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Introduction

Ataxia oculomotorapraxia type 1 (AOA1) is an autosomal recessive disease characterized by early-onset cerebellar ataxia with oculomotor apraxia, cortico-spinal tracts involvement, peripheral neuropathy and mental retardation.

AOA1 is caused by mutations in *APTX*, which encodes the DNA strand-break repair protein aprataxin (APTX)

APTX has a role in mitochondrial function:

- APTX has been localized in mitochondria,
- APTX depletion in human cell lines, results in reduced mitochondrial mass, mtDNA damage and decreased mtDNA copy number,
- Reduced Coenzyme Q₁₀ has been observed in muscle and fibroblasts of patients with AOA1 carrying a specific APTX mutation (p.W279X)

Mechanism underlying mitochondrial alteration in AOA1 is still unclear

The aim of the study is to determine the role of APTX in mitochondrial metabolism disruption

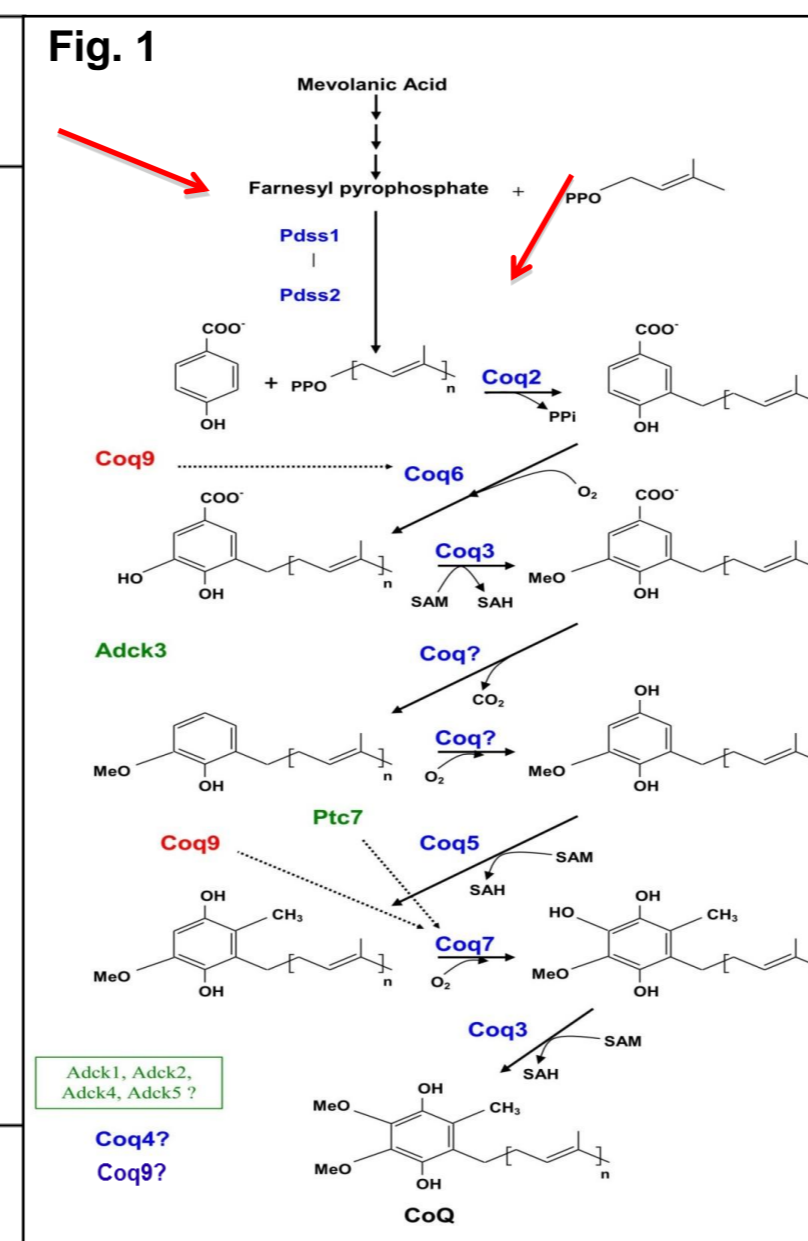
Results

APTX-mutant fibroblasts show reduced levels and biosynthesis of CoQ₁₀

CoQ₁₀ was measured by HPLC in primary fibroblasts derived from 9 patients. Seven out of nine patients had reduced level of CoQ₁₀ (Table 1). To define the cause of CoQ₁₀ deficiency, we studied the biosynthesis of CoQ₁₀ in fibroblasts, using the specific substrate (¹⁴C-PHB) of the condensation of the decaprenyl tail (Fig. 1). Reduction in the rate of ¹⁴C-PHB incorporation into the CoQ₁₀ molecule suggested a defect in COQ1 (PDSS1 and PDSS2) enzyme.

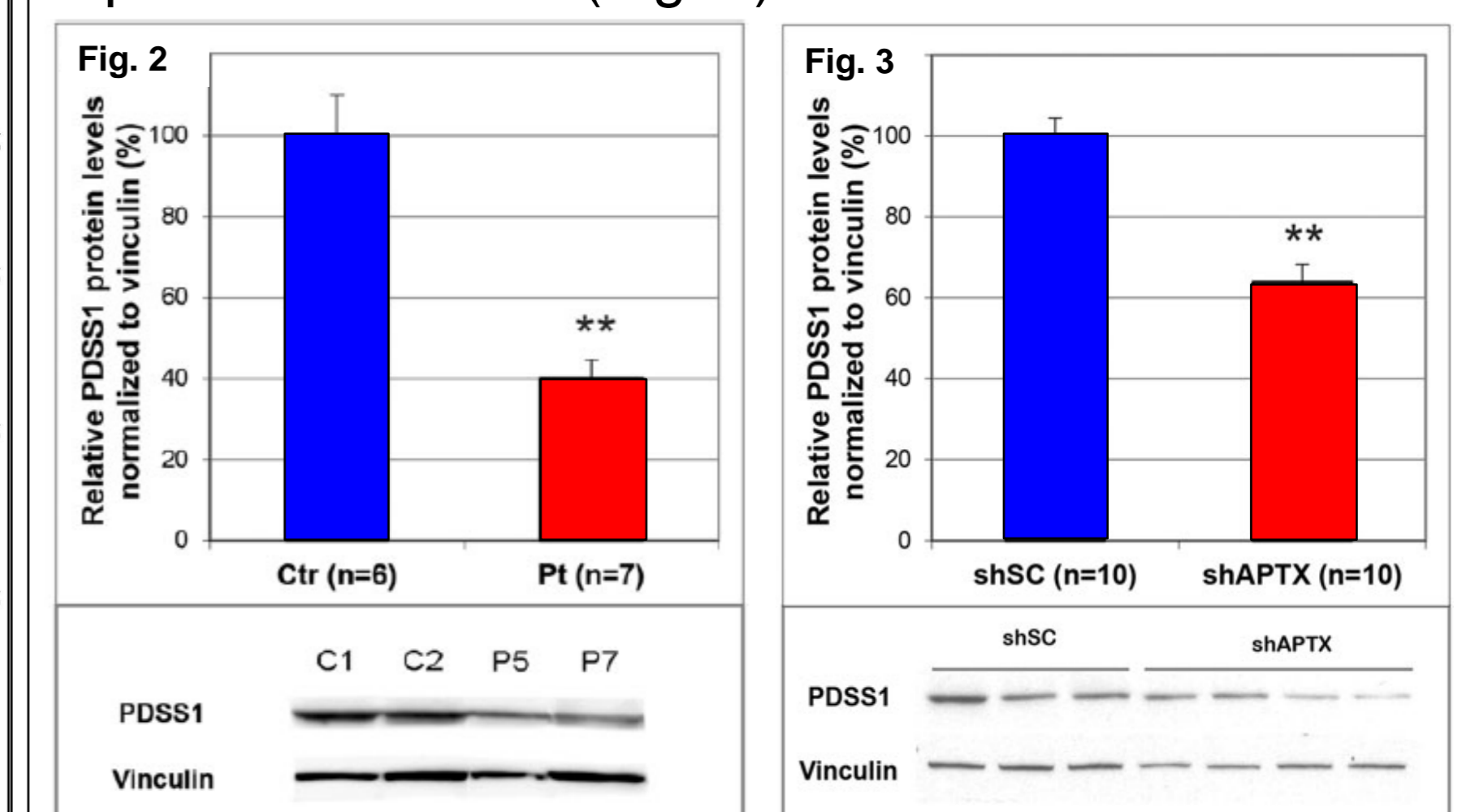
| Coenzyme Q ₁₀ Patient | Mutation | CoQ (ng/mg prot) | CoQ (%) | CoQ biosynthesis (%) |
|-----------------------------------------|-----------------------------|------------------------------|------------|----------------------|
| P1 | pW279X/pW279X | 43.5 | 68.2 | 62.3 |
| P2 | pW279X/pW279X | 33.4 | 52.3 | 66.2 |
| P3 | pW279X* | 46.4 | 72.7 | 54.5 |
| P4 | pR306X/pR306X | 95.1 | 149.0 | n/a |
| P5 | pW279X/pW279X | 27.7 | 43.4 | 39.7 |
| P6 | pW279X/pW279X | 61.9 | 97.0 | n/a |
| P7 | pW279X/pW279X | 40.4 | 63.3 | 45.3 |
| P8 | pW279X/pQ181X | 41.5 | 65.0 | 43.7 |
| P9 | pW279X/pW279X | 46.6 | 73.0 | 38.6 |
| Controls (n=8) | | 63.8 ± 4.3 | 100 ± 6.8 | 100 ± 6.6 |
| Biosynthesis of CoQ₁₀ | | | | |
| Assay 1 | CoQ ₁₀ synthesis | Percent of control mean | | |
| Controls (n=7) | | 2945.4 ± 195 DPM/mg prot/day | 100 ± 6.6 | |
| Patients (n=7) | | 1796.3 ± 54 DPM/mg prot/day | 61.0 ± 1.8 | |
| Assay 2 | | | | |
| Controls (n=5) | | 62.8 ± 10.4 DPM/mg prot/h | 100 ± 21.5 | |
| Patients (n=3) | | 56.4 ± 3.1 DPM/mg prot/h | 89.8 ± 4.9 | |

n/a, not available; DPM, disintegration per minute; prot, proteins. Values are expressed as mean ± SEM.



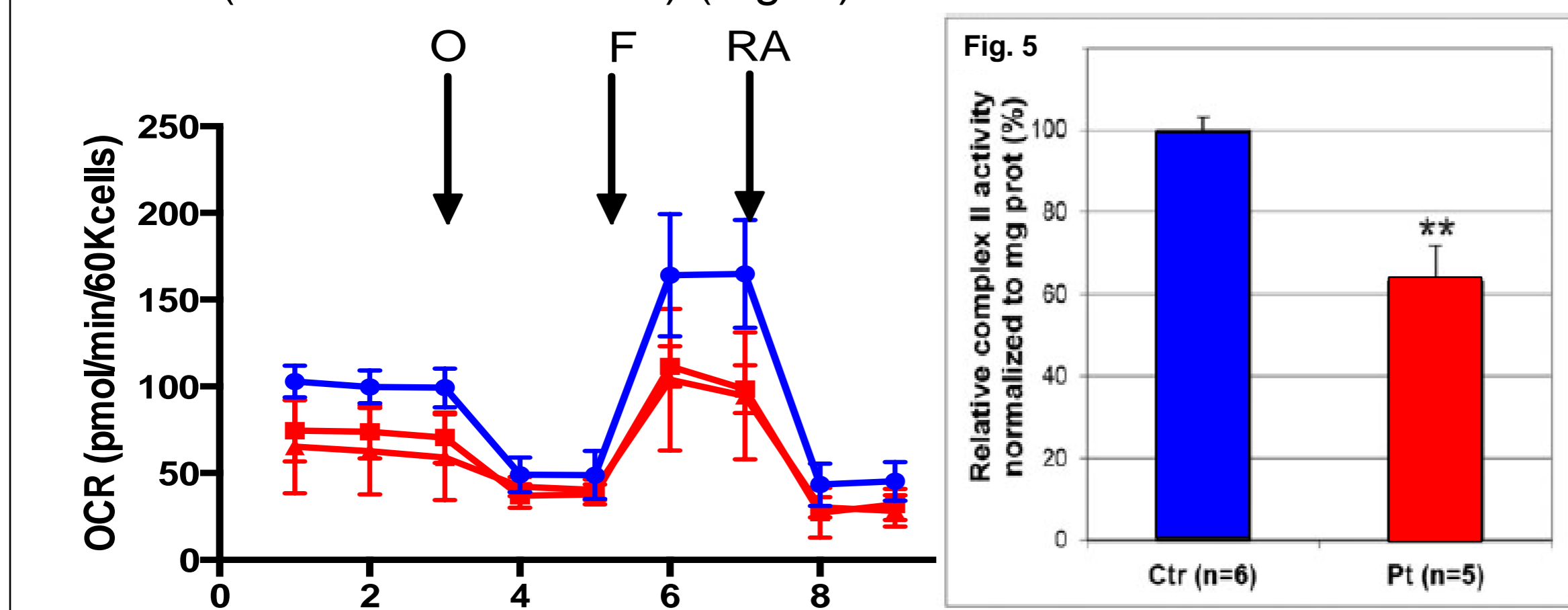
APTX-mutants show reduced PDSS1 expression

We investigated the steps of CoQ₁₀ biosynthesis by measuring mRNA and protein levels of enzymes involved in the CoQ₁₀ synthetic pathway and/or its regulation. Fibroblasts with the p.W279X mutation and low levels of CoQ₁₀ showed significantly reduced mRNA expression and protein level of PDSS1 (Fig. 2). The same result was obtained in APTX depleted HeLa cells (Fig. 3).



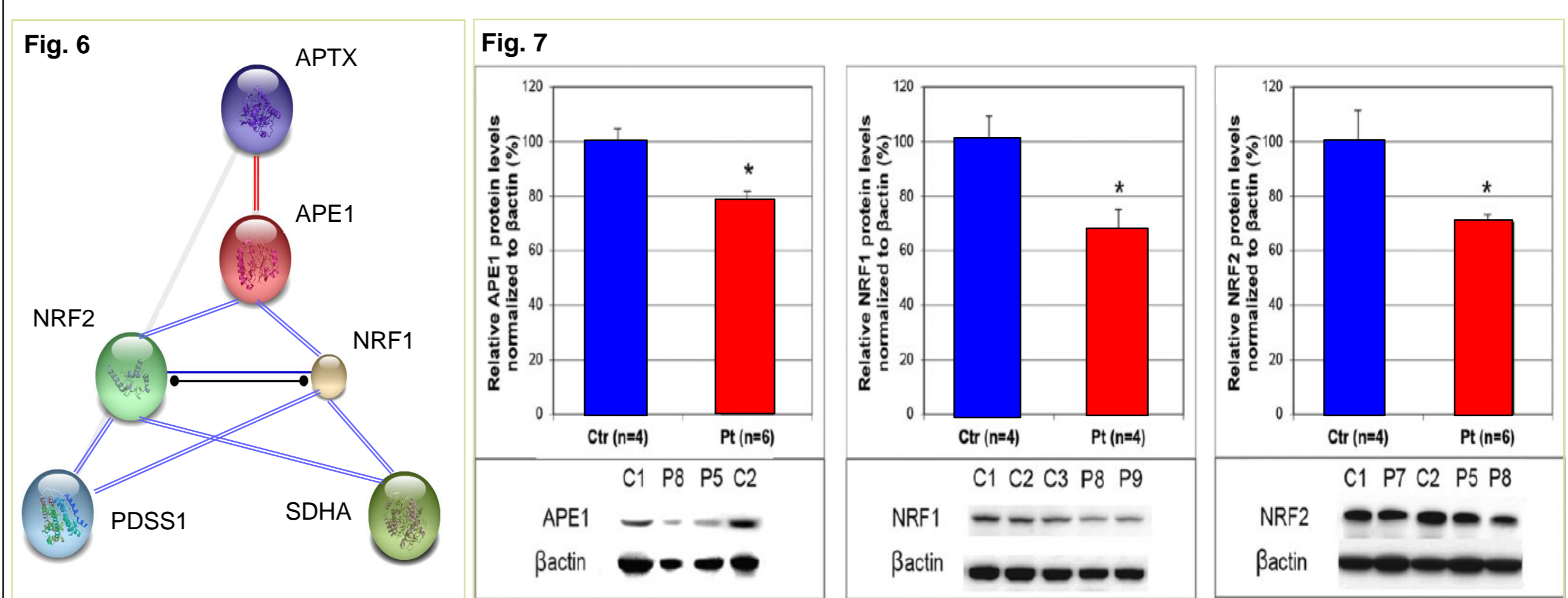
APTX-mutants manifest reduced respiratory chain activity

In order to assess the metabolic consequences of the mitochondrial abnormalities observed, we assessed the energy metabolism in CoQ₁₀-deficient fibroblasts. ATP turnover, expressed as coupling efficiency, showed no differences between control and APTX-mutant fibroblasts. However, respiratory control ratio was reduced in AOA1 cells (62 ± 19% of controls) relative to controls. We observed mild decrease in Complex I+III activity (61 ± 7% of controls), consistent with the mild CoQ₁₀ deficiency. SDH (Complex II) activity was significantly reduced (63 ± 9% of controls) (Fig. 5).



APE1/NRF1/NRF2 pathway is altered in APTX-mutant cells

Multiple mitochondrial genes, including succinate dehydrogenase subunit A (SDHA) and PDSS1, are co-regulated by NRF1 and NRF2 (Fig. 6). Only APTX-mutant fibroblasts and APTX knockdown cells, showed decreased levels of both transcription factors NRF1 and NRF2 (Fig. 7), consistent with the mild reduction of CoQ₁₀ and SDHA protein in these cells. APTX interacts with a variety of proteins; we analyzed the levels APE1, an interacting partner of aprataxin, known to regulate NRF1 function. AOA1 fibroblasts and APTX depleted HeLa cells showed decreased levels of APE1 (Fig. 7).



Conclusions

CoQ₁₀ deficiency in AOA1 is due to diminished CoQ₁₀ biosynthesis, and is associated with reduced respiratory capacity and decreased mitochondrial respiratory chain enzymes.

We demonstrated that mitochondrial dysfunction in AOA1 is related to its role in transcription regulation through the APE1/NRFs pathway.

Our findings shed some light on the link between APTX and mitochondrial function, which may lead to better understanding of the pathogenesis of AOA1 and other degenerative disorders, giving the opportunity to identify targets for novel therapeutic approaches.

References

- Le Ber, et al (2003) Cerebellar ataxia with oculomotor apraxia type 1: clinical and genetic studies. *Brain*
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