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ENERGY-DEPENDENT Mn²⁺ AND Ca²⁺ UPTAKE BY THE EMBRYONIC CHICK CHORIOALLANTOIC MEMBRANE

H. J. ARMBRECHT, A. R. TEREPKA and T. E. GUNTER

Department of Radiation Biology and Biophysics, University of Rochester School of Medicine and Dentistry, Rochester, N. Y. 14642 (U.S.A.)

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SUMMARY

The chick chorioallantoic membrane is an epithelial tissue which actively transports large amounts of ${\rm Ca^2}^+$ during embryonic development. In this paper ${\rm Mn^2}^+$ uptake by the tissue was studied and compared to ${\rm Ca^2}^+$ uptake in parallel experiments. The purpose of these experiments was to determine if ${\rm Mn^2}^+$ could be used as a paramagnetic analog for ${\rm Ca^2}^+$ so that electron paramagnetic resonance could be used to gain more information about the ${\rm Ca^2}^+$ transport system.

It was found that Mn²⁺ uptake was reduced significantly under conditions that reduced Ca²⁺ uptake and that Mn²⁺, like Ca²⁺, was taken up preferentially by the ectodermal side of the tissue.

 $\mathrm{Mn^{2+}}$ uptake showed saturation kinetics with a K_m of 0.33 mM. $\mathrm{Mn^{2+}}$ uptake was also competitively inhibited by $\mathrm{Ca^{2+}}$, and $\mathrm{Ca^{2+}}$ uptake inhibited by $\mathrm{Mn^{2+}}$.

Electron microprobe studies showed that $\mathrm{Mn^{2}^{+}}$ was localized in the ectoderm of the tissue in the same way as $\mathrm{Ca^{2}^{+}}$. It was concluded from these studies that significant amounts of $\mathrm{Mn^{2}^{+}}$ were accumulated by the active $\mathrm{Ca^{2}^{+}}$ transport mechanism and that $\mathrm{Mn^{2}^{+}}$ could be a useful paramagnetic probe of divalent cation transport in this tissue.

INTRODUCTION

Many epithelial tissues such as intestine, kidney, mammary gland and avian shell gland are involved in the transcellular movement of large amounts of Ca^{2+} [1]. Since high concentrations of intracellular Ca^{2+} may be detrimental to cell function [2, 3], the bulk movement of Ca^{2+} must presumably be accomplished without raising the intracellular Ca^{2+} level of the transporting cells above about 10^{-6} M [4]. The pathway of Ca^{2+} through these tissues and the molecular mechanism of translocation are not known. The transport mechanism may be a modification of normal cell Ca^{2+} homeostatic mechanisms, such as the plasma membrane pump and mitochondrial uptake [5], or it may involve a separate process.

The chorioallantoic membrane of the chick is another epithelial tissue which has an active Ca²⁺ transport mechanism. It is a convenient model system for studying transepithelial transport and is relatively simple morphologically. The chorioallantoic membrane lines the shell of the developing embryo and actively transports large amounts of Ca²⁺ into the embryonic circulation [6]. In vitro Ussing chamber experiments have shown that the membrane transports large amounts of Ca²⁺ from ectoderm to endoderm with little backflux [6], that the transport mechanism is energy dependent [6], and that the transport process stimulates oxygen consumption [7]. Studies with the electron-probe X-ray microanalyzer have shown high local concentrations of Ca²⁺ in the ectodermal cells of the tissue under transport conditions [8, 9]. These and other results have suggested that Ca²⁺ may be sequestered from the rest of the cell contents as it is transported. It has been postulated that special endocytotic vesicles are formed for the transport of Ca²⁺ across the tissue [9].

The purpose of the investigations reported in this paper is to determine the extent to which Mn^{2+} is an analog for Ca^{2+} in the chorioallantoic membrane so that electron paramagnetic resonance (EPR) spectroscopy may be applied to the study of Ca^{2+} transport in this tissue. EPR can give specific information on the physical environment of divalent cations in biological systems. To study Ca^{2+} -transporting systems, the paramagnetic ion Mn^{2+} is substituted for Ca^{2+} , which is not paramagnetic. This approach has been successfully used to study Ca^{2+} uptake by isolated mitochondria [10], which transport Mn^{2+} as an analog to Ca^{2+} .

To compare directly Mn^{2+} with Ca^{2+} uptake, several different experimental approaches have been used. The effect of inhibitors has been investigated in tissue uptake experiments, and transport chamber studies have been used to look at unidirectional uptake and transmembrane fluxes. Kinetic studies have investigated competitive inhibition between Mn^{2+} and Ca^{2+} , and the distribution of Mn^{2+} in the tissue was studied in the electron microprobe. From these studies it is concluded that a significant amount of Mn^{2+} enters the tissue by the same energy-dependent system that transports Ca^{2+} . The following paper [11] presents the results of the EPR studies of Mn^{2+} in the transport system.

MATERIALS AND METHODS

Preparation of membranes

The chorioallantoic membranes used in these experiments were taken from fertile White Leghorn eggs purchased from Spafas, Inc. (Norwich, Conn.). All membranes were from the air space region of the egg and had the inner shell membrane attached to the chorioallantoic membrane itself. 16 to 18-day eggs were used unless otherwise noted, since Ca²⁺ transport is at a maximum during this period [6].

Solutions

All experiments used a standard buffer solution of 140 mM Na $^+$, 5 mM K $^+$, 0.5 mM Mg $^{2+}$, 25 mM Tris $^+$, 170 mM Cl $^-$ and 0.5 mM SO $_4$ $^{2-}$ with a pH of 7.4 at 37 °C. MnCl $_2$ and CaCl $_2$ were added in the concentrations indicated. All salts were of reagent grade. Phosphate was not included in the solutions since it precipitated when Mn $^{2+}$ was added. Leaving out phosphate had no observable effect on Mn $^{2+}$ or Ca $^{2+}$ uptake.

Experimental procedures

Two basic experimental procedures were used to study Mn^{2+} and Ca^{2+} accumulation by the chorioallantoic membrane. One procedure was to mount the membrane in an Ussing-type transport chamber with the same concentration of ion on each side. By adding radioactive Mn^{2+} or Ca^{2+} to one side, one could monitor unidirectional radioactive tracer movement into and across the tissue. The experimental procedure used was similar to one that has been previously described [6]. In this type of experiment, the amount of labeled divalent cation in the membrane at the end of the experiment is referred to as "tissue uptake" and the amount of ion that moves across the membrane is called the "transmembrane flux". In these experiments the concentration of Mn^{2+} or Ca^{2+} was 0.25 mM on each side, and the experiments were run for 3 h.

The second procedure used was the uptake experiment [12]. Several pieces of chorioallantoic membrane 2 cm² in area were cut from the same egg and washed briefly in buffer. Each piece was placed in a separate 30 ml. beaker containing 5 ml of buffer with 0.75 mM of radioactively labeled Mn²+ or Ca²+ added. The beakers were shaken for 1.5 h in a Dubnoff Metabolic Shaking Incubator (Precision Scientific Co., Chicago, Ill.) at 37 °C. The membranes were then washed twice in buffer for 1 min and counted. When the inhibitors 2,4-dinitrophenol, oligomycin and rotenone were used, the membranes were preincubated for 15 min in buffer solution with only the inhibitor present. They were then exposed to the labeled Mn²+ or Ca²+ buffer solution with inhibitor still present. Control experiments showed that the 15 min pre-incubation and the alcohol solvent used for the metabolic inhibitors had no effect on membrane uptake.

The kinetic studies of Mn^{2+} and Ca^{2+} entry into the chorioallantoic membrane were modified uptake experiments. Four pieces of membrane were cut from each egg and pre-incubated for 5 min in buffer. The pieces were incubated with labeled Mn^{2+} or Ca^{2+} in the Dubnoff Metabolic Shaker for 10 s, 1, 2 and 4 min, post-washed twice for 1 min in buffer, and counted. The slope of the uptake curve over the first 2 min was taken as the initial velocity of entry. The average of at least six eggs was used to determine the initial velocity at each concentration of Mn^{2+} or Ca^{2+} .

Counting procedures

The ⁵⁴Mn and ⁴⁵Ca isotopes were obtained from Amersham/Searle (Des Plaines, Ill.). Membranes to be analyzed for ⁴⁵Ca were solubilized in 1 ml of NCS tissue solubilizer (Amersham/Searle) for 3 h at 37 °C in the Dubnoff shaker. 10 ml of scintillation fluid were added, and the membranes counted by standard scintillation techniques. To measure ⁴⁵Ca isotope fluxes in the Ussing chamber experiments, 0.1 ml samples were taken from each side, dissolved in 5 ml of acid alcohol, and counted after adding scintillation fluid. Membranes containing ⁵⁴Mn were counted directly in a well-type gamma spectrometer without solubilization. The 0.1 ml Ussing chamber samples containing ⁵⁴Mn were brought to 1 ml with distilled water and counted directly.

Electron microprobe techniques

Tissues which were to be examined for Mn²⁺ in the electron probe X-ray

microanalyzer were exposed to 0.75 mM $\rm Mn^{2+}$ for 1.5 h using the Dubnoff shaker uptake procedure. The membranes were then fixed for 30 min with 4 % glutaraldehyde in 0.1 M cacodylate buffer (pH 7.2) containing 1 mM sodium pyrophosphate. This was followed by a short wash in buffer, a 30 min post-fixation in 1 % osmium tetroxide in the same buffer, dehydration in ethanol, and embedding in plastic. 1 μ m thick sections of the tissue were cut with glass knives without exposure to water and mounted on silicon wafers. These were examined with an EMX Electron Probe X-ray Microanalyzer (Applied Research Laboratories, Inc., Glendale, Calif.) using a 22 kV accelerating potential and about a $7 \cdot 10^{-9}$ A sample current. The beam diameter was less than 1 μ m. Images were recorded from the oscilloscope screen on Polaroid® film. This procedure is almost identical to the one earlier used to study $\rm Ca^{2+}$ in the chorioallantoic membrane [8, 9], except that 1 mM pyrophosphate has been substituted for the 1 % oxalate. Experiments with radioactive $\rm Mn^{2+}$ have shown that no substantial loss of $\rm Mn^{2+}$ occurs from tissue fixed in the presence of pyrophosphate.

RESULTS

Transepithelial fluxes of Mn2+ and Ca2+

Table I shows the results of transport chamber studies comparing the unidirectional fluxes of Mn²⁺ with that observed for Ca²⁺. Experiments A and B were carried out with equimolar concentrations (0.25 mM) of Ca²⁺ or Mn²⁺ on both sides of the chamber. Tissue uptake of both ions was considerably greater in the forward direction, i.e. by the ectodermal side of the membrane, as compared to uptake into the tissue from the endodermal bathing solution (backflux). Ectodermal uptake exceeded endodermal uptake by at least 5-fold. This preferential tissue uptake by the ectoderm is also shown in Experiment C of Table I. These are the results of a study in which 0.25 mM Mn²⁺ (plus ⁵⁴Mn) was placed on one side of the membrane with an

TABLE I UNIDIRECTIONAL FLUXES OF Ca^{2+} AND Mn^{2+} IN TRANSPORT CHAMBER EXPERIMENTS

"Tissue uptake" is the amount of ion that accumulated within the tissue during the 3 h experiment and "trans-membrane flux" is the amount of ion that completely crossed the mounted tissue during the same period. The "forward" direction is ion flux from the ectodermal bathing medium into and across the tissue; "backflux" is movement from the endodermal bathing medium. Results are in nmol/cm² per h and expressed as the mean of six experiments \pm S.E. "Flux ratio" is the mean of the forward flux divided by the mean of the back flux. In experiments A and B equimolar concentrations of Ca²+ or Mn²+ (0.25 mM) were present on both sides of the membrane. In experiment C 0.25 mM Mn²+ (with tracer 54 Mn) was placed on one side of the tissue with 0.25 mM Ca²+ on the opposite side so that the down-hill chemical gradient for Mn²+ from ectoderm to endoderm (forward) or endoderm to ectoderm (backflux) was identical in each case.

Tissue uptake			Transmembrane flux		
Forward	Backflux	Flux ratio	Forward	Backflux	Flux ratio
5.4±1.6	0.4±0.1	13.5	7.4±1.7	0.9±0.5	8.2
5.5 ± 0.7 6.9 ± 0.9	$0.8 \pm 0.1 \\ 0.8 \pm 0.1$	6.5 8.6	$9.9 \pm 1.4 \\ 6.6 \pm 1.7$	7.4 ± 2.4 1.7 ± 0.9	1.3 3.4
	Forward 5.4±1.6 5.5±0.7	Forward Backflux 5.4±1.6 0.4±0.1 5.5±0.7 0.8±0.1	Forward Backflux Flux ratio $5.4\pm1.6 0.4\pm0.1 13.5$ $5.5\pm0.7 0.8\pm0.1 6.5$	Forward Backflux Flux ratio Forward 5.4 ± 1.6 0.4 ± 0.1 13.5 7.4 ± 1.7 5.5 ± 0.7 0.8 ± 0.1 6.5 9.9 ± 1.4	Forward Backflux Flux ratio Forward Backflux 5.4 ± 1.6 0.4 ± 0.1 13.5 7.4 ± 1.7 0.9 ± 0.5 5.5 ± 0.7 0.8 ± 0.1 6.5 9.9 ± 1.4 7.4 ± 2.4

equimolar concentration of unlabeled Ca²⁺ on the opposite side. Thus an identical downhill gradient for Mn²⁺ was established either from ectoderm to endoderm, or from endoderm to ectoderm. It can be seen that even under these conditions backflux of Mn²⁺ into the tissue was small, while Mn²⁺ uptake by the ectoderm was unchanged and 8.6 times greater than endodermal Mn²⁺ uptake.

In these experiments the amount of Mn²⁺ or Ca²⁺ that completely traversed the tissue during the 3 h period of study was also monitored. These data are shown as transmembrane flux in Table I. With Ca²⁺ on both sides of the membrane (Experiment A), over 8 times as much Ca²⁺ was transferred from the ectodermal to the endodermal bathing solution as compared to movement in the opposite direction. With Mn²⁺ in the donor solution and Ca²⁺ in the acceptor solution (Experiment C) flux in the forward direction was also much larger than backflux. Under conditions where there were equimolar amounts of Mn²⁺ on both sides of the membrane (Experiment B) Mn²⁺ backflux was relatively large compared to Ca²⁺ under similar conditions or when the large down-hill chemical gradient was established. In other experiments, this large transmembrane backflux was not affected by metabolic inhibitors, whereas significant reductions in the forward flux of Mn²⁺ could be demonstrated, suggesting an increase in passive permeability of the whole tissue under these particular conditions.

Uptake of Mn2+ and Ca2+

TABLE II

Tissue uptake of Mn²⁺ and Ca²⁺ by the membrane was studied in parallel experiments in the Dubnoff Metabolic Shaker. Table II shows that Ca²⁺ uptake into the tissue was decreased to at least one-third of the control value by the metabolic inhibitors 2,4-dinitrophenol, oligomycin and rotenone. Membranes that have been "stripped", which is a mechanical separation of the inner shell membrane from the chorioallantoic membrane before incubation, and membranes taken from 10-day-old

EFFECT OF INHIBITORS ON TISSUE UPTAKE OF Ca²⁺ AND Mn²⁺ IN METABOLIC SHAKER EXPERIMENTS

Membranes were incubated in 0.75 mM Ca^{2+} or Mn^{2+} for 1.5 h. Results are expressed in nmol/cm² \pm S. E. for 8 experiments except for controls which represent 32 experiments. The concentration of metabolic inhibitor used is given in the table. Chorioallantoic membranes from 10-day-old embryos are histologically immature; "stripped membranes" are from 15- to 17-day-old embryos with the inner shell membrane mechanically removed from the tissue before study.

Experiment	Tissue Uptake						
	Calcium		Manganese				
	nmol/cm ²	% of control	nmol/cm ²	% of control			
Control	36.4±3.0		30.5±2.1	_			
2,4-dinitrophenol (0.2 mM)	11.6 ± 0.9	31.8	20.2 ± 3.4	66.2			
Oligomycin (10 µg/ml)	7.3 ± 0.9	19.9	15.5 ± 0.2	50.8			
Rotenone (10 µg/ml)	8.2 ± 1.9	22.4	18.1 ± 1.3	59.3			
10-day membranes	7.4 ± 0.9	20.3	17.1 ± 1.2	56.1			
Stripped membranes	6.0 ± 1.8	16.5	21.9 ± 1.9	71.8			

eggs, which have not yet begun to actively transport Ca²⁺ from the egg shell, also showed little Ca²⁺ accumulation. These results are the same as those found by studying Ca²⁺ transport in Ussing chambers [6].

Table II also shows Mn^{2+} uptake under the same conditions as the Ca^{2+} uptake experiments. Control membranes took up somewhat less Mn^{2+} than Ca^{2+} . This uptake was also significantly inhibited by 2,4-dinitrophenol, oligomycin and rotenone (t-test, p < 0.01), although the effect was not as great as that seen with Ca^{2+} . Similarly, 10-day membranes and stripped membranes contained less Mn^{2+} than the controls.

Kinetics of Mn2+ and Ca2+ uptake

A study was made of the kinetics of $\mathrm{Mn^{2}}^{+}$ and $\mathrm{Ca^{2}}^{+}$ uptake into the choricallantoic membrane to determine the saturability and affinity of the transport system for these ions. Competition studies between $\mathrm{Mn^{2}}^{+}$ and $\mathrm{Ca^{2}}^{+}$ were done to determine the effect of one ion on the uptake of the other. The competitive or noncompetitive nature of the $\mathrm{Mn^{2}}^{+}$ - $\mathrm{Ca^{2}}^{+}$ interaction was evaluated from these experiments.

The kinetics of uptake into the membrane were similar for both $\mathrm{Mn^{2+}}$ and $\mathrm{Ca^{2+}}$ (Fig. 1). As can be seen in Fig. 1A, which is a typical uptake curve for $\mathrm{Mn^{2+}}$ alone and $\mathrm{Mn^{2+}}$ in the presence of $\mathrm{Ca^{2+}}$, there was a very rapid binding of $\mathrm{Mn^{2+}}$ to the membrane within the first 10 s. The uptake was then linear for at least 2 min. The uptake of $\mathrm{Ca^{2+}}$, and of $\mathrm{Ca^{2+}}$ in the presence of $\mathrm{Mn^{2+}}$ also showed the same pattern (Fig. 1B). The initial velocity of entry (v_i) of $\mathrm{Mn^{2+}}$ or $\mathrm{Ca^{2+}}$ into the tissue was taken as the slope of the uptake curve during the first 2 min. Within the physiological concentration range 0.1–1.0 mM, values for v_i were determined for each ion alone and in the presence of the other. v_i for $\mathrm{Ca^{2+}}$ saturated at high concentrations and was reduced by the presence of $\mathrm{Mn^{2+}}$ at all $\mathrm{Ca^{2+}}$ concentrations. The v_i of $\mathrm{Mn^{2+}}$ followed a similar pattern as a function of $\mathrm{Mn^{2+}}$ concentration. It also saturated and was inhibited by $\mathrm{Ca^{2+}}$.

These data of v_i as a function of concentration may be replotted according to the method of Lineweaver and Burk [13] for Mn^{2+} and Ca^{2+} (Fig. 2). Assuming that

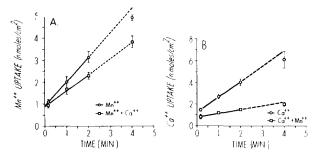


Fig. 1. Typical Mn^{2+} and Ca^{2+} tissue uptake experiments as a function of time. Plot A shows the uptake of 0.5 mM Mn^{2+} alone and in the presence of 5 mM Ca^{2+} . The corresponding experiment with 0.5 mM Ca^{2+} in the presence and absence of 5 mM Mn^{2+} is shown in plot B. Note that ordinate B is different from ordinate A. Each point represents the mean and standard error of at least six experiments. Initial velocity of entry into the tissue, v_1 , was taken as the slope of the linear least-squares line through the first three points (solid line).

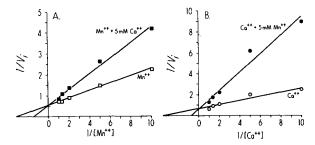


Fig. 2. Lineweaver-Burk plots of v_i as a function of external ion concentration. In this type of plot, the Michaelis constant K_m is given by the negative reciprocal of the abscissa intercept, and the maximum velocity V is the reciprocal of the ordinate intercept. Fig. A shows Mn^{2+} uptake with and without Ca^{2+} present, and Fig. B shows Ca^{2+} uptake with and without Mn^{2+} . Lines through data points were obtained from linear least-squares analysis. Note that the ordinates of A and B are different.

TABLE III

 $\rm Mn^{2+}$ AND $\rm Ca^{2+}$ UPTAKE KINETIC PARAMETERS DERIVED FROM LINEWEAVERBURK PLOTS OF $v_{\rm I}$ SHOWN IN FIG. 2

 $K_{\rm m}$ is the apparent Michaelis constant expressed as mM. V is the maximum velocity of uptake in nmol/cm² per min. Values for Ca²⁺ uptake studied over a 3 h period are taken from the data of Garrison and Terepka [12].

Experiment	K_{m}	V	
Mn ²⁺	0.33	1.90	
$Mn^{2+} + 5 mM Ca^{2+}$	0.67	1.81	
Ca ²⁺	0.29	1.50	
$Ca^{2+} + 5 \text{ mM Mn}^{2+}$	1.32	1.51	
Ca^{2+} (3 h)	0.28	1.83	

the uptake of these ions can be described by Michaelis-Menten kinetics, the intercepts of the line determined by these points give K_m , the apparent Michaelis constant, and V, the maximum velocity of uptake. In Fig. 2A, it can be seen that the lines for $\mathrm{Mn^{2+}}$, and $\mathrm{Mn^{2+}}$ plus $\mathrm{Ca^{2+}}$, intersect at the ordinate indicating that the V of $\mathrm{Mn^{2+}}$ uptake does not change significantly with $\mathrm{Ca^{2+}}$ present but the K_m does. The V and K_m of $\mathrm{Ca^{2+}}$ uptake with and without $\mathrm{Mn^{2+}}$ present (Fig. 2B) follows the same pattern. These data, summarized in Table III, are consistent with competitive inhibition between $\mathrm{Mn^{2+}}$ and $\mathrm{Ca^{2+}}$ for the uptake sites. The values obtained for $\mathrm{Ca^{2+}}$ uptake alone (Table III, third line) agree very well with those obtained previously [12] measuring total uptake by the ectodermal side of the membrane in the Ussing chamber over a 3-h period (Table III, last line). These $\mathrm{Mn^{2+}}$ and $\mathrm{Ca^{2+}}$ uptake experiments were also analyzed using Eadie-Hostee plots to determine K_m and V, and similar results were obtained.

Electron microprobe analysis of Mn²⁺ distribution

Electron probe X-ray microanalyzer studies of the Ca²⁺ distribution in the chorioallantoic membrane after exposure to Ca²⁺ shows Ca²⁺ localized in high

concentrations in certain regions of the tissue [8, 9]. This is in contrast to the distribution of other elements such as phosphorus and sulfur, which show a diffuse distribution throughout the membrane [14]. These Ca²⁺ localizations were found only in the "capillary-covering" cells of the chorioallantoic membrane ectoderm and were not present in young membranes or in membranes incubated with nitrogen or metabolic inhibitors.

If Mn²⁺ is accumulated by the Ca²⁺ transport system of the chorioallantoic membrane, then it might be expected that the pattern of Mn²⁺ distribution in the membrane would be similar to that of Ca²⁺. For this reason, tissues exposed to Mn²⁺ were examined in the electron microprobe. Sample current and Mn²⁺ X-ray images of membranes prepared as described in Methods above were recorded. Although more difficult to detect than Ca²⁺, when Mn²⁺ X-ray signals were detected they eminated primarily from discrete locations within the tissue samples. When the electron beam was centered on these locations, the counts from the X-ray spectrometer set for Mn²⁺ were from 5 to 15 times higher than the Mn²⁺ counts seen elsewhere in the tissue, indicating high local concentrations of Mn²⁺. By comparing the position of these localizations in the X-ray images with the corresponding sample current images, the Mn²⁺ concentrations were localized to the chorioallantoic membrane ectoderm and appeared to be near the ectodermal capillaries. This distribution is similar to the discrete distribution of the Ca²⁺ characteristic of actively transporting chorioallantoic membranes [9]. Also, like Ca2+, no Mn2+ concentrations were seen in the mesodermal or endodermal regions of the tissue.

DISCUSSION

The purpose of these investigations was to determine whether Mn²⁺ was taken up by the chorioallantoic membrane using the same energy-dependent mechanism that transports Ca²⁺. The tissue uptake and transport chamber experiments, in which the Mn²⁺ results in general paralleled those of Ca²⁺, indicated that a significant quantity of Mn²⁺ was accumulated by an energy-dependent process. The kinetic studies yielded similar kinetic parameters for Mn²⁺ and Ca²⁺ uptake and showed competitive inhibition of the uptake of one ion by the other. Mn²⁺ and Ca²⁺ were shown in electron probe investigations to have similar distributions in the membrane. On the other hand, these studies revealed several differences between Mn²⁺ and Ca²⁺ that may be important in understanding divalent cation transport in this tissue.

In the transport chamber experiments, where equimolar amounts of the ions were present on both sides of the membrane (Table I), the pattern of tissue uptake of Mn²⁺ was very similar to the pattern of uptake of Ca²⁺, with much greater uptake by the ectoderm than the endoderm in both cases. However, the transmembrane flux of Mn²⁺ in each direction was almost equal, while there was a larger forward flux than backflux with Ca²⁺. It may be that when the membrane is exposed to Mn²⁺ on both sides for 3 h it gradually becomes permeable to Mn²⁺ and passive fluxes develop in both directions across the tissue. This is supported by the fact that when Ca²⁺ replaced Mn²⁺ on one side, the values for both tissue uptake and transmembrane flux of Mn²⁺ were close to those seen for Ca²⁺, when Ca²⁺ was present on both sides of the membrane. In this case the transmembrane flux for Mn²⁺ in the forward

direction was much larger than the backflux, even though a large chemical gradient existed on both cases that favored Mn²⁺ movement across the membrane.

In the tissue uptake studies (Table II) Mn²⁺ uptake was significantly reduced in all experiments. The inhibition by 2,4-dinitrophenol, oligomycin and rotenone suggests that much of the Mn²⁺ uptake is dependent on ATP derived from oxidative phosphorylation. It is interesting in this respect that both Mn²⁺ and Ca²⁺ stimulate oxygen consumption in the chorioallantoic membrane [7]. The inhibition of Mn²⁺ uptake was not as great as the inhibition seen with Ca²⁺, so that relatively more Mn²⁺ may be entering the tissue passively.

The kinetic studies of Mn^{2+} and Ca^{2+} uptake by the chorioallantoic membrane showed rapid initial binding to the membrane followed by linear uptake in the case of both ions (Fig. 1). The rapid initial binding may be due to the non-specific binding of ions to the external surface of the tissue, or it may represent ions which have diffused into the extrafibrous space of the attached inner shell membrane. The linear uptake of Mn^{2+} and Ca^{2+} , which followed the rapid initial binding, was saturable and could be described by Michaelis-Menten kinetics (Fig. 2). The apparent K_m for Mn^{2+} is almost identical to that for Ca^{2+} , and the V is slightly larger (Table III). It is significant that the kinetics of Ca^{2+} uptake over the first 2 min are similar to the kinetics of total Ca^{2+} transport over 3 h. The similarity of these values derived in the two experiments suggest that initial entry of divalent cations into the transporting cells is a major barrier in the transcellular transport process.

The kinetic studies also demonstrated that each ion would competitively inhibit the uptake of the other. This indicates that Mn^{2+} and Ca^{2+} share a common saturable pathway into the membrane. The values in Table III reveal that Mn^{2+} was more effective in blocking Ca^{2+} entry than Ca^{2+} was in blocking Mn^{2+} entry. This may be another indication that some Mn^{2+} is also entering the tissue passively.

The electron microprobe studies of the Mn²⁺ distribution in the chorioallantoic membrane showed Mn²⁺ in discrete localizations after exposure to Mn²⁺. These Mn²⁺ concentrations were found only in the ectoderm of the tissue and in locations similar to those where Ca²⁺ concentrations have been found. The fact that Mn²⁺ and Ca²⁺ are both sequestered in high concentrations in the tissue is further evidence that they share a common pathway. Taken together, the experiments reported here strongly suggest that significant amounts of Mn²⁺ are taken up by the chorioallantoic membrane using the Ca²⁺ transport pathway. Consequently, EPR studies of Mn²⁺ incorporated into the tissue could provide further information on the intracellular mechanisms involved in the active transcellular transport of Ca²⁺ [11]. The chorioallantoic membrane is not unique in its handling of Mn²⁺, since Mn²⁺ can substitute for Ca²⁺ in other biological systems. Mn²⁺ is accumulated by the Ca²⁺ transport system of mitochondria [15], and it inhibits Ca²⁺ accumulation by chick embryo fibroblasts [16] and human lymphocytes [17]. Mn²⁺ also affects muscle contraction [18] and neuromuscular transmission [19] by competing with Ca²⁺. The ability of Mn²⁺ to substitute for Ca²⁺ in biological systems is probably due to the fact that they both have spherical charge distributions and that the 0.80 Å ionic radius of Mn²⁺ is close to the 0.98 Å radius of Ca²⁺.

Although this study has emphasized the use of Mn²⁺ as an analog for Ca²⁺ the absorption of Mn²⁺ itself across epithelial tissues such as the intestine is an important biological problem. Mn²⁺ is a dietary requirement in birds and mammals,

and almost all of it is absorbed through the intestine [20]. In normal adult rats this $\mathrm{Mn^{2^+}}$ uptake does not saturate [21], and there has been some uncertainty as to the effect of metabolic inhibitors on absorption [22, 23]. In iron-deficient rats $\mathrm{Mn^{2^+}}$ has an affinity for the carrier-mediated iron absorption system of the intestine [24]. The techniques used here to study $\mathrm{Mn^{2^+}}$ transport in the chorioallantoic membrane may also be useful in studying $\mathrm{Mn^{2^+}}$ interaction with the calcium and iron transport mechanisms of the intestine.

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