Research Article

Tilapia Skin Peptides Inhibit Apoptosis, Inflammation, and Oxidative Stress to Improve Dry Eye Disease In Vitro and In Vivo

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Dry eye disease (DED) is a common chronic ophthalmic disorder, and there is no effective treatment to cure it. It is urgent to find new antidry eye compounds. Here, the effects and underlying mechanisms of tilapia skin peptides (TSP) on DED were investigated. In vitro, human corneal epithelial cells (HCECs) were cultured in a hypertonic medium containing TSP for 12 h. The MTT assay, calcein-AM/PI staining, reactive oxygen (ROS) analysis, and western blot were performed at the end of the experiments. In the in vivo model of DED, mice eyes were dropped with 0.3% benzalkonium chloride (BAC) and 0.1% TSP for 14 days. Mice were treated with BAC and TSP twice daily with a 10-hour time interval between treatments. After treatment, phenolic red cotton experiment, tear ferning test, and histology assay were carried out. In vitro, TSP significantly restored the cell viability of HCECs challenged by NaCl. In vivo, tear secretion function and tear fern-like crystal levels were considerably improved in the DED group after treatment with TSP. Mechanically, TSP impend the DED development by regulating Bax/Bcl-2 signal pathway, inhibiting iNOS and COX-2 protein expression, moderating ROS/Nrf2/HO-1 axis, inhibiting cell apoptosis in the corneal regions, increasing the number of conjunctival goblet cells, and arresting corneal epithelial thinning. In conclusion, TSP ameliorated DED-like disorder in BAC-induced DED mice and cell damage in NaCl-induced HCECs. TSP improved DED by suppressing apoptosis, inflammation, and oxidative stress. Consequently, this study reveals the beneficial activity of TSP in DED.

1. Introduction

Dry eye disease (DED), one of the most common chronic diseases in ophthalmic clinics, distresses 5% to 50% of people around the world [1, 2]. Increasing epidemiological evidence indicates that DED is more prevalent in women than in men. As population ages, the incidence of DED is increasing annually [3, 4]. Previous studies have shown that DED is related to lifestyle habits, such as smoking, drinking alcohol, using electronic screens, and wearing contact lenses for a long time [5, 6]. In addition, certain autologous diseases, air pollution, lack of sleep, and dry environments increase the risk of suffering from DED [7–9]. DED causes ocular pain or discomfort, and even worse, severe DED affects the patient’s vision and mental health [10, 11].

Conventional therapy for DED mainly depends on artificial tears intervention to enhance lubrication on ocular surface and improve eye inflammation [12]. However, there are some drawbacks after treatment with artificial tears. For example, cyclosporine A, a drug commonly used to treat...
DED, causes undesirable effects such as ocular surface pain, burning sensations, bone marrow suppression, cystitis, and hypertension [13]. Studies point out that prolonged use of corticosteroids for the treatment of DED increases the risk of hypertension, glaucoma, and cataracts [14]. To date, the effectiveness of the treatment for DED is suboptimal, and effective drugs for DED remain a major unmet need.

China produces more than 90% of the world’s tilapia and holds the world’s largest production of freshwater fish [15]. Unfortunately, many by-products, including skin, are generated because tilapia is often only processed into primary products such as fillets [16]. Most of those by-products are discarded as rubbish, which contributes to environmental pollution and wastage of resources. Sourcing active substances from tilapia skin would not only help alleviate the problem of wasted resources and environmental pollution but also promote the upgrading of the tilapia industry [17].

In addition, studies have shown that natural foods and nutritional support provide a valuable intervention in the prevention and treatment of ocular diseases [18]. Tilapia skin peptides (TSP) are prepared enzymatically from tilapia skin and characterized by good biocompatibility, high solubility, safety, nontoxicity, and easy digestion and absorption [19]. Several biological activities of TSP, such as promotion of wound healing, antioxidant, improvement of diabetes, anti-atherosclerotic, and antidepressant, have been reported in previous studies [20–24]. To date, the role of TSP on DED has not been reported.

Here, the effects of TSP on DED were explored. Meanwhile, the relevant mechanisms of TSP on DED were investigated via in vitro and in vivo DED models.

2. Materials and Methods

2.1. Materials. Human corneal epithelial cells (HCECs) were purchased from Guangzhou Jennio Biotech Co., Ltd (Guangzhou, China). Sodium hyaluronate (SH, H20150150) was bought from Shanghai Macklin Biochemical Technology Co., Ltd (Shanghai, China). Test phenol red cotton thread was acquired from Tianjin Jinming New Technological Development Co., Ltd (Tianjin, China). The in situ terminal deoxynucleotidyl transferase-mediated dUTP biotin nick end labeling kit (TUNEL, E-CK-A321) was obtained from Elabscience Biotechnology Co., Ltd (Wuhan, China). The 3-(4,5)-dimethylthiazol-2-(5)-tetrazolium (MTT, S19063) was obtained from Shanghai Yuanye Biotechnology Co., Ltd (Shanghai, China). The polyvinylidene difluoride (PVDF) membranes for in situ labeling assay (iNOS, WL0992a) were obtained from Cell Signal Technology (Danvers, MA, USA). The polyvinylidene difluoride (PVDF) membranes were obtained from Millipore, MA, USA. Modified eagle’s medium (MEM, 11095080), fetal bovine serum (FBS, 1907422), and penicillin-streptomycin solution (22893252) were obtained from Gibco (Grand Island, USA).

2.2. Preparation of TSP. The preparation method of TSP was described in our previous article [25]. Briefly, tilapia skins were defatted with isopropyl alcohol and then dried. Dried skins were first hydrolyzed by 0.3% neutrase at 90 min at 50°C, pH 7.0, followed by 0.3% alcalase for 90 min at 55°C, pH 9.0, respectively. The hydrolysis solution was heated (90°C for 10 mins) and centrifuged (12000g for 15 mins). The supernatant was ultrafiltered with a 10 kDa ultrafiltration membrane and then freeze-dried to obtain the dry powder, which was named TSP. Glycine was the most abundant amino acid in TSP prepared according to this method, followed by proline, arginine, and alanine [25]. Most of TSP were small molecular peptides with molecular weight less than 3 kDa (92.63%) [25].

2.3. Cell Culture and Treatment. HCECs were grown in MEM medium containing 10% FBS, 100 μg/mL streptomycin, and 100 U/mL penicillin. HCECs were cultured in a cell incubator under 5% CO₂ at 37°C.

HCEC viabilities were detected by the MTT method. 2 × 10⁴ cells/well were plated into 96-well plates to be cultured for 24 h. To find the appropriate modeling concentration, HCECs were incubated with different concentrations of NaCl (0 mM, 20 mM, 40 mM, 60 mM, 80 mM, and 100 mM, respectively) for 12 h. For testing cytotoxicity, the individual concentrations of TSP (0 μg/mL, 250 μg/mL, 500 μg/mL, 1000 μg/mL, and 2000 μg/mL, respectively) were added to each well and incubated for 12 h. For detecting the protective effects of TSP, HCECs were randomly grouped into 4 groups as follows: control, M (100 mM NaCl), M + TSP (250 μg/mL), and M + TSP (500 μg/mL). HCECs were pretreated with TSP (250 μg/mL or 500 μg/mL) for 2 h, and then the cells were coincubated with 100 mM NaCl and different concentrations of TSP for 12 h. After that, the medium was discarded and cells were washed 3 times with PBS (phosphate buffer solution, pH 7.2). Afterward, 100 μL MTT solution (0.5 mg/mL) was added to each well and the cells were incubated for 4 h at 37°C. Finally, the MTT solution was discarded, and 150 μL dimethyl sulfoxide was added to dissolve formazan. The
results of the MTT assay were obtained by measuring absorbance at 490 nm via a microplate reader (BioTek, USA).

2.4. Animals and Treatment. Mice (C57BL/6, male, 6–7 weeks old) were obtained from Guangdong Medical Laboratory Animal Center (Guangzhou, China). Mice were housed in a standard animal room (room temperature: 23 ± 2°C, relative humidity: 40–60%, and light-dark cycled for 12 hours from 8:00 a.m. to 8:00 p.m.). During the experiment period, the mice were not restricted to water and diet. The protocol of animal experiments was approved by the Animal Ethics Committee of Guangdong Ocean University (approval number: 2022062101) and carried out under the requirements of the Guidelines for the Care and Use of Laboratory Animals of Guangdong Ocean University.

The BAC-induced DED mouse model was established according to a previously reported method with minor modifications [26]. The mice were randomly grouped into 4 groups (9 mice per group, n = 18 eyes) as follows: control, DED, DED + TSP, and DED + SH, respectively. SH (sodium hyaluronate) eye drops was used as a positive medicine. After 7 days of acclimatization, mice eyes in the control group were dropped with normal saline (5 μL/eye). Mice eyes in remaining 3 groups were dropped with 5 μL 0.3% BAC (dissolved in normal saline). One hour later, each eye in the control and DED groups were dropped with 5 μL normal saline. Each eye in DED + TSP and DED + SH groups was treated by 5 μL 0.1% TSP (dissolved in normal saline) or SH, respectively. After 7 days, tear volume measurement and tear ferning test were employed on day 15 and 16, respectively. On day 17, mice were euthanized, and the ocular surface tissues were collected.

2.5. Tear Volume Measurement. Tear volume measurement was performed as previously reported methods, with slight modification [27]. Briefly, a cotton thread was placed on the inside of the medial side of the lower conjunctiva’s fornix for 30 s (Figure 1(b)) [27]. Then, the reddening length of the thread was measured (Figure 1(c)).

2.6. Tear Ferning Test. Tear ferning test was carried out according to the reference with minor modifications [28]. In brief, normal saline (3 μL) was dropped into the eyeball to wash the ocular surface, and the wash solution was carefully recollected and spread on a clean glass slide. After drying at room temperature for 2 hours, the tear fern-like formation was photographed with a microscope (Leica, Wetzlar, Germany). All measurements were done in a room at 25°C and relative humidity of 40–50%.

Tear ferns of tears were quantified according to reference [28]. Tear ferning was classified into grades 0 to 4. Grade 0 contains intact crystals with no spaces or gaps between fern crystals. Fern-like crystals in grade 1 have larger interbranch density, spaces, or gaps than those of grade 0. In grade 2, the branch gaps among fern-like crystalline are significantly larger than those of grade 1. In grade 3, the density between the crystalline branches increases further, and only a few fern-like crystals can be observed. As for grade 4, there were no completely invisible fern-like crystals that can be found.

2.7. Histology. After being anesthetized with pentobarbital sodium, mice were transcranial-perfused with PBS and 4% paraformaldehyde. The intact eye tissue (including cornea, upper and lower eyelids, and conjunctiva) was removed. The tissues were bathed in 4% paraformaldehyde at 4°C for 24 h, dehydrated in graded sucrose solutions, and embedded in paraffin. Sequential 4 μm thick sections of each sample were used for the experiments described in 2.8 and 2.9.

2.8. Conjunctival Goblet Cells (GCs) Counts and Corneal Epithelial Thickness Measurement. GCs were stained with PAS staining kit. GCs in the superior and inferior conjunctiva in three slides per eye were numbered using Image pro plus software [29]. Seven eyes were counted for each group. H&E staining was carried out to investigate the thickness and morphological changes of corneal epithelial cells. The central corneal thickness of each eye in three sections was calculated using Image J software [30]. Nine eyes were counted for each group.

2.9. In Situ TUNEL Staining. In situ TUNEL kit was used to detect apoptotic cells in the corneal epithelium. Experimental protocols were carried out strictly under the working instructions of the kit. One representative image of central corneal was obtained from each section under a fluorescence microscope (Leica, Wetzlar, Germany). The number of TUNEL-positive cells in each eye was counted in three sections [31]. Three eyes were counted for each group. Image J was employed to measure the number of apoptotic cells in corneal epithelium.

2.10. Calcein-AM/PI Staining. The effects of TSP on apoptosis of HCECs induced by hyperosmotic stress were further measured by calcein-AM/PI staining. The experiment protocol was designed as in the previous study, with slight modifications [32, 33]. After processing the cells as described in section 2.3, the medium was aspirated and HCECs were washed 2 times with PBS. Whereafter, each well was incubated with 100 μL calcein-AM and PI mix for 30 min at 37°C. Calcein-AM is hydrolyzed into calcein by the endogenous esterase of living cells, which makes living cells emit strong green fluorescence. Dead cells will fluoresce red because PI will only stain dead cells. The images were photographed via a fluorescence microscope (Leica, Wetzlar, Germany). The results of calcein-AM/PI staining were described as the relative apoptosis rate (%) which is expressed as a percentage relative to the M group.

2.11. Intracellular Reactive Oxygen (ROS) Analysis. The ROS production level in HCECs was measured as previously reported methods [34]. Briefly, HCECs were seeded into
black microtiter plates and treated as described in Section 2.2. The medium in each well was aspirated away, and DCFH-DA (10 μM) was added to each well for 30 min incubation at 37°C. The fluorescence image was obtained by a fluorescence microscope (Leica, Wetzlar, Germany). Image J was used to analyze the mean intensity of ROS.

2.12 Western Blot. Proteins of HCECs were extracted by RIPA buffer (supplemented with proteinase and phosphatase inhibitors) in an ice bath. During this period, HCECs were placed on a shaker and gently shaken. Then, cells were scraped into one area by cell scrapers, and the lysate was collected. The supernatant was gently gathered after centrifugation at 12,000 rpm under 4°C for 15 min. Following the manufacturer’s instructions, the BCA Protein Quantification Kit was used to determine the protein concentration.

Western blot was employed to analyze the protein expression levels of Bcl-2, Bax, COX-2, iNOS, Nrf2, HO-1, and β-actin, and the protocol was designed as our previous method [35]. Mixed proteins from each sample panel were separated by SDS-polyacrylamide gel electrophoresis. Target protein was transferred to PVDF membranes. The membranes were blocked in 5% skim milk powder for 2.5 h at room temperature and then incubated with primary antibodies overnight. Subsequently, the membranes were incubated with horseradish peroxidase-conjugated secondary antibody for 1 h at room temperature after washing by TBST (Tris Buffered Saline with Tween-20) for 60 min. After washing the membranes with TBST 5 times, the membranes were incubated with an electrochemiluminescence reagent (Millipore, Bedford, MA, USA), and images of the target protein bands were acquired by the ChemiDoc™ XRS+ system (Bio-Rad, Hercules, USA). The density of each band was calculated using Image J. The expression levels of proteins were standardized to β-actin.

2.13 Statistical Analysis. Data were analyzed by using Graphpad Prism 8.0. Values are stated as the mean ± SEM. One-way ANOVA followed by the Tukey test was used to assess differences between more than three groups. The differences were recognized as significant at \( p < 0.05 \).

3. Results

3.1 TSP Enhanced the Cell Viability of HCECs Challenged by NaCl. The cytotoxicity of hyperosmotic stress on HCECs is illustrated in Figure 2(a), where NaCl (0 mM, 20 mM, 40 mM, 60 mM, 80 mM, and 100 mM, respectively) decreased the viabilities of HCECs in a concentrate-dependent manner. After being treated with NaCl at the dose of 100 mM, the viability of HCECs was decreased to 70.47% (\( p < 0.01 \) vs. control group, Figure 2(a)). Concentration of
100 mM of NaCl was considered as a suitable modeling concentration and used for subsequent experiments. The cytotoxicity data of TSP on HCECs are shown in Figure 2(b). TSP at concentrations with 1000 μg/mL and 2000 μg/mL reduced HCECs viabilities to 89.94% ($p < 0.01$ vs. control group) and 77.08% ($p < 0.01$ vs control group), respectively. The results implied that TSP above 1000 μg/mL produced cytotoxicity to HCECs (Figure 2(b)). The protective effects of TSP on HCECs induced by 100 mM NaCl are displayed in Figure 2(c). In Figure 2(c), the viability of HCECs in the M group is reduced to 67.87% ($p < 0.01$ vs. control group). After TSP intervention (250 μg/mL and 500 μg/mL), the cell viabilities of HCECs were increased to 81.05% ($p < 0.01$ vs. M group) and 77.26% ($p < 0.05$ vs. M group), respectively.

3.2. TSP Improved Tear Secretion in BAC-Induced DED Mice. All intervention treatments on the mice were completed on day 14. On day 15, phenol red cotton thread experiment was performed to examine the effect of TSP on tear secretion of BAC-induced DED mice (Figures 1(a)–1(c)). The data showed that the reddened length of the cotton thread in the control group was 1.1 mm in the DED group was 2.9 mm ($p < 0.05$) group and DED + SH (positive medicine, 3.3 mm, $p < 0.01$) group was significantly more than that of the DED group (Figure 1(d)). The data showed that there was no clear difference between the groups of DED + TSP and SH in improving tear secretion function ($p > 0.05$, Figure 1(d)).

3.3. TSP Improved Tear Ferning Levels in BAC-Induced DED Mice. On day 16, tear ferning was tested. Morphologically, the tear fern-like crystals in the control group were intact in shape, while those in the DED group were fragmented (Figure 3(a)). The shape of the tear fern-like crystals was significantly restored after intervention with TSP and SH (Figure 3(a)). Statistically, the tear ferning grade in the control group was 1.1 and in the DED group was 2.9 (Figure 3(b)). The data showed that BAC significantly increased the tear ferning grade in the DED group ($p < 0.01$ vs. control group, Figure 3(b)). After intervention with TSP and SH, the tear ferning grades were reduced to 2.3 ($p < 0.05$ vs. DED group) and 2.13 ($p < 0.01$ vs. DED group), respectively (Figure 3(b)). As for the groups of DED + TSP and DED + SH, there was no obvious difference between them ($p > 0.05$, Figure 3(b)). It is suggested that comparable efficacy of TSP and SH in improving tear fern crystallization was founded in this research (Figures 3(a) and 3(b)).

3.4. TSP Prevented the Corneal Epithelial Cell Layers from Thinning in BAC-Induced DED Mice. The results of H&E staining are displayed in Figure 4(a). In Figure 4(b), the data showed that the thickness of corneal epithelial cell layers in the DED group (26.15 μm, $p < 0.01$) was significantly reduced compared with that of the control group (35.19 μm). After intervention with TSP or SH, the thickness of corneal epithelial cell layers was increased to 30.92 μm ($p < 0.05$ vs DED group) and 32.71 μm ($p < 0.01$ vs DED group), respectively (Figure 4(b)). The data showed no statistical difference between the TSP and SH intervention groups ($p > 0.05$, Figure 4(b)).

3.5. TSP Arrested the Loss of CGs in BAC-Induced DED Mice. PAS staining was carried out to evaluate the number of CGs in the conjunctiva. The data of PAS staining are shown in Figure 5(a). The number of CGs in conjunctiva in the control group was 122.5 and 49.75, respectively (Figure 5(b)). The results indicated that BAC stimulation significantly reduced the number of CGs in the DED group ($p < 0.01$ vs. control group, Figure 5(b)). After intervention with TSP and SH, the number of CGs was 88.17 cells ($p < 0.05$ vs. DED group) and 95.25 cells ($p < 0.01$ vs. DED group), respectively (Figure 5(b)). No obvious difference was observed between the groups of DED + TSP with DED + SH ($p > 0.05$, Figure 5(b)).

3.6. TSP Alleviated Corneal Epithelial Cell Apoptosis Induced by BAC-Induced DED Mice. To explore the effects of TSP on corneal epithelial cell apoptosis in DED mice-induced by BAC, TUNEL staining was carried out. The data of TUNEL staining are exhibited in Figure 7(a). The number of TUNEL-positive cells (apoptotic cells) in the corneal epithelial of the DED group (17.67 cells) was clearly higher than that of the control group (2.00 cells) ($p < 0.01$, Figure 7(b)). Compared with that of the DED group, the number of TUNEL-positive cells in the DED + TSP group and DED + SH group was increased to 9.01 cells ($p < 0.05$) and 6.03 cells ($p < 0.05$), respectively (Figure 7(b)). There was no clear difference between the groups of DED + TSP and DED + SH ($p > 0.05$, Figure 7(b)).

3.7. TSP Inhibited Apoptosis in HCECs Challenged by NaCl. To further investigate the roles of TSP on HCECs apoptosis challenged by NaCl, calcein-AM/PI staining and western blot analysis were carried out. The results of calcein-AM/PI staining are displayed in Figure 7(a). The relative apoptosis rate of HCECs in the M group is significantly higher than that of the control group (7.89%, $p < 0.01$ vs M group, Figure 7(b)). After intervention with TSP (250 μg/mL and 500 μg/mL, the relative apoptosis rate was reduced to 36.87% ($p < 0.01$ vs. M group) and 26.54% ($p < 0.01$ vs. M group, respectively (Figure 7(b)). Expression levels of Bax and Bcl-2 in HCECs were examined via western blot (Figure 7(c)). The ratio of Bax/Bcl-2 expression levels of the M group was significantly increased compared with that of the control group ($p < 0.01$, Figure 7(d)). TSP at 250 μg/mL ($p < 0.01$ vs. M group) and 500 μg/mL ($p = 0.13$ vs. M group) reduced the ratio of Bax/Bcl-2 expression levels in HCECs induced by NaCl, compared with that of the M group (Figure 7(d)).
3.8. TSP Reduced COX-2 and iNOS Protein Expression Level in HCECs Challenged by NaCl. Expression levels of COX-2 and iNOS in HCECs were assayed (Figures 8(a) and 8(c)). The COX-2 protein expression level in the M group was markedly increased (p < 0.01 vs. control group, Figure 8(b)). After intervention with TSP (250 μg/mL and 500 μg/mL), the expression levels of COX-2 were obviously decreased (p < 0.01 vs. M group, Figure 8(b)). In the M group, the iNOS expression level was higher than that of the control group (p < 0.05, Figure 8(d)). TSP (250 μg/mL and 500 μg/mL) treatment significantly downregulated the expression levels of iNOS in HCECs (p < 0.05 vs. M group, Figure 8(d)).

3.9. TSP Improved ROS/Nrf2/HO-1 Axis in HCECs Challenged by NaCl. The production level of ROS in the HCECs-challenge by NaCl was detected (Figure 9(a)). The mean intensity of ROS in the M group was markedly increased (p < 0.01 vs. control group Figure 9(b)). After intervention with TSP (250 μg/mL and 500 μg/mL), the mean intensity of
ROS was significantly decreased ($p < 0.01$ vs. M group; $p < 0.05$ vs. M group, Figure 9(b)). Expression levels of Nrf2 and HO-1 were obviously downregulated in the M group ($p < 0.01$ vs. control group, Figures 9(c)–9(e)). After intervention with TSP (250 $\mu$g/mL and 500 $\mu$g/mL), the expression levels of Nrf2 were markedly increased ($p < 0.01$ vs. M group; $p < 0.05$, $** p < 0.01$ vs. DED group, Figures 9(c) and 9(d)). TSP (250 $\mu$g/mL and 500 $\mu$g/mL) intervention also obviously upregulated the expression level of HO-1 in HCECs (both $p < 0.01$ vs M group, Figures 9(c) and 9(e)).

4. Discussion

DED impairs physical and psychological health of the sufferer. Evidences accumulated over the past few decades indicate that nutritional supplementation helps to prevent DED [36, 37]. As a natural food-derived peptide, TSP is of great benefit to human health. Here, we explored the potential function and mechanisms of TSP on DED in in vitro and in vivo DED models. NaCl stimulation decreased the cell viability of HCECs, and BAC induction significantly
Figure 6: Effects of TSP on apoptosis of corneal epithelial cells in DED mice. (a) TUNEL representative picture of corneal epithelial cells apoptosis in BAC-induced DED mice. TUNEL-positive cells, green; DAPI-positive cells, blue. Scale bar = 50 μm. (b) Results of TUNEL-positive cell count in the cornea (n = 3 eyes). Data shown as mean ± SEM. **p < 0.01 vs. control group; *p < 0.05 vs. DED group.

Figure 7: Continued.
**Figure 7:** Effects of TSP on the cell apoptosis of HCECs induced by NaCl. (a, b) The relative cell apoptosis rate was detected by calcein-AM/PI staining. Calcein-positive cells, green; PI-positive cells, red; and scale bar: 50 μm; (n = 5). (c, d) The protein expression of Bcl-2 and Bax was analyzed by western blot assay. Quantitation of the intensities normalized to β-actin, (n = 3). Data are shown as mean ± SEM. ## p < 0.01 vs. control group; and ** p < 0.01 vs. M group.

**Figure 8:** Continued.
**Figure 8:** Effects of TSP on NaCl-induced inflammation in HCECs. The protein expression of COX-2 and iNOS was analyzed by western blot assay. Quantitation of the intensities normalized to β-actin, \((n = 3)\). Data shown as mean ± SEM. \# \(p < 0.05\), \*\* \(p < 0.01\) vs. control group; \* \(p < 0.05\), \*\* \(p < 0.01\) vs. M group.

**Figure 9:** Effects of TSP on the ROS/Nrf2/HO-1 axis in HCECs induced by NaCl. (a, b) ROS was detected by DCFH-DA fluorescence staining, and green fluorescence represented ROS; scale bar: 50 μm, \((n = 4)\). (c–e) The protein expression of Nrf2 and HO-1 was analyzed by western blot assay. Quantitation of the intensities normalized to β-actin, \((n = 3)\). Data are shown as mean ± SEM. \# \(p < 0.01\) vs. control group; \* \(p < 0.05\), \*\* \(p < 0.01\) vs. M group.
decreased tear secretion, increased tear fern score, and decreased corneal epithelial cell layer thickness and the number of GCs in mice. After TSP intervention, these adverse indicators were improved both in HCECs and mice. TSP appears to be comparable to the positive medicine, SH, in improving DED symptoms in DED mice. Here, the potential mechanisms of TSP in ameliorating DED were further investigated in depth through cell and animal models.

Apoptosis plays a critical role in the pathological processes of DED. Numerous studies demonstrate that hyperosmolarity triggers apoptosis in ocular surface cells, especially in corneal epithelial cells [38]. It is well known that a steady tear film is a hallmark of a healthy eye surface. Abnormalities in both tear production and evaporation result in impairment of tear film balance, which is accompanied by variations in tear osmolarity [39]. Tear hyperosmolarity results in corneal epithelial cells apoptosis and causes loss of GCs. Loss of GCs is also associated with apoptosis [40]. Mucin, secreted by CGs, is the component of tears and has a role in maintaining the stability of the tear film and influencing the integrity of the fern-like crystals of the tears [28]. In the present study, mice induced by BAC decreased tear secretion, elevated tear fern score, reduced number of GCs, detached corneal epithelial cells, and affected corneal epithelial cell layer thickness. Those phenomena may be related to apoptosis of ocular surface cells.

Apoptosis is regulated by the relative expression of Bax/Bcl-2. Bcl-2, as an antiapoptotic protein, is instrumental in maintaining mitochondrial function. Overexpression of Bcl-2 inhibits translocation and dimerization of the proapoptotic protein Bax, which exhibits arresting effects on apoptosis [41]. Here, the number of TUNEL-labeled corneal epithelial cells was enhanced in mice exposed to BAC. NaCl stimulation increased the relative apoptosis rate of HCECs and elevated the Bax/Bcl-2 ratio of HCECs. These results are direct evidence for the involvement of apoptosis in DED. After TSP intervention, the indicators of DED were improved in both cell and mice DED models. Thus, TSP may impede the development and progression of DED via antiapoptotic effects.

Inflammation is viewed as a key factor in triggering DED. Corneal epithelial cells are a vital component of the cornea [42]. In normal physiological conditions, corneal epithelial cells contribute substantially to maintaining corneal transparency and preventing the invasion of external pathogens into the eye [43]. Previous studies have established that tear hyperosmolarity can cause inflammation of the ocular surface [44]. Increasing tear osmolarity causes the secretion of proinflammatory factors, chemokines, and matrix metalloproteinases (MMPs), activates mitogen-activated protein kinase, nuclear factor kappa-B, and other signal pathways, and triggers a chain of inflammatory

Figure 10: Schematic illustration of TSP ameliorates DED by inhibiting apoptosis, inflammation, and oxidative stress. NaCl stimulation blocks Nrf2/HO-1 signalling in HCECs. Impaired Nrf2/HO-1 signal promoted ROS overproduction and triggered COX-2 and iNOS overexpression, resulting in oxidative stress and inflammation. NaCl stimulation also disrupted the balance of Bax/Bcl-2 expression in HCECs, leading to apoptosis. Apoptosis, inflammation, and oxidative stress interact to participate in the pathological process of DED, resulting in mice exhibiting DED symptoms. All these undesirable phenomena were ameliorated by TSP. Collectively, TSP can modulate the pathological process of DED from multiple perspectives, thus improving DED.
responses in the ocular surface [45–48]. Many studies indicate that MMPs cleave tight junction proteins, occludin, and zona occludens-1, which leads to corneal epithelial cells exfoliation [49, 50]. This may be related to the thinning of the corneal epithelial cell layers from our observations in the DED mice. The conjunctiva is an essential element of the ocular surface. It contributes to ensure the ongoing clarity and survival of the ocular cells and stroma. Chronic inflammation leads to conjunctival disorders, one of the important features of which is the loss of CGs [51]. Inflammation exacerbates the loss of CGs, resulting in a deficiency of mucin in tears. Furthermore, tear osmolarity increases with mucin deficiency. Tear hyperpermeability in turn promotes the development of ocular surface inflammation and apoptosis, exacerbating corneal epithelial damage and trapping DED in a vicious cycle [52, 53]. In addition, chronic inflammation results in increased expression of COX-2 and iNOS [54]. In this work, BAC stimulation increased the grade of tear fern-like crystals, diminished corneal epithelial thickness, and promoted the loss of CGs in mice. NaCl excitation upregulated the expression levels of COX-2 and iNOS proteins in HCECs. This evidence suggested that inflammation and DED were connected. After TSP intervention, all these indicators were reversed. TSP contributed to improve tear film stability, repair corneal epithelium, and impede the onset and development of DED possibly associated with its anti-inflammatory effects.

Mounting evidence suggests that oxidative stress orchestrates the pathological process of DED [55]. Overproduction of ROS leads to oxidative stress, which causes lipid oxidation, protein denaturation, and DNA damage, further contributing to inflammation and apoptosis [56]. Oxidative stress is a causal factor in several disorders [57]. In ocular, oxidative stress is associated with most eye diseases, such as glaucoma and cataract. [58]. Remarkably, abnormal ROS production and inflammatory cell infiltration are detected in the ocular tissues of patients with DED [59]. Eyes are susceptible to high levels of ROS because they are directly exposed to UV light, dry, and air pollution for long periods. Additionally, ocular surface oxidative stress induced by hyperosmotic stimulation has been reported [48]. Other research studies demonstrated that excess ROS leads to apoptosis by a mitochondria-dependent pathway [60]. Nrf2/HO-1 is an important pathway for regulating intracellular oxidative stress, inflammation, and apoptosis [61]. Under oxidative stress, Nrf2 enters the nucleus and associates with antioxidant response element [62]. Then, the activities of endogenous antioxidant enzymes (e.g., SOD, HO-1, etc.) were enhanced, and the production of ROS was reduced [62]. Here, the protein expression levels of Nrf2 and HO-1 were significantly reduced, and the level of ROS production was clearly increased after treatment with NaCl for 12 h in HCECs. These results indicate that oxidative stress, together with apoptosis and inflammation, is involved in the onset and development of DED. After TSP intervention, all these unfavourable indicators were improved, which indicated that TSP reversed the onset and development of DED by regulating the ROS/Nrf2/HO-1 axis.

5. Conclusions

In vitro, TSP restored the cell viability of NaCl-challenged HCECs, reduced relative apoptosis rate and ROS production level, decreased Bax/Bcl-2 protein expression rate, down-regulated COX-2 and iNOS protein expression levels, and increased Nrf2 and HO-1 protein expression levels. In vivo, TSP increased the length of reddening of cotton threads in BAC-induced DED mice, reduced the grade of its tear ferning, restored the thickness of corneal epithelial cell layer, and inhibited the loss of its GCs and apoptosis of corneal epithelium. In summary, TSP impede the generation and development of DED via inhibition of apoptosis, inflammation, and oxidative stress (Figure 10). This study provides a new perspective on the high-value utilization of tilapia skin by-products for processing, and TSP is promising to be developed as a potential product to prevent and manage DED.

Data Availability

Data are available from the corresponding author upon reasonable request.

Conflicts of Interest

The authors declare they have no conflicts of interest.

Authors’ Contributions

This study was conceived and designed by Jian Zeng, Chuanyin Hu, and Yun-Tao Zhao. Jian Zeng, Kaishu Deng, Jianyang Du, and Zhiyou Yang performed experiments. Chuanyin Hu, CuiXian Lin, and Shilin Zhang organized and analyzed the date. The original draft was written by Wenjin Wu, Shucheng Liu, Jianyang Du, and Yun-Tao Zhao. All authors have read and approved the published version of the manuscript.

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