

BIOCHEMICAL CHARACTERIZATION OF THE MECHANISMS INVOLVED IN THE 5-HYDROXYTRYPTAMINE-INDUCED INCREASE IN RAT ATRIAL RATE

CHARLES EL RAWADI, MONIQUE DAVY,* MICHÈLE MIDOL-MONNET and YVES COHEN

Laboratoire de Pharmacologie, Faculté de Pharmacie, Université Paris-Sud, Rue Jean-Baptiste
Clément, 92290 Châtenay-Malabry, France

(Received 24 June 1993; accepted 4 May 1994)

Abstract—Several possible mechanisms for 5-hydroxytryptamine (5-HT)-induced tachycardia in rat have been suggested: an activation of 5-HT_{1C} or 5-HT₂ receptors, an indirect sympathomimetic effect or a mechanism independent of 5-HT₂ receptor stimulation. The aim of this study was to investigate the involvement of these mechanisms in the 5-HT-induced increase in rat atrial rate using biochemical methods. Indeed, the 5-HT_{1C} and 5-HT₂ receptors are linked to phosphoinositide hydrolysis and the noradrenaline (NA) released by 5-HT can stimulate the β_1 -adrenergic receptors linked to adenylate cyclase stimulation. The effect of varying concentrations of 5-HT on inositol phospholipid hydrolysis and adenylate cyclase activity of the rat isolated atria were measured. 5-HT (2 μ M) did not modify total inositol phosphate (IP) production, while 5-HT 10 and 50 μ M increased it 2-fold. The 5-HT₂ antagonist ketanserin (1 μ M) abolished IP accumulation induced by 5-HT (50 μ M), which indicates that this accumulation is 5-HT₂ and not 5-HT_{1C} receptor-mediated. Moreover, cyclic AMP (cAMP) formation was enhanced by 5-HT (5, 10, 20 and 50 μ M). When atria were incubated 10 min with the β -adrenergic receptor antagonist nadolol (1 μ M), the increase in the cAMP level induced by 5-HT, whatever its concentration (10, 20 or 50 μ M), was inhibited. Treating rats with reserpine (2.5 mg/kg, i.p., 48 and 24 hr before experimentation), which caused NA depletion in the heart, seemed to reduce the stimulating effect of 5-HT 10 and 50 μ M on adenylate cyclase activity. Thus, the 5-HT-induced increase in cAMP is indirectly due to the activation of the β -adrenergic receptors by the NA released by 5-HT. It is concluded that 5-HT stimulates both phosphoinositide turnover and adenylate cyclase activity in the rat isolated atria by activation of 5-HT₂ receptors and by an indirect sympathomimetic effect.

Key words: 5-HT; rat atrial rate; inositol phosphate; cyclic AMP; indirect sympathomimetic effect; 5-HT₂ receptors

In the rat, several possible mechanisms for 5-HT⁺-induced tachycardia have been described: the indirect sympathomimetic effect [1–3], the activation of 5-HT_{1C} receptors [3] and the stimulation of 5-HT₂ receptors [2–4]. In contrast, other investigators using the 5-HT₂ receptor antagonist ketanserin concluded that these receptors are not involved in the tachycardiac response to 5-HT [5].

This group previously reported the chronotropic effect of 5-HT in the rat isolated atria [7]. The mean values of the maximal increases in atrial rate reached 15–25% in the presence of 5-HT, 5, 10, 20 and 50 μ M. This group recently demonstrated that, at 50 μ M, 5-HT is taken up into the NA storage vesicles within the sympathetic nerves of the rat isolated atria [6]. In addition, this group has also reported that, at the same concentration, the increase in atrial rate was associated with NA release [7]. Thus, the tyramine-like indirect sympathomimetic effect is a mechanism of the 5-HT-induced chronotropic effect

at this concentration. The purpose of the present study, using a biochemical approach, was to confirm this mechanism and investigate if 5-HT_{1C} or 5-HT₂ receptors are also involved in the 5-HT effect. The 5-HT_{1C} and 5-HT₂ receptors are linked to phosphoinositide hydrolysis [8] and the NA released by 5-HT can stimulate the β -adrenergic receptors linked to adenylate cyclase stimulation [9]. Therefore, the effect of different concentrations of 5-HT on the formation of IP and adenylate cyclase activity in the rat isolated atria were measured. The inhibition of the 5-HT effects by antagonists was also investigated. Ketanserin and nadolol were used to block the 5-HT₂ and β -adrenergic receptors, respectively, while reserpine, which causes NA depletion in the heart, was used to inhibit the tyramine-like effect.

MATERIALS AND METHODS

Rat isolated atria. Male Sprague–Dawley rats (Charles River, France), weighing 250–350 g, were killed by a blow on the head and exsanguinated. Both atria were rapidly dissected out and set up in an organ bath which contained 4 mL KHS of the following composition (mmol/L): NaCl 118, KCl 4.7, CaCl₂ 2.5, MgSO₄ 0.45, NaHCO₃ 25, KH₂PO₄

* Corresponding author.

† Abbreviations: 5-HT, 5-hydroxytryptamine; NA, noradrenaline; IP, inositol phosphates; IP₁, inositolmonophosphate; IP₂, inositoldiphosphate; IP₃, inositoltriphosphate; cAMP, cyclic AMP; KHS, Krebs–Henseleit solution.

1, glucose 11.1, Na₂-EDTA 0.07, ascorbic acid 0.07 and atropine sulphate 0.7 μ mol/L. The organ bath was kept at 37° and was constantly gassed with 5% CO₂ in O₂. A rest of 30 min preceded any experimentation to allow atria equilibration under a tension of 1 g.

Labelling and accumulation of [³H]IP. Atria were incubated with myo-[2-³H]inositol (122 kBq/mL, 0.175 μ M) for 30 min. Labelled atria were subsequently washed four times with fresh KHIS without [³H]inositol. In the control group, LiCl (final concentration 10 mM) was added to the organ bath fluid for a 30 min incubation in order to inhibit myo-inositol phosphatase [10]. In the 5-HT groups, 5-HT (final concentration 2, 10 or 50 μ M) was added to the organ bath fluid 10 min after LiCl affusion, for a 20 min incubation. In the ketanserin group, the experimental procedure was the same as in the 5-HT (50 μ M) group but ketanserin (final concentration 1 μ M) was added at the same time as LiCl. At the end of the incubation period atria were washed in ice-cold KHS, weighed and transferred into tubes containing 675 μ L of chloroform-methanol-10 M HCl (100:200:1, by vol.).

Extraction and chromatographic separation of [³H]IP [11]. Atria were homogenized after addition of 180 μ L of 5 mM EDTA to the chloroform-methanol mixture. The homogenizer tip was rinsed with 570 μ L of another mixture of chloroform-methanol-10 M HCl-5 mM EDTA (100:200:1:80). The rinsing fluid, chloroform (750 μ L) and 5 mM EDTA (75 μ L), was added to the homogenate. After centrifugation (1600 g, 20 min) an aliquot (650 μ L) of the supernatant was neutralized with 2.2 mL of 6.25 mM sodium borate and applied to a 1 mL AG1-X8 column (formate form, 200–400 mesh, Bio-Rad Laboratories). The column was then washed with 20 mL of 0.1 M formic acid. The IP were eluted sequentially by addition of 10 mL of 0.2 M ammonium formate-0.1 M formic acid (for IP₁), 10 mL of 0.5 M ammonium formate-0.1 M formic acid (for IP₂) and 10 mL of 1 M ammonium formate-0.1 M formic acid (for IP₃). The radioactivity of the three eluent samples was counted.

cAMP assay. In the 5-HT groups, 5-HT (5, 10, 20 or 50 μ M) was added to the organ bath fluid for a 5 min incubation. Nadolol (1 μ M) was added for 15 min in the nadolol group, while 5-HT (10, 20 or 50 μ M) was added 10 min after nadolol (1 μ M) for a 5 min incubation in the nadolol + 5-HT group. In reserpine-treated rats (2.5 mg/kg, i.p., 48 and 24 hr before experimentation) the incubation conditions were the same as in the groups of untreated rats. In all experiments atria were immediately dipped into liquid nitrogen at the end of the incubation period and stored frozen at -80°. Before the assay the still frozen atria were weighed, mixed with 1 mL of perchloric acid 1.1 N and then ground (4°, 30 sec) and centrifuged (4000 g, 4°, 10 min). Five hundred microlitres of the supernatant were neutralized using a solution of potassium hydroxide 1 N and centrifuged again (4000 g, 4°, 10 min), to discard the potassium perchlorate precipitate. The supernatant was collected, appropriately diluted and assayed for cAMP using a radioimmunoassay kit (Immunotech, France).

Total [³H]IP (dpm/mg)

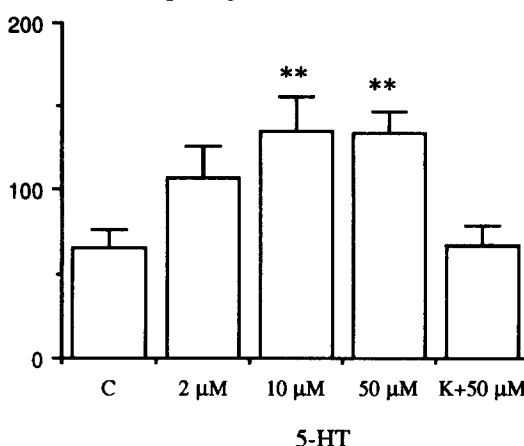


Fig. 1. Antagonism by ketanserin of the 5-HT-induced accumulation of [³H]IP in rat atria. In the control group (C) LiCl (10 mM) was added to the organ bath fluid for a 30 min incubation. In the 5-HT groups, 5-HT (2, 10 or 50 μ M) was added 10 min after LiCl affusion, for a 20 min incubation. For the ketanserin group (K + 50 μ M), ketanserin (1 μ M) and LiCl (10 mM) were added 10 min before 5-HT (50 μ M). Data are means \pm SEM, N = 5–7. **P < 0.01 significantly different compared to control group values.

Chemicals. Myo-[2-³H]inositol (7×10^8 kBq/mmol, Amersham, U.K.). 5-Hydroxytryptamine creatinine sulphate (Sigma Chemical Co., St Louis, MO, U.S.A.), ketanserin tartrate (Janssen Pharmaceutica, Beerse, Belgium), nadolol (Bristol-Myers Squibb, Paris-la Defense, France), reserpine (Ciba-Geigy AG, Basel, Switzerland).

Statistical analysis. Results are expressed as mean values \pm SEM. Analysis of variance followed by the Scheffé test was used for multiple comparisons. The results were analysed according to the Student's *t*-test when only two groups were compared.

RESULTS

5-HT-stimulated phosphoinositide metabolism

The effect of a 20 min incubation of atria with three different concentrations of 5-HT (2, 10 and 50 μ M) on IP formation was examined. 5-HT (2 μ M, N = 5) did not modify the total [³H]IP values compared with the control group (N = 7), while 5-HT (10 μ M, N = 5) and 5-HT (50 μ M, N = 5) increased it 2-fold (P < 0.01). When ketanserin (1 μ M, N = 5) was added 10 min before 5-HT (50 μ M) no modification in the total [³H]IP level was observed compared with the control group (Fig. 1).

In all groups, [³H]IP₃ as compared to [³H]IP₂ and [³H]IP₁, represented a small fraction of the total [³H]IP accumulated in atria. Thus, the [³H]IP₃ values ranged between 4.3 and 7.9% of total [³H]IP, while the [³H]IP₂ and [³H]IP₁ values reached 21.1–29.9% and 62.1–74.1%, respectively.

5-HT-stimulated cAMP production

The resting content of cAMP in atria (control, N = 5) was 0.69 ± 0.03 nmol/g. A 5 min period of incubation with 5-HT stimulated cAMP production.

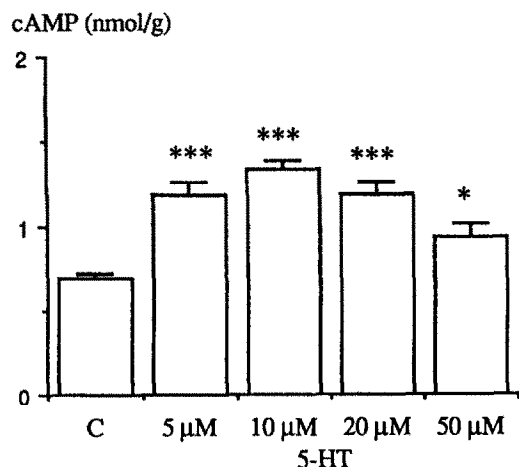


Fig. 2. Stimulation of adenylate cyclase activity by 5-HT. Rat atria were incubated 5 min with 5-HT (5, 10, 20 or 50 μ M). Results are mean values \pm SEM, $N=5-8$. * $P < 0.05$, ** $P < 0.001$ compared to control group (C).

cAMP content reached 1.18 ± 0.07 nmol/g with 5-HT 5 μ M ($N=5$, $P < 0.001$), 1.33 ± 0.06 nmol/g with 5-HT 10 μ M ($N=6$, $P < 0.001$), 1.18 ± 0.07 nmol/g with 5-HT 20 μ M ($N=6$, $P < 0.001$) and 0.93 ± 0.08 nmol/g with 5-HT 50 μ M ($N=8$, $P < 0.05$). Thus, the 5-HT-induced increase in cAMP was 71, 93, 71 and 35% with 5, 10, 20 and 50 μ M, respectively (Fig. 2).

Nadolol (1 μ M) did not modify the resting content of cAMP (0.75 ± 0.04 nmol/g, no significant difference compared with the control group values, $N=7$). When atria were pre-incubated with nadolol (1 μ M), 5-HT (10, 20 or 50 μ M, $N=7$) failed to

increase cAMP production. Thus, cAMP values in the nadolol +5-HT group were not significantly different from those in the nadolol group (Fig. 3).

The treatment with reserpine (2.5 mg/kg, i.p., 48 and 24 hr before experiments) increased the cAMP level in atria from 0.69 ± 0.03 nmol/g in the control group ($N=5$) to 1.22 ± 0.07 nmol/g in the reserpine group ($N=6$) ($P < 0.001$) (Fig. 4a). In atria from reserpine-treated rats a 5 min incubation with 5-HT (10 μ M, $N=6$) and with 5-HT (50 μ M, $N=6$) increased cAMP values to 1.36 ± 0.02 nmol/g ($P < 0.05$ when compared with reserpine group values) and 1.48 ± 0.03 nmol/g ($P < 0.01$), respectively (Fig. 4b). This increase was less important than in atria from untreated rats: 11 and 21%, respectively, at 10 and 50 μ M in the reserpine-treated groups vs 93 and 35% in the untreated groups, as indicated above (see Fig. 2).

DISCUSSION

5-HT stimulates inositol phospholipid hydrolysis in many tissues. This effect is mediated by 5-HT₂ receptor stimulation in rat aorta [12-15], rat jugular vein [16], rat cerebral cortex [17-19], dog trachea [20] and human and rabbit platelets [21, 22]; it is mediated by 5-HT_{1C} receptor in the choroid plexus [23]. The effect of varying concentrations of 5-HT on the [³H]IP formation were measured in the rat isolated atria. Under these experimental conditions, accumulation of IP₃ compared to that of IP₂, and in particular IP₁, constituted a small fraction of total IP. However, this does not reflect the total amount of the IP₃ generated because IP₃ is rapidly hydrolysed into IP₂ and then into IP₁. Further hydrolysis of IP₁ was inhibited by LiCl [10]. Thus, it was considered that the values of total [³H]IP instead of [³H]-IP₃ should be used to discuss the current results [24]. Under these conditions, 5-HT 2 μ M failed to increase

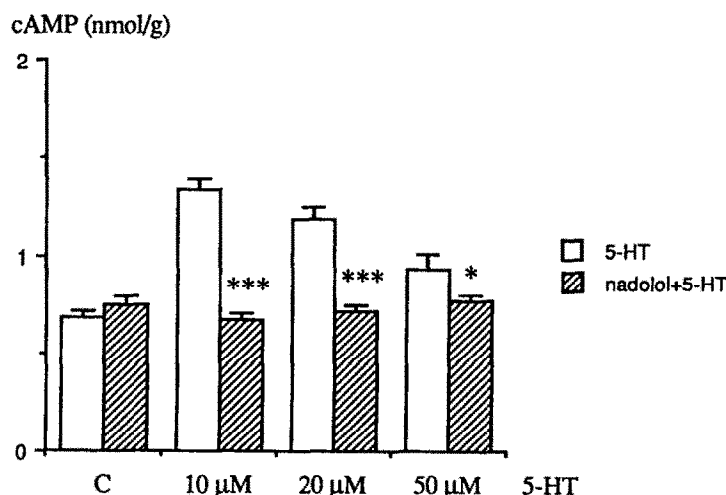


Fig. 3. Effect of nadolol on 5-HT-stimulated cAMP production. Nadolol (1 μ M) or KHS was added to the rat atria bathing fluid for 15 min in the control groups (C). Nadolol (1 μ M) was added for 10 min followed by 5-HT (10, 20 or 50 μ M) for an additional 5 min incubation. Data are means \pm SEM, $N=7$. * $P < 0.05$, *** $P < 0.001$ compared with the corresponding 5-HT group value.

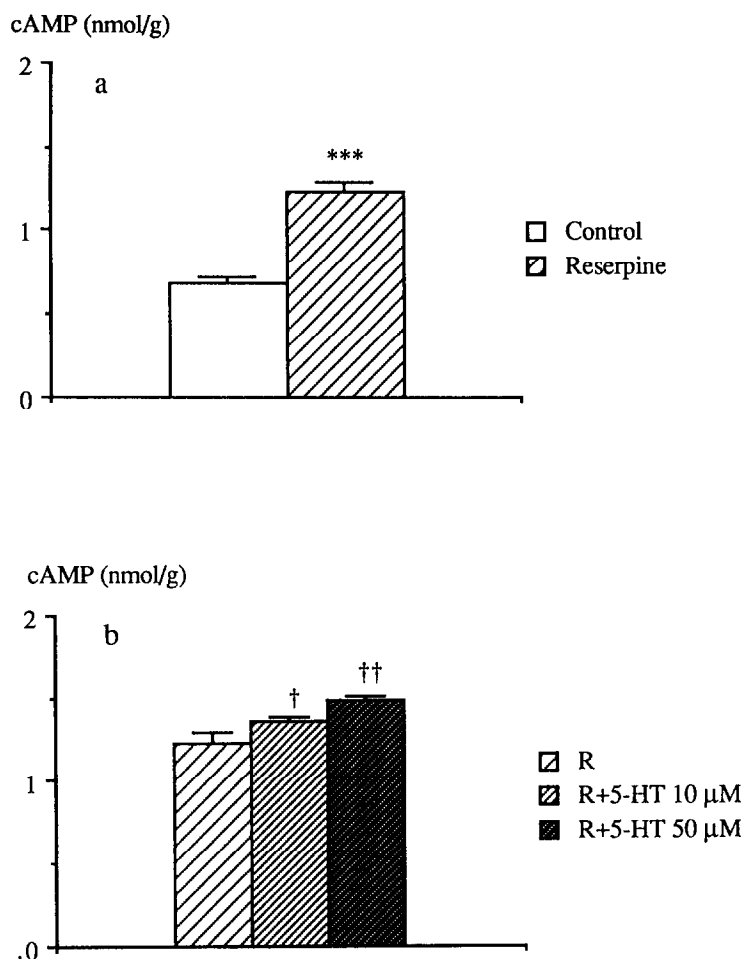


Fig. 4. Effect of reserpine on resting cAMP (Panel a) and on 5-HT-stimulated cAMP production (panel b). The cAMP level was measured in atria from control rats and in atria from reserpine-treated rats (2.5 mg/kg, i.p., 48 and 24 hr before experiments) (R). The effect of a 5 min incubation of atria from reserpine-treated rats with 5-HT (10 μ M) or 5-HT (50 μ M) was measured. Values are means \pm SEM, $N = 5$ or 6. *** $P < 0.001$ compared to C group values. † $P < 0.05$, †† $P < 0.01$ compared to R group values.

total [3 H]IP production, while 5-HT 10 μ M and 50 μ M increased it by the same amount. The 5-HT₂ antagonist ketanserin completely blocked the total [3 H]IP accumulation induced by 5-HT 50 μ M. The affinity values of ketanserin for 5-HT_{1C} and 5-HT₂ recognition sites, as expressed by pK_D , were 7 and 8.9, respectively [25]. These results indicate that activation of the inositol phospholipid hydrolysis by 5-HT in rat isolated atria is 5-HT₂ and not 5-HT_{1C} receptor mediated. Thus, 5-HT₂ receptors are activated by 5-HT at the concentration of 50 μ M, known to induce an increase in atrial rate and in NA release [7]. α_1 -adrenoceptors, like 5-HT₂ receptors, promote an acceleration of phosphoinositide metabolism in the cardiac muscles [26–28] and are blocked by ketanserin [29, 30]. This compound is also an α_1 -adrenergic antagonist [29, 30], capable of blocking α_1 -adrenoceptors at 1 μ M [31]. However, the possibility of activation by NA released by 5-HT can be ruled out, because they

are not functional when β -adrenoceptors are activated [32–35].

5-HT induces a small rise in cAMP in rat heart slices, indirectly mediated by the increase in NA release [36]. In contrast, 5-HT does not increase cAMP production in isolated cardiac myocytes [37]. In the present study, 5-HT 5, 10, 20 and 50 μ M stimulated adenylate cyclase activity in rat isolated atria: this effect was less important at the concentration of 50 μ M. This decrease in response with increasing concentration has been reported with several amines, such as 5-HT, NA and tyramine, on rat heart slices [36]. It may be suggested that a large quantity of released NA can activate α_2 -adrenoceptors and/or that 5-HT activates 5-HT₁-like receptors, which are both negatively linked to adenylate cyclase. The activation of adenylate cyclase by any concentration of 5-HT was abolished when the atria were pre-incubated with the $\beta_1\beta_2$ -adrenergic receptor antagonist nadolol (1 μ M). These results

demonstrate that the increase in cAMP production is indirectly induced by 5-HT via the release of NA and the subsequent stimulation of the β -adrenergic receptors coupled to adenylate cyclase. The results obtained in atria from rats pre-treated with reserpine, which depletes NA from neuronal terminals, are somewhat difficult to discuss due to the large increase in cAMP after administration of this drug. None the less, it may be observed that, if not reduced in absolute value, the stimulating effect of 5-HT 10 and 50 μ M on adenylate cyclase activity is relatively weaker in reserpinized rats than in control rats. The remaining effect of 5-HT could be related to the small amount of NA (~ 0.40 pmol/mg of tissue) which remains in atria of reserpine-treated rats [6]. This NA could be released by 5-HT and activate the β -adrenergic receptors.

In summary, the results of the present study show that 5-HT activates phosphoinositide metabolism. This activation is exclusively 5-HT₂ mediated at a concentration of 50 μ M. Moreover 5-HT₂ induces an increase in cAMP production which is indirectly caused by the interaction between the NA released by 5-HT and the β -adrenergic receptors.

REFERENCES

- Göthert M, Schlicker E and Kollacker P, Receptor-mediated effects of serotonin and 5-methoxytryptamine on noradrenaline release in the rat vena cava and in the heart of the pithed rat. *Naunyn-Schmiedeberg's Arch Pharmacol* **332**: 124–130, 1986.
- Docherty JR, Investigations of cardiovascular 5-hydroxytryptamine receptor subtypes in the rat. *Naunyn-Schmiedeberg's Arch Pharmacol* **337**: 1–8, 1988.
- Dabiré H, Chaouche-Teyara K, Cherqui C, Fournier B and Schmitt H, Pharmacological analysis of the cardiac effects of 5-HT and some 5-HT receptor agonists in the pithed rat. *Fund Clin Pharmacol* **6**: 237–245, 1992.
- Saxena PR and Lawang A, A comparison of cardiovascular and smooth muscle effects of 5-hydroxytryptamine and 5-carboxamidotryptamine, a selective agonist of 5-HT₁ receptors. *Arch Int Pharmacodyn* **277**: 235–252, 1985.
- Krstic MK and Katusic ZS, Divergent effects of ketanserin, a 5-HT₂ antagonist, on the pressor and tachycardiac responses to 5-hydroxytryptamine in rats. *Iugoslav Physiol Pharmacol Acta* **25**: (Suppl 3): 73–74, 1989.
- El Rawadi C, Heimburger M, Davy M, Midol-Monnet M, Beslot F and Cohen Y, Uptake of 5-hydroxytryptamine in rat isolated atria. *Gen Pharmacol* **23**: 613–617, 1992.
- El Rawadi C, Glondou M, Davy M, Midol-Monnet M and Cohen Y, Mechanism of the chronotropic action and noradrenaline release induced by a high concentration of 5-hydroxytryptamine in the rat isolated atria. *J Auton Pharmacol* **13**: 329–339, 1993.
- Zifa E and Fillion G, 5-hydroxytryptamine receptors. *Pharmacol Rev* **44**: 401–458, 1992.
- Lefkowitz RJ, Stadel JM and Caron MG, Adenylate cyclase-coupled beta-adrenergic receptors: Structure and mechanisms of activation and desensitization. *Annu Rev Biochem* **52**: 159–186, 1983.
- Berridge MJ, Downes CP and Hanley MR, Lithium amplifies agonist-dependent phosphatidylinositol responses in brain and salivary glands. *Biochem J* **206**: 587–595, 1982.
- Sakuma I, Gross SS and Levi R, Positive inotropic effect of histamine on guinea pig left atrium: H₁-receptor-induced stimulation of phosphoinositide turnover. *J Pharmacol Exp Ther* **247**: 466–472, 1988.
- Roth BL, Nakaki T, Chuang DM and Costa E, Aortic recognition sites for serotonin are coupled to phospholipase C and modulate phosphatidylinositol turnover. *Neuropharmacology* **23**: 1223–1225, 1984.
- Nakaki T, Roth BL, Chuang DM and Costa E, Phasic and tonic components in 5-HT₂ receptor-mediated rat aorta contraction. Participation of Ca⁺⁺ channels and phospholipase C. *J Pharmacol Exp Ther* **234**: 442–446, 1985.
- Conn PJ and Sanders-Bush E, Biochemical characterization of serotonin stimulated phosphoinositide turnover. *Life Sci* **38**: 663–669, 1986.
- Cory RN, Berta P, Haiech J and Bockaert J, 5-HT₂ receptor-stimulated inositol phosphate formation in rat aorta myocytes. *Eur J Pharmacol* **131**: 153–157, 1986.
- Cohen ML and Wittenauer LA, Serotonin receptor activation of phosphoinositide turnover in uterine, fundal, vascular, and tracheal smooth muscle. *J Cardiovasc Pharmacol* **10**: 176–181, 1987.
- Conn PJ and Sanders-Bush E, Selective 5-HT₂ antagonists inhibit serotonin stimulated phosphatidylinositol metabolism in cerebral cortex. *Neuropharmacology* **23**: 993–996, 1984.
- Conn PJ and Sanders-Bush E, Serotonin-stimulated phosphoinositide turnover: Mediation by the S₂ binding site in rat cerebral cortex but not in subcortical regions. *J Pharmacol Exp Ther* **234**: 195–203, 1985.
- Conn PJ and Sanders-Bush E, Regulation of serotonin-stimulated phosphoinositide hydrolysis: Relation to the serotonin 5-HT₂ binding site. *J Neurosci* **6**: 3669–3675, 1986.
- Hashimoto T, Hirata M and Ito Y, A role for inositol 1,4,5-trisphosphate in the initiation of agonist-induced contractions of dog tracheal smooth muscle. *Br J Pharmacol* **86**: 191–199, 1985.
- De Chaffoy de Courcelles D, Leysen JE, De Clerck F, Van Belle H and Janssen PAJ, Evidence that phospholipid turnover is the signal transducing system coupled to serotonin-S₂ receptor sites. *J Biol Chem* **260**: 7603–7608, 1985.
- Schachter M, Godfrey PP, Minchin MCW, McClue SJ and Young MM, Serotonergic agonists stimulate inositol lipid metabolism in rabbit platelets. *Life Sci* **37**: 1641–1647, 1985.
- Conn PJ and Sanders-Bush E, Agonist-induced phosphoinositide hydrolysis in choroid plexus. *J Neurochem* **47**: 1754–1760, 1986.
- Huzoor-Akbar, Chen NY, Fossen DV and Wallace D, Increased vascular contractile sensitivity to serotonin in spontaneously hypertensive rats is linked with increased turnover of phosphoinositide. *Life Sci* **45**: 577–583, 1989.
- Hoyer D, 5-Hydroxytryptamine receptors and effector coupling mechanisms in peripheral tissues. In: *The Peripheral Actions of 5-Hydroxytryptamine* (Ed. Fozard JR), pp. 72–99. Oxford Medical Publications, Oxford, 1989.
- Sekar MC and Roufogalis BD, Comparison of muscarinic and α -adrenergic receptors in rat atria based on phosphoinositide turnover. *Life Sci* **35**: 1527–1533, 1984.
- Scholz J, Schaefer B, Schmitz W, Scholz H, Steinfath M, Lohse M, Schwabe U and Puurunen J, Alpha-1 adrenoceptor-mediated positive inotropic effect and inositol trisphosphate increase in mammalian heart. *J Pharmacol Exp Ther* **245**: 327–335, 1988.
- Endoh M, Hiramoto T, Ishihata A, Takanashi M and Inui J, Myocardial α 1-adrenoceptors mediate positive

- inotropic effect and changes in phosphatidylinositol metabolism. *Circ Res* **68**: 1179–1190, 1991.
29. Kalkman HO, Timmermans PBMWM and Van Zwieten PA, Characterization of the antihypertensive properties of ketanserin (R 41468) in rats. *J Pharmacol Exp Ther* **222**: 227–231, 1982.
 30. Cohen ML, Fuller RW and Kurz KD, Evidence that blood pressure reduction by serotonin antagonists is related to alpha receptor blockade in spontaneously hypertensive rats. *Hypertension* **5**: 676–686, 1983.
 31. Janssen PAJ, Pharmacology of potent and selective S_2 -serotonergic antagonists. *J Cardiovasc Pharmacol* **7**: (Suppl 7): S2–S11, 1985.
 32. Tung LH, Rand MJ, Drummer OH and Louis WJ, Positive chronotropic responses produced by α -adrenoceptors in the pithed rat. *J Auton Pharmacol* **2**: 217–223, 1982.
 33. Aas H, Skomedal T and Osnes JB, Demonstration of an α_1 -adrenoceptor-mediated inotropic effect of norepinephrine in rabbit papillary muscle. *J Pharmacol Exp Ther* **226**: 572–578, 1983.
 34. De Luca A and Rand MJ, Involvement of α_1 -adrenoceptors in chronotropic responses to endogenously released amines in the pithed rat. *Clin Exp Pharmacol Physiol* **15**: 33–41, 1988.
 35. Benfey BG, Function of myocardial α -adrenoceptors. *J Auton Pharmacol* **13**: 351–372, 1993.
 36. Benfey BG, Cohen J, Kunos G and Vermes-Kunos I, Dissociation of 5-hydroxytryptamine effects on myocardial contractility and cyclic AMP accumulation. *Br J Pharmacol* **50**: 581–585, 1974.
 37. Higgins TJC, Bailey PJ and Allsopp D, Mechanisms of stimulation of cardiac myocyte beating rate by 5-hydroxytryptamine. *Life Sci* **28**: 999–1005, 1981.