

TRANSCOBALAMIN II-MEDIATED UPTAKE OF VITAMIN B<sub>12</sub> BY  
RAT LIVER CELLS

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*aan Inge,  
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## LIST OF ABBREVIATIONS

AH-Sepharose	aminohexyl-Sepharose
BFS	vitamin B <sub>12</sub> -free serum
Cbl	cobalamin
CN-Cbl	cyanocobalamin
di-CN-Cbl	dicyanocobalamin
DMEM	Dulbecco's modified minimal essential medium.
EDTA	ethylenediaminetetra-acetic acid
EGTA	ethyleneglycol-bis (2-aminoethyl) tetra-acetic acid
HBSS	Hanks' balanced salt solution
IEF	isoelectric focusing
IF	intrinsic factor
LDH	lactate dehydrogenase
OH-Cbl	hydroxocobalamin
PCA	perchloric acid
TC I, II, III	transcobalamin I, II, III
TCA	trichloroacetic acid.



## INTRODUCTION AND REVIEW OF THE LITERATURE

### 1.1. Introduction.

Vitamin B<sub>12</sub> plays a unique role in mammalian metabolism not only because, as a coenzyme, it is involved in two completely different and unrelated biochemical pathways, - the synthesis of nucleic acid precursors and the catabolism of some fatty acids -, but even more because it gives an excellent example how different groups of living organisms work together and depend on each other for the supply of vital nutrients. Vitamin B<sub>12</sub> is almost exclusively found in animal products. However, it is not synthesized by the animals themselves but, they are able in one or the other way to absorb vitamin B<sub>12</sub> which is produced by micro-organisms. For instance in ruminants the bacteria in the rumen are the source of the vitamin, which is taken up by the gut, distributed over the tissues and which is subsequently consumed by man with the meat or with the milk. However, the quantity of vitamin B<sub>12</sub>, which is available in the food, is so low, that it would be lost if not an elaborate system of carrier proteins and cellular receptor mechanisms selectively collected it from the food and delivered it to the tissues. Intrinsic factor, produced and secreted by the gastric mucosa, binds the vitamin, which enters the body with the food, and hands it over to the ileal mucosa cells, which carry specific receptors for this protein. When the vitamin enters the blood, the plasma transport proteins, the transcobalamins, take it up immediately and deliver it to the tissues.

It was the object of the investigations, which are presented in this thesis, to reveal the mechanism of this

delivery and to obtain a comprehensive picture of the various aspects of the cellular uptake. The rat liver cell was chosen for this purpose as an in vitro model, not only because established methods are available for the isolation of cellular subfractions and of intact viable cells, but also because the liver is one of the main storage pools for vitamin B<sub>12</sub> of the body and has possibly a regulatory function in the maintenance of the blood vitamin B<sub>12</sub> level.

Section 1.2. reviews the literature on vitamin B<sub>12</sub> and its binding proteins. It is, evidently, not exhaustive, but the major steps in the progress of the understanding of vitamin B<sub>12</sub> transport and metabolism are outlined.

## 1.2. Literature.

### 1.2.1. Historical review on vitamin B<sub>12</sub> investigations.

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The history of vitamin B<sub>12</sub> begins with the first description of what appears to have been pernicious anemia by J.S. Combe in 1822 (1). In 1849 Th. Addison (2) described a case of idiopathic anemia, which since then has been regarded as a classic picture of severe pernicious anemia. The name of the disease was introduced by Biermer in 1872 (3). In the years thereafter increasing evidence was collected for a connection between the gastric and the hematological phenomena in this disease and thanks to the advance in morphological techniques a better description of the megaloblastic changes in the bone marrow was obtained by Cohnheim in 1876 (4), Ehrlich in 1880 (5), Cabot in 1903 (6) and Ehrlich in 1905 (7), and the atrophic appearance of the gastric mucosa was revealed by Fenwick in 1870 (8) and Cahn and von Mering in 1886 (9).

However, it lasted until 1926 before the first therapeutic results were obtained. Using the experimental

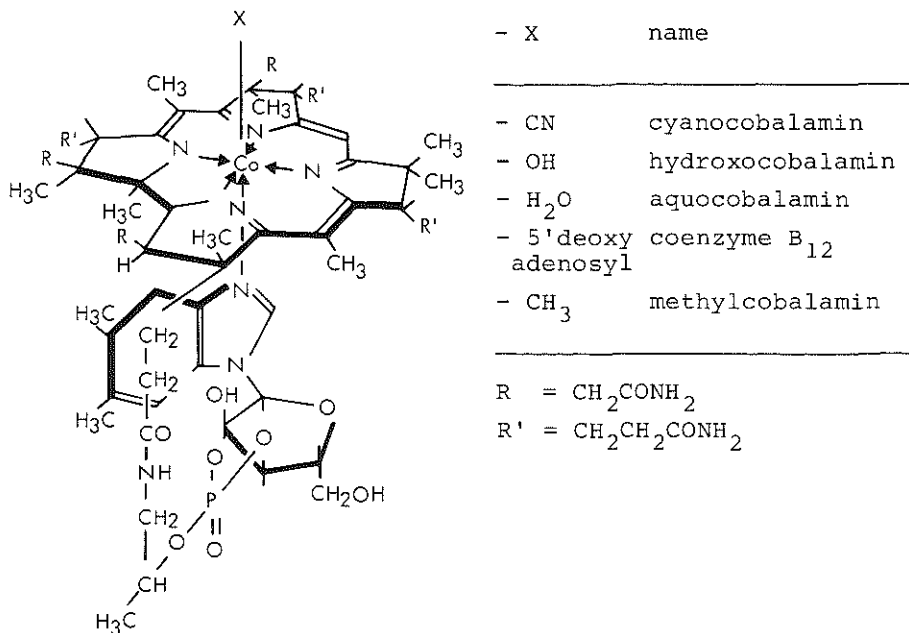


Fig. 1.1. Structural formula of vitamin B<sub>12</sub>.

data from Whipple, Robscheit and Hooper (10), who observed that liver was a potent hematopoietic substance in experimentally anemic dogs, Minot and Murphy (11) treated successfully a patient with severe pernicious anemia with large amounts of raw liver.

The involvement of a gastric factor in the therapeutic effect of the liver diet was first demonstrated by Castle in 1929 (12), who reported the beneficial effect of normal human gastric juice on the therapeutic results of a beef diet in pernicious anemia patients. In subsequent reports Castle supposed the production of an "intrinsic factor" by the human stomach. The "extrinsic" counterpart was assumed to be present in the liver or beef diet.

In 1948 the extrinsic factor, named vitamin B<sub>12</sub>, was almost at the same time isolated in pure form by Folkers et al. (13) in the United States and by Smith in England (14).

In 1956 Hodgkin et al. (15) revealed the structure of the vitamin B<sub>12</sub> molecule by means of x-ray cristallography (figure 1.1). Finally in 1972 the last basic step in the identification of the "extrinsic factor" was set by R.B. Woodward (16), who succeeded in the complete synthesis of a biologically active vitamin B<sub>12</sub>.

An important advance in the research on vitamin B<sub>12</sub> transport in the body was made possible by the work of Chalet, Rosenblum and Woodbury in 1950 (17), who incorporated radioactive cobalt isotopes in the vitamin B<sub>12</sub> molecule with microbiological techniques. In the first place it became possible to measure the ability of animals or patients to absorb vitamin B<sub>12</sub> (18 - 21). Secondly progress was made in the purification of Castle's intrinsic factor, which is necessary for normal vitamin B<sub>12</sub> absorpction, by Ellenbogen et al. (22), Gräsbeck et al. (23) and Chosy and Schilling (24).

Definite physicochemical analysis could be performed after complete purification of intrinsic factor was reached first by Gräsbeck et al. in 1966 (25) using conventional techniques and later by Christensen et al. (26) and Allen et al. (27) in 1973, using affinity chromatography.

Intrinsic factor appeared to be a glycoprotein with a molecular weight of 44 000, based on aminoacid and carbohydrate composition. It is very selective in its binding of vitamin B<sub>12</sub> molecules; cyano-, hydroxo-, methyl-, and adenosyl-cobalamin are all bound with about the same association constant of  $10^{10} \text{ M}^{-1}$ , but cobalamins with altered or lacking nucleotide portions show markedly decreased binding (27).

The availability of radioactive vitamin B<sub>12</sub> made it possible to study many other aspects of the transport and metabolism of vitamin B<sub>12</sub>, which will be reviewed in the following sections.

### 1.2.2. Absorption of vitamin B<sub>12</sub>.

Vitamin B<sub>12</sub> from the food is bound to intrinsic factor, which is secreted with the gastric juice, and the complex attaches to specific binding sites on the surface membrane of the epithelial cells in the distal part of the ileum (28). The demonstration of Veeger et al. (29) that patients with pancreatic insufficiency exhibit a malabsorption of vitamin B<sub>12</sub> and similar observations in our laboratory with dogs suggest that pancreatic enzymes are necessary for the removal of inhibitory substances or competitive binding proteins or for the activation of intrinsic factor as suggested by Abels et al. (30). Allen et al. (31) reported that at least in man the pancreatic enzymes play a role in the destruction of non-intrinsic factor vitamin B<sub>12</sub>-binding proteins in saliva and gastric juice. The vitamin B<sub>12</sub>, which is almost completely bound to this type of proteins, then becomes available for intrinsic factor binding and subsequent absorption. The binding of IF-vitamin B<sub>12</sub> to receptors on the brush borders of the ileal mucosa cell is the first step in the absorption process (32). This receptor was solubilized and characterized to some extent by Katz and Cooper in 1972 (33) and others (34 - 36). It is not clear what happens after binding to the receptors. The cellular uptake requires energy and it has been suggested that the total complex is taken up by the cells in a pinocytotic process (37). Some of the absorbed vitamin B<sub>12</sub> is found in the mitochondria 2 hours after an oral dose of radioactive vitamin B<sub>12</sub> (38). A part of the vitamin B<sub>12</sub> seems to be converted to its coenzyme forms but another part reaches the blood unchanged (39). The fate of the intrinsic factor molecule is unknown. Vitamin B<sub>12</sub> is released in the portal circulation with a delay of several hours and there is conflicting information on whether it is released in the free form (40) or bound to transcobalamin II (41).

### 1.2.3. Metabolism.

Only ten years after the first isolation of vitamin B<sub>12</sub>, it was discovered that cyanocobalamin and hydroxocobalamin were not the active forms, which take part in cellular metabolism. The extremely low concentration of the real coenzyme forms in the tissues and their sensitivity to light, leading to rapid conversion to hydroxocobalamin, account for this. In 1958 Barker et al. (42) isolated the 5'-deoxyadenosyl-cobalamin or coenzyme B<sub>12</sub>, and in 1964 Lindstrand (43) and Stahlberg (44) detected methylcobalamin by chromatographic analysis of plasma and liver extracts. Coenzyme B<sub>12</sub> functions in the methylmalonyl-Co A mutase dependent reaction, in which methylmalonyl-Co A is converted to succinyl-Co A (45) and is thereby involved in the catabolism of branched chain and odd numbered fatty acids, some amino acids and thymine. Deficiency of the coenzyme leads to an increase in the excretion of methylmalonic acid and propionic acid in the urine.

Methylcobalamin takes part as a coenzyme in a complicated methylgroup transfer reaction, in which the methylgroup of methyltetrahydrofolic acid is transferred to homocysteine under the formation of methionine, whereas s-adenosyl methionine is needed as a cofactor. This reaction forms a link between sulphur-aminoacid metabolism and folate metabolism. Deficiency of the coenzyme leads to an accumulation of methyltetrahydrofolate and homocysteine and a shortage of methionine. The accumulation of methyltetrahydrofolate and concomittant reduction of tetrahydrofolate, the product of this reaction, causes an impairment of the synthesis of purines, and in particular of the synthesis of thymidylate from uridylate, because the folate derivatives, which are involved in these pathways are synthesized from tetrahydrofolate.

In this way vitamin B<sub>12</sub> is related to the biosynthesis

of DNA precursors and a deficiency of vitamin B<sub>12</sub> results, similar to a deficiency of folate, ultimately in decreased DNA synthesis and impaired cell division. The observations on the interrelationship of vitamin B<sub>12</sub> and folic acid through the methyltransferase reaction were summarized in the so-called methylfolate trap hypothesis which was introduced in 1962 by Herbert and Zalusky (46) and Noronha and Silverman (47).

#### 1.2.4. Transport of vitamin B<sub>12</sub>.

After absorption of vitamin B<sub>12</sub> by the epithelial cells of the ileal mucosa, the molecule is transported through the cell into the portal blood system and immediately bound to specific plasma transport proteins. The first report about plasma vitamin B<sub>12</sub> binding proteins was from Pitney et al. (48) who described that endogenous vitamin B<sub>12</sub> is largely present in the  $\alpha$ -globulin fraction of plasma proteins. Miller and Sullivan (49) found that both in the  $\alpha_1$ -globulin and  $\beta$ -globulin fraction binding of vitamin B<sub>12</sub> took place and that in chronic granulocytic leukemia the vitamin B<sub>12</sub> binding capacity of  $\alpha_2$ -globulin fraction was highly increased.

Experiments of Hall and Finkler (50,51) with intravenously injected vitamin B<sub>12</sub> showed that vitamin B<sub>12</sub> bound to the beta-globulin fraction disappeared much faster from the blood than vitamin B<sub>12</sub> bound to the  $\alpha_1$ -globulin fraction. The beta-globulin binder, which they called transcobalamin II, to distinguish it from the  $\alpha_1$ -globulin binder, which was called transcobalamin I, was thought to function at an earlier stage of vitamin B<sub>12</sub> distribution than the  $\alpha_1$ -globulin binder and to be important in the movement of vitamin B<sub>12</sub> from intestine to tissue.

In 1969 a third binding protein in serum was described

by Lawrence (52). This binding protein has the molecular weight of transcobalamin I (TC I) and the electrophoretic mobility of transcobalamin II (TC II) and was named transcobalamin III (TC III) (53,54). In contrast to TC I the new binder exhibited the ability to transport vitamin B<sub>12</sub> to the liver (55).

Different names for the vitamin B<sub>12</sub> binding proteins were used. Gullberg (56) proposed transcobalamin large (TC L) for TC I and TC III and transcobalamin small (TC S) for TC II. Based on the electrophoretic mobility TC I and III were also called R-binders (rapid mobility). The R-binders are present in almost all body fluids and precise analysis of the protein from the different sources revealed that they are immunologically identical(57) and that the amino acid composition is the same for all R-binders, suggesting a common peptide backbone (58). Variation in carbohydrate composition and structure is held responsible for the microheterogeneity in isoelectric point (59,60). The distinction between TC I and TC III is therefore artificial, TC I is the acidic fraction of the R-proteins or cobalophilins, as they were named by Stenman (60) and TC III is the more basic fraction. Cobalophilins from granulocyte lysate, which are indistinguishable from the plasma TC III fraction, have a short half life in the circulation and seem to deliver their bound vitamin B<sub>12</sub> exclusively to the liver (61,62), which confirms earlier observations of Toporek et al. (55). The presence of cobalophilin in granulocytes and the tendency of these cells to release these binding proteins during serum preparation (56), have caused much confusion in the determination of the vitamin B<sub>12</sub>-binding capacity of the TC III fraction in sera from normal and leukemic patients. Carmel (63) has recently lined up the differences between measurements in plasma and in serum and the effects of various anticoagulants with respect to the vitamin B<sub>12</sub>-binding capacity of the three transcobalamins.



He concluded that the most reliable results are obtained with NaF/EDTA plasma and that the concentration of TC III is generally very low in normal plasma and only moderately elevated in polycythemia vera and chronic myelogenous leukemia. Highly elevated levels of TC I were found in plasma from patients with chronic myelogenous leukemia, leukocytosis and several forms of cancer.

The function of cobalophilins is still obscure, especially because no clinical symptoms were found in two patients which had a deficiency of all cobalophilins (64). Cobalophilins are not found in the rat and the mouse and their only plasma transport protein is transcobalamin II. In these animals all endogenous vitamin B<sub>12</sub> is bound to this protein and there is a relatively large unsaturated vitamin B<sub>12</sub>-binding capacity. Cooper and Parenchych (65) described the uptake of vitamin B<sub>12</sub> by human and mouse ascites tumor cells and this uptake was completely dependent on the presence of transcobalamin II. This suggested that transcobalamin II is not only involved in transport of vitamin B<sub>12</sub> through the blood but also takes part in the uptake mechanism of the tissues. This vital role of TC II in the delivery of vitamin B<sub>12</sub> to the tissues was proven by the observations on patients with a congenital deficiency of TC II, who, despite a normal serum vitamin B<sub>12</sub> concentration, developed a severe megaloblastic anemia which could only be corrected by frequent parenteral injections of large amounts of vitamin B<sub>12</sub> (66 - 68).

More recent developments in the studies on the cellular uptake of vitamin B<sub>12</sub> are discussed in section 1.2.6.

#### 1.2.5. Purification and characterization of transcobalamin II.

The isolation of transcobalamin II from plasma in a

pure form is severely hampered by the very low concentration, 25 µg/l, of this vitamin B<sub>12</sub>-transport protein. Rat and mouse plasma have higher concentrations but in these animals the availability of the plasma is a limiting factor.

A second problem in the purification of TC II is the unstability of the protein. At low salt concentrations the protein tends to aggregate and at a pH below 5.5 irreversible loss of vitamin B<sub>12</sub>-binding capacity occurs. All these circumstances make it very difficult to purify TC II with an acceptable yield by means of conventional separation methods. Puutula and Gräsbeck (69) nevertheless reached a purification index of about 10<sup>6</sup> with a yield of 2.2%. Starting from 25 kg Cohn fraction III, subsequent CM-cellulose batchwise elution, DEAE-cellulose batchwise elution, recycling chromatography on sephadex G100, ammonium sulphate precipitation, DEAE-cellulose column chromatography, calcium phosphate gel chromatography, and immunoabsorption were carried out and the total product was characterized functionally by the stimulation of the vitamin B<sub>12</sub> uptake by erythrocytes and Hela cells. The Stokes radius of the isolated protein was computed at 25.5 Å, the molecular weight with gel filtration was 38 000 and with sedimentation equilibrium ultra centrifugation 28 500 and 30 100. The isoelectric points were 6.2-6.3 and 6.4-6.5; the minimum value of the 280/361 nm extinction ratio was 3.43. The protein was thought to be a glycoprotein with 13.0% neutral hexoses but no sialic acid. It was assumed that about 30% of the total protein was transcobalamin II-vitamin B<sub>12</sub> complex, whereas the remainder was supposed to be partly unsaturated binder.

In 1972 Allen and Majerus published a major improvement by the use of affinity chromatography for the purification of TC II (70). A monocarboxylic derivative of cyanocobalamin was covalently coupled to 3.3'-diaminodipropylamine-substituted Sepharose using carbodiimide. 72 kg Cohn

fraction III from human plasma were dissolved and TC II was extracted with CM-Sephadex. The CM-Sephadex eluate was applied to a 10 ml cyanocobalamin-Sepharose column which was intensively rinsed with a variety of buffer systems. Finally the linkage between the immobilized ligand and the binding protein was broken by the denaturing effect of a 7.5 M guanidine solution. To remove the contaminating proteins, which were still present, the eluate was subsequently subjected to DEAE-cellulose, 3.3'-diaminodipropylamine-Sepharose and Sephadex G150 chromatography. The final product had a specific binding activity of 28.6  $\mu\text{g}$  vitamin B<sub>12</sub>/mg protein and was 2.10<sup>6</sup> fold purified with a yield of 12.8%. The 280/361 nm ratio was 2.04. The pure product was homogeneous in polyacrylamide gel electrophoresis, sedimentation equilibrium centrifugation, gel filtration, and the ratio of total amino acid content to bound vitamin B<sub>12</sub>.

A surprising result was obtained with the determination of the molecular weight, namely 59 500 on amino acid analysis and 53 900 and 60 000 with sedimentation equilibrium centrifugation. In a later publication (71) Allen corrected this observation and confirmed the molecular weight of 38 000 found in other studies. The explanation for the higher molecular weight in the first report was probably the aggregation of a polypeptide fragment of TC II with a molecular weight of 25 000 with an intact molecule of 38 000. This fragment had probably arisen by proteolysis before or during the purification procedure. In contrast to the observations of Puutula and Gräsbeck (69), no carbohydrates were found in the pure preparation, which indicated that TC II is not a glycoprotein.

In 1975 Nexø (72) presented another affinity chromatography technique for vitamin B<sub>12</sub> binding proteins which made use of the property of hydroxocobalamin to form a thermolabile linkage with 3.3'-diaminodipropylamine. The elution of the protein from the affinity column was obtained

by an elevation of the temperature, instead of the protein denaturation by guanidine as used by Allen (70). With this technique rabbit transcobalamin II was purified and characterized by Nexø et al. (73). Although no solid evidence was given for the purity of their preparation, the given analytical data are in agreement with those reported by Allen (70). Rabbit and human TC II showed to have a similar overall amino acid composition and the N-terminal sequence was found to be different from that of transcobalamin I and intrinsic factor, except for the first three amino acids which were the same for TC I and TC II.

The similarity between TC II molecules from different animal species regarding immunological and biological properties was described by Tan and Blaisdell (74). Mammalian TC II showed a high degree of mutual cross-reactivity, but avian, amphibian, reptilian and piscine TC II did not cross-react with anti-rabbit TC II. Regarding the biological activities of mammalian TC II towards reticulocytes or erythrocytes from different mammalian species, all preparations stimulated the binding of vitamin B<sub>12</sub> to the cells but there was a great variation in the degree of promotion.

#### 1.2.6 Cellular uptake and metabolism of transcobalamin II-vitamin B<sub>12</sub>.

It was concluded from the data in section 1.2.4. that in vivo transcobalamin II plays a vital role in the transfer of vitamin B<sub>12</sub> to the tissue. Also in vitro, transcobalamin II mediated the uptake of vitamin B<sub>12</sub> by cells, for instance by reticulocyte-rich erythrocyte suspension (75) and by Hela cells (76). The uptake of transcobalamin II-vitamin B<sub>12</sub> was believed to consist of a primary stage, in which binding of the complex to the cell surface takes

place, and a secondary phase, in which the transport of vitamin B<sub>12</sub> into the cells occurs. An exception of the rule that TC II-bound vitamin B<sub>12</sub> is taken up in higher amounts than free vitamin B<sub>12</sub> seems to be the kidney. Perfusion of dog kidney with either free or TC II-bound vitamin B<sub>12</sub> showed that larger amounts of free than of bound vitamin B<sub>12</sub> were retained, possibly by reabsorption in the tubuli (77).

In vivo experiments with mice by Tan et al. (78) showed that with the uptake of TC II-vitamin B<sub>12</sub> by the tissues the TC II is consumed. The level of TC II must therefore be maintained by de novo synthesis of the carrier protein. Heart and spleen were quite effective in the removal of TC II-vitamin B<sub>12</sub> and free vitamin B<sub>12</sub> from the perfusion medium in experiments of Hall and Rappazzo (79). The relatively large amount of uptake of free vitamin B<sub>12</sub> was thought to be caused by production of TC II in this perfusion system (80).

The production of TC II by the rat liver was investigated by Cooksley and Tavill (81,82), who concluded that there is a continuous production of TC II, which is independent of the presence of unsaturated or saturated TC II or of the free vitamin B<sub>12</sub> concentration in the perfusate. The release of TC II in the medium was inhibited by cycloheximide. Together with the production of binding protein the perfused rat liver released vitamin B<sub>12</sub> molecules, taken up after in vivo injections of [<sup>57</sup>Co] vitamin B<sub>12</sub>. The rate of release was constant and was dependent on the length of time between the injection and the perfusion. Release of radioactive vitamin B<sub>12</sub> in the bile was generally low. Cycloheximide had no effect on the release, nor had extracellular TC II and free vitamin B<sub>12</sub>. TC II production was in 20-fold excess of the vitamin B<sub>12</sub> release on a molar base and there does not seem to be an interrelation between the release of vitamin B<sub>12</sub> and the release of binding protein.

Kinetic aspects of TC II-vitamin B<sub>12</sub> uptake were studied by Digirolamo and Huennekens (83). The uptake proceeded in two steps. A rapid primary step appeared to involve binding of the protein-vitamin complex to the cell membrane and had a K<sub>m</sub> of 180 pM and a capacity of about 6 pmol/10<sup>9</sup> cells. This binding was hardly influenced by temperature and had an optimum at pH 5. Calcium was required for the binding but could be exchanged for magnesium. The second step was much slower and energy dependent. It was interpreted as the transfer of the vitamin to the interior of the cell. The velocity of this process was 0.4 pmol/min/10<sup>9</sup> cells. Several metabolic inhibitors were able to block this second phase. The authors concluded that these cells were able to take up vitamin B<sub>12</sub> through about 400 entry sites per cell and that each entry site could transport about 10 molecules of vitamin B<sub>12</sub> per hour. The final intracellular vitamin B<sub>12</sub> concentration was about 500 times the extracellular concentration. Resuspension of the cells in TC II-vitamin B<sub>12</sub>-free medium caused a rapid release of vitamin B<sub>12</sub> from the cell. This observation is in agreement with the data on the release of vitamin B<sub>12</sub> from the liver (80,81). The factors which are involved in the release of vitamin B<sub>12</sub> from cells were investigated by Rosenberg et al. (84) in human fibroblasts. It was shown that the amount of release is at least partially dependent on the presence of an intracellular binding protein. Cultured fibroblasts from patients, who fail to synthesize both cobalamin coenzymes, defined as cbl C mutant, were unable to retain the vitamin B<sub>12</sub> which was taken up during the incubation period. The intracellular protein, which bound the intracellular labeled vitamin in normal cells, was lacking in the cbl C mutant cells.

The kinetics of uptake of TC II-vitamin B<sub>12</sub> by L 1210 lymphoblasts have also been studied by Ostroy and Gams (85). The incorporation of vitamin B<sub>12</sub> in the cells was both

temperature and calcium dependent and was inhibited by apo-TC II (unsaturated binding protein). The  $K_m$  of the transport process was  $2.5 \times 10^{-9} M$  at  $37^\circ C$ . Again it was observed that the intracellular vitamin  $B_{12}$  could be almost completely released by the cells. The release was found to be temperature dependent: zero at  $4^\circ C$  and maximal at  $37^\circ C$ , and independent of calcium. The released vitamin  $B_{12}$  was either bound to TC II or to a protein with chromatographic properties similar to cobalophilins.

In view of their former results with the TC II dependent uptake of vitamin  $B_{12}$  by isolated rat liver mitochondria (86) Ostroy et al. expressed their doubts about the assumption that the complex, after attachment to the plasma membrane, is transferred into the cell by pinocytosis followed by lysosomal fusion and subsequent proteolysis of TC II. This model was proposed by Pletsch and Coffey (87) on the basis of studies with liver fractionation after intravenous injections of  $[^{57}Co]$ cyanocobalamin. At 5 min after the injection TC II-bound vitamin  $B_{12}$  was recovered in the plasma membrane fraction and at 30 min significant amounts of TC II-bound vitamin  $B_{12}$  were found in the lysosomes. At later points of time, vitamin  $B_{12}$  was mainly present in the soluble and mitochondrial compartment, but it was no longer bound to TC II. These observations suggested a dissociation of vitamin  $B_{12}$  from TC II at the level of the lysosomal system, but in the absence of a label in the protein moiety of the complex the proteolysis of TC II could not be proven.

The incorporation of a protein label became possible after the complete purification of TC II by Allen et al. (70), and the fate of pure  $^{125}I$ -labeled TC II- $[^{57}Co]$  CN-Cbl was studied after intravenous injections into rabbits (88). The  $[^{57}Co]$  CN-Cbl and the  $^{125}I$ -label were cleared from the circulation at about the same rate and after 15-30 min  $^{125}I$ -labeled small molecular weight-compounds were detected in

the plasma and excreted in the urine. This observation shows that in these experimental conditions TC II is broken down by the tissues and confirms the model as proposed by Pletsch et al. (87). It was also noticed that a considerable part of the vitamin B<sub>12</sub> re-entered the circulation.

Further elucidation of the way of entry and intracellular transport of TC II-vitamin B<sub>12</sub> was given by Youngdahl-Turner et al. (89). Human fibroblasts were incubated with [<sup>125</sup>I] TC II-[<sup>57</sup>Co] vitamin B<sub>12</sub> under various circumstances. <sup>125</sup>I- and <sup>57</sup>Co-radioactivity were taken up by the cells almost at the same rate. [<sup>57</sup>Co] vitamin B<sub>12</sub> was incorporated in the earlier mentioned large molecular weight binding protein (84). The <sup>125</sup>I-label reappeared in the medium with a lag of 2 hours as small molecular weight degradation products, as a result of intracellular degradation of TC II in the fibroblasts. The involvement of the lysosomes in this degradation process was further made plausible by the inhibition of proteolysis after the addition of the lysosomotropic agent chloroquine to the medium, which on the one hand caused a complete inhibition of proteolysis and on the other hand resulted in an accumulation of radioactivity inside the cell. Probably the digestion of the complex in the cell was blocked at the level of the lysosomes.

In conclusion there are no doubts about the crucial role of transcobalamin II in the transfer of vitamin B<sub>12</sub> from the blood plasma to the tissues. A variety of tissues and cell types in different animal species internalize vitamin B<sub>12</sub> from the surrounding medium much more efficiently, when it is bound to transcobalamin II than when it is free or bound to other vitamin B<sub>12</sub>-binding proteins. Moreover it seems to be physiologically irrelevant to study the uptake of free vitamin B<sub>12</sub> by the tissue cells, because free vitamin B<sub>12</sub> is cleared rapidly by the kidneys.

The way of entry, however, is subject to some different views. On the one hand there is the hypothesis of pinocyto-



sis with lysosomal fusion and subsequent proteolysis of the carrier protein, which was originally based on the observations of Pletsch and Coffey (87) and further extended by the work of Allen and coworkers (88,89). On the other hand Gams and coworkers (85,86) have paid much attention to the intracellular presence of TC II and the TC II dependent uptake of vitamin B<sub>12</sub> by isolated mitochondria. The latter investigators did not present a clear model for the way of entry but assumed that the intact complex enters the cytoplasm. Vitamin B<sub>12</sub> can then either leak out of the cell or be taken up in the mitochondria. The fate of the carrier protein after internalization has not been investigated further.

### 1.3. References.

1. Combe, J.S. History of a case of anaemia. (1824). Trans. Med. Chir. Soc. Edinburgh, 1, 194.
2. Addison, T. Anaemia - disease of the supra - renal capsules. (1849). London, Med. Gaz., 43, 517.
3. Biermer, A. (1872)., Corresp. Schweiz. Aerzte, 2, 15.
4. Cohnheim, J. Erkrankungen des Knochenmarkes bei perniciöser Anämie. (1876). Arch. Path. Anat. Physiol. Klin. Med., 68. 291.
5. Ehrlich, P. Über Regeneration und Degeneration rother Blutscheiben bei Anämien. (1880). Berlin Klin. Wschr., 117, 405.
6. Cabot, R.C. Ring bodies (nuclear remnants?) in anemic blood. (1903). J. Med. Res., 9, 15.
7. Ehrlich, P. and Lazarus, A. Anemia. Histology of the blood, (Stengel, A. ed.) p. 17, N.B. Saunders, Philadelphia.
8. Fenwick, S. On atrophy of the stomach. (1870). Lancet, 2, 78.
9. Cahn, A. and Von Mering, J. Die säuren des gesunden und kranken Magens. (1886). Deutsch. Arch. Klin. Med., 39, 233.
10. Whipple, G.H., Robscheit, F.S. and Hooper, C.W. Blood regeneration following simple anemia. IV. Influence of

- meat, liver and various extractives, alone or combined with standard diets. (1920). *Amer. J. Physiol.*, 53, 236.
11. Minot, G.R. and Murphy, W.P. Treatment of pernicious anemia by a special diet. (1926). *J. Amer. Med. Ass.*, 87, 470.
  12. Castle, W.B. Observations on the etiologic relationship of achylia gastrica to pernicious anemia. I. The effect of the administration in patients with pernicious anemia of the contents of the normal human stomach recovered after the ingestion of beef muscle (1929). *Amer. J. Med. Sci.*, 178, 748-764.
  13. Rickes, E.L., Brink, N.G., Koniuszy, F.R., Wood, T.R. and Folkers, K. Crystalline vitamin B12 (1948). *Science*, 107, 396-397.
  14. Smith, E.L. Purification of antipernicious anaemia factors from liver. (1948). *Nature*, 161, 638-639.
  15. Hodgkin, D.C., Kamper, J., Mackay, M., Pickworth, J., Trueblood, K.N. and White, J.G. Structure of vitamin B12. (1956). *Nature*, 178, 64.
  16. Woodward, R.B. The total synthesis of vitamin B12. (1973) *Pure Appl. Chem.*, 33, 145.
  17. Chaiet, L., Rosenblum, C. and Woodbury, D.T. Biosynthesis of radioactive vitamin B12 containing cobalt60. (1950). *Science*, 6, 601-602.
  18. Heinle, R.W., Welch, A.D., Scharf, V., Meacham, C.G. and Prusoff, W.H. Studies of excretion (and absorption) of 60Co-labeled vitamin B12 in pernicious anemia. (1952). *Tr. A. Am. Phys.*, 65, 214.
  19. Schilling, R.F. Intrinsic factor studies II. The effect of gastric juice on the urinary excretion of radioactivity after the oral administration of radioactive vitamin B12. (1953). *J. Lab. Clin. Med.*, 42, 860.
  20. Glass, G.B.J., Boyd, L.J., Gellin, G.A. and Stephanson, L. Uptake of radioactive vitamin B12 by the liver in humans: Test for measurement of intestinal absorption of vitamin B12 and intrinsic factor activity. (1954). *Arch. Biochem. Biophys.*, 51, 251.
  21. Doscherholmen, A. and Hagen, P.S. Radioactive vitamin B12 absorption studies: Results of direct measurement of radioactivity in the blood. (1956). *J. Clin. Invest.*, 35, 699.
  22. Ellenbogen, L. and Williams, W.L. Preparation and properties of purified intrinsic factor. (1960). *Bioch. Biophys. Res. Commun.*, 2, 340-343.
  23. Gräsbeck, R., Simons, K. and Sinkkonen, I. Purification of intrinsic factor and vitamin B12 binders from human

- gastric juice. (1962). *Am. Med. Exptl. Biol. Fenniae.* 40 suppl. 6.
24. Chosy, J.J. and Schilling, R.F. Intrinsic factor studies VII. The use of ion-exchange chromatography, gel filtration and ultra filtration to purify the intrinsic factor of human gastric juice. (1963). *J. Lab. Clin. Med.*, 61, 907-916.
  25. Gräsbeck, R., Simons, K. and Sinkkonen, I. Isolation of intrinsic factor and its probable degradation product, as their vitamin B12 complexes from human gastric juice. (1966). *Biochim. Biophys. Acta.*, 127, 47-58.
  26. Christensen, J.M., Hippe, E., Olesen, H., Rye, M., Haber, E., Lee, L. and Thomson, J. Purification of human intrinsic factor by affinity chromatography. (1973). *Biochim. Biophys. Acta.* 303, 319-332.
  27. Allen, R.H. and Mehlman, C.S. Isolation of gastric vitamin B12 binding proteins using affinity chromatography. I purification and properties of human intrinsic factor. (1973). *J. Biol. Chem.*, 248, 3660-3669.
  28. Booth, C.C. and Mollin, D.L. Importance of the ileum in the absorption of vitamin B12. (1957). *Lancet*, 2, 1007.
  29. Veeger, W., Abels, J., Hellemans, N. and Nieweg, H.O. Effect of sodium bicarbonate and pancreatin on the absorption of vitamin B12 and fat in pancreatic insufficiency. (1962). *New Eng. J. Med.*, 267, 1341-1344.
  30. Abels, J., van Kapel, J. and Lindemans, J. A dual function of the dog pancreas in absorption of vitamin B12 by secretion of a pro-intrinsic factor and trypsinogen. (1977). *Neth. J. Med.*, 20, 26.
  31. Allen, R.H., Seetharam, B., Podell, E. and Alpers, D.H. Effect of proteolytic enzymes on the binding of cobalamin to R-protein and intrinsic factor. In vitro evidence that a failure to partially degrade R-protein is responsible for cobalamin malabsorption in pancreatic insufficiency. (1978). *J. Clin. Invest.*, 61, 47-54.
  32. Donaldson, R.M., Mackenzie, I.L. and Trier, J.S. Intrinsic factor mediated attachment of vitamin B12 to brush borders and micro membranes of hamster intestine. (1967). *J. Clin. Invest.*, 46, 1215-1228.
  33. Katz, M. and Cooper, B.A. Solubilized receptor for vitamin B12-intrinsic factor complex from human intestine. (1974). *Brit. J. Haematol.*, 26, 569-579.
  34. Marcoullis, G. and Gräsbeck, R. Solubilized intrinsic factor receptor from pig ileum and its characteristics. (1977). *Biochim. Biophys. Acta.* 496, 36-51.
  35. Cotter, R. and Rothenberg, S.P. Solubilization, partial purification and radioassay for the intrinsic factor

- receptor from the ileal mucosa. (1976). *Brit. J. Haemat.* 34, 447-487.
36. Yamada, S., Itaya, H., Nakazawa, O. and Fukuda, M. Purification of rat intestinal receptor for intrinsic factor vitamin B12 complex by affinity chromatography. (1977). *Biochim. Biophys. Acta*, 496, 571-575.
  37. Wilson, T.H. Intestinal absorption of vitamin B12. (1936). *Physiologist*, 6, 11-26.
  38. Peters, T.J. and Hoffbrand, A.V. Absorption of vitamin B12 in the guinea pig. I. subcellular localization of vitamin B12 in the ileal enterocyte during absorption. (1970). *Brit. J. Haematol.*, 19, 369-382.
  39. Peters, T.J., Linnell, J.C., Matthews, D.M. and Hoffbrand, A.V. Absorption of vitamin B12 in the guinea pig. III. The forms of vitamin B12 in the ileal mucosa and portal plasma in the fasting state and during absorption of cyanocobalamin. (1971). *Brit. J. Haematol.* 20, 299-305.
  40. Katz, M. and O'Brien, R. B12 absorption studied by vascular perfusion of rat intestine. Abstract of the Int. Soc. Haemat. IIIrd Meeting London, 1975.
  41. Chanarin, I., Muir, M., Hughes, A. and Hoffbrand, A.V. Evidence for intestinal origin of transcobalamin II during vitamin B12 absorption. (1978). *Brit. Med. J.*, 1, 1453-1455.
  42. Barker, H.A., Weissbach, M. and Smyth, R.D. A coenzyme containing pseudo-vitamin B12. (1958). *Proc. Nat. Acad. Sci. USA.*, 44, 1093.
  43. Lindstrand, K. Isolation of methylcobalamine from natural source material. (1964). *Nature*, 204, 188.
  44. Stahlberg, K.-G. Forms of plasma vitamin B12 in health and in pernicious anaemia, chronic lymphoid leukaemia and acute hepatitis. A preliminary report. (1964). *Scand. J. Haemat.*, 1, 220-222.
  45. Weissbach, H. and Taylor, R.T. Metabolic role of vitamin B12. (1968). In *Vitamins and Hormones*. (Harris, R.S., Wool, I.G. and Loraine, J.A. eds.). vol. 26, p. 395-412. Academic Press, New York.
  46. Herbert, V. and Zalusky, R. Interrelations of vitamin B12 and folic acid metabolism: folic acid studies. (1962). *J. Clin. Invest.*, 41, 1263-1276.
  47. Noronha, J.M. and Silverman, M. On folic acid, vitamin B12, methionine and formimino glutamic acid metabolism (1962). In *vitamin B12 and intrinsic factor*. 2. European Symposium, Hamburg, Stuttgart, p. 728.
  48. Pitney, W.R., Beard, M.F. and Van Loon, E.J.

- Observations on the bound form of vitamin B12 in human serum. (1954). *J. Biol. Chem.*, 207, 143-152.
49. Miller, A. and Sullivan, J.F. The in vitro binding of <sup>60</sup>Co-labeled vitamin B12 by normal and leukemic sera. (1958). *J. Clin. Invest.*, 38, 2153.
  50. Hall, C.A. and Finkler, A.E. In vivo plasma vitamin B12 binding in B12 deficient and non-deficient subjects. (1962). *J. Lab. Clin. Med.*, 60, 765.
  51. Hall, C.A. and Finkler, A.E. The dynamics of transcobalamin II. A vitamin B12 binding substance in plasma. (1965). *J. Lab. Clin. Med.*, 65, 459-468.
  52. Lawrence, C. The heterogeneity of the high molecular weight B12 binder in serum. (1969). *Blood*, 33, 899-908.
  53. Carmel, R. Vitamin B12-binding protein abnormality in subjects without myeloproliferative disease. II. The presence of a third vitamin B12 binding protein in serum (1972). *Brit. J. Haematol.*, 22, 53-62.
  54. Bloomfield, F.J. and Scott, J.M. Identification of a new vitamin B12 binder (transcobalamin III) in normal human serum. (1972). *Brit. J. Haematol.*, 22, 33-42.
  55. Toporek, M., Gizis, E.J. and Meyer, L.M. Effect of human serum B12 binders on uptake of vitamin B12 by isolated perfused rat liver. (1971). *Proc. Soc. Exp. Biol. Med.*, 136, 1119-1121.
  56. Gullberg, R. Vitamin B12 binding proteins in normal human blood plasma and serum. (1972). *Scand. J. Haematol.* 9, 639-647.
  57. Simons, K. Vitamin B12 binders in human body fluids and blood cells, MD-thesis, University of Helsinki. (1964).
  58. Burger, R.L. and Allen, R.H. Characterization of vitamin B12 binding proteins isolated from human milk and saliva by affinity chromatography. (1974). *J. Biol. Chem.*, 249, 7220-7227.
  59. Stenman, U.-H. Characterization of R-type vitamin B12 binding proteins by isoelectric focusing. I. The relationship between transcobalamin I, transcobalamin III and the granulocyte R-protein. (1974). *Scand. J. Haematol.*, 13, 129-134.
  60. Stenman, U.-H. Characterization of R-type vitamin B12 binding proteins by isoelectric focusing. II. Comparison of cobalophilin from different sources. (1975). *Scand. J. Clin. Lab. Inv.*, 35, 147-155.
  61. Burger, R.L., Mehlman, C.S. and Allen, R.H. Human plasma R-type vitamin B12-binding proteins. I. Isolation and characterization of transcobalamin I, transcobalamin III and the normal granulocyte vitamin B12-binding protein.

- (1975). *J. Biol. Chem.*, 250, 7700-7706.
62. Burger, R.L., Schneider, R.J., Mehlman, C.S. and Allen, R.H. Human plasma R-type vitamin B12 binding proteins. II. The role of transcobalamin I, transcobalamin III and the normal granulocyte vitamin B12-binding protein in the plasma transport of vitamin B12. (1975). *J. Biol. Chem.*, 250, 7707-7713.
  63. Carmel, R. Vitamin B12 binding proteins in serum and plasma in various disorders. Effects of anticoagulants. (1978). *Amer. J. Clin. Pathol.*, 69, 319-325.
  64. Carmel, R. and Herbert, V. Deficiency of vitamin B12-binding alpha globulin in two brothers. (1969). *Blood*, 33, 1-12.
  65. Cooper, B.A. and Parenchych, W. Selective uptake of specifically bound cobalt-58 vitamin B12 by human and mouse tumour cells. (1961). *Nature*, 191, 393-395.
  66. Hakami, N., Neiman, P.E., Canellos, G.P. and Lazeron, J. Neonatal megaloblastic anemia due to inherited transcobalamin II deficiency in two siblings. (1971). *New Engl. J. Med.*, 285, 1163-1170.
  67. Scott, C.R., Hakami, N., Teng, C.C. and Sagerson, R.N. Hereditary transcobalamin II deficiency: the role of transcobalamin II in vitamin B12-mediated reactions. (1972). *J. Pediatr.*, 1106-1111.
  68. Hitzig, W.H., Dohmann, U., Pluss, H.J. and Vischer, D. Hereditary transcobalamin II deficiency: clinical findings in a new family. (1974). *J. Pediatr.*, 85, 622-628.
  69. Puutula, L. and Gräsbeck, R. One-million fold purification of transcobalamin II from human plasma. (1972). *Biochim. Biophys. Acta*, 263, 734-746.
  70. Allen, R.H. and Majerus, P.W. Isolation of vitamin B12 binding proteins using affinity chromatography. III. Purification and properties of human plasma transcobalamin II. (1972). *J. Biol. Chem.*, 247, 7709-7717.
  71. Allen, R.H. Human vitamin B12 transport proteins. (1975) *Progress in Hematology*, 9, 57-84.
  72. Nexø, E. A new principle in biospecific affinity chromatography used for purification of cobalamin-binding proteins. (1975). *Biochim. Biophys. Acta*, 379, 189-192.
  73. Nexø, E., Olesen, H., Bucher, D. and Thomson, J. Purification and characterization of rabbit transcobalamin II. (1977). *Biochim. Biophys. Acta*, 494, 395-402.
  74. Tan, C.H. and Blaisdell, S.J. Mammalian transcobalamin II metabolism. The immunological and the biological

- cross-reactivity of mammalian transcobalamin II. (1976). *Biochim. Biophys. Acta*, 444, 416-427.
75. Retief, F.P., Gottlieb, C.W. and Herbert, V. Delivery of Co57 B12 to erythrocytes from  $\alpha$  and  $\beta$  globulin of normal B12 deficient and chronic myeloid leukemia serum. (1967) *Blood*, 29, 837-851.
  76. Finkler, A.E. and Hall, C.A. Nature of the relationship between vitamin B12 binding and cell uptake. (1967). *Arch. Biochem. Biophys.*, 120, 79-85.
  77. Rappazzo, M.E. and Hall, C.A. Transport function of transcobalamin II. (1972). *J. Clin. Invest.*, 51, 1915-1918.
  78. Tan, C.H., Blaisdell, S.J. and Hansen, H.J. Mouse transcobalamin II metabolism: the effects of antibiotics on the clearance of vitamin B12 from the serum transcobalamin II - vitamin B12 complex and the reappearance of free serum transcobalamin II in the mouse. (1973). *Biochim. Biophys. Acta*, 320, 469-477.
  79. Hall, C.A. and Rappazzo, M.E. Uptake of protein bound vitamin B12 by canine organs. (1974). *Proc. Soc. Exp. Biol. Med.*, 146, 898-900.
  80. Hall, C.A. and Rappazzo, M.E. Release of transcobalamin II by canine organs. (1975). *Proc. Soc. Exp. Biol. Med.*, 148, 1202-1205.
  81. Cooksley, W.G.E., England, J.M., Louis, L., Down, M.C. and Tavill, A.S. Hepatic vitamin B12 release and transcobalamin II synthesis in the rat. (1974). *Clin. Sci. Mol. Med.*, 47, 531-545.
  82. Cooksley, W.G.E. and Tavill, A.S. Heterogeneity of hepatic vitamin B12 in the rat after parenteral cyanocobalamin. (1975). *Clin. Sci. Mol. Med.*, 49, 257-264.
  83. DiGirolamo, P.M. and Huennekens, F.M. Transport of vitamin B12 into mouse leukemia cells. (1975). *Arch. Biochem. Biophys.*, 168, 386-393.
  84. Rosenberg, L.E., Patel, E. and Lilljeqvist, A.-C. Absence of an intracellular cobalamin-binding protein in cultured fibroblasts from patients with defective synthesis of 5'-deoxyadenosylcobalamin and methylcobalamin. (1975). *Proc. Nat. Acad. Sci. USA*. 72, 4617-4621.
  85. Ostroy, F. and Gams, R.A. Cellular fluxes of vitamin B12 (1977). *Blood*, 50, 877-887.
  86. Gams, R.A., Ryel, E.M. and Ostroy, F. Protein-mediated uptake of vitamin B12 by isolated mitochondria. (1976). *Blood*, 47, 923-930.
  87. Pletsch, Q.A. and Coffey, J.W. Intracellular

- distribution of radioactive vitamin B12 in rat liver. (1971). J. Biol. Chem., 246, 4619-4629.
88. Schneider, R.J., Burger, R.L., Mehlman, C.S. and Allen, R.H. The role and fate of rabbit and human transcobalamin II in the plasma transport of vitamin B12 in the rabbit. (1976). J. Clin. Invest., 57, 27-38.
  89. Youngdahl-Turner, P., Rosenberg, L.E. and Allen, R.H. Binding and uptake of transcobalamin II by human fibroblasts. (1978). J. Clin. Invest., 61, 133-141.



## GENERAL METHODS

### 2.1. Materials.

The following radioactively labeled compounds were obtained from the Radiochemical Centre, Amersham, England: cyano [ $^{57}\text{Co}$ ] cobalamin, code CT 2, specific activity 185-210 mCi/mg; iodine-125, code IMS 30, carrier free; [ $^3\text{H}$ ] inulin, code TRA 324, specific activity 695 mCi/mmol. [Methoxy- $^3\text{H}$ ] dextran was purchased from New England Nuclear, Boston, Mass. code NET-427 B, specific activity 286.3 mCi/g. Cyano [ $^{57}\text{Co}$ ] cobalamin was also obtained from Philips-Duphar, Petten, Holland, code DRN 2716, specific activity 185-210 mCi/mg.

Chromatography materials, Sephadex G 50, G 75, G 150, G 200, Sephacryl S 200 superfine, CM-Sephadex, DEAE-Sephacryl CL-6B, CNBr-activated-Sephacryl and AH-Sephacryl were from Pharmacia Fine Chemicals, Uppsala, Sweden.

Dulbecco's modified minimal essential tissue culture medium (DMEM) was purchased from Grand Island Biological Company (GIBCO), Paisley, Scotland or from Flow Laboratories Irvine, Scotland.

Cyanocobalamin (CN-Cbl) was from Merck, hydroxocobalamin (OH-Cbl) from Sigma. All other reagents were of analytical grade purity.

Male Wistar rats from the animal breeding farm of TNO (Zeist, the Netherlands) were given food and water ad libitum. Blood was collected under ether anesthesia by cannulation of the abdominal aorta. The collected blood was allowed to coagulate and the serum was obtained by centrifugation (10 min at 2 000 x g). The supernatant was centrifuged again at 100 000 x g for 1 hour and afterwards stored frozen at  $-20^{\circ}\text{C}$ .

## 2.2. Measurements of vitamin B<sub>12</sub> and vitamin B<sub>12</sub>-binding capacity.

### 2.2.1. Preparation of vitamin B<sub>12</sub> standard solutions.

A solution of about 0.1 mg CN-Cbl/ml H<sub>2</sub>O was prepared and undissolved material was removed by filtration through a Büchner-funnel with filter paper S&S 589<sup>3</sup>. 1 ml aliquots were stored frozen at -80°C. The precise CN-Cbl concentration was determined spectrophotometrically. 4 ml CN-Cbl solution was diluted with 1 ml 0.5 M NaOH, 0.5% KCN solution, and the absorption spectrum was measured from 370 to 240 nm against 0.1 M NaOH, 0.1% KCN. At this CN<sup>-</sup>-concentration the cyanocobalamin is converted to the stable dicyanocobalamin form. The concentration was calculated using the molar extinction coefficient at the absorbance peak at 368nm:  $\epsilon_{368} = 30.8 \times 10^3 \text{ M}^{-1}$ . (1).

### 2.2.2. Determination of vitamin B<sub>12</sub>-binding capacity.

Principle: the vitamin B<sub>12</sub>-binding proteins are mixed with an excess of radioactively labeled CN-Cbl. The remaining free vitamin B<sub>12</sub> is removed either by coated charcoal or by gel filtration. The amount of protein-bound radioactivity is a measure for the unsaturated binding capacity of the sample.

Procedure: 0.2 ml samples from a serially diluted solution, of which the binding capacity had to be measured, were mixed with 0.9 ml 50 mM sodium phosphate, 0.15 M NaCl, 0.6 mM KCN, pH 7.4 and 0.2 ml of a CN-Cbl solution, containing 50 nCi [<sup>57</sup>Co] CN-Cbl per ml and CN-Cbl, adjusted to the expected binding capacity of the sample. After 30 min of incubation at room temperature the free vitamin was

separated from the bound with one of the following techniques:

1. The coated-charcoal technique. (2).

0.3 ml coated-charcoal suspension (5% activated carbon in 0.25% dextran T 70, 0.25% bovine hemoglobin solution) was added and after centrifugation for 10 min at 2 000 x g at 4°C, the amount of  $^{57}\text{Co}$ -radioactivity in the supernatant was measured. After subtraction of a blank value, obtained from a sample without binding protein, the vitamin B<sub>12</sub>-binding capacity of the sample was calculated from the specific activity of the [ $^{57}\text{Co}$ ] CN-Cbl solution. The amount of charcoal is chosen in such a way that minimal protein absorption goes together with optimal free vitamin absorption. However, falsely low values due to absorption of binding protein may occur in samples with a low protein content. On the contrary the binding capacity of samples with, for instance, much lipid material may be overestimated as a result of diminished free vitamin absorption (3,4).

2. Gel filtration.

The total incubation mixture was applied to a Sephadex G 50 column (1.6 x 35 cm) and eluted with 20 mM sodium phosphate, 1 M NaCl, buffer pH 7.4. The radioactivity in the 2 ml fractions was measured and the partition between free and bound CN-Cbl was used to calculate the Cbl-binding capacity of the sample. Gel filtration is generally accepted as reference for the separation of free and bound vitamin B<sub>12</sub>. It is however much more laborious and time-consuming than the coated charcoal technique.

One molecule of vitamin B<sub>12</sub> reacts with one molecule of vitamin B<sub>12</sub>-binding protein. Therefore the binding capacity, expressed as mol/l, reflects also the molar concentration of the binding proteins.

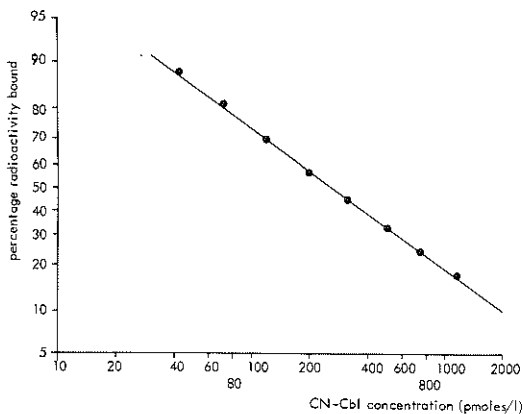


figure 2.1. A representative standard curve of the vitamin  $B_{12}$  radioassay.

### 2.2.3. Determination of vitamin $B_{12}$ concentration.

Principle: the used competitive protein binding technique was first described by Lau et al. (6). After destruction of binding proteins the freed vitamin  $B_{12}$  is mixed with a fixed amount of radioactive vitamin  $B_{12}$ . A binding protein, preferentially intrinsic factor, with a binding capacity for about 80% of the labeled vitamin is added and will bind labeled and unlabeled vitamin  $B_{12}$  proportionally to their concentration in the mixture. Free and bound vitamin are separated with the coated charcoal technique. The amount of radioactivity bound in the individual samples is expressed as the percentage of the radioactivity bound in a sample without vitamin  $B_{12}$ . A standard curve is constructed with serial dilutions of a standard CN-Cbl solution. The concentration of vitamin  $B_{12}$  in unknown samples is read from this curve.

Procedure: a series of 8 dilutions from 40 to 1200 pM of the standardized CN-Cbl solution (see section 2.2.1) was prepared in "vitamin  $B_{12}$ -free serum" (BFS). The BFS was made by boiling 1 volume of human serum, diluted with 4 volumes

of 0.44 M L-glutamic acid, 0.6 mM KCN, pH 3.3 for 20 min. The freed vitamin was removed by passage over a Sepharose column, to which an excess of intrinsic factor (IF) was covalently coupled. All vitamin B<sub>12</sub> was retained by the immobilized IF. The eluate is a perfect medium for the standard CN-Cbl samples because their composition becomes identical with the composition of unknown serum samples. When the vitamin B<sub>12</sub> concentration has to be measured in samples with a very low protein content, for instance purified TC II preparations, the most reliable results are obtained when these samples are diluted with BFS.

0.2 ml of a standard solution or an unknown sample was diluted with 0.8 ml BFS or 0.8 ml 0.44 M L-glutamic acid, 0.6 mM KCN, pH 3.3, boiled for 15 min and mixed thoroughly with 0.2 ml [<sup>57</sup>Co] CN-Cbl ( $\pm$  45 pg). After the addition of 0.2 ml IF solution the tubes were incubated for 45 min at room temperature in the dark. Hereafter 0.3 ml Hb-dextran coated charcoal suspension (see 2.2.2) was added and after 10 min the sample was centrifuged for 10 min at 2 000 x g. The radioactivity was counted in 1 ml of the supernatant. The blank value (a sample without binding protein) was subtracted, the duplicate results were averaged and expressed as the percentage of radioactivity bound (p) in comparison with the 100% value of the zero CN-Cbl standard, A standard curve was composed from the known CN-Cbl samples, in which the  $\ln \frac{p}{100-p}$  (logit) was plotted against the log concentration CN-Cbl.

The concentrations of vitamin B<sub>12</sub> in the unknown samples were read from the standard curve or calculated with a programmable calculator. A representative standard curve is presented in figure 2.1. The interassay reproducibility is indicated by the coefficient of variation in 8 different independent determinations: 8% at 100 pM, 7% at 210 pM and 4.4% at 630 pM.

### 2.3. Partial purification of transcobalamin II.

#### 2.3.1. Transcobalamin II from rat plasma.

Normal rat serum contains  $555 \pm 120$  pM endogenous vitamin B<sub>12</sub> (mean  $\pm$  S.D., n=9) and the unsaturated CN-Cbl-binding capacity ranges from 1.7 to 2.5 nmoles/l. TC II is the only vitamin B<sub>12</sub>-binding protein in rat plasma and all endogenous vitamin B<sub>12</sub> is bound to this protein. Partially purified rat TC II therefore always contains 15 to 20% of endogenous Cbl. For studies of binding and uptake of TC II-Cbl it is desirable to remove the greater part of the other plasma proteins, because these proteins may interfere in the experiments. Sephadex G 150 offers a good separation of TC II from most of the other plasma proteins (figure 2.2). In this particular separation 8 ml of rat serum was saturated with 3.5  $\mu$ Ci [<sup>57</sup>Co] CN-Cbl ( $\pm$  12 pmoles) and applied to the Sephadex column. Elution was carried out with 20 mM Tris, 1 M NaCl, pH 7.4. The high salt concentration is necessary to avoid complexing of TC II and adsorption onto the chromatography material. The TC II-containing fractions are pooled, concentrated by ultrafiltration and dialyzed against the buffer solution, in which TC II has to be used in the respective binding or uptake studies. Further purification by for instance ion-exchange chromatography leads to considerable loss of binding activity and only little improvement in purity. The final product is about 40-fold purified.

#### 2.3.2. Transcobalamin II from human plasma.

Human plasma contains only 0.5 to 1.0 nmole TC II per liter and is therefore not an ideal starting material for a purification. However, 30 to 40% of TC II is recovered in

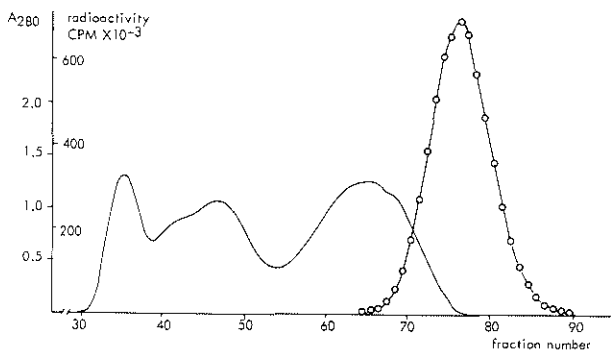


figure 2.2. Separation of 8 ml normal rat serum, saturated with 3.5  $\mu\text{Ci}$  [ $^{57}\text{Co}$ ] CN-Cbl on Sephadex G 150. Elution buffer: 20 mM Tris, 1 M NaCl, pH 7.4. — Extinction at 280 nm; o—o,  $^{57}\text{Co}$ -radioactivity.

Cohn fraction III from human plasma. The large scale purification of TC II from human Cohn fraction III is described in chapter 5. The affinity chromatography step in this procedure makes it impossible to incorporate a radioactive label with high specific activity in the vitamin moiety. An intermediate product from this purification, the CM-Sephadex eluate was prepared as follows: 20 kg Cohn fraction III was dissolved in 80 l of 10 mM sodium phosphate 100 mM NaCl pH 5.2. 100 g CM-Sephadex was added and after 2 hours of continuous stirring the Sephadex was collected by filtration through nylon gauze. The gel was washed with 10 l of 10 mM sodium phosphate, 50 mM NaCl, pH 5.2 and finally TC II was eluted with 1500 ml of 0.2 M Tris, 1 M NaCl pH 8.25. The greater part of the eluted material was further processed for the complete purification of TC II but small aliquots were kept apart for the partial purification of TC II- [ $^{57}\text{Co}$ ] CN-Cbl.

2 ml CM-Sephadex eluate (binding capacity 46.5 ng CN-

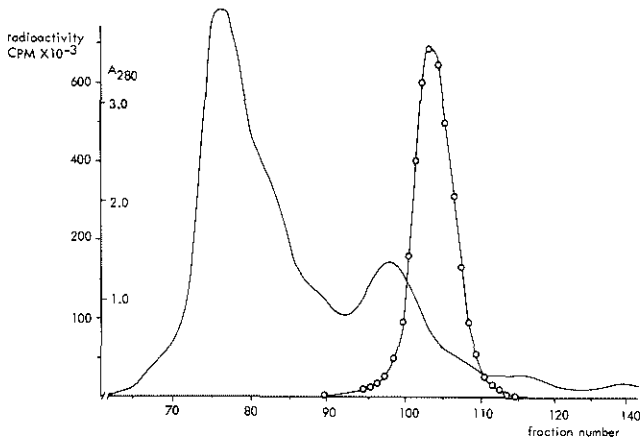


Figure 2.3. Separation of 2 ml CM-Sephadex eluate from human Cohn fraction III, saturated with 18  $\mu\text{Ci}$  [ $^{57}\text{Co}$ ] CN-Cbl, on Sephacryl S 200 Superfine. Elution buffer: 20 mM Sodium phosphate, 1 M NaCl, 0.02%  $\text{NaN}_3$ , pH 7.4. —, Extinction at 280 nm;  $\circ$ — $\circ$ ,  $^{57}\text{Co}$ -radioactivity.

Cbl/ml and 0.57 ng CN-Cbl/mg protein) was saturated with 18  $\mu\text{Ci}$  (18 ml) [ $^{57}\text{Co}$ ] CN-Cbl (188  $\mu\text{Ci}/\mu\text{g}$ ). After 15 min at room temperature the solution was concentrated by ultrafiltration to about 4 ml and centrifuged for 30 min at 50 000 x g. The supernatant was applied to a Sephacryl S 200 superfine column (2.6 x 90 cm). Elution took place with 20 mM sodium phosphate, 1 M NaCl, 0.02%  $\text{NaN}_3$ , pH 7.4. The elution profile is given in figure 2.3. The TC II-containing fractions were pooled and concentrated by ultrafiltration and meanwhile the buffer was changed to 50 mM Tris-HCl, pH 8.25. The concentrate was centrifuged at 50 000 x g for 30 min and applied to a DEAE-Sepharose CL-6B column (3 ml bed volume), which was equilibrated with the same Tris buffer. Elution took place with a concave NaCl-gradient, which was created by a two-pump system according to Lakshmanan et al. (7): a 790 mM NaCl solution in 50 mM Tris pH 8.25 is pumped into a mixing vessel with 200 ml Tris



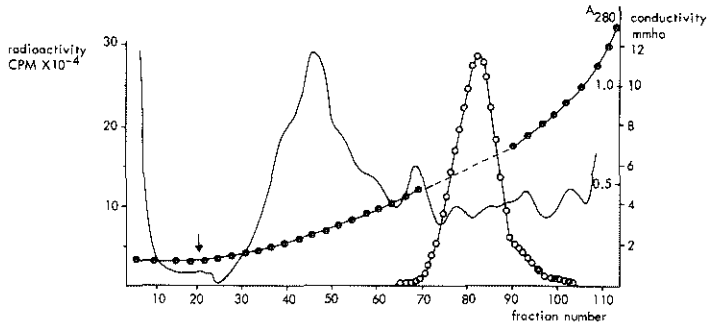


figure 2.4. Separation of the TC II-containing fractions of the Sephacryl column on DEAE-sepharose CL-6B. Starting buffer: 50 mM Tris-HCl, pH 8.25. The arrow indicates the start of the NaCl gradient, which ends at about 150 mM NaCl in 50 mM Tris-HCl, pH 8.25. —, Extinction at 280 nm; ○—○,  $^{57}\text{Co}$ -radioactivity; ●—●, conductivity of the elution buffer.

buffer at a rate of 1.18 ml per hour. The pump rate from the mixing vessel to the column was 15.8 ml per hour. The form of the salt gradient is presented in figure 2.4 together with the protein and radioactivity profile. The [ $^{57}\text{Co}$ ] CN-Cbl-containing fractions were pooled and concentrated by ultrafiltration and dialyzed against tissue culture medium (DMEM) for later incubations with isolated liver parenchymal cells. The specific binding activity of the purified TC II was 42.7 ng CN-Cbl/mg protein.

#### 2.4. Preparation of isolated rat liver parenchymal cells.

Rat liver parenchymal cells were isolated by a collagenase perfusion procedure (8) according to Seglen (9,10).

Normal male Wistar rats (200-300 g) were anesthetized with diethylether and the abdomen was opened. The portal vein was cannulated with a Braunule 0.5G18 cannula and the liver was perfused in situ with approximately 400 ml calcium-free bicarbonate buffered Hanks' balanced salt solution (HBSS) at 37°C at a flow rate of 25 ml/min. The inferior vena cava was cut below the liver to allow efflux of the perfusate. A mixture of 5% CO<sub>2</sub> and 95% O<sub>2</sub> bubbled through the perfusate to maintain a pH of 7.4 and optimal oxygen saturation. After 10 min the perfusate was changed to HBSS with calcium and 0.1% collagenase (Sigma Type II). By means of a Braunule 1G16 cannula through the right atrium into the inferior vena cava and after ligation of the vena cava just below the liver the perfusate could be recollected and recirculated. After 15 min the perfusion was ended and the liver, which was soft and leaky, was excised. By means of a sharp razor blade the liver was minced and incubated for another 15 min in fresh collagenase medium in a mildly shaking water bath. The cell suspension was filtered over a 63  $\mu$  nylon gauze and washed with 100 ml of icecold HBSS. The filtrate was collected on melting ice. The cell suspension was centrifuged at 50 x g for 4 min. The cell pellet was gently resuspended in 100 ml HBSS and centrifuged again. This procedure was repeated twice with another 100 ml of HBSS and once with tissue culture medium(DMEM) containing 0.09% human serum albumin and buffered with 25 mM NaHCO<sub>3</sub> at pH 7.4. The cells were finally resuspended in DMEM to a concentration of  $3.6 \times 10^6$  cells/ml.

This procedure consistently resulted in a cell yield of  $(450 \pm 100) \times 10^6$  cells (mean  $\pm$  S.D., n=20) per liver. The viability of the isolated cells, tested by the ability of the cells to exclude trypan blue (0.2% in saline) was usually better than 95%. The integrity of the cells during incubations was followed by measurement of the leakage of the cytoplasmic enzyme lactate dehydrogenase (LDH) into the

medium. Before and during the incubations the enzyme activity in the cell free medium was determined according to Bergmeyer (11) and expressed as the percentage of activity with respect to the enzyme activity in a sonicated cell suspension. During the incubation a gradual increase in LDH activity in the medium was observed from 2.8% at zero time to 7.3% at 120 min (mean of 3 experiments).

#### 2.5. Silicon oil filtration/centrifugation technique.

For the separation of the liver cells from the medium as a termination of the process of binding and uptake, centrifugation through silicon oil was used (12). In this system 0.5 ml samples were taken from the cell suspension and layered on 0.6 ml silicon oil (Tegiloxan AV 100, Goldschmidt, Germany), which rested on 0.1 ml 10% perchloric acid, in a 1.5 ml micro test tube. The test tubes were centrifuged in an Eppendorff microcentrifuge for 1 min at 8 000 x g. Aliquots from the cell-free supernatant were kept for later analysis, most of the oil was removed by suction and the PCA layer with the cell pellet was measured for radioactivity after cutting the tubes just above the interface between the PCA layer and the oil.

This method has the advantage that the cells are completely separated from the medium and that there is no danger for removal of surface-bound components as with normal centrifugation procedures, which have to be followed by several washing steps. Unfortunately, the cells take with them a thin film of medium through the silicon oil. The amount of radioactivity in this film has to be subtracted from the total amount of radioactivity in the cell pellet in order to obtain the correct amount of bound and intracellular radioactivity. An estimate of the amount of medium which is sedimentated with the cells was obtained by the

addition of a radioactive marker which is not bound and/or taken up by the cells. The distribution of radioactivity between the PCA layer and the medium after centrifugation was taken as a measure for the extracellular medium space. [ $^3\text{H}$ ] inulin and [ $^3\text{H}$ -methoxy] dextran were chosen as inert markers. [ $^3\text{H}$ ] inulin was used in a concentration of 0.4 mM (1.1  $\mu\text{Ci/ml}$ ). The cell suspension in DMEM with 0.09% human serum albumin (Behringwerke, Germany) contained  $2 \times 10^6$  cells per ml. After centrifugation 50  $\mu\text{l}$  aliquots from the PCA layer and 100  $\mu\text{l}$  aliquots from the cell free medium were counted for radioactivity in triton X100 - toluene scintillation cocktail. Duplicate samples were taken from two different cell suspensions at 5, 30, 60 and 120 min and the mean percentage of extracellular medium was determined to be  $(1.07 \pm 0.05) \%$  (mean  $\pm$  S.D.) of the 0.5 ml sample. There was no significant difference between the two cell suspensions or between the samples after different times of incubation. When the sample experiment was carried out with 25 nM [ $^3\text{H}$ -methoxy] dextran (molecular weight 70 000), the mean percentage of extracellular medium was  $(0.97 \pm 0.05) \%$  (mean  $\pm$  S.D.).

An even lower value was obtained when liver cells were incubated with the plasma cobalamin transport protein "cobalophilin", in particular the fraction with low isoelectric point, also known as transcobalamin I. Vitamin B<sub>12</sub>, bound to this protein, is not bound or taken up by the cells (see 1.2.4). Cobalophilin- [ $^{57}\text{Co}$ ] CN-Cbl was added in a concentration of 500 pM and the amount of  $^{57}\text{Co}$ -radioactivity in the PCA layer was found to be  $(0.75 \pm 0.12) \%$  of the total radioactivity in the sample (mean  $\pm$  S.D., n=13).

With these extracellular markers, three slightly different values for the extracellular space in the PCA layer are found. Although the experiments with the cobalophilin possibly give the best imitation of the incubations with TC II, the better reproducibility of the methoxydextran

experiments has made us choose the value obtained with this marker.

The correct values for binding and uptake of TC II-vitamin B<sub>12</sub> by the liver cells in suspension are obtained by subtraction of 0.97% of the radioactivity in the 0.5 ml samples from the total radioactivity in the cell pellet. All data for binding and uptake by liver cells in the chapters 4 and 6 have been corrected this way.

## 2.6. References.

1. Hogenkamp, H.P.C. The chemistry of cobalamins and related compounds in cobalamin, biochemistry and pathophysiology. Ed. B.M. Babior, John Wiley & Sons, New York (1975). p. 54.
2. Gottlieb, C., Lau, K.-S., Wasserman, L.R. and Herbert, V. Rapid charcoal assay for intrinsic factor (IF), gastric juice unsaturated B12 binding capacity, antibody to IF, and serum unsaturated B12 binding capacity. (1965). *Blood*, 25, 875-884.
3. Adams, J.F. and McEwan, F.C. The separation of free and bound vitamin B12. (1974). *Brit. J. Haematol.* 26, 581-592.
4. Andersen, K.-J., Lippe, G. v.d. and Schønby, M. Bile and detergent interaction with the radioassay for vitamin B12 binders using protein and dextran-covered charcoal. (1976). *Anal. Biochem.*, 74, 488-495.
5. Stenman, U.-H. Intrinsic factor and the vitamin B12 binding proteins. (1976). *Clinics in Haematology*, 5, 473-496.
6. Lau, K.-S., Gottlieb, C., Wasserman, L.R. and Herbert, V. Measurement of serum vitamin B12 level using radioisotope dilution and coated charcoal. (1965). *Blood*, 26, 202-214.
7. Lakshmanan, T.K. and Lieberman, S. An improved method of gradient elution chromatography and its application to the separation of urinary ketosteroids. (1954). *Arch. Biochem. Biophys.*, 53, 258-281.
8. Berry, M.N. and Friend, D.S. High-yield preparation of isolated rat liver parenchymal cells. A biochemical and fine structural study. (1969). *J. Cell. Biol.*, 43, 506-510.

9. Seglen, P.O. Preparation of isolated rat liver cells.III. Enzymatic requirements for tissue dispersion. (1973). *Exptl. Cell Res.*, 82, 391-398.
10. Seglen, P.O. Preparation of isolated rat liver cells. (1976) in *Methods in cell Biology*, ed. D.M. Prescott, vol. 13, p. 29. Acad. Press, New York.
11. Bergmeyer, H.-U., Bernt, E. and Hess, B. (1965) in *Methods of Enzymatic Analysis* (Bergmeyer, H.-U. ed.), pp. 736-743. Verlag Chemic. Acad. Press New York.
12. Andreasen, P.A. and Schaumburg, B.P. A rapid technique for separation of thymocytes from suspensions by centrifugation through silicone oil. (1974). *Anal. Biochem.*, 59, 610-616.

**BINDING SITES FOR TRANSCOBALAMIN II-VITAMIN B<sub>12</sub> ON ISOLATED RAT LIVER PLASMA MEMBRANES**

3.1. Summary.

Binding sites for transcobalamin II-vitamin B<sub>12</sub> complex from rat plasma were localised on isolated rat liver plasma membranes. The saturable binding process had an apparent affinity constant of  $8.6 \times 10^9 \text{ M}^{-1}$ . The specific binding capacity of the plasma membranes was  $1.5 \times 10^{10}$  binding sites per mg membrane protein. No competitive inhibition was observed with free vitamin B<sub>12</sub> or unsaturated transcobalamin II. A large part of the binding activity could be detached from the membrane either by incubation in detergent solution or by incubation in the presence of trypsin, whereas several other hydrolytic enzymes were found to be ineffective in this respect. The binding affinity of the plasma membranes prepared from other organs was of the same order of magnitude as the affinity of the binding sites from the liver.

3.2. Introduction.

The high association constant of vitamin B<sub>12</sub> for its plasma transport protein, transcobalamin II (TC II),  $2 \times 10^{11} \text{ M}^{-1}$  at body temperature (1), and the consequently low concentration of free vitamin B<sub>12</sub> in the blood plasma, make it very unlikely that vitamin B<sub>12</sub> enters the tissue cells in the free form. Transcobalamin II is thought to be a mediator in the process of uptake by the cells (2,3). This was confirmed by the observations on patients with congenital deficiency of TC II, who are unable to utilize

physiological amounts of vitamin B<sub>12</sub> (4). The studies of Pletsch and Coffey (5) demonstrated that in vivo the TC II-vitamin B<sub>12</sub> complex binds to the surface membrane of the rat liver cells prior to the cellular uptake. This uptake is presumably mediated by pinocytosis, because the distribution of the vitamin B<sub>12</sub> molecules over the different cell compartments showed a shift sequentially from plasma membranes to microsomal vesicles, lysosomes and finally mitochondria. The binding of TC II-vitamin B<sub>12</sub> to the plasma membrane suggests the presence of specific binding sites for TC II-vitamin B<sub>12</sub>. Such binding sites have been described earlier by Fiedler-Nagy et al. (6). In this chapter these observations are partially confirmed, and extended with data on the characteristics of the binding process.

### 3.3. Methods.

#### 3.3.1. Partial purification of transcobalamin II-vitamin B<sub>12</sub> complex.

Transcobalamin II- [ <sup>57</sup>Co ] CN-Cbl was purified from normal rat serum as described in 2.3.1 but an additional purification step was included, namely precipitation of the serum with 60% (NH<sub>4</sub>)<sub>2</sub>SO<sub>4</sub>, after saturation with [ <sup>57</sup>Co ] CN-Cbl. The precipitated protein was dissolved in 20 mM Tris-HCl pH 7.4 and further purified on Sephadex G 150 as described in 2.3.1. The final purification factor was increased to 300 times by pooling only the right part of the TC II peak in the Sephadex G 150 eluate. The specific binding activity amounted to 11.7 µg CN-Cbl/mg protein.

The pooled material was concentrated by ultrafiltration and dialysed against 20 mM Tris-HCl, 0.15 M NaCl pH 7.4.



### 3.3.2. Isolation of rat liver plasma membranes.

After exsanguination of the rats (200-250 g) by heart puncture the livers were removed, homogenized and centrifuged according to Neville (7) as modified by Ray (8), with the exception that the final density gradient purification step was performed in a Sorvall SZ-14 reorienting zonal rotor according to Evans (9). The zonal rotor was dynamically loaded with solutions of sucrose in 1 mM  $\text{NaHCO}_3$ , 0.5 mM  $\text{CaCl}_2$ , pH 7.4 in the following order: 100 ml of 45%, a linear gradient of 600 ml from 45% to 31%, a linear gradient of 200 ml from 31% to 22.5%, 100 ml of 22.5% and 200 ml of 8% sucrose (w/w). The linear gradients were generated with a Sorvall GF-2 gradient maker. The sample was introduced in a volume of 25 ml and centrifugation was carried out at 4 000 rpm for 50 min at 5°C. At the end of the run the rotor was emptied statically by pumping the gradient from the bottom of the rotor, while the effluent was monitored for protein at 280 nm. 12 ml fractions were collected and the sucrose concentration of the fractions was determined by measurement of the refractive index.

The fractions rich in plasma membrane marker enzyme, 5'-nucleotidase, and poor in mitochondrial marker enzyme, succinate dehydrogenase, were pooled, diluted with one volume of 1 mM  $\text{NaHCO}_3$ , 0.5 mM  $\text{CaCl}_2$ , pH 7.4 and collected by centrifugation for 30 min at 17 000 x g. The membranes were washed twice with bicarbonate, calciumchloride solution and finally resuspended to a concentration of 5 mg/ml. The purity of the isolated membranes was determined by measurement of the activities of 5'-nucleotidase succinate dehydrogenase, the lysosomal marker  $\beta$ -glucuronidase and of protein. Table 3.1 summarizes these analytical data, which are generally in agreement with data in the literature (8,9).

5'-nucleotidase was measured according to Persyn et al. (10), succinate dehydrogenase as described by King (11) and

$\beta$ -glucuronidase by the method of Levvy et al. (12). Protein was measured according to Lowry et al. (13) with bovine serum albumin as a standard.

### 3.3.3. Membrane binding assay.

Binding studies were carried out at room temperature unless indicated otherwise. The standard incubation mixture contained a varying amount of rat TC II- $[^{57}\text{Co}]$  CN-Cbl, 147  $\mu\text{moles}$  NaCl, 4  $\mu\text{moles}$  KCl, 5  $\mu\text{moles}$   $\text{CaCl}_2$ , 10  $\mu\text{moles}$  Tris-HCl, pH 7.2 and 0.5 mg of membrane protein in a volume of 1 ml. After the incubation, generally for 30 min, the mixtures were diluted with 3 ml of ice-cold 1 mM  $\text{NaHCO}_3$ , 0.5 mM  $\text{CaCl}_2$ , pH 7.4, collected by centrifugation for 10 min at 3 500 x g at 4°C and washed twice with the same solution.

The radioactivity in the pellet was measured and calculated as pmoles  $[^{57}\text{Co}]$  CN-Cbl by comparison with  $[^{57}\text{Co}]$  CN-Cbl standard solutions of known specific activity. All incubations were carried out in duplicate and correction for non-specific binding to the assay materials was obtained by incubations without plasma membrane material.

## 3.4. Results.

### 3.4.1. Localization of the membrane binding sites.

An initial experiment was carried out to demonstrate that TC II- $[^{57}\text{Co}]$  CN-Cbl binds exclusively to the plasma membrane. An unfractionated 1 000 x g sediment from rat liver homogenate was incubated in a standard incubation mixture with TC II- $[^{57}\text{Co}]$  CN-Cbl and separated in a zonal sucrose density gradient as described in 3.3.2. The separate fractions were analysed for radioactivity, sucrose density,

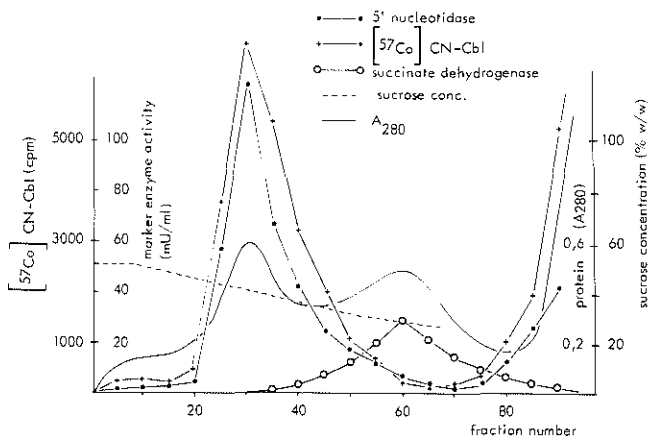


fig. 3.1. Distribution pattern after sucrose density gradient centrifugation of a 1 000 x g sediment from rat liver homogenate, which was preincubated with partially purified TC II- $[^{57}\text{Co}]$ CN-Cbl.

5'-nucleotidase and succinate dehydrogenase activity. As demonstrated in figure 3.1 the  $[^{57}\text{Co}]$ CN-Cbl radioactivity and 5'-nucleotidase activity coincided at sucrose concentrations from 37-41%. Peak activities were located at 39% sucrose, which has been formerly shown to correlate with the density of plasma membranes (8). These data confirm that binding sites for the TC II-vitamin B<sub>12</sub> complex are present on the rat liver plasma membranes.

Table 3.1. Analytic data of plasma membrane preparations.

assay	result as a mean of 3 experiments
milligrams of protein per g liver, wet weight	1.44
5'-nucleotidase	505 mU/mg protein
succinate dehydrogenase	2,5 mU/mg protein
$\beta$ -glucuronidase	0 mU/mg protein
recovery based on 5'-nucleotidase	20 %
enrichment based on 5'-nucleotidase	21-fold

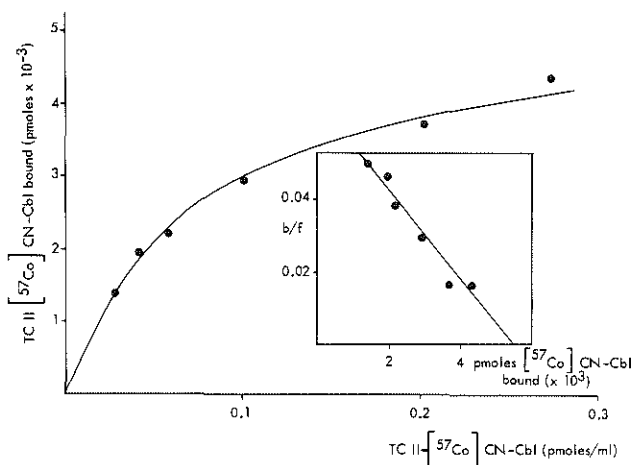


fig. 3.2. Binding of TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  to plasma membranes as a function of TC II-CN-Cbl concentration. 0.5 mg of membrane protein was incubated in the standard incubation mixture for 30 min at  $25^{\circ}\text{C}$  at different TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  concentrations. Insert: Scatchard plot of the experimental data. The intercept on the abscissa represents the maximal amount of TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  bound or of available binding sites, whereas the slope of the curve stands for the apparent affinity constant.

#### 3.4.2. Binding of transcobalamin II-vitamin B<sub>12</sub> to isolated plasma membranes.

In 5 separate experiments, in which plasma membrane fractions from different liver homogenates were used, the membrane binding capacity for TC II-vitamin B<sub>12</sub> was studied as a function of the concentration of TC II-vitamin B<sub>12</sub>. The binding was saturable and an estimate of the apparent affinity constant was made using Scatchard analysis, in which the "bound to free" ratio is plotted versus the amount of TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  bound (figure 3.2. + insert). The affinity constant, represented by the slope of the line, ranged from 5 to  $12 \times 10^9 \text{ M}^{-1}$  with a mean of  $8.6 \times 10^9 \text{ M}^{-1}$

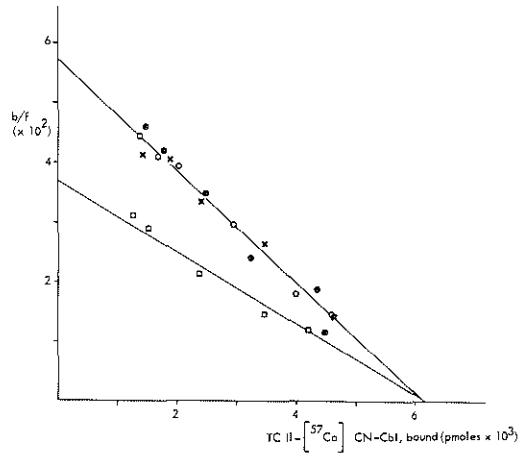


fig. 3.3. The influence of free CN-Cbl, unsaturated and CN-Cbl-saturated plasma on the binding of TC II- $[^{57}\text{Co}]$  CN-Cbl to plasma membranes. The conditions were the same as in fig. 3.2.  $\circ$ — $\circ$ , standard incubation;  $\times$ — $\times$ , with 0.2 pmoles CN-Cbl;  $\bullet$ — $\bullet$ , with 0.2 ml unsaturated plasma and  $\square$ — $\square$ , with 0.2 ml saturated plasma.

( $n=5$ ). The specific number of binding sites was calculated from the intersections on the abscissa of the Scatchard plot and ranged from  $0.6$  to  $3.7 \times 10^{10}$  (mean  $1.5 \times 10^{10}$ ) per mg of membrane protein. The specificity of the binding process with respect to free CN-Cbl and saturated or unsaturated binding protein is illustrated in figure 3.3. Scatchard analysis of the binding in the presence of free CN-Cbl or unsaturated rat plasma indicated that no competition between the labeled saturated binder and the free vitamin or unsaturated TC II took place in contrast with unlabeled saturated TC II, which reduced the affinity for TC II- $[^{57}\text{Co}]$  CN-Cbl. These data suggest that the plasma membrane binding sites have a clear preference for saturated TC II in

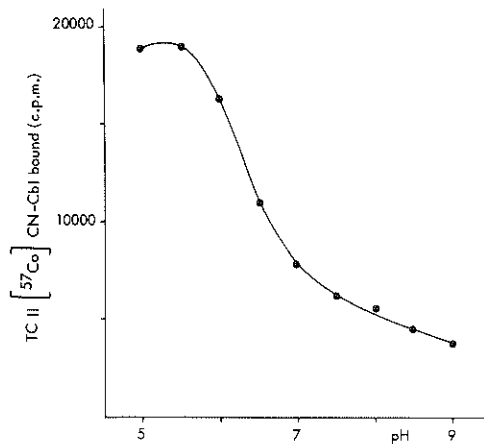


Fig. 3.4. pH dependence of the binding process. The incubation medium contained 50 mM Tris-maleate buffer, 4 mM CaCl<sub>2</sub>, 0.07 pmoles TC II-[<sup>57</sup>Co] CN-Cbl and 0.6 mg of plasma membrane protein in 1 ml.

comparison to free CN-Cbl and unsaturated binding protein in the conditions used in our experiments.

The binding of free [<sup>57</sup>Co] CN-Cbl to the isolated membranes was about 8% of the binding of the TC II-CN-Cbl complex, which agrees well with the findings of Fiedler-Nagy et al. (6).

#### 3.4.3. Effects of calcium, EDTA, pH and temperature.

The binding of TC II-CN-Cbl to liver plasma membranes was not influenced by the presence or absence of calcium ions. Addition of EDTA (2.5 mM) instead of calcium caused in different membrane preparations, a variable increase in the maximal amount of bound TC II-CN-Cbl, without affecting the affinity constant. The highest number of binding sites, observed in the presence of EDTA, was  $6.6 \times 10^{10}$  per mg of

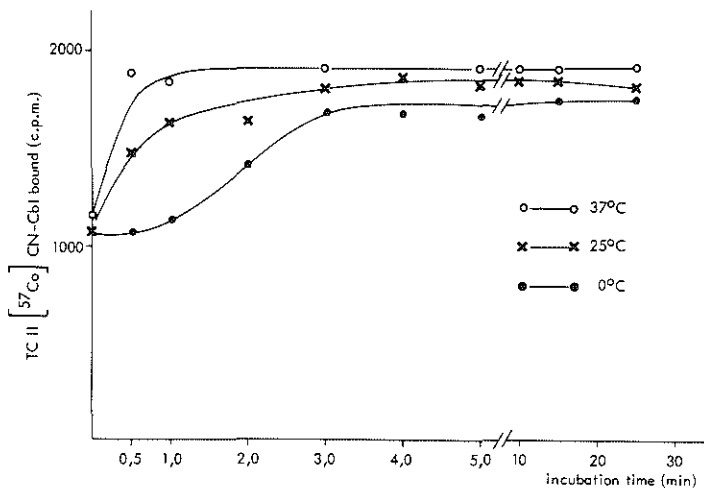


Fig. 3.5. Time and temperature dependence of the binding process. 0.3 mg of membrane protein was incubated in the standard incubation medium with 0.07 pmoles TC II- $[^{57}\text{Co}]$  CN-Cbl per ml at three different temperatures.

membrane protein.

The pH dependence of the binding process is shown in figure 3.4. Maximal binding occurred at pH 5.5 and a steady decrease took place to a minimum at pH 9.0.

An analysis of the time dependence of the binding process is given in figure 3.5. Although the rate at which equilibrium was reached, increased with temperature, the level of the plateau was the same at all temperatures and was maintained for at least 30 min.

#### 3.4.4. Effects of enzymes, detergents and reducing agents.

Isolated plasma membranes were treated with several hydrolytic enzymes or detergents, washed thoroughly and incubated with TC II- $[^{57}\text{Co}]$  CN-Cbl to measure the effects

Table 3.2. Effect of enzyme incubations, detergents and SH-reagents on the binding of TC II- $[^{57}\text{Co}]$  CN-Cbl by liver plasma membranes.

treatment/additive	concentration	percentage of control bound
none		100 %
neuraminidase	0,25 mg/ml	110 %
lipase	0,50 mg/ml	97 %
mannosidase	0,25 mg/ml	100 %
$\beta$ -galactosidase	0,25 mg/ml	100 %
trypsin	0,50 mg/ml	30 %
phospholipase A	0,50 mg/ml	95 %
triton X-100	1 %	40 %
sodium deoxycholate	1 %	35 %
dithiothreitol	2,5 mM	98 %
2-mercaptoethanol	2,5 mM	100 %

Membrane material was preincubated with the enzymes for 60 min at 37°C in 0.15 M NaCl or, with neuraminidase, in 0.2 M sodium acetate buffer pH 5.6, washed two times with 1 mM NaHCO<sub>3</sub>, 0.5 mM CaCl<sub>2</sub>, pH 7.4 and suspended in the same volume as the control. The same procedure was followed in case the membranes were incubated with detergents. The standard incubation mixture contained 0.6 mg of membrane protein and 0.1 pmole of rat TC II- $[^{57}\text{Co}]$  CN-Cbl per ml. The effects of dithiothreitol and 2-mercaptoethanol were studied in the standard incubation mixture. The enzymes were purchased from Boehringer (Mannheim, Germany).



of the pretreatment on the binding process. The results are given in table 3.2.

Only trypsin and the two detergents reduced the amount of bound radioactivity significantly. Incubations with different TC II- $[^{57}\text{Co}]$  CN-Cbl concentrations showed that the reduction in binding was not due to a decrease in binding affinity but to a reduction in the number of binding sites.

2-mercaptoethanol and dithiothreitol did not influence the binding when present in the standard incubation mixture. This suggests that for the binding mechanism intact disulfide bridges are not essential.

#### 3.4.5. Binding to rat organ tissues.

Plasma membrane-rich 1 000 x g subfractions of homogenates from heart, liver, brain, kidney and spleen were prepared and the binding affinity for TC II-CN-Cbl was studied. The respective affinity constants, obtained by Scatchard analysis, are presented in table 3.3.

*Table 3.3. Binding affinity of plasma membrane-rich fractions from various rat tissues.*

tissue	affinity constant
liver	$4.5 \times 10^9 \text{ M}^{-1}$
heart	$4.0 \times 10^9 \text{ M}^{-1}$
brain	$4.7 \times 10^9 \text{ M}^{-1}$
kidney	$3.7 \times 10^9 \text{ M}^{-1}$
spleen	$4.0 \times 10^9 \text{ M}^{-1}$

### 3.5. Discussion.

Our studies demonstrate the presence of binding sites for transcobalamin II-CN-Cbl on the plasma membranes of rat liver cells. This finding confirms the assumption of the presence of such binding sites, made by other investigators on the basis of vitamin B<sub>12</sub> transport studies in intact animals and cell suspensions (5,14). In our studies the plasma membrane fraction was prepared from a low centrifugal force pellet from a rat liver homogenate according to Evans et al. (9).

Fiedler-Nagy et al.(6), who isolated membranes from a microsomal pellet, studied the membrane affinity towards TC II-vitamin B<sub>12</sub> in unfractionated plasma. Our data are in agreement with their results regarding the affinity constant of the binding, but our calculation of the number of specific binding sites is somewhat lower. A major difference with the studies of Fiedler-Nagy et al. (6) concerns their finding that plasma, not saturated with vitamin B<sub>12</sub>, inhibited the uptake of radioactive vitamin B<sub>12</sub> bound to transcobalamin. On the contrary, in the present study no inhibition of the binding by free CN-Cbl or unsaturated plasma was found, which may be explained by the fact that plasma and the TC II-<sup>[57Co]</sup>CN-Cbl were added at the same time, whereas Fiedler-Nagy et al. (6) pre-incubated the plasma membrane with the unsaturated plasma. Physiologically it seems unlikely that unsaturated TC II competes with TC II-CN-Cbl for the binding sites on the cell membrane, because in vivo the higher level of unsaturated TC II in blood plasma would prevent the attachment of saturated TC II to the binding sites and the subsequent uptake into the cells.

Accordingly, Hall has reported recently that Hela cells and human lymphocytes showed a preferential uptake of saturated TC II, which was not affected by a 6-fold excess of saturated binder (15).

The pH optimum of 5.5 for rat liver membranes is the same as for the primary uptake of TC II-vitamin B<sub>12</sub> by mouse leukemia cells (14). Liver membranes, remarkably, do not require the presence of Ca<sup>++</sup> for the binding process and EDTA even seems to render more binding sites accessible for the TC II-vitamin B<sub>12</sub> complex. On the contrary the binding and uptake by several other cell types (2,3,14,16) is strongly inhibited by EDTA. These observations suggest that the liver membrane binding sites differ from the binding sites on other cells.

In an attempt to define the nature of the membrane binding sites by treatment of the purified membranes with several hydrolytic enzymes, and measurement of the effect on the binding activity, only trypsin proved to reduce the number, but not the affinity, of the binding sites. One may conclude from this, that at least a part of the binding site contains protein. Sialic acid does not seem to be directly involved because neuraminidase had no effect on the binding process. Lipolytic enzymes also did not interfere with the binding activities of the membranes in our experiments.

The results of this study demonstrate, that a protein-containing compound from liver plasma membrane specifically binds TC II-vitamin B<sub>12</sub> probably as a primary step in the uptake mechanism. Data from kidney and liver uptake of TC II-vitamin B<sub>12</sub> suggest that after a pinocytotic process the complex moves into the lysosomal system, where it is probably degraded and the vitamin released from its binding protein (5,17,18). If the binding sites are localized on those parts of the membrane which are subject to pinocytosis, a continuous flow of TC II-vitamin B<sub>12</sub> into the cell can be expected, also in view of the affinity constant, which indicates that at a normal TC II-vitamin B<sub>12</sub> concentration in the plasma of about 500 pM, most binding sites will be occupied by TC II-vitamin B<sub>12</sub>.

The binding affinities of membrane preparations from

different rat tissues are all of the same order of magnitude. This indicates that possible differences in the rate of uptake are likely to be the result of differences in the number of receptor sites on the membrane or in the velocity with which the pinocytotic process transports the complex into the cell.

### 3.6. References.

1. Hippe, E. and Olesen, H. Nature of vitamin B12-binding. III. Thermodynamics of binding to human intrinsic factor and transcobalamins. (1971). *Biochim. Biophys. Acta.* 243, 83-89.
2. Finkler, A.E. and Hall, C.A. Nature of the relationship between vitamin B12 binding and cell uptake. (1967). *Arch. Biochem. Biophys.*, 120, 79-85.
3. Retief, F.P., Gottlieb, C.W. and Herbert, V. Delivery of Co57-B12 to erythrocytes from alpha and beta globulin of normal, B12-deficient, and chronic myeloid leukemia serum (1967). *Blood*, 29, 837-851.
4. Hakami, N., Neiman, P.E., Canellos, G.P. and Lazerson, J. Neonatal megaloblastic anemia due to inherited transcobalamin II deficiency in two siblings. (1971). *New England J. Med.*, 285, 1163-1170.
5. Pletsch, Q.A. and Coffey, J.W. Intracellular distribution of radioactive vitamin B12 in rat liver. (1971). *J. Biol. Chem.*, 246, 4619-4629.
6. Fiedler-Nagy, C., Rowley, G.R., Coffey, J.W. and Miller, O.N. Binding of vitamin B12-rat transcobalamin II and free vitamin B12 to plasma membrane isolated from rat liver. (1975). *Brit. J. Haematol.*, 31, 311-321.
7. Neville, D.M. The isolation of a cell membrane fraction from rat liver. (1960). *J. Biophys. Biochem. Cytol.*, 8, 413-422.
8. Ray, T.K. A modified method for the isolation of the plasma membrane from rat liver. (1970). *Biochim. Biophys. Acta.*, 196, 1-9.
9. Evans, W.H. Fractionation of liver plasma membranes prepared by zonal centrifugation. (1970). *Biochem. J.*, 166, 833-842.
10. Persyn, J.P., v.d. Slik, W., Kramer, K. and de Ruyter, C.A. A new method for the determination of serum

- nucleotidase. (1968). *Z. Klin. Chem. Klin. Biochem.*, 6, 441-446.
11. King, T.O. (1967) in *Methods in Enzymology* (Colowick, S.P. and Kaplan, N.O. eds.) vol. X, pp. 322-326, Acad. Press, New York.
  12. Levvy, G.A. and Marsh, G.A. (1960) in *The Enzymes* (Boyer, P.O., Lardy, M.O. and Myrback, K. eds.) vol. 4, p. 7, Acad. Press New York.
  13. Lowry, O.M., Rosebrough, N.J., Farr, A.L. and Randall, R.J. Protein measurement with the folin phenol reagent. (1951). *J. Biol. Chem.*, 193, 265-275.
  14. DiGirolamo, P.M. and Huennekens, F.M. Transport of vitamin B12 into mouse leukemic cells. (1975). *Arch. Biochem. Biophys.*, 168, 386-393.
  15. Hall, C.A. Competition for TC II-B12 receptors between holo- and apo-transcobalamin II. Abstract 12 from Meeting American Society of Hematology. December 1977.
  16. Cooper, B.A. and Parenchych, W. Selective uptake of specifically bound cobalt-58 vitamin B12 by human and mouse tumour cells. (1961). *Nature*, 191, 393-395.
  17. Newmark, P., Newman, G.E. and O'Brien, J.R.P. Vitamin B12 in the rat kidney: Evidence for an association with lysosomes. (1970). *Arch. Biochem. Biophys.*, 141, 121-130.
  18. Schneider, R.J., Burger, R.L., Mehlman, C.S. and Allen, R.H. The role and fate of rabbit and human transcobalamin II in the plasma transport of vitamin B12 in the rabbit. (1976). *J. Clin. Invest.*, 57, 27-38.



**BINDING, UPTAKE AND RELEASE OF TRANSCOBALAMIN II- $[^{57}\text{Co}]$  CYANOCOBALAMIN BY ISOLATED RAT LIVER PARENCHYMAL CELLS**

4.1. Summary.

Isolated rat liver parenchymal cells were incubated with partially purified rat or human TC II-vitamin B<sub>12</sub>, which was radioactively labeled in the vitamin moiety. A rapid binding onto the surface of the cells in the first few minutes was followed by a steady linear increase of intracellular  $[^{57}\text{Co}]$  CN-Cbl in the next hour. With increasing concentrations of TC II the uptake became partially saturated and apparently TC II-Cbl is taken by two processes, a saturable specific uptake and a non-saturable non-specific uptake. The former process is probably due to specific binding sites on the plasma membrane. In contrast to observations on other cells, the process of binding and uptake was independent of calcium and could not be inhibited by EDTA or EGTA. Chloroquine, a lysosomotropic agent, caused an accumulation of intracellular Cbl, presumably by inhibition of intralysosomal proteolysis of the transport protein. It was concluded first, that TC II-vitamin B<sub>12</sub> is taken up by a mechanism of adsorptive endocytosis, followed by fusion with the lysosomes, and second that normally the cells secrete most of the internalized vitamin shortly after the uptake. This was confirmed by the observation that 30-100% of radioactive vitamin B<sub>12</sub>, which had been taken up shortly before the isolation of the liver cells, was released again in two hours of incubation.

## 4.2. Introduction.

In chapter 3 the binding of the TC II-vitamin B<sub>12</sub> complex to isolated plasma membranes has been described and it was concluded that the first step in the entrance of vitamin B<sub>12</sub> into the cell is the binding of TC II-vitamin B<sub>12</sub> to specific binding sites on the plasma membrane. The progress of the uptake mechanism, however, remains to be studied. Several mechanisms are possible: the carrier protein stays behind while the vitamin is transported through the membrane into the cell, or the whole complex enters the cytoplasm through the membrane or the complex enters the cell engulfed in pinocytotic vesicles (1).

As a logical sequel to the liver plasma membrane experiments the isolated liver cell was chosen as an in vitro system to study the uptake of vitamin B<sub>12</sub> by the cell. Liver parenchymal cells are rather easy to isolate, can be maintained in suspension in a relatively normal, viable state (2) and have been used previously for the investigations of the uptake and degradation of rat high-density lipoprotein (3) and asialoglycoprotein (4).

In this chapter the results of experiments are presented in which the vitamin moiety is radioactively labeled. Some of the experiments were carried out with human transcobalamin II and some with rat TC II for practical reasons and also to establish that there was no fundamental difference in the uptake of vitamin B<sub>12</sub>, whether it was bound to human or to rat TC II.

## 4.3. Methods.

### 4.3.1. Preparation of the liver cell suspension.

Liver parenchymal cells were isolated as described in



section 2.4. The cells were washed and finally suspended in Dulbecco's modified Minimal Essential Medium (DMEM) in a concentration of  $3.6 \times 10^6$  cells/ml. All glassware was siliconized in 1% siliclad (Clay-Adams), rinsed with distilled water and dried.

#### 4.3.2. Preparation of transcobalamin II- $^{57}\text{Co}$ cyanocobalamin.

TC II- $^{57}\text{Co}$  CN-Cbl was partially purified as described in section 2.3.1. The final preparation was dialyzed against 2 x 1 L DMEM for 48 hours and centrifuged at  $100\,000 \times g$  for 1 hour. All necessary dilutions were made in DMEM with 0.09% human serum albumin and buffered at pH 7.4 with 25 mM  $\text{NaHCO}_3$ .

#### 4.3.3. Standard incubation procedure.

7 ml aliquots of a cell suspension were distributed over 25 ml Erlenmeyer flasks and kept on melting ice. Just before the incubation the flasks were preincubated in a shaking waterbath at  $37^\circ$  for 5 min. The incubation was started by the transfer of 5 ml cell suspension to another 25 ml Erlenmeyer, which contained TC II- $^{57}\text{Co}$  CN-Cbl and eventually other additives in a volume of 4 ml. These latter flasks were also preincubated at  $37^\circ\text{C}$ . The Erlenmeyers were placed in a shaking waterbath and gassed with 95%  $\text{O}_2$ , 5%  $\text{CO}_2$ . At various time intervals 0.5 ml duplicate samples were taken and the cells were separated from the medium with the silicon oil filtration-centrifugation technique described in section 2.5. The cellular uptake was corrected for adherent waterspace as outlined in the same section and expressed as pmoles/ $10^9$  cells.

To avoid contact of the cells with too high concentra-

tions of the agents, EDTA, EGTA were added in a concentration which gave an excess of 1 mM over the concentration of bivalent cations in the medium. This excess was checked by complexometric titration with eriochrome black T. It was taken care off that the normal pH of the medium was maintained after the sequestration of the cations.

#### 4.4. Results.

##### 4.4.1. Dependence of binding and uptake on concentration of TC II-[<sup>57</sup>Co]CN-Cbl.

Binding and uptake of rat TC II-[<sup>57</sup>Co] CN-Cbl by the isolated liver parenchymal cells showed a rapid rise in the first 5 min and a steady linear increase in the next hour. (fig. 4.1.). The first phase is thought to represent the adherence of the protein to the binding sites on the plasma membrane and the second phase probably represents the entrance of the complex into the cells. Rat TC II and human TC II (figure 4.2) showed corresponding patterns, but human TC II seemed to be bound and taken up in somewhat higher amounts. The amount of initial binding and the rate of uptake were dependent on the extracellular concentration of TC II.

The initial binding was defined as the intercept on the ordinate, which is obtained by extrapolation of the time dependent uptake curve to time zero. In figure 4.3 the binding of rat TC II-[<sup>57</sup>Co] vitamin B<sub>12</sub> is plotted as a function of the concentration and figure 4.4 shows the rate of uptake, represented by the slope of the time dependent uptake curve from 5 to 60 min, as a function of the concentration. Both curves do not seem to reach saturation but the profile of the curves suggests that the measured binding and uptake are the sum of a saturable and a non-

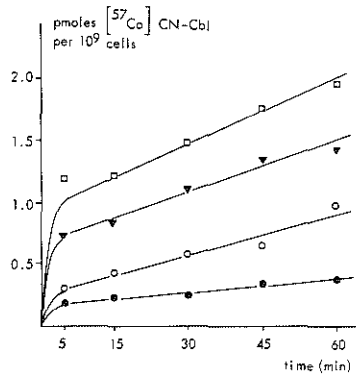


fig. 4.1. Time course of the binding and uptake of rat TC II- $[^{57}\text{Co}]$ CN-Cbl by rat liver parenchymal cells at four concentrations: ●—●, 70 pM; ○—○, 200 pM; ▼—▼, 400 pM and □—□, 680 pM TC II- $[^{57}\text{Co}]$ CN-Cbl. Each point is the mean of duplicate measurements.

saturable component.

The saturable component is probably the result of binding of TC II-vitamin  $\text{B}_{12}$  to the specific binding sites on the plasma membrane, whereas the non-saturable uptake is probably caused by non-specific binding to the cell membrane.

With human TC II- $[^{57}\text{Co}]$ CN-Cbl we were able to analyse this non-specific binding and uptake by incubations in the presence of 10 nM excess unlabeled human TC II-CN-Cbl. At this high concentration and consequently low specific radioactivity of the TC II-CN-Cbl the measured specific binding and uptake of  $[^{57}\text{Co}]$  vitamin  $\text{B}_{12}$  is negligible in relation to the total binding and uptake. The observed rise in cellular radioactivity with time was therefore assumed to represent largely non-saturable and non-specific uptake.

The non-specific binding of human TC II- $[^{57}\text{Co}]$ CN-Cbl

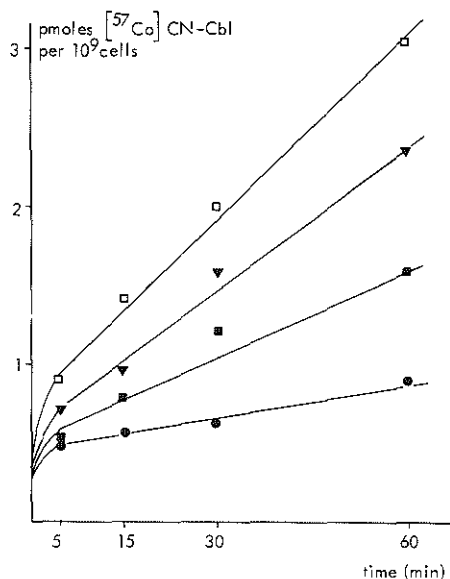


fig. 4.2. Time course of the binding and uptake of human TC II- $[^{57}\text{Co}]$  CN-Cbl by rat liver parenchymal cells at four concentrations: ●—●, 95 pM; ■—■, 191 pM; ▼—▼, 395 pM and □—□, 615 pM TC II- $[^{57}\text{Co}]$  CN-Cbl. Each point is the mean of duplicate measurements.

in the presence of 10 nM TC II-CN-Cbl was a linear function of the concentration of TC II- $[^{57}\text{Co}]$  CN-Cbl. The specific binding was calculated by subtraction of the non-specific binding from the partially saturable total binding observed in the absence of unlabeled TC II-CN-Cbl. The specific binding plotted as a function of the concentration (figure 4.5) was saturable and had an affinity constant of  $6.9 \times 10^9 \text{ M}^{-1}$ , calculated by Scatchard analysis.

A similar procedure was followed for the kinetic analysis of the rate of uptake as a function of the concentration. The rates of uptake at each concentration of TC II- $[^{57}\text{Co}]$  CN-Cbl in the presence of 10 nM unlabeled TC II-CN-Cbl were subtracted from the rates of uptake at the same concentrations without unlabeled TC II-CN-Cbl. The rate

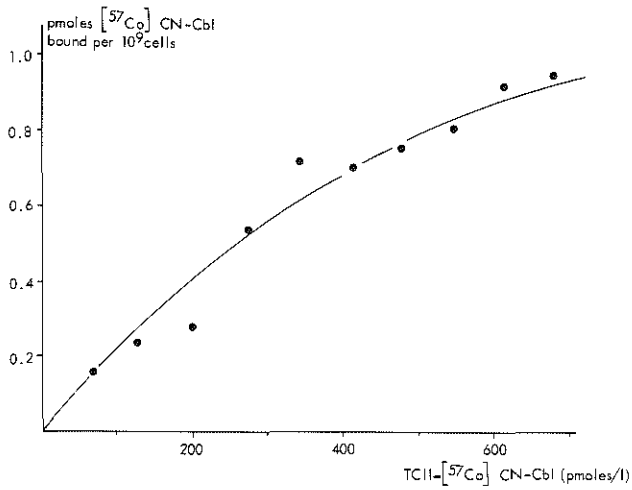


fig. 4.3. Binding of [<sup>57</sup>Co] CN-Cbl to liver parenchymal cells as a function of the rat TC II-[<sup>57</sup>Co] CN-Cbl concentration. Each point represents the amount of cell associated radioactivity at time zero, obtained by extrapolation of the linear part of the curves in figure 4.1, at the indicated concentration.

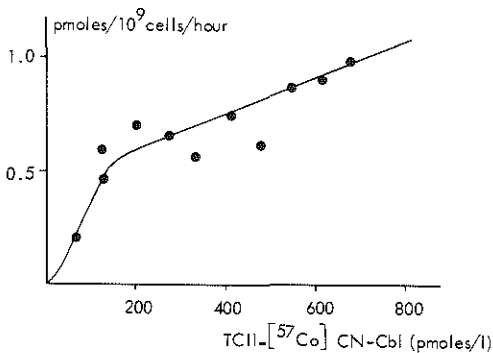


Fig. 4.4. Rates of uptake of [<sup>57</sup>Co] CN-Cbl as a function of the rat TC II concentration. Each point represents the mean rate of uptake from 5 to 60 min at the indicated concentration.

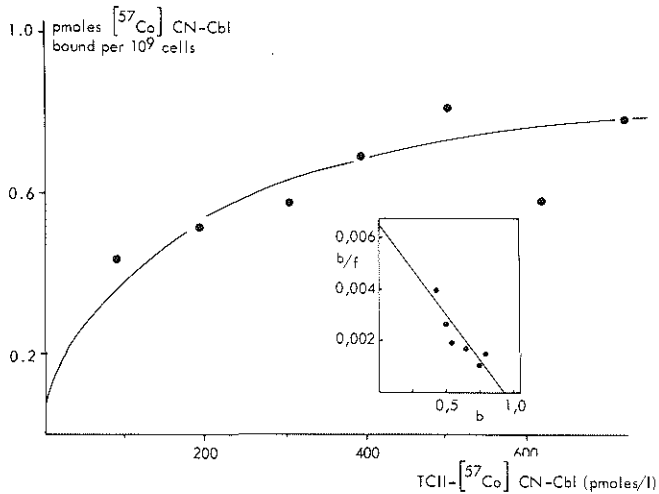


fig. 4.5. Specific binding of  $[^{57}\text{Co}]$  CN-Cbl to liver parenchymal cells as a function of the human TC II- $[^{57}\text{Co}]$  CN-Cbl concentration. Each point is obtained by subtraction of the non-specific binding of  $[^{57}\text{Co}]$  CN-Cbl from the total binding of  $[^{57}\text{Co}]$  CN-Cbl at the indicated concentration. The insert represents the Scatchard plot of the same experimental data.

of non-specific uptake was a linear function of the concentration but the calculated rate of specific uptake was saturated at about 400 pM and reached a maximal value of 1.1 pmoles/ $10^9$  cells/hour (figure 4.6). Half-maximal rate of specific uptake was reached at about 140 pM which is close to the concentration at which half-maximum binding occurred, namely 145 pM.

#### 4.4.2. Role of calcium in the TC II-Cbl uptake.

The effect of EDTA and EGTA on the binding and uptake was studied at 100 and 600 pM of TC II- $[^{57}\text{Co}]$  CN-Cbl. At both concentrations binding and uptake were equal to the

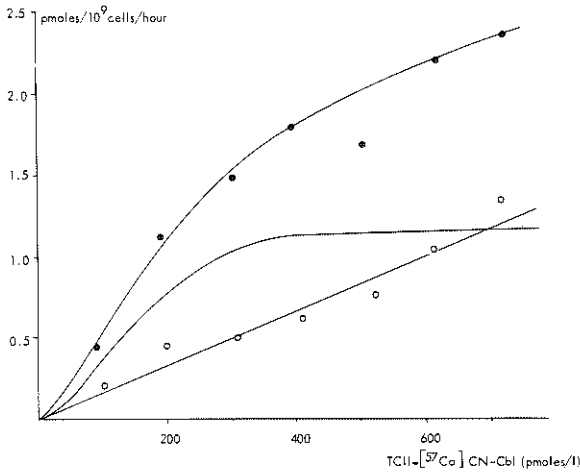


fig. 4.6. Rates of uptake of [<sup>57</sup>Co] CN-Cbl as a function of the human TC II-[<sup>57</sup>Co] CN-Cbl concentration. Each point represents the mean rate of uptake from 5 to 60 min at the indicated concentration. ●—●, incubation with TC II-[<sup>57</sup>Co] CN-Cbl alone; ○—○, incubation with TC II-[<sup>57</sup>Co] CN-Cbl in the presence of 10 nM pure human TC II-CN-Cbl; —, course of the rate of specific uptake, obtained by subtraction of the lower curve from the top curve.

control incubations during the first 30 min. After this time the liver cells tended to agglutinate in the presence of the chelators, which resulted sometimes in large differences in the duplicate measurements. However, the conclusion seems to be justified that the binding and uptake of TC II by liver parenchymal cells are calcium and/or magnesium independent. This is in agreement with the observations on the binding of TC II-Cbl to isolated liver plasma membranes which was also no inhibited by the addition of EDTA or EGTA (chapter 3).

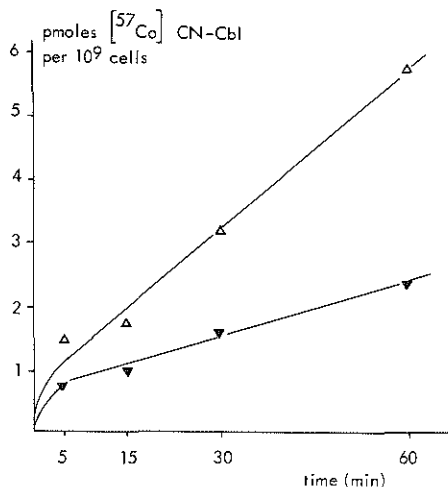


fig. 4.7. Effect of chloroquine on the binding and uptake of human TC II- $[^{57}\text{Co}]$  CN-Cbl.  $\nabla$ — $\nabla$ , control cells, incubated with 400 pM TC II- $[^{57}\text{Co}]$  CN-Cbl.  $\Delta$ — $\Delta$ , cells incubated with 400 pM TC II- $[^{57}\text{Co}]$  CN-Cbl and 3.5 mM chloroquine.

#### 4.4.3. Effect of chloroquine on the uptake of TC II- $[^{57}\text{Co}]$ CN-Cbl.

The data in section 4.4.1 indicated that TC II-CN-Cbl is bound to the cell membrane and subsequently is taken up by the cells. It was, however, uncertain whether the measured uptake represented the total uptake by the cells or whether it was the resultant of an uptake and a release process in which the uptake was somewhat larger than the release. The latter concept was supported by the results of an experiment in which chloroquine was added to the incubation medium. This lysosomotropic agent, an inhibitor of lysosomal proteolysis, caused an almost threefold increase of the cellular uptake without affecting the initial binding of TC II-CN-Cbl to the cell membrane. (figure 4.7). Vitamin B<sub>12</sub> apparently accumulates in the lysosomes as a result of the



inhibition of the proteolytic degradation of TC II. This observation also indicates that in the absence of chloroquine the real rate of uptake is higher than the observed rate of uptake and that a part of the internalized vitamin B<sub>12</sub> is released by the cells shortly after the uptake.

#### 4.4.4. Release of [<sup>57</sup>Co] Cbl from isolated liver cells.

The data from the experiments with chloroquine suggest that Cbl is released from the cells shortly after the uptake. In order to measure this release, experiments were carried out, in which the liver cells were loaded with radioactively labeled vitamin B<sub>12</sub> by the intravenous injection of [<sup>57</sup>Co] CN-Cbl, prior to the isolation procedure. After isolation of the parenchymal cells the release of the radioactive label was measured during incubations under standard conditions.

When the injection of [<sup>57</sup>Co] CN-Cbl took place 30' before the start of the liver cell isolation, a substantial part of the radioactive vitamin B<sub>12</sub> was released into the medium (figure 4.8). The initial release became larger with increasing extracellular TC II concentrations, but the subsequent releases were apparently not influenced by the extracellular TC II concentrations. Without extracellular TC II about 15% of the cellular radioactivity was released within the first minute but at 280 pM TC II almost 50% could be recovered instantaneously in the medium. At this high concentration of TC II the total cellular content of [<sup>57</sup>Co] Cbl was released in two hours. At 0°C some initial release occurred but no further loss of radioactivity was detectable in the following two hours.

In contrast with the release of recently internalized radioactive Cbl, the total release of endogenous vitamin B<sub>12</sub>, measured with the radioassay, increased linearly and independently of the extracellular concentration of TC II,

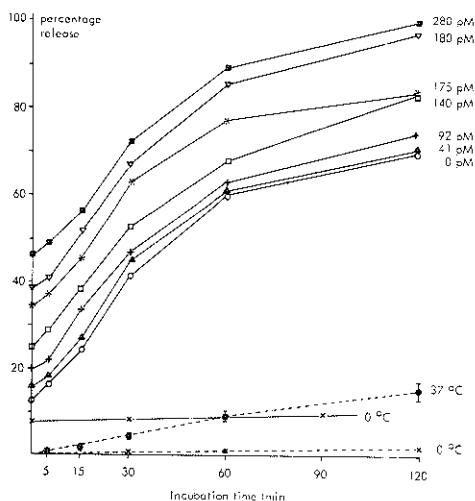


fig. 4.8. Release of  $[^{57}\text{Co}] \text{CN-Cbl}$  and unlabeled Cbl from isolated liver cells, expressed as percentage of the initial cellular amount of  $[^{57}\text{Co}] \text{CN-Cbl}$  and Cbl. The cells were loaded with radioactive vitamin  $\text{B}_{12}$  by an intravenous injection of  $1 \mu\text{Ci}$   $[^{57}\text{Co}] \text{CN-Cbl}$  30 min before the isolation of the parenchymal cells. The loaded cells were incubated under standard conditions with partially purified rat TC II-CN-Cbl in concentrations ranging from 0 to 280 pM. The solid lines represent the release of  $[^{57}\text{Co}] \text{CN-Cbl}$  at the various concentrations of unlabeled TC II-Cbl and each point is the mean of duplicate measurements. The broken lines represent the release of total unlabeled Cbl and each point represents the mean value  $\pm$  S.D. of the incubations at all different TC II-Cbl concentrations. In addition the release of Cbl and  $[^{57}\text{Co}] \text{CN-Cbl}$  was measured at  $0^\circ\text{C}$ :  $\times\text{---}\times$ , release of  $[^{57}\text{Co}] \text{CN-Cbl}$ ;  $\times\text{-----}\times$ , release of total unlabeled Cbl.

(figure 4.8 broken lines). It reached only 15% of the amount of total initial intracellular vitamin  $\text{B}_{12}$  content. At  $0^\circ\text{C}$

release of endogenous vitamin B<sub>12</sub> was absent. It is possible that a part of the released vitamin originated from cells which became leaky during the incubation, but comparison with the activity of the cytoplasmic marker enzyme LDH in the medium showed that the percentage of release of vitamin B<sub>12</sub> was at least two times higher than the percentage of release of the enzyme (see section 2.4). Therefore part of the observed vitamin B<sub>12</sub> release was explained as an active release from the cells.

When radioactive vitamin B<sub>12</sub> was injected 70 hours before the onset of the liver cell isolation, the initial [<sup>57</sup>Co] vitamin B<sub>12</sub> release was negligible at all extracellular concentrations of TC II-CN-Cbl and also the further release was independent of the extracellular TC II concentration. The release was linear and reached only 18.6% of the cellular radioactivity after 2 hours of incubation. The release of total endogenous vitamin B<sub>12</sub> in this experiment was 19.3% after 2 hours of incubation and it can be concluded that after 70 hours the radioactive vitamin B<sub>12</sub> has been taken up in the stable pool of endogenous vitamin B<sub>12</sub> and therefore is released in the same way as the unlabeled vitamin in this pool.

#### 4.4.5. Measurement of the excretion of vitamin B<sub>12</sub> into the bile.

In the preceding section it was demonstrated that vitamin B<sub>12</sub> is released from the liver parenchymal cells at a relatively fast rate with respect to vitamin B<sub>12</sub> in a pool of recently internalized vitamin, and at a proportionally slower rate for the large cellular pool. This release may have occurred at the circulatory and/or the biliary side of the liver cell.

In order to investigate the direction of the release

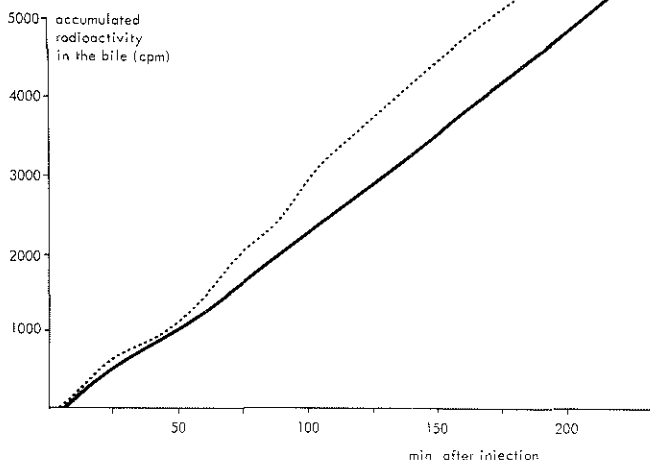


fig. 4.9. Accumulated radioactivity in the bile in two different rats after the intravenous administration of 1  $\mu\text{Ci}$  [ $^{57}\text{Co}$ ] CN-Cbl.

of vitamin B<sub>12</sub>, rats were intravenously injected with [ $^{57}\text{Co}$ ] CN-Cbl after insertion of a cannula into the bile duct. Bile secretion remained constant at a flow of 0.3 to 0.4 ml/hour.  $^{57}\text{Co}$ -radioactivity in the bile appeared shortly after the injection and increased linearly during about 3 hours (figure 4.9). The amount of radioactivity excreted after two hours was 2-3% of the total liver radioactivity at that moment. The total amount of vitamin B<sub>12</sub> in the bile was 2.3 ng/ml, which is less than 0.1% per hour in relation to the total liver vitamin B<sub>12</sub> pool. The vitamin B<sub>12</sub> in the bile was in the free form as was established by Sephadex G50 column chromatography.

#### 4.5. Discussion.

The uptake of TC II-vitamin B<sub>12</sub> by isolated liver cells

has three aspects: the binding of the complex to the specific binding sites on the plasma membrane, the transport into the cell, and the intracellular processing of the vitamin and the transport protein.

The biphasic profile of the time dependent increase in cell bound radioactivity suggests that the binding of TC II-Cbl to the surface of the cell predominates in the first phase of rapid rise in cell-associated radioactivity and that the further increase is the result of the entrance of the complex into the cell. It is difficult to measure binding and uptake separately and therefore the amount of binding at each concentration of TC II was estimated by extrapolation of the linear part of the curve, representing the increase of intracellular TC II-Cbl, to time zero.

The binding and uptake of human and rat TC II-Cbl by the liver cell were both partially saturable. It was assumed that a part of the process was non-specific and the size of the non-specific component was estimated by incubations in the presence of 10 nM unlabeled pure human TC II-CN-Cbl. The non-specific binding and uptake were a linear function of the concentration of TC II- $^{57}\text{Co}$  CN-Cbl. The specific binding and uptake were calculated by subtraction of the non-specific binding and uptake from the total binding and uptake and were found to be saturable at concentrations above 400 pM. These results are in agreement with the observations of Youngdahl-Turner et al. (5) on the specificity of the binding of TC II-Cbl to fibroblasts in culture. The observed affinity constant for the binding of TC II-vitamin B<sub>12</sub> by the liver cell is in agreement with the affinity constant which was found with the isolated liver plasma membranes. The similarity between the concentration dependent curves for binding and uptake suggests that the rate of uptake is primarily determined by the degree of occupation of the specific binding sites. Further studies are necessary to find out to what extent the non-specific binding and uptake are physiological

phenomena or features of this particular liver cell system.

The observation that the binding and uptake of TC II by the liver cell is independent of calcium, confirms our results obtained with the binding of TC II to isolated liver plasma membranes and is also in agreement with the studies of Fiedler-Nagy et al. (6).

The accumulation of  $^{57}\text{Co}$ -radioactivity in the cell as a result of the presence of chloroquine is explained by the fact that this lysosomotropic agent is an inhibitor of lysosomal proteolysis (7,8). Apparently TC II-vitamin  $\text{B}_{12}$  is transported to the lysosomes, where in the absence of chloroquine the protein is degraded and the vitamin  $\text{B}_{12}$  molecule is dissociated from its transport protein. A blockade of lysosomal proteolysis by chloroquine apparently prevents the bound cobalamin to be processed further by the cells, and causes an accumulation of cobalamin in the lysosomes and possibly the endocytic vesicles.

The combination of specific binding sites on the plasma membranes and the localization of TC II-vitamin  $\text{B}_{12}$  in the lysosomes after its internalization by the cell leads to the conclusion that the complex probably enters the cell by a process of binding site-mediated pinocytosis or adsorptive endocytosis (9).

Chloroquine does not affect the binding of TC II to the membrane binding sites and it is assumed that it does not influence the rate of endocytosis. Therefore the conclusion can be drawn that in the absence of chloroquine the real uptake of TC II-vitamin  $\text{B}_{12}$  is much higher than the observed uptake and that a part of the internalized vitamin  $\text{B}_{12}$  is released from the cells shortly after its uptake.

This release of vitamin  $\text{B}_{12}$  was studied directly by incubation of isolated liver cells from rats which had been intravenously injected with [ $^{57}\text{Co}$ ] vitamin  $\text{B}_{12}$  before the isolation procedure was started. When the injection was given shortly before the isolation of the cells the total amount

of radioactivity could be released from the cells within 2 hours of incubation. Apparently there was still TC II- $[^{57}\text{Co}]$  vitamin  $\text{B}_{12}$  attached to the binding sites, because a part of the radioactive label was instantaneously released from the cells. This early release increased with the concentration of added extracellular TC II but the subsequent release of cell-associated radioactivity was independent of the extracellular TC II concentration. The latter radioactivity was probably located in endocytotic vesicles, or the lysosomes. Measurement of the total release of vitamin  $\text{B}_{12}$  revealed that there is a more stable pool of vitamin  $\text{B}_{12}$  in the cell from which vitamin  $\text{B}_{12}$  is released steadily. The release of this endogenous vitamin  $\text{B}_{12}$  in absolute quantities exceeded the release of radioactive vitamin  $\text{B}_{12}$  but it amounted to only 15% of the total liver vitamin  $\text{B}_{12}$  content. Moreover, it was independent of extracellular TC II concentrations. When  $[^{57}\text{Co}]$  CN-Cbl was administered 70 hours before the cell isolation, the release of  $^{57}\text{Co}$ -radioactivity was proportional with the total vitamin  $\text{B}_{12}$  secretion, which means that in 70 hours the  $[^{57}\text{Co}]$  vitamin  $\text{B}_{12}$  was fully integrated into the stable pool.

Our data on the release of vitamin  $\text{B}_{12}$  from isolated liver cells correspond with results from studies by Cooksley et al. (10,11), who observed releases of vitamin  $\text{B}_{12}$  by the perfused rat liver in vivo during 4 hours of 15%, 30% or 87% after the liver had been labeled with  $[^{57}\text{Co}]$  CN-Cbl 96 hours, 18 hours and 0.16 hours before the perfusion was started. This release was not influenced by cycloheximide, sodium phenobarbitone or the injection of large amounts of unlabeled vitamin  $\text{B}_{12}$  18 hours before the perfusion. In our studies cycloheximide and puromycin were found to be ineffective on the release of vitamin  $\text{B}_{12}$  from the labile and the stable pool. This indicates that protein synthesis is not directly involved in the release of vitamin  $\text{B}_{12}$  from the cell.

Excretion of radioactive vitamin B<sub>12</sub> in the bile was low, compared with the secretion by the isolated liver cells in our study and also in comparison with the secretion by the perfused rat liver in the studies of Cooksley and Tavill (11).

In conclusion the experimental results are indicative for rapid exchange between vitamin B<sub>12</sub> in the blood and a labile intracellular pool of the liver cell, presumably involving a process of adsorptive endocytosis. A small fraction of the internalized vitamin B<sub>12</sub> is probably retained by the cell to meet its own metabolic requirements and to replenish the slowly releasing stable pool.

#### 4.6. References.

1. Pletsch, Q.A. and Coffey, J.W. Intracellular distribution of radioactive vitamin B<sub>12</sub> in rat liver. (1971). *J. Biol. Chem.*, 246, 4619-4629.
2. Seglen, P.O. Preparation of isolated rat liver cells. (1976). *Methods in Cell Biology*. (D.M. Prescott Ed.). vol. 13, p. 29, Acad. Press New York.
3. Nakai, T., Otto, P.S., Kennedy, D.L. and Whayne, T.F. jr. Rat high density lipoprotein subfraction (HDL3) uptake and catabolism by isolated rat liver parenchymal cells. (1976). *J. Biol. Chem.*, 251, 4914-4921.
4. Tolleshaug, H., Berg, T., Nilsson, M. and Norum, K.R. Uptake and degradation of <sup>125</sup>I-labeled asialofetuin by isolated rat hepatocytes. (1977). *Biochim. Biophys. Acta.*, 499, 73-84.
5. Youngdahl-Turner, P., Rosenberg, L.E. and Allen, R.H. Binding and uptake of transcobalamin II by human fibroblasts. (1978). *J. Clin. Invest.*, 61, 133-141.
6. Fiedler-Nagy, C., Rowley, G.R., Coffey, J.W. and Miller, O.N. Binding of vitamin B<sub>12</sub>-rat transcobalamin II and free vitamin B<sub>12</sub> to plasma membranes isolated from rat liver. (1975). *Brit. J. Haematol.*, 31, 311-321.
7. Wibo, M. and Poole, B. Protein degradation in cultured cells. II. The uptake of chloroquine by rat fibroblasts and the inhibition of cellular protein degradation and cathepsin B<sub>1</sub>. (1974). *J. Cell. Biol.*, 63, 430-440.



8. De Duve, C., De Barsey, T., Poole, B., Trouet, A., Tulkens, P. and van Hoof, F. Lysosomotropic agents. (1974). *Biochem. Pharmacol.*, 23, 2495-2531.
9. Steinman, R.M., Silver, J.M. and Cohn, Z.A. Pinocytosis in fibroblasts. Quantitative studies in vitro. (1974). *J. Cell. Biol.*, 63, 949-969.
10. Cooksley, W.G.E., England, J.M., Louis, L., Down, M.L. and Tavill, A.S. Hepatic vitamin B12 release and transcobalamin II synthesis in the rat. (1974). *Clin. Sci. Mol. Med.*, 47, 531-545.
11. Cooksley, W.G.A. and Tavill, A.S. Heterogeneity of hepatic vitamin B12 in the rat after parenteral cyanocobalamin. (1975). *Clin. Sci. Mol. Med.*, 49, 257-264.



**PURIFICATION OF HUMAN TRANSCOBALAMIN II-CYANOCOBALAMIN BY AFFINITY CHROMATOGRAPHY USING A THERMOLABILE IMMOBILIZATION OF CYANOCOBALAMIN**

5.1. Summary.

Transcobalamin II was isolated from Cohn fraction III of pooled human plasma with an affinity chromatography technique followed by conventional separation methods. The affinity material was prepared by a direct thermolabile attachment of hydroxocobalamin (OH-Cbl) to AH-Sepharose 4B. The specificity of the affinity ligand for Cbl-binding proteins was improved by a conversion into cyanocobalamin (CN-Cbl), with maintenance of the thermolabile linkage. The total purification procedure included successively CM-Sephadex batchwise elution, affinity chromatography, Sephacryl S 200 gel filtration and DEAE-Sepharose CL-6B ion-exchange chromatography with a linear and a concave gradient elution. The final product was obtained with a yield of 55% and a purification factor of  $1.1 \times 10^6$ . The specific CN-Cbl binding capacity was 0.98 mol CN-Cbl/mol TC II. In dodecyl sulphate polyacrylamide gel electrophoresis one major protein band was observed at a molecular weight of 37 000 and a faint band at a molecular weight of 29 000. A considerable shift from the first to the second band occurred, when the protein was incubated with  $\beta$ -mercaptoethanol or dithiothreitol before electrophoresis.

At the same time three faint protein bands appeared at molecular weights of 24 000, 18 000 and 13 000. This suggests a dissociation of the TC II molecule in smaller subunits. In polyacrylamide gel isoelectric focusing the pure preparation appeared to be composed of several isoproteins with isoelectric points ranging from pH 6.2 to 6.8. The pure material was labeled with  $^{125}\text{I}$  using immobilized

lactoperoxidase. The labeled product was analyzed with gel filtration and ion exchange chromatography and appeared to be unaltered.

## 5.2. Introduction.

In the preceding chapters the binding of TC II- $[^{57}\text{Co}]$  CN-Cbl to isolated rat liver plasma membranes and the uptake of TC II- $[^{57}\text{Co}]$  CN-Cbl by isolated rat liver parenchymal cells have been described. Because the radioactive label was in the vitamin moiety of the complex the results of the experiments gave almost no data on the role and fate of the protein part. The study of the uptake and digestion of the transport protein necessitates the incorporation of a radioactive label in the protein. For this the protein had to be purified to homogeneity first. A review of the existing methods of purification for TC II was given in section 1.2.5. In this chapter a new procedure is presented which is based on the method of Nexø (1,2), and which makes use of the property of hydroxocobalamin to form a thermolabile linkage with certain aminogroups.

We found that the method of Nexø was inadequate for the purification of TC II from rat or human plasma, because also large amounts of non-TC II-plasma proteins were retained by the affinity column, which were very difficult to remove in later purification steps.

A simple modification is described which effectively reduced the non-specific binding of proteins to OH-Cbl. It appeared to be possible to convert the immobilized OH-Cbl to CN-Cbl by elution of the column with a buffer containing cyanide. Under the influence of the cyanide OH-Cbl changes to di-CN-Cbl, which after omission of KCN from the buffer is converted to mono-CN-Cbl under maintenance of the thermolabile linkage. CN-Cbl has almost no affinity for plasma

proteins other than TC II and cobalophilin, in contrast to OH-Cbl which also avidly binds to albumin and other proteins (3,4,5,6). The effect of this modification, the result of a representative purification procedure and the characterization of the isolated material are presented in the following sections.

### 5.3. Methods.

#### 5.3.1. Preparation of the affinity column.

AH-Sepharose was used as the insoluble matrix. 1 g AH-Sepharose 4B was swollen in 200 ml 0.5 M NaCl for 15 min and washed with another 300 ml 0.5 M NaCl. The swollen Sepharose was directly incubated with OH-Cbl in about 2 ml 0.1 M NaHCO<sub>3</sub>, 0.5 M NaCl, pH 8.2. The amount of OH-Cbl, which was incubated with the Sepharose, was about 10 times in excess of the binding capacity of the sample from which the binding proteins were going to be isolated. This because the average efficiency of the coupling procedure is 20-30% and an excess of about 100% of immobilized cobalamin in comparison to the binding capacity of the sample is thought to be desirable.

For the detection of TC II in further purification steps AH-Sepharose was incubated with a mixture of labeled and unlabeled OH-Cbl. [<sup>57</sup>Co] OH-Cbl was prepared from [<sup>57</sup>Co] CN-Cbl by exposure to a 60 W tungsten lamp at a distance of 15 cm for 18 hours in 8 mM HCl, according to Mahoney et al. (7). The cuvette was thermostatically kept at 4°C. The Sepharose suspension was incubated with OH-Cbl for about 18 hours at room temperature in a rotary mixer, cooled on ice for 30 min and poured into a precooled glass column (1.5 x 5.5 cm). The Sepharose was washed with 50 ml of 20 mM sodium phosphate, 1 M NaCl, 10 mM KCN, buffer pH 8.2 to convert the OH-Cbl to di-CN-Cbl. The excess of Cbl in the

effluent was measured spectrophotometrically to establish the coupling efficiency. KCN was removed with 200 ml of the phosphate-NaCl buffer without KCN and at the same time the di-CN-Cbl was converted to mono-CN-Cbl. In this form the column was used for the purification procedure.

### 5.3.2. Purification of human transcobalamin II.

A representative purification procedure is described in detail. 80 l of 10 mM sodium phosphate, 0.1 M NaCl, buffer pH 5.2 was added to 19 kg of Cohn fraction III, and the suspension was stirred continuously for 12 hours at 4°C. Insoluble material was allowed to settle and the supernatant was filtered over nylon gauze (63 $\mu$ ). The filtrate was stirred for another 12 hours with 100 g of dry CM-Sephadex C-50. The Sephadex was collected by filtration over nylon gauze and washed first on the gauze and afterwards on a glass filter with 10 l of 10 mM sodium phosphate, 0.05 M NaCl, buffer pH 5.2. TC II was eluted from the Sephadex by stirring the suspension in 1.5 l of 0.2 M Tris, 1 M NaCl, pH 8.2. The Sephadex was washed with another 400 ml Tris buffer. The total filtrate, about 3300 ml, was centrifuged for 2 hours at 105 000 x g. The supernatant was passed through filter paper (S&S 589<sup>3</sup>) to remove floating lipid material. The cobalamin-binding capacity was measured and the total volume was applied to the affinity column, which contained 210  $\mu$ g of immobilized CN-Cbl with a specific activity of 19 175 cpm/ $\mu$ g, at a flow rate of 100 ml/hour. The column was washed with 400 ml cold 20 mM sodium phosphate, 1 M NaCl, 0.02% NaN<sub>3</sub>, pH 7.4 and during this washing the Sepharose was resuspended and allowed to settle in order to remove particulate material. Elution of the TC II-CN-Cbl took place after incubation of the column for 10 hours at 37°C and washing with about 5 ml of warm phosphate-NaCl buffer.

After another 10 hours at 37°C the remainder of the TC II-CN-Cbl and free cobalamin were eluted with 4 ml of warm buffer and the two eluates were combined.

The TC II-CN-Cbl solution was subsequently applied to a Sephacryl S 200 column (2.6 x 90 cm) and elution took place with the same phosphate buffer. The fractions containing TC II-CN-Cbl, detectable by their <sup>57</sup>Co-radioactivity, were pooled and concentrated by ultrafiltration on a YM 10 membrane (Amicon). After this concentration the buffer was changed to 50 mM Tris/HCl pH 8.25 as a preparation for the next purification step, DEAE-Sepharose ion exchange chromatography. The concentrate was put on a 0.9 x 4 cm column of DEAE-Sepharose CL-6B and eluted with a linear gradient from 0 to 225 mM NaCl in 50 mM Tris/HCl pH 8.25 with a total volume of 200 ml.

The concentrated fractions containing TC II-CN-Cbl were again brought in 50 mM Tris/HCl pH 8.25 and applied to a second DEAE-Sepharose column. For the elution a concave gradient from 0-150 mM NaCl was created by a two-pump system in which the efflux from the mixing chamber was 14 times the influx of the high salt solution into the mixing chamber (8). The total volume of the gradient was 200 ml. The fractions containing TC II-CN-Cbl were pooled and concentrated on a YM-10 ultrafiltration membrane.

The different purification products were subjected to measurements of the CN-Cbl-binding capacity or the vitamin B<sub>12</sub> content and of the total protein in order to establish the specific vitamin B<sub>12</sub>-binding capacity of the isolated material. The methods for the measurements of binding capacity and vitamin B<sub>12</sub> concentration are described in section 2.2.2 and 2.2.3 respectively.

### 5.3.3. Further analytical methods.

Protein was measured according to Lowry et al. (9), using bovine serum albumin or human serum albumin protein standard (Kabi, Stockholm) as a reference. Both standards gave identical results.

Dodecyl sulphate polyacrylamide gel electrophoresis was carried out according to Fairbanks et al. (10). Electrophoresis was performed at 2.5 mA/gel until the tracking dye, pyronine Y, reached the bottom of the electrophoresis tube. The gels were fixed and stained with Coomassie brilliant blue.

Thin layer polyacrylamide gel isoelectric focusing was performed with a modification of the method of Vesterberg (11). The gel was composed of 13.5 ml 30.5% acrylamide, 15 ml 1% NN'-methylene bisacrylamide, 27 ml H<sub>2</sub>O, 0.65 g Triton X-100, 7.5 g sucrose, 1.0 ml Ampholine pH 5-7, 1.0 ml Ampholine pH 6-8, 1 ml Ampholine 7-9, 1 ml 0.0055% riboflavin and polymerization was induced by a daylight tube lamp. The samples were applied in small (5x10x1mm) basins in the gel. The cathode solution was 0.1 M NaOH, the anode solution 0.1 M H<sub>3</sub>PO<sub>4</sub>.

Focusing was done in a LKB Multiphor apparatus for 90 min at 4°C. At the end of the focusing time the pH gradient was measured with an Ingold Surface electrode type 104033.104. The proteins were fixed in 50% methanol/7.5% TCA and stained with Coomassie brilliant blue.

### 5.3.4. <sup>125</sup>I-labeling of purified transcobalamin II-CN-Cbl.

40 mg lactoperoxidase (Boehringer, Mannheim, Germany) was dialyzed for 24 hours against 1 l of 0.1 M NaHCO<sub>3</sub> buffer pH 8.0, containing 0.5 M NaCl. The dialyzed protein was coupled to AH-Sepharose 4B according to the instructions of



the manufacturer. Unbound protein was removed by filtration and the gel was finally washed with distilled water and lyophilized. The total amount of lyophilized material was 520 mg.

The enzymatic activity was determined by means of a 2,2'-azino-di [ 3-ethyl-benzthiazoline sulfonate (6) ] (NH<sub>4</sub>)<sub>2</sub> (ABTS<sup>R</sup>)-coupled reaction. The increase of extinction at 436 nm was used as a measure of enzyme activity ( $\epsilon_{436}^{1\text{cm}} = 29.3 \text{ cm}^2/\mu\text{mol}$ ).

5 mg of lyophilized lactoperoxidase - Sepharose (LP-Sepharose) were swollen in 0.07 M potassium phosphate buffer, pH 5.5 and added to the reaction mixture, which contained 20 mM ABTS and about 0.25 mM H<sub>2</sub>O<sub>2</sub> in the same buffer. During the reaction the Sepharose was kept in suspension. The enzyme activity was found to be 900 mU/mg lyophilized LP-Sepharose and the percentage of coupled and recovered enzyme activity was 10%.

The protein labeling was carried out according to David (12). 0.5 mg LP-Sepharose was swollen in 0.5 ml 20 mM sodium phosphate, 0.15 M NaCl, pH 7.4 in a 1.5 ml micro reaction vessel. The suspension was centrifuged for 1 min at 8 000 x g and the supernatant was removed. 0.9 ml phosphate-NaCl buffer was added to the pellet, followed by 0.1 ml (30  $\mu\text{g}$ ) TC II-CN-Cbl, 0.1 ml (1 mCi) [<sup>125</sup>I] NaI and 0.1 ml 0.122 mM KI. At 0, 10 and 20 min 10  $\mu\text{l}$  0.03% H<sub>2</sub>O<sub>2</sub> was introduced and the reaction vessel was rotated for 30 min. After the incubation the mixture was centrifuged for 2' at 8 000 x g to remove the LP-Sepharose beads and the supernatant was collected. The Sepharose pellet was washed twice with incubation buffer and the collected supernatants were applied to a Sephadex G75 column (1.6 x 70 cm). The sample was eluted with 20 mM sodium phosphate, 1 M NaCl pH 7.4. The 2 ml fractions were collected in siliconized tubes which contained 100  $\mu\text{l}$  of 1.8% human serum albumin in saline. The latter precautions were taken in order to reduce absorption

of the labeled protein, which amounted to 62% in normal glass tubes, 30% in siliconized glass tubes and 9% when also albumin was added.

The TC II-containing fractions were pooled and concentrated by ultrafiltration. The vitamin B<sub>12</sub> content was measured by radioassay and a specific <sup>125</sup>I-radioactivity of 190 cpm/pg CN-Cbl was calculated.

#### 5.4. Results.

##### 5.4.1. Preliminary observations.

Our improvement of the affinity chromatography technique was based on the results of purifications of transcobalamin II from rat plasma using the unmodified method of Nexø (4). When rat plasma with a total CN-Cbl-binding capacity of 0.16 nmole was applied to a OH-Cbl-Sepharose column, 59 nmoles of protein-bound OH-Cbl were recovered in the 37°C eluate. This means that other plasma proteins also showed a high affinity for the OH-Cbl in the column. Because it is known that for instance serum albumin readily binds OH-Cbl but not CN-Cbl (13) it was tried to prepare a CN-Cbl-Sepharose column. CN-Cbl-Sepharose was obtained from OH-Cbl-Sepharose by successive rinses with a CN<sup>-</sup> containing and a CN<sup>-</sup>-free buffer so that OH-Cbl was converted first to di-CN-Cbl and then to mono-CN-Cbl, as was illustrated by the absorption spectra of the 37°C eluates in each of the three stages of preparation (figure 5.1). When the rat serum was applied to such a CN-Cbl-Sepharose column all protein-bound CN-Cbl in the eluate was bound to TC II, which means that the non-specific binding was completely eliminated.

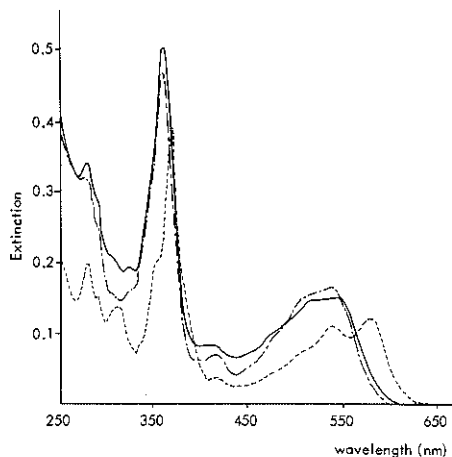


fig. 5.1. Spectra of affinity column eluates. - · - · - ·, hydroxocobalamin from an unconverted column; · · · · ·, dicyanocobalamin from a converted column with  $CN^-$  in the elution buffer; ———, cyanocobalamin from a converted column which was previously rinsed with  $CN^-$  free buffer. All samples were diluted in the respective elution buffers and the same buffer was used as a reference. The spectra were recorded on a Perkin Elmer 124 spectrophotometer.

#### 5.4.2. Purification of human transcobalamin II.

With this improved affinity chromatography technique the purification of TC II was started with Cohn fraction III from human plasma. The total vitamin  $B_{12}$ -binding capacity of the Cohn fraction solution was 170  $\mu$ g. The insoluble material contained also some binding capacity, but a second extraction was not worthwhile, because the yield and the specific binding activity were low. The vitamin  $B_{12}$ -binding capacity of the first supernatant was used as the 100% value for the calculation of the yield of the purification.

Using batchwise CM-Sephadex elution the TC II was

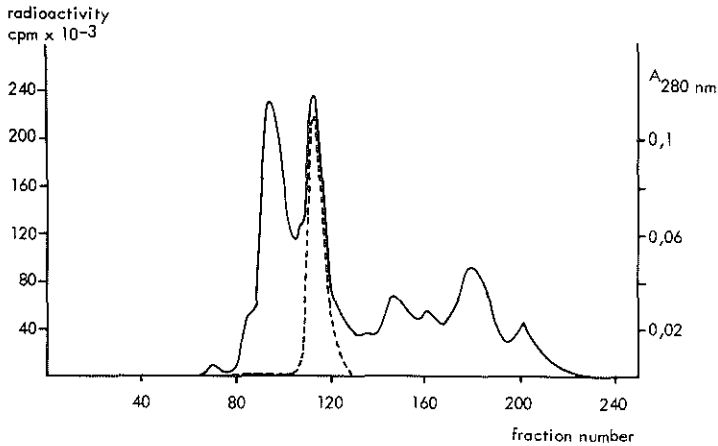


fig. 5.2. Elution profile of the affinity column eluate on a Sephacryl S 200 column (2.6 x 90 cm) equilibrated with 20 mM sodium phosphate, 1 M NaCl buffer, pH 7.2. —,  $A_{280}$ ; -----,  $^{57}\text{Co}$ -radioactivity. Fraction volume was 2.8 ml and the elution velocity was 10 ml/hour.

recovered from the supernatant in a volume of 3.3 l, with a 17-fold purification and only a 10% loss of binding capacity.

The specific vitamin B<sub>12</sub>-binding capacity of the eluate from the affinity column could not be calculated directly, because the eluate contains a mixture of free and bound Cbl. The amount of bound cyanocobalamin was determined in the following purification step: the Sephacryl S 200 column. The total amount of bound cyanocobalamin was divided by the total amount of protein in the eluate of the affinity column to calculate the specific binding capacity. The elution profile of the Sephacryl S 200 column is given in figure 5.2. The specific binding capacity was 16.3  $\mu\text{g}$  vitamin B<sub>12</sub>/mg protein, which suggests a purity of about 50%. Further purification was carried out with DEAE-Sephacryl CL-6B ion exchange chromatography and the elution profile with a linear salt

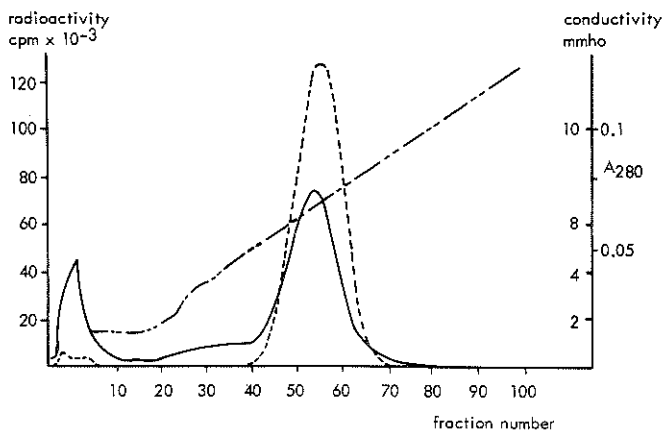


fig. 5.3. Elution pattern of the first DEAE-sepharose CL-6B column. The column (0.9 x 4 cm) was equilibrated with 50 mM Tris/HCl pH 8.25 and elution took place with a linear salt gradient from 0 to 225 mM NaCl with a volume of 200 ml. ———, A<sub>280</sub>; - - - - - <sup>57</sup>Co-radioactivity; - · - · - ·, conductivity. Fraction volume was 2 ml and the elution velocity was 15.8 ml/hour.

gradient is presented in figure 5.3. The shoulder of non-TC II protein before the TC II peak was eliminated by DEAE-Sephacrose chromatography with a concave salt gradient (figure 5.4). Measurement of protein and vitamin B<sub>12</sub> in the final product gave a specific binding activity of 34.8 µg/mg or 0.98 mole CN-Cbl per mole TC II (molecular weight TC II 38 000), which means that the preparation was almost pure. The purification factor was  $1.1 \times 10^6$  with a yield of 55%. A summary of the results of the purification procedure is given in table 5.1.

Table 5.1. Purification of human transcobalamin II-cyanocobalamin

step of purification	volume (ml)	total protein (mg)	total CN-Cbl- binding capac. ( $\mu\text{g}$ )	specific binding ( $\mu\text{g}/\text{mg}$ )	CN-Cbl- capacity (mol/mol)	purification factor	yield (%)
Cohn fraction III (solubilized)	95000	$5.36 \times 10^6$	170	$3.17 \times 10^{-5}$	$8.9 \times 10^{-7}$	1	100
CM-Sephadex batchwise elution	3300	$0.27 \times 10^6$	153	$5.66 \times 10^{-7}$	$0.16 \times 10^{-4}$	18	90
affinity chromatography on CN-Cbl-Sepharose	11.4	31	120	3.87	0.108	$1.22 \times 10^5$	71
Sephacryl S200 gel filtration	7.1	5.84	95.2	16.3	0.46	$5.14 \times 10^5$	56
DEAE-Sepharose CL-6B linear gradient	6.9	3.93	91.0	23.2	0.65	$7.32 \times 10^5$	54
DEAE-Sepharose CL-6B concave gradient	9.0	2.67	93.0	34.8	0.98	$1.10 \times 10^6$	55

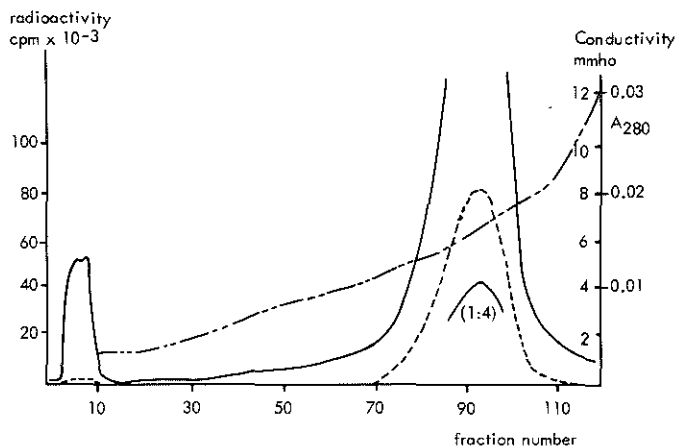


fig. 5.4. Elution pattern of the second DEAE-sepharose CL-6B column. The column (0.9 x 4 cm) was equilibrated with 50 mM Tris/HCl pH 8.25 and elution took place with a concave gradient from 0 to 150 mM NaCl with a total volume of 200 ml. —, A<sub>280</sub>; -----, <sup>57</sup>Co-radioactivity; -·-·-·-, conductivity. Fraction volume was 2.0 ml and the elution velocity 15.2 ml/hour.

#### 5.4.3. Characterization of the purified transcobalamin II.

The pure transcobalamin II-CN-Cbl was subjected to dodecyl sulphate polyacrylamide gel electrophoresis under reducing and non-reducing conditions (figure 5.5). In electrophoresis without a reducing agent a single major band was observed at a molecular weight of 37 000 and a faint band, less than 5% in densitometric analysis, with a molecular weight of about 29 000, even if as much as 75 µg TC II was applied. The incubation with 1% β-mercaptoethanol, 10 mM or 50 mM dithiothreitol resulted in a 50% decrease of 37 000 molecular weight material, an increase of the 29 000 band, and the appearance of some faint bands at 24 000, 18 000

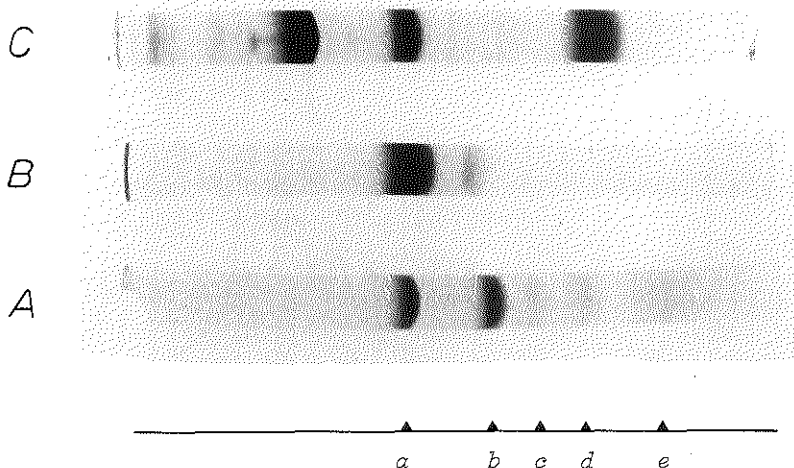


fig. 5.5. Dodecyl sulphate polyacrylamide gel electrophoresis of 12.5  $\mu\text{g}$  of transcobalamin II (A and B) and of a mixture of albumin, aldolase and myoglobin (C, 10  $\mu\text{g}$  each). Preparation and electrophoresis of the samples in A and C were carried out in the presence of 50 mM dithiotreitol. The characters a, b, c, d, and e refer to fig. 5.6 in which the relative mobilities are used for the calculation of the molecular weights.

and 13 000. The molecular weights were estimated by comparison with three marker proteins (figure 5.6). From these data it is concluded that about 50% of the TC II dissociates into smaller subunits under reducing conditions. Electrophoresis patterns were not different whether preincubation was carried out for 2 hours at 37°C or for 3 min at 100°C.

Polyacrylamide gel isoelectric focusing of the pure TC II-CN-Cbl was initially not successful, because the protein precipitated during the procedure even before it had reached the area of its isoelectric point. This was probably a result of the poor solubility of TC II at low ionic strength. The addition of 1% Triton X-100 improved the solubility. Figure 5.7 shows an IEF-pattern of the pure TC II preparation



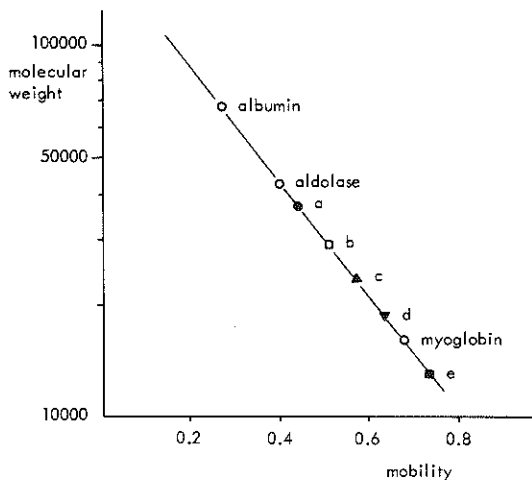


fig. 5.6. Plot of the molecular weights of the three marker proteins versus their relative mobilities on dodecyl sulphate polyacrylamide gel electrophoresis (figure 5.5). The characters a,b,c,d and e represent the different polypeptide chains in the TC II preparations: a, 37 000; b, 29 000; c, 24 000; d, 18 000; e, 13 000 molecular weight.

in a pH gradient from 4.9 to 7.4. The protein is concentrated in an area from pH 6.2 to pH 6.8, in which at least two double bands around pH 6.30 and 6.45 are visible.

#### 5.4.4. <sup>125</sup>I-labeling of the isolated transcobalamin II-cyanocobalamin.

Portions of 30 µg pure TC II were labeled with <sup>125</sup>I with the use of immobilized lactoperoxidase. After the incubation the labeled protein and the other constituents were separated by gel filtration on Sephadex G-75. A representative elution pattern is shown in figure 5.8.

The symmetrical radioactivity peak completely coincided

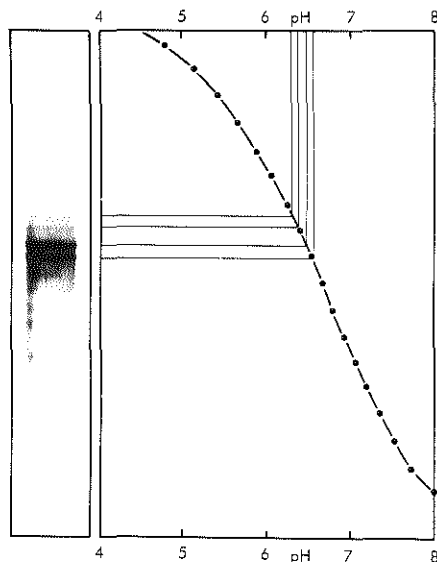


fig. 5.7. Polyacrylamide gel isoelectric focusing of 45  $\mu\text{g}$  of pure TC II. The diagram indicates the course of the pH over the gradient from anode to cathode.

with the light absorption peak at 280 nm around fraction 32 and the elution volume was the same as for TC II- $^{57}\text{Co}$  CN-Cbl. This indicates that the molecular weight did not change by the labeling procedure.

A further control of the integrity of the labeled protein was performed by means of ion exchange chromatography. A small amount of  $^{125}\text{I}$  TC II-CN-Cbl and about the same amount of partially purified TC II- $^{57}\text{Co}$  CN-Cbl were mixed and separated on a DEAE-Sepharose column with a linear salt gradient. The elution pattern is shown in figure 5.9. Both peaks of radioactivity were eluted at exactly the same salt concentration, which indicates that the labeling procedure did not cause a significant change of the isoelectric point. The most important characteristic of the labeled protein, its function in the cellular uptake of vitamin B<sub>12</sub>, is analysed in the following chapter.

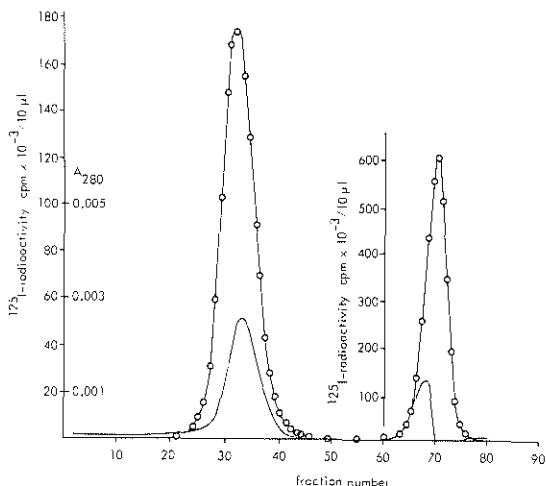


fig. 5.8. Separation of  $^{125}\text{I}$ -labeled TC II-CN-Cbl and free  $[^{125}\text{I}]\text{NaI}$  by gel filtration on a Sephadex G 75 column (1.6x65 cm). Elution buffer was 20 mM sodium phosphate, 1 M NaCl, pH 7.4.  $\circ$ — $\circ$   $^{125}\text{I}$ -radioactivity; —  $A_{280}$ . Fraction volume was 1.8 ml and the elution velocity was 25 ml/h.

### 5.5. Discussion.

Purification of transcobalamin II with conventional methods is unsatisfactory, because it is almost impossible to obtain a fair yield of the pure product. The affinity chromatography technique described by Allen and Majerus (13), gave better recovery and has made the characterization of the purified material possible. This method has the disadvantage that it requires strong protein denaturation for a rather long time, which may inactivate the transcobalamin. Weiss et al. (14) e.g. have reported that human intrinsic factor, which was purified by the method of Allen et al. (13) had a decreased affinity for the intestinal receptor, and denaturation of cobalophilin with this method

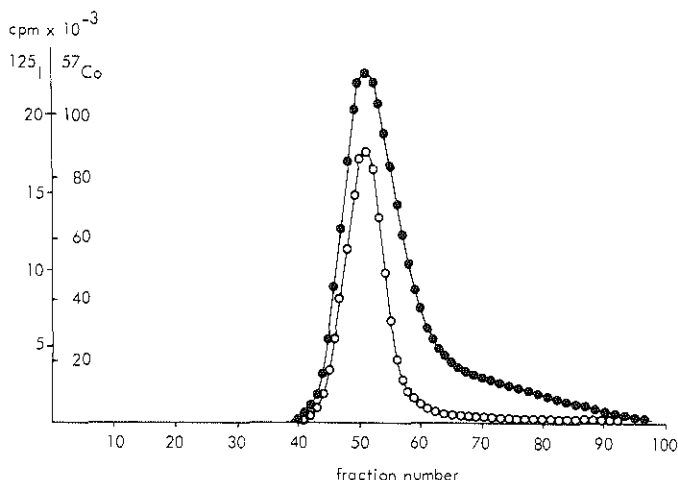


Fig. 5.9. Elution profile of a mixture of equal amounts of partially purified TC II- $[^{57}\text{Co}]$  CN-Cbl and  $[^{125}\text{I}]$  TC II-CN-Cbl on DEAE-Sepharose CL-6B (bed volume 2.5 ml). Elution was carried out with a linear gradient from 50 mM Tris, pH 8.25 to 50 mM Tris, 225 mM NaCl, pH 8.25. Fraction volume was 2 ml and the elution velocity was 16 ml/h. ●—●  $^{57}\text{Co}$ -radioactivity; ○—○  $^{125}\text{I}$ -radioactivity.

was suggested by Stenman (15).

Nexø (1) has described an easier and more gentle affinity chromatography method for the purification of intrinsic factor and cobalophilins, in which OH-cobalamin is attached to immobilized 3.3'-diaminodipropylamine by a thermolabile linkage. When unsaturated serum is applied to such a column, only the vitamin B<sub>12</sub>-binding proteins are retained and eluted as saturated binding proteins from the column at 37°C. Initially we tried this method for the isolation of transcobalamin II from rat plasma. However, in the eluate of the affinity column only a very small fraction of the protein-bound OH-Cbl was coupled to TC II. Therefore, we investigated the possibility to incorporate CN-Cbl, which

shows less non-specific binding, in the affinity column.

Direct incorporation proved to be impossible because CN-Cbl has no affinity for the 3.3'-diaminodipropylamine molecule. However, we observed that the OH-Cbl, when attached to the insoluble matrix, could be converted to CN-Cbl, by rinsing with a buffer containing cyanide, without losing the thermolabile linkage. Non-specific binding was completely absent because no other vitamin B<sub>12</sub>-binding proteins than TC II were detectable in the 37°C eluate.

A further simplification of the method of Nexø was the coupling of OH-Cbl directly to AH-Sepharose instead of to the 3.3'-diaminodipropylamine-substituted CN-Br-Sepharose.

Human transcobalamin II was purified from Cohn fraction III to homogeneity by CM-Sephadex ion exchange chromatography, affinity chromatography, gel filtration and DEAE ion exchange chromatography, successively. The use of isoelectric precipitation for the final purification, reported by Savage et al. (16), appeared to be irreproducible. Excellent separation of TC II from contaminating proteins was obtained with the Sephacryl S-200 column. Another important improvement in the yield of the overall procedure was the use of Amicon YM-10 ultrafiltration membrane for which TC II has only very low affinity in contrast to UM or PM-type membranes.

The final product was virtually pure on the basis of the specific binding activity, calculated to be 0.98 mol CN-Cbl/mol TC II. A slightly lower specific binding activity, 0.87 mol CN-Cbl/mol TC II was obtained when the amount of CN-Cbl in the final preparation was calculated on the basis of the specific radioactivity of the OH-Cbl solution, which was used for the preparation of the affinity column. A possible explanation for this small difference is, that the [<sup>57</sup>Co] OH-Cbl, as a result of the conversion with light in an acid environment, contained derivatives, which adhered to the AH-Sepharose but had lost their binding affinity for the TC II molecule.

The purity of the material was further established by means of dodecyl sulphate polyacrylamide gel electrophoresis. The small protein band at a molecular weight of 29 000 does not seem to be a contamination but rather a sub-fraction of TC II, because this band intensified considerably when preincubation and electrophoresis were carried out in the presence of reducing agents. In addition components with molecular weights of 24 000, 18 000 and 13 000 appeared. This suggests that our preparation contained a mixture of TC II as a single polypeptide chain with a molecular weight of 37 000, and of TC II composed of two separate polypeptide chains with molecular weights of either 29 000 and 13 000 or 24 000 and 18 000. Similar observations were described by Allen et al. (13,17), who concluded that native TC II is a single polypeptide chain and that the smaller polypeptide chains had been formed by an internal cleavage. We have tried to determine, whether proteolysis during the purification had caused the formation of the smaller fragments. However, the electrophoresis of a TC II-preparation, which was purified in the presence of diisopropylfluorophosphate in order to prevent proteolysis, gave exactly the same results. Therefore, whenever the formation of the smaller polypeptide chains was due to proteolysis this must have taken place before the purification.

Polyacrylamide gel isoelectric focusing of pure TC II is extremely difficult because of the strong tendency of TC II to precipitate at low ionic strength. Recently Marcoulis et al. reported that they were unable to establish a typical electrofocusing pattern in a sucrose gradient (18). In our experience the solubility in the gel could be improved best by the addition of Triton X-100. TC II concentrated in a rather broad area between pH 6.2 and 6.8 in at least four discernable protein bands. These protein bands may represent TC II molecules in the different polypeptide chain configurations, which were demonstrated in the dodecyl

sulphate polyacrylamide gel electrophoresis, but another explanation is the occurrence of isoprotein forms. Genetic polymorphism of transcobalamin II has been reported by Frater-Schröder et al. (19) and by Daiger (20). Because there is evidence that TC II is synthesized by different tissues (21,22) it is tempting to speculate that these tissues produce slightly different TC II molecules.

#### 5.6. References.

1. Nexø, E. A new principle in biospecific affinity chromatography used for purification of cobalamin-binding proteins. (1975). *Biochim. Biophys. Acta.*, 379, 189-192.
2. Nexø, E., Olesen, H., Bucher, D. and Thomson, J. Purification and characterization of rabbit transcobalamin II. (1977). *Biochim. Biophys. Acta.*, 494, 395-402.
3. Bauriedel, W.R., Picken, J.C. und Underkofler, L.A. Reactions of cyanocobalamin and aquocobalamin with proteins. (1956). *Proc. Soc. Exp. Biol. Med.*, 91, 377-381.
4. Taylor, R.T. and Hanna, M.L. Binding of cyanocobalamin to the histidine residues in bovine serum albumin. (1970). *Arch. Biochem. Biophys.*, 141, 247-257.
5. Heathkote, J.G., Moxon, G.M. and Slifkin, M.A. Ultra-violet, visible and infrared spectroscopic studies of the interaction of hydroxocobalamin with  $\alpha$ -amino acids and peptides. (1971). *Spectrochimica Acta*, 27, 1391-1407.
6. Lien, E.L. and Wood, J.M. The specificity of aquocobalamin binding to bovine serum albumin. (1972). *Biochim. Biophys. Acta.*, 264, 530-537.
7. Mahoney, M.J. and Rosenberg, L.E. Synthesis of cobalamin coenzymes by human cells in tissue culture. (1971). *J. Lab. Clin. Med.*, 78, 302-308.
8. Lakshmanan, T.K. and Lieberman, S. An improved method of gradient elution chromatography and its application to the separation of urinary ketosteroids. (1954). *Arch. Biochem. Biophys.*, 258-281.
9. Lowry, O.H., Rosebrough, N.J., Farr, A.L. and Randall, R.J. Protein measurement with the folin phenol reagent. (1951). *J. Biol. Chem.*, 193, 265-275.
10. Fairbanks, G., Steck, Th.L. and Wallach, D.F.H. Electrophoretic analysis of the major polypeptides of the human erythrocyte membrane. (1971). *Biochemistry*, 10, 2606-2617.

11. Vesterberg, O. Isoelectric focusing of proteins in polyacrylamide gels. (1972). *Biochim. Biophys. Acta*, 257, 11-19.
12. David, G.S. Solid state lactoperoxidase: a highly stable enzyme for simple, gentle iodination of proteins. (1972). *Biochem. Biophys. Res. Commun.*, 48, 464-471.
13. Allen, R.H. and Majerus, P.W. Isolation of vitamin B12-binding proteins using affinity chromatography. III. Purification and properties of human plasma transcobalamin II. (1972). *J. Biol. Chem.*, 247, 7709-7717.
14. Weiss, J.P., Rothenberg, S.P. and Cotter, R. Alteration of human intrinsic factor during affinity chromatography purification using concentrated guanidine. (1977). *FEBS letters*, 78, 275-278.
15. Stenman, U.-H. Characterization of R-type vitamin B12-binding proteins by isoelectric focusing. II. Comparison of cobalophilin (R-proteins) from different sources. (1975). *Scand. J. Clin. Lab. Invest.*, 35, 147-155.
16. Savage, C.R. Jr., Meehan, A.M. and Hall, C.A. Improved method for the purification of biologically active transcobalamin II. (1976). *Prep. Biochem.*, 6, 99-111.
17. Allen, R.H. Human vitamin B12 transport proteins. (1975). *Progress in Hematology*, 9, 57-84.
18. Marcoullis, G., Salonen, E.M. and Gräsbeck, R. Isolation of vitamin B12-binding proteins by combined immuno and affinity chromatography. Comparative studies on the isolated and unisolated proteins. (1977). *Biochim. Biophys. Acta*, 495, 336-348.
19. Frater-Schröder, M., Vitins, P., Hitzig, W.H. and Häkkinen, A.K. Studies on transcobalamin (TC): quantitation of TC II, comparison of an electrophoretic with an immunological assay of TC II in human serum. Abstract "6th Meeting of Europ. Soc. Pediatr. Haematol. and Immunol. 1977.
20. Daiger, S.P., Labowe, M.L., Parsons, M., Wang, L. and Cavalli-Sforza, L.L. Detection of genetic variation with radioactive ligands. III. Genetic polymorphism of transcobalamin II in human plasma. (1978). *Am. J. Hum. Genet.*, 30, 202-214.
21. Tan, C.H. and Hansen, H.J. Studies on the site of synthesis of transcobalamin II. (1968). *Proc. Soc. Exp. Biol. Med.*, 127, 740-744.
22. Rachmilewitz, B., Rachmilewitz, M., Chaoual, M. and Schlesinger, M. The synthesis of transcobalamin II, a vitamin B12 transport protein, by stimulated mouse peritoneal macrophages. (1977). *Biomedicine*, 27, 213-214.



**BINDING, UPTAKE AND DEGRADATION OF  $[^{125}\text{I}]$  TRANSCOBALAMIN II-CYANOCOBALAMIN BY ISOLATED RAT LIVER CELLS AND THE PERFUSED RAT LIVER**

6.1. Summary.

Isolated rat liver parenchymal cells were incubated with human TC II-CN-Cbl, which had been purified to homogeneity by means of affinity chromatography and enzymatically labeled with radio-iodine. The binding and uptake followed the same biphasic pattern as the binding and uptake of TC II- $[^{57}\text{Co}]$  CN-Cbl, i.e. a steep rise of cell bound radioactivity in the first few minutes, and a continuous temperature dependent increase in the following two hours. These steps are interpreted as a rapid binding of the complex to the outer cell membrane and a gradual entrance of the complex into the cell. With a lag of about 15 min acid-soluble radioactive material appeared in the medium as a result of intracellular proteolysis of TC II and increased linearly during the next two hours of incubation to about 1.5 times the amount of radioactive TC II inside the cell. The rate of uptake, i.e. the increase with time of intracellular radioactivity plus degradation of TC II, as a function of the extracellular concentration of TC II-CN-Cbl showed a partial saturability. Addition of 10 nM unlabeled pure TC II-CN-Cbl led to a suppression of the saturable component of the uptake. After correction of the total uptake for these non-specific components, a curve of specific saturable uptake was obtained. The uptake of human  $[^{125}\text{I}]$  TC II-CN-Cbl was suppressed by purified rat TC II-CN-Cbl indicating that human and rat TC II compete for the same binding sites on the cell surface. Binding and uptake of human  $[^{125}\text{I}]$  TC II-CN-Cbl were not affected by EDTA or EGTA. The lysosomotropic agent chloroquine reduced the degradation

of TC II and consequently caused an accumulation of radioactive TC II within the cell. In additional studies using liver perfusion the uptake and degradation of TC II were quantitatively and qualitatively similar to the uptake and degradation by liver cells incubated in suspension.

## 6.2. Introduction.

The results described in chapter 4 suggested that TC II-vitamin B<sub>12</sub> is taken up by the liver cell by a pinocytotic mechanism and subsequent inclusion in the lysosomal system. Especially the experiments with the lysosomotropic agent chloroquine made it likely that proteolysis of TC II is a prerequisite for the normal intracellular transport of vitamin B<sub>12</sub>. In this chapter experiments are described which were designed to find additional evidence for this proteolytic process. For this purpose isolated liver cells and the perfused rat liver were incubated with <sup>125</sup>I-labeled TC II and the binding, uptake and degradation of TC II degradation products have been measured.

## 6.3. Methods.

### 6.3.1. Preparation of the liver cell suspension.

Liver parenchymal cells were isolated as described in section 2.4. The cells were washed and finally suspended in DMEM in a concentration of  $3.6 \times 10^6$ /ml. All glassware was siliconized.

### 6.3.2. Preparation of human [ $^{125}\text{I}$ ] TC II-CN-Cbl and rat TC II-CN-Cbl.

Purification and  $^{125}\text{I}$ -labeling of human TC II-CN-Cbl have been described in chapter 5. It was established that the  $^{125}\text{I}$ -labeled product did not differ from partially purified TC II- $^{57}\text{Co}$  CN-Cbl in gel filtration and ion exchange chromatography.

Rat TC II was partially purified by means of affinity chromatography. 300 ml rat serum was centrifuged for 1 hr at 105 000 x g and applied to a CN-Cbl-Sepharose column, which was prepared by incubation of 1 g AH-Sepharose 4B with 5  $\mu\text{g}$  OH-Cbl and converted to CN-Cbl-Sepharose as described in section 5.3.1. TC II was eluted at 37°C in 15 ml 20 mM sodium phosphate, 1 M NaCl, pH 7.4 and bovine serum albumin was added to a concentration of 4 mg/ml. The total solution was dialysed for 72 hours against 3 x 1 l DMEM at 4°C, centrifuged for 1 hour at 105 000 x g and the CN-Cbl concentration in the supernatant was determined by radio-assay. The purification factor was estimated to be about  $6 \times 10^4$ , analogous to the affinity chromatography step in the purification of human TC II. The yield of TC II-CN-Cbl in the final product was 96%.

### 6.3.3. Standard incubation procedure.

The standard incubation was identical with the procedure described in section 4.3.3 with the exception that in the present experiments [ $^{125}\text{I}$ ] TC II-CN-Cbl was used.

Degradation of TC II was judged by the appearance of acid soluble material in the medium and the cells. During the incubation of [ $^{125}\text{I}$ ] TC II-CN-Cbl with the cells, duplicate 0.5 ml samples were taken and centrifuged through silicon oil as described (section 2.5). 0.2 ml aliquots of

the supernatant were mixed with 0.3 ml 3.3% bovine serum albumin and 0.5 ml 20% perchloric acid. After incubation for 30 min at 4°C the precipitate was removed by centrifugation for 2 min at 8 000 x g and 0.8 ml supernatant was removed and counted. Blank values were obtained by incubations of [ $^{125}\text{I}$ ] TC II-CN-Cbl without cells under the same conditions. Degradation of TC II was defined as the difference between the amount of acid soluble radioactivity at any time of incubation and the corresponding blank value. The intracellular degradation products were determined by measuring the radioactivity in 0.05 ml aliquots of the perchloric acid layer of the silicon oil centrifugation tubes. In general these values were low and negligible.

#### 6.3.4. Liver perfusion.

Perfusion of rat livers was performed in situ at 37°C under initial ether anesthesia. The cannulation of the portal vein and the inferior vena cava was carried out as described in 2.4. Before insertion of the perfusion cannulas the main bile duct was cannulated with a Braunule OG20. The liver was first perfused with about 200 ml DMEM with 0.09% human serum albumin to wash out the blood and then the perfusate was changed to DMEM with 0.09% human serum albumin and 450 pM [ $^{125}\text{I}$ ] TC II-CN-Cbl. The recirculating extracorporeal perfusion volume was 100 ml, from which 2 ml samples were taken at 5, 15, 30, 60, 90 and 120 min for determination of the total amount of radioactivity and the amount of acid soluble  $^{125}\text{I}$ -radioactivity. Biliary excretion of radioactivity was determined in bile samples, collected over 30 min periods. At the end of the perfusion the liver was rinsed with fresh TC II-CN-Cbl free perfusate, excised and the total radioactivity in the liver was measured.

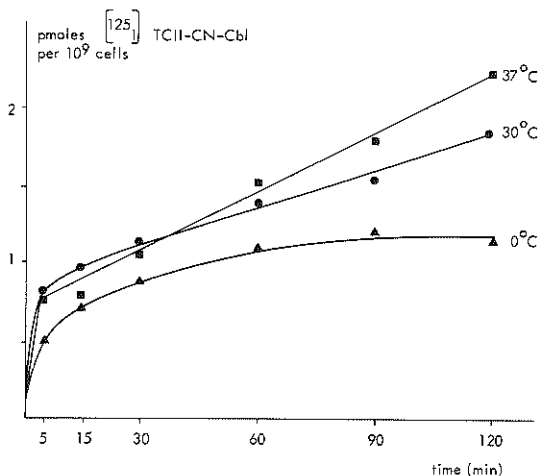


fig. 6.1. Binding and uptake of  $[^{125}\text{I}]$ TC II-CN-Cbl by isolated liver parenchymal cells at three different temperatures. The concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl was 320 pM. The points are the mean of duplicate measurements.

#### 6.4. Results.

##### 6.4.1. Binding, uptake and degradation by isolated liver cells.

The studies on binding and uptake of  $[^{125}\text{I}]$ TC II-CN-Cbl by isolated rat liver parenchymal cells showed a rapid binding to the surface of the cells in the first few minutes of the incubation, and a gradual temperature dependent uptake in the following two hours (figure 6.1). The distinction between binding and uptake was made on the basis of the biphasic nature of the time dependent uptake as described in section 4.4.1. At  $0^\circ\text{C}$  the initial increase in the cell-associated radioactivity was less rapid and the binding seemed to go to completion in the next 60 min.

The production of acid soluble material at the three different temperatures, illustrated in figure 6.2, started

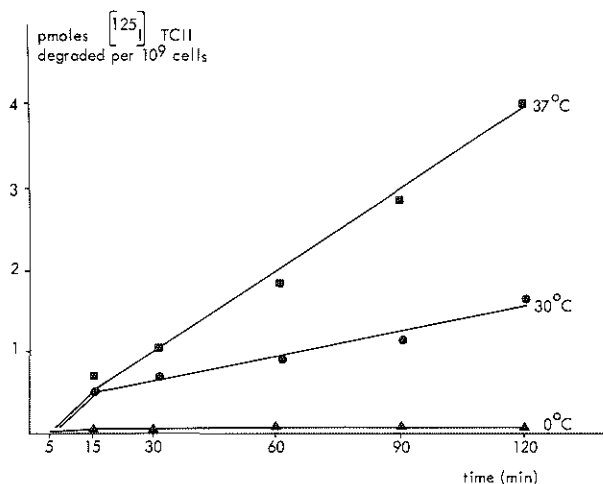


fig. 6.2. Degradation of  $[^{125}\text{I}]$ TC II-CN-Cbl by isolated liver parenchymal cells at three different temperatures. The concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl was 320 pM. The points are the mean of duplicate measurements.

between 5 and 15 min of incubation and continued in a linear fashion for the next two hours, at least at 30°C and 37°C. At 0°C no production of acid soluble material was observed. From this experiment it can be calculated that at 37°C about 75% of the TC II taken up by the cells is degraded during the two hours of incubation and secreted as acid soluble material.

$[^{125}\text{I}]$ TC II-CN-Cbl incubated in medium without cells remained completely intact as is demonstrated in figure 6.3. By incubation with a cell homogenate, which was obtained by sonication of an amount of cells equal to the standard incubation, no acid soluble material was formed at the normal pH 7.4, whereas at pH 5.6 TC II was degraded rapidly. With the cell homogenate free lysosomal proteolytic enzymes are introduced in the incubation mixture, but these enzymes have an acid pH optimum and are inactive at pH 7.4. Therefore the

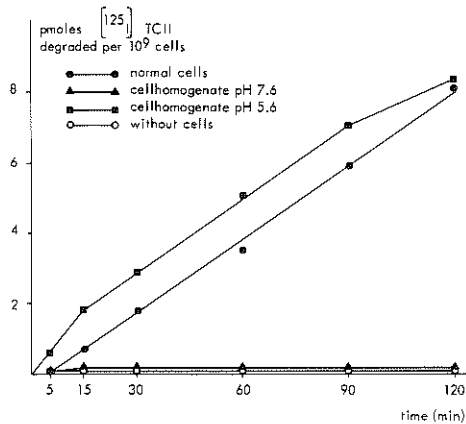


fig. 6.3. Degradation of  $[^{125}\text{I}]$ TC II under various circumstances measured by the appearance of acid soluble material in duplicate samples of the medium. The  $[^{125}\text{I}]$ TC II-CN-Cbl concentration was 730 pM.

absence of acid soluble material in the incubations without cells or with disrupted cells at pH 7.4 indicates that in the normal incubations no other factors than the intact viable cells are responsible for the observed degradation.

#### 6.4.2. Uptake and degradation by the perfused liver.

The uptake and degradation of  $[^{125}\text{I}]$ TC II-CN-Cbl by the perfused liver are summarized in figure 6.4. Perfusions were carried out with 10 mM  $\text{NH}_4\text{Cl}$ , with 2.5 mM iodoacetamide or without special additives.  $\text{NH}_4\text{Cl}$  has an inhibiting effect on lysosomal proteolysis by way of an increase in the intralysosomal pH (1), whereas iodoacetamide causes a non-selective, irreversible inactivation of enzymes with essential SH-groups (2). The production of acid soluble material was measured with 30 min intervals and the liver radioactivity

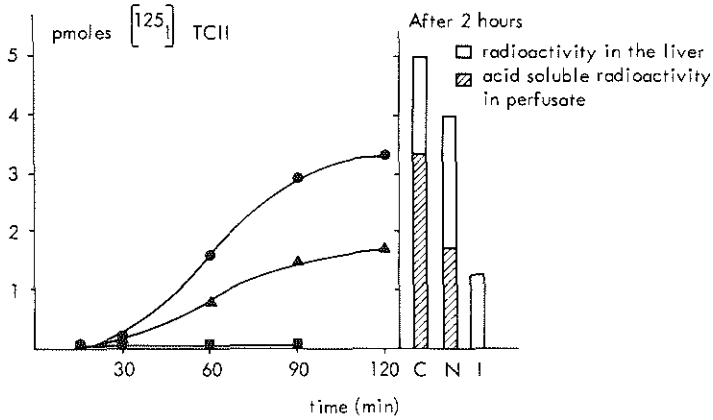


fig. 6.4. Degradation and uptake of  $[^{125}\text{I}]$ TC II-CN-Cbl by perfused rat livers. On the left side the increase in acid soluble material in the perfusate is plotted versus the time of perfusion: ●—●, control; ▲—▲, with 10 mM  $\text{NH}_4\text{Cl}$ ; ■—■, with 2.5 mM iodoacetamide. On the right the distribution of radioactivity in the liver and the acid soluble radioactivity in the perfusate at 120 min is illustrated. C: control cells, N:  $\text{NH}_4\text{Cl}$  and I: iodoacetamide.

was measured after 120 min of perfusion.

In the control experiment the degradation was about twice the amount of radioactivity in the liver at 120 min.  $\text{NH}_4\text{Cl}$  caused a decrease in the production of acid soluble material and an accumulation of intracellular radioactivity, but the total amount of processed TC II was 20% less.

In the presence of iodoacetamide no degradation occurred within 90 min, after which the perfusion had to be discontinued, because of extensive leakage of the liver tissue. There was little difference in the amount of liver radioactivity in comparison with the control experiment.



Assuming that the total liver contains about  $9 \times 10^8$  parenchymal cells the uptake in the perfusion experiment was about  $1.8 \text{ pmoles}/10^9$  cells, whereas the degradation was about  $3.6 \text{ pmoles}/10^9$  cells. In comparison with similar data obtained with isolated liver cells ( $6.4 \text{ pmoles}/10^9$  cells for binding, uptake and degradation at  $400 \text{ pM}$  [ $^{125}\text{I}$ ] TC II-CN-Cbl) the values are of the same order of magnitude.

The excretion of  $^{125}\text{I}$ -activity in the bile was low,  $0.1 \text{ pmole}$  in the control experiment,  $0.05 \text{ pmole}$  in the presence of  $\text{NH}_4\text{Cl}$  and  $0.005 \text{ pmole}$  with iodoacetamide. With iodoacetamide the bile production stopped after 60 min.

#### 6.4.3. Binding, uptake and degradation in relation to the concentration of TC II-vitamin B<sub>12</sub>.

The competitive effect of unlabeled partially purified rat TC II-CN-Cbl on [ $^{125}\text{I}$ ] TC II-CN-Cbl at a concentration of  $420 \text{ pM}$  was studied (figure 6.5) and it was demonstrated that with  $5 \text{ nM}$  unlabeled rat TC II-CN-Cbl [ $^{125}\text{I}$ ] TC II-CN-Cbl binding was depressed to zero, the uptake to 45% and the degradation to 67% of the original level. This suggests either a relatively high level of non-specific uptake of [ $^{125}\text{I}$ ] TC II at this [ $^{125}\text{I}$ ] TC II-CN-Cbl concentration or a partial competition between human [ $^{125}\text{I}$ ] TC II-CN-Cbl and rat TC II-CN-Cbl.

To discriminate between these two possibilities a second experiment was carried out in which the competition between human [ $^{125}\text{I}$ ] TC II-CN-Cbl and unlabeled human TC II-CN-Cbl was investigated. The unlabeled TC II was purified by affinity chromatography on CN-Cbl-Sepharose, as described in chapter 5, starting with the CM-Sephadex eluate from Cohn fraction III. In this experiment several concentrations of [ $^{125}\text{I}$ ] TC II-CN-Cbl in the range from  $100\text{-}700 \text{ pM}$  were added to the liver cells with and without  $10 \text{ nM}$  unlabeled TC II-CN-

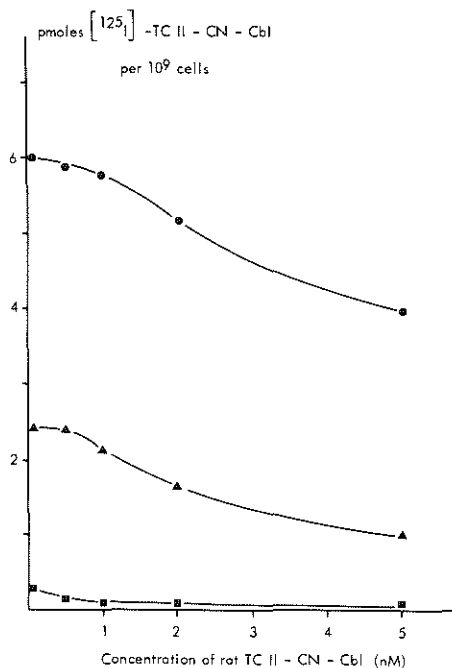


fig. 6.5. The competitive effect of unlabeled rat TC II-CN-Cbl on the binding, uptake and degradation of human  $[^{125}\text{I}]$ TC II-CN-Cbl. The concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl was 420 pM. ■—■, binding to the cell surface; ▲—▲, total cell-bound  $[^{125}\text{I}]$ TC II at 120 min and ●—●, total amount of acid soluble  $^{125}\text{I}$ -radioactivity at 120 min.

Cbl, similar to the experiments in section 4.4.1.

Figures 6.6 and 6.7 show binding and uptake plus degradation of  $[^{125}\text{I}]$ TC II-CN-Cbl in the two different series of incubations at four concentrations of  $[^{125}\text{I}]$ TC II. The rate of uptake plus degradation was calculated from the slope of the linear part of the curves. When these rates were plotted against the concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl the rate of uptake plus degradation in the absence of unlabeled human TC II appeared to be partially saturable (fig. 6.8).

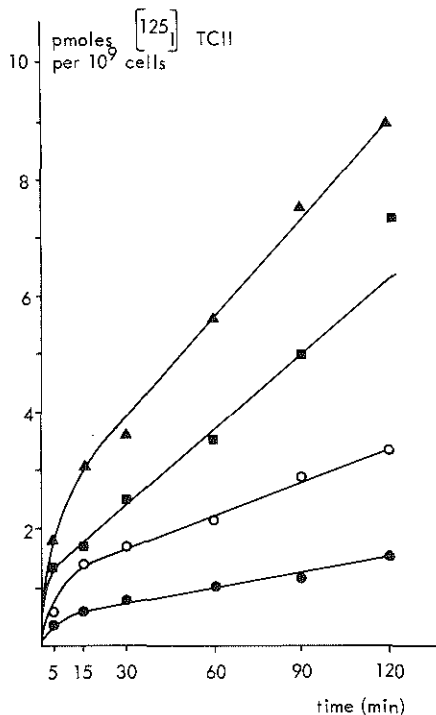


fig. 6.6. Effect of concentration of  $[^{125}\text{I}]$  TC II-CN-Cbl on the binding and uptake plus degradation of  $[^{125}\text{I}]$  TC II by liver cells; ●—●, 95 pM; ○—○, 200 pM; ■—■, 400 pM and ▲—▲, 600 pM.

The uptake plus degradation in the presence of unlabeled human TC II was not saturable and increased linearly with time. The conclusion from these data is that the observed uptake plus degradation is the sum of a specific and a non-specific process. The non-specific component is measured in the presence of unlabeled TC II and the specific component is calculated by subtraction of the non-specific from the total uptake plus degradation. The specific uptake plus degradation became saturated at a level of 1.2 pmole/ $10^9$  cells at a concentration of about 500 pM  $[^{125}\text{I}]$  TC II-CN-Cbl. Half-maximal uptake plus degradation occurred at a

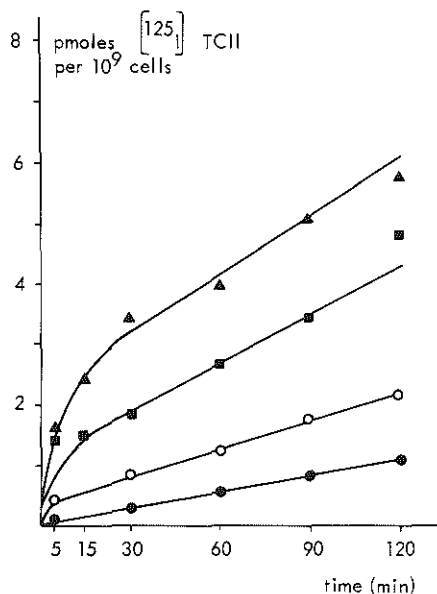


fig. 6.7. Effect of the concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl on the binding and uptake plus degradation of  $[^{125}\text{I}]$ TC II by liver cells in the presence of 10 nM pure human TC II-CN-Cbl. ●—●, 95 pM; ○—○, 200 pM; ■—■, 400 pM and ▲—▲, 600 pM.

concentration of 220 pM. When the kinetics of the binding of  $[^{125}\text{I}]$ TC II-CN-Cbl were analysed a similar procedure was followed. The binding in the absence of unlabeled TC II-CN-Cbl seemed to be partially saturable and the binding in the presence of TC II-CN-Cbl was a linear function of the concentration. By subtraction of the binding in the presence of unlabeled TC II a curve of saturable specific binding was obtained (figure 6.9). Half-maximal binding was reached at a concentration of about 130 pM.

When the competitive effect of 10 nM human TC II at 400 pM  $[^{125}\text{I}]$ TC II-CN-Cbl is compared with the competitive effect of 5 nM rat TC II-CN-Cbl (figure 6.6), the conclusion seems to be justified that there is no essential difference between human and rat TC II with regard to the affinity for the

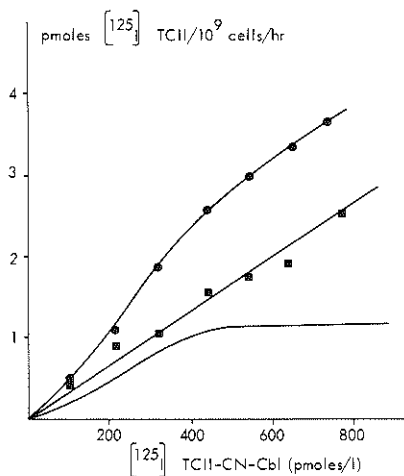


fig. 6.8. The rate of uptake plus degradation of  $[^{125}\text{I}]$  TC II-CN-Cbl, represented by the slope of the linear part of the curves in the figures 6.6 and 6.7, as a function of the concentration of  $[^{125}\text{I}]$  TC II-CN-Cbl. ●—●, rate of uptake plus degradation measured in the absence of unlabeled TC II-CN-Cbl; ■—■, rate of uptake plus degradation in the presence of 10 nM unlabeled TC II-CN-Cbl; —, curve of specific uptake plus degradation in dependence of the concentration of  $[^{125}\text{I}]$  TC II-CN-Cbl, obtained by subtraction of the second curve from the first (top) curve.

specific binding sites.

#### 6.4.4. Effects of agents on binding, uptake and degradation.

EDTA and EGTA had no effect on the binding, uptake and degradation of  $[^{125}\text{I}]$ TC II, when studied at about 100 and 600 pM  $[^{125}\text{I}]$ TC II-CN-Cbl. Both chelators were present in a concentration which was 1 mM in excess of the bivalent cations. Colchicine, which is an inhibitor of microtubular function (3), also had no effect on the binding, uptake and

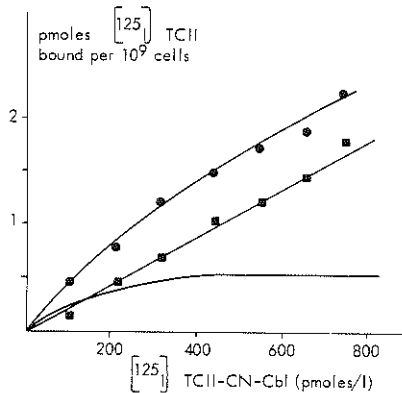


fig. 6.9. The initial binding of  $[^{125}\text{I}]$ TC II-CN-Cbl as a function of the concentration of  $[^{125}\text{I}]$ TC II-CN-Cbl. Measurements were made in the absence (●—●) and in the presence (■—■) of 10 nM unlabeled human TC II-CN-Cbl. A curve of saturable specific binding was obtained by subtraction of the second from the first (top) curve (—).

degradation of TC II-CN-Cbl. Mannose-6-phosphate, a known competitive inhibitor of the uptake process in the secretion-recapture mechanism of lysosomal hydrolases in fibroblasts (4), did not influence the binding, uptake and degradation of TC II. This makes it unlikely that the ligand is recognised by the binding site through a phosphorylated residue on the TC II molecule.

On the contrary, chloroquine inhibited the degradation of  $[^{125}\text{I}]$ TC II and caused a compensatory accumulation of  $[^{125}\text{I}]$ TC II in the cell (figure 6.10). The binding remained unchanged but the degradation was inhibited to about 50% at the concentration of chloroquine used.

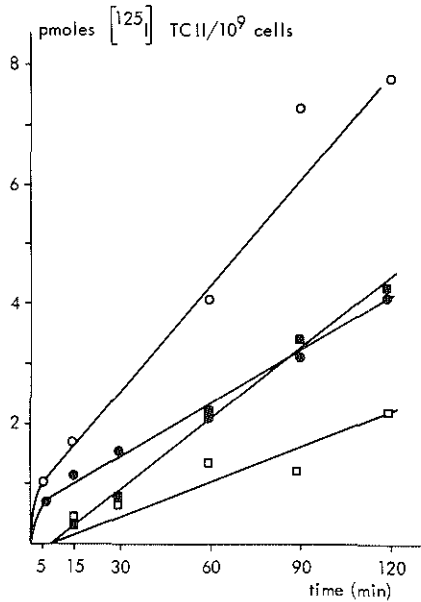


fig. 6.10. Effect of 3.5 mM chloroquine on the binding, uptake and degradation of  $[^{125}\text{I}]$  TC II-CN-Cbl. The concentration of  $[^{125}\text{I}]$  TC II-CN-Cbl was 400 pM. Each point is the mean of duplicate measurements. ●—●, binding and uptake in the control incubation; ■—■, production of acid soluble material by the control cells. ○—○, binding and uptake in the presence of chloroquine; □—□, production of acid soluble material in the presence of chloroquine.

### 6.5. Discussion.

The time course of the binding, uptake and degradation shows that the TC II-Cbl complex enters the cell in a two-phase process, a rapid binding onto the outer cell membrane followed by a slow but steady uptake of the complex into the cell. The binding step is not much influenced by the temperature in contrast to the uptake. The appearance of acid

soluble  $^{125}\text{I}$ -labeled material in the medium indicates that the entered TC II is degraded by proteolytic enzymes in the lysosomes. At  $4^{\circ}\text{C}$  such degradation products were completely absent, which indicates that it is not an elution of the  $^{125}\text{I}$ -label. The possibility of extracellular degradation as a result of the release of the lysosomal enzymes from dead or leaky cells in the medium was excluded by the absence of proteolysis during incubation of  $[\text{}^{125}\text{I}]\text{TC II-Cbl}$  in the presence of sonicated cells at pH 7.4. Proteolysis of TC II only occurred, when the pH of the disrupted cell suspension was lowered to 5-6. It is highly unlikely that extracellular proteolysis occurred in our incubations because the pH was kept well at pH 7.4 during the incubation. The degradation of  $[\text{}^{125}\text{I}]\text{TC II}$  during the incubation is therefore a process which follows the uptake of the complex into the cell. This assumption is supported by the observed effects of  $\text{NH}_4\text{Cl}$  and chloroquine on the uptake and degradation of  $[\text{}^{125}\text{I}]\text{TC II-Cbl}$ . Both chloroquine and  $\text{NH}_4\text{Cl}$  inhibit proteolysis in the lysosomal system presumably by an intralysosomal increase of the pH (1,5). It has been reported that 0.05 mM chloroquine completely inhibits proteolytic degradation of  $[\text{}^{125}\text{I}]\text{TC II}$  (6), low-density lipoprotein (7) and cellular protein (8) in cultured fibroblasts. In our liver cell system 0.05 mM chloroquine had no significant effect on uptake and degradation of TC II, but at 3.5 mM chloroquine degradation of TC II decreased considerably and consequently  $[\text{}^{125}\text{I}]\text{TC II}$  accumulated in the cells. The necessity of high concentrations of chloroquine in an isolated liver cell system has also been reported by Nakai et al. (9) in their studies on the uptake and degradation of  $^{125}\text{I}$ -labeled high-density lipoprotein and by Tolleshaug et al. (10), who obtained about 75% reduction of the degradation of  $^{125}\text{I}$ -labeled asialo-fetuin with 1 mM chloroquine.

Regarding the specificity and saturability of the uptake first the exchangeability of human and rat TC II-CN-



Cbl was investigated. Our experimental results indicated that human and rat TC II-CN-Cbl compete for the same binding sites and for the same mechanism of uptake, but also that a part of the binding and of the uptake is non-competitive. It proved possible to differentiate between competitive and non-competitive binding, uptake and degradation by incubations at various concentrations of  $[^{125}\text{I}]$ TC II-Cbl in the presence and absence of an excess of unlabeled human TC II-CN-Cbl. From the results it was concluded that the rate of competitive uptake was directly dependent on the degree of occupation of the specific binding sites. The difference between the TC II concentrations, at which half-maximal specific binding and uptake plus degradation was reached, 130 pM and 220 pM, is too small to be used as an argument against this conclusion. The non-competitive uptake is probably the result of non-specific, non-saturable binding to the cell membrane, which otherwise does not mean that specifically and non-specifically bound TC II molecules are internalized in different ways.

Some TC II will be taken up without previous membrane binding by bulk fluid endocytosis. The maximum rate of bulk fluid endocytosis observed in cultured fibroblasts was 0.0035% per hour of the administered concentration of marker per  $10^6$  cells (11). Even if the rate of pinocytosis in rat liver cells is much higher than in fibroblasts, it would not be sufficient to explain the observed rates of non-specific uptake. It remains to be established whether or not the non-specific uptake plays an important role in vivo, also in view of the very low concentration of TC II in relation to other plasma proteins.

The studies on the effects of EDTA and EGTA on the binding and uptake confirmed the observations reported in chapters 3 and 4, that calcium is not needed in the different phases of the uptake mechanism. The quantitative data which were obtained with iodinated TC II-CN-Cbl correspond well with the data from similar experiments with TC II- $[^{57}\text{Co}]$ Cbl,

especially after correction for the non-specific processes. The non-specific binding and uptake with [ $^{125}\text{I}$ ]TC II-Cbl were higher than in corresponding experiments with partially purified TC II- $^{57}\text{Co}$ ]CN-Cbl, which may be due to the protein labeling procedure.

In conclusion the data from the binding, uptake and degradation studies are in agreement with the earlier proposed model of adsorptive endocytosis, followed by lysosomal degradation of the transport protein.

#### 6.5. References.

1. Seglen, P.O. and Reith, A. Ammonia inhibition of protein degradation in isolated rat hepatocytes. Quantitative ultrastructural alterations in the lysosomal system. (1976). *Exp. Cell Res.* 100, 276-280.
2. De Bruin, A. Biochemical toxicology of environmental agents. (1976). pp. 901-935, Elsevier, North-Holland Biomedical Press.
3. Bhisey, A.N. and Freed, J.J. Altered movement of endosomes in colchicine-treated cultured macrophages. (1971). *Exp. Cell Res.* 64, 430-438.
4. Kaplan, A., Fischer, D., Achord, D. and Sly, W. Phosphohexosyl recognition is a general characteristic of pinocytosis of lysosomal glycosidases by human fibroblasts. (1977). *J. Clin. Invest.* 60, 1088-1093.
5. De Duve, C.T., De Barry, T., Poole, B., Trouet, A., Tulkens, P. and van Hoof, F. Lysosomotropic agents (1974). *Biochem.pharmacol.* 23, 2495-2531.
6. Younghdahl-Turner, P., Rosenberg, L.E. and Allen, R.H. Binding and uptake of transcobalamin II by human fibroblasts. (1978). *J. Clin. Invest.* 61, 133-141.
7. Goldstein, J.L., Brunschede, G.J. and Brown, M.S. Inhibition of the proteolytic degradation of low-density lipoprotein in human fibroblasts by chloroquine, concanavalin A and Triton WR 1339. (1975). *J. Biol. Chem.* 250, 7854-7862.
8. Wibo, L. and Poole, B. Protein degradation in cultured cells. II The uptake of chloroquine by rat fibroblasts and the inhibition of cellular protein degradation and cathepsin B1. (1974). *J. Cell Biol.* 63, 430-440.
9. Nakai, T., Otto, P.S., Kennedy, D.L. and Whayne, T.F.Jr.

- Rat high-density lipoprotein subfraction (HDL<sub>3</sub>) uptake and catabolism by isolated rat liverparenchymal cells. (1976). J. Biol. Chem. 251, 4914-4921.
10. Tolleshaug, H., Berg, T., Nilsson, M. and Norum, K.R. Uptake and degradation of 125I-labeled asialo-fetuin by isolated rat hepatocytes. (1977). Biochim. Biophys. Acta 499, 73-84.
  11. Steinman, R.M., Silver, J.M. and Cohn, Z.A. Pinocytosis in fibroblasts, Qualitative studies in vitro. (1974). J. Cell Biol. 63, 949-969.



## GENERAL DISCUSSION

The purpose of the investigations described in this thesis was to obtain a comprehensive picture of the vitamin B<sub>12</sub> uptake by the liver cell. This process can be divided into three aspects, the interaction between the transcobalamin II-vitamin B<sub>12</sub> complex and the plasma membrane of the cell, the transport of the vitamin to the inside of the cell and the handling of the vitamin and its transport protein within the cell.

As stated in chapter 3 the high association constant of the TC II-Cbl complex and the rapid clearance of free vitamin B<sub>12</sub> by the kidneys make it very unlikely that significant amounts of free vitamin B<sub>12</sub> are present in the plasma and will be taken up by the cells. The plasma transport protein, transcobalamin II, is indispensable for an efficient uptake. The severe megaloblastic anemia which has been observed in patients with a congenital TC II-deficiency, has confirmed this concept.

Our first efforts were directed to the demonstration of specific binding sites on the plasma membrane of the rat liver. Sucrose-density gradient centrifugation of a liver homogenate fraction, which was rich in plasma membranes, showed that the profile of the TC II-[<sup>57</sup>Co]CN-Cbl distribution over the gradient paralleled the distribution of the marker enzyme for plasma membranes. From this it was concluded that these plasma membranes indeed contained binding sites for the complex. The affinity constant and the specific number of binding sites of isolated plasma membranes were determined and the results agreed well with similar studies in the literature (1).

The maximal specific binding of TC II-[<sup>57</sup>Co]CN-Cbl to the plasma membranes was 0.025 pmole per mg of membrane

protein and can be expressed as 0.8 pmole per  $10^9$  cells, assuming that 2% of the total liver protein is located in the plasma membranes and that 1 g liver contains about  $1.25 \times 10^8$  cells (2,3). The maximal specific binding of TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  and  $[^{125}\text{I}]\text{TC II-CN-Cbl}$  to the isolated liver parenchymal cells were 0.7 and 0.5 pmole/ $10^9$  cells respectively. These values agree well with each other and also with the value obtained with isolated plasma membranes. Moreover the affinity constants of the binding to the plasma membranes ( $5-12 \times 10^9 \text{ M}^{-1}$ ) and to the liver parenchymal cells ( $6-7 \times 10^9 \text{ M}^{-1}$ ) are in good agreement with each other. A similar affinity constant ( $5.5 \times 10^9 \text{ M}^{-1}$ ) has been described for the binding of TC II- $[^{57}\text{Co}]\text{CN-Cbl}$  to L 1210 lymphoblasts (4). Maximal binding to the lymphoblasts was 0.7 pmole per  $10^9$  cells. In cultured fibroblasts a higher affinity constant,  $2 \times 10^{10} \text{ M}^{-1}$ , has been found and the maximal binding was about ten times higher (5).

Unsaturated transcobalamin II (apo-TC II) did not compete with the binding of saturated TC II (holo-TC II) to the liver plasma membranes. Several authors have reported that (pre)incubation of cells or membrane fractions with apo-TC II inhibited the binding or uptake of the labeled holo-TC II (1, 6). Recently Hall and Green described that the uptake of TC II-vitamin  $\text{B}_{12}$  by HeLa-cells and lymphocytes was unaffected by apo-TC II, but that the binding of holo-TC II, measured at  $4^\circ\text{C}$ , was competitively inhibited by apo-TC II (7). They suggested that, although apo-TC II and holo-TC II compete for the same binding sites on the plasma membrane, different mechanisms exist for their entrance into the cell. Because of the differences in the experimental conditions in the various studies it is not possible to decide for or against competitive inhibition. Our results, which are partially supported by the observations of Hall and Green (7), suit the physiological circumstances better, because the excess of apo-TC II should not be able to block the uptake of holo-TC II by the cell.

The second aspect of the vitamin B<sub>12</sub> uptake, the transport of the vitamin molecule into the cell, was studied with isolated liver cells. The uptake and the binding consisted of a specific and a non-specific component. Because it is not clear to what extent the non-specific processes occur in vivo, we will confine ourselves to the data on the specific saturable uptake.

The rate of specific uptake of TC II-<sup>[57Co]</sup>CN-Cbl at saturation was 1.1 pmole/10<sup>9</sup> cells/hour and of <sup>[125I]</sup>TC II-CN-Cbl amounted to about 0.7 pmole/10<sup>9</sup> cells/hour. However, these values do not include the radioactivity which had been taken up and released again. For TC II-<sup>[57Co]</sup>CN-Cbl an estimate of the total uptake can be obtained from the incubations in the presence of chloroquine. The rate of uptake at 400 pM TC II-<sup>[57Co]</sup>CN-Cbl was roughly 2.6 times the uptake in the absence of chloroquine. Assuming that the effects of chloroquine in specific and non-specific uptake are the same, the real rate of specific uptake of TC II-<sup>[57Co]</sup>CN-Cbl would be about 2.9 pmoles/10<sup>9</sup> cells per hour. This value should correspond with the rate of specific uptake plus degradation of <sup>[125I]</sup>TC II-CN-Cbl at saturation, which was 1.2 pmole/10<sup>9</sup> cells per hour. The latter value is somewhat lower but differences in the individual cell preparations may account for this. Consequently the uptake plus degradation of <sup>[125I]</sup>TC II-CN-Cbl in the presence and in the absence of chloroquine has to be roughly the same. In fact they were 4.4 and 3.9 pmoles/10<sup>9</sup> cells respectively after one hour of incubation in the same cell population, which agrees with the presupposition.

The maximal rates of specific uptake in the liver cells are lower than the the comparable values for L 1210 lymphoblasts. DiGirolamo and Huennekens (4) observed a maximal uptake of 0.4 pmole TC II-<sup>[57Co]</sup>CN-Cbl/10<sup>9</sup> cells per min and Ostroy and Gams (8) reported a value of 18 pmoles/10<sup>9</sup> cells per min. In fibroblasts the kinetics of the uptake have not been analysed, but it is possible to deduce from the figures that after an incubation of 6 hours about 5 pmoles/10<sup>9</sup> cells

are associated with the cell, of which 25% is bound to the surface of the cells, and 5-6 pmoles are secreted as small molecular weight degradation products (5).

On the basis of the data on binding, uptake and degradation of TC II-CN-Cbl it was attempted to construct a model for the mechanism of uptake. In chapter 3 three different models have been proposed:

1. the vitamin molecule enters the cytoplasm of the cell through the membrane after dissociation from its transport protein on the surface of the cell.
2. the whole TC II-vitamin B<sub>12</sub> complex enters the cytoplasm of the cell through the membrane.
3. the TC II-vitamin B<sub>12</sub> complex is taken up by the cell in a pinocytotic process.

There are no arguments in favour of the first model. Several authors have demonstrated that the TC II molecule is consumed during the uptake process and that re-utilization, analogous to e.g. transferrin, does not occur (6,9). Re-utilization would be a logical consequence of this model.

The second model is supported by Gams and coworkers, who presented three arguments in favour of this model: 1. the presence of TC II-vitamin B<sub>12</sub> in the cytoplasm of L 1210 lymphoblasts (10); 2. a TC II dependent uptake of vitamin B<sub>12</sub> by isolated mitochondria (11); 3. the kinetics of the uptake of TC II-Cbl by L 1210 lymphoblasts, which showed in their studies no separate processes of binding and uptake but a smooth continuous increase with time of cell associated radioactivity (8). An argument against a TC II-mediated uptake by mitochondria is the passive but specific uptake mechanism for free OH-Cbl in isolated mitochondria, which has been reported by Fenton et al. (12). They concluded that the concentration of vitamin B<sub>12</sub> in the mitochondria takes place as a result of the binding to an intramitochondrial protein.

With the same L 1210 lymphoblasts DiGirolamo and Huennekens (4) did find a biphasic pattern of binding and uptake. The affinity constant of the binding of TC II-Cbl to the lymphoblasts was similar to the affinity constant of the



binding to the isolated liver cells in our study. However, half-maximal binding and half-maximal uptake did not occur at the same concentration of TC II-Cbl. This observation may indicate that in the lymphoblasts the binding is not functionally linked to the uptake, thereby precluding a process of pinocytosis, or that the extracellular concentration of TC II-Cbl has an effect on the efficiency of internalization of the TC II-Cbl complex through pinocytosis or on the rate of pinocytosis itself.

The third model, involving binding to the plasma membrane, pinocytosis and lysosomal degradation, has been supported by in vivo experiments of Schneider et al. (6), who demonstrated that in the rabbit [ $^{125}\text{I}$ ]TC II-Cbl is broken down by the tissues. Further evidence for this model has been presented by the experiments of Youngdahl-Turner (5), which demonstrated that internalized TC II was degraded in the lysosomes of cultured fibroblasts.

Our experimental results are in best accordance with the third model. First of all we have demonstrated that TC II is broken down by proteolysis in the lysosomes and the usual way for an extracellular protein to arrive in the lysosomes is by way of an endocytic process (13). Second, chloroquine inhibited the degradation of TC II and caused a compensatory accumulation of TC II and of Cbl in the cell, probably in the lysosomes. This observation precludes the possibility that TC II is broken down in the lysosomes after it has delivered its vitamin molecule to, for instance, the mitochondria. In the third place the kinetics of binding and uptake suggest a mechanism of pinocytosis. Half-maximal binding and half-maximal uptake, and saturation of binding and of uptake occur at about the same extracellular concentration of TC II-Cbl, which indicates that the degree of occupation of the membrane binding sites primarily determines the rate of uptake of the TC II-Cbl complex.

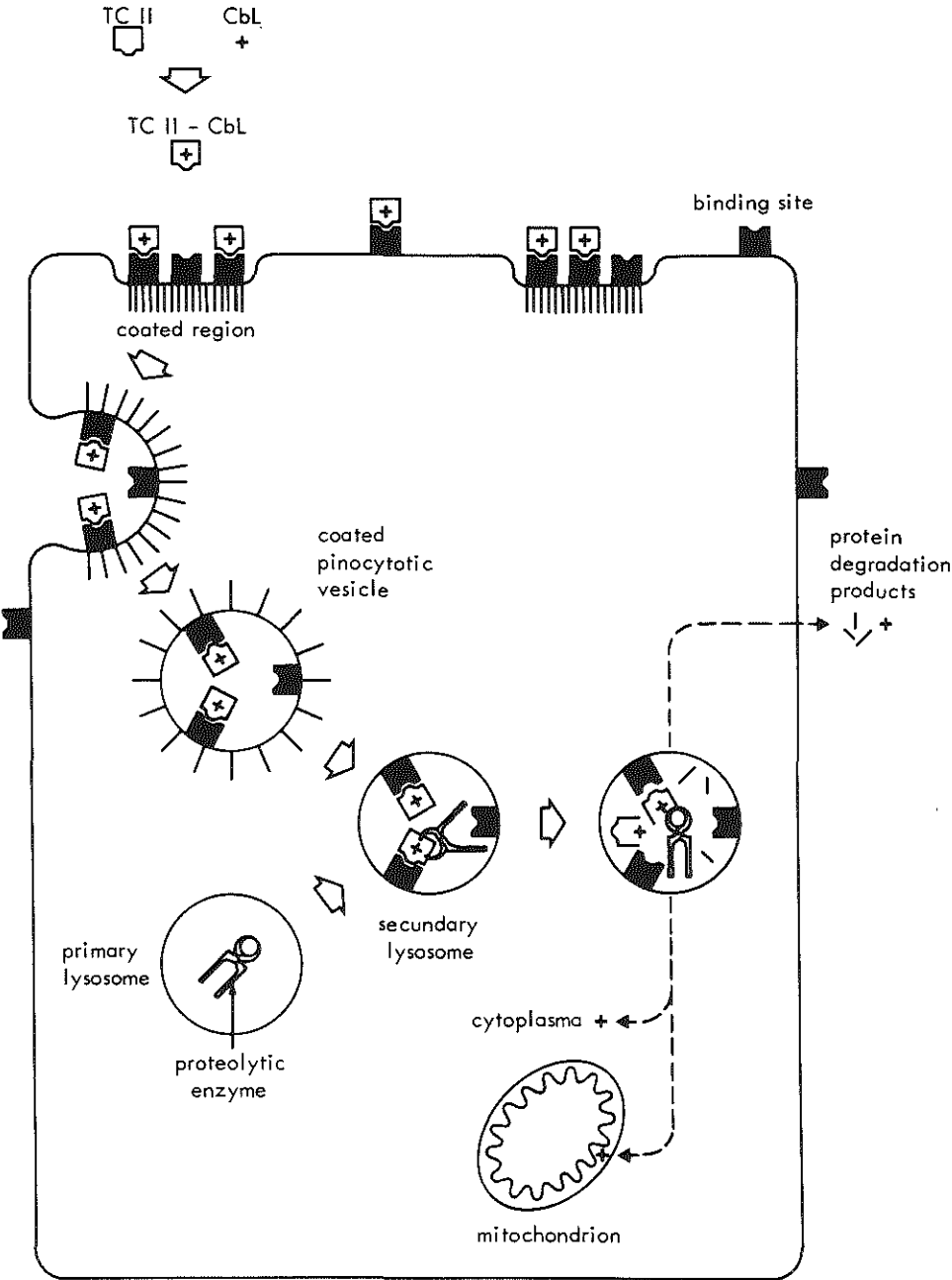
Analysing the kinetics of TC II-Cbl uptake by the liver cells it was assumed that the rate of formation of pinocyto-

tic vesicles is constant during the incubation and not affected by the binding of the ligand to the binding site. In the literature there is evidence that the ingestion of particles by a pinocytotic process is enhanced by the binding of the particle to the membrane and that bivalent or multivalent macromolecules, such as concanavalin A and immunoglobulins, stimulate the rate of pinocytosis by their binding to the cell surface. When the same macromolecules were made univalent, stimulation was absent although the binding was not affected. It is therefore unlikely that the TC II molecule, which is thought to be univalent, is able to influence the rate of pinocytosis of the liver cells.

A consequence of the quantitative data of binding and uptake by the liver cell is, that each membrane binding site allows the entrance of 2-4 TC II-Cbl molecules per hour. Assuming that the binding sites are evenly distributed over the total cell surface, and that no direct relation exists between the site of pinocytosis and the localization of the binding sites, a membrane turnover of 2-4 times per hour would be necessary, as a result of the pinocytotic process, to reach the observed rate of uptake. The rate of pinocytosis in the liver cells, which was measured by plasma membrane protein turnover studies by Schimke (14), appears to be only 25% of the plasma membrane surface per hour. Two different explanations for this discrepancy between membrane turnover and rate of uptake of extracellular protein have been given by Neville and Chang (15): first the occurrence of receptor clustering at the site of pinocytosis and second a high degree of re-utilization of membrane components, which means that the rates of plasma membrane protein turnover cannot be used as a measure for rates of pinocytosis. So far no convincing evidence has been given for any of the two models, although Anderson et al. (16) concluded from electron microscopic studies on the binding of ferritin-conjugated low-density lipoprotein (LDL) to fibroblasts, that the LDL-binding sites were concentrated in so-called coated regions,

figure 7.1.

CLUSTERED BINDING-SITE-MEDIATED PINOCYTOTIC TRANSPORT MODEL FOR TRANSCOBALAMIN II - VITAMIN B<sub>12</sub> IN THE LIVER PARENCHYMAL CELL



which accounted for only 1.4% of the total membrane surface area.

Clustering of the binding sites for TC II on the liver plasma membrane could explain the observed rates of uptake. Consequently the scheme for the uptake of TC II-vitamin B<sub>12</sub> might be as illustrated in figure 7.1. First the TC II-vitamin B<sub>12</sub> complex adheres to the clustered binding sites on coated regions in the plasma membrane, which are predestined to become sites of pinocytosis. After formation of the pinocytotic vesicle fusion with the primary lysosomes occurs and a secondary lysosome is formed. Meanwhile the TC II molecule is degraded by the lysosomal proteolytic enzymes and the vitamin B<sub>12</sub> molecule is detached from its binding protein. The vitamin B<sub>12</sub> molecule is probably transferred to the cytoplasm and the mitochondria and will be converted to the respective coenzyme forms. A large part of the internalized vitamin is released by the cell, possibly after conversion into biologically active forms.

In conclusion the mechanism of uptake of transcobalamin-II-vitamin B<sub>12</sub> by the liver cell can be described as adsorptive endocytosis followed by lysosomal fusion and proteolytic degradation of the transport protein. Quantitative aspects of the kinetics of binding and uptake suggest a clustering of the binding sites in small areas of the plasma membrane. From the kinetic analysis of binding, uptake and release we concluded that at a normal TC II-Cbl concentration in the blood plasma the majority of the binding sites on the liver plasma membranes are occupied with holo-TC II and that TC II-Cbl is continuously taken up and released. A small fraction of the internalized vitamin B<sub>12</sub> is probably retained by the cell to compensate for the continuous release of vitamin from the storage pool. In our studies no arguments have been found that the exchange between intra- and extracellular vitamin B<sub>12</sub> is regulated by the cell on the basis of the extracellular concentration of TC II-vitamin B<sub>12</sub>.

## References.

1. Fiedler-Nagy, C., Rowley, G.R., Coffey, J.W. and Miller, O.N. Binding of vitamin B12-rat transcobalamin II and free vitamin B12 to plasma membranes isolated from rat liver. (1975). *Brit. J. Haematol.*, 31, 311-321.
2. Neville, D.M. Jr. The preparation of cell surface membrane enriched fractions. (1970). In *Biochemical Analysis of membranes* (A.H. Maddy, ed.) pp. 27-54. Chapman & Hall, London.
3. Munthe-Kaas, A.C., Berg, T. and Seljelid, R. Distribution of lysosomal enzymes in different types of rat liver cells. (1976). *Exp. Cell Res.* 99, 146-154.
4. DiGirolamo, P.M. and Huennekens, F.M. Transport of vitamin B12 into mouse leukemia cells. (1975). *Arch. Biochem. Biophys.*, 168, 386-393.
5. Youngdahl-Turner, P., Rosenberg, L.E. and Allen, R.H. Binding and uptake of transcobalamin II by human fibroblasts. (1978). *J. Clin. Invest.*, 61, 133-141.
6. Schneider, R.J., Burger, R.L., Mehlman, C.S. and Allen, R.H. The role and fate of rabbit and human transcobalamin II in the plasma transport of vitamin B12 in the rabbit. (1976). *J. Clin. Invest.*, 57, 27-38.
7. Hall, C.A. and Green, P.D. Competition between apo and holo transcobalamin II for the TC II-mediated uptake process. (1978). *Proc. Soc. Exp. Biol. Med.*, 158, 206-209.
8. Ostroy, F. and Gams, D. Cellular fluxes of vitamin B12. (1977). *Blood*, 50, 877-887.
9. Tan, C.H., Blaisdell, S.J. and Hansen, H.J. Mouse transcobalamin II metabolism: the effects of antibiotics on the clearance of vitamin B12 from the serum transcobalamin II-vitamin B12 complex and the reappearance of free serum transcobalamin II in the mouse. (1973). *Biochim. Biophys. Acta*, 320, 469-477.
10. Ryel, E.M., Meyer, L.M. and Gams, R.A. Uptake and cellular distribution of vitamin B12 in mouse L1210 leukemic lymphoblasts. (1974). *Blood*, 44, 427-433.
11. Gams, R.A., Ryel, E.M. and Ostroy, F. Protein mediated uptake of vitamin B12 by isolated mitochondria. (1976). *Blood*, 47, 923-930.
12. Fenton, W.A., Ambani, L.M. and Rosenberg, L.E. Uptake of hydroxocobalamin by rat liver mitochondria. Binding to a mitochondrial protein. (1976). *J. Biol. Chem.*, 251, 6616-6623.

13. Silverstein, S.C., Steinman, R.M. and Cohn, Z.A. Endocytosis. (1977). Annual Review Biochem., 46, 669-722.
14. Schimke, R.T. Regulation of protein degradation in tissues (1969). Curr. Top. Cell. Regul., 1, 77-228.
15. Neville, D.M. Jr. and Chang, T.M. Receptor-mediated protein transport into cells. Entry mechanism for toxins, hormones, antibodies, viruses, lysosomal hydrolases, asialoglycoproteins and carrier proteins. (1978) in Current topics in membranes and transport (Bronner, F. and Kleinzeller, A. eds.), pp. 66-150, Acad. Press, New York.
16. Anderson, R.G.W., Brown, M.S. and Goldstein, J.L. Role of the coated endocytotic vesicle in the uptake of receptor-bound low density lipoprotein in human fibroblasts. (1977). Cell, 10, 351-364.

## SUMMARY

The object of the experiments, described in this thesis, was to obtain a comprehensive picture of the uptake of vitamin B<sub>12</sub> by the liver cell, and of the handling of the vitamin and its plasma transport protein, transcobalamin II, in the cell. Chapter 1 gives a synopsis of the literature on vitamin B<sub>12</sub> transport and metabolism and describes the different models which have been proposed for the mechanism of the vitamin B<sub>12</sub> uptake by the cell. In chapter 2 the various techniques are described, which have been used throughout the investigations. The first aspect of the uptake process, the binding of the TC II-vitamin B<sub>12</sub> complex to the cell membrane, is treated in chapter 3. The presence of specific binding sites on the isolated liver plasma membrane was demonstrated and the kinetic aspects of the binding process were studied. An affinity constant of  $5-10 \times 10^9 \text{ M}^{-1}$  was determined, which suggests that in vivo the majority of the binding sites on the cell surface is occupied by TC II-vitamin B<sub>12</sub> at a normal plasma TC II-vitamin B<sub>12</sub> concentration of about 500 pM. Free vitamin B<sub>12</sub> and apo-TC II had no competitive effect on the binding of holo-TC II. In contrast with the binding of TC II-vitamin B<sub>12</sub> to various other cells, the binding to the liver cell membranes did not depend on the presence of calcium or magnesium ions. It appeared to be possible to reduce the binding capacity of the plasma membranes by preincubation either with trypsin or with detergents, which indicates that an essential part of the binding sites is composed of protein.

The phase which follows the binding of the complex to the binding sites is its transfer to the interior of the cell. This is discussed in the chapters 4 and 6. In chapter 4 experiments are described which were carried out with a TC II-vitamin B<sub>12</sub> complex, <sup>57</sup>Co-labeled in the vitamin moiety, and in chapter 6 the fate of the transport protein

is studied with radioactive iodine labeled TC II-vitamin B<sub>12</sub>. The incorporation of the radioactive label in the protein moiety of the complex necessitated the purification of TC II to homogeneity. For this purpose an affinity chromatography technique was developed, which is easy to perform and apparently does not harm the protein structure. 2.7 mg of TC II-CN-Cbl were purified from 20 kg of Cohn fraction III, prepared from 500 l human plasma. The final yield was about 50% and the specific binding capacity amounted to 0.98 mol CN-Cbl per mol TC II.

Studies on the cellular uptake were performed by incubations of TC II-CN-Cbl complex with isolated liver parenchymal cells in suspension. During the incubations a fast increase of cell-bound radioactivity was observed in the first few minutes and this phase was followed by a steady linear increase in the next two hours. This pattern suggests a rapid binding of the complex onto the surface of the cell and a relatively slow internalization of the TC II-Cbl complex. Both binding and uptake were partially saturable with increasing extracellular TC II-CN-Cbl concentrations. The assumption was made that the observed uptake is the sum of a specific and a non-specific process, which was confirmed by the results of incubations in the presence of an excess of unlabeled TC II-CN-Cbl. Under these circumstances the specific binding and uptake form only a small, negligible fraction of the total uptake, and the main uptake is the result of the non-specific process. The specific saturable binding and uptake were calculated by subtraction of the non-specific from the total binding and uptake.

Binding and uptake reached half-maximal levels and saturation at about the same concentrations of TC II-CN-Cbl, which suggests that the rate of uptake is primarily determined by the degree of occupation of the available binding sites on the cell membrane.

The uptake of TC II is accompanied by the formation and secretion of small molecular weight degradation products of



the TC II molecule. Addition of chloroquine, a known inhibitor of intralysosomal proteolytic enzymes, to the incubation system led to an accumulation of the transport protein and the vitamin within the cell and to a reduction of proteolysis of TC II-Cbl. This suggests that proteolysis of TC II in the lysosomes is a prerequisite for the normal cellular handling of vitamin B<sub>12</sub>. Moreover, it indicates that the observed uptake of vitamin B<sub>12</sub> is not representative for the total uptake but only the resultant of a process of uptake and of release. This conclusion was confirmed by observations on the release of vitamin B<sub>12</sub> by isolated liver cells which were loaded with radioactive vitamin B<sub>12</sub> shortly before their isolation. These experiments suggest that vitamin B<sub>12</sub> which is bound to the surface of the cells or has been taken up in the pinocytotic vesicles and in the lysosomes, can be released completely by the liver cells during short incubations. However, when the radioactive vitamin B<sub>12</sub> was administered 70 hours before the isolation of the liver cells, only 15% of the radioactive vitamin was released during two hours of incubation. The same percentage was found when the release of total intracellular vitamin B<sub>12</sub> into the medium was determined. This observation indicates that after 70 hours the internalized vitamin B<sub>12</sub> is taken up in the vitamin B<sub>12</sub> storage pool of the liver.

Summarizing all qualitative and quantitative data from the various experiments the whole rat liver is able to bind 0.5 to 0.7 pmole and to internalize about 2.3 pmoles of TC II-CN-Cbl per hour from which about 2/3 is released again. Concomittantly the transport protein is degraded in the lysosomes and secreted as small molecular weight degradation products. This suggests that TC II-vitamin B<sub>12</sub> is internalized by means of adsorptive endocytosis or binding site-mediated pinocytosis, followed by fusion of the endocytic vesicles with the lysosomal system.

On the basis of the relation between the amount of binding sites and the observed rate of uptake each binding site

should be able to internalize 2-4 molecules of TC II-Cbl per hour. In terms of plasma membrane turnover rates this implicates that either the binding sites are subject to a high degree of re-utilization or the binding sites are mainly concentrated in small areas of the cell surface or both. Concentration of binding sites in so-called coated regions have been described earlier for low-density lipoprotein receptors on fibroblast membranes. The mechanism of the uptake of TC II-Cbl by the liver parenchymal cell can therefore most likely be defined as clustered binding site-mediated pinocytosis.

## SAMENVATTING

De experimenten waarvan de resultaten in dit proefschrift zijn beschreven hadden tot doel een samenvattend beeld te krijgen van de opname van vitamine B<sub>12</sub> vanuit het plasma door de levercel en van de verdere verwerking binnen die cel. In hoofdstuk 1 wordt een overzicht gegeven van de historische ontwikkelingen in het onderzoek naar het vitamine B<sub>12</sub> transport en metabolisme in het algemeen en van de cellulaire opname processen in het bijzonder. Ook de isolatie en karakterisatie van het plasma transport-eiwit, transcobalamine II, krijgen ruim aandacht. Uit die vele gegevens, afkomstig van experimenten met verschillende celtypen en onder diverse experimentele omstandigheden, werden de volgende conclusies getrokken:

1. Transcobalamine II is een vitamine B<sub>12</sub> bindend plasma-eiwit met een moleculairgewicht van 38 000, dat een onmisbare rol vervult in de opname van vitamine B<sub>12</sub> door de cel.
2. Op de buitenmembraan van de cel bevinden zich bindingsplaatsen voor het transcobalamine II-vitamine B<sub>12</sub> complex.
3. Het transcobalamine II-vitamine B<sub>12</sub> complex wordt in zijn geheel door de cel opgenomen en het transporteiwit gaat bij dit proces verloren, vermoedelijk door proteolytische afbraak in de lysosomen.
4. De opgenomen vitamine wordt voor een deel weer vrij snel door de cel uitgescheiden. In fibroblasten is dit ten dele afhankelijk van de aanwezigheid van een intracellulair vitamine B<sub>12</sub> bindend eiwit.

De literatuurgegevens zijn op een aantal punten min of meer met elkaar in tegenspraak. Dat betreft ten eerste de calciumafhankelijkheid van de binding van het transcobalamine II-vitamine B<sub>12</sub> complex aan de bindingsplaatsen op de plasmamembraan. Ten tweede worden tegenstrijdige resultaten

beschreven aangaande het competitieve effect van onverzadigd of apo-transcobalamine II ten opzichte van verzadigd of holo-TC II. Een derde controverser kan worden waargenomen in de beschrijving van de intracellulaire verwerking van het TC II-vitamine B<sub>12</sub> complex, waarin het model van lysosomale afbraak van TC II, gevolgd door intrede van de vrije vitamine B<sub>12</sub> moleculen in het cytoplasma, en het model van direct transport van het intacte complex naar het cytoplasma, gevolgd door een TC II afhankelijke opname van de vitamine B<sub>12</sub> moleculen door de mitochondriën, tegenover elkaar staan.

In het nu volgende overzicht van de resultaten uit dit proefschrift wordt duidelijk gemaakt aan welke karakteristieken de opname door de levercel voldoet.

In hoofdstuk 3 wordt aannemelijk gemaakt dat levercellen op hun plasmamembraan specifieke bindingsplaatsen bezitten. De affiniteit van transcobalamine II-vitamine B<sub>12</sub> ten opzichte van deze bindingsplaatsen ligt in de orde van  $5 \text{ à } 10 \times 10^9 \text{ M}^{-1}$ . Deze waarde doet vermoeden dat bij een plasma concentratie aan TC II-vitamine B<sub>12</sub> van  $\pm 500 \text{ pM}$  het merendeel van deze bindingsplaatsen op de membraan bezet is. De affiniteit van de bindingsplaatsen in diverse weefsels vertoont weinig onderlinge verschillen. De binding van TC II-vitamine B<sub>12</sub> wordt niet beïnvloed door de aanwezigheid van vrije vitamine B<sub>12</sub> of van apo-TC II en de binding is niet afhankelijk van calcium- of magnesiumionen. Het bleek mogelijk het aantal bindingsplaatsen sterk te reduceren door incubaties van de membraanpreparaten met trypsine en met detergentia. Hieruit mag de conclusie worden getrokken dat een essentieel onderdeel van de bindingsplaats is opgebouwd uit eiwit.

De fase, die volgt op de binding van het complex aan de plasmamembraan, is het transport de cel in en wordt beschreven in de hoofdstukken 4 en 6. Hoofdstuk 4 betreft opname studies met geïsoleerde rattelever parenchymcellen,

die zijn uitgevoerd met een TC II-vitamine B<sub>12</sub> complex dat radioactief gemerkt is in het vitamine B<sub>12</sub> gedeelte. In hoofdstuk 6 worden vergelijkbare experimenten vermeld die zijn uitgevoerd met de radioactieve merking in het eiwit-gedeelte.

Tijdens incubatie van een levercel suspensie met het radioactief gemerkte TC II-vitamine B<sub>12</sub> wordt in de eerste minuten een sterke stijging van celgebonden radioactiviteit waargenomen, en deze eerste fase wordt gevolgd door een tweede fase van geleidelijke lineaire toename van de celgebonden activiteit. Dit patroon suggereert een snelle binding van het TC II-vitamine B<sub>12</sub> complex aan het celoppervlak en een relatief langzaam transport de cel in. Zowel binding als opname vertonen met stijgende TC II-vitamine B<sub>12</sub> concentraties een gedeeltelijke verzadiging. Het vermoeden dat we hier te maken hebben met een combinatie van een specifiek en een niet-specifiek proces, wordt bevestigd door de resultaten van incubaties in aanwezigheid van een overmaat aan ongemerkt TC II-vitamine B<sub>12</sub>. Onder die omstandigheden worden alleen de niet-specifieke binding en opname gemeten en deze blijken met toenemende gemerkte TC II-vitamine B<sub>12</sub> concentraties lineair toe te nemen. Uit de combinatie van beide proefopzetten is het mogelijk de specifieke verzadigbare component van de binding en de opname afzonderlijk te berekenen. De overeenkomst tussen de concentratie-afhankelijkheid van de binding en van de opname geeft aan, dat de opnamesnelheid primair wordt bepaald door de bezettingsgraad van de beschikbare bindingsplaatsen op de celmembraan.

De opname van TC II gaat gepaard met de vorming en uitscheiding van klein-moleculaire afbraakprodukten van de TC II molecule. Toevoeging van chloroquine, een remmer van intralysosomale proteolytische enzymen, aan het incubatie systeem leidt tot een accumulatie van het transporteiwit en van de vitamine B<sub>12</sub>. De som van opname en afbraak van

TC II wordt nauwelijks door chloroquine beïnvloed. Hieruit wordt de conclusie getrokken, dat de waargenomen opname van vitamine B<sub>12</sub> in feite slechts de hoeveelheid vitamine B<sub>12</sub> weergeeft die na opname in de cel achterblijft, en dat in afwezigheid van chloroquine het grootste deel van de opgenomen vitamine B<sub>12</sub> de cel weer verlaat. Deze conclusie wordt bevestigd door experimenten, waarin de uitscheiding van vitamine B<sub>12</sub> door geïsoleerde levercellen wordt bestudeerd, nadat deze cellen vóór hun isolatie in vivo zijn opgeladen met radioactief gemerkte vitamine B<sub>12</sub>. Wanneer de in vivo toediening heeft plaatsgevonden 30 min voor de aanvang van de celisolatie, wordt radioactief gemerkte vitamine vrijwel volledig uitgescheiden gedurende een incubatie van 2 uur. Heeft de in vivo oplading 70 uur tevoren plaatsgevonden dan wordt slechts + 15% gedurende een 2-uurs incubatie uitgescheiden.

Hoofdstuk 5 beschrijft de isolatie van transcobalamine II uit humaan plasma. Deze isolatie is een essentieel onderdeel van het totale onderzoek, omdat selectieve radioactieve merking van het transporteiwit slechts mogelijk is, indien het te merken materiaal volledig zuiver is. Om dit doel te bereiken werd een affiniteitschromatografie techniek ontwikkeld, die eenvoudig uitvoerbaar is, tot een efficiënte zuivering leidt en geen schadelijke invloed op het te zuiveren eiwit heeft. Uit 20 kg Cohn's fractie III van + 500 l humaan plasma werd, met een opbrengst van 50%, 2,7 mg zuiver transcobalamine II met een specifieke binding van 0,98 mol CN-Cbl/mol TC II geïsoleerd. Door middel van electroforetische analyses van het gezuiverde produkt blijkt dat het enigszins heterogeen van samenstelling is. Het is mogelijk een deel van het materiaal door reductie met  $\beta$ -mercaptoethanol en dithiothreitol in 2 sets van 2 complementaire fragmenten op te splitsen. Of de fragmenten natuurlijk voorkomende subunits zijn of dat zij het gevolg zijn van proteolyse of een andere invloed van buitenaf, valt uit

onze resultaten niet op te maken. Met behulp van isoelectrische focussing van het zuivere eiwit blijkt het mogelijk het eiwit te scheiden in op zijn minst vier verschillende subfracties. Dit sluit aan bij recente gegevens aangaande de genetische variabiliteit van transcobalamine II.

In hoofdstuk 7 worden de resultaten van alle in dit proefschrift beschreven experimenten aan elkaar getoetst en als bouwstenen gebruikt voor een model van de opname van vitamine B<sub>12</sub> door de levercel. In dit model is de volgorde van gebeurtenissen als volgt:

1. TC II-vitamine B<sub>12</sub> bindt zich aan specifieke bindingsplaatsen op het celoppervlak, die op grond van kwantitatieve gegevens waarschijnlijk in zogenaamde "clusters" geconcentreerd zijn.
2. Met een gedeelte van de membraan wordt het hele complex via pinocytose de cel binnengevoerd.
3. Het pinocytose-blaasje vervloeit met het lysosomale systeem, waarna door inwerking van lysosomale proteolytische enzymen het transporteiwit wordt afgebroken en vitamine B<sub>12</sub> wordt vrijgemaakt.
4. De vitamine B<sub>12</sub> molecule komt via onbekende wegen terecht in het cytoplasma en het mitochondrion of wordt door de cel uitgescheiden.

Transcobalamine II schaart zich daarmee in de rij van eiwitten, waarvoor een vergelijkbaar opnamemechanisme reeds eerder werd waargenomen, zoals asialoglycoproteinen, "high and low-density" lipoproteine en lysosomale hydrolases in fibroblasten.





## CURRICULUM VITAE

De schrijver van dit proefschrift werd op 18 september 1949 geboren te Rotterdam. Hij behaalde in 1967 het diploma Gymnasium  $\beta$  aan het Libanon Lyceum te Rotterdam en begon in hetzelfde jaar de studie in de Biologie aan de Rijksuniversiteit te Utrecht. Het kandidaatsexamen B4 werd afgelegd in juni 1970 en het doctoraalexamen met de hoofdvakken biofysische chemie en hematologie en het bijvak biochemie (cum laude) in november 1972.

Sinds 1 december 1972 is hij als wetenschappelijk medewerker verbonden aan het Instituut voor Hematologie van de Erasmus Universiteit Rotterdam. Aldaar werd onder leiding van Prof.Dr. J. Abels het hier beschreven onderzoek verricht.

*Op de omslag is een foto weergegeven van  
geïsoleerde rattelever parenchymcellen, gezien  
door een fase-contrastmicroscop.*