



# Modulation of calcium channel currents by arachidonic acid in single smooth muscle cells from vas deferens of the guinea-pig

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**1** Effects of arachidonic acid (AA) on voltage-dependent Ca channel currents were investigated by whole-cell-clamp methods in single smooth muscle cells freshly isolated from vas deferens of the guinea-pig.

**2** Ca channel current was decreased by application of 1–30  $\mu\text{M}$  AA in a concentration-dependent manner. When  $\text{Ca}^{2+}$  or  $\text{Ba}^{2+}$  was the charge carrier, Ca channel current ( $I_{\text{Ca}}$  or  $I_{\text{Ba}}$ ) was reduced by AA to a similar extent ( $\text{IC}_{50}$  = 10 and 6  $\mu\text{M}$ , respectively). Addition of 15 mM BAPTA to the pipette solution did not affect the reduction of  $I_{\text{Ba}}$  by 10  $\mu\text{M}$  AA.

**3** The effect of AA on  $I_{\text{Ba}}$  was not prevented by internal application of 1 mM nordihydroguaiaretic acid (NDGA) and 1 mM indomethacin (Indo). When the pipette solution contained 0.1 mM guanosine-5'-triphosphate (GTP),  $I_{\text{Ba}}$  was decreased slightly but significantly by application of 30  $\mu\text{M}$  prostaglandin  $\text{F}_{2\alpha}$  ( $\text{PGF}_{2\alpha}$ ) but not by  $\text{PGE}_2$ . This effect of  $\text{PGF}_{2\alpha}$  was irreversible or not observed when the pipette solution contained 0.3 mM guanosine-5'-(3-thiotriphosphate) ( $\text{GTP}\gamma\text{S}$ ) or both GTP or guanosine-5'-O-(2-thiodiphosphate) ( $\text{GDP}\beta\text{S}$ ), respectively.

**4** External application of 100 units  $\text{ml}^{-1}$  superoxide dismutase slightly but significantly attenuated the inhibition of  $I_{\text{Ba}}$  by 1–30  $\mu\text{M}$  AA. Intracellular application of 1 mM  $\text{GDP}\beta\text{S}$  or 0.3 mM  $\text{GTP}\gamma\text{S}$  did not significantly change the effect of AA. Intracellular application of 0.1 mM 1-(5-isoquinolinesulphonyl)-2-methylepiperazine (H-7) also did not change the effect of AA.

**5** These results indicate that the decrease in Ca channel currents in vas deferens smooth muscle cells is mainly due to AA itself, as opposed to its metabolites. The effect of AA may be due to AA itself, as opposed to its metabolites. The effect of AA may be due to its direct action on Ca channels or membrane phospholipids, but may not be mediated by activation of GTP binding proteins or protein kinase C. The inhibition of Ca channel current by AA may be partly induced by superoxide radicals derived from AA oxidation.  $\text{PGF}_{2\alpha}$  also reduces Ca channel currents but probably by a separate mechanism via activation of a GTP binding protein.

**Keywords:** Ca channel; arachidonic acid; smooth muscle; vas deferens; superoxide; prostaglandin.

## Introduction

Arachidonic acid (AA) is a major component of cell membrane lipids and is mainly released by activation of phospholipase  $\text{A}_2$ . A number of AA metabolites, acting through cyclo-oxygenase and lipoxygenase pathways (see review by Needleman *et al.*, 1986) mediate a variety of cell signalling events under both physiological and pathological conditions. It has been reported that AA *per se* and/or its metabolites can modulate activities of several kinds of ionic currents including voltage-dependent Ca channels (Ordway *et al.*, 1991).  $\text{Ca}^{2+}$  influx through voltage-dependent Ca channels plays a central role in cellular signal transduction in various types of cells. In smooth muscle cells, activation of Ca channels is essential for action potential generation, and triggers  $\text{Ca}^{2+}$  release from intracellular  $\text{Ca}^{2+}$  stores, to induce contractions. Modulation of Ca channel activity by transmitters, hormones and autacoids has therefore been studied extensively (see review by McDonald *et al.*, 1994).

The inhibition of Ca channel activity by AA and/or its metabolites has been described in various types of cells, including sympathetic neurones (Ikeda, 1992), cultured ciliary ganglion cells (Khurana & Bennett, 1993), hippocampal CA1 neurones (Keyser & Alger, 1990), intestinal smooth muscle cells (Shimada & Somlyo, 1992) and cultured vascular smooth muscle cells (Serebryakov *et al.*, 1994). In some of these cell types, externally applied AA or prostaglandins reduce Ca channel currents directly or via separate signal transduction pathways. In single smooth muscle cells from the portal vein (Loirand *et al.*, 1990), however, Ca channel currents were not

affected by AA. On the other hand, AA increases the Ca current in rat pituitary  $\text{GH}_3/\text{B}_6$  cells (Vacher *et al.*, 1989; 1992) and ventricular myocytes of the guinea-pig (Huang *et al.*, 1992). Thus the effect of AA on  $\text{Ca}^{2+}$  channels varies widely.

Regulation of  $\text{Ca}^{2+}$ -activated  $\text{K}^+$  channels in smooth muscle cells by AA, its metabolites or other fatty acids has been extensively studied (Bregestovski *et al.*, 1988; Kirber *et al.*, 1992; Gebremedhin *et al.*, 1992; Hu & Kim, 1993). However, effects of AA on  $\text{Ca}^{2+}$  channel activity in smooth muscles has received less attention. The present study evaluated the possibility that AA and/or its metabolites are involved in regulation of Ca channel activity in smooth muscle cells of vas deferens, since prostaglandins play significant physiological roles in this tissue including the regulation of excitatory transmitter release from sympathetic nerve endings (Ambache & Zar, 1970) and contraction induced by sympathomimetics (Clegg, 1966) (see review by Horton, 1969).

## Methods

### Cell isolation

Single smooth muscle cells were enzymatically isolated from the vas deferens of the guinea-pig. The procedures of cell isolation were the same as described previously (Imaizumi *et al.*, 1991). A few drops of cell suspension were placed in a recording chamber (0.5 ml) mounted on the stage of a phase contrast microscope (Nikon TMD). Cells were continuously perfused with a HEPES buffered solution (see solutions) at 5  $\text{ml min}^{-1}$ . Only relaxed cells which had lengths over 100  $\mu\text{m}$  were used for electrical recording.

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## Solutions

HEPES buffered solution (standard HEPES solution) having the following composition was used for electrical recordings as the external solution (mM): NaCl 137, KCl 5.9,  $\text{CaCl}_2$  2.2,  $\text{MgCl}_2$  1.2, glucose 14, HEPES 10. The pH was adjusted to 7.2 with NaOH. When the  $\text{Ba}^{2+}$  current was recorded  $\text{Ca}^{2+}$  in standard HEPES solution was replaced by equimolar  $\text{Ba}^{2+}$  (Ba solution).

The pipette-filling solution (pipette solution) contained (mM): CsCl 140,  $\text{MgCl}_2$  4, ATP- $\text{Na}_2$  4, EGTA 5 and HEPES 10. The pH was adjusted to 7.2 with KOH. In some experiments, the pCa of the pipette solution was regulated by adding  $\text{CaCl}_2$  at a selected concentration. The pCa of the solution was adjusted to a required value with Ca-EGTA buffer (5 mM EGTA and adequate concentrations of  $\text{CaCl}_2$ ) according to the methods used by Benham *et al.* (1986). Moreover, in some experiments, 15 mM, 1,2-bis(2-aminophenoxy)ethane-*N,N,N',N'*-tetraacetic acid (BAPTA) was added to the pipette solution. When the pipette solution contained only 5 mM EGTA or 5 mM EGTA plus 15 mM BAPTA, the pCa of the solution is >9.0, respectively, assuming contamination with  $\text{Ca}^{2+}$  as  $10 \mu\text{M}$ . When effects of a drug were tested, the drug was applied externally by an exchange of perfusion solution or internally by adding to the pipette solution. When internally applied, the effects of the drug reached a steady level in 5–10 min after rupture of the patch membrane, and measurements were taken.

## Electrical recording and data analysis

Whole cell voltage clamp was applied by the method originally introduced by Hamill *et al.* (1981). EPC-7 (List, Germany) and CEZ-2200 (Nihon Kohden, Japan) amplifiers were used. The resistance of the pipette ranged from 2 to 5 M $\Omega$  when filled with the pipette solution. The seal resistance formed between cell membrane and the tip was approximately 30 G $\Omega$ . Series resistance was between 4–8 M $\Omega$  and was partly compensated. All electrophysiological measurements were made at room temperature ( $23 \pm 2^\circ\text{C}$ ).

Data were stored and analysed by menu-driven software (Robinson & Giles, 1986) as previously described (Imaizumi *et al.*, 1990). Pooled data are presented as mean  $\pm$  s.e.mean. Statistical significance was determined by Student's *t* test.

## Drugs

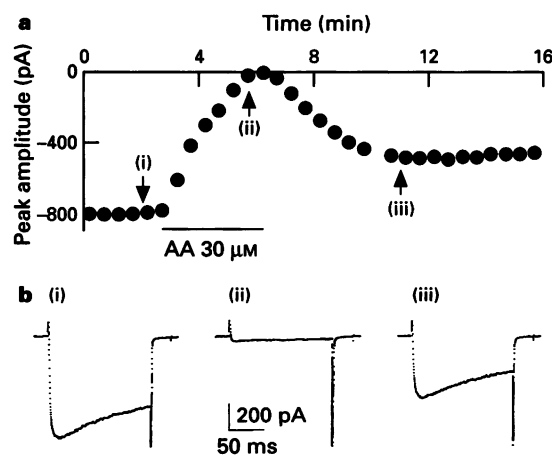
Arachidonic acid (AA), prostaglandin  $\text{E}_2$  ( $\text{PGE}_2$ ), and superoxide dismutase (SOD) were obtained from Funakoshi (Tokyo, Japan). Bovine serum albumin (MILES, Fraction V) and 1-(5-isoquinolinesulphonyl)-2-methylpiperazine (H-7) were from Seikagaku Kogyo (Tokyo, Japan). Collagenase was from Yakult (Tokyo, Japan) or Amano (Aichi, Japan). Trypsin inhibitor type II-O, guanosine-5'-O-(2-thiodiphosphate) (GDP $\beta\text{S}$ ), guanosine-5'-O-(3-thiotriphosphate) (GTP $\gamma\text{S}$ ), nordihydroguaiaretic acid (NDGA), indomethacin (Indo) and prostaglandin  $\text{F}_{2\alpha}$  ( $\text{PGF}_2$ ) were purchased from Sigma Co. Ltd. (St. Louis, U.S.A.). Ethyleneglycol-bis(aminoethyl)-*N,N,N',N'*-tetraacetic acid (EGTA) and 1,2-bis(2-aminophenoxy) ethane-*N,N,N',N'*-tetraacetic acid (BAPTA) were from Dojin Kagaku (Kumamoto, Japan). Collagenase/dispase was from Boehringer Mannheim (Mannheim, Germany). NDGA and Indo were dissolved at a concentration of 1 M in ethanol and used as the stock solutions. When 1 mM NDGA or Indo was added to the pipette solution, the solution contained 0.1% ethanol. The stock solutions of AA and prostaglandins at concentrations of 0.1 or 1 M in dimethyl sulphoxide (DMSO) were stored in ampoules filled with  $\text{N}_2$  gas at  $-20^\circ\text{C}$  or  $-80^\circ\text{C}$ . The final concentration of DMSO was 0.1% or less. Other drugs and agents were dissolved in water.

## Results

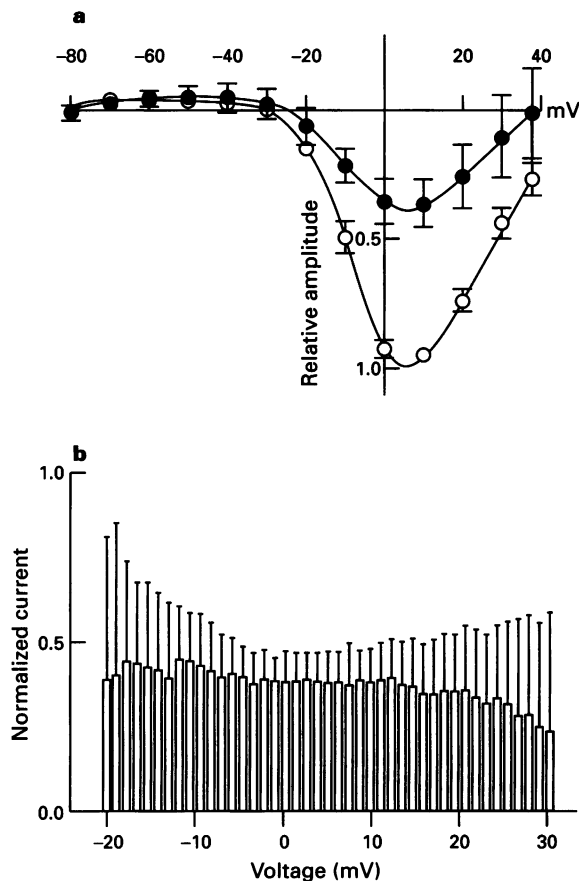
### Effect of AA on Ca channel currents

Effects of  $30 \mu\text{M}$  AA on Ba current through Ca channels ( $I_{\text{Ba}}$ ) were examined in single vas deferens smooth muscle cells in a solution containing 2.2 mM  $\text{Ba}^{2+}$  (Figure 1). Inactivation of L-type Ca channels following an elevation of intracellular  $\text{Ca}^{2+}$  concentration has been demonstrated in various types of cells including vas deferens smooth muscle cells (Nakazawa *et al.*, 1988; Imaizumi *et al.*, 1991). In most of the experiments in the present study, therefore,  $\text{Ba}^{2+}$  was used as the charge carrier instead of  $\text{Ca}^{2+}$ .  $I_{\text{Ba}}$  was elicited by depolarization from a holding potential of  $-60 \text{ mV}$  to a test potential of  $0 \text{ mV}$  for 150 ms at 0.067 Hz. Application of  $30 \mu\text{M}$  AA reduced the peak  $I_{\text{Ba}}$  amplitude, although the onset was slow ( $\sim 20 \text{ s}$ ).  $I_{\text{Ba}}$  was almost abolished within 3–4 min from the start of the application (Figure 1a). The slow onset was not due to the solution exchange rate, since application of 0.1 mM  $\text{Ca}^{2+}$  abolished  $I_{\text{Ba}}$  within 5 s under the same conditions. When a lower concentration of AA was applied, the onset time was even longer. After washout of AA,  $I_{\text{Ba}}$  recovered partially. The failure of  $I_{\text{Ba}}$  to return to the control after washout of AA may be, at least in part, due to 'run-down of  $I_{\text{Ba}}$ ' which was observed consistently. The rates of  $I_{\text{Ca}}$  and  $I_{\text{Ba}}$  run-down for 10 min were  $37.0 \pm 5.9\%$  ( $n=19$ ) and  $33.3 \pm 4.7\%$  ( $n=27$ ,  $P<0.05$  vs.  $I_{\text{Ca}}$ ), respectively. To resolve effects of AA and other agents on Ca channel currents from the run-down, the time-course of changes in peak amplitude of  $I_{\text{Ba}}$  or  $I_{\text{Ca}}$  just prior to the addition of an agent was fitted by a straight line and extrapolated to the period after the addition of the agent. The difference between the line and the recorded amplitude at each time was taken as the effect of the agent. Bath application of 0.1% DMSO, the solvent of AA, *per se* did not affect  $I_{\text{Ba}}$  amplitude significantly ( $95.5 \pm 2.6\%$ ,  $n=5$ ,  $P>0.05$  vs. control).

To examine the voltage-dependence of AA-induced block of  $I_{\text{Ba}}$ , the current-voltage relationship of  $I_{\text{Ba}}$  was obtained using a ramp command waveform in the absence and presence of  $10 \mu\text{M}$  AA. The ramp was applied for 100 ms with a depolarizing rate of  $1.2 \text{ V s}^{-1}$  from  $-80$  to  $+40 \text{ mV}$  once every 10 s (Figure 2a). The peak amplitude of  $I_{\text{Ba}}$  developed at approxi-



**Figure 1** Effects of  $30 \mu\text{M}$  arachidonic acid (AA) on  $I_{\text{Ba}}$  through Ca channels were examined in single smooth muscle cell isolated from vas deferens of the guinea-pig.  $I_{\text{Ba}}$  was elicited by 150 ms depolarization from  $-60$  to  $0 \text{ mV}$  at  $0.067 \text{ Hz}$ . (a) Time course of change in peak amplitude of  $I_{\text{Ba}}$ . AA ( $30 \mu\text{M}$ ) was applied during the period indicated by a horizontal bar.  $I_{\text{Ba}}$  was almost abolished, and then recovered by about 65% following washout of AA. Time 0 min indicates the start of  $I_{\text{Ba}}$  recording under the conditions where potassium current was blocked by internal diffusion of Cs from the recording pipette for about 3 min after rupturing the patch membrane. (b) Current traces which were recorded at the times corresponding indicated by (i), (ii) and (iii) in (a).

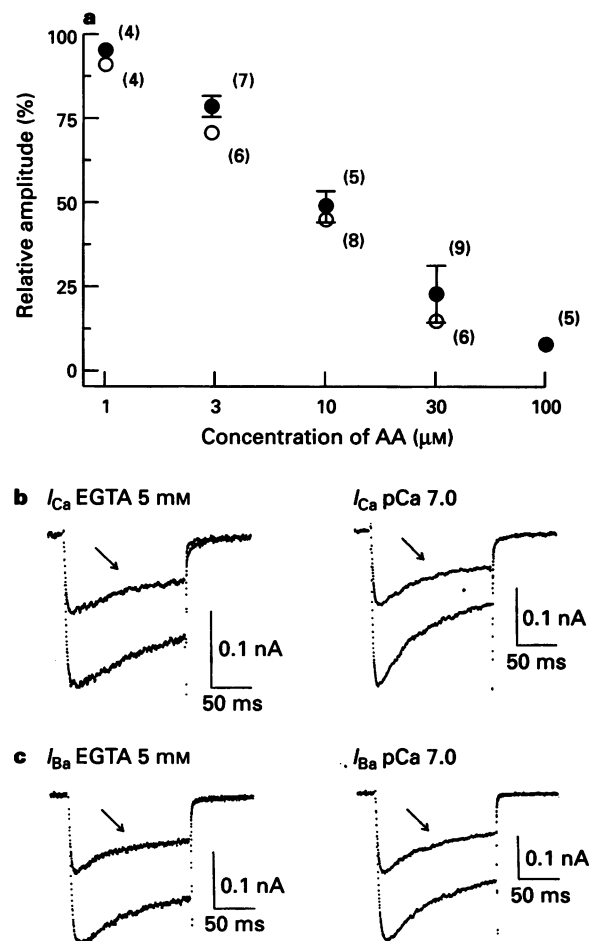


**Figure 2** Current-voltage relationship of  $I_{Ba}$  through Ca channels obtained using ramp command waveforms. The ramp depolarized the cell from  $-80$  mV to  $+40$  mV at the rate of  $1.2$  V s $^{-1}$ , once every  $10$  s. The solid lines and circles indicate the average amplitude of  $I_{Ba}$  from 4 cells. Values are mean  $\pm$  s.e.mean:  $I_{Ba}$  in the absence ( $\circ$ ) and presence ( $\bullet$ ) of  $10$   $\mu$ M arachidonic acid (AA). (b) The voltage-dependence of the inhibition of  $I_{Ba}$  by  $10$   $\mu$ M AA was examined by replotting the data shown in (a) after normalizing the  $I_{Ba}$  amplitude in the presence of AA to that in the control. Note that normalized currents at any voltage are not significantly different from one another ( $P < 0.05$ ,  $n = 4$ ).

mately  $+5$  mV in both the absence ( $+4.3 \pm 0.6$  mV;  $370 \pm 55$  pA,  $n = 4$ ) or the presence of  $10$   $\mu$ M AA ( $+4.9 \pm 1.3$  mV,  $166 \pm 21$  pA,  $n = 4$ ). The amplitude of  $I_{Ba}$  in the presence of  $10$   $\mu$ M AA relative to that before AA application at each potential is shown in Figure 2b. These results indicate that the AA-induced block of  $I_{Ba}$  is not dependent on test potentials in the range of  $-20$  to  $+30$  mV.

Figure 3a shows the concentration-dependent block of  $I_{Ba}$  by AA in the concentration-range of  $1$  and  $100$   $\mu$ M.  $I_{Ba}$  was elicited by depolarization from  $-60$  to  $0$  mV for  $150$  ms every  $15$  s. A  $50\%$  decrease in peak  $I_{Ba}$  was obtained with  $6$   $\mu$ M AA ( $IC_{50}$ ). Block of Ca current ( $I_{Ca}$ ) recorded under the same conditions was also observed when a similar concentration-range of AA ( $1$ – $100$   $\mu$ M) was applied ( $IC_{50} = 10$   $\mu$ M, Figure 3a).

To examine the contribution of  $Ca^{2+}$ -dependent inactivation of  $I_{Ca}$  or  $I_{Ba}$  to AA-induced inhibition, the concentration of  $Ca^{2+}$  in the pipette solution was changed. When selected concentrations of  $Ca^{2+}$  were added to the pipette solution containing  $5$  mM EGTA to keep pCa at  $7.0$  or  $7.5$ ,  $I_{Ca}$  (elicited by depolarization from  $-60$  to  $0$  mV, see Figure 3b) was reduced to  $51.9 \pm 5.9\%$  of the control by  $10$   $\mu$ M AA ( $n = 4$ ). Without the addition of  $Ca^{2+}$  to the pipette solution (pCa =  $\sim 9.5$ , assuming contaminated  $Ca^{2+}$  of  $20$   $\mu$ M), the  $I_{Ca}$  was reduced to  $48.3 \pm 4.4\%$  by  $10$   $\mu$ M AA ( $n = 6$ ,  $P > 0.05$  vs. pCa  $7.0$  or  $7.5$ ). There was a tendency for the decay of  $I_{Ca}$



**Figure 3** Concentration-dependence of arachidonic acid (AA)-induced block of  $I_{Ba}$  or  $I_{Ca}$  (a) and influence of internal  $Ca^{2+}$  (b). Experiments were performed using a similar protocol to that shown in Figure 1. (a) The relative amplitude of  $I_{Ba}$  after application of AA was corrected for 'run-down' (see Methods). The pipette solution contained  $5$  mM EGTA and no additional  $Ca^{2+}$ . ( $\bullet$ ) Peak amplitude of  $I_{Ca}$  recorded at  $0$  mV in a standard solution containing  $2.2$  mM  $CaCl_2$ ; ( $\circ$ )  $I_{Ba}$  recorded in Ba solution containing  $2.2$  mM  $BaCl_2$ . Concentrations of AA required for half inhibition of  $I_{Ca}$  or  $I_{Ba}$  ( $IC_{50}$ s) are about  $10$  and  $6$   $\mu$ M, respectively. The numbers in parentheses denote the number of cells studied. There was no statistically significant difference between  $I_{Ca}$  and  $I_{Ba}$  at any concentrations of AA examined ( $P > 0.05$ ). (b and c) Original traces of  $I_{Ca}$  (b) and  $I_{Ba}$  (c) recorded using pipette solutions containing  $5$  mM EGTA and no additional  $Ca^{2+}$  (left) and at pCa  $7.0$  (right), respectively. Arrows indicate  $I_{Ca}$  (b) or  $I_{Ba}$  (c) in the presence of  $10$   $\mu$ M AA. Note that the decay of  $I_{Ca}$  was faster when the pipette solution containing pCa  $7.0$  solution (b, right) than when  $5$  mM EGTA but no additional  $Ca^{2+}$  was included (b, left, pCa =  $\sim 9.5$ ). The decay was not significantly affected by application of AA (see text).

during the depolarization to be larger when the  $Ca^{2+}$  concentration in the pipette solution was higher, and was also larger than that of  $I_{Ba}$  when the pipette solution was the same (Figure 3b and c). The ratio of  $I_{Ca}$  amplitude at the end of pulse versus the amplitude at the peak (end/peak ratio of  $I_{Ca}$ ) was  $0.62 \pm 0.05$  ( $n = 4$ ) and that of  $I_{Ba}$  was  $0.75 \pm 0.04$  ( $n = 4$ ,  $P < 0.05$  vs.  $I_{Ca}$ ). Application of  $10$   $\mu$ M AA did not affect either the end/peak ratio of  $I_{Ca}$  ( $0.60 \pm 0.03$ ,  $n = 4$ ,  $P > 0.05$  vs.  $0.62 \pm 0.05$ ) or that of  $I_{Ba}$  ( $0.72 \pm 0.03$ ,  $n = 4$ ,  $P > 0.05$  vs.  $0.75 \pm 0.04$ ) under these conditions. When the pCa of the pipette solution was  $7.0$  or  $7.5$ , the end/peak ratio of  $I_{Ca}$  was  $0.59 \pm 0.06$  ( $n = 4$ ,  $P > 0.05$  vs.  $0.62 \pm 0.05$ ) and  $0.53 \pm 0.02$  ( $n = 4$ ,  $P > 0.05$  vs.  $0.59 \pm 0.06$ ) in the absence or presence of  $10$   $\mu$ M AA, respectively. Therefore, the decay of  $I_{Ca}$  during a depolarization was slightly but not significantly increased by

10  $\mu\text{M}$  AA. Even when 15 mM BAPTA was added to the pipette solution,  $I_{\text{Ba}}$  was reduced to  $47.3 \pm 9.2\%$  by 10  $\mu\text{M}$  AA ( $n=4$ ,  $P>0.05$  vs.  $44.5 \pm 2.4\%$  without addition of  $\text{Ca}^{2+}$  to the pipette solution,  $n=8$ ). Taken together, the results strongly suggest that an intracellular  $\text{Ca}^{2+}$ -dependent mechanism is not substantially involved in AA-induced block of Ca channels.

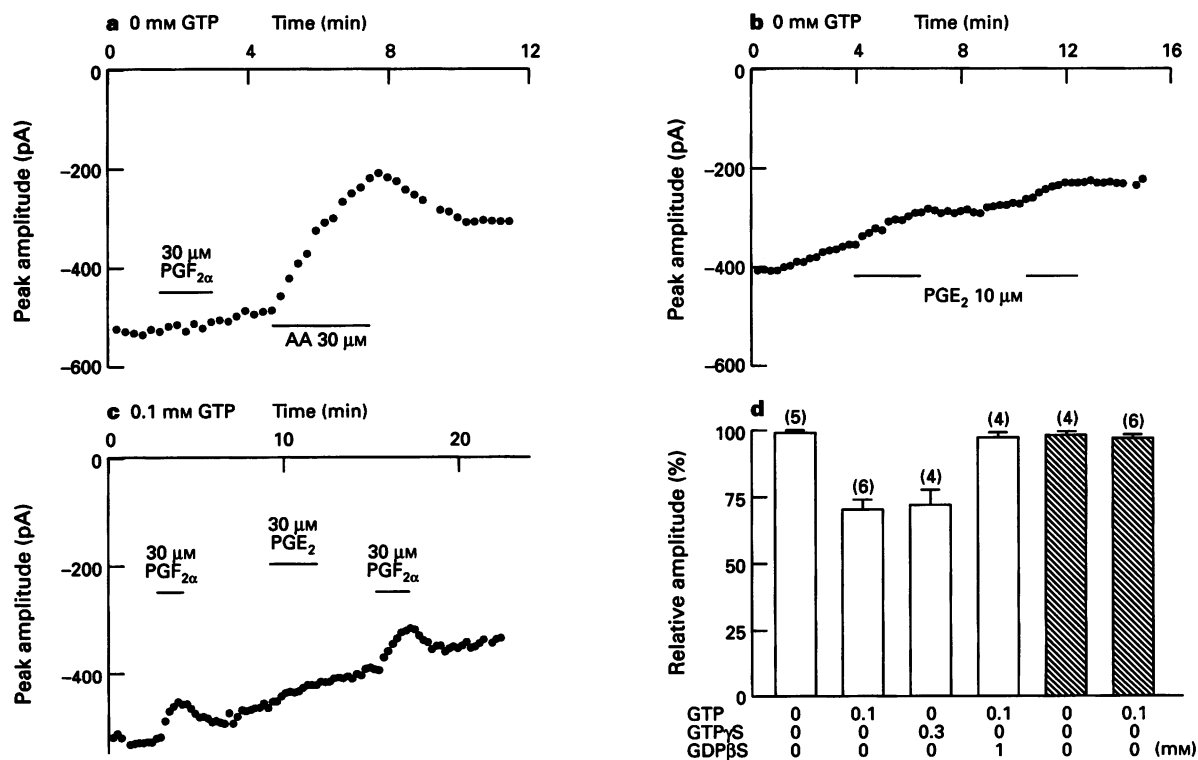
#### AA metabolites and AA-induced block of Ca channels

The possibility that AA affects Ca channels after being metabolized into prostaglandins, leukotrienes, etc. through cyclo-oxygenase and lipoxygenase pathways (AA cascade) was examined. The effects of indomethacin (Indo), a cyclo-oxygenase inhibitor, and NDGA, a lipoxygenase inhibitor, on the AA-induced inhibition of  $I_{\text{Ba}}$  were tested. When 10  $\mu\text{M}$  Indo or 10  $\mu\text{M}$  NDGA was added to the bathing solution,  $I_{\text{Ba}}$  at 0 mV was reduced by more than 30% ( $n=3$  for each). Direct block of Ca current by these agents has been suggested in other preparations (Burch *et al.*, 1983; Korn & Horn, 1990). When the pipette solution contained 1 mM Indo or NDGA, the  $I_{\text{Ba}}$  amplitude at 0 mV was  $370 \pm 55$  pA ( $n=4$ ) and  $345 \pm 49$  pA ( $n=7$ ), respectively ( $P>0.05$  vs. control  $343 \pm 70$  pA,  $n=5$ , 0.1% ethanol). Intracellular application of 0.1% ethanol, the solvent of Indo and NDGA, *per se* did not change significantly either the rate of run-down ( $28.2 \pm 6.7\%$  during 10 min,  $n=5$ ) or the inhibition of  $I_{\text{Ba}}$  by 10  $\mu\text{M}$  AA (a decrease to  $46.4 \pm 4.2\%$  of the control,  $n=5$ ,  $P>0.05$  vs.  $44.5 \pm 2.4\%$ ). The run-down of  $I_{\text{Ba}}$  in the presence of Indo or NDGA in the pipette solution was  $34.8 \pm 9.7$  and  $33.8 \pm 10\%$  for 10 min, respectively ( $n=4$  and 7,  $P>0.05$  vs.  $28.2\%$ ). Therefore, we preferred to apply

1 mM Indo or 1 mM NDGA internally by addition to the pipette solution. After more than 5 min from the start of a recording, AA was applied. In our apparatus, it took less than 5 min for an applied low molecular chemical to diffuse to a substantial extent from the pipette solution into the cytosol, since internal application of 1 mM EGTA from a KCl-rich pipette solution markedly reduced Ca-dependent K current within 3 min after rupturing the patch membrane to establish the whole cell clamp configuration (not shown). The relative amplitude of  $I_{\text{Ba}}$  after application of 10  $\mu\text{M}$  AA in the presence of Indo or NDGA in a pipette solution averaged  $46.9 \pm 5.8\%$  ( $n=4$ ) and  $49.1 \pm 2.5\%$  ( $n=7$ ) of the control, respectively, and was not significantly different from that in their absence ( $44.5 \pm 2.4\%$ ;  $P>0.05$  vs. Indo or NDGA).

#### Effects of prostaglandins on Ca channel currents

Figure 4 shows effects of  $\text{PGF}_{2\alpha}$  and  $\text{PGE}_2$  on  $I_{\text{Ba}}$ . GTP-binding proteins are involved in signal transduction induced by various kinds of neurotransmitters, hormones or autacoids (see review by Gilman, 1987). In the absence of GTP in the pipette solution, external application of 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  did not significantly affect  $I_{\text{Ba}}$ , whereas 30  $\mu\text{M}$  AA reduced  $I_{\text{Ba}}$  by about 70% in the same cell (Figure 4a). Application of 10  $\mu\text{M}$   $\text{PGE}_2$  affected  $I_{\text{Ba}}$  slightly in the absence of GTP (Figure 4b). As summarized in Figure 4d, averaged values of relative  $I_{\text{Ba}}$  amplitude in the presence of  $\text{PGE}_2$  or  $\text{PGF}_{2\alpha}$  at a concentration of 30  $\mu\text{M}$  were not significantly different from those in the control. When the pipette solution contained 0.1 mM GTP, application of 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  reduced  $I_{\text{Ba}}$  by approximately 30%,



**Figure 4** Effects of prostaglandin  $\text{E}_2$  ( $\text{PGE}_2$ ) and  $\text{PGF}_{2\alpha}$  on  $I_{\text{Ba}}$  with or without intracellular application of GTP. When 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  (a) or 10  $\mu\text{M}$   $\text{PGE}_2$  (b) was applied externally without GTP in the pipette solution,  $I_{\text{Ba}}$  was not markedly reduced. In the same cell (a), 30  $\mu\text{M}$  AA reduced  $I_{\text{Ba}}$  by over 60%. On the other hand, in the presence of 0.1 mM GTP in the pipette solution, 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  significantly reduced  $I_{\text{Ba}}$ , but not 30  $\mu\text{M}$   $\text{PGE}_2$  (c).  $I_{\text{Ba}}$  was evoked by depolarization from -60 to 0 mV at 0.067 Hz. Summarized data describing the effects of 30  $\mu\text{M}$  prostaglandins on  $I_{\text{Ba}}$  with or without guanosine nucleotides are shown in (d): Open and hatched columns indicate the mean values of relative  $I_{\text{Ba}}$  amplitude after application of 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  or 30  $\mu\text{M}$   $\text{PGE}_2$ , respectively. The effects of 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  with GTP or  $\text{GTP}\gamma\text{S}$  in the pipette are statistically significant ( $P<0.05$ ) in comparison with that without GTP.  $\text{PGF}_{2\alpha}$  was not effective when the pipette solution contained both 0.1 mM GTP and 1 mM  $\text{GDP}\beta\text{S}$ . Numbers above column indicate number of cells examined. The relative amplitude of  $I_{\text{Ba}}$  after application of prostaglandin was corrected for 'run-down' as described in the text.

whereas 30  $\mu\text{M}$  PGE<sub>2</sub> had no significant effect in the same cell (Figure 4c). This effect of 30  $\mu\text{M}$  PGF<sub>2 $\alpha$</sub>  was almost completely removed by washout and was reproducible. Effects of GDP $\beta$ S and GTP $\gamma$ S, nonhydrolysable analogues of GDP and GTP, respectively, on the decrease in  $I_{\text{Ba}}$  by PGF<sub>2 $\alpha$</sub>  were also examined. The peak amplitude of  $I_{\text{Ba}}$  was not changed by internal application of 1 mM GDP $\beta$ S or 0.3 mM GTP $\gamma$ S. When the pipette solution contained both 1 mM GDP $\beta$ S and 0.1 mM GTP,  $I_{\text{Ba}}$  was not significantly affected by 30  $\mu\text{M}$  PGF<sub>2 $\alpha$</sub>  ( $n=4$ ,  $97.5 \pm 1.5\%$ ). The decrease in  $I_{\text{Ba}}$  by 30  $\mu\text{M}$  PGF<sub>2 $\alpha$</sub>  was irreversible in the presence of 0.3 mM GTP $\gamma$ S in the pipette solution; the relative amplitude was  $71.6 \pm 6.0\%$  of the control ( $n=4$ ). Pooled data are illustrated in Figure 4d.

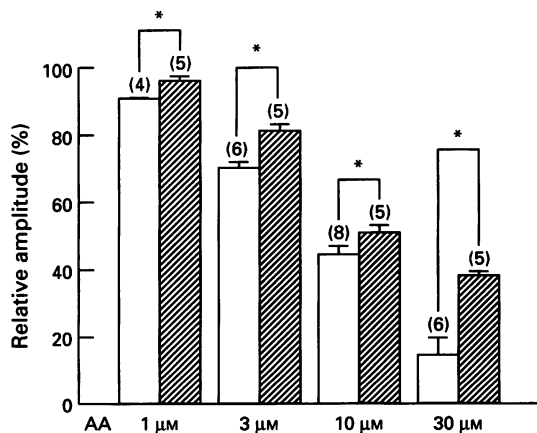
#### Peroxides of AA in Ca channel block

Free radicals generated by AA oxidation may contribute to AA-induced decrease in  $I_{\text{Ba}}$  in vas deferens smooth muscle cells, as has been reported in hippocampal CA1 neurones (Keyser & Alger, 1990). To prevent generation of free radicals, 100 units  $\text{ml}^{-1}$  superoxide dismutase (SOD) was added to the bathing solution. Application of this concentration of SOD did not affect  $I_{\text{Ba}}$  itself, but significantly attenuated the decrease in  $I_{\text{Ba}}$  by AA at all concentrations examined (1–30  $\mu\text{M}$ ,  $P < 0.05$ , Figure 5), whereas the attenuation was the largest when 30  $\mu\text{M}$  AA was applied.

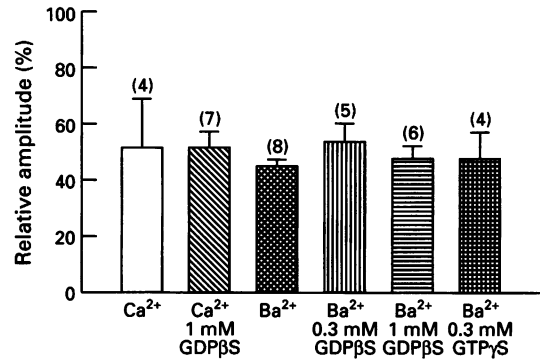
#### GTP-binding proteins and protein kinase C in AA-induced block of Ca<sup>2+</sup> channels

To determine whether the activation of GTP-binding protein is involved in AA-induced inhibition of  $I_{\text{Ba}}$  in vas deferens smooth muscle cells, GDP $\beta$ S or GTP $\gamma$ S was added to the pipette solution. The decrease in  $I_{\text{Ba}}$  by 10  $\mu\text{M}$  AA was not affected significantly by the presence of 1 mM GDP $\beta$ S or 0.3 mM GTP $\gamma$ S. Figure 6 shows summarized data of effects of GTP analogues on AA-induced decrease in  $I_{\text{Ba}}$  and  $I_{\text{Ca}}$ .

The possibility that activation of protein kinase C (PKC) mediates the AA-induced decrease in  $I_{\text{Ba}}$  was examined by use of H-7, which inhibits PKC as well as cyclic AMP- or cyclic GMP-dependent protein kinases (PKA and PKG) (Hidaka *et al.*, 1984). When H-7 at a concentration of 100  $\mu\text{M}$  was applied



**Figure 5** To examine the involvement of free radical generation in arachidonic acid (AA)-induced inhibition of  $I_{\text{Ba}}$ , 100 units  $\text{ml}^{-1}$  superoxide dismutase (SOD) was added to the external solution.  $I_{\text{Ba}}$  was evoked by depolarization from  $-60$  to  $0$  mV at  $0.067$  Hz. AA was added about 5 min after the start of SOD application. Open columns, control; hatched columns, SOD 100 units  $\text{ml}^{-1}$ . The numbers in parentheses denote the number of cells used. Concentrations of AA are shown below columns. The effect of AA on  $I_{\text{Ba}}$  was reduced in the presence of SOD. Although the attenuation of AA-induced decrease by SOD was statistically significant ( $P < 0.05$ ) at all concentrations of AA examined, the difference was most marked when 30  $\mu\text{M}$  AA was applied.



**Figure 6** Summarized data describing the effects of GTP or GDP analogues on arachidonic acid (AA)-induced inhibition of Ca channel current.  $I_{\text{Ba}}$  or  $I_{\text{Ca}}$  was evoked by depolarization from  $-60$  to  $0$  mV at  $0.067$  Hz. Ca<sup>2+</sup> or Ba<sup>2+</sup> below columns indicates current carrier. GDP $\beta$ S or GTP $\gamma$ S at the concentrations shown was added to the pipette solution. AA (10  $\mu\text{M}$ ) was added approximately 10 min after rupturing the patch membrane. The numbers in parentheses denote the number of cells studied.

internally  $I_{\text{Ba}}$  was reduced by 10  $\mu\text{M}$  AA to a similar extent to that observed in the absence of H-7 (control:  $44.5 \pm 2.4\%$ ,  $n=8$ ; H-7:  $38.6 \pm 4.9\%$ ,  $n=5$ ;  $P > 0.05$ ).

#### Discussion

Our results demonstrate that AA reduces voltage-dependent Ca channel current in smooth muscle cells isolated from the guinea-pig vas deferens. A similar inhibition of Ca current by AA has been observed in intestinal smooth muscle cells (Shimada & Somlyo, 1992). In portal vein smooth muscle cells, however, it has been shown that an addition of 1 mM AA to the pipette solution does not change the Ca current (Loirand *et al.*, 1990). Since the L-type Ca channel current is predominant in vas deferens smooth muscle cells under the conditions used in the present study (Imaizumi *et al.*, 1991), this inhibitory effect of AA may be mainly on L-type channels. The fact that the effect of AA did not depend on the potentials used for Ca channel activation may also support this. However, the possibility can be ruled out completely that T-type channel block was also partly involved in AA-induced decrease in Ca channel current in the present study.

When the charge carrier was either calcium or barium ions, comparable effects of AA on Ca channel current were observed. Moreover, the effect of AA was not changed when the Ca<sup>2+</sup> concentration in the pipette solution was changed in the pCa range of 7.0 and 10.0 by use of Ca-EGTA buffer, 5 mM EGTA or 15 mM BAPTA. The AA-induced decrease in  $I_{\text{Ba}}$  was, therefore, not modulated by the intracellular calcium concentration, although it is known that AA and its metabolites change Ca<sup>2+</sup> release from storage sites (Force *et al.*, 1990; Ling *et al.*, 1992; Maruyama, 1993). This suggests that the inactivation of Ca channels by intracellular Ca<sup>2+</sup> which is increased by Ca<sup>2+</sup>-influx and Ca<sup>2+</sup>-release from intracellular Ca storage sites is not involved in the mechanism of AA-induced decrease in Ca channel current. It may also suggest that the mechanism does not depend upon the activation of enzymes or proteins by an increase in intracellular Ca<sup>2+</sup> concentration.

In ciliary ganglion cells, leukotrienes synthesized from AA by lipoxygenase, are the second messengers responsible for AA-induced block of Ca channels (Khurana & Bennet, 1993). K channels coupled to muscarinic receptors in cardiac myocytes (Kurachi *et al.*, 1989; Kim *et al.*, 1989; Scherer *et al.*, 1993) and M channels in hippocampal neurones (Schweitzer *et al.*, 1990) are activated by AA via leukotriene production. It has been reported that PGE<sub>2</sub> can reduce Ca channel currents in rat sympathetic neuronal cells (Ikeda, 1992). A decrease of  $I_{\text{Ba}}$  induced by PGE<sub>1</sub> and PGE<sub>2</sub> has also been observed in cultured

smooth muscle cells of the rat thoracic aorta (Serebryakov *et al.*, 1994). In the present study, internal application of 1 mM Indo or NDGA from the pipette solution did not significantly affect the AA-induced decrease in  $I_{Ba}$ , implying that AA metabolites from the cyclo-oxygenase pathways may not be involved in this AA effect in vas deferens smooth muscle cells. Application of  $\text{PGF}_{2\alpha}$  in the presence of GTP in the pipette solution slightly but significantly reduced  $I_{Ba}$ , whereas that of  $\text{PGE}_2$  did not. The effect of  $\text{PGF}_{2\alpha}$  was not observed when the pipette solution did not include GTP or included both GTP and  $\text{GDP}\beta\text{S}$ . The  $\text{PGF}_{2\alpha}$ -induced inhibition of  $I_{Ba}$  may be mediated by activation of GTP-binding protein and, therefore, by a different mechanism from that for AA. It is worthy of note that the inhibition of  $I_{Ba}$  by 30  $\mu\text{M}$   $\text{PGF}_{2\alpha}$  (about 30% decrease) was far smaller than that of 30  $\mu\text{M}$  AA (about 75% decrease).

In CA1 neurones, the effect of AA on the Ca channel is mediated by activation of PKC and also by oxidation of the membrane surface by peroxide radicals derived from AA (Keyser & Alger, 1990). Since the decrease in  $I_{Ba}$  by AA was not changed by the internal application of 100  $\mu\text{M}$  H-7, it is unlikely that the activation of PKC is one of major signal transductions. Moreover, activation of PKA or PKG is unlikely to be involved in the mechanism based upon the non-specific inhibition of these kinases by H7 (Hidaka *et al.*, 1984). Application of 100 units  $\text{ml}^{-1}$  SOD slightly but significantly attenuated the decrease in  $I_{Ba}$  by 1–30  $\mu\text{M}$  AA. These findings suggest that generation of superoxides is one of the mechanisms for the inhibition of Ca channels by AA in vas deferens smooth muscle cells.

It has been suggested that AA directly inhibits Ca channels in intestinal smooth muscle cells (Shimada & Somlyo, 1992). This type of direct action has also been suggested for the mechanism of the AA-induced increase in large conductance Ca-dependent K channel (BK channel) activity in pulmonary smooth muscle cells (Kirber *et al.*, 1992). Since internal application of 0.3 mM  $\text{GTP}\gamma\text{S}$  or 1 mM  $\text{GDP}\beta\text{S}$  did not affect significantly the AA-induced decrease in  $I_{Ba}$  (Figure 6), activation of a GTP binding protein is unlikely to be involved in this AA effect, unlike the AA-induced regulation of the cardiac  $\text{K}^+$  channel (Kim *et al.*, 1989; Scherer & Breitwieser, 1990). One mechanism by which AA acts directly on Ca channel proteins or phospholipids, is by being incorporated into the membrane bilayer. In this case, the reversibility of  $I_{Ba}$  reduction by AA after washout should be minimal. It has been reported in intestinal smooth muscle cells that *cis*-unsaturated fatty acids, such as palmitoleic acid (16:1), oleic acid (18:1) and

linoleic acid (18:2), decrease  $I_{Ba}$  in a very similar manner to AA whereas myristic acid (14:0) and lauric acid (12:0) increase  $I_{Ba}$  and lenoleic acid (18:2, *trans*), myristoleic acid (14:1, *cis*) and palmitic acid (16:0) do not affect  $I_{Ba}$  (Shimada & Somlyo, 1992). This pattern of results suggests that the effect of AA is not due to simple physicochemical changes such as an increase in membrane lipid fluidity. Specific experiments of this type were not performed in the present study.

In our previous study (Imaizumi *et al.*, 1991), it was reported that  $\alpha$ -adrenoceptor stimulation by noradrenaline (NA) reduces the Ca channel current in vas deferens smooth muscle cells via two mechanisms; (1) Ca-dependent inactivation of Ca channels by Ca release from intracellular  $\text{Ca}^{2+}$  store following production of inositol trisphosphate and (2) Ca-independent and GTP binding protein-mediated inhibition of Ca channel activity. For some types of receptor, stimulation by transmitters, hormones or autacoids is transduced to at least two intracellular signals by activating both phospholipase  $\text{A}_2$  and C (Brinbaumer *et al.*, 1990). In some smooth muscles,  $\alpha$ -adrenoceptor stimulation results in activation of both phospholipases and thereby increases inositol turnover and AA release (Exton, 1988). Moreover, it has been reported that production of  $\text{PGE}$ - and  $\text{PGF}$ -like materials is decreased and increased, respectively, by  $\alpha$ -adrenoceptor stimulation in vas deferens (Borda *et al.*, 1983). Based upon the results in the present study, it is possible that a release of AA or  $\text{PGF}_{2\alpha}$  is involved in the NA-induced decrease in Ca channel current in vas deferens smooth muscle cells. If this mechanism can be proven, it would give a new insight into the functional significance of AA and prostaglandins as second messengers in neurotransmitter-induced regulation of Ca channels activity in smooth muscle cells. Further studies using a specific  $\text{PLA}_2$  inhibitor are planned.

In conclusion, L-type Ca channel activity is reversibly reduced by external application of 1–30  $\mu\text{M}$  AA in smooth muscle cells of the guinea-pig vas deferens. This decrease may not be mediated by activation of GTP binding proteins or PKC or by biosynthesis of lipoxygenase or cyclo-oxygenase products. However, in addition to the direct action of AA, a contribution of superoxide radicals derived from high concentrations of AA (> 10  $\mu\text{M}$ ) must still be considered.

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