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## Effect of experimental complex III deficiency on respiratory chain assembly and function

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# Effect of experimental complex III deficiency on respiratory chain assembly and function

MINA DAVOUDI

DEPARTMENT OF CLINICAL SCIENCES | FACULTY OF MEDICINE | LUND UNIVERSITY | 2014



MINA DAVOUDI Effect of experimental complex III deficiency on respiratory chain assembly and function

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Schematic illustration of a supercomplex consisting of three respiratory chain complexes I, III and IV.



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# Effect of experimental complex III deficiency on respiratory chain assembly and function

Mina Davoudi



**LUND**  
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DOCTORAL DISSERTATION

With the permission of the Faculty of Medicine at Lund University, this thesis will be defended on 31 October 2014 at 13.00 in the Segerfalk Lecture Hall, Wallenberg Neuroscience Center, Lund, Sweden


Faculty opponent:

**Docent Alexander Kastaniotis**

Academy of Finland Research Group Leader  
Biocenter Oulu and Department of Biochemistry  
University of Oulu, Finland

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Author(s): Mina Davoudi	Sponsoring organization	
Title and subtitle: Effect of experimental complex III deficiency on respiratory chain assembly and function		
<p><b>Abstract</b></p> <p>The assembly of respiratory chain complexes in the mitochondrial inner membrane requires specific factors. Respiratory chain complex III (CIII) is a dimer consisting of two monomers, each with eleven subunits. To date, seven assembly factors for CIII are known, of which BCS1L incorporates the Rieske iron-sulfur protein (RISP) in the last stage of the assembly. The most severe CIII deficiency, due to a mutation in <i>BCS1L</i> (homozygous c.232A&gt;G), is GRACILE syndrome (<u>G</u>rowth <u>R</u>estriction, <u>A</u>minoaciduria, <u>C</u>holestasis, <u>I</u>ron accumulation, <u>L</u>actic acidosis, and <u>E</u>arly death, MIM 603358).</p> <p>To clarify the mechanisms of BCS1L-related disorders, especially possible changes in supercomplex formation, the specific aims of this thesis were to investigate CIII assembly and supercomplexes in a mouse model harboring the <i>Bcs1l</i> mutation c.232A&gt;G. In homozygotes, the mutation results in a progressive CIII deficiency mimicking the human syndrome. To elucidate the role of the RISP subunit, wild-type mice were exposed to CIII inhibition with myxothiazol administration.</p> <p>The result showed that complex I can interact with pre-complex III and form a supercomplex in the absence of mature holo-CIII. When RISP was inhibited in CIII by myxothiazol, supercomplex formation was not affected. The supercomplex assembly factor I (<i>Scaf1</i>) is required for inclusion of complex IV in supercomplexes. Liver metabolomics of the progressive CIII deficiency in homozygous mice showed a starvation-like situation and signs of oxidative stress at the end stage of the disease.</p> <p>In conclusion, supercomplex formation is a dynamic process that in the case of mutations in BCS1L or supercomplex assembly factor I is modified to incorporate the pre-complex of CIII and an increased amount of complex I to maintain respiratory chain function.</p>		
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# Effect of experimental complex III deficiency on respiratory chain assembly and function

Mina Davoudi



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Faculty of Medicine,  
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Pediatrics  
Lund University, Sweden  
2014

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Front cover picture: Mitochondrion modified by Mina Davoudi

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KLIMATKOMPENSERAT  
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*In memory of Sara, Keshwar, Shamsi and Safiyeh, those  
who gave me the courage for life!*





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# List of papers

- I. **Davoudi M**, Kotarsky H, Hansson E, Fellman V. Complex I function and supercomplex formation are preserved in liver mitochondria despite progressive complex III deficiency. *PLoS ONE* 2014; 9:e86767.
- II. **Davoudi M**, Kotarsky H, Hansson E, Fellman V. Supercomplex formation modified by SCAFI assembly factor and pre-complex III in different mouse strains with a homozygous *Bcs1l* mutation. In manuscript.
- III. **Davoudi M**, Kallijärvi J, Marjavaara S, Kotarsky H, Hansson E, Levéen P, Fellman V. A mouse model of mitochondrial complex III dysfunction induced by myxothiazol. *Biochemical & Biophysical Research Communication* 2014; 446: 1079–1084.
- IV. Kotarsky H, Keller M, **Davoudi M**, Levéen P, Karikoski R, Enot D, Fellman V. Metabolite profiles reveal energy failure and impaired beta-oxidation in liver of mice with complex III deficiency due to a BCS1L mutation. *PLoS One* 2012; 7: e41156.



# Abbreviations

ADP	adenosine diphosphate
ATP	adenosine triphosphate
BNGE	blue native gel electrophoresis
CI	complex I
CII	complex II
CIII	complex III
CIV	complex IV
DNP	dinitrophenylhydrazine
DNPH	2,4-dinitrophenylhydrazine
FAD <sup>+</sup>	flavin adenine dinucleotide
mtDNA	mitochondrial DNA
MIM	mitochondrial inner membrane
MOM	mitochondrial outer membrane
NAD <sup>+</sup>	nicotinamide adenine dinucleotide
nDNA	nuclear DNA
RC	respiratory chain
ROS	reactive oxygen species
SCAFI	supercomplex assembly factor I
TIM	translocase of inner membrane
TOM	translocase of outer membrane



# Abstract

The assembly of respiratory chain complexes in the mitochondrial inner membrane requires specific factors. Once assembled to form a mature functional complex, complex III (CIII) is a dimer consisting of two monomers, each with eleven subunits. To date, seven assembly factors for CIII are known, of which BCS1L incorporates the Rieske iron-sulfur protein (RISP) in the last stage of the assembly. The most severe CIII deficiency, due to a mutation in *BCS1L* (homozygous c.232A>G), is GRACILE syndrome (growth restriction, aminoaciduria, cholestasis, iron accumulation, lactic acidosis, and early death, MIM 603358).

To clarify the mechanisms of BCS1L-related disorders, especially possible changes in supercomplex formation, the specific aims of this thesis were to investigate CIII assembly and supercomplexes in a mouse model harboring the *Bcs1l* mutation c.232A>G. In homozygotes, the mutation results in a progressive CIII deficiency mimicking the human syndrome. To elucidate the role of the RISP subunit, wild type mice were exposed to CIII inhibition with myxothiazol administration.

The result showed that complex I can interact with pre-complex III and form a supercomplex in the absence of mature holo-CIII. When RISP was inhibited in CIII by myxothiazol, supercomplex formation was not affected. The supercomplex assembly factor I (*Scafi*) is required for inclusion of complex IV in supercomplexes. Liver metabolomics of the progressive CIII deficiency in homozygous mice showed a starvation-like situation and signs of oxidative stress at the end stage of the disease.

In conclusion, supercomplex formation is a dynamic process that in the case of mutations in BCS1L or supercomplex assembly factor I is modified to incorporate the pre-complex of CIII and an increased amount of complex I to maintain respiratory chain function.





# Background

## Mitochondria

Mitochondria are responsible for cellular energy production. They were discovered in the nineteenth century by Carl Benda who named them after their appearance in a microscope. The term mitochondrion is derived from the Greek *mitos* for “thread” and *chondros* for “granule” (1-3). Mitochondria are thought to be the result of an early symbiosis between aerobic bacteria and anaerobic eukaryotic cells 1–2 billion years ago (4-9). During evolution, the aerobic bacteria increasingly adjusted more and more to their host, and subsequently many of the endosymbiont’s genes were transferred to the nucleus (8). However, mitochondria still contain a ring-shaped DNA (mitochondrial DNA, mtDNA) that is translated and transcribed by specific enzymes in the mitochondria.

Mitochondria are located in the cell cytosol where they play a key role in the production of adenosine triphosphate (ATP) by oxidative phosphorylation (OXPHOS). In addition, mitochondria take part in many other functions of mammalian cells including  $\beta$ -oxidation of fatty acids, the Krebs cycle, amino acid metabolism (10), heme biogenesis, detoxification of reactive oxygen species (ROS) (11), and start the chain reaction during apoptosis, or necrosis (12, 13). The number of mitochondria in different cell types varies according to the cells’ function and morphology (14). Due to the critical role of mitochondria in cellular energy production and metabolism, deficiencies and dysfunctions in the organelle lead to severe diseases in humans (15).

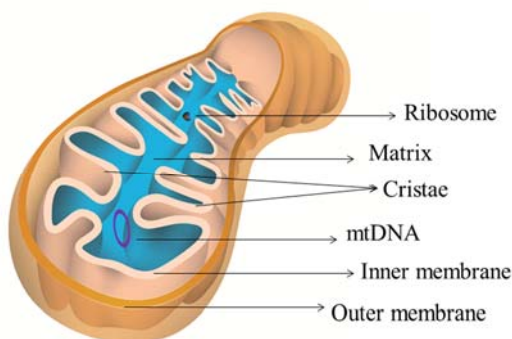
## Structure

Mitochondria are double-membrane organelles approximately 0.5–1  $\mu\text{m}$  in diameter and about 7  $\mu\text{m}$  long. The mitochondrial outer membrane and inner membrane are both phospholipid bilayers with different important proteins embedded (3, 16).

The permeability of the outer membrane allows transport of small nutrient molecules, such as adenosine triphosphate (ATP), adenosine diphosphate (ADP), as well as ions, and water, whereas pre-proteins are imported from the cytosol into mitochondria via the translocase of the outer membrane (TOM).

The inner membrane has a complex structure consisting of a lipid bilayer and protein complexes enclosing the central matrix, which is a protein-rich compartment within mitochondria. The mitochondrial inner membrane consists of phosphatidylcholine, phosphatidylethanolamine, phosphatidylglycerol, and cardiolipin (17). Due to its high cardiolipin content, the inner membrane is less permeable to molecules and ions than the outer membrane. The transfer of molecules and proteins through the inner membrane requires several specific transfer proteins. The respiratory chain (RC) complexes and supercomplexes are embedded in the inner membrane.

The inner membrane forms cristae -invaginations into the matrix- thereby increasing its surface area, and consequently enhancing the function of RC (12, 18, 19) (Figure 1).



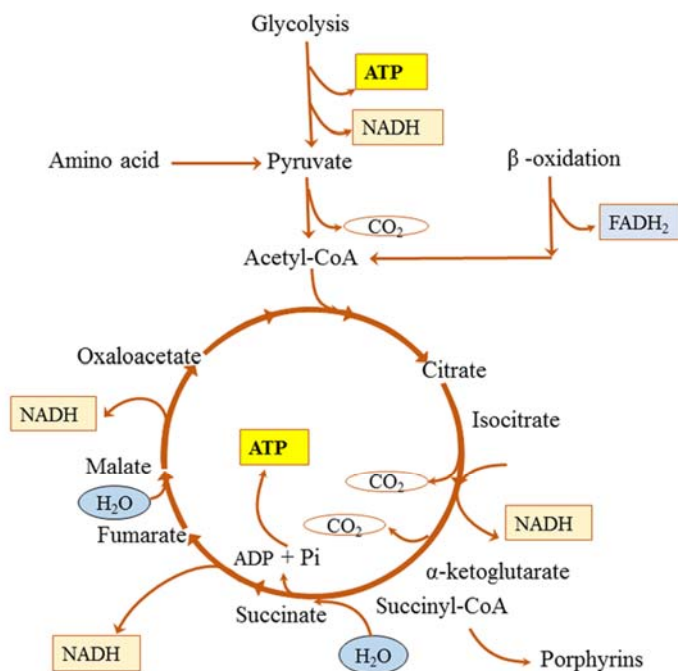
**Figure 1. Schematic diagram of a mitochondrion**

The mitochondrion consists of outer and inner membranes, an inter-membrane space, cristae, and matrix. Respiratory chain complexes and supercomplexes are embedded in the inner membrane surface, whereas ribosomes and mtDNA are found in the matrix.

## Function

Mitochondria produce most of the cellular energy carrier ATP by oxidative phosphorylation (20-22). Nutritional molecules are processed in the cytosol, and fragments of sugars, fat, and proteins are transported into the mitochondrial matrix. There they are further processed to acetyl-CoA by pyruvate dehydrogenase or beta-oxidation. Acetyl-CoA enters the Krebs cycle (also called the citric acid cycle or tricarboxylic acid cycle), a cyclic metabolic pathway with both catabolic

and anabolic functions. In the catabolic pathway, the electron carriers, nicotinamide adenine dinucleotide ( $\text{NAD}^+$ ), and flavin adenine dinucleotide ( $\text{FAD}^+$ ) are loaded with electrons (see Figure 2). As an anabolic function, the Krebs cycle provides important precursors for gluconeogenesis, lipogenesis, amino acid, and porphyrin synthesis (23, 24).  $\text{NADH}$  and  $\text{FADH}$  generated in the Krebs cycle transfer their electrons to electron acceptors in RC complexes. The electrons pass through a series of redox reactions along the mitochondrial inner membrane, during which they release energy that is used to pump protons across the inner membrane, creating a pH gradient and an electrochemical potential. The proton gradient provides the proton motive force for production of ATP by  $\text{F}_1\text{F}_0$ -ATP synthase using ADP and  $\text{P}_i$  (20) (Figure 2).



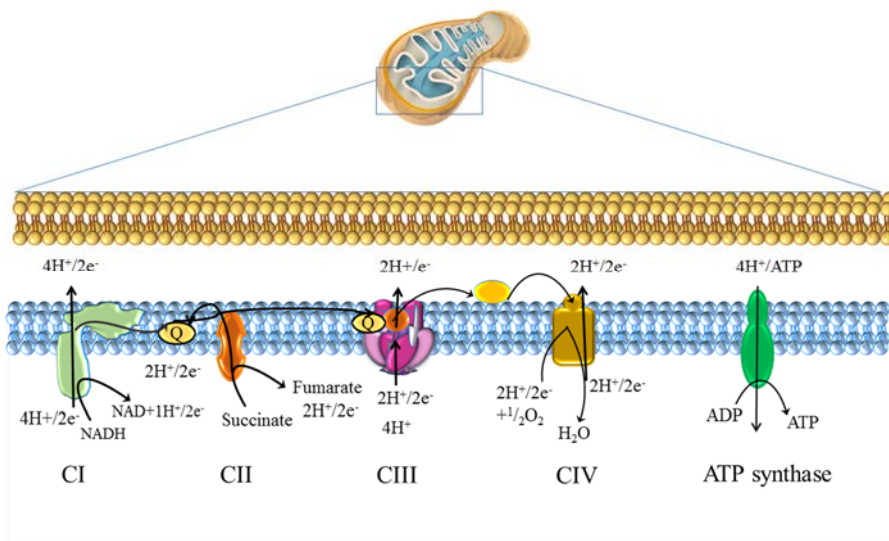
**Figure 2. The Krebs cycle**

In the Krebs cycle, the catabolic pathway converges at the production of acetyl-CoA. The cyclic pathway generates reducing equivalents ( $\text{NADH}$ ) that are subsequently used as electron donors in the respiratory chain.

# The respiratory chain and the OXPHOS system

The respiratory chain (RC) consists of four protein complexes (CI, CII, CIII, CIV) and electron carriers. Electrons are fed into the RC at CI and CII, protons pumped at CI, CIII, and CIV. CIV uses oxygen as an electron acceptor and catalyzes electron transfer to molecular oxygen, thereby forming water molecules (Figure 3).

RC complexes are multiprotein combinations of several subunits, and specific factors are needed for correct assembly, stability, and activity of the holoenzyme (25).



**Figure 3. The OXPHOS system**

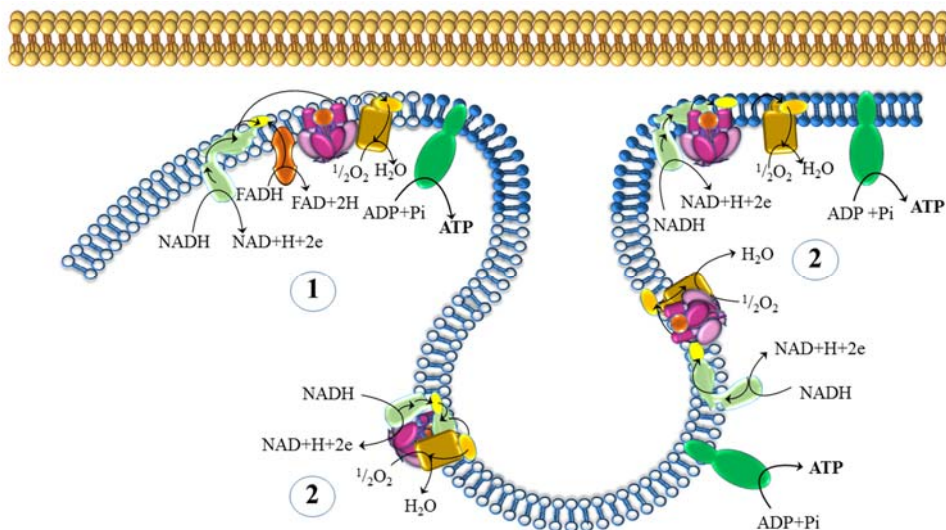
Schematic illustration of the respiratory chain, describing electron flow and proton pumping through the complexes CI, CIII, and CIV. The established proton gradient drives ATP synthesis through the ATP synthase.

The organization of the RC components (protein complexes and electron carriers) has been intensively studied in recent years, and our understanding has evolved with time. The earlier “fluid state model” was based on the concept that single complexes moved freely within the mitochondrial inner membrane lipid layer. It was suggested that the electron transfer takes place by random, transient collisions between the individual RC complexes there (26-28).

New studies and new experimental techniques have challenged the fluid state model with the “solid state” model, first proposed as early as 1955 by Chance (29). This model suggests a stable interaction between the RC complexes and formation of new multiproteins, so-called supercomplexes (or respirasomes) (30).

These supercomplexes (SC) are composed of individual RC complexes associated with one another in different combinations, usually as CI/CIII and CIV, or CIII with CIV (31).

The “dynamic aggregate” or “plasticity” model is the most recent model of the RC (32). The plasticity model suggests that one subset of complexes moves freely while another can be associated with SC formations of different combinations. Recent studies have showed the presence of free RC complexes and supercomplexes at the same time (33) (Figure 4).



**Figure 4. The dynamic aggregate model**  
RC supercomplex formation in the fluid model (1) and solid model (2).

## Complex I

NADH: ubiquinone oxidoreductase; complex I (CI) (EC 1.6.5.3) (34), is the largest RC enzyme complex. CI accepts two high potential electrons from NADH. These electrons pass a series of iron-sulfur centers before they reduce ubiquinone to ubiquinol. The flow of electrons within CI is coupled to the pumping of four protons across the inner membrane. CI consists of forty-four subunits (34-36), of which fourteen (the catalytic core) are highly conserved between species. The other thirty subunits developed during evolution and are involved in the assembly, and stabilization of CI, and regulation of CI activity (36). It has been proposed that the stability and activity of CI are dependent on CIII and CIV (37, 38). One investigation of human and mouse fibroblasts showed that in the absence of CIII, CI is assembled, but is unstable (37). In addition, CI stability has been suggested

to depend on the concentration of ROS, since increased levels of ROS caused destabilization of CI in RISP knockout cells (39). On the other hand, CI has an important role in the stabilization and activity of other RC complexes such as CIV (40) and supercomplexes (41).

Mutations of nDNA- or mtDNA-encoded CI subunits, or of assembly factors for CI, are the main cause of mitochondrial disorder in humans: for example, they cause Leber's hereditary optic neuropathy and Leigh disease (42, 43).

## **Complex II**

The smallest complex in RC is succinate dehydrogenase (SDH), succinate coenzyme Q reductase (SQR) (EC 1.3.5.1), or complex II (CII). CII consists of four subunits (SDH1, SDH2, SDH3, SDH4), which are all encoded by nDNA. CII is localized on the matrix side of the inner membrane and does not pump protons (44). CII has a dual function, as it is a complex of RC and acts as an enzyme in part of the Krebs cycle. NADH produced by the Krebs cycle binds to the CII and releases two electrons, which are transferred to ubiquinone and then to CIII (27, 45). Mutations in CII subunits are uncommon causes of mitochondrial deficiency, and may present as Leigh syndrome, encephalopathy, optic atrophy or neuroendocrine tumors such as familial paraganglioma syndrome (44, 46). In addition, CII has been implicated as an apoptosis sensor (44).

## **Complex III**

Ubiquinol-cytochrome c reductase (EC 1.10. 2.2.) or complex III (CIII) is a dimeric multifunctional inner membrane complex. CIII catalyzes electron transfer from ubiquinol carrying two electrons (CoQH<sub>2</sub>) to the one electron carrier cytochrome c via the Q-cycle of CIII. Electron transfer is coupled to the pumping of protons across the inner mitochondrial membrane (47, 48). In mammals, the monomer CIII consists of eleven subunits, assembled into a symmetric homodimer molecule (CIII<sub>2</sub>) with a molecular mass of 500 kDa (49). Ten subunits are encoded by nDNA (two core subunits, Core 1 and Core 2), Rieske iron sulfur protein (RISP), and six other subunits, as well as cytochrome c. Only one subunit, cytochrome b (cyt b), is encoded by mtDNA (47). The nomenclature of CIII subunits in humans is presented in Table 1.

RISP is one of the two catalytic subunits of CIII. The uptake of this subunit into mitochondria and its assembly into CIII has mainly been studied in yeast. The precursor of RISP is synthesized in the cytosol and brought into the mitochondrial matrix by TOM and translocase of inner membrane (TIM). In the matrix, RISP is processed and the iron-sulfur cluster is attached. The mature RISP protein is then

incorporated into a dimer of pre-complex III in the mitochondrial inner membrane by the assembly factor BCS1L. This process is ATP-dependent and an essential step of the CIII assembly (50, 51). Another chaperone, LYRM 7 has been suggested to participate in the final RISP insertion step into dimeric Pre-CIII (52) (Figure 7). A functional and fully assembled CIII<sub>2</sub> is essential for stabilization of CI in mammalian cells and other organisms (37, 53, 54). CIII deficiencies so far reported have been caused by mutations in the mtDNA-encoded cyt b, and the nDNA-encoded assembly factors BCS1L and TTC19.

**Table 1. The nomenclature of CIII subunits in humans and mice.**

Human		Mouse
Protein	Gene	Gene
Ubiquinol-cytochrome c reductase core protein I (Core 1)	<i>UQCRC1</i>	<i>Uqcrc1</i>
Ubiquinol-cytochrome c reductase core protein I (Core 2)	<i>UQCRC2</i>	<i>Uqcrc2</i>
Mitochondrially-encoded cytochrome b (Cytochrome b, cyt b)	<i>MT-CYB</i>	<i>mt-Cyb</i>
Subunit VII (UQCR7)	<i>UQCRQ</i>	<i>Uqcrq</i>
Ubiquinol-cytochrome c reductase binding protein	<i>UQCRB</i>	<i>Uqcrb</i>
Cytochrome c-1(CYC1)	<i>UQCR4</i>	<i>Uqcr4</i>
Subunit VIII (UQCR 8) acidic hinge	<i>UQCRH</i>	<i>Uqcrh</i>
Ubiquinol-cytochrome c reductase, subunit X	<i>UQCR10</i>	<i>Uqcr10</i>
Ubiquinol-cytochrome c reductase, subunit XI	<i>UQCR11</i>	<i>Uqcr11</i>
Subunit IX pre-sequence of RISP	<i>UQCRFS1</i>	<i>Uqcrfs1</i>
Rieske iron-sulfur protein (RISP)	<i>UQCRFS1</i>	<i>Uqcrfs1</i>

## Complex IV

Cytochrome c oxidase (EC 1.9.3.1 COX) or complex IV (CIV) is the terminal complex in RC. CIV catalyzes the electron transfer from reduced cyt c to molecular oxygen. Mammalian CIV consists of thirteen subunits encoded by both nDNA and mtDNA. The subunit COX3 and the catalytic core of CIV, (COX1, COX2) are encoded by mtDNA (55). The other ten subunits (COX4, COX5A, COX5B, COX6A, COX6B, COX6C, COX7A, COX7B, COX7C, and COX8) are encoded by nDNA and surround the catalytic core. According to several studies, the subunits encoded by nDNA play a regulatory and stabilizing role for the catalytic core (25, 56, 57). In humans, tissue-specific isoforms of CIV subunits have been reported. Thus COX6A and COX7A have a heart and a liver isoform (58). Examples of CIV-related disorders are severe cardiomyopathy and encephalocardiomyopathy. Mutations in three subunits of CIV encoded by mtDNA have been related to human diseases (25, 59).



## ATP synthase/complex V

Mitochondrial ATP synthase (ATP synthase, EC 6.3.14,  $F_1F_0$ -ATP), also called complex V (CV), uses the proton gradient established in the intermembrane space to catalyze the binding of inorganic phosphate ( $P_i$ ) to ADP in the mitochondrial matrix, thereby generating ATP. ATP synthase in mammals is a multi-subunit protein complex with two functional units,  $F_1$  and  $F_0$ . The  $F_0$  part of ATP synthase is composed of eight subunits (a, b, c, d, e, f, g, F6, A6L), which form a proton channel.  $F_1$  consists of five subunits (three  $\alpha$ , three  $\beta$ , and a central stalk consisting of  $\gamma$ ,  $\delta$ , and  $\epsilon$ ) (60) and is the catalytic domain of ATP synthase, directed at the mitochondrial matrix (61). ATP synthase subunits e and g are required for dimerization and oligomerization of the enzyme, which is important for cristae morphology (62).

## Electron carriers

The two mobile electron carriers, ubiquinone (Coenzyme Q, CoQ) and cytochrome c (cyt c) serve as links between the complexes in the respiratory chain. Ubiquinone is a quinone molecule which is soluble in lipids, and hence in membranes. It transfers electrons from CI to CIII. Cytochrome c, a heme containing polypeptide, transfers electrons from CIII to CIV.

## Supercomplexes

### *Definition and functional importance*

Supercomplexes (SC) were first proposed as existing in a “solid state” within the RC, forming an assembly of flavins and cytochromes surrounded by a protein matrix in the mitochondrial inner membrane (29, 63).

Newer evidence of RC superorganization in mammalian mitochondrial membranes was found using blue native gel electrophoresis (BNGE) (30, 32, 64) and electron microscopy (65). The activity of isolated SC was determined with a Clark-type oxygen electrode, demonstrating the functionality of supercomplexes (32). Recent investigations suggest that individual RC complexes interact with each other in supercomplexes under physiological conditions (66).

The three RC complexes involved in proton transfer across the inner membrane (CI, CIII, and CIV) are more represented in the SC organization than CII, which is often found as a single complex in monomer form (67). Schägger et al. suggested that all monomeric CI is connected to the CIII dimer and variable copies of CIV (as  $CI_n/CIII_2$  and  $CI/CIII_2/CIV$ ) (68). In these supercomplexes, a small amount of CII was also detected (32).

The organization of SC in RC may be required for stability and assembly of CI, since several studies have shown that CI was unstable in the absence of CIII (37, 69, 70) and CIV (38, 40). It has also been suggested that supercomplexes limit the production of reactive oxygen species (ROS) (71).

Recently, a dynamic arrangement of SC has been suggested to provide greater flexibility and efficiency of the RC complexes (33, 72).

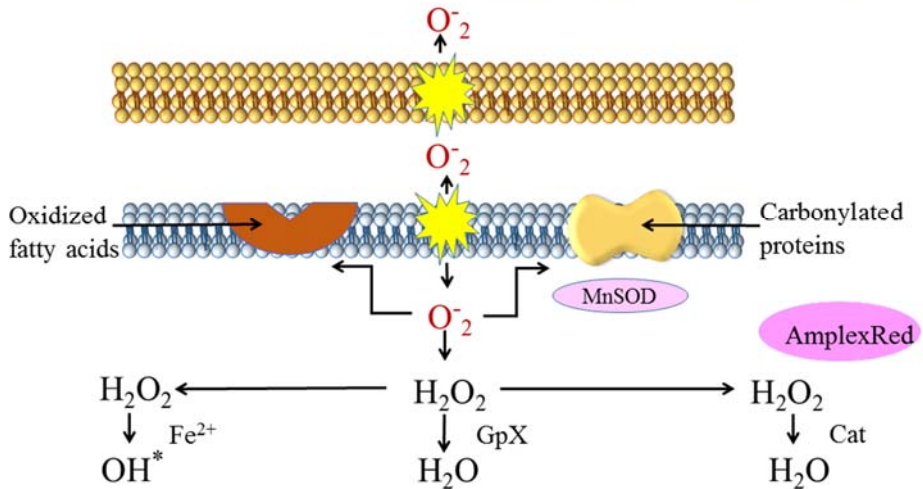
## Reactive oxygen species

Reactive oxygen species (ROS) are chemical agents with the potential to cause oxidative deterioration of DNA, proteins, and lipids. ROS include the superoxide anion ( $O_2^-$ ), the hydroxyl radical ( $OH^*$ ), and hydrogen peroxide ( $H_2O_2$ ), all of which are highly reactive. ROS are released as by-products of RC reactions, and because of their high reactivity they are responsible for oxidative damage, in addition to acting as signaling molecules. There is evidence of an association between ROS and the development of cancer and neurodegenerative diseases. An intracellular increase in production of ROS has been reported in some patients with mutation in *BCS1L* (73, 74).

The generation of ROS leading to lipid peroxidation, induces the reactive aldehydic derivatives such as malondialdehyde, which affects the hepatocytes.

In mitochondrial dysfunction, increased ROS production has been proposed, resulting in apoptosis necrosis, inflammation, fibrosis, genomic polymorphism, and generation of cytokines (75) (Figure 5).

## Generation of reactive oxygen species (ROS)



**Figure 5. Mitochondrial ROS production**

The respiratory chain is the source of reactive oxygen species in mitochondria. The antioxidant defense protecting mitochondria and tissues against ROS include manganese superoxide dismutase (MnSOD), catalase (Cat), and glutathione peroxidase (GpX). In the absence of an antioxidant defence, ROS can modify proteins, lipids, and DNA. ROS can be assessed with Amplex Red and oxidation measured as carbonylated proteins.

## Assembly factors for respiratory chain complexes

Assembly of RC multi-protein complexes requires auxiliary factors for the individual complexes and SC to become functional. Those proteins do not participate in enzymatic activity. However, in the case of an absent or mutant auxiliary protein, the complex is not assembled and is therefore dysfunctional (43). Known assembly factors for RC complexes are shown in Table 2.

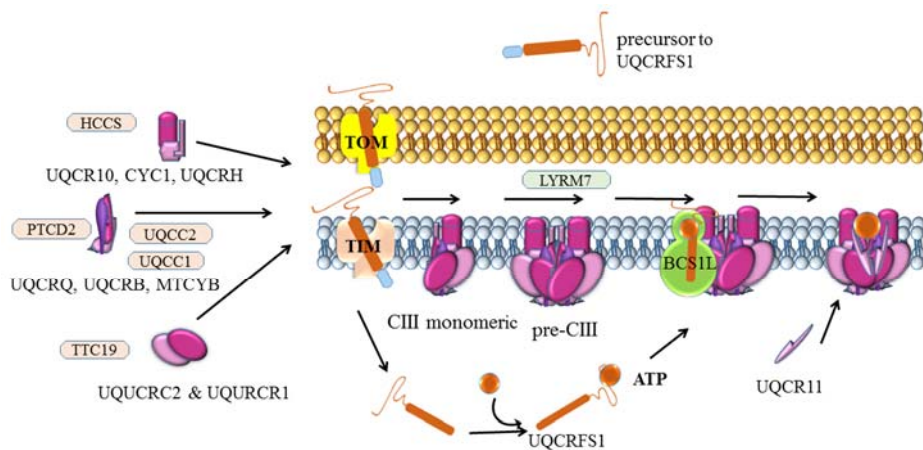
**Table 2. Assembly factors for mitochondrial complexes I–V**

Complex	Assembly Factor	Important for assembly of subunit
CI	C20ORF7 NUBPL NDUFAF3 NDUFAF4 NDUFAF1 ACAD9 C80RF38 FOXRED1 NDUFAF2 NUBPL	Q module intermate, early membrane arm ND1(43, 76-78) Periferal arm intermediate, early membrane armNDUFA9 ≈400 kDa intermediate, peripheral arm intermediate ≈400 kDa intermediate, peripheral arm intermediate ≈460 kDa intermediate ND2, ND3,ND6, NDUFB6 ≈460 kDa intermediateND2, ND3,ND6, NDUFB6 Intermediate 460 kDa? Intermediate 830 kDa-HoloCI? ≈830 kDa intermediate, NDUFA1, 2, 10, 13 Holocomplex I, NDUFV1, 2, 3, NDUFS1, 4, 6, NDUFA12
CII	SDHAF1 ADHAF2	Insertion/retention iron-sulfur cluster within (43) the protein backbone of CII Incorporation of FAD into SDHA
CIII	HCCS TTC19 PTCD2 UQCC1 UQCC2 BCS1L LYRM7	Synthesis of cyt <i>c</i> 1 and cyt <i>c</i> (43) Early assembly & interact with fully assembled CIII (79, 80) Maturation and stabilization of cytochrome <i>b</i> mRNA Participation in Cytochrome b biogenesis Participation in Cytochrome b biogenesis (81) Incorporation of Rieske iron-sulfur protein into the CIII (82) Maturation and stabilization of Rieske iron-sulfur protein (52)
CIV	SURF1 SCO1 SCO2 COX10 COX15 COX11 COX17 COX19 LPPRC TACO1 C20ORF64	Formation of early subcomplex COX (43) Incorporation of copper atoms into the catalytic sites Incorporation of copper atoms into the catalytic sites Heme A synthesis Heme A synthesis Biosynthesis of heme A Copper recruitment Copper translocation to mitochondria RNA metabolism, regulation of mtDNA genes COX subunit I translation Early step of COX assembly
CV	ATPAF1 ATPAF2 TMEM70	F1 assembly factor, for assembly of $\alpha+\beta$ (43) F1 assembly factor, for assembly of $\alpha+\beta$ F1 assembly factor, for F1 interaction with Fo subunits

## Complex III assembly factors

The assembly of CIII (Figure 6) requires factors that catalyze synthesis, binding, and the incorporation of different subunits. To date, seven different assembly factors for CIII have been identified (Table 2). The assembly of CIII starts with the formation of three different subassemblies, (I) UQCR10, CYC1 and UQCRH, (II) UQCRQ, UQCRB and MTCYB, and (III) UQUCRC2 with UQURCR1. These subassemblies are subsequently collected to form a pre-complex III in dimer form, after which UQCR11 and UQCRFS1 are incorporated into the pre-complex (25, 83, 84).

The assembly of CIII requires fully assembled subunits such as cytochrome c1 and cytochrome b. Holocytochrome c synthase (HCCS) catalyzes the binding of heme moieties to apocytochromes c and c1. Ubiquinol-cytochrome c reductase complex assembly factor 1 and 2 (UQCC1/UQCC2) are needed for assembly of the mtDNA-encoded cytochrome b subunit (81). Pentatricopeptide repeat domain protein 2 (PTCD2) is involved in maturation of cytochrome b (85). Thereafter, Tetratricopeptide repeats 19 (TTC19) connects cytochrome c with Core 1 and Core 2 to form an early CIII subassembly (80). It has been suggested that LYR-motif containing protein 7 (LYRM7) stabilizes RISP in the mitochondrial matrix before its insertion into pre-CIII (52, 86). Ubiquinol-cytochrome c reductase synthesis-like (BCS1L) inserts the catalytic subunit RISP into the pre-CIII dimer.



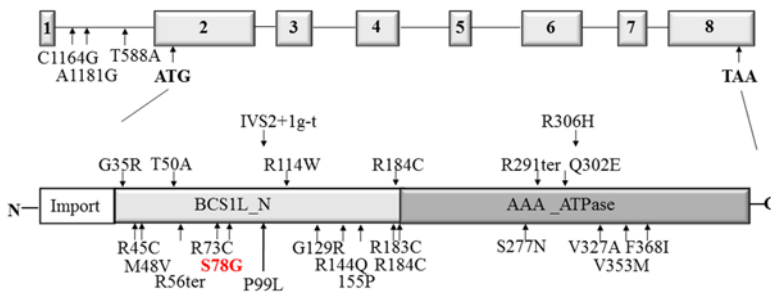
**Figure 6. CIII assembly**

UQCR10, CYC1, UQCRH + UQCRQ, UQCRB, MTCYB + UQUCRC2 & UQURCR1 assembles to a pre-CIII. A precursor of UQCRFS1 is transported to the matrix via TOM and TIM, then UQCR11 and a mature form of UQCRFS1 are incorporated in the pre-CIII to form a dimer holo-CIII.

## BCS1L

The nDNA-encoded *BCS1L* gene is localized to Chromosome 2 and consists of eight exons encoding a protein, which in humans has 419 amino acids. BCS1L (ubiquinol-cytochrome c reductase synthesis-like) has homologues in all eukaryotes, shares 50% identity with yeast Bcs1 and 94% with mouse BCS1L proteins, and belongs to the AAA-ATPase protein family (87). In the BCS1L protein three defined regions can be identified: the N-terminal import sequence, the BCS1L specific region, and the AAA-ATPase region (Figure 7).

The yeast protein Bcs1 is imported into the mitochondrial inner membrane via TOM and TIM translocases (88). The finalization of CIII assembly in yeast was studied by Wagener et al. (89). The precursor of yeast Rieske iron-sulfur protein (Rip) is imported into mitochondria and processed to release the mature sized apo-protein, to which the iron-sulfur cluster is subsequently added. After folding of the C-terminus, Bcs1 recognizes Rip, the iron-sulfur-cluster domain is translocated across the inner membrane, and Rip is released to the pre-CIII complex. Release of Rip is ATP-dependent (89).



**Figure 7. BCS1L gene and protein with mutations indicated.**

The gene has eight exons, the corresponding protein sequence with mutations indicated as amino acid exchange. The GRACILE mutation is indicated in red. The illustration is adapted from (90).

## BCS1L disorders

Several *BCS1L* mutations have been identified during the last decade (Figure 7) and are now a common etiology for CIII disease (91). GRACILE syndrome, (Fellman disease, MIM 603358), a neonatal disorder, is named after its characteristics: fetal growth restriction, aminoaciduria, cholestasis, iron overload, lactic acidosis, and early death (92, 93). It is caused by a homozygous missense mutation in the second exon of the gene (c.232A>G). The resulting amino acid exchange (p.S78G) leads to an unstable protein that has diminished assembly capacity and thus the incorporation of RISP into the pre-complex of CIII is decreased.

The GRACILE mutation is prevalent in the Finnish population with a frequency of about 1:50,000 live births (94). Several other mutations in *BCS1L* have been found in other populations causing similar disorders presenting in the neonatal period, for example the homozygous mutation p99L resulting in a GRACILE-like disease in Turkey (95), and several combined heterozygous mutations in Spain (96, 97). Common phenotypes due to *BCS1L* mutations include liver disease and proximal tubulopathy, but also encephalopathy, psychiatric disorder, as well as the least severe disorder, Björnstad syndrome which includes congenital deafness and brittle hair but is otherwise compatible with normal life (73, 98, 99) (Table 3).

**Table 3. Mitochondrial CIII disorder due to *BCS1L* mutations**

Organ system involvement	Disorder	Number of cases	Phenotype	Country
Mainly visceral	GRACILE MIM#603358	>34	Growth restriction, aminoaciduria, cholestasis, iron overload, severe lactic acidosis and early death	Finland(92) Sweden (100)
Exclusively neurological		1 1	Lactic acidosis, failure to thrive, encephalopathy, hypotonia, deafness	Italy Morocco (96)
Visceraland neurological  GRACILE-like		>6 >3 >2 3	Lactic acidosis, hepatopathy, Hypotonia, Iron overload +/- tubulopathy	Turkey (101) Spain(97, 102) New Zealand(103) British (104)
Neuro-psychiatric		>2		Saudi Arabia(98)
Skin and ear	Björnstad MIM#262000		Congenital neurosensory hearing loss and distorted hair	(105) (73)
Muscle weakness		1	Hypotonia, progressive visual impairment and exercise fatigue	(97, 106)

## Supercomplex assembly factor I

Recent investigations have suggested that the previous fluid model of RC complexes should be replaced with a SC model, where the SC facilitate interactions between the individual complexes. The structure and function of supermolecules have been studied with various techniques. The presence of cardiolipin (107-109) and specific proteins, or “assembly factors”, are required for assembly and stabilization of SC (33, 110). Investigations in yeast and mammalian mitochondria have revealed important SC assembly factors needed for their formation (111-113) (33, 110). Recent studies have indicated that SC assembly factor I (SCAFI, Cox7a2l, COX7RP) is crucial for the association of CIV into SC formation with CI and CIII (33).





# The present investigation

## General objectives

The objectives of this study were

- To analyze the effect of progressive CIII deficiency on respiratory chain complexes and their function in a GRACILE mouse model
- To investigate the supercomplex assembly factor, SCAFI
- To study the effects of biochemical CIII inhibition in mice
- To study the effects of progressive CIII deficiency on liver metabolism

## Specific aims

1. To investigate if supercomplex formation is impaired when CIII assembly is increasingly deficient with increasing age in *Bcs1l<sup>G/G</sup>* homozygous mice
2. To assess if the short variant of SCAFI affects SC formation and survival in *Bcs1l<sup>G/G</sup>* mice with CIII assembly deficiency
3. To assess if inhibition of RISP with myxothiazol mimics the CIII dysfunction in *Bcs1l<sup>G/G</sup>* homozygous mice and if it affects SC formation
4. To assess metabolic changes and ROS involvement in the GRACILE mouse model



# Materials and methods

## Materials

### *Animals*

Transgenic mice with the mutation c.232A>G in the *Bcs1l* gene were studied. The gene construct was introduced into 129/Sv embryonic stem cells by standard gene targeting techniques (114). Mice homozygous for the mutation (*Bcs1l*<sup>G/G</sup>) with mixed genetic background (129/svEvTaC x C57BL/6) as well as backcrossed to congenic C57BL/6 background were included in the studies. Wild-type (*Bcs1l*<sup>A/A</sup>) or heterozygous (*Bcs1l*<sup>A/G</sup>) mice from the same litter were used as controls (Table 4).

Mixed-background mice (129Sv x C57BL/6) were used in papers II and IV, congenic C57BL/6 mice were used in papers I and II, and wild-type C57BL/J6 in Paper III. Mice used in papers I, II, and IV were maintained on rodent diet/Labfor R34, Lactamin, and in Paper III they were maintained with Harlan 2918 Teklad Global 18% protein Rodent diet with water available *ad libitum* in a vivarium with a 12 hour light/dark cycle. Mice were sacrificed by cervical dislocation and the liver tissue sampled for isolation of mitochondria, deep-freezing, and histology.

**Table 4 Mouse strains used in the various papers**

Paper	Number of Mouse	Background	Genotype
I	46	C57BL/6 x C57BL/6	<i>Bcs1l</i> <sup>A/A</sup> , <i>Bcs1l</i> <sup>A/G</sup> , <i>Bcs1l</i> <sup>G/G</sup>
II	26	C57BL/6 x C57BL/6	<i>Bcs1l</i> <sup>A/A</sup> , <i>Bcs1l</i> <sup>A/G</sup> , <i>Bcs1l</i> <sup>G/G</sup>
		129/Sv x C57BL/6	<i>Bcs1l</i> <sup>A/A</sup> , <i>Bcs1l</i> <sup>A/G</sup> , <i>Bcs1l</i> <sup>G/G</sup>
III	24	C57BL/J6 x 57BL/J6	Wild type
IV	54	129/Sv x C57BL/6	<i>Bcs1l</i> <sup>A/A</sup> , <i>Bcs1l</i> <sup>A/G</sup> , <i>Bcs1l</i> <sup>G/G</sup>

### *Myxothiazol*

Myxothiazol is a class I inhibitor of CIII directed at the ubiquinol oxidation sites targeting the proximal domain of Qo (115). Myxothiazol was administered intraperitoneally to induce CIII inhibition *in vivo* (Paper III). The extract from mycobacteria was received from Professor Rolf Muller of the Helmholtz Centre for Infection Research, Braunschweig, Germany.

## Methods

### *Isolation of liver mitochondria*

Mouse liver tissue was homogenized in an ice-cold homogenization buffer. Mitochondria were subsequently purified by sequential centrifugation including a density gradient in 19% Percoll (116, 117). The concentration of mitochondrial protein was measured via its absorbance at 280 nm using a NanoDrop. The isolated mitochondria were used immediately for high resolution respirometry or stored at  $-80^{\circ}\text{C}$  for determination of CIII activity or purification of RC complexes/SC.

### *Extraction of respiratory chain complexes and supercomplexes*

Frozen mitochondria pellets were re-suspended in phosphate buffered saline (PBS) supplemented with complete mini protease inhibitor. Subsequently, mitochondrial membrane proteins were extracted by incubation with 0.8% digitonin, mixed with the sample, and stored at  $-80^{\circ}\text{C}$  for further use.

### *Blue native gel electrophoresis*

RC complexes and supercomplexes were separated by blue native gel electrophoresis (BNGE) on a 4–16% Bis-Tris gel according the method of Schagger et al. (118). After electrophoresis the proteins were transferred to a polyvinylidene difluoride (PVDF) membrane using the iBlot<sup>TM</sup>Dry blotting system. Blocking of the membranes was followed by detection of RC complexes and supercomplexes using antibodies for individual complex subunits, followed by incubation with an HRP-coupled secondary antibody. Antibody binding was visualized by chemiluminescence.

### *2D BNGE/SDS-PAGE followed by Western blot*

To investigate supercomplex composition, a 2-dimensional (2D) electrophoresis technique was used. First, supercomplexes were separated on BNGE in the first dimension. Subsequently, the BNGE was cut into lanes, denaturized, and run in a second dimension (SDS-PAGE) to separate individual RC complex subunits (118). Subunits were identified by specific antibodies in Western blot.

### *Determination of respiratory chain oxygen consumption by high resolution respirometry*

Mitochondrial respiration was measured by high resolution respirometry, which is based on kinetic determination of oxygen consumption by polarographic oxygen sensors in a small amount of mitochondria suspension (119). Freshly isolated liver mitochondria were re-suspended in MIR 05 buffer and loaded in the chamber of an Oroboros oxygraph-2K analyzer (Oroboros Instruments, Innsbruck, Austria). Oxygen consumption was determined in the mitochondria using the substrate-uncoupler-inhibitor titration (SUIT) protocol at 37 °C (119). Substrates and inhibitors to each individual RC complex were added stepwise to the mitochondrial suspension in the chamber. The data were analyzed with DatLab 4 software (Oroboros Instruments, Innsbruck, Austria).

### *Determination of CIII activity*

Complex III activity was measured as the electron flux from decylubiquinol through complex III to cytochrome c. Reduction of cytochrome c was determined spectrophotometrically by measuring the absorbance at 550 nm (120). Complex III activities were calculated as the increase of absorbance per second from the linear part of the curve during the first minute of reaction, and corrected for non-enzymatic reduction of cytochrome c by subtracting the absorbance values of antimycin-treated mitochondria for each sample. Relative complex III activity for each *Bcs1l*<sup>G/G</sup> sample was expressed as a percentage of control activity.

### *Determination of carbonyl groups as biomarkers for oxidative stress*

Reactive oxygen species (ROS) may cause protein oxidation, which can be detected by measuring carbonyl groups. The presence of carbonylated proteins in mitochondria was analyzed with an Elisa method. Mitochondria were incubated with 2,4-dinitrophenylhydrazine (DNPH), which interacts with carbonyl groups to form a stable dinitrophenylhydrazone (DNP). DNP formation was detected by an anti-DNP antibody, followed by incubation with a secondary antibody and substrate O-phenylenediamine, and absorbance at 490 nm was measured with a spectrophotometer (121).

### *RNA preparation and quantitative PCR*

RNA was extracted from frozen liver tissue using a QIAGEN, RNA extraction kit. RNA quantity and quality were determined by NanoDrop and gel, respectively, before reverse transcription into cDNA using Taqman<sup>®</sup> reverse transcription reagents from Applied Biosystems. The resulting cDNA was analyzed in quantitative PCR using Taqman<sup>®</sup> gene expression assays.

### *Ethics statement*

Animal experiments were performed according to Swedish national guidelines with the approval of the Lund regional research ethics committee (Permits M170–06, M158–08, 31–8265/08; M253–08, M274–10, 31–85/08; M253–08, M245–11), and the approval of the Research Animal Ethics Committee of Southern Finland (ESAVI–2010–07284/Ym–23).

# Results

Here only a summary of the main results of each paper is given. For a detailed discussion, please see the individual papers.

## Paper I

*Complex I function and supercomplex formation are preserved in liver mitochondria despite progressive complex III deficiency*

This study focuses on the effect of CIII deficiency on RC complex and supercomplex assembly.

*Localization of RISP in the liver cells*

A comparison of samples from liver tissue homogenate, cytosol, isolated mitochondria, and mitochondrial membrane using SDS-PAGE revealed the presence of RISP in homogenate, isolated mitochondria, and mitochondria membranes. The assay showed a reduced RISP content in homozygous (*Bcs1*<sup>G/G</sup>) mice in all three preparations compared to wild-type animals.

*RISP and CIII<sub>2</sub> formation at different ages in *Bcs1*<sup>G/G</sup>*

The BNGE showed that the RISP content in young homozygotes was comparable to the controls, but the RISP incorporation into CIII<sub>2</sub> reduced progressively after P16. In the final stage of the disease, RISP was almost lacking, but this did not affect the other RC complexes.

*Supercomplex organization and formation in homozygous *Bcs1*<sup>G/G</sup> mice*

In absence of RISP, a pre-complex structure replaced holo-CIII<sub>2</sub> in supercomplex composition with CI, while the amount of free CI and free pre-CIII<sub>2</sub> were increased compared to the controls.

With 2D-BNGE, we found that both mature and pre-complex CIII<sub>2</sub> participate in SC formation with CI.



### *The function of RC in homozygous mice liver mitochondria*

Respirometry showed that in the presence of CI substrates (malate, pyruvate) and ADP, the liver mitochondria of homozygous mice had a higher oxygen consumption than the control mitochondria, but after addition of CII substrate (succinate), oxygen consumption was decreased. The maximal capacity electron flux in RC, assessed after addition of FCCP, was lower in mutant than in control mice. After adding TMPD as substrate for CIV, oxygen consumption was similar in mutants and controls.

### *Gene expression in homozygous and control animals*

We assessed the expression of the mRNA level of *Bcs1l*, CIII subunits *Uqcrc1*, *Uqcrc2*, and *Uqcrcrfs1*, CI subunits *Ndufa9* and *Ndufv1*, CII *Sdhb* and CIV *Cox5* in sick homozygous mice and controls by qPCR. CI and CII subunits were significantly increased in homozygous mice.

## Paper II

### *Supercomplex formation modified by SCAFI assembly factor and pre-complex III in different mouse strains with a homozygous Bcs1l mutation*

As the commonly used mouse strains 129sv and C57Bl/6 have different *Scafi* alleles (33) we aimed to analyze supercomplex formation in liver mitochondria of *Bcs1l*<sup>G/G</sup> mice with different genetic backgrounds: mixed 129sv x C57Bl/6, and congenic C57Bl/6, respectively.

### *Assessment of Scafi allele in different mouse strains*

*Scafi* allele assessment (short/long allele) showed that the 129/sv strain was homozygous for long *Scafi* (intact allele/intact allele) while homozygous mice with mixed background were heterozygous for *Scafi* (intact allele/deleted allele), and homozygotes of congenic C57Bl/6 strain were homozygous for the short *Scafi* allele (deleted allele/deleted allele).

### *Composition of RC complex and supercomplexes in different mouse strains*

BNGE and 2D-BNGE analyses showed that SC containing CI/CIII<sub>2</sub> occurred in all strains, but CIV was only present in SC (CI/CIII<sub>2</sub>/CIV and CIII<sub>2</sub>/CIV) in mice of the 129/sv strain and in homozygotes with mixed genetic background. Further, in homozygotes of mixed background, pre-CIII<sub>2</sub> was combined with CI and CI/CIV, but only with CI in congenic mutants.

We found no association between the CIV participation in supercomplexes and life span in *Bcs1l*<sup>G/G</sup>. Thus the severity of disease was not dependent on the *Scafi* allele.

## Paper III

### *A mouse model of mitochondrial complex III dysfunction induced by myxothiazol*

Here we induced an isolated CIII deficiency in order to elucidate possible differences in liver mitochondria between a decreased amount of RISP (GRACILE mouse model) and inhibited RISP function in CIII.

### *Mouse phenotype*

Myxothiazol dosage was designed to cause sufficient CIII inhibition without causing deterioration in the mice. No abnormal behavior or health problems were observed in the animals.

### *Decreased CIII activity by myxothiazol*

Myxothiazol administration induced a reversible CIII inhibition in liver mitochondria 2 hours after the injection. The activity of CIII decreased to 50% of that of sham-treated animals.

### *Liver phenotype and histology of the liver tissue*

Liver histology from the myxothiazol-exposed mice showed only slight changes compared to the control animals.

### *RC complex and supercomplex formation*

BNGE and 2D-BNGE assays showed that RC complex and SC assembly were unaffected by the inhibition of CIII with myxothiazol. The incorporation of RISP into CIII was similar to that in control animals.

### *Hepatotoxicity and inflammation in mice exposed to myxothiazol*

We analyzed the expression of genes related to inflammation and hepatotoxicity, as well as CIII subunits with qPCR in mice exposed to myxothiazol for 74 hours. No significant changes were found in the gene expression.

## Paper IV

### *Metabolite profiles reveal energy failure and impaired beta-oxidation in liver of mice with complex III deficiency due to a Bcs1l mutation*

In this paper we investigated the impact of progressive CIII deficiency on the metabolic function of mouse livers.

#### *Age dependent effects on metabolites and oxidative stress in homozygous mice*

The metabolite profiles were similar in young homozygous and wild type animals. With increasing age, and at onset of the disease, the metabolite profile changed, showing increased level of the long chain acylcarnitines, AMP, bile acids, amino acids, and biogenic amines. A starvation-like condition appeared in the metabolites with energy depletion and decreased levels of glycogen and glucose, impaired beta-oxidation, and reduced ATP production at the end stage of the disease.

Metabolites indicating oxidative stress, such as methionine-sulfoxide and prostaglandins, were found at the end stage of the disease, but not at the disease onset. Further analyses of reactive oxygen species (hydrogen peroxide assessed with Amplex Red) did not show differences between homozygotes and litter mate wild type animals. In the young homozygotes no increased antioxidative defense was found; however, in sick mutant animals, manganese superoxide dismutase and catalase were down-regulated and glutathione peroxidase 3 was up-regulated.

# Discussion

Over the last decade an increasing number of assembly factors for RC complexes and SC have been identified, and thus a variety of mitochondrial disorders have been found which are caused by mutations in these factors (81). After the initial reports on *BCS1L* mutations (94, 101), many new mutations have been found in the gene, leading to variable phenotypes. The typical Finnish mutation (c.232A>G) with genotype-phenotype consistency is located in the N-terminal import auxiliary sequence of the gene and causes the most severe form of the disorder (92). Several other mutations in adjacent gene regions cause CIII deficiency, suggesting that this part of the protein is crucial for BCS1L stability or function. BCS1L belongs to the AAA family of proteins, in which a common AAA motif enables ATP binding and hydrolysis for remodeling of substrate proteins (122). AAA proteases usually form hexameric complexes, which have also been detected for BCS1L (73, 123). Further, Hinson et al. suggest that in patient lymphocytes with mutations causing severe CIII deficiency, BCS1L lacks ATP binding or hydrolyzing capacity, thereby preventing the formation of higher molecular weight BCS1L complexes (73). In GRACILE patient fibroblasts, decreased levels of BCS1L were found in mitochondria, and levels of hexamers and the high molecular weight complex were slightly reduced, without, however, having an impact on RISP incorporation into CIII (124). In contrast, in GRACILE patient liver tissue, BCS1L and RISP levels were diminished, suggesting that there is a tissue-specific effect of BCS1L on CIII assembly. One tissue-specific feature is energy production and consumption. Compared with fibroblasts, hepatocytes have a considerably more intensive metabolism because they are the metabolic hub in mammals. A recent study by Ostojic et al. suggests that the energetic state of mitochondria modulates CIII synthesis through the ATP-dependent activity of Bcs1 in yeast (125). Thus, since liver is consuming a great deal of energy to provide other tissues with fuel, ATP levels in liver could fall to a level that no longer supports efficient CIII assembly, thereby starting a vicious circle. Therefore, to study CIII deficiency due to BCS1L mutations, the liver is the organ of choice.

In our mouse model of GRACILE syndrome, we see a progressive lack of RISP incorporation and concomitant CIII deficiency in several organs, but the main deterioration occurs in the liver (114). Interestingly, despite diminished levels of BCS1L from birth in *Bcs1L<sup>G/G</sup>* mice, RISP is incorporated into CIII until postnatal day fourteen, implying the presence of an additional CIII assembly factor in mice.

Whether BCS1L has another function in addition to being an assembly factor is unclear, but other AAA-family proteins, such as the mitochondrial LON protease, do have multiple functions. LON participates in quality control of mitochondrial proteins, regulates RC activity and synthesis, and influences mtDNA replication and transcription (126).

Many other AAA proteins have homologues in prokaryotes, whereas BCS1L homologues are only present in eukaryotes, implying co-evolution of BCS1L with mitochondria (50).

Experimental models are needed to elucidate the functions of proteins and disease mechanisms caused by their mutations. With the exception of CI, which is absent in yeast, many mtDNA- and nDNA-encoded mitochondrial genes are conserved between yeast and humans. The relative ease with which yeast cells may be manipulated, the presence of common metabolic pathways, and the ability to survive on fermentable carbon sources, make yeast a valuable model for analysis of human mutations (127). Thus, yeast has frequently been used to verify the impact of patient BCS1L mutations (94, 101, 128). Instead of yeast, patient fibroblasts can be used to investigate how mutations affect RC. However, as mentioned above, the effect of certain mutations might be tissue-dependent, thus requiring an analysis of the target tissue. Although yeast and fibroblasts can be used to demonstrate the impact of a mutation on respiratory chain activity, they cannot be used to discover how a particular mutation affects the multi-organ system of the human body. Therefore, transgenic mouse models for the study of nDNA-encoded mitochondrial proteins have been developed (129, 130). Due to the conserved nature of mitochondrial proteins, global knockouts are often embryonically lethal (131) and conditional knockouts do not always result in similar phenotypes (39). In addition, genetic differences between different mouse strains need to be taken into account (132) when assessing the phenotype, as well as the effects of environmental factors (133).

Two transgenic mouse models assessing CIII function are currently available: a conditional knockout of the RISP protein in neurons (39); and the GRACILE mouse model with the human c.232A>G mutation introduced into mouse *Bcs1l*. There are no known human mutations in the human RISP gene (*UQCRC1*), indicating that RISP deficiency is incompatible with life. Mice with conditional neuronal *Risp* knockout developed as controls until a sudden death after three months of age. Their brains, however, displayed extensive oxidative stress, especially in the piriform cortex (39). The introduction of the GRACILE mutation into mouse *Bcs1l* resulted in growth restriction, progressive liver disorder, and early death in homozygous *Bcs1l*<sup>G/G</sup> mice, a phenotype corresponding to the human disease (114).

In this thesis, the GRACILE mouse model was used to assess the molecular pathology of the GRACILE syndrome with investigations on mitochondrial SC

formation and composition in relation to the progressive CIII deficiency (Paper I and Paper II). Furthermore, the impact of progressive CIII deficiency on mouse liver metabolism was analyzed (Paper III).

In fibroblasts, deficient CIII assembly may influence CI stability and SC formation (69). In a recent study in human cancer cells, CI and respirasome assembly were studied after inhibition of mitochondrial translation (41). This study suggested that in human cells, a CI assembly intermediate acts as a scaffold for supercomplex assembly by accepting individual CIII and CIV subunits. The start of SC formation requires assembly of CIII and CIV to a certain threshold, thereafter leaving free CIII and CIV subunits to interact with the CI assembly intermediate. In contrast, in GRACILE mice, CI assembly and function, as well as supercomplex formation, were preserved (Paper I), despite deficient CIII assembly. In addition, pre-CIII<sub>2</sub> was found in supercomplexes of homozygous *Bcs1l*<sup>G/G</sup> mice where it probably compensated for the lack of CIII<sub>2</sub>, thus preserving RC functionality. The formation of pre-CIII<sub>2</sub>/CI SC was also observed in RISP knockout cells (39). In addition, these authors demonstrated that CI and SC assembly are sensitive to reactive oxygen species (ROS). Observed differences in CI stability and SC assembly between models might thus be ascribed to different oxygen and ROS levels in cell culture as compared to tissue.

The assembly of supercomplexes has recently been shown to be dependent on the presence of the SC assembly factor *Scafi*. In several mouse strains, including the commonly used strain C57Bl/6, the *Scafi* gene has a six nucleotide deletion, that results in unstable *Scafi* protein and a lack of CIV in SC (33). In contrast, the 129sv strain has full-length *Scafi*, detectable *Scafi* protein, and SC containing CIV. The authors further suggest that the presence of *Scafi* allows simultaneous oxidation of multiple substrates at optimum rates.

In Paper II we investigated the correlation between *Scafi*, supercomplex formation, and life span in *Bcs1l*<sup>G/G</sup> mice of mixed, 129/sv x C57BL/6, and congenic C57BL/6 background. In line with the publication of Lapuente-Brun, *Bcs1l*<sup>G/G</sup> mice of mixed background were heterozygous for the long *Scafi* gene and had CIV in supercomplexes, whereas *Bcs1l*<sup>G/G</sup> mice of C57BL/6 were homozygous for the short *Scafi* gene and concomitantly lacked CIV in SC. However, there was no correlation between *Scafi* gene alleles and increased survival in *Bcs1l*<sup>G/G</sup> mice of mixed background. Thus, the CIII deficiency in *Bcs1l*<sup>G/G</sup> mice could not be compensated for by the expression of intact *Scafi* and changed SC formation. This could be due to the limited amount of CIII<sub>2</sub> in *Bcs1l*<sup>G/G</sup>. In mitochondria from mouse livers, independent of *Scafi* genotype, as well as several human cell lines, most of the CIV is not associated with SC in BNGE (33, 41). This could be due to methodological reasons—if there were a weak interaction between SC and CIV it might easily be disturbed during SC extraction. However, digitonin is a rather mild detergent, allowing the extraction of SC with or without CIV.

*Bcs1l*<sup>G/G</sup> mice present with CIII deficiency and a fatal liver disease. It is not known if the liver disease is caused by decreased CIII function or by an as yet unknown function of Bcs1l. Therefore, we induced CIII inhibition in C57BL/6 mice by injecting the CIII inhibitor myxothiazol. Myxothiazol binds to the Q<sub>0</sub> site of CIII dimers, thus preventing electron transfer from ubiquinol to cytochrome b and RISP. In liver mitochondria of myxothiazol-exposed mice, CIII activity was decreased to 50%. The remaining CIII activity seemed to be sufficient to maintain normal RC function as no behavioral changes and only slight pathological signs of tissue injury were observed. In addition, similar SC assembly was found in myxothiazol-exposed and untreated animals.

RC activity is tightly coupled to the metabolism in cells and mammalian organs, forming a network in which the liver plays a central role. Mitochondrial dysfunction due to CIII deficiency thus influences liver metabolism. Therefore, we investigated changes in the liver metabolome in *Bcs1l*<sup>G/G</sup> mice of different ages (Paper IV). Parallel with changes in SC formation (Paper I) we found changes in metabolomics. At disease onset at postnatal day P24, only slight metabolic changes, indicating impaired glucose turnover and beta-oxidation, were detected. The increased AMP level suggests that ATP production was decreased. Thus, the metabolic changes were small; most prominent were signs of energy deprivation. In sick animals, energy deprivation became even more pronounced with decreased carbohydrates, increased AMP and acylcarnitines. Oxidative stress is thought to be an important factor in development of steatosis (134). In *Bcs1l*<sup>G/G</sup> mice, however, oxidative stress markers were only slightly increased in the end stage of the disease. It thus remains unclear whether CIII and CI in our homozygous mouse produced slightly increased amounts of ROS, which could be responsible for changes in signaling pathways. The death mechanism in the homozygous mice is not fully clarified, but energy deprivation and hypoglycemia seem to be crucial factors.

In summary, in this thesis we studied the relation of RC complexes in presence of progressive CIII deficiency and a CIII inhibitor. The CIII deficient mouse model can be used to study alternative aspects of BCS1l in RC function and the development of new interventions. Acute inhibition of CIII by biochemical administration *in vivo* improves the possibility for investigations of mitochondrial dysfunctions.

# Conclusions

To conclude:

We found that in complex III deficiency due to lack of *Bcs1l*, pre-CIII replaces CIII in SC formation. The CI can interact with pre-CIII and form SC in the absence of mature holo-CIII. Thus, a functional RC is preserved in the homozygous mice of the GRACILE model until, over time, a certain threshold is achieved, when RC capacity is impaired and a vicious cycle develops.

The long variant of supercomplex assembly factor I (SCAFI) is required for inclusion of CIV in SC formation, but seems not to be crucial for the functionality of RC in our mouse model. In the homozygotes, the absence of CIV in SC was not associated with a shorter life span or a more severe disorder.

Myxothiazol-exposed wild-type mice displayed an acute reversible CIII inhibition, which did not affect SC formation and other RC complexes. Administering this CIII inhibitor can be used to study further interactions between the respiratory chain complexes, for example in dysfunction of CI and CIV.

Progressive CIII deficiency clearly affected the liver metabolome at the end stage of the disease, suggesting energy deprivation and slight oxidative stress. The role of oxidative stress in the rapid development of steatosis and cirrhosis in our mouse model seems to be minimal.





# Future perspectives

- The mouse model is useful for studying RC dysfunction and its relationship to the development of steatosis/cirrhosis, which is a major concern in diabetes and metabolic syndrome.
- The model has a disease-free interval and rapid deterioration, which makes it suitable for interventional studies. Several new pathways for influencing mitochondrial biogenesis and improving fuel availability have been proposed. Therapeutic benefits should be evident in the model within a few weeks observation.
- Interventions to improve liver function in the model and thus increase life span will provide the possibility for detailed study of other organs, which in the short-lived homozygotes seem to be unaffected. In patients, involvement of CIII dysfunction caused by BCS1L mutations, especially in the central nervous system, heart, and muscles, needs to be assessed if survival is to be extended.
- A translational approach enables further studies of beneficial interventions in clinical trials, which are urgently needed for mitochondrial disorders in humans.



# Populärvetenskaplig sammanfattning

Kroppens förmåga att omvandla matens energi till energi som kan användas i organen sker i små organeller som finns i alla kroppens celler, mitokondrierna. Avvikelse i mitokondrierna förorsakar därför ofta svåra sjukdomar. GRACILE syndrom är en medfödd mitokondriell sjukdom, som leder till svår tillväxthämning, problem med ämnesomsättningen och tidig död. Det finns ingen behandling för dessa barn.

Sjukdomen beror på en mutation i *BCS1L* genen. Detta leder till ett förändrat BCS1L protein, som inte längre kan bygga ihop komplex III i andningskedjan.

Andningskedjan finns i mitokondrierna och har till uppgift att skapa cellernas energi, ATP. Andningskedjan består av fyra stora proteinkomplex. Om BCS1L proteinet inte kan bygga ihop komplex III blir andningskedjan mindre effektiv och kan inte längre producera tillräckligt ATP.

För att förstå komplex III bättre och på sikt kunna hjälpa patienter med mitokondriesjukdom p.g.a. minskad komplex III funktion har vi skapat en musmodell där vi kan undersöka hur komplexen och deras samspel i andningskedjan påverkas av en mutation i *BCS1L*.

Mutation i motsvarande gen i möss leder till snarlik sjukdomsbild som de nyfödda barnen har. Genom att isolera mitokondrier och membranproteiner från muslever analyserade vi proteinsammansättningen i sjuka möss och jämförde med kontroller. Resultatet visade att mutationen leder till att ett bristfälligt ihop byggt komplex III kan delta i formation av sammansatta komplex, så kallade superkomplex, och på så sätt kompensera för bristen. Vi studerade två musstammar med olika superkomplex och visade att variationen i superkomplexstrukturen inte hade betydelse för mössens överlevnad.

Våra studier visade att andningskedjans komplex kan bilda fungerande kombinationer på ett dynamiskt sätt om komplex III har en avvikande struktur och på så sätt upprätthålla andningskedjans funktion åtminstone en tid.



# چکیده فارسی

پاخته‌های (سلولهای) موجودات زنده هوازی، شامل اندامک‌هایی به نام راکیزه (میتوکندری) می‌باشند که انرژی حاصل از مواد غذایی را (قندها، اسیدهای چرب و...) با کمک فسفورو لاسیون اکسیداتیو در زنجیره تنفسی تبدیل به انرژی شیمیایی به شکل ملکولهای "آدنوسین تری فسفات" مخفف به (ای. تی. پی) می‌کند.

جهش ژنتیکی یا اختلال در ملکولهای "دی ان ای" مربوط به پروتئینهای زنجیره تنفسی باعث اختلال در این سیستم تنفسی شده و به نوبه خود روی روند و عملکرد این سیستم تأثیر می‌گذارد. این اختلالات باعث بروز بیماریهای ژنتیکی مرتبط با میتوکندری و سیستم زنجیره تنفسی می‌شود.

"سندرم گراسیال" معروف به سندروم "فلمن" یا "سندروم متابولیکی نوزادان فنلاندی" یکی از این بیماری‌هاست. نوزدان متولد با این دگرگونی ژنتیکی نشانه‌های بارزی مثل، عقب ماندگی در رشد، وجود اسیدهای آمینه در ادرار، جمع شدن آهن در سلولهای بافت کبدی، لاکتوز اسیدی و مرگ زودرس دارند. این بیماری موروثی، اتوزومال مغلوب میباشد.

دگرگونی در ژن "بی سی اس وان ال" عامل این بیماری است. با دگرگونی در کد ژنتیکی، عملکرد این پروتئین که ساختار کمپلکس ۳ در دیواره داخلی میتوکندری میباشد مختل میشود. کمپلکس ۳ یکی از چهارمجموعه پروتئینی مخصوص زنجیره تنفسی واقع بر دیواره داخلی میتوکندری میباشد که نقش کلیدی در گذار الکترونی در زنجیره تنفسی دارد. با اختلال در ساختار پروتئینی کمپلکس ۳ عملاً انتقال الکترونها تحت تأثیر قرار گرفته و تولید (ای. تی. پی) مختل میشود.

ما برای مطالعه و تحقیق روی زنجیره تنفسی و پیدا کردن روش درمان برای بیماریهای ناشی از اختلال میتوکندریایی و کمپلکس ۳، یک دگرگونی ژنتیکی شبیه به بیماری گراسیال در موش بوجود آوردیم که بعنوان مدل این بیماری مورد استفاده ما قرار گرفته است. نتیجه این تأثیر در کد ژنتیکی، نزدیکی زیادی با نمونه انسانی آن دارد.

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