#### 1 RESEARCH ARTICLE

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# ATF4 assist in the expression of COX2/PGE2: A Potential Role

#### of ATF4 in PCOS 3

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4	Short title: Disturbed ATF4 action in PCOS lowers ovulation	-	'Author affili form of depar
5	Précis: ATF4 in hGCs when from PCOS women was decreased, which impeded hCG-induced COX2		<sup>2</sup> Author affili
6	expression and PGE2 production by reducing transcriptional activation and reduced the number of		Commented provided is ok.
7	retrieved oocytes in rats.		Formatted: F
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10	Abbreviations		Commented [First author Correspondenc
11	ATF4, activating transcription factor 4; ChIP, chromatin immunoprecipitation; CL, corpus luteum; COC,	•	[Include full Tel [Full inte
12	cumulus-oocyte complex; COX2, cyclooxygenase-2; DAB, diaminobenzidine; ECM, extracellular matrix;		Fax <mark>[Full int</mark> Email
13	ELISA, enzyme-linked immunosorbent assay; ER, endoplasmic reticulum; FF, follicular fluid; hCG, human	. \	E
14	chorionic consideration hGCs, human granulosa cells: IVE-ET, <i>in vitro</i> fertilization-embryo transfer: LH		Formatted: I
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15	luteinizing hormone; OD260, optical density at 260 nm; PCOS, polycystic ovary syndrome; PGE2,		
16	prostaglandin E2; PTX3, pentraxin 3.		
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Commented [A4]: Please include Disclosure. The author reports no conflicts of interest in this work. [Each manuscript needs to include a disclosure of financial interest or other conflict of interest statement. This is where these statements go].

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#### 18 Abstract

19	Ovulatory disorder is common in patients with hyperprolactinemia or polycystic ovary syndrome (PCOS).
20	Previous studies have shown the critical roles-that ATF4 plays critical role in apoptosis and glucose
21	homeostasis, but the its role of ATF4 in regulating reproductive function remains unknownwas not
22	explored. The purpose of the present study was to investigated the role of ATF4 in ovarian ovulatory
23	function. Human granulosa cells (hGCs) from 45 women newly diagnosed with PCOS and 30 controls
24	were used to determine ATF4 expression. In vitro cultured hGCs were used to detect the upstream and
25	downstream genes of ATF4. A shRNA-ATF4 lentiviral vector (ShAtf4) was injected into rat ovaries to
26	establish an in vivo gene knockdown model to further confirm the studies assess the in vivo relevance of
27	the results from PCOS women above. We demonstrated for the first timefound that ATF4 mRNA
28	expression levels werewas lower in hGCs from PCOS patients than in hGCs from non-PCOS women.
29	Many pivotal transcripts involved in cumulus-oocyte complex COCs expansion, preovulatory tissue
30	remodeling. The in vivo study showed that shRNA-lentivirus mediated ATF4 knockdown in rat ovaries via
31	lentiviral infection obviouslyled to reduced the number of retrieved oocytes. Taken togetherCollectively,
32	these findings may shed lightsuggested on the previously unknown roles of ATF4 in regulating ovulation.
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## 34 Keywords

35 ATF4, ovulationOvulation, COX2, PCOS

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## 36 **1. Introduction**

37 PCOS, also called Stein-Leventhal syndrome, is an endocrine disorder characterized by oligo-ovulation or + 38 continuous anovulation, insulin resistance, and hyperandrogenism. PCOS is common in adolescent and 39 reproductive women and has a morbidity of 9-% - 18-% [1,2]. Previous studies have verified that multiple 40 genes correlated with hormone biosynthesis and ovulation are significantly altered in hGCs [3,4]. For the 41 release and transport of oocytes through the oviduct in fertilization, it is essential that the cumulus-oocyte 42 complex COC (COCcumulus-oocyte complex) matrix is well composed and organized with proper 43expansion [5]. Diminished COCs expansion may partially explain the anovulation in women with PCOS [6]. 44 However, the molecular mechanism of reduced PCOS in ovulation in PCOS remains unclear.

45 Activating transcription factor 4 (ATF4), also known as CREB2, is constitutively expressed in a wide 46 variety of tissues [7]. ATF4 is able to form heterodimers with members of C/EBP families, including C/EBP 47 and C/EBPb, of-which are essential for ovulation [8-10]. Several researches studies also identified the role 48 of ATF4 in reproduction-field. Decreaseds in ATF4 expression in chorionic villus tissue from women could 49 trigger miscarriage in pregnant women [11]. Recently published studies revealed the role of ATF4 in 50 regulating follicular function. For instance, aAn altered expressionation of ATF4 was closely correlated with 51the development of follicles [12-14]. Besides, ATF4 could be induced in the functional and early regression 52stages of the corpus luteum (CL) [15]. However, the specific regulatory mechanisms underlying the 53 function of ATF4 in ovulation remain unclear. The abnormal gene expression profiles of the granulosa cells 54and human ovaries from PCOS patients have revealed many differentially expressed genes [4,16,17]. 55Utilizing bioinformatics methods (DAVID Bioinformatics Resources 6.7), we screened for transcription 56 factors that can trigger differentially expressed genes via DAVID Bioinformatics Resources 6.7 (data not 57 shown). Among those transcript factors, ATF4 was highlighted singled-out due to its high frequency of its 58 occurrence in the gene expression profiles. Therefore, based on the published microarray data, we 59 hypothesized that ATF4 may play a critical role in PCOS patients.

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## 63 2. Materials and methods

#### 64 A. Recruitment of patients

65 Forty-five female participants were randomly recruited from the Center for Reproductive Medicine, 66 between September 2018 and September 2020. Forty of the participants, who were between 25 and 30 67 years old, were diagnosed with PCOS according to the Rotterdam criteria (oligo- and/or anovulation; 68 clinical and/or biochemical signs of hyperandrogenism; and polycystic ovaries with the exclusion of other 69 causes of hyperandrogenism, such as hyperprolactinemia, androgen-secreting tumors, Cushing's 70 syndrome, and non-classical congenital adrenal hyperplasia) and received in vitro fertilization-embryo 71 transfer (IVF-ET) [23]. The diagnosis of PCOS was satisfied when two or more of the three criteria were 72 met. The remaining 37 participants in the non-PCOS group were healthy females with regular menstrual 73 cycles (26-35 days) and normal ovarian morphology, and who-were recruited during visits for routine 74 physical examination, tubal factor infertility, or husband's infertility. Oocyte retrieval was performed at 30 75 hrs after hCG administration. Written informed consent was obtained from all participants. The clinical 76 characteristics of the PCOS and non-PCOS groups are shown in Table 1.

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## 78 B. Cell culture

79 hGCs were collected from the PCOS and non-PCOS subjects after their first IVF/intracytoplasmic sperm4 80 injection cycle at our center. At 30 hrs after triggering, COCs were retrieved via the transvaginal 81 ultrasound-guided aspiration of follicles ≥ 10 mm. Follicular fluid (FF) from the patients was pooled. The 82 protocol of GC isolation and culture was moderately\_slightly\_modified from the method\_previously 83 described method [24]. In brief, the pellets were purified by density gradient centrifugation with 84 Ficoll-Paque (GE Healthcare Bio-Sciences) and then digested in-with hyaluronidase (Sigma) at 37°C for 7 85 minutes. The dispersed cells were collected and then-cultured in Dulbecco's modified Eagle medium 86 /Ham's F12 with 10% fetal bovine serum\_(Gibco). The viable cells were seeded at 10-6 cells per well in a 87 six-well culture plate, at  $-5 \times 10^5$  cells per well in a twelve-well culture plate or at  $1 \times 10^4$  cells per well in a 88 chamber slide.

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#### 91 C. Transfection experiment

92 2 x 10<sup>5</sup> Cells were transfected with 50 nM synthetic-siRNA in Opti-MEM (Invitrogen). The cells were electroporated at 170 V for 10 ms using an NEPA21 electroporator (Nepa Gene), for transfection. After dilution with Dulbecco's modified Eagle's medium/F12 containing 10-% fetal bovine serum and antibiotics, the cells were transferred to a six-well culture plate and were ready for treatment after 72 hrs of incubation. The knockdown efficiency was determined using quantitative real-time polymerase chain reaction (qRT-PCR) or <u>W</u>western blot assays.

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## 99 D. qRT-PCR

- Total RNA was extracted from hGCs using a total RNA isolation kit and the samples were then stored at -80-°C for subsequent analysis. The-RNA concentrations of each sample were determined by calculating the OD260/OD280 ratio using an ultramicro spectrophotometer (Thermo Fisher Scientific, Carlsbad, CA, USA). A total of 200 ng of RNA was used for cDNA synthesis with the RT Master Mix Perfect RealTime Kit. Three separate experiments were performed, and each sample was assayed in triplicate. The mean value was used for the determination of mRNA levels by the comparative Ct (2<sup>-△△Ct</sup>) method, with *GAPDH* as the reference gene. The primer sequences are shown in the supplementary\_Supplementary\_Table\_1.
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## 110 E. Enzyme-linked Immunosorbent assay (ELISA) for PGE2

A human PGE2-specific ELISA kit was used in accordance with the manufacturer's protocol (Cayman+ Chemical, Ann Arbor, MI, USA). Culture medium was collected, and the PGE2 levels in the culture medium were determined by ELISA kit. The OD values <u>of</u>\_for\_PGE2 were normalized to<u>with</u> the protein concentrations of the <u>corresponding</u> cell lysates. The normalized PGE2 values obtained from the treated cells are relative to those of the control cells. The linear range of the PGE2 concentrations was 10 – 1000 pg/mL. Formatted: Indent: First line: 0 ch

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#### 120 K. Immunohistochemistry

121The ovaries of rats were fixed in 4-% paraformaldehyde and embedded in paraffin. Then, 5-µm sections« 122 were prepared, followed by deparaffinization and rehydration with a graded ethanol series. The tissue 123 sections were blocked with rabbit serum for 1 hr at room temperature and incubated with an anti-ATF4 124antibody (Santa Cruz Biotechnology, Santa Cruz, CA, USA) (1:100) overnight at 4-°C in a dark chamber. 125After being washinged with PBS, the sections were incubated with a secondary antibody (1:200) for 1.5 hr 126 at room temperature 2: Ithen, diaminobenzidine (DAB) was added to initiate the color reaction was 127visualized by exposure to diaminobenzidine (DAB) for 5 mins. To test the specificity of 128 immunocytochemical staining, separate tissue sections were exposed to preimmune serum instead of the 129 primary antibody (negative control).

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## 131 **3. Results**

## 132 A. The expression of ATF4 in hGCs from women with PCOS was decreased

133Immunofluorescence results showed strong ATF4 staining in hGCs (Figure 1A). We first determined+ 134 whether ATF4 expression was changed in clinical PCOS patients. As shown in Table 1, compared with the 135controls, PCOS patients were characterized by increased testing indexes, including basal LH, LH/FSH, T<sub>0</sub> 136 and AMH levels. qRT-PCR was performed to measure ATF4 mRNA in primary hGCs. As shown in Figure 137 1C, pentraxin 3 (PTX3) levels were lower in the PCOS group than in the non-PCOS group, in accordance 138with previous research results [27], and the mRNA abundance of ATF4 was lower in the PCOS group than 139in the control group. Therefore, in vitro and in vivo experiments should bewere performed to explore the 140 physiological role of ATF4.

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#### 142 B. ATF4 regulated a variety of genes associated with ovulatory response in

#### 143 hGCs

144 To further illuminate the role of ATF4 in ovulation regulation, siRNA-mediated gene knockdown was used≁ 145 to down-regulate the endogenous expression of ATF4 in hGCs. The qRT-PCR results showed a significant 146 decrease in ATF4 expression in hGCs (Figure 2A). More importantly, we found that several 147 ovulation-related genes were significantly altered. The mRNA levels of genes associated with cumulus 148 expansion in hGCs, including COX2, PTX3, CD44, TNFAIP6, and HAS2, were decreased when ATF4 was 149 deficient (Figure 2B). Other genes that play a pivotal role in extracellular matrix (ECM) remodeling were 150 detected through qRT-PCR. The mRNA transcriptional expression of MMP2, MMP9, and ADAMTS1 in 151hGCs was significantly obviously impeded when ATF4 knockdown was achieved with small interfering 152RNAi (Figure 2C). The expression levels of HSD3β and CYP11A1 were barely changed (Figure 2D). 153Altogether, these results indicated that ATF4 participates in regulating the expression of ovulatory genes.

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## 155 C. Atf4 in rat ovaries regulates ovulation function

156To further verify the *in vivo* function of Atf4 in vivo, immunohistochemical staining assay was firstly-initially. 157performed. Atf4-deficient ovarian tissues were established in rats via the intrabursal injection of lentivirus 158shAtf4 (Supplemental Figure 1D and 1E). Lentivirus shAtf4 successfully blocked nearly 40-% of Atf4 159 expression in rat ovaries without affecting ovary weights (Figure 5A-C). When shAtf4 rats were treated with 160 PMSG and hCG, preovulatory follicular development was normal (Figure 5F (a) and (b)). However, COC 161 expansion was impaired slightly (Figure 5F (c) and (d)) -. Furthermore, when COC expansion was 162 tested examined in vitro, the physiological mediators of COX2 [29], was less effective in inducing 163 expansion of COCs collected from shAtf4 compared with shNC (Figure 2E). To integrally verify the function 164 of Atf4 in regulating ovulation, rats were injected with PMSG. followed by and then received an hCG 165 injection, 24 hrs later.

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## 169 **4. Discussion**

170PCOS is a common endocrine disorder that causes dysfunctional follicular maturation and oligo-ovulation« 171or anovulation, eventually resulting in infertility [30]. Ovulation, the most essential process prerequisite of 172for mammalian reproduction, is a strictly controlled event involving the variation-participation of multiple 173 genes. In the process of ovulation, the expression of ovulation-related genes is mainly affected by the 174luteinizing hormone (LH) surge [31]. The normal expansion of COCs is required for ovulation, which 175requires the abundant expression of transcripts, such as COX2, PTX3, CD44, TNFAIP6, and HAS2 [32]. 176 Several recent studies have shown that some genes, including PTX3 and TNFAIP6, are down-regulated in 177 PCOS [6,27]. Moreover, variations in the ECM secreted from cumulus cells and the follicular wall are also 178 essential for oocyte release; several classes of proteinases have been reported to regulate ovarian ECM 179 remodeling, including MMPs, the plasmin/plasminogen activator system, and ADAMTS [33].

180 Among these ovulation-related genes, COX2PGE2, a catalyst of PGE2 production-COX2, is 181 recognized as a pivotal mediator [34]. The suppression of COX2 could inhibit multiple reproductive 182 functions, including ovulation, while exogenous PGE2 could rescue the inhibitory effects of COX2 on 183 ovulation [35,36]. These studies clearly support the concept that COX2-derived PGE2 plays a critical role 184 in regulating ovulation. ATF4 is a critical determinant of diverse physiological events. In addition to its 185 classical role in lipid and glucose metabolism and insulin secretion and sensitivity, ATF4 has been recently 186 identified as an important controller of reproduction [37,38]. However, the role of ATF4 in PCOS 187 pathogenesis and the underlying mechanisms remain to be described. Intriguingly, ATF4 can induce 188 COX2 expression in the kidney, emphasizing the potential correlation between ATF4 and COX2. Based on 189 the above study, the aim of our study is to elucidate the role of ATF4 in PCOS and to further investigate the 190 underlying mechanism.

In the present study, we demonstrated that ATF4 was expressed in hGCs; this finding was indispensable for determiningto determine the physiological function of ATF4. Whether ATF4 expression was changed in clinical-PCOS patients remained unclear. Thus, we further investigated the role of ATF4 in PCOS by analyzing clinical samples. First, we determined that *PTX3* expression was lower in PCOS, and we regarded this as a positive control result, and; this finding was consistent with previous research reports results-[27]. Consistently, we found that the mRNA expression levels of *ATF4* in primary hGCs Formatted: Indent: First line: 0 ch

197 from PCOS patients were decreased. These data implied that the aberrant expression of ATF4 might be 198correlated with PCOS. The absence of ATF4 in hGCs resulted in an obvious decrease in the expression of 199 multiple genes involved in COCs expansion, preovulatory tissue remodeling, and progesterone production. 200 hCG, a hormone secreted by the placenta, can induce progesterone and ovulation production in the 201 ovaries, which is consequentially used for the treatment of infertility [12,39]. The mechanisms underlying 202 the regulation of ATF4 by hCG remained unclearare not known. HereinIn the present work, several 203 signaling pathways that might be involved in the this event process were examined. We found that 204 hCG-induced ATF4 up-regulation was related to activation of the PI3K/AKT pathway rather than the 205 PKA/CREB and ERK1/2 signaling pathways. Previously, we identified the key role of ATF4 in modulating 206 the expression of COX2 in hGCs (Figure 2B). Mechanistically, we found that ATF4 likely exerts its effects 207by could-directly binding to the promoter of COX2 in hGCs. Thus; as a result, ATF4 deficiency impaired the 208 hCG-mediated induction of COX2 and PGE2 expression.

An *in vivo* study was also performed to integrally-investigate the role of *Atf4* in ovulation. Due to the high efficacy and long-term stability of shRNA, we employed lentivirus sh*Atf4*, which could stably block the expression of *Atf4* in rat ovaries. Intrabursal injection is a promising method for ensuring the local knockdown of target genes with high efficacy. All of <u>T</u>these results <u>collectively</u> support the pivotal role of *Atf4* in maintaining normal ovulation in rats.

214 Our results demonstrate that decreased *ATF4* expression in hGCs is correlated with PCOS. hCG 215 could activate the PI3K/AKT signaling pathway and then stimulate ATF4 expression in hGCs. <u>Through in</u> 216 *vivo\_studies*, we confirmed that the knockdown of *Atf4* disrupted ovulation.

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## 220 7. References

221	1.	Wei Z, Cao Y, Cong L, Zhou P, Zhang Z, Li Jet al. Effect of metformin pretreatment on pregnancy
222		outcome of in vitro matured oocytes retrieved from women with polycystic ovary syndrome.
223		Fertil <del>ity and <u>S</u>sterility!</del> 2008; 90:1149-1154

224 2. Azziz R, Woods KS, Reyna R, Key TJ, Knochenhauer ES, Yildiz BOet al. The prevalence and

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225		features of the polycystic ovary syndrome in an unselected population. J Clin Endocrinol Metab.		
226		2004; 89:2745-2749		
227	3.	Aydos A, Gurel A, Oztemur Islakoglu Y, Noyan S, Gokce B, Ecemis T, Kaya C, Aksu AT, Gur-		
228		Dedeoglu Bet al. Identification of Polycystic Ovary Syndrome (PCOS) Specific Specific Genes-		
229		Genes in Cumulus cumulus and Mural mural Granulosa granulosa Cellscells. PloS eneOne. 2016;		
230		11:e0168875		
231	4.	Kaur S, Archer KJ, Devi MG, Kriplani A, Strauss JF, 3rd, Singh R. Differential gene expression in		
232		granulosa cells from polycystic ovary syndrome patients with and without insulin resistance:		
233		identification of susceptibility gene sets through network analysis. The Journal of e <u>C</u> linical		
234		e <u>E</u> ndocrinol <del>ogy and</del> mMetab <del>olism</del> . 2012; 97:E2016-2021		
235	5.	Fulop C, Szanto S, Mukhopadhyay D, Bardos T, Kamath RV, Rugg MS, Day AJ, Salustri A, Hascall		
236		VC, Glant TT, Mikecz Ket al. Impaired cumulus mucification and female sterility in tumor necrosis		
237		factor-induced protein-6 deficient mice. Development (Cambridge, England). 2003;		
238		130:2253-2261		
239	6.	Ambekar AS, Kelkar DS, Pinto SM, Sharma R, Hinduja I, Zaveri K, Pandey A, Prasad TS, Gowda-		
240		H, Mukherjee Set al. Proteomics of follicular fluid from women with polycystic ovary syndrome		
241		suggests molecular defects in follicular development. The Journal of eClinical Eendocrinology and		
242		<u>M</u> metab <del>olism</del> . 2015; 100:744-753		
243	7.	Mamady H, Storey KB. Coping with the stress: expression of ATF4, ATF6, and downstream		
244		targets in organs of hibernating ground squirrels. Arch Biochem Biophys. 2008; 477:77-85		
245	8.	Wortel IMN, van der Meer LT, Kilberg MS, van Leeuwen FN. Surviving Stressstress: Modulation of		
246		ATF4-Mediated_mediated_Stress_stress_Responses_responses_in_Normal_normal_and_Malignant-		
247		malignant Cellscells. Trends-in eEndocrinolegy and mMetabelism: TEM., 2017; 28:794-806		
248	9.	Vallejo M, Ron D, Miller CP, Habener JF. C/ATF, a member of the activating transcription factor		Formatted: EndNote Bibliography, Indent: Left: 0 cm
249		family of DNA-binding proteins, dimerizes with CAAT/enhancer-binding proteins and directs their	ι	Tranging. 1.27 cm, Line Spacing. Double
250		binding to cAMP response elements. Proc Natl Acad Sci USAProceedings of the National		
251		Academy of Sciences of the United States of America. 1993; 90:4679-4683		
1				

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