

# Characterization of Ca<sup>2+</sup> Mobilization in the Human Submandibular Duct Cell Line A253 (44162C)

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**Abstract.** The regulation of Ca<sup>2+</sup> mobilization in the human submandibular duct cell line A253 was investigated by monitoring cytosolic free Ca<sup>2+</sup> concentrations ([Ca<sup>2+</sup>]<sub>i</sub>) using the Ca<sup>2+</sup>-sensitive fluorescent indicator fura-2 and by measuring inositol 1,4,5-triphosphate (IP<sub>3</sub>) formation. An increase in [Ca<sup>2+</sup>]<sub>i</sub> was elicited by ATP, isoproterenol (IPR), or vasoactive intestinal polypeptide (VIP), but not by acetylcholine, norepinephrine, or substance P, suggesting that Ca<sup>2+</sup> mobilization is regulated by P<sub>2</sub>-purinergic, β<sub>2</sub>-adrenergic, and VIP receptors. 1,4,5-IP<sub>3</sub> formation was significantly increased by ATP but not by the other agonists. Exposure of the cells to a membrane permeable cAMP analog, dibutyryl-cAMP, or to the adenylate cyclase activator forskolin induced a smaller increase in [Ca<sup>2+</sup>]<sub>i</sub>, indicating that the IPR-induced Ca<sup>2+</sup> release is not mediated by cyclic AMP. Inhibition of the endoplasmic Ca<sup>2+</sup>-ATPase with thapsigargin (TG) in Ca<sup>2+</sup>-free medium induced a 207% increase in [Ca<sup>2+</sup>]<sub>i</sub>, and a subsequent exposure to ATP caused a further increase in [Ca<sup>2+</sup>]<sub>i</sub> of 104%. Similarly, TG exposure after ATP induced a further Ca<sup>2+</sup> release, suggesting that the TG-sensitive store and the IP<sub>3</sub>-sensitive store do not overlap. Similar results were observed by sequential exposure to TG and IPR or to ATP and IPR. Ca<sup>2+</sup> influx across the plasma membrane was enhanced after ATP or TG, but not after IPR. Our findings show a unique pattern of Ca<sup>2+</sup> mobilization in the A253 cell line: (i) Ca<sup>2+</sup> mobilization is regulated by P<sub>2</sub>-purinergic, β<sub>2</sub>-adrenergic, and VIP receptors; (ii) Ca<sup>2+</sup> release is mediated by 1,4,5-IP<sub>3</sub> and probably by an unknown mediator; (iii) TG, P<sub>2</sub>, and β<sub>2</sub>-agonists discharge separate Ca<sup>2+</sup> stores; and (iv) ATP and TG, but not IPR, regulate Ca<sup>2+</sup> influx.

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**I**on transport in salivary ducts is regulated by the autonomic nervous system (1–4). Studies using the microperfusion technique have indicated that several neurotransmitters are involved in the regulation of ion transport in the duct system (3, 4). However, the intracellular signaling systems associated with electrolyte transport in salivary duct cells have not been clearly elucidated. Earlier studies indicate that NaCl reabsorption may be regulated by cyclic AMP (cAMP). Thus, activation of β-adrenergic receptors

stimulates Na<sup>+</sup> reabsorption in isolated salivary ducts (5, 6), and this action is mediated by cAMP (6). In cultured salivary duct cells, β-adrenergic stimulation elicits an increase in cytosolic cAMP levels (7–9), and cAMP regulates Cl<sup>-</sup> transport (7). It has also been demonstrated that Na<sup>+</sup> reabsorption in rat and rabbit submandibular ducts is inhibited by activation of muscarinic (10–12) or α<sub>1</sub>-adrenergic receptors (13, 14). Since Ca<sup>2+</sup> mobilization is induced by muscarinic or α<sub>1</sub>-adrenergic stimulation in submandibular duct cells from the rat (15), mouse (16), and rabbit (6), it is likely that Ca<sup>2+</sup> may be an intracellular messenger for the observed inhibition of NaCl reabsorption.

The submandibular duct cell line A253, which originated from a human squamous cell carcinoma (17), has been used to study the mechanisms of saliva modification by duct cells (18), to examine the biochemical and biological characteristics of chemotherapeutic agents (19–21), and to test the regulatory mechanisms of cancer cell growth and differentiation (22). However, the signal transduction systems of A253 cells have not been fully characterized, but it was

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reported that this cell line possesses  $\beta_2$ -adrenergic receptors and lacks  $\alpha$ -adrenergic and muscarinic-cholinergic receptors (8). Given the messenger role of  $\text{Ca}^{2+}$  in the modulation of salivary duct cell function and the somewhat unique receptor profile in A253 cells, the elucidation of how  $\text{Ca}^{2+}$  mobilization may be regulated in these cells can provide some clues about their signaling mechanisms. In this study, therefore, we investigated the regulation of  $\text{Ca}^{2+}$  mobilization in A253 cells by both agonists which increase  $\text{IP}_3$  or cAMP formation. The results suggest that A253 cells have  $\text{P}_2$ -purinergic,  $\beta_2$ -adrenergic, and VIP receptors, and show  $\text{IP}_3$ - and an unknown mediator-sensitive  $\text{Ca}^{2+}$  release from separate stores.

## Materials and Methods

**Materials.** Acetylcholine (ACh), ATP, bovine serum albumin (BSA, type V),  $N^6,2'$ -*O*-dibutyladenosine 3',5'-cyclic monophosphate (db-cAMP), digitonin, ethylene glycol-*bis*( $\beta$ -aminoethyl ether)- $N,N,N',N'$ -tetraacetic acid (EGTA), forskolin, 3-isobutyl-1-methylxanthine (IBMX), 4-(2-hydroxyethyl)-1-piperazine ethanesulphonic acid (Hepes), hyaluronidase (type V), ionomycin, isoproterenol (IPR), norepinephrine, substance P (Sub P), thapsigargin (TG), and vasoactive intestinal polypeptide (VIP) were purchased from Sigma Chemical Co. (St. Louis, MO). Fura-2/acetoxymethyl ester (fura-2/AM) was purchased from Molecular Probes (Eugene, OR). All other chemicals used were of the highest grade available.

**Solutions.** Unless otherwise stated, all experiments used a modified Earle-Hanks' physiological salt solution (PSS) consisting of (in mM): 110 NaCl, 5.4 KCl, 1.2  $\text{CaCl}_2$ , 0.8  $\text{MgSO}_4$ , 0.4  $\text{KH}_2\text{PO}_4$ , 0.33  $\text{NaH}_2\text{PO}_4$ , 25  $\text{NaHCO}_3$ , 20 Hepes, and 10 glucose. pH was adjusted to 7.4 after gassing with 95%  $\text{O}_2$ /5%  $\text{CO}_2$  for at least 45 min. For the  $\text{Ca}^{2+}$ -free PSS,  $\text{CaCl}_2$  was omitted.

**Cell Culture.** The A253 cell line was obtained from the American Type Culture Collection (Rockville, MD). The cells were routinely grown on plastic tissue-culture T-75 flasks in McCoy's 5A medium (GIBCO, Grand Island, NY) containing 10% newborn bovine serum, 100  $\mu\text{g}/\text{ml}$  penicillin and 100 U/ml streptomycin sulfate. The cells were cultured at 37°C in an atmosphere of 5%  $\text{CO}_2$  in air. Medium was changed twice weekly. Subculture was conducted by discarding the medium, washing the cells with fresh serum-free medium, and exposing the cells to 0.25% trypsin and 1 mM EDTA for 5 min. Trypsinized cells were counted, centrifuged, resuspended in fresh medium and seeded to new flasks. For experiments, the confluent A253 cells were trypsinized as above and then rinsed twice with PSS. The cells were then resuspended in fresh PSS containing 1% newborn bovine serum and 2% trypsin inhibitors and incubated at 37°C for 2 hr before use.

**Determination of Cytosolic Free  $\text{Ca}^{2+}$  Concentration.** Cytosolic free  $\text{Ca}^{2+}$  concentrations ( $[\text{Ca}^{2+}]_i$ ) were measured using the  $\text{Ca}^{2+}$ -sensitive fluorescent indicator fura-2 as previously described (23, 24). Trypsinized A253

cells were loaded with fura-2 by incubation in 2  $\mu\text{M}$  fura-2/acetoxymethyl ester for 20 min at 37°C. After loading, the cells were rinsed twice and kept at 37°C. A 2-ml aliquot of fura-2-loaded cells ( $1.5 \times 10^6$  cells/ml) was centrifuged at 50g for 2 min, resuspended in fresh medium containing 0.01% BSA, and placed in a 4-ml cuvette.  $[\text{Ca}^{2+}]_i$  measurement was conducted using a PTI Deltascan fluorometer (PTI Inc., S. Brunswick, NJ). The excitation wavelengths used were 340 and 380 nm, and emission wavelength was 505 nm. Calibration of  $[\text{Ca}^{2+}]_i$  was performed for each measurement trace by addition of 1 mM  $\text{CaCl}_2$  and 50  $\mu\text{M}$  ionomycin to obtain the limiting ratio for the  $\text{Ca}^{2+}$  saturated form ( $R_{\text{max}}$ ) of fura-2. Then, 0.0005% digitonin and 10 mM EGTA were separately added to obtain the limiting ratio for the unbound form ( $R_{\text{min}}$ ) of fura-2. Fluorescence ratios of the 340/380 nm excitation and 505 nm emission were converted to  $[\text{Ca}^{2+}]_i$  according to Grynkiewicz *et al.* (25) using 224 nM as  $K_d$  of fura-2 for  $\text{Ca}^{2+}$  at 37°C.

$\text{Ca}^{2+}$  influx was measured in  $\text{Ca}^{2+}$ -free PSS. Cells were exposed to ATP, IPR, db-cAMP, thapsigargin, or vehicle for 5 min, and then 1 mM  $\text{Ca}^{2+}$  was then added. The linear portion of  $[\text{Ca}^{2+}]_i$  changes after addition of  $\text{Ca}^{2+}$  was used to calculate  $\text{Ca}^{2+}$  influx rate (nM/min).

**Determination of Inositol 1,4,5-Trisphosphate Production.** Inositol 1,4,5-trisphosphate ( $\text{IP}_3$ ) formation was measured as previously described (24, 26, 27) using a radioligand assay kit (NEN, Boston, MA). Cells were treated with the indicated agonists or other agents. The reaction was initiated by addition of the agents and lasted for 30 sec. The reaction was terminated by adding an equal volume of 1 M ice-cold trichloroacetic acid (TCA). Samples were left on ice for 15 min, then centrifuged at 6000 rpm in a microfuge at 4°C for 5 min. The supernatants were mixed by vortexing with an equal volume of diethyl ether and the ether phase discarded. This step was repeated three times. Samples were then neutralized to pH 7.5 with 0.5 M  $\text{NaHCO}_3$  prior to assaying  $\text{IP}_3$  content. The level of  $\text{IP}_3$  was measured according to the procedure recommended by NEN.

**Data Presentation and Statistics.** Results are presented as the mean  $\pm$  SEM of separate determinations using different cell preparations. Comparisons were made using the unpaired Student's *t* test. *P* values <0.05 were considered significant.

## Results

**Effects of Agonists on  $[\text{Ca}^{2+}]_i$ .** Exposure of A253 cells to 200  $\mu\text{M}$  ATP, a  $\text{P}_2$ -purinergic agonist, in the presence of extracellular  $\text{Ca}^{2+}$ , induced a 479% net initial increase in  $[\text{Ca}^{2+}]_i$  (from  $98 \pm 11$  nM to  $567 \pm 64$  nM,  $n = 5$ ) followed by a 68% sustained elevation ( $165 \pm 16$  nM at 5 min) (Table I and Fig. 1A). ATP triggered a 171% initial  $[\text{Ca}^{2+}]_i$  increase in a  $\text{Ca}^{2+}$ -free PSS (from  $73 \pm 6$  nM to  $198 \pm 21$  nM,  $n = 10$ ) (Table I and Fig. 1A). This increase was not due to activation of  $\text{P}_1$ -purinergic receptors since the  $\text{P}_1$ -agonist adenosine (2 mM) did not induce a significant

**Table I.** The Receptor Activation–Induced Changes in  $[Ca^{2+}]_i$  in A253 Cells

$[Ca^{2+}]_o$	Agonist	<i>n</i>	$[Ca^{2+}]_i$ (nM)		
			Basal	Initial	Sustained
1.2 mM	ATP (0.2 mM)	5	98 ± 11	567 ± 64 <sup>a</sup>	165 ± 16 <sup>a</sup>
	IPR (10 μM)	6	84 ± 7	192 ± 22 <sup>a</sup>	88 ± 7
	VIP (100 nM)	5	68 ± 8	101 ± 11 <sup>b</sup>	73 ± 8
	ACh (10 μM)	5	101 ± 13	105 ± 14	105 ± 15
	NE (10 μM)	5	94 ± 11	112 ± 15	106 ± 15
	SP (100 nM)	5	107 ± 17	110 ± 16	112 ± 13
0 mM	ATP (0.2 mM)	10	73 ± 6	198 ± 21 <sup>a</sup>	88 ± 8
	IPR (10 μM)	9	78 ± 9	160 ± 13 <sup>a</sup>	93 ± 9
	VIP (100 nM)	5	94 ± 9	127 ± 14	122 ± 14
	ACh (10 μM)	6	83 ± 7	86 ± 6	78 ± 6
	NE (10 μM)	5	100 ± 18	106 ± 19	119 ± 25
	SP (100 nM)	5	86 ± 11	89 ± 12	81 ± 7

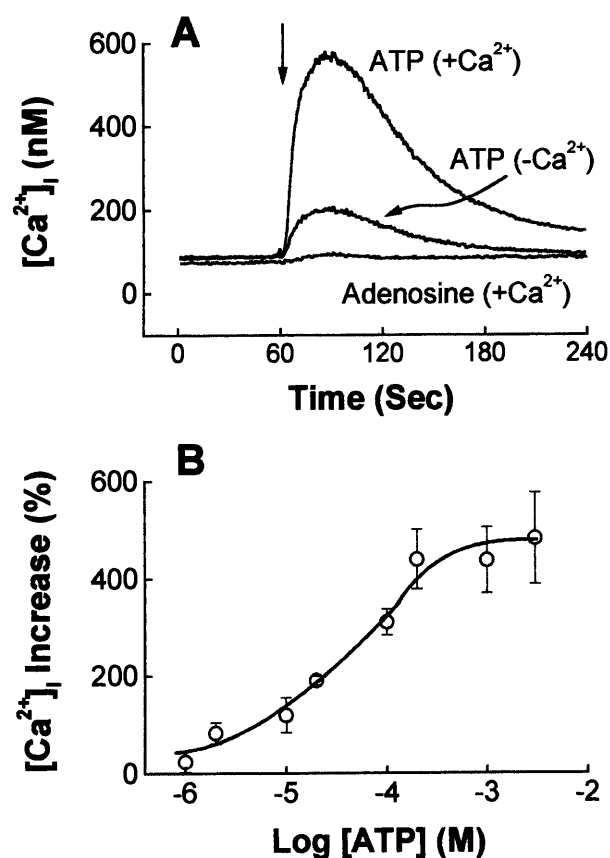
<sup>a,b</sup> Compared with the basal level, *P* < 0.05 and 0.01, respectively.

increase in  $[Ca^{2+}]_i$  (Fig. 1A). The ATP-induced  $[Ca^{2+}]_i$  increase was concentration-dependent (Fig. 1B) with a  $K_{1/2}$  of 42 μM ATP.

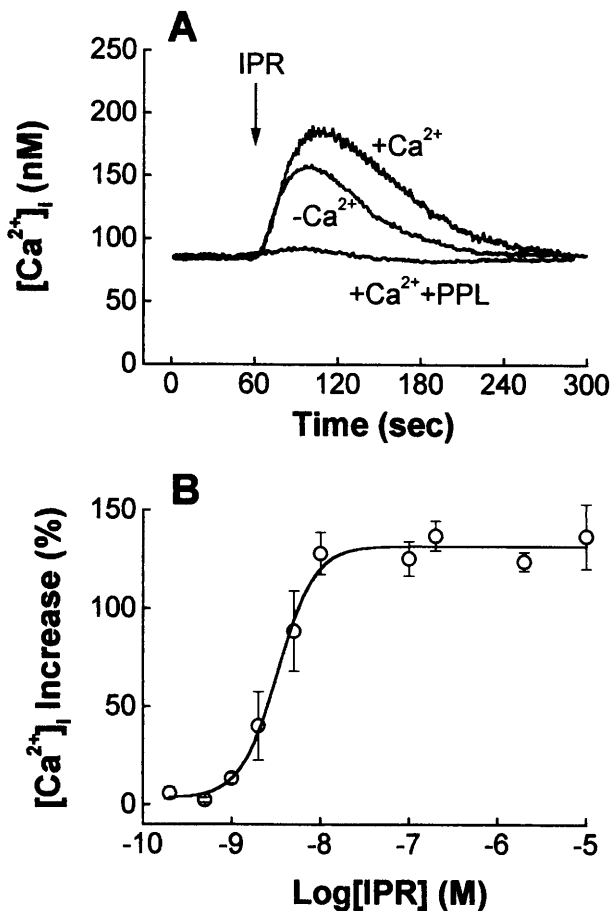
Exposure to the β-adrenergic agonist isoproterenol (IPR, 10 μM) in the presence of extracellular  $Ca^{2+}$  resulted in a 129% initial increase in  $[Ca^{2+}]_i$  (from 84 ± 7 nM to 192 ± 22 nM, *n* = 6) (Table I and Fig. 2A). However, there was only a minimal (<5%) sustained elevation in  $[Ca^{2+}]_i$  (Table I and Fig. 2A). In the absence of extracellular  $Ca^{2+}$ , IPR induced a 105% increase in  $[Ca^{2+}]_i$  (from 78 ± 9 nM to 160 ± 13 nM, *n* = 9) (Table I and Fig. 2A). The IPR-elicited  $[Ca^{2+}]_i$  response was completely abolished by the β-receptor antagonist propranolol (10 μM, Fig. 2A), suggesting that the response is mediated by β-receptors. The IPR-elicited  $Ca^{2+}$  response was concentration-dependent with a  $K_{1/2}$  of 3.3 nM IPR (Fig. 2B). Vasoactive intestinal polypeptide (VIP, 100 nM), another cyclic AMP-elevating neurotransmitter, elicited a 48% and 36% initial increase in  $[Ca^{2+}]_i$  in the presence and absence of extracellular  $Ca^{2+}$ , respectively (Table I).

Other agonists that have been reported to elicit  $[Ca^{2+}]_i$  increase in salivary cells, such as the muscarinic agonist acetylcholine (ACh, 10 μM), the α-adrenergic agonist norepinephrine (NE, 1 μM), or the peptide substance P (SP, 100 nM), did not induce a change in  $[Ca^{2+}]_i$  (Table I), suggesting that  $Ca^{2+}$  mobilization in A253 cells is not regulated by muscarinic, α-adrenergic, and substance P receptors.

**Second Messengers Mediating  $Ca^{2+}$  Mobilization.**  $IP_3$  has been well recognized to be a major messenger mediating  $Ca^{2+}$  release from intracellular stores in most cell types, including salivary cells (28–30). To examine the role of  $IP_3$  in the agonist-induced  $[Ca^{2+}]_i$  increase, the effect of various stimuli on  $IP_3$  formation was determined. As shown in Figure 3, A253 cells were stimulated with ATP, IPR, forskolin, or VIP. Only ATP significantly elevated cellular  $IP_3$  levels (504% ± 77% of control). These results suggest that  $Ca^{2+}$  mobilization elicited by ATP is mediated by  $IP_3$ .

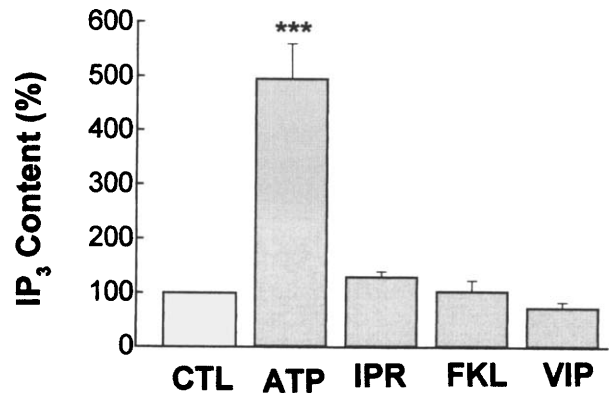


**Figure 1.**  $[Ca^{2+}]_i$  changes in response to ATP or adenosine. (A) Fura-2-loaded A253 cells were suspended in  $Ca^{2+}$ -containing physiological salt solution (+ $Ca^{2+}$ ) or a  $Ca^{2+}$ -free solution (– $Ca^{2+}$ ) and  $[Ca^{2+}]_i$  was measured using a dual-wavelength fluorometer at 37°C. At the time indicated by the arrow 0.2 mM ATP (ATP) or 2 mM adenosine (adenosine) was added. Traces are representative of separate experiments using different cell preparations (ATP [+ $Ca^{2+}$ ], *n* = 5; ATP [– $Ca^{2+}$ ], *n* = 10; adenosine [+ $Ca^{2+}$ ], *n* = 6). (B) Concentration dependence of ATP-elicited  $[Ca^{2+}]_i$  increase.  $[Ca^{2+}]_i$  was measured as described above in physiological salt solution. Values are the mean ± SEM of five separate experiments. The curve is produced by sigmoid curve (Boltzman) fit. The maximal  $[Ca^{2+}]_i$  increase is 483% and  $K_{1/2}$  is 42 μM ATP.



**Figure 2.** The isoproterenol (IPR)-induced  $[Ca^{2+}]_i$  changes. (A) Fura-2-loaded A253 cells were stimulated with isoproterenol (IPR, 10  $\mu M$ ) at the time indicated by the arrow in  $Ca^{2+}$ -containing physiological salt solution (+ $Ca^{2+}$ ), in a  $Ca^{2+}$ -free solution ( $-Ca^{2+}$ ), or in  $Ca^{2+}$ -containing and 10  $\mu M$  propranolol (+ $Ca^{2+}$  + PPL).  $[Ca^{2+}]_i$  was measured as described in Figure 1. Traces are representative of separate experiments using different cell preparations (+ $Ca^{2+}$ ,  $n = 6$ ;  $-Ca^{2+}$ ,  $n = 9$ ; + $Ca^{2+}$  + PPL,  $n = 6$ ). (B) Concentration-dependence of IPR-stimulated  $[Ca^{2+}]_i$  increase.  $[Ca^{2+}]_i$  was measured in physiological salt solution as described above. Values are mean  $\pm$  SEM of five separate experiments. The curve is produced by sigmoid curve (Boltzman) fit. The maximal  $[Ca^{2+}]_i$  increase is 132% and  $K_{1/2}$  is 3.3 nM IPR.

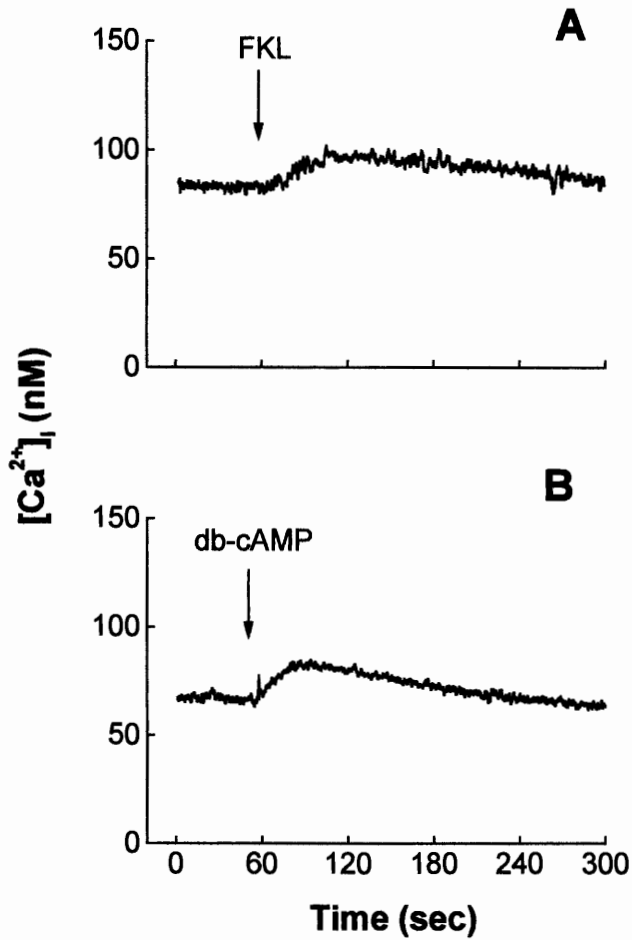
Although the  $\beta$ -agonist IPR induced a significant increase in  $[Ca^{2+}]_i$ , it did not increase  $IP_3$  formation. These results suggest that the IPR-elicited  $Ca^{2+}$  mobilization was mediated through a different signaling pathway. Since IPR is reported to induce a large (~250-fold) increase in cellular cyclic AMP level (8), the increase in  $[Ca^{2+}]_i$  is likely to be mediated by cyclic AMP. Exposure of A253 cells to forskolin (5  $\mu M$ ), an activator of adenylate cyclase, in  $Ca^{2+}$ -free medium, induced a 14% initial increase in  $[Ca^{2+}]_i$  (from  $83 \pm 10$  nM to  $95 \pm 9$  nM,  $n = 5$ ) (Fig. 4A). In the presence of the phosphodiesterase inhibitor 3-isobutyl-1-methylxanthine (IBMX, 0.5 mM), FKL (5  $\mu M$ ) induced a similar (14%) increase in  $[Ca^{2+}]_i$  ( $n = 5$ , not shown). A membrane-permeable analog of cAMP, dibutyryl cyclic AMP (db-cAMP) was applied to test the role of cAMP in  $Ca^{2+}$  release. As shown in Figure 4B, 0.2 mM db-cAMP caused a 14%



**Figure 3.**  $IP_3$  formation induced by agonists or forskolin. A253 cells ( $2 \times 10^6$  cells/ml) were stimulated with 0.2 mM ATP (ATP), 10  $\mu M$  isoproterenol (IPR), or 100 nM vasoactive intestinal peptide (VIP) for 30 sec, or with 5  $\mu M$  forskolin (FKL) or dimethyl sulfoxide as vehicle control (CTL) for 1 min. After stimulation for the time indicated above, the reaction was terminated by addition of trichloroacetic acid and  $IP_3$  content was measured as described in Materials and Methods. Values are the mean  $\pm$  SEM of four separate determinations. \*\*\*Compared with control,  $P < 0.005$ .

increase in  $[Ca^{2+}]_i$  in  $Ca^{2+}$ -free medium (from  $65 \pm 3$  nM to  $74 \pm 5$  nM,  $n = 7$ ). To corroborate this further, A253 cells were also exposed to 2 mM db-cAMP and 0.5 mM IBMX. This resulted in a 17% increase in  $[Ca^{2+}]_i$  ( $n = 5$ , not shown). These results suggest that the cyclic AMP-associated signaling system is not the mediator for the large  $Ca^{2+}$  release induced by IPR in this submandibular duct cell line.

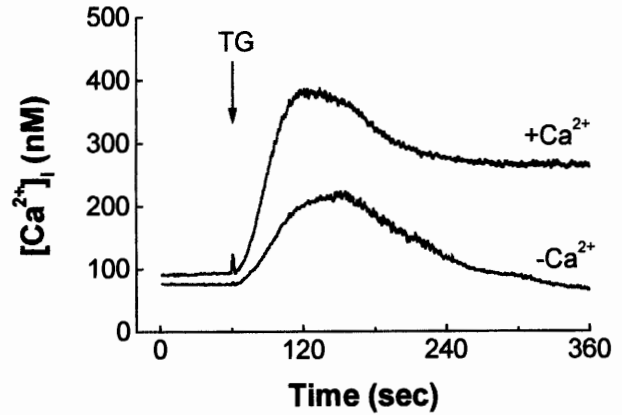
**$Ca^{2+}$  Release from Intracellular Stores.**  $Ca^{2+}$  sequestration into the  $IP_3$ -sensitive intracellular  $Ca^{2+}$  store is  $Ca^{2+}$ -ATPase-dependent, and the  $Ca^{2+}$  release induced by thapsigargin (TG), an inhibitor of the endoplasmic  $Ca^{2+}$ -ATPase, appears to be from the same store as the  $IP_3$ -induced  $Ca^{2+}$  release in most cell types (31–33), including salivary acinar cells (26, 27, 34). To examine whether this is the case in this duct cell line, A253 cells were exposed to 3  $\mu M$  TG, which induced a 352% increase in the peak  $[Ca^{2+}]_i$  (from  $85 \pm 7$  nM to  $384 \pm 36$  nM;  $n = 5$ ) (Fig. 5) in  $Ca^{2+}$ -containing PSS and a 207% increase in  $Ca^{2+}$ -free PSS (from  $76 \pm 7$  nM to  $219 \pm 14$  nM;  $n = 14$ ) (Fig. 5). The latter result suggests the presence of a TG-sensitive  $Ca^{2+}$  store in this cell line. To examine further the  $Ca^{2+}$  storage sites that may be sensitive to ATP, TG, or IPR, the cells were sequentially exposed to ATP and TG, or IPR and TG, or ATP and IPR in a  $Ca^{2+}$ -free solution. As shown in Figure 6A, stimulation with ATP (200  $\mu M$ ) caused a  $264.6\% \pm 30.5\%$  increase in  $[Ca^{2+}]_i$  ( $n = 6$ ). The subsequent exposure to TG (3  $\mu M$ ) induced a  $155.2\% \pm 17.8\%$  further increase in  $[Ca^{2+}]_i$  ( $n = 6$ ) (Fig. 6A). A similar result was observed with these agents in the reverse sequence (Fig. 6B). Exposure of cells to 3  $\mu M$  TG induced a  $242.5\% \pm 41.1\%$  increase in  $[Ca^{2+}]_i$  ( $n = 5$ ), and subsequent stimulation with ATP elicited a  $103.5\% \pm 25.4\%$  ( $n = 5$ ) further increase in  $[Ca^{2+}]_i$ , suggesting a further release of  $Ca^{2+}$  (Fig. 6B). These results suggest that the  $Ca^{2+}$  release induced by ATP and TG is from separate stores that overlap partially.



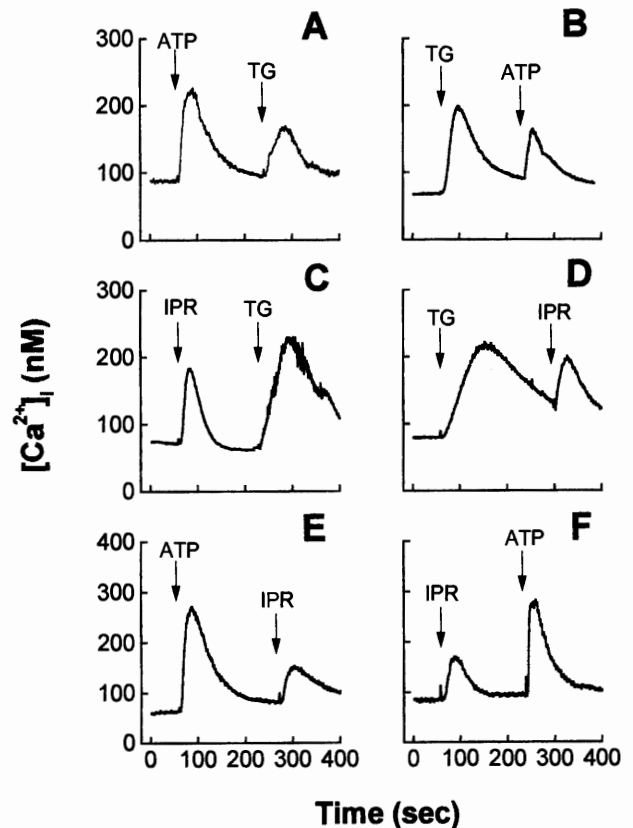
**Figure 4.**  $[Ca^{2+}]_i$  changes induced by forskolin or dibutyryl-cAMP. Fura-2-loaded A253 cells were suspended in  $Ca^{2+}$ -free physiological salt solution and  $[Ca^{2+}]_i$  was measured as described in Figure 1. At the time indicated by the arrow,  $5 \mu M$  forskolin (FKL) or  $0.2 \text{ mM}$  dibutyryl-cAMP (db-cAMP) was added. (A)  $[Ca^{2+}]_i$  increase in response to forskolin. (B)  $[Ca^{2+}]_i$  increase in response to dibutyryl-cAMP. Traces are representative of separate experiments (FKL,  $n = 5$ ; db-cAMP,  $n = 7$ ).

A similar  $Ca^{2+}$  release pattern was observed with IPR and TG. Stimulation first with IPR induced a  $105\% \pm 16\%$  increase in  $[Ca^{2+}]_i$  ( $n = 5$ ) (Fig. 6C), and a subsequent TG treatment caused a  $230\% \pm 13\%$  further increase in  $[Ca^{2+}]_i$  ( $n = 5$ ) (Fig. 6C). Exposure to TG first induced a  $211\% \pm 25\%$  increase in  $[Ca^{2+}]_i$  ( $n = 5$ ) (Fig. 6D). A subsequent stimulation with IPR ( $10 \mu M$ ) caused a  $50\% \pm 10\%$  further increase in  $[Ca^{2+}]_i$  ( $n = 5$ ) (Fig. 6D). These results suggest that the IPR- and TG-induced  $Ca^{2+}$  release is also from different stores.

Stimulation of A253 cells with ATP first triggered a  $260\% \pm 25\%$  increase in  $[Ca^{2+}]_i$ , and subsequent stimulation with IPR elicited a further  $111\% \pm 28\%$  increase ( $n = 5$ ) (Fig. 6E). Stimulation of the cells in the reversed sequence (i.e., IPR first) resulted in a  $93\% \pm 17\%$   $[Ca^{2+}]_i$  increase ( $n = 5$ ), and subsequent stimulation with ATP triggered a further  $328\% \pm 37\%$  increase ( $n = 5$ ) (Fig. 6F). These results suggest that the  $Ca^{2+}$  release by IPR and by ATP was also from separate stores.



**Figure 5.**  $[Ca^{2+}]_i$  changes induced by thapsigargin. Fura-2-loaded A253 cells were suspended in physiological salt solution ( $+Ca^{2+}$ ) or  $Ca^{2+}$ -free PSS ( $-Ca^{2+}$ ) and  $[Ca^{2+}]_i$  was measured as described in Figure 1. At the time indicated by the arrow,  $3 \mu M$  thapsigargin (TG) was added. Traces are representative of separate experiments ( $+Ca^{2+}$ ,  $n = 5$ ;  $-Ca^{2+}$ ,  $n = 14$ ).



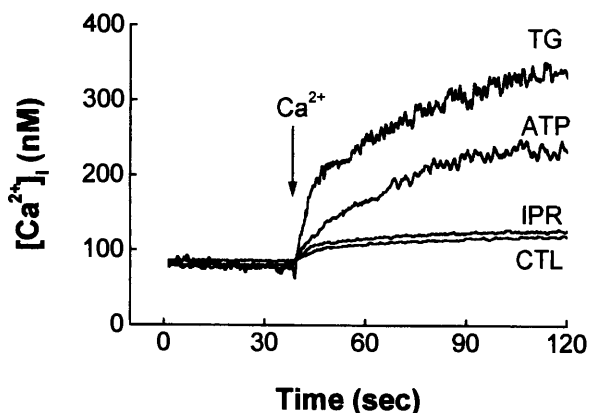
**Figure 6.**  $[Ca^{2+}]_i$  changes induced by sequential exposure to ATP, thapsigargin, or isoproterenol. Fura-2-loaded A253 cells were suspended in  $Ca^{2+}$ -free physiological salt solution and  $[Ca^{2+}]_i$  was measured as described in Figure 1. At the time indicated by arrows,  $0.2 \text{ mM}$  ATP (ATP),  $3 \mu M$  thapsigargin (TG), or  $10 \mu M$  isoproterenol (IPR) were added. (A and B)  $[Ca^{2+}]_i$  changes induced by sequential exposure to ATP and TG ( $n = 6$  [A];  $n = 5$  [B]). (C and D)  $[Ca^{2+}]_i$  changes induced by sequential treatment with IPR and TG ( $n = 5$  [C];  $n = 5$  [D]). (E and F)  $[Ca^{2+}]_i$  changes induced by sequential stimulation with ATP and IPR ( $n = 5$  [E];  $n = 5$  [F]).

**Ca<sup>2+</sup> Influx.** [Ca<sup>2+</sup>]<sub>i</sub> is regulated by both Ca<sup>2+</sup> release from intracellular stores, which produces the main part of initial [Ca<sup>2+</sup>]<sub>i</sub> increase, and Ca<sup>2+</sup> influx across the plasma membrane, which maintains the sustained elevation (35–38). Therefore, we tested the effect of ATP, TG, IPR, and db-cAMP on Ca<sup>2+</sup> influx. As shown in Figure 7, the initial rate of [Ca<sup>2+</sup>]<sub>i</sub> increase in control (unstimulated) cells, after addition of 1 mM Ca<sup>2+</sup> to cell suspensions that had been incubated in Ca<sup>2+</sup>-free medium for 5 min, was 126 ± 18 nM/min (*n* = 5). The rate of [Ca<sup>2+</sup>]<sub>i</sub> increase was significantly enhanced by ATP (287 ± 31 nM/min, *n* = 5; *P* < 0.01) and by TG (626 ± 82 nM/min, *n* = 5; *P* < 0.001), but not by IPR (97 ± 15 nM/min, *n* = 5) (Fig. 7) or by db-cAMP (164 ± 16 nM/min, *n* = 5; not shown).

## Discussion

The results of this study show that the human submandibular duct cell line A253 has a unique receptor profile and a complex Ca<sup>2+</sup>-mediated signal transduction system. Thus, Ca<sup>2+</sup> mobilization is activated by ATP and by isoproterenol, but not by muscarinic, α<sub>1</sub>-adrenergic, or substance P peptidergic agonists. This pattern of receptor-associated Ca<sup>2+</sup> mobilization is different from that reported in rat salivary duct cells (Table II), which show Ca<sup>2+</sup> mobilization in response to all three agonists (6, 15, 16, 39), and from that reported for other cultured salivary duct cell lines (Table II), which generally show responses to muscarinic and α-adrenergic stimuli (18). The significance of the unique receptor-associated Ca<sup>2+</sup> responses in A253 cells is unclear but could be associated with a complex signaling system for the regulation of monovalent ion fluxes.

The Ca<sup>2+</sup> mobilization induced by ATP in A253 cells is associated with P<sub>2</sub> purinoceptors (40), with IP<sub>3</sub> formation, with both Ca<sup>2+</sup> release from internal stores and with Ca<sup>2+</sup> influx across the plasma membrane. It is well established that extracellular ATP can activate P<sub>2</sub> purinoceptors in



**Figure 7.** Effects of ATP, thapsigargin, or IPR on Ca<sup>2+</sup> influx. Fura-2-loaded A253 cells were suspended in Ca<sup>2+</sup>-free physiological salt solution, and [Ca<sup>2+</sup>]<sub>i</sub> was monitored. The cells were exposed to 3 μM thapsigargin (TG), 0.2 mM ATP (ATP), 10 μM isoproterenol (IPR), or vehicle (CTL) for 5 min, then 1 mM Ca<sup>2+</sup> was added at the time indicated by the arrow. Traces are representative of five separate experiments for each treatment after the addition of 1 mM Ca<sup>2+</sup>.

**Table II.** [Ca<sup>2+</sup>]<sub>i</sub> Response to Agonists in Different Cell Types

Cell types	[Ca <sup>2+</sup> ] <sub>i</sub> response					
	M	α <sub>1</sub>	β	P <sub>2</sub>	SP	VIP
Isolated duct cells	+	+	+	+	+	?
HSY	+	+	-	?	-	?
HSG	+	+	-	+	-	?
RSMT	+	+	-	?	-	?
A253	-	-	+	+	-	+

*Note.* +, positive response; -, negative response; ?, no data available.

many cells (40), and that stimulation of P<sub>2u</sub> and P<sub>2y</sub> receptors leads to IP<sub>3</sub> formation and to release of Ca<sup>2+</sup> from intracellular stores (40–43). Increases in [Ca<sup>2+</sup>]<sub>i</sub> after exposure to ATP have been observed in rat submandibular acini (39, 44), in rat parotid cells (41, 45–47), and in the cultured submandibular duct cell line HSG-PA (42). P<sub>2</sub> purinoceptors thus operate in salivary cells of acinar and ductal origin through the IP<sub>3</sub>/Ca<sup>2+</sup> signal transduction pathway. Our results indicate that these receptors are also involved in IP<sub>3</sub>-mediated Ca<sup>2+</sup> mobilization in A253 cells.

An interesting observation in our study is that stimulation of β-adrenergic receptors also causes Ca<sup>2+</sup> mobilization in A253 cells. The question whether β-agonists induce Ca<sup>2+</sup> mobilization in salivary acinar cells is controversial (48–51), but effects of these agonists on IP<sub>3</sub> formation and Ca<sup>2+</sup> release are thought to result from activation of α-adrenergic receptors by the high doses of drug used in some of these studies (51). By contrast, this type of agonist seems to induce Ca<sup>2+</sup> release in salivary duct cells (39). Our results demonstrate that the Ca<sup>2+</sup> response induced by isoproterenol in A253 cells is not due to activation of α-receptors since these cells lack these receptors (8) (Table I). Neither isoproterenol nor the other cAMP-generating agents had a significant effect on IP<sub>3</sub> formation (Fig. 3), suggesting that other mediators are involved. Although a Ca<sup>2+</sup> release was induced by another cAMP-elevating neurotransmitter, VIP, the effect of forskolin and db-cAMP, which bypass the coupling of receptor and adenylate cyclase, was considerably smaller than that of isoproterenol. Furthermore, inhibition of cAMP breakdown by IBMX did not potentiate the Ca<sup>2+</sup> response to db-cAMP or forskolin. These results suggest that cAMP is not the second messenger mediating the Ca<sup>2+</sup> release induced by IPR, and that other intracellular signals may mediate the Ca<sup>2+</sup> mobilization by β-agonists. It has been reported that cyclic ADP-ribose (cADPR) mediates Ca<sup>2+</sup> release in many cell types including lacrimal acinar cells (52), which show a great similarity to salivary cells in functional responses. It is possible that the IPR-induced Ca<sup>2+</sup> release in A253 cells is mediated by cADPR. Further investigations are required to address this issue. Another possibility is that GTP-binding proteins (G proteins) play a critical role in mediating Ca<sup>2+</sup> release stimulated by IPR. G proteins have been shown to be involved in various signal

transduction systems including regulatory signals of  $\text{Ca}^{2+}$  mobilization. In addition to the role in the activation of upstream elements such as phospholipases and adenylate cyclase, G proteins also participate directly in regulating some effectors. For example, the  $\beta\gamma$  subunits of G protein can directly regulate  $\text{Ca}^{2+}$  channels in cardiac muscles and neurons (53, 54). Future studies will explore whether G proteins and cADPR play a role in the regulation of IPR-induced  $\text{Ca}^{2+}$  release in A253 cells.

Our results also suggest that A253 cells have multiple, complex  $\text{Ca}^{2+}$  stores. ATP induced  $\text{IP}_3$  formation and  $\text{Ca}^{2+}$  release, suggesting that the  $\text{Ca}^{2+}$  store sensitive to ATP is discharged by  $\text{IP}_3$ . In many cells, the  $\text{IP}_3$ -sensitive store can also be emptied by the  $\text{Ca}^{2+}$ -pump inhibitor thapsigargin (33). However, in A253 cells, the sequential exposure to ATP and to TG resulted in two distinct and independent  $\text{Ca}^{2+}$  peaks (Fig. 6), which suggests that the release induced by each drug is from a different pool. The same was true when A253 cells were sequentially exposed to TG and IPR or to ATP and IPR (Fig. 6). These results suggest that these cells have at least three separate  $\text{Ca}^{2+}$  pools: (i) an  $\text{IP}_3$ -sensitive pool responsive to ATP; (ii) a TG-sensitive pool; (iii) an IPR-sensitive pool discharged by unknown mediators and insensitive to  $\text{IP}_3$  or TG. The first two pools seem to be associated with  $\text{Ca}^{2+}$  entry probably of the capacitative entry type associated with emptying of the pool (37, 38) as both ATP and TG caused a significant  $\text{Ca}^{2+}$  influx. The separate, IPR-sensitive pool is not, however, associated with capacitative  $\text{Ca}^{2+}$  entry, as IPR failed to increase  $\text{Ca}^{2+}$  entry upon re-addition of  $\text{Ca}^{2+}$  (Fig. 7). The effects of this agonist are therefore on both a different  $\text{Ca}^{2+}$  pool and a different  $\text{Ca}^{2+}$  entry pathway than those responsive to ATP.

In summary, this study indicates that the human submandibular duct cell line A253 shows a unique model of  $\text{Ca}^{2+}$  regulation. (i)  $\text{Ca}^{2+}$  mobilization is primarily regulated by  $\text{P}_2$ -purinergic and  $\beta$ -adrenergic receptors, but not by muscarinic,  $\alpha_1$ - or substance P receptors; (ii) three separate  $\text{Ca}^{2+}$  stores appear to be responsible for the  $\text{Ca}^{2+}$  release induced by ATP, IPR, and TG; and (iii)  $\text{Ca}^{2+}$  influx is activated by ATP stimulation, by the emptying of the TG-sensitive pool, but not by IPR stimulation. The physiological significance of this  $\text{Ca}^{2+}$  regulation model, specifically the relevance to electrolyte and water transport, a major function of salivary duct cells, requires further investigation.

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