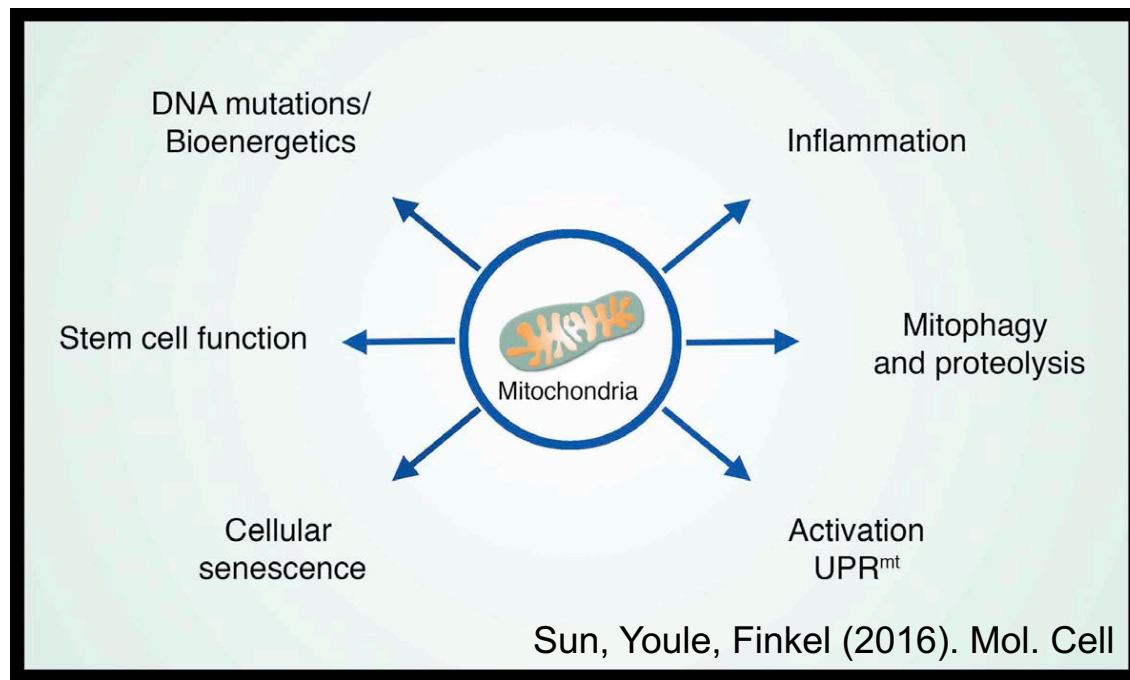


Mitochondrial dysfunction in benign prostatic hyperplasia

Don DeFranco, PhD



University of Pittsburgh

O'Brien Urology Research Center

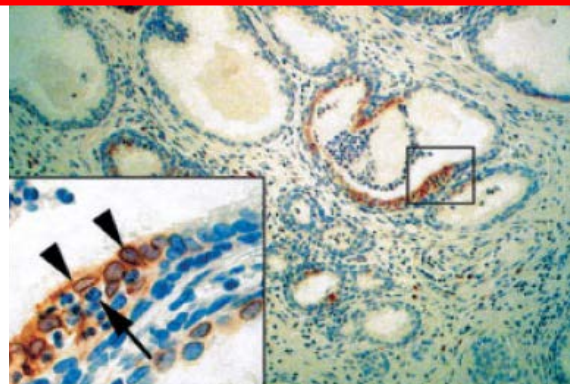
George M. O'Brien
Urology Research Center
UNIVERSITY OF WISCONSIN-MADISON



PIND
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Neurodegenerative Diseases

TREATMENT FOR BPH/LUTS

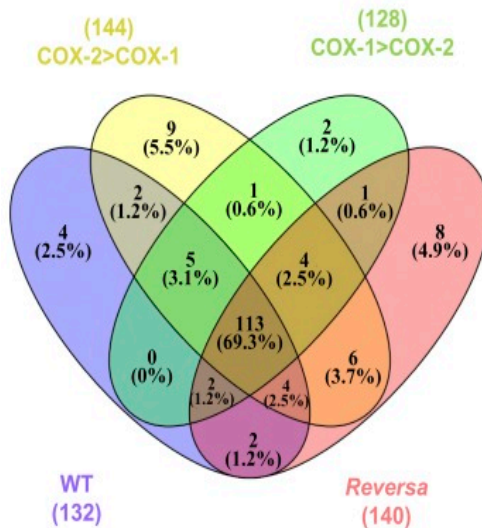
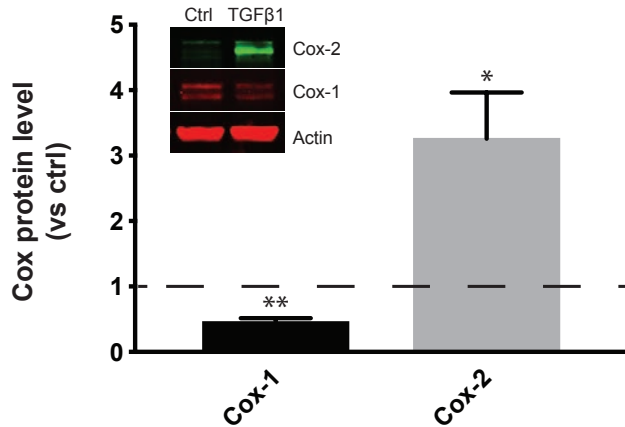
- α -adrenergic blockers treat the symptoms of BPH/LUTS
- 5α -reductase (5AR) inhibitors decrease prostate size
- TURP may need to be performed if drug treatments fail
- **Increased Cox-2 expression in inflammatory vs non-inflammatory BPH**
- Combination therapies: 5ARi + **NSAIDs** (mixed results, beneficial effects not long lasting) – **Why?**



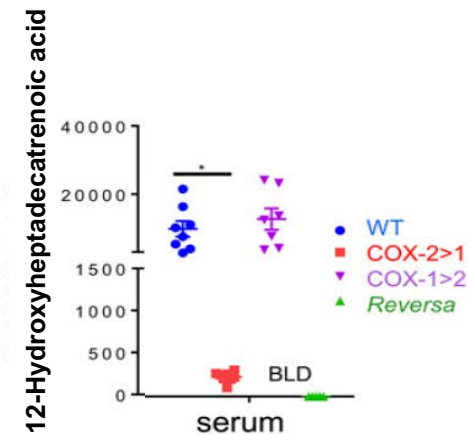
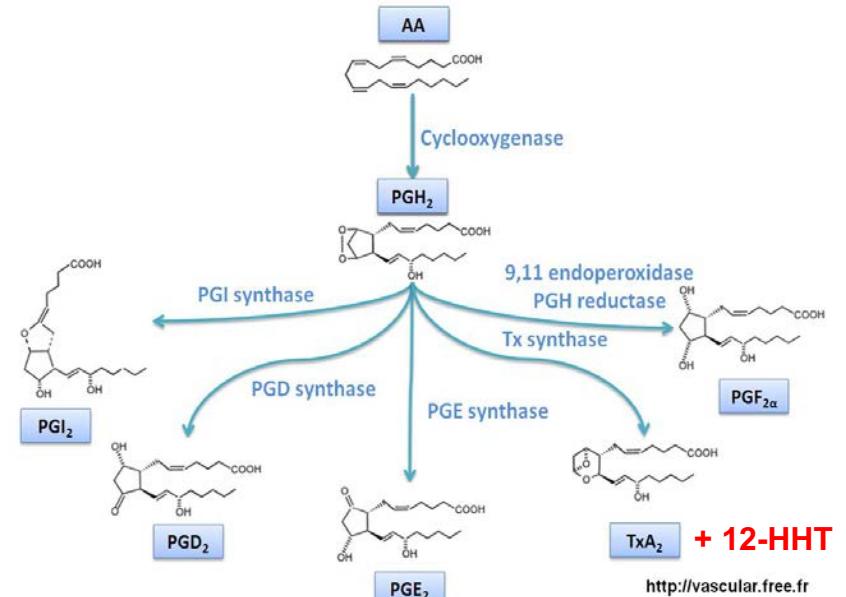
Focal areas of Cox-2 overexpression in BPH (Damber Lab, 2004)

Reciprocal Regulation of Cox-1 and Cox-2

BPH-1 Cells



COX-1 vs COX-2 in MΦ:
Differential gene expression
(Li X et al., (2018) J. Lipid Res.)

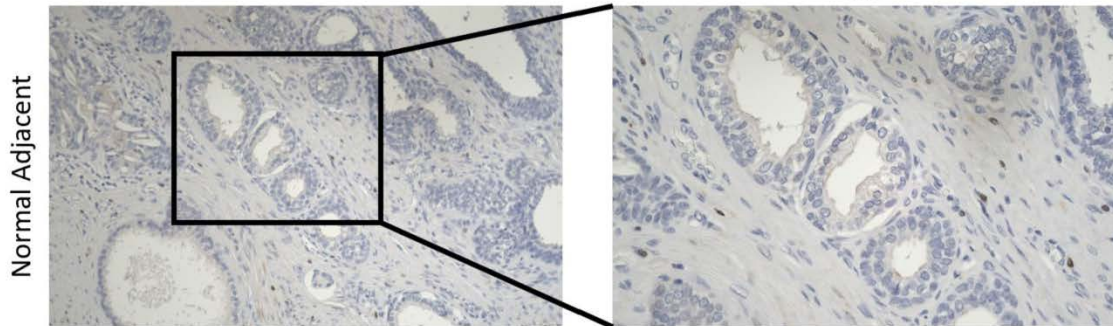
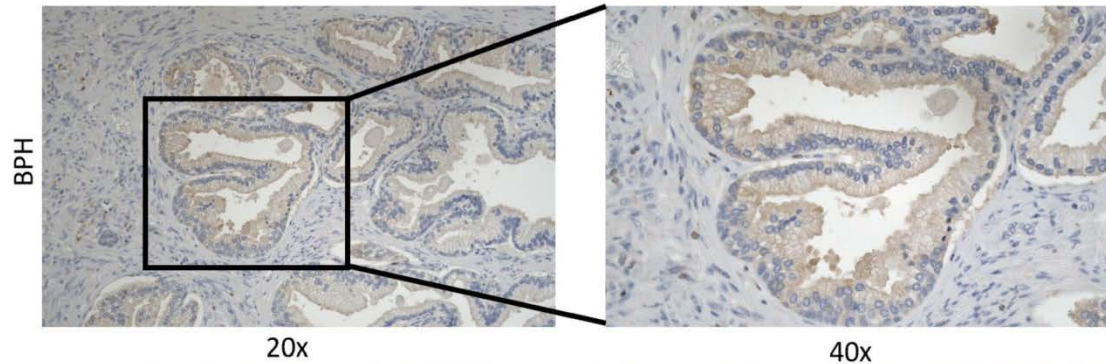


Genomic and lipidomic analyses differentiate the compensatory roles of two COX isoforms during systemic inflammation in mice^{1,2[9]}

COX-1 IHC in Human Prostate

BPH vs. Normal Adjacent (n=8)

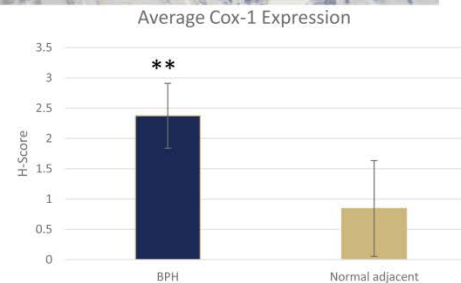
	Age	Race		Cancer Status	
		Caucasian	African American	Gleason score =6	Cancer Free or Non-Prostatic Cancer
Average	65 ± 9.13	50%	50%	50%	50%
Range	53-78				



Statistically significant increase in COX-1 expression in BPH compared to normal adjacent tissue.

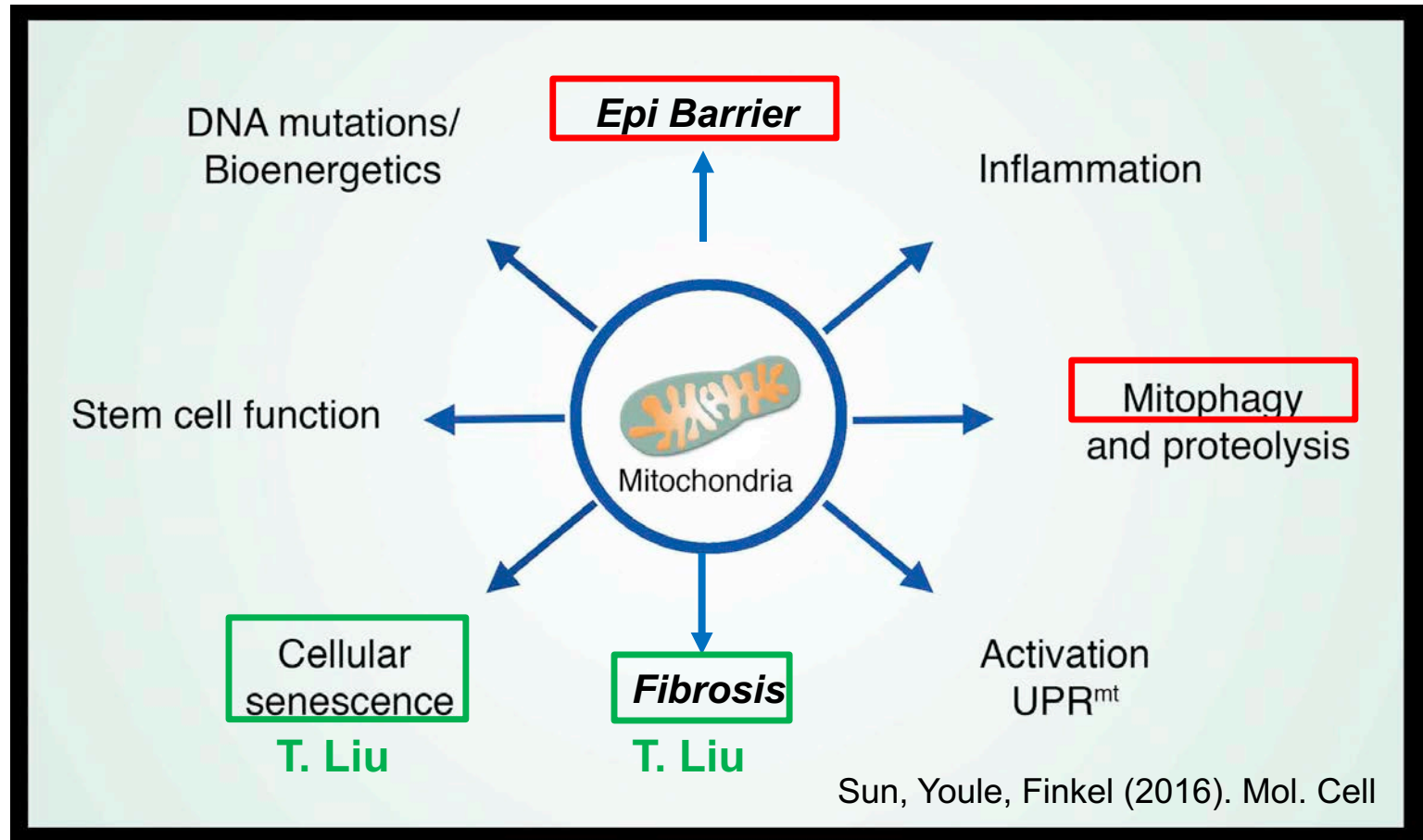
Summary of results

	H Score	Students T test
BPH	2.375 ± 0.5345	
Normal Adjacent	0.84375 ± 0.7898	P= 0.00004



Physiologic or Pathophysiologic Regulators of COX-1?

Age-dependent gradual mitochondrial dysfunction: Is this relevant to BPH progression?



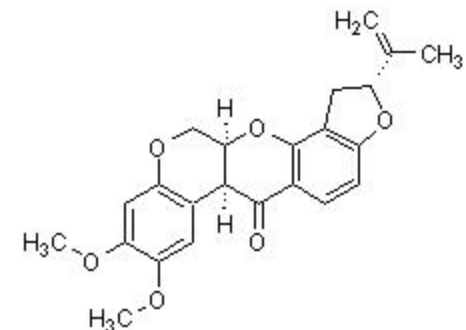
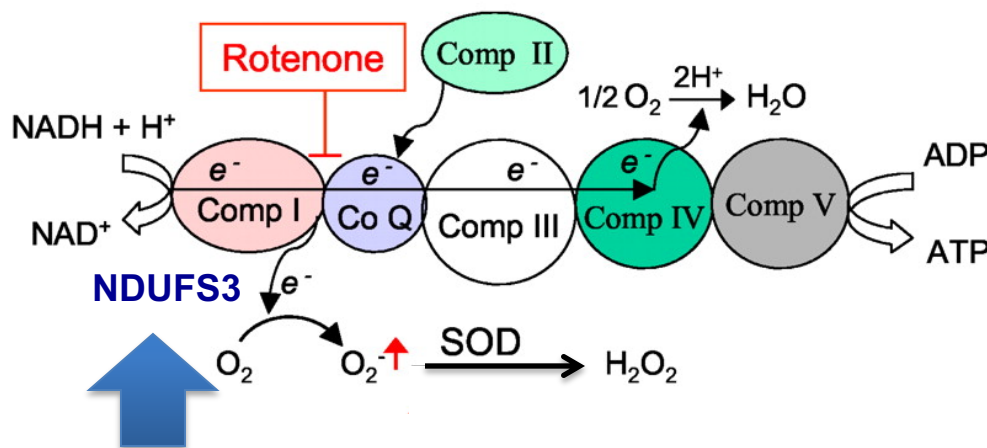
Focus on ETC Complex I: Dysfunction associated with human diseases

Rotenone: an inhibitor of complex I of the mitochondrial respiratory chain

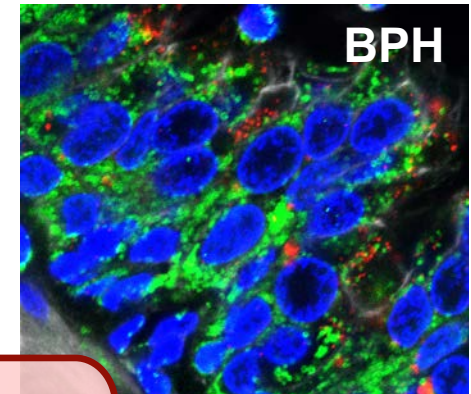
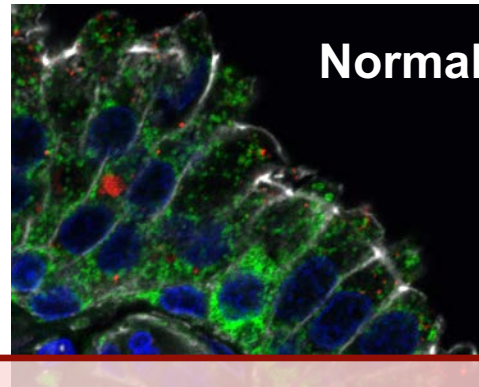
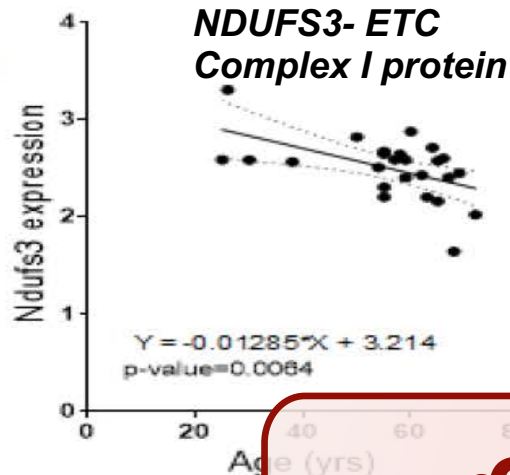
❑ Leading to a blockade of oxidative phosphorylation with limited ATP production;

❑ Incomplete electron transfer to oxygen could cause the formation of ROS.

Rotenone exposure has been shown to correlate with the occurrence of several Parkinson's disease (PD)-like symptoms in humans. Chronic administration of rotenone has been used to create experimental animal models of PD.



Hypothesis: Age-dependent decline in mitochondrial ETC Complex I activity contributes to BPH pathogenesis

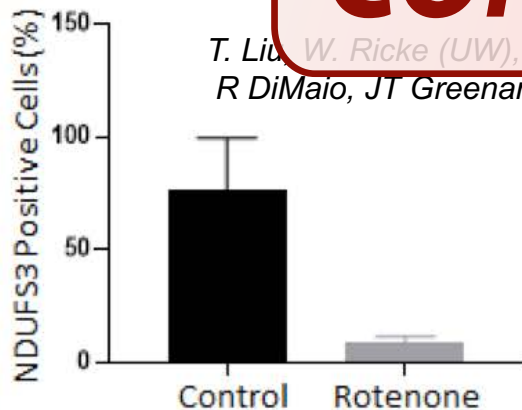


Age-dependent decline in NDUFS3 in human prostate (T. Liu, UWisconsin)

wxr300

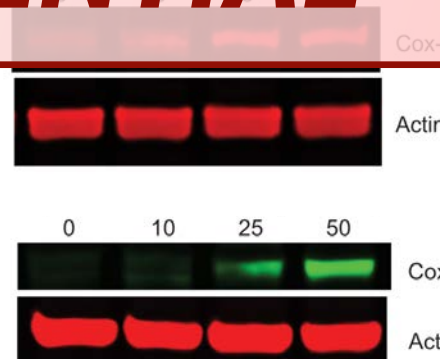
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TOM 20 IIF (D. Stolz) in BPH tissue
Compensatory increase in mito mass?

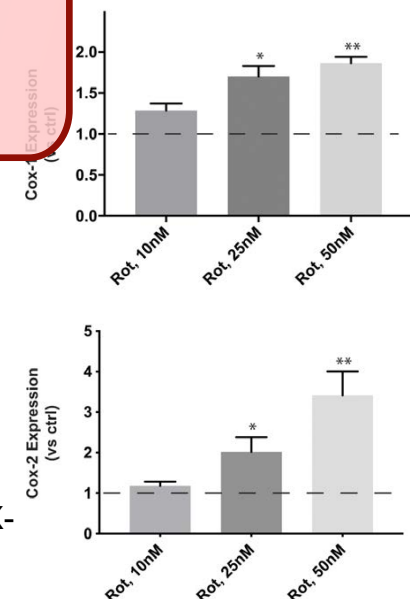


Repression of NDUFS3 in prostates of rotenone-treated rats

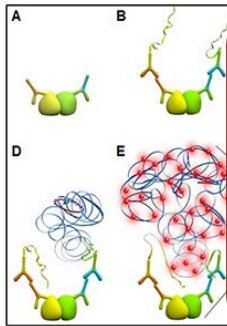
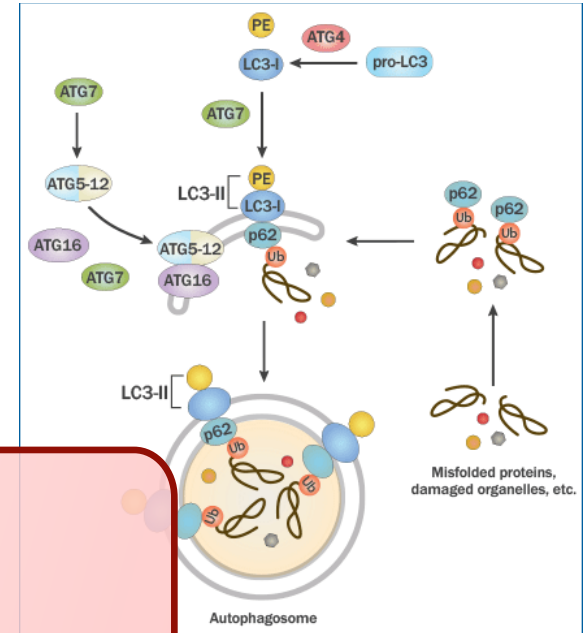
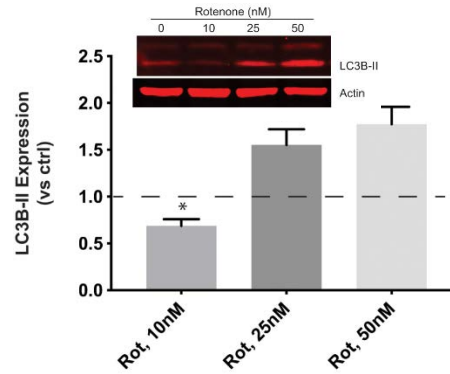
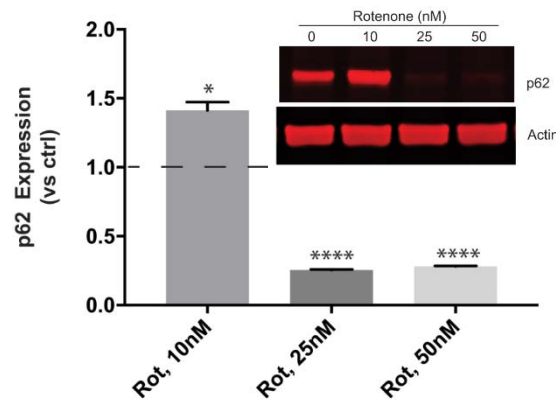
T. Liu, W. Ricke (UW),
R DiMaio, JT Greenamyre (Pitt)



Rotenone induction of COX-1 & COX-2 in RWPE-1 Cells (K. He)

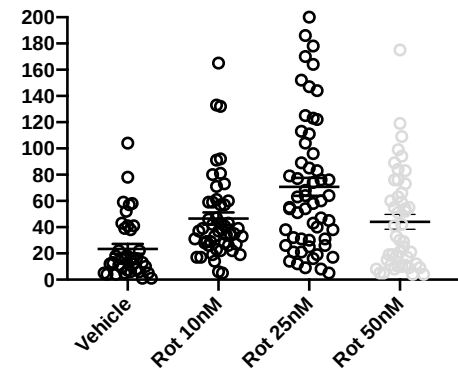
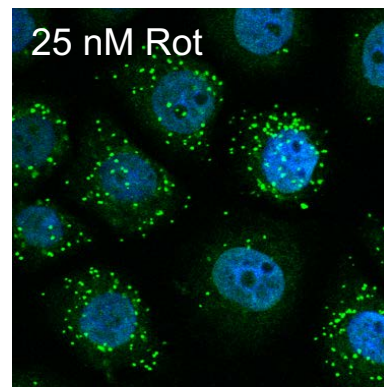
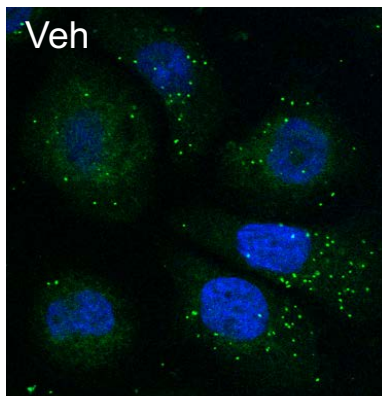


ROTENONE DISRUPTS AUTOPHAGIC FLUX (MITOPHAGY?) IN PrECs



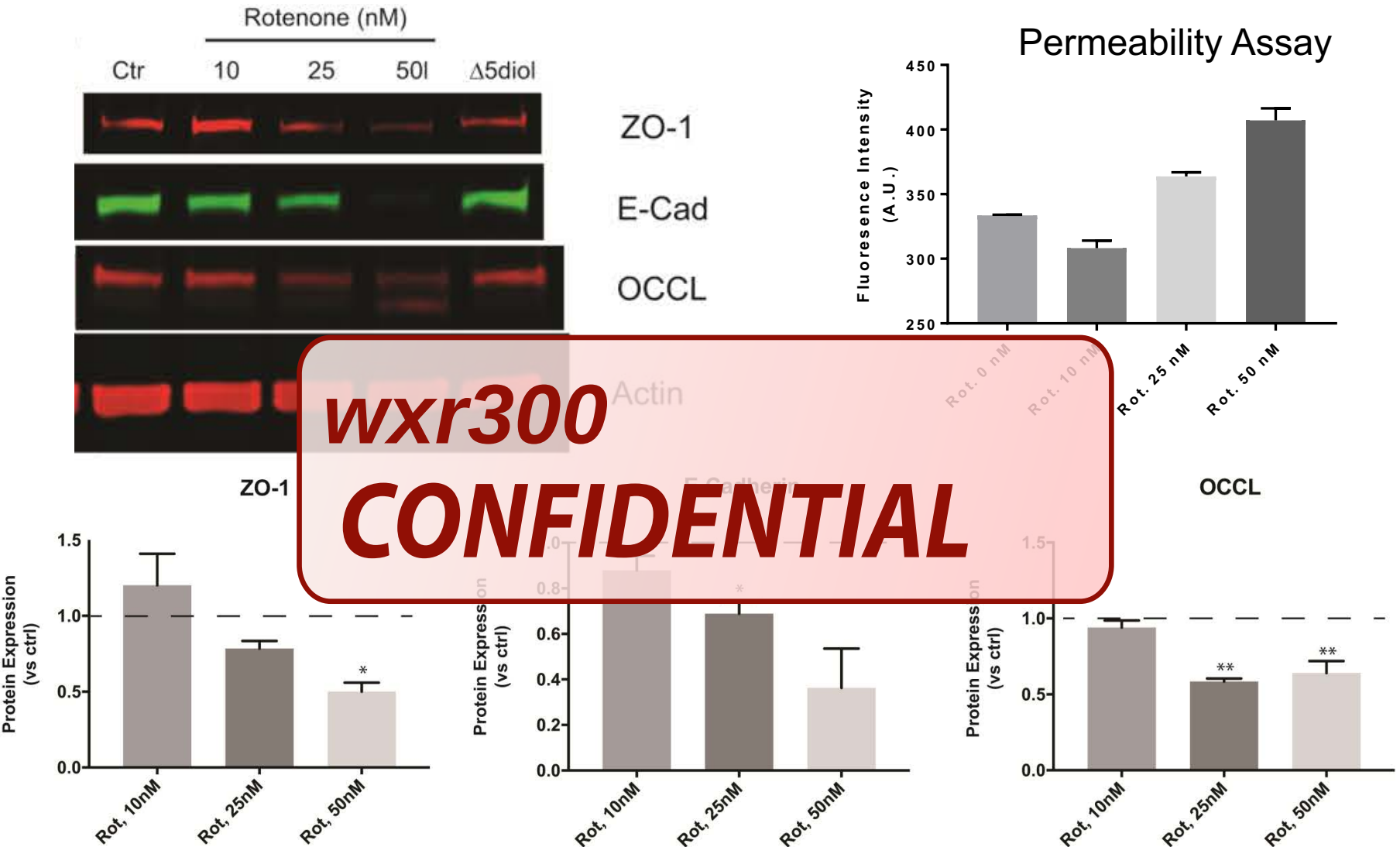
wxr300
CONFIDENTIAL

Diversion of p62 to damage mito?



Rotenone Effects on Cell Junction Proteins In RWPE-1 Cells

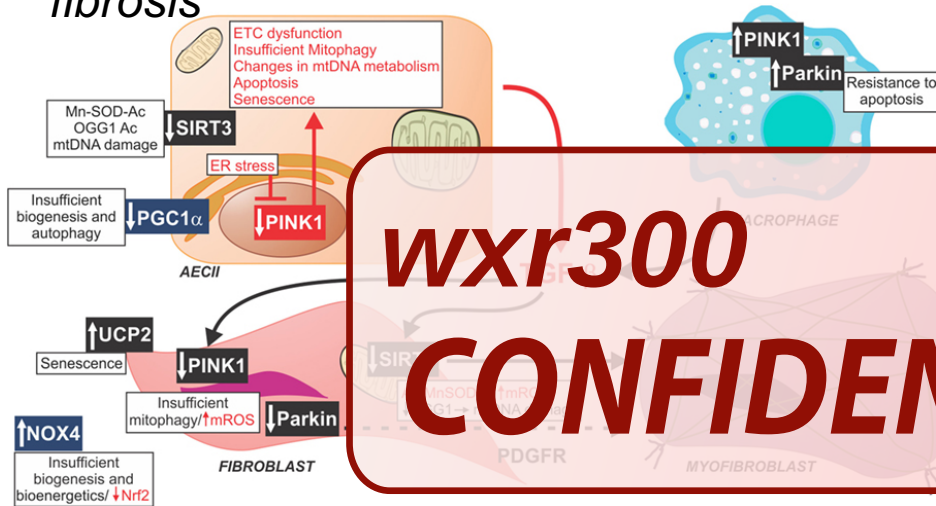
Kai He



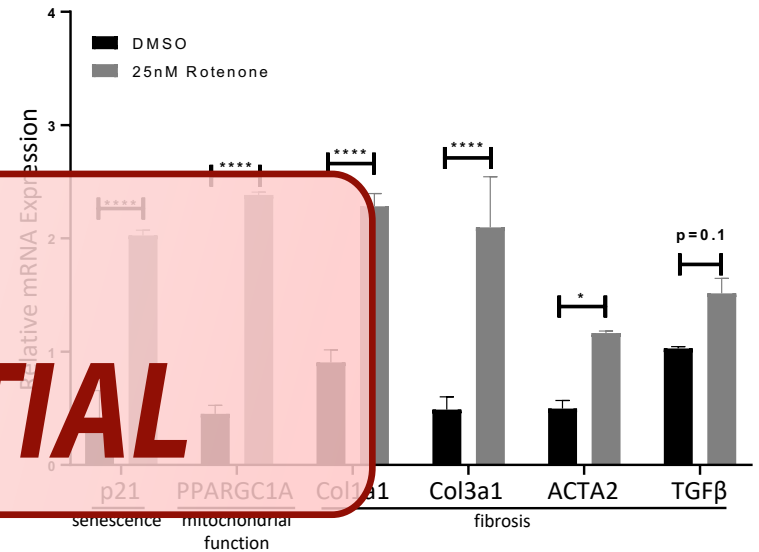
In Vivo Rat Study (Neuroniol Dis 2018): Rotenone treatment induced intestinal hyperpermeability and disrupted expression of ZO-1, Occludin, Claudin-1)

Does mitochondrial dysfunction contribute to prostatic fibrosis?

Lessons from idiopathic pulmonary fibrosis



BhPrS1 Cells (T. Liu, W. Ricke)



Zank DC et al., (2018) Front. Med.

Idiopathic Pulmonary Fibrosis: Aging, Mitochondrial Dysfunction, and Cellular Bioenergetics

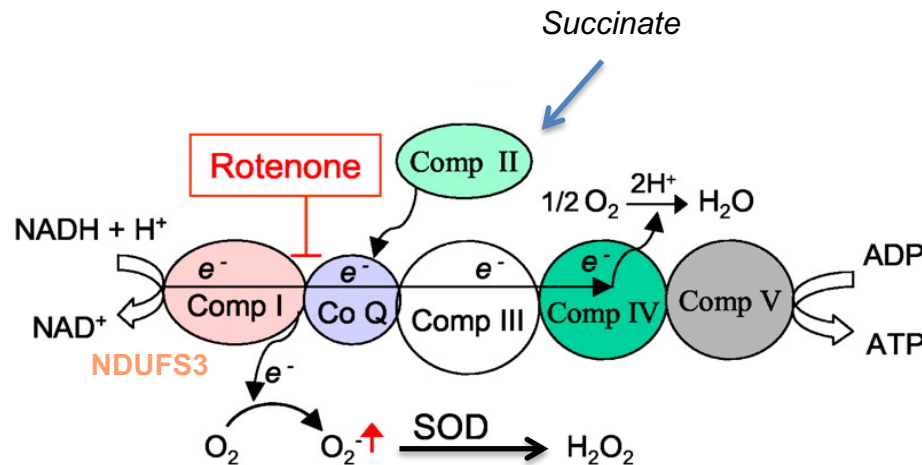
FUTURE DIRECTIONS

Is mitochondrial (ETC Complex I) dysfunction (or altered mitophagy) associated with the BPH progression?

[Complex-I Alteration and Enhanced Mitochondrial Fusion Are Associated With Prostate Cancer Progression.](#)

Phillely JV, et al., J Cell Physiol. 2016 Jun;231(6):1364-74. PMID: 26530043

“Respiratory Complex I-mtDNA mutations (in the NADH ubiquinone oxidoreductase chain 4 gene), MFN2, and IMMT proteins were detected in the circulating exosomes in serum of men with benign prostate hyperplasia (BPH) and progressive PCa!



Can drugs that “restore” mitochondrial function reverse various phenotypes observed with in vitro and in vivo models of prostatic epithelial cell dysfunction, inflammation, or LUTS?



Acknowledgments



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Pittsburgh Institute for Neurodegenerative Diseases

Tim Greenamyre
Roberto Di Maio



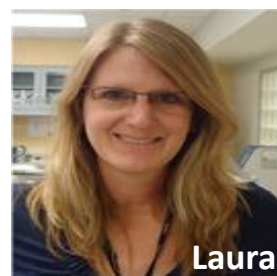
PIND
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Neurodegenerative Diseases



Kai



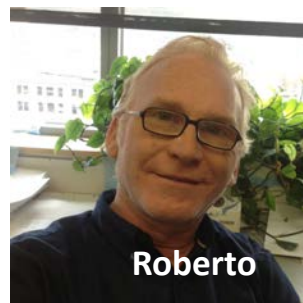
Zhou



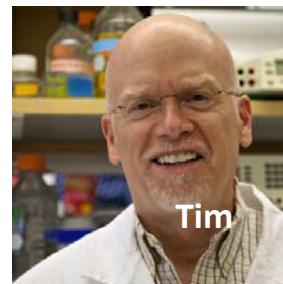
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Will Ricke - PI
Emily Ricke
Teresa Liu – K12 Scholar
Liv Myklebust – CAIRIBU
Research Training and
Development Awardee



Teresa

Liv

Will

NIDDK: U54 DK112079



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Diabetes and Digestive
and Kidney Diseases