



## 小细胞外囊泡及其携带的非编码 RNA 在非酒精性脂肪性肝病中的作用\*

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**摘要** 小细胞外囊泡 (small extracellular vesicles, sEVs) 是由细胞分泌的一种细胞外囊泡, 产生于多泡体, 多泡体与质膜融合并释放到细胞外基质。由于小细胞外囊泡可以携带分子质量相对较小的核酸、蛋白质、脂质, 能够执行细胞间物质传递、细胞间通讯等功能。因此, 小细胞外囊泡及其携带的非编码 RNA 不仅参与细胞正常生理过程, 也可以在多种疾病的发生发展过程中起重要作用。本文综述了小细胞外囊泡在非酒精性脂肪性肝病 (NAFLD) 中的作用, 小细胞外囊泡及其携带的非编码 RNA 不仅有望成为 NAFLD 诊断的标志物, 同时也具有治疗 NAFLD 的潜在作用, 或能为治疗 NAFLD 提供新思路。

**关键词** 小细胞外囊泡, 非酒精性脂肪性肝病, 非编码 RNA, 微小 RNA, 长链非编码 RNA, 环状 RNA

**中图分类号** R34, R575.5

**DOI:** 10.16476/j.pibb.2023.0287

非酒精性脂肪性肝病 (non-alcoholic fatty liver disease, NAFLD) 被定义为甘油三酯 (triglycerides, TG) 在肝脏中过度积累 (称为脂肪变性), 没有过度饮酒史、甲状腺功能减退或药物滥用以及其他疾病导致的脂肪肝。目前, 全球 NAFLD 患病率约为 25%, 已经成为全球发病人数最多的慢性肝脏疾病<sup>[1]</sup>。NAFLD 可由简单的脂肪变性发展为非酒精性脂肪性肝炎 (non-alcoholic steatohepatitis, NASH) 和肝纤维化, 其特征是肝脏炎症和球囊化, NASH 可进一步发展为肝硬化和肝细胞癌<sup>[2]</sup>。NAFLD 是一种具有肝外表现和各器官受累的代谢性疾病, 与常见的代谢紊乱有关, 如肥胖、心血管疾病、慢性肾脏病、胰岛素抵抗、2 型糖尿病 (type 2 diabetes, T2DM)、高血压、高血脂等, 这些疾病参与 NAFLD、NASH 病程进展<sup>[3]</sup>。NAFLD 患病率高, 是导致终末期肝病、原发性肝癌和肝移植的重要原因, 已成为目前全球肝脏相关死亡率增长最快的疾病, 造成巨大的社会和经济负担<sup>[4]</sup>。

NAFLD 的诊断具有挑战性, 由于血清学检测和成像技术无法区分脂肪变性和 NASH, NAFLD 的检测一般采用肝活检, 用于区分脂肪变性和

NASH。然而, 肝活检会增加出血和并发症的风险, 不建议做为常规技术使用<sup>[5]</sup>。因此需要一种具有高灵敏度和特异性的生物标志物来诊断 NAFLD。血浆生物标志物临床筛查的速度和方便性等具有一定优势。目前, 有研究发现, 细胞外囊泡 (extracellular vesicles, EVs) 及其内容物可能是疾病的潜在生物标志物。Zhang 等<sup>[6]</sup>发现, 损伤调节的自噬调节剂 (damage-regulated autophagy modulator, DRAM) 能够诱导溶酶体透膜化进而促进 NAFLD 肝细胞 EVs 的释放; Chen 等<sup>[7]</sup>发现, 间充质干细胞来源的 EVs 中的 miR-512-3p 可以通过调节 Keap1 抑制氧化低密度脂蛋白诱导的血管内皮细胞功能障碍, 从而预防动脉粥样硬化。这表明, EVs 不仅可以对疾病进行诊断, 并且具有疾病预防和治疗潜力。大多数生物体液都含有 EVs, 可通过生物液体取样获得其组分, 进而通过对 EVs 多组分的分析来诊断确定疾病进展或实施治疗<sup>[8]</sup>。

\* 国家自然科学基金 (81460167), 云南省“兴滇英才支持计划” (YNWR-QNBJ-2018-126) 和云南省应激与神经系统损伤创新团队 (202305AS350011) 资助项目。

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收稿日期: 2023-07-20, 接受日期: 2023-09-15

## 1 小细胞外囊泡 (sEVs)

EVs是由磷脂双分子层分隔成纳米大小的颗粒,可以从所有类型的细胞中自然释放出来。传统分类方式也定义为:外泌体(exosomes)、微囊泡(microvesicles)、凋亡小体(apoptotic bodies)与核外颗粒体(ectosomes)<sup>[9]</sup>(表1)。随着越来越多类型的EVs被发现,更多的分类方式被使用。直径介于40 nm~200 nm的小细胞外囊泡(small EVs, sEVs),直径大于200 nm的中等/大细胞外囊泡

(medium/large EVs, m/l EVs),或可根据其高、中、低密度来进行分类。也可根据其表面是否携带特异性生物化学成分进行分类,如CD63<sup>+</sup>/CD81<sup>+</sup>-EVs、膜联蛋白A5(annexin A5)标记的EVs等,或根据来源条件或细胞起源可分为足细胞外囊泡(podocyte EVs)、缺氧细胞外囊泡(hypoxic EVs)、肿瘤小体(large oncosomes)、凋亡小体等,这些更加精准的描述取代了传统的外泌体、微囊泡等术语<sup>[10]</sup>。但目前在不同的研究中小EV或大EV仍被称为外泌体、微泡或微粒。

Table 1 Major type of extracellular vesicles

表1 细胞外囊泡主要类型

类型	直径/nm	外膜标志物	内含物	参考文献
外泌体	30~100	CD9、CD63、CD81、HSP70、TSG101、ALIX等	蛋白质、脂质、DNA、RNA等	[11]
微囊泡	100~1 000	整合素、CD40L、膜联蛋白A1等	胞浆蛋白、RNA	[12]
凋亡小体	500~2 000	组蛋白H3、膜联蛋白V等	核蛋白、细胞器	[13]
核外颗粒体	50~200	蛋白水解酶、CR1	脂质	[9]

HSP70: 热休克蛋白70; TSG101: 肿瘤易感基因101蛋白; ALIX: 细胞凋亡相关基因2相互作用蛋白X; CR1: 补体受体1。

外泌体最初是Pan和Johnston在1983年对绵羊网织红细胞向成熟红细胞转化的机制研究中发现,在较长一段时间内被认为是细胞分泌的废弃物,直至1987年Johnstone将其命名为“exosome”<sup>[14-16]</sup>。由于其直径和发生方式的不同,分为4个亚群:外泌体(直径30~100 nm)、微泡(直径100~1 000 nm)、凋亡小体(直径500~2 000 nm)和肿瘤小体(oncosomes,直径1~10 μm)。本文阐述的外泌体即sEVs是均匀的囊泡,起源于多囊泡体(multivesicular bodies, MVBs),在生物发生和表面蛋白表达方式的基础上,外泌体与其他类型的EVs,如微囊泡和凋亡小体不同<sup>[17]</sup>。sEVs是由多泡体与细胞膜融合后释放的一类EVs,是EVs的重要组成部分,可从人体血液、尿液、精液和唾液等多种体液中获得,也可从培养的细胞中提取<sup>[18]</sup>。

sEVs直径范围40~200 nm,是最小的EVs,它主要来源于细胞内溶酶体微粒内陷形成的晚期核内体,经核内体外膜与细胞膜融合后释放到胞外基质中,是内体循环途径的产物<sup>[19]</sup>。sEVs能够携带大量信息及大分子,可以在相邻和远端细胞之间传递蛋白质和遗传信息,供体细胞利用sEVs将外源性物质,如蛋白质、酶、mRNAs、非编码RNA和脂质转移到受体细胞,是细胞间通信的介质,并对细

胞产生各个方面的生物学影响<sup>[20]</sup>。sEVs的临床重要性已经在癌症免疫治疗中得到证实,其可装载多种药物,包括siRNA、反义寡核苷酸(antisense oligonucleotide, ASO)、化疗药物和免疫调节剂,并实现靶向递送<sup>[21-22]</sup>。sEVs中携带的microRNAs(miRNAs)具有重要的表观遗传功能,它们可以在转录后调控基因表达,改变受体细胞表型<sup>[23]</sup>。大多数细胞外miRNAs通过sEVs分泌。脂毒性脂肪损伤的肝细胞产生富含miR-17和miR-92的sEVs,这些sEVs被肝星状细胞(hepatic stellate cells, HSCs)吸收,最终产生纤维化<sup>[24]</sup>。有研究发现,脂毒性肝细胞中释放外泌体miR-27a,并特异性传递给经受体激活的造血干细胞,患代谢相关脂肪肝病(metabolic associated fatty liver disease, MAFLD)的患者和小鼠的血清中外泌体miR-27a水平显著升高,并与肝纤维化呈正相关。肝细胞sEVs miR-27a的表达可作为MAFLD相关肝纤维化的潜在诊断标志物和治疗靶点<sup>[25]</sup>。尽管sEVs内容物和携带物被不断地重新定义,但其具有显著的优势和独特性,在各种生理和疾病中将其作为一些疾病诊断标志物和治疗靶点已经得到广泛认可<sup>[26]</sup>。

## 2 sEVs的生物发生

sEVs是内吞体通过内吞作用获得的产物，通过质膜内陷形成内吞泡，将蛋白质、核酸和一些相关分子摄取到包裹体中并形成早期内体，早期内体随后成熟为晚期内体或多囊泡体，在此期间，内体的外膜内陷形成直径约50~90 nm的囊泡，这些囊泡被称为腔内囊泡 (intraluminal vesicles, ILV) [27-28]。这些形成ILV的MVBs将有两种命运。其一，MVB与质膜融合，将ILV作为sEVs传递到细胞外。另一条途径与包含降解途径的溶酶体融合进行降解 (图1) [29]。

sEVs的发生与蛋白质货物分选密切相关。MVB的形成取决于运输所需的内体分选复合物

(endosomal sorting complex required for transport, ESCRT-0、-I、-II和-III) [30]。ESCRT复合物是细胞质蛋白，参与MVBs生物发生过程中的膜出芽或弯曲，ESCRT-0复合物泛素化后，ESCRT-I和-II复合物会导致膜变形向内出芽，ESCRT-III与囊泡蛋白分选 (vacuolar protein sorting, Vps4) 相互作用，脂质和核酸分选到成熟的囊泡中形成ILV [31]。有新的证据发现，对于sEVs的形成和货物装载，可能存在一种不依赖于ESCRT的途径，该途径使用质膜中基于脂筏的脂质微结构域和相关蛋白质，如四跨膜蛋白超家族 (CD63、CD9、CD81、CD82等) 可诱导膜变形，形成囊泡，各种脂质修饰酶如鞘磷脂酶产生促进囊泡形成的神经酰胺，神经酰胺是一种鞘脂，可诱导膜自发出芽形成ILV [32-33]。

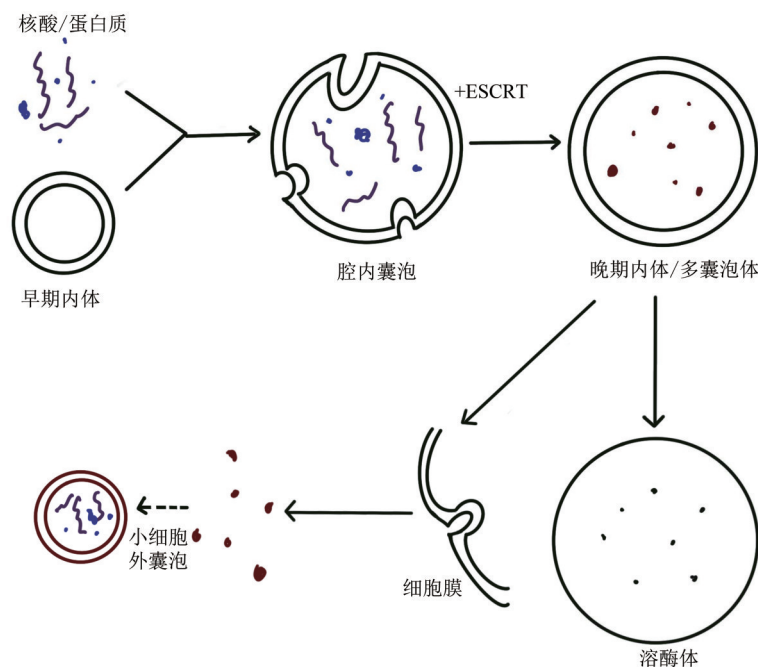


Fig. 1 The formation process of the sEVs

图1 小细胞外囊泡形成过程

sEVs具有其生物发生中所需的特异性蛋白，如网织红细胞上的整合素、四跨膜蛋白、钙调素蛋白 (calmodulin, CAM)、转铁蛋白受体 (transferrin receptor, TfR) 以及树突状细胞和B细胞上的主要组织相容性复合体 (major histocompatibility complex, MHC) [34]。CD9、CD63、CD81、热休克蛋白70 (heat shock proteins 70, HSP70) 常用于免疫印迹或纳米流式来标记识别sEVs，细胞凋亡相关基因2相互作用蛋白X (apoptosis-linked gene 2-interacting protein X,

ALIX)、热休克蛋白84 (heat shock proteins 84, HSP84) 和肿瘤易感基因101蛋白 (tumor suppressor gene 101, TSG101) 用于运输机制 [11]。sEVs中还存在Rab蛋白，Rab蛋白是鸟苷酸三磷酸酶 (GTPases) 家族的一种，调节sEVs与受体细胞融合。有研究发现，Rab27a和Rab27b可以促进多囊泡内体 (multivesicular endosomes, MVEs) 靶向细胞外周并与质膜对接，在sEVs分泌中发挥关键作用 [35]。

### 3 sEVs在NAFLD中的生物学作用

近年来,对EVs的研究发现,在不同细胞类型和多种生物体中已经鉴定出多种蛋白质、脂质、DNA、mRNA、miRNAs和其他非编码RNA,再次证明了EVs的复杂性。sEVs中其他分子与非编码RNA具有功能上的差异。并非所有sEVs都含有相似丰度的特定内容物,其中sEVs非编码RNA(尤其是miRNA)在sEVs中较容易观察到。sEVs蛋白质组学分析揭示了其标记物异质性,sEVs蛋白质组也可以显示来源细胞;同时sEVs表面蛋白对细胞表面受体的识别不同,可能导致其在不同的靶细胞类型中的不同功能。sEVs DNA的来源目前尚不明确,推测外泌体DNA主要通过两种形式产生:基因组DNA损伤修复生成的单链或者双链小片段DNA或临近细胞凋亡产生的片段DNA<sup>[36]</sup>。对于sEVs中DNA的主要研究集中于免疫反应、炎症反应及肿瘤等领域<sup>[37]</sup>。真核细胞中,sEVs可在极少数情况下将mRNA传递给受体细胞<sup>[38]</sup>。相比之下,sEVs特殊的膜结构能够保护其内部非编码RNA免

受酶降解,其含量相对于体液非编码RNA更稳定,浓度更高,这一特点决定sEVs可以参与细胞各种生理病理活动的调控过程。

#### 3.1 sEVs与细胞间通讯

细胞间通讯是指细胞间利用连接子、旁分泌或细胞与细胞之间的直接接触进行相互通讯以及传递各种信息<sup>[39]</sup>。sEVs可以通过3种方式实现细胞间通讯。a. sEVs可以通过膜蛋白与靶细胞上的膜蛋白相互结合,激活靶细胞中的信号通路。b. 在细胞外基质中,蛋白酶可以将sEVs膜蛋白裂解,裂解后得到的片段作为配体与细胞膜上的受体结合,进而激活细胞中信号通路。c. sEVs膜直接与靶细胞膜融合,非选择性地释放内含物,如蛋白质、核酸等信息物质(图2)<sup>[40]</sup>。sEVs携带大量遗传信息及分子物质,可以参与细胞间物质运输和信息传递,以此改变细胞生理状态,免疫反应、脂质代谢紊乱、中枢神经系统相关疾病和肿瘤进展均与sEVs相关,sEVs作为细胞间通讯的介质参与了细胞间物质运输和信息传递等,促进或抑制疾病发展<sup>[22]</sup>。随着相关研究的不断深入,sEVs有望成为疾病诊断、治疗以及预后评估的一种标志物。

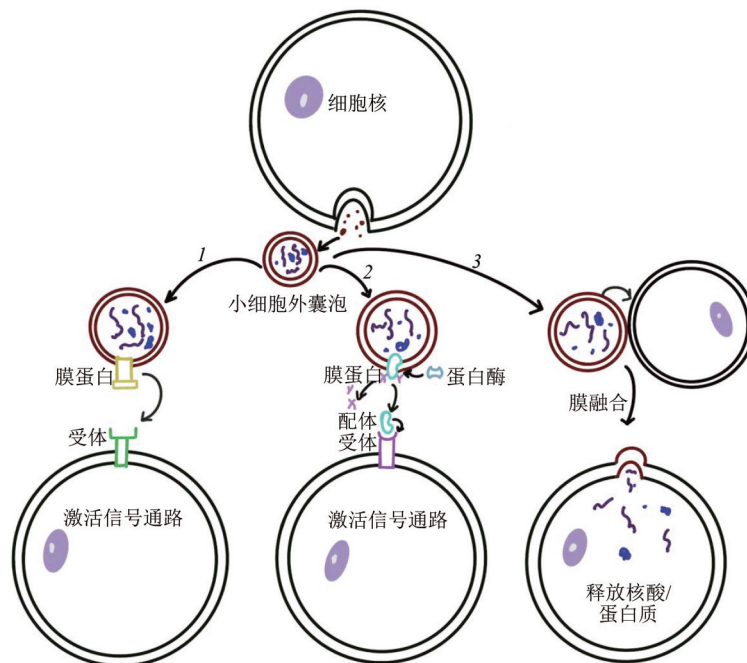


Fig. 2 Three mode of intercellular communication mediated by sEVs

图2 小细胞外囊泡介导细胞间通讯的方式

## 3.2 sEVs携带的非编码RNA在NAFLD中的生物学功能

### 3.2.1 sEVs miRNAs

sEVs进行循环时,细胞会吸收sEVs内包含的RNA,随后调节受体细胞生物学活动,因此在细胞间基因调控中sEVs得到更多关注。miRNAs作为长度约为22个核苷酸的内源性非编码RNA,在转录后表达调控中发挥作用,细胞增殖分化、迁移、疾病发生和疾病进展都与miRNAs有关。通过循环囊泡传递信息,被认为是细胞间信号交流的第三种途径<sup>[41]</sup>。miRNAs可通过装载在sEVs中转运至胞外,来抵制内源性核酸酶的降解作用,从而在体液中保持稳定性,其表达谱可在多种生理和病理条件下发生变化<sup>[42]</sup>。sEVs在肝脏疾病发生发展过程中发挥着重要作用。异常调节的miRNAs参与了NAFLD的发病机制,使肝脏产生脂质代谢紊乱、胰岛素抵抗、氧化应激、炎症反应和纤维化<sup>[43]</sup>。miR-122是成人肝脏中表达最多的miRNA,它占据总miRNA的70%,能够调节血清总胆固醇和脂质代谢,维持肝细胞表型。在NAFLD中miR-122的表达显著上调,通过靶向固醇调节元件结合蛋白1c (sterol regulatory element binding protein-1c, SREBP1-c)、去乙酰化酶1 (sirtuin 1, SIRT1)和过氧化物增殖激活受体 $\alpha$  (peroxisome proliferator-activated receptor  $\alpha$ , PPAR $\alpha$ ),造成肝脂质代谢紊乱和肝脂肪变性<sup>[44]</sup>。有研究发现,利用反义寡核苷酸抑制miR-122的功能,导致饮食诱导的肥胖小鼠肝脏脂肪酸氧化增加,脂肪合成相关基因SREBP1、FASN表达水平显著下降,并且肝脏脂肪变性得到改善<sup>[45]</sup>。从NAFLD患者血清中收集sEVs,提取sEVs miRNA并测序,共鉴定出2 588个miRNA。NAFLD组和对照组之间80个miRNA的表达显著不同,分析结果表明miR-122在NAFLD中发挥重要作用<sup>[46]</sup>。在建立高脂肪、高果糖饮食诱导的大鼠模型和棕榈酸 (palmitic acid, PA) 诱导的体外NAFLD模型中,脂肪细胞来源的外泌体 (adipocytes-derived exosomal, ADEs) 在体内外均含有丰富的miR-122,并促进脂肪生成,损害肝细胞存活,增强肝损伤,提高血脂水平,并且发现miR-122直接与Sirt1的3'非翻译区 (untranslated regions, UTR) 结合以抑制其表达<sup>[47]</sup>。肝细胞来源的sEVs可以诱导HSC活化,导致肝纤维化,miR-128-3p抑制HSC中PPAR $\gamma$ 的表

达,诱导HSC活化,促纤维化基因平滑肌肌动蛋白 ( $\alpha$ -smooth muscle-actin,  $\alpha$ -SMA)、基质金属蛋白酶抑制因子2 (tissue inhibitor of metalloproteinases-2, TIMP-2) 表达增加,产生肝纤维化<sup>[48]</sup>。因此,异常调节的肝脏sEVs miRNA释放将导致NAFLD和肝纤维化等慢性疾病的发生,这些sEVs可作为患者早期诊断和预后评估的生物标志物。

### 3.2.2 sEVs lncRNAs

除了常见的miRNAs外,长链非编码RNA (long non-coding RNA, lncRNA) 也可能参与sEVs功能。lncRNA是指一类长度超过200个核苷酸且大多数表达的转录本不具有编码蛋白质功能的RNA<sup>[49]</sup>。在对sEVs lncRNA能否作为疾病诊断及治疗的相关研究中,有研究发现lncRNA可以作为NAFLD中重要的调控因子,在人源化肝脏来源的sEVs中检测到linc01370的特异性高表达,linc01370可作为临床测试的候选生物标志物<sup>[50]</sup>。下调lncRNA-HOTAIR后总胆固醇 (total cholesterol, TC) 和TG含量受到抑制,提示HOTAIR可能是NAFLD关键调控因子<sup>[51]</sup>。lncRNA-HOTAIR可促进肝肿瘤细胞 (hepatocellular carcinoma, HCC) sEVs分泌,在HOTAIR高表达组中发现了sEVs分泌相关基因的富集,HOTAIR通过诱导MVBs转运到质膜来促进sEVs的释放,HOTAIR调节Ras相关蛋白35 (Ras-related protein Rab-35, RAB35) 的表达和定位,从而控制对接过程。此外,HOTAIR通过影响囊泡相关膜蛋白3 (vesicle associated membrane protein 3, VAMP3) 和突触体相关蛋白23 (synaptosome associated protein 23, SNAP23) 共定位促进了MVBs与质膜融合的最后一步<sup>[52]</sup>。

lncRNAs还可以通过与miRNAs结合来调节NAFLD进展。在HepG2细胞中HOTAIR与miR-130b-3p结合,而Rho相关卷曲螺旋形成蛋白激酶1 (Rho-associated coiled-coil kinase 1, ROCK1) 是NAFLD中miR-130b-3p的下游mRNA,因此HOTAIR可以通过miR-130b-3p/ROCK1轴调控脂质积累,这为NAFLD的治疗提供了新思路<sup>[53]</sup>。Bu等<sup>[54]</sup>发现了lncRNA NEAT1在NAFLD的作用机制,NEAT1是NAFLD的调控因子,在高脂饮食诱导大鼠NAFLD模型中,NEAT1表达升高,并伴有脂肪酸合酶 (fatty acid synthase, FAS) 表达异

常, 敲低NEAT1后可以通过调控脂质和胰岛素信号转导的mTOR/S6K1信号通路来降低FAS的表达。NEAT1可能是miR-140的靶点, 在HepG2细胞中, 敲除miR-140后抑制了NEAT1的表达, 减少了脂质积累。NEAT1还参与了NAFLD病程进展中的纤维化和炎症反应, 在NAFLD中, NEAT1直接或间接靶向AMPK/SREBP-1和GLI家族锌指3 (GLI family zinc finger 3, GLI3), 促进纤维化和炎症反应。另有研究, 评估了血清sEVs lncRNA NEAT1对急性慢性乙型肝炎肝功能衰竭 (acute-on-chronic hepatitis B liver failure, ACHBLF) 90 d死亡率的预测价值<sup>[55]</sup>。胆管细胞来源的sEVs lncRNAs H19在胆汁淤积性肝损伤中起重要作用。来自野生型小鼠的原代胆管细胞的携带H19的sEVs可抑制肝细胞中小异二聚体伴侣 (small heterodimer partner, SHP) 表达, 但来自H19<sup>-/-</sup>小鼠胆管细胞的sEVs无抑制效果; 移植携带H19的老年纤维化多耐药基因2 (multidrug resistance 2, Mdr2<sup>-/-</sup>) 小鼠血清来源的sEVs显著促进了年轻Mdr2<sup>-/-</sup>小鼠的肝纤维化<sup>[56]</sup>。综上所述, 不同来源的sEVs lncRNA通过作用基因靶点, 对通路功能的调控尤为重要, 为临床诊断和治疗提供新思路。

### 3.2.3 sEVs circRNAs

环状RNA (circular RNAs, circRNAs) 是一类内源性非编码RNA, 区别于传统线性RNA。通过线性RNA反向剪接共价连接产生。circRNAs具有较高的稳定性和保守性, sEVs circRNAs有望成为肝脏肿瘤等重大疾病诊断的标志物和治疗靶点<sup>[57]</sup>。在对HCC研究中发现, 以环状形式存在的

circRNA PTGR1可以调节HCC肿瘤转移。miR-449a在细胞分化和肿瘤抑制中发挥重要作用, 其过表达可以抑制HCC细胞迁移和侵袭, 而miR-449a的靶点MET可以促进HCC发展, circRNA PTGR竞争性结合miR449a, 从而促进MET表达, 破坏肿瘤微环境稳态。PTGR1通过影响受体细胞的miR449a-MET通路, 增强了肿瘤细胞的转移能力<sup>[58]</sup>。自然杀伤细胞 (natural killer cell, NK细胞) 是机体重要的免疫细胞, 在先天性抗肿瘤免疫应答中起关键作用。sEVs circRNA UHRF1主要由HCC细胞分泌, 并通过诱导HCC中NK细胞功能障碍抑制免疫应答<sup>[59]</sup>。T细胞免疫球蛋白和黏蛋白域3 (T cell immunoglobulin domain and mucin domain-3, TIM-3) 是一种免疫调节受体, 可与肿瘤细胞和微环境上的配体结合, 抑制多种癌症的抗肿瘤免疫<sup>[60]</sup>。UHRF1在HCC来源的sEVs中高表达, sEVs作为细胞间通讯的重要媒介, 可以将sEVs UHRF1传送到NK细胞中, UHRF1通过与miR-449c-5p结合上调TIM-3的表达, 抑制NK细胞产生IFN- $\gamma$ 和TNF- $\alpha$ 的能力, 从而损害NK细胞功能, 促进HCC进展<sup>[59]</sup>。目前, circRNA已经成为研究的新热点, 在疾病诊断、治疗及预后评估的临床价值受到广泛关注。

sEVs所携带的非编码RNA是细胞间交换物质、传递信息的重要信使, 可以在NAFLD中发挥重要作用。大量研究表明, sEVs中非编码RNA作为新型生物学标志物和关键调控因子参与肝脏疾病的发生发展及在预后评估中占据独特优势 (表2, 图3)。

Table 2 Role of non-coding RNA in sEVs in liver disease

表2 小细胞外囊泡中非编码RNA在肝脏疾病中的作用

非编码RNA	作用	靶点	参考文献
miR-27a	调节脂质积累	PPAR $\gamma$ , CPT1B	[61]
	促进MAFLD肝纤维化	PINK1	[25]
miR-33a/b	参与胆固醇代谢及HCC	SREBP-2	[62]
miR-122	参与胆固醇代谢及HCC	SREBP1-c, SIRT1, PPAR $\alpha$ , FASN	[44]
miR-128-3p	促进NAFLD肝纤维化	PPAR $\gamma$ , TIMP-2, $\alpha$ -SMA	[48]
miR-193a-5p	调节HCC增殖和凋亡	BMF	[63]
miR-199, miR-483-3p	NAFLD标志物		[62, 64]
miR-122-5p, miR-146b-5p, miR-197-3p	鉴定脂肪变性程度		[62]
miR-199a-5p	促进肝脏脂质积累	MST1, SREBP-1C, AMPK	[65]
miR-582-3p	促进HCC进展	DLX2	[66]
miR-1297	调控HCC进展	EZH2, HMGA2, PTEN/PI3K/AKT	[67]
	促进MAFLD肝纤维化		

续表2

非编码RNA	作用	靶点	参考文献
lncRNA HOTAIR	调控脂质积累	miR-130b-3p/ROCK1	[53]
lncRNA NEAT1	促进纤维化和炎症反应	AMPK/SREBP-1、GLI3	[54]
circRNA PTGR	促进HCC进展	结合miR449a调控MET	[58]
circRNA UHRF1	促进HCC进展	结合miR-449c-5p调控TIM-3	[59]
circRNA 100338	促进HCC转移	NOVA2	[68]
circRNA 100284	诱导细胞周期加速并促进增殖	结合miRNA-217调控EZH2	[69]

PPAR $\gamma$ : 过氧化物酶体增殖物激活受体 $\gamma$  (peroxisome proliferator activated receptor); SREBP-2: 胆固醇调节元件结合蛋白2 (sterol regulatory element binding protein 2); PPAR $\alpha$ : 过氧化物酶体增殖物激活受体 $\alpha$  (peroxisome proliferator activated receptor  $\alpha$ ); FASN: 脂肪酸合成酶 (fatty acid synthase); BMF: Bcl2 修正因子 (Bcl2 mammalian sterile 20-like kinase identifying factor); MST1: 蛋白激酶 (mammalian sterile 20-like kinase 1); AMPK: 腺苷酸活化蛋白激酶 (adenosine 5'-monophosphate(AMP)-activated protein kinase); DLX2: 同源盒转录因子基因2 (distal-less homeobox 2); EZH2: ZEST2多梳抑制复合物2亚单位增强子 (enhancer of zeste 2 polycomb repressive complex 2 subunit); HMGA2: 高迁移率蛋白A2 (high mobility group AT hook protein 2); PTEN: 同源磷酸酶-张力蛋白 (phosphatase and tensin homolog); PI3K: 磷脂酰肌醇3激酶 (phosphatidylinositol-3-kinase); AKT/PKB: 丝氨酸/苏氨酸蛋白激酶B (protein kinase B); ROCK1: Rho相关卷曲螺旋形成蛋白激酶1 (Rho-associatedcoiled-coil kinase 1); MET: 间质上皮转化因子 (mesenchymal-epithelial transition factor); TIM-3: T细胞免疫球蛋白和黏蛋白域3 (T cell immunoglobulin domain and mucin domain-3)。

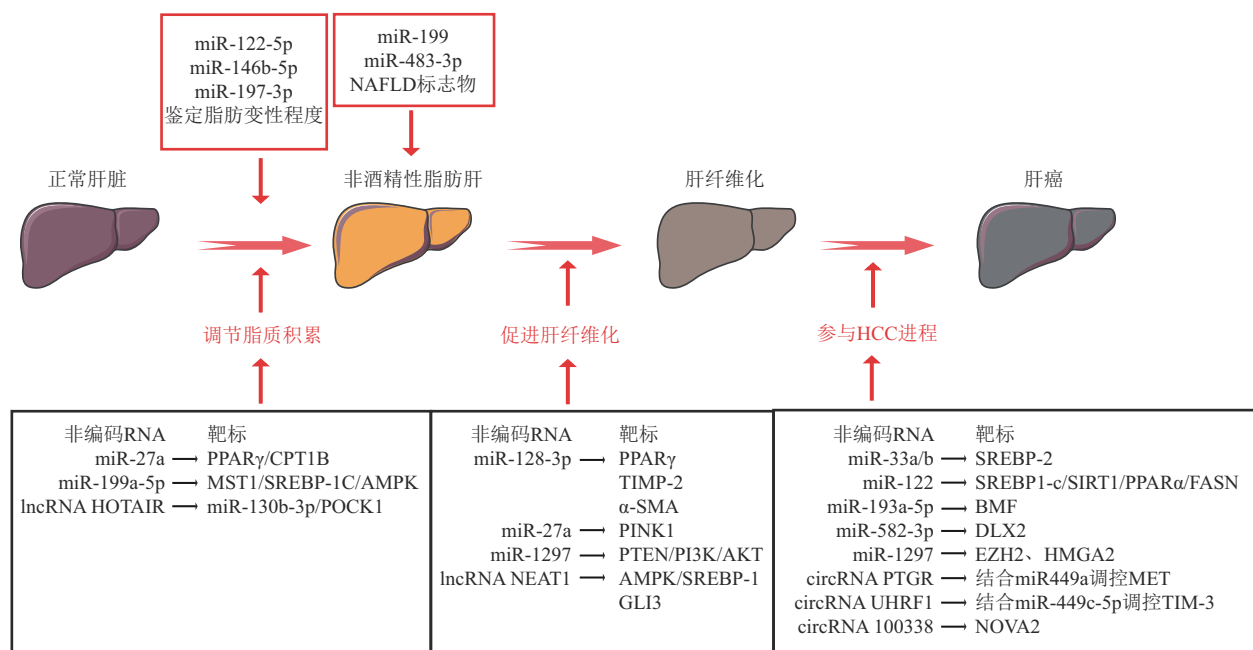


Fig. 3 Role of non-coding RNA in sEVs in liver disease

图3 小细胞外囊泡中非编码RNA在肝脏疾病中的作用

### 3.3 不同来源sEVs调控NAFLD进展的机制

#### 3.3.1 血清来源的sEVs

由于外周血微环境复杂, sEVs miRNAs 受到磷脂双层结构的保护比 sEVs 外游离 miRNAs 稳定性更高, 有研究利用 NAFLD 患者和健康人群血清 sEVs miRNAs 表达差异谱来探究 miRNAs 在 NAFLD 中的作用, 发现 sEVs hsa-miR-122-5p、

hsa-miR-146b-5p、hsa-miR-197-3p 表达差异在 5 倍以上且能够鉴定肝脂肪的变性程度, hsa-miR-483-3p 可以区分 NAFLD 和健康人群<sup>[70]</sup>。血清 sEVs miR-27a 也可能在 NAFLD 病理病程中发挥作用。miR-27a 作为 miRNA-27 家族的成员, 是一种与脂质代谢相关性最高的 miRNA, 参与脂肪细胞分化和 TG 合成, 但 miR-27a 在人和啮齿类动物脂肪细

胞的脂质代谢中过表达, 加速了脂肪释放和TG水解, 导致更多游离脂肪酸 (free fatty acid, FFA) 释放, 这也被认为是肝脏变性的一个重要原因。PPAR $\gamma$ 是脂肪细胞分化的关键转录因子, miR-27a可以与PPAR $\gamma$ 结合, 对其表达产生影响, 调节脂质分解和合成代谢。肉碱棕榈酰转移酶1B (carnitine palmitoyltransferase 1B, CPT1B)是肉碱棕榈酰转移酶 (carnitine palmitoyltransferase, CPT) 的一个亚型, 在调节脂肪分解和能量供应中有着重要作用, CPT1B下调导致脂肪酸氧化受损, TG含量变化也与CPT1B表达水平有关, 并且CPT1B是PPAR $\gamma$ 信号通路的下游, 因此, miR-27a可以通过靶向CPT1B调控脂肪细胞的脂质积累<sup>[46, 61, 71-72]</sup>。由于部分NAFLD患者的病程进展可以发展为HCC, 因此对HCC的防治也十分重要。血清来源的sEVs circRNA 100338在HCC中过表达, NOVA选择性剪接调节因子2 (RNA-binding protein Nova-2, NOVA2)是一种调节RNA转录后修饰的RNA结合蛋白, circRNA 100338可以与NOVA2相互作用来调节HUVEC细胞增殖、血管生成和通透性, 促进HCC转移<sup>[68]</sup>。血清来源sEVs miR-27a可以在NAFLD的诊断和治疗中发挥作用, sEVs circRNA 100338为疾病治疗提供思路。

### 3.3.2 肝细胞来源的sEVs

肝细胞、造血干细胞和巨噬细胞都可以分泌sEVs或者作为sEVs的靶细胞, 它们之间的相互作用可以影响肝纤维化, sEVs作为细胞间通讯载体, 在调节肝纤维化中发挥重要作用<sup>[73]</sup>。PA是一种饱和的FFA, 可以利用PA诱导肝细胞损伤, 在经PA处理的肝细胞来源的sEVs中发现miR-107表达明显上调<sup>[74]</sup>。有证据表明, 经PA处理肝细胞的分泌的sEVs可能通过miR-107调节肝星状细胞表型, 影响疾病发生。肝细胞分泌的sEVs诱导细胞增殖, 上调LX-2细胞中促纤维化基因 ( $\alpha$ -SMA和*Col1a1*)表达, 导致造血干细胞被活化, 进而TLR3被激活, 增强了 $\gamma\delta$ T细胞产生白介素-17 (interleukin 17, IL-17), 从而加剧肝纤维化的产生<sup>[75-76]</sup>。HSCs激活是NAFLD中肝纤维化发生的关键诱导物, Wnt信号可以增强造血干细胞的活化来促进肝纤维化, 而miR-107靶向Wnt通路中的Dickkopf相关蛋白1 (Dickkopf-related protein 1, DKK1), 肝细胞分泌的sEVs可以将miR-107转移到LX-2细胞中, 从而抑制DKK1表达, 激活Wnt,

进而激活LX-2细胞, 导致肝纤维化产生<sup>[75, 77]</sup>。

## 4 sEVs在NAFLD诊断及治疗中的应用

sEVs对于NAFLD的诊断、预后评估和治疗指导尤为重要, 科研工作者们也开展了大量的研究。针对NAFLD患者血清外泌体miRNAs表达谱的初步分析及功能的研究发现: 在肝脏发生轻度脂肪变性时hsa-miR-122-5p、hsa-miR-146b-5p、hsa-miR-197-3p的表达有所增加, 并且与脂肪变性程度呈现正相关<sup>[67]</sup>; sEVs miRNA可用于肝脂肪变性程度的初步判断; hsa-miR-483-3p的表达较健康人群增加, 通过其可鉴定出NAFLD患者与健康人群<sup>[70]</sup>。miR-27a作为一种与脂质代谢相关性最高的miRNA-27家族成员, 其表达能够影响肝脏变性, 并且能与PPAR $\gamma$ 、CPT1B等参与脂质代谢稳态、能量供应的靶点结合, 参与NAFLD的病程进展, 血清sEVs miR-27a也可能在NAFLD病理病程中发挥作用<sup>[61, 71]</sup>。由此可见, sEVs在NAFLD诊断中起到一定作用, 并且小细胞囊泡或血清miRNAs参与了肝脏、脂质代谢等疾病的进展, 或许可以成为治疗NAFLD的方法。首都医科大学附属北京佑安医院采用Optima XPN-100超高速离心机从NAFLD患者血浆中提取sEVs。结果发现, NASH患者肝源性sEVs葡萄糖转运蛋白1 (glucose transporter 1, GLUT1)的百分比显著高于NAFLD患者, 并且在具有CD63和ALB的外泌体中观察到相同的趋势, 提示肝源性sEVs GLUT1可以作为NAFLD早期预警的分子生物标志物, 区分NAFLD和NASH, 也可以作为一种新的非侵入性诊断NAFLD肝纤维化分期的生物标志物<sup>[78]</sup>。采用源自年轻健康小鼠血清或棕色脂肪组织的工程外泌体治疗高脂饮食 (high-fat diet, HFD) 饲喂小鼠, 发现棕色脂肪组织工程外泌体治疗显著促进了受体细胞耗氧量, 从而缓解了HFD饲喂小鼠代谢综合征<sup>[79]</sup>。负载低密度脂蛋白受体 (low-density lipoprotein receptor, LDLR) mRNA的工程外泌体可以恢复LDLR缺陷小鼠肝脏中LDLR表达, 并挽救高胆固醇血症, 从而证明了工程外泌体可能是高胆固醇血症患者的有效治疗方法<sup>[80]</sup>。

CRISPR-Cas9基因编辑已成为一种强大的治疗技术。然而, CRISPR-Cas9缺乏安全有效的体内递送系统, 尤其是组织特异性载体。可以使用外泌体介导的CRISPR/dCas9-VP64递送来重新编程肝星



状细胞,以构建用于治疗肝纤维化的工程外泌体<sup>[81]</sup>。Wan等<sup>[82]</sup>通过sEVs介导Cas9核糖核蛋白复合物递送用于肝脏疾病的组织特异性基因治疗。

sEVs不仅介导细胞之间的通讯,还可以被改造用于递送特定物质。sEVs具有传递效率高、靶向性、内生性等独特优势,这也使其成为细胞间物质转运的重要媒介,在调节生命活动及疾病诊断和治疗中发挥着独特的生物学功能。由于sEVs低免疫原性和肝脏靶向性,工程sEVs在治疗NAFLD方面具有巨大潜力。为探索NAFLD发病机制提供了新方向,同时其也可作为临床诊断、病理病程进展及疗效监测的分子标志物<sup>[83]</sup>。

## 5 总结与展望

sEVs不仅维持内环境稳定,还影响NAFLD的发生与发展,同时作为疾病生物标志物可用于NAFLD诊断和治疗。研究sEVs及其携带的非编码RNA在NAFLD发生与发展中的作用,对于进一步阐明NAFLD的发病机制具有重要意义。携带非编码RNA的工程化sEVs有望成为良好的药物,以sEVs为靶标的治疗方法研究或将sEVs本身用作治疗工具的研究,具有良好的应用前景。目前在sEVs分离、纯化、优化、质量控制,以及sEVs与靶细胞间通信的分子机制都面临一定挑战<sup>[20]</sup>,需要进行不断深入的探索,以尽早实现临床转化,为NAFLD诊断及治疗提供新方法。

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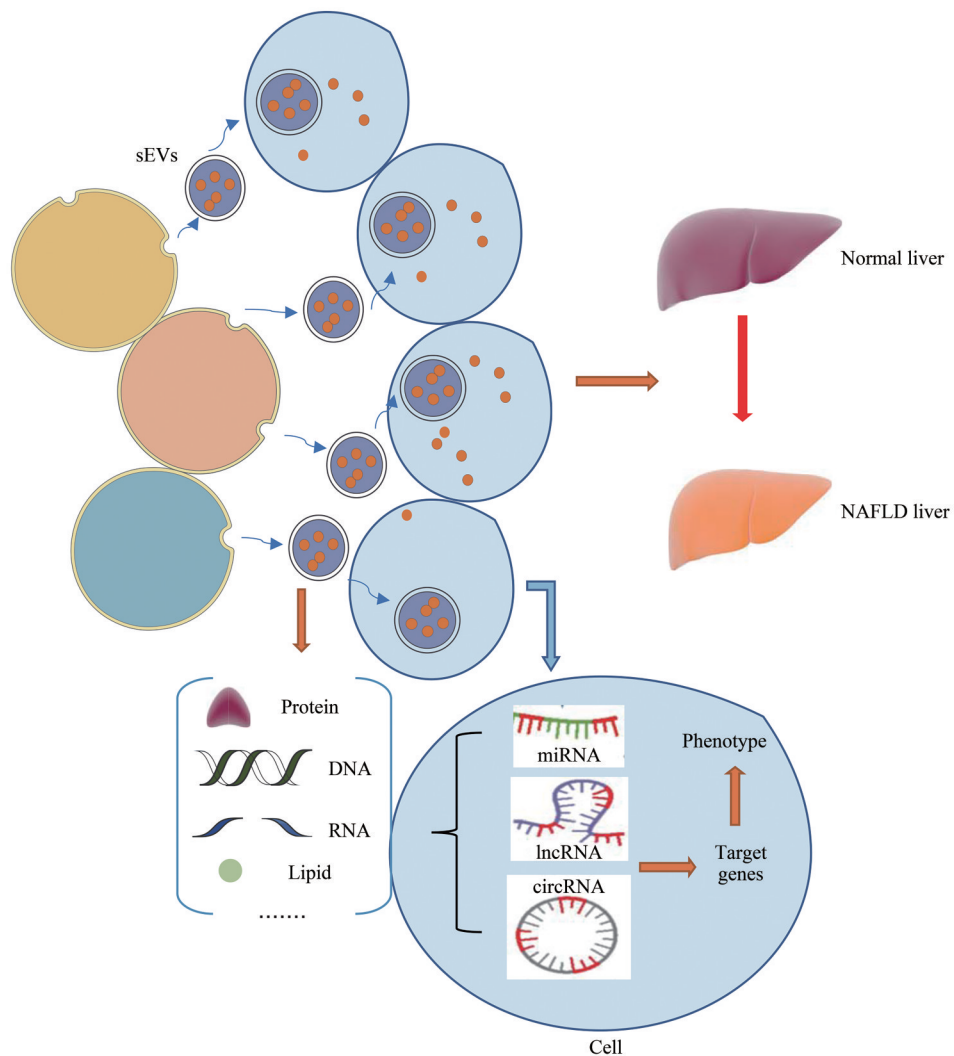
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## The Roles of Small Extracellular Vesicles and Small Extracellular Vesicles-derived Non-coding RNA in Non-alcoholic Fatty Liver Disease\*

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### Graphical abstract



\* This work was supported by grants from The National Natural Science Foundation of China (81460167), The Yunnan "Xingdian" Talent Support Project (YNWR-QNBJ-2018-126), and The Yunnan Provincial Innovation Team of Stress and Nervous System Injury (202305AS350011).

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Received: July 20, 2023 Accepted: September 15, 2023

**Abstract** Extracellular vesicles (EVs) are a kind of exosomes secreted by cells, which all cells release them as part of their normal physiology and during acquired abnormalities. EVs can be broadly divided into two categories by their sizes, small EVs (sEVs) and medium/large EVs (m/l EVs). As a kind of extracellular vesicle, sEVs are mostly discoid vesicles with diameters ranging from 40 nm to 200 nm. The medium/large EVs are elliptical with a diameter more than 200 nm. sEVs play a crucial role in intercellular communication and have emerged as important mediators in the development and progression of liver diseases. In this review, we discussed the current understanding of the role of sEVs, particularly sEV derived non-coding RNA in non-alcoholic fatty liver disease (NAFLD) and their potential as diagnostic and therapeutic targets. sEVs are small membrane-bound particles secreted by cells, which fuse with plasma membrane and release to extracellular matrix. Depending on the cell of origin, sEVs could contain many cell constituents, including various DNA, RNA, lipids, metabolites, and cytosolic and cell-surface proteins, biomolecules. In addition, many RNA and DNA molecules contained by sEVs, such as mRNA, microRNA (miRNA), long noncoding RNA (lncRNA) and mitochondrial DNA (mtDNA), can be transferred to recipient cells to effectively promote their biological response, physiological and pathological functions. Such sEVs-mediated responses can be disease promoting or restraining. The intrinsic properties of sEVs in regulating complex intracellular pathways has advanced their potential utility in the therapeutic control of many diseases. Recent studies reviewed here also indicate a functional, targeted, mechanism-driven accumulation of specific cellular components in sEVs, suggesting that they have a role in regulating intercellular communication. Many studies have also shown the involvement of sEVs' noncoding RNAs (ncRNAs) in controlling cell activities and their crucial functions in regulating lipid metabolism. sEVs ncRNAs, including miRNAs, lncRNAs, and circular RNAs (circRNAs) regulate physiological functions and maintain lipid metabolism homeostasis. miRNA are small non-coding RNA molecules that regulate posttranscriptional gene expression by repressing messenger RNA-targets. These circulating miRNAs are easily accessible, disease-specific and sensitive to small changes, which makes them ideal biomarkers for diagnostic, prognostic, predictive or monitoring purposes. Specific miRNA signatures can be reflective of disease status and development or indicators of poor treatment response in liver diseases. And lncRNAs have been shown to regulate gene expression by interacting with transcription factors or chromatin-modifying enzymes, which regulate gene expression by binding to target mRNAs. Then circRNAs contributed to NAFLD progression by acting as miRNA sponges, functional protein sponges, or novel templates for protein translation. Finally, sEVs could be engineered to deliver diverse therapeutic payloads, including short interfering RNAs, antisense oligonucleotides and so on, with an ability to direct their delivery to a desired target. The potential of targeting sEVs with lncRNAs and miRNAs not only could be potential diagnostic biomarkers for NAFLD, but also have potential therapeutic effects on NAFLD, which might provide new ideas for the NAFLD treatment. In conclusion, this review provides an overview of the current understanding of the roles of sEVs ncRNAs in NAFLD, so we suggest that further research into sEVs could lead to new diagnostic tools and therapeutic strategies for NAFLD.

**Key words** small extracellular vesicles, non-alcoholic fatty liver disease, non-coding RNAs, microRNAs, long non-coding RNAs, circular RNAs

**DOI:** 10.16476/j.pibb.2023.0287