Oxidative stress-mediated hepatotoxicity of iron and copper: Role of Kupffer cells

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Abstract

Iron- or copper-mediated catalysis leads to the generation of reactive oxygen species (ROS) that can attack biomolecules directly, with the consequent enhancement in membrane lipid peroxidation, DNA damage, and protein oxidation. Reactive nitrogen species (RNS) can also be formed, leading to nitration of aromatic structures in addition to the oxidative deterioration of cellular components. Kupffer cells, the resident macrophages of the liver, play significant roles in immunomodulation, phagocytosis, and biochemical attack. Upon stimulation, liver macrophages release biologically active products related to cell injury, namely, ROS, RNS, and both immunomodulatory and fibrogenic cytokines, with production of chemokines and adhesion molecules by other cells of the liver sinusoid. Iron and copper alter the functional status of Kupffer cells by enhancing their respiratory burst activity without modifying particle phagocytosis. This effect is probably due to extra O₂ equivalents used in the oxidation of biomolecules and/or in the activating action of iron/copper on nitric oxide synthase, in addition to those employed by NADPH oxidase activity. Changes in gene expression of Kupffer cells may also be accomplished by iron and copper through modulation of the activity of transcription factors such as NF- κ B, which signals the production of cytotoxic, proinflammatory, or fibrogenic mediators. Thus, iron/copper-induced hepatotoxicity is a multifactorial phenomenon underlying actions due to the generation of ROS and RNS that may alter essential biomolecules with loss of their biological functions, modulate gene expression of Kupffer cells with production of cytotoxic mediators, or both.

Oxidative mechanisms in the toxicity of iron and copper

Transition metals such as iron and copper are implicated in a number of physiological, toxicological, and pathological processes due to their capacity to undergo changes of oxidation states involving electron transfer (Aust *et al.* 1985; Okada 1998). In aerobic cells, electron transport from metabolic fuels to O₂ is carried out through a series of iron and iron/copper containing respiratory complexes located in the inner mitochondrial membrane. The free energy released is used in part to pump H⁺ across the inner membrane, thus establishing an electrochemical proton gradient that al-

lows ATP production by the adenosine-5'-triphosphate synthase complex (Videla 2000).

Iron- and copper-catalysis can also cause formation of reactive O_2 species in cells, provided that a suitable concentration of the free redox-active transition metals is available (Aust *et al.* 1985; Luza & Speisky 1996). In fact, both ferric (Fe³⁺) and cupric (Cu²⁺) ions at physiological concentrations can promote the generation of hydroxyl radical (HO $^{\bullet}$), or a species of equivalent reactivity, in a reaction requiring a reducing agent (i.e., superoxide radical $[O_2^{\bullet-}]$) and hydrogen peroxide (H₂O₂) known as the iron/coppercatalyzed Haber-Weiss reaction (Haber & Weiss 1934; Samuni *et al.* 1981). The latter reaction involves the oxidation of Fe²⁺ or Cu⁺ by H₂O₂ that gen-

erates HO[•] and/or ferryl species (Fenton's reaction) (Fenton 1894; Kozlov & Berdnikov 1973) which, in turn, may initiate free-radical chain reactions with several target biomolecules when produced in close proximity to them. Thus, iron/copper-induced reactive O₂ species generation may lead to (i) formation of polyunsaturated fatty acid-derived hydroperoxides in membrane phospholipids, that can undergo decomposition in the presence of iron/copper ions into additional free-radical moieties (lipid peroxidation) (Aust et al. 1985); (ii) DNA damage by point mutations, DNA cross-linking, and/or DNA strand breaks (Halliwell & Aruoma 1993); (iii) oxidative modifications in side chains of amino acid residues in protein (protein oxidation) (Stadtman 1990); and (iv) depletion of sulfhydryls and alteration of calcium homeostasis (Stohs & Bagchi 1995). In addition to formation of reactive O₂ species, it has been shown that the interaction of chelates of iron and copper with peroxynitrite (ONOO⁻) promotes its heterolytic cleavage to yield a species with the reactivity of nitronium ion (NO_2^+) , a strong oxidizing species that can also lead to the nitration of aromatic structures such as tyrosine (Beckman et al. 1992). However, nitric oxide (*NO) can modulate free radical processes through (i) binding of Fe²⁺ with production of an iron-nitrosyl complex and diminution of iron availability for Fenton-mediated processes (Radi et al. 1995); or (ii) binding of Fe³⁺ or higher oxidation states of iron, with the consequent inhibition of related oxidative reactions (Radi et al. 1995). Thus, the net cytotoxic potential of iron/copper-induced oxidative mechanisms will depend on critical factors such as the type and redox capacity of the transition metal species involved, as well as the relative concentrations of reactive oxygen and nitrogen species at specific cell compartments.

The liver plays a central role in the maintenance of body iron and copper homeostasis; however, excess deposition of the transition metals occurs upon overload, leading to hepatocellular injury and functional insufficiency (Bacon & Britton 1989; Linder & Hazegh-Azam 1996). The propensity of iron/copper for catalyzing production of reactive oxygen and nitrogen species represents a major molecular mechanism triggering hepatocellular-damaging effects, which become significant when the capacity of the liver to maintain these metals in storage forms is exceeded.

The role of Kupffer cells in liver injury

Kupffer cells are resident macrophages of the liver playing significant roles in immunomodulation, phagocytosis, and biochemical attack (Decker 1990). Uptake of particles by Kupffer cells is mediated by plasma membrane receptors, with the concomitant release of specific molecules including proteases, bioactive lipids, cytokines, and reactive oxygen and nitrogen species (Decker 1990; Wang et al. 1993). Among the latter species, $O_2^{\bullet-}$ is predominantly formed in the respiratory burst of activated Kupffer cells (Wang et al. 1993), a phenomenon that involves the protein kinase C-dependent activation of NADPH oxidase (Decker 1990). Liver macrophages also produce NO by the inducible isoform of NO synthase (NOS2), at rates of about one eighth of those of $O_2^{\bullet-}$ (Wang *et al.*) 1993). In this situation, formation of ONOO⁻ may occur by the •NO-O₂• combination reaction known to proceed at an almost diffusion-controlled rate (Padmaja & Huie 1993), as shown in activated alveolar lung macrophages (Ischiropoulos et al. 1992). In addition to reactive species, activated Kupffer cells are known to produce and release various mediators related to liver injury, namely, cytokines such as tumor necrosis factor- α (TNF- α), interferon α/β , and interleukin (IL) -1 and -6 (Decker 1990). TNF- α is considered to be a common early effector molecule for liver injury, considering that, in addition to its direct cytotoxic effects, this cytokine is able to induce chemokines (IL-8, macrophage inflammatory protein- 1α [MIP-1], macrophage chemotactic protein-1 [MCP-1]) and adhesive molecules (intercellular adhesion molecule-1 [ICAM-1], vascular-cell adhesion molecule-1 [VCAM-1]), which are key to inflammation and consequent liver damage (Tsukamoto & Lin 1997).

Experimental evidence supports the pathogenic role of Kupffer cells in liver injury induced by endotoxin, xenobiotics such as acetaminophen, ethanol, and carbon tetrachloride, ischemia-reperfusion (Tsukamoto & Lin 1997), or hyperthyroid state (Tapia *et al.* 1997). In fact, prevention of liver injury has been observed upon (i) elimination of Kupffer cells by gadolinium chloride (GdCl₃); (ii) neutralization of TNF- α with anti-TNF- α antibody; (iii) prevention of translation of primary RNA transcript of TNF- α by antisense oligonucleotide; and (iv) interaction of TNF- α with soluble TNF- α receptors (Van Zee *et al.* 1992; Tsukamoto & Lin 1997; Tu *et al.* 1998).

B. Iron-induced GdCl₃-sensitive O₂ uptake

A. Rate of O₂ consumption

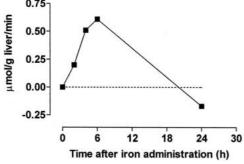


Fig. 1. Time course study of the effect of GdCl₃ pretreatment on the rate of O2 consumption in isolated perfused livers from control rats and iron-overloaded animals (A) and iron-induced GdCl3-sensitive O₂ uptake (B). Male Sprague-Dawley rats weighing 150-180 g were given free access to food and water and maintained in a 12 h light/dark cycle. Animals were given either GdCl3 (10 mg kg iv) or equivalent volumes of 0.9% wt vol NaCl 24 h before acute iron overload (500 mg kg ip), and studies were carried out at 0 (controls), 2, 4, 6, and 24 h after treatment. Livers were perfused via the portal vein in a non-recirculating system as described previously (Tapia et al. 1997), using Krebs-Henseleit bicarbonate buffer saturated with 95% $O_2/5\%$ CO_2 to give pH 7.4, at constant flow rates (3.5–4.0 ml g liver min) and temperature (36–37 °C). To assess the net effect of GdCl₃ on liver O₂ consumption shown in (B), rates of O₂ uptake in GdCl3-pretreated rats were subtracted from those in animals not treated with the Kupffer cell inactivator and were corrected for the decrease observed in rats not treated with iron. This latter effect of GdCl₃ is possibly caused by depression of mitochondrial respiration (Ferreira et al. 1998). Results represent means \pm SEM for four to seven animals per group. The statistical significance of differences between mean values was assessed by one-way ANOVA and the Newman-Keuls, test: (a) P < 0.05 compared with control rats (time zero); (b) P < 0.05 compared with the respective group of control and iron-overloaded animals without GdCl₃ pretreatment. Modified from Tapia et al. (1998).

Kupffer cell functioning and hepatotoxicity after acute iron overload *in vivo*

Acute iron overload in rats leads to an alteration in Kupffer cell functioning, shown by an early enhancement in the rate of O_2 consumption of the liver that is suppressed by $GdCl_3$ (Figure 1A). In fact, liver $GdCl_3$ -sensitive respiration is progressively increased by iron overload in the absence of an additional stimulus, reaching a maximum at 6 h after treatment and then decreasing to below control values at 24 h (Figure 1B). This effect of iron accounts for all the net increase in total hepatic O_2 uptake and is probably associated with O_2 equivalents used in the respiratory burst activity of Kupffer cells that involves generation of reactive oxygen and nitrogen species (Decker 1990).

Kupffer cell functioning can be monitored continuously by the infusion of colloidal carbon into the isolated perfused rat liver (Figure 2A), which leads to a significant uptake of the particles exclusively by non-parenchymal cells and predominantly by Kupffer cells (Cowper et al. 1990). Carbon phagocytosis is paralleled by an enhancement in the rate of O₂ consumption of the liver over basal values (Figure 2B), which is largely accounted for by the respiratory burst of Kupffer cells (Decker 1990; Wang et al. 1993). Minor mitochondrial respiratory components include O₂ uptake in Kupffer cells for energy supply needed for carbon phagocytosis (Cowper et al. 1990) or in hepatocytes, possibly mediated by prostaglandins released by activated liver macrophages (Qu et al. 1996). Integration of the area under the carbon uptake and O₂ consumption curves gives the total carbon uptake (23.5 mg g liver; Figure 2A) or total carbon-induced O_2 consumption (2.32 μ mol g liver; Figure 2B) in the 15 min time interval studied, respectively, integrated values that allow the calculation of the respective O_2 /carbon uptake ratios (0.099 μ mol O_2 mg carbon) (Tapia et al. 1997).

Carbon uptake by the perfused liver was not modified by iron overload, whereas the selective inactivation of Kupffer cells by GdCl₃ led to 62% to 76% diminution in carbon phagocytosis, both in controls and in iron-overloaded animals (Figure 3A). This may be due to the finding that GdCl₃ eliminates only large Kupffer cells and depresses carbon phagocytosis of small liver macrophages, whereas that of endothelial cells is increased (Hardonk *et al.* 1992). Iron overload elicited a time-dependent biphasic effect on GdCl₃-sensitive carbon-induced O₂ uptake (Figure 3B) that

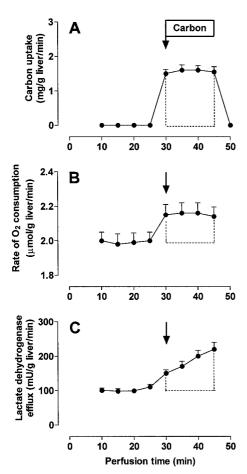


Fig. 2. Experimental design to assess the influence of colloidal carbon infusion (0.5 mg ml) on carbon uptake (A), O2 consumption (B), and sinusoidal LDH efflux (C) by isolated perfused rat livers. Male Sprague-Dawley rats weighing 150-180 g were given free access to food and water and maintained in a 12-h light/dark cycle. Livers were perfused as described in Figure 1. (A) In order to determine carbon uptake rates, the absorbance at 623 nm (A₆₂₃) was measured at 5-min intervals during carbon infusion (30- to 45-min time interval)(Cowper et al. 1990). Rates of carbon uptake (in mg g liver min) were calculated from the influent minus effluent differences in A_{623} , the specific extinction coefficient for carbon at $623~\rm nm~(0.97[mg~ml]^{-1})$, and the perfusion flow. Total carbon uptake was obtained by the integration of the respective curves between 30- to 45-min perfusion and expressed as mg g liver $[23.5 \pm 2.0 \ (n = 5) \ \text{mg g liver}]$. (B) Carbon-induced O₂ uptake was estimated by the integration of the area under the O2 consumption curves from 30- to 45-min perfusion with carbon and expressed as μ mol/g liver [2.32 \pm 0.1 (n=5) μ mol g liver]. Total LDH efflux in the presence of carbon was calculated by the integration of the area under the net sinusoidal release (mU g liver min) curve from 30- to 45-min perfusion and expressed as U/g liver [0.099 \pm 0.01 (n = 5) U/g liver]. Results represent the means \pm SEM for five animals.

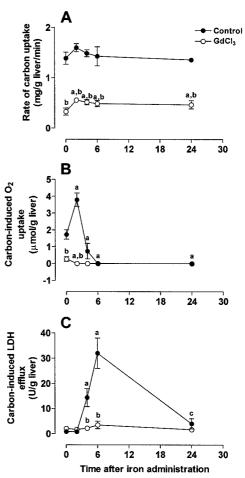


Fig. 3. Time course of the effect of GdCl₃ pretreatment on the rate of carbon uptake (A), carbon-induced O2 uptake (B), and sinusoidal carbon-induced LDH efflux (C) by perfused livers from control and iron-overloaded rats. Male Sprague-Dawley rats were given either $GdCl_3\ (10\ mg\ kg\ iv)$ or equivalent volumes of 0.9% wt/vol NaCl 24 h before acute iron overload (500 mg kg ip), and studies were carried out at 0 (controls), 2, 4, 6, and 24 h after treatment. Livers were perfused as described in Figures 1 and 2. Results represent means \pm SEM for four to seven animals per group. The statistical significance of differences between mean values was assessed by one-way ANOVA and the Newman-Keuls, test: (a) P < 0.05compared with control rats (time zero); (b) P < 0.05 compared with the respective group of control and iron-overloaded animals without $GdCl_3$ pretreatment; (c) P < 0.05 compared with the carbon-induced LDH efflux at 6 h after iron overload. Modified from Tapia et al. (1998).

seems to depend on the magnitude of the enhancement in Kupffer cell respiratory activity elicited by the *in vivo* iron treatment (Figure 1B). At 2 h after iron overload, carbon-induced Kupffer cell-dependent respiration is increased by 119% (Figure 3B) in conditions in which the iron-induced GdCl₃-sensitive O₂ uptake is elevated by only 9% (Figure 1B). When the

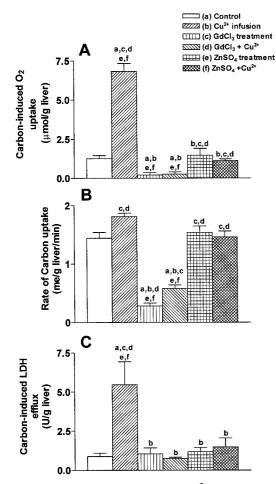


Fig. 4. Concentration-dependent effects of $\mathrm{Cu^{2+}}$ on the rate of carbon uptake and carbon-induced $\mathrm{O_2}$ uptake (A), and the respective $\mathrm{O_2/carbon}$ uptake ratios (B) by isolated perfused rat liver. Livers were perfused as described in Figure 1, in the absence ($\mathrm{Cu^{2+}}$ concentration = 0) or presence of 0.1, 0.25, 0.5, and 1.0 $\mu\mathrm{M}$ $\mathrm{Cu^{2+}}$ infused at 20 min perfusion and subjected to 0.5 mg carbon ml according to Figure 2. Oxygen/carbon uptake ratios were calculated by dividing the respective integrated values obtained between 30–45 min perfusion. Results represent means \pm SEM for four to six animals per group. The statistical significance of differences between mean values was assessed by one-way ANOVA and the Newman-Keuls, test: $^{\mathrm{a}}P$ < 0.05 compared with controls (zero $\mathrm{Cu^{2+}}$ concentration); $^{\mathrm{b}}P$ < 0.05 compared with 0.1 $\mu\mathrm{M}$ $\mathrm{Cu^{2+}}$. Modified from Sans et al. (1999).

latter respiratory component induced by iron is enhanced to 21% and 24% of the total O₂ consumption at 4 and 6 h after treatment (Figure 1B), the respective GdCl₃-sensitive carbon-induced respiration is either decreased compared to control values at 4 h or abolished at 6 h (Figure 3B). Iron overloaded rats exhibit liver injury as shown by the substantial increase in the carbon-induced sinusoidal release of lactate de-

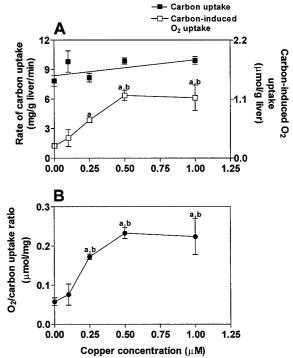


Fig. 5. Effect of gadolinium chloride (GdCl₃) and zinc sulfate (ZnSO₄) pretreatments on the rate of carbon uptake (A), carbon-induced O2 uptake (B), and carbon-induced LDH efflux (C) by rat livers perfused in the absence (controls) and presence of $0.5 \mu M \text{ Cu}^{2+}$. Studies were carried out in separate groups of rats, 24 h after pretreatment with GdCl₃ (10 mg kg iv), 17 h after pretreatment with ZnSO₄ (three doses of 10 mg kg ip equally spaced in a 24-h time interval), or equivalent volumes of 0.9% wt/vol NaCl (controls). Liver perfusion and Kupffer cell functioning were performed as described in Figures 1 and 2, respectively. Results represent means \pm SEM for four to six animals per group. The statistical significance of differences between mean values (P < 0.05) was assessed by one-way ANOVA and the Newman-Keuls' test, and is shown by the letters identifying each experimental group. In separate groups of control rats and ZnSO₄-treated animals, the content of hepatic GSH was determined by the catalytic assay of Tietze (1969) [controls, $5.59 \pm 1.38 \mu \text{mol g liver} (n = 3); \text{ZnSO}_4$ treatment, 7.02 ± 0.35 (n = 3); not significant] and that of metallothionein was assessed according to Eaton & Toal (1982) [controls, 1.2 ± 0.4 nmol g liver (n = 3), ZnSO₄ treatment, 108.2 ± 39.2 (n = 3); P < 0.025]. Modified from Sans et al. (1999).

hydrogenase (LDH) by perfused livers observed at 4 (15-fold), 6 (31-fold), and 24 (3.5-fold) h after treatment (Figure 3C). This effect of iron coincides with the Kupffer cell-dependent respiratory activity induced (Figure 1B) and is characterized by being markedly diminished by Kupffer cell depletion (Figure 3C). Thus, iron-induced hepatotoxicity occurs at early times after treatment and is largely dependent on the activity of Kupffer cells through promotion of free-radical reactions associated with the respiratory

burst. Furthermore, carbon-induced liver LDH release was diminished significantly at 24 h after iron overload compared with values found at 6 h (Figure 3C). This effect is observed concomitantly with a small (13%) but significant decrease in the basal rate of O2 consumption of the liver compared with control values (Figure 1A), without development of the iron-induced GdCl₃-sensitive respiratory component (Figure 1B) or liver macrophage respiratory activation by carbon infusion (Figure 3B). Collectively, these data indicate that iron overload at 24 h after administration leads to an impairment of Kupffer cell functioning, probably related to the excessive pro-oxidant activity induced at earlier times, that may lead to inactivation of NADPH oxidase (Jandl et al. 1978), damage to liver macrophages and other cell types (Kaplan et al. 1975), and derangement of respiratory processes in hepatocytes (Figure 1A). Iron-induced pro-oxidant activity has been proposed as a major factor in the impairment of the chemotactic, phagocytic, and bactericidal capacity of neutrophils from patients with iron overload who exhibit an increased risk of developing bacterial infections (Weinberg 1978; Van Asbeck et al. 1984), or in the detrimental effects of the transition metal that accumulates in sinusoidal lining cells and Kupffer cells in hepatitis virus infection (Bonkovsky et al. 1997).

Kupffer cell functioning and hepatotoxicity after copper overload *in vitro*

Colloidal carbon stimulation of Kupffer cells in the perfused rat liver in the presence of Cu²⁺ elicited a concentration-dependent sigmoidal enhancement in O₂ consumption, with a half-maximal concentration of 0.23 μ M (Figure 4A). A similar kinetic pattern is observed for the carbon-induced O2 uptake/carbon uptake ratios at different Cu²⁺ concentrations (Figure 4B), which, in addition to the lack of changes of Cu²⁺ on particle phagocytosis (Figure 4A), suggest that Cu²⁺ promotes O₂-dependent processes associated with the respiratory burst of activated Kupffer cells. Primarily, this phenomenon may involve reactive O₂ species generated by liver macrophage NADPH oxidase activity stimulated by carbon infusion, however, enhanced reactive nitrogen species formation cannot be discarded as Cu²⁺ is known to effectively activate NOS (Ohnishi et al.1997; Plane et al. 1997). The above contention is strongly supported by the abolishment of the Cu²⁺-induced respiratory activity of activated liver macrophages by either Kupffer cell elimination by GdCl₃ or metallothionein induction by ZnSO₄ pretreatment (Figure 5A). Enhancement of hepatic metallothionein levels (Figure 5) is known to occur both in parenchymal cells as well as in endothelial and Kupffer cells (McKim et al. 1992), and represents a maximal copper binding capacity of 1284 nmol Cu²⁺/g liver ([107 nmol metallothionein/g liver] \times [12 nmol Cu²⁺/nmol metallothionein]) (from Figure 5 and Sato & Bremmer 1993, respectively), that largely accounts for all the Cu²⁺ infused into the liver (50 nmol Cu²⁺/g liver, calculated considering a concentration of 0.5 μ M Cu²⁺ infused at 4 ml g liver min for 25 min). In addition, metallothionein is an effective free radical scavenger due to the high rate constants for reaction between its cysteinyl residues and oxyradicals (Sato & Bremmer 1993). In fact, metallothioneininduction by ZnSO₄ leads to a net 63% increase in the content of hepatic sulfhydryl groups over control values (control rats, 5618 ± 1393 nmol g liver (n = 3); ZnSO₄-pretreated rats, 9184 \pm 533 (n=3); P<0.05), calculated by the sum of the nmol of glutathione (GSH)/g liver and nmol of [(metallothionein/g liver) × 20] (from Figure 5) considering that one molecule of metallothionein contains 20 cysteinyl residues (Sato & Bremmer 1993). This effect may contribute to the normalization of the Cu²⁺-induced enhancement in the carbon-dependent respiratory burst of Kupffer cells (Figure 5A), in conditions that the rate of particlephagocytosis is not altered (Figure 5B). Cu²⁺-induced exacerbation of the respiratory activity of carbonstimulated Kupffer cells is paralleled by a 5.2-fold increase in the sinusoidal efflux of LDH compared to control values (Figure 5C). This effect of Cu²⁺ seems to be dependent on Kupffer cell functioning, due to its GdCl₃-sensitivity, and on the availability of the metal ion at the macrophage level, due to its abolishment by metallothionein induction (Figure 5C). Metallothionein induction by zinc is known to protect the liver against Cu²⁺-induced hepatotoxicity by storing Cu²⁺ in a nontoxic form (Lee et al. 1989; Schilsky et al. 1989), thus reducing the Cu²⁺-dependent promotion of free radical processes leading to lipid peroxidation (Filipe et al. 1995), as reported for α -tocopherol (Sokol et al. 1996). In line with the data presented, the pro-oxidant activity of neutrophils from patients in the active stage of Behcet's disease has been ascribed to an enhanced activity of the $O_2^{\bullet-}$ generator NADPH oxidase that may be exacerbated by the elevated levels of plasma copper found (Dogan et al. 1994), leading to a depression of the antioxidant defenses of plasma with

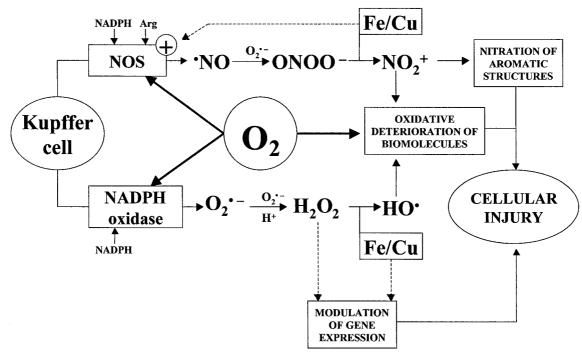


Fig. 6. Involvement of iron/copper in the respiratory burst activity of Kupffer cells and its functional and cytotoxic consequences. Abbreviations: Arg – L-arginine; NOS – nitric oxide synthase; ${}^{\bullet}NO$ – nitric oxide; $O_2^{\bullet-}$ – superoxide radical; ONOO $^-$ – peroxynitrite ion; H_2O_2 – hydrogen peroxide; NO_2^+ – nitronium ion; HO^{\bullet} – hydroxyl radical.

the consequent increase in lipid peroxidation indexes (Kose *et al.* 1995).

Concluding remarks

Iron and copper alter the functional status of Kupffer cells by inducing secondary reactions related to the respiratory burst of activated liver macrophages (Figure 6), without a significant modification of particle phagocytosis. The effect of iron overload occurs at earlier times after administration, is sensitive to macrophage inactivation by GdCl₃, and seems to produce the impairment in the respiratory response of Kupffer cells to particle stimulation and in the basal hepatic respiration at later times after treatment. Low levels of copper also increase the Kupffer celldependent O₂ uptake, an effect that is abolished by macrophage elimination and metallothionein induction. Transition metal-induced Kupffer cell-dependent respiratory activity plays a role in the development of liver injury, assessed by the increased sinusoidal release of LDH, probably by catalyzing the generation of the secondary reactive species HO[•] and NO₂⁺ (Figure 6). These species are able to provoke oxidative modifications in biomolecules, thus consuming extra O₂ equivalents that contribute to the enhanced respiratory burst activity observed, and/or the nitration of aromatic structures, with the consequent alteration or loss of their biological functions. Kupffer cell-dependent respiration may also involve additional O2 equivalents used in the reaction catalyzed by NOS (Figure 6), as NOS seems to be directly activated by iron (Cornejo et al. 2001) or copper (Ohnishi et al. 1997; Plane et al. 1997). Furthermore, modulation of gene expression in Kupffer cells either by iron or iron-induced oxidative stress may be involved in the hepatotoxic effects of the transition metal (Figure 6). Oxidative stress is considered as a major mechanism leading to the activation of transcription factors such as NF- κ B (Schreck et al. 1991), that signal an increased synthesis and release of cytotoxic, proinflammatory, or fibrogenic mediators (Decker 1990; Tsukamoto & Lin 1997). The pivotal role of iron in NF-κB activation and expression of proinflammatory genes in Kupffer cells was demonstrated by iron chelation both in cholestatic (Lin et al. 1997) and alcoholic (Tsukamoto et al. 1999) liver injury. Similar observations were reported in human immunodeficiency virus-1 infection (Sappey et al. 1995), lung inflammation by particulate

air pollution (Jimenez et al. 2000), and in asbestosinduced fibrosis (Dai & Churg 2001). Although iron increases TNF-α release from human mononuclear cells (Muñoz et al. 1999), and iron deficiency reduces production of TNF- α in the same model (Muñoz *et al.* 1999) or that of interleukin 1 in rat leukocytes (Helyar & Sherman 1987), the mechanisms involved in these effects of iron status remain to be elucidated. Contrary to these effects of iron, copper suppresses TNF expression in murine macrophages by blocking NF-κB activation, which in turn is produced by inhibition of $I\kappa B$ kinase, acting as a thiol-reactive metal ion (Jeon et al. 2000). Down-regulation of NF-κB by copper has been confirmed in different experimental models (Iseki et al. 2000; Zhai et al. 2000). Thus, iron/copperinduced hepatotoxicity is a multifactorial phenomenon underlying actions exerted through secondary reactive oxygen and nitrogen species. These mediators achieve cytotoxicity by either a direct alteration of essential biomolecules and/or an indirect modulation of liver macrophage gene expression (Figure 6).

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