World Journal of Gastroenterology

World J Gastroenterol 2018 March 14; 24(10): 1063-1180





Contents

Weekly Volume 24 Number 10 March 14, 2018

MINIREVIEWS

1063 Inflammatory bowel disease registries for collection of patient iron parameters in Europe

Halfvarson J, Cummings F, Grip O, Savoye G

ORIGINAL ARTICLE

Basic Study

Narrow line between benefit and harm: Additivity of hyperthermia to cisplatin cytotoxicity in different gastrointestinal cancer cells

Cesna V, Sukovas A, Jasukaitiene A, Naginiene R, Barauskas G, Dambrauskas Z, Paskauskas S, Gulbinas A

1084 Sex disparity in viral load, inflammation and liver damage in transgenic mice carrying full hepatitis B virus genome with the W4P mutation in the preS1 region

Lee SA, Lee SY, Choi YM, Kim H, Kim BJ

1093 Determination of the mitigating effect of colon-specific bioreversible codrugs of mycophenolic acid and aminosugars in an experimental colitis model in Wistar rats

Choapade SS, Dhaneshwar SS

1107 Maturity of associating liver partition and portal vein ligation for staged hepatectomy-derived liver regeneration in a rat model

Tong YF, Meng N, Chen MQ, Ying HN, Xu M, Lu B, Hong JJ, Wang YF, Cai XJ

Proteinase-activated receptor 2 promotes tumor cell proliferation and metastasis by inducing epithelialmesenchymal transition and predicts poor prognosis in hepatocellular carcinoma

Sun L, Li PB, Yao YF, Xiu AY, Peng Z, Bai YH, Gao YJ

Retrospective Cohort Study

Budd-Chiari syndrome in China: A 30-year retrospective study on survival from a single center Zhang W, Wang QZ, Chen XW, Zhong HS, Zhang XT, Chen XD, Xu K

Retrospective Study

Risk factors of electrocoagulation syndrome after esophageal endoscopic submucosal dissection

Ma DW, Youn YH, Jung DH, Park JJ, Kim JH, Park H



Contents

World Journal of Gastroenterology Volume 24 Number 10 March 14, 2018

Clinical Practice Study

1152 Progesterone receptor membrane component 1 as a potential prognostic biomarker for hepatocellular carcinoma

Tsai HW, Ho CL, Cheng SW, Lin YJ, Chen CC, Cheng PN, Yen CJ, Chang TT, Chiang PM, Chan SH, Ho CH, Chen SH, Wang YW, Chow NH, Lin JC

META-ANALYSIS

1167 Colonic lesion characterization in inflammatory bowel disease: A systematic review and meta-analysis

Lord R, Burr NE, Mohammed N, Subramanian V



Contents

World Journal of Gastroenterology Volume 24 Number 10 March 14, 2018

ABOUT COVER

Editorial board member of *World Journal of Gastroenterology*, Georgios Tsoulfas, MD, PhD, Associate Professor, Department of Surgery, Aristotle University of Thessaloniki, 66 Tsimiski St, Thessaloniki 54622, Greece

AIMS AND SCOPE

World Journal of Gastroenterology (World J Gastroenterol, WJG, print ISSN 1007-9327, online ISSN 2219-2840, DOI: 10.3748) is a peer-reviewed open access journal. *WJG* was established on October 1, 1995. It is published weekly on the 7th, 14th, 21st, and 28th each month. The *WJG* Editorial Board consists of 642 experts in gastroenterology and hepatology from 59 countries.

The primary task of *WJG* is to rapidly publish high-quality original articles, reviews, and commentaries in the fields of gastroenterology, hepatology, gastrointestinal endoscopy, gastrointestinal surgery, hepatobiliary surgery, gastrointestinal oncology, gastrointestinal radiation oncology, gastrointestinal imaging, gastrointestinal interventional therapy, gastrointestinal infectious diseases, gastrointestinal pharmacology, gastrointestinal pathophysiology, gastrointestinal pathology, evidence-based medicine in gastroenterology, pancreatology, gastrointestinal laboratory medicine, gastrointestinal molecular biology, gastrointestinal immunology, gastrointestinal microbiology, gastrointestinal genetics, gastrointestinal translational medicine, gastrointestinal diagnostics, and gastrointestinal therapeutics. *WJG* is dedicated to become an influential and prestigious journal in gastroenterology and hepatology, to promote the development of above disciplines, and to improve the diagnostic and therapeutic skill and expertise of clinicians.

INDEXING/ABSTRACTING

World Journal of Gastroenterology (WJG) is now indexed in Current Contents®/Clinical Medicine, Science Citation Index Expanded (also known as SciSearch®), Journal Citation Reports®, Index Medicus, MEDLINE, PubMed, PubMed Central and Directory of Open Access Journals. The 2018 edition of Journal Citation Reports® cites the 2016 impact factor for WJG as 3.365 (5-year impact factor: 3.176), ranking WJG as 29th among 79 journals in gastroenterology and hepatology (quartile in category Q2).

EDITORS FOR THIS ISSUE

Responsible Assistant Editor: Xiang Li Responsible Electronic Editor: Yu-Jie Ma Proofing Editor-in-Chief: Lian-Sheng Ma

Responsible Science Editor: Xue-Jiao Wang Proofing Editorial Office Director: Ze-Mao Gong

NAME OF JOURNAL

World Journal of Gastroenterology

ISSN

ISSN 1007-9327 (print) ISSN 2219-2840 (online)

LAUNCH DATE October 1, 1995

FREQUENCY Weekly

EDITORS-IN-CHIEF

Damian Garcia-Olmo, MD, PhD, Doctor, Professor, Surgeon, Department of Surgery, Universidad Autonoma de Madrid; Department of General Surgery, Fundacion Jimenez Diaz University Hospital, Madrid 28040, Spain

Stephen C Strom, PhD, Professor, Department of Laboratory Medicine, Division of Pathology, Karolinska Institutet, Stockholm 141-86, Sweden

Andrzej S Tarnawski, MD, PhD, DSc (Med), Professor of Medicine, Chief Gastroenterology, VA Long Beach Health Care System, University of California, Irvine, CA, 5901 E. Seventh Str., Long Beach, CA 90822, United States

EDITORIAL BOARD MEMBERS

All editorial board members resources online at http://www.wignet.com/1007-9327/editorialboard.htm

EDITORIAL OFFICE

Ze-Mao Gong, Director
World Journal of Gastroenterology
Baishideng Publishing Group Inc
7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-2238242
Fax: +1-925-2238243
E-mail: editorialoffice@wjgnet.com
Help Desk: http://www.f6publishing.com/helpdesk
http://www.wjgnet.com

PUBLISHER

Baishideng Publishing Group Inc 7901 Stoneridge Drive, Suite 501, Pleasanton, CA 94588, USA Telephone: +1-925-2238242 Fax: +1-925-2238243 E-mail: bpgoffice@wjgnet.com Help Desk: http://www.f6publishing.com/helpdesk http://www.wjgnet.com

PUBLICATION DATE

March 14, 2018

COPYRIGHT

© 2018 Baishideng Publishing Group Inc. Articles published by this Open-Access journal are distributed under the terms of the Creative Commons Attribution Noncommercial License, which permits use, distribution, and reproduction in any medium, provided the original work is properly cited, the use is non commercial and is otherwise in compliance with the license.

SPECIAL STATEMENT

All articles published in journals owned by the Baishideng Publishing Group (BPG) represent the views and opinions of their authors, and not the views, opinions or policies of the BPG, except where otherwise explicitly indicated.

INSTRUCTIONS TO AUTHORS

Full instructions are available online at http://www.wignet.com/bpg/gerinfo/204

ONLINE SUBMISSION

http://www.f6publishing.com



Submit a Manuscript: http://www.f6publishing.com

DOI: 10.3748/wjg.v24.i10.1084

World J Gastroenterol 2018 March 14; 24(10): 1084-1092

ISSN 1007-9327 (print) ISSN 2219-2840 (online)

ORIGINAL ARTICLE

Basic Study

Sex disparity in viral load, inflammation and liver damage in transgenic mice carrying full hepatitis B virus genome with the W4P mutation in the preS1 region

Seoung-Ae Lee, So-Young Lee, Yu-Min Choi, Hong Kim, Bum-Joon Kim

Seoung-Ae Lee, So-Young Lee, Yu-Min Choi, Hong Kim, Bum-Joon Kim, Department of Microbiology and Immunology, Biomedical Sciences, Liver Research Institute and Cancer Research Institute, Seoul National University, College of Medicine, Seoul 110799, South Korea

ORCID number: Seoung-Ae Lee (0000-0002-4451-8165); So-Young Lee (0000-0002-9638-893X); Yu-Min Choi (0000-0003-4709-3155); Hong Kim (0000-0003-1383-6803); Bum-Joon Kim (0000-0003-0085-6709).

Author contributions: Kim BJ conceived this research and participated in its design and coordination; Lee SA performed the experiments; Lee SY, Choi YM and Kim H analyzed and interpreted the data; Kim BJ contributed the reagents, materials and analysis tools.

Supported by the Korea Health Technology R&D Project through the Korea Health Industry Development Institute and the Ministry of Health and Welfare, South Korea, No. HI14C0955.

Conflict-of-interest statement: There was no conflict of interest

Data sharing statement: No additional data are available.

Open-Access: This article is an open-access article which was selected by an in-house editor and fully peer-reviewed by external reviewers. It is distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited and the use is non-commercial. See: http://creativecommons.org/licenses/by-nc/4.0/

Manuscript source: Unsolicited manuscript

Correspondence to: Bum-Joon Kim, PhD, Professor, Department of Biomedical Sciences, Microbiology and Immunology, and Liver Research Institute, Seoul National University College of Medicine, 103, Daehak-ro, Jongno-gu,

Seoul 110799, South Korea. kbumjoon@snu.ac.kr

Telephone: +82-2-7408316 Fax: +82-2-7430881

Received: January 11, 2018

Peer-review started: January 11, 2018 First decision: January 25, 2018 Revised: January 31, 2018 Accepted: February 9, 2018 Article in press: February 9, 2018 Published online: March 14, 2018

Abstract

AIM

To study sex disparity in susceptibility to hepatocellular carcinoma (HCC), we created a transgenic mouse model that expressed the full hepatitis B virus (HBV) genome with the W4P mutation.

METHODS

Transgenic mice were generated by transferring the pHY92-1.1x-HBV-full genome plasmid (genotype A2) into C57Bl/6N mice. We compared serum levels of hepatitis B surface antigen (HBsAg), interleukin (IL)-6, and the liver enzymes alanine aminotransferase (ALT) and aspartate transaminase (AST), as well as liver histopathological features in male and female transgenic (W4P TG) mice and in nontransgenic littermates of 10 mo of age.

RESULTS

W4P TG males exhibited more pronounced hepatomegaly, significantly increased granule generation in liver tissue, elevated HBsAg expression in the liver and serum, and higher serum ALT and IL-6 levels compared



to W4P TG females or littermate control groups.

CONCLUSION

Together, our data indicate that the W4P mutation in preS1 may contribute to sex disparity in susceptibility to HCC by causing increased HBV virion replication and enhanced IL-6-mediated inflammation in male individuals. Additionally, our transgenic mouse model that expresses full HBV genome with the W4P mutation in preS1 could be effectively used for the studies of the progression of liver diseases, including HCC.

Key words: Hepatitis B virus; W4P mutation of preS1; Transgenic mice; Hepatocellular carcinoma

© **The Author(s) 2018.** Published by Baishideng Publishing Group Inc. All rights reserved.

Core tip: With the development of hepatitis B virus (HBV) vaccine, the rate of chronic HBV infection has dramatically declined worldwide. However, the incidence of hepatocellular carcinoma (HCC), which is characterized by poor prognosis and low survival rate, is on the rise. Predominance in males is a representative global epidemiological characteristic of HCC. Recently, we introduced the novel W4P substitution into the preS1 region, which associated with HCC and notably occurred exclusively in male patients. Our study in the nude mouse xenograft model indicated that the W4P mutation likely contributed to IL-6-dependent HCC progression, particularly in male individuals. Here, to gain further insight into the role of this mutation in HBV-induced liver inflammation, we created transgenic mice carrying the full HBV genome with this mutation. Of note, our data showed that W4P transgene males of 10 mo of age, but not W4P transgene females, spontaneously developed liver damage due to IL-6mediated liver inflammation, further supporting the previous finding regarding the contribution of the W4P mutation to sex disparity in susceptibility to HCC. Furthermore, our results prove the utility of the developed W4P transgene mouse model for research into the mechanisms of HBV-caused liver diseases.

Lee SA, Lee SY, Choi YM, Kim H, Kim BJ. Sex disparity in viral load, inflammation and liver damage in transgenic mice carrying full hepatitis B virus genome with the W4P mutation in the preS1 region. *World J Gastroenterol* 2018; 24(10): 1084-1092 Available from: URL: http://www.wjgnet.com/1007-9327/full/v24/i10/1084.htm DOI: http://dx.doi.org/10.3748/wjg.v24.i10.1084

INTRODUCTION

Hepatitis B virus (HBV) infection causes a wide range of chronic infectious diseases, including chronic hepatitis, liver cirrhosis and hepatocellular carcinoma (HCC). In 2010, the number of patients in which HBV infection was the main cause of death was reported to be $786000 \text{ worldwide}^{[1,2]}$.

The incidence of chronic HBV infection in children has been considerably decreased by the successful development of antiHBV vaccine^[3-5]. Nevertheless, the high risk of liver cirrhosis (LC) and HCC is still a problem in adult HBV carriers. The five-year cumulative risk of HCC progression is approximately 10%-17% in LC patients, and disease progression from chronic hepatitis B to LC is expected in 12%-20% of patients in 5 years^[6-8]. HBV genotype C2, which is predominant in Asia, is associated with a particularly significant risk of HCC compared to that conferred by HBVs of other genotypes^[9-11]. The correlation between HBV infection and sex disparity in susceptibility to HCC has been well documented. However, the mechanism by which HBV causes cancer development is still unresolved. Premature termination of HBV X protein (HBx), which results in truncated hepatitis B surface antigen (HBsAg), or mutations, particularly deletions, in the preS region of large-surface proteins (LHBs) have been reported to be associated with HCC progression^[12-15].

Prevalence in males is one of the remarkable global epidemiological characteristics of HCC, as approximately 3-5 times more cases of HCC are observed in men than in women^[16-18]. The sex disparity is more prominent in HBV-related HCC than in hepatitis C virus-related HCC, suggesting the presence of an HBV infection-related factor that determines HCC male predominance^[19,20]. It has been reported that high expression levels of both androgen and active androgen receptor gene alleles increase the risk of HCC in male patients with chronic hepatitis B due to the interaction between HBx and androgen axis^[21-23].

HCC development is likely affected not only by the HBx-androgen axis interactions but also by a tumor-protective effect of estrogen. In particular, it has been suggested that taking contraceptives or postmenopausal hormone therapy associated with long-term exposure to estrogen reduces the risk of HCC in female patients^[24]. In addition, it has been reported that estrogen receptor a-mediated inhibition of interleukin (IL)-6 production had an essential role in inhibiting carcinogenesis in a mouse model of HCC induced chemically by diethylnitrosamine^[25,26].

On the basis of differential time courses of HCC development and disease severity in wild-type (WT) individuals and in individuals with LHB mutations, it has been proposed that mutated LHBs lead to carcinogenesis by inducing endoplasmic reticulum stress pathway or by altering transactivating capacity of hepatocytes^[27-29].

In a molecular epidemiological study, we have previously found that the W4P mutation in the preS1 start region is associated with HCC development in male but not female patients^[30]. In addition, our further cell-based and nude mouse xenograft model studies supported the notion that the W4P mutation likely induced HCC progression in an IL-6-dependent manner



WJG | www.wjgnet.com 1085 March 14, 2018 | Volume 24 | Issue 10 |

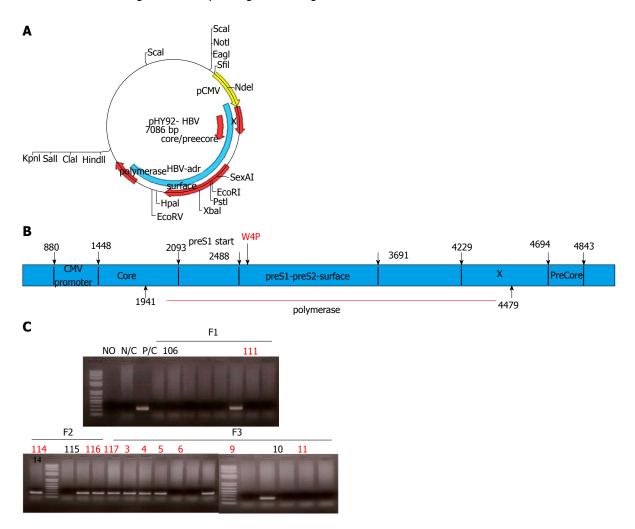


Figure 1 Construction of the W4P TG mice expressing pHY92-1.1x the HBV full genome with the preS1 W4P mutation and the screening of the constructed W4P TG mice. A: A plasmid map of pHY92 vector containing a copy of the 1.1x-unit length HBV genome under the control of a CMV promoter; B: The HBV full genome construct with a W4P missense mutation in the preS1 region; C: Screening of the constructed W4P TG mice by PCR targeting the preS1 region. CMV: Cytomegalovirus; HBV: Hepatitis B virus.

in male patients^[31]. Here, to gain further insight into the role of this mutation in the sex disparity of HBV-induced liver inflammation, we created transgenic (TG) mice carrying the full HBV genome with the W4P mutation and evaluated HBV virion replication and IL-6-mediated inflammation in male and female TG and WT individuals.

MATERIALS AND METHODS

Generation of the full-length HBV genome construct with the prS1 W4P mutation using site-directed mutagenesis. The mutant full-length HBV genome construct carrying the W4P mutation in the preS1 region (hereafter, pHY92-W4P) was generated by site-directed mutagenesis of the WT pHBV-1.1x vector (hereafter, pHY92-WT) (Genotype A, GenBank No. AF305422), which was kindly provided by Yang et al^[32]. The mutagenesis was performed using the forward primer W4P-F (5'- AACAAGAGCTACGCATGGGAGGT<u>CCG</u>T CATCAAAACCTC-3') and the reverse primer W4P-R (5'-GAGGTTTTGATGACGGACGTACCT

CCCATGCTGTAGCTCTTGTT-3') located from 2473 bp and 2513 bp. Site-directed mutagenesis of the full HBV genome was performed as described^[33].

TG mice

To generate W4P TG mice, fertilized C57BL/6N embryos and HBV full genome with the W4P mutation were comicroinjected into one-cell embryo in accordance with the standard microinjection procedures for TG mouse production (Macrogen, Seoul, Korea). Genotyping of TG mice was conducted by PCR and viral DNA samples obtained from tail vein bleeds were screened using the primers PreS-F (5'-GGGTCACCATATTCTTGGGAA-3') and PreS-R (5'-CGAATGCTCCCRCTCCTAC-3). The mice were housed in a specific pathogen-free laboratory animal center. The TG mice were crossed with B6D2F1/J mice (The Jackson Laboratory, Bar Harbor, ME, United States) and the HBV-expressing offspring mice, as well as their littermates, were used in this study. All animal experiments were conducted following United States' National Institutes of Health guidelines for housing and care of laboratory animals

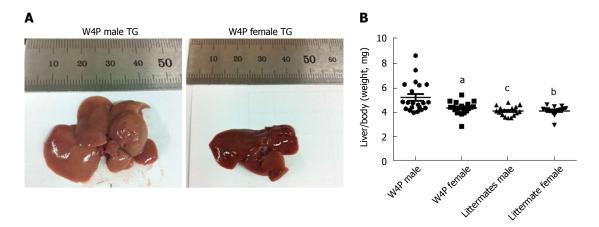


Figure 2 Increased hepatomegaly in the W4P male TG mice. A: In situ view of liver of W4P TG male mice and W4P TG female mice at 10 mo of age; B: Liver weight ratio against the total body weight (mg) in W4P mutant mice (males: 24 mice; females: 18 mice) and nonTG littermates (males: 17 mice; females: 15 mice) at 10 mo of age (*P < 0.05, *P < 0.01, and *P < 0.001 vs W4P male, one-way ANOVA.

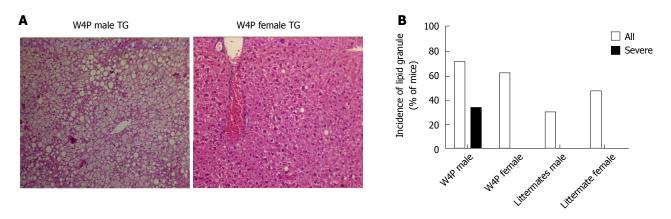


Figure 3 Increased generation of lipid droplets in W4P male TG mice. A: Comparison of generated lipid droplets in the liver section by hematoxylin-eosin staining (x 200); B: Incidence of lipid droplets in W4P mutant mice (males: 24 mice; females: 18 mice) and non TG littermates (males: 17 mice; females: 15 mice) at 10 mo of age.

and in accordance with the protocol approved by the Institutional Animal Care and Use Committee (IAUAC) of the Seoul National University College of Medicine (Protocol No. SNU-111025).

Enzyme-linked immunosorbent assay

Serum HBsAg levels in male and female W4P TG mice and their WT littermates were determined by enzyme-linked immunosorbent assay (ELISA) using a commercial Bioelisa HBsAg color kit (Biokit, Barcelona, Spain) according to the procedures provided by the manufacturer. The amount of secreted IL-6 was determined by a mIL-6 ELISA kit (eBioscience, San Diego, CA, United States). Serum levels of alanine aminotransferase (ALT) and aspartate transaminase (AST) were determined at the Seoul National University Hospital Biomedical Research Institute facility.

Hematoxylin and eosin staining and immunohistochemistry

Liver samples were fixed with 4% paraformaldehyde in phosphate-buffered saline and embedded in paraffin.

Tissue sections were stained with hematoxylin and eosin at the Seoul National University Hospital Biomedical Research Institute facility. Immunohistochemical staining with an anti-preS1 monoclonal antibody (Aprogen, Daejeon, South Korea) was also performed. Deparaffinized sections were heated in citrate buffer (Zytomed, Berlin, Germany) to accomplish antigen retrieval. Endogenous peroxidase was blocked with peroxidase blocking solution (Zytomed). An anti-preS1 antibody was applied as the primary antibody followed by the application of the avidin-biotin complex method to detect the primary antibody. Peroxidase activity was visualized by a 3,3'-diaminobenzidine substrate kit (Zytomed) with hematoxylin (Wako, Osaka, Japan) as counterstain.

Statistical analysis

All ELISA assays in this study were repeated at least three times, and the results were expressed as the mean percentage±standard deviation, or as the median (± range). For continuous variables, separate one-way analyses of variance were used to determine



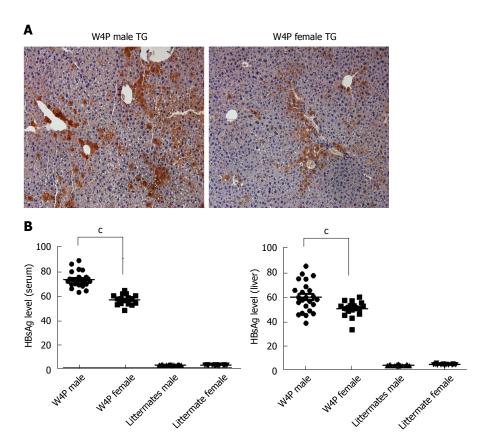


Figure 4 Increased secreted HBsAg level and liver LHBs in W4P male TG mice. A: Comparison of LHBs level in liver section by IHC analysis using anti-preS1 antibodies between W4P TG male and female mice (× 200); B: Comparison of HBsAg level in the liver and serum from W4P mutant mice (males: 24 mice; females: 18 mice) and nonTG littermates (males: 17 mice; females: 15 mice) at 10 mo of age (°P < 0.001 vs W4P male, one-way ANOVA). HBsAg: Hepatitis B surface antigen; IHC: Immunohistochemistry; LHBs: Large-surface proteins.

if there was a significant difference by using the Bartlett's test. All statistical analyses were conducted with a significance level of α = 0.05 (P < 0.05).

RESULTS

Construction of TG mice harboring full HBV genome with the W4P mutation in preS1

TG mice generated on B6D2F1/J background expressed the full-length HBV genome with the W4P mutation in preS1 under the control of the cytomegalovirus (CMV) promoter. For this purpose, we used site-directed mutagenesis of the pHY92 vector containing a copy of the 1.1x-unit length HBV genome under the control of the CMV promoter (genotype A, serotype adw, HBV strain identical to GenBank AF305422), which was provided by Yang et al^[32], and generated a missense mutation, changing tryptophan to proline (TGG to CCG) at the fourth codon of preS1 (Figure 1A). Comparison of WT and W4P mutant LHB region sequences is shown in Supplementary Figure 1.

To confirm whether TG mice harbored the full HBV genome, the presence of virion DNA and secreted HBsAg in the serum or liver was checked by PCR and ELISA, respectively (Figure 1A).

Increased hepatomegaly and lipid granule content in male W4P TG mice

To check whether there was sex disparity in hepatomegaly, we examined the ratio of the liver weight to total body weight between W4P TG mice (24 males, 18 females) and their nonTG littermates (17 males, 15 females) at 10 mo of age. W4P TG male mice showed a significantly higher liver to total body weight ratio compared to that in mice of the three other groups, including W4P TG female mice and nonTG littermates (male and female mice) (Figure 2). Examination of histological samples stained with hematoxylin and eosin revealed that the incidence of mice generating lipid granules was higher in W4P male mice compared to that in W4P TG female mice and nonTG littermates (Figure 3).

Higher serum levels of HBsAg and increased amounts of LHBs in the livers of male W4P TG mice

Next, to check whether there was sex disparity in HBV production, we determined HBsAg levels in the serum and LHB levels in the livers of W4P TG mice (24 males, 18 females) and their nonTG littermates (17 males, 15 females) at 10 mo of age. W4P TG male mice showed a significantly higher level of HBsAg in the serum

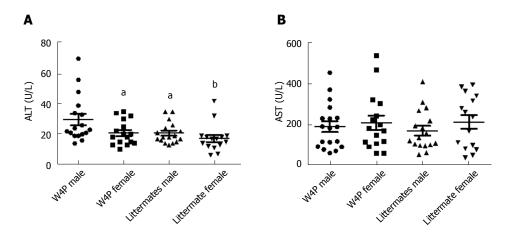


Figure 5 Serum alanine aminotransferase (A) and aspartate transaminase (B) levels in W4P TG mice (males: 24 mice; females: 18 mice) and nonTG littermates (males: 17 mice; females: 15 mice) at 10 mo of age. ^aP < 0.05, and ^bP < 0.01, vs W4P male, one-way ANOVA. ALT: Alanine aminotransferase; AST: Aspartate transaminase.

compared to that in mice from the other three groups. Immunohistochemical staining of the liver samples using an anti-preS1 antibody also showed increased LHB production in W4P TG male mice (Figure 4).

Increased serum levels of ALT and IL-6 in male W4P TG mice

It has been reported previously that the presence of the W4P mutation in the preS1 region sex-dependently affected IL-6 production in the xenograft nude mouse model system, which could be one of the reasons for increased male susceptibility to HCC[31]. Thus, to check whether there was sex disparity in the induction of IL-6mediated inflammation, we next examined serum IL-6 levels in W4P TG mice (24 males, 18 females) and their nonTG littermates (17 males, 15 females) at 10 mo of age. W4P TG male mice showed significantly higher serum IL-6 levels than did mice of the other three groups (Figure 5). We also checked the levels of liver enzymes in the serum as indicators of liver damage in the four groups of mice. We found that W4P TG male mice had significantly higher serum levels of ALT than mice from the other three groups. However, serum AST levels were not significantly different in the four groups of mice (Figure 6).

DISCUSSION

Increasing evidence has shown sex disparity in the incidence of HBV-associated HCC in a sex hormone-dependent manner. Sex hormones, including androgen and estrogen, likely affect the progression of HBV infection and development of HBV-related HCC *via* their actions on receptor-mediated cell signaling^[24-26]. To date, of all HBV proteins, HBx has been most extensively studied as the predominant virus interactor with host cell sex hormone-mediated signaling^[22,23]. However, in our recent molecular epidemiologic and cell-based studies, we have demonstrated that LHB harboring the W4P mutation in preS1 could also contribute to the sex

disparity of HBV-associated HCC in an IL-6-dependent manner^[30,31]. In the present study, we constructed W4P TG mice that expressed the full HBV genome, which can help us to study sex disparity of the progression of liver diseases, including chronic hepatitis, steatohepatitis, cirrhosis and HCC, following chronic HBV infection.

We identified three noteworthy findings supporting the contribution of the W4P mutation in preS1 to liver disease progression in male patients. First, by using the W4P TG mouse model of chronic HBV infection, we found that male W4P TG mice exhibited higher levels of secreted HBsAg and liver LHBs, which was indicative of higher HBV replication than in female W4P TG mice (Figure 4) and is one of the known HCC risk factors^[34]. Second, we found that male W4P TG mice showed increased incidence of hepatomegaly and lipid droplets (Figure 3), reflecting the imbalance of metabolic liver homeostasis, which could drive liver pathogenesis, including fatty liver and steatohepatitis, and further promote tumorigenesis. Third, we found that male W4P TG mice had increased IL-6-related liver inflammation and higher serum ALT levels (Figure 5), which were indications of liver damage, compared to those seen in female W4P TG mice.

IL-6 is one of the core stimulators that lead to persistent HBV infection and development of HBVrelated HCC. It is also a key cytokine that may be a link to preferential male susceptibility to HCC^[25,31]. A previous study that used diethylnitrosamine to evoke HCC showed that estrogen prevented HCC generation in female mice by inhibiting IL-6 production in a Myd88dependent manner. That observation suggested that inhibition of IL-6 production in liver Kupffer cells by estrogen and estrogen receptor-mediated signaling pathways could be a major molecular mechanism that underlies sex disparity in HBV-associated liver diseases, including HCC^[25,26]. Furthermore, increased hepatic IL-6 production also likely plays a pivotal role in the development of nonalcoholic fatty liver disease, nonalcoholic steatohepatitis, and insulin

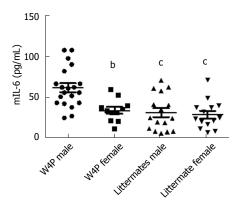


Figure 6 Secreted interleukin-6 levels in the W4P TG mice (males: 24 mice; females: 18 mice) and nonTG littermates (males: 17 mice; females: 15 mice) at 10 mo of age. ($^{\circ}P < 0.05$, $^{b}P < 0.01$, and $^{\circ}P < 0.001$ vs W4P_male, one-way ANOVA). ALT: Alanine aminotransferase; AST: Aspartate transaminase; IL: Interleukin.

resistance, which are the leading causes of HCC^[35-40]. Thus, our W4P TG model showing increased hepatic IL-6 production could provide a novel insight into the relationships between IL-6 production due to an infection caused by an HBV variant on the one hand, and development of nonalcoholic steatohepatitis, type 2 diabetes or HCC on the other hand.

Our study had some limitations. Unfortunately, we did not prove predominant carcinogenesis in males in our W4P TG mice. Therefore, further studies are necessary to demonstrate higher male susceptibility to liver carcinogenesis in our W4P TG mouse model and clarify its mechanism in the future. In addition, the relationships between increased hepatic production of IL-6 in mice expressing HBV genome with the W4P mutation and fat accumulation, increased liver weight and HCC development also remain to be elucidated in the future.

The phenotypes of male W4P TG mice, namely higher levels of IL-6 and ALT in the serum, could provide a technical advantage in drug screening protocols, as it will be possible to analyze not only the inhibition of HBV replication but also the antiinflammatory activity. To the best of our knowledge, this possibility is currently not available in other related TG mouse models.

In conclusion, we created W4P TG mice that constitutively express the full HBV genome with the W4P mutation in preS1 in the present study. Our data using W4P TG mice indicate that this mutation likely contributes to sex disparity in the susceptibility to liver disease, including HCC, leading to increased HBV virion replication and enhanced IL-6-mediated inflammation in male individuals. Additionally, the developed TG mouse model system carrying the full HBV genome with the W4P mutation in preS1 could be effectively used not only in basic research into the mechanisms of liver disease progression in HCC but also for the screening of antiHBV or antiinflammatory drugs.

ARTICLE HIGHLIGHTS

Research background

A remarkable global epidemiological feature of hepatocellular carcinoma (HCC) is its higher incidence in males. Recently, we identified the novel W4P substitution in the preS1 region of hepatitis B virus (HBV) related to HCC that occurs exclusively in male patients. We have also shown that the W4P mutation likely contributed to HCC development, particularly in male patients, in an interleukin (IL)-6-dependent manner.

Research motivation

Studies of sex disparity in the susceptibility to HCC *in vivo* have mainly utilized the chemical agent diethylnitrosamine to induce HCC in mice. However, no transgenic (TG) mouse model system expressing the full HBV genome has yet been available for the study of sex disparity in HBV-related liver diseases.

Research objectives

To gain further insight into the role of the W4P mutation in the preS1 region of HBV on sex disparity of HBV-induced liver inflammatory manifestations, we created a TG mouse that carried the full HBV genome with this mutation and evaluated HBV virion replication and IL-6-mediated inflammation in mutant and wild-type (WT) mice of both sexes.

Research methods

TG mice were generated by transferring the pHY92-1.1x-HBV-full genome plasmid (genotype A2) into C57Bl/6N mice. We compared serum levels of hepatitis B surface antigen (HBsAg), IL-6, and the liver enzymes alanine aminotransferase (ALT) and aspartate transaminase (AST), as well as liver histopathology features in male and female W4P TG mice and their WT littermates.

Research results

Our data showed significantly increased hepatomegaly, enhanced granule generation in liver tissue, higher HBsAg expression in the liver and serum, and higher serum ALT and IL-6 levels in W4P TG males compared to the values of these parameters in W4P TG females or littermate control groups.

Research conclusions

This is the first study that used TG mice to uncover the role of the W4P mutation in HBV preS1 in sex disparity of liver disease progression due to concomitantly increased HBV virion replication and greater IL-6-mediated inflammation in male individuals.

Research perspectives

The obtained results suggest that W4P TG mice developed in this study could be effectively used not only for the basic research into the mechanisms of HBV-associated liver diseases, including HCC, but also for screening antiHBV and antiinflammatory drugs.

REFERENCES

- 1 Lee WM. Hepatitis B virus infection. N Engl J Med 1997; 337: 1733-1745 [PMID: 9392700 DOI: 10.1056/ NEJM199712113372406]
- Lozano R, Naghavi M, Foreman K, Lim S, Shibuya K, Aboyans V, Abraham J, Adair T, Aggarwal R, Ahn SY, Alvarado M, Anderson HR, Anderson LM, Andrews KG, Atkinson C, Baddour LM, Barker-Collo S, Bartels DH, Bell ML, Benjamin EJ, Bennett D, Bhalla K, Bikbov B, Bin Abdulhak A, Birbeck G, Blyth F, Bolliger I, Boufous S, Bucello C, Burch M, Burney P, Carapetis J, Chen H, Chou D, Chugh SS, Coffeng LE, Colan SD, Colquhoun S, Colson KE, Condon J, Connor MD, Cooper LT, Corriere M, Cortinovis M, de Vaccaro KC, Couser W, Cowie BC, Criqui MH, Cross M, Dabhadkar KC, Dahodwala N, De Leo D, Degenhardt



- L, Delossantos A, Denenberg J, Des Jarlais DC, Dharmaratne SD, Dorsey ER, Driscoll T, Duber H, Ebel B, Erwin PJ, Espindola P, Ezzati M, Feigin V, Flaxman AD, Forouzanfar MH, Fowkes FG, Franklin R, Fransen M, Freeman MK, Gabriel SE, Gakidou E, Gaspari F, Gillum RF, Gonzalez-Medina D, Halasa YA, Haring D, Harrison JE, Havmoeller R, Hay RJ, Hoen B, Hotez PJ, Hoy D, Jacobsen KH, James SL, Jasrasaria R, Jayaraman S, Johns N, Karthikeyan G, Kassebaum N, Keren A, Khoo JP, Knowlton LM, Kobusingye O, Koranteng A, Krishnamurthi R, Lipnick M, Lipshultz SE, Ohno SL, Mabweijano J, MacIntyre MF, Mallinger L, March L, Marks GB, Marks R, Matsumori A, Matzopoulos R, Mayosi BM, McAnulty JH, McDermott MM, McGrath J, Mensah GA, Merriman TR, Michaud C, Miller M, Miller TR, Mock C, Mocumbi AO, Mokdad AA, Moran A, Mulholland K, Nair MN, Naldi L, Narayan KM, Nasseri K, Norman P, O'Donnell M, Omer SB, Ortblad K, Osborne R, Ozgediz D, Pahari B, Pandian JD, Rivero AP, Padilla RP, Perez-Ruiz F, Perico N, Phillips D, Pierce K, Pope CA 3rd, Porrini E, Pourmalek F, Raju M, Ranganathan D, Rehm JT, Rein DB, Remuzzi G, Rivara FP, Roberts T, De León FR, Rosenfeld LC, Rushton L, Sacco RL, Salomon JA, Sampson U, Sanman E, Schwebel DC, Segui-Gomez M, Shepard DS, Singh D, Singleton J, Sliwa K, Smith E, Steer A, Taylor JA, Thomas B, Tleyjeh IM, Towbin JA, Truelsen T, Undurraga EA, Venketasubramanian N, Vijayakumar L, Vos T, Wagner GR, Wang M, Wang W, Watt K, Weinstock MA, Weintraub R, Wilkinson JD, Woolf AD, Wulf S, Yeh PH, Yip P, Zabetian A, Zheng ZJ, Lopez AD, Murray CJ, AlMazroa MA, Memish ZA. Global and regional mortality from 235 causes of death for 20 age groups in 1990 and 2010: a systematic analysis for the Global Burden of Disease Study 2010. Lancet 2012; 380: 2095-2128 [PMID: 23245604 DOI: 10.1016/S0140-6736(12)61728-0]
- 3 Chang MH, Chen TH, Hsu HM, Wu TC, Kong MS, Liang DC, Ni YH, Chen CJ, Chen DS; Taiwan Childhood HCC Study Group. Prevention of hepatocellular carcinoma by universal vaccination against hepatitis B virus: the effect and problems. Clin Cancer Res 2005; 11: 7953-7957 [PMID: 16278421 DOI: 10.1158/1078-0432.CCR-05-1095]
- 4 Lavanchy D. Worldwide epidemiology of HBV infection, disease burden, and vaccine prevention. *J Clin Virol* 2005; 34 Suppl 1: S1-S3 [PMID: 16461208 DOI: 10.1016/S1386-6532(05)00384-7]
- Liang X, Bi S, Yang W, Wang L, Cui G, Cui F, Zhang Y, Liu J, Gong X, Chen Y, Wang F, Zheng H, Wang F, Guo J, Jia Z, Ma J, Wang H, Luo H, Li L, Jin S, Hadler SC, Wang Y. Reprint of: Epidemiological serosurvey of Hepatitis B in China--declining HBV prevalence due to Hepatitis B vaccination. *Vaccine* 2013; 31 Suppl 9: J21-J28 [PMID: 23948229 DOI: 10.1016/j.vaccine.2013.08.012]
- 6 Lavanchy D. Hepatitis B virus epidemiology, disease burden, treatment, and current and emerging prevention and control measures. *J Viral Hepat* 2004; 11: 97-107 [PMID: 14996343 DOI: 10.1046/j.1365-2893.2003.00487.x]
- Hui CK, Leung N, Yuen ST, Zhang HY, Leung KW, Lu L, Cheung SK, Wong WM, Lau GK; Hong Kong Liver Fibrosis Study Group. Natural history and disease progression in Chinese chronic hepatitis B patients in immune-tolerant phase. *Hepatology* 2007; 46: 395-401 [PMID: 17628874 DOI: 10.1002/hep.21724]
- 8 Liaw YF, Chu CM. Hepatitis B virus infection. Lancet 2009; 373: 582-592 [PMID: 19217993 DOI: 10.1016/ S0140-6736(09)60207-5]
- 9 **McMahon BJ**. The influence of hepatitis B virus genotype and subgenotype on the natural history of chronic hepatitis B. *Hepatol Int* 2009; **3**: 334-342 [PMID: 19669359 DOI: 10.1007/s12072-008-9112-z]
- Schaefer S. Hepatitis B virus taxonomy and hepatitis B virus genotypes. World J Gastroenterol 2007; 13: 14-21 [PMID: 17206751 DOI:10.3748/wjg.v13.i1.14]
- 11 Croagh CM, Desmond PV, Bell SJ. Genotypes and viral variants in chronic hepatitis B: A review of epidemiology and clinical relevance. *World J Hepatol* 2015; 7: 289-303 [PMID: 25848459 DOI: 10.4254/wjh.v7.i3.289]

- Wang C, Teng Z, Zhu Y, Zhao AZ, Sun C. Associations between pre-S deletion mutation of hepatitis B virus and risk of hepatocellular carcinoma in the Asian population: a metaanalysis. *Med Sci Monit* 2015; 21: 1072-1077 [PMID: 25868851 DOI: 10.12659/MSM.894058]
- Mun HS, Lee SA, Jee Y, Kim H, Park JH, Song BC, Yoon JH, Kim YJ, Lee HS, Hyun JW, Hwang ES, Kook YH, Kim BJ. The prevalence of hepatitis B virus preS deletions occurring naturally in Korean patients infected chronically with genotype C. J Med Virol 2008; 80: 1189-1194 [PMID: 18461612 DOI: 10.1002/jmv.21208]
- Pollicino T, Cacciola I, Saffioti F, Raimondo G. Hepatitis B virus PreS/S gene variants: pathobiology and clinical implications. *J Hepatol* 2014; 61: 408-417 [PMID: 24801416 DOI: 10.1016/j.jhep.2014.04.041]
- 15 Iwamoto M, Watashi K, Tsukuda S, Aly HH, Fukasawa M, Fujimoto A, Suzuki R, Aizaki H, Ito T, Koiwai O, Kusuhara H, Wakita T. Evaluation and identification of hepatitis B virus entry inhibitors using HepG2 cells overexpressing a membrane transporter NTCP. Biochem Biophys Res Commun 2014; 443: 808-813 [PMID: 24342612 DOI: 10.1016/j.bbrc.2013.12.052]
- Jemal A, Bray F, Center MM, Ferlay J, Ward E, Forman D. Global cancer statistics. CA Cancer J Clin 2011; 61: 69-90 [PMID: 21296855 DOI: 10.3322/caac.20107]
- Prieto J. Inflammation, HCC and sex: IL-6 in the centre of the triangle. *J Hepatol* 2008; 48: 380-381 [PMID: 18093689 DOI: 10.1016/j.jhep.2007.11.007]
- Mittal S, El-Serag HB. Epidemiology of hepatocellular carcinoma: consider the population. J Clin Gastroenterol 2013; 47 Suppl: S2-S6 [PMID: 23632345 DOI: 10.1097/ MCG.0b013e3182872f29]
- 19 Liu WC, Liu QY. Molecular mechanisms of gender disparity in hepatitis B virus-associated hepatocellular carcinoma. World J Gastroenterol 2014; 20: 6252-6261 [PMID: 24876746 DOI: 10.3748/wjg.v20.i20.6252]
- Wang SH, Chen PJ, Yeh SH. Gender disparity in chronic hepatitis B: Mechanisms of sex hormones. *J Gastroenterol Hepatol* 2015; 30: 1237-1245 [PMID: 25708186 DOI: 10.1111/jgh.12934]
- Yu MW, Yang YC, Yang SY, Cheng SW, Liaw YF, Lin SM, Chen CJ. Hormonal markers and hepatitis B virus-related hepatocellular carcinoma risk: a nested case-control study among men. J Natl Cancer Inst 2001; 93: 1644-1651 [PMID: 11698569 DOI: 10.1093/jnci/93.21.1644]
- 22 Chiu CM, Yeh SH, Chen PJ, Kuo TJ, Chang CJ, Chen PJ, Yang WJ, Chen DS. Hepatitis B virus X protein enhances androgen receptor-responsive gene expression depending on androgen level. *Proc Natl Acad Sci* 2007; 104: 2571-2578 [PMID: 17259306 DOI: 10.1073/pnas.0609498104]
- 23 Bouchard MJ, Wang L, Schneider RJ. Activation of focal adhesion kinase by hepatitis B virus HBx protein: multiple functions in viral replication. J Virol 2006; 80: 4406-4414 [PMID: 16611900 DOI: 10.1128/JVI.80.9.4406-4414.2006]
- 24 Lam CM, Yong JL, Chan AO, Ng KK, Poon RT, Liu CL, Lo CM, Fan ST. Better survival in female patients with hepatocellular carcinoma: oral contraceptive pills related? J Clin Gastroenterol 2005; 39: 533-539 [PMID: 15942442 DOI: 10.1097/01.mcg.0000165670.25272.46]
- Naugler WE, Sakurai T, Kim S, Maeda S, Kim K, Elsharkawy AM, Karin M. Gender disparity in liver cancer due to sex differences in MyD88-dependent IL-6 production. *Science* 2007; 317: 121-124 [PMID: 17615358 DOI: 10.1126/science.1140485]
- Yeh SH, Chen PJ. Gender disparity of hepatocellular carcinoma: the roles of sex hormones. *Oncology* 2010; 78 Suppl 1: 172-179 [PMID: 20616601 DOI: 10.1159/000315247]
- Wang HC, Huang W, Lai MD, Su IJ. Hepatitis B virus pre-S mutants, endoplasmic reticulum stress and hepatocarcinogenesis. *Cancer Sci* 2006; 97: 683-688 [PMID: 16863502 DOI: 10.1111/j.1349-7006.2006.00235.x]
- 28 Hsieh YH, Su IJ, Wang HC, Chang WW, Lei HY, Lai MD, Chang WT, Huang W. Pre-S mutant surface antigens in chronic



- hepatitis B virus infection induce oxidative stress and DNA damage. *Carcinogenesis* 2004; **25**: 2023-2032 [PMID: 15180947 DOI: 10.1093/carcin/bgh207]
- 29 Caselmann WH, Meyer M, Kekulé AS, Lauer U, Hofschneider PH, Koshy R. A trans-activator function is generated by integration of hepatitis B virus preS/S sequences in human hepatocellular carcinoma DNA. *Proc Natl Acad Sci* 1990; 87: 2970-2974 [PMID: 2158099 DOI: 10.1073/pnas.87.8.2970]
- 30 Lee SA, Kim KJ, Kim DW, Kim BJ. Male-specific W4P/R mutation in the pre-S1 region of hepatitis B virus, increasing the risk of progression of liver diseases in chronic patients. *J Clin Microbiol* 2013; 51: 3928-3936 [PMID: 24025913 DOI: 10.1128/JCM.01505-13]
- 31 Lee SA, Kim H, Won YS, Seok SH, Na Y, Shin HB, Inn KS, Kim BJ. Male-specific hepatitis B virus large surface protein variant W4P potentiates tumorigenicity and induces gender disparity. *Mol Cancer* 2015; 14: 23 [PMID: 25645622 DOI: 10.1186/s12943-015-0303-7]
- 32 Yang H, Westland C, Xiong S, Delaney WE 4th. In vitro antiviral susceptibility of full-length clinical hepatitis B virus isolates cloned with a novel expression vector. *Antiviral Res* 2004; 61: 27-36 [PMID: 14670591 DOI: 10.1016/j.antiviral.2003.07.003]
- Zheng L, Baumann U, Reymond JL. An efficient one-step sitedirected and site-saturation mutagenesis protocol. *Nucleic Acids Res* 2004; 32: e115 [PMID: 15304544 DOI: 10.1093/nar/gnh110]
- 34 Fattovich G, Stroffolini T, Zagni I, Donato F. Hepatocellular carcinoma in cirrhosis: incidence and risk factors. *Gastroenterology* 2004; 127:

- S35-S50 [PMID: 15508101 DOI: 10.1053/j.gastro.2004.09.014]
- 35 Haukeland JW, Damås JK, Konopski Z, Løberg EM, Haaland T, Goverud I, Torjesen PA, Birkeland K, Bjøro K, Aukrust P. Systemic inflammation in nonalcoholic fatty liver disease is characterized by elevated levels of CCL2. *J Hepatol* 2006; 44: 1167-1174 [PMID: 16618517 DOI: 10.1016/j.jhep.2006.02.011]
- 36 Abiru S, Migita K, Maeda Y, Daikoku M, Ito M, Ohata K, Nagaoka S, Matsumoto T, Takii Y, Kusumoto K, Nakamura M, Komori A, Yano K, Yatsuhashi H, Eguchi K, Ishibashi H. Serum cytokine and soluble cytokine receptor levels in patients with non-alcoholic steatohepatitis. *Liver Int* 2006; 26: 39-45 [PMID: 16420507 DOI: 10.1111/j.1478-3231.2005.01191.x]
- 37 Abdelmalek MF, Diehl AM. Nonalcoholic fatty liver disease as a complication of insulin resistance. *Med Clin North Am* 2007; 91: 1125-1149, ix [PMID: 17964913 DOI: 10.1016/ j.mcna.2007.06.001]
- 38 Grivennikov SI, Karin M. Inflammatory cytokines in cancer: tumour necrosis factor and interleukin 6 take the stage. *Ann Rheum Dis* 2011; 70 Suppl 1: i104-i108 [PMID: 21339211 DOI: 10.1136/ard.2010.140145]
- 39 Michelotti GA, Machado MV, Diehl AM. NAFLD, NASH and liver cancer. *Nat Rev Gastroenterol Hepatol* 2013; 10: 656-665 [PMID: 24080776 DOI: 10.1038/nrgastro.2013.183]
- 40 Scalera A, Tarantino G. Could metabolic syndrome lead to hepatocarcinoma via non-alcoholic fatty liver disease? World J Gastroenterol 2014; 20: 9217-9228 [PMID: 25071314 DOI: 10.3748/wjg.v20.i28.9217]

P- Reviewer: Bramhall S, Huang C, Kai K, Tarantino G, Tomizawa M
S- Editor: Wang XJ L- Editor: Filipodia E- Editor: Ma YJ







Published by Baishideng Publishing Group Inc

7901 Stoneridge Drive, Suite 501, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

Help Desk: http://www.f6publishing.com/helpdesk

http://www.wjgnet.com



ISSN 1007-9327

