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Enteroendocrine Cells Regulate Intestinal Barrier Permeability

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Running head: EECs regulate intestinal barrier permeability

44 **ABSTRACT**

45
46 The intestinal epithelial barrier is essential for nutrient absorption and protection against
47 ingested pathogens and foreign substances. Barrier integrity is maintained by tight junctions
48 which are sensitive to inflammatory signals, thus creating a feed-forward loop with an
49 increasingly permeable barrier that further drives inflammation and is the hallmark of
50 inflammatory bowel disease. There are currently no therapeutic strategies to improve the
51 intestinal epithelial barrier. We hypothesized that enteroendocrine cells may play an
52 unappreciated role in maintaining barrier integrity. To test this hypothesis, we seeded human
53 intestinal enteroids with genetic loss of enteroendocrine cells on Transwell filters and evaluated
54 transepithelial electrical resistance, paracellular permeability, and the localization and
55 abundance of junctional proteins. We found that enteroendocrine cells were required to maintain
56 a healthy barrier in crypt-like “stem” and villus-like differentiated cultures. Additionally,
57 exogenous supplementation of enteroendocrine-deficient cultures with the hormones peptide
58 tyrosine tyrosine (PYY) and the somatostatin analog octreotide was sufficient to rescue many
59 aspects of this barrier defect both at baseline and in the presence of the inflammatory cytokine
60 tumor necrosis factor (TNF). Surprisingly, these improvements in barrier function occurred
61 largely independently of changes in protein abundance of junctional proteins zona-occludens 1,
62 occludin, and claudin-2. These findings support a novel role for enteroendocrine cells in
63 augmenting epithelial barrier function in the presence of inflammatory stimuli and present an
64 opportunity for developing therapies to improve the intestinal barrier.

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66
67 **NEW & NOTEWORTHY**

68
69 There are no therapies that directly improve the permeability of the intestinal epithelial barrier.
70 This work uses a human intestinal epithelial model system to demonstrate that sensory
71 enteroendocrine cells are necessary for healthy barrier function and that two of their secreted
72 products, peptide YY and somatostatin, are sufficient to improve barrier function at homeostasis
73 and in the presence of inflammatory cytokines. This could provide novel treatments for
74 strengthening the epithelial barrier in human gastrointestinal disease.

75
76
77 **KEYWORDS**

78
79 Enteroendocrine cells, tight junctions, intestinal organoids, peptide YY, barrier function
80

81 **INTRODUCTION**

82

83 The intestinal epithelial barrier performs two essential functions: absorption of nutrients and
84 defense against pathogens and bacteria. Intestinal inflammation stemming from a disrupted
85 barrier is the hallmark of inflammatory bowel disease (IBD) and is associated with increased
86 expression of the pro-inflammatory cytokine tumor necrosis factor (TNF) (1). TNF further
87 damages the epithelial barrier by disrupting tight junctional permeability (2-4). This damage
88 results from the degradation of tight junction proteins that support a healthy barrier such as ZO-
89 1 (zona occludens 1), occludin, and junctional adhesion molecules (JAMs). Additionally,
90 junctional proteins that promote a more permeable barrier, such as the pore-forming claudin-2,
91 are upregulated in IBD (5, 6). This creates a vicious cycle which worsens patient outcomes (1).

92

93 Anti-TNF biologic therapies currently offer the best clinical outcome for people with IBD.
94 However, not all patients respond to this type of therapy, and there are currently no therapies
95 aimed at bolstering the epithelial barrier. Strengthening the junctional proteins that comprise the
96 epithelial barrier could help naturally resolve excessive pro-inflammatory cytokine release by
97 limiting the intestinal permeability to foreign substances.

98

99 Here, we investigate whether a specialized intestinal epithelial cell, the enteroendocrine cell
100 (EEC), participates in intestinal barrier permeability. EECs are sensory cells that secrete
101 hormones, metabolites, and other small molecules in response to cues such as nutrients and
102 microbes. While classically known for their systemic digestive and metabolic actions, the roles
103 of EECs within the intestine are only beginning to be understood, largely due to the lack of
104 tractable model systems(7). The localization of receptors for EEC hormones gives some clues
105 as to their potential functions, with receptors for many hormones, including peptide tyrosine
106 tyrosine (PYY) and somatostatin, found on intestinal epithelial cells(8).

107

108 We previously developed a novel model system to experimentally test the role of EECs in
109 intestinal physiology and function by generating human intestinal organoids (HIOs) from
110 pluripotent stem cells with a null mutation in *NEUROG3*, the transcription factor required for
111 EEC differentiation(9). After maturation by xenograft into mice, we isolated crypts from wild-type
112 and EEC-deficient HIOs for enteroid culture. The resulting enteroids differentiate into expected
113 intestinal cell populations, including EECs in wild-type enteroids. As anticipated, EEC-deficient
114 enteroids fail to generate EECs or their products, like PYY and somatostatin. We previously
115 used this model to demonstrate that EECs are necessary to regulate ion-coupled nutrient
116 absorption(9) and crypt cell metabolism(10) in the small intestine.

117

118 In this study, we used EEC-deficient enteroids to test the hypothesis that EECs would also be
119 important regulators of barrier permeability, the other essential function of the intestinal
120 epithelium. We found that loss of all EECs resulted in impaired barrier function, whereas EEC-
121 derived hormones PYY and somatostatin were each sufficient to improve barrier function in
122 homeostatic conditions and in the context of TNF-mediated barrier dysfunction. These findings
123 elucidate a novel role for EECs in intestinal physiology and pathophysiology and may form the
124 basis of future therapies aimed at strengthening the intestinal epithelial barrier.

125 **MATERIALS & METHODS**

126

127 **Cell Culture**

128

129 Expansion media (EM) and differentiation media (DM) were prepared as previously
130 described(11). Wild-type and EEC-deficient (NEUROG3^{-/-}) human intestinal enteroids were
131 cultured and maintained as previously described(9). Cells were dissociated and plated in
132 monolayer on collagen patties and on Transwell filters (Fisher #07-200-154) as previously
133 described (11, 12). After reaching confluency in EM (approximately 3 days), cells were switched
134 to DM for an additional 7 days.

135

136 **OCT, PYY, and TNF Treatment *in vitro***

137

138 Cells were seeded and maintained on Transwell filters until the cells formed a confluent
139 monolayer as measured by a plateau in TEER values. Human recombinant TNF, 150 ng/mL
140 (PeproTech #300-01A-100UG), octreotide, 10 μ M (OCT; Sigma-Aldrich #01014-1MG) or human
141 PYY, 1 μ M (Phoenix Pharmaceuticals #059-07) were added to the basal Transwell chamber in
142 the appropriate media and incubated for 24 hours at 37°C, 5% CO₂. Cell culture medium served
143 as vehicle control.

144

145 **Trans-epithelial Electrical Resistance (TEER)**

146

147 TEER measurements were performed using an EVOM Manual (EVM-MT-03-01) according to
148 manufacturer's instructions. Empty Transwell filters coated as described and containing only
149 media were used as blanks. Resistance values (Ω) were recorded after subtracting the
150 resistance contribution of the blank filter. A minimum of 5 composite wells in each group was
151 recorded to reduce experimental errors.

152

153 **Barrier Permeability**

154

155 Cells on Transwell filters were incubated on the apical side only in HBSS containing 1M HEPES
156 buffer at pH 7.4 and 0.1 mg/ml Lucifer Yellow (LY) CH dipotassium salt (Molecular Probes
157 #L1177). Buffer without LY was added to the basolateral side. Cells were incubated for 2 hours
158 at 37°C prior to collecting media from the basal compartment for analysis. The fluorescence
159 signal (excitation at 485 nm and emission at 538 nm) was measured using a plate reader
160 (Clariostar Plus, BMG Labtech) and LY percent permeability was calculated based on
161 fluorescence intensity. Protocol adjusted from Sigma Aldrich (Technical Bulletin
162 MTOX1000P24).

163

164 **Western Blot**

165

166 Protein was isolated from cell pellets of enteroid monolayers and subjected to SDS-PAGE using
167 standard procedures (Bio-rad Bulletin #6376). After transfer, the nitrocellulose membrane was
168 blocked, stained, and imaged using LI-COR reagents and according to their protocol. The
169 primary antibodies include the following: Claudin 2 (1:200; Cell Signaling; #48120S), Zona
170 occludens 1 (1:500; Proteintech Group, Inc; #10019107), Occludin (1:250; #71-1500; Invitrogen)
171 GAPDH (1:2500; #GTX627408; GeneTex). LI-COR secondary antibodies at 1:15,000 dilution
172 include Goat anti-rabbit IgG (#926-68071; #926-32211) and Goat anti-mouse IgG (#926-32210,
173 #926-68070). Western Blots were quantified in Image J software with GAPDH serving as
174 loading control. Experiments were repeated in triplicate.

175

176 **Immunofluorescence**

177

178 Human enteroid monolayers on Transwell filters were fixed and stained as previously
179 described(13). The primary antibodies used were: Claudin 2 (1:100; Invitrogen; #32-5600),
180 Zona occludens 1 (1:100; Invitrogen; #33-9100), Occludin (1:100; #33-1500; Invitrogen). All
181 secondary antibodies were conjugated to Alexa Fluor 488 or 647 (Invitrogen, #A-21202, #A-
182 31573) and used at 1:1000 dilution. The Transwell membrane was then removed from the
183 plastic insert and mounted in Fluoromount with DAPI (Fisher Scientific #501128966) overnight
184 at room temperature prior to imaging.

185

186 **Confocal Microscopy**

187

188 Confocal images were acquired using a Zeiss LSM 900 running Zen 2019 imaging software,
189 blue edition (Zeiss). Images were captured with a 63x oil immersion objective. For qualitative
190 display, image settings were optimally adjusted, and the same settings were used to image
191 across samples in Image J. We quantified the fluorescence intensity of the maximum intensity
192 projection of z-stacked images using a macro in Image J after subtracting background signal.
193 Experiments were conducted in triplicate.

194

195 **Statistical Analysis**

196

197 All experiments were conducted with a minimum of n=5. Results are expressed as the mean \pm
198 standard error of the mean. GraphPad Prism 10 software was used for statistical analysis. P-
199 values were calculated using one-way ANOVA with Tukey's multiple comparisons test or
200 unpaired two-tailed Student's t-test as appropriate. P<0.05 was considered to indicate a
201 statistically significant difference, and P-values are reported in each figure.

202

203 **RESULTS**

204

205 EECs are found throughout the crypt-villus axis in vivo and we hypothesized they may have
206 different effects on target cells based on location and function. Tight junctions are looser in the
207 crypt and strengthen as cells differentiate in the villus; this is recapitulated in enteroid culture
208 when comparing TEER values between undifferentiated, “stem”-like cultures and differentiated
209 cultures(14). Enteroids were plated in monolayer culture on a Transwell filter and allowed to
210 grow to confluency in high-Wnt media, at which point we either performed analysis in stem-like
211 conditions or switched the cultures to low-Wnt media to promote differentiation over the
212 following 7 days (Figure 1A). We measured and quantified barrier function in two ways: by
213 TEER and by paracellular permeability to the small molecule Lucifer Yellow (LY, 457 Da). We
214 found a small but significant decrease in TEER in stem-like EEC-deficient enteroids compared
215 to wild-type control (Figure 1B) and equivalent permeability to LY between stem-like wild-type
216 and EEC-deficient enteroid cultures (Figure 1C). In EEC-deficient differentiated cultures, we
217 found a dramatic reduction in TEER (Figure 1D) and increased permeability to LY (Figure 1E)
218 compared to wild-type, suggesting that EECs and/or their secreted products were important in
219 maintaining a tight intestinal epithelial barrier.

220

221 We next exploited the absence of all EECs in EEC-deficient enteroids to systematically test the
222 ability of individual EEC hormones to impact barrier function. Octreotide is a synthetic analog to
223 somatostatin which is clinically approved for the treatment of diarrhea and has been shown to
224 regulate the expression of junctional proteins (15) and strengthen the intestinal epithelial barrier
225 in mice with experimental colitis (16) and the Caco2 cell line (17, 18). Alongside octreotide, we
226 hypothesized that PYY might improve TEER and permeability to LY in human EEC-deficient
227 enteroid monolayers. Like somatostatin, PYY is an inhibitory enteroendocrine peptide that we
228 have previously demonstrated regulates intestinal epithelial functions in mouse and human
229 small intestine (9). We exposed EEC-deficient enteroid monolayers to octreotide and PYY in the
230 basal chamber for 24 hours preceding analysis (Figure 1A). Both octreotide and PYY robustly
231 improved TEER (Figure 1D) and permeability to LY (Figure 1E) in EEC-deficient differentiated
232 cultures, although neither hormone impacted barrier function in EEC-deficient stem-like cultures
233 (Figure 1B, C).

234

235 As inflammatory cytokines like TNF are well-known to disrupt the intestinal epithelial barrier (2,
236 4), we next evaluated whether EECs protected against TNF-mediated barrier dysfunction. While
237 lower doses of TNF were sufficient to elicit a response in differentiated cultures (data not
238 shown), both wild-type and EEC-deficient stem-like cultures required a higher (150 ng/mL) dose
239 of TNF to significantly alter TEER and permeability. For consistency, we proceeded to treat all
240 cultures with the same concentrations of TNF, PYY, and octreotide (Figure 2). Treatment of
241 wild-type and EEC-deficient stem and differentiated cultures with TNF for 24 hours in the basal
242 chamber significantly disrupted TEER (Figure 2 A, C). TNF caused increased permeability to LY
243 in differentiated wild-type and EEC-deficient cultures (Figure 2D), but wild-type stem-like
244 cultures were relatively protected against increased permeability even at a high dose whereas
245 EEC-deficient stem-like cultures were more sensitive to TNF (Figure 2B). When we treated
246 EEC-deficient cultures concurrently with octreotide or PYY alongside TNF, we found that these
247 two EEC-derived hormones impacted inflammation-mediated barrier function in disparate ways.
248 Both octreotide and PYY improved permeability to LY in stem cultures (Figure 2B) despite not
249 affecting TEER (Figure 2A). Interestingly, in TNF-treated EEC-deficient differentiated cultures,
250 octreotide improved TEER but not permeability to LY, whereas PYY treatment rescued both
251 TEER and permeability to near wild-type levels (Figure 2C, D). This suggested that
252 somatostatin and PYY may impact tight junctions by different mechanisms.

253

254 We next sought to visualize and quantify the impact of octreotide and PYY on tight junctional
255 proteins with and without the inflammatory cytokine TNF. We observed immunofluorescence
256 expression of ZO-1 and claudin-2 in wild-type and EEC-deficient stem-like cultures regardless of
257 the addition of TNF (Figure 3A). Qualitatively, we noted punctate staining of claudin-2 in wild-
258 type stem cultures, which appeared thickened and more evenly distributed throughout the cell
259 membranes of EEC-deficient stem cultures (Figure 3A). In contrast, the smooth distribution of
260 ZO-1 along wild-type cell membranes appeared weakened in EEC-deficient stem cultures
261 (Figure 3A). These qualitative assessments were supported by a significant decrease in
262 fluorescence intensity and total protein of ZO-1 (Figure 3A, B) and total protein of occludin
263 (Figure 3C) in EEC-deficient stem cultures compared to wild-type, with a trend toward an
264 increase in the pore-forming claudin-2 (Figure 3A, D). Exogenous addition of PYY or octreotide
265 restored ZO-1 and occludin to wild-type levels in EEC-deficient stem cultures (Figure 3B, C) but
266 did not affect expression of claudin-2 (Figure D). Interestingly, while TNF treatment functionally
267 disrupted TEER and permeability (Figure 2A, B), and qualitatively altered the sharp membrane
268 expression of ZO-1 and claudin-2 (Figure 3A), these effects were not reliant on changes in total
269 expression of tight junctional proteins and were not impacted by exogenous hormone treatment
270 in EEC-deficient stem cultures (Figure 3B-D).

271
272 Similarly, we observed a qualitative and quantitative decrease of ZO-1 and occludin in EEC-
273 deficient differentiated cultures compared to wild-type (Figure 4A-C). Consistent with the
274 preferential crypt localization of claudin-2(19), we did not detect claudin-2 expression in our
275 differentiated enteroid cultures (not shown). Treatment with TNF resulted in thickened and
276 interrupted membrane staining in both wild-type and EEC-deficient differentiated cultures
277 (Figure 4A), although these qualitative changes did not correlate with statistically significant
278 changes in protein levels (Figure 4A-C). Similar to stem cultures, neither PYY nor octreotide
279 increased ZO-1 or occludin protein levels in TNF-treated differentiated EEC-deficient cultures
280 (Figure 4B, C).

281
282 Taken together, our results demonstrate a novel role for EECs and their secreted products in
283 maintaining the integrity of the intestinal epithelial barrier in a manner that is largely independent
284 of quantitative changes in protein expression of tight junction family members.

285 **DISCUSSION**

287
288 In this study, we demonstrated that EECs support human intestinal epithelial barrier function
289 and that two of their secreted products, PYY and somatostatin, were sufficient to improve barrier
290 function at homeostasis and in the presence of high levels of the pro-inflammatory cytokine
291 TNF. To our knowledge, this is the first report demonstrating the role of PYY, a classical satiety
292 hormone, in strengthening the intestinal barrier.

293
294 We investigated how EECs impacted the epithelial barrier in crypt-like “stem” and villus-like
295 differentiated cultures. In EEC-deficient cultures, we found a slight but significant reduction in
296 TEER in stem-like cultures with a concomitant decrease of ZO-1 protein expression and
297 increase in the pore-forming protein claudin-2 compared to wild-type. In differentiated cultures,
298 loss of EECs resulted in a “leaky” barrier with decreased TEER and increased permeability
299 compared to wild-type cultures. We observed decreased ZO-1 and occludin expression in EEC-
300 deficient cultures that, surprisingly, was not further exacerbated by TNF treatment. Interestingly,
301 while PYY and octreotide were both able to improve TEER in EEC-deficient TNF-treated
302 differentiated cultures, only PYY was able to improve permeability, and neither hormone
303 impacted protein levels of ZO-1 or occludin. This, coupled with the qualitative changes in ZO-1,
304 occludin, and claudin-2 expression and localization we observed by immunofluorescence,

305 suggests that PYY and somatostatin are sufficient to mitigate epithelial damage through
306 unexplored mechanisms independent of junctional protein abundance. Future experiments will
307 investigate the role of EECs in tight junction ultrastructure, endocytosis protein recycling, and
308 junctional complex interactions with additional stabilizing proteins, like the myosin light chain,
309 and the lipid membrane. It is also possible that individual hormones might impact these
310 processes differently in the crypt versus the villus.

311
312 As neither wild-type nor EEC-deficient enteroids form EECs in the media conditions that support
313 the stem-like cultures, we had expected roughly equivalent characteristics between lines.
314 Baseline differences in TEER and junctional proteins raise the possibility that wild-type intestinal
315 stem cells retain some epigenetic memory of their previous exposure to EEC hormones *in vivo*.
316 Our data suggest that EEC-deficient stem-like cultures are primed for increased permeability
317 that is exacerbated upon exposure to inflammatory cytokines.

318
319 Here, we provide proof-of-concept that EECs may be targeted for improving the integrity and
320 function of the intestinal epithelial barrier. EECs and their secreted hormones are often
321 dysregulated in GI diseases; for example, colonic biopsies from patients with severe Crohn's
322 disease and ulcerative colitis revealed loss of PYY- and somatostatin-positive cells (20-22).
323 While it is unclear whether alterations in EECs drive disease or are merely an effect of a
324 damaged epithelium, our study demonstrates a theoretical basis for supplementing PYY and/or
325 somatostatin in these patients in an effort to reduce barrier permeability and improve disease
326 outcomes.

327 **ACKNOWLEDGMENTS**

328
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330 Advanced Analytics Core, for assistance with this project. The Graphical Abstract was created
331 with BioRender.com.

332 **GRANTS**

333
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335 CGIBD).

336 **DISCLOSURES**

337
338 The authors have nothing to disclose.

339 **AUTHOR CONTRIBUTIONS**

340
341 J.G.N. designed research, performed experiments, analyzed data, interpreted results of
342 experiments, prepared figures, drafted manuscript, edited and revised manuscript, and
343 approved final version of manuscript. S.D.P., T.J.R., S.R.G., S.G.W., and A.M.R. performed
344 experiments, edited and revised manuscript, and approved final version of manuscript. H.A.M.
345 conceived and designed research, performed experiments, analyzed data, interpreted results of
346 experiments, prepared figures, drafted manuscript, edited and revised manuscript, and
347 approved final version of manuscript.

353 **FIGURE LEGENDS**

354

355 **Figure 1. EECs regulate barrier function in the intestinal epithelium.**

356 (A) Enteroids were seeded onto semi-permeable Transwell filters to generate 2D cultures. When
357 monolayers were confluent, they were randomly allocated for analysis of stem or differentiated
358 populations. Hormones were added 24 hours prior to barrier function testing. (B, D) TEER and
359 (C, E) permeability to Lucifer Yellow were measured in WT and EEC-deficient enteroid
360 Transwell monolayers in stem (B,C) and differentiated (D,E) conditions. Data reported as mean
361 \pm SEM. P-values calculated by one-way ANOVA with Tukey's multiple comparison's test. ns, not
362 significant. $n = 5-30$ wells/group.

363

364 **Figure 2. EECs improve TNF-mediated barrier dysfunction.**

365 Stem and differentiated EEC-deficient enteroid monolayers were treated with octreotide (10
366 μ M), and/or PYY (1 μ M) concurrently with 150 ng/mL TNF for 24 hours prior to measuring (A, C)
367 TEER and (B, D) permeability to Lucifer Yellow. Data reported as mean \pm SEM. P-values
368 calculated by one-way ANOVA with Tukey's multiple comparison's test. ns, not significant. $n = 5-$
369 30 wells/group.

370

371 **Figure 3. Tight junction proteins are altered in crypt-like cells upon the loss of EECs.** (A)

372 Immunofluorescence staining and quantification of corrected cell total fluorescence intensity for
373 ZO-1 and Claudin-2 in enteroid monolayers grown in stem conditions with and without treatment
374 with TNF. Scale bars = 10 μ m. (B-D) EEC-deficient enteroid monolayers grown in stem
375 conditions were treated with octreotide (10 μ M), and/or PYY (1 μ M) concurrently with 150 ng/mL
376 TNF for 24 hours prior to quantification of (B) ZO-1 (225 kDa), (C) occludin (55 kDa), and (D)
377 claudin-2 (22 kDa) protein abundance by Western blot. Data reported as mean \pm SEM. P-values
378 calculated by unpaired t -test. $n = 3$ immunofluorescence images per condition; $n = 5-6$
379 immunoblots per condition.

380

381 **Figure 4. Tight junction proteins are altered in villus-like cells upon the loss of EECs**

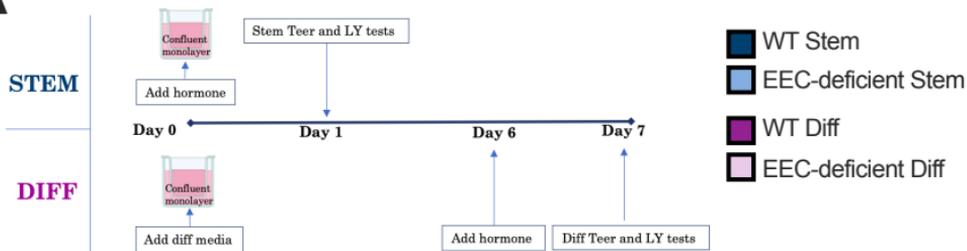
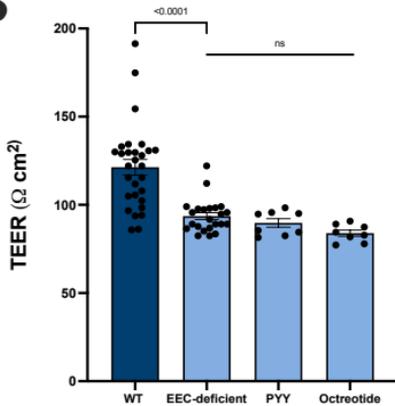
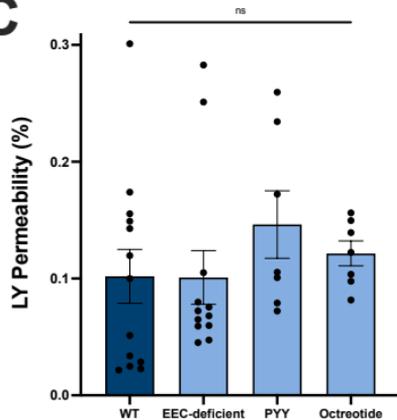
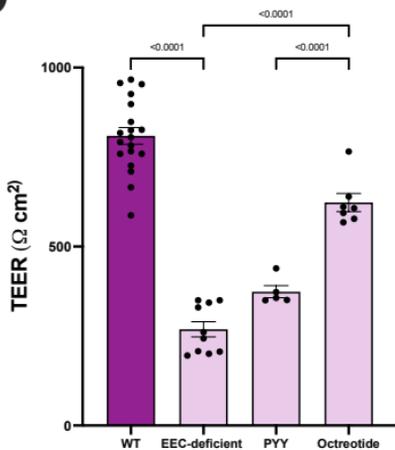
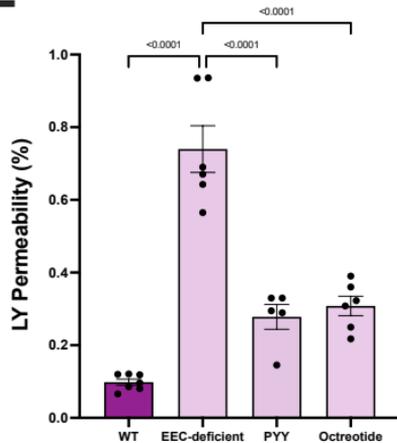
382 (A) Immunofluorescence staining and quantification of corrected cell total fluorescence intensity
383 for ZO-1 and occludin in enteroid monolayers after 7 days of differentiation with and without
384 treatment with TNF during the final 24 hours. Scale bars = 10 μ m. (B-D) Differentiated EEC-
385 deficient enteroid monolayers were treated with octreotide (10 μ M), and/or PYY (1 μ M)
386 concurrently with 150 ng/mL TNF for 24 hours prior to quantification of (B) ZO-1 (225 kDa), and
387 (C) occludin (55 kDa) protein abundance by Western blot. Data reported as mean \pm SEM. P-
388 values calculated by unpaired t -test. $n = 3$ immunofluorescence images per condition; $n = 3$
389 immunoblots per condition.

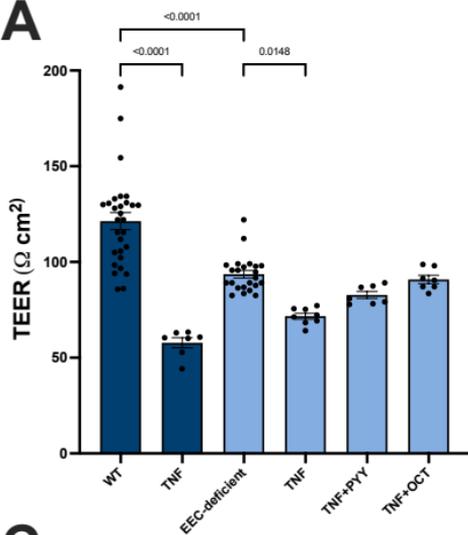
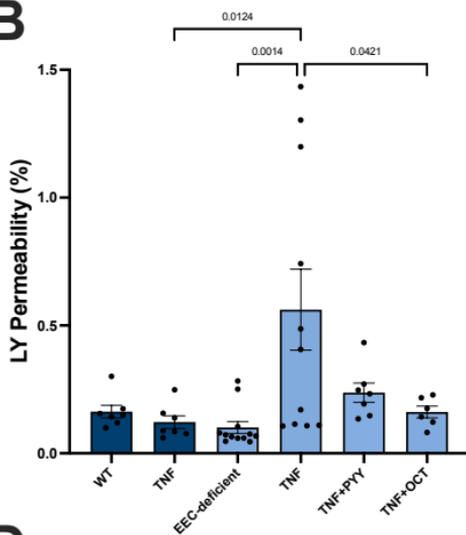
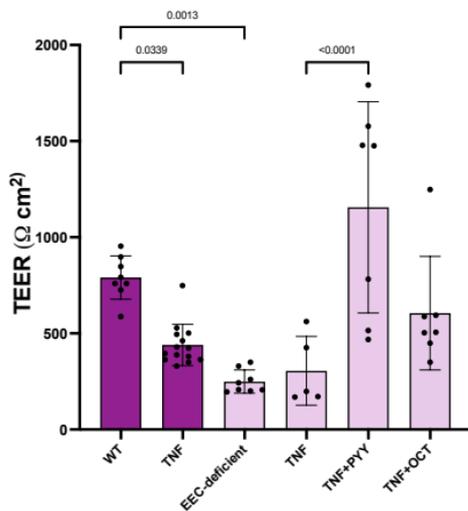
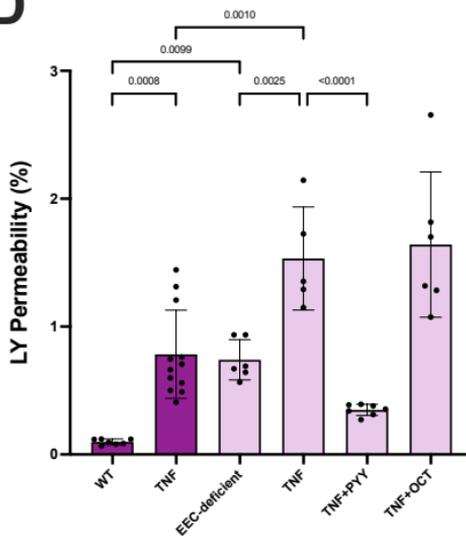
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391 **REFERENCES**

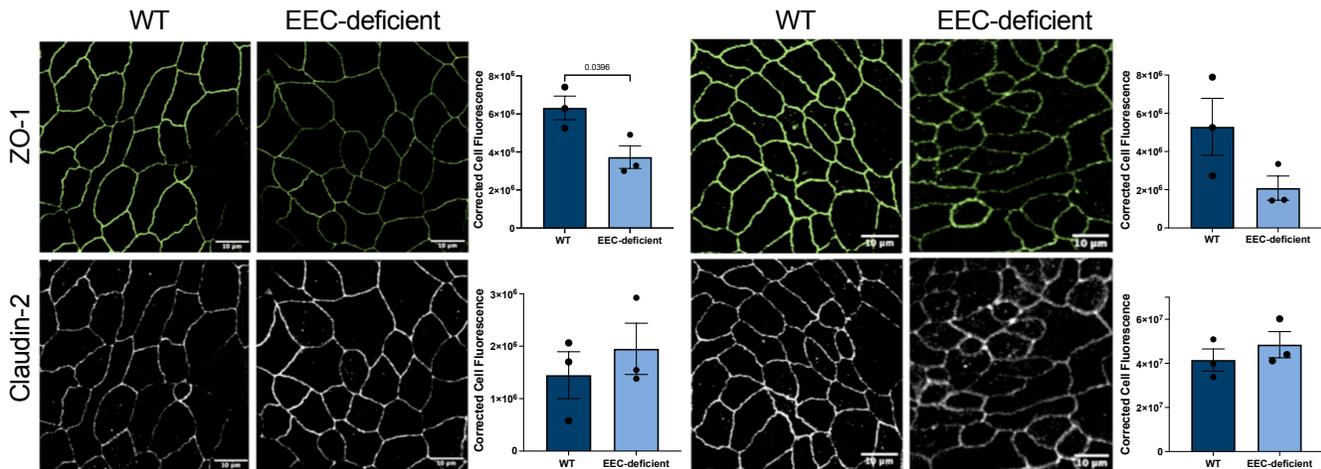
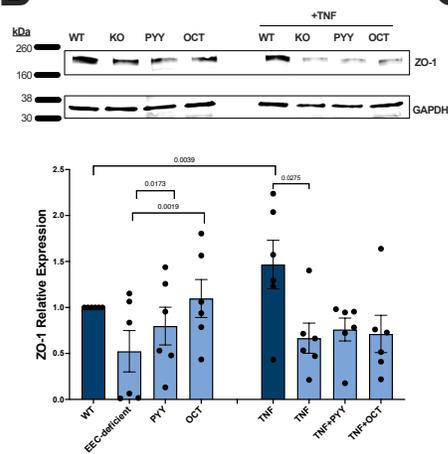
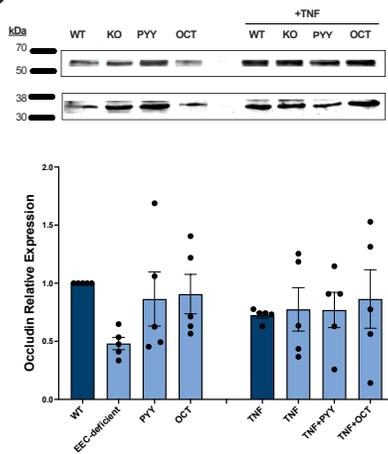
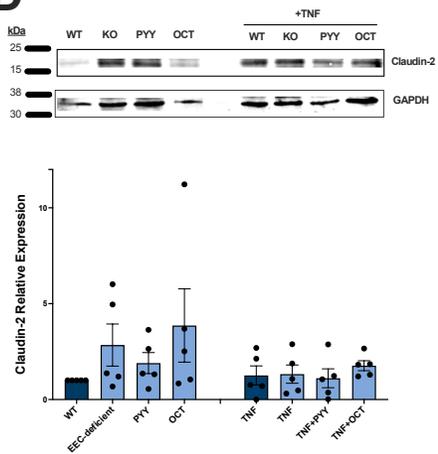
- 392
- 393 1. Edelblum KL, Turner JR. The tight junction in inflammatory disease: communication
394 breakdown. *Curr Opin Pharmacol.* 2009;9(6):715-20.
- 395 2. Amasheh M, Fromm A, Krug SM, Amasheh S, Andres S, Zeitz M, et al. TNFalpha-
396 induced and berberine-antagonized tight junction barrier impairment via tyrosine kinase, Akt and
397 NFkappaB signaling. *J Cell Sci.* 2010;123(Pt 23):4145-55.
- 398 3. Marano CW, Lewis SA, Garulacan LA, Soler AP, Mullin JM. Tumor necrosis factor-alpha
399 increases sodium and chloride conductance across the tight junction of CACO-2 BBE, a human
400 intestinal epithelial cell line. *J Membr Biol.* 1998;161(3):263-74.
- 401 4. Wang F, Graham WV, Wang Y, Witkowski ED, Schwarz BT, Turner JR. Interferon-gamma
402 and tumor necrosis factor-alpha synergize to induce intestinal epithelial barrier dysfunction by
403 up-regulating myosin light chain kinase expression. *Am J Pathol.* 2005;166(2):409-19.
- 404 5. Zeissig S, Bürgel N, Günzel D, Richter J, Mankertz J, Wahnschaffe U, et al. Changes in
405 expression and distribution of claudin 2, 5 and 8 lead to discontinuous tight junctions and barrier
406 dysfunction in active Crohn's disease. *Gut.* 2007;56(1):61-72.
- 407 6. Weber CR, Nalle SC, Tretiakova M, Rubin DT, Turner JR. Claudin-1 and claudin-2
408 expression is elevated in inflammatory bowel disease and may contribute to early neoplastic
409 transformation. *Lab Invest.* 2008;88(10):1110-20.
- 410 7. Nwako JG, McCauley HA. Enteroendocrine Cells Regulate Intestinal Homeostasis and
411 Epithelial Function. *Mol Cell Endocrinol.* 2024:112339.
- 412 8. McCauley HA. Enteroendocrine Regulation of Nutrient Absorption. *J Nutr.*
413 2020;150(1):10-21.
- 414 9. McCauley HA, Matthis AL, Enriquez JR, Nichol JT, Sanchez JG, Stone WJ, et al.
415 Enteroendocrine cells couple nutrient sensing to nutrient absorption by regulating ion transport.
416 *Nature Communications.* 2020;11(1):4791.
- 417 10. McCauley HA, Riedman AM, Enriquez JR, Zhang X, Watanabe-Chailland M, Sanchez
418 JG, et al. Enteroendocrine Cells Protect the Stem Cell Niche by Regulating Crypt Metabolism in
419 Response to Nutrients. *Cell Mol Gastroenterol Hepatol.* 2023;15(6):1293-310.
- 420 11. Hinman SS, Wang Y, Kim R, Allbritton NL. In vitro generation of self-renewing human
421 intestinal epithelia over planar and shaped collagen hydrogels. *Nat Protoc.* 2021;16(1):352-82.
- 422 12. Gomez-Martinez I, Bliton RJ, Breau KA, Czerwinski MJ, Williamson IA, Wen J, et al. A
423 Planar Culture Model of Human Absorptive Enterocytes Reveals Metformin Increases Fatty Acid
424 Oxidation and Export. *Cell Mol Gastroenterol Hepatol.* 2022;14(2):409-34.
- 425 13. Anwer S, Szaszi K. Immunofluorescent Staining of Claudin-2 in Cultured Kidney Tubular
426 Cells. *Bio Protoc.* 2020;10(14):e3678.
- 427 14. Noel G, Baetz NW, Staab JF, Donowitz M, Kovbasnjuk O, Pasetti MF, et al. A primary
428 human macrophage-enteroid co-culture model to investigate mucosal gut physiology and host-
429 pathogen interactions. *Sci Rep.* 2017;7:45270.
- 430 15. Vockel M, Breitenbach U, Kreienkamp HJ, Brandner JM. Somatostatin regulates tight
431 junction function and composition in human keratinocytes. *Exp Dermatol.* 2010;19(10):888-94.
- 432 16. Li X, Wang Q, Xu H, Tao L, Lu J, Cai L, et al. Somatostatin regulates tight junction
433 proteins expression in colitis mice. *Int J Clin Exp Pathol.* 2014;7(5):2153-62.
- 434 17. Liu X, Zhou Y, Zhang Y, Cui X, Yang D, Li Y. Octreotide attenuates intestinal barrier
435 damage by maintaining basal autophagy in Caco2 cells. *Mol Med Rep.* 2024;29(6).
- 436 18. Li Y, Li X, Geng C, Guo Y, Wang C. Somatostatin receptor 5 is critical for protecting
437 intestinal barrier function in vivo and in vitro. *Mol Cell Endocrinol.* 2021;535:111390.
- 438 19. Rahner C, Mitic LL, Anderson JM. Heterogeneity in expression and subcellular
439 localization of claudins 2, 3, 4, and 5 in the rat liver, pancreas, and gut. *Gastroenterology.*
440 2001;120(2):411-22.

- 441 20. El-Salhy M, Danielsson A, Stenling R, Grimelius L. Colonic endocrine cells in
442 inflammatory bowel disease. *J Intern Med.* 1997;242(5):413-9.
- 443 21. Koch TR, Carney JA, Morris VA, Go VL. Somatostatin in the idiopathic inflammatory
444 bowel diseases. *Dis Colon Rectum.* 1988;31(3):198-203.
- 445 22. Watanabe T, Kubota Y, Sawada T, Muto T. Distribution and quantification of somatostatin
446 in inflammatory disease. *Dis Colon Rectum.* 1992;35(5):488-94.
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- 448
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A**B****C****D****E**

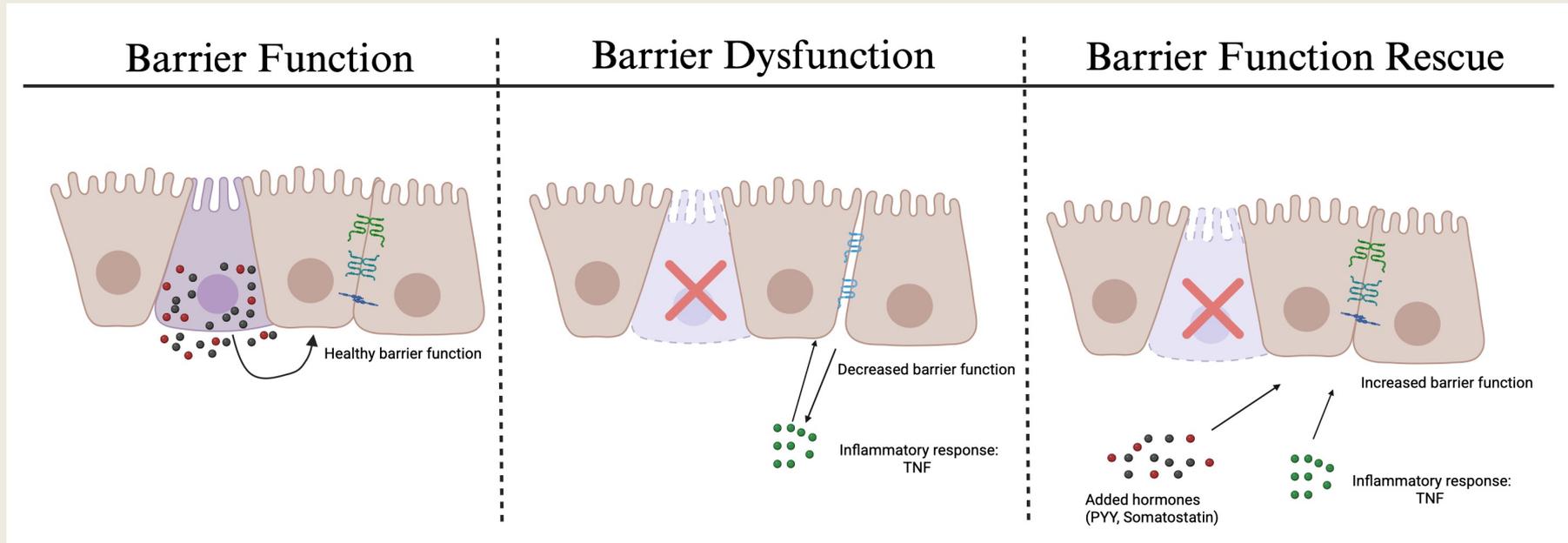
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+TNF

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Enteroendocrine hormones improve TNF-mediated intestinal barrier dysfunction

RESULTS



CONCLUSION: Enteroendocrine cells regulate intestinal barrier function and enteroendocrine hormones PYY and somatostatin rescue TNF-mediated dysfunction in a human small intestinal epithelial organoid model.