

N,N'-Dimethylthiourea dioxide formation from *N,N'*-dimethylthiourea reflects hydrogen peroxide concentrations in simple biological systems

(O₂ metabolites/lung injury/oxidants/antioxidants)

WILLIAM E. CURTIS*, MARGARET E. MULDROW*, NATALIE B. PARKER*, ROBERT BARKLEY†, STUART L. LINAS‡, AND JOHN E. REPINE*§

*Departments of Medicine, Pediatrics and Surgery, the Webb-Waring Lung Institute at the University of Colorado Health Sciences Center, and †Denver General Hospital, Denver, CO 80262; and the ‡University of Colorado, Boulder, CO 80303

Communicated by David W. Talmage, December 31, 1987

ABSTRACT . . . We hypothesized that measurement of a specific product from reaction of *N,N'*-dimethylthiourea (Me₂TU) and H₂O₂ would provide a good indication of the H₂O₂ scavenging and protection seen after addition of Me₂TU to biological systems. We found that addition of H₂O₂ to Me₂TU yielded a single stable product, Me₂TU dioxide. Me₂TU dioxide formation correlated with Me₂TU consumption as a function of added H₂O₂ concentration and was prevented by simultaneous addition of catalase (but not boiled catalase), superoxide dismutase, dimethyl sulfoxide, mannitol, or sodium benzoate. Me₂TU dioxide formation, Me₂TU consumption, and H₂O₂ concentration increases occurred in mixtures containing phorbol 12-myristate 13-acetate (PMA) and normal human neutrophils but not in mixtures containing PMA and neutrophils from patients with chronic granulomatous disease or in mixtures containing PMA and normal neutrophils and catalase. Me₂TU dioxide formation also occurred in isolated rat lungs perfused with Me₂TU and H₂O₂ but not in lungs perfused with Me₂TU and elastase, histamine, or oleic acid. In contrast, Me₂TU dioxide formation did not occur after exposure of Me₂TU to ⁶⁰Co-generated hydroxyl radical or hypochlorous acid in the presence of catalase. The results indicate that reaction of Me₂TU with H₂O₂ selectively forms Me₂TU dioxide and that measuring Me₂TU dioxide formation from Me₂TU may be useful for assessing the presence and significance of H₂O₂ in biological systems.

Toxic oxygen metabolites appear to participate in a multitude of normal and abnormal biological responses (1-6). Because O₂ metabolites are highly reactive and present in low concentrations, it has been difficult to ascertain their contribution in biological systems (2, 7). The contribution of toxic O₂ metabolites is usually assessed in biological systems by observing changes after addition of agents that decrease O₂ metabolite concentrations *in vitro*. One of these agents is *N,N'*-dimethylthiourea (Me₂TU), a highly permeant molecule, which decreases injury in a wide variety of biological systems (8-20). However, because Me₂TU can scavenge hydrogen peroxide (H₂O₂), hydroxyl radical (·OH), or hypochlorous acid (HOCl) *in vitro*, its mechanism of action in biological systems is often questioned (8-13, 21). Recently, we addressed this concern by showing that Me₂TU decreased after reaction with H₂O₂ *in vitro* and then used Me₂TU consumption to assess H₂O₂ and H₂O₂-dependent processes in simple biological systems (8). Me₂TU consumption occurred as a function of added amounts of H₂O₂ and in proportion to corresponding degrees of H₂O₂-mediated injury in endothelial cells and isolated perfused lungs and

kidneys (9-11). However, since Me₂TU might also be consumed by reaction with either ·OH or HOCl (8, 21), we subsequently reasoned that increased specificity or sensitivity in detecting the small concentrations of H₂O₂ that probably occur in physiological systems would be achieved if a specific product from reaction of H₂O₂ and Me₂TU could be identified and measured in biological systems.

METHODS

Purification and Determination of Me₂TU Dioxide. H₂O₂ (J. T. Baker Chemical, Phillipsburg, NJ) was added to triply distilled H₂O and Me₂TU (Alfa-Ventron, Danvers, MA) and allowed to react for 60 min in an ice bath. The product was purified by using a Waters Resolve C₁₈ 5-μm semipreparative column (7.8 mm × 30 cm) and lyophilized. Elemental analysis (by Huffman Laboratories, Denver, CO), IR, NMR, and mass spectroscopy analyses were conducted on the purified product.

Measurement of Me₂TU or Me₂TU Dioxide Concentrations by Gas Chromatography (GC) or High-Pressure Liquid Chromatography (HPLC). An internal standard (1%) for GC analysis was made by dissolving diethyl sulfone (3.5 g, ICN Pharmaceutical, Plainview, NJ) in deionized H₂O (100 ml). In some experiments, catalase (Worthington), urea (Fisher Scientific, Fairlawn, NJ), thiourea (J. T. Baker Chemical), HOCl, sodium benzoate, mannitol, superoxide dismutase (SOD), dimethyl sulfoxide (Me₂SO), or 1,3-dimethylurea (all from Sigma) was added to samples of H₂O₂ or Me₂TU. Me₂TU and Me₂TU dioxide concentrations were assessed by using a GC instrument, equipped with a free induction decay detector and integrator (8). The integrator was programmed to print out peak areas and retention times. The peak area for Me₂TU dioxide was divided by the peak area for the internal standard to give a peak area ratio. Incubations were conducted in triply distilled H₂O or potassium phosphate buffer (0.05 M, pH 7.4). Me₂TU dioxide concentrations also were measured by using HPLC analysis (Waters model 510 pump) with a Resolve C₁₈ 5-μ reverse-phase column (3.9 mm × 15 cm) with H₂O as the isocratic mobile phase at a flow rate of 1 ml/min. The effluent was monitored at 229 nm with a spectrophotometric detector, with diluted Me₂SO used as an internal standard for HPLC analysis.

Isolation of Neutrophils. Neutrophils were isolated from heparinized (20 units/ml) venous blood collected from healthy medication-free adult donors and an individual with X chromosome-linked chronic granulomatous disease (CGD) by using hetastarch (Hespan 6%; DuPont, Waukegan, IL)

The publication costs of this article were defrayed in part by page charge payment. This article must therefore be hereby marked "advertisement" in accordance with 18 U.S.C. §1734 solely to indicate this fact.

Abbreviations: Me₂TU, dimethylthiourea; SOD, superoxide dismutase; PMA, phorbol 12-myristate 13-acetate; CGD, chronic granulomatous disease.

§To whom reprint requests should be addressed at: Box C322, 4200 E. Ninth Ave., Denver, CO 80262.

sedimentation and Percoll gradient separation and erythrocyte lysis (22, 23). Neutrophils were counted in a hemocytometer and resuspended in complete Hanks' balanced salt solution (HBSS, GIBCO, Chagrin Falls, OH). Phorbol 12-myristate 13-acetate (PMA, Sigma) was dissolved in Me₂SO and stored at -70°C (23).

Measurement of H₂O₂ Concentrations. Samples were acidified with 50% trichloroacetic acid (Sigma, 0.1 ml) and centrifuged. Supernatants (0.2 ml) were combined with isotonic saline (0.8 ml), ferrous ammonium sulfate (10 μM, 0.2 ml), and potassium thiocyanate (2.5 M, 0.1 ml) and then assayed spectrophotometrically at 480 nm (24).

Exposure to Irradiation. Samples were exposed to ⁶⁰Co γ-irradiation under N₂O. Characteristic EPR and other values were obtained, confirming ·OH production (25).

Measurement of Acute Edematous Injury in Isolated Perfused Rat Lungs. Rats were anesthetized with pentobarbital (100 mg/kg i.p.) (26). After tracheostomy, rats were continuously ventilated with a warmed humidified mixture of 95% room air and 5% CO₂. The thorax and abdomen were then opened with a ventral midline incision and heparin (150 units) was injected. Cannulae were placed in the pulmonary artery and left atrium. The lung vasculature was perfused clear with modified Krebs/Henseleit solution that contained Ficoll-70 (Pharmacia). Heart and lungs were then removed, suspended by the trachea, and weighed by using a force (weight) displacement transducer. Pulmonary artery perfusion pressures were measured by pressure transducer through a cannula placed in the pulmonary artery.

Statistical Analyses. Data were analyzed by using analysis of variance (ANOVA) with Student-Newman-Keuls (SNK) tests (27).

RESULTS

Identification of Me₂TU Dioxide as the Product from Reaction of Me₂TU and H₂O₂ *in Vitro*. Reaction of Me₂TU and H₂O₂ yielded a single peak on HPLC (Fig. 1) or GC (data not shown) tracings (28, 29). Elemental analyses revealed that the product from reaction of Me₂TU with H₂O₂ fit the predicted formula C₃H₈N₂O₂S for Me₂TU dioxide. Calculated: C, 26.46%; H, 5.92%; N, 20.57%; O, 23.50%; S, 23.54%. Observed: C, 26.48%; H, 5.99%; N, 20.48%; O, 23.59%; S, 23.25%.

In addition, IR spectroscopy showed the typical sulfinic acid (S=O) absorption band in the region of 1090 cm⁻¹ (30). ¹³C NMR showed three distinct carbons with hindered rotation about the C-N bond (31). Electron impact mass spectrometry revealed that the product sample fragmented into two

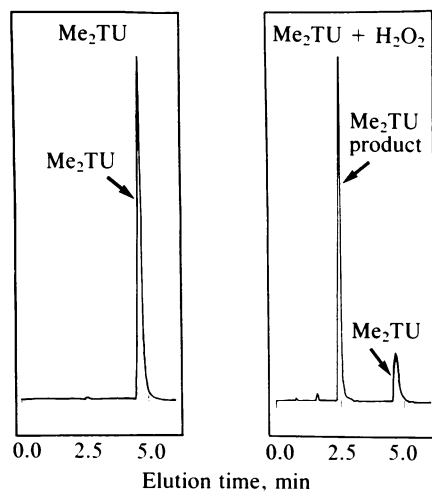


FIG. 1. Characteristic tracings from HPLC analysis of Me₂TU or a mixture of Me₂TU with H₂O₂ *in vitro*.

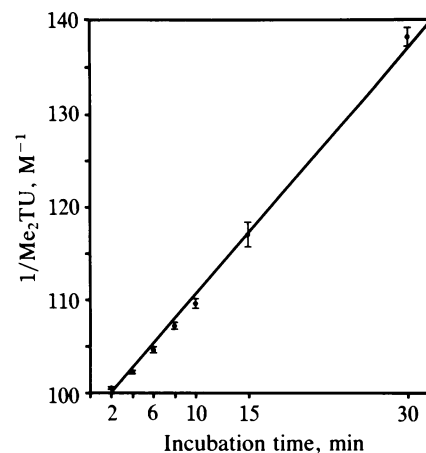


FIG. 2. Determination of second-order rate for reaction of Me₂TU with H₂O₂ *in vitro*. Initial concentrations (C₀) of the two reactants were equal. The equation used to calculate the rate was 1/C - 1/C₀ = kt, in which C is concentration and t is time. Each value is the mean ± 1 SEM of four determinations.

peaks representing sulfur dioxide and the corresponding formamide (32). Negative chemical ionization spectra showed a (M - 1) ion for the sulfinic acid at m/z 135. Positive fast atom bombardment spectra demonstrated a confirmatory (M + 1) ion at m/z 137. The reaction rate of Me₂TU with H₂O₂ *in vitro* was calculated to be 1.4 M⁻¹·min⁻¹ (Fig. 2). Me₂TU dioxide decomposed in H₂O at room temperature but not in H₂O or potassium phosphate buffer kept at 0°C for 2 weeks (data not shown). Me₂TU dioxide was also stable during incubation for 30 min at 37°C with H₂O₂, and for 60 min when incubated at 37°C with neutrophils or erythrocytes (data not shown). Concentrations of Me₂TU (500 nM to 1 mM) or Me₂TU dioxide (700 nM to 1 mM) were measurable by GC or HPLC analyses, respectively.

Specificity of Me₂TU Dioxide Formation After Reaction of H₂O₂ with Me₂TU *in Vitro*. Addition of increasing concentrations of H₂O₂ caused linear decreases in Me₂TU concentrations (Me₂TU consumption) and corresponding linear increases in Me₂TU dioxide concentrations (Me₂TU dioxide formation) in buffered solutions (GC analysis, Fig. 3) or unbuffered solutions (data not shown). Less Me₂TU dioxide formation occurred after addition of catalase but not boiled catalase, SOD, Me₂SO, mannitol, or sodium benzoate to mixtures of H₂O₂ and Me₂TU *in vitro* (Table 1).

Me₂TU dioxide formation did not occur after reaction of Me₂TU with ·OH or HOCl in the presence of catalase *in vitro*.

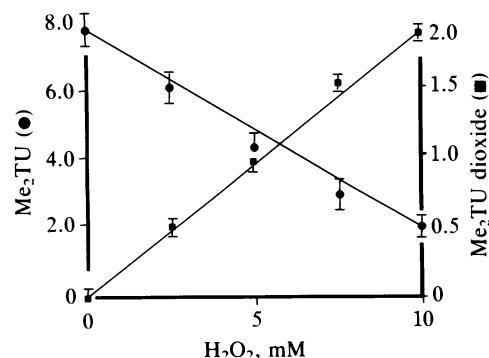


FIG. 3. Me₂TU concentration decreases as Me₂TU dioxide concentration increases as a function of added H₂O₂ concentration *in vitro*. Me₂TU and Me₂TU dioxide concentrations were measured by GC and are expressed as peak area relative to area of the internal standard peak. Each value is the mean ± 1 SEM of three determinations.

Table 1. Effect of O₂ metabolite scavengers on Me₂TU dioxide concentrations in mixtures containing Me₂TU and H₂O₂ *in vitro*

Additions	Me ₂ TU dioxide, mM	
	Unbuffered medium	Buffered medium
None	0 (3)	0 (3)
H ₂ O ₂ (36 mM)	3.5 ± 0.6* (3)	4.6 ± 0.2* (3)
H ₂ O ₂ + catalase (250 µg/ml)	0 [†] (3)	0 [†] (3)
H ₂ O ₂ + boiled catalase	4.3 ± 0.3* (3)	4.2 ± 0.5* (3)
H ₂ O ₂ + SOD (125 µg/ml)	4.2 ± 0.3* (3)	3.0 ± 0.5* (3)
H ₂ O ₂ + Me ₂ SO (12.3 mM)	3.9 ± 0.5* (3)	3.5 ± 0.3* (3)
H ₂ O ₂ + mannitol (12.5 mM)	3.1 ± 0.5* (3)	3.3 ± 0.4* (3)
H ₂ O ₂ + Na benzoate (12.5 mM)	3.7 ± 0.4* (3)	4.9 ± 0.7* (3)
H ₂ O ₂ + albumin (2.5 mg/ml)	3.0 ± 0.3* (3)	3.6 ± 0.1* (3)

Me₂TU (50 mM) and the substances in the first column were mixed and then incubated for 30 min at 37°C. Results are presented as mean ± SEM, with number of determinations in parentheses.

*Value significantly different ($P < 0.05$) from value obtained after no additions.

[†]Value significantly different ($P < 0.05$) from value obtained after addition of H₂O₂.

Irradiation (⁶⁰Co) under N₂O for 10 min caused Me₂TU consumption (14 ± 2% of initial value, $n = 5$), Me₂TU dioxide formation (3.4 ± 1.0 µM, $n = 5$), and H₂O₂ production (2.6 ± 2.6 µM, $n = 5$). However, when catalase was added, irradiation caused reduced Me₂TU consumption (6 ± 2% of initial value, $n = 5$) but not Me₂TU dioxide formation (0.0 ± 0.0 µM, $n = 5$) or H₂O₂ production (0.0 ± 0.0 µM, $n = 5$). Thus, reaction of Me₂TU with either H₂O₂ or ·OH consumes Me₂TU but only reaction of Me₂TU with H₂O₂ (and not ·OH) yields Me₂TU dioxide. Addition of HOCl and catalase also did not produce Me₂TU dioxide (0 ± 0 µM, $n = 5$) from Me₂TU *in vitro*. Me₂TU dioxide also was not measurable in mixtures containing H₂O₂ and thiourea, urea, or dimethylurea, in mixtures of Me₂TU in H₂O or phosphate buffer without H₂O₂, or in mixtures of H₂O₂ with the other constituents without Me₂TU (data not shown).

Me₂TU Dioxide Concentrations in Mixtures Containing Human Neutrophils. Me₂TU dioxide concentrations, Me₂TU consumption, and H₂O₂ concentrations were increased in mixtures containing neutrophils and PMA compared to mixtures containing neutrophils alone (Table 2). Addition of catalase (but not SOD) decreased Me₂TU dioxide concentrations, Me₂TU consumption, and H₂O₂ concentrations in mixtures containing normal human neutrophils and PMA. By comparison, Me₂TU dioxide formation, Me₂TU consumption, and H₂O₂ concentration increases did not occur in mixtures containing CGD neutrophils and PMA (Table 2).

Me₂TU Dioxide Concentrations in Isolated Lungs Perfused with H₂O₂. Addition of H₂O₂ caused Me₂TU dioxide formation and acute edematous injury (increases in lung weight

gains and pulmonary artery perfusion pressures) in isolated lungs perfused with Me₂TU; Me₂TU dioxide formation and injury did not occur in isolated lungs of rats perfused only with buffer and Me₂TU without added H₂O₂ (Table 3). In contrast to H₂O₂, addition of elastase, histamine, or oleic acid to perfusates of isolated lungs containing Me₂TU did not produce Me₂TU dioxide regardless of the development of acute edematous lung injury.

DISCUSSION

We found that reaction of Me₂TU and H₂O₂ yields Me₂TU dioxide and that Me₂TU dioxide formation from Me₂TU can be used to detect H₂O₂ in simple biological systems. Reaction of Me₂TU with H₂O₂ yielded Me₂TU dioxide as a single stable product. This Me₂TU dioxide formation was inhibited by catalase and did not occur after reaction of Me₂TU with ·OH or HOCl *in vitro* in the presence of catalase. Me₂TU dioxide formation from Me₂TU also occurred with stimulated normal neutrophils (but not neutrophils from CGD patients) in proportion to the amounts of generated H₂O₂ and consumed Me₂TU. Moreover, prior addition of catalase to mixtures containing normal neutrophils and PMA decreased Me₂TU dioxide formation as well as corresponding H₂O₂ concentration increases and Me₂TU consumption. Me₂TU dioxide formation also occurred in perfusates of isolated lungs perfused with H₂O₂ and Me₂TU, but not in isolated lungs perfused with Me₂TU and histamine, elastase, or oleic acid, regardless of the development of acute edematous injury.

There is considerable interest in Me₂TU because Me₂TU treatment dramatically decreases injury in a number of biological models in which damage appears to involve O₂ metabolites (9–11). Me₂TU protects alveolar macrophages (12) and lungs (13) from hyperoxic damage, reduces acute edematous lung injury in rabbits treated with PMA (14), and decreases injury in isolated lungs or kidneys perfused with neutrophils and PMA or chemically generated O₂ metabolites (9–11, 15). Me₂TU treatment also effectively reduces cerebral, renal, and myocardial damage after ischemia–reperfusion insults (16–20). In each instance, Me₂TU has been assumed to protect by scavenging O₂ metabolites, in large part, because addition of Me₂TU decreases O₂ metabolite concentrations *in vitro*. However, better ways are needed to assess the nature of the protective effects of Me₂TU in biological systems (2, 7).

Although the abilities of Me₂TU to scavenge O₂ metabolites are well recognized *in vitro* and suspected *in vivo*, some controversy exists regarding whether Me₂TU protects by specifically inactivating H₂O₂, ·OH, or HOCl in biological systems. In simple nonbiological systems, Me₂TU can react with H₂O₂, ·OH, or HOCl (8, 21). The present study emphasizes this point by showing that Me₂TU consumption occurs after reaction with either H₂O₂ or ·OH *in vitro*. Others have

Table 2. Me₂TU dioxide, Me₂TU, and H₂O₂ concentrations in mixtures of normal (NL) and CGD human neutrophils (PMN) and PMA *in vitro*

Additions	Me ₂ TU dioxide, µM	Me ₂ TU, mM	H ₂ O ₂ , µM
NL PMN	0.3 ± 0.3 (6)	0.31 ± 0.05 (4)	0.5 ± 0.3 (20)
NL PMN + PMA	13.2 ± 1.5* (6)	0.19 ± 0.02* (3)	98.9 ± 6.4* (10)
NL PMN + PMA + catalase	6.9 ± 1.6* (6)	0.27 ± 0.02 [†] (3)	0.5 ± 0.3 [†] (5)
NL PMN + PMA + SOD	16.9 ± 2.7* (6)	0.21 ± 0.03* (3)	104.9 ± 8.2* (5)
CGD PMN + PMA	0 [†] (4)	0.32 [†] (2)	0 [†] (2)
CGD PMN	0 [†] (4)	0.30 [†] (2)	0 [†] (2)

Me₂TU (1 mM) and the cells and substances listed in the first column were incubated for 60 min at 37°C. PMA was added at 1 µg/ml and catalase or SOD at 100 µg/ml. Me₂TU dioxide generation, Me₂TU consumption, and H₂O₂ generation were measured with 2 × 10⁷, 1 × 10⁷, and 1 × 10⁶ PMN per ml, respectively. Results are mean ± SEM, with number of determinations in parentheses.

*Value significantly different ($P < 0.05$) from value obtained for normal neutrophils.

[†]Value significantly different ($P < 0.05$) from value obtained for normal neutrophils + PMA.

Table 3. Me₂TU dioxide concentrations in perfusates, weight gains, and pulmonary artery pressure (PAP) increases of isolated rat lungs perfused with Me₂TU and H₂O₂, elastase, histamine, or oleic acid

Additions	Me ₂ TU dioxide, μM	Weight gain, g	PAP increase, mm Hg
None	0 (8)	1.5 ± 0.2 (8)	3.8 ± 0.5 (8)
H ₂ O ₂ (10 mM)	24 ± 0.7* (3)	15.0 ± 2.3* (3)	11.2 ± 4.6* (3)
Elastase (7 mg)	0 (2)	15.0* (2)	8.5* (2)
Histamine (1.4 mg)	0 (2)	0 (2)	0.3* (2)
Oleic acid (250 mg)	0 (2)	10.2* (2)	28.0* (2)

Perfusates contained 14 mM Me₂TU and the additions in the first column. Results are mean ± SEM, with number of determinations in parentheses; 1 mm Hg = 133 Pa.

*Value significantly different ($P < 0.05$) from value obtained with no additions.

shown that HOCl can cause Me₂TU consumption *in vitro* (21). However, only reaction of Me₂TU with H₂O₂ yields Me₂TU dioxide; in the presence of catalase, reaction of Me₂TU with ·OH or HOCl does not yield Me₂TU dioxide. Thus, finding Me₂TU dioxide indicates that Me₂TU has reacted with H₂O₂, regardless of whether or not it has also reacted with some other agent.

Because ·OH and HOCl are so much more reactive than H₂O₂, and as a result, may react indiscriminately and rapidly with various biological molecules, it should be much easier to scavenge the less reactive H₂O₂ (33–35). Accordingly, even though Me₂TU may react much more rapidly with ·OH or HOCl than with H₂O₂ *in vitro*, the situation may be quite different in biological systems, where accessibility of Me₂TU to unreacted H₂O₂ may favor reaction of Me₂TU with H₂O₂ rather than highly reactive ·OH or HOCl. The latter is suggested because (except for irradiation), ·OH or HOCl (via myeloperoxidase) theoretically is formed only from H₂O₂ in biological systems. Moreover, addition of Me₂TU can inhibit H₂O₂- and Fe²⁺/EDTA-mediated Me₂SO consumption *in vitro* (32). This conclusion is also supported by our observations that Me₂TU dioxide is made in biological situations involving neutrophils and isolated lungs. In addition, treatment with Me₂TU (but not urea) decreases injury and H₂O₂-dependent inactivation of catalase by aminotriazole in brains of gerbils subjected to ischemia–reperfusion insults (17). Production of Me₂TU dioxide from Me₂TU may be useful in determining the mechanism of protection achieved after addition of Me₂TU and in distinguishing reactions with H₂O₂ from those with ·OH, HOCl, or other constituents in biological systems. In addition, measurement of decreases in injury and corresponding increases in Me₂TU dioxide concentrations could help determine if treatment with agents that purportedly prevent injury by decreasing H₂O₂ concentrations do so by decreasing H₂O₂ or H₂O₂-dependent reactions or by altering some other non-H₂O₂-dependent mechanism. We hope that this method or this principle will prove applicable to intact animal models, and eventually patients, in which increased amounts of O₂ metabolites are purportedly being generated endogenously (2, 7).

The authors appreciate the constructive criticism and help of Drs. Joe M. McCord and Donald C. Borg. This work was supported in part by grants from the National Institutes of Health (PO1-AM 35098, RO1-HL 35378, RO1-HL 28182, PO1-HL 27353, and RO1-HL 34486), the American Heart Association, the Council for Tobacco Research, Inc., and the Swan, Hill, and American Express Foundations.

- Katz, N. A. (1986) *West. J. Med.* **144**, 441–446.
- Henson, P. M. & Johnston, R. B., Jr. (1986) *J. Clin. Invest.* **79**, 669–674.
- Pryor, W. A. (1977) *J. Med. Chem.* **5**, 3310–3333.
- McCord, J. M. (1985) *N. Engl. J. Med.* **312**, 159–163.
- Repine, J. E. (1985) in *The Pulmonary Circulation and Acute Lung Injury*, ed. Said, S. I. (Futura, Mount Kisco, NY), pp. 249–281.
- Cohen, G. (1984) *Neurotoxicity* **5**, 77–84.

- Halliwell, B. & Grootveld, M. (1987) *FEBS Lett.* **213**, 9–14.
- Parker, N. B., Berger, E. M., Curtis, W. J., Muldrow, M. E., Linas, S. L. & Repine, J. E. (1985) *J. Free Radicals Biol. Med.* **1**, 415–420.
- Jackson, J. H., White, C. W., Parker, N. B., Ryan, J. W. & Repine, J. E. (1985) *J. Appl. Physiol.* **59**, 1995–1998.
- Toth, K. M., Parker, N. B., Clifford, D. P., Berger, E. M., White, J. G. & Repine, J. E. (1984) *Clin. Res.* **32**, 88a (abstr.).
- Linas, S. L., White, C. W., Parker, N. B. & Repine, J. E. (1987) *J. Appl. Physiol.* **22**, F685–F691.
- Harada, R. N., Vatter, A. E. & Repine, J. E. (1983) *Am. Rev. Respir. Dis.* **128**, 761–762.
- Fox, R. B. (1984) *J. Clin. Invest.* **74**, 1456–1464.
- Jackson, J. H., White, C. W., Berger, E. M., McMurtry, I. F. & Repine, J. E. (1986) *J. Appl. Physiol.* **61**, 383–391.
- McDonald, R. J., Berger, E. M. & Repine, J. E. (1987) *Am. Rev. Respir. Dis.* **135**, 957–959.
- Paller, M. S., Hoidal, J. R. & Ferris, T. F. (1984) *J. Clin. Invest.* **74**, 1156–1164.
- Patt, A., Harken, A. H., Burton, L. K., Rodell, T. C., Piermattei, D., Schorr, W. J., Parker, N. B., Berger, E. M., Terada, L. S., Horesh, I. R., Linas, S. L., Cheronis, J. C. & Repine, J. E. (1988) *J. Clin. Invest.*, in press.
- Bolli, R., Zhu, W. X., Hurtle, C. J., Michael, L. H., Repine, J. E., Hess, M. L., Kukreja, R. C. & Roberts, R. (1987) *Circulation* **76**, 458–468.
- Morel, D. R., Lowenstein, E., Nguyendry, T., Robinson, D. R., Repine, J. E., Chenoweth, D. E. & Zapol, W. M. (1988) *Circ. Res.*, in press.
- Portz, S. J., VanBenthuyzen, K., McMurtry, I. & Horwitz, L. D. (1987) *Clin. Res.* **35**, 315a (abstr.).
- Wasil, M., Halliwell, B., Grootveld, M., Moorhouse, C. P., Hutchison, D. C. S. & Braum, H. (1987) *Biochem. J.* **243**, 867–870.
- Repine, J. E., Clawson, C. C. & Friend, P. S. (1977) *J. Clin. Invest.* **59**, 802–809.
- Repine, J. E., White, J. G., Clawson, C. C. & Holmes, B. M. (1974) *J. Clin. Invest.* **54**, 83–90.
- Toth, K. M., Clifford, D. P., White, C. W. & Repine, J. E. (1984) *J. Clin. Invest.* **74**, 292–295.
- Repine, J. E., Pfenninger, O. W., Talmage, D. W., Berger, E. M. & Pettijohn, D. E. (1981) *Proc. Natl. Acad. Sci. USA* **78**, 1001–1003.
- Tate, R. M., Morris, H. G., Schroeder, W. R. & Repine, J. E. (1984) *J. Clin. Invest.* **74**, 608–613.
- Worcester, J. (1966) *N. Engl. J. Med.* **274**, 27–36.
- Havel, J. J. & Klutz, R. Q. (1974) *Synth. Commun.* **4**, 389–393.
- Hoffman, M. & Edwards, J. O. (1977) *Inorg. Chem.* **16**, 3333–3338.
- Stirling, C. J. M. (1971) *Int. J. Sulfur Chem.* **6**, 277–320.
- Wolfgang, W. & Gert, R. (1969) *Chem. Abstr.* **71**, 21324 (abstr.).
- Wellisch, E., Gipstein, E. & Sweeting, O. J. (1962) *J. Org. Chem.* **27**, 1810–1812.
- Cohen, G. (1977) in *Superoxide and Superoxide Dismutases*, eds. McCord, J. M. & Fridovich, I. (Academic, New York), pp. 317–321.
- Dorfman, L. M. & Adams, G. E. (1973) *Reactivity of the Hydroxyl Radical in Aqueous Solutions* (U.S. Dept. Commerce, Natl. Bureau of Standards, Gaithersburg, MD), NSRDS–NBS No. 46, pp. 1–59.
- Neta, P. & Dorfman, L. M. (1968) *Adv. Chem. Sci.* **81**, 222–230.