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Short communication

P2Y receptor specific for diadenosine tetraphosphate in lung: selective inhibition by suramin, PPADS, Ip₅I, and not by MRS-2197

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Abstract

Extracellular dinucleotides, which act as signaling molecules in a variety of systems, may regulate fluid homeostasis in the human lung by activation of a specific P2Y receptor subtype. Previously, we presented evidence for a G protein-coupled P2Y receptor with high affinity for dinucleotides in both rat and human lung tissue. In a human bronchial epithelial cell line (HBE-1), diadenosine polyphosphates (Ap_nA, n=2 $^{-}$ 6) increase intracellular Ca²⁺. The aim of the present work was to find additional evidence that, in these cells, the receptors selectively activated by diadenosine polyphosphates are distinct from already known P2Y receptors, which are activated by the mononucleotides ATP or UTP. We tested antagonists suitable to classify P2Y receptor subtypes. The P2Y₁ receptor-selective antagonist 2'-deoxy- $^{-}$ 6-methyl adenosine 3',5'-diphosphate (MRS-2197) did not affect Ca²⁺ mobilization induced by diadenosine tetraphosphate (Ap₄A). However, suramin, pyridoxal phosphate-6-azo(benzene-2,4-disulfonic acid) (PPADS) and diinosine pentaphosphate (Ip₅I) inhibited the Ca²⁺ response by 96%, 92% and 32%, respectively. Moreover, these results were confirmed by assessing the specific binding of [3 H]Ap₄A to membranes from human and rat lung. Suramin (100 μ M), PPADS (400 μ M) and Ip₅I (200 μ M), reduced [3 H]Ap₄A binding in lung membrane preparations by 66%, 77% and 80%, respectively. The Ap₄A-induced Ca²⁺ response in HBE-1 cells was inhibited to a much greater extent by these antagonists than the ATP- or UTP-evoked Ca²⁺ rise. Thus, Ap₄A in lung epithelial cells also activates a still unidentified P2Y receptor that is specific for dinucleotides over mononucleotides.

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1. Introduction

P2 receptors, which are activated by the extracellular nucleotides ATP, UTP, ADP or UDP, play a crucial role in the regulation of a variety of cellular signaling processes. They are classified into two families: ligand-gated ion channels (P2X) and G protein-coupled receptors (P2Y), which frequently stimulate phospholipase C (Dubyak and el Moatassim, 1993). In lung physiology, chloride transport, secretion of mucin and stimulation of ciliary activity are regulated through P2Y₂ receptors located in the apical membrane of epithelial cells. P2Y₂ receptors are equipotently activated by ATP and UTP (Morse et al., 2001; Yamaya et al., 1996). UTP also activates the P2Y₄ receptor

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subtype and ATP the P2Y₁₁ receptor subtype, whereas the P2Y₁, P2Y₁₂ and P2Y₁₃ subtypes are potently activated by the nucleoside diphosphate ADP, and P2Y₆ by UDP (Ralevic and Burnstock, 1998).

In the last few years, P2-like receptors specific for diadenosine polyphosphates have been found in several tissues, such as brain, lung, heart and blood vessels (Blouse et al., 1998; Hohage et al., 1996; Laubinger and Reiser, 1999; Pintor and Miras-Portugal, 1995). Dinucleotides, like diadenosine tetraphosphate (Ap₄A) or diadenosine pentaphosphate (Ap₅A), are a novel class of relatively stable extracellular signaling nucleotides (Kisselev et al., 1998; Ogilvie et al., 1996). They are supposed to be also responsible for regulatory processes in the lung, such as mucociliary clearance, ion transport and control of fluid homeostasis. Extracellular nucleotides are of potential clinical use for the treatment of genetic defects, such as those in cystic fibrosis. In cystic fibrosis, the cystic fibrosis transmembrane con-

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ductance regulator (CFTR) has a molecular defect in the inbuilt Cl⁻ channels (Hwang et al., 1996; Olivier et al., 1996). Furthermore, diadenosine polyphosphates can cause vasodilation or vasoconstriction in blood vessels, according to the receptor type activated (Schlüter et al., 1994; Steinmetz et al., 2000). For this reason, receptors specific for diadenosine polyphosphates in lung are of special interest as therapeutic target in pathophysiological conditions with disturbed ion fluxes or hypertonicity. However, despite extensive efforts during the last decade, so far, convincing evidence for the existence of a distinct P2Y receptor subtype for diadenosine polyphosphates is still lacking (Lazarowski et al., 1995).

Recently, we identified receptor binding sites with high affinity for diadenosine polyphosphates both in lung tissue and in cell lines derived from the respiratory system. [3H]Ap₄A binding sites in rat and human lung were found to be coupled to G proteins and showed pharmacological characteristics different from those of P2X or P2Y2 receptors (Laubinger and Reiser, 1998, 1999; Laubinger et al., 1999). In human bronchial epithelial cells (HBE-1), we were able to show that besides the P2Y receptors already described (P2Y₂, P2Y₄ and P2Y₆) (Communi et al., 1999), there are also P2Y receptors which are activated by diadenosine polyphosphates (Laubinger et al., 2001). Although the characteristics of the Ca2+ rise evoked by Ap4A were different from those evoked by ATP or UTP, in those investigations, it was not possible to conclude unequivocally that a distinct receptor for diadenosine polyphosphates exists in these cells. Therefore, the goal of our present experiments was to extend previous studies of a P2Y receptor activated by diadenosine polyphosphates in lung, by using P2 receptor antagonists (Von Kügelgen and Wetter, 2000). Our results provide further evidence for the existence of a distinct P2Y receptor for diadenosine polyphosphates in lung.

2. Materials and methods

2.1. Materials

ATP, diadenosine tetraphosphate (Ap₄A), diinosine pentaphosphate (Ip₅I), UTP, suramin, Evans blue and pyridoxal phosphate-6-azo(benzene-2,4-disulfonic acid) (PPADS) were from Sigma. Fura-2 acetoxymethylester (Fura-2/AM) was from Alexis. Reactive blue 2 and 2'-deoxy-N6-methyl adenosine 3',5'-diphosphate (MRS-2197) were from RBI.

2.2. Cell culture and Ca²⁺ measurement

The HBE-1 cell line derived from human bronchial epithelial cells has been described in detail elsewhere (Yankaskas et al., 1993). Cells were cultured with 5% CO₂ at a temperature of 37 °C in medium containing Dulbecco's Modified Eagle's Medium/NUT MIX F12

(1:1) as described earlier (Laubinger et al., 2001). Cells were grown to 70–90% confluency and then subcultured.

HBE-1 cells were seeded onto glass coverslips and cultured for 5–6 days. Cells with 40–60% confluency were used for single-cell measurement of $[{\rm Ca}^{2^+}]_i$. Before measurement, cells were preincubated with 2 μ M Fura-2/acetoxymethylester in Na–HBS (HEPES-buffered saline; 145 mM NaCl, 5.4 mM KCl, 1.8 mM CaCl₂, 1 mM MgCl₂, 25 mM glucose, 20 mM HEPES/Tris pH 7.4) for 30 min at 37 °C. Fluorescence was recorded alternately at 340 and 380 nm excitation and 520 nm emission. Changes were monitored at 37 °C in a perfusion chamber on a fluorescence imaging system from TILL Photonics with a X40 immersion objective and a flow rate of 2 ml/min, as described earlier (Ub1 et al., 1998).

2.3. Binding of $\int_{0}^{3}H/Ap_{4}A$ to lung membranes

Membranes from rat or human lung were prepared as described earlier in detail (Laubinger and Reiser, 1998). The study using the human material was approved by the Ethics Committee of the University of Magdeburg and was done in accordance with the principles laid down in the Declaration of Helsinki. Binding of [³H]Ap₄A was measured by incubation of lung membranes (50 µg of protein) in incubation medium containing 25 mM HEPES, pH 7.4, 50 mM NaCl and 5 mM KCl for 35 min at 4 °C, as described before (Laubinger and Reiser, 1999). Unless stated otherwise, experiments were performed with triplicate determinations.

3. Results

In a previous investigation of the P2Y receptor-mediated increase of intracellular Ca²⁺ in human bronchial epithelial cells (HBE-1), we found evidence for the existence of a P2Y receptor subtype activated by Ap₄A which is different from the P2Y₂ receptor. It is known that the latter can also be activated by Ap₄A (Lazarowski et al., 1995). Fig. 1 compares the magnitude of the Ca2+ responses induced by the agonists ATP (10 μM), UTP (10 μM) or Ap₄A (100 μM) in the absence (control) or presence of antagonists. Both suramin and PPADS were very effective antagonists of the putative diadenosine polyphosphate receptor, with 96% inhibition for suramin and 92% inhibition for PPADS, respectively. The [Ca2+] i rise evoked by Ap4A was inhibited more than the Ca²⁺ rise evoked by ATP or UTP. In the presence of 100 µM suramin, the intracellular Ca²⁺ rise evoked by ATP or UTP was inhibited only by 38% and 45%, respectively, and in the presence of 400 µM PPADS, it was inhibited by 41% and 47%, respectively. Addition of MRS-2179, an antagonist which is reported to be selective for the P2Y₁ receptor subtype (Baurand et al., 2001), did not affect significantly the rise of intracellular Ca2+ evoked by Ap₄A, whereas the [Ca²⁺]_i rise caused by ATP or UTP was moderately decreased, by 28% and 16%, respectively. Ip₅I,

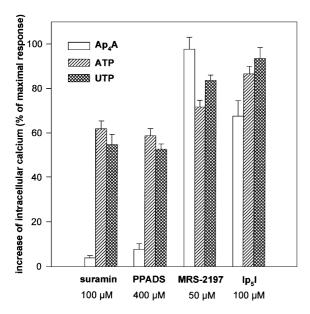


Fig. 1. P2 receptor antagonists block intracellular Ca^{2^+} rise in HBE-1 cells evoked by Ap_4A , ATP or UTP. HBE-1 cells were treated in absence or presence of suramin, PPADS, MRS-2179 or Ip_5I for 30 min at 37 °C and then stimulated for 1 min with 100 μ M Ap_4A (white bar), 10 μ M ATP (hatched bar) or 10 μ M UTP (checked bar). Cells were superfused with buffer (control) or antagonists during Ca^{2^+} measurement. Influence of the agonists is given as percentage of the maximal response induced by the respective nucleotides in the absence of antagonist (F_{340}/F_{380}) of the maximal response was 0.837 ± 0.130 , 1.413 ± 0.234 and 1.560 ± 0.154 for stimulation of the cells with Ap_4A , ATP and UTP, respectively). Data are from single cell Ca^{2^+} recordings and represent the mean \pm S.E. for at least 50 cells for each value.

a dinucleotide described to be a selective antagonist for some receptors activated by diadenosine polyphosphates (Pereira et al., 2000), diminished the Ca^{2^+} increase evoked by Ap₄A by 32%, whereas the Ca^{2^+} increase evoked by the mononucleotides ATP or UTP was only slightly inhibited, by 13% and 6%, respectively. The dinucleotide Ip₅I itself was not able to evoke a Ca^{2^+} response when applied to HBE-1 cells in the absence of Ap₄A (data not shown). Thus, the difference in sensitivity to various P2 receptor antagonists of responses activated by mono- and dinucleotides provides evidence for the existence of a distinct receptor subtype specific for diadenosine polyphosphates in HBE-1 cells.

To determine the mechanism by which the Ca^{2^+} rise was reduced in the presence of suramin, PPADS or Ip_5I , we examined whether these antagonists directly act on the Ap₄A-activated receptor. In human and rat lung membranes, we recently identified high-affinity binding sites for $[^3\text{H}]\text{Ap}_4\text{A}$ (K_d approximately 90 nM). These binding sites were coupled to G proteins and showed pharmacological characteristics different from those of the P2Y₂ receptor which is also present in lung tissue (Laubinger and Reiser, 1998, 1999; Laubinger et al., 1999). In the present study, we investigated the effect of suramin on this Ap₄A binding site (Fig. 2A). Rat lung membranes (50 µg of protein) were incubated with $[^3\text{H}]\text{Ap}_4\text{A}$ in the absence and in the presence

of the antagonist suramin. The maximal binding of the radioactive ligand at a concentration of 10 nM was reduced by about 50% in the presence of 100 μM suramin. Displacement curves with unlabelled Ap₄A showed that half of the [³H]Ap₄A bound was displaced from the binding site at a concentration between 100 and 200 nM of unlabelled Ap₄A.

Binding of [3 H]Ap₄A to rat or human lung membranes was reduced concentration-dependently by suramin (Fig. 2B). In rat lung membranes, 10 μ M suramin caused a weak inhibition only (about 30%), whereas maximal inhibition (50–60% of total specific binding) was reached at an antagonist concentration between 50 and 100 μ M. In human lung membranes, inhibition occurred already at lower con-

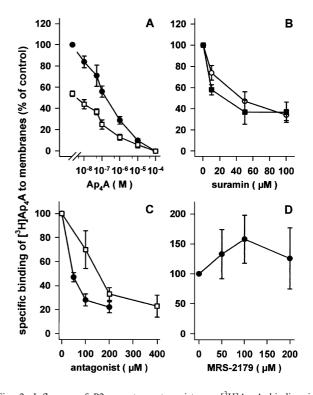


Fig. 2. Influence of P2 receptor antagonists on [3H]Ap4A binding in membranes from rat and human lung. (A) Influence of suramin on [3H]Ap₄A binding in rat lung membranes. Lung membranes (50 µg of protein) were incubated with 10 nM [3H]Ap4A and increasing concentrations of Ap₄A in the absence (●) or presence of 100 µM suramin (□), as described in Materials and methods. Data shown are mean values ± S.D. from five independent experiments. (B) Effect of suramin on Ap₄A binding in membranes from human and rat lung. Membranes from rat (O) or human (**1**) lung were incubated in the presence of 10 nM [³H]Ap₄A with increasing amounts of suramin, as described in Materials and methods. Data points represent mean values from five (human lung) and ten (rat lung) independent experiments. Error bars indicate S.D. (C) Binding of [3H]Ap₄A to lung membranes in the presence of the P2 receptor antagonists PPADS and Ip5I. Lung membranes (50 µg of protein) were incubated in the presence of 10 nM [³H]Ap₄A and increasing amounts of PPADS (□) or Ip₅I (●), as described in Materials and methods. Data are mean values±S.D. from four independent experiments with human (
) or three independent experiments with rat (•) lung membrane preparations. (D) Influence of MRS-2179 on [³H]Ap₄A binding in human lung membranes. Membranes prepared from human lung (50 µg of protein) were incubated with 10 nM [³H]Ap₄A in the presence of increasing amounts of MRS-2179. The data shown are mean values \pm S.D. derived from three independent experiments.

centrations of suramin, but the maximal inhibition at 100 μ M suramin was identical with that obtained in rat lung membranes. [3 H]Ap $_4$ A binding was strongly inhibited in the presence of PPADS, another P2 receptor antagonist with limited selectivity (Fig. 2C). Addition of 400 μ M PPADS reduced [3 H]Ap $_4$ A binding to human lung membranes to 23% of the control value.

Next, Ip₅I was used in the binding experiments. [3H]Ap₄A binding to rat lung membranes was inhibited by about 80% at 200 µM Ip₅I (Fig. 2C). A similar inhibition of Ap₄A binding in the presence of Ip₅I was seen when human lung membranes were used (data not shown). Consistent with the results obtained from Ca²⁺ response measurements with Ap₄A, MRS-2179 at concentrations between 50 and 200 μM did not inhibit [³H]Ap₄A binding to lung membranes, but on the contrary even displayed a slight stimulatory effect (Fig. 2D). This apparent increase was, however, not statistically significant. Further, nonselective P2 receptor antagonists were also tested. Evans blue had no inhibitory effect on [3H]Ap₄A binding, but rather stimulated binding compared with the control values, and Reactive blue 2 proved to be a partial antagonist, reducing [³H]Ap₄A binding by about 50% at concentrations between 100 and 200 μM (data not shown).

4. Discussion

Dinucleotides like Ap₄A are known to act as intracellular and extracellular messenger molecules in a broad spectrum of signal transduction processes (Kisselev et al., 1998; Ogilvie et al., 1996). Dinucleotides can act as neurotransmitters (Castillo et al., 1992). They are also released from stores in human platelets, thus, regulating vascular tone (Schlüter et al., 1994). Furthermore, diadenosine polyphosphates are supposed to be important activators of P2 receptors in pathophysiologal regulatory processes in the lung (Lazarowski et al., 1995). Nevertheless, the nature of the receptor on which they act is still far from clear. Several purinoceptors can be activated by various adenine and/or uridine nucleotides and their analogues, according to a subtype-specific agonist profile. Moreover, in many cell types, several P2 receptor subtypes are co-expressed, which makes it difficult to attribute agonist or antagonist effects to only one distinct receptor subtype. Diadenosine polyphosphates are, most probably, also able to activate various purinoceptor subtypes.

In a preceding study, we provided evidence that dinucleotides activate a G protein-coupled P2Y receptor in lung that is different from the P2Y₂ receptor (Laubinger and Reiser, 1999; Laubinger et al., 2001). Evidence for a distinct receptor for diadenosine polyphosphates was also found in the heart (Walker et al., 1993). Other authors showed that the cloned P2Y₂ receptor subtype expressed in a heterologous system can be activated by Ap₄A with a potency equal to that of ATP or UTP (Lazarowski et al., 1995). Addition-

ally, diadenosine polyphosphates are supposed to be potent agonists of some subtypes of the P2X receptor family (Pintor et al., 1997).

Unfortunately, so far, investigation of purinoceptors is hampered by the fact that there is a lack of antagonists that are specific for only one receptor subtype (Von Kügelgen and Wetter, 2000). This fact makes it difficult to distinguish distinct P2 receptor subtypes. Nevertheless, application of known antagonists is in some cases helpful to classify or distinguish P2 receptor subtypes. Thus, suramin is an unspecific inhibitor of nucleotide receptors and antagonizes Ca²⁺ responses evoked by ATP, UTP or ADP (Sabala et al., 2001). PPADS has been described as a selective antagonist of the P2Y₁ receptor (Schachter et al., 1997). However, PPADS is also a potent antagonist of the P2X7 receptor in humans and rats, and a weak antagonist in mice (Hibell et al., 2001). In brain, suramin abolished P2 receptor-mediated responses to ATP in the midbrain and in the cerebellum, but not responses to dinucleotides. In cortical preparations, however, suramin at a concentration of 100 µM blocked responses both to mono- and dinucleotides (Pintor et al., 1997). In mouse neuroblastoma x rat glioma hybrid cell line, NG108-15, suramin, Reactive blue 2 and PPADS antagonized the phospholipase C response to both UTP and UDP (Sak et al., 2001). These species and tissue differences in antagonist potency in some cases make the interpretation of data difficult.

In the central nervous system, diadenosine polyphosphates act as neuromodulators, releasing acetylcholine mainly through activation of diadenosine polyphosphate receptors. However, in this case, neither suramin (100 μM) nor PPADS (10 μM) cause a remarkable inhibition (only 18–24% inhibition) (Pereira et al., 2000). Sometimes there are also differences between the effects of suramin and PPADS, as shown for the cloned P2Y $_{11}$ receptor, which is the only P2Y receptor known so far which is positively coupled to the adenylyl cyclase pathway. In stably transfected haematopoietic cell lines, the ATP-induced elevation of cAMP was inhibited by 500 μM suramin but not by 100 μM PPADS (Van der Weyden et al., 2000).

Recently, we have shown that in human bronchial epithelial cells (HBE-1), there are receptors which can be activated by mononucleotides (ATP, UTP) and dinucleotides (Ap₄A) in a different manner: (1) In single cell measurements, cells were less sensitive to diadenosine polyphosphates than to ATP or UTP, (2) the EC₅₀ value for Ap₄A (17 μM) was one order of magnitude higher than that for ATP or UTP (1.5 and 1.8 µM, respectively), (3) a small part of the Ap₄A-induced Ca²⁺ rise resulted from Ca²⁺ flow through the plasma membrane, whereas Ca2+ mobilized by ATP or UTP exclusively came from internal Ca²⁺ stores. Therefore, we concluded that there is a receptor for diadenosine polyphosphates that is distinct from the P2Y₂ receptor (Laubinger et al., 2001). Additionally, in these cells, [3H]Ap₄A was displaced from membrane binding sites by unlabelled Ap₄A, but was only partially displaced by ATP and not at all by UTP. Testing here the effects of P2 receptor antagonists on [³H]Ap₄A binding in lung membranes and on Ca²⁺ release in HBE-1 cells, we found that PPADS and suramin were potent antagonists of the putative Ap₄A receptor. However, Reactive blue 2 was only a partial antagonist and Evans blue had no inhibitory effect at all on this receptor. Our results are compatible with reports on [³H]Ap₄A binding sites in cultured vascular smooth muscle cells and endothelial cells, where [³H]Ap₄A was displaced from its binding site by high concentrations of suramin or PPADS, respectively (Verspohl et al., 1999). From these data, it was assumed that, besides the P2Y₂ receptor subtype, either further subtypes of P2Y receptors or P2X receptors were involved in the binding of diadenosine polyphosphates in lung cells.

In HBE-1 cells, MRS-2179, a potent P2Y₁ receptor antagonist (Baurand et al., 2001; Nandanan et al., 2000), clearly had no effect on the Ca²⁺ rise evoked by Ap₄A and only a minimal inhibitory effect on that evoked by ATP or UTP. As HBE-1 cells have been reported to possess no P2Y₁ receptors (Communi et al., 1999), MSR-2179 might also be a partial antagonist of the P2Y2 receptor but not of the putative Ap₄A-specific P2Y receptor. The effect of the antagonists suramin and PPADS on [3H]Ap4A binding in lung membranes was confirmed by our functional experiments using HBE-1 cells. In the present work, we could show that receptors on HBE-1 cells activated by diadenosine polyphosphates were much more sensitive to suramin, PPADS or Ip₅I than those receptors activated by ATP or UTP. This clear difference excludes P2Y₂ receptors from being responsible for Ap₄A activity in HBE-1 cells.

In the past, Ip₅I has been described as an antagonist especially of the diadenosine polyphosphate-activated receptor subtype of the P2X receptor family (P2X₃ receptor) (Dunn et al., 2000; Pereira et al., 2000). In this study, we show that the binding of [³H]Ap₄A to the G protein-coupled putative P2Y_{Ap4A} receptor in lung was also strongly inhibited by Ip₅I. Furthermore, the Ca²⁺ increase evoked by Ap₄A was partially diminished in the presence of this antagonist. However, the decrease in Ca²⁺ response in the presence of Ip₅I was considerably smaller than would be expected from the strong inhibition of Ap₄A binding. A possible explanation for this discrepancy is a difference in the expression pattern of P2Y and P2X receptor subtypes between HBE-1 cells and lung membranes. If P2X receptor subtypes which also bind Ap₄A exist in the lung, the strong inhibition of [3H]Ap₄A binding by Ip₅I could be attributed to there being more than one P2 receptor subtype.

By showing different effects of antagonists on Ca²⁺ mobilization caused by either the dinucleotide Ap₄A or the mononucleotides ATP or UTP, we here provide further evidence for the hypothesis that distinct receptors for diadenosine polyphosphates exist in the lung. The antagonists used directly act on the binding of Ap₄A to this membrane receptor. In contrast to other P2 receptors specific for diadenosine polyphosphates which were reported to

belong to the P2X receptor family, this putative diadenosine polyphosphate receptor in the lung is G protein-coupled and therefore belongs to the P2Y receptor family. However, it is not identical with the P2Y₂ receptor that is also activated by Ap₄A. Thus, the present work is a further step in the identification of several P2 receptors activated by diadenosine polyphosphates in the lung.

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