

Discussion

Several independent lines of evidence implicate PPAR δ in psoriasis. PPAR δ is highly, and specifically upregulated in psoriasis. The activity profile of this nuclear hormone receptor includes anti-apoptotic and pro-angiogenic effects, as well as regulation of keratinocyte differentiation. PPAR δ is induced by TNF α , a central mediator of the inflammatory response in psoriasis. Its interaction partners FABP5 and CRABP2 are up-regulated in psoriasis, as well as a large group of dysregulated genes in psoriasis lesions *in vivo* related to PPAR δ function (Romanowska *et al.*, 2007). In this thesis, it is shown that PPAR δ enhances keratinocyte proliferation and that it directly induces HB-EGF, suggesting a role for PPAR δ as a pathogenic factor in psoriasis. Furthermore, two regulatory aspects of PPAR δ activity in keratinocytes have been defined: its independence of p65/RelA activity and localization (fig.5), and its expression independent of canonical Wnt signalling (fig.7). HB-EGF as a direct PPAR δ target gene represents a highly relevant pathogenetic factor for the disease since it drives keratinocyte proliferation, regulates wound healing, and induces epidermal hyperplasia, thus replicating important elements of the psoriatic phenotype *in vivo* (Zheng *et al.*, 2003; Kimura *et al.*, 2005; Shirakata *et al.*, 2005).

The role of PPAR δ on proliferation is, in fact, highly controversial and while recently it has been demonstrated that activation of PPAR δ induces endothelial cell proliferation and angiogenesis (Piqueras *et al.*, 2007), other recent papers report a growth-inhibitory effect (Burdick *et al.*, 2007). In this work, however, using primary adult epidermal human keratinocytes and two different PPAR δ synthetic ligands a growth-stimulatory effect was observed. Since the stimulatory time period used was seven days, the observed increase in cell number is highly unlikely to result exclusively from inhibited apoptosis. Therefore, it appears that PPAR δ activation in human keratinocytes indeed enhances proliferation.

Mechanistically, PPAR δ may act as an antagonist to other nuclear hormone receptor heterodimers. Thus, the RXR/RAR heterodimer activates, rather than inhibits apoptosis (Chiba *et al.*, 1997; Monczak *et al.*, 1997). Another competitive antagonism may be exerted toward PPAR γ since activation of this isoform directly inhibits STAT3 (Wang *et al.*, 2004) which, when overexpressed, causes a psoriasis-like phenotype *in vivo* (Sano *et al.*, 2005). Furthermore, the anti-apoptotic activity of PPAR δ may be most

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pronounced in the context of type 1 interferon activity since PPAR δ is expressed in dendritic cells (Jakobsen et al., 2006).

Apart from keratinocyte proliferation, the activation of type 1 IFN signaling and the persistence of activated CD8⁺ T cells in psoriatic epidermis are additional key features of this complex disease. In fact, PPAR δ has been identified as a target gene of type 1 IFN in T cells, where PPAR δ is required for protection from growth factor deprivation-induced apoptosis, but not from Fas – induced apoptosis (al Yacoub *et al.*, 2007). PPAR δ may exert its pathogenic function in part by antagonizing PPAR γ (Zuo *et al.*, 2006). Consistent with this hypothesis, PPAR γ has a pro-apoptotic effect in T cells (Harris & Phipps, 2001, 2002), and activation of PPAR γ has an inhibitory effect on psoriasis whereas this is not the case with PPAR δ activation (Kuenzli & Saurat, 2003; Malhotra *et al.*, 2005).

The genes involved in fatty acid signalling as a group constitute a disease-specific determinant of PPAR δ activity in psoriasis. This unexpectedly large group of genes positions intermediary metabolism as a central aspect of the disease, connected to, but distinct from its inflammatory and regenerative nature. Thus, increased body mass index is an independent risk factor for psoriasis (Naldi et al., 2005) and may have an effect on disease severity (Marino et al., 2004), as well as TNF α -related inflammatory activity (Hamminga et al., 2006). Since the prevalence of metabolic syndrome is increased in psoriasis (Sommer et al., 2006), a combination of insulin resistance, obesity, or chronic inflammation may trigger the expression of PPAR δ , which in turn contributes to a non-terminated regenerative skin phenotype. This disease mechanism would be expected to be aggravated by acute inflammation, or stress via the induction of PPAR δ by TNF α and stress-activated kinase (Tan et al., 2001). Clinically, these factors are precisely the most potent triggers of disease flares. Thus, activation of PPAR δ in psoriasis offers a pathogenetic concept unifying various clinical aspects as well as transcriptional changes in psoriasis. Therapeutically, since caloric restriction can decrease the expression level of PPAR isoforms (Masternak et al., 2005), trials to this end appear warranted to explore the efficacy of caloric restriction as a treatment option in appropriately selected psoriasis patients. In fact, a recent report suggests that caloric restriction indeed has a favorable effect on psoriasis (Gisondi *et al.*, 2007). Conversely, currently on-going trials employing PPAR δ agonists for the treatment of metabolic syndrome and obesity should be carefully scrutinized for increased incidence of psoriasis.

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Additionally, it should be pointed out that the PPAR δ gene is located 4.2 Mb telomeric of the putative PSORS1 locus at HLA-C on chromosome 6p21.2. Since earlier genome-wide scans were performed using microsatellites located actually closer to the PPAR δ locus than to HLA-C and yielding a positive signal (Nair *et al.*, 1997; Trembath *et al.*, 1997; Enlund *et al.*, 1999), PPAR δ formally constitutes a candidate susceptibility gene for the disease.

The upregulation and activity of PPAR δ in lesional psoriasis suggests how the psoriasis-like phenotype in K14-VEGF transgenic mice relates to the human disease since VEGF is a target gene of PPAR δ (Xia *et al.*, 2003; Sano *et al.*, 2005). It is also intriguing that, in contrast to human skin, PPAR δ is not expressed in adult interfollicular epidermis, perhaps explaining why psoriasiform dermatitis does not occur spontaneously in mice. Although many various murine phenotypes have been proposed to be “psoriasis-like” none of these so far has reproduced the complex psoriatic phenotype. Availability of a suitable animal model of psoriasis would be of importance to the research into the disease pathogenesis. It could be hypothesized that overexpression of PPAR δ *in vivo* would generate a phenotype resembling psoriasis with a proven link to the pathogenesis of the human disease. Accordingly, the lentiviral construct able to facilitate an inducible overexpression of functional, transcriptionally active PPAR δ would be suitable to generate a transgenic mouse line.

The 5LN-33 CAM-PPAR δ /pIGETOn plasmid facilitates the expression of a VP16- PPAR δ fusion protein. The VP16 fragment, in addition to ensure transcription factor activity, allows easy monitoring of the transgene expression level and its intracellular localization. Native PPAR δ is imported into nucleus, but very little is known about the nuclear localizing sequence (NLS) of this protein. Based on the consensus sequence proposed by Chelsky *et al.* (Chelsky *et al.*, 1989): Lys-Arg/Lys-X-Arg/Lys two clusters of basic amino acids, separated by a spacer of 12 amino acids within the hinge region could be recognized as responsible for PPAR δ nuclear translocation (aa 179-180 and 193-197). As the nuclear translocation of native PPAR δ upon its activation observed in human primary keratinocytes (figure 4) is not very efficient, engineering of an artificial NLS sequence may be considered beneficial to investigate PPAR δ function *in vivo*.

Another problem, which has to be overcome during the generating of transgenic mice line is the considerable leakiness of the tetracycline-regulated gene switches. Empirical studies are necessary to investigate whether the basal transgene expression in the absence of Dox (so called “leakiness”) of the 5LN-33 CAM-PPAR δ /pIGETOn

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construct would influence embryo development or viability *in vivo*. If that would be the case, the tightness of the TetOn system could be substantially improved by complementing transcriptional activators with antagonizing repressors such as tTS-H4 (Bockamp *et al.*, 2007) or tTRKRAB (Szulc *et al.*, 2006).

In closing, the data presented in this thesis strongly suggest a role of PPAR δ in the pathogenesis of psoriasis and lay the groundwork to address this question *in vivo* through the generation of transgenic mice.