



ISSN: 2586-7342

KJFHC website: <http://accesson.kr/kjfhc>doi: <http://dx.doi.org/10.13106/kjfhc.2024.vol10.no6.1>

The Inhibitory Effects of KRGE on Mixed Granulocytic Asthma due to Der p 38

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Received: October 22, 2024. Revised: November 29, 2024. Accepted: December 05, 2024.

Abstract

Asthma is a chronic inflammatory airway disease triggered by allergens including house dust mite, food and environmental factors. Korean red ginseng extract (KRGE) has anti-inflammatory effects in asthma, atopic dermatitis and allergic rhinitis. This study aimed to evaluate the suppressive effects of KRGE on mixed-granulocytic asthma induced by Der p 38. In mixed granulocytic asthma-like the mice due to Der p 38, KRGE administration reduced the infiltration of neutrophils and eosinophils in the lungs. In addition, KRGE suppressed the levels of Th1, Th2 and Th17 cytokines in bronchoalveolar lavage fluid (BALF) and reduced serum IgE level. In BEAS-2B cells, Der p 38 increased the secretion of inflammatory cytokines such as interleukin (IL)-6, IL-8, and monocyte chemoattractant protein-1 (MCP-1), which was suppressed by pretreatment with KRGE. Neutrophil apoptosis was delayed by Der p 38 and it was inhibited by KRGE pretreatment. The pro-apoptotic effects of KRGE on neutrophils were closely associated with the activation of caspase 9 and caspase 3, and a decrease in the B-cell leukemia/lymphoma 2 protein (BCL-2)/BCL-2-associated X protein (BAX) expression ratio. These results suggest that KRGE has anti-inflammatory effect in asthma, especially mixed granulocytic asthma, and serves as a potential therapeutic alternative for alleviating mixed granulocytic asthma.

Keywords: Asthma, Korean Red Ginseng Extract, Der p 38, Neutrophil, Cytokine

Major Classifications: Food science, Food Healthy Food, Health management

1. Introduction

Asthma is a chronic inflammatory disease of the airways leading to cough, wheeze, shortness of breath, chest tightness, and mucus over-production (Mims, 2015; Svenningsen & Nair, 2017). Patients with asthma can be categorized into four unique phenotypes, namely eosinophilic, neutrophilic, mixed granulocytic, and paucigranulocytic asthma, based on the analysis of the inflammatory cell count in the sputum (Xiao et al., 2022). In

addition, endotypes of asthma are broadly regarded as type 2 (T2) high or T2-low (Kuruville et al., 2019). T2-low asthma shows neutrophilic inflammation, which is deeply related to asthma severity (Ricciardolo et al., 2021; Ray & Kolls, 2017). House dust mite (HDM) is the major allergens affecting allergy pathogenesis (Kim et al., 2013). Der p 38, a component of HDM, is recently identified as a unique allergen that induces the infiltration of neutrophils and eosinophils in a mouse model (Kim & Lee, 2016; Hong et al., 2021). Furthermore, Der p 38 upregulates expression of

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cytokines such as interleukin (IL)-6, IL-8, and monocyte chemoattractant protein-1 (MCP)-1 inhibiting neutrophil apoptosis (Lee, 2022; Lee, 2023).

Korean ginseng has been traditionally used for several millennia in Asian countries, including Korea, China, and Japan, as a therapeutic agent for allergic diseases (So et al., 2018). Korean red ginseng extract (KRGE) reduced IL-5 and increased IL-10 in patients with allergic rhinitis (Jung et al., 2021). Also, KRGE is useful in the management of atopic dermatitis by decreasing the release of TNF- α , IL-1 β , IL-6, and IL-8 (Kee et al., 2017). KRGE exerts its therapeutic effects against atopic dermatitis by inhibiting the T helper 2 (Th2)-mediated inflammation and reducing the itching sensation. The proactive systemic administration of KRGE may effectively inhibit early allergic sensitization and suppress Th2 response (Sumiyoshi et al., 2010; Lee et al., 2017). KRGE may contribute to its anti-inflammatory effects by improving antioxidant defense (Park et al, 2020).

Although the effects of KRGE on airway hyper-responsiveness (AHR) and airway inflammation in eosinophilic asthma has been studied, its effect on mixed granulocytic asthma has not yet been conducted and remains unclear (Jeong et al, 2010; Bae et al, 2021). In this study, we investigated the effects of KRGE on mixed-granulocytic asthma *in vitro* and *in vivo*.

2. Materials and Methods

2.1. Reagent

DMEM/F12, RPMI 1640 and FBS were purchased from Gibco™ (Waltham, MA, USA). The Korean Red Ginseng extract used in this research was obtained from the Korea Plant Extract Bank at the Korea Research Institute of Bioscience and Biotechnology (Daejeon, Korea). Cleaved caspase 3, cleaved caspase 9, BAX and BCL-2 antibodies were purchased from Cell Signaling Technology (Beverly, MA). Antibodies against caspase 3, caspase 9, and ERK2 were obtained from Santa Cruz Biotechnology (Santa Cruz, CA).

2.2. Preparation of Recombinant Der p 38 Protein

Briefly, the mature Der p 38 gene (aa 21-150, GenBank accession number MT273069.1) was cloned into a pETDuet-1 expression vector, and recombinant Der p 38 protein tagged with His was expressed and isolated using a nickel column (Merck Millipore, Darmstadt, Germany) as described in our previous paper (Jeon et al., 2021).

2.3. Cell Culture

Human lung epithelial BEAS-2B cells were cultured in Dulbecco's modified Eagle's medium, supplemented with 10% heated-inactivated fetal bovine serum, penicillin (100 U/mL), and streptomycin (100 μ g/mL). The cells were maintained at sub-confluence in a 5% CO₂ incubator at 37°C. BEAS-2B cells were cultured at a density of 5x10⁵ cells per well in a 6 well plate.

2.4. ELISA

To measure cytokine level, BEAS-2B cells were treated with the Der p 38 (10 μ g/mL) or/and KRGE (20 μ g/mL) for 48 h, after which the supernatant was collected by centrifugation. The concentration of interleukin (IL)-6, IL-8, and monocyte chemoattractant protein-1 (MCP-1) in the supernatant was measured with a sandwich enzyme-linked immunosorbent assay (ELISA) using OptEIA™ Set human IL-6 (555220), IL-8 (555244), and MCP-1 (555179) (BD Biosciences, San Diego, CA, USA) according to the manufacturer's instructions. ELISA kit for mouse IgE (555248) ELISA Kit (BD Biosciences) was used to measure immunoglobulins in the mice sera. Absorbance was measured at 450 nm using an automated microplate reader (ThermoFisher scientific, Waltham, MA, USA).

2.5. Neutrophil Isolation and Western Blotting

Heparinized peripheral blood (15 mL) was collected from healthy subjects (n=3). After Ficoll-Hypaque (GE Health care, Chicago, IL, USA) gradient centrifugation, neutrophils were separated using the CD16 microbeads magnetic cell sorting kit (Miltyenyi Biotec, Bergisch, Gladbach, Germany). After incubating with Der p 38 for 48 h, the cells were harvested and lysed in lysis buffer (TransLab, Daejeon, Korea) and centrifugated at 12,000 \times g for 15 min at 4°C. The supernatant was collected as total lysate. Protein concentration of the lysate was measured using a protein assay kit (Thermo Scientific). Proteins (40 μ g/lane) were separated on 12% SDS-PAGE and transferred to nitrocellulose membrane. The membrane was incubated with primary antibodies for 1 h at RT (1:1,000). After three washes with TBS-T, it was incubated with secondary antibodies (1:3,000) for 1 h at RT, and was developed using the iBright CL750 Imaging System (A44116, Thermo scientific, MA, USA).

2.6. Detection of Apoptosis

Neutrophils and eosinophils treated with Der p 38 or/and KRGE for 24 h were incubated with FITC-labeled annexin V and propidium iodide (PI) (BD Biosciences) for 15 min at room temperature. The stained cells were analyzed by RF-

500 (Sysmex Corporation, Kobe, Japan) and were classified as early apoptotic cells, late apoptotic cells, necrotic cells, and viable cells. Early and late apoptotic cells (annexin V+/PI- and annexin V+/PI+ cells, respectively) are considered apoptotic cells, and the percentage of the cells was evaluated.

2.7. Asthma Induction by Der p 38 in Mice

Six-week-old female C57BL/6J mice were maintained in a specific pathogen-free (SPF) facility. Each group (n=5) was immunized by the intraperitoneal (IP) injection of PBS or Der p 38 (100 µg/50 µL). The groups were administered intranasal (IN) injection of PBS or Der p 38 (50 µg/50 µL) from days 21 to 28 after the first sensitization. The PBS-treated group was considered as the negative control. The Der p 38-treated group was treated with or without oral injection of 50 mg/kg of KRGE. KRGE was dissolved in PBS, and then was diluted to less than 1/100 with PBS. All animal experiments used in this study were under a protocol approved by the Institutional Animal Care and Use Committee of the Eulji University (EUIACUC21-24).

2.8. Collection of Bronchoalveolar Lavage Fluid (BALF)

BALF was collected three times by lung lavage via the trachea with 1 mL of PBS. The BALF were centrifuged, and the cells in the BALF were resuspended in 100 µL of PBS for total cell and differential counts. The cells suspended in PBS were attached to a slide by cytospinning (Hanil Scientific Inc, Gimpo, Korea) and stained with a Diff-Quick Kit (Sysmex Corporation). The ratio of each leukocyte was represented as a percentage.

2.9. Statistical Analysis

All data are presented as the means ± SD. Statistical inter-group differences were analyzed using ANOVA with Tukey's post-hoc test for more than two groups. The SPSS statistical software package (Chicago, IL, USA) was used for statistical evaluation. A *p* value < 0.05 is considered statistically significant.

3. Results

3.1. KRGE Inhibits the Increase of Neutrophils and Eosinophils in Mixed-granulocytic Asthma-like Mice.

Mixed granulocytic asthma was induced in mice through intraperitoneal (IP) and intranasal (IN) injections of Der p 38 (Fig 1A). Following asthma induction with Der p 38, the total number of cells increased, but KRGE administration inhibited their infiltration (Fig 1B). Neutrophils and eosinophils increased after asthma induction, which was related to development of mixed granulocytic asthma. KRGE treatment significantly reduced the inflammatory cells (*p*<0.05) (Fig 1C, D). Dexamethasone was used for the positive control.

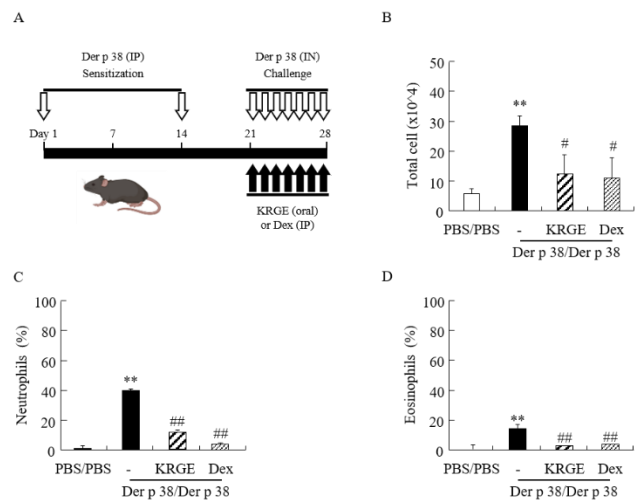


Figure 1: KRGE blocks the infiltration of neutrophils and eosinophils in mixed-granulocytic asthma-like mice (A) Experimental timeline for mixed-granulocytic asthma-like mice induced by Der p 38. (B) Total cell counts in BALF were evaluated. Neutrophils (C) and eosinophils (D) were counted. Data are presented as the means ± SD. ***p* < 0.01 indicates a significant difference between the control and Der p 38-treated groups. #*p* < 0.05 and ##*p* < 0.01 indicates a significant difference between the Der p 38 and Der p 38 + KRGE or dexamethasone-treated groups.

3.2. KRGE Inhibits Th1, Th2 and Th17 Cytokines in Mixed-granulocytic Asthma-like Mice.

Because Der p 38 induces mixed-granulocytic asthma, the alteration of cytokines in BALF was examined. Der p 38 increased Th 1 cytokine, IFN-γ, Th 2 cytokines such as IL-4, IL-5, and IL-13, Th 17 cytokine, IL-17A (Fig 2) in BALF. KRGE reduced IFN-γ, IL-4, IL-5, IL-13, and IL-17A. IL-10 related to inhibition of T cells was not altered by Der p 38 and KRGE. In addition, KRGE suppressed serum total IgE increased by administration of Der p 38 (Fig 3).

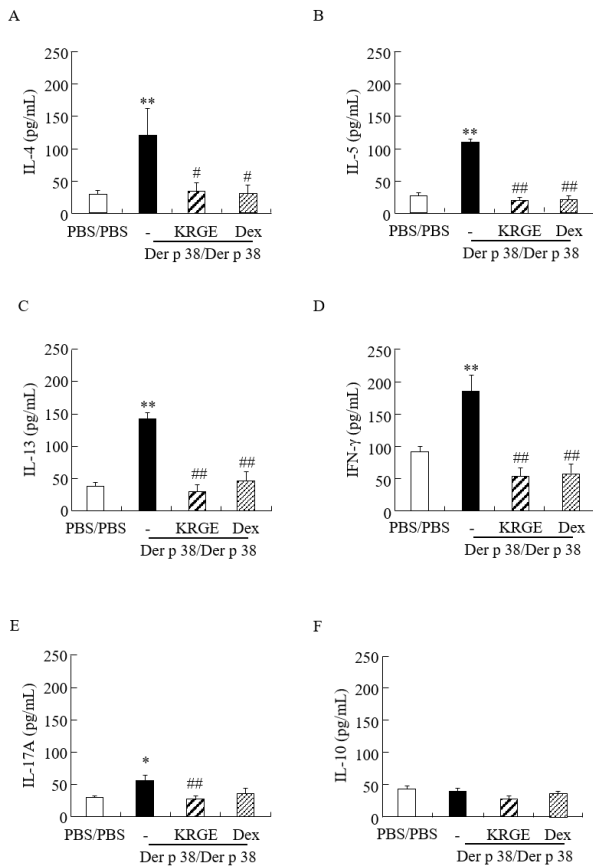


Figure 2: KRGE suppresses the expression of Th1, Th2 and Th17 cytokines. C57BL/6J mice were exposed to Der p 38 (100 μ g/50 μ L) to induce mixed-granulocytic asthma, and KRGE (20 μ g/mL) was administered orally. The concentrations of IL-4 (A), IL-5 (B), IL-13 (C), IFN- γ (D), IL-17A (E), and IL-10 (F) were measured by ELISA in BALF. Data are presented as the means \pm SD. ** p < 0.05 and ** p < 0.01 indicate a significant difference between groups. ## p < 0.01 indicates a significant difference between the Der p 38 and Der p 38 + KRGE or dexamethasone-treated groups.

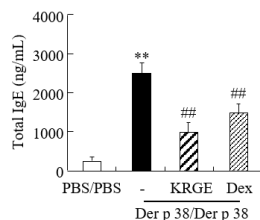


Figure 3: KRGE suppresses the expression of total IgE, IgG1, and IgG2a in mouse serum. C57BL/6J mice were exposed to Der p 38 (100 μ g/50 μ L) to induce mixed-granulocytic asthma, and KRGE (20 μ g/mL) was

administered orally. The expressions of Total IgE in the mouse serum were measured. Data are presented as the means \pm SD. ** p < 0.01 indicates a significant difference between the control and Der p 38-treated groups. ## p < 0.01 indicates a significant difference between the Der p 38 and Der p 38 + KRGE or dexamethasone-treated groups.

3.3. KRGE Inhibits the Secretion of IL-6, IL-8, and MCP-1 by BEAS-2B Cells

To investigate whether KRGE affects the viability of BEAS-2B cells, the cell survival was assessed. The KRGE in concentrations ranging from 10 μ g/mL to 20 μ g/mL was not effective on cell viability for 48 h (Fig 4A). To investigate the anti-inflammatory effect of the KRGE in detail, we assessed the inhibition of IL-6, IL-8, and MCP-1 secretion related to neutrophil inflammation in BEAS-2B cells. As shown in Fig 4B, the IL-6, IL-8, and MCP-1 levels were elevated by Der p 38, and KRGE reduced the expression of these cytokines. These results suggest that the KRGE acts as a vital suppressor of neutrophil survival and activation induced by Der p 38.

3.4. KRGE Suppresses the Anti-apoptotic Effect of Der p 38 on Neutrophils

Since KRGE suppresses the levels of IL-6, IL-8, and MCP-1 due to Der p 38, we investigated whether it alters neutrophil apoptosis. As shown in Fig 5A, Der p 38 significantly inhibited the spontaneous apoptosis of neutrophils. Co-treatment with Der p 38 and KRGE blocked the anti-apoptotic effect of Der p 38 on neutrophils. Neutrophils undergo constitutive apoptosis through the activation of caspase 9 and caspase 3 after separating from peripheral blood. Der p 38 delayed neutrophil apoptosis by blocking the activation of caspase 9 and caspase 3, while KRGE restored the inhibition of both proteins (Fig 5B, C). Additionally, Der p 38 increased the ratio of B-cell leukemia/lymphoma 2 protein (BCL2) to BCL-2-associated protein X (BAX), and KRGE suppressed this increase (Fig 5D-F).

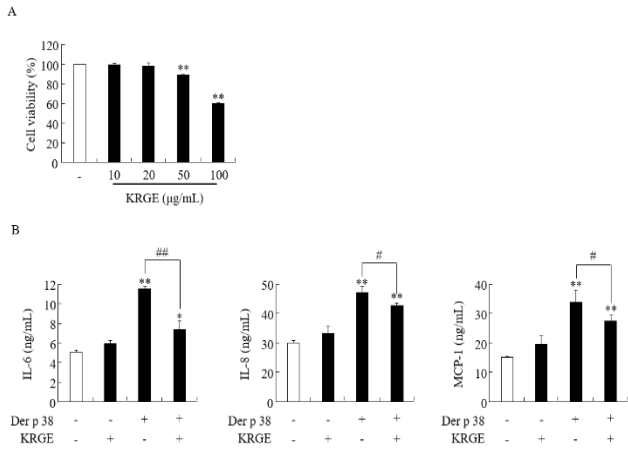


Figure 4: KRGE inhibits the secretion of IL-6, IL-8, and MCP-1 in BEAS-2B cells. (A) BEAS-2B cells were incubated with the KRGE at a concentration of 10, 20, 50, and 100 µg/mL for 48 h. The data was expressed as the relative ratio to the absorbance of the untreated cells, which was set at 100%. (B) The cells were treated with Der p 38 (10 µg/mL) or KRGE extract (20 µg/mL), or co-treated with Der p 38 and KRGE. The concentration of IL-6, IL-8, and MCP-1 was measured with ELISA in the cell supernatant. Data are expressed as the means ± SD; ***p* < 0.01 indicate a significant difference between the control and Der p 38-treated groups. #*p* < 0.05 and ##*p* < 0.01 indicates a significant difference between the Der p 38 and Der p 38 + KRGE-treated group.

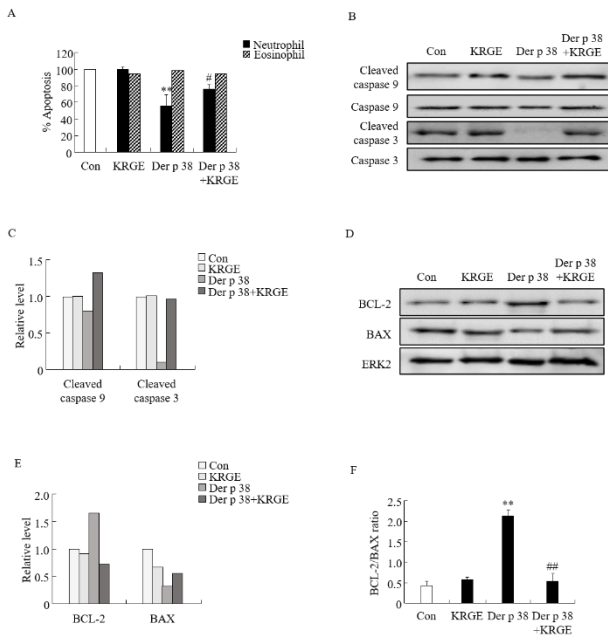


Figure 5: KRGE inhibits the anti-apoptotic effect of Der p 38 on neutrophils. (A) Neutrophils were isolated and incubated for 24 h in the absence or presence of Der p 38 (10 µg/mL)

or/and KRGE (20 µg/mL). Apoptotic cells were evaluated using annexin-PI staining. Control was set to be 100% (n=3). (B and D) The expressions of cleaved caspase 9, caspase 3, BCL-2, and BAX were detected by western blotting. (C and E) Densitometric data from B and D were presented relative to the negative control set at 1. (F) Ratio of BCL-2/BAX were calculated by densitometric analysis. Data are presented as the means ± SD; ***p* < 0.01 indicate a significant difference between the control and Der p 38-treated groups. #*p* < 0.05 and ##*p* < 0.01 indicate a significant difference between the Der p 38 and Der p 38 + KRGE-treated groups.

4. Discussion

Asthma phenotypes are currently classified into type 2 (T2)-high and T2 low asthma (Maison et al., 2022). T2-low asthma (non-T2) is often associated with a previous eosinophilic phenotype, which typically responds well to anti-inflammatory treatment (Ntontsi et al., 2017). In contrast, mixed-granulocytic asthma, a subtype involving both neutrophils and eosinophils, tends to be resistant to steroid therapy, highlighting the urgent need for novel therapeutic options (Pignatti et al., 2022). Neutrophil apoptosis regulation is a critical factor in T2-low asthma (Ricciardolo et al., 2021; Lee, 2014). In a prior study, we identified Der p 38 as a key contributor to mixed granulocytic asthma, facilitating the establishment of the asthma mouse model. Notably, Der p 38 influences neutrophil apoptosis, a process central to the development of mixed granulocytic phenotype, unlike other components of house dust mite (Hong et al., 2021; Lee, 2023). Neutrophils play a crucial role in asthma, contributing to airway remodeling and mucus hypersecretion, which lead to airway narrowing (Yamasaki et al., 2021). KRGE inhibited the infiltration of neutrophils and eosinophils due to Der p 38 (Fig. 1). Although it suppresses the movement of inflammatory cells into the lung, its effects on mucus secretion and airway remodeling remain unknown and require further investigation.

Korean red ginseng is traditionally used as an important herbal medicine in Far East Asia (Lee et al., 2015). An earlier investigation, it prevented ovalbumin (OVA)-induced morphological changes in the pulmonary system by restoring the balance of Th1/Th2 cytokines including transcription factors, and blocked inflammatory pathways such as NF-κB/COX-2 and PGE2 (Lee et al., 2021). Similarly, KRGE has shown anti-asthmatic effects in an OVA-sensitized mouse model (Lim et al., 2015). Additionally, KRGE inhibits the activation of mitogen-activated protein kinases (MAPKs) and transcription factors, such as NF-κB and c-Fos in lung inflammatory responses (Lee et al., 2018). In this study, we focus on the

cytokines associated with neutrophils in mixed-granulocytic asthma. Our results indicate that the KRGE suppresses the secretion of cytokines, including IL-6, IL-8, and MCP-1 (Fig 4). Moreover, we found that KRGE reduces T1, T2, and Th17 cytokines as well as IgE, indicating that it inhibits the pathogenic mechanism of mixed-granulocytic asthma mice. (Figs 2 and 3). Additionally, KRGE increases IgG1 and IgG2a associated with alleviation of asthmatic symptoms (Supplemental Fig 1).

As shown in Fig 4, the neutrophil apoptosis was delayed by Der p 38; however, KRGE inhibits the suppressive effect. Caspase-9 and caspase-3 are activated by downstream of the initiators of apoptosis, which occurs during neutrophil apoptosis (Bram et al., 2008). Der p 38 delayed neutrophil apoptosis by inhibiting the activation of caspase 9 and caspase 3, while KRGE effectively reversed this suppression of both proteins (Fig 5).

In conclusion, this study demonstrates that KRGE inhibits the secretion of Th2 and Th17 cytokines, resulting in reduction of neutrophils and eosinophils in mixed granulocytic asthma-like mice. In addition, it inhibits IL-6, IL-8, and MCP-1, thereby suppressing the delayed neutrophil apoptosis. KRGE may be a promising candidate for treatment or prevention of specific asthma phenotype.

Availability of Data and Materials

All supporting information including table of results and detailed methods are available upon request.

Acknowledgement

none

Conflict of Interest

Authors declare that they have no conflicts of interests.

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