Release of tissue-type plasminogen activator is induced in rats by leukotrienes C_4 and D_4 , but not by prostaglandins E_1 , E_2 and I_2

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- 1 Acute release of plasminogen activator (PA) was studied in rat isolated hindleg system perfused with Tyrode solution.
- 2 Leukotriene C₄ (LTC₄) and LTD₄ dose-dependently induced the release of PA, which plateaued at 160 nmol l⁻¹ and 200 nmol l⁻¹, respectively. The amount of PA released was about 1 iu ml⁻¹. The effects of LTC₄ and LTD₄ were not additive.
- 3 The PA released was identified as tissue-type PA (t-PA) by quenching experiments using anti-human t-PA IgG, by fibrin autography, and by the dependence of its activity on the presence of soluble fibrin.
- 4 LTE₄ (300 and 450 nmol l⁻¹) and 5-hydroxy-eicosatetraenoic acid (600 nmol l⁻¹) did not induce any t-PA release in the perfusion system used.
- 5 Release of t-PA induced by LTC₄ and LTD₄ was inhibited by the leukotriene-receptor antagonist FPL 55712 (10 μmol l⁻¹), whereas FPL 55712 did not inhibit t-PA release induced by platelet-activating factor (Paf-acether).
- 6 In vivo LTC₄ and LTD₄ (2 µg kg⁻¹ i.v.) also induced an acute increase of t-PA activity in rat blood as evidenced by decreased blood clot lysis times.
- 7 Prostaglandin E_1 and E_2 , prostacyclin and the stable prostacyclin analogue ZK 36374 at concentrations of $0.1-3.0\,\mu\text{mol}\,1^{-1}$ induced little or no t-PA release.

Introduction

The fibrinolytic and thrombolytic activity of blood is to a large extent determined by its content of plasminogen activators and their inhibitors. Of the various functionally and immunologically distinct types of plasminogen activator present in plasma (Emeis et al., 1985), only tissue-type plasminogen activator (t-PA) can show large and rapid changes in plasma activity (Prowse & Cash, 1984; Emeis, 1987a). A better insight into factors regulating changes in blood t-PA levels might be of importance to develop means of manipulating blood fibrinolytic and thrombolytic activity pharmacologically.

In vivo, t-PA is synthesized and stored by vascular endothelial cells, which are considered to be the major, if not only, source of t-PA present in blood (Emeis, 1987a). From these endothelial cells, t-PA can be released into the blood, resulting in rapid and large increases in blood fibrinolytic activity (Prowse & Cash, 1984). The humoral and cellular mechanisms

resulting in this acute release of t-PA are only vaguely understood (Emeis, 1987a). In a previous study we suggested, on the basis of inhibition studies, that products of a lipoxygenase pathway were involved in the acute release of t-PA from vessel walls (Emeis & Kluft, 1985).

In the present paper we will show that leukotriene C₄(LTC₄) and LTD₄, though not other eicosanoids, can induce in rats the acute release of t-PA, both *in vivo* and in a perfused hindleg vascular bed.

Methods

Rat hindleg perfusion

The rat perfused hindleg system was used to study the release of tissue-type plasminogen activator (t-PA) from a perfused vascular bed (Emeis, 1983). Male Wistar rats (Centraal Proefdierbedrijf TNO, Zeist, the Netherlands) weighing 220-300 g were anaesthetized

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with pentobarbitone (Nembutal, 60 mg kg⁻¹ intraperitoneally). With the animal anaesthetized, the abdominal cavity was opened and the aorta and inferior vena cava were carefully dissected out. Ligatures were applied round the renal vessels and these were tightened to prevent leakage during the perfusion. Double ligatures were loosely applied round the aorta and vena cava separately. The upper ligature round the aorta was tightened and an 18gauge needle was immediately inserted into the vessel and pushed distally up to the bifurcation. The lower ligature was then tightened securing the needle in place and the perfusion started by means of a constant flow roller pump. Next the upper ligature around the vena cava was tightened and the vessel was severed distal to the tied ligature to allow unimpeded outflow. The animal's thorax was opened and the pulmonary vessels severed to kill the animal. A cannula was inserted distally into the vena cava and tied into place. The rat hindlegs were perfused at a constant flow of 9 to 10 ml min⁻¹ using Tyrode solution (composition in mmol 1-1: NaCl 146, KCl 6, CaCl₂ 3, MgCl₂ 0.5, KH₂PO₄0.3, NaHCO₃20, glucose 5.6) containing 0.1 mg ml⁻¹ bovine serum albumin (BSA), pH 7.4 at 37°C and oxygenated with 95% O₂ and 5% CO₂. Perfusion pressure was measured just proximal to the inflow by means of a mercury manometer.

Each experiment was started with a 30 min perfusion of the Tyrode/BSA solution through the hindleg region to clear the vessels from residual blood. Then compounds to be tested (see Results section) were added to the Tyrode/BSA and immediately perfused through the hindlegs. Sample collections were taken every 30 s for 30 s from the vena cava cannula and placed on ice. Subsequently, a 5 min wash with Tyrode/BSA solution was carried out before another compound, generally platelet-activating factor (Paf-acether), was perfused to test the responsiveness of the vascular bed. On completion of the experiment the samples were centrifuged (3000 g for 10 min), mixed at a 10:1 ratio with a solution containing 0.5 M Tris HCl (pH = 7.5) and 1% Triton X-100, and stored at -20° C. This procedure stabilized the activity of the samples for at least four months (data not shown). The samples in 30 s blocks were usually analysed for t-PA activity immediately after experimentation.

To ensure that the hindleg region was totally perfused and no blockages had occurred, Evans Blue dye was injected into the inflow tube: the passage of the dye through all vessels indicated a complete perfusion.

Compounds and solvents

Leukotrienes were obtained in a solvent composed of methanol, water, acetic acid and ammonium hydroxide (65:35:0.03:0.04) and added as such to the Tyrode/BSA. Prostaglandin E₁ (PGE₁) and PGE₂ were dissolved in ethanol, and PGI₂ in 0.1 N NaOH, and added to Tyrode/BSA immediately before perfusion. FPL 55712 and ZK 36374 were dissolved directly in the Tyrode/BSA. Paf-acether was prepared as described by Emeis & Kluft (1985).

Spectrophotometric plasminogen activator assay

The PA activity of the sample was determined by the indirect spectrophotometric rate assay described by Verheijen et al. (1982). In brief: to wells of a 96-well microtiter plate were added: 75 µl buffer (0.1 mol1⁻¹ Tris HCl, pH 7.65 containing 0.1% Tween 80), 20 µl soluble fibrin digest (1 mg ml⁻¹), 30 µl sample, 100 µl S-2251 (0.66 mmol1⁻¹) and 25 µl human plasminogen (1.11 µmol1⁻¹). The microtiter plate was incubated at 37°C and after 45, 65, 85, 105 and 125 min; absorption was measured at 405 nm in a Titertek multiscan spectrophotometer (Flow Laboratories, Irvine, Scotland). PA activity was then calculated according to Drapier et al. (1979). The detection limit for the assay was 0.09 iu ml⁻¹.

Dilutions of human melanoma t-PA (Kluft et al., 1983) were run in each plate for calibration. The PA activity of samples will be expressed in International Units (iu), as defined by the International Standard of t-PA (Gaffney & Curtis, 1985).

In some experiments either the soluble fibrin digest or the human plasminogen was omitted from the incubation mixture.

Quenching experiments

The quenching experiments used the same spectrophotometric t-PA assay as mentioned above with the following addition: to the buffer, fibrin digest, and sample, 0-40 µl of a rabbit anti-human t-PA IgG solution was added. The plate was incubated for 10 min at 37°C and then the substrate and plasminogen were added and the incubation proceeded as described above.

In vivo release of plasminogen activator

Rats were injected intravenously with LTC₄ or LTD₄ at a dose of $2 \mu g \, kg^{-1}$ body weight. Leukotrienes (0.1 ml in solvent) were diluted with 0.9 ml of saline to a concentration of $1 \mu g \, ml^{-1}$. Controls received only the solvent ($2 \, ml \, kg^{-1}$). Blood samples were obtained from a cannula in the carotid artery before and at 1, 2, 3, 5, 7 and 10 min after injection.

Blood (0.2 ml) was diluted to 10% in 1.7 ml of 0.12 mol 1⁻¹ sodium acetate (pH 7.4), clotted with 0.1 ml thrombin (20 u ml⁻¹) and incubated at 37°C. Lysis times were read in minutes. When indicated,

antibodies were added to the diluted blood 5 min before the addition of thrombin.

Fibrin autography

Sodium dodecyl sulphate/8% polyacrylamide slab gels were prepared according to Laemmli (1970). Fibrin autography was performed according to Loskutoff & Mussoni (1983).

Materials

All the chemicals used were of analytical grade. The products necessary for the spectrophotometric assay, such as the fibrin digest, substrate S-2251 and plasminogen were described previously (Verheijen *et al.*, 1982). Conditioned medium from rat L_2 cells (Wewer *et al.*, 1981) was used as a source of rat t-PA. Rabbit anti-human t-PA IgG (100 μ g ml⁻¹) was prepared in our institute (Rijken *et al.*, 1984).

The compounds used were obtained from the following sources: LTC4, LTD4 and LTE4 as free acids from Paesel GmbH & Co, Frankfurt, West Germany; PGE₁, PGE₂, PGI₂ and bovine albumin (fraction 5) from Sigma, St Louis, U.S.A.; ZK 36374 (5-(E)-(1S,5S,6R,7R)-7-Hydroxy-6-[(E)-(3S,4RS)-3-hydroxy-4-methyl-1-octane-6-inyl]bicyclo[3.3.0] octane-3-ylidenepentanoic acid) from Schering AG, Berlin, West Germany; FPL 55712 (sodium 7-[3-(4-acetyl-3hydroxy-2-propyl-phenoxy)-2-hydroxypropoxy]-4oxo-8-propyl-4H-1-benzopyran-2-carboxylate) from Fisons Pharmaceuticals, Loughborough, bovine thrombin from Leo Pharmaceuticals, Ballerup, Denmark: Nembutal from Sanofi. Paris. France: Pafacether from Bachem, Bubendorf, Switzerland; 5hydroxy-eicosatetraenoic acid (5-HETE) Unilever Research Laboratories, Vlaardingen, the Netherlands.

Results

The release of PA by LTC, and LTD,

Perfusion using only Tyrode/BSA solution did not result in PA release. When LTC₄ (8-320 nmol l⁻¹) was added to the Tyrode/BSA solution and perfused through the rat hindleg region, analysis of the samples collected showed the presence of plasminogen activator (PA) in the perfusate. The amount of PA released was found to be dose-dependent, increasing and reaching a maximum at a dose of 160 nmol l⁻¹ (Figure 1). LTD₄ (10-400 nmol l⁻¹) induced PA release in a very similar fashion to LTC₄. The release of PA was also dose-dependent, in this case reaching a maximum at a dose of 200 nmol l⁻¹. The maximal amount of PA released was similar for LTC₄ and

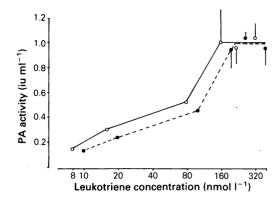


Figure 1 Dose-dependent release of tissue-type plasminogen activator (t-PA) induced by leukotriene C_4 (LTC₄ O) and LTD₄ (\bullet) in perfused hindlegs of the rat. Data are shown as means with vertical lines indicating s.d. (n = 4), or as mean (n = 2) values, of t-PA concentrations in the 60-90 s sample blocks.

LTD₄, and amounted to about 1 iu ml⁻¹ (Figure 1). Both LTC₄ and LTD₄ followed a similar time course of PA release with peak values being always present in the 60-90 s sample block and decreasing gradually over the next few minutes (Figure 2).

In two experiments, LTC₄ (160 nmol l⁻¹) and LTD₄ (200 nmol l⁻¹) were added together in the same perfusion buffer. The PA activity released by the com-

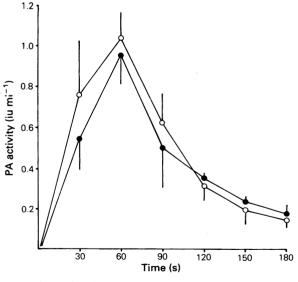


Figure 2 Time course of tissue-type plasminogen activator (t-PA) release induced by leukotriene C_4 (O; 320 nmol 1^{-1}) and leukotriene D_4 (\blacksquare ; 400 nmol 1^{-1}) in perfused hindlegs of the rat. Each point represents the mean (n = 4) and vertical lines indicate s.d.

Table 1 Induction of tissue-type plasminogen activator (t-PA) release in the rat perfused hindleg system

Compound	Concentration (nmol l ⁻¹)	n	t-PA release (iu ml ⁻¹)
LTC ₄	320	4	1.04 ± 0.11*
LTD	400	4	0.94 ± 0.14
LTE	300	3	ND
•	450	2	ND
5-HETE	600	5	ND
Solvent controls	_	5	ND
PGE ₁	600	2	ND
	3000	2	<0.10
PGE,	3000	4	<0.15
PGI,	3000	3	<0.10
ZK 36374	100	3	ND
	1000	3	ND
Paf-acether	20	4	2.79 ± 0.81

*Mean \pm s.d. of maximal t-PA concentration obtained during perfusion of rat hindlegs in the presence of the indicated concentration of release-inducing compound. Maximal concentrations were always found in the $60-90 \, \text{s}$ sample block. ND = none detected.

bined leukotrienes (0.99, 0.90 iu ml⁻¹) was equivalent to the amount of PA activity released by each of them when given alone, and not equivalent to the sum of these amounts. In the perfusions using the leukotrienes no pressure changes or variations in the flow were noted. No oedema was seen in any of the animals following these perfusions. In contrast to LTC₄ and LTD₄, LTE₄ in concentrations of 300 and 450 nmol l⁻¹ did not induce any PA release in the hindleg system (Table 1).

Perfusions were also done using 5-HETE, but no PA release was induced using this compound at a concentration of 600 nmol 1⁻¹ (Table 1). Paf-acether is known to induce the release of large amounts of t-PA in the hindleg model (Emeis & Kluft, 1985). To test each individual experiment and ensure that the animal was responsive, Paf-acether (20 nmol 1⁻¹) was perfused for several minutes after each of the compounds investigated. In all the experiments, Paf-acether did induce t-PA release, whether the compound perfused previously to it had induced t-PA release or not. Following the perfusion with Paf-acether, some oedema was seen in the animal's hind quarter; a slight increase in pressure and decrease in the flow was also noted. In solvent control experiments no PA release was detected.

The effect of FPL 55712 on PA release

To investigate the mode of release of PA by LTC₄ and LTD₄, FPL 55712, a leukotriene receptor antagonist

Table 2 Effect of FPL 55712 on tissue-type plasminogen activator (t-PA) release in rat perfused hindlegs

Compound	Concentration (nmol l ⁻¹)	n	t-PA release (iu ml ⁻¹)
LTC ₄	160	4	1.00 ± 0.32*
LTC ₄	160		
and		4	ND
FPL 55712	104		
LTD ₄	200	3	0.94 ± 0.11
LTD	200		
and		3	ND
FPL 55712	10⁴		
Paf	20	4	2.79 ± 0.81
Paf	20		
and		6	3.01 ± 0.79
FPL 55712	104		

*Mean \pm s.d. of maximal t-PA concentration obtained (in the 60-90 s blocks) by perfusing rat hindlegs with the indicated concentration(s) of compound(s). ND = none detected.

(Augstein et al., 1973; Musser et al., 1986), was used (Table 2). FPL 55712 (10 µmol l⁻¹) was added to the Tyrode/BSA buffer and perfused through the hindleg region for 20 min before the addition of either LTC₄ (160 nmol l⁻¹) or LTD₄ (200 nmol l⁻¹). FPL 55712 totally blocked the release of PA by both LTC₄ and LTD₄. However, it did not affect the release of PA induced by Paf-acether and so was not an inhibitor of the release reaction.

Determining the type of PA released

The activator released by LTC₄ and LTD₄ was identified as tissue-type PA (t-PA) by the following observations.

Firstly, a series of quenching experiments were done using the IgG fraction of a rabit anti-human t-PA antiserum. The specific anti-human t-PA IgGs quenched human t-PA, rat t-PA and the PA present in the perfusate samples dose-dependently (see Figure 3). As expected, heterologous rat t-PA was quenched less efficiently than the homologous human t-PA.

Secondly, the activation of plasminogen by t-PA is enhanced by soluble fibrin (ogen) fragments whereas plasminogen activation by urokinase-type plasminogen activators is not (Verheijen et al., 1982). Several spectrophotometric assays were done omitting the soluble fibrin digest; plasminogen activation by the perfusate samples was only detectable in the presence of soluble fibrin fragments.

Thirdly, in fibrin autography (Figure 4) both rat t-PA from L₂ cells and perfusate samples of LTC₄ and

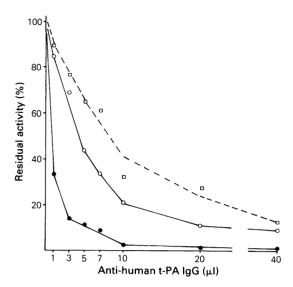


Figure 3 Quenching of plasminogen activator (PA) activity in perfusate samples by anti-human PA tissue-type (t-PA) antibodies. Perfusate samples (30 min from leukotriene C₄ (LTC₄)- or LTD₄-stimulated rat hindlegs were incubated with increasing amounts of rabbit anti-human t-PA IgG (100 μg ml⁻¹) for 10 min at 37°C, and subsequently the residual PA activity was determined spectrophotometrically. Data shown are means of duplicate determinations; the percentages of residual activity for LTC₄- and LTD₄- induced perfusates are averaged (O), as these percentages did not differ by more than 4%. Also shown for comparison is the quenching by anti-human t-PA Ig of human t-PA (•; 30 miu) and of rat L, t-PA (□; 60 miu).

LTD₄ showed a single lysis zone at the molecular weight of approx. 70,000, identical to the M₁ of human t-PA, but different from that of urokinase-type PA (molecular weights 55,000 and 33,000).

In vivo experiments

To see whether LTC₄ and LTD₄ would also induce t-PA release *in vivo*, each compound was injected intravenously into rats. Both LTC₄ and LTD₄ ($2\mu g kg^{-1}$) were found to increase blood fibrinolytic activity, as evidenced by decreased blood clot lysis times (Figure 5). At one min after injection, dilute blood clot lysis times were decreased by 86 ± 14 min in the leukotriene-treated animals, as compared to 7 ± 13 min (n = 5) in the control, solvent-treated, rats. No decreased blood clot lysis times were seen with the solvent controls. The increase in blood fibrinolytic activity could be quenched by pre-incubation of the diluted blood with antibodies against human t-PA (Figure 5).

Investigation of other eicosanoids

Several cyclo-oxygenase products were also tested in the hindleg perfusion system (see Table 1). PGE₁ was perfused at concentrations of 600 nmol l⁻¹ and 3 µmol l⁻¹. Whereas no PA was detected at the lower dose, at the higher dose a very small amount of t-PA release was induced. PGE₂ (3 µmol l⁻¹) and PGI₂ (3 µmol l⁻¹) also induced the release of small amounts of t-PA, which were significantly less than those released by LTC₄ and LTD₄.

ZK 36374, a stable prostacyclin analogue (Schrör *et al.*, 1981), was also perfused through the hindleg system (at $100 \text{ nmol } l^{-1}$ and $1 \mu \text{mol } l^{-1}$) but no PA release was detected.

Discussion

Peptidoleukotrienes affect the vascular system in various ways. Injection of leukotrienes C₄ or D₄ into rats results in a short-lived increase in blood pressure, followed by hypotension (Piper, 1983, Feuerstein, 1984). In cultured vascular endothelial cells LTC₄ shows high-affinity plasma membrane binding, which can be inhibited by FPL 55712 (Chau et al., 1986). Moreover, LTC₄ and LTD₄, but not LTB₄ or LTE₄, stimulate endothelial cell prostacyclin synthesis (Benjamin et al., 1983; Cramer et al., 1983; Pologe et al., 1984; Clark et at., 1986a), presumably because leukotrienes activate phospholipase A₂ in endothelial cells (Clark et al., 1986b, c). Not only prostacyclin synthesis, but synthesis of Paf-acether as well, is enhanced by LTC₄ and LTD₄ though again not by LTE₄ or LTB₄ (McIntyre et al., 1986). Endothelial cells in vitro can also degrade LTC₄ into LTD₄ and LTE₄ (Pologe et al., 1984). Whether endothelial cells can synthesize leukotrienes from arachidonic acid is, however, doubtful (Feinmark & Cannon, 1986). Together these observations show that endothelial cells respond to LTC4 and LTD₄, both in vivo and in vitro, and can convert LTC₄ into LTD₄ and LTE₄. In our constant flow-perfused hindleg system of the rat, LTC4 LTD4 and LTE4 did not change perfusion pressure and did not cause oedema formation within the experimental time period, in agreement with the relatively small effects on hindleg blood flow and vascular resistance described by Eimerl et al. (1986) after in vivo injection of graded doses of leukotrienes.

LTC₄ and LTD₄ were approximately equi-effective in inducing the release of t-PA, while LTE₄ had no effect at all. The combined application of both LTC₄ and LTD₄ did not result in an enhanced release of t-PA compared to the release induced by LTC₄ or LTD₄ separately. In combination with the complete suppression of t-PA release by FPL 55712, the data suggest that both LTC₄ and LTD₄ interact with a single

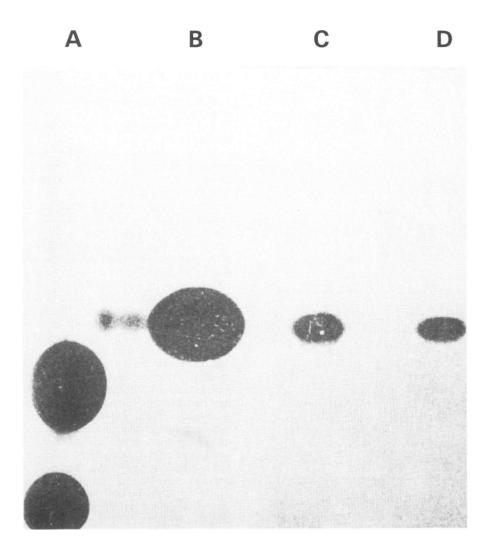


Figure 4 Fibrin autography of perfusate samples from leukotriene-stimulated rat hindlegs. Human urokinase (lane A), rat L, tissue-type plasminogen activator (t-PA, lane B) and perfusate samples after stimulation with 160 nmol 1^{-1} of leukotriene C_4 , (LTC₄, lane C) or 200 nmol 1^{-1} of LTD₄ (lane D) were electrophoresed in 8% polyacrylamide slab gels (Laemmli system). The gel was then soaked for 2 h in 2.5% Triton X-100 (with one change), washed, and placed on top of a plasminogen-rich fibrin-agarose gel. The dark areas indicate lysis of the fibrin gel, caused by PA diffused from the polyacrylamide gel into the fibrin gel. The mobility of the PA-activity in the perfusate samples is identical to that of rat t-PA ($M_r = 70,000$), but different from that of urokinase ($M_r = 55,000$ and 33,000).

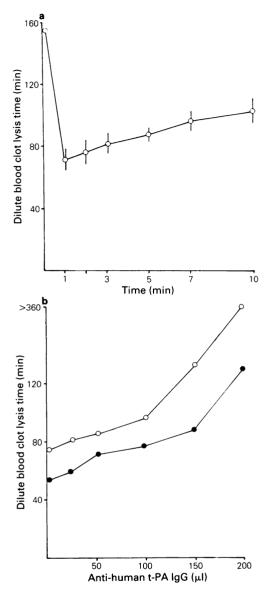


Figure 5 (a) Time course of dilute blood clot lysis times after injection of leukotrienes. Data are shown as mean lysis times from four rats (two injected with leukotriene C_4 (LTC₄), $2 \mu g k g^{-1}$; two with LTD₄, $2 \mu g k g^{-1}$); vertical lines indicate s.d. (b) Incubation of blood from a LTC₄-and a LTD₄-injected rat with anti-human tissue-type plasminogen activator (t-PA) IgG normalizes the decreased dilute blood clot lysis times. Blood was obtained from rats one minute after the i.v. injection of leukotriene C_4 (O) or D_4 (\blacksquare), both at a dose of $2 \mu g k g^{-1}$.

receptor on endothelial cells, binding to this receptor being sensitive to inhibition by FPL 55712. In cultured bovine endothelial cells, an LTC₄ receptor with

 $K_D = 6.8 \,\mathrm{nM}$ has been described (Chau et al., 1986). The dose-response curve obtained in our system is compatible with the presence of a similar receptor for LTC4 and LTD4 on rat vascular endothelial cells in vivo. Our data, however, cannot exclude the (quantitative) conversion of LTC₄ into LTD₄ during passage through the hindleg vascular bed, the t-PA release response being then due to activation of an LTD₄receptor. Rats are indeed able to metabolize LTC4 into LTD₄ efficiently (Denzlinger et al., 1985). To decide if a similar conversion is of importance in our experimental system, we will have to await the availability of compounds interfering with the said conversion, or of receptor antagonists specific for LTD₄, rather than LTC₄ (Cheng, 1986; Lee et al., 1984; Musser et al., 1986).

The PA released by leukotrienes proved to be tissuetype PA, as demonstrated by the dependence of its activity on soluble fibrin, by the quenching of its activity by anti-human t-PA antibodies, and by its molecular weight, which was similar to that of cell culture-derived rat and human t-PA, but different from urokinase. Paf-acether and a variety of other compounds also induce the release exclusively of t-PA from perfused rat hindlegs (Emeis, 1983; Emeis & Kluft, 1985) and pig ears (Klöcking et al., 1984). Release of another type of PA, e.g. urokinase, has so far not been observed. As endothelial cells are the only cells in hindlegs to contain t-PA, the induced release of t-PA must be due to release of t-PA from vascular endothelial cells. In a previous paper (Emeis & Kluft, 1985) we showed that lipoxygenase inhibitors (and diethylcarbamazine, a putative peptidoleukotriene synthesis inhibitor, Bach & Brashler, 1986) inhibited Paf-induced t-PA release. As shown by others, in perfused rat lung (Voelkel et al., 1982) and heart (Piper & Stewart, 1986) Paf-acether does indeed cause increased leukotriene concentrations in the perfusate, the cellular origin of which is not known. The maximal amount of t-PA that could be released by LTC4 or LTD₄ (about 1 iu ml⁻¹) was, however, less than the amount released by 20 nm Paf-acether (about 3 iu ml⁻¹). Also, in contrast to leukotriene-induced release, Paf-acether-induced t-PA release was not inhibited by FPL 55712. Together these two observations suggest that Paf-acether does not induce t-PA release exclusively by inducing the vascular synthesis and release of leukotrienes, which then cause endothelial cells to release t-PA.

The present study suggests that the effects on t-PA release of the lipoxygenase inhibitors and of diethyl-carbamazine cannot be explained by decreased peptidoleukotriene release from the vessel wall. Whether other products of a lipoxygenase pathway (e.g. hydroxy-eicosatetraenoic acids or hydroxy-linoleic acid) or a mono-oxygenase pathway are involved in t-PA release, remains to be determined, although the

data make a major role of 5-HETE unlikely. Neither can we exclude that leukotrienes synthesized intracellularly behave differently from exogenously supplied leukotrienes. However, a recent study on the effects of lipoxygenase inhibitors cautions against aspecific inhibitory effects of these compounds on secretion (Razin et al., 1984).

The observation that intravenous injection of LTC₄ or LTD₄ also induced acute release of t-PA, as evidenced by decreased dilute blood clot lysis times, shows that the induction of t-PA release *ex vivo* in a perfused vascular bed is not an artifact induced by the experimental procedure, but that leukotriene-induced t-PA release may be of physiological significance.

In perfused hindlegs, prostaglandins E_1 and E_2 and prostacyclin were unable to induce t-PA release, in agreement with previous negative results on the induction of PA-release by prostacyclin (Nakajima, 1983) and prostaglandins (Markwardt & Klöcking, 1978) in perfused ears of the pig. However, Hussaini & Moore (1985) demonstrated that in rats *in vivo* prostacyclin (and its metabolite 6-keto-PGE₁) induced increased fibrinolytic activity. Maximally increased activity was

found at 30-60 min after injection, suggesting that the observed induction of increased fibrinolytic activity by cyclo-oxygenase products may proceed by a pathway different from acute t-PA release (as induced by e.g. leukotrienes) which generally peaks at one min after injection.

Other mechanisms that might be involved in prostacyclin-induced increased fibrinolytic activity (for discussion, see Emeis, 1987b) are now under investigation. Whether the peptidoleukotriene-induced release of t-PA from endothelial cells is of (patho) physiological significance in processes involving increased leukotriene production also remains to be determined.

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