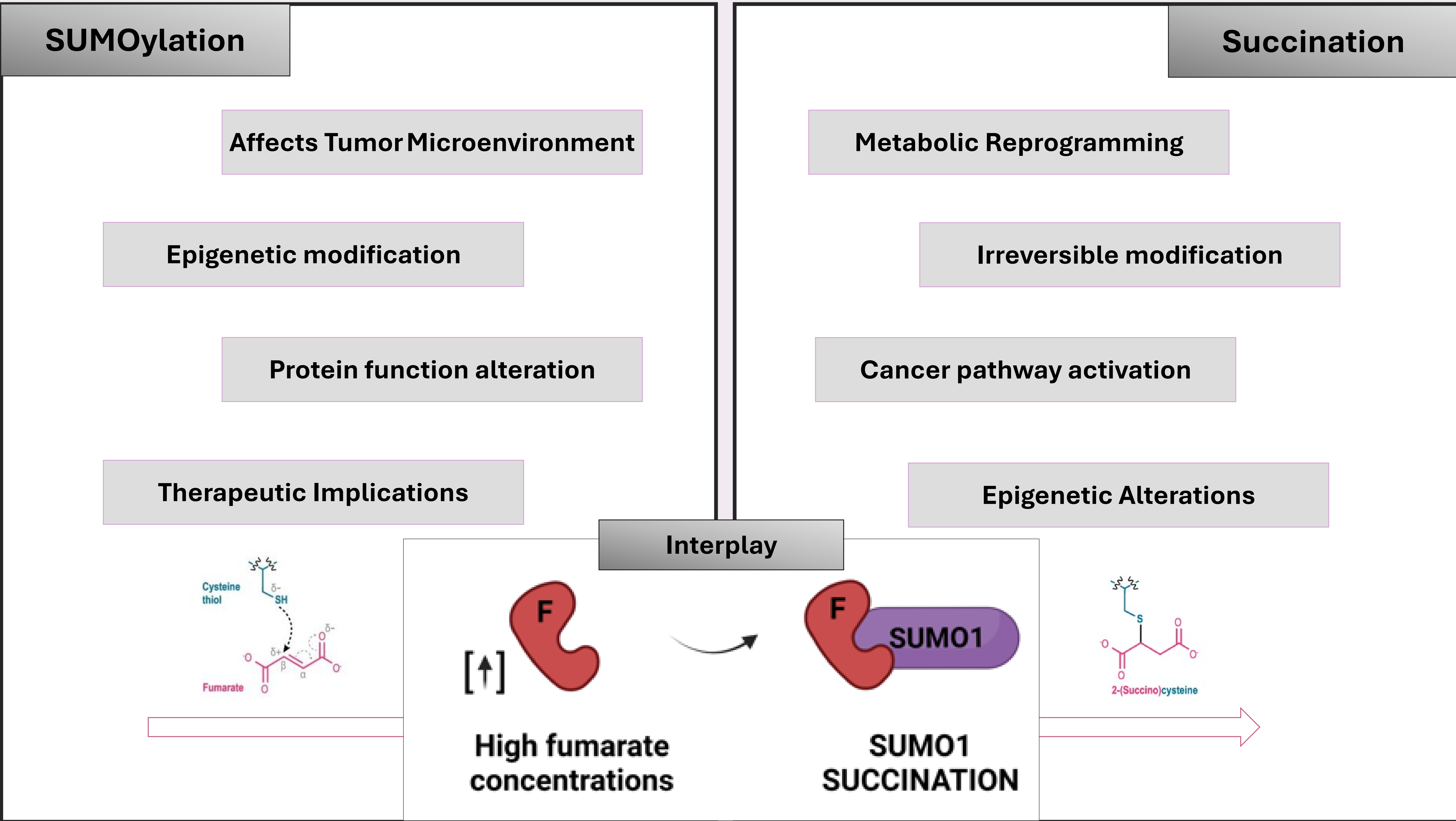


Introduction

Post-translational modifications (PTMs) are pivotal in controlling a protein's activity and the equilibrium within a cell. Both succination and SUMOylation have emerged independently as pathways which exacerbate the advancement of tumors by affecting cancer-related genes, cellular metabolism, and stress responses. While SUMOylation can be irreversible and remains subject to tight control, succination is driven by an irreversible modification due to the accumulation of the oncometabolite fumarate. Despite the increasing importance these two modifications hold in cancer research, the possible relationship between the two remains mostly neglected. This research explores the relationship between them in the context of cardiovascular disease (CVD), a field where interest in the role of PTMs is on the rise, by using human AC16 cardiomyocytes treated with fumarate as a model. Our findings suggest that succination may impair SUMOylation activity, offering new insights into calcium regulation and PTM-linked cardiotoxicity.



1. Succination model development using AC16 cardiomyocytes

2. Model characterization using ¹H-NMR spectrometry

3. Model characterization using Western blotting (on cell extract and on bench assay using a SUMOylation kit)

Results

Figure3: Score plot of PLS-DA showing the separation of the treated groups (in blue) from the Control groups (in green).

PLS-DA : R2X[1] = 0,462; R2X[2] = 0,181; Ellipse: Hotelling's T2 (95%)

A

SUMO-1

Relative abundance

Concentrations of FA [mM]

SUMO-1

B

SERCA2a

Relative abundance

Concentrations of FA [mM]

SERCA2a

SERCA2a

RanGap1

Representative immunoblots of SUMOylated vs non-SUMOylated SERCA2a and RanGap1. SERCA2a and RanGap were SUMOylated (following the SUMOylation cycle), with either normal SUMO1 or succinated SUMO1 (with 100x DiethylFumarate for 24H at 37°C).

References

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