

The early life of endometriosis: lessons learned from the baboon

Julie Hastings
Human Reproductive Sciences Unit, MRC
ESHRE, Glasgow, 2009




Acknowledgments



UIC
Asgi Fazleabas
Adrienne Olson
Andrea Braundmeier
Kevin Jackson
Mark Olson
Patty Mavrogianis

UCSF Linda Giudice Amy Hamilton Said Talbi	University of Cincinnati SK Dey Susanne Tranguch Shuk-Mei Ho Xiang Zhang	Greenville Hospital Bruce Lessey Angela Howling
Northwestern University Julie Kim	Shanghai Jiao Tong Univ Sun-Wei Guo	UNC Steve Young
Yale Hugh Taylor Jennifer Sarno		

Supported by the Eunice Kennedy Shriver NICHD/NIH through cooperative agreement U54 HD 40093 as part of the Specialized Cooperative Centers Program in Reproduction and Infertility Research

What is Endometriosis?

- The presence of hormone-responsive endometrial tissue at ectopic sites beyond the uterine cavity
- Associated with chronic pelvic pain, dysmenorrhea, dyspareunia, and infertility
- Affects 1 in 10 women of reproductive age
- Average time to diagnosis is 8-11 years ¹
- Estimated economic burden of ~\$22 billion (in 2002) ²

1. Sinaii et al., 2008, Fertil Steril: 89:538-545
2. Simoons et al., 2007, Hum Reprod Update: 13:395-404

How does Endometriosis Develop?

- Halban's theory of hematogenic or lymphogenic spread of viable endometrial cells
- Meyer's theory of coelomic metaplasia of peritoneal mesothelial lining
- Sampson's theory of retrograde menstruation¹



¹ Sampson. 1927. Am J Obstet Gynecol:14:422-449

Limitations in Understanding the Pathophysiology of Endometriosis

- 90% of women experience retrograde menstruation
- Only 10% of women develop endometriosis
- 30-50% of women with endometriosis are infertile

What is the pathophysiology of endometriosis-associated infertility?



Is Endometriosis Associated with Infertility?

TABLE 3
Results of bivariate analysis and multiple logistic regression analyses comparing endometriosis patients with controls.

Outcome	Endometriosis	Control	Crude OR (95% CI)	Adjusted OR* (95% CI)
All patients^a (n = 2,909)				
Pregnancy rate	28.42	29.32	0.81 (0.72-0.91)	0.83 (0.51-0.77)
Fertilization rate	29.69	42.04	0.55 (0.38-0.81)	0.27 (0.18-0.38)
Implantation rate	12.72	18.08	0.86 (0.85-0.87)	0.87 (0.85-0.88)
Mean no. of oocytes	7.81	7.50	1.06 (1.04-1.08)	0.92 (0.85-0.99)
Peak E ₂	3545.04	4399.93	N/A	N/A
Endometriosis only vs. total (same only^b (n = 2,803))				
Pregnancy rate	28.38	27.71	0.88 (0.79-1.00)	0.58 (0.44-0.76)
Fertilization rate	29.50	46.09	0.55 (0.38-0.81)	0.21 (0.14-0.33)
Implantation rate	12.72	18.08	0.86 (0.85-0.88)	0.87 (0.85-0.88)
Mean no. of oocytes	7.79	7.50	1.06 (1.04-1.08)	0.82 (0.75-0.90)
Peak E ₂	3545.04	4399.93	N/A	N/A
Stage I-IV^c (n = 2,602)				
Pregnancy rate	21.11	27.71	0.70 (0.56-0.87)	0.70 (0.60-1.03)
Fertilization rate	58.38	66.09	0.93 (0.92-0.94)	0.94 (0.93-0.96)
Implantation rate	11.31	18.08	0.80 (0.78-0.82)	0.88 (0.85-0.90)
Mean no. of oocytes	8.19	7.50	1.13 (1.09-1.14)	0.56 (0.49-0.63)
Peak E ₂	5813.38	4399.93	N/A	N/A
Stage III-IV^d (n = 2,575)				
Pregnancy rate	13.84	27.71	0.42 (0.31-0.57)	0.48 (0.26-0.74)
Fertilization rate	74.47	66.09	1.08 (1.06-1.10)	1.54 (1.39-1.70)
Implantation rate	10.23	18.08	0.75 (0.72-0.79)	not interpretable
Mean no. of oocytes	6.70	7.50	0.94 (0.91-0.98)	not interpretable
Peak E ₂	1417.74	4399.93	N/A	N/A

Note: P<0.001 comparing endometriosis with control group in every outcome category. N/A = not applicable.

Barnhart et al. 2002. Fertil Steril: 77:1148-1155

Does Lesion Ablation Improve Fertility?

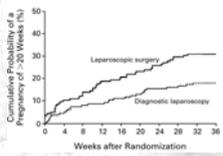


Table II. Pregnancies and births according to treatment allocation. Italy

	Resection or ablation of visible endometriosis			
	Yes		No	
	No.	(%)	No.	(%)
Pregnancy				
No	39	(76.5)	32	(71.1)
Yes	12	(23.5)	13	(28.9)
Outcome of pregnancy				
Abortion	2	(16.7)	3	(23.1)
Term delivery	10	(83.3)	10	(76.9)

Marcoux et al., 1997. N Engl J Med. 337:217-222

Parazzini, 1999. Hum Reprod. 14:1332-1334



Limitations in Understanding the Pathophysiology of Endometriosis

Does the presence of endometriotic lesions affect reproductive/endometrial function?

OR

Does an inherently defective endometrium affect reproductive function and the growth of endometriotic lesions?



Limitations in Understanding the Pathophysiology of Endometriosis

- Disease has been present for an extended period at the time of diagnosis
- Availability of endometrial tissue during the receptive phase is limited
- Clinical studies with appropriate controls are not feasible

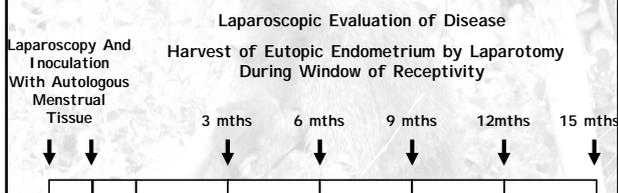


Experimental Models of Endometriosis in the Non-human Primate

- Spontaneous endometriosis reported in the macaque and baboon families of monkeys¹⁻⁴
- Surgical diversion of the cervix into the abdomen resulted in endometriosis⁵⁻⁷
- Intra-peritoneal seeding with autologous menstrual endometrium in baboons results in endometriosis⁸
- Fecundity was reduced in baboons with advanced spontaneous and experimental endometriosis⁹

1. McClure *et al.*, 1971. *J Med Assoc. Ga*:60:11-13
 2. Fanton *et al.*, 1983. *Lab Anim Sci*:33:597-599
 3. Digiacomo *et al.*, 1977. *J Am Vet Med Assoc*:171:859-861
 4. Merrill, 1968. *Am J Obstet Gynecol*:101:569-570
 5. Te Linde and Scot, 1950. *Am J Obstet Gynecol*:60:1147-1173.
 6. Allen *et al.*, 1954. *Am J Obstet Gynecol*:68:356-375
 7. D'Hooghe *et al.*, 1994. *Fertil Steril*:62:635-638
 8. D'Hooghe *et al.*, 1995. *Am J Obstet Gynecol*:173:125-134
 9. D'Hooghe *et al.*, 2000. *Fertil Steril*:66:809-813

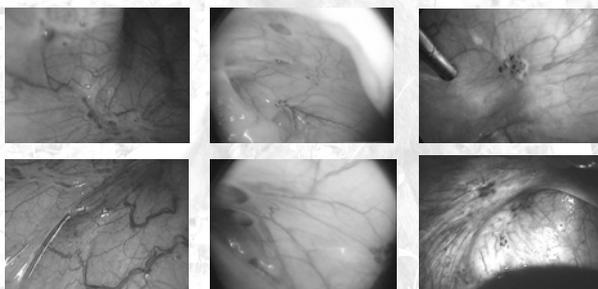
Experimental Induction of Endometriosis in the Baboon

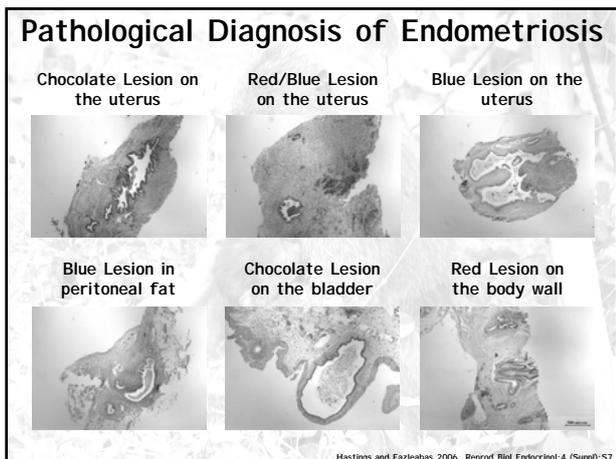


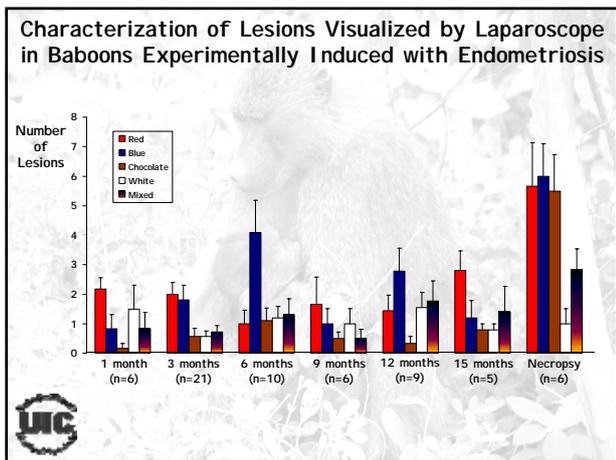
Experimental Endometriosis Recapitulates Spontaneous Disease

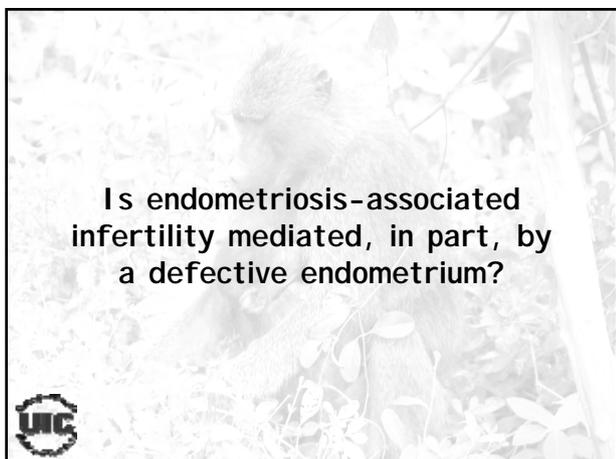
Induced Disease in the Baboon

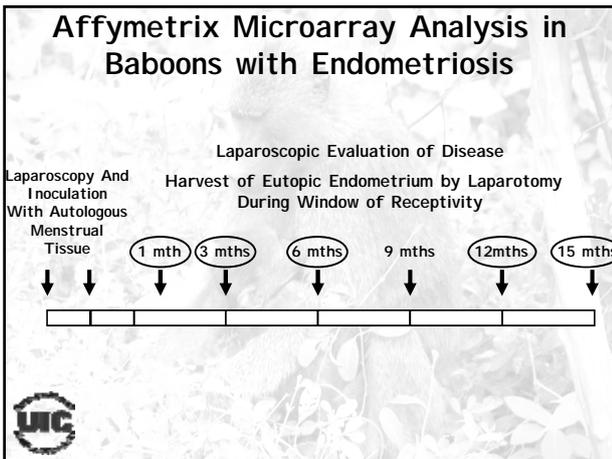
Spontaneous Human Disease

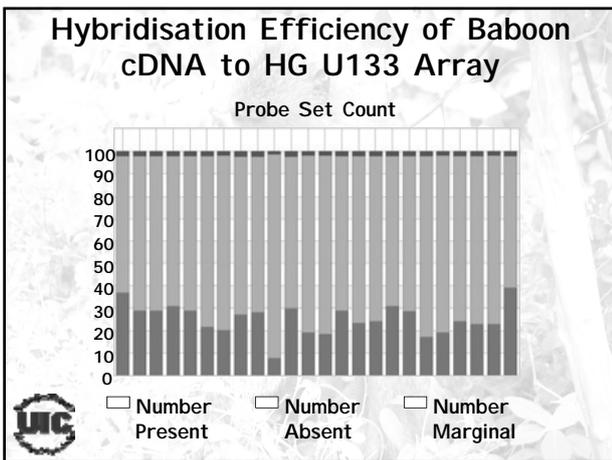


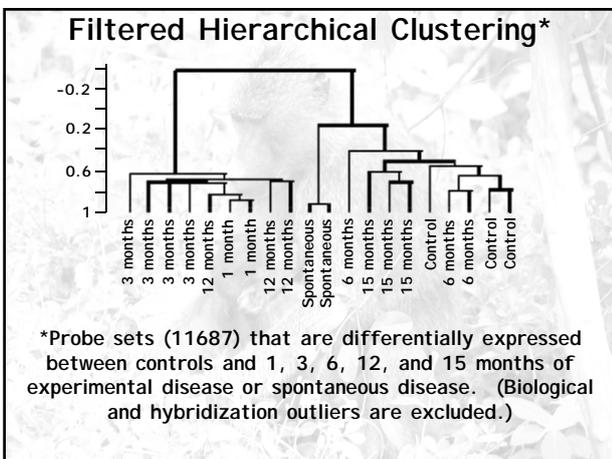










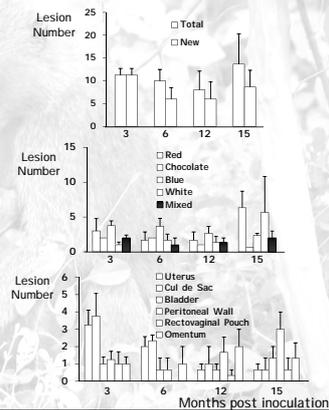


Time Course of Gene Dysregulation

	<u>Up-regulated</u>	<u>Down-regulated</u>
1 Month	2403	2003
3 Months	746	826
6 Months	51	64
12 Months	767	735
15 Months	102	50
Spontaneous	2464	2811

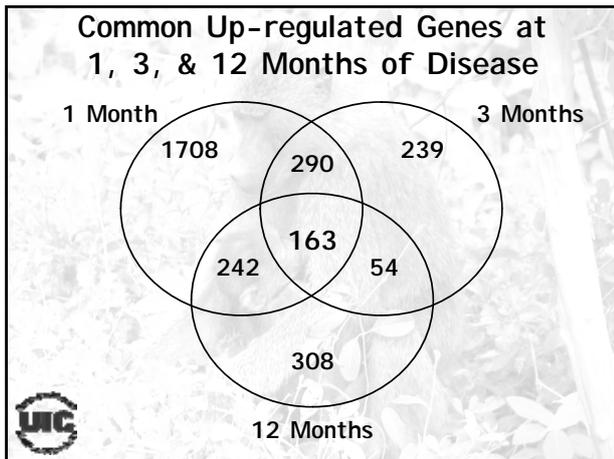
Time Course of Gene Dysregulation

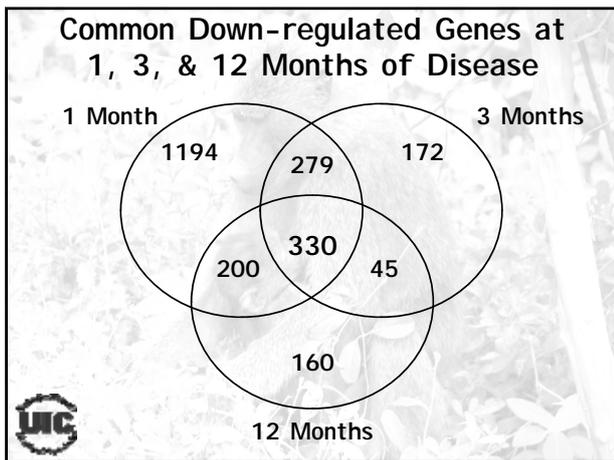
- No correlation with pain
- No correlation with total lesion or new lesion load
- No correlation with lesion type
- No correlation with lesion position



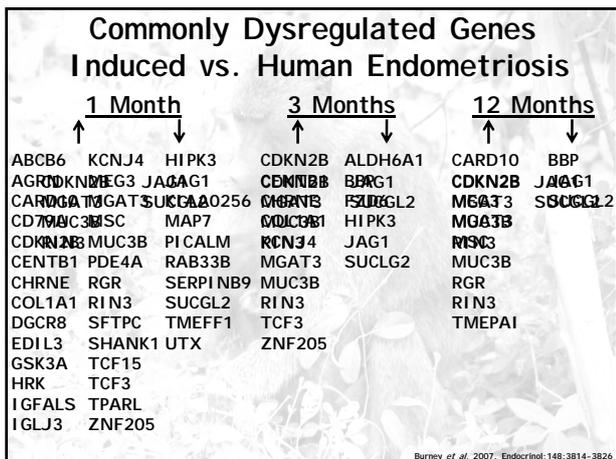
Comparison of Gene Dysregulation

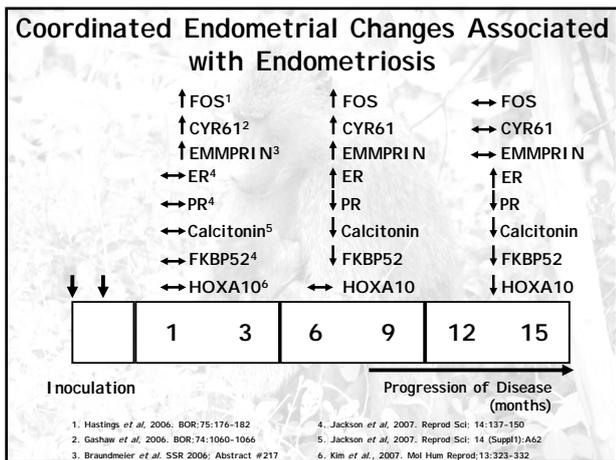
	<u>Up-regulated</u>	<u>Down-regulated</u>
<u>1 month</u>	453 (19%)	609 (30%)
3 months	4	16 (0.8%)
6 months	4 (0.2%)	16 (0.8%)
12 months	405 (17%)	530 (26%)
15 months	5 (0.2%)	24 (1%)
Spontaneous	289 (12%)	145 (7%)
<u>3 months</u>	6 (0.8%)	11 (1.3%)
6 months	6 (0.8%)	11 (1.3%)
12 months	217 (29%)	375 (45%)
15 months	1 (0.1%)	13 (2%)
Spontaneous	109 (15%)	67 (8%)
<u>6 months</u>	2 (4%)	8 (13%)
12 months	2 (4%)	0 (0%)
15 months	2 (4%)	0 (0%)
Spontaneous	15 (29%)	1 (2%)
<u>12 months</u>	6 (0.7%)	12 (2%)
15 months	6 (0.7%)	12 (2%)
Spontaneous	121 (6%)	64 (9%)

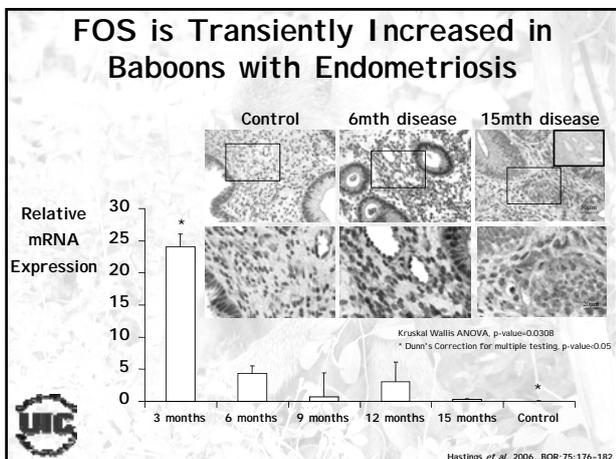


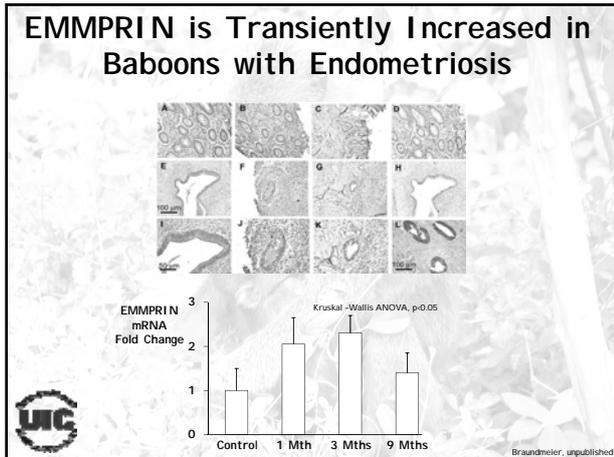


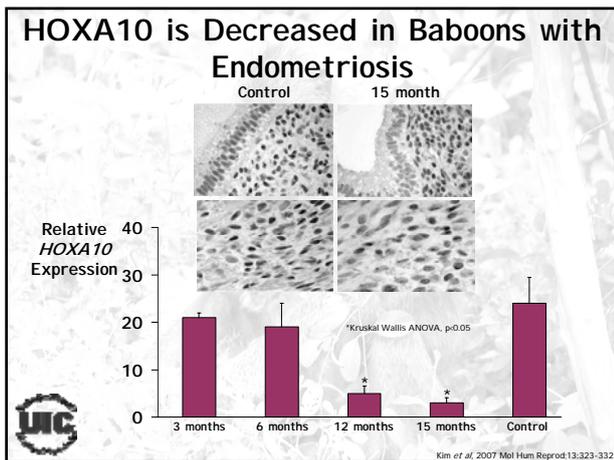
- ### Gene Ontology Classification
- Selected Pathways Regulated by Endometriosis
- EGF-R signaling pathway
 - TGFβ-R signaling pathway
 - WNT signaling pathway
 - Olfactory receptor activity
 - Rho protein signal transduction
 - Ras GTPase activity/signal transduction
 - Angiogenesis/vasculogenesis
 - Chemokine/cytokine activity
 - Immune response/inflammatory response
 - Chromatin assembly/disassembly
 - Methyltransferase/acetyltransferase activity
 - Chromatin binding
 - Microtubule cytoskeleton organization and biogenesis
 - Cell adhesion/cell matrix/extracellular matrix
 - Regulation of cell growth/proliferation
 - Nervous system development
 - GTPase signal transduction

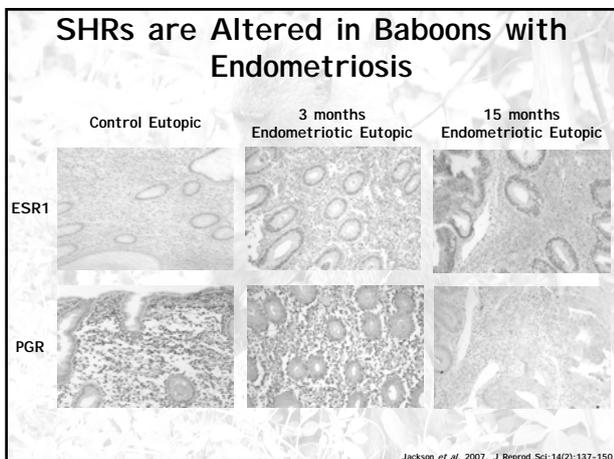


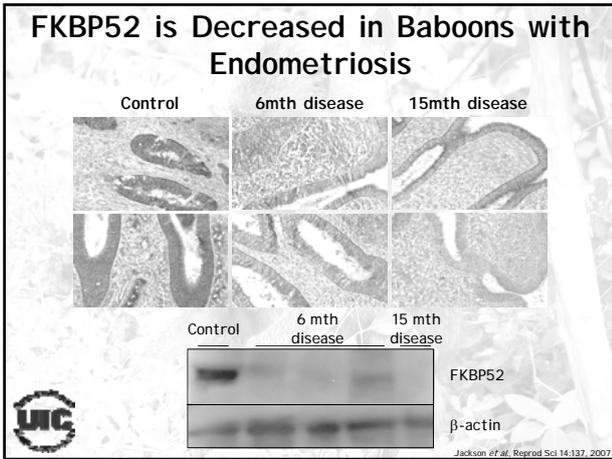


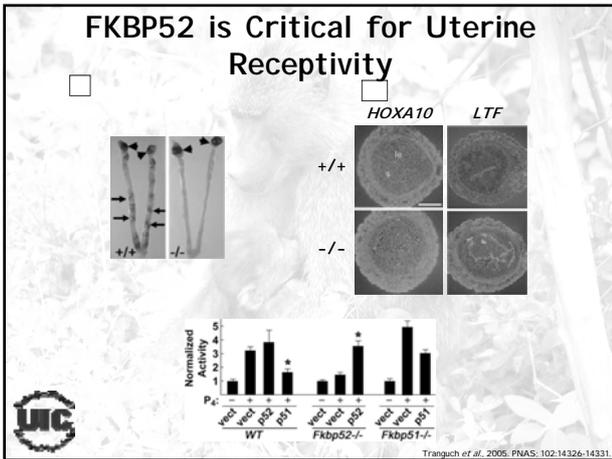


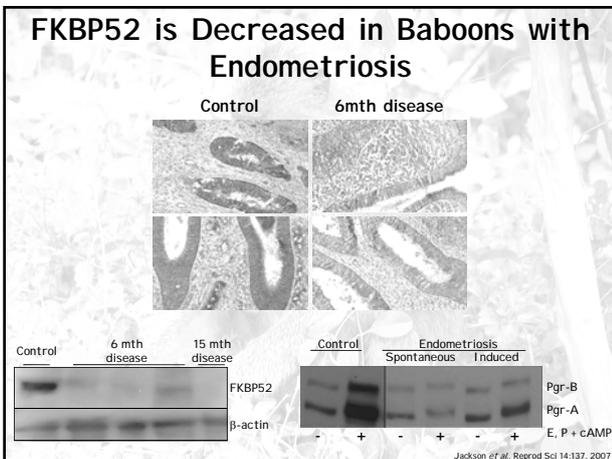


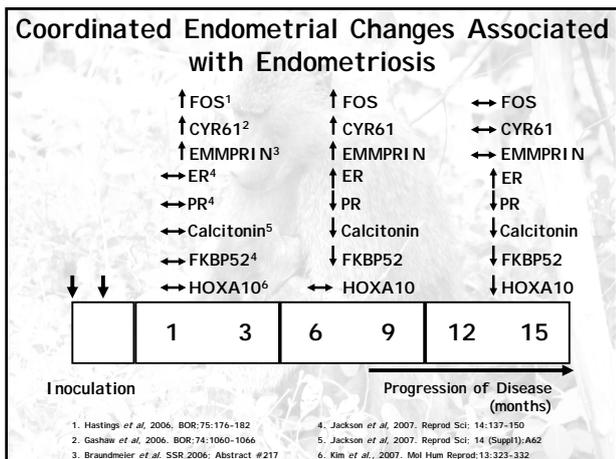










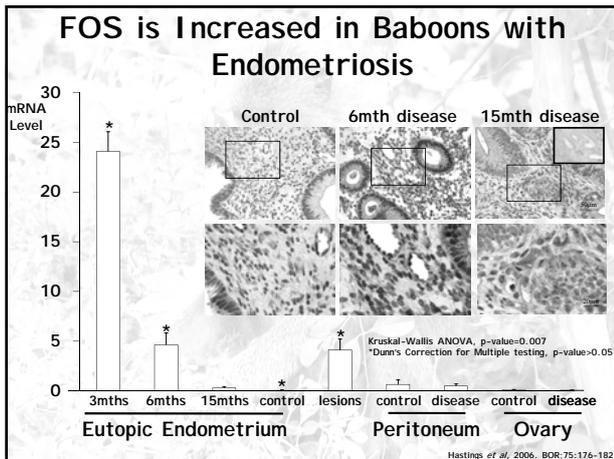


Summary

- Experimental endometriosis in the baboon closely recapitulates the human disease
- Induction of disease has an immediate effect on the transcriptome of the eutopic endometrium
- Endometriosis temporally regulates gene expression

The presence of peritoneal endometriotic lesions impact the transcriptome of the eutopic endometrium

How does endometriosis mediate this massive gene dysregulation?



The Role of *FOS* in the Endometrium

- Murine uterine mRNA specifically induced by E2^{1,2}
- Mediates murine estrogenic proliferative response^{1,2,3}
- FOS protein and mRNA levels are maximal in human proliferative endometrium⁴
- FOS protein and mRNA levels are completely suppressed by MPA *in vivo*⁵
- FOS inhibits the transcriptional activity of PR⁶
- GnRH decreased *c-fos* mRNA in endometrial cells *in vitro*⁷

1. Nephew et al., 1993. J Steroid Biochem Mol Biol:46:281-287
2. Cicatiello et al., 1993. Receptor:2:17-30
3. Mendoza-Rodriguez et al., Mol Reprod Dev:64:379-388
4. Reis et al., 1999. Fertil Steril:71:1125-1132
5. Kirkland et al., 1992. Endocrinol:130:3223-3230
6. Shemshedini et al., 1991. EMBO J:10:3839-3949
7. Luo et al., 2004. Am J Physiol Endocrinol Met: 287: E991-1001

FOS Regulates Methylation

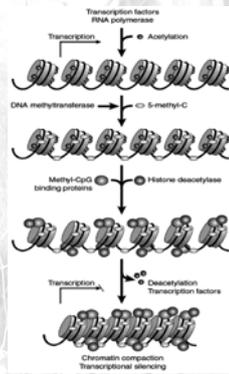
- FOS* induced transformation of fibroblast mediated by DNA methyltransferase 1 (DNMT1)

- inhibition of *FOS* partially reverses transformation

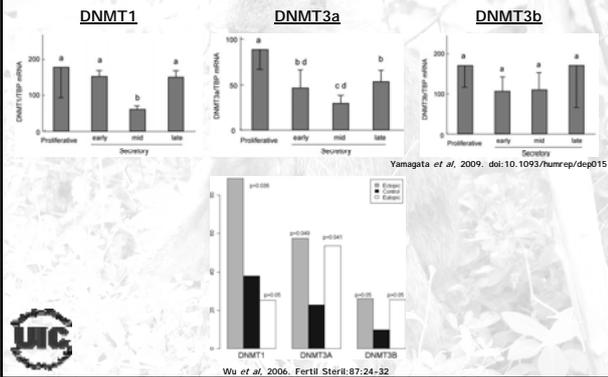
Bakin and Curran, 1999. Science:283:387-390

What is Methylation?

- Epigenetic modification of DNA (genomic imprinting)
- Cytosine in CpG dinucleotides
- DNA methyltransferases (DNMT) establish/maintain pattern of methylation
- Histone deacetylase (HDAC) mediates chromatin compaction
- Transcriptional silencing

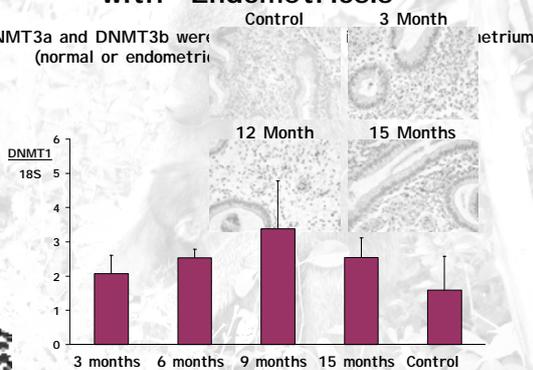


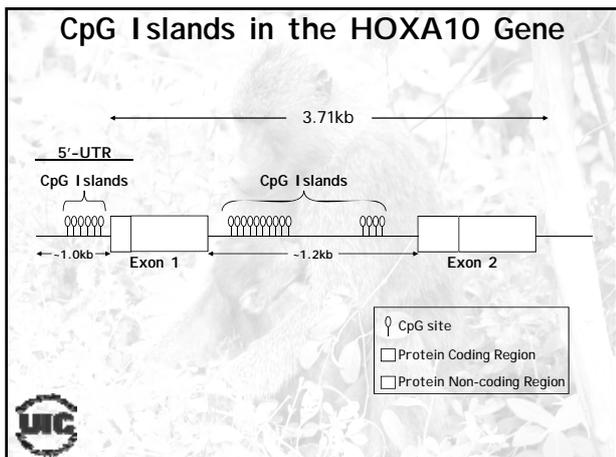
DNMT Enzymes in the Endometrium



DNMT1 Is Increased in Baboons with Endometriosis

•DNMT3a and DNMT3b were (normal or endometriosis)



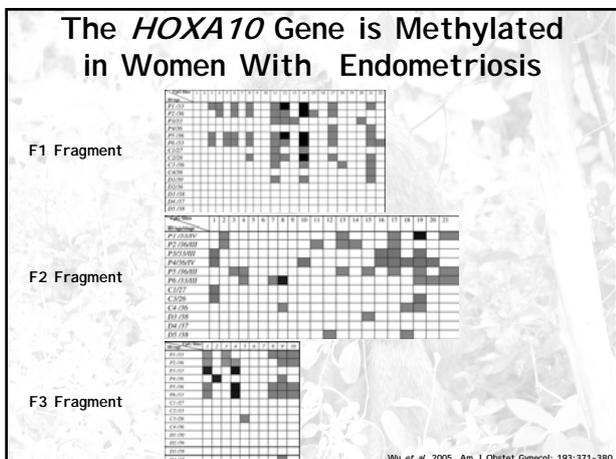


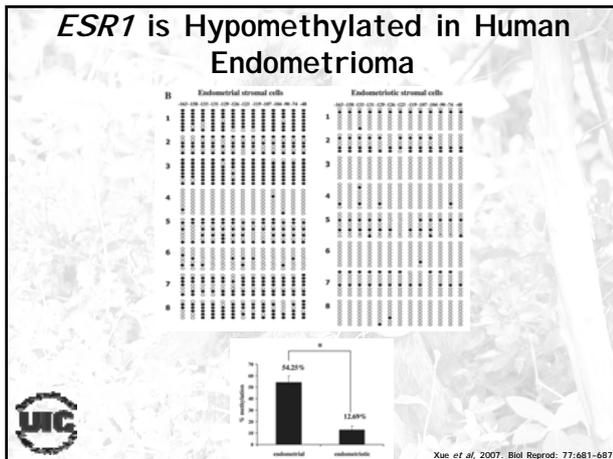
The *HOXA10* Gene is Methylated in Baboons With Endometriosis

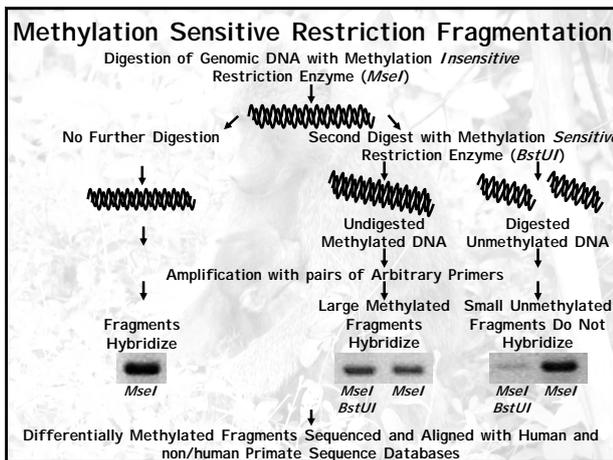
CpG	a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0	2	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	1	0	0	0

LUC

Kim et al. 2007 Mol Hum Reprod 13:323-332







Differentially Methylated Fragments in Baboon Endometriotic Endometrium

Hypo-methylated

Fragment Size	Gene Homology	Location of Fragment	Gene Function or Description
143bp	WNT2B	5'-UTR	Growth & development
515bp	TMEM97	5'-UTR	Regulation of cell death
548bp	OR4D10	5'-UTR	Olfactory receptor
1036bp	PLEKHG2	5'-UTR	Rho signal transduction
1077bp	SHOX	Intron/Exon	Growth & development

Hyper-methylated

Fragment Size	Gene Homology	Location of Fragment	Gene Function or Description
209bp	LGALS9	5'-UTR	Immune cell apoptosis

