Pathological mutations reveal the key role of the iRhom2 N-terminus for ADAM17 binding, stability

and activity.

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Abstract

The protease ADAM17 plays an important role in inflammation and cancer and is regulated by iRhom2.
Mutations in the cytosolic N-terminus of human iRhom2 cause tylosis with oesophageal cancer (TOC).
In mice, partial deletion of the N-terminus results in a curly hair phenotype (cub). These pathological
consequences are consistent with our findings that iRhom2 is highly expressed in keratinocytes and in
oesophageal cancer. Cub and TOC are associated with hyperactivation of ADAM17-dependent EGFR
signalling. However, the underlying molecular mechanisms are not understood. We have identified a
regulatory site, encompassing all known TOC mutations, whose disruption increases constitutive
ADAM17 activity. The larger cub deletion also includes the TOC site and thus also promotes increased
constitutive ADAM17 activity. Furthermore, the cub mutation, but not the TOC mutation, causes severe
reductions in stimulated shedding, binding and stability of ADAM17, suggesting the presence of
additional regulatory sites in the N-terminus of iRhom2. Overall, this study contrasts the TOC and cub
mutations, illustrates their different molecular consequences and reveals important key functions of
the iRhom2 N-terminus in regulating ADAM17.

Key words: esophageal squamous cancer, ectodomain shedding, EGFR ligand release, curly-bare (cub)

mouse, iRhom2, ADAM17, Howel–Evans syndrome, tylosis with oesophageal cancer (TOC)

Introduction

Oesophageal cancer (OC) is a critical global health concern, given its alarming prognosis and high mortality rate, ranking as the sixth leading cause of cancer-related death worldwide. Oesophageal squamous cell carcinoma (OSCC) and oesophageal adenocarcinoma (OAC) are the primary histological subtypes of OC. Despite their similarities, OSCC and OAC differ both epidemiologically and biologically (Rizza et al., 2015, Smyth et al., 2017, Uhlenhopp et al., 2020). The prognosis for OSCC, which comprises most OC cases, is exceptionally poor (Uhlenhopp et al., 2020, Yang et al., 2022). Notably, smoking and alcohol consumption serve as significant risk factors for OSCC development. However, the underlying molecular and genetic mechanisms driving OC remain poorly understood.

Howel-Evans syndrome, also called tylosis with oesophageal carcinoma (TOC), directly correlates with an increased risk to develop OSCC (Howel-Evans et al., 1958, Blaydon et al., 2012). This rare genetic disorder affects the seven-transmembrane spanning pseudoprotease iRhom2 (Fig. 1A) and its functions, altering EGF receptor (EGFR) signalling pathways by aggravating iRhom2-dependent ectodomain shedding (Blaydon et al., 2012).

Shedding, the proteolytic release of ectodomains from membrane proteins, is a crucial mechanism in many physiological and pathological processes. The released soluble ectodomains, which are often receptors or receptor ligands, exhibit potent biological activity. iRhoms, pseudoproteases of the rhomboid family, play a crucial role in the shedding process by forming a complex with the transmembrane sheddase ADAM17 (A-disintegrin and metalloproteinase 17)(Siggs et al., 2012, Christova et al., 2013, Siggs et al., 2014, Li et al., 2015).

ADAM17 has a broad spectrum of substrates, including cytokines, growth factors and cytokine receptors such as tumour necrosis factor (TNF)(Black et al., 1997), transforming growth factor α (TGFα) and amphiregulin (AREG)(Peschon et al., 1998, Sahin et al., 2004). Release of these substrates is crucially involved in various (patho-)physiological processes (Peschon et al., 1998, Blaydon et al., 2011) highlighting the central role of ADAM17 in development and in the immune response but also in chronic inflammation and cancer. Additionally, the multi-faceted role of ADAM17 in virus entry has been recently demonstrated (Lambert et al., 2005, Palau et al., 2020, Yuan et al., 2021, Jocher et al., 2022, Niehues et al., 2022, Zaruba et al., 2022).

The formation of the iRhom-ADAM17 complex is a necessary step for ADAM17 maturation (Fig. 1A,B)(Christova et al., 2013, Maretzky et al., 2013, Grieve et al., 2017, Düsterhöft et al., 2021, Kahveci-Türköz et al., 2023). On the cell surface the shedding activity of mature ADAM17 is further regulated by iRhoms (Cavadas et al., 2017, Grieve et al., 2017). In mammals, two genes for iRhoms exist: RHBDF1 (iRhom1) and RHBDF2 (iRhom2). While iRhom1 is present in most cell types, iRhom2 initially appeared to be immune cell specific, but is also upregulated during inflammatory episodes in

other cell lineages such as endothelial and epithelial cells (Lu et al., 2017, Babendreyer et al., 2020,

Giese et al., 2021). Consistent with this, iRhom2 deficiency in mice and humans does not cause obvious

developmental defects, but impairs the immune response (Adrain et al., 2012, McIlwain et al., 2012,

Kubo et al., 2022).

iRhoms contain a large N-terminal cytosolic tail that has not yet been fully characterised (Fig. 1A). The

genetic disorder causing TOC is caused by single point mutations in the N-terminus (Howel-Evans et

al., 1958, Ellis et al., 1994, Blaydon et al., 2012, Saarinen et al., 2012, Ellis et al., 2015, Mokoena et al.,

2018). This disorder is characterised by symptoms such as leukoplakia and hyperkeratosis and

increases the risk of OSCC (Chao-Chu et al., 2021). The mutations are classified as "gain of function"

because they apparently upregulate ADAM17 activity, resulting in higher levels of EGFR ligands, EGFR

hyperactivation in keratinocytes and increased release of TNF receptor 1, leading to reduced apoptosis

(Blaydon et al., 2012, Maney et al., 2015, Hosur et al., 2018b).

In mice, a spontaneous mutation called cub (curly-bare) results in a deletion of 268 amino acid residues

of the N-terminus including the TOC mutation positions, causing aberrant hair growth, hyperkeratosis

and hyperproliferative wound healing (Johnson et al., 2003, Siggs et al., 2014, Hosur et al., 2018a). This

cub deletion was linked to higher ADAM17-mediated shedding of AREG. However, different studies

contested the notion that the cub mutation results in higher ADAM17 activity at least in i*n vitro* settings

(Siggs et al., 2014, Hosur et al., 2018a). Interestingly, mice carrying TOC mutations exhibit the same

skin-related phenotype as cub mice (Hosur et al., 2017, Hosur et al., 2018a, Hosur et al., 2018b).

Noteworthy, the deficiency in iRhom2 in mice seems to cause a thinning of epidermis in the footpad

(Maruthappu et al., 2017). The phenotype of both, cub and TOC mice, can be rescued by AREG

deficiency, suggesting a similar underlying process with increased AREG-dependent signalling (Hosur

et al., 2018b). However, the molecular mechanism for these mutations remains unknown.

Only a few regulatory regions have been identified within the N-terminus of iRhom2, including

phosphorylation sites that facilitate binding of members of the 14-3-3 protein family (Cavadas et al.,

2017, Grieve et al., 2017). Deletion of the entire N-terminus appears to destabilise the iRhom-ADAM17

complex, resulting in loss of mature ADAM17. The adapter protein FRMD8, also known as iTAP (iRhom

tail-associated protein) has been identified as an essential binding partner of the N-terminus of iRhom,

which has a stabilising function for iRhom and thus for the iRhom-ADAM17 complex (Künzel et al.,

2018, Oikonomidi et al., 2018). This seems to explain the loss of mature ADAM17 when the N-terminus

is missing. Notably, part of this FRMD8-binding region is lost in the cub deletion, while the TOC

mutations lie outside this region. Recently, it was shown that the N-terminus is cleaved off by a signal

peptidase complex and migrates to the nucleus, where it influences gene expression (Dulloo et al.,

2022, Zanotti et al., 2022).

In this study, we observed high expression levels of iRhom2 in skin tissue samples and primary

keratinocytes under physiological conditions, providing an explanation for the distinct skin-related

phenotype in humans and mice with TOC or cub, respectively. Notably, iRhom2 and ADAM17

expression levels were significantly upregulated in OSCC patient samples, which is consistent with the

higher risk for OSCC in TOC patients.

It is important to separate the direct molecular effects of both mutation types (single point mutation

vs large deletion) on the functions of the iRhom2-ADAM17 complex from downstream effects: *In vivo*,

altered ADAM17 activity and the mutated soluble iRhom2 N-terminus in the nucleus will have long-

term effects on gene expression as well as ADAM17-dependent signalling pathways. Here, we focused

on the direct molecular consequences of the TOC single point mutations and the large cub deletion.

We identified a highly conserved motif that contains all known TOC sites and exhibits features of a

regulatory interaction site. Disruption of this site results in loss of regulation of ADAM17 activity,

leading to increased constitutive shedding. The cub deletion covers a larger part of the N-terminus,

including the TOC site. Therefore, the cub deletion also causes higher constitutive shedding activity of

ADAM17. However, the cub deletion loses the ability to promote stimulated/activatable ADAM17

activity. In addition, we found that this deletion decreases binding to ADAM17 and causes accelerated

degradation of ADAM17.

Overall, our results provide deeper insights into the molecular mechanisms controlling the iRhom2-

ADAM17 complex through the N-terminus of iRhom2 by demonstrating a distinct effect of TOC site

disruption, in contrast to the multiple overlapping and therefore more severe effects of the cub

deletion.

Results

iRhom2 expression levels are high in skin and OSCC

The observed phenotypes of iRhom2 deficiency and cub deletion, as well as the pathologies associated

with the human TOC mutations, clearly point to a central role of iRhom2 in epidermal tissue. While

high iRhom2 expression is often primarily associated with immune cells, its expression pattern in the

epidermis is not yet well defined. Hence, we analysed gene expression data from skin biopsies of

healthy individuals obtained from publicly available microarray data (Hruz et al., 2008). We indeed

observed a robust expression of iRhom2 in the skin samples (Fig. 1C). Moreover, primary human

keratinocytes have significantly higher levels of iRhom2 expression compared to primary fibroblasts,

artery smooth muscle cells, and bronchial smooth muscle cells (Fig. 1C). Notably, the ratio of iRhom2
to iRhom1 is substantially higher in keratinocytes than in other primary cell types (Fig. 1C; Fig. S1A),
indicating a pivotal role for iRhom2 in regulating ADAM17 activity in keratinocytes *in vivo*. To verify the
microarray data, we analysed iRhom1 and iRhom2 protein levels via immunoblotting and gene
expression via RT-qPCR in primary keratinocytes and fibroblasts. Indeed, in agreement with the
microarray data, we found higher protein levels and gene expression of iRhom2 in keratinocytes
compared to fibroblasts (Fig. 1D,E). This expression pattern aligns with the predominantly skin-related
manifestations of TOC and cub. We found a similar pattern in murine primary keratinocytes, again
highlighting iRhom2's importance in regulating ADAM17 activity in the skin (Fig. S1B).

Considering the known induction of iRhom2 expression in response to proinflammatory stimuli
(Babendreyer et al., 2020, Giese et al., 2021), we investigated whether the observed iRhom2 expression
patterns in primary keratinocytes were due to pre-activation by proinflammatory conditions. We found
a significant increase in iRhom2 gene expression in primary keratinocytes 24 hours after treatment with
proinflammatory stimuli, while iRhom1 showed no such elevation (Fig. 1F). This finding supports that
the high iRhom2 expression in primary keratinocytes is likely the basal level under physiological
conditions which can be further increased under inflammatory conditions. Furthermore, the gene
expression pattern of untreated keratinocytes is also consistent with the basal iRhom2 and iRhom1
gene expression pattern in healthy human skin biopsies (Fig. 1C).

Since TOC mutations also pose an increased risk of developing OSCC, we examined iRhom2 expression
in OSCC samples and compared them to healthy oesophagus squamous tissue, as well as samples from
OAC and a premalignant condition, called Barrett's oesophagus. In OSCC samples, we observed a
significant upregulation of iRhom2, accompanied by a downregulation of iRhom1, compared to healthy
oesophagus squamous tissue (Fig. 1G). The ratio of iRhom2 to iRhom1 was four times higher in OSCC
samples than in the healthy tissue. While OAC samples also showed a significantly elevated iRhom2-
iRhom1 ratio, the increase was less pronounced (Fig. 1G). On the other hand, samples from Barrett's
oesophagus exhibited no change in the ratio but displayed an overall reduction in iRhom1 and iRhom2
gene expression. Furthermore, we found a significant upregulation of ADAM17 gene expression
exclusively in OSCC samples (Fig. S1C). In contrast, ADAM10, a close relative of ADAM17 with partially
overlapping substrate spectrum and independent of iRhom functions, did not show this expression
pattern (Fig. S1C). The gene expression of EGFR ligands, TGFα and AREG, crucial ADAM17 substrates,
did not show significant changes in OSCC compared to healthy tissue (Fig. S1C). To ensure that the
elevated levels of iRhom2 in OSCC were not due to persistent proinflammatory conditions or the
presence of tumour microenvironment-associated immune cells, we examined proinflammatory
markers and immune cell markers. We observed no significantly elevated gene expression of TNF or IL6
(Fig. S1C), and only minimal gene expression of CD14, suggesting the presence of some

monocytes/macrophages in the samples but not in sufficient quantities to explain the high iRhom2

levels in OSCC (Fig. S1D; Fig. S2A,B).

In summary, the gene expression patterns of iRhom2 and ADAM17 support the notion of an important

role for iRhom2-dependent ADAM17 activity in both skin and OSCC, which is consistent with the

pathological consequences of TOC single point mutations and cub deletion.

The N-terminal tail represents a large intrinsically disordered part of iRhom2.

To investigate the molecular mechanisms underlying the functions of the N-terminal tail of iRhom2, we

performed *in silico* structural studies. Our bioinformatic analyses predict that the N-terminal tail of

iRhom2 has a largely unstructured/intrinsically disordered nature (Fig. 2A), which is typical for protein-

protein interaction interfaces (Dyson, 2016, Arakawa et al., 2023). Using the A.I.-based AlphaFold2

algorithm, we predicted the structural makeup of the N-terminus, which revealed an overall low pLDDT

and PAE, again confirming a lack of higher structural regions (Fig. 2B-D). Some isolated secondary

structures were predicted, but the N-terminus seems to be primarily intrinsically disordered (Fig. 2A-

F), which is a hallmark to promote protein-protein interaction.

However, while the N-terminus seems to play a crucial role in regulating the iRhom-ADAM17 complex,

only a handful of direct interactors such as FRMD8, ERK2, and 14-3-3 proteins have been identified

(Fig. 1A)(Cavadas et al., 2017, Grieve et al., 2017, Künzel et al., 2018, Oikonomidi et al., 2018,

Schumacher et al., 2023). Using ANCHOR2, we have identified an additional region that is highly likely

to be an interface for protein-protein interactions (Fig. 2E). Strikingly, this region is highly conserved

and includes all known TOC mutation positions (Fig. 2E-F). In addition, R192 in the middle of this TOC

site was found to be methylated in human iRhom2 by three independent high-throughput proteomic

screens (Figure 2F)(Guo et al., 2014, Hornbeck et al., 2015). This further supports the TOC site as a

regulatory interaction site, as protein methylation is a hallmark of protein interaction sites.

Furthermore, our bioinformatic analysis of the N-terminus of iRhom2 also indicates the presence of a

nuclear localisation sequence (NLS), which is consistent with recent observations of its translocation to

the nucleus after cleavage by the signal peptidase complex (Fig. 2G)(Dulloo et al., 2022).

Overall, the N-terminal tail represents a large intrinsically disordered region that provides distinct hubs

for regulation and interaction. Furthermore, all known TOC mutations are part of a predicted protein-

protein interaction site.

The TOC mutations and the cub deletion result in distinct molecular consequences for mature ADAM17.

To gain a comprehensive understanding of the regulatory system acting on the iRhom2-ADAM17 complex, it is important to understand the molecular similarities and differences between the TOC single point mutations and cub deletions, as they exhibit a strikingly similar phenotype in mice (Hosur et al., 2018b). While the TOC mutations affect a distinct region, the cub deletion affects a large part of the N-terminal tail encompassing different known regulatory and interaction sites such as two phosphorylation sites, the TOC region as well as the ERK2 binding site (Fig. 2G). The exact binding site of the FRMD8 interaction is not yet known, but the approximate binding region was mapped before (Fig. 2G)(Künzel et al., 2018, Oikonomidi et al., 2018). Hence, in contrast to TOC mutations the cub deletion affects most likely more regulatory aspects. To further dissect the molecular regulations of iRhom2 and its dysregulation, we designed an additional N-terminal deletion (nd197) that still contains the FRMD8 binding region and therefore retains binding to endogenous FRMD8 (Fig. 2G,H). In contrast, we could not detect FRMD8 binding for the cub deletion. We created two additional deletions (nd349 and nd370) with almost the entire N-terminus removed (Fig. 2G,H) to compare the effect of complete loss of the N-terminal tail with the partial deletions. We also hypothesised that the TOC single point mutations only gradually affect the function of the identified TOC site (Fig. 2E). Hence, we designed the deletion ndTOC (Δ182-192) to remove most of the TOC site (Fig. 2E-F). As expected, binding to FRMD8 in iRhom2 is not altered by either the TOC point mutation (I186T) or the deletion of the TOC site (ndTOC) compared to wt-iRhom2 (Fig. 2I).

The TOC mutations are autosomal dominant and the cub deletion leads to a phenotype already in heterozygosity. To analyse the direct molecular effects of these iRhom2 variants on ADAM17 regulation in combination with wt-iRhoms, we used HEK293 cells with endogenous iRhom1 and iRhom2 (Fig. S1E) as an already established and widely used model system (Cavadas et al., 2017, Sieber et al., 2022, Kahveci-Türköz et al., 2023), with epithelial morphology (Inada et al., 2016).

As iRhom levels are a rate limiting factor for forward transport and maturation of ADAM17, increased expression of either human or murine wt-iRhom2 results in more mature ADAM17 (Fig. 3A-C), as shown before (Düsterhöft et al., 2021, Kahveci-Türköz et al., 2023). Consequently, the amount of mature ADAM17 on the cell surface is also elevated (Fig. 3D,E). In contrast, expression of the murine iRhom2 cub deletion does not promote higher levels of mature ADAM17 (Fig. 3A). Furthermore, the three deletions nd197, nd349 and nd370 showed also a significant decrease in mature ADAM17 levels compared to wt-iRhom2 (Fig.3 B). We also observed a significant reduction in total ADAM17 levels in cells expressing these deletions compared to wt-iRhom2 or the negative control (Fig. 3A,B). In line with these findings the amount of mature ADAM17 on the surface was also lower in cells expressing the

deletions compared to both wt-iRhom2 and even control cells (Fig. 3D), although the deletion

constructs can be detected on the cell surface similarly to wt-iRhom2 (Fig. S3B). Notably, these effects

seem to be FRMD8 independent since nd197 still binds endogenous FRMD8 (Fig. 2H).

Expression of iRhom2 with a human TOC mutation (I186T) or a deletion of the TOC site (ndTOC) also

shows a reduced amount of mature ADAM17 compared to wt-iRhom2 (Fig. 3C). ndTOC seems to lead

to an even stronger reduction than the single point mutation, suggesting that the complete deletion of

the TOC site has a stronger effect than the single point mutation (Fig. 3C). However, in contrast to the

larger deletions (nd187, cub, nd349 and nd379), we did not observe a reduction in the total amount of

ADAM17 (Fig. 3C). Both iRhom2_I186T and ndTOC exhibit a cell surface presence similar to that of the

wt-iRhom2 (Fig. S3C). iRhom2_I186T leads to increased ADAM17 surface localisation compared to

control cells and the impact on surface ADAM17 levels is not significantly different to cells with wt-

iRhom2 expression (Fig. 3E). Remarkably, ndTOC expression results in significantly lower levels of

surface ADAM17 compared to wt-iRhom2 (Fig. 3E).

These findings demonstrate the importance of the cytosolic iRhom2 N-terminus in regulating ADAM17

functions. They highlight the differential effects of TOC mutations and the cub deletion on iRhom2

function and their substantial impact on ADAM17 maturation, surface localisation and overall protein

levels. Overall, these findings suggest that the decrease in ADAM17 levels and downregulation of

surface ADAM17 seen in the cub deletion and to a lesser extent in the TOC site mutants occur in a

FRMD8-independent way. Importantly, the deletion of the TOC site in ndTOC shows a more severe

molecular phenotype than the TOC single point mutations. This is consistent with single point

mutations only partially disrupting TOC site functions, whereas a larger deletion has a more severe

effect.

The iRhom2 N-terminus differentially regulates ADAM17-mediated shedding.

Our findings that cub and TOC mutations decreases levels of mature ADAM17 is in line with recent *in*

vivo and *ex vivo* results (Siggs et al., 2014, Rabinowitsch et al., 2023). However, these findings are

counterintuitive to the earlier reported elevated ADAM17 shedding activity (Brooke et al., 2014, Hosur

et al., 2017, Hosur et al., 2018a, Hosur et al., 2018b). To analyse the effect of the N-terminus on

ADAM17 activity, we investigated the constitutive shedding of the ADAM17 substrates TGFα, IL1R2 and

AREG in HEK293 cells. As reported earlier, we found significantly increased substrate release with

additional expression of wt-iRhom2 compared to control cells (Fig. 4A,B)(Düsterhöft et al., 2021,

Kahveci-Türköz et al., 2023). Surprisingly, despite lower surface ADAM17 levels (Fig. 3D), ADAM17-

mediated shedding was not adversely affected in cells with N-terminal deletions nd197, cub and nd349

compared to control cells (Fig. 4A,B). In fact, shedding efficiency in cells with these deletions was

generally higher compared to shedding in control cells and comparable to cells expressing wt-iRhom2. The largest deletion nd370 had the lowest ADAM17-mediated shedding, but was still comparable to control cells (Fig. 4A,B).

To further examine the effects of large N-terminal deletions in iRhom2 on ADAM17-mediated shedding, we used iRhom1- and iRhom2-deficient mouse embryonic fibroblasts (MEFs)(Christova et al., 2013). These cells lack production of mature ADAM17, resulting in an absence of ADAM17-mediated shedding. However, reintroduction of wt-iRhom2 expression effectively restored ADAM17-mediated shedding (Fig. 4C). Surprisingly, constitutive ADAM17-mediated shedding was also restored for the N-terminal deletions (nd197, cub and nd349), despite barely detectable amounts of mature ADAM17 present (Fig. S3D). However, the shedding activity restored by the N-terminal deletions was significantly lower compared to cells expressing wt-iRhom2 (Fig. 4C). Interestingly, the largest deletion (nd370), which lacked the third phosphorylation site, showed no restored shedding activity, similar to control cells (Fig. 2G; Fig. 4C). Furthermore, we assessed ADAM17-mediated shedding stimulated by the phorbol ester PMA (phorbol 12-myristate 13-acetate). While cells expressing wt-iRhom2 showed a significant increase in shedding, this effect was not observed with iRhom2 deletion mutants (Fig. 4C). This aligns with previous reports indicating that stimulated shedding is primarily driven by phosphorylation at the described phosphorylation sites 1 and 2 (Cavadas et al., 2017, Grieve et al., 2017), which are absent in all deletions (Fig. 2G).

In HEK293 cells, we further investigated the effects of the TOC mutations on AREG shedding. Interestingly, additional expression of human wt-iRhom2 did not significantly increase constitutive AREG shedding (Fig. 4D). This is consistent with our previous findings that overexpression of human iRhom2 promotes shedding to a lesser extent than that of its mouse counterpart (Kahveci-Türköz et al., 2023). Remarkably, iRhom2 has 96% sequence similarity (92% identity) in human and mouse, except for a large insertion at the beginning of the N-terminus of human iRhom2 isoform 1, which was used in this study (Fig. S3A). The discrepancy in shedding efficiency may be attributed to this dissimilarity.

Importantly, expression of the TOC mutations significantly increased shedding activity (Fig. 4D), consistent with previous observations (Blaydon et al., 2012, Maney et al., 2015). Strikingly, we observed even higher shedding efficiency with the complete TOC site deletion ndTOC (Fig. 4D), again showing a more severe molecular phenotype than the single point mutations. Moreover, as expected, iRhom2 with TOC site mutations still promote PMA-stimulated ADAM17 shedding activity in iRhom1- and iRhom2-deficient MEFs (Fig. 4E). However, the stimulated shedding activity of the TOC site mutants is slightly but significantly reduced compared to wt-iRhom2, which is in line with reduced levels of mature ADAM17 (Fig. 3C,E; Fig. 4E).

304 In summary, our results show that the N-terminus differentially regulates constitutive and stimulated
305 shedding and that the cub deletion loses the ability to promote stimulated ADAM17 activity.
306 Importantly, both larger N-terminal deletions and TOC mutations appear to lead to a reduction in
307 mature ADAM17 levels with concurrent higher constitutive ADAM17 activity.

N-terminal deletions of iRhom2 accelerate turn-over of mature ADAM17

To gain better insight into the molecular phenotypes of N-terminal iRhom2 mutations, we sought to
understand the underlying mechanisms. The observed decrease in mature ADAM17 levels can be
attributed to either an impaired maturation process or accelerated turnover leading to increased
internalisation of ADAM17 and its lysosomal degradation (Fig. 5A). Previous studies have shown that
destabilisation of the iRhom-ADAM17 complex by FRMD8 loss leads to increased lysosomal
degradation (Künzel et al., 2018, Oikonomidi et al., 2018). However, the effect we observed is FRMD8
independent and has not been studied before. To investigate whether the FRMD8-independent effect
of nd197 is due to accelerated degradation, we used the lysosomal inhibitors NH_4Cl and bafilomycin.
The use of these inhibitors for 8 h and 16 h rescued the levels of mature ADAM17 (Fig. 5B,C). After 16
h, the levels of mature ADAM17 in HEK293 cells expressing the cub or nd197 deletion reached those
of cells expressing wt-iRhom2 (Fig. 5C), indicating a similar maturation efficiency. Therefore,
accelerated turnover is likely the cause of the low mature ADAM17 levels when the deletions are
expressed. This is consistent with the reduced total levels of ADAM17 in cells expressing the deletions,
as maturation is still occurring, which depletes the pool of immature ADAM17, but the mature ADAM17
is not stable due to accelerated lysosomal degradation.

To further analyse the impact of the iRhom2 N-terminus on the turnover kinetic of ADAM17, we
performed a cycloheximide-based pulse-chase experiment (Fig. 5A). We observed a rapid decrease in
immature ADAM17 levels after inhibition of biosynthesis, as the maturation process continued and
subsequently immature ADAM17 levels declined until presumably no iRhom is left in the ER (Fig. 5D).
The presence of wt-iRhom2 facilitated this effect, significantly enhancing the reduction due to
increased ADAM17 transport to the Golgi and subsequent maturation. We found that nd197 and cub
deletions had the same effect (Fig. 5D), indicating that maturation process remained unaffected by the
N-terminal deletions.

Furthermore, the levels of mature ADAM17 decreased more rapidly in cells expressing the deletion
than in control cells or cells expressing wt-iRhom2 (Fig. 5D) indicating accelerated degradation of
mature ADAM17 in the presence of N-terminal deletions.

For comparison, we next studied the influence of TOC mutations on ADAM17 stability. 8 h of
bafilomycin-mediated lysosomal inhibition rescued the levels of mature ADAM17 in cells expressing

the TOC mutant to the same level as cells with wt-human iRhoms (Figure S3E). This suggests that the

same amount of mature ADAM17 is generated in cells expressing TOC mutants or wt-human iRhom2.

Lysosomal degradation of mature ADAM17 is slightly higher in cells with TOC mutations than in cells

expressing wt-iRhom2, resulting in slightly lower levels of total mature ADAM17 and less mature

ADAM17 on the cell surface, as described above (Figure 3C,E). However, this slightly accelerated

degradation does not seem to be strong enough to detect significant differences with the

cycloheximide-based pulse-chase experiments (Figure S3F).

Taken together, these results demonstrate the regulatory role of the N-terminus in controlling the

stability and turnover kinetics of mature ADAM17, but not immature ADAM17. In addition, the effects

of larger deletions are more severe compared to mutations or deletions at the TOC site, suggesting that

the stability of mature ADAM17 is only slightly affected by the TOC site, but is more dependent on the

interplay of other sites in the iRhom2 N-terminus. As there is no difference between nd197 and cub,

this mechanism appears to be FRMD8 independent.

The iRhom2 N-terminal tail is a key determinant for regulating ADAM17 binding

The interaction between iRhom and ADAM17 is a crucial requirement for their stability. Although the

transmembrane regions and extracellular domains are known determinants of the binding between

iRhom and ADAM17 (Cavadas et al., 2017, Grieve et al., 2017, Li et al., 2017, Düsterhöft et al., 2021,

Kahveci-Türköz et al., 2023), we nevertheless wondered whether the N-terminus could play a role in

this interaction. By co-immunoprecipitation, we analysed the binding between ADAM17 and iRhom2.

In both HEK293 cells and iRhom1- and iRhom2-deficient MEFs, we observed a significant decrease in

binding between ADAM17 and all deletions tested (nd197, cub, nd349 and nd370) compared to wt-

iRhom2 (Fig. 6A,B). However, the overall decrease in cellular ADAM17 levels could distort the results.

To address this issue, we engineered iRhom2 variants fused to the ER retention sequence KDEL, which

inhibits ADAM17 transport, maturation, and subsequent accelerated turnover of the iRhom2-ADAM17

complex (Fig. S4A) (Düsterhöft et al., 2021). In fact, even in this setting, we found a significant reduction

in ADAM17 binding for iRhom2 deletions compared to wt-iRhom2 (Fig. 6C; Fig. S4B). Interestingly, we

detected an additional significant reduction in ADAM17 binding for deletions larger than nd197,

indicating multiple regions in the N-terminus that regulate ADAM17 binding (Fig. 6A,C). This

observation is consistent with co-immunoprecipitation experiments using lysosomal inhibitors, where

inhibition of lysosomal degradation significantly increased the observable intact iRhom2-ADAM17

complex with nd197, but not with cub deletion (Fig. S4C). Under lysosomal inhibition, the precipitated

complexes with nd197 and cub showed increased amounts of mature ADAM17 indicating more rapid

degradation when in complex with these deletions (Fig. 6D,E). Importantly, we did not observe a

reduction in binding efficiency of the TOC site mutants (Fig. 6F).

In summary, our results clearly demonstrate the crucial role of the N-terminus for the binding affinity

between iRhom2 and ADAM17, which in turn influences the cohesion and stability of the iRhom2-

ADAM17 complex. Remarkably, there appear to be two parallel mechanisms regulating the ADAM17

interaction via the N-terminus: a clearly FRMD8-independent mechanism and a potential FRMD8-

dependent mechanism. Importantly, this ADAM17 interaction function is lost in the larger cub deletion

but not when only the TOC site is disrupted (Fig. 7).

Discussion

The iRhom2-ADAM17 sheddase complex is vital for both inflammatory signals (including TNFα release)

and EGFR signalling (via growth factor release such as AREG and TGFα). iRhom2 is a key regulator for

ADAM17's trafficking, maturation, activity, and stability. Understanding its regulation is crucial for the

molecular biology of ADAM17-associated diseases and subsequently for potential therapies targeting

these pathologies such as chronic inflammation and cancer pathologies including the autosomal

dominant inherited tylosis with oesophageal carcinoma (TOC). TOC is caused by so-called gain-of-

function mutations in the N-terminus of iRhom2, resulting in increased ADAM17-mediated shedding

and elevated AREG release. Mice with the cub (curly-bare) deletion exhibit a remarkably similar

phenotype to mice with TOC mutations, and both phenotypes can be rescued by knocking out

amphiregulin (Hosur et al., 2017, Hosur et al., 2018b). This suggests a shared molecular mechanism

between the large cub deletion and TOC single point mutations. However, studies on the cub deletion

have yielded conflicting findings regarding whether it has a positive or negative effect on ADAM17

shedding activity (Hosur et al., 2014, Siggs et al., 2014, Maney et al., 2015, Grieve et al., 2017). In

contrast, TOC mutations in iRhom2 clearly enhance ADAM17-mediated shedding (Blaydon et al., 2012,

Brooke et al., 2014), which is consistent with our results. In addition to TOC single point mutations, we

used a complete deletion of the TOC site, resulting in an even more pronounced effect. Our results

thus provide evidence for a loss of inhibitory function or loss of regulation by mutations at the TOC site

(Fig. 7). Notably, this site is also absent in the cub deletion, which should hence also lead to elevated

constitutive shedding activity of ADAM17. Here, it is crucial to consider the concurrent significant

decrease in mature ADAM17 levels when interpreting ADAM17 activity measurements. We could

demonstrate, that the cub deletion results in less mature ADAM17 that is, however, paradoxically

more active. This more complex molecular consequence of the large deletion in cub potentially

explains the previously contradictory studies. Importantly, a distinction must be made between

stimulated and constitutive ADAM17-mediated shedding. While the cub deletion and our other

designed deletions (nd197 and nd349) induce higher constitutive shedding activity of the available surface ADAM17, stimulated shedding is completely abolished in all our deletions (Fig. 7). This is consistent with the elimination of the first two crucial phosphorylation sites (Fig. 2F) (Cavadas et al., 2017, Grieve et al., 2017). Intriguingly, the largest deletion nd370, which also lacks the third phosphorylation site (Fig. 2F)(Cavadas et al., 2017, Grieve et al., 2017), additionally shows reduced constitutive shedding. This is clear evidence of distinct signalling pathways that differentially regulate constitutive and stimulated ADAM17 activity. Recent studies have highlighted the critical role of the KRAS-ERK1/2 pathway in the shedding activity of the iRhom2-ADAM17 complex (Cavadas et al., 2017, Grieve et al., 2017, Sieber et al., 2022). KRAS-G12 mutants in tumour cells harbouring iRhom2 with TOC mutations further enhance constitutive ADAM17-mediated shedding (Sieber et al., 2022). Interestingly, an ERK2 binding site was recently identified within the N-terminus upstream of phosphorylation sites 1 and 2 (Fig. 2F)(Schumacher et al., 2023). Since this ERK2 interaction site is not present in cub, it appears to be relevant for stimulated shedding rather than constitutive shedding.

Overall, the TOC site appears to serve as a regulatory interaction site with a restrictive effect on ADAM17 activity. Consequently, we would classify TOC mutations, which disrupt this regulatory site, as loss-of-regulation rather than gain-of-function. We hypothesise that both the cub deletion and the TOC mutation lead to similar molecular consequences by disrupting the regulation of shedding activity. However, the cub deletion results in additional more severe effects that partially obscure the increased ADAM17 activity at the molecular level. Notably, the elevated constitutive shedding activity appears to be the predominant and enduring molecular consequence observed *in vivo*, providing an explanation for the strikingly similar phenotypes observed in TOC mice and cub mice (Hosur et al., 2017, Hosur et al., 2018b).

The N-terminus of iRhoms emerges as a critical determinant for the stability of the iRhom-ADAM17 complex. This is again supported by our data and was recently also confirmed *in vivo*: mice with the cub mutation show decreased ADAM17 levels in different tissues (Rabinowitsch et al., 2023). Recent findings highlight the significance of FRMD8-binding in regulating iRhom stability and, consequently, ADAM17 stability and functions (Künzel et al., 2018, Oikonomidi et al., 2018). While the loss of FRMD8 binding may contribute to the molecular consequences observed in cub deletions, our observations demonstrate similar effects on mature ADAM17 stability in the nd197 deletion, which retains the ability to bind FRMD8. This suggests that the N-terminus exerts a stabilising effect on the iRhom-ADAM17 complex, largely independent of FRMD8: When these parts of the iRhom2 N-terminus, which are not involved in FRMD8 binding, are deleted, accelerated turnover still occurs. Notably, TOC mutants also exhibit a similar albeit less pronounced impact on stability of mature ADAM17.

Our study reveals that not only the transmembrane helix 1 and the IRHD, as previously described (Li et

al., 2017, Tang et al., 2020, Düsterhöft et al., 2021, Kahveci-Türköz et al., 2023), but also the iRhom2

N-terminus, directly contributes to ADAM17 binding. Through our ER-trapping approach, we have

demonstrated that the reduced binding of ADAM17 is not attributable to decreased ADAM17 levels.

Notably, the anterior half of the N-terminus (nd197) emerges as particularly crucial for efficient

ADAM17 interaction. However, larger deletions like the cub deletion (Δ268) result in an additional

significant reduction in binding efficiency, potentially mediated by FRMD8.

In summary, we postulate that while the binding affinity to ADAM17 is significantly reduced, iRhom2

N-terminal deletions such as cub retain the ability to bind immature ADAM17 in the ER, facilitating

efficient transport through the secretory pathway and normal maturation of ADAM17 (Fig. 7). During

maturation, the proteolytic removal of the ADAM17 prodomain may further decrease binding affinity,

as our recent study identified the prodomain as an additional binding determinant between the

ADAM17 ectodomain and the IRHD (Kahveci-Türköz et al., 2023). The reduced cohesion of the iRhom2-

matureADAM17 complex on the cell surface appears to induce instability and accelerated turnover,

culminating in lysosomal degradation (Fig. 7). Notably, the N-terminal deletions also elicit heightened

ADAM17 activity on the cell surface. Prior studies suggested that weakening the interaction between

ADAM17 and iRhom2, potentially induced by 14-3-3 binding at the phosphorylated N-terminus, could

trigger ADAM17-mediated shedding events (Cavadas et al., 2017, Grieve et al., 2017). Mutation or

deletion of the TOC site may enhance this effect on the surface leading to elevated activity and

weakening of the iRhom2-ADAM17 complex cohesion. This may also explain the difference in turn-

over kinetics between wt-iRhom2, cub and TOC. Since the complex cohesion of larger deletions such

as cub is already weakened, their turn-over and lysosomal degradation is much faster leading to a rapid

depletion of ADAM17.

In our study, we investigated the molecular consequences of N-terminal mutations in iRhom2 in order

to unravel the intricate regulatory system of the iRhom2-ADAM17 complex. It is important to

acknowledge that our investigation focused solely on these direct molecular mechanisms and did not

explore their integration within a more complex system. It is crucial to recognise that altered ADAM17

activity can initiate feedback loops that further modulate its own activity, including inducing ADAM17

activity by EGF receptor pathway activation (Grieve et al., 2017, Kubo et al., 2022, Sieber et al., 2022)

and the induction of gene expression of ADAM17, iRhoms, and other regulators through different

pathways including TNFα signalling (Arcidiacono et al., 2018, Babendreyer et al., 2020, Giese et al.,

2021, Kubo et al., 2022). Additionally, exogenous stimuli and cell stimulation by for example LPS can

also impact ADAM17 activity and the gene expression of iRhom2, ADAM17 and its substrates (Arndt

et al., 2011, McIlwain et al., 2012, Lu et al., 2017, Düsterhöft et al., 2021). Moreover, the N-terminus

can undergo cleavage and translocation into the nucleus, where it exerts incompletely understood

effects on gene expression (Dulloo et al., 2022, Zanotti et al., 2022). Furthermore, it is important to

consider that ADAM17 substrate specificity seems to be differentially regulated by iRhom1 and iRhom2

(Maretzky et al., 2013, Tang et al., 2020). Here, the N-terminal tail of iRhoms may also play a role.

Since the TOC mutations affect iRhom2, it is vital to note that high iRhom2 expression is often

predominantly associated with immune cells and inflammatory conditions. This role of iRhom2

becomes evident when considering that mice lacking iRhom2 exhibit a seemingly healthy phenotype

but display impaired immune responses (Adrain et al., 2012, Christova et al., 2013, Issuree et al., 2013).

Yet, the high iRhom2 gene expression we observed in keratinocytes underlines the significant role of

iRhom2 in skin homeostasis. This would be consistent with the TOC skin phenotype described earlier

(Fig. 7)(Blaydon et al., 2012, Brooke et al., 2014, Maney et al., 2015, Maruthappu et al., 2017).

Interestingly, the absence of iRhom2 activity in certain tissues in mice seems to be compensated by

the presence of iRhom1. Importantly, we observed that gene expression of both, iRhom2 and iRhom1,

is high in primary keratinocytes and skin tissue in mice and humans. Since mice with iRhom2 deficiency

show no obvious skin or hair phenotypes, iRhom1 seems to be able to largely compensate for iRhom2

deficiency in the skin as well. However, it was reported that iRhom2 deficient mice show reduced

epidermal thickness (Maruthappu et al., 2017). In contrast, the loss-of-regulation mutations do not

appear to be compensated for *in vivo*, highlighting their disruptive impact. Hence, the consistent

outcomes observed in mice with TOC and cub mutations as well as the predominant epithelial

symptoms of TOC patients indicate that elevated ADAM17 activity, particularly in epithelial cell types

such as keratinocytes, is the prevailing molecular consequence. Notably, in patients with TOC

mutations, tylosis manifests between the ages of 7 and puberty, while cancer develops much later in

life (Ellis et al., 2015), underscoring the cumulative effect of elevated constitutive ADAM17-mediated

shedding of EGF ligands over time. This is in line with our finding that disruption of the TOC site leads

to a gradual effect on iRhom2-ADAM17 complex functions: The larger deletion of the TOC site has a

stronger effect on ADAM17 activity than single point mutations. Furthermore, we found a significant

increase in iRhom2 and ADAM17 gene expression in oesophageal squamous cell carcinoma (OSCC)

compared to healthy oesophageal squamous tissue. This indicates that the iRhom2-ADAM17 complex

is a potential tumour marker for OSCC, which seems to be in line with the fact that patients with TOC

mutations, which increases ADAM17 activity, have a higher risk of developing OSCC (Fig. 7).

Overall, our results shed new light on the regulation of the iRhom2-ADAM17 complex by the

N-terminal tail of iRhom2. The intrinsically disordered nature of the N-terminus makes it an extensive

hub for protein binding and regulation. The molecular functions highlighted in our study warrant

further analysis and could potentially serve as viable targets for modulating ADAM17 activity. They

could offer promising avenues for combating ADAM17-associated pathologies such as cancer or

chronic inflammation.

Methods

Bioinformatics

Multiple sequence alignments were generated by utilising Clustal Omega (Sievers et al., 2011). Secondary structure prediction and analysis of intrinsically disordered regions were done with IUPred3 (Meszaros et al., 2009, Erdos et al., 2021), NetSurfP-2.0 (Klausen et al., 2019) and ANCHOR2 (Dosztanyi et al., 2009, Meszaros et al., 2009, Meszaros et al., 2018). The following sequences were used (UniProtKB entries): Q6PJF5 (human iRhom2) and Q80WQ6 (murine iRhom2). Nuclear localisation sequence analysis was performed with NLStraddamus (Nguyen Ba et al., 2009).

Ab initio structure prediction of cytosolic iRhom2 N-terminus was done with AlphaFold2 (Jumper et al., 2021) utilising ColabFold (Mirdita et al., 2022). Structural modelling using the deep learning algorithm AlphaFold2 was done without homology templates. MMseq2 was used as the multiple sequence alignment. The structural modelling went through 12 iterations. The respective top-ranked models were used.

To identify conserved sequence regions, the tool CONYAR (C̲onserved Y̲ou A̲re) was employed to perform high-throughput comparison of as many sequences of a target protein as possible (Kahveci-Türköz et al., 2023).

In silico gene expression analysis

We accessed Affymetrix Human Genome U133 Plus 2.0 Array platform data from public repositories, curated by the GENEVESTIGATOR platform (Immunai, USA)(Hruz et al., 2008). The GENEVESTIGATOR software was utilised for gene expression meta-analysis of indicated genes in various tissues, biopsies, and primary cells (assessed on 20 May 2023). To analyse gene expression patterns under physiological conditions, only samples from healthy and untreated tissues were included. Similarly, for assessing baseline gene expression in cancerous tissue, only untreated samples were considered.

List of used experiment IDs for indicated tissue and primary cells: a) murine heart: MM-00170 (Muchir et al., 2007), MM-00253 (Dufour et al., 2007), MM-00257 (Zhao et al., 2007), MM-00262 (Alcendor et al., 2007), MM-00300 (Ramchandran et al., 2006), MM-00322, (Thorrez et al., 2008), MM-00330 (Lattin et al., 2008), MM-00368 (Barger et al., 2008), MM-00384 (Wong et al., 2010), MM-00476 (Abd Alla et al., 2016), MM-00485 (Oka et al., 2011), MM-00492 (Wang et al., 2016), MM-00497 (Shuai et al., 2011), MM-00507 (Shuai et al., 2011), MM-00561 (Ricard et al., 2010), MM-00834 (Traister et al., 2013), MM-00841 (Mercader et al., 2012), MM-01538 (Gambino et al., 2013), MM-01642 (Lucas et al., 2014), MM-01875 (Lucas et al., 2014); b) murine primary fibroblast (dermis): MM-00159 (Vallender and Lahn,

2006), MM-00180 (Vallender and Lahn, 2006), MM-00627 (Garinis et al., 2009), MM-00724 (Garinis et

al., 2009); c) murine primary keratinocytes: MM-01215 (Allende et al., 2013); d) healthy human

epidermis tissue (biopsy): HS-02924 (Esaki et al., 2015); e) human primary keratinocytes (untreated):

HS-02625 (Yunoki et al., 2018), HS-02787 (Busch et al., 2008), HS-02490 (Swindell et al., 2012), HS-

00220 (Sa et al., 2007); f) human primary keratinocytes (treated with TNFα, IFNα, IFNγ or IL4; 24 h):

HS-02490 (Swindell et al., 2012); g) human primary keratinocytes (treated with 10 ng/ml I IFNγ; 96 h):

HS-02625 (Yunoki et al., 2018); h) human primary fibroblasts (untreated): HS-00393, HS-00481 (Chen

et al., 2008), HS-00805 (Verkerk et al., 2009), HS-00928 (Wang et al., 2012), HS-00963, HS-00989

(Strunnikova et al., 2009), HS-01109 (Visser et al., 2012), HS-01279 (Marchina et al., 2014), HS-01311

(Henrichsen et al., 2011), HS-01326 (Voets et al., 2012), HS-02421 (Smith et al., 2008); i) primary artery

smooth muscle cells (heart): HS-00478 (Shalhoub et al., 2010); j) primary bronchial smooth muscle

cells: HS-00039 (Bosse et al., 2007); k) healthy oesophagus squamous tissue (biopsy): HS-01298 (Wang

et al., 2013), HS-00217, HS-00017 (Roth et al., 2006), HS-01525 (Sato et al., 2013); squamous cell

carcinoma (grade G1): HS-01298 (Wang et al., 2013); oesophagus adenocarcinoma: HS-00002; HS-

01298 (Wang et al., 2013); Barrett´s oesophagus (pre-malignant): HS-01298 (Wang et al., 2013);

primary macrophages: HS-01265; primary granulocytes: HS-00250; primary leukocytes: HS-00261;

primary monocytes: HS-01403.

Cloning

The cloning procedures were performed as previously described (Düsterhöft et al., 2021): NEBuilder

HiFi DNA Assembly Master Mix (NEB, E2621L) was utilised to produce different plasmids with the

desired inserts according to the manufacturer's instructions. All iRhom constructs were cloned into the

pMOWS backbone (Ketteler et al., 2002, Düsterhöft et al., 2021). Site-directed mutagenesis was

performed using overlapping PCR (Ho et al., 1989).

Cell culture

All cells were cultured in a humidified incubator at 37 °C, 5% CO_2 in DMEM10% (unless otherwise

indicated). DMEM10% consists of DMEM high-glucose (Sigma-Aldrich) supplemented with 10% foetal

calf serum (PanBiotech), 100 mg/l streptomycin (Sigma-Aldrich) and 60 mg/l penicillin (Sigma-Aldrich).

Production of stable cell lines was done as described before (Düsterhöft et al., 2021). MEFs double

deficient for iRhom1 and iRhom2 were obtained from indicated mouse lines as described before

(Christova et al., 2013, Düsterhöft et al., 2021). HEK293 cells were purchased from German Collection

of Microorganisms and Cell Cultures (GmbH DSMZ- No. ACC 305). Normal human epidermal

keratinocytes and human dermal fibroblasts were isolated from human skin samples as described

before (Schmitt et al., 2018). Primary keratinocytes were cultivated in Dermalife K − Life Line (Cell

Systems LL-0007). Primary fibroblasts were cultivated in DMEM10%.

Quantitative PCR (RT-qPCR)

mRNA expression levels were measured by quantitative PCR and normalised to the mRNA expression

levels of the selected reference genes. Cytochrome c1 (CYC1) and ribosomal protein L13a (RPL13A)

were chosen as the most stable reference genes based on the results from the CFX Maestro Software

1.1 (Bio-Rad). RNA was extracted using RNeasy Kit (Qiagen) and quantified photometrically (NanoDrop,

Peqlab, Erlangen, Germany). For reverse transcription, the PrimeScriptTM RT Reagent Kit (Takara Bio

Europe) was used, according to the manufacturer's protocol. PCR reactions were performed in

duplicates of 10 μl volume comprising 1 μl of cDNA template, 5 μl iTaq Universal SYBR Green Supermix

(Bio-Rad), 3 μl H_2O and 0.5 μl forward and reverse primer. The following primers were used with the

primer annealing time given in brackets: CYC1 (forward: AGC TAT CCG TGG TCT CAC C, reverse: CCG CAT

GAA CAT CTC CCC ATC; 59 °C), RHBDF1 (forward: GAC AGC CCA CAT CTC TTC AC , reverse: TCC TTG CTC

ACT CCA AAC CA; 56 °C), RHBDF2 (forward: CGA TTG ACC TGA TCC ACC, reverse: CAA AGT CTC CGA GCA

GTC C; 58 °C) and RPL13A (forward: GCC CTA CGA CAA GAA AAG CG, reverse: TAC TTC CAG CCA ACC

TCG TGA; 60 °C). All RT-qPCR reactions were performed on a CFX Connect Real-Time PCR Detection

System (Bio-Rad) using the following protocol: 40 cycles of 10 s denaturation at 95 °C, followed by 10 s

annealing at the corresponding temperatures and 15 s amplification at 72 °C. PCR efficiency was

calculated from the uncorrected RFU values using LinRegPCR version 2020.0 (Ruijter et al., 2009). CFX

Maestro Software 1.1 (Bio-Rad) was used for relative quantification.

Co-immunoprecipitation and enrichment of glycosylated proteins

Precipitation experiments were done as described before (Düsterhöft et al., 2021, Kahveci-Türköz et

al., 2023): Cells were lysed in 1 ml lysis buffer (50 mM Tris, 2 mM $CaCl_2$, 137 mM NaCl, 2 mM EDTA,

10 mM 1,10-Phenanthroline, pH 7.5) supplemented with cOmplete™ protease inhibitor (Sigma;

11697498001). The lysates were cleared by centrifugation at 16,000 x g for 20 minutes at 4 °C. For the

enrichment of glycosylated proteins, 450 μl of cleared lysate was incubated with 30 μl of Concanavalin

A sepharose (Sigma; C9017). For co-immunoprecipitations (coIPs), 450 μl of cleared lysate was

incubated with 10 μl of anti-HA magnetic beads (Thermo; 88836). The lysates were incubated with the

beads for 90 min. Afterwards, the beads were washed five times with lysis buffer. The beads were

heated in 40 μl reducing loading buffer (3% SDS, 16% glycerol, 8% 2-mercaptoethanol, 0.01%

bromophenol blue, 0.1 M Tris HCl, pH 6.8) at 65 °C for 20 minutes.

Western blotting

Samples were subjected to SDS-PAGE and transferred onto PVDF membranes (Millipore, Immobilon-FL). Membranes were blocked with 5% non-fat dry milk in TBS (50 mM Tris, 150 mM NaCl, pH 7.4) for 20 min at room temperature. Primary antibodies were incubated overnight at 4 °C in 0.1% Tween-TBS and 1% BSA. After three washes with 0.1% Tween-TBS, membranes were incubated with secondary antibody for 1 h at room temperature. Additional washing steps included one wash with 0.1% Tween-TBS and three washes with TBS. Protein detection was performed using the Odyssey 9120 imager system (LI-COR) and the ChemiDoc MP Imaging System (Bio-Rad). Band intensities were quantified using Image Studio Lite software (LI-COR). The following primary antibodies were used: αADAM17 (1:1000; Abcam; ab39162), αHA (1:2000; Biolegend; 901502), αTransferrin-receptor (1:2000; Thermo, H68.4, 13-6800), αGAPDH (1:2000; Thermo, GA1R, 15738), αiRhom2 (1:1000; R&D; 996308; MAB10048). The following secondary antibodies were used at the indicated dilutions: DyLight-680-conjugated αmouse (1:20000; Thermo; 35519), DyLight-800-conjugated αrabbit (1:20000; Thermo; 35571), HRP-conjugated goat αmouse and αrabbit (1:20000; Jackson ImmunoResearch Laboratories, Inc).

Shedding activity - AP-Assay

ADAM17-mediated shedding activity was measured by an alkaline phosphatase (AP)–based assay as described before (Düsterhöft et al., 2021, Kahveci-Türköz et al., 2023). In brief, we used cells transfected with ADAM17 substrates fused to an alkaline phosphatase to analyse shedding activity: The following ADAM17 substrates cloned in pCndA3.1 were utilised: AP-IL1R2, AP-TNFα, AP-AREG. HEK293 cells stably expressing the indicated iRhom2 constructs were transiently transfected with the indicated substrate. In the case of MEFs, the indicated iRhom2 construct combined with the indicated substrate was transiently transfected. Shedding activity was assessed under different conditions: either the metalloprotease inhibitors marimastat (broad-spectrum, 10 µM) (Sigma; M2699) or TAPI1 (ADAM17 preferential inhibitor, 10 µM) (Sigma; SML0739) were used. When indicated, cells were stimulated with 100 nM PMA (Sigma; P1585). DMSO served as the vehicle control. Following treatment, cells were incubated: 90 min (AREG, TGFα), 120 min (IL1R2), or 240 min (AREG) at 37 °C. To evaluate proteolytic activity of ADAM17, we measured alkaline phosphatase (AP) activity in both the supernatant and cell lysates (lysis buffer: 50 mM Tris, 137 mM NaCl, 2 mM EDTA, 10 mM 1,10-phenanthroline, pH 7.5, supplemented with cOmplete™ protease inhibitor). By continuously measuring AP activity at 405 nm using the FLUOstar Optima (BMG LABTECH) after adding a p-nitrophenyl phosphate (PNPP) solution (Thermo; 37620), we calculated the slope representing the change in absorbance at 405 nm per min.

ADAM17 activity was determined by calculating the PNPP substrate turnover (AP activity) in the
supernatant relative to the total turnover in the supernatant plus cell lysate.

Flow cytometric analysis

The staining process was conducted using PBS with 0.2% BSA as the assay buffer, and all steps were
carried out at 4 °C or on ice. A total of 2×10^5 cells of interest were incubated with the primary antibody
for 1 h. Subsequently, cells were washed twice with 400 µl of assay buffer. The secondary antibody was
added, and cells were incubated in the dark for 45 mins. Following two additional washing steps, the
fluorescence signal was assessed using flow cytometry (LSRFortessa, BD Biosciences, Heidelberg,
Germany), and FlowJo V10 software was employed for data analysis. The geometric mean of
fluorescence intensity was determined to assess cell surface localisation. The primary antibodies used,
along with their dilutions, were as follows: αADAM17 (1:100; R&D Systems; MAB 9301), αHA (1:500;
Biolegend; 901502). The secondary antibody used was Allophycocyanin-conjugated αmouse (1:200;
Jackson ImmunoResearch; 115-135-164).

Lysosomal inhibition

Cell cultures were first grown to approximately 80% confluence. Cells were treated with either
bafilomycin A1 (B) or NH_4Cl (N). An untreated control was also included using DMSO as a vehicle
control. The cells were then incubated for 8 h (B: 0.1 µM; N: 20 mM) or 16 h (B: 0.5 µM; N: 40 mM).
After incubation, the plates were placed on ice and the medium was discarded. The cells were washed
once with PBS and then harvested with 1 ml cold PBS. A 10 µl aliquot was taken from the cell suspension
to determine the number of cells for sample adjustment. The harvested cells were centrifuged at
1000 g for 5 min at 4°C and the supernatant was discarded. Cell pellets were used for lysis and coIPs
followed by Western blotting as described above.

Cycloheximide-based pulse chase experiment

Cell cultures were used at approximately 80% confluence. Cells were incubated with cycloheximide
(10 µg/ml) for 3 or 6 h. After washing with PBS, the cells were harvested in 1 ml cold PBS and a 10 µl
aliquot was taken from the cell suspension to determine the number of cells for sample adjustment.
Harvested cells were pelleted and used for lysis followed by Western blotting as described above.

Statistics

Statistic was done as described before (Düsterhöft et al., 2021): Experiments were repeated at least

three times, as indicated in the figure legends. Quantitative data are presented as mean with standard

deviation (SD). Statistical analysis was performed using the generalised mixed model analysis (PROC

GLIMMIX, SAS 9.4, SAS Institute Inc., Cary, North Carolina, USA), assuming normal, lognormal, or beta

distribution, with the day of the experiment considered as a random factor to assess treatment effect

differences across the results. Diagnostic tests, including residual analysis and the Shapiro-Wilk test,

were utilized. In cases of heteroscedasticity (as determined by the covtest statement), degrees of

freedom were adjusted using the Kenward-Roger approximation. All p-values were adjusted for

multiple comparisons using the false discovery rate (FDR). Statistical significance was defined as

$p < 0.05$, with the following notation: p: * < 0.05, ** < 0.01, *** < 0.001.

Declarations

Ethics approval

This study was conducted according to the principles of the Declaration of Helsinki and approved by

the ethics committee of the Medical Faculty RWTH Aachen, Germany (EK 188/14).

Authors' contribution

S.D. conceived, designed, and coordinated the study and wrote the manuscript. S.D. and A.L. analysed

data and revised the manuscript. S.D., K.B., L.L., S.K.T., C.F., F.S., S.K., D.K., C.G, N.T. and X.G. performed

experiments and analysed the results. S.D. conducted protein bioinformatics analysis and structure

prediction. A.B. developed the algorithm for high-throughput identification of conserved regions and

performed conservation analysis. S.D. and S.K. performed meta-analysis of *in vivo* and *ex vivo* datasets.

C.A. generated FRMD8/iTAP knock-out cells. S.H. and J.M.B. isolated primary keratinocytes and

fibroblasts. All authors read and approved the final version of the manuscript.

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Abbreviations

a disintegrin and metalloproteinases (ADAM); amphiregulin (AREG); co-Immunoprecipitation (coIP); epidermal growth factor receptor (EGFR); FRMD8 (FERM Domain Containing 8), interferon (IFN); interleukin (IL); interleukin 1 receptor 2 (IL1R2); iRhom homology domain (IRHD); oesophageal cancer (OC); oesophageal adenocarcinoma (OAC); oesophageal squamous cell carcinoma (OSCC); predicted aligned error (PAE); predicted local distance difference test (pLDDT); transforming growth factor alpha (TGFα); tumour necrosis factor alpha (TNFα)

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Figure legends

Figure 1:iRhom2 gene expression is high in skin and OSCC (A) Structurally, iRhoms have a distinct topology composed of a rhomboid core with seven transmembrane helices (TMH). The extracellular iRhom homology domain (IRHD) is situated between TMH1 and TMH2. Additionally, iRhoms possess a large cytosolic N-terminal tail: 375 residues in murine iRhom2 and 403 residues in human iRhom2. Relative positions of key characteristics are labelled for murine iRhom2: (1) putative FRMD8 binding site; (2) TOC mutation site - in human iRhom2: I186T (murine position: 156)(Blaydon et al., 2012), D188N (murine position: 158)(Blaydon et al., 2012), D188Y (murine position: 158)(Mokoena et al., 2018), P189L (murine position: 159)(Blaydon et al., 2012), R197S (murine position: 167)(Qu et al., 2019); (3) phosphorylation sites and putative 14-3-3 binding sites. **(B)** Role of iRhoms in ADAM17 biology: iRhoms regulate ADAM17 by binding to immature proADAM17 in the ER and transporting it to the Golgi for maturation. The inhibitory prodomain is then proteolytically removed by furin-like proteases. This process allows mature ADAM17 in complex with iRhoms to localise to the cell surface and initiate shedding of its substrates, enabling various pathways including TNFα and EGFR signalling. **(C)** Curated Affymetrix Human Genome U133 Plus 2.0 Array platform data from public repositories (Hruz et al., 2008) were assessed with the GENEVESTIGATOR software. The GENEVESTIGATOR platform allows for the comparison of mRNA expression of genes between samples of different experimental data sets: Gene expression levels of iRhom1 (RHBDF1) and iRhom2 (RHBDF2) from healthy human epidermis tissue (n = 10), untreated primary human keratinocytes from healthy tissue (n = 13),

untreated primary human fibroblasts from healthy dermis tissue (n = 57), untreated primary human

artery smooth muscle cells from healthy heart tissue (n = 10), untreated primary human bronchial

smooth muscle cells from healthy heart tissue (n = 10) were analysed. To compare the gene expression

levels of iRhom1 and iRhom2 in one sample, the iRhom2/iRhom1 ratio was calculate for each sample.

(D) Immunoblot of cell lysates from primary keratinocytes or primary fibroblasts. n = 3. **(E)** RT-qPCR of

primary keratinocytes and primary fibroblasts. n = 3. **(F-G)** Data from curated Affymetrix Human

Genome U133 Plus 2.0 Array platform data as described in (C): **(F)** Gene expression levels of iRhom1

and iRhom2 in primary keratinocytes from healthy tissue treated with: untreated control (n = 13) or

treated for 24 h with indicated proinflammatory stimulants (n = 3) or treated for 96 h with IFNγ (n = 2).

(G) Gene expression levels of iRhom1 and iRhom2 in healthy human oesophagus squamous tissue

(n = 23) compared to expression levels in human oesophageal squamous cell carcinoma (OSCC; n = 8),

human oesophageal adenocarcinoma (OAC; n = 26) and Barrett´s oesophagus (n = 17).

Figure 2: The cytosolic N-terminal tail of iRhom2 is an intrinsic disordered hub for regulation and

differentially controls levels of mature ADAM17. (A) Using IUPred3 (Meszaros et al., 2009, Erdos et

al., 2021) and NetSurfP-2.0 (Klausen et al., 2019) , we assessed the probability of disordered regions

and the presence of different structural elements in the cytosolic N-terminus of murine and human

iRhom2 (residue 1 to 375). IUPred3 score describes the probability of disordered regions. NetSurfP-2.0

output gives the probability of the presence of disorder, alpha-helices, and beta-sheets. **(B)** *Ab initio*

structural modelling of the N-terminus of murine iRhom2 using the deep learning algorithm

AlphaFold2. Best ranked model is depicted in cartoon representation coloured according to pLDDT

(predicted local distance difference test in [%]) score. **(C)** Consistent with (A), the structural prediction

of the N-terminus of murine and human iRhom2 using AlphaFold2 demonstrates only small locally

structured regions: Hence the iRhom2 N-terminus is largely disordered, as indicated by the overall low

average pLDDT score per sequence position of the five predicted, ranked models. **(D)** The predicted

align error (PAE) of the best ranked structural models support this finding: the individual amino acid

residues in the disordered/unstructured N-terminus are largely not fixed in their position relative to

each other and therefore have a high spatial uncertainty (20 - 30 Å). **(E)** Using the bioinformatic tools

IUPred3 and ANCHOR2 (Mészáros et al. 2009) putative binding sites within the cytoplasmic N-terminus

of human iRhom2 were identified. The plots show the calculated probability for an amino acid residue

to be part of a binding site. Regions above 50% probability (ANCHOR2) and with a certain length are

putative binding sites such as the highly conserved region which harbours all known TOC mutations.

Our designed TOC site deletion ndTOC comprises the three main TOC mutations, but not the newest

identified R197S (Qu et al., 2019). **(F)** We used the algorithm CONYAR (Kahveci-Türköz et al., 2023) to

retrieve all available amino acid sequences of iRhom1 and iRhom2 from UniProtKB and compare them

to identify highly conserved regions within the amino acid sequences of that gene. In the case of iRhom2 (query: RHBDF2) sequences from 381 species and in case of iRhom1 (query: RHBDF1) sequences of 301 species were extracted. The TOC site was identified by CONYAR as a highly conserved region and its conservation is shown as WebLogo representation. Asterisks indicate the positions of the natural occurring TOC mutations in human iRhom2. M indicates the position of arginine methylation found by high throughput proteomics (Hornbeck et al., 2015). **(G)** Overview of the relative position of key regulatory sites and binding interfaces in wt-iRhom2 and in our designed N-terminal deletions. Phosphorylation sites (P1, P2 and P3) are binding sites for 14-3-3 proteins. NLS: predicted nuclear localisation sequence. **(H,I)** To analyse binding between iRhom2 constructs and endogenous FRMD8, coIPs were performed using the indicated iRhom2 constructs (with HA tag) as bait. HEK293 cells stably expressing the indicated murine iRhom2 deletions (H) or human iRhom2 constructs (I) as well as GFP (ctr.) as negative control were used. At around 55 kDa the shorter fragment of cleaved iRhom2 (siR2) as reported before (Adrain et al., 2012, Christova et al., 2013) is visible. This fragment was described as consequence of cleavage by signal peptidase complex (Dulloo et al., 2022, Zanotti et al., 2022) but may additionally occur as artefact after lysis as we detect inconsistent amounts of the small fragment in different experiments. n = 4.

Figure 3: The iRhom2 N-terminus regulates levels of mature ADAM17. (A)-(C) Immunoblot of samples from HEK293 cells stably expressing the indicated murine iRhom2 variants (A,B) or human iRhom2 variants (C) as well as GFP (ctr.) as negative control. Glycosylated proteins from cell lysates were enriched with concanavalin A beads. HEK293 cells have endogenous iRhoms and therefore exhibit a basal level of ADAM17 maturation. The maturation level of ADAM17 can be detected by the presence of mature ADAM17 with lower molecular weight than immature ADAM17 (imA17). ADAM17 maturation was assessed by densitometric measurements and calculation of the ratio between mature ADAM17 and immature ADAM17. Total ADAM17 levels were assessed by densitometric measurements and calculation of the ratio between total ADAM17 (mature plus immature ADAM17) divided by the respective input control. Values were normalised to the respective wt-iRhom2 sample. n > 4. **(D)-(E)** Levels of surface ADAM17 in cells stably expressing indicated murine iRhom2 constructs (D) or human iRhom2 constructs (E) were measured by flow cytometry. For quantification, the geometric mean of the specific fluorescence signal was determined and normalised to the respective wt-iRhom2. n > 4.

Figure 4: N-terminal mutations in iRhom2 dysregulate ADAM17-mediated shedding. (A-E) Constitutive ADAM17-mediated shedding activity was assessed by performing an alkaline phosphatase

(AP) assay in HEK293 cells (A,B,D) and MEFs deficient for iRhom1 and iRhom2 (C,E) expressing the indicated iRhom2 constructs. The ADAM17 substrate TGFα, IL1R2 or AREG tagged with AP were used. The metalloprotease inhibitors marimastat (10 µM) or the more ADAM17 specific inhibitor TAPI1 (10 µM) were used as negative control. Where indicated, ADAM17 activity was additionally stimulated by the phorbol ester PMA (100 nM). n > 4.

Figure 5: The N-terminal tail of iRhom2 regulates protein turn-over kinetics. (A) After biosynthesis in the ER, ADAM17 is transported to the Golgi for maturation with the help of iRhoms. The complex of mature ADAM17 and iRhom is transported to the cell surface. After internalisation, the complex is degraded in the lysosomes. Like all ER proteins, to a certain extent immature ADAM17 can be transported directly to the lysosome by ER-phagy. **(B-C)** To analyse the fate of mature ADAM17 in cells expressing the nd197 and cub deletion, cells were treated with either NH_4Cl ("N") or bafilomycin ("B") for 8 h (B) or 16 h (C) to inhibit lysosomal degradation. Levels of mature ADAM17 were assessed by densitometric measurements and calculation of the ratio between mature ADAM17 and the loading control GAPDH, which is independent of lysosomal degradation. (n = 4) **(D)** To assess the turn-over rate of ADAM17 a cycloheximide-based (Chx) pulse-chase experiment was performed. Reduction of ADAM17 levels was assessed by densitometric measurements and normalisation to 0 h Chx treatment (set to 1). (n = 3).

Figure 6: The N-terminus of iRhom2 regulates ADAM17 interaction. To analyse interaction between ADAM17 and the indicated murine iRhom2 variants, coIPs were performed using the iRhom variants (with HA tag) as bait. Immunoblotting and subsequent densitometric measurements were used to quantitatively analyse iRhom2-ADAM17 binding (ratio of co-precipitated ADAM17 and precipitated iRhom2) and normalised to wt-iRhom2. **(A)** HEK293 stably expressing indicated iRhom2 variants or GFP (ctr.) were used (n > 17). **(B)** MEFs from mice deficient for iRhom1 and iRhom2 stably expressing indicated iRhom2 variants or GFP (ctr.) were used (n = 4). **(C)** HEK293 expressing indicated iRhom2 variants or GFP (ctr.) fused to the ER-retention motif KDEL were used (n > 5). **(D) – (E)** To analyse the fate of mature ADAM17 specifically in the iRhom2-matureADAM17 complex containing either the nd197 deletion, cub deletion or wt-iRhom2, cells were treated with either 40 mM NH4Cl (N) or 500 nM bafilomycin (B) for 8 h or 16 h to inhibit lysosomal degradation. Maturation levels of bound ADAM17 was assessed by densitometric measurements and calculation of the ratio between mature ADAM17 and immature ADAM17. The quantitative analysis of ADAM17 binding can be found in Fig. S4C. (n = 4). **(F)** HEK293 stably expressing indicated human iRhom2 variants or GFP (ctr.) were used for coIP experiments as describe above. (n > 4).

Figure 7: The iRhom2 N-terminal tail regulates ADAM17 binding and shedding activity. Wt-iRhom2 plays a critical role in the transport, maturation and shedding activity of ADAM17, ensuring the proper regulation of downstream signalling pathways such as EGFR activation. Conversely, disruptions of the TOC site in the N-terminal tail of iRhom2 lead to dysregulated higher constitutive shedding activity (loss of regulation mutation). This increased activity of the iRhom2-ADAM17 complex may also be the cause for the accelerated ADAM17 turnover observed for TOC site mutations. The elevated release of EGF receptor ligands such as AREG in iRhom2 high-expressing keratinocytes contributes to an amplified EGFR signalling, resulting in the well-described hyperkeratosis seen in TOC patients. The higher risk for OSCC, which also shows higher iRhom2 and ADAM17 expression, may also be attributed to this phenomenon. In the case of the cub deletion, not only is the TOC site disrupted, but efficient binding to ADAM17 is also impaired, further accelerating ADAM17 turnover and lysosomal degradation. Furthermore, the cub deletion loses the ability to promote stimulated ADAM17 shedding activity. These molecular consequences are independent of FRMD8 and are regulated by the first 200 residues of the N-terminal tail.

Figure S1: (A) Gene expression levels of iRhom1 (RHBDF1) and iRhom2 (RHBDF2) (see Fig. 6A) from primary cell samples are shown as stacked bars, indicating that total iRhom (iRhom1 plus iRhom2) expression may be regulated to a similar overall level in untreated primary cells from healthy tissue. **(B)** Gene expression levels of iRhom1 (RHBDF1) and iRhom2 (RHBDF2) from untreated primary murine keratinocytes from healthy tissue (n = 5), untreated primary murine fibroblasts from healthy dermis tissue (n = 12) and samples from healthy murine heart tissue (n = 98) were analysed. **(C)** Gene expression levels of ADAM17, AREG, TGFα, TNFα and IL6 were analysed in oesophagus and cancerous oesophagus tissues (see Fig. 6C). **(D)** To test whether the increased iRhom2 expression levels were due to the presence of macrophages or monocytes in the samples, the ratio between iRhom2 and CD14 (monocyte and macrophage markers) of the samples was calculated and compared with the values of the indicated immune cell populations (Fig. S2), showing that the measured high iRhom2 levels cannot be explained by the presence of immune cells.**(E)** Gene expression levels of iRhom1 (RHBDF1) and iRhom2 (RHBDF2) fromHEK293 cells (n = 6).

Figure S2: Gene expression levels of indicated immune cell markers: CD94 (NK-cells), CD3γ (T-cells), CD19 (B-cells), CD64 (monocytes/macrophages, Dendritic cells), CD14 (monocytes/macrophages, granulocytes), CD66b/CD67 (granulocytes), CD170 (tumour-associated neutrophiles,

monocytes/macrophages, activated dendritic cells, lymphocytes-subsets) were analysed with the GENEVESTIGATOR platform **(A)** in oesophagus and cancerous oesophagus tissues (see Fig. 1G) and **(B)** in indicated human immune cell populations: macrophages (n = 6), granulocytes (n = 6), leukocytes (n = 8) and monocytes (n = 13).

Figure S3: (A) Protein sequence alignment of the N-terminal region of the cytosolic tail of human iRhom2 (isoform 1 and isoform 2) and murine iRhom2. **(B)** Surface localisation of iRhom2 variants (with HA tag) in cells stably expressing the indicated murine constructs were measured by flow cytometry. For quantification, the geometric mean of the specific fluorescence signal was determined. n > 11. **(C)** Surface localisation of iRhom2 variants (with HA tag) in cells stably expressing the indicated human constructs were measured by flow cytometry. For quantification, the geometric mean of the specific fluorescence signal was determined. n > 5. **(D)** Immunoblot of samples from MEFs deficient for iRhom1 and iRhom2 stably expressing the indicated iRhom2 variants or GFP (ctr.) were used. The transferrin receptor (TfR1) served as an input control. (n = 3). **(E)** To analyse the fate of mature ADAM17 in cells expressing the indicated TOC mutations, cells were treated with bafilomycin ("B") for 8 h to inhibit lysosomal degradation. Levels of mature ADAM17 were assessed by densitometric measurements and calculation of the ratio between mature ADAM17 and the loading control GAPDH, which is independent of lysosomal degradation. (n > 4). **(F)** To assess the turn-over rate of ADAM17 a cycloheximide-based (Chx) pulse-chase experiment was performed. Reduction of ADAM17 levels was assessed by densitometric measurements and normalisation to 0 h Chx treatment (set to 1). (n = 5).

Figure S4: (A) ADAM17 levels of immunoblot (Fig. 6C) were assessed by densitometric measurements and calculation of the ratio between total ADAM17 (mature plus immature ADAM17) divided by the respective input control. Values were normalised to the respective wt-iRhom2 sample. n > 5. **(B-C)** To analyse interaction between ADAM17 and the indicated iRhom2 variants, coIPs were performed using the iRhom variants (with HA tag) as bait. Immunoblotting and subsequent densitometric measurements were used to quantitatively analyse iRhom2-ADAM17 binding (ratio of co-precipitated ADAM17 and precipitated iRhom2) and normalised to wt-iRhom2. **(B)** MEFs from mice deficient for iRhom1 and iRhom2 stably expressing indicated iRhom2 variants with ER retention signal KDEL or GFP (ctr.) were used (n = 4). **(C)** iRhom-ADAM17 binding after lysosomal inhibition was analysed. Densitometric measurements of coIP immunoblot (Fig. 6D) (n = 4).

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Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7

Figure S1

Figure S2

Figure S3

(A)

```
muiR2      1 MASADKNGSNLPSVSGSRLQSRKPPNLSITIPPP--ESQAPGEQDSMLPE----------
huiR2iso1  1 MASADKNGGSVSSVSSSRLQSRKPPNLSITIPPPEKETQAPGEQDSMLPEGFQNRRLKKS
huiR2iso2  1 MASADKNGGSVSSVSSSRLQSRKPPNLSITIPPPEKETQAPGEQDSMLPE----------
             *******..:.***.*****************   *:************

muiR2     61 ------------------RRKNPAYLKSVSLQEPRGRWQEGAEKRPGFRRQASLSQSIRK
huiR2iso1 61 QPRTWAAHTTACPPSFLPKRKNPAYLKSVSLQEPRSRWQESSEKRPGFRRQASLSQSIRK
huiR2iso2 61 ------------------RKNPAYLKSVSLQEPRSRWQESSEKRPGFRRQASLSQSIRK
                               *************.****.:*****************
```

(B) (C) (D)

(E)

(F)

Figure S4

(A)

(B)

(C)