Abstract-ID: 618 DEHAL1 DEFICIENCY DISRUPTS THYROGLOBULIN HOMEOSTASIS AND IMPAIRS IODINE STORAGE.

<u>Pouya Alikhani</u>¹, Cristian González-Guerrero², Andrea Bertolini³, Valentina Vitelli⁴, Marco Borsò⁵, Rita María Regojo Zapata⁶, Teresa Peluso⁷, Federico Salas⁸, Alessandro Saba⁹, Riccardo Zucchi⁹, José C. Moreno¹⁰

¹Thyroid Molecular Laboratory, Institute for Medical and Molecular Genetics (Ingemm), La Paz University Hospital, Madrid, Spain

²Thyroid Molecular Laboratory, Ingemm, La Paz University Hospital, Madrid, Spain

³University of Pisa, University of Pisa, Italy, Department of Pathology, Pisa, Italy

⁴Department of Pathology, University of Pisa, Italy., Italy

⁵University of Pisa, University of Pisa; Dept. of Pathology, Pisa, Italy, Pisa, Italy

⁶Anatomic Pathology Service, La Paz University Hospital, Madrid, Spain

⁷Thyroid Molecular Laboratory

⁸University of Chicago, Chicago, United States

⁹Department of Pathology, University of Pisa, Pisa, Italy

¹⁰Thyroid Molecular Laboratory, Instirute for Medical and Moleuclar Genetics-Ingemm, La Paz University Hospital, Madrid, Spain

lodine deficiency disorders (IDD) are caused the chronic shortage of iodine intake. However, this definition neglects the influence of genetic factors modulating the individual capacity for iodine handling, including storage and build-up of reserves. Under iodine deprivation, *Dehal1*KO mice develop hypothyroidism in a surprisingly short time, suggesting abnormal iodine storage, but the intrinsic mechanisms have not been investigated.

Aims: To study the impact of Dehal1 deficiency on iodine storage in vivo.

Methods The peripheral thyroid status and the thyroid glands from *Wt* and *Dehal1*KO mice were investigated under sufficient amount of dietary iodine (5.8 µg I/day) for 28 days. Changes in thyroid weight, microarchitecture, cell morphometry and thyroglobulin (Tg) abundance, conformation and excretion were analyzed by histology, immunohistochemistry and ELISA. Gene expression involving iodine handling and Tg-metabolism was monitored by RT-qPCR. TSH, MIT, DIT, T3, T4 were determined by RIA and LC-MS-MS.

Results At 28 days, *Wt* and *KO* mice were both euthyroid by serum logTSH (*Wt*: 1.45±0.05 mU/L vs *KO*: 1.45±0.2 mU/L; p>0.05), T4 (*Wt*: 51±1 ng/ml vs *KO*: 49.7±1.5 ng/ml; p>0.05) and T3 levels (*Wt*: 0.5 ng/ml vs *KO*: 0.47±0.02; p>0.05). Dissected glands were macroscopically similar. However, cuboidal (vs flatenned) thyrocytes and reduced follicular diameters were detectable in *KO* glands, suggesting a hypermetabolic state. Gene expression of iodine handling genes like *Slc5a5*(Nis) and *Dio1* was upregulated by 27 and 2-fold in *KO* mice. *Tg* and mRNAs involved in Tg-processing, structural conformation at the follicle (*P4hb*-Pdi, *Sult1a1*), receptor-mediated metabolism (*Flot1, Asgpr,* but not *Cav*) and transcytosis (*Lrp2*-Megalin, *Rap*) were also 2-10-fold overtranscribed, suggesting a failure of the expected (TSH-independent) thyroid autoregulation by iodine. Importantly, Tg immunodetection revealed clumps of dense Tg aggregates at the periphery of follicles in *KO* glands, leaving a pale center, suggesting the active use of follicular iodine reserves. Furthermore, plasma Tg concentration was higher in *KO* than in *Wt* mice (673 pg/ml vs 418 pg/ml; p<0.05), suggesting enhanced transcytosis and excretion from the thyroid gland. In contrast to peripheral euthyroidism, *KO* mice showed reduced T4 content in the thyroid (141 ng/g vs 48 ng/g; p<0.05) with preservation of T3 (2-fold lowerT4/T3 ratio), suggesting local ID.

Conclusions Despite correct iodine nutrition, the thyroids of *Dehal1*KO mice show typical signs of iodine deficiency. The vulnerability of *Dehal1*KO mice towards hypothyroidism can be mediated by a profound dysregulation of Tg homeostasis, the scaffold for iodine storage at the follicle, interfering the efficient build-up of iodine reserves.