



Endocrine and paracrine control of menstruation

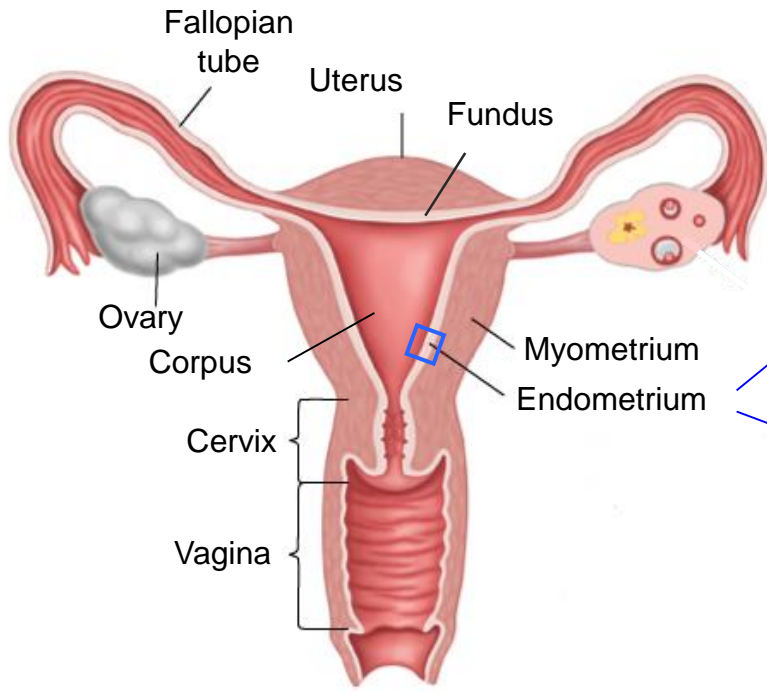
Patrick Henriët
Institut de Duve, UCLouvain



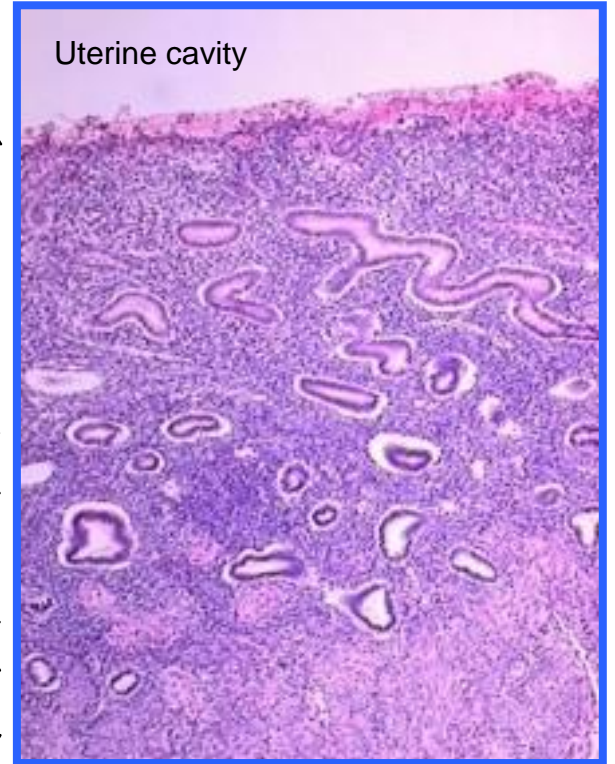
THE BELGIAN
MENOPAUSE SOCIETY

CHU Saint Pierre
November 19, 2022

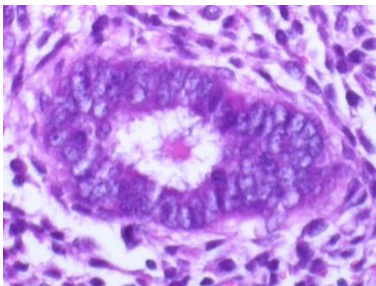
Anatomy and histology of the human endometrium



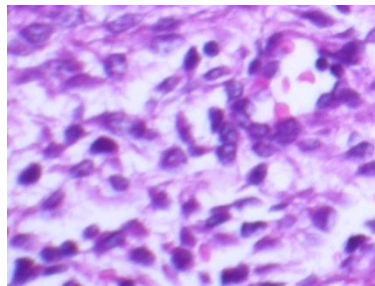
Functionalis
Basalis
Myo



Glands

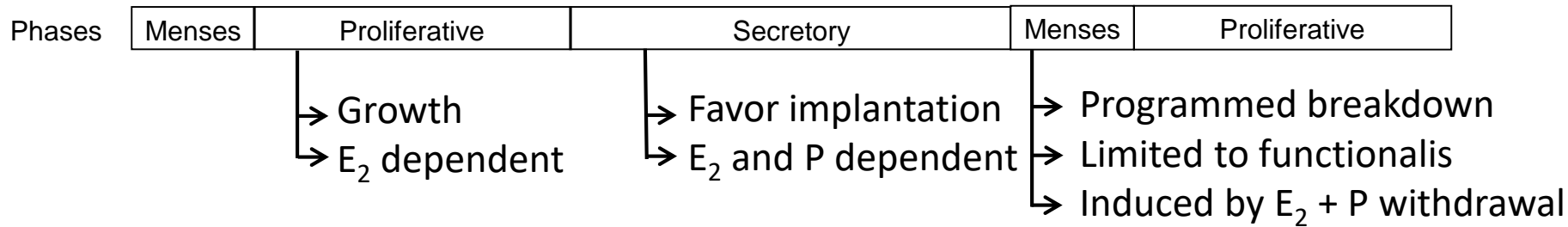
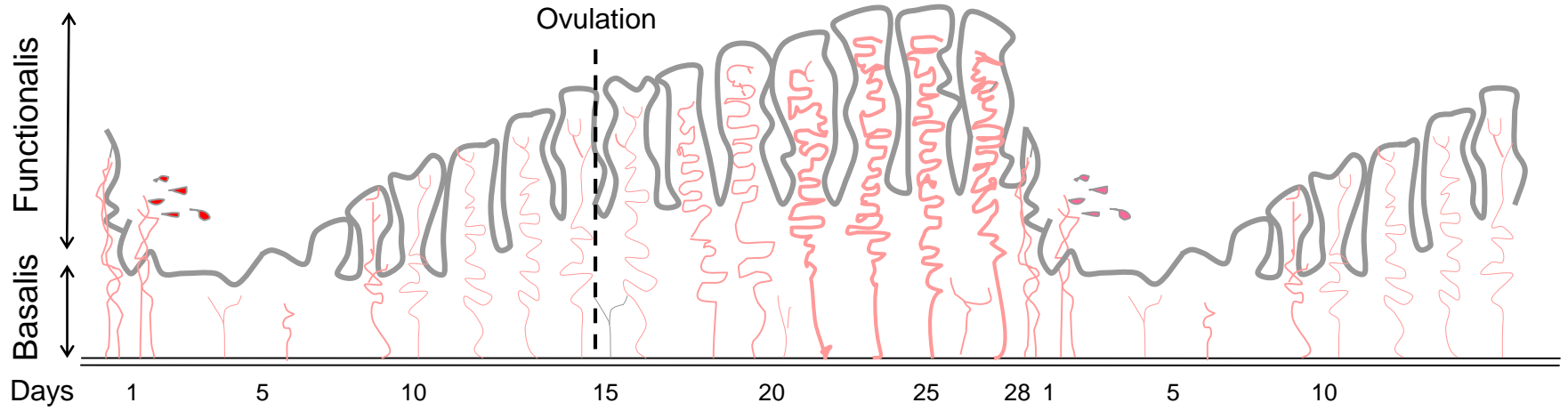
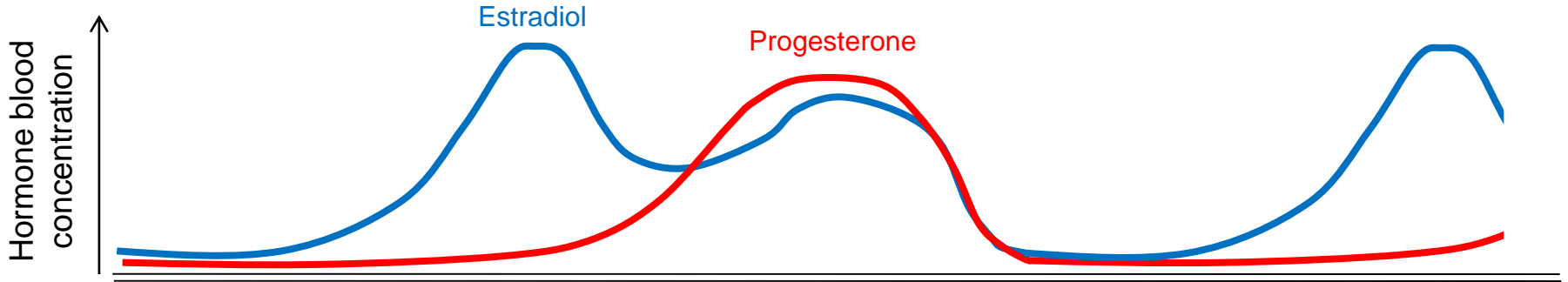


Stroma

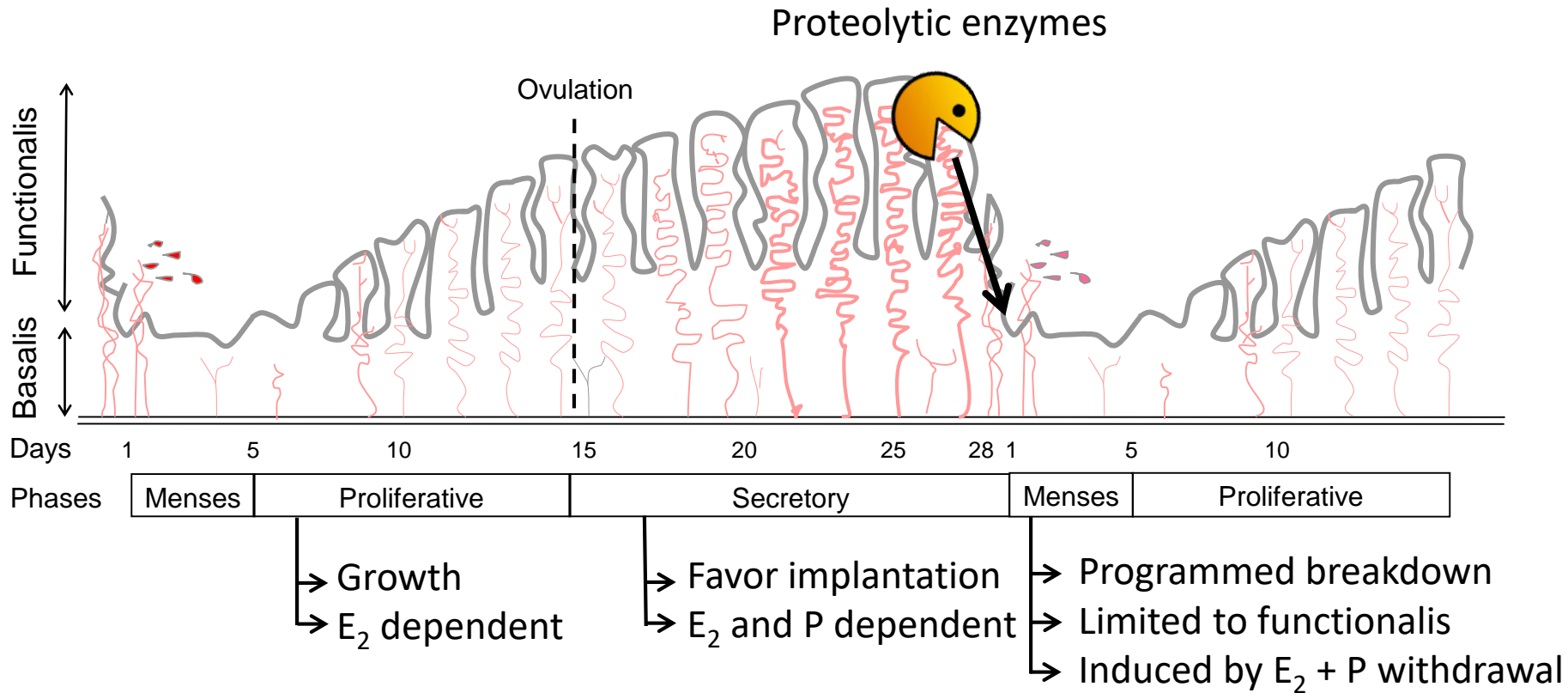


- Fibroblasts, vessels, inflammatory cells
- Extracellular matrix, rich in collagens

The menstrual cycle

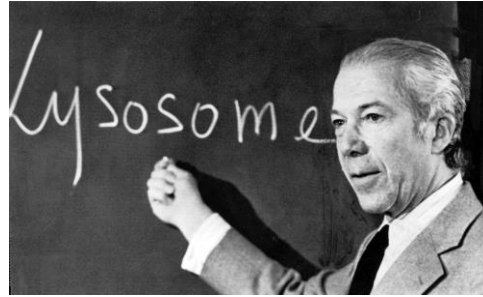


Enzymes responsible for tissue breakdown during menstruation?



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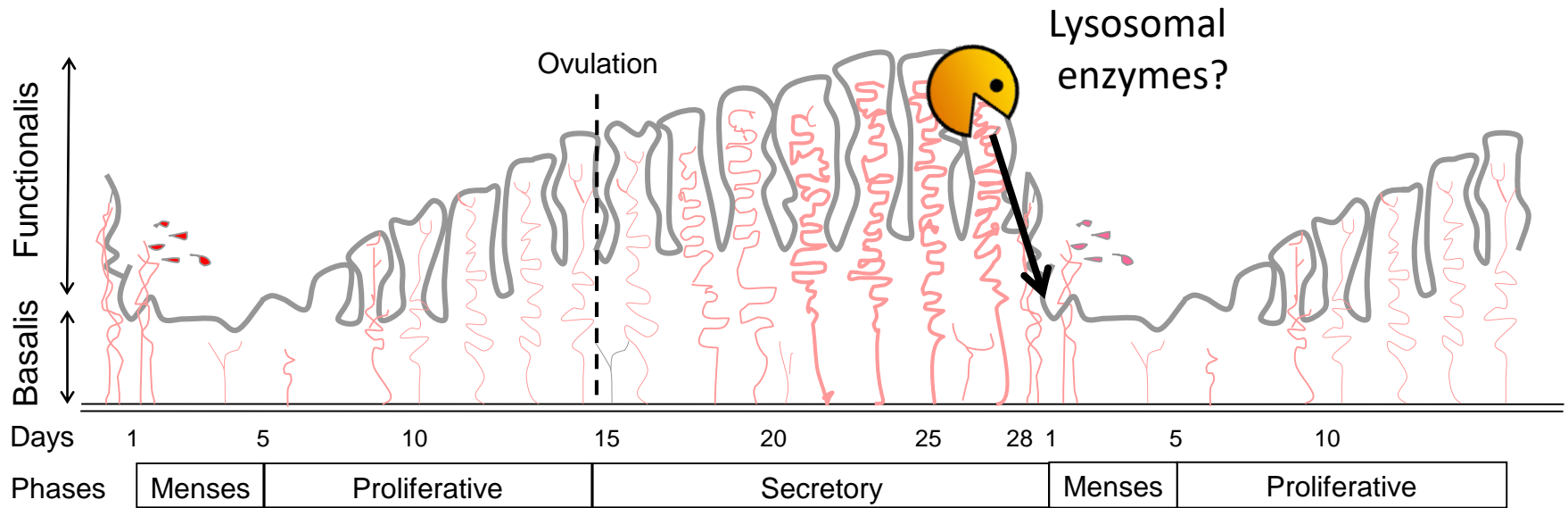
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Christian de Duve

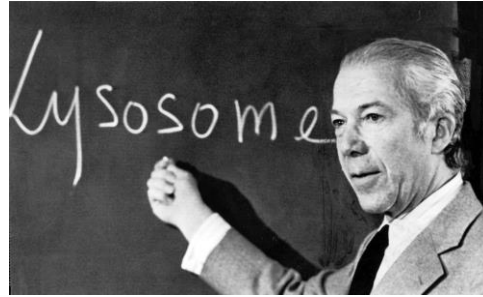


Pierre Courtoy



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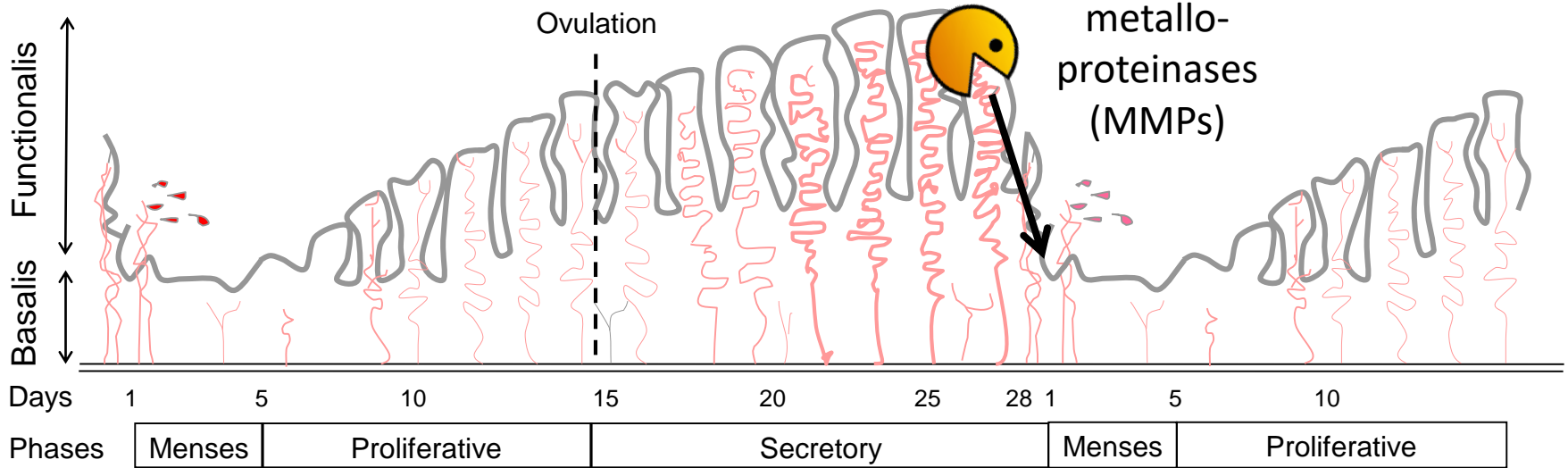
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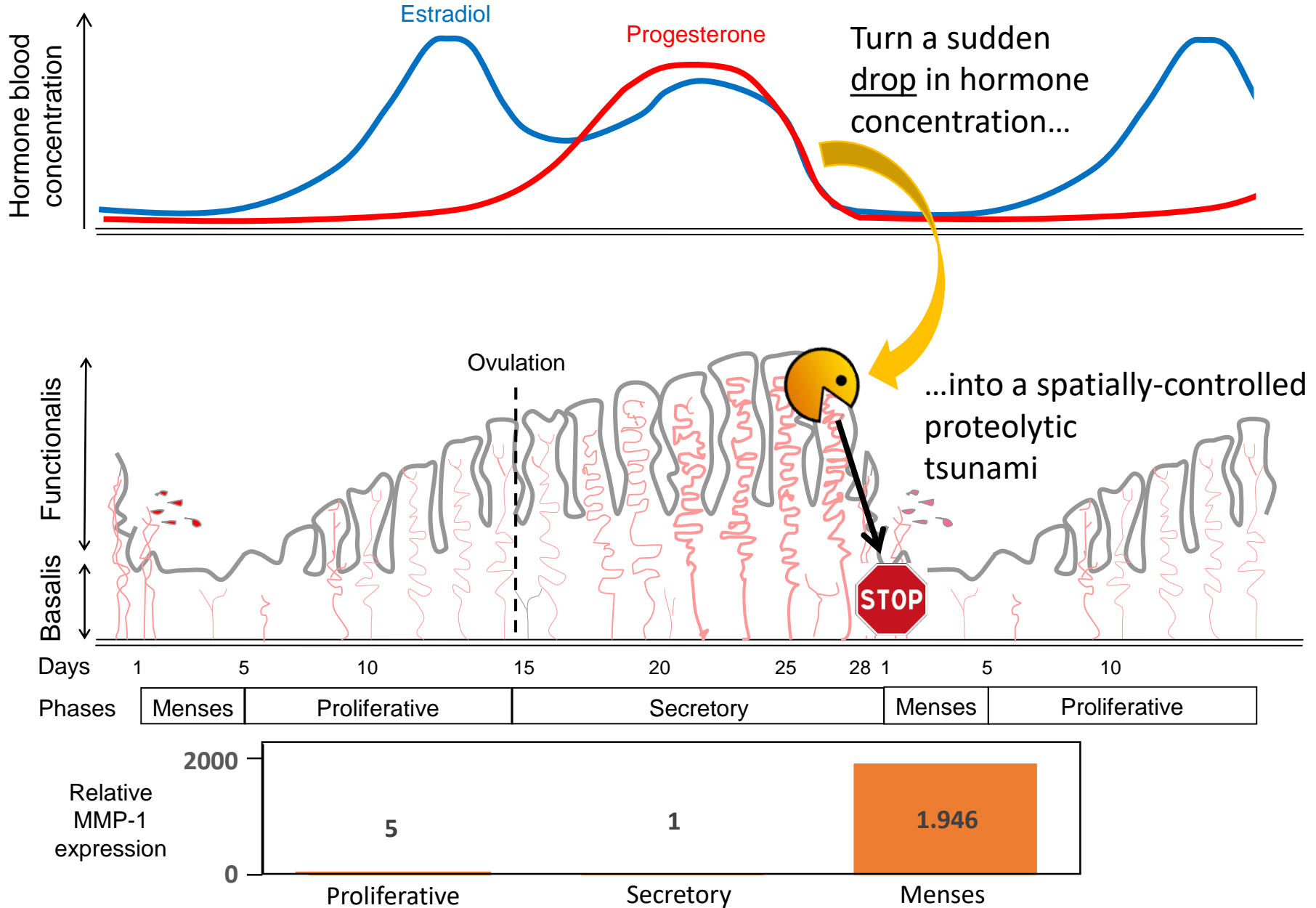
Etienne Marbaix

Yves Eeckhout

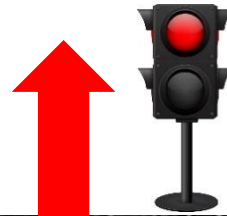
Pierre Courtoy



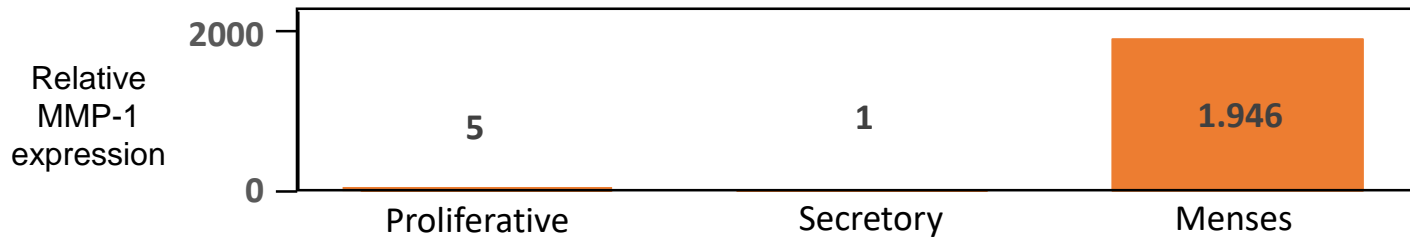
The central question in understanding regulation of menstruation



The brake / accelerator paradigm



The brake / accelerator paradigm



- **Menstruating species :**

- only humans and closely-related primates, with few remarkable exceptions



elephant shrew



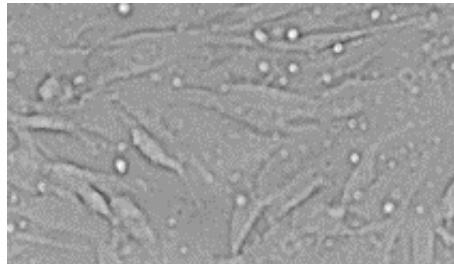
some bats



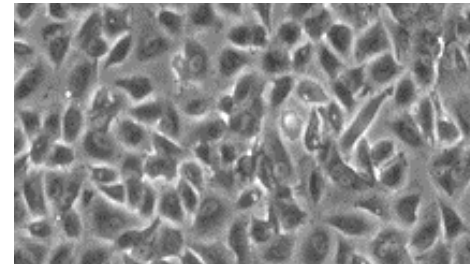
a rodent : *Acomys*

- spontaneous ovulation followed by decidualization during the secretory phase

- **Decidualization : animal models => a prerequisite for human menstruation**



elongated fibroblasts



=> round secretory decidual cells

- induced by the production of cAMP in combination with progesterone
- characterized by production of prolactin, glycogen, IGFBP1 and FOXO-1A

BUT HOW DECIDUALIZATION INFLUENCES MENSTRUATION REMAINS UNCLEAR

Review

The endocrine and paracrine control of menstruation

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Contents lists available at SciVerse ScienceDirect

Molecular and Cellular Endocrinology

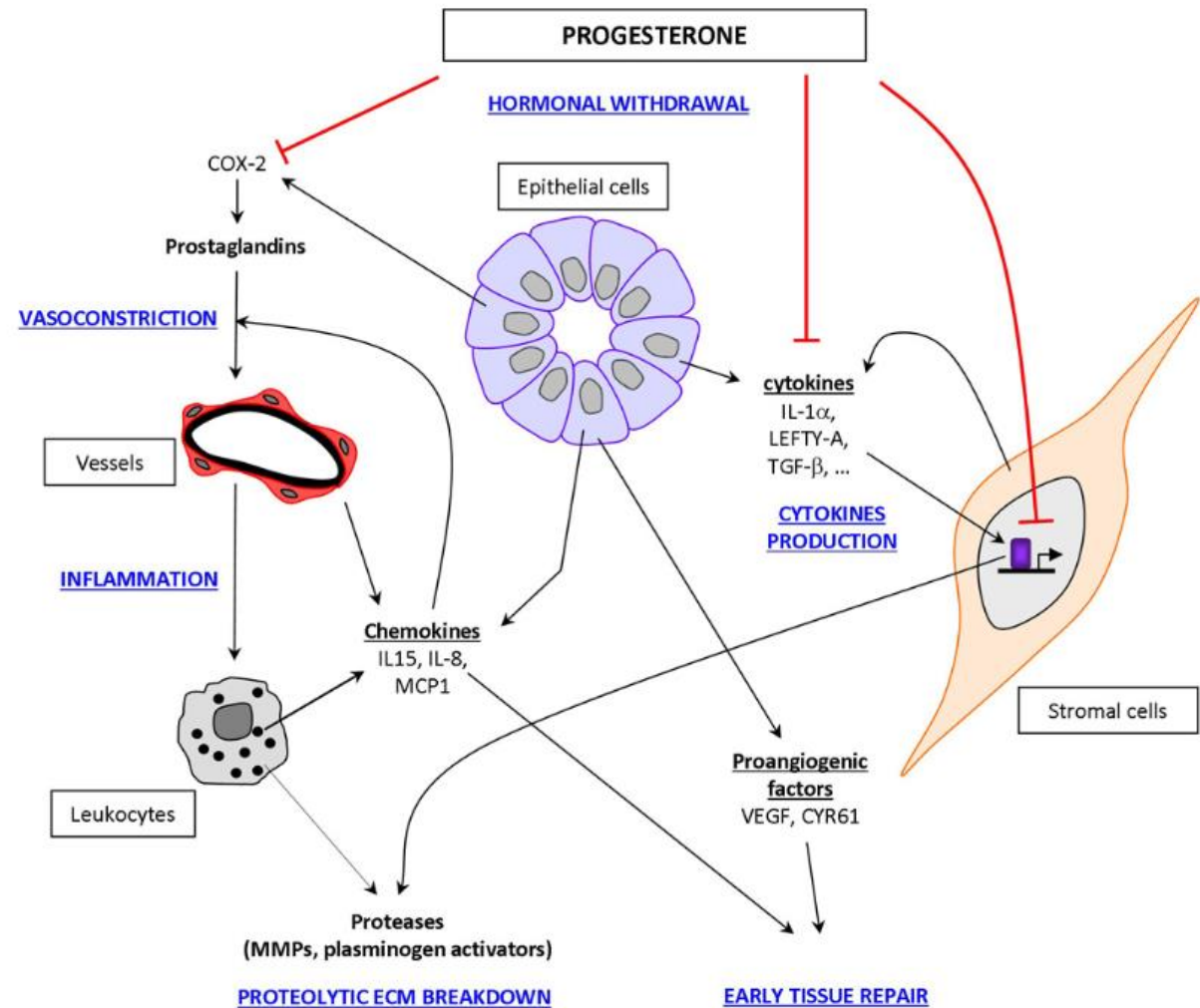
journal homepage: www.elsevier.com/locate/mce



Endocrine => global

Paracrine => local

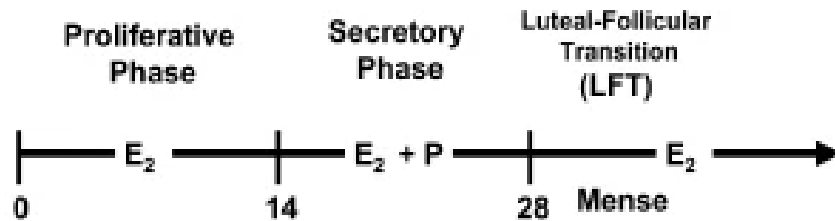
cell-cell
communication



1) Progesterone withdrawal is sufficient

=> lessons from the non-human primate model (Slayden *et al.*, 2006)

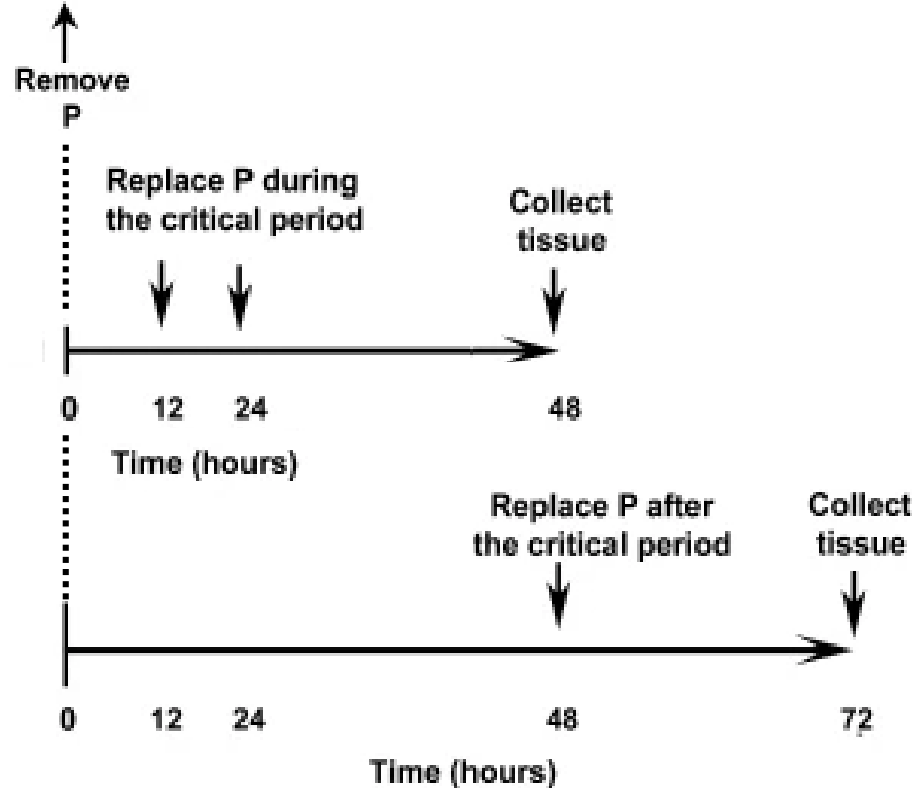
Artificial Menstrual Cycle



MMP production
menstruation



ovariectomized female macaques



no MMP production
no menstruation
=> reversible phase

MMP production
menstruation
=> irreversible phase

1) Progesterone withdrawal

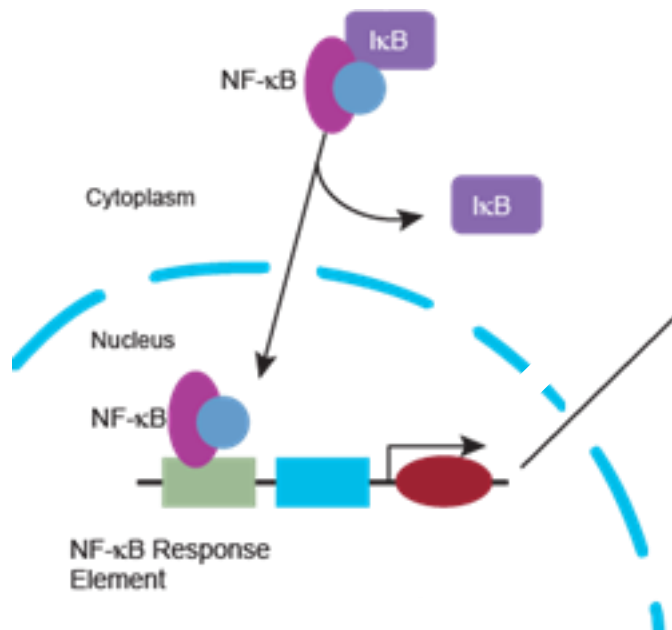
Reversible phase (if P back <24h in non-human primate model)

Irreversible phase (when P back >36h in non-human primate model)

1) Progesterone withdrawal

Reversible phase (if P back <24h in non-human primate model)

2) Increased production of ROS => increased production and activation of NF-κB



NF-κB (nuclear factor kappa B)

transcription factor

key role in inflammation

Menstruation is a physiological model of self-limiting inflammation

1) Progesterone withdrawal

Reversible phase (if P back <24h in non-human primate model)

2) Increased production of ROS => increased production and activation of NF-κB

3) Increased local expression of :

- inflammatory mediators such as COX-2 => increased prostaglandin production
- cytokines such as IL-1, IL-6, TNF => induction of MMP expression
- chemokines such as IL-8, CCL-2/MCP-1 => monocyte/macrophage recruitment

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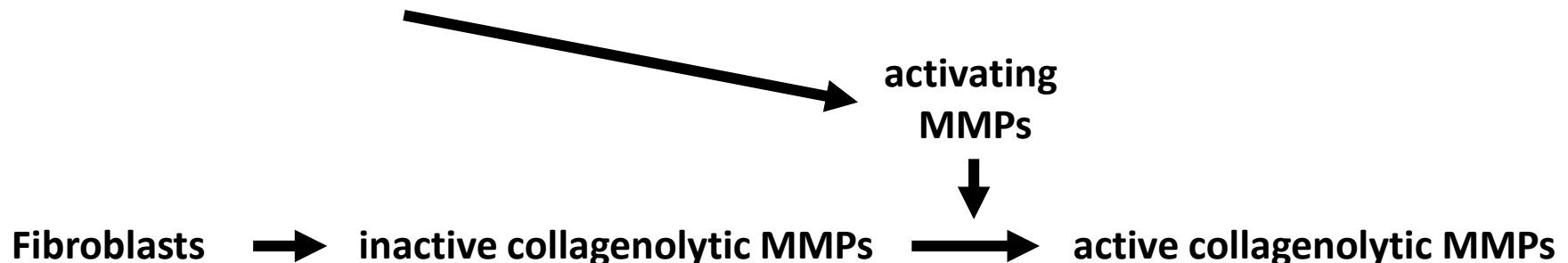
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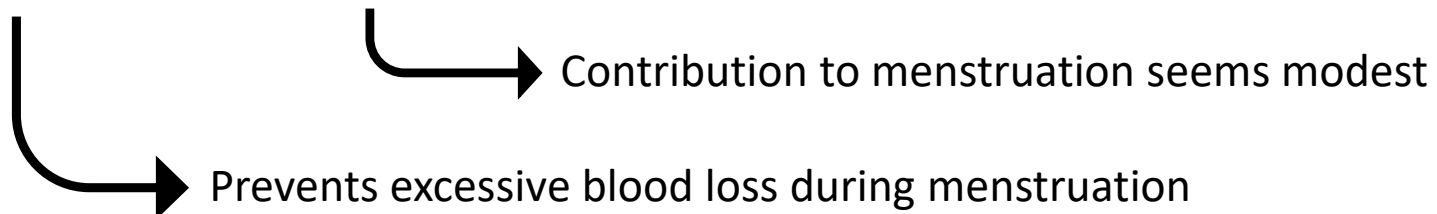
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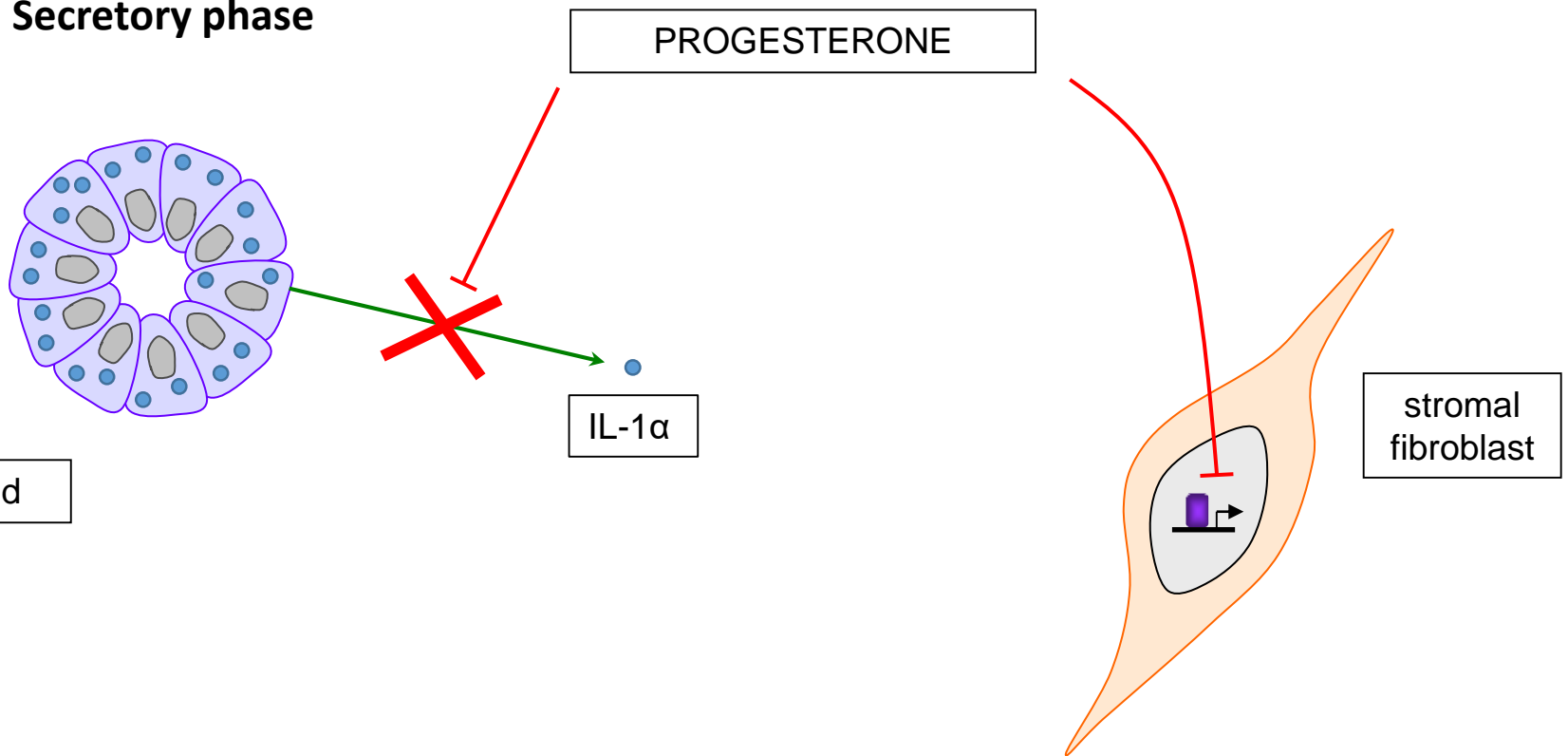
5) Vasoconstriction and hypoxia


6) Vessel permeability and fragility

7) Focal expression and activation of MMPs => tissue breakdown

Paracrine control of MMP expression by IL-1 α

Secretory phase

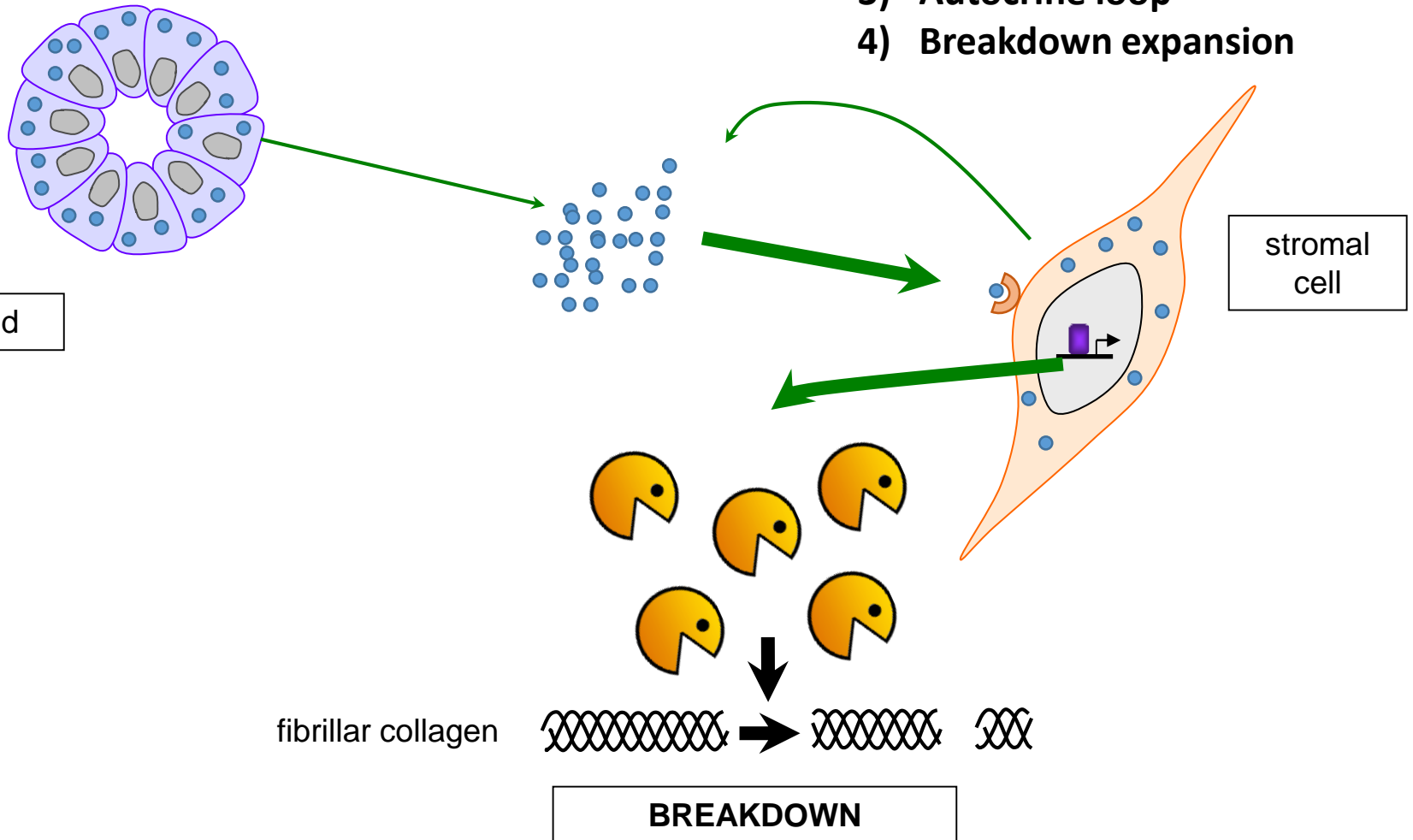


fibrillar collagen 

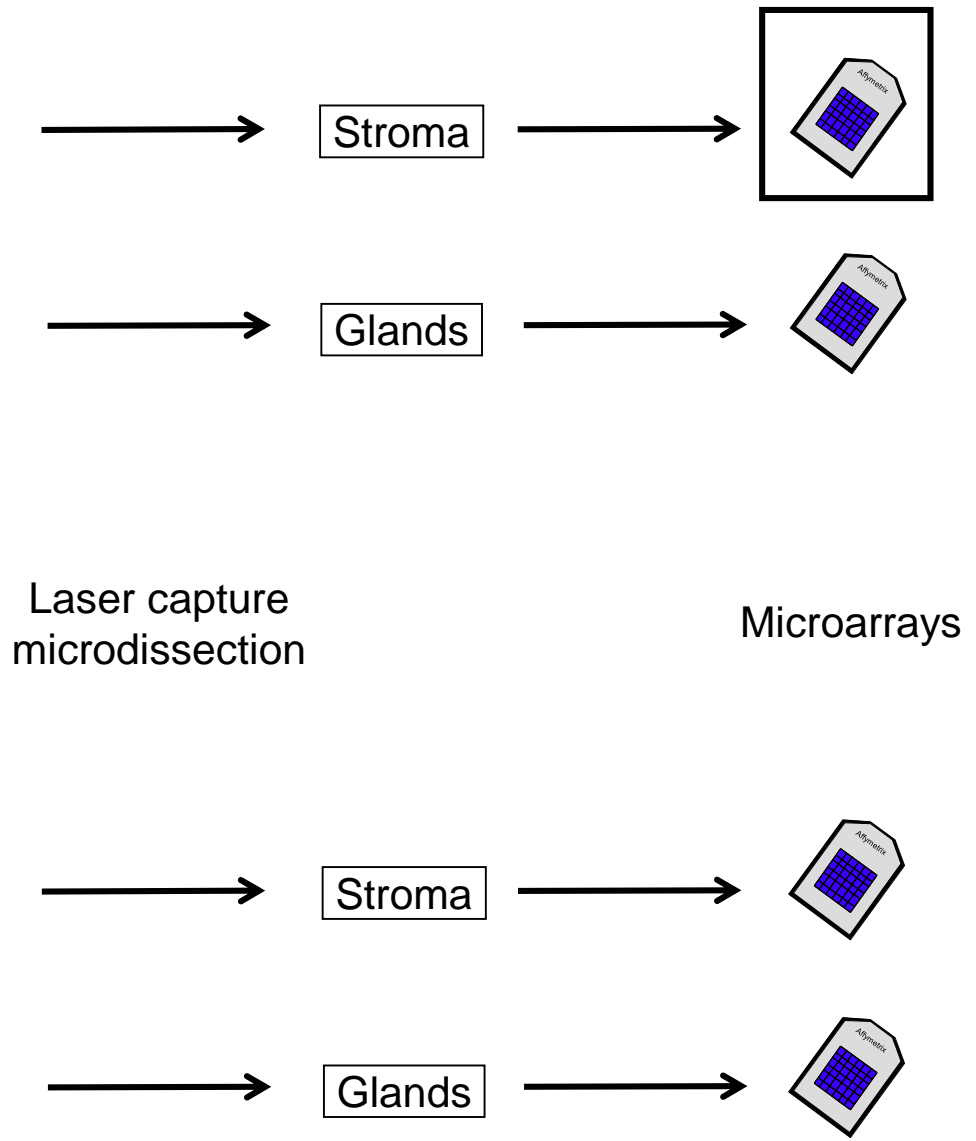
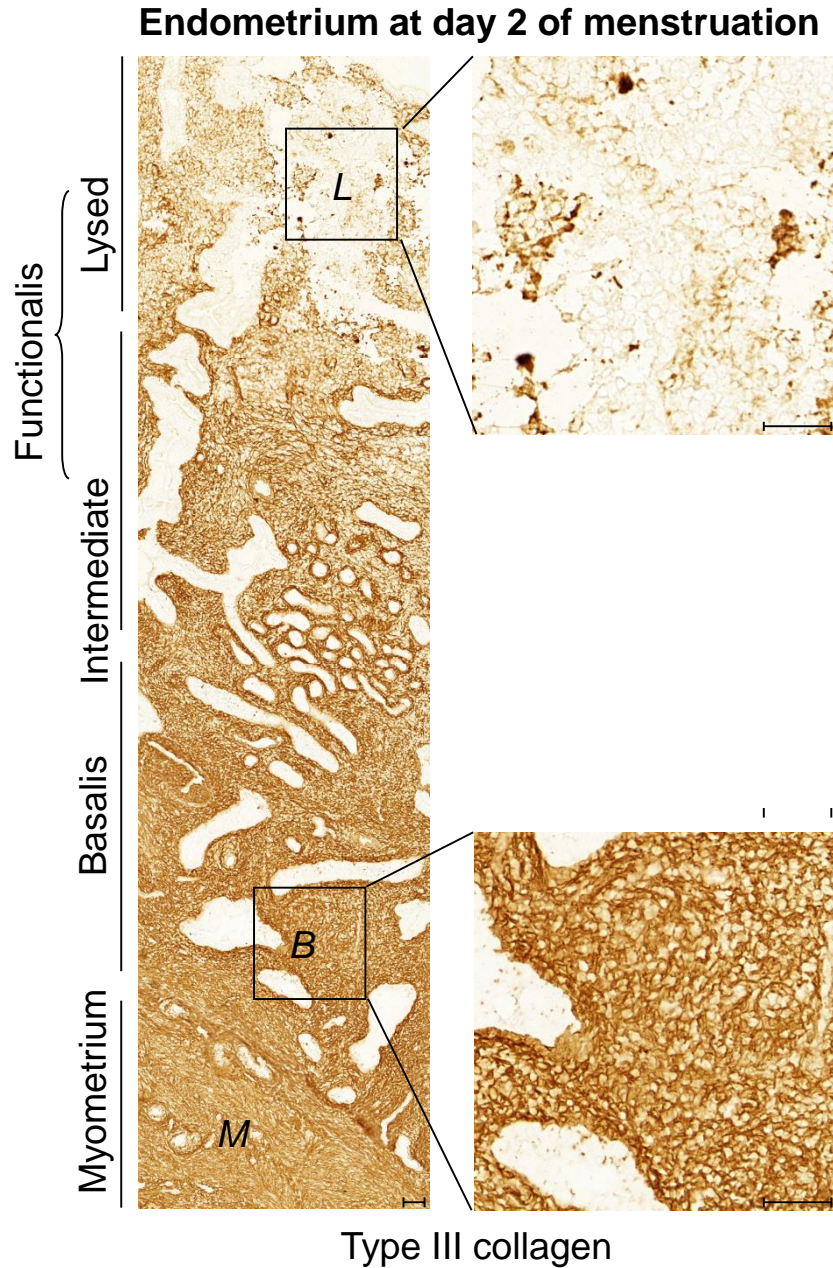
Paracrine control of MMP expression by IL-1 α

Menstrual phase

- 1) IL-1 α release
- 2) MMP production
- 3) Autocrine loop
- 4) Breakdown expansion



- **Non-human primate model**
 - MMP production stops after a few days
 - estradiol is not required
- **Macrophages endocytose and clear cellular debris**
- **Repair and regeneration : precise contribution of stem cells?**
- **Hypoxia** => hypoxia-inducible factor (HIF)
 - => vascular endothelial growth factor (VEGF)
 - => **neovascularisation**
- **Fragments from the functionalis**
 - express genes involved in tissue regeneration during menstruation
 - could contribute to regenerating a new functionalis if not cleared
 - and to pathogenesis of **endometriotic lesions** through retrograde menstruation

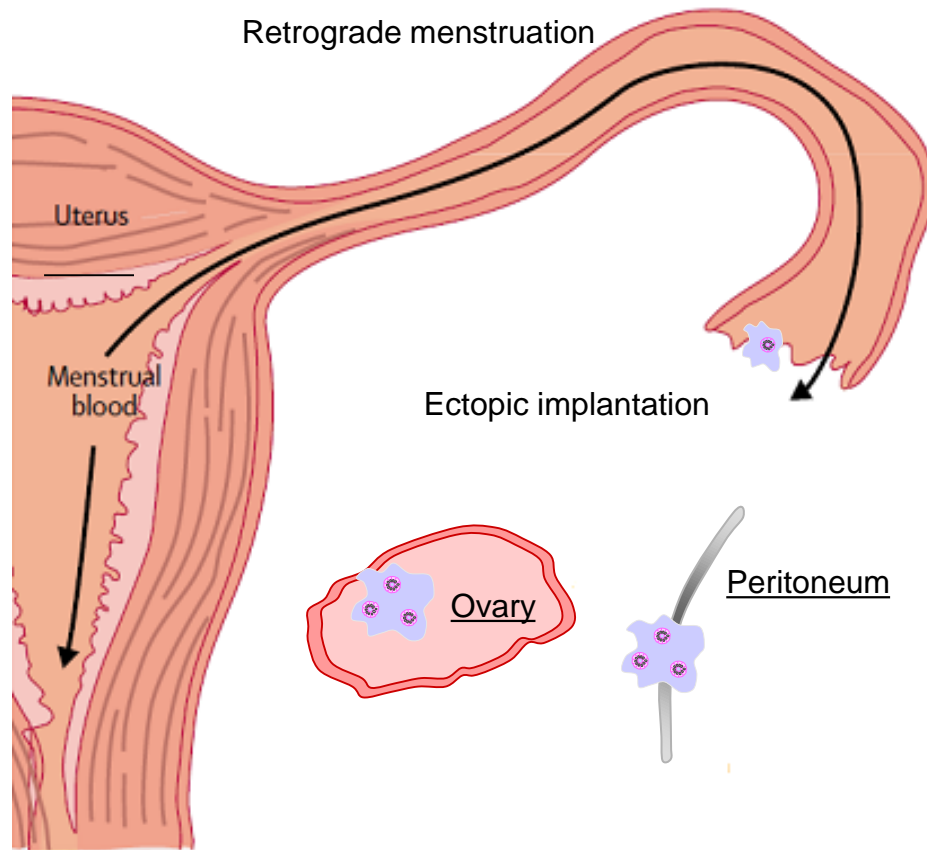


EXTRACELLULAR
MATRIX
DEGRADATION

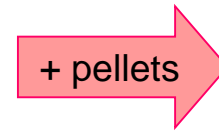
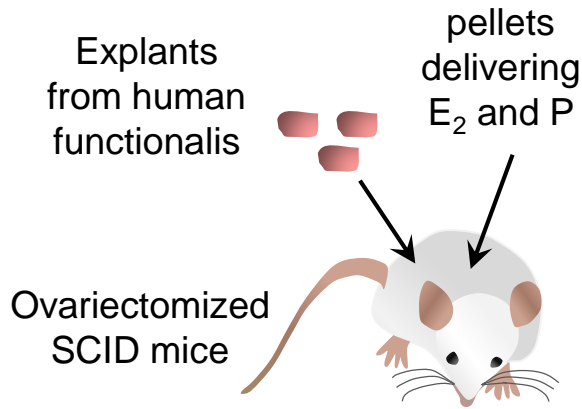
Symbol	Description
ANGPT2	angiopoietin 2
BGN	biglycan
CHI3L1	chitinase 3-like 1 (cartilage glycoprotein-39)
CILP	cartilage intermediate layer protein, nucleotide pyrophosphohydrolase
COL12A1	collagen, type XII, alpha 1
COL18A1	collagen, type XVIII, alpha 1
COL1A1	collagen, type I, alpha 1
COL24A1	collagen, type XXIV, alpha 1
COL5A2	collagen, type V, alpha 2
COL7A1	collagen, type VII, alpha 1
CTHRC1	collagen triple helix repeat containing 1
ENTPD4 / LOXL2	ectonucleoside triphosphate diphosphohydrolase 4 / lysyl oxidase-like 2
EPYC	epiphycan
GNLY	granulysin
GPC1	glypican 1
GZMB	granzyme B (granzyme 2, cytotoxic T-lymphocyte-associated serine esterase 1)
IGFBP1	insulin-like growth factor binding protein 1
IGFBP6	insulin-like growth factor binding protein 6
IL8	interleukin 8
INHBA	inhibin, beta A
ITGA2	integrin, alpha 2 (CD49B, alpha 2 subunit of VLA-2 receptor)
LAMC3	laminin, gamma 3
LOX	lysyl oxidase
LTBP2	latent transforming growth factor beta binding protein 2
MMP1	matrix metalloproteinase 1 (interstitial collagenase)
MMP10	matrix metalloproteinase 10 (stromelysin 2)
MMP12	matrix metalloproteinase 12 (macrophage elastase)
MMP3	matrix metalloproteinase 3 (stromelysin 1)
MMP9	matrix metalloproteinase 9 (gelatinase B)
NID2	nidogen 2 (osteonidogen)
P4HA2	prolyl 4-hydroxylase, alpha polypeptide II
P4HB	prolyl 4-hydroxylase, beta polypeptide
PCOLCE	procollagen C-endopeptidase enhancer
PLAT	plasminogen activator, tissue
PLAU	plasminogen activator, urokinase
PLAUR	plasminogen activator, urokinase receptor
PLOD2	procollagen-lysine, 2-oxoglutarate 5-dioxygenase 2
PTH1H	parathyroid hormone-like hormone
SERPINA1	serpin peptidase inhibitor, clade A (alpha-1 antiproteinase, antitrypsin), member 1
STC1	stanniocalcin 1
SULF1	sulfatase 1
TFPI2	tissue factor pathway inhibitor 2
TIMP1	TIMP metalloproteinase inhibitor 1
TIMP3	TIMP metalloproteinase inhibitor 3
TNFAIP2	tumor necrosis factor, alpha-induced protein 2
TNFAIP6	tumor necrosis factor, alpha-induced protein 6
TNFRSF11B	tumor necrosis factor receptor superfamily, member 11b (osteoprotegerin)

EXTRACELLULAR
MATRIX
PROTECTION OR
SYNTHESIS

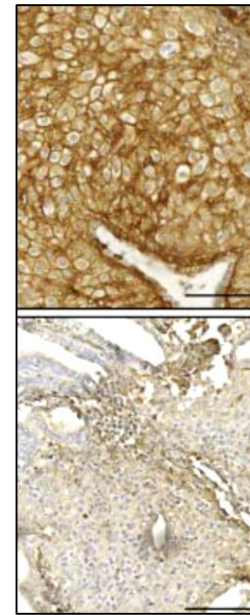
Endometriosis and the retrograde menstruation hypothesis



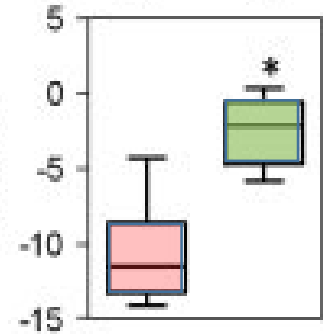
in vivo model : xenograft



collagen



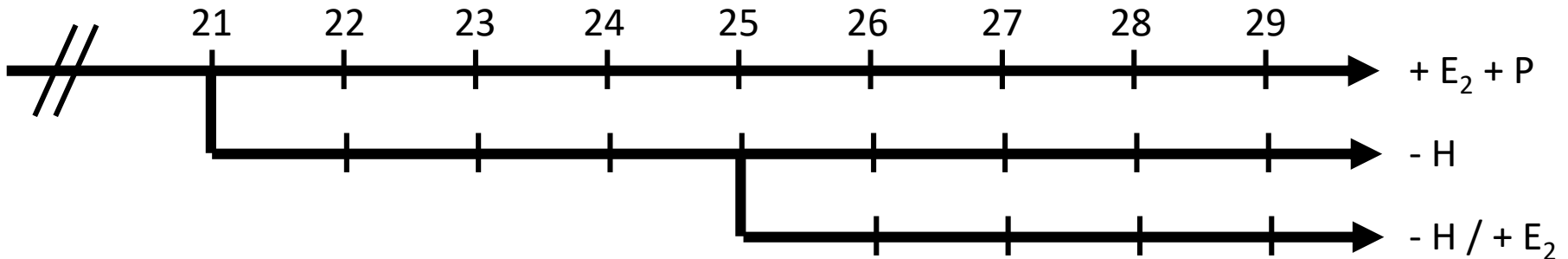
MMP-1 mRNA



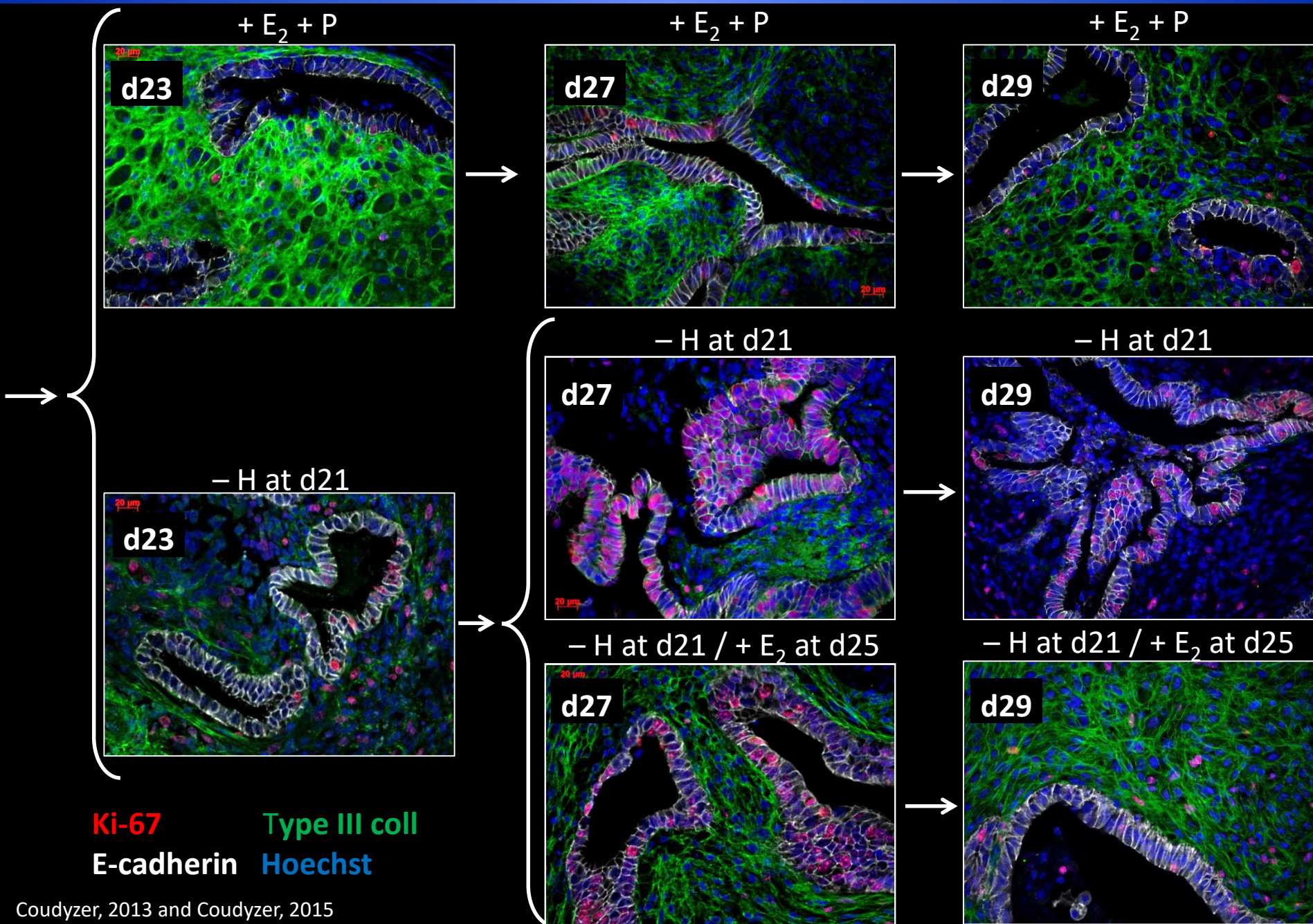
Day 21

Day 23

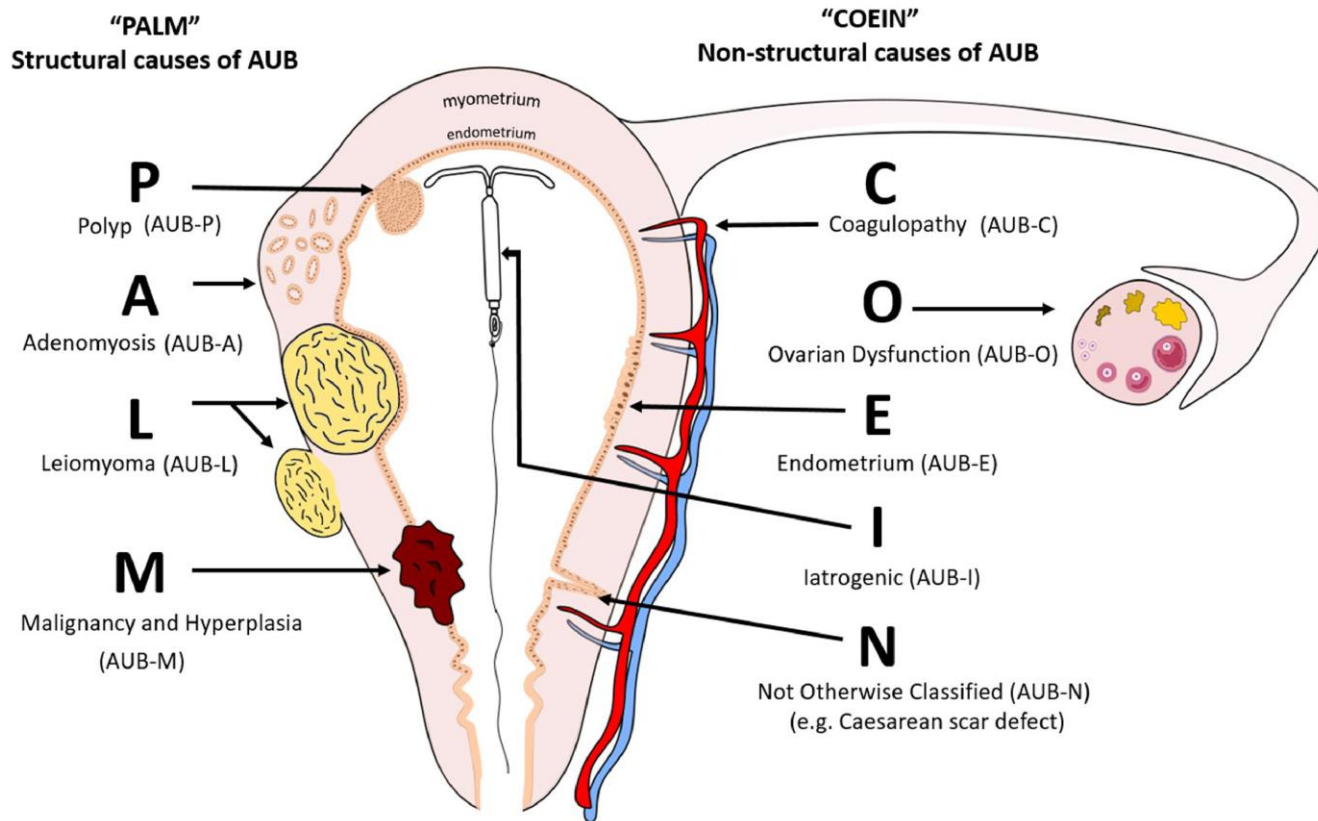
Days post-transplantation



Hormone withdrawal is sufficient to induce cell proliferation

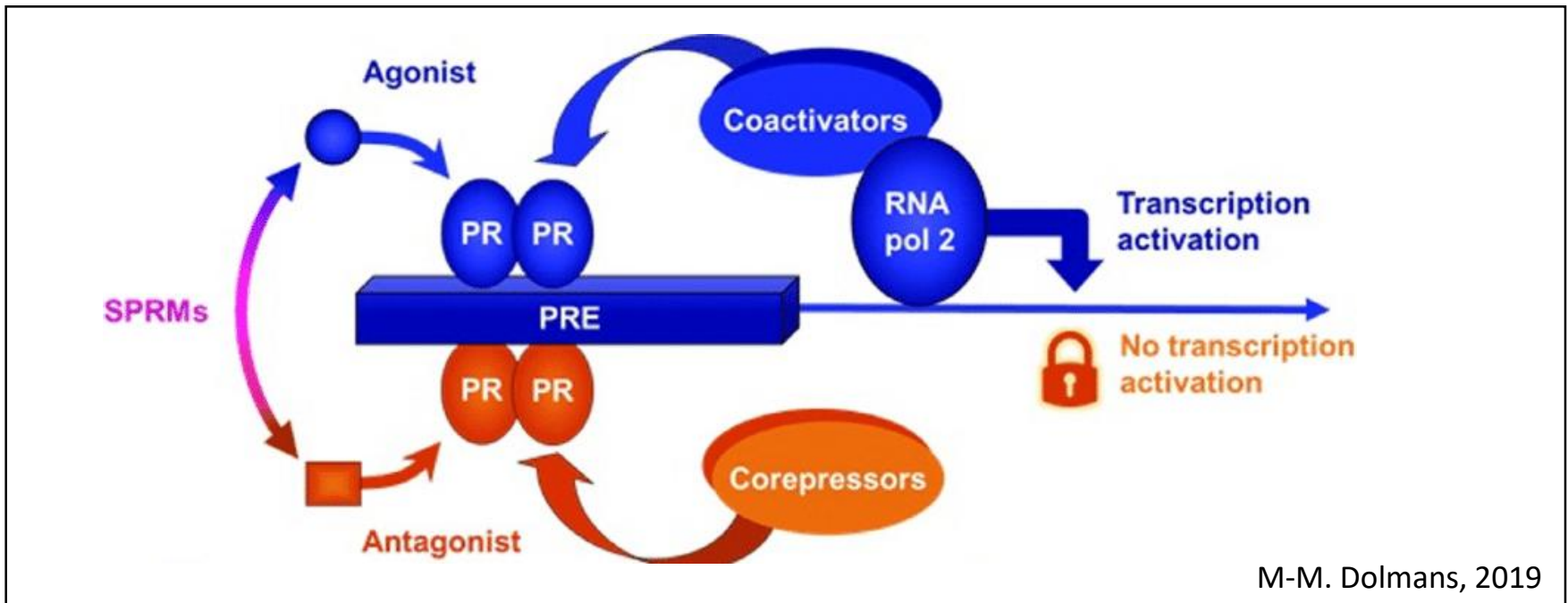


- Multiple causes for AUB : the P A L M – C O E I N classification system



- Recurrent symptoms related with the sequence of events for menstruation
 - untimely/excessive release of proinflammatory **cytokines** (IL-1 α)
 - inappropriate **prostaglandin** production => reduced **vasoconstriction**
 - untimely/excessive release of **MMPs**

- **Favorite target for therapeutic approaches : progesterone receptor (PR)**
 - selective progesterone receptor modulators (**SPRM**)
 - wide range of actions from perfect agonist to full antagonist
 - examples : mifepristone (RU486) ; ulipristal acetate



- but : potential long term side effects
- but : alternative pathways for progesterone response, PR-independent

- **Chronological sequence of events preceding menstruation**



- **But correlation is not causation**

- **mechanistic questions**



- **More research needed :**

- **to better understand the contribution of decidualization**
- **to improve identification of targets / drugs for AUB therapies**