Title: RGS10 differently modulates NFKB subunit transcription and inflammatory cytokine

profiles in peritoneal macrophages.

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Abstract

Regulator of G-protein signaling 10 (RGS10) has been shown to regulate multiple

inflammatory pathways relevant to disease pathogenesis. Of particular importance is the ability

of RGS10 to negatively regulate the NFkB pathway, a prominent pro-inflammatory pathway

implicated in multiple inflammatory disease phenotypes. However, the exact mechanism by

which RGS10 regulates NFkB is unknown. Considering that RGS10 translocates into the nucleus

upon stimulation, we hypothesize that RGS10 may regulate NFKB through transcription. To

determine whether RGS10 mediates NFkB transcription, we stimulated RGS10 KO and B6

peritoneal macrophages and collected cell lysate over 24 hours to assess transcript levels of

NFkB and related proinflammatory cytokines. Here we found that RGS10 differentially regulates

the transcription of NκKB subunits and NFκB-dependent cytokines. Further studies are

warranted to understand the potential role of RGS10 in transcriptional regulation of

inflammatory states.

Introduction

Regulator of G-protein signaling 10 (RGS10) has been shown to regulate inflammatory

responses that are protective in multiple chronic inflammatory disease models such as

rheumatoid arthritis (RA), metabolic dysfunction, obesity, colitis, periodontist, influenza

infection, cancers, and even neurodegenerative disease models (1-9). Mechanistically, RGS10

modulates multiple pathways that regulate the production of pro-inflammatory cytokines in

myeloid cells including Stromal interaction molecule 2 (STIM2) mediated calcium entry,

glycolytic production of reactive oxygen species (ROS), and suppression of Nuclear Factor

kappa-light-chain-enhancer of activated B cells (NFkB)(7, 10, 11). Importantly, NFkB, a master

transcriptional regulator of pro-inflammatory cytokines, is translocated to the nucleus upon

inflammatory stimulation in myeloid cells allowing for the production of key inflammatory

mediators such as Tumor necrosis factor (TNF), Interleukin 1-beta (IL-1B), Interleukin 6 (IL-6),

Interleukin 12p40 (IL-12p40), and cyclooxegenase-2 (COX2) (12, 13). Dysregulated NFkB

signaling has been identified as an important mediator of multiple chronic inflammatory

diseases such as RA, Irritable bowel disease, type 1 diabetes, ect.(12). Specifically, RGS10

deficiency enhances NFkB subunits protein levels upon inflammatory stimulus and also

amplifies NFKB activity and proinflammatory cytokine secretion(4, 7). However, the mechanism

by which RGS10 regulates NFKB levels is still unknown. Immunoprecipitation assays have

further revealed that RGS10 does not have a direct protein to protein interaction with

NFkB(10). Interestingly, both RGS10 and NFKB translocate to the nucleus upon inflammatory

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stimulation indicating that RGS10 may play a nuclear role in regulating the level and activity of

NFkB(9, 12). Moreover, immunoprecipitation assays revealed that RGS10 does interact with

DNA binding proteins indicating that it may play a role in transcription(10).

67   Therefore, we hypothesized that RGS10 transcriptionally regulates NFKB. To test this,

we analyzed NFkB and proinflammatory transcripts of lipopolysaccharide (LPS) stimulated wild

type C57B6/J (B6) and RGS10 Knock out (KO) peritoneal macrophages (pMacs) at 1,2,4,8, and

24h. Importantly, animals were given opioid analgesics prior to pMac collection. Under these

conditions, we found that RGS10 differentially regulates the transcription of NFKB subunits and

NFKB-dependent cytokines. Specifically, we demonstrate that RGS10 does not regulate the

kinetics of NFKB subunit transcription or IL-1B cytokine transcription levels. However, we do see

that RGS10 deficiency briefly results in higher levels of p65 transcript levels shortly after initial

stimulation. Moreover, we found that RGS10 KO pMacs produced significantly less TNF

transcript than their B6 counterparts and this difference was driven by male mice. We also

found no difference in secreted protein levels of TNF, IL-1β, or IL-10 but did see elevated levels

of IL-6, IL-12, and KCGRO in LPS stimulated RGS10 KO pMacs. In summary, we demonstrate

transient and differential transcriptional regulation of NFKB pathway components by RGS10.

These data warrant further investigation into the potential role of RGS10 in transcriptional

regulation. Importantly, these phenotypes we collected with the use of opioid analgesics and

therefore our data demonstrate that RGS10 can regulate differential myeloid pro-inflammatory

profiles under the influence of such opioid analgesics.

Materials and Methods

Animals: Mice were housed in the McKnight Brain Institute vivarium at the University of Florida

and maintained on a 12:12 light–dark cycle with *ad libitum* access to water and standard rodent

diet chow. All animal procedures were approved by the Institutional Animal Care and Use

Committee and followed the Guide for the Care and Use of Laboratory Animals from the

National Institutes of Health at the University of Florida. Generation of the RGS10 Knock out

(KO) line onto a C57B6/J background has been previously described[7]. 4 to 5 month-old male

and female C57B6/J and RGS10 KO mice (n=12/group) were given 50uL of sustained-release

Buprenorphine (ZooPharm) subcutaneously 30 minutes prior to intraperitoneal injection of 1mL

of 3% thioglycolate. 3 days later animals were sacrificed via cervical dislocation for peritoneal

macrophage collection.

Peritoneal macrophages: Peritoneal macrophage(pMacs) collection occurred as previously

published[14]. Specifically, Pmacs collection occured in a laminar flow hood. After cervical

dislocation and spraying down the animals with 70% ethanol, 10mL of cold RMPI were injected

into the peritoneum. Peritoneal lavage fluid was collected, passed through 70 uM filters prewet

with 5mL of HBSS-/- (Gibco, 14175103) into 50mL conical tubes. Filters were rinsed with 5mLs

of HBSS-/- (Gibco, 14175103) twice and centrifuged at 400xg for 5 minutes at 4°C. If blood cells

were present in the sample, cells were treated with 1mL of ammonium-chloride-potassium lysis

buffer for 1min and then pelleted at 400xg for 5 minutes at 4°C. Cells were taken forward and

processed in the biosafety hood using sterile technique. Supernatant was aspirated off cells,

and cells resuspended in 3mL of warm plating media (RPMI, 10% fetal bovine serum, and 1%

penicillin/streptomycin). 10uL of cells were taken forward for counting using a 1:1 diluted

trypan blue (1/4th trypan blue in sterile 1XPBS) stain and the CountessTM. Cells were plated at

1X106 density in a 2mLs of culture media in a 12 well plate. Cells were placed in the incubator

at 37° C and 5% CO2 to rest for 2 hours. After 2 hours, cells were washed with sterile DPBS

(Gibco, 14190235) to remove non-adherent cells and new pre-warmed culture media (RPMI

supplemented with 10% FBS and 1x Pen-Strep) was added. Cells were treated with either

vehicle or 100ng/mL LPS for 1,2,4,8, or 24hrs. Media was collected and flash frozen in liquid

nitrogen. Cells were lysed with 350uL BME and RLT lysis buffer (20uL of BME per 1mL RTL

buffer) and mechanically homogenized by scrapping each well with a cell scraper.

RNA extraction: Bench areas were cleaned with RNase Zap prior to RNA extraction. Lysed pMac

cells were processed for RNA extraction via RNeasy Kit (Qiagen) according to manufacturer's

protocol. Briefly, lysed solution was transferred to Qiashredder tubes for complete

homogenization. Qiashredder flow-though was stored in -80°C until sample batches were

collected. Samples were thawed and mixed with 350uL of 70% ethanol and transferred to

RNAeasy spin columns. Samples were centrifuged for 15 seconds at 10,000rmp(9,391xg) at

room temperature. Flow-through was discarded and nucleic acids trapped in the RNAeasy

membrane were washed with 700uL of RW1 buffer and 500uL of RPE buffer twice, centrifuging

for 15 seconds at 10,000rmp at room temperature and discarding flow-through after each

wash. Samples were then centrifuged for 2 minutes at full speed to dry before eluting samples

with 30uL of RNAse free water in a 1-minute spin at 10,000rpm. RNA concentrations were

determined using Denovix spectrophotometer and samples were stored at -80°C prior to cDNA

synthesis.

cDNA synthesis : DNA was removed from RNA samples prior to cDNA synthesis by diluting RNA

samples with nuclease free water and 3.68ul of DNAse master mix (3.36ul of 25mM Mgcl2 +

0.32ul of 1/5 DNAse 1) reaching a total volume of 10ul per sample. Samples were then run

through the thermocycler at 37° C for 30 minutes followed by 75° C for 10 minutes and a 4° C

hold. 0.4ug of cDNA for each sample was synthesized from RNA using the High-Capacity cDNA

Reverse Transcription Kit (Thermo Fisher Scientific, 4368814) according to manufacturer's

instructions. Briefly, 10ul of reverse transcription master mix, which was comprised of 2ul of

10XRT Buffer, 0.8 25XdNT mix (100mMm, 2ul of 10XRT random Primers, 1ul of Rnase Inhibitor,

1ul of Reverse Transriptase, and 3.2ul of Nuclease-Free water per sample, was added to each

DNA-free sample. Samples were vortexed and spun down and run in the thermocycler at 25° C

for 10 minutes followed by 37° C for 2 hours then 85° C for 5 minutes and a 4° C hold. cDNA

samples were then diluted to the final concentration with nuclease-free water and stored at -20

° C.

Real Time QPCR: cDNA was combined with SYBR green reagents (Thermo Fisher Scientific,

A46112) and specific IDT Forward and Reverse primers at 10ng/well reactions in a 384 well plate

in triplicate for Real Time Quantitative PCR analysis in comparative CCT run on the Quant Studio

5 at a volume of 20ul/well. Primer sequences were as follows: mouse NFKB subunit p65

forward: GGA TCC AGT GTG TGA AGA AG and reverse: CTC CTC TAT AGG AAC GTG AAA G,

mouse NFKB subunit p105 forward: GGG ACA GTG TCT TAC ACT TAG and reverse: GTC ATC AGA GAT

CAA ACC AGA, mouse RGS10 forward: TTG GCT AGC GTG TGA AGA TTT C and reverse: TGG CCT TTT CCT

GCA TCT G, mouse TNF forward: CTG AGG TCA ATC TGC CCA AGT AC and reverse: CTT CAC AGA GCA ATG

ACT CCA AAG, mouse IL-1B forward: CAA CCA ACA AGT GAT ATT CTC CAT G and reverse: GAT CCA CAC

TCT CCA GCT GCA. All QPCR samples were normalized to their own Beta- Actin CT and then to the

WT B6 saline group. Samples with an average triplicate variance of ≥ 0.3, had outlying triplicate

removed and if samples average remaining variance still exceeded 0.3 the sample was excluded

from analysis.

Mesoscale Discovery Multiplexed Immunoassays: Protein concentrations of TNF, IL-6, IL-1β,

KC/GRO, IL-4, IL-10, IFN-Y, IL-5, IL-2, and IL-12p70 in conditioned media were analyzed (MSD,

K15048D-2) using multiplexed immunoassays on the MesoScale Discovery (MSD) platform.

Samples were plated in duplicate at a 1:1 dilution with MSD diluent 41. Samples were

processed according to the manufacturer's instructions as previously described(14). Plates were

analyzed on the MSD Quickplex machine and MSD software (Discovery Workbench Version

4.0). Cytokines with values below the lower limit of detection (LLOD) were not quantified.

Statistics: Analyses were performed with Graph-Pad Prism 10.6. Group differences were

analyzed using Ordinary three-way Anova corrected for multiple comparisons with Tukey post

hoc test. Differences between groups across time were analyzed using one-way ordinary

ANOVA corrected for multiple comparisons with Tukey's post hoc analysis. Samples that are

statistically different do not share the same letter. p values ≤ 0.05 were considered statistically

significant.

Results

To determine whether the RGS10 mediated NFkB-dependent transcription, we

stimulated RGS10 KO and B6 peritoneal macrophages and collected cell lysate over 24 hours to

and assessed transcript levels of NFkB and related proinflammatory cytokines. If the hypothesis

that RGS10 negatively regulates NFkB transcription is correct, we would expect to see that

RGS10 deficiency enhances NFkB-dependent pro-inflammatory gene transcription. Here, we

find that RGS10 does not differentially regulate the kinetics of NFKB subunit transcription when

analyzed over the course of 24 hours, nor did we find an enhancement in the transcription of

NFkB-dependent genes such as TNF and IL-1B (Figure 1). However, we did find that RGS10

deficiency results in higher levels of the p65 NFkB subunit transcript at 2 hours post LPS

stimulation (Supplemental figure 1D), indicating a potential time sensitive role for the

regulation of the p65 NFkB subunit by RGS10. Importantly, we demonstrate that RGS10

transcript levels are reduced upon stimulation and recover over time, which has been

previously reported by multiple studies (Figure 1B)(9, 15). Interestingly, we found a genotype

effect of TNF transcripts indicating that RGS10 KO peritoneal macrophages (pMacs) were

producing less TNF than their B6 counterparts (Figure 1C).

Figure 1. RGS10 differentially regulates the transcription of NFκB subunits and NFκB-
dependent transcripts. The red line represents RGS10 KO pMacs treated with LPS, blue line

represents B6 pMacs treated with LPS, yellow line represents RGS10 KO pMacs treated with
vehicle, and the green line represents B6 pMacs treated with vehicle. A) Fold change of p65
NFκB transcripts relative to control over 24h. B) Fold change of p105 NFκB transcripts relative
to control over 24h C) Fold change of TNF transcripts relative to control over 24h. D) Fold
change of IL-1βtranscripts relative to control over 24h. E) Fold change of RGS10 transcripts
relative to control over 24h Significant genotype present on appropriate graphs. Samples that
are statistically different do not share the same letter.
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To understand if any of our results were sex specific, we analyzed our data in males and

females separately. Here we found that the genotype effect on TNF is only present in male

RGS10 KO pMacs and not females (Figure 2C,G). Otherwise, male and female pMacs produced

similar transcriptional inflammatory responses to LPS. Interestingly, early transcription of the

p65 subunit of NFkB was significantly enhanced with RGS10 deficiency in females but not males

(Supplemental Figure 1E-F).

Figure 2. Transcription of the NFκB subunits and pro-inflammatory cytokines is similar across
both sexes. Fold change of p65 NFκB transcripts relative to control over 24h in females (A) and
males (B)**.** Fold change of p105 NFκB transcripts relative to control over 24h in females (C) and
males (D). Fold change of TNF transcripts relative to control over 24h in males (E) and females (f).
Fold change of IL-1βtranscripts relative to control over 24h in males (G) and females (H). Fold
change of RGS10 transcripts relative to control over 24h in males (I) and females (J). Significant
genotype present on appropriate graphs. Samples that are statistically different do not share the
same letter.
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It was surprising that our data did not demonstrate any enhancement in TNF or IL-1β

transcripts levels as previous literature reported exacerbated TNF and IL-1β protein levels with

RGS10 KO in pMacs(16). Therefore, we examined the level of secreted pro-inflammatory

cytokines from the conditioned media. Again, we found that TNF and IL-1β levels did not

change with RGS10 deficiency, nor did levels of IL-10 (Figure 3 A,D,F). Instead, we found that

RGS10 deficiency exacerbated the levels of IL-6, KCGRO, and IL-12 (Figure 3 B,C,E).

Figure 3.RGS10 regulates the secretion of pro-inflammatory cytokines in peritoneal
macrophages Level of pro-inflammatory cytokines from male and female pMacs. Green dots
are B6 pMacs and Blue dots are RGS10 KO pMacs. A) pg/mL normalized to RNA yield of TNF
protein levels 24h post stimulation. B) pg/mL normalized to RNA yield of IL-12 protein levels
24h post stimulation. C) pg/mL normalized to RNA yield of IL-6 protein levels 24h post
stimulation. D) pg/mL normalized to RNA yield of IL-1B protein levels 24h post stimulation. E)
pg/mL normalized to RNA yield of KCGRO protein levels 24h post stimulation. F) pg/mL
normalized to RNA yield of IL-10 protein levels 24h post stimulation. Samples that are
statistically different do not share the same letter.
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Discussion

Overall, our data demonstrates that RGS10 differentially regulates the transcription of

NFKB subunits and NFKB-dependent cytokines in peritoneal macrophages. However, this effect

is time sensitive and displays multiple sex biases. The brief and not sustained increase of the

p65 NFkB subunit transcript levels with RGS10 deficiency can likely be explained by the

downregulation of RGS10 transcript post LPS stimulation, rending a lack of RGS10 in which to

regulate p65 NFkB transcript levels with past the initial stimulation (~within 2 hours of

stimulation). In support of this idea, RGS10 protein levels have also been observed to decrease

with LPS stimulation in other myeloid populations over the course of 24-48 hours prior to

returning to baseline levels(9, 15).

Moreover, our data reveals novel cytokine transcription and secretion patterns

mediated by RGS10. Specifically, we observe, in contrast to previous studies, that RGS10

deficiency did not impact transaction of key NFκB-dependent cytokine IL-1b and even resulted

in the reduction of TNF transcript in a sex-dependent manner. Additionally, we observe, again

in contrast to previous studies, no change in TNF, IL-1β, or IL-10 cytokine secretion in RGS10

deficient pMacs compared to their B6 counterparts upon LPS stimulation. Interestingly, IL-6,

KCGRO, and IL-12 cytokine secretion was exasperated by RGS10 deficiency instead, capturing a

differential inflammatory profile that is regulated by RGS10.Importantly, this differential

mediation of inflammation may be due to the use of buprenorphine in our study that

previous studies were not stipulated to use(16). Buprenorphine is a partial mu opioid

receptor agonist, and the mu opioid receptor, which is expressed in myeloid cells

among others, is an inhibitory GPCR(17). RGS10 was canonically identified as

GTPase-activating protein with high-affinity for inhibitory GPCRs(18). Therefore, we

speculate that the regulation of pro-inflammatory responses by RGS10 may be

significantly influenced by the use of opioids. Follow-up studies are necessary to clarify

the influence of buprenorphine and other opioids on RGS10-mediated myeloid cell

activation. Consequently, our study reveals that RGS10 differentially and transiently

regulates the transcription of NFκB pathway components and that RGS10 may mediate

alternative inflammatory responses under the influence of opioid analgesics.

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license to all Author Accepted Manuscripts arising from this submission.

Author Contributions: JEJP: Conceptualized and designed the study, completed mouse

injections, in vitro work, and biochemical analysis, wrote and edited the original manuscript.

KD: Assisted with in vitro work and biochemical analysis. CLC and NKN: Maintained mouse

colonies and assisted in tissue harvesting. KBM: Participated in study design, data analysis, and

manuscript editing. MGT: Contributed to conception and design of the study as well as

preparing the final manuscript.

Data Availability: The data generated in this study are available at the following Zenodo

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Medicine (IUSM).

Abbreviations:

BME: Beta mercaptoethanol

cDNA: complementary DNA

Cox2: Cyclooxygenase 2

DNA: Deoxyribonucleic Acid

DPBS: Dulbecco's Phosphate Buffered Saline

GPCR: G Protein Coupled Receptor

IL-12: Interleukin 12

IL-12p40: Interleukin 12p40

IL-1β: Interleukin 1β

KCGRO: Keratinocyte chemoattractant/Growth-regulated oncogene

KO: Knock Out

LLOD: Lower limit of detection

LPS: Lipopolysaccharide

MSD: Mesoscale Discovery

NFkB: Nuclear Factor kappa-light-chain-enhancer of activated B cells

pMac: Peritoneal macrophages

QPCR: Quantitative real time polymerase chain reaction

RA: Rheumatoid Arthritis

RGS10: Regulator of G Protein Signaling 10

RNA: Ribonucleic Acid

RPMI 1640: Roswell Park Memorial Institute 1640

STIM2: Stromal interaction molecule 2

TNF: Tumor Necrosis Factor

WT: Wild type

References

1.   Wei W, Li J, Liu X, Pan W, Wang M, Li J, et al. Inhibition of RGS10 Aggravates

Periapical Periodontitis via Upregulation of the NF-kappaB Pathway. J Endod.

2022;48(10):1308–18 e5.

2.   Chan WC, Tan L, Liu J, Yang Q, Wang J, Wang M, et al. Inhibition of Rgs10

aggravates periodontitis with collagen-induced arthritis via the nuclear factor-kappaB

pathway. Oral Dis. 2022.

3.   Almutairi F, Sarr D, Tucker SL, Fantone K, Lee JK, Rada B. RGS10 Reduces

Lethal Influenza Infection and Associated Lung Inflammation in Mice. Front Immunol.

2021;12:772288.

4.   Ren J, Wei W, Tan L, Yang Q, Lu Q, Ding H, et al. Inhibition of regulator of G

protein signaling 10, aggravates rheumatoid arthritis progression by promoting NF-

kappaB signaling pathway. Mol Immunol. 2021;134:236–46.

5.   Houser MC, Caudle WM, Chang J, Kannarkat GT, Yang Y, Kelly SD, et al.

Experimental colitis promotes sustained, sex-dependent, T-cell-associated

neuroinflammation and parkinsonian neuropathology. Acta Neuropathol Commun.

2021;9(1):139.

6.   Fang X, Chung J, Olsen E, Snider I, Earls RH, Jeon J, et al. Depletion of

regulator-of-G-protein signaling-10 in mice exaggerates high-fat diet-induced insulin

resistance and inflammation, and this effect is mitigated by dietary green tea extract.

Nutr Res. 2018.

7.   Lee JK, Chung J, McAlpine FE, Tansey MG. Regulator of G-protein signaling-10

negatively regulates NF-kappaB in microglia and neuroprotects dopaminergic neurons

in hemiparkinsonian rats. J Neurosci. 2011;31(33):11879–88.

8.   Hooks SB, Callihan P, Altman MK, Hurst JH, Ali MW, Murph MM. Regulators of

G-Protein signaling RGS10 and RGS17 regulate chemoresistance in ovarian cancer

cells. Mol Cancer. 2010;9:289.

9.   Lee JK, McCoy MK, Harms AS, Ruhn KA, Gold SJ, Tansey MG. Regulator of G-

protein signaling 10 promotes dopaminergic neuron survival via regulation of the

microglial inflammatory response. J Neurosci. 2008;28(34):8517–28.

10.   Wendimu MY, Alqinyah M, Vella S, Dean P, Almutairi F, Davila-Rivera R, et al.

RGS10 physically and functionally interacts with STIM2 and requires store-operated

calcium entry to regulate pro-inflammatory gene expression in microglia. Cellular

Signalling. 2021;83:109974.

11.   Chung J, Jernigan J, Menees KB, Lee J-K. RGS10 mitigates high glucose-

induced microglial inflammation via the reactive oxidative stress pathway and enhances

synuclein clearance in microglia. Frontiers in Cellular Neuroscience. 2024;18.

12.   Liu T, Zhang L, Joo D, Sun SC. NF-kappaB signaling in inflammation. Signal

Transduct Target Ther. 2017;2.

13.   Liu T, Zhang L, Joo D, Sun S-C. NF-κB signaling in inflammation. Signal

Transduction and Targeted Therapy. 2017;2(1):17023.

14.   Staley HA, Jernigan JE, Bolen ML, Titus AM, Neighbarger N, Cole C, et al.

Alzheimer's disease-associated protective variant Plcg2-P522R modulates peripheral

macrophage function in a sex-dimorphic manner. J Neuroinflammation. 2024;21(1):280.

15.   Almutairi F, Tucker SL, Sarr D, Rada B. PI3K/ NF-kappaB-dependent TNF-alpha

and HDAC activities facilitate LPS-induced RGS10 suppression in pulmonary

macrophages. Cell Signal. 2021;86:110099.

16.   Lee JK, Chung J, Kannarkat GT, Tansey MG. Critical role of regulator G-protein

signaling 10 (RGS10) in modulating macrophage M1/M2 activation. PLoS One.

2013;8(11):e81785.

17.   Lamberts J, Traynor J. Opioid Receptor Interacting Proteins and the Control of

Opioid Signaling. Current Pharmaceutical Design. 2014;19(42):7333–47.

18.   Hunt TW, Fields TA, Casey PJ, Peralta EG. RGS10 is a selective activator of Gαi

GTPase activity. Nature. 1996;383(6596):175–7.

A
p65 NFκB subunit Timeline

A ● B6 LPS
A ■ KO LPS
B ● B6 UT
B ■ KO UT

Time Effect = 0.0774
* Genotype Effect = 0.0391
**** Treatment Effect = <0.0001

B
p105 NFκB subunit Timeline

A ● B6 LPS
A ■ KO LPS
B ● B6 UT
B ■ KO UT

**** Time Effect = <0.0001
Genotype Effect = 0.6273
**** Treatment Effect = <0.0001

C
TNF Timeline

A ● B6 LPS
AB ■ KO LPS
B ● B6 UT
B ■ KO UT

**** Time Effect = <0.0001
** Genotype Effect = 0.0056
**** Treatment Effect = <0.0001

D
IL-1β Timeline

A ● B6 LPS
A ■ KO LPS
B ● B6 UT
B ■ KO UT

**** Time Effect = <0.0001
Genotype Effect = 0.6351
**** Treatment Effect = <0.0001

E
RGS10 Timeline

B ● B6 LPS
C ■ KO LPS
A ● B6 UT
C ■ KO UT

* Time Effect = 0.0331
**** Genotype Effect = <0.0001
**** Treatment Effect = <0.0001