

ceramides, a second messenger involved in cell apoptosis, and transient activation of the transcription factor NF κ B, in lung and alveolar macrophages. These signal transduction events were accompanied with accumulation of free radicals and lung damage, including edema, excessive release of type II cells. NIOSH 861.3
2002.3388 COMPARISON...
rd gas exposure, there was more about 50-70% inhibition of the mustard gas induced signal transduction events. Thus, N-acetylcysteine, an antioxidant is a potent antidote for mustard gas induced lung injury. [Supported by grants from NIH (2S06-GM 08037) and Army (DAMD 17-99-1-9550)]

861.3

Comparison of the Responsiveness of Primary Alveolar Macrophages (AM's), Primary Alveolar Type II Cells (TII), and a Rat Alveolar Type II Cell Line (RLE-6TN) to Lipopolysaccharide (LPS) and Silica Exposure.

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The goal of this study was to compare the responses of AM's and TII cells to LPS or silica and eventually determine their mutual interactions. AM's were collected by bronchoalveolar lavage, TII cells were isolated by enzymatic digestion and purified by panning (~20 million cells/rat, 95% pure), and RLE-6TN were commercially obtained. Cells were exposed in vitro to LPS or silica for 18 hours, after which nitric oxide (NO) and tumor necrosis factor-alpha (TNF- α) release were measured in the supernate using a modified Greiss reaction and ELISA, respectively. Cytotoxicity was measured by trypan blue exclusion and lactate dehydrogenase (LDH) activity. Upon LPS exposure, AM's released more NO and TNF- α than TII cells, which in turn were more responsive than RLE-6TN. Peak release of NO and TNF- α occurred at LPS doses of 1-5 μ g/ml, 5-10 μ g/ml, and 50-100 μ g/ml for AM's, TII cells and RLE-6TN cells, respectively. Silica doses below 50 μ g/ml failed to stimulate NO or TNF- α production in any of these cell types. These data indicate that LPS is a potent inducer of NO and TNF- α release with AM's being the most responsive and RLE-6TN the least responsive alveolar cell type tested.

861.4

IL-1 β , IL-6 and TNF α mRNA expression in mild pulmonary interstitial edema

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In mild pulmonary interstitial edema, a small increase in extravascular lung water occurs with a marked change in parenchymal stresses and transcapillary pressure gradient due to low tissue compliance. Interstitial edema was induced in anaesthetized rabbits on varying intravenous saline infusion rate (0.5 to 6 ml/kg \times min) and time (45 to 180 min), causing an increase of the lung wet-to-dry weight ratio (W/D) from 5.4 \pm 0.4 to 6.5-6.8. Cytokine mRNA response was evaluated on lung tissue samples by northern blot hybridisation and normalization with β -actin control probe. Specific probes were generated by PCR amplification of rabbit cDNAs and confirmed by automatic sequencing. Proinflammatory IL-1 β mRNA markedly increased (~7 fold) with increasing W/D, flow rate and infusion time. TNF α and IL-6 (proinflammatory and anti-inflammatory, respectively) did not correlate with flow rate, but increased with increasing W/D; furthermore, both cytokines peaked within 45 min, remaining thereafter steady. Despite a relatively small change in extravascular water, mechanical stresses acting at lung tissue level may trigger cytokine activation that in turn may affect protein turnover.

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861.5

Interferon- γ Enhances the Pulmonary CXC Chemokine Response in Rats Challenged with Intratracheal Lipopolysaccharide

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Rapid recruitment of neutrophils (PMNs) into the alveolar space is an important component of pulmonary host defense against invading bacteria. Locally produced CXC chemokines are major chemoattractants for tissue

recruitment of PMNs. This study investigated the effects of interl (IFN- γ) on the pulmonary chemokine response to intratracheal lipopolysaccharide (LPS). Rats were treated with intratracheal recombinant IFN- γ (1×10^5 U/rat). Twenty four hours later, the animals challenged with intratracheal LPS (100 μ g/rat). PMNs recover bronchoalveolar lavage (BAL) were significantly increased at 4 h following LPS challenge (22.39 \pm 8.35 vs. 0.09 \pm 0.02 $\times 10^6$, $p < 0.05$). IFN- γ significantly enhanced LPS-induced pulmonary recruitment of PMNs (71.06 \pm 6.54 $\times 10^6$, $p < 0.05$). Intratracheal LPS caused significant increases in CINC and MIP-2 in BAL fluid at 90 min and 4 h post LPS challenge. IFN- γ did not induce pulmonary chemokine production in control animals but significantly enhanced pulmonary CINC (14.4 \pm 1.2 vs. 7.5 \pm 1.1 and 45.8 \pm 5.1 vs. 13.5 \pm 2.4 ng/ml, $p < 0.05$, at 90 min and 4 h respectively) and MIP-2 (71.5 \pm 1.4 vs. 33.4 \pm 5.8 ng/ml, $p < 0.05$, at 4 h) responses. These data suggest that locally delivered IFN- γ may be an immunomodulator in enhancing pulmonary host defenses against bacterial pathogens.

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861.6

Neutrophil Migration into the Intratracheal LPS Challenged Rats Alters Pulmonary CXC Chemokine Concentrations

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When the lung is exposed to LPS, CXC chemokines are produced to attract neutrophils into the lung. However, neutrophil migration can potentially injure the host. In this study the intratracheal LPS-induced intrapulmonary and systemic chemokine responses were determined for cytokine induced neutrophil chemoattractant (CINC) and macrophage inflammatory protein 2 (MIP-2) in rats under neutropenic (cytoxin, CPA), or neutrophilic (CSF) conditions. By 4 hours after LPS, CPA treatment decreased CINC recruitment 88% and G-CSF increased PMN recruitment 164% compared to vehicle animals. Neutropenic rats had increased CINC and MIP-2 concentrations in BAL fluid at 4 hours after LPS. PMN chemotaxis toward this BAL fluid was increased whereas chemotaxis toward BAL fluid from LPS challenged neutrophilic rats was decreased. In vitro LPS stimulated chemokine production by alveolar macrophages did not differ with treatment. These data show that as neutrophils are recruited to reduce chemokine levels and the chemotactic activity of the lung, modulation likely serves to regulate PMN recruitment, thereby decreasing the risk for developing lung injury. NIH:AA09803

861.7

TNF Stimulates Na Absorption in CF Airway Cells Through Translation and MAPK-dependent Pathways.

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TNF is a pro-inflammatory cytokine significantly elevated in serum and sputa of CF patients. CF airway epithelia exhibit enhanced Na reabsorption. A direct effect of TNF on ion transport in CF airway epithelia is unknown. To test the hypothesis that TNF increases Na absorption in CF airway cells and examine signaling of TNF receptors used JME cells, a human airway CF line. To assess TNF effects, measured ²²Na uptake in suspended cells and amiloride-inhibitable short circuit current (I_{sc}) in monolayers. Cells pretreated with TNF (48 hrs) TNF acutely added (10 ng/ml; 15 min), increase Na uptake by 43% (293 \pm 9 from a basal rate of 205 \pm 12 compared to 208 \pm 7 nmols/min protein for acute TNF alone. TNF increases I_{sc} by 44% to 72 from a basal level of 50 μ A/cm². To examine TNF signaling in airway cells, the MAPK inhibitor PD98059 was acutely added to block TNF-stimulated Na transport by 80%. Further, the ceramide analog C8 mimics the acute signaling pathway of TNF to increase Na transport in cells pretreated with TNF. Finally, cycloheximide blocks the chronic effect of TNF on Na entry. We conclude that TNF directly stimulates Na absorption in CF airway cells and requires actions on protein synthesis and acute signaling. TNF receptor couple to pathways involving ceramide generation and activation of MAPK to regulate Na channels.

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ABSTRACTS
PART II

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