

ent terminals evoked by NMDA and similar excitants are caused indirectly via the release of another substance, possibly potassium into extracellular space.

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## Reference

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## Clinically-used dyes are inhibitors of prostaglandin E<sub>2</sub> inactivation in rat isolated lung

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Indicator dyes such as bromocresol green and thymol blue prevent the inactivation of prostaglandin F<sub>2α</sub> (Bito & Baroody, 1974) and prostaglandin E<sub>2</sub> (Bakhle, Jancar & Whittle, 1978) in rat isolated lungs. Other dye molecules are used in clinical practice for a variety of purposes and we have therefore studied the effect of some clinically used dye molecules on the pulmonary inactivation of prostaglandin E<sub>2</sub>.

The inactivation of prostaglandin E<sub>2</sub> on a single passage through rat isolated lungs perfused with Krebs solution (8 ml/min) was measured by bioassay on the hamster stomach strip (Bakhle *et al.*, 1978). In each experiment the inactivation of prostaglandin E<sub>2</sub> was measured before, and 20 min after infusing the dye under investigation through the pulmonary circulation. The effect, if any, of the dye was rapidly attained (within 15 min) and remained constant for as long as the dye was infused. After the dye infusion was stopped, the inactivation tended to return towards the original level but recovery from dye treat-

ment was not systematically studied. The results summarised in the Table show that all the dyes inhibited prostaglandin E<sub>2</sub> inactivation, the least potent being methylene blue.

The effect of the dyes can also be demonstrated by injecting the dye during an infusion of prostaglandin E<sub>2</sub>. For instance, a constant infusion of prostaglandin E<sub>2</sub> (2 or 20 ng/ml) through the pulmonary circulation produced no contraction of the assay tissue superfused with lung effluent. However, an injection of sulphobromophthalein (0.25 μmole; 210 μg) through the lung caused a contraction equivalent to about 10 or 100 ng prostaglandin E<sub>2</sub> respectively. Injection of this dose of sulphobromophthalein directly to the tissue was without effect.

The results show that these dyes, and perhaps others in clinical use, interfere with at least one physiological process and suggest that the assumption that they are pharmacologically inert may no longer be valid.

## References

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**Table 1** Inhibition of pulmonary inactivation of prostaglandin E<sub>2</sub> by dyes

Indocyanine green	Concentration required (μM) to produce 20% inhibition				Methylene blue
	Sulphobromophthalein	Phenol red	Evans blue		
(775)	(838)	(354)	(961)		(356)
<0.4	2.5	9	7		90

These values have been taken from dose-effect studies using at least two doses of dye and at least 8 separate experiments. The number in brackets is the MW of the dye.