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## Cyclic-AMP level and eicosanoid release from alveolar macrophages are differentially affected by high and low dose of platelet activating factor

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**Abstract**—Antigen challenged alveolar macrophages (ac-AM) showed much higher basal prostaglandin  $E_2$  ( $PGE_2$ ) release (4.4-fold) and cAMP content (2.4-fold) than naive alveolar macrophages (AM). In naive AM 1 fM platelet activating factor (PAF) enhanced  $PGE_2$  release from 115 to 157 ng/ $5 \times 10^6$  cells but was inactive at 1 nM or 1  $\mu$ M. In ac-AM 1 fM PAF enhanced  $PGE_2$  release from 510 to 670 ng/ $5 \times 10^6$  cells and inhibited leukotriene  $B_4$  ( $LTB_4$ ) release (from 6.0 to 4.8 ng/ $5 \times 10^6$  cells). At a  $10^6$ -fold higher concentration PAF inhibited  $PGE_2$  release (from 510 to 400 ng/ $5 \times 10^6$  cells) and stimulated  $LTB_4$  release (from 6.0 to 8.2 ng/ $5 \times 10^6$  cells). PAF-induced increase or decrease in  $PGE_2$  release was paralleled by changes in cellular cAMP (+35 and -17%, respectively). The specific PAF-antagonist BN 52021 completely reversed all PAF-induced effects while indomethacin inhibited only PAF-induced increase in  $PGE_2$  release and cAMP leaving  $LTB_4$  release unaffected. Similarly, the lipoxygenase inhibitor AA-861 inhibited PAF-induced rise in  $LTB_4$  release leaving the enhancement in  $PGE_2$  release and cAMP content unaffected. Present data show that PAF dose-dependently affects eicosanoid production and cAMP level in alveolar macrophages.

PAF\* is released from a variety of cells known to be involved in pulmonary inflammatory reactions associated with asthma [Refs 1, 2 for review]. PAF has a wide spectrum of biological activity. It is a potent chemoattractant and releases various immuno-modulators like leukotrienes, prostaglandins [3–5] and cytokines [6–8] from different cells.

PAF induced responses are mediated via different pathways. PAF receptors are either coupled to phosphoinositide turnover,  $Ca^{2+}$  mobilization [1,9] and stimulatory and inhibitory responses on cAMP production [10]. In AM enhancement of cAMP level inhibits phagocytosis and the release of oxygen radicals and lysosomal enzymes.

In AM, PAF induced a biphasic response on cAMP generation in antigen challenged, but not naive AM which was susceptible to inhibitors of arachidonic acid metabolism [11]. To ascertain whether these responses are mediated via modulation of eicosanoid production, we determined the release of  $PGE_2$  and  $LTB_4$  from naive and ac-AM in response to various concentrations of PAF.

### Materials and Methods

**Animals and sensitization.** Male Hartley guinea pigs (300–500 g) were anaesthetized with sodium pentobarbitone (70 mg/kg, i.p.). Trachea were cannulated and bronchoalveolar lavage was performed by repeated lavages (8 mL volumes saline, total 150 mL) yielding naive cells. Ac-AM were obtained from animals previously (2 weeks) actively sensitized with ovalbumin (50 mg i.p. and i.v.).

**Isolation and preparation of alveolar macrophages.** Lavage fluids were filtered through gauze and centrifuged at 400 g for 10 min at 4°. Cells re-suspended in GBSS were centrifuged (400 g, 4°, 30 min) on Ficoll-Isopaque (Nycomed, Oslo, Norway). After three washings, cells were resuspended in GBSS ( $3 \times 10^6$ /mL). Viability tested by Trypan Blue exclusion always exceeded 95%.

**Incubation protocol.** AM ( $3 \times 10^6$ ) were incubated for 15 min at 37° in the presence of 400  $\mu$ M 3-isobutyl-1-methyl-xanthine (Janssen Chimica, Beerse, Belgium) and increasing

doses of PAF (Sigma, St Louis, MO, U.S.A.). Pre-incubation time of BN 52021 (PAF-antagonist, gift from Dr P. Braquet), indomethacin or AA-861 (selective 5-lipoxygenase inhibitor, gift from Dr S. Terao) was 5 min. After incubation (15 min, 37°) cells were centrifuged, resuspended in 150  $\mu$ L 50 mM Tris-HCl buffer (pH 7.4) and boiled for 3 min.  $LTB_4$  was assayed in freeze-dried supernatant, resuspended in 250  $\mu$ L methanol but  $PGE_2$  was assayed directly in supernatant. Samples were stored at -80° until analysis.

**Eicosanoid and cAMP assay.**  $PGE_2$  and  $LTB_4$  were assayed by ELISA (Cayman Chemical, Ann Arbor, MI, U.S.A.) with detection limits of 3 and 1 pg/mL, respectively. Intracellular cAMP was assayed by radioimmunoassay (RIA) using [ $^3$ H]cAMP (Amersham International, Amersham, U.K.) and an isolated binding protein [11].

**Statistical analysis.** Data are expressed as means  $\pm$  SEM. Statistical significance was evaluated by the unpaired Student's *t*-test. A *P*-value < 0.05 was considered significant.

### Results

**Basal levels of cAMP and eicosanoid release.** In ac-AM basal cAMP level was 2.4-fold higher than in naive macrophages (5.2 vs 2.2 pmol/ $5 \times 10^6$  AM). Basal  $PGE_2$  release from naive AM and ac-AM was, respectively, 115 and 510 ng/ $5 \times 10^6$  AM. Basal release of  $LTB_4$  from naive AM was below detection limit and amounted to 6.0 ng per  $5 \times 10^6$  ac-AM. Neither BN 52021, indomethacin nor AA-861 affected these basal levels.

**Effects of PAF on  $PGE_2$  release from naive AM.** Figure 1 shows that 1 fM PAF induced a 37% (42 ng/ $5 \times 10^6$  cells) increase in  $PGE_2$  release which was inhibited by indomethacin (panel B) but not AA-861 (panel C). At higher concentrations (1 nM and 1  $\mu$ M) PAF did not affect  $PGE_2$  release.

**Effects of PAF on eicosanoid release from ac-AM.** Figure 2A shows that exposure of ac-AM to 1 fM PAF resulted in a 23% rise in  $PGE_2$  release while 1  $\mu$ M PAF induced  $PGE_2$  release by 30%. The PAF-induced increase in  $PGE_2$  release was reversed by indomethacin but not by AA-861. In contrast, AA-861 but not indomethacin inhibited the PAF-induced reduction in  $PGE_2$  release.

Considering  $LTB_4$  release from ac-AM, quite opposite results compared to  $PGE_2$  release were obtained (Fig. 2B). At 1 fM, PAF decreased  $LTB_4$  release from ac-AM by

\* Abbreviations: AM, alveolar macrophages; PAF, platelet activating factor; ac-AM, antigen challenged alveolar macrophages; PG, prostaglandin; LT, leukotriene; GBSS, Gey's balanced salt solution.

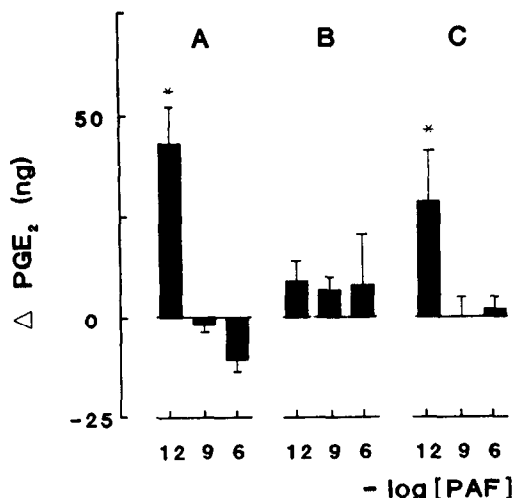


Fig. 1. Absolute change in PGE<sub>2</sub> release (ng/5 × 10<sup>6</sup> AM) from naive AM with respect to basal value (115 ng per 5 × 10<sup>6</sup> AM) by increasing doses of PAF (1 fM, 1 nM and 1 μM). (A) Vehicle; (B) in the presence of 3 μM indomethacin and (C) in the presence of 10 μM AA-861. Data are expressed as means ± SEM from three duplicate experiments. \*P < 0.05 compared to basal value.

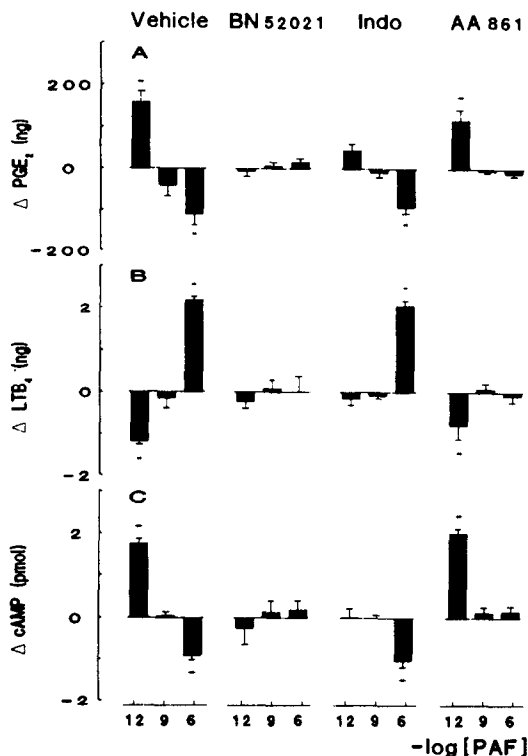


Fig. 2. Absolute change in cAMP level and PGE<sub>2</sub> and LTB<sub>4</sub> release from ac-AM with respect to basal values by increasing doses of PAF (1 fM, 1 nM and 1 μM). Values are expressed per 5 × 10<sup>6</sup> AM. Drug concentrations: BN 52021 at 10 μM; indomethacin (Indo) at 3 μM and AA-861 at 10 μM. Data are expressed as means ± SEM from nine duplicate experiments. \*P < 0.05 compared to basal value.

27%, whereas at a 10<sup>6</sup>-fold higher concentration LTB<sub>4</sub> release was increased 45%. PAF-induced decrease in LTB<sub>4</sub> release was inhibited by pretreatment of ac-AM with indomethacin but not AA-861. This is in contrast with PAF-induced increase in LTB<sub>4</sub> release which was not affected by indomethacin and could be fully blocked with AA-861. BN 52021 fully inhibited all PAF-induced changes in eicosanoid release.

Using different PAF concentrations a striking analogy (Fig. 2C) between cAMP level and PGE<sub>2</sub> release (but not LTB<sub>4</sub> release) was observed. PAF (1 fM) enhanced cAMP level (reversed by indomethacin) and 1 μM PAF reduced cAMP level (reversed by AA-861).

### Discussion

PAF-induced changes in cAMP production in AM are related and probably even result from alterations in arachidonic acid metabolism [11]. PGE<sub>2</sub> known to stimulate adenylyl cyclase may be responsible for the increased cAMP level via enhanced basal secretion of PGE<sub>2</sub> from ac-AM.

Exposure of antigen challenged AM to 1 fM of PAF enhances both release of PGE<sub>2</sub> and the content of cAMP, but diminishes LTB<sub>4</sub> release. PAF at 1 μM reduces both PGE<sub>2</sub> release and cAMP production but stimulates LTB<sub>4</sub>-secretion. Apparently at low concentration of PAF cyclooxygenase is activated considering enhanced PGE<sub>2</sub> release and its inhibition by indomethacin but not AA-861 suggesting that prostanoids like PGE<sub>2</sub> or PGI<sub>2</sub> are responsible for PAF-induced cAMP production.

The reduction in LTB<sub>4</sub> release from ac-AM by 1 fM PAF might be due to preferential metabolism of the limited pool of free arachidonic acid into prostanoids. At high concentration of PAF the reverse is observed which can be explained as follows. Phospholipase A<sub>2</sub> and lipoxygenase but not cyclooxygenase are Ca<sup>2+</sup>-dependent enzymes. Thus PAF at micromolar concentration may mobilize Ca<sup>2+</sup> [1, 9] and shunt arachidonic acid metabolism towards the lipoxygenase pathway promoting leukotriene generation (like LTB<sub>4</sub>). Consequently, the limited pool of free arachidonic acid will then be less available for prostanoid production.

In a similar way the change in LTB<sub>4</sub> and PGE<sub>2</sub> release by 1 fM PAF after pretreatment with indomethacin can be explained: indomethacin inhibits PGE<sub>2</sub> production thus promoting LTB<sub>4</sub> production. A comparable mechanism is observed in ac-AM exposed to 1 μM PAF after pretreatment with AA-861.

PAF modulates intracellular cAMP level in ac-AM but not in naive macrophages. We showed previously that adenylyl cyclase responsiveness to salbutamol and PGE<sub>2</sub> is enhanced in ac-AM, an effect probably due to an increase in number of G<sub>s</sub>-subunits [12]. Therefore, despite the modest PAF-induced increase in PGE<sub>2</sub> secretion from naive macrophages, the amount of PGE<sub>2</sub> is insufficient to substantially stimulate cAMP production. Ac-AM, however, respond to 1 fM PAF with a 4-fold higher PGE<sub>2</sub>-production (an increase of 160 vs 42 ng/5 × 10<sup>6</sup> cells). Together with improved coupling between prostanoid-receptors and adenylyl cyclase, this results in higher cellular cAMP content.

Similar biphasic responses of PAF have been observed [6, 7]. Release of TNF, IL-6 and LTB<sub>4</sub> release from rat AM was differentially stimulated by 1 fM to 1 μM PAF [7, 8]: the dose-response curve being bell-shaped with a peak effect at 0.1 fM. Others [6] showed enhanced IL-1 release by PAF 0.1 to 1 fM and inhibition at higher concentration from rat spleen adherent monocytes.

In conclusion, PAF differentially affects AM arachidonic acid metabolism: low and high concentrations promoting, respectively, PGE<sub>2</sub> and LTB<sub>4</sub> production and released prostanoids are probably responsible for subsequent cAMP production.

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Department of Pharmacology      FRED D. BEUSENBERG  
Erasmus University Rotterdam      IVÁN L. BONTA  
P.O. Box 1738      JAN G. C. VAN  
3000 DR Rotterdam      AMSTERDAM\*  
The Netherlands

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\* Corresponding author: Dr J. G. C. van Amsterdam, RIVM, P.O. Box 1, 3720 BA Bilthoven, The Netherlands. Tel. (31) 30.74.2888; FAX (31) 30.25.2417.