Identification of Genetic Variations in *CBL*, *SORBS1*, *CRK*, and *RHOQ*, Key Modulators in the CAP/TC10 Pathway of Insulin Signal Transduction, and Their Association with Type 2 *Diabetes Mellitus* in the Korean Population

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Abstract

Recent evidence has strongly suggested that the CAP/TC10 pathway is involved in the trafficking, docking, and fusion of vesicles containing the insulin-responsive glucose transporter Glut4 to the plasma membrane. However, little is known about how the genes employed in the CAP/TC10 pathway are associated with the development of type 2 diabetes mellitus. In this study, we sequenced 4 genes of the CAP/TC10 pathway [SORBS1, CBL, CRK, and RHOQ] in 24 individuals to identify genetic variations in these loci. A total of 48 sequence variants were identified, including 23 novel variations. To investigate the possible association with type 2 diabetes mellitus, 3 single nucleotide polymorphisms from SORBS1, 3 from CBL, and 4 from RHOQ were genotyped in 1122 Korean type 2 diabetic patients and 1138 nondiabetic controls. Using logistic regression analysis, 1 significant association between SNP rs1376405 in RHOQ and type 2 diabetes mellitus [OR = 8.714 (C.I. 1.714-44.29), p = 0.009] was found in the recessive model. Our data demonstrate a positive association of the RHOQ gene in the CAP/TC10 pathway with T2DM in the Korean population.

Keywords: CAP/TC10, Glut 4, insulin, SNP, type 2 diabetes mellitus

Introduction

During recent years, major advances have been made in our understanding of insulin actions. In the cell, the recognition of insulin by insulin receptor instigates phosphorylation of several intracellular substrates, such as the insulin receptor substrates (IRS1-4) (White and Yenush, 1998), calcineurin B-like protein 1 (Cbl1) (Ribon and Saltiel, 1997), Src homology 2 domain-containing transforming protein (Shc) (Sasaoka *et al.*, 1994), SH2B adaptor protein 2 (SH2B2) (Liu *et al.*, 2002), and p60^{DOK} (Noguchi *et al.*, 1999). Defects in genes involved in the insulin signaling pathway are linked to the pathogenesis of type II diabetes mellitus (T2DM) (Zierath and Wallberg-Henriksson, 2002).

In the CAP/TC10 pathway, the insulin receptor recruits and phosphorylates Cbl proteins through an intermediary adaptor protein called SH2B2 (Liu, et al., 2002). Binding of the SH2 domain of SH2B2 to the phosphorylated insulin receptor facilitates phosphorylation of SH2B2, which then serves as a docking site for Cbl (Hu and Hubbard, 2005). Another adaptor protein, termed sorbin, and SH2 domain-containing 1 (SORBS1), which is a human homolog of Cbl-associated protein (CAP), are involved in the targeting of CbI to lipid raft microdomains (Ribon et al., 1998). Upon phosphorylation of Cbl, the Cbl/CAP complex provides docking sites for the recruitment of the adaptor protein CRKII and the guanyl nucleotide exchange factor C3G (Baumann et al., 2000; Ribon et al., 1996), Recruitment of C3G results in the activation of the small GTP-binding TC10 (protein product of the RHOQ gene). Activation of TC10 results in cytoskeletal rearrangements that are needed to facilitate Glut4 translocation upon insulin signaling as well as insulin-stimulated glucose uptake (Chiang et al., 2001). A recent study of streptozotocin-induced diabetic animals showed that Cbl and SORBS1 gene expression was significantly reduced and that the activation of TC10 was also abridged (Gupte and Mora, 2006). In spite of the pivotal role of the CAP/TC10 pathway in skeletal muscle and adipose tissue, the association of effector genes with T2DM has not been elucidated well. In the present report, we investigated the genetic var-

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iations of 4 genes encoding major components of the CAP/TC10 pathway-*SORBS1, CBL, CRK*, and *RHOQ*-and analyzed the association of their genetic variations with T2DM.

Methods

Subjects and measurements

We studied 1,122 type 2 diabetic cases (586 men and 536 women; age 56.2 ± 8.80 years (mean \pm SD), BMI 25.4 ± 3.31 kg/m²) and 1,138 nondiabetic controls (516 men and 622 women; age 64.2 ± 2.87 years, BMI 23.7 ±3.7 kg/m²). Diabetic patients were recruited from a Korean prospective community cohort study (Ansung-Ansan) according to WHO criteria. Nondiabetic controls had no history of diabetes and had fasting plasma glucose levels less than 6.1 mmol/L and hemoglobin A1c (HbA1c) levels less than 5.8%. The study was approved by the institutional review board of the Korean National Institute of Health. Written informed consent was obtained from all subjects. The clinical characteristics of subjects are shown in Table 1.

Sequence determination of the human CAP/TC10 pathway genes

We sequenced all exons, including exon-intron boundaries, and the promoter region (approximately 1.5 kb) to discover single nucleotide polymorphisms (SNPs) in 24 Korean DNA samples using the ABI PRISM 3730 DNA analyzer (Applied Biosystems, Foster City, CA, USA). Twenty-eight primer sets for the amplification and sequencing analysis were designed based on sequence information from GenBank. Detailed description about primers is available in Supplementary Table 1. Individual sequence variants were verified on chromatograms.

Genotyping

The 10 SNPs were selected for genotyping based on haplotype tagging and minor allele frequency (>0.5%). SNPs were genotyped using amplifying primers and probes designed for TaqMan (Livak, 1999). The Primer Express (Applied Biosystems) program was used to design both the PCR primers and the MGB TaqMan probes. Information regarding primers and probes is available in Supplementary Table 2. The detailed experimental procedures can be found in Park *et al.* (2006).

Table 1. Clinical characteristics of study subjects

Control Case Variables Abbreviation Ν Mean Std Ν Mean Std Demographic variables 1,138 64,237 2,873 1,122 56,200^a 8.800 Age (yrs) 50,500 9,390 Onset (yrs) 577 Duration (mths) 577 82,200 83,000 516 (45,34)/622 (54,66) Sex (men/women) 586 (52.2)/536 (47.8)^a Obesity index Body mass index (kg/m²) BMI 1,138 23,660 3,143 1,121 25,400^a 3,140 WHR 0,066 0,070 Waist-to-hip ratio 1,137 0 913 1,121 0 920 Glucose metabolic index GLU0 1.138 80,625 7,755 869 130,700^a 47,400 Fasting plasma glucose (mg/dl) 259,700^a Plasma glucose after 60 min of oral GLU60 1,135 133,307 37,708 695 67,300 glucose tolerance test (OGTT) (mg/dl) GLU120 101,917 21,315 695 252,800^a 70,700 Plasma glucose after 120 min of 1,138 OGTT (mg/dL) INS0 7,459 6,754 872 8 580^a 5,990 Fasting plasma insulin (µ U/ml) 1.138 Plasma insulin after 60 min of INS60 1,135 33,320 31,813 24,100^a 26,300 692 OGTT (μ U/ml) Plasma insulin after 120 min of **INS120** 1,138 23.436 24.317 692 30,000^a 36,500 OGTT (µ U/ml) 0,241 7.530^a 1,740 Hemoglobin A1c (%) HbA1c 1,138 5.486 1,122 Homeostasis model assessment of HOMA-IR 1,138 1.493 1.364 869 2.770 2,600 insulin resistance

^asignificant differences (p < 0.05) of variables between controls and cases were compared by student t-test for all variables except sex, which was compared by chi square test.

SNPs	Codominant		Dominant		Recessive	
	OR (95%CI)	р	OR (95%CI)	р	OR (95%CI)	р
SORBS1						
-19147C>T	0,907 (0,755~1,091)	0,301	0,913 (0,734~1,137)	0,418	0,767 (0,454~1,293)	0,319
-18485G>T	0.907 (0.755~1.090)	0,299	0,913 (0,733~1,137)	0,416	0,766 (0,454~1,294)	0,319
+12922C>A	0,988 (0,791~1,232)	0,912	1,037 (0,811~1,325)	0,774	0,552 (0,233~1,311)	0,178
CBL	,				,	
+69002C > T	1,048 (0,901~1,219)	0,545	1.088 (0.864~1.370)	0,472	1,032 (0,791~1,346)	0,817
+71446T>G	0.941 (0.758~1.168)	0,582	0,925 (0,727~1,176)	0,522	1,035 (0,476~2,254)	0,930
+79066C>T	0.850 (0.579~1.247)	0,406	0.830 (0.562~1.225)	0,348	N/A	N/A
RHOQ	,	-		-		
-1617C>A	1,291 (0,992~1,681)	0,058	1,219 (0,921~1,613)	0,166	8,714 (1,714~44,29)	0,009
-1601G>A	1,008 (0,800~1,270)	0,948	1,049 (0,813~1,354)	0,714	0.621 (0.245~1.578)	0,317
-1510T>C	1,095 (0,937~1,279)	0,254	1.061 (0.859~1.310)	0,582	1,299 (0,935~1,806)	0,119
+751G>A	0.952 (0.532~1.704)	0.870	0.952 (0.532~1.704)	0.870	N/A	N/A

Table 2. Logistic regression analysis of the association between 10 SNPs and T2DM, adjusted by age, sex, and BMI

Underline indicates a significant result.

Statistics

To determine whether each individual variant was in equilibrium at each locus in the population (Hardy-Weinberg equilibrium), χ^2 tests were applied. We examined the linkage disequilibrium (LD) coefficient. γ^2 . between all pairs of biallelic loci (Hedrick and Kumar, 2001). Genotype frequencies were compared between patients and controls in 3 different modes (codominant, dominant, and recessive) by using logistic regression while controlling for age, sex, and BMI. Genotypes were given codes of 0, 1, and 2; 0, 1, and 1; and 0, 0, and 1 in the codominant, dominant, and recessive models, respectively. The SAS statistical software package (SAS Institute Inc. Cary, NC, USA) was used to perform general statistical analyses. Statistical significance was determined by a two-tailed value of p<0.05 for logistic regression

Results and Discussion

To discover genetic variations in the tested genes, we sequenced all exons and their boundaries, including 1.5 kb upstream of the *SORBS1, CBL, CRK*, and TC10 genes, in the DNA samples of 24 unrelated Koreans. We identified 48 sequence variants (including 23 novel polymorphisms): 15 SNPs in the promoter region (1 SNP in *CRK*, 8 SNPs in *SORBS1*, and 6 SNPs in *RHOQ*), 1 SNP in the 5' UTR of *CBL*, 2 synonymous SNPs in coding sequences (1 SNP in *CBL* and 1 SNP in *RHOQ*), 23 SNPs in introns (8 SNPs in *CBL*, 12 SNPs in *SORBS1*, and 3 SNPs in *RHOQ*), and 7 SNPs in the 3' UTR (3 SNPs in *CRK* and 4 SNPs in *SORBS1*) (see Supplementary Table 3). The locations of these poly-

morphisms in relation to the genomic structures of each participant in the CAP/TC10 pathway are described in Supplementary Fig. 1.

Next, we selected 10 SNPs for larger-scale genotyping based on LDs, position, and frequencies (>0.05). SNP positions (marked with asterisks in The Supplementary Fig. 1) from the translation start site are -19147C>T (rs3806202) in the promoter region of SORBS1; -18485G>T (rs4077664) in intron 1 of SORBS1; +12922C>A (novel) in SORBS1 exon 13 of the 3' untranslated region (3' UTR); +69002C>T (rs3794073) in intron 5 of CBL; +71446T>G (rs2510152) in intron 7 of CBL; +79066C>T (rs227988) in exon 11 of CBL; -1617C)A (rs1376405), -1601G>A (rs1868844), and -1510T>C (rs3754554) in the promoter region of RHOQ, and +751G>A (novel) in exon 2. No deviation from Hardy-Weinberg equilibrium was observed in the genotype frequencies of the 10 SNPs in the 1138 nondiabetic controls.

Associations of the 10 SNPs with the risk of T2DM were analyzed using logistic regression, with adjustments for age, sex, and BMI as covariates. The results of the logistic regression analysis are described in Table 2. rs1376405, located in the promoter region of the RHOQ gene, had a risk for diabetes in the recessive mode, with an odds ratio of 8.714 (C.I. $1.714 \sim 44.29$) and a p-value=0.009 in the comparison between non-diabetic controls and cases.

Overexpression of the *RHOQ* gene has been shown to inhibit insulin-stimulated GLUT4 translocation in adipocytes (Hou and Pessin, 2007). One hypothesis is that the genetic variation, rs1376405 in the promoter region of *RHOQ*, affects the expression level of TC10 protein, which in turn influences Glut4 translocation to the plasma membrane upon the insulin stimulus. As a result, the genetic variation of the *RHOQ* gene could lead to the increased susceptibility to the development of type 2 diabetes mellitus in the Korean population. With further functional studies in row, the rs1376405 SNP in the *RHOQ* locus could be exploited for the prediction of T2DM in the Korean population.

Acknowledgments

This study was supported by a grant of the Korea Healthcare technology R&D Project, Ministry for Health, Welfare & Family Affairs, Republic of Korea (A090318).

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