

Induction of IL-8 in Periodontal Ligament Cells by H₂O₂

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Periodontitis is an inflammatory disease caused by bacteria. In periodontitis, reactive oxygen species (ROS) are released from inflammatory cells in response to bacteria. Interleukin (IL)-8 is one of pro-inflammatory cytokines. To investigate the role of ROS in pathogenesis of periodontitis, we estimated the effect of H₂O₂, one of ROS, on the expression of IL-8 in human periodontal ligament (PDL) cells. PDL cells were treated with H₂O₂. IL-8 expression was determined by reverse transcription-polymerase chain reaction (RT-PCR) and enzyme-linked immunosorbent assay (ELISA). The phosphorylation of extracellular signal-regulated kinase (ERK) and p38 mitogen-activated protein kinase (p38) and c-jun NH₂-terminal kinase (JNK) was estimated by Western blotting. Treatment with H₂O₂ at concentration of up to 250 μ M increased IL-8 mRNA expression and production in a concentration-dependent manner. However, treatment with 500 μ M H₂O₂ did not increase IL-8 production. Catalase, an inhibitor of H₂O₂, down-regulated the production of IL-8 induced by H₂O₂. H₂O₂ increased the phosphorylation of ERK, p38, and JNK. Pretreatment with PD98059 (ERK inhibitor), SB203580 (p38 inhibitor), or SP600125 (JNK inhibitor) decreased the IL-8 production induced by H₂O₂. These results indicate that H₂O₂ acts as an inducer of IL-8 secretion via activation of ERK, p38, and JNK in PDL cells. H₂O₂ deposited in periodontal tissue during inflammation against bacteria may accelerate tissue destruction via induction of IL-8 in PDL cells.

Keywords: IL-8, periodontal ligament cells, H₂O₂

Superoxide anion, which is formed by NADPH oxidase, xanthin oxidase or mitochondrial electron transport chain (Droge, 2002), is converted into hydrogen peroxide (H₂O₂) and singlet oxygen. These reduced metabolites of O₂ are referred to as "reactive oxygen species (ROS)" (Thannickal and Fanburg, 2000; Dröge, 2002). ROS cause damage to lipid, protein, and DNA, and this effect acts harmful or beneficial to host. ROS function as a tissue destructive factor by damaging components of host cells (Valko *et al.*, 2006, 2007). In contrast, ROS function as an antibacterial factor by damaging components of pathogens within phagocytes (Valko *et al.*, 2006, 2007). Recently, ROS have also been recognized as signaling molecules that regulate cell proliferation and the expression of genes (Genestra, 2007).

Periodontitis is a bacteria-induced inflammatory disease that is accompanied by gingival inflammation and alveolar bone loss. The tissue damage induced by periodontitis is caused directly by bacteria and indirectly by inflammation and immune response against bacteria (Ishikawa, 2007). In the inflammatory process, activated phagocytes such as neutrophils and macrophages produce large quantities of ROS via the NADPH oxidase (Valko *et al.*, 2007). Patients with periodontal disease display increased neutrophil number and activity (Kimura *et al.*, 1993; Liu *et al.*, 2001; Sculley and Langley-Evans, 2002). *Fusobacterium nucleatum*, a perio-

dontopathogen, increases not only the intracellular production of ROS, but also the extracellular release of ROS in neutrophils (Sheikhi *et al.*, 2000, 2001). In saliva or gingival crevicular fluid of periodontitis patients, level of lipid peroxidation induced by ROS was higher than that of healthy controls (Tsai *et al.*, 2005). In addition, it has been demonstrated that hydroxyl radicals induce major oxidative damage to gingiva *in vitro* (Bartold *et al.*, 1984). Furthermore, radical scavenger has been found to decrease all parameters associated with inflammation in rat periodontitis, including myeloperoxidase activity, vascular permeability, and bone destruction, suggesting that antioxidant treatment, which interferes with ROS, is beneficial for the treatment of periodontitis (Di Paola *et al.*, 2005). Taken together, periodontopathogens stimulate neutrophils to release ROS, which then cause damage to periodontal tissue. Although it has been suggested that ROS are important in the pathogenesis of periodontitis, very little is known about the exact role of ROS in tissue destruction of periodontitis. A better understanding of the effects of ROS on cells of periodontal tissue could provide important information regarding the pathogenesis of periodontitis.

Cytokines, which induce inflammation and bone resorption, play an important role in the pathogenesis of periodontitis. Interleukin (IL)-8 is a CXC chemokine that functions as pro-inflammatory cytokine. IL-8 is a potent neutrophil chemoattractant and activator (Baggiolini and Clark-Lewis, 1992). Receptor activator of NF- κ B ligand (RANKL), a tumor necrosis factor (TNF) family cytokine, induces osteo-

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clast formation and plays an important role in bone resorption (Tanaka, 2007). It has been reported that IL-8 stimulated osteoclast formation either in the presence or absence of RANKL (Bendre *et al.*, 2003, 2005). In periodontitis, the level of IL-8 in gingival crevicular fluid and periodontal tissue is increased, which is correlated with disease activity (Tsai *et al.*, 1995; Gamonal *et al.*, 2000, 2001). Therefore, IL-8 may be involved in pathogenesis of periodontitis as an inflammation and bone resorption-inducing factor. Periodontal ligament (PDL) cells, between alveolar bone and tooth root, are one of representative cells in periodontal tissue. In this study, we examined the effect of H₂O₂ on the expression of IL-8 and the mechanism that is required for IL-8 induction by H₂O₂ in PDL cells.

Materials and Methods

Primary cultures of periodontal ligament (PDL) cells

PDL tissues were obtained from extracted teeth for orthodontic treatment. The protocol was approved by Institutional Review board of Yonsei Dental Hospital. Primary human PDL cells were cultivated from PDL tissues attached to the middle one third of the extracted premolar and molar tooth roots. Using blades, PDL tissue fragments were removed from tooth and were washed three times with α -modified Eagle's medium (α -MEM, Gibco BRL, USA) containing antibiotics of 300 mg/ml streptomycin, 0.75 mg/ml amphotericin-B, and 300 unit/ml penicillin (Gibco BRL, USA). PDL tissue fragments were placed in 100-mm dishes containing α -MEM supplemented with antibiotics of 100 mg/ml streptomycin, 0.25 mg/ml amphotericin-B, 100 unit/ml penicillin, and 20% fetal bovine serum (FBS, Gibco BRL, USA). The cultures were replaced every 2 days until cells grew from the fragments, after which the cultures were maintained with α -MEM containing antibiotics and 10% FBS. Upon reaching 70% confluence, the cells were removed with 0.25% trypsin and passaged to 100-mm dishes. The cells used in this study had been passaged 5 to 8 times.

Treatment of H₂O₂ in PDL cells

PDL cells were seeded at 5×10^5 /well in 6-well plates and grown in α -MEM supplemented with antibiotics and 10% FBS. After reaching confluency, the cells were incubated with H₂O₂ (Calbiochem, USA) at the indicated concentrations for 8 h. For pretreatment, the cells were incubated with catalase (Sigma Chemical Co., USA) or each mitogen-activated protein kinases (MAPKs) inhibitor (PD98059, SB203580 or SP600125, Sigma Chemical Co.) for 30 min and then treated with H₂O₂ for 8 h. After the H₂O₂ treatment, the cells were processed for Western blotting or reverse transcription-polymerase chain reaction (RT-PCR) and the culture supernatants were processed for enzyme-linked immunosorbent assay (ELISA).

Reverse transcription-PCR (RT-PCR)

Gene expression of IL-8 and glyceraldehyde-3-phosphate dehydrogenase (GAPDH) was analyzed using RT-PCR. Total RNA was extracted using Trizol reagent (Invitrogen Corp., USA) and 1 μ g of total RNA was then converted to cDNA using an RT Premix Kit (Bioneer, Korea) according to the

manufacturer's instructions. PCR was performed using a PCR Premix Kit (Intron Biotechnology, Korea). The primers (25 pM) used for PCR were as follows: IL-8 sense primer, 5'-ATGACTTCCAAGCTGGCCGTGGCT-3'; antisense primer, 5'-TCTCAGCCCTCTTCAAAAACCTTCTC-3'; GAPDH sense primer, 5'-CGGAGTCAACGGATTGGTTCGTAT-3'; and antisense primer 5'-AGCCTTCTCCATGGTGGTGAA GAC-3'. For IL-8, the reaction mixtures were subjected to 25 cycles of denaturation at 95°C for 30 sec, annealing at 62°C for 30 sec, and extension at 72°C for 30 sec. For GAPDH, the reaction mixtures were subjected to 27 cycles consisted of denaturation at 95°C for 30 sec, annealing at 56°C for 30 sec, and extension at 72°C for 30 sec. The RT-PCR products were then resolved by electrophoresis in 1% agarose gel containing ethidium bromide and digitally photo-graphed using Chemiimager (Alpha Innotech, USA). All assays were performed in duplicate in three separate experiments.

ELISA

The level of IL-8 in culture supernatants of PDL cells was quantitatively assayed using an ELISA kit (R & D systems, USA) with recombinant IL-8 as a standard in accordance with the manufacturer's protocol. All assays were performed in duplicate in three separate experiments.

3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium (MTT) assay

Cell viability was measured using the 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT) assay. PDL cells (1.5×10^5 cells/well) were seeded in 24-well plates and then grown for 20 h. Next, the cells were treated with the indicated concentrations of H₂O₂ for 8 h. After treatment, the plates were centrifuged at 200 \times g for 10 min and the medium was then replaced with fresh medium. Twenty microliter of MTT solution (5 mg/ml in PBS, Sigma Chemical Co.) was added to each well. After incubation for 4 h, the plates were centrifuged, aspirated the medium, and 300 μ l of dimethylsulfoxide (DMSO) was added to each well to dissolve MTT-formazan crystals. The plates were shaken for 5 min and the absorbance was measured on an MRX II microplate reader (Dynatech Laboratories, USA) at 570 nm. All assay were performed in duplicate in two separate experiments.

Western blot analysis

The phosphorylation of MAPKs, including extracellular signal-regulated kinase (ERK), p38 MAPK (p38), and c-Jun N-terminal kinase (JNK), in PDL cells treated with H₂O₂ was measured by Western blotting. Following incubation with H₂O₂ for the indicated times, the cells were placed on ice, rinsed twice with ice-cold phosphate-buffered saline and then lysed with lysis buffer containing a protease inhibitor cocktail (Roche, Germany). The cell lysates were then centrifuged at 12,000 \times g at 4°C, after which the protein concentrations were determined using the protein assay reagent (Bio-Rad Laboratories, Inc., USA). Equivalent amounts of total protein per sample of cell extract were run on a 10% sodium dodecyl sulfate-polyacrylamide gel electrophoresis and immediately transferred to a poly(vinylidene di-

fluoride) (PVDF) membrane. The membranes were blocked with 3% bovine serum albumin in tris-buffered saline (TBS) containing 0.1% Tween 20 for 1 h, rinsed, and then incubated overnight with the primary antibodies against phospho-ERK, phospho-p38, phospho-JNK, ERK, p38 or JNK (Cell Signaling Technology, USA) at a dilution of 1:1000. The membranes were then washed four times, after which they were incubated with a secondary peroxidase-conjugated anti-rabbit immunoglobulin (Santa Cruz Biotechnology, Inc., USA) at a dilution of 1:2500 for 1 h and then rinsed. Immunopositive bands were visualized using an ECL kit

(Amersham Bioscience, Sweden). All assays were performed in duplicate in three separate experiments.

Statistical analysis

The results were analyzed using one-way ANOVA and Tukey's test. A *P* value of <0.05 was considered to indicate statistical significance.

Results

Effect of H₂O₂ on IL-8 production

To determine the induction of IL-8 production in PDL cells by H₂O₂, PDL cells were treated with the indicated concentrations of H₂O₂ for 8 h and the IL-8 expression was evaluated by RT-PCR and ELISA. Treatment with H₂O₂ at concentrations of up to 250 μ M increased the expression of IL-8 mRNA in a dose-dependent manner (Fig. 1A). However, treatment with H₂O₂ at a concentration of 500 μ M failed to increase the IL-8 mRNA expression. Evaluation of the production of IL-8 in response to treatment H₂O₂ using ELISA and RT-PCR produced similar results (Fig. 1B). When compared with the production of non-treated cells, treatment

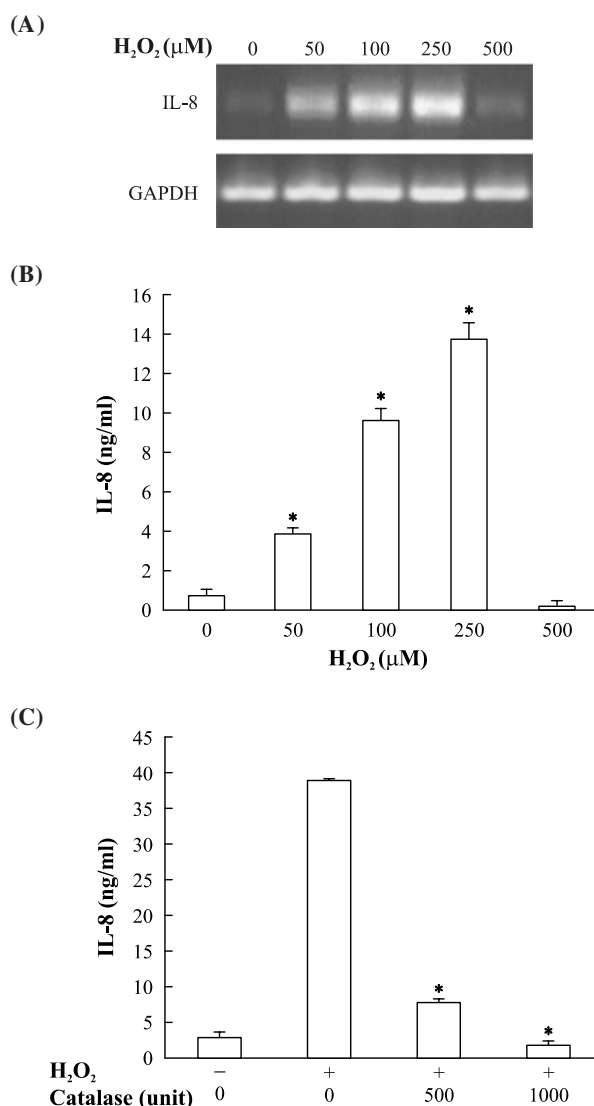


Fig. 1. H₂O₂-induced IL-8 production in PDL cells. PDL cells were treated with H₂O₂ at the indicated concentrations for 8 h. Expression of IL-8 mRNA was estimated by RT-PCR (A) and the concentration of IL-8 in the culture supernatant was determined by ELISA (B). *Significantly different from non-treated cells (*P*<0.05). PDL cells were pretreated with catalase at the indicated concentrations for 30 min followed by exposure to 250 μ M H₂O₂. The concentration of IL-8 in culture supernatant was determined by ELISA (C). *Significantly different from H₂O₂-treated catalase-free cells (*P*<0.05).

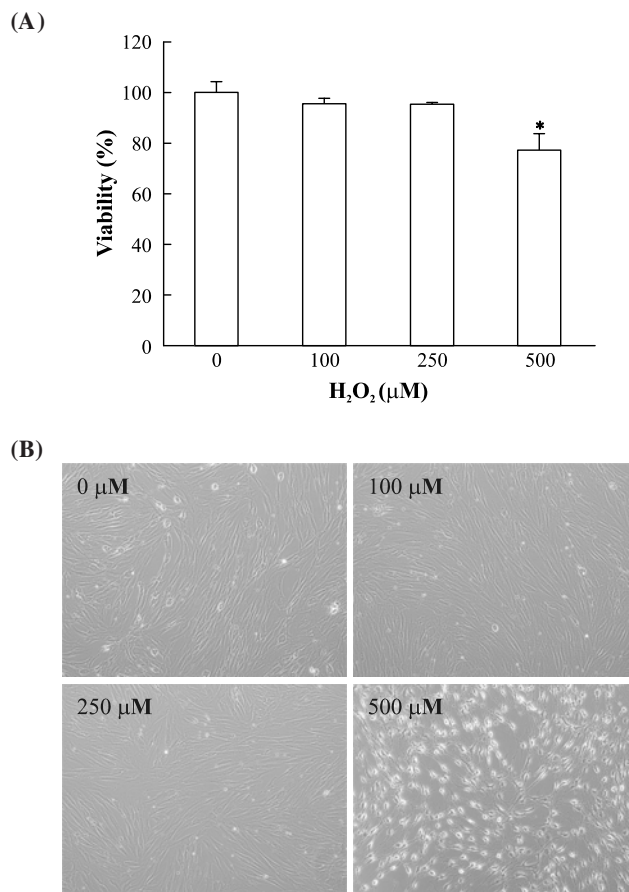


Fig. 2. Effect of H₂O₂ on the viability of PDL cells. PDL cells were treated with H₂O₂ at the indicated concentrations for 8 h and the cell viability was then determined by MTT assay (A). *Significantly different from non-treated cells (*P*<0.05). PDL cells showed morphological changes following treatment with 500 μ M H₂O₂ for 8 h (B, \times 100).

with H_2O_2 at concentration of 50, 100, and 250 μM increased the IL-8 production to 5-fold, 13-fold, and 19-fold, respectively, with the peak production being observed in response to treatment with 250 μM of H_2O_2 . Catalase activates the decomposition of H_2O_2 into water and oxygen and it functions as an antioxidant. When PDL cells were pretreated with catalase, H_2O_2 -induced IL-8 production was completely abolished (Fig. 1C). Taken together, these data indicate that H_2O_2 induces the production of IL-8 in PDL cells.

Effect of H_2O_2 on the viability of PDL cells

The effect of H_2O_2 on the viability of PDL cells was evaluated by MTT assay (Fig. 2A). Treatment of cells with H_2O_2 at concentrations of up to 250 μM which induced IL-8 production did not reduce the cell viability. However, treatment of cells with 500 μM H_2O_2 which failed to increase IL-8 production reduced cell viability and caused cell shrinkage (Fig. 2A and B). These results indicate that the failure of 500 μM H_2O_2 to induce IL-8 production occurs due to the cytotoxicity of H_2O_2 .

Involvement of the MAPKs pathway in the IL-8 production induced by H_2O_2

To determine whether H_2O_2 -induced IL-8 production requires ERK, p38, and JNK pathways, the phosphorylation of ERK, p38, and JNK by H_2O_2 (250 μM) was estimated by Western blotting (Fig. 3). Treatment with H_2O_2 for 30 min and 60 min increased the phosphorylation of ERK, p38, and JNK. To confirm the involvement of the ERK, p38, and JNK pathways in the induction of IL-8 by H_2O_2 , PDL cells were pretreated with PD98059 (ERK inhibitor), SB203580 (p38 inhibitor) or SP600125 (JNK inhibitor) prior to exposure to H_2O_2 (250 μM), and the levels of IL-8 protein were detected by ELISA (Fig. 4). The induction of IL-8 by H_2O_2

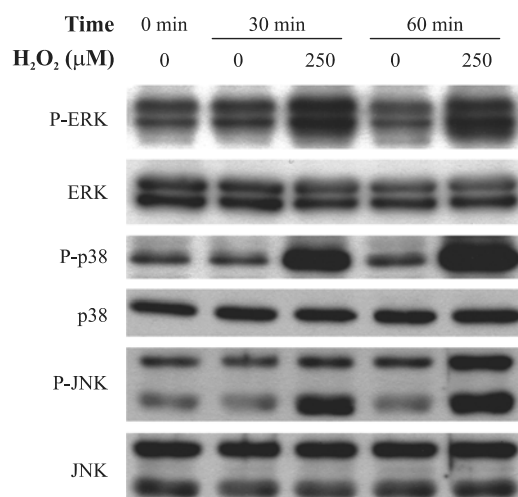


Fig. 3. H_2O_2 -induced phosphorylation of MAPKs in PDL cells. PDL cells were treated with 250 μM H_2O_2 for 30 min and 60 min. The cell lysates were subjected to Western blot analysis with anti-ERK, anti-p38, anti-JNK, anti-phosphorylated ERK, anti-phosphorylated p38 or anti-phosphorylated JNK antibodies. Photograph is representative of the results of three experiments.

was reduced by 75% (PD98059, 20 μM), 67% (SB203580, 20 μM) and 76% (SP600125, 20 μM) of the levels induced by H_2O_2 in the absence of each inhibitor. Taken together, these results indicate that ERK, p38, and JNK mediate the induction of IL-8 by H_2O_2 .

Discussion

In periodontitis, ROS are generated by activated phagocytes such as neutrophils and macrophages via NADPH oxidase. ROS, when deposited extracellularly, may destroy tissues,

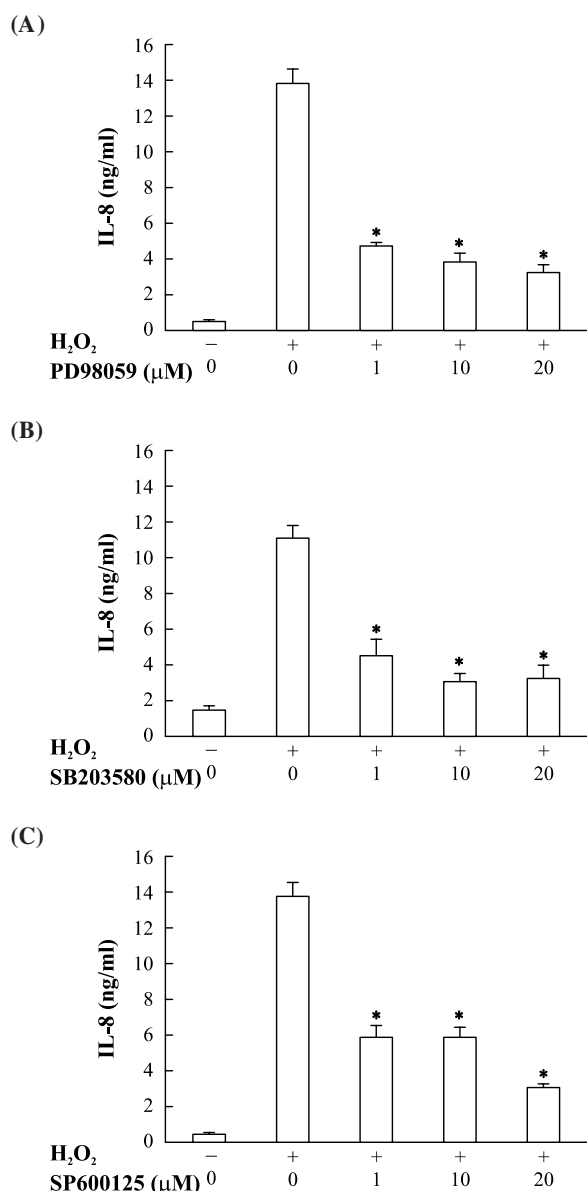


Fig. 4. Effect of each MAPK inhibitor on H_2O_2 -induced IL-8 production in PDL cells. PDL cells were pretreated with PD98059 (ERK inhibitor, A), SB203580 (p38 inhibitor, B) or SP600125 (JNK inhibitor, C) for 30 min and then treated with 250 μM H_2O_2 for 8 h. The concentration of IL-8 in culture supernatants was determined by ELISA. *Significantly different from H_2O_2 -treated MAPK inhibitor-free cells ($P < 0.05$).

directly by damaging the DNA, protein, and lipid of cells and indirectly by inducing cytokines associated with tissue destruction. However, little is known about the indirect effects of ROS in the pathogenesis of periodontitis. Among ROS, H₂O₂ can diffuse freely across the cell membrane (Thannickal and Fanburg, 2000), therefore, we evaluated the effect of ROS on IL-8 induction in PDL cells using H₂O₂. The results of this study indicate for the first time that H₂O₂ induces IL-8 expression in PDL cells and that ERK, p38, and JNK are involved in this process.

Neutrophil accumulation in a tissue is characteristic of inflammation (Kumar *et al.*, 2005). IL-8 functions as a neutrophil chemoattractant and activator by inducing the expression of adhesion molecules (CD11/18), the migration, and the release of enzymes and ROS in neutrophils (Baggiolini *et al.*, 1989). The neutrophil accumulation and activation by IL-8 protects the host by removing pathogens, but produces deleterious effect by destroying tissues. In addition to pro-inflammatory activity of IL-8, it has been reported that IL-8 induces bone resorption by stimulating osteoclast formation both dependent of and independent of RANKL (Bendre *et al.*, 2003, 2005). In this study, H₂O₂-treated PDL cells produced at least 6-fold more IL-8 than non-treated cells and catalase, an inhibitor of H₂O₂, abolished H₂O₂-induced IL-8 expression. These results indicate that H₂O₂ acts as an inducer of IL-8 in PDL cells and this activity of H₂O₂ contributes to periodontal tissue destruction by enhancing neutrophil accumulation and osteoclast formation.

H₂O₂ regulates IL-8 induction in a cell specific manner. It has been shown that H₂O₂ did not induce IL-8 production in umbilical vein endothelial cells and pulmonary artery endothelial cells (DeForge *et al.*, 1993). However, dendritic cells, monocytes, lymphocytes, skin fibroblasts, epithelial cells, and cancer cell lines produce IL-8 in response to treatment with concentrations of H₂O₂ ranging from 25~4,000 μ M (Lakshminarayanan *et al.*, 1997; Verhasselt *et al.*, 1998; Josse *et al.*, 2001; Hwang *et al.*, 2004; Pelaia *et al.*, 2004). In this study, treatment with 50 μ M H₂O₂ was found to increase the production of IL-8 by PDL cells, with peak production being observed in response to treatment with 250 μ M H₂O₂. However, the viability of cells treated with 500 μ M of H₂O₂ decreased and the expression of IL-8 was not induced. These results suggest that, in PDL cells, H₂O₂ acts as an inducer of IL-8 expression at low concentrations and a cytotoxic factor at concentrations higher than 500 μ M. Although the concentration of H₂O₂ accumulated in the periodontal tissues of periodontitis patients has not been estimated, H₂O₂ deposited in periodontal tissue by activated phagocytes produces deleterious effect on periodontal tissue by stimulating IL-8 production in PDL cells or by damaging to PDL cells.

In PDL cells, periodontopathogens and pro-inflammatory cytokines also stimulate production of IL-8. Following stimulation of *Porphyromonas gingivalis* or *Prevotella intermedia*, expression of IL-8 in PDL cells was found to increase (Yamamoto *et al.*, 2006). In addition, some components of periodontopathogens such as lipopolysaccharide (LPS) of *P. gingivalis* and the major surface protein of *Treponema maltophilum* and *T. lecithinolyticum* have been found to increase

IL-8 expression (Yamaji *et al.* 1995; Lee *et al.*, 2005). Furthermore, pro-inflammatory cytokines such as tumor necrosis factor (TNF)- α and IL-1 β have been found to increase mRNA expression of IL-8 (Long *et al.*, 2001; Lee *et al.*, 2006). The experiments conducted in this study did not estimate the combination effect of these factors and H₂O₂. However, it has been shown that exposure of other cells such as colon carcinoma cells and normal intestinal epithelial cells exposure to H₂O₂ followed by treatment with IL-1 α , results in enhanced IL-8 production when compared with cells treated with IL-1 α alone (Yamamoto *et al.*, 2003), which suggests that H₂O₂ may enhance IL-8 production by periodontopathogens and pro-inflammatory cytokines in cases of periodontitis.

There are three MAPKs: ERK, p38, and JNK. TNF- α has been shown to induce IL-8 secretion via the ERK and p38 in PDL cells (Lee *et al.*, 2006). To identify the involvement of MAPKs in H₂O₂-induced IL-8 production in PDL cells, we estimated the phosphorylation of MAPKs and the inhibitory effect of each MAPK inhibitor on H₂O₂-induced IL-8 production. In PDL cells, H₂O₂ increased the phosphorylation of ERK, p38, and JNK and pretreatment with each inhibitor of ERK (PD98059), p38 (SB203580), and JNK (SP600125) reduced this H₂O₂-induced IL-8 production by 67~76%. This indicates that, in PDL cells, ERK, p38, and JNK act as signal molecules in H₂O₂-induced IL-8 production. In monocytes, H₂O₂ led to the production of IL-8 and increased phosphorylation of p38, but not ERK. In addition, p38 inhibitor (SB203580) decreased the accumulation of IL-8 mRNA after treatment with H₂O₂, suggesting that p38 is important in the production of IL-8 in H₂O₂-treated monocytes (Josse *et al.*, 2001). In bronchial epithelial cells, H₂O₂ increased the phosphorylation of ERK, p38, and JNK, and pretreatment of bronchial epithelial cells with mixtures of p38, ERK, and JNK inhibitors reduced the IL-8 secretion induced by H₂O₂ (Hwang *et al.*, 2004), suggesting that these MAPKs act as transducers of IL-8 expression. The findings of these studies suggest that different cells have different signaling pathways that lead to production of IL-8 in response to H₂O₂ and that the signal pathway of IL-8 in PDL cells is similar to that of epithelial cells.

In conclusion, H₂O₂ increased the IL-8 secretion and phosphorylation of ERK, p38, and JNK in PDL cells. In addition, inhibitors of each MAPK decreased the IL-8 production stimulated by H₂O₂. These results indicate that H₂O₂ acts as an inducer of IL-8 production via activation of ERK, p38, and JNK. H₂O₂ deposited in periodontal tissue during inflammation against bacteria may accelerate tissue destruction via induction of IL-8 in PDL cells.

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