



SPECIAL REPORT

Volatile general anaesthetic actions on recombinant nACh_{α7}, 5-HT₃ and chimeric nACh_{α7}-5-HT₃ receptors expressed in *Xenopus* oocytes¹Li Zhang, Murat Oz, Randall R. Stewart, Robert W. Peoples & Forrest F. Weight

Laboratory of Molecular & Cellular Neurobiology, National Institute on Alcohol Abuse & Alcoholism, National Institutes of Health, Bethesda, MD 20892-8205, U.S.A.

The effect of halothane and isoflurane was studied on the function of recombinant neurotransmitter receptors expressed in *Xenopus* oocytes. Both anaesthetics inhibited nicotinic acetylcholine type $\alpha 7$ (nACh_{α7}) receptor-mediated responses, potentiated 5-hydroxytryptamine type 3 (5-HT₃) receptor-mediated responses at low agonist concentrations, and inhibited the function of a chimeric receptor (with the N-terminal domain from the nACh_{α7} receptor and the transmembrane and C-terminal domains from the 5-HT₃ receptor) in a manner similar to that of the nACh_{α7} receptor. Since the N-terminal domain of the chimeric receptor was from the nACh_{α7} receptor, the observations suggest that the inhibition involves the N-terminal domain of the receptor.

Keywords: Anaesthetics; receptors; ion channels; molecular chimera; acetylcholine receptor; 5-hydroxytryptamine receptor

Introduction Traditionally, cell membrane lipids have been thought to be the primary target of volatile general anaesthetics, but recent studies have suggested that these anaesthetics may interact directly with certain neurotransmitter-gated ion channels (Franks & Lieb, 1993; 1994; Forman *et al.*, 1995; McKenzie *et al.*, 1995; Jenkins *et al.*, 1996). However, the molecular region of the receptor involved in this anaesthetic action has not been established. Molecular chimeras have been found to be extremely useful for determining structure-function relationships of membrane proteins. A functional chimeric receptor-ion channel has been constructed with the N-terminal domain from the nicotinic cholinergic receptor of the $\alpha 7$ type (nACh_{α7}) receptor and the transmembrane and C-terminal domains from the 5-hydroxytryptamine (5-HT)₃ receptor (Eiselé *et al.*, 1993). Since both halothane and isoflurane potentiated 5-HT₃ receptor-mediated responses (Machu & Harris, 1994; Jenkins *et al.*, 1996) and inhibited nACh_{α7} receptor-mediated responses, we used the chimeric nACh_{α7}-5-HT₃ receptor to study whether the anaesthetic action involves the N-terminal or the transmembrane and C-terminal receptor domains.

Methods The nACh_{α7} receptor cDNA was provided by Dr Jon Lindstrom (Schoepfer *et al.*, 1990), and the 5-HT₃ receptor cDNA provided by Dr David Julius (Maricq *et al.*, 1991). The chimeric receptor was constructed by using fragments cut by the enzymes *BclI* and *SacII*, an N-terminal fragment of the nACh_{α7} receptor was generated by the polymerase chain reaction (PCR) and ligated to a transmembrane and C-terminal fragment from the 5-HT₃ receptor at a junction of V201 on the nACh_{α7} receptor, as previously described (Eiselé *et al.*, 1993). Complementary RNAs were prepared by *in vitro* transcription. Preparation of, receptor expression using, and two-electrode voltage-clamp recording from, *Xenopus* oocytes, and data analysis, were as described previously (Zhang *et al.*, 1995); membrane holding potential was -70 mV. In some experiments, 2.5 mM Ca²⁺ in the bathing solution was replaced by 2.5 mM Ba²⁺. Halothane (Ayerst Laboratories) and isoflurane (Anaqest) solutions were prepared immediately before use and applied with a Hamilton gas-tight syringe connected to

Teflon tubing. The bath concentrations of the anaesthetics were determined by gas chromatography and found to be the same as the calculated concentrations.

Results Figure 1a (i) illustrates that both halothane (5 mM) and isoflurane (5 mM) inhibited nACh_{α7} receptor-mediated responses. In the standard extracellular bathing solution containing 2.5 mM Ca²⁺, the inhibition was concentration-dependent between 0.1 and 10 mM for both halothane and isoflurane, with apparent Hill coefficients for the concentration-response curve of 1.3 ± 0.2 and 1.1 ± 0.2 , and EC₅₀ values of 1.2 ± 0.2 and 0.7 ± 0.2 mM, respectively. In Ca²⁺-free bathing solution containing 2.5 mM Ba²⁺, the inhibition was also concentration-dependent between 0.1 and 10 mM for both halothane and isoflurane, with apparent Hill coefficients for the concentration-response curve of 1.1 ± 0.3 and 1.4 ± 0.2 , and EC₅₀ values of 1.3 ± 0.5 and 0.9 ± 0.3 mM, respectively. The apparent Hill coefficient and EC₅₀ values in Ca²⁺-containing and in Ca²⁺-free Ba²⁺-containing bathing solutions were not significantly different (ANOVA, $P > 0.1$). In Figure 1b (i), both halothane (5 mM) and isoflurane (5 mM) decreased E_{max} of the agonist concentration-response curve (to $47 \pm 4\%$ and $41 \pm 3\%$ of the control response, respectively; ANOVA, $P < 0.001$), without significantly affecting either the EC₅₀ or the apparent Hill coefficient of this curve (ANOVA, $P > 0.05$). Figure 1a (ii) illustrates that both halothane (5 mM) and isoflurane (5 mM) potentiated 5-HT₃ receptor-mediated responses activated by 0.1 μ M 5-HT. The potentiation of current activated by 0.1 μ M 5-HT was concentration-dependent between 0.1 and 10 mM for both halothane and isoflurane, with apparent Hill coefficients for the concentration-response curve of 1.1 ± 0.2 and 1.4 ± 0.3 , and EC₅₀ values of 2.2 ± 0.8 and 1.5 ± 0.3 mM, respectively. Figure 1b (ii) shows that the percentage increase of 5-HT₃ receptor-mediated responses by both halothane (5 mM) and isoflurane (5 mM) was maximal at the lowest agonist concentrations tested (0.03 and 0.1 μ M 5-HT), and decreased with increasing agonist concentration. Potentiation was not observed with 5-HT concentrations ≥ 5 μ M. Halothane (5 mM) and isoflurane (5 mM) did not significantly affect the E_{max}, the EC₅₀ or the apparent Hill coefficient of the 5-HT concentration-response curve (ANOVA, $P > 0.05$). Figure 1a (iii) illustrates that both halothane (5 mM) and isoflurane (5 mM) inhibited the chimeric receptor-mediated responses. The inhibition was concentration-dependent between 0.1 and 10 mM for both halothane and isoflurane, with apparent Hill

¹ Author for correspondence at: LMCN, NIAAA, NIH, 12501 Washington Avenue, Rockville, MD 20852, U.S.A.

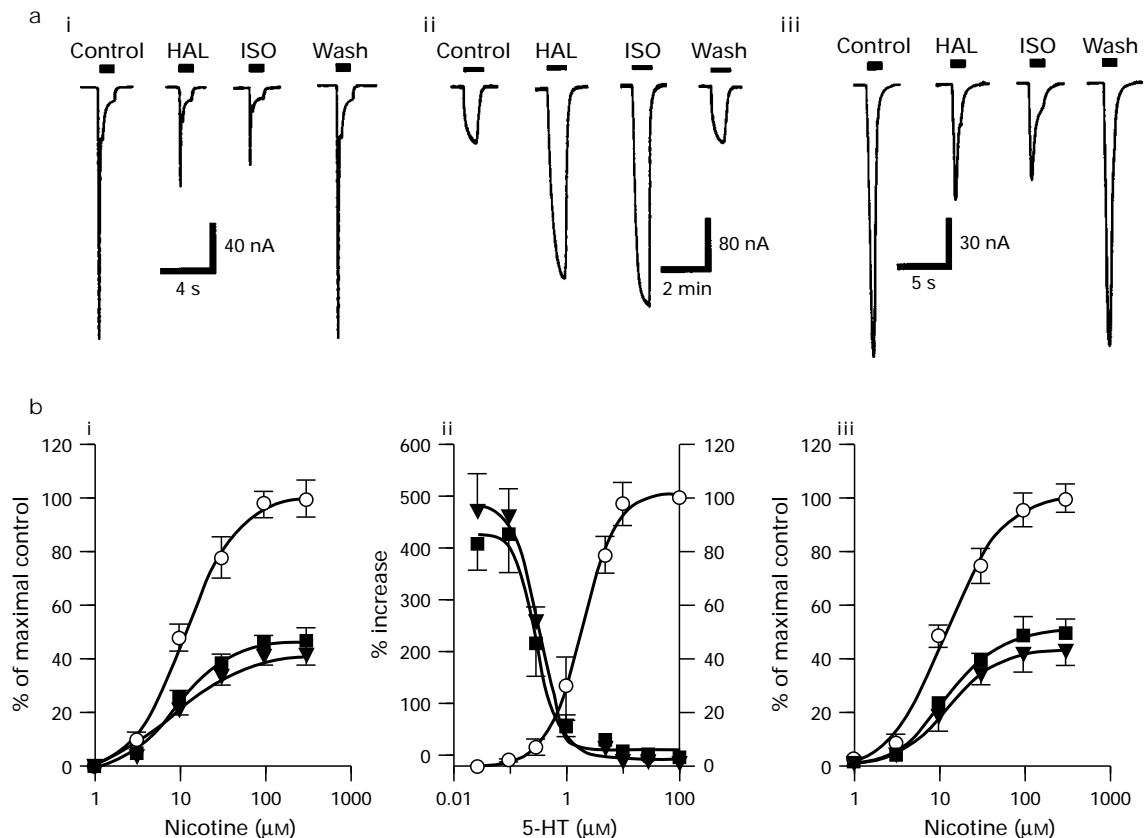


Figure 1 Effect of halothane (HAL) and isoflurane (ISO) on responses mediated by nicotinic acetylcholine type $\alpha 7$ receptors (nACh₂₇R), 5-hydroxytryptamine type 3 receptors (5-HT₃R), and chimeric nACh₂₇-5-HT₃ receptors (chimeric receptors). (a) Records illustrating the effect of 5 mM halothane and 5 mM isoflurane on currents mediated by nACh₂₇R (i), 5-HT₃R (ii), and chimeric receptors (iii). Bar above each record indicates agonist application. The nACh₂₇ and chimeric receptor-mediated currents were activated by 10 μ M nicotine; the 5-HT₃ receptor-mediated currents were activated by 0.1 μ M 5-HT. (b) Agonist concentration-response curves (○) for nACh₂₇R (i), 5-HT₃R (ii), and chimeric receptors (iii), and the effect of 5 mM halothane (■) and 5 mM isoflurane (▼) on the responses of these receptors. Each data point is the average of 5–7 cells (mean \pm s.e.mean); error bars not visible are smaller than the size of the symbols. The control agonist concentration-response curves for the nACh₂₇ and the chimeric receptor-mediated responses were normalized to the current activated by 500 μ M nicotine, and that for 5-HT₃ receptor-mediated responses was normalized to the current activated by 100 μ M 5-HT.

coefficients for the concentration-response curve of 0.9 ± 0.3 and 0.8 ± 0.2 , and EC₅₀ values of 1.4 ± 0.4 and 0.8 ± 0.2 mM, respectively. In Figure 1b (iii), both halothane (5 mM) and isoflurane (5 mM) decreased E_{max} of the agonist concentration-response curve (to $51 \pm 4\%$ and $43 \pm 2\%$ of the control response, respectively; ANOVA, $P < 0.001$), without significantly affecting either the EC₅₀ or the apparent Hill coefficient of this curve (ANOVA, $P > 0.05$). The E_{max}, EC₅₀ and apparent Hill coefficient values for the concentration-response curves of both halothane and isoflurane effects on the chimeric receptor were not significantly different from those values for the nACh₂₇ receptor (ANOVA, $P > 0.1$).

Discussion We found that both halothane and isoflurane inhibited nACh₂₇ receptor-mediated responses, and this effect involved a decrease in the E_{max} of the agonist concentration-response curve without affecting the EC₅₀ or the apparent Hill coefficient, indicating that the inhibition is non-competitive. The EC₅₀ and apparent Hill coefficient values for inhibition by halothane and isoflurane were not altered by substituting Ba²⁺ for Ca²⁺ in the extracellular bathing solution, suggesting that the inhibition is not due to suppression of Ca²⁺-activated Cl⁻ current resulting from Ca²⁺ influx through nACh₂₇ channels. We also found that both halothane and isoflurane potentiated 5-HT₃ receptor-mediated responses at low agonist concentrations, confirming previous findings that volatile anaesthetics can potentiate 5-HT₃ receptor-mediated responses (Machu &

Harris, 1994; Jenkins *et al.*, 1996). The observations that both halothane and isoflurane had opposite effects on nACh₂₇ and 5-HT₃ receptors provided the opportunity to use the chimeric nACh₂₇-5-HT₃ receptor to investigate whether the anaesthetic action involves the N-terminal domain or the transmembrane and C-terminal domains of the receptor. Since both halothane and isoflurane inhibited the chimeric receptor-mediated responses in a manner that was not significantly different from the inhibition of nACh₂₇ receptor-mediated responses, and the nACh₂₇ receptor contributed the N-terminal domain to the chimeric receptor, the observations suggest that the inhibition involves the N-terminal domain of the receptor. It would also be of interest to study the effect of the anaesthetics on the reverse chimera, *viz.* with the N-terminal domain from the 5-HT₃ receptor and the nACh₂₇ receptor. However, it has not been possible to obtain a reverse chimera that will functionally express (Eiselé *et al.*, 1993; unpublished observations).

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