

EFFECTS OF A AND B SERIES PROSTAGLANDINS ON cAMP, CORTISOL
AND ALDOSTERONE PRODUCTION BY THE HUMAN ADRENAL

Kenneth V. Honn and Walter Chavin
Departments of Radiology and Biology
Wayne State University, Detroit, Michigan 48202

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Summary: PGA_1 and PGA_2 (10, 100 $\mu\text{g/ml}$) significantly increased human adrenal cAMP levels and cortisol output but low doses (1 $\mu\text{g/ml}$) depressed both parameters. Only 1 $\mu\text{g/ml}$ PGA_1 significantly increased aldosterone output while higher doses depressed same. The low PGA_2 dose (1 $\mu\text{g/ml}$) depressed aldosterone output. The glucocorticoid and mineralocorticoid outputs appear to be inversely modulated by prostaglandins. PGB_1 and PGB_2 behaved similarly to E type prostaglandins. However, like PGA_1 , 1 $\mu\text{g/ml}$ of PGB_1 or PGB_2 significantly increased aldosterone output. Higher doses were ineffective. The present findings reveal an increased complexity of prostaglandin modulation of cyclic nucleotides and steroid output.

Considerable evidence supports the concept that prostaglandins may stimulate adrenal cAMP and subsequent steroidogenesis and/or release (1,2). In addition, ACTH stimulates adrenal prostaglandin biosynthesis (3) and release (4) but prostaglandins, in turn, modulate the mechanism of ACTH action in the adrenal (1). The majority of the evidence deals with E and F prostaglandins. In ACTH stimulated adrenal PGE and PGF biosynthesis (3) a third component tentatively identified as either PGA or PGB was isolated. Further, an A series prostaglandin produces a slight increase in aldosterone and cortisol production by bovine adrenals (5) and PGA markedly elevates plasma aldosterone levels in man (6,7). Therefore, the present study explores the action of A and B series prostaglandins on the human adrenal in order to further define the complex prostaglandin-cyclic nucleotide-steroid production relationship.

MATERIAL AND METHODS

Four adult human female adrenal glands obtained at surgery were bisected, demedullated, diced (2x3 mm), preincubated and incubated (37°C) in Krebs' Ringer bicarbonate buffer (KRBGA) as previously described (1,2). The dice were exposed to prostaglandins A_1 , A_2 , B_1 or B_2 at 1, 10, 100 $\mu\text{g/ml}$, prostaglandin vehicle (2% ethanol in KRBGA), porcine ACTH (100 mIU/ml; chromatographically pure; 150 IU/mg) or KRBGA alone. Adrenal incubates were analyzed for cAMP content by RIA (8). Cortisol and aldosterone secretion into the incubation medium was quantitated by RIA (1,2). Proteins were determined

TABLE I

Temporal cAMP (pM/mg protein; $\bar{X} \pm \text{SEM}$) response
of the human adrenal to PGA_1 and PGA_2

Time (min)	PGA_1 ($\mu\text{g/ml}$)			PGA_2 ($\mu\text{g/ml}$)			Vehicle
	1	10	100	1	10	100	
1	1.2 \pm 0.6	8.2 \pm 1.2	8.8 \pm 1.0	1.6 \pm 0.3	6.3 \pm 0.6	3.8 \pm 1.6	7.7 \pm 0.7
2	2.2 \pm 0.5	9.7 \pm 2.0	9.7 \pm 3.5	1.0 \pm 0.3	6.5 \pm 1.8	6.4 \pm 0.5	5.4 \pm 1.8
4	3.9 \pm 0.9	8.3 \pm 0.7	8.9 \pm 0.8	1.4 \pm 0.6	5.6 \pm 2.8	13.2 \pm 2.9	6.7 \pm 2.7
8	2.7 \pm 1.2	8.8 \pm 0.3	8.3 \pm 1.7	4.2 \pm 2.0	5.7 \pm 0.2	10.0 \pm 1.0	6.2 \pm 3.3
16	1.0 \pm 0.3	12.9 \pm 0.8	17.0 \pm 1.2	7.4 \pm 1.4	7.9 \pm 0.3	9.9 \pm 2.3	6.9 \pm 1.7
32	1.6 \pm 0.6	18.0 \pm 2.0	26.5 \pm 6.4	6.3 \pm 0.3	11.2 \pm 3.0	5.6 \pm 2.7	6.9 \pm 2.9

TABLE II

Temporal cAMP (pM/mg protein; $\bar{X} \pm \text{SEM}$) response
of the human adrenal to PGB_1 and PGB_2

Time (min)	PGB_1 ($\mu\text{g/ml}$)			PGB_2 ($\mu\text{g/ml}$)			Vehicle
	1	10	100	1	10	100	
1	6.0 \pm 1.9	5.9 \pm 1.9	4.6 \pm 1.1	4.8 \pm 1.0	14.3 \pm 1.3	8.0 \pm 2.0	7.7 \pm 0.7
2	6.0 \pm 4.0	7.6 \pm 3.8	5.3 \pm 2.0	5.0 \pm 0.5	12.5 \pm 0.5	9.8 \pm 2.9	5.4 \pm 1.8
4	5.1 \pm 3.6	10.0 \pm 3.0	5.8 \pm 0.5	4.3 \pm 2.0	8.0 \pm 2.0	4.7 \pm 1.9	6.7 \pm 2.7
8	3.1 \pm 1.5	18.8 \pm 1.8	7.0 \pm 1.9	4.5 \pm 1.5	9.6 \pm 1.9	5.3 \pm 0.9	6.2 \pm 3.2
16	5.6 \pm 1.0	17.6 \pm 8.0	7.6 \pm 3.2	9.6 \pm 2.0	5.6 \pm 2.8	5.2 \pm 0.6	6.9 \pm 1.7
32	6.8 \pm 0.8	12.9 \pm 0.6	8.8 \pm 2.6	8.5 \pm 4.2	5.5 \pm 1.5	4.4 \pm 2.7	6.9 \pm 2.9

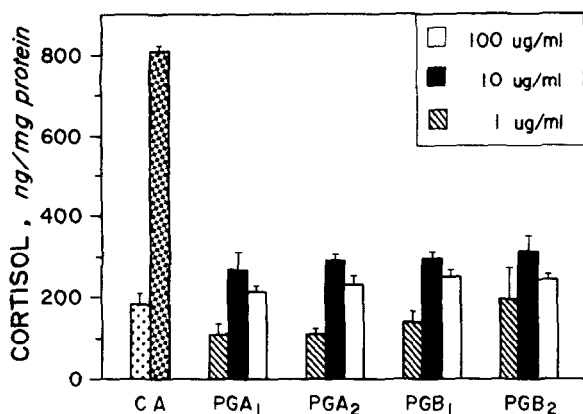


Figure 1. *In vitro* dose effects of prostaglandins A₁, A₂, B₁ and B₂ on cortisol output (32 min) relative to controls (C) and ACTH (A), 100 mIU/ml, by human adrenocortical tissue.

(9) and the data expressed as pM cAMP or ng aldosterone or cortisol/mg protein, $\bar{X} \pm \text{SEM}$. A minimum of three tissue replicates were used per datum point. Data were analyzed by analysis of variance and student t test. Differences were accepted as significant when $p < 0.05$.

RESULTS

Prostaglandin vehicle and KRBGA control groups were not significantly different in basal cAMP, cortisol or aldosterone levels. Basal cAMP levels (Tables I and II) remained relatively constant throughout the 32 min study period ($\bar{X} \pm \text{SEM}$: 6.6 ± 0.3 pM cAMP/mg protein), Figs. 1, 2.

PGA₁ (10, 100 $\mu\text{g/ml}$) significantly elevated cAMP levels above controls. The maximal response occurred at 32 min (Table I). PGA₂ (100 $\mu\text{g/ml}$) significantly elevated cAMP levels above the control group at 4 and 8 min (Table I). Although cAMP levels remained elevated 43% (16 min) above the control groups, such was not significant. 10 μg PGA₂/ml increased cAMP levels at 16 (14%) and 32 (62%) min were not significant. The lowest dose (1 $\mu\text{g/ml}$) of PGA₁ or PGA₂ significantly depressed cAMP levels below that of the control group although the temporal response differed between the two prostaglandins. The PGA₁ depression continued throughout the 32 min interval. In contrast, the depression evoked by PGA₂ was immediate (1-4 min), thereafter the cAMP levels did not differ from the control levels (Table I).

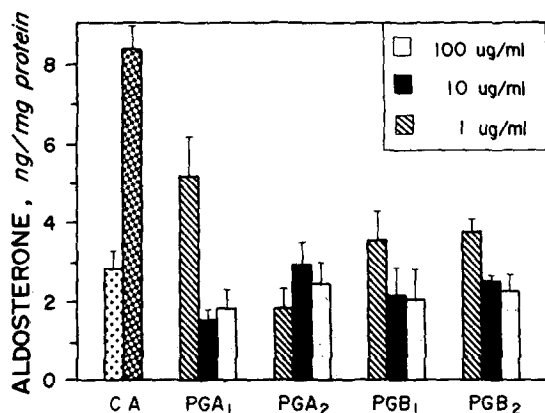


Figure 2. *In vitro* dose effects of prostaglandins A₁, A₂, B₁ and B₂ on aldosterone output (32 min) relative to controls (C) and ACTH, 100 mIU/ml, by human adrenocortical tissue.

Although PGB₁ and PGB₂ at the lowest and highest dose (1, 100 μ g/ml) did not significantly alter cAMP levels from that of controls interesting trends emerged (Table II). PGB₁ and PGB₂ (100 μ g/ml) elevated cAMP levels 28% (32 min) and 81% (2 min) respectively, while 1 μ g/ml of PGB₁ and PGB₂ depressed cAMP levels at 8 min and 1-8 min, respectively (Table II). 10 μ g PGB₁/ml significantly elevated cAMP levels at 8-32 min while 10 μ g PGB₂/ml elevated cAMP levels at 1-2 min (Table II).

PGA₁ and PGA₂ (10, 100 μ g/ml) significantly elevated cortisol production (Fig 1) with 10 μ g/ml being more effective. In contrast, both PGA₁ and PGA₂ at 1 μ g/ml significantly depressed cortisol production (Fig 1) compared to the control group. PGB₁ and PGB₂ (10, 100 μ g/ml) significantly increased cortisol output (Fig 1). Again, 10 μ g/ml was the most effective dose. PGB₁ (1 μ g/ml) depressed cortisol output 23% below controls although such was not significant (Fig 1). PGB₂ (1 μ g/ml) did not significantly alter basal cortisol output (Fig 1).

PGA₁ (10, 100 μ g/ml) significantly depressed adrenocortical aldosterone output (Fig 2). These doses of PGA₂ were without effect upon aldosterone output (Fig 2). However, 1 μ g/ml PGA₂ significantly depressed aldosterone output while 1 μ g/ml PGA₁ significantly increased aldosterone output (Fig 2).

PGB₁ and PGB₂ (10, 100 µg/ml) did not alter aldosterone output from that of controls (Fig 2). Interestingly 1 µg/ml PGB₁ and PGB₂ significantly increased aldosterone output although not as effectively as 1 µg/ml PGA₁.

DISCUSSION

The human adrenal is stimulated by A and B series prostaglandins to increase cAMP levels and cortisol and aldosterone output. PGA₁ and PGB₁ produce the greatest cAMP increase at the higher doses used, although these are generally lower than the response to PGE₁ and PGE₂ at 100 µg/ml (1). Interestingly, PGA₁ and PGA₂ at low doses (1 µg/ml) share an effect in common with the F series prostaglandins, namely, cAMP depression (1). This interesting parallel also is observed with cortisol production. Like the E series prostaglandins, high doses (10, 100 µg/ml) of PGA₁ and PGA₂ effect a significant increase in cortisol output (1). However, similar to the F prostaglandins, low doses of PGA₁ and PGA₂ depress cortisol output (1). The increase in cortisol production by the bovine adrenal in response to an A series prostaglandin occurs at a dose of 100 µg/ml (5) whereas infusion of relatively low doses of PGA₁ into the human have produced ambivalent effects on plasma cortisol levels (7,10). Cortisol production by B series prostaglandins is qualitatively similar to PGE₁ and PGE₂ (1), *i.e.*, low doses are ineffective and higher doses stimulatory. Quantitatively, however, PGB₁ and PGB₂ are only about 50% as effective as PGE₁ and PGE₂.

The effects of low doses of PGA₁ on *in vitro* human adrenal aldosterone production support the observation of Fichman *et al.* (7) *in vivo*. However, high doses of PGA₁ depress aldosterone output. Curiously, whenever aldosterone production is depressed by PGA₁, cortisol output is increased and *vice versa*. This also relates to the dose dependent increase or depression of cAMP. Other factors in addition to cAMP may control the relative outputs of glucocorticoid or mineralocorticoid (*i.e.*, cGMP, prostaglandins). Unlike PGA₁, PGA₂ depresses aldosterone output at 32 min, however, the observed cAMP depression evoked by PGA₂ is transitory. A similar dichotomy between the

effect of low doses of $\text{PGF}_{1\alpha}$ and $\text{PGF}_{2\alpha}$ on aldosterone production have been observed (2). Although high doses of B type prostaglandins tested are ineffective with regard to aldosterone output, 1 $\mu\text{g}/\text{ml}$ of PGB_1 and PGB_2 effect an increase. The mechanism for such increase is unclear.

E and F series prostaglandins have been demonstrated to be antagonistic with respect to cAMP, cortisol and aldosterone production by the human adrenal (1,2). The present study indicates that A and B type prostaglandins effect human adrenal physiology, possibly by modulation of intracellular cyclic nucleotide level or via other routes.

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