

## 17 $\beta$ -Estradiol and Progesterone Regulate Expression of $\beta$ -Amyloid Clearance Factors in Primary Neuron Cultures and Female Rat Brain

Anusha Jayaraman, Jenna C. Carroll, Todd E. Morgan, Sharon Lin, Liqin Zhao, Jason M. Arimoto, M. Paul Murphy, Tina L. Beckett, Caleb E. Finch, Roberta Diaz Brinton, and Christian J. Pike

Neuroscience Graduate Program (A.J., J.C.C., C.J.P.), Davis School of Gerontology (T.E.M., S.L., J.M.A., C.E.F., C.J.P.), School of Pharmacy (L.Z., R.D.B.), University of Southern California, Los Angeles, California 90089; and Department of Molecular and Cellular Biochemistry (M.P.M., T.L.B.), University of Kentucky, Lexington, Kentucky 40536

The accumulation of  $\beta$ -amyloid protein ( $A\beta$ ) is a key risk factor in the development of Alzheimer's disease. The ovarian sex steroid hormones 17 $\beta$ -estradiol ( $E_2$ ) and progesterone ( $P_4$ ) have been shown to regulate  $A\beta$  accumulation, although the underlying mechanism(s) remain to be fully elucidated. In this study, we investigate the effects of  $E_2$  and  $P_4$  treatment on the expression levels of  $A\beta$  clearance factors including insulin-degrading enzyme, neprilysin, endothelin-converting enzyme 1 and 2, angiotensin-converting enzyme, and transthyretin, both in primary neuron cultures and female rat brains. Our results show that  $E_2$  and  $P_4$  affect the expression levels of several  $A\beta$  clearance factors in dose- and time-dependent manners. Most notably, expression of insulin-degrading enzyme is significantly increased by both hormones in cultured neurons and *in vivo* and is inversely associated with the soluble  $A\beta$  levels *in vivo*. These findings further define sex steroid hormone actions involved in regulation of  $A\beta$ , a relationship potentially important to therapeutic approaches aimed at reducing risk of Alzheimer's disease. (*Endocrinology* 153: 5467–5479, 2012)

Alzheimer's disease (AD) is an age-related neurodegenerative disorder that is the leading cause of dementia. Despite the strong association between increasing age and AD risk (1), the changes underlying this relationship are not well defined. One normal age change that has been identified as an AD risk factor is the depletion of sex steroid hormones (2). The relatively abrupt reduction in estrogens and progesterone ( $P_4$ ) at menopause has been theorized to contribute to the increased prevalence (3) and incidence (4, 5) of AD and worsened pathological (6) and clinical presentations (7, 8) of the disease in women. Among postmenopausal women, those with AD are characterized by lower 17 $\beta$ -estradiol ( $E_2$ ) levels in plasma (9), brain (10, 11), and cerebrospinal fluid (12). Further, estrogen-based hormone therapy in postmenopausal women is associated with a reduced risk of AD (13, 14),

although this field remains controversial (15, 16) and may require initiation of treatment in middle age (17).

How estrogens and perhaps  $P_4$  alter AD risk is not known. The critical molecule in initiating and driving AD neuropathology is widely hypothesized to be  $\beta$ -amyloid protein ( $A\beta$ ), a peptide that accumulates predominantly in hippocampus and select cerebrocortical regions of brain forming toxic oligomers and extracellular deposits (18). Increasing evidence suggests that sex steroid hormones are significant regulators of  $A\beta$  levels. For example, ovariectomy-induced depletion of  $E_2$  and  $P_4$  can result in elevated  $A\beta$  levels in wild-type rodents (19) and transgenic mouse models of AD (11, 20), an effect prevented by treatment with  $E_2$  (19, 21) and, in some cases,  $P_4$  (22). Peripheral manipulations of  $E_2$  do not affect  $A\beta$  levels in some animal models (23), suggesting maintained neural levels of  $E_2$  by

ISSN Print 0013-7227 ISSN Online 1945-7170  
Printed in U.S.A.

Copyright © 2012 by The Endocrine Society  
doi: 10.1210/en.2012-1464 Received April 24, 2012. Accepted August 6, 2012.  
First Published Online September 7, 2012

Abbreviations:  $A\beta$ ,  $\beta$ -amyloid protein; ACE, angiotensin-converting enzyme; AD, Alzheimer's disease; DPN, 2,3-dis(4-hydroxyphenyl) propionitrile;  $E_2$ , 17 $\beta$ -estradiol; ECE, endothelin-converting enzyme; ER, estrogen receptor; HSD, honestly significant difference; IDE, insulin-degrading enzyme; NEP, neprilysin; OVX, ovariectomized;  $P_4$ , progesterone; PPT, propylpyrazole triol; PR, progesterone receptor; RT, room temperature; TTR, transthyretin.

brain-derived mechanisms (11). Normally, A $\beta$  accumulation is prevented by a tightly regulated balance between its production and clearance. Prior work indicates that E<sub>2</sub> may reduce A $\beta$  production in part by regulating the processing and/or trafficking of its parent protein, amyloid precursor protein (24, 25).

Less well understood are the roles of E<sub>2</sub> and P<sub>4</sub> in regulating the clearance of A $\beta$ . An important clearance mechanism is enzyme-mediated degradation of A $\beta$ . A $\beta$ -degrading enzymes are expressed in neurons and are present in the hippocampal and cortical regions of the brain (26). Proteases implicated in A $\beta$  degradation include insulin-degrading enzyme (IDE), neprilysin (NEP), endothelin-converting enzymes-1 (ECE1) and -2 (ECE2), and angiotensin-converting enzyme (ACE) (27). IDE is the most abundant secreted A $\beta$ -degrading enzyme and is significantly involved in degradation of monomeric A $\beta$  (28, 29). Genetic deletion of IDE results in elevated brain levels of A $\beta$  (30), whereas IDE overexpression reduces A $\beta$  deposition (28, 29, 31). NEP plays an important role in the clearance of A $\beta$  (32, 33) but, unlike IDE, NEP is able to degrade oligomeric A $\beta$  (34). Recent evidence suggests NEP may be particularly important to AD because its expression is inversely correlated with levels of both A $\beta$  and cognitive impairment (35). Although IDE and NEP are often regarded as the key A $\beta$ -degrading enzymes, there is compelling evidence that several other factors also may significantly contribute to A $\beta$  degradation. Both ECE1 and ECE2 have been identified as A $\beta$ -cleaving enzymes capable of reducing A $\beta$  levels in *in vitro*, cell culture, and/or animal paradigms (36, 37). ACE has also been shown to degrade secreted A $\beta$ , and inhibition of ACE activity by either genetic or pharmacological approaches leads to elevated A $\beta$  (38, 39). In addition to A $\beta$ -degrading enzymes, A $\beta$  clearance can be facilitated by other factors such as transthyretin (TTR), which binds A $\beta$  and can lower A $\beta$  burden in transgenic mouse models of AD (26, 40).

To further define the relationship between ovarian hormones and regulation of A $\beta$ , we investigated the effects of E<sub>2</sub> and P<sub>4</sub> on the expression of IDE, NEP, ECE1, ECE2, ACE, and TTR. Three complementary experimental paradigms were used. First, we performed initial characterization and mechanistic investigation using short-term E<sub>2</sub> and P<sub>4</sub> treatments in primary neuron cultures. Next, we examined the effects of short-term E<sub>2</sub> and P<sub>4</sub> treatments *in vivo* to evaluate the extent to which culture observations extrapolate to the organism level. Finally, we performed long-term studies *in vivo* to model the effects of extended treatment regimens associated with hormone therapies. Importantly, because hormone therapies in postmenopausal women typically involve combinations of estrogens and progestogens, our long-term *in vivo* studies compared both individual and combined actions of E<sub>2</sub> and P<sub>4</sub>. In

addition, we evaluated brain levels of soluble A $\beta$  in hormone-treated rats to provide insight into the relationships between E<sub>2</sub> and P<sub>4</sub> regulation of the A $\beta$  clearance factors and the corresponding accumulation of A $\beta$ .

## Materials and Methods

### Materials

E<sub>2</sub> was purchased from Steraloids, Inc. (Newport, RI) and progesterone (P<sub>4</sub>) was purchased from Acros Organics USA (Morris Plains, NJ). Antiestrogen ICI 182,780, estrogen receptor (ER)  $\alpha$ -agonist propylpyrazole triol (PPT), and ER $\beta$  agonist 2,3-bis(4-hydroxyphenyl) propionitrile (DPN) were acquired from Tocris (Ellisville, MO). Progesterone receptor (PR) antagonists RU 486 was purchased from Sigma-Aldrich (St. Louis, MO), and Org 31710 was generously provided by N.V. Organon (Oss, The Netherlands). Stock solutions of all compounds were prepared in 100% ethanol.

### Animals

For cell culture studies, timed-pregnant female Sprague Dawley rats (Harlan Laboratories, Inc., Livermore, CA) were killed via CO<sub>2</sub> inhalation, and the pups were harvested for preparation of neuronal cultures. For *in vivo* studies, female Sprague Dawley rats were purchased either bilaterally ovariectomized (OVX) or sham-OVX at 3 months of age (Harlan Laboratories, Inc.). All animals were housed individually with *ad libitum* access to food and water under a 12 h-light, 12-h dark light cycle. All animal procedures were conducted under a protocol that was approved by the University of Southern California and in accordance with National Institute of Health standards.

### Primary neuron culture

Neuron-enriched, primary rat cerebrocortical cultures (~95% neuronal as determined by positive immunoreactivity with the neuron-specific antibody NeuN) were prepared with some modifications of a previously described protocol (41). Briefly, cerebral cortices were dissected from gestational day 17–18 Sprague Dawley rat pups (n  $\geq$  6 pups per preparation). Cortices were enzymatically dissociated using 0.25% trypsin at 37 C for 5 min. The reaction was quenched using two volumes of DMEM (American Type Culture Collection; Manassas, VA) containing 10% (vol/vol) fetal bovine serum. The tissue was centrifuged at 200  $\times$  g and the pellet was resuspended. The resultant cell suspension was mechanically dissociated using flame-polished glass Pasteur pipettes and then filtered through a 40- $\mu$ m cell strainer (Falcon, Franklin Lakes, NJ). The single-cell suspension was diluted using DMEM containing N2 supplements (without P<sub>4</sub>) and plated onto poly-L-lysine-coated multiwell plates at a final density of 8  $\times$  10<sup>5</sup> cells/cm<sup>2</sup>. Cultures were maintained at 37 C in a humidified incubator supplemented with 5% CO<sub>2</sub>. All experiments were started after 1–2 d *in vitro* and were repeated in three to five independent culture preparations. Cultures were treated with ethanol vehicle or various combinations of E<sub>2</sub>, P<sub>4</sub>, and ER and PR agonists and antagonists that were diluted from ethanol stock solutions with culture medium to yield a final ethanol concentration of  $\geq$ 0.01%.

## Hormone treatments in animals

In the short-term experiment, rats were randomly assigned to four groups ( $n = 7/\text{group}$ ): sham OVX + vehicle (Sham); OVX + vehicle (OVX); OVX + 17 $\beta$ -estradiol (OVX+E<sub>2</sub>); and OVX + progesterone (OVX+P<sub>4</sub>). Treatments were administered via two injections, the first injection 7 d after sham OVX or OVX procedure and the second injection 24 h later. Injections contained either vehicle (100  $\mu\text{l}$  canola oil), 10  $\mu\text{g}$  E<sub>2</sub> (100  $\mu\text{l}$  of 100  $\mu\text{g}/\text{ml}$  E<sub>2</sub> in canola oil), or 500  $\mu\text{g}$  P<sub>4</sub> (100  $\mu\text{l}$  of 5 mg/ml P<sub>4</sub> in canola oil), doses previously demonstrated to yield physiological levels of E<sub>2</sub> and P<sub>4</sub> in OVX rats (42). Tissues were collected 24 h after the second injection.

For the long-term experiment, rats were either sham OVX (Sham,  $n = 8$ ) or OVX. OVX rats were randomly assigned to one of six groups ( $n = 8/\text{group}$ ): placebo (OVX), continuous E<sub>2</sub> (OVX+E<sub>2</sub>), continuous P<sub>4</sub> (OVX+P<sub>4<sub>cont</sub></sub>), cyclic P<sub>4</sub> (OVX+P<sub>4<sub>cyc</sub></sub>), continuous E<sub>2</sub> with continuous P<sub>4</sub> (OVX+E<sub>2</sub>+P<sub>4<sub>cont</sub></sub>), or continuous E<sub>2</sub> with cyclic P<sub>4</sub> (OVX+E<sub>2</sub>+P<sub>4<sub>cyc</sub></sub>). Rats were treated with two consecutive 30-d cycles of hormone treatment (60 d total) initiated 7 d post-OVX and delivered via slow-release sc implants (Innovative Research America, Sarasota, FL). On d 0, Sham and OVX groups were implanted with placebo pellets; each E<sub>2</sub>-treated rat was implanted with a 0.72-mg E<sub>2</sub> 90-d release pellet; each continuous P<sub>4</sub>-treated rat was implanted with a 450-mg P<sub>4</sub> 90-d release pellet; each cyclic P<sub>4</sub> rat was implanted with one 50-mg P<sub>4</sub> 10-d release pellet at d 20 and a second pellet at d 50. The efficacy of this cyclic P<sub>4</sub> regimen has been demonstrated previously (22). After the treatment period, the rats were killed, and each brain was rapidly dissected and bisected midsagittally. The hippocampus from one hemisphere was snap frozen for use in RNA and protein extractions, and the other entire hemisphere was snap frozen for use in  $\beta$ -amyloid ELISA. Uteri were dissected, blotted, and weighed as a bioassay of estrogen levels.

## RT-PCR and quantitative PCR

For RNA extractions in all experiments, treated cells and tissues were lysed using TRIzol reagent (Invitrogen, Carlsbad, CA) and processed for total RNA extraction as per manufacturer's protocol. Purified RNA (1–2  $\mu\text{g}$ ) was used for reverse transcription using the Superscript First strand synthesis system (Invitrogen) as described previously (43), and the resulting cDNA was used for both standard PCR and real-time quantitative PCR. Quantitative PCR was carried out using DNA Engine Opticon 2 continuous fluorescence detector (MJ Research, Inc., Waltham, MA). The amplification efficiency was estimated from the standard curve for each gene. Relative quantification of mRNA levels from various treated samples was determined by the  $\Delta\Delta\text{Ct}$  method (44). The following primer pairs were used. IDE: forward, 5'-GGAAGCGTTCGCCGAGATCGCA-3'; reverse, 5'-TCTGAATCGACAGCGTTCAC-3'; NEP: forward, 5'-CATTGAAGTATGGGGGCATC-3'; reverse, 5'-CCTGAAATGCCAGACTGT-3'; ECE1: forward, 5'-GAGCTGACTCATGCTTTC-3'; reverse, 5'-CAGCTCCGTTCTTCTTTA-3'; ECE2: forward, 5'-AGAAAGTCTCGCTGCCT-3'; reverse, 5'-AGTGCGACAACAAGAAA-3'; ACE: forward, 5'-GAGCCATCCTTCCTTTT-3'; reverse, 5'-GGCTGCAGCTCCTGGTAT-3'; TTR: forward, 5'-GGCTCACCACAGATGAGA-3'; reverse, 5'-ACAATGGGAGCTACTGC-3';  $\beta$ -actin: forward, 5'-AGCCATGTACGTAGCCATCC-3'; reverse, 5'-CTCTCAGCTGTGGTG-GTGAA-3'.

## Western blots

For all experiments involving protein analysis by immunoblotting, treated cultures and tissues were lysed using a reducing sample buffer (62.5 mM Tris-HCl, 1% sodium dodecyl sulfate, 2.5% glycerol, 0.5% 2- $\beta$ -mercaptoethanol), boiled for 5 min at 100 C, and centrifuged at  $13,000 \times g$  for 10 min. The resultant supernatants were used for Western blot analysis using a standard protocol previously described (41). Briefly, equal sample amounts were electrophoresed in 10% polyacrylamide gels and transferred onto polyvinylidene difluoride membranes (Millipore Corp., Medford, MA) at constant 100 V for 1 h. The membranes were rinsed in blocking solution (5% BSA in 10 mM Tris, 100 mM NaCl, 0.1% Tween, pH 7.4) for 1 h at room temperature (RT), followed by incubation with primary antibody ( $\alpha$ -IDE, Abcam; San Francisco, CA) diluted in blocking solution for 1 h at RT. The membranes were then incubated with corresponding horseradish peroxidase-conjugated secondary antibody for 1 h at RT and detected using ECL (Amersham; Arlington Heights, IL).

## $\beta$ -Amyloid ELISA

Brain levels of soluble A $\beta$ 1–42 were determined by ELISA with modifications of a previously described protocol (45). In brief, hemi-brains were processed for A $\beta$  ELISA after extracting soluble protein by homogenization in ice-cold DEA buffer (0.2% diethylamine, 50 mM NaCl; 1 ml/200 mg tissue) with complete protease inhibitor cocktail (Amresco, Solon, OH) using an AHS200 PowerMax polytron. Homogenates were centrifuged at  $20,800 \times g$  at 4 C for 30 min, after which the supernatants were collected and neutralized (one tenth volume of 0.5 M Tris-HCl, pH 6.2). Levels of soluble A $\beta$  were then measured via sandwich capture ELISA using a Colorimetric BetaMark  $\beta$ -Amyloid x-42 ELISA kit (Covance Laboratories, Inc., Princeton, NJ).

## Statistical analyses

Raw data from all experiments were assessed by ANOVA using GraphPad Prism (version 5.0; GraphPad Software, Inc., San Diego, CA). For analyses showing significant main effects, between-groups comparisons were made using the Tukey honestly significant difference (HSD) test. Effects with  $P < 0.05$  were considered significant.

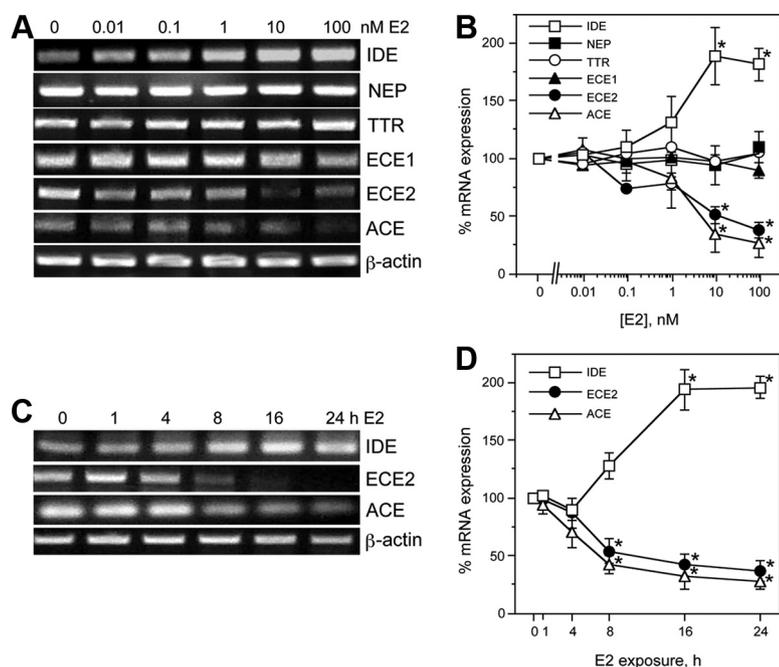
## Results

### E<sub>2</sub> and P<sub>4</sub> regulate mRNA levels of A $\beta$ clearance factors in primary neuron cultures

To investigate the effects of E<sub>2</sub> on expression levels of factors involved in A $\beta$  degradation and clearance, primary neuron cultures were treated for 24 h with increasing concentrations of E<sub>2</sub> (0–100 nM). RNA was isolated from cultures and processed for PCR using specific primers for IDE, NEP, ACE, ECE1, ECE2, and TTR. Our results qualitatively and quantitatively show that E<sub>2</sub> induced a dose-dependent increase in mRNA levels of IDE [ $F(5, 12) = 6.1, P < 0.01$ ], significantly decreased expression of ACE [ $F(5, 12) = 6.1, P < 0.01$ ] and ECE2 [ $F(5, 12) = 14.1, P < 0.001$ ], and had no significant effect on mRNA levels of NEP, ECE, and tran-

sthyretin (TTR) (Fig. 1, A and B). E<sub>2</sub> effects were statistically significant at the 10 nM and 100 nM concentrations. To investigate the time courses of E<sub>2</sub> regulatory actions, we treated neuron cultures with 10 nM E<sub>2</sub> for increasing periods of time up to 24 h. The E<sub>2</sub>-induced increase in IDE [F(5, 12) = 22.4, P < 0.001], and decreases in ACE [F(5,12) = 12.7, P < 0.01], and ECE2 [F(5,12) = 11.1, P < 0.01], became apparent within 8 h of treatment and statistically significant by 16 h (Fig. 1, C and D).

In parallel experiments, we similarly evaluated the effects of P<sub>4</sub> on expression of IDE, NEP, ACE, ECE1, ECE2, and TTR. Treatment of neuron cultures for 24 h with P<sub>4</sub> concentrations of 3 nM, 30 nM, and 300 nM resulted in statistically significant, approximately 2-fold increases of IDE [F(5, 12) = 9.6, P < 0.001], ACE [F(5,12) = 7.0, P < 0.01], and TTR [F(5,12) = 52.4, P < 0.001] mRNA levels (Fig. 2, A and B). Time course analyses after treatment with 30 nM P<sub>4</sub> revealed that ACE mRNA levels were significantly elevated within 4 h and began to decline by 24 h [F(5,12) = 67.7, P < 0.001], whereas mRNA levels of both TTR [F(5,12) = 12.3, P < 0.01] and IDE [F(5,12) = 15.1, P < 0.01] increased more gradually, reaching statistical significance by 8 h and 16 h, respectively (Fig. 2, C and D).



**FIG. 1.** E<sub>2</sub> regulates expression of Aβ clearance factors in a dose- and time-dependent manner. Representative agarose gel of RT-PCR products show relative changes in mRNA levels of the Aβ clearance factors TTR, IDE, ACE, ECE1, NEP, and ECE2 induced by 24-h exposure to 0–100 nM E<sub>2</sub>. β-Actin was used as an internal control. B, The levels of Aβ clearance factors after treatment with increasing E<sub>2</sub> concentrations were also determined quantitatively using real-time PCR. Data show the mean (±SEM) expression levels, relative to vehicle-treated controls after normalizing with corresponding values of β-actin. Representative agarose gel of RT-PCR (C) and quantitative graph from real-time PCR (D) show changes in levels of IDE, ACE, and ECE2 mRNA induced by 0–24 h exposure to 10 nM E<sub>2</sub>. Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P ≤ 0.05 relative to corresponding vehicle-treated control group.

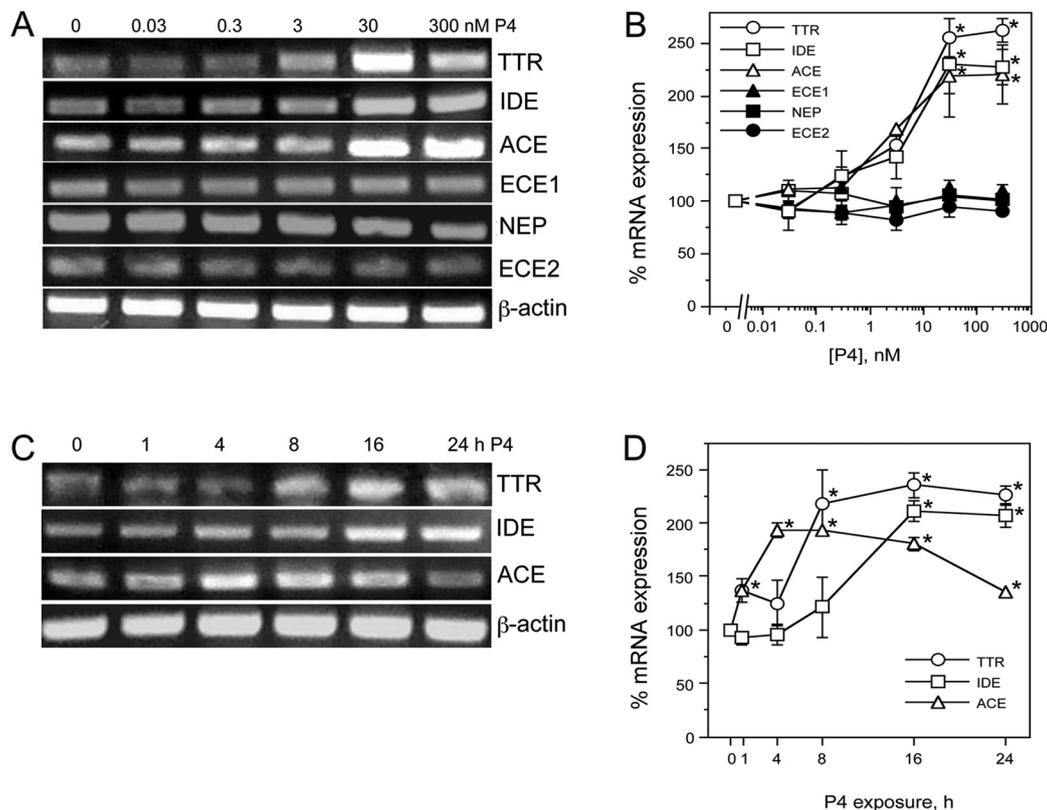
### The role of hormone receptors in E<sub>2</sub> and P<sub>4</sub> regulation of Aβ clearance factors

To investigate the contributions of estrogen receptors (ER) to the observed E<sub>2</sub> regulation of IDE, ACE, and ECE2 expression, we first evaluated the effect of the antiestrogen ICI 182,780 (46). Neuron cultures were pretreated with 1 μM ICI 182,780 for 1 h followed by 10 nM E<sub>2</sub> or vehicle treatments for 24 h. Cultures were harvested for RNA followed by qualitative and quantitative PCR. Our results demonstrate ICI 182,780 completely blocks the E<sub>2</sub>-mediated increase in IDE mRNA, suggesting an ER-dependent mechanism (Fig. 3, A and B). In contrast, the E<sub>2</sub>-induced downregulation of ACE and ECE2 mRNA levels remained unchanged in the presence of ICI 182,780, suggesting that these effects occur via either ER-independent pathways or nongenomic mechanisms that are ER dependent but insensitive to ICI 182,780 (Fig. 3, A and B). To gain further insight into the role of ER, we treated neuron cultures for 24 h with increasing concentrations (0–100 nM) of PPT (47) and DPN (48), agonists that are relatively selective for ERα and ERβ, respectively. PCR analyses indicate that both PPT [F(3,8) = 12.3, P < 0.01] and DPN [F(3,8) = 11.7, P < 0.01], significantly increased IDE mRNA levels, but neither ER agonist significantly altered ACE [F(3,8) = 1.0, P = 0.43; F(3,8) = 0.3, P = 0.81] and ECE2 [F(3, 8) = 0.4, P = 0.78; F(3,8) = 1.5, P = 0.30] mRNA expression (Fig. 3, C–F).

To evaluate the role of PR on P<sub>4</sub>-induced regulation of IDE, ACE, and TTR mRNA, we used the PR antagonists RU486 (49) and Org 31710 (50). Neuron cultures were pretreated with vehicle, 50 nM RU486, or 1 μM Org 31710 followed by 16-h exposure to 30 nM P<sub>4</sub> and then harvested for RNA isolation. Our PCR results show that P<sub>4</sub>-induced increases in mRNA levels of IDE and ACE mRNA levels were not significantly altered in the presence of the PR antagonists. Conversely, both RU486 and Org 31710 effectively blocked the up-regulation of TTR mRNA levels by P<sub>4</sub> (Fig. 3, G and H).

E<sub>2</sub> and P<sub>4</sub> regulate levels of Aβ clearance factors in rat brain

As an initial step to determine whether significant neuronal culture observations extrapolate to brain, we examined the effects of short-term exposures of E<sub>2</sub> and P<sub>4</sub> on mRNA levels of IDE, ACE, ECE2, and TTR in female

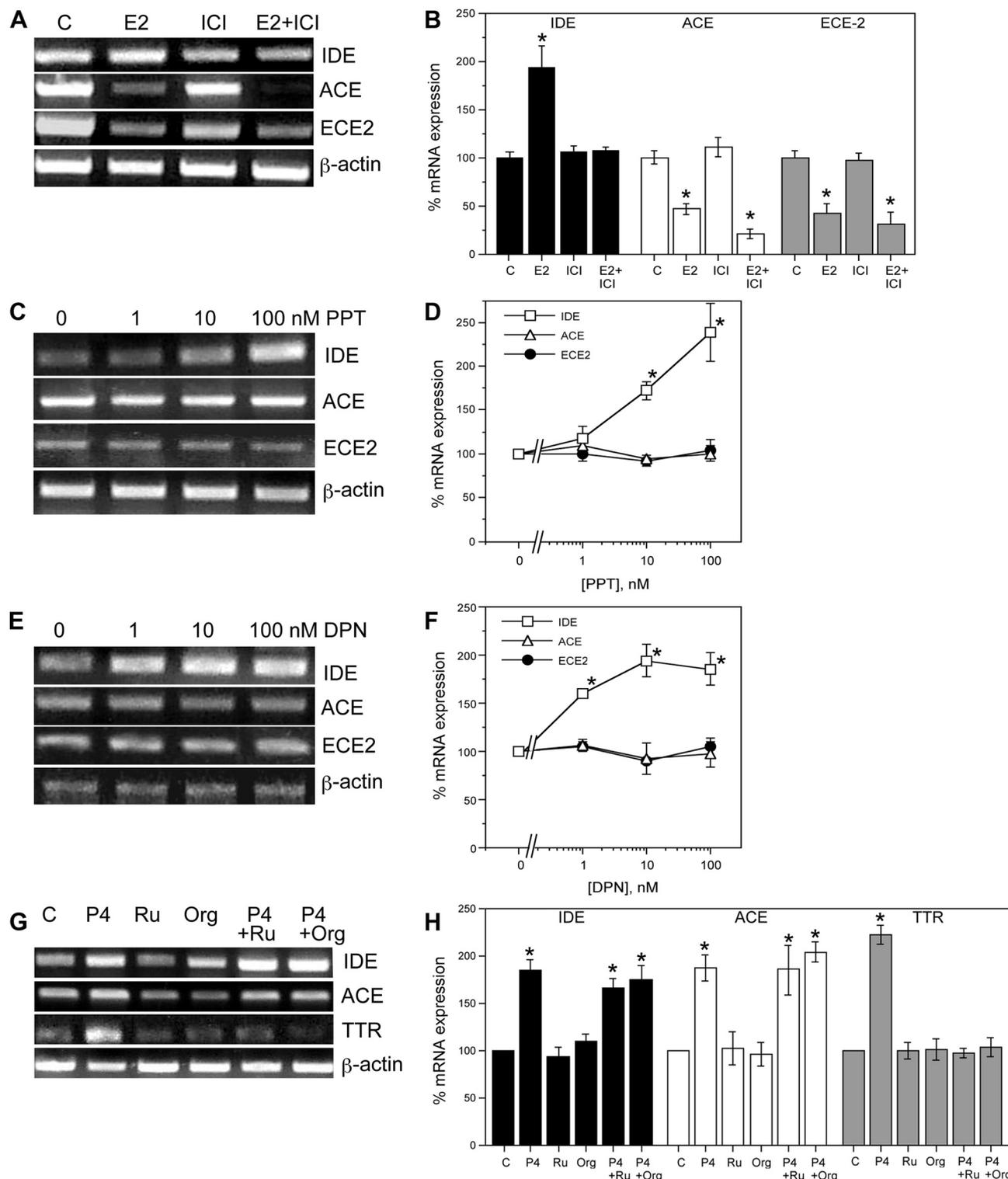


**FIG. 2.**  $P_4$  regulates expression of  $A\beta$  clearance factors in a dose- and time-dependent manner. A, Representative agarose gel of RT-PCR products show relative changes in mRNA levels of the  $A\beta$  clearance factors TTR, IDE, ACE, ECE1, NEP, and ECE2 induced by 16-h exposure to 0–300 nM  $P_4$ .  $\beta$ -Actin was used as an internal control. B, The levels of  $A\beta$  clearance factors after treatment with increasing  $P_4$  concentrations were also determined quantitatively using real-time PCR. Data show the mean ( $\pm$ SEM) expression levels, relative to vehicle-treated controls after normalizing with corresponding values of  $\beta$ -actin. Representative agarose gel (C) and quantitative graph from real-time PCR (D) show changes in levels of IDE, ACE, and TTR mRNA induced by 0–24 h exposure to 30 nM  $P_4$ . Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*,  $P \leq 0.05$  relative to corresponding vehicle-treated control group.

rat brain. Young adult, female Sprague Dawley rats were sham OVX or OVX to deplete endogenous  $E_2$  and  $P_4$ . One week after surgery, rats were injected twice with vehicle (canola oil), 10  $\mu$ g  $E_2$ , or 500  $\mu$ g  $P_4$ , once at time 0 h and again 24 h later. Rats were killed 24 h after the second injection, at which time the brains were immediately collected, frontal cortices were dissected, and RNA was isolated for PCR analyses. Analysis of uterine weight confirmed efficacy of the OVX procedure in depleting endogenous estrogens and the efficacy of  $E_2$  treatment in restoring uterine mass (Table 1). We observed statistically significant effects of the hormone manipulations on mRNA levels of IDE [ $F_{(3,8)} = 11.0$ ,  $P < 0.01$ ], ACE [ $F_{(3,8)} = 4.9$ ,  $P = 0.03$ ], and ECE2 [ $F_{(3,8)} = 9.9$ ,  $P < 0.01$ ], but not on TTR levels [ $F_{(3,8)} = 0.6$ ,  $P = 0.66$ ]. In comparison with sham controls, the OVX group showed nonsignificant trends of reduced IDE mRNA and increased ACE mRNA (Fig 4, A and B) and a statistically significant increase in ECE2 mRNA (Fig. 4, A, C, and D). The OVX+ $E_2$  group showed significantly elevated levels of IDE and reduced levels of ACE and ECE2 relative to the OVX group (Fig. 4, A–D). Similarly, the OVX+ $P_4$  group was associ-

ated with significantly increased IDE and decreased ECE2 mRNA in comparison with the OVX group, but  $P_4$  treatment exhibited no significant effect on ACE levels (Fig. 4, A–D).

We next evaluated the individual and combined effects of  $E_2$  and  $P_4$  over an extended treatment period. Consistent with our previously established protocol (22), we exposed OVX female rats to two consecutive, 30-d cycles of hormone treatment consisting of continuous  $E_2$ , continuous  $P_4$ , cyclic  $P_4$  (10 d/cycle), or combinations of  $E_2$  with continuous or cyclic  $P_4$ . As with the short-term experiment, uterine weights were significantly reduced by OVX, an effect reversed in OVX groups treated with  $E_2$  (Table 1). Expression of IDE mRNA significantly differed across groups [ $F_{(6,21)} = 15.3$ ,  $P < 0.001$ ]. Neocortical IDE mRNA was significantly decreased in the OVX group, an effect that was prevented by treatment of OVX rats with continuous  $E_2$  (OVX+ $E_2$ ) and cyclic  $P_4$  (OVX+ $P_{cyc}$ ) but not by continuous  $P_4$  (OVX+ $P_{cont}$ ). Notably, the effect of combining  $E_2$  and  $P_4$  depended upon the delivery regimen of  $P_4$ . The up-regulation of IDE mRNA by continuous  $E_2$  was blocked by cotreatment with continuous  $P_4$



**FIG. 3.** Effects of ER agonists and ER and PR antagonists on E<sub>2</sub> and P<sub>4</sub> regulation of Aβ clearance factors. A, Representative agarose gel of RT-PCR products and (B) quantitative real-time PCR data show the effect of the ER-antagonist ICI 182,780 on E<sub>2</sub>-mediated changes in the mRNA levels of IDE, ACE, and ECE2. β-Actin was used as an internal control. Representative agarose gel (panel C) and quantitative real-time PCR data (panel D) show the effect of 0–100 nM PPT, an ERα-agonist, on the levels of IDE, ACE, and ECE2 mRNA. Representative agarose gel (panel E) and quantitative real-time PCR data (panel F) show the effect of DPN, an ERβ-agonist, on the mRNA levels of IDE, ACE, and ECE2. (G) Representative agarose gel (panel G) and quantitative real-time PCR graph (panel H) show the effects of two PR antagonists, RU486 and Org 31710, on the mRNA levels of IDE, ACE, and TTR. Data show the mean (±SEM) expression levels, relative to vehicle-treated controls after normalizing with corresponding values of β-actin. Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P ≤ 0.05 relative to corresponding vehicle-treated control group. ICI, ICI 182,780; Org, Org 31710; Ru, RU486.

**TABLE 1.** Uterine weights across treatment groups

Treatment group	Study length	Uterine weight (g)
Sham OVX	Shortterm	0.249±0.022
OVX	Shortterm	0.094±0.015 <sup>a</sup>
OVX+E <sub>2</sub>	Shortterm	0.234±0.007
OVX+P <sub>4</sub>	Shortterm	0.096±0.004 <sup>a</sup>
Sham OVX	Longterm	0.503±0.022
OVX	Longterm	0.099±0.003 <sup>b</sup>
OVX+E <sub>2</sub>	Longterm	0.567±0.043
OVX+P <sub>4</sub> <sub>cont</sub>	Longterm	0.090±0.008 <sup>b</sup>
OVX+P <sub>4</sub> <sub>cyc</sub>	Longterm	0.087±0.006 <sup>b</sup>
OVX+E <sub>2</sub> +P <sub>4</sub> <sub>cont</sub>	Longterm	0.645±0.036
OVX+E <sub>2</sub> +P <sub>4</sub> <sub>cyc</sub>	Longterm	0.520±0.037

Data expressed as means ± SEM.

<sup>a</sup>  $P < 0.05$  relative to Sham OVX (short term); <sup>b</sup>  $P < 0.05$  relative to Sham OVX (long term)

(OVX+E<sub>2</sub>+P<sub>4</sub><sub>cont</sub>) but not by cyclic P<sub>4</sub> (OVX+E<sub>2</sub>+P<sub>4</sub><sub>cyc</sub>) (Fig 5, A and B). There were also significant treatment effects on mRNA levels of ACE [ $F_{(6,21)} = 10.9, P < 0.001$ ]. In comparison with the Sham group, OVX was associated with a significant increase in ACE mRNA that was significantly attenuated in the OVX+E<sub>2</sub> group. Cyclic P<sub>4</sub> (OVX+P<sub>4</sub><sub>cyc</sub>) did not significantly reduce ACE mRNA, but continuous P<sub>4</sub> (OVX+P<sub>4</sub><sub>cont</sub>) had an intermediate effect yielding ACE mRNA levels that were not significantly different from either Sham OVX or OVX (Fig. 5, A and C). Both P<sub>4</sub> treatments significantly inhibited the effect of E<sub>2</sub> on ACE mRNA (Fig. 5, A and C). There was no statistically significant main effect of treatment group on ECE2 mRNA levels [ $F_{(6,14)} = 1.5, P = 0.24$ ] (Fig. 5, A and D). Levels of TTR mRNA levels significantly differed across groups [ $F_{(6,21)} = 5.5, P < 0.01$ ]. Although there were no significant effects of OVX or E<sub>2</sub> treatment, there was a modest increase in TTR mRNA in the OVX+P<sub>4</sub><sub>cyc</sub> group relative to both Sham and OVX groups (Fig. 5, A and E).

### E<sub>2</sub> and P<sub>4</sub> regulate IDE protein *in vitro* and *in vivo*

The only A $\beta$  clearance factor that was positively regulated at the mRNA level by E<sub>2</sub> and/or P<sub>4</sub> across all of our cell culture and *in vivo* paradigms was IDE. To confirm that the observed up-regulation of IDE mRNA by E<sub>2</sub> and P<sub>4</sub> yielded increased protein levels of IDE, we conducted Western blots in both cell culture and brain samples. In neuronal cultures, E<sub>2</sub> increased IDE protein in a dose-dependent manner by up to 2-fold with statistically significant effects apparent at 0.1 nM (Fig. 6, A and F) [ $F_{(5,12)} = 92.6, P < 0.001$ ]. In cultures treated with 10 nM E<sub>2</sub>, significant increases in IDE protein occurred within 8 h and were retained across the 48-h experimental period [ $F_{(4,10)} = 142.1, P < 0.001$ ] (Fig. 6, B and G). Similarly, P<sub>4</sub> induced increased IDE protein with significant effects observed between concentrations of 0.3 nM and 300 nM [ $F_{(5,12)} = 33.4, P < 0.001$ ] (Fig. 6, C and H) and at ex-

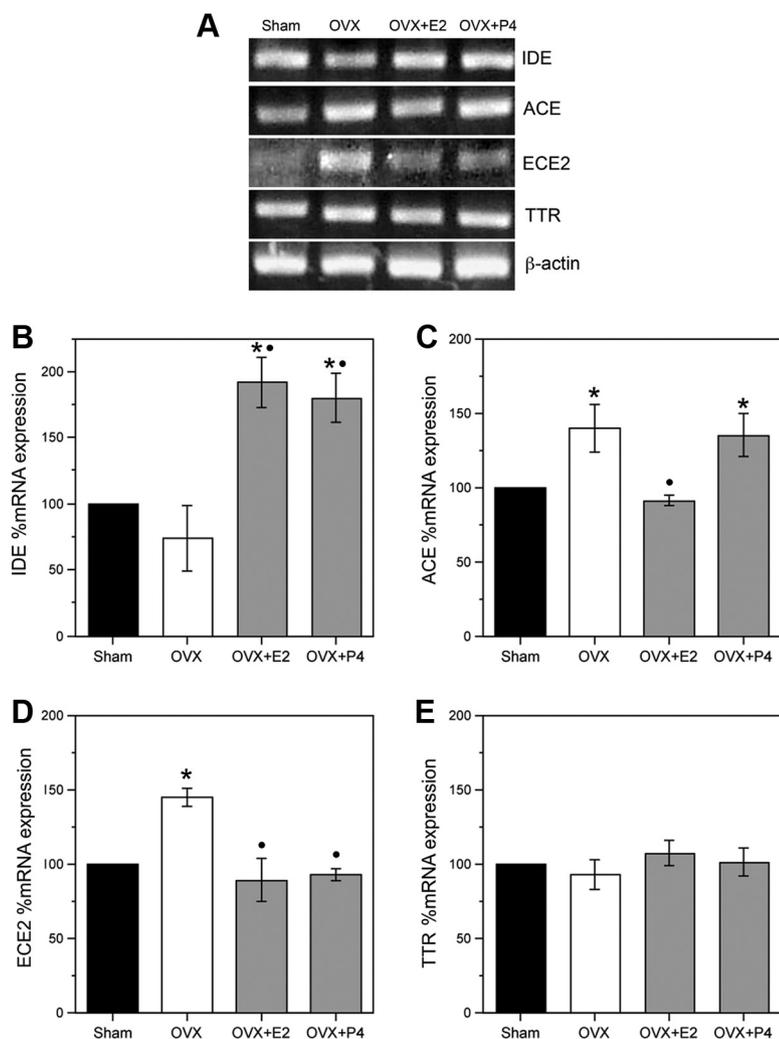
posure times between 8 h and 48 h [ $F_{(4,10)} = 23.9, P < 0.001$ ] (Fig. 6, D and I). In female rats, IDE levels were significantly affected by treatment [ $F_{(3,8)} = 20.4, P < 0.001$ ]. We observed that the OVX group exhibited a non-significant trend of reduced IDE protein relative to the Sham group. Short-term treatment of OVX rats with E<sub>2</sub> (OVX+E<sub>2</sub>) or P<sub>4</sub> (OVX+P<sub>4</sub>) yielded significant increases in IDE protein levels, with the OVX+E<sub>2</sub> group increasing IDE levels significantly higher than the Sham group (Fig. 6, E and J).

### Long-term regulation of soluble A $\beta$ levels by E<sub>2</sub> and P<sub>4</sub>

The significant positive regulation of the A $\beta$  degrading enzyme IDE by both E<sub>2</sub> and P<sub>4</sub> across culture and *in vivo* paradigms suggests a possible role in regulating brain levels of A $\beta$ . To begin investigating this possibility, we homogenized one hemi-brain from each of the rats in the extended hormone treatment experiment to analyze soluble A $\beta$  levels by ELISA. Our results indicate a statistically significant effect of treatment on A $\beta$ 42 levels [ $F_{(3,28)} = 3.3, P = 0.01$ ]. Ovarian hormone depletion associated with OVX resulted in a significant, approximately 2-fold increase in A $\beta$  that was largely prevented by continuous E<sub>2</sub> treatment (OVX+E<sub>2</sub>) (Fig. 7). Treatment with P<sub>4</sub> alone delivered either continuously (OVX+P<sub>4</sub><sub>cont</sub>) or cyclically (OVX+P<sub>4</sub><sub>cyc</sub>) did not significantly lower A $\beta$  levels relative to the OVX group. Interestingly, the regimen of cyclic P<sub>4</sub> in combination with E<sub>2</sub> (OVX+E<sub>2</sub>+P<sub>4</sub><sub>cyc</sub>) showed the lowest A $\beta$ 42 levels.

## Discussion

Although there are no definitive approaches for preventing and treating AD, clinical studies have demonstrated that the risk of AD in women can be significantly reduced by hormone therapy. Because accumulation of A $\beta$  is widely theorized to initiate AD pathogenesis (51), optimizing hormone therapy will likely require thorough understanding of how estrogens and progestagens regulate A $\beta$  accumulation. Prior work has clearly linked E<sub>2</sub> with regulation of A $\beta$  production by affecting APP metabolism and trafficking (52). Recent work has demonstrated that E<sub>2</sub> and P<sub>4</sub> may also play a role in A $\beta$  clearance (2). Our results suggest that E<sub>2</sub> and P<sub>4</sub> are able to affect mRNA expression of some but not all A $\beta$  clearance factors. Most notably, data in neuron cultures show that E<sub>2</sub> affects IDE, ACE, and ECE2 mRNA in dose- and time-dependent manners whereas P<sub>4</sub> regulates the expression levels of IDE, ACE, and TTR mRNA. In rat brain, both E<sub>2</sub> and P<sub>4</sub> are also shown to regulate IDE expression. Importantly, we also assess the relationship of expression changes



**FIG. 4.** Effects of short-term *in vivo* hormone treatments on levels of Aβ clearance factors. A, Representative agarose gel of RT-PCR products shows the relative levels of IDE, ACE, ECE2, and TTR mRNA in sham OVX (Sham), vehicle-treated OVX (OVX), and OVX rats after short-term treatment with E<sub>2</sub> (OVX+E<sub>2</sub>) or P<sub>4</sub> (OVX+P<sub>4</sub>). B–E, Quantitative real-time PCR data show the mean (±SEM) expression levels compared with the Sham control group for IDE, ACE, ECE2, and TTR mRNA, respectively. All data are normalized with corresponding β-actin values. Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P < 0.05 relative to the vehicle-treated Sham group. ●, P < 0.01 relative to the vehicle-treated OVX group.

with endogenous soluble brain levels of Aβ, demonstrating an inverse association between the levels of IDE and soluble Aβ.

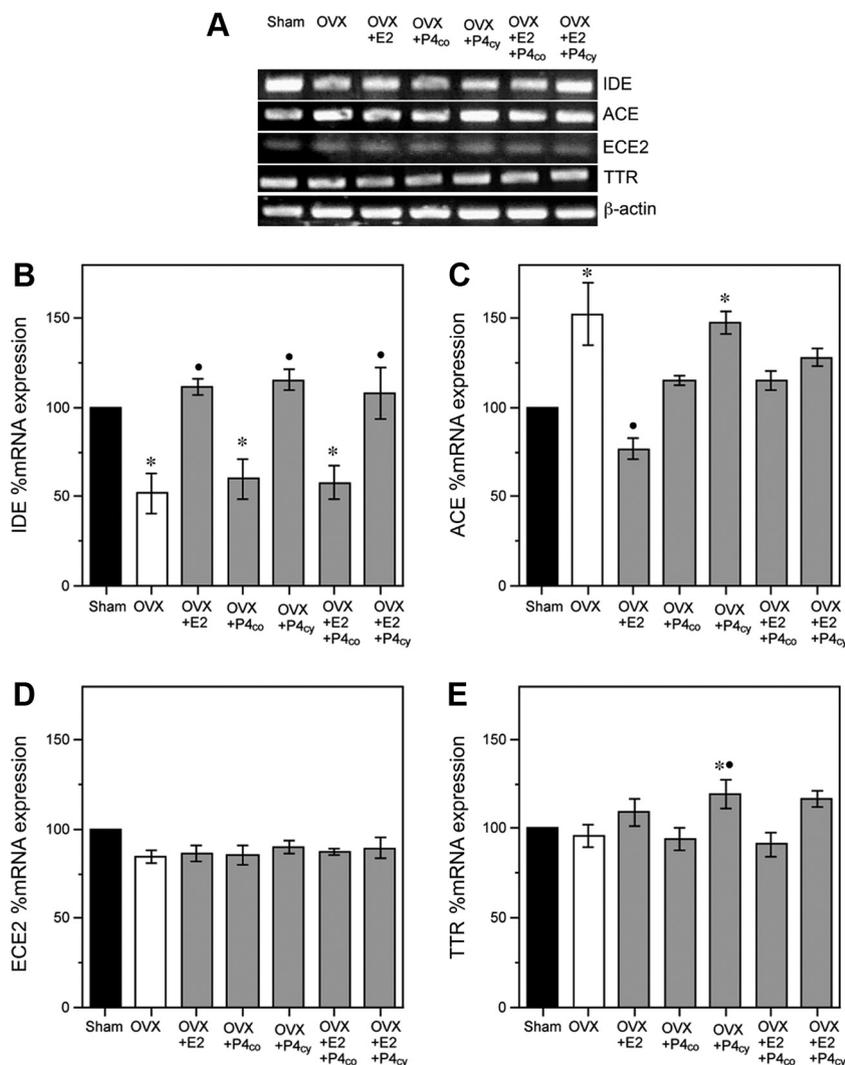
Our data demonstrate that E<sub>2</sub> regulates expression of several factors involved in Aβ clearance. The most robust effect across paradigms was the E<sub>2</sub>-induced increase in IDE expression, which was observed at both the mRNA and protein levels. The data show that the approximately 2-fold increase in IDE mRNA is ER dependent because it is blocked by an ER antagonist but mimicked by agonists for both ERα and ERβ. This observation is consistent with the finding that uterine IDE level and activity decrease during low E<sub>2</sub> phase and increase during high E<sub>2</sub> phase of the estrous cycle (53). In addition, a recent independent

study done by our group found that E<sub>2</sub> increased neuronal IDE expression in a mouse model of AD (54).

In contrast to increasing IDE expression, we observed that E<sub>2</sub> did not alter or reduce expression of several other Aβ clearance factors. E<sub>2</sub> significantly decreased expression of ACE mRNA in neuron culture as well as in rat brain. This observation is consistent with several prior studies showing that E<sub>2</sub> reduces ACE levels in various tissues, including heart, lung, kidney, and brain (55–58). Similar results have been obtained in studies of postmenopausal women in which estrogen-based hormone therapy is associated with decreased ACE (59, 60). In addition, we found that E<sub>2</sub> decreased ECE2 mRNA expression but had no significant effect on ECE1 transcript levels. E<sub>2</sub> regulation of ECE1 and ECE2 in brain has not been previously reported, but these enzymes are known to be regulated by sex steroid hormones (61) with E<sub>2</sub> shown to reduce ECE1 expression (62). We observed no significant effect of E<sub>2</sub> treatment on either NEP or TTR mRNA expression. These data are in contrast to some prior reports. In the case of NEP, E<sub>2</sub> has been linked to increased expression in uterus (63) as well as in rat brain and a neuroblastoma cell line (64–66). E<sub>2</sub> is also associated with increased TTR expression in choroid plexus (67, 68) and in an AD transgenic mouse model (69). The reason for the disparity in findings is unclear but may reflect paradigm differences. For example, because

neurons are not fully differentiated in our culture paradigm, it is possible that qualitatively different hormone responses could be observed in neurons with an adult phenotype. Because IDE is the only Aβ clearance factor positively regulated by E<sub>2</sub> in our models, it appears to be the strongest candidate for contributing to the established ability of E<sub>2</sub> to reduce Aβ levels.

Although recent evidence indicates a role for P<sub>4</sub> (22) and P<sub>4</sub> metabolites (70, 71) in reducing Aβ, there has been limited investigation of its potential regulation of Aβ clearance factors. Our neuron culture data show that P<sub>4</sub> increases by approximately 2-fold the mRNA levels of IDE, ACE, and TTR but does not significantly alter expression of NEP, ECE1, and ECE2 mRNA. Upon short-



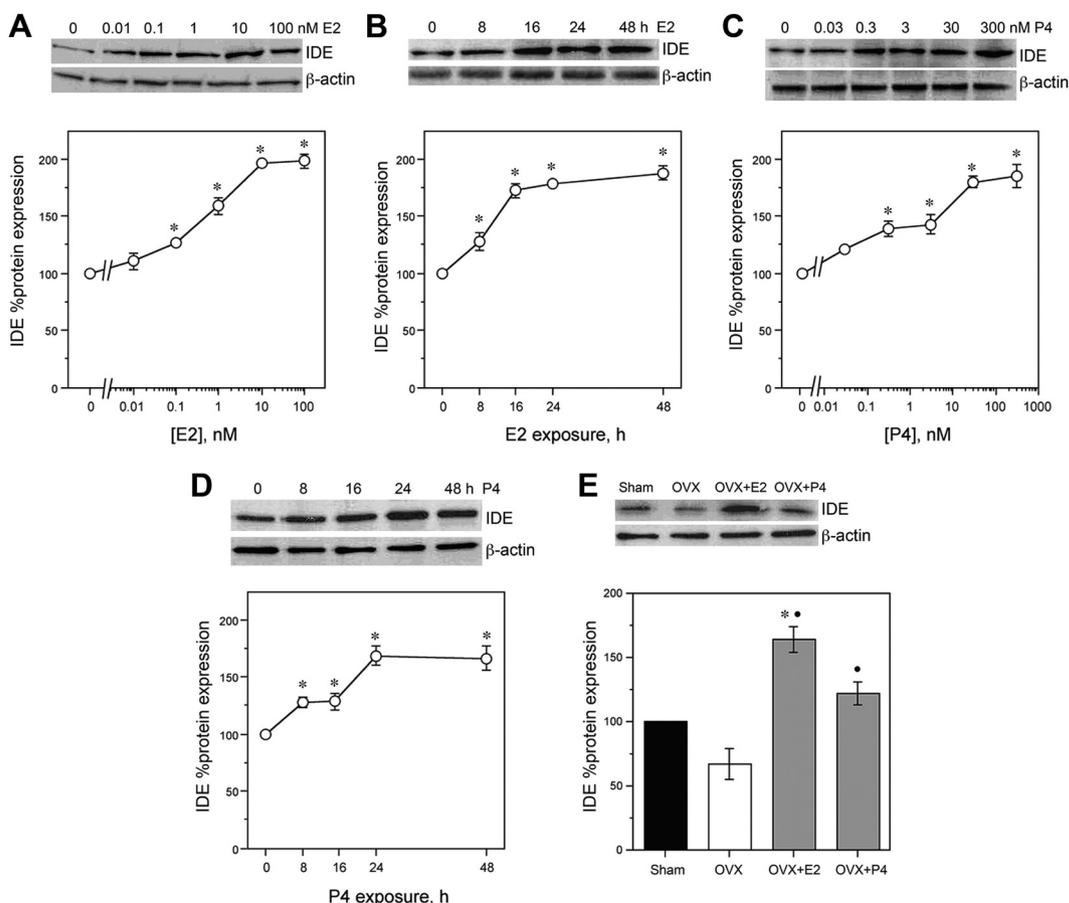
**FIG. 5.** Effects of long-term *in vivo* hormone treatments on levels of A $\beta$  clearance factors. A, Representative agarose gel of RT-PCR products qualitatively shows changes in the levels of IDE, ACE, ECE2, and TTR mRNA across the following treatment groups (n = 8/group): vehicle-treated Sham OVX (Sham), vehicle-treated OVX (OVX), and OVX treated with continuous E<sub>2</sub> (OVX+E<sub>2</sub>), continuous P<sub>4</sub> (OVX+P<sub>4co</sub>), cyclic P<sub>4</sub> (OVX+P<sub>4cy</sub>), or continuous E<sub>2</sub> combined with either continuous P<sub>4</sub> (OVX+E<sub>2</sub>+P<sub>4co</sub>) or cyclic P<sub>4</sub> (OVX+E<sub>2</sub>+P<sub>4cy</sub>). B–E, Quantitative real-time PCR data show the mean ( $\pm$ SEM) expression levels compared with the Sham OVX control group (solid bar) for IDE, ACE, ECE2, and TTR mRNA, respectively. All data are normalized with corresponding  $\beta$ -actin values. Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P < 0.01 relative to the vehicle-treated Sham OVX group. ●, P < 0.01 relative to the OVX group.

term and extended P4 exposure *in vivo*, IDE mRNA continued to exhibit strong up-regulation by P<sub>4</sub> but TTR mRNA was only modestly increased and ACE expression was not significantly affected. This incomplete concordance in findings between *in vitro* and *in vivo* paradigms suggests that although P<sub>4</sub> and E<sub>2</sub> have the potential to regulate numerous genes in simple culture systems, only a subset of these effects are manifested at significant levels *in vivo* owing to the influence of multiple tissue-specific and systems-wide interactions. The lack of significant P<sub>4</sub> regulation of ACE mRNA *in vivo* is consistent with a prior

observation in uterine artery (72). There are no previous reports of P<sub>4</sub> regulation of IDE or the ECE. Some evidence indicates that P<sub>4</sub> can increase NEP expression in human endometrium (73) and TTR in rat choroid plexus (67). Similar to our observations with E<sub>2</sub>, the strongest effect of P<sub>4</sub> on A $\beta$  clearance factors across paradigms was increased expression of IDE.

Because E<sub>2</sub> and P<sub>4</sub> often exert interactive effects on tissues and both are present endogenously and typically co-administered in postmenopausal hormone therapy (HT), it is important to understand their combined effects. To address this issue, we compared delivery of P<sub>4</sub> in continuous *vs.* cyclic manners, alone and in combination with E<sub>2</sub>. Our data show that neural IDE mRNA expression in OVX rats is increased by treatment with E<sub>2</sub>, cyclic P<sub>4</sub>, and the combination of E<sub>2</sub> and cyclic P<sub>4</sub>. In the same animals, the lowest levels of soluble A $\beta$  were observed in the E<sub>2</sub> and E<sub>2</sub>+cyclic P<sub>4</sub> groups. Notably, continuous P<sub>4</sub> delivered either alone or in combination with E<sub>2</sub> neither increased IDE mRNA expression nor reduced A $\beta$  levels. One limitation of this model is the use of sc hormone delivery pellets, which can result in supraphysiological levels of hormones (74). However, our findings of significant IDE regulation by E<sub>2</sub> and P<sub>4</sub> across three paradigms with different hormone delivery regimens argue that the observed relationships are significant.

The data indicate an inverse relationship between IDE expression and A $\beta$  levels that is consistent with the possibility that regulation of IDE expression by E<sub>2</sub> and P<sub>4</sub> may contribute to their A $\beta$ -lowering actions. In addition, the results support conclusions of prior studies from our laboratory and others demonstrating that cyclic P<sub>4</sub> treatment is generally more beneficial than continuous P<sub>4</sub> treatment either alone or in combination with E<sub>2</sub> (22, 75, 76). For example, choline acetyltransferase activity was observed to be higher in OVX female rats treated with E<sub>2</sub> with cyclic P<sub>4</sub> than with E<sub>2</sub> alone, but lowest in rats treated with E<sub>2</sub> and continuous P<sub>4</sub> (75). In data particularly relevant to this study, cyclic but not continuous P<sub>4</sub> reduced A $\beta$  accu-

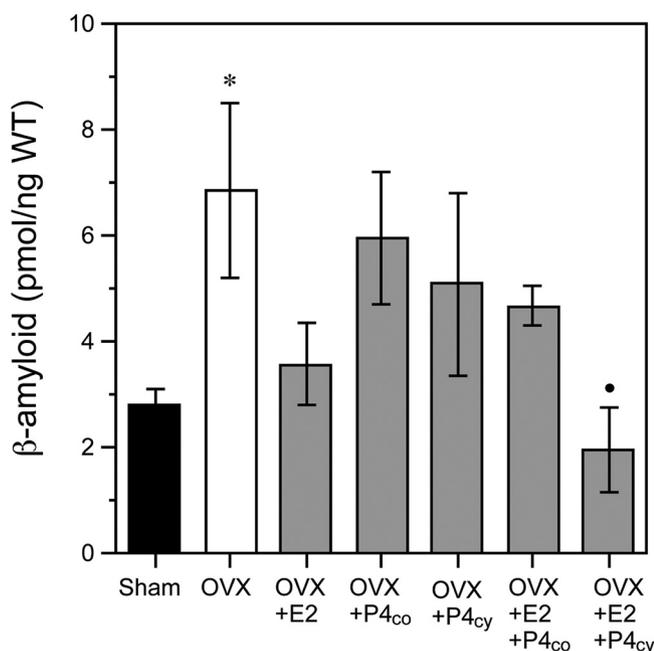


**FIG. 6.** Effects of E<sub>2</sub> and P<sub>4</sub> on IDE expression levels. Representative Western blots show regulation of IDE protein levels by E<sub>2</sub> and P<sub>4</sub> treatment in cultured neurons and OVX rats. A, Dose-dependent regulation of IDE by 0–100 nM E<sub>2</sub> in cultured neurons is demonstrated by a representative Western blot (*upper panel*) and quantification of combined data across experiments (*lower panel*). B, Time-dependent regulation of IDE in cultured neurons by 10 nM E<sub>2</sub> over 0–48 h is demonstrated by a representative Western blot (*upper panel*) and quantification of combined data across experiments (*lower panel*). C, Dose-dependent regulation of IDE by 0–300 nM P<sub>4</sub> in cultured neurons is demonstrated by a representative Western blot (*upper panel*) and quantification of combined data across experiments (*lower panel*). D, Time-dependent regulation of IDE in cultured neurons by 30 nM P<sub>4</sub> over 0–48 h is demonstrated by a representative Western blot (*upper panel*) and quantification of combined data across experiments (*lower panel*). Relative amounts of IDE protein levels were determined by densitometric scanning of Western blots from three independent experiments. E, Effect of OVX and short-term treatment of OVX rats with E<sub>2</sub> (OVX+E<sub>2</sub>) or P<sub>4</sub> (OVX+P<sub>4</sub>) on IDE protein levels is shown by a representative Western blot (*upper panel*) and quantification of Western blot data from all animals (n = 7/group) (*lower panel*). Data are represented as a mean (±SEM) percentage of control values. Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P < 0.01 relative to vehicle-treated control groups or Sham OVX group. ●, P < 0.01 relative to the OVX group.

mulation in 3xTg-AD mice, whereas continuous P<sub>4</sub> but not cyclic P<sub>4</sub> prevented the Aβ-lowering action of E<sub>2</sub> (22). The differential effects of continuous *vs.* cyclic P<sub>4</sub> may reflect broad differences in gene expression profiles that vary according to hormone regimens (76). Unclear is whether delivery of E<sub>2</sub> in a cyclic manner may offer further benefits, although the near-maximal effects of the used continuous E<sub>2</sub> delivery relative to OVX alone suggests limited opportunity for improvement.

The mechanism underlying the regulation of Aβ-degrading enzymes by E<sub>2</sub> and P<sub>4</sub> is not well defined. Some evidence suggests roles of the estrogen receptors ERα and ERβ in E<sub>2</sub>-mediated changes (54, 65, 67). We show that the E<sub>2</sub> regulation of IDE mRNA is blocked by the antiestrogen ICI 182,780, implicating ER-dependent signaling.

We further demonstrate that both ERα and ERβ may be important in the E<sub>2</sub>-mediated regulation of IDE because both ERα and ERβ agonists up-regulated IDE transcript expression in a dose-dependent manner. E<sub>2</sub> could directly increase the IDE mRNA expression via classic genomic signaling in which ER bind to estrogen-response elements (ERE) on the target gene for transcriptional regulation. Consistent with this possibility, analysis of the promoter region of rat IDE gene using MatInspector (77) reveals four putative canonical ERE (GGTCAnnnTGACC). Alternatively, E<sub>2</sub> may increase IDE expression indirectly via activation of one or more of the cell-signaling pathways. For example, E<sub>2</sub> is known to activate phosphatidylinositol-3 kinase (78), which in turn is implicated in the insulin-dependent up-regulation of IDE (79). The role of PR in



**FIG. 7.** Effects of long-term hormonal treatments on soluble A $\beta$  levels *in vivo*. Levels of soluble A $\beta$  *in vivo* were determined by A $\beta$  ELISA after long-term hormone manipulations. Data show mean ( $\pm$ SEM) A $\beta$ 1–42 levels from hemi-brain lysates of adult female rats under the following treatment groups (n = 8/group): vehicle-treated sham OVX (Sham; solid bar), vehicle-treated OVX (OVX; open bar), and OVX treated with continuous E<sub>2</sub> (OVX+E<sub>2</sub>), continuous P<sub>4</sub> (OVX+P4<sub>co</sub>), cyclic P4<sub>cy</sub> (OVX+P4<sub>cy</sub>) or continuous E<sub>2</sub> combined with either continuous P<sub>4</sub> (OVX+E2+P4<sub>co</sub>) or cyclic P<sub>4</sub> (OVX+E2+P4<sub>cy</sub>). Statistical significance is based on analysis of pooled raw data using the Tukey HSD. \*, P  $\leq$  0.05 relative to Sham OVX group. ●, P  $\leq$  0.05 relative to the OVX group. WT, Wet tissue.

regulating IDE is unclear. Although the PR antagonists RU486 and Org 31710 inhibited P<sub>4</sub> regulation of TTR mRNA, the antagonists failed to block the P<sub>4</sub>-mediated increase in IDE mRNA levels in neuron culture, suggesting that neither of the two PR isoforms A and B mediates this P<sub>4</sub> response. Future work will determine whether the mechanism involves a nonclassical mediator of P<sub>4</sub> action (*e.g.* PR membrane component 1) or perhaps P<sub>4</sub> metabolites (*e.g.* allopregnanolone). Further investigation of the roles of ER and PR is required to completely understand the mechanism underlying the observed regulation of these A $\beta$  clearance factors.

Our study provides novel insight into the roles of individual and interactive effects of E<sub>2</sub> and P<sub>4</sub> in regulating A $\beta$  by analyzing their effects on the expression of A $\beta$  clearance factors. The most significant observation is that both E<sub>2</sub> and P<sub>4</sub> increase IDE mRNA expression *in vitro* and *in vivo*. This, taken together with the inverse relationship *in vivo* between IDE expression and A $\beta$  levels, suggests another possible mechanism by which E<sub>2</sub> and P<sub>4</sub> can affect A $\beta$  accumulation. Continued investigation of the interactions between E<sub>2</sub> and P<sub>4</sub> in regulating A $\beta$  production and

degradation is essential for optimizing hormone-based strategies for the prevention and/or treatment of AD.

## Acknowledgments

Address all correspondence and requests for reprints to: Christian J. Pike, Ph.D., Davis School of Gerontology, University of Southern California, 3715 McClintock Avenue, Los Angeles, California 90089-0191. E-mail: cjpik@usc.edu.

This work was supported by National Institutes of Health Grant AG026572.

Disclosure Summary: The authors have nothing to disclose and no conflicts of interest with the information presented in this manuscript including any personal, financial, or other conflicts.

## References

1. Launer LJ, Andersen K, Dewey ME, Letenneur L, Ott A, Amaducci LA, Brayne C, Copeland JR, Dartigues JF, Kragh-Sorensen P, Lobo A, Martinez-Lage JM, Stijnen T, Hofman A 1999 Rates and risk factors for dementia and Alzheimer's disease: results from EURODEM pooled analyses. EURODEM Incidence Research Group and Work Groups. *European Studies of Dementia. Neurology* 52:78–84
2. Pike CJ, Carroll JC, Rosario ER, Barron AM 2009 Protective actions of sex steroid hormones in Alzheimer's disease. *Front Neuroendocrinol* 30:239–258
3. Bachman DL, Wolf PA, Linn R, Knoefel JE, Cobb J, Belanger A, D'Agostino RB, White LR 1992 Prevalence of dementia and probable senile dementia of the Alzheimer type in the Framingham Study. *Neurology* 42:115–119
4. Andersen K, Nielsen H, Lolk A, Andersen J, Becker I, Kragh-Sorensen P 1999 Incidence of very mild to severe dementia and Alzheimer's disease in Denmark: the Odense Study. *Neurology* 52: 85–90
5. Sohrabji F 2008 Premenopausal oophorectomy and the risk for dementia. *Womens Health (Lond Engl)* 4:127–131
6. Corder EH, Ghebremedhin E, Taylor MG, Thal DR, Ohm TG, Braak H 2004 The biphasic relationship between regional brain senile plaque and neurofibrillary tangle distributions: modification by age, sex, and APOE polymorphism. *Ann NY Acad Sci* 1019: 24–28
7. Henderson VW, Buckwalter JG 1994 Cognitive deficits of men and women with Alzheimer's disease. *Neurology* 44:90–96
8. Barnes LL, Wilson RS, Bienias JL, Schneider JA, Evans DA, Bennett DA 2005 Sex differences in the clinical manifestations of Alzheimer disease pathology. *Arch Gen Psychiatry* 62:685–691
9. Manly JJ, Merchant CA, Jacobs DM, Small SA, Bell K, Ferin M, Mayeux R 2000 Endogenous estrogen levels and Alzheimer's disease among postmenopausal women. *Neurology* 54:833–837
10. Rosario ER, Chang L, Head EH, Stanczyk FZ, Pike CJ 2011 Brain levels of sex steroid hormones in men and women during normal aging and in Alzheimer's disease. *Neurobiol Aging* 32:604–613
11. Yue X, Lu M, Lancaster T, Cao P, Honda S, Staufenbiel M, Harada N, Zhong Z, Shen Y, Li R 2005 Brain estrogen deficiency accelerates A $\beta$  plaque formation in an Alzheimer's disease animal model. *Proc Natl Acad Sci USA* 102:19198–19203
12. Lewczuk P, Kornhuber J, Vanderstichele H, Vanmechelen E, Esselmann H, Bibl M, Wolf S, Otto M, Reulbach U, Kölsch H, Jessen F, Schröder J, Schönknecht P, Hampel H, Peters O, Weimer E, Perneczky R, Jahn H, Luckhaus C, Lamla U, Supprian T, Maler JM, Wiltfang J 2008 Multiplexed quantification of dementia biomarkers

- in the CSF of patients with early dementias and MCI: a multicenter study. *Neurobiol Aging* 29:812–818
13. Kawas C, Resnick S, Morrison A, Brookmeyer R, Corrada M, Zonderman A, Bacal C, Donnell Lingle D, Metter E 1997 A prospective study of estrogen replacement therapy and the risk of developing Alzheimer's disease: the Baltimore longitudinal study of aging. *Neurology [Erratum]* (1998) 51:564|48:1517–1521
  14. Zandi PP, Carlson MC, Plassman BL, Welsh-Bohmer KA, Mayer LS, Steffens DC, Breitner JC 2002 Hormone replacement therapy and incidence of Alzheimer disease in older women: the Cache County Study. *JAMA* 288:2123–2129
  15. Shumaker SA, Legault C, Rapp SR, Thal L, Wallace RB, Ockene JK, Hendrix SL, Jones III BN, Assaf AR, Jackson RD, Kotchen JM, Wassertheil-Smoller S, Wactawski-Wende J 2003 Estrogen plus progestin and the incidence of dementia and mild cognitive impairment in postmenopausal women: the Women's Health Initiative Memory Study: a randomized controlled trial. *JAMA* 289:2651–2662
  16. Singh M, Sumien N, Kyser C, Simpkins JW 2008 Estrogens and progesterone as neuroprotectants: what animal models teach us. *Front Biosci* 13:1083–1089
  17. Whitmer RA, Quesenberry CP, Zhou J, Yaffe K 2011 Timing of hormone therapy and dementia: the critical window theory revisited. *Ann Neurol* 69:163–169
  18. Selkoe DJ 1994 Amyloid beta-protein precursor: new clues to the genesis of Alzheimer's disease. *Curr Opin Neurobiol* 4:708–716
  19. Petanceska SS, Nagy V, Frail D, Gandy S 2000 Ovariectomy and 17 $\beta$ -estradiol modulate the levels of Alzheimer's amyloid  $\beta$  peptides in brain. *Exp Gerontol* 35:1317–1325
  20. Levin-Allerhand JA, Lominska CE, Wang J, Smith JD 2002 17 $\alpha$ -estradiol and 17 $\beta$ -estradiol treatments are effective in lowering cerebral amyloid-beta levels in A $\beta$ PPSWE transgenic mice. *J Alzheimers Dis* 4:449–457
  21. Carroll JC, Rosario ER, Chang L, Stanczyk FZ, Oddo S, LaFerla FM, Pike CJ 2007 Progesterone and estrogen regulate Alzheimer-like neuropathology in female 3xTg-AD mice. *J Neurosci* 27:13357–13365
  22. Carroll JC, Rosario ER, Villamagna A, Pike CJ 2010 Continuous and cyclic progesterone differentially interact with estradiol in the regulation of Alzheimer-like pathology in female 3xTransgenic-Alzheimer's disease mice. *Endocrinology* 151:2713–2722
  23. Heikkinen T, Kalesnykas G, Rissanen A, Tapiola T, Iivonen S, Wang J, Chaudhuri J, Tanila H, Meitinen R, Puolivali J 2004 Estrogen treatment improves spatial learning in APP+PS1 mice but does not affect  $\beta$  amyloid accumulation and plaque formation. *Exp Neurol* 187:105–117
  24. Jaffe AB, Toran-Allerand CD, Greengard P, Gandy SE 1994 Estrogen regulates metabolism of Alzheimer amyloid  $\beta$  precursor protein. *J Biol Chem* 269:13065–13068
  25. Xu H, Gouras GK, Greenfield JP, Vincent B, Naslund J, Mazzarelli L, Fried G, Jovanovic JN, Seeger M, Relkin NR, Liao F, Checler F, Buxbaum JD, Chait BT, Thinakaran G, Sisodia SS, Wang R, Greengard P, Gandy S 1998 Estrogen reduces neuronal generation of Alzheimer  $\beta$ -amyloid peptides. *Nat Med* 4:447–451
  26. Choi SH, Leight SN, Lee VM, Li T, Wong PC, Johnson JA, Saraiva MJ, Sisodia SS 2007 Accelerated A $\beta$  deposition in APP<sup>swe</sup>/PS1<sup>ΔE9</sup> mice with hemizygous deletions of TTR (transthyretin). *J Neurosci* 27:7006–7010
  27. Leissring MA 2008 The A $\beta$ Cs of A $\beta$ -cleaving proteases. *J Biol Chem* 283:29645–29649
  28. Mukherjee A, Song E, Kihiko-Ehmann M, Goodman Jr JP, Pyrek JS, Estus S, Hersh LB 2000 Insulysin hydrolyzes amyloid  $\beta$  peptides to products that are neither neurotoxic nor deposit on amyloid plaques. *J Neurosci* 20:8745–8749
  29. Vekrellis K, Ye Z, Qiu WQ, Walsh D, Hartley D, Chesneau V, Rosner MR, Selkoe DJ 2000 Neurons regulate extracellular levels of amyloid  $\beta$ -protein via proteolysis by Insulin-degrading enzyme. *J Neurosci* 10:1657–1665
  30. Miller BC, Eckman EA, Sambamurti K, Dobbs N, Chow KM, Eckman CB, Hersh LB, Thiele DL 2003 Amyloid- $\beta$  peptide levels in brain are inversely correlated with insulysin activity levels in vivo. *Proc Natl Acad Sci USA* 100:6221–6226
  31. Leissring MA, Farris W, Chang AY, Walsh DM, Wu X, Sun X, Frosch MP, Selkoe DJ 2003 Endoplasmic reticulum-localized amyloid  $\beta$ -peptide is degraded in the cytosol by two distinct degradation pathways. *Neuron* 40:1087–1093
  32. Shirohani K, Tsubuki S, Iwata N, Takaki Y, Harigaya W, Maruyama K, Kiryu-Seo S, Kiyama H, Iwata H, Tomita T, Iwatsubo T, Saido TC 2001 Neprilysin degrades both amyloid  $\beta$  peptides 1–40 and 1–42 most rapidly and efficiently among thiorphan- and phosphoramidon-sensitive endopeptidases. *J Biol Chem* 276:21895–21901
  33. Iwata N, Tsubuki S, Takaki Y, Shirohani K, Lu B, Gerard NP, Gerard C, Hama E, Lee HJ, Saido TC 2001 Metabolic regulation of brain A $\beta$  by neprilysin. *Science* 292:1550–1552
  34. Kanemitsu H, Tomiyama T, Mori H 2003 Human neprilysin is capable of degrading amyloid  $\beta$  peptide not only in the monomeric form but also the pathological oligomeric form. *Neurosci Lett* 350:113–116
  35. Wang S, Wang R, Chen L, Bennett DA, Dickson DW, Wang DS 2010 Expression and functional profiling of neprilysin, insulin-degrading enzyme, and endothelin-converting enzyme in prospectively studied elderly and Alzheimer's brain. *J Neurochem* 115:47–57
  36. Eckman EA, Reed DK, Eckman CB 2001 Degradation of the Alzheimer's amyloid  $\beta$  peptide by endothelin-converting enzyme. *J Biol Chem* 276:24540–24548
  37. Eckman EA, Watson M, Marlow L, Sambamurti K, Eckman CB 2003 Alzheimer's disease  $\beta$ -amyloid peptide is increased in mice deficient in endothelin-converting enzyme. *J Biol Chem* 278:2081–2084
  38. Hemming ML, Selkoe DJ 2005 Amyloid  $\beta$ -protein is degraded by cellular angiotensin-converting enzyme (ACE) and elevated by an ACE inhibitor. *J Biol Chem* 280:37644–37650
  39. Zou K, Yamaguchi H, Akatsu H, Sakamoto T, Ko M, Mizoguchi K, Gong JS, Yu W, Yamamoto T, Kosaka K, Yanagisawa K, Michikawa M 2007 Angiotensin-converting enzyme converts amyloid  $\beta$ -protein 1–42 (A $\beta$ (1–42)) to A $\beta$ (1–40), and its inhibition enhances brain A $\beta$  deposition. *J Neurosci* 27:8628–8635
  40. Buxbaum JN, Ye Z, Reixach N, Friske L, Levy C, Das P, Golde T, Masliah E, Roberts AR, Bartfai T 2008 Transthyretin protects Alzheimer's mice from the behavioral and biochemical effects of A $\beta$  toxicity. *Proc Natl Acad Sci USA* 105:2681–2686
  41. Pike CJ 1999 Estrogen modulates neuronal Bcl-xL expression and  $\beta$ -amyloid-induced apoptosis: relevance to Alzheimer's disease. *J Neurochem* 72:1552–1563
  42. Figueiredo HF, Ulrich-Lai YM, Choi DC, Herman JP 2007 Estrogen potentiates adrenocortical responses to stress in female rats. *Am J Physiol Endocrinol Metab* 292:E1173–E1182
  43. Jayaraman A, Pike CJ 2009 Progesterone attenuates oestrogen neuroprotection via downregulation of oestrogen receptor expression in cultured neurones. *J Neuroendocrinol* 21:77–81
  44. Livak KJ, Schmittgen TD 2001 Analysis of relative gene expression data using real-time quantitative PCR and the 2 $^{-\Delta\Delta C(T)}$  method. *Methods* 25:402–408
  45. Beckett TL, Niedowicz DM, Studzinski CM, Weidner AM, Webb RL, Holler CJ, Ahmed RR, LeVine III H, Murphy MP 2010 Effects of nonsteroidal anti-inflammatory drugs on amyloid- $\beta$  pathology in mouse skeletal muscle. *Neurobiol Dis* 39:449–456
  46. Wakeling AE, Bowler J 1992 ICI 182,780, a new antioestrogen with clinical potential. *J Steroid Biochem Mol Biol* 43:173–177
  47. Stauffer SR, Coletta CJ, Tedesco R, Nishiguchi G, Carlson K, Sun J, Katzenellenbogen BS, Katzenellenbogen JA 2000 Pyrazole ligands: structure-affinity/activity relationships and estrogen receptor- $\alpha$ -selective agonists. *J Med Chem* 43:4934–4947
  48. Meyers MJ, Sun J, Carlson KE, Marriner GA, Katzenellenbogen BS, Katzenellenbogen JA 2001 Estrogen receptor- $\beta$  potency-selective

- ligands: structure-activity relationship studies of diarylpropionitriles and their acetylene and polar analogues. *J Med Chem* 44: 4230–4251
49. Schreiber JR, Hsueh AJ, Baulieu EE 1983 Binding of the anti-progestin RU-486 to rat ovary steroid receptors. *Contraception* 28: 77–85
  50. Kloosterboer HJ, Schoonen WG, Deckers GH, Klijn JG 1994 Effects of progestagens and Org OD14 in vitro and in vivo tumor models. *J Steroid Biochem Mol Biol* 49:311–318
  51. Hardy J, Selkoe DJ 2002 The amyloid hypothesis of Alzheimer's disease: progress and problems on the road to therapeutics. *Science* 297:353–356
  52. Gandy S, Petanceska S 2001 Regulation of Alzheimer  $\beta$ -amyloid precursor trafficking and metabolism. *Adv Exp Med Biol* 487:85–100
  53. Udrisar DP, Wanderley MI, Porto RC, Cardodo CL, Barbosa MC, Canberos MC, Cresto JC 2005 Androgen- and estrogen-dependent regulation of insulin-degrading enzyme in subcellular fractions of rat prostate and uterus. *Exp Biol Med (Maywood)* 230:479–486
  54. Zhao L, Yao J, Mao Z, Chen S, Wang Y, Brinton RD 2010  $17\beta$ -Estradiol regulates insulin-degrading enzyme expression via an ER $\beta$ /PI3-K pathway in hippocampus: relevance to Alzheimer's prevention. *Neurobiol Aging* 32:1949–1963
  55. Brosnihan KB, Hodgins JB, Smithies O, Maeda N, Gallagher P 2008 Tissue-specific regulation of ACE/ACE2 and AT1/AT2 receptor gene expression by oestrogen in apolipoprotein E/oestrogen receptor- $\alpha$  knock-out mice. *Exp Physiol* 93:658–664
  56. Gallagher PE, Li P, Lenhart JR, Chappell MC, Brosnihan KB 1999 Estrogen regulation of angiotensin-converting enzyme mRNA. *Hypertension* 33:323–328
  57. Seltzer A, Pinto JE, Viglione PN, Correa FM, Libertun C, Tsutsumi K, Steele MK, Saavedra JM 1992 Estrogens regulate angiotensin-converting enzyme and angiotensin receptors in female rat anterior pituitary. *Neuroendocrinology* 55:460–467
  58. Dean SA, Tan J, O'Brien ER, Leenen FH 2005  $17\beta$ -Estradiol down-regulates tissue angiotensin-converting enzyme and ANG II type 1 receptor in female rats. *Am J Physiol Regul Integr Comp Physiol* 288:R759–R766
  59. Proudler AJ, Cooper A, Whitehead M, Stevenson JC 2003 Effects of oestrogen-only and oestrogen-progestogen replacement therapy upon circulating angiotensin I-converting enzyme activity in postmenopausal women. *Clin Endocrinol (Oxf)* 58:30–35
  60. Sanada M, Higashi Y, Nakagawa K, Sasaki S, Kodama I, Sakashita T, Tsuda M, Ohama K 2001 Estrogen replacement therapy in postmenopausal women augments reactive hyperemia in the forearm by reducing angiotensin converting enzyme activity. *Atherosclerosis* 158:391–397
  61. Keator CS, Mah K, Ohm L, Slayden OD 2011 Estrogen and progesterone regulate expression of the endothelins in the rhesus macaque endometrium. *Hum Reprod* 26:1715–1728.
  62. Rodrigo MC, Martin DS, Eyster KM 2003 Vascular ECE-1 mRNA expression decreases in response to estrogens. *Life Sci* 73:2973–2983
  63. Neves LA, Chappell MC, Ferrario CM, Gallagher PE, Ganten D, Brosnihan KB 2006 Effect of estrogen on neprilysin expression in uterus and kidney of Sprague-Dawley normotensive and heterozygous (mRen2)27-transgenic hypertensive rats. *Peptides* 27:2912–2918
  64. Huang J, Guan H, Booze RM, Eckman CB, Hersh LB 2004 Estrogen regulates neprilysin activity in rat brain. *Neurosci Lett* 367:85–87
  65. Liang K, Yang L, Yin C, Xiao Z, Zhang J, Liu Y, Huang J 2010 Estrogen stimulates degradation of  $\beta$ -amyloid peptide by up-regulating neprilysin. *J Biol Chem* 285:935–942
  66. Xiao ZM, Sun L, Liu YM, Zhang JJ, Huang J 2009 Estrogen regulation of the neprilysin gene through a hormone-responsive element. *J Mol Neurosci* 39:22–26
  67. Quintela T, Gonçalves I, Baltazar G, Alves CH, Saraiva MJ, Santos CR 2009  $17\beta$ -Estradiol induces transthyretin expression in murine choroid plexus via an oestrogen receptor dependent pathway. *Cell Mol Neurobiol* 29:475–483
  68. Tang YP, Haslam SZ, Conrad SE, Sisk CL 2004 Estrogen increases brain expression of the mRNA encoding transthyretin, an amyloid  $\beta$  scavenger protein. *J Alzheimers Dis* 6:413–420; discussion 443–449
  69. Amtul Z, Wang L, Westaway D, Rozmahel RF 2010 Neuroprotective mechanism conferred by  $17\beta$ -estradiol on the biochemical basis of Alzheimer's disease. *Neuroscience* 169:781–786
  70. Wang JM, Singh C, Liu L, Irwin RW, Chen S, Chung EJ, Thompson RF, Brinton RD 2010 Allopregnanolone reverses neurogenic and cognitive deficits in mouse model of Alzheimer's disease. *Proc Natl Acad Sci USA* 107:6498–6503
  71. Chen S, Wang JM, Irwin RW, Yao J, Liu L, Brinton RD 2011 Allopregnanolone promotes regeneration and reduces  $\beta$ -amyloid burden in a preclinical model of Alzheimer's disease. *PLoS One* 6:e24293
  72. Gao H, Yallampalli U, Yallampalli C 2012 Protein restriction to pregnant rats increases the plasma levels of angiotensin II and expression of angiotensin II receptors in uterine arteries. *Biol Reprod* 86:68
  73. Casey ML, Smith JW, Nagai K, Hersh LB, MacDonald PC 1991 Progesterone-regulated cyclic modulation of membrane metalloendopeptidase (enkephalinase) in human endometrium. *J Biol Chem* 266:23041–23047
  74. Strom JO, Theodorsson A, Theodorsson E 2009 Dose-related neuroprotective versus neurodamaging effects of estrogens in rat cerebral ischemia: a systematic analysis. *J Cereb Blood Flow Metab* 29:1359–1372
  75. Gibbs RB 2000 Effects of gonadal hormone replacement on measures of basal forebrain cholinergic function. *Neuroscience* 101: 931–938
  76. Zhao L, Morgan TE, Mao Z, Lin S, Cadenas E, Finch CE, Pike CJ, Mack WJ, Brinton RD 2012 Continuous versus cyclic progesterone exposure differentially regulates hippocampal gene expression and functional profiles. *PLoS One* 7:e31267
  77. Cartharius K, Frech K, Grote K, Klocke B, Haltmeier M, Klingenhoff A, Frisch M, Bayerlein M, Werner T 2005 MatInspector and beyond: promoter analysis based on transcription factor binding sites. *Bioinformatics* 21:2933–2942
  78. Mannella P, Brinton RD 2006 Estrogen receptor protein interaction with phosphatidylinositol 3-kinase leads to activation of phosphorylated Akt and extracellular signal-regulated kinase 1/2 in the same population of cortical neurons: a unified mechanism of estrogen action. *J Neurosci* 26:9439–9447
  79. Zhao L, Teter B, Morihara T, Lim GP, Ambegaokar SS, Ubeda OJ, Frautschy SA, Cole GM 2004 Insulin-degrading enzyme as a downstream target of insulin receptor signaling cascade: implications for Alzheimer's disease intervention. *J Neurosci* 24:11120–11126