



5-Hydroxytryptamine stimulates phosphoinositide hydrolysis and contraction in the ovine umbilical artery

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Abstract

5-Hydroxytryptamine-stimulated contraction and generation of inositol phosphates (InsPs) were investigated in isolated ovine umbilical artery from near term pregnant sheep. 5-Hydroxytryptamine produced a concentration-dependent contraction in the presence or absence of external Ca^{2+} , however, the contractile response in Ca^{2+} -free medium was depressed by 67% (P < 0.05). The initial increase of either inositol monophosphate (InsP₁) or inositol bisphosphate (InsP₂) was not apparent, although a significant rise in both InsP₁ and InsP₂ was observed at 30 min (107 and 100% over basal level, P < 0.05). The generation of inositol trisphosphate (InsP₃) was rapid and reached its peak at 60–90 s (35% over basal level, P < 0.05), followed by a second rise at 30 min (96% over basal level, P < 0.05). The generation of InsPs stimulated by 5-hydroxytryptamine was also concentration-dependent. In agreement with previous contraction studies, the generation of InsPs stimulated by 5-hydroxytryptamine was blocked by 10 nM ketanserin, a specific 5-HT_{2A} receptor antagonist. A temporal study revealed that the generation of InsP₃ coincided with the phasic component of the contractile response induced by 5-hydroxytryptamine. Our results suggest that through activation of 5-HT_{2A} receptors, the generation of InsP₃ plays a critical role in the contraction induced by 5-hydroxytryptamine in the ovine umbilical artery.

Keywords: 5-HT_{2A} receptor; Inositol 1,4,5-triphosphate; Umbilical artery

1. Introduction

Vascular smooth muscle contracts when neurotransmitters or hormones bind to specific cell surface receptors. The occupancy of certain receptors such as α_1 -adrenoceptors (Gu et al., 1991) and 5-HT_{2A} receptors (Roth et al., 1986; Zhang and Hu, 1995) stimulates phospholipase C which then hydrolyses phosphatidylinositol 4,5-bisphosphate, leading to the generation of inositol 1,4,5-trisphosphate (InsP₃) in vascular smooth muscle. Ins(1,4,5)P₃ binds to its receptor to release Ca²⁺ from intracellular stores and initiates vasoconstriction (Somlyo et al., 1992). Hence, Ins(1,4,5)P₃ has been suggested to play an important role in pharmacomechanical coupling in smooth muscle (Somlyo and Somlyo, 1994).

The umbilical-placental vessels are devoid of innervation (Fox and Khong, 1990). Therefore, vasoactive factors

either carried by blood or produced locally play an important role in the regulation of foetoplacental circulation. 5-Hydroxytryptamine is a potent vasoconstrictor of the umbilical artery (Dyer, 1970; Somlyo et al., 1965). The contractions induced by 5-hydroxytryptamine in the ovine umbilical artery are mediated by 5-HT_{2A} receptors (Zhang and Dyer, 1990). 5-Hydroxytryptamine-stimulated formation of inositol phosphates (InsPs) has been demonstrated in a variety of vascular beds (Berta et al., 1986; Murphy and Garland, 1993; Nakaki et al., 1985), in which both contractions and the generation of InsPs are mediated by activation of 5-HT_{2A} receptors (Cohen and Wittenauer, 1987; Roth et al., 1986; Pauwels et al., 1990; Zhang and Hu, 1995). These observations imply a possible role for Ins(1,4,5)P₃ in 5-hydroxytryptamine-induced vasoconstriction. In fact, the hydrolysis of phosphoinositides and vasoconstriction in response to 5-hydroxytryptamine were closely correlated in the rat aorta (Roth et al., 1986) and ovine uterine artery (Zhang and Hu, 1995). However, a recent study showed that 5-HT_{2A} receptors are not coupled to phospholipase C in guinea-pig trachea (Watts et al.,

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1994). Plasma free 5-hydroxytryptamine in the umbilical artery and the sensitivity of umbilical artery to 5-hydroxytryptamine were increased in preeclamptic women (Taniguchi, 1995), suggesting that 5-hydroxytryptamine may play a role in the pathology of preeclampsia. The mechanism underlying the regulation of umbilical vascular function remains largely unknown. In order to understand the signal transduction pathways in response to 5-hydroxytryptamine in the ovine umbilical artery, the contractile response and phosphoinositide hydrolysis stimulated by 5-hydroxytryptamine were investigated.

2. Materials and methods

2.1. Materials

myo-[³H]inositol (16 Ci/mmol) was from DuPont-NEN (Boston, MA). Dowex AG 1X8 (formate form) and disposable columns (10 ml) were from Bio-Rad Laboratories (Richmond, CA, USA). 5-Hydroxytryptamine creatinine was from Sigma (St. Louis, MO, USA). Ketanserin tartrate was from Janssen Pharmaceutica (Beerse, Belgium).

2.2. Tissue preparation

Mixed breed sheep near term (~ 140 days of gestation) were anesthetized with an i.v. injection of pentobarbital sodium. Umbilical cords were quickly removed and placed in an oxygenated modified Krebs' solution (pH 7.4) of the following composition (in mM): NaCl, 115.21; KCl, 4.70; CaCl₂, 1.80; MgSO₄, 1.16; KH₂PO₄, 1.18; NaHCO₃, 22.14, dextrose, 7.88; and EDTA, 0.03. The arteries were carefully cleaned free from connective tissue and cut into 0.4–0.5 cm wide ring segments.

2.3. Contraction study

Ring segments of the umbilical artery were suspended in a 10-ml organ bath as described by Isla and Dyer (1990) and isometric tensions were measured with a Grass force transducer. Under 2 g resting tension the tissues were equilibrated for 60 min, and a single or cumulative concentration-response to 5-hydroxytryptamine was obtained in the presence or absence of external Ca²⁺.

2.4. Inositol phosphates determination

Generation of InsPs was measured by modification of the procedure previously described by Roth et al. (1986). Briefly, the ring segments were equilibrated in Krebs' solution at 37°C for 30 min under a 95% O_2 -5% CO_2 atmosphere and then transferred to vials containing 20 μ Ci/ml of myo-[3 H]inositol. The incubation was continued for 4 h. After washing 3 times with warm oxygenated

Krebs' solution to remove free myo-[3H]inositol, LiCl (final concentration 10 mM) was then added to the incubation medium 10 min before the application of the agonist. When an antagonist was used, it was added into the incubation medium 30 min before the application of the agonist. At the end of the incubation, the reaction was terminated by immersing the ring segments in liquid N₂. The tissues were then transferred to 2 ml ice-cold methanol/chloroform/HCl (200:100:1) for approximately 3 min and then were rapidly blotted dry, weighed and homogenized in the same methanol-chloroform-HCl mixture. Chloroform (1 ml) and water (1.1 ml) were added to the homogenates. After standing on ice for 4 h, the homogenates were centrifuged to separate the phases. The upper phase was then added to 1 ml of Dowex AG 1X8 (formate form) resin packed in a disposable column (Bio-Rad). The columns were then washed sequentially with 15 ml of water to elute free myo-[3H]inositol, 15 ml of 0.2 mM ammonium formate/0.1 M formic acid to elute inositol monophosphate (InsP₁), 15 ml of 0.4 M ammonium formate/0.1 M formic acid to elute inositol bisphosphate (InsP₂) and finally 15 ml of 1.0 M ammonium formate /0.1 M formic acid to elute inositol trisphosphate (InsP₂). 1 ml of each fraction was then transferred to liquid scintillation vials, and 15 ml scintillant was added and radioactivity was determined by a liquid scintillation spectrophotometry with 40% counting efficiency.

2.5. Statistics

Results are expressed as means \pm S.E. n refers to the number of animals used. A paired or unpaired Student's t-test was used and a P value of < 0.05 was taken as significant.

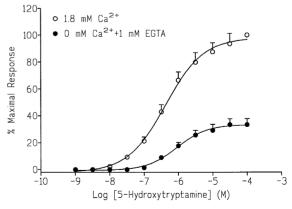


Fig. 1. Concentration—response curve for 5-hydroxytryptamine-induced contraction of the isolated ovine umbilical artery in the absence and presence of external Ca^{2^+} . The concentration of 5-hydroxytryptamine was increased by half log increments and isometric tension was measured. The maximal response to 5-hydroxytryptamine was $9.25\pm0.66~\text{g}$. Results are expressed as means \pm S.E. of three individual experiments.

3. Results

3.1. 5-Hydroxytryptamine-stimulated contraction and the time course for the production of inositol phosphates in the ovine umbilical artery

5-Hydroxytryptamine produced a concentration-dependent contraction of the ovine umbilical artery in the presence or absence of external Ca^{2+} (Fig. 1). Contractions induced by 5-hydroxytryptamine were depressed in the Ca^{2+} -free medium, in which Ca^{2+} was replaced by 1 mM EGTA). Although the pD₂ was not changed by removing Ca^{2+} (from 6.28 ± 0.09 to 6.04 ± 0.13), the maximal re-

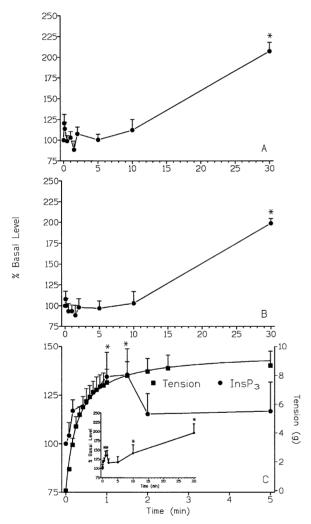


Fig. 2. Time-course of 5-hydroxytryptamine-stimulated production of inositol phosphates in the isolated ovine umbilical artery. Ring segments of the artery were exposed to 100 μ M 5-hydroxytryptamine at 37°C for various times. InsP1 (A), InsP2 (B), and InsP3 (C) were separated as described in Section 2 and expressed as cpm. Basal levels of individual inositol phosphates (cpm/mg wet weight) were 144.4 \pm 13.3, 89.0 \pm 11.7 and 22.5 \pm 6.8 for InsP1, InsP2 and InsP3, respectively. In addition to InsP3, the time-course of 100 μ M 5-hydroxytryptamine-induced contraction of the umbilical artery is also presented in Fig. 2C (n=6). Inset: time-course (up to 30 min) of 5-hydroxytryptamine-stimulated production of InsP3 in the ovine umbilical artery. Results are expressed as means \pm S.E. of five or six individual experiments. * P<0.05 vs. basal level.

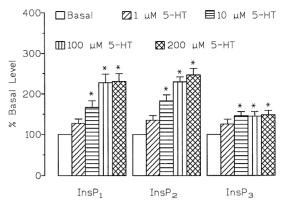


Fig. 3. Concentration—response for 5-hydroxytryptamine (5-HT)-stimulated production of inositol phosphates in the isolated ovine umbilical artery. Ring segments of the artery were exposed to 5-hydroxytryptamine at indicated concentrations (1–200 μ M) at 37°C for 30 min. Individual inositol phosphates were separated as described in Section 2 and expressed as cpm. Basal levels of inositol phosphates (cpm/mg wet weight) were $127.8\pm17.8,\ 63.7\pm7.8$ and 38.5 ± 9.4 for $InsP_1,\ InsP_2$ and $InsP_3,$ respectively. Results are expressed as means \pm S.E. of five or six individual experiments. * P<0.05 vs. basal level.

sponse for 5-hydroxytryptamine were decreased by 67% (P < 0.05). Since the maximal response was obtained at the concentration of 100 µM 5-hydroxytryptamine, 100 μM 5-hydroxytryptamine was chosen for the time-course study of 5-hydroxytryptamine-stimulated generation of InsPs. The effect of the duration of stimulation by 5hydroxytryptamine on the hydrolysis of phosphoinositides is shown in Fig. 2. Following the application of 5-hydroxytryptamine (100 µM), the initial increases in the generation of InsP₁ and InsP₂ were not apparent. The rise occurred after 5 min for both InsP₁ and InsP₂, which were linear with time until 30 min (107% and 100% over basal level at 30 min, respectively, P < 0.05). The generation of InsP₃ was biphasic in response to stimulation by 5hydroxytryptamine (Fig. 2C). The generation of InsP₃ increased at 5 s and proceeded at a slow rate. A peak of InsP₃ generation was reached at 60–90 s (35% over basal level, P < 0.05). The generation of InsP₃ then declined to the basal level at 2 min. A second rise was seen after 5 min, and at 30 min it reached 96% over basal level (P < 0.05). As shown in Fig. 2C, 5-hydroxytryptamine (100 µM) produced a contraction consisting of two components: a phasic contraction followed by a tonic contraction. The time to reach peak tension was 1.8 ± 0.2 min. The contractions in response to 5-hydroxytryptamine coincided with the generation of InsP₃, suggesting an important role for InsP₃ in 5-hydroxytryptamine-induced contraction of the ovine umbilical artery.

3.2. Concentration-response of 5-hydroxytryptaminestimulated production of inositol phosphates and effects of ketanserin in the ovine umbilical artery

Since the maximal production of inositol phosphates occurred at 30 min in the ovine umbilical artery, the

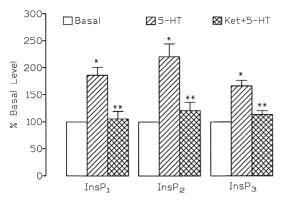


Fig. 4. Effects of ketanserin on 5-hydroxytryptamine (5-HT)-stimulated production of inositol phosphates in the isolated ovine umbilical artery. Ring segments of the artery were exposed to 100 μ M 5-hydroxytryptamine at 37°C for 30 min, and ketanserin (10 nM) when used was incubated with the tissues for 30 min before the addition of the agonist. Basal levels of individual inositol phosphates (cpm/mg wet weight) were 117.6 ± 12.6 , 60.4 ± 5.0 and 37.5 ± 8.1 for InsP₁, InsP₂ and InsP₃, respectively. Results are expressed as means \pm S.E. of five individual experiments. * P < 0.05 vs. basal level. * * P < 0.05 vs. 5-hydroxytryptaminestimulated response.

concentration-response of 5-hydroxytryptamine-stimulated generation of InsPs was obtained at this time interval. As shown in Fig. 3, 5-hydroxytryptamine (1–200 μ M) stimulated a concentration-dependent increases in the production of InsP₁, InsP₂ and InsP₃. In agreement with the contraction study, in which 5-HT_{2A} receptors mediated the contractile response to 5-hydroxytryptamine (Zhang and Dyer, 1990), the specific 5-HT_{2A} receptor antagonist ketanserin at 10 nM abolished the 5-hydroxytryptamine-stimulated production of InsP₁, InsP₂ and InsP₃ (InsP₁: from 186% to 106% over basal level; InsP₂: from 221% to 120% over basal level; InsP₃: from 166% to 113% over basal level, P < 0.05, Fig. 4). This strongly indicates that 5-hydroxytryptamine-stimulated phosphoinositide hydrolysis was mediated by 5-HT_{2A} receptors in the ovine umbilical artery.

4. Discussion

5-Hydroxytryptamine produces vasoconstriction in most isolated vessels through either 5-HT_{2A} or 5-HT₁-like receptors (Martin, 1994). In the isolated ovine umbilical artery, 5-hydroxytryptamine was a potent vasoconstrictor. Previous studies demonstrated that the contractile response to 5-hydroxytryptamine was mediated through 5-HT_{2A} receptors (Zhang and Dyer, 1990). It is generally accepted that 5-HT_{2A} receptors are coupled to phospholipase C (Hoyer et al., 1994). However, 5-HT_{2A} receptors in the guinea-pig trachea were not coupled to phospholipase C (Watts et al., 1994). Little is known about the mechanisms underlying the regulation of umbilical vascular function. Understanding the signal transduction pathways in the umbilical artery will not only increase our knowledge on the regulation of foetoplacental circulation but also provide possible im-

provement of therapy of diseases associated with pregnancy.

Ca²⁺ plays a pivotal role in pharmacomechanical coupling. An increase in the intracellular Ca²⁺ level initiates vasoconstriction (Somlyo and Somlyo, 1994). Either Ca²⁺ influx from an extracellular environment or Ca²⁺ release from intracellular stores, or both could contribute to the increase in the intracellular Ca²⁺ level. In the absence of external Ca²⁺, 5-hydroxytryptamine still produced contractions of the ovine umbilical artery, although the contractions were depressed by Ca²⁺ deprivation. Our findings suggest that both Ca²⁺ influx and Ca²⁺ release play a role in 5-hydroxytryptamine-induced contraction of the ovine umbilical artery. Similar findings were observed in the human umbilical artery (Dogan et al., 1991).

Upon occupancy of its receptor by an agonist, a characteristic series biochemical events are initiated. For those receptors coupled to phospholipase C, activation of them results in generation of two second messengers: InsP₃ and diacylglycerol (Berridge, 1993). InsP₃ releases Ca²⁺ from intracellular stores and initiates vasoconstriction (Somlyo et al., 1992), whereas diacylglycerol may play a role in the maintenance of contraction (Rasmussen et al., 1987). Agonist-induced vasoconstriction in the absence of external Ca²⁺ is believed to be the result of InsP₃-induced Ca²⁺ release from intracellular stores (Minneman, 1988). Contraction of the ovine umbilical artery by 5-hydroxytryptamine in a Ca²⁺-free medium implies the possible role of InsP₃.

Measurement of phosphoinositide turnover could serve as a useful means for monitoring the functional effects of 5-HT_{2A} receptors (Hoyer et al., 1994). Therefore, the generation of InPs in response to 5-hydroxytryptamine in the ovine umbilical artery was determined. Similar to the findings in other vascular beds (Berta et al., 1986; Murphy and Garland, 1993; Nakaki et al., 1985; Zhang and Hu, 1995), 5-hydroxytryptamine stimulated the generation of InsPs in the ovine umbilical artery. As a general rule, the generation of second messenger(s) should precede or coincide with the cellular response upon stimulation of the receptors. We compared the time course of 5-hydroxytryptamine-stimulated InsP₃ and contractile response. The temporal studies revealed that the generation of InsP3 coincided with the contraction in response to 5-hydroxytryptamine in the ovine umbilical artery. This finding is in close agreement with those seen in the rat tail artery (Gu et al., 1991) and in the ovine uterine artery (Zhang and Hu, 1995), and confirms the suggestion that InsP₃ functions as a causative factor in agonist-induced vasoconstriction (Somlyo and Somlyo, 1994). Due to the inability of anion exchange chromatography to separate Ins(1,4,5)P₃ from Ins(1,3,4)P₃, InsP₃ measured in the present study could consist of these two isoforms. Current knowledge indicate that only $Ins(1,4,5)P_3$ has the ability to release Ca^{2+} from intracellular stores (Berridge, 1993). However, Ins(1,3,4)P₃ is an enzymatic metabolite of Ins(1,4,5)P₃ (Majerus, 1992) and $InsP_3$ measured in the present study can be considered as an index of the production of $Ins(1,4,5)P_3$.

The receptor subtype involved in 5-hydroxytryptaminestimulated generation of InsPs in the ovine umbilical artery was also investigated. Similar to the observation in a previous contraction study (Zhang and Dyer, 1990), ketanserin, a specific 5-HT_{2A} receptor antagonist (Hoyer et al., 1994), blocked 5-hydroxytryptamine-stimulated phosphoinositide hydrolysis. This observation suggests that 5hydroxytryptamine stimulates the hydrolysis of phosphoinositides as a consequence of activation of 5-HT_{2A} receptors in the ovine umbilical artery. Our finding is in agreement with those observations in the rat aorta (Cohen and Wittenauer, 1987; Roth et al., 1986), rat portal vein (Cohen and Wittenauer, 1987), A7r5 cells (Doyle et al., 1986), and ovine uterine artery (Zhang and Hu, 1995), in which 5-HT₂₄ receptors mediate the hydrolysis of phosphoinositides. In the human umbilical artery smooth muscle cells, 5-hydroxytryptamine also stimulated the production of InsPs (Hawley et al., 1995). Although both 5-HT_{2A} and 5-HT₁-like receptors are present in the human umbilical artery (MacLennan et al., 1989), recent findings suggest that 5-HT₁-like receptors are not coupled to phospholipase C (Murphy and Garland, 1993; Seager et al., 1994).

In summary, we demonstrated that 5-hydroxytryptamine induced vasoconstriction of the ovine umbilical artery, using both extracellular and intracellular Ca²⁺ sources. 5-Hydroxytryptamine stimulated phosphoinositide hydrolysis, which was blocked by ketanserin, a specific 5-HT_{2A} receptor antagonist. 5-Hydroxytryptamine-stimulated generation of InsP₃ coincided with the contractile response. Our findings suggest that 5-hydroxytryptamine-induced vasoconstriction of the ovine umbilical artery was mediated by activation of 5-HT_{2A} receptors. The generation of InsP₃ played an important role in 5-hydroxytryptamine-induced contractions.

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