



Review

Energy supply and the shape of death in neurons and lymphoid cells

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Abstract

Apoptosis and necrosis are considered as conceptually distinct forms of cell death. Nevertheless, there is increasing evidence that classical apoptosis and necrosis represent only the extreme ends of a wide range of possible morphological and biochemical deaths. The two classical types of demise can occur simultaneously in tissues or cell cultures exposed to the same stimulus, and often the intensity of the same initial insult decides the prevalence of either apoptosis or necrosis. This suggests that, while some early events may be common to both types of cell death, a downstream controller may be required to direct cells towards the organised execution of apoptosis. We have recently shown that intracellular energy levels and mitochondrial function are rapidly compromised in necrosis, but not in apoptosis of neuronal cells. Then, we went on to show that pre-emptying human T cells of ATP switches the type of demise caused by two classic apoptotic triggers (staurosporin and CD95 stimulation) from apoptosis to necrosis. Conditions of controlled intracellular ATP depletion, which was obtained by blocking mitochondrial and/or glycolytic ATP generation, were used in combination with repletion of the cytosolic ATP pool with glucose to redirect the death program towards apoptosis or necrosis. At least two distinct steps, the typical nuclear degradation, and the expression of annexin V-recognisable determinants on the cell surface require sufficient ATP generation. This suggests that some upstream regulators of cell death may be common to both types of cell demise, whereas yet unknown downstream processes decide its shape and the implications for the neighbouring tissue.

Keywords: ATP; apoptosis; excitotoxicity; glutamate; mitochondria; lamins

Abbreviations: MPP⁺, 1-methyl-4 phenyl-pyridinium

Mitochondria and neuronal demise

Several neurodegenerative diseases are characterized by a relentless neuronal demise. Cerebral ischemia or long-lasting

neurodegenerative conditions such as Alzheimer's disease (AD), Parkinson's disease (PD), amyotrophic lateral sclerosis (ALS), Huntington's disease (HD), AIDS-related dementia and multiple sclerosis/experimental allergic encephalitis may involve an increased rate of neuronal apoptosis (Bredesen, 1995). One common component in the pathogenesis of these diseases may be excitotoxicity (Choi, 1988, 1992; Meldrum and Garthwaite, 1990; Lipton and Rosenberg, 1994). Generally, excitotoxicity is induced by conditions favouring glutamate-accumulation in the extracellular space (Figure 1), and it is enhanced by conditions (e.g. energy depletion) that hinder cellular protective mechanisms (Choi, 1995; Novelli *et al*, 1988). Typical conditions leading to increased extracellular glutamate concentrations (Bullock *et al*, 1995; Rothman, 1984; Sandberg *et al*, 1986; Drejer *et al*, 1985; Beneviste *et al*, 1984) are depolarization of neurons, energy depletion due to hypoglycaemia or hypoxia (Cheng and Mattson, 1991, 1992; Cheng *et al*, 1994; Wieloch, 1985), exposure to nitric oxide (NO) (Bonfoco *et al*, 1996; Leist *et al*, 1997a) or defects in the glutamate reuptake systems (Rothstein *et al*, 1996). In addition, it has recently become clear that concomitant production of cytokines or other mediators can participate in cerebral damage (Chao *et al*, 1995; Philippon *et al*, 1994; Fassbender *et al*, 1994; Mitrovic *et al*, 1994).

Circumstantial evidence that mitochondria play important roles in excitotoxicity and also in slowly developing neurodegenerative disorders is abundant. Similar to other neurodegenerative diseases, those that primarily affect mitochondrial energy metabolism (i.e., mitochondrial encephalopathies) feature delayed onset, slow progression, decreased glucose metabolism and finally neuronal loss. Diseases, which are associated with point mutations in mitochondrial DNA seem to share some similarities with AD, or PD, and point mutations in mitochondrial DNA have occasionally been described in the latter diseases (Beal *et al*, 1993; Abe *et al*, 1995). Finally, decline in the activity of enzymes involved in the respiratory chain (e.g., complex I) caused for example by MPP⁺ (Kass *et al*, 1988; Hartley *et al*, 1994) and in pathological settings by nitrosative or oxidative stress (Gross and Wolin, 1995) would favour free radical generation, decreased Ca²⁺ buffering capacity and loss of plasma membrane potential with sensitisation to excitotoxicity (Coyle and Puttfarcken, 1993). This sequela of events may underlie the pathogenesis of PD (Fahn and Cohen, 1992).

In addition to possible pathogenic roles in the initial development of slow neurodegenerative disorders, mitochondrial failure is a consequence of several types of neuronal injury. Excessive glutamate release is a key event in stroke, and circumstantial evidence suggests that accumulation of this neurotransmitter at synaptic clefts occurs also in several other neuropathological conditions. The subsequent Ca²⁺ overload can elicit neurodisruption directly (i.e. activation of proteases or lipases) or stimulate

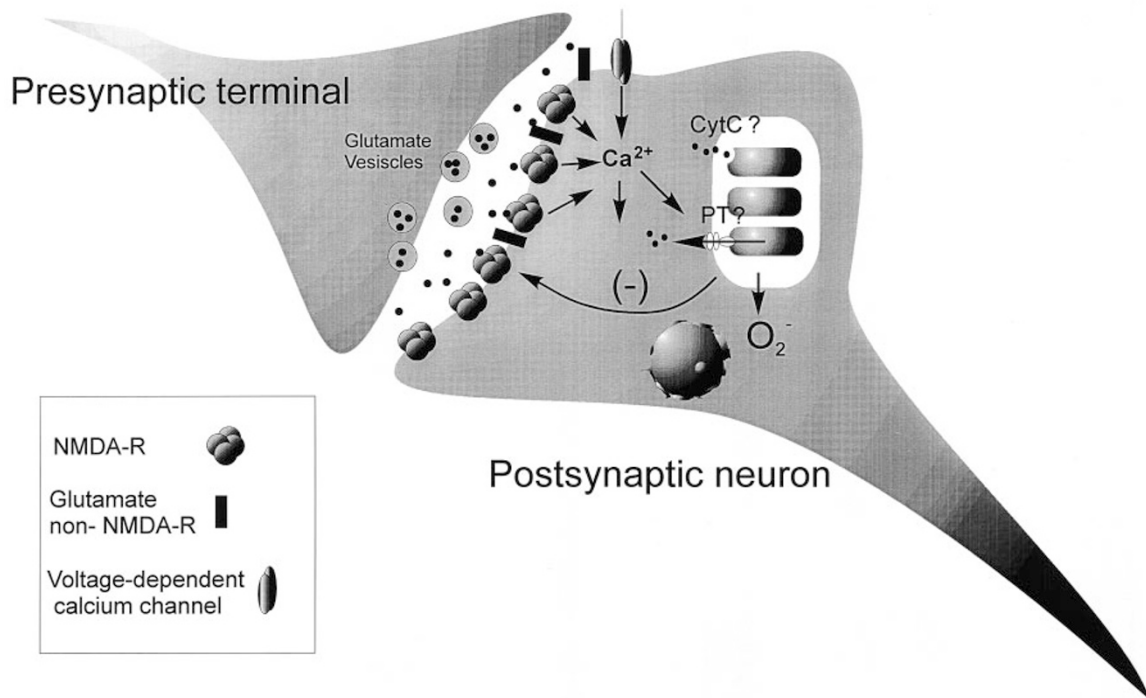


Figure 1 The role of mitochondria in excitotoxicity. Accumulation of glutamate in synaptic clefts by excessive release or deficient reuptake leads to a prolonged increase of Ca²⁺ in postsynaptic neurons. Glutamate-receptors of both N-methyl-D-aspartate (NMDA-R) and non-NMDA subtypes, as well as voltage-dependent channels contribute to Ca²⁺-overload. Mitochondria can play multiple roles as modulators of cytotoxicity. They can sequester Ca²⁺ and indirectly modulate NMDA-Rs and release reactive oxygen species, Ca²⁺ and proteins involved in apoptosis. (PT) permeability transition; Cyt C (holocytochrome C).

oxidative/nitrosative stress (Prehn *et al*, 1994; Mattson *et al*, 1995; Dugan *et al*, 1995; Reynolds and Hastings, 1995; Lafon-Cazal *et al*, 1993). Mitochondria participate in the defence against cytosolic Ca²⁺ overload by sequestering the ion (Gunter and Pfeiffer, 1990; Budd and Nicholls, 1996a). On the other hand, following Ca²⁺ overload or nitrosative stress they eventually release their Ca²⁺, generate reactive oxygen, collapse their membrane potential and swell (Gunter and Pfeiffer, 1990). Compromised mitochondria are not only passively involved in cytotoxicity (i.e., because they do not provide the cell with sufficient ATP), but they generate active signals involved in the execution of apoptosis (Liu *et al*, 1996; Zamzami *et al*, 1996; Newmeyer *et al*, 1994; Susin *et al*, 1996; Yang *et al*, 1997; Kluck *et al*, 1997). Thus, mitochondria may act both as buffers or enhancers, either helping cells to recover or accelerating their demise (Figure 1).

Mitochondria and neuronal Ca²⁺-overload

Ca²⁺ is sequestered into mitochondria mainly via a Ca²⁺-uniporter or via a Ca²⁺/2 Na⁺ antiporter, under conditions of Na⁺-overload (Gunter and Pfeiffer, 1990; Gunter *et al*, 1994). The uniporter is driven by the electrochemical membrane potential and has a high capacity, but a relatively low affinity. The lowest level at which brain mitochondria regulate [Ca²⁺]_i is 300 nM in the presence of spermine and may require even higher Ca²⁺ concentrations (1 μM) under unfavourable

conditions. Thus, it has been assumed that Ca²⁺ is imported into mitochondria only during conditions of prolonged stimulation and overload, or when transient high Ca²⁺ concentrations are created at local sites close to mitochondria. Studies in non-neuronal cells have shown that mitochondria can load Ca²⁺ during physiological agonist stimulation and may therefore contribute to lower elevated [Ca²⁺]_i (Rutter *et al*, 1993). Mitochondria have been shown to help reduce considerably elevated [Ca²⁺]_i following stimulation of neurons (White and Reynolds, 1995; Kiedrowski and Costa, 1995; Choi, 1988), and mitochondrial Ca²⁺-deposits were found in cerebellar granule cells (CGCs), lethally challenged with N-methyl-D-aspartate (NMDA) (Garthwaite and Garthwaite, 1986) or in hippocampal neurons after stroke (Simon *et al*, 1984). Although ATP production in some neurons (i.e. CGC) may be efficiently provided by glycolysis (Budd and Nicholls, 1996b; Choi, 1988), loss of mitochondrial membrane potential still results in ATP depletion during glutamate excitotoxicity (Ankarcrona *et al*, 1995). Accordingly, also in the presence of oligomycin to block the mitochondrial ATP synthase, the ATP/ADP ratio falls (Budd and Nicholls, 1996a). This may reflect inhibition of glycolysis due to oxidative stress or the increased demand of ATP for membrane pumps that counteract the massive Ca²⁺ or Na⁺-overload. Thus, the recovery of ATP levels and mitochondrial function following removal of glutamate (Ankarcrona *et al*, 1995) would be in line with a decreased Ca²⁺ load of cytosol and mitochondria. This is in agreement with recent findings

that mitochondria play a primary role as feedback modulators of excitotoxicity (Budd and Nicholls, 1996b). It was shown that mitochondria would act as Ca^{2+} sinks, that may lower at least for some time the Ca^{2+} -dependent negative feedback on the NMDA receptor (Legendre *et al*, 1993; Rosenmund and Westbrook, 1993) and thereby control the influx of Ca^{2+} in excitotoxicity. Thus, when Ca^{2+} accumulation in the mitochondria is prevented, the inhibition of the NMDA receptor would be enhanced (Budd and Nicholls, 1996a).

In intact mitochondria, Ca^{2+} -extrusion is an energy-requiring process (33 kJ/mol) (Gunter and Pfeiffer, 1990; Gunter *et al*, 1994), and may be stimulated by oxidative stress. Oxidation of NADH with subsequent mono-ADP-ribosylation of mitochondrial proteins or formation of cyclic ADP-ribose have been suggested as regulatory mechanisms. Such stress-enhanced Ca^{2+} -extrusion may be the basis of 'Ca²⁺ cycling', i.e., continuous uptake and release of Ca^{2+} by mitochondria, which precedes the dissipation of the membrane potential and mitochondrial failure (Gunter *et al*, 1994). The interaction of raised $[\text{Ca}^{2+}]_i$ and ROS may therefore lead to a vicious loop, since mitochondria, stressed as a consequence of NMDA-R stimulation (Dugan *et al*, 1995; Reynolds and Hastings, 1995) and Ca^{2+} -overload (Dykens, 1994), will produce increasing amounts of ROS and Ca^{2+} cycling, further damaging an already uncoupled respiratory chain.

A mechanism for mitochondrial Ca^{2+} -release fundamentally different from the one described above involves the permeability transition (PT) of mitochondria (reviewed by Zoratti and Szabò, 1995; Kroemer, 1997). PT is associated with the opening of a pore in the inner mitochondrial membrane, which makes it completely permeable to ions and small molecules. Under such conditions, mitochondrial Ca^{2+} is released without energy-requirement. PT may be induced in excitotoxicity following intracellular Ca^{2+} -overload or oxidative stress and eventually results in the breakdown of mitochondrial membrane potential and swelling of the mitochondria.

PT may be a key switch responsible for the induction of apoptosis (Figure 2). Studies in Dr Kroemer's laboratory have recently suggested that a 50 kDa mitochondrial protein can be released from the intermembrane space during PT, and cause apoptotic-like changes in isolated nuclei (Kroemer, 1997). In this context, it is important to note that energization of mitochondria and maintenance of their membrane potential does not necessarily require a functional respiratory chain. ATP may be imported from the cytosol via the ATP/ADP-translocator and then generate a membrane potential through the oligomycin-sensitive proton pump. Consequently, also mitochondria that are unable to perform oxidative phosphorylation due to the lack of proteins coded by mitochondrial DNA can undergo PT and trigger nuclear apoptotic changes (Zamzami *et al*, 1996). The observations that during neuronal apoptosis elicited by glutamate, mitochondrial function is only transiently depressed and the initial ATP loss is rectified suggest that a global collapse of mitochondrial membrane potential is not necessary for apoptosis. In view of recent findings from our (Leist *et al*, 1997c) and Dr Tsujimoto's laboratory (Tsujimoto, 1997), a residual amount of ATP is

actually required for the progression towards apoptosis. Thus, mitochondrial factors such as the 50 kDa protein released from mitochondria may cause apoptosis *in vivo* only in the presence of sufficient residual energy charge. An alternative role for mitochondria has been recently proposed by studies performed in the laboratories of Drs Wang, Green and Newmayer (Kluck *et al*, 1997; Yang *et al*, 1997), who have suggested that pores may form on the outer mitochondrial membrane through which holocytochrome c (the heme complexed form of cytochrome c) can enter the cytosol and subsequently participate in the activation of caspases involved in the execution of apoptosis (Figure 2). This step would not require a complete and irreversible loss of mitochondrial membrane potential and may be upstream or independent from the proteolytic activity observed by Kroemer and his collaborators.

Mitochondria in neuronal apoptosis and necrosis

The duration and extent of Ca^{2+} influx may determine whether neurons survive, die by apoptosis, or undergo necrotic lysis (Choi, 1995). According to this paradigm, continuous, but moderate increases in $[\text{Ca}^{2+}]_i$ such as those produced by a sustained slow influx or a transient massive overload may cause apoptosis, whereas an exceedingly high influx rate would cause rapid cell lysis. For instance, stimulation of cortical neurons with high concentrations of NMDA results in necrosis, whereas exposure to lower concentrations causes apoptosis (Bonfoco *et al*, 1995). Correspondingly, neuronal death in experimental stroke models is necrotic in the ischemic core, but delayed and apoptotic in the less severely compromised penumbra or border regions (Li *et al*, 1995; Charriaut-Marlangue *et al*, 1996). The sensors that switch neurons towards one or the other fate may be multiple. However, there is reason to believe some may be related to mitochondrial function (Ankarcrona *et al*, 1995). We have recently investigated the occurrence of apoptosis in an *in vitro* model of excitotoxicity: CGCs exposed to glutamate. Low concentrations of glutamate (i.e., 1–10 μM) triggered exclusively apoptosis, whereas with higher glutamate concentrations most neurons underwent rapid necrosis. The mechanisms deciding whether exposure of cerebellar granule cells to glutamate results in apoptosis or necrosis were also investigated. The experiments revealed that during and shortly after exposure to glutamate, a subpopulation of neurons died by necrosis. In these cells, mitochondrial membrane potential and energy stores collapsed, nuclei swelled and cellular debris were scattered in the incubation medium. Neurons surviving the early necrotic phase recover mitochondrial potential and energy levels. Later, they underwent apoptosis, as shown by the formation of apoptotic nuclei and chromatin degradation into high and low molecular weight fragments. These results suggested that the degree of mitochondrial dysfunction and/or the maintenance of sufficient energy levels were critical factors in determining the mode of neuronal death in this system. Moderate or transient

mitochondrial damage induced directly by Ca^{2+} -overload or by other as yet unknown upstream signals may actually contribute to the execution of apoptosis. However, a complete deenergization of the cell resulting from

extensive mitochondrial damage and a concomitant inhibition of glycolysis would not allow the ordered sequence of changes required for the apoptotic demise. In such a case, death would occur by cell lysis/necrosis.

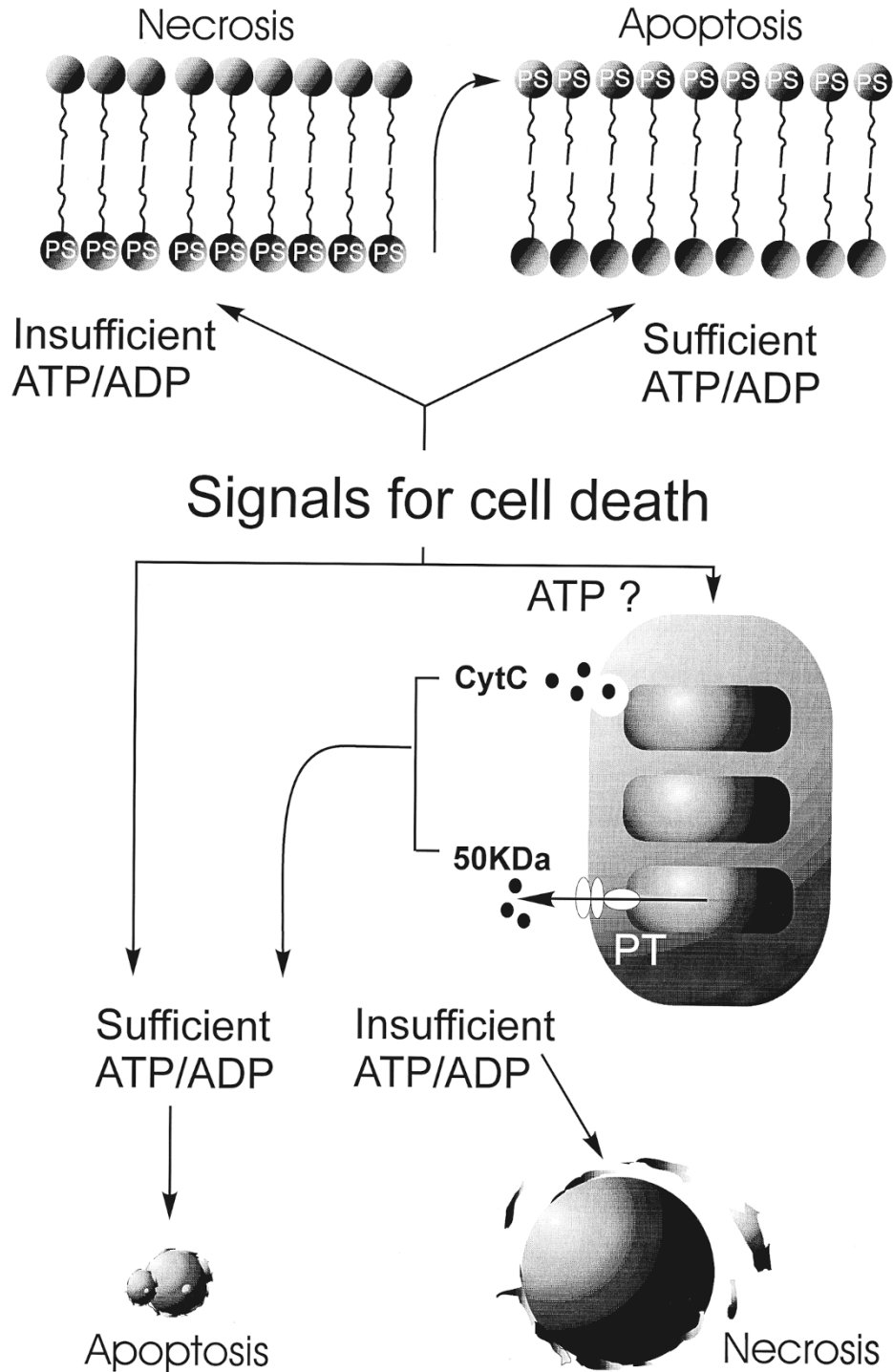


Figure 2 ATP as a switch in the decision between apoptosis and necrosis. Signals for cell death may activate initial common pathways involving both mitochondrial and non-mitochondrial pathways. Depending on the intracellular ATP/ADP level, the shape of cell demise can change from apoptosis to necrosis. At least two processes occurring in apoptosis seem to require adequate energy sources: (i) chromatin condensation, with proteolytic cleavage of some nuclear proteins by caspases (bottom); (ii) surface appearance of phosphatidylserines (PS) required for the recognition of apoptotic cells by scavenger cells. Proteins released by mitochondria include holocytochrome c (Cyt C) and the 50 KDa protein known as apoptosis-inducing factor (Kroemer, 1997). The latter is released during permeability transition (PT).

Therefore, it seems likely that apoptosis ensues under condition, where sufficient energy production remains to execute an internal 'death programme' (Figure 2). A common finding in apoptosis is for example that of morphologically intact mitochondria (Wyllie *et al*, 1980; Hajos *et al*, 1986; Bohlinger *et al*, 1996), which may be energised by electron transport or by import of cytoplasmic ATP. Accordingly, ATP levels are maintained in different neuronal populations undergoing apoptosis (Rothman *et al*, 1987; Ankarcona *et al*, 1995; Mills *et al*, 1995).

A role for ATP generation in the decision between apoptosis or necrosis

While apoptosis and necrosis have clearly distinguishing morphological and biochemical features (Kerr *et al*, 1972), it is becoming clear that they may share: (i) initial events, like receptor signalling (Ankarcona *et al*, 1995; Laster *et al*, 1988; Leist *et al*, 1997c) (ii) some controlling systems including Bcl-2 and mitochondrial permeability transition (Shimizu *et al*, 1996; Myers *et al*, 1995; Rosser and Gores, 1995; Aguilar *et al*, 1996) and (iii) effectors like caspases (Shimizu *et al*, 1996; Künstle *et al*, 1997). Notably, in several pathological conditions (e.g. brain ischemia; Linnik *et al*, 1995; Beilharz *et al*, 1995; Portera-Cailliau *et al*, 1995; Charriaut-Marlangue *et al*, 1996), liver damage by cytokines or toxins (Leist *et al*, 1995, 1996, 1997b) demise can occur simultaneously by necrosis or apoptosis. Work in our laboratory and in collaboration with Dr SA Lipton and Dr S Orrenius has previously shown that the intensity of the same initial insult decides the prevalence of either apoptosis or necrosis (Dyppbukt *et al*, 1994; Bonfoco *et al*, 1995). This suggests that while initial events may be common to both types of cell death, a certain metabolic condition would be required to activate downstream controllers which direct cells towards the organised execution of apoptosis (Figure 2).

Our previous work showed that intracellular energy levels are rapidly dissipated in necrosis, but not in apoptosis of neuronal cells (Ankarcona *et al*, 1995). Thus, to investigate whether ATP availability was involved in the decision between apoptosis and necrosis, we clamped intracellular ATP levels using a paradigm of glucose deprivation/repletion in conjunction with a blocker of the mitochondrial ATP synthase, oligomycin. Lymphoid cells (Jurkat) were treated with two well known inducers of apoptosis: (i) anti-CD95 antibodies (α CD95) that elicit apoptosis by activating cell surface CD95 receptors (Boldin *et al*, 1996; Muzio *et al*, 1996); (ii) the protein kinase inhibitor staurosporin (STS) that, at high concentrations, triggers apoptosis in a wide variety of mammalian cells (Weil *et al*, 1996). Neither of these stimuli requires a functional respiratory chain for the induction of apoptosis (Jacobson *et al*, 1993; Anel *et al*, 1996).

Our results showed that ATP is required for the progression of apoptosis (Figure 2). In conditions of ATP depletion, cells treated with either STS or CD95 underwent necrosis. Selective and graded repletion of the extramitochondrial ATP pool with glucose prevented necrosis and restored the ability of cells to undergo apoptosis. Maintenance of a certain ATP level may have simply

prevented an early, passive breakdown of the plasma membrane. In this case, the development of apoptosis, which would not necessarily require ATP, could have been precluded by a premature demise with apparent necrotic features. However, we found that necrosis elicited by either STS or CD95 in ATP-depleted cells occurred with a similar or rather longer time course than apoptosis, suggesting that an active step was required for the progression of apoptosis. Using a paradigm of pulsed ATP-depletion/repletion, we then showed that ATP generation either by glycolysis or by mitochondria was required for at least two events in apoptosis: the active execution of the final phase of apoptosis, which involves nuclear condensation and DNA degradation and the expression of membrane phosphatidylserines (Leist *et al*, 1997c) required for the recognition of apoptotic cells by macrophages (Figure 2).

Differences in the fate of the nucleus were epitomised by the selective degradation of lamins in apoptosis (Figure 3). This process pivotal for nuclear collapse in many systems (Oberhammer *et al*, 1994; Neamati *et al*, 1995; Ankarcona *et al*, 1996) is effected by the activation of caspases or other proteases during apoptosis (Lazebnik *et al*, 1995; Voelkel-Johnson *et al*, 1995; Zhivotovsky *et al*, 1995). In necrosis observed under conditions of ATP-depletion, caspase-mediated cleavage of lamin B was instead significantly reduced (Figure 3). This suggests that at least one component of nuclear degradation observed in apoptosis may require ATP-dependent steps for the activation and possibly the translocation of caspases into the nucleus. Recent work in Dr Orrenius' laboratory has indeed suggested that ATP is required for part of the nuclear changes elicited by cytosol extracted from CD95-treated cells (Kass *et al*, 1996). Nuclear Ca^{2+} uptake is also an energy requiring process and while characterising the Ca^{2+} dependent endonuclease activity in collaboration with Dr Orrenius (Jones *et al*, 1989), we showed that nuclei can

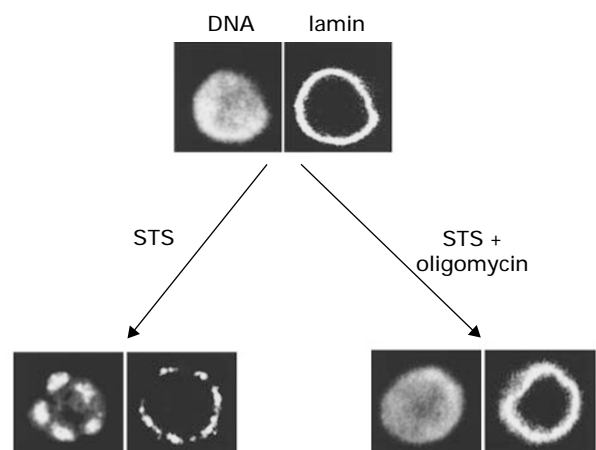


Figure 3 Prevention of lamin breakdown by ATP-depletion. Control cells (top) were treated with staurosporine (STS) or staurosporine plus oligomycin. Images were taken by confocal microscopy after immunocytochemical staining of lamin B (lamin) and DNA-staining with H-33342. Control cells and STS plus oligomycin-treated cells (necrotic) showed the typical circular lamin structure around non-condensed chromatin, while STS-treated (apoptotic) cells displayed chromatin condensation and fragmentation, associated with breakdown of the lamin nucleoskeleton.

sequester Ca^{2+} in an energy-dependent manner (Nicotera *et al.*, 1989, 1990). Notably, recent reports have shown that apoptosis suppression by Bcl-2 correlates with its ability to reduce nuclear Ca^{2+} uptake (Marin *et al.*, 1996; McConkey, 1996).

One relevant feature of apoptosis is the relatively efficient removal of apoptotic bodies (Savill *et al.*, 1993). Notably, apoptotic cells are not only removed by 'professional' macrophages, but also by 'normal' neighbouring cells e.g. in *C. elegans*, in many tumours, and in hepatocytes. Recognition and removal of dead cells is one of the most relevant features in apoptosis with respect to its value in limiting adverse effects in the neighbouring tissue. In view of these considerations, the finding that, in our experimental paradigm, early expression of phosphatidylserines is dependent on ATP and it is restricted to apoptotic cells has important implications (Leist *et al.*, 1997c) (Figure 2).

Conclusions

During the last couple of years it has become clear that mitochondria play an important role in apoptosis. The 'cytoplasmic controller' (Jacobson *et al.*, 1994) implicated in the activation of downstream events resulting in the typical apoptotic features including proteolysis of nuclear elements and DNA degradation may either directly originate from mitochondria (Kroemer, 1997) or require a mitochondrial factor for its activation (Kluck *et al.*, 1997; Yang *et al.*, 1997). This would also explain several observations of the protective effect of antiapoptotic proteins such as Bcl-2 or Bcl-x_L, which would act on the mitochondria (Golstein, 1997; Kroemer, 1997; Tsujimoto, 1997).

While not all pathways leading to cell death may necessarily involve mitochondria, several could activate upstream effectors/controllers that converge in their actions on mitochondria. This would cause permeability transition and/or permeabilization of the mitochondrial outer membrane (a pore forming protein deprived of an inhibitory partner? Golstein, 1997). Our findings suggest that either the upstream controller or the execution system(s) downstream of the mitochondria can be modulated by the availability of ATP (Ankarcrona *et al.*, 1995; Leist *et al.*, 1997c). The latter may be provided by glycolysis or, in tissues with high metabolic demand, primarily by energized mitochondria.

Thus, apoptosis and necrosis would be two extremes of a continuum of possible types of cell demise, whose shape and implications for the neighbouring tissue would be decided by the availability of ATP in addition to other factors in the dying cell and in scavenger cells. This would explain the frequent coexistence of both types of demise in pathological situations where individual cell death within the tissue would be decided by the energy supply. While it appears useful for multicellular organisms that physiological cell death occurs by apoptosis, it would be tempting to speculate that selection of apoptosis and necrosis may not be casual. Certain pathological conditions (i.e. pathogen infections) may require a rapid inflammatory response to clear the pathogen. In this case, the recruitment of a

systemic defence system involving infiltration, inflammation and also some additional tissue damage may be beneficial. Under these circumstances death by necrosis, which does not apparently lead to expression of surface recognition signals would be a better choice. Thus, apoptosis and necrosis could be seen not only as different forms of demise in individual cells, but they may reflect the decision of the tissue or organism, between a local, silent or a global, disruptive reaction.

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