



INTERNALIZATION AND NUCLEAR LOCALIZATION OF PEPTIDE HORMONES

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Abstract—The presence of neuropeptide receptors on the plasma membrane is well accepted, as is its internalization and down-regulation. The analysis of the fate of these peptides within their target-cells is difficult. Endogenous peptides or administered native peptides are visualized in these cells using immunocytochemistry after cryoultramicrotomy. Labelled peptides can be injected and their internalization kinetics studied using ultrastructural autoradiography. The pituitary gland is a suitable model for the study of the neuropeptide mechanism, with the lactotroph function being taken as an example in the present case. Prolactin (PRL) release depends on two main neuropeptides: thyrotropin-releasing hormone (TRH) and somatostatin (SS). The TRH immunoreactivity obtained from endogenous as well as injected material was restricted to the plasma membrane, secretory granules, cytoplasmic matrix and nucleus. The internalization kinetics of exogenous native TRH showed an increase of immunoreactive material in all compartments including the nucleus. The endogenous SSs (SS14 and SS28) were detected in the same subcellular lactotroph compartments. Injection of ^{125}I -SS showed a rapid binding of SS at the plasma membrane level before internalization. For 60 min of *in vivo* uptake, ^{125}I -SS28, the large SS molecule, was detected in the cytoplasm only, while ^{125}I -SS14 was found in the nuclear matrix. *In vitro* ^{125}I -SS28 was restricted to the nuclear membrane. Under physiological conditions the endogenous neuropeptides were visualized in the nucleus, but after injection of labelled peptides only small molecules were found in the nucleus. The significance of the presence of these neuropeptides is discussed.

The first description of a neuropeptide in the nucleus of its target cell, which was produced in 1973 by Tixier-Vidal's group [1], showed that ^3H -TRH† could be internalized into the nuclei of the thyrotrophic cells of the pituitary in primary culture. However, the difficulty of preparing a purified nuclear fraction, without plasma membrane contamination, has meant that the characterization of the nuclear binding site remains obscure. The presence of plasma membrane peptide receptors is well accepted, as is the internalization and down-regulation of peptides, but the fate of these peptides within the cell is difficult to analyse. The presence of exogenous molecules in lysosomes is associated with degradation, in the Golgi apparatus with synthesis or recycling, and in nucleus with gene expression. The difficulty resides in the fact that neuropeptides show a high affinity for endogenous ligands, but their concentration in tissues is low [2].

The pituitary gland is a suitable model for the study of neuropeptide mechanisms, given that all the neuropeptides characterized in the brain have been found to have a modulatory effect in the pituitary. The number of these neuropeptides increases each year, and now includes SS [3, 4], TRH [5], GH-releasing hormone [6, 7], gonadotropin-releasing hormone [8, 9], corticotropin-releasing hormone [10, 11], vasointestinal peptide [12], substance P [13], neuropeptide Y [14], oxytocin [15],

calcitonin [16], arginine vasopressin [17], angiotensin II [18] and atrial natriuretic peptide [19]. Each of these endogenous peptides has been detected by immunocytochemistry in one or more pituitary target cells, but none has been detected in all the pituitary cell types. All these peptides were internalized into the nucleus from the plasma membrane. Administration of labelled or unlabelled peptide makes it possible to follow the internalization process [5, 19–31].

In order to illustrate this phenomenon, the lactotrophic function was used as a model. PRL release depends on two main neuropeptides: TRH and SS. The isolation of the pure form of TRH as a tripeptide was first described in 1966 by Schally *et al.* [32]. SS was described by Brazeau *et al.* [33] as the hypothalamic GH release-inhibiting factor of 14 amino acids (SS14), following which an NH_2 -terminally extended form of SS containing 28 amino acids (SS28) was isolated and characterized [34–36]. Native and synthetic peptides stimulate or inhibit the secretion of PRL both *in vivo* and *in vitro*. These peptides bind to a receptor which has been biochemically characterized in pituitary membrane fractions [37, 38]. Other peptides and hormones act to regulate this lactotrophic function.

MATERIALS AND METHODS

Products

For immunocytochemical studies. Anti-TRH serum [5] was raised in rabbit injected with TRH coupled to a sunflower globulin by the bis-diazotized benzidine method. The characteristics of this highly specific anti-TRH antibody have been described

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† Abbreviations: GH, growth hormone; PRL, prolactin; SS, somatostatin; SS14, somatostatin (1–14); SS28, somatostatin (1–28); TRH, thyrotropin-releasing hormone.

previously [5]; anti-SS sera (ref. S309 and S310) were kindly supplied by Dr R. Benoit (Montréal, Canada); these highly specific anti-SS sera have been described previously [39]; anti-rPRL-R sera (ref. U5, U6, T1 and T6) were supplied by Dr P. A. Kelly (Paris, France); anti-rGH and anti-rPRL sera were supplied by Dako (Trappes, France).

For autoradiographical studies. SS14 agonist ([D-Tyr⁰, D-Trp⁸]-SS14) was purchased from Peninsula (CA, U.S.A.) and the SS28 agonist ([Leu⁸, D-Trp²², Tyr²⁵]-SS28) was kindly supplied by Dr J. Rivier (CA, U.S.A.).

Animals

Adult male Wistar rats (about 250 g) were purchased from Iffa Credo (St Germain s/l Arbresle, France) and were housed at room temperature in a 12 hr light-dark cycle. The animals were fed a diet of rat chow and water *ad libitum*.

For immunocytochemical studies. Anterior pituitaries were removed and fixed by immersion in 4% paraformaldehyde (2 hr), or in 2.5% glutaraldehyde (1 hr) and post-fixed in 1% buffered osmium tetroxide (1 hr). Washing (1 hr) and fixation steps were performed in 100 mM mono-di-phosphate buffer at pH 7.4. The tissues were cut into small pieces (1 mm³) at the beginning of the fixation. After the last washing, the tissues were incubated in 0.4 M sucrose as a cryoprotectant. Freezing was performed in a cold gradient of fuming nitrogen (Biogel, CFPO, Lyon, France) to -4° before total immersion in liquid nitrogen as described previously [40].

For autoradiographical studies. Shortly before stimulation with the ¹²⁵I-peptide, the animals were deeply anaesthetized with pentobarbital (65 mg/kg body weight) and a cannula was inserted into the right jugular vein, extending to the atrium. The animals were then immediately stimulated with labelled peptide. At several points, a number of animals were decapitated and the pituitary glands quickly removed, minced and fixed by immersion in glutaraldehyde 2.5% (1 hr) in 0.1 M phosphate buffer (pH 7.4). After washing, the tissues were post-fixed in 1% OsO₄ for 1 hr, dehydrated in ethanol and embedded in Araldite. If signs of awakening occurred during the time between injection of labelled hormone and decapitation, more pentobarbital was injected in order to maintain deep anaesthesia.

Immunocytochemical studies

Ultrathin frozen sections. Ultrathin frozen sections (100 nm) were cut at -120° on an Ultracut (Reichert-LEICA, Vienna, Austria) fitted with an FC₄D cryosectioning system [40].

Immunocytochemical reaction using gold-conjugated anti-IgG [41]. These sections were incubated with primary antiserum (dilution 10⁻⁵-10⁻⁷) in a mono-di-phosphate buffer: 100 mM, NaCl; 665 mM, Tween 20; 0.05%, ovalbumin; 1% (pH 7.4) for 60 min and then washed, after which the antigen-antibody complexes were revealed by incubation with goat anti-rabbit IgG conjugated to 15 nm gold particles (BioCell, Cardiff, U.K.) for 30 min. After washing in the buffer, the sections were washed with distilled

water and contrasted using 2% neutral uranyl acetate (5 min) and then embedded in methyl cellulose [40].

Gold particles can be counted in each pituitary cell type and expressed as density of gold particles per 100 μm².

Immunocytochemical reaction using the peroxidase anti-peroxidase (PAP) method [8]. Ultrathin frozen sections of the pituitary gland were cut from three or four blocks per animal. For each block, 24-36 ultrathin sections were incubated with (a) normal sheep serum (dilution 1:100), and (b) various dilutions of the anti-peptide serum for 10 min. The antigen-antibody complexes were revealed as follows: (c) sheep antiserum to rabbit-γ-globulins (dilution 1:10,000) for 10 min; (d) peroxidase-anti-peroxidase complex (dilution 1:500) for 10 min; (e) 4-chloro-1-naphthol (ICN Pharmaceuticals, Plainview, NY, U.S.A.) solution in 50 mM Tris-HCl buffer saline (pH 7.6) as previously described [5] for 3 min; (f) 2% osmium tetroxide for 10 min; (g) uranyl acetate aqueous solution (2%) for 10 min. After steps a, b, c and d, the grids were washed with Tris-HCl buffer. After steps e, f and g, the grids were washed with distilled water. All washing steps were performed for 10 min.

Semi-quantitative evaluation of TRH immunoreactivity. The intensity or magnitude of intracellular immunoreactivity was established semi-quantitatively by using as an index the "Maximum Dilution factor of the Antiserum" (MDA), as described previously [5, 41, 42]. Consecutive ultrathin pituitary slices were analysed by progressive dilutions of the primary serum (10-fold dilution cascade), the MDA representing the last dilution of the antiserum that allowed a significant intracellular localization. For the sake of convenience, the transformed pMDA value was used for the expression of the result, with pMDA representing the absolute value of the logarithm of the MDA (pMDA = -log MDA), by analogy with the pH expression used for indicating the concentration of the hydrogen ion. For example, a pMDA of 7 means that the antiserum dilution 10⁷ was the last one that gave rise to a visible immunocytochemical reaction. An increase of 3 in the pMDA value corresponds to achieving the same last positive localization using an antiserum 1000 times more dilute.

Checking the immunocytochemical reaction. The specificity of the immunocytochemical reaction was checked by (a) using normal rabbit IgG rather than primary antiserum, (b) omitting the primary antibody, (c) using primary antiserum after incubation with the homologous antigen (Peninsula) at a concentration of 1 or 10 μg/mL of undiluted antibody and (d) using primary antiserum after incubation with a heterologous antigen at a concentration 40 times higher than that of the homologous antigen.

Autoradiographical studies

Radioiodination. SS14 and SS28 agonists were radioiodinated using the standard chloramine T method and purified by Sephadex G-100 gel preparation [43]. Radiolabelled peptides were used the next day. Specific radioactivity measured by self-displacement was approx. 400 μCi/μg.

In vivo autoradiography of ¹²⁵I-peptides. Uptake

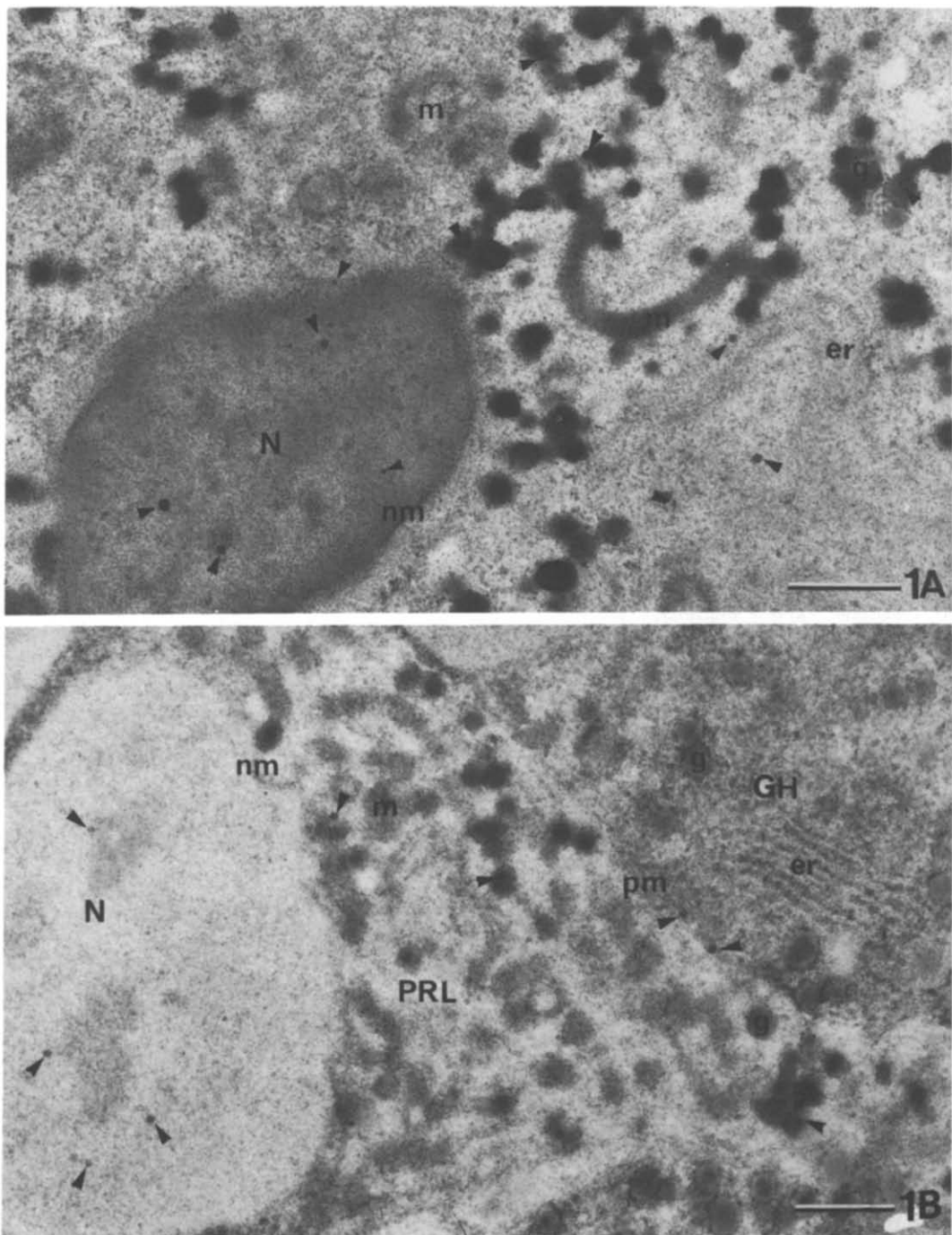


Fig. 1. Ultrastructural evidence for endogenous SS14-like (A) and SS28-like (B) immunoreactivities in lactotrophs. Immunoreactivity, using the PAP method (arrowhead) on ultrathin frozen sections, is observed at the plasma membrane level (pm) in the cytoplasmic matrix, secretory granules (g) and nucleus (N). GH, somatotroph; er, endoplasmic reticulum; m, mitochondrion; nm, nuclear membrane. Bar = 1 μ m [4].

of 125 I-peptide was studied in pentobarbital anaesthetized rats. The animals received 3×10^8 dpm of 125 I-peptide (0.5 μ g) via indwelling intravenous catheters. At time intervals of 2, 5, 15, 30 and 60 min after injection, two rats were decapitated and their

pituitary glands dissected out. At each step in the histological processing, the dpm of each solution was determined so as to measure loss of radioactivity. This loss represented approximately 20% of the initial values [20, 21, 23–30].

In vitro autoradiography of ^{125}I -peptides. Female rats (Wistar, 200–220 g) were decapitated and the pituitaries were dissected rapidly. The cells were then dispersed according to the procedure described by Hopkins and Farquhar [44], maintained in DMEM and supplemented with calf serum from which the steroids had been removed by overnight adsorption on Norit A charcoal (1%) and dextran (0.1%) for 5–6 days. A steroid [oestradiol (E_2)] was added to the medium within the first 24 hr of culture. Mouse AtT20 cells were cultured in the same medium [25].

Primary cultures of pituitary cells were incubated with mono-iodinated SS28 agonist (1.4×10^6 dpm/bottle) for 30 min and cultures of AtT20 for 1, 4 and 18 hr, respectively.

Checking the autoradiographic technique. To test the specificity of ^{125}I -peptide uptake, some animals were also injected with ^{125}I -peptide, as above, together with 50 μg of unlabelled peptide and then killed 5 min after injection. The specificity of uptake by cells in the culture was checked by concomitant incubation with an excess of SS28 or SS14 (5×10^{-7} M).

Preparation of autoradiograms. For light microscopic autoradiography, the resin was removed using 50% ethanolic sodium methoxide solution. The semithin sections (1 μm) were then dipped in Kodak NTB₂ (New Haven, CT, U.S.A.). The slides were developed in Dektol (Kodak) for 2 min and stained with toluidine blue after 2 weeks of exposure.

For electron microscopic autoradiography, ultrathin sections of anterior pituitary cells were coated with Ilford L4 emulsion (St Priest, France) using the loop technique [43] to obtain a monolayer film of densely-packed silver bromide crystals. The sections were developed in D19 developer (Kodak) (2 min) and stained with uranyl acetate (10 min) and lead citrate (5 min) as previously described [43].

Analysis of autoradiograms. Analysis of silver grain distribution was done only at the ultrastructural level. A random selection of cells sectioned through the nucleus was photographed in a given grid square. The percentage of grains associated with organelles was determined on micrographs (magnification $\times 20,000$) by the probability circle method [45]. A circular area of 460 nm in diameter around the silver grain was taken to represent the radioactive source, with a probability of 95% [45]. The grain was classified as exclusive if only one organelle was localized within the circle, and as shared if it was observed over more than one organelle. Each shared grain was assigned, on the basis of probability, to only one structure, according to the method of Nadler [45]. The corrected number of grains for each organelle was the sum of the exclusive and adjusted-shared grains and was expressed as a percentage of the total number of corrected grains.

The relative concentration of label in each organelle was calculated by dividing the percentage of corrected silver grain count by the percentage of area occupied by the organelles. A grain density greater than 1 was taken to represent "significant" labelling, following Salpeter and McHenry [46].

RESULTS

Only results concerning PRL and GH functions will be illustrated, as a model of visualization of neuropeptides in target cells, which in this case are the lactotrophs and somatotrophs. No controls are given here, but to obtain them see [3–5, 23, 25–27, 40, 41, 43, 47].

Localization of endogenous SS14 and SS28 by immunocytochemistry

Endogenous SS was visualized as described pre-

Table 1. Percentage of pituitary labelled cells according to intensity of labelling

Pituitary cell types	Number of silver grains per cell					
	NSB*	2	3	4	5	≥ 6
Control						
GH	85%	3%	9%	3%		1%
PRL	84%	10%	4%	2%		
TSH	67%	33%				
LH-FSH	100%					
ACTH	100%					
Oestradiol treatment						
GH	76%	10%	4%			
PRL	76%	12%		6%	3%	3%
TSH	83%	17%				
LH-FSH	100%					
ACTH	100%					

Pituitary cells were cultured for 6 days, and exposed to oestradiol for 5 days. Autoradiography was carried out after incubation of cells for 30 min with radiolabelled SS28 analogue in control and oestradiol-treated cell populations. More than 100 cells were analysed for each cell type. Specific binding is represented here by quantities of silver grain higher than 1 per cell.

PRL, lactotrophs; GH, somatotrophs; TSH, thyrotrophs; LH-FSH, gonadotrophs; ACTH, corticotrophs.

* NSB, non specific binding.



Fig. 2. Ultrastructural autoradiography of ^{125}I -[Leu⁸-D-Trp²²-Tyr²⁶]-SS28 in a lactotroph cultured for 6 days, with exposure to oestradiol for 5 days. Autoradiography was carried out after incubation of cells for 30 min with radiolabelled analogue. Silver grains (arrow) are located over the nucleus, nuclear membrane and cytoplasmic matrix. Bar = 1 μm .

viously [3, 4], in three pituitary cell types: somatotrophs, lactotrophs and thyrotrophs. The density of immunoreactive material detected depended on each pituitary cell type [4]. In these three cell types the same localization was observed. Low SS-like immunoreactivity (LI) was always detected at the plasma membrane level. However, a high level of endogenous SS-LI was visualized in the cytoplasmic matrix, secretory granules and nucleus. Figure 1 illustrates the presence of SS-LI in lactotrophs.

Localization of monoiodated SS agonists by autoradiography

In primary cultures of pituitary cells, the uptake was restricted to these same three cell types (Table 1, Fig. 2). The kinetics of internalization in AtT20 cells showed that monoiodated SS28 agonist first binds to the plasma membrane, before internalization in the lysosomes, Golgi apparatus and secretory granules. At the nuclear level, SS28 was not detected in the matrix, but at the nuclear membrane level it was detected throughout.

SS14 and SS28 were internalized as previously described [23, 26] in three pituitary cell types: somatotrophs, lactotrophs and thyrotrophs. Administration of ^{125}I -SS14 agonist in intact animals, with the use of an ultrastructural autoradiographic method, showed that this labelled peptide, after binding to the plasma membrane, was internalized

into the cytoplasmic matrix, secretory granules and, finally, the nucleus (Fig. 3), while ^{125}I -SS28 agonist did not give a significant signal at the nuclear level [23].

Localization of endogenous and exogenous TRH by immunocytochemistry

Endogenous TRH-LI was found in two particular pituitary cell types: the thyrotrophs and the lactotrophs. This immunoreactivity was restricted to the plasma membrane, secretory granules, cytoplasmic matrix and nucleus (Fig. 4).

Exogenous TRH (100 ng) was injected into rats, as previously described [5]. TRH-LI was predominantly found in lactotrophs and thyrotrophs (Fig. 4).

The internalization process studied in lactotrophs, via MDA parameters (Fig. 5), was similar to those described in thyrotrophs [5]. After binding to the plasma membrane, TRH-LI was internalized into the secretory granules and then into the nuclei of somatotrophs and also those of the lactotrophs and thyrotrophs.

Localization of receptor molecules

PRL receptors-LI have been found in all anterior pituitary cells, including somatotrophs and lactotrophs. In these cells PRL receptor-LI was

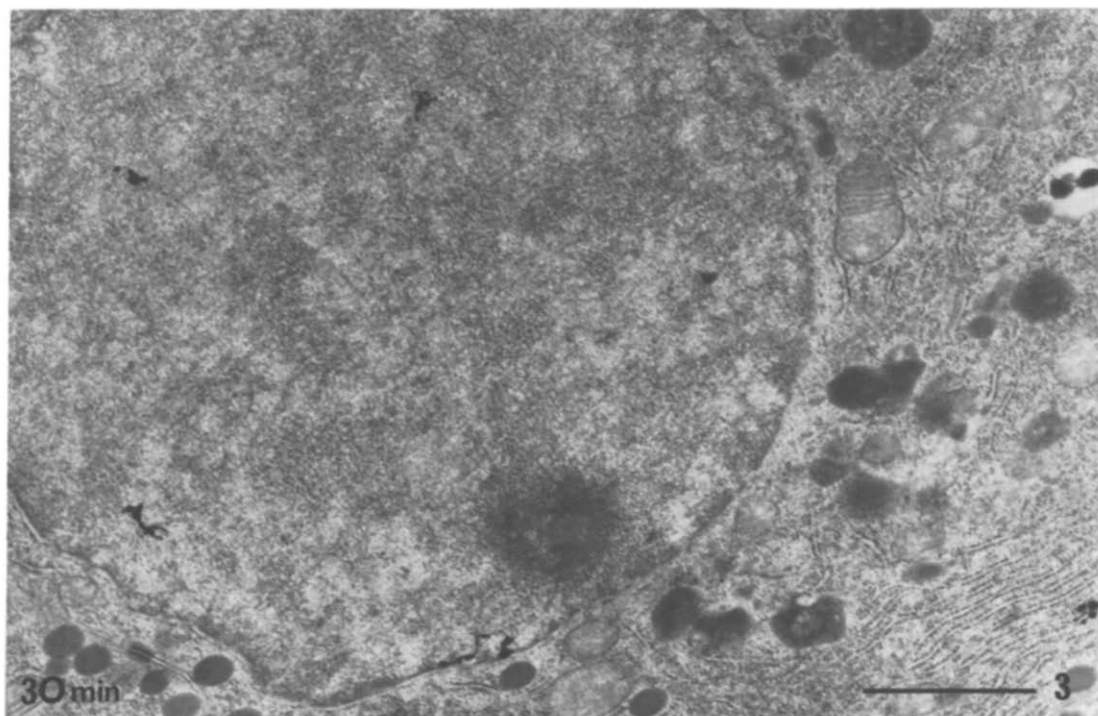


Fig. 3. Ultrastructural *in vivo* autoradiography of ^{125}I -[Tyr⁰-D-Trp⁸]-SS14 in a lactotroph. Silver grains (arrow) are detected over the cytoplasm and nucleus (nuclear membrane and nuclear matrix) 30 min after injection. Bar = 0.5 μm .

detected not only at the plasma membrane level, but also in the nucleus (Fig. 6).

DISCUSSION

We have shown the presence, in the pituitary gland, of 10 neuropeptides, using immunocytochemistry to demonstrate the presence of endogenous molecules (taken up or synthesized *in situ*) and used autoradiography to study their internalization kinetics. In the same way, using immunocytochemistry, we used agonist molecules or native peptides to demonstrate the internalization process and to amplify the immunocytochemical reaction, respectively. We chose the combination of immunocytochemistry and ultrathin frozen sections to obtain the detection of antigens present at very low levels. The extreme sensitivity of this technique has been demonstrated by Hemming *et al.* [47], who reported that a signal could be detected in frozen sections using specific antibodies diluted 1000-fold compared to the same antigen in epoxy resin-embedded sections. The localization of these endogenous peptides is summarized in Fig. 7. They were found in the nucleus, cytoplasmic matrix, secretory granules and, sometimes, at the plasma membrane level of their target cells. No neuropeptides were detected in any anterior pituitary cells, indicating a cellular specificity of this detection.

The presence of peptide at the plasma membrane level is always difficult to show, given that this step,

as binding studies demonstrate, is carried out in physiological conditions and occurs very rapidly. However, when the administration of exogenous native neuropeptides was carried out before immunocytochemical detection, the signal detected at this level was intense, as was shown with TRH administration versus endogenous detection of this peptide [5]. This suggests that in physiological conditions the concentration of endogenous peptide in contact with the plasma membrane of its target cells is extremely low and that the internalization process occurs rapidly. A similar process seems to take place at the nuclear membrane level. Distinct significant labelling can be observed after injection of iodinated GH-releasing hormone agonist into this compartment [30], or after injection of the same unlabelled agonist [7, 22]. Without treatment, however, the signal observed for native endogenous neuropeptides is of extremely low intensity.

The presence of binding sites at the plasma membrane level is well documented, but the presence of neuropeptides or protein hormones at the nuclear membrane level is disputable. This presence may suggest that the barrier between transcription and translation is a potential point of regulation [48]. Its effectiveness is attested to by the fact that most mRNA never leaves the nucleus and is eventually degraded. Dexamethasone, a synthetic glucocorticoid, induces $\alpha_2\mu$ -globulin production in rat liver [49]. After adrenalectomy, the mRNA for this protein accumulates in the nucleus, whereas the

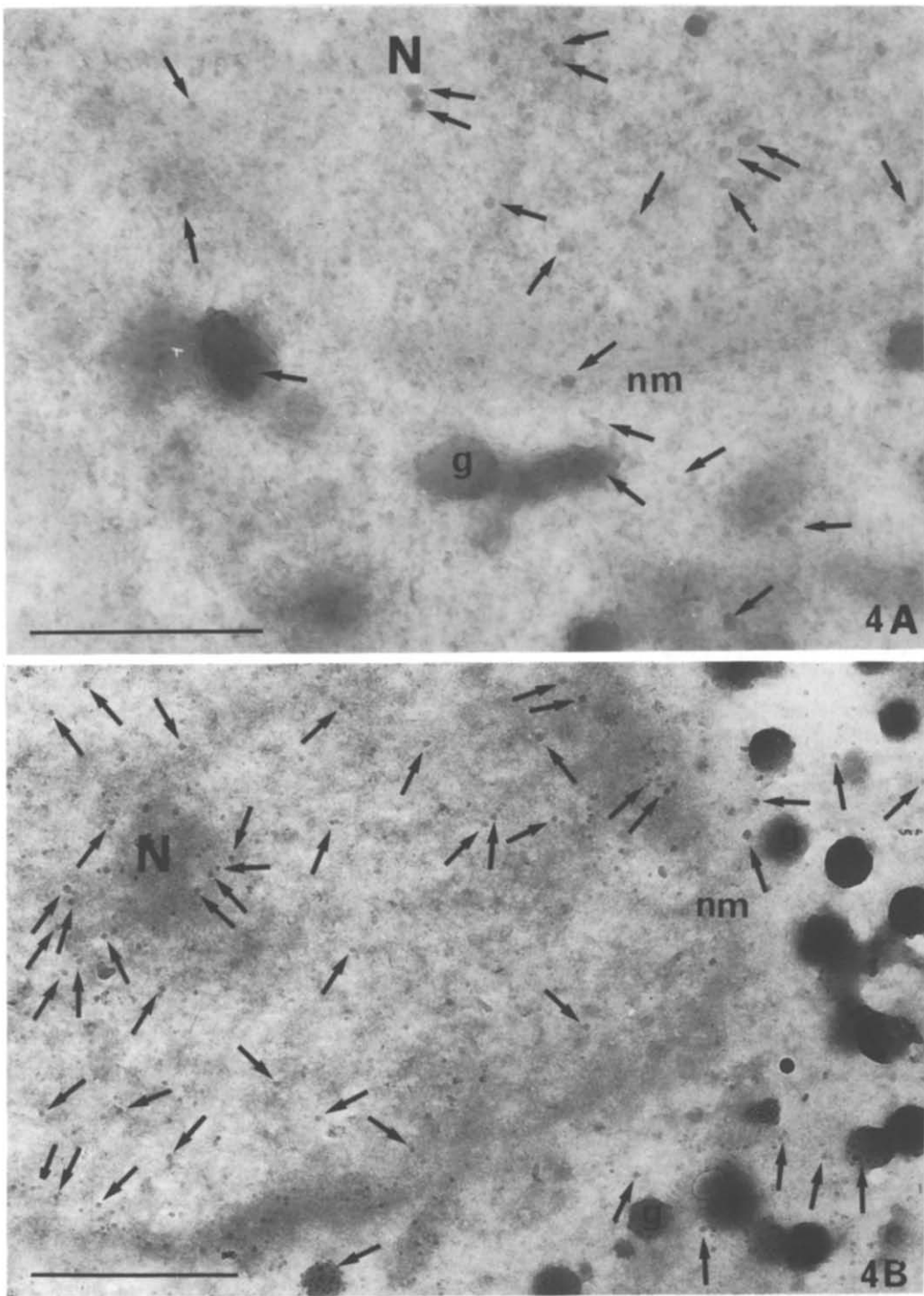


Fig. 4. TRH internalization in lactotrophs. TRH-like immunoreactivity (arrow) is revealed using the PAP method on ultrathin frozen sections. (A) Endogenous TRH is observed in the cytoplasmic matrix, secretory granules (g) and nucleus (N). (B) Exogenous TRH is detected 15 min after i.v. injection of 100 ng native TRH. TRH-like immunoreactivity is particularly localized in the nucleus. nm, Nuclear membrane. Bar = 1 μ m [5].

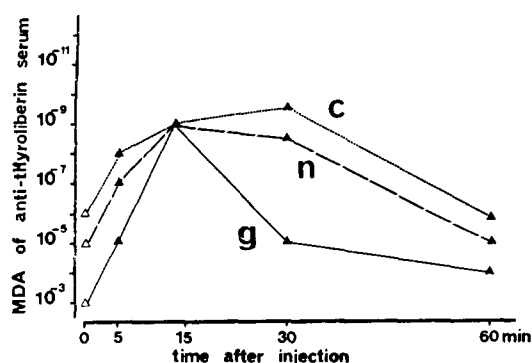


Fig. 5. Influence of time on MDA values (see Materials and Methods for details) in lactotrophs after native TRH injection. c, Cytoplasmic matrix compartment; g, secretory granule compartment; n, nuclear compartment [5].

mRNA content in the polysome falls. For protein hormones, insulin and epidermal growth factor, the nuclear efflux of endogenous mRNA and the nuclear influx of dextran were stimulated by a supraphysiological concentration of hormones [50, 51]. The latter studies also described the hormone which regulates the poly(A) mRNA efflux from intact nuclei by influencing the nucleoside triphosphatase activity in the nuclear envelope [52, 53]. However, binding sites have been described at the nuclear membrane level for insulin [54] and gonadotropin [55]. The regulation of this mechanism could imply the presence of a nucleotide triphosphatase in the nucleus. Human chorionic gonadotropin stimulates this enzyme in the isolated nuclei of luteal cells [56], but not in the nuclei of non-target tissue. Insulin and cAMP have more modest effects in their target tissues [57], but such effects have been shown by influencing nucleoside triphosphatase activity in the nuclear envelope [52, 53]. In the same way, 1 hr after the *in vivo* injection of GH-releasing hormone or SS in intact rats, mRNA encoding for GH, detected by ultrastructural *in situ* hybridization, showed an accumulation of this mRNA in the nuclear matrix and the nuclear membrane [58].

In the nuclear matrix, on the other hand, the signal detected was strong and constant. In target cells neuropeptides were always detected in this compartment. Signal density depends on the peptide and the method used. The detection of an endogenous peptide by the use of immunocytochemistry means that this peptide is present in physiological conditions, and can be revealed, while injection of iodinated peptide does not produce a significant signal in the nuclear matrix [23, 28, 30], except for short peptides, such as monoiodinated SS14 [26] or tritiated TRH [1] which can be revealed in the nucleus. The kinetics of internalization for these modified peptides, which conserve a certain biological activity, are too short to show nuclear translocation. Moreover, the percentage of labelled molecule uptaken by the nucleus is too low to be visualized. However, the presence in the nucleus of similar (but unlabelled)

injected peptides, such as TRH [5] or GH-releasing hormone [7, 22], can be visualized within a short time. However, the accumulation of polypeptide hormones in the nuclei of target cells has been observed for insulin [59, 60], GH [61, 62], PRL [60, 63], opioid [64], nerve growth factor [65, 66], epidermal growth factor [67], platelet-derived growth factor [68], fibroblast growth factor [69] and β - and δ -interferon [70].

Recent data have provided both direct and indirect evidence indicating that in the nucleus, neuropeptides behave, like steroid hormones, in the way they alter gene expression; this has been demonstrated for nerve growth factor [71–73], TRH [74] and GH-releasing hormone [58, 75, 76] and is possible in the case of SS [77]. The signal generated by the binding of TRH to its plasma membrane receptor rapidly reaches the cell nucleus, where it increases the transcription of the PRL gene [72, 73]. In addition, post-transcriptional action of TRH seems to amplify and extend the regulation which occurs at the transcriptional level [72]. Interestingly, TRH, which is only detected in somatotrophs, can also inhibit GH synthesis by modulating the level of specific mRNAs [72, 78], injection of TRH.

Neuropeptides such as substance P and substance K [79], detected in lactotrophs and gonadotrophs [13], vasopressin [80], detected in lactotrophs, corticotrophs and gonadotrophs [16] and bombesin [81], a non-mammalian analogue of gastrin-releasing peptide, detected in lactotrophs, somatotrophs and gonadotrophs, have been reported to stimulate DNA synthesis. The mechanism of these effects remains to be elucidated. On the other hand, nuclear binding sites have been described for gonadotropin-releasing hormone [82], gonadotropin [55], GH [83, 84], angiotensin II [69, 85], opioid [64] and growth factors (such as epidermal growth factor, nerve growth factor, platelet-derived growth factor [68] and fibroblast growth factor [86]), using binding studies and for GH [83, 87] and PRL [88] using specific antibodies.

Numerous neuropeptides and polypeptide hormones, notably insulin and epidermal growth factor such as poly(A) mRNA efflux regulator [52, 53] have been reported to show specific nuclear effects. Moreover, insulin may convert GH-secreting cells into PRL-secreting cells [89] and, when applied directly to isolated frog oocyte nuclei, may markedly stimulate RNA synthesis [90]. Gonadotropin-releasing hormone [8, 9, 20] and angiotensin II [18] peptides have been described in anterior pituitary cells, where their effects are known [91, 92]. Moreover, angiotensin II enhances the susceptibility of chromatin to nuclease digestion [69], which would be consistent with the induction of transcriptional activity. By contrast, epidermal growth factor, through these nuclear receptors in chromatin [68], increases DNA resistance to nuclease digestion. The presence of fibroblast growth factor within the nucleus and more precisely the nucleolus, is correlated with stimulation of transcription of the ribosomal gene [86]. This growth factor also has a stimulatory effect on RNA polymerase I in isolated nuclei. Activin inhibits the synthesis of GH [93] and proopiomelanocortin [94]. In the same way, GH and

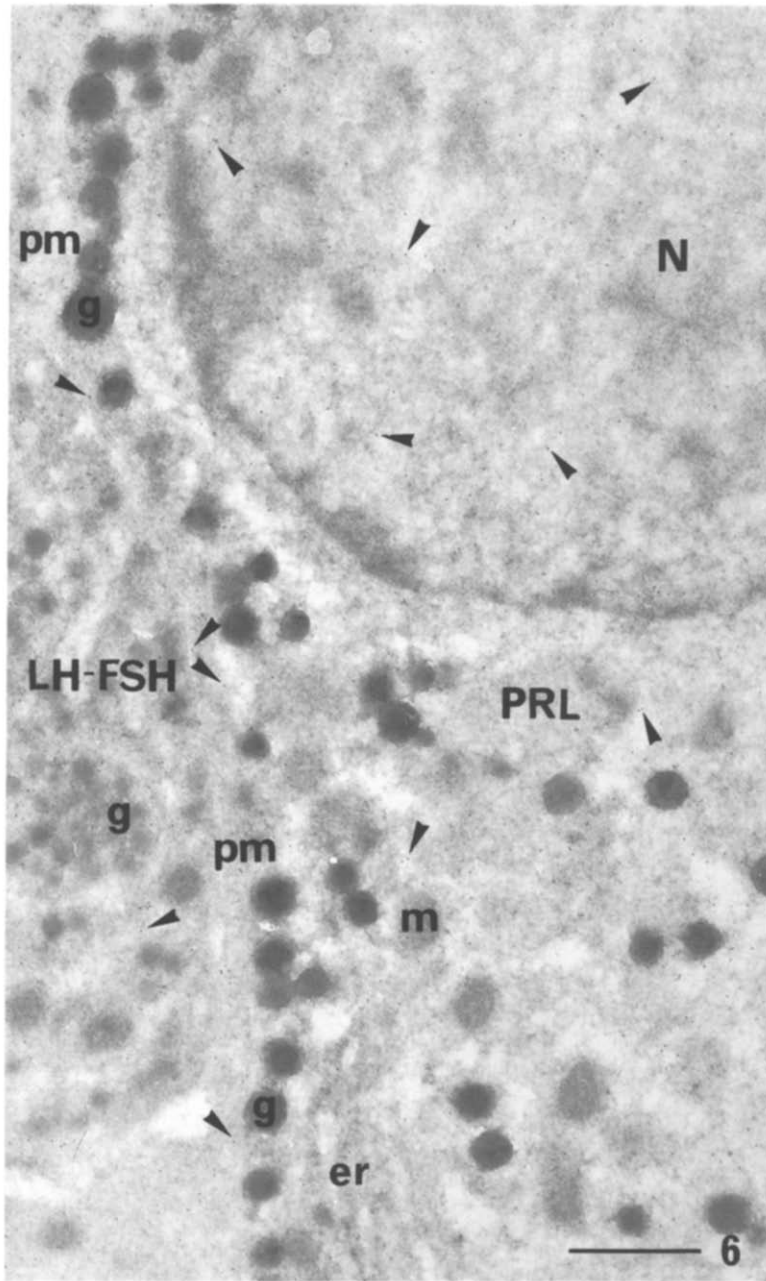


Fig. 6. Localization of PRL receptor-like immunoreactivity in lactotroph (PRL) and gonadotroph (LH-FSH). Immunoreactivity, using the colloidal gold particle method (arrowhead) on ultrathin frozen sections, is observed at the plasma membrane level (pm), in the cytoplasmic matrix and in the nucleus (N) and is occasionally associated with the nuclear membrane (nm). er, endoplasmic reticulum; m, mitochondrion. Bar = 1 μ m.

PRL are known to regulate their own receptors [95–97]. The presence of PRL receptor in the nucleus [88] could explain this phenomenon.

The nature of the signalling mechanism in question indicates that protein kinase C is a promising candidate. Protein kinase C, which is also a nuclear enzyme [98], has been demonstrated to have implications for the rapidity of the cell response and for the down-regulation [99–103] of the lymphokine

receptor family [104]. It is possible that GH acts on protein kinase C at the nuclear level to regulate transcription through a specific transacting element [83, 105]. Corticotropin-releasing hormone has been found to modulate protein kinase C in corticotrophs [106]. It has been shown, however, that only cAMP concentrations are correlated with the modulation of GH and proopiomelanocortin mRNA, in rat anterior pituitary cells in culture [107]. In addition,

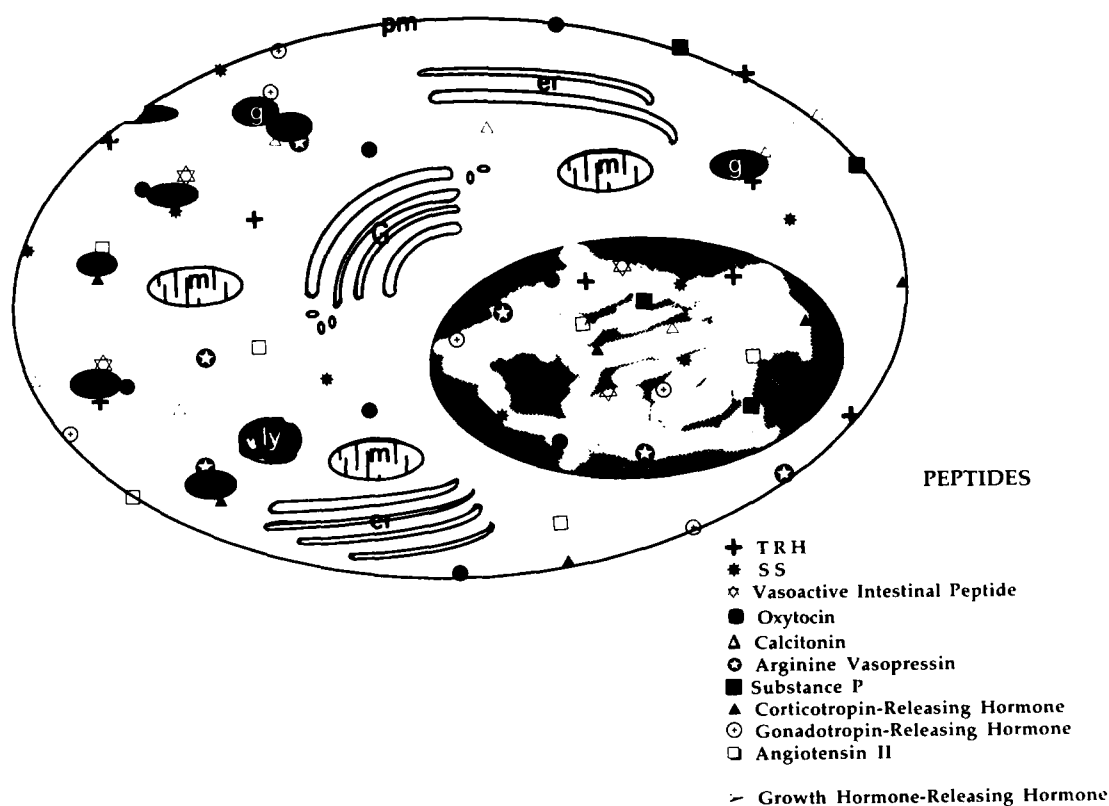


Fig. 7. Schematic localization of neuropeptide-like immunoreactivity in lactotroph. All these peptides were localised in lactotrophs, except for the GH-releasing hormone detected in somatotrophs only. pm, Plasma membrane level; g, secretory granule; ly, lysosome; er, endoplasmic reticulum; G, Golgi apparatus; m, mitochondrion; N, nucleus.

the same group has previously suggested that the possible role of cAMP in the transcriptional activity of the anterior pituitary is through phosphorylation of histone and non-histone acidic nuclear proteins [108].

Another form of nuclear action of neuropeptides can be hypothesized, through the oncogenes. Recently, Lin *et al.* [109] have demonstrated that Pit-1 expression depends on the expression of the receptor for GH-releasing hormone which mediates pituitary cell growth. GH-releasing hormone also induces *c-fos* expression in cultured primary pituitary cells [110]. In the same way, an apparent (human) hGH-induced protein kinase C activation of *c-fos* activation, but not of insulin-like growth factor gene expression has been reported in Ob1771 cells [99]. TRH also increases the levels of *c-fos* mRNA in GH3B6 pituitary tumour cells [111].

Internalization process through the plasma membrane is well documented for certain target cells, but in pituitary cells endosome structures have never been found in the visualizing of endogenous neuropeptides. However, the mode of uptake of neuropeptides into the nucleus, i.e. the way they arrive from the plasma membrane through the cytoplasm, is as yet unknown. Jiang and Schindler [112] have reported that, for the epidermal growth factor, plasma membrane-bound EGF receptor-

EGF complexes find their way to the nucleus and stimulate both nucleocytoplasmic transport and DNA synthesis.

The physiological function of these neuropeptides, which are internalized from the extracellular compartment of the pituitary cell into the nucleus, may play an intracellular communication role within the pituitary, by influencing not only pituitary hormone release but also the release (for review see Refs. 97, 113) or synthesis [16, 29, 114-121] of the peptides which are known to be present in particular pituitary cell types. However, further studies will need to be carried out in order to understand the functions of these neuropeptides in pituitary or other target tissues.

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