

# Hydrogen peroxide has a role in the aggregation of human platelets

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The aggregation of platelets induced by soluble and particulate stimuli is enhanced by the addition of minute amounts of  $H_2O_2$ . Externally added catalase strongly inhibits the aggregation induced by particulate stimuli and by phorbol myristate acetate (PMA). The addition of aminotriazole to stimulated platelets causes a significant inhibition of intracellular catalase. This indicates the formation of  $H_2O_2$  inside the platelets during activation. No effects were observed when the platelets were stimulated by the ionophore A23187.

*Human platelet    Platelet aggregation    Catalase    Hydrogen peroxide    Kawasaki's disease*

## 1. INTRODUCTION

The interaction of  $H_2O_2$  with platelets *in vitro* has been extensively studied because it is thought that platelets can be exposed *in vivo* to the  $H_2O_2$  produced by PMN cells undergoing the respiratory burst [1]. However, the reports on the interaction of platelets with  $H_2O_2$  appear to be conflicting. In fact, some authors found that  $H_2O_2$  is a powerful inhibitor of platelet functions [2,3] while others found that  $H_2O_2$  may induce aggregation of platelets [4]. Moreover, the aggregation is inhibited by a variety of antioxidants and scavengers of  $H_2O_2$  [5–8]. Yoshikawa et al. [9] recently reported that catalase can prevent the intravascular coagulation in rats induced by endotoxin. It has also been reported that  $H_2O_2$  alone or in the presence of myeloperoxidase stimulates various platelet activities, such as the hexose monophosphate shunt [4,10], and that platelets may consume

large amounts of  $H_2O_2$  added to the incubation medium [11]. These reports together with growing evidence that the generation of  $H_2O_2$  by cells is indeed purposeful and can no longer be considered as a mere undesirable byproduct of cell respiration [12] prompted us to investigate in more detail the role of  $H_2O_2$  in platelets. We previously reported that platelets carry a membrane-bound  $H_2O_2$ -generating system which is activated by immunological stimuli [13]. In fact human platelets have been shown to release minute amounts of  $H_2O_2$  after stimulation with latex or opsonized zymosan [14].

Here we report that externally added catalase causes inhibition of platelet aggregation induced by several different stimuli. Moreover, almost all the platelet agonists investigated do induce  $H_2O_2$  generation inside the platelets.

## 2. MATERIALS AND METHODS

The chemicals were from commercial sources and were used without further purification. Platelets were prepared from blood samples obtained from healthy donors not taking any drugs for at least 20 days, after informed consent. Blood, col-

*Abbreviations:* AT, 3-amino-1,2,4-triazole; PMA, phorbol myristate acetate; U46619, 15(S)-hydroxy-9 $\alpha$ , 11 $\alpha$ -methanoepoxyprostadienoic acid; PMN, polymorphonuclear cell; PBS, phosphate-buffered saline

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lected in 3.8% Na citrate or 5 mM EDTA, was centrifuged at  $100 \times g$  for 15 min. Residual PMNs were eliminated by centrifuging the plasma through a Ficoll layer (23%, w/v) at  $80 \times g$  for 20 min. This procedure gave the PRP used for the aggregation studies. A further centrifugation of PRP at  $1200 \times g$  for 15 min gave a platelet-containing pellet and a supernatant platelet-free plasma. The pellet was resuspended in Dulbecco's PBS, pH 7.4, at a concentration of  $3.3 \times 10^8$  platelets/ml. These platelet preparations contained less than 1 PMN/ $10^8$  cells [14,15]. Platelets were activated with agonists and with opsonized zymosan as described [14]. Activation experiments were performed at least in triplicate in the presence and absence of crystalline bovine liver catalase (Sigma, St. Louis). Further controls with catalase inactivated by heat or by treatment with AT (Fluka AG, Switzerland) and peroxide [16] were also carried out. Platelet aggregation was monitored by the change in light transmission at 650 nm in a model 840 dual-channel Elvi aggregometer (Elvi Logos, Milan) according to Born [17]. Platelet catalase activity in the presence and absence of 1 mM AT was measured at 30°C, using an oxygen-sensitive electrode (Yellow Springs Instruments, OH) in a 3 ml vessel. The enzymic activity was measured in lysed platelet suspensions. At the end of incubation with agonists, the reaction was stopped with melting ice. After accurate removal of AT by at least 3 washings, the platelets were disrupted by homogenization in a teflon potter. The sample (200  $\mu$ l) was diluted in the oxygraph vessel with 2 ml distilled water. When thermal equilibrium was reached,  $H_2O_2$  was added to a final concentration of 8 mM, and catalase-catalyzed  $H_2O_2$  degradation was recorded. The spontaneous degradation of  $H_2O_2$  was also recorded and subtracted accordingly from the oxygen production in the presence of catalase. Specific activity of catalase was defined as nmol  $O_2$  generated/min per mg platelet protein [18]. Peroxidase activity was determined spectrophotometrically in the presence of 10 mM  $H_2O_2$  and o-dianisidine as in [19]. Protein was determined by the method of Lowry et al. [20].

### 3. RESULTS

The addition of catalase to a platelet suspension strongly reduced the extent of aggregation induced

by particulate stimuli (latex particles, opsonized zymosan, collagen) (fig.1A-C) or by a membrane-perturbing agent such as PMA (fig.1D). Boiled catalase or catalase inactivated by AT and peroxide was without effect. The aggregation induced by soluble stimuli (ADP, thrombin, epinephrine) was instead insensitive to the presence of catalase (fig.1E-G). However, this enzyme strongly inhibited the ADP-induced aggregation of platelets from a patient bearing Kawasaki's disease (fig.2A). This effect was only observed during the acute phase of the disease, when a hyperaggregability of platelets was also present. In the remission stage,

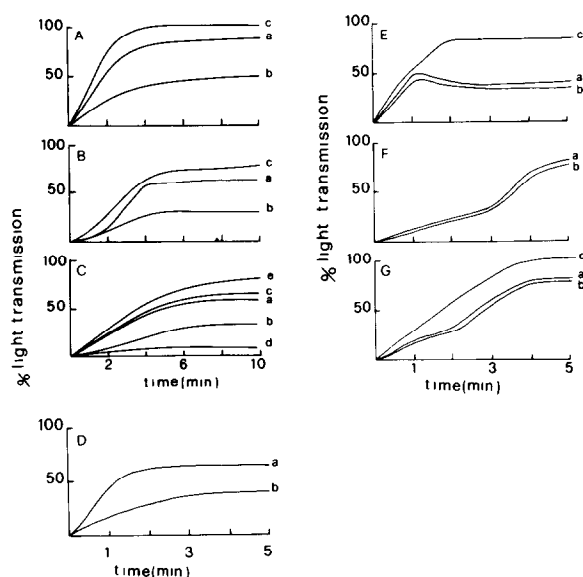


Fig.1. Effect of catalase and  $H_2O_2$  on platelet aggregation. (A) Aggregation of PRP induced by collagen (2  $\mu$ g/ml). a, no addition; b, + catalase; c, +  $H_2O_2$ . (B) Aggregation of PRP induced by latex ( $\varnothing$  0.08  $\mu$ m, 100 particles/platelet). a, no addition; b, + catalase; c, +  $H_2O_2$ . (C) Aggregation of PRP induced by zymosan (4 mg/ml). a, opsonized zymosan alone; b, opsonized zymosan + catalase; c, opsonized zymosan +  $H_2O_2$ ; d, non-opsonized zymosan; e, non-opsonized zymosan +  $H_2O_2$ . (D) Aggregation of PRP induced by PMA (20 nM final concentration). a, no addition; b, + catalase. (E) Aggregation of PRP induced by ADP (1  $\mu$ M). a, no addition; b, + catalase; c, +  $H_2O_2$ . (F) Aggregation of PRP induced by epinephrine (0.5  $\mu$ M). a, no addition; b, + catalase. (G) Aggregation of a platelet suspension in Dulbecco's PBS ( $10^9$ /ml) induced by  $\alpha$ -thrombin (0.05 U). a, no addition; b, + catalase; c, +  $H_2O_2$ . Where added catalase was 500 U;  $H_2O_2$  was 200 nM.

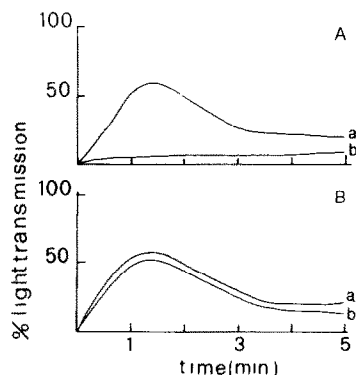


Fig.2. Aggregation of PRP from a patient with Kawasaki's disease. (A) During the acute phase. a, ADP (1  $\mu$ M); b, + ADP and catalase. (B) During the remission phase. a, ADP (1  $\mu$ M); b, + ADP and catalase. The patient was a 4-year-old girl (E.D.), who presented 6 out of the 6 symptoms of Kawasaki's disease [21]. The reversibility of aggregation is due to the fact that the patient was under treatment with acetylsalicylic acid.

catalase no longer affected ADP-induced aggregation, as found in healthy subjects (fig.2B). It is important to note that at this stage the patient also did not show platelet hyperaggregability. Non-opsonized zymosan is unable to elicit the aggregation of platelets except in the presence of 200 nM  $H_2O_2$ . The addition of peroxide also increased the aggregation induced by collagen, and to a lesser extent, that induced by ADP and thrombin. The aggregation induced by A23187 was not affected by the addition of catalase, while it was inhibited by exogenous  $H_2O_2$ .

Further evidence of the involvement of  $H_2O_2$  in the aggregation process was obtained by poisoning the platelets with AT. This compound forms an irreversible adduct with catalase only in the presence of  $H_2O_2$  [16]. The incubation of platelets with 1 mM AT and 1 mM  $H_2O_2$  for 15 min produced 50% inhibition of the intracellular catalase. Greater inhibition of catalase was obtained when platelets were incubated with AT alone and then stimulated with collagen, ADP, opsonized zymosan, PMA, U46619, and low amounts (0.05 U/ml) of thrombin (table 1). Larger amounts ( $\geq 2$  U/ml) of thrombin and A23187 did not produce significant inactivation of platelet catalase. The activity of peroxidase was only slightly affected by AT.

Table 1

Catalase activity of platelets

Experiments	- AT (mean $\pm$ SE)	+ AT (1 mM) (mean $\pm$ SE)	n
Resting platelets	3.70 $\pm$ 0.25	3.20 $\pm$ 0.8	7
Stimulated platelets			
+ A23187	3.60	3.1	3
+ U46619	3.60	1.5	3
+ latex	3.75 $\pm$ 0.15	1.5 $\pm$ 0.25	6
+ collagen	3.50 $\pm$ 0.15	1.0 $\pm$ 0.25	8
+ PMA	3.60 $\pm$ 0.26	1.2 $\pm$ 0.12	6
+ ADP (1 $\mu$ M)	3.0	1.4	3
+ ADP (0.2 $\mu$ M)	3.50	1.0	3
+ thrombin (0.05 U/ml)	3.0	1.3	3

Values expressed as nmol  $O_2$  produced/mg protein

#### 4. DISCUSSION

A recent review [12] has put into focus the widespread generation of  $H_2O_2$  in cellular plasma membranes and its role in several cellular phenomena. Moreover, the production of  $H_2O_2$  in mitochondria, microsomes, peroxisomes and nuclei is well established [12].

We have reported that platelets do release small amounts of  $H_2O_2$  when challenged with particulate, immunological stimuli [14]. Here, we further show that the presence of externally added active catalase strongly decreases the aggregation of platelets triggered by particulate stimuli and by membrane-perturbing agents such as PMA. Soluble stimuli do not cause a detectable release of  $H_2O_2$  from platelets. Accordingly, the aggregation of normal human platelets induced by these agents is not affected by the presence of catalase. One interesting exception is presented by the platelets drawn from a girl affected by the Kawasaki's disease [21]. During the acute phase of the disease, the aggregation induced by ADP was dramatically decreased by catalase. This effect was not seen to increase during the recovery period, when the platelets no longer showed hyperaggregability as in the acute phase.

The addition of minute amounts of  $H_2O_2$  to a platelet suspension to some extent enhanced the aggregation induced by most stimuli (fig.1). The most spectacular effect of  $H_2O_2$  was observed with

non-opsonized zymosan, which was unable to trigger the aggregation except in the presence of  $\text{H}_2\text{O}_2$  as was the peroxide alone.

The experiments with AT clearly demonstrated that  $\text{H}_2\text{O}_2$  is produced in the course of platelet activation with all stimuli used except the ionophore A23187 (table 1). Conversely,  $\text{H}_2\text{O}_2$  was inhibitory with this stimulus only. This finding may suggest either that there is more than one mechanism of platelet activation, or that the production of  $\text{H}_2\text{O}_2$  is an intermediate in a cascade process, perhaps occurring after the formation of arachidonic acid products but before the mobilization of  $\text{Ca}^{2+}$ . The latter hypothesis seems to be substantiated by the formation of  $\text{H}_2\text{O}_2$  induced by the stable analogue of prostaglandin endoperoxides U46619, and by the experiments done with A23187. However, the differential sensitivity of platelets to external catalase depending on the type of stimulus (soluble or particulate) used seems to indicate that different transduction mechanisms of the external stimuli might be operating. Nishizuka [22] in fact suggested that the information can be brought inside from the platelet surface after the binding of a stimulatory agent either by the activation of protein kinase or by calcium mobilization [22]. The presence of alternative routes may allow finer control over different processes in the same cell. We suggest that  $\text{H}_2\text{O}_2$  plays a role in such transduction. Similarly,  $\text{H}_2\text{O}_2$  was found to mimic the insulin effect on adipocytes and to stimulate the lymphocyte blastization [23,24]. A relationship between oxidative agents and hypercoagulability has been suggested [25,26]. Furthermore, several lines of evidence have established a clear correlation between  $\text{H}_2\text{O}_2$  and  $\text{Ca}^{2+}$  flux in mitochondria, microsomal vesicles and plasma membranes [27-29]. A physiological relevance of the peroxide-induced release of  $\text{Ca}^{2+}$  has been proposed [30].

It is conceivable that the level of  $\text{H}_2\text{O}_2$  produced upon stimulation may vary as a function of physiological or pathological states of the platelets. Further study is required to ascertain whether the production of  $\text{H}_2\text{O}_2$  is impaired when the aggregability of platelets is altered as in Kawasaki's disease, and to investigate the possible use of catalase as an anti-aggregating agent in vivo [9].

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