# **Potential of extracellular vesicles as biomarkers of mitochondrial dysfunction**

<sup>1</sup>Biology of Breathing (BoB) Theme, CHRIM ; <sup>2</sup>Diabetes Research Envisioned and Accomplished in Manitoba, Winnipeg, Canada; <sup>4</sup>Children's Hospital Research Institute of Manitoba, Canada; <sup>5</sup>Faculty of Kinesiology and Recreation Management, University of Health Sciences, University of Manitoba, Winnipeg, MB; <sup>7</sup>College of Nursing, Rady Faculty of Health Sciences, University of Manitoba, Winnipeg, MB

## BACKGROUND

- ✓ Mitochondrial disorders (MD) are caused by dysfunction within the respiratory chain and can be classified as primary or secondary MD.
- Primary mitochondrial disease (PMD) are caused by known mtDNA and nDNA mutations, while secondary mitochondrial dysfunction (SMD) is due to inherited or acquired disorders affecting mitochondrial function and dynamics.
- ✓ Extracellular vesicles (EVs) are important mediators of intercellular communication and show promise as disease biomarkers, but remain unexplored in MD.
- ✓ We hypothesize that EVs can serve as biomarkers of MD.

### AIM

- $\checkmark$  To test our hypothesis, we characterized plasma-EVs from a known PMD (MELAS, N=1), 2 patients with hypophosphatasia (HPP) a disorder of skeletal mineralization recently associated with mitochondrial dysfunction and matched controls.
- Compared results to EVs from a hydrogen peroxide  $(H_2O_2)$ -induced model of mitochondrial dysfunction.







Tamiris F. G. Souza<sup>1,2,4,5</sup>, Alexandria Martin<sup>4</sup>, Patience O. Obi<sup>1,2,4,5</sup>, Benjamin Bydak<sup>1,2,4,5</sup>, Adrian R. West<sup>1,4,6</sup>, Joseph W. Gordon<sup>1,2,4,7</sup>, Cheryl Rockman-Greenberg<sup>3,4</sup>, and Ayesha Saleem<sup>1,2,4,5</sup>





Figure 3 – Protein yield and expression of protein markers related to EV subtypes by Western blotting on patients-plasma EVs and conditioned media H<sub>2</sub>O<sub>2</sub>-EVs. (A) EV protein yield was 1.52, 2.29 and 1.70-fold higher in HPP1, HPP2 and MELAS, and (B) 1.90-fold higher in H<sub>2</sub>O<sub>2</sub>-EVs vs. control-EVs (p=0.02). (C) Bright-field representative images of control cells and cells treated (6hrs) with H<sub>2</sub>O<sub>2</sub> after 18hrs of recovery. (D) Flotillin-1 expression was reduced by 69.54% in patient-EVs, and (E) by 35.4% in H<sub>2</sub>O<sub>2</sub>-EVs (p=0.03). (F) Cyt-C was differentially expressed in HPP-EVs and lower on HPP1 and undetectable in H2O2-EVs. (G) TSG101 was reduced by 39.1% in MELAS-EVs, 30.48% in HPP-EVs, and (H) 51.81% in H2O2-EVs (p=0.08). (I) ApoA1 expression was lower in patient-EVs vs. controls. Bands were corrected for loading by Coomassie, with multiple proteins run on one gel. The statistical analyses were performed on  $H_2O_2$ -EVs study using Unpaired Student's t-test (N=6).



The Children's Hospital Research

Institute

CHRI

CHILD HEALTH RESEARCH DAYS