



FASCIA CONGRESS RESEARCH: MYOFIBROBLAST MINI-REVIEW

Myofibroblasts work best under stress

Pierre-Jean Wipff, Boris Hinz, PhD*

Laboratory of Cell Biophysics, Ecole Polytechnique Fédérale de Lausanne (EPFL), Bâtiment SG-AA-B143, Station 15, CH-1015 Lausanne, Switzerland

Received 31 March 2008; accepted 4 April 2008

KEYWORDS

Cell contraction;
Fibrosis;
Matrix compliance;
Transforming growth
factor beta

Summary Myofibroblasts are reparative connective tissue cells that contribute to the reconstruction of injured tissue by secreting new extracellular matrix and by exerting high contractile force. Deregulation of these activities results in tissue contracture and development of fibrosis which makes the myofibroblast an important target for anti-fibrotic therapies. Two principle factors drive the development of myofibroblasts from different precursor cells and guarantee maintenance of the contractile phenotype: mechanical stress and transforming growth factor beta (TGF β 1). In this mini-review, we recapitulate the current understanding (1) of how myofibroblasts feel stress using specialized matrix adhesions, (2) of the level of stress that is required to induce their development and (3) of how myofibroblast mechanical activity can have a direct influence on the level of TGF β 1 activation. From these findings it emerges that the specific matrix adhesion structures of myofibroblasts are promising targets to modulate myofibroblast differentiation and activity.

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Introduction

When tissues are injured, locally residing connective tissue fibroblasts and cells recruited from other sources acquire smooth muscle features by

Abbreviations: α -SMA, α -smooth muscle actin; ECM, extracellular matrix; FA, focal adhesion; LAP, latency-associated protein; LLC, large latent complex; LTBP, latent transforming growth factor β -binding protein; TGF, transforming growth factor.

*Corresponding author. Tel.: +41 21 6939703;
fax: +41 21 6938305.

E-mail address: boris.hinz@epfl.ch (B. Hinz).

forming contractile stress fibers and by neo-expressing α -smooth muscle actin (α -SMA) (Hinz, 2007) (Figure 1). The high contractile activity generated by α -SMA in stress fibers plays a fundamental role in remodeling injured tissue such as during skin wound healing (Hinz et al., 2001a). Of high clinical relevance are the retractile phenomena, caused by excessive myofibroblast contractile and extracellular matrix (ECM) secreting activity, which characterize the vast majority of fibrocontractive diseases. This includes fibrosis affecting vital organs, such as heart (Virag and Murry, 2003), liver (Desmouliere et al., 2003), kidney (Lan, 2003)

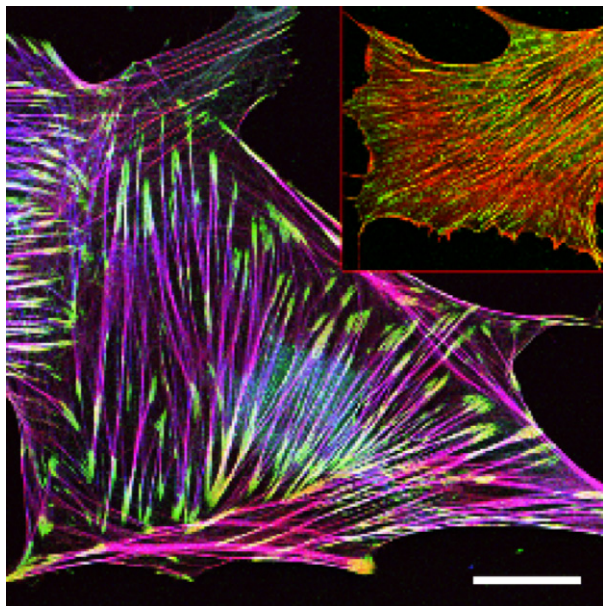


Figure 1 (On-line colour) Myfibroblast morphology differs on stiff and rigid culture substrates. Myfibroblasts cultured on rigid plastic surfaces and soft polymer substrates (inset) were immunostained for polymerized actin (red), α -SMA (blue) and FAs (vinculin, green). On rigid plastic, myfibroblasts develop thick stress fiber bundles that incorporate α -SMA (purple color) and that insert at sites of large supermature FAs. On soft polymer substrates large FA cannot develop and α -SMA is not recruited to stress fibers (red). Note that both cells are displayed at the same magnification. Bar: 50 μ m.

and lung (Phan, 2002) and fibrosis reducing life quality in scleroderma (Rajkumar et al., 2005), hypertrophic scars (Desmouliere et al., 2003; Gabbiani, 2003), airway remodeling in asthma (Chiappara et al., 2001) and Dupuytren's disease (Tomasek et al., 1999). Moreover, myfibroblasts at the tumor invasion front are activated by the transformed epithelium to stimulate tumor growth and invasion by promoting angiogenesis and tumor cell migration (Desmouliere et al., 2004). But don't get fooled—the myfibroblast is not necessarily the 'bad guy' as it contributes to physiological wound healing and its absence has been associated with development of chronic wounds (Gabbiani, 2003). In addition, contractile fibroblasts have been suggested to generate a beneficial mechanical stress or 'tonus' in some normal tissues, such as in the alveolar septa in the lung and possibly the human dorsal fascia, as it has emerged from the first Fascia Research Congress in Boston 2007.

To develop novel strategies counteracting myfibroblast malfunction in fibrosis and controlling beneficial myfibroblast action in physiological

tissue repair, it is important to understand the molecular mechanisms that regulate myfibroblast formation and activity. Over the past 15 years, the pro-fibrotic cytokine transforming growth factor beta1 (TGF β 1) has been established as the most potent inducer of myfibroblast differentiation (Desmouliere et al., 1993; Ronnov-Jessen and Petersen, 1993). However, during tissue repair, reparative fibroblasts are not only in contact with an altered chemical milieu but face a dramatically changed mechanical microenvironment. In fact, expression of α -SMA demands both, a mechanically restrained environment and the action of TGF β 1. In this mini-review, we will elaborate that mechanical stress and TGF β 1 are actually two sides of the myfibroblast differentiation coin, as recently reviewed in greater detail (Wipff and Hinz, 2008).

How stiff is the myfibroblast environment?

Having spent most of their lives shielded by a protective ECM, fibroblasts are exposed to considerable stress when the protective ECM structure is lost after tissue injury (Tomasek et al., 2002). In response to this mechanical challenge, fibroblasts develop tension on their own by building up a contractile stress fiber apparatus that is used to stiffen newly secreted ECM. What is a 'stiff' ECM in a physiological sense and how does ECM stiffness develop during tissue repair and remodeling? The stiffness of the provisional ECM of early wounds is comparable with the elastic modulus of \sim 10–100 Pa of newly polymerized collagen gels, frequently used in vitro models of tissue repair (Carlson and Longaker, 2004; Grinnell, 2003). Fibroblasts initiated in such gels organize actin filaments in a sub-membrane cortex (Tamariz and Grinnell, 2002). In mechanically restrained gels, tension is gradually increasing and first induces the formation of α -SMA-negative stress fibers (Tamariz and Grinnell, 2002), similar to fibroblasts of 5–6 day-old rat wound granulation tissue (Hinz et al., 2001b). Gel and tissue stiffness at this stage have not been measured but neo-formation of stress fibers in fibroblasts grown on soft two-dimensional culture substrates occurs at an elastic modulus of \sim 3000–6000 Pa (Discher et al., 2005; Yeung et al., 2005).

Expression of α -SMA and incorporation into pre-existing stress fibers requires significantly higher ECM stiffness that begins to develop in anchored collagen gels after 2–3 days of remodeling (Hinz,

2006) and after 8–9 days in experimental rat wounds (Hinz et al., 2001b). The threshold ECM stiffness for occurrence of α -SMA in stress fibers ranges around 20,000 Pa as demonstrated for contractile wound granulation tissue and for myofibroblasts cultured on elastic substrates (Goffin et al., 2006) (Figure 1). A comparable ECM stiffness of \sim 15,000 Pa activates hepatic stellate cells into α -SMA-positive myofibroblasts in vitro and during development of liver fibrosis in vivo (Wells, 2005). In other fibrotic tissues and in granulation tissue toward the end of wound healing an ECM stiffness of greater than 50,000 Pa has been measured (Goffin et al., 2006). Using collagen and polyacrylamide gel substrates of varying stiffness, it has been shown that the level of α -SMA expression in cultured differentiated myofibroblasts increases with increasing ECM rigidity (Arora et al., 1999; Hinz et al., 2003) (Figure 1). In vivo, mechanically preventing wound closure by splinting the edges of experimental wounds accelerates expression of α -SMA compared with normally healing wounds; stress release by removing the splint leads to reduced α -SMA expression (Hinz et al., 2001b). The mechanisms and intracellular pathways through which tension potentially controls α -SMA transcription have recently been reviewed (Wang et al., 2006). In addition to being regulated on the expression level, α -SMA is beginning to be considered as mechano-sensitive protein. The fact that α -SMA only localizes to stress fibers under significant mechanical load may provide a mechanism to rapidly control myofibroblast contractile function (Goffin et al., 2006; Hinz, 2006). Reducing stress fiber tension by reducing substrate stiffness and by inhibiting myosin contraction leads to the removal of α -SMA from persisting stress fibers (Goffin et al., 2006) (Figure 1).

How do myofibroblasts feel the stress?

It is widely accepted that fibroblastic cells perceive mechanical signals from the ECM by utilizing integrins, i.e. the same transmembrane proteins that anchor stress fibers to the substrate through a complex of cytoplasmic proteins (Bershadsky et al., 2006; Chen et al., 2004; Giannone and Sheetz, 2006). Integrins are $\alpha\beta$ heterodimers that combine to 24 currently identified cell receptors in mammals binding to various ECM proteins (Hynes, 2002; Luo et al., 2007; Sheppard, 2000). The signaling role of integrin-based ECM adhesions becomes clear from their maturation in response to mechanical

challenge. Reinforcement of adhesion sites under stress starts with integrin clustering into nascent adhesions that further develop into focal complexes when associating with actin filaments. Increasing intracellular stress that needs to be balanced by a mechanically resistant substrate then lead to the enlargement of \sim 1 μm^2 focal complexes into classical focal adhesions (FAs) (Bershadsky et al., 2006).

Ultrastructural analysis of myofibroblasts in fibrotic and wound granulation tissue has revealed massive cell–ECM contacts that are not formed by normal connective tissue fibroblasts (Eyden, 2005). Analogous to this so-called fibronexus, cultured myofibroblasts develop specialized ‘supermature FAs’, a designation that accounts for their significantly longer appearance (8–30 μm) (Dugina et al., 2001) compared with the FAs (2–6 μm) of α -SMA-negative fibroblasts (Geiger et al., 2001) (Figure 1). Supermature FAs exhibit a specific molecular composition which is subject of a more comprehensive recent review (Hinz, 2006). Establishment of supermature FAs depends both on the high intracellular contractile activity generated by α -SMA and on a stress-resistant ECM (Hinz, 2006). Myofibroblasts reduce supermature FAs to small classical FAs after inhibition of α -SMA-mediated contraction (Hinz et al., 2003) and when cultured on soft substrates and in newly polymerized collagen gels (Goffin et al., 2006; Hinz, 2006) (Figure 1). These studies suggest that fibroblasts gain information about the mechanical state of the ECM by assessing the level of tension in stress fibers, which is limited by the size of their ECM anchors. Myofibroblasts grown on arrays of FA adhesion islets (\leq 6 μm long) rapidly lose α -SMA from stress fibers (Figure 2), which however is preserved on supermature FA islets ($>$ 8 μm long).

It is believed that specific proteins in the cytoplasmic adhesion plaque serve as mechano-sensors and act as molecular switches that change their conformation/activation state when force is applied (Giannone and Sheetz, 2006). However, adhesion-mediated mechanical switches and signal generators are not necessarily localized within the cell. The first ECM protein to be identified as a mechano-sensitive protein was fibronectin, which reveals cryptic sites for auto-fibrillogenesis when unfolded upon cell traction (Zhong et al., 1998). ECM protein unfolding may similarly reveal specific integrin-binding sites and thus change cell adhesion-dependent responses such as cell migration, proliferation, survival, and differentiation as well as ECM organization and remodeling (Vogel and Sheetz, 2006).

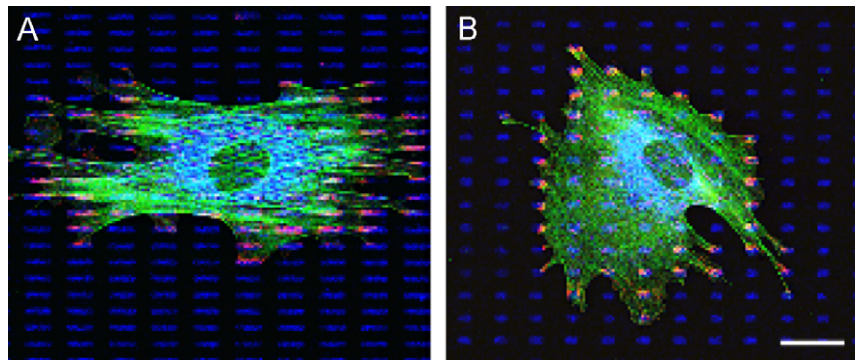


Figure 2 (On-line colour) Focal adhesion size controls recruitment of α -smooth muscle actin to stress fibers. Arrays of fibronectin islets with a size of (A) $4 \times 1.25 \mu\text{m}$ and (B) $10 \times 1.25 \mu\text{m}$ were created on glass by microcontact printing; non-printed regions were passivated against cell attachment (Goffin et al., 2006). Differentiated myofibroblasts were stained for vinculin (red), fibronectin (blue), and α -SMA (green). α -SMA is only recruited to contractile fibers on islets that exceed the length of FAs and that exhibit supermature FA features. Bar: $25 \mu\text{m}$

TGF β 1 activation—when the insoluble becomes soluble

A novel mechanism to translate cell forces into biochemical signals is the liberation of growth factors from stores in the ECM. Such a mechanism was recently demonstrated for the activation of the pro-fibrotic cytokine TGF β 1 by epithelial cells (Jenkins et al., 2006) and by myofibroblasts (Wipff et al., 2007). TGF β 1 is synthesized as a homodimeric protein together with the latency-associated protein (LAP); activation of TGF β 1 requires its dissociation from LAP (Annes et al., 2003). The majority of cell types secrete TGF β 1 as part of the large latent complex (LLC), consisting of TGF β 1, LAP and the latent TGF β 1 binding protein (LTBP-1) (Annes et al., 2003; Todorovic et al., 2005) (Figure 3). LTBP-1 is an ECM protein that binds to several other ECM components, including fibrillin-1, fibronectin and vitronectin, thereby providing a reservoir of latent TGF β in the ECM (Annes et al., 2003; Todorovic et al., 2005).

Activation of TGF β 1 by its dissociation from LAP and/or the ECM-bound LLC is promoted by various mechanisms, which differ according to the cell type and the physiological context. Latent TGF β 1 activation occurs upon proteolytic cleavage, by interaction with thrombospondin 1 and with the mannose-6-phosphate receptor (Annes et al., 2003; Jenkins, 2007). More recently, integrins α v β 5, α v β 6, and α v β 8, a yet unidentified β 1 integrin and possibly α v β 3 integrin have been reported to participate in activating TGF β 1 (Sheppard, 2005; Wipff and Hinz, 2008). The knockout of integrin subunits which participate in TGF β 1 activation produces phenotypes that closely resemble that of a TGF β 1 knockout (Bader et al., 1998; Huang et al., 1996; Shull et al., 1992; Zhu et al., 2002).

Importantly, the lungs of β 6 knockout mice are protected from bleomycin-induced fibrosis (Munger et al., 1999) and inhibition of α v β 5 integrin in vitro reduces the fibrogenic character of fibroblastic cells (Asano et al., 2006). Hence, interfering with the integrins that are implicated in TGF β 1 activation is a possible therapeutic strategy to counteract the harmful activity of active TGF β 1 in a cell-specific manner, without impairing its beneficial effects on other cell types.

How can integrins activate a growth factor? Two distinct mechanisms are currently discussed which appear to co-exist. In the first mechanism that is sensitive to protease inhibitors, integrins are proposed to serve as a common docking point for latent TGF β 1 and its activating proteases (Jenkins, 2007; Sheppard, 2005; Wipff and Hinz, 2008). The second mechanism is independent from any proteolytic action and involves cell traction forces which are directly transmitted to the LLC via integrins. The resulting conformational change in the latent complex is suggested to liberate TGF β 1 and/or to present it to its receptor (Figure 3). It appears that at least four conditions need to be satisfied for this conformational change: (1) specific integrin binding to the LLC, (2) the presence of the contractile actin cytoskeleton to generate force and/or to provide mechanical resistance, (3) incorporation of latent TGF β 1 into the ECM as LLC, and (4) an ECM that mechanically resists the cellular traction forces exerted to the LLC (Figure 3).

First evidence that integrins can directly activate TGF β 1 independently from any proteolytic activity came from studies on the epithelial integrin α v β 6 (Annes et al., 2004; Jenkins et al., 2006; Munger et al., 1999). Very recently, we elucidated that integrin α v β 5 and possibly α v β 3 integrin can

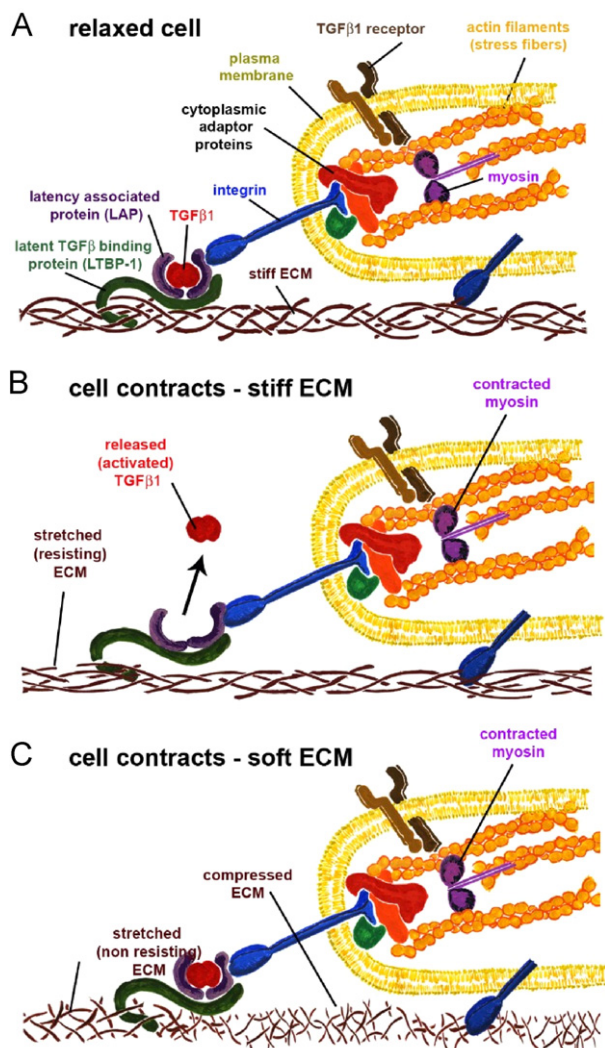


Figure 3 An artistic view on TGF β 1 activation by integrin-mediated myofibroblast contraction. (A) TGF β 1 is biologically latent when binding to the latency-associated protein (LAP). Association of TGF β 1/LAP with the latent TGF β 1 binding protein (LTBP-1) builds the large latent complex (LLC) which is part of the ECM. The contractile activity of myofibroblast stress fibers is transmitted via integrins to specific binding sites in the LAP protein. (B) When the LLC is anchored in a well-organized and stiff ECM, myofibroblast contraction can induce allosteric changes in the complex, leading to liberation of biologically active TGF β 1. Active TGF β 1 will feed back to the activating cell or to cells in close vicinity by binding to its receptor. (C) In the context of a compliant ECM, the LLC is dragged toward the pulling cell due to the lack of mechanical resistance; no conformational change in the LLC occurs and TGF β 1 remains latent.

directly activate TGF β 1 in myofibroblasts (Wipff et al., 2007). All integrins that contribute to the activation of TGF β 1, regardless of the underlying mechanism, physically interact with the LAP portion of the LLC (Sheppard, 2005). Interfering with

the respective binding sequence abolishes TGF β 1 activation in cultured epithelial cells (Munger et al., 1999) and in myofibroblasts (Wipff et al., 2007). Knockout of this binding site in mice results in defects in vasculogenesis, a deficient immune system and enhanced inflammation, similar to a TGF β 1 knockout (Yang et al., 2007).

Incubating purified integrins with latent TGF β 1 alone is not sufficient to activate the LLC and association of integrins with the cytoskeleton appears mandatory for this action. Both disruption of actin filaments with cytochalasin D and truncation of the α v β 6 integrin cytoplasmic tail prevent TGF β 1 activation (Munger et al., 1999; Sheppard, 2005). Subsequent studies carried out with β 6 integrin-transfected fibroblasts, overexpressing either constitutively active or dominant negative forms of the small GTPase RhoA, consolidated the role of the cytoskeleton in the activation process (Jenkins et al., 2006). Activation of RhoA is a central element in promoting actin-myosin contraction in these cells and the level of RhoA activity correlates with their level of TGF β 1 activation (Jenkins et al., 2006). First direct evidence for a contribution of mechanical stress in TGF β 1 activation was recently provided by experiments with myofibroblasts that activate TGF β 1 as a function of their contractile activity (Wipff et al., 2007). Inducing myofibroblast contraction with thrombin, angiotensin-II and endothelin-1 increases TGF β 1 activation; this effect depends on integrin binding to LAP (Wipff et al., 2007).

The third mandatory element for traction-mediated activation of TGF β 1 by integrins is incorporation of the LLC into the ECM. The connection between LLC-ECM binding and integrin-mediated release of active TGF β 1 was recently elucidated by identifying the pivotal ECM binding motif in the LTBP-1 protein (Annes et al., 2004). An engineered construct comprising only the LAP-binding domain and the N-terminal ECM-binding hinge region of LTBP-1 is sufficient to substitute for this function of the full-length LTBP-1 (Annes et al., 2004). Deletion of this ECM-binding hinge region from LTBP-1 abolishes α v β 6 integrin-mediated activation of TGF β 1 (Annes et al., 2004).

The physiological relevance of the relationship between binding of the LLC to the ECM and TGF β 1 activation is understandable in the context of connective tissue repair and development progressive fibrosis. In these situations, ECM stiffness gradually increases with ongoing fibroblast remodeling activity (Hinz and Gabbiani, 2003). To induce a conformational change in the latent TGF β 1 complex by integrin-mediated pulling on the LAP, the ECM must provide mechanical resistance

(Figure 3). Indeed, myofibroblasts only activate TGF- β 1 by integrin-mediated contraction when cultured on silicone substrates with a stiffness that corresponds to that of contracting fibrotic and granulation tissue but not when grown on substrates exhibiting the compliance of normal connective tissue (Wipff et al., 2007). We propose that linking the level of active TGF β 1 release with the degree of ECM stiffness restricts generation and autocrine maintenance of the myofibroblast phenotype to the appropriate (contractible) mechanical microenvironment (Figure 3).

Conclusion

Myofibroblasts adapt their often harmful contractile activity to the level of stress in their surrounding tissue. To detect mechanical changes in the microenvironment, they utilize the same proteins that ultimately transmit stress fiber contraction to the ECM, namely integrins. To prevent formation of the myofibroblast, we propose to target these stress-sensors, in other words to render them blind for mechanical inputs. In addition, it becomes increasingly clear that activation of TGF β 1 is confined to cells expressing the appropriate integrin in the appropriate physiological context. Clearly, this renders local targeting of specific integrins a possible therapy to reduce the profibrotic effects of TGF β 1.

Acknowledgments

We thank Dr. J.-J. Meister (Laboratory of Cell Biophysics, EPFL, Lausanne, Switzerland) for his support and for providing laboratory facilities. The work of BH is supported by Grants from the Swiss National Science Foundation (#3100A0-102150/1 and #3100A0-113733/1), from the Gebert R uf Stiftung, from the Service Acad mique, EPFL and from the Competence Centre for Materials Science and Technology (CCMX) of the ETH-Board, Switzerland.

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