**H pylori** infection is associated with downregulation of E-cadherin, a molecule involved in epithelial cell adhesion and proliferation control

A M Terrés, J M Pajares, D O’Toole, S Ahern, D Kelleher

**Abstract**

Extracellular matrix proteins and proteins involved in epithelial adhesion are essential for maintenance of tissue structure. *Helicobacter pylori* is the major aetiological agent in peptic ulcer disease and has been shown to increase gastric cancer risk up to ninefold. In this study, changes induced by *H pylori* on the expression of extracellular matrix proteins (collagen IV, fibronectin, and laminin) as well as two essential proteins for cell–basement and cell–cell adhesion (α6-integrin and E-cadherin) were assessed. Immunohistochemistry was performed in antral biopsy sections obtained from infected and non-infected patients, and light microscopy was used to determine the distribution and intensity of specific staining. The results showed that the infection was significantly associated with downregulation of E-cadherin, an essential protein for maintenance of solid tissues and differentiation, but did not induce changes in the expression of α6-integrin or the extracellular matrix proteins.


Keywords: E-cadherin; *Helicobacter pylori*; gastric cancer

It is currently accepted that *Helicobacter pylori* (*H pylori*) is the main factor in the complex pathogenesis of the peptic ulcer,1 and there is also recent evidence relating the infection to the development of gastric cancer.2 The pathological mechanisms involved in these processes begin with *H pylori* penetration of the mucus layer and adhesion to the underlying gastric epithelium.3 Cell adhesion in conjunction with the production of surface urease, lipase, and protein toxins may induce rapid destruction of epithelial cells, exposing subepithelial tissues and the extracellular matrix. Bacteria can attach to the basement membrane by high affinity binding to collagen IV and laminin,4 which favours ulceration of the gastric tissue that is associated with *H pylori* infection.

We also assessed the expression of E-cadherin, a calcium dependent protein involved in cell-cell adhesion at the level of the adherent junctions in the epithelium.5 Continued expression and functional activity of E-cadherin are required for cells to remain tightly associated in the epithelium, and in its absence many other proteins involved in this process become incapable of supporting intercellular adhesion. Owing to its capacity to maintain the state of adhesion between epithelial cells, this molecule is important in tissue differentiation and maintenance, and it is thought to act as an important suppressor of epithelial tumour cell invasion and metastatic spread.6 As there is a strong association between *H pylori* and increased risk of gastric carcinoma, we aimed to determine whether *H pylori* might play a role in altered expression of E-cadherin.

**Methods**

**TISSUE IMMUNOSTAINING**

Thirty patients with gastrointestinal symptoms were included in the study. All patients underwent gastroduodenoscopy, and routine biopsy specimens were taken from the gastric antrum for histological diagnosis and urease test. An additional biopsy was taken in order to perform immunohistochemical assays. *H pylori* was considered to be present when the rapid urease test and histological diagnosis after staining with giemsa were positive. When both tests were negative, the patient was considered to be *H pylori* negative. Fourteen patients were not infected by the bacteria (13 had normal gastric mucosa and one had chronic gastritis) and the remaining 16 were infected with *H pylori* (13
chronic gastritis, two duodenal ulcer, and one gastric ulcer).

The study was approved by the human ethics committee of St James Hospital, Dublin.

Biopsies for immunohistochemical staining were processed as described elsewhere. Briefly, biopsies were immediately snap frozen in nitrogen cooled isopentane and stored at −70°C. Gastric sections (5 µm) were obtained with a −25°C cooled cryostat, air dried, acetone fixed, and stained by the peroxidase-antiperoxidase method. To visualise the binding of the monoclonal antibodies, sections were developed with Graham-Karnovsky solution containing 0.5 mg/ml of 3-3'diaminobenzidine tetrahydrochloride (DAB) (Sigma) and hydrogen peroxide. Sections were counterstained with Carazzi’s haematoxylin, dehydrated, and mounted by routine methods. Murine hybridoma anti-HLA-IE (American tissue culture collection, ATCC) was used as negative control.

Tissue sections were examined blindly by two independent observers who did not know the H pylori status of the samples and graded them as strong or weak staining. Data were statistically analysed by the χ² test.

MONOCLONAL ANTIBODIES

The following monoclonal antibodies (mAb) were used: anti-fibronectin (Dako, Golstrup, Denmark; dilution 1:1000), anticollagen IV (Dako; dilution 1:100), anti-α6-integrin (the kind gift of Dr Sánchez-Madrid, Spain; obtained as undiluted supernatant fluids of the hybridoma), anti-laminin (BRL, Ireland; dilution 1:100), and anti-E-cadherin (Transduction Laboratories, Lexington, Kentucky, USA; 1:50).

Results

Tissue expression of collagen IV, laminin, and fibronectin was first assessed. Laminin and collagen IV coexpressed in the basal lamina immediately beneath the epithelial layer (fig 1A and B), while fibronectin was observed dispersed on the lamina propria in all samples (fig 1C). No variation was observed in the level of expression or distribution in any of these proteins in infected samples compared with normal samples. Semiquantitative data are shown in table 1.

Expression of molecules involved in epithelial adhesion was then analysed. α6-Integrin was expressed on the basal membrane of the epithelial cells (fig 1D). Very strong staining
Table 1  Semiquantitative assessment of protein expression

<table>
<thead>
<tr>
<th>Location</th>
<th>Strong staining</th>
<th>Weak staining</th>
<th>p Value</th>
<th>nHP+</th>
<th>nHP−</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-cadherin</td>
<td>25.0%</td>
<td>100%</td>
<td>&lt;0.001</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Epithelium</td>
<td>83.2%</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>α6-Integrin</td>
<td>72.5%</td>
<td>100%</td>
<td>NS</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Epithelium</td>
<td>80.0%</td>
<td>100%</td>
<td>20.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collagen IV</td>
<td>100%</td>
<td>–</td>
<td>NS</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Basement mem</td>
<td>100%</td>
<td>–</td>
<td>27.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>brane</td>
<td>100%</td>
<td>–</td>
<td>20.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laminin</td>
<td>100%</td>
<td>100%</td>
<td>&lt;0.001</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Basement mem</td>
<td>100%</td>
<td>–</td>
<td>NS</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>brane</td>
<td>100%</td>
<td>–</td>
<td>75.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fibronectin</td>
<td>100%</td>
<td>100%</td>
<td>&lt;0.001</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Extracellular matrix</td>
<td>100%</td>
<td>100%</td>
<td>NS</td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>

was detected in 80.0% of non-infected tissue, with similar expression (72.5%) in the infected biopsies (NS). Subsequently we assessed the expression of E-cadherin in both tissue groups. The majority of non-infected tissue samples (83.2%) showed very strong staining for this molecule, distributed mainly in the basolateral surface of the epithelial cells, while strong staining was only observed in only 25.0% of the infected samples. Statistical analysis by χ² test showed that the numbers of infected patients showing reduced expression of E-cadherin were increased (p < 0.001, n = 30) compared with non-infected individuals (fig1E and F). Semiquantitative data are given in table 1.

Discussion

The importance of cellular adhesion in the progression of a malignant neoplastic process has long been accepted. Moreover, the morphogenesis of normal and transformed cells is in part governed by the functional expression of cell adhesion molecules. In particular, the protein E-cadherin is essential for maintaining cell to cell adhesion, as well as for differentiation, tissue structure, and epithelial polarisation, and is thought to act as an important suppressor of epithelial tumour cell invasiveness and metastasis.

In this study we have shown that epithelial E-cadherin expression is significantly reduced in H. pylori infected gastric tissue. It is accepted that patients infected with H. pylori have up to a ninefold greater risk of developing gastric cancer. In this regard, E-cadherin downregulation could be related to H. pylori induced epithelial cell hyperproliferation, as a decrease in its expression would facilitate epithelial cell proliferation and tumour spread. Downregulation of E-cadherin has also been described in other gastrointestinal diseases, such as Barrett’s oesophagus, oesophageal adenocarcinoma, and in epithelium adjacent to ulcers. However, E-cadherin has been reported to be strongly and evenly expressed by the epithelium both in normal intestine and in inflammatory conditions. The expression of laminin, collagen IV, and fibronectin—components of epithelial basement membranes and extracellular matrix, respectively—was not influenced by the presence of H. pylori, neither did the infection influence the expression of α6-integrin, an essential protein in epithelial cell binding to the basal lamina. Therefore ulceration of the gastro-duodenal mucosa, so strongly associated with H. pylori colonisation, does not seem to correlate with disturbances at the level of the basal lamina or the binding functions mediated by α6-integrin.

In conclusion, we have shown that H. pylori infection is significantly associated with down-regulation of E-cadherin, an essential protein for the maintenance of solid tissues and for differentiation. However, the infection is not associated with changes in the expression of α6-integrin, collagen IV, laminin, or fibronectin.

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