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Note

Characterization of fat-induced neurotensin-like immunoreactivity in plasma using column liquid chromatography and radioimmunoassay

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Neurotensin is a tridecapeptide isolated and characterized by Carraway and Leeman in 1973 [1]. Although small amounts of neurotensin have been detected in the esophagus, stomach, duodenum and colon, the primary sites of neurotensin localization are the jejunum and ileum [2,3]. Neurotensin cells appear to be true endocrine cells and they have been identified in the small intestine of man and animals by histochemical techniques [4]. Neurotensin can stimulate pancreatic exocrine secretion [5,6], and it also inhibits gastric acid secretion in dogs and in man [7,8]. Ingestion of fat is the most potent stimulus for the release of neurotensin in dogs, rats and man [9-11].

The objectives of this study were to develop a high-performance liquid chromatographic (HPLC) procedure for separating neurotensin¹⁻¹³ and neurotensin fragments (i.e. neurotensin¹⁻⁸, neurotensin¹⁻¹¹, neurotensin⁸⁻¹³) and to measure these fragments in plasma obtained from dogs given intraduodenal fat.

EXPERIMENTAL

Chemicals

The following chemicals and supplies were used in this study: HPLC-grade acetonitrile and ultrapure water (Burdick and Jackson Labs., Muskegon, MI, U.S.A.), trifluoroacetic acid (TFA) (Pierce, Rockford, IL, U.S.A.), ammonium acetate (Fisher Scientific, Fair Lawn, NJ, U.S.A.), Sep-Pak C₁₈ cartridges (Waters Assoc., Milford, MA, U.S.A.), Millex-HV₄ filter units (Millipore, Bedford, MA, U.S.A.), radiolabeled Na¹²⁵I (Amersham, Arlington Heights, IL, U.S.A.), chloramine-T (Eastman, Rochester, NY, U.S.A.), sodium metabisulfite (Mallinckrodt, New York, NY, U.S.A.), heparin (Liquamin, Organon Diagnostics, West Orange, NJ, U.S.A.), Lipomul (Upjohn Pharmaceuticals, Kalamazoo, MI, U.S.A.), aprotinin (Novo Research Institute, Bagsvaerd, Denmark).

Neurotensin¹⁻¹³ and neurotensin fragments¹⁻⁸, ¹⁻¹¹, ⁸⁻¹³ were obtained from Bachem (Torrance, CA, U.S.A.).

Apparatus

A Model 342 gradient liquid chromatograph (Beckman Instruments, Berkeley, CA, U.S.A.) equipped with a Model 420 system controller, to 112 solvent delivery modules and a Model 160 variable-wavelength UV detector were used in this study. A Wisp 710B automatic sampler (Waters Assoc.) was used for the injection of plasma extracts and standards. A Nova-Pak C₁₈ (4 μm particle size, 15 cm × 3.9 mm) analytical column (Waters Assoc.) was used for the reversed-phase separation of neurotensin and neurotensin fragments.

Experimental design

Six mongrel dogs were fasted for 18 h with access to water before the following experiment. Lipomul (corn oil, a triglyceride) (2 g/kg per h in 50% saline) was infused through a duodenal cannula at a rate of 100 ml/h for 1 h using a Harvard pump (Harvard Apparatus, South Natick, MA, U.S.A.). Peripheral blood (20–22 ml) was collected at 0 (basal), 15, 30 and 60 min into glass tubes containing heparin (15 U) and aprotinin (100 kallikrein inhibitory units per ml of blood). Plasma was immediately separated by centrifugation (1500 g) and stored at –20°C until extracted for neurotensin-like immunoreactivity (NTLI).

Extraction of neurotensin from plasma and HPLC separation

Plasma neurotensin and neurotensin fragments were extracted by means of a Waters Sep-Pak rack (Waters Assoc.). C₁₈ Sep-Pak cartridges were prewashed sequentially with 10 ml of acetonitrile and 10 ml of 0.05 M ammonium acetate (pH 5.5). Plasma was then added (4 ml) and washed with 10 ml of ammonium acetate. NTLI was eluted with 3 ml of acetonitrile–ammonium acetate (1:1). Extracts representing 12 ml of plasma (same original specimen) were combined and evaporated to dryness under nitrogen at 30°C. The residues were reconstituted in 400 μl of HPLC-grade water and filtered through a 0.45-μm Millex-HV₄ filter: 200 μl of the filtrate was then injected into the chromatograph.

HPLC analysis was carried out at a flow-rate of 1 ml/min, and UV absorption

was monitored at 214 nm. A stepped gradient consisting of 0.05% TFA in water (solvent A) and acetonitrile–0.05% aq. TFA (9:1) (solvent B) was used for the reversed-phase separation (9–13% solvent B from 0 to 6 min, 13–26% solvent B from 6 to 12.5 min and 26–41% solvent B from 12.5 to 47.5 min). The retention times (t_R) for neurotensin and neurotensin fragments were characterized by injecting pure standards. The HPLC effluents were collected in 1-ml fractions using an LKB 2111 multirac fraction collector (LKB-Producter, Bromma, Sweden). Fractions were dried under nitrogen gas, reconstituted in neurotensin assay buffer (0.01 M potassium phosphate, 0.15 M sodium chloride, 0.1% sodium azide and 2% normal rabbit serum, pH 7.5) and analyzed by radioimmunoassay (RIA) for neurotensin.

Neurotensin radioimmunoassays

The RIA and iodination procedures have been described in detail previously [6]. We utilized three different neurotensin antisera in this study. Neurotensin antiserum 193 has been characterized previously [6]; it was used to quantitate neurotensin levels in the HPLC fractions containing neurotensin¹⁻¹³ (t_R = 19.8 min). Antiserum 205 against neurotensin¹⁻¹³ (generated in our laboratory) was used to measure the HPLC fractions containing the C-terminal fragment, neurotensin⁸⁻¹³ (t_R = 16.4). Another neurotensin antiserum (generous gift of J.S. Kizer, University of North Carolina, Chapel Hill, NC, U.S.A.), which is directed towards the midregion of neurotensin (amino acids 5–9) [12], was used to measure the HPLC fractions containing the N-terminal neurotensin fragments, neurotensin¹⁻⁸ (t_R = 11.1) and neurotensin¹⁻¹¹ (t_R = 14.3).

Statistics

Results are expressed as the mean \pm S.D. The Friedman test [13] was used to analyze data for statistical differences between means. Differences with a $p < 0.05$ were considered significant.

RESULTS

Fig. 1 shows the HPLC separation of neurotensin¹⁻¹³ and neurotensin fragment standards. The retention times for neurotensin¹⁻⁸, neurotensin¹⁻¹¹, neurotensin⁸⁻¹³ and neurotensin¹⁻¹³ are characterized as 11.1, 14.3, 16.4 and 19.8 min, respectively.

In order to determine the efficiency of the Sep-Pak extraction procedure, fasted dog plasma was spiked with graded amounts (6.2, 12.5, 25, 50, 100 and 200 pg/ml) of neurotensin¹⁻¹³ and was extracted using the neurotensin extraction procedure. The extracts were then assayed by the neurotensin RIA. The recovery of added neurotensin¹⁻¹³ using the Sep-Pak extraction procedure is shown in Fig. 2. The recovery of neurotensin was 90%. The recovery of neurotensin¹⁻¹³ (37.5 pg/ml, added to dog plasma) after the Sep-Pak extraction procedure through the analytical HPLC column was 72%.

The mean plasma levels of neurotensin¹⁻⁸, neurotensin¹⁻¹¹, neurotensin⁸⁻¹³ and neurotensin¹⁻¹³ in response to intraduodenal (i.d.) fat, as determined by our

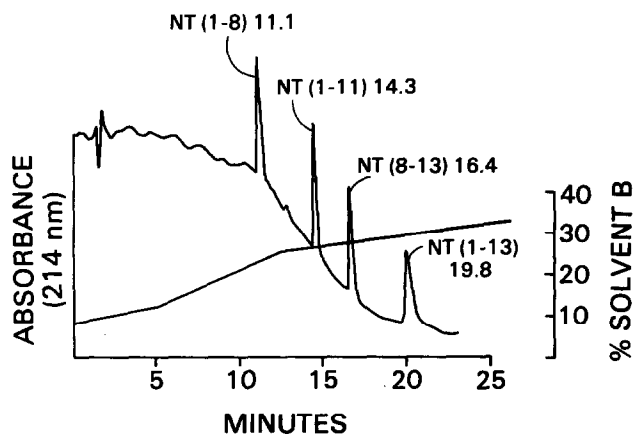


Fig. 1. HPLC separation of a standard mixture of neurotensin (NT) and NT fragments: NT¹⁻⁸ (500 ng), NT¹⁻¹¹ (250 ng), NT⁸⁻¹³ (500 ng) and NT¹⁻¹³ (500 ng). Retention times in minutes are shown after each form.

HPLC-RIA procedure, are shown in Fig. 3. A significant increase ($p < 0.05$) in the circulating levels of neurotensin¹⁻¹³, neurotensin¹⁻⁸ and neurotensin¹⁻¹¹ was observed at 15, 30 and 60 min when compared to basal levels. Although neurotensin⁸⁻¹³ levels increased during i.d. infusion of fat, they failed to achieve statistical significance ($p < 0.05$). Fig. 4 shows neurotensin levels in plasma that has not been subjected to HPLC separation. Plasma neurotensin levels were quantitated with an antiserum that fails to detect neurotensin¹⁻⁸, neurotensin¹⁻¹¹ or neurotensin⁸⁻¹³, but does detect neurotensin¹⁻¹³. As expected, neurotensin levels are comparable to those levels observed in plasma extracts subjected to HPLC separation.

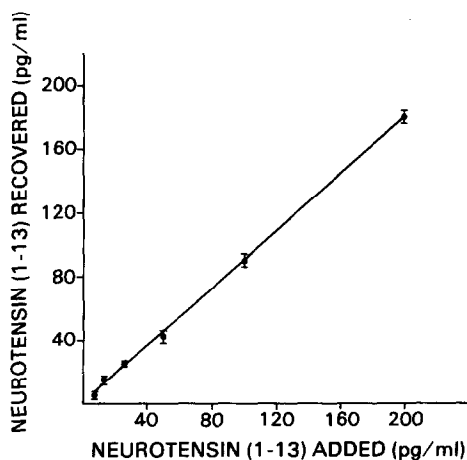


Fig. 2. Relationship between amounts of NT¹⁻¹³ added to and recovered from dog plasma. Known amounts of NT¹⁻¹³ were added to dog plasma and then separated from plasma by the Sep-Pak extraction procedure. The recovered NT¹⁻¹³ was quantitated by the neurotensin RIA.

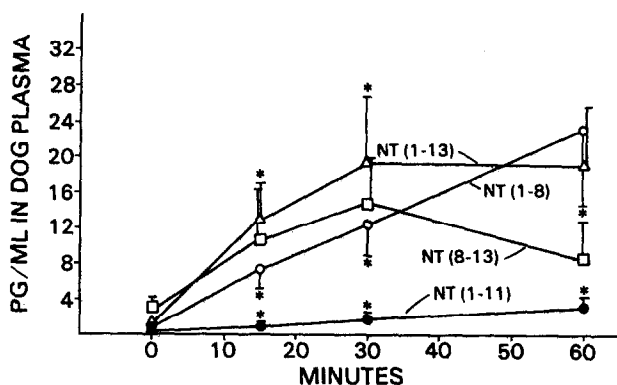


Fig. 3. NT¹⁻¹³, NT¹⁻⁸, NT¹⁻¹¹ and NT⁸⁻¹³ levels in canine plasma (six dogs) during infusion of i.d. lipomul as determined by HPLC-RIA (* = $p < 0.05$ versus 0 min).

DISCUSSION

The present study shows that neurotensin¹⁻¹³ and N-terminal fragments of neurotensin increase significantly during i.d. infusion of fat in dogs. Neurotensin⁸⁻¹³ levels failed to rise significantly. Authentic neurotensin¹⁻¹³ appears to be present in plasma collected from dogs given i.d. fat; this finding confirms our preliminary report [14]. The progressive increase of concentrations of neurotensin¹⁻⁸ and neurotensin¹⁻¹¹ during the infusion suggests that they are breakdown products of neurotensin¹⁻¹³. N-Terminal fragments of neurotensin (i.e. neurotensin¹⁻⁸ and neurotensin¹⁻¹¹) are biologically inactive [15].

Earlier studies show that exogenously infused neurotensin¹⁻¹³ is metabolized rapidly to its N- and C-terminal fragments in rats [16]. In vitro experiments have shown that incubation of neurotensin¹⁻¹³, ¹⁻⁸ and ⁸⁻¹³ in plasma resulted in stable levels of N-terminal fragments and a complete disappearance of C-termi-

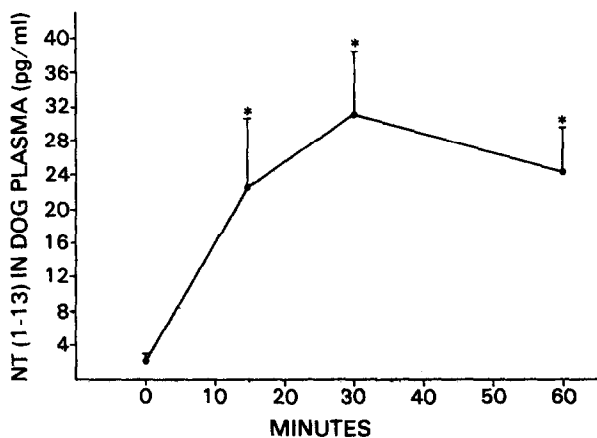


Fig. 4. NT¹⁻¹³ levels in plasma extracts not subjected to HPLC separation as determined by radioimmunoassay using antibody 193 (* = $p < 0.05$ versus 0 min).

nal fragments [17], which indicates that C-terminal fragments are destroyed much faster than N-terminal fragments.

Shulkes et al. [18] have shown that the major organs that metabolize neurotensin are the kidney, brain and gut, and that there is a greater clearance of C-terminal than of N-terminal fragments.

Intact neurotensin¹⁻¹³ has been previously found to increase in human plasma in response to oral feeding [19]. Neurotensin¹⁻¹³, however, was found to be a minor component of neurotensin immunoreactivity in human plasma, the major components being the N-terminal fragments, neurotensin¹⁻⁸ and neurotensin¹⁻¹¹. In the present study, we have fractionated the components into neurotensin¹⁻¹³ and its metabolic components, neurotensin¹⁻⁸, neurotensin¹⁻¹¹ and neurotensin⁸⁻¹³. In contrast to the earlier finding in humans [19], neurotensin¹⁻⁸ and neurotensin¹⁻¹³ were found in roughly equal amounts in the plasma of dogs, with a smaller concentration of neurotensin¹⁻¹¹. We have also found high levels of neurotensin⁸⁻¹³ in the peripheral dog plasma.

Neurotensin levels in human plasma have been measured using RIA without HPLC separation [20-22]. In these studies, neurotensin levels were significantly higher than the levels we have reported, since direct determination of plasma or of a plasma extract yields the total radioimmunoassayable neurotensin. Values in these human experiments reflect some magnitude of interference of unidentifiable plasma factors present in plasma.

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