ABSTRACT

Characterisation of particulate and soluble mammalian alpha2-adrenoceptors

Y D Cheung

Particulate alpha₂-adrenoceptors of several mammalian tissues have been quantified and characterized using radioligand binding techniques and selective antagonist ligands, ³H-yohimbine and ³H-rauwolscine. The results showed that both ligands specifically labelled an identical population of alpha₂-receptors in all the tissues investigated. However, significant differences in drug affinities and relative drug potencies were observed between tissues within a given species or between species. The differences in pharmacological behaviour of the alpha₂-receptors, particularly with respect to the relative potencies of the subtype selective antagonists, provided evidence for a possible receptor heterogeneity.

The effects of guanine nucleotides, cations and temperature on agonist/antagonist interactions with alpha₂-receptors labelled by selective antagonist ligands have also been examined. The differential qualitative and quantitative influences of these modulators provided evidence for basic molecular differences in agonist and antagonist interactions with alpha₂-receptors. The influence of endogenous or retained exogenous agonist on ³H-yohimbine binding has further been evaluated in detail: The results revealed a 'pseudo non-competitive' agonist interference of ³H-antagonist binding reversible under the influence of guanine nucleotides and Na⁺, and suggested the need for considering possible endogenous agonist influence when interpreting ³H-antagonist binding data under certain assay conditions.

Alpha₂-receptors of the human platelet, rat and rabbit kidneys have been successfully solubilized using the glycoside detergent digitonin, and assayed with a polyethylene glycol precipitation-filtration method. The solubilized alpha₂-receptors labelled by ³H-rauwolscine generally exhibited reduced drug affinities but retained the pharmacological properties of the respective particulate receptors. The results discounted differences in membrane constraint/environment as a likely cause for pharmacological differences between alpha₂-receptors and provided further evidence for the possible heterogeneity of alpha₂-receptors.

CHARACTERISATION OF PARTICULATE AND SOLUBLE MAMMALIAN ALPHA₂-ADRENOCEPTORS

Thesis submitted to the University of Leicester, England, for the degree of Doctor of Philosophy in the Faculty of Medicine

by

YUEN-DON CHEUNG

1984

.

UMI Number: U350694

All rights reserved

INFORMATION TO ALL USERS

The quality of this reproduction is dependent upon the quality of the copy submitted.

In the unlikely event that the author did not send a complete manuscript and there are missing pages, these will be noted. Also, if material had to be removed, a note will indicate the deletion.



UMI U350694 Published by ProQuest LLC 2015. Copyright in the Dissertation held by the Author. Microform Edition © ProQuest LLC. All rights reserved. This work is protected against unauthorized copying under Title 17, United States Code.



ProQuest LLC 789 East Eisenhower Parkway P.O. Box 1346 Ann Arbor, MI 48106-1346

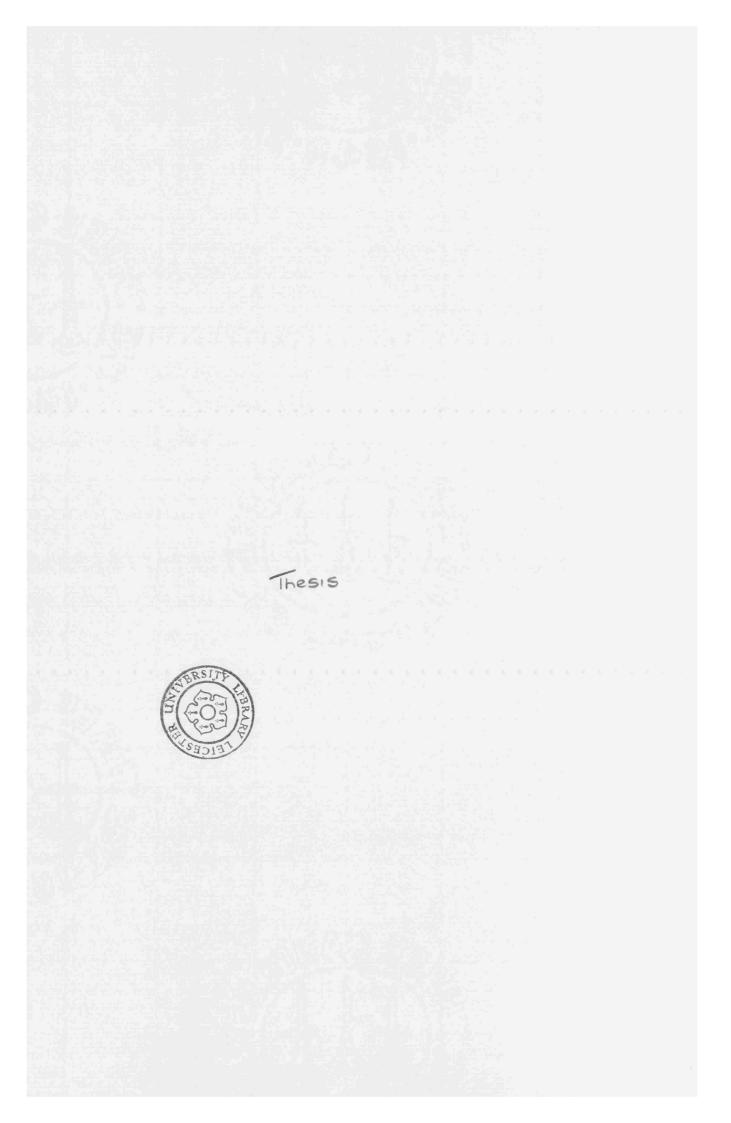


TABLE OF CONTENTS

Acknowledgements

i i

Chapter I	General Introduction	1
I.1	Receptors and drug actions	2
I.2	Catecholamines and adrenergic actions	3
I.3	Classification of adrenoceptors	6
3.1	Divisions of adrenoceptors	6
3.2	Sub divisions of alpha and beta adrenoceptors	8
3.2.1.	Beta-adrenoceptor sub-types	8
3.2.2.	Alpha-adrenoceptor sub-types	· 9
I.4.	Approaches to characterising alpha ₂ -adrenoceptors	13
Chapter II	Molecular Pharmacology of alpha ₂ -adrenoceptors	18
II.1	Radioligand binding studies of alpha-adrenoceptors: the general background	19
II.2.	Coupling mechanisms of alpha ₂ -adrenoceptors to effector systems	27
II.3	Study objectives	33
Chapte r III	Methods	34
III . 1	Tissue and membrane preparation	35
1.1	Preparation of platelet whole cells	35
1.2	Preparation of platelet membranes	35
1.3	Preparation of rat cerebral cortical membranes	36
1.4	Preparation of rabbit cerebral cortical membranes	37
1.5	Preparation of rat/rabbit kidney membranes	37
1.6	Preparation of human cerebral cortical membranes	
III.2	Radioligand binding assays	38
2.1	General assay conditions and procedures	38
2.1.1.	Special considerations	38
	a) assay buffer	38
	b) assay pH	39
	c) seperation of free and bound radioligand	39
	d) choice of membrane filters	39
	e) washing of filters	40
2.1.2.	Determination of specific binding	40
2.2	Specific experimental procedures	45
2.2.1.	Saturation experiments	45
2.2.2.	Competition experiments	45
2.2.3.	Kinetics experiments	46

.

V.3Discussion11Chapter VIAgonist/Antagonist interaction with alphap-adrenoceptors: effects of guanine nucleotides, mono- and divalent cations, and temperature12VI.1Introduction12VI.2Results132.1Agonist/antagonist interactions with alphap- adrenoceptors and effect of guanine nucleotides132.2Effect of temperature on agonist and antagonist interaction with alphap-adrenoceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alphap-adrenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alphap-adrenoceptors142.3.3Cation effects on agonist affinity142.3.4Cation effects on agonist affinity142.3.5Cation effects on agonist affinity142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alphap-adrenoceptors labelled by H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes173.1Effect of methods of cortical membranes173.1Effect of NaCl and guanine nucleotide on 3H- yohimbine binding capacities of 3H-yohimbine173.3	2.3.1	Equilibrium and kinetics studies with ³ H-rauwolscine	108
Chapter VI Agonist/Antagonist interaction with alpha2-adrenoceptors: effects of guanine nucleotides, mono- and divalent cations, and temperature 12 VI.1 Introduction 12 VI.2 Results 13 2.1 Agonist/Antagonist interactions with alpha2- adrenoceptors and effect of guanine nucleotides 13 2.2 Effect of temperature on agonist and antagonist interaction with alpha2-adrenoceptors 14 2.2.1 Effect of temperature on agonist and antagonist affinity at platelet alpha2-adrenoceptors 14 2.2.2 Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors 14 2.3.1 Cation effects on agonist affinity 14 2.3.2 Enhancement of guanine nucleotide modulation of agonist affinity by cations 14 2.3.2 Enhancement of exogenous and endogenous agonist with alpha2-adrenoceptors labelled by H-antagonist 17 VI.3 Discussion 16 Chapter VII Interactions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by H-antagonist 17 VII.1 Introduction 17 VII.2 Methods 17 2.1 Preparation of rat cerebral cortical membranes 17	2.3.2	Pharmacological characteristics	109
effects of guanine nucleotides, mono- and divalent cations, and temperature12VI.1Introduction12VI.2Results132.1Agonist/antagonist interactions with alpha adrenceptors and effect of guanine nucleotides132.2Effect of temperature on agonist and antagonist interaction with alpha_dardenoceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alpha_darenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alpha_denoceptors142.3Cation effects on agonist/antagonist interactions with alpha_receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha_adrenoceptors labelled by "H-antagonist17VII.1Introduction17VII.2Methods172.3Norepinephirne (Noradrenaline) assays173.1Effect of methods of cortical membrane preparation on binding capacities of "H-yohimbine173.3Norepinephirne (noradrenaline) assays173.4Effect of NaCl and guanine nucleotide on "H- yohimbine binding capacities on cortical membranes173.4Effect of NaCl and guanine nucleotide on nore-183.5Effect of NaCl and guanine nucleot	V.3	Discussion	112
VI.1Introduction12VI.2Results132.1Agonist/antagonist interactions with alpha adrenoceptors and effect of guanine nucleotides132.2Effect of temperature on agonist and antagonist interaction with alphaadrenoceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alphaadrenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alphaadrenoceptors142.3Cation effects on agonist/antagonist interactions with alphareceptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alphaadrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.3Norepinephrine (ortical and guanine nucleotide on ³ H- yohimbine binding capacities on cortical membranes173.4Effect of NaCl and guanine nucleotide on nore-183.5Effect of NaCl and guanine nucleotide on nore-18	Chapter VI	effects of guanine nucleotides, mono- and divalent	
VI.2Results132.1Agonist/antagonist interactions with alpha2- adrenoceptors and effect of guanine nucleotides132.2Effect of temperature on agonist and antagonist interaction with alpha2-adrenoceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alpha2-adrenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors142.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCI and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes173.4Effect of NaCI and guanine nucleotide on nore-183.5Effect of NaCI and guanine nucleotide on nore-18		· · · ·	127
2.1 Agonist/antagonist interactions with alpha2- adrenoceptors and effect of guanine nucleotides 13 2.2 Effect of temperature on agonist and antagonist interaction with alpha2-adrenoceptors 14 2.2.1 Effect of temperature on agonist and antagonist affinity at platelet alpha2-adrenoceptors 14 2.2.2 Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors 14 2.3 Cation effects on agonist/antagonist interactions with alpha2-receptors 14 2.3.1 Cation effects on agonist affinity 14 2.3.2 Enhancement of guanine nucleotide modulation of agonist affinity by cations 14 2.3.3 Cation effects on antagonist affinity 15 VI.3 Discussion 16 Chapter VII Interactions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist 17 VII.1 Introduction 17 VII.2 Methods 17 2.3 Norepinephirne (Noradrenaline) assays 17 VII.3 Results 17 2.1 Preparation of rat cerebral cortical membranes 17 2.2 Receptor binding assays 17			128
adrenoceptors and effect of guanine nucledides132.2Effect of temperature on agonist and antagonist interaction with alpha2-adrenoceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alpha2-adrenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors142.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.3Norepinephirne (Noradrenaline) assays173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCI and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCI and guanine nucleotide on nore-18			133
interaction with alpha2-adrenceptors142.2.1Effect of temperature on agonist and antagonist affinity at platelet alpha2-adrenceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenceptors142.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3Cation effects on agonist affinity142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays173.1Effect of methods of cortical membranes173.2Effect of NaCI and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.4Effect of NaCI and guanine nucleotide on nore-183.5Effect of NaCI and guanine nucleotide on nore-18	2.1	Agonist/antagonist interactions with alpha ₂ - adrenoceptors and effect of guanine nucleotides	133
affinity at platelet alpha2-adrenoceptors142.2.2Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors142.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist 	2.2		141
2.2.2Differences in thermodynamics of agonist and antagonist binding to alpha2-adrenoceptors142.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.1Preparation of rat cerebral cortical membranes172.3Norepinephirne (Noradrenaline) assays173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.3Norepinephrine contamination of cortical membranes173.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCI and guanine_nucleotide on nore-18	2.2.1		141
2.3Cation effects on agonist/antagonist interactions with alpha2-receptors142.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by 3H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays173.1Effect of methods of cortical membrane on binding capacities of 3H-yohimbine173.3Norepinephrine contamination of cortical membranes173.4Effect of exogenous norepinephrine on 3H-yohimbine binding capacities183.5Effect of NaCl and guanine_nucleotide on nore-18	2.2.2	Differences in thermodynamics of agonist and	142
2.3.1Cation effects on agonist affinity142.3.2Enhancement of guanine nucleotide modulation of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.1Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities173.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine_nucleotide on nore-18	2.3	Cation effects on agonist/antagonist interactions	146
of agonist affinity by cations142.3.3Cation effects on antagonist affinity15VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.3Norepinephrine contamination of cortical membranes173.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18	2.3.1	-	146
VI.3Discussion16Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine_nucleotide on nore-	2.3.2		149
Chapter VIIInteractions of exogenous and endogenous agonist with cerebral cortical alpha2-adrenoceptors labelled by H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18	2.3.3	Cation effects on antagonist affinity	158
with cerebral cortical alphaadrenoceptors labelled by ³ H-antagonist17VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18	VI.3	Discussion	164
VII.1Introduction17VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18	Chapter VII	with cerebral cortical alpha2-adrenoceptors labelled	171
VII.2Methods172.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays172.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18	VII.1		172
2.1Preparation of rat cerebral cortical membranes172.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays172.3Results17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-18			174
2.2Receptor binding assays172.3Norepinephirne (Noradrenaline) assays172.3Norepinephirne (Noradrenaline) assays17VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-	2.1		174
VII.3Results173.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-	2.2	Receptor binding assays	174
3.1Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine nucleotide on nore-	2.3	Norepinephirne (Noradrenaline) assays	174
on binding capacities of ³ H-yohimbine173.2Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine_nucleotide on nore-	VII.3	Results	176
yohimbine binding capacities in cortical membranes173.3Norepinephrine contamination of cortical membranes183.4Effect of exogenous norepinephrine on ³ H-yohimbine binding capacities183.5Effect of NaCl and guanine_nucleotide on nore-	3.1	Effect of methods of cortical membrane preparation on binding capacities of ³ H-yohimbine	176
 3.4 Effect of exogenous norepinephrine on ³H-yohimbine binding capacities 18 3.5 Effect of NaCl and guanine nucleotide on nore- 	3.2	Effect of NaCl and guanine nucleotide on ³ H- yohimbine binding capacities in cortical membranes	176
binding capacities 18 3.5 Effect of NaCl and guanine nucleotide on nore-	3.3	Norepinephrine contamination of cortical membranes	180
3.5 Effect of NaCl and guanine nucleotide on nore-	3.4	5	180
	3.5	pinephrine displacement of ³ H-yohimbine binding to	184
VIII.4 Discussion 18	VIII.4	Discussion	187

2.2.3.1.	Association kinetics experiments	46
2.2.3.2.	Dissociation kinetics experiments	46
III.3	Protein determination	46
III.4	Analysis of results	47
4.1	Saturation of experiment data	47
4.2	· Competition experiment data	48
4.3	Kinetics experiment data	48
III . 5	Statistical treatment of results	49
Chapter IV	Characterisation of alpha ₂ -adrenoceptors on intact human platelets and platelets and platelet membranes	50
IV.1	Introduction	51 ⁻
IV.2	Results	52
2.1	Characterisation of alpha ₂ -adrenoceptors in intact human platelets	52
2.1.1	³ H-yohimbine binding: equilibrium and kinetics studies	52
2.1.2	Pharmacological characteristics	57
2.2	Characterisation of alpha ₂ -adrenoceptors on human platelet membranes	61
2.2.1	³ H-yohimbine and ³ H-rauwolscine binding: equilibrium and kinetics studies	61
2.2.2	Pharmacological characteristics	61
IV.3	Discussion	71
Chapter V	Characterisation of alpha ₂ -adrenoceptors in the rat rabbit and human cerebral cortical membranes, and the rat and rabbit renal cortical membranes	75
V.1	Introduction	76
V.2	Results	78
2.1	Characterisation of alpha ₂ -adrenoceptors in the rat cerebral and renal cortical membranes	78
2.1.1	Equilibrium binding studies with ³ H-yohimbine and ³ H-rauwolscine	78
2,1,2	Kinetics studies	78
2.1.3	Pharmacological characteristics	88
2.2	Characterisation of alpha ₂ -adrenoceptors in the rabbit cerebral and renal membranes	93
2.2.1	Equilibrium binding studies with ³ H-yohimbine and ³ H-rauwolscine	93
2.2.2	Kinetics studies	94
2.2.3	Pharmacological characteristics	103
2.3	Characterisation of alpha ₂ -adrenoceptors in the human cerebral cortical membranes	108

Chapter VIII	Characterisation of soluble alpha2-adrenoceptors	193
VIII.1	Introduction	194
VIII.2	Methods	197
2.1	Solubilization of alpha2-adrenoceptors	197
2.1.1	General procedures	197
2.1.2	Special considerations	197
	a Choice of detergent	197
	b Optimal solubilizing conditions	200
	c Methods of solubilization	20 <i>5</i>
	d The 'soluble' nature of digitonin extracts	20 <i>5</i>
	e Stability of soluble alpha ₂ -receptors	206
2.2	Radioligand binding assays of soluble alpha2-receptors	206
2.2.1	General procedures	206
2.2.2	Special considerations	207
	a Assay methods	207
	b Optimal conditions for PEG precipitation assay	207
	c Washing of filters	208
	d Time intervals between PEG addition and filtration	208
	e Effectiveness of PEG precipitation - filtration as a means of separation	208
VIII.3	Results	212
3.1	Characterisation of soluble human platelet alpha ₂ -adrenoceptors	212
3.1.1	Equilibrium binding and kinetics studies with ³ H-rauwolscine	212
3.1.2	Pharmacological Characteristics	212
3.2	Characterisation of soluble alpha ₂ -&drenoceptors of the rat renal cortex	223
3.2.1	Equilibrium binding and kinetics studies with $^{3}\mathrm{H} ext{-}rauwolscine}$	223
3.2.2	Pharmacological characteristics	228
3.3	Characterisation of soluble alpha ₂ -adrenoceptors of the rabbit renal cortex	237
3.3.1	Equilibrium binding and kinetics studies with ³ H-rauwolscine	237
3.3.2	Pharmacological characteristics	237
3.4	Ionic and guanine nucleotide influences on agonist/ antagonist interaction with soluble alpha ₂ - adrenoceptors	246
3.5	Effect of agonist pre-occupancy of membrane alpha ₂ -receptor on guanine nucleotide modulation of agonist interaction with soluble alpha ₂ - receptors	249

VIII.4	Discussion	252
Chapter IX	Concluding Discussion	258
Appendices		274
A1	Drugs, chemicals and instruments	27 <i>5</i>
A2	Lowry reagents	277
A3	Scatchard and Hill equations	278
A4	Association and dissociation kinetics equations	280
A5	Cheng & Prusoff equation, and determination of slope factor (nH)	283
References		285

i I

Acknowledgements

I am deeply grateful to my parents and other members of my family for their great support and encouragement without which this work would not have been accomplished.

I would specially like to express my gratitude to Professors D. B. Barnett and S. R. Nahorski of Department of Pharmacology & Therapeutics, University of Leicester, for their excellent supervision, advice and encouragement during the course of this study.

My sincere thanks also to:

Dr. R. J. Summers, University of Melbourne for providing some data on the human cerebral alpha₂-adrenoceptor,

all members of the Department of Pharmacology & Therapeutics, University of Leicester, for their friendliness, co-operation and assistance,

the CVCP for the ORS Award, and

Linda Baxter and Karen Lythall for their typing service.

All experimental work described in this thesis was performed by myself except:

- 1) The catecholamine assays which were performed by Mr. J. Strupish.
- The saturation and drug competition experiments of ³H-Rauwolscine binding to human cerebral cortical membranes (Chapter V, Section V.2.3.); these were performed by Dr. R. J. Summers, University of Melbourne, during his stay in Leicester in Spring 1982.

The following publications relate to the contents of this thesis:

- Barnett, D.B., Cheung, Y. D. & Nahorski, S.R. (1982). Agonist interaction with alpha₂-adrenoceptor binding sites on human platelet lysates : effect of Mg⁺⁺ and temperature, Br. J. Pharmacol. 75, 151 P.
- 2) Cheung, Y.D., Barnett, D.B. & Nahorski, S.R. (1982). ³H-Rauwolscine and ³H-Yohimbine binding to rat cerebral and human platelet membranes: possible heterogeneity of alpha₂-adrenoceptors. Eur. J. Pharmacol. 84, 79 85.
- Barnett, D.B., Cheung, Y.D. & Nahorski, S.R. (1983). Pseudo noncompetitive interaction of endogenous and exogenous noradrenaline with cerebral alpha₂-adrenoceptors. Br. J. Pharmacol. 80, 542 P.
- Cheung. Y.D., Barnett, D.B. & Nahorski, S.R. (1984). Interaction of endogenous and exogenous norepinephrine with alpha₂-adrenoceptor binding sites in rat cerebral cortex. Biochem. Pharmacol. 33, 1293 1298.
- 5) Cheung, Y.D., Nahorski, S.R., Rhodes, K.F. & Waterfall, J.F. (1984). Studies of the alpha₂-adrenoceptor affinity and the alpha₂- to alpha₁adrenoceptor selectivity of some substituted benzoquinolizines using receptor-binding techniques. Biochem. Pharmacol. 33, 1566 - 1568.

Chapter I

GENERAL INTRODUCTION

I.1. Receptors and drug actions

The term 'drug receptor' refers to the molecular component of a cell with which a drug interacts. Such an interaction usually leads to changes in the cellular functions. However, until more recently, 'receptor' appeared to be a rather abstract term, merely used for the convenience of describing drug action when the actual molecular site of action was uncertain or unknown.

The concept of 'receptor' was actually first introduced by Langley. In 1905, he postulated that effectors cells have 'receptive substances' with which drug agents might react to produce responses. This view was extensively developed by Clark, and in 1933, he 'postulated that the actions of catecholamines and other drugs are mediated by interaction with specific cell surface structures called 'receptors' and that drug response is proportional to the number of receptors occupied by the drug. This 'occupation theory' still remains to be the keystone of most modern theories of drug action.

In brief, a drug receptor has at least two basic functions: the recognition of drug molecules, and the initiation of cellular changes in biochemical and physiological activities. The specific interaction of a drug with its receptor signifies the primary step of drug action. This interaction is generally thought to result in some conformational changes in the receptor molecule, initiating a 'signal' which serves to modulate the activity of an effector system. In many cases, a 'transducer' appears to be involved in conveying such a signal from the receptor unit to the effector unit. The final physiological response probably represents the resultant of a series of complex biochemical changes occurring within the biological system.

Drugs may be broadly classified into three categories, with respect to biological actions: agonists, antagonists, and partial agonists. An agonist is a drug which can bind to a specific receptor and also elicit a characteristic response (ie having both affinity and intrinsic activity). In contrast, an antagonist can occupy a receptor but fails to facilitate its coupling with an effector system, and therefore produces no response (ie having affinity, but no intrinsic activity) (Ariëns1954). A partial agonist, as its name implies, is only partially 'active' and has an intrinsic activity between that of a full agonist and an antagonist (Stephenson 1956).

I.2. Catecholamines and adrenergic actions

Catecholamines are a class of amino compounds bearing a catechol moiety. The endogenous catecholamines: adrenaline, noradrenaline and dopamine, are all structurally similar and synthesized from the precursor amino-acid tyrosine by an enzymatic pathway. The steps invovled in the biosynthesis of these catecholamines, originally proposed by Blaschko (1939), and subsequently confirmed, are shown in figure I.1.

Endogenous noradrenaline is synthesized in the brain, adrenal medulla sympathetic ganglia, and particularly sympathetic nerve endings, where it is stored in granules or granulated vesicles, and released mainly as neurotransmitter (Wurtman, 1966; Euler, 1972). On the other hand, adrenaline is largely stored in the chromaffin cells of the adrenal medulla, where it is synthesized from noradrenaline, and represents a major source of circulating catecholamines (Wurtman, 1966; Cooper et al. 1978; Stjärne, 1972).

The catecholamines regulate a large variety of essential physiological activities. Their effects on the smooth muscles can be broadly classified into either excitatory or inhibitory. Amongst the catecholamines, noradrenaline is the most potent excitatory agent, but with poor inhibitory properties. Isoprenaline has just the opposite characteristics just the opposite to those of noradrenaline. Adrenaline is in the middle of the two extremes in that is possesses equally potent excitatory and inhibitory actions (Koelle, 1975). Catecholamines are in general stimulants of the cardiovascular system. Heart rate

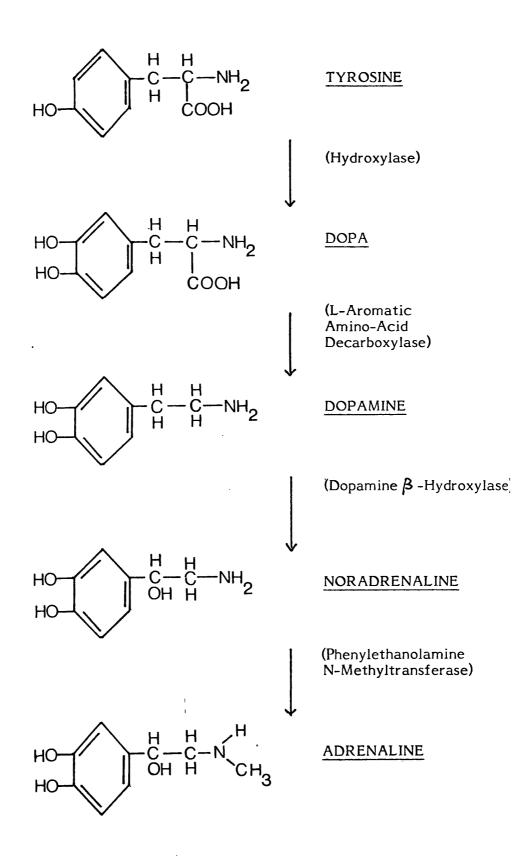


Fig. I.1. Enzymatic Synthesis of Catecholamines

and contractility of the cardiac muscle are both enhanced (Innes & Nickerson, 1975). Depending on the relative excitatory and inhibitory actions of the particular catecholamine, vasoconstriction normally results in the skin, mucosa and kidney, whereas vasodilatation often predominates in the skeletal muscle (Innes & Nickerson, 1975). Adrenaline and isoprenaline are also potent relaxants of the bronchial muscles, and as such, have been particularly useful in the treatment of bronchial asthma (Innes & Nickerson, 1975; Aviado & Micozzi, 1981).

Besides their effects on the smooth muscles, the catecholamines exert significant influences on metabolic activities. They can stimulate glycogenolysis and gluconeogenesis in the liver and muscle (Innes & Nickerson, 1975). The release of insulin and glucagon from the pancreatic islets can also be stimulated or inhibited (Porte Jr. & Robertson, 1973; Porter, 1981), but their actions usually lead to hyperglycemia. Furthermore, lipid metabolism can be regulated under the influence of catecholamines (Burns et al. 1974; Innes & Nickerson, 1975) generally resulting in lipolysis and hyperlipidemia.

There are now many other physiological responses of different kinds known to be mediated by catecholamines. These include the regulation of renin release (Pettinger et al., 1976), inhibition of dispersion of melanocyte granules (Berthelson & Pettinger, 1977), inhibition of firing of the noradrenergic and serotonergic neurons in the brain (Svenssen et al., 1975), facilitation of noradrenaline release from sympathetic neurons (Celuch et al., 1978), and induction of platelet aggregation (Hsu et al., 1979; Barthel & Markwardt, 1974), to name but a few. Nevertheless, regardless of the exact mechanisms of action, all these responses appear to be mediated through the interactions of catecholamines with specific adrenergic receptors.

I.3. Classification of adrenoceptors

I.3.1. Divisions of adrenoceptors

The studies of adrenengic receptors began with attempts to explore the functions of the sympathetic nervous system. At the beginning, little was known about the nature of sympathetic neurotransmission. Nevertheless it was known quite early that the physiological effects elicited by sympathetic stimulation are in many respects similar to those produced by the extracts of adrenal medulla (adrenaline), though not qualitatively identical. For example, adrenaline exhibits equally potent excitatory and inhibitory responses, whereas sympathetic stimulation produces responses that are relatively excitatory in nature. In 1904, Elliot was the first to suggest that adrenaline might be the chemical stimulant released from the sympathetic nerve each time an impulse arrived at the periphery. This was the original concept of a chemical transmitter being involved in sympathetic neurotransmission. In 1905, Langley further introduced the idea that excitatory and inhibitory 'receptive substances' might be present on effector cells, which mediated the responses of adrenaline. In 1906, Dale discovered that ergot alkaloids could selectively block the motor responses elicited by adrenaline and sympathetic stimulation, but the inhibitor responses were relatively or absolutely unaffected. This was the earliest classical example of pharmacological antagonism of adrenergic actions, and strongly supported the view that different 'receptive substances' were involved in the adrenergic responses. Shortly afterwards, Barger and Dale (1910) further discovered that the actions of sympathetic stimulation more resembled those of the primary catecholamines such as noradrenaline than those of the secondary catecholamines such as adrenaline. However, it was not until the 1940s that Von Euler eventually identified noradrenaline as the sympathetic neurotransmitter.

The concept of cell surface receptors being the transducers of adrenergic actions, however, was not unanimously favoured at the early stage. This was not only because it was impossible to demonstrate the existence of the postulated post synaptic receptors, but it was not even clear about the identity of the neurotransmitter. Thus, some workers were still more enthusiastic about establishing a direct relationship between adrenergic actions and the chemical structures of the transmitter substances, rather than the end-organ receptors themselves. For example, Cannon and Rosenblueth (1937) introduced the term sympathin to refer to the sympathetic neurotransmitter, They postulated that upon being released from the nerve, sympathin was converted to sympathin I and sympathin E. These substances were in turn responsible for producing the inhibitory and excitatory responses respectively.

In 1948, Ahlquist examined the potencies of five structurally related c a techolamines in eliciting physiological responses in various tissues. He found that the responses fell into two major categories on the basis of the order of potency of the agonists. One category of responses was mainly excitatory, and included such effects as vasoconstriction, stimulation of the nictitating membrane, dilator pupillae and uterus, but also inhibition of the gut. The order of agonist potency was L - adrenaline > L - noradrenaline > \propto - methylnoradrenaline > \propto - methyladrenaline > isoprenaline. The other group of responses was mainly inhibitory and included vasodilation, bronchodilation, relaxation of the uterus, but also stimulation of the heart. The order of agonist potency for these effects was isoprenaline > adrenaline \sim - methyladrenaline \sim - methylnoradrenaline > noradrenaline. Ahlquist thought that if the catecholamines structurally similar to adrenaline exhibited different potencies in producing the two types of responses, but maintaining the same rank orders, then the differences in activity must be attributed only to the differences in the chemical structure of the compounds. However, if the agonists differed not only in the relative potencies, but also in the rank orders between the responses or tissues, as was observed in this study,

then, such difference would strongly reflect difference in the receptors themselves. He therefore proposed the terms 'alpha' and 'beta' respectively to describe the 'excitatory' and 'inhibitory' adrenergic responses, and hence also the receptors mediating these responses. Although exceptions to this model of classification are obvious, namely the stimulation of the heart, and the inhibition of the gut, subsequent studies have confirmed that adrenergic responses generally fall into these two main categories. Althought's proposal has also been substantiated particularly as the result of the development of new adrenergic antagonists which can exhibit selective blocking actions on the alpha or beta responses.

1.3.2. Sub-divisions of alpha and beta adrenoceptors

I.3.2.1. Beta-adrenoceptor sub-types

Following Ahlquist's classification of alpha and beta adrenergic responses, vigorous search for more selective adrenergic agonists and antagonists were underway. The consequence is not only that his dual adrenoceptor model has been strengthened, but that evidence has also emerged to indicate that this model needs to be expanded. For example, the beta-antagonist butoxamine has been developed and shown to produce selective blockade of the isoprenaline-induced vasodilation but not cardiac stimulation (Levy, 1966). Salbutamol, a beta-agonist, can selectively stimulate bronchial relaxation, but with little activity on the heart (Brittain, 1971). In contrast, the beta-antagonist practolol has been described to exhibit selective blockade on the cardiac actions of catecholamines without producing an equivalent degree of antagonism at the bronchioles (Dunlop & Shanks, 1968). Indeed, with the use of highly selective agonists and antagonists, beta-adrenoceptors in various tissues can be pharmacologically differentiated (Levy & Wilkenfeld, 1969) into the 'beta' and 'beta' subtypes. These terms were first introduced by Lands and colleagues in 1967. In their work, these workers studied

the relative potencies of a series of drugs in eliciting beta-adrenergic responses in a number of tissues and whole organs. The potencies were compared with those of isoprenaline. Correlations in relative potencies between pairs of tissue responses were assessed. The results clearly indicated that cardiac stimulation is quite different from the other beta adrenergic responses (Lands et. al., 1967 a,b.), thus giving rise to the idea of subdividing the beta-adrenoceptors into the 'beta₁" and 'beta₂' categories. Beta₁-receptors are located mainly on the myocardium and the adipose tissue. In contrast, beta₂-receptors are found mainly on the smooth muscles.

I.3.2.2. Alpha-adrenoceptor sub-types

Until recently, the alpha and beta adrenoceptors were thought to occur only on the postsynaptic effector cells, mediating adrenergic actions. Few people would expect that adrenergic receptors might also be present on the sympathetic nerve-endings, playing an 'auto-regulatory' role on its own release. The first evidence of the possible existence of such receptors was provided some years ago from the work of Gillespie and Brown (1957) when it was found that the alpha blocking agent phenoxybenzamine could enhance nerve-stimulated overflow of noradrenaline in the perfused cat spleen. Of course, besides being an alpha-adrenoceptor blocker, phenoxybenzamine is capable of blocking extraneuronal and neuronal uptake of noradrenaline (Iversen, 1965; Iversen, 1969; Eisenfeld et al., 1967). Therefore, it was once thought that the observed enhancement of noradrenaline overflow might be due to blockade of the uptake and metabolism of noradrenaline. However, drugs such as cocaine and the tricyclic anti-depressants such as desipramine, which block neuronal uptake of noradrenaline without causing alpha-adrenoceptor blockade, were found to produce little or no enhancement of the stimulation-evoked release of the transmitter, even at concentrations which produce maximal inhibition

of uptake (Boullin et al., 1967; Langer & Enero, 1974). Other alpha-adrenergic blockers such as phentolamine, were also shown to increase the release of noradrenaline upon nerve stimulation without blocking extraneuronal metabolism (Langer, 1970). Moreover, the phenoxybenzamine inhibition of metabolism of 3 H-noradrenaline released by nerve stimulation does not appear to sufficiently account for the large increase of noradrenaline output observed in the presence of this antagonist (Langer, 1970; Langer & Vogt, 1971). In fact, enhancement of stimulation evoked release of noradrenaline by the alpha-blockers can occur at concentrations which do not inhibit neuronal or extraneuronal uptake of the transmitter (Enero et al., 1972; Cebeddu et al. 1974). Finally, the alpha-blocker-induced increase in stimulated noradrenaline output does not appear to be functionally related to the blockade of postsynaptic alpha-adrenoceptors, since such effect could be observed in preparations in which the end-organ responses are mediated by the beta-adrenoceptors (Starke et al., 1971; McCulloch et al., 1972).

Therefore, these findings have led to the suggestion that an alphaadrenoceptor may exist on the presynaptic membrane of the sympathetic nerve-terminals and regulate the release of noradrenaline by an 'autoregulatory' feed-back mechanism (Langer, 1974; Langer, 1977; Starke, 1977). This hypothesis has been supported by the observations that while alpha-adrenergic antagonists increase the release of noradrenaline during nerve stimulation (Doxey et al., 1977; Weitzell et al., 1979), alpha-adrenergic agonists inhibit such release (Kirpekar et al., 1973; Starke et al., 1975). Results from studies of this kind also show that the alpha-adrenergic agonists and antagonists exhibit significant differences in potency and affinity at the pre-and post synaptic alpha-adrenoceptors (Dubocovich & Langer, 1974; Starke et al., 1975; Berthelson & Pettinger, 1977; Doxey et al., 1977; Weitzell et al., 1979), hence suggesting that the two alpha-adrenoceptors are not structurally of the same type.

For instance, Starke et al. (1975) studied the potencies of a number of alpha-adrenergic agents in inhibiting the stimulation-evoked release of noradrenaline and in stimulating muscle contraction in the rabbit pulmonary artery. By calculating the relative potencies of the agonists in eliciting the pre-and postsynaptic responses, they found that these drugs could be classified into three main categories. One group had postsynaptic/ presynaptic potency ratios of about 30 (ie they are more potent for the postsynaptic response). Methoxamine and phenylephrine fell into this category. In a second group, the potency ratios were close to 1.0 (ie the agonists are equipotent for the pre-and post-synaptic responses). This group comprised adrenaline, noradrenal ine and naphazoline. The third group had post synaptic/pre synaptic ratios of less than 0.2 (ie the agonists are more potent for the pre-synaptic response). This group comprised oxymetazoline, d-methylnoradrenaline, tramazoline, as well as clonidine.

On the other hand, Doxey et al. (1977) and Weitzell et al. (1979) examined the relative potencies of the alpha-adrenergic antagonists in inhibiting the pre- and post synaptic adrenoceptor-mediated responses. The results demonstrated that yohimbine and its diastereoisomer rauwolscine were more selective for the presynaptic than the postsynaptic adrenoceptors. In contrast, corynanthine, phenoxybenzamine and prazosin were more selective postsynaptically.

In view of the anatomical and functional differences between the pre- and post synaptic alpha-adrenoceptors, it was suggested that they should be called 'alpha₂' and 'alpha₁' receptors respectively (Langer, 1974). However, it did not take long to realize that alpha-adrenoceptors with the alpha₂-like pharmacological properties are also present in a variety of postsynaptic and non-neuronal locations.

For example, in addition to the postsynaptic alpha₁-adrenoceptors, post synaptic alpha₂-like adrenoceptors also appear to be involved in mediating

contraction of the vascular smooth muscle. Evidence for the presence of postsynaptic alpha₂-adrenoceptors in the vascular smooth muscle was obtained in the cat, rat and dog (Drew & Whiting, 1979; Docherty & McGrath, 1980; Langer et al., 1980). The main findings from these studies were that, compared to the vasopressor effects elicited by the alpha₁-agonists such as phenylephrine, the responses to the agonists with strong alpha₂-activity (eg noradrenaline, clonidine, xylazine) were relatively resistant to prazosin, an antagonist with high alpha₁-selectivity (Cambridge et al., 1977). However, the latter responses were more potently antagonized by the 'alpha₂-antagonists such as yohimbine or rauwolscine.

Catacholamines are known to induce platelet aggregation or potentiate aggregation induced by other agents (Clayton & Gross, 1963; Mills & Roberts, 1967; Barthel & Markwardt, 1974; Grant & Scrutton, 1979; Lasch & Jakobs, 1979; Hsu et al., 1979). Such aggregatory action is also closely related to the inhibition of adenylate cyclase (Jakobs et al., 1976) and of the accumulation of cyclic-AMP (Marquis et al., 1970; Jakobs et al., 1976; Kafka et al, 1977). These effects appear to be mediated by alpha-adrenoceptors since only alpha but not beta agonists and antagonists are effective in modifying the aggregatory and adenylate cyclase activities (Mills & Roberts, 1967; Marquis et al., 1970; Barthel & Markwardt, 1974; Kafka et al., 1977). Furthermore, the pharmacological specificity of the alpha-adrenoceptors suggests that they are of the alpha₂-type. The ADP-induced platelet aggregation, for example, is much more potently enhanced by the alpha2agonists, such as clonidine and d-methylnoradrenaline, than by the alpha₁agonists, such as phenylephrine and methoxamine (Hsu et al., 1979). In addition, yohimbine and phentolamine are much more potent than prazosin in antagonizing the adrenaline-induced aggregation (Hsu et al., 1979; Lasch & Jakobs, 1979).

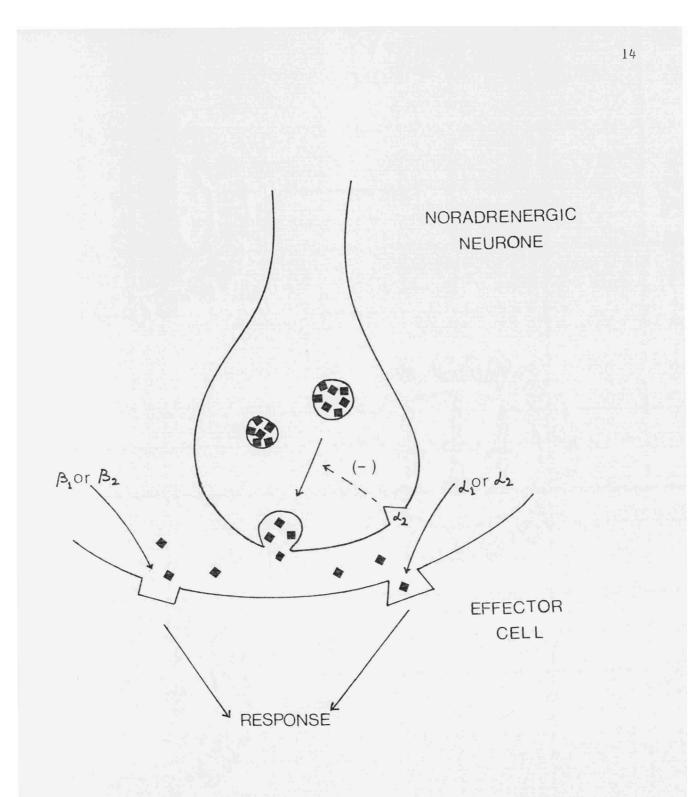
Besides the vascular smooth muscle and the blood platelets, postsynaptic alpha₂-adrenoceptors appear to occur in various other tissues, including, for example, the fat cells, frog skin melanocytes and the kidney, where they exert inhibitory effects on lipolysis, MSH-stimulated dispersion of melanocyte granules, and renin release respectively (Berthleson & Pettinger, 1977).

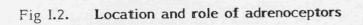
Clearly, alpha-adrenoceptors cannot be subclassified on the basis of physiological function or anatomical location. Therefore, it is now universally accepted that the terms 'alpha₁' and 'alpha₂' should still be used to differentiate the alpha-adrenoceptor sub-types, but that subclassification should be made with reference to pharmacological selectivity only (Starke & Langer, 1979). (Figure I.2. depicts the role and location of the alpha-adrenoceptors).

I.4. Approaches to characterising alpha2-adrenoceptors

The properties of a particular drug/hormone receptor can usually be described in two main aspects: the molecular interactions with drugs and the physiological responses elicited through the drug-receptor interactions. As with other receptor systems, both of these aspects have been the primary areas of study with the alpha₂-adrenoceptors.

The characterisation of functional responses has, as described earlier, proved a major contribution to the original classification of adrenoceptors into the alpha and beta categories (Ahlquist, 1948), and also the subdivision of these receptors into the beta₁, beta₂, alpha₁ and alpha₂ sub-types (Lands et al., 1967 a,b; Starke et al., 1975; Wikberg, 1976; Doxey et al., 1977; Berthleson & Pettinger, 1977). The measurements of various pharmacological responses, such as changes in the extent of transmitter release (Starke et al., 1975), vasopressor responses (Drew & Whiting, 1979), sedative effect (Timmermans et al., 1981), vascular smooth muscle contraction (Docherty & Starke, 1981), induction of platelet aggregation (Hsu et al., 1979) etc. are still very useful for the characterisation of alpha₂-adrenoceptors,





although the use of radioligand binding assays has now become an additional approach.

Generally, the primary objective in the classification or characterisation of adrenoceptors is to determine their pharmacological specificities. In functional studies, this relies on two basic indices: relative agonist potencies, and relative antagonist affinities. To determine these indices it is necessary to develop appropriate experimental methods with which the affinities of drugs can be estimated. However, in usual practice, only the dissociation constants (which are proportional to the reciprocals of affinities) can be more directly determined. Determination of antagonist dissociation constants appears more straightforward, compared to the agonists. By definition, the dissociation constant of an antagonist is that concentration which causes a right-hand shift of the log dose-response curve of the agonist by two-fold. Usually, the antagonist dissociation constant is expressed as pA2 value (negative logarithm of the dissociation constant). This can be conveniently determined from Schild plots (Schild, 1949) which relate the antagonist concentrations with the extent to which the agonist doseresponse curve is displaced. However, in order to determine and compare antagonist affinities reliably, it is most important that experimental conditions are appropriately controlled and optimized (Furchgott, 1972). Another important consideration is that the experiment time should be long enough so that agonist-antagonist interactions at the receptor can reach an equilibrium state.

Compared to the antagonists, agonist affinities are technically even more difficult to determine directly. In many cases, only the EC50 values of the agonists are obtained, that is, concentrations which produce 50% of the maximal functional responses. Hence, agonist potencies, which are proportional to the reciprocals of the EC50s, are determined. However, because different tissues may have different 'receptor reserve', and because the response is not necessarily linearly proportional to the percentage of receptors occupied (see Starke, 1981; Ruffolo, 1982), EC50 of an agonist can hardly ever be regarded as being equivalent to its dissociation constant. Relative potencies of agonists, therefore, are equivalent to their relative affinities <u>only</u> if the agonists are of equal efficacies (see Starke 1981; Morton & Halliday, 1981). Unfortunately, different agonists can have different intrinsic activities or efficacies within a tissue or between tissues (Stephenson 1956; Furchgott, 1966; Monton, & Halliday, 1981). Therefore when examining the rank order(s) or agonist potencies, the possible differences in efficacy between the drugs must be kept in mind.

There could be little doubt that the functional approach remains indispensable to studies of the adrenoceptors. However, the recent advances in radioligand binding assays have certainly provided an additional, simple approach to a better understanding of the molecular aspects of drug-receptor interactions, receptor regulation and receptor-effector coupling.

The main advantage of the radioligand binding approach, compared to the functional approach, is that, with a high-affinity and specific radiologand, the receptor under investigation can be identified and characterized even without the knowledge of its exact function and anatomical location. Direct equilibrium binding studies do not only provide information about the dissociation constant of the ligand, but also the density of the receptor. From the competition studies of radioligand binding to the receptor by various drug agents, the dissociation constants (Ki) of these drugs can be quite accurately estimated, assuming the drug-receptor interactions obey the law of mass action, and that the individual inhibitors are truly competitive (Williams& Lefkowitz, 1978; Cheng & Prusoff, 1973). The results of drug competition studies also generate a pharmacological profile which characterises the specificity of the receptor.

Until more recently, only radiolabelled agonist ligands, such as 3 H-clonidine and 3 H-adrenaline were available for direct labelling of the alpha₂-adrenoceptors.

However, there are some problems regarding the use of agonist ligands. Compared to the antagonists, agonists interact with alpha₂-adrenoceptors in heterogeneous affinity states, which can be modulated by various factors such as guanine nucleotides and mono-and divalent cations (Tsai & Lefkowitz, 1978; Glossmann & Presek, 1979; Tsai & Lefkowitz, 1979; also see Chapters II and VI). The ability of agonists to induce or stabilise high affinity states also implies that agonist ligands may only label a proportion of the guanine nucleotide-sensitive high affinity states of the receptor population (Hoffman et al., 1980b), thus providing quantitatively and qualititatively misleading information about the overall characteristics of the alpha-adrenoceptors. For these reasons, the use of antagonist radioligands appears to be more preferable and practical. Consequently, in the present studies, the characterisation of alpha₂-adrenoceptors was carried out using the recently available alpha₂-selective antagonist ligands, ³H-yohimbine and ³H-rauwolscine.

The development and progress of radioligand binding studies of the alpha-adrenoceptors, and in particular, the alpha₂-adrenoceptors, will be discussed in further details in Chapter II. Chapter II

MOLECULAR PHARMACOLOGY OF ALPHA2-ADRENOCEPTOR

I I

II.1. Radioligand binding studies of alpha-adrenoceptors: the general background

Until recently, classification of adrenoceptors relied exclusively on characterisation of physiological response to pharmacological agents. The success of this approach in turn depends on the development of appropriate experimental models which can identify and quantify specific receptormediated biological functions. Very often, it is also necessary to know, in advance, the anatomical locations or distributions of the receptors being investigated. Radioligand binding studies circumvent these problems, and provide a simple and direct method of characterizing and quantifying receptors.

Over the last decade or so, rapid progress has been made in the development of radioligand binding techniques for studying adrenoceptors. Naturally, the study of alpha-adrenoceptors has also received a great deal of impetus with the development and employment of this approach.

The alpha-adrenergic blocking properties of the ergot alkaloids were described by Dale as early as 1906. The incorporation of tritium into \propto -ergocryptine produces ³H-dihydroergocryptine (³H-DHE) which possesses high affinity and relatively higher specificity for alpha-adrenoceptors. In 1976, Lefkowitz and colleagues led the way to describe the characterization alpha-adrenoceptors in the uterus using ³H-DHE. Since then, this ligand has been used quite extensively to study alpha-adrenoceptors in a variety of tissues, including the brain, liver, and platelets (see Table II). Being a non-selective alpha-antagonist, (Wood et.al., 1979; Lefkowitz & Hoffman, $1980_{b})^{3}$ H-DHE labels both the alpha₁ and alpha₂ subtypes of adrenoceptors. With the use of curve-fitting analyses on displacement of 3 H-DHE binding by selective agents such as prazosin (alpha₁) and yohimbine (alpha₂), proportions of alpha-receptor subtypes in a given tissue can also be estimated (Hoffman et. al., 1979). For instance, with this approach human platelets have been found to contain exclusively alpha2-adrenoceptors. In contrast, rat liver appears to contain alpha-receptors predominantly of the alpha1-subtype.

And, in the rabbit uterus, alpha₁ and alpha₂-receptors appear to co-exist in the approximate ratio of two to three (Hoffman et. al., 1979). Before alpha₂ antagonist ligands were available, attempts were also made to investigate the functionally relevant modulation of agonist-alpha₂-adrenoceptor interactions through examining the changes in characteristics of agonist displacement of ³H-DHE binding (Tsai & Lefkowitz, 1978; Tsai & Lefkowitz, 1979; Hoffman et. al., 1980_a; Michel et. al., 1980; Giudicelli & Pecguery, 1981).

Despite its high affinity for the alpha-adrenoceptors, ³H-DHE is in fact a rather difficult ligand to work with. It is poorly water-soluble, and has the tendency to adsorb onto various materials. Furthermore, it is a ligand not totally selective for the alpha-adrenoceptors. At higher concentrations, it can also label dopaminergic and serotonergic receptors (Caron et. al., 1978; Davis et. al., 1977). For these reasons, the applicability of ³H-DHE for studying alpha-adrenoceptors, and particularly and alpha₁ or alpha₂-receptor subtype, is still rather limited.

While Lefkowitz and colleagues began using ³H-DHE to study alphaadrenoceptors in peripheral tissues, Snyder and co-workers also attempted to label alpha-adrenoceptors in the brain. Among the ligands used were the tritium-labelled partial agonist clonidine which has presynaptic alpha selectivity (Medgett et. al., 1978), and the antagonist WB4101, which appears to show in-vitro selectivity for the postsynaptic alpha receptors (Dubocovich, 1979; Langer et. al., 1980). However, in earlier studies, pre-treatment with 6-hydroxydopamine (which chemically destroys adrenergic neurons) did not produce any loss of the ³H-clonidine and ³H-WB4101 sites in the brain, suggesting that these sites might all be of a postsynaptic origin. Furthermore, agonists appeared to exhibit higher affinities for the ³H-clonidine sites than the antagonists. Conversely, antagonists were more potent than the agonists at the ³H-WB4101 sites. These results therefore led to the hypothesis that the two ligands both labelled the same central postsynaptic alpha-adrenoceptor, existing in two distinct, non-interconvertible agonist and antagonist conformational states which show preference for agonist and antagonist agents respectively. However, in subsequent studies in which³H-clonidine and ³H-WB4101 were used to label alpha-adrenoceptors in peripheral tissues, affinities of subtype selective agents at either receptor binding site were found to be in good correlation with those determined in the pre- or postsynaptic functional studies (U'Prichard & Snyder, 1979). Therefore, the indications are that ³H-clonidine and ³H-WB4101 might in fact label central alpha₂ and alpha₁ receptors respectively.

At the start, these two ligands looked promising as practical tools for selective labelling of the alpha, and alpha, adrenoceptor subtypes. However, although WB4101 is relatively alpha,-selective in the brain, its selectivity is quite variable in the peripheral tissues. Indeed, the nondiscriminatory use of ${}^{3}\text{H-WB4101}$ for labelling alpha1-adrenoceptors has been cautioned by Hoffman & Lefkowitz (1980). Fortunately, prazosin, an antagonist with higher alpha1-selectivity, soon became available as a tritiated ligand (Greengrass & Bremner, 1979). Since then, ³H-prazosin has proved its usefulness as the ligand of choice for studying alpha1-adrenoceptors in various tissues. In binding studies of $alpha_2$ -adrenoceptors, 3 H-clonidine has still remained to be one of the most widely used ligands. Other agonist ligands such as 3 H-adrenaline or 3 H-noradrenaline have also been used (see Table II). However, as mentioned before, there are disadvantages associated with the use of agonist ligands in general. Compared with the antagonist ligands, agonist binding to the alpha2-receptors can be significantly influenced by various factors, including the ions (Tsai & Lefkowitz, 1978; Glossmann & Presek, 1979; Rouot et. al., 1980; U'Prichard & Snyder, 1980), guanine nucleotides (Tsai & Lefkowitz, 1979; Rouot et. al., 1980; U'prichard & Snyder, 1980; Michel et. al., 1980), and even temperature (Barnett et. al., 1982). In addition, agonists, though not antagonists, can

interact with alpha₂-receptors to form the guanine nucleotide-sensitive high-affinity states (Michel et. al., 1980; also see next Section and Chapter VI). Therefore, at lower concentrations, radiolabelled agonist ligands could preferentially label only the high-affinity sites of the alpha₂-receptors (Hoffman et. al., 1980_b; Lefkowitz & Hoffman, 1980_b), thereby providing qualitatively and quantitatively misleading information which does not truly describe the overall characteristics of the alpha₂-receptor population. This is why the antagonists appear to be more suitable ligands than the agonists as the alpha₂-adrenoceptor probes.

Actually, besides ³H-DHE, one other non-selective alpha antagonist, phentolamine, has also been tritium labelled, and used to study alpha₂-adrenoceptors in tissues such as platelets and retina (Steer et. al., 1979; Bittiger et. al., 1980). However, despite of its relatively high affinity, this ligand has never been widely utilized, probably because subtype selective ligands, such as ³H-clonidine and ³H-prazosin have already been available.

The most suitable ligands for selective labelling of alpha₂-adrenoceptors would undoubtedly be the alpha₂-selective antagonists. The first ligand of this kind is ³H-yohimbine which became available toward late 1970s. Since its first applications for studying alpha₂-adrenoceptors on human platelets and rat brain (Motulsky et. al., 1980; Yamada et. al., 1980) this ligand has now become the ligand of choice for probing alpha₂-adrenoceptors in the various tissues. Shortly after ³H-yohimbine was introduced, its alpha₂-selective diastereoisomer rauwolscine has also become available as a tritiated ligand. In the present studies, both ligands have been used to characterize alpha₂-adrenoceptors. It will be demonstrated that both ligands label quantitatively and qualitatively identical sites of alpha₂-receptor characteristics. However, ³H-rauwolscine appears to be superior to ³H-yohimbine, as it possesses a higher alpha₂-selectivity, and also a consistently higher affinity for the alpha₂-adrenoceptor sites in most tissues. As will be discussed

Table II Lite	Literature in earlier radioligand binding studies of alpha-adrenoceptors	inding studies of alpha-adre	noceptors
Ligand	Tissue Source	Receptor type	References
<u>Agonists</u> ³ H-Adrenaline	Calf brain membranes	alpha-noradrenergic 'agonist state' alpha ₂	U'Prichard &Snyder, 1977; U'Prichard& Snyder, 1978; Greenberg et. al., 1978 U'Prichard & Snyder,1980
³ H-Noradrenaline	³ H-Noradrenaline Rat liver membranes Human platelet membranes Calf brain membranes	alpha ₂ alpha ₂ alpha-noradrenergic 'agonist state'	Hoffman et. al., 1980 _a Hoffman et. al., 1980 _a U'Prichard & Snyder, 1977
:	Rat liver membranes	alpha _l 'active' sites	Geynet et. al., (1980)
³ H-Clonidine	Calf brain membranes	alpha-noradrenergic 'agonist state' alpha ₂	Greenberg et. al., 1978; U'Prichard & Snyder, 1979; U'Prichard & Snyder,1980
	Rat brain membranes	alpha-noradrenergic 'agonist state' alpha_ alpha_	Greenberg et. al., 1976; Greenberg & Snyder,1978 Rouot et. al., 1980; Tanaka & Starke, 1980 Glossman et. al., 1980

CONTD.

Ligand	Tissue Source	Receptor Type	References
³ H-Clonidine contd	Rabbit duodenum, rat spleen, salivary gland membranes	alpha2	U'Prichard & Snyder, 1979
	Bovine retina membranes	alpha ₂	Bittiger et. al., 1980
	Guinea-Pig Ileum membranes	alpha2	Tanaka & Starke, 1979
	Guinea-Pig kidney membranes	alpha2	Summers, 1980
³ H-Para-Amino Clonidine	Rat brain membranes	alpha_	Rouot & Snyder, 1979
<u>Antagonists</u> ³ H-DHE	Rabbit uterine membranes	alpha(1/2)	Williams & Lefkowitz, 1976, 77; Williams et. al., 1976; Hoffman et. al., 1979.
	Rat liver membranes	alpha (1/2)	Guellaen et. al., 1978; Clarke et. al., 1978; Hoffman et. al., 1979
	Human platelet membranes	alpha (1/2)	Kafka et. al., 1977; Alexander et. al., 1978; Newman et. al., 1978; Cooper et. al., 1978; Hoffman et. al., 1979; Tsai & Lefkowitz, 1979; Hoffman et. al., 1980 _a

CONTD.

24

CONTD

Ligand	Tissue Source	Receptor type	References
³ H-DHE contd	Rabbit platelet membranes	alpha (1/2)	Tsai & Lefkowitz, 1978
	Rat brain membranes	alpha-noradrenergic 'antagonist state' alpha (1/2)	Greenberg & Snyder, 1977; Greenberg & Snyder, 1978 Miach et. al., 1978
	Calf brain membranes	alpha-adrenergic	Titeler & Seeman, 1978
³ H-phentolamine	Human plàtelet membranes	alpha (1/2)	Steer et. al., 1979
	Bovine retina membranes	alpha (1/2)	Bittiger et. al., 1980
³ H-WB4101	Rat brain membranes	alpha-noradrenergic 'antagonist state' alpha _l	Greenberg et. al.,1976; Greenberg & Snyder 1978 Tanaka & Starke, 1980; U'Prichard & Snyder 1979
	Calf brain membranes	alpha-noradrenergic 'antagonist state' alpha _l	U'Prichard & Snyder, 1978 U'Prichard & Snyder 1979; Hoffman & Lefkowitz, 1980

.

CONTD.

CONTD.

Ligand	Tissue Source	Receptor type	References
³ H-WB4101 contd	Rabbit uterine membranes	alpha (1/2)	Hoffman & Lefkowitz, 1980
	Rat heart membranes	alpha ₁	Raisman et. al., 1979
	Rat heart, vas deferens, salivary gland & spleen membranes	· alpha _l	U'Prichard & Snyder, 1979
³ H-prazosin	Rat brain membranes	alpha _l	Greengrass & Bremner, 1979; Miach et. al., 1980
³ H-yohimbine	Rat brain and kidney membrane	alpha_2	Yamada et. al., 1980
	Human platelet whole cells and membranes	alpha2	Motulsky et. al., 1980

CONTD.

later, the relative differences in affinity between the two diastereoisomers between tissues may in part reflect structural differences among the alpha2-adrenoceptors themselves.

II.2. Coupling mechanisms of alpha2-adrenoceptors to effector systems

It is now well established that agonist activation of beta-adrenoceptors is coupled positively to adenylate cyclase, and that the increases in cyclic AMP level mediate the adrenergic effects at these receptors (Robison et. al., 1971; Lefkowitz et. al., 1976). In contrast, substantial evidence is currently available to indicate that the $alpha_2$ -adrenoceptors are negatively coupled to adenylate cyclase. Alpha_-adrenergic inhibition of adenylate cyclase has been reported in a variety of tissues, including the platelets (Jakobs et. al., 1976; Steer & Wood, 1979; Tsai & Lefkowitz, 1979), adipocytes (Garcia-Sainz et. al., 1980; Aktories et. al., 1979), neuroblastoma x glioma cells (Sabol & Nirenberg, 1979 a, b), and the kidney (Woodcock et. al., 1980).

Over the recent years, considerably progress has been made toward gaining a better understanding of the mechanism by which agonist occupancy of adrenoceptors is coupled to adenylate cyclase. For both the alpha₂ and beta-adrenoceptors, agonist activated modulation of cyclase activity requires guanine nucleotides, such as GTP (Ross et. al., 1977; Jakobs et. al., 1978). The regulatory effect of GTP on the adenylate cyclase is mediated through a guanine nucleotide binding protein (also called G, N or G/F protein) which serves to transfer messages across the membrane from the receptor to the effector (Rodbell, 1980; Limbird, 1981; Spiegel & Downs, 1981). The formation of a ternary complex composed of the agonist, receptor site and the N-protein (H-R-N), appears to be pre-requisite to the modulation of adenylate cyclase (De Lean et. al., 1980). Evidence for the formation of such a ternary complex has come from the demonstrations that there is an increase in the molecular size of the solubilized beta or alpha₂-adrenoceptor following agonist, but not antagonist occupancy (Limbird et. al., 1980; Michel et. al., 1981). The binding of an agonist to the receptor also facilitates the exchange of GTP for GDP on the Nprotein. GTP destabilizes the ternary complex, resulting in the dissociation of the N-protein from the receptor, which now has a low affinity for the agonist. The N-protein – GTP complex then acts on the catalytic unit of adenylate cyclase, and in the case of the beta adrenoceptors, produces a stimulation of the enzyme activity. The stimulatory action on the cyclase is presumably turned off by means of a GTP ase on the N-protein, with GTP being hydrolysed to form GDP. Thus, non-hydrolysable analogues of GTP, such as Gpp(NH)p, produce irreversible stimulation of adenylate cyclase (cuatrecasas et. al., 1975; Lefkowitz & Caron, 1975; Steer & Wood, 1979).

Whether a common N-protein, or separate N-proteins are involved in the adrenoceptor-mediated stimulation and inhibition of adenylate cyclase has always been an important question to be answered. From recent studies on the human platelets which contain different receptors coupled both positively and negatively to adenylate cyclase, there is nowstrong evidence that different N-proteins, Ns and Ni, are involved respectively in enzyme stimulation and inhibition. For instance, Steer and Wood (1979) noticed that while low concentrations of GTP enhanced prostaglandin E_1 , (PGE₁) stimulation of adenylate cyclase, much higher concentrations of GTP were needed to support alpha2-adrenoceptor-mediated enzyme inhibition activated by adrenaline. Hoffman et al. (1981_a) discovered that Mn^{++} ion had differential effects on adenylate cyclase stimulation and inhibition. Lower concentrations of Mn^{++} (0.4 - 1.6mM) preferentially 'uncoupled' the alpha2-receptor mediated inhibition of adenylate cyclase without affecting the characteristic agonistreceptor interaction as regulated by guanine nucleotides (see below), or altering the Gpp (NH) and PGE1-stimulated cyclase activity. At much higher concentrations of Mn⁺⁺, stimulation of adenylate cyclase was also

uncoupled. Smith and Limbird (1982) have looked at the effects of cholera toxin on the stimulation of adenylate cyclase in platelet membranes, and on the agonist-alpha, receptor interactions and inhibition of cyclase. Cholera toxin was shown to stimulate the ADP-ribosylation of the stimulatory N-protein in platelets, which was parallelled by the increase in GTP-sensitive adenylate cyclase activity. However, cholera-toxin treatment neither modified the alpha2-receptor mediated inhibition of cyclase activity by adrenaline, nor the guanine nucleotide-sensitive agonist-receptor interaction. There was also no association of the ADP-ribosylated subunit of Ns with the agonist-alpha, receptor complex. More recently, Jakobs and colleagues (1983a) have further shown that preactivated Ns-protein produced stimulation of adenylate cyclase in platelet membranes and was associated with a marked increase in the enzymes affinity for Mg^{++} although there was no change in affinity for the substrate Mg^{++} -ATP. In contrast, Gpp (NH)p and adrenaline produced non-competitive inhibition of the Ns - stimulated adenylate cyclase activity, accompanied by a significant reduction of the enzyme's affinity for Mg⁺⁺. Therefore, such observations do not only suggest that stimulation and inhibition of adenylate cyclase are mediated through functionally distinct N-proteins, but that their differential effects on the enzymes affinity for Mg⁺⁺ may represent the molecular mechanisms by which the activity of adenylate cyclase is regulated.

The modulatory effects of guanine nucleotides on adenylate cyclase are also reflected in the changes of the agonist-receptor interactions. Radio-labelled antagonist binding to beta or alpha₂-adrenoceptors is displaced by agonists in a manner different from that by antagonists, as manifested by the difference in shape and extent of 'shift' of the displacement curves in the absence and presence of guanine nucleotides. In the absence of guanine nucleotides, agonist displacement curves are shallow, compared to the antagonist. Statistical analysis of such curves would indicate that agonists, but not antagonists interact with beta or alpha₂-receptors in distinct high and low-affinity states (Kent et. al., 1980; Michel et. al.,

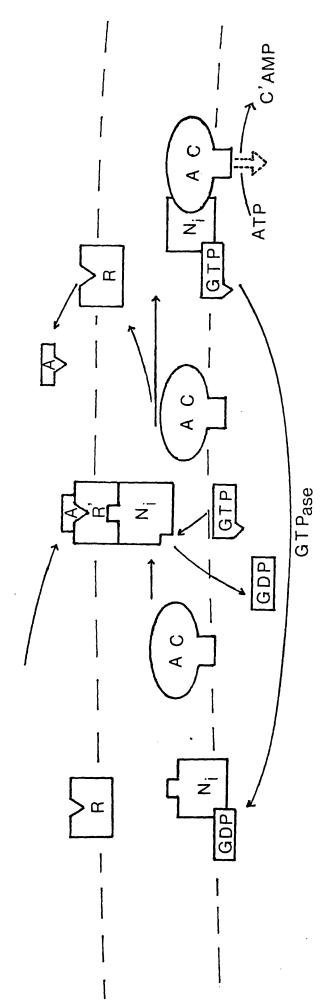


Fig. II. Postulated coupling mechanism of alpha, receptor activation to adenylate cyclase inhibition in membranes.

The binding of an agonist to alpha $_{7}$ -receptor (R) causes an initial conformational change in the receptor molecule (R'), complex (A - R' - Ni). The formation of this complex also simultaneously facilitates the exchange of GTP for GDP on Ni. allowing the binding of the agonist -R' complex (A-R') to the inhibitory guanine nucleotide protein (Ni) to form a ternary The dissociation of Ni from A - R' also converts R' back to R. The inhibition process is believed to be 'turned off' as a This causes the dissociation of Ni from A - R'. The GTP-Ni complex then binds to and inhibits adenylate cyclase (AC). result of the hydrolysis of GTP to GDP by a GTPase.

1980). the high-affinity state corresponds to the ternary (H-R-N) complex described earlier. In the presence of high concentrations of guanine nucleotides, agonist displacement curves are shifted to the right, accompanied by steepening of the curves toward a slope of unity. Hence, agonists now interact with the receptor in a homogeneous low-affinity state, apparently as the result of the dissociation of the N-protein (Ns or Ni) from the ternary complex. The extents to which displacement curves of drugs can be shifted by guanine nucleotides appear to correlate with their intrinsic activities on the stimulation or inhibition of adenylate cyclase, and may reflect the differences in efficiency of receptor-effector coupling (Kent et. al., 1980; Tsai & Lefkowitz, 1979) (also see Chapter VI).

Besides guanine nucleotides, monovalent cations, such as Na⁺, also markedly reduce the affinities of agonists at alpha₂-adrenoceptors (Tsai & Lefkowitz, 1978). The combined effect of the two modulators on agonist affinity is either additive or synergistic (Woodcock & Marley, 1981, Motulsky et. al., 1980; also see Chapters VI and VII). However, it has been further noticed that there seems to be difference between alpha₂adrenoceptors (eg those in platelets vs. those in rat brain or kidney) with respect to the requirement for Na⁺ in full expression of the regulatory effect of guanine nucleotides on agonist-receptor interaction. Whether or not such difference may imply difference in the molecular coupling mechanism will be discussed further Chapter VI.

Although inhibition of adenylate cyclase is believed to be the biochemical mechanism for many alpha₂-receptor mediated effects, increase in cytosolic Ca⁺⁺ appears to play a major mechanistic role in mediating some other alpha₂-adrenergic actions, such as vascular smooth muscle contraction (Van Meel et. al., 1981; Godfraind et. al., 1982; Langer & Shepperson, 1982). In this respect alpha₂-receptors resemble alpha₁-receptors whose actions are generally associated with Ca⁺⁺ influx and/or intracellular Ca⁺⁺ mobilization (Exton, 1981; Morton & Halliday, 1981; Langer & Shepperson, 1982).

Since there is a good relationship between alpha1-receptor activation and the hydrolysis of membrane phosphatidylinositol (PI) and/or polyphosphoinositides (PPI), it has been suggested that the breakdown of PI and/or PPI may be directly involved in the Ca⁺⁺ gating mechanism. (Michell, 1975; Michell, 1981; Fain & Garcia-Sainz, 1980). Recent evidence has further implicated that the metabolites of polyphosphoinositides - the soluble inositol phosphates (IP) may act as second messenger mediating intracellular Ca⁺⁺ release (Burgess et. al., 1984). Whether or not PI and/or PPI breakdown represents the primary mechanism for increased cytosolic Ca⁺⁺ upon alpha, and/or alpha, receptor activation remains to be clarified. Nevertheless, the similar functional significance of cytosolic Ca⁺⁺ in mediating alpha, and alpha, adrenergic actions suggests that other than the inhibition of adenylate cyclase, facilitation of Ca⁺⁺ fluxes may also be a mechanism coupled to some alpha₂-receptor activation. After all, it is interesting to note that, although catecholamine-induced platelet aggregation is believed to be mediated through alpha2-receptors coupled to inhibition of adenylate cyclase, there is recent evidence suggesting that the catecholamine aggregatory action is also associated with an increase in Ca⁺⁺ input which does not occur with other aggregatory agents, such as ADP (Owen et. al., 1980). Furthermore, the divalent cation ionophores, such as A-23187 was also shown to induce aggregatory response to catecholamines and imidazolines, an effect apparently mediated through the alpha2-adrenoceptors (Grant & Scrutton, 1980). Hence, in this system, alpha2-receptors may be coupled to both inhibition of adenylate cyclase and Ca⁺⁺ influx. Full alpha₂-receptor mediated aggregatory response may therefore involve the interaction between the two mechanisms. It is even tempting to believe that such possible interactive mechanisms may be involved in some other alpha2-adrenergic actions as well.

II.3. Study Objectives

This work will examine the molecular pharmacological properties of alpha₂-adrenoceptors using radioligand binding techniques. There are four main objectives:

- Initial studies will involve the characterisation of alpha₂-adrenoceptors on human platelets using the highly selective antagonist ligands,³Hyohimbine and ³H-rauwolscine. Platelets are a particularly useful system to study alpha₂-receptors, as they can be conveniently obtained from human blood to yield relatively homogeneous preparations of intact cells and membranes.
- 2 The modulation of agonist and antagonist interactions with alpha₂ adrenoceptors by various factors (eg guanine nucleotides, temperature, cations) will be examined. The human platelet alpha₂-adrenoceptor will serve as the basic study model.
- 3 Studies on the platelet alpha₂-adrenoceptor will be extended to include alpha₂-adrenoceptors in other tissues or species. The pharmacological properties of alpha₂-adrenoceptors will be compared.
- 4 Attempts will also be made to solubilize $alpha_2$ -adrenoceptors from tissue membranes, and the possible differences in pharmacological properties of soluble and/or particulate $alpha_2$ -adrenoceptors will be evaluated.

Chapter III METHODS

ML IIIOD5

III.I. Tissue and membrane preparation

III.I.1 Preparation of platelet whole cells

Human whole blood was obtained from hospital source or from male volunteers. Blood was generally collected in Tri-Sodium Citrate 3-3.2% in a 9: 1 (V/_V) ratio. Platelet-rich plasma (PRP) was separated from red and white cells by centrifugationat low speed (270 x g) for 15 minutes at 10° C, and carefully harvested by transfer pipets. Subsequently, intact platelets were sedimented by centrifuging PRP at 27000 x g for 10 minutes at 4° C. The supernatant, which is the platelet-poor plasma (PPP) was decanted, leaving behind the platelet pellet. In binding experiments with intact platelets, the platelet pellets were resuspended in isotonic buffer (50 mM Tris-HCI 20 mM EDTA, 150 mM NaCl pH 7.5) by gently smearing against the wall of the tubes with a glass-rod. This was followed by centrifugation at 4° C for 10 minutes. The platelet pellets were washed two more times by resuspension and centrifugation. At the end of the final wash, the platelets were resuspended in the same isotonic buffer at a suitable volume, and used for assays within the same day of preparation.

Provided the above procedures are carefully followed, and particularly if PRP is harvested with great care, high yields of sufficiently pure platelets can be obtained. Usual total platelet yields were >88-90% with negligible red and white cell contamination.

Storage of intact platelets at 4° C for 24 hours resulted in a loss of about 15% of binding sites, but 40-50% of sites were lost after a storage time of 72 hours.

III.I.2 Preparation of platelet membranes

Intact platelets were isolated from PRP as described in section
 III.1.1 The platelet pellet was resuspended in ice-cold hypotonic buffer
 (5 mM Tris- HCl 5 mM EDTA) and left for 1-2 minutes before being homogenized
 for 10 strokes with a motor-driven glass-feflon homogenizer. The suspension

was then centrifuged at 27000 x g for 10 minutes at 4° C. The pellet was washed once with the hypotonic buffer by gentle resuspension and then centrifugation at 27000 x g for 10 minutes at 4° C. A final washing was carried out by resuspension of the pellet in ice-cold assay buffer (50 mM Tris HCl, 0.5 mM EDTA, 0.1% ascorbate, pH 7.5), followed by centrifugation at 27000 x g for 10 minutes at 4° C. The final pellet was then resuspended in appropriate volume of assay buffer for binding assays. Membrane preparations could be stored frozen at -40 or -70°C for prolonged period of time (6 months or more) without significant loss of binding or change in overall pharmacological properties. However, after membranes . had been frozen and thawed, characteristics of agonist-alpha₂-receptor interactions appeared to be greatly altered (see Chapter VI).

III.1.3 Preparation of rat cerebral cortical membranes

Male Wistar/Sprague Dawley rats were killed by decapitation. Brains were removed. Cerebral cortex was dissected at 4° C and homogenized in 20 vol of ice-cold 5 mM Tris-HCl,5mMEDTA.Suspension was then centrifuged at 27000 x g for 10 minutes at 4° C. The resulting pellet was washed once more in the same buffer by homogenization followed by centrifugation at 27000 x g for 10 minutes at 40° C. One final washing was carried out by resuspension of the pellet in ice-cold 'assay buffer' (50 mM Tris-HCl, 0.5 mM EDTA, 0.1% ascorbate, pH 7.5) and then centrifuging at 27000 x g for 10 minutes at 4° C. The final pellet was resuspended in appropriate volume of assay buffer before being used in binding assays.

Extensive washing of membranes with the above hypotonic buffer containing EDTA was found to be essential in order to obtain more consistent results between preparations. There may be at least two good reasons for that. Firstly, the presence of endogenous divalent cations, which can be chelated by EDTA, could potentially reduce the affinity of ³H-yohimbine or ³H-rauwolscine as will be discussed in Chapter VI. Secondly, the use of hypotonic buffer, rather than hypertonic sucrose buffer, could minimise the formation of synaptosomes when tissue is homogenized and washed. As will be shown in Chapter VII, cerebral membranes prepared in sucrose buffer contained a significantly high content of retained endogenous noradrenaline, the presence of which could produce pseudo non-competitive inhibition of ³H-yohimbine (and probably also ³H-rauwolscine) binding. Furthermore, the presence of residual divalent cations might also enhance the interaction of agonists with alpha₂-adrenoceptors and potentiate the interference with ³H-antagonist binding.

III.1.4 Preparation of rabbit cerebral cortical membranes

Male New Zealand white rabbits (2-3 kg) were killed by cervical dislocation. Cerebral cortex was dissected and chopped into smaller pieces before being homogenized in 20 vol. of ice-cold 5 mM Tris-HCl 5mM EDTA buffer with an Ultra-Turrax homogenizer for 2 x 10 s. bursts. The suspension was then centrifuged at 27000 g for 10 minutes at 4° C. The pellet was washed and treated in the same manner as described in section III.1.3. The final pellet was resuspended in assay buffer.

III.1.5 Preparation of rat/rabbit kidney membranes

Rats and rabbits were killed as described in sections III.1.3. and III.1.4. Kidneys were removed bilaterally. Perirenal fat was removed and renal cortex was dissected. Tissue was cut into small pieces and homogenized in 20 vol. of ice-cold 5 mM Tris-HCl 5 mM EDTA buffer with an Ultra-Türrax homogenizer until a homogeneous suspension was obtained. The suspension was filtered through double-layer cheese cloth. The filtrate wascentrifuged at 27000 x g for 10 minutes at 4° C. The resulting pellet was washed once more in the same buffer by homogenization, followed by centrifugation at 27000 x g at 4° C. One final washing was carried out in assay buffer (50 mM Tris-HCl, 0.5 mM EDTA, 0.1% ascorbate, pH 7.5). The resulting pellet was resuspended in appropriate volume of assay buffer and used for assays.

III.1.6 Preparation of human cerebral cortical membranes

Human brain was removed and chilled as soon as possible post mortem. Cerebral cortex was dissected from the anterior portion of the temporal lobe within24 hours and stored at -70° C prior to the membrane preparation procedures which took place within the same day of binding assays.

Cerebral cortical membranes were prepared in a way similar to that described for the rat and rabbit cerebral membranes.

III.2. Radioligand binding assays

III.2.1 General assay conditions and procedures

Radioligand bindings assays were performed in a total assay volume of 250 microliters (ul.) in 50 mM Tris-HCl,0.5 mM EDTA, 0.1% ascorbate, pH 7.5, consisting of 50 ul radiolabel (³H-yohimbine, ³H-rauwolscine or ³H-prazosin), 100 ul membranes, and either 100 ul buffer or 50 ul buffer plus 50 ul displacing drug.

Incubations were performed at room temperature $(22-25^{\circ} \text{ C})$ or 37° C as appropriate. Upon reaching equilibrium (except for kinetics experiment) reaction was stopped by addition of 1.5 ml ice-cold assay buffer. Membranes were immediately collected on Whatman GF/B filters by filtration under vacuum and rapidly washed with 3 x 5 ml ice-cold buffer. The filters were then counted for radioactivity in Fisofluor 1 scintillation fluid (4-5 ml) using a LKB-Wallac Scintillation Counter at an efficiency of about 40%.

III.2.1.1 Special Considerations

A. Assay Buffer: There do not appear to be any strict criteria that must be met regarding the choice of assay buffers. The main aim is to adopt the best incubating conditions that optimise the specific radioligand binding. Ideally, incubation should be carried out under more physiological conditions. However, the presence of metal ions was avoided in view of the potential interference of 3^{3} H-yohimbine or 3^{4} H-rauwolscine binding to alpha₂-adrenoceptors by these ions (see chapter VI). Some workers suggested that Na-K phosphate buffer is more preferable to Tris-HCl buffer for the binding of 3^{4} H-yohimbine or 3^{4} H-rauwolscine to certain tissues (U' Prichard et al., 1983). However, in our hands, there appeared to be little difference between the two buffers with respect to the binding of these radioligands. For example, in parallel saturation experiments, 3 H-rauwolscine exhibited a Kd of 2.4 nM in Tris Hcl buffer, compared to 2.7 nM in Na-K phosphate buffer; there was no difference in the Bmax.

B. Assay pH: The assay pH was chosen to be as close to the physiological pH (7.4) as possible, although the binding of 3 H-yohimbine or 3 H-rauwolscine actually appeared to be higher around pH 7.0-7.2. However, there was not much difference in binding between pH 7.4-7.5.

C. Separation of free and bound radioligand: A number of methods are available for the separation procedure. These include equilibrium dialysis, centrifugation, and filtration. Separation by dialysis is often too time-consuming, whereas the centrifugation method may not sufficiently separate the bound ligand from the free, often resulting in high non-specific binding relative to specific binding. So far, millipore filtration has appeared to be the most efficient method. Rapid filtration under vacuum provides a rapid separation of bound ligand from the free, which is particularly essential when dealing with ligands with fast dissociation rate (e.g. binding of ³H-yohimbine to rat kidney membranes). At suction pressure of 18-20 psi, separation was accomplished almost instantaneously.

D. Choice of membrane filters: The kind of filters chosen largely depends on the properties of the radioligand. Most commonly, Whatman GF/B or Whatman GF/C filters are used in assays with particulate receptors. In dealing with ligands which tend to adsorb to various materials, such as ³H-dihydroergocryptine, the use of thinner filters, like the Whatman GF/C, could reduce the high non-specific binding. In assays with ³H-yohimbine or ³H-rauwolscine, there appeared to be little difference between GF/B and GF/C filters with respect to the degree of non-specific binding. GF/B filters are less fragile and therefore practically easier to handle under strong suction pressure. Using double filters might theoretically enhance retention of membranes, but appeared to produce higher non-specific binding..

E. Washing of filters: Immediately after filtration, filters were quickly washed with cold buffer. This treatment could reduce non-specific ligand binding by removing free ligand trapped in the filter matrix. However, excessive washing of filters might wash off low-affinity specific binding (Boeynaems & Dumont, 1975). Moreover, non-specific binding might also be washed off with excessive washing, thus producing artefacts mistaken to be specific receptor binding. Generally, 2-3 times rapid washing with 5 ml buffer, which could be completed within 10 sec., was found to sufficiently minimize the non-specific binding without significant reduction of specific binding. Ice-cold buffer was also preferred for the washing, so that ligand dissocation could be minimized.

III.2.1.2 Determination of specific binding

Specific radioligand binding was defined as that binding displaceable by 5 μ M Phentolamine. In other words, it was determined from the difference of total ligand binding in the absence and presence of 5 μ M phentolamine. The choice of using this concentration of phentolamine to determine non-specific binding (NSB) was proved appropriate from the indication that maximal displacement of radioligand binding could be reached at micromolar concentrations of phentolamine, as should generally be expected of most selective antagonists acting at specific receptor sites (see Laduron, 1983; also see fig. III.1,.

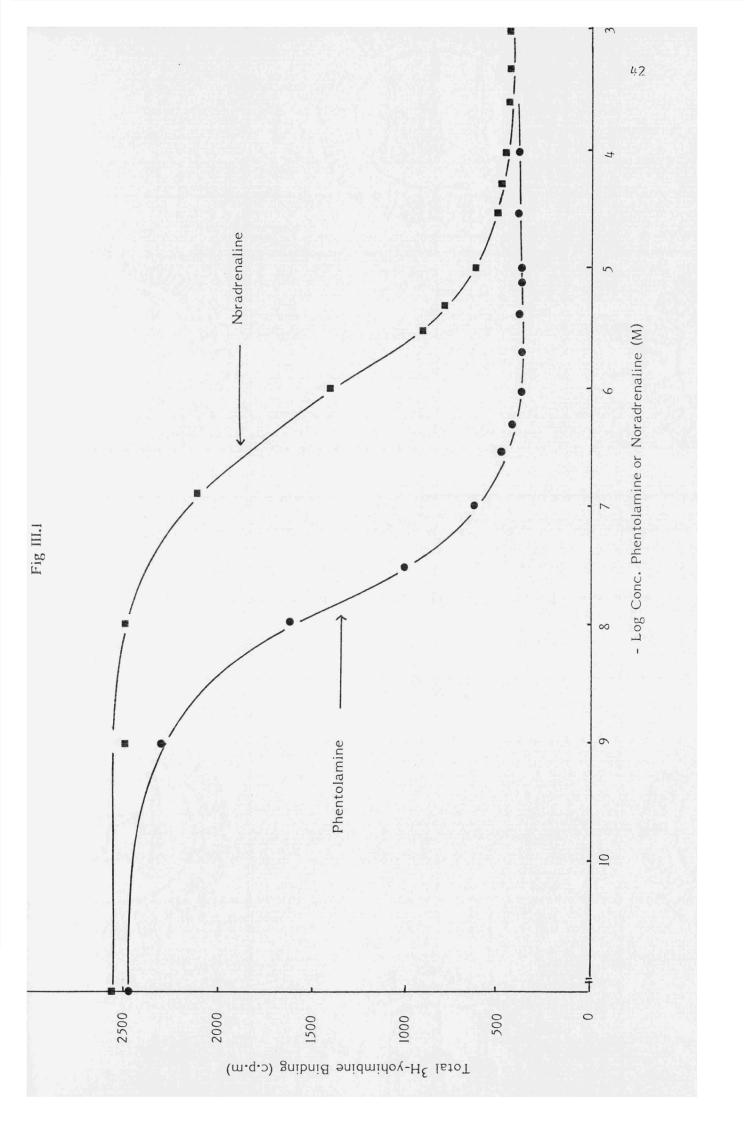
Legends to figures III.1, 2 and 3

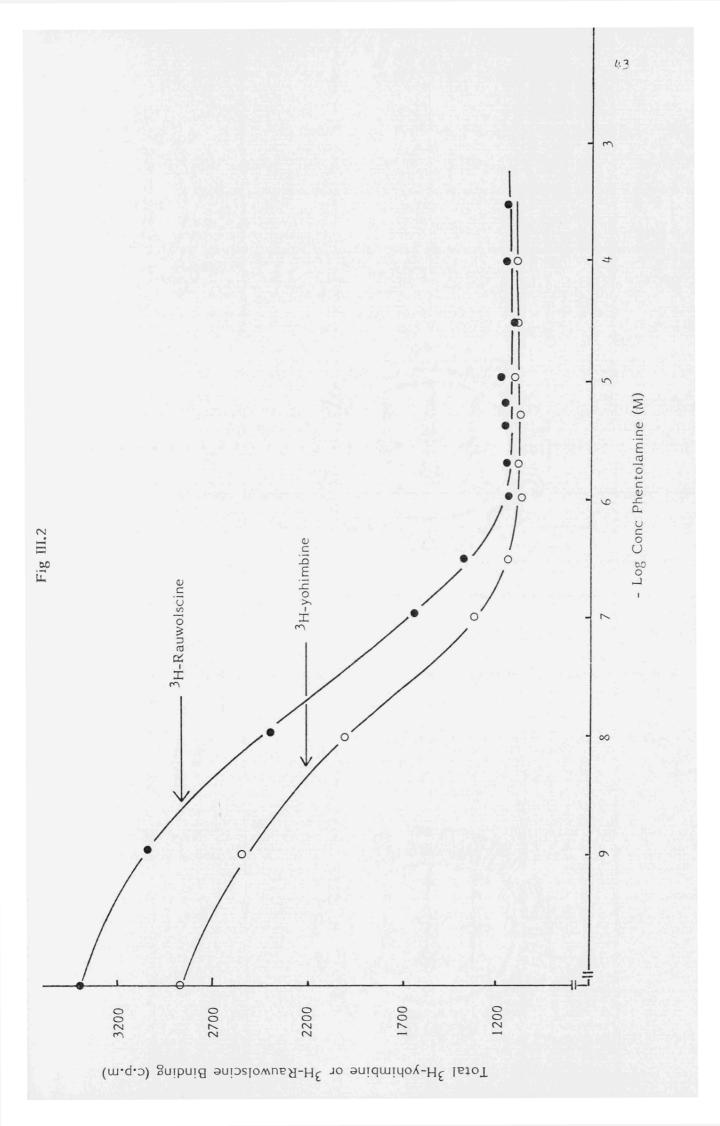
Figure III.1 Displacement of total ³H-yohimbine binding by phentolamine and noradrenaline in human platelet membranes.

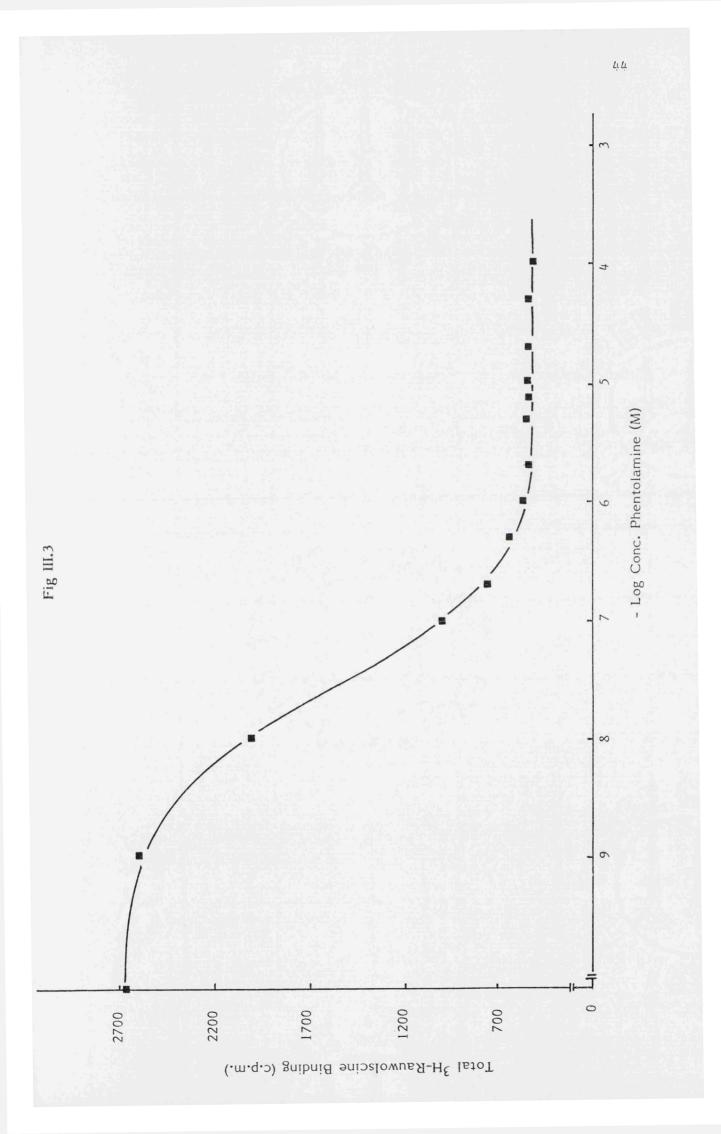
Figure III.2 Displacement of total ³H-yohimbine and ³H-rauwolscine binding to rat cerebral cortical membranes by phentolamine.

Figure III.3 Displacement of total ³H-rauwolscine binding to rat renal cortical membranes by phentolamine.

The concentrations of phentolamine and noradrenaline required to define non-specific binding (NSB) for ³H-rauwolscine or ³H-yohimbine were evaluated by determining total equilibrium binding of radiolabel in the absence and presence of increasing concentrations of displacer. Binding decreased with increasing concentrations of displacer until all specific binding had been displaced. The residual binding represents NSB.







III.2., and III.3.). Excessive displacer was not used, in order to avoid potential displacement of radioligand binding from non-specific membrane components (see Richardson & Nahorski, 1979; Richardson, 1979). In these studies, 1 mM noradrenaline appeared as effective as 5µM phentolamine to determine NSB. At 2-4 nM ligand concentration, specific binding ranged from about 45% (in rabbit kidney membranes) to about 90% (in human platelet membranes) of total binding. Specific binding activity for ³H-yohimbine was significantly lower than ³H-rauwolscine in tissues such as rat brain and kidney membranes, and rabbit kidney membranes.

III.2.2. Specific experimental procedures

III.2.2.1 Saturation experiments

These experiments were performed by incubating in groups of tubes an equal quantity of tissue membranes (under identical assay conditions) with increasing concentrations of radioligand. The incubations were carried out both in the absence and presence of NSB determinant at each radioligand concentration to determine specific binding. Maximal concentrations of ³H-yohimbine or ³H-rauwolscine were usually between 15-25 nM. Protein concentrations were in the range of 2-400 µg/tube for platelet membranes, and 4-700 µg/tube for other tissue membranes. Experiments were usually performed in duplicate or triplicate.

III.2.2.2 Competition experiments

These experiments were performed by first adding to a series of tubes (usually in duplicate)the same concentration of radiolabel and increasing concentrations of a displacing drug. Incubation then began upon the addition of an equal amount of membranes to all the tubes, and continued until equilibrium. In individual experiments, parallel incubations were also performed in the absence and presence of a NSB determinant to assess total and non specific radioligand binding.

III.2.2.3 Kinetics experiments

III.2.2.3.1 Association Kinetics experiments

In these experiments, groups of tubes in the absence and presence of NSB determinant were set up. An equal quantity of radioligand was added to all tubes. Membrane preparation was then added in equal quantity to the tubes group by group at various time intervals to initiate incubation. Incubations were allowed to proceed for increasing length of time (usually 30 seconds to one hour), and stopped by filtration. The timing of membrane addition and filtration was so designed such that identical length of incubation time was allowed for duplicate tubes. Hence, increasing amount of specific radioligand binding in relation to time was obtained.

III.2.2.3.2 Dissociation kinetics experiments

In these experiments, groups of tubes in the absence and presence of NSB determinant were set up. Radioligand, and then membrane preparation were added to all the tubes in equal quantities to initiate incubation. After incubation had proceeded well onto the equilibrium state (for 40-50 minutes in usual practice), an excess of phentolamine (final concentration $= 5 \mu M$) was added to the tubes group by group at various time intervals to initiate the dissociation of radioligand binding. The dissociation was allowed to proceed for variable length of time (usually t = 0 to t = 1 hour) and stopped by filtration. The timing of phentolamine addition and membrane filtration was so designed such that identical length of dissociation time was allowed for duplicate tubes. Specific radioligand binding at zero dissociation time referred to the maximal specific binding at equilibrium, as determined from the difference between total and non-specific binding before the addition of excess of phentolamine.

III.3 Protein Determination

Protein contents were assayed according to the methods of Lowry et al (1951).

Bovine Serum Albumin was used as reference protein. Series of protein standards (I2.5 - 300 µg/ml.) were prepared in distilled water. Sample preparations were also properly diluted in distilled water. Standards and samples were treated with reagents (listed in Appendix II), and after equilibration with Folin-Ciocalteau Regent, absorbance was read at a wavelength of 750 nm with a pye-unicam Sp 6-500 spectrophotometer. Samples protein concentrations were determined from the regression lines from the standard (absorbance - concentration) curves.

III.4 Analysis of results

III.4.1 Saturation experiment data

Initial free radioligand concentrations were assessed by measuring radioactivity in extra 'Total' tubes containing membranes. This could provide better estimates of the amount of ligand truly 'free' for reaction. Equilibrium free ligand concentrations (F) were then calculated by subtracting total bound radioactivity from initial free ligand concentrations. Specific radioligand binding (B) was related to (F) by plotting B/F against F (Scatchard, 1949), or B against B/F. If B/F was plotted against B, the maximal binding capacity (Bmax) and dissociation constant (Kd) were estimated from the X - intercept, and the reciprocal of the slope of the regression line respectively. If B was plotted against B/F, Bmax and Kd were obtained respectively from the Y - intercept and the slope of the regression line.

Possible co-operativity or receptor heterogeneity was assessed from the slope (Hill coefficient) of the Hill plot (log B/[Bmax - B] vs. log F) (Hill, 1910)

Data were routinely analysed by computerized program based on the respective equations for the plots, and 'best-fitted' with regression.

Derivations of equations for Scatchard and Hill plots are presented in Appendix III.

III.4.2. Competition experiment data

Specific radioligand binding in the presence of inhibitor was compared with that in the absence of inhibitor, and % inhibition was calculated.

IC50 values (concentrations of inhibitors displacing 50% specific ligand binding) were determined graphically from the displacement curves (% inhibition vs. log. conc. inhibitor) and from Hill plots (log % I/[100 -% I] vs. log. conc. inhibitor) from which the slope factors (nH) were also obtained from the slopes of the regression lines.

The computer interative non-linear curve fitting program, LIGAND (Munson & Rodbard, 1980) was also used for more detailed analyses of some agonist displacement curves.

The inhibition constants (Ki) were calculated from IC50 values using the relationship Ki = IC50/(1 + S/Kd) (Cheng & Prusoff, 1973), where S = concentration of the radiolabelled ligand used, and Kd = equilibrium dissociation constant of the ligand (see Appendix V).

III.4.3. Kinetics experiment data

The observed, or pseudo first-order rate constants (Kobs) for the association reactions were determined from the slopes of regression lines for the ln Beq/(Beq - B) vs. time plots, were Beq = specific radioligand binding at equilibrium, and B = specific binding at time t.

First-order dissociation rate constants (K₂) were determined from the slopes of the regression lines for the ln (B/Beq) vs. time plots, where B = specific ligand binding after dissociation time t.

Second-order association rate constants (K₁) were calculated according to the relationship: Kobs - $K_2 = S$ (K₁), where S = concentration of the radioligand used.

Kinetically derived dissociation constants were calculated upon dividing K2 by K1.

Derivations of the kinetics equations are presented in Appendix IV.

III.5 Statistical treatment of results

1

Results were generally expressed as mean values \pm standard error of means, unless indicated otherwise. Comparison of results was tested for statistical significance using Student's 't' tests. Differences were considered significant when p < 0.05.

Chapter IV

CHARACTERISATION OF ALPHA₂-ADRENOCEPTORS ON INTACT HUMAN PLATELETS AND PLATELET MEMBRANES

IV.1. Introduction

Human blood platelets originate from the fragmentation of bone marrow megakaryocytes(Gordon, 1981; Weiss, 1982). These tiny circulating discs play an important physiological role in haemostasis, but are also an important factor for thromboembolic disorders (Zucker, 1981; Weiss, 1982). The stimulation of platelet activities is initiated through the interactions of platelet surface membranes with aggregating agents. Once stimulated, platelets undergo a sequence of morphological and functional changes (Vargraftig et. al., 1981). There is usually a rapid change in shape, associated with the formation of pseudopodes (Gordon, 1981; Vargraftig et. al., 1981). The membrane surfaces also become 'sticky', to which fibrinogen binds and facilitates the aggregation of platelets in the presence of calcium ions (Zucker, 1980; Shattil & Bennett, 1981). In addition, aggregating agents stimulate the intracellular mobilization of Ca⁺⁺, which facilitates the release of other chemical substances such as ADP, serotonin, etc from platelet granules, hence resulting in the recruitment and aggregation of additional platelets. Accompanying platelet aggregation is also the synthesis of chemical substances such as thrombin and thromboxane A_2 which further support the aggregatory and secretory activities (Shattil & Bennett, 1981; Vargraftig et. al., 1981; Zucker, 1980).

In-vitro platelet aggregation can be induced by a variety of soluble stimuli, each presumably interacting with a specific surface receptor. These include ADP (Gaarder et. al., 1961, Born, 1961; Born & Cross, 1963; Haslam, 1964; Mustard & Packham, 1970, Nachman et. al., 1974), serotonin (Mitchell & Sharp, 1964), thrombin (Grette, 1962; Clayton & Cross, 1963; Tollefsen et. al., 1974), and catecholamines (Mills & Roberts, 1967; Grant & Scrutton, 1979; Barthel & Markwardt, 1974; Scrutton & Wallis, 1981). Although catecholamines are only effective in stimulating full aggregation of human blood platelets, an effect which also only occurs at concentrations far beyond the physiological levels (Scrutton & Wallis, 1981), they do have the ability to potentiate the aggregatory actions of other agonists, such as ADP (Drummond, 1976; Hsu et. al., 1979; Scrutton & Wallis, 1981). This 'pro-aggregatory' effect of catecholamines therefore may be of greater physiological significance than the full aggregatory effect.

From functional studies, there is now substantial evidence to indicate that catecholamines induce platelet aggregation or pro-aggregation through interacting with an alpha-adrenoceptor (Clayton & Cross, 1963; Mills & Roberts, 1967). Moreover, such an alpha-adrenoceptor appears to be of the alpha₂-subtype, as can be demonstrated by the selective effects of the alpha₂-subtype, as can be demonstrated by the selective effects of the alpha₂-agents compared to the alpha₁-agents (Grant & Scrutton, 1979; Grant & Scrutton, 1980; Hsu et. al., 1979). This has further been substantiated byradioligand binding studies in which the non-selective alpha-antagonist ligand, ³H-dihydroergocryptine was used as the receptor probe (Alexander et. al., 1978; Newman et. al., 1978). With the use of computer-assisted curve-fitting analysis, Hoffman et al. have also reached the conclusion that human platelets contain alpha-adrenoceptors exclusively of the alpha₂-subtype (Hoffman et. al., 1979).

The present study was undertaken with the primary aim of examining the pharmacological properties of receptor sites on human platelets labelled by the alpha₂-selective antagonists ³H-yohimbine and ³H-rauwolscine. The results have demonstrated that both ligands label an identical population of homogeneous sites possessing pharmacological properties that are suggestive of the alpha₂-adrenoceptors.

IV.2. Results

IV.2.1. Characterisation of alpha₂-adrenoceptors in intact human platelets
 IV.2.1.1.³H-yohimbine binding: Equilibrium and kinetics studies

³H-yohimbine binding to intact human platelets was rapid and saturable, and of high affinity and high capacity. Equilibrium was reached in around 30 minutes at 22-25^oC (Fig. IV.2). The maximal binding capacity

Legends to figures IV.1 and 2

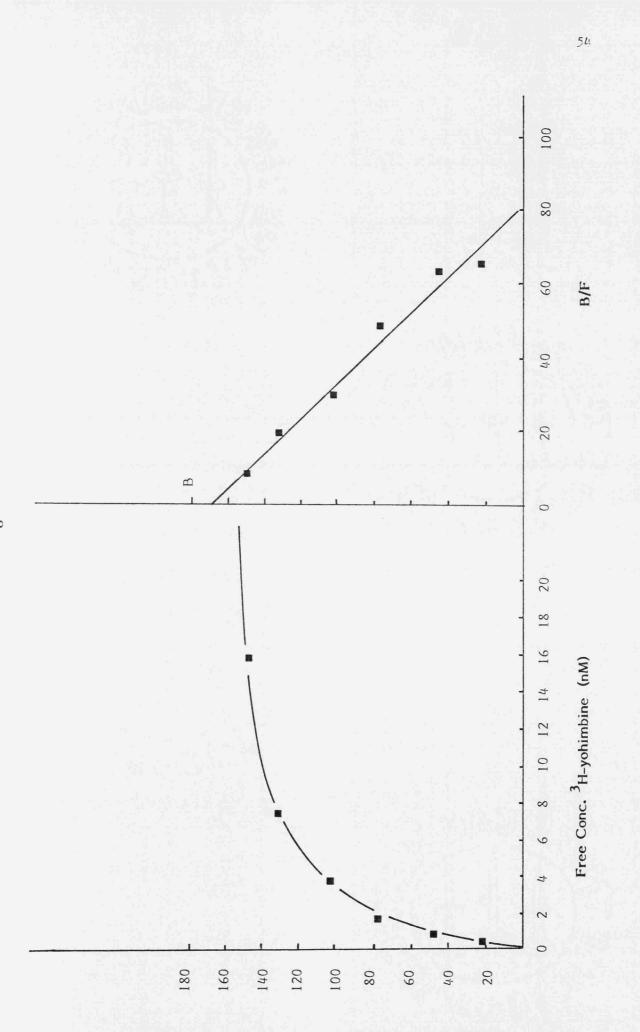
Figure IV.1.

Specific binding of 3 H-yohimbine to intacthuman platelets. Platelets were incubated for 40 minutes at 22 0 C with 3 H-yohimbine (0 - 20 nM) in isotonic buffer (50mM Tris HCl, 0.15 MNaCl, 0.02 M EDTA, pH 7.5). Experiments were carried out similarly to that described in Methods (Chapter III). Left panel; saturation isotherm. Right panel: Scatchard analysis of binding data. Data illustrated is from one experiment representative of three performed in duplicate. Bmax = 178.3 f.mole/mg protein. Kd = 2.07 nM.

Figure IV.2.

Kinetics of ³H-yohimbine binding to intact human platelets. Kinetics experiments were carried out at 22^oC, and results analysed as described in Methods (Chapter III). Left panel: association curve; the inset shows the pseudo first-order rate plot for the association reaction, the slope of which yields the observed rate constant, Kobs. Right panel: dissociation curve; the inset shows the first-order rate plot for the dissociation reaction, the slope of which yields the dissociation rate constant, K₂; the second-order association rate constant, K₁ was calculated from Kobs and K₂ as described in Chapter III.

Data presented is from one of two similar experiments performed in duplicate.



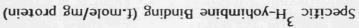
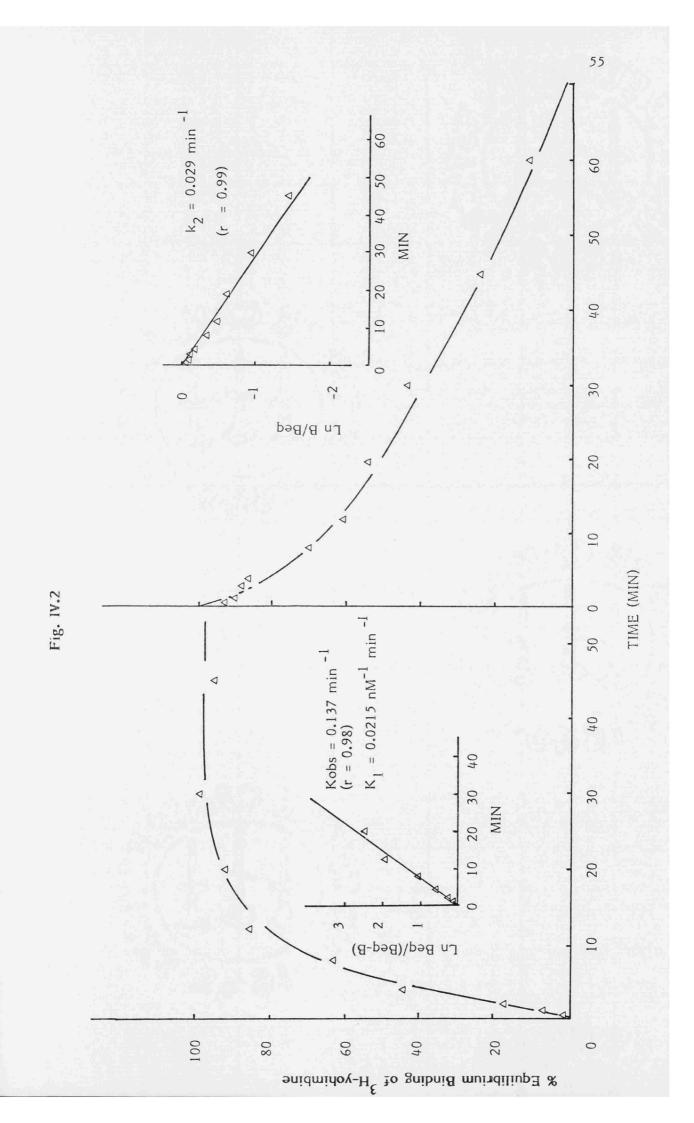


Fig. IV.1.



Drug	Ki(nM)	Hu
Rauwolscine	3.21 ± 0.17	1.07
Yohimbine	2.43 ± 0.26	1.06
Phentolamine	37.4 ± 2.8	0.98
Tolazoline	188 <u>+</u> 22	0.94
Corynanthine	705 ± 117	0.93
Prazosin	1270 ± 210	0.96
Clonidine	67.1 ± 3.1	0.92
(-)Adrenaline	2060 ± 160	0.82
(-)Noradrenaline	6990 <u>+</u> 350	0.79
(-)Isoprenaline	53000 ± 5300	1.03
Dopamine	>100,000	
Serotonin	>100,000	

Affinity of drugs at ³H-yohimbine binding sites on intact human platelets

Table IV.1

Experiments were performed at approximately 2nM 'H-yohimbine. Values shown are means <u>+</u> S.E.M. of 3-6 separate Hu experiments performed in duplicate. Ki values were calculated from IC50 values as described in Methods (Chapter III). values are mean slope factors of displacement curves.

(Bmax) was 187 ± 30 f.mole/mg protein or equivalent to 193 ± 23 sites/ platelet (n = 4) (see figure IV.I). The equilibrium dissociation constant (Kd) of ³H-yohimbine was 2.10 ± 0.13 nM. The Hill coefficient was 1.01 ± 0.004 , indicating that binding occurred at a single class of receptor sites in the absence of co-operative interactions.

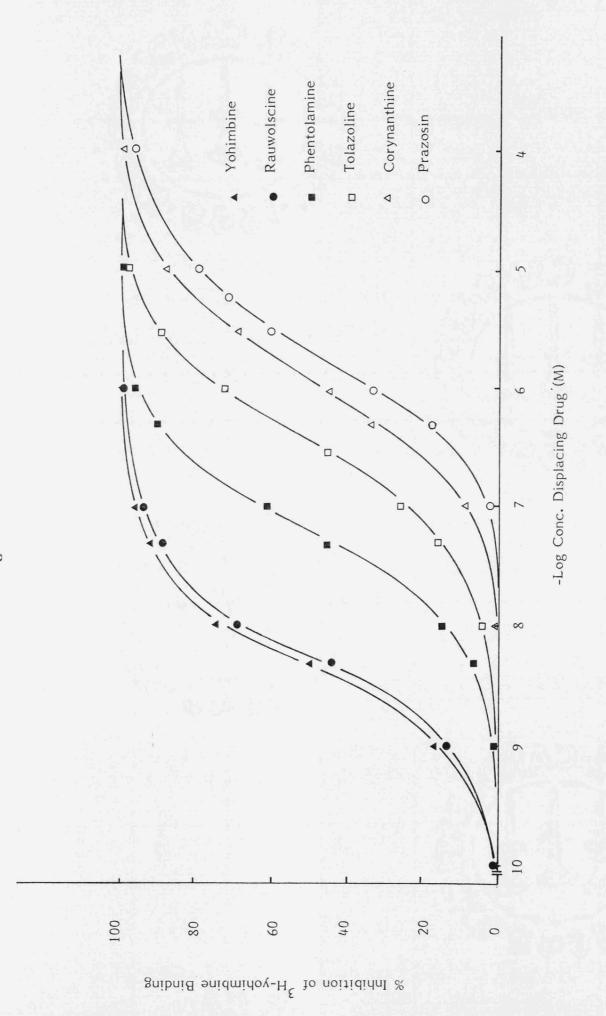
From kinetics experiments, 3 H-yohimbine was found to bind to intact human platelets with an assocaition constant (K₁) of 0.0215 nM⁻¹ min ⁻¹. Binding was very stable and could be maintained for at least 1 - 1¹/₂ hours. Dissociation followed a monophasic first-order kinetics and occurred at a relatively slow rate, with a dissociation constant (K₂) of 0.03 min ⁻¹ (Fig. IV.2). The kinetically derived Kd (k₂/k₁) was calculated to be 1.35 nM, which was in reasonably good agreement with those derived from equilibrium and competition studies (Table IV.I).

IV.1.2. Pharmacological Characteristics

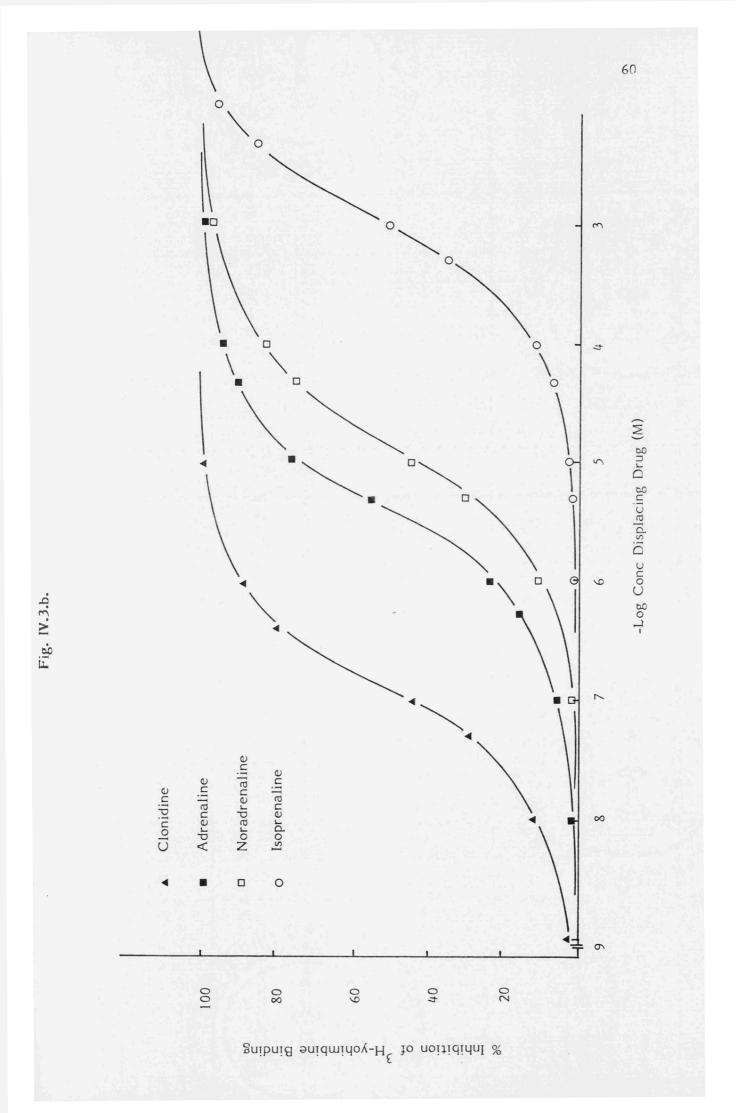
³H-yohimbine binding could be displaced by a variety of drugs. Listed in Table IV.I. are inhibition constants (Ki) of a number of drugs in competing against ³H-yohimbine binding to intact human platelets. As also illustrated in figures IV.3.a.,b., the relative inhibitory potencies of adrenergic agents presented a pharmacological profile which is typical of one expected for the alpha2-adrenoceptors. Thus, the alpha2-selective antagonists yohimbine and rauwolscine appeared almost equipotent at these receptor sites, and both were considerably more potent than the. non-selective antagonist phentolamine. The alpha1-selective antagonists corynanthine and prazosin were of even weaker affinities at the ³H-yohimbine binding sites. With respect to the agonists, the alpha2-selective partial agonist clonidine was more potent than (-)-adrenaline and (-)-noradrenaline. The latter were at least ten-fold more potent than the (+)-isomers (data not shown). The beta agonist isoprenaline was very weak, so were dopamine and serotonin (data not shown). The Hill slope factors (nH) of the antagonist competition curves were all close to unity, which further indicated that

Legends to Figures IV.3.a. and b.

Displacement of Specific 3 H-yohimbine binding to intact human platelet by antagonists and agonists. Platelets were incubated in isotonic buffer room temperature (22^o - 25^oC) for 40 minutes with 2 - 3 nM³H-yohimbine in the presence of increasing concentrations of displacing drugs as described in Chapter III. Data points shown are means of 3 - 6 separate experiments performed in duplicate S.E.M. for each data point is generally less than \pm 5%.







the interactions of drugs occurred at a single class of binding sites.

I V.2.2. Characterisation of alpha₂-adrenoceptors on human platelet membranes IV.2.2.1.³H-yohimbine and³H-rauwolscine binding: Equilibrium and Kinetics studies

Binding of 3 H-yohimbine and 3 H-rauwolscine to human platelet membranes was as rapid as to intact platelets, reaching equilibrium in 30-40 minutes at 22-25°C. In parallel studies, both ligands were shown to label an identical number of binding sites (Bmax = 148 ± 9 f.mole/mg. protein and 144 ± 5 f.mole/mg. protein (n = 4) for 3 H-yohimbine and 3 H-rauwolscine respectively). The equilibrium dissociation constants (Kd) were 0.59 ± 0.08 nM and 0.55 ± 0.06 nM respectively, which were also almost equal. The scatchard plots were linear, with Hill coefficients close to unity, suggesting that binding was to a homogeneous class of binding sites (Fig. IV. 4.)

³H-yohimbine bound with a two-fold faster association rate to platelet membranes than to intact cells ($K_1 = 0.054 \text{ nM}^{-1} \text{ min}^{-1}$, compared to 0.0215 nM⁻¹min⁻¹), and dissociated at a slightly faster rate ($K_2 = 0.04 \text{ min}^{-1}$ compared to 0.029 min⁻¹). Compared to ³H-yohimbine, ³H-rauwolscine binding to platelet membranes occurred at a slightly faster association rate and a slightly slower dissociation rate ($K_1 = 0.073 \text{ nM}^{-1} \text{ min}^{-1}$, and $K_2 = 0.03 \text{ min}^{-1}$). The kinetically derived dissociation constants for ³H-yohimbine and ³H-rauwolscine were 0.7 nM and 0.4 nM respectively, both being in good agreement with those derived from equilibrium studies (Fig. IV 5a and b).

IV.2.2.2. Pharmacological Characteristics

Table IV.2. shows the inhibition constants of various drugs in competing against ³H-yohimbine and ³H-rauwolscine binding to human platelet membranes in parallel studies. The data unequivocally confirmed that both ligands labelled pharmacologically identical sites on the human platelet membranes. The antagonist competition curves with either ligand

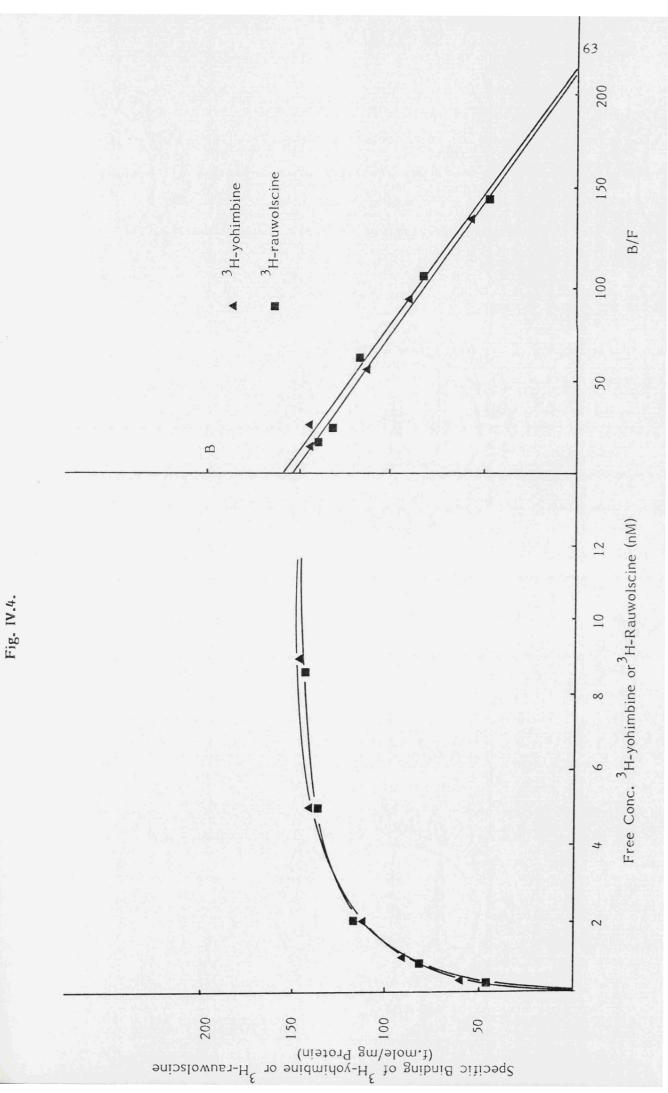
Legends to Figures IV.4, 5a and b

Figure IV.4

Specific binding of ³H-yohimbine and ³H-rauwolscine to human platelet membranes. Experiments were performed in parallel with both ligands (0 -20nM) in each membrane preparation as described in Chapter III. Data illustrated is from a single representative experiment performed in duplicate (n = 4). Left panel: Saturation isotherms. Right panel: Scatchard plots of binding data. Bmax for ³H-yohimbine was 160 f.mole/mg protein, with Kd = 0.75 nM. Bmax for ³H-rauwolscine was 154 f.mole/mg protein, with Kd = 0.7 nM.

Figures IV.5a and b

Kinetics of ³H-yohimbine and ³H-rauwolscine binding to human platelet membranes at R.T. FigIV.5a, ³H-yohimbine binding. Fig.IV.5b, ³H-rauwolscine binding. Experiment procedures and analysis of data were described in Methods (Chapter III). Left panels: association curves; the insets illustrate thepseudo first-order rate plots for the association. Right panels: dissociation curves; the insets illustrate the first-order dissociation rate plots. Data shown are from single experiments which were duplicated twice, with results differing by less than 5%.



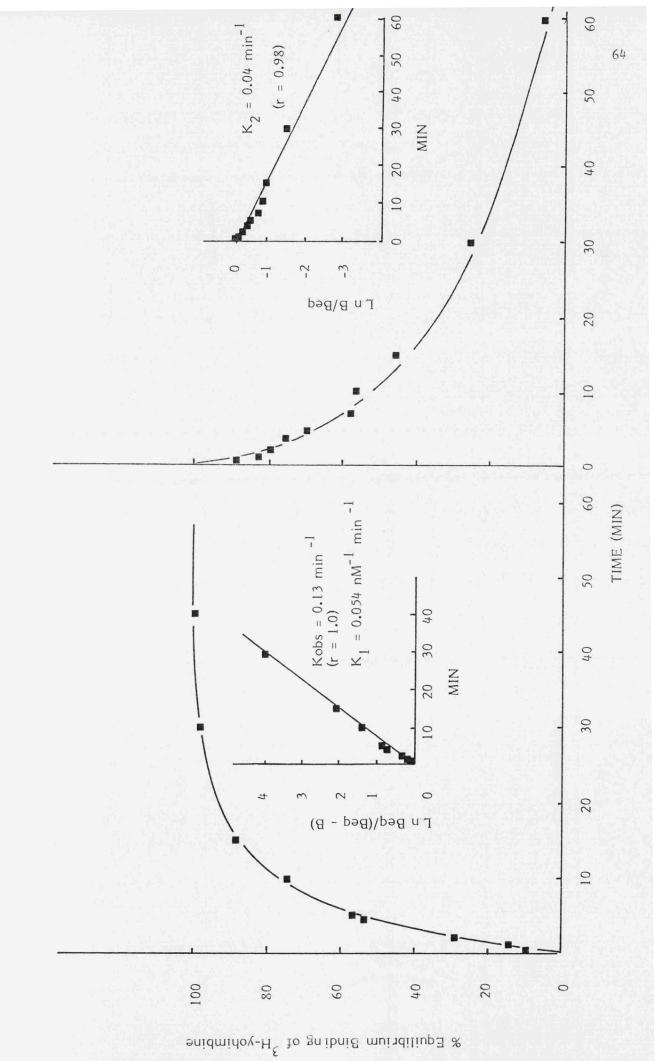


Fig. IV.5.a.

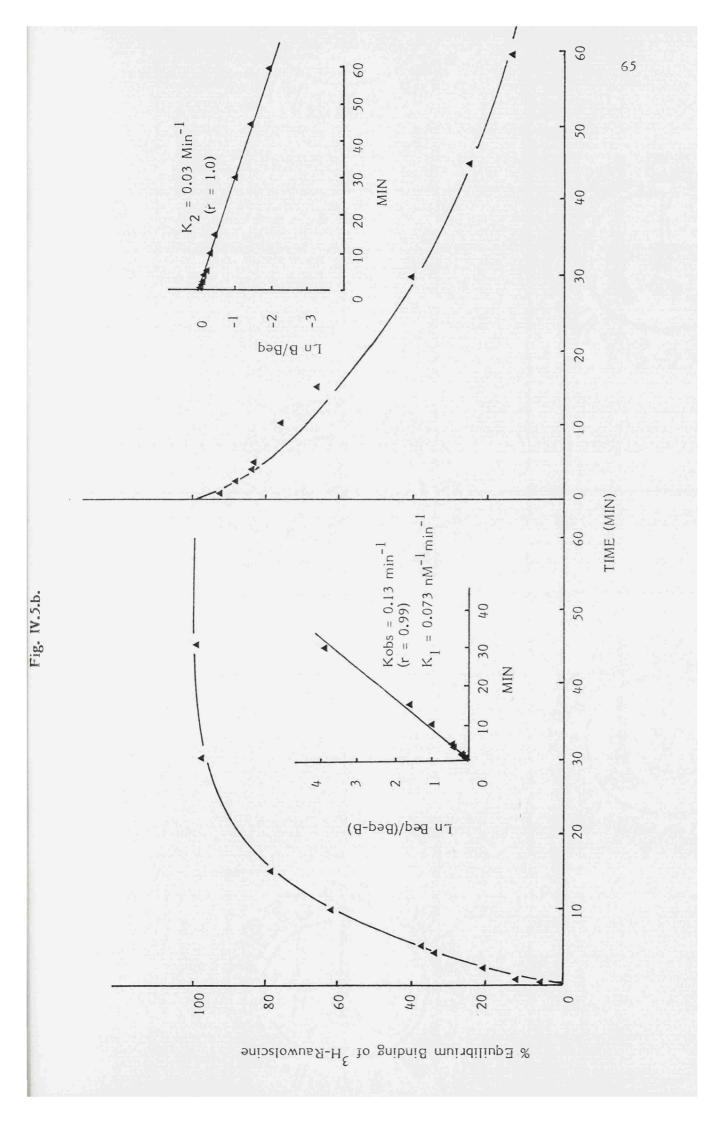


Table V.2. Affinity of various drugs at 3 H-Yohimbine and 3 H-Rauwolscine binding sites on human platelet membranes

	3			3.,		
	H-Yohimbine	lbine		H-rauwolscine	Iscine	
Drugs	Ki (nM)		Ни	Ki (nM)		Hu
Rauwolscine	1.05 ±	0.13	1.06	1.11 +	0.12	1.00
Yohimbine	+ 66.0	0.07	1.11	0.85 +	0.09	0.97
Phentolamine	3.88 +	6.0	0.98	4.01 +	1.23	0.99
WB4101	3.97 ±	0.5	1.05	3.52 +	0.2	0.96
Corynanthine	261 ±	42	1.01	192 ±	23	1.15
Prazosin	784 ±	170	0.94	760 +	194	1.00
Clonidine	9.9 <u>+</u>	0.29	0.32	8.89	0.48	0.83
Adrenaline	29.9 ±	7.7	0.79	28.9 ±	4. 9	0.79
Noradrenaline	89.7 ±	4	0.82	88.7 +	13	.01
Dopamine	1165 +	325	0.98	+ 226	143	0.89
Isoprenaline	4 3400 <u>+</u>	4200	1.04	36850 <u>+</u>	10450	0.86
			7	~		

binding was over 80 - 90% of total binding. Inhibition constants (Ki) were obtained and calculated as described Experiments were performed at approximately 2nM 3 H-yohimbine and 3 H-rauwolscine. Specific in Methods (ChapterIII). Vavues shown are means <u>+</u> S.E.M. of at least 3 - 6 separate parallel experiments performed in duplicate. nH values are the mean slope factors of displacement curves.

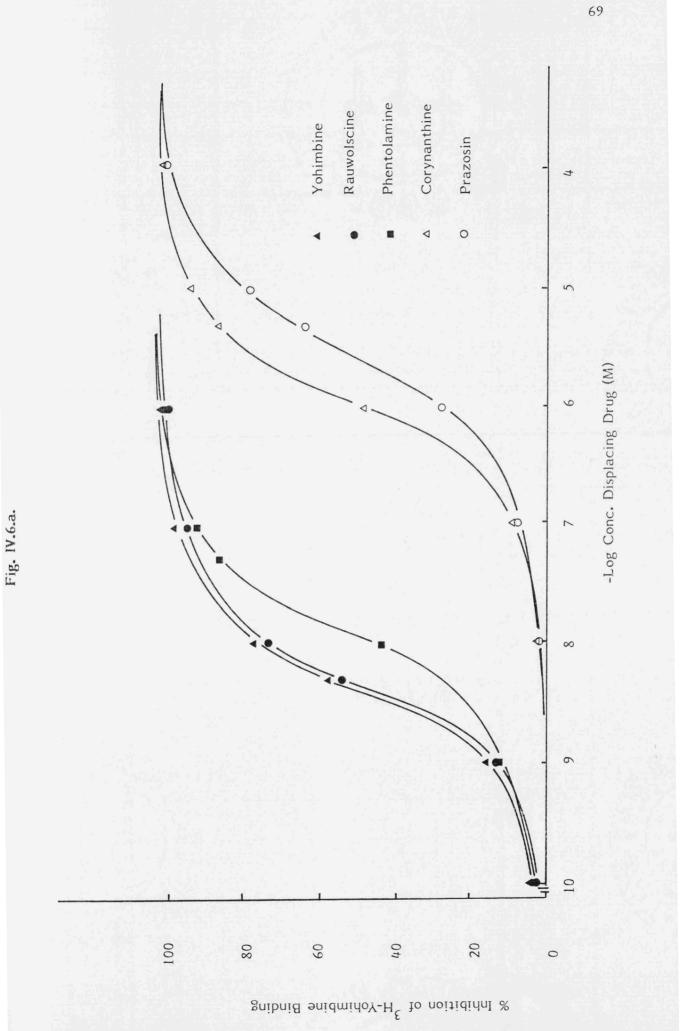
were all steep, with slopes close to unity, indicating that interactions occurred at a single class of binding sites or states. The rank order of drug potencies at either ³H-yohimbine or ³H-rauwolscine binding sites was also one indicative of an alpha₂-type of interactions. Hence, the rank order for the antagonists was yohimbine rauwolscine > phentolamine > corynanthine > prazosin. And, for the agonists, the order was clonidine > adrenaline > noradrenaline > dopamine >> isoprenaline (Fig. IV. 6a,b).

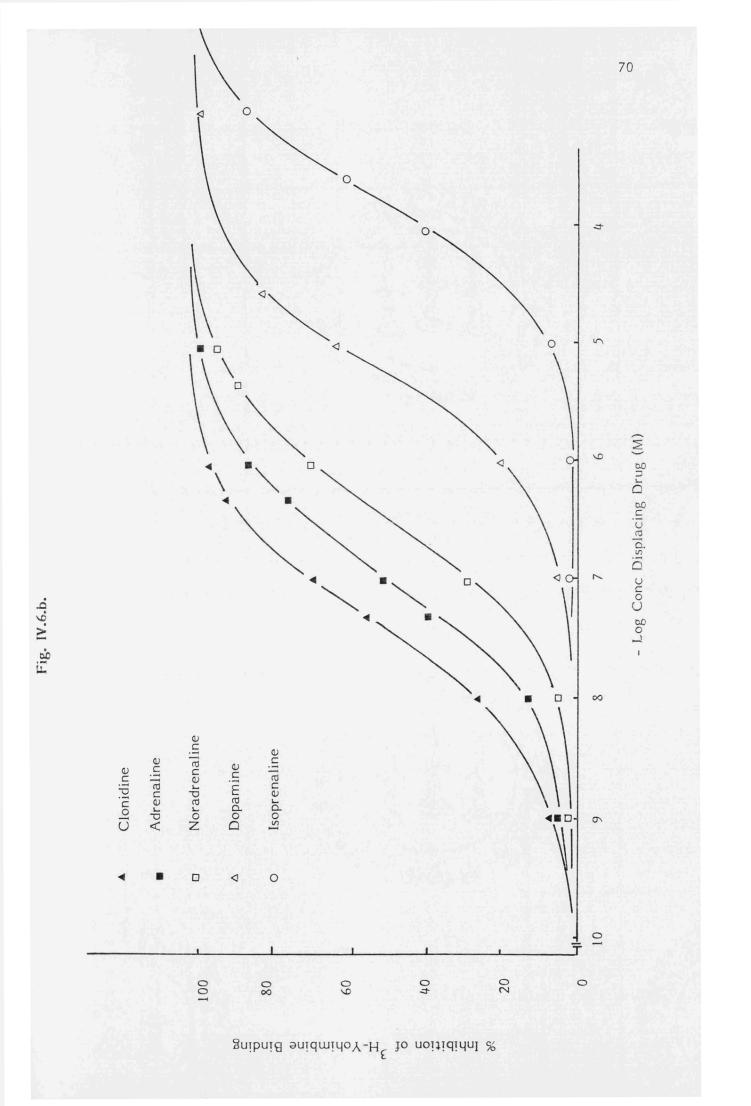
In general, the pharmacological behaviour of the ³H-yohimbine or ³H-rauwolscine binding sites on the platelet membranes appeared to be similar to that on intact platelets. The rank order of drug potencies was identical. However, the absolute inhibition constants of drugs appeared to be generally higher on intact platelets than on membranes, particularly for the agonists, such as adrenaline and noradrenaline, whose overall Ki values were at least one to two orders higher. This discrepancy might at least in part be attributed to the influence of sodium ion in the isotonic buffer (see discussion and Chapter VI).

Legend to figures IV.6.a. and b.

Displacement of specific 3 H-yohimbine binding to human platelet membranes by antagonists (IV.6.a.) and agonists (IV.6.b.). Membranes were incubated with 2nM 3 H-yohimbine in the presence of increasing concentrations of displacing drugs. Data points are means of 3 - 6 separate experiments peformed in duplicate. S.E.M. of each point is generally less than + 5%.

.





IV.3. Discussion

It is well established that catecholamines can induce in-vitro platelet aggregation, and also potentiate the actions of other aggregating agents. There is also sufficient evidence that such effect is mediated through alpha₂adrenoceptors. Inhibition of adenylate cyclase (and hence the reduction of cyclic AMP level), as well as calcium influx or mobilization have both been implicated as the biochemical mechanisms for the alpha₂-adrenoceptor mediated platelet aggregation (Jakobs et. al., 1976; Owen et. al., 1980; Feinstein, et. al., 1981). Although the pathological significance of platelet alpha₂-adrenoceptor in thromboembolic disorders has yet to be demonstrated, this receptor model does appear to be potentially useful in radioligand binding studies for examining the general molecular properties and mechanisms of alpha₂-receptors. The easier accessibility of platelets as a tissue source is one major advantage; cell homogeneity is probably another benefit, compared to other tissues.

Earlier characterisation of platelet alpha₂-adrenoceptor by radioligand binding studies was accomplished mainly with the use of non-selective antagonist ligands such as³H-DHE (Alexander et. al., 1978; Newman et. al., 1978; Hoffman et. al., 1980_c), and ³H-phentolamine (Steer et. al., 1979) as receptor probes. Results from these studies are generally in good agreement which suggests that platelet alpha-adrenoceptors are exclusively of the alpha₂-subtype (Elliot & Grahame-Smith, 1980; Hoffman et. al., 1979). However, studies of the molecular properties of alpha₂-adrenoceptors would of course be more efficiently achieved by means of direct, selective labelling with an alpha₂-selective ligand.

In this study, the newly available alpha₂-selective antagonist ligands ³H-yohimbine and ³H-rauwolscine were used to characterize alpha₂-adrenoceptors in intact human platelet and platelet membranes. While this study was in progress, a few reports were published which also examined the characterisation

of human platelet $alpha_2$ -adrenoceptors by ³H-yohimbine (Motulsky et. al., 1980; Daiguji et. al., 1981). Results from this study confirm these earlier reports which indicated that ³H-yohimbine selectively labels $alpha_2$ adrenoceptor sites on human platelets. In addition, this work also shows that the diastereoisomer of yohimbine, rauwolscine, is an equally specific and effective ligand for labelling $alpha_2$ -adrenoceptors. Both ligands were shown to label an identical and homogeneous population of sites when examined in parallel studies. In comparison with ³H-DHE, these two ligands appear to be much 'cleaner', and exhibit high affinity, lower non-specific binding and greater reproducibility and consistency (Motulsky & Insel, 1982). In fact, more recent assessments from this and other laboratories (Boon et. al., 1981; MacFarlane et. al., 1981; Motulsky et. al., 1982) have recognized that ³H-DHE appears to label more binding sites on human platelets than ³H-yohimbine or ³H-rauwolscine. However, the exact nature of these extra ³H-DHE binding sites remains unclear.

Since ³H-DHE appears to bind to only a single class of sites, and non-adrenergic agents such as serotonin and dopamine compete weakly for the ³H-DHE labelled sites (Motulsky & Insel, 1982), it seems unlikely that this ligand labels other types of receptors on platelets in addition to alpha-adrenoceptors. Nevertheless, ³H-yohimbine and ³H-rauwolscine have now proved to be more specific and preferable ligands for the studies of alpha₂-adrenoceptors.

Although the overall pharmacological profiles of the alpha₂-adrenoceptor sites on intact platelets and platelet membrames were identical, the affinities of drugs were obviously weaker on the intact platelets, particularly with respect to the agonists. Similar type of discrepancies in agonist affinity appears to occur also with the beta-receptors (Insel & Stoolman, 1978) and the alpha₁-receptors (Sladeczek et. al., 1983). There was suggestion (Insel & Stoolman, 1978; Motulsky et. al., 1980) that in intact cells, intracellular guanine nucleotides such as GTP might be accountable for the overall low

affinities of the agonists for the beta and alpha, receptors, as most of the receptors might be expected to exist in a low-affinity state in the presence of sufficiently high concentrations of GTP (see Chapters II and VI). However, in membrane preparations, in which GTP concentrations are low, a significant proportion of the receptors is induced or stabilised in the high-affinity state, thus resulting in an overall higher affinity for the agonists. In the case of alpha2-adrenoceptors, the affinities of agonists, as well as some antagonists can also be significantly reduced by monovalent ions such as Na⁺(Tsai & Lefkowitz, 1978; Michel et. al., 1980, also see Chapter VI). Thus, it is indeed not unlikely that the weaker affinities of drugs on intact platelets might in part be due to the effect of sodium ion in the incubation buffer. As for the agonists, the combined influence of the intracellular GTP and extracellular Na⁺ might at least partly account for the much lower affinities of agonists on intact cells, compared to membranes (Motulsky et. al., 1980). However, there appears to be some other possible explanations for the discrepancies in agonist affinity between intact cells and membranes, particularly when considering that such a phenomenon also occurs at alpha1-receptors at which no sufficient evidence is as yet available to indicate any significant effects of GTP or monovalent ions on agonist affinity. It has been found that, at least in the case of betareceptors, discrepancies in agonist affinity between intact cells and membranes only occurred when lipophilic but not hydrophilic radioligands were used (Staehelin et. al., 1983). It was suggested that receptor internalization could occur in intact cells in the presence of agonists. Lipophilic ligands could 'penetrate' membranes and label these internalized receptor sites. Since agonists such as adrenaline or noradrenaline, are more hydrophilic, they would be expected to fail to compete with the lipophilic ligands for such sites, thus resulting in apparantly weaker affinities in intact cells. There is no proof at the moment if this could provide a better explanation

for the discrepancies in agonist affinity at alpha₂-receptors between intact platelets and platelet membranes. Afterall, in view of the close similarity of the agonist affinity in intact platelets and platelet membranes in the presence of Na⁺ and GTP, it would seem likely that the weak affinity of agonists in intact platelets is more attributed to the presence of intracellular guanine nucleotides and extracellular Na⁺ than to receptor internalization

In summary, the alpha₂-selective antagonists yohimbine and rauwolscine are both specific ligands for studying alpha₂-adrenoceptors on human platelets. It appears that these two ligands will also be useful for studying alpha₂-adrenoceptors in other tissues. In the next chapter, studies on alpha₂-receptors in rat, rabbit and human cerebral cortical membranes, and rat and rabbit kidney membranes using these two radioligands will be described. Attention was focused on comparing the pharmacological properties of these receptors, as well as on comparing them with those of the platelet alpha₂-receptors. Chapter V

CHARACTERISATION OF ALPHA₂-ADRENOCEPTORS IN THE RAT, RABBIT AND HUMAN CEREBRAL CORTICAL MEMBRANES, AND THE RAT AND RABBIT RENAL CORTICAL MEMBRANES

.

V.1. Introduction

Alpha2-adrenoceptors occur both in the peripheral and central noradrenergic neurons (Langer, 1977; Starke, 1977). The central alpha2-autoreceptors may be present in the soma-dendritic regions and nerve terminals of noradrenergic neurons, and their activation can result in decreased impulse discharge and noradrenaline turnover (Cedarbaum & Aghajanian, 1977), as well as inhibition of transmitter release (Starke, 1981). Physiologically, central alpha2-adrenoceptors have been implicated in a variety of central or peripheral effects. For examples, alpha2-adrenoceptors have been suggested to mediate the central control of blood pressure (Berthelsen & Pettinger, 1977; McCall et al., 1983) and sedative effects (Drew et al, 1979; Timmermans et al., 1981). However, there is as yet no conclusive evidence that all the alpha2-receptors involved in these effects are located on noradrenergic neurons (Starke, 1981). Indeed, although results from binding studies with ³H-clonidine confirmed the existence of central alpha2- adrenoceptors, these results also suggested that most of the alpha2- adrenoceptors in the brain are probably located post synaptically, since neurotoxic treatment with 6-hydroxydopamine resulted in no change in the ³H-clonidine binding capacity (U'Prichard & Snyder, 1979).

The kidney receives a rich supply of sympathetic innervation. Both subtypes of alpha-adrenoceptors are present in this tissue. Alphaj-adrenoceptors appear to mediate such effects as renal arteriolar vasoconstriction (Schmitz et al., 1981), gluconeogenesis (McPherson & Summers, 1982a), as well as stimulation of sodium reabsorption (Di Bona, 1982). In contrast, the functional role of renal alpha2-adrenoceptors is still not very clear, although there have been indications that they mediate an inhibitory effect on renin release (Pettinger et al., 1976). Auto radiographic and binding studies indicated that most of the alpha2-adrenoceptors are located on the proximal tubules of the renal cortex (Young & Kuhar, 1980; McPherson & Summers, 1982b). Cerebral and renal alpha2-adrenoceptors have been characterised by radioligand binding assays. Most of the earlier studies involved the use of ³H-Clonidine (U'Prichard & Snyder, 1980; Glossmann et al., 1980; Summers, 1980). More recent studies have mainly employed the alpha2selective antagonist ligand ³H-yohimbine or ³H-rauwolscine (Yamada et al., 1980; Perry & U'Prichard, 1981; Rouot et al., 1982; Cheung et al., 1982; Schmitz et al:, 1981; Snavely & Insel, 1982).

This chapter describes studies on the characteristics of alpha2adrenoceptors in a number of tissues, including the rat, rabbit and human cerebral membranes, and the rat and rabbit renal cortical membranes, using both ³H-yohimbine and ³H-rauwolscine as the receptor probes. Attention has been focused on the comparative pharmacological behaviour of the different alpha2-adrenoceptors. Since results from earlier work showed that both ³H-yohimbine and ³H-rauwolscine appear to label identical pharmacological sites on human platelet membranes, the pharmacological behaviour of alpha2-adrenoceptors in the other tissues has been studied primarily with the use of ³H-rauwolscine. The results from these studies have revealed significant differences in pharmacological properties among alpha2-adrenoceptors. A possible heterogeneity of alpha2-adrenoceptors is discussed.

V.2 Results

V.2.1 Characteristion of alpha2-adrenoceptors in the rat cerebral and renal cortical membranes

V.2.1.1 Equilibrium binding studies with ³H-yohimbine and ³H-rauwolscine ³H-yohimbine and ³H-rauwolscine bound to rat cerebral and renal membranes in a saturable manner with high affinities and relatively low capacities. Scatchard analysis of specific binding of either ligand in both tissues suggest an interaction with a single population of non-cooperative binding sites (fig. V.1,2; table V.1), and in all cases, Hill coefficients were close to unity (data not shown). Results from parallel experiments also clearly indicated that both ligands label an identical number of sites in the rat brain or kidney, though there were differences in their affinities (table V.1). Thus, ³H-rauwolscine appeared to possess a significantly higher affinity than ³H-yohimbine in both tissues. Moreover, the affinities of both ligands were lower than those in the human platelet membranes where ³H-yohimbine and ³H-rauwolscine appeared to be of almost equal affinity (table V.1).

V.2.1.2 Kinetics studies

The specific binding of ³H-yohimbine and ³H-rauwolscine to either rat brain or rat kidney membranes at R.T. was rapid and reversible, reaching equilibrium in 5-10 mintues and 20-30 mintues respectively, and remained stable for more than 1 hour. In either tissue, significant differences in the apparent rate constants between the two ligands were observed. For example, in the rat cerebral membranes, although both ³H-yohimbine and ³H-rauwolscine appeared to exhibit similar association rate constants (K₁) at 22-25^o C (0.089 nM⁻¹ min⁻¹ and 0.076 nM⁻¹ min⁻¹ respectively), the dissociation rate constant (K₂) for ³H-yohimbine was significantly higher thanthat for ³H-rauwolscine (0.42 min⁻¹ and 0.19 min⁻¹ respectively; fig. V.3,4). Thus, the kinetically derived dissociation constant ($\frac{K2}{K1}$) for ³H-yohimbine

Ligands		Human Platelet	Human Cerebral Cortex	Rat Cerebral Cortex	Rat Renal Cortex	Rabbit Cerebral Cortex	Rabbit Renal Cortex
³ н-	Bmax (fmol/ _{mg.} p.)	148 ± 9	I	125 ± 17	124.14 ± 19.31 134.6 ± 20.1	134.6 ± 20.1	91.97 ± 5.27
yohimbine	Kd (Mn)	0.59 ± 0.08	I	4.7 ± 0.9	7.53 ± 0.09 5.97 ± 0.03	5.97 ± 0.03	11.04 ± 0.83
	Bmax (fmol/ _{mg.} p.)	144 ± 5	135 ± 6	108 ± 7	120.38 ± 10.2	134.3 ± 8.2	76.73 ± 6.32
rauwolscine	Kd (Mn)	0.55 ± 0.06 2.08 ± 0.	2.08 ± 0.3	1.8 ±0.2	2.68 ± 0.29 6.31 ± 0.48	6.31 ± 0.48	5.61 ± 0.55

Table V.I

in Chapter III. Results presented are means <u>+</u> S.E.M. of at least 3-4 separate experiments performed in duplicate or triplicate. 3 H-yohimbine and 3 H-rauwolscine binding to various tissue membranes. Data was analysed by Scatchard plots as described The maximal binding capacities (Bmax, fmol/mg. Protein) and dissociation constants (Kd, nM) for specific

•

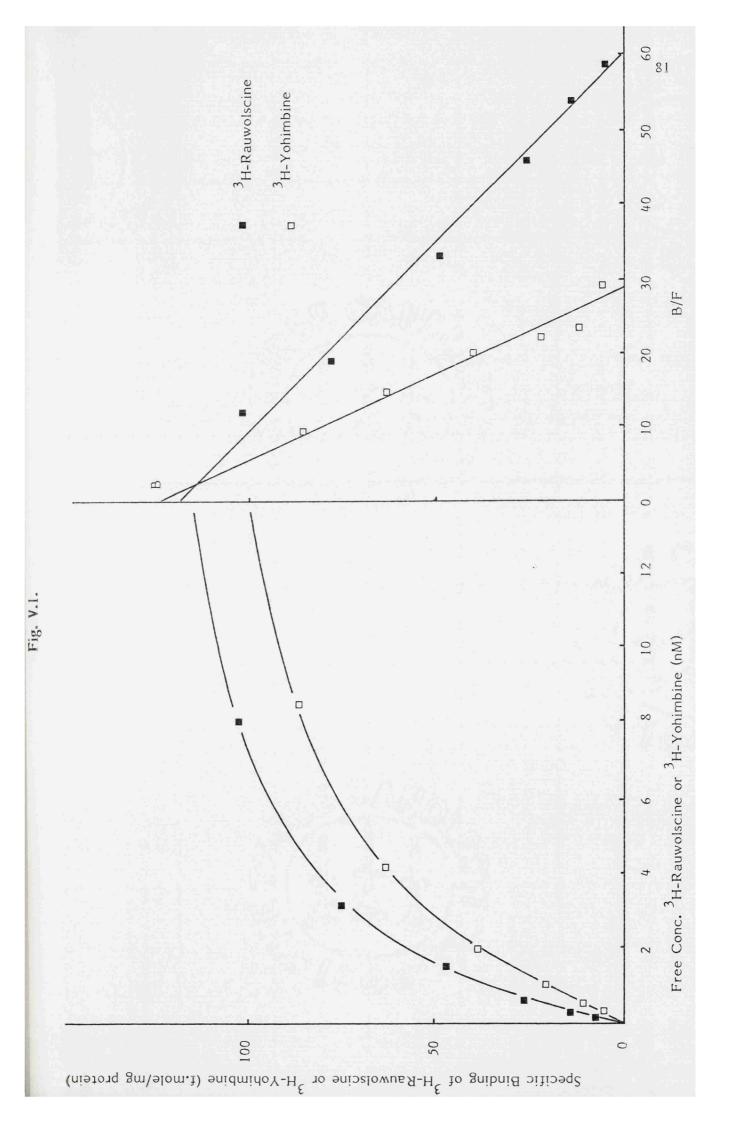
Legends to Figures V.1 and 2

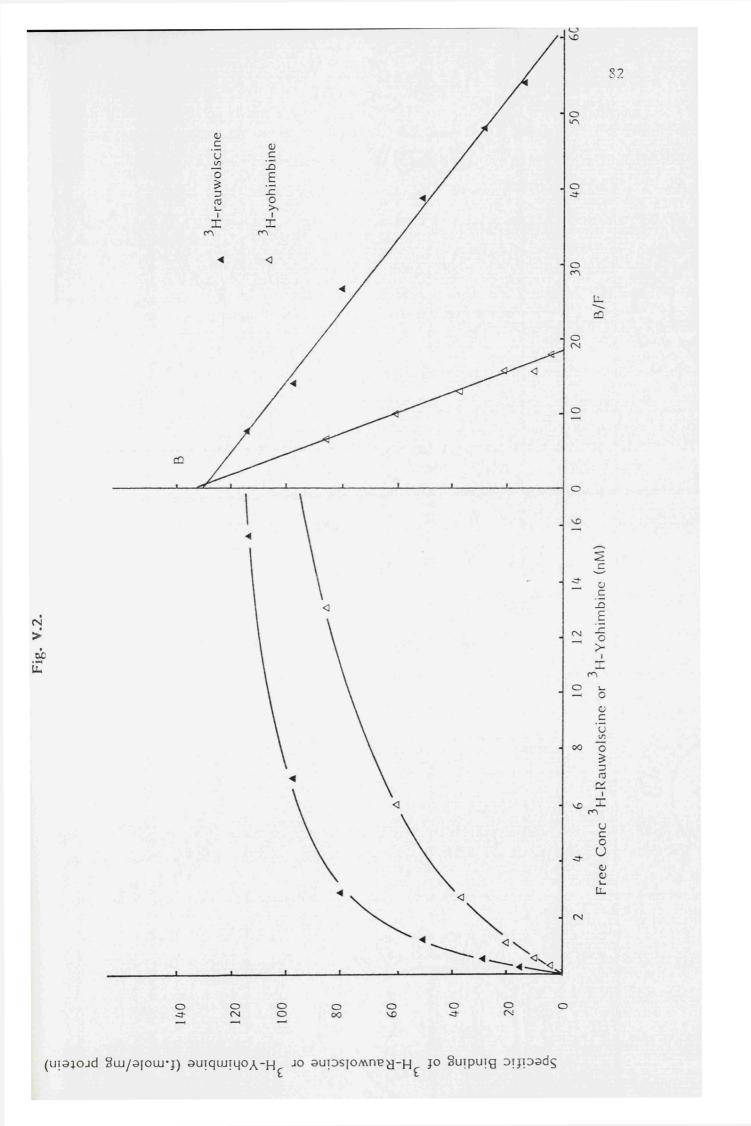
Figure V.I.

Specific binding of ³H-rauwolscine and ³H-yohimbine binding to the rat cerebral cortical membranes. Saturation experiments for both ligands (0 - 20 nM) were carried out at R.T. as described in Methods (Chapter III). Left panel: Saturation isotherms. Right panel: Scatchard plots. Data from a single parallel experiment representative of three performed in duplicate. Bmax values for ³H-rauwolscine and ³H-yohimbine are 119 f.mole/mg protein and 127 f.mole/mg protein respectively. Kd values are 2.0 nM and 4.5 nM respectively.

Figure V.2.

Specific binding of ³H-rauwolscine and ³H-yohimbine binding to rat renal cortical membranes. Saturation experiments for both ligands (0-20nM) were carried out at R.T. as described in Chapter III. Left panel: Saturation isotherms. Right panel: Scatchard plots of binding data. Data illustrated is from a single parallel experiment representative of four performed in duplicate. The Bmax values (f.mole/mg. protein) for ³H-rauwolscine and ³H-yohimbine are 132 and 136 respectively. The Kd values (nM) are 2.14 and 7.65 respectively.





Legends to figures V.3, 4, 5 and 6

Figures V.3 and 4

Kinetics of ³H-rauwolscine and ³H-yohimbine binding to rat cerebral membranes at R.T. Fig. V.3, ³H-rauwolscine binding; Fig. V.4., ³H-yohimbine binding. Left panels: association curves; the insets show the pseudo firstorder rate plots for the association reactions. Right panels: dissociation curves; the insets show the first-order rate plots for the dissociation. Data are from single experiments, which were performed twice with duplicate determinations.

Figures V.3 and 6

Kinetics of ³H-rauwolscine and ³H-yohimbine binding to rat renal cortical membranes at R.T. Fig. V.5, ³H-rauwolscine binding; Figure V.6., ³H-yohimbine binding. Left panels: association curves, with the insets showing the pseudo first-order rate plots. Right panels: dissociation curves, with the insets showing the first-order dissociation rate plots. Data illustrated are from representative experiments, which were performed twice with duplicate determinations.

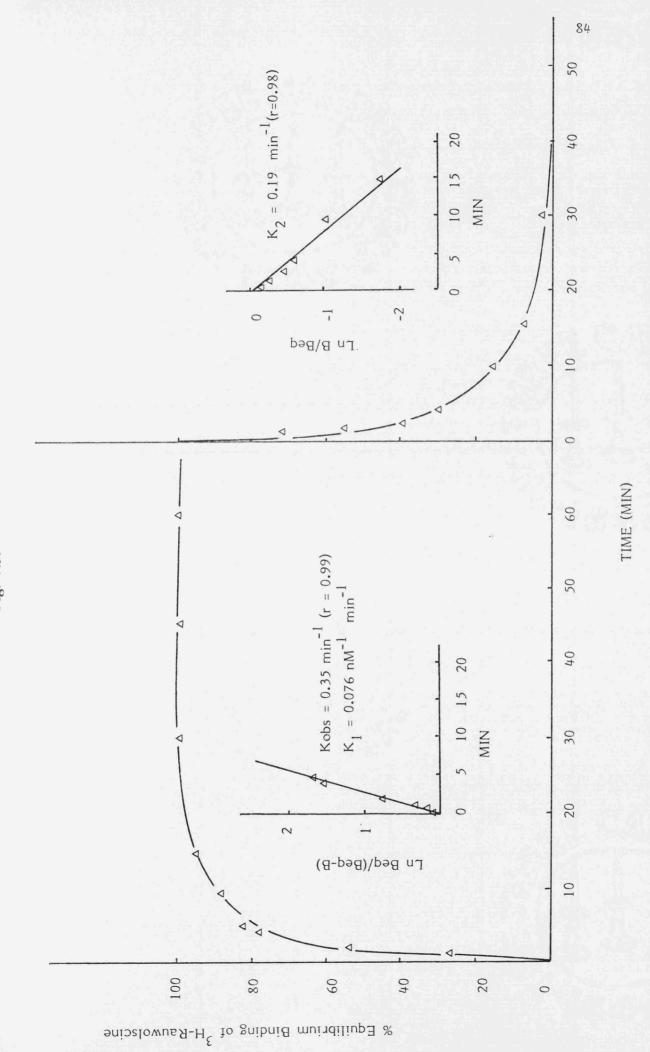


Fig. V.3.

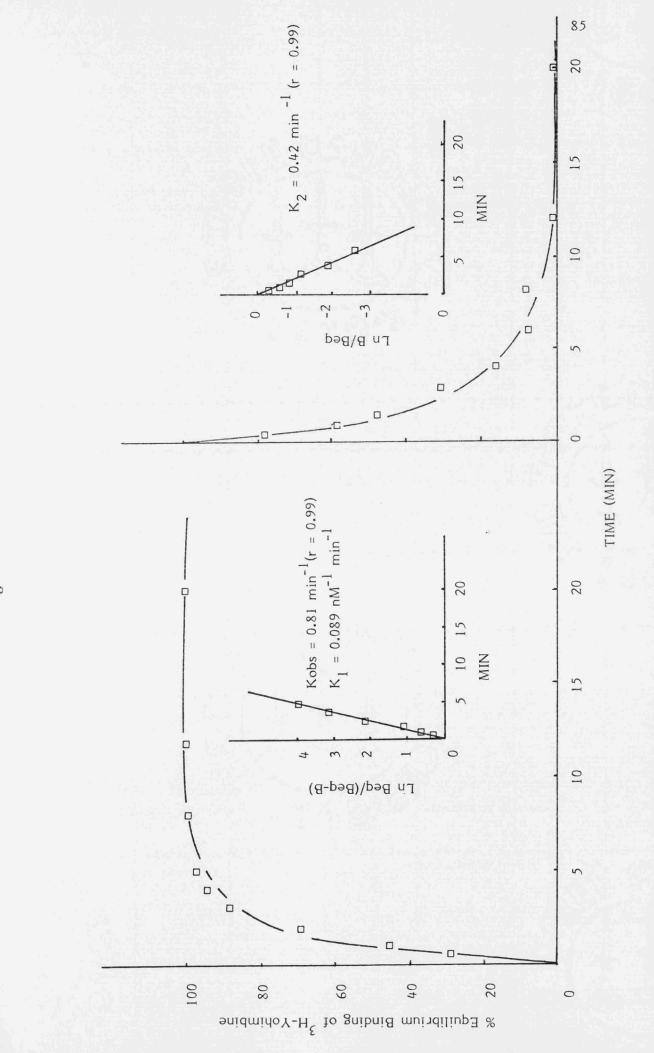


Fig. V.4.

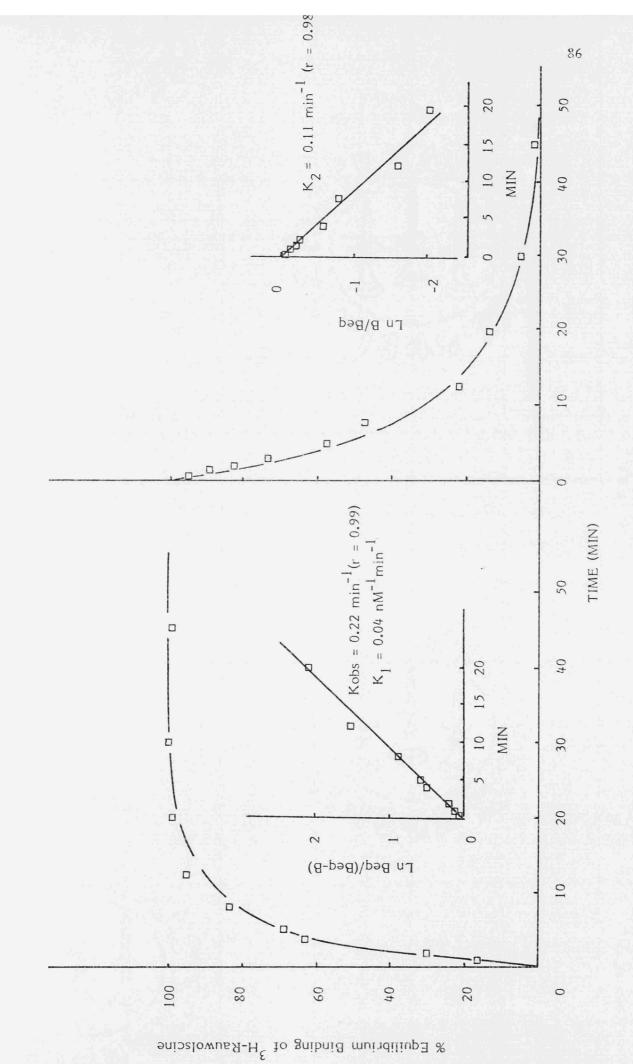
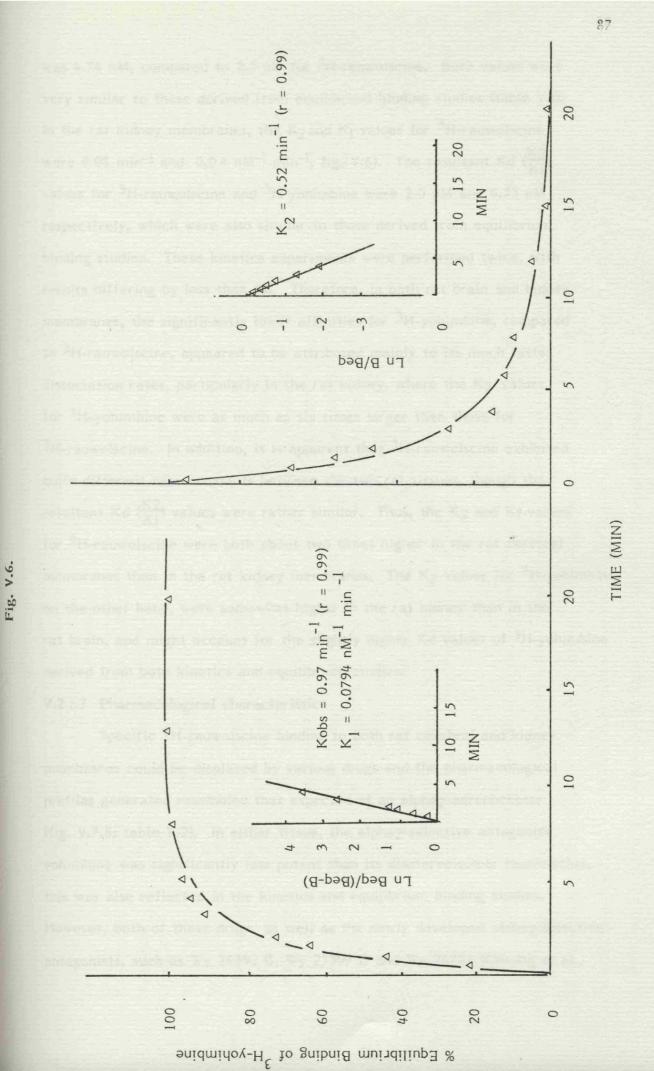


Fig. V.5.



was 4.74 nM, compared to 2.5 nM for ³H-rauwolscine. Both values were very similar to those derived from equilibrium binding studies (table V.I). In the rat kidney membranes, the K_2 and K_1 values for ³H-rauwolscine were 0.08 min⁻¹ and 0.04 nM⁻¹ min⁻¹; fig. V.6). The resultant Kd $\left(\frac{K2}{K1}\right)$ values for 3 H-rauwolscine and 3 H-yohimbine were 2.0 nM and 6.55 nM respectively, which were also similar to those derived from equilibrium binding studies. These kinetics experiments were performed twice, with results differing by less than 5%. Therefore, in both rat brain and kidney membranes, the significantly lower affinities for ³H-yohimbine, compared to ³H-rauwolscine, appeared to be attributed mainly to its much faster dissociation rates, particularly in the rat kidney, where the K2 values for ³H-yohimbine were as much as six times larger than those for ³H-rauwolscine. In addition, it is apparent that ³H-rauwolscine exhibited quite different rate constants between the two rat tissues, though the resultant Kd $\left(\frac{K2}{K1}\right)$ values were rather similar. Thus, the K₂ and K₁ values for ³H-rauwolscine were both about two times higher in the rat cerebral membranes than in the rat kidney membranes. The K_2 values for ${}^{3}H$ -yohimbine, on the other hand, were somewhat higher in the rat kidney than in the rat brain, and might account for the slightly higher Kd values of ³H-yohimbine derived from both kinetics and equilibrium studies.

V.2.1.3 Pharmacological characteristics

Specific ³H-rauwolscine binding to both rat cerebral and kidney membranes could be displaced by various drugs and the pharmacological profiles generated resembled that expected of an alpha2-adrenoceptor (fig. V.7,8; table V.2). In either tissue, the alpha2-selective antagonist yohimbine was significantly less potent than its diastereoisomer rauwolscine, this was also reflected in the kinetics and equilibrium binding studies, However, both of these drugs, as well as the newly developed alpha2-selective antagonists, such as Wy 26392 B, Wy 25309 C and Wy 26703 (Cheung et al.,

	Rat Cerebra	Cerebral Cortex			Rat Renal Cortex	
Drugs	³ H-rauwolscine	ne	³ H-yohimbine		³ H-rauwolscine	³ H-yohimbine
Rauwolscine	6.28 ± 0.15	(0.94)	6.29 ± 0.49 (0.96)	96)	3.64 ± 0.28 (1.06)	
Yohimbine	9.52 ± 0.85	(16.0)	11.25 ± 0.85 (0.	(0.98)	7.98 ± 0.7 (0.92)	_
Wy 26703	9.19 ± 2.98	(0.94)	ı		12.43 ± 1.17 (1.03)	_
Wy 26392B	5.47 ± 0.96	(1.02)	I		6.53 ± 0.03 (0.95)	_
Wy 25309C	7.37 ± 1.62	(86.0)	ı	<u> </u>	11.31 ± 0.32 (0.95)	_
Phentolamine	8.15 ± 1.16	(0.88)	7.94 ± 0.64 (0.88)	88)	13 ± 0.2 (0.93)	<u> </u>
Prazosin	157 ± 17	*(66.0)	199 <u>+</u> 36 (0.	(0.92)*	53 ± 6.14 (1.02)	_
Corynanthine	5.64 ± 25	(20.0)	797 ± 182 (1.	(1.14)	336 ± 2.22 (0.93)	_
Indoramin	973 ± 90	(66.0)	ı		1023 ± 52 (0.97)	_
Clonidine	24.6 ± 1.3	(0.78)	23.7 ± 5 (0.	(0.88)	38 ± 6.68 (0.93)	_
Adrenaline	67.6 ± 5	(0.66)	64 <u>±</u> 21 (0.	(0.59)	94 <u>+</u> 5.42 (0.75)	_
Noradrenaline	103.6 ± 10.4	(0.67)	91.5 ± 10.4 (0.57	57	74 ± 4.73 (0.73)	_
Dopamine	1796 ± 257	(0.88)	2236 ± 665 (0.	(0.82)	1.702.6±49.8 (0.80)	
Isoprenaline	16966 <u>+</u> 5792 (0.93)	(0.93)	20233± 4441 (0.90)	(06	16293 ± 1063) (0.68)	

Table V.2

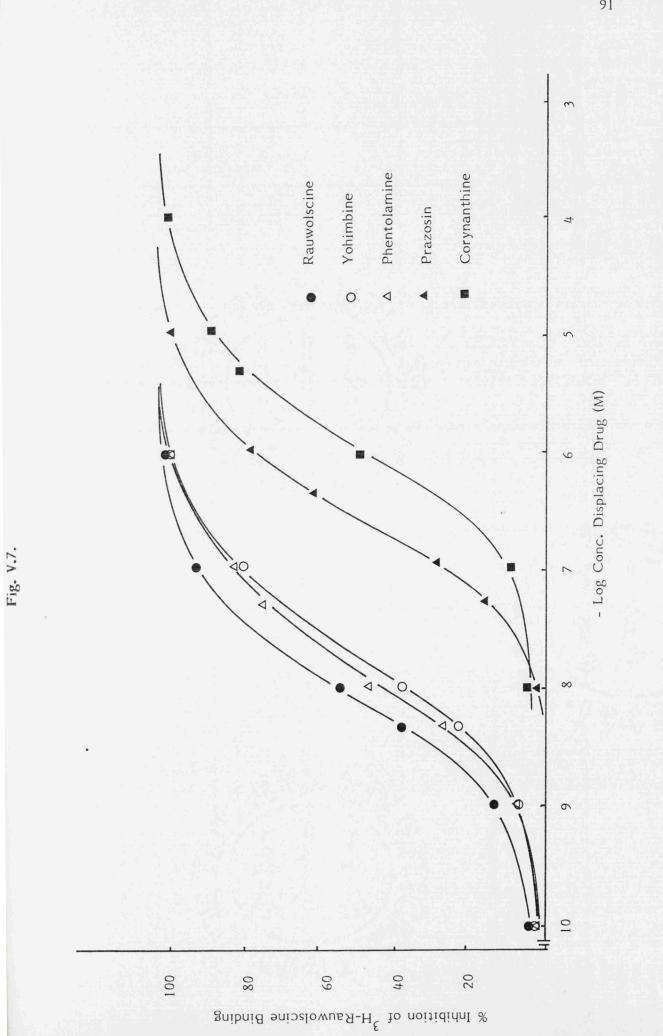
rat cerebral cortical and renal cortical membranes. Experiments were performed at 2-3 nM 3 H-rauwolscine or 3 H-yohimbine. Ki values were determined as described in Chapter III. Results presented are means ± S.E.M. of 3-6 experiments performed Inhibition constants (Ki, nM) of drugs in competition with specific ³H-rauwolscine and ³H-yohimbine binding to in duplicate. Numbers in parentheses are mean slope factors for individual displacement curves. * indicates a statistical significance (p < 0.05) in comparison with value in the rat renal cortical membranes

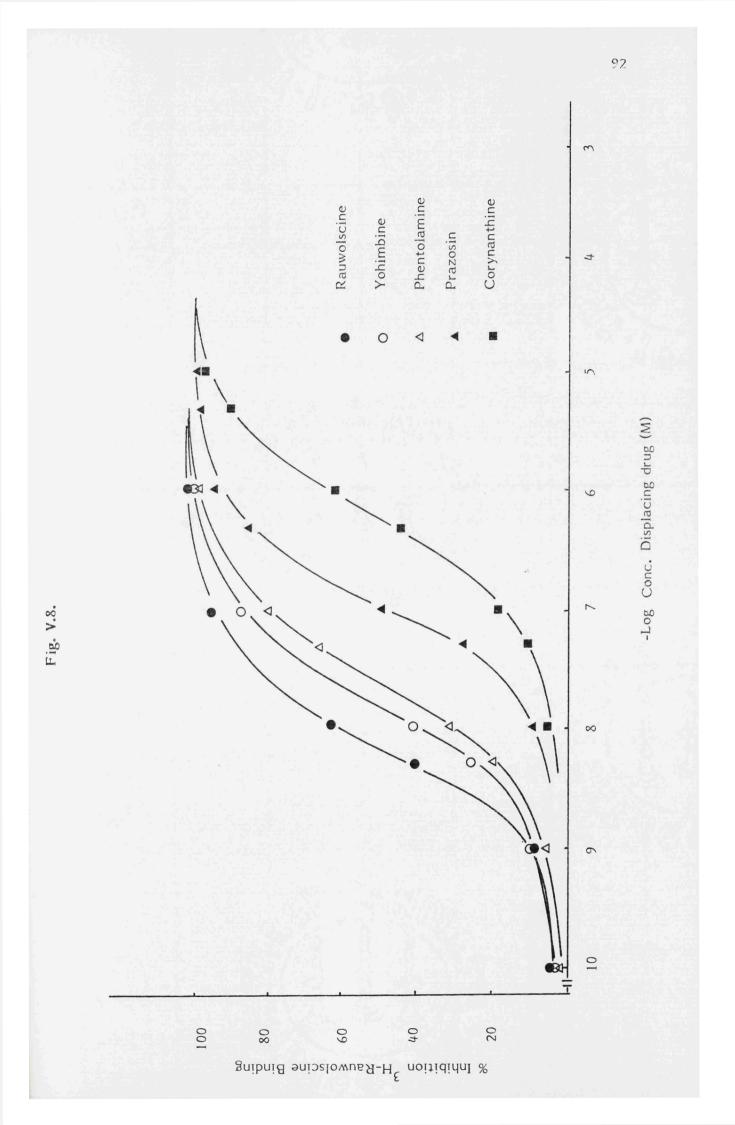
Legends to figures V.7 and 8

Figure V.7 Displacement of specific ³H-rauwolscine binding to rat cerebral membranes by antagonists.

Figure V.8 Displacement of specific ³H-rauwolscine binding to rat renal cortical membranes by antagonists.

Experiments were performed as described in Chapter III at 2-3 nM of 3 H-rauwolscine. Each data point represents the mean of 3-6 separate experiments performed in duplicate. S.E.M. is generally less than \pm 5%.





1984) were all of relatively high affinities, compared to the alphaj-selective antagonists corynanthine(Weitzell et al., 1979), prazosin (Cambridge et al., 1977) and indoramin (Algate & Waterfall, 1978). Furthermore, the agonists adrenaline, noradrenaline and clonidine were much more potent than dopamine and the beta-adrenoceptor agonist isoprenaline. The close similarity of the Ki values of the drugs in competition with ³H-rauwolscine and ³H-yohimbine binding in the rat cerebral membranes further confirms that, as previously shown in the human platelet membranes, the sites labelled by both ligands are pharmacologically identical (table V.2). It is most noticable that in the rat brain and rat kidney, prazosin displayed a high affinity relative to yohimbine or rauwolscine (fig. V.7,8; table V.2). This behaviour does not appear to be one normally expected of interaction with a 'typical' alpha2-adrenoceptor, since in the human platelet, prazosin possesses a much lower affinity (Chapter IV). It may also be worth noticing that, not only were the affinities of Wy 26703, Wy 26392B and Wy 25309C, in line with yohimbine and rauwolscine, significantly lower in the rat tissues than in the platelet, but the relative order of potency among these alpha2antagonists looked quite different between the tissues (tables V.2,4). However, it must be emphasized that all the antagonists, including prazosin, generated curves with slopes close to unity, suggesting interaction with a homogeneous class of receptor sites. The agonist competition curves, in contrast, are of relatively shallow slopes. This probably reflects binding of the agonists to different affinity states of the alpha-adrenoceptor sites labelled by the antagonists with equal affinity. (See chapter VI)

V.222 Characterisation of alpha2-adrenoceptors in the rabbit cerebral and renal membranes

V.2.2.1 Equilibrium binding studies with ³H-yohimbine and ³H-rauwolscine Specific binding of ³H-rauwolscine and ³H-yohimbine to rabbit cerebral and renal membranes was rapid, saturable, and reversible. Both

ligands bound with high and equal affinities to an identical number of sites in the rabbit brain membranes (fig.V.9; table V.1). In contrast, although 3 H-yohimbine and 3 H-rauwolscine also labelled an almost equal number of sites in the rabbit kidney membranes, the affinity of 3 H-yohimbine was significantly lower than that of 3 H-rauwolscine (fig. V.10; table V.1). Scatchard plots of both ligands to either tissue were linear, suggesting interaction with a single class of sites. It is also clear that the affinities of 3 H-yohimbine and 3 H-rauwolscine are, like those in the rat kidney and rat brain, significantly lower than those in the human platelets (table V.1).

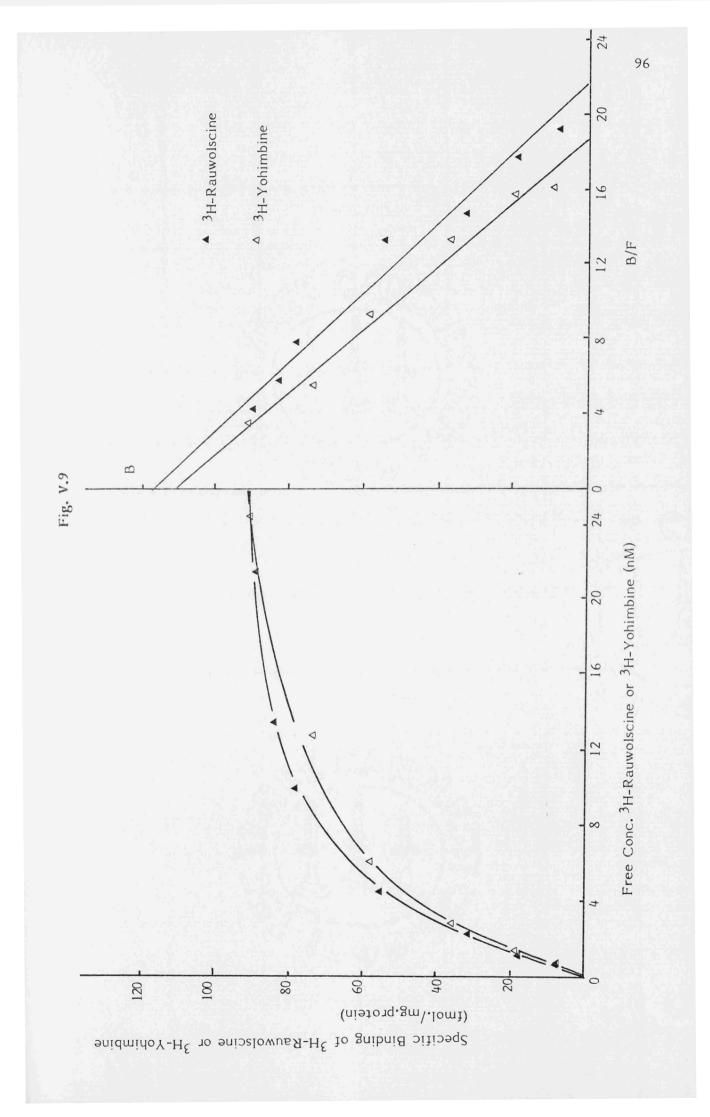
V.2.2.2 Kinetics studies

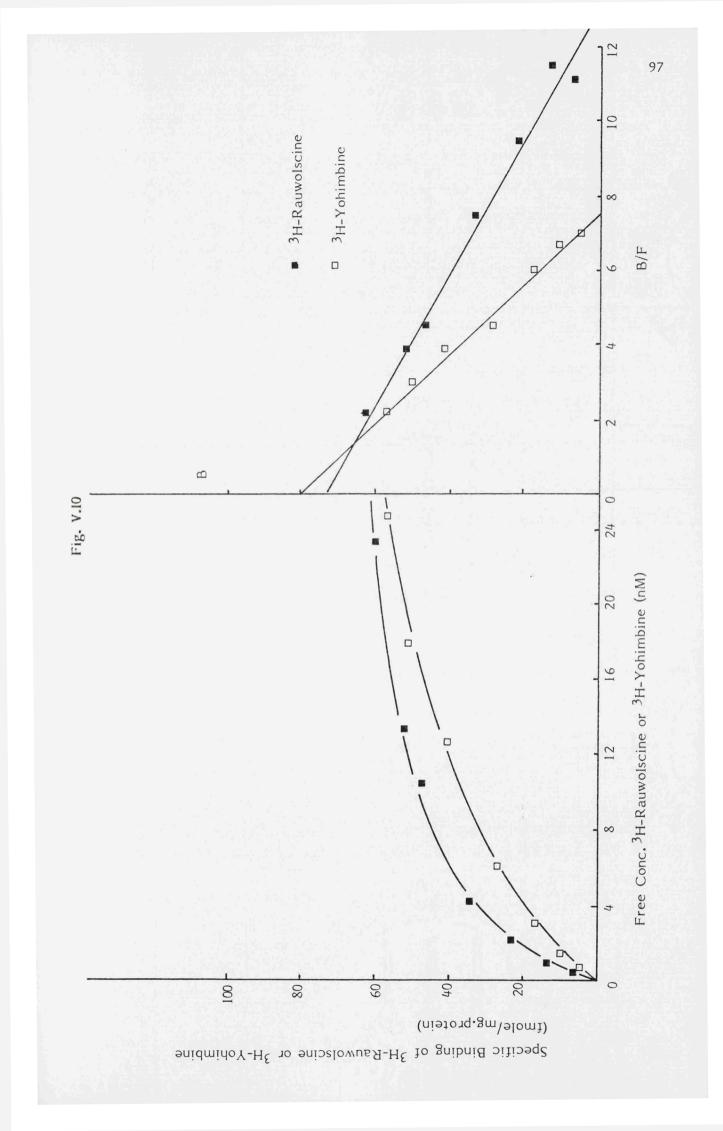
³H-yohimbine and ³H-rauwolscine bound with a fast rate to both rabbit brain and kidney membranes at 22-25° C. The binding of ³H-yohimbine to either tissue was faster, reaching equilibrium in 10-20 minutes, compared to 20-30 minutes for ³H-rauwolscine (fig. V.II,I2; fig. V.I3,I4). The association rate constants (K₁) for ³H-yohimbine and ³H-rauwolscine in the rabbit brain membranes were 0.134 nM⁻¹ min⁻¹ and 0.08 nM⁻¹ min⁻¹ respectively (fig. V.II,I2), and the respective dissociation rate constants (K2) were 0.36 min⁻¹ and 0.27 min⁻¹. Therefore, the kinetically derived dissociation constants $\frac{K2}{K1}$ for ³H-yohimbine and ³H-rauwolscine, calculated to be 2.77 nM and 3.38 nM respectively, were not only similar to each other, but in reasonably good agreement with the Kd values derived from equilibrium binding studies (table V.1). In the rabbit kidney membranes, the K₂ values for 3 H-yohimbine were significantly higher than those for ³H-rauwolscine, although the K_I values for both ligands were very similar. For instance, the K2 value for ³H-yohimbine was 0.2 min⁻¹, compared to 0.06 min⁻¹ for ³H-rauwolscine (fig. V.13,14). The K₁ values for the two ligands were 0.016 nM⁻¹ min⁻¹ and 0.02 nM⁻¹ min⁻¹ respectively. Therefore, similar to that observed in the rat kidney membranes, the significantly higher Kd values of ³H-yohimbine

Legends to figures V.9 and 10

Figure V.9 Specific binding of ³H-rauwolscine and ³H-yohimbine to rabbit cerebral cortical membranes. Experiments were performed in parallel with both ligands. Data illustrated is from one experiment representative of 3 performed in duplicate. Left panel: saturation isotherms. Right panel: Scatchard plots. Bmax values (Fmol./mg.protein) for ³H-rauwolscine and ³H-yohimbine are 118 and 110 respectively. Kd values (nM) are 5.7 and 5.98 respectively.

Figure V.10 Specific binding of ³H-rauwolscine and ³H-yohimbine to rabbit renal cortical membranes. Data illustrated is from one representative experiment performed in parallel (n = 3). Left panel: Saturation isotherms. Right panel: Scatchard plots. Bmax values (fmol./mg.protein) for ³H-rauwolscine and ³H-yohimbine are 68 and 81.5 respectively. Kd values (nM) are 4.78 and 10.88 respectively.





Legends to figures V.II, 12, 13 and 14

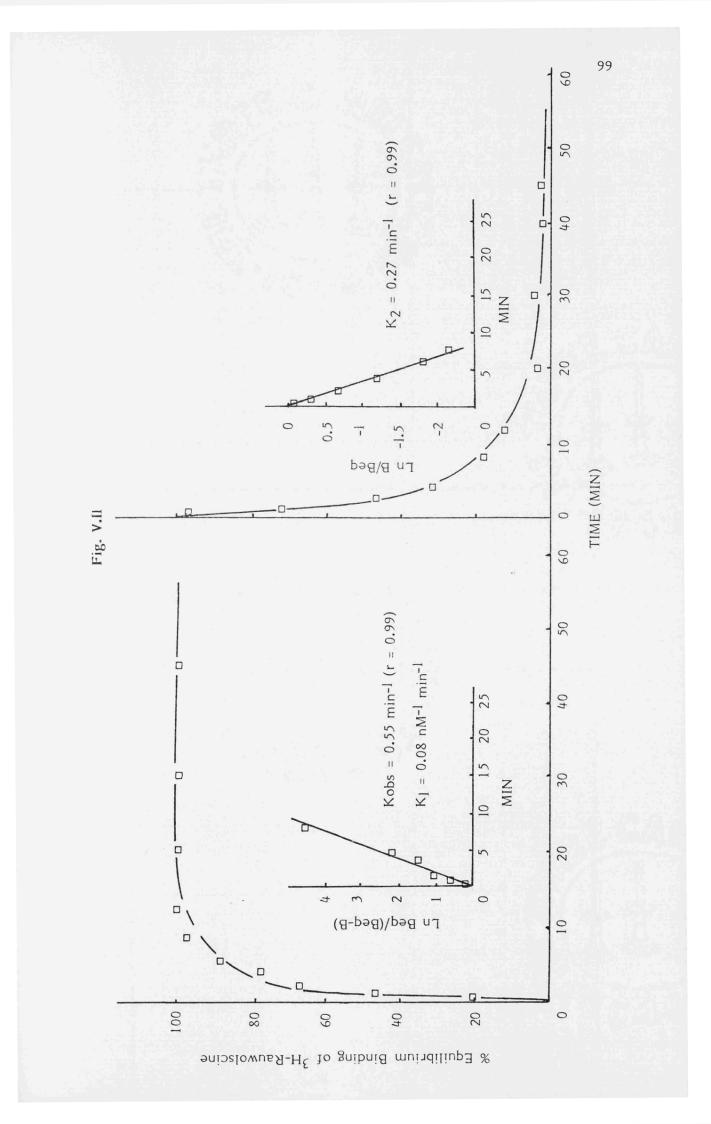
Figure V.II Kinetics of ³H-rauwolscine binding to rabbit cerebral membranes at R.T.

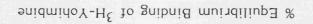
Figure V.12 Kinetics of ³H-yohimbine binding to rabbit cerebral membranes at R.T.

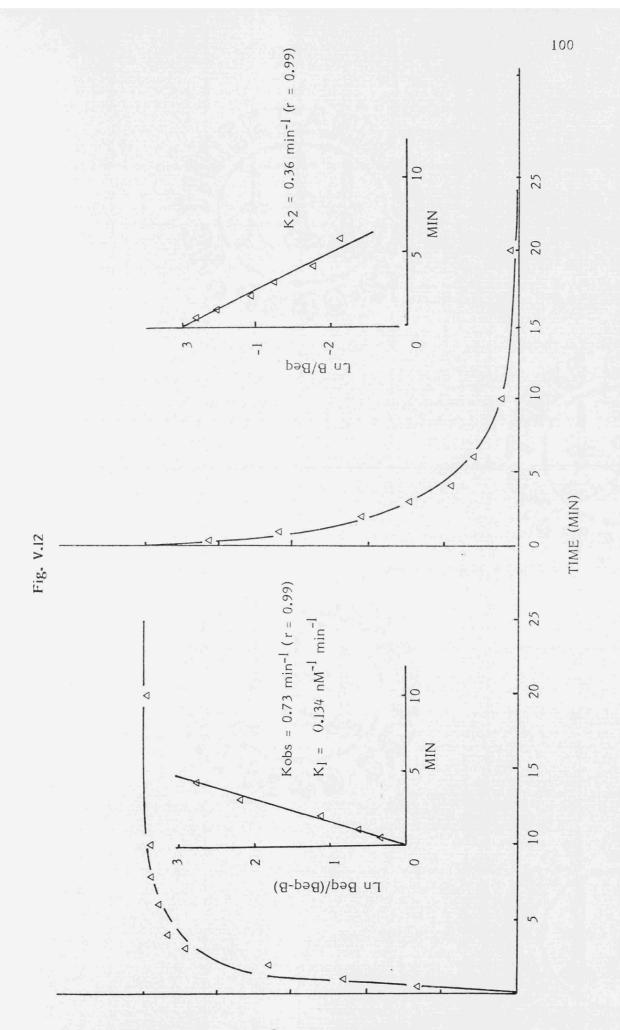
Figure V.13 Kinetics of ³H-rauwolscine binding to rabbit renal cortical membranes at R.T.

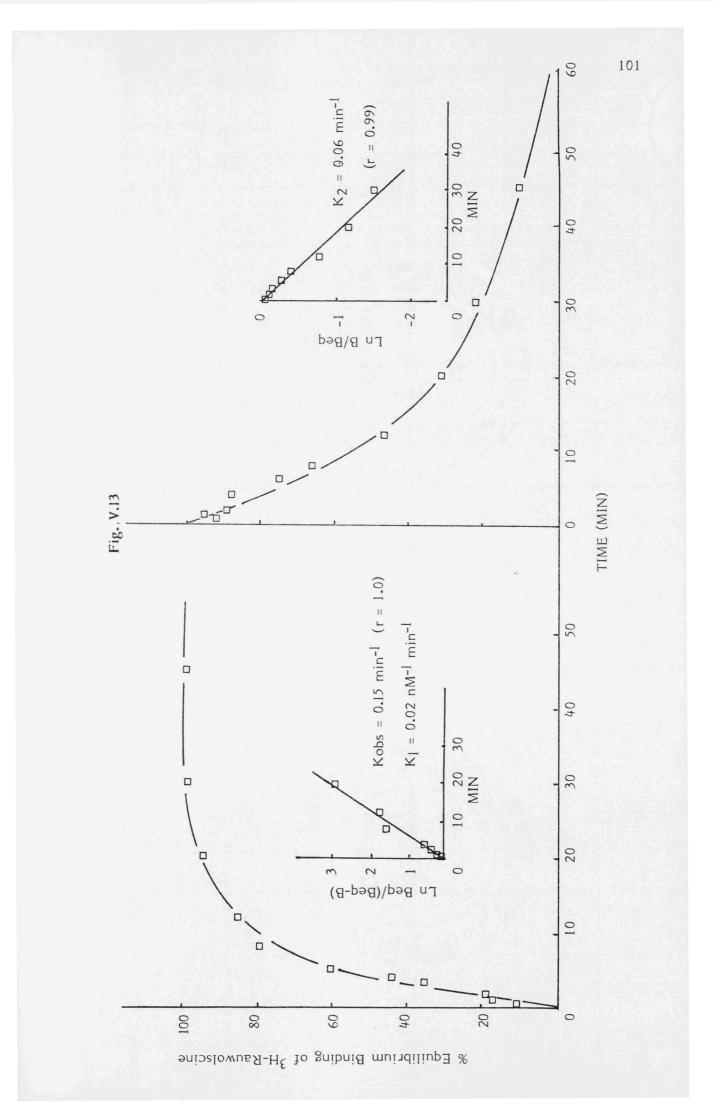
Figure V.14 Kinetics of ³H-yohimbine binding to rabbit renal cortical membranes at R.T.

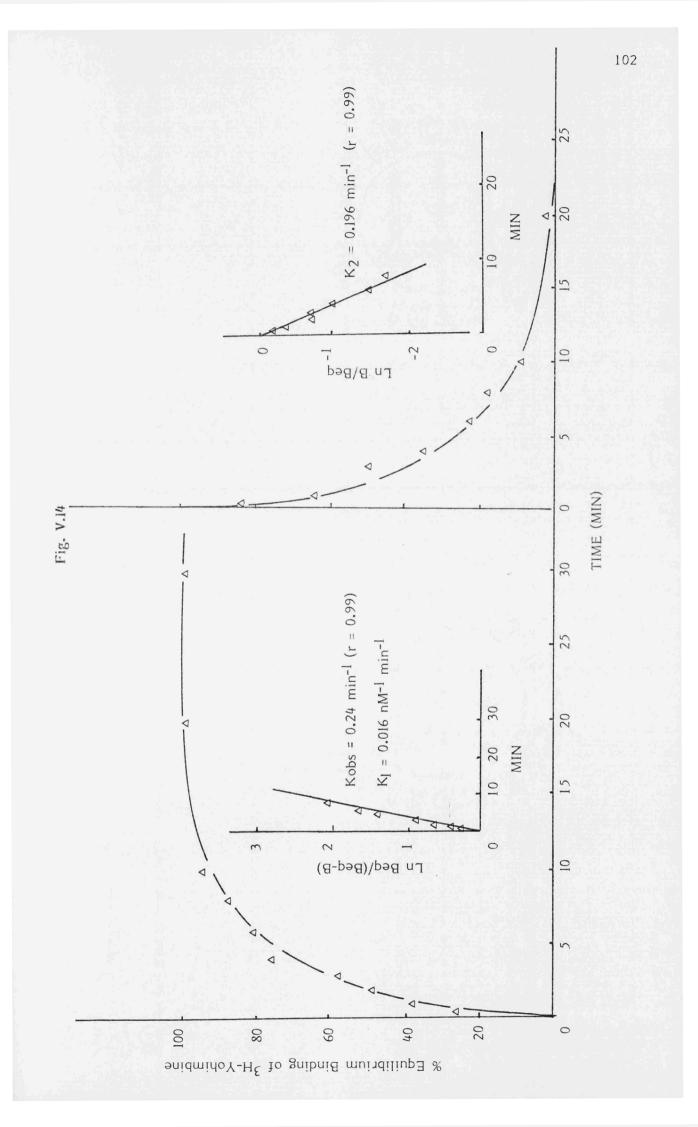
Experiments were performed as described in Chapter III. Data presented are from one of two separate experiments performed in duplicate, with results differing by less than 5%. The left panels illustrate the association curves, with the pseudo first-order rate plots shown in the insets. The right panels illustrate the dissociation curves, with the first-order dissociation rate plots shown in the insets.











obtained from kinetics and equilibrium studies, compared to those of ³H-rauwolscine, appeared to be mainly attributed to a faster dissociation of ^{3}H -yohimbine from the receptor sites. Where the affinities of the two ligands appeared similar, such as in the rabbit cerebral membranes, the respective association and dissociation rate constants were quite similar to each other. It is very apparent that 3 H-rauwolscine displayed very different binding kinetics between the rabbit brain and kidney membranes, with the K2 and K1 values about four times higher in the brain than in the kidney. The resultant Kd $\left(\frac{K2}{K1}\right)$ values though, were very similar between the tissues. The rate constants for ³H-yohimbine were also different between the two tissues. Although the dissociation rate constant (K₂) was somewhat higher in the brain than in the kidney (0.36 min⁻¹, compared to 0.2 min⁻¹), the significant difference in the resultant Kd $\left(\frac{K2}{K1}\right)$ values between the tissues appeared to be mainly attributed to the more marked difference in the association rate constant (K1) (e.g. 0.134 nM⁻¹ min⁻¹ in the rabbit brain, compared to only 0.016 nM^{-1} min⁻¹ in the rabbit kidney).

V.2.2.3 Pharmacological Characteristics

The inhibition constants of various drugs in competition with 3 Hrauwolscine binding to rabbit cerebral and kidney membranes are listed in table V.3. It is evident that the pharmacological profiles generated for both tissues resembled that expected of an alpha2-adrenoceptor. Thus, in rabbit cerebral membranes, the alpha2-selective antagonists rauwolscine and yohimbine appeared equipotent (fig. V.15, table V.3), and both were significantly more potent than the alpha1-selective antagonists, corynanthine, indoramin and prazosin in that order. In the rabbit kidney membranes, rauwolscine was significantly more potent than yohimbine (fig. V.16, table V.3), an affinity difference which was also noted in the kinetics and equilibrium binding studies. The order of potency for other antagonists was phentolamine > prazosin > corynanthine \Rightarrow indoramin. The displacement curves for all the antagonists in either tissue had slopes close to unity,

	Rabbit Cerebral Cortex			Rabbit Renal Cortex		
Rauwolscine	6.3	<u>+</u> 1.1	(1.0)	4.55	<u>+</u> 0.74	(1.1)
Yohimbine	6.9	<u>+</u> 0 . 98	(1.02) *	14.51	<u>+</u> 1.5	(1.03)+
Phentolamine	11.3	<u>+</u> 0.5	(1.03)	13	<u>+</u> 0.64	(1.0)
Prazosin	4555	<u>+</u> 591	(1.03)*	303	<u>+</u> 11.3	(1.05)
Corynanthine	375	<u>+</u> 29	(1.0)	456	<u>+</u> 46	(0.97)
Indoramin	1662	<u>+</u> 45	(1.05)*	501	<u>+</u> 29.6	(1.04)
Clonidine	24	<u>+</u> 2.5	(0.68)*	70	<u>+</u> 7.3	(0.76)
Adrenaline	42.5	<u>+</u> 3.8	(0.67)*	254	<u>+</u> 16	(0.72)
Noradrenaline	59	<u>+</u> 5.3	(0.73)*	193	<u>+</u> 10.7	(0.68)
Dopamine	2633	<u>+</u> 275	(0.76)*	22833	<u>+</u> 1241	(0.64)
Isoprenaline	17717	<u>+</u> 1341	(0.65)*	61000	<u>+</u> 4501	(0.61)

Table V.3

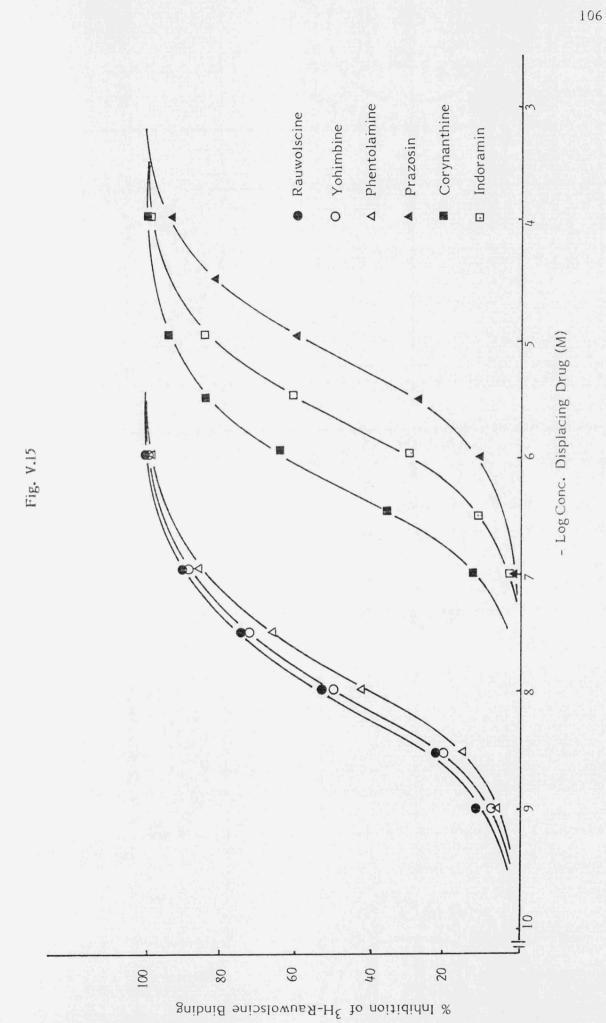
Inhibition constants (Ki, nM) of drugs in competition with specific 3 H-rauwolscine binding to rabbit cerebral and renal cortical membranes. Experiments were performed at 2-4 nM 3 H-rauwolscine. Values presented are means \pm S.E.M. of 3-6 separate experiments performed in duplicate. Numbers in parentheses are mean slope factors of individual displacement curves. * Indicates a statistical significance (p < 0.05) in comparison with corresponding value determined in the rabbit renal cortical membranes. + indicates a statistical significant (p < 0.05) in comparison with Ki value for rauwolscine in the rabbit renal cortical membranes.

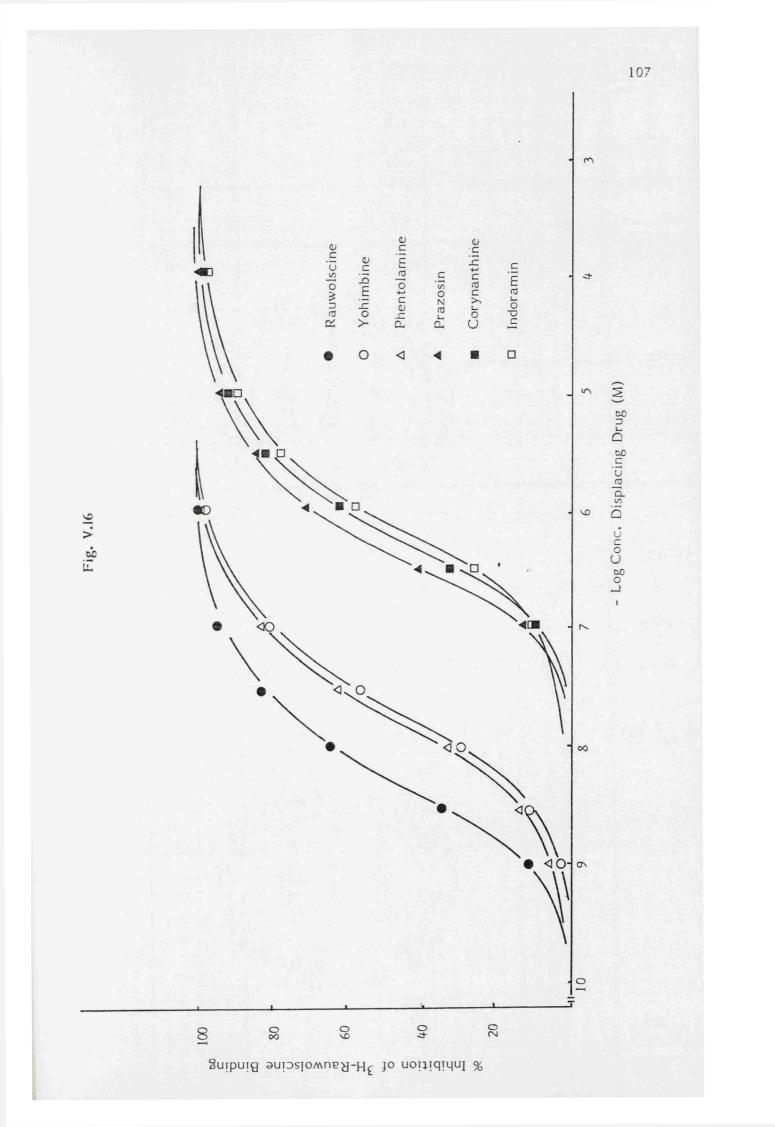
Legends to figures V.15 and 16

Figure V.15 Displacement of specific ³H-rauwolscine binding to rabbit, cerebral membranes by antagonists.

Figure V.16 Displacement of specific ³H-rauwolscine binding to rabbit renal cortical membranes by antagonists.

Experiments were performed at 2-4 nM 3 H-rauwolscine. Data points are means of at least 3-6 separate experiments performed in duplicate. S.E.M. for each point is generally less than \pm 5%.





indicating interaction with a homogeneous class of sites or states (table V.3). However, it is very obvious that the affinity of the alphaj-antagonist prazosin was markedly higher in the rabbit kidney than in the rabbit brain (fig. V.15,16, table V.3). In addition, the less alphaj-selective antagonist, indoramin, also exhibited an affinity significantly higher in the rabbit kidney than in the rabbit brain.

In both of the rabbit tissues, the orders of agonist affinities were similar: clonidine > adrenaline > noradrenaline >> dopamine > isoprenaline (table V.3). The slopes of the competition curves of adrenaline, noradrenaline and clonidine were shallow, compared to those of the antagonists, suggesting agonist interaction with the receptor sites in heterogeneous affinity states (Hoffman et al., 1980₂).

V.2.3 Characterisation of alpha2-adrenoceptors in the human cerebral cortical membranes

V.2.3.1 Equilibrium and kinetics studies with ³H-rauwolscine

³H-rauwolscine exhibited high affinity binding to human cerebral cortical membranes in a saturable manner. The maximal binding capacity (Bmax), determined from Scatchard analysis of equilibrium binding data, was 135 ± 6 f.mol./mg. protein (n = 3). The dissociation constant (Kd) of ³H-rauwolscine was 2.08 \pm 0.3 nM. The Hill Coefficient (nH) was 1.06 \pm 0.03, indicating that binding was to a single population of non-interacting sites.

Kinetics studies showed that specific ³H-rauwolscine and ³H-yohimbine binding to human brain membranes was moderately fast at 22-25° C, reaching equilibrium in about 40-45 minutes. Compared to ³H-rauwolscine, the association and dissociation rate constants for ³H-yohimbine were both slightly higher. For example, the K₁ and K₂ values for ³H-yohimbine were 0.028 nM⁻¹ min⁻¹ and 0.06 min⁻¹ respectively, compared to 0.018 nM⁻¹ min⁻¹ and 0.04 min⁻¹ for ³H-rauwolscine. Similar experiments were

performed twice, each generating results that did not differ by more than 5%. The kinetically derived Kd values were 2.22 nM and 2.14 nM respectively for ³H-rauwolscine and ³H-yohimbine. These figures were in close agreement with the Kd or Ki values derived from saturation and competition experiments, which also indicated that the two ligands appeared to be of almost equal affinity in the human brain (table V.1,4). In comparison with the hūman platelet membranes, the K₂ values for both ligands were only slightly higher in the human brain membranes (e.g. 0.03 min⁻¹ vs. 0.04 min⁻¹ for ³H-rauwolscine, and 0.04 vs. 0.06 min⁻¹ for ³H-yohimbine). The K₁ values though, were about 2-3 times lower for both ligands in the brain than in the platelets (e.g. 0.018 nM⁻¹ min⁻¹ vs. 0.073 nM⁻¹ min⁻¹ for ³H-rauwolscine, and 0.028 nM⁻¹ min⁻¹ vs. 0.054 nM⁻¹ min⁻¹ for ³H-yohimbine). Thus, the significantly lower Kd values for ³H-rauwolscine and ³H-yohimbine in the human platelet membranes, compared to human brain membranes, appeared to be mainly due to the higher association rate constants.

V.2.3.2 Pharmacological Characteristics

The pharmacological behaviour of the sites labelled by ³H-rauwolscine in the human cerebral membranes was similar to that in the human platelet membranes. Table V.4 shows the Ki values of drugs in competition with specific ³H-rauwolscine binding to the human cerebral membranes. The rank order of antagonist potency was clearly typical of one expected at an alpha2-adrenoceptor: rauwolscine \approx yohimbine > phentolamine > corynanthine > prazosin. The competition curves of the antagonists all generated slopes close to unity, suggesting interaction with a single class of binding sites. The agonists clonidine, adrenaline and noradrenaline, in that order of affinity, were all much more potent than dopamine or isoprenaline, but the slopes of their competition curves were quite shallow, possibly suggesting interaction with the labelled sites in heterogeneous affinity states.

The sites labelled by ³H-rauwolscine in the human brain possessed

	Human Platelet			Human Cerebral Cortex		
Rauwolscine	1.11	<u>+</u> 0.12	(1.00)	2.96	<u>+</u> 0.02	(0.98)
Yohimbine	0.85	<u>+</u> 0.09	(0.98)	3.3	<u>+</u> 0.3	(0.97)
Wy 26703	2.16	<u>+</u> 0.31	(0.96)		-	
Wy 26309B	2.44	<u>+</u> 0.26	(0.97)		-	
Wy 25309C	3.38	<u>+</u> 0.45	(0.93)		-	
Phentolamine	4.01	<u>+</u> 1.23	(0.99)	2.25	<u>+</u> 3	(0.91)
Corynanthine	192	<u>+</u> 23	(1.15)	503	<u>+</u> 7.1	(1.03)
Prazosin	760	<u>+</u> 194	(1.00)	887	<u>+</u> 31	(0.93)
Indoramin	1062	<u>+</u> 28	(0.99)	2990	<u>+</u> 275	(1.02)
Clonidine	8.89	<u>+</u> 0.48	(0.83)	37.8	<u>+</u> 10.7	(0.68)
Adrenaline	28.9	<u>+</u> 4.9	(0.79)	69	<u>+</u> 10.7	(0.68)
Noradrenaline	88.7	<u>+</u> 13	(0.91)	245	<u>+</u> 45	(0.59)
Dopamine	977	<u>+</u> 143	(0.89)	3969	<u>+</u> 593	(0.81)
Isoprenaline	36850	<u>+</u> 10450	(0.86)	34353	<u>+</u> 13288	(0.72)

Table V.4

Inhibition constants (Ki, nM) of drugs in competition with specific 3 H-rauwolscine binding to human platelet and human cerebral cortical membranes. Experiments were performed at about 2nM 3 H-rauwolscine. Values presented are means \pm S.E.M. of 3-4 separate experiments performed in duplicate. Numbers in parentheses are mean slope factors of individual displacement curves.

a pharmacological behaviour very similar to that observed in the human platelet. In either tissue, yohimbine appeared equipotent with rauwolscine Moreover, the relative order of potency between corynanthine and prazosin was similar in these two tissues, with corynanthine being more potent than prazosin. In contrast, prazosin was relatively more potent than corynanthine in the rat brain, rat kidney, as well as the rabbit kidney. Indeed, the significantly higher affinity of prazosin in these tissues, compared to the human tissues, seemed to be accompanied with a weaker potency of yohimbine relative to its diastereoisomer, rauwolscine. Finally, it is noteworthy that the absolute affinities displayed by most of the drugs examined were significantly lower in the human brain, compared to the human platelet, although the rank order of drug potency was the same in both tissues (table V.4)

V.3 Discussion

The results presented in these studies have provided further evidence that both ³H-yohimbine and ³H-rauwolscine can label an identical population of non-interacting sites when studied in parallel within a given tissue. Indeed, these two ligands have now been widely employed to study alpha2adrenoceptors. In view of the reservations that are required concerning the use of ³H-agonists (Hoffman et al.,1980_b), it would seem appropriate that both ³H-yohimbine and ³H-rauwolscine should be considered the ligands of choice at the moment for probing alpha2-adrenoceptors.

The recent suggestion by Perry and U'Prichard (1981) that ³H-rauwolscine may be a more suitable ligand than ³H-yohimbine for central alpha2-adrenoceptors receives no support in the present studies. It has been clearly demonstrated that, when these ligands were studied in parallel in either the human platelet or rat cerebral membranes, they labelled an equal quantity of receptor sites exhibiting identical pharmacological properties. Nevertheless, a significant affinity difference between the two ligands does exist ⁵in some, though not all the tissues. Thus, ³H-rauwolscine and ³H-yohimbine labelled sites with amost equal affinity in the human platelets, human brain, as well as the rabbit brain, but ³H-rauwolscine exhibited an affinity 2-3 times higher than that of ³H-yohimbine in the rat brain, rat kidney and rabbit kidney. Moreover, both ³H-yohimbine and ³H-rauwolscine displayed affinities significantly higher in the human platelet membranes than in the other membranes examined.

The affinity differences between these ligands within a given tissue or between different tissues are also reflected in the differences of their binding kinetics. As described earlier, in tissues such as the rat brain, rat kidney and rabbit kidney, where ³H-yohimbine displayed a higher affinity than ³H-rauwolscine, the dissociation rate constants for ³H-yohimbine were significantly higher than those for ³H-rauwolscine. Yet, differences in the rate constants for either ligand also occurred between tissues within a given species, or across different species. For example, the K₂ values for both ³H-yohimbine and ³H-rauwolscine were significantly higher in the rat and rabbit tissues than in the human tissues, the differences being more pronounced with ³H-yohimbine. Characteristically, the K₂ and K₁ values for ³H-rauwolscine were also significantly higher in the rat and rabbit brain membranes, compared to the kidney membranes of respective species. In addition, the markedly lower association rate constant for ³H-yohimbine in the rabbit kidney, compared to the rabbit brain, appeared accountable for its significantly higher Kd value. These inter- and intra-tissue differences in the binding kinetics, as well as the dissociation constants of ³H-yohimbine and/or ³H-rauwolscine have provided evidence for molecular differences among the alpha₂-adrenoceptors.

Further support for the possible heterogeneity of alpha2-adrenoceptors comes from the results of the drug displacement studies. It appears certain that, in each of the tissues examined, the sites labelled by ³H-yohimbine and ³H-rauwolscine satisfy the criteria for classification as alpha2-adrenoceptors. However, the pharmacological profiles generated can be broadly, but distinctly, divided into two main categories. One category is chiefly characterised by the equal potency/affinity of the alpha2-diastereoisomers, yohimbine and rauwolscine, as well as the low overall affinities for the alphaj-antagonists, such as prazosin and indoramin. The alpha2-adrenoceptors in the human platelets and human brain can be described by this pharmacological behaviour. The other category is characterised by the differential affinities of the yohimbine and rauwolscine diastereoisomers, which apparently is also associated with higher affinity and/or relative potency for the alphaj-antagonists, of which prazosin is a distinctive example. The alpha2-adrenoceptors of the rat brain and rat kidney are best described by this pharmacological pattern. Apparently, although the overall pharmacological profiles for

the alpha2-receptors in the human platelet and human brain are similar, the absolute affinities of a number of drugs, including yohimbine and rauwolscine are significantly lower in the brain than in the platelet (table V.4). At least some differences in the binding kinetics of ³H-yohimbine and ³H-rauwolscine are observed between the two tissues. However, when the ratios of the Ki values of individual drugs relative to that of rauwolscine are compared between the two receptors, they exhibit a rather remarkable similarity. Hence, the apparent differences in the absolute affinities of the drugs between these tissues might partly be attributed to some differences in the membrane environment or constraint, though minor molecular differences in the receptor proteins cannot yet be ruled out. The alpha2-adrenoceptor in the rat brain resembles that in the rat kidney not only in the rank order of drug potency, but also in the absolute affinities of the drugs. A more apparent difference may perhaps be the relatively higher affinity of prazosin in the rat kidney than in the rat brain.

Species difference becomes obvious when the pharmacological behaviour of the alpha2-adrenoceptors is compared between the human and rat tissues (tables V.2,4). A more pronounced contrast may be observed between the human platelet and the rat kidney (fig. V.17). It is clear that the affinities of rauwolscine and yohimbine in the rat kidney are not only different, but they are both significantly lower than those in the human platelet. In addition, the affinities of phentolamine, clonidine and adrenaline are all significantly lower in the rat kidney than in the human platelet. The strongest contrast, however, is the more significantly reduced affinity of yohimbine, and the markedly higher potency of prazosin in the rat kidney, compared to the human platelet. Although the affinity of indoramin (also \neg 1- selective) in the rat kidney is not apparently different from that in the human platelet membranes, it is quite significantly higher than that in the human brain membranes. Moreover, when the potency of indoramin relative to rauwolscine is compared between the platelet membranes and

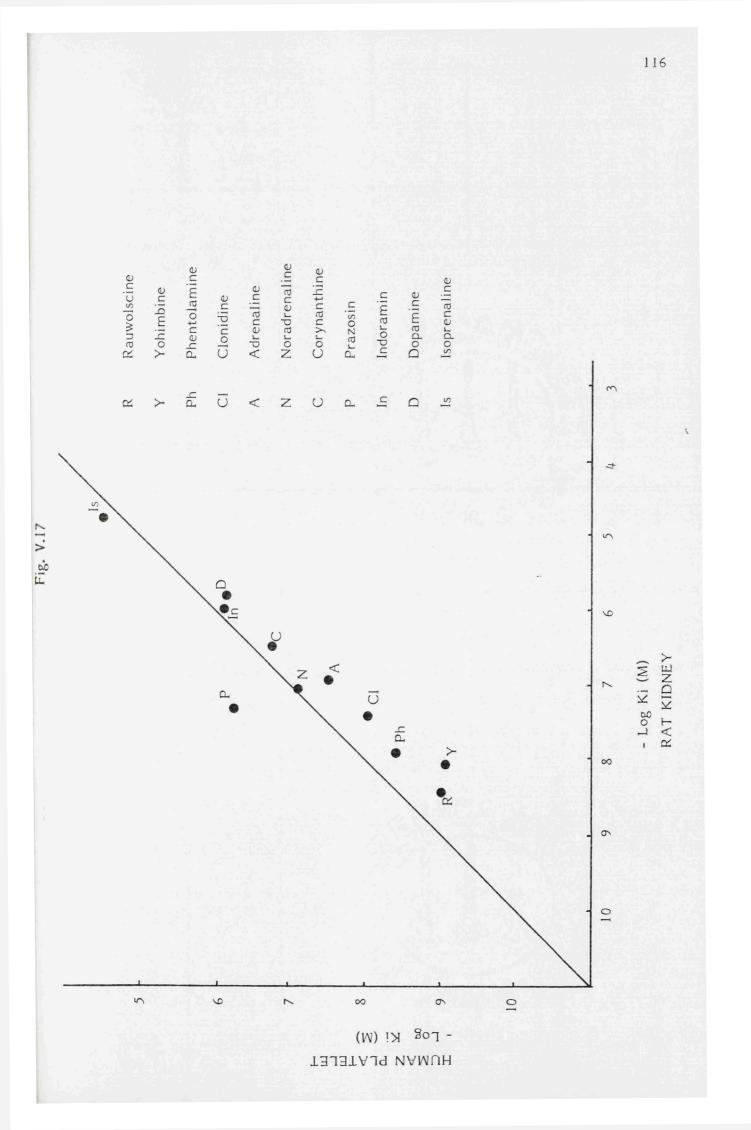
Legends to figures V.17 and 18

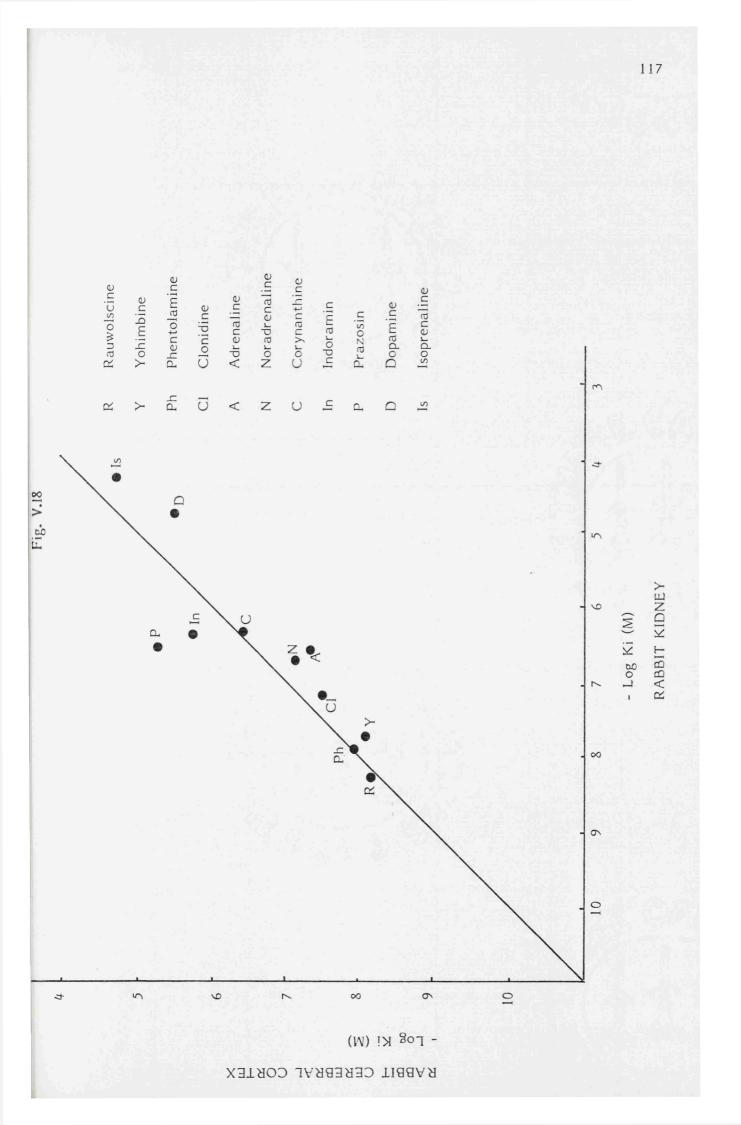
Figure V.17 Comparison of drug affinities at alpha2-adrenoceptors in the human platelet and rat kidney membranes.

Figure V.18 Comparison of drug affinities at alpha2-adrenoceptors in rabbit cerebral and renal cortical membranes.

Ki values, determined from competition with ³H-rauwolscine binding, were compared between tissues. The line drawn through the intersection of the X- and Y-axes is the line of identity, on which drug affinities are equal between tissues.

•1





and the rat kidney membranes, it is clear that this alphaj-antagonist has, like prazosin, a significantly higher relative potency in the rat kidney than in the human platelet.

However, the pharmacological differences observed do not appear to be merely a reflection of species difference. Evidence for inter-tissue differences of alpha2-adrenoceptors within a given species has come not only from the equilibrium and kinetics studies with³H-rauwolscine and ³H-yohimbine, but also from competition studies (tables V.1,3). The comparison of drug affinities between the rabbit brain and kidney is described in fig. V.18. Yohimbine, clonidine, adrenaline and noradrenaline are significantly weaker in the rabbit kidney than in the rabbit brain. In contrast, the alpha1-antagonists prazosin and indoramin are significantly more potent in the rabbit kidney than in rabbit brain. Therefore, pharmacologically, the alpha2-adrenoceptor in the rabbit kidney appears more similar to that in the rat brain or rat kidney. The rabbit cerebral alpha2-adrenoceptor, on the other hand, more resembles that in the human platelet or human brain.

The possibility that ³H-rauwolscine might label in part the alpha₁adrenoceptors in the rat brain, rat kidney or rabbit kidney where prazosin displayed a low overall inhibition constant can be ruled out, as almost all the antagonists, including prazosin, generated competition curves with slope close to unity in all the tissues examined. As shown in table V.5, either rauwolscine or yohimbine exhibited very low affinity for alpha₁adrenoceptor sites labelled with high affinity by ³H-prazosin in the rat cerebral and renal membranes. Considering the low concentrations (2-4 nM) of ³H-rauwolscine or ³H-yohimbine used for the drug displacement studies with alpha₂-adrenoceptors it is hardly possible that any alpha₁-adrenoceptors could have been labelled. Furthermore, the overall pharmacological profiles of the ³H-rauwolscine labelled sites in all the tissues also indicate that it is most unlikely (at least under the conditions of the present assays) that there is any significant interaction of the labelled ligands with other receptor systems.

) 		
	Rat Cerebral Cortex	Rat Renal Cortex		
	Ki (nM)	Ki (nM)		
Prazosin	0.31 <u>+</u> 0.03 (0.97)	0.265 <u>+</u> 0.005 (0.97)		
Indoramin	25 <u>+</u> 3.3 (1.02)	35.7 <u>+</u> 4.45 (1.0)		
Corynanthine	262.5 <u>+</u> 30.6 (1.01)	293 <u>+</u> 41 (1.08)		
Rauwolscine	2147 <u>+</u> 53.8 (0.98)	2343 <u>+</u> 63.2 (0.99)		
Yohimbine	1015 <u>+</u> 69.5 (1.03)	1123 <u>+</u> 50.3 (1.07)		

Table V.5

Inhibition constants of adrenergic agents in competition with specific ³H-prazosin binding to rat cerebral and kidney membranes. ³H-prazosin binding assays were performed at 1-1.5 nM under conditions similar to those with ³H-rauwolscine or ³H-yohimbine binding assays described in Methods in Chapter III. Equilibrium binding constant (Kd) and binding capacity (Bmax) of ³H-prazosin were 0.21 nM and 110 fmol/mg.P. respectively in cerebral membranes and 0.29 nM and 35.2 fmol/mg.P. respectively in kidney membranes (N=2). The ki values presented above are means ± S.E.M. of three separate experiments performed in duplicate. Numbers in parentheses are mean slope factors of individual displacement curves.

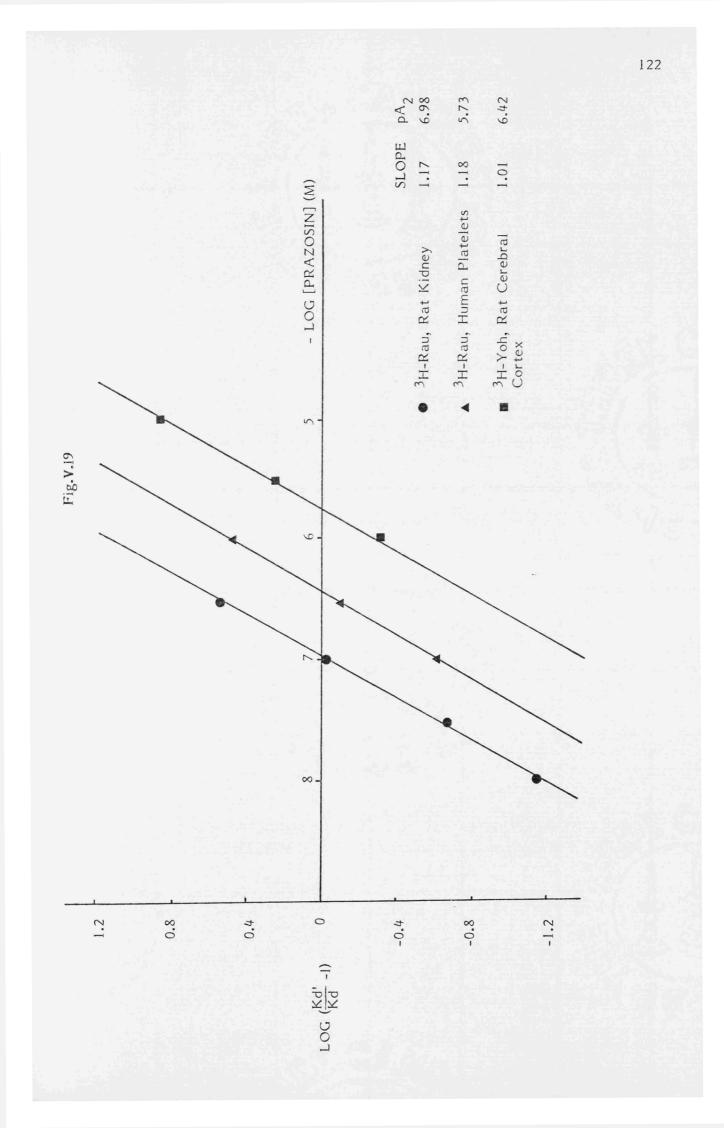
The affinity of agonists and antagonists for alpha2-adrenoceptors appeared to be modulated by mono- and divalent cations (Daiguiji et al., 1981; Barnett et al., 1982; Cheung et al., 1982; also see chapter VI). In this connection, it was found in the present studies that 10 mM Mg^{\pm} could increase the IC50 values of prazosin (in competition for ³H-rauwolscine binding) by 1.5-2 fold in both human platelets and rat kidney. In contrast, Na^{\pm} at 100 mM reduced the IC50 values of prazosin by 2-3 fold in both of these tissues. However, it is highly unlikely that such concentrations of residual cations could be present in the membrane preparations, considering that membranes prepared in these studies were extensively washed in the presence of EDTA. Furthermore, as the small effects of cations of prazosin also appear quantitatively similar between tissues, it is clear that the marked inter-tissue difference in prazosin affinity for sites labelled by ³H-rauwolscine cannot be adequately accounted for by quantitative difference in ionic effects.

Recently, it was demonstrated that the neuromuscular blocker gallamine can allosterically modulate the binding of agonists and antagonists to muscarinic receptors in some, though not all tissues (Stockton et al., 1983). Similarly, allosteric regulation of the binding of nimodipine (Ca⁺⁺-antagonist) by d-cis-diltiazem to Ca⁺⁺-channel binding sites in some tissues has also been described. (Ferry & Glossmann, 1983_a). Therefore, it seems necessary to ascertain if the higher affinity of prazosin for ³H-rauwolscine or ³H-yohimbine labelled sites in certain tissues might actually reflect an allosteric interaction rather than a true receptor heterogeneity. In this connection, it was found that increasing concentrations of prazosin merely increased the Kd values of ³H-rauwolscine or ³H-yohimbine in the human platelet, rat brain or rat kidney without altering the Bmax. As illustrated in fig. V.19, the Schild plot for each tissue is linear, with a slope not distant from the theoretical value of 1.0, thus suggesting a competitive nature of the antagonism between

Legend to figure V.19

Figure V.19 Competitive interaction of prazosin with $alpha_2$ -adrenoceptors. Saturation experiments were carried out with ³H-rauwolscine or ³H-yohimbine as described in Chapter III, in the absence and presence of different concentrations of prazosin. Schild plots were constructed by plotting log($\frac{Kd'}{Kd}$ -1) against log concentration of prazosin, where Kd' and Kd are dissociation constants of the radioligand in the presence and absence of prazosin respectively. The X-intercepts yield the pA₂ values, which are negative logarithms of the dissociation constants for prazosin.

Data shown are from single experiments, which were repeated twice, and had almost identical results.



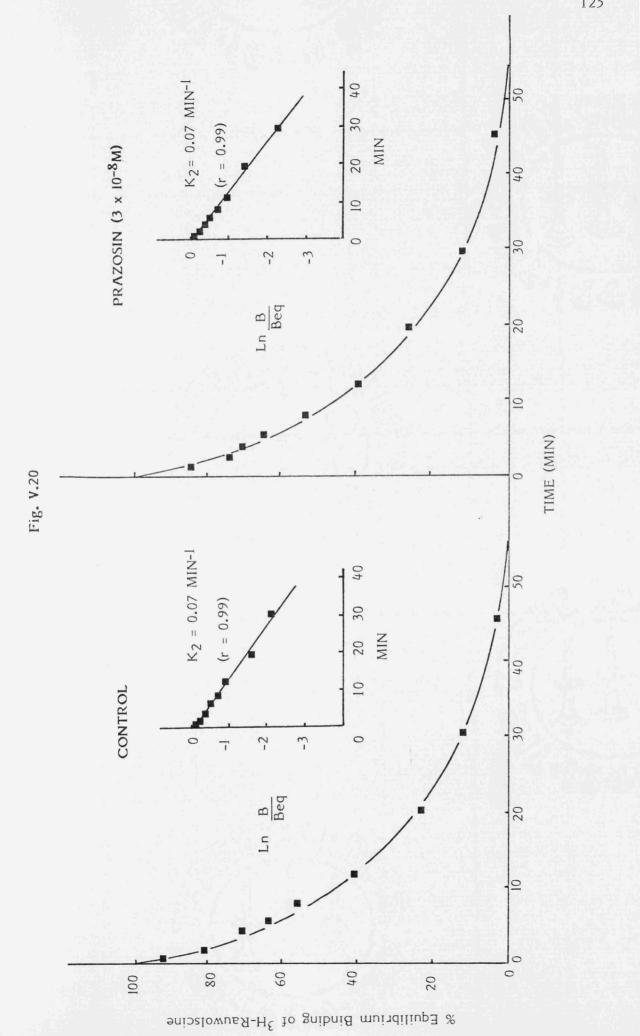
prazosin and the labelled ligand. Moreover, it is obvious that the affinities of prazosin (apparent pA2 values) are distinctly different between the three tissues, and in good agreement with the results from simple competition Non-competitive allosteric interaction between prazosin experiments. and ³H-rauwolscine or ³H-yohimbine might also be reflected in the alteration of the binding kinetics of the labelled ligand, particularly the dissociation kinetics. However, although prazosin at 30 nM reduced specific ³H-rauwolscine binding by about 30% in the rat kidney, it had no influence on the dissociation rate of the labelled ligand; the K₂ values for ³H-rauwolscine in the absence and presence of prazosin were virtually identical (fig V.20). Similar experiment was performed with ³H-yohimbine in the human platelet membranes. Again, prazosin did not alter the dissociation rate constant for ³H-yohimbine in this tissue (data not shown). Therefore, these results show that the inter-tissue differences in the affinity of prazosin at alpha2-adrenoceptor sites is also not likely attributed to allosteric interaction with the labelled ligand.

In conclusion, the data presented in these studies is compatible with a suggestion that at least two different molecular types of alpha2adrenoceptors may be existing in mammalian tissues. Alpha2-adrenoceptors with relatively high affinity for the alpha1-antagonists but reduced affinity for the alpha2-antagonists, and in particular, capable of distinguishing the yohimbine and rauwolscine diastereoisomers, appear to possess 'mixed alpha1/alpha2' properties, though the overall pharmacological behaviour is still predominantly of the alpha2-subtype. Indeed, a similar alpha2adrenoceptor with such strange behaviour has also been described recently in the rat lung (Latifpour et al., 1982). Furthermore, it may be of relevance to note that in classical pharmacological studies, at least three different categories of postsynaptic alpha-adrenoceptors have been suggested being present among tissues of the rat, on the basis of different affinities for yohimbine, and clonidine (presumably, one category is the classical alpha]-

Legend to figure V.20

Figure V.20 Effect of prazosin on the dissociation of ³H-rauwolscine binding to rat kidney membranes.

Rat renal cortical membranes were incubated to equilibrium at R.T. with approximately 3 nM ³H-rauwolscine in the absence and presence of 30 nM prazosin. Specific binding of ³H-rauwolscine was reduced by about 30% in the presence of 30 nM prazosin. Dissociation experiment was performed and data analysed as described in Chapter III. Insets: first-order rate plots for the dissociation of binding. Data shown is from one of two separate experiments which yielded identical results.



adrenoceptor), (Ruffolo et al., 1980, 1981). With a similar approach, three distinct classes of post synaptic alpha-adrenoceptors have also been identified among the aortas of different species (Ruffolo et al., 1982). In these studies, alpha-adrenoceptors exhibiting partial alpha₁/alpha₂ properties were described.

Of course, evidence for possible heterogeneity of alpha2-adrenoceptors presented in this chapter is primarily based on binding assays with membranous receptors. Differences in tissue/membrane properties and membrane constraint might contribute to apparent differences in drug affinity between tissues. It is therefore of importance also to assess the pharmacological properties of soluble alpha2-adrenoceptors, and to ascertain if the pharmacological differences observed between the membranous receptors are still present between the solubilized receptors which are presumed to be relatively free of membrane constraint and in a more 'uniform' environment. The characterisation of soluble alpha2-adrenoceptors from the human platelet, rat kidney, and rabbit kidney will be described in chapter VIII. Chapter VI

AGONIST/ANTAGONIST INTERACTIONS WITH ALPHA₂-ADRENOCEPTORS: EFFECTS OF GUANINE NUCLEOTIDES, MONO- AND DIVALENT CATIONS, AND TEMPERATURE

VI.1. Introduction

Over the recent years, a great deal of work has focused on examining the molecular characteristics of drug-receptor interactions. Consequently, considerably progress has now been made toward understanding the molecular mechanisms by which catecholamine receptor occupancy is coupled to adenylate cyclase.

There is substantial evidence indicating that alpha2-receptors are coupled negatively to adenylate cyclase (Jakobs et. al., 1976; Aktories et. al., 1979; Sabol & Nirenberg, 1979, It is also clear that receptor coupled enzyme stimulation and inhibition both have an obligatory requirement for guanine nucleotides, such as GTP or Gpp (NH)p. The modulatory action of these guanine nucleotides is mediated through a regulatory protein (N-protein) (Rodbell, 1980; Limbird, 1981), which serves as a 'transducer' between the receptor and the enzyme. However, it appears that separate N-proteins (Ns and Ni respectively) are involved in the enzyme stimulation and inhibition. Evidence in support of this has come from various indications, including for examples, the differential quantitative requirement for GTP for receptor-coupled enzyme stimulation and inhibition, the differential responses of enzyme modulation to high and low ${\rm Mn}^{++}$ concentrations, and the differential changes in the enzyme's affinity for Mg^{++} upon stimulation by N_s -protein and inhibition by stable GTP analogs (see Chapter II). Results from genetic manipulation and reconstitution studies have provided further support for the existence of separate N-proteins.

The S49 lymphoma cell is a specially cultured cell line amenable to genetic dissection of the hormone-sensitive adenylate cyclase system. The 'wild-type' clone can synthesize high concentrations of C'AMP in response to beta-agonists or prostaglandins. The cyc-clone is a genetic variant of the wild-type. These cells apparently contain intact beta-receptors and catalytic sub-units of the cyclase system, but the N_s-proteins are at least partially missing. However, enzyme stimulation by hormones, fluoride, and guanine nucleotides could be reconstituted upon mixing the N_s -protein extract from wild-type lymphoma cells with cyc⁻cells membranes (Howlett et. al., 1979). Interestingly, in the cyc⁻cells, adenylate cyclase stimulated by the diterpene forskolin, or reconstituted by purified preactivated N_s -protein could still be inhibited by stable GTP analogs (Jakobs et. al., 1983_b). Likewise, platelet adenylate cyclase activity stimulated by purified pre-activated N_s -protein could also be inhibited by adrenaline and stable GTP analogs. The observed inhibition was found to be non-competitive with respect to the N_s -protein concentrations, clearly suggesting that it was mediated through a separate N-protein interacting non-competitively with N_s -protein at the catalytic sub-unit of the enzyme system (Jakobs et. al., 1983_a).

At present, there are still some controversies over the exact step-wise mechanisms of receptor-adenylate cyclase coupling. Various models have been developed on the basis of experimental findings in different systems. For example, in the 'floating receptor' model (Jacobs & Cuatrecasas, 1976) it is considered that the receptor and adenylate cyclase are independently mobile entities in membranes. The coupling between the receptor and the enzyme appears to be a two-step process and is facilitated by an initial hormone-receptor interaction. The activated hormone-receptor-enzyme (H-R-E*) complex will accumulate and exhibit higher affinity for the hormone than the uncomplexed receptor. In the 'collision coupling' model (Levitzki, 1978; Tolkovsky & Levitzki, 1978) on the other hand, it is postulated that the enzyme modulation process is a bimolecular reaction and occurs as a result of a brief collision of the freely floating hormone-bound receptor with the enzyme. Recently, an 'allozyme' model has also been developed (Macfarlane, 1982), which is a modified version of the 'collision coupling' model. The 'allozyme' model assumes that the catalytic unit of the enzyme is activated by a brief collision with an hormone-occupied 'activating' receptor and remains active until it is deactivated either by another brief

collision with an agonist-occupied 'deactivating' receptor or with a postulated basal deactivating system. In essence, this 'allozyme' model considers the receptor as a catalyst which modifies the state of adenylate cyclase, and is subject to regulation by an external stimulus, the agonist. Both of the 'collision coupling' and 'allozyme' models assume that there is no accumulation of the H-R-E, H-R-E*, or R-E complexes. The contact between the hormone-receptor (H-R) complex with the enzyme (E) is thought to be so brief that the hormone-receptor binding characteristic is not altered (ie hormone binding to the receptor is of a homogeneous affinity).

There is probably no single model that can be adequately applied to all the systems. The 'collision coupling' or 'allozyme' models, for example, may be more applicable to the intact cell environment (eg intact platelet), in which agonist modulation of cyclase activity does often proceed with the receptors existing predominantly in one affinity state for the agonist (Macfarlane & Stump, 1982). However, results from the studies of most of the particulate alpha₂-receptors suggest that the receptor-cyclase coupling mechanism appears to closely resemble that of the beta-receptor system, according to a 'unifying' model reviewed in detail by Swillens & Dumont (1980) (also see Lefkowitz & Hoffman, 1980_a; Kent et. al., 1980).

The coupling of alpha₂-receptor to adenylate cyclase inhibition appears to require as a pre-requisite, the formation of an agonist high-affinity state or 'ternary' complex, involving the agonist, the receptor, and the Ni-protein (H-R-Ni) in a way similar to that described for the beta-receptor (Stadel et. al., 1979; DeLean et. al., 1980). Indeed, the existence of such a ternary complex was reflected by an apparent increase in the molecular size of the solubilized platelet alpha₂-receptor subsequent to receptor occupancy by agonist, but not antagonist (Smith & Limbird, 1981).

of the Ni-protein from the complex which then exhibits low affinity for the agonist (see diagram in Chapter II) The 'activated' Ni-GTP complex proceeds to act on the catalytic subunit of the enzyme to effect inhibition. The hydrolysis of guanine nucleotides by a GTP ase appears to be a 'turn-off' mechanism, since the non-hydrolysable analogs of GTP produce persistent inhibition of enzyme activity (Jakobs et. al., 1983_a).

The modulation of adenylate cyclase activity by GTP and its analogs is associated with, or apparently preceded by a reduction in the affinity of the receptor for the agonists, as mentioned above. This is well demonstrated in the binding studies in which agonist binding to alpha2-receptors is examined in the absence and presence of high concentrations of guanine nucleotides. Typically, agonists interact with alpha₂-receptors in a different manner from the antagonists. In the absence of guanine nucleotides the agonists generate shallow displacement curves, indicating deviation from the law of mass action. Curve-fitting analysis would reveal agonist interactions with at least two affinity states of the receptor (Michel et. al., 1980). The presence of high concentrations of GTP and its non-hydrolysable analogs produces a characteristic shift of the agonist displacement curve to the right, and steepens its slope toward unity suggesting interaction with a class of homogeneous affinity sites. The overall agonist affinity in the presence of guanine nucleotide can be shown to be indistinguishable from that of the low-affinity sites in the absence of the modulator. Therefore, these findings are indeed well consistent with the postulation that the guanine nucleotide-sensitive ternary complex (or agonist high affinity state) represents the 'active' receptor pre-requisite to enzyme inhibition.

The interaction of agonists with $alpha_2$ -receptors, and in many cases, the agonist high-affinity states in particular, can be modulated by a variety of factors. For example, besides the guanine nucleotides, mono- and divalent cations have been demonstrated to produce 'agonist-specific' modulation of agonist affinities at $alpha_2$ receptors (Tsai & Lefkowitz, 1978; Michel et. al., 1980; Rouot et. al., 1980; U'Prichard & Snyder, 1980; Glossmann et. al., 1980). These influences are of potential physiological significance, since modulation of the quantity of 'active' receptors being stimulated by agonists might lead to altered magnitude or sensitivity of the effector response. Another factor, temperature, can also be an important modulator of agonist interactions with alpha₂-receptors. Indeed, the molecular mechanisms of agonist and antagonist interactions with the beta-receptors have been expounded on the basis of thermodynamic differences (Weiland et. al., 1979).

This work was undertaken with the aim of re-evaluating the influences of cations and guanine nucleotides on agonist/antagonist interactions with alpha₂-receptors sites, using for the first time the selective antagonist ligands ³H-yohimbine and ³H-rauwolscine as receptor probes. The human platelet alpha₂-receptor was used as a primary study model because of the relatively homogeneous platelet membrane preparations that can be derived from human blood. However, some attention has also been given to interactions at ³H-yohimbine/³H-rauwolscine labelled sites in the heterogeneous cell membrane preparations such as those from the rat cerebral and renal cortices. Furthermore, attempts have also been made to examine the thermodynamic differences of agonist and antagonist binding to platelet alpha₂-receptors. The significance of cation and temperature influences on agonist/alpha₂-receptor interactions is discussed.

132

VI.2. Results

VI.2.1. Agonist/antagonist interactions with alpha_-adrenoceptors and effect of guanine nucleotides

Alpha-agonists and antagonists exhibited different characteristics interacting with alpha₂-receptors labelled by ³H-yohimbine or ³H-rauwolscine. Typically, antagonists generated displacement curves with slopes close to unity, suggesting interaction with a homogeneous class of binding sites or affinity states. In contrast, agonists displayed shallow curves which suggests interaction with heterogeneous affinity states of the receptors. Figures VI.1.a, b and c illustrate the differential effects of GTP on the interactions of adrenaline (full agonist) clonidine (partial agonist) and rauwolscine (antagonist) with human platelet alpha2-receptors labelled by ³H-yohimbine. In the presence of 8mM MgCl₂, 0.1 mM GTP shifted the shallow displacement curve of adrenaline to the right by 10-fold or more. This was also accompanied by a steepening of the curve toward unity. The displacement curve of clonidine was similarly shifted by GTP, but compared to adrenaline, only to a smaller extent. In contrast to the agonists, the displacement curves of rauwolscine were virtually identical in the absence or presence of GTP. Furthermore, when 3 H-yohimbine saturation experiments were conducted in the absence and presence of GTP, Scatchard analysis indicated that 0.1 mM GTP (in the presence of 8 mM Mg^{++}) neither altered the Bmax nor Kd for ³H-yohimbine:

1	Bmax (f.mol/mg. protein)	Kd (nM)
Control	202 <u>+</u> 25.11	$2.05 \pm 0.07 (n = 3)$
+ 0.1 mM GTP	227 <u>+</u> 36.52	1.99 ± 0.02 (n = 3)

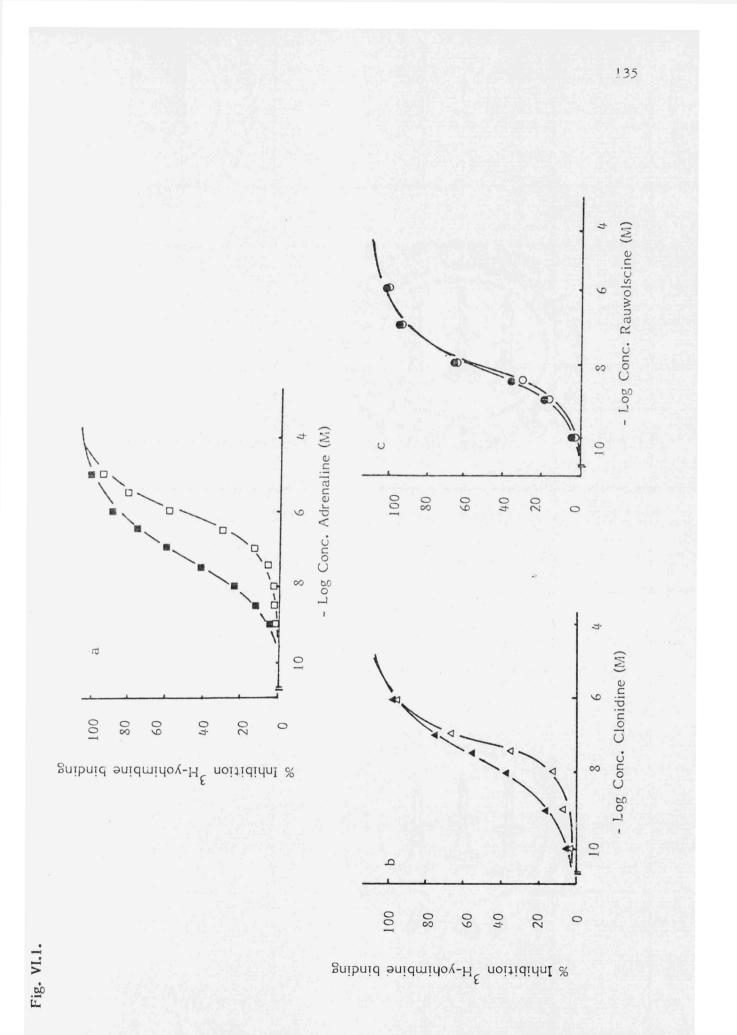
Taken together, these results strongly indicate that, compared to the agonists, antagonist interaction with alpha₂-recpetor is not susceptible to modulation by guanine nucleotides.

Legend to figures VI.1.a, b and c

• Effect of GTP on displacement of ³H-yohimbine binding to human platelet membranes by adrenaline, clonidine and rauwolscine.

- a) Adrenaline
- b) Clonidine
- c) Rauwolscine

Displacement experiments were carried out at R.T. at 2 - 3 nM 3 H-yohimbine in the presence of 8mM MgCl₂, and run in parallel in the absence and presence of 0.1 mM GTP. Each data point represents the mean of 6 - 12 separate experiments performed in duplicate (SEM <<u>+</u> 5%). Closed symbols = control; open symbols = + GTP.



The modulatory effects of GTP and Gpp (nH)p were qualitatively and quantitatively similar, with a maximal shift of the adrenaline displacement curve being reached at around $10 - 100 \mu$ M. The EC50 was about 2 μ M. In earlier studies with human platelet membranes, it was found that the inclusion of EDTA in the membrane washing and/or assay procedures appeared to be essential for the 'GTP-shift' of the agonist displacement curves. This is probably due to the ability of EDTA to remove the inhibitory guanine nucleotides, such as GDP, from the GTP binding sites on the N-protein (Shane et. al., 1981). When assays were performed using platelet membranes previously stored at -70°C, the size of the 'GTP shift' was also somewhat smaller (only about 4-fold, compared to 10-fold or more with the freshly prepared membranes). Such small shift appeared attributed to the more rightward position of the already steep adrenaline displacement curves (slopes were around 0.8 - 0.9) in the absence of GTP, although 8 mM $\ensuremath{\,\text{Mg}^{++}}$ was present in the assays (see Section VI.3. regarding the effect of cations on agonist/antagonist interaction with alpha2-adrenoceptors). This result suggests that freezing and thawing of platelet membranes may result in a reduced effectiveness of the receptors to form high-affinity states induced or stabilized by agonists.

When adrenaline displacement curves were analysed using computer i terative curve fitting, the results suggested that the agonists interacted with ³H-yohimbine labelled platelet $alpha_2$ -receptors in two distinct affinity states. At room temperature (22 - 25°C), and in the presence of 8mM MgCl₂, nearly 70% of the receptors were in the high-affinity state (Table VI.1). However, in the presence of 0.1 mM GTP, the adrenaline displacement curves were best fitted to a one-site model. The slope factor was also increased from 0.58 ± 0.016 to 0.97 ± 0.02. The overall Ki value for adrenaline in the presence of 0.1 mM GTP was indistinguishable from the K_L value in the absence of the modulator (table VI.1). Therefore, these results

R.T. (22 - 25	ʹC)
---------------	-----

37⁰C

		R.I. (22 - 25	()	37-	<u>C</u>
	• .	High affinity sites	Low affinity sites	High affinity sites	Low affinity sites
O GTP	%	42.8 <u>+</u> 8.2 [*] +	57.2 <u>+</u> 8.2	17 <u>+</u> 1.5 *	83 <u>+</u> 1.5
	K _L or K _H (nM)	22 <u>+</u> 2.23 ^{*+}	185 <u>+</u> 13.7 ⁺	55.8 <u>+</u> 4.9 *	703 <u>+</u> 188.6
+ 0.1 mM	%	-	100	-	100
GTP	K _L or K _H (nM)	-	162.3 <u>+</u> 31.5 ⁺		866 <u>+</u> 133
+ 8mM	%	68 <u>+</u> 1.6 ⁺	32 <u>+</u> 1.6	46 <u>+</u> 5.3	54 <u>+</u> 5.3
Mg ⁺⁺	K _L or K _H (nM)	5.35 <u>+</u> 0.88 ⁺	170 <u>+</u> 33 ⁺	24.9 <u>+</u> 5.5	761 <u>+</u> 99
8mM Mg ⁺⁺ + 0.1 mM	%	-	100	-	100
GTP	K _L or K _H (nM)	-	212.66 <u>+</u> 36.7 ⁺	-	897.18 <u>+</u> 54.8

Table VI.1. Effects of Mg⁺⁺ and temperature on agonist interaction with platelet alpha₂-receptors

Platelet membranes were incubated with about $2nM^{3}H$ -yohimbine and 12 - 15 increasing concentrations of adrenaline in assay buffer. Cation and GTP were added to assays as appropriate. Displacement experiments were performed as described in Chapter III and data was analysed using the computer iterative non-linear curve-fitting program LIGAND (Munson & Rodbard, 1980). Results are means <u>+</u> S.E.M. of 6 - 12 separate experiments performed in duplicate. * indicates statistical significance (p < 0.05) in comparison with corresponding value in the presence of Mg⁺⁺. + indicates statistical significance (p < 0.05) in comparison with corresponding value at $37^{\circ}C$. clearly suggest that guanine-nucleotides specifically convert the high-affinity agonist state of the alpha₂-receptors toward an overall low-affinity state, possibly by destabilizing the formation of the ternary high-affinity complex.

Differential modulatory effects of guanine nucleotides on agonist and antagonist interaction with alpha₂-adrenoceptors in other tissues, such as rat cerebral cortex or rat renal cortex appeared similar to those observed in human platelet (Figure VI.2.). However, in those tissues, guanine nucleotides alone were relatively weak in producing the shift of the agonist displacement curves to the right. High concentrations of Na⁺ markedly enhanced the modulatory effects of guanine nucleotides, increasing not only the extent of the shift, but also steepening the slopes of the curves close to unity. Either in the presence of 10mM MgCl₂ alone,or together with 200 mM NaCl, 0.1 mM Gpp (NH)p or GTP did not significantly alter the Bmax or Kd of the labelled antagonist. This is well illustrated from the following data obtained from ³H-rauwolscine binding to the rat renal cortical membranes:

Bmax (f.mol/mg protein) Kd (nM)

Mg ⁺ alone	145 <u>+</u> 23	$5.05 \pm 0.12 (n = 3)$
Mg ⁺⁺ + Gpp (nH)p	156 <u>+</u> 24.7	4.59 <u>+</u> 0.16 (n = 3)
Mg ⁺⁺ + Na ⁺ alone	155 <u>+</u> 23.5	4.92 <u>+</u> 0.22 (n = 3)
Mg ⁺⁺ + Na ⁺ +	159.6 <u>+</u> 34	5.17 <u>+</u> 0.17 (n = 3)
Gpp(nH)p		1

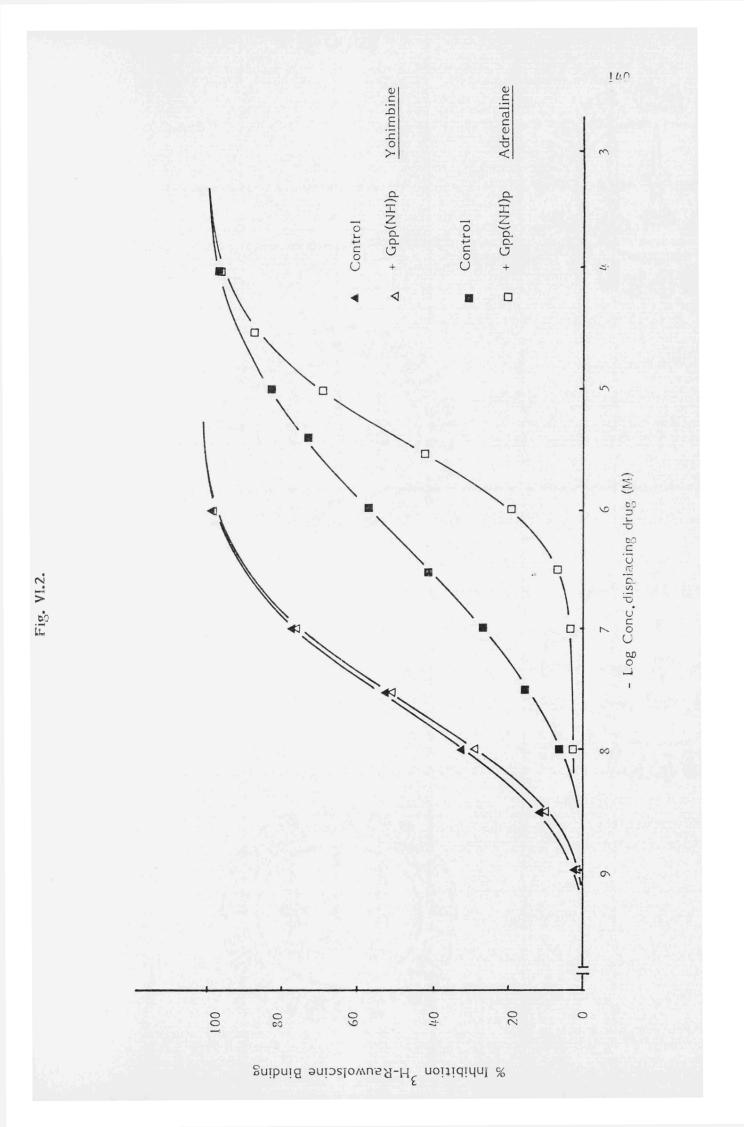
In short, the above data once again indicate that the modulatory effect of guanine nucleotides is selective for the agonist interaction with alpha₂-receptors. More specifically, such effect appears climited to the high-affinity states of the alpha₂-adrenoceptors, primarily leading to a shift of equilibrium in favour of the formation of low-affinity states.

Legend to figure VI.2.

Effect of Gpp(NH)p on displacement of 3 H-Rauwolscine binding to rat cerebral cortical membranes by yohimbine and adrenaline.

Displacement experiments were carried out as described in Chapter III at R.T. at 2 - 3 nM 3 H-rauwolscine in the presence of 8 mM MgCl₂, and 200 mM NaCl. Experiments were run in parallel in the absence and presence of 0.1 mM Gpp(NH)p. Each data point represents the mean of six separate experiments performed in duplicate (S.E.M. < \pm 5%).

...



- VI.2.2. Effect of temperature on agonist and antagonist interaction with alpha₂-adrenoceptors
- V.2.2.1. Effect of temperature on agonist and antagonist affinity at platelet alpha₂-adrenoceptors

Although the overall pharmacological profile of platelet $alpha_2^{-}$ adrenoceptors did not change with temperature, the affinities of drugs did exhibit significant temperature dependency at these receptors. Thus, both agonists and antagonists displayed lower affinities at 37° C than at room temperature (22 - 25° C). However, the affinities of the agonists appeared to be more affected by temperature than the partial agonists or antagonists. In parallel experiments in which 8mM MgCl₂ was present, the Ki value for adrenaline at ³H-yohimbine labelled sites in human platelet lysates was 27.8 \pm 3.0 nM (n = 12) at room temperature (R.T.) compared to 172.7 \pm 16.7 nM at 37°C, a difference of more than 6-fold. In comparison, the Ki for clonidine was 8 \pm 0.6 nM (n = 6) at R.T. but only increased to 27.5 \pm 1.4 nM at 37°C. The effect of temperature on antagonist binding to platelet alpha₂-receptors is shown in the following table:

Bmax (fmol/mg protein) Kd (nM)

R.T.	159 <u>+</u> 22	1.66 <u>+</u> 0.2 (n = 3)
37 ⁰ C	141.5 + 19.3	3.21 <u>+</u> 0.28 (n = 3)

(all assays contained 8mM MgCl₂)

It is clear that there was no significant difference in the Bmax for 3 H-yohimbine at R.T. and 37° C, although the Kd was increased by about 2-fold at 37° C. Results from kinetics studies indicate that the association rate constant (K₁) for 3 H-yohimbine increased by about 4-fold at 37° C (0.205 nM⁻¹ min⁻¹ at 37° C compared to 0.054 nM⁻¹ min⁻¹ at R.T.), whereas the dissociation rate constant (K₂) increased by nearly 10-fold (0.35 min⁻¹ at 37° C, compared to 0.04 min⁻¹ at R.T.).

The decreases in drug affinities do not appear to be attributed to a change in the assay pH. The assay pH of 7.5 at R.T. was only reduced to 7.32 at 37° C. Over these two pH points, there was very little change in the specific binding of ³H-yohimbine. Neither was there any apparant change in the Ki values for adrenaline (data not shown). Therefore, the observed changes in drug affinities appear to reflect a true temperature influence.

Table VI.1. shows the results of computer iterative curve fitting analysis of detailed adrenaline displacement curves both at R.T. and 37° C. It is clear that at 37° C there was a significantly smaller proportion of the platelet $alpha_2$ -receptors in the high affinity state, compared to R.T. The agonist affinities for both the high- and low-affinity states were also reduced at 37° C. Moreover, in the presence of 0.1 mM GTP, the overall Ki value for adrenaline was increased by about 5-fold from R.T. to 37° C. These values are not significantly different from the corresponding K_L values derived from curve-fitting analysis, thus further confirming that the temperature effect is not, as assessed in preliminary studies (Barnett et. al., 1982), only limited to the high-affinity agonist interaction with alpha_-adrenoceptors.

VI.2.2.2. Differences in thermodynamics of agonist and antagonist binding to alpha₂-adrenoceptors

The standard Gibb's free energy change (ΔG^{O}) for the binding reaction could be calculated from the equation:

$$\Delta G^{O} = -RT Ln K_{A}$$
(1)

Where R is the gas constant (1.99 cal mol $^{-1}$ deg $^{-1}$), K_A is the equilibrium association constant (1/kd), and T is the temperature in degree Kelvin. ΔG^{O} is also related to changes in enthalpy (ΔH^{O}) and entropy (ΔS^{O}) according to the following equation:

$$\Delta G^{O} = \Delta H^{O} - T \Delta S^{O}$$
 (2)

The combination of equations (1) and (2) gives rise to the van't Hoff equation:

 $LnK_{A} = -\Delta H^{0}/RT + \Delta S^{0}/R \qquad (3)$

 ΔH^{o} can be determined from the plot of Ln K_A against 1/T, the slope of which is $-\Delta H^{o}/R$. After ΔH^{o} has been determined, ΔS^{o} can be calculated from equation (2).

Table VI.2. shows the thermodynamic parameters for the binding of adrenaline, clonidine and yohimbine to alpha2-adrenoceptors in the platelet membranes at 37°C. The data suggests that the binding of both agonists and antagonists to alpha2-adrenoceptors is significantly dependent on an enthalpy component, thus explaining the dependency of the equilibrium constants on temperature. However, in contrast to the agonists, whose binding is entirely enthalpy-driven, the interaction of the antagonists with the alpha2-adrenoceptors appears to be motivated by both the enthalpy and entropy components. The binding of the full agonist adrenaline was associated with a large net reduction in entropy, compared to the antagonist yohimbine whose binding had a net gain in entropy. The marked decrease in entropy associated with agonist binding is mainly counter-balanced by a large negative enthalpy, without which the reaction seemed quite impossible to proceed. Compared to adrenaline, the binding of the partial agonist clonidine to platelet alpha2-adrenoceptors had a smaller net decrease in entropy, accompanied with a less negative enthalpy. This reflects the less enthalpy dependency for the interaction of clonidine with the receptor, and may account for the quantitatively smaller reduction in its affinity by increased temperature. In the presence of 0.1 mMGTP, in which adrenaline appeared to bind to a homogeneous low-affinity state of the receptors, the enthalpy and entropy changes were also smaller than those in the absence of GTP. These quantitative differences, particularly in regard to the entropy changes, may reflect the relatively larger entropy reduction

Drug	▲G ⁰ (Kcal mol ⁻¹)	AH ⁰ (Kcal mol ^{−1})	∆S ⁰ (entropy units)
Adrenaline only	-9.55	-30.57	-67.80
Adrenaline # 0.1 mM GTP	-8.51	-19.9	-36.74
Clonidine	-10.73	-15.42	-15.13
Yohimbine	-12.06	-8.33	+12.03

Table VI.2.

Thermodynamic parameters for agonist and antagonist binding to platelet $alpha_2$ -adrenoceptors at 37°C. Data was determined from equations (1), (2) and (3) as described in text. K_A values for adrenaline and clonidine were calculated as 1/Ki, where Ki values were determined from IC₅₀ as described in Chapter III. The Kd values for ³H-yohimbine were 1.66 nM and 3.21 nM at 22°C and 37°C respectively.

144

associated with specific agonist-receptor interaction, which appears to involve conformational changes in the receptor and coupling with the N-protein to form the ternary high-affinity complex pre-requisite for modulation of effector activity.

It must be emphasized that the thermodynamic parameters presented here are only rough estimates, since the ΔH^0 , and hence ΔS^0 , were calculated based on affinity differences between two experimental temperatures. Nevertheless, the data suffices to illustrate the basic differences in thermodynamics between agonist and antagonist binding to alpha₂-adrenoceptors.

•>

1

VI.2.3. Cation effects on agonist/antagonist interactions with alpha2-receptors VI.2.3.1. Cation effects on agonist affinity

The divalent cations, such as Mn⁺⁺ and Mg⁺⁺, not only modulate adenylate cyclase activity, but can influence interaction of agonist/antagonist with alpha₂-receptors. Hence, in agreement with earlier studies of alpha₂receptors, in which ³H-DHE was used as the radiolabel, (Michel et. al., 1980) agonist interactions with ³H-yohimbine or ³H-rauwolscine labelled sites were modulated by divalent cations.

In the platelet membranes, the affinity of adrenaline at 3 H-yohimbine binding sites was increased in a dose-dependant manner by Mg⁺⁺, with about 4-fold decrease of the IC₅₀ at 8 - 10 mM (Fig. VI.3.a.). However, the corrected Ki values for adrenaline (47.2 ± 4.16 nM and 22.8 ± 2.84 nM respectively in the absence and presence of Mg⁺⁺) was in fact only decreased by about 2 - 3 fold, because of the temperature-induced changes in the Kd for 3 H-yohimbine (see Section VI.2.2.1.). Similar effect of Mg⁺⁺ was observed at R.T. and 37°C. Although Ca⁺⁺ could also enhance the affinity of adrenaline at platelet alpha₂-receptors, such an effect appeared less consistent than Mg⁺⁺, and was usually less pronounced (data not shown).

Computer iterative curve fitting analysis of adrenaline displacement curves shows that Mg^{++} promoted the proportion of high-affinity states, but also increased the affinity (K_H) of such sites. The effect was similar at R.T. and $37^{\circ}C$ (Table VI.I.). However, Mg^{++} did not appear to produce any significant effect on the affinity (K_L) of the low-affinity sites. These results are consistent with earlier findings which showed that Mg^{++} increased both the Bmax and affinity of ³H-agonist (³H-clonidine) binding to human platelet(Shattil et. al., 1981).

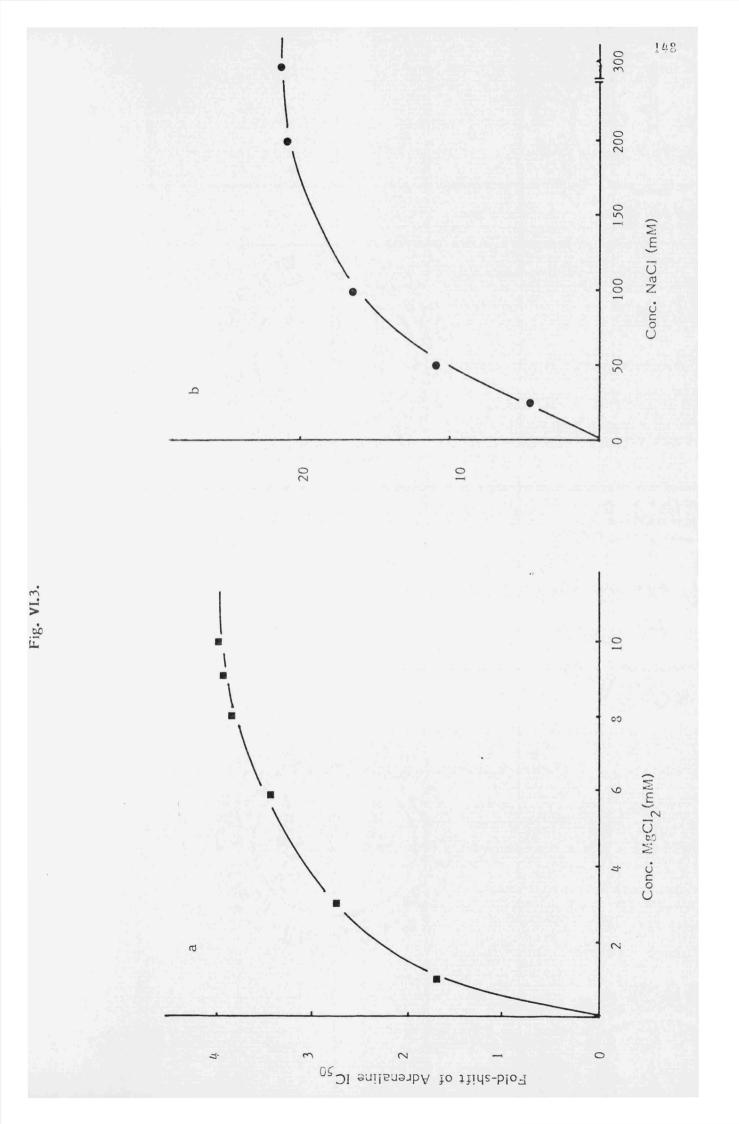
In contrast to the divalent cations, monovalent cations, such as Na^+ and K^+ were found to markedly reduce the affinity of agonist at $alpha_2$ receptors. For instance, adrenaline affinity at ³H-yohimbine labelled sites in the human platelet membranes was reduced by more than 10 -

Legend to figures VI.3.a and b

Effects of Mg^{++} and Na^{+} on adrenaline affinity at ³H-yohimbine labelled sites on human platelet membranes

- a) Mg⁺⁺ effect
- b) Na⁺ effect

Platelet membranes were incubated for 30 - 40 minutes at R.T. in standard assay buffer (Chapter III) with about 2 nM ³H-yohimbine and with increasing concentrations of adrenaline, and in the presence of various concentrations of MgCl₂ or NaCl. 'Fold-shifts' were calculated by comparing the IC₅₀ values of adrenaline in the absence and presence of cations. A one-fold shift means no change in the IC₅₀. Data presented is mean of two similar experiments.



20 fold in the presence of 100 - 200 mM Na⁺. The effect was dose-dependent, reaching the maximum at around 200 mM Na⁺ (Fig. VI.3.b). K⁺ appeared to produce qualitatively similar effect, although it was generally much less potent (data not shown).

The modulatory effect of Na⁺ was most pronounced on the affinity of the full agonist, and the extent of such effect appeared to be related to the intrinsic activity of the drugs. Hence, the affinity of the partial agonist clonidine was reduced to a smaller extent than the full agonist adrenaline (Fig. VI.4.). The affinity of the antagonist yohimbine was either totally unaffected, or very slightly reduced, depending on the tissue under investigation (see below).

In general, the reduction of agonist affinity by Na⁺ was accompanied by steepening of the displacement curves, particularly when Mg⁺⁺ was absent. Thus, in the human platelet membranes, the adrenaline displacement curves against ³H-yohimbine binding were steepened from a slope of about 0.78 to 0.95 in the presence of 100 - 200 mM Na⁺ alone. This suggests that the presence of Na⁺ might tend to produce either a reduction of the proportion of the high-affinity states, or a decrease of the ratio of K_L/K_H , or both. Indeed, although an earlier report suggested that Na⁺ only produced an overall reduction in agonist affinity and also a decrease in K_L/K_H ratio (Michel et. al., 1980), a more recent report indicated that Na⁺ could produce a reduction of both the binding capacity and affinity of ³H-agonist binding to human platelet membranes (Mooney et. al., 1982).

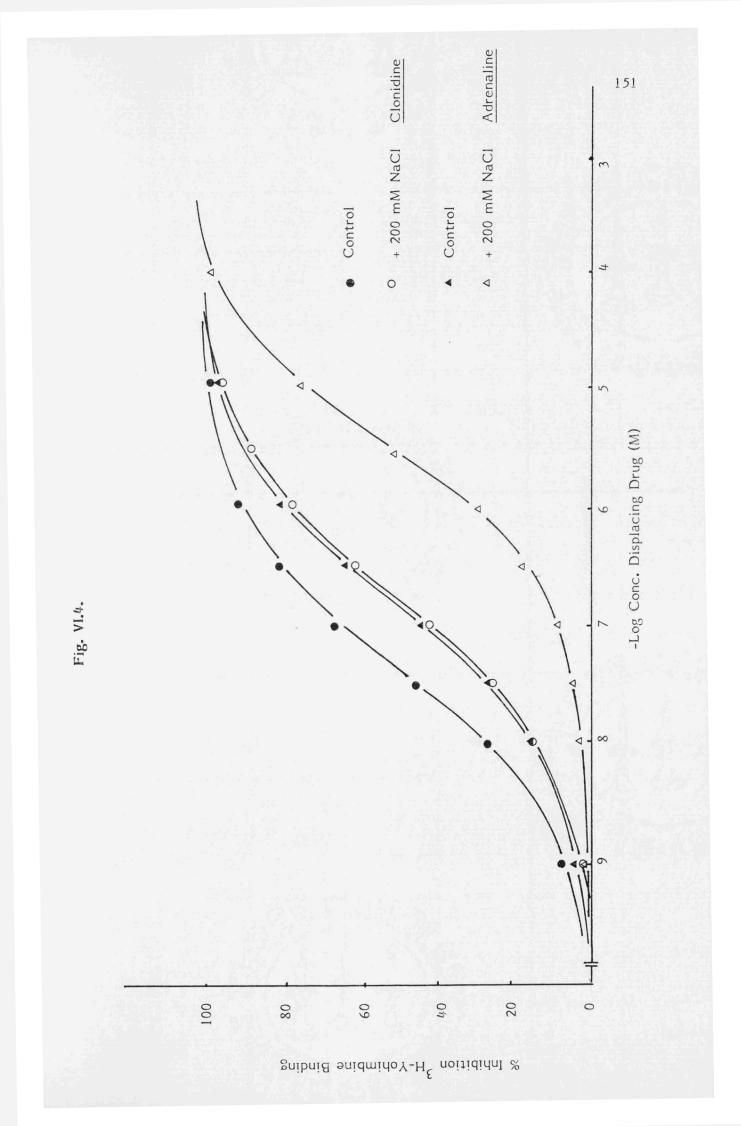
VI2.3.2. Enhancement of guanine nucleotide modulation of agonist affinity by cations

It was suggested that Mg⁺⁺ was essential for the modulatory action of guanine nucleotides in agonist affinity at alpha₂-receptors (Tsai & Lefkowitz, 1979). However, it was found in the present studies that Mg⁺⁺ did not appear to produce much significant enhancement of the reduction of agonist affinity by guanine nucleotides (Table VI.1.). At R.T. the presence of

Legend to figue VI.4.

Comparative effect of Na^+ on affinities of full agonist and partial agonist at 3 H-Yohimbine labelled sites on human platelet membranes.

Platelet membranes were incubated in standard assay buffer with about 2 nM 3 H-yohimbine and increasing concentrations of adrenaline or clonidine at R.T. as described in Chapter III. Experiments were run in parallel in the absence and presence of 200 mM NaCl. Data points are means of 3 - 4 separate experiments performed in duplicate



8 mM Mg⁺⁺ only slightly altered the overall Ki of adrenaline at human platelet alpha2-receptors in the presence of 0.1 mM GTP, but did appear to increase the slope factor from 0.92 + 0.04 to 0.97 + 0.02 (p < 0.05). At 37°C, there was virtually no apparent Mg⁺⁺ enhancement of the reduction of agonist affinity by GTP. As-illustrated in Fig. VI.5., the larger 'GTP-shift' observed in the presence of Mg⁺⁺ seemed mainly attributed to the ability of Mg⁺⁺ to shift the adrenaline displacement curves to the left. There is indication however that at R.T. the presence of Mg^{++} could indeed more consistently steepen the agonist displacement curves closer to unity, compared to its absence, suggesting that afterall, Mg⁺⁺ might have some degree of facilitating action on the full expression of the guanine nucleotide effect - the complete conversion of the high-affinity states to the low-affinity states. It is also interesting to note that in earlier studies in which frozen platelet membranes were used, Mg⁺⁺ did not enhance the shift of the adrenaline displacement curve to the left, but produced a slight enhancement of the 'GTP-shift' to the right, implying that the promotion of agonist affinity by Mg⁺⁺, and its facilitating effect on GTP modulation of agonist affinity may be mediated through two different allosteric sites.

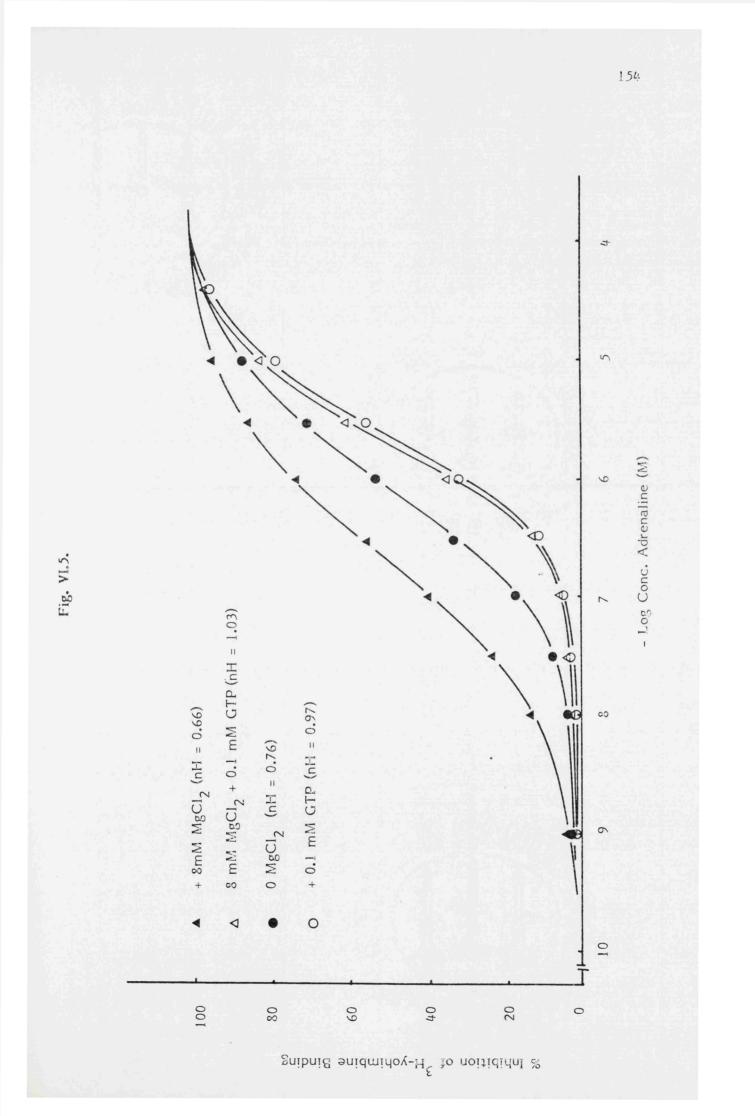
The effects of Na⁺ and guanine nucleotides on agonist interaction with alpha₂-receptor may be described as either additive or synergistic. In the human platelet membranes, the presence of 100 mM Na⁺ (in addition to 8 mM Mg⁺⁺) shifted the adrenaline displacement curve to the right by about as much as that produced by 0.1 mM GTP or Gpp (NH)p. The concomitant presence of 100 - 200 mM Na⁺ and 0.1 mM Gpp (NH)p produced a further right-ward shift of the adrenaline displacement curve, the extent of which was similar to that produced by 0.1 mM Gpp (NH)p in the absence of Na⁺. Therefore, the effect of Na⁺ and guanine nucleotide appeared to be an additive one in this system (Fig. VI.6).

Compared to the human platelet, in tissues such as the rat kidney and rat brain, Na⁺ was found to have a much more pronounced effect

Legend to figure VI.5.

Effect of Mg^{++} and guanine nucleotide on adrenaline displacement of 3 H-yohimbine binding to human platelet membranes.

Human platelet membranes were incubated with 2 nM 3 H-yohimbine at 37 0 C with increasing concentrations of adrenaline in the absence or presence of MgCl₂ (8 mM) or 0.1 mM GTP, or both. Data points are means of six separate parallel experiments performed in duplicate. The nH values are mean slope factors.



Legend to figures VI.6. and 7.

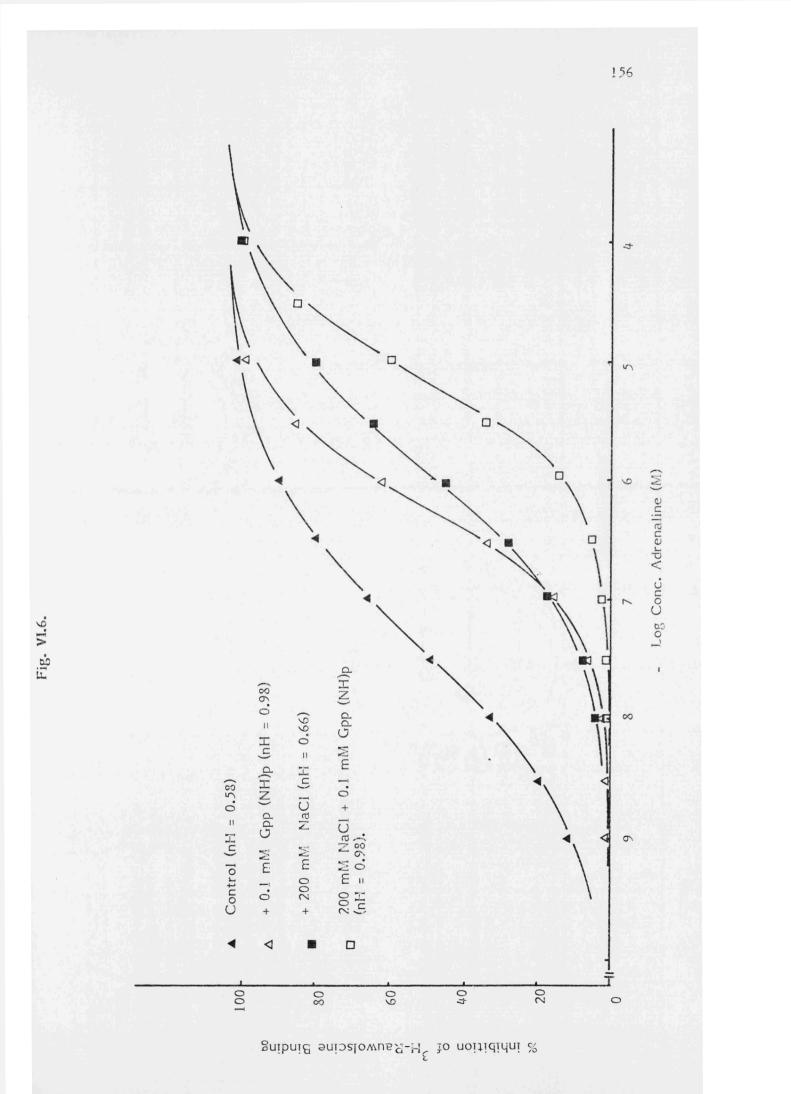
Fig. VI.6

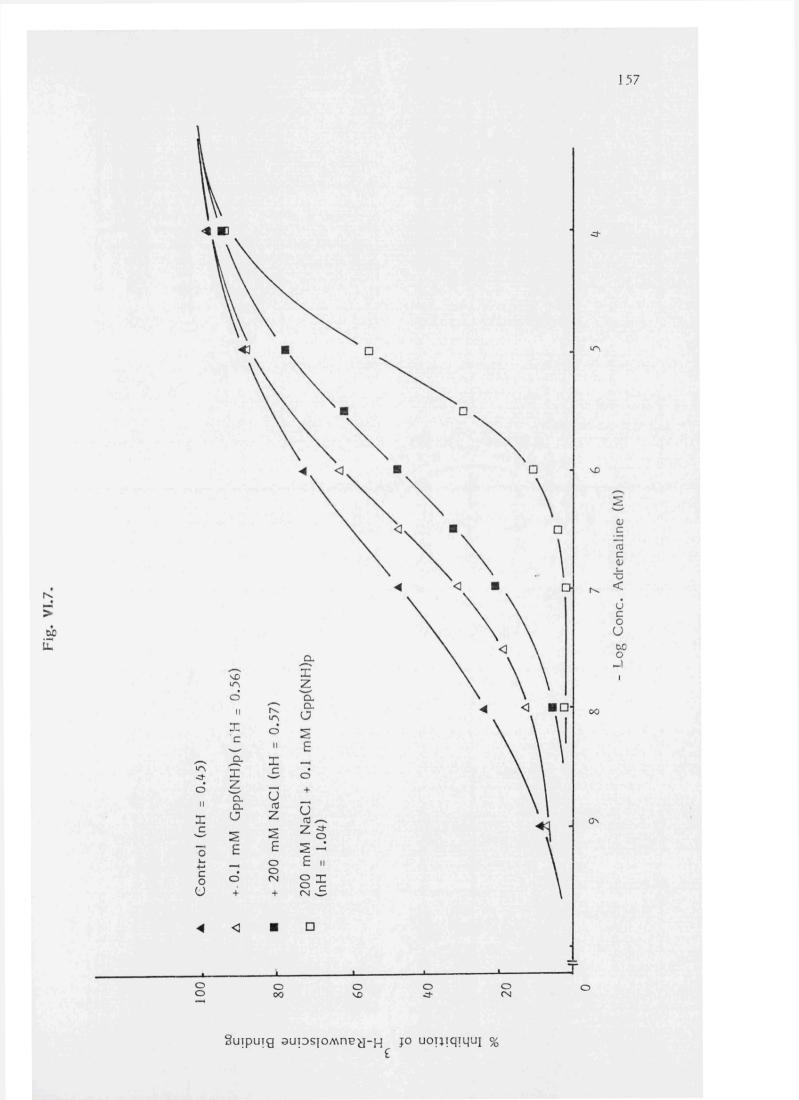
Effects of Na⁺ and guanine nucleotides on adrenaline displacement of ³H-rauwolscine binding to human platelet membranes.

Fig. VI.7.

Effects of Na^+ and guanine nucleotides on adrenaline displacement of 3H -rauwolscine binding to rat and renal cortical membranes.

Adrenaline displacement experiments of 3 H-rauwolscine binding (2 - 3 nM) to human platelet and rat renal cortical membranes were carried out at R.T. as described in Chapter III. Parallel assays were performed in the absence and presence of 0.1 mM Gpp(NH)p, or 200 mM NaCl or both. 8 mM MgCl₂ was present in all assays. Data points are means of 4 - 6 separate experiments performed in duplicate. The S.E.M. of each data point is generally less than <u>+</u> 5-6%





on the modulatory action of guanine nucleotide. For example, in the rat renal cortical membranes 0.1 mM Gpp (NH)p alone (plus 8 mM Mg⁺⁺) was only able to produce a small shift of the adrenaline displacement curve to the right (Fig. VI.7). The slope of the curve was increased slightly, but still significantly distant from unity. The presence of 200 mM Na⁺ alone markedly reduced the affinity of adrenaline, and in the presence of this ion, 0.1 mM Gpp (NH)p produced a significantly larger 'shift' of the adrenaline displacement curve than that in the absence of Na⁺. Moreover, it is only when high concentrations of Na⁺ were present that the guanine nucleotide-shifted curve was steepened close to unity.

VI.2.3.3. Cation effects on antagonist affinity

Although earlier studies did not reveal any influence of cations on antagonist affinity (Tsai & Lefkowitz, 1978), it was noticed in the present studies that divalent cations such as Mg⁺⁺ could significantly reduce the affinity of antagonists at alpha2-receptors. For example, in the human platelet membranes, 8 mM Mg⁺⁺ was found to increase the Kd of ³H-yohimbine from 0.88 + 0.16 nM to 1.66 + 0.2 nM at R.T. without altering the Bmax (Fig. VI.8.a). This effect was dose-dependent, reaching a maximum at around 20 - 30 mM of Mg^{++} , with an'IC₅₀ of about 4 mM (Fig. VI.8.b.). Among the divalent cations tested, Mn⁺⁺ appeared to be the most potent modulator and Ca^{++} was slightly less potent than Mg^{++} (data not shown). Similar divalent cation modulatory effect on antagonist binding was observed in all the tissues examined. Table VI.3. shows the effect of 20 mM Mg⁺⁺ on the binding characteristics of ³H-rauwolscine on the various tissues. It is clear that in all cases, no significant changes in the apparent Bmax were observed but the apparent Kd values were increased by about 2 -3 fold. As suggested by Salama et. al., (1982) different drugs might exhibit different degrees of sensitivity to the divalent cation effect. The affinity of phentolamine, for example, appeared to be relatively unaffected by divalent cations. It is interesting to note that the affinity of the alpha1-

Legend to figures VI.8.a. and b.

Effect of Mg^{++} on ${}^{3}H$ -yohimbine binding to human platelet membranes. a) Scatchard plots of ${}^{3}H$ -yohimbine binding data in the absence and presence of 8 mM MgCl₂.

Closed symbols = Control

Bmax = 198 f.mol/mg.p.; Kd = 0.69 nM

Open symbols = $+ 8 \text{ mM MgCl}_2$

Saturation experiments were performed in parallel at 3 H-yohimbine concentrations of 0 - 20 nM in the absence and presence of 8 mM MgCl_{2} . The data illustrated is from one experiment representative of three similar experiments performed in duplicate.

b) Dose - response relationship between Mg^{++} concentration and reduction of control ³H-yohimbine specific binding to platelet membranes.

Data is the mean of 2 similar experiments.

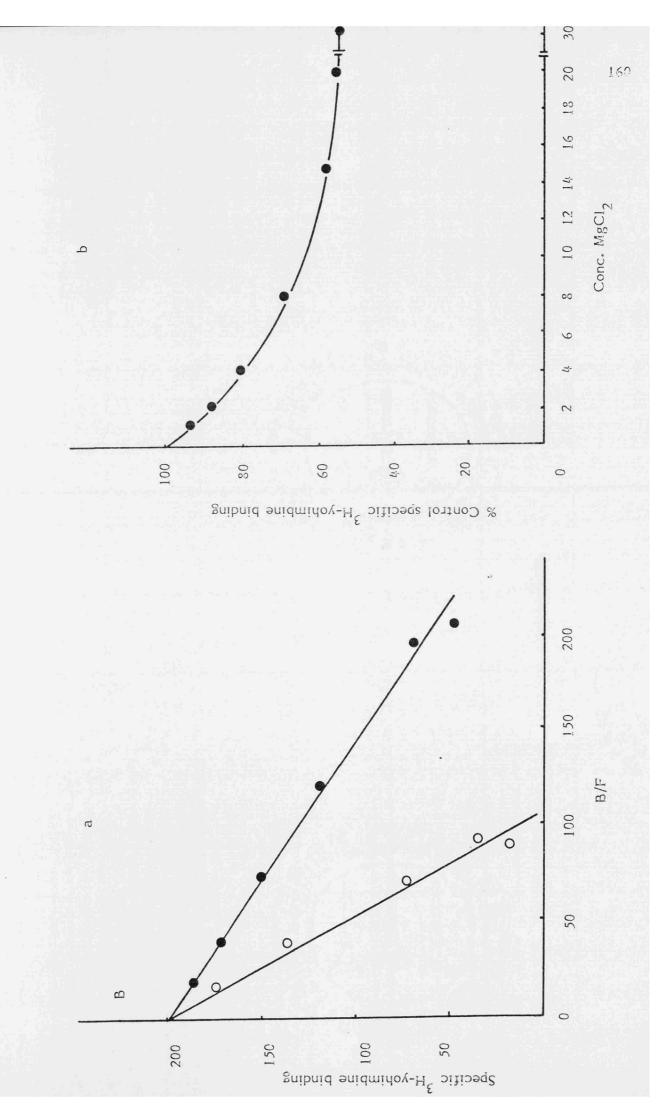


Fig. VI.8.

antagonist prazosin was also slightly reduced, although at 8 mM Mg⁺⁺, the IC₅₀ of prazosin (against ³H-yohimbine or ³H-rauwolscine binding) was increased no more than 2-fold in all the tissues examined in these studies (data not shown).

As with the divalent cations, the monovalent cation modulation of drug interactions with alpha2-receptors is obviously not agonist-specific, as previously suggested (Tsai & Lefkowitz, 1978). Thus, Na⁺ reduced the binding of 3 H-yohimbine or 3 H-rauwolscine to the human platelet membranes in a dose-dependent manner (Fig. VI.9), with a maximal effect being reached at 150 - 200 mM. The effects of 200 mM Na⁺ on 3 H-rauwolscine binding to the various tissues are summarized in Table VI.3. Similar to the effect of Mg⁺⁺, Na⁺ did not alter the Bmax of ³H-rauwolscine but it either decreased or did not alter the Kd, depending on the tissue under investigation. For instance, in the platelet membranes; 200 mM Na⁺ reduced the attinity of 3 H-yohimbine or 3 H-rauwolscine in a similar manner to Mg⁺⁺. In the rabbit brain membranes, the affinity of ³H-rauwolscine was reduced to a smaller extent by 200 mM Na⁺ than by 20 mM Mg⁺⁺. However, in rat brain, rat kidney, as well as rabbit kidney, the Kd for $^{3}\mathrm{H}\text{-rauwolscine}$ was virtually unaltered by Na⁺, despite of an approximately 2-fold increase produced by Mg^{++} . These effects of Na^+ on ${}^{3}H$ -rauwolscine binding were qualitatively similar on 3 H-yohimbine binding (data not shown). The interactions of alpha₁-antagonists with alpha₂-receptors were also influenced by Na⁺, although the results were variable. For example, the IC₅₀ values for prazosin in competition with ³H-rauwolscine binding to both human platelet and rat kidney membranes were decreased by about 2 - 3-fold in the presence of 100-200 mM Na⁺. In contrast, the IC_{50} values for indoramin were increased by about 3-fold, and those for corynanthine were totally unchanged. Finally, it must be stressed that these effects of Na^+ and Mg^{++} on antagonist affinities by no means altered the rank orders of drug potency or pharmacological profiles exhibited by alpha2-receptors in the various tissues.

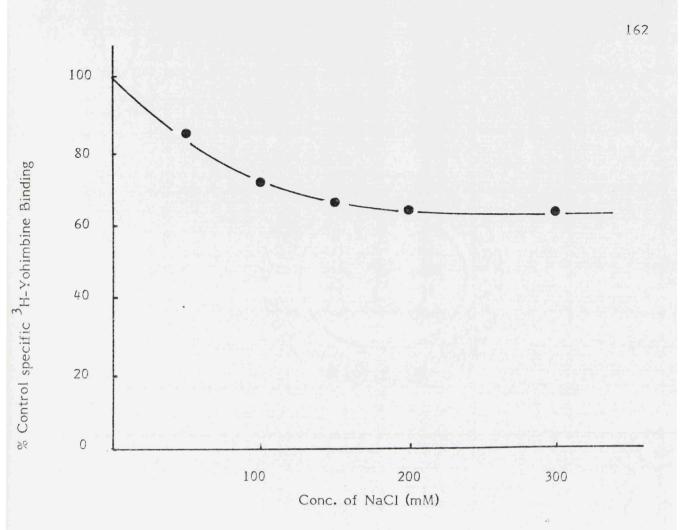


Fig. VI.9.

Effect of Na⁺ on 3 H-yohimbine binding to human platelet membranes. Platelet membranes were incubated with approximately 2 nM 3 H-yohimbine at R.T. for 30 - 40 minutes in the absence and presence of increasing concentrations of NaCl. The data presented is the mean of two similar experiments performed in duplicate.

Table VI.3.	Effects of Na ⁺ and Mg^{++} on specific ³ H-rauwolscine binding	Mg ⁺⁺ on specific	H-rauwolscine t	binding		ſ	:
		Human Platelet	Rat Cerebral Cortex	Rat Renal Cortex	Rabbit Cerebral Cortex	Rabbit Renal Cortex	
Control	Bmax (f.mol/mg.p.)	192 <u>+</u> 13	138 <u>+</u> 13.4	158 <u>+</u> 22	134 <u>+</u> 8.6	76.8 ± 6.4	1 1
	Kd (MM)	0.93 ± 0.05	2.98 <u>+</u> 0.16	3.1 ± 0.45	6.31 ± 0.48	5.6 ± 0.55	
+ 20 mM MgC1 ₂	Bmax (f.mol/mg.p.)	227 ± 24	128 <u>+</u> 9.3	148 ± 13	143.5 ± 10.1	78.9 ± 5.96	1
	Kd (nM)	2.83 <u>+</u> 0.07*	7.9 <u>+</u> 0.61 [*]	9.7 <u>+</u> 0.92 [*]	17.5 <u>+</u> 2.3*	10.5 <u>+</u> 0.5*	1 ,
+ 200 mM NaCl	Bmax (f.mol/mg.p.)	225 <u>+</u> 23	131 <u>+</u> 15	157 <u>+</u> 19.1	155 <u>+</u> 14.5	66.4 <u>+</u> 5.9	. 1
	Kd (nM)	2.9 ± 0.06*	3.37 ± 0.4	2.78 ± 0.41	11.7 ± 0.66*	5.4 ± 0.5	
The ³ H-rau ^r MgCl ₂ and h of binding d comparison	The ³ H-rauwolscine saturation experiments were performed in parallel at R.T. as described in Chapter III at 0-25nM. $MgCl_2$ and $NaCl$ were dissolved in assay buffer and added directly to assay. The results presented are from Scatchard a of binding data of 3 - 4 separate experiments performed in duplicate. * indicates statistical significance ($p < 0.05$) in comparison with the 'control' Kd in individual tissue.	eriments were perf ssay buffer and ad xperiments perforr n individual tissue.	cormed in parall Ided directly to med in duplicate	el at R.T. as descr assay. The results . * indicates sta	ibed in Chapter s presented are tistical significa	The ³ H-rauwolscine saturation experiments were performed in parallel at R.T. as described in Chapter III at 0-25nM. MgCl ₂ and NaCl were dissolved in assay buffer and added directly to assay. The results presented are from Scatchard analysis of binding data of 3 - 4 separate experiments performed in duplicate. * indicates statistical significance (p < 0.05) in comparison with the 'control' Kd in individual tissue.	1

t

163

VI.3. Discussion

Earlier studies using ³H-dihydroergocryptine have provided evidence that, like other catecholamine receptors linked to adenylate cyclase, alpha₂receptors interact with agonists, though not antagonists in distinct affinity states interconvertible under the influence of guanine nucleotides (Michel et. al., 1980). In the present studies in which the alpha₂-selective antagonists ³H-yohimbine and ³H-rauwolscine were used as receptor probes, similar characteristics of agonist interaction with alpha₂-receptors have been observed.

In agreement with results of earlier reports (Tsai & Lefkowitz, 1979; Hoffman et. al., 1982) guanine nucleotides exhibited specific modulatory effect on agonist affinities at alpha₂-receptors. The extent of reduction of agonist affinity by guanine nucleotides appeared to relate to the intrinsic activity of the individual agonists. Thus, full agonists were more influenced by guanine nucleotides than partial agonists, and the affinities of antagonists were not affected at all.

The modulatory effect of guanine nucleotides on adenylate cyclase activity and agonist affinity is now well recognised to be mediated through a guanine nucleotide binding protein (N-protein) (Rodbell, 1980; Limbird, 1981). A ternary complex composed of the agonist, receptor and N-protein appears to represent the agonist high-affinity state pre-requisite for modifying the activity of the enzyme. The presence of guanine nucleotides, such as GTP or Gpp(NH)p, dissociates the N-protein from the ternary complex, and converts the receptor to a low-affinity state (see Chapter II). Results from the present studies have indeed demonstrated such an effect on agonist interaction with platelet alpha₂-receptors labelled by ³H-yohimbine or ³H-rauwolscine.

Although it was suggested that the modulatory effect of guanine nucleotides on agonist affinity requires the presence of divalent cations such as Mg⁺⁺ (Tsai & Lefkowitz, 1979), the present results indicated that Mg^{++} ion seemed to exert a more pronounced effect on promoting the formation of the high-affinity states, than on facilitating the destabilizing action of guanine nucleotides. Mg⁺⁺ was found to increase not only the proportion of the high-affinity agonist states, but also the affinity of such sites. This finding is also supported by results from direct ³H-agonist binding to alpha2-receptors both in the peripheral tissue (Shattil et. al., 1981) and in the CNS (Glossmann et. al., 1980). It was noticed that the presence of Mg⁺⁺ did seem to consistently generate steeper adrenaline displacement curves at R.T. in the presence of GTP, possible suggesting that Mg⁺⁺ may be able to facilitate the full expression of the guanine nucleotide effect. However, such a possible allosteric action of Mg⁺⁺ could be mimicked by increased experimental temperature, as a higher temperature seems to favor the reduction of the high-affinity states (see below), and might possibly also catalyse the exchange of inhibitory guanine nucleotides for GTP on the N-protein.

In contrast to the divalent cations, monovalent ions such as Na⁺ could markedly reduce the affinity of agonists at alpha₂-receptors. Results from ³H-agonist binding to platelet membranes suggested that Na⁺ could reduce not only the affinity, but also the apparent Bmax of high affinity ³H-agonist binding(Mooney et. al., 1982). Thus, it appears that the divalent and monovalent cations have opposite effects on controlling the formation of agonist high=affinity states of alpha₂-receptors. This further implies that physiological Mg⁺⁺ and Na⁺ may serve to regulate the functional responses of catecholamines mediated through alpha₂-receptors.

With respect to the effect on agonist interaction with alpha₂-receptors, Na⁺ and guanine nucleotides share similar properties. Both modulators can reduce the agonist affinities, although they do not seem to act through similar mechanisms. Indeed, the effect of Na⁺ on agonist affinity appears

to be less specific than the guanine nucleotides. Both low- and high-affinity states of the alpha2-receptors can be influenced by Na⁺ (Michel et. al., 1980), but only the high-affinity states are sensitive to the guanine nucleotides. In the platelet membranes, the effects of Na^+ and guanine nucleotides (GTP or Gpp (NH)p) appear to be only additive. However, interestingly, in tissues such as the rat brain and rat kidney, the two modulators exhibit synergistic influence on the agonist interaction with alpha2-receptors. In these tissues, agonist displacement curves (against ³H-yohimbine or ³H-rauwolscine binding) were relatively shallow, particularly when Mg⁺ was present. High concentrations of guanine nucleotides alone were unable to produce a large shift of the curve to the right. The presence of high concentrations of Na⁺ (200 mM) was required to facilitate a larger shift of the agonist displacement curve by guanine nucleotides. Furthermore it was only at such a high concentration of Na⁺ that a significant steepening of the shifted curve was observed. The reason for such Na⁺ requirement for the full expression of the guanine nucleotide effect is not clear at the moment. The presence of high concentrations of enzymes capable of hydrolysing guanine nucleotides is not a likely cause, since the nonhydrolysable guanine nucleotide Gpp (NH)p was found to be of similar potency as GTP. The second possibility is that there may be inhibitory substances which could inactivate the N-protein or the guanine nucleotide binding sites, and that Na⁺ could counteract such inactivation. However, after membranes had been deliberately washed for 7 - 8 times, similar lack of sensitivity of agonist affinity toward guanine nucleotide modulation was still observed except in the presence of 200 mM Na⁺ (data not shown). Therefore, one likely possibility is that there may be basic differences in the coupling mechanisms for $alpha_2$ -receptors in the platelet and other tissues. It is possible, though purely speculative that in contrast to the platelet alpha2-receptor, those in the heterogeneous cell preparations such as the rat brain and kidney membranes may be 'coupled' to other kinds

of regulatory membrane components, or N-proteins, besides the Ni-protein. Thus, by some unknown mechanisms, Na⁺ may favor a more selective coupling of the alpha2-receptors with the Ni-protein. In view of the apparent ability of Na⁺ to reduce the formation of agonist high-affinity states (Mooney et. al., 1982), it is also possible that the larger effect of guanine nucleotides on agonist affinity in the presence of Na⁺ might be due to a direct allosteric action of this ion on the Ni-protein, perhaps facilitating the dissociation of GDP in exchange for GTP. Afterall, at least in the beta-receptor systems, the rates of agonist-induced release of ${}^{3}\text{H-GDP}$ were found to be quite different between tissues (Pike & Lefkowitz, 1981). Similarly, the effect of Na⁺ on the Ni-protein in facilitating GDP/GTP exchange might also differ between tissues. Furthermore, it is possible that Na⁺ might simply influence the availability of the responsible Ni-protein subunits with which GTP interacts. In this regard, differences in the structure or stoichiometry of the Ni-protein subunits between tissues may relate to the extent of the effect of Na⁺. It may be of relevance to notice that in the rat kidney, alpha2=receptor mediated cyclase inhibition appeared to require a relatively high concentration of NaCl for achieving a maximal effect (Woodcock & Johnston, 1982).

Agonist interaction with $alpha_2$ -receptors, similar to that described for the beta-receptors (Weiland et. al., 1979), also appears to be modulated by temperature. The binding of agonists to $alpha_2$ -receptors seems to be primary enthalpy-driven, compared to the antagonist, whose binding is much dependent on an entropy component. Similar to that observed at the beta-receptors, agonist binding to $alpha_2$ -receptors is characteristically associated with a large net reduction in entropy. It has been suggested that this may result partly from a conformation change in the receptor upon agonist occupancy (Weiland et. al., 1979). This interpretation seems quite compatible with the possible molecular events involved in the formation of the agonist high-affinity states at the alpha₂-receptors. However, the analysis of adrenaline displacement data in the human platelet membranes suggests that there is a significant loss of the high-affinity sites at 37°C compared to R.T. This may imply that the formation of the agonist highaffinity states is an enthalpy-driven mechanism itself.

From the physiological point of view, temperature may be important in controlling the alpha₂-mediated responses through regulating the proportion of the alpha₂-receptors in the high-affinity states. For example, platelet aggregation may be more sensitive to catecholamines at lower temperatures because of the presence of a higher proportion of the 'active' high-affinity states of the alpha₂-receptors. In this connection, it may be of interest to mention that in contrast, the prostaglandins, which stimulate adenylate cyclase, were found to exhibit reduced capacity to inhibit platelet aggregation at lower temperatures (Mikhailidis et. al., 1981).

While divalent cations promote high-affinity agonist binding, these ions also exert an opposite effect on the interaction of antagonists with alpha2-receptors. The divalent cations generally reduced the affinities of antagonists by 2 - 3 fold without altering the receptor density of alpha2-receptors. $\mathrm{Na}^+,$ on the other hand, appeared to have a rather variable effect on the antagonist interactions at alpha2-receptors. A recent report suggested that Na⁺ could slightly increase both the Bmax and affinity of ³H-yohimbine in the human platelet membranes (Limbird et. al., 1982). However, the present results indicated that Na⁺ did not significantly alter the Bmax for 3 H-yohimbine in the same tissue. In fact, it was noticed that Na⁺ reduced the affinity of ${}^{3}\text{H-yohimbine}$ in a dose-dependent manner. In tissues such as rat brain and rat kidney, Na⁺ neither altered the Bmax nor Kd of 3 H-rauwolscine or 3 H-yohimbine. In further studies, it was found that the alpha1-antagonists exhibit variable responses to Na⁺. For example, the affinity of prazosin at ³H-rauwolscine labelled sites could be increased 2 - 3 fold by Na⁺ in all the tissues studied. In contrast,

the affinity of indoramin was reduced by about 3-fold, and corynanthine was totally unaffected. The discrepancies between the results of Limbird et. al. (1982) and the present work cannot be fully explained. It is likely that differences in assay conditions may be important. For instance, these workers routinely included in their assays Mg⁺⁺ ions, the presence of which can already reduce the affinities of antagonists for alpha₂-receptors. It is also interesting to note that the 'control' Kd values for ³H-yohimbine in the platelet membranes reported by these workers were for some unknown reason significantly higher than those observed in this and other laboratories (Motulsky et. al., 1981; Daiguji et. al., 1981).

Very little is yet known regarding the mechanisms and sites of action for the cation effects on the agonist and antagonist interactions with alpha₂-receptors. The cations can alter the affinity of the receptors for the agonist and/or antagonists in a relatively non-specific manner. Influences of this kind may therefore be exerted via cation sites situated on or closely adjacent to the receptor protein itself. In view of the potential of the cations also to modulate the formation of the agonist high-affinity sites, it is likely that other specific cation allosteric sites on the Ni-protein may be responsible for such kind of influences.

That cations and guanine nucleotides could modulate the agonist and antagonist interactions with alpha₂-receptors in an opposite manner is a tempting thought. Indeed, Woodcock and Murley (1982) recently described the ability of Na⁺ and guanine nucleotides to increase the apparent binding capacities of ³H-yohimbine in the rat cerebral cortex. Such finding has been re-evaluated in the present work. As will be discussed in the next Chapter, there is strong evidence suggesting that increases of ³H-antagonist binding sites in the presence of Na⁺ and guanine nucleotides may merely relate to a reversal of the interference of antagonist binding by retained agonist. Nevertheless, the view that agonists and antagonists can interact with alpha₂-receptors in a 'reciprocal' manner has recently been carried further by U'Prichard and co-workers (U'Prichard, 1983; Bylund & U'Prichard, 1983). A hypothesis has been developed which suggests that antagonists also exhibit different affinities for the agonist high- and low-affinity states of the alpha₂-receptors. Accordingly, antagonist interactions with alpha₂-receptors would be expected being modulated by cations and guanine nucleotides in a manner opposite to the agonists. This view obviously receives no support from results of the present work, which revealed neither heterogeneous antagonist binding to alpha₂-receptors nor its modulation by guanine nucleotides. It is perhaps not improbable that apparent modulation of antagonist binding by cations and guanine nucleotides observed by U'Prichard and co-workers may in part also relate to influences of retained agonist. Chapter VII

INTERACTIONS OF EXOGENOUS AND ENDOGENOUS AGONIST WITH CEREBRAL CORTICAL ALPHA 2-ADRENOCEPTORS LABELLED BY ³H-ANTAGONIST

VII.1 Introduction

In chapters IV and V, it has already be demonstrated that both 3 Hyohimbine and ³H-rauwolscine are useful and specific radiolabelled probes for studying alpha2-adrenoceptors. Indeed, these two ligands have now been widely used for studying alpha2-adrenoceptors in a variety of tissues (Daiguji et al., 1981; Cheung et al., 1982; Hoffman et al., 1981_b;Tharp et. al., 1981; Schmitz et al., 1981; Perry & U'Prichard, 1981). Using these ligands, it has also been able to demonstrate that agonists interact with alpha2adrenoceptors in a manner qualitatively similar to that observed with other receptors linked to adenylate cyclase (see Chapter VI). Thus, the alpha2-adrenoceptors appears to exist in two distinct agonist affinity states modulated by the presence of guanine nucleotides and divalent cations and the overall agonist affinity can be markedly reduced by monovalent ions, such as Na⁺. In contrast, antagonist binding to the alpha₂-adrenoceptor is relatively little affected by these modulators (Tsai & Lefkowitz, 1978; Tsai & Lefkowitz, 1979; Michel et al., 1980; Limbird et. al., 1982; also see Chapter VI). However, as discussed in the last Chapter, there have been recent suggestions that antagonists may also display different affinities for the agonist high and low affinity states of the alpha2-adrenoceptor. According to such a model antagonist binding might be modulated by guanine nucleotides and monovalent ions in a manner opposite to that with the agonists (Bylund & U'Prichard, 1983).

In a recent study using rat cerebral cortical membranes, Woodcock and Murley (1982) reported a rather low maximal binding capacity of ³H-yohimbine, which could be markedly increased when incubations were performed in the presence of Na⁺ and guanine nucleotides. However, no change in the dissociation constant of ³H-yohimbine by these modulators was observed. In view of the quite different binding capacities reported by these workers compared to our own studies (Cheung et al., 1982) in the same tissue, it remained possible that differences in membrane preparations could be particularly significant. Woodcock and Murley (1982) used a hypertonic sucrose containing buffer for cortical membrane preparation, and it seemed possible that in this medium, intact synaptosomes containing norepinephrine (noradrenaline)could significantly interfere with subsequent alpha₂-adrenoceptor binding assays with the ³H-antagonist, and that these effects could be reversed by Na⁺ ions and guanine nucleotides. The present study aimed at examining these possibilities in detail and has provided evidence for a pseudo non-competitive interaction of alpha₂-adrenoceptors with endogenous norepinephrine. These results could have wide implications in the interpretation of apparent altered receptor site density in many systems, and might also be of relevance to observations regarding apparent enhancement of antagonist binding by Na⁺ and guanine nucleotides.

VII.2 Methods

VII.2.1 Preparation of Rat Cerebral Cortical Membranes

Adult male Sprague-Dawley rats (200-300 g) were decapitated and cerebral cortical membranes were prepared by one of the following methods:

A Cerebral cortex was homogenised in 20 volumes of sucrose buffer (50 mM Tris-HCl, 0.25 M sucrose, 10 mM MgSO₄, pH 7.7) using a motordriven glass-teflon homogenizer as described by Woodcock and Murley (1982). Homogenates were filtered through a double-layer of cheesecloth and centrifuged at 27,000 g for fifteen minutes. Pellets were subsequently washed three times with the same sucrose buffer, and finally resuspended in assay buffer (50 mM Tris-HCl, 10 mM MgSO₄, 0.5 mM EDTA, 1 mM mercaptoethanol pH 7.7) at a protein concentration of 4-6 mg/ml.

B Cerebral cortex was homogenised and washed in hypotonic buffer (5 mM Tris, 5 mM EDTA pH 7.7) as previously described in Chapter III. Final pellets were resuspended in the same assay buffer as in A.

C Cerebral cortex was initially homogenised and washed in sucrose buffer as in A, but after the third washing, pellets were homogenised once more in the buffer (5 mM Tris, 5 mM EDTA) used in B before being resuspended in the assay buffer as in A.

VII.2.2 Receptor Binding Assays

All binding assays were performed in assay buffer (50 mM Tris-HCl, 10 mM $MgSO_4$, 0.5 mM EDTA, 1 mM mercaptoethanol pH 7.7) in a final volume of 250 μ l. Assays procedures and analysis of results were similar to those described in Chapter III.

VII.2.3 Norepinephrine (Noradrenaline) Assays

Membranes prepared as above were homogenised with 0.1 N perchloric acid and following centrifugation, catecholamines were extracted with alumina and separated on a reverse phase-ion pair HPLC column (Ultrasphere 5 u ODS) and assayed by electrochemical detection (Mefford, 1981). The limit of norepinephrine detection was 0.2 pmol/mg membrane protein. (These assays were performed by Mr J Strupish).

> ı T

VII.3 Results

VII.3.1 Effect of Methods of Cortical Membrane Preparation on Binding Capacities of ³H-yohimbine

Cerebral cortical tissue was pooled and divided into three portions. Membranes were prepared simultaneously by methods A, B and C and assayed for ³H-yohimbine binding. Significant differences in the binding capacities in these preparations were observed, even under identical assay conditions (Table VII.I Figs. VII.Ia and b). Bmax values for ³H-yohimbine were generally low in membranes prepared by methods A, which was similar to that adopted by Woodcock and Murley (1982). In contrast, the Bmax of ³H-yohimbine was significantly higher in membranes prepared by method⁻B, in which the hypotonic buffer instead of sucrose buffer was used in the homogenisation and washing processes. When membranes prepared by method C, (initial preparation by method A, followed by an additional homogenisation and washing in hypotonic buffer) were used for assays, ³H-yohimbine Bmax was also found to be higher than membranes prepared by method A. The apparent K_d of ³H-yohimbine binding, however, remained unchanged regardless of the method of membrane preparation.

VII.3.2 Effect of NaCl and Guanine Nucleotide on ³H-yohimbine Binding Capacities in Cortical Membranes

In agreement with the results reported by Woodcock and Murley (1982), the apparent densities of $alpha_2$ -adrenoceptors determined by ³Hyohimbine binding in cortical membranes prepared by method A (sucrose containing buffer) could be increased more than two fold if assays were performed in the presence of NaCl (200 mM) and the hydrolysis-resistant GTP analogue Gpp (NH)p (10 μ M) (Table VII.1). However, there were no significant differences in the apparent Bmax values of ³H-yohimbine binding in membranes prepared by method B, (hypotonic buffer) in the absence or presence of NaCl and Gpp (NH)p.

In all cortical preparations the apparent K_d of 3H -yohimbine

		Assay Buffer		Assay Buffer plus NaCl (200 mM), Gpp(NH)p (10 µM)	(Wr 0J)
Membrane Preparation* Method	Norepinephrine Content (pmol/mg protein)	Bmax (fmole/mg protein)	(Mu) P	Bmax (fmole/mg protein)	K _d (nM)
A	1.98 ± 0.24	49 ± 5,94**	11.6 ± 1.28	11.6 ± 1.28 125.7 ± 14.6+	11.22 ± 1.03
В	< 0.2	124.3 ± 9.84	12.18 ± 0.99	12.18 ± 0.99 138.3 ± 16.2	11.97 <u>+</u> 0.95
U	< 0.2	105.4 ± 15.4	11.80 ± 0.89	11.80 ± 0.89 141.08 ± 17.06	11.84 ± 1.17

Effect of Methods of Cortical Membranc Preparation on Binding Capacitics of 3 H-yohimbine

Table VII.I

* Membranes were parpared by methods A, B and C and saturation binding assays were carried out in parallel experiments as described in the text. Values shown were obtained from scatchard plots and are means ± SEM of at least six separate experiments. Comparisons were made by Student's 't' test.

** Indicates significantly different from membrane preparations B and C is assay buffer (P < 0.05).

+ Indicates significantly different from membrane preparation A in assay buffer (P < 0.05).

All other comparisons were not significantly different.

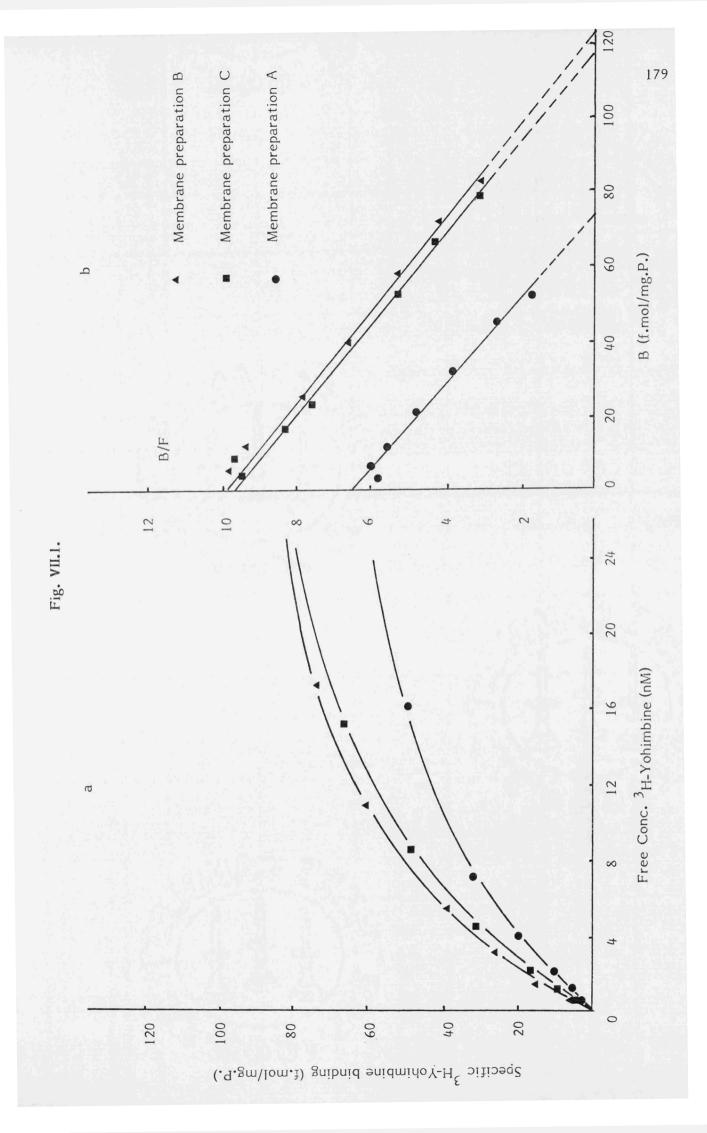
Legend to Figure VII.1.

Specific binding of ³H-Yohimbine binding to rat cerebral cortical membranes prepared to different methods

Membranes were prepared as described in the text using hypertonic sucrose buffer (Method A); hypotonic Tris buffer (Method B); hypertonic sucrose buffer followed by one final wash in hypotonic Tris buffer (Method C). Saturation experiments of 3 H-Yohimbine binding to the above membranes were performed in parallel at approximately 0 - 30 nM at R.T. as described in Methods section of this chapter.

- a) Saturation isotherms
- b) Scatchard plots of binding data

Data presented is from one experiment representative of six similar experiments performed in duplicate. The Bmax (f.mol/mg protein) are: 73, 124, 117 respectively for membrane preparation A, B and C. The Kd (nM) are: 10.23, 11.1 and 10.95 respectively for membrane preparation A,B, and C.



was not altered when incubations were carried out in the presence of NaCl and Gpp(NH)p. Furthermore, it should be noted that in the presence of these modulators the Bmax was not significantly different between the three preparations.

VII.3.3 Norepinephrine Contamination of Cortical Membranes

Samples of membranes prepared by methods A, B and C were analysed using HPLC/electrochemical detection for possible contamination with endogenous norepinephrine with the following results: membranes A 1.98 \pm 0.24 pmol/mg protein (mean \pm SEM, n = 3); membranes B < 0.2 pmol/mg protein; membranes C < 0.2 pmol/mg protein.

In the final binding assay (assuming that all the catecholamine is free) the overall concentration of norepinephrine in assays containing membranes A would be 5 ± 0.4 nM (n = 3) whereas in membranes B or C this concentration is < 0.5 nM.

VII.3.4. Effect of Exogenous Norepinephrine on ³H-yohimbine Binding Capacities

In view of the possibility that the enhancement of the apparent binding capacity of ³H-yohimbine to cerebral membranes by Na⁺ and Gpp (NH)p could relate to retained endogenous norepinephrine, experiments were performed in which exogenous norepinephrine was added to membranes prepared in hypotonic buffer. The results are shown in Table VII.2 and Figs. VII.2a and b.

When saturation experiments were performed using membranes prepared in the hypotonic buffer, (very low residual endogenous norepinephrine), the addition of 10 nM norepinephrine was found to cause an apparent large decrease in ³H-yohimbine binding capacity. A further loss in sites was observed when a higher concentration (IDO nM) of norepinephrine was added. However, these changes in Bmax values were not accompanied by any change in the apparent affinity of ³H-yohimbine. Furthermore, in the presence of 200 mM NaCl and 10 uM Gpp(NH)p, the 'lost' binding sites

۰

(Mu 01) q(HN)	tein) K _d (nM)	11.6 ± 1.2	12.8 ± 1.9	13.7 ± 1.8	
Assay Buffer plus NaCl (200 mM), Gpp (NH)p (10 uM)	Bmax (fmole/mg protein)	193.4 ± 25.3	178.1 ± 36.5 ⁺	162.6±32.3 ⁺	
	K _d (nM)	11.5 ± 0.6	11.7 ± 1.6	10.9 ± 2.4	
Assay Buffer	Bmax (fmole/mg protein)	135.8 ± 29.9	70.3 ± 4.8**	49.2 ± 5.4**	
		Control*	+ 10 ⁻⁸ M norepinephrine	+ 10 ⁻⁷ M norepinephrine	

Effect of Exogenous Norepinephrine on ³H-yohimbine Binding Capacities in Cortical Membranes prepared in

Hypotonic Buffer

Table VII.2

were carried out in parallel experiments without addition of agonist (control) or in the presence of norepinephrine in final concentrations of 10⁻⁸ M or 10⁻⁷ M as listed, and with or without addition of NaCl (200 mM) and Gpp(NH)p (10 µM). Membranes were prepared in hypotonic buffer (method B) and assayed as described in the text. Saturation binding assays *

Values shown were obtained by Scatchard analysis and are means ± SEM of at least three separate experiments. Comparisons were made using Student's 't' test.

** Indicates significantly different from 'control' in assay buffer (P < 0.05).

Indicates significantly different from results in the absence of NaCl and Gpp (NH)p (P< 0.05). +

All other comparisons were not significantly different.

Legend to Figure VII.2.

Effect of exogenous norepinephrine (noradrenaline) on ³H-yohimbine binding to rat cerebral cortical membranes.

Membranes were prepared as described in the text by method B (ie in hypotonic Tris buffer only). ³H-yohimbine saturation experiments were performed in parallel in the absence and in the presence of final concentration of 10^{-8} M or 10^{-7} M of norepinephrine.

- a) Saturation isotherms
- b) Scatchard analysis of binding data

Data illustrated is from one experiment representative of three similar experiments performed in duplicate. The Bmax (f.mol/mg protein) = 97, 60.38, 42.8 and Kd (nM) = 11.1, 10.52 and 9.07, both for control and in the presence of 10^{-8} M and 10^{-7} M norepinephrine respectively.

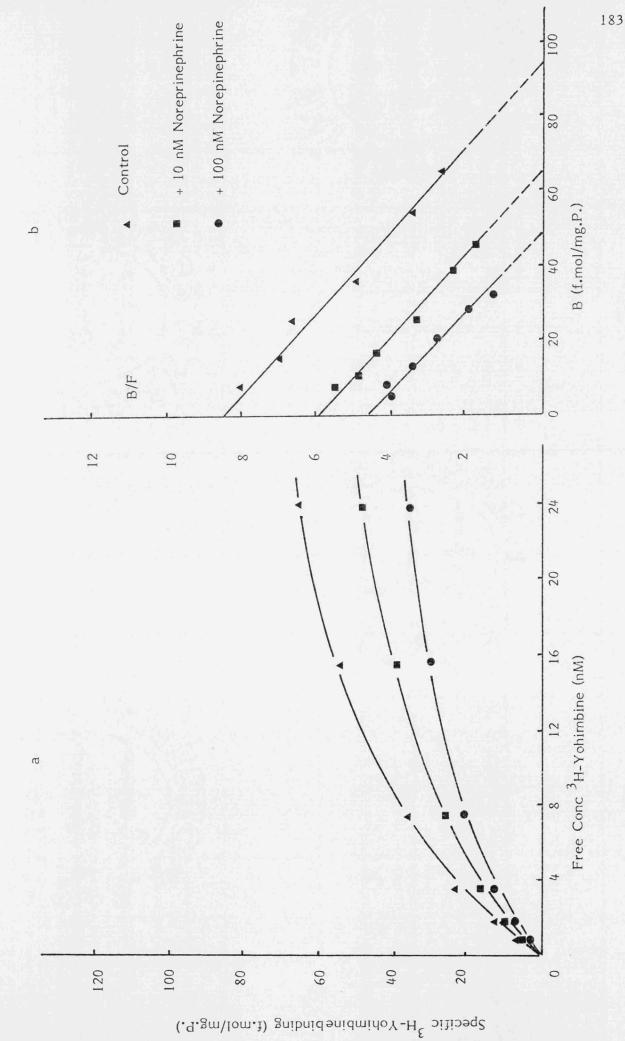


Fig. VIII.2.

could be recovered. Thus, in the presence of NaCl and Gpp(NH)p a similar binding capacity was observed regardless of the presence or absence of exogenous norepinephrine.

VII.3.5 Effect of NaCl and Guanine Nucleotide on Norepinephrine Displacement of ³H-yohimbine Binding to Cortical Membranes

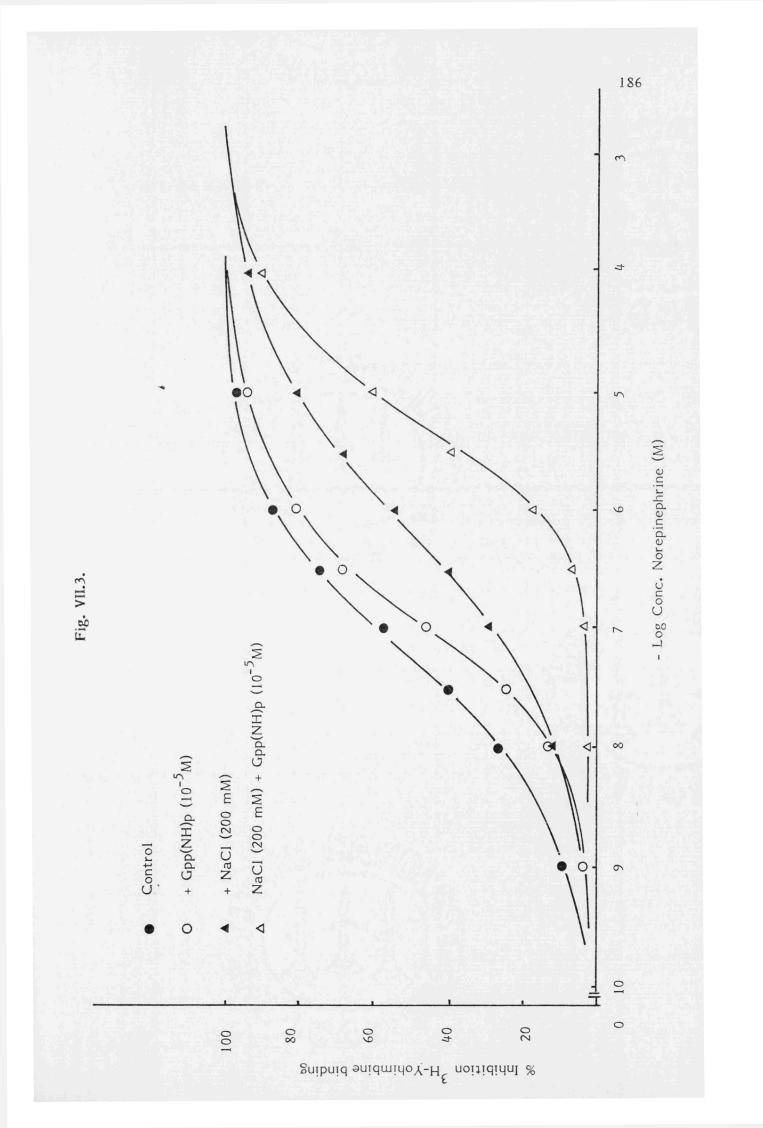
The data in Fig. VII.3 demonstrate the effect of NaCl and Gpp(NH)p alone or in combination on the ability of norepinephrine to displace specific ³H-yohimbine binding to $alpha_2$ -adrenoceptors in rat cerebral cortical membranes, prepared in hypotonic buffer. Norepinephrine characteristically displaces the labelled antagonist with a curve of low Hill slope (nH = 0.58). In presence of Gpp(NH)p there is a small shift of the curve to the right with some steepening of the slope (nH = 0.74). NaCl, however, more effectively reduced the overall affinity of norepinephrine, and the effect of NaCl and Gpp(NH)p together appeared to be synergistic. In the presence of both of these modulators, norepinephrine displaced ³H-yohimbine with low affinity and with a steep displacement curve (nH = 0.91).

Note that NaCl and Gpp(NH)p did not influence the capacity of ³H-yohimbine binding in these membranes (Table VII.1).

Legend to Figure VII.3.

Effect of Na⁺ and Gpp(NH)p on norepinephrine displacement of 3 H-Yohimbine binding to cerebral cortical membranes

Rat cerebral cortical membranes were prepared in hypotonic Tris buffer (Method B) as described in the text. Incubations were carried out at about 4 nM 3 H-yohimbine with increasing concentrations of norepinephrine in the absence or presence of 10⁻⁵ M Gpp (NH)p, 200 mM NaCl or both. Data represents the means of four experiments performed in duplicate. S.E.M. for each point is less than + 5%.



VII.4 Discussion

The differential interactions of agonists and antagonists with alpha,adrenoceptors have been discussed in Chapters II and VI. Thus, agonists, but not antagonists, appear to induce or stablise high affinity guanine nucleotide sensitive states at catecholamine receptors coupled either positively (Kent et al., 1980; DeLean et al., 1980) or negatively (Michel et al., 1980; Limbird et al., 1982; Tsai & Lefkowitz, 1979; Barnett et al., 1982) to adenylate cyclase. In addition, divalent cations, such as Mn^{+} or Mg^{+} have also been shown to promote the formation of high affinity agonist states (Rouot et al., 1980; U'Prichard & Snyder, 1980; Glossmann et al., 1980; also see Chapter VI). Therefore, the presence of divalent cations and retained endogenous agonists in membrane preparations could potentially result in problems with radiolabelled ligand binding assays to receptors linked to adenylate cyclase. In view of this, it was felt that the interesting finding by Woodcock and Murley (1982) that Na⁺ ions and guanine nucleotides increase the apparent density of cerebral alpha2-adrenoceptors labelled by ${}^{3}\text{H-yohimbine}$, could in fact relate to the interaction of such modulators with retained norepinephrine. The results of the present experiments provide very strong evidence for this interpretation.

Preparation of cerebral homogenates in hypertonic sucrose solutions is known classically to produce a high proportion of 'pinched off' nerve endings or synaptosomes (Gray & Whittiker, 1962). As expected, such preparations contained a relatively high content of retained norepinephrine when compared to preparations that had been washed thoroughly in hypotonic buffers. In the present study, an inverse relationship has been demonstrated between the quantity of endogenous or added exogenous norepinephrine and the apparent binding capacity of ³H-yohimbine to cerebral cortical alpha₂-adrenoceptors.

The presence of retained agonist in membrane preparations might merely be expected to reduce the affinity of the radiolabelled ligand for

the receptor sites. In a recent study with intact platelet alpha2-adrenoceptors, an agonist-induced apparent reduction of ³H-yohimbine binding (determined at a single sub-saturating ligand concentration) was described (Karliner et al., 1982). From their results, the authors indeed suggested that high concentrations of retained agonist could simply increase the apparent Kd of 3 H-yohimbine by shifting the binding isotherm to the right, though producing no true reduction of the maximal binding capacity (i.e. receptor 'down-regulation'). However, an apparent reduction in the binding capacity of labelled antagonist by retained agonist can be predicted in view of the differential molecular behaviour of the agonists and antagonists at adenylate cyclase linked receptors. In membranes (though not necessarily in intact cells) (see Chapter IV), catecholamine agonists, even present at low concentrations, can preferentially occupy receptor sites by inducing or stabilising the formation of high affinity state of the alpha2-adrenoceptor (Tsai & Lefkowitz, 1979; Michel et al, 1980; Limbird et al., 1982; Barnett et al., 1982). As discussed before, the formation of such high affinity states, which are regulated by ions and guanine nucleotides, appears to involve interactions between the receptor and a guanine nucleotide binding protein (Ni) (Smith & Limbird, 1981) to form a 'ternary complex' in a manner similar to that described for the beta adrenoceptor agonist-receptor interaction (DeLean et al., 1980). In contrast, the alpha₂-adrenergic antagonists appear to bind to the receptors with homogeneous affinity without the involvement of guanine nucleotide binding proteins. This is well supported by the finding that only agonist, though not antagonist binding to alpha2-adrenoceptors could be significantly regulated by guanine nucleotides (Tsai & Lefkowitz, 1979; Michel et al., 1980; also see Chapter VI). Furthermore, since yohimbine and other antagonists all generate displacement curves with slopes close to unity, it is likely that antagonists only interact with alpha2-adrenoceptors in a single homogeneous affinity state. Therefore, in membranes, low but significant concentrations of residual endogenous agonist could preferentially occupy a proportion of the receptor sites in the high affinity state and inhibit the binding of the ³H-antagonist in an apparent non-competitive fashion. Only unoccupied sites, which would predominantly be of the low agonist affinity state, could be labelled by the antagonist. In other words, retained or added agonist could be expected to preferentially increase the Kd for only a proportion of the ³H-antagonist binding sites. Consequently, unless the concentration range of ³H-antagonist was deliberately extended, Scatchard analysis would reveal an apparent fall in its Bmax (see fig. VII.4.) Of course, an alternative interpretation is that agonists <u>competitively</u> displace ³H-antagonist from two sites, one of high and the other of low agonist affinity. It should be noted that this 'Pseudo non-competitive' interaction of agonists has also been observed at dopamine D₂ receptors that like the alpha₂-adrenoceptors, are negatively coupled to adenylate cyclase at least in the pituitary (Sibley & Creese, 1980).

Although low concentrations of agonists might only block the binding of ³H-antagonist to high affinity agonist sites, sufficiently high concentrations of agonists could inevitably inhibit both the high and low affinity sites. Under such circumstances, the inhibition might be surmounted only by increasing the concentration of the labelled antagonist to a much higher level, though overall increases in the apparent Kd would also be expected.

The modulatory effects of Na⁺ and guanine nucleotides on agonist affinity at alpha₂-adrenoceptors have now been well recognised (Tsai & Lefkowitz, 1978; Glossmann & Presek, 1979; Michel et al., 1980; Limbird et al., 1982; Snavely & Insel, 1982; also see Chapter VI).

The results in this study have further illustrated the ability of these two modulators to restore the binding capacities of ³H-yohimbine in cortical membranes previously depressed by the presence of endogenous or exogenous norepinephrine. In the presence of high concentrations of Na⁺ and guanine nucleotides, agonist affinity can be markedly decreased as shown in the experiments illustrated in Fig. VII.3. Consequently, the entire population

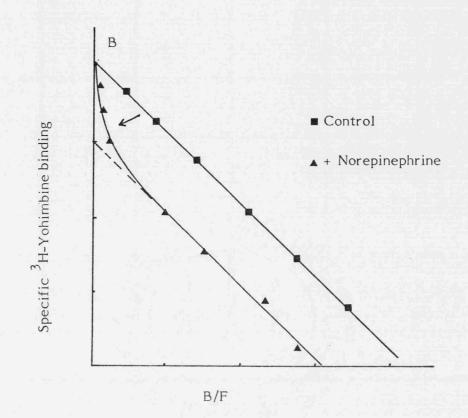


Fig. VII.4.

Diagrammatic interpretation of pseudo non-competitive inhibition of 3 H-Yohimbine binding by exogenous norepinephrine

Low concentrations of norepinephrine (noradrenaline) preferentially occupy and raise the Kd for only a proportion of the ³H-yohimbine sites. Scatchard plot of binding data would therefore reveal an apparent fall in the Bmax unless ligand concentrations were much extended. 190

of receptors is free from agonist occupancy and available for labelling by the ³H-antagonist. Therefore, a more consistent range of receptor concentrations can be obtained in the presence of high concentrations of both Na⁺ and guanine nucleotides, regardless of membrane preparation methods or the presence of low concentrations of agonist.

In this study, exogenous norepinephrine apparently competes for ³H-yohimbine binding less potently than retained endogenous agonist. Thus, in competition experiments (Fig VII.3) 5 nM norepinephrine displaces approximately 25% of the binding, compared to the apparent 50% reduction in binding capacity in the synaptosomal cerebral membranes A. This may relate to difference of access to the receptor site between exogenous and endogenous agonist and requires further investigation.

Nevertheless, results from this study have indeed demonstrated the inverse relationship between the binding capacity of ³H-yohimbine to alpha₂adrenoceptors and the norepinephrine content in cerebral cortical membrane preparations. The inhibition of ³H-yohimbine labelled sites by endogenous or exogenous norepinephrine can be readily reversed by high concentrations of NaCl and guanine nucleotide. The increases in binding capacities of ³H-yohimbine in rat cerebral cortex by these modulators, as previously reported (1982), might not necessarily represent a unique molecular behaviour of the cortical alpha₂-adrenoceptors compared with other alpha₂adrenoceptors. Such a phenomenon probably reflects an interaction between these modulators and the residual endogenous agonist at the receptors in cerebral membrane.preparations.

These observations have significant wide implications since they could clearly influence the interpretation of apparent receptor 'down regulation' by agonists. Thus, unless membranes are fully cleared of agonist, an apparent reduction in Bmax for a labelled antagonist without a change in apparent Kd could be interpretated as receptor 'down regulation'. It would seem likely that this may be avoided by preparing well washed membranes in hypotonic buffer and/or performing assays in the presence of Na^+ and guanine nucleotides.

Chapter VIII

CHARACTERISATION OF SOLUBLE ALPHA2-ADRENOCEPTORS

.

VIII.1. Introduction

Solubilization is a process by which a relatively water insoluble compound is 'dissolved' in an aqueous medium by association with the surface active agent (or detergent) micelles. It occurs by virtue of the ability of the detergent to reduce the interfacial free energy between the water and hydrophobic solubilizate molecules allowing a dispersed system of association colloids 'encasing' the solubilizate to exist in solution. Since solubilization depends on the presence of micelles, it only occurs above the C.M.C. - the concentration of the detergent exceeding the surface monolayer formation (Reber & Schott 1975).

The solubilization of receptor proteins is based on the same principles. Most of the membrane proteins, including the neurotransmitter receptor proteins, are probably intrinsic proteins (Singer 1974). Therefore, extraction or solubilization of such proteins depends on replacing the hydrophobic lipid-protein interactions in membrane with detergent-protein interactions (Helenius & Simons 1975; Lindstrom 1978). Detergents differ in their ability to solubilize a given type of receptor protein from a particular tissue, or from different tissues. Obviously, successful solubilization of a receptor protein by a detergent depends not only on the properties of the detergent and receptor protein, but also on the characteristics of the membrane lipid-protein associations in a particular system.

Generally, solubilization is a rather non-specific process (Reber & Schott 1975). Therefore, a good yield of extracted protein may not necessarily mean a good yield of specific receptor protein. To find a good detergent for solubilizing a particular neurotransmitter receptor is probably a matter of 'trial and error'. A variety of detergents have been tried for different receptors. For instance, the glycoside detergent digitonin has been found to successfully solubilize beta-receptors (Dickinson & Nahorski 1981), dopamine D₂receptors (Gorissen et al.1980), muscarinic receptors

(Aronstam et al. 1978), $alpha_2$ -receptors (Smith & Limbird 1981) and opiate receptors (Howells et al. 1982). The zwitterionic detergent CHAPS has also been shown to solubilize $alpha_2$ -receptors (Nambi et al. 1982), the putative calcium channels (Ferry & Glossmann 1983), and dopamine D_2 receptors (Kuno et al. 1983).

At the present time, there have been no reports on the pharmacological characterisation of solubilized alpha2-receptors, except the human platelet (Michel et al. 1981; Smith & Limbird 1981), and recently, the calf cerebral cortex (Sladezek et al. 1984). The present studies were undertaken in an attempt to solubilize and characterize alpha2-receptors in a number of tissues. A major aim was to compare the pharmacological properties of the soluble alpha₂-receptors in the light of the previously observed differences among particulate alpha2-receptors (see Chapter V). It is conceivable that even identical receptor protein from different tissues may exhibit apparent differences in drug affinities. This could be attributed to differences in the membrane environment or constraint, thus resulting in conformational differences in the receptor molecules and influencing the relative extent to which the interactions between the drug molecules and the recognition sites or the receptor groups, can be optimized. Having been solubilized from tissue membranes, soluble alpha₂-receptors would be expected to be relatively free from membrane constraint and exist in a more uniform environment. Thus, studying the characteristics of soluble alpha₂-receptors would be helpful in ruling out membrane constraint/ environment as a possible factor for the apparent observed pharmacological differences between the particulate alpha2-receptors.

Although a number of detergents were used in the present studies, only digitonin appeared to be generally effective in preparing soluble assayable alpha₂=receptors. Furthermore, only alpha₂-receptors from the human platelet, rat kidney and rabbit kidney have been successfully solubilized and detected. Consequently, in the present studies, digitonin-solubilized alpha₂-receptors from these three tissues have been characterized using ³H-rauwolscine, coupled with an efficient PEG precipitation – filtration assay method.

The results show that soluble $alpha_2$ -receptors exhibit pharmacological characteristics similar to those in membranes, and still reveal significant differences between tissues. Therefore, these data provide further evidence for the heteregeneity of $alpha_2$ -receptors.

VIII.2. Methods

VIII.2.1. Solubilization of alpha2-adrenoceptors

VIII.2.1.1 General Procedures

Tissue membranes were prepared as described in Methods (Chapter II). After the final washing, membranes were resuspended in assay buffer (50mM Tris HCl, 0.5 mM EDTA, 0.1% ascorbic acid, pH 7.5) at a concentration of 6 - 25 mg/ml of protein (approximately 6 - 8 mg/ml for platelet, 16 - 20 mg/ml for rat kidney and 20 - 24 mg/ml for rabbit kidney). The membranes were then mixed with equal volume of buffer containing digitonin 10 -26 mM and NaCl 0.2 - 0.4 M (final concentrations for digitonin and NaCl respectively = 5mM and 0.2M for platelet, 10 mM and 0.1 M for rat kidney, 13 mM and 0.1 M for rabbit kidney). The mixtures were thoroughly mixed and left for 15 minutes at 4°C with occassional shaking. Subsequently, the mixtures were homogenized for 1 minute with a Ultra-Turrax homogenizer. The homogenates were then centrifuged at 4°C for 1 hour at 50,000 xg. The yellowish-brown supernatant, representing the solubilized receptor preparation was carefully harvested using transfer pipets, and kept chilled on ice until being used for assays.

VIII.2.1.2. Special Considerations

VIII.2.1.2. A Choice of detergent

A few of the mostly commonly used receptor solubilizing detergents were tested with respect to their ability to solubilize alpha₂-adrenoceptors. These included deoxycholate, sodium cholate, CHAPS (3 - [(3-Cholamidopropyl) dimethylamino] - 1-propane sulfonate), and digitonin.

Preliminary studies were carried out using the rat renal cortical membranes. Table VIII.1. summarizes the comparative effectiveness of these detergents in solubilizing the rat kidney alpha₂-receptors. Both cholate and deoxycholate were ineffective, as only 5% or less of specific ³H-rauwolscine binding sites were detectable, although the total protein yields were more than 40%. Of course, it must be pointed out that possible

Table VIII.1. Solubilization of alpha2-receptors from	ors from rat renal cortex by detergents	
Detergent	% Protein Yield	% Yield of Specific ³ H-Rauwolscine Binding
Cholate (0.4 - 0.8%)	42	4 - 5
Deoxylate (0.4 - 0.8%)	01	4 - 5
10 mM Digitonin	51	19
10 mM Digitonin + 0.1M NaCl	60	38
NaCI (2M)	45	2
10mM CHAPS	63	3
10mM CHAPS + 2 - 4M NaCI	75	28

Membranes of rat renal cortex were solubilized as described in Section VIII.2. and soluble extracts were assayed for ³H-Rauwolscine binding under identical conditions. Results are mean estimates of 2 separate experiments. 198

interference with 3 H-rauwolscine binding assays by detergents cannot yet be excluded. The use of 2 M NaCl alone could apparently also extract a large amount of membrane protein, but the receptor yield was almost negligible. CHAPS appeared to have the capacity to solubilize alpha2receptors. However, a relatively good yield of specific³H-rauwolscine binding sites was only possible when exceptionally high concentrations of NaCl (2-4M) were used. The presence of such high concentrations of NaCl would seem undesirable for binding assays, as it might potentially influence the physico-chemical properties of drug-receptor interactions. In fact, there is a possibility that incomplete sedimentation of membranes may occur as the result of increased density of the medium at high salt concentrations (Gorissen et al. 1981; Laduron & Ilien 1982). Moreover, the presence of high concentrations of NaCl also tended to increase non-specific protein extraction and hence, non-specific ligand binding. In comparison, the glycoside detergent digitonin was not only able to produce a high yield of total membrane protein, but also a relatively high yield of ${}^{3}\text{H-rauwolscine}$ binding sites. Furthermore, the presence of 0.1 M NaCl enhanced the receptor yield almost 100%.

Since the main aim of this study was to compare the characteristics of the soluble alpha₂- receptors from different tissues, solubilization and assay conditions were intended to be kept as uniform as possible. This also included choosing a single detergent which hopefully could be applied effectively to all the tissues under investigation.

Digitonin was indeed as effective in solubilizing $alpha_2$ -receptors from the human platelet as from the rat kidney. The use of 5mM digitonin in the absence of NaCl resulted in a total protein yield of about 45% and a detectable specific ³H-rauwolscine binding yield of about 20%. The presence of 0.2M NaCl enhanced the protein and receptor yields to about 52% and 37% respectively. CHAPS could also produce relatively high yields of protein and ³H-rauwolscine binding sites from platefet membranes, compared to digitonin, but this again required the presence of higher concentratons of NaCl (eg. specific ³H-rauwolscine binding yield was about 15% at 0.2M NaCl and about 40% at 0.5M).

Digitonin extracted about 43% of protein from the rabbit renal cortical membranes, with about 23% yield of detectable specific ³H-rauwolscine binding sites, when solubilization was carried out under optimal conditions. (13 nM digitonin and 0.1 M NaCl). However, the glycoside detergent has limited capacity in solubilizing alpha₂-receptors from rat or rabbit cerebral cortical membranes. Under the optimal conditions, the best yields of detectable receptor sites were no more than 5 - 10%. Moreover, CHAPS was also ineffective in solubilizing assayable alpha₂-receptors from these two tissues.

VIII.2.1.2.B. Optimal Solubilizing Conditions

Although protein yields tended to increase with increasing detergent concentrations, the yields of specific ³H-rauwolscine binding did not necessarily vary in direct proportion to detergent concentrations. In fact, optimal receptor yield appeared to require an appropriate balance between the membrane protein content and detergent concentration, and excessively high detergent concentrations could reduce ³H-rauwolscine specific binding yields. Figures VIII.1.A, B and C illustrate the relationship between specific ³H-rauwolscine binding and detergent concentration in the rat kidney, platelet and rabbit kidney respectively, when solubilization was carried out at a constant amount of membrane protein. The optimal detergent concentrations were found to be about 10 mM, 5 mM and 13 mM respectively for the above tissues.

As indicated earlier, the presence of NaCl markedly enhanced the yield of ³H-rauwolscine binding sites. However, the best yields appeared to occur only at an optimal concentration of NaCl (Figs. VIII.2.A, B and C). Thus, the optimal NaCl concentrations were 0.1M, 0.2M and 0.1M respectively for the rat kidney, human platelet and rabbit kidney membranes

200

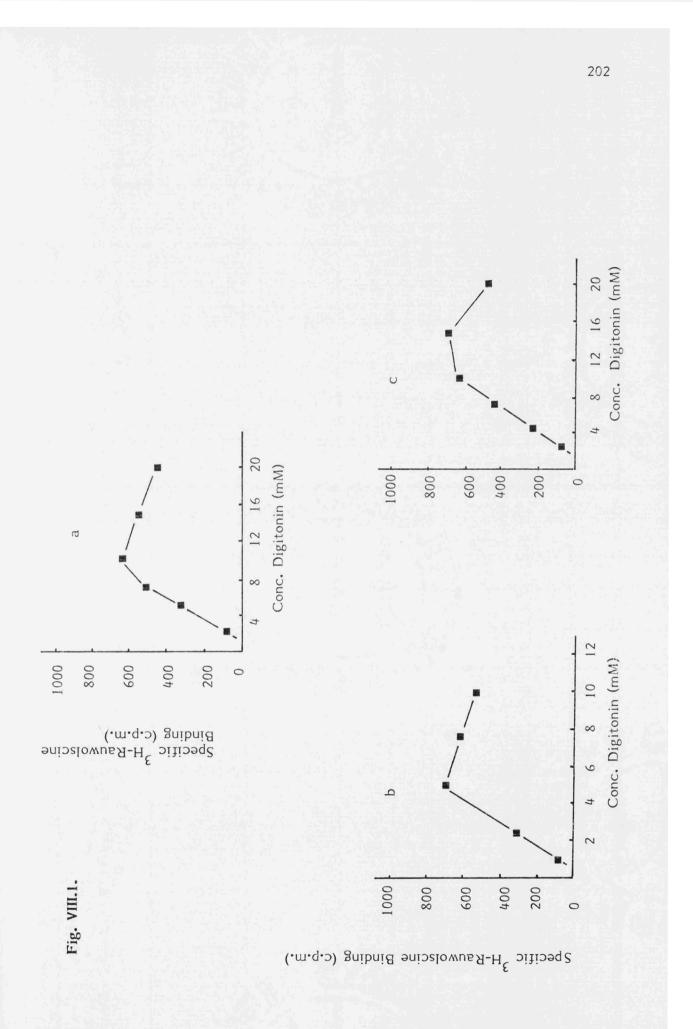
Legend to figures VIII.1.a, b and c

Relationship between assayable specific ³H-Rauwolscine binding and digitonin concentration in solubilization

- a) Rat renal cortex
- b) Human platelet
- c) Rabbit renal cortex

Membranes of each tissues were prepared as described in Chapter III. For each tissue, equal aliquots of membranes were treated in identical manner with an equal volume of digitonin (in Tris-HCl assay buffer) of variable concentration strength as described in Section VIII.2. The mixtures contained a final NaCl concentration of 100 mM. Aliquots of the resultant soluble extracts were assayed for specific ³H-Rauwolscine binding.

The digitonin concentrations indicated in the figures represent the final concentrations in the membranes and detergent mixtures. Data illustrated is from one of two - three similar experiments performed in duplicate.



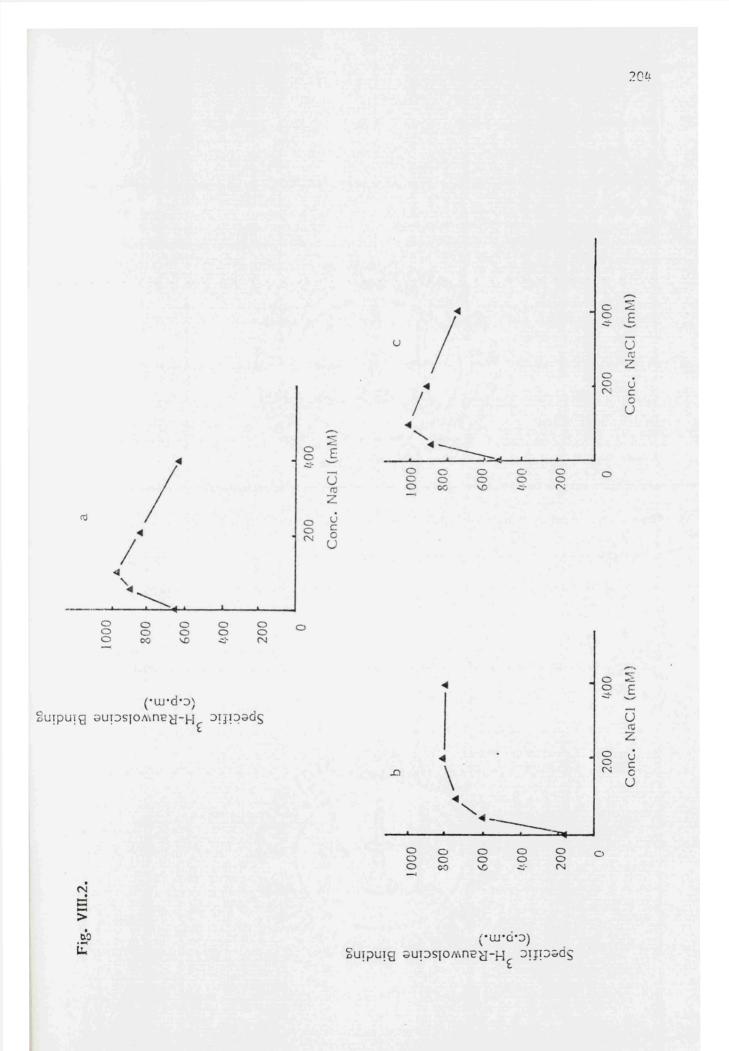
Legend to Figures VIII.2.a, b and c

Relationship between assayable specific ³H-Rauwolscine binding to digitonin-solubilized preparation and NaCl concentration in solubilization.

- a) Rat renal cortex
- b) Human platelet
- c) Rabbit renal cortex

Membranes of human platelet, rat renal cortex and rabbit renal cortex were prepared as described in Chapter III. For each tissue, membrane suspension was divided into equal aliquots. The aliquots were treated in an identical manner by homogenizing with equal volume of digitonin in Tris-HCI assay buffer at an optimal final digitonin concentration (ie 10mM, 5mM and 13mM respectively for rat kidney, human platelet and rabbit kidney) as described in Section VIII.2. The solubilization was carried out in the absence and presence of various concentrations of NaCl. Aliquots of the resultant soluble extracts were assayed for specific ³H-Rauwolscine binding according to the method described in Section VIII.2.

The NaCl concentrations indicated in the figures represent final concentrations in the membranes and detergent mixture. Data presented is from one of two similar experiments performed in duplicate.



when solubilization was carried out, using optimal detergent concentrations for the individual systems.

VIII2.1.2.C. Methods of Solubilization

Rat kidney alpha₂-receptors were solubilized with digitonin under identical conditions by the following methods to evaluate possible differences in the yield of specific ³H-rauwolscine binding:

A. Membranes were treated by homogenization with digitonin
NaCl (final concentrations = 10 mM and 0.1 M respectively) for
1 minute <u>only</u> before being centrifuged at 4^oC for 60 minutes at
50,000 xg.

B. Membranes were mixed with digitonin - NaCl and stirred in cold for 15 minutes before being subjected to homogenization and centrifugation as in A.

C. Membranes were only stirred in cold with digitonin - NaCl for 30 minutes before centrifugation. The results indicated that there was little difference in the total protein yield between the three methods, but that method B appeared to produce the highest yield of specific ³H-rauwolscine binding sites (though it was in fact only slightly higher than the other two methods - 32% compared to 27%). Apparently, solubilization was complete within a fairly short period of extraction time. However, it is quite clear that considerable amount of protein/receptors might have also been extracted during the 1 hour centrifugation process itself.

VIII.2.1.2.D. The 'soluble' nature of digitonin extracts

The routine solubilization procedures in this study involved centrifuging digitonin-treated membrane suspensions for 60 minutes at 50,000 xg. The yellowish-brown supernatant was regarded as the soluble receptor preparation. The true 'soluble' nature of such preparations was evaluated

by subjecting the 50,000 xg supernatant to one further hour of centrifugation at 100,000 xg and to ultrafiltration through $0.2 \,\mu m$ millipore filter.

The results showed that after ultracentrifugation, there was no apparent visual sediment. Furthermore, specific 3 H-rauwolscine activity in the supernatant and ultrafiltrate was more than 96% of that in the 50,000 xg supernatant. Hence, the 'soluble' nature of the digitonin-solubilized 50,000 xg supernatant was firmly established.

VIII.2.1.2.E. Stability of soluble alpha2-receptors

The stability of soluble alpha₂-receptors was assessed using rat kidney soluble preparations.

If kept at -40° C or -70° C, rat kidney soluble preparations appeared reasonably stable for at least 2 - 3 weeks, without significant reduction of ³H-rauwolscine specific activity.

Less than 15% specific 3 H-rauwolscine binding to soluble rat kidney preparation was lost after 2 hours of storage at $4{}^{0}$ C.

If soluble preparation was left at R.T. (22 - 25° C), less than 4 - 5% of specific ³H-rauwolscine binding was lost in over 1 hour (excluding assay time). The half-life was approximately $4\frac{1}{2}$ hours.

VIII.2.2. Radioligand binding assays of soluble alpha2-receptors

VIII2.2.1. General Procedures

Assays of soluble receptor preparation were performed under conditions as close to those with particulate preparation as possible.

Assays were performed in a total volume of 250 µl of Tris-HCl 50 mM, EDTA 0.5 mM, ascorbate 0.1%, pH 7.5 containing 50 µl radioligand and 100 µl soluble receptor preparation. Final assay concentration of NaCl was adjusted to 80 mM in all samples.

Incubations were carried out at R.T. (22 - 25° C) for 40 minutes upon the addition of soluble receptor preparation. Reaction was stopped by adding 0.25 ml ice-cold bovine 2-globulin (0.5 mg/0.25 ml), followed 206

immediately by 1 ml of ice-cold polyethylene glycol 6000 (M.W. 6 - 8000)(15%) in assay buffer. The contents were quickly and thoroughly mixed using a vortex mixer and left in cold (4° C) for 10 minutes before being filtered on GF/B filters under vacuum. The precipitates collected on the filters were counted for radioactivity on a liquid scintillation counter as in the particulate binding assays. Non-specific binding was defined as that binding of ³H-rauwolscine not displaceable by 5 μ M phentolamine.

VIII.2.2.2. Special Considerations

VIII.2.2.2.A. Assay Methods

Soluble receptors can usually be assayed by methods such as gel-filtration, charcoal adsorption and polyethylene glycol(PEG) or ammonium sulphate precipitation.

Although the gel-filtration method is a relatively high-capacity method, it is also more time-consuming, compared to the adsorption or precipitation methods which allow large number of samples to be assayed efficiently.

Preliminary evaluation of the charcoal adsorption method in this study indicated that high concentrations of charcoal (6 - 8%) was needed to adsorb at least 98% of free 3 H-rauwolscine. At such high concentrations of charcoal, separation of bound and free radioligand became a problem. Indeed, the non-specific binding was of high percentage relative to the total binding.

In comparison, the precipitation method coupled with filtration under vacuum appeared to be an efficient way of assaying soluble alpha₂-receptor binding. The PEG precipitation in particular produced a relatively low % background (or non-specific) radioligand binding.

VIII.2.2.2.B. Optimal Conditions for PEG Precipitation Assays

In practice, PEG precipitation of soluble proteins requires the presence of a 'carrier' such as γ -globulin which itself quickly precipitates in aqueous solutions upon the addition of PEG, presumably as a result of competition for water molecules hydrating the proteins (Chard 1980).

Optimal concentrations of χ -globulin and PEG 6000 were determined which would produce a precipitating system best suited for the ³H-rauwolscinealpha₂-receptor binding assays. It was found that the best combination was bovine χ -globulin at a final concentration of 1 mg/ml together with PEG at a final concentration of 10%. Such combination provided the highest specific ³H-rauwolscine binding and specific activity.

VIII.2.2.2.C. Washing of filters

This step seemed very essential, since much of the free ligand could be easily 'trapped' on the filters because of the high viscosity of the medium. 15 to 20 ml washing with ice cold 10% PEG could sufficiently reduce the NSB to a minimum, but 3 x 5 ml washes produced the highest specific ³H-rauwolscine binding activity. The washing procedure only lasted for 15 - 20 seconds. Hence, the dissociation of radiolabel from the filters would be expected to be negligible.

VIII2.2.2.D. Time interval between PEG addition and filtration

Precipitation of proteins appeared to be complete very quickly subsequent to PEG/ χ -globulin addition, provided the contents were thoroughly mixed. Specific ³H-rauwolscine binding in fact showed an approximately 5 - 6% reduction over the first 2 minutes between PEG addition and filtration. However, even if samples were left at R.T. for a further 10 - 12 minutes before filtration, there was little change in the ³H-rauwolscine specific binding or specific activity. However, to avoid possible radioligand dissociation which might occur in some systems but not others, samples were usually left in the cold (4^oC) for 10 minutes between PEG addition and filtration.

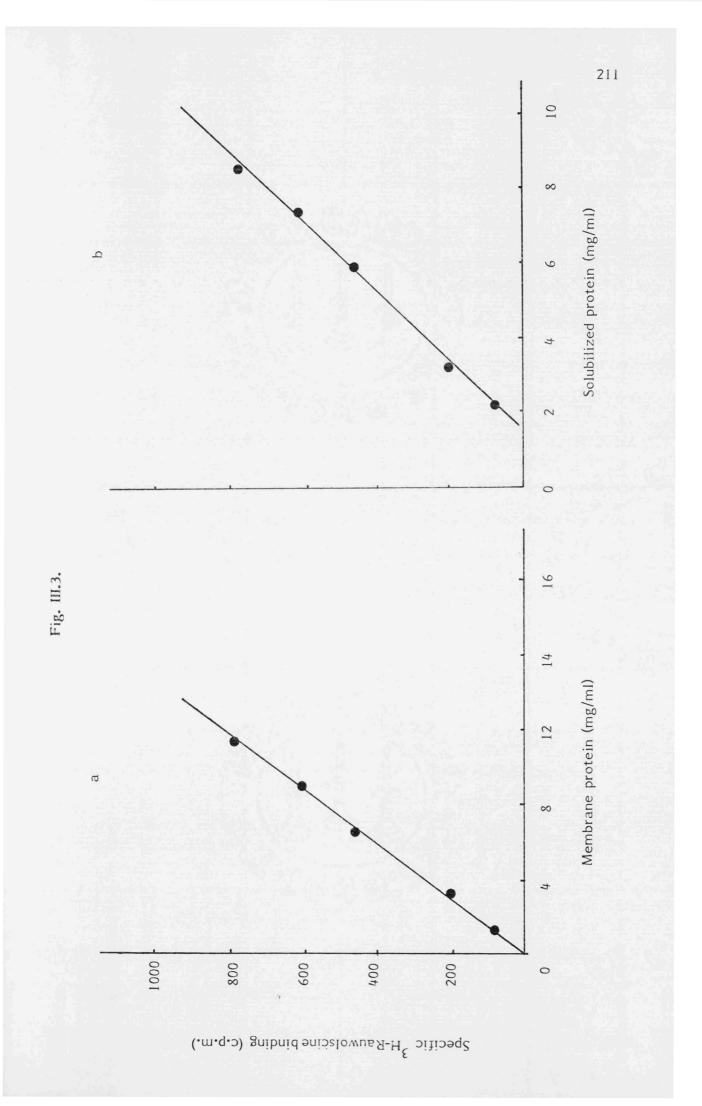
VIII.2.2.2.E. Effectiveness of PEG precipitation-filtration as a means of separation

A series of dilutions were made from a concentrated rat kidney membrane preparation. Equal aliquot from each dilution was treated in identical manner with an equal quantity of digitonin-NaCl. ³H-Rauwolscine binding to the solubilized preparations was assayed using the PEG precipitationfiltration method. As shown in Fig. VIII.3.A., there was a good linear relationship between specific ³H-rauwolscine binding in the resultant soluble preparation and starting membrane protein concentration (at least over the concentration range of 1.5 - 12 mg/ml). Moreover, there was also a good linear relationship between specific ³H-rauwolscine binding and the extracted soluble protein concentration (Fig. VIII.3.B.), at least over the range of approximately 2 - 9 mg/ml. The soluble protein concentrations used in the present studies generally fell within this range. Therefore, these results confirm that the PEG precipitation-filtration method is an appropriate method for the assays of soluble alpha₂-receptors in these studies.

Legend to Figures VIII.3.a., and b

VIII.3.a. Relationship between specific ³H-rauwolscine binding in soluble preparation and starting membrane concentration. Rat kidney membranes were prepared as described in Chapter III. concentrated kidney membranes were diluted 3/4, 1/2, 1/4 and 1/8. Equal aliquots were solubilized with equal volumes of digitonin (20 mM)/NaCl (0.2M) as described in Methods section of this chapter. Soluble preparations were assayed for specific ³H-rauwolscine binding by PEG precipitation-filtration method. Results are from one of two similar experiments performed in duplicate.

VIII.3.b. Relationship between specific ³H-rauwolscine binding and soluble protein concentration. Protein concentrations in the above soluble membrane extracts were determined and plotted against assayable ³H-rauwolscine specific binding. A linear relationship was obtained between the two parameters at least over the soluble protein range of about 2 - 9 mg/ml. Results presented are from one single experiment.



VIII.3. Results

VIII.3.1. Characterisation of soluble human platelet alpha₂-adrenoceptors VIII.3.1.1 Equilibrium binding and kinetics studies with ³H-rauwolscine

³H-rauwolscine bound to digitonin-solubilized receptor preparations of the human platelet with a capacity comparable to that assessed in platelet membranes. The binding was saturable and reversible (Fig. VIII.4,5). Scatchard analysis of binding data suggests that ³H-rauwolscine bound to a homogeneous population of receptor sites, with an apparent Bmax of 177 ± 19.64 f.mole/mg protein, and a kd of 4.59 ± 0.47 nM (n = 6) (table VIII.2).

The binding of ³H-rauwolscine to soluble platelet receptor preparations at R.T. was relatively fast, reaching equilibrium in 30 - 40 minutes. The dissociation occurred at a rather slow rate, with a rate constant (K_2) of 0.03 min⁻¹ (Fig. VIII.5) which was identical to that in membranes. However, the association rate constant (K_1) was considerably lower in the soluble receptor preparations than in membranes (0.011 nM⁻¹ min⁻¹, compared to 0.073 nM⁻¹ min⁻¹). Hence, the kinetically derived higher Kd for ³H-rauwolscine in the soluble platelet receptor preparations, compared to that in the membranes (2.73 nM and 0.4 nM respectively) appeared to be mainly attributed to the slower association rate.

VIII.3.1.2 Pharmacological characteristics

As in the platelet membranes, specific ³H-rauwolscine binding to platelet soluble receptor preparations could be displaced by various agents to produce a pharmacological profile. As shown in table VIII.3 and Figures VIII.6A and B, the rank order of drug potency in inhibiting ³H-rauwolscine binding is identical to that observed in platelet membranes, and suggests interaction at alpha₂-adrenoceptors. Thus, yohimbine appeared almost equipotent with rauwolscine but both were much more potent than the alpha₁-antagonists corynanthine, prazosin, indoramin and labetalol in that order. In addition, the alpha₂-agonists, clonidine, adrenaline and

Table VIII.2. Specifi	Specific 3 H-Rauwolscinebinding to particulate and soluble alpha $_{2}$ -receptors	articulate and soluble a	lpha ₂ -receptors	
		Human platelet	Rat renal cortex	Rabbit renal cortex
Membrane	Bmax (f.mol/mg.P.)	144 ± 5	120.38 ± 10.2	76.73 <u>+</u> 6.32
r i chai a liùi	Kd (nM)	0.55 <u>+</u> 0.06	2.68 <u>+</u> 0.29	5.61 ± 0.35
Soluble	Bmax (f.mol/mg.P.)	177 <u>+</u> 19.64	63.08 ± 5.17	33.8 <u>+</u> 5.32
r tepat attor	Kd (nM)	4.59 <u>+</u> 0.47	6.34 ± 1.12	7.02 ± 1.43
³ H-Rauwolscinesatura of approximately 0-3.	³ H-Rauwolscinesaturation experiments for membran of approximately 0-35 nM as described in Chapter I	nous and soluble recepto III and Chapter VIII (Sec	or preparations were p tion VIII.2.). Binding	³ H-Rauwolscinesaturation experiments for membranous and soluble receptor preparations were performed at ligand concentrations of approximately 0-35 nM as described in Chapter III and Chapter VIII (Section VIII.2.). Binding data was analysed by Scatchard
plots. Results preser	plots. Results presented are mean <u>+</u> S.E.M. of at least 3 - 5 separate experiments performed in duplicate.	east 3 - 5 separate exp	eriments performed ir	duplicate.

213

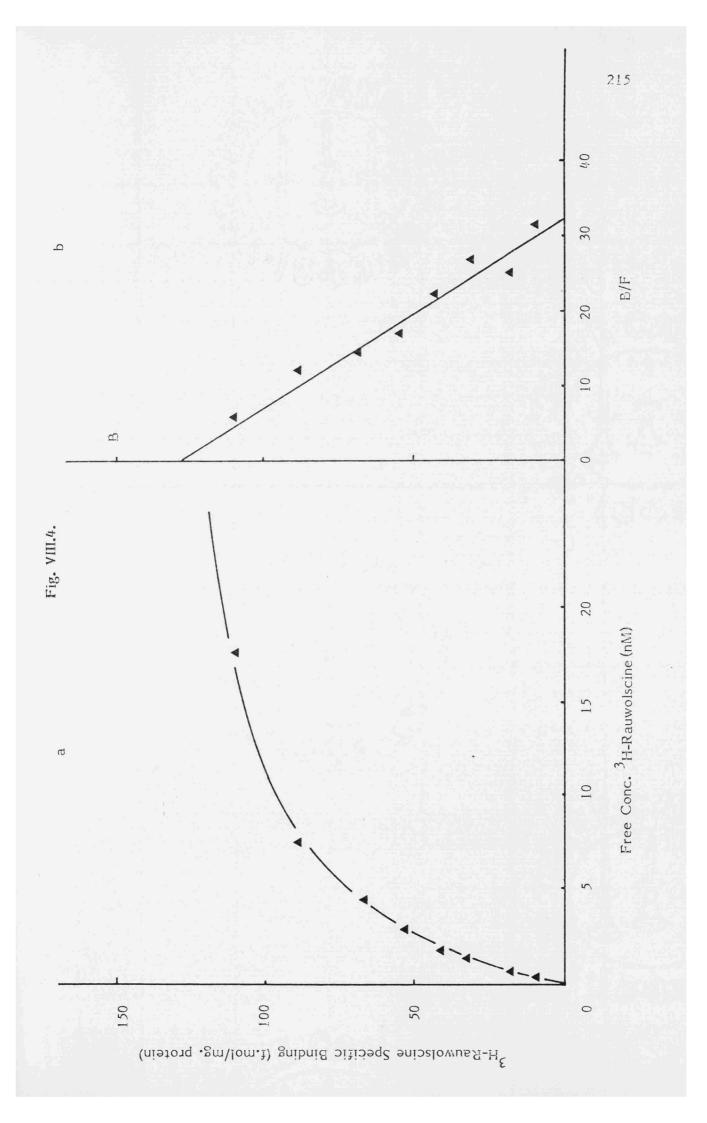
•

Legend to Figure VIII.4.

Specific 3 H-rauwolscine binding to soluble platelet preparation. Platelet membranes were prepared and subjected to solubilization as described in Methods section of this chapter. 3 H-rauwolscine saturation binding assays were performed at R.T. at approximately 0 - 35 nM at a protein concentration of about 2 mg/ml.

- a) Saturation isotherm
- b) Scatchard plot of binding data.

Data presented is from one experiment representative of 4 separate experiments performed in duplicate. Bmax = 126 f.mol/mg protein; Kd = 3.9 nM.



Legend to Figure VIII.5.

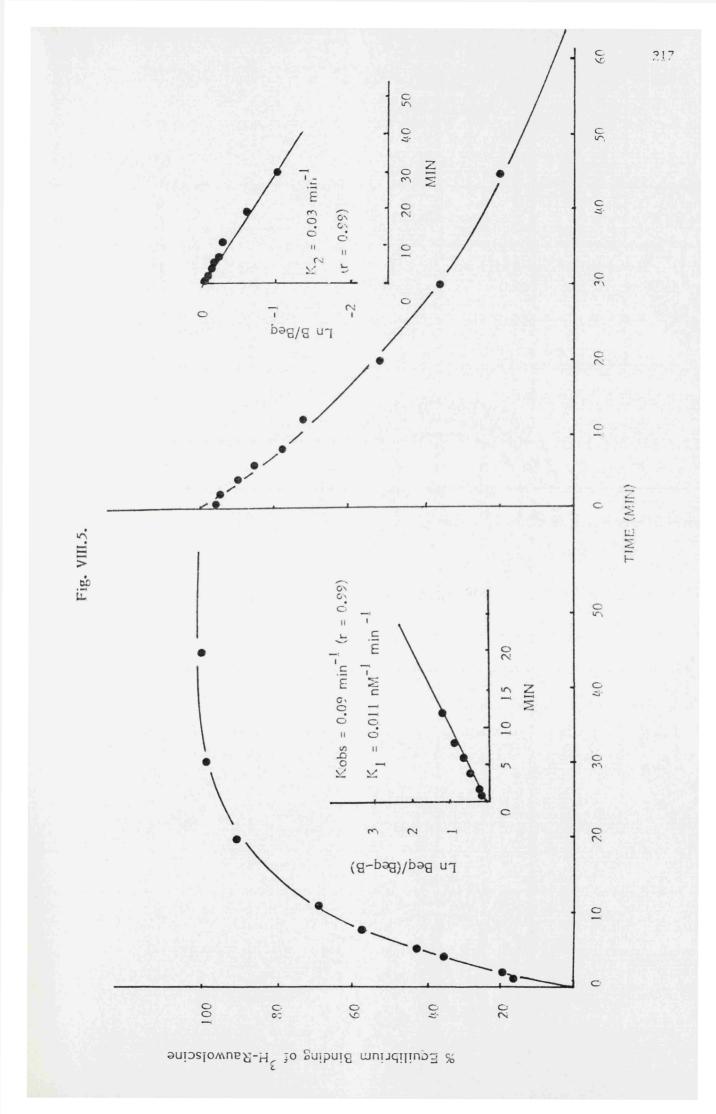
Kinetics of 3 H-Rauwolscine binding to soluble human platelet preparation at R.T.

Human platelet soluble alpha₂-receptors were prepared as described in Section VIII.2. Kinetics experiments of ³H-Rauwolscine binding were conducted in a similar manner to that described in Chapter III under assay conditions described in Section VIII.2. (this Chapter).

Left panel = association curve; the inset shows the pseudo first-order rate plot for the association reaction.

Right panel = dissociation of ³H-Rauwolscine binding; the inset shows the first-order dissociation rate plot.

Data was analysed as described in Chapter III. The data illustrated here is from one of two similar experiments performed in duplicate.

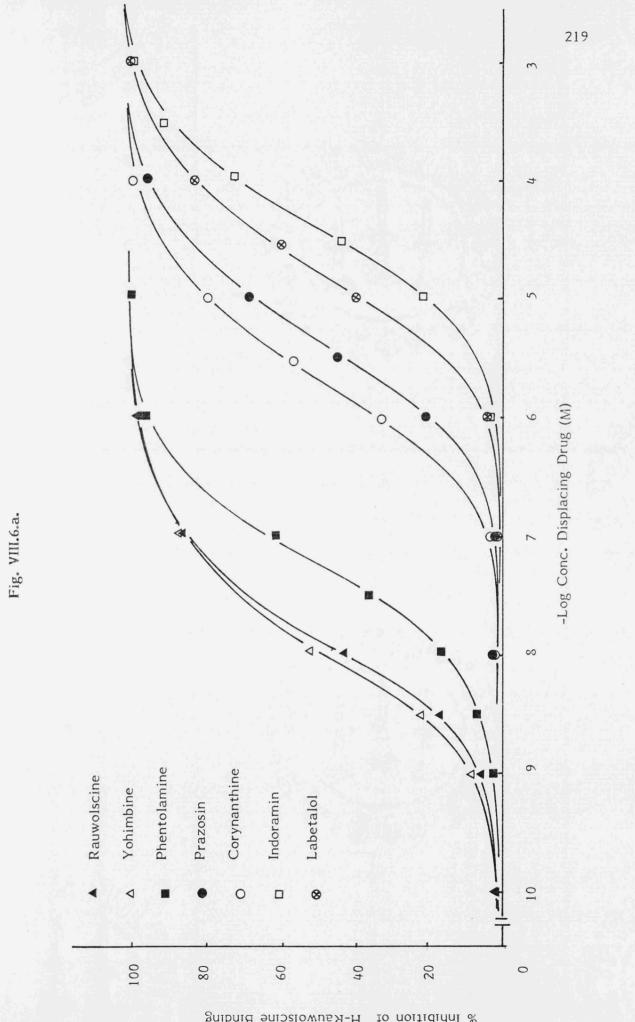


Legend to figures VIII.6.a. and b.

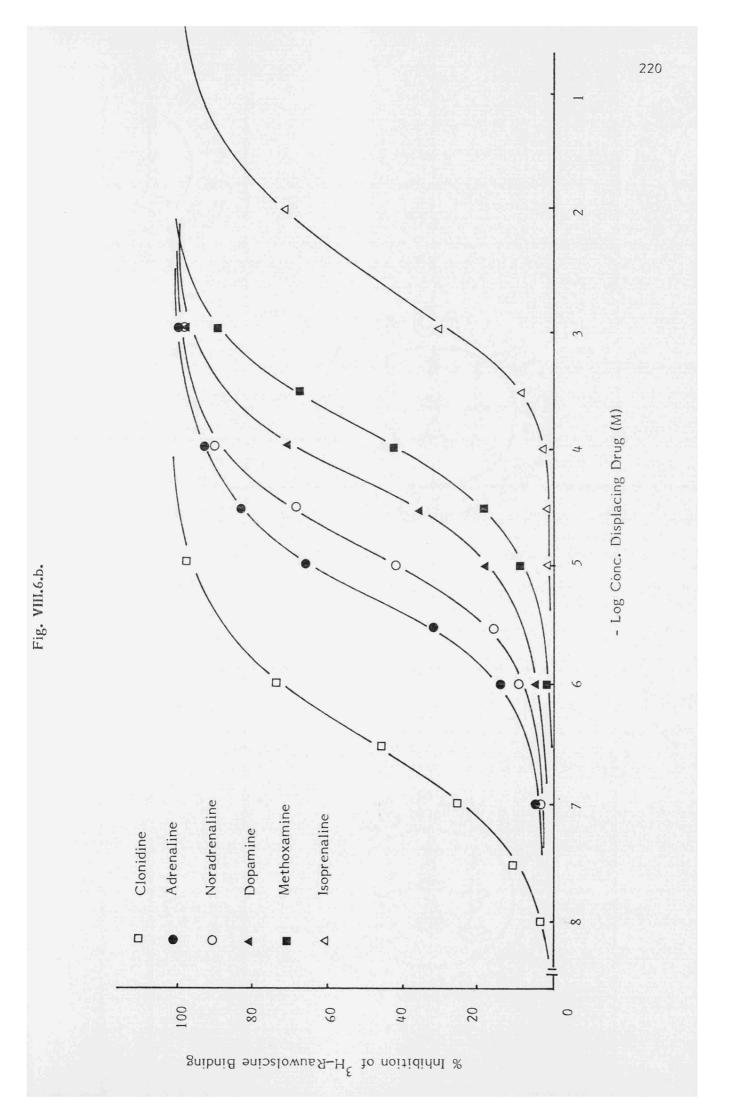
Displacement of specific 3 H-rauwolscine binding to soluble platelet preparation by drug agents.

- a) Antagonists
- b) Agonists

Assays were performed at 4 - 6 nM 3 H-rauwolscine with increasing concentrations of displacing drugs under conditions described in Section VIII.2. The data presented are means of 3 - 6 separate experiments performed in duplicate. The S.E.M. are generally less than \pm 5%



 $^{\rm 8}_{\rm A}H^{\rm 2}_{\rm B}$ and $^{\rm 1}_{\rm A}H^{\rm 2}_{\rm A}$. Inhibition of $^{\rm 3}_{\rm A}H^{\rm 2}_{\rm A}$



Affinities of drugs at soluble alpha $_2$ -receptors labelled by 3 H-Rauwolscine Table VIII.3.

Ki (nM)

Drug	Human Platelet	Plate	let		Rat Kidney	ney			Rabbit Kidney	Sidne	У	
Rauwolscine	5.15	+1	0.75	(66.0)	7	+1	0.24	(1.01)	5.34	+1	0.68	(1.0)
Yohimbine	4.1	+1	0.51	(56.0)	15	+1	1.7	(1.03)	18	+	2.8	(0.1)
Phentolamine	21.4	+1	1.48	(2.0)	28	+	4.4	(0.95)	42	+1	9	(96°0)
Corynanthine	1274	+1	197	(96.0)	421	+1	50.7	(1.0)	878	+1	171	(20.0)
Prazosin	1875	+1	169	(66.0)	73.6	+1	6.2	(0.1)	326	+ 1	25.7	(86.0)
Indoramin	19000	+1	2757	(66.0)	2735	+1	355	(1.02)	1947	+!	249	(20.0)
Labetalol	10037	+!	1276	(26.0)	4810	+1	318	(1.01		1		
Clonidine	122	+1	11.8	(6.03)	55.3	+1	6.6	(0.89)	109	+	10.2	(0.74)
Adrenaline	2420	+1	147	(86.0)	3898	+1	361	(0.63)	6523	+1	323	(0.76)
Noradrenaline	6887	+1	457	(26.0)	06†9	+1	560	(0.63)	6700	+1	397	(0.85)
Methoxamine	66450	+!	4702	(2.0)	57500	+1	4419	(66.0)	49150	+1	5680	(20.0)
Dopamine	20640	+1	1824	(2.0)	19833	+1	1687	(6.0)	123200	+}	8108	(66.0)
Isoprenaline	1118000 ±	+1	59254	(96.0)	701000	+1	52317	(56.0)	748000	+1	47140	(20.0)

determed from IC₅₀ as described in Chapter III. Values shown are means \pm S.E.M. of at least 3 - 6 separate experiments performed Competition experiments were performed as described in Methods (Section VIII.2.) at 4 - 6 nM ³H-Rauwolscine. Ki values were in duplicate. The numbers in parentheses are mean slope factors of displacement curves. noradrenaline were more potent than the alpha₁-agonist methoxamine. Both dopamine and isoprenaline were relatively weak. It is quite interesting that almost all these drugs exhibited weaker affinities in the soluble receptor preparations than in membranes. Although the presence of 80 mM NaCl in the soluble receptor preparations might potentially cause a reduction in the affinity of drugs, particularly for the agonists, this does not appear to sufficiently account for the overall large discrepancies in drug affinity between the soluble and membranous platelet preparations. Indeed, it was found that the presence of 100 mM NaCl produced considerably less influence on the affinities of the antagonists in the membranes than in the soluble preparations. Finally it is worth noticing that all the drugs, agonists and antagonists alike, generated steep displacement curves with slopes close to unity. This suggests that platelet alpha₂-receptors are uncoupled from the N-protein during solubilization, thus interacting with agonists in a homogenous low-affinity state (Smith & Limbird 1981).

VIII.3.2. Characterisation of soluble alpha₂-adrenoceptors of the rat renal cortex VIII.3.2.1. Equilibrium binding and kinetics studies with ³H-rauwolscine

The apparent maximal binding capacity (Bmax) for ³H-rauwolscine was somewhat lower in the rat renal cortical soluble preparation than in membranes (Table VIII.2). However, this probably only reflects a lower yield of detectable specific ³H-rauwolscine binding sites relative to the total protein yield. The apparent dissociation constant (Kd) of the ligand as derived from equilibrium binding studies also appeared higher in the soluble receptor preparations than in membranes. Nevertheless, the binding of ³H-rauwolscine was relatively rapid, reaching equilibrium in 30 - 40 minutes at R.T. (Fig. VIII.8). Moreover, the specific binding was saturable and reversible (Fig. VIII.7 and 8) and indicative of an interaction with a homogenous population of receptor sites.

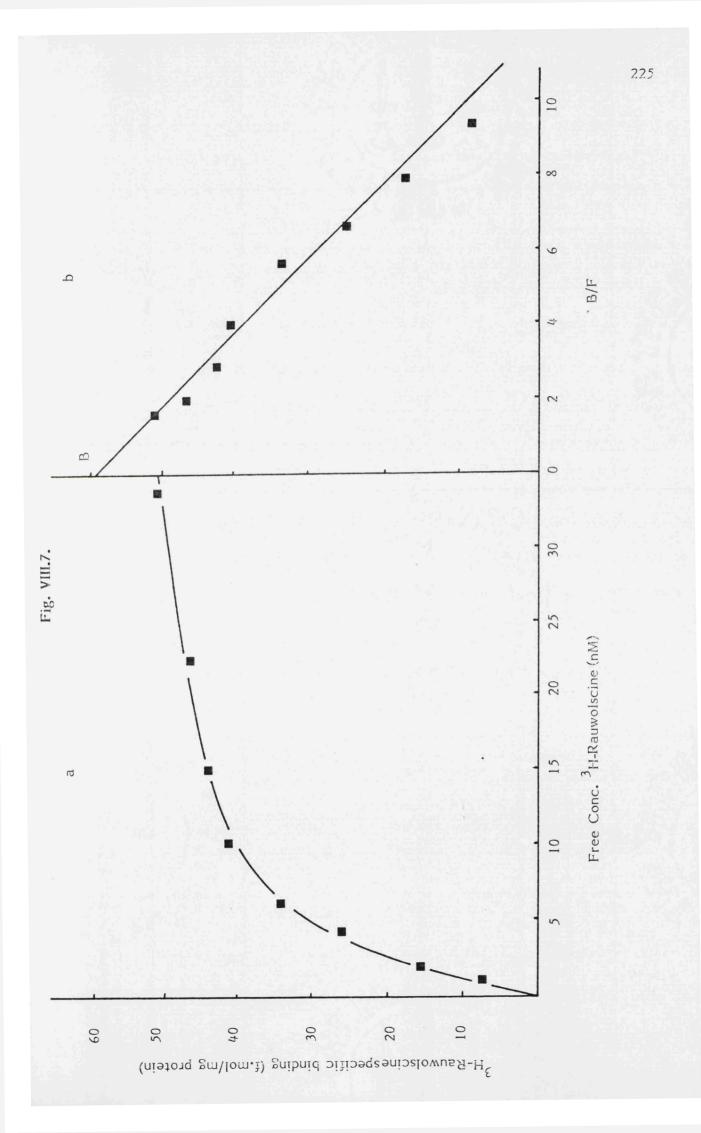
The kinetics of ³H-rauwolscine binding to soluble receptor preparations of the rat kidney and human platelet were quite similar. For example, the association rate constant was $0.017 \text{ nM}^{-1} \text{ min}^{-1}$ in the rat kidney compared to $0.011 \text{ nM}^{-1}\text{min}^{-1}$ in the platelet. The dissociation rates constants were 0.30 min^{-1} and 0.04 min^{-1} respectively. Consequently, the calculated Kd (k₂/k₁) values for ³H-rauwolscine in the soluble platelet and rat kidney receptor preparations, 2.73 nM and 2.27 nM respectively, were quite similar to each other and were in reasonably good agreement with those derived from equilibrium binding studies. However, despite of the similarity of the kinetically derived Kd values for ³H-rauwolscine between the rat kidney soluble and membranous receptor preparations the apparent association and dissociation rate constants were both somewhat higher in the membranes than in the soluble receptors (k₁ and k₂ were 0.0176 nM ⁻¹ min ⁻¹ and 0.04 min ⁻¹ respectively in the soluble receptor preparations, compared to 0.04 nM⁻¹ min ⁻¹ and 0.08 min ⁻¹ respectively in the membranes).

Legend to Figure VIII.7.

 3 H-rauwolscine specific binding to soluble rat renal cortical preparation. Rat renal cortical membranes were treated with digitonin-NaCl as described in the Methods section (VIII.2.). Saturation binding assays of 3 H-rauwolscine (approximately0-35 nM) were performed with soluble rat kidney preparation at a protein concentration of 5 - 6 mg/ml.

- a) Saturation isotherm
- b) Scatchard analysis of binding data

Results illustrated are from one of five similar experiments performed in duplicate. Bmax = 59.4 f.mol/mg protein; Kd = 5.28 nM.



Legend to Figure VIII.8.

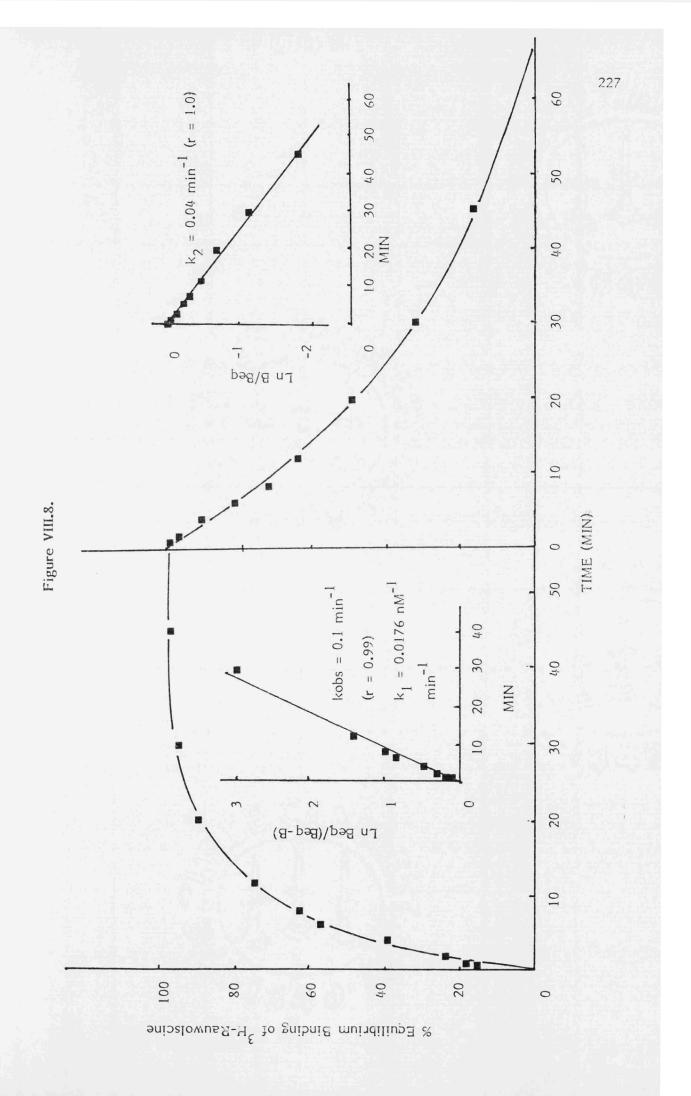
Kinetics of ³H-Rauwolscine binding to soluble rat renal cortical preparation at R.T.

Rat kidney membranes were prepared and extracted with digitonin as described in Chapter III and Section VIII.2. of this chapter. Kinetics experiments of ³H-Rauwolscine binding to soluble preparation were carried out under conditions described in Section VIII.2, with the assay procedures similar to those described in Chapter III for membranes.

Left panel = association curve; the inset shows the pseudo first-order rate plot for the reaction.

Right panel = dissociation of ³H-Rauwolscine binding; the inset shows the first-order dissociation rate plot.

Data illustrated is from one of two similar experiments performed in duplicate, with results differing by less than 5%.



VIII.3.2.2. Pharmacological characteristics

Specific ³H-rauwolscine binding sites of the solubilized rat kidney preparations displayed a pharmacological behaviour similar to that in membranes. Therefore, although the overall pharmacological profile was still one typical of an alpha2-receptor (Table VIII.3., Fig VIII.9.A,B), the rank order of drug potency in inhibiting ³H-rauwolscine binding was guite different from that in platelet. Yohimbine had a significantly lower affinity than rauwolscine in the soluble rat kidney preparations, compared to the soluble platelet preparations where yohimbine appeared equipotent with rauwolscine. In addition, although the alpha1-antagonists were significantly weaker than yohimbine or rauwolscine, they were relatively more potent inhibitors of 3 H-rauwolscine binding in the soluble rat kidney receptor preparations (Table VIII.3., Fig. VIII.10. A,B,C and D) than in the soluble platelet receptor preparations. It is important to note that almost all the antagonists displaced ³H-rauwolscine binding with curves of slope close to unity, suggesting that interaction occurred at a homogenous population of sites or affinity states. However, the curves for clonidine, adrenaline and noradrenaline were rather shallow, even though no modulation in affinity by guanine nucleotides was apparent (Fig. VIII.14.A.B.).

Legend to figures VIII.9.a. and b.

Displacement of specific ³H-Rauwolscine binding to soluble rat renal cortical preparation by drug agents.

- a) Antagonist displacement
- b) Agonist displacement

Soluble rat kidney preparations were prepared as described in Section VIII2. Displacement experiments were carried out at 4 - 6 nM 3 H-rauwolscine. The data points are means of 3 - 6 experiments performed in duplicate with S.E.M. around + 5 - 7%.

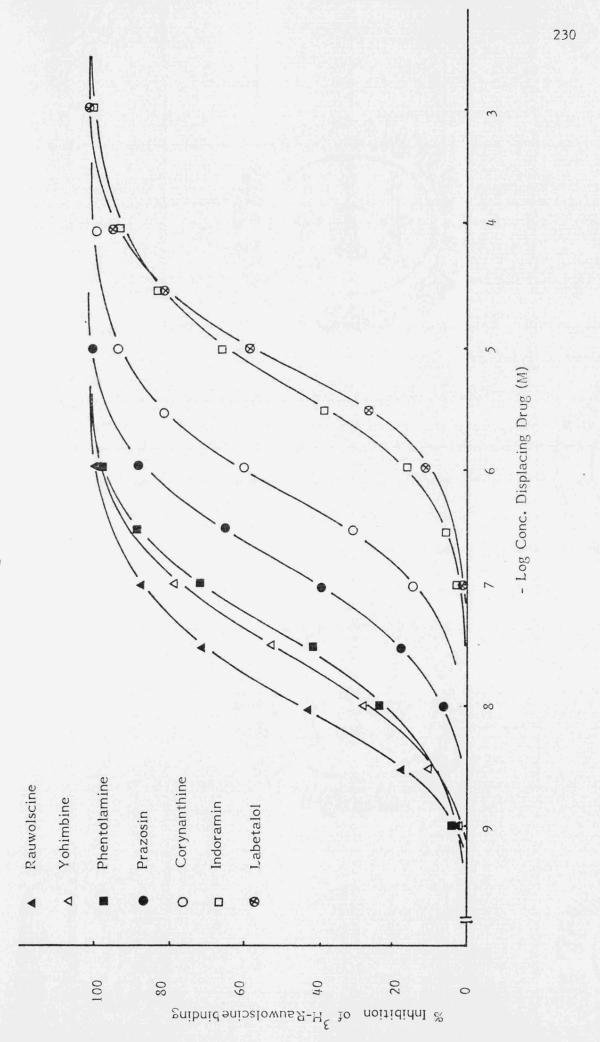
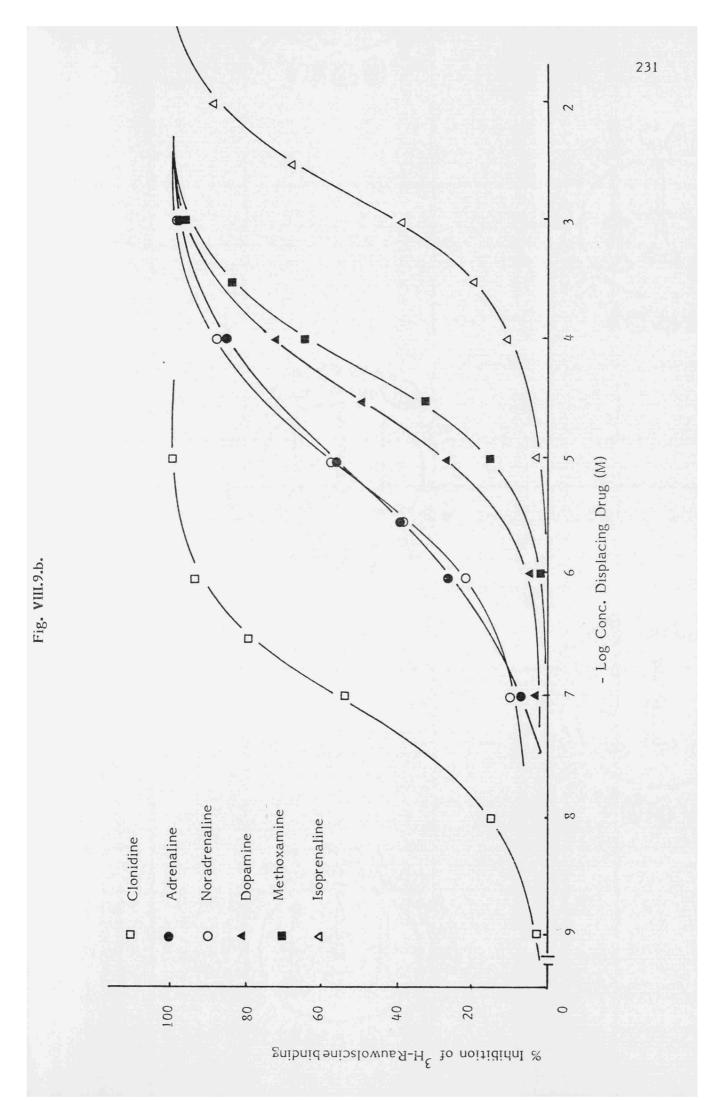


Fig. VIII.9.a.

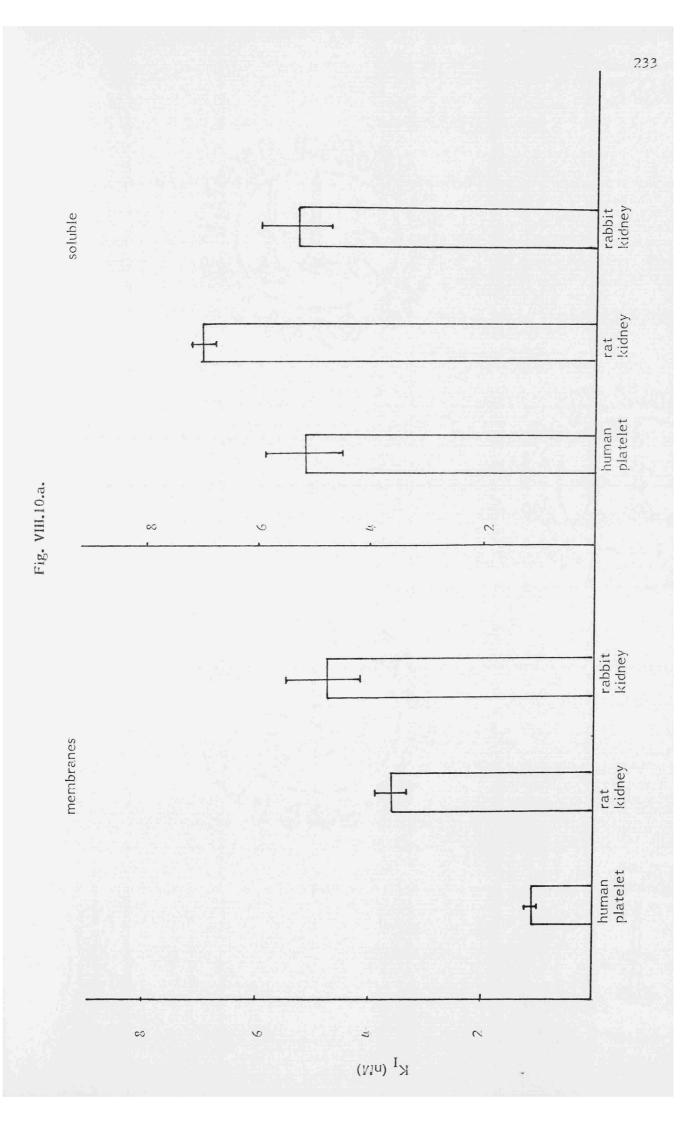


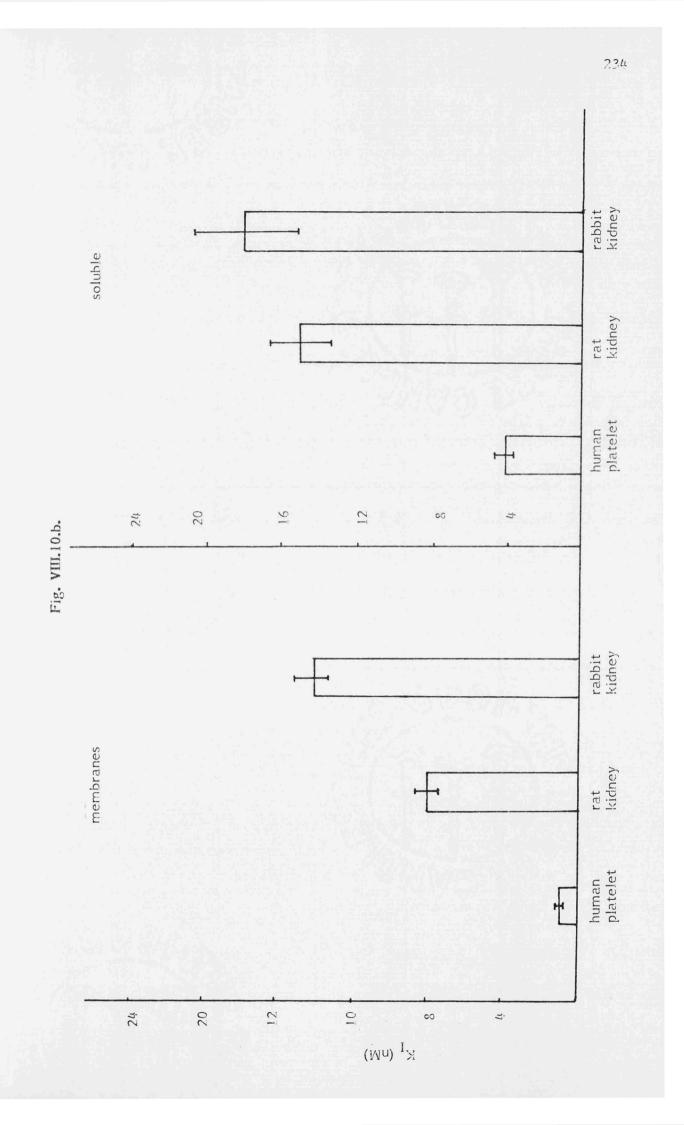
Legend to Figures VIII.10.a, b, c and d

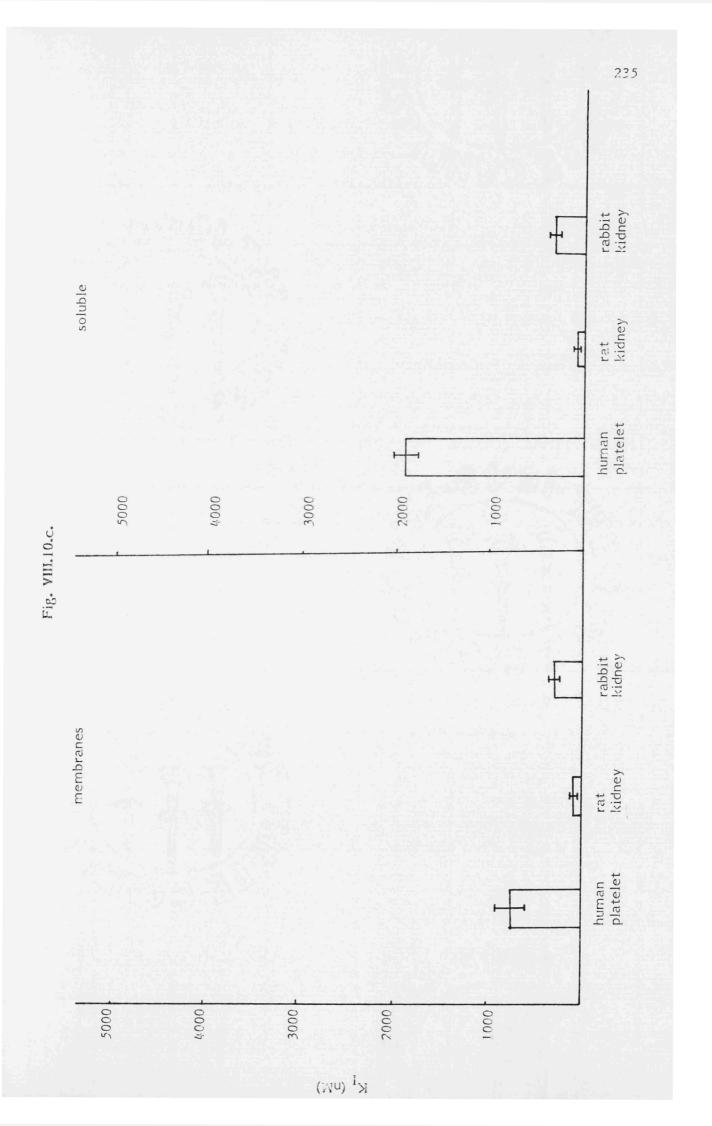
Comparison of Ki values of selective antagonists at ³H-Rauwolscine binding sites in particulate and soluble preparations of human platelet, rat renal cortex and rabbit renal cortex.

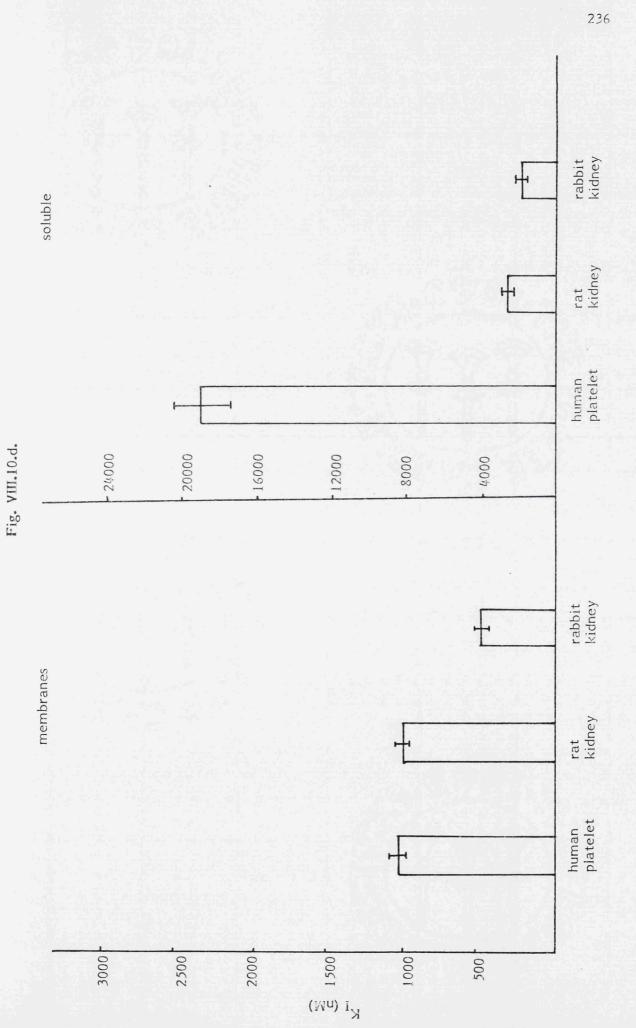
- a) Rauwolscine
- b) Yohimbine
- c) Prazosin
- d) Indoramin

Ki values were determined in drug displacement experiments of 3 H-Rauwolscine binding to membranes (Chapters IV & V) and soluble preparation (table VIII.3, this chapter) of the above three tissues.









VIII.3.3. Characterisation of soluble alpha2-adrenoceptors of the rabbit renal cortex

VIII.3.3.1. Equilibrium binding and kinetics studies with ³H-rauwolscine

 3 H-rauwolscine bound to solubilized rabbit renal cortical preparations at least as rapidly as to solubilized platelet or rat kidney preparations (Fig. VIII.12), reaching equilibrium in 30 - 40 minutes at R.T. The Scatchard analysis of specific binding yielded an apparent binding capacity (Bmax) of 33.8 ±5.32 f.mole mg protein (n = 3), and an apparent dissociation constant (Kd) of 7.02 ± 1.43 (Table VIII.2, Fig. VIII.11). The Hill coefficient was 1.07 ± 0.01, suggesting that binding occurred at a homogeneous population of binding sites. The apparently lower receptor density in the solubilized receptor preparations, compared to the particulate preparations, may be due to a low alpha₂-receptor yield relative to total protein yield.

The kinetics of ³H-rauwolscine binding to solubilized rabbit kidney preparations resembled that of either platelet or rat kidney preparations. For instance, the apparent K_1 and K_2 values were found to be 0.0154 nM⁻¹ min ⁻¹ and 0.047 min⁻¹ respectively, yielding a Kd (K_1/K_2) of 3.05 nM. These values were in fact also similar to the corresponding ones in the particulate preparations.

VIII.3.3.2. Pharmacological characteristics

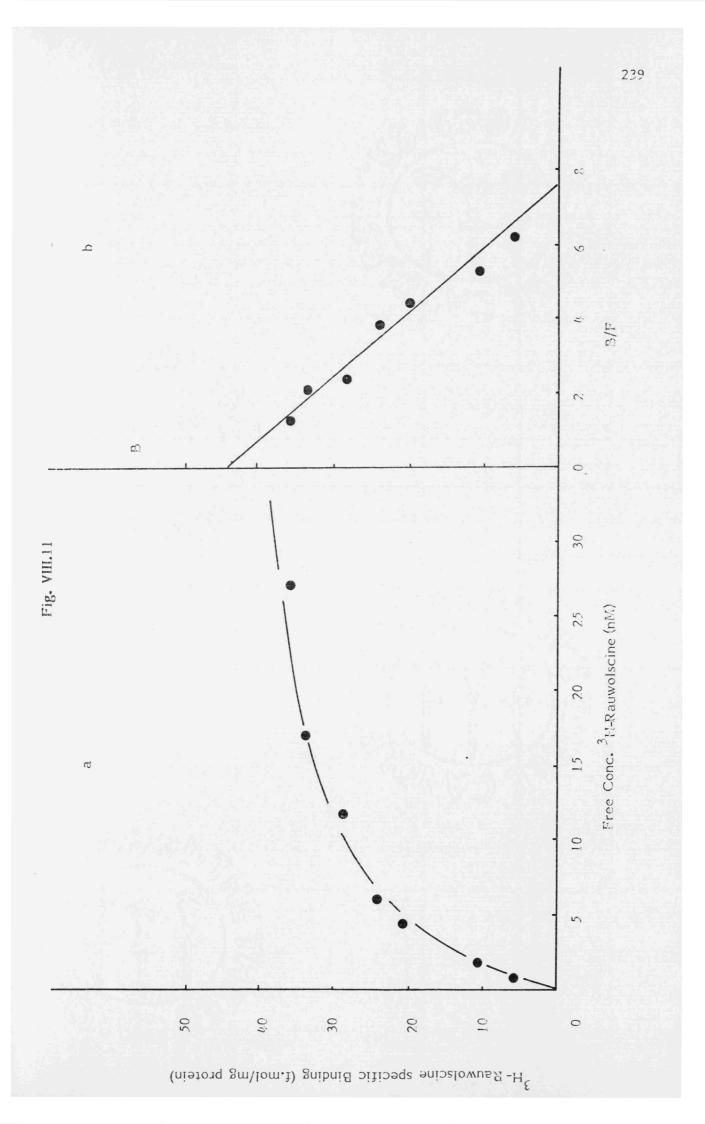
Results from displacement of ³H-rauwolscine binding to solubilized rabbit kidney preparations by various drugs are shown in Table VIII.3. and Figures VIII.13A and B. It is clear that the overall pharmacological profile resembled one expected of an alpha₂-adrenoceptor, with the alpha₂-drugs such as yohimbine and rauwolscine being more potent than the alpha₁drugs such as prazosin, corynanthine and indoramin. In addition, the rank order of drug potency in inhibiting ³H-rauwolscine binding to the soluble receptor preparations was identical to that in the membranous preparations (see Chapter V). Thus, yohimbine displayed a significantly lower affinity

Legend to Figure VIII.11.

³H-rauwolscine specific binding to soluble rabbit renal cortical preparation. Soluble rabbit renal cortical preparations were prepared with digitonin-NaCl as described in Methods section (VIII.2.). Saturation binding assays of ³H-rauwolscine were carried out at approximately - 35 nM, with a protein concentration of 6 - 7 mg/ml.

- a) Saturation
- b) Scatchard plot of binding data

Results are from one representative experiment typical of three similar experiments performed in duplicate. Bmax = 44.4 f.mol/mg protein; Kd = 6.03 nM.



Legend to Figure VIII.12

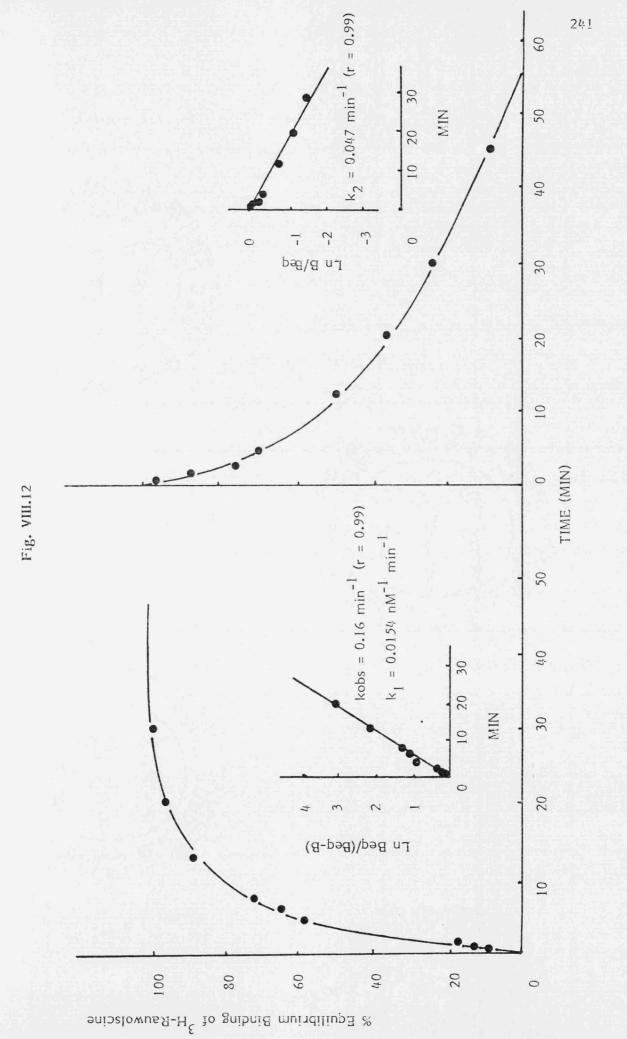
Kinetics of ³H-Rauwolscine binding to soluble rabbit renal cortical preparation at R.T.

Soluble rabbit kidney membrane extracts were prepared as described in Section VIII.2. of this chapter. Kinetics experiments of ³H-Rauwolscine binding were conducted in a manner similar to that described for particulate receptors (Chapter III).

Left panel = association curve; inset shows the pseudo first-order rate plot for the association reaction.

Right panel = dissociation of ³H-Rauwolscine binding; the inset shows the first-order rate plot.

Data presented is from one of two similar experiments performed in duplicate, both yielding almost identical results.

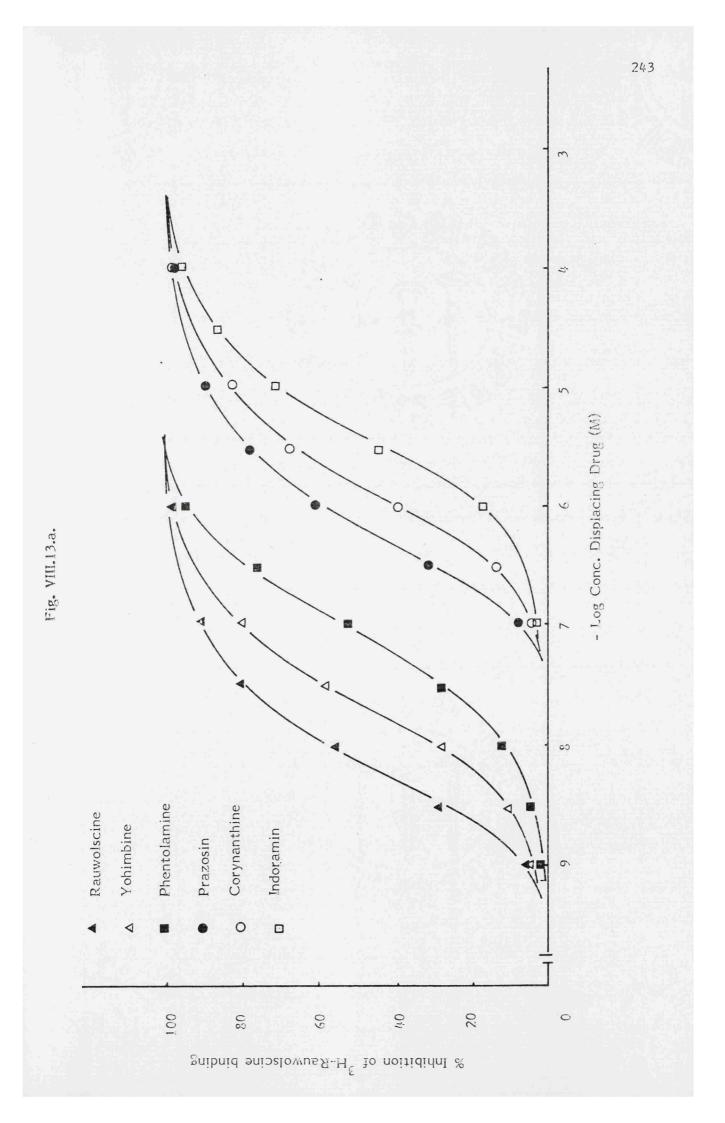


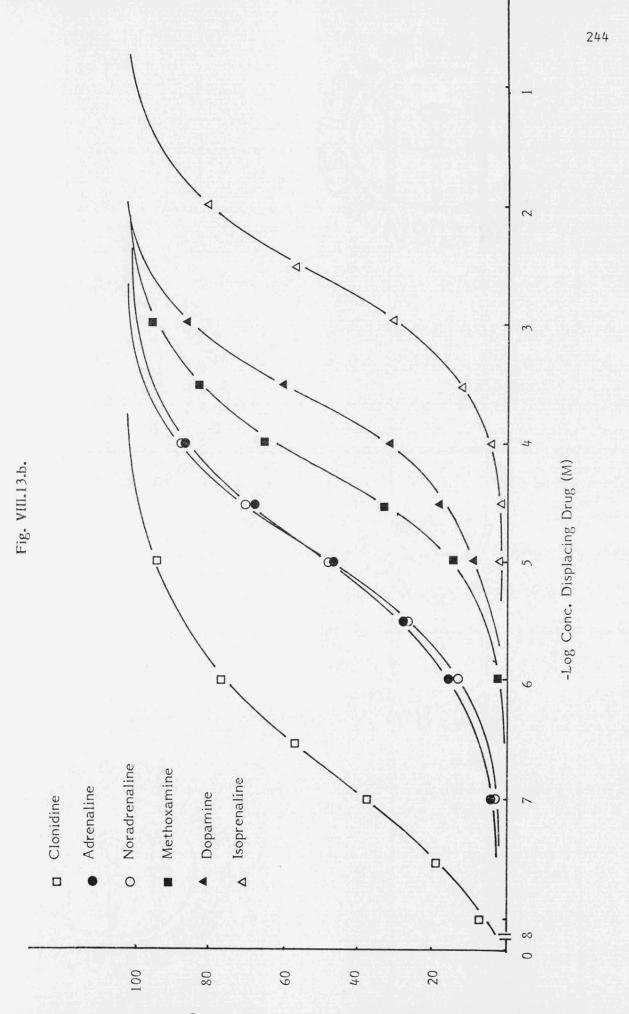
Legend to figures VIII.13.a., and b.

Displacement of specific ³H-Rauwolscine binding to soluble rabbit cerebral cortical preparation by antagonists and agonists.

- a) Antagonists
- b) Agonists

Soluble rabbit cerebral cortical preparations were prepared as described in Section VIII.2. Drug displacement experiments were carried out at $4 - 6 \text{ nM}^{3}$ H-Rauwolscine with increasing concentrations of displacing drugs. The data points are means of 3 - 6 separate experiments performed in duplicate. The S.E.M. of each data point is usually less than $\pm 5\%$.





% Inhibition of ³H-Rauwolscine binding

than rauwolscine but prazosin appeared relatively potent.

In general, the pharmacological behaviour of soluble alpha₂-receptors, of the rabbit kidney resembled that of the rat kidney. Therefore, in comparison with the soluble platelet alpha₂-receptors, those in the rabbit kidney had distinctly weakened affinity for the alpha₂-antagonist yohimbine, but exhibited increased affinity for the alpha₁-antagonists, such as prazosin and indoramin (Fig. VIII.10.B,C and D). All antagonists generated curves with slopes close to unity suggesting an interaction with ³H-rauwolscine at a single class of affinity states or sites

The rank order of potency for the agonists was also indicative of interaction with alpha₂-adrenoceptors (Table VIII.3 Fig VIII.13.b). Thus clonidine was most potent, followed by adrenaline and noradrenaline in that order. The alpha₁-agonist methoxamine and dopamine were relatively weak competitors of ³H-rauwolscine binding as was the beta-agonist isoprenaline. However, as in the soluble rat kidney receptor preparations, the agonists (clonidine,adrenaline and noradrenaline) all displaced ³H-rauwolscine binding to soluble rabbit kidney preparations with slopes significantly less than one.

VIII.3.4. Ionic and guanine nucleotide influences on agonist/antagonist interaction with soluble alpha₂-adrenoceptors

As demonstrated in Chapter VI, divalent cations, such as Mg^{++} , can modulate the affinity of antagonists at particulate $alpha_2$ -adrenoceptors. It was therefore of interest to examine if such effect may still be present when $alpha_2$ -receptors are in the solubilized form.

Saturation experiments were performed by incubating ³H-rauwolscine with solubilized platelet receptor preparations in the absence and presence of 10 mM MgCl₂. Mg⁺⁺ did not produce any change in the apparent Bmax (203 \pm 34 f.mole/mg protein in the presence of Mg⁺⁺ compared to 187 \pm 20 f.mole/mg protein in the control, n = 3). The apparent Kd, however, was increased by about 2-fold (8.3 \pm 0.16 nM, compared to 4.3 \pm 0.47 nM, p < 0.05). Therefore, this effect of Mg⁺⁺ appeared qualitatively and quantitatively similar to that observed in platelet membranes. However, Mg⁺⁺ was not found to enhance the affinity of agonist, at least under the present solubilization and assay conditions. The presence of a final assay concentration of 200 mM NaCl did reduce the affinity of adrenaline by about 2 - 3 fold in either rat kidney or platelet soluble receptor preparation, compared to that in the presence of 80 mM Na⁺ or in the absence of this ion. In contrast, there was no apparent difference in the affinity of yohimbine in the absence or presence of Na⁺ (data not shown).

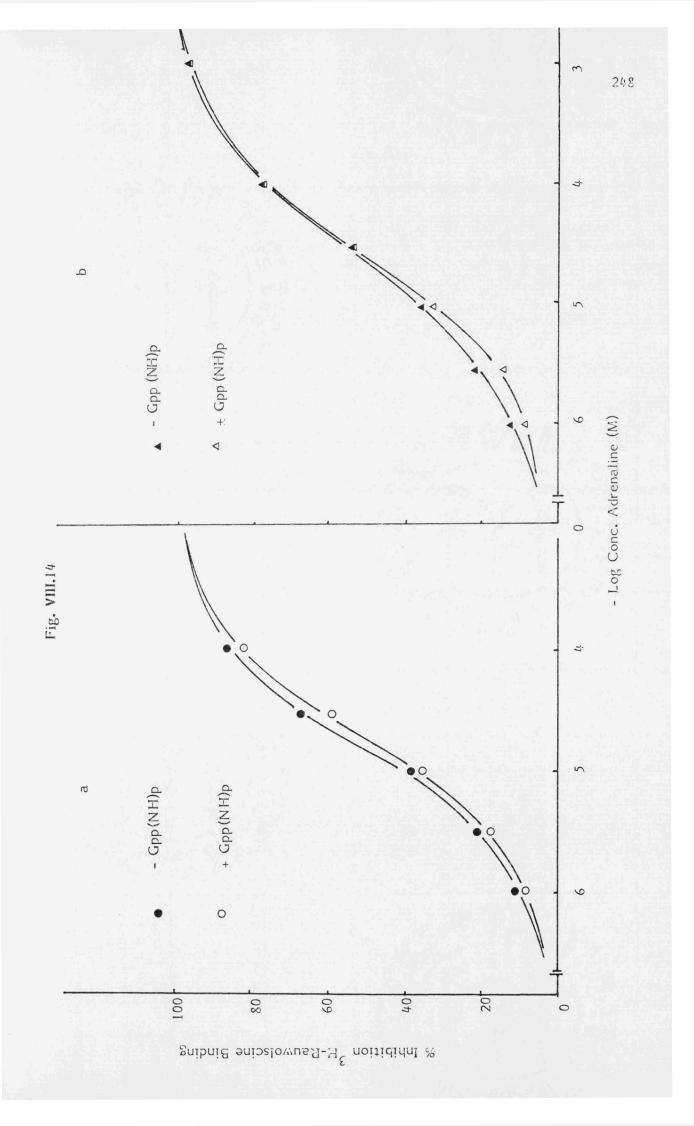
In both platelet and rat kidney membranes, guanine nucleotides reduced the affinity of agonist at alpha₂-receptors, manifested by a characteristic shift of the displacement curve to the right (see Chapter VI). Such an effect appeared qualitatively similar in the absence or presence of 200 mM NaCl, though in the rat kidney membranes, the presence of high concentrations of Na⁺ actually enhanced the modulating effect of guanine nucleotides. However, under similar assay conditions no modulatory effect of agonist affinity by guanine nucleotides was observed in the soluble platelet and rat kidney preparations (Fig. VIII.14.A and B). Therefore,

Legend to Figures VIII.14.a and b

Effect of guanine nucleotide on adrenaline displacement of ³H-Rauwolscine binding to soluble human platelet and rat renal cortical preparations.

- a) Human platelet
- b) Rat renal cortex

Human platelet and rat renal cortical membranes were treated with digitonin (final concentration = 5 mM and 10 mM respectively) in the absence of NaCl. Method of solubilization was identical to that described in Section VIII.2. The resultant soluble preparations were used for studying the effect of 0.1 mM Gpp (NH)p on adrenaline displacement of ³H-Rauwolscine binding at a ligand concentration of 6 - 7 nM in the presence of 10 mM MgCl₂ and 200 mM NaCl. Data illustrated represents the mean of 3 separate experiments performed in duplicate, with S.E.M. < + 5%.



these findings seem to suggest that, at least in these tissues, guaninenucleotide sensitive high-affinity agonist states have been 'lost' during the solubilization process.

VIII.3.5. Effect of agonist pre-occupancy of membrane alpha₂-receptor on guanine nucleotide modulation of agonist interaction with soluble alpha₂-receptors

As mentioned in the last section, agonist interaction with soluble alpha₂-receptors no longer appeared to be influenced by guanine nucleotides. This phenomenon suggests an uncoupling of alpha₂-receptors from the N-protein during the solubilization process. Smith & Limbird (1981) have demonstrated that pre-incubation of membranes with agonists, though not antagonists prior: to solubilization, appeared to be able to stabilize the agonist high-affinity complex, as manifested by an apparently larger molecular size of the agonist-labelled solubilized receptor. Therefore, it was considered worthwhile to investigate if guanine nucleotides can also modulate the interaction of agonist with ³H-rauwolscine at soluble alpha₂receptors, if membranes have been pre-incubated with agonists prior to solubilization.

Rat kidney membranes were pre-incubated with 100 nM noradrenaline for 30 minutes and then solubilized with digitonin after washing. Fig. VIII.15 shows the results of adrenaline displacement of ³H-rauwolscine binding to such soluble receptor preparations in the absence or presence of 5'-guanylyl imidodiphosphate (10⁻⁴M). The data apparently indicates that the adrenaline displacement curve was shifted to a larger extent by guanine nucleotides in soluble extracts obtained from agonist-treated membranes, compared to preparations from the control membranes. These preliminary results therefore appeared to provide support for the views of Michel et. al. (1981) and Smith & Limbird (1981), that agonist occupancy of alpha₂-receptors stabilizes the high-affinity ternary complex, thus maintaining its partial sensitivity toward guanine nucleotide modulation.

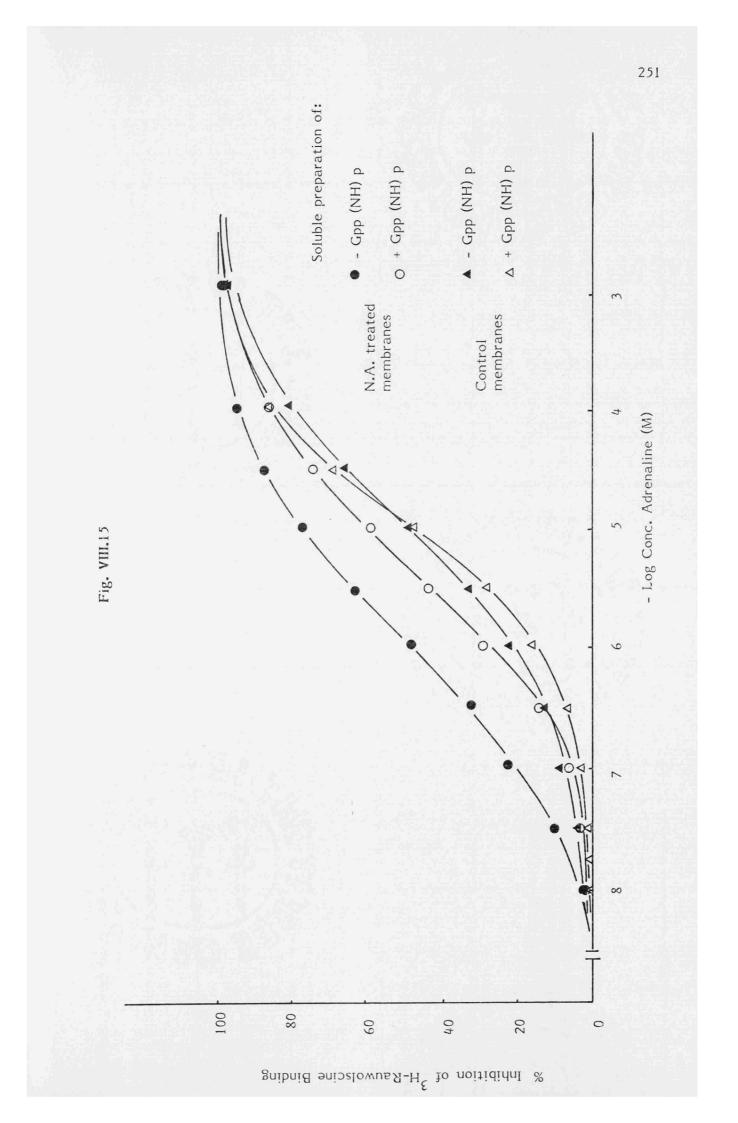
Legend to Figure VIII.15

Effect of agonist pre-occupancy of membrane alpha₂-receptors on guanine nucleotide modulation of agonist interaction with soluble alpha₂-receptors

Rat renal cortical membrane preparation was divided into two equal portions. One portion was incubated at R.T. with a final concentration of 100nM norepinephrine (noradrenaline) for 30 minutes (10 mM MgCl₂ was also present). Subsequently, the membrane suspension was centrifuged at 50,000 xg for 10 minutes. The pellet was washed two times with ice-cold assay buffer by gentle resuspension, followed by centrifugation. The resultant membrane suspension was solubilized with digitonin-NaCl by Ultra-Turrax homogenization as described in the Methods section of this chapter. The non-noradrenaline treated membrane suspension was also solubilized in the identical manner. The supernatants obtained after one hour centrifugation at 50,000 xg were used to examine the effect of 0.1 mM Gpp (NH)p, on adrenaline displacement of ³H-Rauwolscine binding.

Displacements were carried out in standard conditions (Section VIII.2) at 4 - 6 nM ³H-Rauwolscine and increasing concentrations of adrenaline in the absence and presence of 0.1 mM Gpp (NH)p. 10 mM MgCl₂ was present in all assays.

Data illustrated is the mean of three separate experiments performed in duplicate. S.E.M. is \pm 5 - 10%



VIII.4. Discussion

The characterisation of solubilized alpha₂-receptors have previously been reported in two tissues: an adrenocortical carcinoma (Nambi, et. a. 1981), and human platelet (Smith & Limbird 1981; Michel et. al. 1981). In the present studies, attempts have been made to solubilize alpha₂-receptors from human platelet, rat renal cortex, and rabbit renal cortex, using the glycoside detergent digitonin. The solubilized receptors have also been characterized using the alpha₂-antagonist ligand ³H-rauwolscine.

Digitonin generally proved to be quite effective in extracting alpha₂-receptors, producing protein and specific receptor yields in the region of 50-60% and 30-40% respectively in human platelet, rat kidney and rabbit kidney. However, there was little success in solubilizing detectable alpha₂-receptors from the rat and rabbit cerebral cortex using this detergent. Other detergents, such as CHAPS and cholate, were also ineffective in solubilizing assayable alpha₂-receptors from these tissues. In this connection it is of interest to note that Sladeczek et. al. (1984) have recently reported successful solubilization of calf brain alpha₂-receptors using CHAPS. However, differences in the solubilization methods might be important here.

The digitonin solubilized alpha₂-receptors are truly soluble, as they satisfy most of the criteria for soluble receptors. They were not sedimentable at 100,000 xg for 60 minutes, and they also completely passed through 0.2 um. pore size membranes filters.

The presence of NaCl can markedly increase the alpha₂-receptor yield by digitonin. This enhancement of receptor solubilization turns out to be a rather common phenomenon, as it occurs in different receptor systems and with different detergents (Aronstram et al. 1978; Dickinson 1982; Howells et. al. 1982; Hall et. al. 1983; Kuno et. al 1983). The exact mechanism of NaCl in promoting receptor solubilization is not clear. However, one of the main factors may be that it protects the receptors during the solubilization process (Kuno et. al., 1983). It is clear that although high salt concentrations alone could apparently extract quite a good amount of membrane protein, there was a negligible yield of specific receptor sites. It is also interesting to note that an optimal yield of receptors appeared to occur over a rather narrow range of NaCl concentrations, particularly with rat and rabbit kidney alpha₂-receptors. This may suggest that NaCl can also have influence on the physico-chemical properties of the detergent micelles (eg size, bulk concentration, etc) and that a suitable balance between detergent and salt contents provides the optimal access of drugs to the solubilized receptor sites.

The results of the present studies indicate that the overall pharmacological characteristics of particulate $alpha_2$ -receptors are well maintained when the receptors are in the soluble form. However, most drugs did exhibit weaker affinities in the soluble preparation than in the particulate preparation. The discrepancies in drug affinity appeared larger with the agonists than with the antagonists. Moreover, compared to the soluble rat or rabbit kidney preparation, the soluble platelet preparation exhibited relatively large decreases in drug affinities. The presence of NaCl in the soluble preparations does not fully account for the marked decreases in drug affinities, since equivalent concentrations of NaCl produced relatively less influence on drug affinities in membranes.

The observation that decreases in affinities occurred to both agonists and antagonists in soluble platelet preparations is apparently contradictory to the earlier reports (Michel et. al., 1981; Smith & Limbird, 1981; Limbird et. al., 1982) which suggested that only the affinities of agonists, but not antagonists, were significantly reduced in these preparations. However, unlike the present studies, these previous studies only examined the affinities of two or three antagonists. In fact, the affinity of yohimbine at the soluble ³H-yohimbine binding sites, as reported by Michel et. al. (1981) was at least 3 - 5 fold weaker than that at the particulate ³H-yohimbine binding sites (Hoffman et. al., 1981), although comparatively, decreases in agonist affinities were more pronounced. The yohimbine Kd values reported by Smith and Limbird (1981) were indeed quite similar between the membranous and soluble platelet preparations. However, it is interesting to note that the Kd value for yohimbine in their platelet membranes was already quite considerably higher than those from similar studies (Motulsky et. al., 1981; Daiguji et. al., 1981; Hoffman et. al., 1982). In any case, the results from a recent study on soluble alpha₂-receptors in the cerebral cortex also indicated a significant reduction in affinity for both agonists and antagonists in the soluble preparation, compared to the membranes (Sladeczek et. al., 1984). Therefore, an overall reduction in affinity for drugs appears to be a common phenomenon occuring to alpha₂-receptors upon solubilization.

Changes in receptor affinity for drugs following solubilization may be expected in view of the potential conformational changes resulting from perturbation of the membrane enviornment by detergent. In fact, overall decreases in drug affinities have also been observed for the digitoninsolubilized muscarinic receptor (Beld & Arien, 1974) and the cholate-solubilized dopamine D_2 receptor (Hall et. al., 1983). As for the soluble platelet alpha₂-receptors, the relatively large overall decreases in drug affinities may suggest that $alpha_2$ -receptors are normally subjected to a tighter constraint within the platelet membrane lipid environment.

In agreement with the findings of earlier studies (Smith & Limbird 1981; Michel et. al., 1981), the agonists do exhibit markedly reduced affinities at soluble platelet alpha₂-receptors compared to the membranes. In fact, all of the agonists generated displacement curves with slopes close to unity, suggesting an interaction with a homogeneous class of low affinity sites. A reasonable interpretation of these findings may be that

platelet alpha2-receptors have been 'uncoupled' from the guanine nucleotide regulating protein during the solubilization process. This is supported by the finding that the adrenaline interaction with the solubilized platelet receptor sites labelled by ³H-rauwolscine was not modulated by guanine nucleotides. Indeed, it was suggested that agonist pre-occupation of platelet alpha2-receptors prior to solubilization was required to stabilize the ternary high affinity receptor complex, which subsequently exhibited sensitivity to guanine nucleotides (Limbird et. al., 1982). In this connection, it was surprising to notice that the alpha2-agonists still generated rather shallow displacement curves in the rat and rabbit kidney soluble preparations, although no guanine-nucleotide 'shift' of the curves was observed. Interpretation for this phenomenon is not available at the moment. However, it is possible that, compared to the platelet, $alpha_2$ -receptors in the rat and rabbit kidneys may be 'coupled' to membrane regulatory components other than the Ni-protein, all exhibiting different sensitivity to the guanine nucleotides. Some receptors may still be linked to regulatory components weakly sensitive to guanine-nucleotides after solubilization. Therefore, there could be apparent co-operative interaction of agonist with these solubilized receptor sites, but such interaction could not be modulated by guanine nucleotides. The preliminary results from these studies have however suggested that pre-incubation of rat kidney membranes with agonist prior to solubilization did appear to yield soluble preparations in which adrenaline displacement curves were more significantly shifted by guanine nucleotide, although there was not much steepening of the 'shifted' curves. Nevertheless, this finding favors the view that pre-occupation of alpha2-receptors by agonist prior to solubilization can indeed stabilize the agonist-receptor-N protein complexes exhibiting guanine nucleotide sensitivity in the soluble preparations.

The recent findings of Sladeczek et. al. (1984) indicating that the partial agonist ligand ³H-PAC (p-amino clonidine) could label CHAPS-solubilized

255

alpha₂-receptors from the calf cerebral cortex is indeed very interesting as it suggests that such receptor sites may be of the high-affinity agonist state of the alpha₂-receptors. Indeed, these workers found that the soluble ³H-PAC binding sites were sensitive to modulation by guanine nucleotides. It is not clear why the present work failed to solubilize assayable ³Hrauwolscine binding sites from rat and rabbit brains using CHAPS. Moreover, it was also unsuccessful to observe guanine nucleotide modulation of agonist affinity in the digitonin-solubilized receptor preparations without agonist pre-occupancy of membrane receptors. The nature of those CHAPS-solubilized high-affinity agonist sites would certainly require further evaluation. However, apart from tissue differences, the solubilization method adopted by these workers, compared to the present studies, might be a significant factor for successful solubilization of high-affinity agonist states of the alpha₂-receptors.

The main aim of the present studies was to compare the general pharmacological properties of the soluble alpha2-receptors in light of the differences between the particulate alpha2-receptors. The results have indeed identified differences in pharmacological behaviour between the soluble alpha2-receptors. Thus, the soluble platelet alpha2-receptor processes an equal affinity for rauwolscine and yohimbine, but exhibits a relatively weak affinity for the alpha antagonists such as prazosin and indoramin. In contrast, yohimbine displays a significantly weaker affinity than rauwolscine in the soluble rat or rabbit kidney alpha2-receptor, at which prazosin, indoramin, corynanthine and labetalol all appear to be of relatively higher potency than at the soluble platelet alpha2-receptor. It should be noted that the displacement curves of these antagonists had slopes close to unity, suggesting that interaction with 3 H-rauwolscine occurred at a single class of sites in all cases. The possibility that ³H-rauwolscine bound in part to alpha₁-receptors in the soluble rat or rabbit kidney preparation can be totally excluded, as it was further found that no 3 H-prazosin binding could be detected at concentrations

as high as 15 nM, which is generally far beyond that required to saturate the alpha₁-receptor population.

Therefore, in conclusion, differences in pharmacological behaviour of soluble alpha₂-receptors parallel differences observed between particulate alpha₂-receptors (See Chapter V). This provides further evidence that alpha₂-receptors are not a homogenous population and that their differences in behaviour may truly reflect molecular differences in the receptor proteins. Chapter IX

2

CONCLUDING DISCUSSION

The characterisation of $alpha_2$ -adrenoceptors can now be effectively achieved by means of functional methods and radioligand binding assays. The present work has primarily involved the development and application of radioligand binding techniques to examine the pharmacological characteristics of alpha_-adrenoceptors.

Prior to this study, pharmacological characterisation of $alpha_2$ -receptors relied exclusively on the use of ³H-agonists and the non-selective antagonist ligand, ³H-DHE (see Chapter II). This work was undertaken using for the first time the $alpha_2$ -selective antagonist ligands, ³H-yohimbine and ³H-rauwolscine.

In agreement with earlier studies using ³H-DHE (Tsai & Lefkowitz, 1978, 1979; Michel et. al., 1980), agonists but not antagonists, interact with 3 H-yohimbine or 3 H-rauwolscine binding sites on human platelet membranes in two distinct affinity states, which can be demonstrated by curve-fitting analysis of displacement data. Mg⁺⁺ and other divalent cations can enhance agonist binding by promoting the formation of the high-affinity states. In contrast, monovalent cations, such as Na⁺ markedly reduce the overall affinities of agonists at alpha2-receptors, possibly in part involving a destabilization of the high-affinity states. High concentrations of guanine nucleotides, such as GTP and Gpp(NH)p appear to convert the high-affinity states to the low-affinity states. At the human platelet alpha2-receptor, the modulatory effects of Na⁺ and GTP are additive. However, at other alpha₂-receptors, including those of the rat and rabbit cerebral cortex and rat and rabbit renal cortex Na⁺ synergistically enhances the modulatory effect of GTP. The resultant effect of GTP or Gpp(NH)p on agonist interactions appears qualitatively similar between the alpha2-receptors. The apparent requirement for Na^+ for the full expression of the guanine nucleotide modulatory effect at some but not all alpha2-receptors may reflect some differences in the receptor-effector coupling mechanisms in different systems.

259

In any case, the overall characteristics of agonist/antagonist interactions with most alpha2-receptors appear to fit in well with the 'two-state' or 'dynamic receptor affinity' model (see Chapters II & VI) that has now become generally accepted to describe the agonist/antagonist interactions with the beta-receptors. Therefore, although alpha2-receptors are coupled to adenylate cyclase in a negative manner, the molecular receptor-effector coupling mechanisms appear similar to those involved in cyclase stimulation. There is, however, increasing evidence suggesting that two distinct guanine nucleotide binding proteins (N_s and N_i) are respectively involved in cyclase stimulation and inhibition (Steer & Wood, 1979; Smith & Limbird, 1981; Hoffman et. al., 1981; Jakobs et. al., 1983;). Recent progress in the isolation and purification of the N-proteins has provided evidence suggesting that the N_s and N_i proteins are composed of different subunits. The N_s protein appears to be composed of a 35000-Da and a 45000-Da subunit, whereas the Ni protein seems to have an identical 35000-Da subunit, but instead of the 45000-Da subunit, it has a 41000-Da subunit (Northup et. al., 1983; Manning & Gilman, 1983; Katada et. al., 1984_a) Both the 45000-Da and the 41000-Da subunits are responsible for GTP binding and appear to be able to modulate cyclase activity independently of the 35000-Da subunit which possesses inhibitory effects (Katada et. al., $1984_{a,b,c}$). It is now postulated that alpha2-receptor activation leads to a dissociation of the 41000- and 35000-Da subunits of N.. Inhibition of cyclase activity may either result from a direct or indirect effect of the 41000-Da subunit on the catalytic subunit of the enzyme, or from a reduced concentration of the stimulatory 45000-Da subunit of N_s following its increased interaction with the 35000-Da subunit from N₁ (Katada et. al., 1984₂).

The major aim of the present work, however, has been to examine the overall pharmacological behaviour of the alpha₂-receptors, including those in the human platelet, rat and rabbit cerebral cortex and rat and rabbit renal cortex.

The results have indicated that 3 H-yohimbine and 3 H-rauwolscine both specifically label equal quantities of pharmacological sites of the alpha2-type in each of the tissues examined. However, significant differences in behaviour were observed between the alpha2-receptors. These receptors differ not only with respect to drug affinities, but also to the relative drug potencies. Basically, it is possible to classify them into two main types. One group is represented by those in the human platelet, human cerebral cortex and rabbit cerebral cortex, and is chiefly characterized by equipotency of the yohimbine and rauwolscine diastereoisomers, and also low affinities for the alpha1-antagonists, such as prazosin, indoramin and corynanthine. The other group is represented by $alpha_2$ -receptors of the rat brain, rat kidney and rabbit kidney, and is characterized by a significantly reduced affinity of yohimbine, compared to rauwolscine, and also a markedly increased potency of the alpha1-antagonists, particularly prazosin. These features provide the basic evidence for a heterogeneity of alpha2-receptors. Those alpha2-receptors exhibiting reduced affinities for the alpha2-antagonists and increased affinities for the alpha1-antagonsits can be viewed as an 'atypical' type, and can be described as having a 'mixed alpha₁/alpha₂' behaviour. It must be emphasized however, that the results from the present study indicated that it is highly unlikely that ³H-yohimbine and ³H-rauwolscine might have labelled alpha₁-receptors (see Chapter V). As shown in table IX, most tissues in the rat, including the neuroblastoma X glioma $% \mathcal{X}$ cells appear to possess alpha_2-receptors of this type. In no less than five different tissues of this species, results from separate laboratories have indicated (generally without comment) a relatively weak affinity for yohimbine and a high affinity for prazosin, such that the relative \boldsymbol{K}_i ratios of prazosin to yohimbine are of a low value. The high $K_{\underline{i}}$ value of prazosin reported by Woodcock & Murley appears to be the only exception. However, this may perhaps only relate to the method of membrane preparation adopted by these workers (see Chapter VII). Indeed, a reduced affinity for yohimbine at ³H-PAC sites

262 et. al., 1982 (at ³H-Rauwolscine sites) Chapter V (table V.4); Summers Woodcock & Johnston, 1982 Woodcock & Murley, 1982 Hoffman et. al., 1981_h Motulsky et. al., 1980 Feller & Bylund, 1984 Snavely & Insel, 1982 Feller & Bylund, 1984 Chapter V (table V.4) Chapter V (table V.2) Latifpour et. al., 1982 Chapter V (table V.3) Chapter V (table V.3) Chapter V (table V.2) Schmitz et. al., 1981 Barnes et. al., 1983 Rouot et. al., 1982 Tharp et. al., 1981 Lavin et. al., 1981 Kahn et. al., 1982 Bobik, 1982 Reference Yohimbine Kd Prazosin Kd 1785.7 451.6 495.5 791.9 795.5 416.7 268.7 541.7 326.7 1000 20.9 17.7 660 15.1 7.5 5.3 7.3 6.6 5.5 9.1 14 $\underline{\circ}$ Yohimbine 11.25 9.12 0.45 0.99 7.98 0.99 0.22 14.5 12.1 6.9 5.9 3.9 3.3 1.5 11 9.1 14 19 11 2 24 2 Ki or Kd (nM) Prazosin 25000 2000 1300 2700 1625 4555 175 490 223 784 138 169 303 887 199 142 170 100 5.4 80 53 43 Rat Submandibular Gland Neuroblastoma X Glioma Pig Submandibular Gland Human Cerebral Cortex Rabbit Cerebral Cortex **Canine Tracheal Smooth** Rabbit Renal Cortex Rat Cerebral Cortex Rat Cerebral Cortex Rat Cerebral Cortex Rat (Neonatal) Lung Rat Renal Cortex Rat Renal Cortex Rat Renal Cortex Human Adipocyte Human Platelet Human Platelet Rabbit Uterus Dog Artery Rat Kidney Rat Liver Pig Lung Muscle Tissue

³H-yohimbine labelled sitës

at

Relative affinities of prazosin and yohimbine

Table IX

was also observed in the rat tissues, compared to the pig tissues (Feller & Bylund, 1984). In complete contrast, the alpha₂-receptors in the human tissues appear to exhibit high affinities for yohimbine and low affinities for prazosin, thus exhibiting large relative K_i ratios of prazosin to yohimbine. Alpha₂-receptors in tissues of the dog, pig and rabbit appear generally like those of the human. However, the similar behaviour of the alpha₂-receptors in the rabbit kidney and rat tissues indicates that pharmacological differences in alpha₂-receptors occur both between species and between tissues of a given species.

Apparent differences in drug affinities between alpha2-receptors have been further evaluated with respect to the possible influences of cations and allosteric interaction. Although cations generally have some variable effect on the affinities of antagonists, as well as agonists, such influence is considered to be insufficient to account for the marked differences in affinities for drugs like prazosin and yohimbine. For instance, the presence of up to 200 mM Na⁺ or 20 mM Mg⁺⁺ only reduced the Ki or Kd of yohimbine from about 0.6 - 1.0 nM in the human platelet to about 2 - 2.5 nM. This value is still distant from the K_i or K_d value of yohimbine in tissues such as rat brain and rat kidney, which is already around 5 -10 nM in the absence of those cations. As for the affinities of prazosin, the slight increases by Na⁺ and the slight decreases by Mg⁺⁺, which occurred in all the tissue examined, also cannot account for its marked affinity differences between the alpha2-receptors. The competitive nature of the interaction between prazosin and 3 H-yohimbine or 3 H-rauwolscine binding sites has also been confirmed form saturation experiments and kinetics studies. For instance, the presence of increasing concentrations of prazosin increased 3 H-yohimbine or 3 H-rauwolscine Kd in the human platelet, rat brain and rat kidney without changing the Bmax. The Schild plots were all linear with slopes not distant from one (Chapter V). Furthermore, the presence of prazosin did not alter the dissociation kinetics of ³H-yohimbine

or ³H-rauwolscine binding to the human platelet and rat kidney, where prazosin exhibits marked affinity difference at the labelled sites.

In an attempt to evaluate the differences in membrane constraint or lipid environment as a possible cause for pharmacological differences between tissues, digitonin-solubilized alpha₂-receptors from the human platelet, rat kidney and rabbit kidney have been characterized. The results clearly indicated that although the soluble alpha₂-receptors generally exhibit somewhat reduced drug affinities, the overall pharmacological profiles remain identical to those in membranes. Therefore, the differences in pharmacological properties between the particulate alpha₂-receptors can also be revealed in the soluble receptors. These results therefore provide further evidence for the heterogeneity of alpha₂-receptors, and strongly suggest that structurally different alpha₂-receptor proteins may exist in mammalian tissues.

Recently, U'Prichard and co-workers have raised the question of whether the 'two-state' model is totally applicable to describe the agonist/ antagonist interactions with alpha2-receptors. Based on their data mainly obtained from ${}^{3}\text{H}\text{-agonist}$ binding to the human platelet membranes, these workers suggest that there may be an additional Mg⁺⁺-promoted, guanine nucleotide-sensitive 'super-high' agonist affinity state (SH), in addition to the high- and low-affinity states already recognized to exist at the alpha2-receptors (U'Prichard et. al., 1983). Moreover, a model has been developed which suggests that some, but not all antagonists may also exhibit selectivity for the different agonist states of the alpha2-receptors. Accordingly, antagonist binding to alpha2-receptors would be expected to be modulated under the influence of guanine nucleotides and cations in a manner opposite to that with the agonists (Bylund & U'Prichard 1983; U'Prichard, 1983; see fig.IX). These particular concepts may indeed be relevant to the apparent observed drug affinity differences between tissues. Different tissues may contain the same alpha₂-receptor existing in different proportions of

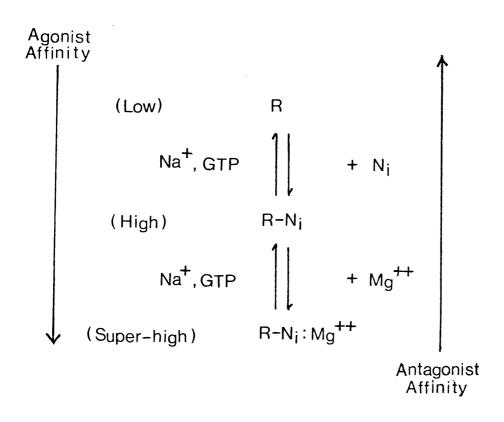


Figure IX Diagrammatic interpretation of the U'Prichard model of agonist/anagonist interactions with alpha₂-receptor

Free $alpha_2$ -receptor (R) exhibits 'low' affinity for agonists. However, the complexation of Ni protein with the receptor to form (R-Ni) results in a 'high' affinity state for the agonists. The presence of Mg⁺⁺ promotes the formation of (R-Ni : Mg⁺⁺) complex which represents the 'super-high' affinity state for the agonists. The antagonists would exhibit lower affinities for the 'super-high' and 'high' affinity states compared to the 'low' affinity state. The presence of Na⁺ and GTP would shift the equilibrium between the agonist states in favour of the 'low' affinity state. Hence, the effect of Na⁺ and GTP on antagonist affinities would be just opposite to that on agonist affinities.

the agonist high and low- affinity states. Therefore, affinity differences between tissues may only reflect the relative degree of drug interaction with different proportions of the agonist high and low-affinity states of the same alpha₂-receptor. However, before considering this possibility further, it may be important to evaluate the validity of this U'Prichard model first.

The apparent evidence in support of this model is:

1) Divalent cations, such as Mg⁺⁺, promote high-affinity agonist binding but conversely increase the Kd of ³H-yohimbine or ³H-rauwolscine without altering the Bmax (Daiguji et. al., 1981; U'Prichard et. al., 1983; also see Chapter VI).

2) The inhibitory affinities of some, but not all antagonists at 3 H-clonidine sites in the rat cerebral cortex appear to be reduced in the presence of Mg⁺⁺ (Salama et. al., 1982).

3) Although the rank orders of drug potencies at ³H-agonist and ³H-antagonist sites are similar within a given tissue, the affinities of agonists are usually more potent than antagonists at ³H-agonist binding sites; and conversely, many antagonists exhibit relatively high affinities at ³H-antagonist labelled sites, compared to the agonists (see review by Bylund & U'Prichard, 1983).

4) Whereas Na⁺ and GTP reduce agonist affinities and destabilize high-affinity states at alpha₂-receptors; these modulators also appear to produce a 'reciprocal' effect on antagonist binding, as reflected in apparent increases in antagonist affinities and/or binding capacities of ³H-antagonists (Woodcock & Murley, 1982; Limbird et. al., 1982; U'Prichard et. al., 1983, Bylund & U'Prichard, 1983).

The above findings, however, have not been totally supported by results of the present work. For instance, the presence of 100-200 mM NaCl and/or 0.1 mM GTP or Gpp(NH)p, was not found to significantly alter the Bmax of ³H-yohimbine or ³H-rauwolscine in all the tissues examined at least under the tissue preparation and assay conditions adopted in this

study in which there is little retained endogenous agonist in the membranes. The effects of Na⁺ on antagonist binding appeared variable in different tissues. The presence of 100 - 200 mM Na⁺ reduced the affinities of ³H-yohimbine and ³H-rauwolscine in the platelet membranes without altering the Bmax. Similar concentrations of Na⁺ did not produce any significant change in either the Bmax or Kd of these two antagonist labels in rat and rabbit kidneys, as well as rat brain (see Chapter VI). Interestingly though, while the affinities of prazosin at 3 H-yohimbine or 3 H-rauwolscine sites appeared slightly increased in all the tissues examined, the affinities of indoramin were reduced and those of corynanthine were not affected. Furthermore, the presence of 0.1 mM GTP or Gpp(NH)p did not change the position and slope of the displacement curve for either yohimbine or prazosin at ³H-rauwolscine labelled sites (data not shown). In fact, the absence of a change in 3 H-yohimbine Kd by Na⁺ and/or GTP has also been indicated in the studies of other laboratories involving the rat cerebral cortex (Woodcock & Murley, 1982), rat renal cortex (Woodcock & Johnston, 1982), rat and pig submandibular glands (Feller & Bylund, 1984), and neonatal rat lung (Latifpour et. al., 1982), although increases in the binding capacities of 3 H-yohimbine were observed in some of these tissues. However, the present work (Chapter VII) has further provided strong evidence suggesting that apparent decreases in the binding capacities of ³H-antagonists canbe induced by endogenous or retained agonists and that this interference can be reversed by Na⁺ and guanine nucleotides. It appears that even a small quanitity of residual agonist can produce a marked influence on antagonist binding in what can be described as a 'pseudo non-competitive' fashion. This effect may even be potentiated in the presence of retained endogenous cations. The presence of an agonist appeared to be able to 'reduce' the apparent affinity of an antagonist for only a proportion of the receptor sites, because of the preferential high-affinity agonist-receptor interaction. It is not clear if the apparently weaker affinities of the antagonsits in competing for ³H-agonist binding may relate to this type of complicated interactions. Similarly the observed apparent increases of ³H-antagonist binding sites in the presence of Na⁺ and guanine nucleotides may also relate in part to the reversal of the influence of endogenous or retained agonists by these modulators.

Indeed, there are other unexplained phenomena which are not easily accommodated within the U'Prichard 'three-state' model of 'reciprocal' agonist and antagonist interactions with alpha₂-receptors. The following arguments can illustrate that:

1) From the results of U'Prichard et. al., (1983), there appears to be some discrepancy between the 3 H-agonist binding data to human platelet and the agonist displacement data of ³H-yohimbine binding in the same tissue, with respect to the influence of GTP (U'Prichard et. al., 1983). For instance, it was found that 10 µM GTP already produced a maximal 'shift' of the adrenaline displacement curve to the right, apparently rendering the receptor population into a predominantly low-affinity state. Surprisingly, this same concentration of GTP was only found to slightly alter the ³H-adrenaline Kd, but not Bmax, which still represents about 70-80% of the ³H-yohimbine Bmax. In fact, one might reasonably expect that a significant quantity of the 'super-high' and 'high' affinity states should have been converted to the low-affinity states. The presence of 'super-high' and 'high' affinity ³H-adrenaline binding was identified primarily from 'microanalysis' of the kinetics data. Similar agonist 'super-high' and 'high' affinity states have not been readily resolved in other tissues, for example, the neuroblastoma X glioma cells (U'Prichard et al., 1983). Feller & Bylund (1984) also found that ³H-PAC labelled almost the same homogeneous quantity of sites as 3 H-yohimbine in the rat and pig lungs and submandibular glands. GTP (10 μ M) was found to reduce the 3 H-PAC affinities slightly in the pig lung and gland, but not the Bmax, and the Scatchard plots were still linear in the presence of this concentration

of GTP. In the rat submandibular gland, GTP even unexpectedly increased the ³H-PAC sites. These findings clearly suggest that the ³H-PAC and ³H-yohimbine binding sites may not necessarily represent the separate states of the same receptor population.

Interestingly, these results appear to contradict the 'two-state' model which would predict curvilinear Scatchard plots for ³H-PAC binding, if it indeed labelled similarly to ³H-yohimbine, the entire population of the alpha₂-receptors (ie both high and low-affinity states). However, these results neither support the U'Prichard 'three-state' model, which would also predict curvilinear Scatchard plots for the ³H-PAC and/or ³H-yohimbine binding data if both ligands labelled all three states of the receptor population.

2) According to the suggestions of U'Prichard & colleagues (Bylund & U'Prichard, 1983) observable enhanced ³H-rauwolscine binding by Na⁺ and GTP appeared to occur at relatively low concentrations of these modulators (eg 0.1 nM to 0.1 µM for the GTP effect; the EC₅₀ for Na⁺ effect is 5.0mM), and that higher concentrations of Na⁺ brought binding back to control levels. However, it must be realised that in fact, much higher concentrations of these modulators are required to maximally reduce agonist affinities. If one assumes that the low-affinity agonist states produced by Na⁺ and GTP bind antagonists with higher affinities, one must expect that at concentrations of Na⁺ and GTP which maximally reduce agonist affinities, a maximal enhancement of antagonist binding should also be observed. However, in this study it was found that at 100 - 200 mM Na⁺ and 0.1 mM GTP which produced maximal reduction of agonist affinities at alpha₂-receptors, no change in the Bmax and Kd of ³H-rauwolscine or ³H-yohimbine binding was observed (see Chapter VI).

3) It is proposed in the U'Prichard model that the Mg⁺⁺ -liganded high affinity states (or 'super high' affinity states) may be expected to

exhibit lower affinity for the antagonists. However, in the present work, all the Scatchard plots for ³H-yohimbine or ³H-rauwolscine binding to different tissues were linear in the absence or presence of Mg⁺⁺. According to U'Prichard and co-workers, one might expect that the ³H-antagonists would, within a limited concentration range, 'selectively' label only the agonist low-affinity states of the alpha₂-receptors. If one accepts this interpretation, one must be doubtful how the ³H-antagonist labelled sites in the presence of Mg⁺⁺ should be classified.

4) The U'Prichard model predicts that at low concentrations of the ³H-antagonists (³H-yohimbine or ³H-rauwolscine), only low-affinity agonist states of the receptors would be labelled. One might expect this to happen particularly in competition experiments in which relatively low concentrations of radiolabels are used. However, if this was true, agonists would not be expected to exhibit heterotropic interactions with the ³Hantagonist sites, and no guanine nucleotide modulation of agonist affinity should be observed. In fact, one might expect that all agonists generate steep displacement curves with low overall affinities even in the absence of GTP. This prediction obviously contradicts the results of the present work (Chapter VI). The results of ³H-agonist and ³H-antagonist labelling of alpha2-receptors in the rat neonatal lung membranes have further refuted this model. In this tissue, no ³H-agonist binding, but only ³H-yohimbine binding was detected (Latifpour et. al., 1983). Yet, contrary to the prediction that the ³H-yohimbine sites must represent exclusively low-affinity agonist states, guanine nucleotide modulation of adrenaline displacement curve was demonstrable.

In view of the above reasoning, it is considered appropriate that much more conclusive evidence is required before the view that antagonists exhibit selectivity for different agonist states of alpha₂-receptors can be accepted. In any case, it is clear that inter-tissue drug affinity differences observed at ³H-yohimbine and ³H-rauwolscine sites cannot be explained by the different degree of drug interactions with agonist high and low-affinity states of the same alpha₂-receptor. There are two obvious reasons:

1) As pointed out before, at low concentrations of 3 H-yohimbine or 3 H-rauwolscine, such as those used in the present competition studies, the U'Prichard model would predict that only the agonist low-affinity sates in each tissue are selectively labelled. Indeed, in all tissues, antagonists generated displacement curves with slope of unity, suggesting interaction with a single class of sites or states. However, if these sites/states were identical, there is no reason whatsoever to expect any drug affinity differences between tissues. Moreover, while the affinities for alpha₂ drugs like yohimbine and rauwolscine appeared reduced in the rat kidney, compared to human platelet, the affinities of alpha₁ drugs such as prazosin, were markedly higher in the rat kidney than in the platelet. These findings are clearly inconsistent with the predictions from the U'Prichard model.

2) In the soluble receptor preparations, the alpha₂-receptors appeared to be predominantly in the agonist low-affinity states, since no guanine nucleotide modulation of agonist affinity was observed (Chapter VIII). Again, according to the U'Prichard model, it would be expected that antagonists exhibited relatively higher affinities at these sites. Moreover, one should also expect the relative drug potencies to be the same between the soluble receptor preparations. However, the present study indicated that the pharmacological behaviour of the soluble receptors was identical to that in membranes. Therefore, the relative affinities for drugs like yohimbine and prazosin were still markedly different between the soluble preparations of the platelet and rat kidney or rabbit kidney, although drug affinities were generally somewhat reduced, rather than increased.

In conclusion, there is now enough evidence to indicate that the molecular mechanisms of agonist and antagonist interaction with alpha₂-receptors are basically different. The differential influences of guanine

271

nucleotides and cations on the binding characteristics of agonists and antagonists have provided substantial evidence in this respect. In the present work, similar evidence has also been obtained on the basis of thermodynamic differences. However, the hypothesis that antagonists may also interact with alpha2-receptor in a 'reciprocal' manner to the agonists, and may therefore allosterically modulate the functional activities, requires further verification. In future studies, a better understanding of the molecular mechanisms of drug-receptor interactions, coupling and regulation should benefit from the development and application of more purified receptor preparations from homogeneous cell population. The application of genetic manipulation to develop homogeneous cell line and variants, the isolat and purification of the receptor components, and their application to reconstitution studies should eventually allow a full dissection of the alpha2-receptor system(s) and provide conclusive answers to the receptor-effector coupling mechanisms. Indeed, some progress toward these aims has already been made recently (Katada et. al., 1984 a, b, c).

The results of the present work have clearly provided strong evidence for the possible heterogeneity of alpha₂-receptors in mammalian tissues. It appears likely that the observed differences in pharmacological behaviour between alpha₂-receptors may reflect structural rather than merely conformational differences of the receptor proteins. Naturally, identification of molecular differences between the alpha₂-receptor proteins will require future isolation and purification of the soluble receptors. The development of an affinity chromatography technique appears essential to achieve such a goal. Techniques such as photo-affinity labelling or 'target size analysis' can be useful to assess the differences in certain molecular properties of the receptor proteins.

If alpha₂-receptors subtypes do independently exist, it is very important that any possible differences in functional and/or coupling mechanisms must be identified and evaluated. It is perhaps possible that some alpha₂-

272

receptors may mediate functional responses primarily through the inhibition of adenylate cyclase activity, whereas others do so at least partly through some Ca^{++} gating mechanism. At this moment, the functional evidence for alpha2-receptor heterogeneity is still somewhat limited. Indeed, more carefully designed studies will be essential to identify alpha2-receptor subtypes of true physiological significance. For instance, it may be interesting to see if alpha1-antagonists such as prazosin might indeed exhibit significant potency differences in antagonizing alpha2-mediated inhibition of C'AMP accumulation in the human platelets and rat brain slices or rat kidney preparations, in view of their marked affinity differences at 3 H-yohimbine or 3 H-rauwolscine sites. Likewise, the classical physiological approach will be a useful alternative. It may be interesting to note that Ruffoloet. al. (1980, 1981, 1982) have indeed identified three different types of postsynaptic alpha₂receptors both between the rat tissues and between same tissues across different species based on the affinities of yohimbine and clonidine determined in functional (contractile) responses. Postsynaptic alpha receptor (eg in rat aorta) exhibiting high affinities for both alpha2-drugs and alpha1-drugs (eg prazosin), and hence possessing 'mixed alpha₁/alpha₂' properties, was described. Such findings may in fact be of relevance to results of the present work.

APPENDICES

· · ·

1 1

Appendix I

A Drugs

- (-) Adrenaline Clonidine Corynanthine Dopamine 5-HT
- (-) Isoprenaline Indoramin Methoxamine
 (-) Noradrenaline

Prazosin Rauwolscine WB4101

Phentolamine

Wy 26703 Wy25309 Wy 26392

Yohimbine

Others

5'-G.T.P.

5'-guanylyl imidodiphosphate [Gpp(NH)p]

B Radiochemicals

 3 H-Yohimbine

³H-Rauwolscine

³H-Prazosin

C Chemicals

All are of analytical reagent grade.

•

Digitonin	(Sigma)
Cholate	(Sigma)
Deoxycholate	(Sigma) (Sigma)
CHAPS	(Sigma)
Bovine 🎖-globulin (Fraction II)	(Sigma)
Polyethylene Glycol 6000 (M.W.6-8000)	(Sigma, BDH Chemicals)
Bovine Serum Albumin	(Sigma)

(Sigma) (Boehringer) (Carl Roth) (Sigma) (Sigma)

(Sigma) (Wyeth) (Burroughs ₩ellcome) (Sigma) (Ciba-Geigy)

(Pfizer) (Carl Roth) (Ward, Blenkinshop)

(Wyeth)

(Medochem)

(Boehringer Mannheim)

(New England Nuclear; specific activity = 80 - 90 Ci/m.mole)

(Pfizer, specific activity =33 Ci/m.mole)

D Instruments

Centrifuges

Beckman T J-6

Sorvall R C-3

Sorvall R C-5 (super speed))

(Du Pont)

Homogenizer

Ultra-Turrax

(Jankel & Kunkel)

Spectrophotometer

SP6-500

(Pye Unicam)

Liquid Scintillation Counter

LKB-Wallac 1216 Rackbeta

i T

Appendix II

Reagents for Lowry protein analysis

А	$NaCO_3$ in 0.1 N	I NaOH	2%
В	CuSO ₄ .5H ₂ O		1%
С	Sodium potassium tartrate		2%
D	Freshly made from -		
		200 ml. A	
	+	2 ml. B	
	+	2 ml. C	

- E Folin-Ciocalteau Reagent diluted 1: 3 with distilled water.
- F Protein standard = Bovine Serum Albumin 10%

•

Appendix III

Derivation of equations for Scatchard and Hill plots

The binding of a ligand L to a receptor R can be described by:

(L) + (R)
$$\frac{K_1}{K_2}$$
 (LR) (1)
Kd = $K_1 = (L)(R)$
 $\overline{K_2} = (L)(R)$ (2)
(LR) + (R) = Bmax (3) (where Bmax = total receptor density)
(L) (LR) + (L)(R) = Bmax (L) (4)
and (L)(LR) + (LR) $\frac{(L)(R)}{(LR)}$ = Bmax (L) (5)
from (2), (5) becomes
(L)(LR) + (LR) Kd = Bmax (L)
(LR)((L) + Kd) = Bmax (L) (6)
If (LR) = B (receptor or ligand bound)
and (L) = F (free ligand concentration)
then (6) becomes
B (F + Kd) = Bmax F
BF + BKd = Bmax F
By rearrangement,
(Bmax -B) F = BKd
(Bmax - B) = B (7) (Scatchard)
A plot of B against B yields a slope the reciprocal of which is the Kd.
The X-intercept yields the Bmax. Alternatively (6) can be rearranged
to

 $B = Bmax - \frac{B}{F} Kd$ (8)

A plot of B against B yields a negative slope which is equal to Kd. The Y-intercept is the Bmax.

The binding isotherm can be described by

$$B = \frac{Bmax (L)^{n}}{Kd + (L)^{n}}$$

$$Bmax (L)^{n} = B Kd + B (L)^{n}$$

$$(L)^{n} (\underline{Bmax - B)} = Kd$$

$$nLog (L) + Log (\underline{Bmax - B)} = Log Kd \qquad (Hill)$$

$$Log (\underline{Bmax - B}) = Log Kd - n Log (L)$$

$$A \text{ plot of } Log \underline{B} \text{ (Bmax - B)} \text{ against } Log (L)$$

yields the slope n, which is known as the Hill coefficient (nH).

1

•

Appendix IV

Derivation of association and dissociation kinetics equations

Association reaction

The binding of the ligand L to the receptor R can be described by the following equation:

$$L + R \xrightarrow{K_1} LR$$

where K_1 = second-order association rate constant

 K_2 = first-order dissociation rate constant.

Let (a),(b) and (c) be the free concentrations of L, R and LR respectively at a particular time. Therefore, - d(b) = K'(b) - K_{c}(c)

$$\frac{dt}{dt} = \frac{2}{dt}$$
(where k' = k₁(a), if (a) >> (b))
since (c) = (b)₀ - (b) (where (b)₀ = initial concentration of R at time zero)
therefore, $-\frac{d(b)}{dt} = \frac{k'}{b} = \frac{k'}{b} = \frac{k'}{c}$
(1)

$$\frac{-\frac{d(b)}{(k' + k_2)(b) - k_2(b)_0}}{(k' + k_2)(b) - k_2(b)_0} = dt$$

Let $(k' + k_2)(b) - k_2(b)_0 = v$ then, $\frac{dv}{d(b)} = (k' + k_2)$

Equation (1) becomes

$$\frac{-dv}{(k'+k_2)v} = kt, \text{ and } \frac{-dv}{v} = (k'+k_2)kt$$

By integration between time zero -> t, and by rearrangement, equation (1) becomes

$$\frac{Ln_{[\frac{k'(b)o}{(k'+k_2)(b)-k_2(b)_o}]} = (k'+k_2) t$$
(2)

At equilibrium,

k'(b) eq = $k_2(c)$ eq but (c) eq = (b)₀ - (b) eq therefore, k'(b) eq = k_2 (b)₀ - k_2 (b) eq (3)

It follows that

(b)₀ =
$$(b)_{eq} (k' + k_2)$$

 k_2 (4)

Substituting (4) into (2), one gets

$$L_{n} \begin{bmatrix} \frac{k'(b) eq}{k2} \\ (b)-(b) eq \end{bmatrix} = (k' + k_{2}) t$$
 (5)

Substituting (3) into (5),

$$Ln \left[\frac{(b)_{0} - (b) eq}{(b) - (b) eq} \right] = (k' + k_{2}) t$$
 (6)

Let (b)_o - (b) eq = Beq (ie total amount of ligand bound at equilibrium) then, (b) - (b) eq = Beq - B (where B is the amount bound at time t)

Therefore, equation (6) becomes

$$Ln \frac{Beq}{Beq - B} = (k' + k_2) t$$
(7)

A plot of Ln $\frac{Beq}{(Beq - B)}$ agaonst t yields a slope (k' + k₂) or Kobs, which

is the pseudo first-order association rate constant.

Since $k' = k_1(a)$

Therefore, k_1 , the second-order association rate constant

$$= \frac{\text{Kobs} - k_2}{(a)}$$

Since (a) >> (b) and can be regarded as relatively unchanged throughout the reaction, (a) \approx (a)_o, which is the initial ligand concentration used.

Dissociation reaction

$$L + R \xrightarrow{k_1} LR$$

If association can be experimentally stopped at equilibrium, ligand dissociation would be expected to follow a first-order kinetics.

Therefore,
$$\frac{-d(c)}{dt} = k_2(c)$$

or $\frac{-d(c)}{(c)} = k_2 dt$ (1)

After integration between time zero -> t (where time zero refers to the equilibrium state before dissociation is initiated), equation (1) becomes

$$\frac{\text{Ln}}{(c) \text{ eq}} \left[\frac{(c) t}{(c) \text{ eq}} \right]^{=-k_2 t}$$
(2)

(c) eq = Beq and (c) t = B

Therefore,
$$Ln\left(\frac{B}{Beq}\right) = -k_2t$$

A plot of $Ln\left(\begin{array}{c}B\\Beq\end{array}\right)$ against t yields a negative slope k_2 , which is the firstorder rate constant for the dissociation reaction. Appendix V

I Calculation of K_I from IC₅₀ (from Cheng, & Prusoff, 1973)

For radioligand binding to receptor,

$$B_0 = \frac{Bmax S}{Kd + S}$$

where Bo = Bound radioligand in the absence of competing drug, Bmax = maximal binding capacity, Kd = dissociation constant of the radioligand and S = concentration of free radioligand.

When competitive inhibitor is present,

$$B_{I} = \underline{Bmax S} \qquad WHERE$$

$$Kd\left(1 + \frac{I}{K_{I}}\right) + S$$

 B_I = Bound radioligand in the presence of competing drug, I = competing drug concentration, and K_I = dissociation constant of the competing drug. When I = IC₅₀, 2B_I = B_o,

therefore,
$$\frac{2B\max S}{Kd\left(1+\frac{IC_{50}}{K_{I}}\right)+S} = \frac{B\max S}{Kd+S}$$

By rearrangement,

$$IC_{50} = K_{I} \left(1 + \frac{S}{Kd} \right)$$

or $K_{I} = \frac{IC_{50}}{\left(1 + \frac{S}{Kd} \right)}$

II Determination of slope factor (nH) for displacement curve

% I =
$$\frac{100\% (L)^n}{IC_{50} + (L)^n}$$

where % I = % radioligand displaced.

(L) = concentration of inhibitor

 IC_{50} = concentration of inhibitor causing 50% Inhibition/displacement.

 $100\% (L)^{n} = \% I (IC_{50}) + (L)^{n}\% I$ $(L)^{n} \frac{(100\% - \%I)}{\%I} = IC_{50}$ $n \log (L) + \log(\frac{100\% - \%I}{\%I}) = \log IC_{50}$ $\log(\frac{\%I}{100\% - \%I}) = n \log (L) - \log IC_{50}$

A plot of $Log(\frac{\%I}{100\% - \%I})$ against Log (L) yields n, which is the 'Hill' slope

factor. The X-intercept yields the IC₅₀.

• •

REFERENCES

.

. .

References

- Ahlquist, R.J. (1948). Am. J. Physiol. 153, 586 600.
- Algate, D.R. & Waterfall, J.F. (1978). J. Pharm. Pharmacol. Commun. 30, 651 652.
- Alexander, R.W., Cooper, B. & Handin, R.I. (1978). J. Clin. Invest. 61, 1136 1144.
- Aktories, K., Schutz, G. & Jakobs. K.H. (1979). FEBS Lett. 107, 100-104.
- Ariens, E.J. (1954). Arch. Int. Pharmacodyn. 99, 32-49.
- Aronstram, R.S., Schuessler, J.C. & Eldefrawi, M.E. (1978). Life Sci. 23, 1377 1382.
- Aviado, D.M. & Micozzi, M.S. (1981). In, Adrenergic Activators and Inhibitors, Part II. (Szekeres, L. ed.) Handbook of Exp. Pharmac., Vol. 54/II. Springer-Verlag, Berlin, pp. 3 - 46.
- Barger, G. & Dale, H.H. (1910). J Physiol. (Lond.) 41, 19 59
- Barnett, D.B., Cheung, Y.D. & Nahorski, S.R. (1982). Br. J. Pharmacol. 75, 151P.
- Barthel, W. & Markwardt, F. (1974). Biochem. Pharmacol. 23, 37 45.
- Barnes, P. J., Skoogh, B T., Nadel, J. A. & Roberts, J. M. (1983), Mol. Pharmacol. 23, 570 - 575.
- Beld, A. J. & Ariens, E. J. (1974). Eur. J. Pharmacol. 25, 203-209.
- Berthelson, S. & Pettinger, W.A. (1977). Life Sci. 21, 595 606.
- Bittiger, H., Heid, J. & Wigger, N. (1980). Nature 287, 645-647.
- Blaschko, H. (1939). J. Physiol. (Lond.) 96, 50P 51P.
- Bobik, A. (1982). Life Sci. 30, 219-227.
- Boeynaems, J.M. & Durmont, J. E. (1975). J. cycl. Nucleotides Res. 1, 123-142.
- Boon, N.A., Elliott, J.M., Grahame-Smith, D.G., Outlaw, T. & Stump, K. (1981). / Br. J. Pharmacol 74, 802P.
- Boullin, D.J., Costa, E. & Brodie, B.B. (1967). J. Pharmacol. Exp. Ther. 157, 125-134.
- Born, G.V.R. (1962). Nature 194, 927 929.
- Born, G.V.R. & Cross, M.J. (1963). J. Physiol. (Lond.) 168, 178-195.
- Brittain, R.T. (1971). Postgrad. Med. J. 47 (Suppl.), 11-16.
- Brown, G.L. & Gillespie, J.S. (1957). J. Physiol. (Lond.), 138, 81 102.

- Burgess, G.M. Godfrey, P.P., McKinney, J.S., Berridge, M.J., Irvine, R.F. & Putney, J.W.Jr. (1984). Nature 309, 63 66.
- Burns. T.W. Mohs, J.M. Langley, P.E., Yaion, R & Chase, G.R. (1974). J. Clin, Invest. 53, 338 - 341.
- Bylund, D.B. & U'Prichard, D.C. (1983). Int. Rev. Neurobiol. 24, 344-431.
- Cambridge, D., Davey, M.J. & Massingham, R. (1977).Br. J. Pharmacol. 59, 514-515p.
- Cannon. W.B. & Rosenblueth, A. (1937). Autonomic Neuroeffector Systems. Macmillan, New York.
- Caron, M.G., Beaulieu, M., Raymond, V., Cagne, B., Drouin, J., Lefkowitz, R.J. & Eabrie, F. (1978). J. Biol. Chem. 253, 2244-2253.
- Cebeddu. L.X. Barnes, E.M., Langer, S.Z. & Weiner. N. (1974). J. Pharmacol. Exp. Ther. 190, 431-450.
- Cedarbaum, J.M. & Aghajanian, G.K. (1977). Eur. J. Pharmacol. 44, 375 - 385.
- Celuch, S.M., Dubocovich, M.L. & Langer, S.Z. (1978). Br. J. Pharmacol. 63, 97 109.
- Chard, T. (1980). In, Immunochemical Techniques, part (a) (Van Vunakis, H. & Langone, J.J. eds.) Methods in Enzymology. Acad. Press, New York, London, pp.280 - 291.
- Cheng, Y.C. & Prusoff, W.H. (1973). Biochem. Pharmacol. 22, 3099 3108.
- Cheung, Y.D., Barnett, D. B. & Nahorski, S.R. (1982). Eur. J. Pharmacol. 84, 79 85.
- Cheung, Y. D., Nahorski, S. R., Rhodes, K. F. & Waterfall J. F. (1984). Biochem. Pharmacol. 33, 1566 - 1568.
- Clark, A. J. (1933). The mode of action of drugs on cells. E. Arnold & Co., London.
- Clarke, W. R., Jones, L. R. & Lefkowitz, R.J. (1978). J. Biol. Chem. 253, 5965 5979.
- Clayton, S. & Cross, M.J. (1963). J. Physiol. (Lond.) 169, 82P.
- Cooper, B., Handin, R.I., Young, L. H. & Alexander, R. W. (1978). Nature (Lond.) 274, 703-706.
- Cooper, J. R., Bloom, F.E. & Roth, R.H. (1978). The Biochemical Basis of Neuropharmacology, 3rd ed. Oxford University Press, New York.
- Cuatrecasas, P., Benneth, V. & Jacobs, S. (1975). J. Membrane Biol. 23, 249 278.
- Daiguji, M., Meltzer, H.Y. & U'Prichard, D.C. (1981) Life Sci, 28, 2705 - 2717.

- Dale, H.H. (1906), J. Physiol. (Lond.) 34, 163 206.
- Davis, J. M., Strittmatter, W.J., Hoyler, E. & Lefkowitz, R.J. (1977). Brain Res. 132, 327 - 336.
- De Lean, A., Stadel, J.M. & Lefkowitz, R.J. (1980) J. Biol. Chem. 255, 7108 - 7117.
- Di Bona, G.F. (1982). Rev. Physiol. Biochem. Pharmacol. 94, 76 181.

Dickinson, K.E.J. & Nahorski, S.R. (1981). Br. J. Pharmacol. 73, 202P.

Dickinson, K.E.J. (1982). Ph.D. thesis, University of Leicester, England.

Drew, G.M. & Whiting, S.B. (1979). Br. J. Pharmacol. 67, 207 - 215.

- Drew, G.J., Gower, A. J. & Marriott, A.S. (1979). Br. J. Pharmacol. 67, 133 141.
- Docherty, J.R. & McGrath, J.C. (1980). Naunyn-Schmiedeberg's Arch. Pharmacol. 312, 107 - 116.
- Docherty. J.R. & Starke, K. (1982). Br. J. Pharmacol. 76, 327 335.
- Dubocovich, M.L. & Langer, S.Z. (1974). J. Physiol. (Lond.) 237, 505 519
- Dubocovich, M.L. (1979). In, Presynaptic Receptors. (Langer, S.Z., Starke, K. & Dubocovich, M.L. eds.) Pergamon Press, Oxford, pp. 29 – 36.
- Doxey, J.C., Smith, C.F.C. & Walker, J.M. (1977) Br. J. Pharmacol. 60 91 - 96.
- Drummond, A. H. (1976). In, Platelets in biology and pathology. (Gordon, J. L. ed.) North-Holland, Amsterdam, pp. 203-239.
- Dunlop, D. & Shanks, R.G. (1968). Br. J. Pharmacol. 32, 201-218.
- Eisenfeld, A.J., Axelrod, J. & Krakoff, L. (1967) J. Pharmacol. Exp, Ther. 156, 107-113.
- Elliott, J.M. & Grahame-Smith, D.C. (1980). Br. J. Pharmacol. 70, 59p.
- Enero, M.A., Langer, S.Z., Rothlin, R.P. & Stefano, F.J.E. (1972). Br. J. Pharmacol. 44, 672 688.
- Exton, J.H. (1981). In, Adrenoceptors and Catecholamines, Vol. 1, Part A. (Kuno, G. ed:)J. Wiley & Sons, New York, pp. 117-129.

Fain, J.N. & Garcia-Sainz, J.A. (1980). Life Sci. 26, 1183 - 1194.

- Feinstein, M. B., Rodan, G.A. & Cutler, L.S. (1981). In, Platelets in biology and pathology - 2. (Gordon, J.L. ed.) Elsevier/Holland, Amsterdam, pp. 437 - 472.
- Feller, D.J. & Bylund, D.B. (1984). J. Pharmacol. Exp. Ther. 228, 275 282.
- Ferry, D.R. & Glossman, H. (1983_a) Br. J. Pharmacol. 78, 81P.

- Furchgott, R.F. (1966). In, Advances in Drug Research, (Harper, N.J. & Simmonds, A.B. eds.), Vol. 3. Academic Press, London, pp. 21-55.
- Furchgott, R.F. (1972). In, Catecholamines. (Blaschko, H. & Muscholl, E. eds.) Springer-Verlag, Berlin, pp. 283 - 335.
- Gaarder, A., Jonsen, J., Laland, S., Hellem, A.J. & Owren, P.A. (1961). Nature (Lond.) 192, 531-532.
- Garcia-Sainz, J.A., Hoffman, B.B., Li, S. Y., Lefkowitz, R.J. & Fain, J.N. (1980). Life Sci. 27, 953 961.
- Geynet, P., Borsodi, A., Ferry, N. & Hanoune, J. (1980). Biochem. Biophy. Res. Comm. 97, 947 - 954.
- Glossmann, H. & Presek, P. (1979). Naunyn-Schmiedeberg's Arch. Pharmacol. 306, 67 73.
- Glossmann, H., Hornung, R. & Presek, p. (1980). J. Cardiovasc. Pharmacol. 2 (suppl. 3), S 303 S 324.
- Giudicelli, Y. & Pecquery, R. (1981). FEBS. Lett. 130, 301-304.
- Godfraind, T., Miller, R.C. & Socrates Lima, J. (1982). Br. J. Pharmacol. 77, 597 604.
- Gordon, J.L. (1981). In, Platelets in biology & pathology 2. (Gordon, J. L. ed.) Elsevier/North-Holland, Amsterdam, pp. 1 17.
- Gorissen, H., Ilien, B., Aerts, G. & Laduron, P. (1980). FEBS. Lett. 121, 133-138.
- Gorissen, H., Aerts, G., Ilien, B. & Laduron, P. (1981). Analyt. Biochem. 111,33 41.
- Grant, J.A. & Scrutton, M.C. (1979). Nature, 277, 659 661.
- Grant, J.A. & Scurtton, M.C. (1980), Br. J. Pharmacol. 71, 121 134.
- Gray, E.G. & Whittaker, V.P. (1962). J. Anat. 96, 79 88.
- Greengrass, P. & Bremner, R. (1979). Eur. J. Pharmacol. 55, 323 326.
- Greenberg. D.A., U'Prichard, D.C. & Snyder, S.H. (1976) Life Sci. 19, 69 76.
- Greenberg, D.A. & Snyder, S.H. (1977). Life Sci. 20, 927 932.
- Greenberg, D.A., U'Prichard, D.C., Sheehan, P. & Snyder, S.H. Brian Res. 140, 378 284.
- Greenberg & Snyder, S.H. (1978). Mol. Pharmacol. 14, 38 49.
- Grette, K. (1962). Acta. Physiol. Scand. 56 (Suppl. 195). 5 93.

- Guellaen, G., Yates-Aggerbeck, M., Vauguelin, G., Strosberg, D. & Hanoune, J. (1978). J. Biol. Chem. 253, 1114-1120.
- Hall, J. M., Frankham, P.A. & Strange, P.G. (1983). J. Neurochem. 41, 1526, 1532.
- Haslam, R.J. (1964). Nature (Lond.) 202, 765 768.
- Helenius, A. & Simons, K. (1975). Biochem. Biophys. Acta. 415, 29 79.
- Hill, A.V. (1910). J. Physiol. 40, 190.
- Hoffman, B.B., De Lean, A., Wood. C., Schocken, D. D. & Lefkowitz, R.J. (1979). Life Sci. 24, 1739 1745.
- Hoffman, B.B., Mullikin Kilpatrick, D. & Lefkowitz, R.J. (1980). J. Biol. Chem. 255, 4645 - 4652.
- Hoffman, B.B., Michel, T., Mullikin Kilpatrick, D., Lefkowitz, R.J. Tolbert, M.E., Gilman, H & Fain, J.N. (1980). Proc Natl. Acad. Sci. (U.S.A.) 77, 4569 - 4573.
- Hoffman, B.B., Mullikin-Kilpatrick, D. & Lefkowitz, R.J. (1980). J. Biol. Chem. 253, 1114-1120.
- Hoffman, B.B. & Lefkowitz, R.J. (1980) Biochem. Pharmacol. 29, 1537 1541.
- Hoffman, B.B., Yim, S., Tsai, B.S. & Lefkowitz, R.J. (1981). Biochem. Biophy, Res. Comm. 100, 724 - 731.
- Hoffman, B.B., Dukes. D. F. & Lefkowitz, R.J. (1981) Life Sci. 28, 265 272.
- Hoffman, B.B., Michel. T. Brenneman, T.B. & Lefkowitz, R.J. (1982). Endocrin 110, 926 - 932.
- Howells, R.D., Gioannini, T.L., Hiller, J.M. & Simon, E.J. (1982). J. Pharmacol. Exp. Ther. 222, 629-634.
- Howelett, A.C., Sternweis, P.C., Macik, B.A. Van Arsdale, P.M. & Gilman, A.G. (1979). J. Biol. Chem. 254, 2287 2295.
- Hsu, C.Y., Knapp, D.R. & Halushka, P.V. (1979). J. Pharmacol. Exp. Ther. 208, 366 370.
- Innes, I.R. & Nickerson, M. (1975). In, The Pharmacological Basis of Therapeutics. (Goodman, L.S. & Gilman, A.G. eds.) 5th ed. Macmillan, New York, pp. 447 - 513.
- Insel. P.A. & Stoolman, L.M. (1978). Mol. Pharmacol. 14, 549 561.
- Iversen, L.L. (1965). Advan. Drug. Res. 2, 5 23.
- Iversen, L.L. & Langer, S.Z. (1969). Brit. J. Pharmacol. 37, 627-627.
- Jacobs, S. & Cuatrecasas, P. (1976). Biochim. Biophy. Acta. 433, 482 - 495.
- Kafka, M.S., Tallman, J.F. & Smith, C.C. (1977). Life Sci. 21, 1429 1438.

- Jakobs, K.H., Saur, W. & Schutz, G. (1976). J. Cycl. Nucleotide Res. 2, 381-329.
- Jakobs, K.H., Saur, W. & Schutz, G. (1978) FEBS Lett. 85, 167 170.
- Jakobs, K.H., Schutz, G., Gaugler, B. & Pfeuffer, T. (1983) Eur. J. Biochem. 134, 351 - 354.
- Jakobs, K.H., Gehring, U., Gaugler, B., Pfeuffer, T. & Schutz, G. (1983). Eur. J. Biochem. 130, 605 - 611.
- Kahn, D.J., Mitrius, J.C. & U'Prichard, D.C. (1982). Mol. Pharmacol. 21, 17-26.
- Karliner, J.S., Motulsky, H.J. & Insel, P.A. (1982) Mol. Pharmacol. 21, 36-43.
- Katada, T., Bokoch, G.M., Northup, J.K., Ui, M. & Gilman, A.G. (1984), J. Biol. Chem 259, 3568 - 3577.
- Katada, T., Northup, J.K., Bokoch, G.M., Ui, M. & Gilman, A.G. (1984). J. Biol. Chem. 259, 3578 - 3585.
- Katada, T., Bokoch, G.M., Smigel, M.D., Ui, M. & Gilman, A.G. (1984_c). J. Biol. Chem. 259, 3586 - 3595.
- Kent, R.S., De Lean, A & Lefkowitz, R.J. (1980) Mol. Pharmacol. 17, 14-23.
- Kirpekar, S.M., Furchogtt, R.F., Wakade, A.R. & Prat, J.C. (1973). J. Pharmacol. Exp. Ther. 187, 529 - 538.
- Koelle, G.B. (1975).In, The Pharmacological Basis of Therapeutics. (Goodman, L.S. & Gilman, A.G. eds.) 5th ed. Macmillan, New York, pp. 404-444.
- Kuno, T., Saijoh, K. & Tanaka, C. (1983). J. Neurochem. 41, 841-847.
- Lands, A.M., Arnold, A., McAuliff, J.P., Luduena, F.P. & Brown, R.G.Jr (1967). Nature (Lond.) 214, 597 - 598.
- Lands, A.M., Luduena, F.P. & Buzzo, H.J. (1967) Life Sci, 6, 2241 2249.
- Laduron, P.M. & Ilien, B. (1982). Biochem. Pharmacol. 31, 2145 2151.
- L a duron, P.M. (1983). TIPS 4, 333 335.
- Langer, S.Z. (1970). J. Physiol. (Lond.) 298, 515-546.
- Langer, S.Z. & Vogt, M. (1971). J. Physiol. (Lond.) 214, 159 171.
- Langer, S.Z. (1974). Biochem. Pharmacol. 23, 1793 1800.
- Langer, S.Z. & Enero, M.A. (1974). J. Pharmacol. Exp. Ther. 191, 431-443.
- Langer, S.Z. (1977). Br. J. Pharmacol. 60, 481-479.
- Langer, S.Z., Massingham, R. & Shepperson, N.B. (1980). Clin Sci. 59, 2255-228S.
- Langer, S.Z. (1980). Pharmacol. Rev. 32, 337 362.
- Langer, S.Z. & Shepperson, N.B. (1982). TIPS 3, 440-444.
- Langley, J.N. (1905). J. Physiol. (Lond.) 33,374-413.

- Lasch, P. & Jakobs, K.H. (1979). Naunyn-Schmiedeberg's Arch. Pharmacol. 306, 119 125.
- Latifpour, J., Jones, S.B. & Bylund, D.B. (1982). J. Pharmacol. Exp. Ther. 223, 606-611.
- Lavin, T.N., Hoffman, B.B. & Lefkowitz, R.J. (1981). Mol. Pharmacol. 20, 28 34.
- Lefkowitz, R.J. & Caron, M.G. (1975). J. Biol. Chem. 250, 4418 4422.
- Lefkowitz, R.J. Limbird, L.E., Mukherjee, C. & Caron, M.G. (1976). Biochim. Biophy. Acta. 457, 1 - 39.
- Lefkowitz, R.J. & Hoffman, B.B. (1980₂). TIPS 1, 314-318.
- Lefkowitz, R.J. & Hoffman, B.B. (1980). TIPS 1, 369 372.
- Levitzki, A. (1978). Biochem. Pharmacol. 27, 2083 2088.
- Levy, B. & Wilkenfeld, B.E. (1969). Eur. J. Pharmacol. 5, 227 234.
- Levy, B. (1966), J. Pharmacol. Exp. Ther. 151, 413 422.
- Limbird, L.E., Gill, D.M. & Lefkowitz, R.J. (1980). Proc. Natl. Acad. Sci. (U.S.A.). 77, 775 - 779.
- Limbird, L.E. (1981), Biochem. J. 195, 1 13.
- Limbird, L.E., Speck, J.L. & Smith, S.K. (1982). Mol. Pharmacol. 21, 709-617.
- Linstrom, J.M. (1978). In, Neurotransmitter Receptor Binding. (Yamamura, H.I., Enna, S.J. & Kuhar, M.J. eds.) Raven Press, New York, 91-111.
- Lowry, O.H., Rosebrough, N.J., Farr, A.H. & Randell, R.J. (1951). J. Biol. Chem. 193, 265 275.
- Macfarlane, D.E., Wright, B.L. & Stump, D.C. (1981). Thrombosis Res. 24, 31 43.
- Macfarlane, D.E. & Stump. D.C. (1982). Mol. Pharmacol. 22, 574 579.
- Macfarlane, D.E. (1982). Mol. Pharmacol. 22, 580 588.
- Manning, D.R. & Gilman, A.G. (1983). J. Biol. Chem. 258, 7059 7063.
- Marquis, N.R., Becker, J.A. & Vigdahl, R.L. (1970). Biochem. Biophy. Res. Comm. 39, 783 - 789.
- McCall, R.B., Schuette, M.R., Humphrey, S.J., Lahti, R.A. & Barsuhn, C. (1983). J. Pharmacol. Exp. Ther. 224, 501 - 507.
- McCulloch, M.W., Rand, M.J. & Story, D.F. (1972). Br. J. Pharmacol. 46, 523 524P.
- McPherson, G.A. & Summers, R.J. (1982). Br. J. Pharmacol. 77, 177-184.

- McPherson, G.A. & Summers, R.J. (1982_b). Biochem. Pharmacol. 31, 583 - 587.
- Medgett, C., Mc Culloch, M.W. & Rand, M.J. (1978). Naunyn-Schmiedeberg's Arch. Pharmacol. 304, 215-221.
- Mefford, I.N. (1981). J. Neurosci. Meth. 3, 207 224.
- Miach, P.J., Dausse, J.P. & Meyer, P. (1978). Nature (Lond.) 274, 492 494.
- Miach, P.J. Dausse, J.P., Cardot, A. & Meyer, P. (1980). Arch. Pharm. 312, 23 26.
- Michel, T., Hoffman, B.B. & Lefkowitz, R.J. (1980), Nature, 288, 709-711.
- Michel, T., Hoffman, B.B., Lefkowitz, R.J. & Caron, M.C. (1981). Biochem. Biophy. Res. Comm. 100, 1131 - 1136.
- Michell, R.H. (1975). Biochim. Biophys. Acta. 415, 81 147.
- Michell, R.H., Kirk, C.J., Jones, L.M., Downes, C.P. & Creba, J.A. (1981). Phil. Trans. Roy. Soc. (Lond.) B296, 123 - 137.
- Mills, D.C.B. & Roberts, G.C. (1967). J. Physiol. (Lond.), 193, 443 453.
- Mikhailidis, D.P., Hutton, R.A. & Dandona, P. (1981). Clin. Sci. 61, 28P.
- Mitchell, J.R.A. & Sharp, A.A. (1964), Br. J. Pharmacol. 10, 78 93.
- Mooney, J.J., Horne, W.C., Handin, R.I., Schildkraut, J.J. & Alexander, R.Y. (1982). Mol. Pharmacol. 21, 600 608.
- Morton, I.K.M. & Halliday, J. (1981). In, Adrenoceptors and Catecholamine Action, Vol. 1, Part A. (Kuno, G. ed.). J. Wiley & Sons, New York, pp. 1 - 68.
- Motulsky, H.J., Shattil, S.J. & Insel, P.A. (1980). Biochem. Biophy. Res. Comm. 97, 1562 - 1570.
- Motulsky, H.J. & Insel, P.A. (1982). Biochem. Pharmacol. 16, 2591 2597.
- Motulsky, H.J. & Insel, P.A. (1982). New Eng. J. Med. 307, 18-29.
- Munson, P.J. & Rodbard, D. (1980). Anal. Biochem. 197, 220 239.
- Mustard, J.F. & Packham, M.A. (1970). Pharmacol. Rev. 22, 97 187.
- Nachman, R.L. & Ferris, B. (1974). J. Biol. Chem. 249, 704-710.
- Nambi, P. Aiyar, N.V. & Sharma, R.K. (1982). FEBS Lett. 140, 98 102.
- Newman, K.D., Williams, L.T., Bisphoric, N. & Lefkowitz, R.J. (1978). J. Clin. Invest. 61, 395 - 402.
- Northup, J.K., Smigel, M.D., Sternweiss, P.C. & Gilman, A.G. (1983). J. Biol. Chem. 258, 11369 - 11376.
- Owen, N.E., Feinberg, H. & LeBreton, G.C. (1980) Am. J. Physiol. 239, H483 - 488.

- Perry, B.D. & U'Prichard, D.C. (1981). Eur. J. Pharmacol. 76, 461 464.
- Pettinger, W.A., Keaton, T.K., Cambell, W.B. & Harper, D.C. (1976). Circ. Res. 38, 338 - 346.
- Pike, L.J. & Lefkowitz, R.J. (1981). J. Biol. Chem. 256, 2207 2212.
- Porte, D. Jr., Robertson, R.P. (1973). Fed. Proc. 32, 1792 1796.
- Potter, D.E. (1981). In, Adrenergic Activators and Inhibitors, Part II. (Szekeres, L. ed.) Handbook Exp. Pharmac., Vol. 54/II. Springer-Verlag, Berlin, pp. 161 - 211.
- Raisman, R., Briley, M. & Langer, S.Z. (1979). Naunyn-Schmiedeberg's Arch. Pharmacol. 307, 223 - 226.
- Reber, L.A. & Schott, H. (1975). In, Remington's Pharmaceutical Sciences. (Osol, A. & Hoover, J.E. eds.) 15th ed. Mack, Easton, Penn, pp. 299 - 321.
- Richardson, A. (1979). Ph.D. thesis, U. of Leicester, England.
- Richardson, A. & Nahorski, S.R. (1979). Br. J. Pharmacol. 66, 469 470P.
- Robison, G.A., Butcher, R.W. & Sutherland, E.W. (1971). Cyclic AMP. Academic Press, New York & London.
- Rodbell, M. (1980). Nature 284, 17 21.
- Ross, E.M., Maguire, M.E., Sturgill, T.W., Biltonen, R.L. & Gilman, A.G. (1977). J. Biol. Chem. 252, 5761 5775.
- Rouot, B. & Snyder, S.H. (1979). Life Sci. 25, 769 774.
- Rouot, B., U'Prichard, D.C. & Snyder, S.H. (1980). J. Neurochem. 34, 374 384.
- Rouot, B., Quennedey, M.C. & Schwartz, J. (1982). Naunyn-Schmiedeberg's Arch. Pharmacol. 321, 253 259.
- Ruffolo, R.R. Jr., Yaden, E.J. & Waddell, J.E. (1980). J. Pharmacol. Exp. Ther. 213, 557 - 561.
- Ruffolo, R.R. Jr., Waddell, J.E. & Yaden, E.J. (1981). J. Pharmacol. Exp. Ther. 217, 235 - 240.
- Ruffolo, R.R. Jr., Wa'ddell, J.E. & Yaden, E.J. (1982). J. Pharmacol. Exp. Ther. 221, 309 - 314.
- Ruffolo, R.R. Jr. (1982). J. Auton. Pharmac. 2, 277 295.
- Sabol, S.L. & Nirenberg, M. (1979_a). J. Biol. Chem. 254, 1913 1920.
- Sabol, S.L. & Nirenberg, M. (1979). J. Biol. Chem. 254, 1921 1926.
- Salama, A.I., Lin, L.L., Repp, L.D. & U'Prichard, D.C. (1982). Life Sci., 30, 1305 1311.
- Scatchard, G. (1949). Ann. N.Y. Acad. Sci. 51, 660 672.

- Schmitz, J.M., Graham, R.M., Sagalowsky. A. & Pettinger, W.A. (1981). J. Pharmacol. Exp. Ther 219, 400 - 406.
- Scrutton, M.C. & Wallis, R.B. (1981). In, Platelets in biology and patholgoy
 2. (Gordon, J.L. ed.) Elserier/North-Holland, Amsterdam, pp. 179 210.
- Shane, E., Gammon, D.E. & Bilezikian, J.P. (1981). Biochem. Pharmacol. 30, 531 535.
- Shattil, S.J., McDonough, M., Turnbull, J. & Insel, P.A. (1981). Mol. Pharmacol 19, 179 - 183.
- Shattil, S.J. & Bennett, J.S. (1981). Annals Int. Med. 94, 108 118.
- Sibley, D.R. & Creese, I. (1980). Eur. J. Pharmacol. 65, 131 133.
- Singer, S.J. (1974). Ann. Rev. Biochem. 43, 805 829.
- Sladeczek, F., Bockaert, J. & Mauger, J.P. (1983). Mol. Pharmacol. 24, 392 397.
- Sladeczek, F., Bockaert, J. & Rouot, B. (1984). Biochem. Biophy. Res. Comm. 199, 1116 - 1121.
- Smith, S.K. & Limbird, L.E. (1981). Proc. Natl. Acad. Sci (U.S.A.) 78, 4026 4030.
- Smith, S.K. & Limbird, L.E. (1982). J. Biol. Chem. 257, 10471 10478.
- Snavely, M.D. & Insel, P.A. (1982). Mol. Pharmacol. 22, 532 546.
- Spiegel, A.M. & Downs, R.W. (1981). Endocrin. Rev. 2, 275 305.
- Stadel, J.M., De Lean, A. Mullikin-Kilpatrick, D., Sawyer, D.D. & Lefkowitz, R.J. (1981). J. Cyclic Nucleotide Res. 7, 37 - 47.
- Staehelin, M., Simons, P., Jaeggi, K. & Wigger, N. (1983). J. Biol. Chem. 258, 3496 3502.
- Starke, K., Montel, H. & Shumann, H.J. (1971). Naunyn-Schmiedeberg's Arch. Pharmacol. 270, 210 214.
- Starke, K., Endo, T. & Taube, H.D. (1975) Naunyn-Schmiedeberg's Arch. Pharmacol. 291, 55 - 88.
- Starke, K. (1977). Rev. Physiol. Biochem. Pharmacol. 77, 1 124.
- Starke, K. & Langer, S.Z. (1979). In, Presynaptic receptors. (Langer, S.Z., Starke, K. & Dubocovich, M.L. eds.) Permgamon Press, Oxford, pp. 1-3.
- Starke, K. (1981). Rev. Physiol. Biochem. Pharmacol., 88, 199 236.
- Steer, M.L. & Wood, A. (1979). J. Biol. Chem. 254, 10791-10797.
- Steer, M.L., Khorana, J. & Galgoci, B. (1979). Mol. Pharmacol. 16, 719-728.

Schild, H.O. (1949). Br. J. Pharmacol. 4, 277 - 280.

Stephenson, R.P. (1956). Br. J. Pharmacol. 11, 379 - 393.

- Stjarne, L. (1972). In, Catecholamines. (Blaschko, H. & Muscholl, E. eds.) Handb. Exp. Pharmac., Vol. 33. Springer-Verlag, Berlin, pp. 231 - 269.
- Stockton, J.M., Birdsall, N.J.M., Burgen, A.S.V. & Hulme, E.C. (1983). Mol. Pharmacol. 23, 551 - 557.

Summers, R.J. (1980). Br. J. Pharmacol. 71, 57 - 63.

- Summers, R.J., Barnett, D.B. & Nahorski, S.R. (1982). Life Sci. 33, 1105 - 1112.
- Svensson, T.H., Bunney, B.S. & Aghajanian, G.K. (1979). Brain Res. 92, 291 306.

Swillens, S. & Dumont, J.E. (1980). Life Sci. 27, 1013 - 1028.

- Tanaka, T. & Starke, K. (1979). Naunyn-Schmiedeberg's Arch. Pharmacol. 309, 207 215.
- Tanaka, T. & Starke, K. (1980). Eur. J. Pharmacol. 63, 191 194.
- Tharp, M. D., Hoffman, B.B. & Lefkowitz, R.J. (1981). J. Clin. Endocrinol. & Metab. 52, 709 714.
- Timmermans, P.B.M.W.M., Schoop, A.M.C., Kwa, H.Y. & Van Zwieten, P.A. (1981). Eur. J. Pharmacol. 70, 7 - 15.
- Tsai, B.S. & Lefkowitz, R.J. (1978). Mol. Pharmacol. 14, 540 548.
- Tsai, B.S. & Lefkowitz, R.J. (1979. Mol. Pharmacol. 16, 61 68.
- Titeler, M. & Seeman, P. (1978). Proc. Natl. Acad. Sci. (U.S.A.) 75, 2249 2253.
- Tollefsen, D.M., Feagler, J.R. & Majerus, P.W. (1974). J. Biol. Chem. 249, 2646 2651.
- Tolkovsky, A.M. & Levitzki, A. (1978). Biochem. 17, 3795 3810.
- U'Prichard, D.C. & Snyder, S.J. (1977). Life Sci. 20, 527-534.
- U'Prichard, D.C. & Snyder, S.H. (1978). J. Biol. Chem. 253, 3444-3452.
- U'Prichard, D.C. & Snyder, S.H. (1979). Life Sci. 24, 79 88.
- U'Prichard, D.C. & Snyder, S.H. (1980). J. Neurochem. 34, 385 394.
- U'Prichard, D.C., Mitrius, J.C., Kahn, D.J. & Perry, B.D. (1983). In, Molecular Pharmacology of Neurotransmitter Receptors. (Segawa, T., Yamamura, H.I. & Kuriyama, K. eds.) Reven Press, N.Y. pp. 53 - 72.

U'Prichard, D.C. (1983). TIPS. 4, 331 - 332.

Van Meel, J.C.A., de Jonge, A., Kalkman, H.O., Wiffert, B., Timmermans, P.B.M.W.M. & Van Zwieten, P.A. (1981). Naunyn-Schmiedeberg's Arch. Pharmacol. 316, 288 - 293.

- Vargraftig, B.B., Chignard, M. & Benveniste, J. (1981). Biochem. Pharmacol. 30, 273 271.
- Weiss, H.J. (1982). Platelets. Pathophysiology and antiplatelet drug therapy. Alan R. Liss Inc., New York.
- Weitzell, R., Tanaka, T. & Starke, K. (1979). Naunyn-Schmiedeberg's Arch. Pharmacol. 308, 127 - 136.
- Wikberg, J.E.S. (1976). Acta Physiol. Scand. Suppl. 468.
- Williams, L.T. & Lefkowitz, R.J. (1976). Science, 192, 791 793.
- Williams, L.T., Mullikin, D. & Lefkowitz, R.J. (1976). J. Biol. Chem. 251, 6915 0 6923.
- Williams, L.T. & Lefkowitz, R.J. (1977). Mol. Pharmacol. 13, 304 312.
- Williams, L.T. & Lefkowitz, R.J. (1978). Receptor Binding Studies in Adrenergic Pharmacology. Raven Press, New York.
- Woodcock, E.A., Olsson, C.A. & Johnston, C.I. (1980). J. Cyclic Nucleotide Res. 6, 261 - 270.
- Woodcock, E.A. & Murley, B. (1982). Biochem. Biophy. Res. Comm. 105, 252 258.
- Woodcock, E.A. & Johnston, C.I. (1982). Mol. Pharmacol. 22, 589-594.

Wurtman, R.J. (1966). Catecholamines. Churchill, London.

- Yamada, S., Yamamura, H.I. & Roeske, W.R. (1980). Life Sci. 27, 2405 - 2416.
- Young, W.B. & Kuhar, M.J. (1980). Eur. J. Pharmacol. 67, 493 495.

Zucker, M.B. (1980). Sci. Am. 242, 86 - 103.