

12-Lipoxygenase Products Are Potent Inhibitors of Prostacyclin-Induced Renin Release (43083)

INDRA ANTONIPILLAI

Section of Endocrinology, USC Medical Center, Los Angeles, California 90033

Abstract. In isolated human or rat glomeruli, arachidonic acid can be metabolized by the cyclooxygenase pathway to prostaglandins or by the lipoxygenase pathway to hydroxyeicosatetraenoic acids (HETES). We have recently shown that 12-lipoxygenase products are potent inhibitors of renin release. Since prostacyclin (PGI₂) is a potential renin secretagogue, we studied the direct effects of 12-lipoxygenase products on prostacyclin-induced renin secretion. Treatment of rat renal cortical slices with picomolar concentrations of 12-hydroperoxyeicosatetraenoic acid (12-HPETE) and 12-HETE blocked the prostacyclin- or iloprost (an analog of PGI₂)-induced renin secretion. The inhibitory effects of 12-lipoxygenase products were not exhibited by the 5-lipoxygenase-derived products, leukotriene B₄ and 5-HPETE. These results suggest that HETES are not only potent modulators of prostacyclin actions on renin, but that the concerted actions of these compounds in cells may be critical determinants of the juxtaglomerular cell secretion of renin.

[P.S.E.B.M. 1990, Vol 194]

Prostaglandins (PG) made by renal vascular tissues appear to play an important role in renin release as blockade of PG systems has been shown to alter renin release both *in vivo* and *in vitro* (1). In kidney and vessels, arachidonic acid (AA) is also the substrate for another group of enzymes, the lipoxygenases (LO), that convert AA into different 12-hydroperoxyeicosatetraenoic acids (HPETES) which are reduced further by a glutathione-dependent peroxidase to the corresponding hydroxyeicosatetraenoic acids (HETES) (2–4). Recent studies have indicated that 12-HETE, an LO product from AA, is produced not only by platelets (5), macrophages (6), pancreatic islets (7), smooth muscle cells (8), adrenals (9), and vessels (3), but also by human, pig, and rat renal cortical tissue (10, 11). We have recently shown that 12-LO products, such as 12-HPETE and 12-HETE, are potent inhibitors of renin release (12). However, the role of LO products on prostacyclin (PGI₂) stimulation of renin is unknown. In this article, we report that 12-HPETE and its 12-hydroxy derivative are potent inhibitors of PGI₂-induced renin release.

Materials and Methods

Rat (male, Sprague-Dawley, weighing 150–250 g, 42–54 days old) renal cortical slices were used for both static incubations and perfusion experiments (Endotronics Acusyst S perfusion system, Endotronics, Marietta, OH) by a method described previously (12–14). Briefly, using a Stadie-Riggs microtome, two slices (approximately 0.5-mm thick) were obtained from the superficial cortex of each kidney. For static incubations, slices (15–30 mg) were suspended in 2 ml of Krebs-Ringer bicarbonate with glucose (KRBG) buffer containing 0.01% bovine serum albumin, equilibrated with 95% O₂-5% CO₂, and incubated at 37°C for five consecutive 15-min periods. Each slice was incubated for two 15-min baseline periods, after which agents were added and the response to an agent was observed for the next three 15-min periods. The slices were exposed to fresh agents for 15 min and the buffer was aspirated and replaced with fresh buffer during each subsequent 15-min period. Baseline or control renin release was taken as mean of the first two 15-min periods. The standard KRBG medium contained (in millimolar concentrations) NaCl, 120; KCl, 4.7; MgSO₄, 1.2; CaCl₂, 2.5; KH₂PO₄, 1.2; NaHCO₃, 24.8; and glucose, 10 at pH 7.4.

For perfusions, two slices (75–125 mg of renal cortical tissue) were placed in each of six temperature-

Received December 12, 1988. [P.S.E.B.M. 1990, Vol 194]
Accepted February 22, 1990.

0037-9727/90/1943-0224\$2.00/0
Copyright © 1990 by the Society for Experimental Biology and Medicine

controlled perfusion chambers and perfused with the standard KRBG medium as described previously (14). Slices were perfused for at least 60 min to stabilize before 10-min fractions were collected. After a 30-min baseline sampling, the agents were dissolved in 20 ml of KRBG buffer and perfused over a 20-min period. This was followed by a control KRBG buffer for a period of 50 min.

Iloprost, a stable analog of PGI₂ (ZK36,374), was a gift from Berlex Laboratories, Inc. (Cedar Knolls, NJ). PGI₂ (Upjohn Diagnostic, Kalamazoo, MI) was made up in ice-cold Tris (pH 9.3) buffer (50 mM), and solutions of HPETES, HETES, and leukotriene B₄ (LTB₄) (Biomol Research Laboratory, Philadelphia, PA) were dissolved in ethanol and prepared on ice just before use (12). The final concentration of ethanol in KRBG medium was 0.05%. This concentration of ethanol was also added to control incubations not exposed to test compounds and did not influence renin production. Since HPETES or HETES are sensitive to light, dilutions of these compounds as well as experiments were conducted in the dark to avoid any significant loss of potency.

Renin activity in the supernatant of the incubation or perfusion medium was measured by radioimmunoassay after angiotensin I generation according to the method of Haber *et al.* as described previously by us (12–14).

Data Analysis

The results are expressed as the mean $\pm$ SE percentage of control renin release. In the static incubation model, renin release during 15-, 30-, and 45-min periods was expressed as the percentage of baseline (i.e., mean of –15 min and 0 time) in the same slice. In the perfusion experiments, renin release during each collection period was expressed as the percentage of basal renin release in the same chamber during the first collection period (0–10 min). Statistical significance was determined with analysis of variance and a multiple comparison method (using either Duncan's or Dunnett's test, wherever appropriate).

Results

Effects of PGI₂ and Its Stable Analog Iloprost on Renin Release. Renin release from individual cortical slices was relatively stable during the entire 75-min incubation period. In a representative experiment, the mean renin release during –15 min and 0 time was 22.5 ng of angiotensin I/ng/hr (100%), at 15 min, 23.9 ng of angiotensin I/ng/hr (106%), at 30 min, 22.7 ng of angiotensin I/ng/hr (101%), and at 45 min, 21.4 ng of angiotensin I/ng/hr (95%). The absolute levels of renin exhibit considerable variations between incubations even when corrected for slice weight as indicated previously by us (13) as well as by others (15), but

values within the same slice do not greatly differ. This finding emphasizes the importance of using each slice as its own control. In a static incubation system, we compared the renin stimulatory response of PGI₂ with that of iloprost (Table I). PGI₂ (10^{-5} M) significantly stimulated renin secretion at 15 min to $169 \pm 6\%$ compared with control slices, $106 \pm 5\%$, $P < 0.01$; however, the values at 30 min and 45 min fell almost to control levels. In contrast, iloprost (10^{-6} M) produced a similar increase in renin release which continued for 30 min (15 min $152 \pm 5\%$, 30 min $155 \pm 8\%$, both $P < 0.01$).

Effects of 12-LO Products on Iloprost or PGI₂-Induced Renin Release in Static Incubations. 12-HPETE and 12-HETE had an inhibitory effect on iloprost-induced renin secretion. The values at 15, 30, and 45 min of incubations are shown in Figure 1. Concentrations of 12-HPETE (10^{-11} M) which did not alter basal renin release significantly blocked iloprost (10^{-6} M)-stimulated renin secretion at both 15 and 30 min. The concentration of 12-HPETE (10^{-9} M) which did decrease basal renin release also reduced iloprost-induced renin secretion at all three time periods (Fig. 1). However, these values were not significantly different from iloprost + 12-HPETE at 10^{-11} M.

Similarly, 12-HETE (a metabolic reduction product of 12-HPETE) at 10^{-10} M concentration had no effect on basal renin secretion whereas 10^{-8} M concentration reduced basal renin release significantly at 30 and 45 min (Fig. 2). However, 10^{-10} M 12-HETE reduced iloprost-induced renin secretion slightly and 10^{-8} M 12-HETE significantly decreased iloprost action at all three time periods, i.e., 15, 30, and 45 min (Fig. 2).

In addition, both 12-HPETE and 12-HETE also blocked PGI₂-stimulated renin secretion (PGI₂, $168 \pm 5\%$; PGI₂ + 12-HPETE (10^{-9} M), $94 \pm 12\%$; PGI₂ + 12-HETE (10^{-8} M), $117 \pm 7\%$, both $P < 0.05$ versus PGI₂).

Effects of 5-Lipoxygenase Products on Iloprost-Induced Renin Release. LTB₄ and 5-HPETE at 10^{-8} M and 10^{-7} M had no effect on basal or iloprost-induced renin secretion. Table II indicates a represent-

Table I. Effects of PGI₂ and its Stable Analog Iloprost on Renin Release^a

Agents or vehicle added	% control renin release		
	15 min	30 min	45 min
Control	106 ± 5	101 ± 7	100 ± 7
PGI ₂ (10^{-5} M)	169 ± 6^b	118 ± 5	109 ± 16
Iloprost (10^{-6} M)	152 ± 5^b	155 ± 8^b	125 ± 12

^a Incubations were performed as indicated in Materials and Methods. Values are mean $\pm$ SE representing five to eight experiments in comparison to controls within a given period.

^b $P < 0.01$ versus control.

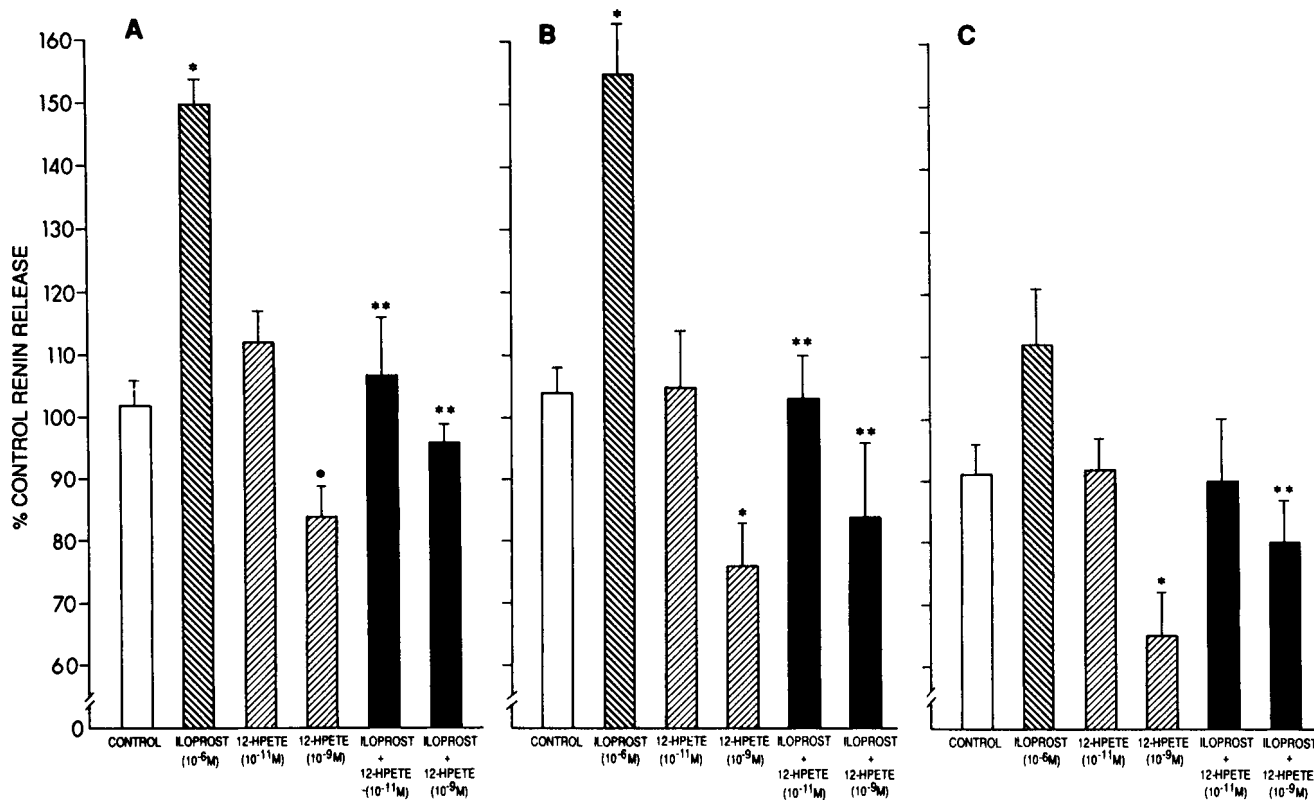


Figure 1. Effects of iloprost and 12-HPETE, separately or in combination, on percentage of renin release by rat renal cortical slices. Baseline renin release is plotted as a percentage of the mean of -15 min and 0 time values; effect of iloprost and 12-HPETE is expressed as a percentage of the baseline after 15 (A), 30 (B), and 45 min (C). Values are the mean $\pm$ SE representing five to seven experiments. * $P < 0.05$ versus control, ** $P < 0.05$ versus iloprost.

ative study of LTB_4 and 5-HPETE at $10^{-7} M$ concentrations.

Effects of 12-HPETE on Iloprost Effects in the Perfusion System. To fully evaluate the role of 12-HPETE and its time course on PG action, perfusion studies were performed. As indicated in Figure 3, control slices released renin in a relatively stable manner over the entire study period (100 min). Iloprost ($10^{-6} M$) caused a rapid increase in renin release. The values peaked at 40–50 min (i.e., 10 min after exposure of slices to this agonist) and returned to basal levels during a 60- to 70-min time period. The effects of 12-HPETE in perfusion are shown in Figure 4. 12-HPETE inhibited renin secretion after a 20-min lag period. The maximal inhibition was seen at the 60- to 70-min time period. When slices were treated with 12-HPETE ($10^{-9} M$) + iloprost, the peak renin response to iloprost was not only blocked (40–60 min) following its addition, but renin release was reduced below control values, somewhat similar to that seen with 12-HPETE alone (at 70 min). The renin levels then returned to basal control levels by 80–100 min (Fig. 3).

Effects of 12-HPETE on Isoproterenol (ISOP)-Induced Renin Release. To determine whether 12-HPETE also has effects on other mediators of renin secretion, the effects of ISOP, a β -adrenergic agonist,

were assessed. ISOP ($10^{-6} M$) produced a significant and sustained increase in renin release in the perfusion set up (Fig. 5). Its effect was significant by 10 min after its addition, and renin release reached a plateau from 40 to 100 min. When 12-HPETE and ISOP were added to the perfusate, renin levels decreased significantly and values obtained were similar to those of control slices after 20 min ($P < 0.05$ versus control). There appeared to be a 15- to 20-min delay in the effect of 12-HPETE on ISOP-induced renin release.

Discussion

12-HETE is a major arachidonate LO product in both isolated human and rat glomeruli (10). The results of the present studies demonstrate for the first time that nanomolar concentrations of 12-HPETE and 12-HETE significantly decrease the PGI_2 -induced release of renin. Since PGI_2 has a short half-life and is unstable in solution, studies were also carried out with iloprost (16). Picomolar concentrations of both 12-HPETE and 12-HETE also inhibited the action of iloprost or renin release. When compared with 12-HETE, 12-HPETE was more potent in our system. These quantitative differences between HPETES and HETES exist in a number of cell types (12).

Additional support for the potent inhibitory role of

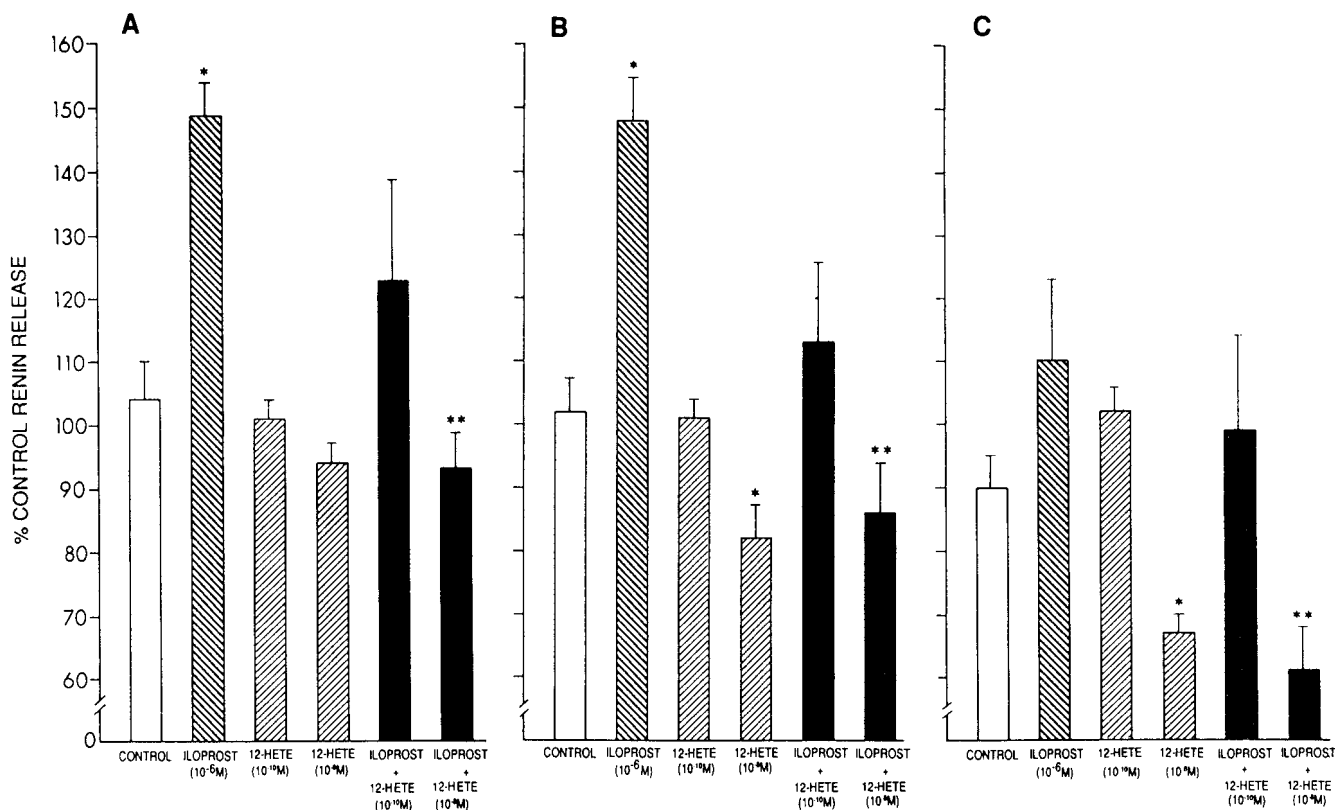


Figure 2. Effects of iloprost and 12-HETE, separately or in combination, on percentage of renin release by rat renal cortical. Baseline renin release is plotted as a percentage of the mean of -15 min and 0 time values; effect of iloprost and 12-HETE is expressed as a percentage of the baseline after 15 (A), 30 (B), and 45 min (C). Values are mean $\pm$ SE representing six to seven experiments. * $P < 0.05$ versus control, ** $P < 0.05$ versus iloprost.

Table II. Effects of LTB₄ and 5-HPETE on Renin Release^a

Agents or vehicle added	% control renin release		
	15 min	30 min	45 min
Control	106 $\pm$ 3	93 $\pm$ 3	92 $\pm$ 6
LTB ₄ (10 ⁻⁷ M)	122 $\pm$ 10	116 $\pm$ 18	104 $\pm$ 19
5-HPETE (10 ⁻⁷ M)	116 $\pm$ 9	119 $\pm$ 9	111 $\pm$ 7
Iloprost (10 ⁻⁶ M)	136 $\pm$ 7 ^b	149 $\pm$ 9 ^b	122 $\pm$ 13
Iloprost + LTB ₄	133 $\pm$ 3 ^b	160 $\pm$ 3 ^b	121 $\pm$ 8
Iloprost + 5-HPETE	140 $\pm$ 12 ^b	177 $\pm$ 14 ^b	121 $\pm$ 9

^a Incubations were performed as indicated in Materials and Methods. Values are mean $\pm$ SE representing five to seven experiments in comparison to controls within a given period.

^b $P < 0.05$ versus control.

12-LO products on PG-induced renin was provided from the perfusion experiments, which are considered more physiologic since products from the renal cortical slices are constantly washed out and the contents of the medium are kept constant. Using this system, 12-HPETE blocked the iloprost action, during the 30- to 60-min time period and values dropped below the control slices at the 70-min time period (Fig. 3). The inhibitory action of 12-HPETE was also seen in ISOP-induced renin release; however, since the ISOP action

on renin was prolonged, 12-HPETE reduced the renin release to basal levels. These studies suggest that 12-HPETE blocks both the short-lived stimulation by iloprost and the sustained increases by ISOP.

In a number of systems, LO products have been shown to reduce PG formation by inhibiting cyclooxygenase (CO) (17-19). In pig and bovine aortic endothelial cells, 12- and 15-HPETE inhibit PGI₂ synthesis (17, 18). The same has been reported for 12- and 15-HETES which are competitive inhibitors of vascular CO (19). Recent studies indicate that MDCK cells (derived from renal tubular epithelium), incubated with 12-HETE, have a reduced capacity to produce PGE₂ (20). These studies suggest that HETES have the capacity to decrease PG production. The data presented here indicate that HETES can also block the effect of added PGI₂ on renin release.

The inhibitory actions of 12-HPETE (HETE) on PGI₂ or ISOP do not appear to be simply toxic or due to a cellular damage for several reasons. First, the inhibitory effects were seen at concentrations as low as 10⁻¹¹ M. Second, renin secretion in slices exposed to 12-HPETE alone was reversed to baseline levels following a wash period (12). Third, a related compound, 5-HPETE, which is structural isomer of 12-HPETE differing only in the position of a single hydroperoxy

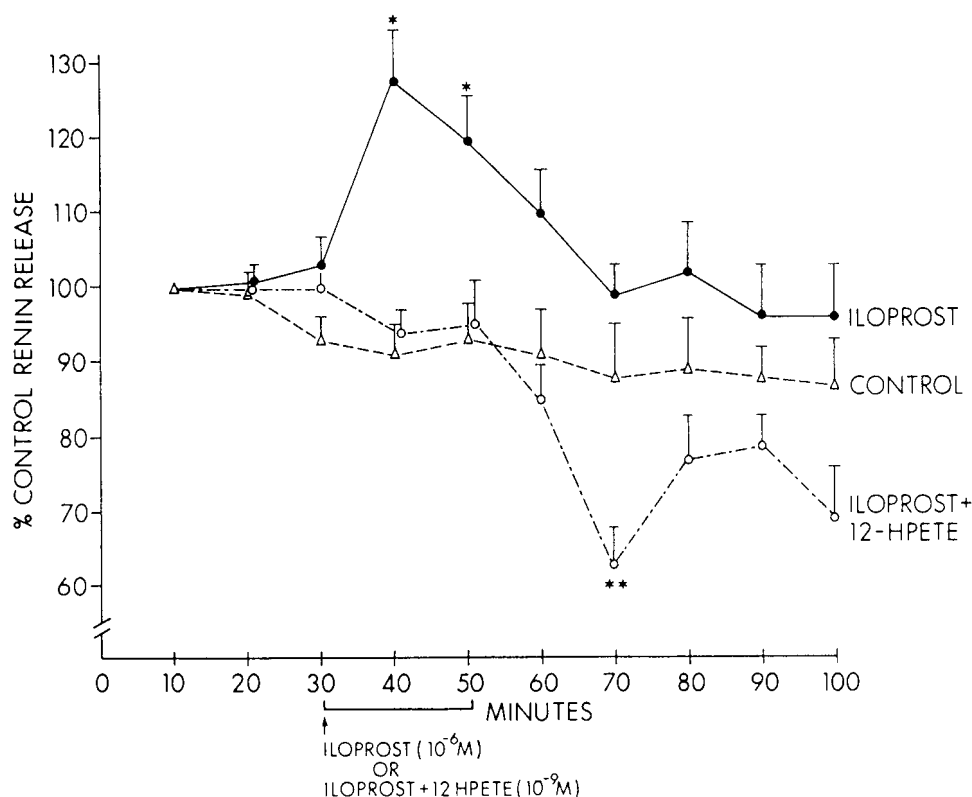


Figure 3. Effects of iloprost and iloprost + 12-HPETE on renin release by perfused rat renal cortical slices. Perfusions were performed as described in the text. The results are expressed as percentage of control renin release. Values represent mean $\pm$ SE of six to eight separate experiments. Iloprost significantly stimulated renin release at 40–50 min compared with control (* $P < 0.05$), while renin release with iloprost + 12-HPETE treatment was not significantly different from that of control. Iloprost + 12-HPETE significantly inhibited renin compared with control at 70 min (** $P < 0.05$). No significant differences were found between control and iloprost at 70 min.

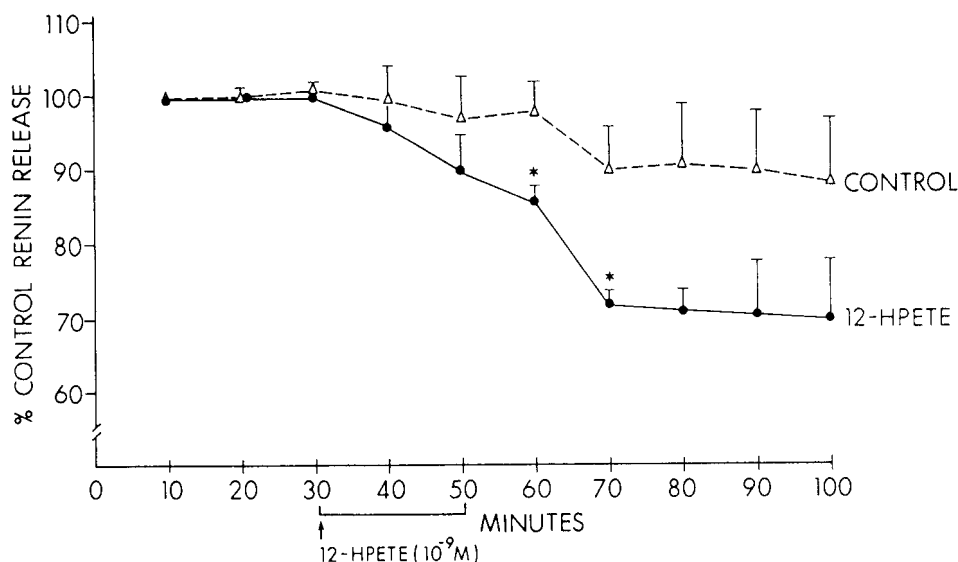


Figure 4. Effects of 12-HPETE in the perfusion system. Results are mean $\pm$ SE of five to six sets of separate experiments. 12-HPETE significantly inhibited renin release compared with control slices over the 60- to 70-min time period (* $P < 0.05$).

group, failed to effect basal or iloprost-induced renin levels. Fourth, the HETES are not generally inhibitory in every cell. They act as mediators of glucose-induced insulin secretion in pancreatic islet cells (7) and angiotensin II-induced aldosterone secretion in adrenal glomerulosa cells (9). The actions of 12-HETE/HPETE

on PGI₂ or iloprost-induced renin release are also not merely due to nonspecific hydroperoxide breakdown products, since mannitol, ascorbate, or diethyldithiocarbamate (14) did not alter basal or iloprost-induced renin secretion (our unpublished data).

The cellular mechanisms by which LO products

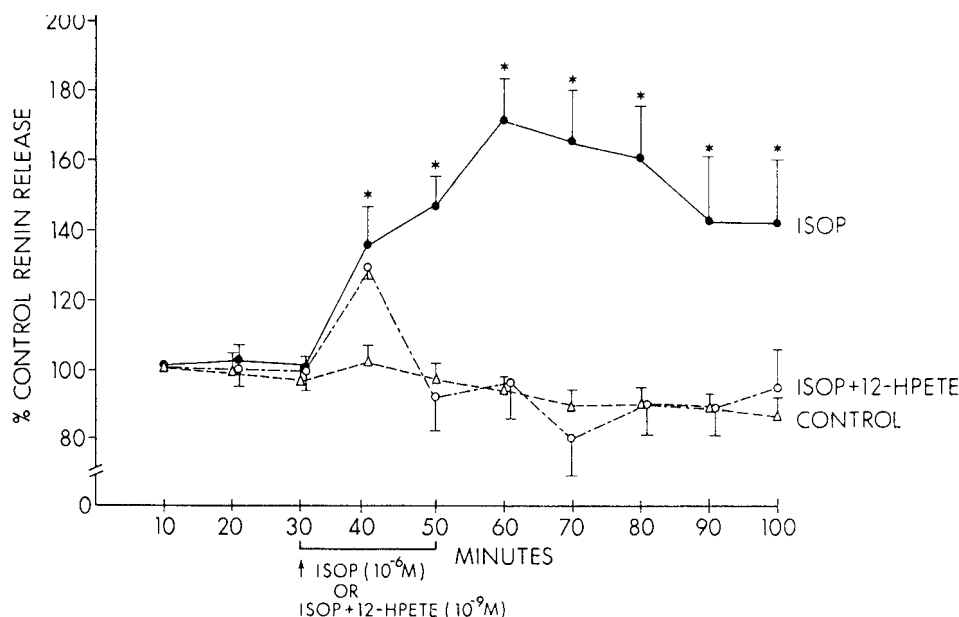


Figure 5. Effects of ISOP or ISOP + 12-HPETE in the perfusion system. Results are mean $\pm$ SE of four to five sets of separate experiments. ISOP significantly stimulated renin release compared with control slices over 40–100 min ($P < 0.05$). No significant differences were found between control and ISOP + 12-HPETE over 50–100 min.

inhibit PGI_2 - or ISOP-mediated renin release are not clear. Renin release is regulated by both adenylate cyclase-cAMP as well as by the calcium-protein kinase C messenger systems. These systems probably act in a concerted fashion (1, 21). Although actions of PG on renin have been linked to adenylate cyclase systems (22), HETES can alter calcium flux, activate protein kinase C, and can be readily incorporated into membrane phospholipids, thereby altering membrane fluidity and the permeability of the cells to cations (23–25). Our studies indicate that both 12-HPETE and 12-HETE also block the effects of nifedipine (a calcium channel blocker)-induced renin secretion (unpublished). It is likely that generation and action of LO metabolites are interrelated with changes in calcium and stimulus secretion coupling in the juxtaglomerular cells.

The data presented here and our earlier studies (12, 26) suggest that dual pathways of AA metabolism are present in the kidney juxtaglomerular cells, which have opposing regulatory effects on renin release, a stimulatory CO cascade via PGI_2 , and an inhibitory LO cascade. Moreover, 12-LO products from this cascade are more potent inhibitors of renin release on a molar basis than PGI_2 as a secretagogue. Similar results have been reported by Chansel et al. (27) using cultured human mesangial cells.

Our study demonstrates that HETES are potent modulators of PG actions on renin release. These results suggest that the concerted actions of these compounds could be critical determinants of juxtaglomerular cell (a modified vessel) renin secretion.

thank Dr. Richard Horton for his advice and criticism on this study and Ms. Jenny Yang for typing the manuscript.

1. Keeton TK, Campbell WB. The pharmacologic alteration of renin release. *Pharmacol Rev* 32:81–227, 1981.
2. Schlondorff D, Ardaillou R. Prostaglandins and other arachidonic acid metabolites in the kidney. *Kidney Int* 29:108–119, 1986.
3. Greenwald JE, Bianchini JR, Wong LK. The production of the arachidonate metabolite HETE in vascular tissue. *Nature* 28:588–589, 1979.
4. DeMey JG, Claeys M, Vanhoutte PM. Endothelium-dependent inhibitory effects of acetylcholine, adenosine triphosphate, thrombin and arachidonic acid in the canine femoral artery. *J Pharmacol Exp Ther* 222:166–173, 1982.
5. Siegel MI, McConnell RT, Porter NA, Cuatrecasas P. Arachidonate metabolism via lipoxygenase and 12-hydroperoxy-5,8,10,14-eicosatetraenoic acid peroxidase sensitive to anti-inflammatory drug. *Proc Natl Acad Sci USA* 77:308–312, 1980.
6. Rabinovitch H, Durand J, Rigand M, Mendy F, Breton M. Transformation of arachidonic acid into monohydroxyeicosatetraenoic acid by mouse peritoneal macrophages. *Lipids* 16:518–524, 1981.
7. Metz S, Van Rollins M, Strife R, Fujimoto W, Robertson RP. Lipoxygenase pathway in islet endocrine cells: Oxidative metabolism of arachidonic acid promotes insulin release. *J Clin Invest* 71:1191–1205, 1983.
8. Larrue J, Rigaud M, Razaka G, Daret D, Desmond-Itenri J, Bricaud H. Formation of monohydroxyeicosatetraenoic acids from arachidonic acid by cultured rabbit aortic smooth muscle cells. *Biochem Biophys Res Commun* 112:242–249, 1983.
9. Nadler JL, Natarajan R, Stern N. Specific action of the lipoxygenase pathway in mediating angiotensin II induced aldosterone synthesis in isolated adrenal glomerulosa cells. *J Clin Invest* 80:1763–1769, 1987.
10. Sraer J, Rigaud M, Bens M, Rabinovitch H, Ardaillou R. Metabolism of AA via the lipoxygenase pathway in human and murine glomeruli. *J Biol Chem* 258:4325–4330, 1983.
11. Livio M, Chiabrando C, Macconi D, Benigini A, Zimei M, Maria Teresa De Pietro, Remuzzi G. Metabolism of arachidonic acid

This work was supported by a NIH First Award DK-39204. I

- in isolated glomeruli from pig kidney. *Biochim Biophys Acta* **961**:110–121, 1988.
12. Antonipillai I, Nadler JL, Robin EC, Horton R. The inhibitory role of 12 and 15-lipoxygenase products on renin release. *Hypertension* **10**:61–66, 1987.
 13. Antonipillai I, Horton R. Role of extra and intracellular calcium and calmodulin on renin release from rat kidney. *Endocrinology* **117**:601–606, 1985.
 14. Antonipillai I, Nadler J, Horton R. Angiotensin feedback inhibition of renin is expressed via the lipoxygenase pathway. *Endocrinology* **122**:1277–1281, 1988.
 15. Naftilan AJ, Oparil S. The role of calcium in the control of renin release. *Hypertension* **4**:670–675, 1982.
 16. Schror K, Darius H, Matzky R, Ohlendorf R. The antiplatelet and cardiovascular actions of a new carbacyclin derivative (ZK 36374) equipotent to PGI₂ in vitro. *Naunyn Schmiedeberg Arch Pharmacol* **316**:252–255, 1981.
 17. Hadjiagapiou C, Spector AA. 12-Hydroxyeicosatetraenoic acid reduces prostacyclin production by endothelial cells. *Prostaglandins* **31**:1136–1144, 1986.
 18. Mayer B, Moser R, Gleispach H, Kukoretz WR. Possible inhibitory function of endogenous 15-hydroperoxyeicosatetraenoic acid on prostacyclin formation in bovine aortic endothelial cells. *Biochim Biophys Acta* **875**:641–653, 1986.
 19. Yamajasetty BN, Stuart MJ. 15-Hydroxy-5,8,11,13-eicosatetraenoic acid inhibits human vascular cyclooxygenase, potential role in diabetic vascular disease. *J Clin Invest* **77**:202–211, 1986.
 20. Gordon JA, Spector AA. Effects of 12-HETE on renal tubular epithelial cells. *Am J Physiol* **253**:C277–C285, 1987.
 21. Churchill PC. Second messenger in renin secretion. *Am J Physiol* **249**:F175–F180, 1985.
 22. Campbell WB, Graham RM, Jackson EK. Role of renal prostaglandins in sympathetically mediated renin release in the rat. *J Clin Invest* **64**:448–456, 1979.
 23. Nakao J, Ito H, Ooyama T, Chang Chang W, Murota SI. Calcium dependency of aortic smooth muscle cell migration induced by 12-L-hydroxy-5,8,10,14 eicosatetraenoic acid. *Atherosclerosis* **46**:309–316, 1983.
 24. Richter S, Frei B, Cerutti PA. Mobilization of mitochondrial Ca²⁺ by hydroperoxyeicosatetraenoic acid. *Biochem Biophys Res Commun* **143**:609–616, 1987.
 25. Stenson WF, Parker CW. Metabolism of arachidonic acid in ionophore stimulated neutrophils. *J Clin Invest* **64**:1457–1465, 1979.
 26. Antonipillai I, Horton R, Natarajan R, Nadler J. A 12-lipoxygenase products of arachidonate metabolism is involved in angiotensin action of renin release. *Endocrinology* **125**:2028–2034, 1989.
 27. Chansel D, Bea ML, Ardaillou R. Modulation of renin synthesis by lipoxygenase products in cultured human mesangial cells. *Mol Cell Endocrinol* **62**:263–271, 1989.