SUPEROXIDE, HYDROXYL AND FATTY ACID RADICAL SCAVENGING BY AMINOSALICYLATES

DIRECT EVALUATION WITH ELECTRON SPIN RESONANCE SPECTROSCOPY

H. ALLGAYER,* P. HÖFER,† M. SCHMIDT, P. BÖHNE, W. KRUIS‡ and R. GUGLER Medical Clinic I and Hospital Pharmacy, Klinikum Karlsruhe, W-7500 Karlsruhe,
† Bruker Meßtechnik GmbH, W-7512 Rheinstetten and ‡Medical Clinic I, Gastroenterology, University of Cologne, W-5000 Köln, Federal Republic of Germany

(Received 18 January 1991; accepted 13 September 1991)

Abstract—Reactive oxygen radicals such as superoxide and hydroxyl radicals, as well as intermediate unsaturated fatty acid radicals, have been proposed as playing an important role in various diseases including inflammatory bowel disease (IBD). In this study we evaluated radical scavenger properties of aminosalicylates used in the therapy of IBD using spin trapped electron spin resonance spectroscopy. 5-Aminosalicylic acid (5-ASA), 4-aminosalicylic acid and olsalazine had superoxide radical scavenger properties ($IC_{50} = 0.4, 0.4$ and 1.0 mM, respectively). 5-ASA and benzalazine also inhibited hydroxyl radicals ($IC_{50} = 6.5 \text{ mM}$). Fatty acid radicals were not inhibited by aminosalicylates. Our results support the hypothesis that therapeutically active compounds may be oxygen radical scavengers and that fatty acid radical scavenging has to be performed by drugs other than aminosalicylates.

Reactive oxygen radicals such as superoxide (O₂) and hydroxyl (OH') radicals have been proposed as playing an important role in the cell damage involved in various diseases including ischemia-reperfusion injuries, rheumatoid arthritis and inflammatory bowel disease (IBD§) [1-7]. Intermediate radicals from unsaturated fatty acids formed by autooxidation or through the lipoxygenase reaction have also been suggested as being involved in cell damage [8, 9]. Radical scavenging, therefore, has been considered a putative mechanism of therapeutic action [10-13]. From studies using indirect radical detection methods such as cytochrome c reduction, decarboxylation of benzoate or chemoluminescence it has been hypothesized that compounds active in the treatment of IBD such as 5-ASA may be radical scavengers [1, 5, 10-13]. To study this hypothesis in more detail we compared the radical scavenger properties (superoxide, hydroxyl and linoleate radicals) of therapeutically active compounds such as 5-ASA [14], 4-ASA, SAZ, ADS and benzalazine using systems with defined radical production, and direct evaluation with ESR. ADS has been introduced recently into the treatment of IBD [15]. 4-ASA and benzalazine were found to be effective in preliminary clinical trials [16, 17].

MATERIALS AND METHODS

SAZ, SP, 5-ASA and ADS were gifts from the Deutsche Pharmacia GmbH (Ratingen, F.R.G.): 4-ASA and N-Ac-ASA acid were supplied by courtesy of Dr U. Klotz (Stuttgart, F.R.G.). NGDA, DBNBS, DMPO, sodium linoleate and sovbean lipoxygenase were of analytical grade and purchased from the Sigma Chemical Co. (St Louis, MO, U.S.A.). Superoxide, hydroxyl and linoleate radicals, the latter representing unsaturated intermediate fatty acid radicals, [8], were generated as described below. As these radicals are extremely short-lived, stabilization with specific spin traps such as DBNBS or DMPO is necessary to detect measurable signals in the magnetic field of ESR spectroscopy [18, 19]. Superoxide radicals were produced according to Hyland and Auclair [20] using 0.5 M NaOH in DMSO (1%, v/v) with DBNBS (1.9 mM) as the spin trap. Superoxide production was further quantitated with the SOD-dependent cytochrome c reduction (molar extinction coefficient 21.4 mM⁻¹cm⁻¹) [20] and correlated with the ESR peak heights (Table 1). The detection limit using spin trap ESR under these conditions was 0.02 absorption units at 550 mm $(0.09 \,\mu\text{M} \,\,\text{O}_2)$. Hydroxyl radicals were produced by a modified Fenton reaction according to Ahnfelt-Ronne et al. [12] with FeSO₄ (5 μ M), H_2O_2 (44 μ M) and EDTA $(22 \mu M)$ in a sodium phosphate buffer (0.1 M, pH 7.2) with DMPO (0.09 M) as the spin trap. Linoleate radicals were produced by the soybean lipoxygenase reaction [21]: sodium linoleate 1.1 mM and lipoxygenase 3.3×10^6 U/mL in 0.1 M borate buffer (pH 9.0) with DBNBS (2.5 mM) as the spin trap. All inhibitors were added prior to the corresponding compounds in concentrations as indicated. The drugs were prepared in aqueous solutions adjusted to the corresponding pH; 5-ASA

^{*} Corresponding author: Dr H. Allgayer, Medical Clinic I, Klinikum Karlsruhe, Moltkestraße 14, W-7500 Karlsruhe, F.R.G. Tel. (49) 721-797-328; FAX (49) 721-757519.

[§] Abbreviations: ADS, azodisalicylate (olsalazine); 5-ASA, 5-aminosalicylic acid; N-Ac-ASA, N-acetyl-aminosalicylic acid; SAZ, sulfasalazine; SP, sulfapyridine; NGDA, nordihydroguaretic acid; ESR, electron spin resonance; DMPO, 5-5'dimethyl-pyrroline N-oxide; DBNBS, 3,5'dibromo 4-nitrosobenzene sulfonic acid; IBD, inflammatory bowel disease; SOD, superoxide dismutase; DMSO, dimethyl sulfoxide.

Table 1. Superoxide radical quantitation: correlation of ESR peak heights and cytochrome c reduction (E₅₅₀)

Conditions (mL DMSO/OH)	ESR peak height (×10 ⁴) (arbitrary units)	E ₅₅₀
0.8	3.78 ± 0.15	0.14 ± 0.012
0.6	1.41 ± 0.21	0.04 ± 0.005
0.4	0.36 ± 0.03	0.02 ± 0.005
0.2	ND	< 0.01

Values are means \pm SEM; N = 5; the total assay volume was 1 mL.

The SOD-inhibitable (200 μ g/mL) cytochrome c reduction was $60 \pm 5\%$; O_2 radical concentrations with 0.8 mL DMSO/OH were 0.39 μ M; ND, no ESR signal detectable.

(20 mM) was dissolved in 0.1 M NaCl pH 9.0 prior to use. Potential splitting of the azodrugs to their 5-ASA components and preservation of the azobonds were monitored by UV spectroscopy and HPLC [22]. ESR measurements were performed in a glass capillary at room temperature with Bruker ESP 300 equipment using a microwave power of 10 dB, a modulation frequency of 100 kHz and modulation amplitude of 1 G. All measurements were performed 1 hr after the addition of the spin traps, as signal intensities were maximal at this time with a slow decrease thereafter. For quantitation, peak heights were expressed in arbitrary units. In the inhibition experiments, drug effects were measured as the relative percentages of peak heights compared to incubations with no drugs. All experiments were repeated four to six times (N = 4-6) and expressed as means \pm SEM. The coefficient of variation of the ESR peak heights was 13.5% for the DBNBS/O₂ and 12.0% for the DMPO/OH spin adduct. The coefficient of variation of the SOD-dependent cytochrome c reduction was 10.5% (N = 16).

RESULTS AND DISCUSSION

5-ASA concentration-dependently suppressed superoxide-DBNBS-induced ESR signals (Fig. 1). The ESR spectrum of the stable radical product formed by the DBNBS spin trap features a prominent G = 2.0066 triplet originating from a nitrogen hyperfine coupling of $a_N = 12.63$ G and an unresolved proton coupling with $a_H = 0.71 G [18]$. Quantitation of superoxide production under these conditions yielded 390.0 nmol O_2/mL using cytochrome c reduction as a second method (Table 1). As seen from this figure, 50% reduction of the peak heights occurred at 0.4 mM; above 2 mM there was almost complete suppression of the ESR signals. Similar patterns of signal suppression and comparable IC₅₀ were observed with 4-ASA and ADS but not with SP, SAZ, benzalazine or N-Ac-ASA (Table 2). Hydroxyl-DMPO-induced ESR signals, consisting of a dominant quartet signal with an intensity distribution of 1:2:2:1 due to equivalent nitrogen

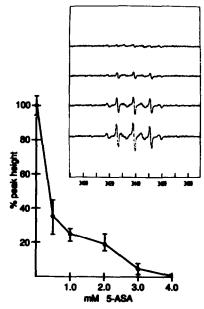


Fig. 1. Inhibition of O₂-DBNBS-induced ESR signals (relative peak heights) by 5-ASA. Inset: ESR spectrum from a representative incubation. The lines represent (from bottom to top) spectra with no inhibitor (bottom) and with 5-ASA, 0.5, 1.0 and 2 mM.

Table 2. Comparison of inhibition of superoxide radical production by aminosalicylates and SP in the DMSO/OH system

	IC ₅₀ (mM)
5-ASA	0.4 ± 0.03
4-ASA	0.4 ± 0.03
SAZ	_
ADS	1.0 ± 0.02
Benzalazine	_
SP	
N-Ac-ASA	

Spin trap: 1 mM DBNBS; values are means \pm SEM; N = 6; —, no inhibition (maximum drug concentrations 10 mM), concentrations \geq 10 mM: interference with the ESR signals.

and proton hyperfine coupling constants of $a_N = a_H = 15 \,\mathrm{G}$ [19], were suppressed concentration-dependently by 5-ASA (Fig. 2) ($IC_{50} = 6.5 \,\mathrm{mM}$) and benzalazine (not shown) ($IC_{50} = 6.5 \,\mathrm{mM}$), but not by any of the other compounds. Linoleate radical-DBNBS-induced ESR signals ($a_N = 14.6 \,\mathrm{G}$, $a_H = 12.3 \,\mathrm{G}$) were inhibited by NGDA, a known lipoxygenase inhibitor, but not by 5-ASA (Fig. 3) or the other derivatives (not shown). During incubation of ADS and benzalazine with their corresponding radicals, small amounts (0.8%) of 5-ASA were detected by HPLC. There was also a

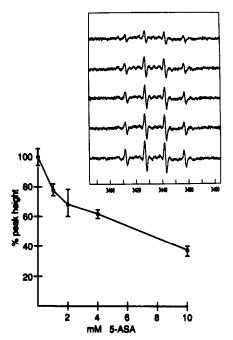


Fig. 2. Inhibition of O₂-DPMO-induced ESR signals (relative peak heights) by 5-ASA. Inset: ESR spectum from a representative incubation. The lines represent (from bottom to top) spectra with no inhibitors (bottom) and with

5-ASA, 1.0, 2.0, 3.0 and 10 mM.

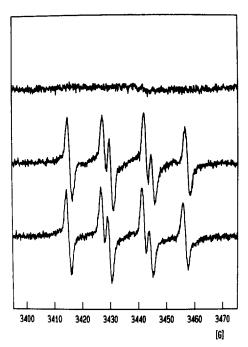


Fig. 3. Comparison of effects of NGDA and 5-ASA acid on linoleate radical-DBNBS-induced ESR signals. The lines represent (from bottom to top) spectra from incubations with no inhibitors (bottom), 2.5 mM 5-ASA and 3.0 mM NGDA.

slight decrease (\sim 20%) in the absorption maxima of ADS and benzalazine.

From this data, using systems with defined radical generation and direct detection by ESR spectroscopy, we have added further support to the hypothesis that compounds active in the treatment of IBD are in vitro radical scavengers since we found that 5-ASA, 4-ASA and ADS suppressed superoxide radicals. OH' radicals were suppressed by 5-ASA and benzalazine. We have used spin trap ESR spectroscopy rather than cytochrome c reduction, ethylene generation or chemoluminescence as these methods are not entirely specific, interfere with inhibitors or measure additional reactants, e.g. hypochlorite [23]. We were particularly interested in superoxide scavenging as this radical, although only moderately toxic by itself, is the basic O₂ species after the respiratory burst of activated inflammatory cells from which more active compounds such as hydrogen superoxide, hydroxyl radicals (Haber-Weiss reaction) and hypochlorite (myeloperoxidase reaction) are formed [5, 6]. Our observation using ESR of O₂ radical scavenging by 4-ASA differs from the results of other studies in which 4-ASA was demonstrated to be unable to function as a radical scavenger [13]. Possible explanations for this discrepancy may be different radical generation systems [13] and the observation that 4-ASA interferes with the cytochrome c assay (personal observations).

OH radicals were found to be scavenged by 5-ASA and benzalazine, the latter molecule consisting of 5-ASA linked to benzoic acid by an azo bond [7]. It was proposed that OH scavenging by 5-ASA is not due to a direct interaction but rather is the consequence of its inhibiting due to its iron chelating capacity the iron catalysed Haber-Weiss reaction [24]. The reasons for the higher concentrations of 5-ASA needed to suppress OH generation compared to superoxide production are not entirely clear but may be ascribed to the different assay conditions including different spin traps, e.g. DBNBS or DMPO, respectively. As seen from HPLC and UV spectroscopy ~80% of the prodrug molecules remain intact, suggesting that radical scavenging may be due mainly to the unsplit compounds. Whether the small amounts of 5-ASA released from their prodrugs during incubation may also contribute to radical scavenging, is possible, but unlikely. Although extrapolations from in vitro experiments to the in vivo situation are hazardous and a great variety of other factors can contribute to the inflammatory response (e.g. inflammatory mediators etc.), we suggest that radical scavenging by aminosalicylates may also occur in patients with IBD as (1) comparable drug concentrations which inhibited superoxide or hydroxyl radical formation in vitro can be expected in the ileal/colonic lumen of patients on these drugs [25] and (2) similar radical concentrations ($\sim 1 \mu M$) may be present in inflammatory processes based on data from animal experiments [26, 27]. If radical scavenging is a possible mechanism of therapeutic action, administration of more specific scavengers should lead to decreased inflammation in animal models and the treatment of human disease. Unsaturated fatty acid radical scavenging, on the other hand, has to be performed with compounds other than 5-ASA, or its derivatives.

In summary, we have demonstrated that 5-ASA, 4-ASA and ADS concentration-dependently inhibit superoxide radical production using a system with defined radical generation and direct evaluation by ESR spectroscopy. OH radicals were scavenged by 5-ASA and benzalazine but not by the other derivatives. Unsaturated fatty acid (linoleate) radicals were not scavenged by any of these drugs. Our results support the hypothesis that therapeutically active compounds in IBD are in vitro reactive oxygen radical scavengers.

Acknowledgements—This work was supported by a grant from the Kabi Pharmacia GmbH, Erlangen, F.R.G. The authors thank Prof. U. Klotz, Stuttgart, for the HPLC analysis and Mrs T. Gerach for excellent secretarial work.

REFERENCES

- 1. Kvietys PR, Morgan Smith SM, Grisham MB and Mana EA, 5-Aminosalicylic acid protects against ischemia/reperfusion-induced gastric bleeding in the rat. *Gastroenterology* 94: 733-738, 1988.
- Allen RE, Blake DR, Nazhat NB and Jones P, Superoxide radical generation by inflamed human synovium after hypoxia. *Lancet* ii: 282-283, 1989.
- Craven PA, Pfanstiel J, Saito R and de Rubertis F, Actions of sulfasalazine and 5-aminosalicylic acid as reactive oxygen scavengers in the suppression of bile acid-induced increases in colonic epithelial cell loss and proliferative activity. Gastroenterology 92: 1998–2008, 1987
- Parks D and Granger ND, Ischemia-induced vascular damage: role of xanthine-oxidase and hydroxyl radicals. Am J Physiol 245: 285-289, 1983.
- Grisham MB and Granger ND, Neutrophil mediated mucosal injury: role of reactive oxygen metabolites. Dig Dis Sci 33 (Suppl); 6S-15S, 1988.
- Williams JG and Hallett MB, The reaction of 5aminosalicylic acid with hypochlorite. Implications for its mode of action in inflammatory bowel disease. Biochem Pharmacol 38: 149-154, 1989.
- Dallegri F, Ottonello L, Ballestrero A, Bogliolo F, Forrando F and Patrone F, Cytoprotection against neutrophil derived hypochlorous acid: a potential mechanism of the therapeutic action of 5-aminosalicylic acid in ulcerative colitis. Gut 31: 184-186, 1990.
- De Groot JJMC, Garssen GJ, Vliegenhardt JFG and Boldingh J, The detection of linoleate radicals in the anaerobic reaction of lipoxygenase. *Biochim Biophys* Acta 326: 279-284, 1973.
- Hirafuji M and Ogura J, Lipid peroxidation modifies the effect of phenolic anti-inflammatory drugs on prostaglandin biosynthesis. *Biochem Pharmacol* 34: 933-936, 1985.
- Miyachi Y, Yoshioka A, Imamura S and Niwa J, Effect of sulphasalazine and its metabolites on the generation of reactive oxygen species. Gut 28: 190-195, 1987.
- Williams JG and Hallett MB, Effect of sulphasalazine and its active metabolite, 5-aminosalicylic acid in toxicoxygen metabolite production by neutrophils. Gut 30: 1581-1587, 1989.

- Ahnfelt-Ronne J, Nielsen HO, Christensen A, Langholz E, Binder V and Reis P, Clinical evidence supporting the radical scavenger mechanism of 5-aminosalicylic acid. Gastroenterology 98: 1162-1169, 1990.
- 13. Nielsen OH and Ahnfeld-Ronne J, 4-Aminosalicylic acid, in contrast to 5-aminosalicylic acid, has no effect on arachidonic acid metabolism in human neutrophils, or on the free radical 1,1 diphenyl-2-picrylhydrazyl. *Pharmacol Toxicol* 62: 223-226, 1988.
- Azad Khan AK, Piris J and Truelove SC, An experiment to determine the active therapeutic moiety of sulphasalazine. Lancet ii: 240-245, 1977.
- Ewe K, Eckard V and Kanzler G, Treatment of ulcerative colitis with olsalazine and sulfasalazine. Efficacy and side effects. Scand J Gastroenterol 23 (Suppl): 70-75, 1988.
- Ginzberg AL and Albert MB, Pilot trial of enteric coated 4-ASA in severe steroid dependent inflammatory bowel disease. Gastroenterology 94: A147, 1988, abstract.
- Baralsty A, Salicylazobenzoic acid in ulcerative colitis. Lancet i: 960-962, 1982.
- Ozawa T and Hanaki A, Spin trapping of superoxide ion by a water soluble, nitrosoaromatic compound. Biochem Biophys Res Commun 186: 657-664, 1986.
- Janzen EG, Natter DE, Davis ER, Blackburn BJ, Poyer JL and McCay PB, On spin trapping hydroxyl and hydroperoxyl radicals. Can J Chem 56: 2237-2242, 1978.
- Hyland K and Auclair C, The formation of superoxide radical anions by a reaction between O₂, OH and dimethyl sulfoxide. Biochem Biophys Res Commun 102: 531-537, 1981.
- Allgayer H, Eisenburg J and Paumgartner G, Soybean lipoxygenase inhibition; studies with the sulphasalazine metabolites N-acetyl-aminosalicylic acid, 5-aminosalicylic acid and sulphapyridine. Eur J Clin Pharmacol 26: 449-451, 1984.
- Fischer C, Maier K, Stumpf E, v. Gaisberg U and Klotz U, Disposition of 5-aminosalicylic acid, the active metabolite of sulfasalazine in man. Eur J Clin Pharmacol 25: 511-515, 1983.
- Gionchetti P, Guarnieri C, Campieri M et al., Scavenger effect of sulphasalazine (SASP), 5-aminosalicylic acid (5-ASA) and olsalazine (OAS). Gut 31 (letter): 730– 731, 1990.
- Grisham MB, Effect of 5-aminosalicylic acid on ferrous sulfate-mediated damage to deoxyribose. *Biochem Pharmacol* 39: 2060-2063, 1990.
- Lauritsen K, Hanson J, Ryde M and Rask Madsen J, Colonic azodisalicylate metabolism determined by in vivo dialysis in healthy volunteers and patients with ulcerative colitis. Gastroenterology 86: 1496-1500, 1984.
- Zweier JL, Kuppusamy P and Lutty GA, Measurement of endothelial cell free radical generation: evidence for a central mechanism of free radical injury in postischemic tissues. Proc Natl Acad Sci USA 85: 4046– 4050, 1988.
- 27. Tosaki A and Braquet P, DMPO and reperfusion injury: arrhythmia, heart function, electron spin resonance, and nuclear magnetic resonance studies in isolated working guinea pig hearts. Am Heart J 120: 819-830, 1990.