

## THE PROTEIN KINASE C INHIBITOR, K252a, INHIBITS SUPEROXIDE PRODUCTION IN HUMAN NEUTROPHILS ACTIVATED BY BOTH PIP<sub>2</sub>-DEPENDENT AND -INDEPENDENT MECHANISMS

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**Abstract**—We report that the putative protein kinase C inhibitor, K252a, at concentrations of 0.2 and 1  $\mu$ M, inhibited the respiratory burst induced by fluoride and formyl-methionyl-leucyl-phenyl-alanine respectively, both in human neutrophils primed with a subthreshold dose of phorbol myristate acetate and in non-primed neutrophils. In addition, K252a effectively inhibited ConA-zymosan-mediated superoxide generation in Ca<sup>2+</sup>-depleted neutrophils, with virtually maximal inhibition seen at 1  $\mu$ M. These results suggest that protein kinase C is involved in the putative phosphatidylinositol bisphosphate-independent signal transduction mechanism of the respiratory burst as well as the pathway dependent on phosphatidylinositol bisphosphate hydrolysis.

Superoxide (O<sub>2</sub><sup>-</sup>)<sup>†</sup> generation by human neutrophils occurs in response to a wide range of stimuli and it is believed to be an important factor in tissue damage [1]. The transduction pathways linking signal to NADPH oxidase activation have yet to be fully elucidated, but in many cells the link is believed to involve phosphatidylinositol bisphosphate (PIP<sub>2</sub>) hydrolysis, with the liberation of inositol triphosphate (IP<sub>3</sub>) which increases [Ca<sup>2+</sup>]<sub>i</sub>, and diacylglycerol (DAG) which activates protein kinase C (PKC). IP<sub>3</sub> and DAG are reported to act synergistically in several cell types [2, 3], and such synergism has also been reported for the neutrophil [4–6].

Recently two novel activation mechanisms for the neutrophil respiratory burst have been described, both being reported as PIP<sub>2</sub>-independent, and one being proposed as PKC-independent as well [7–10].

To assess the role of PKC in these situations we have employed the use of a potent, PKC inhibitor, K252a (Fig. 1).

This compound has been reported to inhibit rat brain PKC with *K<sub>i</sub>* values of 0.025  $\mu$ M [11] and 0.47  $\mu$ M [12], and human neutrophil PKC with *K<sub>i</sub>* values of 0.27  $\mu$ M [13] and 0.58  $\mu$ M [14]. Although K252a has been described as a potent PKC inhibitor, it is not selective for PKC; it also inhibits other protein kinases such as cyclic AMP-dependent protein kinase (PKA) with *K<sub>i</sub>* values of 0.018  $\mu$ M [11], 0.20  $\mu$ M [12] and 0.16  $\mu$ M [13]. K252a has a *K<sub>i</sub>* value

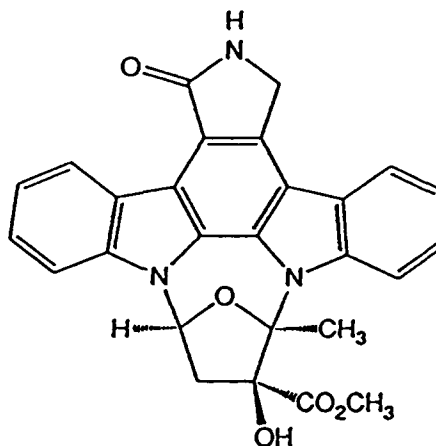


Fig. 1. The structure of K252a.

of 0.02  $\mu$ M for cyclic GMP-dependent protein kinase [11] and of 0.30  $\mu$ M [12] for Ca<sup>2+</sup>/calmodulin-dependent kinase. In this study we report that K252a inhibits both PIP<sub>2</sub>-dependent and PIP<sub>2</sub>-independent routes of respiratory burst activation. These results are consistent with active participation of PKC in both cases.

### MATERIALS AND METHODS

#### Preparation of neutrophils

Human blood was collected by venipuncture and neutrophils prepared by Ficoll–Isopaque separation as described [6]. Cell purity was greater than 97% and viability greater than 99% (Trypan Blue exclusion).

#### Quin 2 assay

Cytosolic Ca<sup>2+</sup> levels were measured by use of the

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<sup>†</sup> Abbreviations: O<sub>2</sub><sup>-</sup>, superoxide; PIP<sub>2</sub>, phosphatidylinositol bisphosphate; IP<sub>3</sub>, inositol triphosphate; [Ca<sup>2+</sup>]<sub>i</sub>, intracellular calcium concentration; DAG, diacylglycerol; PKC, protein kinase C; PMA, phorbol 12-myristate 13-acetate; fMLP, formyl-methionyl-leucyl-phenyl-alanine; HBSS, Hank's balanced salt solution; Hepes, 4-(2-hydroxyethyl)-1-piperazine ethanesulfonic acid; PBS, phosphate buffered saline; PA, phosphatidic acid; PC, phosphatidylcholine; PLC, phospholipase C; PLD, phospholipase D; PLA<sub>2</sub>, phospholipase A<sub>2</sub>.

fluorescent indicator Quin 2 [10, 15]. To deplete the cells of  $\text{Ca}^{2+}$ , neutrophils were suspended in  $\text{Ca}^{2+}$ -free Hank's balanced salt solution (HBSS), pH 7.4, containing 1 mM ethyleneglycolbis(aminoethyl-ether)tetra-acetate (EGTA) (the Sigma Chemical Co., St Louis, MO) and 40  $\mu\text{M}$  Quin 2/AM (Calbiochem, La Jolla, CA), at a concentration of  $5 \times 10^7$  cells/mL, and incubated at  $37^\circ$  for 60 min. Normal  $\text{Ca}^{2+}$  levels were measured after incubating in HBSS containing 0.5 mM  $\text{Ca}^{2+}$ , 1 mM  $\text{Mg}^{2+}$  and 10  $\mu\text{M}$  Quin 2/AM, at  $2.5 \times 10^7$  cells/mL for 15 min, diluted to  $5 \times 10^6$  cells/mL for the remaining 45 min. To check for autofluorescence,  $5 \times 10^6$  cells/mL were incubated in HBSS with 0.5 mM  $\text{Ca}^{2+}$  and 1 mM  $\text{Mg}^{2+}$  alone.

After 60 min at  $37^\circ$ , cells were washed twice in their respective media and suspended in a standard Tyrode solution consisting of: 137 mM NaCl, 2.7 mM KCl, 1 mM  $\text{MgCl}_2$ , 1 mg/mL glucose and buffered with 20 mM Hepes at pH 7.4. To this was added either 1 mM EDTA or 3 mM  $\text{Ca}^{2+}$  and 1 mM  $\text{Mg}^{2+}$ . To obtain minimum and maximum fluorescence readings, 0.1% Triton X-100 was added to the above solutions.

Fluorescence was measured in a Perkin-Elmer 3000 spectrofluorimeter at excitation and emission wavelengths of 339 and 492 nm respectively, using a stirring cuvette for all readings. The values obtained from those cells not loaded with Quin 2 were subtracted from all other readings, and  $[\text{Ca}^{2+}]_i$  calculated using the equation:  $K_d(F - F_{\min})/(F_{\max} - F)$ , where  $K_d$ , the dissociation constant of  $\text{Ca}^{2+}$  binding to Quin 2, is 115 nM.

#### Superoxide assay

**ConA-zymosan activation.** ConA-zymosan was prepared by boiling zymosan (the Sigma Chemical Co., St Louis, MO) in saline for 30 min, washing twice, then incubating for 30 min at  $37^\circ$ , at a final concentration of 10 mg/mL, with 0.5 mg/mL con A (the Sigma Chemical Co.), in HBSS containing  $\text{Ca}^{2+}$ . Finally, the ConA-zymosan was washed and resuspended in  $\text{Ca}^{2+}$ -free HBSS to the appropriate concentrations.

Neutrophils loaded with Quin 2, in the presence or absence of  $\text{Ca}^{2+}$ , were washed twice then resuspended in Tyrode solution containing 1 mg/mL bovine serum albumin (Miles Laboratories). One mM EGTA was added to  $\text{Ca}^{2+}$ -depleted cells.  $2 \times 10^6$  cells were then aliquoted into assay tubes containing 1 mg ferricytochrome *c* (horse heart type III, the Sigma Chemical Co.), K252a or Tyrodes, ConA-zymosan or Tyrodes and either 75 units superoxide dismutase (bovine blood, the Sigma Chemical Co.) or Tyrodes solution. All reagents were prepared in the respective Tyrode solutions, with or without EGTA.  $\text{Ca}^{2+}$  was added back to relevant tubes at a final concentration of 3 mM.

The reaction was terminated after 30 min at  $37^\circ$  by the addition of 1 mM *N*-ethylmaleimide (the Sigma Chemical Co.). Following centrifugation at 1400 g for 10 min, at  $4^\circ$ , absorbance of the supernatant was read at 550 nm in a Beckman DU-50 spectrophotometer. The amount of  $\text{O}_2^-$  produced was calculated by dividing the difference in absorbance of the samples, with and without superoxide dismutase,

by the extinction coefficient for the change between ferricytochrome *c* and ferrocyanochrome *c* ( $E_{550} = 15.5 \text{ mM}^{-1} \text{ cm}^{-1}$ ) and the resulting value converted to nmol  $\text{O}_2^-$  per  $5 \times 10^6$  cells. Results are expressed as a percentage of the maximum control response (i.e. in the absence of inhibitor).

**PMA-fMLP, PMA-fluoride activation.** For phorbol myristate acetate (PMA) and formyl-methionyl-leucyl-phenyl-alanine (fMLP), Tyrodes solution containing 1 mg/mL bovine serum albumin was employed. A modified Dulbecco's phosphate buffered saline (PBS) was used for all fluoride experiments, containing 136.9 mM NaCl, 2.7 mM KCl, 0.5 mM  $\text{MgCl}_2$ , 0.31 mM  $\text{CaCl}_2$ , 8.1 mM  $\text{Na}_2\text{HPO}_4$  and 1.5 mM  $\text{KH}_2\text{PO}_4$ , in which the concentration of NaCl was reduced so that the final salt concentration was physiological after the addition of NaF.

Neutrophils were prepared as described and equilibrated at  $37^\circ$  for 20 min. Cytochalasin B (5  $\mu\text{g}$ /mL) (the Sigma Chemical Co.) was added to those cells which were to be stimulated with fMLP and  $2 \times 10^6$  cells then immediately dispensed into tubes containing ferricytochrome *c* and superoxide dismutase, as described, and K252a or Tyrodes. Incubation was continued for a further 5 min before adding stimulus to start the reaction. Where sequential PMA-fMLP or PMA-fluoride activation occurred, cells were pretreated with PMA (0.5 ng/mL) (the Sigma Chemical Co.) for 3 min before challenging with K252a for a further 3 min, prior to adding either fMLP (the Sigma Chemical Co.) or fluoride (BDH, Poole, U.K.). The reaction then proceeded as detailed for ConA-zymosan activation.

K252a was a generous gift from Dr Yamada of the Tokyo Research Laboratories, Kyowa Hakko Kogyo Co. Ltd, Machida-shi, Tokyo 194, Japan.

## RESULTS

### PMA-primed neutrophils

In three experiments, neutrophils primed with non-stimulatory doses of PMA (0.5 ng/mL) released greater amounts of  $\text{O}_2^-$  on subsequent activation with fMLP than with fMLP alone (Fig. 2A), the concentration-response curve for fMLP being displaced to the left and the maximum response increased. This also occurs with the fluoride-mediated concentration-response curve (Fig. 2B). K252a, at 1 and 0.2  $\mu\text{M}$ , caused complete inhibition of the respiratory burst to fMLP and fluoride respectively, whether given alone or after PMA-priming (Fig. 2A and B).

### $\text{Ca}^{2+}$ -depleted neutrophils

In three experiments the mean resting  $[\text{Ca}^{2+}]_i$  in normal control neutrophils, recorded by Quin 2 fluorescence, was  $125.09 \pm 3.97$  nM, whereas in cells subjected to the  $\text{Ca}^{2+}$  depletion regime, the mean resting  $[\text{Ca}^{2+}]_i$  was  $20.86 \pm 4.04$  nM.

K252a (1  $\mu\text{M}$ ) inhibited the response to ConA-zymosan in both normal and  $\text{Ca}^{2+}$ -depleted neutrophils as depicted in Fig. 3A, shifting the concentration-response curve to the right and markedly depressing the maximum response. Superoxide production was reduced in  $\text{Ca}^{2+}$ -depleted neutrophils and this was further reduced by the addition of K252a.

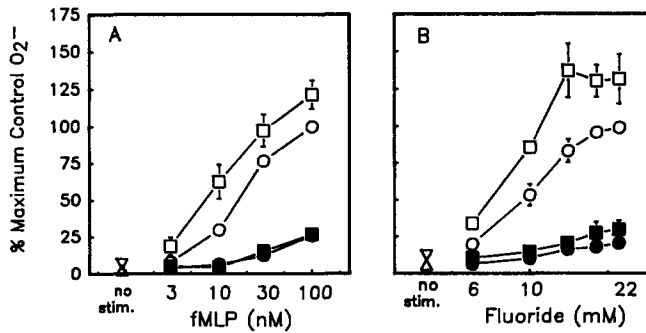


Fig. 2. The effect of K252a on the  $O_2^-$  dose-response curves of fMLP and fluoride: (A) fMLP control ( $\circ$ ) and in the presence of K252a,  $1 \mu M$  ( $\bullet$ ). fMLP in cells primed with a non-stimulatory dose of PMA ( $0.5 \text{ ng/mL}$ ), alone ( $\square$ ) and in the presence of K252a,  $1 \mu M$  ( $\blacksquare$ ) ( $N = 3$ ). (B) Fluoride, control ( $\circ$ ) and in the presence of K252a,  $0.2 \mu M$  ( $\bullet$ ). Fluoride in cells primed with PMA ( $0.5 \text{ ng/mL}$ ), alone ( $\square$ ) and with K252a,  $0.2 \mu M$  ( $\blacksquare$ ) ( $N = 3$ ). In both (A) and (B) ( $\Delta$ ) represents cells alone and ( $\nabla$ ) in the presence of  $0.5 \text{ ng/mL}$  PMA. The mean maximum  $O_2^-$  release, expressed as  $\text{nmol } O_2^- / 5 \times 10^6$  neutrophils, was  $141.10 \pm 15.75$  for fMLP and  $97.02 \pm 11.76$  for fluoride.

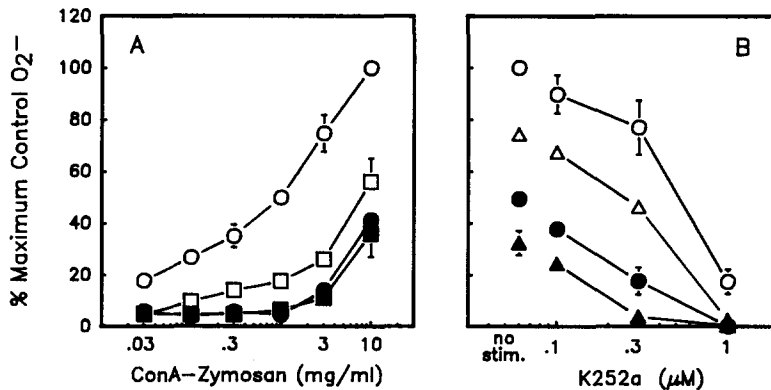


Fig. 3. (A) The effect of K252a and  $Ca^{2+}$ -depletion on the  $O_2^-$  dose-response curve of ConA-zymosan: For normal cells, ConA-zymosan in the presence ( $\bullet$ ) and absence ( $\circ$ ) of K252a,  $1 \mu M$ . For  $Ca^{2+}$ -depleted cells, ConA-zymosan in the presence ( $\blacksquare$ ) and absence ( $\square$ ) of K252a,  $1 \mu M$  ( $N = 3$ ). The mean maximum  $O_2^-$  release, expressed as  $\text{nmol } O_2^- / 5 \times 10^6$  neutrophils, was  $68.74 \pm 8.49$  for normal cells. (B) The effect of a range of K252a concentrations on  $O_2^-$  generated by ConA-zymosan in the presence and absence of  $Ca^{2+}$ : For normal cells, ConA-zymosan  $10 \text{ mg/mL}$  ( $\circ$ ) and  $3 \text{ mg/mL}$  ( $\bullet$ ). For  $Ca^{2+}$ -depleted cells, ConA-zymosan  $10 \text{ mg/mL}$  ( $\Delta$ ) and  $3 \text{ mg/mL}$  ( $\blacktriangle$ ) ( $N = 3$ ). The mean  $100\%$  control  $O_2^-$  release, expressed as  $\text{nmol } O_2^- / 5 \times 10^6$  neutrophils, was  $114.52 \pm 7.54$  for normal cells with  $10 \text{ mg/mL}$  ConA-zymosan. In normal cells the mean resting  $Ca^{2+}$  concentration was  $125.09 \pm 3.97 \text{ nM}$ ; in  $Ca^{2+}$ -depleted cells the mean resting  $Ca^{2+}$  concentration was  $20.86 \pm 4.04 \text{ nM}$ .

Using concentrations of ConA-zymosan which gave measureable release of  $O_2^-$  in both the presence and absence of  $Ca^{2+}$ , namely  $3$  and  $10 \text{ mg/mL}$ , a dose-inhibition curve with K252a was constructed (Fig. 3B). This shows the inhibitory effect of K252a to be dose-related and to be virtually maximal at  $1 \mu M$  in each case.

#### DISCUSSION

Two distinct, novel activation mechanisms for the neutrophil oxidative burst have been described, both reported as being independent of PIP<sub>2</sub> turnover, and one reported as not requiring PKC.

Firstly, with fMLP as the stimulus, prior exposure to subthreshold PMA was reported to initiate a transduction pathway in which there was decreased or absent PIP<sub>2</sub> turnover and little or no increase in  $[Ca^{2+}]_i$ —in contrast to the non-primed system—although the subsequent response to the agonists was considerably greater than in the control cells not primed with PMA [7]. In addition, it has been shown that the respiratory burst stimulated by either fluoride or fMLP, is prevented by prior  $Ca^{2+}$ -depletion of the neutrophils, but can be restored by priming the  $Ca^{2+}$ -depleted cells with subthreshold doses of PMA [8, 9], although the restored burst is not accompanied by PIP<sub>2</sub> turnover, or PKC translocation.

In these experiments, some degree of PKC activation was clearly necessary because of the requirement for PMA. The question therefore arises as to what transduction mechanism was involved in the subsequent fMLP- or fluoride-induced superoxide release. It has been shown that priming with PMA before fMLP stimulation results in more DAG production than occurs with fMLP alone, that this new DAG comes from a non-PIP<sub>2</sub> source and that the sequence of events is blocked by sphinganine [16]. Furthermore, there have been a number of studies proposing that phosphatidylcholine (PC) could act as a non-PIP<sub>2</sub> source of DAG [17–19]. In the present study the IP<sub>3</sub>/Ca<sup>2+</sup>-independent activation sequence, involving non-stimulatory PMA followed by fMLP or fluoride, is fully inhibited by K252a, at the same concentration that inhibits the PIP<sub>2</sub>/Ca<sup>2+</sup>-dependent pathway. (It should be noted that because of the timing of the addition of K252a it is the second activation of PKC which is inhibited.) It is somewhat surprising that K252a caused almost complete inhibition of the fluoride-induced superoxide response in both primed and unprimed cells at a concentration of 0.2 µM which is less than the *K<sub>i</sub>* values of 0.27 and 0.58 µM recorded against the isolated enzyme. K252a is a competitive inhibitor at the ATP substrate binding site and intracellular ATP concentrations are much higher (of the order 1 mM) compared to those in *in vitro* enzyme assays. One explanation for this phenomenon is that fluoride can cause a decrease in the intracellular concentrations of ATP [20] such that the inhibitor concentration required to block PKC activity would be much reduced. Alternatively, fluoride may recruit a particular PKC isoenzyme that is more sensitive to inhibition by K252a (discussed in Ref. 13). These results, like those quoted above [16], are consistent with PKC being involved in this PIP<sub>2</sub>-independent signal transduction mechanism.

However, since the priming dose of PMA does not, in itself, cause O<sub>2</sub><sup>-</sup> generation, there is still the question as to how subsequent receptor stimulation (as with fMLP) or G-protein stimulation (as with fluoride) triggers a DAG/PKC pathway. There is evidence that a pathway exists involving the fMLP receptor and a phospholipase D which acts on PC giving rise to DAG [21]. A PC source of DAG produced by phospholipase D (PLD) action could also be involved [22–24] and there is evidence that this pathway is implicated in the transduction of the neutrophil oxidative burst [25, 26]. However, the possibility that arachidonate may play a part cannot be ruled out. Arachidonate is known to be a PKC activator [27] and phospholipase A<sub>2</sub> (PLA<sub>2</sub>), which gives rise to arachidonate, can be activated by receptor stimulation [28, 29]. We have recently reported data which, on one interpretation, could mean that the respiratory burst induced by IgG and opsonised zymosan is mediated in part by arachidonate [30]. Is this the PIP<sub>2</sub>-independent pathway in PMA-primed cells?

A second novel activation mechanism recently described [10] involved a ConA-zymosan-induced respiratory burst in Ca<sup>2+</sup>-depleted neutrophils, without any accompanying turnover of phosphoinositides, or increase in [Ca<sup>2+</sup>]<sub>i</sub> or arachidonate

release; there was no pretreatment with PMA and the burst (like the burst in control cells) was not inhibited by H-7. The conclusion was that the activation was not only PIP<sub>2</sub>-independent, but that PKC was not involved. The data reported showed quite clearly that the response was, in fact, PIP<sub>2</sub>-independent. However, the results do not necessarily indicate that PKC was not involved. In the first place the results with H-7 are not conclusive. H-7 has been described as a non-specific PKC inhibitor [31]. Not only have results reported with H-7 on the normal neutrophil oxidative burst been contradictory [32–34], but quite different results have been obtained with other PKC inhibitors such as sphinganine [16] and K252a [13, 35]. More importantly, H-7 in a recent study failed to inhibit cellular events induced by phorbol esters, agents which specifically stimulate PKC [36]. In fact, it might be said that H-7 is unsuitable as a tool to probe for PKC involvement in signalling processes.

In the present study K252a, which is reported to be a more selective PKC inhibitor [13, 14], produced a dose-related reduction of the ConA-zymosan-mediated burst in both normal and Ca<sup>2+</sup> depleted neutrophils, eliminating it entirely at 1 µM. To the extent that K252a is specific for PKC, this implies that PKC activation is involved in the burst. The question then arises as to what the endogenous PKC activator could be in this particular system. DAG produced by PLD action is clearly not involved, since it was shown that there was no increase in PA in this activation sequence [10]. It was also reported in this latter study that the ConA-zymosan-induced burst was insensitive to a pertussis toxin. It is possible that DAG could be generated from phosphatidylinositol by a non-G-protein-sensitive PLC, and that this DAG is metabolised not by the DAG kinase pathway which leads to PA and the recycling of the phosphoinositides, but by DAG lipase.

The possibility that arachidonate is the PKC activator, suggested above, is not really ruled out by the data reported [10]. The role of endogenous arachidonate in stimulus-activation coupling mechanisms is difficult to investigate rigorously. Techniques involving the use of radioactive arachidonate have several serious drawbacks [discussed in 37]. One is that several distinct pools of arachidonate exist, and the arachidonate which may function as an intracellular messenger could be in a pool which is not released to the exterior. Another is that there may be rapid reacylation of the key phospholipids which are transiently deacylated during activation of the cell. Thus, the lack of exterior release of radiolabelled arachidonate from Ca<sup>2+</sup>-depleted ConA-zymosan-stimulated neutrophils does not necessarily indicate that arachidonate is not involved in transduction events. PLA<sub>2</sub>, a Ca<sup>2+</sup>-dependent enzyme, could still function in cells which are notionally "Ca<sup>2+</sup>-depleted" since some Ca<sup>2+</sup> is clearly still present, and it is possible that Ca<sup>2+</sup>, like arachidonate, exists in distinct pools which are not necessarily all depleted by the Ca<sup>2+</sup>-depleting techniques employed. Arachidonate could also be generated by the DAG lipase pathway.

To the extent that K252a is a specific PKC

inhibitor, our results with K252a in the present study indicate that, which ever pathway is involved in PIP<sub>2</sub>/Ca<sup>2+</sup>-independent transduction, PKC appears to be necessary for O<sub>2</sub><sup>-</sup> generation with fMLP, fluoride or ConA-zymosan, since in the presence of this inhibitor the burst is totally eradicated. It could be argued that the effects of K252a obtained in this study could be due to inhibition of two different protein kinases, namely PKC in the PMA-primed system and another protein kinase in the non-primed system; however, this would appear to be unlikely since the same concentration of K252a almost totally inhibits both systems. The fact that not only K252a but also staurosporine [13] and three other, recently described PKC inhibitors [38] are all effective inhibitors in the non-primed system would tend to indicate that PKC could well be involved in this as well as in the PMA-primed system.

In conclusion, our results are consistent with the proposal that, both in the physiological situation where there is PIP<sub>2</sub> turnover with increased [Ca<sup>2+</sup>] and [DAG], and in the PIP<sub>2</sub>-independent pathway (whatever the activation mechanism), PKC has a role in the generation of a respiratory burst. This is in agreement with a previous study where both K252a and staurosporine have been shown to cause an inhibition of the respiratory burst induced by six different stimuli [13].

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