

# The Effect of Cannabis Compound Tetrahydrocannabinol on Fibrotic Pathways; Implications Beyond Fibrosis

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## Conclusions

1

In intestinal myofibroblasts, THC suppresses expression of many mediators of fibrosis consistent with an anti-fibrotic role

2

THC increases TGFβ1 expression consistent with a pro-fibrotic effect

3

THC suppresses TGFβ1 signaling through the AKT pathway. This pathway impacts many disease processes from atherosclerosis to cancer

4

Translational studies are needed to determine the efficacy and safety of cannabinoids in patients with Crohn's disease

## Background

- Crohn's disease (CD) is a chronic inflammatory disease of the intestine that typically begins in teens or young adults. Over years, pro-fibrotic factors like transforming growth factor beta-1 (TGFβ1) become activated leading to strictures that require surgery.
- CD is treated with potent immunosuppressive medications. Patients have sought alternative treatments like cannabinoids that improve symptoms.
- In other organ systems, cannabinoids are anti-inflammatory and anti-fibrotic. Whether cannabinoids decrease inflammation or effect fibrosis in CD is not known.
- Our previous data show that in human intestinal myofibroblasts, the cell responsible for fibrosis in CD, tetrahydrocannabinol (THC) decreases mediators of fibrosis like *ACTA2* & *TIMP1* mRNAs (Figure 1 A,B).

## Aims

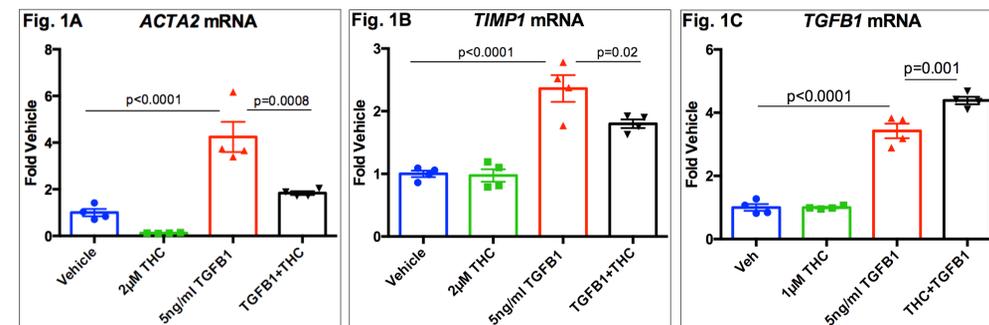
- Understand the mechanism by which THC affects the pro-fibrotic TGFβ1 pathway in intestinal myofibroblasts.

## Methods

- Here we used human intestinal myofibroblasts, exposed to TGFβ1 to mimic fibrotic Crohn's disease and study the effects of THC.
- Interrogate gene expression by quantitative polymerase chain reaction (qPCR).
- Analyze protein expression and phosphorylation by Western blot.
- Results are expressed as fold-vehicle ± S.E.M. using 1 way ANOVA to obtain p-values.

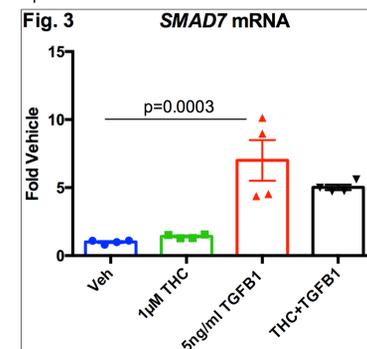
## Results

Figure 1. THC inhibited TGFβ1-induced pro-fibrotic factors except *TGFβ1* mRNA.



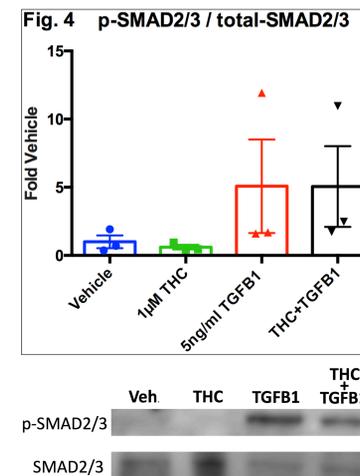
24 hours of THC inhibited fibrotic markers *ACTA2*, and *TIMP1*, but increased the pro-fibrotic *TGFβ1* mRNA.

Figure 3. THC does not alter *SMAD7* gene expression.



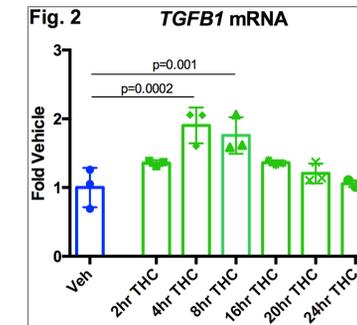
Mothers against decapentaplegic homolog 7 (*SMAD7*) is a negative regulator of TGFβ1 signaling. 24 hours THC pre-treatment did not change *SMAD7* mRNA levels suggesting that THC was not acting through the canonical SMAD pathway.

Figure 4. THC does not alter *SMAD2/3* protein phosphorylation.



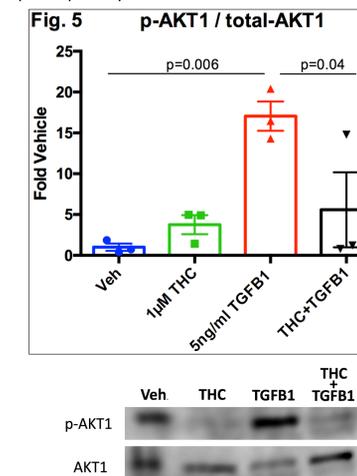
TGFβ1 activates *SMAD2/3* protein by phosphorylation (p-*SMAD2/3*). THC did not alter p-*SMAD2/3* protein, further implicating a SMAD-independent pathway (3 independent experiments; representative Western blot).

Figure 2. Time-dependent effect of THC on *TGFβ1* mRNA



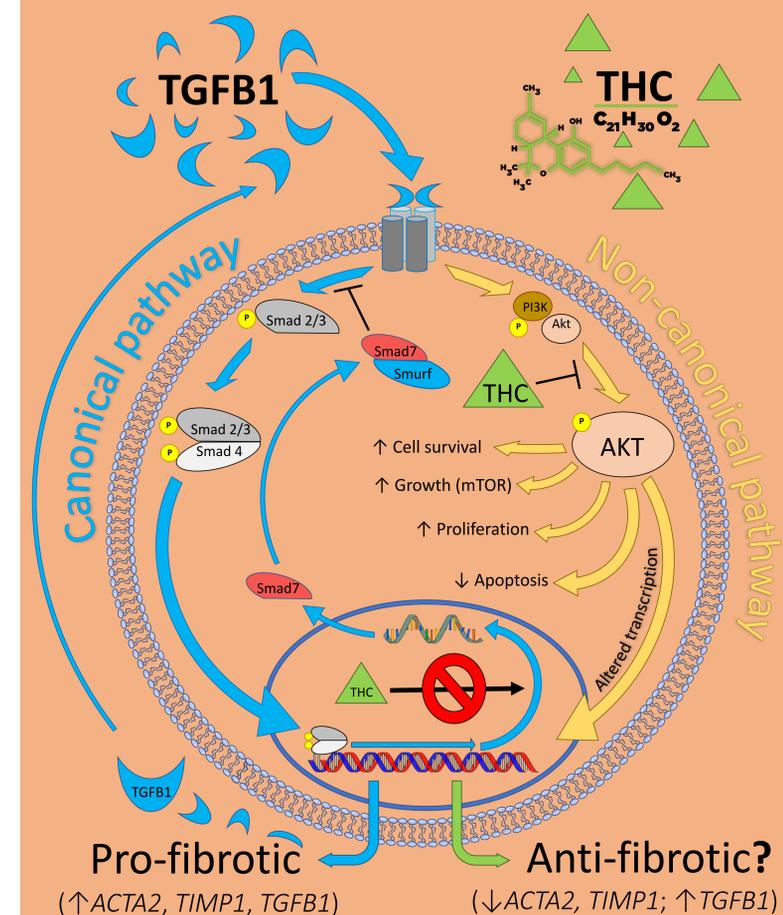
Time-course confirmed 1µM THC increases *TGFβ1* mRNA. Largest effect at 4 hours THC.

Figure 5. THC reduces AKT protein phosphorylation.



RAC-α serine/threonine-protein kinase (AKT1) is a SMAD-independent pathway also phosphorylated (activated) by TGFβ1. 24 hours THC pretreatment reduced P-AKT compared to TGFβ1 stimulated cells (3 independent experiments; representative Western blot).

## Working model of THC mechanism



## Summary

- TGFβ1 stimulates many pro-fibrotic factors and increases expression of its own mRNA
- THC inhibits TGFβ1-stimulated effects on pro-fibrotic factors
- THC increases TGFβ1 gene expression in a time-dependent manner
- THC exerts its effects through the non-canonical pathway