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Title: ~~Protection or harnessing~~The role of necroptosis ~~for~~in the treatment of diseases

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ABSTRACT

Necroptosis is ~~a cell death mode mechanism~~ an emerging form of programmed cell death ~~of occurring via~~ active and well-regulated necrosis, distinctive from apoptosis ~~in morphologically~~, and biochemically ~~and molecular features~~. Necroptosis is mainly unmasked when apoptosis is compromised in response to cell stress. Unlike apoptotic ~~cells undergoing~~ cells, which are cleared by macrophages or neighboring cells, necrotic cells release danger signals, ~~provoking triggering~~ inflammation, and ~~further severe exacerbating tissue damage to tissue~~. ~~It has been growing evidence~~ Evidence increasingly suggests that programmed necrosis is not only associated with pathophysiology ~~of real diseases~~, but also ~~provides induces~~ innate immune response to viral infection. Therefore, necroptotic cell death plays both physiological and pathological roles. Physiologically, necroptosis ~~can induce~~ an innate immune responses as well as premature assembly of viral ~~particles~~ particles in cells infected with virus that ~~can abrogates~~ host apoptotic machinery. On the other hand, necroptosis ~~by itself has well been thought to be per se is~~ detrimental, causing various diseases such as sepsis, neurodegenerative diseases and ischemic reperfusion injury. This review ~~will deal with discusses the~~ signaling pathways leading to necroptosis, ~~its associated~~ necroptotic proteins with target-specific inhibitors and ~~implicated diseases involved~~. ~~Many Several researches studies of necroptosis~~ currently focus on protective approaches to ~~block inhibit~~ necroptotic cell death. In cancer biology, however, anticancer drug resistance severely hampers the efficacy of chemotherapy based on apoptosis. Pharmacological switching of cell ~~demise death can encourage finds~~ therapeutic application ~~to overcome in drug-resistant cancers with drug resistance~~. Therefore, ~~future the possible~~ clinical ~~use role~~ of necroptosis ~~for in~~ cancer control will be discussed in brief.

INTRODUCTION

Cell survival is constantly in dynamic equilibrium with cell death for tissue homeostasis. Aside from cell survival, cell death ~~takes place~~occurs in various modes such as programmed ~~way~~ or ~~not-random mechanisms~~ upon exposure to various stresses. ~~One of the~~ Programmed cell death ~~or~~ apoptosis is activated ~~in an~~via intrinsic or extrinsic ~~fashion~~mechanisms in response to ~~a diverse~~ of death stimuli. Both pathways ~~are characterized by~~ involvement of a series of signaling molecules with activated caspases and is ~~so-called~~termed caspase-dependent cell death. Meanwhile, necroptosis is classified as type III programmed cell death with apoptotic and necrotic features. It is also ~~coined~~known as programmed necrosis or caspase-independent cell death according to morphological or molecular features. Initially, necroptosis ~~has been known to be~~was considered as unwanted-undesirable passive cell death. ~~However, but it is~~ currently considered as specialized cell death ~~modality~~ since it is ~~induced in an~~ orchestrated ~~way~~ under a caspase-compromised condition. ~~Like~~ Similar to apoptosis, necroptosis ~~has its own~~acts ~~is~~executed via distinct signaling ~~pathway-mechanism comprising~~ ~~composed of~~ a cascade of specified proteins, ~~consequently leading to~~resulting in regulated necrotic cell death. ~~Though it's underlying~~ Despite unknown mechanisms and pathological significances ~~remain unknown as~~ compared ~~to~~with apoptosis, ~~the~~ discovery of pharmacological inhibitors targeting necroptosis has been extensively pursued. Here, we ~~seek to~~ introduce the concept of necroptotic cell death induced under various pathophysiological conditions —and delineate the pathological mechanisms ~~by which~~unmasking necroptosis ~~is unmasked~~ in a well-orchestrated fashion. In this review, necroptosis-associated diseases and ~~its~~the underlying pathogenesis will be discussed.

SIGNALING PATHWAYS LEADING TO NECROPTOSIS INDUCTION AND BIOCHEMICAL CHANGES

Typically, necroptosis occurs in cells exposed to extrinsic stimuli such as TNF α , FASL, and TRAIL in combination with compromised caspase-8 (C-8). C-8 inhibition is ~~caused~~ induced from by genetic defects, viral proteins, and treatment with a pan-caspase inhibitor zVAD ~~treatment~~ (1-3). ~~Identification and biological validation of n~~ Necroptosis-regulating proteins have been identified and biologically validated comprehensively ~~been pursued. From~~ g Genome-wide siRNA screening yielded a some few candidate genes associated with necroptosis ~~were proposed~~ (4). ~~Since Based on the disclosure role~~ of RIP1 as a necroptosis regulator, ~~identification of~~ RIP3, mixed lineage kinase domain-like protein (MLKL) and PGAM5 were ~~followed identified~~ (5-8). ~~Illustrated is the~~ The signaling pathway leading to necroptosis is illustrated in Fig. 1. ~~Upon~~ TNF α ligation to its cognate receptor, ~~it drives triggers~~ caspase-dependent cell death as a default cell death mechanism mode. ~~Under e~~ Caspase-compromised conditions, ~~it directs drive~~ cell death fate into via necroptosis with accompanying RIP1 activation (9). Upon stimulation, RIP1 interacts with RIP3 ~~to form leading to the~~ formation of a necrosome complex via RIP homotypic interaction motif (RHIM) within cells (10). MLKL ~~pseudokinase~~ was identified as a substrate of RIP3 ~~when under~~ necroptotic conditions is triggered. Phosphorylated RIP3 ~~can recruit to induces phosphorylate~~ MLKL phosphorylation at serine or threonine sites. Then, ~~RIP3-MLKL complex translocates to~~ mitochondria-associated membrane mediated via, in which phosphoglycerate mutase 5 (PGAM5), ~~are involved. Phosphoglycerate mutase 5 (PGAM5) was later discovered as which~~ is a necrosome-associated protein ~~which in turn can regulat~~ inge dynamic-related protein (Drp1) in turn (8). Finally, Drp1 ~~regulates induces~~ mitochondrial fragmentation, a crucial event for necroptosis (11).

~~When Biochemical changes during the early stages of necroptosis is triggered, biochemical changes at early stage include ATP depletion, ROS generation, calcium overload, and loss of mitochondrial permeability transition (12). At the cellular level, necroptosis is characterized by loss of plasma membrane integrity as well as organelle swelling, finally leading to cellular collapse (10). More strikingly, a~~Notably, necroptotic cells released various damage-associated molecular patterns (DAMPs) such as HMGB1, cytokines and histones into extracellular media. Particularly, a disulfide form of HMGB1 by oxidation ~~can contribute~~s to the inflammatory responses (13). Released HMGB1 ~~can bind~~s to a cognate receptor on endothelial cells and macrophages to transduce cellular responses such as release of proinflammatory cytokines and chemotactic cell migration (14).

NECROPTOSIS: TARGET PROTEINS AND INHIBITORS

As described above, a series of necroptosis-associated proteins ~~was were~~ identified and further validated as targets of necroptosis. ~~After then~~Subsequently, ~~some a few~~ small molecules ~~have been were~~ successfully discovered, specifically targeting ~~modulate~~ necroptosis proteins. ~~Discovered~~Target-specific small molecules ~~that can modulate in necroptosis~~ are listed in Table 1.

RIP-1 inhibitors (~~N~~necrostatin-1 and derivatives): Necrostatin-1 (Nec-1), ~~a~~ 5-(1H-indol-3-ylmethyl)-2-thiohydantoin 1, was first discovered ~~through by screening of for~~ necroptosis inhibitors and later identified as an allosteric inhibitor of RIP1 via stabilization of an inactive conformation of the kinase domain (KD) (15). It has been widely validated in various necroptosis-associated animal models (16-19). Accordingly, Nec-1 plays a crucial role in prevention or ~~mitigation-alleviation~~ of necroptotic damage caused ~~from by~~ various stimuli ~~viaby~~ targeting RIP1. Another potent Nec-1 derivative Nec-1s (7-Cl-O-Nec-1) ~~has even more showed greater selective specificity~~ to RIP1 ~~over compared with~~ other kinases. Other inhibitors have been developed as ~~the~~ RIP1 inhibitors, including furo[2,3-d]pyrimidines and

GSK'963 (20, 21).

RIP3 inhibitors: Recent studies proposed that necroptosis is mediated in a RIP1- or RIP3-dependent manner (22, 23). Unlike RIP1, RIP3 is ~~so~~ essential for necroptosis, but not apoptosis, ~~and that~~ targeting RIP3 ~~seems appears~~ to be more specific ~~for in~~ controlling necroptosis. ~~More~~ Interestingly, ~~silencing of~~ RIP3 ~~silencing~~ substantially ~~rescues protected~~ cells ~~or and~~ tissues ~~from against~~ necroptosis-inducing conditions by (24). ~~Some s~~Small molecules ~~(such as~~ GSK'840, GSK'843 and GSK'872) have been reported to suppress RIP3-dependent necroptosis (25). Mechanistically, the ~~escase~~ molecules form ~~a~~ complex with RIP3 to restore caspase activity. Consequently, RIP3 inhibitors potentially protect cells from diverse stimuli than RIP1 inhibitors.

MLKL inhibitors: Necrosulfonamide ((E)-N-(4-(N-(3-methoxypyrazin-2-yl) sulfamoyl) phenyl)-3-(5-nitrothiophene-2-yl) acrylamide, NAS) ~~can~~ protects cells ~~from against~~ TNF-induced necroptosis via covalent modification ~~with of~~ a cysteine ~~of in~~ MLKL (7). A compound TC13172 is ~~an~~ MLKL inhibitor with single nanomolar potency. It ~~was demonstrated to~~ ~~cause induced~~ covalent inhibition at Cys-86 of MLKL (26). In addition, GW806742X targets the pseudo-kinase domain of MLKL with ~~a~~ nanomolar inhibitory activity, protecting ~~against~~ necroptosis ~~derived cell death~~, although it ~~has exhibits shows~~ off-target ~~activities effects~~ against other kinases (26).

~~Besides listed above, some~~ Additional agents have been developed as inhibitors of necroptosis ~~though their acting directly via direct necroptosis targets that~~ have ~~still not been yet~~ ~~to be~~ designated. Ponatinib and pazopanib (27) ~~are: T~~ two anti-cancer agents ~~were~~ identified from a representative panel of ~~United States~~ Food and Drug Administration (FDA)-approved drugs through phenotypic screening. Both drugs ~~abolish abrogate~~ phosphorylation-activation of ~~mixed lineage kinase domain like protein (MLKL)~~ during TNF α -induced necroptosis, ~~proposing suggesting that those drugs can interference~~ with the signaling proteins upstream of

MLKL. However, ~~they~~ cytose do not rescue cells from apoptosis. Interestingly, ponatinib ~~affects-inhibits~~ both RIP1 and RIP3 while pazopanib ~~exerts-acts against~~ preferential inhibitor of RIP1. ~~Also~~ Further, sorafenib is a multi-targeting kinase inhibitor with potent inhibitory activity against B-RAK, and ~~then-is~~ widely used for the treatment of acute leukemia. It ~~is proposed that it can~~ blocks signaling target proteins upstream of MLKL such as RIP1 and RIP3, although its real target remains elusive (28). Therefore, sorafenib can be harnessed for fine-tuning of necroptosis-inducing agents.

TPCK: N-tosyl-L-phenylalanine-chloromethyl ketone (TPCK), a serine protease inhibitor, protects ~~sed~~ cells from TNF-mediated necroptosis. ~~Through a screen -#~~ Using a TPCK probe, HtrA2/Omi has been identified as a target and ~~it acts functions~~ as an activator of ubiquitin C-terminal hydrolase (UCH-L1) ~~for execution of~~ resulting in necroptosis (29).

ROS scavengers: Reactive oxygen species (ROS) play a role in diverse ~~of~~ signaling pathways, ~~as those are due to~~ highly reactivity ~~to against~~ biomolecules such as proteins, DNA and lipids. ~~When Upon exposure of~~ L929 cells were exposed to TNF α , necroptotic signaling generates ROS ~~accumulation through via~~ mitochondrial transport chain but not cytosolic enzyme (30), ~~which- This notion~~ was strongly supported by ~~the~~ reports suggesting that butylated hydroxyanisole blocks ROS accumulation and cell death (31). A n NADPH oxidase inhibitor diphenyleneiodonium (DPI) protects renal tubular epithelial cells ~~from-against~~ necroptosis by blocking ROS generation (32).

PHYSIOLOGICAL AND PATHOLOGICAL SIGNIFICANCE OF NECROPTOSIS

Necroptosis ~~is-was~~ originally considered as ~~unwanted-undesirable~~ cell death upon exposure to stimuli, ~~causing-inducing detrimental-tissue~~ damage ~~to tissues~~. ~~Moreover-Furthermore~~, it is the alternate ~~give-ive~~ cell death ~~mechanism type that can be~~ induced under conditions of ~~defective when default cell death~~ apoptosis ~~is blocked or defective~~. However, ~~there are~~ growing evidences suggests that necroptosis is mediated ~~through-via~~ an orchestrated and specialized

pathway (33-35). Well-regulated cell death ~~plays occurs in a diverse range of biological functions phenomena like~~ such as development, immunology and differentiation. ~~Besides~~ Further, extrinsic apoptosis and necroptosis contribute to a host defense mechanism against microbial infection. ~~Some v~~ Viruses ~~like such as~~ adenoviruses, poxviruses, and herpesviruses ~~disarm inactivate each host's apoptosis machinery of host being unambled virus and would perpetuate if host cells~~ ~~could~~ only executed caspase-dependent default cell death (36-38). For instance, vaccinia viruses encode a caspase 8 inhibitor to block apoptotic cell death upon infection. Under this caspase-compromised condition, cells are committed to alternative necroptosis (6). The resulting necroptosis is vital to provoke innate immune response by killing virus-infected cells and ~~releasing eliminating releasing~~ danger signals from host cells ~~into external milieu~~. ~~Moreover~~ Furthermore, it has been reported that necroptosis in T cells regulates antigen-activated T-cell proliferation ~~of T cells~~ and survival. Caspase-8 negatively regulates necroptosis, promoting survival of activated T cells under physiological conditions. In mice lacking caspase-8, T cells fail to show immune response when infected with murine hepatitis virus (39).

Pathologically, ~~there is a growing body of reports~~ evidence suggests that necroptotic cell death leads to various diseases ~~are derived from necroptotic cell death~~. ~~Representatively, s~~ Sepsis is mainly caused by Gram-negative bacteria, which release endotoxin ~~of which that~~ elicits systemic inflammation ~~through via~~ release of $\text{TNF}\alpha$ and IL-1 inflammatory cytokines. Necroptosis ~~is manifested occurs~~ in ischemia-reperfusion (I/R) injury and neurodegenerative diseases. During restoration of blood flow into tissues, ~~it leads to~~ tissue damage occurs with severe neutrophil infiltration and cytokine production. Furthermore, necroptosis is ~~demonstrated to be~~ involved in traumatic brain ~~injury~~ and ~~traumatic~~ spinal cord ~~injury~~ injury (19, 40). Excitotoxicity, Huntington's disease and retinal degeneration are closely associated with necroptosis. Involvement of necroptosis can be validated by using Exposure to a specific RIP inhibitor Nec-1, ~~which can~~ effectively protects cells from necroptosis. Nec-1 protects hippocampal HT-22 cells ~~from against~~ glutamate-induced oxytosis (41). ~~Also, i~~ Inhibition of

RIP1 kinase or RIP3 silencing significantly rescues necroptotic cell death (42). ~~Moreover~~ Furthermore, Nec-1 reduces or delays necroptotic damage in transgenic ~~mouse mice bearing expressing~~ mutant Huntingtin protein, astrocytes from amyotrophic lateral sclerosis, and retinal pigment epithelium (42-44). Interestingly, microbial infection ~~can otherwise~~ induces necroptosis in host cells. Microbial proliferation occurs organically in the host by circumventing host's default programmed cell death in the host. Necroptosis is induced during viral infections like such as vaccinia virus (VV). VV expresses an inhibitor of caspase-1 and -8, diverting the host response toward necroptosis in a RIP3-dependent pathway (45). ~~Also~~ Further, Sendai virus induces necroptosis in neuroblastoma cells (17). Macrophage infected with S. typhimurium infection promotes induces necroptotic cell death macrophage expression to activate RIP1 and RIP3-dependent pathway manner.

PERSPECTIVES OF NECROPTOSIS AND CONCLUSIONS

~~Specialized cell death~~ Necroptosis has been recognized as an alternative ~~cell death~~ to apoptosis when cells are challenged-exposed to various stimuli ~~with under~~ specific conditions. Necroptosis has been ~~known-to-be-considered~~ unwanted cell death ~~and-to-be-unleashed~~ occurring under specific conditions. As mentioned above, it ~~has-been-causing~~ induces a variety of pathological conditions including septic shock, acute pancreatitis and neuronal degeneration.

~~Apoptotic death of~~ Damaged cells ~~dying-of-apoptosis-are-cleared~~ is followed by phagocytosis ~~of-in~~ macrophages or neighboring cells. ~~Conversely, Since-mbecause~~ loss of membrane integrity occurs in-of cells undergoing necroptosis ~~loses, on the contrary~~ Conversely, ~~intracellular danger-moleeules~~ substances including heat-shock proteins and HMGB1 are released ~~burst~~ into extracellular media, provoking inflammation and immune responses.

~~Against-In response to~~ infectious viruses or intracellular bacterial pathogens ~~to-escaping~~ apoptotic cell death, host cells actively switch ~~apoptosis~~ to necroptosis, causing premature assembly of virus particles or bacteria progeny and releasing of critical components ~~to triggering an~~ invoke the immune response (46-48).

~~Likewise~~ Similarly, necroptosis ~~is-was~~ demonstrated ~~in-under conditions of~~ chronic sterile inflammation such as alcoholic-induced liver injury and atherosclerosis (18, 49). Under these pathological ~~contexts~~ conditions, necroptotic cells release DAMPS to trigger sterile inflammation, via unknown mechanism ~~of which remains to be elucidated~~.

A potent and specific Regulation of necroptosis is therefore, needed, ~~therefore, need to be achieved with potency and specificity in order to be suitable to prevention or harness.~~ Indeed ~~fact~~, pharmacological blockade of necroptosis is of primary concern ~~for-in~~ the treatment of ~~its-associated~~ various diseases. Further studies will be extensively undertaken to encourage ~~identif~~ ycaation-of the target molecules mediating the, ~~build-up-of~~ signal transductioning ~~pathway~~ leading to necroptosis and facilitate the discovery of mechanism-based inhibitors.

메모 포함[오전1]: Please mention a few such intracellular molecules here.

On the other hand, necroptosis induction can ~~actively be~~ actively harnessed ~~through-via~~ molecular switching ~~to~~ or unmasking ~~it~~. Generally, cancer cells ~~can~~ grow in an uncontrolled ~~way-manner~~ and ~~can~~ further acquire ~~evasion-machinery-mechanisms~~ to ~~default-evade~~ cell death ~~pressure~~ intrinsically or extrinsically. Chemotherapy or radiotherapy is mainly based on apoptosis through caspase activation. However, many cancers have developed ~~various~~ strategies to disarm ~~such~~ apoptotic machinery, including dysregulated apoptosis, activation of pro-survival signaling pathways and upregulation of drug transporters. ~~Of these parameters,~~ ~~a~~ Alterations in apoptosis contributes to drug resistance of cancer during chemotherapy. To overcome drug-resistant cancers, alternative cell ~~demise-death mechanisms such as~~ like necroptosis or autophagy can be ~~taken-into-consideration~~. In previous reports, cancer cells that are refractory to apoptotic agents ~~was-were~~ shown to succumb to necroptosis-inducing agents (50). It is conceivable that resistance to apoptosis ~~resistance~~ can be overcome by necroptosis, because necroptotic pathway is ~~quite~~ distinct from apoptotic ~~machinery-mechanisms~~. ~~Moreover~~ Furthermore, ~~there have been growing several~~ reports suggest that necroptosis contributes to suppression of tumorigenesis. Particularly, mutations in the *CYLD* gene aggressively facilitate carcinoma ~~through-via~~ upregulation of angiogenic factors (51). ~~Also~~ Further, ~~polymorphisms in RIP3 gene~~ polymorphisms are found occur in non-Hodgkin's lymphoma and ~~level of~~ applied variant RIP3-γ ~~is-are~~ relatively high in colon and lung cancers (52, 53).

Practically, a few inducers of necroptosis ~~inducers~~ have been reported to ~~execute-trigger~~ necroptotic cell death in malignant cancers although their targets remain to be identified. ~~By~~ ~~mechanism,~~ Caspase activation is a prerequisite to trigger for apoptosis induction, so that and apoptotic cell death ~~does not properly undergo~~ fails if caspases are blocked or compromised by unknown mechanisms. Under those conditions, cells activate ~~alternative-cell death~~ necroptosis in response to cell death stimuli. In fact, a natural product shikonin induces necroptotic cell death in MCF-7 breast cancer cells that express Bcl-2 or Bcl-xL, which ~~can~~ acquire multidrug

resistance. Obatoclax, an antagonist of Bcl-2 family members, ~~can induce~~ necroptosis ~~dependent based on~~ autophagy in acute lymphoblastic leukemia resistant to glucocorticoids. In addition, combined treatment of pancaspase inhibitors with 5-fluorouracil ~~can drive~~ necroptosis in colorectal cancer (54). ~~To make it better~~ Furthermore, necroptotic cells ~~can~~ trigger adaptive immunity in dendritic cells (DCs), which in turn ~~can~~ activate CD8⁺ T cells for antitumor immunity (55).

However, necroptosis-based cancer therapy still remains elusive. It has been demonstrated that necroptosis in ~~the~~ tumor microenvironment contributes to inflammation and cancer metastasis (16). Furthermore, the low expression of key modulators of necroptosis ~~modulators~~ ~~is too low in some specific~~ cancers ~~fails~~ to induce necroptosis (56-58), ~~indicating resulting in cancer evasion that some cancers can evade from necroptosis.~~

In conclusion, suppression or enhancement of necroptosis ~~can be~~ therapeutically ~~utilized by effective either suppressing or triggering it in, depending on specific~~ diseases ~~specific contexts. Understanding A comprehensive insight into its the~~ underlying mechanisms ~~will is~~ needed to provide useful information for facilitate the diagnosis, biomarkers, and drug development ~~for treatment of in~~ necroptosis-associated diseases. Most ~~of researches studies~~ have focused on the identification of specific inhibitors targeting necroptosis, and ~~its their~~ underlying mechanisms of ~~inhibitors targeting necroptosis regulation~~ on. As a result, ~~some a~~ few small molecules have been discovered from the chemical library, and ~~then~~ optimized for further clinical use.

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CONFLICTS OF INTEREST

The authors have no conflict of interests.

FIGURE LEGENDS

Figure 1:- Necroptosis regulators and signaling pathways ~~to in activate~~ necroptosis activation. Upon TNF receptor ligation, a ~~series of~~ signal transduction mediated via including RIP1, caspase activation, and tBID cleavage ~~is ensued occurs to mediate, -resulting in~~ apoptotic cell death. Active caspase-8 inhibits necroptosis through via cleavage of RIP1 and RIP3. ~~Under the situation when~~ Inhibition of caspase ~~is inhibited, However, leads to the formation of a physical complex of~~ RIP1 ~~forms physical complex~~ with RIP3 to trigger ~~consecutive~~ downstream signaling events including MLKL and PGAM5 recruitments, ~~which and~~ transduction of mit cytosolic death signals to mitochondria, ~~leading resulting to in~~ necroptosis.

Table 1:- Target proteins associated with necroptosis and their specific inhibitors.

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Fig. 1
Cho YS

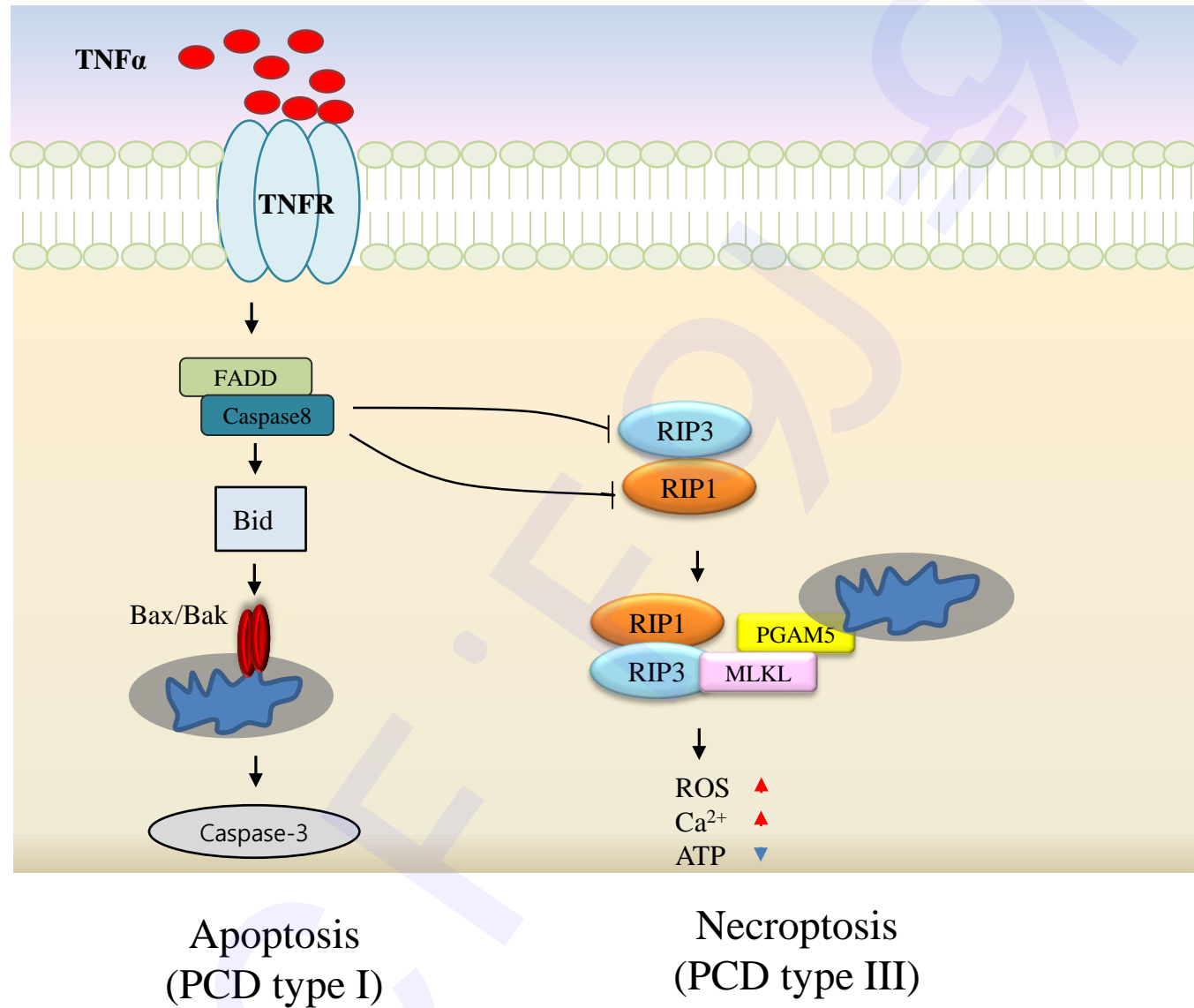


Table 1. Target proteins associated with necroptosis and their specific inhibitors.

Necroptosis Target proteins	Inhibitors	Mode of action/function
RIP-1	Nec-1 Furo[2,3-d]pyrimidine derivatives GSK'963	Allosteric inhibitor SAR reported >10 000-fold selective for RIP1
RIP-3	GSK'840, GSK'843, GSK'872	Caspase activity activated
MLKL	Necrosulfonamide TC13172 GW806742X	Covalent binding Covalent binding (nanomolar potency) Binds to pseudokinase domain (ATP- mimetic)
Others	Ponatinib & pazopanib Sorafenib TPCK Hydroxyanisole Diphenyleneiodonium (DPI)	Interfere with signaling proteins upstream of MLKL Target unknown UCH-L1 activator ROS scavenger ROS suppression