Nitric oxide-induced Cl⁻ secretion in isolated rat colon is mediated by the release of thromboxane A₂

Hideki Sakai*, Tomoyuki Suzuki*, Miki Murota*, Yuji Takahashi* and Noriaki Takeguchi

Department of Pharmaceutical Physiology, Faculty of Pharmaceutical Sciences, Toyama Medical and Pharmaceutical University, 2630 Sugitani, Toyama 930-0194, Japan

We have shown previously that thromboxane A₂ (TXA₂), which may be released by the anti-tumour drug irinotecan and by platelet-activating factor (PAF), causes Cl⁻ secretion in the isolated rat colon. In the present study, the involvement of TXA₂ in nitric oxide-induced Cl⁻ secretion in isolated rat colon was investigated. In colonic mucosa set between Ussing chambers, the NO donor sodium nitroprusside (SNP; 100 μ M) caused Cl⁻ secretion, an effect that was almost completely inhibited by the NO scavenger carboxy-PTIO at 200 µM. The SNP-induced Cl⁻ secretion was inhibited in a concentration-dependent manner by the TXA₂ receptor antagonist ONO-3708 $(IC_{50} = 2 \ \mu M)$ and the TX synthase inhibitor Y-20811 ($IC_{50} = 0.4 \ \mu M$). SNP significantly increased the release of TXA₂ (measured as TXB₂ release) from the mucosa. The SNP-induced increases in Cl⁻ secretion and TXA₂ release were blocked by a NO-sensitive guanylate cyclase inhibitor (ODQ). Dibutyryl cGMP (500 μ M) also induced Cl⁻ secretion, which was sensitive to ONO-3708 (10 μ M) and Y-20811 (1 μ M), and increased the release of TXA₂ from the mucosa. PAF-induced (10 μ M) Cl⁻ secretion was inhibited by carboxy-PTIO (200 µM) and ODQ (10 µM), whereas irinotecan-induced (500 μ M) Cl⁻ secretion was not significantly inhibited by these drugs. A stable TXA₂ analogue (STA_2) but not SNP (100 μ M) changed the membrane potential of epithelial cells in isolated colonic crypts under the whole-cell current-clamp condition. These results indicate that PAF elicits the NO-cGMP pathway and then stimulates the release of TXA₂, which is a stimulant of colonic Cl⁻ secretion. In contrast, the NO-cGMP pathway is not involved in the TXA2-mediated Cl⁻ secretion induced by irinotecan.

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Corresponding author H. Sakai: Department of Pharmaceutical Physiology, Faculty of Pharmaceutical Sciences, Toyama Medical and Pharmaceutical University, 2630 Sugitani, Toyama 930-0194, Japan. Email: sakaih@ms.toyama-mpu.ac.jp

Thromboxane A_2 (TXA₂) is a well-known potent inducer of platelet aggregation and vasoconstriction (Coleman et al. 1994). We have found recently that in isolated rat colon, the epithelial Cl⁻ secretion induced by the anti-tumour drug irinotecan and by platelet-activating factor (PAF) is mediated by the release of TXA₂ from the subepithelial layer of the mucosa (Sakai et al. 1997; Suzuki et al. 2000b). Eicosanoids including TXA₂, in the colonic mucosa are mostly produced in this subepithelial layer (Craven & DeRubertis, 1983). However, it is not clear how irinotecan and PAF stimulate the production and release of TXA₂ from the subepithelium. We have found that endogenous TXA₂ and exogenous application of the stable TXA₂ analogue 9,11-epithio-11,12-methano-thromboxane A₂ (STA_2) act directly on epithelial crypt cells, resulting in the stimulation of Cl⁻ secretion in the colon (Sakai et al. 1997; Ikari et al. 1999; Suzuki et al. 2000a). However, expression of the TXA₂ receptor in this cell type has not previously been reported.

Sodium nitroprusside (SNP), a nitric oxide (NO) donor, increases Cl⁻ secretion in the rat (Tamai & Gaginella, 1993; Wilson *et al.* 1993; Stoner *et al.* 2000), guinea-pig (MacNaughton, 1993) and human colon (Stack *et al.* 1996). This NO-induced Cl⁻ secretion is mediated by the production of cyclo-oxygenase metabolites (MacNaughton, 1993; Wilson *et al.* 1993; Stack *et al.* 1996). Cyclooxygenase produces a number of biologically active eicosanoids such as prostaglandin (PG) E₂, PGD₂, PGF_{2α}, PGI₂ and TXA₂, but it has not been specified which eicosanoid contributes to the NO-induced Cl⁻ secretion in the colon. Moreover, the endogenous activator of NO production and release in the colon remains unclear.

In the present study, we used isolated rat colonic mucosa and colonic crypts to examine the involvement of NO in TXA₂-, PAF- and irinotecan-induced Cl⁻ secretion, and demonstrate for the first time that the NO–cGMP–TXA₂ pathway mediates PAF-induced Cl⁻ secretion. Some of these results have been presented to The Physiological Society (Sakai et al. 2002).

METHODS

Chemicals

Irinotecan (7-ethyl-10-[4-(1-piperidino)-1-piperidino] carbonyloxycamptothecin; Daiichi Pharmaceutical, Tokyo, Japan and Yakult Honsha, Tokyo, Japan), STA₂ (ONO Pharmaceutical, Osaka, Japan), PGE₂ (Toray Industries, Tokyo, Japan), 7-[2α , 4α -(dimethylmethano)- 6β -(2-cyclopentyl- 2β -hydroxyacetamido)-1a-cyclohexyl]5(Z)-heptenoic acid (ONO-3708; ONO Pharmaceutical Co.) and sodium 4-[α -hydroxy-5- (1-imidazolyl)-2-methybenzyl]-3,5-dimethylbenzoate dehydrate (Y-20811; Yoshitomi Pharmaceutical Industries, Fukuoka, Japan) were generous gifts of their respective manufacturers. Sodium nitroprusside dehydrate (SNP), 2-(4-carboxyphenyl)-4,4,5,5-tetramethylimidazoline-1-oxyl-3-oxide, sodium salt (carboxy-PTIO) and furosemide (frusemide) were obtained from Wako Pure Chemical Industries (Osaka, Japan). 5-Nitro-2-(3-phenylpropylamino)-benzoate (NPPB) was from Research Biochemicals International (Natick, MA, USA). N²,O^{2'}-Dibutyryl guanosine 3',5'cyclic monophosphate sodium salt (DBcGMP) was from Yamasa (Choushi, Japan). 1H-[1,2,4]Oxadiazolo[4,3-a]quinoxaline-1one (ODQ) was from Sigma (St Louis, MO, USA). PAF (1-alkyl-2acetoyl-sn-glycero-3-phosphocholine) was from Avanti Polar Lipids (Alabaster, AL, USA). Irinotecan, NPPB and ODQ were dissolved in dimethyl sulphoxide, and PGE₂, furosemide and PAF were dissolved in ethanol. The concentrations of dimethyl sulphoxide and ethanol in the final aqueous solutions never exceeded 0.5 %.

Solutions

The Parsons solution for tissue preparation and Ussing chamber experiments contained (mM): 107 NaCl, 4.5 KCl, 25 NaHCO₃, 1.8 Na₂HPO₄, 0.2 NaH₂PO₄, 1.25 CaCl₂, 1 MgSO₄ and 12 glucose. The solution was gassed with carbogen (5 % CO₂ in 95 % O₂) at a pH of 7.4. Where indicated, a low-chloride solution (7 mM Cl⁻) was used in which NaCl was replaced by sodium gluconate and supplemented with 4.5 mM CaSO₄ in order to compensate for the calcium-buffering properties of gluconate. The calcium-free EDTA solution for the isolation of crypts from distal colon contained (mM): 127 NaCl, 5 KCl, 1 MgCl₂, 5 EDTA, 10 Hepes, 5 glucose, 5 sodium pyruvate and 10 mg ml⁻¹ bovine serum albumin (BSA). The pH of the solution was adjusted to 7.4 with NaOH. The high-potassium Tyrode solution for the storage of the crypts contained (mM): 100 potassium gluconate, 30 KCl, 20 NaCl, 1.25 CaCl₂, 1 MgCl₂, 10 Hepes, 12 glucose, 5 sodium pyruvate and 1 mg ml⁻¹ BSA. The pH was adjusted to 7.4 with KOH. Whole-cell patch-clamp experiments were carried out with the following solutions. The extracellular bathing solution contained (mM): 140 NaCl, 5.4 KCl, 1.25 CaCl₂, 1 MgCl₂ and 10 Hepes; the pH was adjusted to 7.4 with NaOH. The intracellular pipette solution contained (mM): 100 potassium gluconate, 30 KCl, 10 NaCl, 2 MgCl₂, 0.1 EGTA, 10 Hepes and 2 ATP; the pH was adjusted to 7.2 with KOH.

Tissue preparation

The following procedures were performed in accordance with the guidelines presented by the Animal Care and Use Committee of Toyama Medical and Pharmaceutical University. The mucosa–submucosa preparation (hereafter, simply described as the mucosa) was obtained from female Wistar rats (Japan SLC, Shizuoka, Japan) weighing 140–200 g. The animals had free access

to water and food until the day of the experiment. Animals were killed rapidly by stunning and cervical dislocation. The serosa and muscularis propria were stripped away by hand to obtain the mucosa preparation of the distal part of the colon descendens.

Ussing chamber experiments

The tissue was set between modified Ussing chambers and bathed with 4 ml of Parsons solution incubated at 37 °C on either side of the mucosa. The exposed surface of the tissue measured 0.3 cm². Short-circuit current (I_{sc}) was measured continuously at zero voltage difference with an amplifier (CEZ-9100, Nihon Kohden, Tokyo, Japan). The fluid resistance was compensated. The direction of I_{sc} from the mucosal-to-serosal side is expressed as positive: that is, an increase in Cl⁻ movement from the serosal-to-mucosal side (Cl⁻ secretion) corresponded to an increase in I_{sc} . The transepithelial potential difference (Pd) under open-circuit conditions was measured in the current-clamp mode of the amplifier, and the reference was taken on the serosal side. Tissue conductance (G_t) was determined from the deviation of I_{sc} in response to a command voltage pulse of 0.5 mV (its duration was 100 ms).

Assay of TXB₂

The mucosa was set between the Ussing chambers. Since TXA₂ quickly transforms into TXB₂ in aqueous solutions, we measured the concentration of TXB₂ in the bathing solution using an enzyme immunoassay kit (Amersham Pharmacia Biotech, Buckinghamshire, UK). After several changes of bathing solutions, the mucosa was incubated for 35 min and the control solution was collected from the serosal or mucosal side. Fresh solutions were introduced successively and incubated for 15 min. Then, SNP or DBcGMP at the required concentration was added to the serosal solution, followed by a 20 min incubation period, and the test solution was collected. To assess the effects of inhibitor on the SNP-induced release of TXB₂, the resulting solutions after the 35 min incubation period in the presence of SNP plus the inhibitor were collected. Control and test solutions (1 ml of each) were immediately frozen, freeze-dried and dissolved with 0.25 ml of the assay kit buffer to determine the concentration of TXB₂. Data are expressed as the amount of TXB₂ in the serosal solution (4 ml) of the chamber.

Preparation of isolated colonic crypts

Crypts were isolated from the distal colon as described previously (Ecke *et al.* 1996). Briefly, the distal colon was resected and turned inside-out. The inverted sac was filled with 3–5 ml of the calcium-free EDTA solution, and incubated in the calcium-free solution for 10 min at 35 °C. Crypts isolated during this incubation were collected and resuspended in high-potassium Tyrode solution.

Patch-clamp recordings

The crypts were fixed to a glass poly-L-lysine-coated coverslip, which was mounted in a 680 μ l chamber. The chamber solution was continuously exchanged throughout an experiment at a perfusion rate of 800 μ l min⁻¹. Whole-cell current-clamp experiments of the crypt cells were performed using an EPC-9 patch-clamp system (HEKA Elektronik, Lambrecht, Germany), as described previously (Sakai & Takeguchi, 1993; Sakai *et al.* 1997). The liquid junction potential between the pipette and the bathing solutions was corrected. The reference for describing the patch-potential was taken on the extracellular side of the membrane. Experiments were performed at 35–37 °C.

RNA isolation and RT-PCR

Total RNA was prepared from isolated colonic crypts by the acidic phenol method (Chomczynski & Sacchi, 1987). For RT-PCR, 2 μ g of the RNA was random primed (Pd(N),; 200 ng) in a final

volume of 20 μ l in the presence of 200 units of Superscript II reverse transcriptase (Gibco BRL, Life Technologies, Rockville, MD, USA). The RT reaction was carried out as described previously (Sakai *et al.* 1999, 2001). One-twentieth of the RT sample was incubated with *Taq* DNA polymerase (Promega) and 15 pmol of specific sense and antisense primers based on the rat TXA₂ receptor sequence. The nucleotide positions of sense and antisense primers were 301–320 (5-TGCCGCCTTTGCCACTT-CAT-3') and 758–778 (5'-CCAGCAAGGGCATCCAA-CACA-3'), respectively. Forty cycles of PCR (95 °C for 30 s, 58 °C for 30 s, 68 °C for 60 s) were performed. One-tenth of the PCR product was loaded onto a 2 % agarose gel and electrophoresed.

Statistics

Results are presented as the mean \pm S.E.M. Differences between groups were analysed by one-way analysis of variance (ANOVA), and correction for multiple comparisons was made using Dunnett's multiple comparison test. If necessary, Tukey's multiple comparison test was used. Comparison between the two groups was made by using Student's t test. Statistically significant differences were assumed at P < 0.05.

RESULTS

NO-elicited Cl⁻ secretion in isolated rat colon

SNP increased I_{sc} across the rat colonic mucosa in a concentration-dependent manner (EC₅₀ = 20 μ M) with a plateau phase that was stable for at least 30 min (Fig. 1*A* and *B*). If the mucosa was pre-treated with the NO scavenger carboxy-PTIO (200 μ M at the serosal side), the effect of SNP (100 μ M) was almost completely abolished (Fig. 1*C* and *D*), indicating that the SNP-induced increase in I_{sc} is mediated by the release of NO. Carboxy-PTIO (200 μ M) had no effect on the baseline I_{sc} (in the absence of SNP): the values before and after the addition of carboxy-PTIO were 34.2 ± 3.1 and $32.4 \pm 3.7 \ \mu$ A cm⁻², respectively



Figure 1. Sodium nitroprusside (SNP)-induced Cl⁻ current in isolated rat colonic mucosa

A, 100 μ M SNP was added to the serosal side. A typical trace of the SNP-induced current (short-circuit current, I_{sc}) is shown. *B*, concentration-dependent effects of SNP. The I_{sc} values at the SNP-elicited plateau phase were read and the results are expressed as the net increases from the control I_{sc} measured immediately before the addition of SNP (ΔI_{sc}). n = 6-10. *C*, 200 μ M carboxy-PTIO was added to the serosal side 10 min before the addition of SNP ($100 \ \mu$ M). After 20 min, the solutions at both the serosal and mucosal sides were replaced three times with fresh Parsons solutions. Then 100 μ M SNP was added. A typical trace of I_{sc} is shown. *D*, the experimental protocol was the same as that in *C*. The net increases in I_{sc} 15 min after the addition of SNP in the presence (left column) or absence (right column) of carboxy-PTIO were recorded. n = 5. ** P < 0.01. *E*, 100 μ M furosemide was added to the serosal side after the SNP (100 μ M)-elicited plateau phase was observed. A typical trace of I_{sc} from five experiments is shown. *F*, 100 μ M NPPB was added to the mucosal side after the SNP (100 μ M)-elicited plateau phase was observed. A typical trace of I_{sc} from five experiments is shown. *G*, low-chloride solutions were used at both the serosal and mucosal sides. 100 μ M SNP was added to the serosal side. A typical trace of I_{sc} from four experiments is shown.



Figure 2. DBcGMP-induced Cl⁻ current in the colonic mucosa

A, 10 μ M ODQ was added to the serosal side after the SNP (100 μ M)-elicited plateau phase was observed. A typical trace of I_{sc} is shown. B, 100 μ M SNP-induced net increases in Isc were recorded just before addition of 10 μ M ODQ (left column). When the effect of ODQ reached a steady state, the Isc values were read, and they are expressed as $\Delta I_{\rm sc}$ (right column). $n = 8. ** P < 0.01. C, 100 \ \mu M$ furosemide was added to the serosal side after the DBcGMP (500 µM)-elicited plateau phase was observed. A typical trace of I_{sc} from four experiments is shown. D, 100 µM NPPB was added to the mucosal side after the DBcGMP (500 μ M)-elicited plateau phase was observed. A typical trace of I_{sc} from four experiments is shown. E, low-chloride solutions were employed at both the serosal and mucosal sides. DBcGMP $(500 \ \mu\text{M})$ was added to the serosal side. A typical trace of I_{sc} from four experiments is shown.



Figure 3. Inhibitory effects of a TXA₂ receptor antagonist (ONO-3708) and a thromboxane synthase inhibitor (Y-20811) on the SNPinduced Cl⁻ current

SNP (100 μ M) was added to the serosal side. A and C, ONO-3708 (10 μ M at the serosal side; A) or Y-20811 (1 μ M at both the serosal and mucosal sides; C) was added after the SNP-elicited plateau phase was observed. Typical traces of Isc are shown. Insets, chemical structures of ONO-3708 (A) and Y-20811 (C). B and D, concentration-dependent inhibitory effects of ONO-3708 (B) and Y-20811 (D). ONO-3708 or Y-20811 was added cumulatively when the plateau phase of Isc was observed after the addition of SNP. SNPinduced net increases in Isc were recorded when the effect of the inhibitor reached a steady state. Smaller values of ΔI_{sc} mean a greater degree of inhibition (n = 6(*B*) and n = 5(D)). *,** Significantly different from the value in the absence of the inhibitor (P < 0.05 and 0.01, respectively). E-H, the potential difference (Pd; E and G) and tissue conductance $(G_{i}; F \text{ and } H)$ values were measured at three different times: (1) just before the addition of SNP (open columns), (2) when values of I_{sc} reached a steady state after the addition of SNP (filled columns) and (3) after the additional application of ONO-3708 (E and F) or Y-20811 (G and H; hatched columns). *n* = 5. *,** *P* < 0.05 and 0.01, respectively.

(*n* = 6, *P* > 0.05). The SNP-induced increase in I_{sc} was completely inhibited by furosemide (100 μ M at the serosal side; Fig. 1*E*), an inhibitor of the basolateral Na⁺–K⁺–2Cl⁻ cotransporter (Chipperfield, 1986), and also by 100 μ M NPPB (at the mucosal side; Fig. 1*F*), a blocker of the apical Cl⁻ channel of rat colon (Diener & Rummel, 1989; Sakai *et al.* 1995, 1997). In the low-chloride solution containing 7 mM Cl⁻, SNP (100 μ M) had almost no effect on I_{sc} (Fig. 1*G*).



Figure 4. Inhibitory effects of ONO-3708 and Y-20811 on the DBcGMP-induced Cl⁻ current

DBcGMP (500 μ M) was added to the serosal side. *A* and *C*, ONO-3708 (10 μ M at the serosal side; *A*) or Y-20811 (1 μ M at both the serosal and mucosal sides; *C*) was added after the DBcGMP-elicited plateau phase was observed. Typical traces of I_{sc} are shown. *B* and *D*, the 500 μ M DBcGMP-induced net increases in I_{sc} were recorded just before the addition of 10 μ M ONO-3708 (*B*) or 1 μ M Y-20811 (*D*; filled columns). When the effect of the inhibitor reached a steady state, the I_{sc} values were read, and they are expressed as ΔI_{sc} (open columns). n = 4. ** P < 0.01. *E*–*H*, the Pd (*E* and *G*) and G_t (*F* and *H*) values were measured at three different times: (1) just before the addition of DBcGMP (open columns), (2) when values of I_{sc} reached a steady state after the addition of DBcGMP (filled columns) and (3) after the additional application of ONO-3708 (*E* and *F*) or Y-20811 (*G* and *H*; hatched columns). n = 4. *,** P < 0.05 and 0.01, respectively.

NO-elicited Cl⁻ secretion is mediated by the cGMP pathway

The SNP-induced increase in I_{sc} was abolished by 10 μ M ODQ (at the serosal side), an inhibitor of soluble guanylate cyclase (Fig. 2A and B). ODQ (10 μ M) did not affect the baseline I_{sc} (in the absence of SNP): the values before and after the addition of ODQ were 28.7 ± 1.2 and 27.0 ± 1.1 μ A cm⁻², respectively (n = 5, P > 0.05). DBcGMP (500 μ M at the serosal side) increased I_{sc} , an effect that was inhibited by furosemide (100 μ M at the serosal side; Fig. 2*C*) and NPPB (100 μ M at the mucosal side; Fig. 2*D*), indicating that SNP-elicited Cl⁻ secretion is mediated by the cGMP pathway. In the low-chloride solution containing 7 mM Cl⁻, DBcGMP (500 μ M) had almost no effect on I_{sc} (Fig. 2*E*).

NO- and cGMP-elicited $\rm Cl^-$ secretion is mediated by the production of $\rm TXA_2$

Here, we used a specific TXA₂ receptor antagonist, ONO-3708 (Suga *et al.* 1987), and a specific TX synthase inhibitor, Y-20811 (Mikashima *et al.* 1986). Previous reports showed that ONO-3708 (10 μ M) did not antagonize various prostanoid receptors for PGE₂, PGF_{2α} and PGI₂, and did not inhibit cyclo-oxygenase (Kondo *et al.* 1989), and that Y-20811 (100 μ M) had no effect on cyclo-oxygenase and PGI₂ synthase (Mikashima *et al.* 1986). In addition, we have confirmed previously that ONO-3708 (10 μ M) and Y-20811 (1 μ M) did not affect



Figure 5. Effects of ONO-3708 and Y-20811 on the PGE₂elicited current

A and C, in the plateau phase observed after the addition of PGE₂ (0.5 μ M at the serosal side), 0.3–10 μ M ONO-3708 (A) or 0.1–3 μ M Y-20811 (C) was added cumulatively as indicated. Typical traces are shown. B and D, the experimental protocols were the same as those in A and C. Data are expressed as net increases from the I_{sc} recorded just before the addition of PGE₂ (ΔI_{sc}). n = 4.

baseline I_{sc} (in the absence of secretagogues) in the rat colon (Sakai *et al.* 1997).

The SNP (100 μ M)-elicited Cl⁻ current was inhibited in a concentration-dependent manner by ONO-3708 (Fig. 3*A* and *B*) and Y-20811 (Fig. 3*C* and *D*). The IC₅₀ values for ONO-3708 and Y-20811 were 2 and 0.4 μ M, respectively. SNP-elicited increases in Pd and *G*_t were also significantly inhibited by ONO-3708 (10 μ M; Fig. 3*E* and *F*) and Y-20811 (1 μ M; Fig. 3*G* and *H*). Similar to the case for SNP (Fig. 3), the DBcGMP (500 μ M)-induced increases in *I*_{sc}. Pd and *G*_t were inhibited by ONO-3708 (10 μ M; Fig. 4*A*, *B*, *E* and *F*) and Y-20811 (1 μ M; Fig. 4*C*, *D*, *G* and *H*). ONO-3708 (0.3–10 μ M) and Y-20811 (0.1–3 μ M) did not significantly affect the PGE₂ (0.5 μ M)-induced increase in *I*_{sc} (Fig. 5).

Stimulated release of TXA₂ by the NO–cGMP pathway in the colon

In accordance with above results, SNP increased the release of TXA_2 (measured as TXB_2) in a concentrationdependent manner, from the distal colon into the bathing

> Α 120 100 TXB₂ (pg (4ml)⁻¹) 80 60 40 20 n 10 μM 1 μM 100 μM SNP В 80 TXB₂ (pg (4ml)⁻¹) 60 40 20 500 µM DBcGMP

Figure 6. SNP- and DBcGMP-induced release of TXB $_2$ into the bathing solution from mucosa set between Ussing chambers

The mucosa was incubated for 35 min in the absence of SNP and DBcGMP, then the TXB₂ concentration in the serosal solution was determined (open columns). Fresh Parsons solution was introduced and the mucosa was incubated successively for 15 min in the absence of SNP and DBcGMP, and for 20 min in the presence of 1–100 μ M SNP (A) or 500 μ M DBcGMP (B). Then the TXB₂ concentration in the serosal solution was determined (filled columns). n = 4. *,** P < 0.05 and 0.01, respectively. NS, P > 0.05.

solution (Fig. 6A). The effects were significant at 10–100 μ M, and this concentration range was effective for the SNP-induced increase in I_{sc} (Fig. 1B). DBcGMP (500 μ M) also stimulated the release of TXB₂ from the colon (Fig. 6B). The SNP-increased release of TXB₂ was significantly inhibited by carboxy-PTIO (200 μ M) and ODQ (10 μ M; Fig. 7).

Involvement of the NO–cGMP pathway in the TXA₂mediated Cl⁻ secretion induced by PAF

We have found recently that PAF and irinotecan dosedependently induce Cl⁻ secretion, an action that is mediated mainly by the release of TXA₂ in isolated rat colon (Sakai *et al.* 1997; Suzuki *et al.* 2000*b*). Figure 8 shows that increases in I_{sc} caused by PAF and irinotecan depend upon the presence of Cl⁻ ions in the solutions. Next, we examined whether the NO–cGMP pathway is involved in PAF- and irinotecan-induced Cl⁻ secretion.



Figure 7. Inhibitory effects of the NO scavenger carboxy-PTIO and the soluble guanylate cyclase inhibitor (ODQ) on the SNP-induced release of TXB₂

A, TXB₂ concentrations in the serosal solution incubated without SNP and carboxy-PTIO (open columns), with 100 μ M SNP (filled columns), and with 100 μ M SNP plus 200 μ M carboxy-PTIO (hatched column) were determined in each mucosa as described in Methods. *B*, TXB₂ concentrations in the mucosal solution incubated without SNP and ODQ (open columns), with 100 μ M SNP (filled columns), and with 100 μ M SNP plus 10 μ M ODQ (hatched column) were determined. All chemicals were added to the serosal side. *n* = 4 (*A*) and 3 (*B*). *,** *P* < 0.05 and 0.01, respectively. Interestingly, the PAF-elicited increases in I_{sc} , G_t and Pd were almost completely inhibited by carboxy-PTIO (Fig. 9A, B, E and F) and ODQ (Fig. 9C, D, G and H), indicating that PAF-induced Cl⁻ secretion is mediated by the NO–cGMP–TXA₂ pathway. In contrast, the irinotecan-elicited increases in I_{sc} , G_t and Pd were not significantly inhibited by either carboxy-PTIO (Fig. 10A, B, E and F) or ODQ (Fig. 10C, D, G and H).

Effect of NO on the membrane potential of the cells in isolated colonic crypts

The Ussing chamber experiments indicated an indirect action of NO on epithelial Cl⁻ secretion. In the whole-cell current-clamp mode, SNP (100 μ M) had no effect on the membrane potential of cells in isolated crypts (Fig. 11*A* and *C*). In contrast, STA₂ (0.1 μ M), a stable analogue of TXA₂, induced a significant depolarization of the cells (Fig. 11*B* and *C*).

$\label{eq:expression} Expression of TXA_2 \, receptor \, mRNA \, in \, colonic \, crypt \\ cells$

In RT-PCR experiments, a set of specific primers that can amplify a partial cDNA fragment (478 bp) of the rat TXA_2 receptor was used. Figure 12 shows that RT-PCR from total RNA of isolated rat colonic crypts gives a 478 bp product. Sequencing revealed that this product had 100 % homology with the rat TXA_2 receptor (Kitanaka *et al.* 1995; data not shown).



Figure 8. Platelet-activating factor (PAF)- and irinotecaninduced Cl⁻ current in isolated rat colonic mucosa

A and B, 10 μ M PAF was added to the serosal side. I_{sc} was recorded in the presence of Parsons solution containing 114 mM Cl⁻ (A) or the low-chloride solution containing 7 mM Cl⁻ (B). Typical examples from four experiments are shown. C and D, 500 μ M irinotecan was added to both the serosal and mucosal sides. I_{sc} was recorded in the presence of Parsons solution containing 114 mM Cl⁻ (C) or the low-chloride solution containing 7 mM Cl⁻ (D). Typical examples from four experiments are shown.

DISCUSSION

Figure 13 summarizes the model for PAF- and irinotecaninduced Cl⁻ secretion, the compounds used in this study and their proposed sites of action.

NO-induced Cl⁻ secretion in the colon is mediated by the production of cyclo-oxygenase metabolites (MacNaughton, 1993; Wilson *et al.* 1993; Stack *et al.* 1996). The Cl⁻ secretion induced by cGMP is also mediated by the



Figure 9. Inhibitory effects of a NO scavenger carboxy-PTIO and a soluble guanylate cyclase inhibitor (ODQ) on the PAF-induced Cl⁻ current

PAF (10 μ M) was added to the serosal side. A and C, 200 μ M carboxy-PTIO (A) or 10 μ M ODQ (C) was added to the serosal side after the PAF-elicited plateau phase was observed. Typical traces of I_{sc} are shown. B and D, the 10 μ M PAF-induced net increases in I_{sc} were recorded just before the addition of 200 μ M carboxy-PTIO (B) or 10 μ M ODQ (D) (filled columns). When the effect of the inhibitor reached a steady state, the I_{sc} values were read, and they are expressed as ΔI_{sc} (open columns). n = 5. ** P < 0.01. E-H, the Pd (E and G) and G_t (F and H) values were measured at three different times: (1) just before the addition of PAF (open columns), (2) when values of I_{sc} had reached a steady state after the addition of PAF (filled columns) and (3) after the additional application of carboxy-PTIO (E and F) or ODQ (G and H) (hatched columns). n = 5. *, ** P < 0.05 and 0.01, respectively.

production of cyclo-oxygenase metabolites (Nobles *et al.* 1991). However, it has not been clarified which eicosanoid is involved in NO- and cGMP-induced Cl⁻ secretion in the colon. Wilson *et al.* (1996) reported that SNP significantly increased the release of PGE₂ without affecting the release of TXB₂ in a solution containing diced pieces of rat colonic mucosa, but this diced mucosa experiment did not show whether the SNP-induced PGE₂ release actually stimulated colonic Cl⁻ secretion.

In the study presented here, we have shown from Ussing chamber experiments that SNP- and DBcGMP-elicited



Figure 10. Effects of carboxy-PTIO and ODQ on the irinotecan-induced Cl⁻ current

Irinotecan (500 μ M) was added to both the serosal and mucosal sides. A and C, 200 μ M carboxy-PTIO (A) or 10 μ M ODQ (C) was added to the serosal side after the irinotecan-elicited plateau phase was observed. Typical traces of I_{sc} are shown. B and D, the 500 μ M irinotecan-induced net increases in I_{sc} were recorded just before (open columns) and 30 min after (filled columns) the addition of 200 μ M carboxy-PTIO (B) or 10 μ M ODQ (D). n = 4. NS, P > 0.05. E-H, the Pd (E and G) and G_t (F and H) values were measured at three different times: (1) just before the addition of irinotecan (open columns), (2) when values of I_{sc} had reached a steady state after the addition of carboxy-PTIO (E and F) or ODQ (G and H; hatched columns). n = 4 (E and F) and 3 (G and H). *,** P < 0.05 and 0.01, respectively. NS, P > 0.05.

Cl⁻ secretion was blocked by the TXA₂ receptor antagonist, ONO-3708, and the TX synthase inhibitor, Y-20811 (Figs 3 and 4), and that SNP and DBcGMP stimulated the release of TXB₂ from the colonic mucosa (Fig. 6). A soluble guanylate cyclase inhibitor, ODQ, blocked the Clsecretion (Fig. 2). The SNP-induced increases in Cl⁻ secretion and TXB₂ release were blocked by the NO scavenger, carboxy-PTIO (Figs 1 and 7). Furthermore, STA₂, a stable analogue of TXA₂, stimulated Cl⁻ secretion (Sakai et al. 1997; Suzuki et al. 2000a). NO-induced endogenous cGMP is not directly effective in epithelial colonic crypt cells, because STA₂ but not SNP is able to activate the Cl⁻ channels in the epithelial cells of isolated rat colonic crypts (Fig. 11). We therefore suggest that NOand cGMP-induced Cl⁻ secretion in the colon is mediated mainly by the production of TXA₂.

We have recently reported that both PAF and irinotecan cause TXA_2 -mediated Cl⁻ secretion in the rat colon (Sakai *et al.* 1997; Suzuki *et al.* 2000*a*,*b*). PAF and irinotecan stimulate the production of TXA_2 in the subepithelium, and the released TXA_2 acts on epithelial colonic crypt cells



Figure 11. Effects of SNP and STA₂ on the membrane potential of single cells in isolated colonic crypts

A and B, typical traces of the membrane potential ($V_{\rm m}$) of the cells located at the middle of crypts. $V_{\rm m}$ was recorded at zero-currentclamp mode. The bathing solution containing 100 μ M SNP (A) or 0.1 μ M STA₂ (B) was perfused from the indicated time. C, the $V_{\rm m}$ values were read just before and 5 min after the addition of SNP (left column) or STA₂ (right column), and they are expressed as net changes from the control $V_{\rm m}$ ($\Delta V_{\rm m}$) recorded immediately before the addition of SNP or STA₂. ** Significantly different from zero (P < 0.01). n = 5 (left) and 3 (right). Gel analysis of the RT-PCR product from isolated colonic crypts. A single band of 478 bp was detected by ethidium bromide staining (colonic crypts). No band was detected in negative control experiments of RT-PCR without reverse transcriptase (RT(-)) or *Taq* DNA polymerase (PCR(-)). Inset, a scheme of this PCR experiment is shown. TXA₂R, TXA₂ receptor; sense, a sense primer; antisense, an antisense primer.

(Sakai et al. 1997; Suzuki et al. 2000a,b). The expression of TXA₂ receptor mRNA in the colonic crypt cells was confirmed (Fig. 12). In the present study, we have demonstrated for the first time that PAF-induced Clsecretion but not irinotecan-induced Cl- secretion is mediated by the production of NO (Figs 9 and 10). NO may be released from macrophages, mast cells, phagocytes and/or neutrophils in the colonic mucosa (Wilson et al. 1993; Stack et al. 1996). To date, the mechanism for the NO-independent TXA₂ release elicited by irinotecan remains unknown. Irinotecan is a DNA topoisomerase I inhibitor and has been used clinically as an anti-tumour drug. One of the major dose-limiting toxicities of irinotecan is severe diarrhoea, and the irinotecan-induced Cl⁻ secretion in the colon may be one of the factors responsible for this symptom (Sakai et al. 1995, 1997; Suzuki et al. 2000a).





In our present study, SNP increased colonic Cl⁻ secretion in a concentration-dependent manner (Fig. 1B). The results were obtained from in vitro experiments on rat distal colonic mucosa. Several other studies have also shown that NO stimulates colonic Cl- secretion (MacNaughton, 1993; Tamai & Ganginella, 1993; Wilson et al. 1993; Stack et al. 1996; Stoner et al. 2000). Contrary to these reports of NO-stimulated Cl- secretion, several research groups have reported that endogenous NO has a proabsorptive effect in the jejunum and ileum (Barry et al. 1994; Mailman, 1994; Maher et al. 1995; Schirgi-Degen & Beubler, 1995). For example, intravenous infusion of N^{ω} -nitro-L-arginine methyl ester (L-NAME), a NO synthase inhibitor, into a ligated rat jejunal loop, reversed the net fluid absorption to produce net secretion. The PGE₂-induced secretion was increased by treatment with L-NAME and blocked by SNP, although mucosal cGMP



Figure 13. A scheme of the PAF- and irinotecan-induced Cl⁻ secretion in rat colonic mucosa, and proposed sites of action of the compounds used in this study

GC, soluble guanylate cyclase; TXS, thromboxane synthase; +, activation; -, inhibition.

and cAMP levels after L-NAME treatment were not different from control values (Schirgi-Degen & Beubler, 1995). Furthermore, a murine model of colitis induced by trinitrobenzene sulphonic acid resulted in prolonged impairment of colonic epithelial secretion, and the decrease in Cl⁻ secretion is suggested to be due to the inhibiting actions of NO produced by inducible NO synthase (MacNaughton *et al.* 1998; Asfaha *et al.* 2001). At present, it is difficult to explain these intestinal secretory and absorptive effects of NO. One possible explanation is that NO has dual actions, depending on the state of the colon (i.e. normal and colitis). Another possibility is that the effects of NO would be different in the jejunum, ileum and colon according to their different physiological functions.

In summary, in the present study we have found that in the rat colon, NO-induced Cl⁻ secretion is mediated by an increase in the production of cGMP and subsequent stimulation of TXA₂ release from subepithelial cells, and that this NO–cGMP–TXA₂ pathway is stimulated by PAF but not by irinotecan. Further studies are necessary to clarify the pathophysiological roles of the Cl⁻ secretion induced by the PAF–NO–cGMP–TXA₂ pathway in the colon and to examine the signalling mechanisms involved in the irinotecan-stimulated release of TXA₂.

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