

AGONIST SPECIFIC DESENSITIZATION OF LEUKOTRIENE C₄-STIMULATED
PGI₂ BIOSYNTHESIS IN HUMAN ENDOTHELIAL CELLS

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SUMMARY: Leukotriene C₄ (LTC₄) and, to a lesser extent, leukotriene D₄ (LTD₄) concentration dependently stimulate prostacyclin (PGI₂) biosynthesis in cultured human umbilical vein endothelial cells. PGI₂ biosynthesis was quantitated by radioimmunoassay and its structure confirmed by gas chromatography/mass spectrometry. Preincubation of endothelial cells with LTC₄ resulted in desensitization to subsequent LTC₄ stimulation. However, PGI₂ biosynthesis in response to thrombin, PGH₂ and arachidonic acid was not inhibited by preincubation with LTC₄. The C-6-sulfidopeptide leukotriene receptor level antagonist FPL-55712 attenuates LTC₄, but not thrombin-stimulated PGI₂ biosynthesis. These data suggest that human umbilical vein endothelial cells have a C-6-sulfidopeptide leukotriene receptor, and that stimulation of this receptor results in PGI₂ biosynthesis.

The synthesis of prostaglandin I₂ (PGI₂) by cultured human endothelial cells was first observed by Weksler et al. (1,2). Later, Baenziger et al. (3) observed that histamine stimulates PGI₂ biosynthesis, and Marcus et al. (4) showed that exogenously added prostaglandin H₂ could serve as a precursor for PGI₂ biosynthesis.

Another family of vasoactive lipids that are derived from arachidonic acid are the leukotrienes. Leukotriene B₄ is a potent stimulator of human neutrophil chemotaxis, aggregation, and degranulation, but has little intrinsic cardiovascular activity (5-9). The C-6-sulfidopeptide leukotrienes (LTC₄, LTD₄) are vasoactive and contract a variety of smooth muscles (10-14). Both LTC₄ and LTD₄ induce a transient contraction of arterioles, and exudation of fluid from post capillary venules (6). LTD₄ also causes a decrease in coronary blood flow in anesthetized sheep and dogs (14,15). Since cyclo-oxygenase inhibitors have been reported to attenuate some of the cardiovascular activities of the sulfido-

peptide leukotrienes (16), we examined the influence of LTC₄ and LTD₄ on PGI₂ biosynthesis in human umbilical vein endothelial cells.

MATERIALS AND METHODS

Leukotrienes C₄, D₄, and arachidonic acid, were obtained from The Upjohn Company, Kalamazoo, MI. PGH₂ was biosynthesized according to Gorman et al. (17). Thrombin (200 U/ml) and histamine were purchased from The Sigma Chemical Company, St. Louis, MO. Indomethacin was obtained from Merck and Co., Rahway, NJ. FPL55712 was obtained from Fisons Co., Leicestershire, England. ³H-6-keto-PGF₁α (120.0 Ci/mmol) was purchased from New England Nuclear, Boston, MA. 6-Keto-PGF₁α antibody was purchased from Collaborative Research, Waltham, MA.

Endothelial cells were derived from human umbilical cord veins as described by Jaffe et al. (18). Gas chromatography/mass spectrometry of 6-keto-PGF₁α was done as previously described (20).

PGI₂ biosynthesis was studied by measuring 6-keto PGF₁α by radioimmunoassay (19). Data are represented as the mean ± SEM of triplicate determinations. Cells pretreated with 10 μM indomethacin were incubated for 10-20 minutes before the addition of agonist.

RESULTS AND DISCUSSION

Incubation of human umbilical vein endothelial cells with LTC₄ and, to a lesser extent, LTD₄ results in a concentration dependent stimulation of PGI₂ biosynthesis (Figure 1). Maximal stimulation by LTC₄ is observed between 145 and 480 nM, LTD₄ approaches the maxima at 2 μM (Figure 1).

Since our measurement of PGI₂ biosynthesis was done using a radioimmunoassay for 6-keto-PGF₁α, we wanted to be sure that we were actually studying PGI₂ biosynthesis. We therefore incubated endothelial cells with 480 nM LTC₄ for 30 min, extracted the lipid products from the incubation medium, and performed gas chromatography-mass spectrometry on the extract. The principal component of the extract after base treatment and derivatization displayed prominent ions at m/z 115, m/z 378, m/z 418, m/z 508, and the molecular ion at 629. The spectrum corresponds exactly with the spectrum of the authentic 6-keto-PGF₁α standard, and proves without equivocation that prostacyclin is produced in response to LTC₄. Unstimulated cultures did not produce enough 6-keto-PGF₁α to detect by GC/MS techniques.

An analysis of the time course of LTC₄-stimulated PGI₂ synthesis shows that significant levels of PGI₂ are produced during the first 5 minutes of incubation, and that essentially maximal synthesis is achieved within 15 minutes

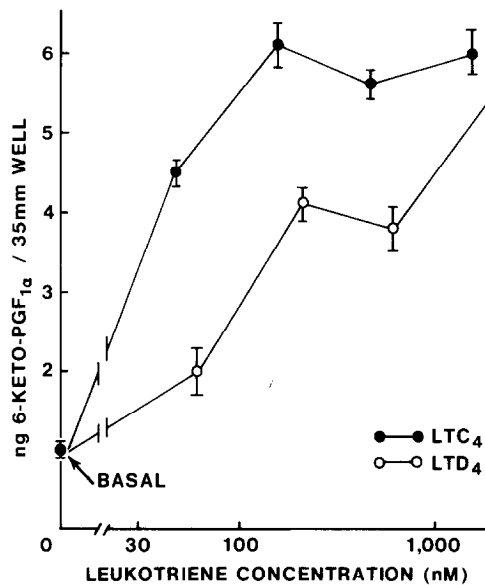


Figure 1: Concentration Dependent Stimulation of Prostaglandin I₂ Biosynthesis by Leukotriene C₄ and D₄.

Human endothelial cells (0.67×10^6 cells/well), were washed and incubated for 30 min at 37°C with either LTC₄ or LTD₄ at the indicated concentrations. 6-keto-PGF_{1α} was measured in the incubation medium by radioimmunoassay. The basal level of 6-keto-PGF_{1α} did not significantly increase during the 30 min incubation period.

(Figure 2). Thrombin-stimulated PGI₂ synthesis is maximal within 10 minutes, and is much more pronounced than the stimulation observed with LTC₄ (Figure 3). It should be noted that incubation of the endothelial cells with $10 \mu\text{M}$ indomethacin (a potent prostaglandin cyclooxygenase inhibitor) completely inhibits both LTC₄ and thrombin-stimulated PGI₂ synthesis (Figure 2).

If the LTC₄-stimulation of PGI₂ biosynthesis is a receptor mediated activity, it should display agonist-specific desensitization. To test this, we incubated endothelial cells for 20 min at 37°C with $16 \mu\text{M}$ LTC₄, washed the cells 3 times, and restimulated the cells with from 48 to 480 nM LTC₄ (Figure 3). This response was then compared to naive cells which were not preincubated with LTC₄, but were washed in the same manner. The naive cells exhibited a marked stimulation of PGI₂ biosynthesis in response to LTC₄, but the cells that were preincubated with LTC₄ did not respond to the second addition of 48 to 480 nM LTC₄ (Figure 3). The desensitization is agonist specific, because

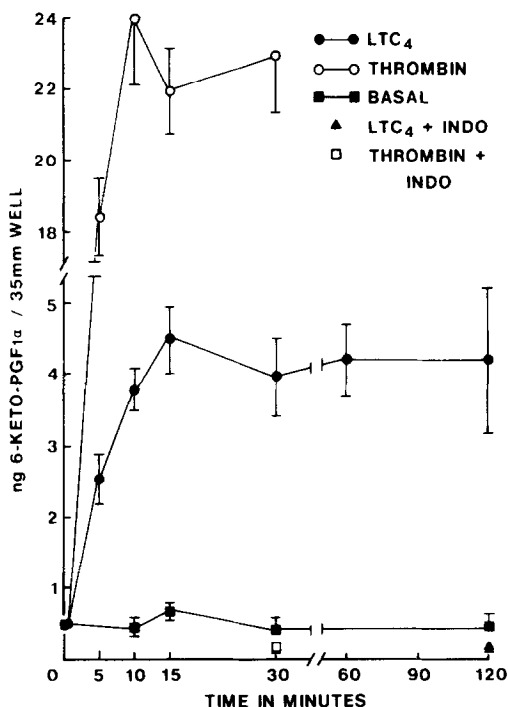


Figure 2: Time Course of LTC₄ and Thrombin-Stimulated PGI₂ Biosynthesis.

Human endothelial cells (0.91×10^6 cells/well) were exposed to $0.48 \mu\text{M}$ LTC₄, and 6-keto-PGF_{1 α} measured at 5, 10, 15, 30, 60 and 120 min post addition. Some cells were stimulated with 2.0 Units/ml thrombin and 6-keto-PGF_{1 α} measured at 5, 10, 15, and 30 min post addition.

preincubation of cells with $16 \mu\text{M}$ LTC₄ did not alter subsequent stimulation by 2 U/ml thrombin, $3 \mu\text{M}$ arachidonate, or $1.4 \mu\text{M}$ PGH₂ (Figure 4). These data show that both the prostaglandin cyclooxygenase and the prostacyclin synthase are still active, even though the system is desensitized to LTC₄.

To investigate further the specificity of the LTC₄ response we used the purported leukotriene receptor level antagonist FPL 55712. FPL 55712 from $5.6 \mu\text{M}$ to $56 \mu\text{M}$ did antagonize LTC₄-stimulated PGI₂ biosynthesis in endothelial cells (Figure 4). However, only about 50% of the response could be blocked by the highest concentration of FPL 55712. Although FPL 55712 did not completely inhibit the response, it did display some specificity for the LTC₄ response, as thrombin-stimulated PGI₂ biosynthesis was only marginally inhibited by FPL 55712 (Figure 4).

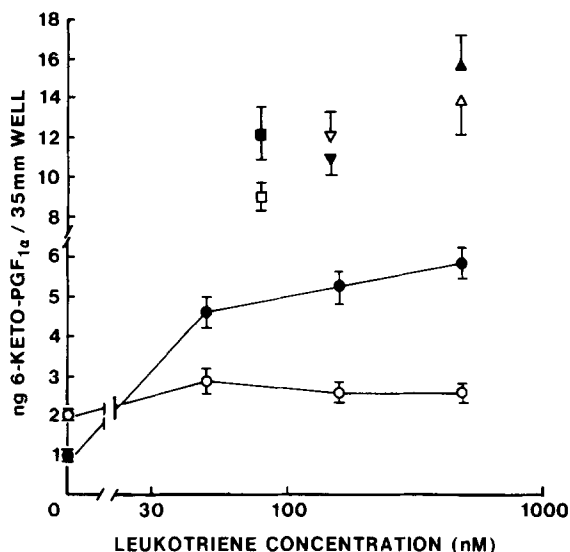


Figure 3: Desensitization of LTC₄-Stimulated PGI₂ Biosynthesis in Endothelial Cells.

Human endothelial cells (0.62×10^6 cells/well) were preincubated for 20 min at 37°C with $16 \mu\text{M}$ LTC₄, washed 3 times with fresh buffer, and exposed to from 48 to 480 nM LTC₄ for 30 min at 37°C (○—○). The 6-Keto-PGF_{1α} levels produced by these cells was then compared to the synthesis of 6-keto-PGF_{1α} in response to LTC₄ in naive cells that had not been preincubated with LTC₄ (●—●). Another group of cells were preincubated with $16 \mu\text{M}$ LTC₄, washed and challenged with 2 Units/ml thrombin (■), $3 \mu\text{M}$ arachidonate (▲), or $1.4 \mu\text{M}$ PGH₂ (▼), and compared to the respective naive cells represented by the corresponding open symbols (□, △, ▽).

DISCUSSION

LTC₄ and, to a lesser extent, LTD₄ stimulate PGI₂ biosynthesis in cultured human umbilical vein endothelial cells. Essentially maximum LTC₄ stimulation is achieved between 145 and 480 nM, but $2 \mu\text{M}$ LTD₄ is required for maximal stimulation.

In a quantitative sense, 2 Units/ml of thrombin (a maximally stimulating concentration) releases 3 to 5 times more PGI₂ than a maximally stimulating level of LTC₄.

The time course of LTC₄-stimulated PGI₂ biosynthesis is slightly slower than thrombin-stimulated activity. Maximal PGI₂ synthesis is achieved with thrombin in 10 minutes, while LTC₄ requires approximately 15 minutes.

The stimulation of PGI₂ biosynthesis by LTC₄ is a specific response to the leukotriene. Cells preincubated with LTC₄ display agonist specific

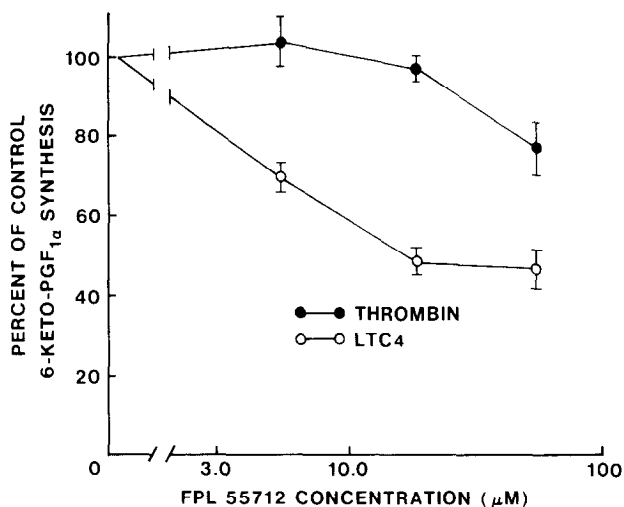


Figure 4. Influence of FPL-55712 on Thrombin and LTC₄-Stimulated PGI₂ Biosynthesis.

Human endothelial cells (0.68×10^6 cells/ml) were preincubated for 10 minutes at 37°C with from 5.6 to 56 μM FPL-55712. The cells were then challenged with either 2 Units/ml thrombin or 48 nM LTC₄, and 6-keto-PGF₁α levels measured. Data are presented as a percent of the control (no FPL-55712) LTC₄ or thrombin-stimulated response.

desensitization to subsequent LTC₄ challenge. Thrombin-stimulated PGI₂ biosynthesis is not altered by preincubation with LTC₄, and although the data is not shown, the same is true for histamine as well. Desensitization of endothelial cells to LTC₄-stimulation does not alter the ability of endothelial cells to synthesize PGI₂ in response to exogenous arachidonate or PGH₂. These data show that the enzymes required for PGI₂ synthesis are still functional, but the cells cannot respond to LTC₄. These findings suggest that the loss in LTC₄ sensitivity is at the level of the LTC₄ receptor, or in the transduction of the LTC₄ signal. It is unlikely that a loss in phospholipase activity accounts for desensitization, since the cells still respond to thrombin and histamine.

The physiological relevance of PGI₂ synthesis in response to LTC₄ is not known. Several other vasoactive molecules such as histamine, bradykinin, and angiotensin II also stimulate endothelial cell PGI₂ biosynthesis (3, 21, 22). However, since some of the agents are vasoconstrictors, while others are vasodilators, no clear relationship between vascular tone and the synthesis of PGI₂ exists.

It is known that PGI₂ exacerbates plasma exudation in response to zymosan or bradykinin (23), yet PGI₂ itself is essentially inactive. Since PGI₂ has been reported to inhibit leukotriene biosynthesis in human neutrophils by stimulating cyclic AMP accumulation (24), it is possible that the synthesis of PGI₂ retards further LTC₄ synthesis by granulocytes or mast cells at the site of inflammation. While this manuscript was in preparation, Cramer et al. (25) reported that LTC₄ stimulates PGI₂ biosynthesis in human umbilical vein endothelial cells. However, no attempt to quantitate the 6-keto-PGF₁α was made, and no GC/MS analysis was done. In addition, our observation that LTC₄ induces agonist specific desensitization in neutrophils is novel, and suggests that human endothelial cells have a C-6-sulfidopeptide leukotriene receptor.

Regardless of the exact physiological significance of LTC₄-stimulated PGI₂ biosynthesis, both LTC₄ and PGI₂ are potent vasoactive molecules which are involved in acute inflammatory reactions. The finding in this report suggests that the synthesis of the two molecules are directly linked to one another.

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