

Hepatocellular Cystathionine γ lyase/Hydrogen sulfide Attenuates Non-Alcoholic Fatty Liver Disease by Activating Farnesoid X Receptor

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Keywords

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Abbreviation List: ACC: acetyl-CoA carboxylase; ApoC II: Apolipoprotein C II; BSEP: bile salt export pump; CARD11: caspase recruitment domain family member 11; CBS: cystathionine β synthase; CREB5: cAMP responsive element binding protein 5; CSE: cystathionine γ lyase; CYP7A1: Cholesterol 7-alpha hydroxylase; DCA: deoxycholic acid; FAS: fatty acid synthase; FXR: farnesoid X receptor; H₂S: hydrogen sulfide; HFD: high fat diet; HMGCR: HMG-CoA Reductase; ITPR2: inositol 1,4,5-trisphosphate receptor type 2; ITT: insulin tolerance test; LCA: lithocholic acid; LPL: lipoprotein lipase; LXR: liver X receptor; MAFG: v-maf musculoaponeurotic fibrosarcoma oncogene family protein G; MST: 3-mercaptopyruvate sulfur transferase; NAFLD: non-alcoholic fatty liver; NASH: non-alcoholic steatohepatitis; OGTT: oral glucose tolerance test; PID1: phosphotyrosine interaction domain containing 1; PPARs: peroxisome proliferator activated receptors; PTT: pyruvate tolerance test; SCD1: stearyl-CoA desaturase 1; SHP: small heterodimer partner; SPP1: secreted phosphoprotein 1; SREBP: sterol regulatory element binding protein; T β MCA: tauro- β -muricholic acid; TC: total cholesterol; TG: triglycerides; TSS: transcription start sites

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Abstract

Background & Aim: Hydrogen sulfide (H₂S) plays a protective role in non-alcoholic fatty liver disease (NAFLD). However, whether cystathionine gamma lyase (CSE), a dominant H₂S generating enzyme in hepatocytes, has a role in the pathogenesis of NAFLD is currently unclear.

Approach & Results: We showed that CSE protein expression is dramatically down-regulated, especially in fibrotic areas, in livers from NAFLD patients. In high fat diet (HFD)-induced NAFLD mice, or an oleic acid-induced hepatocyte model, the CSE/H₂S pathway is also down-regulated. To illustrate a regulatory role for CSE in NAFLD, we generated a hepatocyte-specific CSE knockout mouse (CSE^{LKO}). Feeding a HFD to CSE^{LKO} mice, they showed more hepatic lipid deposition with increased activity of the fatty acid de-novo synthesis pathway, increased hepatic insulin resistance and higher hepatic gluconeogenic ability, compared to CSE^{L^{oxp}} control mice. By contrast, H₂S donor treatment attenuated these phenotypes. Furthermore, the protection conferred by H₂S was blocked by Farnesoid X receptor (FXR) knockdown. Consistently, serum deoxycholic acid and lithocholic acid (FXR antagonists) were increased, and tauro-β-muricholic acid (FXR activation elevated) was reduced in CSE^{LKO}. CSE/H₂S promoted a novel post-translation modification (sulfhydration) of FXR at Cys138/141 sites, thereby enhancing its activity to modulate expression of target genes related to lipid and glucose metabolism, inflammation, and fibrosis. Sulfhydration proteomics in patient's liver supported the CSE/H₂S modulation noted in the CSE^{LKO} mice.

Conclusion: FXR-sulfhydration is a novel post-translational modification affected by hepatic endogenous CSE/H₂S that may promote FXR activity and attenuate NAFLD. Hepatic CSE deficiency promotes development of non-alcoholic steatohepatitis. The interaction between H₂S and FXR may be amenable to therapeutic drug treatment in NAFLD.

INTRODUCTION

Non-alcoholic fatty liver disease (NAFLD) is a common chronic liver disease characterized by lipid accumulation in hepatocytes (steatosis) with or without inflammation (non-alcoholic steatohepatitis, NASH) (1). NAFLD not only contributes to the development of cirrhosis, hepatocellular carcinoma and type 2 diabetes mellitus, but is also associated with an increased risk of developing cardiovascular events (2).

Nuclear receptors such as peroxisome proliferator activated receptors (PPARs), liver X receptor (LXR) and farnesoid X receptor (FXR) play a crucial role in the pathogenesis of NAFLD (3). Targeting nuclear receptors, such as FXR with the agonist obeticholic acid (OCA, which is approved by FDA to treat cholestatic liver diseases) may attenuate liver inflammation, steatosis and enhance insulin sensitivity (4, 5). Although this drug has some side effects, such as pruritus and increases in plasma low density lipoprotein cholesterol, OCA is a promising drug for the treatment of NASH (6).

Hydrogen sulfide (H₂S) is a novel gas transmitter that is dependent on cystathionine β synthase (CBS), cystathionine γ lyase (CSE) or 3-mercaptopyruvate sulfur transferase (3-MST) activity in the liver (7). CSE protein exceeds CBS protein by about 60-fold in mouse liver and about 90% H₂S biosynthetic activity might be sourced from CSE (8). In a high fat diet (HFD) induced NAFLD mouse model, hepatic CSE/H₂S is significantly down-regulated (9, 10). By contrast, H₂S donor lowers HFD-induced steatosis and serum triglyceride concentrations by AMPK-mTOR mediated hepatocyte autophagy (11), or by inhibition of hepatic acetyl-CoA activity (12). Furthermore, inhibition of 3-MST reduced HFD-induced NAFLD by up-regulating the CSE/H₂S pathway (13). Dietary methionine restriction or physical exercise may also attenuate HFD-induced hepatic lipid accumulation by enhancing the CSE/H₂S pathway (14, 15). More interestingly, H₂S donor modulated proliferator-activated receptor γ (PPARγ) activity in HFD mice (16), and reduced low density lipoprotein receptor independent of LXR activity (17), that may be relevant in NAFLD. Thus, these studies highlight a potential preventative role of CSE/H₂S in NAFLD, and also raise the following two main research questions: what are the relevant CSE/H₂S changes in NAFLD patients, and what is the role of hepatic endogenous CSE/H₂S regulation in NAFLD?

In the present experimental study, we have compared liver CSE expression in subjects with and without NAFLD. We then confirmed these changes in liver CSE expression both in HFD-induced NAFLD mouse liver and in oleic acid-stimulated primary mouse hepatocytes. In a hepatocyte-conditional CSE knockout mouse model, we also compared the liver lipid deposition changes involving FXR regulation.

METHODS AND MATERIALS

Patients

A total of 23 non-NAFLD individuals and 22 age- and sex-matched patients with NAFLD who had undergone liver biopsy were recruited at the First Affiliated Hospital of Wenzhou Medical University. The inclusion criteria of the study were as follows: obese patients undergoing bariatric surgery with no prior evidence of liver diseases. Liver biopsy was performed during the bariatric procedure. Exclusion criteria of the study were as follows: current excessive drinking (average daily consumption of > 20 g alcohol/day for women and > 30 g alcohol/day for men); chronic use of potential hepatotoxic drugs; viral hepatitis, or haemochromatosis (18). Written informed consent was obtained from each patient. The study protocol conformed to the ethical guidelines of the 1975 Declaration of Helsinki as reflected in a priori approval by the ethics committees of the First Affiliated Hospital of Wenzhou Medical University (NO. 2016-0246).

Animal model

Wild type mice were purchased from the Animal Center, Fuwai Hospital. CSE^{flox/flox} (CSE^{Loxp}) mice (C57BL/6J background) were generated by inserting loxP sites between exon 1 and 4 of CSE genes (**Figure S1**). Liver CSE conditional knockout (CSE^{LKO}) mice were generated by hybridizing CSE^{Loxp} mouse with an albumin promoter-driven Cre recombinase transgenic mouse. Male C57BL/6J mice, CSE^{Loxp} and CSE^{LKO} mice (sibling littermates) aged 8 weeks were fed with a high fatty diet (60 kcal% fat, Research Diets D12492, USA) for 12 weeks to induce NAFLD in the animal model. A normal chow diet (Research Diets 12450J) was used as the control diet. Two H₂S donors, i.e., NaHS (50 mg/kg/day) and GYY4137 (46 mg/kg/day), or vehicle (normal saline, 0.1 ml/day) treatments were given by intraperitoneal injections.

The mice were housed under a 12-hour light/dark cycle with *ad libitum* access to food and water. All animal experiments were approved by the Ethics Committee on Animal Care of Fuwai Hospital, and the investigation complied with the animal Management Rule of the Ministry of Health, People's Republic of China (document No. 55, 2001) and Guide for the Care and Use of Laboratory Animals of the US National Institutes of Health.

Statistical analysis

Data are expressed as means and standard deviation (SD). Normality of the data distribution was checked by the Kolmogorov Smirnov test. Differences between groups were evaluated with the unpaired Students t-test. For three or more groups, data were compared by using the one-way analysis of variance (ANOVA), followed by Tukey post-hoc analysis. Comparisons including two factors were performed by two-way ANOVA. Repeated measures on the same animals were analyzed using two-way mixed-effects ANOVA. All statistical analysis involved using GraphPad Prism v8.0.2. $P < 0.05$ was considered statistically significant.

NB: For other methods and material details, see the expanded Methods Section in the Online Data Supplement.

RESULTS

Down-regulation CSE/H₂S in NAFLD patients and mice

Since liver expresses CSE, CBS and 3-MST enzymes, we confirmed that CSE (5.8 fold increase compared to CBS, and 48.9 fold increase compared to 3-MST, **Figure S1B**) is the dominant H₂S generation enzymes in mouse liver tissues. We performed immunohistochemical staining for CSE and CBS in both 23 NAFLD patients (steatosis confirmed by hematoxylin-eosin (H&E) staining, **Figure S2A**) and 22 non-NAFLD individuals (see **Table S1**), who underwent liver biopsy.

In these NAFLD patient's livers, hepatic CSE expression was significantly down-regulated by about 33% compared to that in non-NAFLD patient's livers (**Figure 1A**). CBS protein was not changed (**Figure S2B**). More intriguingly, the CSE protein in the liver fibrotic area was markedly decreased (**Figure 1A**). To confirm this, we also measured the CSE/H₂S changes in HFD-induced NAFLD mouse liver. In keeping with the aforementioned changes in NAFLD patients, CSE mRNA (**Figure 1B**) and protein expression was decreased (**Figure 1C & Figure S3**) and confirmed by immunohistochemical staining (**Figure 1D**) in HFD mouse liver, without changes in CBS (**Figure S4**) and 3-MST (**Figure 1C**) expression. Coinciding with CSE down-regulation, hepatic H₂S generation was also reduced (about 33%) in HFD mice (**Figure 1E**).

To investigate whether the CSE/H₂S down-regulation was stimulated by lipid deposition, we treated primary mouse hepatocytes with oleic acid (400 μM) for 24 h. LipidTox staining showed abundant intracellular lipid droplets associated with a reduction in H₂S generation (mito-HS staining, **Figure 1F**). Accordingly, only CSE but not CBS or 3-MST protein, was decreased in oleic acid (OA)-stimulated cells (**Figure 1G**). These results suggest that hepatic lipid deposition was associated with CSE/H₂S reduction.

Hepatic CSE/H₂S attenuated HFD-induced steatosis and insulin resistance

To evaluate the role for hepatic CSE/H₂S in NAFLD, we constructed a hepatic-conditional CSE knockout mice (CSE^{LKO}) by loxp/cre recombination system (**Figure S1A**). This mouse model confirmed CSE deletion in hepatocytes by CSE mRNA and protein expression (**Figure S1C**), and there was a ~75% decrease in H₂S generation in liver tissues (**Figure S1D**). Because the CSE global knockout caused hyperhomocysteinemia, we also measured serum homocysteine and cysteine levels, and confirmed that hepatocyte specific deletion of CSE did not induce CBS mRNA expression (**Figure S5A**), or cause hyperhomocysteinemia, but lowered cysteine synthesis (**Figure S1E**). Feeding a HFD for 12 weeks, the CSE^{LKO} mice developed more severe hepatic steatosis compared to control mice (CSE^{Loxp}) (**Figure 2A**). H&E

and Sirius Red staining showed hepatocyte ballooning with Mallory-Denk bodies, lobular inflammation, and heightened collagen fiber in CSE^{LKO} liver (**Figure 2B**), thus indicating that these mice are prone to developing NASH. In line with hepatic lipid deposition, serum and liver triglyceride (TG) levels and serum total cholesterol (TC) levels were increased in CSE^{LKO} mice (**Figure 2C**). Oral glucose tolerance tests (OGTT, **Figure 2D**), intravenous insulin tolerance tests (ITT, **Figure 2E**), and pyruvate tolerance tests (PTT, **Figure 2F**) in CSE^{LKO} mice indicated that CSE deficiency exacerbated both glucose homeostasis and insulin resistance.

To investigate the major pathophysiological processes in CSE/H₂S on liver lipid metabolism, we screened the essential regulatory genes, including fatty acid de novo synthesis, triglyceride synthesis, fatty acid oxidation and fatty acid uptake by qRT-PCR. As shown in **Figure 2G**, most regulated genes were fatty acid de novo synthetic genes in CSE^{LKO} liver. These genes coding proteins (sterol response element binding protein 1c (SREBP-1c), acetyl-CoA carboxylase (ACC), fatty acid synthase (FAS), stearyl-CoA desaturase 1 (SCD1)) were also increased in CSE^{LKO} mice (**Figure 2H and Figure S5B**). In primary hepatocytes, CSE deficiency also increased lipid droplets, which were reversed by NaHS supplementation (**Figure S6**). These loss of function experiments indicate that hepatic CSE deletion exacerbated HFD-induced steatosis and insulin resistance, in part via enhancing fatty acid de novo synthesis; and increased risk of NASH.

In contrast, we treated HFD-induced NAFLD mice with two H₂S donors: NaHS (50 mg/kg/day) and GYY4137 (46 mg/kg/day) by intraperitoneal injections. HFD model mice received equal volumes of normal saline injection. After treating for 12 weeks, H₂S donors dramatically attenuated HFD-induced steatosis, by H&E (**Figure 3A**) and oil red O staining (**Figure 3B**) analysis. H₂S donor treatment also lowered serum and liver triglyceride levels, and liver cholesterol levels (**Figure 3C**). OGTT (**Figure 3D**), ITT (**Figure 3E**) and PTT (**Figure 3F**) data showed down-regulation of fatty acid de novo synthesis-associated genes: SREBP-1c, ACC, FAS, and SCD1. Protein expression was also lowered after H₂S donor treatment (**Figure 3G&H**). Therefore, the loss of function and donor's treatment experiments highlighted hepatic CSE/H₂S protection in NAFLD.

CSE/H₂S attenuated steatosis by FXR

To further clarify the possible molecular mechanism(s) of CSE/H₂S protection in steatosis development, we performed liver transcriptome analysis in both CSE^{LKO} and CSE^{LOXP} mice. Here, we identified 151 up-regulated and 561 down-regulated genes, and the heatmap graph is shown in **Figure S7A**, and the Volcano Plot in **Figure 4A**. GO enrichment genes included cholesterol, sterol, lipid, fatty acid metabolism and biosynthesis pathway (**Figure 4B**). By STRING function protein association network analysis, we focused on an essential metabolic nuclear receptor-farnesoid X receptor (FXR, Nr1h4 gene) in NAFLD (**Figure S7B**). Liver FXR protein expression was markedly reduced in CSE^{LKO} mice (**Figure 4C**), but it was up-regulated after NaHS treatment (**Figure 4D**). Consistently, knockdown CSE decreased, and overexpression

of CSE increased FXR mRNA (**Figure 4E**) and protein levels (**Figure 4F & Figure S8A**). H₂S donor treatment of primary hepatocytes also increased FXR protein expression (**Figure S8B**). In line with FXR expression and activation, some essential genes involved in fatty acid de novo synthesis: SREBP-1c, ACC, FAS, and SCD1 mRNA (**Figure 4G**) and protein (**Figure 4H**) expression also showed inverted changes associated with CSE knockdown or overexpression.

To confirm a role for FXR in CSE/H₂S protection, we designed and identified a small interference RNA of FXR (**Figure S9A**). We then constructed and purified the knockdown-FXR lentivirus, which effectively lowered the FXR protein level (**Figure S9B**) in primary mouse hepatocytes. By scrambled RNA-GFP control lentivirus transfection into hepatocytes (**Figure S9C**), we counted the multiplicity of infection (MOI) of the virus. Next, we injected control lentivirus (10 MOI) by tail vein, and confirmed the transfection efficiency *in vivo* (**Figure S9D**). Using lentivirus knockdown hepatic FXR, more severe hepatic steatosis developed with HFD-induction, and which abolished the protective effect of the H₂S donor on steatosis (**Figure 5A**). In addition, knockdown FXR also blocked the H₂S protection on triglyceride, cholesterol and glucose metabolism (**Figure 5B**); OGTT (**Figure 5C**), ITT (**Figure 5D**) and PTT (**Figure 5E**), respectively. For mechanism, H₂S-attenuated fatty acid de novo synthesis (**Figure 5F&G**) also blocked, while FXR-knockdown. We also measured the FXR target genes-HMG-CoA reductase (HMGCR), apolipoprotein C II (ApoC II), small heterodimer partner (SHP), v-maf musculoaponeurotic fibrosarcoma oncogene family protein-G (MAFG), cholesterol 7- α hydroxylase (CYP7A1) and lipoprotein lipase (LPL) expression in liver tissues, and confirmed activation FXR by H₂S treatment (**Figure S10**).

By contrast, the FXR target genes-SHP, MAFG, BSEP were down-regulated, and CYP7A1 was up-regulated in the liver of CSE^{LKO} mice compared to that observed in CSE^{LOXP} mice (**Figure S11**). Because FXR is a bile acid metabolism-related receptor, we measured serum bile acid compositions. As **Figure S12A** shows, the serum bile composition was different between CSE^{LKO} and CSE^{LOXP} mice. Interestingly, serum FXR antagonistic bile acids-LCA and DCA were increased, (similar to NAFLD patients (19)); whereas T β MCA (increased by FXR agonist (20)) was decreased in CSE^{LKO} mice (**Figure S12A&B**). These results indicate that hepatic CSE/H₂S may ameliorate steatosis in part via FXR activation.

CSE/H₂S sulfhydrates FXR to increase Zn²⁺ binding and promote FXR activity

FXR is a zinc finger protein that has two conserved C4 zinc fingers in its DNA binding domain (**Figure S13**). Zinc binding protein such as sirtin-1 could be sulfhydrated by H₂S and activating its de-acetylation activity (21). Therefore, we investigated whether the sulfhydration of FXR affects its activity. Treatment with NaHS caused FXR sulfhydration as identified *in vitro* (mouse liver tissues homogenate; **Figure 6A**) and *in vivo* (primary mouse hepatocytes; **Figure 6B**). Knockdown of CSE decreased (**Figure 6C**), and by contrast overexpression of CSE increased FXR sulfhydration (**Figure 6D**). In keeping with changes in cellular FXR sulfhydration, sulfhydrated FXR in CSE^{LKO}

liver tissues was dramatically decreased in comparison to that of CSE^{LOXP}. FXR sulfhydration was also reduced in NAFLD mice liver tissues, and was rescued by the H₂S donors (NaHS or GYY) (**Figure 6D**). In patients, we confirmed FXR sulfhydration in two non-NAFLD patients' liver samples, but no one in NAFLD patients (**Figure S14A**). These results highlight that FXR could be sulfhydrated by CSE/H₂S, that in turn down-regulates lipid deposition.

To investigate protein sulfhydration in NAFLD development, we measured the sulfhydrated-proteomics of patients. Using biotin-switch assays, we identified 160 sulfhydrated proteins in five NAFLD patients' liver tissues, and 246 proteins in five non-NAFLD patients. There were 106 proteins that overlapped between the two patient groups. Metascape Gene Ontology (GO) networks analysis showed that overlapped gene were enriched for fatty acid metabolism, monocarboxylic acid metabolism, sulfur amino acid metabolism, ROS and protein folding (**Figure S14B**). This proteomics analysis indicates CSE/H₂S determines protein sulfhydration including FXR and may play an important role in NASH.

To elucidate whether FXR sulfhydration was associated with its transcription activity, we first detected FXR nuclear translocation. As **Figure 6E & Figure S15A** indicate, sulfhydrated FXR mediated by NaHS significantly increased nuclear translocation. Conversely, removing FXR sulfhydration with DTT reduced nuclear translocation. Correspondingly, fatty acid synthesis related genes (SREPB-1c, FAS and ACC), cholesterol synthesis genes (HMGCR) and CYP7A1 were down-regulated with FXR sulfhydration, and were up-regulated after removing sulfhydration (**Figure 6F**). ChIP-qPCR data also confirmed that sulfhydration enhanced FXR binding to BSEP promoter, and de-sulfhydration lowered it (**Figure 6G & Figure S15B**). Consistent with these data, sulfhydration increased FXR and Zn²⁺ binding, whereas de-sulfhydration decreased it (**Figure 6H&I**). These data indicate that CSE/H₂S sulfhydrates FXR and increased its binding to Zn²⁺, thereby promoting its nuclear translocation, DNA binding activity and transcription regulation.

Because there were two conserved Zn²⁺ binding domains in FXR, we next identified the sulfhydration sites by mutation of major cysteine residue sites. We constructed five mutation plasmids targeting four CXXC domain as shown as **Figure S13**. We co-expressed FXR/FXR mutation, RXR, BSEP promoter luciferase report plasmids in 293-HEK cells, then demonstrated that all five mutations lowered FXR interaction with the BSEP promoter (**Figure S16A**), suggesting that Zn²⁺ binding is essential for FXR activity. By biotin-switch assays, Cys138/141 double mutation and all 8 cysteine residue sites mutation, dramatically reduced FXR sulfhydration (**Figure 7A, Figure S16B**), suggesting Cys138/141 of FXR as a major sulfhydration site. In line with sulfhydration lowering, H₂S-promoted FXR nuclear translocation was reduced in M1 and M1-4 mutations (**Figure 7B & Figure S16C**). FXR-sulfhydration regulated-fatty acid de-novo synthesis related genes (SREBP-1c, FAS and ACC) expression (**Figure 7C**), binding to Zn²⁺ (**Figure 7D&E**), and BSEP promoter binding activity (**Figure 7F, Figure S16D**) were also blocked by M1 and M1-4 mutation. Co-IP assay also showed

M1 mutation reduced FXR interaction with the RXR protein (**Figure 7G**). For functional analysis, treating 293-HEK cells with oleic acid (200 μ M) and NaHS (100 μ M) for 12 h, showed that the Cys138/141 mutation blocked H₂S-activated FXR target genes-SHP, MAFG, and BSEP mRNA expression (**Figure S17**). Taken together, these data confirmed that the Cys138/141 sites are the major sulfhydration sites and regulation sites of H₂S-promoting FXR activity.

FXR sulfhydration modulated lipid and glucose metabolism, fibrosis, and inflammation-related genes

Above data demonstrate that FXR sulfhydration at Cys138/141 sites promote its transcription activity. Therefore, whether FXR sulfhydration occupied genes take part in the pathogenesis of NAFLD was investigated. We performed ChIP-Seq in CSE deleted hepatocytes or Cys138/141S mutation of HEK-293 cells. By clustering FXR occupied peaks within \pm 3.0 kb from the center of transcription start sites (TSS), inhibiting sulfhydration (CSE knockout) slightly increased, and removing sulfhydration (Cys138/141S mutation) mildly decreased, FXR occupancy genes compared with the wild type (**Figure. 8A**). By cross-analysis we identified 1374 up-regulated and 700 down-regulated genes in Cys139/141S mutation-enrichment genes; and 212 up-regulated and 189 down-regulated genes in CSE knockout-enrichment genes. We then performed bulk RNA-sequencing, and identified 251 Cys139/141S mutation-enrichment genes by intersection between Chip-seq changed and RNA-seq changed genes, and 16 CSE-KO enriched genes (**Figure 8B**). GO analysis showed that these genes were enriched for fatty acid and cholesterol metabolism, insulin signalling and glucose metabolism, immunity and inflammation, and in the fibrosis pathway (**Figure 8C**). Amongst these genes, we used integrative genomics viewer screenshots to exhibit some selected genes-CREB5, PID1, ITPR2, SPP1, CARD11, and then confirmed that reducing (CSE KO) or removing (Cys138/141S mutation) sulfhydration FXR decreased binding to the promoter of these genes (**Figure 8D**). These high output experiments confirm CSE/H₂S protection by sulfhydrating FXR; thereby attenuating hepatic lipid deposition, insulin resistance, inflammation, and liver fibrosis.

DISCUSSION

CBS and CSE are two key enzymes in the methionine trans-sulfuration pathway, and function as a single system in mammalian cysteine generation and concomitant H₂S production (22). H₂S exhibits a protective role in high fatty diet-induced NAFLD (9, 11) or a methionine-choline deficient diet that induces NASH (23). These data infer that hepatic CSE might play an essential role in NAFLD development, due to the dominant expression of CSE in liver compared to CBS (8).

In the present study, we confirmed hepatocellular CSE expression was down-regulated in NAFLD patients, HFD-induced fatty liver mice and oleic acid-treated hepatocytes. Hepatocyte specific deletion of CSE exacerbated HFD-induced lipid deposition in hepatocytes, and the affected livers were prone to NASH with fibrosis. In contrast, H₂S donor treatment attenuated these effects of decreased CSE activity. Next, we demonstrated that FXR sulphydration in its zinc finger domain by the CSE/H₂S system, effected a novel translational modification that promoted FXR activity. In turn, FXR-activation could up-regulate CSE expression (24), and this interaction between FXR and CSE increased hepatic protection in NAFLD (**Figure S18**).

Many studies have addressed the effects of endogenous H₂S generation system changes in the pathogenesis of NAFLD. According to a previous study, CBS and CSE expression is up-regulated in HFD-induced mice after 5 weeks exposure (25). In contrast, in another study, it was demonstrated that CSE protein was significantly reduced in the liver of mice fed a HFD for more than 8 weeks, and this was associated with a compensatory increase in CBS protein (9). It has also been shown that expression of another H₂S generating enzyme in the liver (3-MST) is also increased both in patients with NAFLD and in a HFD mouse model (13). Here, we first confirmed that CSE protein levels were decreased in the steatotic liver tissues in NAFLD patients. Consistently, CSE protein expression is also down-regulated in the liver tissues of mice fed a HFD for 12 weeks; or in oleic acid-treated hepatocytes. However, we did not find that CBS or 3-MST was increased neither in our mouse model nor in our cell model. Collectively, these data suggest that hepatic CSE expression is up-regulated in the early stages of NAFLD, possibly due to compensatory changes induced by oxidative stress (25), or local inflammation with increased tumor necrosis factor- α (26) (TNF α has been shown to quickly induce CSE expression (27)). In cirrhosis phase, CSE protein was markedly decreased and was almost undetectable in the areas of fibrosis (**Figure1A**).

It has been previously shown that in the CBS knockout mouse liver there were enlarged multi-nucleated hepatocytes filled with microvesicular lipid droplets (28), hepatic oxidative stress, perilobular mononuclear inflammatory infiltration and pericellular fibrosis (29), and also hyperhomocysteinemia (28, 29) (i.e., a non-invasive marker of NAFLD(30)). In contrast to that model, global CSE deletion did not induce any indices of hepatic dysfunction and was associated with mildly elevated serum homocysteine levels, and H₂S production reduction (31). A global knockout of CBS and CSE induced methionine metabolism and caused hyperhomocysteinemia. To clarify the role of endogenous CSE in the pathogenesis of NAFLD, we used a hepatocyte specific CSE

knockout mouse (CSE^{LKO}) model, which decreased by ~75% the generation ability of H₂S, but did not increase serum homocysteine levels. Feeding these CSE^{LKO} mice with a HFD for 12 weeks, more severe hepatic steatosis, insulin resistance and increased serum lipids occurred, with more marked de novo fatty acid synthesis (coinciding with H₂S donor inhibitory effects(23)). However, there were no significant increases in fatty acid uptake, oxidation, or triglyceride synthesis. More interestingly, CSE^{LKO} mice showed an increase in lobular inflammation infiltration and collagen deposition, suggesting a potential risk to development of NASH with fibrosis. Global CSE knockout mice also developed severe hepatic steatosis with higher serum cholesterol and lower serum/liver triglyceride levels, in association with LXR α down-regulation (32). Although there was a similar steatosis phenotype between the global CSE knockout and our model, the intestinal CSE loss may also disturb fatty acid and bile acid absorption, which may cause the differences in triglyceride levels and LXR α expression in these two mouse models. Therefore, the present study provides more precise evidence of the distinct role of the hepatocellular endogenous CSE/H₂S system in the pathogenesis of NAFLD.

FXR is an essential metabolic nuclear receptor affecting cholesterol secretion, bile acid biosynthesis, glucose and lipid metabolism (33). The FXR agonists-obeticholic acid (34, 35) and cilofexor (36) have reduced hepatic fat content in phase 2 and 3 randomized clinical trials. FXR activation affects its target genes such as small heterodimer partner (SHP) and FGF19 expression and modulates fatty acid de novo synthesis (37), FAS (38), fatty acid oxidation (39), VLDL secretion (40) and triglyceride clearance (by increasing apoC-II and decreasing apoC-III, ANGPTL, to enhance LPL activity) (33). Here, by screening RNA-seq data and by enrichment analysis, we identified and confirmed that FXR levels were prone to CSE changes by genomic modification. By contrast, the effect of H₂S donor protection in NAFLD (in accord with previous studies (11, 41)) was blocked by knockdown of FXR, thus indicating that the FXR pathway may be a novel molecular mechanism of H₂S hepatocellular protection. Due to FXR activation, H₂S lowered fatty acid de novo synthesis genes, such as SREBP1c, FAS(41), ACC and SCD1; triglyceride clearance genes, such as apoC-II upregulation, apoC-III and LPL reduction. Therefore, this study is the first to show that CSE/H₂S system is a potential activator of FXR.

FXR activity is also mediated by post-translational modification. FXR agonist promote FXR Ser154 phosphorylation, modulating its activity, and subsequent degradation (42). Phosphorylation at Tyr67 site increases FXR activity contributing to bile acid synthesis (43). Methylation at Lys 206 site increases FXR transcription activity (44). Acetylation at Lys 217 enhances its stability but inhibits its binding activity to RXR (45). The Lys-122 and Lys-277 sites of FXR can be SUMOylated, and Lys-277 SUMOylation regulates FXR trans-repression of inflammatory gene expression (46). Atypical SUMOylation at Lys-325 which requires prior Ser-327 phosphorylation also contributes to FXR activity and its degradation (47). Here, we have identified a new post-translational modification, sulfhydrylation of FXR at Cys138/141 sites. This post-translational modification promotes FXR binding to Zn²⁺, FXR nuclear translocation,

and target genes transcription. Therefore, we propose that sulfhydration of FXR is a novel post translation of FXR, affecting its transcriptional activity.

Bile acids receptors G protein-coupled bile acid receptor 1 (GPBAR1, also known as TGR5) (48), and FXR activation increase CSE expression/activity and H₂S production (24). Experimental evidence also demonstrates that CSE is a target gene of FXR (24). Here, our data shows that CSE/H₂S may sulfhydrate FXR at a Zn²⁺ binding domain and promote its transcriptional ability. More intriguingly, Chip-seq association with RNA-seq cross-analysis showed that FXR sulfhydration was associated with changes in genes affecting lipid metabolism, inflammation, fibrosis and glucose metabolic regulation. Thus, hepatic CSE/H₂S and FXR interaction highlights a novel “positive feedback mechanism” affecting bile acid metabolism, hepatic steatosis and fibrosis.

Both clinical trials and animal experiments demonstrated that FXR agonist such as OCA or some small molecular chemicals, effectively reduced NAFLD, but increased potential risk of pruritus or cardiovascular diseases (serum cholesterol elevation). H₂S per se exerts anti-inflammation, anti-fibrosis and immunoregulatory effects, and also lowered serum cholesterol and anti-atherosclerosis. Furthermore, H₂S enhanced FXR activity, then heightened CSE/H₂S by “positive feedback” regulation, to make up CSE/H₂S system reduction in NAFLD. Thus FXR agonist combination with H₂S donor, or FXR agonist-derived H₂S donors to treat NAFLD, one maybe reduce FXR agonist dose, the other H₂S per se cardiovascular protection effects, could be effective for attenuate NAFLD or NASH, meanwhile avoid side-effects of FXR agonists.

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Contributors

BG and JC conceived the idea and designed the experiments. WX, CC, ZC, and HZ performed experiments. CC and QC performed the bioinformatic analysis. MHZ, JF and GX analyzed the data and improved the manuscript. CB and GT critically reviewed the data and contributed to writing the manuscript.

Competing interests

None declared.

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Figure Legends

Figure 1 Down-regulation of hepatic CSE/H₂S in NAFLD patients and mice. (A) Immunohistochemistry (IHC) staining of CSE in liver biopsy from NAFLD and non-NAFLD patients. Protein expression was evaluated by a H-score semiquantitative approach. Bar=20 μm. Red line area is a fibrotic area. There is no positive CSE staining in this area. (B) Endogenous H₂S generation key enzymes: CBS, CSE and 3-MST mRNA expression, protein expression by western blot (C) or IHC staining, Bar=20 μm (D) in HFD-induced NAFLD mice. N=5. (E) H₂S generation ratio of mouse liver tissue was measured by methylene blue assay. N=7-8. (F) Oleic acid (400 μM, OA) treated primary mouse hepatocytes for 48 h, LipidTox staining for lipid deposition, Mito-HS for H₂S production. (G) CBS, CSE and 3-MST protein expression were measured in OA treated hepatocytes. N=6.

Figure 2 Hepatic CSE deletion mice exacerbated HFD-induced NAFLD. (A) General pathology (Bar=1 cm), and Oil Red O staining (Bar=50 μm) for liver tissues in hepatic CSE specific knockout mice (CSE^{LKO}) and control loxp/loxp mice (CSE^{Loxp}). (B) H&E and Sirius red staining for liver tissues. Bar=50 μm. (C) Serum triglyceride (TG) and total cholesterol (TC) levels; (C) liver TG and TC level in NAFLD mice. (D) Oral glucose tolerance test (OGTT), (E) Insulin tolerance test (ITT), (F) Pyruvate tolerance test (PTT) was compared between CSE^{LKO} and CSE^{Loxp}. N=8-10 in all animal experiments. (G) Lipid metabolism related genes expression was assayed by qRT-PCR. N=6. ** *P*<0.01. (F) Fatty acid de novo synthesis related protein's expression was detected by western blot. N=6.

Figure 3 H₂S donor treatment ameliorated HFD-induced NAFLD and glucose metabolism disorder. In HFD-induced NAFLD mouse model, H₂S donor-NaHS or GYY4137 treatment for 12 weeks, then H&E staining (A), Oil Red O staining (B) was used for evaluation the lipid deposition in liver. Bar=50 μm. (C) Changes of serum TG, TC; and liver TG, TC level after H₂S donor treatment. * *P*<0.05; ** *P*<0.01. (D) OGTT, (E) ITT and (F) PTT changes after H₂S donor's treatment. Two-way mixed effect ANOVA was used, ** *P*<0.01 vs normal chow, # *P*<0.05 vs HFD. (G) Fatty acid de novo synthesis related protein expression by western blot. (H) The semi-quantitative analysis of above proteins by relative gray density plus area of target protein comparison to β-actin. ** *P*<0.01. 6 independent experiments were performed.

Figure 4 Hepatocellular endogenous CSE/H₂S up-regulated FXR expression. Total RNA was extracted from about 30 mg liver tissue of CSE^{LKO} or CSE^{Loxp} mice, then bulk RNA-sequencing was performed. (A) Volcano plot showed the down-regulated genes (blue) and up-regulated genes (Red) in CSE^{LKO} compared with CSE^{Loxp} mice. Hollow point presented the GO-enriched genes. (B) GO-analysis showed the changed genes enrichment the major pathway. (C) FXR protein expression in CSE knockout liver tissues. N=6. (D) Hepatic FXR protein level changes after H₂S donor treatment. Overexpression CSE by adenovirus, or knockdown CSE by siRNA in hepG2 cells, the FXR mRNA (E), and protein expression (F) changes. N=6. Then, the fatty acid de novo synthesis related genes: SREBP1-c, ACC, FAS, and SCD mRNA (N=4) (G) and protein expression (H) changes associated with CSE overexpression or knockdown. * *P*<0.05; ** *P*<0.01. N=6.

Figure 5 Knockdown FXR by lentivirus blocked H₂S donor's protection on NAFLD. Knockdown FXR shRNA lentivirus (10 MOI) was bolus injected by tail vein before HFD feeding. Continue feeding HFD for 12 weeks, the H&E staining for liver tissue morphology, Oil Red O staining for hepatic lipid deposition. Bar=100 μm (A). (B) Serum and liver TG, TC level were measured. * *P*<0.05, ** *P*<0.01. (C) OGTT, (D) ITT and (E) PTT was assayed for glucose metabolism. * *P*<0.05, ** *P*<0.01. N=8 in this animal experiment. (F) Hepatic FXR protein, fatty acid de novo synthesis genes: SREBP1-c, ACC, FAS and SCD protein expression was detected by western blot. N=6. (G) The semi-quantitative analysis of above protein. * *P*<0.05, ** *P*<0.01.

Figure 6 CSE/H₂S sulfhydrated FXR and promoted its binding to Zn²⁺ then enhancing its activity. (A) Biotin switch assay for FXR sulfhydration in vitro. (B) HepG2 cells were treated with NaHS or DTT, then the FXR immunoprecipitation using antibody, then biotin switch assay was performed for FXR sulfhydration in vivo. N=5. (C) Knockdown or overexpressed CSE, intracellular FXR sulfhydration level changes. N=3. (D) Alterations of hepatic FXR sulfhydration in animal model, including in CSE^{LKO} and CSE^{Loxp}, H₂S donor's treatment model and FXR knockdown model. N=4-6. (E) Nuclear FXR translocation was detected whilst FXR sulfhydration by NaHS or removing sulfhydration by DTT. N=6. (F) FXR sulfhydration dependent transcription activity was evaluated by FXR associated or target genes expression. N=8. (G) ChIP-qPCR identified the FXR binding activity to BSEP (a famous FXR target gene) promoter whilst FXR sulfhydration or de-sulfhydration. N=6. (H) Using His-tagged and Ni column system to purify FXR, then 1 μg FXR incubation with NaHS or DTT, Zn²⁺ and Zn²⁺-probe for 30 min, after washing, the FXR-Zn²⁺ binding was detected by fluorescence density count. N=6. (I) In vivo FXR-Zn²⁺ binding was showed by co-fluorescence of FXR (Red) and Zn²⁺ probe (blue), as white arrow pointed. In this figure, * *P*<0.05, ** *P*<0.01.

Figure 7 Identify the FXR sulfhydration sites. Mutation 4 zinc finger areas named M1, M2, M3, M4, or and all mutation (M1-4) of FXR, then transfected these plasmids into 293-HEK cells. (A) The changes of FXR sulfhydration while mutation different sites. N=5. (B) The different mutation effect on FXR nuclear translocation. N=5. (C) These mutations on H₂S-mediated SREBP1-c, ACC, and FAS mRNA expression. Mutation different sites on H₂S-mediated FXR-Zn²⁺ binding activity in vitro (D), or in vivo (E). N=6. H₂S regulated FXR binding to promoter of BSEP by ChIP-qPCR (F). (G) Co-IP assay for FXR and RXR interaction while H₂S donor treatment in FXR or M1 transfected cells. In this figure, * *P*<0.05, ** *P*<0.01. N=6.

Figure 8 Sulfhydrated FXR mediated lipid and glucose metabolism, inflammation, fibrosis genes. ChIP-seq was performed while reduced FXR sulfhydration (CSE knockout hepatocytes) or removed FXR sulfhydration (Cys138/141 sites mutation plasmid transfected 293-HEK cells). (A) Heat map of FXR-occupied genes based on FXR signal around FXR peak center. (B) Volcano plot showed the FXR-occupied genes while removed (mutation) or reduced (knockout) sulfhydration (upper panel), cross-analysis the bulk RNA-seq data then the overlapped genes were shown by Venn diagram. (C) Gene Ontology (GO) analysis in mutation or knockout enriched genes. (D) Visualization of ChIP-Seq results for five representative FXR sulfhydration occupied genes (lipid and glucose correlated: CREB5, PID1, IPTR; fibrosis correlated: SPP1;

inflammation correlated: CARD11) by Integrative Genomics Viewer (IGV). N=4.