

Research Article

Identifying the Mechanism of Polygoni Cuspidati Rhizoma et Radix in Treating Acute Liver Failure Based on Network Pharmacology and Molecular Docking

Jing Hong ^{1,2}, Jie Ding ^{2,3}, Han-han Hong ⁴, Xiao-wan Xu ¹, Bo Pan ¹, Yi Ruan ²,
and Xiao-feng Zhai ^{1,2}

¹Department of Integrative Oncology, Changhai Hospital, Naval Medical University, Shanghai 200433, China

²School of Traditional Chinese Medicine, Naval Medical University, Shanghai 200433, China

³Gynecology of Traditional Chinese Medicine, Changhai Hospital, Naval Medical University, Shanghai 200433, China

⁴Department of Nursing, Chengjiaqiao Community Health Service Center of Changning District, Shanghai 201103, China

Correspondence should be addressed to Bo Pan; pb453275454@126.com, Yi Ruan; ruanyi@smmu.edu.cn, and Xiao-feng Zhai; zhaifch@163.com

Received 10 January 2022; Revised 6 March 2022; Accepted 10 March 2022; Published 8 April 2022

Academic Editor: Xiude Fan

Copyright © 2022 Jing Hong et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Background and Objective. Acute liver failure (ALF) is a rare clinical syndrome with a poor prognosis and leads to multiple organ failure. Polygoni Cuspidati Rhizoma et Radix (PCRR) is a commonly used Chinese medicine, which is recognized as a potential therapeutic herb against ALF. This study aimed to explore the pharmacological mechanisms of the therapeutic effect of PCRR in ALF via network pharmacology and molecular docking. **Materials and Methods.** The potential bioactive compounds of PCRR and their targets were collected from TCMSp, TCMID, and BATMAN-TCM databases with absorption, distribution, metabolism, and excretion protocols (oral bioavailability $\geq 30\%$ and drug-likeness ≥ 0.18). The ALF-related target genes were identified using the GeneCards and OMIM databases. A protein-protein interaction (PPI) network among these targets was constructed using the Cytoscape software to obtain the core targets. The genes associated with ALF were analyzed via Gene Ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) enrichment analyses to identify the signaling pathways related to the therapeutic effect of PCRR in ALF. **Results.** In total, 10 bioactive compounds of PCRR and 200 targets related to them were obtained, and 2913 ALF-related target genes were identified. PPI network analysis pinpointed 15 core targets, namely, TP53, AKT1, JUN, HSP90AA1, MAPK1, RELA, TNF, ESR1, IL6, MYC, MAPK14, FOS, RB1, CDKN1A, and EGFR. GO enrichment and KEGG pathway analyses revealed that the therapeutic mechanisms of PCRR in ALF are related to cell metabolism, oxidative stress, inflammation, and hepatocyte apoptosis. **Conclusion.** This is the first study to explore the therapeutic mechanisms of PCRR in ALF via network pharmacology and molecular docking. This study provides a research platform with candidate ALF-related targets of PCRR for the development of therapeutics against ALF.

1. Introduction

Acute liver failure (ALF) is a serious decompensation disorder caused by various factors, including hepatic synthesis, detoxification, excretion, and biotransformation [1]. In developed countries, the incidence of ALF is higher than 10 cases per million persons per year [2]. Hepatitis virus infection and acetaminophen are the main causes of ALF in developing [3] and developed countries [4], respectively. Although the worldwide

survival rate in ALF has steadily improved from approximately 20% to more than 60% over the past few decades [5], there are still no specific drugs for the treatment of this disorder.

Traditional Chinese medicine (TCM) uses natural sources and thereby provides unique advantages in the treatment of liver injury [6]. Polygoni Cuspidati Rhizoma et Radix (PCRR) is a popular Chinese herb used to treat various liver diseases. PCRR has been reported to have more than 67 bioactive components, including quinones, stilbenes, flavonoids, and lignans

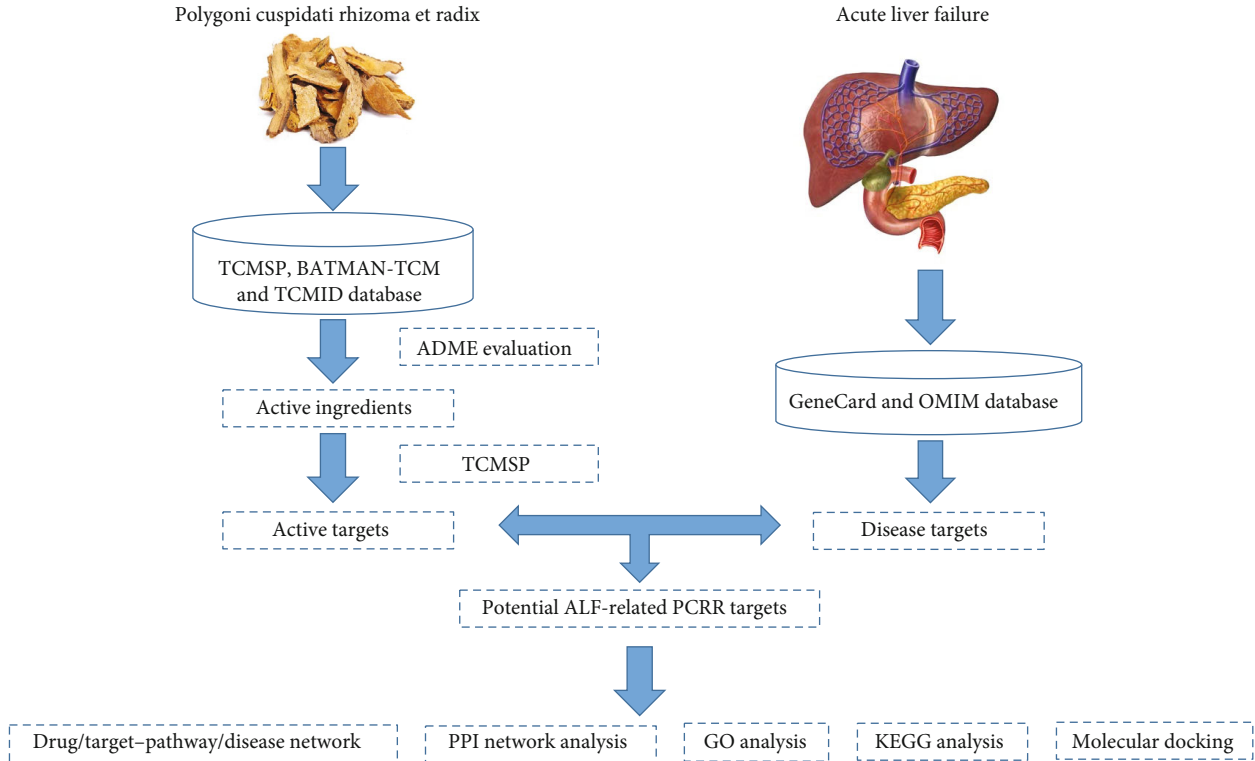


FIGURE 1: Detailed flowchart of the study design.

TABLE 1: Active pharmaceutical components of PCRR.

| Molecule ID | Molecule name | OB | DL |
|-------------|---|--------|------|
| MOL000006 | Luteolin | 36.16 | 0.25 |
| MOL000098 | Quercetin | 46.43 | 0.28 |
| MOL000358 | β -Sitosterol | 36.91 | 0.75 |
| MOL000492 | (+)-Catechin | 54.83 | 0.24 |
| MOL002259 | Physcion diglucoside | 41.65 | 0.63 |
| MOL002268 | Rhein | 47.07 | 0.28 |
| MOL002280 | Torachryson-8-O- β -D-(6-oxayl)-glucoside | 43.02 | 0.74 |
| MOL013281 | 6,8-Dihydroxy-7-methoxyxanthone | 35.83 | 0.21 |
| MOL013287 | Physovenine | 106.10 | 0.19 |
| MOL013288 | Picalinal | 58.01 | 0.75 |

PCRR: Polygoni Cuspidati Rhizoma et Radix; OB: oral bioavailability; DL: drug-likeness.

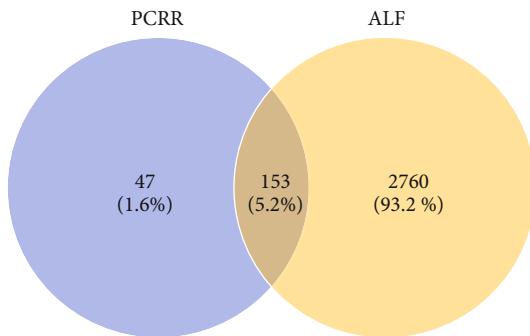


FIGURE 2: The candidate target genes of Polygoni Cuspidati Rhizoma et Radix (PCRR) and/or in acute liver failure (ALF).

[7]. Acute-on-chronic liver failure refers to acute decompensation in liver injury and has a similar prognosis as ALF [8, 9]. The Guidelines for Clinical Diagnosis and Treatment of Acute-on-chronic Liver Failure in TCM recommends PCRR as one of the main components of the prescription in treating acute-on-chronic liver failure [10]. The results of many clinical observations are in line with this recommendation [11, 12]. A study has confirmed the protective effect of the PCRR against carbon tetrachloride-induced liver injury in mice [13]. However, only a few studies on the therapeutic mechanisms of PCRR in ALF have been reported.

The therapeutics of TCM generally involve multiple components, targets, and pathways, and thus characterization of therapeutic mechanisms is highly challenging in TCM.

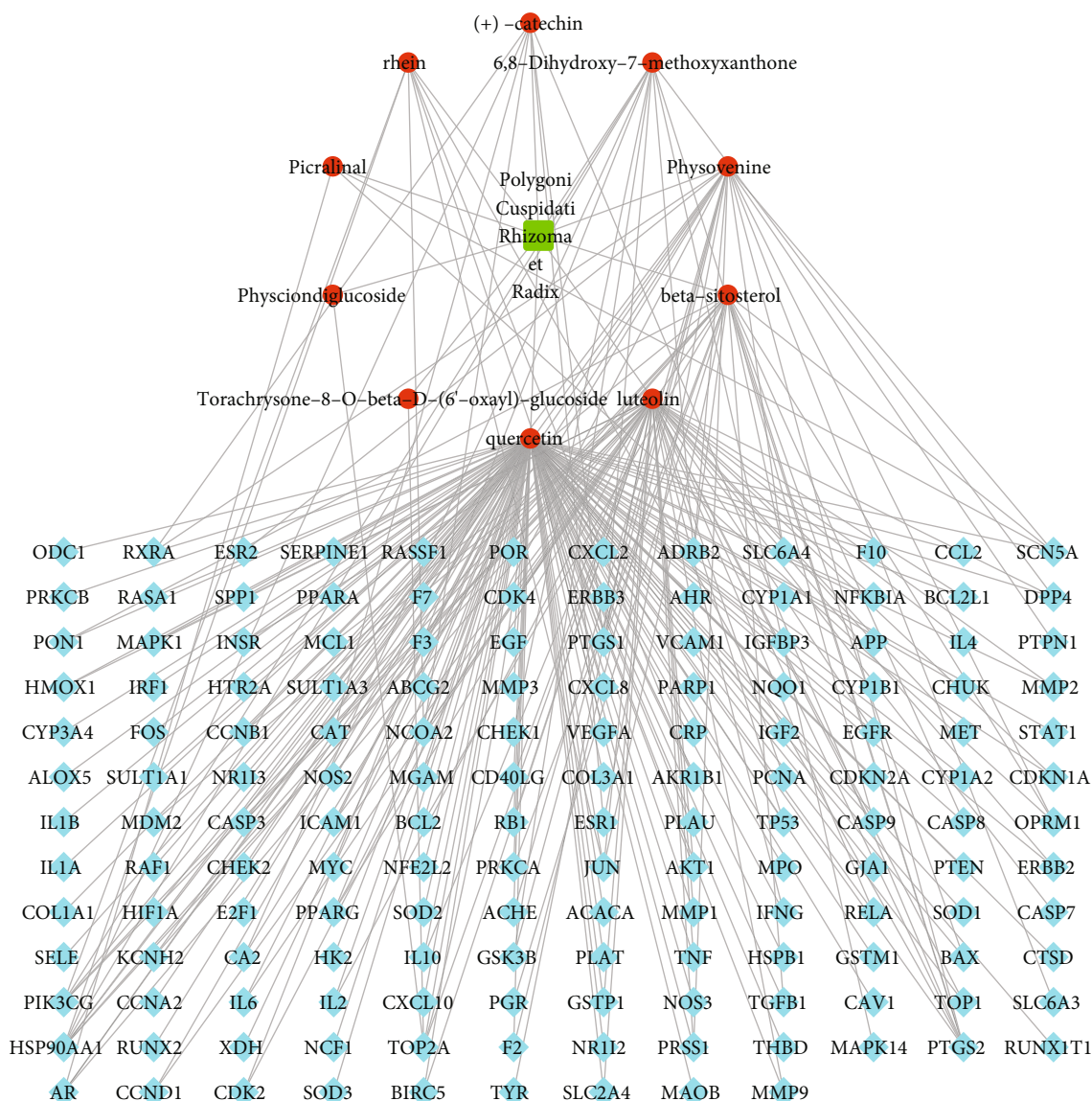


FIGURE 3: Drug-components-target genes network. The red circle nodes represent the bioactive components of Polygoni Cuspidati Rhizoma et Radix (PCRR), the blue diamond-shaped nodes represent the candidate targets, and the green square represents PCRR.

Network pharmacology is very useful to this end. In this approach, a multilevel network of “disease/phenotype-gene/drug” is constructed to explore the correlation between drugs and diseases from a holistic perspective, whereby drug targets can be identified or new drugs can be developed [14, 15].

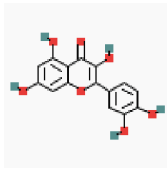
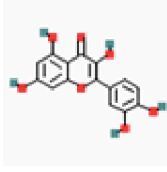
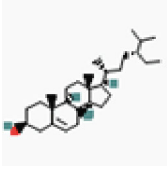
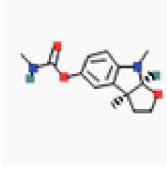
This study sought to identify the bioactive compounds of PCRR against ALF and the involving key genes and pathways via network pharmacology and molecular docking methods. The flowchart of this study is shown in Figure 1.

2. Materials and Methods

2.1. Collection of Potential Bioactive Compounds and Related Targets of PCRR. The corresponding compounds and related information were obtained using the Traditional Chinese Medicine Systems Pharmacology (TCMSP, <https://tcmsp.com/tcmsp.php>) database [16], Bioinformatics Analysis Tool for

Molecular mechANism of Traditional Chinese Medicine (BATMAN-TCM, <http://bionet.ncpsb.org/batman-tcm/>) [17], and Traditional Chinese Medicine Integrated Database (TCMID, <http://www.megabionet.org/tcmid/>) [18]. TCMSP also provides absorption, distribution, metabolism, and excretion (ADME)-related parameters, such as oral bioavailability (OB) and drug-likeness (DL), of herbal components. OB indicates the relative amount and rate of oral absorption of a drug into the circulation of the body. DL is a concept based on the physicochemical properties and molecular structure of existing drugs. Generally, only compounds with $OB \geq 30\%$ and $DL \geq 0.18$ are considered potential bioactive compounds [19]. The target information analysis function of the TCMSP platform was used to obtain the gene targets of the anti-ALF bioactive components of PCRR. For the components with no corresponding targets in the TCMSP platform, a similarity ensemble approach (SEA, <https://sea.bkslab.org/>) was used to

TABLE 2: Core pharmaceutical components of PCRR.

| Molecule ID | Molecule name | OB | DL | 2D structure | PubChem CID |
|-------------|---------------------|--------|-------|--|-------------|
| MOL000006 | Luteolin | 36.16 | 0.245 |  | 5280445 |
| MOL000098 | Quercetin | 46.43 | 0.28 |  | 5280343 |
| MOL000358 | β -Sitosterol | 36.91 | 0.75 |  | 222284 |
| MOL013287 | Physovenine | 106.21 | 0.19 |  | 442113 |

PCRR: Polygoni Cuspidati Rhizoma et Radix; OB: oral bioavailability; DL: drug-likeness.

predict the targets. The target protein species was set as *Homo sapiens*, and the obtained target information was unified using UniProt (<https://www.uniprot.org>).

2.2. Acquisition of ALF-Related Targets. Keywords such as “acute liver failure”, “acute hepatic failure”, and “ALF” were used to search ALF-related targets from the GeneCards (<https://www.genecards.org>) [20] and OMIM (<https://omim.org/>) [21] databases. PCRR-related targets and ALF-related targets were input into an online Venn tool (<https://bioinfogp.cnb.csic.es/tools/venny/>) to obtain the intersection genes, which were considered candidate targets of PCRR against ALF

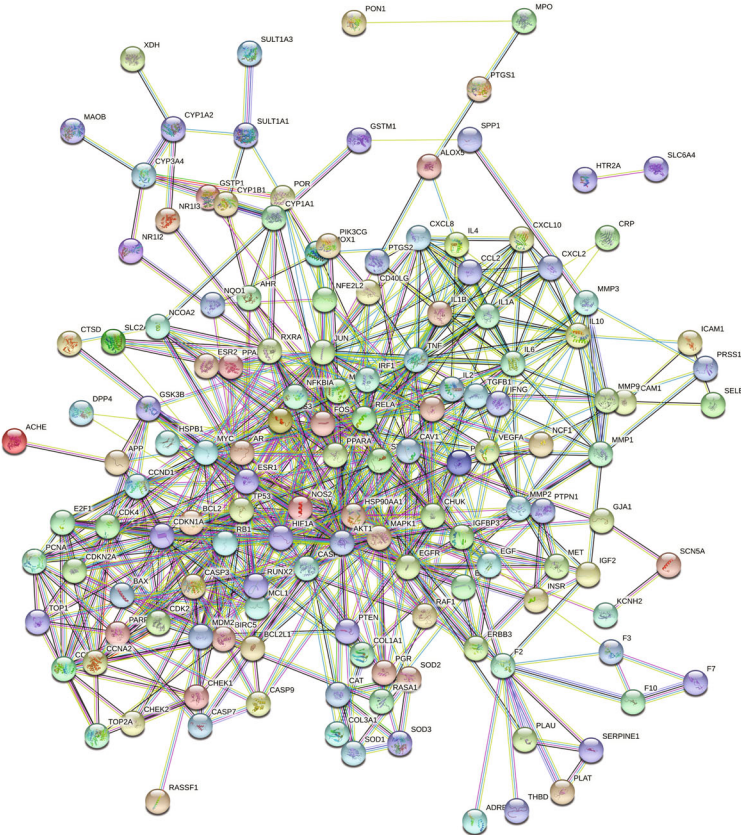
2.3. Analysis of the Drug/Target–Pathway/Disease Network. The relationship between potential bioactive compounds of PRCC and intersection genes was constructed using the Cytoscape software (version 3.8.0) as a drug-components-target-disease network. The average value of the degree value of the network nodes was calculated (average value), and the components with the degree value of the network node \geq average value were considered as core components.

2.4. Gene Ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) Analyses. The candidate targets of PCRR against ALF obtained were used to explore the potential mechanism of PCRR in ALF via GO and KEGG analyses. The GO and KEGG pathway enrichment analyses were performed using the Database for Annotation, Visualization, and Inte-

grated Discovery tool (DAVID, <https://david.ncifcrf.gov/home.jsp>). The biological processes (BPs), cellular components (CCs), molecular functions (MFs), and key signaling pathways were obtained to explore PCRR-related biological pathways. The functional annotations with *P*-values < 0.05 were further analyzed.

2.5. Construction of a Protein-Protein Interaction (PPI) Network. Search Tool for the Retrieval of Interacting Genes (STRING, <https://string-db.org/>) was used to identify possible PPIs by uploading the candidate targets from the Venn diagram. Species was limited to *Homo sapiens* with a confidence score > 0.9. The analysis plugin of Cytoscape 3.8.0 was used to visualize the PPI network, in which the target of the height value plays a pivotal role. The HUBBA plugin was used to calculate the degree of hub nodes and to select out hub nodes with degree higher than the average degree as the core targets.

2.6. Molecular Docking Simulation. The top 15 target genes were selected. The protein crystal structures corresponding to the core target genes were accessed from the Protein Data Bank (PDB, <https://www.rcsb.org>) database, and the structures of the bioactive components were downloaded from the TCMSP database. The AutoDock 4.2.6 software was employed to perform molecular docking between receptors and ligands. Eventually, the results were visualized using the PyMOL software.



(a)

FIGURE 4: Continued.

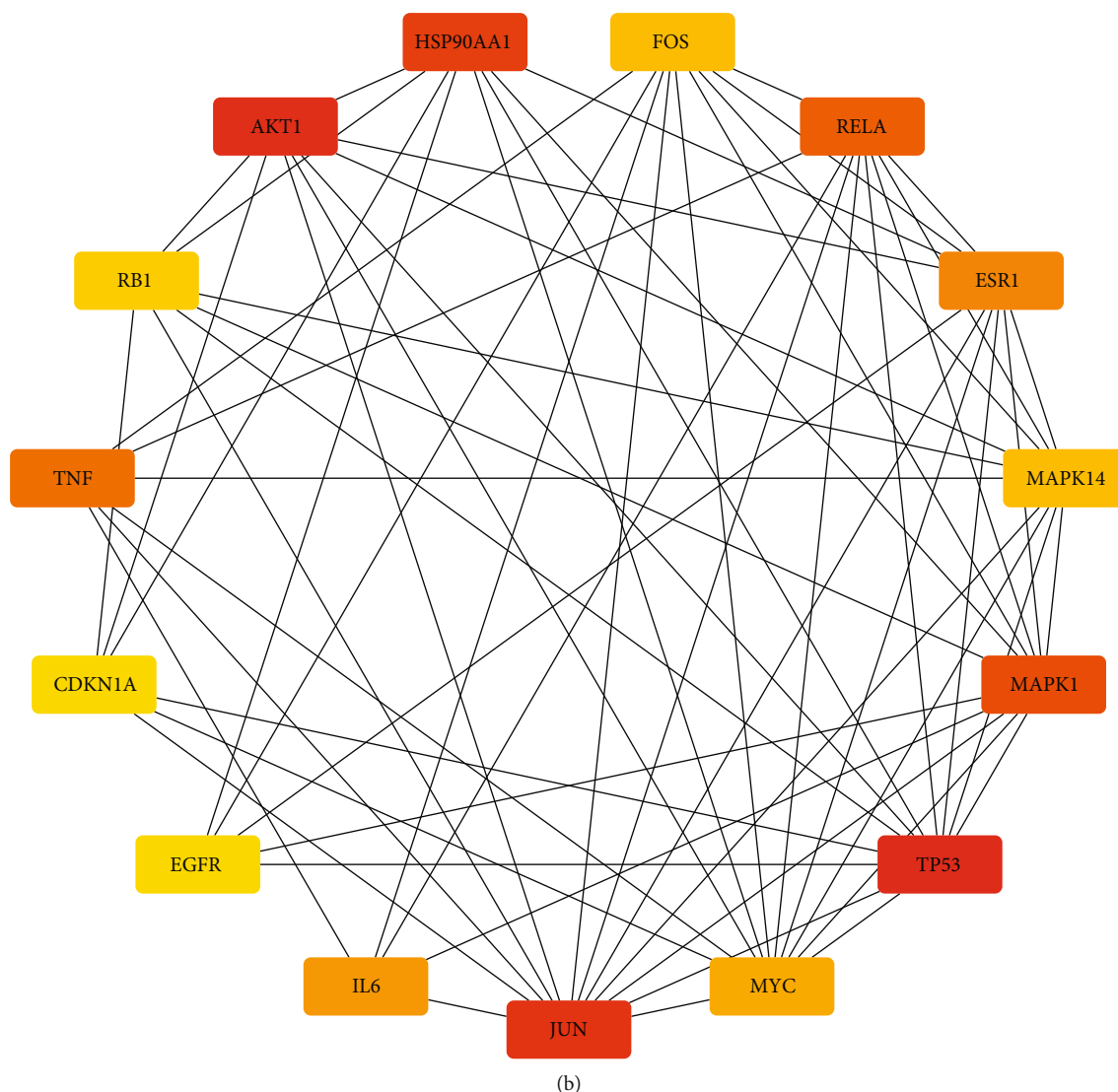


FIGURE 4: Protein-protein interaction (PPI) network based on the candidate target genes of *Polygoni Cuspidati Rhizoma et Radix* against acute liver failure. (a) PPI network of the candidate target genes. Each node represents the protein product of an associated target gene. The degree values of the proteins are represented by the node sizes. Colors indicate the connection sources. (b) The top 15 core target genes were identified based on the degree values. The protein with the darkest color has the highest degree value, indicating that it plays the most significant role in the regulation of the network.

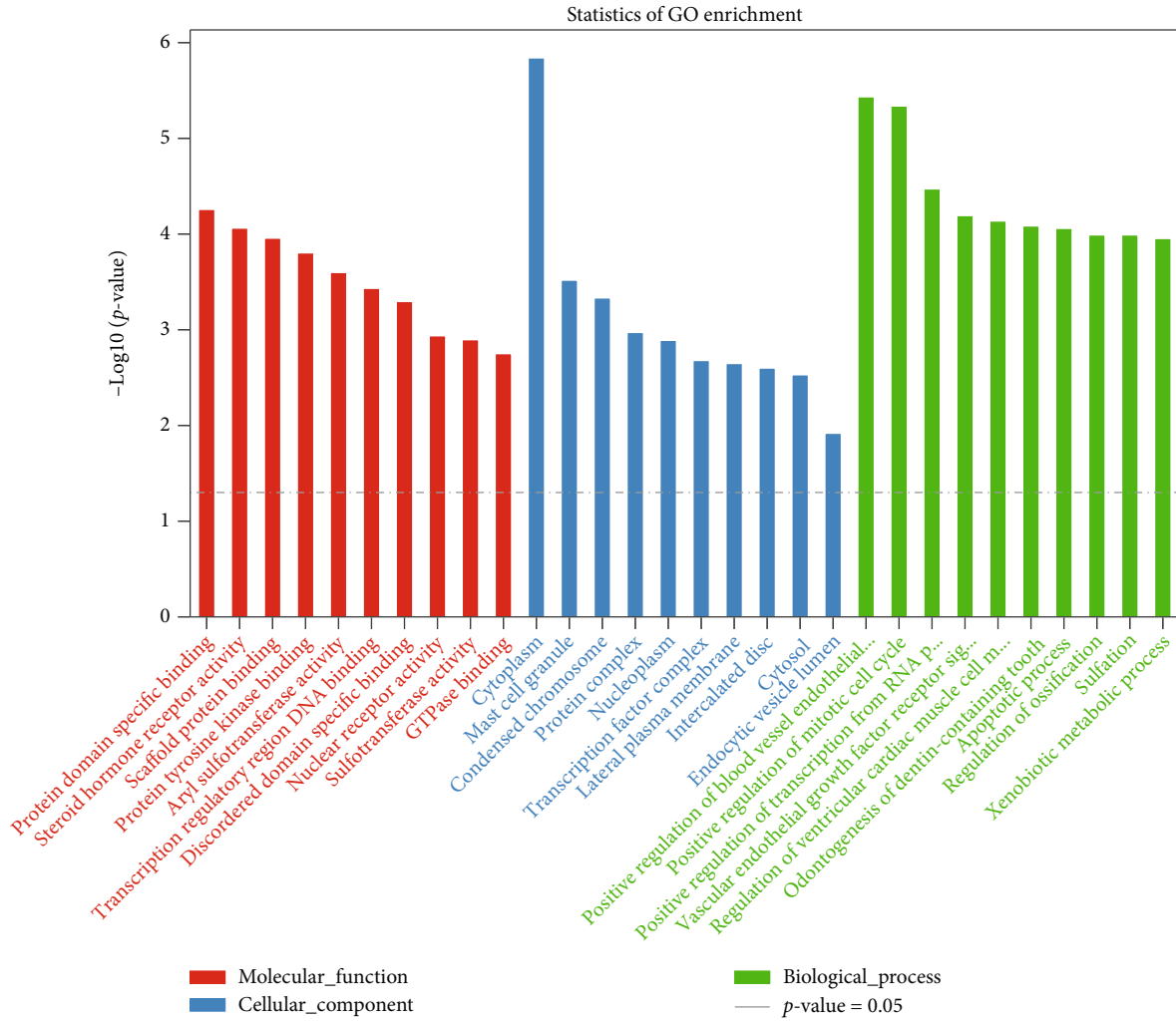
3. Results

3.1. Bioactive Compounds and Potential Targets of PCRR. After searching, filtering, and duplicate removal in the TCMSP, TCMID, and BATMAN-TCM databases, 10 bioactive components of PCRR with $OB \geq 30\%$ and $DL \geq 0.18$ were collected, including luteolin, quercetin, β -sitosterol, (+)-catechin, physcion diglucoside, rhein, torachryson-8-O- β -D-(6'-oxayl)-glucoside, 6,8-dihydroxy-7-methoxyxanthone, physovenine, and picralinal (Table 1). Additionally, 200 target genes interacting with these 10 bioactive components were identified (Supplementary file, Table S1).

3.2. Potential ALF-Related PCRR Targets. In total, 2913 ALF-related target genes were obtained by searching the GeneCards and OMIM databases (Supplementary file, Table S2). The Venn

diagram tool was used to identify the genes found among both ALF-related targets and PCRR targets. Consequently, 153 ALF-related PCRR target candidates were identified (Figure 2 and Supplementary file, Table S3).

3.3. Analysis of the Drug/Target-Pathway/Disease Network. The 10 bioactive components of PCRR and 153 candidate targets of PCRR against ALF were imported into the Cytoscape 3.8.0 software to illustrate the interaction between the two groups (Figure 3). We identified the core components among the 153 ALF-related PCRR target candidates by calculating the degree values of the network nodes. In the order from high to low degrees, the core components were quercetin (degree = 131), luteolin (degree = 51), β -sitosterol (degree = 22), and physovenine (degree = 22) (Table 2). According to the network analysis, multiple bioactive



(a)

FIGURE 5: Continued.

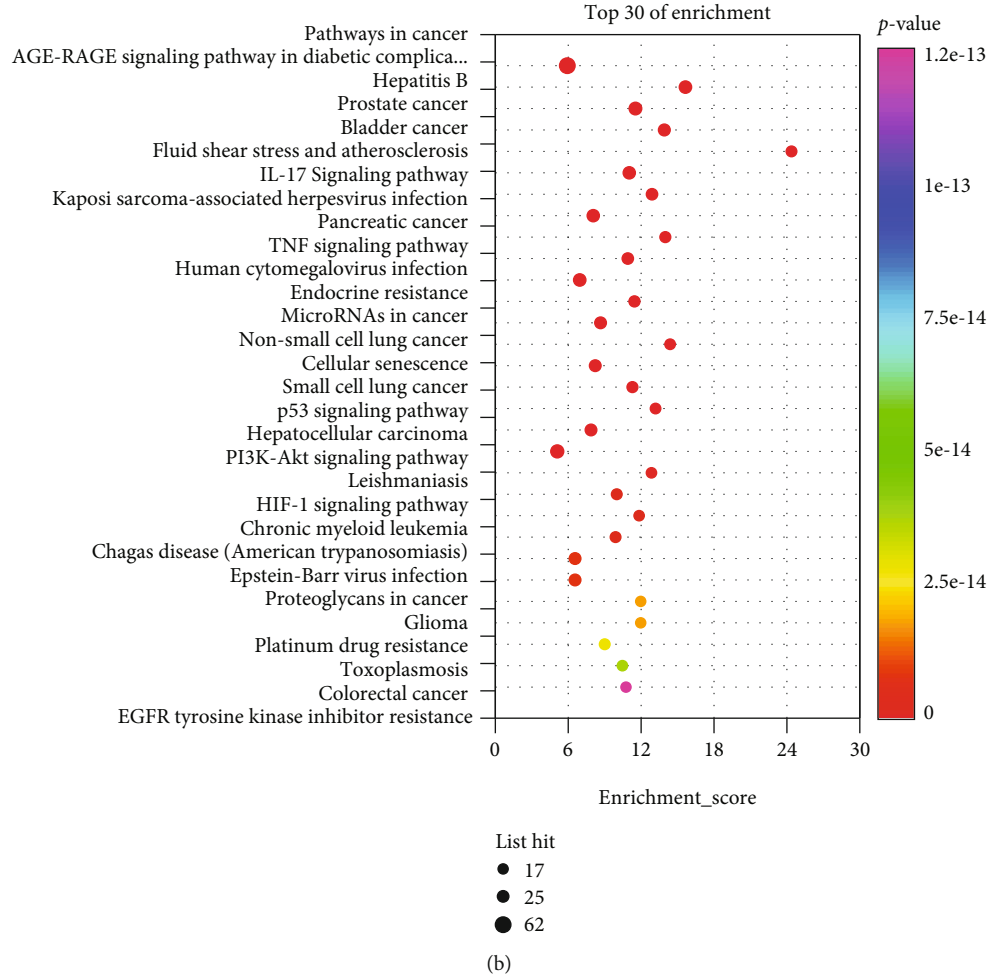


FIGURE 5: Gene ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) analyses. Different colors represent different *P*-values, and circle size represents the counts. (a) The top 10 GO terms. Red, blue, and green bars represent molecular function, cellular component, and biological process, respectively. (b) The top 30 KEGG pathways.

TABLE 3: Core targets of PCRR in the treatment of ALF and the topological parameters.

| Uniport ID | Gene symbol | Degree | Betweenness | Closeness |
|------------|-------------|--------|-------------|-----------|
| P04637 | TP53 | 40 | 0.11 | 0.49 |
| P31749 | AKT1 | 39 | 0.11 | 0.49 |
| P05412 | JUN | 36 | 0.09 | 0.50 |
| P07900 | HSP90AA1 | 35 | 0.08 | 0.48 |
| P28482 | MAPK1 | 34 | 0.12 | 0.50 |
| Q04206 | RELA | 33 | 0.06 | 0.49 |
| P01375 | TNF | 28 | 0.06 | 0.46 |
| P03372 | ESR1 | 26 | 0.04 | 0.46 |
| P05231 | IL6 | 25 | 0.04 | 0.44 |
| P01106 | MYC | 24 | 0.03 | 0.46 |
| Q16539 | MAPK14 | 23 | 0.02 | 0.46 |
| P01100 | FOS | 23 | 0.04 | 0.46 |
| P06400 | RB1 | 22 | 0.02 | 0.45 |
| P38936 | CDKN1A | 21 | 0.01 | 0.43 |
| P00533 | EGFR | 21 | 0.03 | 0.44 |

PCRR: Polygoni Cuspidati Rhizoma et Radix; ALF: acute liver failure.

components of PCRR act on at least one core target gene. The results showed that the therapeutic effect of PCRR in ALF has multicomponent and multitarget characteristics.

3.4. GO Functional and KEGG Pathway Enrichment Analysis.

To elucidate the biological processes involved in the ALF-related PCRR candidates targets, GO enrichment analysis was performed. A total of 320 significantly enriched GO terms were identified (*P*-value <0.05, Supplementary file, Table S4). The top 10 significantly enriched terms, including BPs, MFs, and CCs are presented in Figure 4(a). In the order from low to high adjusted *P*-values, the top three GO-MC terms were mainly enriched in protein domain-specific binding (GO:0019904), steroid hormone receptor activity (GO:0003707), and scaffold protein binding (GO:0097110); the top three GO-CC terms were mainly enriched in cytoplasm (GO:0005737), mast cell granule (GO:0042629), and condensed chromosome (GO:0000793); and the top three GO-BP terms were mainly enriched in positive regulation of blood vessel endothelial cell migration (GO:0043536), positive regulation of mitotic cell cycle (GO:0045931), and positive

TABLE 4: Results of 15 core target genes and related bioactive compounds of molecular docking.

| No. | Targets | PDB ID | Compound | Binding affinity(kcal/Mol) |
|-----|----------|--------|---------------------|----------------------------|
| 1 | AKT1 | 3O96 | Luteolin | -9.8 |
| | | | Physovenine | -8.6 |
| | | | Quercetin | -9.7 |
| | | | β -Sitosterol | -10.9 |
| 2 | CDKN1A | 6P8H | Luteolin | -6.4 |
| | | | Physovenine | -5.9 |
| | | | Quercetin | -6.0 |
| 3 | EGFR | 1 M17 | β -Sitosterol | -6.9 |
| | | | Luteolin | -8.4 |
| | | | Physovenine | -7.2 |
| | | | Quercetin | -8.5 |
| 4 | ESR1 | 1A52 | β -Sitosterol | -8.5 |
| | | | Luteolin | -8.7 |
| | | | Physovenine | -7.6 |
| | | | Quercetin | -8.4 |
| 5 | FOS | 1A02 | β -Sitosterol | -4.2 |
| | | | Luteolin | -5.6 |
| | | | Physovenine | -4.9 |
| | | | Quercetin | -5.0 |
| 6 | HSP90AA1 | 7L7I | β -Sitosterol | -5.5 |
| | | | Luteolin | -9.8 |
| | | | Physovenine | -8.0 |
| | | | Quercetin | -10.2 |
| 7 | IL-6 | 1ALU | β -Sitosterol | -7.2 |
| | | | Luteolin | -8.0 |
| | | | Physovenine | -6.4 |
| | | | Quercetin | -7.9 |
| 8 | JUN | 1JNM | β -Sitosterol | -6.6 |
| | | | Luteolin | -5.4 |
| | | | Physovenine | -4.8 |
| | | | Quercetin | -5.4 |
| 9 | MAPK1 | 1PME | β -Sitosterol | -5.4 |
| | | | Luteolin | -9.2 |
| | | | Physovenine | -7.5 |
| | | | Quercetin | -8.5 |
| 10 | MAPK14 | 1A9U | β -Sitosterol | -8.8 |
| | | | Luteolin | -7.5 |
| | | | Physovenine | -6.9 |
| | | | Quercetin | -7.2 |
| 11 | MYC | 5I4Z | β -Sitosterol | -8.2 |
| | | | Luteolin | -6.5 |
| | | | Physovenine | -5.6 |
| | | | Quercetin | -6.1 |
| 12 | RB1 | 4EIJ | β -Sitosterol | -6.9 |
| | | | Luteolin | -8.5 |
| | | | Physovenine | -7.0 |
| | | | Quercetin | -8.4 |

TABLE 4: Continued.

| No. | Targets | PDB ID | Compound | Binding affinity(kcal/Mol) |
|-----|---------|--------|---------------------|----------------------------|
| 13 | RELA | 1NFI | β -Sitosterol | -6.9 |
| | | | Luteolin | -7.4 |
| | | | Physovenine | -6.4 |
| | | | Quercetin | -7.0 |
| 14 | TNF | 1TNF | β -Sitosterol | -7.0 |
| | | | Luteolin | -7.0 |
| | | | Physovenine | -5.7 |
| 15 | TP53 | TP53 | Quercetin | -6.9 |
| | | | β -Sitosterol | -6.6 |
| | | | Luteolin | -7.1 |
| | | | Physovenine | -6.0 |
| | | | Quercetin | -7.3 |
| | | | β -Sitosterol | -6.0 |

regulation of transcription from RNA polymerase II promoter (GO:0045944).

KEGG enrichment analysis was performed to elucidate the pathways involved in the therapeutic effect of PCRR in the treatment of ALF. Consequently, 160 enriched KEGG pathways were identified (P -value < 0.05, Supplementary file, Table S5). The top 30 significant signaling pathways are shown in Figure 4(b). The top 10 ALF-related signaling pathways were identified as pathway in cancer (path:hsa05200), AGE-RAGE signaling pathway in diabetic complications (path:hsa04933), hepatitis B (path:hsa05161), prostate cancer (path:hsa05215), bladder cancer (path:hsa05219), fluid shear stress and atherosclerosis (path:hsa05418), interleukin (IL)-17 signaling pathway (path:hsa04657), Kaposi sarcoma-associated herpesvirus infection (path:hsa05167), pancreatic cancer (path:hsa05212), and tumor necrosis factor (TNF) signaling pathway (path:hsa04668). These pathways suggest that the therapeutic effect of PCRR in ALF is related to cell metabolism, oxidative stress, inflammation, and hepatocyte apoptosis.

3.5. PPI Network Analysis. To assess the synergism between the bioactive components of PCRR, the 153 candidate target genes were imported into the STRING database to construct an initial PPI network with the minimum required interaction score > 0.9 (Figure 5(a)). The Cytoscape 3.8.0 software was used to reconstruct the STRING graph, and the HUBBA plug-in was used to select the top 15 targets for plotting (Figure 5(b)). The core targets, which may play important anti-ALF roles, were TP53, AKT1, JUN, HSP90AA1, MAPK1, RELA, TNF, ESR1, IL6, MYC, MAPK14, FOS, RB1, CDKN1A, and EGFR (Table 3).

3.6. Validation through Molecular Docking. Molecular docking is used to verify the interaction between ligands and their receptors. Here, we applied this strategy for the 4 bioactive compounds of PCRR and the 15 core target genes by using AutoDock Vina (Table 4). A minimum binding potential energy of < 0 between a molecule and its target indicates that

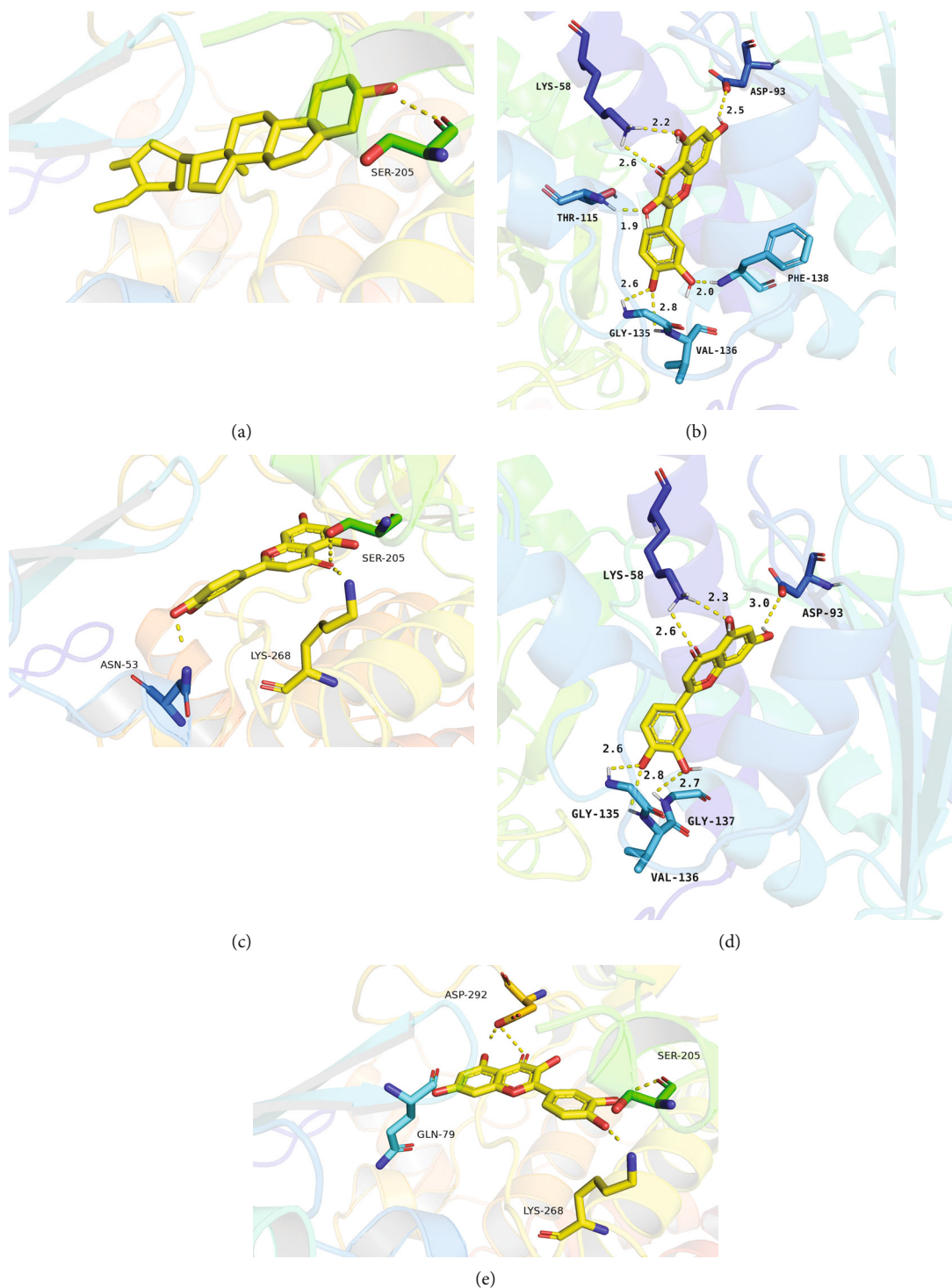


FIGURE 6: Molecular docking of the receptors and their ligands: (a) β -sitosterol to AKT1; (b) quercetin to HSP90AA1; (c) luteolin to AKT1; (d) luteolin to HSP90AA1; (e) quercetin to AKT1.

the two molecules can spontaneously bind to each other [22]. The lowest binding-free energies of β -sitosterol to AKT1, quercetin to HSP90AA1, luteolin to AKT1, luteolin to HSP90AA1, and quercetin to AKT1 were estimated at -10.9 , -10.2 , -9.8 , -9.8 , and -9.7 kcal/mol, respectively (See Figure 6).

4. Discussion

ALF is a rare but serious clinical syndrome involving hepatocyte damage and progresses rapidly, with a possibility of causing multiple organ dysfunction [23]. For patients with

ALF, there is no specific treatment. With the advent of liver transplantation, the survival rate of ALF has greatly improved [24]. However, the lack of donors and high treatment costs limited the application of this approach. PCRR is a classical TCM therapeutic with a highlighted effect in the prevention and treatment of various liver diseases. TCM comprises multicomponent and multitarget therapeutics, which are difficult to mechanistically characterize. Network pharmacology is a simple and feasible method that solves this difficulty. In this study, the bioactive components and potential targets of PCRR in the treatment of ALF were predicted via network pharmacology and molecular docking.

According to ADME protocols ($OB \geq 30\%$, $DL \geq 0.18$) and the principle of target correspondence, four bioactive components were screened out. Of them, the flavonoid luteolin is found in various types of plants, including fruits, vegetables, and herbs, worldwide [25]. Previous studies have suggested that the protective effect of luteolin on acetaminophen-induced liver failure in mice may be related to the inhibition of lipid peroxidation, oxidative stress, and estrogen-receptor stress [26, 27]. Quercetin is a bioactive flavonoid in the class of polyphenols [28], which can prevent and treat liver injury by preventing oxidative stress, inhibiting the release of inflammatory factors, and promoting the synthesis of antioxidant enzymes [29, 30].

Based on the PPI network analysis, we predicted that the ALF-related genes most commonly targeted by the PCRR bioactive compounds are TP53, AKT1, JUN, HSP90AA1, MAPK1, RELA, TNF, ESR1, IL6, MYC, MAPK14, FOS, RB1, CDKN1A, and EGFR. The tumor suppressor gene TP53 encodes P53 [31, 32], whose transient activation helps prevent progression of acetaminophen-induced liver injury, and continued activation of P53 may affect regeneration and recovery of the liver [33, 34]. AKT1 has been reported to regulate fibrogenesis and proliferation in hepatocytes and hepatic stellate cells [35, 36]. Additionally, previous studies have shown that HSP90 can promote proinflammatory cytokines and its inhibition can attenuate alcohol-induced liver injury [37, 38]. MAPK1 (extracellular signal-regulated kinase 2, ERK2) is involved in the regulation of cellular physiology and pathology [39]. Altering the ERK signaling pathway through ERK2 deficiency can reduce liver fibrosis and inflammation [40]. ESR1-mediated signaling inhibits liver regeneration after chemical-induced liver injury by suppressing the Wnt signaling pathway, resulting in lower cyclin D1 activation [41]. During the development of acute liver failure, TNF-mediated over-immune cascade response may contribute to massive hepatocyte apoptosis and impaired hepatocyte proliferation [42, 43].

To explore the therapeutic mechanism of PCRR in ALF, GO and KEGG pathway enrichment analyses were performed. According to the adjusted *P*-values, the top three GO-MC terms were mainly enriched in protein domain-specific binding, steroid hormone receptor activity, and scaffold protein binding; the top three GO-CC terms were mainly enriched in cytoplasm, mast cell granule, and condensed chromosome; and the top three GO-BP terms were mainly enriched in positive regulation of blood vessel endothelial cell migration, positive regulation of mitotic cell cycle, and positive regulation of

transcription from RNA polymerase II promoter. The 10 crucial pathways that may be regulated by PCRR in the treatment of ALF by the KEGG pathway enrichment analysis included pathway in cancer, AGE-RAGE pathway in diabetic complications, hepatitis B, prostate cancer, bladder cancer, fluid shear stress and atherosclerosis, IL-17 pathway, Kaposi sarcoma-associated herpesvirus infection, pancreatic cancer, and TNF. The pathway enrichment results suggested that the anti-ALF therapeutic effect of PCRR mainly results from the regulation of immune and inflammatory responses and cell metabolism. Cancer mechanisms are known to be relevant with ALF since neoplastic infiltration is one of the courses of ALF progression [44–46]. Chronic hepatitis B virus infection is one of the important causes of acute liver failure in developing countries, including China [47]. AGE-RAGE interaction contributes to fat accumulation in the liver, increases oxidative stress and chronic inflammation, and may be involved in liver injury [48–50]. IL-17 plays an important role in the pathogenesis of immune-mediated liver injury; IL-17 is significantly upregulated in the liver and serum of BALB/cJ mice infected with mouse hepatitis virus strain 3 [51]. The PI3K-Akt signaling affects cell migration, mobilization, differentiation, and apoptosis [52, 53] and has also been found to affect early liver regeneration and improve survival in a mouse model of acetaminophen-induced acute liver injury [52, 54]. Excessive reactive oxygen species (ROS) can directly lead to oxidative stress, which plays an important role in liver damage [55]. Activation of the PI3K/Akt signaling can alleviate liver injury by reducing ROS levels, inhibiting apoptosis, and accelerating hypoxia-inducible factor-1 α [56].

5. Conclusion

This is the first study that has predicted the therapeutic mechanisms of PCRR in ALF by using network pharmacology and molecular docking. The results suggest that the therapeutic effect of PCRR in ALF involves multiple components, targets, and pathways. Luteolin, quercetin, β -sitosterol, and physoneine are likely the major bioactive compounds of PCRR against ALF. Accordingly, this study provides a research platform with candidate ALF-related targets of PRCC for the development of therapeutics against ALF. However, it has several limitations as well. First, the potential bioactive components are screened primarily by databases using ADME protocols [58], and some components may be overlooked. Second, the study lacks experimental verification, which should be addressed in biologically relevant platforms in the future.

Abbreviations

| | |
|--------|---|
| ALF: | Acute liver failure |
| PCRR: | Polygoni Cuspidati Rhizoma et Radix |
| TCM: | Traditional Chinese medicine |
| TCMSP: | Traditional Chinese medicine systems pharmacology |
| OB: | Oral bioavailability |
| DL: | Drug-likeness |
| PPI: | Protein-protein interaction |

GO: Gene ontology
KEGG: Kyoto Encyclopedia of Genes and Genomes.

Data Availability

All data obtained or analyzed during this work are included within the article.

Conflicts of Interest

The authors have no conflict of interests related to this study.

Authors' Contributions

Jing Hong, Jie Ding, and Han-han Hong contributed equally to this work.

Acknowledgments

This research was funded by the Major Clinical Research Project on Traditional Chinese Medicine of Shanghai Municipal Health and Family Planning Commission (No. ZY[2018-2020]-CCX-4003) and “234 Discipline Climbing Plan” of Changhai Hospital, Naval Medical University (No.2019YXK029).

Supplementary Materials

The 200 target genes interacting with the 10 bioactive components of PCRR, and the 2913 ALF-related target genes are provided in supplementary Tables S1 and S2, respectively. The 153 ALF-related PCRR target candidates are provided in supplementary Table S3. The results of the GO and KEGG pathway enrichment analyses are provided in supplementary Tables S4 and S5, respectively. (*Supplementary Materials*)

References

- [1] Y. Wang, Q. Chen, C. Shi, F. Jiao, and Z. Gong, “Mechanism of glycyrrhizin on ferroptosis during acute liver failure by inhibiting oxidative stress,” *Molecular Medicine Reports*, vol. 20, no. 5, pp. 4081–4090, 2019.
- [2] M. R. Kappus, “Acute hepatic failure and nutrition,” *Nutrition in Clinical Practice*, vol. 35, no. 1, pp. 30–35, 2020.
- [3] S. Vento and F. Cainelli, “Acute liver failure,” *Lancet*, vol. 395, no. 10240, p. 1833, 2020.
- [4] P. Zhao, C. Wang, W. Liu et al., “Causes and outcomes of acute liver failure in China,” *PLoS One*, vol. 8, no. 11, article e80991, 2013.
- [5] M. A. Arshad, N. Murphy, and M. N. Bangash, “Acute liver failure,” *Clinical Medicine (London, England)*, vol. 20, no. 5, pp. 505–508, 2020.
- [6] A. Wang, L. Lin, and Y. Wang, “Traditional Chinese herbal medicine *Penthorum chinense* Pursh: a phytochemical and pharmacological review,” *The American Journal of Chinese Medicine*, vol. 43, no. 4, pp. 601–620, 2015.
- [7] W. Peng, R. Qin, X. Li, and H. Zhou, “Botany, phytochemistry, pharmacology, and potential application of *Polygonum cuspidatum* Sieb. et Zucc.: a review,” *Journal of Ethnopharmacology*, vol. 148, no. 3, pp. 729–745, 2013.
- [8] J. S. Bajaj, R. Moreau, P. S. Kamath et al., “Acute-on-chronic liver failure: getting ready for prime time?,” *Hepatology*, vol. 68, no. 4, pp. 1621–1632, 2018.
- [9] R. Hernaez, E. Solà, R. Moreau, and P. Ginès, “Acute-on-chronic liver failure: an update,” *Gut*, vol. 66, no. 3, pp. 541–553, 2017.
- [10] China Association of Chinese Medicine, “Guidelines for clinical diagnosis and treatment of acute-on-chronic liver failure in traditional Chinese medicine,” *Lin Chuang Gan Dan Bing Za Zhi*, vol. 35, no. 3, pp. 494–503, 2019.
- [11] X. Y. Hu, Y. Zhang, G. Chen, S. Zhong, and X. J. Fan, “A prospective cohort study on the influence of high doses of herbs for clearing heat and resolving stasis on survival rates in patients with hepatitis B related acute-on-chronic liver failure,” *Journal of Chinese Integrative Medicine*, vol. 10, no. 2, pp. 176–185, 2012.
- [12] Z. Q. Dang, G. H. Yang, Y. J. Ma et al., “Synergistic effect of multi-ways Chinese medication on routine therapy for hepatitis B virus related acute-on-chronic liver failure,” *Zhong Yi Za Zhi*, vol. 53, no. 24, pp. 2109–2111, 2012.
- [13] H. Zhang, C. H. Yu, Y. P. Jiang et al., “Protective effects of polydatin from *Polygonum cuspidatum* against carbon tetrachloride-induced liver injury in mice,” *PLoS One*, vol. 7, no. 9, article e46574, 2012.
- [14] S. Li and B. Zhang, “Traditional Chinese medicine network pharmacology: theory, methodology and application,” *Chinese Journal of Natural Medicines*, vol. 11, no. 2, pp. 110–120, 2013.
- [15] A. L. Hopkins, “Network pharmacology: the next paradigm in drug discovery,” *Nature Chemical Biology*, vol. 4, no. 11, pp. 682–690, 2008.
- [16] J. Ru, P. Li, J. Wang et al., “TCMSP: a database of systems pharmacology for drug discovery from herbal medicines,” *Journal of Cheminformatics*, vol. 6, no. 1, 2014.
- [17] Z. Liu, F. Guo, Y. Wang et al., “BATMAN-TCM: a Bioinformatics Analysis Tool for Molecular mechanism of Traditional Chinese Medicine,” *Scientific Reports*, vol. 6, no. 1, 2016.
- [18] L. Huang, D. Xie, Y. Yu et al., “TCMID 2.0: a comprehensive resource for TCM,” *Nucleic Acids Research*, vol. 46, no. D1, pp. D1117–D1120, 2018.
- [19] S. J. Huang, F. Mu, F. Li et al., “Systematic elucidation of the potential mechanism of Erzhi pill against drug-induced liver injury via network pharmacology approach,” *Evidence-based Complementary and Alternative Medicine*, vol. 2020, Article ID 6219432, 2020.
- [20] G. Stelzer, I. Dalah, T. I. Stein et al., “In-silico human genomics with GeneCards,” *Human Genomics*, vol. 5, no. 6, pp. 709–717, 2011.
- [21] J. S. Amberger, C. A. Bocchini, F. Schiettecatte, A. F. Scott, and A. Hamosh, “OMIM.org: Online Mendelian Inheritance in Man (OMIM®), an online catalog of human genes and genetic disorders,” *Nucleic Acids Research*, vol. 43, no. Database issue, 2015.
- [22] M. Wei, H. Li, Q. Li et al., “Based on network pharmacology to explore the molecular targets and mechanisms of Gegen Qinlian decoction for the treatment of ulcerative colitis,” *BioMed Research International*, vol. 2020, 2020.
- [23] S. Krawitz, V. Lingiah, and N. T. Pysopoulos, “Acute liver failure: mechanisms of disease and multisystemic involvement,” *Clinics in Liver Disease*, vol. 22, no. 2, pp. 243–256, 2018.

- [24] R. Olivo, J. V. Guarrera, and N. T. Pysopoulos, "Liver transplantation for acute liver failure," *Clinics in Liver Disease*, vol. 22, no. 2, pp. 409–417, 2018.
- [25] M. Imran, A. Rauf, T. Abu-Izneid et al., "Luteolin, a flavonoid, as an anticancer agent: a review," *Biomedicine & Pharmacotherapy*, vol. 112, article 108612, 2019.
- [26] M. Tai, J. Zhang, S. Song et al., "Protective effects of luteolin against acetaminophen-induced acute liver failure in mouse," *International Immunopharmacology*, vol. 27, no. 1, pp. 164–170, 2015.
- [27] Y. He, Z. Xia, D. Yu et al., "Hepatoprotective effects and structure-activity relationship of five flavonoids against lipopolysaccharide/d-galactosamine induced acute liver failure in mice," *International Immunopharmacology*, vol. 68, pp. 171–178, 2019.
- [28] S. Liu, L. Tian, G. Chai, B. Wen, and B. Wang, "Targeting heme oxygenase-1 by quercetin ameliorates alcohol-induced acute liver injury via inhibiting NLRP3 inflammasome activation," *Food & Function*, vol. 9, no. 8, pp. 4184–4193, 2018.
- [29] F. Q. Zhao, G. F. Wang, D. Xu, H. Y. Zhang, Y. L. Cui, and Q. S. Wang, "Glycyrrhizin mediated liver-targeted alginate nanogels delivers quercetin to relieve acute liver failure," *International Journal of Biological Macromolecules*, vol. 168, pp. 93–104, 2021.
- [30] J. Fang and W. Liang, "ASCs -derived exosomes loaded with vitamin A and quercetin inhibit rapid senescence-like response after acute liver injury," *Biochemical and Biophysical Research Communications*, vol. 572, pp. 125–130, 2021.
- [31] W. Hu, S. Chen, R. F. Thorne, and M. Wu, "TP53, TP53 target genes (DRAM, TIGAR), and autophagy," *Advances in Experimental Medicine and Biology*, vol. 1206, pp. 127–149, 2019.
- [32] P. Monti, P. Menichini, A. Speciale et al., "Heterogeneity of TP53 mutations and P53 protein residual function in cancer: does it matter?," *Frontiers in Oncology*, vol. 10, article 593383, 2020.
- [33] P. Borude, B. Bhushan, S. Gunewardena, J. Akakpo, H. Jaeschke, and U. Apte, "Pleiotropic role of p53 in injury and liver regeneration after acetaminophen overdose," *The American Journal of Pathology*, vol. 188, no. 6, pp. 1406–1418, 2018.
- [34] D. Chen, H. M. Ni, L. Wang et al., "p53 up-regulated modulator of apoptosis induction mediates acetaminophen-induced necrosis and liver injury in mice," *Hepatology*, vol. 69, no. 5, pp. 2164–2179, 2019.
- [35] D. Wang, Y. Ma, Z. Li et al., "The role of AKT1 and autophagy in the protective effect of hydrogen sulphide against hepatic ischemia/reperfusion injury in mice," *Autophagy*, vol. 8, no. 6, pp. 954–962, 2012.
- [36] K. Reyes-Gordillo, R. Shah, J. Arellanes-Robledo, Y. Cheng, J. Ibrahim, and P. L. Tuma, "Akt1 and Akt2 isoforms play distinct roles in regulating the development of inflammation and fibrosis associated with alcoholic liver disease," *Cell*, vol. 8, no. 11, p. 1337, 2019.
- [37] A. Choudhury, D. Bullock, A. Lim et al., "Inhibition of HSP90 and activation of HSF1 diminish macrophage NLRP3 inflammasome activity in alcohol-associated liver injury," *Alcoholism, Clinical and Experimental Research*, vol. 44, no. 6, pp. 1300–1311, 2020.
- [38] A. Ambade, D. Catalano, A. Lim, A. Kopoyan, S. A. Shaffer, and P. Mandrekar, "Inhibition of heat shock protein 90 alleviates steatosis and macrophage activation in murine alcoholic liver injury," *Journal of Hepatology*, vol. 61, no. 4, pp. 903–911, 2014.
- [39] D. Sun, L. Chen, H. Lv, Y. Gao, X. Liu, and X. Zhang, "Circ_0058124 upregulates MAPK1 expression to promote proliferation, metastasis and metabolic abilities in thyroid cancer through sponging miR-940," *Oncotargets and Therapy*, vol. - Volume 13, pp. 1569–1581, 2020.
- [40] K. S. Jeng, S. J. Lu, C. H. Wang, and C. F. Chang, "Liver fibrosis and inflammation under the control of ERK2," *International Journal of Molecular Sciences*, vol. 21, no. 11, 2020.
- [41] S. R. McGreal, K. Rumi, M. J. Soares, B. L. Woolbright, H. Jaeschke, and U. Apte, "Disruption of estrogen receptor alpha in rats results in faster initiation of compensatory regeneration despite higher liver injury after carbon tetrachloride treatment," *International Journal of Toxicology*, vol. 36, no. 3, pp. 199–206, 2017.
- [42] Y. Xu, H. Wang, S. Bao et al., "Amelioration of liver injury by continuously targeted intervention against TNFRp55 in rats with acute-on-chronic liver failure," *PLoS One*, vol. 8, no. 7, article e68757, 2013.
- [43] S. A. E. Bashandy, S. A. El Awdan, S. M. Mohamed, and E. A. A. Omara, "Allium porrum and Bauhinia variegata mitigate acute liver failure and nephrotoxicity induced by thioacetamide in male rats," *Indian Journal of Clinical Biochemistry*, vol. 35, no. 2, pp. 147–157, 2020.
- [44] C. Yin, K. J. Evason, K. Asahina, and D. Y. Stainier, "Hepatic stellate cells in liver development, regeneration, and cancer," *The Journal of Clinical Investigation*, vol. 123, no. 5, pp. 1902–1910, 2013.
- [45] E. Mogrovejo, P. Manickam, M. Amin, and M. S. Cappell, "Characterization of the syndrome of acute liver failure caused by metastases from breast carcinoma," *Digestive Diseases and Sciences*, vol. 59, no. 4, pp. 724–736, 2014.
- [46] W. Bernal and J. Wendon, "Acute liver failure," *The New England Journal of Medicine*, vol. 369, no. 26, pp. 2525–2534, 2013.
- [47] H. Lin, Q. Zhang, X. Li, Y. Wu, Y. Liu, and Y. Hu, "Identification of key candidate genes and pathways in hepatitis B virus-associated acute liver failure by bioinformatical analysis," *Medicine (Baltimore)*, vol. 97, no. 5, article e9687, 2018.
- [48] K. A. Moy, L. Jiao, N. D. Freedman et al., "Soluble receptor for advanced glycation end products and risk of liver cancer," *Hepatology*, vol. 57, no. 6, pp. 2338–2345, 2013.
- [49] K. Asadipooya, K. B. Lankarani, R. Raj, and M. Kalantarhormozi, "RAGE is a potential cause of onset and progression of nonalcoholic fatty liver disease," *International Journal of Endocrinology*, vol. 2019, Article ID 2151302, 2019.
- [50] N. M. E. Abo El-Nasr, D. O. Saleh, S. S. Mahmoud et al., "Olmesartan attenuates type 2 diabetes-associated liver injury: cross-talk of AGE/RAGE/JNK, STAT3/SCOS3 and RAS signaling pathways," *European Journal of Pharmacology*, vol. 874, article 173010, 2020.
- [51] L. Zhu, T. Chen, Y. Lu, D. Wu, X. Luo, and Q. Ning, "Contribution of IL-17 to mouse hepatitis virus strain 3-induced acute liver failure," *Journal of Huazhong University of Science and Technology. Medical Sciences*, vol. 32, no. 4, pp. 552–556, 2012.
- [52] M. Martini, M. C. De Santis, L. Braccini, F. Gulluni, and E. Hirsch, "PI3K/AKT signaling pathway and cancer: an updated review," *Annals of Medicine*, vol. 46, no. 6, pp. 372–383, 2014.
- [53] Y. Xie, X. Shi, K. Sheng et al., "PI3K/Akt signaling transduction pathway, erythropoiesis and glycolysis in hypoxia

- (review),” *Molecular Medicine Reports*, vol. 19, no. 2, pp. 783–791, 2019.
- [54] H. Y. Wu, X. C. Zhang, B. B. Jia et al., “Exosomes derived from human umbilical cord mesenchymal stem cells alleviate acetaminophen-induced acute liver failure through activating ERK and IGF-1R/PI3K/AKT signaling pathway,” *Journal of Pharmacological Sciences*, vol. 147, no. 1, pp. 143–155, 2021.
- [55] H. Cichoż-Lach and A. Michalak, “Oxidative stress as a crucial factor in liver diseases,” *World Journal of Gastroenterology*, vol. 20, no. 25, pp. 8082–8091, 2014.
- [56] L. Tang, F. Wang, L. Xiao et al., “Yi-Qi-Jian-Pi formula modulates the PI3K/AKT signaling pathway to attenuate acute-on-chronic liver failure by suppressing hypoxic injury and apoptosis *_in vivo_* and *_in vitro_*,” *Journal of Ethnopharmacology*, vol. 280, article 114411, 2021.