SHORT COMMUNICATIONS

Drug resistance dependent on different molecular size P-glycoproteins in Yoshida rat ascites hepatoma cells

(Received 12 July 1991; accepted 9 December 1991)

Multidrug resistance is defined by resistance to structurally unrelated antitumor drugs and decreased accumulation and enhanced efflux of drugs resulting from P-glycoproteins encoded by the *mdr* genes [1-4]. Many investigators have established multidrug-resistant cell lines and studied them [5-11], but there is little evidence for naturally acquired multidrug resistance.

There are many rat ascites hepatoma (AH*) cell lines that were induced by dimethylaminoazobenzene and established as transplantable tumors [12]. Inaba et al. [13] and Wakusawa et al. [14] have reported the low sensitivity of AH66 cells to VBL resulting from a high efflux of the drug in an energy-dependent manner. This study indicates that the AH cell lines have multidrug resistance dependent upon the P-glycoprotein overexpressed in the plasma membrane.

Materials and Methods

Chemicals. VBL (Shionogi & Co., Osaka, Japan), [³H]-VBL (374 GBq/mmol) and [³H]azidopine (1.92 TBq/mmol, Amersham International, Amersham, U.K.) were purchased from commercial sources.

Animals and tumor cells. The AH44, AH66, AH66F and AH109A cell lines were supplied by the Sasaki Institute, Tokyo, Japan. Cells were passaged weekly through female

Donryu rats weighing 100-150 g (Nippon SCL, Hamamatsu, Japan) and harvested from the tumor-bearing rats 6-10 days after transplantation.

Cell culture. Cells were suspended in Eagle's Minimum Essential Medium supplemented with 10% fetal calf serum and cultured at 37° in a CO_2 incubator.

Photoaffinity labeling. Plasma membranes, prepared by a Percoll sedimentation method as reported previously [15], were incubated with 200 nM [³H]azidopine for 30 min at room temperature in the presence or absence of VBL and irradiated at 366 nm for 20 min. The sample was solubilized in SDS and 8 M urea and fractionated by electrophoresis on a 7.5% polyacrylamide/4.5 M urea gel, with a stacking gel. After being fixed and dried, the gel was autoradiographed on a Kodak X-Omat R film (Eastman Kodak Co., Rochester, NY, U.S.A.) with an intensifying screen at -70°.

Immunostaining. Fractionated membrane proteins on the gel were transferred onto a nitrocellulose membrane filter (Schleicher & Schuell, Dassel, Germany). The filter was blocked with 3% gelatin in phosphate-buffered saline (pH 7.4) for 2 hr at room temperature and then incubated overnight with 1 µg/mL of monoclonal antibody against P-glycoprotein (C219, Centocor, Inc., Malvern, PA, U.S.A.) at 4°, which was originally isolated by Kartner et al. [16]. The filter paper was washed and then incubated for 1 hr with horseradish peroxidase-conjugated anti-mouse IgG (Organon Teknika Corp., West Chester, PA, U.S.A.). After extensive washing with phosphate-buffered saline

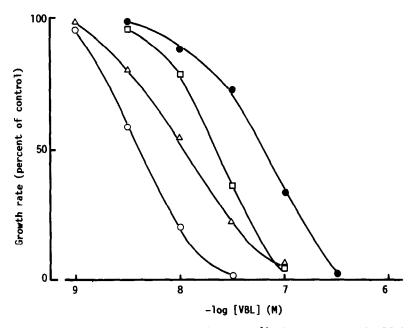


Fig. 1. In vitro sensitivities of AH cells to VBL. Cells $(1.5 \times 10^5/\text{mL})$ were treated with VBL for 48 hr. Each point represents the mean of triplicate measurements. (\triangle) AH44; (\blacksquare) AH66; (\bigcirc) AH66F; (\square) AH109A.

^{*} Abbreviations: AH, ascites hepatoma; VBL, vinblastine; SDS, sodium dodecyl sulfate.

containing 0.05% Tween 20, the immunoreactive band was stained by $0.5 \,\mu\text{g/mL}$ of 3,3'-diaminobenzidine tetrahydrochloride (Dojin, Kumamoto, Japan) and 0.03% hydrogen peroxide solution.

Results and Discussion

The *in vitro* sensitivity to VBL had the order of AH66F > AH44 > AH109A > AH66 cells. The resistance of AH44, AH109A and AH66 cells was 2.9-, 6.2- and 18.5-fold higher than AH66F cells, respectively, and AH66 cells were inherently resistant to VBL (Fig. 1). Figure 2 shows the courses of [³H]VBL accumulation and efflux in AH cells. Resistant cells accumulated much less VBL than sensitive cells. The amount of VBL accumulated in AH cells in 30 min under energy-deprived conditions increased by about 2-fold (in the most sensitive AH66F cells) to 10-

fold (in the most resistant AH66 cells) of that under normal conditions (data not shown). After the forced accumulation, the cells were returned to normal conditions, then the antitumor drug was rapidly extruded, according to the drug resistance. This indicates that the drug resistance in AH cells is based on the lowered accumulation resulting from the energy-dependent efflux of the antitumor drug from the cells.

It has been reported that azidopine, a photoreactive calcium channel blocker, binds irreversibly to P-glycoprotein in plasma membranes of multidrug-resistant cells [17]. The 150 and 160 kDa membrane proteins from AH109A and AH66 cells, respectively, were photolabeled by [3 H]azidopine. The photolabel was selectively inhibited by 10 μ M VBL, more strongly in AH66 cells than in AH109A cells (Fig. 3A). The difference of affinity for VBL

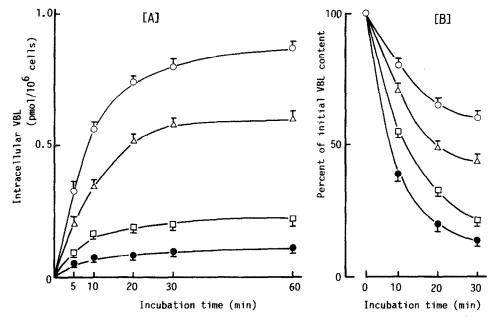


Fig. 2. Accumulation and efflux of VBL in AH cells. (A) Accumulation of VBL. Cells $(1 \times 10^6/\text{mL})$ were incubated with 10 nM [^3H]VBL for the designated times at 37° . (B) Efflux of VBL. Cells $(2 \times 10^6/\text{mL})$ were preloaded with 20 nM [^3H]VBL in a glucose-deprived Hanks' solution containing 10 mM sodium azide for 30 min at 30° and then cultured in the normal culture medium for the indicated times. The amount of intracellular drug was determined as described previously [11]. Bars, SE for at least two experiments performed in triplicate. Symbols as Fig. 1.

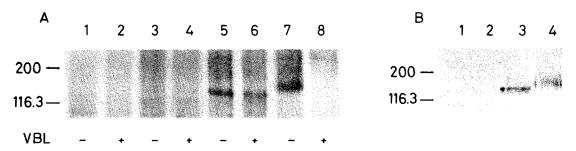


Fig. 3. (A) Autoradiogram of photoaffinity labeling of AH cell membranes by [3 H]azidopine. Membrane preparations (100 μ g of protein per lane) from AH66F (lanes 1 and 2), AH44 (lanes 3 and 4), AH109A (lanes 5 and 6), and AH66 (lanes 7 and 8) were incubated with 200 nM [3 H]azidopine in the absence (–) or presence (+) of 10 μ M VBL and applied on SDS-PAGE. (B) Immunostaining of AH cell membrane with C219 antibody. Membrane preparations (100 μ g of protein per lane) from AH66F (lane 1), AH44 (lane 2), AH109A (lane 3) and AH66 (lane 4) were subjected to SDS-PAGE and immunoblotting with C219 monoclonal antibody. Molecular size markers are indicated in kilodaltons.

of the proteins seems to cause the difference in the magnitude of resistance between these cell lines. These proteins were also immunopositive to an antibody against P-glycoprotein C219 (Fig. 3B). In the case of the sensitive cell lines AH66F and AH44, such membrane protein bands were not detectable by photolabeling and immunoblotting. Thus, the drug resistance in AH109A and AH66 cells is dependent on 150 and 160 kDA P-glycoproteins overexpressed in the plasma membranes, respectively. The difference in molecular size of the P-glycoprotein from AH109A and AH66 cells may be due to a difference in individual glycosyl chains.

Recently, it has been reported that 170 kDa P-glycoprotein and the *mdr* gene are greatly overexpressed during treatment with hepatocarcinogens and liver regeneration [18, 19]. The AH cell lines had been induced by dimethylaminoazobenzene and passaged *in vivo* for a long period [12], so the P-glycoproteins overexpressed in AH109A and AH66 cell membranes are clearly different from an acute expression. If hepatoma cells constantly overexpress the P-glycoprotein, all AH cells have to express the protein in the membrane, but AH44 and AH66F cells had a very low level or none. Therefore, AH66 and AH109A cells can be considered to have naturally acquired multidrug resistance.

This study indicates that Yoshida rat ascites hepatoma cell lines have different sensitivities to VBL, and AH109A and AH66 cells are naturally acquired multidrug-resistant cell lines dependent upon P-glycoproteins with different molecular size.

Acknowledgements—This work was supported in part by a Grant-in-Aid for Cancer Research from the Ministry of Education, Science and Culture, Japan.

Research Laboratory for Development of Medicine School of Pharmacy Hokuriku University Kanazawa 920-11 Japan KEN-ICHI MIYAMOTO* SHINYA WAKUSAWA SHIGEO NAKAMURA

REFERENCES

- Akiyama S, Fojo A, Hanover JA, Pastan I and Gottesman MM, Isolation and genetic characterization of human KB cells resistant to multiple drugs. Somat Cell Mol Genet 11: 117-126, 1985.
- Riordan JR, Deuchars K, Kartner N, Alon N, Trent J and Ling V, Amplification of P-glycoprotein genes in multidrug-resistant mammalian cell lines. *Nature* 316: 817-819, 1985.
- Riordan JR and Ling V, Genetic and biochemical characterization of multidrug resistance. *Pharmacol Ther* 28: 51-57, 1985.
- Kane SE, Pastan I and Gottesman MM, Genetic basis of multidrug resistance of tumor cells. J Bioenerg Biomembr 22: 539-618, 1990.
- * Corresponding author: Dr K. Miyamoto, Research Laboratory for Development of Medicine, School of Pharmacy, Hokuriku University, Ho-3 Kanagawa-machi, Kanazawa 920-11, Japan.

- Dano K, Active outward transport of daunomycin in resistant Ehrlich ascites tumor cells. Biochim Biophys Acta 323: 466-483, 1973.
- Inaba M and Johnson RK, Decreased retention of actinomycin D as the basis for cross-resistance in anthracycline-resistant sublines of P388 leukemia. Cancer Res 37: 4629-4634, 1977.
- Skovsgaad T, Mechanism of cross-resistance between vincristine and daunorubicin in Ehrlich ascites tumor cells. Cancer Res 38: 4722-4727, 1978.
- Tsuruo T, Iida H, Tsukagoshi S and Sakurai Y, Increased accumulation of vincristine and Adriamycin in drug-resistant cells following incubation with calcium antagonists and calmodulin inhibitors. Cancer Res 42: 4730-4733, 1982.
- Tsuruo T, Saito H, Kawabata H, Oh-hara T, Hamada H and Utakoji T, Characteristic of resistance to Adriamycin in human myelogenous leukemia K562 resistant to Adriamycin and the isolated clone. *Jpn J Cancer Res* 77: 682-692, 1986.
- Broggini M, Grandi M, Ubezio P, Geroni C, Giuliani FC and D'Incalci M, Intracellular doxorubicin concentrations and drug-induced DNA damage in a human colon adenocarcinoma cell line and in a drugresistant subline. Biochem Pharmacol 37: 4423-4431, 1988.
- Miyamoto K, Wakusawa S, Nakamura S, Koshiura R, Hagiwara M and Hidaka H, Circumvention of multidrug resistance in P388 murine leukemia cells by a novel inhibitor of cyclic AMP-dependent protein kinase, H-87. Cancer Lett 51: 37-42, 1990.
- 12. Yoshida T, Contributions of the ascites hepatoma to the concept of malignancy of cancer. *Ann NY Acad Sci* 63: 852–881, 1956.
- Inaba M, Takayama K and Sakurai Y, Mechanism of natural resistance to vincristine in rat ascites hepatoma AH66. Jpn J Cancer Res 72: 562-568, 1981.
- Wakusawa S, Miyamoto K and Koshiura R, Increase
 of sensitivity and uptake of vinblastine by reserpine in
 rat ascites hepatoma. *Jpn J Pharmacol* 36: 187-195,
 1984.
- Sanae F, Miyamoto K and Koshiura R, Altered adrenergic response and specificity of the receptors in rat ascites hepatoma AH130. Cancer Res 49: 6242– 6246, 1989.
- Kartner N, Evernden-Porelle D, Bradley G and Ling V, Detection of P-glycoprotein in multidrug-resistant cell lines by monoclonal antibodies. *Nature* 316: 820– 823, 1985.
- 17. Safa AR, Glover CJ, Sewell JL, Meyers MB, Biedler LJ and Felsted RL, Identification of the multidrug resistance-related membrane glycoprotein (gp150-180) as an acceptor for calcium channel blockers. J Biol Chem 262: 7884-7888, 1987.
- 18. Thorgeirsson SS, Huber BE, Sorrell S, Fojo A, Pastan I and Gottesman MM, Expression of the multidrugresistant gene in hepatocarcinogenesis and regenerating rat liver. *Science* 236: 1120-1122, 1987.
- Teeter LD, Becker F, Chisari FV, Li D and Kuo MT, Overexpression of the multidrug resistance gene mdr3 in spontaneous and chemically induced mouse hepatocellular carcinoma. Mol Cell Biol 10: 5728-5735, 1990.