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## Suppression of COX-2/PGE<sub>2</sub> levels by carbazole-linked triazoles *via* modulating methylglyoxal-AGEs and glucose-AGEs – induced ROS/NF-κB signaling in monocytes

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#### ABSTRACT

Chronic hyperglycemia favours the formation of advanced glycation end products (AGEs) which are responsible of many diabetic vascular complications. Keeping in view the medicinal properties of the1,2,3-triazoleconjugated analogs, the present study was designed to evaluate the possible effect of carbazole-linked 1,2,3-triazoles 2-16 against glucose- and methylglyoxal-AGEs-induced inflammation in human THP-1 monocytes. In vitro antiglycation, and metabolic assays were used to determine antiglycation, and cytotoxicity activities. DCFH-DA, immunostaining, immunoblotting, and ELISA techniques were employed to study the ROS and levels of proinflammatory mediators in THP-1 monocytes. Among all the synthesized carbazole-linked 1,2,3 triazoles, compounds 2, 7, 8, and 11-16 showed antiglycation activity in glucose- and MGO-modified bovine serum albumin models, whereas parent compound 1 only exhibited activity in glucose-BSA model. The metabolic assay demonstrated the non-toxic profile of compounds 1–2, 11–13, and 15 up to 100 µM concentration in both HepG2 and THP-1 cell lines. We found that compounds 11-13, and 15 attenuated AGEs-induced ROS formation (P <0.001), and halted NF- $\kappa$ B translocation (P < 0.001), likewise standard drugs, PDTC, rutin, and quercetin, in THP-1 monocytes. Among the derivatives, compounds 12, and 13 also suppressed the AGEs-induced elevation of COX-2 (P < 0.001) and  $PGE_2 (P < 0.001)$ . Our data show that the carbazole-linked triazoles 12, and 13 hampering the formation of glycation products, prevent the activation of AGEs-ROS-NF-κB signaling pathway, and limit the proinflammatory COX-2 protein, and PGE2 induction in human THP-1 monocytes. Both these compounds can thus serve as leads for further studies towards the treatment and prevention of diabetic vascular complications.

#### 1. Introduction

Hyperglycemia is the leading cause of progression of cardiovascular impairments in diabetes. These include micro- and macro-vascular complications, such as coronary artery disease, peripheral artery disease, nephropathy, neuropathy, retinopathy, and others. This may lead to organ failure or even death [1–3]. Studies conducted on *in vivo* animal models suggested the putative role of hyperglycemia in the development

of atherosclerosis (ATH). Hyperglycemia associated pathogenic factors that include the formation of advanced glycation end products (AGEs) play a key role in the on-set and progression of ATH in diabetics [4–6]. AGEs are formed as a result of non-enzymatic glycation of proteins, also known as Millard reaction, which lead to the modification in their structures and functions [6]. During AGEs formation, the fragments of Schiff base increase the reactive dicarbonyl intermediates production; glyoxal (GO) and methylglyoxal (MGO). These highly reactive moieties

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trigger protein glycation reaction at a much faster rate than the precursor sugars (glucose, fructose, and ribose) [4,7]. The resulting AGEs promote vasculitis and atheroma formation in diabetic patients [8].

Earlier studies have found that AGEs ligation with their receptor, RAGE (receptor for AGEs), on blood monocytes causes intracellular oxidative stress, with subsequent upregulation of nuclear factor  $\kappa B$  (NF- $\kappa B$ ), and hence trigger inflammatory cascades [9,10]. It results in increased levels of various proinflammatory genes, including cyclooxygenase-2 (COX-2), tumor necrosis factor-  $\alpha$  (TNF- $\alpha$ ), interleukin-  $\beta$  (IL-1 $\beta$ ), interleukin-  $\delta$  (IL-6) [1,11–14]. COX-2 is associated with increased levels of pro-inflammatory signaling mediator prostaglandin E<sub>2</sub> (PGE<sub>2</sub>) in blood monocytes [15] (Fig. 1). It has been found that COX-2 induction, and increased PGE<sub>2</sub> levels are risk factors for atherosclerotic plaque development in low-density lipoprotein (LDL) receptor-deficient mice. PGE<sub>2</sub> interacts with cell surface scavenging receptors, expressed on blood monocytes, and causes uptake of LDL to form fatty streak, and atheroma formation [16].

Animal models of atherosclerosis, genetic or induced, revealed remarkable beneficial effects with the treatment of nonsteroidal antiinflammatory drugs (NSAID) [17–19]. Individuals on routine treatment with aspirin or NSAIDs have 40–50% reduced risk of developing
cardiovascular diseases. Thus, although many commercially available
drugs, including rofecoxib, valdecoxib, etodolac, celecoxib, etoricoxib,
nimesulide, diclofenac, and indomethacin, have shown to inhibit COX-2
enzyme activity in *ex vivo* assays of prostaglandin formation in whole
blood, and the inhibitory activity of these drugs was only 50% [20].

Several studies have been conducted to identify the inhibitors of the glycation process. So far, various glycation inhibitors, including pyridoxamine, metformin, kremezin, *N*-phenacylthiazolium bromide (crosslink breaker), OPB-9195 (carbonyl amine blocker), alagebrium, atorvastatin, and guanidines, have been identified to interfere with different stages of the Millard reaction [21,22]. Aminoguanidine, a prototype of glycation inhibitor, was found to reduce AGEs-induced diabetopathies

via inhibiting conversion of highly reactive dicarbonyl compounds to AGEs, as well as formation of cross-links and free radical species [23,24]. However, it was not approved for clinical use due to adverse effects, such as vasculitis, gastrointestinal and liver impairment, antinuclear antibody development, pernicious-like anemia, and neoplastic tumors in pancreas and kidney [25]. Besides, other inhibitors were also not attained much acceptance in clinical settings because of adverse effect and/or reduced potency. Therefore, there is a need to identify effective and safe protein glycation inhibitors to prevent chronic inflammation, organs damage, and death in diabetic patients. Our research group has initially identified 2, 4-dinitroanilino - benzoic acid as a promising insulinotropic agent that helps control glycemic index in diabetic rats [7]. Anthranilic acid derivatives have also shown to inhibit the AGEs formation in hepatocyte model, i.e., the cells of the major glucose regulating and detoxifying organ [7]. Besides, we have also reported that gliclazide alters macrophage polarization in diabetic atherosclerosis [26]. We continued to work on the identification of novel agents able to limit AGE-RAGE-mediated inflammatory pathways.

Over the last few decades, 9*H*-carbazole and triazole moieties have attracted much attention in medicinal chemistry due to their wide range of biological activities. The carbazole scaffold shows activities against bacteria, cancer, and Alzheimer's disease [27]. Whereas, triazole nucleus prevents disorders by ligation with proteins, such as enzymes and cellular receptors [28]. Currently, 1,2,3-triazole-conjugated analogs are the focus of attention in medicinal chemistry. They are successfully being used drug candidates, such as fluconazole, itraconazole, voriconazole, posaconazole, a *etc.* [29].

Keeping in view a high prevalence of vascular complications in diabetes, and involvement of AGEs as a key pathogenic factor, the current study was designed to investigate the potential of carbazole-linked 1,2,3-triazoles as antiglycating agents. We hypothesized that carbazole-linked 1,2,3-triazole analogs can inhibit the AGEs formation and associated inflammatory cascade in *in vitro* diabetic environment, and thus

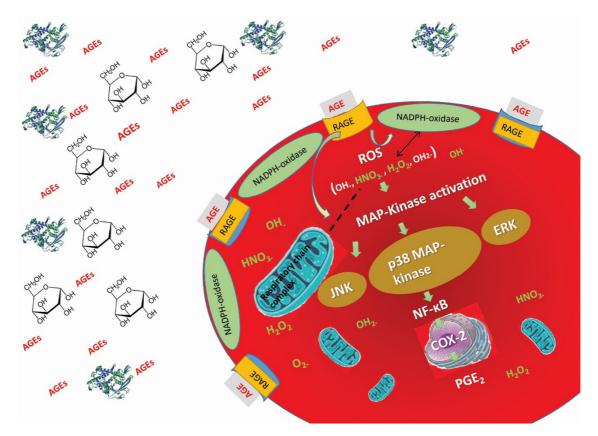


Fig. 1. AGE-RAGE induce intracellular inflammatory cascade.

can prevent / or delay the onset of cardiovascular complications in diabetes. Therefore, we evaluate the potential of carbazole-linked 1,2,3triazole analogs against the AGEs formation, and to prevent the signaling mechanism of AGE-RAGE-mediated ROS-dependent NF-kBinduced COX-2 upregulation and associated PGE2 production. In the present study, we employed the human blood monocytes model, i.e. THP-1 cells, to study the RAGE-ligation mediated upregulation of proinflammatory cytokines signaling in hyperglycemic milieu [22,30-32]. In contrast to lipopolysaccharide (LPS) model or tissue macrophage system, the treatment of human monocytes with reducing sugar (glucose) or dicarbonyl sugar (methylglyoxal) provides an excellent model of diabetic pathological conditions to study the inflammatory cascade. Hence, we employed this model to identify the potential of carbazole-linked 1,2,3-triazoles analogs in RAGE-ligation mediated COX-2 protein/PGE2 inflammatory cytokine up-regulation [32]. To our knowledge, this is the first study examining the antiglycation activity of carbazole-linked 1,2,3-triazoles and their role in preventing AGEmediated up-regulation of COX-2 protein and PGE2 formation.

#### 2. Methodology

## 2.1. In vitro antiglycation activity of carbazole-linked 1,2,3 triazoles analogs

Carbazole, and carbazole-linked 1,2,3-triazoles analogs were tested for their antiglycation activity in two different models: glucose- and MGO-modified BSA models. Rutin and quercetin (Sigma-Aldrich Chemical Corporation, USA) were used as reference compounds, as they are known to ameliorate glycation in the previously reported studies. The antiglycation activity were performed as per the described protocol of Jahan, *et al* [33]. Briefly, at first, in a 96-well black fluorescent plate, 10 mg/mL of bovine serum albumin (BSA; Thermo Fisher Scientific, USA), 0.5 M of glucose (Scharlau, Spain), or 0.1 M of MGO (Sigma-Aldrich USA) were added, and incubated for 7- and 1-day in the glucose and MGO models, respectively, at 37 °C in a 0.1 M sodium phosphate buffer. The buffer contained 0.1 mM sodium azide to prevent microbial growth. Prior to incubation, all the compounds were solubilized at 1 mM concentration in 10% of DMSO, and were added to the reaction mixture in a plate.

After the incubation period, fluorescence intensity of glucose- and MGO-modified BSA were measured at 340exc-440emi nm for glucose, and 355exc-460emi nm for MGO. The percent inhibition was quantified by the following formula:

Fisher Scientific, USA) was used for both cell lines. Controlled atmosphere containing 5% CO<sub>2</sub> to become 80–90% confluent was thus provided. The passage numbers were carefully monitored, until they reached 20.

The cells morphology was observed by using an inverted microscope (Nikon E200, Japan). All the chemicals and compounds, used to study the intracellular cascade, were diluted with the same assay medium.

#### 2.3. Cellular toxicity

Cellular toxicity of carbazole and identified lead carbazole-linked 1,2,3-triazoles analogs in glucose- and MGO-mediated protein glycation assays were analyzed at various concentrations (10, 30, 50, 100, 200, and 500  $\mu$ M) for their toxicity profile, using HepG2, and THP-1 cell lines. The MTT, and WST-1 metabolic assay were performed for HepG2, and THP monocytes. Briefly,  $7 \times 10^4$  of HepG2 cells/mL, and  $20 \times 10^4$  of THP-1 monocytes/mL were seeded in 96-well sterile cell culture treated plates, and treated with the compounds for 24 h. Followed by the incubation, MTT (20 µL), and WST-1 (20 µL) reagents were added to each well of HepG2 cells, and THP-1 monocytes, respectively. After 4 h of incubation, the medium was carefully aspirated. The DMSO (100 µL) were used to solubilize formazan crystals in MTT-treated HepG2 cells. The metabolic activity was initiated by cleavage of tetrazolium salt (MTT, and WST-1) to produce formazan in viable cells by the action of mitochondrial dehydrogenases. The colorimetric measurement was performed at 540, and 450 nm, respectively, using a microplate reader (Varioskanmicroplate reader, Thermo Fisher Scientific, USA). The cells without any treatment have served as negative control, while cells treated with doxorubicin have served as positive control.

#### 2.4. Glucose- and MGO-derived AGEs formation

The monocytes were stimulated by the exposure of glucose- and MGO-derived AGEs (MGO-AGEs). The preparation of glucose-AGEs was done by incubating fatty acid-free BSA (10 mg/mL, Calbiochem, Merck, Germany) with glucose (500 mM), D-fructose (500 mM, Scharlau, Spain), and MGO (3 mM) in PBS (100 mM; pH = 7.4) medium at 60 °C for 6 weeks in a dark, and sterile condition [38]. Whereas MGO-AGEs were formed by slightly modifying the method of Shanmugam  $et\ al\ [22]$ . Briefly, fatty acid-free BSA (50 mg/mL) was incubated with MGO (500 mM) for 24 h under sterile conditions. The ionization power was critically controlled during the complete incubation period, and maintained to 7.4 pH by using sodium hydroxide (NaOH; 1 M). Subsequently, the prepared mixtures were dialyzed against PBS to remove free unbound

%Inhibition of fluorescence = (1 - Fluorescence of test compounds/Fluorescence of glycated BSA) x 100

Compounds those exhibited greater than 50% inhibition were diluted serially to measure half-maximal inhibitory concentration ( $IC_{50}$ ), using EZ-FIT enzyme kinetics software [34,35].

#### 2.2. Human monocyte and hepatocyte culture

Human THP-1 monocytes (European Collection of Authenticated Cell Cultures (ECACC), Sigma-Aldrich, USA) and HepG2 (human hepatocytes) (American Type Tissue Culture Collection (ATCC), USA) were maintained as per the described protocols of Balakrishna., *et al.* and Jiang., *et al.* with slight modifications [36,37]. Briefly, the monocytes and hepatocytes were grown in tissue culture 75 cc flask containing ATTC modified RPMI 1640 medium (Gibco, Thermo Fisher Scientific, USA), and minimum essential medium (MEM, Gibco, Thermo Fisher Scientific, USA), respectively. 10% Fetal bovine serum (Gibco, Thermo

glucose, and MGO. The fluorometric measurement (Varioskanmicroplate reader, Thermo Fisher Scientific, USA), and estimation of endotoxins levels (Lonza, Chromogenic LAL Assay Kit, Thermo Fisher Scientific, USA) were carried out prior to use. Both the AGEs mixtures were aliquoted in sterile vials to avoid the freeze-thaw cycles, and stored at  $-80~^\circ\mathrm{C}$  till use.

#### 2.5. Antioxidant property analysis via H2DCFDA assay

2',7'-Dichlorodihydrofluorescein diacetate ( $H_2DCF$ -DA) was used to evaluate the ROS generation in THP-1 monocytes, according to the method described by Hu, Y., et al. with minor modifications [39]. The  $H_2DCF$ -DA is a non-fluorescent permeant probe that upon cleavage by intracellular esterases becomes impermeant. Upon oxidation by intracellular ROS, it generates fluorescent DCF [40]. Briefly, THP-1

monocytes (1  $\times$  10<sup>6</sup> cells/mL) were seeded in a 96-well black fluorescent plate, and pre-treated with  $H_2DCF\text{-}DA$  (10  $\mu\text{M}$ ; Sigma-Aldrich, USA) for 45 min at 37 °C in a dark. Followed by washing with phenol red free modified RPMI to prevent false results, cells were exposed with potent antiglycating analogs with non-toxic profile for an hour at 37 °C in a 5% CO2 incubator. Standard antiglycating compounds: rutin and quercetin, were used to compare the activity of active carbazole-linked 1,2,3-triazoles analogs [41]. While pyrrolidine dithiocarbamate (PDTC), an k $\beta$  inhibitor, was used as a standard. All the compounds were used in varying concentrations (10, 30, 50, and 100  $\mu\text{M}$ ). Following the treatment with compounds, monocytes were stimulated to produce ROS by using 50  $\mu\text{g/mL}$  AGEs (glucose- and MGO-AGEs) for 24 h.  $H_2O_2$  (10  $\mu\text{M}$ ), and AGEs were used as positive controls, while BSA-treated monocytes have served as a negative control.

Fluorescence was measured at 485exc-520emi nm, using spectro-fluorometer (Varioskanmicroplate reader, Thermo Fisher Scientific, USA).

#### 2.6. NF-kB nuclear translocation analysis via immunochemistry

To detect nuclear translocation of NF-κB p65 subunit in human THP-1 monocytes, immunocytochemistry technique was employed. Monocytes (1  $\times$  10<sup>6</sup> cells/mL) were pre-treated with 100  $\mu$ M of selected analogs for one hour, as this concentration exhibited a maximum inhibition in AGEs-mediated ROS generation was observed. Subsequently, monocytes were exposed to AGEs (50 µg/mL) (glucose- and MGO-AGEs) for one hour at 37  $^{\circ}$ C. Later, cells were washed thrice with chilled PBS, fixed and permeabilized by paraformaldehyde (4%; 10 min) and triton X-100 (0.2%; 10 min), respectively. To prevent the nonspecific binding, the permeabilized monocytes were treated with blocking solution (1% BSA dissolved in PBS and Tween-20 (0.1%)) for an hour at room temperature. These monocytes were then incubated with NF-κB p65 (primary antibody, 1:300, Thermo Fisher Scientific, USA) overnight at 4 °C, and then with Fluorescein isothiocyanate (FITC)-conjugated polyclonal antibody to rabbit IgG (secondary antibody, 1:1000 Abcam, UK). The nucleus of monocytes was counterstain with DAPI (Thermo Fisher Scientific, USA). The cells, treated with 50  $\mu g/mL$  of BSA, and AGEs, have served as negative- and positive controls, respectively. All the images were taken by Nikon 90i microscope, fixed with DXM-1200 digital camera (Nikon, Japan). ImageJ (Image processing and analysis Java program- NIH) was used for quantitative analysis of mean p65 fluorescence intensity with mean fluorescence of DAPI positive monocytes in a six-random high-power field for each treatment.

#### 2.7. Proinflammatory enzyme COX-2 analysis via immunoblotting

The immunoblotting was performed to identify the levels of COX-2 enzyme, and  $\beta$ -actin protein in human THP-1 monocytes. The cells were pretreated with analogs (100  $\mu M$ ) for one hour, and then incubated with 50  $\mu g/mL$  of AGEs (glucose- or MGO-AGEs) for 6 h. To lyse the monocytes, RIPA lysis buffer was used, and sonication was performed. Later, monocytes were subjected to centrifugation at 12,000 rpm at 4  $^{\circ}$ C for 20 min. The lysate was aliquoted, and stored at -20  $^{\circ}$ C till analysis.

10% gel (SDS-PAGE) was run to separate the 50 µg/mL of COX-2 enzyme, and  $\beta$ -actin protein bands. The bands were transferred to nitrocellulose membrane, and membrane was incubated with a blocking solution for one hour at room temperature to prevent it from nonspecific binding. After that membranes were incubated with monoclonal COX-2 (Thermo Fisher Scientific, USA) and  $\beta$ -actin (Cloud-Clone Corp., China) primary antibodies for 24 h at 4 °C to probe the protein bands. The membrane was washed with tris buffer saline tween (TBST), and incubated with HRP mouse mono anti-rabbit IgG (secondary antibody; Abcam, UK) at room temperature for one hour. To visualize the bands, chemiluminescence detection kit (ECL) (Sangon Biotech, China) was used, and densitometric analysis was performed by using ImageJ (Image processing and analysis in Java - NIH).

#### 2.8. Pro-inflammatory cytokine PGE2 analysis via ELISA

Briefly, THP-1 monocytes ( $5 \times 10^5$  cells/mL) were plated in a 6-well cell-culture treated plate to pre-expose with analogs ( $100~\mu M$ ) for one hour, and then activated with  $50~\mu g/mL$  of AGEs for 6 h. The cells were centrifuged at 1000~rpm for 10~min, pallets were discarded, and the levels of PGE2 in supernatant were measured by using the commercially available PGE2 competitive ELISA kit (Cloud-Clone Corp., China), in accordance to the manufacturer's protocol.

#### 2.9. Statistical analysis

All the statistical analysis was conducted using IBM SPSS (Statistical Package for the Social Sciences) version 21.0. The quantitative data were represented as means  $\pm$  standard deviation (SD) of three to five *in vitro* cellular model-based experiments. The significance among variables of various mechanistic activities at various concentrations of analogs were compared with glucose- and MGO-AGEs (positive control) and quercetin, rutin, and PDTC (standards) by applying one-way analysis of variance (ANOVA). Followed by *post hoc* Tukey Alpha test analysis, and *P*-value <0.05 was considered statistically significant.

#### 3. Results

#### 3.1. Inhibition of protein glycation via carbazole- linked 1,2,3-triazoles

In the present study, the conjugated carbazole-1,2,3-triazoles compounds (Fig. 2) **2–16** were initially tested to examine their inhibitory potential against *in vitro* glucose- and MGO-induced non-enzymatic BSA-glycation. Our data revealed that the parent molecule carbazole (compound 1) exhibit a weak inhibition (IC $_{50}$  763.3  $\pm$  15.2  $\mu$ M) against glucose-modified BSA, while was found inactive in MGO-modified BSA model. The presence of triazole nucleus with carbazole moiety (compound 2) dramatically increased the inhibitory potential by showing IC $_{50}$  351.3  $\pm$  7.09  $\mu$ M, and 797  $\pm$  7.0  $\mu$ M in glucose- and MGO-BSA models, respectively.

To compare the antiglycation potential of carbazole-triazole derivatives, selected flavonoids rutin and quercetin, were selected as reference molecules. The skeleton of these molecules carries polyhydroxy moieties serving as free radical scavengers in non-enzymatic glycation reaction [42]. They found to have various medicinal properties, including anticancer, anti-inflammatory, and antiaging activities [32]. Among the tested flavonoids, we found that rutin has relatively higher antiglycation potential in both models (glucose-BSA:  $IC_{50} = 83 \pm 1.0 \, \mu M$ , and MGO-BSA:  $104 \pm 2.0 \, \mu M$ ), as compared to quercetin (glucose-BSA:  $IC_{50} = 96 \pm 4.0 \, \mu M$ , and MGO-BSA:  $138 \pm 4.4 \, \mu M$ ). These results on rutin and quercetin were consistent with previous data [42].

To study the antiglycation activity of carbazole-linked 1,2,3-triazoles derivatives, the compounds  $3{\text -}12$  having substitutions on aryl, such as X (F, Cl, Br, I) Me, OMe, and NO $_2$  groups, compounds 13, and 14 bearing nitrogen heterocycles (pyridyl, imidazolyl), and compounds 15, and 16 (dimers of carbazole triazole) were tested. The four halogenated congeners *i.e.*, compounds 3–6 carrying fluoro, chloro, bromo, and iodo substitution at the C-3 position, were found to be inactive in both glycation models.

Methylation at the C-2 (compound 7) has resulted in a moderate inhibition in glucose-BSA (IC $_{50}=180.3\pm1.52~\mu\text{M}$ ) and MGO-BSA (IC $_{50}=275\pm5.0~\mu\text{M}$ ) models, as compared to reference molecules. To explore the optimal carbon position for methyl substitution, a regioisomer of compound 7, i.e., compound 8, was tested for antiglycation activity. Compound 8 carrying a methyl group at the C-3 position, revealed a remarkable higher inhibitory activity against glucose-and MGO-BSA as showed by the reduced IC $_{50}$  (glucose-BSA: IC $_{50}=65\pm10.0~\mu\text{M}$ , MGO-BSA: IC $_{50}=130\pm5.0~\mu\text{M}$ ). Furthermore, it showed a greater activity than the reference quercetin in both models, while rutin only revealed inhibition in glucose-BSA model. On the other hand, the

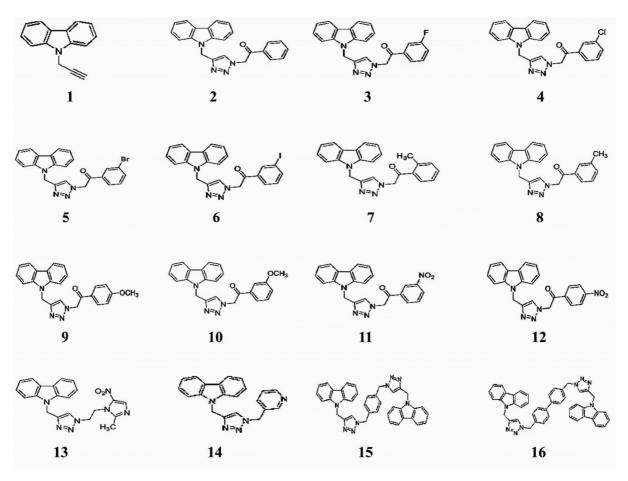


Fig. 2. Library of carbazole-1,2,3-triazole 2-16.

presence of methoxy group, instead of methyl, at C-3 (compound 9), and C-4 (compound  ${\bf 10}$ ) positions causes a loss of antiglycation activity in both models.

Next, nitro substitution at C-3 (compound 11) showed a moderate inhibition in both models (glucose-AGEs:  $IC_{50}=125\pm5.0~\mu M$ , and MGO-AGEs:  $IC_{50}=147\pm10~\mu M$ ), as compared to references (rutin, and quercetin). To identify the substitution pattern that maximizes its antiglycation potential, a regioisomer of compound 11, *i.e.*, compound 12 that possessed nitro group at the C-4 position was tested. Again, remarkable change in inhibitory activity was observed against glucose-and MGO-modified BSA with  $IC_{50}=69.8\pm2.4~\mu M$ , and  $76.1\pm6.0~\mu M$ , respectively (See Table 1) than the reference molecules (rutin and quercetin).

Furthermore, compound 13, possessing a pyridyl substitution at C-3 showed an excellent antiglycation activity in both models (glucose-AGEs: IC $_{50}=63\pm3.0~\mu\text{M}$ , and MGO-AGEs:  $135\pm5.0~\mu\text{M}$ ). Moreover, compound 13 showed several fold better inhibition of protein glycation than the reference compounds in glucose-and MGO-AGEs model, while it showed similar inhibitory activity as the reference compound, quercetin. Compound 14 that possesses nitro imidazole at C-5 has shown a relatively lower activity against glucose-BSA model (IC $_{50}=250\pm5.0~\mu\text{M}$ ), while it was inactive in MGO-BSA model.

Besides these, dimer of carbazole triazole (compound 15) having phenyl ring, sandwiched between two carbazole linked 1,2,3-triazoles was also tested. Compound 15 has shown a moderate activity in both models (glucose-AGEs:  $IC_{50}=138\pm2.0~\mu\text{M}$ , and MGO-AGEs:  $333\pm0.2~\mu\text{M}$ ). Compound 16, another dimer with biphenyl ring instead of phenyl, was tested and it showed a weak inhibition with  $IC_{50}=600\pm10.0~\mu\text{M}$  in glucose-BSA model, while inactive in MGO-BSA model.

**Table 1**Antiglycating activity of carbazole - traizole derivatives in glucose- and MGO-AGEs models.

Compounds	Glucose-AGEs		MGO-AGEs	
	% Inhibition ± SD <sup>b</sup>	$\begin{array}{l} \text{IC}_{50}~^{\text{a}} \pm \text{SD}^{\text{b}} \\ (\mu\text{M}) \end{array}$	% Inhibition ± SD	$\begin{array}{c} \text{IC}_{50} \ ^a \pm \text{SD}^b \\ \text{($\mu$M)} \end{array}$
Rutin <sup>s</sup>	$96.9 \pm 0.1$	83.9 ± 1.0	67.1 ± 2.1	104 ± 2.0
Quercetin <sup>s</sup>	$88.8 \pm 1.3$	$96.0 \pm 4.0$	$58.7 \pm 0.1$	$138.3 \pm 4.4$
1	$60.9 \pm 0.8$	$763.3 \pm 15.2$	$26.6\pm2.0$	Na
2	$71.0\pm0.5$	$351.3 \pm 7.09$	$58.3\pm1.5$	$797 \pm 7.0$
3	$26.7 \pm 4.7$	N <sup>c</sup> <sub>A</sub>	$18.2\pm1.3$	Na
4	$25.5 \pm 5.04$	N <sup>c</sup> <sub>A</sub>	$15.6\pm3.8$	NA
5	$29.0\pm6.98$	N <sub>A</sub> <sup>c</sup>	$22.1\pm1.6$	N <sub>A</sub> <sup>c</sup>
6	$43.7\pm3.14$	N <sup>c</sup> <sub>A</sub>	$39.5 \pm 0.7$	NA
7	$79.2\pm1.05$	$180.3\pm1.52$	$72.0\pm1.2$	$275\pm5.0$
8	$92.7\pm1.5$	$65\pm10.0$	$79\pm1.15$	$130\pm5.0$
9	$41.5\pm4.2$	N <sub>A</sub> <sup>c</sup>	$18.1\pm1.01$	NA
10	$34.8 \pm 7.4$	N <sup>c</sup> <sub>A</sub>	$12.1\pm2.70$	Na
11	$86.9 \pm 0.6$	$125\pm5.0$	$75.7\pm0.95$	$147\pm10$
12	$89.1 \pm 0.8$	$69.8 \pm 2.4$	$83.7 \pm 0.71$	$76.1 \pm 6.0$
13	$95.0 \pm 0.36$	$63\pm3.0$	$77.8 \pm 0.53$	$135\pm5.0$
14	$74.1\pm1.52$	$250\pm5.0$	$43.9 \pm 0.76$	NA
15	$79.0\pm1.92$	$138 \pm 2.0$	$71.8 \pm 0.98$	$333 \pm 0.2$
16	$65.8 \pm 2.49$	$600 \pm 10.0$	$41.5\pm3.0$	Na

ICa<sub>50</sub>: Half minimum inhibitory concentration.

SDb: Standard deviation.

Na: Non-active.

Rutin<sup>s</sup>, Quercetin<sup>s</sup>: Standard antiglycating agents.

## 3.2. Carbazole- linked 1,2,3-triazoles cytotoxicity profile in human HepG2 hepatocytes and THP-1 monocytes

To achieve our objectives, the toxicity of compounds was evaluated on liver hepatocytes and monocytes. It is well known that drugs withdrawal from clinical trials are often due to drug-induced hepatotoxicity. In the current study, the toxicity of test compounds was evaluated on hepatocytes as liver plays a major role in metabolic transformation of drug. Therefore, testing the toxicity of compounds on hepatocytes, in the early discovery phase, is an appropriate approach to assess the toxicological and pharmacological status of potential drug. Moreover, the cellular-based model for toxicological assessment is effective and economical than an experimental animal model [43].

Because compounds 1–2, 7–8, and 11–16 of carbazole-linked 1,2,3-triazoles, and parent carbazole (compound 1) exhibited the antiglycation activity, they were tested for cytotoxicity at different concentrations (10–500  $\mu$ M) in human HepG2 hepatocytes and THP-1 monocytes by using MTT and WST-1 metabolic assays, respectively. Rutin, and quercetin, as reference glycation inhibitors, and doxorubicin, as reference toxic compound, were used to compare the toxicity profile of different compounds. We found no toxic activity of 1–2, 11–13, and 15 up to 100  $\mu$ M concentration either in human THP-1 monocytes or in HepG2 hepatocytes. Though they exhibited varying levels of cytotoxicity, from weak to moderate, at higher concentrations (250–500  $\mu$ M), as reported in Fig. 3. Whereas, compounds 7–8, 14, and 16 showed toxicity in both THP-1 monocytes and HepG2 cell line. Percent viability of cells treated with standards and compounds at each tested concentration is presented in Supplementary Fig. 1a-c.

Therefore, the non-toxic compounds 1–2, 11–13, and 15 were selected to study their effect in reverting AGE-RAGE-induced intracellular ROS generation, increase of COX-2, and pro-inflammatory mediators in THP-1 monocytes.

The non-toxic concentration of both glucose- and MGO-AGEs was selected by assessing their effect on the viability of THP-1 monocytes at different concentrations (10, 30, 50, 100, 200, and 500  $\mu g/mL$ ). We found that the cell viability was not affected at 50  $\mu g/mL$  of both glucose- and MGO-AGEs, therefore, 50  $\mu g/mL$  AGEs were selected to study the effect of compounds against AGEs-induced ROS/NF- $\kappa$ B signaling, and increasing COX-2 protein and PGE $_2$  levels in monocytes (see Supplementary Fig. 2).

## 3.3. Carbazole- linked 1,2,3-triazoles impede glucose- and MGO- AGEs-induced oxidative stress in human THP-1 monocytes

In chronic hyperglycemia, glycated proteins exacerbate oxidative

stress by generating ROS, resulting in pathophysiological effects on vascular system [7,22,45]. Our earlier study has highlighted the pathogenic role of AGEs through modulation of intracellular redox state in macrophages through RAGE/TLR4 nexus that consequently cause diabetic vascular impairments [26]. In the current study, we investigated the role of carbazole-linked 1,2,3-triazole derivatives 2, 11-13, and 15, and compound 1 in inhibiting the AGE-RAGE- induced intracellular ROS production in AGEs-treated THP-1 monocyte models. Our data revealed that AGEs significantly elevate the ROS formation in activated THP-1 monocytes, as compared to untreated- and BSA-treated monocytes controls, by showing P-value <0.05 (Fig. 4a). These findings were consistent with previously reported studies [26,32]. The results showed that compounds 11-13, and 15 reversed the RAGE ligation- mediated ROS formation in AGEs-activated THP-1 monocytes, as compared to the reference compounds (rutin, and quercetin), and PDTC (NF-κB inhibitor). Among all the tested compounds, compounds 12, and 13 significantly inhibited the ROS formation, as much as PDTC and rutin in glucose-AGEs- treated THP-1 monocyte model. Compounds 2, 11, 15, and quercetin exhibited a slightly lower antioxidant activity than compounds 12, and 13 (Fig. 4).

Finally, compounds **12**, and **13** exhibited a potent antioxidant activity in MGO-AGEs-treated THP-1 monocyte model. They significantly (P < 0.05) suppressed the ROS formation, as inferred from green fluorescence intensity, in comparison to rutin. As shown in Fig. 4c, a slightly decreased inhibition was produced by compounds **2** and **11**, as compared to standards PDTC and quercetin. Based on the antiglycation and anti-oxidant activities, as well as on the nontoxic profile of carbazole-linked 1,2,3-triazole derivatives, compounds **12** and **13** were selected to study their possible inhibition of NF- $\kappa$ B activation. Parallel evaluation of COX-2 induction and PGE<sub>2</sub> production was carried out in AGE<sub>S</sub>-activated THP-1 monocytes. ROS inhibition produced by reference molecules and tested compounds at each concentration in glucose-and MGO-AGEs models are presented in Supplementary Fig. 3a-d.

#### 3.4. Carbazole- linked 1,2,3-triazoles suppress glucose- and MGO- AGEsinduced NF-κB translocation

Compounds **12**, and **13** role was further investigated in AGE-RAGE ligation-mediated NF-κB translocation *via* immunocytochemistry of p65 subunit. These compounds showed a potent antioxidant activity at the cellular level among all the tested carbazole-linked 1,2,3-triazole analogs. In agreement with previous study of Shanmugam, *et al* [22], we found that AGEs caused NF-κB translocation in THP-1 monocytes, comparable to BSA-treated THP-1 monocyte control model. The pretreatment of THP-1 monocytes with compounds **12**, and **13** significantly

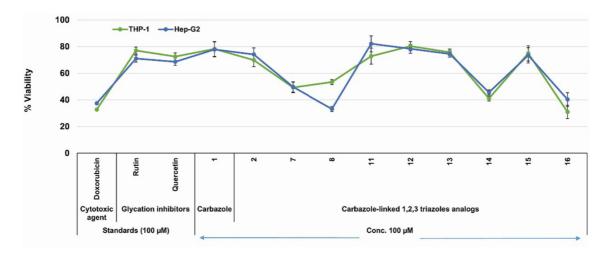


Fig. 3. Toxicity analysis of standards and selected carbazole- linked triazoles 1–2, 7–8, and 11–16 at 100  $\mu$ M against human THP-1 monocytes, and HepG2 hepatocytes. Values of three independent experiments is presented as mean  $\pm$  SD.

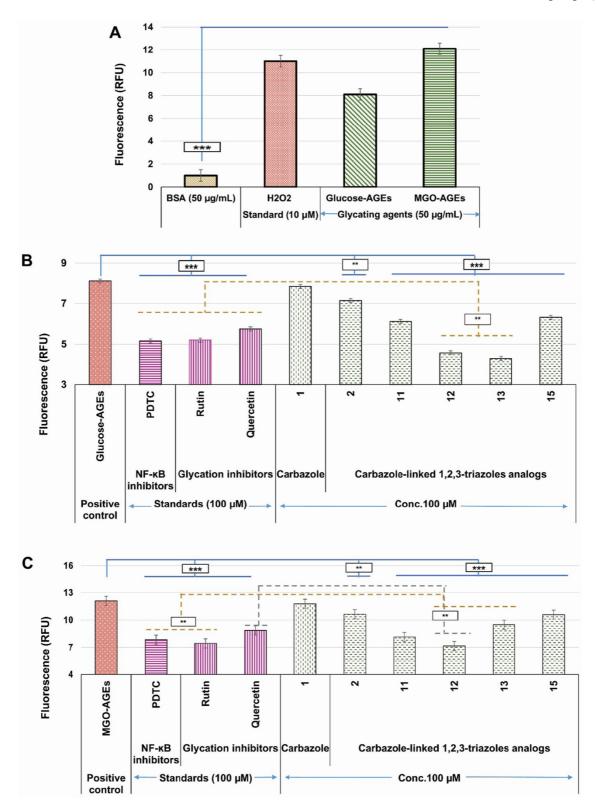


Fig. 4. AGE-RAGE ligation-induced intracellular ROS inhibition via selected carbazole-triazole analogs. (A) Briefly, the green fluorescence intensity in DCFH-DA probed human monocytes have found significantly increased at 485 nm excitation -520 nm emission, followed by the treatment of standard oxidizing  $(H_2O_2)$  and glycation agents (50  $\mu$ g/mL; positive controls), as compared to BSA (negative control). (B-C) Cells pretreated with lead antiglycation compounds 2, 11–13, and 15, and standards at 100  $\mu$ M were significantly decreased ROS formation in glucose- and MGO-AGEs treated THP-1 models, respectively. Values of three independent experiments is presented as mean  $\pm$  SD. P value <0.05, 0.01, and 0.001 are denoted by \*, \*\*, and \*\*\* respectively. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article.)

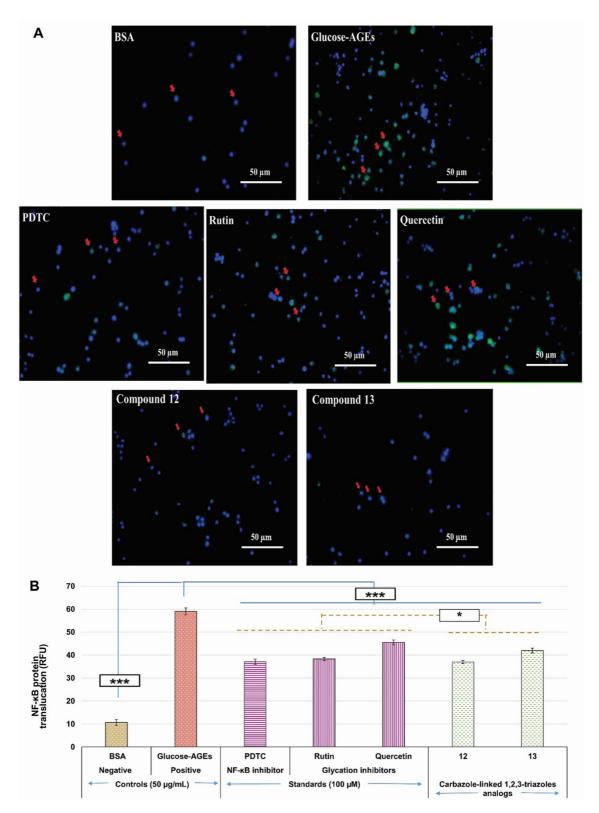


Fig. 5. Carbazole-1,2,3-triazole derivatives halt glucose-AGEs- induced NF- $\kappa$ B translocation in human monocytes model. (A-B) It is represented that glucose-AGEs at 50  $\mu$ g/mL significantly increased NF- $\kappa$ B fluorescence, as compared to negative control (BSA), whereas, the green fluorescence was significantly reduced with compounds 12, and 13 treatment. Value of three independent experiments is presented as mean  $\pm$  SD. P value <0.05, 0.01, and 0.001 are denoted by by \*, \*\*, and \*\*\* respectively. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article.)

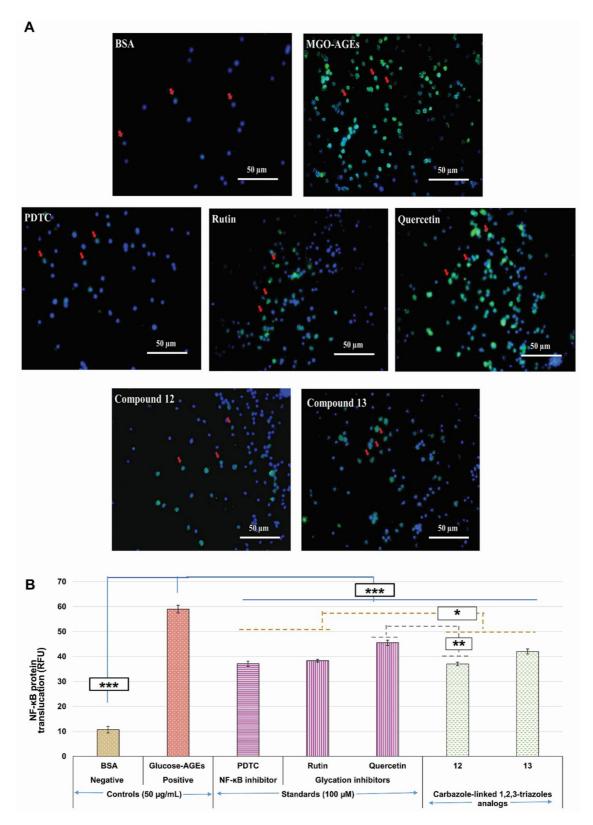


Fig. 6. Carbazole-1,2,3-triazole derivatives inhibit MGO-AGEs mediated NF-κB translocation in human monocytes model. (A-B) It is represented that MGO-AGEs (50  $\mu$ g/mL) significantly increased NF-κB translocation, as compared to BSA (negative control). Pretreatment of cells with compounds 12, and 13 reduced the intensity of green fluorescence by halting NF-κB translocation. Value of three independent experiments is presented as mean  $\pm$  SD. P value <0.05, 0.01, and 0.001 are denoted by \*, \*\*, and \*\*\* respectively. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article.)

decreased the AGEs-treated NF-k $\beta$  translocation (*P*-value <0.05). Compounds **12**, and **13** were found to be more active than standards PDTC and rutin in both models. They expressed relatively higher suppressive potential of NF-kB translocation than standard quercetin in glucose-AGEs model, whereas compound **12** was found more potent than quercetin in MGO-AGEs model. Compound **13** exhibited similar activity as quercetin in MGO-AGEs model, as shown in Fig. 5a, and b, and 6a, and b. These observations suggest that the inhibitory effect of compounds **12**, and **13** on NF-kB translocation was associated with AGEs-induced ROS inhibition in THP-1 monocytes (See Supplementary Fig. 4a-d).

## 3.5. Carbazole-linked 1,2,3-triazoles reduce induction of glucose- and MGO-AGEs- induced proinflammatory COX-2

Based on promising inhibitory effect on RAGE ligation-mediated ROS/NF- $\kappa$ B, compounds **12**, and **13** were further studied for their ability to prevent elevated COX-2 protein levels in AGEs-activated THP-1 monocytes. The cells were pretreated with compounds **12**, and **13** at 100  $\mu$ M for an hour, and then stimulated with AGEs for 6 h. Following

protein extraction, western blotting and normalization with β-actin protein were performed, and the levels of COX-2 were determined as fold inductions. Our results were consistent with the previously reported studies [22]. COX-2 levels were higher in AGEs-treated THP-1 monocyte than in BSA-treated control (P-value <0.05), as depicted in Fig. 7a. Compounds 12 and 13 produced 3- and 3.5-fold reduction of COX-2 (Fig. 7b), respectively. In MGO-AGEs-treated THP-1 model, the compounds 12, and 13 produced 2.1-, and 1.34-fold decrease in COX2 levels, respectively (Fig. 7c). Our data revealed that compounds 12, and 13 were more potent in decreasing COX-2 levels, induced by both AGEs, as compared to standards PDTC (glucose-AGEs: 2.16-fold; MGO-AGEs: 1.60-fold) and rutin (glucose-AGEs: 2.09-fold; MGO-AGEs: 1.65-fold). Compounds 12 and 13 exhibited a greater activity than quercetin (1.6-fold) in glucose-AGE-treated THP-1 monocytes. Compound 12 also exhibited a greater activity than quercetin (1.31-fold) in MGO-AGEtreated model, while compound 13 showed a similar activity as quercetin.

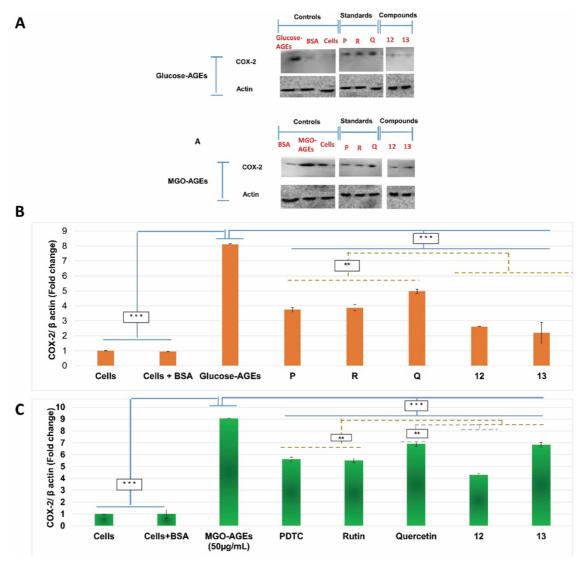


Fig. 7. Reduction of glucose- and MGO-AGEs-mediated COX-2 levels via selected carbazole-1,2,3-triazole analogs. (A) It is represented that human monocytes pretreated with compounds 12, and 13 at 100  $\mu$ M for an hour, and stimulated with glucose- and MGO-AGEs for 6 h significantly reduced the COX-2 protein expression. (B-C) The reduction in AGE-RAGE-mediated COX-2 levels were observed as fold change, as compared to control AGEs.  $\beta$ -Actin was used as an internal reference to normalize COX-2 protein expression. Values of two independent experiments is presented as mean  $\pm$  SD. P value <0.05, 0.01, and 0.001 are denoted by \*, \*\*, and \*\*\* respectively.

Abbreviations: P: PDTC, R: Rutin, Q: Quercetin.

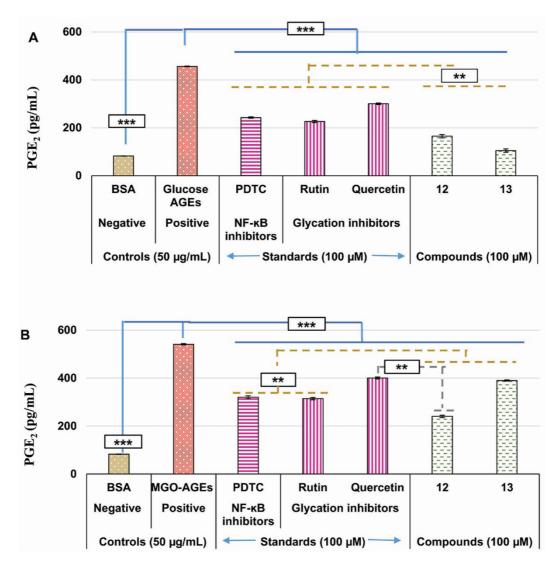


Fig. 8. Inhibition of AGEs-induced proinflammatory PGE<sub>2</sub> via carbazole-triazole analogs in monocytes models. (A-B) Cells pre-treated with standards (PDTC, rutin, quercetin), and compounds 12, and 13 exhibited a significantly reduced AGEs-induced PGE<sub>2</sub> formation, as measured in cells supernatant by using ELISA. Values of two independent experiments is presented as mean  $\pm$  SD. P value <0.05, 0.01, and 0.001 are denoted by \*, \*\*, and \*\*\* respectively.

### 3.6. Carbazole- linked 1,2,3-triazoles alleviate glucose- and MGO-AGEs-induced PGE<sub>2</sub> levels

AGEs induce the production of proinflammatory mediator  $PGE_2$  via COX-2 upregulation, which is associated with complex diabetic vascular complications [22,32]. Considering the role of compounds 12, and 13 in alleviating AGEs-mediated upregulation of COX-2, their inhibitory effect was investigated on  $PGE_2$  production in THP-1 monocytes. Compounds 12, and 13 significantly reduced the  $PGE_2$  levels (P value <0.05) in AGEs-treated THP-1 monocytes, as shown in Fig. 8a, and b. PDTC and rutin exhibited a relatively greater suppression of  $PGE_2$  levels in both glucose- and MGO-AGEs models than quercetin.

These findings suggest that compounds 12, and 13 by interfering AGE-RAGE-ligation, can decrease ROS generation and NF- $\kappa$ B activation in human monocytes. Consequently, the levels of proinflammatory markers, such as COX-2, and PGE2 decline. The present study identifies carbazole-linked 1,2,3-triazoles 12, and 13 as potential downregulators of COX-2 protein via impeding AGEs-induced proinflammatory intracellular cascade.

#### 4. Discussion

Chronic hyperglycemia accelerates the non-enzymatic protein glycation [4,33]. The non-enzymatic protein glycation involves methylglyoxal (MGO) as a highly reactive intermediate, which leads to the formation of AGEs [44]. AGE-RAGE ligation leads to the activation of intracellular inflammatory mediators, thereby it activates peripheral monocytes and induces vascular dysfunction [32,45]. In the present study, the MGO-BSA glycation model was employed by incubating BSA with MGO. The formation of MGO-BSA (dicarbonyl sugar containing AGEs) was quantified following 24 h of incubation, instead of 7 days incubation as in the classical glucose-BSA model (single carbonyl sugar containing AGEs) that we also used in comparison with MGO-BSA. Our data demonstrate that carbazole-linked 1,2,3-triazole analogs possess inhibitory activity in both glycation models.

The extent of inhibitory activity of test compounds was greatly influenced by the substitution pattern, and carbonyl moieties. The addition of acetophenone ring in carbazole-triazole skeleton has yielded a remarkable increase in the inhibition of protein glycation in both models. The compounds substituted with halogen moieties, such as fluoro (compound 3), chloro (compound 4), bromo (compound 5), and iodo (compound 6) at C-3 of acetophenone ring were found to be

inactive in both models. Whereas, methylation at C-2 (compound 7) had exhibited a relatively moderate inhibition in both models, as compared to methyl group at C-3 position (compound 8) which contributed substantially in *in vitro* antiglycation activity. Furthermore, the methoxy substitution at C-3, and C-4 (compounds 9, and 10), respectively resulted in a loss of activity in both models. Next, nitro moiety at C-3 (compound 11) had shown a moderate inhibitory activity in both models, while substitution of nitro moiety at C-4 produced a remarkable outcome with an excellent inhibitory activity of compound 12 in both models. Furthermore, pyridine substitution at C-3 in compound 13 suppressed the protein glycation, whereas nitro imidazole substitution at C-5 in heterocyclic compound 14 showed a weak activity in glucose-BSA model, and no activity in MGO-BSA model.

At last, dimer of carbazole triazole (compound 15) with phenyl ring between two carbazole-linked 1,2,3-triazole displayed a moderate antiglycation activity in both models. The dimer with biphenyl ring (compound 16) further showed a decrease in activity in glucose-BSA model, but no activity in MGO-BSA model.

Carbazole-linked 1,2,3-triazoles exerted a preventive influence against AGEs-mediated dysfunction at cellular levels. We observed that in downstream inflammatory cascades initiated by AGE-RAGE interaction, the most active compounds 12, and 13 actively reduced AGEsmediated effects. Finally, we propose that nitro substitution at C-4 of acetophenone and C-3' pyridyl substitution at the carbazole-1,2,3-triazoles skeleton in compounds 12, and 13, respectively, confer the compounds the inhibitory activity against AGEs-induced-inflammatory mediators.

Numerous studies highlighted the role of AGEs-RAGE ligation in oxidative imbalance and elevated pro-inflammatory mediators with activation of monocytes [32,45] and other cell types, including macrophages, neutrophils, eosinophils, and cardiomyocytes, [46,47]. The underlying mechanisms involve the activation of NADPH oxidase (NOX) with stimulation of both the mitochondrial respiratory chain complex [48] and NF-kB pathway [49]. Several studies have reported disproportion from the baseline levels of endogenous pro-oxidative and antioxidative enzymes, resulting in ROS formation. The overwhelming intracellular oxidative stress ilead to the on-set of diabetic vascular complications [50,51]. ROS is one of the prominent players in AGEsstimulated pro-inflammatory pathway, associated with NF-κB activation [32,52]. In line with that evidence, the present study reports an increase in ROS generation in THP-1 monocytes in response of AGEs treatment. Carbazole-linked 1,2,3-triazoles 12, and 13 pretreatment has caused a reduction in ROS formation, as reference antiglycation agents. Our findings are consistent with the study by Shazia et al., that demonstrated ROS inhibition via bicarbazole-linked triazoles in human whole blood and isolated neutrophils abated inflammation [53].

Previous studies indicated that AGE-RAGE-ligation-mediated intracellular ROS production stimulates NF- $\kappa$ B in diabetes [22,26,54]. The AGE-RAGE ligation is associated with *de novo* RelA(p65) mRNA synthesis, which persistently accumulates transcriptionally active NF- $\kappa$ B [55]. Similarly, our study shows that the increase ROS formation causes the activation of NF- $\kappa$ B, following treatment of THP-1 monocytes with AGEs. Besides, monocytes pretreatment with PDTC, a standard NF- $\kappa$ B inhibitor, has inhibited RAGE-ligation induced ROS / NF- $\kappa$ B in cells. The treatment with carbazole-linked 1,2,3-triazoles 12, and 13 also attenuated the glucose- and MGO-AGEs-induced NF- $\kappa$ B (p65) translocation in human THP-1 monocytes. This suggests that compounds 12, and 13 can suppress the NF- $\kappa$ B mediated signaling by partly interfering with the AGE-RAGE/ROS nexus in monocytes.

Increasing body of evidence supports the role of COX-2 in the pathophysiology of atherosclerosis [22,23]. The COX-2 upregulation increases inflammatory mediators that initiate vascular monocyte adhesion and migration, and hence cause chronic vascular inflammation [56–57]. AGE-RAGE interaction is associated with accelerated inflammatory response by the upregulation of COX-2 expression, and associated PGE<sub>2</sub> secretion in monocytes [58,59], thereby playing a role in

diabetes-associated vascular dysfunction [22,32]. Growing evidence points out the relevance of COX-2 inhibition as therapeutic approaches to avert atheroma formation [22,32,50]. Our findings also establish that AGEs treatment elevates COX-2 protein and PGE2 levels by activating ROS/NF-κB signaling in the monocytes. Compounds 12, and 13 pretreatment effectively suppress the AGEs-induced COX-2 and PGE2 levels in THP-1 monocytes. Our findings are in agreement with the study of Feng-Ming Ho et al. [60]. They reported that LCY-2-CHO (carbazole derivative) downregulates proinflammatory iNOS, COX-2, and TNF-α gene expression via inhibiting the p38 MAPK pathway, and AP-1 activation in macrophages [60]. Our findings are also in-line with the earlier study of Taechowisan et al. that showed that 3- methylcarbazoles (carbazole derivative) suppressed proinflammatory  $PGE_2$  in LPS- and pam3CSK-activated macrophages, and thus prevented inflammation [61]. Moreover, the MAP kinases (extracellular signal-regulated kinase and c-Jun N-terminal kinase), and NF-κB nexus are components of the AGE-RAGE intracellular cascade and regulate COX-2 expression in monocytes [59,62]. The present study further supports our findings about the role of AGE-RAGE/ NF-κB nexus in COX-2 induction, and inhibition via PDTC (NF-κB nexus inhibitor) and carbazole-linked triazoles.

#### 5. Conclusion

Novel carbazole-linked 1,2,3-triazole derivatives, carrying a nitro substitution at C-4 of acetophenone or a 3' pyridyl substitution at the ring of carbazole-1,2,3-triazoles skeleton, have shown to inhibit both the *in vitro* formation of AGEs and their pro-inflammatory effect on THP-1 monocytes. By interfering with the protein glycation reaction, these compounds were found as novel antiglycation agents with a potential to prevent or delay the onset of vascular inflammation in diabetes. The validation of this preliminary results towards the treatment of vascular diabetic disease deserves further investigation in *in vivo* animal model.

#### Credit authorship contribution statement

Humera Jahan: Conceptualization, Data curation, Funding acquisition, Formal analysis, Investigation, Methodology, Project administration, Resources, Supervision, Writing - original draft, Writing - review & editing, Visualization. M. Iqbal Choudhary: Conceptualization, Formal analysis, Resources, Supervision, and Writing - review & editing. Nimra Naz Siddiqui: Methodology, Investigation, Writing - original draft. Shazia Iqbal: Synthesis of compounds. Sadia Shaikh: Methodology. Fatima Z. Basha: Supervision of synthesis. Marina Pizzi: Review.

#### Data availability statement

The data that support the findings of this study are available from the corresponding author upon request. Some data may not be made available because of privacy or ethical restrictions.

#### **Declaration of Competing Interest**

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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#### Appendix A. Supplementary data

Supplementary data to this article can be found online at https://doi.org/10.1016/j.cellsig.2022.110372.

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