Research Article

ELISA for Aging Biomarkers Induced by Telomere Dysfunction in Human Plasma

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Background. We identified cathelicidin related antimicrobial protein (CRAMP) secreted from telomere dysfunctional bone marrow cells of late generation telomerase knockout mice (G4mTerc^{-/-}), increased in blood and various tissues. It can represent human aging and disease. The main aim of this study is to investigate the sensitive direct enzyme-linked immunosorbent assay (ELISA) method to analyze the human aging and disease in plasma and the detailed methods to quantify the direct ELISA of these aging biomarkers. **Methods.** Telomere lengths of 50 healthy persons are measured with real-time PCR in blood cells. Plasma samples from all subjects are analyzed using direct ELISA. **Results.** From 25 years old person to 78 years, the telomere length becomes shorter during aging. In blood plasma, the expression levels of CRAMP increase during human aging. There is a reverse correspondence between the telomere length and the plasma CRAMP level. We also find that the fresh plasma, the frozen plasma which thawed less than 3 times, and the plasma kept in the room temperature less than 3 hours are better for the ELISA analysis of CRAMP in the plasma. **Conclusion.** This CRAMP ELISA could become a powerful tool for investigating the relationship between human aging and telomere length shortening.

1. Introduction

Telomeres cap the chromosome ends and prevent the activation of DNA damage checkpoints inducing cell cycle arrest (senescence) or apoptosis [1, 2]. Lots of research reported that telomere shortening occurred during human aging and chronic diseases [3]. In addition, mutations in the enzyme telomerase lead to telomere shortening, impaired tissue maintenance, and a shortened lifespan in humans [4–7] and mice [8–11]. These genetic experiments and diseases showed that telomere shortening could impair with organ maintenance and shorten lifespan. However, the actual contribution of dysfunctional telomeres to natural human aging and diseases remains under debate. Accumulation of senescent cells has been detected in skin of aging humans [12] and primates [13] but not in other organs such as muscle [14] or liver [15]. In aging telomerase knockout mice

(G4mTerc^{-/-}), telomere dysfunction is associated with a decline in stem cell function, impaired organ maintenance, and a shortened lifespan [8–11]. Yet, G4mTerc^{-/-} mice do not show an accumulation of senescent cells [11]. There is emerging evidence that senescent cells can be cleared *in vivo* by induction of apoptosis [11] and immune responses [16].

We identified CRAMP secreted from telomere-dysfunctional bone-marrow cells of late-generation telomerase knockout mice (G4mTerc^{-/-}), increased in blood and in various tissues of aging G4mTerc^{-/-} mice and represented human aging and disease [17]. The results indicate that the telomere length shortened with aging and depend on the other aging markers which connect with each other. Therefore, the impact of telomere dysfunction on aging might be underestimated by experiments trying to detect senescent cells.

FIGURE 2: Evaluation of CRAMP in healthy people. In blood plasma, the expression levels of CRAMP increases during human aging.

FIGURE 3: The relationship between telomere length and CRAMP level. There is the reverse correspondence between the telomere length and the plasma CRAMP level.

plasma, the expression levels of CRAMP increases during human aging (Figure 2).

3.3. The Relationship between Telomere Length and CRAMP Level. We identified CRAMP secreted from telomere-dysfunctional bone-marrow cells of late-generation telomerase knockout mice (G4mTerc^{-/-}), increased in blood and in various tissues of aging G4mTerc^{-/-} mice and represented human aging and disease (PNAS). In this study we also find the reverse correspondence between the telomere length and the plasma CRAMP level (Figure 3).

3.4. Standardization of ELISA for CRAMP. We get the plasma from 10 healthy persons, each one sacrificed blood at 6 times. That lead us set up the study for the plasma ELISA analyzing at fresh plasma, stand in the room temperature for 1 hour, 2 hours, 3 hours, 4 hours, 5 hours, and we also freeze down the plasma at -80°C , then we thaw the samples for 1 time, 2 times, 3 times, 4 times, 5 times, and we also have one sample keep in 4°C overnight.

In all these samples we test the specificity and sensitivity of CRAMP ELISA. The results show that the fresh plasma has the highest ELISA data, and the plasma keep in 4°C overnight or in the room temperature less than 3 hours,

thawed less than 3 times have little lower data, but the statistics does not show the significant difference. But the plasma keep in the room temperature more than 4 hours, thawed more than 4 times have the higher data; the statistics shows the significant difference (Figure 4(a)).

The results also show that the fresh plasma has the highest ELISA data, and the plasma has been kept in 4°C over 1 night, 2, 3, 4, 5 nights or in the room temperature for 1 day, 2, 3, 4, 5 days have much lower data, and the statistics show the significant difference (Figure 4(b)).

4. Discussion

Aging is one of the major risk factors for human health and disease. Accumulating evidences suggested that telomere length in tissue cells is a marker for biological aging [1, 2]. In this study, telomere lengths of these healthy persons are measured with-real time PCR in blood cells. From 25-year old person to 78-year old fifty healthy individuals, the telomere length becomes shorter during aging, as the usual reports [7–9]. And the aging rate we could calculate in this study is 19 Bp telomere shorts each year, also as the usual reports [10–12]. That is why the telomere length is considered as the aging marker.

We identified CRAMP secreted from telomere-dysfunctional bone-marrow cells of late-generation telomerase knockout mice (G4mTerc^{-/-}), increased in blood and in various tissues of aging G4mTerc^{-/-} mice and represented human aging and disease [17]. In this study, we get 50 healthy persons whose ages are from 25 to 78 years old, to analyze the CRAMP levels in human plasma. We find that the young persons have lower CRAMP levels and the old persons have significant higher CRAMP secretion in plasma. We also could find the CRAMP secreting higher with the human aging, and the SPSS statistics show the significant results. CRAMP secretes higher when the telomere length shortens. This means that CRAMP level could show the human aging, and there must be some detail correlation between telomere shortening and CRAMP secreting, and they both contribute to the human aging. That needs a lot of detailed studies.

When we analyze the CRAMP ELISA, we always get plasma samples from clinical department. These samples may be stored for long time, may be used many times. And we want to know the exact CRAMP level from these samples, make the results special and sensitive. Except the ELISA protocol, there must be some other factors that influence the results. The different time point samples ELISA results show that the fresh plasma has the highest ELISA data, and the plasma keep in 4°C overnight or in the room temperature less than 3 hours, thawed less than 3 times have little lower data, but the statistics does not show the significant difference. But the plasma keep in the room temperature more than 4 hours, thawed more than 4 times have the higher data, the statistics shows the significant difference. And the plasma keep in 4°C over 1 night, 2, 3, 4, 5 nights or in the room temperature for 1 day, 2, 3, 4, 5 days have much lower data, and the statistics show the significant difference. This means that when we analyze the CRAMP levels, we must make sure that the plasma samples are fresh,

FIGURE 4: Standardization of ELISA for CRAMP. (a) The results show that the fresh plasma has the highest ELISA data, and the plasma kept in 4°C overnight or in the room temperature less than 3 hours, and the plasma thawed less than 3 times have little lower data, but the statistics does not show the significant difference. But the plasma kept in the room temperature more than 4 hours, thawed more than 4 times have the higher data, the statistics shows the significant difference. (b) The results show that the fresh plasma has the highest ELISA data, and the plasma kept in 4°C over 1 night, 2, 3, 4, 5 nights or in the room temperature for 1 day 2, 3, 4, 5 days have much lower data, and the statistics show the significant difference.

at least the stored samples should be thawed less than 3 times. Otherwise you will get the wrong data.

In conclusion, this CRAMP ELISA could become a powerful tool for investigating the relationship between human aging and telomere length shortening. The detail mechanisms need much more researches. We still need to prove the ELISA sensitivity and specificity through the way of samples' high quality control.

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References

- [1] W. E. Wright and J. W. Shay, "The two-stage mechanism controlling cellular senescence and immortalization," *Experimental Gerontology*, vol. 27, no. 4, pp. 383–389, 1992.
- [2] H.-W. Lee, M. A. Blasco, G. J. Gottlieb, J. W. Horner II, C. W. Greider, and R. A. DePinho, "Essential role of mouse telomerase in highly proliferative organs," *Nature*, vol. 392, no. 6676, pp. 569–574, 1998.
- [3] H. Jiang, Z. Ju, and K. L. Rudolph, "Telomere shortening and ageing," *Zeitschrift für Gerontologie und Geriatrie*, vol. 40, no. 5, pp. 314–324, 2007.
- [4] T. Vulliamy, A. Marrone, I. Dokal, and P. J. Mason, "Association between aplastic anaemia and mutations in telomerase RNA," *Lancet*, vol. 359, no. 9324, pp. 2168–2170, 2002.
- [5] J. R. Mitchell, E. Wood, and K. Collins, "A telomerase component is defective in the human disease dyskeratosis congenita," *Nature*, vol. 402, no. 6761, pp. 551–555, 1999.
- [6] K. D. Tsakiri, J. T. Cronkhite, P. J. Kuan et al., "Adult-onset pulmonary fibrosis caused by mutations in telomerase," *Proceedings of the National Academy of Sciences of the United States of America*, vol. 104, no. 18, pp. 7552–7557, 2007.
- [7] M. Y. Armanios, J. J.-L. Chen, J. D. Cogan et al., "Telomerase mutations in families with idiopathic pulmonary fibrosis," *New England Journal of Medicine*, vol. 356, no. 13, pp. 1317–1326, 2007.
- [8] K. L. Rudolph, S. Chang, H.-W. Lee et al., "Longevity, stress response, and cancer in aging telomerase-deficient mice," *Cell*, vol. 96, no. 5, pp. 701–712, 1999.
- [9] E. Herrera, E. Samper, J. Martín-Caballero, J. M. Flores, H.-W. Lee, and M. A. Blasco, "Disease states associated with telomerase deficiency appear earlier in mice with short telomeres," *EMBO Journal*, vol. 18, no. 11, pp. 2950–2960, 1999.
- [10] L.-Y. Hao, M. Armanios, M. A. Strong et al., "Short telomeres, even in the presence of telomerase, limit tissue renewal capacity," *Cell*, vol. 123, no. 6, pp. 1121–1131, 2005.
- [11] A. R. Choudhury, Z. Ju, M. W. Djojicubroto et al., "Cdkn1a deletion improves stem cell function and lifespan of mice with dysfunctional telomeres without accelerating cancer formation," *Nature Genetics*, vol. 39, no. 1, pp. 99–105, 2007.
- [12] G. P. Dimri, X. Lee, G. Basile et al., "A biomarker that identifies senescent human cells in culture and in aging skin in vivo," *Proceedings of the National Academy of Sciences of the United States of America*, vol. 92, no. 20, pp. 9363–9367, 1995.
- [13] U. Herbig, M. Ferreira, L. Condel, D. Carey, and J. M. Sedivy, "Cellular senescence in aging primates," *Science*, vol. 311, no. 5765, article 1257, 2006.
- [14] J. C. Jeyapalan, M. Ferreira, J. M. Sedivy, and U. Herbig, "Accumulation of senescent cells in mitotic tissue of aging primates," *Mechanisms of Ageing and Development*, vol. 128, no. 1, pp. 36–44, 2007.
- [15] S. U. Wiemann, A. Satyanarayana, M. Tsahuridu et al., "Hepatocyte telomere shortening and senescence are general markers of human liver cirrhosis," *FASEB Journal*, vol. 16, no. 9, pp. 935–942, 2002.
- [16] W. Xue, L. Zender, C. Miething et al., "Senescence and tumour clearance is triggered by p53 restoration in murine liver carcinomas," *Nature*, vol. 445, no. 7128, pp. 656–660, 2007.
- [17] H. Jiang, E. Schiffer, Z. Song et al., "Proteins induced by telomere dysfunction and DNA damage represent biomarkers of human aging and disease," *Proceedings of the National Academy of Sciences of the United States of America*, vol. 105, no. 32, pp. 11299–11304, 2008.
- [18] Y. Zou, A. Sfeir, S. M. Gryaznov, J. W. Shay, and W. E. Wright, "Does a sentinel or a subset of short telomeres determine replicative senescence?" *Molecular Biology of the Cell*, vol. 15, no. 8, pp. 3709–3718, 2004.