

doi: 10.13241/j.cnki.pmb.2017.19.049

细胞外基质 Matrilin-4 的研究进展 *

谢金芳¹ 李晶¹ 李媛¹ 高华丽² 杨楠³ 孟琳⁴ 耿文韬¹ 张颖丽^{1△}

(1 吉林大学口腔医院牙体牙髓科 吉林长春 130021; 2 吉林大学口腔医院儿童口腔科 吉林长春 130021;

3 吉林大学口腔医院修复科 吉林长春 130021; 4 吉林大学口腔医院病理科 吉林长春 130021)

摘要:Matrilin-4 是非胶原性细胞外基质蛋白家族的一员,广泛分布于疏松和致密结缔组织、皮肤和消化道上皮组织、骨、软骨、血管壁和神经系统。因其广泛的分布及特异性表达,使其成为一些疾病的致病因子,多种细胞信号途径可通过调节 matrilin-4 的表达调控细胞外基质的性能,进而影响疾病的发生、发展。随着近年来对 matrilin-4 的深入研究,可能为某些疾病的治疗提供新的思路。本文总结了 matrilin-4 在相关领域的最新研究进展,并对 matrilin-4 的基因结构,与家族其他成员的关系以及在疾病中的作用作一综述。

关键词:Matrilin-4; 细胞外基质; 成牙本质细胞

中图分类号:R34 文献标识码:A 文章编号:1673-6273(2017)19-3795-03

Research Progress on Extracellular Matrix Matrilin-4*

XIE Jin-fang¹, LI Jing¹, LI Yuan¹, GAO Hua-lf², YANG Nan³, MENG Lin⁴, GENG Wen-tao¹, ZHANG Ying-li^{1△}

(1 Department of Endodontics, Stomatological Hospital of Jilin University, Changchun, Jilin, 130021, China;

2 Department of Pedodontics, Stomatological Hospital of Jilin University, Changchun, Jilin, 130021, China;

3 Department of Prosthodontics, Stomatological Hospital of Jilin University, Changchun, 130021, China;

4 Department of Oral Pathology, Stomatological Hospital of Jilin University, Changchun, Jilin, 130021, China)

ABSTRACT: Matrilin-4 is a member of the non-collagenous extracellular matrix protein family, and it widely distributes in loose and dense connective tissues, skin and digestive tract epithelial tissues, bone, cartilage, blood vessel wall and nervous system. Because of its widely distribution and specific expression, its mutations can contribute to multiple diseases. Many signaling pathways modulate the extracellular matrix indirectly by regulating the expression of matrilin-4. With the further research of matrilin-4 in recent years, some new ideas for the treatment of some diseases may be provided. This paper summarizes the latest research progress of matrilin-4 in related fields, and reviews the structure of matrilin-4, the relationship between other family members and the role of matrilin-4 in disease.

Key words: Matrilin-4; Extracellular matrix; Odontoblast

Chinese Library Classification(CLC): R34 Document code: A

Article ID: 1673-6273(2017)19-3795-03

前言

Matrilin 家族即母系蛋白家族,是一个非胶原性细胞外基质(extracellular matrix, ECM)蛋白家族,主要由血管假性血友病因子 A(von Willebrand Factor A, vWFA)样结构域,表皮生长因子(epidermal growth factor, EGF)样结构域和一个 α 螺旋卷曲结构域构成^[1]。Matrilin-4 作为 Matrilin 家族的一员,1998 年 Wagener 等首次在小鼠的 cDNA 文库中克隆到,就此展开了人们对 matrilin-4 的研究^[2]。Matrilin-4 不仅广泛分布于疏松和致密结缔组织、皮肤和消化道上皮组织、骨、软骨、血管壁和神经系统^[3],也有研究发现新生小鼠切牙始基、人牙髓细胞和深龋成牙本质细胞中存在 matrilin-4^[4],可能与牙本质形成和牙本质发育相关疾病有关,同时可能作为牙髓干细胞向成牙本质细胞分化

的标记。近年来,matrilin-4 的组织分布及表达特点日益受到人们的关注,因其分布的广泛性及组织特异性,可能与一些疾病的发生、发展和治疗存在密切的关系。随着对 matrilin-4 的深入研究,可能为某些疾病的治疗提供新的思路成为疾病治疗的新靶点。但目前对其功能及作用机制的研究还不十分明确。本文将对 matrilin-4 的结构,与家族其他成员的关系以及在疾病中的作用作一综述,以期为相关机制研究提供可能的判断依据及为一些疾病的治疗开阔新的方向。

1 Matrilin-4 基因结构

人类 matrilin-4 基因,重叠群位于 20 号染色体,基因跨度约 12 kb 包括至少 10 个外显子^[2]。通过侧翼一致的剪接信号和与 cDNA 序列的比较可确定外显子,第一个 VWFA 结构域

* 基金项目:吉林省科技发展计划项目(20130102096JC);2014 年度吉林大学“大学生创新创业训练计划”国家级项目(2014A78335)

作者简介:谢金芳(1992-),硕士,主要研究方向:牙体牙髓病临床及基础研究工作,电话:18843105464

△ 通讯作者:张颖丽(1962-),教授,主要研究方向:牙体牙髓病临床及基础研究工作,

电话:0431-88796017, E-mail: zhangyingli1989@163.com

(收稿日期:2016-10-15 接受日期:2016-10-29)

(E2)和四个EGF样结构域(E3,E4,E5和E6)分别由单一的外显子编码,而第二个vWFA结构域(E7,E8)和卷曲螺旋结构域(E9,E10)分别由两个外显子编码。内含子分开卷曲螺旋结构域,相对于matrilin-1是由U12型剪接体拼接的内含子的子群,matrilin-4基因5'剪接位点(ATATCCTTT)对U12型内含子是完全保守的^[5]。其内含子含有一个分支位点(CTCCTTAAC-CGC)即3'剪接位点上游的10个核苷酸,它与U12型AT-AC内含子的分支点(TTCCTTRACYCY)有高度同源性。通过RT-PCR可以在人胚肾细胞系HEK 293、成人肺、胎盘和wi-26人成纤维细胞中检测到matrilin-4的表达。在VWFA样结构域和卷曲螺旋结构域,所有的cDNA含有相似的信号肽序列,但EGF样结构域中不同^[6]。

2 matrilin-4与matrilins家族其他成员的关系

Matrilins家族都是由血管假性血友病因子A(von Willebrand Factor A,vWFA)样结构域,表皮生长因子(epidermal growth factor,EGF)样结构域和一个α螺旋卷曲结构域构成。其中vWFA域是最保守的,而卷曲螺旋是最不保守的结构域,matrilin的卷曲螺旋结构域的异型表现是疏水核心的作用而非离子的相互作用^[7]。相应的matrilins分别属于由不同域和多种功能的蛋白组成的血管假性血友病因子超家族。Matrilin-4作为matrilins家族的第四个成员,与其他三名成员之间有强烈的同源性但也有明显差异。Matrilin-4包含两个vWFA域和相连的四个EGF样结构域和一个C-末端的卷曲螺旋结构域。Matrilin-4的VWFA结构域、卷曲螺旋结构域与matrilin-2的各个域的相似性最高,该基因主要表达在肺,mRNA的表达可能来源于支气管软骨,在胸骨、脑、心脏和肾脏也有轻微表达^[1,8]。Matrilin-4 vWFA域侧翼的两个半胱氨酸残基和六个疏水残基是高度保守的,该结构由交替的两性α-螺旋和疏水的β链组成^[9]。Matrilin-4的第一vWFA域与matrilin-1、2和3的第一vWFA域的序列同源性分别为49.2%,52.4%和51.3%,matrilin-4的第二vWFA域与matrilin-1、2的第二VWFA结构域的序列同源性分别是56%和58.8%。Matrilin-4的两个VWFA样域之间的序列同源性为41.7%^[10]。Matrilin-4的四个EGF样结构域,彼此间隔六个半胱氨酸的间距,互相间平均序列同源性为42%。比较matrilin-4的EGF样结构域与其他matrilins的EGF样结构域,matrilin-4的第一个EGF样结构域和matrilin-2的第二个EGF样域之间的同源性最高为58.5%,matrilin-4的第三个EGF样结构域和matrilin-3第四个EGF样域之间同源性最低为29.3%,相对于其他matrilins平均序列同源性为44.7%。matrilin-4的EGF样结构域缺乏参与Ca²⁺结合到EGF样结构域的关键残基,也不包含matrilin-3的EGF样结构域额外的氨基酸残基。Matrilin-4的卷曲螺旋结构域与其他matrilins的同源性最低,与matrilin-1的同源性是38.2%,matrilin-2是40.4%,而matrilin-3仅为20.7%^[11]。

3 matrilin-4在正常及病变组织中的表达

3.1 matrilin-4在软骨中的表达

ADAMTS(a disintegrin like and metalloproteinase with thrombospondin type I motifs)即含I型血小板结合蛋白基序

(TSP)的解聚蛋白样金属蛋白酶,是一类Zn²⁺依赖的分泌型金属蛋白酶,广泛存在于哺乳动物和无脊椎动物体内^[12,13]。ADAMTS-5基因作为ADAMTS家族重要成员,定位于人21q21-q22。Groma^[14]等人研究表明在小鼠长骨成熟过程中生长板软骨细胞内ADAMTS-5具有matrilins胞内处理功能,ADAMTS-5可裂解matrilin-4形成matrilin-4的C-末端(matrilin-4新表位)。通过间接免疫荧光法证实新生小鼠胫骨或股骨的生长板截断处ADAMTS-5与matrilin-4新表位表达一致,主要表达在功能性和早期或晚期但不是终末分化的肥厚性软骨细胞内。小鼠在出生后14天,在生长板肥厚区可检测到matrilin-4新表位。出生后28天,matrilin-4在骨-软骨交界处肥厚区表达。相反,在鼻中隔生长板matrilin-4新表位或ADAMTS-5即使经过广泛的酶对其暴露,在细胞外也几乎没有信号被检测到^[14]。即matrilin-4新表位在细胞内表达而不再细胞外表达。有学者^[15]对ADAMTS-5基因敲除小鼠的切片进行免疫组化染色,发现matrilin-4的C-末端片段不会在ADAMTS-5基因敲除小鼠生长板中检测到,表明ADAMTS-5和matrilin-4新表位主要定位在细胞内,在生长板的matrilin-4处理中ADAMTS-5起不可或缺的作用。Matrilin-4在骨和软骨组织中表达,与骨组织发育、多种骨发育异常性疾病和骨关节炎相关^[16-18]。通过对matrilin-4作用机制的深入研究,可能为骨、软骨的相关疾病提供新的治疗靶点。

3.2 Matrilin-4在造血干细胞中的表达

血液系统终生处于自我更新和维护状态,其中多能造血干细胞(HSCs)起重要作用^[19]。干细胞在成人一生中大部分时间处于休眠状态,只有在提供维持稳态的血供时进入细胞周期。有研究表明在应激条件下如化疗或出血,matrilin-4在潜在的多能造血干细胞(HSCs)活化过程中下调,能促进IFNα治疗,使细胞从G₀期进入G₁期,启动循环,诱导HSCs增殖^[20-22]。而且matrilin-4在长期的造血干细胞中较短期造血干细胞中高表达,在稳定的定向祖细胞中高表达,在IFNα或其他炎性细胞因子的体内治疗中几乎完全耗尽。因此,matrilin-4在应激时细胞巢的形成及创伤重建中起重要作用。

3.3 matrilin-4在角膜基质营养不良中的表达

角膜基质营养不良是一种原发性基因决定的双侧多发性非炎性疾病,影响角膜基质层^[23,24]。该疾病分为颗粒型和晶格型。颗粒和晶格型角膜基质营养不良与等位基因突变相关,异常的基因产物在角膜层积累并形成沉积物是I型角膜营养不良的特征^[25,26]。matrilin-4作为近年发现的蛋白超家族成员,不仅是致密和疏松结缔组织,骨,关节软骨和神经组织的组成成分,而且与基底膜有一定的联系^[27,28]。在正常角膜中,角膜上皮matrilin-4有轻度的免疫反应。而在颗粒状I型角膜营养不良的上皮层,matrilin-4呈弥漫、强烈但不连续的细胞质性免疫反应,matrilin-4在角膜基质沉淀物中呈阳性表达,颗粒层之间的间质细胞呈不规则温和的表达。在晶格状I型角膜营养不良中matrilin-4呈中度的免疫反应,角膜基质的前部和后部三分之一的淀粉样斑块中matrilin-4呈显著强烈的免疫反应^[29]。由此可见,matrilin-4与角膜基质营养不良间存在紧密关联。Matrilin-4的表达增强可能是角膜基质营养不良的一个发病机制,抑制其表达可能减少该病的发生。但matrilin-4在基质修复和

再生中的作用仍需进一步研究。

3.4 Matrilin-4 在龋病中的表达

龋病是在以细菌为主的多种因素作用下,牙体硬组织发生慢性进行性破坏的一种疾病,是人类的常见病、多发病之一。随着对龋病学的研究深入,龋病的治疗日益受到重视。正常牙髓组织,外层是具有牙本质形成功能的成牙本质细胞层,内部为牙髓细胞和间充质。matrilin-4 作为 matrilins 家族成员中组织分布最广泛的蛋白,研究显示其可能参与龋损的修复过程^[4,9]。Paakknen 等人通过体外实验证实在健康牙髓组织中,matrilin-4 仅在成牙本质细胞层中呈阳性表达,在牙髓细胞及间充质中表达呈阴性,认为 Matrilin-4 是成牙本质细胞的特异性基因^[20]。但深龋时,matrilin-4 在龋损下方的成牙本质细胞层及相邻牙髓组织中呈阳性表达^[3],且 matrilin-4 mRNA 在深龋中也呈上调趋势,这可能是由于受到龋损刺激后,在多种信号的调控下,牙髓中的间充质干细胞向龋损部位迁移并分化为成牙本质细胞。推测 matrilin-4 可能是牙髓干细胞向成牙本质细胞分化的标志,并且可能与修复性牙本质的形成有关,在维持成牙本质细胞的正常功能中起作用。但其与组织损伤修复的机制至今尚不明确。基于 matrilin-4 在龋损修复中的特性,可尝试将其作为一种新型的盖髓剂用于牙髓盖髓术,来弥补目前常用盖髓剂如氢氧化钙等会使牙髓组织发生凝固性坏死、炎症的缺点,为临床治疗提供理论依据^[30]。

综上所述,细胞外基质 matrilin-4 作为 matrilins 家族中的重要成员,与疾病的发生、发展密切联系。随着研究的进一步深入,matrilin-4 的应用很可能成为某些疾病治疗的新方式,为疾病治疗提供新的思路。目前虽然已有研究证明 matrilin-4 在软骨、HSCs、角膜及牙髓中表达,但 matrilin-4 的作用机制及其在疾病治疗中的具体应用亟待更深入的研究。

参考文献(References)

- [1] Mai JN, Chen CC, Ling JQ. Research progress on Matrilin family[J]. Journal of stomatology, 2009, 36(6): 691-697
- [2] Wagener R, Kobbe B, Paulsson M, et al. Genomic organisation, alternative splicing and primary structure of human matrilin-4 [J]. FEBS LETT, 1998, 438(3): 165-170
- [3] Chen C, Wei X, Ling J, et al. Expression of matrilin-2 and -4 in human dental pulps during dentin-pulp complex wound healing [J]. J Endod, 2011, 37(5): 642-649
- [4] Yang N, Li W, Gao HL, et al. The expression of matrilin-2 and matrilin-4 in dental pulp wound healing model of rat[J]. Journal of Modern Stomatology, 2016, 30(1): 6-11
- [5] Foradori M, Qian C, Fernandez CA, et al. Matrilin-1 is an inhibitor of neovascularization [J]. Journal of Biological Chemistry, 2014, 289(20): 14301-14309
- [6] Wagener R, Kobbe B, Aszódib A, et al. Characterization of the Mouse Matrilin-4 Gene: A 5' Antiparallel Overlap with the Gene Encoding the Transcription Factor RBP-L [J]. Genomics, 2001, 76(1-3): 89-98
- [7] Ann-Kathrin AB, Halina M, Jörn MW, et al. Characterization of recombinantly expressed matrilin VWA domains[J]. Protein Expression and Purification, 2015, 107: 20-28
- [8] Alexandra F, Korné Lia B, Ferenc D, et al. Lack of Matrilin-2 Favors Liver Tumor Development via Erk1/2 and GSK-3β Pathways In Vivo [J]. PLoS One, 2014, 9(4): e93469
- [9] Klatt AR, Nitsche DP, Kobbe B, et al. Molecular structure, processing, and tissue distribution of matrilin-4 [J]. J BIOL CHEM, 2001, 276(20): 17267-17275
- [10] Wu JJ, Eyre DR. Matrilin-3 forms disulfide-linked oligomers with matrilin-1 in bovine epiphyseal cartilage [J]. J BIOL CHEM, 1998, 273(28): 17433-17438
- [11] Charlotte W, Andreas R, Raimund W, et al. Complexes of Matrilin-1 and Biglycan or Decorin Connect Collagen VI Microfibrils to Both Collagen II and Aggrecan [J]. J BIOL CHEM, 2003, 278 (39): 37698-37704
- [12] Santiago C, Carlos LO. ADAMTS proteases and cancer [J]. Matrix Biology, 2015, 44: 77-85
- [13] Sun Y, Huang J, Yang Z. The roles of ADAMTS in angiogenesis and cancer[J]. Tumour Biology, 2015, 36(6): 4039-4051
- [14] Gromia G, Grskovic I, Schael S, et al. Matrilin-4 is processed by ADAMTS-5 in late Golgi vesicles present in growth plate chondrocytes of defined differentiation state [J]. Matrix Biology, 2011, 30(4): 275-280
- [15] Ehlen H, Sengle G, Klatt AR, et al. Wagener Proteolytic processing causes extensive heterogeneity of tissue matrilin forms [J]. J Biol Chem, 2009, 284: 21545-21556
- [16] Bent B, Frank Z, Keyur D, et al. Comparative Proteomic Analysis of Normal and Collagen IX Null Mouse Cartilage Reveals Altered Extracellular Matrix Composition and Novel Components of the Collagen IX Interactome [J]. Journal of Biological Chemistry, 2013, 288(19): 13481-13492
- [17] Kai LY, Polina SS, Brad B, et al. Loss of NAC1 Expression Is Associated with Defective Bony Patterning in the Murine Vertebral Axis [J]. PLoS One, 2013, 8(7): e69099
- [18] Briggs MD, Bell PA, Pirog KA. The utility of mouse models to provide information regarding the pathomolecular mechanisms in human genetic skeletal diseases: The emerging role of endoplasmic reticulum stress (Review) [J]. International Journal of Molecular Medicine, 2015, 36(6): 1483-1492
- [19] Bowman TV. Getting to the Ncor of HSC emergence[J]. Blood, 2014, 124(10): 1541-1542
- [20] Paakkonen V, Vuoristo JT, Salo T, et al. Comparative gene expression profile analysis between native human odontoblasts and pulp tissue[J]. Int Endod J, 2008, 41(3): 117-127
- [21] Uckelmann H, Essers M. Role of matrilin-4 in stress-induced HSC activation and homeostasis[J]. EXP HEMATOL, 2013, 41(8): 39-42
- [22] Hannah U, Sandra B, Marieke E. Extracellular Matrix Protein Matrilin-4 Regulates HSC Stress Response [J]. Blood, 2014, 124(21): 601
- [23] Andrea L. Corneal dystrophies and genetics in the International Committee for Classification of Corneal Dystrophies era: a review [J]. Clinical and Experimental Ophthalmology, 2014, 42(1): 4-12
- [24] Lin ZN, Chen J, Cui HP. Characteristics of corneal dystrophies: a review from clinical, histological and genetic perspectives [J]. International Journal of Ophthalmology, 2016, 9(6): 787-796

- HSP90 inhibitor 17-DMAG reconditions the tumor microenvironment to improve recruitment of therapeutic T cells [J]. *Cancer Res*, 2012, 72(13): 3196-3206
- [21] Zhao X, Bose A, Komita H, et al. Intratumoral IL-12 gene therapy results in the crosspriming of Tc1 cells reactive against tumor-associated stromal antigens[J]. *Mol Ther*, 2011, 19(4): 805-814
- [22] Pacey S, Wilson RH, Walton M, et al. A phase I study of the heat shock protein 90 inhibitor alvespimycin (17-DMAG) given intravenously to patients with advanced solid tumors [J]. *Clin Cancer Res*, 2011, 17(6): 1561-1570
- [23] Castilleja A, Ward NE, Catherine A. Accelerated HER-2 degradation enhances ovarian tumor recognition by CTL. Implications for tumormunogenicity [J]. *Mol and Cell Biochem*, 2001, 217 (1-2): 21-33
- [24] Haggerty TJ, Dunn IS, Rose LB, et al. Heat shock protein-90 inhibitors enhance antigen expression on melanomas and increase T cell recognition of tumor cells[J]. *PLoS One*, 2014, 9(12): e114506
- [25] Gameiro SR, Caballero JA, Hodge JW. Defining the molecular signature of chemotherapy-mediated lung tumor phenotype modulation and increased susceptibility to T-cell killing[J]. *Cancer Biother Radio*, 2012, 27(1): 23-35
- [26] Jackaman C, Majewski D, Fox SA, et al. Chemotherapy broadens the range of tumor antigens seen by cytotoxic CD8⁺T cells in vivo [J]. *Cancer Immunol Immun*, 2012, 61(12): 2343-2356
- [27] Wang Y, Ren X, Deng C, et al. Mechanism of the inhibition of the STAT3 signaling pathway by EGCG [J]. *Oncol Rep*, 2013, 30(6): 2691-2696
- [28] Santilli G, Piotrowska I, Cantilena S, et al. Polyphenol E enhances the antitumor immune response in neuroblastoma by inactivating myeloid suppressor cells[J]. *Clin Cancer Res*, 2013, 19(5): 1116-1125
- [29] Huang AC, Cheng HY, Lin TS, et al. Epigallocatechin gallate (EGCG), influences a murine WEHI-3 leukemia model in vivo through enhancing phagocytosis of macrophages and populations of T-and B-cells[J]. *In Vivo*, 2013, 27(5): 627-634
- [30] Neckers L, Workman P. HSP90 molecular chaperone inhibitors: are we there yet?[J]. *Clin Cancer Res*, 2012, 18(1): 64-76
- [31] Dodd K, Nance S, Quezada M, et al. Tumor-derived inducible heat-shock protein 70 (HSP70) is an essential component of anti-tumor immunity[J]. *Oncogene*, 2015, 34(10): 1312-1322
- [32] Böll B, Eltaib F, Reiners KS, et al. Heat shock protein 90 inhibitor BIIB021 (CNF2024) depletes NF-κB and sensitizes Hodgkin's lymphoma cells for natural killer cell-mediated cytotoxicity[J]. *Clin Cancer Res*, 2009, 15(16): 5108-5116
- [33] Fionda C, Soriani A, Malgarini G, et al. Heat shock protein-90 inhibitors increase MHC class I-related chain A and B ligand expression on multiple myeloma cells and their ability to trigger NK cell degranulation[J]. *J Immunol*, 2009, 183(7): 4385-4394
- [34] Wei H, Zhao L, Li W, et al. Combinatorial PD-1 blockade and CD137 activation has therapeutic efficacy in murine cancer models and synergizes with cisplatin[J]. *PLoS One*, 2013, 8(12): e84927
- [35] Akbay EA, Koyama S, Carretero J, et al. Activation of the PD-1 pathway contributes to immune escape in EGFR-driven lung tumors[J]. *Cancer Discov*, 2013, 3(12): 1355-1363
- [36] Shimamura T, Perera SA, Foley KP, et al. Ganetespib (STA-9090), a nongeldanamycin HSP90 inhibitor, has potent antitumor activity in in vitro and in vivo models of non-small cell lung cancer[J]. *Clin Cancer Res*, 2012, 18(18): 4973-4985
- [37] Concha-Benavente F, Ferris RL. IFN-γ-induced PD-L1 expression is JAK2 but not JAK1 dependent and its inhibition enhances NK-cetuximab mediated ADCC of HNSCC cells[J]. *Cancer*, 2015, 115(5): e33
- [38] Norman MZ, Desantis G, Janji B, et al. PD-L1 is a novel direct target of HIF-1α, and its blockade under hypoxia enhanced MDSC-mediated T cell activation[J]. *J Exp Med*, 2014, 211(5): 781-790
- [39] Wu L, Yun Z, Tagawa T, et al. CTLA-4 blockade expands infiltrating T cells and inhibits cancer cell repopulation during the intervals of chemotherapy in murine mesothelioma[J]. *Mol Cancer Ther*, 2012, 11(8): 1809-1819

(上接第 3797 页)

- [25] Zhao SJ, Zhu YN, Shen XC, et al. Chinese family with atypical granular corneal dystrophy type I caused by the typical R555W mutation in TGFBI[J]. *Int J Ophthalmol*, 2013, 6(4): 458-462
- [26] Courtney DG, Atkinson SD, Moore JE, et al. Development of Allele-Specific Gene-Silencing siRNAs for TGFBI Arg124Cys in Lattice Corneal Dystrophy Type I [J]. *Investigative Ophthalmology and Visual Science*, 2014, 55(2): 977-985
- [27] Klatt AR, Nitsche DP, Kobbe B, et al. Molecular structure, processing, and tissue distribution of matrilin-4 [J]. *J Biol Chem*, 2001, 276: 17267-17275
- [28] Torricelli AA, Singh V, Santhiago MR, et al. The Corneal Epithelial Basement Membrane: Structure, Function, and Disease [J]. *Investigative Ophthalmology and Visual Science*, 2013, 54(9): 6390-6400
- [29] Szalai E, Felszeghy S, Hegyi Z, et al. Fibrillin-2, tenascin-C, matrilin-2, and matrilin-4 are strongly expressed in the epithelium of human granular and lattice type I corneal dystrophies Mol Vis [J]. *MOL VIS*, 2012, 18: 1927-1936
- [30] Mao HD. Clinical observation about Vitapex and light curing Calcium Hydroxide used in direct pulp capping [J]. *Heilongjiang Medicine Journal*, 2015, 28(6): 1211-1213