

**Review Article:**

**Involvement of ACE2 in the intestinal transport of amino acids: Possible health and nutritional consequences in altered expression**

Jesmine Khan<sup>1</sup>, Wan Nor I'zzah Wan Mohamad Zain<sup>2</sup>, Mohammed Nasimul Islam<sup>3</sup>

**Abstract:**

**Background:** Absorption of neutral amino acids across the intestinal cells is mediated by the broad neutral amino acid transporter B<sup>0</sup>AT1. Intestinal expression of B<sup>0</sup>AT1 depends on the coexistence with the membrane-attached angiotensin-converting enzyme 2 (ACE2) which binds to the B<sup>0</sup>AT1 or the sodium-dependent imino-acid transporter 1 (SIT1) in the intestinal epithelial cells. **Objectives:** The objective of this article is to provide an overview of the involvement of ACE2 in the transport of amino acids from the intestinal lumen and possible harmful effects on health and nutrition due to altered ACE2 expression. **Methods:** PubMed, Scopus, and Google Scholar were searched using the keywords ACE2 paired with intestinal and gut B<sup>0</sup>AT1, SIT1, amino acid transport or absorption, health, and nutrition. Expression of B<sup>0</sup>AT1 in the intestine was completely absent in ACE2 knockout mice. Lack of ACE2 and B<sup>0</sup>AT1 expression lead to low plasma and muscle tryptophan, niacin deficiency, decreased intestinal antimicrobial peptide, and increased susceptibility to inflammatory bowel disease in animal models. **Results:** Expression of ACE2 in the small intestine and its association with amino acid transporters play a crucial role in the absorption of amino acids, maintenance of structural and functional gut integrity and overall health and nutrition status of an individual.

**Keywords:** ACE2, B<sup>0</sup>AT1; SIT1; intestine; gut, amino acid transport; amino acid absorption; nutrition

Bangladesh Journal of Medical Science Vol. 22 No. 04 October '23 Page : 729-733  
DOI: <https://doi.org/10.3329/bjms.v22i4.67115>

**Introduction:**

Angiotensin Converting Enzyme 2 (ACE2) is a membranous protein that possesses extracellular carboxypeptidase activity<sup>1</sup>. It is distributed in almost all body tissues with maximum expression at the brush border membrane of small intestinal cells<sup>2</sup>. In the small intestine, ACE2 mRNA expression is reported to increase with the advancement of the age of an individual<sup>3</sup>. ACE2 protein coexists with the neutral amino acid transporter broad neutral amino acid transporter 1 (B<sup>0</sup>AT1) or the sodium-dependent Imino acid transporter 1 (SIT1) in the small intestine.

The coexistence of these molecules is required for the proper expression of these transport proteins which is essential for the binding of amino acids to the transporters for subsequent absorption<sup>4</sup>. However, studies of ACE2 have mostly focused on its role in the renin-angiotensin system and not on its association or role in the B<sup>0</sup>AT1 protein.

B<sup>0</sup>AT1 mutation causes Hartnup disorder, a condition characterized by a high level of neutral amino acid tryptophan and subsequent aminoaciduria and, in several circumstances, pellagra-like symptoms, such as skin rash, diarrhea, and dementia. Lack of ACE2

1. Jesmine Khan, Department of Biochemistry and Molecular Medicine, Faculty of Medicine,
2. Wan Nor I'zzah Wan Mohamad Zain, Department of Biochemistry and Molecular Medicine. email: [wnizzah@uitm.edu.my](mailto:wnizzah@uitm.edu.my)
3. Mohammed Nasimul Islam, Department of Forensic Pathology. email: [nasimul@uitm.edu.my](mailto:nasimul@uitm.edu.my)

**Correspondence:** Jesmine Khan, Faculty of Medicine, Sungai Buloh Campus, Universiti Teknologi MARA, Jalan Hospital, 47000 Sungai Buloh, Selangor, Malaysia email: [jesminek@uitm.edu.my](mailto:jesminek@uitm.edu.my)

and the concurrent absence of B<sup>0</sup>AT1 expression in the small intestine causes decreased tryptophan absorption and subsequent niacin deficiency, decreased intestinal antimicrobial peptide synthesis, and increased susceptibility to inflammatory bowel disease (IBD) in mice<sup>5</sup>. Recently, angiotensin-converting enzyme 2 (ACE2) has been identified as the cellular binding site for the novel coronavirus 2, the causative agent of COVID-19<sup>6</sup>. Binding and internalization of ACE2 by the coronavirus might lead to altered ACE2 expression and thus less B<sup>0</sup>AT1 and SITI stabilization and functions which might lead to various effects on the health and nutrition status of an individual.

### Materials and Methods:

PubMed, Scopus, and Google Scholar were searched using the keywords ACE2 paired with intestinal and gut B<sup>0</sup>AT1, SITI1, amino acid transport, amino acid absorption, health, and nutrition. We searched the related articles without limiting the years of publication.

**Ethical clearance:** Not applicable

### Results and Discussion:

After ingestion of food, dietary proteins are broken down into small oligopeptides and amino acids in the gastrointestinal lumen. In the small intestine, they are transported across the enterocytes into the systemic circulation and then into different organs of the body. Various transporters are available for the intestinal absorption of nutrients across the membranes. Most neutral amino acids are transported across the apical brush-border membrane of the small intestine and the renal proximal tubules by the luminal broad neutral amino acid transporter B<sup>0</sup>AT1, which was first identified in mice in 2004<sup>7,8,9,10</sup>.

Jando J has reported the expression of B<sup>0</sup>AT1 throughout the small intestine of male Wistar rats. They found that B<sup>0</sup>AT1 expression was regulated by the presence of angiotensin-converting enzyme 2 (ACE2). B<sup>0</sup>AT1 and ACE2 were observed to co-exist on the luminal membrane of small intestinal villi. Immunofluorescence and western blot analysis revealed that their protein expression was higher in the distal part as compared to the proximal part of the small intestine<sup>11</sup>.

Localization and distribution of intestinal amino acid transporters in human beings were reported by the Vuille-dit-Bille RN research team. Analysis

of tissues from intestinal biopsies collected during routine endoscopy of the gastrointestinal tract (n=46) revealed the presence of B<sup>0</sup>AT1 and SITI1 with ACE2 in the brush-border membrane of small intestinal epithelial cells. Real-time PCR and immunofluorescence further confirmed the significant expression of the corresponding genes in all the samples. Among the tissues collected by them, 9 samples were from patients treated with ACE inhibitors (ACEI). Patients who were treated with ACEIs expressed higher intestinal mRNA levels of ACE2, and amino acid transporters B<sup>0</sup>AT1 as compared to the untreated controls<sup>12</sup>.

Recently, the cryo-electron microscopic structure of ACE2 in the intestine of human beings was described by Yan et al. ACE2 in these samples was found to be associated with the B<sup>0</sup>AT1. ACE2-B<sup>0</sup>AT1 was gathered as a dimer in the structure of the whole complex<sup>13</sup>. In their study, B<sup>0</sup>AT1 has also been shown to interact with the receptor binding domain (RBD) of the spike glycoprotein (S protein) of SARS-CoV-2 and also one more coronavirus receptor, aminopeptidase N<sup>11</sup>. These findings suggest that in addition to its role in amino acid transport, B<sup>0</sup>AT1 may play an important role in the intestinal infections by the above coronaviruses which might hamper the absorption of neutral amino acids, and might explain the gastrointestinal and other health problems in coronavirus infection.

Back in 2012, Hashimoto et al conducted a very elaborate study and confirmed the concurrent presence of ACE2 and B<sup>0</sup>AT1 in the intestinal epithelial cells. None of the small or large intestines of ACE2 knockout mice had abnormal morphological or ultra-structural changes but the challenge with chemicals such as dextran sodium sulfate (DSS) and trinitrobenzene sulphonic acid (TNBS) in knock-out mice produced higher inflammatory reactions and severe colitis accompanied by the presence of inflammatory cells, shortening of the gut length, bleeding, crypt damage, severe diarrhea and weight loss<sup>14</sup>.

Researchers have found that recombinant soluble ACE2 (rsACE2) preserved ACE2 functions of the RAS system *in the in vivo* models<sup>15</sup>. However, rsACE2 lacks the membranous domain that is responsible to stabilize the location of B<sup>0</sup>AT1. Thus, it is presumed that the soluble ACE2 is unable to stabilize the neutral amino acid transporter in the intestine<sup>4</sup>. Hashimoto et al reported that treatment of mice with rsACE2 did not improve the condition of

the DSS-induced colitis in *ACE2* mutant mice<sup>14</sup>.

A higher level of angiotensin II was found in the DSS-induced colitis model of *ACE2* mutant mice, which returned back to a normal level after treatment with rsACE2. But the deletion of angiotensinogen receptor 1 did not prevent DSS-induced colitis which indicates that although ACE2 is essential for its function in the RAS, it has no role in DSS-induced intestinal inflammation, these effects are independent of the classical RAS system<sup>16</sup>.

Lack of intestinal B<sup>0</sup>AT1 protein expression in the small intestine of *ACE2* mutant mice caused very low levels of the neutral amino acids valine, threonine, tyrosine and essential amino acid tryptophan in the blood. Inadequate distribution of *ACE2* resulted in an impairment of intestinal tryptophan homeostasis which has the potential to increase the susceptibility of intestinal inflammation<sup>17</sup>. B<sup>0</sup>AT1 mutations in patients with Hartnup's disease also caused a significant reduction of serum tryptophan level<sup>18,19</sup>.

Expression of several antimicrobial peptides was markedly reduced in the epithelial cells of the ileum in *ACE2* mutant mice. Dietary tryptophan is mainly absorbed via the B<sup>0</sup>AT1/ACE2 transport pathway. After absorption, it activates the mammalian target of rapamycin (mTOR). mTOR regulates the expression of antimicrobial peptides, which has a favorable role in the composition of gut microbiota. Supplementation with tryptophan and a nicotinamide-rich diet induced the secretion of antimicrobial peptides in *ACE2* mutant mice<sup>13</sup>. Singer et al also reported that mice devoid of *ACE2* have an increased susceptibility to intestinal inflammation and damage<sup>20</sup>.

The absence of intestinal B<sup>0</sup>AT1 in mice *devoid of ACE2* caused reduced amino acid transport and adequate weight gain in newborns. In addition to that, the transport of proline most probably using SIT1 was also hampered, the researchers could not confirm protein expression of SIT1 due to the lack of specific antibodies specific for mouse SIT1 back then. But glucose uptake via sodium-glucose transporter 1 was not affected in these mice. Less absorption of several amino acids one hour after an oral intake of an amino acid mixture was associated with a severalfold increase of tryptophan and of other neutral amino acids in the lumen of the ileum. Decreased absorption of these amino acids from the gut lumen caused significantly low blood and muscle level of tryptophan, glycine and other neutral amino acids in mice devoid of *ACE2*<sup>20</sup>. But a low-

protein/low-niacin diet for a prolonged period of nearly 3 months changed plasma amino acid levels in both ACE2-positive and in ACE2- negative mice, but only *ACE2-negative* mice stopped weight gain. Despite this deficient diet, contrary to the previous findings, plasma niacin levels which is synthesized from tryptophan remained normal in *ACE2-negative* mice and they did not develop any pellagra symptoms such as skin rash and diarrhea<sup>20</sup>. Unfortunately, the authors did not explore the underlying mechanisms for their findings, doing so might have explored some alternate pathways to maintain normal niacin levels in conditions with altered ACE2 status.

**Table 1.** Normal Expression of B<sup>0</sup>AT1 in the intestine and consequences in altered expression

Subject	Findings	Authors
Expression of B <sup>0</sup> AT1 in rodent intestine	Expression of B <sup>0</sup> AT1 in rodent intestine was supported by the presence of angiotensin-converting enzyme 2 (ACE2).	Jando J 2017
Expression of B <sup>0</sup> AT1 in the human intestine	The simultaneous presence of B <sup>0</sup> AT1 and SIT1 gene with ACE2 was observed in the brush-border membrane of human small intestinal cells.	Vuille-dit-Bille RN 2015
Cryo-electron microscopy of human intestinal ACE2-B <sup>0</sup> AT1 complex	The ACE2-B <sup>0</sup> AT1 complex is assembled as a dimer with ACE2.	Yan R 2020
Intestinal B <sup>0</sup> AT1 in ACE2 null mice	B <sup>0</sup> AT1 substrates in everted intestinal tissues were deficient. Body weight gain was poor, and uptake of proline, was absent. Plasma and muscle levels of glycine and tryptophan were significantly low.	Singer D 2012
Intestinal B <sup>0</sup> AT1 expression and serum amino acid levels in <i>Ace2</i> <sup>-/-</sup> mice	No expression of B <sup>0</sup> AT1 protein was found. Serum levels of the neutral amino acids valine, threonine, tyrosine and tryptophan were markedly reduced.	Hashimoto T 2012

### **Conclusion:**

Adequate expression of ACE2 in the small intestine and its association with amino acid transporters appears to play a crucial role in the digestion of protein and the absorption of amino acids and thereby the structural and functional integrity of gut. The binding of the coronavirus and decreased availability of ACE2 in the intestine may have subsequent effects on the amino acid transport and absorption from the intestinal lumen. Amino acids are the building blocks of the body and are required for the synthesis of important biomolecules in our body. Thus, a lack of ACE2 might have several harmful health and nutritional consequences for the body.

### **Funding statement**

Universiti Teknologi MARA Lestari grant number MyRA2020 (600RMC/MyRA5/3/Lestari (045/2020)

### **Conflict of interest: None**

### **Authors' contribution:**

Idea owner of this study: Jesmine Khan

Study design: All authors contributed equally

Data gathering: All authors contributed equally

Writing and submitting the manuscript: Jesmine Khan

Editing and approval of final draft: All authors contributed equally

**References:**

1. Wiese O, Zemlin AE, Pillay TS. Molecules in pathogenesis: angiotensin converting enzyme 2 (ACE2). *J Clin Path* 2021; **74**: 285-290
2. Li M, Li L, Zhang Y, Wang XS. Expression of the SARS-CoV-2 cell receptor gene *ACE2* in a wide variety of human tissues. *Infect Dis Poverty* 2020; **9**: 45.
3. Vuille-dit-Bille, RN, Liechty KW, Verrey F, Laura CG . SARS-CoV-2 receptor ACE2 gene expression in the small intestine correlates with age. *Amino Acids* 2020; **52**: 1063–1065. <https://doi.org/10.1007/s00726-020-02870-z>
4. Camargo SM, Singer D, Makrides V, Huggel J, Pos KM, Wagner CA, et al. Tissue-specific amino acid transporter partners ACE2 and collectrin differentially interact with Hartnup mutations. *Gastroenterology* 2009; **136**: 872–882
5. Kowalczyk S, Angelika B, Nadine T, Jessica MV, John EJ, Stefan B . A protein complex in the brush-border membrane explains a Hartnup disorder allele. *FASEB J* 2008; **22**: 2880–2887
6. Khan J, Mohamad Zain WNIW & Islam MN. Angiotensin-converting enzyme 2 in the gastrointestinal tract: binding with coronavirus and its consequences. *Bangladesh Journal of Medical Science* 2022; **21**(4): 808–812
7. Verrey F, Ristic Z, Romeo E, Ramadan T, Makrides V, Dave MH et al. Novel renal amino acid transporters. *Annu Rev Physiol* 2005; **67**: 557–72
8. Romeo E, Dave MH, Bacic D, Ristic Z, Camargo SMR, Loffing J et al. Luminal kidney and intestine SLC6 amino acid transporters of B0AT-cluster and their tissue distribution in *Mus musculus*. *Am J Physiol Renal Physiol* 2006; **290** (2): 376–83
9. Broer A, Klingel K, Kowalczyk S, Rasko JEJ, Cavanaugh J, Broer S. Molecular cloning of mouse amino acid transport system B0, a neutral amino acid transporter related to Hartnup disorder. *J Biol Chem* 2004; **279**(23): 24467–76
10. Bohmer C, Broer A, Munzinger M, Kowalczyk S, Rasko JEJ, Lang F et al. Characterization of mouse amino acid transporter B0AT1 (*slc6a19*). *Biochem J* 2005; **389**(Pt 3):745–51. DOI:??
11. Jando J, Camargo SMR, Herzog B, Verrey F. Expression and regulation of the neutral amino acid transporter B0AT1 in rat small intestine. *PLoS One* 2017 Sep 15; **12**(9):e0184845. DOI: 10.1371/journal.pone.0184845
12. Vuille-dit-Bille RN, Camargo SM, Emmenegger L, Sasse T, Kummer E, Jando J, et al. Human intestine luminal ACE2 and amino acid transporter expression increased by ACE-inhibitors. *Amino Acids* 2015 Apr; **47**(4):693-705. DOI: 10.1007/s00726-014-1889-6. Epub 2014 Dec 23
13. Yan R, Zhang Y, Li Y, Xia L, Guo Y, Zhou Q. Structural basis for the recognition of SARS-CoV-2 by full-length human ACE2. *Science* 2020 Mar 27; **367**(6485):1444–1448
14. [Tatsuo H](#), Thomas P, Ateequr R, Jean T, Hiroaki I, Magdalena P, et al. ACE2 links amino acid malnutrition to microbial ecology and intestinal inflammation. *Nature* 2012; **487**(7408): 477–481 DOI: ??
15. [Yumiko I](#), Keiji K, Shuan R, Yi H, Feng G, Bin G et al. Angiotensin-converting enzyme 2 protects from severe acute lung failure. *Nature* 2005; **436**(7047): 112–116. DOI:??
16. Christoph HÖ, Kojiro T, Samuele DM, Ekihiro S, Melitta PÖ, Yuzo K, et al. Angiotensin-Converting-Enzyme 2 Inhibits Liver Fibrosis in Mice. *Hepatology* 2009 Sep; **50**(3): 929–938. DOI: 10.1002/hep.23104
17. Kleta R, Romeo E, Ristic Z, Ohura T, Stuart C, Arcos-Burgos M, Klass MP, Wagner CA et al. Tissue-specific amino acid transporter partners ACE2 and collectrin differentially interact with Hartnup mutations. *Gastroenterology* 2009; **136**: 872–882
18. Kleta R, Romeo E, Ristic Z, Ohura T, Stuart C, Arcos-Burgos M, et al. Mutations in SLC6A19, encoding B0AT1, cause Hartnup disorder. *Nature Genet* 2004; **36**: 999–1002
19. Darby WJ, McNutt K W, Todhunter EN. Niacin. *Nutr Rev* 1975; **33**: 289–297
20. Singer D, Camargo SM, Ramadan T, Schäfer M, Mariotta L, Herzog B, et al. Defective intestinal amino acid absorption in *Ace2* null mice. *Am J Physiol Gastrointest Liver Physiol* 2012 Sep 15; **303**(6): G 686-95. DOI: 10.1152/ajpgi.00140.2012. Epub 2012 Jul 12