



Review

Nitric oxide-matrix metalloproteinase-9 interactions: Biological and pharmacological significance NO and MMP-9 interactions

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ABSTRACT

Nitric oxide (NO) and matrix metalloproteinase 9 (MMP-9) levels are found to increase in inflammation states and in cancer, and their levels may be reciprocally modulated. Understanding interactions between NO and MMP-9 is of biological and pharmacological relevance and may prove crucial in designing new therapeutics. The reciprocal interaction between NO and MMP-9 have been studied for nearly twenty years but to our knowledge, are yet to be the subject of a review. This review provides a summary of published data regarding the complex and sometimes contradictory effects of NO on MMP-9. We also analyse molecular mechanisms modulating and mediating NO-MMP-9 interactions. Finally, a potential therapeutic relevance of these interactions is presented.

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1. Introduction

1.1. Matrix metalloproteinases

Matrix metalloproteinases (MMPs) are a group of structurally similar endopeptidases with a zinc ion in the active site. All are capable of digesting components of the extracellular matrix including collagens, laminins, fibronectin, elastin, and proteoglycans. MMPs play a key role in controlling homeostasis of all extracellular matrix (ECM) proteins. The MMPs regulate cell function, growth and division, host defences, ECM synthesis, morphogenesis, wound healing, tissue repair, skeletal formation, apoptosis, as well as cleavage of transmembrane proteins and bioactive molecules. Dysregulation of the MMPs has been implicated in tumour angiogenesis, invasion and metastasis, inflammatory bowel disease, arthritis, atherosclerosis, respiratory and heart disease and may also play other diverse pathological roles [1–6].

1.1.1. Matrix metalloproteinase-9 and cardiovascular disease

Of MMPs, MMP-9 can be upregulated and it has been implicated in a variety of pathological conditions. A selective inhibition of MMP-9 may have a significant therapeutic relevance for the treatment of various inflammatory diseases. Cardiovascular (CV) disease, diabetes and

cancer are responsible for the majority of human deaths in the developed world and have all been associated with MMP-9 abnormalities. For example, changes in the CV extracellular matrix (ECM) are regulated by the gelatinases and their tissue inhibitors and, as key components of CV remodelling, are associated with inflammation and reactive, rather than reparative, fibrosis [7,8]. MMP-2 and MMP-9 knockout models are associated with reduced aortic elastin degradation [9] and protection from pressure overload myocardial hypertrophy, fibrosis and dysfunction [10]. Post-infarction models and models of left ventricular arrhythmogenesis have shown that MMP-9 gene promoters are temporally activated specifically in the region of myocardial injury [11,12]. The gene promoter region of MMP-9 includes a proximal activator protein-1 (AP-1) site which mediates an enhanced transcriptional response to a wide variety of cytokine and cellular stimuli [13]. In the clinic, independent associations between myocardial remodelling post-MI, left ventricular dysfunction and heart failure, have been identified with markers of inflammation, fibrosis and MMP-9 [8,14–17].

1.1.2. Matrix metalloproteinase-9 and diabetes

Microvascular and macrovascular complications of diabetes are associated with MMP-9 dysregulation. In an animal model of diabetic retinopathy, increased MMP-9 activity was observed in retinal microvessels and MMP-9 knockout was protective [18]. In patients, increased urinary excretion of MMP-9 supports a role for MMP-9 dysregulation in diabetic renal dysfunction [19] and aortic and coronary arteries of diabetic patients taken at autopsy had higher expression of MMP-9 compared

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to non-diabetics and were correlated with HbA1c as well as apoptosis [20]. Elevated MMP-9 has also been associated with arterial stiffness in patients with diabetes [21]. Furthermore, human genetic polymorphisms associated with MMP-9 elevation support a role for this enzyme in the pathophysiology of vascular disease. The 1562C > T single nucleotide polymorphism (SNP), which affects the promoter region of MMP-9 gene and increases circulating levels of MMP-9, is significantly associated with vascular disease in type 2 diabetes mellitus [22]. In age and sex matched controls, patients with type 2 diabetes, without and with microangiopathy, T allele frequencies were 11.9%, 13.1% and 24.4% respectively ($p < 0.05$).

1.1.3. Matrix metalloproteinase-9 and cancer

Matrix metalloproteinases (MMPs) play a central role in cancer cell intravasation and extravasation and their plasma levels are known biomarkers of breast, ovarian, colorectal, renal, pancreas, bladder and lung cancers [23]. MMP-9, in particular, regulates vascular endothelial growth factors, which, in turn, promote tumour growth and angiogenesis [24]. MMP-9 also modulates tumour-associated inflammation via cytokines and their receptors [25] and is involved in endothelial-mesenchymal-transition (EMT) whereby cells acquire migratory characteristics [26]. While, numerous preclinical studies demonstrate the ability of MMP inhibitors to delay primary tumour growth and block metastasis [27], MMP inhibition in the clinic has been limited by toxicity, including dose-limiting musculoskeletal pain and inflammation [28], while recent research on the development of MMP inhibitors has been focused on selective inhibition of MMPs [29].

1.1.4. Matrix metalloproteinase-9 and other diseases

MMP-9 abnormalities have been associated with disease progression in many other key organs. In the liver, MMP-9 has been associated with the fibrotic response to hepatitis C [30] and in models of fulminant liver failure where MMP-9 expression is increased, inhibition of MMP-9 was associated with improvement outcome when used early in the natural history of the disease [31]. In patients with kidney disease, interstitial fibrosis correlated with MMP-9 expression in the atrophic tubular nuclei [32] and elevated MMP-9 is also associated with the vascular complications of chronic kidney disease associated with diabetes [33]. In children with aggressive chronic renal dysfunction, focal segmental glomerulosclerosis is associated with elevated MMP-9, which may represent an early diagnostic biomarker as well as a therapeutic target [21]. In the gastrointestinal tract, elevated expression of MMP-9 is a feature of inflammatory bowel diseases such as Crohn's disease [34–36] and MMP-9 expressed in epithelial colonic tissue mediates inflammation in colitis with simultaneous increase in proinflammatory mediators [37].

The above paragraphs highlight the need for an MMP-9 inhibitor; however, to date, clinical trials of MMP inhibitors have been largely unsuccessful. Misguided outcome expectations combined with poor fundamental understanding of the complex role of MMPs in cancer and inflammation are seen as the main contributors to these failures. Several excellent reviews have examined the outcomes and postulate that a greater understanding of the role of MMPs in a given disease setting may yet offer hope for a clinically relevant MMP inhibitor in the future [1,38,39]. Improved selectivity for MMP-9 over constitutive MMPs would certainly be of benefit [40] and also an ability to target the dysregulation of the enzyme that leads to its pathophysiological role. Understanding the interactions of NO and MMP-9 may offer insights into novel mechanisms to inhibit the enzyme in disease states.

1.1.5. Structure and regulation of MMP-9

MMP-9 and MMP-2 are classified as gelatinases, owing to their ability to process synthetic gelatine. This designation may be considered a little arbitrary as they can digest a variety of the matrix proteins and have ability to cleave a growing list of bioactive molecules including transmembrane proteins [41]. Structurally, MMP-9 is composed of

several domains, including the pre, pro, and catalytic domains which connect to the C-terminal hemopexin-like domain via a hinge or linker region [42]. The hemopexin domain not only acts as a substrate binding domain [43] but can also interact with integrins on the cell surface to anchor MMP-9 and has been shown to trigger anti-apoptotic signalling pathways in B-cell chronic lymphocytic leukaemia [44]. All MMPs possess a catalytic domain of 165–170 amino acids which is essential for proteolysis [42,45]. The catalytic domain varies slightly in groove depth and the accessibility and depth of six side pockets that flank the defining zinc ion which is coordinated at the centre of the cleft by three histidine residues [46]. The S1' pocket has the greatest variation amongst the MMPs in both depth and amino acid composition. These features have made it an attractive target for small molecule inhibitor development. The gelatinases also have three fibronectin-like inserts in the catalytic domain and these differences account, in part for their differing substrate specificities [47,48].

MMP-9 is principally regulated at the level of transcription by various inflammatory factors but also through post-transcriptional events; secretion of the protein, activation, endogenous inhibitors and cell surface interactions [3]. De novo synthesis of large amounts MMP-9 can be rapidly induced by cytokines, growth factors or changes in cell-cell or cell-ECM interactions [3,49]. Like many other proteases, MMP-9 is secreted in the "pro" form as an inactive zymogen. Latency is conferred by the prodomain which masks the active-site cleft and prevents hydration of the catalytic zinc ion. An interaction between a sulfhydryl group on a conserved cysteine residue in the prodomain and the zinc ion constitutes this "cysteine switch" [50–52]. Activation of the enzyme, therefore, requires either proteolytic removal of the propeptide or disruption of the Zn^{2+} -cysteine bond. MMP-9 is most commonly activated by other proteases such as serine proteases, trypsin, plasmin, chymase and other MMPs [38,48] but it can also be activated by conformational perturbants such as heat, substrate binding, heavy metals and organomercury compounds such as aminophenylmercuric acetate, as well as oxidants and alkylating agents [52–56]. It has therefore been agreed that the pro-MMP-9 has to be secreted to the ECM in order to get activated; however other mechanisms can be also involved. Indeed, it has been proposed that pro-MMP-9 activation could take place at the plasma membrane. The interactions of the MT1-MMP/MMP-2 axis with pro-MMP-9 on the plasma membrane induced a full activation of MMP-9 in vitro, and under the same conditions, MMP-3 was also able to activate MMP-9 [57]. In addition, thrombin has been shown to induce pro-MMP-9 activation and association with $\beta 1$ -integrin in a human osteosarcoma cell line through a PI 3-kinase-dependent pathway, a key step in thrombin-induced tumour invasion [58].

1.1.6. Endogenous inhibitors of MMPs

A large number of endogenous inhibitors of MMPs exist, which serve to regulate activity and prevent uncontrolled proteolysis (Table 1). Of these inhibitors, the tissue inhibitors of metalloproteinase (TIMPs) are the most specific for the MMPs. The TIMPs are a family of secreted proteins which can bind all the MMPs in a 1:1 stoichiometry with varying efficiencies; TIMP-1 binds to MMP-9 with high affinity whereas TIMP-2 is a more effective inhibitor of MMP-2 [59,60]. TIMPs (21 to 29 kDa) have an N- and C-terminal domain of ≈ 125 and 65 amino acids, respectively, with each containing three conserved disulfide bonds. The N-terminal domain folds as a separate unit and is capable of inhibiting MMPs. The main inhibitor of MMPs in tissue fluids is $\alpha 2$ -macroglobulin [61]. Limited proteolysis of a bait region of the plasma protein by an MMP induces a conformational change in the macroglobulin which then encloses the enzyme [62]. It is a general proteinase inhibitor but may only bind to activated MMPs which are then irreversibly cleared by endocytosis following binding to a scavenger receptor [63].

Other proteins with MMP inhibiting properties, albeit less potent than the TIMPs, include the C-terminal fragment of the procollagen C-terminal proteinase enhancer protein (PCPE) [64]. The noncollagenous NC1

Table 1
Endogenous inhibitors of MMP-9.

Inhibitor	Method of inhibition	Targets	Reference
TIMP-1	Catalytic activity	Most MMPs, ADAM-10, ADAMTS-4	[1]
TIMP-2	Catalytic activity	Most MMPs, ADAMTS-4	[1]
TIMP-3	Catalytic activity	Most MMPs, ADAM-10, -12, -17, ADAMTS-4, -5	[1]
TIMP-4	Catalytic activity	Most MMPs	[1]
α 2-macroglobulin	Catalytic activity, clearance	Most proteases	[61]
C-terminal of PCPE	Catalytic activity		[64]
Tissue factor pathway inhibitor-2	Catalytic activity, activation	Serine proteases, other MMPs	[66]
NC1 domain of type IV collagen	Catalytic activity		[65]
Endostatin	Catalytic activity, activation	MT1-MMP	[67]
TSP-1	Inhibition of activation		[1]
TSP-2	Facilitates clearance		[1]
RECK proteins	Catalytic activity	MT1-MMP	[72]

domain of type IV collagen also shares structural similarities with TIMPs and has been shown to have MMP inhibiting properties [65]. A serine protease inhibitor named tissue factor pathway inhibitor-2 [66], and a collagen XVIII derived proteolytic fragment named endostatin can block the activation of MMP-2, MMP-9 and MMP-13 as well as the catalytic activity of MMP-2 and MT1-MMP [67,68]. Thrombospondin-1 (TSP-1) is an extracellular 450 kDa glycoprotein that directly binds pro-MMP-2 and -9 and inhibits their activation [69,70]. Thrombospondin-2 (TSP-2) is thought to bind MMP-2 and MMP-9 and facilitate a low density lipoprotein receptor-related protein (LRP)-mediated endocytosis and clearance in a manner similar to α 2-macroglobulin [69,71]. Reversion-inducing cysteine-rich protein with Kazal motifs (RECK) protein is a 110-kDa glycoprotein expressed in many normal tissues and is the only known membrane bound MMP inhibitor [72,73]. Finally, fatty acids have been shown to inhibit gelatinase activity but only weakly other MMPs. Activity was dependent on carbon chain length and presence of unsaturation, and inhibition involved binding to the fibronectin type II module of these gelatinases [74]. Other excellent reviews discuss endogenous inhibitors of MMPs in more detail [5,75].

1.2. Nitric oxide

NO is a ubiquitous gaseous and diatomic mediator, transducer and modulator from the conversion of L-arginine to L-citrulline by nitric oxide synthase (NOS). Three NOS isoforms have been discovered and are classified as neuronal NOS (nNOS, NOS1), endothelial NOS (eNOS, NOS3), which are both constitutively expressed calcium-dependent enzymes producing physiological levels of NO, and inducible NOS (iNOS, NOS2) which produces high levels of NO in a sustained manner. This inducible isoform is transcriptionally upregulated in inflammation in response to bacterial lipopolysaccharide or endotoxin, pro-inflammatory cytokines and other immune complexes, some of which also lead to the upregulation of MMP-9. The diverse roles of NO include smooth muscle relaxation, inhibition of platelet aggregation, neurotransmission [76], and immune and inflammatory modulation [77,78]. The NO involvement in diverse physiological processes is mostly mediated through its activation of the heme iron in the soluble guanylate cyclase (sGC). NO can also react directly with signalling proteins and when generated in high amounts such as during inflammation, it can react with superoxide anion to produce peroxynitrite, a much stronger oxidant, with significant pathophysiological/inflammatory contributions. Although NO has a half-life in the range of seconds, properties such as charge neutrality, a small molecular radius and hydrophobicity, allow for free diffusion through cell membranes. As NO reacts with oxygen and with oxygen-derived radicals as well as metal centres in proteins, such properties make it a key signal transducer [79].

The net effect of NO in a given setting depends on its environment and concentration. The iNOS generates the highest local flux. Following transcriptional upregulation of the enzyme, there is a delay of 6–8 h before NO production begins but this production is then sustained for

hours to days and is 1000 fold greater than those produced by the constitutive NOS isoforms [80]. The presence of molecular oxygen and its derived free radicals in the local environment affect NO concentration because these react at diffusion limited rates. Interestingly, vascular relaxation and vasodilator tone caused by NO are inhibited by superoxide and inhibition of superoxide production may enhance the effects of NO [81]. Therefore, scavengers of superoxide such as superoxide dismutase and oxyhaemoglobin influence NO bioavailability.

The observed effects of NO, especially those that lead to cytotoxicity have been also attributed to the generation of peroxynitrite from NO and superoxide [82–87]. In addition, NO not only can react directly with sulfhydryls [88,89], metal centres including iron/sulfur and Zn²⁺-thiolate groups [82,90,91] but also can react via metal independent mechanisms through generation of hydroxyl or carboxyl radicals formed from different decomposition reactions [92–94]. Some excellent reviews deal comprehensively with the chemistry and biochemistry of NO [79,95,96].

2. Effects of NO on activation of pro-MMP-9

Inflammation leads to concurrent up regulation of NO and MMP-9 [97–99], however, the biological outcome of the crosstalk between these two enzymes is not clear (see Table 2). For a detailed review of pro-MMP-9 activation, see Fridman et al. [100]. It is also worth noting the difficulties in measuring MMP-9 activity. While relative abundance or concentration of the enzyme can be measured using techniques such as western blot or ELISA, this data does not reveal the activity of the enzyme. Gelatin zymography is a commonly used technique which can separate the pro and active forms of the enzyme but a recent review has highlighted its limitations in providing true activity information [101]. Incomplete refolding of the enzyme following electrophoresis and dissociation of endogenous inhibitors mean that activity data can only be obtained from gelatin zymography when it is combined with a complimentary substrate degradation assay. Let's first review evidence for NO-mediated activation of MMP-9.

2.1. NO activates pro-MMP-9

NO could disrupt the Zn-thiolate bond in pro-MMP-9 leading to its activation. For example, there is also evidence showing that NO activates TNF- α converting enzyme, another metalloproteinase [102]. Furthermore, peroxynitrite has been shown to activate other MMPs [83,103–105]; the free radical can modulate the protein activity through S-nitrosylation of cysteine thiols [106–109], and it may also release Zn²⁺ from other Zn-thiolate centres [110,111].

The effect of NO on MMP-9 activation in rat retinal neurons was investigated by comparing wild-type with nNOS null animals. Increased MMP-9 activation was observed in the wild-type rats which was attributed to S-nitrosylation of the pro-enzyme [112]. Co-localization of MMP-9 activity and nNOS was also observed in the cortex. The study went on to demonstrate that transfected recombinant MMP-9

Table 2
Reported effects of NO on MMP-9.

Cell line/strain	Stimulating factor	Incubation time	NO conc.	NO donor/iNOS inhibitor	Observed effect	Reference
nNOS ^{-/-} and wild type rats	Focal cerebral ischemia and reperfusion		NA	nNOS ^{-/-} or 3-bromo-7-nitroindazole	↓MMP-9 compared to controls	[55]
Purified MMP-9		0–25 h	NA	S-nitrosocystein	↑activation compared to controls	[55]
nNOS ^{-/-} and wild type rats	intravitreal injections of NMDA and glycine	0–12 h	NA	nNOS ^{-/-} vs wild type rats	↓MMP-9 compared to controls	[112]
Rat Brain Astrocyte cells RBA1.	Endothelin-1	16 h	≈50% reduction in NO, relative to ET-1 induced levels with L-NAME 100nM	L-NAME (1, 10, 100nM) and iNOS siRNA	Dose dependent reduction (up to 10 fold) in MMP 9 activity	[113]
ANA-1 macrophage	INF-γ, LPS, L-arginine	4 h	50nM	NO/sper	↑ at ≤50nM and ↓ at higher concs	[114]
Lewis and Brown-Norway rats	Allogenic (Brown Norway to Lewis) heterotopic cardiac transplantation	24 h		1400 W (N-(3-(Aminomethyl) benzyl) acetamide (selective iNOS inhibitor))	↓ MMP-9 activity	[118]
HUVEC, NCI-H157, squamous carcinoma; NCI-H125, adenocarcinoma; and NCI-H522, adenocarcinoma	AMPA	16 h		Aminoguanidine 100 μM	↑ activity following incubation with aminoguanidine.	[124]
Purified r MMP-9	AMPA	6 h	5 or 10 nmol/min (for 0.5 and 1 μM spermin-NONOate). 30 μM NO from 100 μM SIN-1	spermine-NONOate (0.5 and 1 μM) or SIN-1 (20 μM, 200 μM, and 2 mM)	Dose dependent inhibition following incubation with the NO donors.	[124]
Purified rMMP-9		0–2 h		GSNO, SPER- NO, DETA NONOate, DEA-NONOate,SNOC	DETA NONOate or Sper-NO—↓activity at high concentration. SNOC—↑ activity	[125]
Rat glomerular mesangial cells MDA-MB-231, MCF-7	IL-1β TPA	36 h 24 h	?	SNAP (up to 1mMol/L) DETA-NO, SNAP or Spermine-NO (500 μM)	Conc dependent ↓ inhibition (up to 90%) Conc dependent inhibition. (max at 500 μM)	[175] [177]
Rat primary astrocytes NHBE, HBE1, CFT1, A549	LPS IL-1β, INF-γ, TNF-α	48 h 24 h	Donors of 100 μM (max inhibition)	SNAP or SNP spermine NONOate, DETA NONOate, SIN-1, SNAP, GSNO	↓ MMP 9 expression Dose dependent ↓ with SNAP and GSNO.	[176] [178]
RA-SMCs of Sprague Dawley rats	IL-1β (2 ng/ml)	24 h	2 to sixfold increase in NO.	DETA NONOate (0.1–500 μM)	Dose dependent ↓in MMP-9 activity and expression	[179]
NIH/3T3 cells	Thapsigargin-induced store-operated Ca ²⁺ entry			SNAP (200 μM)	↓in MMP-9 activity	[180]
VSM from male Wistar rats	IL-1β (5 ng/ml)	24 h		DETA NONOate (500 μM)	↓in MMP-9 activity and expression	[181]
Rat glomerular mesangial cells	IL-1β (2 nmol)	48 h		L-NMMA (0.3–5 mM)	Conc dependent ↑ in expression and activity.	[175]
Rat primary astrocytes	LPS	48 h	7 μM of nitrite	L-NAME (100 μM)	↑ MMP 9 expression	[176]
Rat aortic SMC	IL-1β	48 h	approximately 50 ng NO _x /mg protein	L-NMMA (50nM)	5 fold ↑ in pro MMP-9 mRNA	[182]
Rat aortic smooth muscle cells from Sprague Dawley rats	IL-1β (2 ng/ml)	48 h	↓ to 8.2 NO _x (ng/mg of protein)	Aminoguanidine (0–5 mM)	Conc dependent. Up to 155%↑ in mRNA	[183]
Rat infrarenal aorta tissue	IL-1β	72 h	Approximately 1250 ng/mg protein (at max increase)	L-NMMA	↑ at ≤0.5 mM and ↓ at higher concs	[184]
NHBE, HBE1	Linear scratch in the cells	24 h	Approximately 14.1–389.1 μM NO _x	DETA NONOate (10–500 μM)	↑ expression at ≤10 μM and ↓ at higher concs	[123]
C57BL/6 iNOS ^{-/-} . Murine neutrophils and macrophages	Hepatic I/R injury. IL-6, or INF- γ	24 h		iNOS ^{-/-} , ONO-1714	iNOS inhibition ↓ MMP-9 activity.	[189]
Rat aortic vascular SMC (A7r5)	INF-γ, LPS, PMA	12 h		L-NAME (300 μM)	Inhibition to near control	[190]
WiDR		8 h		SNAP	↑ expression	[191]

undergoes S-nitrosylation, and thus activation, following incubation with the NO donor S-nitrosocysteine [55]. Another group working with rat brain astrocytes demonstrated an increase in tyrosine nitration of the MMP-9 enzyme by co-immunoprecipitation, corresponding to an increase in enzyme activity following iNOS induction. Inhibition of iNOS using siRNA or L-NAME significantly reduced nitrate accumulation and potential MMP-9 activity as measured by gelatin zymography [113]. A biphasic regulation of MMP-9 activity has been demonstrated in ANA-1 cells and the trend replicated in purified pro-MMP-9 enzyme where lower concentrations of Sper/NO result in activation of the enzyme and higher concentrations of NO cause inhibition [114].

2.2. NO indirectly activates MMP-9

It is argued that these experiments do not provide direct evidence for NO S-nitrosylation of the prodomain or direct activation of the cysteine switch in vivo. During periods of prolonged inflammation, where large amounts of NO are produced by iNOS, there is a corresponding increase in oxidative species. The reaction of NO with superoxide anion to yield peroxynitrite is key in mediating many of the pro-oxidant and toxic effects of NO [115]. Peroxynitrite generation could be the mechanism through which NO may indirectly activate pro-MMP-9 as has been shown for other MMPs [83,116,117]. Inhibition of iNOS and superoxide generation resulted in an inhibition of potential MMP-9 activity as measured by zymography; however, no experiments were carried out to ascertain whether the observed activity was as a result of decreased protein synthesis or inhibition of protein activation [118]. A study on term placentas of type II diabetic patients showed that an increase in potential gelatinase B activity measured by zymography was associated with nitration of the enzyme by peroxynitrite [119]. Purified pro-MMP-9 was shown to be activated by peroxynitrite and to a much greater extent by GSNO₂, a product of the reaction of glutathione and peroxynitrite. As well as increased substrate digestion, evidence of S-glutathiolation of the pro-domain was shown using radiolabelling and MALDI-TOF MS [120]. A rat model of reperfusion injury showed that a peroxynitrite decomposition catalyst reduced MMP-9 activation as shown by gelatin and in situ zymography [121]. Although cell surface activation of MMP-9 is likely to be less frequent, another proposed mechanism of the indirect action of NO on MMP-9 enzyme activation is the upregulation of urokinase plasminogen activator (uPA), which has been shown to activate pro-MMP-9 [122]. While S-nitrosocysteine caused mild activation of recombinant pro-MMP-9, incubation of DETA NONOate with HBE1 or NHBE cell resulted in increased uPA mRNA and therefore increased pro-MMP-9 activation [123].

2.3. Nitric oxide-mediated inhibition of MMP-9

While the above studies provide evidence for NO activation of MMP-9, either directly or indirectly, there is substantial evidence for an inhibitory role of NO on MMP-9 activity. For example, endothelial and carcinoma co-cultures showed a marked increase in potential MMP-9 activity measured by gelatin zymography when incubated with the iNOS inhibitor aminoguanidine. To explain the result, purified MMP-9 enzyme was incubated with NO donor spermine-NONOate and the NO/superoxide donor SIN-1 which was expected to produce peroxynitrite. Both incubations resulted in a significant decrease in enzyme activity [124]. A very interesting study in this context, suggests that NO does not directly modulate pro MMP-9 activation. A range of NO donors; S-nitroso-glutathione (GSNO), spermine NONO-ate (SPERNO), DETA NONOate (DETA-NO), and DEA NONOate (DEA-NO) and S-nitrosocysteine (CSNO) were tested on purified pro-MMP-9 enzyme. Of these NO donors, only SNOc caused any increase in activity. At high concentrations, DETA-NO inhibited gelatinase activity measured using a fluorescent substrate. While the compounds produced different modifications to a synthetic pro domain, these alterations were deemed

to be unrelated to enzyme activation. The NO donors were incubated with the active form of MMP-9 and again, DETA-NO was found to markedly inhibit enzyme activity which was unrelated to cysteine switch activation or other oxidative modifications to the enzyme [125] and presumably due to interactions at the active site.

While activation of pro-MMP-9 by NO seems plausible, it has not been conclusively proven in an in-vitro or in-vivo setting. Variation in observations may be accounted for by the use of different NO donors with differing release properties and NO flux and duration. The use of S-nitrosocysteine as a surrogate of endogenous NO has also been questioned [126]. The above studies show that direct activation of pro-MMP-9 by NO is possible. The effect on MMP-9 is concentration dependent with a trend of increased activity at low concentration and inhibition at higher concentrations. The biological relevance of this observation remains to be determined as the presence of other oxidants and known MMP-9 activators are likely to be more salient in-vivo. The actions of NO in regulation of MMP-9 distribution and expression are expected to provide a greater net contribution to MMP-9 activity.

3. Effect of NO on MMP-9 release and distribution

Following synthesis of pro-MMP-9 enzyme, activation is dependent on its release from the cell and availability of activating agents. Once activated, the effect that the enzyme will exert is dependent on its distribution at the cell surface, in the extracellular milieu or even within the cell. Its gelatinolytic activity is therefore affected by cell surface associations, internalisation or other protein interactions. As generalised proteolysis is seen as counterproductive for cell migration, interaction with receptors, adhesion sites and invasive protrusions may have developed to allow local effective concentrations of active MMP-9 and directed ECM degradation [124,127].

Following its release, surface associated MMP-9 has been identified in a variety of biological systems under both physiological and pathological conditions including neutrophils [128], endothelial cells [129–131], myocardium [98,132–134], keratinocytes [135], breast epithelial [129,136], breast cancer [137], pancreatic cancer [138], ovarian cancer [139], prostate cancer [140], fibrosarcoma [141,142], and mouse mammary carcinoma cells [143]. It has been proposed that the affinity of the gelatinases for collagen IV, specifically through the $\alpha 2$ (IV) chain may cause the ECM to act as a reservoir for the enzymes which become activated by inflammatory cells. Other interactions with CD44, RECK and LRP proteins have been shown to cause surface localisation, inhibition and internalisation respectively. These interactions have demonstrated an additional, complex layer of MMP-9 regulation which can direct the activity of the enzyme and are the subject of other reviews [100,144]. Here we will focus on interactions that NO is reported to influence.

Treatment of neonatal rats subjected to hyperoxia with L-NAME, an inhibitor of NOS, led to increased activity of MMP-2 and MMP-9 in lungs [97]. The latter effect could reflect the inhibitory effects of NO on the release of these gelatinases from leukocyte gelatinase granules [97,145], as well as from human platelets [146].

In a study investigating the effect of doxycycline on neutrophil degranulation and MMP-9 release, nitro-glycerine (GTN) caused a reduction in the MMP-9 activity in the cell supernatant, even though microscopy revealed that degranulation had occurred. Most of the MMP-9 activity was found to be associated with the cell pellet and so it was hypothesised that nitrate caused increased cell surface association of the enzyme [147].

Migrating trophoblasts have been shown to express MMP-9 in a manner regulated by NO [148]. The motile cells actively redistribute iNOS to the leading migrating edge of the cell. Interestingly, MMP-9 was found to be co-localised with iNOS at the lamellopodia and to be crucial for cell invasion. This group postulate that the co-localisation is either NO-mediated S-nitrosylation and activation of the pro-MMP-9 enzyme, or else a possible effect on the release or distribution of the

enzyme [149]. In either case, the directed generation of NO and thus MMP-9 activity establishes a further role of NO in the distribution of active MMP-9.

The activity of MMP-9 in colon cancer cell lines is inhibited by cGMP analogues as shown by immunoblotting and gelatin zymography. It was discovered that this inhibition is not caused by a decrease in mRNA levels but by a compartmental redistribution of the enzyme leading to a tenfold increase in intracellular MMP-9 shown by flow cytometry [150].

Caveolin-1 (Cav-1) is a scaffold protein believed to play a role in survival and invasion of certain cancer types. While its exact role is poorly understood, it seems to act as an oncogene in some cancers [151–153] while playing the role of a tumour suppressor in others [154–157]. In a model of hepatocellular carcinoma, overexpression of cav-1 resulted in an increased expression of MMP-9 [158]. Conversely, a breast cancer model shows that MMP-9 activity is reduced in cells expressing cav-1 while cell lysates showed no alteration in endogenous expression of the enzyme. It has been suggested that cav-1 mediates an alteration in the secretion of the gelatinase [159]. Interestingly, caveolin also plays an important role in regulation of NOS [160]. In this context, Philips and Birnby studied the interactions of NO with MMP-9 and cav-1 using an endothelial and lung carcinoma cell co-culture model studied the effects of NO on MMP-9 and cav-1. Treatment with an iNOS inhibitor resulted in strong co-localisation. This localisation is believed necessary for optimum activation of MMP-9 but is abolished in the presence of an NO donor [124].

Activation of pro-MMP-9 by other MMPs such as MMP-2, MMP-7 and MMP-13 is likely to be a cell surface event as these enzymes associate with the cell surface. One activation cascade described for MMP-9 involves the activation of plasmin from plasminogen following binding of the urokinase plasminogen activator (uPA) to the urokinase plasminogen activator receptor (uPAR) which is on the plasma membrane. Activated plasmin can activate pro-MMP-3 which can in turn activate pro-MMP-9 [161]. This cascade offers the cell an opportunity to control the distribution of activated MMP-9 and directed proteolysis. There is evidence that NO can increase expression of uPAR but inhibit the expression of uPA [123,162,163] and so the net effect on the distribution of active MMP-9 is not clear.

Localisation of MMP-9 has been demonstrated to represent another layer of regulation on its activity and NO is implicated in this regulation. Increasing concentration of NO will increase the internalisation or cell surface association of MMP-9 which may occur through interaction with CD44 or collagen IV. NO can also regulate the expression and activation of MMP-9 activating factors including other MMPs, cav-1 and uPA which will affect the distribution of the active enzyme.

4. Effect of NO on expression of MMP-9

The MMPs, with the exception of MMP-2, are inducible enzymes whose basal expression is low in most normal adult cells. De novo synthesis of large amounts of MMPs can be rapidly induced by cytokines, growth factors or changes in cell-cell or cell-ECM interactions [3,49]. Important inducers include tumour necrosis factor (TNF- α), interleukin (IL-1 α and β , 2, 8, 15, 17), interferon (IFN- α and γ), epidermal-growth factor (EGF), platelet-derived growth factor (PDGF), hepatocyte growth factor (HGF), basic fibroblast growth factor (bFGF), transforming growth factor (TGF- α and β), amphiregulin, CCL5, bacterial lipopolysaccharide (LPS) and phorbol esters (e.g. PMA) [48,164–166]. Physical interactions of certain cells with the ECM or other cells that have been shown to induce MMP expression include extracellular matrix metalloproteinase inducer (EMMPRIN or basigin or CD147) [167], various integrins [168], leukocyte function-associated antigen-1 (LFA-1) interaction with intercellular adhesion molecule-1 (ICAM-1) [169], very late antigen 4 (VLA-4), vascular cell adhesion molecule-1 (VCAM-1) [170], gp39 and CD40 interaction [171]. Mechanical stress

and alterations in cell shape have also been reported to lead to the transcriptional upregulation of certain MMPs. The transcription of each MMP is independently controlled depending on the cell type, stimulating factors and therefore the signal transduction pathways that are activated, although several MMPs share common cis-acting elements in their promoter and are therefore co-expressed. Some of the main pathways implicated are those involving the MAP kinases which are composed of JNK 1/2, ERK 1/2, and p38. These kinases may lead to the induction or inhibition of protease synthesis depending on the cell type [172,173]. Many of these signalling pathways converge at Jun and Fos oncoprotein activation which heterodimerize to bind to an Activator Protein-1 (AP-1) binding site, causing MMP upregulation [38,75]. Variation in transcription may be accounted for by the other elements or the combination of factors binding to the MMP promoters. ETS oncoproteins bind to PEA3 sites [174], Nuclear Factor kappa B (NF- κ B), SP-1, JAK/STAT, and Smad are some of the contributors to MMP transcriptional regulation [173].

Although the effects of NO on MMP-9 expression have been studied by a number of investigators there is no agreement if NO promotes or reduces the expression of MMP-9. The following chapters review this conundrum as well as molecular mechanisms that may contribute to the effects of NO.

4.1. NO inhibits MMP-9 expression

Several studies report an inhibitory effect of NO donors on MMP-9 mRNA compared with stimulated controls [175–181]. Consistent with these observations are reports that in similar cell culture models, NOS inhibitors, which reduce NO availability, increase MMP-9 expression [175,176,182,183]. The change in mRNA appears to be dependent on the concentration of the NOS inhibitor or NO donor used, however, a biphasic regulation has been demonstrated where the increase in MMP-9 expression following incubation with the NOS inhibitor L-NMMA peaked at 0.5 mM (approximately 1250 ng NO_x/mg protein). Further increase in concentration of the inhibitor resulted in a decrease in mRNA until it reached control levels at 5 mM (approximately 500 ng NO_x/mg protein) [184]. An indirect role of NO in MMP-9 expression is through its ability to inhibit platelet aggregation [185]. This inhibition will prevent platelet aggregate mediated increase in MMP-9 expression [186–188].

4.2. NO promotes MMP-9 expression

In several studies, incubation of cells with NOS inhibitors caused an inhibition of MMP-9 expression suggesting a promoter roll for NO [123,189–191]. In a rat model of atherosclerosis it was reported that MMP-9 was induced to a greater extent in iNOS^{+/+} rather than iNOS^{-/-} animals indicating that NO increases MMP-9 expression [192]. As discussed previously, the effects of NO donors on MMP-9 expression may also be concentration dependent, as seen with a biphasic response to DETA-NONOate [123]. In this study, low levels of the NO donor (10 μ M) resulted in increased gene expression; however, higher concentrations (100–500 μ M) had the opposite effect. The biphasic response may be attributed to peroxynitrite following reaction with superoxide. In an ischemic-reperfusion injury model, peroxynitrite was found to increase the expression of MMP-9, an effect that was inhibited by NOS inhibitor L-NAME [193,194]. A study on amyloid beta degradation in Alzheimer's disease found that NO increased MMP-9 expression both in vitro and in vivo [195]. Further evidence of the complex indirect role of NO on MMP-9 expression was shown in a similar model where Cav-1 inhibited MMP-9 activity. L-NAME and iNOS null mice showed that NO decreased Cav-1 expression and so increased MMP-9 activity [196,197].

4.3. The effect of NO on signal transduction pathways and nuclear factors that modulate MMP-9 transcription

MMP-9 expression is controlled by extracellular factors which trigger a network of signal transduction pathways resulting in transcriptional upregulation. The human MMP-9 gene lies on chromosome 20 and covers 13 exons spanning 7.7 kb [198]. Expression of the gene yields a 2.5 kb mRNA which is regulated by a 670 bp sequence within the promoter which contains binding sites for NF- κ B, AP-1, PEA3, and SP-1 [198,199]. The complex transcriptional regulation of MMP-9 has been the subject of intense study [200–207]. NO may preferentially alter transcription factors that are sensitive to the cellular redox state including NF- κ B, AP-1 and SP-1 [80] (Fig. 1).

4.3.1. NF- κ B

NF- κ B is a transcription factor known to upregulate the transcription of many pro-inflammatory mediators [208,209] and has been shown to be essential for MMP-9 upregulation [210–212]. The interaction between NO and NF- κ B has been widely studied and previously reviewed [213,214], however the picture remains unclear. A significant complicating factor in the context of MMP-9 regulation is the NF- κ B regulation of iNOS. Low concentrations of NO or presence of peroxynitrite will augment NF- κ B activity whereas at high concentration, NO is likely to function in a negative feedback loop to reduce iNOS expression. Reductions in NF- κ B activity following exposure to NO have been attributed to S-nitrosylation of a cysteine residue in the p50 subunit [215,216], inhibition of NF- κ B DNA binding [217] or stabilization of I κ B [218]. Increased activity has been observed at low concentration of NO [219] through stimulation of IKK- α which likely occurs following S-nitrosylation and activation of ras [220].

Regulation of the NF- κ B pathway by NO is likely to be the same for MMP-9 as iNOS and will depend on NO concentration and presence of superoxide. The iNOS inhibitor aminoguanidine caused an upregulation of MMP-9 through increased I κ B degradation and NF- κ B binding [183].

S-nitrosothiols inhibited p50 nuclear translocation and NF- κ B DNA binding, thus reducing TNF- α mediated MMP-9 expression [178]. Superoxide and peroxynitrite have an opposite role to NO and increase p65 nuclear translocation and NF- κ B binding [210,221]. Reactive oxygen species (ROS) generated from NADPH oxidase also activated NF- κ B resulting in an upregulation of MMP-9 [222]. The effects on MMP-9 expression are, however, cell specific and NF- κ B has been reported to play no role in some cases [177,223].

4.3.2. AP-1

AP-1 consists of a mixture of dimeric basic region-leucine zipper proteins (bZIP) that belong to the Jun, Fos, Maf and ATF sub families. C-Jun is the most potent transcriptional activator whereas Fos proteins cannot homodimerise but form heterodimers with Jun proteins [224]. The AP-1 motif in the MMP-9 gene is considered by some to be the most important for its expression [201,211]. Indeed, a single mutation in the AP-1 binding site abolishes TNF- α or IL-1 β induced MMP-9 expression [210,225]. NO can modulate AP-1 activity through modifications of a redox sensitive cysteine residue in c-Jun or c-Fos [226]. Oxidation or nitrosylation reduces DNA binding [227].

DETA-NO is reported to inhibit the MMP-9 transcriptional upregulation in response to TPA in breast cancer cells. This effect was attributed to inhibition of c-Jun using EMSA and TransAM assay [177]. NOS inhibitors increase AP-1 binding by approximately 200% compared with IL-1 β stimulated cells [183]. Where NO caused the upregulation of MMP-9, AP-1 was shown to be critical by using AP-1 deletion mutants of MMP-9 luciferase promoter constructs [191]. Superoxide has been shown to increase AP-1 binding in MMP-9 upregulation [210].

4.3.3. cGMP/protein kinase G

Many of NO's diverse physiological actions are attributed to its ability to activate soluble guanylate cyclase (sGC) through binding of its heme group. Activation of sGC triggers formation of cyclic GMP, an important signalling molecule [80]. cGMP exerts its effects through

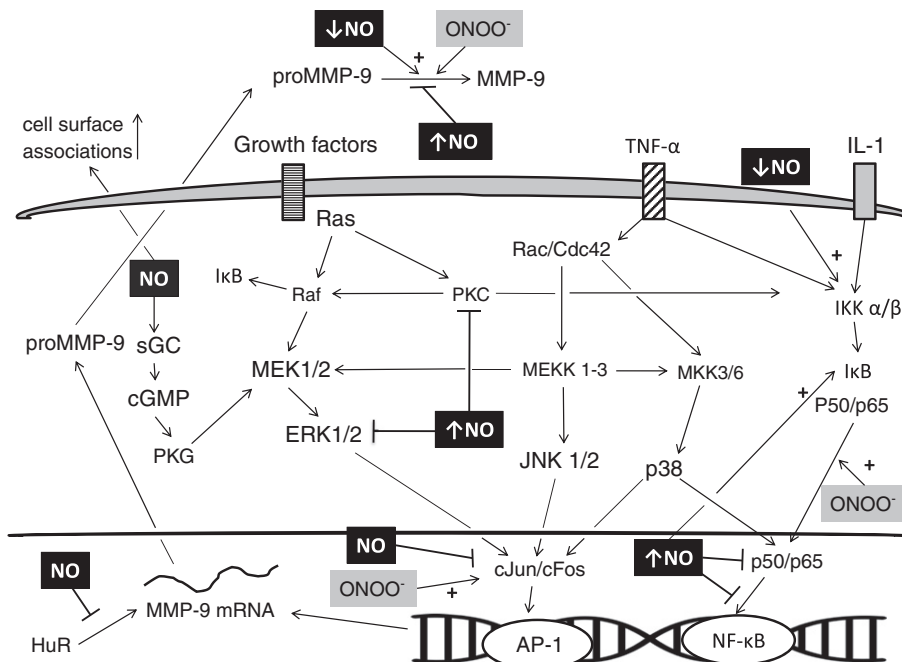


Fig. 1. Representation of some of the pathways involved in the transcriptional upregulation of MMP-9 and the possible impacts of NO and peroxynitrite (ONOO⁻). \uparrow indicates high concentration and \downarrow indicates low concentration. + indicates a promoter role and - indicates an inhibitory role. The effect exerted by NO will depend on the concentration and presence of peroxynitrite. TNF- α , tumour necrosis factor-alpha; IL-1, interleukin-1 (alpha or beta); I κ B, inhibitor of NF- κ B; IKK (α or β), I κ B (α or β) kinase; MEKK1-6, MEK1-6 kinase [mitogen-activated protein kinase kinase kinase (MAPKKK)-family]; MAPK, mitogen-activated protein kinase; MAPKAPK, MAPK-activated protein kinase; MAPKK, MAPK kinase; MAPKKK, MAPKK kinase; MEK/MKK, MAPK/ERK kinase; MEKK, MEK kinase; ERK, extracellular signal-regulated kinase; JNK/SAPK, c-jun N-terminal kinase/stress-activated protein kinase; sGC, soluble guanylate cyclase; cGMP, cyclic guanosine monophosphate; PKC/PKG, protein kinase C/G; NF- κ B, nuclear factor-kappa B; AP-1, activating protein-1.

cyclic nucleotide-gated channels, phosphodiesterases, protein kinase A (PKA) and protein kinase G (PKG) [228], where change is effected through transcription factor phosphorylation and/or transcription. Interestingly, transcription factors, including AP-1, that are activated by cGMP are also regulated by NO through protein modification [229]. Several conflicting studies have used specific inhibitors of sGC, analogues of cGMP or PKG to determine whether observed effects of NO on MMP-9 expression are mediated through this pathway.

cGMP analogues can mimic the NO donor mediated down regulation of MMP-9 in MCF-7 cells. This down regulation was blocked following co-incubation with a PKG inhibitor, implicating the cGMP/PKG pathway [177]. Similar results were reported in smooth muscle cells where inhibition of MMP-9 activity by eNOS gene transfer was mimicked by DETA-NONOate or the cGMP analogue 8-bromo-cGMP [230].

Where MMP-9 expression was potentiated by NO, the addition of a sGC inhibitor returned MMP-9 mRNA to basal levels [191]. Similar results were reported when NO-donor mediated upregulation of MMP-9 was inhibited following co-incubation with sGC or PKG inhibitors. The role of the pathway was confirmed when the addition of a cGMP analogue reversed the effect [190].

Where a biphasic regulation of MMP-9 was observed, the stimulation observed at low NO level were attributed to cGMP, whereas the inhibition observed at higher concentrations was independent of sGC/cGMP [114]. In another study where MMP-9 was upregulated by NO, activation of a sGC/PKA pathway resulted in phosphorylation of Wilms tumour 1 (WT1). Phosphorylation caused a shuttling of WT1, a transcriptional repressor, from the nucleus to the cytosol causing upregulation of MMP-9 [231]. The NO sensitive cGMP/PKG pathway also negatively regulates store-operated Calcium entry (SOC) in fibroblasts. This inhibition has been reported to indirectly inhibit MMP-9 synthesis and release, where increased SOC increases MMP-9 release [180].

The influence of cGMP is likely cell specific, as NO-donor mediated inhibition of MMP-9 was found to be independent of cGMP in endothelial cells [223] and cGMP analogues were unable to replicate the effects of NO in IL-1 β stimulated rat mesangial cells [175]. It is reported elsewhere that PKG had no effect on basal or NO modulated MMP-9 expression [123]. This suggests a PKG independent cGMP mediated pathway.

4.3.4. MAP kinases/protein kinase C

The mitogen activated protein kinases (MAPK) [232] and protein kinase C (PKC) [200] are two families of kinase signalling cascades involved in the activation of MMP-9 transcription factors. AP-1 and NF- κ B are both regulated by MAP kinases which can in turn be activated by PKC- ζ , so interactions between the molecules in MMP-9 regulation seem likely [200].

Protein kinase C is a family of isoenzymes with differential distribution, substrate specificities and activation responsiveness. They are split into conventional (α , β I, β II, γ), novel (δ , ϵ , η /L, θ) and atypical (ζ , λ /L). Few studies have examined the specific isoenzyme involved in MMP-9 expression but PKC- α , β , and in particular ζ have been implicated [200,201]. NO donors have been shown to inhibit JNK through S-nitrosylation in several cell models [233–236]. Inhibitors of p38 and ERK MAP kinases showed an additive reduction though not complete inhibition of IL-1 β or superoxide stimulated MMP-9 mRNA. Superoxide worked with IL-1 β to increase phosphorylation of ERK, p38 and JNK to increase MMP-9 expression [210].

In one study where AP-1 was inhibited by an NO donor, the upstream MAPK, JNK was unaffected. The donor caused an inhibition of PKC- δ resulting in reduced MMP-9 expression [177]. ERK 1/2 stimulated by LPS was also shown to be inhibited by an NO donor. Interestingly, the inhibition was reversed with a cGMP analogue [176]. DETA-NONOate was found to attenuate superoxide mediated ERK activation and MMP-9 upregulation in vascular smooth muscle cells [181].

In a colon cancer cell line, NO caused the upregulation of MMP-9. The upregulation was abolished in the presence of inhibitors of sGC, PKG or ERK. The study showed that NO caused the upregulation in a cGMP/PKG/ERK dependent manner and can increase ERK 1/2 phosphorylation by 12 fold [191].

A careful analysis of reports on NO-stimulator or NO-inhibitor effects on the MMP-9 gene expression allows for the following conclusions. First, as MMP-9 is an inducible enzyme and basal expression levels are often low, the stimulating factor can strongly affect response. Nitric oxide does not appear to influence basal MMP-9 expression [175,177]. Second, reports describing opposing effects of NO on gene expression may be explained by the complexity of the regulation and the influence of cell type, NO source (physiological, pathological or pharmacological), its concentrations and duration of action, as well as timing of exposure of MMP-9-generating systems to NO.

5. Nitric oxide and its effects on MMP-9 mRNA stability

Post-transcriptional regulation is increasingly recognised as being critical for gene expression. Microarray studies have shown that over half of stress-response genes are regulated by changes in mRNA stability [237,238]. Regulation of the fate of mRNA is through its 3' UTR (untranslated region) which contain cis-regulatory elements. The adenylate and uridylylate-rich elements (AREs) constitute one class of these elements that regulate cytoplasmic mRNA [239] and target labile mRNA for degradation [240]. Several families of ARE-binding proteins (ARE-BP) regulate the fate of the mRNA. HuR is a ubiquitously expressed ARE-BP belonging to the ELAV family which stabilizes ARE containing mRNAs [241,242]. NO has been shown to regulate the expression of several genes including heme oxygenase 1 [243], transforming growth factor- β 3 [244], endothelin-converting-enzyme-1 [245], IL-8, TNF- α and p21/Waf1 [246] by influencing the mRNA stability. Interestingly, binding of HuR is found to be essential for the stability of iNOS mRNA [247] and the inhibition of sGC induced by cAMP results from inhibition of HuR expression [248]. It has also been shown elsewhere that cGMP-elevating agents decrease the expression and RNA binding of HuR [249].

MMP-9 mRNA contains numerous AUUA motifs in its 3'UTR and the stabilizing effects of HuR have been reported [250,251]. The stability of existing mRNA can be measured using actinomycin to block de novo synthesis of mRNA. Nitric oxide donors were shown to inhibit the expression of HuR and thus reduce its binding to in the 3'UTR through a sGC-cGMP pathway [252]. The half-life of MMP-9 mRNA from rat mesangial cells was reduced from 8 h to 4 h following co-incubation with NO-donors [253]. This finding was consistent with the discovery that the stability of the MMP-9 mRNA is dependent on HuR binding to the ARE.

Where DETA-NONOate reduced the stability of MMP-9 mRNA in cultured astrocytes, AUF-1, and not HuR, was found to play a mediating role. Protein levels of the mRNA destabilising factor and its binding to the MMP-9 3' UTR were found to be increased following addition of the NO donor [254]. Addition of AUF-1 siRNA was found to partially reverse the NO mediated inhibition of MMP-9 and thus confirming a further mechanism of NO mediated MMP-9 mRNA destabilisation.

Based on the available evidence, we conclude that increased concentrations of NO reduce the stability of MMP-9 mRNA, most likely, through downregulation of HuR and increased expression of AUF-1.

6. NO and MMP-9 in the tumour microenvironment

Our current understanding of the role of MMP-9 in cancer is incomplete but has been summarised elsewhere [1,5,38] and is seen as being a key agonist in the progression of several cancers including colorectal, lung, oral and pancreatic through increasing invasion, metastasis and angiogenesis [24,255]. While upregulation of MMPs by tumours has long been established, it is now known that stromal cells, such as fibroblasts, endothelial cells and leucocytes can play an equally important

role by releasing MMP-9 to the tumour microenvironment following activation of growth factors in the ECM by tumour cells, release of cytokines and growth factors, and through direct cell–cell contact with tumours [256,257]. Tumours and tumour associated stromal cell interactions are incompletely understood, but their recruitment serves to enhance the metastatic efficiency. An interesting study on skin squamous cell carcinoma found that increased expression of stroma-derived MMP-9 occurred exclusively in enhanced malignant tumour transplants [258]. NO is believed to play a dual role in metastasis which may be linked to its concentration within the tumour microenvironment [259], where sources of NO include macrophages, neutrophils, fibroblasts, endothelial cells and in some cases, tumours themselves and all three NOS isoforms have been implicated in various cancer types [259]. An interesting study on the mechanism of IL-2/ α -CD40 immunotherapy found that the inhibition of metastasis was as a result of induction of iNOS expression by stromal macrophages and therefore a reduction in MMP-9 expression and activity within the tumour. An NO donor JS-K was able to mimic these effects [260]. To our knowledge, this is the first example of an NO mediated cross-talk between the tumour and stroma resulting in the regulation of MMP-9 but it would seem likely to be more ubiquitous given the prevalence of NO and MMP-9 upregulation.

7. Using NO donors/mimetics as therapeutic agents

The quest for a clinically useful MMP inhibitor (MMPi) has been ongoing for several decades. The most common problems encountered during clinical development such as poor efficacy and side effects have been attributed to inadequate MMP subtype specificity. Over the past number of years, our knowledge of the role of individual MMPs in various processes and the regulation of these enzymes has greatly expanded. However, the emerging network and relationship between MMPs and their physiological and pathophysiological environments appear to be more complex than it had been originally anticipated. Therefore, the real challenge may not lie merely in the development of selective inhibitors of an MMP subtype (which might have multiple opposing roles *in vivo*), but rather in regulating the dysregulated enzymes activity that is specifically associated with pathobiology. This complex problem may require us to look at factors controlling MMP expression and aberrant activity. As more is being understood about the role of endogenous NO in various disease processes and more studies are being conducted on the influence of NO on MMP-9 regulation, nitrates and other NO donors may prove useful as therapeutic agents in inhibition of dysregulated MMPs.

NO has been incorporated into several established pharmacological agents as NO–drug hybrids in an effort to enhance efficacy and decrease side-effects of the resultant pharmacological agents. Of these, hybrids of NO with non-steroidal anti-inflammatory drugs (NO-NSAIDs) [261–264], NO-glucocorticoids [265–267], and NO-salbutamol [268–270] have been extensively studied for their anti-inflammatory properties but not specifically as MMP-9 inhibitors.

Glyceryl trinitrate (GTN) has long been used clinically for over 150 years and has a well-established toxicity profile [271]. Its potential use as an MMPi was demonstrated when it reduced plasma MMP-9 levels by increasing the enzyme membrane binding and inhibited release [147]. In contrast, GTN is reported to activate pro-MMP-9 [272], increasing potential MMP-9 activity through an increase in NF- κ B activation [273] and increased MMP-9 expression [274].

Our group has reported an interesting family of barbiturate–nitrate hybrids. These compounds are able to inhibit MMP-9 catalytic activity and reduce MMP-9 secretion. The hybrids more potently inhibited tumour cell invasion than their non-nitrate analogues [275]. These promising results illustrate the potential for the use of NO donors or nitrate-hybrids in the treatment of conditions where MMP-9 plays a role in the pathophysiology.

Many of the issues relating to the use of NO donors as MMP-9 inhibitors overlap with their use as anti-cancer agents and are already the subject of review [276]. Understanding the endogenous role of NO in a given disease state, in particular the concentration threshold for any dual response, will be key in the effective use of these compounds as therapeutic agents.

8. Conclusion

The role of NO in the regulation of MMP-9 has been the subject of intense study over the previous two decades and the models used have spanned several cell types and disease states. This review presents these studies and the often conflicting results as a representation of the dual nature of the molecule at almost every level of MMP-9 regulation. In making sense of the apparent contradiction in the results, it is crucial to first understand the role of concentration in this biphasic nature of NO. NO effects are often separated into cGMP dependent, which tend to occur at lower NO flux, and cGMP independent, occurring at higher concentrations. These cGMP independent effects are often mediated by formation of peroxynitrite [86,87,277,278], leading to direct reaction with proteins to alter their function through S-nitrosylation, tyrosine nitration or oxidation [279]. Indeed, peroxynitrite often opposes the biological effects of NO [86,87,280–282]. The balance of these reactions will often give rise to a threshold in concentration, beyond which the role of NO may change. To further complicate this concentration-dependent role of NO, effects will also be cell- and environment-specific depending on the presence of endogenous antioxidants [283] and other genes involved in regulating a given response. The dichotomy of protective and damaging effects of NO is evident in inflammation, where iNOS is generally considered pro-inflammatory, whereas eNOS and nNOS are considered anti-inflammatory [284] and also in the dual roles of NO in apoptosis [277,285].

Through studies with recombinant pro-MMP-9, activation of the zymogen by NO donors has been demonstrated. Other studies have shown that this effect is dependent on the donor used and that higher concentrations of NO may in fact inhibit enzyme activity through interaction with the active site. The overall relevance of these findings in an *in-vivo* setting remains to be determined. NO also directs proteolysis by MMP-9 by affecting local activity through increased cell surface association, directed distribution, internalisation or modulation of pro-MMP-9 activating factors. Regulation of MMP-9 expression by NO is a concentration dependent event with a trend of increased expression at low NO concentration and downregulation at higher concentrations of NO. This trend may not hold for all cells and will depend on the stimulating factors and so, the transcription factors involved in the expression. Activity of NF- κ B and cGMP are both increased at low NO and inhibited at high NO concentration and so follow this observed trend. Increasing levels of NO will also reduce MMP-9 expression through a decrease in mRNA stability.

Despite intense work in the field over previous decades, and increased understanding of the role of MMP-9 in human pathology, clinically useful MMP inhibitors have proven elusive. This review highlights the complexity of NO-MMP-9 interactions and presents some of the challenges that have been encountered and need to be resolved. Further studies to separate the opposing roles of NO in MMP-9 regulation will clarify its part in a given disease process and will allow its inhibitory role to be exploited as a therapeutic agent.

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