



Thromboxane A₂ Synthase Inhibition and Thromboxane A₂ Receptor Blockade by 2-[(4-Cyanophenyl)amino]-3-chloro-1,4-naphthalenedione (NQ-Y15) in Rat Platelets

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ABSTRACT. The effects of 2-[(4-acetylphenyl)amino]-3-chloro-1,4-naphthalenedione (NQ-Y15), a synthetic 1,4-naphthoquinone derivative, on platelet activity and its mechanism of action were investigated. NQ-Y15 caused a concentration-dependent inhibition of the aggregation induced by thrombin, collagen, arachidonic acid (AA), and A23187. The IC₅₀ values of NQ-Y15 on thrombin (0.1 U/mL)-, collagen (10 µg/mL)-, AA (50 µM)-, and A23187 (2 µM)-induced aggregation were 36.2 ± 1.5 , 6.7 ± 0.7 , 35.4 ± 1.7 , and 93.1 ± 1.4 µM, respectively. NQ-Y15 also inhibited thrombin-, collagen-, AA-, and A23187-stimulated serotonin secretion in a concentration-dependent manner. However, a high concentration (100 µM) of NQ-Y15 showed no significant inhibitory effect on ADP-induced primary aggregation, which is independent of thromboxane A₂ (TXA₂) production in rat platelets. In fura-2-loaded platelets, the elevation of intracellular free calcium concentration stimulated by AA, thrombin, and 4-bromo-A23187 was inhibited by NQ-Y15 in a concentration-dependent manner. The formation of TXA₂ caused by AA, thrombin, and collagen was inhibited significantly by NQ-Y15. NQ-Y15 inhibited TXA₂ synthase in intact rat platelets, since this agent reduced the conversion of prostaglandin (PG) H₂ to TXA₂. Similarly, NQ-Y15 selectively inhibited the TXA₂ synthase activity in human platelet microsomes, whereas it had no effect on activity of phospholipase A₂, cyclooxygenase, and PGI₂ synthase *in vitro*. NQ-Y15 inhibited platelet aggregation induced by the endoperoxide analogue U46619 in human platelets, indicating TXA₂ receptor antagonism, possibly of a competitive nature. These results suggest that the antiplatelet effect of NQ-Y15 is due to a combination of TXA₂ synthase inhibition with TXA₂ receptor blockade, and that it may be useful as an antithrombotic agent. *BIOCHEM PHARMACOL* 54;2: 259–268, 1997. © 1997 Elsevier Science Inc.

KEY WORDS. 1,4-naphthalenedione derivative; platelet; aggregation; secretion; thromboxane A₂ synthase; thromboxane A₂ receptor

Platelet–vessel wall interactions represent important factors in the development of thrombosis and atherosclerosis [1, 2]. When blood vessels are damaged, platelet aggregation occurs rapidly to form hemostatic plugs or arterial thrombi at sites of vessel injury or in regions where blood flow is disturbed. These thrombi are the source of thromboembolic complications of atherosclerosis, heart attacks, strokes, and

peripheral vascular disease. Platelet adhesion to subendothelial components, such as collagen, activates signalling pathways that lead to TXA₂ formation and secretion of platelet granule contents. Both substances cause platelet aggregation [3]. The morphological evidence that arterial thrombi are largely composed of platelet aggregates has led many investigators to postulate that platelet aggregation is a major pathogenic mechanism in arterial thrombosis [4]. Thus, inhibition of platelet function represents a promising approach for the prevention of thrombosis.

AA^{||} is a membrane-derived fatty acid that is metabolized by COX to PG endoperoxide intermediates, such as PGH₂. In platelets, endoperoxides are further metabolized to TXA₂ by TXA₂ synthase. TXA₂ is a potent inducer of platelet aggregation and a vasoconstrictor [5]. Levels of this mediator are increased in several thrombotic disorders [6]. Therefore, agents that inhibit the formation or the action

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^{||} Abbreviations: A23187, 6S-(6 α ,8 β ,9 β ,11 α)-5-(methylamino)-2-((3,9,11-trimethyl-8-(1-methyl-2-oxo-2-(1H-pyrrrol-2-yl)ethyl)-1,7-dioxaspiro(5,5)undec-2-yl)methyl)-4-benzooxazocarboxylic acid; AA, arachidonic acid; [Ca²⁺]_i, intracellular free calcium concentration; COX, cyclooxygenase; 15-HPETE, 15(S)-hydroperoxyeicosa-5Z,8Z,11Z,13E-tetraenoic acid; NQ-Y15, 2-[(4-cyanophenyl)amino]-3-chloro-1,4-naphthalenedione; PG, prostaglandin; PL, phospholipase; RIA, radioimmunoassay; TX, thromboxane; and U46619, 9,11-dioxy-9 α ,11 α -epoxymethanoprostaglandin H₂.

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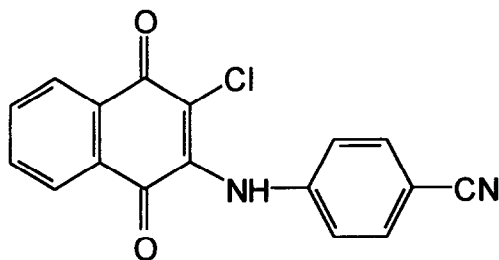


FIG. 1. Chemical structure of NQ-Y15.

of TXA₂ would be potentially useful in the treatment of thrombotic disorders.

In spite of the inhibitory effect of aspirin on platelet COX, the simultaneous inhibition of endothelial COX limits its antithrombotic activity, since it would also inhibit the endothelial production of PGI₂, a powerful antiaggregatory and vasodilatory substance [7].

TXA₂ synthase inhibitors, in addition to selective suppression of TXA₂ formation, cause a redirection of PG endoperoxide metabolism toward antiaggregatory PGs, such as PGD₂ and PGI₂ [8]. However, a limit to this class of drugs is represented by the fact that PGH₂, which accumulates after TXA₂ synthase inhibition, is itself a potent platelet stimulus [8, 9]. Thus, it has been suggested that the combination of TXA₂ synthase inhibitors with TXA₂/PGH₂ receptor antagonists, which block the action of both TXA₂ and PGH₂, may provide an antiplatelet regimen superior to those previously available [10–12]. Drugs such as picotamide [13] and ridogrel (R68070) [14], which combine TXA₂ synthase-inhibitory and TXA₂ receptor-blocking activities in a single molecule, have been described. It was reported that these dual TXA₂ synthase inhibitors/receptor antagonists have inhibitory effects on platelets *in vitro* [13–16] and clinical efficacy in patients with thrombotic disorders [17–22].

In this paper, we found NQ-Y15 (Fig. 1), a synthetic 1,4-naphthoquinone derivative, to possess antiplatelet activity *in vitro* and further investigated that the antiplatelet effect of this compound is due to the combination of TXA₂ synthase inhibition with TXA₂/PGH₂ receptor blockade in a single molecule.

MATERIALS AND METHODS

Materials

NQ-Y15 was synthesized and characterized as described previously [23]. It was dissolved in DMSO so that the final DMSO concentration in reaction mixtures never exceeded 0.5% (v/v). 5-Hydroxy[¹⁴C]tryptamine creatinine sulfate (57 mCi/mmol), 1-acyl-2-[1-¹⁴C]arachidonyl-GPE (where GPE is *sn*-glycero-3-phosphoethanolamine) (55 mCi/mmol), and a TXB₂ RIA kit were obtained from Amersham (Little Chalfont, Buckinghamshire, England). Thrombin, AA, A23187, 4-bromo-A23187, U46619, BSA, indomethacin, imidazole, acetylsalicylic acid (aspirin), DMSO, EDTA, EGTA, and fura 2/AM were purchased from the

Sigma Chemical Co. (St. Louis, MO, U.S.A.). Collagen and ADP were obtained from the Chrono-Log Co. (Havertown, PA, U.S.A.). PGH₂ was purchased from the Cayman Chemical Co. (Ann Arbor, MI, U.S.A.) and benzyl-imidazole from the Aldrich Chemical Co. (Milwaukee, WI, U.S.A.). A TXA₂ synthase assay kit and a PGI₂ synthase assay kit were purchased from Biomol (Plymouth Meeting, PA, U.S.A.). All other reagents were of analytical grade.

Preparation of Platelets

Rat blood was prepared from Sprague–Dawley female rats (Laboratory Animal Center, Seoul National University, Seoul, Korea) weighing 200–250 g. Rats were anesthetized with ethyl ether, and blood anticoagulated with sodium citrate (3.8%; 1:9, v/v) was collected from the abdominal aorta. Human blood, obtained from healthy human volunteers, was purchased from the National Red Cross Blood Center (Seoul, Korea). The blood (320 mL) was anticoagulated with 44.8 mL of CPD solution (0.327 g citrate, 2.63 g sodium citrate, 0.222 g NaH₂PO₄, 2.90 g dextrose, and 0.0275 g adenine dissolved in 100 mL distilled water; Green Cross Pharmaceutical Co., Seoul, Korea). Rat or human blood was centrifuged at 120 g for 15 min. The supernatants were pooled and centrifuged at 600 g for 15 min at room temperature. The platelet pellets were washed with modified Tyrode-HEPES buffer (129 mM NaCl, 2.8 mM KCl, 8.9 mM NaHCO₃, 0.8 mM MgCl₂, 0.8 mM KH₂PO₄, 2 mM EGTA, 5.6 mM glucose, 10 mM HEPES, 0.35% BSA, pH 7.4) and centrifuged at 600 g for 15 min. This washing procedure was repeated twice, and then platelets were gently resuspended in Tyrode-HEPES buffer (129 mM NaCl, 2.8 mM KCl, 8.9 mM NaHCO₃, 0.8 mM MgCl₂, 0.8 mM KH₂PO₄, 1 mM CaCl₂, 5.6 mM glucose, 10 mM HEPES, 0.35% BSA, pH 7.4). Platelet counts were determined using a ZM Coulter Counter (Coulter Electronics, Hialeah, FL, U.S.A.).

Platelet Aggregation and Serotonin Secretion Assay

Platelet aggregation studies were performed using the turbidimetric method described by Mustard *et al.* [24]. Aggregation was measured by a Lumi-aggregometer (model 450, Chrono-Log Co.) connected to a recorder. To investigate the antagonism of NQ-Y15 on U46619-induced aggregation of human platelets, concentration-response relationships were determined in the absence and in the presence of a range of concentrations of NQ-Y15; for these experiments, indomethacin-treated human washed platelets (50 μM indomethacin for 3 min) were used to prevent any possible contribution of endogenous AA metabolites to platelet aggregation. The secretion of platelet contents from dense granules was measured using [¹⁴C]serotonin-incorporated platelets [25]. Washed platelets (8 × 10⁸/mL) were incubated with [¹⁴C]serotonin (0.2 μCi/mL) for 30 min at 37°, washed twice more, and then resuspended in modified Tyrode's solution, pH 7.4, including imipramine

(2 μ M) to prevent reuptake of [¹⁴C]serotonin. Platelets were incubated with NQ-Y15 or vehicle at 37° for 8 min. To determine [¹⁴C]serotonin secretion from the platelets, sub-aliquots (450 μ L) were withdrawn 6 min after the addition of the agonist and placed in ice-cooled tubes that contained 90 μ L of 630 mM formaldehyde and 50 mM EDTA. The secretion of [¹⁴C]serotonin from platelets was determined by centrifuging the samples at 12,000 g for 2 min in an Eppendorf centrifuge (model 5413) and assaying a 100- μ L aliquot of the supernatant by liquid-scintillation counting. Percent [¹⁴C]serotonin secretion was determined as described by Holmsen *et al.* [26].

TXB₂ Assay

In the preliminary experiments, TXB₂ production was plateaued above 10 μ M AA and 1.0 U/mL of thrombin and was elevated significantly by 10 μ g/mL of collagen. Thus, platelets were stimulated with the indicated concentrations of AA, thrombin, and collagen. EDTA (2 mM) and indomethacin (50 μ M) were added to a platelet suspension 6 min after the addition of the agonist. TXB₂, a stable metabolite of TXA₂, in the supernatants was obtained after centrifugation at 12,000 g in an Eppendorf centrifuge for 2 min and assayed by RIA.

Determination of Intracellular Calcium in Platelets

[Ca²⁺]_i was determined with fura-2-loaded platelets using the method described by Pollock and Rink [27]. Briefly, platelets (8 \times 10⁸/mL) were incubated with fura-2/AM (3 μ M) for 45 min at 37° and then centrifuged for 15 min at 800 g; the resultant pellet was washed with EDTA (1 mM)-containing Tyrode-HEPES buffer. After centrifugation, platelets were resuspended gently at a concentration of 2 \times 10⁸/mL in Tyrode-HEPES buffer containing 1 mM CaCl₂ and were used within 1 hr. Fluorescence was measured at the emission wavelength of 505 nm with the excitation wavelength switched continuously between 340 and 380 nm using a Shimadzu RF-5000 spectrofluorimeter (Shimadzu Co., Kyoto, Japan). Fluorescence was measured at 37° in a thermostatically controlled, magnetically stirred cuvette. The ratio of the fluorescence intensities at the two excitation wavelengths was used to determine [Ca²⁺]_i [28]. [Ca²⁺]_i was calibrated by lysing the cells with 0.1% (v/v) Triton X-100 in the presence of 1 mM CaCl₂ or 10 mM EGTA (pH 9.0).

Assay of PLA₂ Activity

Purified pig spleen cytosolic PLA₂ was provided by Dr. D. K. Kim (College of Pharmacy, Chung Ang University, Seoul, Korea). This enzyme was prepared and purified as described previously [29]. PLA₂ activity was assayed using sonicated liposomes, prepared as described by Kim *et al.* [30]. The standard PLA₂ assay buffer (200 μ L) contained 75 mM Tris-HCl (pH 9.0), 5 mM CaCl₂, 1 mg/mL fatty

acid free BSA, 0.47 nmol of 1-acyl-2-[1-¹⁴C]AA-GPE (approximately 55,000 dpm). After preincubating the test compounds with PLA₂ at 37° for 10 min, the reaction was allowed to continue for 30 min. Then the reaction was terminated by adding 1.25 mL of Dole's reagent (78% propan-2-ol, 20% *n*-heptane, and 2% 2 M aqueous H₂SO₄), and the liberated [¹⁴C]AA was extracted as follows: 0.55 mL of water was added and the sample was vortexed and then centrifuged at 1200 g for 5 min. Then 0.75 mL of the upper phase was transferred to a new tube that contained 100 mg of silica gel and 0.75 mL of *n*-heptane. The sample was vortex-mixed and centrifuged for an additional 5 min each, after which 1.4 mL of supernatant was removed for scintillation counting.

Assay of COX Activity

Microsomes prepared from bovine seminal vesicles were used to assay for COX activity as described by Van Der Ouderaa *et al.* [31]. The COX assay was performed at 37° by monitoring oxygen consumption using an O₂ electrode (Yellow Springs Instrument Co., Yellow Springs, OH, U.S.A.). Reactions were initiated by the addition of microsomes (75 μ g/mL) to a reaction mixture that was composed of 1 mL of 0.2 M sodium phosphate buffer, pH 7.4, 10 μ M hemin, 160 μ g hydroquinone, 300 μ g AA, and 20 μ L of either NQ-Y15 or indomethacin.

Assay of TXA₂ Synthase Activity in Intact Platelets

Aliquots of PGH₂, in anhydrous acetone, were pipetted into glass tubes. The acetone was evaporated under a gentle stream of nitrogen, and PGH₂ was redissolved immediately in ethanol. Platelet suspensions were incubated with the test compounds at 37° for 8 min prior to the addition of 2 μ g/mL PGH₂. The final concentration of ethanol was 0.1% (v/v). At 7 min after the addition of PGH₂, the incubations were terminated by cooling and centrifugation at 12,000 g for 1 min at 4°. TXB₂ in the supernatants was determined by RIA. TXA₂ synthase activity is reflected by the production of TXB₂.

Assay of TXA₂ Synthase Activity Using Human Platelet Microsomes

The effect of NQ-Y15 on TXA₂ synthase activity was determined using a TXA₂ synthase assay kit. In brief, human microsomal solutions (0.2 mg/mL, 200 μ L) were incubated with DMSO (0.1%, v/v), imidazole (0.5 mmol/20 μ L), or various concentrations of NQ-Y15 (20 μ L) at 25° for 8 min with shaking. Following this, PGH₂ (20 ng/4 μ L) was added, and the mixture was incubated for an additional 3 min. FeCl₂ (25 mM, 20 μ L) was then added to terminate the reaction, and the reaction mixture was allowed to stand at room temperature for 15 min. After centrifugation at 3000 g for 10 min at 4°, TXB₂ in the

supernatant was assayed by RIA. TXA_2 synthase activity is reflected by the production of TXB_2 .

Assay of PGI_2 Synthase Activity

The effect of NQ-Y15 on PGI_2 synthase activity was determined using a PGI_2 synthase assay kit. In brief, bovine aortic microsomes (0.14 mg/mL, 200 μL) were incubated with DMSO (0.1%, v/v), 15-HPETE (80 ng/2 μL), or various concentrations of NQ-Y15 (10 μL) at 25° for 8 min with shaking. Following this, PGH_2 (20 ng/4 μL) was added, and the mixture was incubated for an additional 3 min. Then FeCl_2 (25 mM, 20 μL) was added to terminate the reaction, and the reaction mixture was allowed to stand at room temperature for 15 min. After centrifugation at 3000 g for 10 min at 4°, 6-keto- $\text{PGF}_{1\alpha}$ in the supernatant was assayed by RIA. PGI_2 synthase activity is reflected by the production of 6-keto- $\text{PGF}_{1\alpha}$.

Protein Content

For each experiment, the protein content was determined using a Bio-Rad protein[®] assay (Bio-Rad Laboratories, Hercules, CA, U.S.A.).

Statistical Analysis

Results are expressed as means \pm SEM. Statistical significance ($P < 0.05$ or $P < 0.01$) was assessed using Student's *t*-test.

RESULTS

Effects of NQ-Y15 on the Aggregation and Serotonin Secretion of Washed Rat Platelets

Thrombin (0.1 U/mL), collagen (10 $\mu\text{g/mL}$), AA (50 μM), A23187 (2 μM), and ADP (15 μM) caused 75–90% aggregation of washed rat platelets. NQ-Y15 caused a concentration-dependent inhibition of the aggregation induced by thrombin, collagen, AA, and A23187. However, a high concentration (100 μM) of NQ-Y15 did not show a significant inhibitory effect on ADP-induced primary aggregation. The IC_{50} values of NQ-Y15 on thrombin-, collagen-, AA-, and A23187-induced aggregation were 36.2 ± 1.5 , 6.7 ± 0.7 , 35.4 ± 1.7 , and 93.1 ± 1.4 μM , respectively (Fig. 2). NQ-Y15 also inhibited thrombin-, collagen-, AA-, and A23187-stimulated serotonin secretion in a concentration-dependent manner (Fig. 3).

Aspirin (100 μM), indomethacin (20 μM), or imidazole (1 mM) did not cause any significant alteration of ADP-induced primary aggregation. When a concentration of 1 mM was used, imidazole had no effect on AA- and collagen-induced aggregation. Aspirin (100 μM) significantly inhibited AA- and collagen-induced aggregation (61.8 and 43.6% inhibition, $N = 4$, respectively).

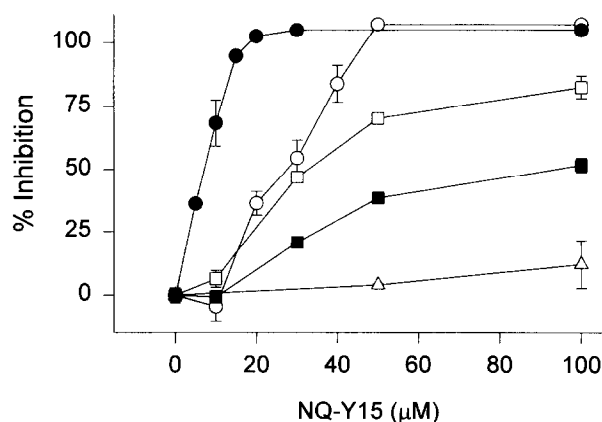


FIG. 2. Effects of NQ-Y15 on the thrombin-, collagen-, AA-, A23187-, or ADP-induced aggregation of washed platelets. Platelets were incubated with NQ-Y15 or vehicle at 37° for 8 min; thrombin (0.1 U/mL, ○), collagen (10 $\mu\text{g/mL}$, ●), AA (50 μM , □), A23187 (2 μM , ■), or ADP (15 μM , △) was then added to trigger aggregation. The peak level of aggregation was measured 6 min after the addition of stimulator. Percent inhibitions produced by NQ-Y15 were calculated from the reduction of the maximal level of the aggregation tracings in relation to the values obtained in the absence of NQ-Y15. The maximal levels of aggregation were 105–126 mm on the recorded paper. Each data point is expressed as the mean \pm SEM ($N = 4$).

Effects of NQ-Y15 on Platelet TXB_2 Formation

The TXB_2 level of resting platelets was less than $0.5 \text{ ng}/3 \times 10^8$ platelets. AA (10 μM), thrombin (1.0 U/mL), and collagen (10 $\mu\text{g/mL}$) caused a significant elevation of TXB_2 formation. NQ-Y15 significantly inhibited AA-, thrombin-, and collagen-induced TXB_2 formation. Aspirin (100 μM) and imidazole (1 mM) significantly inhibited AA-induced TXB_2 formation although they did not suppress it completely (Table 1). At the concentrations used, it

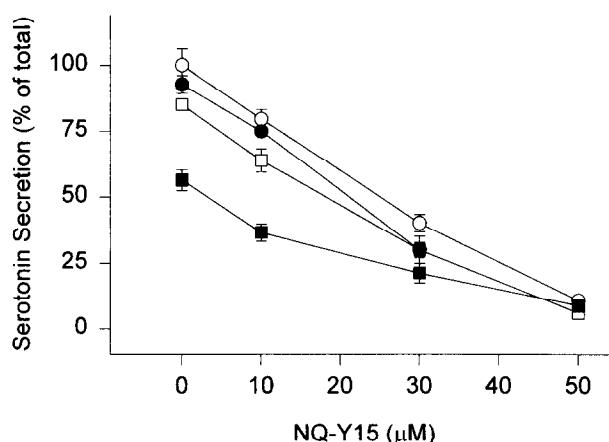


FIG. 3. Effects of NQ-Y15 on serotonin secretion induced by thrombin, collagen, AA, or A23187. Washed platelets were labeled with [^{14}C]serotonin and incubated with NQ-Y15 for 8 min prior to the addition of thrombin (0.1 U/mL, ○), collagen (10 $\mu\text{g/mL}$, ●), AA (50 μM , □), or A23187 (2 μM , ■). Serotonin secretion was terminated 6 min after the addition of stimulator. The mean value of total radioactivity of [^{14}C]serotonin was 4469 cpm. Each data point is expressed as the mean \pm SEM ($N = 6$).

TABLE 1. Effects of NQ-Y15 on thromboxane B₂ formation in washed rat platelets caused by AA, thrombin, and collagen

	Thromboxane B ₂ (ng/3 × 10 ⁸ platelets)		
	Arachidonic acid (10 μM)	Thrombin (1.0 U/mL)	Collagen (10 μg/mL)
Control	65.94 ± 6.24	174.34 ± 28.26	98.44 ± 11.52
NQ-Y15, 10 μM	73.55 ± 13.11	104.31 ± 6.85*	78.33 ± 11.85
30 μM	55.30 ± 4.97	95.57 ± 11.83*	15.30 ± 2.84†
50 μM	34.52 ± 3.90†	73.78 ± 3.33†	8.50 ± 1.81†
Aspirin, 100 μM	36.76 ± 3.57†		
Imidazole, 1 mM	38.16 ± 8.52†		

DMSO (0.1%, control), imidazole, or NQ-Y15 was preincubated with platelets at 37° for 8 min, while aspirin was preincubated for 30 min; then the inducer was added. TXB₂ formation was terminated by EDTA (2 mM) and indomethacin (50 μM) 6 min after the addition of inducer. Values are means ± SEM (N = 6).

*,† Significantly different from the control: *P < 0.05, and †P < 0.01.

appeared that aspirin and imidazole did not inhibit the activity of COX and TXA₂ synthase completely in rat platelets. Similar results were observed in other studies [32, 33].

Effects of NQ-Y15 on [Ca²⁺]_i Elevation of Platelets

In fura-2-loaded platelets, AA (50 μM) and 4-bromo-A23187 (2 μM), a nonfluorescent Ca²⁺ ionophore, caused a rapid rise in [Ca²⁺]_i of platelets. Since 0.1 U/mL of thrombin did not produce an easily measurable increase of [Ca²⁺]_i 1 min after stimulation, 0.3 U/mL of thrombin had to be used. Pretreatment of platelets with NQ-Y15 (30 μM) for 8 min prior to the addition of stimulators markedly inhibited the rise in [Ca²⁺]_i (Fig. 4).

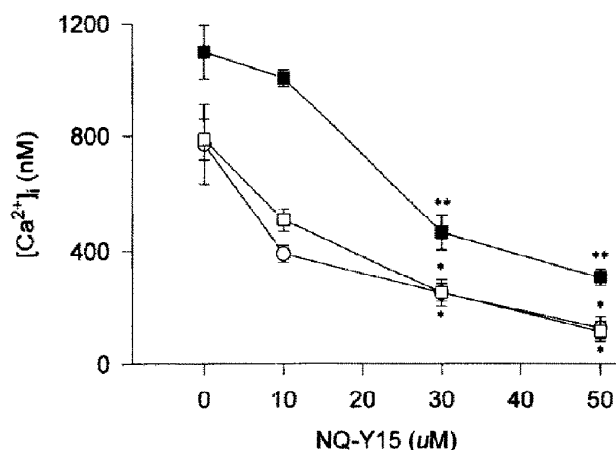


FIG. 4. Effects of NQ-Y15 on the increase of [Ca²⁺]_i induced by AA, thrombin, or 4-bromo-A23187 in fura-2-loaded platelets. Fura-2-loaded platelets were suspended in a buffer containing 1 mM CaCl₂, and the change in [Ca²⁺]_i was monitored continuously. Platelets were preincubated with DMSO (0.1%) or NQ-Y15 at 37° for 8 min; then AA (50 μM, □), thrombin (0.3 U/mL, ○), or 4-bromo-A23187 (2 μM, ▴) was added. The value of [Ca²⁺]_i was calculated at 1 min after the addition of stimulator. Each data point is expressed as the mean ± SEM (N = 4). Key: (*) P < 0.05, and (**) P < 0.01 as compared with the control.

Effect of NQ-Y15 on PLA₂ Activity

The effect of NQ-Y15 on PLA₂ activity, a rate-limiting step of TXA₂ production, was examined in purified 100 kDa cytosolic PLA₂ from pig spleen. *p*-Bromophenacylbromide, a direct inhibitor of PLA₂ through covalent binding, inhibited the hydrolysis of 2-[¹⁴C]AA-GPE, by approximately 62% at 50 μM (Table 2). However, NQ-Y15 had no effect on PLA₂ activity at the concentration at which it inhibited TXB₂ formation in stimulated platelets.

Effects of NQ-Y15 on COX Activity

COX activity was measured by monitoring oxygen consumption. After incubation of bovine vesicular gland microsomes with AA (75 μg) at 37° for 3 min, the maximal activities in the absence of inhibitor (100%) for COX was 36 μmol O₂/min/mg protein. Indomethacin (8.3 μM) significantly inhibited this oxygen consumption. However, NQ-Y15 had no effect on COX activity (Table 3).

TABLE 2. Effect of NQ-Y15 on the activity of 100 kDa PLA₂ from porcine spleen

	PLA ₂ activity (% of control)
Control	100.0 ± 3.1
NQ-Y15, 10 μM	111.1 ± 3.0
30 μM	108.8 ± 1.4
50 μM	105.6 ± 0.7
<i>p</i> -Bromophenacylbromide, 50 μM	31.3 ± 2.3*

DMSO (0.1%, control), NQ-Y15, and *p*-bromophenacylbromide were tested for their ability to affect PLA₂ activity. The standard assay buffer (200 μL) contained 75 mM Tris-HCl (pH 9.0), 5 mM CaCl₂, 1 mg/mL BSA, 0.72 nmol of 1-acyl-2-[¹⁴C]AA-GPE, 20 μg of pig spleen PLA₂, and 4 μL of NQ-Y15 or *p*-bromophenacylbromide. After preincubating the test compounds with PLA₂ at 37° for 10 min, the reaction was allowed to continue for 30 min. The reaction was terminated by adding 1.25 mL of Dole's reagent. The liberated [¹⁴C]AA was extracted and measured as described in Materials and Methods. The control activity in the experiment was 0.656 nmol/min/mg protein. Values are means ± SEM (N = 4).

* P < 0.01, as compared with control.

TABLE 3. Effect of NQ-Y15 on COX activity

	COX activity (% of control)
Control	100.0 ± 5.2
NQ-Y15, 10 μM	100.9 ± 3.5
30 μM	115.4 ± 16.2
50 μM	106.0 ± 17.5
100 μM	106.4 ± 7.8
Indomethacin, 8.3 μM	50.4 ± 8.1*

Microsomes, prepared from bovine seminal vesicles, were used to assay for COX activity. The COX assay was performed at 37° by monitoring oxygen consumption, using an O₂ electrode. Reactions were initiated by the addition of enzyme (75 μg/mL) to a reaction mixture that was composed of 1 mL of 0.2 M sodium phosphate buffer, pH 7.4, 10 μM hemin, 160 μg of hydroquinone, 300 μg of AA, and 20 μL of either NQ-Y15 or indomethacin. The maximal activity in the absence of inhibitor (100%) for COX was 36 μmol of O₂/min/mg protein. Values are means ± SEM (N = 4).

* $P < 0.01$, as compared with control (DMSO, 0.1%).

Effect of NQ-Y15 on TXA₂ Synthase Activity

The conversion of AA to TXA₂ in platelets requires the action of two enzymes, COX and TXA₂ synthase. TXA₂ synthase catalyzes the conversion of PGH₂ to TXA₂ in platelets. By utilizing PGH₂, it is possible to circumvent the COX step during AA metabolism. The addition of increasing concentrations of PGH₂ to washed rat platelet suspensions produced a concentration-dependent increase of TXB₂ (data not shown). Thus, washed rat platelet suspensions containing PGH₂ are adequate for the direct evaluation of the TXA₂ synthase inhibitor. In washed rat platelet suspensions, the level of TXB₂ in unstimulated platelets was 0.695 ± 0.03 ng/ 3×10^8 platelets. After incubation of washed platelet suspensions with PGH₂ (2 μg/mL) at 37° for 7 min, TXB₂ formation was 68.47 ± 0.61 ng/ 3×10^8 platelets. Both NQ-Y15 and benzyimidazole, a typical TXA₂ synthase inhibitor, significantly inhibited the conversion of PGH₂ into TXB₂ in washed platelets (Fig. 5). To determine if NQ-Y15 is capable of directly inhibiting TXA₂ synthase, its activity was assayed using a TXA₂ synthase assay kit. When human platelet microsomes were incubated with PGH₂, the specific TXA₂ synthase activity was calculated to be 47.03 ± 2.14 ng of TXB₂/min/mg protein. The conversion of PGH₂ to TXA₂ by human platelet microsomes was inhibited by imidazole. Preincubation of microsomes with NQ-Y15 significantly diminished the yield of TXA₂ in a concentration-dependent manner (Fig. 6).

Effect of NQ-Y15 on PGI₂ Synthase Activity

To determine if NQ-Y15 selectively inhibited TXA₂ synthase activity, PGI₂ synthase activity was assayed using a PGI₂ synthase assay kit. When bovine aortic microsomes were incubated with PGH₂, the specific PGI₂ synthase activity was calculated to be 61.71 ± 2.55 ng of 6-keto-PGF_{1α}/min/mg protein. The conversion of PGH₂ to PGI₂ by bovine aortic microsomes was inhibited by 15-HPETE, an inhibitor of PGI₂ synthase. However, NQ-Y15 showed no influence on PGI₂ synthase activity (Table 4).

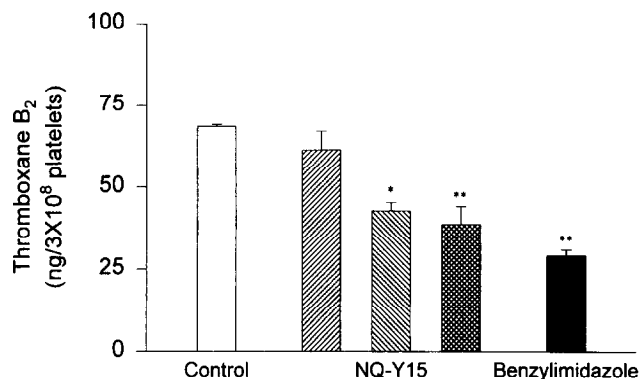


FIG. 5. Inhibitory effect of NQ-Y15 on thromboxane synthase activity in intact platelets. Platelet suspensions containing DMSO (0.1%, □), NQ-Y15 (10 μM, ▨; 30 μM, ▩; 50 μM, ▪), or benzyimidazole (1 mM, ■) were incubated at 37° for 8 min, and then 2 μg/mL of PGH₂ was added. At 7 min after the addition of PGH₂, the incubations were terminated by cooling and centrifugation at 12,000 g for 1 min at 4°. TXB₂ in the supernatants was determined by radioimmunoassay. Thromboxane synthase activity is reflected by the production of TXB₂, which is presented as means ± SEM (N = 6). Key: (*) $P < 0.05$, and (**) $P < 0.01$ as compared with the control.

Effects of NQ-Y15 on the Aggregation in Human Washed Platelets Induced by U46619

U46619, a stable TXA₂ mimetic, did not induce aggregation of rat platelets even at 10 μM. However, when U46619 (0.1 μM) was added to rat platelets that had been stimulated previously with collagen (40 μg/mL) in the presence of indomethacin (50 μM), aggregation was in-

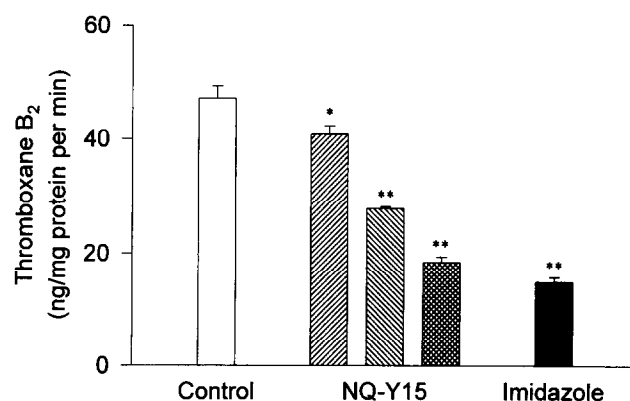


FIG. 6. Inhibitory effect of NQ-Y15 on thromboxane synthase activity in human platelet microsomes. Human microsomal solutions (0.2 mg/mL, 200 μL) were incubated with DMSO (0.1%, □), NQ-Y15 (10 μM, ▨; 30 μM, ▩; 50 μM, ▪), or imidazole (0.5 mmol/20 μL, ■) at 25° for 8 min with shaking. Following this, PGH₂ (20 ng/4 μL) was added and the mixture was incubated for an additional 3 min. Then FeCl₂ (25 mM, 20 μL) was added to terminate the reaction, and the reaction mixture was allowed to stand at room temperature for 15 min. After centrifugation at 3000 g for 10 min at 4°, TXB₂ in the supernatant was assayed by radioimmunoassay. TXA₂ synthase activity is reflected by TXB₂ production (ng/mg protein per min), which is presented as means ± SEM (N = 6). Key: (*) $P < 0.05$, and (**) $P < 0.01$ as compared with the vehicle control.

TABLE 4. Effect of NQ-Y15 on PGI₂ synthase activity in bovine aortic microsomes

	PGI ₂ synthase activity (% of control)
Control	100.0 ± 7.8
NQ-Y15, 30 μM	95.8 ± 3.9
50 μM	100.4 ± 4.1
100 μM	106.4 ± 4.4
15-HPETE, 1.15 μM	47.3 ± 4.0*

Bovine aortic microsomes (0.14 mg/mL, 200 μL), were incubated with DMSO (0.1%, v/v), 15-HPETE (80 ng/2 μL), or various concentrations of NQ-Y15 (10 μL) at 25° for 8 min with shaking. Following this, PGH₂ (20 ng/4 μL) was added, and the mixture was incubated for an additional 3 min. FeCl₂ (25 mM, 20 μL) was then added to terminate the reaction, and the reaction mixture was allowed to stand at room temperature for 15 min. After centrifugation at 3000 g for 10 min at 4°, 6-keto-PGF_{1α} in the supernatant was assayed by RIA. PGI₂ synthase activity is reflected by the production of 6-keto-PGF_{1α}. The maximal activity in the absence of inhibitor (100%) for PGI₂ synthase was 61.71 ± 2.55 ng of 6-keto-PGF_{1α}/min/mg protein. Values are means ± SEM (N = 6).

* $P < 0.01$, as compared with control (DMSO, 0.1%).

duced about 1 min after the occurrence of shape change (data not shown). A similar response was observed by Hanasaki *et al.* [34]. Since rat platelets were not proper to study the direct effect on U46619-induced aggregation, we carried out this experiment using human washed platelets. When preincubated for 8 min with human washed platelets, NQ-Y15 reduced, in a concentration-dependent manner, platelet aggregation elicited by various concentrations of U46619 under COX blockade with indomethacin. At concentrations between 10 and 50 μM, NQ-Y15 produced a shift to the right of the concentration–effect curve of U46619, suggesting a competitive type of antagonism. Similarly, the IC₅₀ values of NQ-Y15 for inhibition of the maximal extent of platelet aggregation induced by U46619 increased with augmenting concentrations of agonist (Fig. 7).

DISCUSSION

The present study shows that NQ-Y15 functions as an inhibitor of platelet aggregation and serotonin secretion induced by a variety of inducers. Its mechanisms of action appear to involve the combination of TXA₂ synthase inhibition with TXA₂/PGH₂ receptor blockade in a single molecule.

In the present study, NQ-Y15 was found to be an effective inhibitor against thrombin-, collagen-, and A23187-induced platelet aggregation and serotonin secretion (Figs. 2 and 3). However, a high concentration (100 μM) of NQ-Y15 failed to inhibit ADP-induced aggregation significantly (Fig. 2). In rat platelets, ADP induces only primary aggregation, which is independent of the production of TXA₂ [35, 36]. We observed that the primary aggregation induced by ADP was not inhibited by indomethacin or imidazole in rat platelets (data not shown). In addition, the formation of TXA₂ caused by thrombin and collagen was inhibited significantly by NQ-Y15 (Table 1)

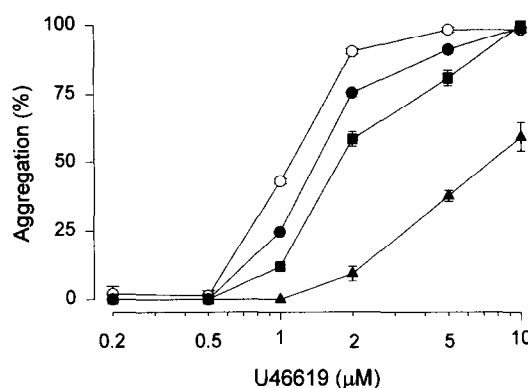


FIG. 7. Effects of NQ-Y15 on the aggregation in human platelets induced by U46619. Indomethacin-treated human washed platelets (50 μM indomethacin for 3 min) were used to prevent any possible contribution of endogenous AA metabolites to platelet aggregation. Human washed platelets were incubated with NQ-Y15 (10 μM, ●; 30 μM, ■; 50 μM, ▲) or DMSO (0.1%, ○) at 37° for 8 min; then U46619 was added to trigger aggregation. The peak level of aggregation was measured 6 min after the addition of stimulator. The percent aggregation was calculated assuming the maximal value of the control (absence of inhibitor) produced by U46619 (10 μM) to be 100%. The maximal level of aggregation was 69 mm. Each data point is expressed as the mean ± SEM (N = 4).

at concentrations that inhibit platelet aggregation and serotonin secretion. These results suggest that the anti-platelet effect of NQ-Y15 is due, in part, to the inhibition of TXA₂ formation and/or action. TXA₂ is a powerful platelet agonist, and its formation by stimulated platelets represents an important amplifying signal for platelet activation [37]. TXA₂ exerts its effects on platelets by binding to a specific receptor [38] and causing PLC activation, an increase in [Ca²⁺]_i, and protein kinase C activation [39, 40].

It is well known that TXA₂ is produced from AA that is cleaved from the *sn*-2-position of phospholipids through the action of PLA₂ in stimulated platelets. In numerous previous studies, it has been shown that platelet aggregation is inhibited by a variety of PLA₂ inhibitors [41–43]. Since the intracellular concentration of free AA is low, the release of AA is thought to be the rate-limiting step in the formation of PGs and the other eicosanoids, including TXA₂ in platelets [44]. Blood platelets contain both secretory PLA₂ and cytosolic PLA₂ [45], which are distinctly different enzymes, having molecular masses of 14 and 85 kDa, respectively. The characteristics of cytosolic PLA₂ [30, 46, 47], such as a requirement for micromolar concentrations of Ca²⁺ for activity, a cytosolic localization, and a specificity for phospholipids containing AA in the *sn*-2 position, are compatible with a role in AA liberation. On the other hand, secretory PLA₂ appears not to be involved in AA liberation during platelet activation [45]. Thus, we examined the effects of NQ-Y15 on PLA₂ activity using purified 100 kDa cytosolic PLA₂ from pig spleen. The cytosolic PLA₂ enzymes from pig spleen are biochemically and immunochemically indistinguishable from those of bovine platelets by a number of criteria [29]. NQ-Y15 had

no effect on PLA₂ activity in the range of concentrations that inhibited the TXA₂ production of stimulated platelets (Table 2). We also found that NQ-Y15 inhibited, in a concentration-dependent manner, platelet aggregation, serotonin secretion, TXA₂ formation, and a rise in [Ca²⁺]_i caused by AA. The aggregation, serotonin secretion, and rise of [Ca²⁺]_i in platelets induced by exogenous AA are due to TXA₂ formation [39, 40]. In platelets, AA is further metabolized to TXA₂ in two enzymatic steps including PGH synthase and TXA₂ synthase. PGH synthase exhibits both COX activity, catalyzing PGG₂ formation from AA, and peroxidase activity, which reduces the 15-hydroperoxyl group of PGG₂ to PGH₂ [31, 48]. Nonsteroidal anti-inflammatory drugs, such as aspirin and indomethacin, inhibit COX activity without affecting peroxidase activity, and the COX activity of PGH synthase is the target site of aspirin and related nonsteroidal anti-inflammatory drugs [49]. Considering the fact that AA-induced aggregation is inhibited by COX-inhibiting agents such as epoxyeicosatrienoic acids, miconazole, and girinimbine [50–52], we investigated the effect of NQ-Y15 on COX activity. When COX activity was assayed by measuring oxygen consumption after bovine vesicular gland microsomes were treated with AA, NQ-Y15 was found to have no effect on COX activity (Table 3). These findings suggest that the antiplatelet effects of NQ-Y15 are due, in part, to the inhibition of TXA₂ formation through inhibitory actions at an enzymatic step lower than COX.

The conversion of PGH₂ to TXA₂ is catalyzed by TXA₂ synthase in platelets. In platelet suspensions incubated with PGH₂, NQ-Y15 reduced the formation of TXA₂ (Fig. 5). Similarly, NQ-Y15 inhibited the conversion of PGH₂ into TXA₂ by human platelet microsomes (Fig. 6). These results imply that NQ-Y15 is capable of directly inhibiting TXA₂ synthase activity in platelets. PGI₂ synthase catalyzes the formation of PGI₂ from PGH₂ in endothelial cells. Thus, PGH₂ is the common substrate to TXA₂ synthase and PGI₂ synthase. We assayed PGI₂ synthase activity to elucidate whether NQ-Y15 selectively inhibits the conversion of PGH₂ by TXA₂ synthase without that by PGI₂ synthase. NQ-Y15 had no influence on the PGI₂ synthase activity in bovine aortic microsomes (Table 4). The above results prove that NQ-Y15 selectively inhibits TXA₂ synthase without influence on PLA₂, COX, or PGI₂ synthase *in vitro*.

In addition to inhibition of TXA₂ synthase, NQ-Y15 specifically blocked platelet receptors for TXA₂/PGH₂. Indeed, this compound completely inhibited platelet aggregation induced by the stable TXA₂ analogue U46619 in human platelets by shifting, in a parallel way, the concentration–response curve to U46619 to the right (Fig. 7). Other drugs possessing the dual property of TXA₂/PGH₂ receptor antagonist and TXA₂ synthase inhibitor act also as competitive antagonists of U46619-induced aggregation of human platelets [13, 14]. The IC₅₀ value for TXB₂ formation (Table 1) is generally higher than that for platelet aggregation (Fig. 2) because the antiaggregating effect of NQ-Y15 is due to TXA₂/PGH₂ receptor blockade as well as

TXA₂ synthase inhibition. Particularly, in collagen (10 µg/mL)-stimulated platelets, NQ-Y15 (10 µM) markedly inhibited aggregation but failed to inhibit TXB₂ formation significantly. Studies on collagen-stimulated rat platelets provided the evidence for a substantial role for TXA₂ in platelet aggregation. A small but significant amount of TXA₂ initially produced by collagen may act as a trigger to provoke subsequent platelet responses (i.e. shape change, aggregation, and secretion) [34]. A series of TXA₂/PGH₂ receptor antagonists completely suppressed U46619 binding to rat platelets as well as collagen-induced platelet aggregation [53]. Therefore, in collagen (10 µg/mL)-stimulated platelets, NQ-Y15 (10 µM) seems to effectively block the binding of a crucial amount of TXA₂ to receptors without having a significant effect on TXA₂ synthase activity.

Unlike COX inhibitors, selective TXA₂ synthase inhibitors selectively suppress the formation of TXA₂ and cause a re-orientation of PG endoperoxide metabolism toward antiaggregatory PGs, such as PGD₂ and PGI₂ [8]. However, a part of the accumulated PG endoperoxides may also activate a receptor, shared with TXA₂, mediating platelet activation and vasoconstriction [8, 9]. Thus, the balance between PGH₂ redirection and activation of TXA₂/PGH₂ receptors by accumulated PG endoperoxides may influence the net effect of TXA₂ synthase inhibitors to inhibit platelet function *in vivo*. In spite of these limitations, ozagrel (OKY-046), a kind of highly selective TXA₂ synthase inhibitor, has been used in the treatment of asthma in Japan and noted as a therapeutic agent for coronary heart diseases, thromboembolic disorders, and asthma [54–56].

Some drugs that act both as TXA₂ synthase inhibitors and as TXA₂/PGH₂ receptor antagonists have been developed. Picotamide and ridogrel have already been administered to humans. Both drugs reduce the formation of TXA₂ and increase the levels of PGI₂ and PGD₂, and competitively inhibit binding and action of TXA₂ and U46619 [13, 14]. Picotamide may be an effective drug in patients with peripheral occlusive arterial disease of the lower limbs [17, 18] and cerebral infarction [19]. Ridogrel seems to have efficacy in patients with peripheral occlusive arterial disease [20], acute myocardial infarction [21], and pregnancy-induced hypertension [22]. Thus, it is conceivable that NQ-Y15 might be particularly effective for the improvement of thrombotic conditions associated with platelet activation.

Based on the results obtained, we conclude that the antiplatelet effect of NQ-Y15 may be due to the combination of TXA₂ synthase inhibition with TXA₂/PGH₂ receptor blockade in a single molecule, which would decrease TXA₂ synthesis and neutralize the stimulatory activity of accumulated PGH₂ and of any residual amounts of TXA₂ still formed.

References

- Mustard JF, Function of platelets and their role in thrombosis. *Trans Am Clin Climatol Assoc* **87**: 104–127, 1976.
- Bjorkerud SU, Mechanisms of atherosclerosis. *Pathobiol Ann* **9**: 277–292, 1979.
- Packham MA, The role of platelets in thrombosis and hemostasis. *Can J Physiol Pharmacol* **72**: 278–284, 1994.
- Philip RB, *Method of Testing Proposed Antithrombotic Drugs*. CRC Press, Boca Raton, FL, 1981.
- Moncada S and Vane JR, Pharmacology and endogenous roles of prostaglandin endoperoxides, thromboxane A₂, and prostacyclin. *Pharmacol Rev* **30**: 293–331, 1979.
- FitzGerald GA, Healy C and Daugherty J, Thromboxane A₂ biosynthesis in human disease. *Fedn Proc* **46**: 154–158, 1987.
- Preston FE, Whipps S, Jackson CA, French AJ, Wyld PJ and Stoddard CJ, Inhibition of prostacyclin and platelet thromboxane A₂ after low-dose aspirin. *N Engl J Med* **304**: 76–79, 1981.
- Gresele P, Deckmyn H, Nenci GG and Vermynen J, Thromboxane synthase inhibitors, thromboxane receptor antagonists and dual blockers in thrombotic disorders. *Trends Pharmacol Sci* **12**: 158–163, 1991.
- Mayeux PR, Morton HE, Gillard J, Lord A, Morinelli TA, Boehm A, Mais DE and Halushka PV, The affinities of prostaglandin H₂ and thromboxane A₂ for their receptor are similar in washed human platelets. *Biochem Biophys Res Commun* **157**: 733–739, 1988.
- Watts IS, Wharton KA, White BP and Lumley P, Thromboxane (Tx) A₂ receptor: blockade and TxA₂ synthase inhibition alone and in combination: Comparison of anti-aggregatory efficacy in human platelets. *Br J Pharmacol* **102**: 497–505, 1991.
- Golino P, Ambrosio G, Gresele P, Pascucci I, Ragni M, Russolillo E, Leproux GB and Chiariello M, The *in vivo* antiplatelet effects of thromboxane A₂ synthase inhibitors are potentiated by simultaneous thromboxane A₂/prostaglandin H₂ receptor blockade. *J Pharmacol Exp Ther* **266**: 511–517, 1993.
- Salvati P, Dho L, Ukmar G, Vaga L, Rimoldi O and Patrono C, A comparative evaluation of thromboxane receptor blockade, thromboxane synthase inhibition and both in animal models of arterial thrombosis. *J Pharmacol Exp Ther* **269**: 238–245, 1994.
- Gresele P, Deckmyn H, Arnout J, Nenci GG and Vermynen J, Characterization of N,N'-bis(3-picolyl)-4-methoxy-isophthalamide (picotamide) as a dual thromboxane synthase inhibitor/thromboxane A₂ receptor antagonist in human platelets. *Thromb Haemost* **61**: 479–484, 1989.
- De Clerck F, Beetens J, de Chaffoy de Courcelles D, Freyne E and Janssen PA, R 68 070: Thromboxane A₂ synthetase inhibition and thromboxane A₂/prostaglandin endoperoxide receptor blockade combined in one molecule—I. Biochemical profile *in vitro*. *Thromb Haemost* **61**: 35–42, 1989.
- Anfossi G, Parisi S, Russo I, Mularoni EM, Massucco P, Cavalot F, Mattiello L and Trovati M, Studies on *in vitro* effect of picotamide on human platelet aggregation in platelet-rich plasma and whole blood. *Thromb Res* **77**: 399–410, 1995.
- Cattaneo M, Tenconi PM, Lecchi A and Mannucci PM, *In vitro* effects of picotamide on human platelet aggregation, the release reaction and thromboxane B₂ production. *Thromb Res* **62**: 717–724, 1991.
- Coto V, Coccozza M, Oliviero U, Lucariello A, Picano T, Coto F and Cacciatori L, Clinical efficacy of picotamide in long-term treatment of intermittent claudication. *Angiology* **40**: 880–885, 1989.
- Neirotti M, Molaschi M, Ponzetto M, Macchione C, Poli L, Bonino F and Fabris F, Hemodynamic, hemorheologic, and hemocoagulative changes after treatment with picotamide in patients affected by peripheral arterial disease (PAD) of the lower limbs. *Angiology* **45**: 137–141, 1994.
- D'Andrea G, Perini F, Hasselmark L, Alecci M and Cananzi AR, Effect of picotamide and aspirin, combined or alone, on platelet aggregation in patients with cerebral infarction. *Funct Neurol* **10**: 91–98, 1995.
- Hoet B, Arnout J, Van Geet C, Deckmyn H, Verhaeghe R and Vermynen J, Ridogrel, a combined thromboxane synthase inhibitor and receptor blocker, decreases elevated plasma β -thromboglobulin levels in patients with documented peripheral arterial disease. *Thromb Haemost* **64**: 87–90, 1990.
- The RAPT Investigators, Randomized trial of ridogrel, a combined thromboxane A₂ synthase inhibitor and thromboxane A₂/prostaglandin endoperoxide receptor antagonist, versus aspirin as adjunct to thrombolysis in patients with acute myocardial infarction. The Ridogrel Versus Aspirin Patency Trial (RAPT). *Circulation* **89**: 588–595, 1994.
- Keith JC Jr, Endo Y, Warwick K, Keith KE, Brugh S and Rowles TK, Ridogrel improves maternal/fetal homeostasis in an ovine model of pregnancy-induced hypertension. *Prostaglandins* **47**: 247–263, 1994.
- Ryu CK, Synthesis of anticoagulant 2-chloro-3-(N-arylamino)-1,4-naphthoquinones. *Yakuhak Hoeji* **32**: 245–250, 1988.
- Mustard JF, Perry DW, Ardlic NG and Packham MA, Preparation of suspensions of washed platelets from humans. *Br J Haematol* **22**: 193–204, 1972.
- Murphy CT, Elmore M, Kellie S and Westwick J, Comparison of the role of protein kinase C in platelet functional responses induced by three different mechanisms, PAF, ionomycin and arachidonic acid. *Biochim Biophys Acta* **1133**: 46–54, 1991.
- Holmsen H, Dangelmaier CA and Holmsen HK, Thrombin-induced platelet responses differ in requirement for receptor occupancy. Evidence for tight coupling of occupancy and compartmentalized phosphatidic acid formation. *J Biol Chem* **256**: 9393–9396, 1981.
- Pollock WK and Rink TJ, Thrombin and ionomycin can raise platelet cytosolic Ca²⁺ to micromolar levels by discharge of internal Ca²⁺ stores: Studies using fura-2. *Biochem Biophys Res Commun* **139**: 308–314, 1986.
- Gryniewicz G, Poenie M and Tsien RY, A new generation of Ca²⁺ indicators with greatly improved fluorescence properties. *J Biol Chem* **260**: 3440–3450, 1985.
- Kim DK and Bonventre JV, Purification of a 100-kDa phospholipase A₂ from spleen, lung and kidney: Antiserum raised to pig spleen phospholipase A₂ recognizes a similar form in bovine lung, kidney and platelets, and immunoprecipitates phospholipase A₂ activity. *Biochem J* **294**: 261–270, 1993.
- Kim DK, Kudo I and Inoue K, Purification and characterization of rabbit platelet cytosolic phospholipase A₂. *Biochim Biophys Acta* **1083**: 80–88, 1991.
- Van Der Ouderaa FJ, Buytenhek M, Nugteren DH and Van Dorp DA, Purification and characterisation of prostaglandin endoperoxide synthetase from sheep vesicular glands. *Biochim Biophys Acta* **487**: 315–331, 1977.
- Merino J, Livio M, Rajtar G and de Gaetano G, Salicylate reverses *in vitro* aspirin inhibition of rat platelet and vascular prostaglandin generation. *Biochem Pharmacol* **29**: 1093–1096, 1980.
- Fitzpatrick FA and Gorman RR, A comparison of imidazole and 9,11-azoprost-5,13-dienoic acid, two selective thromboxane synthetase inhibitors. *Biochim Biophys Acta* **539**: 162–172, 1978.
- Hanasaki K, Nakano T and Arita H, Two phasic generation

- of thromboxane A_2 by the action of collagen on rat platelets. *Thromb Res* **46**: 425–436, 1987.
35. Hwang DH, Species variation in platelet aggregation. In: *The Platelets—Physiology and Pharmacology* (Ed. Longenecker GL), pp. 289–305. Academic Press, New York, 1985.
36. Bult H and Bonta IL, Rat platelets aggregate in the absence of endogenous precursors of prostaglandin endoperoxides. *Nature* **264**: 449–451, 1976.
37. FitzGerald GA, Mechanisms of platelet activation: Thromboxane A_2 as an amplifying signal for other agonists. *Am J Cardiol* **68**: 11B–15B, 1991.
38. Parise LV, Venton DL and Le Breton GC, Arachidonic acid-induced platelet aggregation is mediated by a thromboxane A_2 /prostaglandin H_2 receptor interaction. *J Pharmacol Exp Ther* **228**: 240–244, 1984.
39. Siess W, Siegel FL and Lapetina EG, Arachidonic acid stimulates the formation of 1,2-diacylglycerol and phosphatidic acid in human platelets. Degree of phospholipase C activation correlates with protein phosphorylation, platelet shape change, serotonin release, and aggregation. *J Biol Chem* **258**: 11236–11242, 1983.
40. Brass LF, Shaller CC and Belmonte EJ, Inositol 1,4,5-triphosphate-induced granule secretion in platelets. Evidence that the activation of phospholipase C mediated by platelet thromboxane receptors involves a guanine nucleotide binding protein-dependent mechanism distinct from that of thrombin. *J Clin Invest* **79**: 1269–1275, 1987.
41. Vargaftig BB, Carrageenan and thrombin trigger prostaglandin synthetase-independent aggregation of rabbit platelets: Inhibition by phospholipase A_2 inhibitors. *J Pharm Pharmacol* **29**: 222–228, 1977.
42. Vanderhoek JY and Feinstein MB, Local anesthetics, chlorpromazine and propranolol inhibit stimulus-activation of phospholipase A_2 in human platelets. *Mol Pharmacol* **16**: 171–180, 1979.
43. Porcellati S, Costantini V, Prosdoci M, Stasi M, Pistolesi R, Nenci GG and Goracci G, The coumarin derivative AD6 inhibits the release of arachidonic acid by interfering with phospholipase A_2 activity in human platelets stimulated with thrombin. *Agents Actions* **29**: 364–373, 1990.
44. Loeb LA and Gross RW, Identification and purification of sheep platelet phospholipase A_2 isoforms. Activation by physiologic concentrations of calcium ion. *J Biol Chem* **261**: 10467–10470, 1986.
45. Mounier C, Faili A, Vargaftig BB, Bon C and Hatmi M, Secretory phospholipase A_2 is not required for arachidonic acid liberation during platelet activation. *Eur J Biochem* **216**: 169–175, 1993.
46. Takayama K, Kudo I, Kim DK, Nagata K, Nozawa Y and Inoue K, Purification and characterization of human platelet phospholipase A_2 which preferentially hydrolyzes an arachidonyl residue. *FEBS Lett* **282**: 326–330, 1991.
47. Kim DK, Suh PG and Ryu SH, Purification and some properties of a phospholipase A_2 from bovine platelets. *Biochem Biophys Res Commun* **174**: 189–196, 1991.
48. Pagels WR, Sachs RJ, Marnett LJ, Dewitt DL, Day JS and Smith WL, Immunochemical evidence for the involvement of prostaglandin H synthase in hydroperoxide-dependent oxidations by ram seminal vesicle microsomes. *J Biol Chem* **258**: 6517–6523, 1983.
49. Smith WL, DeWitt DL, Shimokawa T, Kraemer SA and Meade EA, Molecular basis for the inhibition of prostanoid biosynthesis by nonsteroidal anti-inflammatory agents. *Stroke* **21**: IV24–IV28, 1990.
50. Fitzpatrick FA, Ennis MD, Baze ME, Wynalda MA, McGee JE and Liggett WF, Inhibition of cyclooxygenase activity and platelet aggregation by epoxyeicosatrienoic acids. Influence of stereochemistry. *J Biol Chem* **261**: 15334–15338, 1986.
51. Ishikawa S, Manabe S and Wada O, Miconazole inhibition of platelet aggregation by inhibiting cyclooxygenase. *Biochem Pharmacol* **35**: 1787–1792, 1986.
52. Ko FN, Lee YS, Wu TS and Teng CM, Inhibition of cyclooxygenase activity and increase in platelet cyclic AMP by girinimbine, isolated from *Murraya Euchrestifolia*. *Biochem Pharmacol* **48**: 353–360, 1994.
53. Hanasaki K and Arita H, Characterization of thromboxane A_2 /prostaglandin H_2 (TXA_2 /PGH $_2$) receptors of rat platelets and their interaction with TXA_2 /PGH $_2$ receptor antagonists. *Biochem Pharmacol* **37**: 3923–3929, 1988.
54. Myou S, Fujimura M, Nishi K, Ohka T and Masuda T, Inhibitory effect of a selective thromboxane synthetase inhibitor, OKY-046, on acetaldehyde-induced bronchoconstriction in asthmatic patients. *Chest* **106**: 1414–1418, 1994.
55. Nakazawa M, Iizuka K, Ujiie A, Hiraku S and Ohki S, Research and development of ozagrel, a highly selective inhibitor of TXA_2 synthase. *Yakugaku Zasshi* **114**: 911–933, 1994.
56. Shikano M, Ito T, Ogawa K and Satake T, Effects of a selective thromboxane synthetase inhibitor (OKY-046) in patients with coronary artery disease during exercise. *Adv Prostaglandin Thromboxane Leukot Res* **13**: 375–377, 1985.