IL-1 alpha is myristoylated for monocyte surface translocation and promotes atherosclerosis in mice

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Background: The role of Interleukin-1 alpha (IL-1α) and beta (IL-1β) in the pathogenesis of atherosclerosis in vivo has been controversial for years. In contrast to IL-1β, which is dependent on the NLR family pyrin domain containing 3 (NLRP3) inflammasome, IL-1α can be tethered to the plasma membrane (csIL-1α) where it exerts pro-inflammatory effects. We characterised the role of IL-1α and the Nlrp3 inflammasome in a nongenetic hyperlipidemic mouse model and examined the function of csIL-1α in human monocytes.

Methods: Atherosclerosis was induced by a single injection of mutant PCSK9-AAV virus in wild-type (WT, referred to as PCSK9-AAV), Il1a-/-, Nlrp3-/-, and Il1b-/- mice, in combination with high-fat western diet (21% fat, 0.2% cholesterol) for 12 weeks. Plaque size and lipid content were histologically analysed. The serum proteome was studied using a targeted multiplex PEA (Olink Proteomics). Human primary monocytes and human umbilical vein endothelial cells (HUVECs) were used to examine csIL-1α-IL1R interaction by analyzing VCAM1 expression and monocyte adhesion. LPS was used to induce IL-1α protein synthesis and membrane translocation in vitro. Myristoylation was measured via flow cytometry.

Results: Il1a-/- animals showed significantly reduced atherosclerotic lesion size (-62% vs. PCSK9-AAV) and fat accumulation within the plaque (-64% vs. PCSK9-AAV). Knockout of Nlrp3 and IL-1β did not reduce plaque size or lipid content, indicating an Nlrp3-independent mechanism of the protective effect of Il1a-/-.

Conclusion: This study demonstrated a protective effect of Il1a deficiency on the development of atherosclerosis. CsIL-1α mediates monocyte-to-endothelial adhesion by increasing VCAM1 expression through endothelial IL1R1 signaling. The data underscore the importance of the juxtacrine signaling of IL-1α and its role in the development of atherosclerosis independent of circulating cytokine levels.
A: Representative histological images of the aortic root stained with haematoxylin/eosin (H&E) and (B) corresponding quantification of plaque area. PCSK9-AAV served as control of the atherosclerotic model. H&E stainings were imaged with 4× magnification, scale bar 100 μm. C: Percentage of calcein-labelled monocytes adherent to HUVECs after 4 hours. Monocytes were treated as indicated prior to labelling. Neutralising IL-1α antibody (nIL-1α Ab, 100 ng/ml) was added one hour before treatment with 100 ng/ml LPS. D: VCAM1 expression on HUVECs after 4-hr co-incubation with untreated or LPS-treated human monocytes, measured by flow cytometry. Neutralising IL1R1 antibody (nIL1R1 Ab, 10 μg/ml) was added to HUVECs one hour before the LPS treatment (100 ng/ml) of monocytes. E: Percentage of csIL-1α-positive cells after LPS stimulation (100 ng/ml) with or without 1 μM n-myristoyltransferase inhibitor IMP-1088. CsIL-1α was measured by flow cytometry. Data are presented as mean ± SEM, *p < 0.05.