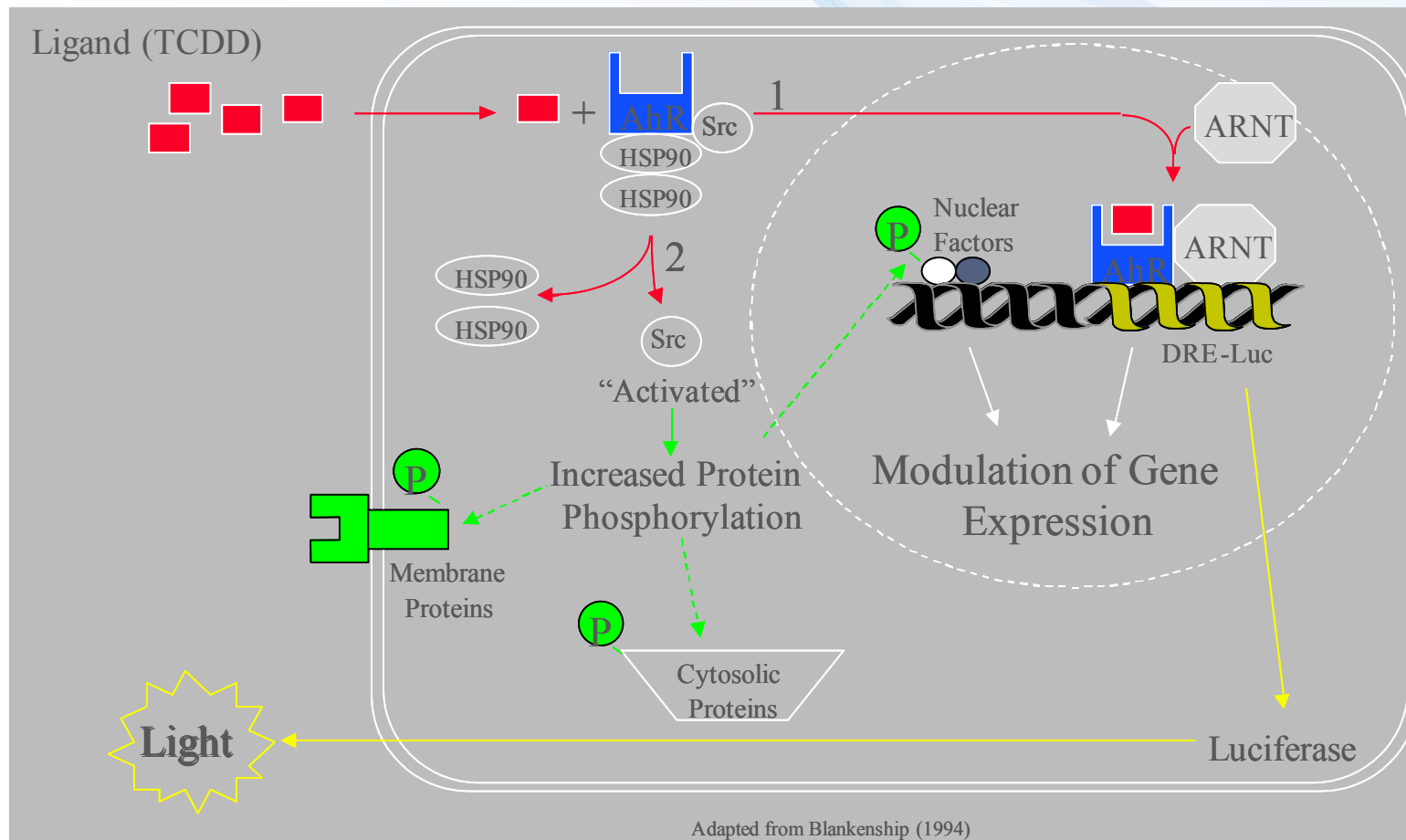
# Biomarkers/bioanalytical methods for AhR toxicity

- In vivo studies
  - liver enlargement, reduction of thymus weight, wasting syndrome, reproductive and developmental disorders
- In vivo biomarkers
  - **EROD** activity, CYP 1A1 and 1B1 expression  
(discussed in biomarker section)
- in vitro assessment of chemical potencies
  - EROD (ethoxyresorufin-O-deethylase activity) in cell cultures;
  - **CALUX/CAFLUX assays**  
(luciferase expression – reporter gene assays)
  - GRAB assay (AhR-DNA binding)
  - yeast bioassay;
  - immunoassays;
  - detection of CYP1A mRNA (qPCR) or AhR protein (western blotting)



# In vitro CALUX/CAFLUX assays

CALUX – Chemical Assisted Luciferase Expression  
DR-CALUX (Dioxin Responsive CALUX)  
(i.e. Luciferase Reporter Gene Assay with H4IIE.luc cells)



Adapted from Blankenship (1994)



# DETECTION of EROD activity - example

140

*M. Till et al. / Chemico-Biological Interactions 117 (1999) 135–150*

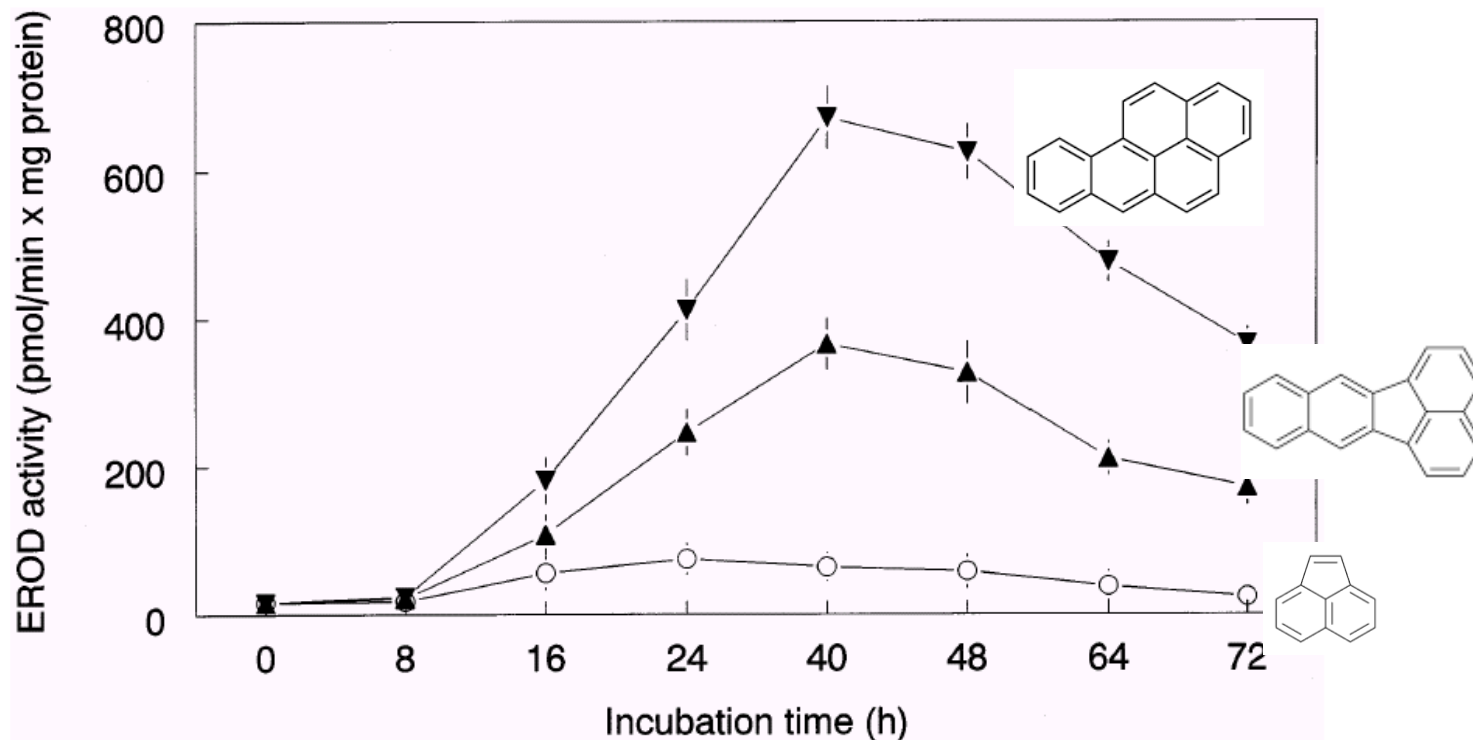
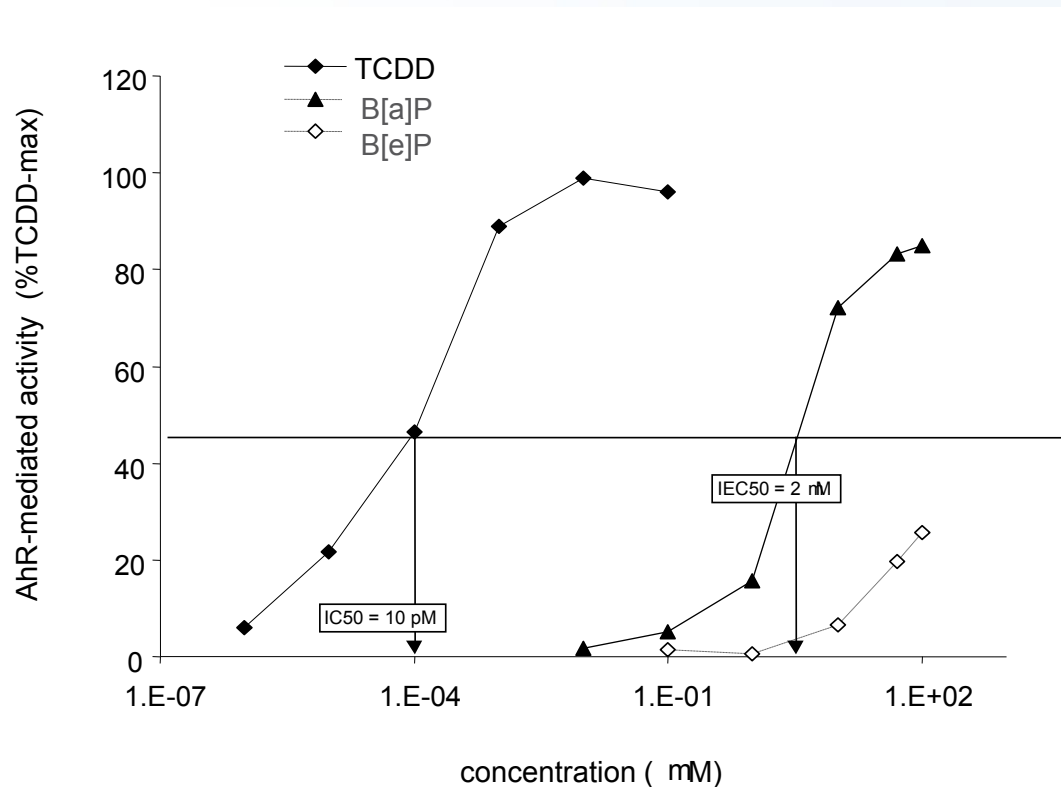


Fig. 2. Time course of induction of CYP1A1-catalyzed 7-ethoxyresorufin *O*-deethylase (EROD) activity in primary cultures of rat hepatocytes, after addition of  $1.7 \times 10^{-5}$  M benzo[*a*]pyrene (-▼-),  $1.9 \times 10^{-6}$  M benzo[*k*]fluoranthene (-▲-) or  $9.4 \times 10^{-5}$  M acenaphthylene (-○-). EROD activity was determined in cell homogenates. The data represent means  $\pm$  S.D. from four independent experiments.

# Comparing toxicity of compounds → Application in Risk Assessment

- Quantification of effects ( $EC_{50}$ )
- Comparison with the effect of reference toxicant (2,3,7,8-TCDD)
  - → relative potencies (REPs) to TCDD  
(= in vitro "Toxic Equivalency Factors" ~ TEFs)



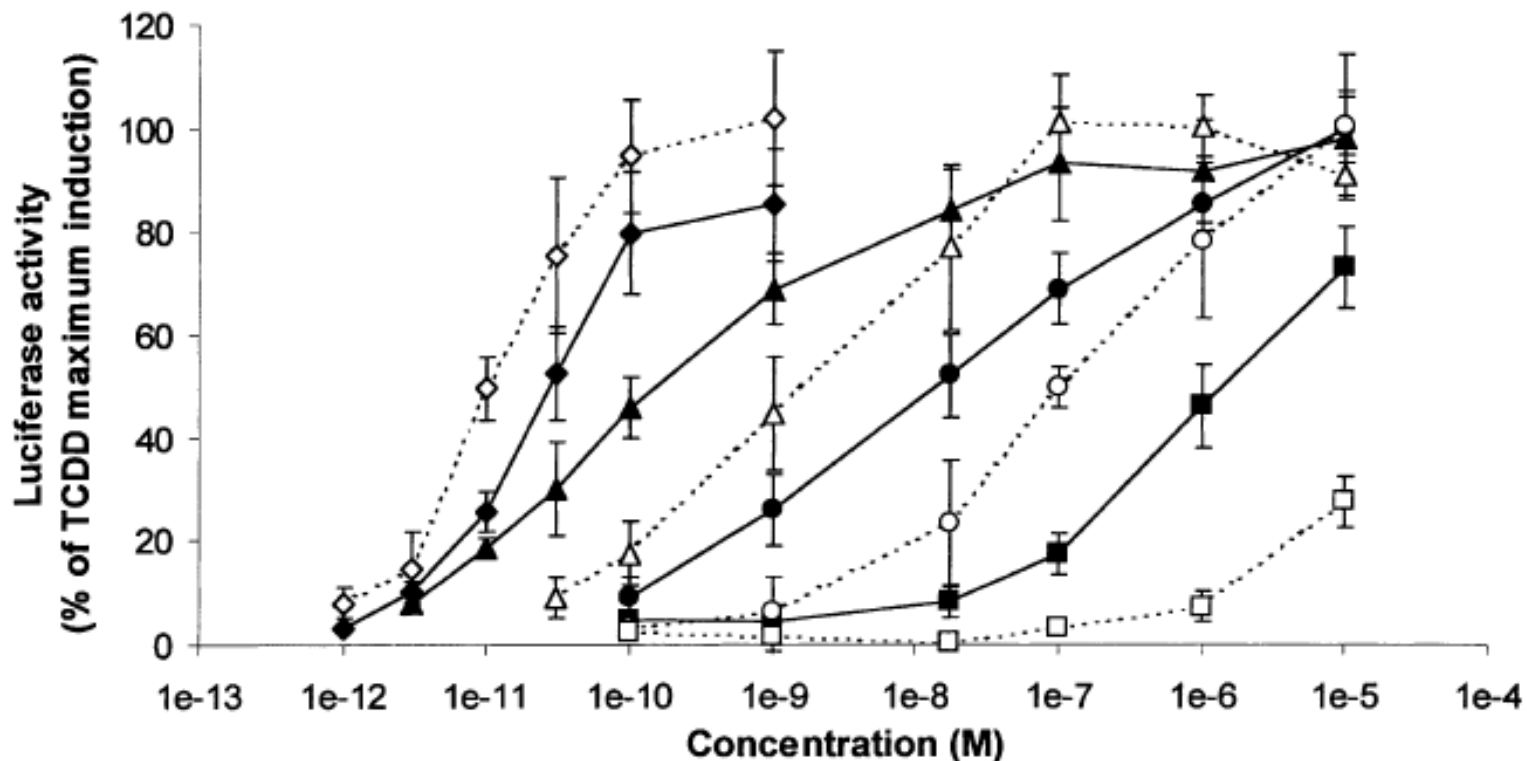
TCDD:  $IC_{50}$   
PAH:  $IEC_{50}$

Relative Potency (REP)  
= Induction Equivalency Factor  
 $IEF = IC_{50} / IEC_{50}$

REP interpretation: How many times is the compound "weaker" inducer than TCDD ?

# Example - relative potencies of PAHs (two exposure periods) „CALUX“ assay

*M. Machala et al. / Mutation Research 497 (2001) 49–62*



—◆— TCDD - 6h      —●— B[a]P - 6h      —▲— B[k]F - 6h      —■— B[ghi]Pe - 6h  
···◇··· TCDD - 24h      ···○··· B[a]P - 24h      ···△··· B[k]F - 24h      ···□··· B[ghi]Pe - 24h





Table 2

IEFs of PAHs relative to TCDD or B[a]P derived from EC50 or EC25 values in 24 and 6 h exposure assays

Derived from	IEF <sub>TCDD(24h)</sub>		IEF <sub>TCDD(6h)</sub>		IEF <sub>B[a]P(6h)</sub>	
	EC50	EC25	EC50	EC25	EC50	EC25
Flu	ni <sup>a</sup>	ni	ni	ni	ni	ni
Ant	ni	ni	ni	ni	ni	ni
Fla	2.27E-8	9.31E-7	9.84E-5	1.11E-4	1.05E-2	5.59E-3
Py	1.78E-6	3.38E-6	2.59E-5	4.45E-5	7.57E-3	6.21E-3
B[a]A	7.04E-6	9.60E-6	7.64E-7	2.40E-6	0.39	0.50
Chry	1.01E-4	1.07E-4	1.41E-2	3.26E-2	3.25	2.04
B[b]F	3.35E-5	4.82E-5	4.90E-2	2.32E-1	8.83	12.81
B[k]F	1.64E-3	2.94E-3	0.28	0.57	67.76	36.33
B[a]P	9.01E-5	1.99E-4	1.11E-2	2.02E-2	1.0	1.0
DB[ah]A	1.17E-3	1.52E-3	0.06	0.20	11.46	11.72
I[123-cd]P	2.96E-4	5.01E-4	0.86	1.24	44.20	29.70
B[ghi]Pe	ni	ni	2.27E-5	4.68E-5	5.47E-3	2.99E-3
DB[al]P	4.90E-6	1.13E-6	2.52E-5	3.26E-5	2.36E-2	1.88E-2
NPyr	2.05E-4	3.83E-4	5.80E-3	1.31E-2	1.10	0.88
CPP	2.48E-7	6.53E-7	6.20E-6	1.72E-5	4.23E-3	3.38E-3
B[a]Pe	6.19E-6	6.28E-6	2.27E-4	3.05E-4	3.37E-2	1.68E-2
DB[ae]F	9.30E-6	1.18E-5	2.75E-5	1.33E-4	1.74E-3	6.74E-3
DB[ai]P	1.65E-4	4.41E-4	4.29E-2	3.82E-2	2.59	1.75
DB[ae]P	1.80E-5	3.90E-5	1.08E-3	3.90E-3	0.49	0.13
DB[ah]P	7.14E-5	3.70E-4	2.65E-2	5.43E-2	2.80	2.68
DB[ak]F	1.23E-3	1.37E-3	1.55E-2	2.02E-2	2.69	1.65
5-MeChry	9.48E-5	1.59E-4	4.05E-2	5.08E-2	3.07	2.46
DB[aj]A	3.70E-4	5.21E-4	3.07E-2	4.04E-2	2.16	2.16
B[j]F	3.68E-4	7.40E-4	4.05E-2	6.33E-2	2.25	2.51
B[c]Phe	4.49E-7	1.07E-6	6.21E-5	7.51E-5	4.64E-3	3.76E-3
B[e]P	5.15E-7	6.30E-7	3.71E-5	8.17E-5	2.27E-3	2.86E-3
DMBA	5.41E-6	1.30E-5	4.71E-2	3.98E-2	0.46	0.9
1-MePyr	2.07E-6	2.82E-6	4.80E-5	7.20E-5	8.54E-3	6.33E-3
DB[ac]A	1.92E-4	4.23E-4	3.53E-2	7.80E-2	1.75	2.78
Pic	4.11E-5	5.54E-5	1.90E-3	5.20E-3	0.12	0.25

<sup>a</sup> ni, no induction observed.

# Summary – Nuclear receptors

- Important physiological functions,
- Important roles in pathologies and chemical toxicity (**ENDOCRINE DISRUPTION**)
- NRs with well studied roles in toxicity: **ER and AhR**
  - Other NRs (AR, RAR/RXR, ThR) – important but less explored
- All NRs share similar structure and mechanisms of action
  - Act as direct **transcription factors** on DNA
- Natural ligands of NRs are small lipophilic hormones
  - steroids, thyroids, retinoids
  - Various regulatory functions
  - Role in toxicity: NR interact with **structurally similar xenobiotics**
- **Various mechanisms beyond the toxicity**
  - Adverse are both STIMULATIONS and INHIBITIONS **directly at the receptor site** (e.g. “anti-androgenicity”)
  - **Additional mechanisms** –in blood (Thyroids), metabolism (Thyroids) clearance (Retinoids), heterodimerization and transport of hormones, “crosstalk” of different NRs
- **Other key information to remember**
  - **REPORTER GENE ASSAYS** (principle, use, what is CALUX?)
  - Characterization of chemical “toxic potentials”
    - General concept of “**REPs**” (valid for activation of all NRs)
    - Specifically for AhR - concept of **TEFs / TEQs**