

Transforming Growth Factor-Beta Induces
Hemoglobin Synthesis in a Human
Erythroleukemia Cell Line

W. Craig Hooper*, Janet Pruckler,
Debra Jackson, and Bruce L. Evatt

Division of Host Factors, Center for Infectious Diseases, Centers for Disease
Control, Public Health Service, U.S. Department of Health and Human Services,
1600 Clifton Road, Atlanta, GA 30333

Received September 25, 1989

Summary: We have examined the effects of $TGF\beta_1$ and $TGF\beta_2$ on the HEL human erythroleukemia cell line. It was observed that $TGF\beta_1$ and 2 induced hemoglobin synthesis in these cells without causing a significant negative effect on cell proliferation. The cell surface markers glycophorin A and transferrin receptor that are associated with erythroid differentiation were also increased. This cell line may provide a model system in which to study the regulation of globin gene expression by a physiological growth factor known to act on hemopoietic cells. © 1989 Academic Press, Inc.

Transforming growth factor-beta ($TGF\beta$) is a ubiquitous polypeptide that can regulate growth and differentiation in both normal and neoplastic cells by autocrine or paracrine mechanisms (1). The protein is a 25-KDa disulfide linked dimer and exists in several distinct forms with $TGF\beta_1$ and $TGF\beta_2$ being the most abundant (2). $TGF\beta$ is expressed and released by many different cells, including those of the hematopoietic system, and is stored in both bone and platelets (1). $TGF\beta$ has been termed multifunctional because it can be either a positive or a negative regulator of cell proliferation and has other diverse regulatory roles (3). Among the cells negatively regulated by $TGF\beta$ are cells of the immune and hematopoietic systems (4,5). $TGF\beta$ has been shown to inhibit in vitro colony formation of erythroid, multipotential and granulocytic-macrophage progenitor cells (4,5). This inhibitory effect was

*Address reprint requests to W. Craig Hooper, Ph.D., Division of Host Factors, Center for Infectious Diseases, Centers for Disease Control, Public Health Service, U.S. Department of Health and Human Services, 1600 Clifton Rd., Atlanta, GA 30333.

Abbreviation: $TGF\beta$, transforming growth factor beta.

lost as these early cells differentiated (5). These observations were suggestive that the effects of TGF β may be differentiation stage specific (5).

In this report we have described that both TGF β_1 and TGF β_2 induced hemoglobin synthesis in a HEL human erythroleukemia cell line without significant alteration of cell proliferation. Hemoglobin production was demonstrated by both the presence of benzidine positive cells and an increase in α globin RNA following exposure to TGF β . The cell surface markers associated with erythroid differentiation, glycophorin A and transferrin receptor were also increased following TGF β exposure.

MATERIALS AND METHODS

Cells Culture. The HEL cell lines were kindly provided by Drs. Papayannopoulos and Ablashi. The cells were grown in RPMI 1640 Medium (GIBCO, Grand Island, NY) supplemented with 10% fetal bovine serum (GIBCO), 100 u/ml of penicillin and 100 μ g/ml of streptomycin (GIBCO). Highly purified human TGF β_1 and porcine TGF β_2 (R&D Systems, Inc., Minneapolis, MN) were added to HEL cells freshly seeded at 3×10^5 cell/ml. Hemoglobin induction was determined by benzidine staining as described by Parker et al. (6). A minimum of 200 cells were counted. These results were consistent in at least 10 separate experiments. For cell growth determination, cells were seeded in duplicate at the concentration of 3×10^5 cells/ml and were counted daily using an hemacytometer. Cell viability was assessed by trypan blue exclusion.

Northern Blot Analysis. At the designated time points, total cellular RNA was isolated by the guanidine thiocyanate - cesium chloride method as previously described (7). Twenty micro-grams of total cellular RNA was electrophoresed through 1% agarose/formaldehyde gels and transferred to nylon membrane (Micro Separation, Inc., Westboro, MA). The blots were hybridized to oligo-labeled (Pharmacia, Piscataway, NY) cDNA probes. The cDNA probes for α and β globin was obtained from the American Type Culture Collection (Rockville, MD). β actin was purchased from Oncor (Gaithersburg, MD).

Cell Surface Analysis. Cells at days 3 and 5 were incubated with monoclonal antibodies directed either against glycophorin A (AMAC, Inc., Westbrook, MI) or the transferrin receptor (Becton-Dickinson, Mountain View, CA) for 30-40 min on ice. The cells were washed with PBS and then incubated with goat anti-mouse Ig for 30 min on ice. They were subsequently washed and analyzed by flow cytometry (FACSCAN, Becton-Dickinson). The fluorescence was measured on a log scale.

RESULTS AND DISCUSSION

Only one HEL cell line was induced to produce hemoglobin by both TGF β_1 and TGF β_2 and this particular cell line was designated as HEL-T. The other HEL cell line did not produce hemoglobin either in response to hemin, a known inducer of hemoglobin, or to TGF β . At the TGF β_1 concentration of 1 ng/ml, approximately 20%-25% of the HEL-T cells contained hemoglobin by day 3 as indicated by benzidine positivity and, by day 5, approximately 45%-55% of the cells were benzidine positive (Figure 1a). There was approximately a 3-fold increase in hemoglobin in TGF β -treated cells by day 5 (0.00 vs 0.045 mg/ml) as determined by spectrophotometric analysis. The presence of hemoglobin was visually observed by the presence of a red cell pellet in the TGF β -treated

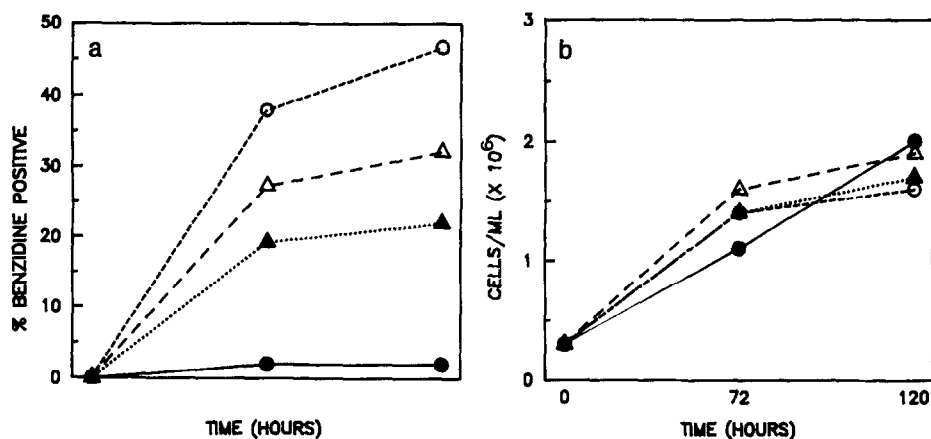


Figure 1.(a). Hemoglobin induction by TGF β_1 and 2 as determined by benzidine staining (● Control, ○ TGF β_1 1ng/ml, ▲ TGF β_2 1ng/ml, △ TGF β_2 3ng/ml). (b). The effect of TGF β_1 and TGF β_2 on HEL-T cell growth. (● Control, ○ TGF β_1 1ng/ml, △ TGF β_2 1ng/ml, ▲ TGF β_2 3ng/ml)

cells and was demonstrated by both cellulose acetate and citrate agar electrophoresis (data not shown). TGF β_1 at concentrations as high as 3ng/ml did not significantly induce a higher increase in benzidine positivity, and conversely TGF β_1 at the concentration of 0.1ng/ml did not significantly induce hemoglobin production. The ability of TGF β_2 to induce hemoglobin accumulation was less than that of TGF β_1 and was dose dependent. At 3 ng/ml of TGF β_2 , approximately 35% of the cells were benzidine positive by day 5 (Figure 1a). Whereas after a 5 day exposure to 1ng/ml of TGF β_2 , approximately 23% of the cells were benzidine positive (Figure 1a). In contrast to earlier findings of Sing et al. (5), in which it was observed that TGF β_1 inhibited HEL cell growth by approximately 20%, we found that various concentrations, TGF β_1 and β_2 usually had no consistent significant inhibitory effect on proliferation of the HEL-T cells but rather had a modest growth enhancement effect on the cells (Figure 1b). Although the reason for this apparent discrepancy is not known, it is possible that the proliferation of different HEL clones could be differentially altered by TGF β . Also it may be possible that the different sources of TGF β could have played a role in the conflicting data. We used purified human TGF β_1 and Sing et al. (5) used purified bovine TGF β_1 . However, it was stated by Sing et al. (5) that they have observed similar results in some experiments using different sources of TGF β_1 . In our experiments it was also observed that HEL-T cells treated with either TGF β_1 or β_2 had an increase in thymidine incorporation on day 3 (data not shown). Cell viability was unaffected by either TGF β_1 or β_2 as determined by trypan blue exclusion. HEL-T cells had to be exposed continuously to TGF β for 48 hrs before significant hemoglobin production could be observed (data not shown).

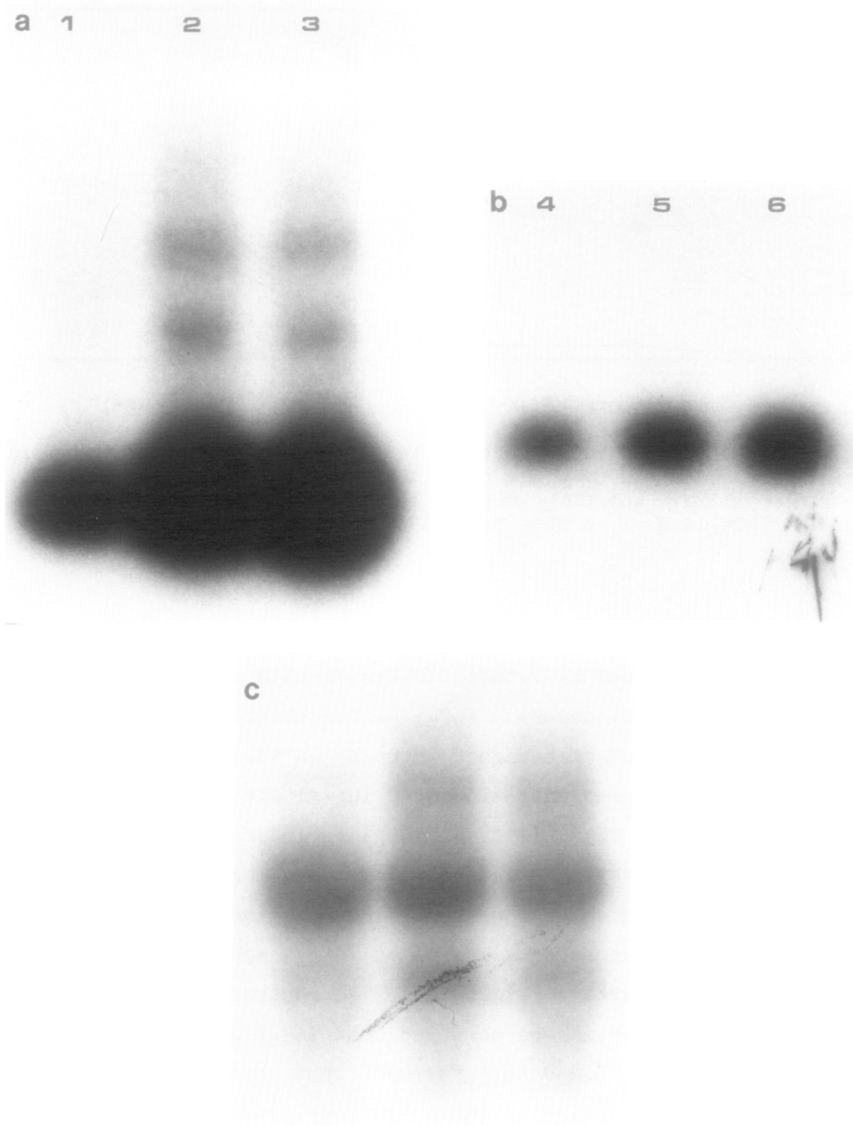


Figure 2. Northern blot analysis. **a)** α globin RNA expression of (1) untreated HEL-T cells (2) cells treated with 1 ng/ml of $\text{TGF}\beta_1$ for 3 days and (3) for 5 days. **b)** β globin RNA expression of (4) untreated HEL-T cells (5) cells treated with 1 ng/ml of $\text{TGF}\beta_1$ for 3 days and (6) for 5 days. **c)** reprobe of (a) with β actin.

HEL cells have been reported to constitutively express globin chain mRNA (8). Although α -globin RNA was expressed in the HEL-T cell line, a significant increase in the level of α globin RNA was seen after treatment with 1ng/ml of $\text{TGF}\beta_1$ (Figure 2a). The level of α -globin RNA was maximally induced by day 3 (Figure 2a). Cells treated for 5 days with $\text{TGF}\beta_1$ showed no further increase in the RNA level of α globin. The β -globin RNA was also

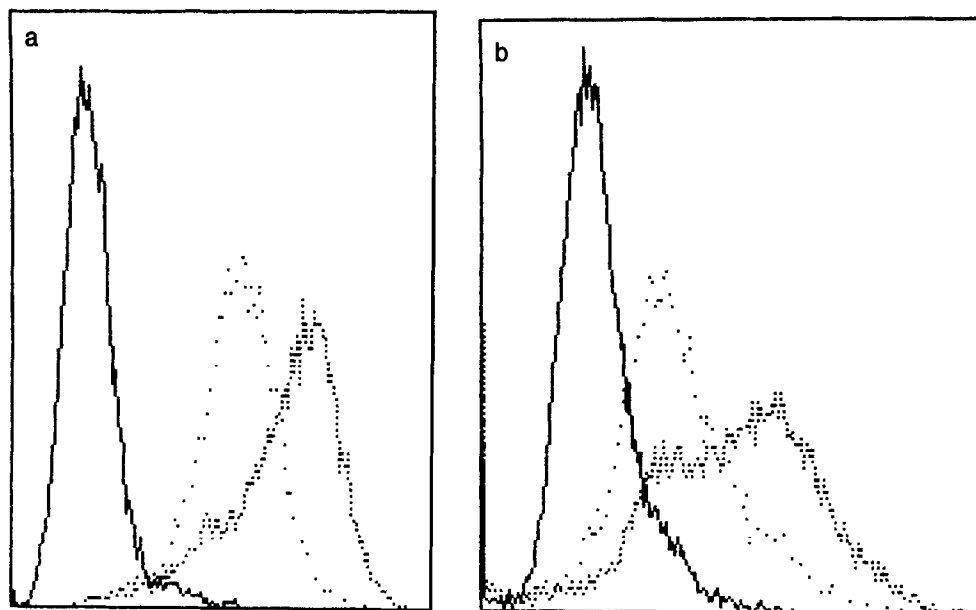


Figure 3. Cell surface analysis of HEL-T cells. (a) Glycophorin A expression on untreated (• • • • •) and 1 ng/ml of TGF β_1 -treated cells (••••••). (b) Transferrin receptor expression on untreated (• • • • •) and 1 ng/ml of TGF β_1 -treated cells (••••••). In both panels, the isotype matched negative control is represented as (———).

constitutively expressed (8), but treatment with TGF β_1 only modestly induced the RNA levels of β globin (Figure 2b).

Earlier reports have demonstrated that glycophorin was constitutively expressed on the cell surface of the HEL cells (9). The HEL-T cells likewise expressed glycophorin A, and expression increased markedly after treatment with TGF β_1 (Figure 3a) and TGF β_2 . The expression of transferrin receptors also increased after exposure to TGF β_1 (Figure 3b) and TGF β_2 . The expression of both glycophorin A and transferrin receptor were maximally expressed by day 5. TGF β_1 caused no consistent significant decrease in the anti-leukocyte surface marker, Hle-1 (CD 45).

Previous studies by Papayannopoulou et al. (9) have shown that the HEL erythroleukemia cell line expressed several erythroid-specific surface markers as well as megakaryocytic markers. These HEL cells constitutively expressed low RNA levels of globin chains and hemoglobin production could be induced or increased by various agents such as hemin and σ -aminolevulinic acid (9). Papayannopoulou et al. (9) also noted that different clones of the HEL cell line responded with different degrees of hemoglobin production to the various inducers of hemoglobin synthesis. We have made a similar observation with respect to TGF β ; one HEL clone in our possession did not produce hemoglobin in response to TGF β , while another HEL clone was induced by TGF β . The latter HEL

clone has been designated HEL-T. The HEL line that was non-responsive to TGF β was also non-responsive to hemin whereas the HEL-T cells did produce hemoglobin following exposure to either agent.

The three cell surface markers, glycophorin A, transferrin receptor and Hle-1 have shown to be modulated in normal erythroid cell differentiation (10). We have shown that the expression of both glycophorin A and transferrin receptor in the HEL-T cells was increased by day 5 following exposure to TGF β ₁. However, we cannot rule out that the increase in transferrin receptor was due to cell proliferation rather than to the erythroid program of differentiation. The megakaryocytic related marker GPIIb IIIa co-expressed on the HEL-T cells was unaffected by TGF β ₁ treatment.

Essentially all compounds that have been used to induce hemoglobinization in the erythroleukemia cell lines are chemical in nature and many may have no physiological relevance (i.e. DMSO, hexamethylene bisacetamide), whereas others, such as hemin and σ -aminolevulinic acid, do have a physiological role (9). To our knowledge this is the first report to show that a physiological relevant polypeptide, other than erythropoietin, can independently induce hemoglobin synthesis in human erythroleukemia cell line.

ACKNOWLEDGMENTS

We thank Drs. Papayannopoulou and Ablashi for providing us with HEL cell lines; Drs. Swan, McDougal, Zaki, and Folks for critically reviewing this manuscript; Dr. Curtis Parker for his valuable comments during the course of this work; and Carol Young for preparing this manuscript.

REFERENCES

1. Sporn, M.B., and Roberts, A.B. (1986) J. Clin. Invest. 78, 329-332.
2. Cheifetz, S., Weatherbee, J.A., Tsang, M.L.-S., Anderson, J.K., Mole, J.E., Lucas R., and Massague, J. (1987) Cell 48, 409-415.
3. Sporn, M.B., Roberts, A.B., Wakefield, L.M., and Assoian, R.K. (1986) Science 233, 532-534.
4. Ottman, O.G., and Pelus, L.M. (1988) J. Immunol. 140, 2661-2665.
5. Sing, G.K., Keller, J.R., Ellingsworth, L.R., and Ruscetti, F.W. (1988) Blood 72, 1504-1511.
6. Parker, C.L., and Hooper, W.C. (1978) Leuk. Res. 2, 295-300.
7. Chirgwin, J.M., Przybyla, A.E., MacDonald, R.J., and Rutter, W.J. (1979) Biochemistry 18, 5295-5303.
8. Enver, T., Zhang, J.-W., Anagnov, N.P., Stamatoyannopoulos, G. and Papayannopoulou T. (1988) Molec. and Cell Biol. 8, 4917-4926.
9. Papayannopoulou, T. and Nakamoto, S., Kurachi, S., and Nelson R. (1987) Blood 70, 1764-1772.
10. Loken, M.R., Shah, V.O., Dattilio, K.L., and Civin, C.I. (1987) Blood 69, 255-263.