

# **The Sortilin Pathway – A New Target for Reducing LDL and CVD Risk**

**Ronald M. Krauss**

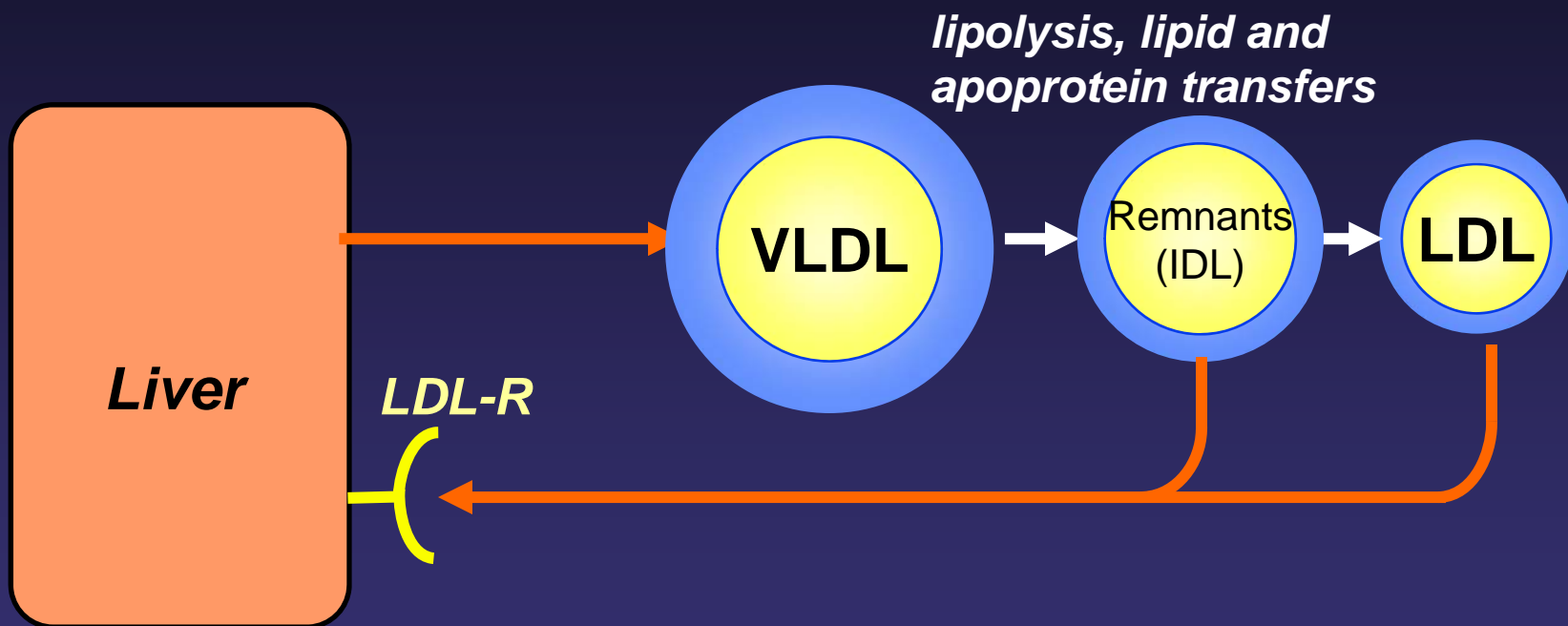
**Children's Hospital Oakland Research Institute  
UCSF and UC Berkeley**

# Disclosures

AFFILIATION/FINANCIAL INTERESTS	CORPORATE ORGANIZATION
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# LDL Metabolism

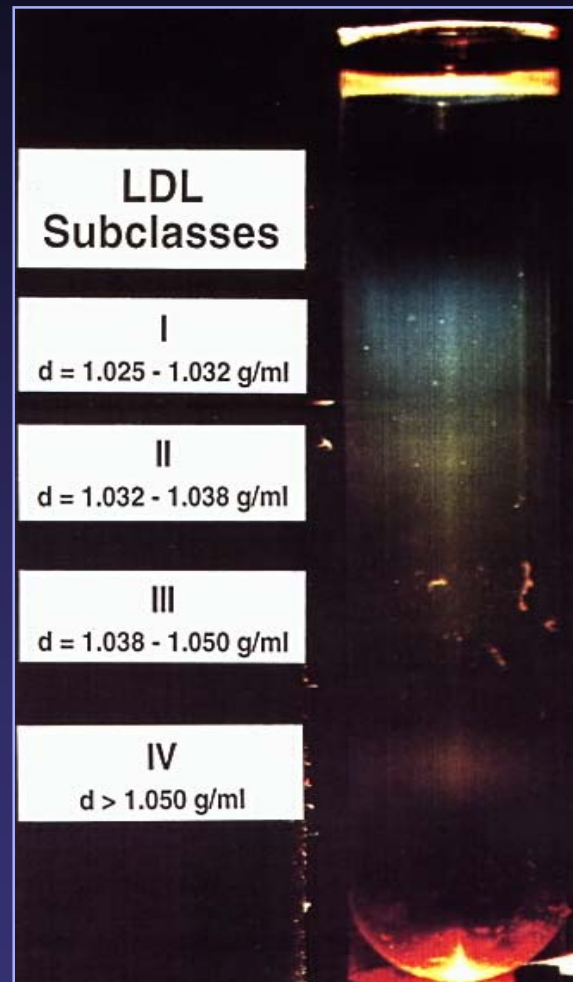
# LDL Metabolism – Traditional Model



*Eisenberg et al., Biochim Biophys Acta 326: 361-377, 1973*

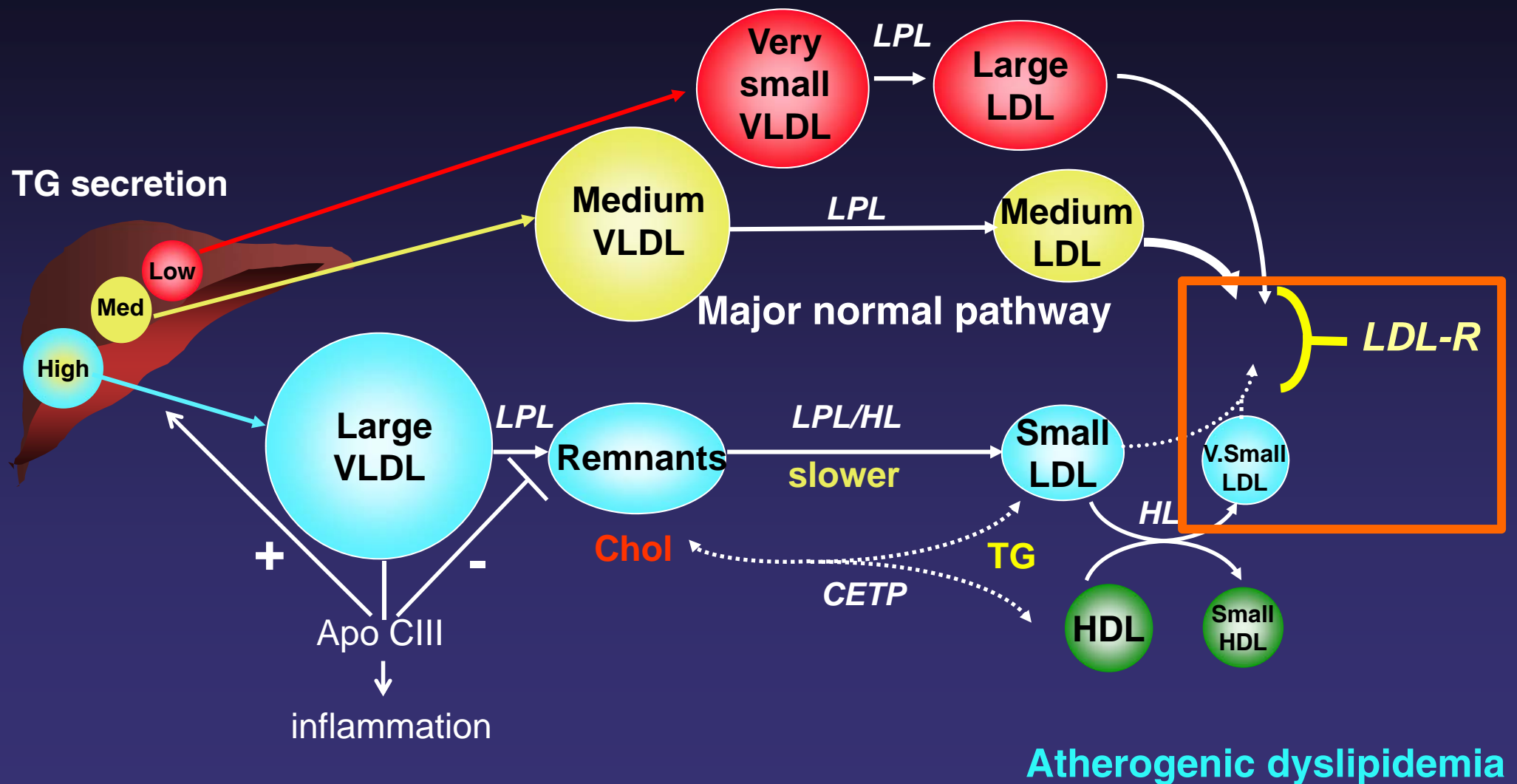
# But LDL comprises multiple discrete subclasses

Large  
Medium  
Small  
Very small



More buoyant = larger  
particle diameter,  
higher lipid content

# Model for pathways that give rise to major LDL subclasses



Adapted from Berneis and Krauss, *JLR* 43:1155, 2002

Relatively low hepatic uptake of small/very small LDL via the LDL receptor is consistent with evidence that >10-15% of LDL particles are not cleared by this receptor.

*Spady et al. PNAS 80:3499, 1983*

# **Small & Very Small LDL and Atherogenesis**



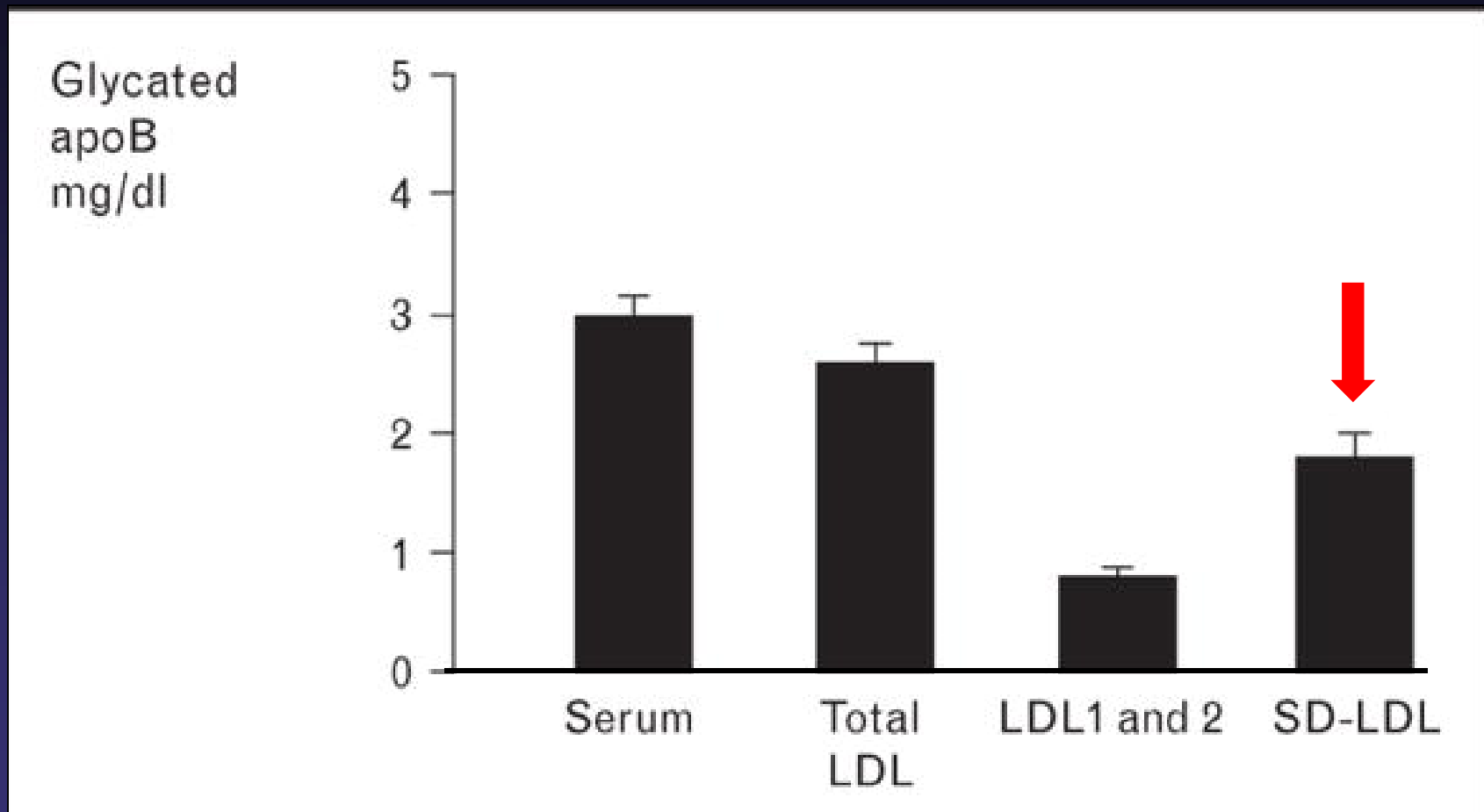
# On-treatment small/very small LDL associated with angiographic progression of coronary disease – HATS

	p adjusted for lipids	p adjusted for apoB or TC/HDL
<b><i>Ion Mobility</i></b>		
Large VLDL	0.02	0.05
Medium VLDL		0.03
Small LDL 3a	0.04	0.03
Very small LDL 3b	0.02	0.03
<b><i>GGE (LDL only)</i></b>		
Very small LDL 3b	0.00001	0.00001
Very small LDL 4a	0.04	0.04
<b><i>NMR</i></b>		
Small LDL	0.03	0.03
<b><i>VAP</i></b>		
LDL 4		0.04 (adj. TC/HDL)

# Why are smaller LDL particles more predictive of CHD than larger LDL?

- Reduced LDL receptor binding – longer plasma residence time
- Greater arterial proteoglycan binding
- Greater oxidative susceptibility
- Association with other risk biomarkers:
  - Reduced HDL, increased remnants
  - Insulin resistance
- Atherogenic components
  - Oxidized lipids
  - Glycated apoB
  - ApoC-III

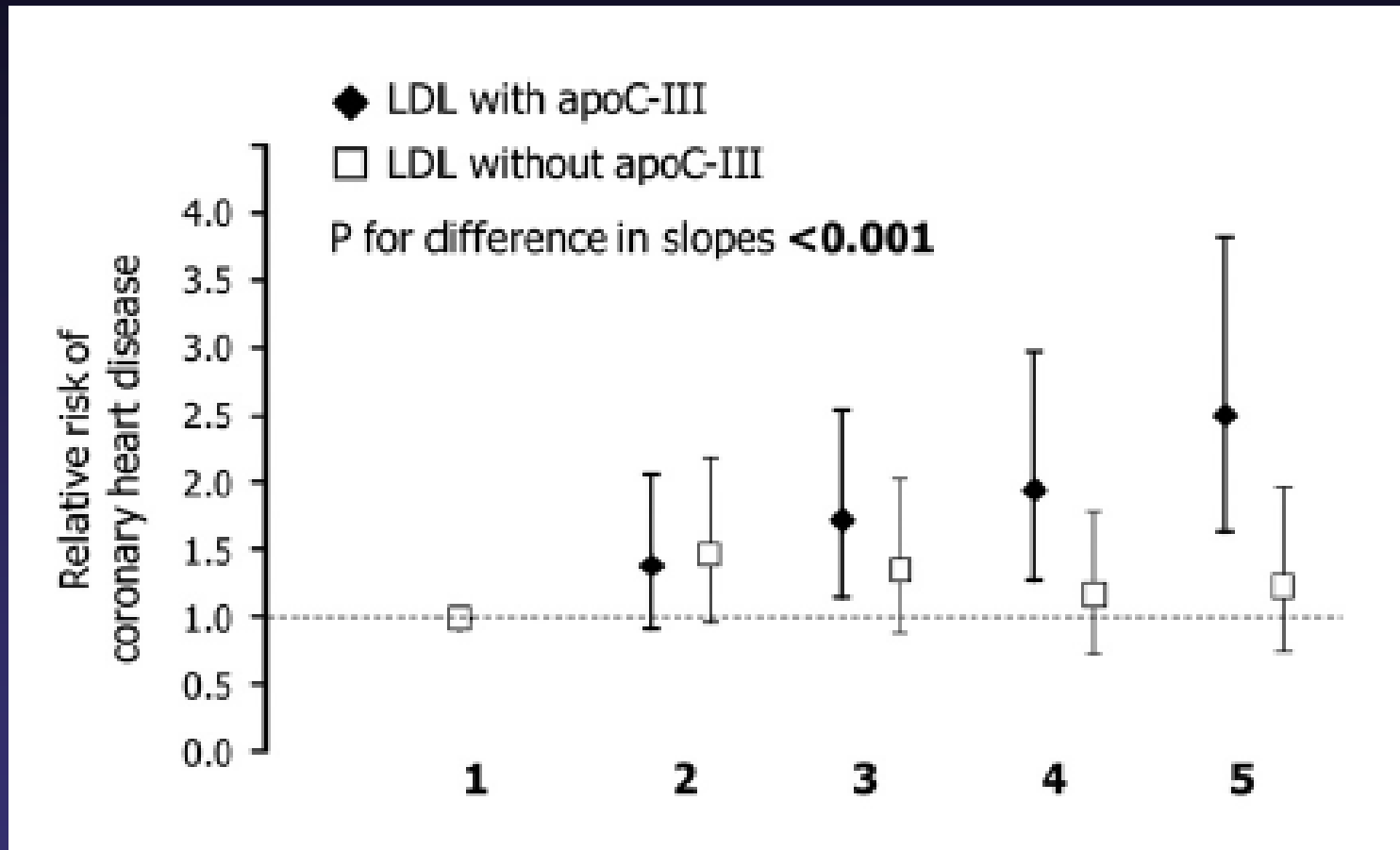
# Glycated apoB is enriched in small, dense LDL particles in non-diabetic individuals



Small, dense LDL fractions are also preferentially glycated *in vitro*

Soran and Durrington *Curr. Opin. Lipidol.* 22:254, 2011

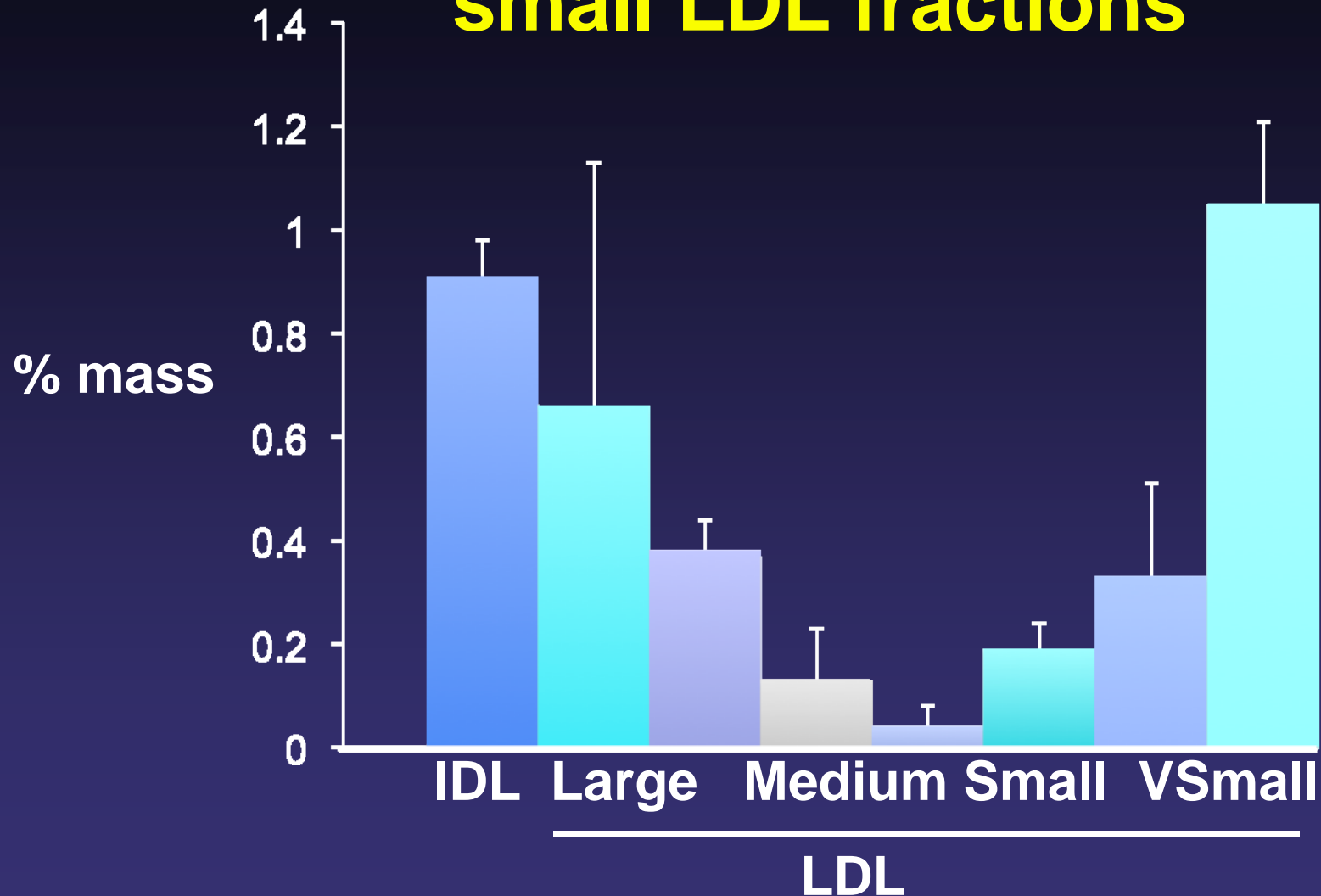
# Risk for developing coronary heart disease is associated with LDL containing apo-CIII



With apoC-III	n=	240	270	297	318	351
Without apoC-III	n=	265	295	317	288	311

*Mendivil et al., Circulation 124:2065, 2011*

# ApoCIII is enriched in IDL and very small LDL fractions

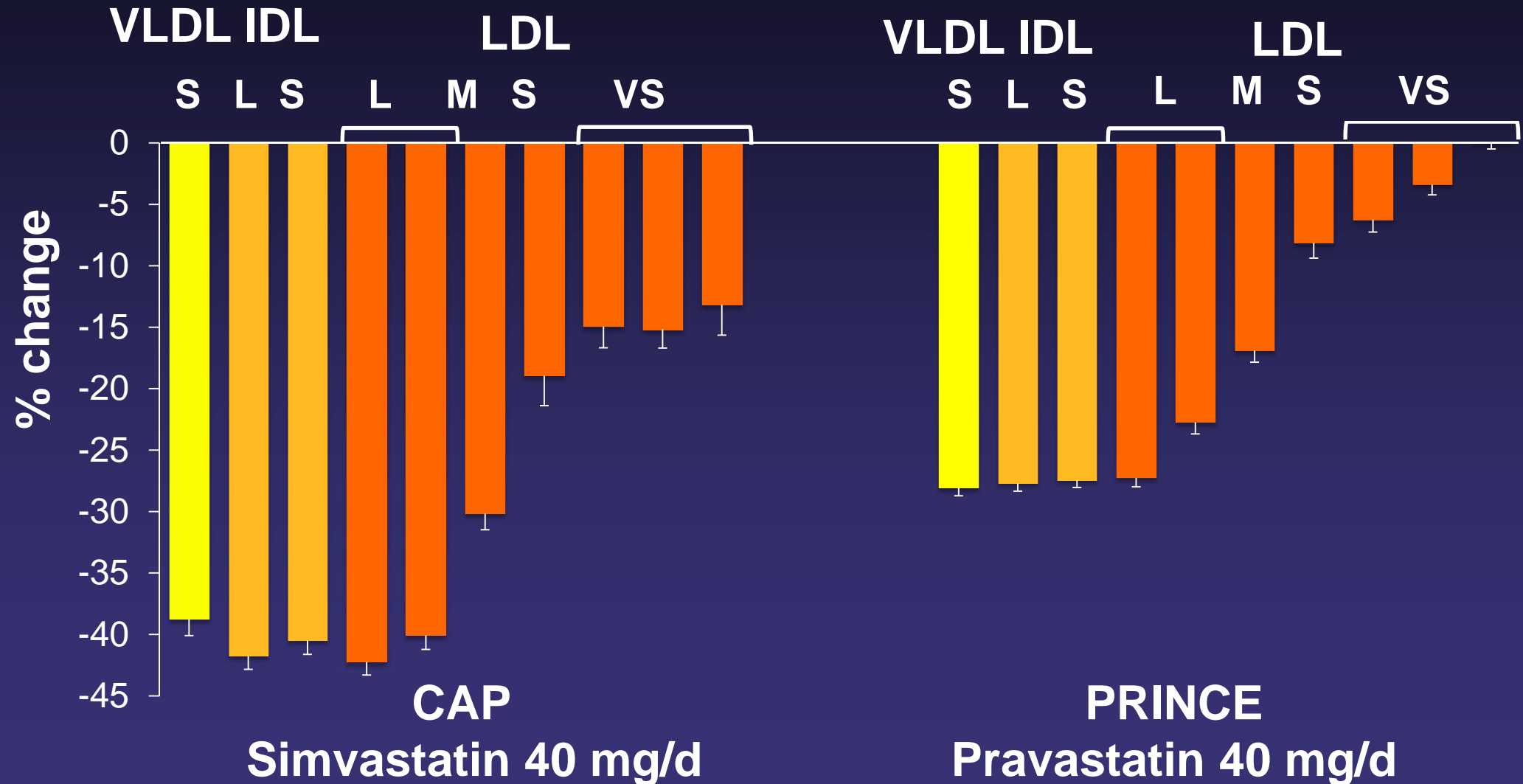


Consistent with findings in type 2 DM; Hiukka et al. Diabetes, 2009

Data from Krauss et al., J. Lipid Res 53: 540, 2012

- **Statins act to reduce LDL in large part by increasing receptor-mediated uptake.**
- **How effective are statins for reducing plasma levels of small and very small LDL particles?**

# Lesser reductions in plasma levels of small and very small LDL cholesterol with statin treatment



- **Statins act to reduce LDL in large part by increasing receptor-mediated uptake.**
- **Is there a mechanism other than LDL receptor uptake for reducing plasma levels of small and very small LDL particles?**

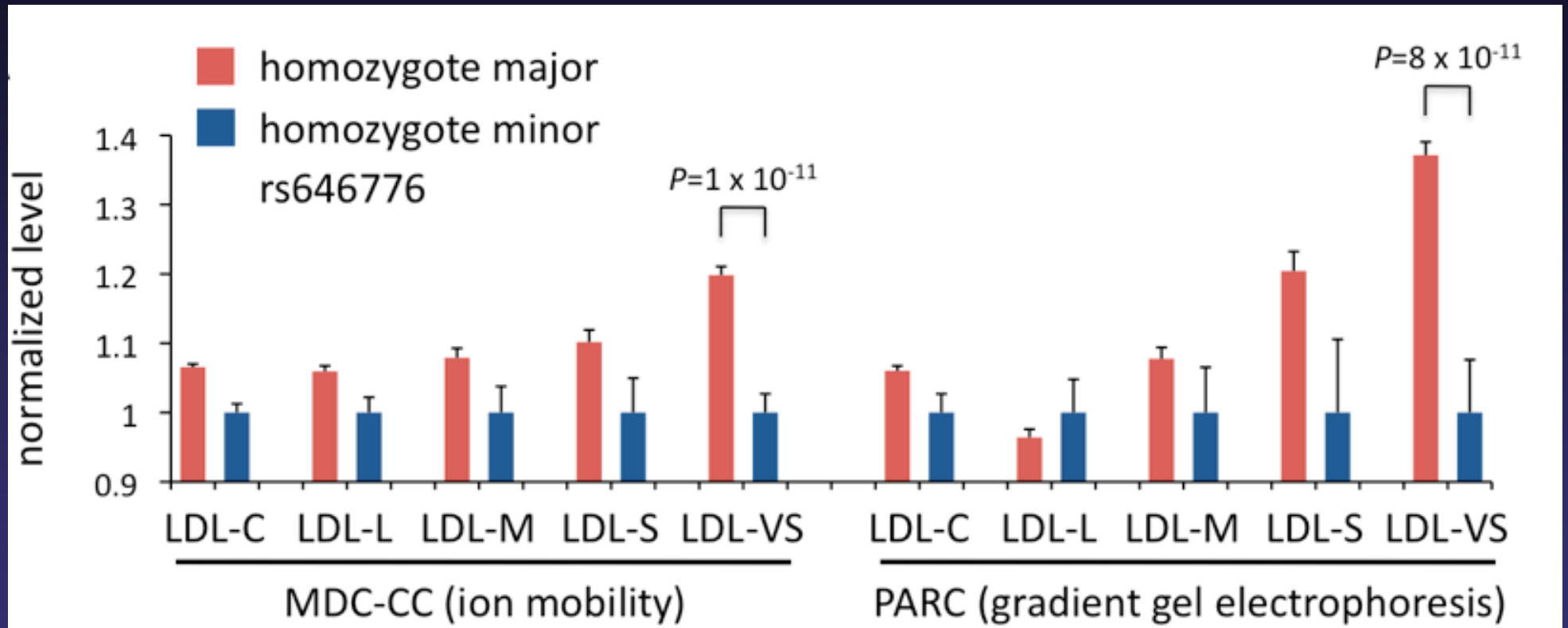


# Top Lipid-Associated SNPs Also Associated with CAD

Trait	Locus	SNP (rs)	n Lipid	p Lipid	n CAD	p CAD
LDL-C	<i>LDLR</i>	6511720	170,607	3.9 x 10 <sup>-262</sup>	86,870	1.2 x 10 <sup>-7</sup>
	<i>SORT1</i>	629301	142,643	5.4 x 10 <sup>-241</sup>	82,222	6.1 x 10 <sup>-10</sup>
	<i>APOB</i>	1367117	173,007	9.5 x 10 <sup>-183</sup>	79,823	2.3 x 10 <sup>-2</sup>
	<i>APOE</i>	4420638	93,103	1.5 x 10 <sup>-178</sup>	36,066	2.1 x 10 <sup>-4</sup>
TRIG	<i>APOA1/A5</i>	964184	90,991	6.6 x 10 <sup>-224</sup>	110,492	4.8 x 10 <sup>-11</sup>
	<i>LPL</i>	12678919	177,749	1.8 x 10 <sup>-199</sup>	110,065	4.7 x 10 <sup>-5</sup>
	<i>TRIB1</i>	2954029	177,729	1.0 x 10 <sup>-107</sup>	81,977	2.8 x 10 <sup>-5</sup>
HDL-C	<i>CETP</i>	3764261	177,533	1.4 x 10 <sup>-769</sup>	83,626	2.2 x 10 <sup>-3</sup>

Global Lipids Genetics Consortium. *Nat Genet* 45:1274, 2013

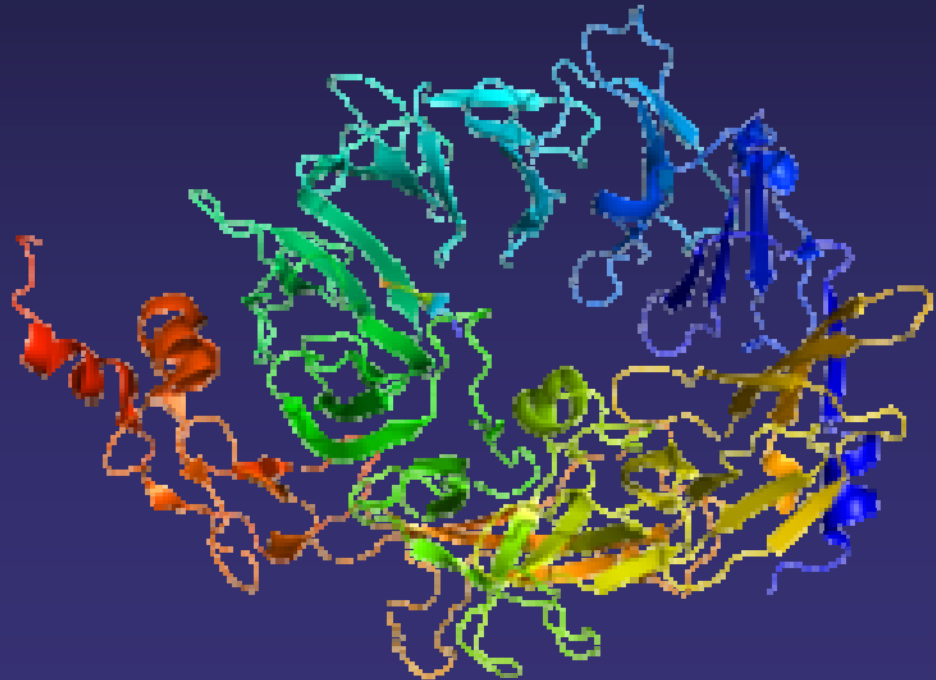
# **SORT1 SNP is preferentially associated with an increase of very small LDL particles in two independent studies**



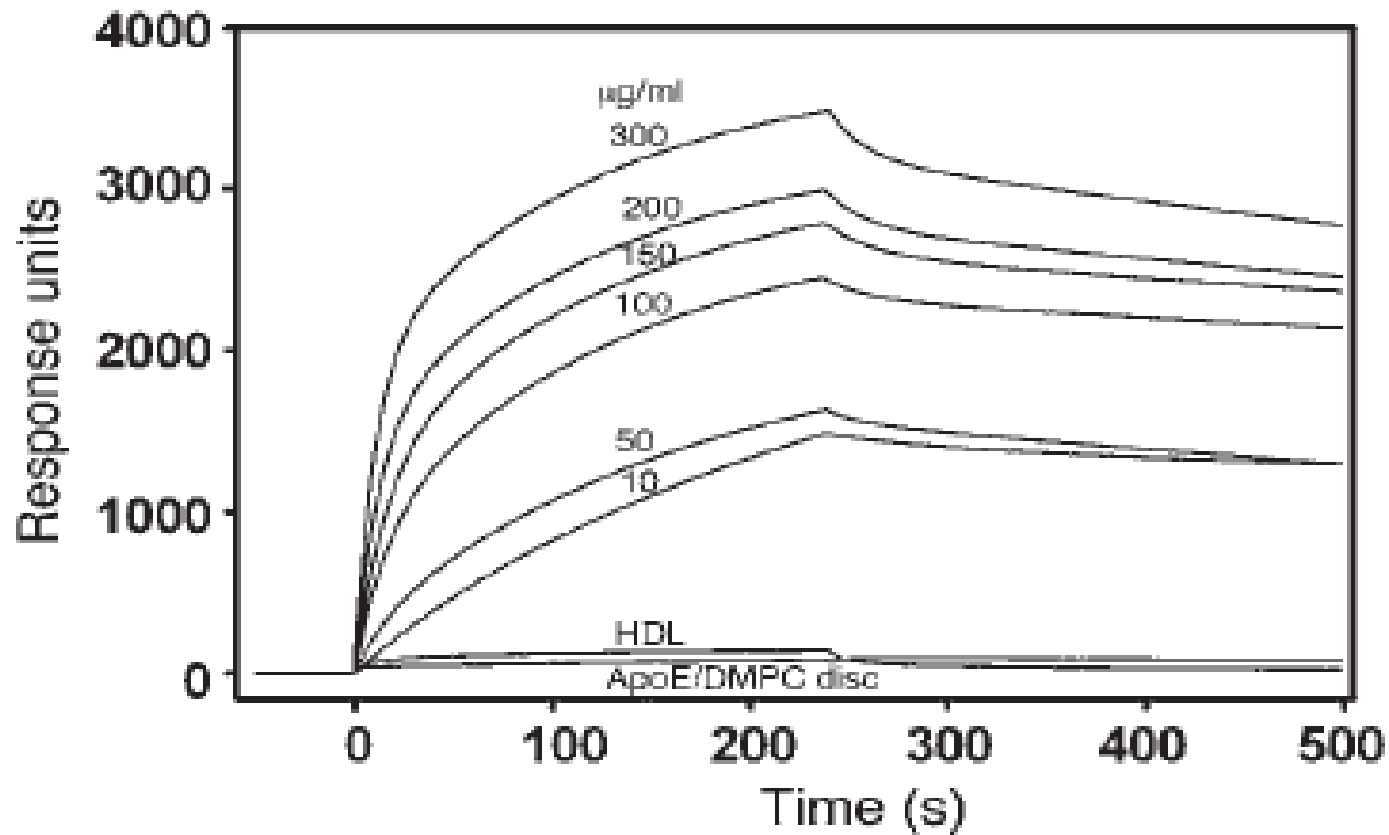
rs 646776 is at the *CELSR2/PSRC1/SORT1* locus on Chr1p;  
in LD with SNP that regulates expression of these genes

*Musunuru et al., Nature 466:714, 2010*

**Sortilin: a trans-Golgi network transmembrane protein that binds a number of unrelated ligands that participate in a wide range of cellular processes.**

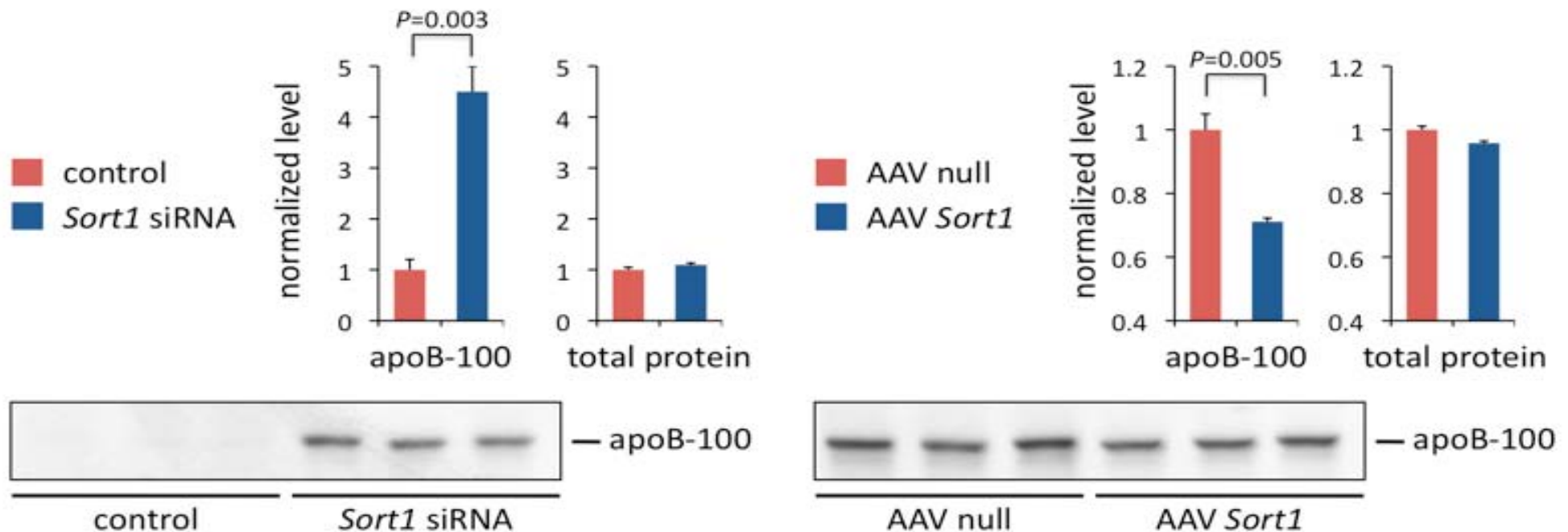


# Sortilin binds with high affinity to apoB



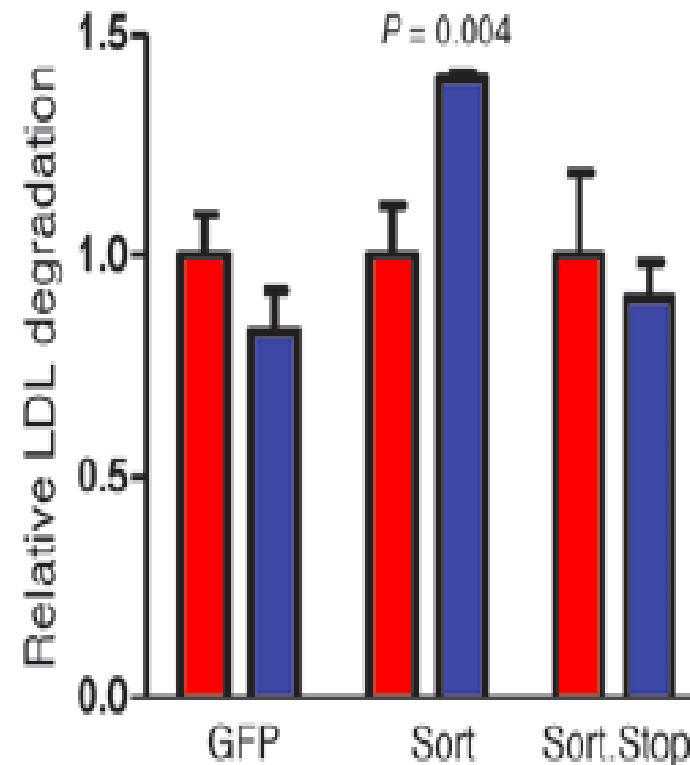
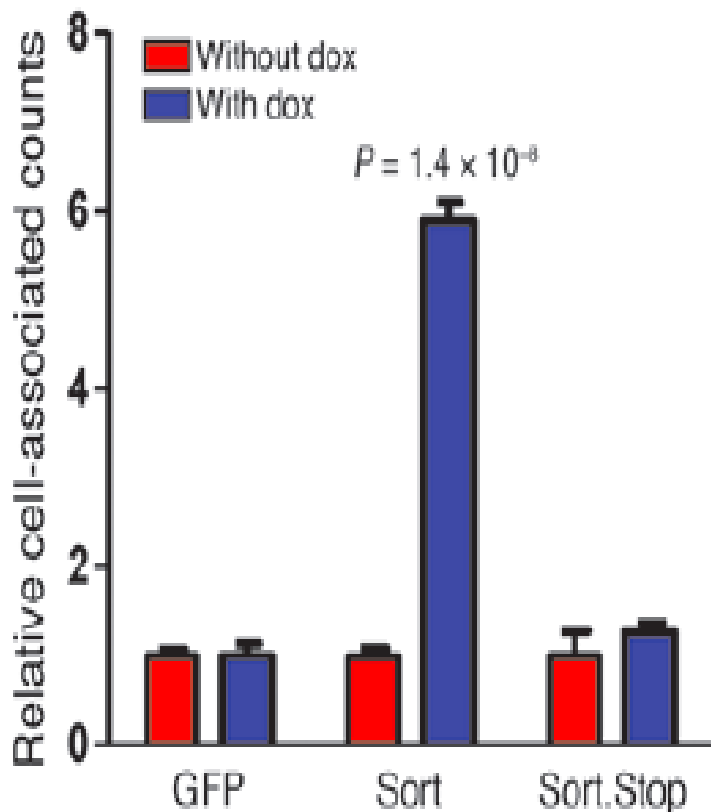
*Strong et al., J Clin Invest 122:2807, 2012*

# Hepatocyte apoB-100 secretion is increased by sort1 knockdown and decreased by sort1 overexpression

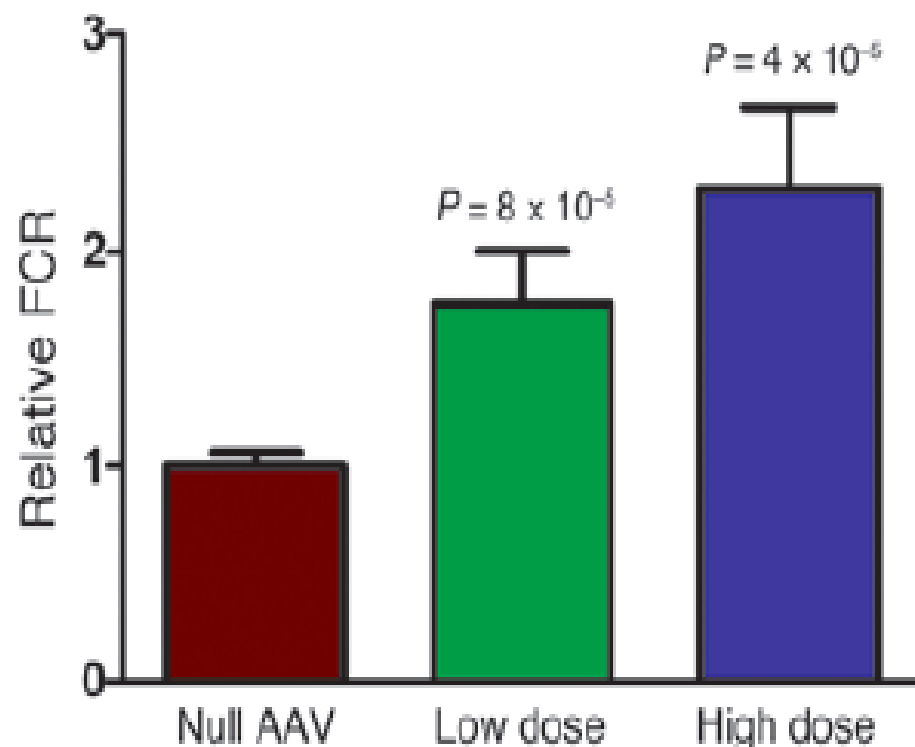
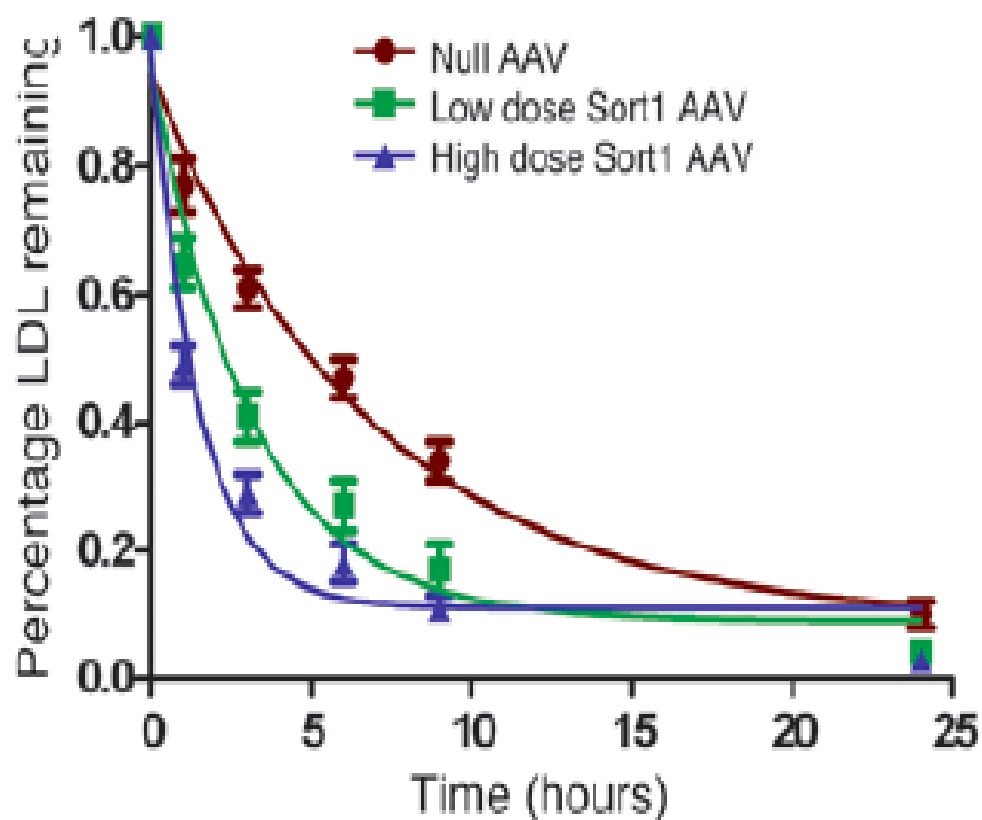


Musunuru et al., Nature 466:714, 2010

# Increased sortilin expression promotes LDL uptake and lysosomal catabolism in vitro

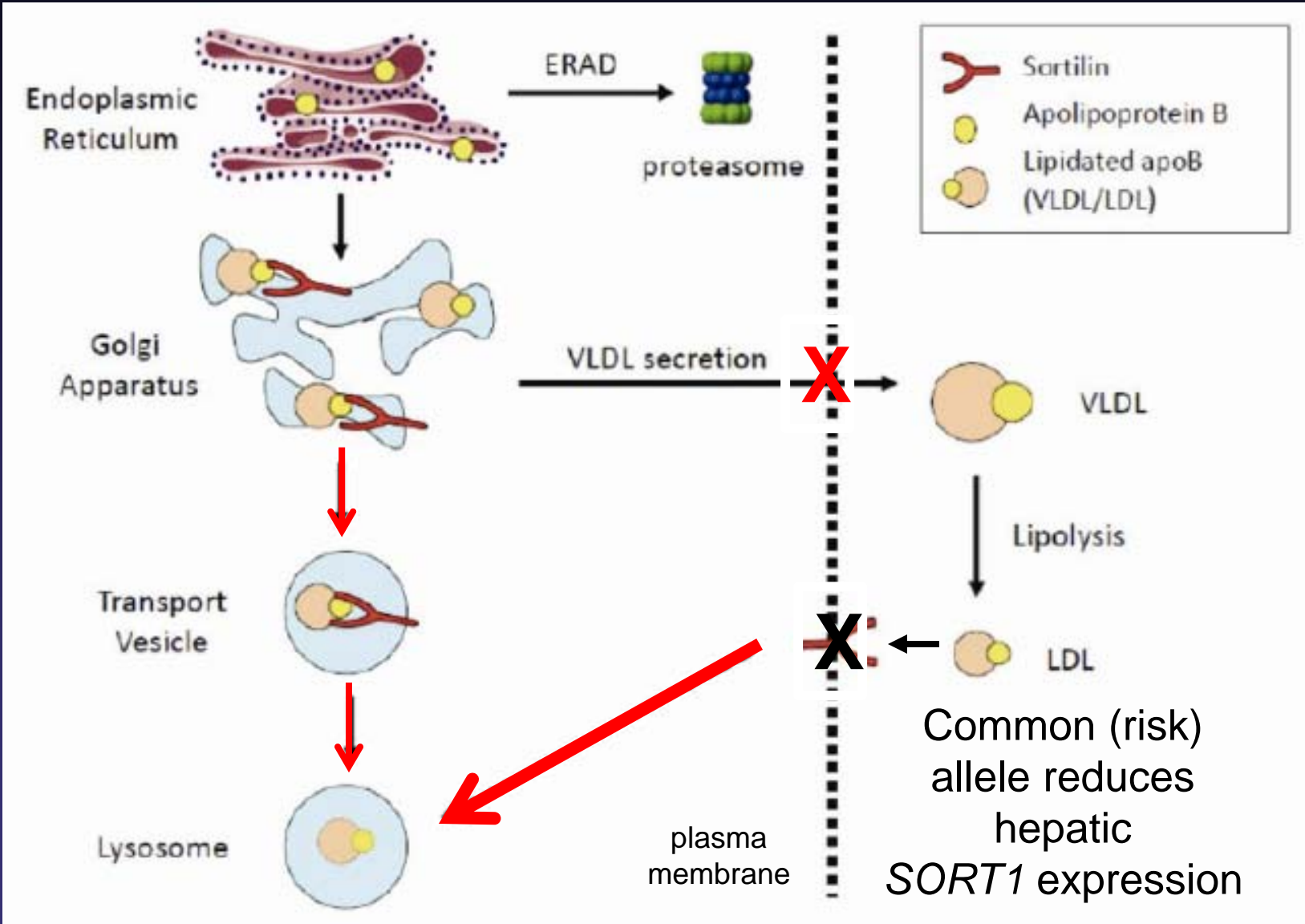


# Sortilin expression promotes LDL uptake in mice *in vivo*



Strong et al., *J Clin Invest* 122:2807, 2012

# Summary: Sortilin, the product of *SORT1*, reduces hepatic apoB secretion and increases hepatic LDL uptake





# And - SORT1, which can increase LDL uptake via sortilin, may reduce LDLR-mediated LDL uptake by increasing PCSK9 secretion

## Cell Metabolism



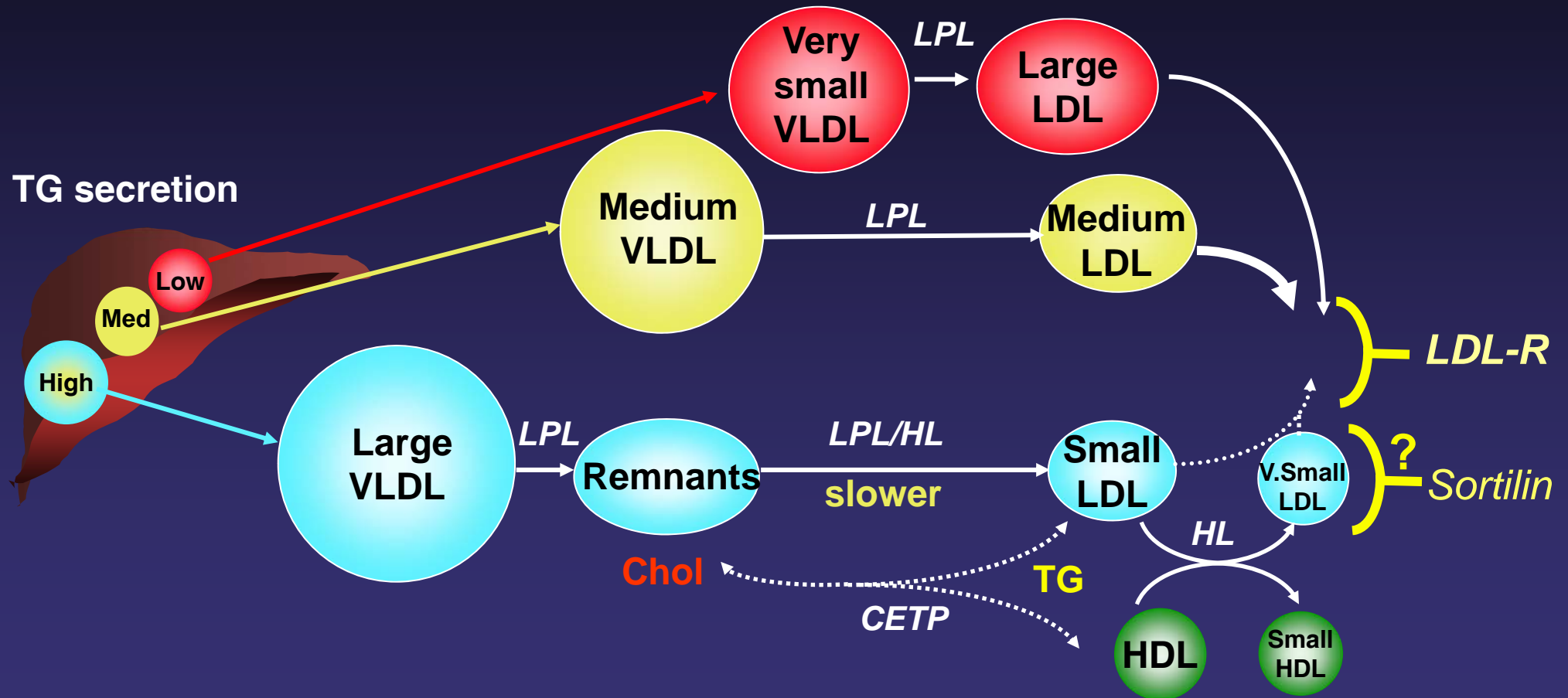
Volume 19, Issue 2, 4 February 2014, Pages 310–318

Short Article

### The Hypercholesterolemia-Risk Gene *SORT1* Facilitates PCSK9 Secretion

Camilla Gustafsen<sup>1</sup>, Mads Kjolby<sup>1, 2, 5</sup>, Mette Nyegaard<sup>3</sup>, Manuel Mattheisen<sup>4</sup>, Jesper Lundhede<sup>1</sup>, Henriette Buttenschøn<sup>3, 6</sup>, Ole Mors<sup>6, 7</sup>, Jacob F. Bentzon<sup>5</sup>, Peder Madsen<sup>1</sup>, Anders Nykjaer<sup>1, 2</sup>, Simon Glerup<sup>1, 2</sup>.  

# Two receptor clearance mechanisms for LDL particles



Adapted from Berneis and Krauss, *JLR* 43:1155, 2002

# Mendelian randomization indicates that LDL-C and TG, but not HDL-C are causative biomarkers for CAD

Predictor	Covariate	$\beta$	s.e.m.	$P$
<b>LDL-C</b>	–	0.41	0.039	$4 \times 10^{-20}$
	$\beta_{\text{HDL-C}}$	0.38	0.039	$9 \times 10^{-19}$
	$\beta_{\text{triglycerides}}$	0.40	0.034	$1 \times 10^{-23}$
	$\beta_{\text{HDL-C}}, \beta_{\text{triglycerides}}$	0.38	0.034	$2 \times 10^{-22}$
<b>HDL-C</b>	–	–0.18	0.052	0.0006
	$\beta_{\text{LDL-C}}$	–0.12	0.041	0.005
	$\beta_{\text{triglycerides}}$	–0.09	0.048	0.057
	$\beta_{\text{LDL-C}}, \beta_{\text{triglycerides}}$	–0.04	0.037	0.35
<b>TG</b>	–	0.44	0.074	$2 \times 10^{-8}$
	$\beta_{\text{LDL-C}}$	0.42	0.057	$5 \times 10^{-12}$
	$\beta_{\text{HDL-C}}$	0.36	0.074	$3 \times 10^{-6}$
	$\beta_{\text{LDL-C}}, \beta_{\text{HDL-C}}$	0.36	0.057	$1 \times 10^{-9}$

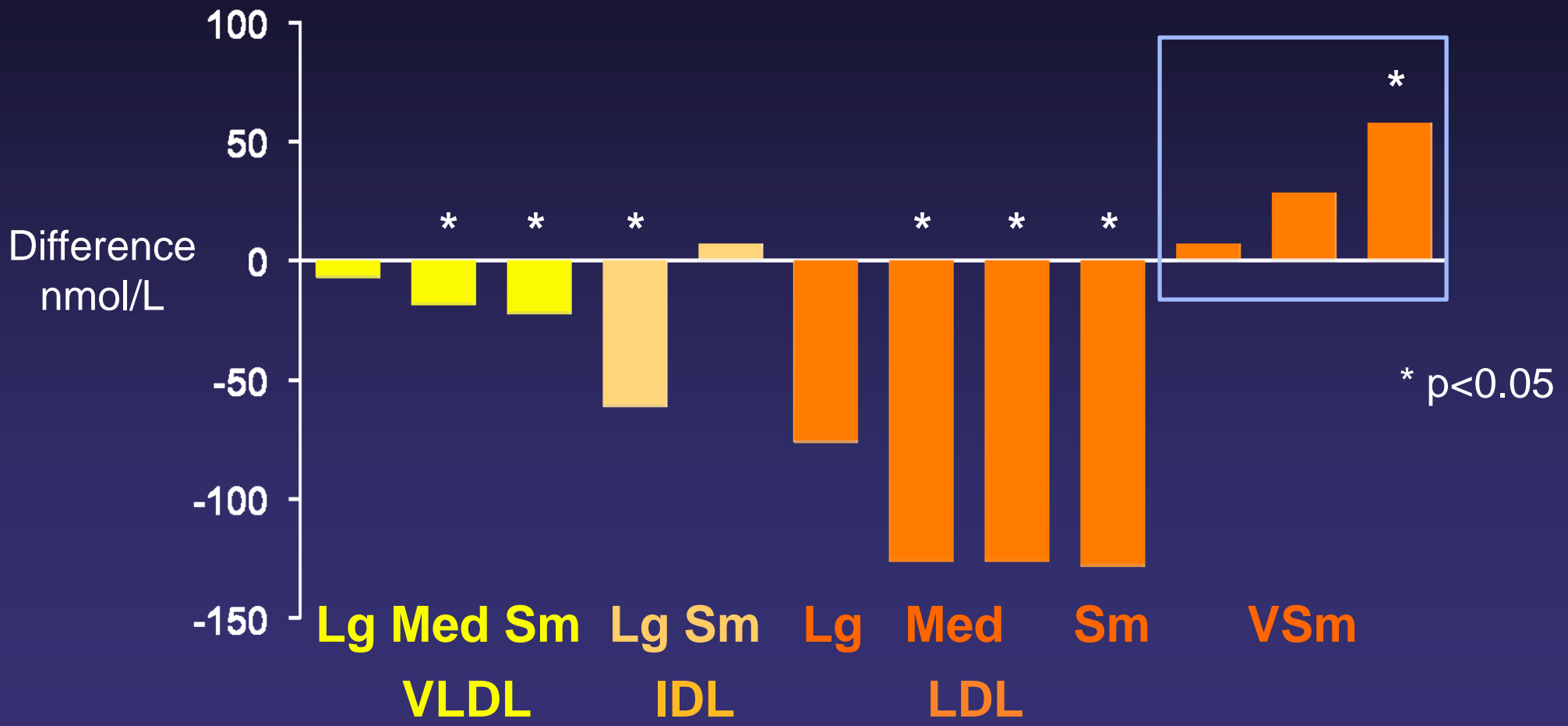
# Correlations between standard lipid measures and LDL particle fractions in subjects with insulin resistance (n=155)

LDL Particles	LDL-C	TG	ApoB	Non-HDL-C
Total	0.73	0.31	0.73	0.77
Large	0.51	-0.33	0.12	0.29
Medium	0.64	0.20	0.61	0.65
Small	0.44	0.49	0.67	0.61
Very Small	0.19	0.65	0.55	0.45

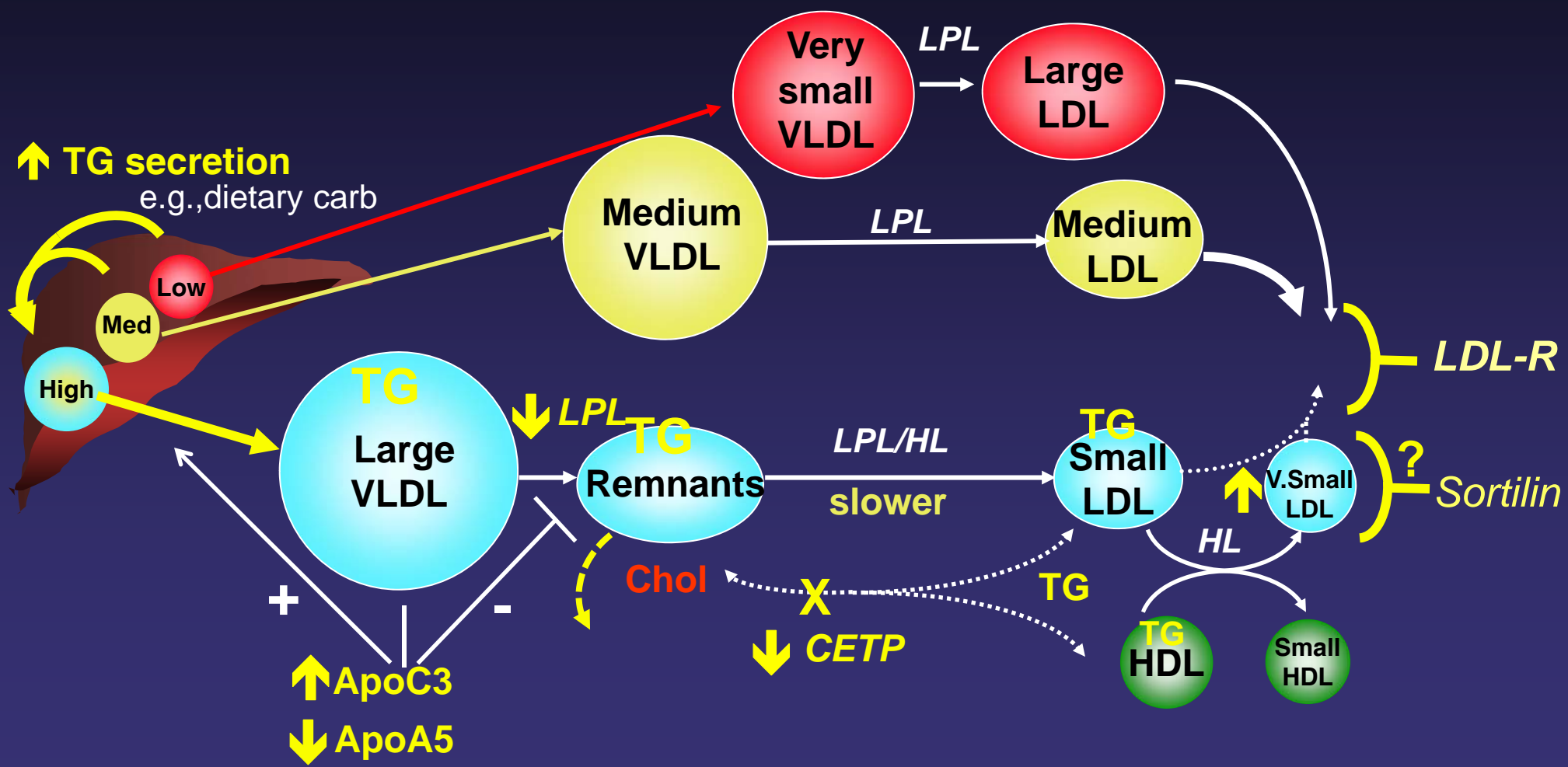
# A common TG-raising APOA5 allele is associated with increase in very small LDL 4

Healthy men with APOA5 haplotypes:			
	*1/1 (n=300)	*1/3 (n=49)	p
Trig	97.8±61.5	130.9±73.7	0.0005
HDL-Chol	49.9±12.3	47.5±12.7	ns
LDL-Chol	126.4±33.4	138.4±33.5	0.020
LDL 1	118.9±40.9	117.0±51.5	ns
LDL 2	103.0±37.5	109.5±34.9	ns
LDL 3	46.0±31.8	59.1±44.4	0.012
<b>LDL 4</b>	<b>9.5±9.0</b>	<b>15.7±17.8</b>	<b>0.0002</b>

# CETP inhibition (anacetrapib 150 mg/d vs. placebo) which causes TG-enrichment of apoB-containing particles, increases very small LDL



# Multiple mechanisms for TG enrichment of precursors increase production of small and very small LDL particles



Adapted from Berneis and Krauss, JLR 43:1155, 2002

## **Conclusions**

### **Sortilin – a new target for reduction of atherosclerosis risk?**

- **Very small LDL particles, which are strongly related to CHD risk, are produced from TG-rich precursors, are cleared poorly by LDL receptors, and are relatively resistant to statin lowering.**
- **Sortilin genetic variation is strongly related to both levels of very small LDL and CHD risk.**
- **Sortilin binds apoB and acts both to reduce hepatic apoB secretion by lysosomal catabolism, and to increase LDL clearance by acting as a cell surface receptor.**
- **Regulation of sortilin is as yet poorly understood, but may offer a new therapeutic approach to lower CHD risk.**