

REVIEW

## Activin A: Autocrine Regulator of Kidney Development and Repair

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**Abstract.** The research described in this review suggests a novel and important role for activin A in the developmental and repair processes of the kidney (Table 1). The results obtained in these studies indicate that activin A is a negative regulator of kidney development and plays an essential part in kidney diseases, such as acute renal failure or renal fibrosis. It is also possible that activin A is a key player in the pathophysiological processes of other kidney diseases, such as congenital urogenital abnormalities, renal cystic disease and renal cell carcinoma. Activin A is thus a potential target for therapeutic interventions in kidney diseases. To address this issue, more detailed analysis on the regulation of activin production, modulation of activin activity and activin target genes is required.

**Key words:** Activin, Follistatin, Renal organogenesis, Kidney regeneration

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**ACTIVINS** are multifunctional cytokines belonging to the transforming growth factor (TGF)- $\beta$  superfamily. Activins were originally discovered as inducers of follicle-stimulating hormone (FSH) release [1, 2], but are now known to regulate growth and differentiation in numerous biological systems, including erythropoiesis [3], neural cell survival [4] and early embryonic development [5–7]. Furthermore, in recent years, roles for activins have been identified in pancreatic  $\beta$  cell differentiation [8, 9], liver regeneration after hepatectomy [10, 11], angiogenesis [12, 13], systemic inflammation [14], branching morphogenesis of glandular organs [15] and tissue repair of various organs [16–18]. There is also evidence regarding the biological functions of activin A in the field of nephrology. In the present review, we will focus on a novel and important role of activin A in the developmental and regeneration processes of the kidney.

### Activin-Follistatin System

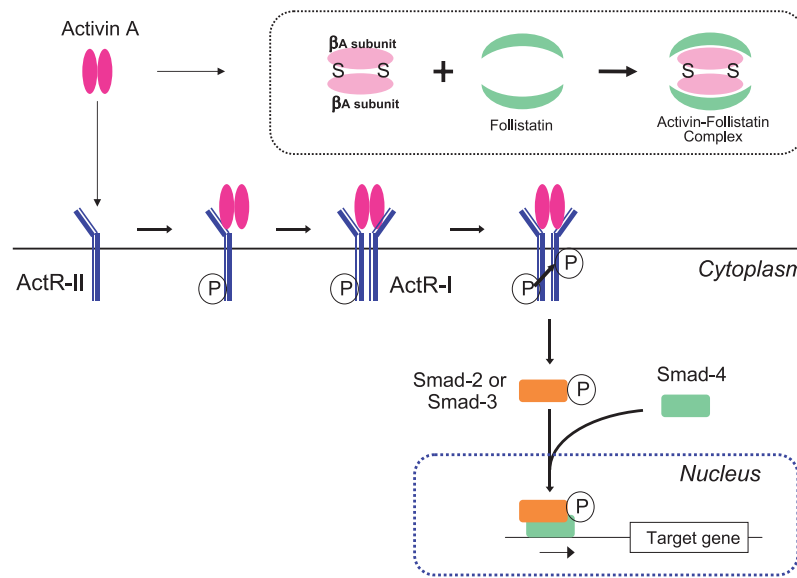
Activins are dimeric proteins consisting of  $\beta$  subunits, which are connected by disulfide bonds. There are three different forms of activin, homodimeric activin A ( $\beta_A$ - $\beta_A$ ) and activin B ( $\beta_B$ - $\beta_B$ ), as well as heteromeric activin AB ( $\beta_A$ - $\beta_B$ ).  $\beta_C$  [19],  $\beta_D$  [20] and  $\beta_E$  [21] chains have also been discovered, but their functions remain unknown. The activin signal is mediated by heteromeric receptor complexes consisting of two types of receptor, type I (ActR-I) and type II (ActR-II), which are characterized by an intracellular serine/threonine kinase domain [22] (Fig. 1). These receptors are structurally similar, with small cysteine-rich extracellular regions and intracellular regions consisting of kinase domains. ActR-I, but not ActR-II, has a region rich in glycine and serine residues (GS domain) in the juxtamembrane domain. Activin first binds with ActR-II, which is present in the cell membrane as an oligomeric form with an activated kinase. ActR-I, which also exists as an oligomeric form, but cannot bind to activin in the absence of ActR-II, is recruited to the complex. ActR-II then phosphorylates ActR-I in the GS domain, thereby activating it.

As an intracellular mediator of activin signaling,

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**Fig. 1.** Activin Signaling Pathway

Smad genes have been cloned. Of the eight Smads discovered, five (Smad-1, Smad-2, Smad-3, Smad-5, and Smad-8) are commonly referred to as receptor-regulated Smads (RSmads). Smad-1, Smad-5 and Smad-8 serve principally as substrates for bone morphogenetic protein (BMP) receptors, and Smad-2 and Smad-3 act as substrates for TGF- $\beta$ , activin and nodal receptors. Smad-4, also referred to as Co-Smad, serves as a common partner for all RSmads. Smad-6 and Smad-7 are inhibitory Smads that serve as decoys to interfere with Smad-receptor or Smad-Smad interactions. Upon direct phosphorylation by ActR-I, Smad-2 or Smad-3 binds to its partner Smad-4 to form a heteromeric complex and translocates into the nucleus, where it can potentially regulate the transcription of target genes [23, 24] (Fig. 1). Recent studies have suggested additional Smad-independent signaling pathways for activin signaling, including Rho A, Mitogen-activated protein/ERK kinase kinase (MEKK)-1, c-Jun-NH2-terminal kinase (JNK) and p38 [25, 26].

The actions of activins are regulated by complex machinery at both the intracellular and extracellular levels. The most important modulator of the activin action is an activin-binding protein, follistatin. This protein binds to activins with high affinity and blocks their actions [27–29]. Follistatin is expressed on the surface of activin target cells by binding to the extracellular matrix [30]. Activins trapped by follistatin are then internalized by endocytosis and are subsequently

degraded by proteolysis [31]. Several factors, such as  $\alpha$ -2 macroglobulin [32] and follistatin-related protein [33], also known as follistatin-related gene (FLRG) or follistatin-like 3 (FSTL-3), can bind to activin A. At the plasma membrane, Cripto inhibits activin/activin receptor interactions [34]. BAMBI (bone morphogenetic protein and activin membrane-bound inhibitor), a pseudoreceptor related to the type I receptors of the TGF- $\beta$  family, inhibits activin A, TGF- $\beta$  and BMP signaling by stably associating with TGF- $\beta$  family receptors [35]. ARIPs (activin receptor-interacting proteins) regulate activin receptor type II activity and endocytosis [36]. In addition, several intracellular proteins and cofactors, including Smurf-type ubiquitin E3 ligases and Smad anchor for receptor activation [25], and transcriptional co-activators and co-repressors, such as CBP, p300, c-Ski and SnoN, control Smad activation by activin receptors, shuttling activated Smads into the nucleus and regulating transcriptional activity of Smad-containing complexes [24, 37].

### Activin in Kidney Development

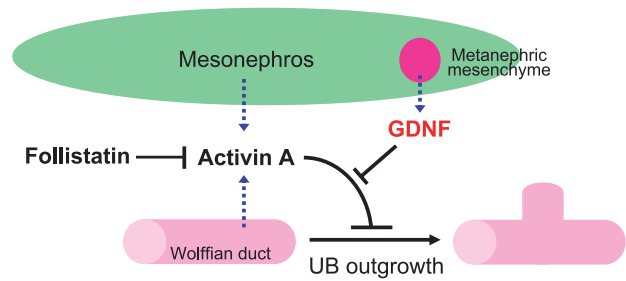
In mammals, the kidney develops in three stages: pronephros, mesonephros and metanephros. The metanephros then differentiates into the permanent kidney. Kidney organogenesis depends on a series of reciprocal inductive interactions between the epithelial

ureteric bud (UB) and metanephric mesenchyme (MM) [38]. Signals from the MM initiate kidney development by inducing formation of the UB from the Wolffian duct (WD). Subsequently, the growing UB also starts to branch in response to the mesenchymal signals and in return secretes signals that induce mesenchymal cells to condense and generate pretubular aggregates at the tips of UB branches. These aggregates undergo tubulogenesis via comma- and S-shaped bodies. The tubular structures finally fuse to form nephrons, the functional units of the kidney. Forming nephrons also attract endothelial cells to make functional glomeruli. However, it remains unclear how vascularization and innervation are regulated during kidney development. Using several approaches, such as *in vivo* studies with gene targeting techniques, *in vitro* organ culture systems using embryonic kidneys, and *in vitro* cell culture models, a large number of soluble factors, extracellular matrix, proteases and protease inhibitors involved in kidney development have been identified [39].

#### *Inhibition of Ureteric Bud Outgrowth from the Wolffian Duct by Activin A*

Development of the metanephric kidney begins with UB outgrowth from the WD. Ectopic budding of the UB from the WD leads to many congenital anomalies of the kidney and urinary tract, such as hypoplastic kidney, ectopia of the ureterovesical orifice, urinary outflow obstruction, and/or reflux [40, 41]. Elucidation of the budding mechanism is essential for understanding how these abnormalities develop. It is currently thought that UB emerges from the WD in response to glial-cell-derived neurotrophic growth factor (GDNF) produced by MM [42]. GDNF is a crucial positive signal in the budding process, but negative regulation of this process remains unclear.

A recent study has demonstrated that activin A negatively regulates bud formation in an *in vitro* WD culture system [43]. Immunohistochemical analysis demonstrated that activin A was expressed in the WD and phospho-Smad2/3, an intracellular mediator of activin signaling, was detectable in the nuclei of the WD cells, suggesting that the activin signaling pathway is normally active along the WD. When cultured with the surrounding mesonephros, WDs formed numerous ectopic buds in response to GDNF. Activin A completely inhibited GDNF-induced bud formation,



**Fig. 2.** Negative Regulation of UB Outgrowth from WD by Activin A

which was accompanied by inhibition of cell proliferation, reduced expression of Pax-2, and decreased phosphorylation of PI3 kinase and MAP kinase in the WD. To further clarify the role of activin A, the effects of activin blockade on WD cultured in the absence of mesonephros were also tested. WDs without mesonephros did not form ectopic buds, even in the presence of GDNF. Interestingly, blockade of activin action with a variety of agents (natural antagonist, neutralizing antibodies, siRNA) enabled GDNF to induce ectopic buds. In the ectopic buds induced by GDNF, activin A was absent and phospho-Smad2/3 was undetectable. These data suggest that activin A is an endogenous inhibitor of bud formation and that cancellation of activin A action may be critical for the initiation of this process (Fig. 2) [43].

#### *Delayed Branching of Ureteric Bud by Activin A*

Branching morphogenesis of the UB is positively and negatively regulated by various factors [39]. It has been demonstrated that activin A plays a critical role in this process [44, 45]. Activin A is produced by the UB, and activin type II receptors are localized in UB and MM. In an organ culture system, exogenous activin A reduced the size of cultured metanephroi, delayed UB branching, and enlarged UB tips. Exogenous follistatin enlarged the size of cultured metanephroi, increased UB branching, and promoted cell growth in the UB. Blockade of activin signaling by adenoviral transfection of dominantly negative activin mutant receptor mimics the effect of follistatin. Similar results have been obtained in an isolated UB culture system [46]. Taken together, it is possible that activin A produced by UB is an autocrine factor that negatively regulates UB branching. The effect of activin A on MM has also been analyzed. In cultured metanephric mes-

enchymal cells, activin A promoted cell growth and conversely, follistatin induced apoptosis. Furthermore, activin A induced the expression of epithelial differentiation markers in these cells, suggesting that activin A not only regulates UB branching but is also required for MM differentiation during kidney development [45].

#### *Phenotype of Activins or Activin Receptors Knockout Mice*

In order to analyze the physiological role of activins, various mutant mice lacking genes encoding activin subunits and receptors were developed by homologous recombination [47]. However, none of these mice developed any kidney abnormalities. Given that activins have been demonstrated to play a role in kidney development *in vitro*, the abnormalities found in these mutant mice were less than expected. This may be due to the existence of multiple activin subunits, and redundancy in the activin signaling system.

As an alternative approach to study the physiological role of activins, transgenic mice expressing the truncated type II activin receptor (tActR-II), which acts as a dominant-negative receptor and blocks the action of activins and related ligands, were developed [48]. In these mice, the gross morphological appearance of the kidneys was normal, and the size and wet weight of the kidneys were identical to those of normal mice. Serum concentrations of blood urea nitrogen (BUN) and creatinine, as well as creatinine clearance, were also identical to those in normal mice. However, histological examination revealed an increased number of glomeruli in the kidneys of the transgenic mice. Morphometrically, the number of glomeruli in transgenic mouse kidneys was approximately 180% that of normal mice. The mean area of a single glomerulus was significantly smaller than that in normal mice. Morphologically, there were no apparent abnormalities in glomerular components, including mesangial cells, matrix, endothelial cells and basement membrane. Branching of the UB determines the number of nephrons. Given that activin A inhibits the branching morphogenesis of the UB in organ culture systems [44–46], blockade of activin action would probably enhance the branching of the UB and thereby increase the number of nephrons. The action of activin or related ligands might be critical in the determination of nephron number.

#### *Modulation of MDCK Tubulogenesis by the Activin-Follistatin System*

MDCK cells cultured in collagen gels form branching tubules that exhibit apical-basolateral polarity in the presence of fibroblast-conditioned medium [49] or HGF [50]. This *in vitro* kidney tubulogenesis model provides an opportunity to test the effects of growth factors, which seem to be involved in kidney development, on tube formation without interaction with other cell types. Using this system, the role of the activin-follistatin system in branching tubulogenesis has been investigated [51]. MDCK cells expressed mRNA for the  $\beta_A$  subunit of activin as well as follistatin. These cells formed spherical cysts when cultured in collagen gel, and HGF added to these spherical cysts induced branching tubulogenesis. When activin A was added together with HGF, the branching tubulogenesis induced by HGF was blocked in a dose-dependent manner and the activin-treated cells were scattered. Conversely, follistatin induced branching tubulogenesis in the absence of HGF. Thin section electron microscopy showed polarized tubular formation with smooth basal surface in contact with the collagen gel and microvilli-rich apical surface facing the lumen. Interestingly, adenoviral transfection of the truncated activin type II receptor (AdextARII), which lacks the intracellular serine/threonine kinase domain, also induced branching tubulogenesis. HGF markedly reduced the expression of the  $\beta_A$  subunit in MDCK cells cultured in collagen gel. The level of mRNA expression for the  $\beta_A$  subunit of activin in branching tubules was markedly lower than that in cysts. These data suggest that activin A produced by MDCK cells inhibits branching tubulogenesis and HGF-induced branching tubulogenesis by blocking the production of activin.

### **Activin in Kidney Disease**

Tubular cells have the potential to regenerate following variety of insults. During acute tubular necrosis induced by renal ischemia or renal toxins, normal quiescent cells undergo dedifferentiation and regain their potential to divide after enhancing DNA synthesis. Following proliferation, the new cells then differentiate to restore the functional integrity of nephrons [52, 53]. Recent evidence suggests that growth factors critical for kidney development are potentially in-

volved in the repair process of the kidney and play important roles in these processes as mitogens, motogens and morphogens [39]. Activation of the regeneration process with these renotropic factors is considered a new approach for the treatment of kidney disease. The specific factors that play a critical role in kidney regeneration are of great interest.

#### *Regulation of Repair Process of Injured Tubules by Activin-Follistatin System*

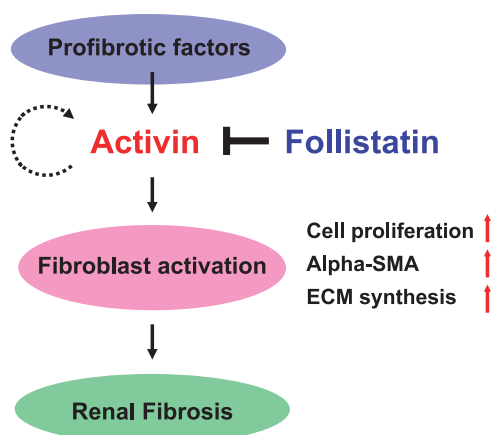
The activin-follistatin system plays an important role in kidney development. However, its biological effects in this organ after completion of development are unknown. The role of the activin-follistatin system in tissue repair and regeneration processes of the kidney has been extensively examined using an ischemia/reperfusion injury model [54]. As in other tissues, the expression of activin and follistatin changed significantly in the kidneys after ischemic injury. No expression of mRNA for the activin  $\beta_A$  subunit was detected in normal adult kidneys, but its expression increased markedly after renal ischemia. In addition, mRNA expression of the activin receptors was detected in normal kidneys, but was not altered after renal ischemia. Follistatin is expressed abundantly in adult kidneys. Intense localization of follistatin protein was observed in the cuboidal epithelial lining of distal and collecting tubules, as well as proximal tubules [55]. *In situ* hybridization revealed that the expression of mRNA for follistatin, abundant in tubular cells of the outer medulla of normal kidneys, decreased significantly after renal ischemia. To assess the role of endogenous activin A in renal regeneration, recombinant human follistatin was infused intravenously into rats with renal ischemia at the time of reperfusion. In control (saline-treated) rats, renal tubules were dilated and hemorrhagic changes were observed. In follistatin-treated rats, these abnormalities were markedly reduced. Similarly, apoptotic changes in renal tubules, as assessed by TUNEL method, were prevented by follistatin. Furthermore, proliferation of tubule cells, as assessed by bromodeoxyuridine labeling, was greatly increased in follistatin-treated rats. As expected, serum levels of creatinine and blood urea nitrogen were also significantly lower in follistatin-treated rats. These results support the notion that elevated production of activin A enhances tubular damage and inhibits the regeneration processes of damaged tubules. Consis-

tent with this notion, intravenous administration of recombinant activin A inhibited tubular cell proliferation after ischemic injury. Follistatin administered intravenously accelerates renal regeneration following renal ischemia by blocking the action of endogenous activin, thus indicating that the blockade of endogenous growth inhibitors is an alternative method for accelerating renal regeneration, instead of growth promoting factors infusion.

The repair processes in many tissues have long been thought to have similarities to developmental processes. For example, vimentin is an intermediate filament and a marker of undifferentiated mesenchymal cells. It is not present in normal tubular cells, but its expression was observed during tubular regeneration [56]. During tissue regeneration, a cascade of developmental gene pathways is apparently reactivated. The transcription factor Pax-2 is thought to play a key regulatory role during renal organogenesis [57]. Pax-2 deficiency causes defective growth of the fetal kidney and ureter [58], while overexpression is associated with epithelial overgrowth, including cysts or tumor formation [59, 60]. It was recently shown that Pax-2, which is not observed in differentiated tubular epithelia, is present in tubular cells after renal injury induced by a renal toxin [61]. Furthermore, reactivation of Pax-2 was observed in the nuclei of regenerating tubular cells after ischemic injury [62]. The number of Pax-2-positive cells in ischemic kidneys increased after administration of follistatin and, conversely, reduced after administration of activin A. In a renal tubular epithelial cell line, the inactivation of activin signaling pathways induced the upregulation of Pax-2 expression [63]. These results indicate that the activin-follistatin system modulates renal regeneration after injury by controlling the proliferation of Pax-2-positive cells [62].

#### *Activin and Renal Fibrosis*

Like TGF- $\beta$ , activins have been shown to be important regulators in tissue fibrosis in various organs [16]. The role of activin A in the fibrotic process of the kidney was recently analyzed using a unilateral ureter obstruction (UUO) model [64]. Immunoreactive activin A was upregulated in tubular cells in the kidneys with UUO, but not in normal and contralateral kidneys. Activin A promoted cell proliferation, enhanced the expression of type I collagen mRNA, and induced the



**Fig. 3.** Possible Mechanism of Activin Action in Renal Fibrosis

production of  $\alpha$ -smooth muscle actin [65] in a rat kidney fibroblast cell line (NRK-49F cells) as well as in primary cultured renal interstitial fibroblasts. In contrast, activin A did not affect the expression of  $\alpha$ -SMA and type I collagen in renal epithelial tubular cell lines LLC-PK1 and MDCK. Follistatin significantly inhibited cell proliferation in NRK-49F cells. The expression of activin A was induced by TGF- $\beta$ 1 or activin A itself. Induction of type I collagen expression by TGF- $\beta$ 1 was reduced by follistatin or by overexpression of truncated type II activin receptor. These results suggest that activin A produced by tubular cells activates renal interstitial fibroblasts in a paracrine fashion during the fibrotic processes of the kidney (Fig. 3).

A recent study has suggested a role for activin A in glomerulonephritis [66]. In cultured mesangial cells, interleukin-1 (IL-1) and basic fibroblast growth factor (bFGF), both mediators of glomerular inflammatory injury, dose-dependently increased activin A expression. Incubation with activin A significantly stimulated TGF- $\beta$ 1, plasminogen activator inhibitor [67]-1, and connective tissue growth factor (CTGF) expression and increased production of extracellular matrix proteins in mesangial cells. In a rat model of glomerular fibrosis (anti-Thy1 glomerulonephritis), there was a

**Table 1.** Functions of Activin in Developmental, Regenerative and Fibrotic Processes of Kidney

- |   |
|---|
| 1) Kidney organogenesis   |
| a. <i>Isolated Wolffian duct culture</i> [43]   |
| – Activin A inhibits ureteric bud outgrowth from the Wolffian duct  |
| b. <i>Metanephric kidney culture</i> [44, 45, 46]   |
| – Activin A inhibits ureteric bud branching   |
| c. <i>Transgenic mice expressing truncated activin mutant receptor</i> [48]   |
| – Number of glomeruli was increased in transgenic mice when compared to wild-type mice                                      |
| d. <i>In vitro tubulogenesis model</i> [51]   |
| – Blockade of activin action induced branching tubulogenesis  |
| 2) Tubular regeneration   |
| a. <i>Ischemia-reperfusion injury model</i> [54, 62]  |
| – Activin A was upregulated in kidney after renal ischemia  |
| – Exogenous follistatin enhanced tubular regeneration after renal ischemia and increased the number of Pax-2-positive cells |
| b. <i>Renal tubular epithelial cell line</i> [63]   |
| – Activin A inhibited cell proliferation and induced cell differentiation   |
| 3) Renal fibrosis   |
| a. <i>Unilateral Ureteral Obstruction model</i> [64]  |
| – Activin A was upregulated in tubular cells after UUO  |
| b. <i>Primary renal interstitial fibroblasts</i> [64]   |
| – Activin A promoted cell proliferation, induced $\alpha$ -SMA expression, and increased production of type I collagen      |
| c. <i>Primary rat mesangial cells</i> [65]  |
| – Activin increased production of extracellular matrix proteins   |

References are indicated in parentheses.

transient increase in the expression of glomerular activin A mRNA and protein, which was paralleled with expression of TGF- $\beta$ . These data suggest that activin A is a pro-fibrotic cytokine and modulates glomerular matrix expansion during the development of glomerulonephritis.

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