Forum Review

Oxidative and Antioxidative Potential of Brain Microglial Cells

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ABSTRACT

Microglial cells are the resident immune cells of the central nervous system. These cells defend the central nervous system against invading microorganisms and clear the debris from damaged cells. Upon activation, microglial cells produce a large number of neuroactive substances that include cytokines, proteases, and prostanoids. In addition, activated microglial cells release radicals, such as superoxide and nitric oxide, that are products of the enzymes NADPH oxidase and inducible nitric oxide synthase, respectively. Microglia-derived radicals, as well as their reactive reaction products hydrogen peroxide and peroxynitrite, have the potential to harm cells and have been implicated in contributing to oxidative damage and neuronal cell death in neurological diseases. For self-protection against oxidative damage, microglial cells are equiped with efficient antioxidative defense mechanisms. These cells contain glutathione in high concentrations, substantial activities of the antioxidative enzymes superoxide dismutase, catalase, glutathione peroxidase, and glutathione reductase, as well as NADPH-regenerating enzymes. Their good antioxidative potential protects microglial cells against oxidative damage that could impair important functions of these cells in defense and repair of the brain. Antioxid. Redox Signal. 7, 1223–1233.

INTRODUCTION

THE BRAIN is a complex organ that contains besides neurons a variety of glial cell types. Among these, astrocytes and oligodendrocytes, the so-called macroglial cells, are well known for their functions in neuronal support and myelin formation (8, 63, 85). In addition, the brain contains microglial cells in substantial numbers. Microglial cells are the major neuroprotective immunocompetent cell type in the CNS (106). This cell type is often considered as the "macrophage of the brain." The origin of microglial cells is still a matter of intensive debate. Fetal macrophages, as well as cycling monocytes, have been discussed as precursors of the microglial cells in the mature brain (7, 44, 107). In addition to resident microglial cells, perivascular macrophages are present in low number as immunocompentent cells in normal brain and hematogenous macrophages infiltrate the brain in most pathological conditions (44, 105). The phenotypic differentiation and clear identification of the different immunocompetent cells in brain are of high importance, and large numbers of membranous, biochemical, and morphological markers have been used to discriminate between resident microglial cells and macrophages in brain (44).

Microglial cells have important functions especially after brain injury and during inflammation. In the healthy brain, microglial cells are quiescent and have a ramified morphology (107). However, they respond rapidly to disturbances in their environment with a program of protective activities that are part of the innate defense mechanisms of the brain and assist in specific immune functions. Thus, in any pathological condition of the brain, microglial cells become activated and change their morphology from the resting ramified to the reactive amoeboid one (107). In this activated state, the cells are able to produce and release a large number of neuroactive substances that include cytokines, prostanoids, and proteases, as well as radicals such as nitric oxide (NO) and superoxide (49, 62, 78, 82, 83). Microglial activation aims at the protection of the CNS, because microglia-derived compounds

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contribute to the defense of the brain against pathogens and are important for the stimulation of repair processes after brain damage. However, inappropriate activation may lead to cell degeneration. During recent years, the importance of microglial cells in acute and chronic pathological conditions in the brain was intensively studied. Microglial cells have been considered the enemy within the brain that is harmful due to the generation of inflammatory cytokines and toxic reactive oxygen species (ROS). The various aspects of microglial functions and dysfunctions for physiological and pathological situations in brain have recently been extensively reviewed (73, 81, 101, 106). The present article will focus on the oxidative potential of microglial cells, as well as the antioxidative mechanisms that contribute to the self-defense against the ROS that are produced by these cells.

OXIDATIVE STRESS AND THE GENERATION AND DISPOSAL OF ROS

In mammalian cells, peroxides and oxygen radicals are continuously generated during aerobic metabolism (47). For example, superoxide is generated as a by-product of the respiratory chain or as a product of enzymes such as xanthine oxidase. Superoxide disproportionates quickly to oxygen and hydrogen peroxide (H2O2). In addition, various cellular oxidases, such as monoamine and amino acid oxidases, generate H₂O₂. In the presence of redox-active iron, highly reactive and toxic hydroxyl radicals are generated from H₂O₂ and superoxide in the Fenton reaction and the Haber-Weiss cycle. To avoid ROS-mediated cellular damage, such as lipid peroxidation, protein inactivation, and DNA strand breaks, antioxidative mechanisms are present in cells that remove ROS or even prevent their generation. Low-molecular-weight antioxidants like glutathione (GSH), ascorbate, and α-tocopherol contribute to the antioxidative potential of cells. In addition, antioxidative enzymes such as superoxide dismutases (SODs), catalase, glutathione peroxidases (GPx), and glutathione reductase (GR) are important for the cellular defense against ROS (Fig. 1). An imbalance in the intracellular generation and disposal of ROS that leads to oxidative damage by an elevated intracellular concentration of ROS is described as oxidative stress. Cellular damage by oxidative stress is considered to be an important component in the progression of many diseases (47).

The toxic potential of ROS is used in the defense of the body against invading microorganisms. Contact with pathogens activates macrophages in the periphery or resting microglial cells in brain. As a consequence, these cells generate radicals such as superoxide and NO that are the products of the reactions catalyzed by the enzymes NADPH oxidase (Nox) and nitric oxide synthase (NOS), respectively (12, 80, 116). Superoxide and NO support the defense of the organism against invading pathogens, but have also the potential to harm the ROS-producing cell, as well as neighboring cells. As the ROS-producing cells are likely to encounter high concentrations of the generated superoxide and NO, as well as their reactive reaction products H_2O_2 and peroxynitrite, efficient antioxidative mechanisms are required in these cells to prevent unwanted oxidative damage.

The first line of cellular defense against radicals is the low-molecular-weight antioxidants GSH, ascorbate, and α -tocopherol. These compounds react easily with radicals such as superoxide and NO. Most of the superoxide that is generated extracellularly by Nox (12) or as a side product of the respiratory chain (69) is converted to oxygen and H_2O_2 . Mitochondrial superoxide is a substrate of the manganese-containing SOD (MnSOD), whereas cytosolic and extracellular superoxide are substrates of SODs that contain copper and zinc (Cu/ZnSODs) and are localized in the cytosol or are excreted from cells (36, 89). In addition to the SOD-catalyzed reaction, superoxide spontaneously disproportionates to oxygen and H_2O_2 (36), reacts with GSH (117), or reacts with NO to form peroxynitrite (4, 104).

 $\rm H_2O_2$ generated as a product of SODs is substrate of the heme-containing catalase that converts $\rm H_2O_2$ to oxygen and water. In addition, GPx use GSH to reduce $\rm H_2O_2$ to water (Fig. 1). In this reaction, GSH is oxidized to glutathione disulfide (GSSG). In cells, GSH is regenerated from GSSG in the reaction that is catalyzed by the flavoenzyme GR. This enzyme needs NADPH as cosubstrate (Fig. 1). Thus, the cycling of GSH in the reactions catalyzed by GPx and GR depends on the availability of reduction equivalents in the form of NADPH.

The radical NO has been implicated in numerous biological functions in the immune system, the cardiovascular sys-

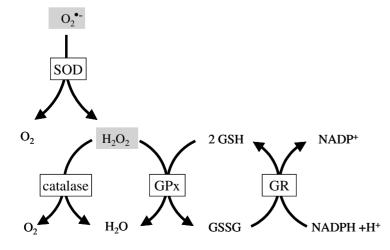


FIG. 1. Generation and disposal of ROS during cellular metabolism. Superoxide (O₂·⁻), which is a product of enzymatic reactions and by-product of the mitochondrial respiratory chain, is disproportionated by SODs to oxygen and H₂O₂. This peroxide is disposed of by catalase and/or GPx. GSH serves as electron donor for the reactions catalyzed by GPx and is oxidized to GSSG. The GSH consumed in the GPx reaction is regenerated by GR in a reaction that requires NADPH as cosubstrate.

tem, and also the CNS (5, 13, 80, 116). NO is synthesized by NOS (80, 116). All isoforms of NOS use arginine and molecular oxygen as substrates to generate NO and citrulline in a five-electron transfer reaction. NADPH serves as electron donor in NOS-catalyzed reactions. The constitutive NOS-1 and NOS-3 produce NO only for short periods after activation by a rise in intracellular Ca²⁺ concentration. In contrast, the induction of the expression of NOS-2 [inducible NOS (iNOS)] causes a long-lasting generation of high amounts of NO (116). NO reacts easily with other radicals. For example, NO and superoxide form peroxynitrite in a diffusion-limited reaction. GSH appears to be involved in the detoxification of NO and peroxynitrite, because this tripeptide reacts with NO to form nitrosoglutathione (20) and is discussed to serve as electron donor in the GPx-catalyzed reduction of peroxynitrite (4). In addition to its oxidative potential, NO has also been discussed as a powerful antioxidant that, even at the low physiological concentrations that occur in brain, could be able to prevent oxidation of cellular compounds by Fenton chemistry (102).

GENERATION OF ROS BY ACTIVATED MICROGLIAL CELLS

Different treatments and signaling pathways lead to superoxide or NO production in microglial cells. Phorbol esters or opsonized zymosan are frequently used to activate superoxide production by Nox in cultured microglial cells (21, 99), whereas microglial NO production is usually stimulated by induction of iNOS after application of bacterial lipopolysaccharide (LPS) plus interferon- γ (IF γ) (17, 87). Activation of Nox results in a rapid superoxide production within minutes (99), whereas induction of iNOS requires protein synthesis that causes a delay of several hours before a sustained microglial NO production can be observed (26).

Cultured microglial cells generate superoxide upon activation with phorbol esters (21, 99). However, microglial cells produce only up to 5% of the superoxide that is generated by an equal number of neutrophils (99). This superoxide production is catalyzed by Nox. Active Nox is a multisubunit protein complex that uses electrons derived from NADPH to reduce molecular oxygen to superoxide. The Nox of phagocytic leukocytes is understood best (12). Activation of these cells leads to the association of cytosolic protein subunits of Nox (Rac2, p40 phox , p47 phox , and p67 phox) with the membraneassociated proteins gp91phox (Nox2) and p22phox to the active complex that produces superoxide. Expression of mRNAs of all the subunits of Nox have been reported for microglial cultures (43). In addition, the presence of the proteins $gp91^{phox}$, p22phox, and p47phox has been demonstrated for microglial cells (43, 68, 99). The presence of gp91phox and p47phox is essential for superoxide production, because microglial cultures that are derived from mice deficient in one of these two subunits are unable to produce superoxide upon stimulation (68, 95). In the CNS, Nox is expressed predominantly in microglial cells and to a lesser extent in other cell types (122). Recently, six novel ROS-generating oxidases with homology to the Nox2 of granulocytes have been discovered, three of which are also expressed in brain cells (122).

NO is synthesized in the reaction catalyzed by NOS. Of the three isoforms of NOS (80, 116), iNOS is induced upon activation in microglial cells *in vitro* and *in vivo* (26, 51, 92). Besides microglial cells, astrocytes also have been reported to express iNOS (80). However, after intrahippocampal injection of LPS, iNOS was more quickly induced in microglial cells than in astrocytes (39). In addition, the low concentration of 1 ng/ml LPS caused already a substantial production of NO in microglial cultures, but not in cultured astrocytes (74). Thus, microglial cells appear to be more susceptible to stimulation of iNOS expression than astrocytes, at least after application of LPS.

As arginine is the only physiological substrate of NOS (116), the availability of cells to take up and/or to synthesize arginine is crucial for their ability to produce NO. This aspect is important, because iNOS produces superoxide in the presence of low concentrations of arginine (121). Thus, insufficient arginine availability in activated microglial cells could lead to iNOS-mediated production of NO and superoxide and to subsequent formation of toxic peroxynitrite. In order to secure sustained NO production by microglial iNOS, sufficient replenishment of the substrate arginine is required. Both uptake and intracellular regeneration of arginine from citrulline are likely to contribute to the provision of arginine for the proper iNOS reaction. Microglial cells express an arginine transporter that mediates uptake of extracellular arginine (22), as well as the two enzymes argininosuccinate synthetase (50) and argininosuccinate lyase (B. Fischmann and H. Wiesinger, personal communication) that are required for synthesis of arginine from citrulline. The regeneration of arginine from citrulline appears to be especially important in activated microglial cells in vivo, because argininosuccinate synthetase is strongly and almost exclusively induced in microglial cells after injection of immunostimulants into rat brain (50). In addition, argininosuccinate synthetase and iNOS are expressed and colocalized in a minority of microglial cells in Alzheimer's disease (AD) brain, but not in control brain (51).

EFFECTS OF ROS ON MICROGLIAL CELLS

The superoxide and NO generated by the reactions of Nox and iNOS, respectively, have the potential to harm the producing cells. However, induction of iNOS or activation of Nox alone appears not to cause substantial damage to microglial cells. In contrast, the cells are damaged if the concentration of superoxide is strongly elevated in mitochondria (56) or if the cellular superoxide concentration is increased in NOproducing microglial cells (87). As superoxide and NO react at a diffusion-limited rate to form peroxynitrite, this oxidant is likely to be generated under such conditions and may contribute to the oxidative damage observed. This conclusion is supported by the quick removal of NO and formation of peroxynitrite after application of NO to superoxide-producing microglial cells (5) and by the strong peroxynitrite formation in NO-producing microglial cells after activation of Nox (93). In this context, the cellular compartmentalization of superoxide and NO production is important to consider. As NO, but not the anion superoxide, easily crosses cell membranes, peroxynitrite

is likely to be formed extracellularly in NO-producing cells after activation of Nox. In contrast, formation of peroxynitrite in cells will occur if NO production by iNOS is accompanied by elevated intracellular levels of superoxide, *e.g.*, in mitochondria that have an altered respiration. As peroxynitrite is well known to inhibit the respiratory chain (15, 104, 109), mitochondrial ATP production could be impaired in activated microglial cells that produce superoxide and NO. Thus, efficient antioxidative defense mechanisms are especially required in mitochondria of microglial cells in order to prevent oxidative damage caused by superoxide, NO, and their products.

The superoxide generated by Nox in activated microglial cells quickly disproportionates to oxygen and H_2O_2 . This peroxide has the potential to influence microglial functions. For example, application of H_2O_2 to microglial cells in culture has been reported to enhance vesicle formation, suggesting that ROS facilitate phagocytosis by amoeboid microglial cells (110). Effects of H_2O_2 on microglial functions appear to depend on the activation status of the cells. Exogenous H_2O_2 has been reported to induce only small responses in untreated microglial cells, but large calcium influxes and cation currents in LPS-treated cells (67).

In addition to the oxidative potential of superoxide and NO, these radicals have important functions as signaling molecules in cellular regulation (33, 48, 80). Little is known about such regulatory functions in microglial cells. However, recent studies on microglial cultures from gp91 phox -deficient mice revealed that Nox-derived superoxide is involved in the stimulation of expression and release of tumor necrosis factor- α (TNF α) by LPS-treated cells (95).

IMPLICATIONS OF MICROGLIAL ROS PRODUCTION IN NEUROLOGICAL DISEASES

Microglial cells play an important role in the inflammatory processes that occur in neurological disorders such as stroke (24, 32), Parkinson's disease (PD) (9, 23, 66, 90, 120), AD (10, 31, 76, 97), amyotrophic lateral sclerosis (77), multiple sclerosis (16), human immunodeficiency virus-associated neurodegeneration (40), and brain tumors (42). As microglial cells release a large number of neuroactive substances upon activation (49, 78, 81–83), proof for a direct contribution of the microglia-derived radicals in the pathological processes of human brain disorders is difficult to obtain.

Good evidence for a contribution of Nox- and iNOS-derived radicals in neuronal cell death during the progression of a human neurodegenerative disease comes from experiments using animal models of PD. This disease is characterized by a progressive degeneration of dopaminergic neurons in the substantia nigra pars compacta. The etiology of PD is unknown, but biochemical analyses of postmortem tissues provide evidence for oxidative stress in the substantia nigra during the disease (60, 66). Application of the toxin 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP) causes cell death of dopaminergic neurons that is paralleled by activation and proliferation of microglial cells. In the MPTP model, mice with an improved defense against superoxide or with deficien-

cies in iNOS are at least partially protected from MPTP toxicity, suggesting that superoxide and NO contribute to the death of dopaminergic neurons (112). A contribution of superoxide to the cell death of dopaminergic neurons is demonstrated by the protection observed in MPTP-treated transgenic mice that overexpressed either Cu/ZnSOD or MnSOD (64, 94). Also iNOS-deficient mice are more resistant to MPTP than their wild-type littermates (25, 70), suggesting that iNOS-derived NO contributes to dopaminergic cell death. Inhibition by minocycline of microglial activation in the MPTP model prevented the activation of Nox and the induction of iNOS in mouse brain and subsequently protected against MPTPinduced neuronal cell death (118). As minocycline provided also significant protection against MPTP toxicity in iNOS-deficient mice (118), other sources of radicals than iNOS have to be involved in MPTP-induced neurotoxicity. A contribution of superoxide in this process is strongly supported by a recent report demonstrating that gp91phox-deficient mice exibit less dopaminergic cell death and protein oxidation in the substantia nigra after application of MPTP than controls (119).

Nox-derived superoxide appears also to be involved in an inflammatory model of dopaminergic cell death. Chronic infusion of LPS into rat or mouse brain causes activation of microglial cells that is followed by a gradual loss of up to 70% of nigral dopaminergic neurons (37). This loss of dopaminergic neurons is substantially reduced in Nox-deficient mice (95). In addition, iNOS inhibitors significantly reduce dopaminergic cell death after LPS injection into rat brain (59), indicating that iNOS-derived NO also is involved in the inflammatory cell death in this model system.

NO and superoxide are not exclusively produced by activated microglial cells in brain. As other types of brain cell also express NOS and Nox (74, 80, 116, 122), these cells could contribute to radical-mediated brain damage in pathological conditions. For example, astroglial Nox has recently been suggested as a primary target of β -amyloid-induced neurotoxicity (1). Indirect evidence that an increased superoxide production in microglial cells may be a prominent factor in the pathogenesis of human neurodegenerative diseases is given by the observations that in AD brain the cytosolic Nox components p47 p^{phox} and p67 p^{phox} are markedly translocated to the membranes of microglial cells (103) and that in PD brain the gp91 p^{phox} subunit of Nox is up-regulated in microglial cells (119).

ANTIOXIDATIVE MECHANISMS OF MICROGLIAL CELLS

As activated microglial cells are able to produce superoxide and NO, these cells are in immediate contact with these radicals, as well as with their reactive reaction products $\rm H_2O_2$ and peroxynitrite. Thus, microglial cells have to be equiped with sufficient antioxidative defense mechanisms to prevent oxidative and nitrosative damage that would compromise their functions in defense and repair of the brain.

Fluorescence labeling techniques demonstrated that, among the different glial cell types in mixed glial cultures, microglial cells contain the highest concentration of GSH (18). This observation was confirmed by comparison of the GSH contents of rat brain cell cultures that were enriched for various brain cell types. Microglial cultures contain a higher specific GSH content than cultured astrocytes, neurons, and oligodendrocytes (18, 54–56, 88). The high intracellular GSH concentration in microglial cells is likely to contribute strongly to the defense against radical- and peroxide-mediated damage.

Little is known about the regulation of GSH synthesis in microglial cells and the consequences of microglial activation on the GSH content in these cells. Treatment of mixed glial cultures with LPS/IFy caused induction of iNOS and lowered the cellular GSH content specifically in microglial cells (19). This reduction in microglial GSH was accompanied by the formation of nitrosoglutathione in the stimulated cultures. No evidence for cellular loss of GSH or nitrosoglutathione was reported (19). In addition, induction of NO production by application of LPS/IFy to a microglial cell line lowered the cytosolic GSH content, whereas the mitochondrial GSH content remained nearly unaffected (98). In contrast, stimulation with TNF α for 48 h doubled the specific GSH content of microglial cultures (27). Thus, depending on the type of stimulation, the microglial GSH content may increase by improvement of GSH synthesis or decrease by accelerated consumption of GSH.

The cellular contents and the metabolism of ascorbate and α-tocopherol in microglial cells have not been explored in detail so far. However, these vitamins have interesting effects on microglial functions. For example, treatment of microglial cultures with α-tocopherol and ascorbate improves the survival of the cells, induces a ramified microglial morphology, and down-regulates adhesion molecules (52). Pretreatment with α-tocopherol reduces also LPS-induced lipid peroxidation and interleukin-6 production in cultured microglial cells and in brain (41). In addition, preincubation of porcine microglial cells with α-tocopherol attenuates the translocation of p67phox to the plasma membrane, thereby preventing superoxide production by Nox (30). Moreover, ascorbate inhibited cyclooxygenase 2 activity and prostaglandin E2 synthesis in LPS-treated rat microglial cells (34). These reports suggest that α-tocopherol and ascorbate can modulate microglial pathways that are associated with acute or chronic inflammation in the CNS. Whether the well known antioxidative functions of ascorbate and α -tocopherol and/or other functions of these vitamins (14, 96) contribute to their effects on microglial cells remains to be elucidated.

The expression and presence of several antioxidative enzymes have been reported for microglial cells in brain sections, as well as in brain cell cultures. By immunocytochemical staining of rat brain slices, a low basal content of cytosolic Cu/ZnSOD has been demonstrated for microglial cells, whereas under unstressed conditions the mitochondrial MnSOD was not detectable in microglial cells (72). In contrast, after excitotoxically induced neurodegeneration following injection of quinolinic acid into rat brain, MnSODimmunolabeled mitochondria were observed in activated microglial cells (86). In addition, after transient cerebral ischemia, microglial cells in rat hippocampus were stained both for Cu/ZnSOD and MnSOD (75). In brain cell cultures, both isoforms of SOD were detected in microglial cells by immunocytochemical staining (72, 87, 91) and by activity measurements (56). The specific activity of MnSOD in microglial cultures is 20 times and four times higher than that in cultured astrocytes and oligodendrocytes, respectively, whereas specific activities of Cu/ZnSOD are almost identical in these three types of neural cell cultures (56).

The expression of mitochondrial MnSOD in microglial cells is up-regulated by activation and by oxidative stress. Treatment of mixed glial cell cultures with the ROS-forming xanthine/ xanthine oxidase system increases MnSOD immunoreactivity in microglial cells (91). In addition, stimulation of cultured microglial cells with LPS/IFy causes induction of iNOS and upregulation of mitochondrial MnSOD, whereas the contents of Cu/ZnSOD, catalase, or GPx are not affected (87). Moreover, treatment of microglial cultures with TNFα strongly increases the specific MnSOD activity in the cultures (27). Such an increase in the activity of MnSOD in microglial cells is likely to improve the potential of the cells to decompose mitochondrial superoxide. As SODs compete for superoxide with the ironcatalyzed Haber-Weiss cycle and with NO, an elevated activity of MnSOD in activated microglial cells is likely to reduce the risk of mitochondrial damage by superoxide-derived hydroxyl radicals and peroxynitrite.

Immunocytochemical studies revealed strong immunoreactivity for GPx in microglial cells in brain sections from rat (71) and man (53). In rat brain, GPx immunoreactivity is upregulated after administration of quinolinic acid (71). This upregulation of GPx in microglial cells was discussed as an important mechanism to withstand oxidative stress (71). GPx was also localized in microglial cells by immunocytochemical staining of glial primary cell cultures (87). In microglial cultures, the specific activity of GPx is similar to that in cultured astrocytes and significantly higher than in cultured neurons (54, 56). In contrast to SODs and GPx, little is known on GR in microglial cells. Immunocytochemical staining demonstrated that, among the different glial cell types in astroglia-rich cultures, microglial cells stained strongly for GR (45). The prominent expression of GR in microglial cells was confirmed by activity measurements. Microglial cultures contain higher specific GR activities than cultured neurons and astrocytes (54).

Besides GPx, catalase is involved in cellular ${\rm H_2O_2}$ clearance. In human brain sections, catalase immunoreactivity was found in all types of brain cells, including microglial cells (36). In addition, microglial cells in mixed glial cultures from rat brain were immunopositive for catalase (87). This immunocytochemical evidence for expression of catalase was confirmed by activity measurements. The specific catalase activity of microglia cultures was reported to be similar to (56) or significantly lower than that of cultured neurons, astrocytes, and oligodendrocytes (54, 55).

Little is known about the expression and antioxidative functions of other antioxidative defense mechanisms in microglial cells. Some proteins that have been considered to contribute to the antioxidative defense have been reported to be induced in activated microglial cells. For example, peroxiredoxin 1 is induced in microglial cells after hemorrhage (84). In addition, the bilirubin-generating enzyme heme oxygenase 1 has been reported to be induced in brain microglial cells following transient focal brain ischemia (65), intracerebral hemorrhage (84), cortical lesions (11), or thiamine deficiency-induced neurodegeneration (61).

Among the different peroxides generated in cells, H_2O_2 is quantitatively the most important one. Under experimental

conditions, extracellular H₂O₂ concentrations of up to 100 μM have been reported for brain in a microdialysis study (57). After activation, microglial cells encounter substantial extracellular concentrations of H₂O₂ (113) that are generated by spontaneous disproportionation of the superoxide produced in the Nox-catalyzed reaction. Cultures of microglial cells have been studied for their ability to dispose of exogenous H₂O₂. These cultures clear exogenous H₂O₂ in a reaction that follows first-order kinetics (55). The long half-life of H₂O₂ in the media of cultured microglial cells does not reflect a low detoxification capacity of the cells, but is a consequence of the low cell number in microglial cultures (55). The specific H₂O₂-detoxification rate constant of cultured microglial cells is almost identical to those calculated for astrocyte and neuron cultures (55), demonstrating the high potential of microglial cells to clear extracellular H₂O₂.

GSSG is hardly detectable in untreated microglial cultures, but exposure to $\rm H_2O_2$ or to a $\rm H_2O_2$ -generating system increases the microglial GSSG content to 30% of the total cellular glutathione (54). This oxidation of GSH during peroxide exposure demonstrates that GPx is involved in the peroxide clearance by microglial cells. GSSG is only detectable in the cells as long as $\rm H_2O_2$ is present in the extracellular medium (54), demonstrating that GR quickly restores the initial GSH to GSSG ratio after removal of the peroxide. As catalase is present in microglial cells (54, 56, 87), this enzyme also is likely to contribute to the detoxification of $\rm H_2O_2$.

Regarding antioxidative mechanisms of microglial cells, it can be summarized that these cells are equiped with a prominent glutathione system and substantial activities of various antioxidative enzymes, suggesting a strong antioxidative potential of these cells. As microglial cells are able to up-regulate antioxidative enzymes, these cells can even adapt to stress conditions that require an improved antioxidative defense.

NADPH SUPPLY FOR THE GENERATION AND DISPOSAL OF ROS

The availability of cellular NADPH is an important factor for both the prooxidative and the antioxidative potential of microglial cells, because this reduced cofactor supplies the essential reduction equivalents for the reactions catalyzed by iNOS, Nox, and GR (Fig. 2). If microglial cells become activated, NADPH is quickly consumed in the superoxide-forming Nox reaction. In addition, induction of iNOS will lead to an increased NADPH consumption in microglial cells. On the other hand, NADPH is required to regenerate GSH from GSSG. Thus, efficient replenishment of the cellular pool of NADPH appears to be crucial in activated microglial cells. A high ratio of NADPH to NADP+ in cells is maintained by the activities of NADPH-regenerating enzymes (NREs). If the rate of NADPH regeneration is insufficient in these cells, the prooxidative enzymes Nox and iNOS would compete with the antioxidative enzyme GR for the substrate NADPH (Fig. 2). Such a scenario is likely to occur in activated microglial cells, because the $K_{\rm M}$ values of GR, iNOS, and Nox for NADPH are in the low micromolar range (45, 100, 108).

Several enzymes can participate in cellular NADP⁺ reduction. Besides the two pentose phosphate pathway enzymes glucose-6-phosphate dehydrogenase (G6PDH) and 6-phosphogluconate dehydrogenase (6PGDH), also malic enzymes (MEs), NADP⁺-dependent isocitrate dehydrogenases (ICDHs), and mitochondrial transhydrogenase contribute to the NADPH formation in brain cells (3, 6, 79, 115). Of these enzymes, G6PDH and 6PGDH are exclusively localized in the cytosol (6), whereas transhydrogenase is exclusively localized in mitochondria (3). For both ME and ICDH, isoforms are known that are localized either in the cytosol or in mitochondria (79, 115).

Prevention of oxidative damage in mitochondria appears to be essential for microglial cells (56), and the mitochondrial GSH system is likely to contribute strongly to the antioxidative potential of microglial mitochondria. As GR requires NADPH as electron donor, the availability of this reduced cosubstrate is crucial for efficient mitochondrial peroxide reduction by GSH redox cycling. The mitochondrial isoforms of ME and ICDH, as well as transhydrogenase, contribute to the NADPH regeneration for GSSG reduction in brain mitochondria (115). Cultured microglial cells contain substantial activities of mitochondrial ICDH (79), whereas no evidence for the presence of mitochondrial ME in microglial cells was reported (114). Expression of transhydrogenase has been suggested for all types of brain cells (3). Thus, among the different NREs, at least mitochondrial ICDH and transhydrogenase are likely to supply the NADPH that is required for GSSG reduction in mitochondria of microglial cells.

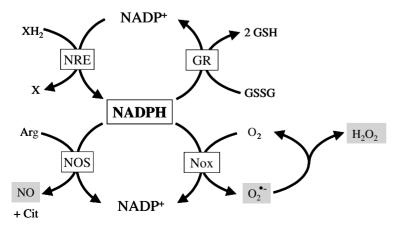


FIG. 2. Consumption and regeneration of NADPH in microglial cells. NADPH-regenerating enzymes (NREs) use reduced cellular metabolites (XH₂) as substrates to reduce NADP⁺. In the cytosol of microglial cells, the enzymes glucose-6-phosphate dehydrogenase, 6-phosphogluconate dehydrogenase, and cytosolic NADP+dependent isocitrate dehydrogenases contribute to the regeneration of NADPH. The NADPH provided by NREs is used as electron donor in the reactions catalyzed by GR, NOS, and Nox. The superoxide (O_2^{-}) produced by Nox is disproportionated to oxygen and H₂O₂. Note that the antioxidative enzyme GR may compete with NOS and Nox for cytosolic NADPH in activated microglial cells. Arg, arginine; Cit, citrulline.

Microglial cells require NREs in the cytosol to supply Nox, iNOS, and cytosolic GR with their substrate NADPH. Substantial activities of G6PDH and 6PGDH were measured in cultured microglial cells, whereas ME activity was not detectable in these cultures (L. Kussmaul and R. Dringen, unpublished observations). In addition, expression and activity of cytosolic ICDH have recently been reported for cultured microglial cells (79). The presence of G6PDH, 6PGDH, and cytosolic ICDH in microglial cells demonstrates that two independent pathways can contribute to the NADPH regeneration in the cytosol. As no information is available on fluxes of metabolites through the pentose phosphate pathway and the cytosolic ICDH in activated microglial cells, the contribution of these pathways for NADPH regeneration in microglial cells remains to be elucidated.

CONCLUSIONS

Activated microglial cells release superoxide and NO, which are products of Nox and iNOS, respectively. To prevent oxidative damage by these ROS and their reactive reaction products H₂O₂ and peroxynitrite, microglial cells contain a high cellular concentration of GSH and express the antioxidative enzymes MnSOD, Cu/ZnSOD, GPx, GR, and catalase. In addition, the up-regulation of MnSOD and the induction of heme oxygenase 1 and peroxiredoxin 1 may further improve the protection against ROS-mediated cell damage in activated microglial cells. Microglia-derived ROS have the potential to damage neighboring cells in brain. Microglial proliferation and ROS production are therefore interesting targets to prevent oxidative damage and neuronal decay in neurodegenerative diseases (2, 9, 10, 38, 46, 111). Such strategies that target the oxidative and inflammatory potential of microglial cells will help to gain a better understanding of the functions of microglial cells in brain, as well as the beneficial and/or detrimental consequences of microglia-derived ROS for brain cells under physiological and pathological conditions.

ACKNOWLEDGMENTS

R.D. would like to thank Professor Heinrich Wiesinger (Tübingen) for critically reading the manuscript and for valuable suggestions, as well as Neurosciences Victoria (Australia) for a Senior Research Fellowship.

ABBREVIATIONS

AD, Alzheimer's disease; Cu/ZnSOD, copper- and zinccontaining superoxide dismutase; G6PDH, glucose-6-phosphate dehydrogenase; GPx, glutathione peroxidase(s); GR, glutathione reductase; GSH, glutathione; GSSG, glutathione disulfide; ICDH, NADP+-dependent isocitrate dehydrogenase; IFγ, interferon-γ; iNOS, inducible nitric oxide synthase; LPS, lipopolysaccharide; ME, malic enzyme; MnSOD, manganesecontaining superoxide dismutase; MPTP, 1-methyl-4-phenyl1,2,3,6-tetrahydropyridine; NOS, nitric oxide synthase; Nox, NADPH oxidase; NRE, NADPH-regenerating enzyme; PD, Parkinson's disease; 6PGDH, 6-phosphogluconate dehydrogenase; ROS, reactive oxygen species; SOD, superoxide dismutase; TNFα, tumor necrosis factor-α.

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Received for publication July 21, 2004; accepted February 12, 2005.

This article has been cited by:

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