Inhibition of Highly Purified Mammalian Phospholipases A₂ by Non-Steroidal Anti-Inflammatory Agents

MODULATION BY CALCIUM IONS

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Highly purified Ca²⁺-dependent phospholipases A₂ that were isolated from human platelets, rabbit alveolar macrophages and peritoneal polymorphonuclear leucocytes and were active in the neutral-to-alkaline pH range were inhibited 50% by 75 μ M-indomethacin in the presence of 5.0mM added Ca²⁺. Sodium meclofenamate and sodium flufenamate were also inhibitory; the sensitivity to inhibition was a function of Ca²⁺ concentration. The dose for 50% inhibition (ID₅₀) with meclofenamate was 0.4 mM in the presence of 2.5 mM added Ca²⁺, but 50 nM in the presence of 0.5 mM added Ca²⁺. Thus, inhibition of phospholipase A₂ activity by non-steroidal anti-inflammatory agents via Ca²⁺ antagonism may significantly contribute to the mechanism of drug action.

Arachidonate mobilization and prostaglandin production during inflammation is well-documented (Vane, 1971, 1972; Humes et al., 1977) and until recently it was thought that the primary mechanism of action of non-steroidal anti-inflammatory agents was to block further metabolism of arachidonate by inhibition of the cyclo-oxygenase (Lands & Rome, 1976; Humes et al., 1977). Kaplan et al. (1978) have shown that indomethacin also inhibits phospholipase A₂ activity of rabbit polymorphonuclear leucocytes in the presence of 10mm added Ca²⁺, but significant inhibition was apparent at concentrations of drug much greater than that required to block the cyclo-oxygenase (Humes et al., 1977). We have recently isolated phospholipase A, from human platelets and rabbit alveolar macrophages as well as rabbit polymorphonuclear leucocytes (Franson & Waite, 1978; Jesse & Franson, 1979). These enzymes are toally Ca²⁺-dependent (i.e. inactive in the absence of Ca^{2+}), but are maximally active with only 0.5-0.75 mm added Ca²⁺. In view of extensive work by Northover (1977) that demonstrates that non-steroidal anti-inflammatory agents function in part as Ca²⁺ antagonists, we have examined the effect of Ca²⁺ on the sensitivity of these highly purified enzymes to inhibition by non-steroidal anti-inflammatory agents and provide evidence that inhibition of phospholipases A2 at physiological Ca²⁺ concentration may contribute to the antiinflammatory action of these drugs.

Materials and Methods

Membrane-associated phospholipases A₂ were isolated from intact cells (human platelets, BCGinduced alveolar macrophages and glycogeninduced peritoneal polymorphonuclear leucocytes from rabbits) by methods previously described, using solubilization by H_2SO_4 and ion-exchange chromatography. The platelet phospholipase A, was purified 3500-fold compared with the homogenate by this method and the leucocyte and macrophage enzymes were purified approx. 1500-fold (Weiss et al., 1975; Franson & Waite, 1978; Jesse & Franson, 1979). Phospholipase A₂ activity was measured by established methods with either pure 1-acvl-2-[14C]linoleoyl-sn-glycero-3-phosphoethanolamine or *Escherichia coli* grown on [1-14C]oleate (to specifically label the 2-position of phospholipids) and then autoclaved to destroy microbial phospholipid-splitting activity. Reaction mixtures contained the indicated concentrations of CaCl, and/or drug, 75 nm buffer (Tris/maleate, pH 7.5, for leucocyte and macrophage; Tris/HCl, pH 9.5, for the platelet), 2.5×10^8 autoclaved E. coli cells (7000 c.p.m. corresponding to 5 nmol of phospholipid) or 40 nmol (10000 c.p.m.) of a sonicated aqueous dispersion of 1-acyl-2-[14C]linoleoyl-sn-glycero-3-phosphoethanolamine. The total volume of the reaction mixtures was 0.5 ml with E. coli substrate and with 1-acyl-2-[¹⁴C]linoleoyl-sn-glycero-3-1.0 ml phosphoethanolamine. Incubation time at 37°C

and enzyme content (0.5–4.0 μ g of protein) were adjusted to ensure linear kinetics. The reactions were stopped by the addition of 3 vol. of chloroform/methanol (1:2, v/v) and the lipids were extracted and isolated as previously described (Franson & Waite, 1978). Phospholipase A, activity is calculated as nmol of non-esterified fatty acid formed/unit time and is expressed as a percent of the control (where the control value is the 100% uninhibited activity). Indomethacin (Sigma, St. Louis, MO, U.S.A.) was freshly prepared in ethanol for each experiment and appropriate controls were run; sodium meclofenamate and sodium flufenamate were supplied by Warner-Lambert/Parke-Davis (Ann Arbor, MI, U.S.A.) and were watersoluble and stored in solution at -10° C. Protein was measured by the method of Bradford (1976), with ovalbumin as a standard.

Results

The inhibition of phospholipases A_2 purified from human platelets, and rabbit polymorphonuclear leucocytes and macrophages is shown in Fig. 1. In



Fig. 1. Inhibition of phospholipases A_2 by indomethacin Phospholipase A₂ activity was measured with autoclaved E. coli as substrate in the presence of 5.0 mM added Ca²⁺ and 0.5–4.0 μ g of protein as described in the Materials and Methods section. Each point is the mean for duplicate or triplicate determinations. All results are corrected for nonenzymic release, which was constant and less than 0.045 nmol of non-esterified fatty acid (1.2% of total label). The enzyme controls (i.e. uninhibited activity) ranged in activity from 0.6 to 1.0 nmol of non-esterified fatty acids/10min incubation and were unaffected by ethanol concentrations (less than 1%) used to dissolve indomethacin. The source of the phospholipase A_2 was: \triangle , polymorphonuclear leucocytes; O, platelets; □, macrophages.

the presence of 5.0 mm-Ca^{2+} and $[1^{-14}\text{C}]$ oleatelabelled *E. coli* as substrate, activity was inhibited in a dose-dependent fashion by indomethacin; the dose for 50% inhibition (ID₅₀) was approx. 75 μ M in each case. In subsequent studies, we used the phospholipase A₂ isolated from the polymorphonuclear leucocyte and pure 1-acyl-2-[¹⁴C]linoleoyl-sn-glycero-3-phosphoethanolamine as substrate.

The non-steroidal anti-inflammatory agents sodium meclofenamate and sodium flufenamate, analogues of indomethacin, also inhibited phospholipase A₂ activity (Fig. 2). The ID₅₀ with 2.5 mm added Ca²⁺ was comparable with that for indomethacin (Fig. 1) (approx. $100 \,\mu$ M). Thus the inhibition of phospholipid-splitting activity by nonsteroidal anti-inflammatory agents under these conditions is considerably less sensitive, by several orders of magnitude, than the well-established inhibition of the cyclo-oxygenase by these agents (Lands & Rome, 1976; Humes et al., 1977), and it is currently thought that the primary site of drug action with respect to prostaglandin production is at the level of the cyclo-oxygenase and further metabolism of arachidonate rather than the mobilization of arachidonate from complex lipids such as membrane phospholipid.



Fig. 2. Inhibition of polymorphonuclear-leucocyte phospholipase A_2 by sodium meclofenamate and sodium flufenamate

Activity was measured in the presence of 2.5 mM added Ca²⁺ and pure 1-acyl-2-[¹⁴C]linoleoyl-sn-glycero-3-phosphoethanolamine as substrate. Reaction mixtures contained 1.0 μ g of protein and were incubated at 37°C for 15 min. Each point in Figs. 2 and 3 is the mean for triplicate determinations corrected for non-enzymic release, which was 0.8 nmol of non-esterified fatty acids (2% of total label). The activity of the enzyme control (i.e. 100%) was 8.0 nmol of non-esterified fatty acids/15 min. Symbols: Δ , flufenamate; O, meclofenamate.



Fig. 3. Inhibition of polymorphonuclear-leucocyte phospholipase A_2 by sodium meclofenamate as a function of Ca^{2+} concentration

Reaction mixtures containing various amounts of $CaCl_2$ were as described in Fig. 2. The concentration (mM) of added Ca^{2+} was: \triangle , 5.0; O, 2.5; \bullet , 1.0; \Box , 0.5.

Because the isolated phospholipases A₂ are extremely sensitive to, and dependent on, Ca^{2+} for reactivity (Franson & Waite 1978; Jesse & Franson, 1979) and because of previous reports that suggest non-steroidal anti-inflammatory agents function as Ca^{2+} antagonists (Northover, 1977), we examined the possibility that the sensitivity of phospholipases A₂ to inhibition by non-steroidal anti-inflammatory agents may be modulated by Ca^{2+} . Fig. 3 demonstrates clearly that the extent of inhibition by a given concentration of meclofenamate is, indeed, dependent on the concentration of added Ca²⁺. Thus with 2.5 mm-Ca²⁺ the ID_{50} was 0.4 mm, whereas with 0.5 mm-Ca²⁺ the ID_{50} was 50 nm, or 10⁴ times more sensitive. In similar experiments with the membranous substrate, autoclaved E. coli, and $0.5 \,\mathrm{mM}$ added Ca²⁺, inhibition of the polymorphonuclear-leucocyte phospholipase A, was reproducibly measured at 10 pm-meclofenamate (26%) and was 50% inhibited with 50 pm concentrations of the drug (results not shown). Although somewhat less sensitive, similar results were obtained with sodium flufenamate; dexamethasone and aspirin had no effect on phospholipase A₂ activity at all concentrations tested $(10^{-10} -$ 10⁻⁴м).

Discussion

These results demonstrate that isolated phospholipases A_2 are inhibited by low concentrations of non-steroidal anti-inflammatory agents. The sensitivity to inhibition is Ca^{2+} -dependent and readily detectable at 10 nm-10 pm concentrations of nonsteroidal anti-inflammatory agents with submillimolar concentrations of Ca²⁺. By comparison, indomethacin inhibits the macrophage cyclo-oxygenase with an ID₅₀ of 20 nm (Humes *et al.*, 1977). Thus the anti-inflammatory activity of these drugs may be attributed not only to inhibition of further metabolism of arachidonate by the cyclo-oxygenase, but also to direct regulation of the availability of non-esterified fatty acids in those cells and tissues that mobilize arachidonate by deacylation of unsaturated fatty acids from the 2-position of membrane phospholipids.

Kaplan et al. (1978) previously described the inhibition of the polymorphonuclear-leucocyte phospholipase A, by indomethacin in the presence of 10mm added Ca²⁺ and obtained results comparable with those shown in Fig. 1. In their study indomethacin was equally effective on the membraneassociated enzyme in disrupted leucocytes, and kinetic data suggested non-competitive inhibition presumably due to interaction of drug with enzyme. Our results with the polymorphonuclear-leucocyte, macrophage and platelet phospholipases A₂ stress the importance of low 'free' Ca²⁺ concentrations in both enzyme activation and sensitivity to inhibition by non-steroidal anti-inflammatory agents. Although the mechanism(s) by which Ca^{2+} affects enzymic activity is poorly understood, it has been shown with phospholipases A2 isolated from the pancreas and polymorphonuclear leucocyte that Ca²⁺ may bind to either enzyme (de Haas et al., 1978) and/or substrate (Franson & Waite, 1978) to induce alterations in surface charge of the substrate or conformation of the enzyme to markedly influence catalysis.

It is evident from the study of a variety of intact cells and tissues, such as the platelet or adrenal gland, that intracellular translocation of Ca^{2+} is critical to biological events, i.e. platelet aggregation and release (Rittenhouse-Simmons *et al.*, 1977; Rittenhouse-Simmons & Deykin, 1978) and adrenal secretion (Jaanus & Rubin, 1971). Modulation of membrane-associated phospholipase A₂ activity by non-steroidal anti-inflammatory or other agents that affect intracellular 'free' Ca²⁺ concentrations may be important to the maintenance of membrane integrity and cell function in both normal and inflammatory processes.

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