Evidence for an Anion Exchanger in the Mouse Lacrimal Gland Acinar Cell Membrane

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Summary. Anion exchange transport in the mouse lacrimal gland acinar cell membrane was studied by measuring the intracellutar H^+ (pH_i) and Cl⁻ (aCl_i) activities with double-barreled ion-selective microelectrodes. In a HCO $\overline{1}$ -free solution of pH 7.4 (HEPES/Tris buffered), pH_i was 7.25 and aCl_i was 33 mm. By an exposure to a HCO₃ (25 mM HCO $\frac{1}{2}$ /5% CO₂, pH 7.4) solution for 15 min, aCl_i was decreased to 25 mm, and pH_i was transiently decreased to about 7.05 within 1 min, then slowly relaxed to 7.18 in 15 min. Intracellular $HCO₃$ concentration $[HCO₃]_i$, calculated by the Henderson-Hasselbalch's equation, was 11 mm at 1 min after the exposure and then slowly increased to 15 mm. Readmission of the $HCO₃⁻$ free solution reversed the changes in aCl_i and pH_i . The intracellular buffering power was about 40 mm/pH. An addition of DIDS (0.2 mm) significantly inhibited the rates of change in aCl_i , pH_i , and $[HCO_3^-]_i$ caused by admission/withdrawal of the $HCO₃$ solution and decreased the buffer value. Replacement of all Cl⁻ with gluconate in the $HCO₃$ solution increased pH_i , and readmission of Cl⁻ decreased pH_i . The rates of these changes in pH_i were reduced by DIDS by 32-45% but not by amiloride (0.3 mm). In the $HCO₃$ solution, a stimulation of intracellular $HCO₃⁻$ production by exposing the tissue to 25 mm NH $⁺$ increased *aCl_i* significantly. While in the HCO₃-free</sup> solution or in the $HCO₃⁻$ solution containing DIDS, exposure to $NH₄⁺$ had little effect on aCl_i . All of these findings were consistent with the presence of a reversible, disulfonic stilbene-sensitive Cl^{-}/HCO_{3}^{-} exchanger in the basolateral membrane of the acinar cells. The possibility of anion antiport different from onefor-one Cl^{-}/HCO_{3}^{-} exchange is discussed.

Key Words lacrimal gland **.** intracellular pH **.** intracellular $Cl^{-} \cdot Cl^{-}/HCO_{3}^{-}$ exchange \cdot DIDS \cdot membrane transport

Introduction

Oxygen consumption by the exocrine glands increases significantly during secretion *(see* Herzog, Sies & Miller, 1976) and part of the generated carbon dioxide hydrates to form H^+ and HCO_3^- in the intracellular fluid. The carbonic anhydrase (Henniger, Schulte & Spicer, 1983) may augment hydration. However, the regulation mechanisms of H^+ and $HCO₃⁻$ ion concentrations has not been clearly

elucidated. Recently, we showed in the mouse lacrimal gland a Na^+/H^+ antiporter existing in the basolateral membrane that was stimulated by the addition of acetylcholine (ACh). We also found that disulfonic stilbene (DIDS) increases the pH_i of ACh-stimulated cells and increases acid extrusion from the acid-loaded cells (Saito et al., 1987b, $1988a$). Furthermore, even in the presence of a high concentration (1 mm) of furosemide, which inhibits putative NaKCI₂ cotransport in this tissue (Suzuki & Petersen, 1985; Saito, Ozawa & Nishiyama, 1986), a significant uphill Cl^- uptake was observed after the cessation of the ACh stimulation (Saito et al., 1987*a*). This suggested the presence of a $Cl^$ uptake mechanism such as Cl^-/HCO_3^- exchange in addition to the $NaKCl₂$ cotransport in this tissue (Ozawa, Saito & Nishiyama, 1988). In the salivary glands (Novak & Young, 1986) and exocrine pancreas (Seow, Lingard & Young, 1986), the effects of $HCO₃⁻$ and stilbenes on the rates of fluid secretion suggested the presence of a Cl^-/HCO_3^- antiporter. A recent study of the pH_i in the salivary gland by a weak base DMO distribution method offered further evidence of the Cl^-/HCO_3^- antiporter (Pirani et al., 1987). In the present study we measured the intracellular H⁺ and Cl⁻ activities (aCl_i) in the acinar cells of the mouse lacrimal gland and studied the effects of the changes in the extra- or intracellular Cl^- and HCO_3^- concentrations in the presence and absence of DIDS. The results were qualitatively consistent with presence of a reversible $Cl^-/HCO_3^$ antiporter in the basolateral membrane. A preliminary account of the results has been presented (Ozawa, Saito & Nishiyama, 1987; Saito, Ozawa & Nishiyama, 1988b).

Materials and Methods

The methods of tissue preparation, superfusion and electrophysiological instrumentation have been described in detail elsewhere

(Saito et al., 1985, *1987a,b).* Briefly, the exorbital lacrimal gland of the white mouse was excised, tied on a platform, placed in a chamber and superfused with warmed $(37^{\circ}C)$, oxygenated saline solutions. The acinar cells were impaled with either H^+ or Cl⁻selective, double-barreled microelectrode. The outputs of the microelectrode against a reference salt-agar bridge placed in the bath solution were fed to a high input impedance electrometer and recorded on a chart recorder. Membrane potentials stable for at least 30 min and compatible to those reported earlier (Saito et al., 1985, 1987b) were accepted.

ION-SELECTIVE MICROELECTRODES

Microelectrodes were drawn from double-barreled borosilicate glass tubings and dehydrated by baking on a hot plate at 200° C for 2 hr. The inside surface of one barrel was silanized by exposing it to silicone vapor (trimethylchlorosilane and hexamethyldisilazane were used for CI⁻- and pH-electrodes, respectively). The liquid ion exchanger and internal filing solution used for the C1--electrode were Coming 477913 (Coming Medical, Medfield, MA) and 0.5 M KCl solution and for the pH-electrode were a neutral carrier-based liquid cocktail (purchased from Fluka, Zurich, Switzerland) and a pH buffer solution of pH 7.0 (Ammann et al., 1981). The electrodes were calibrated for a series of standard solutions before and after the experiments and those of the slope of greater than 50 mV for a decade activity change were employed. The electrodes that showed a sluggish response were bevelled by the method of Lederer, Spindler and Eisner (1979) and those with a response time of less than 10 sec were used for impalements.

SOLUTIONS AND CHEMICALS

The standard $HCO₃⁻$ free solution containing (in mm) 143 Na⁺, 115 Cl⁻, 25 gluconate, 4.7 K⁺, 1.1 Mg²⁺, 2.6 Ca²⁺, 4.9 pyruvate, 2.7 fumarate, 4.9 glutamate, 2.8 D-glucose and 5 HEPES/Tris buffer (pH 7.4) was saturated with 100% O_2 gas. Bicarbonatebuffered solution $(HCO₃$ solution) was prepared by replacing gluconate with $HCO₃⁻$ in the standard solution and gassed with a gas mixture of 95% O_2 and 5% CO_2 . Chloride-free HCO₃-buffer solution was made by replacing all Cl^- with gluconate. 4,4diisothiocyanatostilbene-2,2-disulfonic acid (DIDS) was purchased from Sigma (St. Louis, MO) and amiloride was a gift from Merck & Co. (Rahway, NJ).

STATISTICS

The data values in the text are given as the mean \pm SEM. The difference between the two means was tested by Student's t test and was considered significant when $P < 0.05$.

Results

EFFECTS OF EXTERNAL HCO_3^- and DIDS ON INTRACELLULAR CI⁻ ACTIVITY

Figure 1 shows the effects of the $HCO₃$ -solution on basolateral membrane potential (V_m) and aCl_i . It

Fig. 1. Effects of HCO₃ solution on membrane potential (V_m) and intracellular CI- activity (aCl_i) in the absence (left panel) and in the presence (right panel) of DIDS; a continuous record from a cell. At the times indicated by the top horizontal bars, $HCO₃$ free solution (HEPES/Tris buffer, 100% O₂, pH 7.4) was replaced by HCO₃-solution (25 mM HCO₃/5% CO₂). DIDS (0.2) mm) was added to the solution 16 min before the second exposure to $HCO₃$ solution. The CI- concentration in the solutions was constant throughout. Exposure to $HCO₃$ solution hyperpolarized V_m and decreased aCl_i . Addition of DIDS itself significantly hyperpolarized V_m , and reduced aCl_i slowly. In the presence of DIDS, the rate of aCl_i decrease induced by exposure to $HCO₃$ solution was smaller and the direction of V_m change was reversed *(see also* Table 1)

was expected that if a Cl^-/HCO_3^- antiporter existed in the acinar cell membrane, an abrupt increase in the external $HCO₃$ concentration would cause a decrease in aCl_i and its return to the HCO₃-free solution would increase aCl_i according to the reversal of the $HCO₃⁻$ concentration gradient. With DIDS in the superfusate, smaller changes in aCl_i were expected. The results showed that when the superfusate was changed from the $HCO₃⁻$ free to the $HCO₃$ solution, V_m hyperpolarized by 4 mV (Fig. 1, Table 1). aCl_i decreased by about 5 mm within 15 min rapidly for the initial 1-2 min period then slowly. Reintroduction of the $HCO₃⁻$ free solution restored V_m and aCl_i values to those of the control. However, the much earlier restoration of aCl_i than that of V_m indicated that the increase of aCl_i induced by the removal of the external $HCO₃$ was not merely the result of electrodiffusion.

The addition of 0.2 mm DIDS to the $HCO₃^-$ -free solution significantly hyperpolarized V_m and slowly but steadily decreased aCl_i by about 2 mm within 20 min. In the presence of DIDS, V_m often depolarized with the exposure to the $HCO₃⁻$ solution, but thereafter tended to repolarize. The rate of decrease in aCl : (0.8 \pm 0.2 mm/min) was significantly slower than those in the absence of DIDS (1.5 \pm 0.2 mm/ min). Readmission of the $HCO₃$ -free solution caused a significant hyperpolarization of V_m . The increase of aCl_i was extremely slow in comparison with those of the controls (Table 1).

			Bath solution		
	$HCO3$ -free solution		$HCO3$ solution		$HCO3$ -free solution
Control $(n = 7)$					
V_m (mV)	-37.6 ± 1.3		$a-41.6 \pm 1.1$		-37.7 ± 1.0
ΔV_m (mV)		-4.0 ± 0.5		$+3.9 \pm 0.3$	
$aCli$ (mm)	29.1 ± 1.8		24.0 ± 1.8		28.8 ± 1.5
ΔaCl_i (mm)		-5.1 ± 0.8		$+4.9 \pm 0.7$	
rate (mM/min)		-1.5 ± 0.2		$+1.4 \pm 0.2$	
Test: DIDS 0.2 mm $(n = 5)$					
V_m (mV)	$b - 47.2 \pm 2.3$		-46.0 ± 2.4		ϵ – 50.4 \pm 2.4
ΔV_m (mV)		$^{h}+1.2 \pm 1.5$		$f - 4.4 \pm 1.7$	
aCl (mm)	27.6 ± 1.2		24.4 ± 1.2		26.2 ± 1.5
ΔaCl_i (mm)		-3.2 ± 0.7		$^{b}+1.8 \pm 0.6$	
rate (mM/min)		$a=0.8 \pm 0.2$		$+0.4 \pm 0.1$	

Table 1. Changes in membrane potential (V_m) and intracellular Cl activity (aCl_1) induced by admission and removal of HCO; solution in the presence and in the absence of DIDS

While monitoring the membrane potential (V_m) and intracellular CI⁻ activity (aCl_i) , the superfusate was changed in a sequence of HCO₃-free, HCO₃ and HCO₃-free solution. Values are the mean \pm sem. Values for HCO₃ solution are those 15 min after the admission. During the tests, DIDS was added to the $HCO₃$ -free solution 15-20 min prior to the experiments and was present throughout. ΔV_m and ΔaCl_i denoted the differences in V_m and aCl_i , respectively, between two conditions. The rates of change in aCl_i were determined from the slope for the initial 0-2 min period after the admission of new superfusate. " $P < 0.05$, $bP < 0.01$, $P < 0.001$: significantly different from the control conditions.

The above findings were consistent with those of a Cl^-/HCO_3^- antiport. However, since this acinar cell membrane showed a CI- conductance that was inhibited by DIDS (Saito et al., $1987a$), the changes in *aCli* described above could alternatively be explained by the effects of membrane potential changes and of inhibition of the Cl^- conductance by DIDS. Therefore, to determine whether the observed Cl⁻ movements were accompanied by $HCO₃$ movements, pH_i was monitored under identical experimental conditions.

EFFECT OF EXTERNAL HCO_3^- and DIDS ON pH_i

Exposure to the $HCO₃⁻$ solution was expected to cause a transient decrease in pH_i due to rapid diffusion of $CO₂$ into the tissue and then a slow relaxation towards the initial level due to $H⁺$ extrusion (Boron & De Weer, 1976) via the Na^+/H^+ exchanger (Saito et al., 1987b, 1988a,b). If a HCO₃/ Cl^- exchanger existed and transported HCO_3^- out of the cell, the addition of DIDS would inhibit $HCO₃$ efflux and stimulate the increase of pH_i in the relaxation phase. Moreover, a decrease in the intracellular buffering power was expected, since the buffering power under this experimental condition involved both a chemical buffering action and an acid/base transport across the membranes.

As shown in Fig. 2, upon exposure to the $HCO₃$ solution, pH_i was transiently decreased by about 0.2 unit, probably due to rapid entry of $CO₂$, then relaxed towards the initial level. Intracellular $HCO₃⁻$ concentration $[HCO₃⁻]$ calculated by the Henderson-Hasselbalch's equation was 10.9 mm at the transient peak pH_i (about 1 min after the exposure). Thereafter, $[HCO₃]_i$ increased up to 15.3 mm in 15 min (Table 2). The rapid initial increase in $[HCO₃⁻]$ _i could be explained by the processes that (i) CO₂ diffused into the cell was instantly hydrated to produce HCO_3^- and (ii) extracellular HCO_3^- ions itself entered the cell by simple diffusion or mediated by a specific $HCO₃⁻$ transport mechanism. Although the subsequent slow increase in $[HCO₃]_i$ cannot be explained in terms of a simple diffusion of $HCO₃$ ions with respect to the electrochemical potential gradient across the membrane, it can be expressed as the result of either or both (i) $H⁺$ extrusion at a higher rate than that of HCO_3^- extrusion and/or (ii) $HCO₃$ uptake against the electrochemical potential gradient mediated by a specific $HCO₃⁻$ transport process.

After readmission of the $HCO₃$ -free solution, pH_i returned to the control level in two phases: an initial peak alkalinization due to a rapid decrease in $CO₂$ concentration and dehydroxylation of $HCO₃$ ions (HCO₃ \rightarrow OH⁻ + CO₂) and a slow acidification due to extrusion of $HCO₃⁻$ and/or OH⁻. The intracellular buffering values were determined from the immediate transient changes in the pH_i (either at the peak (B_i) , or by extrapolating the slope of pH_i change after the transient peak-to-time zero (B_i^0))

Fig. 2. Effects of HCO₃ solution on intracellular pH in the absence (left panel) and in the presence (right panel) of DIDS; a continuous record from a cell. Experimental condition was the same as in Fig. 1. Immediately after the exposure to the HCO \tilde{i} solution, pH_i decreased transiently reaching the peak in 1 min then relaxed gradually towards the initial level. From the magnitude of the initial peak changes in pH_i or by extrapolating the slope of slow βH_i relaxations to time zero, the intracellular buffering power was determined *(see* text). DIDS decreased both the slope of pH_i relaxation and the buffering power *(see Table 2)*

Table 2. Effect of DIDS on intracellular pH, HCO₃ concentration and buffer value and on the rate of acid/base transport

	Bath solution				
	a) $HCO3$ -free solution	$HCO3$ solution		$HCO3$ -free solution	
		b) Peak	$c)$ 15 min	b) Peak	$c)$ 15 min
Control $(n = 9)$					
pH_i $[HCO3]i$ (mM) $\Delta[\text{HCO}_3^-]$; (mM)	7.26 ± 0.05	10.5 ± 1.1 14.8 ± 1.3	7.03 ± 0.05 7.18 ± 0.04 $+4.3 \pm 0.4$		7.46 ± 0.05 7.27 ± 0.04
B_i (mm/pH) (B_i^0) (mm/pH) Δ pH \cdot B _i / Δt (mm/min)		48.5 \pm 6.5 (37.2 ± 5.7)	-1.55 ± 0.16	55.4 ± 5.8 (43.8 ± 4.1) $+2.02 \pm 0.21$	
Test: DIDS 0.2 mm $(n = 6)$ pH_i $[\text{HCO}_3^-]$; (mm) $\Delta[\text{HCO}_3^-]_i$ (mm)	7.24 ± 0.06	6.96 ± 0.06 8.7 ± 1.0 $4+2.8 \pm 0.4$	7.08 ± 0.06 11.5 ± 1.3		7.44 ± 0.07 7.28 \pm 0.07
B_i (mm/pH) (B_i^0) (mm/pH) Δ pH _i · $B_i/\Delta t$ (mm/min)		430.5 ± 3.6 (24.3 ± 2.1) $b - 0.53 \pm 0.11$		$^{b}31.8 \pm 3.0$ $b(26.5 \pm 2.1)$ $^{b}+0.76 \pm 0.14$	

The protocol of the experiment is the same as in Table 1. Mean \pm SEM. The intracellular HCO₃ concentration [HCO₃]_i was calculated by the Henderson-Hasselbalch's equation. Values for pH_i and [HCO₃]_i are a) prior to, b) at the transient peak change in pH_i (~1 min) and c) 15 min after the replacement of the bath solution. $\Delta[HCO₃]_i$ shows the difference in $[HCO₃^o]$ between b) and c). Intracellular buffer value B_i was calculated by the peak change in pH_i and B_i^o was by extrapolation of the time course of pH_i change to time zero. $\Delta pH_i \cdot B_i/\Delta t$ denoted the rate of acid/base transport calculated from the steepest slope of pH_i change ($\Delta pH/\Delta t$) 1-5 min after the replacement of the bath solution. " P < 0.05, $bP < 0.01$: significantly different from these in the control conditions.

induced by the addition and the withdrawal of the $HCO₃$ solution (Roos & Boron, 1981; Saito et al., 1988a). As expected, DIDS significantly ($P < 0.05$) reduced the buffer values and the decrease of pH_i after the readmission of the $HCO₃$ -free solution (right panel in Fig. 2, Table 2). However, in contradiction to our expectation, DIDS reduced the increase of pH_i (i.e., reduced the increase of $[HCO_3^-]_i$)

during its exposure to the $HCO₃⁻$ solution (right panel in Fig. 2). This could be explained if the slow relaxation of pH_i after the initial peak acidification was caused by both H^+ efflux via the Na⁺/H⁺ antiporter (Saito et al., 1987b, 1988a) and by $HCO₃$ *influx* mediated by a specific mechanism across the membrane, and if the latter was inhibited by DIDS. However, under this condition, a one-for-one C1-/

Fig. 3. Effect of Cl⁻ removal from the superfusing solution on pH_i in the absence (left panel) and in the presence (right panel) of DIDS (0.2 mM); a continuous record from a cell. During the time periods marked by the top bars, all Cl^- in the HCO_3^- solution was replaced by equimolar gluconate *(see* Table 3). Note that the rate of increase in pH_i produced by Cl⁻ removal was slowed by DIDS

Table 3. Effect of Cl⁻ removal from the bath solution on membrane potential, intracellular pH and $HCO₃$ concentration

	Bath solution				
	Cl^- solution		Cl^- -free solution		Cl^- solution
Control					
V_m (mV)	-45.0 ± 2.5		-42.0 ± 1.9		-44.4 ± 2.0
pH_i	7.19 ± 0.03		47.33 ± 0.03		7.17 ± 0.03
[HCO ₃](mm)	14.4 ± 1.0		20.1 ± 1.3		13.7 ± 0.9
$\Delta[\text{HCO}_3^-]$ (mM)		$+5.7 \pm 0.7$		-6.4 ± 0.6	
Test: DIDS 0.2 mM					
V_m (mV)	$b - 53.7 \pm 1.9$		$b - 52.0 \pm 1.4$		$b - 55.5 \pm 1.9$
pH_i	7.14 \pm 0.03		47.25 ± 0.03		7.18 \pm 0.04
$[\text{HCO}_3^-]_i$ (mm)	12.9 ± 0.9		16.8 ± 1.0		14.3 ± 1.1
$\Delta[\text{HCO}_3^-]$ (mM)		3.8 ± 0.4		$f - 2.5 \pm 0.4$	

^a The membrane potential (V_m) and intracellular pH (pH_i) were determined in the control and the test (0.2 mm DIDS added to the solutions) conditions in the same cells ($n = 5$). Mean \pm SEM. HCO₃-buffered solutions (25 mM $HCO₃⁻/5\% CO₂$) were used throughout. Values for the Cl⁻-free conditions (Cl⁻ replaced with gluconate) were those 6 min after the replacement. $\Delta[\text{HCO}_3^-]_i$ shows the net change in $[\text{HCO}_3^-]_i$. nP < 0.05 significantly different from these in the CI- solution, $bP < 0.05$; $cP < 0.01$: significantly different from these in the absence of DID&

HCO₃ exchanger could mediate HCO₃ efflux but not *influx,* since the inward chemical potential gradient for Cl^- (-30 mV) was greater than that for $HCO₃⁻$ (smaller than -24 mV). Accordingly, an inhibition of the one-for-one Cl^-/HCO_3^- exchanger by DIDS, if present, should enhance the increase of pH_i .

EFFECT OF REMOVAL OF EXTERNAL Cl^- ON pH_i

The effect of removing Cl^- from the extracellular fluid was observed on pH_i . In the tissues superfused with the $HCO₃$ solution, a sudden replacement of the extracellular Cl^- with gluconate was expected to cause efflux of the intracellular CI- in exchange for the extracellular $HCO₃⁻$. The results showed (Fig. 3, Table 3) that on exposure to the C1--free solution, V_m was slightly depolarized, and the pH_i was increased at an initial rate of 0.026 pH/min. Intracellular $HCO₃⁻$ concentration was increased (P $<$ 0.05) from 14.4 \pm 1.0 mm to 20.1 \pm 1.3 mm in 6 min. Readmission of Cl^- decreased pH_i at a rate of 0.035 pH/min. Complete recovery of pH_i and $[HCO₃]_i$ was obtained in about 15 min. These changes in pH_i , induced by the withdrawal and the readmission of Cl⁻, were significantly decreased by 0.2 mM DIDS (Table 3); $[HCO₃⁻]$ _i increased from 12.9 ± 0.9 mm to 16.8 ± 1.0 mm during the Cl⁻ free condition, and decreased to 14.3 ± 1.1 mm after the readmission of Cl^- to the solution. These changes of pH_i were more significantly inhibited by 1 mm DIDS. On the other hand, the presence of 0.3 mm amiloride, a dose sufficient to inhibit the Na^+/H^+ antiport by more than 50% (Saito et al., 1987b), had little effect on the increase in pH_i induced by the Cl⁻-free solution.

	Prior to $NH4$		6 min after $NH4$
$HCO3$ solution			
Control $(n = 13)$			
V_m (mV)	-40.8 ± 0.6		-36.8 ± 0.6
aCl ; (mm)	32.6 ± 0.6		436.6 ± 0.6
ΔaCl (mm)		$+4.0 \pm 0.4$	
DIDS 0.2 mm $(n = 4)$			
V_m (mV)	$a - 53.0 \pm 3.9$		$b - 47.9 \pm 2.3$
$aCli$ (mm)	33.0 ± 1.6		431.5 ± 1.5
ΔaCl ; (mm)		$\frac{6-1.5}{2} \pm 0.3$	
$HCO3$ -free solution ($n = 7$)			
V_m (mV)	-38.9 ± 0.4		-38.4 ± 0.6
$aCli$ (mm)	437.5 ± 1.3		38.4 ± 1.5
ΔaCl ; (mm)		$4+0.9 \pm 0.6$	

Table 4. Effect of alkalinizing the intracellular fluid by exposing to NH_4 containing solution on intracellular Cl⁻ activity

The values (mean \pm SEM) are those prior to and 6 min after the application of solutions containing 25 mM NH₄^{$+$} (Na⁺ replaced by NH₄^{$+$}). AaCl_i denotes the net change in aCl_i. "P < 0.05; $^{\circ}P$ < 0.01, $^{\circ}P$ < 0.001: significantly different from the respective controls.

Fig. 4. Effect of NH $^+_4$ on aCl_i in the absence (left panel) and in the presence (right panel) of DIDS (0.2 mm). Intracellular alkalinization was induced by replacing 25 mm $Na⁺$ with $NH₄⁺$ in the $HCO₃$ solution. Non-ionic diffusion of NH₃ into the cell alkalinizes the intracellular fluid via a reaction $NH_3 + H^+ \rightarrow NH_4^+$. which in turn stimulates hydration of $CO₂$, increases the intracellular $HCO₃⁻$ concentration and $Cl₋/HCO₃⁻$ exchange transport across the membrane entailing an increase in the aCl_i . The increase in aCl_i induced by NH_4^+ was completely abolished in the presence of DIDS *(see also* Table 4)

EFFECT OF NH⁺ ON INTRACELLULAR CI⁻ **ACTIVITY**

Prior to this experiment it was predicted that, in the $HCO₃$ solution, the addition of NH₄⁺ would increase the intracellular HCO_3^- concentration, which in turn would increase aCl_i via Cl^-/HCO_3^- exchange. In a solution of pH 7.4, about 1% of the administered NH₄ (pKa = 9.37 at 37°C) exists as $NH₃$, which freely diffuses into the cell, combines with intracellular H^+ and forms NH_4^+ (see Boron & De Weer, 1976), thereby accelerating hydration of $CO₂$ and increasing $[HCO₃]_i$. As predicted (Fig. 4)

and Table 4), the addition of $25 \text{ mm} \text{ NH}_4^+$ increased aCl_i from 32.6 \pm 0.6 to 36.6 \pm 0.6 mm (P < 0.05) in 6 min and this NH_4^+ -induced increase in aCl_i was almost abolished in the presence of 0.2 mm DIDS. In HCO₃-free solution, the addition of NH $₄$ did not</sub> increase aCl_i significantly (37.5 mm *vs.* 38.4 mm).

Discussion

Chloride uptake by the lacrimal acinar cells across the basolateral membrane has been attributed to either NaKC_{I2} cotransport (Suzuki & Petersen, 1985; Saito et al., 1986; Ozawa et al., 1988) or $Cl⁻$ conductance (Marty, Tan & Trautmann, 1984). The present study offered evidence of an anion exchanger in the basolateral membrane that should contribute for uphill Cl⁻ uptake. The results showed that under constant Cl^- concentration in the superfusates (i) aCl_i was increased either by a decrease in the extracellular $HCO₃⁻$ concentration (Fig. 1, Table 1) or by an increase in $[HCO₃⁻]$ _i (Fig. 4, Table 4), (ii) under constant $HCO₃⁻$ and $CO₂$ concentrations in the superfusate, $[HCO₃₃]$, was increased by a reduction of the extracellular Cl^- concentration (Fig. 3, Table 3), and (iii) all of these changes in aCl_i and $[HCO₃]_i$ were significantly inhibited by DIDS. These findings indicated that a Cl^- flux in one direction was coupled to a $HCO₃⁻$ flux in the opposite direction across the basolateral membrane in a DIDS-sensitive manner. This mutual transconcentration effect between Cl^- and HCO_3^- can best be explained by a Cl^-/HCO_3^- antiporter in the membrane. The antiporter is most likely located in the

basolateral membrane since it is well known that disulfonic stilbenes do not permeate the biological membranes (Cabantchik, Knauf & Rothstein, 1978). The antiporter would then contribute to the uphill Cl^- uptake into the acinar cells particularly when intracellular $HCO₃⁻$ production was enhanced by secretory stimuli (Fig. 4, Table 4). Chloride ions thus accumulated leave the cell across the luminal membrane through a Ca^{2+} -dependent Cl^- channel (Marty et al., 1984; Findlay & Petersen, 1985; Saito et al., 1987a) providing electrical and osmotic driving forces for $Na⁺$ and $H₂O$ transport into the acinar lumen.

The present results, however, do not exclude the role of the NaKCI₂ cotransporter in Cl^- uptake into the acinar cells. The presence of the $Cl^-/HCO_3^$ exchanger rather explains CI⁻ movements such as the uphill Cl^- uptake observed after the cessation of ACh stimulation in the presence of 1 mm furosemide (Saito et al., $1987a$) that was difficult to interpret in terms of NaKC₁, cotransport alone. Our recent studies on the mechanism of Cl⁻ uptake after ACh-stimulation showed that furosemide or DIDS alone, each in a 1 mm concentration, inhibited $Cl^$ uptake only by 40-30%, however, the inhibitory effects were additive and a combination of the two drugs inhibited more than 70% of the uptake (Ozawa et al., 1988). Thus we suspect the coexistence of both NaKCl₂ cotransport and Cl⁻/HCO₃ antiport in the basolateral membrane. A similar model of Cl⁻ transport across the basolateral membrane has been proposed for the mandibular salivary gland (Novak & Young, 1986; Pirani et al., 1987).

However, the detailed mechanism of the CI-/ $HCO₃$ antiport in this tissue awaits further elucidation. Among various kinds of tissues, different kinds of anion antiporter have been suggested: namely, electroneutral Cl⁻/HCO₃ (see Knauf, 1986; Hoffmann, 1986), NaCO₃/Cl⁻, Na⁺(HCO₃)₂/Cl⁻ and $Na^+ \cdot HCO_3^-/H^+ \cdot Cl^-$ (see Boron, 1986) antiporters. One interesting finding in respect to the mechanism of the anion exchanger in this tissue was that DIDS inhibited the rate of the increase in pH_i during exposure to the $HCO₃$ solution (Fig. 2). The rate of pH_i increase was reduced from 0.034/min to 0.017/ min in the presence of DIDS. This was contrary to our prediction that DIDS would facilitate the rate of acid extrusion from the cells by inhibiting the C1-/ $HCO₃⁻$ antiporter, an acid-loading machinery. In the previous study (Saito et al., 1988a), we observed that DIDS facilitated acid-extrusion from the cells stimulated by ACh or acid-loaded by a NH_4^+ -prepulse method (Boron & De Weer, 1976) in the $HCO₃$ -free solution. This finding ruled out the possibility of inhibition of the Na^+/H^+ antiporter by DIDS. Also in the present study amiloride had little

effect on the increase of pH_i induced by an exposure to the Cl⁻-free solution. Therefore, the possibility of electroneutral Cl^-/HCO_3^- antiport in this tissue must be re-examined. In the present study, intracellular $HCO₃$ concentration reached to about 11 mm in one min after exposure to the $HCO₃⁻$ solution and increased further thereafter. This increase in $[HCO₃]_i$ was significantly inhibited by DIDS (Table 2). Simple diffusion or one-for-one Cl^{-}/HCO_{3}^{-} antiport cannot explain the increase in the $HCO₃$ concentration beyond 10 mM with respect to the electrochemical potential gradient across the membrane. Therefore, we speculate that the coupling ratio of this DIDS-sensitive Cl^-/HCO^-_2 exchanger is smaller than unity, or the anion exchanger is also coupled to potential gradient of other ion species such as H^+ , Na⁺ or K⁺. In our preliminary study of this tissue, the rate of $HCO₃⁻$ extrusion from the $HCO₃$ -loaded cells in the standard solution was enhanced by an increase in the external $Cl⁻$ concentration but was extremely slow in a Na+-free N-methyl-D-glucamine solution rich in CI- *(unpublished data).* Furthermore, it is difficult to interpret the reason why the exposure to the $HCO₃⁻$ solution causes a membrane hyperpolarization in the absence of DIDS and a depolarization in the presence of DIDS (Figs. 1 and 2). These changes in V_m may be relevant to the DIDS-sensitive $HCO₃⁻$ transport mechanism or be derived from pH-sensitive membrane conductance such as those demonstrated in other tissues. Further studies on these uncertainties are needed.

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