



ABCA1基因启动子区-477C/T单核苷酸多态性在中国汉族正常人群中的分布及对血脂的影响

1999年Bodzioch等[1][2]首次明确ATP结合盒转运子A1(ABCA1)基因突变是Tangier病的病因。ABCA1不仅在Tangier病人中起重要作用,而且在正常细胞,细胞膜上的ABCA1转运细胞内的游离胆固醇、磷脂至细胞外并与载脂蛋白A-I(apoA-I)结合,形成扁平高密度脂蛋白(HDL),后者再接受游离胆固醇和磷脂形成成熟HDL,它是调节细胞内游离胆固醇、磷脂外流的限速基因[3]。此后,人们发现在冠心病病人存在ABCA1基因单核苷酸多态性(SNP),部分编码区SNP与冠心病病人血浆HDL、apoA-I水平、冠心病事件及冠脉病变程度等存在相关性[4][5]。在普通人群中,不同种族、不同地域,特定的SNP并不一定都存在,其所占的比率也不尽相同,但大约有85%是共同的[6]。2001年Lutucuta等[7]研究表明:在美国冠心病人群中,存在3个新的变异位点:-477C/T、-419A/C和-320G/C;-477C/T基因多态性与冠状动脉狭窄相关,但HDL-C及apoA-I水平仅表现为轻度减低。还有研究表明:ABCA1基因启动子区-14C>T的SNP对新加坡健康华人HDL-C也有明显影响[8]。因此,我们分析中国汉族正常人群是否存在ABCA1基因启动子区-477C/T SNP,并研究其分布及对血脂的影响。

1 对象和方法

1.1 对象

113例均中国汉族正常人,其中男70例、女43例,年龄(53.45±10.87)岁。经询问病史、体检、实验室检查(血、尿、便常规、血脂、血糖、肝、肾功能)、心电图检查排除冠心病、肿瘤、严重肝肾等疾病。为进一步分析,按年龄分为两组:(1)年龄大于或等于60岁为老年人组;(2)年龄小于60岁为中青年组。按性别分为两组:(1)男性组;(2)女性组。

1.2 方法

基因组DNA的提取:外周静脉血5 ml,ACD抗凝,用酚-氯仿法提取基因组DNA。ABCA1基因启动子区-477C/T基因型用聚合酶链反应-限制性酶切片长度多态性分析法(PCR-RFLP)分析。引物由上海生物工程有限公司合成,上游:5'-CTC GGG TCC TCT GAG GGA CCT-3',下游:5'-CCG CAG ACT CTC TAG TCC AC-3'。PCR反应体系50 μl,含提取DNA 2 μl、10×Buffer 5 μl、25 mmol/L MgCl₂ 3 μl、Taq酶2.5 U、2.5 mmol/L dNTP 4 μl、10 μmol/L引物各2 μl(Buffer、MgCl₂、Taq酶、dNTP由大连宝生物有限公司提供)。PCR反应条件:95 °C预变性120 s;94 °C变性30 s、60 °C退火60 s、72 °C延伸60 s,共35个循环;72 °C终末延伸10 min。PCR产物用特异性限制性内切酶ACIL消化,37 °C过夜。2%琼脂糖凝胶电泳分析结果。临床指标测定:体重指数(BMI)=体重/身高²;空腹血糖、甘油三脂(TG)、总胆固醇(TC)、高密度脂蛋白(HDL-C)、低密度脂蛋白(LDL-C)、极低密度脂蛋白(VLDL-C)、肝肾功能均由自动生化分析仪测量。

1.3 统计学处理

用SPSS10.0统计软件分析,不同基因型与临床相关指标的比较用方差分析,基因型与分组的比较采用 χ^2

检验。

2 结果

2.1 ABCA1基因启动子区-477C/T SNP在中国正常人群中的分布

ABCA1基因启动子区PCR扩增产物长度为351 bp。凝胶分析(图1)显示为一条351 bp的DNA条带。经ACIL酶切后为3种基因型,分别是CC、CT、TT基因型。CC基因型有148、130、73 bp三个片段,其中148、130 bp两条带因为相对分子质量接近而显示为一条带,故显示为两条带;CT基因型含278、148、130、73 bp四个片段,显示为三条带;TT基因型含278、73 bp两个片段,显示为两条带。ABCA1基因-477C/T SNP在中国正常人群中的分布为:CC基因型37.2%(42例),CT基因型46.9%(53例),TT基因型15.9%(18例)。

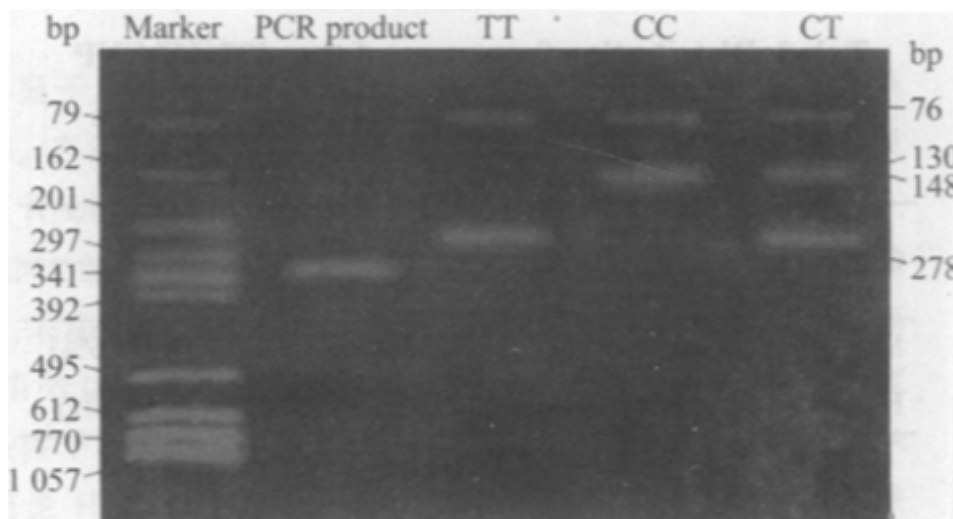


图1 PCR产物及ACIL限制性内切酶酶切产物2%琼脂糖电泳图

Fig.1 2% agarose gel electrophoretogram of the PCR and ACIL restriction endonuclease digestion products

2.2 ABCA1基因启动子区-477C/T SNP与临床指标的关系

结果(表1)显示:TT基因型与CC基因型相比,血浆HDL-C水平明显降低($P < 0.05$),但TT基因型与CT基因型、CT基因型与CC基因型相比差异无显著性($P > 0.05$)。三种基因型间TC、TG、LDL、VLDL及BMI差异无显著性($P > 0.05$)。

表 1 ABCA1 基因启动子区 -477C/T SNP 与临床指标的关系

Tab.1 Relation between the clinical indexes and -477C/T single nucleotide polymorphism (SNP) in the promoter region of ATP-binding cassette transporter 1 gene

Index	Genotype		
	CC	CT	TT
TC (mmol/L)	4.59±0.79	4.66±0.86	4.54±0.77
TG (mmol/L)	1.39±0.47	1.45±0.68	1.41±0.71
HDL-C (mmol/L)	1.32±0.34	1.28±0.24	1.13±0.23*
LDL (mmol/L)	2.39±0.58	2.48±0.64	2.33±0.49
VLDL(mmol/L)	1.02±0.28	1.01±0.26	0.99±0.21
BMI (kg/m ²)	23.94±2.01	23.46±2.67	23.86±2.77

* $P < 0.05$ vs CC. TC: Total cholesterol; TG: Triglyceride; HDL-C: High-density lipoprotein cholesterol; LDL: Low-density lipoprotein; VLDL: Very low-density lipoprotein; BMI: Body mass index

2.3 ABCA1基因启动子区-477C/T SNP与年龄的关系

结果(表2)显示: ABCA1基因启动子区-477C/T SNP在两个年龄组的分布差异无显著性意义($P > 0.05$)。

表 2 ABCA1 基因启动子区 -477C/T SNP 在不同年龄组中的分布频率

Tab.2 Distribution frequency of the -477C/T SNP in the promoter region of ATP-binding cassette transporter 1 gene in different age groups

Group	Genotype		
	CC	CT	TT
Age ≥ 60 years	13 (36.1%)	17 (47.2%)	6 (16.7%)
Age < 60 years	29 (37.6%)	36 (46.8%)	12 (15.6%)

2.4 ABCA1基因启动子区-477C/T SNP与性别的关系

结果(表3)显示: ABCA1基因启动子区-477C/T SNP在不同性别组的分布差异无显著性意义($P > 0.05$)。

表 3 ABCA1 基因启动子区 -477C/T SNP 在不同性别组中的分布频率

Tab.3 Distribution frequency of the -477C/T SNP in the promoter region of ATP-binding cassette transporter 1 gene in relation to sex

Group	Genotype		
	CC	CT	TT
Male	25 (35.7%)	32 (45.7%)	13 (18.6%)
Female	17 (39.5%)	21 (48.9%)	5 (11.6%)

3 讨论

过去的多项研究证实：TC、HDL-C与冠心病相关，HDL-C是预测冠心病的可靠指标，TC/HDL预测老年冠心病危险性更有效[9][10][11]。HDL具有抗动脉粥样硬化的作用，其机制之一是HDL及其载脂蛋白的胆固醇逆转运功能。周围组织细胞中胆固醇外流是胆固醇逆转运的关键的第一步，而ABCA1基因是转运细胞内胆固醇外流、启动胆固醇逆转运的关键基因。ABCA1基因的研究源于Tangier病。Tangier病是一种罕见的常染色体隐性遗传病，表现为血HDL-C极度减少、肝脾肿大、周围神经病变、早发冠心病，现已证实ABCA1基因突变是Tangier病的原因。在普通人群中，最常见的遗传变异是SNP。已报道的常见ABCA1基因SNP如I/M823可显著改变血HDL-C水平[12]。因此，人们越来越关注在普通人群中ABCA1基因SNP与血脂水平和冠心病的关系。已有多项研究表明，在普通人群中ABCA1基因的SNP所表现出的作用截然不同：有的增加冠心病的危险，但对HDL-C、载脂蛋白A1血浆浓度无明显影响；有的可降低甘油三脂、增加HDL-C、对冠心病具有保护作用；有的仅对血脂有影响，但与冠心病无明显关联[13][14][15][16]。在现代社会中，冠心病的发病率日益上升，其对人们健康的危害也愈来愈大。因此，发现普通人群中对血脂有明显影响、与冠心病相关的基因变异，对冠心病的预防和治疗具有十分重要的意义。

本研究结果发现，ABCA1基因启动子区-477C/T SNP存在于中国汉族正常人群中，与Lutucuta等[7]的研究结果比较，TT基因型略低，而CC基因型略高，CT基因型近似。三种基因型在年龄及性别上的分布频率差异无显著性。此外，三种基因型TC、TG、LDL、VLDL及BMI差异无显著性。值得注意的是TT基因型HDL-C水平较CC基因型明显减低(P<0.05)。上述研究显示，ABCA1基因启动子区-477C/T SNP是影响中国汉族正常人群血浆HDL水平的一个因素，但这是否表明TT基因型携带者是冠心病潜在的高发人群，目前还不能确定，尚须进一步研究。

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