

FORUM REVIEW ARTICLE

Hypoxia Activation of Mitophagy and Its Role in Disease Pathogenesis

Hao Wu^{1,2} and Quan Chen^{1–3}

Abstract

Significance: Mitochondria utilize most of the oxygen to produce adenosine triphosphate via electron transfer coupled with oxidative phosphorylation. Hypoxia undoubtedly induces reduced energy production via decreased mitochondrial metabolic activity or altered hypoxia-inducible factor-1- and peroxisome proliferatoractivated receptor gamma coactivator 1-dependent mitochondrial biogenesis. Hypoxia may also activate mitophagy to selectively remove damaged or unwanted mitochondria for both mitochondrial quantity and quality control. Increasing evidence has shown that the accumulation of damaged mitochondria is a characteristic of aging and aging-related diseases, such as metabolic disorder, cancer, and neurodegenerative disease. *Recent* Advances: Both receptor-dependent and PTEN-induced putative kinase 1-PARKIN-dependent mitophagy have been described. Mitophagy receptors include Atg32 in yeast, as well as NIX/BNIP3L, B-cell lymphoma 2/ adenovirus E1B 19-kDa-interacting protein 3 and FUN14 domain containing 1 in mammals. In response to hypoxia or mitochondrial oxidative stress, receptor-mediated mitophagy was found to be activated via both transcriptional and post-translational modification. Critical Issues: To date, the molecular mechanisms by which hypoxia triggers mitophagy and by which mitophagy contributes to the pathogenesis of aging-related diseases remain to be explored. Future Directions: An improved understanding of the regulation of mitochondrial quality may provide a strategy for treating aging-related diseases by targeting mitochondria and mitophagy pathways. Antioxid. Redox Signal. 22, 1032-1046.

Introduction

A UTOPHAGY REFERS TO the catabolic processing of cellular components, including misfolded proteins, protein aggregates, damaged organelles, lipid droplets, and even nuclear components. The to-be-disposed cellular contents are enclosed by a double-membrane structure termed the autophagosome, which fuses with the lysosome for degradation. Subsequently, the breakdown products (such as amino acids, fatty acids, carbohydrates, and even nucleotides) are released and recycled for both biosynthesis and energy generation (97). Autophagy has long been considered a nonselective bulk digestion pathway to eliminate aggregated proteins and organelles in response to energy deprivation and metabolic stress. Increasing evidence has shown that autophagy may be highly selective. Under certain stresses, protein aggregates, organelles, including mitochondria, endoplasmic reticulum (ER), peroxisomes, components of nuclei, lipid droplets, and invading pathogens, are selectively recognized and removed by the autophagy machinery *via* processes referred to as aggrephagy, mitophagy, reticulophagy, pexophagy, nucleophagy, lipophagy, and xenophagy, respectively. Selective autophagy is typically mediated by specific adaptors or receptors (118). Both general and selective autophagy have been extensively reviewed by many outstanding scientists in the field. Here, we summarize the recent advances in mitophagy, with a particular focus on the hypoxic induction of mitophagy. We also discuss the association between mitophagy and diseases, which suggests the therapeutic potential of novel strategies targeting mitochondria and mitophagy.

¹State Key Laboratory of Biomembrane and Membrane Biotechnology, Institute of Zoology, Chinese Academy of Sciences, Beijing, China.

²University of Chinese Academy of Sciences, Beijing, China.

³Tianjin Key Laboratory of Protein Science, College of Life Sciences, Nankai University, Tianjin, China.

General Autophagy

Based on the manner of cellular cargo delivered to the lysosome, there are three distinct modes of autophagy: microautophagy, chaperone-mediated autophagy (CMA), and macroautophagy. Microautophagy, which has been described in yeast but rarely in mammalian cells, is defined as the translocation of cytoplasmic components into the lysosome via invagination of the lysosomal membrane, resembling the formation of late endosomes/multivesicular bodies (96). In contrast, CMA has been characterized in higher eukaryotes but not in yeast. In CMA, misfolded cytosolic proteins containing the pentapeptide KFERQ are selectively recognized by heat shock cognate protein heat-shock cognate protein 70, and this substrate-chaperone complex is recruited by the lysosomal receptor protein lysosome-associated membrane protein type 2a (63). Macroautophagy refers to the classic autophagy process, in which a double-membrane autophagosome surrounds cellular cargo, fuses with lysosome, and, ultimately, facilitates degradation of the cargo by lysosomal enzymes. As the primary mode of autophagy, macroautophagy is regarded as autophagy.

More than 30 autophagy-related genes (Atg) and corresponding proteins have been identified as participating in autophagy-related processes, including the activation of autophagy signaling cascade, the assembly and expansion of the double-membrane structure, and then fusion between autophagosome and lysosome leading to the lysosomal degradation and the release of autophagic products (98). Starvation has been reported to be the most common trigger of autophagy. Amino-acid or growth factor deprivation induces autophagy primarily via the phosphatidylinositol-4,5-bisphosphate 3kinase-mammalian target of rapamycin (mTOR) pathway, the master sensor that monitors the intracellular nutrient status (58). Specifically, the presence of amino acids, especially branch chain amino acids such as leucine and arginine, facilitate lysosomal localization- and activity-induced activation of mTOR by promoting the formation of the active configuration of the RAG GTPase complex (122, 123, 163). UNC-51-like kinase-1 (ULK1), the mammalian homolog of yeast Atg1, bridges the nutrient sensor mTOR to autophagy initiation via phosphorylation/dephosphorylation alteration (37, 52, 67). Furthermore, a low glucose level initiates autophagy via AMPactivated protein kinase (AMPK) kinase to regulate ULK1 activity (32, 67, 130). In addition to these highly effective signaling cascade-mediated post-translational modifications, there is also a variety of transcription factors that participate in long-term autophagy regulation. The transcription factor EB, a master transcription factor of lysosomal biogenesis, coordinates this process by inducing the expression of autophagy and lysosomal genes, including Atg4, Atg9, Wipi, and so on (129). Zinc finger protein with KRAB and SCAN domains 3, which belongs to the family of zinc finger transcription factors that contains Kruppel-associated box and SCAN domains, was found to act as an autophagy repressor to prevent the expression of several genes involved in various steps of autophagy and lysosome biogenesis/function (17). Furthermore, the Forkhead box O (FOXO) transcription factors, including FOXO1 (159) and FOXO3 (91), are also master regulators of autophagy.

Despite significant progress in the field, the origin of the autophagosomal membrane remains enigmatic to many autophagy researchers. Several independent groups have shown that these double-membrane structures originate from the ER (121, 153), the Golgi apparatus (152), mitochondria (44), or the plasma membrane (115). Recently, Yoshimori and colleagues demonstrated that the isolation membrane forms at the ER-mitochondria contact site in mammalian cells (47). High-resolution imaging analysis showed that ATG14L, the marker protein of autophagosome/pre-autophagosome, relocalizes to the ER-mitochondria contact site in response to autophagy initiation signaling by binding to the ER-resident SNARE protein syntaxin 17. Once activated, the ULK1 complex translocates to this isolation membrane-forming site to recruit other ATG proteins and autophagy-specific phosphatidylinositol-3-phosphate effectors to induce nucleation. After nucleation, the E3-like ligase complex Atg16L1, composed of the Atg12, Atg5, and Atg16L1 proteins, is recruited to the membrane to mediate the lipidation of microtubuleassociated protein 1A/1B-light chain 3 (LC3) and LC3 homolog proteins. Due to the lipidation of LC3 and LC3 homologue proteins, the isolation membrane expands to form a complete autophagosome.

Mitochondrial Autophagy

Mitochondria are cellular powerhouses that produce adenosine triphosphate (ATP) via the coupling of electron transport chain activity with oxidative phosphorylation in the inner mitochondrial membrane. In addition to ATP production, mitochondria provide space for key metabolic processes, such as fatty acid oxidation, iron metabolism, the urea cycle, and calcium storage. Research in the past three decades has firmly established that in response to apoptotic stimuli, including DNA damage, chemotherapeutic agents, serum starvation, and UV radiation, the mitochondrial outer membrane becomes permeabilized, releasing apoptogenic factors, especially cytochrome c, which binds to apoptotic protease activating factor 1 to form the apoptosome and to activate caspases for apoptosis (85). In addition, reactive oxygen species (ROS) are an inevitable byproduct of oxidative phosphorylation. Excessive ROS accumulation causes mitochondrial oxidative damage and mitochondrial dysfunction and contributes to several pathological processes, including aging (82), apoptosis (140), and cellular injury, during ischemia and reperfusion (56). Therefore, it is critical for the cell to remove unwanted or damaged mitochondria for the maintenance of appropriate mitochondrial quality for cellular health. Mitochondrial autophagy, or mitophagy, which refers to the selective removal of unwanted or damaged mitochondria via the autophagic machinery, is considered responsible for the maintenance of mitochondrial quality (76).

Mitophagy was initially detected in hepatocytes treated with glucagon, resulting in the sequestration of mitochondria in lysosomes. In 2007, Lemasters and colleagues found that mitochondria are engulfed by the autophagosome in hepatocytes isolated from green fluorescent protein-LC3 transgenic mice when the cells are maintained in nutrient-deprived medium (66, 117). Therefore, mitophagy was termed to describe selective mitochondrial sequestration by the autophagosome and degradation in the lysosome. Since then, an increasing number of reports have detected mitophagy under a variety of experimental conditions. Similarly, mitophagy has been detected in both physiological processes, such as red blood cell maturation and sperm-derived mitochondria elimination after fertilization, and pathological events, such as cancer and neurodegenerative disease. Currently, both receptor-dependent and -independent mechanisms of mitophagy have been described.

Receptor-Mediated Mitophagy

Atg32-mediated mitophagy in yeast

Atg32 was found to function as a mitophagy receptor in yeast based on mutant screening (61, 62, 106). Atg32 is a 59kDa, single-pass mitochondrial outer membrane protein, with its N- and C-terminal domains exposed to cytosol and mitochondrial intermembrane space, respectively. The cytosolic N-terminal domain contains a W/Y X X I/L/V region, the Atg8-family interacting motif (AIM), which interacts with Atg8 (106). In cells cultured in non-fermentable medium, a condition in which mitophagy is induced, yeast lacking Atg32 exhibit deficient mitophagy but predominantly intact starvation-inducing bulk autophagy, confirming Atg32 serving as a specific mitophagy receptor (62, 106). Atg32 is reported to be strongly activated in yeast under respiratory conditions, to which oxidative stress appears to contribute, as the ROS scavenger N-acetylcysteine prevents Atg32 induction and subsequent mitophagy (106), possibly due to the restoration of the glutathione pool (28).

Atg32 has been reported to physically associate with Atg8 in a conserved manner via its typical AIM, facilitating its function as a mitophagy receptor by directly recruiting the Atg8-containing phagophore to sequester mitochondria. The W86A I89A mutant of Atg32, which lacks the ability to interact with Atg8, exhibits partial but not complete deficiency of mitophagy, suggesting that the AIM-dependent Atg32-Atg8 interaction is important but not essential for mitophagy (74, 106). Furthermore, Atg32 is defined as an Atg11interacting protein, and the Atg32-Atg11 interaction is thought to be an early step of mitophagy initiation that is distinct from autophagosome formation (74). In addition, Ser114 phosphorylation of Atg32 has been demonstrated to be critically important for Atg32-Atg11 interaction and subsequent mitophagy (2). Casein kinase-2 (CK2) phosphorylates Atg32 at Ser114 and Ser119, increasing the stability of the Atg32-Atg11 interaction and specifically promoting mitophagy but not bulk autophagy or pexophagy. In addition, two mitogenactivated protein kinases, Slt2 and Hog1, are reported to be responsible for Atg32 phosphorylation and mitophagy (2, 93) (Fig. 1).

In addition to Atg32, the mitochondrial outer membrane protein Uth1p (71) and the mitochondrial protein phosphatase homolog Aup1p (136) have also been identified to be involved in mitochondrial clearance in yeast cultures subjected to nutrient starvation or a prolonged stationary phase, respectively. Furthermore, it has been suggested that mitochondrial dynamic is significantly related to mitophagy, as the fragmented mitochondria are more easily sequestered by autophagosomes, and specifically fragmented mitochondria removal is more effective to maintain mitochondrial quality (41, 114, 139). It has been reported that the dynamin-related GTPase Dnm1, which mediates the fission of the outer mitochondrial membrane, is required for mitophagy induced by Mdm38 knockout (103), YPL medium, or lga2 over-expression (101). Recently, Klionsky and colleagues showed that the Dnm1 fission complex can trigger mitophagy via an interaction with Atg11-Atg32 (92).

NIX/B-cell lymphoma 2/adenovirus E1B 19-kDa-interacting protein 3-mediated mitophagy

B-cell lymphoma 2 (BCL2)/adenovirus E1B 19-kDainteracting protein 3 (BNIP3) (9, 116, 151) and NIX (also known as BNIP3 L) (18, 54, 105) were initially identified as BCL2 homology 3 domain (BH3)-only pro-apoptotic proteins with their C-terminal transmembrane domain localizing to the mitochondrial outer membrane. As alternative BH3only proteins, BNIP3 and NIX confer similar pro-apoptotic activity by heterodimerizing with BCL2 or B-cell lymphomaextra large (BCL-XL). Over-expression of BNIP3 (27, 45) or NIX (5) triggers protective autophagy under a series of stresses, possibly by disrupting the interaction between BCL2/BCL-XL and Beclin1 (89, 90).

Using NIX knockout mice, several independent groups have shown that NIX deficiency leads to anemia, reticulocytosis, and erythroid-myeloid hyperplasia, and development disorder during erythroid maturation. The clearance of mitochondria during this period is defective in the absence of NIX (124, 127). NIX contains a typical LC3interacting region (LIR, similar to the AIM in yeast) motif



FIG. 1. Atg32-mediated mitophagy in yeast. The single-pass mitochondrial outer membrane protein Atg32 contains an AIM domain and directly interacts with Atg8. When yeast is cultured in non-fermentable medium, Atg32 is phosphorylated *via* the Hog1 MAPK-CK2 pathway at S114 and S119. This phosphorylation enhances the Atg32–Atg11 interaction, the Atg32–Atg11–Atg8 interaction, and the subsequent recognition of mitochondria by the phagophore. AIM, Atg8-family interacting motif; Atg, autophagy-related genes; CK2, casein kinase-2; MAPK, mitogen-activated protein kinases. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars

that interacts with the LC3 protein and its homolog GABAA receptor-associated protein (GABARAP) both *in vitro* and *in vivo* (102, 126). It is thought that NIX recruits the autophagosome to mitochondria by directly binding to LC3 and GABARAP. Mutating the LIR motif decreases the interaction between NIX and LC3/GABARAP and abolishes mitophagy to a certain extent. Furthermore, re-introduction of wild-type NIX to NIX^{-/-} reticulocytes rescues mitochondrial clearance to the level in wild-type mice. During erythroid differentiation, NIX is strongly up-regulated (1, 127) and mediates mitochondria removal. In addition to NIX, BNIP3 interacts with LC3 [but not GABARAP (48)] *via* its LIR motif to act as a mitophagy receptor (45, 48, 79, 113) (Fig. 2).

FUN14 domain containing 1-mediated mitophagy

We have recently identified that the mitochondrial outer membrane protein FUN14 domain containing 1 (FUNDC1) functions as a mitophagy receptor in mammalian cells (83). The FUNDC1 protein contains three transmembrane domains, as well as the N-terminus domain exposed to the cytosol, and the C-terminus domain inserted into the mitochondrial outer membrane. Ectopically expressed FUNDC1 induces a significant increase in the colocalization of LC3 puncta with fragmented mitochondria, accompanied by a decrease in mitochondrial mass, the typical phenotype of mitophagy. FUNDC1 was found to contain a characteristic LIR motif at the cytosol-exposed N-terminus. FUNDC1 directly interacts with LC3 and LC3 homologs *via* its LIR domain, and mutation of its LIR domain disrupts this interaction and, subsequently, abolishes mitophagy (Fig. 3).

PTEN-Induced Putative Kinase 1-PARKIN Pathway of Mitophagy

The cytosolic E3 ubiquitin ligase PARKIN, encoded by the *Park2* gene, and the mitochondrial serine/threonine kinase

PTEN-induced putative kinase 1 (PINK1), encoded by the *Pink* gene, which are associated with the familial form of Parkinson's disease (26, 72, 104, 141), are reported to regulate mitophagy. Loss-of-function mutation analyses using Drosophila melanogaster showed that deficiency of PAR-KIN or PINK1 results in similar phenotypes, including muscle degeneration and cell death, reduced lifespan. locomotor defects, and male sterility (23, 42, 109). Furthermore, the phenotypes caused by PINK1 loss can be rescued by PARKIN but not vice versa, suggesting that PARKIN and PINK1 function via identical pathways, with PARKIN acting downstream of PINK1 (150). Research from Youle's group and many other laboratories has demonstrated the function of the identical PINK1-PARKIN pathway in selective mitophagy in mammalian systems (78, 99, 100). Under normal conditions, PINK1 is transported to mitochondria via the translocase of the outer mitochondrial membrane (TOM) and the translocase of the inner mitochondrial membrane complexes, processed by presenilin-associated rhomboid-like protease, and, ultimately, degraded. When mitochondria are depolarized by the uncoupler toxin carbonyl cyanide-4-(trifluoromethoxy) phenylhydrazone, PINK1 escapes from this processing and accumulates on the mitochondrial outer membrane. Moreover, TOMM7, a component of the TOM complex, serves as a positive regulator to stabilize PINK1 (49). PINK1 accumulation on the mitochondrial outer membrane facilitates the targeting of PARKIN to these depolarized mitochondria. Furthermore, the kinase activity of PINK1 is essential for PARKIN translocation. PINK1 may phosphorylate PARKIN at Ser65, which is the prerequisite for PARKIN translocation and subsequent mitophagy (53, 70, 73, 131). Most recently, it has been reported that phosphorylation of ubiquitin on Ser65 (60, 64, 75) and mitofusin 2 (MFN2) (21) by PINK1 are crucial for the recruitment of PARKIN to mitochondria and its ubiquitin ligase activity. On translocation to the mitochondrial outer membrane, PARKIN ubiquitinates a variety of mitochondrial proteins, including

FIG. 2. NIX/BNIP3-mediated mitophagy. The mitochondrial outer membrane proteins NIX and BNIP3 have been identified as pro-apoptotic BH3-only proteins. Both contain an LIR domain and directly interact with LC3 or LC3 homologs. During red blood cell terminal differentiation or hypoxia, NIX and BNIP3 are activated to induce the removal of mitochondria. BNIP3 has recently been demonstrated to be phosphorylated at S17 and S24, which strengthens the BNIP3-LC3 interaction and promotes mitophagy. BH3, BCL2 homology 3 domain; BNIP3, BCL2/adenovirus E1B 19-kDainteracting protein 3; LC3, microtubuleassociated protein 1A/1B-light chain 3; LIR, LC3-interacting region. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars





FIG. 3. FUNDC1-mediated mitophagy. The recently identified mitophagy receptor FUNDC1 contains a characteristic LIR domain at its cytosol-exposed N-terminus. FUNDC1 is phosphorylated by SRC and CK2 at Y18 and S13, respectively. The mitochondrially localized phosphatase PGAM5 dephosphorylates FUNDC1 at S13. When cells are maintained under normoxic conditions, SRC and CK2 are constitutively active and phosphorylate Y18 and S13 of FUNDC1, respectively. PGAM5 interacts with BCL-XL, inhibiting its phosphatase activity. This phosphorylation of FUNDC1 status prevents the activity of this mitophagy receptor. During hypoxia, SRC and CK2 become inactivated, and PGAM5 is released, enabling dephosphorylation at S13, due to the rapid degradation of BCL-XL. The dephosphorylation of FUNDC1 at both sites enhances the FUNDC1-LC3 interaction and promotes mitophagy. BCL-XL, B-cell lymphoma-extra large; FUNDC1, FUN14 domain containing 1; PGAM5, phosphoglycerate mutase family member 5. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars

dynamin-related protein 1 (143), MFN1/2 (38, 137, 162), voltage-dependent anion channel (39, 132), and components of the TOM complex (15, 125, 154). Ultimately, the hyperubiquitination of the mitochondrial outer membrane initiates mitophagy. Recent studies have shown that the targeting of PINK1-PARKIN to depolarized mitochondria arrests the movement of these dysfunctional mitochondria and prevents them from traveling peripherally. PINK1 phosphorylates the GTPase mitochondrial RHO GTPase (Miro), a key component in the recruitment of the kinesin-1 heavy chain (KHC) to the mitochondrial surface. This phosphorylation accelerates PARKIN-dependent Miro degradation, detaches KHC from these depolarized mitochondria, and promotes the accumulation of these mitochondria in somatodendritic regions, where lysosomes are predominantly located (12, 144, 146). As mentioned earlier, PARKIN translocation facilitates MFN1/2 degradation (38, 137). Collectively, the PINK1-PARKIN pathway plays a general role in mitochondrial trafficking and dynamics, including fission and fusion, as well as the highly specific and effective clearance of unwanted mitochondria (Fig. 4).

In addition to the PINK1-PARKIN pathway and these mitophagy receptors, some core autophagy components have been reported to play specific roles in mitophagy regulation. In the absence of Atg7, mitochondrial clearance from reticulocytes is reduced (157). Similarly, in the absence of ULK1, the unique kinase of core autophagy components, mitochondrial clearance from reticulocytes is impaired (77). In stable PARKIN-expressing mouse embryo fibroblast (MEF) cells, CCCP induces the association between the ULK1 complex and clustered mitochondria (55). Although PINK1-PARKIN-pathway-mediated mitophagy and receptor-mediated mitophagy have been reported to occur under distinct experimental conditions, the crosstalk between these pathways should not be

ignored. Dorn (30) reported that both aged BNIP3 and NIX knockout mice display accumulation of dysfunctional mitochondria in the heart. Moreover, the BNIP3 and NIX double knockout mice display even further accumulation, suggesting that these two mitophagy receptors perform overlap functions in regulating damaged mitochondrial removal in the aged heart (30). Ectopically expressed BNIP3 in adult myocytes induces the translocation of PARKIN to mitochondria (79). In addition, deficiency of NIX in MEF cells reduces CCCPinduced PARKIN translocation (29). Similarly, knocking down FUNDC1 reduces CCCP-induced PARKIN translocation, demonstrating that these mitophagy receptors cooperate with PINK1-PARKIN pathway to fine-tune the mitophagy process (19).

Hypoxia Activation of Mitophagy

Oxygen is one of the most important metabolic substrates for oxidative phosphorylation inside mitochondria. A low level of oxygen (hypoxia) in cells and tissues, which is characteristic of most tumors, leads to the transcriptional upregulation of a series of genes that participate in angiogenesis, iron metabolism, glucose metabolism, and cell proliferation/survival (65). Hypoxia is currently considered a negative prognostic and predictive factor due to its multiple contributions to chemoresistance, radioresistance, angiogenesis, vasculogenesis, invasiveness, metastasis, resistance to cell death, alteration of metabolism, and genomic instability (147).

Hypoxia signaling and mitochondria

At present, the transcription factor hypoxia-inducible factor-1 (HIF-1) is considered the most important regulator responsible for adaptation of hypoxia. HIF-1, a heterodimeric complex consisting of the hypoxia-induced subunit HIF-1 α

FIG. 4. PARKIN-mediated mitophagy. PINK1 translocates to mitochondria via the TOM and TIM complexes. When mitochondria obtain normal membrane potential $(\Delta \psi)$, PINK1 is processed by the inner mitochondrial protease PARL and is, ultimately, degraded. When mitochondria lose the membrane potential, PINK1 escapes from PARL and accumulates on the mitochondrial outer membrane via its transmembrane domain. The accumulation of PINK1 phosphorylates the E3 ligase Parkin, facilitating its translocation to these mitochondria. Ultimately, PARKIN mediates the hyper-ubiquitination of the mitochondrial outer membrane, inducing the recognition of these damaged mitochondria by an isolation membrane. PARL, presenilin-associated rhomboid-like protease; PINK1, PTENinduced putative kinase 1; TIM, translocase of the inner mitochondrial membrane; TOM, translocase of the outer mitochondrial membrane. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars

and the constitutively expressed subunit HIF-1 β , transcriptionally regulate the expression of several genes by binding to the hypoxia response element (HRE) in these hypoxiaresponsive genes (142). Since HIF-1 β is constitutively expressed, the subunit HIF-1 α , which contains an oxygendependent degradation domain and is tightly regulated by oxygen, is considered the major regulator of the activity of the HIF-1 complex (112). Under normoxia, the HIF-1 α protein is rapidly degraded, resulting in minimal transcriptional activity of the HIF-1 complex. When cells are subjected to hypoxic conditions, HIF-1 α becomes stabilized and translocates from the cytosol to the nucleus, where it interacts with HIF-1 β to facilitate transcriptional activity. The degradation of HIF-1 α under normoxia is dependent on its hydroxylation at two proline residues (P402 and P564) by prolyl hydroxylase domains (PHDs). The hydroxylated HIF-1 α is recognized by the E3 ubiquitin ligase complex von Hippel-Lindau tumour suppressor protein, leading to its proteasomedependent degradation. During hypoxia, PHDs lose their hydroxylase activity due to a lack of O_2 , and HIF-1 α becomes stabilized (128) (Fig. 5).

In the electron transport chain, oxygen is the terminal acceptor of electrons from cytochrome c oxidase. Since mitochondria consume most (~85–90%) of the O₂ to perform oxidative phosphorylation, hypoxia causes damage to mitochondria and to cells in general. During hypoxia, cytochrome c oxidase is unable to transport electrons because of the lack O₂. Hypoxia-activated HIF-1-mediated transcriptional activity converts metabolic activity from aerobic respiration to anaerobic glycolysis by suppressing mitochondrial aerobic metabolic processes, including the tricarboxylic acid cycle and oxidative phosphorylation. In addition, HIF-1 has been reported to initiate the expression of certain genes, including



pyruvate dehydrogenase kinase, thereby affecting oxidative phosphorylation (69, 108).

It was thought that hypoxia decreases the ROS level due to the low level of O_2 and the diminished mitochondrial respiration. However, the ROS level has been reported by several groups to increase during hypoxia. Chandel et al. reported progressive increases in ROS at 5%, 3%, and 1% oxygen and demonstrated that this increased ROS level is vital for hypoxia-induced HIF-1 α stability and subsequent HIF-1 transcriptional activity (16). In addition, independent groups have demonstrated that hypoxia increases the level of nitric oxide (NO) (25), which competitively inhibits the interaction between mitochondrial enzyme cytochrome c oxidase and O_2 (10, 24). Similar to ROS, NO has been demonstrated to stabilize HIF-1 α during hypoxia (95). Furthermore, several studies have shown that hypoxia also affects mitochondrial Ca^{2+} flux (11, 86, 111), mitochondrial morphology (22, 84), and the mitochondrial membrane potential (36).

Hypoxia-induced autophagy

Hypoxia has long been known to trigger autophagy both *in vivo* and *in vitro*. In 2007, Tracy *et al.* showed that hypoxia triggers autophagy-dependent cell death in MEF cells *via* the induction of BNIP3. Repressing BNIP3 suppresses autophagy and cell death, suggesting that the pro-apoptotic protein BNIP3 plays a central role in hypoxia-induced autophagy and autophagic cell death (138). A similar phenomenon and mechanism were confirmed by independent groups in glioma, breast cancer cells, and other systems (3, 33, 155). However, Mazure and colleagues reported that hypoxia induces protective autophagy in an HIF-1-dependent manner *via* the induction of BNIP3 and NIX. Inhibition of this



FIG. 5. Hypoxia signaling and hypoxia-induced autophagy. Hypoxia signaling and hypoxia-induced autophagy are primarily mediated by the oxygen-sensitive transcription factor HIF-1 α . During normoxia, HIF-1 α is hydroxylated by PHDs, and the hydroxylated HIF-1 α is ubiquitinated by the E3 ligase complex VHL, leading to its degradation. During hypoxia, PHDs are inactivated, stabilizing HIF-1 α expression. Then, HIF-1 α translocates to the nucleus and interacts with HIF-1 β to form the HIF-1 complex, which binds to HRE regions to promote the expression of specific genes, such as Nix and Bnip3, promoting autophagy. HIF-1 α has been demonstrated to induce endoplasmic reticulum stress and, subsequently, autophagy either directly or indirectly *via* the transcriptional control of LC3 and Atg5. Hypoxia has also been reported to regulate autophagy *via* the ROS level and the AMP/ATP ratio. ATP, adenosine triphosphate; HIF-1, hypoxia-inducible factor-1; HRE, hypoxia response element; PHD, prolyl hydroxylase domain; ROS, reactive oxygen species; VHL, von Hippel-Lindau tumor suppressor protein. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars

autophagy by knocking down Atg5 or Beclin1 increases cell death (5) (Fig. 5).

In addition to BNIP3 and NIX, ER stress and the unfolded protein response (UPR) pathway have been found to participate in hypoxia-induced autophagy. Harris and colleagues showed that severe hypoxia up-regulates LC3 expression and promotes cell survival-related autophagic activity, which is dependent on activating transcription factor 4 (ATF4), the transcriptional factor involved in double-stranded RNA-activated protein kinase-like endoplasmic reticulum kinase (PERK)-mediated UPR signaling (120). Almost simultaneously, Wouters and colleagues confirmed this concept. The UPR-related transcription factors ATF4 and CCAAT-enhancer-binding protein homologous protein bind to LC3 and Atg5 promoters, respectively. The levels of the core autophagic components LC3 and Atg5, along with cell-protective autophagy, are increased in hypoxic tumor cells both in vivo and in vitro, which is dependent on PERK signaling (119). Furthermore, mTOR may participate in hypoxia-induced autophagy (7, 80) (Fig. 5).

Hypoxia-induced mitophagy

As mentioned earlier, hypoxia leads to alterations in mitochondria, including decreased oxidative phosphorylation, cytochrome c oxidase activity, and increased ROS production. Due to these damages, mitophagy is undoubtedly induced during hypoxia. However, several independent studies have demonstrated that hypoxia stimulates mitochondrial biogenesis via various mechanisms, including nitric oxide synthase (NOS) (43) and peroxisome proliferator-activated receptor gamma coactivator 1-alpha (PGC-1 α) (160). PGC-1 α is elevated in heart tissue and cell lines subjected to hypoxia, and this up-regulation is dependent on AMPK signaling. Moreover, it has been reported that NO and neuronal NOS (nNOS), but not endothelial NOS (eNOS), are vital for hypoxia-induced PGC-1 α expression and mitochondrial biogenesis. In contrast, hypoxia has been reported to suppress mitochondrial biogenesis, which is dependent on the inhibitory effect of FOXO3A on c-Myc transcription factor activity, suppressing the expression of mitochondria-associated genes (34, 57). Collectively, this dual effect of hypoxia on mitochondria (hypoxia inducing both mitochondrial biogenesis and mitophagy) suggests that the O_2 level and the O_2 sensor HIF-1 act as the principal effectors that maintain the homeostasis between the cellular energy demand and redox homeostasis (Fig. 6).

It remains unclear whether the PINK1-PARKIN pathway or the mitophagy receptor Atg32 participates in the regulation of hypoxia-induced mitophagy. Increasing evidence



FIG. 6. Hypoxia-mediated regulation of mitochondrial homeostasis. In response to hypoxia, the decreased level of O_2 triggers mitochondrial biogenesis *via* the hypoxia-induced activation of the AMPK/PGC-1 α pathway or NO production *via* the hypoxia-induced activation of NOS. It has also been reported that hypoxia-stabilized HIF-1 α suppresses mitochondrial biogenesis by inhibiting the expression of mitochondria-associated genes *via* the FOXO3A-mediated inhibition of the transcription factor Myc. In contrast, hypoxia and hypoxia-stabilized HIF-1 α are involved in hypoxia-induced mitophagy. At the transcriptional level, the mitophagy receptors NIX and BNIP3 are up-regulated, inducing the removal of dysfunctional mitochondria. Alternatively, the hypoxia-induced degradation of BCL-XL releases the phosphatase PGAM5, facilitating the dephosphorylation of FUNDC1 at Ser13, which activates its mitophagic activity. Hypoxia-induced mitochondrial biogenesis and mitophagy ensure the homeostasis between cellular energy demands and redox homeostasis. AMPK, AMP-activated protein kinase; FOXO, forkhead box O; NO, nitric oxide; NOS, nitric oxide synthase; PGC-1 α , peroxisome proliferator-activated receptor gamma coactivator 1-alpha. To see this illustration in color, the reader is referred to the web version of this article at www.liebertpub.com/ars

shows that hypoxia-induced mitophagy occurs *via* the HIF-1 α -induced expression of BNIP3 and NIX, the two mitophagy receptors (4, 155, 156). Both BNIP3 and NIX contain an HRE motif in their promoter region. In addition to the transcriptional regulation, the post-translational regulation of BNIP3 has been reported. Brady and colleagues showed that phosphorylation of serine residues 17 and 24, which flank the BNIP3 LIR domain, promotes the interaction between BNIP3 and LC3, increasing the maturation and autophagic degradation of mitochondria (161) (Fig. 2).

The molecular mechanism by which hypoxia initiates FUNDC1-mediated mitophagy has begun to be understood. Hypoxia affects the reversible phosphorylation of this mitophagy receptor. Tyr18, which is located in the LIR motif, is phosphorylated by SRC kinase under normoxia, and dephosphorylation occurs before hypoxia-induced mitophagy due to the inactivation of SRC kinase. Ser13 is phosphorylated by CK2 under normoxia and becomes dephosphorylated by the mitochondrially localized phosphatase phosphoglycerate mutase family member 5 (PGAM5) in response to hypoxia. Under normoxic conditions, PGAM5 interacts with BCL-XL, which blocks its phosphatase activity. When cells encounter hypoxic conditions, rapid BCL-XL

degradation induces PGAM5 release and activation to dephosphorylate FUNDC1 at Ser13. When dephosphorylated at both sites, FUNDC1 displays a significantly higher affinity to LC3, which induces a strong interaction between FUNDC1 and LC3, resulting in specific mitophagy to remove these damaged mitochondria (149). Inactivating either SRC or CK2 alone using pharmacological inhibitors or a knockdown approach is not sufficient to initiate mitophagy, but inhibition of both kinases strongly induces mitophagy (19). This twopart mechanism results in the fine-tuning of mitophagy during hypoxia (19, 83, 149) (Fig. 3).

Mitophagy and Diseases

Hypoxia has been associated with several types of human diseases, such as tumors (50), neurodegenerative diseases (110), and metabolic disorders (35). Many of these diseases display characteristic energy metabolism defects due to the accumulation of dysfunctional mitochondria. As the most important mechanism to maintain appropriate mitochondrial quality and quantity, mitophagy is suggested to play pivotal roles in the pathogenesis of these diseases. It remains under debate whether defective mitophagy plays a causal role in the pathogenesis of diseases or the accumulation of dysfunctional mitochondria is merely a consequence of an accompanying cellular event associated with these diseases (20, 87).

Mitophagy and cancer

In the early 1920s, Warburg found that cancer cells display a metabolic shift from oxidative phosphorylation to glycolysis, which is referred to as the "Warburg effect" (145). Extensive studies in recent decades have revealed the role of mitochondrial dysfunction anaerobic glycolysis in cancer cells. Autophagy was suggested to play opposing roles in tumorigenesis depending on the cellular context. Autophagy may suppress tumorigenesis by eliminating the harmful macromolecules or diminishing ROS production during the early onset of tumorigenesis. Alternatively, autophagy may promote tumorigenesis by sustaining tumor cell survival under the hypoxic conditions of the tumor during the late stage of tumor growth. Furthermore, in addition to the alleviation of oxidative stress by ROS scavengers and the maintenance of mitochondrial genetic stability, mitophagy, as the primary mechanism for the removal of damaged mitochondria, emerges as a key repressor of carcinogenesis. SH3-domain GRB2-like endophilin B1, which is also known as BIF-1 (SH3GLB1), a reported component of the Beclin1 complex (133), regulates the post-Golgi trafficking of membrane-integrated ATG9A during autophagy (135). SH3GLB1-deficient mice are susceptible to the development of spontaneous tumors, indicating that SH3GLB1 serves as a tumor suppressor (133). In addition, SH3GLB1 was recently found to mediate the removal of dysfunctional mitochondria via mitophagy in Myc-induced lymphoma cells. Loss of SH3GLB1 suppresses mitophagy, inhibits caspase-3 activation, and promotes Myc-induced genomic instability and lymphoma development, emphasizing the tumor-suppressive role of mitophagy (134). In contrast, mitophagy appears to promote tumorigenesis. Oncogenic K-Ras induces mitophagy during cell transformation, and this mitophagy may serve as an important cellular strategy to overcome cellular energy deficiency due to insufficient glucose import by expediting glycolysis, thereby promoting cancer development (68). The accumulation of dysfunctional mitochondria due to deficient mitophagy likely contributes to the Warburg effect. It remains to be determined whether abnormal receptormediated mitophagy is causally associated with cancer.

Mitophagy and neurodegenerative diseases

Neurodegenerative diseases, including Parkinson's disease, Alzheimer's disease, and Huntington's disease, are a large group of disabling disorders of the nervous system, characterized by the progressive loss of neuronal structure or function. The high energy demands of neurons, due to their numerous neuronal processes, is critically dependent on O₂ supply and mitochondrial integrity (107). Studies in past decades showed that mitochondrial damage in neurons and the subsequent induction of neuronal death are strongly associated with the pathogenesis of neurodegenerative disease (31, 81). The extensive examination of PINK1-PARKINmediated mitophagy has revealed a very close relationship between mitophagy deficiency and Parkinson's disease, as discussed earlier. However, conclusive evidence of the role of PINK1-PARKIN-mediated mitophagy in Parkinson's disease pathogenesis has yet to be presented, as most of the reported studies were performed using cultured cells, and Pink1 or Parkin knockout mice failed to faithfully recapitulate Parkinson's disease (59). In addition to Parkinson's disease, mitochondrial damage and mitophagy deficiency appear to be related to Alzheimer's disease. Specifically, β -amyloid fragments have been found to accumulate in mitochondria and disrupt mitochondrial function, inducing oxidative stress (13, 14, 88). Furthermore, mitochondrial dysfunction, including loss of the mitochondrial membrane potential, decreased respiratory ability, and changes in mitochondrial structure, are detected in Huntington's disease patients (8). A recent study demonstrated a primary defect in the ability of autophagic vacuoles to recognize cytosolic cargo in cells isolated from humans with Huntington's disease, as well as an abnormal mitochondrial turnover rate in these cells, indicating a protective role of mitophagy and a mitophagy defect in Huntington's disease pathogenesis (94).

Mitophagy and metabolic disorder

Mitophagy is suggested to finely tune metabolic progress by regulating mitochondrial mass. The accumulation of damaged mitochondria and mitophagy deficiency are observed in metabolic syndrome (148). Adipose-specific Atg7 knockout mice exhibit a lean phenotype, with $\sim 20\%$ of the adipose mass of wild-type mice. This result is likely attributed to increased β -oxidation, reduced rates of hormoneinduced lipolysis, decreased plasma concentrations of leptin, and higher levels of basal physical activity. These mutant mice are also resistant to high-fat diet-induced obesity and insulin resistance. High levels of mitochondria are detected in both white and brown adipose tissue in these mutant mice, demonstrating the association between the autophagymediated regulation of mitochondrial mass and metabolic disorder (158). Deficiency of Bnip3, an identified mitophagy receptor, leads to the obese phenotype, including increased lipogenesis and reduced β -oxidation in the liver, accompanied by elevated mitochondrial mass and loss of mitochondrial function (40). In addition, PARKIN-mediated mitophagy has been found to maintain insulin secretion and protect mice from type 1 diabetes (51).

Perspectives

Mitochondrial function is the principal oxygen consumer. Under hypoxia, the immediate response of the cell may be to reduce or even stop the reactions that utilize oxygen. Mitochondria are able to sense this hypoxic signaling to perform subsequent responses. On the one hand, the decrease in ATP and increase in NO activate AMPK or PGC-1 α , respectively, which may activate mitochondrial biogenesis as a compensatory response for the loss of energy. On the other hand, mitochondria as cargoes are subject to destruction via mitophagy in response to both oxidative damage and hypoxic conditions. Currently, the mechanisms underlying hypoxiainduced activation of mitophagy, including transcriptional regulation of NIX or BNIP3 by HIF-1, are understood to be distinct. Hypoxia also immediately activates mitophagy via the reversible phosphorylation of mitophagy receptors, such as FUNDC1. Specifically, hypoxia promotes the degradation of BCL-XL, which releases PGAM5, facilitating its activation and dephosphorylation of FUNDC1. It is clear that

hypoxia plays opposing roles in both mitochondrial biogenesis and mitophagy, depending on the acuteness and duration of the hypoxic conditions and the cellular context. The precise mechanism by which mitochondria sense and integrate these distinct cellular or environmental cues to establish mitochondrial homeostasis requires further investigation. As the predominant mechanism that regulates mitochondrial quantity and quality, mitophagy has been suggested to play a protective role in aging-related diseases. Although the causal association between mitophagy and the occurrence of these diseases remains elusive, the hypoxia-induced activation of mitophagy should be explored to search for preventive or therapeutic strategies to treat these diseases.

Acknowledgments

Work in the authors' laboratories was supported by the 973 program project (No. 2011CB910903 and No. 2013CB531200) from the MOST and Natural Science Foundation of China (81130045, 31271529, and 31301175).

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Address correspondence to: Dr. Quan Chen State Key Laboratory of Biomembrane and Membrane Biotechnology Institute of Zoology Chinese Academy of Sciences Beijing 100101 China

E-mail: chenq@ioz.ac.cn

Date of first submission to ARS Central, November 21, 2014; date of acceptance, December 18, 2014.

Abbrowietiene Lleed

Abbreviations Used
AIM = Atg8-family interacting motif
AMPK = AMP-activated protein kinase
ATF4 = activating transcription factor 4
Atg = autophagy-related genes
ATP = adenosine triphosphate
BCL 2 = B-cell lymphoma 2
BCI - XI = B-cell lymphoma-extra large
BH3 = BCL2 homology 3 domain
BNIP3 = BCL 2/adenovirus F1B 19-kDa-interacting
protein 3
CHOP = CCAAT-enhancer-binding protein
homologous protein
CK2 = casein kinase-2
CMA = chaperone-mediated autophagy
ER = endoplasmic reticulum
FOXO = forkhead box O
FUNDC1 = FUN14 domain containing 1
GABARAP = GABAA receptor-associated protein
HIF-1 = hypoxia-inducible factor-1
HRE = hypoxia response element
KHC = kinesin-1 heavy chain
LC3 = microtubule-associated protein 1A/1B-light
chain 3
LIR = LC3-interacting region
MAPK = mitogen-activated protein kinases
MEF = mouse embryo fibroblast
MFN1/2 = mitofusin 1/2
Miro = mitochondrial RHO GTPase
mTOR = mammalian target of rapamycin
NO = nitric oxide
NOS = nitric oxide synthese
PARL = presention-associated rhomboid-like protease
PERK = double-stranded RNA-activated protein
kinase-like endoplasmic reticulum kinase
PGAM5 = nhosphoglycerate mutase family member 5
$PGC_1\alpha$ – peroxisome proliferator-activated recentor
gamma coactivator 1-alpha
PHD = prolyl hydroxylase domain
PINK1 - PTFN-induced putative kinase 1
ROS = reactive oxygen species
SH3GI B1 – SH3-domain GRB2-like endophilin B1
TIM = translocase of the inner mitochondrial
membrane
TOM = translocase of the outer mitochondrial
membrane
UILK1 = UNC-51-like kinase-1
LIPR = unfolded protein response
VDAC = voltage-dependent anion channel
VHI = von Hinnel-L indau tumor sumpressor protein
viii – von imper-Lindau tumor suppressor protein

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