



Cannabinoid receptor trafficking in peripheral cells is dynamically regulated by a binary biochemical switch

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ABSTRACT

The cannabinoid G protein-coupled receptors (GPCRs) CB₁ and CB₂ are expressed in different peripheral cells. Localization of GPCRs in the cell membrane determines signaling via G protein pathways. Here we show that unlike in transfected cells, CB receptors in cell lines and primary human cells are not internalized upon agonist interaction, but move between cytoplasm and cell membranes by ligand-independent trafficking mechanisms. Even though CB receptors are expressed in many cells of peripheral origin they are not always localized in the cell membrane and in most cancer cell lines the ratios between CB₁ and CB₂ receptor gene and surface expression vary significantly. In contrast, CB receptor cell surface expression in HL60 cells is subject to significant oscillations and CB₂ receptors form oligomers and heterodimers with CB₁ receptors, showing synchronized surface expression, localization and trafficking. We show that hydrogen peroxide and other nonspecific protein tyrosine phosphatase inhibitors (TPIs) such as phenylarsine oxide trigger both CB₂ receptor internalization and externalization, depending on receptor localization. Phorbol ester-mediated internalization of CB receptors can be inhibited via this switch. In primary human immune cells hydrogen peroxide and other TPIs lead to a robust internalization of CB receptors in monocytes and an externalization in T cells. This study describes, for the first time, the dynamic nature of CB receptor trafficking in the context of a biochemical switch, which may have implications for studies on the cell-type specific effects of cannabinoids and our understanding of the regulation of CB receptor cell surface expression.

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Abbreviations: ATTC, American type culture collection; AMAM, anilino-monoindolylmaleimide; CB₁, cannabinoid receptor type-1; CB₂, cannabinoid receptor type-2; CDx, cluster of differentiation x; CHO, Chinese hamster ovary-K1; CM, cell membrane; CNR1, CB₁ receptor gene; CNR2, CB₂ receptor gene; DCA, dichloroacetate; DMEM, Dulbecco's modified eagle medium; DMSZ, German collection of microorganisms and cell cultures; DTSSP, 3,3'-dithiobis(sulfosuccinimidyl propionate); ECS, endocannabinoid system; ER, endoplasmic reticulum; FACS, fluorescence-activated cell sorting; FBS, fetal bovine serum; GRK, G protein receptor kinase; GPCR, G protein-coupled receptor; HEK, human embryonic kidney-293; H₂O₂, hydrogen peroxide; MCSF, macrophage colony stimulating factor; MCD, methyl-β-cyclodextrin; PAO, phenylarsine oxide; PBMCs, peripheral blood mononuclear cells; PBS-T, PBS with 0.01% Tween twenty; PDI, protein disulfide isomerase; PFA, paraformaldehyde; PKC, protein kinase C; PMA, phorbol 12-myristate 13-acetate; PTK, protein tyrosine kinase; PTP, protein tyrosine phosphatase; RT, room temperature; SFM, serum-free media; TPI, protein tyrosine phosphatase inhibitor; TBS, tris-buffered saline.

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1. Introduction

The endocannabinoid system (ECS) consists of arachidonic acid-derived endocannabinoids including 2-arachidonoylglycerol (2-AG) and anandamide (AEA) which activate the cannabinoid G protein-coupled receptors (GPCRs) CB₁ and CB₂ [1]. While transport, synthesis and breakdown of endocannabinoids critically regulate endocannabinoid action, the degree of CB receptor surface expression can directly determine receptor function because CB receptors are known to signal via cell membrane associated G_{αi} pathways [2]. An increasing body of evidence implicates a role of the ECS in a variety of physiological and pathophysiological conditions, including immunomodulation, metabolic regulation, bone growth, pain, cancer, and psychiatric disorders [3–9], thus predisposing cannabinoid receptors as actual and potential therapeutic targets. Although CB₁ receptors are mainly expressed in the CNS [10], being responsible for the central effects of CB₁ receptor agonists, they are also co-expressed with CB₂ receptors in numerous peripheral cells such as immune cells, bone cells, keratinocytes, adipocytes, and renal tissue [11–15]. The type-2 (CB₂) receptors are predominantly expressed in peripheral cells,

including immune cells, with only minor expression levels in the CNS under normal conditions [16,17]. CB₂ receptors are known to be involved in immunomodulatory mechanisms that regulate inflammation [18]. The pharmacology of cannabinoids and cannabinomimetics, which selectively target CB receptors in peripheral tissues, is receiving increasing interest due to the tissue protective, metabolism regulatory and analgesic properties of these agents [19,20].

GPCRs are among the most common targets for pharmacological intervention in allopathic medicine [21]. GPCR ligands (agonists, protean agonists, inverse agonists, silent antagonists) typically bind to the receptor at the cell membrane and thereby alter the interactions of the GPCR with its downstream G protein effectors, thus modulating receptor signaling. Therefore, the number of receptors available for ligand interaction at the cell surface likely determines the overall responsiveness of a given cell type to drug treatment [22]. Based on these considerations, several previous studies have addressed CB₁ receptor trafficking and agonist induced internalization in some detail [23–26]. However, to date only limited data are available on CB₂ receptor trafficking and few studies have been carried out with primary cells [26]. Previous studies report phosphorylation of CB₂ receptors upon agonist stimulation [27,28] with subsequent receptor internalization [27,29–32]. Alternate stimulation of CB₂ receptors with agonists and antagonists has been shown to result in a pattern of repeated phosphorylation and dephosphorylation of the receptor, implicating the possibility of CB₂ receptor recycling [27]. Most of these studies have been carried out using transfected CHO-K1 or HEK293 cells with both tagged and non-tagged receptors. In GPCR research it is well established that assays using such cellular constructs show a pronounced internalization of GPCRs upon activation by agonists [33]. Although transfected cell lines provide excellent tools to study receptor localization and trafficking, according to the text-book paradigm of ligand-activated internalization [34,35], they may not necessarily reflect trafficking mechanisms as they occur under physiological conditions. Despite an increasing number of studies on cannabinoid receptor expression changes in pathophysiological conditions, the underlying mechanisms are only just beginning to unfold [22].

In the present study we demonstrate that CB receptors, with a focus on CB₂, apparently do not undergo agonist-induced internalization in different cell lines and primary peripheral human cells evaluated here, contrasting with data obtained from cell lines showing heterologous CB receptor overexpression. Furthermore, in human immune cells we describe an intrinsic ligand-independent trafficking mechanism, which is regulated by protein tyrosine phosphatases (PTPs). The protein tyrosine phosphatase inhibitor (TPI) phenylarsine oxide (PAO) was identified as a novel tool agent able to manipulate CB receptor surface expression bidirectionally. Applying PAO we uncovered an apparently physiological binary switch that externalizes or internalizes CB receptors in immune cells. The TPI hydrogen peroxide (H₂O₂), which is present during inflammation [36], activates the switch leading to a bidirectional trafficking between the cell surface and yet unidentified cytoplasmic compartments. Furthermore, for the first time we provide experimental evidence for endogenous heterodimer formation between CB₁ and CB₂ receptors in cell membranes of untransfected HL60 cells and portray and discuss the unexpectedly dynamic nature of CB receptor surface expression in these cells.

2. Materials and methods

2.1. Cell culture, PBMC isolation

HL60 cells (ATCC CCL-240) were cultured in Iscove's Modified Dulbecco's Medium (ATCC) supplemented with 20% FBS, penicillin,

streptomycin and amphotericin B (all from Sigma-Aldrich, Switzerland) at 37 °C and 5% CO₂. NIH3T3 cells (ATCC CRL-2795) stably transfected with N-terminal eGFP tagged murine CB₂ receptor and CHO cells stably expressing human CB₂ were cultured in RPMI 1640 (Gibco) supplemented with 10% FBS, penicillin, streptomycin, amphotericin B and 400 µg/ml G418. Peripheral blood monocytes/macrophages and lymphocytes were isolated from buffy coat by density centrifugation according to a modified protocol by de Almeida et al. [37]. PBMC were isolated from buffy coats obtained from healthy blood donors by density gradient centrifugation. In a first step, buffy coat was mixed 1:1 with pre-warmed PBS and layered on top of a Ficoll cushion adjusted to a density of 1.070 g/ml by adding 2.813 ml PBS to 60 ml Ficoll Paque™ Premium (GE Healthcare, WI, USA) and then centrifuged for 30 min at 400 × g at RT. PBMCs were collected from the interface, washed three times with PBS–citrate buffer (1.49 mM disodium–dihydrogen–phosphate (Na₂H₂PO₄, Sigma-Aldrich, Switzerland); 9.15 mM disodium–phosphate (Na₂HPO₄, Sigma-Aldrich, Switzerland); 139.97 mM sodiumchloride (NaCl), 13 mM trisodium citrate (C₆H₅Na₃O₇, Axon Lab, CH); pH 7.2) by centrifugation for 15 min at 100 × g and RT to remove platelets. For further purification, a two-step procedure with single gradients in each step was used. PBMCs were incubated for 15–30 min at 37 °C and 5% CO₂ in 15 ml of a solution with nine parts RPMI 1640 growth medium supplemented with 15 mM HEPES, 10% FBS and one part of 3.8% (w/v) trisodium citrate in PBS in 50 ml conical polypropylene tubes with loose tops in a CO₂ incubator. The two step Percoll (GE Healthcare, WI, USA) gradient was prepared in 50 ml polypropylene tubes with 9:11 Percoll lower phase (5 ml per tube; 9 parts PBS–citrate buffer and 11 parts isoosmotic Percoll with a final density of 1.093 g/ml) overlaid by a 1:1 Percoll phase (15 ml per tube; 1 part PBS–citrate buffer and 1 part isoosmotic Percoll with a final density of 1.064 g/ml). Isoosmotic Percoll for the gradient was prepared by adjusting Percoll to a density of 1.130 mg/ml with PBS then adding 10% (v/v) 1.5 M NaCl, resulting in a final density of 1.1228 mg/ml. The PBMC suspension was carefully layered on top of the two step Percoll gradient and centrifuged for 40 min at 400 × g and RT. Purified monocytes formed a discrete layer at the 11:9 and 1:1 Percoll interface and were collected with an average purity of 80–90% monocytes/macrophages and 10–20% lymphocytes as determined by flow cytometry. The cells beneath the monocyte/macrophage layer were also collected, consisting of a 1:1 mixture of monocytes/macrophages and lymphocytes in the middle and 95% pure lymphocytes toward the bottom. These PBMCs were stored frozen in liquid nitrogen until usage.

2.2. shRNA transfection experiments

Stable shRNA knockdown of CNR1 was performed by transfection of HL60 cells with Mission® Lentiviral Transduction Particles (Sigma-Aldrich, Switzerland) containing validated clones for CNR1 knockdown according to the manufacturer's instructions. Briefly, HL60 cells (100 µl) were plated in 96 well format at a density of 5 × 10⁵ cells/ml in normal growth medium containing 8 µg/ml hexadimethrine bromide (Sigma-Aldrich; transfection medium). Mission® Lentiviral Particles containing shRNA for CNR1 or mock vector were added to the cells at a Multiplicity of Infection (MOI) of 5 and cells were subsequently spun down for 1 min at 800 × g and then incubated 2 h at 37 °C and 5% CO₂ for transfection. Cells were then centrifuged for 10 min at 800 × g before 75 µl of transfection medium was removed and substituted with 75 µl of normal growth medium. Cells were incubated at 37 °C and 5% CO₂ for 24 h to allow for antibiotic resistance gene expression, before addition of the selection antibiotic puromycin (2 µg/ml; Sigma-Aldrich, Switzerland) was added. Three days later viable transfected cells

were transferred to 24 well plates for further propagation and CNR1 knockdown was monitored by CB₁ receptor surface expression by analytical FACS. The puromycin concentration was maintained at a concentration of 2 µg/ml for a total of 14 days for stable clone selection.

2.3. Assessment of CB receptor surface expression

For flow cytometric analysis of primary cells PBMCs were thawed, washed once with pre-warmed RPMI for DMSO removal of freezing medium and subsequently maintained in RPMI 1640 (Gibco) supplemented with 10% FBS and penicillin, streptomycin and amphotericin B at 37 °C and 5% CO₂ for compound treatment. HL60, U937 (CRL-1593.2) (myeloid), MCF7 (breast cancer), A549 (lung adenocarcinoma), Hela (CCL-2) (cervical cancer), PC3 (prostate cancer) and Caco-2 (colon carcinoma) cells were obtained from ATCC and grown in RPMI 1640 (Gibco) supplemented with 10% FBS and penicillin, streptomycin and amphotericin B at 37 °C and 5% CO₂. Importantly, primary monocytes started to differentiate immediately upon incubation with medium and the effects of PAO changed dramatically with differentiation state. Whenever cells were incubated with compounds to modulate CB receptor cell surface expression, possible cytotoxicity of the compound was excluded by Trypan Blue (Sigma–Aldrich, Switzerland) staining. CB₂ receptor cell surface expression levels of vehicle control cells was set to 100% (basal expression) and trafficking of receptor due to compound treatment was quantified in relation to this basal expression level. For immunostaining, cells were incubated on ice for 30 min with primary antibody (CB₁, Abcam 3558; CB₂, Abcam 3560) diluted in wash buffer (PBS, 2% FBS, 0.1% sodiumazide), washed twice with wash buffer containing primary antibodies, then incubated on ice with Fab-fragment Alexa Fluor[®] 488 secondary antibody (Invitrogen A11070) for 30 min in the dark. Fluorescence stained cells were washed twice, fixed with 1% p-formaldehyde in wash buffer and analyzed for antigen surface expression by analytical FACS (FACScan, Becton-Dickinson) using Cell Quest Pro (Becton-Dickinson) for data analysis. Unspecific binding of antibody to Fc receptors in immune cells was determined by incubation with rabbit IgG₁ antibody (Jackson-ImmunoResearch, 011-000-003), the corresponding IgG class used for primary antibody stain, and subtracted from the obtained fluorescence values. Subpopulation staining of PBMCs was carried out by using specific CD3, CD4, CD8a, CD14, CD16 and CD19 antibodies either prelabeled with CE/Cy5 or stained with PE labeled secondary antibody (see Section 2.10).

2.4. CNR1 and CNR2 expression data analysis

Expression data for the NCI60 cell line panel was obtained through <http://discover.nci.nih.gov/cellminer/> [38]. Robust multi-array averaging (RMA) and quantile normalization were used to quantify gene expression using the affy package (R, Bioconductor). Heatmaps were generated using Cluster 3.0 and TreeView (<http://rana.lbl.gov/EisenSoftware.html>) [39]. Centered correlation and average linkage clustering were used for similarity measurement and clustering, respectively.

2.5. Synchronization of HL60 cells by double-thymidine block

HL-60 cells were incubated for 24 h in medium containing 2 mM thymidine (Sigma–Aldrich, Switzerland) and then washed and resuspended in thymidine-free medium for 10 h. They were then again blocked by incubation with thymidine for 16 h. Release from the block was obtained by resuspension and cultivation in fresh RPMI-1640 medium 10% FBS without thymidine and penicillin, streptomycin and amphotericin B at 37 °C and 5% CO₂. The rate of synchrony achieved was monitored by removing aliquots of cultures

at 60 min intervals for determination of DNA synthesis (M1 vs. G2M) and cell number by PI staining by FACS. In addition, DNA synthesis was determined by incorporation of [³H]thymidine. Cells were incubated at a concentration of 2×10^5 /ml with [³H]thymidine (3 µCi/ml; specific activity, 5 Ci/ml) for 30 min at 37 °C. They were then washed and precipitated with 10% trichloroacetic acid; the precipitate was collected on Millipore filters, washed with 5% trichloroacetic acid, and counted in a Packard liquid scintillation counter. The M1 vs. G2M cell populations were determined by analytical FACS as published previously [40].

2.6. T cell activation

T cells were activated by incubation with soluble anti-CD3 (5 µg/ml) and anti-CD28 (2.5 µg/ml) antibody for 19 h followed by drug treatment for modulation of CB surface expression as adopted from a previously published protocol [41].

2.7. Cell membrane and lipid raft purification

The method for highly purified cell membrane (CM) preparation via aqueous two phase centrifugation was adapted from Park et al. [42]. All steps were carried out on ice or at 4 °C. $1-3 \times 10^7$ HL60 cells were pelleted by centrifugation and washed 1× with PBS. The pellet was resuspended in 1.5 ml lysis buffer (15 mM Tris pH 7.5, 250 mM sucrose, 2 mM MgCl₂, 1 mM EDTA, 1 mM DTT, 1 mM sodium fluoride, 1 mM sodium orthovanadate and protease inhibitor cocktail from Sigma–Aldrich, Switzerland (P8340)) and then homogenized in a Dounce homogenizer with 50 strokes using a tight fitting pestle B. The cell lysate was then centrifuged for 10 min at $1000 \times g$ and 4 °C to remove nuclei and cell debris. Supernatant was recovered and the remaining pellet resuspended in 2 ml lysis buffer for an additional centrifugation under the same conditions. Supernatants from the first and second centrifugation were pooled (post nuclear CM fraction), layered onto a 30% Percoll (w/v) cushion and centrifuged at $84,000 \times g$ for 35 min at 4 °C in a TST 41.14 rotor (Beckman). The purified CM forming a visible cloudy layer at the interface between the lysis buffer and Percoll cushion was collected by punctuation of the ultracentrifuge tube with a 26 gauge needle and withdrawal of the cloudy interface (approximately 1 ml). Further aqueous two-phase extraction of CM was carried out following the protocol of Park et al. [42] by preparing two sets of a 6.6% (w/w) Dextran 500 gradient/6.6% (w/w) polyethylene glycol 3350 (PEG, Sigma–Aldrich, Switzerland) via the addition of stock solutions of 20% (w/w) Dextran 500 (Roth, Germany) and 40% (w/w) PEG 3350. Crude CM sample was added into one set of the two-phase mixtures. The potassium phosphate buffer (0.2 M, pH 7.2) was added to the other set of two-phase mixtures. After 40 inversions at 4 °C, the two phase mixtures were centrifuged for 5 min at $750 \times g$ and 4 °C. Subsequently the two-phase mixtures were phase-separated via centrifugation, forming two phases with PEG in the upper phase and Dextran in the lower phase. The two upper phases of the two-phase systems were exchanged. The mixtures were inverted 40 times at 4 °C and subjected to another centrifugation for 5 min at $750 \times g$ and 4 °C. The two upper phases were recovered, pooled and centrifuged for 2 h at $100,000 \times g$ with 1 mM sodium bicarbonate according to Cao et al. [43]. The purified CM formed a pellet after centrifugation, which after removal of the supernatant was resuspended in Co-IP buffer for immunoprecipitation. Lipid rafts were prepared as described by Yamazaki et al. [44] with slight modifications. All steps were carried out at 4 °C or on ice. Cells were incubated in 1 ml TNE buffer (25 mM Tris base, 150 mM NaCl, 5 mM EDTA, protease inhibitor solution (Sigma–Aldrich, Switzerland, pH 7.4) containing 1% Triton X-100 for 30 min on ice followed by homogenization in a Dounce homogenizer with 30 strokes. Cells were then centrifuged for 5 min at $1500 \times g$ to remove nuclei and

cell debris. The supernatant was collected and diluted 1:1 with 80% sucrose in TNE buffer, resulting in a final sucrose concentration of 40% with a volume of approximately 1.8 ml, and transferred to an ultracentrifuge tube. The homogenate was overlaid with sucrose solution in TNE buffer of varying concentrations (2 ml 30% sucrose and 1 ml 5% sucrose on top of the gradient) and centrifuged for 19 h at 250,000 rcf in a Beckman SW55Ti rotor at 4 °C. A light scattering band at the 5% and 30% sucrose interface corresponded to the lipid raft fraction. Fractions of 400 µl were collected from the top of the tube with fractions 3–5 containing the isolated rafts. Surface proteins of 4×10^7 HL60 cells were cross-linked with 1.9 mM DTSSP (Pierce) according to manufacturer's instructions before lipid rafts were isolated for immunoprecipitation.

2.8. Co-immunoprecipitation and Western blotting

The co-immunoprecipitation of CB₁ and CB₂ receptors from purified HL60 cell membranes was carried out using Dynabeads G (Invitrogen, CA, USA) according to the manufacturer's instructions. Two different antibodies for CB₁ (Sigma–Aldrich, Switzerland C1108, epitope aa 1–99 hCB₁; Abcam ab3558, epitope aa 1–99 hCB₁) and CB₂ (Sigma–Aldrich, Switzerland C1483, epitope aa 1–32 rCB₂; Abcam ab3560, epitope aa 1–33 hCB₂) were used for precipitation. Briefly, 3 µl anti-CB₁ or anti-CB₂ antibody and 4 µl anti-p38 antibody (negative control) were diluted 1:10 in citrate phosphate buffer pH 5.0 (25 mM citrate, 50 mM disodium phosphate) and incubated with 30 µl magnetic beads for 20 min at RT with gentle tilt and rotation. After three wash steps, antibodies were immobilized on beads by incubation with 5 mM BS³ (Pierce Thermo Scientific, IL, USA) for 30 min. Subsequently beads were incubated with 100 µl isolated cell membrane for antigen capture for 40 min at 4 °C with gentle rotation. Beads with captured antigen were washed 3 times with PBS pH 7.4 followed by mild antigen elution with 2×20 µl glycine pH 2.6. LDS (4×) was added to reach the final concentration (1×) before samples were boiled for 5 min at 95 °C. Samples were then electrophoresed on NuPage[®] (Invitrogen) precast 4–12% gradient gels and transferred to nitrocellulose membrane. The Fermentas pre-stained marker (Page Ruler Plus) was run alongside the samples. Membranes were blocked with 5% non-fat milk in PBS with 0.01% Tween 20 (PBS-T) overnight, briefly rinsed twice with PBS-T, then incubated with either CB₁ (Abcam) or CB₂ (Abcam) antibody diluted 1:250 in PBS-T for 1 h at RT. After 3 washes with PBS-T for 15 min membranes were incubated with horseradish peroxidase-conjugated sheep anti-rabbit antibody (GE Healthcare) diluted 1:2000 in PBS-T for 1 h at RT. Following three further washes, membranes were incubated with ECL-plus (GE Healthcare) for 1 min for signal detection on autoradiographic SuperRX film (Fujifilm). To study the potential degradation of the PMA internalized CB₂ receptors, 0.5×10^6 HL60 cells per sample were stimulated with 50 nM PMA, harvested at indicated times and subsequently lysed in RIPA buffer (50 mM Tris, 150 mM NaCl, 0.1% SDS, 0.5% sodium deoxycholate, 1% Triton X 100, protease inhibitor cocktail (P8340), all from Sigma–Aldrich, Switzerland). Cells were incubated 30 min on ice for lysis and subsequently centrifuged 15 min at $15,000 \times g$ at 4 °C. The supernatant was harvested and the protein concentration was determined with Pierce BCA Protein Assay Kit (23225, Thermo Scientific, USA), before equal amounts of protein were loaded on NuPage[®] (Invitrogen) precast 4–12% gradient gels. Detection of antigen was carried out as described above, using the antibodies Proliferating Cell Nuclear Antigen (PCNA, 307901, Biolegend, USA) as loading control and CB₂ receptor (Abcam 3560).

2.9. Microscopy

NIH3T3 cells stably transfected with N-terminal eGFP tagged murine CB₂ receptor (NIH3T3-CB₂-GFP) were incubated with

Lysotracker[®] and Mitotracker[®] (both Invitrogen, Switzerland) according to the manufacturer's instructions. Briefly, cells were incubated with 50 nM Lysotracker[®] for 30 min in normal growth medium and with 50 nM Mitotracker[®] for 15 min in FBS free RPMI 1640 medium. Cells were subsequently washed twice with PBS and fixed with PFA before images were immediately acquired. For immunostaining of endoplasmic reticulum and early endosomes, NIH3T3-CB₂-GFP cells were fixed in 4% paraformaldehyde in PBS for 10 min, permeabilized with 0.05% Triton X-100 in PBS for 3 min and blocked with 0.5% BSA and 10% goat serum in PBS for 1 h at RT. Fixed monolayers were incubated with primary antibodies against Early Endosome Antigen 1 (EEA1, BD Biosciences) for endosome staining and Protein Disulfide Isomerase (PDI, Stessgen) diluted 1:500 in 0.5% BSA and 5% goat serum (Sigma–Aldrich, Switzerland) for 90 min. Then, after 3 washes with PBS, cells were incubated with appropriate Alexa 594-conjugated secondary antibody (A11020, Invitrogen) for 1 h at RT. 3 washes with PBS, images from fixed and stained monolayers were obtained with a Nikon DS-Fi1 camera mounted on a Nikon Eclipse TS100 microscope equipped with a Tripleband DAPI/FITC/TRITC HC filterset (AHF, Germany).

2.10. Antibodies and reagents

Unless stated otherwise, chemicals were obtained from Sigma–Aldrich, Switzerland. Anandamide, 2-arachidonoylglycerol and CP,55,940 were purchased from Tocris (MO, USA) and BPA-AM2 from Funakoshi (Tokyo, Japan). Mission[®] Lentiviral Transduction Particles for validated CNR1 knock down were obtained from Sigma–Aldrich, Switzerland (NM ID: NM_001840, clone TRCN000011282). Antibodies used for lymphocyte subpopulation stains were PE/Cy5 conjugated CD8a (Biolegend, 300909) and CD19 (Biolegend, 302209), PE conjugated CD4 (Sigma–Aldrich, Switzerland, P-7562) and unconjugated CD3 (Biolegend, 300313) and CD16 (Biolegend, 302013). Unconjugated antibodies were fluorescence labeled with R-PE labeled secondary antibody (Sigma–Aldrich, Switzerland, P-8547). Phorbol 12-myristate 13-acetate (PMA), 1-stearoyl-2-arachidonoyl-sn-glycerol (SAG), phenylarsine oxide, cyclosporin A (CsA), genistein, CD45-540215, insulin, methyl-β-cyclodextrin (MCD), sodium orthovanadate (Na₃VO₄), tumor necrosis factor-α (TNF-α), PD 166285 and AS 1949490 were all obtained from Sigma–Aldrich, Switzerland. Thapsigargin (THG) was purchased from Alexis Biochemicals, USA. Lipopolysaccharide (LPS), dexamethasone, H₂O₂, n-butanol and propranolol were purchased from Sigma–Aldrich, Switzerland. Macrophage colony-stimulating factor (MCSF) was from Abcam. NSC87877 and cantharidine was purchased from Tocris.

2.11. Microarray data and statistical analysis

Expression data for NCI60 cell line panel was obtained through <http://discover.nci.nih.gov/cellminer/> [35]. Robust multi-array averaging and quantile normalization were used to quantify gene expression using the affy package (R, Bioconductor). Heatmaps were generated using Cluster 3.0 and TreeView (<http://rana.lbl.gov/EisenSoftware.html>) [39]. Cluster analysis and display of genome-wide expression patterns). Centered correlation and average linkage clustering, respectively, were used for similarity measurement and clustering. Statistical analysis was performed with Prism 5 (GraphPAD Software for Science, CA, USA) and R CRAN, applying unpaired Student's *t*-test, one-way and two-way ANOVA, and Tukey HSD for post hoc testing. For oscillations repeated measures ANOVA was employed. All statistical tests were two-sided and a *p* value or adj. *p* value, respectively, <0.05 was considered statistically significant.

3. Results

3.1. Agonist stimulation induces CB receptor internalization in stably-transfected CHOK1-*hCB₂* and CHOK1-*hCB₁* cells, but not in cell lines and primary peripheral immune cells

The majority of previous studies aimed at elucidating trafficking mechanisms of CB receptors have been carried out using overexpression cell lines, describing agonist-induced internalization for both *CB₁* and *CB₂* receptors [23,31,32]. To corroborate whether this would also occur in primary peripheral blood mononuclear cells (PBMCs) or peripheral cell lines we studied agonist-induced internalization of CB receptors. *hCB₂* and *hCB₁* receptor-transfected CHOK1 cells, isolated primary lymphocytes and monocytes/macrophages and HL60 cells were exposed to 10 μ M of different agonists for 1 h and the receptor surface expression was quantified by analytical FACS. In agreement with previous reports [29–31], AEA, 2-AG and CP55,940 led to significant *CB* receptor internalization in CHO-*hCB₂* and CHO-*hCB₁* cells (Fig. 1A). We used selective polyclonal antibodies (Abs) to label the N-termini of CB receptors. Although the *CB₂* receptor antibody used showed a higher non-specific binding (i.e.

background) than the *CB₁* receptor antibody, the Abs proved to be selective and were thus judged suitable to quantify receptor surface expression (Fig. 1B). Unexpectedly, neither primary PBMCs nor HL60 cells displayed CB receptor internalization upon exposure to agonists (Fig. 1C), suggesting that CB receptor trafficking in these cells may be regulated in an agonist-independent manner. The same results were obtained with the peripheral cell lines MCF7, A549 and Caco-2 (Fig. 1D), showing relatively weak overall *CB₂* receptor surface expressions (see below). Notably, in none of many experiments performed on CB receptor surface expression with primary cells or non-transfected cell lines could we observe agonist-mediated internalization. This unexpected finding and the fact that CB receptor gene expression is often used as an indicator of functional CB receptor expression [45–48], led us to explore the relationship between CNR gene expression and localization of CB receptors in different cell types.

3.2. Lack of correlation between CNR gene expression and CB receptor surface expression and dynamic changes in the latter

Based on gene array data in the NCI60 cell line panel in most peripheral cells the *CB₂* receptor gene (*CNR2*) is more strongly

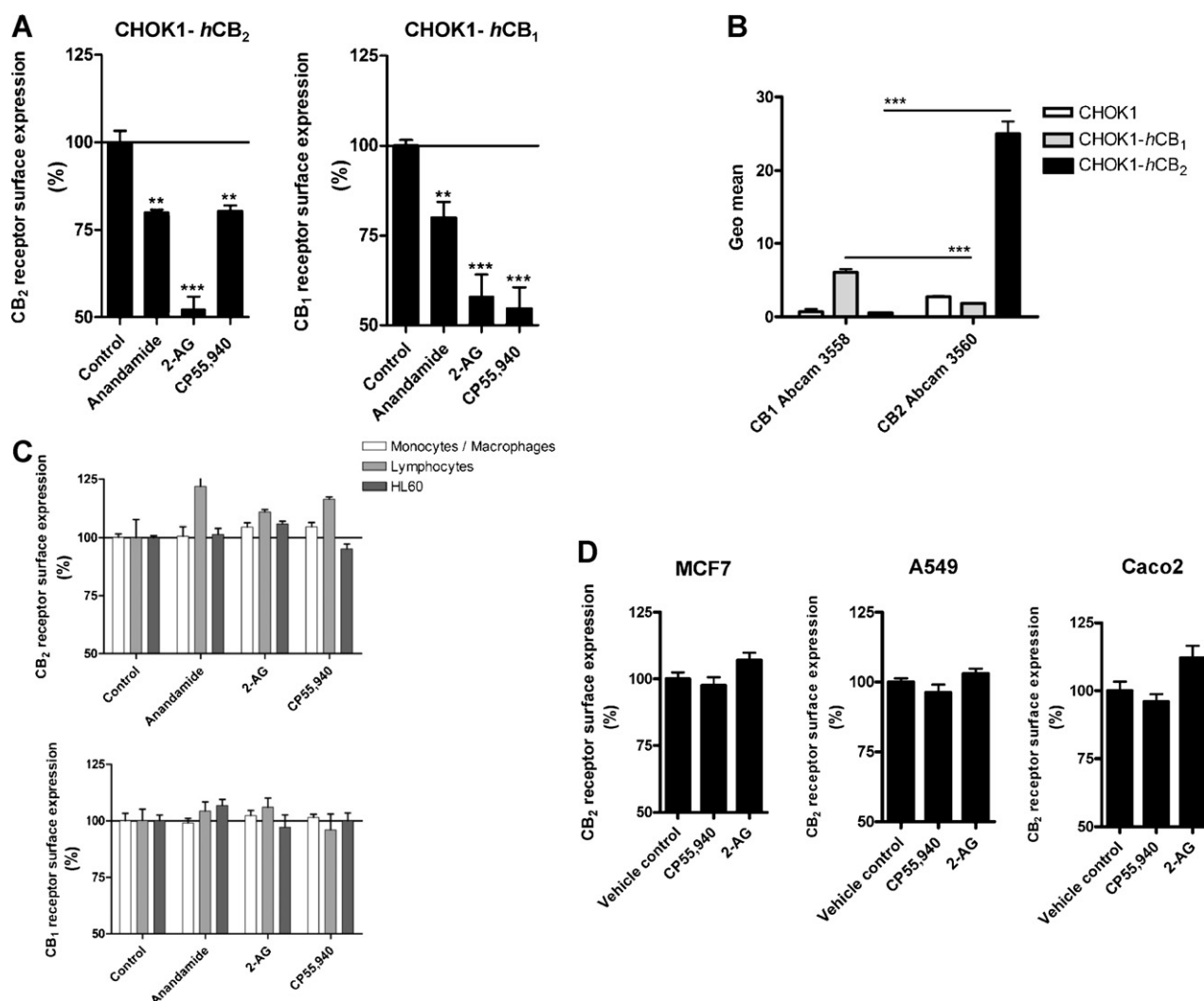


Fig. 1. Effect of agonist treatment on CB receptor cell surface expression (% of control) in transfected CHOK1 cells and peripheral cells. (A) CB receptor surface expression following agonist (10 μ M) stimulation by anandamide, 2-AG and CP55,940 for 1 h in stably transfected *hCB₁* and *hCB₂* CHOK1 cells (1×10^6). (B) Selectivity of background staining of polyclonal Abs in CHOK1 cells transfected with either *hCB₁* or *hCB₂* receptors. (C) CB receptor surface expression in primary monocytes/macrophages and lymphocytes and HL60 cells. (D) *CB₂* receptor surface expression in MCF7 (breast adenocarcinoma), A549 (lung adenocarcinoma) and Caco-2 (colon carcinoma) cells (1×10^6) after agonist (10 μ M) stimulation for 1 h. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Nonspecific binding to Fc receptors in immune cells was negligible. Data show mean values \pm SD, $N = 3$. Data were analyzed using unpaired *t*-test, ** $p < 0.01$ and *** $p < 0.001$.

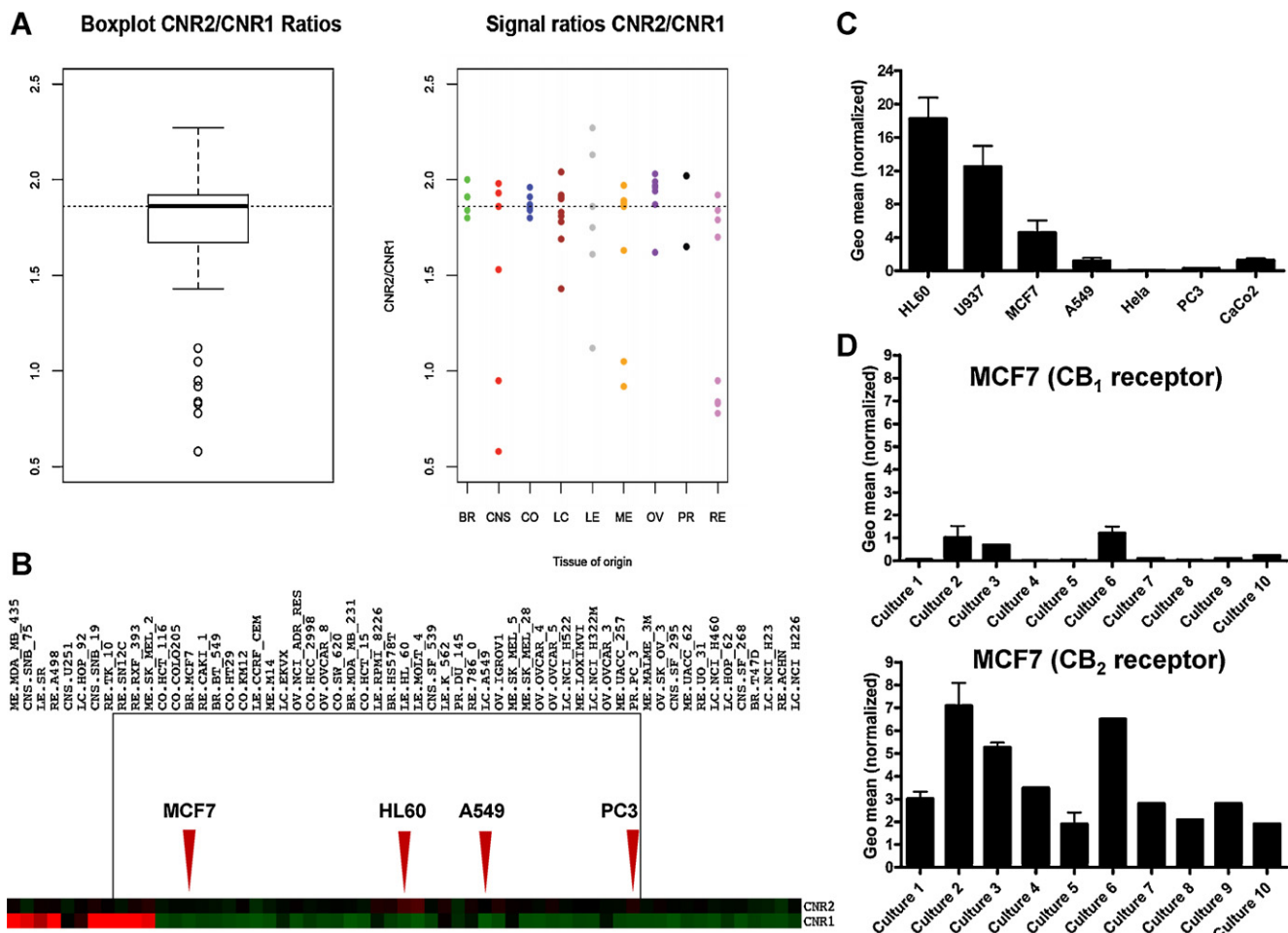


Fig. 2. (A) Expression profiles of the genes CNR1 and CNR2 in the NCI60 cell line panel. Boxplot of the signal ratios CNR2/CNR1 in all 59 cell lines (left). Normalized signal ratios in the various tissues represented in the NCI60 cell line panel: BR = breast, CNS = central nervous system, CO = colon, LC = lung, LE = leukocytes, ME = melanoma, OV = ovarian tissue, PR = prostate, RE = renal tissue (right). (B) Relative expression levels of CNR1 and CNR2 showing homogenous expression of CNR2 (colors are not absolute measured but relative to overall gene expression in cell line). (C) Differences of CB₂ receptor surface expression between distinct cell lines. (D) Significant fluctuations of CB₁ and CB₂ receptor surface expressions between different MCF7 cell culture experiments. Data were analyzed using a paired *t*-test. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Data show mean values \pm SD, *N* = 3. (For interpretation of the references to color in this figure legend, the reader is referred to the web version of the article.)

and more homogeneously expressed than that of the CB₁ receptor (CNR1), as also indicated by the average CNR2/CNR1 expression ratio >1.5 (Fig. 2A and B). Certain cell lines of brain and renal origin are notable exceptions because they show stronger CB₁ receptor expressions relative to other genes (Fig. 2A). As shown in Fig. 2B, the CNR2 gene is most strongly expressed in HL60 cells (relative to background expression), from which this receptor was first cloned [49]. In order to check whether gene expression correlates with CB receptor surface expression, we measured CB receptor surface expression in U937 (myeloid), MCF7 (breast cancer), A549 (lung adenocarcinoma), Hela (cervical cancer), PC3 (prostate cancer) and Caco-2 (colon carcinoma) cells. As shown in Fig. 2C, Hela and PC3 cells showed no or only marginal CB₂ receptor surface expression. Moreover, several other cell lines which display significant CNR2 expression did not show any CB₂ receptor surface expression (data not shown), thus suggesting a cytoplasmic localization. In our study we found that different cell culture passages, or different clones from the same cell lines, showed significantly different CB receptor surface expression patterns (Fig. 2C and D). In Fig. 2D, CB receptor cell surface expression differed significantly between different experiments (i.e. different cell cultures) in MCF7 cells and also in HL60 cells (see below). Our data therefore suggest that there are intrinsic ligand-independent changes that mediate CB receptor

surface expression. Because CB₂ receptors were generally more abundantly expressed at the cell surface than CB₁ receptors in peripheral cells, we focussed our study on trafficking mechanisms regulating CB₂ receptors.

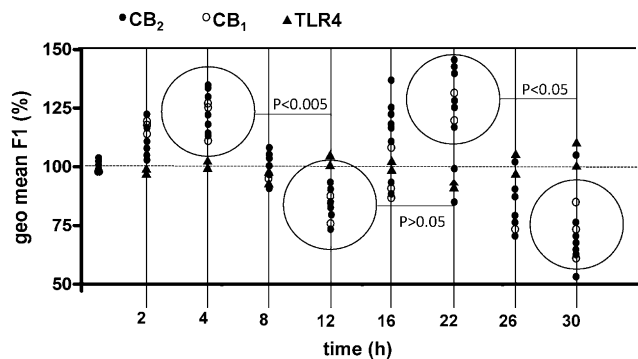


Fig. 3. Intrinsic oscillations of CB₂ and CB₁ receptor surface expression in synchronized HL60 (ATCC CCL-240) cells. 1×10^7 cells were synchronized by a double-thymidine block and surface expression of CB₂, CB₁ and TLR4 proteins were measured at different time points. 1×10^4 cells from the same population were quantified by analytical FACS. Data points show independent experiments (*N* > 4) and significant differences for relative geo mean values between indicated time points (circles) were determined by repeated measures ANOVA and Tukey post hoc analysis.

3.3. Intrinsic synchronous oscillations of CB receptors in HL60 cells and oligomer and heterodimer formation between CB₁ and CB₂ receptors

Promyelocytic HL60 cells (ATCC CCL-240) not only showed strong CNR1 and CNR2 gene expression (Fig. 2B) but also strong and relatively robust CB receptor cell surface expression. In contrast to other cell types, which preferentially expose only CB₂ receptors on their surface (see below), in HL60 cells both CB receptors were detected at similar levels. When HL60 cells were synchronized by a double-thymidine block, they revealed a type of synchronous oscillation of both CB receptors while such fluctuations were not seen with the toll-like receptor 4 (TLR4) (Fig. 3). Interestingly, CB₁ and CB₂ receptors oscillated in synchrony, indicating potential co-regulation. The overall changes were in the range of 100% relative

to initial levels and statistically significant between certain time points as determined by Repeated Measures ANOVA (4 h vs. 12 h vs. 22 h). CB receptor surface expression did not correlate with cell cycle events (data not shown). Monitoring surface expression of CB₁ and CB₂ receptors in different experiments revealed significant fluctuations between clones from different suppliers (Fig. 4A), as well as passage numbers or culture conditions (Fig. 4B). We have previously reported on the HL60 clone 4 (Fig. 4B) which lacks CB receptor surface expression and does not respond to 2-AG stimulation [50]. Despite these differences between the HL60 clones, an apparently constant ratio of 1:1 for CB₁ and CB₂ receptors was measured, independent of the absolute surface expression (Fig. 4A and B). This observation led us to hypothesize that CB₁ and CB₂ receptors may form stable heterodimers in HL60 cells and that this could be the reason for the apparently synchronous cell surface expressions.

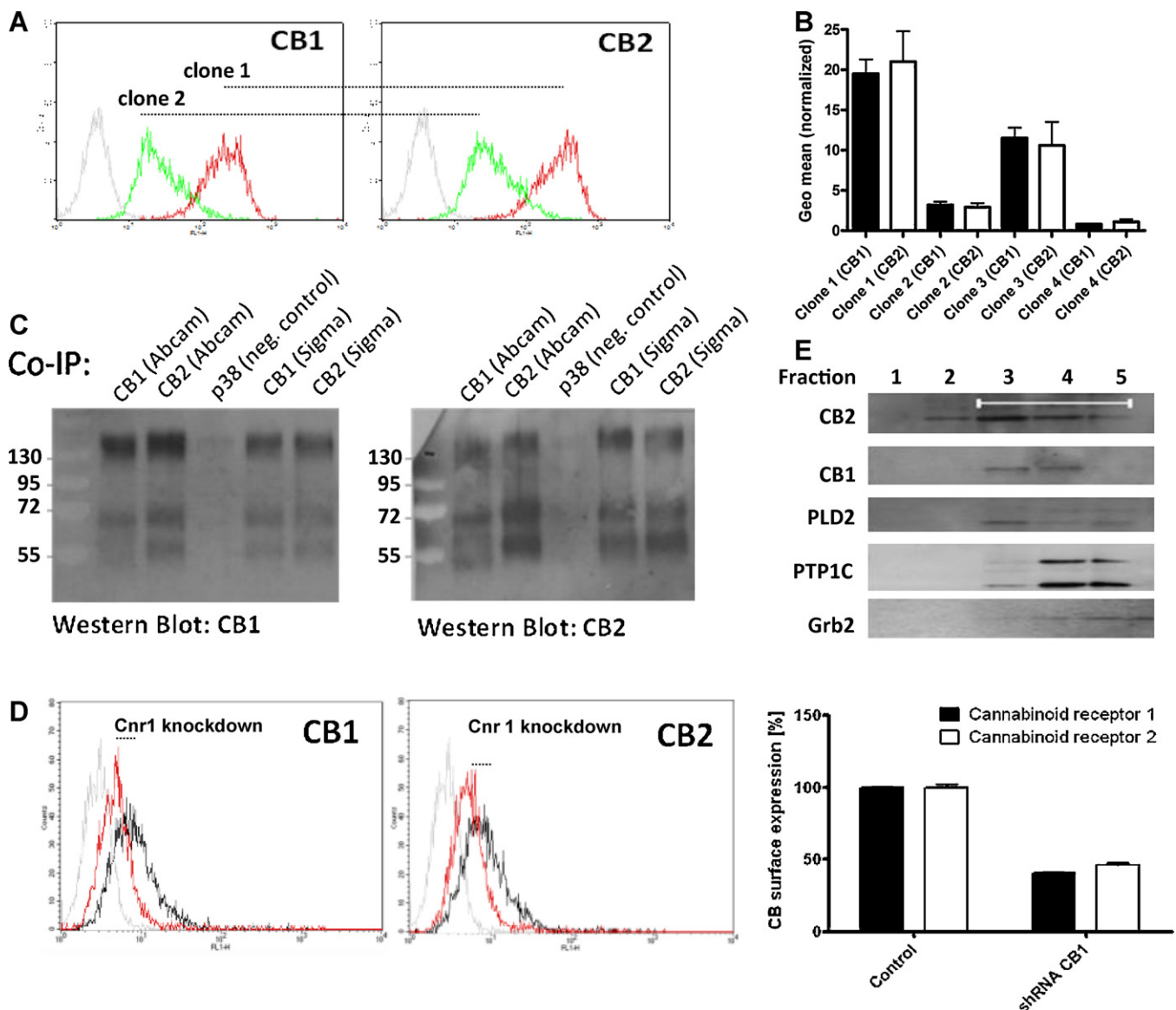


Fig. 4. CB₁ and CB₂ receptors form heterodimers and oligomers in untransfected HL60 cells (A) HL60 cell lines from certified batches of different suppliers; clone 1 (ATCC) and clone 2 (DSMZ) with significantly different basal CB receptor expressions. (B) Relative CB receptor surface expressions from different HL60 (ATCC) clones maintained in our laboratory. (C) Co-immunoprecipitation of CB₁ and CB₂ receptors from purified cell membrane fractions of HL60 cells, using two different antibodies for each CB receptor (Abcam and Sigma, all antibodies with N-terminal epitope) and p38 as negative control for unspecific binding. Double bands at approximately 60 kDa likely show nonglycosylated vs. glycosylated monomers of the CB receptors. At approximately 160 kDa higher order oligomeric complexes of trimeric or tetrameric composition are detected as previously reported [20]. (D) shRNA knockdown of CNR1 decreased CB₁ receptor surface expression to ~40% of the mock transfected control, resulting in a stoichiometrically matching decrease (~46% of control) of CB₂ receptor surface expression. (E) Western blot analysis of HL60 lipid raft preparation. Both CB₁ and CB₂ receptors are detected in the lipid raft fraction (lanes 3–5 on blot). Phospholipase D2 (PLD2), protein tyrosine phosphatase 1C (PTP1C) and growth factor receptor-bound protein 2 (Grb2) were used as positive controls for raft preparation. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Data shown are mean values \pm SD, $N = 3$.

Immunoprecipitation and co-immunoprecipitation experiments of CB₁ and CB₂ receptors from purified HL60 cell membranes, using two different Abs for each receptor, revealed that both CB₁ and CB₂ co-precipitated and apparently formed heterodimers and higher-order heterooligomers (Fig. 4C). As we wanted to avoid artificial co-localization of CB receptors due to overexpression, a membrane purification step was introduced (see Section 2) which was essential to detect the endogenously expressed CB receptors. The observed staining pattern of the antibodies for CB₁ receptors seen have been reported in a study by Wager-Miller et al. [51], showing both the monomeric and high molecular weight forms. As only the CB₁ receptor antibody was used, homo- or hetero-complex formation of the multimeric complex was not revealed in this report. To test whether the apparent heterodimer formation in HL60 cells, detected in the co-immunoprecipitation experiments, also affects the membrane localization (i.e. trafficking) of CB receptors in living cells, we made shRNA knockdown mutants of CNR1 from HL60 cells. Quantification of receptor surface expression after shRNA treatment showed a 60% reduction compared to the mock transfection control (Fig. 4D). Intriguingly, the reduction of CB₁ receptor surface expression was accompanied by a stoichiometrically matching decrease in CB₂ receptor surface expression to approximately 46% of control levels, thus indirectly confirming heterodimerization and co-localization. To further characterize the membrane localization properties of CB receptors in the HL60 cell line, lipid rafts were prepared and analyzed by immunoblotting. Our data indicate the presence of both receptors in these compartments (Fig. 4E), despite the fact that only CB₁ receptors appear to have the biochemical properties that makes them reside in the lipid raft microdomains [52].

3.4. CB₂ receptor surface expression is controlled by protein tyrosine phosphatases—elucidation of a binary biochemical switch

In order to find a mechanistic basis for the oscillation and overall changes of the CB receptor surface expression observed, we next investigated which pharmacological agents (nonspecific modulators of kinases, calcium homeostasis, growth factors, etc.) were able to trigger CB₂ receptor trafficking (i.e. internalization and/or externalization). PBMCs were incubated with non-cytotoxic concentrations of the respective inhibitors (Fig. 5A). Monocyte/macrophage CD14⁺ cell populations were gated and CB₂ receptor surface expression quantified by analytical FACS. The phorbol ester phorbol 12-myristate 13-acetate, which is a diacylglycerol mimic that binds to C1 domains in kinases including PKC [53] was determined to be highly active (Fig. 5A). PMA at 50 nM led to a rapid and maximal internalization of both CB receptors in cell lines and in primary human CD14⁺ monocytes (Fig. 5B), equivalent to about 50% of the total detectable receptors. Although we are the first to describe this effect for CB receptors, PMA has previously been reported to modulate GPCR trafficking [54]. Using PMA as a trigger for CB receptor internalization we provide evidence that the CB₂ receptor-dependent intracellular calcium transients induced by 2-AG in HL60 cells [50] may be mediated by the fraction of CB₂ receptors that are internalized upon treatment (Fig. 5C). Thus, it is feasible that the pool of receptors that undergoes trafficking is functional and may be important for signal transduction, or alternatively, PMA shuts down the down-stream effects involved in the CB₂ receptor-mediated intracellular calcium transients. PMA treatment did not lead to degradation of the CB₂ receptor pool as illustrated by Western blot analyses carried out with HL60 cells and primary CD14⁺ monocytes/macrophages (Fig. 5D). Confocal microscopy confirmed that surface CB₂ receptors are rapidly internalized upon PMA treatment (supplemental Fig. 1) in primary CD14⁺ monocytes/macrophages. Interestingly, phenylarsine oxide, a nonspecific TPI [18], also significantly internalized CB₂ receptors in CD14⁺ monocytes/

macrophages (Fig. 5A). Importantly, this effect appeared to be dependent on the monocyte differentiation state and could even be reversed in differentiated macrophages (Fig. 5A). To elucidate the mechanism of PMA-induced CB receptor internalization we next screened a range of kinases and phosphatases inhibitors, in addition to other agents known to affect primary cellular mechanisms. Notably, the internalization triggered by PMA could not be blocked by staurosporine or anilino-monoindolylmaleimide (AMAM) (Fig. 6), which are used as nonspecific PKC and PKC β inhibitors, respectively [55], clearly suggesting a PKC-independent mechanism. As shown in Fig. 6, during this screening we found that PAO, here shown to be a receptor internalizing agent (Fig. 5A), also effectively reversed the effect of PMA (Fig. 5A). Since PMA is nonspecific and exerts a broad range of effects, PAO is a broad-range TPI, and the phospholipase inhibitor n-butanol showed a tendency to externalize CB₂ receptors (Fig. 5A), we next tested a series of phosphatase, kinase and phospholipase D inhibitors. As shown in Fig. 6, none of the inhibitors but PAO was able to reverse the effect of PMA. Because PMA exerts a broad range of effects and other TPIs did not match the effect of PAO in this assay (data not shown), we did not continue this pursuit of combinatorial effects.

More interestingly, PAO was able to induce rapid CB receptor externalization in lymphocyte subsets that showed little or no constitutive CB₂ receptor surface expression. This effect was extremely robust (i.e. reproducible between individual blood donors) and thus enabled us to use PAO as a molecular tool to trigger CB receptor trafficking. To characterize the CB receptor trafficking in primary immune cells in more detail, subpopulations of lymphocytes were monitored for changes in surface expression after exposure to PAO. CD3⁺, CD4⁺ and CD8a⁺ lymphocytes with low levels of basal CB₂ receptor expression (geo mean \sim 3–5) displayed externalization of the receptor (Fig. 7A). In contrast, natural killer CD16⁺ cells, which are the lymphocyte subpopulation with the highest (geo mean \sim 200) basal CB₂ receptor expression [17], showed an internalization of the receptor (Fig. 7A), suggesting PAO was acting as a trigger for a binary biochemical switch. Interestingly, in CD19⁺ B cells surface expression of CB₂ receptors did not change upon PAO treatment (Fig. 7A), indicating a differential mode of regulation in this cell type or a lack of robust CNR2 expression. In our search for natural TPIs which may trigger the externalization of CB receptors in lymphocytes we found that hydrogen peroxide (H₂O₂), which is an endogenous reversible inhibitor of PTPs present in inflammatory tissues and the tumor microenvironment [36,56], induces the same effect as PAO (Fig. 7B). It also triggered CB₂ receptor trafficking in CD14⁺ monocytes/macrophages and lymphocytes. Peripheral blood mononuclear cells from different donors were exposed to increasing concentrations of H₂O₂, as well as in combination with orthovanadate, leading to the formation of pervanadate, which is an irreversible TPI [57]. The extent of PTP inhibition clearly correlated with the elicited trafficking response in a dose-dependent manner (Fig. 7B), resulting in CB₂ receptor internalization in CD14⁺ monocytes/macrophages and CB₂ receptor externalization in lymphocytes. The bidirectional trafficking in response to TPI treatment was determined by the basal surface expression of the receptor prior to treatment and thus illustrates the binary nature of the biochemical switch.

HL60 cells with different levels of basal receptor expression (low and high; geo mean values \sim 5 and \sim 160) were treated with H₂O₂, resulting in the predicted differential trafficking response according to basal surface receptor levels (Fig. 7C). These results confirm the regulation of the trafficking response observed in primary cells. Fig. 7D illustrates the effect of 3 different TPIs on CB₂ receptor surface expression in monocytes/macrophages, lymphocytes and HL60 cells. The binary switch regulation of CB₂ receptor surface expression was seen with all three TPIs in the different cell types with high statistical significance ($p < 0.005$) except for BPA-AM₂ in monocytes/macro-

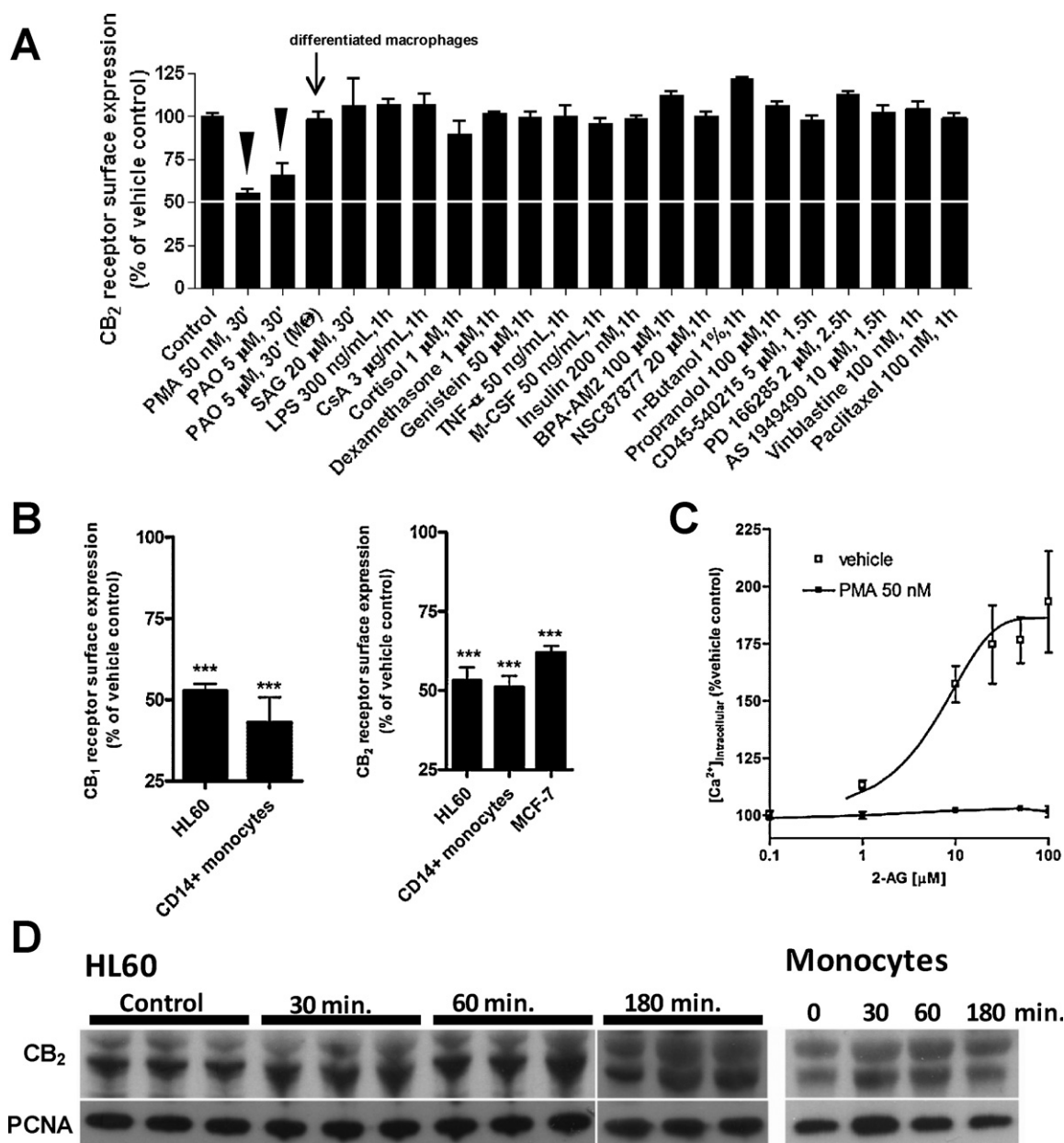


Fig. 5. Screening for agents that induce CB receptor internalization in CD14⁺ monocytes/macrophages. (A) A screen of different non-specific inhibitors and modulators of cellular functions shows that PMA and PAO significantly internalize CB₂ receptors. (B) Both CB₁ and CB₂ receptors are internalized by 50 nM PMA (30 min) in HL60 cells, primary monocytes/macrophages and MCF7 cells (1×10^6). Data show mean values \pm SD, $N = 3$ and were analyzed in a paired t -test. *** $p < 0.001$. (C) Pre-treatment by 50 nM PMA for 30 min abolishes 2-AG-induced intracellular calcium in HL60 cells. At least 5×10^3 gated cells were quantified in analytical FACS experiments. (D) CB₂ receptor Western blot showing a lack of protein degradation over 180 min subsequent of treatment with 50 nM PMA in HL60 cells and primary monocytes/macrophages (one representative experiment is shown). CB₂ receptors stain as double band (60 kDa), PCNA (32 kDa) was used as loading control. When semi-quantified by densitometry no difference between treated vs. vehicle control over time was found.

phages. In an analogous experiment, we monitored CB₁ receptor trafficking in PBMCs on H₂O₂, PAO, and PMA challenge. As shown in Fig. 7E, H₂O₂ did not induce CB₁ receptor internalization in monocytes/macrophages but a pronounced externalization of CB₁ receptors in lymphocytes in response to H₂O₂ (263%) and PAO (310%) treatment. These data suggest that CB₁ receptor surface expression might be regulated via the same mechanism in immune cells.

3.5. Lymphocyte activation induces CB₂ receptor externalization and changes the trafficking response to the tyrosine phosphatase inhibitor PAO and PMA

Activation of CD4⁺ lymphocytes with CD3/CD28 antibodies has been reported to result in CB₂ receptor externalization [58]. In

order to assess the differential regulation of CB₂ receptor trafficking between activated and resting lymphocytes, cells were activated with CD3/CD28 overnight and compared with freshly thawed non-activated lymphocytes in terms of possible changes in receptor cell surface expression and the subsequent response to PAO and PMA treatment. In agreement with the preceding results, lymphocytes significantly externalized CB₂ receptors after activation (Fig. 8). Whereas PAO significantly externalized CB₂ receptors in resting lymphocytes (204%), PAO only showed a non-significant trend toward CB₂ receptor externalization in the activated population (131%). Notably, in activated lymphocytes, PMA reversed CD3/CD28 induced CB₂ receptor externalization, restoring surface expression levels equal to non-activated cells.

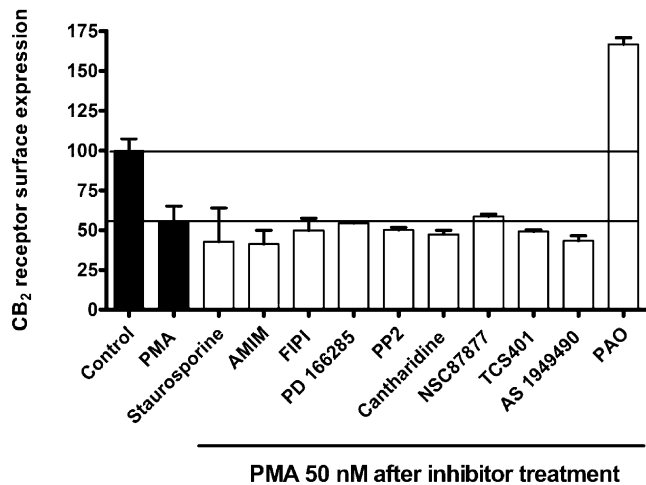


Fig. 6. Inhibition of distinct kinases and phosphatases to identify targets involved in PMA-induced CB₂ receptor internalization. CD14⁺ monocytes/macrophages (1×10^6) were pre-incubated with various inhibitors and subsequently treated with 50 nM PMA for 30 min prior to FACS analysis. Inhibitor panel: Staurosporin (unselective protein kinase C; PKC); AMIM (anilino-monoindolylmaleimide; protein kinase C β 2 inhibitor); FIP1 (5-fluoro-2-indolyl des-chlorohalopemide; phospholipase D; PLD); PD 166285 (tyrosine kinases); PP2 (Src-family tyrosine kinases); Cantharidin (protein phosphatase 1 and 2A inhibitor); NSC 87877 (Src homology phosphatase 1 and 2; SHP-1, SHP-2); TCS 401 (protein-tyrosine phosphatase 1B inhibitor); AS 1949490: (SH2-containing 5'-inositol phosphatase inhibitor); PAO (phenylarsine oxide; protein tyrosine phosphatase inhibitor). Data show mean values \pm SD, $N = 3$.

3.6. Lymphocyte donor differences in CB₂ receptor surface expression pattern

Lymphocytes generally displayed only low levels of CB₂ receptor at the cell surface (Fig. 9A). However, in a small number of donors (about one out of 10), a not further characterized subpopulation of lymphocytes with high CB₂ receptor surface expression levels (Fig. 9B, arrow) was observed, which we did not further characterize, but probably reflected a subpopulation of activated NK cells. In a typical experiment, PAO treatment-induced CB₂ receptor externalization in the lymphocyte fraction with low basal surface expression, resulting in an integrated externalization of CB₂ receptors for the whole lymphocyte population. In the rare donors with a high CB₂ receptor expression subpopulation PAO displayed a differential effect, externalizing CB₂ receptors in the low surface expressing cells and, in contrast, internalizing CB₂ receptors in cells with high basal surface expression (Fig. 9B). The resulting overall CB₂ receptor surface expression in the whole lymphocyte population was not significantly different from the control.

3.7. Clathrin and caveolin independence of PMA-induced endocytosis and possible involvement of lipid rafts in CB₂ receptor externalization

As we found CB₂ receptors in both cell membranes and lipid raft preparations from HL60 cells (Fig. 3B) and previous reports have suggested a caveolin- and/or clathrin-dependent internalization of CB₁ and CB₂ receptors, respectively [24,32,59,60], we further characterized the mechanism of CB₂ receptor internalization in primary immune cells by blocking these endocytotic pathways. PBMCs were incubated for 1 h with multiple inhibitors of clathrin- and caveolin-mediated endocytosis and subsequently treated with PMA to induce internalization (Fig. 10A). The established inhibitors of caveolin-mediated endocytosis methyl- β -cyclodextrine, a cholesterol-depleting agent [61–63], cantharidine, a serine/threonine phosphatase inhibitor [64] and PP2, a specific Src-kinase inhibitor [65], both involved in caveolin-mediated endocytosis, did not prevent PMA-induced endocytosis, thus suggesting a caveolin-independent endocytotic pathway. To assess the possible role of a

clathrin-mediated endocytosis, cells were pre-incubated with two inhibitors of clathrin-mediated endocytosis. Amantadine, which stabilizes clathrin coated pits at the cell membrane [66], and dansylcadaverine, a potent inhibitor of clathrin-mediated endocytosis which acts by preventing clathrin polymerization [67], did not block PMA-induced internalization (Fig. 10B). These data suggest that CB₂ receptor internalization in PBMCs is mediated by caveolin and clathrin-independent endocytotic pathways, although this may be different in cells transfected with CB₂ receptor constructs. Interestingly, when MCF7 cells stably expressing CB₂GFP (Fig. 10C) and normal MCF7 cells with low CB₂ receptor surface expression were incubated with 500 nM of MCD or 1 μ M of amphotericin B, which at this concentration also depletes cholesterol [68], a significant increase in CB₂ receptor surface expression was observed in both normal and CB₂ receptor transfected MCF cells (Fig. 10D and E). A similar increase in CB₂ receptor surface expression upon MCD treatment was also seen with other cell lines (not shown). This suggests that specific lipid membrane compartments may be involved in the basal internalization of these receptors or, alternatively, that the membrane architecture is artificially modified by MCD and amphotericin B, thus leading to an artificial recruiting of CB₂ receptors to the surface.

3.8. Localization of the intracellular CB₂ receptor pool

In order to identify the intracellular compartments in which the internalized CB₂ receptor pool resides, NIH3T3 mouse fibroblasts stably transfected with N-terminally eGFP-tagged murine CB₂ receptor (CB₂-GFP) were stained with specific markers for endoplasmic reticulum (ER), lysosomes, early endosomes and mitochondria (Fig. 11). We also transfected other cell lines, including MCF7 cells, but NIH3T3 cells showed the strongest expression. Most cells showed a pronounced CB₂-GFP receptor expression in the perinuclear region, which however did not co-localize with the ER (Fig. 11, Panel A), the lysosomes (Fig. 11, Panel B) or mitochondria (Fig. 11, Panel D). According to these results, intracellular CB₂ receptors in NIH3T3 cells (and probably other cells) reside in as yet unidentified cytoplasmic compartments from where they may be recruited to the cell membrane.

3.9. pH mediated CB₂ receptor internalization

Because a lowered pH in the 6.5 range has been reported in both inflamed tissue and the microenvironment of growing tumors [69,70], we also studied the impact of pH alterations on CB₂ receptor surface expression in peripheral immune cells. After PBMCs had been exposed to pH-adjusted media for 2 h, CB₂ receptor surface levels were quantified. As shown in Fig. 12, pH 6.5 led to a partial internalization of CB₂ receptors in lymphocytes (~75% of pH 7.5 control). On the contrary, monocytes/macrophages were more sensitive toward higher pH as indicated by the significant internalization at pH 8.5. To further investigate the interplay of an altered pH and reactive oxygen species, the TPI H₂O₂ was added to cells after 1 h of pre-incubation at pH 6.5. Interestingly, rescue from the pH-mediated internalization phenotype and even a significant externalization (~150%) was observed in lymphocytes. In monocytes/macrophages H₂O₂ again counterbalanced the pH effect, showing the differential action of H₂O₂ and again reflecting the distinct localizations of CB₂ receptors in monocytes and lymphocytes (see above).

3.10. Impact of glucose metabolism on CB₂ receptor cell surface expression

Recently, mitochondria in peripheral cells and neurons have been suggested to contain functional CB₁ receptors [13,71].

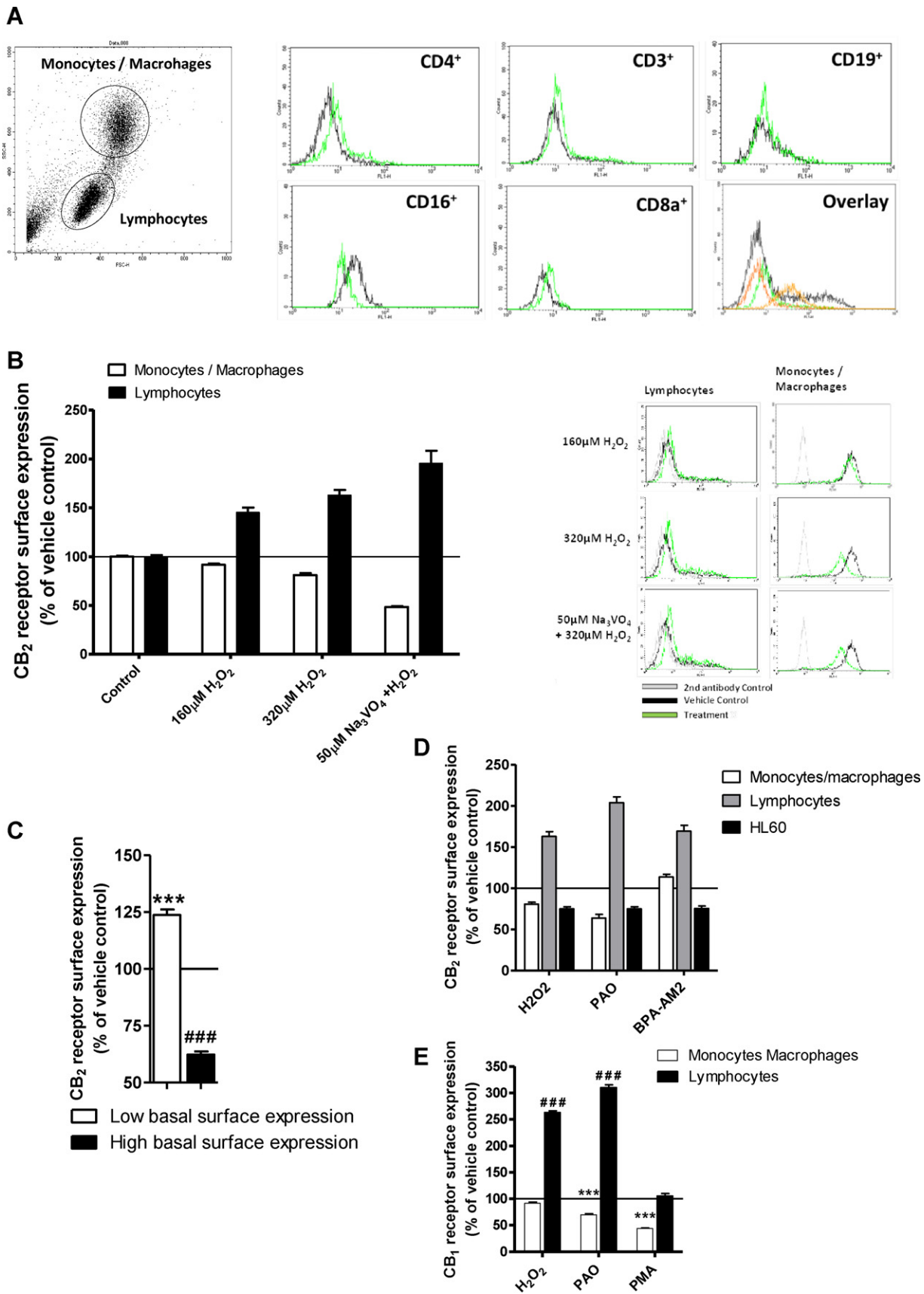


Fig. 7. CB₂ receptor surface expression is subject to a binary switch regulated by protein tyrosine phosphatases. (A) PBMCs isolated from buffy coat were gated into subpopulations of lymphocytes and monocytes/macrophages according to forward and side scatter profiles by analytical FACS for quantification of CB₂ receptor surface expression levels. Isolated lymphocytes (1×10^6) were incubated 1 h with the protein tyrosine phosphatase inhibitor PAO (5 μM), stained for CB₂ receptors and subgated for CD3⁺, CD4⁺, CD16⁺ and CD19⁺ subpopulations for analytical FACS. Overlay depicting differential basal CB₂ receptor surface expression of CD3⁺ (green), CD4⁺ (red) and CD16⁺ (orange) T cell subpopulations compared to whole lymphocyte population (black). Shown are representative graphs of independent experiments. (B) Human primary CD14⁺

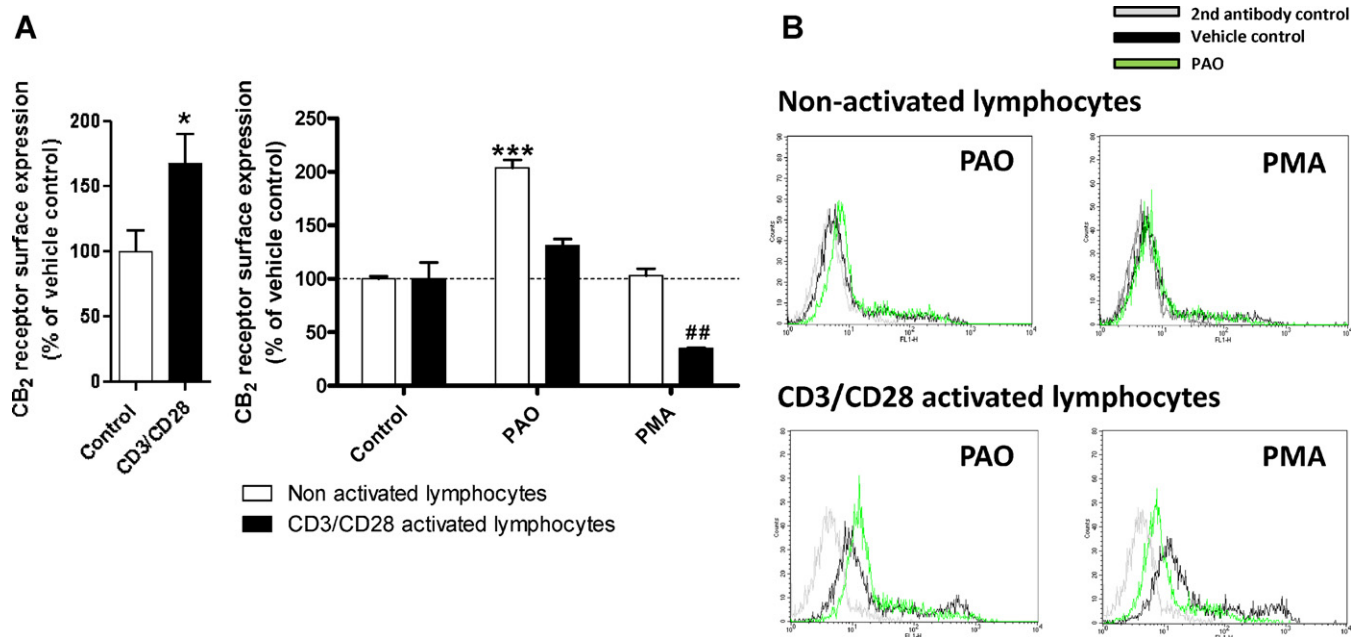


Fig. 8. Effect of lymphocyte activation on CB₂ receptor trafficking. 1×10^6 lymphocytes were activated over night with CD3/CD28 for 18 h and subsequently treated with 5 μ M PAO for 1 h or 50 nM PMA for 30 min (activated lymphocytes) or treated immediately after thawing (resting lymphocytes). Nonspecific binding of Abs to Fc receptors was negligible. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Data show mean values \pm SEM, $N = 6$, of two donors from two independent experiments. Cells were analyzed with Student's *t*-test, * $p < 0.05$, or two-way ANOVA followed by Tukey post hoc analysis *** $p_{adj.} < 0.001$, ## $p_{adj.} < 0.01$.

Elevated lactate levels have been reported in wound healing [72] where CB₂ receptors are likely to be expressed, and lactate is secreted in high amounts as a metabolite of anaerobic glucose metabolism by growing malignant cells [73,74], a mechanism called the Warburg effect. Although in our experiments we could not detect CB₂ receptors in mitochondria (Fig. 11), we nonetheless wanted to investigate the potential metabolic link to CB₂ receptor trafficking. To assess the putative effect of glucose metabolism and elevated lactate in the medium on CB₂ receptor surface expression, HL60 cells were incubated in an initial experiment with media containing different concentrations of glucose and ammonium-lactate as alternative energy source in glucose reduced (1 mg/ml) or glucose-free medium as adapted from Stern et al. [72]. Medium supplemented with ammonium lactate-induced a maximal internalization of CB₂ receptors (supplemental Fig. 2A), but also resulted in a pH shift of the medium to pH 8.7. Thus, in a next set of experiments ammonium-lactate was substituted by sodium-lactate, which is pH neutral (supplemental Fig. 2B), showing no significant effect on CB₂ receptor surface expression and thereby indicating that the pH shift (see also above) rather than the lactate ion-induced receptor internalization. U937 cells differentiated into macrophages express higher levels of CB receptors than undifferentiated U937 cells (data not shown) and activated macrophages are reported to show anaerobic glycosylation [75]. To investigate the possibility that anaerobic glycosylation modulates CB receptor surface expression, macrophages derived from PMA-stimulated U937 cells were shifted from anaerobic glycolysis to oxidative phosphorylation through incubation with dichloroacetate (DCA) alone or DCA combined with 2-deoxyglucose (2-DG) and lactate as

an alternative substrate for oxidative phosphorylation in the mitochondria. DCA shifts cells from anaerobic to aerobic glycolysis by inhibition of pyruvate dehydrogenase (PDK), a negative regulator of oxidative phosphorylation [76], whereas 2-DG is an inhibitor of glycolysis at the hexokinase level. As shown in supplemental Fig. 2, both treatments resulted in a trend toward reduction of CB₂ receptor surface expression. In order to test if the dramatic differences in CB receptor surface expression between HL60 cells and one aberrant HL60 clone lacking CB receptor surface expression [50] could be explained by differences in glucose metabolism by these cells, cells were incubated with DCA or oxamate, an inhibitor of glycolysis which blocks conversion of lactate into pyruvate and vice versa. As shown in supplemental Fig. 2, oxamate-induced a significant but small externalization of CB₂ receptors in the HL60 negative cell line, indicating sensitivity of the internalized CB₂ receptor pool to glucose metabolism. However, because the effects were less dramatic than those obtained with the TPIs they are likely to be indirect and therefore are not a trigger of the binary biochemical switch (see above).

4. Discussion

In this study we challenge the widely accepted view that agonist stimulation leads to CB receptor internalization (i.e. trafficking) in primary peripheral cells. We show that CB₂ receptor trafficking is mediated by ligand-independent mechanisms in immune cells and different cell lines. So far, the majority of studies has focused on CB₁ receptor transfected cells and neuronal cells [23,25,31,32]. The internalization of CB₁ receptors in response to

monocytes/macrophages and lymphocytes treated with protein tyrosine phosphatase inhibitors for 1 h at indicated concentrations. Hydrogen peroxide (H₂O₂); sodium orthovanadate (Na₃VO₄). (C) Two HL60 clones differing in basal CB₂ receptor surface expression (for FACS characterization see Fig. 4A), treated for 1 h with 320 μ M H₂O₂. (D) Effect of three different TPIs on CB₂ receptor surface expression in peripheral immune cells. Cells were treated for 1 h with 320 μ M H₂O₂, 5 μ M PAO and 100 μ M benzylphosphonic acid bis-acetoxymethyl ester (BPA-AM₂). (E) Effects of TPIs PAO (5 μ M), H₂O₂ (320 μ M) and PMA (50 nM) on CB₁ receptor surface expression. Data show mean values \pm SEM, $N = 9$ from 3 different donors and 3 independent experiments. Nonspecific binding of Abs to Fc receptors was negligible. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Effects were analyzed by one-way ANOVA followed by post hoc test for linear trend, indicating $p < 0.001$ for monocytes/macrophages and lymphocytes. (C–E) were analyzed with Student's *t*-test, ***/### $p < 0.001$. (For interpretation of the references to color in this figure legend, the reader is referred to the web version of the article.)

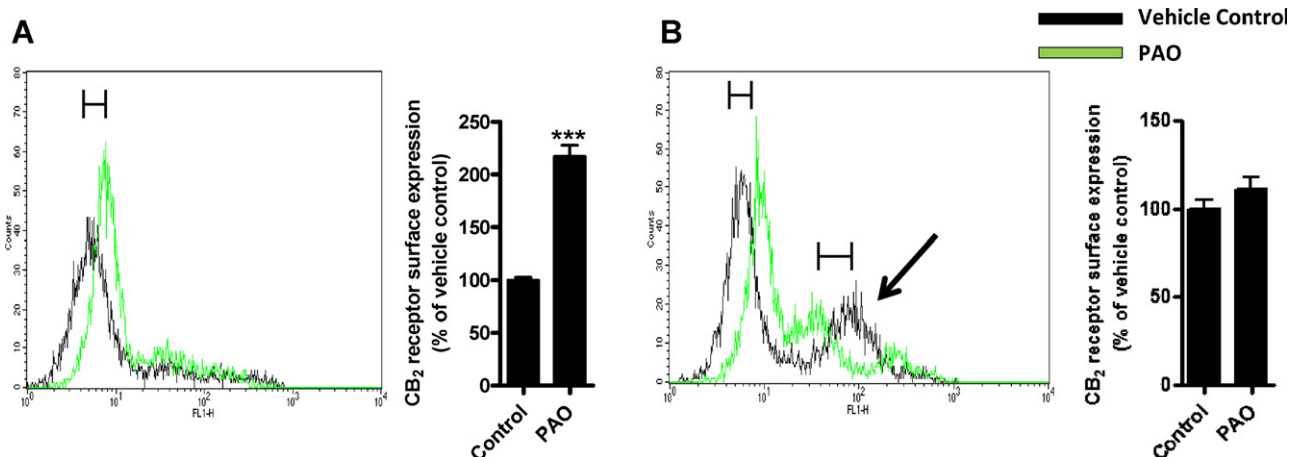


Fig. 9. CB₂ receptor trafficking in lymphocytes in response to PTP inhibition is donor dependent. (A) Lymphocyte population representing the normal CB₂ receptor expression pattern observed in the majority of all donors. (B) In rare cases, donors displayed a population of lymphocytes with high CB₂ receptor surface expression (arrow). When stimulated with 5 μ M PAO for 1 h, subpopulations with high CB₂ receptor surface expression internalized CB₂ receptors in these population but externalized CB₂ receptors in the low CB₂ receptor expressing population. Nonspecific binding of Abs to Fc receptors was negligible. Data show mean values \pm SD from 3 independent experiments and analyzed with unpaired *t*-test, ****p* < 0.005. At least 5×10^3 gated cells were quantified in analytical FACS experiments.

agonist stimulation via both clathrin-coated-pits and the caveolae pathway has been described for both heterologous expression systems [77] and primary neurons [78–80]. That functional cell surface receptors are internalized by endocytosis upon activation is a fundamental component of GPCR biology [81] as a controlled internalization of receptors from the cell surface modulates cell sensitivity to specific ligands. It was shown that CB₁ receptors do not recycle following constitutive or agonist-induced internalization but instead exhibit a primarily degradative phenotype [25]. In contrast to the recycling hypothesis, downregulation of CB₁ receptors following chronic agonist stimulation has been widely reported [82], and GASP-1 [80,83] and AP3 [84], adaptor proteins associated with sorting and delivery of receptors to lysosomes, were demonstrated to interact with CB₁ receptors. On the other hand, very limited data is available on cellular CB₂ receptor localization and trafficking mechanisms in primary cells [17,31]. Although it has been suggested that CB₂ receptors internalize via Rab5-mediated endocytosis and that internalized receptors are recycled via a Rab11-associated pathway upon agonist stimulation [31], these studies have been carried out in overexpression systems. While in our study we confirm that CB₂ receptors recombinantly expressed in CHOK1 cells internalize upon agonist stimulation (Fig. 1), we also provide evidence that agonist stimulation of human primary monocytes/macrophages and lymphocytes, as well as HL60 and MCF7 cells does not lead to internalization of cell-surface CB₂ receptors (Fig. 1). Because a rapid phosphorylation of CB₂ receptors upon CP55,940 stimulation in HL60 cells was shown [27] we conclude that the lack of internalization is not due to the absence of receptor phosphorylation in these cells. Interestingly, different agonists may also mediate different effects on receptor trafficking [32], thus exhibiting a similar functional heterogeneity reported for CB₂ receptor inverse agonists [85]. Although CP55,940 robustly internalizes receptors in cells heterologously expressing CB₂ [32], in our hands, this agonist did not trigger CB₂ receptor trafficking in primary cells. Thus, observations obtained in heterologous expression systems may not exactly reflect the trafficking behavior in peripheral cells such as immune cells and need to be interpreted cautiously. Differences in trafficking behavior might be due to cell type specific expressions of proteins involved in the endocytotic machinery, divergent post-translational modification or distinct protein–protein interaction patterns [86]. The importance of CB receptor surface expression changes in

disease may be related to such mechanisms, in addition to gene expression [22]. In our hands, different cell lines showed significant differences between CB receptor gene expression and receptor cell-surface expression (Figs. 1 and 2). In many cell types, CB receptors in the cell membrane are lacking despite the presence of CB receptors in cytoplasmic compartments (i.e., positive in Western blots but negative in FACS experiments). Moreover, clones from the same cell line may exhibit dynamic changes in CB receptor surface expression (Figs. 2 and 3). Such observations indicate the necessity to perform experiments in primary cells to allow the results to be contextualized within more physiological settings.

Importantly, GPCR surface expression not only regulates accessibility of receptors to ligands but determines signaling from distinct compartments. The view of exclusive GPCR cell surface expression after synthesis has recently been challenged for CB₁ receptors by independent reports showing that endogenously expressed CB₁ receptors in adipocytes and neurons are localized and functional in intracellular compartments [87–89], with one report indicating that only about 15% of CB₁ receptors are surface expressed [90]. Elegant studies by Brailoiu et al. [91] and Benard et al. [71] have demonstrated signaling of intracellular CB₁ receptors located in lysosomes and mitochondria, respectively, suggesting that the intracellular pool of receptors is functional. The latter study shows significant functional signaling of mitochondrial CB₁ receptors in neurons and thus opens up an entirely new field of research [71]. The impact of intracellular CB receptor signaling on cell physiology remains to be established but is likely to be of relevance upon ligand treatment, as many compounds targeting CB receptors are lipophilic and readily cross cell membranes.

While mitochondria, lysosomes, endosomes and the perinuclear region have already been suggested as intracellular compartments of storage, redistribution and degradation for CB₁ receptors [23,25,84,92], little is known about intracellular CB₂ receptors. We observed pronounced perinuclear localization of tagged overexpressed CB₂ receptor constructs in several cell lines with only partial membrane localization of the receptor (data not shown). NIH3T3 cells expressing a CB₂ receptor construct N-terminally tagged with eGFP (CB₂-GFP) showed no specific staining of endoplasmatic reticulum, lysosomes and mitochondria, indicating that CB₂-GFP does not co-localize with these compartments. Some yellow areas in the merged picture of the early endosome

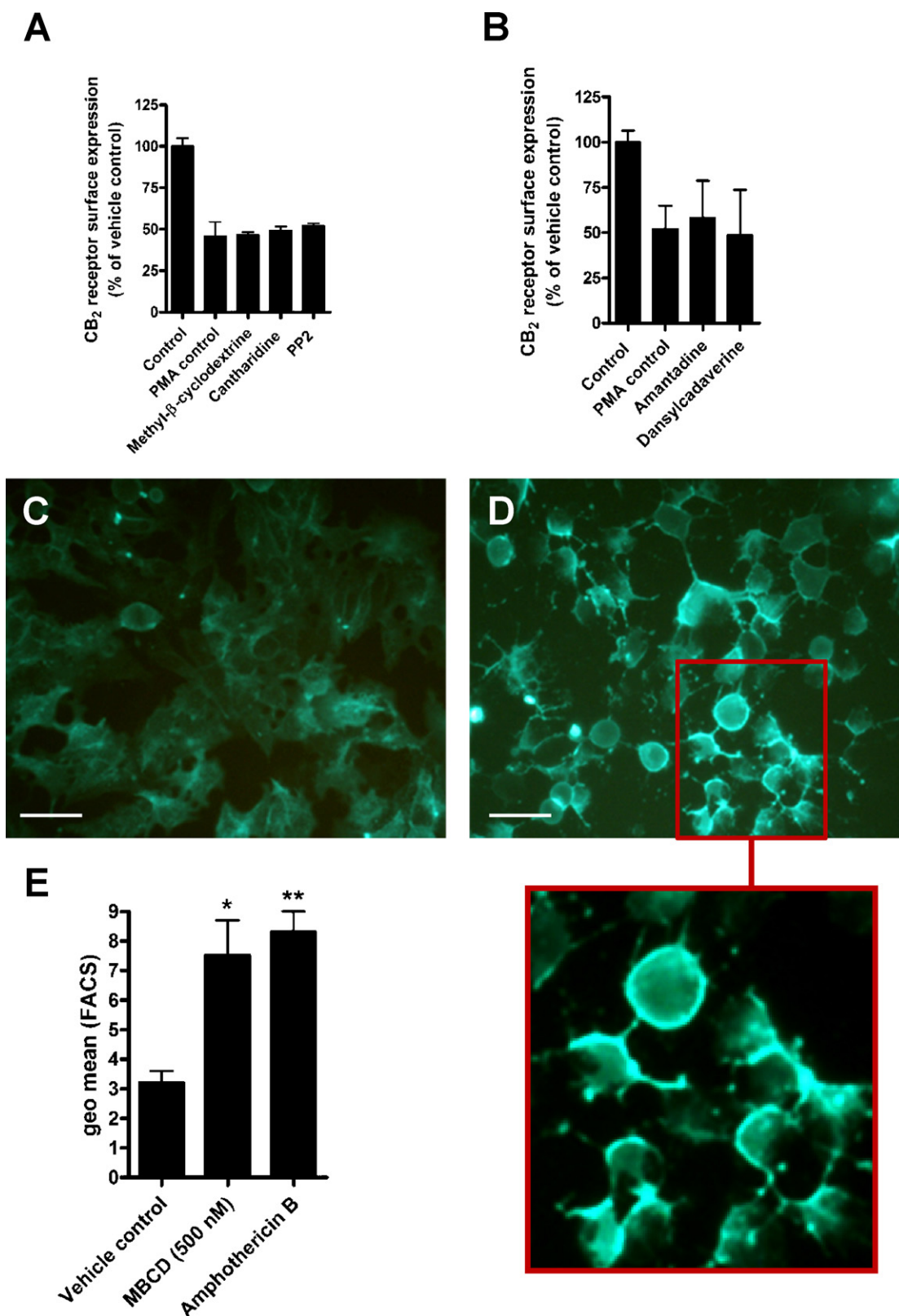


Fig. 10. PMA-induced CB₂ receptor internalization is mediated by an apparently clathrin- and caveolin-independent process in primary monocytes/macrophages. (A) 1×10^6 cells were pre-incubated for 1 h with different inhibitors of caveolin-mediated endocytosis or (B) clathrin-mediated endocytosis followed by addition of PMA to elicit receptor internalization. Inhibitors were used at the following concentrations: Methyl-β-cyclodextrine (2.5 mM), cantharidine (5 μM), PP2 (20 μM), amantadine (100 μM), dansylcadaverine (100 μM). (C) CB₂-GFP receptor transfected MCF7 cells show significant cytoplasmic expression. (D) MBCD (500 nM) treatment for 30 min led to increased CB₂ receptor localization in cell membranes. (E) In nontransfected MCF7 cells treatment with MBCD (500 nM) and amphotericin B (1 μM) for 3 h showed a significant increase of CB₂ receptor surface expression. Mean values \pm SD are shown, $N = 3$. Data was analyzed with paired t -test, * $p < 0.05$; ** $p < 0.01$.

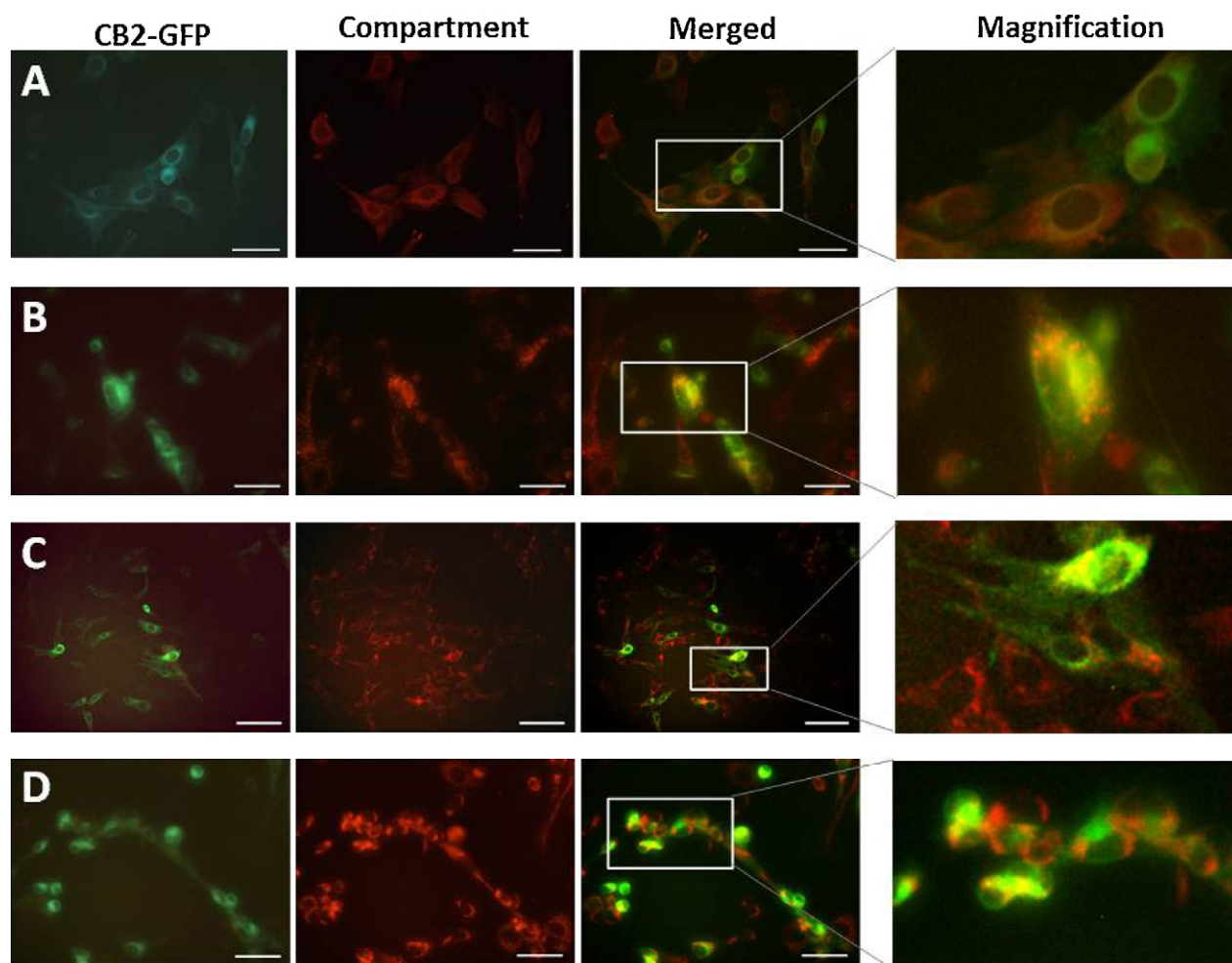


Fig. 11. Localization of intracellular CB₂-GFP in NIH3T3 mouse fibroblasts. Logarithmically growing NIH3T3 cells stably expressing the receptor with an N-terminal eGFP tag were stained with different markers of intracellular compartments as described in the experimental procedures. (A) Endoplasmatic reticulum immunostained with PDI Ab, SPA-891 (Stressgen). (B) Lysosomes stained with Lysotracker[®] (Invitrogen). (C) Early endosomes immunostained with early endosome antigen 1 (EEA1). (D) Mitochondria stained with Mitotracker[®] (Invitrogen). The scale bar is 50 μ m. Representative pictures from independent experiments are shown.

stain suggested putative co-localization of CB₂ receptors with endosomes (Fig. 11), which is likely due to overexpression of CB₂-GFP in this cell as in preparations with lower expression levels endosome stain and GFP signal do not co-localize.

To further characterize the endocytotic pathways involved in CB₂ receptor internalization, we investigated caveolin and clathrin-mediated endocytosis in primary monocytes/macrophages. Both pathways have been described to be involved in CB₁ and CB₂ receptor internalization within the context of heterologous expression cells (both receptors) and in endogenously expressing cells (CB₁) [24,77,80]. Pathway specific inhibitors did not reduce PMA-induced CB₂ receptor endocytosis, suggesting caveolin- and clathrin-independent internalization pathways in primary monocytes/macrophages.

Accumulating evidence from a number of studies indicate that homo- and heterodimerization of GPCRs is a common phenomenon [93]. For example, CB₁ receptors were shown to form heterodimers with the D2 dopamine receptor, the μ -, κ - and δ -opioid receptor, the orexin-1 receptor, the A_{2A} adenosine receptor and the β_2 -AR receptor [94–97]. Additionally, using an anti-CB₁ receptor antibody, which preferentially recognizes the multimeric form of the receptor, homodimerization and oligomerization of CB₁ receptors has been shown by SDS-Page [51] and in immunohistochemical studies [51,98,99]. HL60 cells endogenously express high levels of CB receptors (similar to primary monocytes/macrophages) and surface

expression levels appears to be dynamic in this cell line and do vary significantly even between certified batches of original suppliers such as ATCC and DSMZ (Fig. 3). Notably, the CB₁ and CB₂ receptor surface expression ratio stayed at a constant level of 1:1, independently of absolute expression levels. This led us to hypothesize the potential heterodimerization of CB₁ and CB₂ receptors in this cell line. Typically, in immunoprecipitation studies two receptors with distinct epitope tags are heterologously expressed in cell lines, allowing for subsequent precipitation. However, artificially high levels of protein expression and alteration of protein structure due to introduction of tags creates the possibility of detecting false positives in these systems. For the first time we provide evidence for the formation of heterocomplexes of CB₁ and CB₂ receptors in untransfected HL60 cells, utilizing different antibodies for each receptor. In order to establish a second line of evidence for heterodimerization, we created a shRNA partial CNR1 knock down HL60 mutant, which showed 60% reduction of CB₁ receptor surface expression compared to the mock transfected control. Notably, this reduction of CB₁ receptor surface expression was accompanied by a stoichiometrically matching 54% decrease in CB₂ receptor surface expression (Fig. 4D), indicating that heterocomplex formation may be a prerequisite for CB₁ and CB₂ receptor externalization in this cell line. Altered receptor signaling has been reported to be a functional consequence of GPCR heterodimer formation and some of the many discrepancies observed in CB

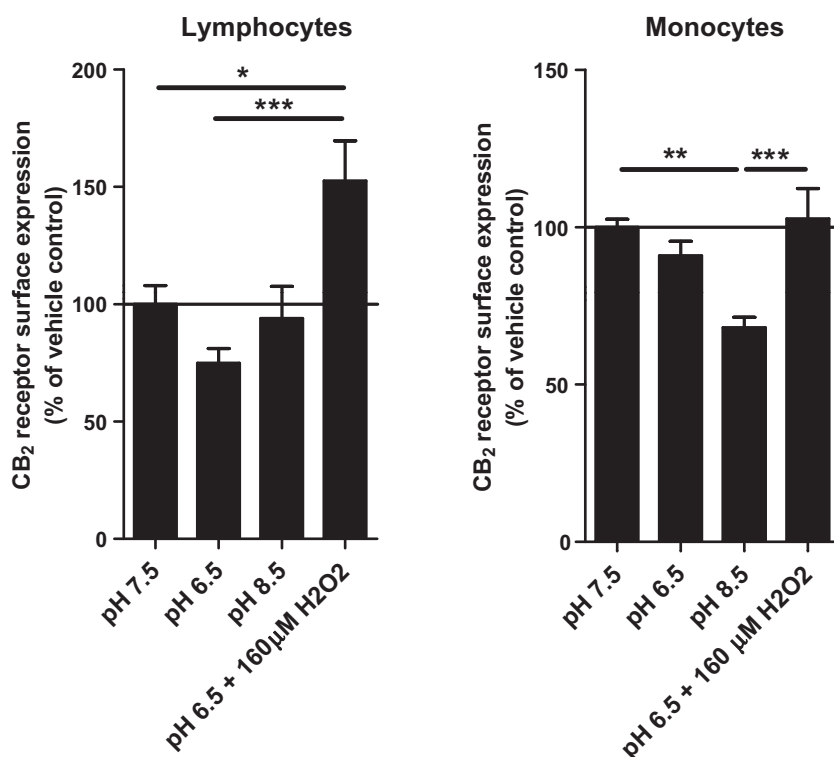


Fig. 12. pH-dependent internalization of CB₂ receptors in primary CD14⁺ lymphocytes and monocytes/macrophages. 1×10^6 cells were incubated in low glucose medium (1 mg/ml) at pH 6.5, 7.5 and 8.5 for 2 h. In treatments with hydrogen peroxide, 160 μ M H₂O₂ was added after 1 h pre-incubation in pH 6.5 medium and co-incubated for 1 h after addition. At least 5×10^3 gated cells were quantified in analytical FACS experiments. Data show mean values \pm SD, $N = 3$ and were analyzed by one-way ANOVA followed by post hoc Tukey test, ** $p_{adj.} < 0.01$, *** $p_{adj.} < 0.001$.

receptor signaling between different cell types could be due to CB₁/CB₂ receptor heterodimerization. It will be interesting to study the role of CB receptor heterodimerization in promyelocytic cells and the potential association to other cannabinoid-sensitive GPCRs like GPR55 [100].

CB₂ receptors are expressed in all major leukocyte subsets in human blood [17] with surface expression levels varying from almost absent to very pronounced (Figs. 8 and 9). Many of the studies reporting the role of CB receptors in immune regulation have utilized SDS-Page Western blots of whole cell extract or RT-PCR to demonstrate the presence of CB receptors in particular cells [101,102]. A limitation of these approaches is that although total expression levels are quantified no information on cell surface expression of the protein is obtained. Regulation of GPCR cell surface expression is a commonly noted phenomenon [103]. Data obtained in our study indicate low, high and dynamically fluctuating CB₂ receptor surface expression patterns in diverse cell lines. Based on these observations, we were interested to identify mechanisms involved in the modulation of CB₂ receptor surface expression in immune cells. PMA only triggered internalization of CB receptors expressed at the surface but in none of the experiments did it externalize CB receptors. Since PMA has multiple effects, several of which are independent of PKC [104], it is difficult to speculate on the underlying mechanism. TPIs like PAO can trigger both internalization and externalization of CB receptors, depending on the basal state of cellular receptor localization before treatment.

In this study we demonstrate that TPIs elicit robust cell-type specific CB₂ receptor trafficking in peripheral mononuclear cells and trigger a binary biochemical switch. Quantification of surface expression by analytical FACS shows, in agreement with previous studies [17], that monocytes/macrophages are among the cells with the highest CB₂ receptor surface expression, whereas resting

lymphocytes do display the lowest levels of blood-derived leukocytes [17,58]. Treatment of PBMCs with increasing concentrations of H₂O₂, a reversible TPI, and pervanadate, an irreversible TPI, resulted in a concentration-dependent trafficking response. Monocytes/macrophages with high basal surface expression internalized CB₂ receptors, whereas a pronounced externalization of CB₂ receptors in lymphocyte subsets was observed. At a mechanistic level, internalization and externalization of GPCRs is mediated by protein–protein interactions and our data suggest that it is only partially dependent on lipid rafts, but very strongly on tyrosine phosphorylation. Since we observe full internalization or full externalization upon incubation with TPIs, we termed this mechanism “binary switch”. The PTP inhibitor phenylarsine oxide was most effective in triggering this biochemical switch and is therefore a novel tool agent to study the amount of intracellular receptors that can be recruited to the cell surface. Treatment with PAO for 30 min prior to FACS analysis provides an excellent means to distinguish between CB receptor de novo expression and trafficking.

H₂O₂ is an endogenously produced reversible TPI and its transient release with other reactive oxygen species (ROS) by phagocytic leukocytes during the immune response is well documented. Apart from its microbe-killing properties accumulating evidence suggests important second messenger functions for H₂O₂ in T cell activation and leukocyte migration [105]. The action of endogenously produced H₂O₂ is very locally restricted, due to enzymatic removal by catalase, glutathione peroxidase and peroxiredoxins [106]. These scavenger enzymes are distributed throughout the cell, with catalase displaying one of the fastest enzymatic kinetics (4 million molecules/s), resulting in a 1 ms half-life for H₂O₂ and an estimated effector range of a few molecular diameters [106]. Thus, a very local regulation of PTP activity within the cell, close to the production site of H₂O₂ has been proposed.

This also explains the need and validity for the addition of micromolar to low millimolar doses of exogenous H_2O_2 to simulate endogenous H_2O_2 production, which is estimated to be in the low nanomolar range in steady-state cells [107], but reaching μM levels at sites of inflammation [36,108]. In contrast to the other ROS species such as superoxide anion and hydroxyl radicals, H_2O_2 is a rather mild oxidant that targets primarily the essential cysteine residues of PTPs with a low pK_a of 4.7 to 5.4 in their conserved catalytic center, whereas only few other proteins are oxidized [109] due to a prevalent pK_a of ~ 8.5 of most sulfhydryl groups of cysteine residues [110]. Oxidation of the catalytic center renders PTPs completely inactive, thereby resulting in a shift toward protein phosphorylation.

We studied lymphocyte subpopulations after incubation with PAO. A general pattern of CB_2 receptor externalization was observed in CD4^+ , CD3^+ and CD8a^+ T-cells with the exception of CD16^+ natural killer (NK) cells, which displayed internalization. Comparing basal surface expression of NK cells with the other subtypes, it is evident that NK cells show the highest basal CB_2 receptor cell surface expression of all T cells, in agreement with previous reports [17]. Therefore, the proposed pattern of binary trafficking behavior is also reflected within the lymphocyte population. The next set of experiments was designed to rule out that unspecific side effects of the PTP inhibitors were responsible for the changes in surface expression. HL60 cells, a widely used promyelocytic leukemia cell line, has the potential to differentiate into a granulocytic, macrophage or neutrophil phenotype. Different batches of these cells from ATCC and DMSZ, although certified, differed markedly in basal CB_1 and CB_2 receptor expression. Consistent with the binary switch hypothesis, incubation of cells with H_2O_2 -induced both externalization and internalization of receptor according to basal expression levels, thereby demonstrating that even within one model system both trafficking directions are regulated by a “tyrosine phosphorylation tone”. In an additional experiment, PBMCs and HL60 cells were incubated with 3 different PTP inhibitors, reflecting the predicted trafficking pattern in all combinations with a single exception of BPA- AM_2 in monocytes, leading to a slight externalization. Finally, we also showed CB_1 receptor internalization in monocytes/macrophages and CB_1 receptor externalization in lymphocytes, on incubation with H_2O_2 and PAO, mirroring the pattern of CB_2 receptor trafficking. The immediate upregulation of CB_1 and CB_2 receptors within 1 h of compound incubation indicates the mobilization of intracellular pools rather than de novo synthesis of receptors. This hypothesis is also supported by the lack of receptor degradation upon internalization and the fact that previous reports have described lymphocytes to be CB_1 and CB_2 receptor positive in SDS-PAGE and PCR [49,111], despite lacking surface expression as indicated by FACS analyses. Since PAO triggers the switch in both directions (i.e. binary), it is unlikely that these events are GRK-mediated phosphorylations of the receptor [24].

To better appreciate the importance of protein PTP activity for tyrosine phosphorylation levels one has to keep in mind that protein PTPs are powerful negative regulators compared to the phosphorylation activity of protein tyrosine kinases (PTKs). Dephosphorylation by PTPs is a first order reaction, whereas phosphorylation by PTKs requires ATP and therefore is a second order reaction. This results in a 100–1000-fold higher turnover rate of an active PTP compared to a PTK [109]. Due to the consistent observations of robust CB_2 receptor trafficking in response to distinct unspecific PTP inhibitors we were interested in identifying the relevant target PTPs by employing specific inhibitors. PTPs have received much less attention compared to PTKs and the function of most PTPs expressed in immune cells is still far from clear [112]. Several PTPs have been reported to be expressed at

high levels exclusively in cells of hematopoietic origin or to play a role in T cell activation, a process known to stimulate CB_2 receptor externalization [58]. Notably, it is known that PTPs are non-redundant, display a striking degree of specificity and are not promiscuous house-keeping enzymes [113], additionally illustrated by the fact that the number of genes for PTKs (107) and PTPs (90) are very similar, with at least 45 different PTPs expressed in T cells [112]. Inhibition of several putative target PTPs, including CD45, an important tyrosine phosphatase in leukocytes, SHP-1, SHP-2, HePTP and PTP1B did not affect CB_2 receptor cell surface expression, rendering the search for the target PTP(s) unresolved.

Lymphocyte CB_2 surface expression has been reported to be very low in resting cells [17,58], consistent with the results of this study. The externalization of CB_2 receptors upon activation of T cells has been reported previously [58], suggesting dynamic regulation of CB receptor signaling under inflammatory conditions. We were therefore interested in the impact of PTP inhibition and PMA on activated lymphocytes. CD3/CD28 activated lymphocytes displayed higher surface expression than resting lymphocytes, in agreement with results from a previous report [19]. Notably, significant PAO-induced CB_2 receptor externalization was present only in resting lymphocytes, indicating that CD3/CD28 activation already depleted the available intracellular CB_2 receptor pool for further externalization. Interestingly, PMA reversed CD3/CD28 -induced CB_2 receptor externalization, thereby restoring expression levels comparable to those of resting cells, whereas PMA had no significant effect on resting T cells with low surface expression levels. The normal CB_2 receptor surface expression pattern of lymphocytes from donors was characterized by a major population displaying very low surface levels and few cells with elevated surface levels. However, in a small number of donors (about 10%) a significant, but as yet uncharacterized subpopulation of lymphocytes with high CB_2 receptor surface levels was found. In these donors PAO-induced subpopulation specific CB_2 receptor internalization and externalization in accordance with the binary switch hypothesis, depending on basal surface expression levels prior to PAO stimulation.

Based on reports of lowered pH under inflammatory conditions and in the microenvironment of malignant tumors, we were interested in the effects of altered pH on CB_2 receptor surface expression in PBMCs, which are known to migrate and accumulate at these sites [114]. pH values as low as pH 6.5 have been reported [115] and both monocytes/macrophages and lymphocytes responded with CB_2 receptor internalization, with a more pronounced effect in lymphocytes (25% vs. 9% internalization). Elevated levels of reactive oxygen species are also hallmarks of inflammatory and tumor tissue, a condition we simulated by co-challenging cells with lowered pH and H_2O_2 . H_2O_2 rescued the pH-mediated internalization, indicating interplay of the two parameters in physiological settings. We also assessed the impact of altered glucose metabolism reported for activated macrophages [75] on CB_2 receptor cell surface expression (supplemental Fig. 2), indicating glucose metabolism independency of CB_2 receptor surface expression in macrophages and HL60 cells.

In summary, our results show that agonist exposure does not result in CB_2 receptor internalization in important subsets of primary immune cells and several cell lines, contrasting with the data obtained so far from heterologous expression models. Additionally, we report on a binary biochemical switch of CB_2 receptor cell surface expression which is under the control of PTPs and regulates trafficking of CB_2 receptors from intracellular compartments to the cell membrane or internalization of CB_2 surface receptors, depending on the basal state of the receptor prior to treatment. Based on these data it is feasible that CB_2 receptor expression in primary cells is strongly and dynamically regulated by yet to be characterized trafficking mechanisms. For

the first time we provide experimental evidence for oligomerization and heterocomplex formation of CB₁ and CB₂ receptors in the cell membrane of HL60 cells endogenously expressing both receptors. Our findings may have a significant impact on further studies elucidating the therapeutic potential of CB₂ receptor-selective ligands, as receptor availability for ligand binding is a crucial determinant for drug action. Moreover, in order to develop therapeutic strategies targeting CB₂ receptors it is important to understand the regulation of trafficking (i.e. intracellular vs. extracellular receptors) under physiological and pathophysiological conditions.

Acknowledgments

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Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at doi:10.1016/j.bcp.2012.02.014.

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