

Effect of Ionomycin on Cell pH in Isolated Renal Proximal Tubules

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In isolated rabbit proximal tubules the addition of 2.0 μM but not 0.2 μM ionomycin induced a sustained increase in cell pH ($[\text{pH}]_i$). This $[\text{pH}]_i$ response to 2.0 μM ionomycin was shown to be independent of several transporters such as Na^+/H^+ exchanger, $\text{Na}^+-\text{HCO}_3^-$ cotransporter, $\text{Cl}^-/\text{HCO}_3^-$ exchanger, or H^+-ATPase . On the other hand, the removal of extracellular Ca^{2+} abolished the $[\text{pH}]_i$ increase or even induced a transient $[\text{pH}]_i$ decrease in the presence of ionomycin. These results are consistent with the induction of $\text{Ca}^{2+}/\text{H}^+$ exchange by ionomycin. Therefore Ca^{2+} ionophores should be used with caution as probes to estimate renal tubule functions. © 1996 Academic Press, Inc.

Renal proximal tubules reabsorb more than 70 % of the filtered HCO_3^- , and this process is under control of several hormones such as angiotensin II and parathyroid hormone (1, 2, 3). It is quite reasonable to speculate that, in addition to cAMP-dependent pathway, changes in intracellular calcium concentrations ($[\text{Ca}^{2+}]_i$) are also involved in these hormonal regulations. However, the exact influence of $[\text{Ca}^{2+}]_i$ changes on proximal functions are not completely clarified, and both stimulatory and inhibitory effects of the increase in $[\text{Ca}^{2+}]_i$ on proximal reabsorption have been reported (4, 5). To gain insight into this controversial issue, we examined the effect of ionomycin on steady state cell pH (pH_i) in isolated, lumen-collapsed proximal tubules. In this preparation the major determinant of pH_i would be basolateral $\text{Na}^+-\text{HCO}_3^-$ cotransporter (6), which is reported to be inhibited by calcium-calmodulin-dependent protein kinase II in a previous study using basolateral membrane vesicles (7).

MATERIALS AND METHODS

The experiments were performed on isolated proximal tubules (superficial S2 segment) from female New Zealand white rabbits (1.5 ~ 2.5 Kg body wt), and only non-perfused, lumen-collapsed tubules were used as previously described (8). Fura 2 was used to measure $[\text{Ca}^{2+}]_i$ as previously reported (9), and pH_i was measured with bis(carboxyethyl)carboxyfluorescein (BCECF). Tubules were loaded with either fura 2/AM (20 μM) or BCECF/AM (15 μM), and $[\text{Ca}^{2+}]_i$ or pH_i were measured using a microscopic fluorescence photometry system (OSP-10, Olympus, Japan) with appropriate excitation and emission wavelengths. The calibration for $[\text{Ca}^{2+}]_i$ was made according to the equation of Grynkiewicz et al. (10), and that for pH_i was made according to the method by Thomas et al. (11). After the incubation period, tubules were perfused peritubularly with prewarmed (38 °C) experimental solutions. The following solutions were used (in mM): standard HCO_3^- buffer (115 NaCl, 5 KCl, 1 MgCl_2 , 1.5 CaCl_2 , 1 Na_2SO_4 , 2 NaH_2PO_4 , 25 NaHCO_3 , 5.5 glucose), Cl^- -free HCO_3^- buffer (Cl^- in standard- HCO_3^- buffer solution was replaced with gluconate, and 5.0 $\text{Ca}(\text{gluconate})_2$ was used), standard N-2-hydroxyethylpiperazine-N'-2-ethanesulfonic (HEPES)-buffer (127 NaCl, 5 KCl, 1 MgCl_2 , 1.5 CaCl_2 , 1 Na_2SO_4 , 2 NaH_2PO_4 , 12 HEPES, 13 Na-HEPES, 5.5 glucose), Na^+ -free HEPES-buffer (Na^+ in standard-HEPES buffer solution was replaced with N-methyl-D-glucamine). pH of these solutions were adjusted to 7.4 either by bubbling with 5 % $\text{O}_2/95$ % CO_2 gas (HCO_3^- -buffer solutions), or by 1N NaOH (HEPES-buffer solutions). Fura 2/AM and BCECF/AM were obtained from Dojindo Chemical, Japan, and ionomycin, 4, 4'-diisothiocyanatostilbene-2, 2'-disulphonic acid (DIDS), amiloride, and iodoacetic acid (IAA) were from Sigma Chemi-

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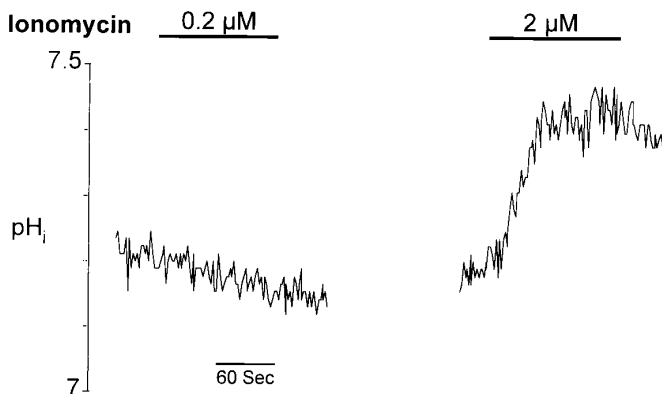


FIG. 1. Effect of ionomycin on pH_i in lumen-collapsed tubules. Tubules were perfused peritubularly with the standard HCO_3^- -buffer solution, and different concentrations of ionomycin were added as indicated.

cal Co, USA, ethylene glycol-bis(β -aminoethyl ether)-N,N,N',N'-tetraacetic acid (EGTA) was from Fluka, Germany, and all the other chemicals were from WAKO, Japan.

RESULTS

In the standard HCO_3^- -buffer solution, the addition of $0.2 \mu M$ ionomycin increased $[Ca^{2+}]_i$ by 190 ± 70 nM (mean \pm S.E.M., $n = 6$) in a reversible manner. On the other hand, the addition of $2 \mu M$ ionomycin increased $[Ca^{2+}]_i$ by more than 2000 nM, and this increase was often irreversible at all or only partially reversible ($n = 5$). As shown in Fig. 1, while $0.2 \mu M$ ionomycin did not affect the steady state pH_i in the standard HCO_3^- -buffer solution, $2.0 \mu M$ ionomycin irreversibly increased pH_i by 0.26 ± 0.06 pH unit ($n = 4$). In the tubules incubated in the Cl^- -free HCO_3^- -buffer solution for more than 15 min, $2.0 \mu M$ ionomycin elicited a comparable cell alkalization (ΔpH_i : $+0.18 \pm 0.02$ pH unit, $n = 3$). Treatment with 0.5 mM DIDS also did not inhibit the pH_i response to $2.0 \mu M$ ionomycin (ΔpH_i : $+0.30 \pm 0.09$ pH unit, $n = 4$). These results suggest that the effect of this ionophore on pH_i may not come from the changes in activities of Cl^-/HCO_3^- exchanger or $Na^+-HCO_3^-$ cotransporter. To further examine the mechanism of pH_i increase by ionomycin, we incubated the tubules in the standard HEPES-buffer solution containing 20 mM NH_4Cl for 5 min. As shown in Fig. 2, the removal of NH_4Cl induced a profound cell acidification, and pH_i stayed at a very low level (usually below 6.5) for up to 15 min in the Na^+ -free HEPES-buffer solution. In these tubules the addition of $0.2 \mu M$ ionomycin did not affect the steady state pH_i level. However, $2.0 \mu M$ ionomycin induced a marked pH_i increase, and in 4 of 4 tested tubules pH_i reached the pre- NH_4Cl level (~ 7.2) within 3 min in the absence of extracellular Na^+ . The addition of 1 mM amiloride did not affect this pH_i recovery ($n = 4$), ruling out the involvement of Na^+/H^+ exchanger. Tubule treatment with 2 mM cyanide plus 2 mM IAA ($n = 4$), which should significantly suppress the metabolism in this segment (12), also did not modify the pH_i response to $2.0 \mu M$ ionomycin. Similarly, the pH_i response was unaffected either with 2 mM N-ethylmaleimide ($n = 4$) or 1 μM bafilomycin A_1 ($n = 7$), indicating that the involvement of a vacuolar-type H^+ -ATPase is unlikely (13, 14). On the other hand, ionomycin did not induce the pH_i increase in the absence of extracellular Ca^{2+} ($n = 2$). Furthermore, the removal of extracellular Ca^{2+} promptly abolished the pH_i increase in the presence of $2.0 \mu M$ ionomycin, or even induced a transient pH_i decrease as shown in Fig. 3.

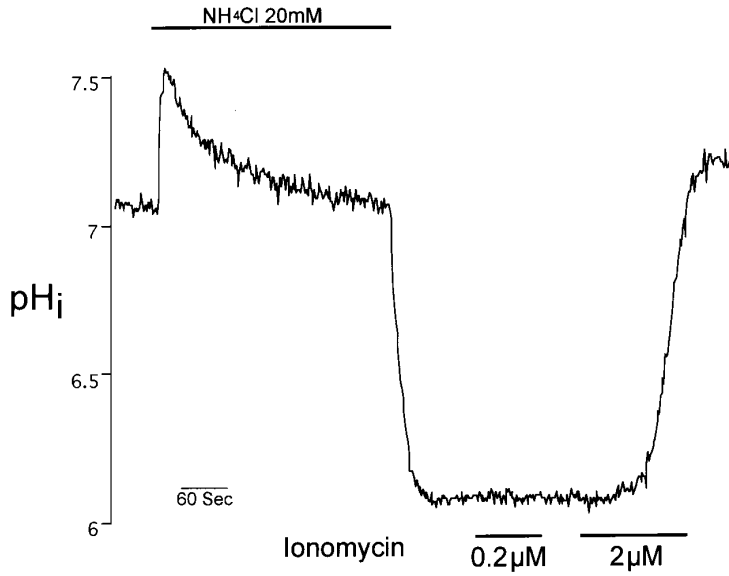


FIG. 2. Effect of ionomycin on pH_i in HCO_3^- -free solutions. The tubule was first incubated with the standard HEPES-buffer solution containing 20 mM NH_4Cl (substituted for NaCl) for 5 min. Subsequently, the bath solution was changed to the Na^+ -free HEPES-buffer solution, inducing a profound decrease in pH_i . Note 2.0 μM but not 0.2 μM ionomycin induced a marked pH_i recovery.

DISCUSSION

In the present study we observed that the $[Ca^{2+}]_i$ increase within physiological ranges by 0.2 μM ionomycin did not affect steady state pH_i in isolated proximal tubules. On the other

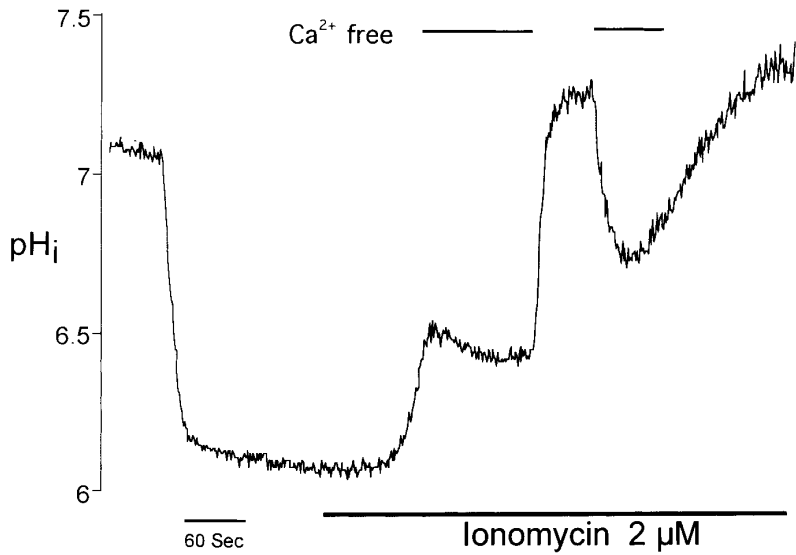


FIG. 3. Effect of extracellular Ca^{2+} removal on the ionomycin-induced pH_i increase. The tubule was acidified as in Fig. 2, then extracellular Ca^{2+} was removed (Ca^{2+} -free plus 0.1 mM EGTA) in the presence of 2.0 μM ionomycin as indicated. A representative trace from three similar experiments is shown.

hand, 2.0 μM ionomycin, while inducing the supra-physiological $[\text{Ca}^{2+}]_i$ increase, elicited the sustained increase in pH_i . Additional experiments indicated that the changes in activities of known transporters such as $\text{Na}^+/\text{HCO}_3^-$ cotransporter, Na^+/H^+ exchanger, $\text{Cl}^-/\text{HCO}_3^-$ exchangers, or H^+/ATPase (proton pump) cannot explain this pH_i increase. On the other hand, the pH_i response to ionomycin was not only promptly abolished, but its direction was even reversed by the extracellular Ca^{2+} removal. These observations strongly suggest that the pH_i response to 2.0 μM ionomycin is due to the induction of $\text{Ca}^{2+}/\text{H}^+$ exchange by the ionophore. It has been known that, in addition to Ca^{2+} releasing effects from the intracellular Ca^{2+} stores, high concentrations of Ca^{2+} ionophores can catalyze electroneutral divalent cation transport, i.e. $\text{Ca}^{2+}/2\text{H}^+$ exchanger (15, 16). In native tissues pH_i responses to the Ca^{2+} ionophores are quite variable depending on cell types or experimental conditions. However, Asem et al. reported that in chicken granulosa cells the Ca^{2+} ionophores such as ionomycin and 4-Bromo-A23187 induced a similar cytosolic alkalinization, which required extracellular Ca^{2+} but not extracellular Na^+ (17). Our results extend the observations by Asem et al. (17), and suggest that higher concentrations of ionomycin, while elevating $[\text{Ca}^{2+}]_i$ to the supra-physiological ranges, could induce the artificial cation exchange in isolated proximal tubules. Therefore, caution must be exercised when the Ca^{2+} ionophores were to be used as probes to investigate the role of Ca^{2+} in acid-base transport in renal tubules.

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REFERENCES

1. Harris, P. J., and Young, J. A. (1977) *Pflügers Arch.* **367**, 295–297.
2. Geibel, J., Giebisch, G., and Boron, W. F. (1990) *Proc. Natl. Acad. Sci. USA* **87**, 7917–7920.
3. Iino, Y., and Burg, M. B. (1979) *Am. J. Physiol.* **236**, F387–F391.
4. Liu, F. Y., and Cogan, M. G. (1990) *Am. J. Physiol.* **259**, F451–F457.
5. Wang, T., and Chan, Y. L. (1990) *Pflügers Arch.* **415**, 533–539.
6. Seki, G., Coppola, S., and Frömter, E. (1993) *Pflügers Arch.* **425**, 409–416.
7. Ruiz, O. Z., and Arruda, J. A. L. (1992) *Am. J. Physiol.* **262**, F560–F565.
8. Seki, G., Taniguchi, S., Uwatoko, S., Suzuki, K., and Kurokawa, K. (1993) *J. Clin. Invest.* **92**, 1229–1235.
9. Yamada, H., Seki, G., Taniguchi, S., Uwatoko, S., Suzuki, K., and Kurokawa, K. (1996) *Am. J. Physiol.* **270**, C1096–C1104.
10. Gryniewicz, G., Poenie, M., and Tsien, R. Y. (1985) *J. Biol. Chem.* **260**, 3440–3450.
11. Thomas, J. A., Bushsbaum, R. N., Zimnick, A., and Racke, F. (1979) *Biochemistry* **18**, 2210–2218.
12. Krapf, R., Alpern, R. J., Rector, F. C., and Berry, C. A. (1987) *J. Gen. Physiol.* **90**, 833–853.
13. Bowman, E. J., Siebers, A., and Altendorf, K. (1988) *Proc. Natl. Acad. Sci. USA* **85**, 7972–7976.
14. Jehmlich, K., Sablotni, J., Simon, B. J., and Burckhardt, G. (1991) *Kidney Int.* **40**, S64–S70.
15. Reed, P. W., and Lardy, H. A. (1972) *J. Biol. Chem.* **247**, 6970–6977.
16. Kauffman, R. F., Taylor, R. W., and Pfeiffer, D. R. (1980) *J. Biol. Chem.* **255**, 2735–2741.
17. Asem, E. K., Li, M., and Tsang, B. K. (1992) *J. Mol. Endocrinol.* **9**, 1–6.