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1 Post-transcriptional regulation of the inflammatory marker 2 C-reactive protein by the RNA-binding protein HuR and miR-637 3 4 Yoonseo Kim<sup>1</sup>, Nicole Noren Hooten<sup>1</sup>, Douglas F. Dluzen<sup>1</sup>, Jennifer L. Martindale<sup>2</sup>, 5 Myriam Gorospe<sup>2</sup> and Michele K. Evans<sup>1,3</sup> 6 <sup>1</sup>Laboratory of Epidemiology and Population Sciences, <sup>2</sup> Laboratory of Genetics, National Institute on 7 Aging, National Institutes of Health, 251 Bayview Boulevard, Baltimore, MD 21224 8 9 10 Running title: Post-transcriptional regulation of CRP 11 <sup>3</sup> Correspondence: 12 Michele K. Evans, M.D. 13 14 Deputy Scientific Director 15 National Institute on Aging 16 National Institutes of Health 17 Baltimore, MD 21224 E-mail: me42v@nih.gov 18 Phone: 410-558-8573; Fax: 410-558-8268 19 20 Keywords: CRP, microRNA, IL-6, inflammation, CVD, aging, RNA binding proteins 21

Abstract

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23	C-reactive protein (CRP), an acute phase plasma protein, is a major component of inflammatory reactions
24	functioning as a mediator of innate immunity. It has been widely used as a validated clinical biomarker
25	of the inflammatory state in trauma, infection, and age-associated chronic diseases including cancer and
26	cardiovascular disease (CVD). Despite this, the molecular mechanisms that regulate CRP expression are
27	not well understood. Given that the CRP 3'-untranslated region (UTR) is long and AU-rich, we
28	hypothesized that CRP may be regulated post-transcriptionally by RNA-binding proteins (RBP) and by
29	microRNAs. Here, we found that the RBP HuR bound directly to the CRP 3'UTR and affected CRP
30	mRNA levels. Through this interaction, HuR selectively increased CRP mRNA stability and promoted
31	CRP translation. Interestingly, treatment with the age-associated inflammatory cytokine IL-6 increased
32	binding of HuR to CRP mRNA, and conversely, HuR was required for IL-6-mediated up-regulation of
33	CRP expression. In addition, we identified miR-637 as a microRNA that potently inhibited CRP
34	expression in competition with HuR. Taken together, we have uncovered an important post-
35	transcriptional mechanism that modulates expression of the inflammatory marker CRP, which may be
36	utilized in the development of treatments for inflammatory processes that cause CVD and age-related
37	diseases.
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### Introduction

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Inflammatory processes and their inherent regulatory controls are critical for the immune response to injury and pathogens throughout the lifespan. However, inflammation has now been identified as an important underlying factor in many chronic diseases including cardiovascular disease (CVD), diabetes mellitus, cancer and metabolic disorders. Age itself is a critical factor in the development of the inflammatory state and risk for these conditions. This age-associated inflammatory state, known as inflammaging, is defined as a low-grade, sterile inflammation state that occurs with age and characterized by serum elevations in pro-inflammatory cytokines including interleukin-6 (IL-6) and tumor necrosis factor  $\alpha$  (TNF $\alpha$ ) as well as the acute-phase reactant C-reactive protein (CRP) (1). Given the incidence, morbidity, and mortality of inflammation-based chronic disease, pro-inflammatory molecules are avidly studied, including CRP.

CRP, a pentraxin protein, is an established marker of acute phase reactions (2). It is an important inflammatory biomarker that is influenced by the action of numerous activated cytokines such as IL-6, IL- $1\beta$  and TNF $\alpha$  (3, 4). It is well-established that CRP and IL-6 circulating levels correlate in humans (5, 6). It has been widely used as a validated clinical biomarker of the inflammatory state and an independent predictor of cardiovascular disease. There is some evidence that CRP is not only a biomarker of cardiovascular and metabolic disease, but also a specific risk factor for disease with some data supporting the idea that CRP is an active participant in atherogenesis and events at the endothelium (7). In diabetes, CRP contributes to the development of insulin resistance and may thus be an etiologic factor in diabetes mellitus type 2, especially in the elderly (8). In cancer, CRP may play any of three possible roles: as a marker of cancer susceptibility in the setting of chronic inflammation, as a marker of occult cancer, or as a causal factor (9). Currently, anti-inflammatory clinical trials in the setting of cardiovascular disease and other inflammatory conditions focus on modulating CRP production by inhibiting TNFα and IL-6, thereby reducing hepatic production of the protein (10). Even though CRP plays a central role in aging and age-related disease, most of the molecular mechanisms that regulate CRP expression are not known.

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Several studies have focused on the transcriptional regulation of CRP. The CRP promotor contains consensus sequences for the transcription factors STAT3 and C/EBP\(\beta\), which bind and activate CRP transcription downstream of IL-6 signaling (11-14). In addition, it has been shown that NF-kB p50 and Oct-1 bind to the CRP gene promoter via a nonconsensus κB site, which also overlaps with the proximal C/EBP site (15, 16). IL-1 $\beta$ , which alone does not induce CRP expression in human hepatoma Hep3B cells, synergistically enhances the effects of IL-6 by activating the transcription factor NF-κB (17, 18). The HNF-1 and HNF-3 transcription factors are also involved in regulating CRP expression via IL-6 (12, 19). Although the transcriptional modulation of CRP has been explored, we have limited knowledge of the post-transcriptional mechanisms that regulate CRP expression. Mammalian cells regulate gene expression robustly via post-transcriptional mechanisms

controlled by RNA-binding proteins and microRNAs (miRNAs), two types of major etiologic factors in disease (20, 21). In addition, these factors are being evaluated for the diagnosis and management of disease. The human antigen R (HuR) is a ubiquitously expressed RBP belonging to the Hu/Elav family that modulates the stability, translation and localization of subsets of mRNAs by interacting with uridylate (U)-rich or adenylate-uridylate (AU)-rich elements in their 3'-untranslated regions (UTRs) (22, 23). By regulating the expression of specific sets of proteins, HuR critically influences a variety of processes such as cell proliferation and survival, as well as the immune and stress responses (24, 25). HuR modulates inflammatory responses by promoting the expression of pro-inflammatory proteins such as COX-2, IL-8, TGF-β and TNF-α and by inhibiting the expression of anti-inflammatory proteins such as IL-10 (26, 27). HuR is implicated in inflammatory diseases including rheumatoid arthritis, asthma, and inflammatory bowel disease as well as in cardiovascular disease, cancer, and neurodegenerative diseases. HuR also plays a role in cellular senescence and vascular aging by controlling the turnover and/or translation of mRNAs encoding SIRT1, TNF-α, ICAM1, and VCAM1 (28-30).

miRNAs are small non-coding RNAs that modulate gene expression post-transcriptionally by binding to target mRNAs bearing regions of partial complementarity with the miRNA (31). By affecting the expression of target mRNAs, miRNAs regulate a variety of important processes including cell

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CVD, neurodegeneration, and metabolic diseases (34). Given the fact that the CRP 3'UTR contains AUrich elements, we hypothesized that post-transcriptional regulatory factors bind and regulate CRP expression. Here, we present evidence that CRP expression is regulated via a competitive interaction between the RBP HuR and miR-637 with the CRP 3'UTR. Materials and Methods Cell Culture and small RNA transfection. HeLa cells were grown in Dulbecco's modified Eagle's medium (DMEM, Invitrogen) supplemented with 10% fetal bovine serum (FBS). HepG2 cells were maintained in MEM containing 10% FBS. Where indicated, cells were treated with 50 ng/ml IL-6 (R & D Systems), 2 µg/ml actinomycin D (EMD Millipore), or vehicle control (PBS or DMSO, respectively). Control small interfering RNA (Ctrl siRNA) and HuR siRNA (5'-AAGAGGCAATTACCAGTTTCA-3') were obtained from Qiagen. Pre-miRNA precursor control and miR-637 and anti-miR miRNA inhibitor control and miR-637 were purchased from Ambion. All siRNA, miRNA and plasmids were transfected using either Lipofectamine-2000 (Invitrogen) or Lipofectamine-RNAiMAX (Invitrogen). RNA and protein were isolated from the cells forty eight hours after transfection. Ribonucleoprotein immunoprecipitation assay. For ribonucleoprotein immunoprecipitation (RIP), HepG2 cells or HeLa cells (24 hrs after transfection with miR-637; Fig. 5B) were lysed in 20 mM Tris-HCl pH 7.5, 100 mM KCl, 5 mM MgCl<sub>2</sub> and 0.5 % NP-40 for 10 min on ice and centrifuged at 10,000 g for 15 min at 4°C. The supernatants were incubated with mouse IgG agarose beads (Sigma) and coated with anti-HuR (Santa Cruz Biotechnology) or with normal mouse IgG (Santa Cruz Biotechnology)

proliferation, cellular senescence and inflammation (32, 33) and various age-related diseases such as

antibodies for 1 h at 4°C. After repeated washing with ice-cold NT2 buffer (50 mM Tris-HCl pH 7.5, 150

mM NaCl, 1 mM MgCl<sub>2</sub>, 0.05% NP-40), the complexes were incubated with RNase-free DNase I for 10

120 min at 30°C and subsequently with 0.1% SDS- 0.5 mg/ml proteinase K for 15 min at 55°C. The RNA 121 from the IP samples was extracted using acidic phenol, precipitated in ethanol, and analyzed by RT-qPCR. 122 123 RNA isolation and RT-qPCR analysis. Total RNA was isolated from cells using TRIzol (Invitrogen) 124 according to the manufacturer's instructions. After reverse transcription (RT) using random hexamers 125 (Invitrogen) and SSII reverse transcriptase (Invitrogen), the abundance of transcripts were assessed by 126 quantitative PCR (qPCR) analysis using the 2x SYBR Green Master Mix (Applied Biosystems). 127 QuantiMir RT kit (System Biosciences) was used for cDNA synthesis for miRNAs, U6 snRNA and 128 snoRNAs. RT-qPCR analysis was performed on Applied Biosystems model 7500 Real-Time PCR 129 machine. The following primer pairs were used (forward and reverse, respectively, in each case): 130 AGACATGTCGAGGAAGGCTTTT and TCGAGGACAGTTCCGTGTAGAA for CRP 131 GTGACATCGGGAGAACGAAT and GCGGTCACGTAGTTCACAAA for ELAVL1 (HuR), 132 GCTCCTCCTGTTCGACAGTCA and ACCTTCCCCATGGTGTCTGA for GAPDH, 133 CCCTATCAACTTTCGATGGTAGTCG and CCAATGGATCCTCGTTAAAGGATTT for 18S, AGATGGTCAAGGTCGCAAGCT and GGGCATATCCTACAACAAACTTGTC for HPRT1, 134 135 ATTTGGGTCGCGGTTCTTG and TGCCTTGACATTCTCGATGGT for UBC, TACAAGTACCTCACCGCTTGGT and TGATCTTGTCTTGGTGCTCGTA for Renilla (RL), 136 CTAAGAAGGCCTGCAGAAGAT and AAGCCCTGGTAGTCGGTCTTAG for Firefly (FL), To 137 measure the abundance of miRNAs, the following forward primers were used: 138 GCGATAACTGACGAAGACTAC for RNU49, TTAAACCACCAAGATCGCTGA for RNU24, 139 140 GATATCACTGTAAAACCGTTCC for U47, ACTGGGGGCTTTCGGGCTCTGCGT for miR-637, 141 CACCACGTTTATACGCCGGTG for U6. The universal primer supplied by QuantMir RT kit was used 142 as reverse primer. For PBMCs analysis, HuR expression was normalized to the average of HPRT and 143 UBC expression using gene specific primers, miR-637 expression was normalized to the average of 144 snoRNAs RNU24, RNU49 and U47.

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Biotin pull-down analysis. The CRP 3'UTR fragments a,b,c and d were amplified from the psiCHECK2 147 luciferase vectors containing the respective 3'UTRs using primers that contained the T7 RNA polymerase 148 promoter sequence (T7, 5'-CCAAGCTTCTAATACGACTCACTATAGGGAGA-3') (35). After 149 purification of the template PCR products, biotinylated transcripts were synthesized using the MaxiScript 150 T7 kit (Ambion). Whole-cell lysates were incubated with 1 µg of purified biotinylated transcripts for 1 hr 151 at room temperature and then complexes were isolated with streptavidin-coupled Dynabeads M-280 152 Streptavidin (Invitrogen). The proteins present in the pulldown material were analyzed by 153 immunoblotting with anti-HuR antibodies (Santa Cruz Biotech). The biotinylated GAPDH 3'UTR was 154 used as a negative control. The following primers pairs were used: 155 (T7)AGCTGTGGGTCCTGAAGGTA and AAGTAAACAGGGGCTTTATT for fragment (a), (T7)AGCTGTGGGTCCTGAAGGTA and AGAAATTATCTCCAAGATCT for fragment (b), 156 157 (T7)GATAATTTCTTACCTCACAT and ATTTATACCTAGTGCTTCAT for fragment (c), 158 (T7)ATGAAGCACTAGGTATAAAT and AAGTAAACAGGGGCTTTATT for fragment (d), 159 (T7)CCTCAACGACCACTTTGTCA and GGTTGAGCACAGGGTACTTTATT for fragment GAPDH 160 3'UTR. 161 162 3'UTR luciferase reporter assays. The cDNA fragments corresponding to the entire 3'UTR and partial 163 3'UTR of human CRP mRNAs were amplified by PCR using specific primers. After XhoI and NotI 164 digestion, the PCR product was cloned downstream of the Renilla open reading frame of the psiCHECK2 165 reporter plasmid. The psiCHECK2-CRP (3'UTR-Mut) construct containing specific point mutations (CC 166 to GG) in the miR-637 binding site was generated using the QuickChange Site-Directed Mutagenesis Kit 167 (Stratagene) following the manufacturer's instructions. For Fig. 1E, 24 hrs after transfection with 200 ng 168 of the reporter constructs, RIP assays were performed as described above with the exception that 169 complexes were incubated with RNase-free DNase I for 1 hr at 30°C. HuR binding to the ectopic luciferase transcripts was determined by RT-qPCR analysis using primers specific for Renilla luciferase 170

(RL) and Firefly luciferase (FL) mRNAs. HeLa cells were transfected with 100 ng of the indicated

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172 3'UTR luciferase reporter constructs and transfected again 24 hrs later with the siRNA of Ctrl and HuR or 173 miR-637. Twenty-four hrs after that, RL and FL activities were measured using the Dual-Luciferase® 174 Reporter Assay System (Promega) according to the manufacturer's instructions, or RL mRNA and FL 175 mRNA levels were determined by RT-qPCR analysis. 176 177 Polysome analysis. For polysome analysis, 48 h after transfection of HeLa cells with Ctrl siRNA or HuR 178 siRNA, cells were incubated with 100 µg/ml cycloheximide for 10 min and lysed with PEB (polysome 179 extraction buffer) containing 20 mM Tris-HCl pH 7.5, 100 mM KCl, 5 mM MgCl<sub>2</sub> and 0.5% NP-40. 180 Cytoplasmic lysates were fractionated by centrifugation through 10-50 % linear sucrose gradients and 181 divided into 12 fractions. The total RNA in each fraction was extracted with TRIzol (Invitrogen) and 182 analyzed by reverse transcription followed by RT-qPCR analysis. 183 184 Biotinylated miR-637 pulldown assays 185 Twenty-four hr after transfection of HeLa cells with biotinylated miR-637 or with biotinylated control 186 miRNA from Caenorhabditis elegans cel-miR-67 (biot-miR-637, biot-Ctrl-miR, both from GE 187 Healthcare Dharmacon), HeLa cells were lysed in 20 mM Tris-HCl pH 7.5, 100 mM KCl, 5 mM MgCl<sub>2</sub>, 188 0.3% NP-40, 50 U of RNAse Out (Invitrogen), and protease cocktail inhibitor (Roche Applied Science) 189 for 10 min on ice and centrifuged at 10,000 g for 10 min at 4°C. Streptavidin Dynabeads (Invitrogen) 190 were preincubated in lysis buffer with yeast tRNA (1 mg/ml) and BSA (1 mg/ml) overnight at 4°C. 191 Cytoplasmic lysates were added to the beads and incubated for 4 h at 4°C. After the beads were washed 192 with lysis buffer, the RNA bound to the beads and the RNA in cytoplasmic extracts were isolated using 193 TRIzol (Invitrogen) as described above and analyzed by RT-qPCR. 194

Western blot analysis. Cells were washed twice with 1× cold PBS and lysed using 2× Laemmli sample

buffer. The cell lysates were fractionated by SDS-PAGE, transferred onto membranes, and analyzed

using primary antibodies that recognized HuR (Santa Cruz Biotechnology), CRP (Millipore) or loading control β-actin (Santa Cruz Biotechnology). Following incubation with appropriate secondary antibodies, signals were detected by using enhanced chemiluminescence (ECL). Clinical Study Participants. A sub-cohort of women with either low ( $\leq 3 \text{ mg/L}$ ) or high ( $\geq 20 \text{ mg/L}$ )

hsCRP levels (n=15/group) were chosen from the Healthy Aging in Neighborhoods of Diversity across the Life Span (HANDLS) study of the National Institute on Aging Intramural Research Program (NIA IRP), National Institutes of Health (NIH). This study has been approved by the NIEHS Institutional Review Board (IRB). All study participants signed informed consent documents approved by the IRB. Previously, we examined CRP levels in a larger cohort containing these women (36) and here we analyzed a subset of these participants from whom we had also obtained and stored PBMCs. Nineteen white and 20 African American females with an average age of 49.7+8.1 years were used for this study. RNA was isolated from PBMCs using TRIzol (Invitrogen) according to the manufacturer's instructions. Serum IL-6 levels were quantified using Searchlight protein arrays from Aushon Biosystems (Billeria, MA).

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Results

The RNA-binding protein HuR interacts with the 3'UTR of CRP. To investigate whether CRP mRNA associated with HuR, we performed ribonucleoprotein (RNP) immunoprecipitation (RIP) assays using anti-HuR antibodies in parallel with control IgG antibodies using the human hepatoma cell line HepG2, chosen because hepatic cells are a major source of circulating CRP in vivo. The interaction of HuR with CRP mRNA was assessed by isolation of RNA in the IP material (Fig. 1A) followed by reverse transcription (RT) and quantitative real-time PCR (qPCR) analysis to measure the levels of CRP mRNA in the HuR IP relative to the control IgG IP. As shown in Fig. 1B, CRP mRNA was highly enriched (more than ~7-fold) in HuR IP samples compared with IgG IP samples. To identify the area(s) of interaction of endogenous HuR with ectopic CRP mRNA, partial in vitro-transcribed biotinylated RNAs

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spanning the CRP 3'UTR (Fig. 1C, schematic) were incubated with HeLa cell lysates. After pulldown using streptavidin-coated beads, the association of HuR with each biotinylated transcript was assessed by immunoblotting. As shown, HuR associated with CRP 3'UTR fragments a, b and d, and most strongly with fragment b. HuR did not bind to the negative control transcript, biotinylated GAPDH 3'UTR (Fig. 1C).

To confirm that HuR binds to the CRP 3'UTR in vivo, we used heterologous luciferase reporter plasmids (Fig. 1D) that expresses Renilla luciferase (RL) from constructs lacking or containing the CRP 3'UTR (psiCHECK2 or psiCHECK2-CRP 3'UTR). These plasmids also contain Firefly luciferase (FL), which served as an internal transfection control. We used RIP assays to test binding of HuR to the ectopically expressed luciferase transcripts. As shown, HuR selectively associated with RL mRNAs containing the CRP 3'UTR fragments a, b and d (Fig. 1E), further confirming our in vitro binding data.

To investigate if HuR regulates CRP mRNA stability and translation via the specific regions where it binds preferentially within the CRP 3'UTR (region b,d; Fig 1C), we first analyzed the luciferase reporter constructs. The ratio of RL/FL activity from each transfected reporter plasmid indicated that silencing HuR significantly decreased the levels of psiCHECK2-CRP 3'-a, b and d luciferase reporters while it did not affect the activity of the psiCHECK2-CRP 3'-c reporter (Fig. 2F). Consistent with the strong HuR binding in the biotin precipitation experiments (Fig. 1C), the most robust regulation of luciferase activity by HuR was mapped to CRP segment 3'-b (Fig. 1F). To verify if the individual HuR binding sites (a,b and d) regulate the stability and/or translation of the CRP mRNA, we examined the ratio of the reporter mRNA levels after silencing HuR. HuR silencing decreased the levels of RL mRNA expressed from psiCHECK2-CRP 3'-a, b and d, indicating that HuR primarily effects mRNA stability of these individual binding sites (Fig. 1G). Taken together, these data strongly suggest that HuR enhances CRP expression by associating with specific positive regulatory elements in the CRP 3'UTR to regulate *CRP* mRNA stability.

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tested whether HuR directly affected CRP expression by silencing HuR using specific HuR-directed small interfering (si) RNA. Silencing HuR decreased CRP mRNA and protein levels (Fig. 2A), indicating that HuR positively regulates CRP expression. Because HuR was previously shown to stabilize several target mRNAs (27) and the CRP 3'UTR reporter constructs in Fig. 1G, we investigated if HuR regulates endogenous CRP mRNA turnover. After silencing HuR in HeLa cells, actinomycin D was used to inhibit de novo transcription and the time needed for CRP mRNA to be reduced to 50% of its initial abundance (its half-life  $[t_{1/2}]$ ) was then calculated by measuring CRP mRNA levels using RT-qPCR, using 18S rRNA levels for normalization. We found that silencing HuR selectively lowered the half-life  $(t_{1/2})$  of CRP mRNA to ~6 h, compared to its half-life in Ctrl siRNA-transfected cells, which was far greater than 6 h. The half-life of GAPDH mRNA, encoding a housekeeping protein, was unaffected by HuR silencing (Fig. 2B). These data suggest that HuR enhances CRP expression at least in part by stabilizing CRP mRNA. In addition to stabilizing some target mRNAs, HuR also modulates the translation of several mRNAs (22). To investigate if HuR also affects CRP translation, we performed polysome analysis in HeLa cells expressing normal HuR levels or HuR levels reduced by silencing. The cytosolic fractions were centrifuged through sucrose gradients in order to separate ribosome components (40S and 60S, fractions 2 and 3), monosomes (single ribosomes, 80S, fraction 4), as well as low-molecular-weight (LMW, fractions 5-7) and high-molecular-weight (HMW, fractions 8-10) polysomes. From each of the twelve fractions obtained, RNA was extracted and the levels of CRP and GAPDH mRNAs were quantified by RT-qPCR analysis. The results showed that in control cells, CRP mRNA levels peaked at fraction 7 while HuR silencing showed a distinct leftward shift peaking at fraction 5, indicating that CRP mRNA formed on average smaller polysomes after silencing HuR (Fig. 2C). The distribution of the housekeeping GAPDH mRNA was the same between the two groups, indicating that silencing HuR specifically affected CRP mRNA translation. In sum, HuR increases CRP expression levels by both

HuR promotes CRP protein expression by regulating CRP mRNA stability and translation. We

stabilizing CRP mRNA and enhancing its translation.

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IL-6 upregulation of CRP is dependent on HuR. IL-6 is a potent mediator of inflammatory processes and it has been proposed that the age-associated increase in IL-6 accounts for some of the phenotypic changes observed with advancing age. IL-6 and CRP levels increase with age and are highly correlated (37). In addition, previous data have shown that IL-6 can upregulate CRP levels (14). Given this relationship, we hypothesized that HuR may contribute to the increased CRP mRNA expression in response to IL-6. To test this idea, we treated HepG2 cells with IL-6 and then performed HuR RIP assay. This analysis revealed that more HuR associated with CRP mRNA after treatment with IL-6 (Fig. 3A). To address whether HuR is required for IL-6-mediated upregulation of CRP, we silenced HuR and treated cells with IL-6 (Fig. 3B and 3C). HuR silencing significantly decreased CRP mRNA and protein levels in the presence of IL-6. In contrast, HuR mRNA and protein levels were not affected by IL-6 treatment. These findings indicate that IL-6-mediated upregulation of CRP is dependent on HuR. miR-637 interacts with the CRP mRNA. Recently, several studies showed that RBPs and miRNAs

bind and functionally regulate shared target mRNAs (21, 25, 35). Therefore in addition to HuR, it is likely that miRNAs also regulate CRP. Using TargetScan to test this possibility, we found that the CRP mRNA contains one predicted miR-637 site in its 3'UTR. To investigate whether miR-637 regulates CRP expression, we overexpressed miR-637 by transfecting the miR-637 precursor and found that this intervention decreased CRP mRNA and protein abundance (Fig. 4A and 4B), indicating that CRP levels can be modulated by miR-637. In contrast, decreasing the levels of endogenous miR-637 by transfection with a miR-637 antagomir (anti-miR-637) increased both CRP mRNA and CRP protein expression levels (Fig.4C and 4D). Similar results were also observed using a locked nucleic acid ((LNA)-antimir-637) (data not shown). For further analysis of the effects of miR-637 on CRP expression, we performed luciferase assays using miR-637 target reporter constructs bearing CRP 3'UTRs (Fig. 4E). We observed that miR-637 repressed luciferase activity from the psiCHECK2-CRP 3'UTR and fragment CRP 3'-c, which contains the predicted miR-637 site (Fig. 4E,F), but this effect is abolished when the miR-637 site

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was mutated (Fig. 4F). These results suggest that miR-637 reduces the expression levels of CRP by interacting with the CRP 3'UTR.

To confirm that miR-637 binds to CRP mRNA, we performed precipitations with a biotin-labeled miR-637 followed by RNA isolation and RT-qPCR analysis. Indeed, CRP mRNA was enriched in the biotin miR-637 pulldowns (Fig. 5A). Since RBPs can cooperate or compete with miRNAs to control gene expression either cooperatively or antagonistically (38, 39), and that both miR-637 and HuR interact with the CRP 3'UTR, we tested whether miR-637 and HuR might compete or work cooperatively to modulate expression of CRP. First, we examined whether silencing HuR affects miR-637 binding to CRP mRNA. Decreasing HuR levels significantly increased binding of biotin miR-637 to the CRP transcript (Fig. 5A). Second, we performed the reverse experiment, overexpressing miR-637 and examining HuR binding to CRP mRNA by RIP analysis. miR-637 overexpression significantly decreased HuR binding to CRP mRNA (Fig. 5B), indicating that HuR and miR-637 bind competitively to CRP mRNA.

Next, we examined the effect of HuR silencing on miR-637-induced repression of CRP expression. Silencing HuR additively repressed the miR-637-mediated repression of CRP expression as indicated by a decrease in the levels of CRP mRNA and protein in miR-637 overexpressed cells (Fig. 5C). In contrast, ectopic HuR overexpression inhibited the miR-637-mediated repression of CRP expression (Fig. 5D). In addition, we investigated if HuR and miR-637 competed to regulate CRP expression in response to IL-6 treatment. As shown in Fig.5E, overexpression of miR-637 or silencing HuR decreased CRP levels following IL-6 treatment. Simultaneous miR-637 overexpression and HuR silencing in cells had an additive effect on decreasing CRP abundance in response to IL-6. These findings suggest that HuR and miR-637 competitively regulate *CRP* mRNA.

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Individuals with high CRP have high levels of HuR and low levels of miR-637. In order to test whether HuR and miR-637 may affect CRP levels in vivo, we obtained peripheral blood mononuclear cells from participants from the HANDLS study that have either low (≤3 mg/L) or high (≥20 mg/L) circulating protein levels of hsCRP. HuR mRNA levels were higher and miR-637 levels were lower in individuals with high hsCRP, consistent with our in vitro data that HuR positively and miR-637 negatively regulated CRP expression (Fig. 6A and 6B). As previously reported, we found a positive relationship between circulating IL-6 levels and hsCRP levels (Fig. 6C).

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### Discussion

CRP has been well studied as an acute phase marker during infection and inflammation, and it is now also well known to have clinical and pathological significance as a marker of age-associated disease, most prominently for CVD. Although some mechanisms that regulate CRP transcription have been explored, whether CRP expression is regulated by post-transcriptional mechanisms has not been reported. Here, we found that HuR and miR-637 play key roles in the post-transcriptional regulation of CRP through the AUrich or U-rich elements in the CRP 3'UTR.

The RBP HuR, a well-established RNA-binding protein and post-transcriptional regulator, affects the expression of its target mRNAs by binding to specific AU- or U-rich elements in their 3'UTRs (22). Our results indicate that HuR interacts with CRP mRNA via the CRP 3'UTR and regulates CRP mRNA stability and translation. Notably, HuR binds to CRP mRNA after IL-6 treatment, indicating the importance of HuR in mediating IL-6-induced CRP expression. The fact that HuR regulates other proinflammatory proteins, such as COX-2, IL-8, TGF-β and TNF-α, suggests that HuR can serve as a master upstream modulator of inflammatory conditions (26, 27). These data indicate that HuR might be valuable as a therapeutic target for acute or chronic inflammatory diseases. Currently, anti-inflammatory agents under investigation are directed at the IL-1, TNFα and IL-6 pathways. Canakinumab and low-dose methotrexate lead to reductions in IL-6 and CRP (10); however, our findings that HuR is essential for IL-6-mediated upregulation of CRP suggest that HuR may be a promising target for design of therapeutic agents to reduce CRP levels in CVD, diabetes mellitus, and other inflammatory conditions. Nonetheless, given the untoward and unintended serious side-effects (heart failure and vascular complications)

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observed with anti-inflammatory agents that inhibit TNF-α and cyclooxygenase-2, it will be important to take into account the potential adverse events that may accompany modulating HuR function.

We also found that the miRNA miR-637 is able to inhibit the expression of CRP. miRNAs play a significant role in post-transcriptional gene regulation predominately by acting as repressors (40). miR-637, a primate-specific miRNA, was first identified from colorectal tumor tissue (41). While the biological function of miR-637 is still not fully understood, several targets such as osterix and collagen, type IV, alpha 1 (COL4A1) have been reported (42, 43). Decreased miR-637 expression was reported in four hepatocellular carcinoma cell lines; overexpression of miR-637 inhibited growth and enhanced apoptosis by suppressing expression of the autocrine leukemia inhibitory factor (LIF) (44), suggesting a tumor suppressor function for miR-637 in hepatocytes. Importantly, we found that miR-637 levels were lower in individuals with high circulating levels of hsCRP. These data indicate that miR-637 may have a direct role in modulating CRP levels in vivo, and that miR-637 may have an anti-inflammatory effect by decreasing circulating CRP levels. Future research is needed in order to fully investigate whether miR-637 targets other inflammatory pathways. It is possible that miR-637 can be used to lower levels of CRP in individuals at risk.

Here we report the binding of HuR and miR-637 to the CRP 3'UTR. Through the use of ectopic reporters, we found that the predominant sites where HuR interacted with and regulated CRP mRNA were the 780-1080 and 1441-2103 regions of the CRP 3'UTR, while the target site of miR-637 was located at the sequence spanning 1182-1204, directly in between these two segments. These findings suggest that HuR and miR-637 interact with different binding sites of the CRP 3'UTR. HuR and miR-637 modulated CRP mRNA in a functionally competitive manner: HuR promoted while miR-637 inhibited CRP expression. This result is consistent with other reports that HuR and miRNAs operate in opposite directions (23). For example, HuR inhibits miR-331-3p-mediated repression of ERBB2 expression (45) and miR-494-mediated repression of NCL expression (35). Also, HuR competes with miR-195 to regulate STIM1 mRNA (39) and suppresses miR-1192 to modulate HMGB1 mRNA (46). Although the specific mechanisms whereby HuR and miRNAs compete to regulate joint target mRNAs are not well

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understood, it is interesting to note that several competing miRNAs have binding sites near the HuR sites (47, 48), suggesting that HuR and miRNAs may compete via steric hindrance or local conformation changes of the mRNA.

IL-6 and CRP levels increase with age and are highly correlated (5, 6). Consistent with these findings, we found that IL-6 levels were higher in individuals with high hsCRP, regardless of age. Most significantly, in the small human cohort tested here, individuals with high levels of hsCRP also had high levels of HuR and low levels of miR-637, mirroring the correlations we found in cultured cells.

As inflammation is now understood to be an underlying etiologic factor in a number of different diseases, it is important to fully understand the mechanisms by which these inflammatory markers are regulated. Unraveling the factors that modulate CRP provides insight for understanding the factors that contribute to the low-grade inflammatory state of aging and will undoubtedly shed light on age-related chronic diseases. The design of primary and secondary prevention therapies and treatment modalities aimed at the process of inflammation is already successfully underway. However, the therapeutic agents mainly target upstream biomarkers. The role of CRP as both a risk factor and a biomarker warrants investigating its regulation by other molecular factors. We have discovered a post-transcriptional mechanism by which the RBP HuR and miRNA miR-637 modulate CRP expression downstream of IL-6 signaling. We have identified HuR and miR-637 as new factors that may play an integral role in the development of the inflammatory state, and may represent new valuable targets in the diagnosis, treatment, or prevention of inflammation and diseases with a major inflammatory component.

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- 401 References
- Franceschi C, Bonafe M, Valensin S, Olivieri F, De Luca M, Ottaviani E, De Benedictis G. 402 1.
- 403 2000. Inflamm-aging. An evolutionary perspective on immunosenescence. Ann N Y Acad Sci
- 908:244-254. 404
- 405 2. Pepys MB, Hirschfield GM. 2003. C-reactive protein: a critical update. Journal of Clinical
- 406 Investigation 111:1805-1812.
- 407 3. Volanakis JE. 2001. Human C-reactive protein: expression, structure, and function. Mol
- 408 Immunol **38:**189-197.
- 409 4. Ebersole JL, Cappelli D. 2000. Acute-phase reactants in infections and inflammatory diseases.
- Periodontol 2000 23:19-49. 410
- Harris TB, Ferrucci L, Tracy RP, Corti MC, Wacholder S, Ettinger WH, Jr., Heimovitz H, 5. 411
- 412 Cohen HJ, Wallace R. 1999. Associations of elevated interleukin-6 and C-reactive protein levels
- with mortality in the elderly. Am J Med 106:506-512. 413
- 414 6. Bermudez EA, Rifai N, Buring J, Manson JE, Ridker PM. 2002. Interrelationships among
- circulating interleukin-6, C-reactive protein, and traditional cardiovascular risk factors in women. 415
- Arterioscler Thromb Vasc Biol 22:1668-1673. 416
- 417 7. Salazar J, Martinez MS, Chavez M, Toledo A, Anez R, Torres Y, Apruzzese V, Silva C,
- 418 Rojas J, Bermudez V. 2014. C-reactive protein: clinical and epidemiological perspectives.
- Cardiol Res Pract 2014:605810. 419
- 8. Singh T, Newman AB. 2011. Inflammatory markers in population studies of aging. Ageing Res 420
- 421 Rev 10:319-329.
- 9. Allin KH, Nordestgaard BG. 2011. Elevated C-reactive protein in the diagnosis, prognosis, and 422
- cause of cancer. Crit Rev Clin Lab Sci 48:155-170. 423
- 10. Ridker PM, Luscher TF. 2014. Anti-inflammatory therapies for cardiovascular disease. Eur 424
- Heart J 35:1782-1791. 425

- 426 11. Zhang D, Sun M, Samols D, Kushner I. 1996. STAT3 participates in transcriptional activation of the C-reactive protein gene by interleukin-6. J Biol Chem 271:9503-9509. 427
- 12. Li SP, Goldman ND. 1996. Regulation of human C-reactive protein gene expression by two 428 synergistic IL-6 responsive elements. Biochemistry 35:9060-9068. 429
- 13. Nishikawa T, Hagihara K, Serada S, Isobe T, Matsumura A, Song J, Tanaka T, Kawase I, 430
- 431 Naka T, Yoshizaki K. 2008. Transcriptional Complex Formation of c-Fos, STAT3, and
- 432 Hepatocyte NF-1 Is Essential for Cytokine-Driven C-Reactive Protein Gene Expression. The
- 433 Journal of Immunology **180:**3492-3501.
- 14. Sun H, Zhang Y, Gao P, Li Q, Sun Y, Zhang J, Xu C. 2011. Adiponectin reduces C-reactive 434
- protein expression and downregulates STAT3 phosphorylation induced by IL-6 in HepG2 cells. 435
- Mol Cell Biochem 347:183-189. 436
- 437 15. Voleti B, Agrawal A. 2005. Regulation of Basal and Induced Expression of C-Reactive Protein
- 438 through an Overlapping Element for OCT-1 and NF-B on the Proximal Promoter. The Journal of
- 439 Immunology 175:3386-3390.
- 440 16. Cha-Molstad H, Young DP, Kushner I, Samols D. 2007. The interaction of C-Rel with
- C/EBPbeta enhances C/EBPbeta binding to the C-reactive protein gene promoter. Mol Immunol 441
- **44:**2933-2942. 442
- 17. 443 Agrawal A, Cha-Molstad H, Samols D, Kushner I. 2003. Overexpressed nuclear factor-kappaB
- can participate in endogenous C-reactive protein induction, and enhances the effects of 444
- C/EBPbeta and signal transducer and activator of transcription-3. Immunology 108:539-547. 445
- 446 18. Kramer F, Torzewski J, Kamenz J, Veit K, Hombach V, Dedio J, Ivashchenko Y. 2008.
- Interleukin-1beta stimulates acute phase response and C-reactive protein synthesis by inducing an 447
- NFkappaB- and C/EBPbeta-dependent autocrine interleukin-6 loop. Mol Immunol 45:2678-2689. 448
- 19. Toniatti C, Demartis A, Monaci P, Nicosia A, Ciliberto G. 1990. Synergistic trans-activation 449
- of the human C-reactive protein promoter by transcription factor HNF-1 binding at two distinct 450
- 451 sites. EMBO J 9:4467-4475.

- 452 20. Keene JD. 2007. RNA regulons: coordination of post-transcriptional events. Nat Rev Genet
- **8:**533-543. 453
- 21. Ciafre SA, Galardi S. 2013. microRNAs and RNA-binding proteins: a complex network of 454
- interactions and reciprocal regulations in cancer. RNA Biol 10:935-942. 455
- 22. Abdelmohsen K, Kuwano Y, Kim HH, Gorospe M. 2008. Posttranscriptional gene regulation 456
- 457 by RNA-binding proteins during oxidative stress: implications for cellular senescence. Biol Chem
- 458 **389:**243-255.
- 459 23. Srikantan S, Tominaga K, Gorospe M. 2012. Functional interplay between RNA-binding
- protein HuR and microRNAs. Curr Protein Pept Sci 13:372-379. 460
- 24. Castello A, Fischer B, Eichelbaum K, Horos R, Beckmann BM, Strein C, Davey NE, 461
- Humphreys DT, Preiss T, Steinmetz LM, Krijgsveld J, Hentze MW. 2012. Insights into RNA 462
- biology from an atlas of mammalian mRNA-binding proteins. Cell 149:1393-1406. 463
- 25. Abdelmohsen K, Srikantan S, Kuwano Y, Gorospe M. 2008. miR-519 reduces cell 464
- 465 proliferation by lowering RNA-binding protein HuR levels. Proc Natl Acad Sci U S A
- 466 **105:**20297-20302.
- Nabors LB, Gillespie GY, Harkins L, King PH. 2001. HuR, a RNA stability factor, is 467 26.
- expressed in malignant brain tumors and binds to adenine- and uridine-rich elements within the 3' 468
- 469 untranslated regions of cytokine and angiogenic factor mRNAs. Cancer Res 61:2154-2161.
- 27. 470 Srikantan S, Gorospe M. 2012. HuR function in disease. Front Biosci (Landmark Ed) 17:189-
- 205. 471
- 472 28. Rhee WJ, Ni CW, Zheng Z, Chang K, Jo H, Bao G. 2010. HuR regulates the expression of
- stress-sensitive genes and mediates inflammatory response in human umbilical vein endothelial 473
- cells. Proc Natl Acad Sci U S A 107:6858-6863. 474
- 29. Yi J, Chang N, Liu X, Guo G, Xue L, Tong T, Gorospe M, Wang W. 2010. Reduced nuclear 475
- export of HuR mRNA by HuR is linked to the loss of HuR in replicative senescence. Nucleic 476
- 477 Acids Res 38:1547-1558.

- 478 30. Wang W. 2014. HuR and post-transcriptional regulation in vascular aging. Sci China Life Sci
- 31. Krol J, Loedige I, Filipowicz W. 2010. The widespread regulation of microRNA biogenesis, 480
- function and decay. Nat Rev Genet 11:597-610. 481
- 32. Noren Hooten N, Fitzpatrick M, Wood WH, 3rd, De S, Ejiogu N, Zhang Y, Mattison JA, 482
- 483 Becker KG, Zonderman AB, Evans MK. 2013. Age-related changes in microRNA levels in
- 484 serum. Aging (Albany NY) 5:725-740.

**57:**863-866.

- 485 33. Olivieri F, Rippo MR, Monsurro V, Salvioli S, Capri M, Procopio AD, Franceschi C. 2013.
- MicroRNAs linking inflamm-aging, cellular senescence and cancer. Ageing Res Rev 12:1056-486
- 1068. 487

479

- 34. Dimmeler S, Nicotera P. 2013. MicroRNAs in age-related diseases. EMBO Mol Med 5:180-190. 488
- 35. Tominaga K, Srikantan S, Lee EK, Subaran SS, Martindale JL, Abdelmohsen K, Gorospe 489
- 490 M. 2011. Competitive regulation of nucleolin expression by HuR and miR-494. Mol Cell Biol
- 491 **31:**4219-4231.
- 492 36. Noren Hooten N, Ejiogu N, Zonderman AB, Evans MK. 2012. Association of oxidative DNA
- 493 damage and C-reactive protein in women at risk for cardiovascular disease. Arterioscler Thromb
- 494 Vasc Biol 32:2776-2784.
- 37. 495 Sesso HD, Wang L, Buring JE, Ridker PM, Gaziano JM. 2007. Comparison of interleukin-6
- and C-reactive protein for the risk of developing hypertension in women. Hypertension 49:304-496
- 310. 497
- 498 38. Xiao L, Cui YH, Rao JN, Zou T, Liu L, Smith A, Turner DJ, Gorospe M, Wang JY. 2011.
- Regulation of cyclin-dependent kinase 4 translation through CUG-binding protein 1 and 499
- 500 microRNA-222 by polyamines. Mol Biol Cell 22:3055-3069.
- 501 39. Zhuang R, Rao JN, Zou T, Liu L, Xiao L, Cao S, Hansraj NZ, Gorospe M, Wang JY. 2013.
- 502 miR-195 competes with HuR to modulate stim1 mRNA stability and regulate cell migration.
- 503 Nucleic Acids Res 41:7905-7919.

- 504 40. Breving K, Esquela-Kerscher A. 2010. The complexities of microRNA regulation: mirandering around the rules. Int J Biochem Cell Biol 42:1316-1329. 505
- 41. Cummins JM, He Y, Leary RJ, Pagliarini R, Diaz LA, Jr., Sjoblom T, Barad O, Bentwich Z, 506 Szafranska AE, Labourier E, Raymond CK, Roberts BS, Juhl H, Kinzler KW, Vogelstein B, 507
- 508 Velculescu VE. 2006. The colorectal microRNAome. Proc Natl Acad Sci U S A 103:3687-3692.
- 509 42. Zhang JF, Fu WM, He ML, Wang H, Wang WM, Yu SC, Bian XW, Zhou J, Lin MC, Lu G,
- 510 Poon WS, Kung HF. 2011. MiR-637 maintains the balance between adipocytes and osteoblasts
- 511 by directly targeting Osterix. Mol Biol Cell 22:3955-3961.
- 512 43. Lisse TS, Chun RF, Rieger S, Adams JS, Hewison M. 2013. Vitamin D activation of
- functionally distinct regulatory miRNAs in primary human osteoblasts. J Bone Miner Res 513
- **28:**1478-1488. 514
- 44. Zhang JF, He ML, Fu WM, Wang H, Chen LZ, Zhu X, Chen Y, Xie D, Lai P, Chen G, Lu 515
- G, Lin MC, Kung HF. 2011. Primate-specific microRNA-637 inhibits tumorigenesis in 516
- 517 hepatocellular carcinoma by disrupting signal transducer and activator of transcription 3 signaling.
- 518 Hepatology 54:2137-2148.
- 45. Epis MR, Barker A, Giles KM, Beveridge DJ, Leedman PJ. 2011. The RNA-binding protein 519
- 520 HuR opposes the repression of ERBB-2 gene expression by microRNA miR-331-3p in prostate
- 521 cancer cells. J Biol Chem 286:41442-41454.
- 46. Dormoy-Raclet V, Cammas A, Celona B, Lian XJ, van der Giessen K, Zivojnovic M, 522
- Brunelli S, Riuzzi F, Sorci G, Wilhelm BT, Di Marco S, Donato R, Bianchi ME, Gallouzi IE. 523
- 524 2013. HuR and miR-1192 regulate myogenesis by modulating the translation of HMGB1 mRNA.
- 525 Nat Commun **4:**2388.
- 47. Lebedeva S, Jens M, Theil K, Schwanhausser B, Selbach M, Landthaler M, Rajewsky N. 526
- 2011. Transcriptome-wide analysis of regulatory interactions of the RNA-binding protein HuR. 527
- 528 Mol Cell 43:340-352.

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Student's t-test.

529 48. Mukherjee N, Corcoran DL, Nusbaum JD, Reid DW, Georgiev S, Hafner M, Ascano M, Jr., 530 Tuschl T, Ohler U, Keene JD. 2011. Integrative regulatory mapping indicates that the RNA-531 binding protein HuR couples pre-mRNA processing and mRNA stability. Mol Cell 43:327-339. 532 533 Figure Legends 534 Fig 1. HuR binds to the CRP 3' UTR. (A) Left, HuR immunoprecipitates from HepG2 cells were analyzed 535 by immunoblotting. HuR (arrowhead), immunoglobulin heavy chain (HC) and light chain (LC), and 536 molecular weight (MW) markers are indicated. (B) RIP followed by RT-qPCR analysis was used to 537 measure the enrichment of CRP mRNA in HuR IP compared to IgG IP in HepG2 cell lysates, normalized 538 to GAPDH mRNA levels in each IP reaction. (C) Top, schematic of the CRP 3'UTR and the different 539 biotinylated RNAs synthesized for use in biotin pulldown analysis are shown as Full length, a, b, c and d. 540 Bottom, the indicated biotinylated CRP RNAs or control GAPDH 3'UTR were incubated with HeLa cell 541 lysates and HuR was detected by immunoblotting with anti-HuR antibodies. (D) Schematic of the CRP 542 3'UTR dual luciferase reporters. (E) HeLa cells transfected with the luciferase constructs were analyzed 543 by RIP and RT-qPCR analysis to measure the enrichment of Renilla luciferase (RL) mRNA in HuR IPs 544 compared to that in IgG IPs. RL mRNA levels in each IP were normalized to firefly luciferase (FL) 545 mRNA levels and to GAPDH. (F) After transfecting HeLa cells with Ctrl or HuR siRNAs, cells were 546 then transfected with either psiCHECK2 or the psiCHECK2-CRP (3'UTR) reporters as indicated. The 547 ratio of RL to FL (RL/FL) was normalized to the parent vector (psiCHECK2) and then normalized to 548 luciferase activity in Ctrl siRNA-transfected cells. (F) Cells were transfected as in (E) and the ratio of RL mRNA/FL mRNA for each reporter construct was quantified by RT-qPCR. Histograms represent the 549

mean + SEM from three independent experiments. \*p<0.05, \*\*p<0.01 compared to Ctrl siRNA by

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\*\*p<0.01 by Student's t-test.

and HepG2 cells with either Ctrl siRNA or HuR siRNA, CRP mRNA levels were measured by RT-qPCR analysis. Right, transfected HepG2 cells or HeLa cells were assessed by immunoblotting using anti-CRP, anti-HuR and anti-β-actin antibodies as a loading control. CRP protein levels were quantified from immunoblots and normalized to the levels of actin. Histograms represent the mean + SEM from three independent experiments. \*p<0.05, \*\*p<0.01 compared to Ctrl siRNA by Student's t-test. (B) HeLa cells transfected as in (A) were treated with actinomycin D (2 µg/ml), and RNA was isolated at the times indicated. The levels of CRP mRNA and GAPDH mRNA levels were assessed by RT-qPCR and normalized to 18S rRNA. The half-lives (t<sub>1/2</sub>) of CRP and GAPDH mRNAs were quantified by measuring the time needed for the transcript levels to reach 50% of their original abundance at time 0 hr. (C) HeLa cells transfected with either Ctrl siRNA or HuR siRNA were fractionated into cytoplasmic extracts through sucrose gradients. The arrow indicates the direction of sedimentation. Small (40S) and large (60S) ribosomal subunits and monosomes (80S) in fractions 2-4, and progressively larger polysomes from low to high molecular weight (LMW and HMW, respectively) in fractions 6-12 are shown in the left panel. The distribution (%) of CRP and GAPDH mRNAs was quantified by RT-qPCR analysis of RNA isolated from 12 gradient fractions. Fig 3. IL-6-mediated upregulation of CRP is dependent on HuR. (A) After IL-6 (50 ng/ml) treatment for 15 min, RNP IP was performed using HuR or IgG antibodies. CRP mRNA was measured by RT-qPCR analysis. (B) HepG2 cells were transfected with either Ctrl siRNA or HuR siRNA and treated with or without IL-6 for 24 hrs. The mRNA and protein levels of CRP and HuR were examined by RT-qPCR (B) and immunoblotting (C). CRP protein levels were quantified from immunoblots and normalized to β-

Fig 2. HuR promotes CRP mRNA stability and translation. (A) Left, 48 hrs after transfection of HeLa

actin control. The histograms represent the mean + SEM from three independent experiments. \*p<0.05,

Fig 4. miR-637 interacts with CRP mRNA. (A) 48 hrs after transfection with miR-Ctrl or with miR-637, the levels of miR-637 (left) and CRP mRNA (right) were measured by RT-qPCR analysis or (B) protein levels were assessed by immunoblotting with anti-CRP and anti-β-actin antibodies, as a loading control. CRP protein levels were quantified from immunoblots and normalized to β-actin. (C) HeLa cells were transfected with the antisense (AS) miR-637 or control miRNA. After 72 hrs, the levels of miR-637 (left) and CRP mRNA (right) were measured by RT-qPCR analysis or (D) the protein level of CRP and control β-actin were analyzed by immunoblotting. CRP protein levels were quantified from immunoblots and normalized to β-actin. (E) Schematic of psiCHECK2-CRP dual luciferase reporters. Red bar, predicted miR-637 binding site. (F) 24 hrs after transfecting HeLa cells with miR-637, cells were transfected with different CRP 3'UTR luciferase reporter plasmids and luciferase activity was measured (RL/FL). The histograms represent the mean + SEM from three independent experiments. \*p<0.05, \*\*p<0.01, \*\*\**p*<0.001 by Student's t-test.

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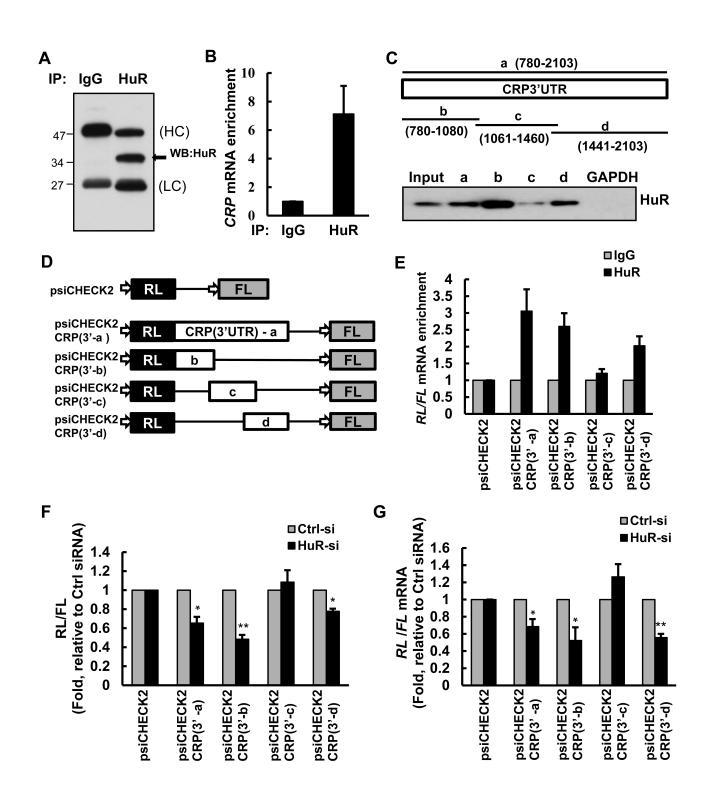
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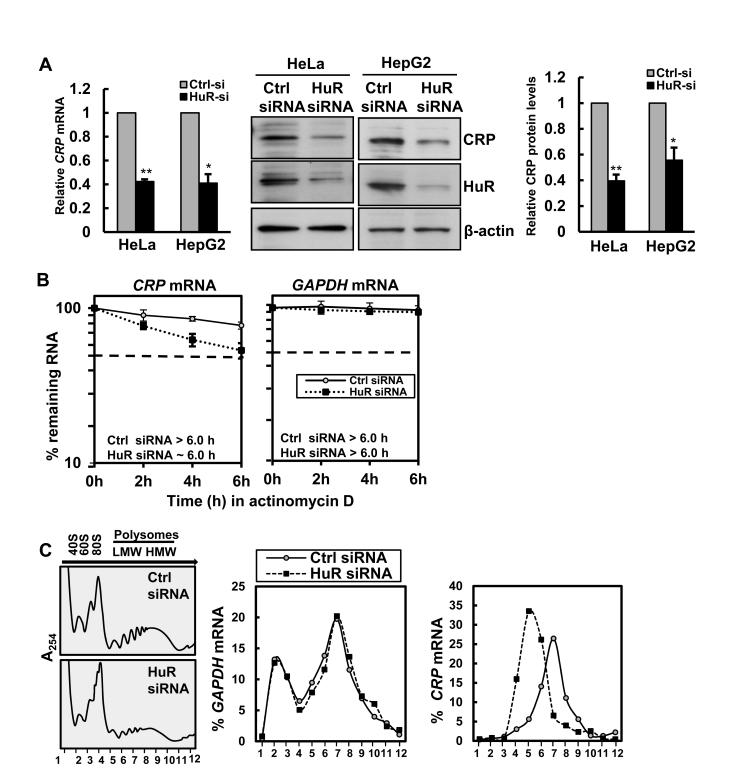
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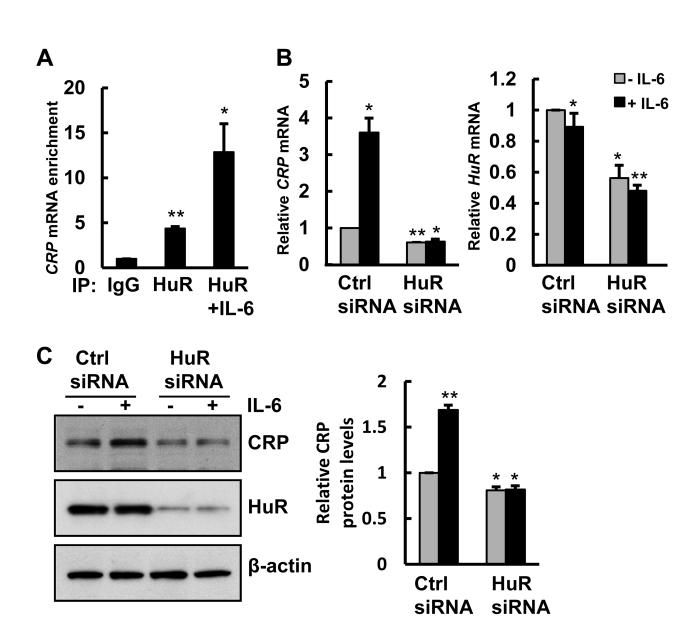
Fig. 5. HuR and miR-637 regulate CRP expression competitively. (A) Ctrl siRNA or HuR siRNA and either biotinylated miR-637 (bio-miR-637) or control (bio-miR-Ctrl) were transfected into HeLa cells for 24 hrs. Biotinylated miRNAs were precipitated using streptavidin beads. Enrichment of CRP mRNA was assessed by RT-qPCR. (B) 24 hrs after transfecting HeLa cells with miR-Ctrl or miR-637, RIP followed by RT-qPCR analysis was used to measure the enrichment of CRP mRNA in HuR IP compared to IgG IP. (C) Effects of silencing HuR together with miR-637 on CRP expression. HeLa cells were co-transfected with HuR siRNA and miR-637; 48 hrs later, lysates were assessed for the level of CRP mRNA by RTqPCR analysis (left) and HuR, CRP and loading control β-actin by immunoblotting analysis (right). CRP protein levels were quantified from immunoblots and normalized to β-actin levels. (D) 48 hrs after HeLa cells were co-transfected with Flag-HuR and miR-637, CRP mRNA levels were measured by RT-qPCR and normalized to GAPDH. (E) HepG2 cells were transfected with HuR siRNA or miR-637 and treated with IL-6 (50 ng/ml) for 24 hrs or left untreated. The CRP mRNA levels were examined by RT-qPCR.

603 The histograms show the mean +SEM from three independent experiments. \*p<0.05, \*\*p<0.01, 604 \*\*\*p<0.001 by Student's t-test in (A-D) and one-way ANOVA and Tukey's post hoc test (E). 605 Fig 6. Individuals with high CRP have high levels of HuR and low levels of miR-637. (A, B) RNA was 606 607 isolated from PBMCs of individuals with either low (≤3 mg/L) or high (≥20 mg/L) circulating CRP levels 608 (n=15/group). The levels of HuR mRNA and miR-637 were quantified using RT-qPCR. HuR mRNA 609 levels were normalized to HPRT1 mRNA and UBC mRNA levels. miR-637 levels were normalized to 610 snoRNAs (SNU24, SNU49 and U47). (C) Serum protein levels of IL-6 were quantified from the same individuals as in (A and B). Means in the graph are indicated by a bar. \*\*p<0.01, \*\*\*p<0.001 by Mann-611 612 Whitney U test.

FIG 1







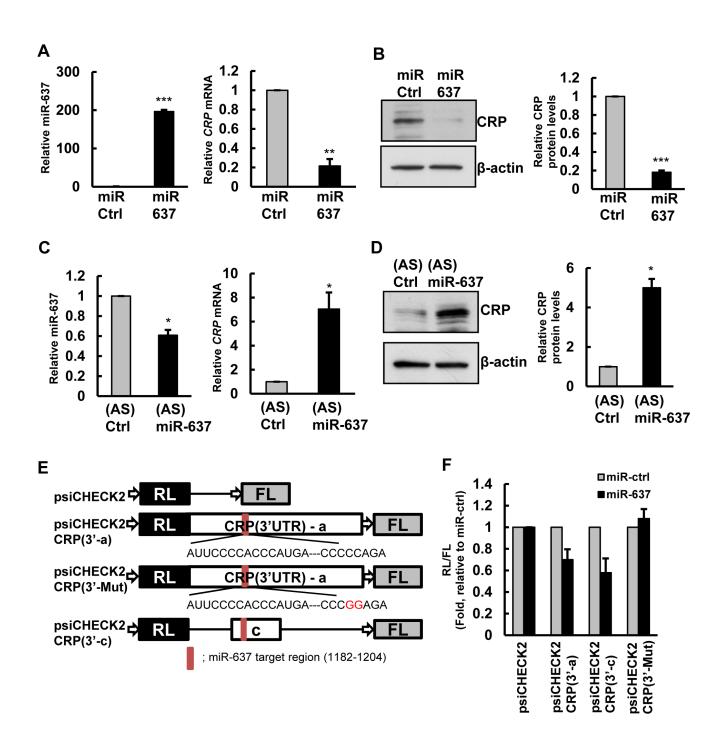


FIG 5

