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Granulocyte Colony-Stimulating Factor-Induced Activation of Protein Kinase-C in Myeloid Cells

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Abstract Granulocyte colony stimulating factor (G-CSF) regulates survival, proliferation, differentiation, and activation of myeloid cells. It binds to a high affinity receptor (G-CSF-R) expressed on myeloid cells, for which the signal transduction mechanisms other than protein tyrosine kinase (PTK) activation have not been completely identified. We explored the potential involvement of protein kinase-C (PKC) in G-CSF-R signal transduction. In this report, we provide direct evidence of PKC activation by G-CSF-R. G-CSF treatment of peripheral blood neutrophils, granulocytic cell lines (HL-60, NFS-60, KG-1), and monocytic cell lines (WEHI-3B,U-937) resulted in PKC activation. Chelerythrine chloride and HA-100, an isoquinolinesulfonamide derivative, the specific inhibitors of PKC, 1,2-Bis(2-aminophenoxy)ethane-N,N,N',N'-tetra-acetic acid (BAPTA), a chelator of intracellular calcium, and 3,4,5-trimethoxybenzoic acid 8-(diethyl-amino)-octyl ester (TMB-8), an inhibitor of intracellular calcium release, blocked G-CSF-induced PKC activation in HL-60 cells, and reduced CD11b upregulation in neutrophils, but did not affect ligand-binding or down-modulation of G-CSF-R. Methyl 2,5-dihydroxycinnamate (MDHC), a potent inhibitor of protein tyrosine kinases (PTK), also inhibited PKC activation in response to G-CSF treatment, suggesting that PKC activation may occur downstream of PTK activation. Our results demonstrate the involvement of PKC in G-CSF-R signal transduction, and suggest a common signaling pathway in myeloid cells of granulocytic and monocytic lineages. J. Cell. Biochem. 66:286–296, 1997. © 1997 Wiley-Liss, Inc.

Key words: cytokine; signaling; neutrophil; protein kinase C; myeloid; colony-stimulating; receptor

Granulocyte colony-stimulating factor (G-CSF) supports survival, proliferation, and differentiation of myeloid progenitors, and enhances effector functions of neutrophils [Nicola, 1987; Clark and Kamen, 1987]. The G-CSF receptor (G-CSF-R) is expressed on neutrophils, monocytes, bone marrow cells, endothelial cells, placenta, trophoblasts, myeloid leukemia cells, and small cell lung cancer cell lines [Nicola and Metcalf, 1984; Begley et al., 1988]. It lacks an intrinsic tyrosine kinase activity, but upon li-

Received 3 March 1997; accepted 9 April 1997

gand-interaction, triggers activation of JAK and src-family tyrosine kinases, MAP kinase, and STAT transcription factors [Corey et al., 1994; Nicholson et al., 1994; Matsuda and Hirano, 1994; Tian et al., 1994; Avalos, 1996; Deshpande et al., 1997]. While G-CSF-induced tyrosine kinase activation is well documented, little is described about other pathway(s) of G-CSF-R signal transduction. We explored the possibility of protein kinase-C (PKC) regulation as an additional mechanism of G-CSF-R signal transduction.

Protein kinase C (PKC) regulates a number of hormone- and cytokine-induced growth and differentiation responses in many cell types, including immune and inflammatory cells [Nishizuka, 1986; Berridge, 1993]. PKC is expressed in mammalian systems as a family of diverse serine-threonine kinases, consisting of at least 11 isoforms differing in both substrate specificity and Ca²⁺ dependence. They are classified as conventional (α , β 1, β 2, γ), novel (δ , ϵ , η , θ , μ), and atypical (ζ , λ). Several of these isoforms are differentially expressed in hematopoietic cells, and their activation is postulated

Abbreviations: G-CSF, granulocyte colony-stimulating factor; G-CSF-R, granulocyte colony-stimulating factor receptor; PTK, protein tyrosine kinase; PKC, protein kinase-C; BAPTA, 1,2-Bis(2-aminophenoxy)ethane-N,N,N',N'-tetraacetic acid; TMB-8, 3,4,5-trimethoxybenzoic acid 8-(diethylamino)-octyl ester; MDHC, methyl 2,5-dihydroxycinnamate; PMA, phorbol 12-myristate 13-acetate.

Contract grant sponsor: National Institutes of Health, contract grant number HL-46546; contract grant sponsor: Gar Reichman Fund of the Cancer Research Institute.

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to account for the divergent actions of different agonists [Nishizuka, 1988; Mischak et al., 1991; Ogita et al., 1992].

To investigate whether G-CSF-R utilizes the PKC pathway for signal transduction, we measured the activity of PKC purified from G-CSFtreated myeloid cell lines and peripheral blood neutrophils. Our results demonstrate that G-CSF induces PKC activation in these cells.

MATERIALS AND METHODS Cells and Reagents

HL-60 (human promyelocytic leukemia), KG-1 (human acute myelogenous leukemia), U-937 (human histiocytic lymphoma), and WEHI-3B (mouse myelomonocytic leukemia) cells were maintained in Iscove's Modified Dulbecco's Medium (IMDM) (GIBCO-BRL) containing 3 g/L NaHCO₃, 10% fetal calf serum (Hyclone) and 0.001% α -monothioglycerol. NFS-60 (mouse myeloid leukemia) cells were cultured in the same medium containing rhGM-CSF (2 ng/ml).

Since HL-60 cells showed the highest level of PKC activity, and expressed easily detectable numbers of G-CSF-R, these cells were used for PKC inhibition and receptor binding assays (below). Because NFS-60 cells, but not other cell lines used in the study, proliferate in response to G-CSF, they were used for the thymidine uptake assay. As peripheral blood neutrophils have the highest surface expression of CD11b among the cells in this study, they were used for CD11b regulation assays.

Escherichia coli–derived rhG-CSF and GM-CSF were obtained from Amgen Inc. (Thousand Oaks, CA). BAPTA, TMB-8, and phorbol 12-myristate 13-acetate (PMA) were purchased from Sigma (St. Louis, MO). Chelerythrine chloride, HA-100, and MDHC were obtained from LC Laboratories (Woburn, MA). Na¹²⁵I, [³H]thymidine, and [γ^{32} P]ATP, were purchased from New England Nuclear (Boston, MA).

Neutrophil Isolation

Peripheral blood neutrophils from normal, healthy human donors were isolated using the Mono-Poly Resolving Medium (ICN Biochemicals). Fresh, heparinized peripheral blood (3.5 ml) was layered on to 3 ml of Mono-Poly Resolving Medium and centrifuged at 400*g* for 30 min at room temperature in a swing-out-rotor centrifuge. Neutrophils were recovered, washed twice with PBS, and used immediately. The neutrophil population was >97% pure, as evaluated by Giemsa staining and FACS analysis, and 100% viable.

Assay for Protein Kinase C

Protein kinase C activity in myeloid cells was determined using the synthetic peptide substrate, Ac-MBP (4-14) (GIBCO-BRL), the sequence of which was identical to N-terminal residues 4 to 14 in myelin basic protein. Cells (10⁶/ml) were treated with 5 nM rhG-CSF for 0-4 h at 37°C, and lysed in 20 mM Tris (pH 7.5), 0.5 mM EDTA, 0.5 mM EGTA, 0.5% Triton X-100, 10 mM β-mercaptoethanol, 25 µg/ml aprotinin, and 25 µg/ml leupeptin. Cell lysates were incubated on ice for 30 min. and centrifuged at 13,600g for 2 min to remove cellular debris. DEAE cellulose (Whatman DE52) was suspended in 20 mM Tris (pH 7.5), 0.5 mM EDTA, 0.5 mM EGTA, and 10 mM β-mercaptoethanol (Buffer B) (0.5 g DE52/ml buffer B). One milliliter of DE52 slurry was poured into chromatography columns (Bio-Rad, Richmond, CA), and equilibrated with buffer B. Cellextracts were loaded on the column, and columns were washed with 5 ml buffer B. PKC was then eluted with 20 mM Tris (pH 7.5), 0.5 mM EDTA, 0.5 mM EGTA, 10 mM β-mercaptoethanol, and 0.2 M NaCl. Aliquots of eluted PKC were pre-incubated with 20 µM PKC inhibitor peptide (PKC 19-36) or lipid preparation (10 µM PMA, 280 µg/ml phosphatidyl serine, Triton X-100 mixed micelles) (GIBCO-BRL) at room temperature for 20 min. Reaction mixtures were further incubated at 30°C for 5 min with 250 µM Ac-MBP and 5 µCi/ml $[\gamma^{32}P]$ ATP, and 25 µl aliquots were spotted on to phosphocellulose paper-discs. Filters were washed with 1% phosphoric acid, and counted for incorporated radioactivity. PKC activity was represented as pmoles of $[\gamma^{32}P]ATP$ transferred to Ac-MBP per minute by PKC purified from a million cells. PKC isolated from cells treated with 10 µM PMA were used as positive standards.

PKC and PTK Inhibitors

PKC activity was also measured in cells treated with PKC or PTK inhibitors. Cells were treated with chelerythrine chloride (10 μ M), HA-100 (20 μ M), BAPTA (10 μ M), TMB-8 (50 μ M) or MDHC (100 μ g/ml) at 37°C for 30

min, followed by G-CSF (5 nM) for 30 min, and PKC activity measured as described.

Iodination of rhG-CSF

E. coli-derived rhG-CSF was iodinated by the chloramine T method, as described previously [Shieh et al., 1991]. Briefly, 35 µl of a reaction mixture containing 0.5 µg G-CSF, 10% DMSO, 0.02% polyethylene glycol, 6 nmol chloramine, 1 mCi carrier-free Na¹²⁵I, and 0.25 M sodium phosphate buffer, pH 6.8, was incubated on ice for 5 min. Thereafter, 6 µl of 1.1 nmol/µl cysteine and 10 µl of 0.2 M KI were added, and the reaction mixture remained on ice for 10 min. The reaction mixture was desalted by passage over a PD-10 column (Pharmacia Fine Chemicals, Piscataway, NJ), which was conditioned with 5 ml of 10 mg/ml BSA and 20 mM Tris-HCl, pH 6.8. The crude ¹²⁵I-G-CSF was further fractionated on a Sephacryl S-200 column, with a buffer containing 0.5 M NaCl, 0.02% NaN₃, 0.1 mg/ml BSA, and 20 mM Tris-HCl, pH 8.0. The biological activity of Sephacryl S-200-purified ¹²⁵I-G-CSF was measured by its potential to support proliferation of NFS-60 cells in [³H]thymidine uptake assay described below.

G-CSF Receptor Binding Assay

¹²⁵I-G-CSF binding assay was performed as described previously, with minor modifications [Shieh et al., 1991]. Briefly, cells were washed twice with cold PBS, and re-suspended in RPMI 1640 medium (without sodium bicarbonate), 2 mg/ml BSA, 0.02% NaN₃, 20 mM HEPES, pH 7.3 at a density of 107 cells/ml. One hundred microliters (10⁶ cells) was dispensed per well in a 96-well cell-culture plate (Falcon). To determine the non-specific binding of ¹²⁵I-G-CSF to cells, 10 µl of unlabeled G-CSF (10 ng) was added per well, and plates were incubated at 4°C for 30 min prior to addition of 10 µl ¹²⁵I-G-CSF (approximately 50,000 cpm) per well. To measure the total binding of ¹²⁵I-G-CSF to the receptors, only radiolabeled G-CSF was added to cell suspension. Cells were incubated overnight on a rocking platform at 4°C. Cell-suspensions were then layered on to 200 μ l cold FCS in 400- μ l centrifuge tubes and centrifuged at 400g for 5 min. The bottom-ends of the tubes containing the cell-pellets were excised, and the amount of radioactivity in pellets was counted in a Cobra Auto-Gamma-counter (Packard, Sterling, VA). Specific binding activity was calculated by subtracting the non-specific binding (<15% of total binding) from the total binding of ¹²⁵I-G-CSF. All ¹²⁵I-G-CSF preparations were used within 2 weeks.

Measurement of G-CSF-R Down-Modulation

Cells were incubated with G-CSF (5 nM) at 37°C for various periods of time up to 2 h. After G-CSF treatment, cells were washed twice with cold PBS, resuspended in the receptor binding buffer (described above), and used for ¹²⁵I-G-CSF-binding assay. Decrease in the G-CSF-binding activity on the cell-surface was taken as a measure of down-modulation of the G-CSF-R from cell-surface due to internalization. To study the effect of PKC inhibitors on G-CSF-R down-modulation, cells were treated with these agents for 30 min prior to their incubation with G-CSF.

Measurement of [³H]Thymidine Incorporation

Incorporation of [³H]thymidine into cellular DNA was measured as an indicator of cellproliferation. NFS-60 cells in log phase were harvested, washed twice with IMDM, resuspended in IMDM containing 0.2% FCS, and adjusted to a cell-density of 10⁵ cells/ml. One hundred microliters (10⁴ cells) was added per well in a 96-well cell-culture plate (Falcon), and incubated with G-CSF (5 nM) at 37°C for 24 h. Cells were then pulsed with 0.5 µCi of [³H]thymidine for 4 h, and DNA harvested with five washes of 250 μ l water each in a cell harvester (Cambridge Technology, Watertown, MA). [³H]thymidine incorporation was measured in a liquid scintillation counter (LS-6000LL; Beckman Instruments).

Flow Cytometry

Freshly isolated peripheral blood neutrophils were treated with TMB-8 (50 μ M, 0.5 h) or HA-100 (20 μ M, 0.5 h) and prior to addition of G-CSF (5 nM, 2 h). Cells were washed once with PBS alone and once with PBS containing 0.1% BSA and 0.1% NaN₃ (PBS/BSA). Cells (10⁶) were incubated with an anti-CD11b-FITC antibody or an isotype matched, FITC-conjugated antibody (Sigma Chemicals, St. Louis, MO) in 100 μ l PBS/BSA at room temperature for 30 min. Cells were washed twice with PBS/BSA and used for flow cytometry immediately (FAC-Scan, Becton Dickinson). Mean signal fluorescence was corrected for the autofluorescence of unstained cells and cells incubated with an isotype-matched FITC-labeled Ab.

RESULTS

Effect of G-CSF Treatment on PKC Activity in Neutrophils and Myeloid Cell Lines

Treatment of peripheral blood neutrophils and myeloid cell lines with G-CSF for various periods of time resulted in a significant increase in PKC activity (Fig. 1). In neutrophils, a large, sevenfold increase was detected in 15 min of G-CSF treatment (Fig. 1A). Although this increase was largely reversed in 30 min, the G-CSF-induced PKC activity remained significantly greater than the basal level up to 4 h. In the granulocytic precursor cell line, KG-1, increased PKC activity was detected within 15 min; the maximum, 2.2-fold activity was seen at 1 h of G-CSF treatment (Fig. 1C). In other granulocytic (HL-60, NFS-60) and myelomonocytic (U-937, WEHI-3B) cell lines also, a moderate, but significant (0.5-0.6-fold) increase in PKC activity was observed between 15 min and 4 h of G-CSF treatment (Fig. 1B,D,E,F). Substrate-phosphorylation was specific to PKC activation, as it was inhibited by PKC 19-36, a PKC-specific inhibitor. The basal levels of PKC activity in neutrophils and KG-1 cells were the lowest among cell types tested. The highest basal activity of PKC was observed in HL-60 cells. Modest basal levels of PKC activity were observed in NFS-60, U-937, and WEHI-3B cells. All the cells showed significant PKC activation in response to PMA (10 µM, 20 min), and this induction was comparable to that due to G-CSF treatment (Fig. 1).

Effect of PKC Inhibitors on G-CSF-Induced PKC Activity in HL-60 Cells

To confirm that the substrate-phosphorylating activity induced by G-CSF was indeed due to PKC, we studied the effects of various PKC inhibitors on PKC activity in G-CSF-treated HL-60 cells. Chelerythrine chloride and HA-100, the direct, specific inhibitors of PKC, BAPTA, a chelator of intracellular calcium, and TMB-8, an inhibitor of intracellular calcium release, blocked G-CSF-induced PKC activation completely, confirming that G-CSFinduced substrate-phosphorylating activity was that of PKC (Fig. 2). To determine if G-CSFactivated pathways involving tyrosine kinases and PKC were related events, HL-60 cells were treated with methyl-dihydroxycinnamate (MDHC), a potent, cell-permeable tyrosine kinase inhibitor, followed by G-CSF, and PKC activity measured. MDHC treatment of HL-60 cells resulted in a complete inhibition of G-CSF-induced PKC activation, suggesting that PKC activation may occur downstream of tyrosine kinase activation in G-CSF-R signal transduction.

Effect of PKC Inhibitors on [125]G-CSF Binding to HL-60 Cells

To determine whether changes in HL-60 PKC activity after treatment with various PKC inhibitors were effects of post-receptor mechanisms or ligand-receptor interaction, [¹²⁵I]G-CSF binding to G-CSF-R was measured in cells treated with these agents. None of the PKC inhibitors, chelerythrine chloride, HA-100, BAPTA or TMB-8 showed any significant effect on G-CSF binding to its receptor, demonstrating that the PKC inhibitors affected PKC activity by post-receptor mechanisms (Table I).

Effect of PKC Inhibitors on Down-Modulation of G-CSF-Receptors on HL-60 Cells

Ligand-induced internalization is a phenomenon common to several cytokine receptors, including the G-CSF-R. To verify the ability of G-CSF to down-modulate its receptors, HL-60 cells were first treated with G-CSF (5 nM) for 0-2 h and used in the [125I]G-CSF-binding assay to measure the number of G-CSF-R remaining on the cell surface. G-CSF down-modulated its receptors almost completely (~95%) within 0.25 h (data not shown). This down-modulation was further maintained for at least 2 h after G-CSF treatment. To evaluate the role of PKC in G-CSF-induced receptor down-modulation, HL-60 cells were treated with different doses of PKC inhibitors for 30 min, followed by G-CSF (5 nM) for 15 min, and [125I]G-CSF-binding assay performed. None of the PKC inhibitors showed any inhibitory effect on G-CSF induced receptor down-modulation (Fig. 3). G-CSFreceptors were down-modulated completely (93-99%) within 15 min of G-CSF treatment in the presence or absence of PKC inhibitors, suggesting that ligand-induced G-CSF-R down-modulation was independent of PKC activation.



Fig. 1. Effect of G-CSF-treatment on PKC activity in myeloid cells. Neutrophils, HL-60, KG-1, NFS-60, U-937, and WEHI-3B cells were treated with 5 nM rhG-CSF for 0–4 h at 37°C, and lysed. PKC from cell lysates was partially purified over DE52 columns as described in Materials and Methods. Aliquots of PKC were incubated first with 20 μ M PKC inhibitor peptide (PKC 19–36) or lipids at room temperature for 20 min, and then with 250 μ M Ac-MBP and 5 μ Ci/mI [γ^{32} PJATP at 37°C for 5 min. Aliquots (25 μ I) of reaction mixtures

were spotted on to phosphocellulose paper-discs, filters washed with 1% phosphoric acid, and incorporated radioactivity measured. PKC activity was represented as pmoles of $[\gamma^{32}P]ATP$ transferred to Ac-MBP per minute by PKC purified from a million cells. PKC activity in cells treated with 10 µM PMA for 20 min was used as a positive standard. Results are represented as mean \pm SD from three independent experiments. *P \leq 0.05, Student's test.



Fig. 2. Effect of PKC and PTK inhibitors on PKC activity in G-CSF-treated HL-60 cells. HL-60 cells were treated with PKC inhibitors—chelerythrine chloride (10 μ M), HA-100 (20 μ M), BAPTA (10 μ M), TMB-8 (50 μ M)—or PTK inhibitor—MDHC (100 μ g/ml)—at 37°C for 30 min, followed by G-CSF (5 nM) for 30 min, and PKC activity measured as described. Control cells

TABLE I. Effect of PKC Inhibitors on [¹²⁵I]G-CSF-Binding to HL-60 Cells

Treatment	[¹²⁵ I]G-CSF -binding (cpm/10 ⁶ cells)	% Inhibition
Control	4461 ± 104	0.00 ± 2.34
TMB-8 (50 µM)	4224 ± 57	5.32 ± 1.28
BAPTA (10 µM)	4346 ± 102	2.59 ± 2.29
HA-100 (20 µM)	4611 ± 267	-3.35 ± 5.98
Chelerythrine		
chloride (10 µM)	4561 ± 685	-2.22 ± 1.98

HL-60 cells were incubated at 37°C for 30 min with or without (control) different PKC inhibitors and ¹²⁵I-G-CSF binding assay performed as described in Materials and Methods. Data are represented as mean \pm SD from three independent experiments.

Effect of PKC Inhibitors on [³H]Thymidine Uptake by NFS-60 Cells

To test the potential role of G-CSF-induced PKC in cell-proliferation, we studied the proliferation of NFS-60 cells in the presence or absence of G-CSF and PKC inhibitors (Fig. 4). Treatment of NFS-60 cells with chelerythrine chloride and TMB-8 resulted in a dose-dependent, anti-proliferative response. However,

were incubated for the same length of time, but without any added PKC inhibitors or G-CSF. Results are expressed as mean \pm SD from three independent experiments. **P* ≤ 0.05, Student's *t* test, compared with cells treated with G-CSF alone. #*P* ≤ 0.05, Student's *t* test, compared with untreated control cells.

these treatments did not alter the ratio of G-CSF-dependent to G-CSF-independent thymidine uptake. Similarly, HA-100 and BAPTA did not change this ratio, suggesting that G-CSFinduced proliferation of NFS-60 cells was independent of PKC activation.

Effect of PKC Inhibitors on G-CSF-Induced CD11b Expression on Peripheral Blood Neutrophils

To study the effect of G-CSF on CD11b expression on neutrophils, these cells were treated with G-CSF (5 nM) for various periods of time up to 2 h, and CD11b expression studied by flow cytometry (data not shown). G-CSF up-regulated expression of CD11b on neutrophils by 44% in 2 h (Table II). To investigate a potential involvement of PKC in this induction, neutrophils were treated first with HA-100 (20 µM, 0.5 h) or TMB-8 (50 μ M, 0.5 h), followed by G-CSF (5 nM, 2 h), and CD11b expression measured. Treatment with HA-100 and TMB-8 resulted in a 34% and 29% decrease in G-CSFinduced CD11b expression, respectively, indicating a partial correlation between PKC activation and CD11b up-regulation in neutrophils.



Fig. 3. Effect of PKC-inhibitors on down-modulation of G-CSFreceptors on HL-60 cells. HL-60 cells were treated with different doses of PKC inhibitors at 37°C for 30 min, followed by G-CSF (5 nM) for 15 min. [¹²⁵I]G-CSF-binding assay was performed as described in Materials and Methods. Decrease in G-CSF-

DISCUSSION

G-CSF, a member of the family of myeloid growth factors, supports hematopoiesis and regulates effector functions in neutrophils. Although a single class of high-affinity G-CSF-R has been detected on several cell types, its cDNA cloned and chromosomal location identified, the mechanisms by which G-CSF exerts its cellular effects are largely unknown. Considerable effort in understanding the events subsequent to G-CSF/G-CSF-R interaction has fetched the knowledge of tyrosine kinase activation in myeloid cells. However, other signaling mechanisms, similar to those seen in other cytokine receptor systems, remain unexplored for the G-CSF-R. In this study, we explored PKC modulation as a potential mechanism of G-CSF-R signal transduction.

PKC activation appears to be a major control point in cellular responses, as distinct cytokines utilize this pathway for intracellular signaling. The development of in vitro assays for measuring PKC activity has been explored exbinding activity on the cell-surface was taken as a measure of down-modulation of the G-CSF-R from cell-surface due to internalization. Results are represented as mean \pm SD from three independent experiments.

tensively, using diverse experimental variables including ionic conditions, lipid contents, substrate sources, pharmacological agonists and antagonists, and kinetics of activation [reviewed in ref. Epand, 1994]. The components of the PKC assay used in this study have been used successfully and reproducibly for measuring PKC activity in other systems [House and Kemp, 1987; Yasuda et al., 1990].

In this report, we describe activation of protein kinase-C in G-CSF-treated myeloid cell lines and peripheral blood neutrophils, and provide direct evidence for the involvement of this pathway in G-CSF-R signal transduction. G-CSF-treatment of cells resulted in a 0.5–7-fold increase in PKC activity over basal levels. The specificity of PKC activation was confirmed by its inhibition by PKC 19-36, a peptide whose sequence was derived from the pseudosubstrate region of PKC. That the substratephosphorylating activity induced by G-CSF was indeed due to PKC was further confirmed using direct (chelerythrine chloride, HA-100) and in-



Fig. 4. Effect of PKC inhibitors on [³H]thymidine uptake by NFS-60 cells. NFS-60 cells (10⁴) in log phase were suspended in IMDM containing 0.2% FCS, and incubated with rhG-CSF (5 nM) and/or different doses of PKC inhibitors at 37°C for 24 h. Cells were pulsed with 0.5 µCi [³H]thymidine for 4 h, DNA harvested with five washes of 250 µl water, and [³H]thymidine

incorporation measured in a liquid scintillation counter as described in Materials and Methods. Results are indicated as mean \pm SD from three independent experiments (the small standard deviations are within symbols, and are not clearly evident on the exponential scales used for the graphs).

direct (TMB-8, BAPTA) inhibitors of PKC. Unlike the non-specific inhibitors (H-7, staurosporine, gossypol) that bind the ATP-binding site in the catalytic domain of PKC, chelerythrine is a highly selective and specific inhibitor which blocks the diglyceride binding site within the regulatory domain of PKC [Herbert et al., 1990]. Treatment of HL-60 cells (5 μ M, 6 h) with

chelerythrine has no adverse effects on cell viability [Jarvis et al., 1994]. It is also used with platelets, endothelial cells, and basophils [Fujimoto and McEver, 1993; Patella et al., 1995]. HA-100 (1-(5-isoquinolinesulfonyl)-piperazine) competes with ATP to bind PKC, but does not affect activities of ATPases, adenylate cyclase or guanylate cyclase even at millimolar

Pre-treatment	Fluorscence (units)		G-CSF/control
	Control	G-CSF	ratio
None	211.30 ± 10.91	314.56 ± 6.24	1.49 ± 0.05
TMB-8 (50 μM)	$\textbf{252.03} \pm \textbf{2.88}$	283.90 ± 1.91	$1.12\pm0.01^*$
ΗΑ-100 (20 μΜ)	197.64 ± 2.53	184.66 ± 0.80	$0.93\pm0.01^*$

 TABLE II. Effect of PKC Inhibitors on G-CSF-Induced CD11b Expression on Peripheral

 Blood Neutrophils

Freshly isolated peripheral blood neutrophils were incubated with or without G-CSF (5 nM) at 37°C for 2 h, and CD11b surface expression measured by flow cytometry as described in Materials and Methods. Separately, neutrophils were pre-treated with 50 μ M TMB-8 or 20 μ M HA-100 at 37°C for 30 min, followed by 5 nM G-CSF for 2 h, and CD11b expression measured. Specific fluorescence in arbitrary units was calculated by correcting for cell-autofluorescence and isotype-matched FITC-labeled antibody fluorescence of stained cells. Data are represented as mean \pm SEM from two independent experiments. * $P \leq 0.05$, Student's *t* test.

concentrations, and has been used with endothelial cells (10 μ M) [Hagiwara et al., 1987; Kuzuya and Kinsella, 1994]. TMB-8, an inhibitor of intracellular calcium release, inhibits neutrophil chemotaxis and PMA-induced leukocyte histamine release (at 2–200 μ M) [Srivastava et al., 1994; Bergstrand et al., 1992]. It has been used with myeloid cell lines M1-A5 and U-937 [MacIntyre and Pope, 1991; Li et al., 1993]. BAPTA, a chelator of intracellular calcium, has been used with human neutrophils (10–100 μ M), HL-60, and U-937 cells [Suchard and Boxer, 1994; Elsner et al., 1996; Yoshida et al., 1993; Natarajan and Iwamoto, 1994].

Like the PKC inhibitors used in the current study, methyl 2,5-dihydroxycinnamate (MDHC), a potent, cell-permeable, specific inhibitor of protein tyrosine kinases [Umezawa et al., 1990], also blocked PKC activation in G-CSF-treated HL-60 cells, suggesting that PKC activation may occur downstream of PTK activation in these cells. The correlation between PTK activation and PKC induction has been observed in several cell types. In B lymphocytes, CD40mediated PKC activation and translocation is dependent on PTK activation [Ren et al., 1994]. In thrombin-activated platelets, tyrosine phosphorylation leads to phosphatidylinositol 3,4bisphosphate synthesis and PKC activation [Yatomi et al., 1994]. In vascular endothelial growth-factor-treated endothelial cells, stimulation of PTK activity results in phospholipase-C phosphorylation, PKC activation, and cell proliferation [Xia et al., 1996]. Although the exact mechanism(s) of PTK/PKC activation cascade(s) remain to be fully understood, they seem to involve some modifications of different phospholipases [for review, see Halenda et al., 1996; Natarajan et al., 1996]. It is possible that in agonist-stimulated cells, the activated cytoplasmic PTKs are recruited to the membrane receptors, and through protein phosphorylation, they may increase the efficiency of coupling of the receptors with phospholipases [Garland, 1992].

Ligand-induced down-modulation is common to several growth factor receptor systems, including the G-CSF-R. 'Trans-down-modulation' due to interactions of other ligands and receptors is also common among cytokine receptors. TNF down-regulates G-CSF-R expression on human myeloid leukemic blasts and neutrophils by 70%. While mechanisms underlying G-CSF-induced down-modulation of G-CSF-R are not clear, those resulting in TNF-induced trans-down-modulation of G-CSF-R appear to involve the PKC pathway. The TNF-effect can be mimicked by PMA but not GM-CSF, IL-2 or IL-6 [Elbaz et al., 1991]. To determine if G-CSFinduced down-modulation of G-CSF-R also involves the PKC pathway, we studied the effects of several PKC inhibitors on G-CSF-R downmodulation in HL-60 cells. None of the inhibitors showed any effect on G-CSF-R downmodulation, indicating that ligand-induced down-modulation of the G-CSF-R is independent of PKC pathway.

G-CSF promotes proliferation of NFS-60 cells and myeloid precursors. To determine if G-CSFmediated PKC activation may have a role in proliferation of immature myeloid cells, we studied the effects of PKC inhibitors on thymidine uptake by NFS-60 cells. None of the PKC inhibitors showed any effect on the G-CSF-specific proliferation of NFS-60 cells, suggesting that G-CSF-induced proliferation of granulocytic precursors may involve mechanisms other than PKC activation.

In neutrophils, which are terminally differentiated cells, G-CSF enhances cell survival and effector functions. Neutrophils express CD11b,

which, together with CD18, forms the complement receptor-3. It plays a fundamental role in binding un-opsonized bacteria, yeasts, fibrinogen and factor X, and promotes neutrophil cellcell adhesion as well as neutrophil-endothelial cell adhesion [Wright and Jong, 1986; Ross et al., 1985, 1987; Wright et al., 1988; Buyon et al., 1988; Arnaout et al., 1988]. In this study, treatment of neutrophils with HA-100 and TMB-8 resulted in a moderate decrease in G-CSFinduced CD11b expression, suggesting a partial correlation between PKC activation and CD11b induction. Similar correlation is also seen in neutrophils migrating across IL-1_B-pretreated endothelial cells (IL-1-EC); these neutrophils show a rapid increase in [Ca²⁺]i, associated with up-regulation of CD11b on the surface, and treatment with BAPTA (25 µM, 30 min) abrogates this up-regulation of CD11b [Kuijpers et al., 1992].

The physiological significance of PKC activation specific to the G-CSF/G-CSF-R interaction remains to be understood. In general, PKC is considered to play a role in myeloid cell survival and proliferation. Chelerythrine treatment (5 μ M, 6 h) of HL-60 cells abolishes their clonogenicity, whereas treatment of neutrophils with PKC inhibitors results in loss of cell survival in culture [Jarvis et al., 1994; Adachi et al., 1993]. Differential expression, activation, and subcellular distribution of PKC isoforms are also implicated in increased CD34 expression, lineage commitment, and maturation of myelomonocytic precursors [Fackler et al., 1992; Shearman et al., 1993; Rossi et al., 1996].

In conclusion, our results demonstrate the involvement of PKC in G-CSF-R signal transduction, and suggest a common signaling pathway in myeloid cells of granulocytic and monocytic lineages.

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