UCLA

UCLA Previously Published Works

Title

Transcription Factor MAFF (MAF Basic Leucine Zipper Transcription Factor F) Regulates an Atherosclerosis Relevant Network Connecting Inflammation and Cholesterol Metabolism.

Permalink

https://escholarship.org/uc/item/07d844ct

Journal

Circulation, 143(18)

Authors

von Scheidt, Moritz Zhao, Yuqi de Aguiar Vallim, Thomas et al.

Publication Date

2021-05-04

DOI

10.1161/CIRCULATIONAHA.120.050186

Peer reviewed

Published in final edited form as:

Circulation. 2021 May 04; 143(18): 1809–1823. doi:10.1161/CIRCULATIONAHA.120.050186.

The transcription factor MAFF regulates an atherosclerosis relevant network connecting inflammation and cholesterol metabolism

Moritz von Scheidt, MD^{#1,2}, Yuqi Zhao, PhD^{#3}, Thomas Q. de Aguiar Vallim, PhD^{4,5}, Nam Che, PhD^{4,6,7}, Michael Wierer, PhD⁸, Marcus M. Seldin, PhD⁹, Oscar Franzén, PhD¹⁰, Zeyneb Kurt, PhD¹¹, Shichao Pang, PhD¹, Dario Bongiovanni, MD^{2,12}, Masayuki Yamamoto, MD¹³, Peter A. Edwards, PhD^{4,5}, Arno Ruusalepp, MD^{14,15}, Jason C. Kovacic, MD¹⁶, Matthias Mann, PhD⁸, Johan L.M. Björkegren, PhD^{10,15,16}, Aldons J. Lusis, PhD^{4,6,7}, Xia Yang, PhD³, Heribert Schunkert, MD^{1,2}

¹Department of Cardiology, Deutsches Herzzentrum München, Technische Universität München, Munich, Germany

²Deutsches Zentrum für Herz- und Kreislauferkrankungen (DZHK), Partner Site Munich Heart Alliance, Munich, Germany

³Department of Integrative Biology and Physiology, Institute for Quantitative and Computational Biosciences (QCBio), University of California, Los Angeles, Los Angeles, California, USA

⁴Departments of Medicine, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, California, USA

⁵Department of Biological Chemistry, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, California, USA

⁶Departments of Microbiology, Immunology and Molecular Genetics, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, California, USA

⁷Department of Human Genetics, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, California, United States of America

⁸Department of Proteomics and Signal Transduction, Max-Planck Institute of Biochemistry, Martinsried, Germany

⁹Department of Biological Chemistry and Center for Epigenetics and Metabolism, University of California, Irvine, California, USA

¹⁰Integrated Cardio Metabolic Centre, Karolinska Institutet, Novum, Huddinge, Sweden

Corresponding author Dr. Dr. med. Moritz von Scheidt, MD, Deutsches Herzzentrum München (German Heart Center Munich), Klinik für Herz- und Kreislauferkrankungen, Lazarettstr. 36, D-80636 München, Telephone: +49-89-1218-2849 Fax: +49-89-1218-4013, moritz.scheidt@tum.de; Prof. Dr. med. Heribert Schunkert, MD; Deutsches Herzzentrum München (German Heart Center Munich), Klinik für Herz- und Kreislauferkrankungen, Lazarettstr. 36, D-80636 München, Telephone: +49-89-1218-4073 Fax: +49-89-1218-4013, schunkert@dhm.mhn.de. von Scheidt – Identification of MAFF as a regulator of the LDLR

Disclosures

None.

¹¹Department of Computer and Information Sciences, Northumbria University, Newcastle upon Tyne, United Kingdom.

¹²Department of Internal Medicine I, School of Medicine, University hospital rechts der Isar, Technical University of Munich, Germany

¹³Department of Integrative Genomics, Tohoku Medical Megabank Organization, Tohoku University, Sendai, Japan

¹⁴Department of Cardiac Surgery, Tartu University Hospital, Tartu, Estonia

¹⁵Clinical Gene Networks AB, Stockholm, Sweden

¹⁶Cardiovascular Research Center, Icahn School of Medicine at Mount Sinai, New York, New York, USA

Abstract

Background — Coronary artery disease (CAD) is a multifactorial condition with both genetic and exogenous causes. The contribution of tissue specific functional networks to the development of atherosclerosis remains largely unclear. The aim of this study was to identify and characterise central regulators and networks leading to atherosclerosis.

Methods —Based on several hundred genes known to affect atherosclerosis risk in mouse (as demonstrated in knock-out models) and human (as shown by genome-wide association studies (GWAS)) liver gene regulatory networks were modeled. The hierarchical order and regulatory directions of genes within the network were based on Bayesian prediction models as well as experimental studies including chromatin immunoprecipitation DNA-Sequencing (ChIP-Seq), ChIP mass spectrometry (ChIP-MS), overexpression, siRNA knockdown in mouse and human liver cells, and knockout mouse experiments. Bioinformatics and correlation analyses were used to clarify associations between central genes and CAD phenotypes in both human and mouse.

Results — The transcription factor *MAFF* interacted as a key driver of a liver network with three human genes at CAD GWAS loci and eleven atherosclerotic murine genes. Most importantly, expression levels of the low-density lipoprotein receptor (*LDLR*) gene correlated with *MAFF* in 600 CAD patients undergoing bypass surgery (STARNET) and a hybrid mouse diversity panel involving 105 different inbred mouse strains. Molecular mechanisms of *MAFF* were tested under non-inflammatory conditions showing a positive correlation between *MAFF* and *LDLR* in vitro and in vivo. Interestingly, after LPS stimulation (inflammatory conditions) an inverse correlation between *MAFF* and *LDLR* in vitro and in vivo was observed. ChIP-MS revealed that the human CAD GWAS candidate *BACH1* assists *MAFF* in the presence of LPS stimulation with respective heterodimers binding at the MAF recognition element (MARE) of the *LDLR* promoter to transcriptionally downregulate *LDLR* expression.

Conclusion — The transcription factor *MAFF* was identified as a novel central regulator of an atherosclerosis/CAD relevant liver network. *MAFF* triggered context specific expression of *LDLR* and other genes known to affect CAD risk. Our results suggest that *MAFF* is a missing link between inflammation, lipid and lipoprotein metabolism and a possible treatment target.

[#] These authors contributed equally to this work.

Keywords

Atherosclerosis; BACH1; coronary artery disease; inflammation; key driver analysis; LDLR; lipid metabolism; MAFF; network modeling

Introduction

Coronary artery disease (CAD), a globally leading cause of death, ^{1, 2} is brought about by atherosclerosis of the epicardial arteries, which is prompted by a multifactorial interplay of genetic and lifestyle factors.³ From a functional point of view, the mechanisms which result in CAD can be grouped into different pathways or networks.⁴⁻⁷ A systematic analysis of genes identified by genome-wide association studies (GWAS) of CAD patients and genetic mouse models of atherosclerosis revealed a strong concordance of relevant networks and pathways for atherosclerosis between the two species. 8 However, characterization and regulation of these functional networks is far from being complete. 9 Central mechanisms for atherosclerosis are the disturbance of cholesterol metabolism and inflammation, which – like CAD – have multifactorial etiologies. ¹⁰⁻¹² Clinical as well as epidemiological trials and Mendelian randomization studies confirmed that elevation of plasma cholesterol and increased inflammation promote the progression of atherosclerosis and CAD¹³⁻¹⁶, whereas reduction of plasma cholesterol levels and inflammatory processes lowered significantly the subsequent risk of cardiovascular events. 10, 17-19 Both, cholesterol metabolism and inflammatory responses are largely orchestrated in the liver. Therefore, the analysis focused on hepatic tissue to further elucidate regulatory gene networks involved in atherosclerosis.

Methods

Data used in this study are available in persistent repositories. Human data from STARNET are accessible through the Database of Genotypes and Phenotypes (dbGAP). Mouse data from HMDP are accessible through the Mouse Phenome Database (MPD). All experimental data supporting the findings of this study can be requested from qualified researchers at the German Heart Center Munich from the corresponding author. An expanded and detailed materials and methods section is provided in the supplement section (Expanded Methods in the Supplement). Human and mouse candidate genes were retrieved from the literature. 8, 20-30 Gene-gene relations of atherosclerotic genes were retrieved utilising Bayesian gene regulatory networks derived from previous expression analyses on human and mouse tissues as described. 31-36 The key driver analysis (KDA) was based on an established algorithm to identify central regulators of atherosclerosis relevant networks. 31, 37-40 ChIP-Seq experiments of MAFF on human HepG2 cells were performed as described. 41-44 Binding capacities of MAFF and heterodimerisation partners were confirmed using ChIP-Seq data. siRNA experiments targeting liver genes were performed in cultured AML12 murine and Hep3b human liver cells. *Maff* overexpression experiments were performed in AML12 cells. ChIP-MS was performed to identify MAFF binding partners. Molecular docking of heterodimerisation partners was assessed based on lowest free energy. 45-48 The STARNET study was conducted in accordance with the provisions of the Declaration of Helsinki and the International Conference on Harmonization Good Clinical Practice guidelines. The

protocol was approved by an independent ethics committee and all patients provided written informed consent. All animal studies in mice followed the guidelines of the Animal Care and Use Committees of the University of California Los Angeles. The approach is graphically summarised in Figure 1.

Statistical Analysis

Results are shown as means \pm SEM. An unpaired two-tailed t test was applied for comparison of two groups. For three or more groups, data were compared by one-way ANOVA. Bonferroni correction was applied for multiple comparison. Results with P < 0.05 were considered to be statistically significant. Fisher's exact test was used for comparing categorical data. All statistical analysis involved using GraphPad Prism v9.0.0.

Results

Bioinformatics identification of the MAFF network

The bioinformatics approach was based on a comprehensive search for mouse genes that have been previously found to affect the manifestation of atherosclerosis in genetically engineered mouse models as well as human chromosomal loci significantly associated with CAD in GWAS and the respective annotation of responsible genes at these loci. 20-30 Specifically, 244 human CAD GWAS candidate genes (Table I in the Supplement) and 827 mouse atherosclerosis genes (Table II in the Supplement) were used to model gene regulatory networks using a key driver analysis. 49 Liver Bayesian network models composed from multiple published genetic and gene expression datasets were constructed to retrieve gene-gene regulatory relationships in each dataset, 31-36 followed by summarising the individual liver networks into a union liver Bayesian network (Expanded Methods in the Supplement). The mouse atherosclerosis genes and human CAD GWAS genes were then mapped separately to the liver Bayesian network model to retrieve subnetworks (specific parts of the global Bayesian liver network) of disease genes and to predict key regulatory genes in these subnetworks. Several subnetworks enriched for known atherosclerosis or CAD associated genes were identified. Figure 2 displays the interconnected top 10 liver subnetworks containing mouse atherosclerosis or human CAD genes. Table 1 lists these subnetworks in mouse and human ranked by fold enrichment of disease genes in each subnetwork. Based on mouse atherosclerosis genes, the top five key driver genes of the regulatory networks were Maff, II1b, Cc17, Atf3 and Cxc110. With the exception of Maff these genes have already been shown to have significant effects on atherosclerosis in mouse models, which may serve as positive control for this approach.⁵⁰⁻⁵³ Regarding the human CAD genes, the top ranked key driver gene ALDH2 is known to reside at a CAD GWAS locus. The key driver SERPINE1, which is also part of the MAFF network, shares several atherosclerosis relevant genes with MAFF.

The top ranked liver subnetwork, over-represented with both mouse atherosclerosis and human CAD candidate genes, was predicted to be orchestrated by *MAFF/Maff*, which interacts with 24 atherosclerosis related genes. A number of these genes are known to be associated with lipid metabolism and others with inflammation, and eleven genes (*Atf3*, *Epha2*, *Gdf15*, *Ldlr*, *Nr4a3*, *Phlda1*, *Serpine1*, *Tnfaip3*, *Tnfrsf12a*, *Trib1* and *Zfp36*) were

found to affect atherosclerosis in genetically engineered mouse models.⁵³⁻⁶³ On the human side, the *MAFF* interacting genes *LDLR*, *MCL1* and *TRIB1* reside at genome-wide significant CAD GWAS loci.

MAFF is a member of the MAF family, which consists of large and small MAF proteins. Large MAFs possess a transactivation domain and modulate regulatory processes. Small MAFs are lacking a transactivation domain and are therefore classified as transcriptional repressors. AMFF, a small MAF, is a basic region leucine zipper (bZIP)-type transcription factor composed of a DNA binding domain and a leucine zipper domain necessary for dimerisation. MAFF can mediate both transcriptional activation or repression by forming heterodimers with other bZIP transcription factors. But the precise mechanism by which MAFF forms specific dimers, and therefore induces or represses specific target genes is currently not well established.

Prediction of regulatory directionality in the MAFF/Maff network

Individual liver Bayesian network models were constructed using multiple genetic and gene expression datasets from mouse and human studies and combined the networks into one union liver network (Expanded Methods in the Supplement). As the directionality between two genes in a network might differ across studies due to different environmental perturbations and physiological states, the dominant direction that is supported by more datasets was taken as the directionality between two genes (Figure 2).

Based on this data *ATF3*, *TRIB1*, *SERPINE1*, *FOSL2*, and *ZFP36* were predicted to be upstream of *MAFF*, i.e. these genes appear to affect regulation of the transcription factor. All other genes of interest in the context of atherosclerosis (*ARID5B*, *CLCF1*, *CREM*, *CXCL8*, *DUSP5*, *EPHA2*, *FOXP1*, *GDF15*, *LDLR*, *MCL1*, *NAV2*, *NR4A3*, *PHLDA1*, *PPPLRL15A*, *SLC20A1*, *TGFBI*, *TNFAIP3*, *TNFRSF12A* and *TSC22D1*) were predicted to be downstream of *MAFF* and therefore likely to be regulated by the transcription factor *MAFF*.

Confirmation of Maff coexpression with lipid metabolism and inflammation processes in mouse atherosclerosis models

The Hybrid Mouse Diversity Panel (HMDP) is a set of 105 different inbred mouse strains, which were studied under different dietary conditions and different genetic backgrounds. ^{65, 66} Ldl and Vldl cholesterol levels increased from chow diet over high-fat diet to the atherogenic transgenic mice on high-fat diet (26mg/dl vs. 42mg/dl, vs. 92mg/dl; p<0.001). In transgenic mice inflammation associated factors like *II1b*, *II6* and *Tnfa* were also upregulated.

On regular chow (Pearson's r=0.30, p=9.88e-07) and high-fat diet (Pearson's r=0.35, p=1.78e-07) positive correlations between *Maff* and *Ldlr* were detected. By contrast, in mice on high-fat diet with transgenic expression of human APOE-Leiden and cholesteryl ester transfer protein (*CETP*), causing increased hyperlipidemia and inflammation, significant inverse correlations between *Maff* and *Ldlr* were observed (Pearson's r=-0.27, p=4.65e-05). Correlations between *Maff* and its network interaction partners are summarised in Table III in the Supplement. Also, associations between *Maff* and various molecular and biochemical phenotypes were studied, showing significant correlations with atherosclerosis related traits

under non-inflammatory conditions (mice on chow and high-fat diet): total cholesterol (Pearson's r=0.31, p=7.90e-4), unesterified cholesterol (Pearson's r=0.38, p=2.22e-3), body weight (Pearson's r=0.32, p=1.54e-3); and inflammatory conditions (atherogenic): aortic lesion area (as a measure of atherosclerotic lesions) (Pearson's r=-0.37, p=1.34e-3), Il6levels (element of the inflammasome axis; Pearson's r=0.45, p=5.24e-6), Tnfa-levels (as a measure of inflammation; Pearson's r=0.33, p=1.23e-3) and Mcp1-levels (recruiting monocytes, memory T cells and dendritic cells to the sites of inflammation; Pearson's r=0.33, p=1.09e-3). Furthermore, the density of absolute values of Pearson correlation efficient r was assessed between gene pairs of the Maff network as a parameter of network gene coexpression or connection activity and the network coexpression activity between HMDP panels (chow vs. high fat vs. atherogenic) was compared. Overall, significantly increased gene-gene coexpression from chow diet over high-fat diet to the transgenic group was identified (p<0.01) (Figure I in the Supplement). The gradual elevation of coexpression activity of the Maff network along with the accompanying increases in cholesterol levels from low-atherogenic to high-atherogenic conditions suggests a context-specific role of Maff in the regulation of the liver gene network and LDL cholesterol.

Confirmation of MAFF coexpression with CAD and related processes in human liver

To study the effects of *MAFF* in humans with CAD phenotype data from the Stockholm-Tartu Atherosclerosis Reverse Network Engineering Task (**STARNET**) were used. STARNET provides RNA-sequencing data from different tissues of 600 CAD patients undergoing coronary artery bypass graft (CABG) surgery. All patients gave written informed consent to donate tissue samples prior to CABG surgery. Based on liver samples in STARNET, a strong positive correlation between expression levels of *MAFF* and *LDLR* (Pearson's r=0.57, p=4.7e-49) was detected (Figure 3a). Studying the *MAFF* network expression values, 22 out of the 24 predicted neighbouring genes were found to be significantly correlated to *MAFF* expression (Table I in the Supplement).

MAFF expression was also associated with several cardiometabolic traits in the STARNET database. Importantly, MAFF expression was inversely associated with the SYNTAX-Score I – a measure of CAD severity (Pearson's r=–0.1; p<0.01). Weight (Pearson's r=–0.19; p=4.4e-6) and BMI (Pearson's r=–0.15; p=2.90e-4) were found to be significantly inversely correlated to MAFF expression, whereas MAFF expression was positively correlated with hsCRP (Pearson's r=0.1; p<0.01). Notably, MAFF expression values were higher in women (p=5.5e-3) (Figure 3b), such that it might be of interest that 9 MAFF interacting genes in Table III in the Supplement (ATF3, EPHA2, FOXP1, GDF15, SERPINE1, SLC20A1, TGFBI, TNFRSF12A and ZFP36) have been recognised as sexually dimorphic in mice. 34 We note that the phenotypic correlations between MAFF and phenotypes other than CAD were weak in this human CAD cohort compared to the genetically defined mouse populations. This could be explained by low phenotypic variability or medication in the CAD cohort.

Summarising the results from the STARNET cohort, lower levels of *MAFF* expression were correlated with I) lower levels of *LDLR* expression (less capacity to lower circulating LDL cholesterol), II) higher risk for complex and severe CAD, and III) male gender.

Coexpedia⁶⁷, an open tool for exploring biomedical hypotheses via coexpression analyses, revealed in 467 different studies by gene set analysis the most relevant biological correlates of *MAFF* to be *LDLR* mediated cholesterol biosynthetic process (p=1.40e-23), negative regulation of apoptotic process (p=8.47e-7), and inflammatory response (p=3.28e-5). Further, gene set analysis of disease ontology highlighted several CAD relevant traits and risk factors. *MAFF* expression was associated with arthritis (p=1.86e-20), ischemia (p=7.76e-12), myocardial infarction (p=1.37e-11), atherosclerosis (p=4.14e-10) and coronary heart disease (p=1.74e-8). On risk factor level hypertension (p=3.15e-12), obesity (p=9.38e-12), diabetes mellitus (p=1.44e-9), kidney disease (p=9.49e-9) and hypercholesterolemia (p=7.32e-5) showed significant association with *MAFF*.

In vitro validation of MAFF/Maff regulatory capacities

To confirm the role of *MAFF* orchestrating the predicted regulatory liver network of CAD genes Hep3b and AML12 were studied representing human and mouse hepatocyte cell lines, respectively. siRNA-knockdown (KD) of *MAFF* in human cells and *Maff* in mouse cells showed consistent, significant reductions of the *LDLR/Ldlr* expression (p<0.001) (Figure 4a +b) (Expanded Methods in the Supplement), as well as consistent and significant perturbations of other neighbouring genes. *MAFF/Maff*-KD caused significant upregulation of *EPHA2/Epha2*, *GDF15/Gdf15* and *TNFAIP3/Tnfaip3*, in contrast to *LDLR/Ldlr* downregulation in both species. These results are in line with the predictions of the Bayesian networks in that these genes are downstream of *MAFF/Maff* (Figure II in the Supplement).

Knockdown of *MAFF/Maff* did not perturb expression levels of *Trib1* in AML12 cells and only slightly decreased expression values in human Hep3b cells. By contrast, siRNA knockdown of *TRIB1/Trib1* led to decreased levels of *MAFF/Maff* in both cell lines (p<0.05), suggesting that the known CAD risk gene *TRIB1* might be upstream acting as a regulator of *MAFF/Maff* expression levels, which was consistent with the Bayesian modeling.

Further, the effect of *Maff* overexpression was investigated using plasmid DNA transfection in mouse AML12 cells and revealed a significant upregulation of the *Ldlr* expression (p=0.002) (Figure 4c). Based on these silencing and overexpression experiments in the absence of inflammatory stimuli, *Maff* and *Ldlr* expression was found to be positively correlated *in vitro*.

Ldlr reduction in Maff-/- mouse models

To explore *in vivo* the effects of *MAFF* on the mRNA expression (in the following referred to as expression) levels of *Ldlr*, an inbred *Maff*—/— mouse model on C57BL/6-background was employed. Homozygous null mice are viable and fertile and show no obvious functional deficiencies. Liver samples from *Maff*—/—, *Maff*+/— and wildtype (WT) mice, all fed with chow diet, were collected. Expectedly, circulating cholesterol levels were low in mice lacking a pro-atherosclerotic background (e.g. Apoe—/—, Ldlr—/—). *Maff*—/— mice showed no significant differences on serum cholesterol levels compared to WT mice. Significant decrease of *Ldlr* expression levels in *Maff*—/— mice was observed compared to WT mice (p=0.028) (Figure 4d) and lower amounts of *Ldlr* protein were confirmed by Western blot

analysis in *Maff*=/- compared to WT mice (p=0.010). This is in line with the *in vitro* findings. There was no significant difference between the groups and heterozygous *Maff* mice.

Context specific influence on MAFF and LDLR in the presence of LPS stimulation

Maff has been described to be a context specific transcription factor. ⁶⁴ Pro-inflammatory lipopolysaccharide (LPS) was used intraperitoneally as a strong inductor of acute systemic inflammation in male Maff WT and knockout (KO) mice. A significant induction of Maff expression levels (p<0.001) was detected in liver tissue of WT animals six hours after LPS treatment. Maff mRNA was not detectable in Maff-/- mice. In addition to changes in Maff levels, there was a significant decrease of *Ldlr* expression levels in the WT group (p<0.001), but no significant change in Maff-/- mice, suggesting that Maff and its network are sensitive to inflammatory processes and that Maff is involved in inflammation induced suppression of Ldlr (Figure 4e-f). Circulating Ldl/Vldl cholesterol levels were nonsignificantly elevated in Maff WT mice compared to LPS treated Maff WT mice (66.1mg/dl vs. 61.4mg/dl, p=0.24) six hours after LPS injection. Liver Maff expression and plasma Ldl cholesterol was found to be non-significant negatively correlated in MaffWT mice (Pearson r –0.65, p=0.08), whereas a non-significant positive correlation was found in LPS treated mice (Pearson r 0.33, p=0.47). Further, expression of the pro-inflammatory cytokine *Tnfa* was assessed in plasma of MaffWT and Maff-/- mice with and without LPS treatment. Tnfa expression was significantly upregulated in MaffWT and Maff-/- mice after LPS stimulation (p<0.001). However, comparing *Tnfa* expression between both groups 6 hours after LPS stimulation, upregulation of *Tnfa* expression was found to be significantly increased in MaffWT mice (p=0.048) (Figure 4g). Under inflammatory conditions – using LPS stimulation – Maff and Ldlr expression was found to be inversely correlated in Maff WT mice.

Identification of the regulatory MAFF binding site

Next, the regulatory role of *MAFF* as a transcription factor was investigated in the network. Potential binding sites of *MAFF* were assessed using Chromatin-Immuno-Precipitation-DNA-Sequencing (ChIP-Seq) data on human HepG2 cells as studied in the ENCODE project. ⁶⁸ Computational analysis revealed a Leucine-Zipper binding motif to be enriched in binding elements of gene members of the *MAFF* network (20 of 24 genes, Fisher's exact test, fold change=4.03, p=3.2e-34). Moreover, multiple *MAFF* binding sites were identified in the *LDLR* gene, including the promoter region (Figure 5). These results suggest that MAFF has the potential to bind to the promoter regions of the network member genes and regulate their expression.

MAFF binding partners in homeostasis and inflammation

To further elucidate the role of *MAFF/Maff* and its binding partners in homeostasis and inflammation Chromatin Immunoprecipitation followed by mass spectrometry (ChIP-MS) was performed in Hep3b and AML12 liver cells. Both cell lines were treated with either vehicle PBS or LPS (10ng/ml) for 48h with and without *MAFF/Maff* siRNA knockdown.

MAFF/Maff siRNA knockdown and LPS stimulation identified *BACH1/Bach1* as relevant transcriptional interaction partner of *MAFF/Maff* (Figure 6). Specifically, LPS induction determined *BACH1/Bach1* as a robust *MAFF/Maff* interactor in both cell lines. On expression level, LPS stimulation led to a significant increase of *BACH1/Bach1* expression in human Hep3b (p=0.006) and mouse AML12 cells (p=0.001) compared to controls (vehicle) (Figure 7a+b). *BACH1/Bach1* is a known repressor of the MARE – also known as stress-responsive element – and downregulates transcription (Figure 8).⁶⁹ Of note, *BACH1* is a human CAD GWAS candidate gene and the underlying mechanism of how *BACH1* contributes to CAD is unclear.⁷⁰

Also the heterochromatin markers *Trim28* (*Kap1*) and *Cbx3*, as well as the RNA related factors *Dhx40*, *Srrm1* and *Srsf2/5* were enriched in *Maff* ChIP-MS of LPS stimulated AML12 mouse liver cells. A clear reduction of the enrichment signal in response to *Maff* knockdown indicated that these proteins are specific *Maff* interactors (Figure 6c+d). *Maff* interactors and their individual enrichment patterns under different conditions are summarised after normalisation in Figure 7c.

Further, it was studied if activating transcription factors bind with *MAFF/Maff* under basal conditions and in the presence of LPS stimulation in both cell lines. No enrichment of activating transcription factors was identified comparing both conditions.

Verification of MAFF-BACH1 heterodimers binding at the LDLR promotor

Based on the findings of the ChIP-MS approach in human Hep3b cells, human ChIP-Seq data was used to validate the binding capacities of the *MAFF* heterodimerisation partners at the *LDLR* promoter. Three dimensional structures of heterodimers were modeled (Expanded Methods in the Supplement) and confirmed the preferred binding of the *MAFF-BACH1* complex at the *LDLR* promoter as measured by the lowest free energy (p=9.5e-05) (Figure III in the Supplement).

Discussion

Gene regulatory network modelling based on hundreds of genes known to affect atherosclerosis retrieved a dense liver network highly enriched for mouse atherosclerosis and human CAD GWAS candidate genes. Notably, the network – centered at the transcription factor MAFF – contains LDLR and inflammatory genes, which are all implicated to play causal roles in coronary artery disease. Prediction by Bayesian models and experimental studies clarified the hierarchical order and regulatory direction of the genes within the network as well as the central role of MAFF as a regulating element.

Under non-inflammatory conditions a positive correlation between *MAFF* and *LDLR* expression *in vitro* and *in vivo* was identified, whereas inflammatory conditions led to inverse correlation between *MAFF* and *LDLR* expression. Most importantly, after acute induction of systemic inflammation via LPS stimulation, we observed that binding of *MAFF-BACH1* heterodimers at the MARE in the *LDLR* promoter region significantly downregulated *LDLR* expression (Figure 8).

BACH1 resides at a genome-wide significant CAD GWAS locus and the underlying mechanism how *BACH1* contributes to CAD progression is hitherto unknown. ⁷⁰ Based on pathway analyses *BACH1* has been described to be involved in vascular remodeling, proliferation and transcriptional regulation. ⁷¹ We speculate that *BACH1* promotes atherosclerosis based on the downregulation of the *LDLR* via *MAFF*.

The transcriptome studies in mouse models and human samples as well as *in vitro* and *in vivo MAFF* perturbation experiments provided evidence supporting a context-specific role of *MAFF* in the regulation of *LDLR* as well as other genes. *In vivo* data from STARNET, including liver tissue samples from a large set of CAD patients undergoing bypass surgery showed a significant positive correlation between expression of the transcription factor *MAFF* and the *LDLR*. Lower expression values of *MAFF* were found in men and were significantly correlated with more complex and severe coronary artery lesions as measured by the Syntax Score I. Likewise, a positive correlation between *Maff* and *Ldlr* was found in mice on chow and high-fat diets in HMDP. In mice with transgenic expression of human *APOE-Leiden* and *CETP*, which display a significant increase of inflammatory cytokines, showed in contrast a significant inverse correlation between *Maff* and the *Ldlr*. These results support a context-specific relationship between the expression of *Maff* and *Ldlr*.

Substantial convergence of tissue-specific regulatory mechanisms was observed in the *MAFF/Maff* liver specific network between human and mouse. The finding that knockdown of *Maff in vitro* in a mouse hepatocyte cell line led to reduced expression of the *Ldlr* was validated in a human *in vitro* model, highlighting similar interaction patterns between *MAFF* and *LDLR* in human and mouse. Besides *LDLR*, the other experimentally examined neighbouring genes within the *MAFF* network (*EPHA2, GDF15, TNFAIP3, and TRIB1*) also showed convergent regulation in human and mouse liver cell lines. The *in vivo* data in *Maff* knockout mice strongly supported this assumption. Additionally, the presence of MAFF binding motifs in the *LDLR* gene region and 19 out of the overall 24 additional predicted neighbouring genes using human ChIP-Seq data were identified. However, under baseline conditions it was not achievable to identify the molecular partners effecting *LDLR/Ldlr* downregulation following *MAFF/Maff* silencing, in contrast to inflammatory conditions. Nevertheless, *Maff* overexpression in AML12 cells led to significant upregulation of the *Ldlr* under non-inflammatory conditions.

MAFF was also found to be sensitive to environmental stimuli (e.g. high-fat diet, inflammation). Treatment with lipopolysaccharides markedly increased inflammatory cytokine levels in the liver of wildtype mice, as measured by II1b, II6 and Tnfa levels and led to an excessive upregulation of Maff that was accompanied by reduced Ldlr expression. The same pattern of elevated inflammatory mediators and inverse correlation of Maff and Ldlr expression levels has been identified in the HMDP in mice with transgenic implementation of human APOE-Leiden and CETP. This is in line with findings in the literature, that cholesterol accumulation in cells of genetically modified mouse models triggers the inflammasome and results in elevated release of inflammatory mediators such as II1b, II6 and Tnfa.⁷²

Indeed, inflammation and perturbation of cholesterol levels coincide in several human conditions, including rheumatoid arthritis (RA), which goes along with an increased risk of cardiovascular events. 73-77 Recently, Fernández-Ortiz and colleagues studied lipid metabolism in different stages of RA disease activity and observed that total cholesterol, LDL cholesterol and oxidized LDL cholesterol were slightly elevated in the low disease activity group, whereas high disease activity individuals showed distinct reduction of total cholesterol, HDL cholesterol and LDL cholesterol along a drastic increase of proatherosclerotic oxidized LDL cholesterol. These alterations are mirrored by a gene set analysis of disease ontology 67 focused on *MAFF* expression revealing its association with arthritis, LDLR expression, atherosclerosis and myocardial infarction risk. Thus, our offer an explanation on that *MAFF* could be a link between inflammation, lipid and lipoprotein metabolism and cardiovascular disease.

Limitations

Bioinformatics analyses on key drivers of liver gene expression may be further enriched in the future as the numbers of loci showing significant signals in human CAD GWAS and mouse candidate genes will increase within the next years. However, our previous network modeling of CAD GWAS loci demonstrated that network predictions are relatively insensitive to changes in the number of loci included, supporting the robustness of the overall patterns of disease pathways and networks.⁷⁹ In this study, a MAFF centered regulatory network was revealed involving multiple atherosclerosis related genes in mouse and human, with profound effects of MAFF on downstream targets, and its regulation by inflammatory mediators. The molecular mechanisms affecting MAFF expression as well as MAFF downstream targets remain inadequately understood. Specifically, the molecular partners of MAFF executing transcriptional activation of LDLR under non-inflammatory conditions remain to be elusive. By contrast, BACH1 was identified to physically interact with MAFF in the presence of LPS stimulation. While we provided multiple layers of evidence placing the transcription factor MAFF in the center of a top ranked liver-specific key-driver network linking lipid metabolism and inflammation, further investigations should aim to characterise the physical interaction between MAFF and the LDLR promoter. Moreover, it will be of relevance to identify downstream mechanisms relevant for cardiovascular risk. In this respect our findings may be a starting point for a better elucidation of interactions between inflammatory processes, hypercholesterolemia and CAD risk.

In conclusion

The transcription factor *MAFF* is the key driver of a liver specific network which includes a large number of genes known to affect atherosclerosis in mouse and human. Depending on the underlying context (non-inflammatory vs. inflammatory) *MAFF* is able to mediate activation or repression of gene expression. ^{80, 81} Under non-inflammatory conditions *MAFF* appears to induce *LDLR* expression. In the presence of LPS stimulation, heterodimerisation of *MAFF* with the CAD GWAS candidate and transcriptional regulator *BACHI*⁸² binding at the MARE in the promoter region of the *LDLR* led to downregulation of *LDLR* expression. It appears that both, the degree of inflammation (none vs. excessive) and expression values

of *MAFF* modulate these processes. Our experiments in different model systems and human samples demonstrate a direct connection between *MAFF* and the *LDLR* and also revealed significant changes in this relationship under inflammatory conditions (Figure 8).

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

Acknowledgement

MVS drafted the manuscript and performed the literature search of mouse genes. YZ performed the bioinformatics modeling. *In vitro* experiments have been performed by MVS, NC and TV. TV contributed with KO mouse models. MY and PAE supported the Maff—/— mouse model. MW and MM supported the ChIP-MS approach. AJL provided *in vivo* data from HMDP. OF, AR, JK and JB contributed with human data from STARNET. SP performed the MAFF binding approach. XY supervised the bioinformatics analysis. All authors participated in the analyses of the data and critically reviewed the manuscript, written by MVS, YZ, AJL, XY and HS.

Funding Sources

MVS reported funding by the Clinician Scientist Excellence Program of the German Center for Cardiovascular Research (DZHK), the German Society of Cardiology (DGK) and the German Heart Foundation (Deutsche Herzstiftung e.V.). This work was supported by grants from the Fondation Leducq (CADgenomics: Understanding CAD Genes, 12CVD02), the Bavarian State Ministry of Health and Care through the research project DigiMed Bayern (www.digimed-bayern.de), the Bayarian State Ministry of Science and the Arts through the research project DHM-MSRM Joint Research Center, the German Federal Ministry of Education and Research (BMBF) within the framework of ERA-NET on Cardiovascular Disease, Joint Transnational Call 2017 (ERA-CVD: grant JTC2017_21-040), within the framework of target validation (BlockCAD: 16GW0198K), within the framework of the e:Med research and funding concept (AbCD-Net: grant 01ZX1706C and e:AtheroSysMed, grant 01ZX1313A-2014). Further from the Deutsche Forschungsgemeinschaft (DFG) directly (SA 1668/5-1) and as part of the Sonderforschungsbereich CRC 1123 (B2), and additionally from the German Heart Research Foundation [F/28/17] (HS). Maff work is supported in TQdeAV and PAE. labs by NIH grant DK102559. Bioinformatics work was supported by the American Heart Association Postdoctoral Fellowship (YZ) and NIH grants DK104363 (XY). The STARNET study was supported by the University of Tartu (SP1GVARENG), the Estonian Research Council (ETF grant 8853), the Astra-Zeneca Translational Science Centre-Karolinska Institutet (a joint research program in translational science), Clinical Gene Networks AB (CGN) as an SME of the FP6/FP7 EU-funded integrated project CVgenes@target (HEALTH-F2-2013-601456), the Leducq transatlantic networks, CAD Genomics, the American Heart Association (A14SFRN20840000, the National Institutes of Health (NIH NHLBI R01HL125863; NIH NHLBI R01HL71207; R01AG050986; NIH NHLBI K08HL111330) (JB). In vitro and HMDP work was supported by NIH grants HL138196 (MMS) HL28481, HL30568, HL144651, HL147883 and DK117850 (AJL).

List of nonstandard abbreviations

BACH1	BTB domain and CNC homolog 1			
CABG	coronary artery bypass grafting			
CAD	coronary artery disease			
ChIP	chromatin immunoprecipitation			
ChIP-MS	chromatin immunoprecipitation mass spectrometry			
ChIP-Seq	chromatin immunoprecipitation DNA-sequencing			
GWAS	genome-wide association studies			
HMDP	hybrid mouse diversity panel			
KD	knockdown			

KDA key driver analysis

KO knockout

LDLR low-density lipoprotein receptor

LPS lipopolysaccharide

MAFF MAF BZIP Transcription Factor F

MARE maf-recognition element

OE overexpression

STARNET Stockholm-Tartu atherosclerosis reverse network engineering task

WT wildtype

References

 Writing Group M, Mozaffarian D, Benjamin EJ, Go AS, Arnett DK, Blaha MJ, Cushman M, Das SR, de Ferranti S, Despres JP et al. Executive Summary: Heart Disease and Stroke Statistics--2016 Update: A Report From the American Heart Association. Circulation. 2016;133:447–54. [PubMed: 26811276]

- 2. Nichols M, Townsend N, Scarborough P and Rayner M. Cardiovascular disease in Europe 2014: epidemiological update. Eur Heart J. 2014;35:2929. [PubMed: 25381246]
- 3. Khera AV, Emdin CA, Drake I, Natarajan P, Bick AG, Cook NR, Chasman DI, Baber U, Mehran R, Rader DJ et al. Genetic Risk, Adherence to a Healthy Lifestyle, and Coronary Disease. N Engl J Med. 2016;375:2349–2358. [PubMed: 27959714]
- 4. Kessler T, Vilne B and Schunkert H. The impact of genome-wide association studies on the pathophysiology and therapy of cardiovascular disease. EMBO Mol Med. 2016;8:688–701. [PubMed: 27189168]
- Makinen VP, Civelek M, Meng QY, Zhang B, Zhu J, Levian C, Huan TX, Segre AV, Ghosh S, Vivar J et al. Integrative Genomics Reveals Novel Molecular Pathways and Gene Networks for Coronary Artery Disease. Plos Genet. 2014;10: e1004502. [PubMed: 25033284]
- 6. Shu L, Chan KHK, Zhang GL, Huan TX, Kurt Z, Zhao YQ, Codoni V, Tregouet DA, Consortium C, Yang J et al. Shared genetic regulatory networks for cardiovascular disease and type 2 diabetes in multiple populations of diverse ethnicities in the United States. Plos Genet. 2017;13:e1007040. [PubMed: 28957322]
- 7. Ghosh S, Vivar J, Nelson CP, Willenborg C, Segre AV, Maekinen VP, Nikpay M, Erdmann J, Blankenberg S, O'Donnell C et al. Systems Genetics Analysis of Genome-Wide Association Study Reveals Novel Associations Between Key Biological Processes and Coronary Artery Disease. Arterioscl Throm Vas. 2015;35:1712–1722.
- 8. von Scheidt M, Zhao Y, Kurt Z, Pan C, Zeng L, Yang X, Schunkert H and Lusis AJ. Applications and Limitations of Mouse Models for Understanding Human Atherosclerosis. Cell Metab. 2017;25:248–261. [PubMed: 27916529]
- Franzen O, Ermel R, Cohain A, Akers NK, Di Narzo A, Talukdar HA, Foroughi-Asl H, Giambartolomei C, Fullard JF, Sukhavasi K, et al. Cardiometabolic risk loci share downstream cisand trans-gene regulation across tissues and diseases. Science. 2016;353:827–30. [PubMed: 27540175]
- Ference BA, Ginsberg HN, Graham I, Ray KK, Packard CJ, Bruckert E, Hegele RA, Krauss RM, Raal FJ, Schunkert H et al. Low-density lipoproteins cause atherosclerotic cardiovascular disease.
 Evidence from genetic, epidemiologic, and clinical studies. A consensus statement from the European Atherosclerosis Society Consensus Panel. Eur Heart J. 2017;38:2459–2472. [PubMed: 28444290]

11. Weber C and Noels H. Atherosclerosis: current pathogenesis and therapeutic options. Nat Med. 2011;17:1410–22. [PubMed: 22064431]

- 12. Geovanini GR and Libby P. Atherosclerosis and inflammation: overview and updates. Clin Sci (Lond). 2018;132:1243–1252. [PubMed: 29930142]
- Cohen JC, Boerwinkle E, Mosley TH Jr. and Hobbs HH. Sequence variations in PCSK9, low LDL, and protection against coronary heart disease. N Engl J Med. 2006;354:1264–72. [PubMed: 16554528]
- 14. Ference BA, Yoo W, Alesh I, Mahajan N, Mirowska KK, Mewada A, Kahn J, Afonso L, Williams KA Sr. and Flack JM. Effect of long-term exposure to lower low-density lipoprotein cholesterol beginning early in life on the risk of coronary heart disease: a Mendelian randomization analysis. J Am Coll Cardiol. 2012;60:2631–9. [PubMed: 23083789]
- Holmes MV, Asselbergs FW, Palmer TM, Drenos F, Lanktree MB, Nelson CP, Dale CE, Padmanabhan S, Finan C, Swerdlow DI et al. Mendelian randomization of blood lipids for coronary heart disease. Eur Heart J. 2015;36:539–50. [PubMed: 24474739]
- Ross R. Atherosclerosis--an inflammatory disease. N Engl J Med. 1999;340:115–26. [PubMed: 9887164]
- 17. Baigent C, Keech A, Kearney PM, Blackwell L, Buck G, Pollicino C, Kirby A, Sourjina T, Peto R, Collins R et al. Efficacy and safety of cholesterol-lowering treatment: prospective meta-analysis of data from 90,056 participants in 14 randomised trials of statins. Lancet. 2005;366:1267–78. [PubMed: 16214597]
- Ridker PM, Everett BM, Thuren T, MacFadyen JG, Chang WH, Ballantyne C, Fonseca F, Nicolau J, Koenig W, Anker SD et al. Antiinflammatory Therapy with Canakinumab for Atherosclerotic Disease. N Engl J Med. 2017;377:1119–1131. [PubMed: 28845751]
- 19. Ridker PM, Danielson E, Fonseca FA, Genest J, Gotto AM Jr., Kastelein JJ, Koenig W, Libby P, Lorenzatti AJ, Macfadyen JG et al. Reduction in C-reactive protein and LDL cholesterol and cardiovascular event rates after initiation of rosuvastatin: a prospective study of the JUPITER trial. Lancet. 2009;373:1175–82. [PubMed: 19329177]
- Samani NJ, Erdmann J, Hall AS, Hengstenberg C, Mangino M, Mayer B, Dixon RJ, Meitinger T, Braund P, Wichmann HE et al. Genomewide association analysis of coronary artery disease. N Engl J Med. 2007;357:443–53. [PubMed: 17634449]
- Schunkert H, Konig IR, Kathiresan S, Reilly MP, Assimes TL, Holm H, Preuss M, Stewart AF, Barbalic M, Gieger C et al. Large-scale association analysis identifies 13 new susceptibility loci for coronary artery disease. Nat Genet. 2011;43:333–8. [PubMed: 21378990]
- 22. Coronary Artery Disease Genetics C. A genome-wide association study in Europeans and South Asians identifies five new loci for coronary artery disease. Nat Genet. 2011;43:339–44. [PubMed: 21378988]
- 23. Deloukas P, Kanoni S, Willenborg C, Farrall M, Assimes TL, Thompson JR, Ingelsson E, Saleheen D, Erdmann J, Goldstein BA et al. Large-scale association analysis identifies new risk loci for coronary artery disease. Nat Genet. 2013;45:25–33. [PubMed: 23202125]
- 24. Nikpay M, Goel A, Won HH, Hall LM, Willenborg C, Kanoni S, Saleheen D, Kyriakou T, Nelson CP, Hopewell JC et al. A comprehensive 1,000 Genomes-based genome-wide association meta-analysis of coronary artery disease. Nat Genet. 2015;47:1121–30. [PubMed: 26343387]
- 25. McPherson R and Tybjaerg-Hansen A. Genetics of Coronary Artery Disease. Circ Res. 2016;118:564–78. [PubMed: 26892958]
- 26. Howson JMM, Zhao W, Barnes DR, Ho WK, Young R, Paul DS, Waite LL, Freitag DF, Fauman EB, Salfati EL et al. Fifteen new risk loci for coronary artery disease highlight arterial-wall-specific mechanisms. Nat Genet. 2017;49:1113–1119. [PubMed: 28530674]
- Nelson CP, Goel A, Butterworth AS, Kanoni S, Webb TR, Marouli E, Zeng L, Ntalla I, Lai FY, Hopewell JC et al. Association analyses based on false discovery rate implicate new loci for coronary artery disease. Nat Genet. 2017;49:1385–1391. [PubMed: 28714975]
- Webb TR, Erdmann J, Stirrups KE, Stitziel NO, Masca NG, Jansen H, Kanoni S, Nelson CP, Ferrario PG, Konig IR et al. Systematic Evaluation of Pleiotropy Identifies 6 Further Loci Associated With Coronary Artery Disease. J Am Coll Cardiol. 2017;69:823–836. [PubMed: 28209224]

29. Braenne I, Civelek M, Vilne B, Di Narzo A, Johnson AD, Zhao Y, Reiz B, Codoni V, Webb TR, Foroughi Asl H et al. Prediction of Causal Candidate Genes in Coronary Artery Disease Loci. Arterioscler Thromb Vasc Biol. 2015;35:2207–17. [PubMed: 26293461]

- 30. Schunkert H, Gotz A, Braund P, McGinnis R, Tregouet DA, Mangino M, Linsel-Nitschke P, Cambien F, Hengstenberg C, Stark K et al. Repeated replication and a prospective meta-analysis of the association between chromosome 9p21.3 and coronary artery disease. Circulation. 2008;117:1675–84. [PubMed: 18362232]
- 31. Zhu J, Zhang B, Smith EN, Drees B, Brem RB, Kruglyak L, Bumgarner RE and Schadt EE. Integrating large-scale functional genomic data to dissect the complexity of yeast regulatory networks. Nat Genet. 2008;40:854–61. [PubMed: 18552845]
- 32. Derry JM, Zhong H, Molony C, MacNeil D, Guhathakurta D, Zhang B, Mudgett J, Small K, El Fertak L, Guimond A et al. Identification of genes and networks driving cardiovascular and metabolic phenotypes in a mouse F2 intercross. PLoS One. 2010;5:e14319. [PubMed: 21179467]
- 33. Wang SS, Schadt EE, Wang H, Wang X, Ingram-Drake L, Shi W, Drake TA and Lusis AJ. Identification of pathways for atherosclerosis in mice: integration of quantitative trait locus analysis and global gene expression data. Circ Res. 2007;101:e11–30. [PubMed: 17641228]
- 34. Yang X, Schadt EE, Wang S, Wang H, Arnold AP, Ingram-Drake L, Drake TA and Lusis AJ. Tissue-specific expression and regulation of sexually dimorphic genes in mice. Genome Res. 2006;16:995–1004. [PubMed: 16825664]
- 35. Schadt EE, Molony C, Chudin E, Hao K, Yang X, Lum PY, Kasarskis A, Zhang B, Wang S, Suver C et al. Mapping the genetic architecture of gene expression in human liver. PLoS Biol. 2008;6:e107. [PubMed: 18462017]
- 36. Tu Z, Keller MP, Zhang C, Rabaglia ME, Greenawalt DM, Yang X, Wang IM, Dai H, Bruss MD, Lum PY et al. Integrative analysis of a cross-loci regulation network identifies App as a gene regulating insulin secretion from pancreatic islets. PLoS Genet. 2012;8:e1003107. [PubMed: 23236292]
- 37. Makinen VP, Civelek M, Meng Q, Zhang B, Zhu J, Levian C, Huan T, Segre AV, Ghosh S, Vivar J et al. Integrative genomics reveals novel molecular pathways and gene networks for coronary artery disease. PLoS Genet. 2014;10:e1004502. [PubMed: 25033284]
- 38. Wang IM, Zhang B, Yang X, Zhu J, Stepaniants S, Zhang C, Meng Q, Peters M, He Y, Ni C et al. Systems analysis of eleven rodent disease models reveals an inflammatome signature and key drivers. Mol Syst Biol. 2012;8:594. [PubMed: 22806142]
- 39. Yang X, Zhang B, Molony C, Chudin E, Hao K, Zhu J, Gaedigk A, Suver C, Zhong H, Leeder JS et al. Systematic genetic and genomic analysis of cytochrome P450 enzyme activities in human liver. Genome Res. 2010;20:1020–36. [PubMed: 20538623]
- 40. Shu L, Zhao Y, Kurt Z, Byars SG, Tukiainen T, Kettunen J, Orozco LD, Pellegrini M, Lusis AJ, Ripatti S et al. Mergeomics: multidimensional data integration to identify pathogenic perturbations to biological systems. BMC Genomics. 2016;17:874. [PubMed: 27814671]
- 41. Zhang Y, Liu T, Meyer CA, Eeckhoute J, Johnson DS, Bernstein BE, Nusbaum C, Myers RM, Brown M, Li W et al. Model-based analysis of ChIP-Seq (MACS). Genome Biol. 2008;9:R137. [PubMed: 18798982]
- 42. Landt SG, Marinov GK, Kundaje A, Kheradpour P, Pauli F, Batzoglou S, Bernstein BE, Bickel P, Brown JB, Cayting P et al. ChIP-seq guidelines and practices of the ENCODE and modENCODE consortia. Genome Res. 2012;22:1813–31. [PubMed: 22955991]
- 43. Heinz S, Benner C, Spann N, Bertolino E, Lin YC, Laslo P, Cheng JX, Murre C, Singh H and Glass CK. Simple combinations of lineage-determining transcription factors prime cis-regulatory elements required for macrophage and B cell identities. Mol Cell. 2010;38:576–89. [PubMed: 20513432]
- 44. Machanick P and Bailey TL. MEME-ChIP: motif analysis of large DNA datasets. Bioinformatics. 2011;27:1696–7. [PubMed: 21486936]
- 45. Lu X, Guanga GP, Wan C and Rose RB. A novel DNA binding mechanism for maf basic region-leucine zipper factors inferred from a MafA-DNA complex structure and binding specificities. Biochemistry. 2012;51:9706–17. [PubMed: 23148532]

46. Marchler-Bauer A, Bo Y, Han L, He J, Lanczycki CJ, Lu S, Chitsaz F, Derbyshire MK, Geer RC, Gonzales NR et al. CDD/SPARCLE: functional classification of proteins via subfamily domain architectures. Nucleic Acids Res. 2017;45:D200–D203. [PubMed: 27899674]

- 47. Kozakov D, Hall DR, Xia B, Porter KA, Padhorny D, Yueh C, Beglov D and Vajda S. The ClusPro web server for protein-protein docking. Nat Protoc. 2017;12:255–278. [PubMed: 28079879]
- 48. Vajda S, Yueh C, Beglov D, Bohnuud T, Mottarella SE, Xia B, Hall DR and Kozakov D. New additions to the ClusPro server motivated by CAPRI. Proteins. 2017;85:435–444. [PubMed: 27936493]
- 49. Erdmann J, Kessler T, Munoz Venegas L and Schunkert H. A decade of genome-wide association studies for coronary artery disease: the challenges ahead. Cardiovasc Res. 2018;114:1241–1257. [PubMed: 29617720]
- 50. An SJ, Jung UJ, Choi MS, Chae CK, Oh GT and Park YB. Functions of monocyte chemotactic protein-3 in transgenic mice fed a high-fat, high-cholesterol diet. J Microbiol Biotechnol. 2013;23:405–13. [PubMed: 23462015]
- 51. Kirii H, Niwa T, Yamada Y, Wada H, Saito K, Iwakura Y, Asano M, Moriwaki H and Seishima M. Lack of interleukin-1beta decreases the severity of atherosclerosis in ApoE-deficient mice. Arterioscler Thromb Vasc Biol. 2003;23:656–60. [PubMed: 12615675]
- 52. Heller EA, Liu E, Tager AM, Yuan Q, Lin AY, Ahluwalia N, Jones K, Koehn SL, Lok VM, Aikawa E et al. Chemokine CXCL10 promotes atherogenesis by modulating the local balance of effector and regulatory T cells. Circulation. 2006;113:2301–12. [PubMed: 16682613]
- 53. Gold ES, Ramsey SA, Sartain MJ, Selinummi J, Podolsky I, Rodriguez DJ, Moritz RL and Aderem A. ATF3 protects against atherosclerosis by suppressing 25-hydroxycholesterol-induced lipid body formation. J Exp Med. 2012;209:807–17. [PubMed: 22473958]
- 54. Jiang H, Li X, Zhang X, Liu Y, Huang S and Wang X. EphA2 knockdown attenuates atherosclerotic lesion development in ApoE(-/-) mice. Cardiovasc Pathol. 2014;23:169–74. [PubMed: 24561077]
- 55. Bonaterra GA, Zugel S, Thogersen J, Walter SA, Haberkorn U, Strelau J and Kinscherf R. Growth differentiation factor-15 deficiency inhibits atherosclerosis progression by regulating interleukin-6dependent inflammatory response to vascular injury. J Am Heart Assoc. 2012;1:e002550. [PubMed: 23316317]
- Ishibashi S, Goldstein JL, Brown MS, Herz J and Burns DK. Massive xanthomatosis and atherosclerosis in cholesterol-fed low density lipoprotein receptor-negative mice. J Clin Invest. 1994;93:1885–93. [PubMed: 8182121]
- 57. Qing H, Liu Y, Zhao Y, Aono J, Jones KL, Heywood EB, Howatt D, Binkley CM, Daugherty A, Liang Y et al. Deficiency of the NR4A orphan nuclear receptor NOR1 in hematopoietic stem cells accelerates atherosclerosis. Stem Cells. 2014;32:2419–29. [PubMed: 24806827]
- 58. Hossain GS, Lynn EG, Maclean KN, Zhou J, Dickhout JG, Lhoták S, Trigatti B, Capone J, Rho J, Tang D et al. Deficiency of TDAG51 protects against atherosclerosis by modulating apoptosis, cholesterol efflux, and peroxiredoxin-1 expression. J Am Heart Assoc. 2013;2:e000134. [PubMed: 23686369]
- 59. Kremen M, Krishnan R, Emery I, Hu JH, Slezicki KI, Wu A, Qian K, Du L, Plawman A, Stempien-Otero A et al. Plasminogen mediates the atherogenic effects of macrophage-expressed urokinase and accelerates atherosclerosis in apoE-knockout mice. Proc Natl Acad Sci U S A. 2008;105:17109–14. [PubMed: 18957535]
- 60. Wolfrum S, Teupser D, Tan M, Chen KY and Breslow JL. The protective effect of A20 on atherosclerosis in apolipoprotein E-deficient mice is associated with reduced expression of NFkappaB target genes. Proc Natl Acad Sci U S A. 2007;104:18601–6. [PubMed: 18006655]
- 61. Muñoz-García B, Madrigal-Matute J, Moreno JA, Martin-Ventura JL, López-Franco O, Sastre C, Ortega L, Burkly LC, Egido J and Blanco-Colio LM. TWEAK-Fn14 interaction enhances plasminogen activator inhibitor 1 and tissue factor expression in atherosclerotic plaques and in cultured vascular smooth muscle cells. Cardiovasc Res. 2011;89:225–33. [PubMed: 20810696]
- 62. Arndt LD J; Jeromin F; Thiery J; Burkhardt R. Heterozygous deficiency of Tribbles homolog-1 gene (Trib1) increases atherosclerotic lesions in ApoE-knockout mice. 12 Jahrestagung Deutsche Vereinte Gesellschaft für Klinische Medizin und Laboratoriumsmedizin eV (DGKL). 2015;P068.

63. Yin K, Tang SL, Yu XH, Tu GH, He RF, Li JF, Xie D, Gui QJ, Fu YC, Jiang ZS et al. Apolipoprotein A-I inhibits LPS-induced atherosclerosis in ApoE(-/-) mice possibly via activated STAT3-mediated upregulation of tristetraprolin. Acta Pharmacol Sin. 2013;34:837–46. [PubMed: 23564081]

- 64. Blank V. Small Maf proteins in mammalian gene control: mere dimerization partners or dynamic transcriptional regulators? J Mol Biol. 2008;376:913–25. [PubMed: 18201722]
- 65. Ghazalpour A, Rau CD, Farber CR, Bennett BJ, Orozco LD, van Nas A, Pan C, Allayee H, Beaven SW, Civelek M et al. Hybrid mouse diversity panel: a panel of inbred mouse strains suitable for analysis of complex genetic traits. Mamm Genome. 2012;23:680–92. [PubMed: 22892838]
- 66. Bennett BJ, Davis RC, Civelek M, Orozco L, Wu J, Qi H, Pan C, Packard RR, Eskin E, Yan M et al. Genetic Architecture of Atherosclerosis in Mice: A Systems Genetics Analysis of Common Inbred Strains. PLoS Genet. 2015;11:e1005711. [PubMed: 26694027]
- 67. Yang S, Kim CY, Hwang S, Kim E, Kim H, Shim H and Lee I. COEXPEDIA: exploring biomedical hypotheses via co-expressions associated with medical subject headings (MeSH). Nucleic Acids Res. 2017;45:D389–D396. [PubMed: 27679477]
- 68. Cheng Y, Ma Z, Kim BH, Wu W, Cayting P, Boyle AP, Sundaram V, Xing X, Dogan N, Li J et al. Principles of regulatory information conservation between mouse and human. Nature. 2014;515:371–5. [PubMed: 25409826]
- 69. Zhang X, Guo J, Wei X, Niu C, Jia M, Li Q and Meng D. Bach1: Function, Regulation, and Involvement in Disease. Oxid Med Cell Longev. 2018;2018:1347969. [PubMed: 30370001]
- 70. van der Harst P and Verweij N. Identification of 64 Novel Genetic Loci Provides an Expanded View on the Genetic Architecture of Coronary Artery Disease. Circ Res. 2018;122:433–443. [PubMed: 29212778]
- 71. Schunkert H, von Scheidt M, Kessler T, Stiller B, Zeng L and Vilne B. Genetics of coronary artery disease in the light of genome-wide association studies. Clin Res Cardiol. 2018;107:2–9. [PubMed: 30022276]
- 72. Emini Veseli B, Perrotta P, De Meyer GRA, Roth L, Van der Donckt C, Martinet W and De Meyer GRY. Animal models of atherosclerosis. Eur J Pharmacol. 2017;816:3–13. [PubMed: 28483459]
- 73. Castaneda S, Nurmohamed MT and Gonzalez-Gay MA. Cardiovascular disease in inflammatory rheumatic diseases. Best Pract Res Clin Rheumatol. 2016;30:851–869. [PubMed: 27964792]
- 74. Gonzalez-Gay MA, Gonzalez-Juanatey C and Martin J. Rheumatoid arthritis: a disease associated with accelerated atherogenesis. Semin Arthritis Rheum. 2005;35:8–17. [PubMed: 16084219]
- 75. Lopez-Mejias R, Castaneda S, Gonzalez-Juanatey C, Corrales A, Ferraz-Amaro I, Genre F, Remuzgo-Martinez S, Rodriguez-Rodriguez L, Blanco R, Llorca J et al. Cardiovascular risk assessment in patients with rheumatoid arthritis: The relevance of clinical, genetic and serological markers. Autoimmun Rev. 2016;15:1013–1030. [PubMed: 27490206]
- 76. Schieir O, Tosevski C, Glazier RH, Hogg-Johnson S and Badley EM. Incident myocardial infarction associated with major types of arthritis in the general population: a systematic review and meta-analysis. Ann Rheum Dis. 2017;76:1396–1404. [PubMed: 28219882]
- 77. Skeoch S and Bruce IN. Atherosclerosis in rheumatoid arthritis: is it all about inflammation? Nat Rev Rheumatol. 2015;11:390–400. [PubMed: 25825281]
- 78. Fernandez-Ortiz AM, Ortiz AM, Perez S, Toledano E, Abasolo L, Gonzalez-Gay MA, Castaneda S and Gonzalez-Alvaro I. Effects of disease activity on lipoprotein levels in patients with early arthritis: can oxidized LDL cholesterol explain the lipid paradox theory? Arthritis Res Ther. 2020;22:213. [PubMed: 32917272]
- 79. Zhao Y, Chen J, Freudenberg JM, Meng Q, Rajpal DK and Yang X. Network-Based Identification and Prioritization of Key Regulators of Coronary Artery Disease Loci. Arterioscler Thromb Vasc Biol. 2016;36:928–41. [PubMed: 26966275]
- Katsuoka F and Yamamoto M. Small Maf proteins (MafF, MafG, MafK): History, structure and function. Gene. 2016;586:197–205. [PubMed: 27058431]
- 81. Massrieh W, Derjuga A, Doualla-Bell F, Ku CY, Sanborn BM and Blank V. Regulation of the MAFF transcription factor by proinflammatory cytokines in myometrial cells. Biol Reprod. 2006;74:699–705. [PubMed: 16371591]

82. Tan MK, Lim HJ, Bennett EJ, Shi Y and Harper JW. Parallel SCF adaptor capture proteomics reveals a role for SCFFBXL17 in NRF2 activation via BACH1 repressor turnover. Mol Cell. 2013;52:9–24. [PubMed: 24035498]

Clinical Perspective

What is new?

 Our study identified the transcription factor MAFF as key driver gene in a liver-specific network involving several genes with established, genome-wide significant association to coronary artery disease (CAD).

- *MAFF* regulated context-specifically expression of *LDLR* in experimental model systems and human individuals.
- MAFF induced LDLR expression under non-inflammatory conditions. After LPS stimulation MAFF downregulated LDLR expression via heterodimerisation with BACH1 and binding at the maf-recognition element (MARE) – also known as stress-responsive element – in the promoter of LDLR.

What are the clinical implications?

- Cholesterol metabolism and inflammation represent two major causes of CAD. Here we identified a transcriptional regulator (*MAFF*) to differentially affect the major determinant of cholesterol levels (*LDLR*) dependent on the inflammatory state.
- Further studies of the transcription factor *MAFF*, its interaction partners and downstream cascades might generate new therapeutic targets to treat hypercholesterolemia, inflammation and reduce CAD risk.

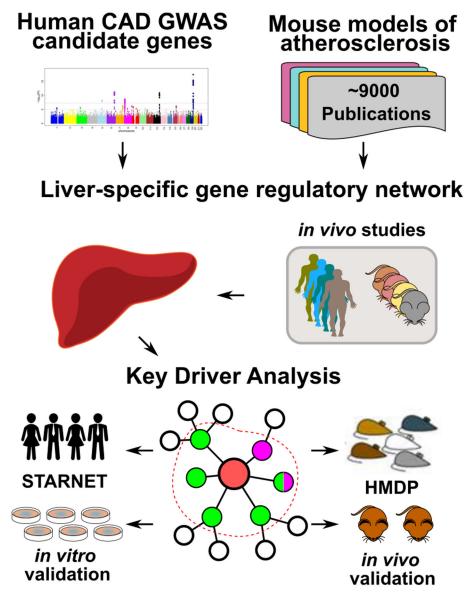


Figure 1. Study workflow:

Human and mouse atherosclerosis candidate genes were used to first model liver specific regulatory networks and second decipher key driver genes of gene regulatory networks in both species. Prediction of bioinformatics modeling was validated in human and mouse genetic studies as well as in in vitro and in vivo experiments. CAD: Coronary artery disease; GWAS: Genome wide association study.

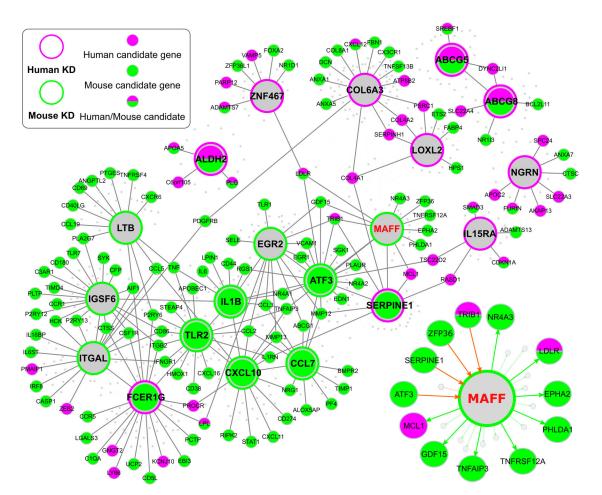


Figure 2. Liver specific regulatory subnetworks and their key driver genes.

The key driver analysis was performed on human and mouse networks respectively and the architecture of the illustrated network is based on both, mouse and human data. Key drivers are depicted as the largest nodes in the networks. All genes highlighted in solid green have already been studied to have a significant effect on atherosclerosis in genetically engineered mouse models. Human CAD GWAS candidate genes are highlighted in magenta. Key driver genes in grey need to be validated. Genes with both colors have an effect on atherosclerosis/CAD in human and mouse. Lower right: The MAFF network is the top ranked key driver gene network based on mouse data and closely connected to other human key driver subnetworks. Directionality between genes was based on the consensus of directional predictions from Bayesian networks constructed from different datasets, with the directionality predicted by the majority of studies shown. Red arrows indicate genes that are predicted to regulate MAFF, whereas green arrows indicate genes that are predicted to be regulated by the transcription factor MAFF. CAD: coronary artery disease; GWAS: Genome wide association study; Human KD: Human key driver gene; Mouse KD: Mouse key driver gene; MAFF: MAF BZIP Transcription Factor F.

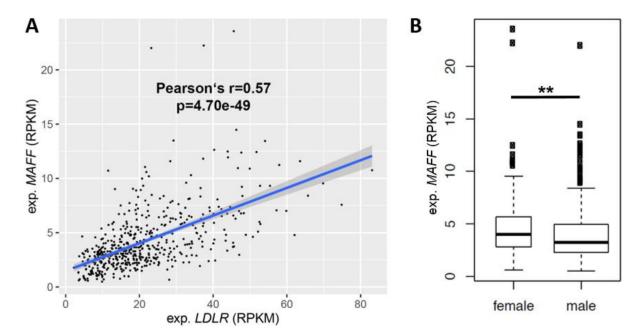


Figure 3. Human data from STARNET.

Correlation of mRNA expression levels of MAFF in human liver samples from the

Stockholm-Tartu Atherosclerosis Reverse Network Engineering Task (STARNET) with A:

LDLR and B: Sex. ** indicates p<0.01. LDLR: low-density lipoprotein receptor; MAFF:

MAF BZIP Transcription Factor F; RPKM: Reads per kilobase million.

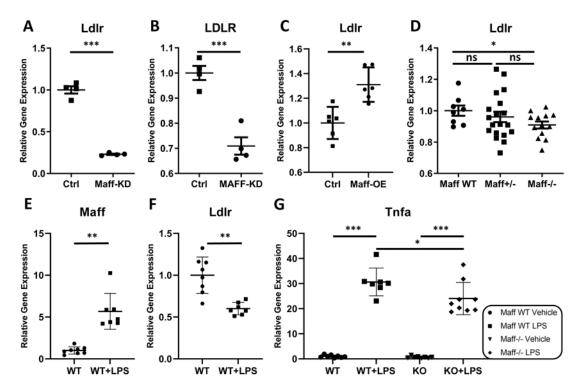


Figure 4. Experimental studies.

A: In vitro results of Ldlr mRNA expression (in the following referred to as expression) after siRNA-knockdown of Maff compared to controls (vehicle) in mouse AML12 liver cells. B: In vitro results of LDLR expression after siRNA-knockdown of MAFF compared to controls (vehicle) in human Hep3b liver cells. C: In vitro results of Ldlr expression cells after Maff overexpression compared to controls (vehicle) in mouse AML12. D: In vivo results of liver Ldlr expression in Maff—/— mice compared to Maff+/— and WT mice. E: In vivo results of liver Maff expression in Maff WT mice 6 hours after LPS stimulation compared to controls (vehicle). F: In vivo results of liver Ldlr expression in Maff WT mice 6 hours after LPS stimulation compared to controls (vehicle). G: In vivo results of plasma Tnfa expression in Maff WT and Maff—/— mice 6 hours after LPS stimulation compared to controls (vehicle).

*** indicates p<0.001, ** indicates p<0.01, * indicates p<0.05, ns indicates non-significant. Bonferroni correction was applied for multiple comparison. Ctrl: control group; KD: knockdown; LDLR: low-density lipoprotein receptor; LPS: lipopolysaccharide; MAFF: MAF BZIP Transcription Factor F; OE: overexpression; WT: wildtype.

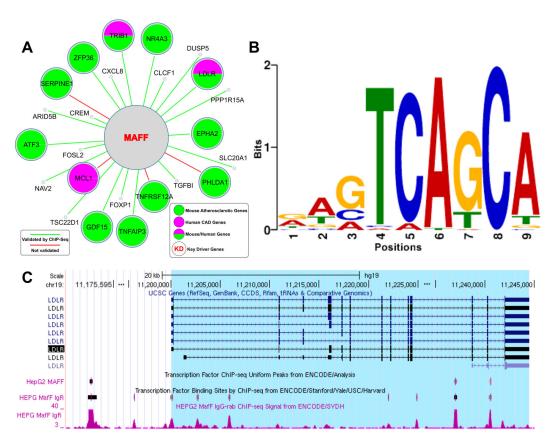


Figure 5. MAFF binding motif.

A: ChIP-seq data of human HepG2 cells supports potential binding of MAFF to genes in the MAFF subnetwork. Green edges indicate a binding motif was shared in the selected network genes, whereas red edges indicate that no known shared binding motif was found in the particular network genes. A matching binding motif was found in 20 out of 24 predicted interaction partners of MAFF. B: The matching motif among the MAFF network genes, which agrees with the previously known MAFF binding motif. The matching motif was identified using publically available ChIP-Seq data of the MAFF gene in human HepG2 cells from ENCODE. The height of the letter represents the frequency of the observed nucleotide in that position. C: Presence of the MAFF binding motif (small boxes below) upstream and within the LDLR gene (highlighted in blue).

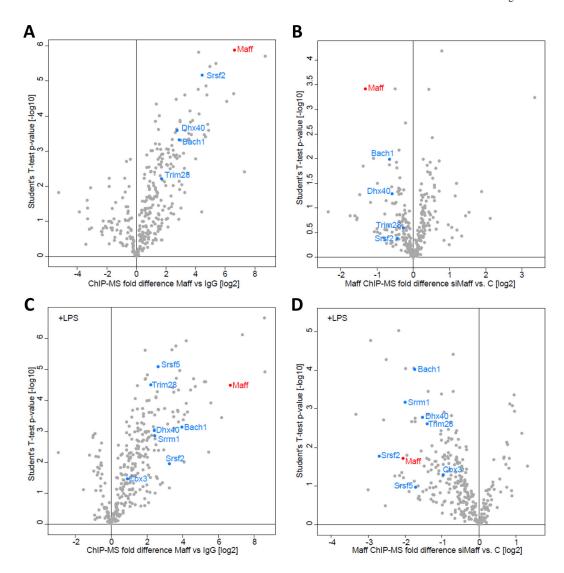


Figure 6. Maff binding partners under different conditions.

Volcano plot of the p-values (y-axis) vs. the log2 protein abundance differences (x-axis) of Maff binding partners in AML12 cells identified by ChIP-MS under (A) homeostatic conditions, (B) after Maff siRNA knockdown (which led to a 91% decrease on protein level), (C) LPS stimulation and (D) Maff siRNA knockdown in combination with LPS stimulation. Significant Maff interaction partners were highlighted in blue. Enrichment of binding partners is provided as fold difference compared to negative control (IgG) in panel A and C and compared to control (Maff WT) after siRNA knockdown in panel B and D. C: control (Maff WT); IgG: nonspecific IgG served as negative control.

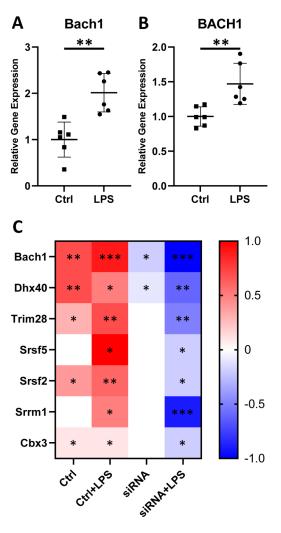


Figure 7. The role of inflammation.

LPS stimulation led to a significant increase of BACH1/Bach1 mRNA expression in mouse AML12 cells (A) and human Hep3b cells (B) compared to controls (vehicle). (C) The heat map of z-scored Maff ChIP-MS visualises LFQ intensities of selected Maff interactors in extracts from AML12 cells under homeostatic conditions (Ctrl), LPS stimulation (Ctrl +LPS), after Maff siRNA knockdown (siRNA) and after Maff siRNA knockdown in combination with LPS stimulation (siRNA+LPS). Provided are adjusted p-values. *** indicates p<0.001, ** indicates p<0.01, * indicates p<0.05.

Basal conditions

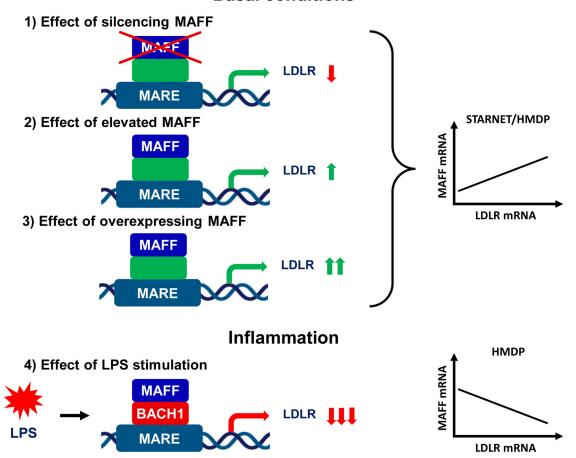


Figure 8. The role of the transcription factor MAFF in activation or repression of the LDLR is based on heterodimerisation partners and environmental conditions.

MAFF heterodimers bind at the MAF recognition element (MARE) of the LDLR promoter and execute regulation of the LDLR. Under basal conditions 1) MAFF knockdown/knockout led to reduced LDLR mRNA expression, 2) elevated MAFF expression was correlated with higher expression of LDLR in a human CAD cohort (STARNET) and in wildtype mice of the hybrid mouse diversity panel (HMDP), 3) Overexpression of Maff using plasmid DNA transfection led to increased Ldlr expression in vitro. In the presence of LPS stimulation MAFF-BACH1 heterodimers result in downregulation of the LDLR in vivo. HMDP mice on atherogenic background (transgenic expression of human APOE-Leiden and cholesteryl ester transfer protein (CETP)) showed increased inflammation and revealed that elevated Maff expression correlates with lower Ldlr expression. BACH1: BTB domain and CNC Homolog 1; MAFF: MAF BZIP Transcription Factor F; MARE: Maf recognition element; LDLR: low-density lipoprotein receptor; LPS: lipopolysaccharide.

Table 1.

Listed are the top 10 key driver genes detected in human and mouse liver networks based on the bioinformatics approach. Several genes have already been studied and confirmed with regard to atherosclerosis/CAD. FDR: False discovery rate.

Species	Key Driver Gene	Studied effect on atherosclerosis	Network size (Genes)	Atherosclerosis associated genes	FDR	Fold Enrichment
	Maff	no	25	11	1.50E-05	19.08
	II1b	yes	27	11	1.50E-05	19.08
	Cc17	yes	34	12	1.17E-05	16.53
	Atf3	yes	50	15	3.89E-06	14.05
	Cxcl10	yes	46	13	1.26E-05	13.23
Mouse	Egr2	no	50	14	7.79E-06	13.11
	Igsf6	no	66	18	1.49E-06	12.77
	Ltb	no	44	12	2.45E-05	12.77
	Itgal	no	52	14	8.81E-06	12.61
	Tlr2	yes	57	15	5.90E-06	12.32
Human	ALDH2	yes	19	4	1.10E-04	31.29
	IL15RA	no	20	4	1.50E-04	29.72
	ZNF467	no	22	4	2.70E-04	27.02
	NGRN	no	32	5	1.87E-07	23.22
	LOXL2	no	28	4	1.15E-03	21.23
	ABCG8	yes	30	4	1.73E-03	19.82
	ABCG5	yes	33	4	3.00E-03	18.01
	SERPINE1	no	34	4	3.55E-03	17.48
	COL6A3	no	69	6	1.22E-07	12.92
	FCER1G	no	81	5	3.16E-03	9.17