

Investigation into subtypes of the prostacyclin and  
prostaglandin E receptors present in smooth muscle.

by

Ruth A. Lawrence

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I declare that this thesis was composed by myself and that all the experimental work described herein was performed by myself with the exception of the TP receptor radioligand binding studies in chapter 5 which were carried out in collaboration with Dr R.L. Jones.

R.L. Jones

R.A Lawrence

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## PUBLICATIONS

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R.A LAWRENCE & R.L JONES (1988). Thromboxane receptor agonists and antagonists: radioligand displacement and pharmacological activity on human platelets. *Br. J. Pharmacol.* **95**, 680P.

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R.A LAWRENCE, R.L. JONES & N.H. WILSON (1989). Relaxant properties of prostaglandin E analogues on rabbit jugular vein. *Br J. Pharmacol.* (in press) .

## CONVENTIONS AND NOMENCLATURE

Trivial names of prostaglandins and their analogues have been used throughout this thesis. The systematic names for some of the C20 prostanoids and analogues referred to in this thesis are shown below and those not listed may be deduced from these examples.

<i>Trivial name</i>	<i>Systematic name</i>
Prostaglandin H <sub>2</sub>	15(S)-Hydroxy-9 $\alpha$ ,11 $\alpha$ -peroxidoprostanoic acid, 13 trans dienoic acid.
Prostaglandin I <sub>2</sub>	11 $\alpha$ ,15(S)-Dihydroxy-9-deoxy-6,9-epoxy-5Z,13-trans-prostadienoic acid.
11,9-epoxymethano PGH <sub>2</sub>	15(S) Hydroxy-11 $\alpha$ ,9 $\alpha$ -(epoxymethano) prostanoic acid, 13 trans dienoic acid.
EP 171	$\omega$ -tetranor-16- <i>p</i> -fluorophenoxy-9 $\alpha$ ,11 $\alpha$ -oxa-10 $\alpha$ -homo PGH <sub>2</sub> .
STA <sub>2</sub>	9,11-Epithio-11,12-methano TXA <sub>2</sub> .

In drawing chemical structures stereochemistry is not implied but a thickened or dotted line denotes a substituent located above or below the plane of the paper respectively.

## ABSTRACT

This thesis describes attempts to characterize prostacyclin (IP) and prostaglandin E (EP) receptors in smooth muscle preparations using agonist potency ranking and susceptibility to receptor blockade.

Platelet aggregation is inhibited by prostacyclin analogues through activation of IP-receptors present on the plasma membrane. This potentially useful anti-thrombotic action is compromised by powerful vasodilator activity. The relaxant activity of cicaprost, iloprost, carbacyclin and EP157 (a novel prostaglandin endoperoxide analogue which mimics prostacyclin in the human platelet) was measured on isolated arterial rings from man, pig, rabbit and dog: Potency decreased in the order given above and there was little evidence for significant differences between the IP receptors in the different preparations. In man the agonist potency at vascular IP sites correlates well with that of the platelet thus presenting little hope for separation of the two actions.

In addition, the IP receptor present in the guinea-pig ileum has been investigated. This receptor is of particular interest as it has been shown to mediate longitudinal muscle contraction via the release of excitatory neurotransmitters from the myenteric plexus.

Only the action of cicaprost was abolished by morphine and tetrodotoxin: PGI<sub>2</sub>, iloprost and carbacyclin were only partially inhibited and the residual contraction in each case was abolished by the EP<sub>1</sub>-receptor antagonist, AH6809. These results suggest a high degree of selectivity for cicaprost. However, the analysis is complicated by the discovery of an IP-receptor which inhibits longitudinal muscle contraction (histamine in the presence of AH6809). Antagonist investigations suggest that the excitatory transmitters released by IP-receptor activation are Acetylcholine and Substance P.

Recently, the existence of three subtypes of the PGE receptor have been proposed and pharmacological / chemical efforts have centred on the characterization of these receptors and identification of their physiological actions. A detailed study has been carried out comparing the actions of eleven PGE analogues on three tissues containing EP<sub>3</sub>-receptors.

(1) Guinea-pig ileum: In the absence of enteric nerve function this tissue has previously been defined as EP<sub>1</sub>- selective. However, the present studies suggest the presence of a second receptor mediating contraction and this has some similarities to the EP<sub>3</sub>-receptor found in the guinea-pig vas deferens. In particular sulprostone and MB28767 are highly active in the presence of AH6809.

(2) Chick ileum: Literature studies suggest the presence of an EP<sub>3</sub>-receptor mediating contraction. The results obtained confirm this, however, detailed study has revealed differences between agonist activity in this tissue and the guinea-pig vas deferens, the most obvious being the low maximum (~ 50% of that of PGE<sub>2</sub>) of the potent EP<sub>3</sub> agonist, sulprostone.

(2) Rabbit jugular vein: This tissue has recently been shown to contain PGD<sub>2</sub> relaxant receptors however, the action of PGE<sub>2</sub> has not yet been studied. Investigations have shown that the preparation contains a

highly sensitive EP<sub>2</sub> receptor mediating relaxation (IC<sub>50</sub><1nM). However, the PGE<sub>1</sub> analogue, butaprost, appears to be considerably less active than expected from data obtained in other preparations known to contain EP<sub>2</sub>-receptors (guinea-pig trachea and cat trachea).

The rabbit jugular vein has previously been shown to contain a contractile thromboxane (TP) receptor which is highly sensitive to the thromboxane mimetic, U46619 (EC<sub>50</sub> ~ 3nM). A number of PGE analogues have potent thromboxane-like (TP-receptor agonist) actions thus the above experiments were carried out in the presence of a TP-receptor antagonist. Characterization of this receptor suggests that it has low affinity for TP-receptor antagonists in common with other rabbit tissues.

Chapter 1  
General Introduction



## GENERAL INTRODUCTION

The first prostaglandin metabolites of arachidonic acid, discovered more than twenty years ago, were the stable species  $\text{PGE}_2$  and  $\text{PGF}_{2\alpha}$  (Bergstrom and Sjovall, 1960 a and b). Subsequently, Bergstrom (1966) announced the structures of several naturally occurring prostaglandins. They have since been shown to arise from unstable intermediates,  $\text{PGG}_2$  and  $\text{PGH}_2$ , the prostaglandin endoperoxides (Hamberg et al, 1974).  $\text{PGG}_2$  and  $\text{PGH}_2$  also undergo enzymatic transformation to unstable products, thromboxane  $\text{A}_2$  ( $\text{TXA}_2$ ) (Piper and Vane, 1969; Hamberg and Samuelsson, 1974) and prostacyclin ( $\text{PGI}_2$ ) (Moncada et al, 1976; Johnson et al, 1976).

Most mammalian cells can release prostanoids in response to various stimuli including hormones, antigen challenge, thrombin and collagen and mechanical trauma. They are synthesised from twenty carbon polyunsaturated fatty acid constituents of membrane phospholipids. Thus, dihomo- $\gamma$ -linoleic acid, arachidonic acid and eicosopentaenoic acid form the 1-, 2- and 3- series prostanoids respectively (Samuelsson et al, 1978; Moncada et al, 1980; Smith et al, 1985). Arachidonic acid is the most abundant of these three precursors thus the 2- series prostaglandins are formed almost exclusively in most mammalian tissues (Moncada et al, 1980). Before prostanoid synthesis can take place free, unesterified arachidonic acid must be released. Release (see Figure 1.1) is catalysed by the phospholipase enzyme phospholipase  $\text{A}_2$  ( $\text{PLA}_2$ ) (Flower and Blackwell, 1976). Although this pathway is thought to be the most important (Mahadevappa and Holub, 1986), there is evidence that in the human platelet, phospholipase C (PLC) may release 1,2-diacylglycerol from which arachidonic acid is liberated by diglyceridelipase (Smith, 1981).

After arachidonic acid is released from tissue stores, conversion into prostaglandins and thromboxanes occurs in two steps (see Fig 1.2). The first step is the formation of the prostaglandin endoperoxides which is catalysed by prostaglandin endoperoxide synthetase (Needleman et al, 1986). The cyclooxygenase activity of the enzyme catalyses the formation of a 15-hydroperoxy compound,  $\text{PGG}_2$ , while the peroxidase activity

Figure 1.1: Schematic representation of two enzymatic pathways triggering arachidonic acid release from membrane phospholipids

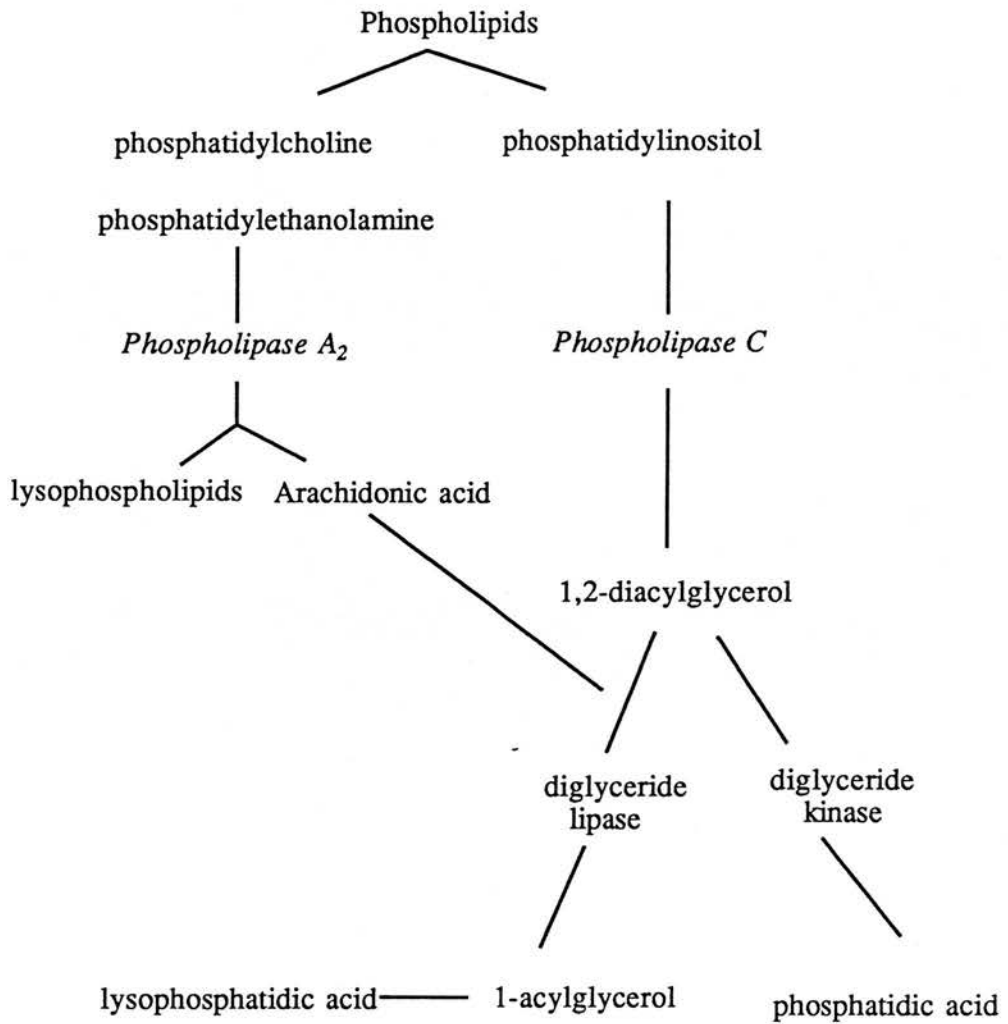
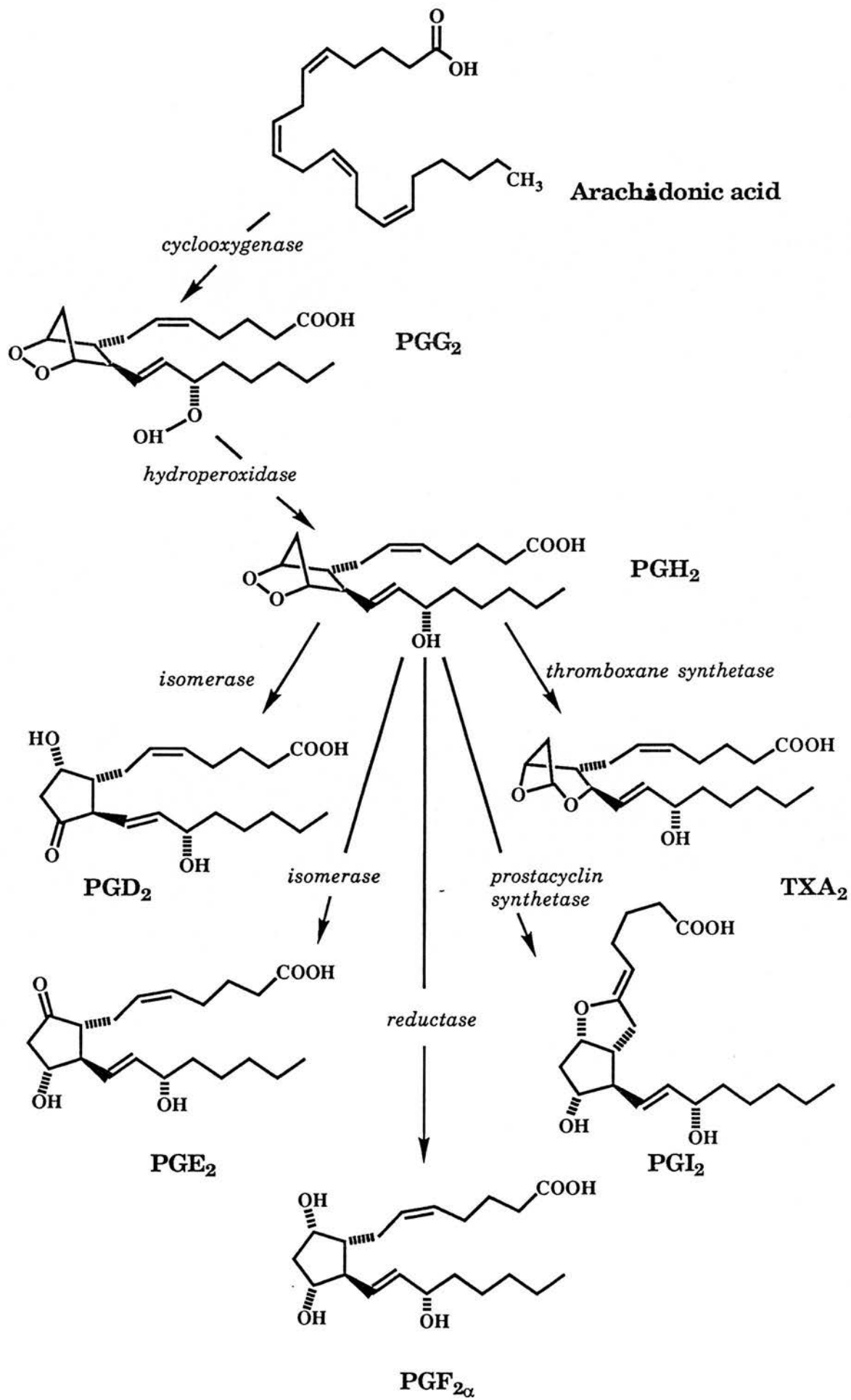


Figure 1.2: Diagram showing the synthesis of the 5 natural prostanoids from Arachidonic acid.



reduces the hydroperoxy group to a hydroxy, giving  $\text{PGH}_2$ . The second step involves enzymes which are tissue specific and result in the formation of products characteristic to a tissue such as thromboxane in platelets (Ho et al, 1976; Ullrich and Haurand, 1976) and prostacyclin in vascular endothelial cells (Gryglewski et al, 1976; DeWitt and Smith, 1983).

Nonsteroidal anti-inflammatory drugs, such as aspirin and indomethacin, inhibit cyclooxygenase (Vane, 1971), and will therefore prevent the formation of prostaglandin endoperoxides resulting in decreased formation of the final products, the prostaglandins and thromboxanes.

Since the discovery of prostaglandins they have been demonstrated to be involved in a wide range of physiological systems including: contraction/relaxation of smooth muscle, control of neurotransmitter release, aggregation/antiaggregation of blood platelets, control of renal function, structural and functional changes in the ovary, function of the eye and gastrointestinal absorption and secretion. They have also been implicated in the pathophysiology of a number of conditions such as thrombosis, inflammation, asthma, cancer, pyrexia, migraine and renal disease (see Coleman et al, 1990).

Horton (1969) was the first to suggest that discrete receptors for prostaglandins may exist which could be distinguished from those of other agonists by selective antagonists: their action was not blocked by atropine, methysergide, mepyramine, propranolol, phenoxybenzamine and hexamethonium. In addition, he suggested that "from the qualitative and quantitative differences in the biological properties of various natural prostaglandin families several different prostaglandin receptors may exist".  $\text{PGI}_2$  and  $\text{PGD}_2$  differ from the other 2-series prostanoids in that they potently inhibit platelet aggregation. Studies by Miller and Gorman (1979) and Whittle et al (1978) provided evidence that these prostanoids act via their own distinct receptors: (1) exposure of platelets to high concentrations of  $\text{PGI}_2$  blocks the effects of subsequent application of  $\text{PGI}_2$  but not  $\text{PGD}_2$  and vice versa (2) the antiaggregatory action of  $\text{PGD}_2$ , but not that of  $\text{PGI}_2$ , is blocked by the phenyl

Table 1.1: Classification of prostanoid receptors in some isolated smooth muscle preparations. Kennedy et al, 1982.

PREPARATION	GROUP	RANK ORDER OF POTENCY
Guinea-pig ileum	1	$E_2 > I_2 = F_{2\alpha} > D_2 = U\ 46619$
Guinea-pig fundus		$E_2 > I_2 \geq F_{2\alpha} > D_2 = U\ 46619$
Dog fundus		$E_2 > F_{2\alpha} > I_2 > D_2 > U\ 46619$
Chick ileum		$E_2 > I_2 > F_{2\alpha} > D_2 = U\ 46619$
Cat trachea		$E_2 > I_2 > F_{2\alpha} > D_2 = U\ 46619$
Dog iris	11	$F_{2\alpha} > D_2 > U\ 46619 > E_2 > I_2$
Cat iris		$F_{2\alpha} > D_2 > E_2 = U\ 46619 > I_2$
Rat aorta	111	$U\ 46619 \gg F_{2\alpha} > E_2 = D_2 = I_2$
Guinea-pig lung		$U\ 46619 \gg D_2 > I_2 = F_{2\alpha} > E_2$
Dog saphenous vein		$U\ 46619 \gg F_{2\alpha} > E_2 > I_2 > D_2$

phosphonate antagonist, N-0164. Kennedy et al (1982) studied the action of PGE<sub>2</sub>, PGF<sub>2α</sub>, U 46619 (a thromboxane mimetic), PGI<sub>2</sub> and PGD<sub>2</sub> on a wide range of preparations. The results showed that the preparations could be divided into three groups on the basis of striking similarities in the rank order of potency of the prostanoid. The authors proposed that the very marked differences between the groups reflected the existence of three distinct classes of prostanoid receptor (see Table 1.1) Thus, they postulated that distinct receptors existed for each class of natural prostanoids: PGD<sub>2</sub>, PGE<sub>2</sub>, PGF<sub>2α</sub>, PGI<sub>2</sub> and TXA<sub>2</sub> corresponded to DP, EP, FP, IP and TP receptors respectively.

This thesis is chiefly concerned with the further characterisation of IP, EP and TP receptors present in various smooth muscle preparations, a range of agonists and antagonists has been used.

A range of basic pharmacological techniques have been employed to classify these receptors.

The law of mass action is used to describe the binding of drugs to receptors:

$$\frac{[AR]}{R_t} = \frac{[A]}{[A] + K_A}$$

where R<sub>t</sub> = total concentration of receptors, [AR] = concentration of drug receptor complex, K<sub>A</sub> = equilibrium dissociation constant for the receptor.

Stephenson (1956) introduced the idea that the response to agonists was not necessarily directly proportional to the receptor occupancy. He introduced the concept of stimulus (S) which assumed that the response was some function of the stimulus.

$$\frac{E_A}{E_M} = f(S)$$

E<sub>A</sub> = Response to a given concentration of A, E<sub>M</sub> = Tissue maximal response.

In addition, the parameter relating stimulus to occupancy was termed 'efficacy', (e):

$$\frac{E_A}{E_M} = f \left( \frac{e [A]}{[A] + K_A} \right)$$

In this definition efficacy was a drug *and* tissue dependent term. The model was later modified by Furchgott (1966) who defined the term 'intrinsic efficacy', ( $E$ ):

$$e = E [R_t]$$

In these terms intrinsic efficacy was strictly a drug related parameter constant for given drug-receptor pairs across species and tissues. Hence,

$$\frac{E_A}{E_M} = f \left( E \frac{[R_t] [A]}{[A] + K_A} \right)$$

Thus, the tissue related factors are (1)  $f$ , the function relating stimulus and response and (2)  $R_t$ , the total receptor concentration. And receptor related parameters are (1)  $K_A$ , the equilibrium dissociation constant of the drug for the receptor and (2)  $E$ , intrinsic efficacy.

If one assumes that  $K_A$ 's for full agonists significantly exceed the concentration required for response ( $K_A < [A]$ ), then stimulus can be given by  $S = E [R_t] [A] / K_A$ . Thus, in each individual tissue:

$$S_1 = \frac{E_1 [A_1]}{K_{A1}} \quad \text{and} \quad S_2 = \frac{E_2 [A_2]}{K_{A2}}$$

The potency ratio or equi-effective molar ratio (EMR) of these two full agonists in producing equal responses ( $S_1 = S_2$ ) is:

$$\text{EMR} = \frac{[A_1]}{[A_2]} = \frac{E_2 [K_{A1}]}{E_1 [K_{A2}]}$$

This ratio reflects only the drug-receptor parameters,  $E$  and  $K_A$ , and is independent of tissue factors. It can thus be used in the classification of receptors.

It is notable that differences in receptor coupling may cause differences in the position of the log concentration-response curves of full agonists (those whose intrinsic efficacy is sufficient to produce a maximal response) but not partial agonists (those with lower intrinsic efficacy). Instead differences in receptor coupling will produce changes in the



maximal response of partial agonists but little change in the position of the log concentration-response curve. Thus, in two different tissues with identical receptors but different stimulus-response coupling a full and partial agonist may have different potency ratios.

The potency of a competitive antagonist depends upon its equilibrium dissociation constant ( $K_B$ ) for the receptor. This is a chemical term which is independent of receptor function, location and animal species. Schild (1949) developed the pA scale in which pA<sub>2</sub> defines the negative logarithm of the molar concentration of antagonist which produces a two fold shift to the right of a concentration response curve. Schild also derived a useful equation to calculate the  $K_B$  of a competitive antagonist:

$$\text{Log}(dr-1) = n\text{Log}[B] - \text{Log} K_B$$

dr refers to the ratio of equi-active concentrations of agonists in the presence and absence of antagonist, [B]. This equation predicts a linear regression (Schild plot) with a slope of unity when a simple competitive antagonist binds to a homogeneous population of receptors. The resulting  $K_B$  under these conditions is a constant which reflects only antagonist receptor interaction and is independent of the agonist used. It is, therefore, useful in receptor classification.

Chapter 2  
Experimental Methods

## CHEMICALS AND MATERIALS

### *IP receptor studies*

PGI <sub>2</sub>	Schering, A.G Berlin.
cicaprost	"
iloprost	"
carbacyclin	Wellcome, U.K
MMM-I-135	Prof. J. Fried, University of Chicago.

### *EP receptor studies*

16,16-dimethyl PGE <sub>2</sub>	Upjohn Diagnostics, U.S.A
ICI 80205	ICI Pharmaceuticals Division
ICI 81008	"
17-phenyl PGE <sub>2</sub> - $\omega$ -trinor	Cayman Chemicals, U.S.A.
MB 28767	May and Baker, U.K Ltd.
sulprostone	Shering AG, Berlin
AH 6809	Glaxo U.K, Ltd.
oxoprostol	May & Baker, U.K. Ltd.
misoprostol	Searle Ltd.
( $\pm$ ) 11-deoxy PGE <sub>1</sub>	Dr P. Crabbe, INSERM, Grenoble.
(nat) 11-deoxy PGE <sub>1</sub>	Cayman Chemicals, U.S.A.
11-deoxy-PGE <sub>2</sub> -1-alcohol	Synthesised from nor PGA <sub>2</sub> in this Department.
butaprost	Miles Laborotories

### *TP receptor studies*

[ <sup>125</sup> I]-PTA-OH (75 TBq mmol <sup>-1</sup> )	Amersham International, U.K
STA <sub>2</sub>	ONO Ltd, Japan
ONO 11120	"
GR 32191	Glaxo, U.K
U 46619	Upjohn Diagnostics U.S.A

*Others*

substance P	Cambridge Research Chemicals
SP150	Fering, Sweden
hyoscine	Sigma Chemical Co., U.K.
mepyramine	"
phenoxybenzamine	"
propranolol	"
methysergide	"
indomethacin	"

All EP compounds were prepared by chemical synthesis in this department by N.H Wilson, C. Marr and G.M Muir.

Stresnil (Azaperone, 40mg/ml)

Janssen

## SOLUTIONS

*made up to*

*Acid-Citrate dextrose (ACD) - ( 120 mls distilled water)*

3 g D-glucose	B.D.H Chemicals
2 g Disodium Hydrogen citrate	"

*made up to*

*Krebs ( 5 litres distilled water)*

10.5 g	Glucose	"
10.5 g	Sodium Hydrogen Carbonate	"
34.5 g	Sodium Chloride	"
17.5 ml	Potassium Chloride (10%)	"
7 ml	Magnesium Sulphate (10%)	"
8 ml	Potassium Dihydrogen Orthophosphate (10%)	"
12.6 ml	Calcium Chloride (1 molar)	"

*made up to*

*Tyrodes ( 5 litres distilled water)*

5 g	Glucose	"
5 g	Sodium Hydrogen Carbonate	"
40 g	Sodium Chloride	"
10 ml	Potassium Chloride (10%)	"
13 ml	Magnesium Sulphate (10%)	"
2.5 ml	Sodium Dihydrogen Phosphate (10%)	"
9 ml	Calcium Chloride (molar)	"

*made up to*

*Tris Buffer, pH 7.4 ( 1 litre distilled water)*

6.06 g Tris taken to pH7.4 with concentrated HCl.

## METHODS

### ISOLATED SMOOTH MUSCLE PREPARATIONS

#### *Guinea-pig ileum*

Male guinea-pigs (300-500 g) were killed by a blow to the head followed by exsanguination. The terminal portion of the ileum was excised after discarding the 8 - 10 cm portion nearest the ileo-caecal junction. The tissue was cleaned and kept in Tyrodes solution of the following composition (mM): NaCl 136, KCl 2.7, CaCl<sub>2</sub> 1.4, MgCl<sub>2</sub> 0.49, NaH<sub>2</sub>PO<sub>4</sub> 0.32, NaHCO<sub>3</sub> 12 and glucose 5. Segments of ~2 cm were mounted vertically in 10 ml organ baths under 0.5 - 0.75 g tension. Changes in tension were measured by means of a Grass FT03 isometric transducer connected to a Grass polygraph recorder. The bath solution was bubbled with 95% O<sub>2</sub> and 5% CO<sub>2</sub> and maintained at 37°C. Bathing solution was changed by upward displacement and overflow. The tissues were allowed to equilibrate for ~1 hr prior to testing with a dose of 14 nM PGE<sub>2</sub>.

Concentration-response curves to all agonists were non-cumulative and drugs were added in 1, 3, 10, 30 or 1, 5, 10, 50 sequence. The preparations were exposed to doses of drug for 30-60 seconds and a minimum of 15 minutes was allowed between additions. Responses were calculated as a % of the acetylcholine maximum obtained in each preparation at the end of the experiment.

#### *Effect of inhibitors*

(1) *Against single doses*: Two control responses to the agonist were established, the tissue was then exposed to the inhibitor 20 minutes prior to addition of a third dose of agonist. The effect of the antagonist was then expressed as a % inhibition of the control response (mean value) and the % inhibition obtained from single preparations from 5 different animals averaged and s.e.m (standard error of the mean) calculated.

The differences in response levels before and after exposure to inhibitor were tested for significance using an unpaired Student's t-test.

(2) *Against concentration-response curves:* Concentration-response curves to any one agonist were established simultaneously in 2 preparations from the same animal, one of the tissues being bathed in Tyrodes solution containing the blocker added 20 minutes prior to the start of agonist addition. Dose-ratio was calculated as follows:  $EC_{25}$  in the presence of inhibitor /  $EC_{25}$  in the absence of inhibitor. The ratios obtained from experiments in 5 different animals were averaged and s.e.m calculated.  $pD_{25}$  values ( $-\log EC_{25}$ ) in the presence and absence of the inhibitor obtained from single preparations were calculated and the difference tested for significance using an unpaired Student's t-test.

#### *Inhibition of histamine - induced contractions*

Preparations were bathed in Tyrodes solution containing 1  $\mu$ M morphine and 2  $\mu$ M AH6809. The tissue maximum was established initially with 1.5  $\mu$ M histamine. Subsequently, each tissue was exposed to a dose of histamine producing a contraction of ~60% of the maximum at 2 minute intervals. Inhibitors were added immediately after wash-out of histamine. The effect of the inhibitor was calculated as a % inhibition of the control response to histamine.

#### *Chick ileum*

5 - 20 day old chicks were killed by decapitation. The dissection and experimental procedure was identical to that used for the guinea-pig ileum. The tissues were allowed to equilibrate for ~1 hr prior to testing with a dose of 14 nM PGE<sub>2</sub>.

Concentration-response curves to all agonists were non-cumulative and drugs were added in 1, 3, 10, 30 or 1, 5, 10, 50 sequence. The preparations were exposed to doses of drug for 30-60 seconds and a minimum of 15 minutes was allowed between additions. Responses are calculated as a % of the acetylcholine maximum obtained in each preparation at the end of the experiment.

A concentration-response curve for PGE<sub>2</sub> was carried out on one preparation from each animal. The other preparations were exposed to various test prostanoids and EMR values calculated in the following way: EC<sub>25</sub> of the test prostanoid / EC<sub>25</sub> of PGE<sub>2</sub> in preparations from the same animal. EMR values from preparations from 5 different animals were averaged and the s.e.m calculated. Similarly pD<sub>25</sub> values for each agonist were calculated averaged and the s.e.m calculated.

*Effect of 'inhibitors' (AH6809, sulprostone and 'cocktail') :* A cumulative concentration-response curve for PGE<sub>2</sub> was carried out on one preparation. Following wash-out the 'inhibitor' was added and 10-20 minutes later a second concentration-response curve to PGE<sub>2</sub> was obtained. Control curves were obtained simultaneously in a separate preparation.

#### *Rabbit jugular vein*

Male New Zealand White rabbits (2 - 4 kg) were injected with heparin (1000 units) via the marginal ear vein prior to cervical dislocation and exsanguination. The external jugular veins were removed, cleared of fat and adherent connective tissue and cut into rings (~4 mm wide) by transecting the vein. The rings were suspended between two hooks in a 10 ml organ bath containing Krebs solution (mM : NaCl 118, KCl 5.4, CaCl<sub>2</sub> 2.5, MgSO<sub>4</sub> 1.0, NaH<sub>2</sub>PO<sub>4</sub> 1.1, NaHCO<sub>3</sub> 25, glucose 10 and indomethacin 1µM) under a tension of 0.75 g. Changes in tension were measured by means of a Grass FT03 isometric transducer connected to a Grass Polygraph recorder. The bath solution was bubbled with 95% O<sub>2</sub> and 5% CO<sub>2</sub> and maintained at 37°C. Tissues were allowed a 1 hr period of equilibration during which changes in the resting tension were readjusted. All tissues were initially contracted with 10 µM histamine to establish the tissue maximum.

#### *EP receptor studies:*

For investigation of the relaxant actions of prostanoids, stable tone levels between 50 - 60 % of the maximum were obtained in all preparations with ~1µM histamine. Higher levels of contraction were subject to a



considerable degree of fade. In order to block any thromboxane receptor agonist action of the prostanoids tested, dose-response curves were obtained in the presence of the TP receptor antagonist, GR 32191 (10 $\mu$ M) (Lumley et al, 1987). Each preparation was exposed to two cumulative series of PGE<sub>2</sub> doses before testing a prostanoid analogue. The tissues were allowed ~30 minutes of frequent washing between cumulative additions. Responses were calculated as the % inhibition of the histamine-induced tone. PD<sub>50</sub> values for each agonist were calculated and those obtained from 5 different animals were averaged and the s.e.m. calculated. Equi-effective molar ratios (EMR) were calculated in the following way: IC<sub>50</sub> for the analogue / IC<sub>50</sub> for PGE<sub>2</sub> (second curve) in the same preparation. EMR from single preparations obtained from 5 different animals were averaged and the s.e.m. calculated.

#### *TP receptor studies*

*Agonists:* Two cumulative concentration-response curves for U46619 were obtained on each tissue before testing the TP-receptor agonists. Tissues were allowed 30 minutes of frequent washing in between concentration-response curves. Responses were calculated as a % of the U 46619 maximum which was established in each preparation at the end of the experiment. The pD<sub>50</sub> values for each of the agonists were calculated and those obtained from 5 different animals were averaged and the s.e.m calculated. EMR values for each agonist were calculated in following way: EC<sub>50</sub> for the test compoud / EC<sub>50</sub> for U 46619 (second curve) in the same preparation.

*Antagonists:* The TP-receptor antagonists were added 20 minutes prior to establishing a third concentration-response curve to U 46619. Dose ratios were calculated as follows: EC<sub>50</sub> for U 46619 in the presence of antagonist / EC<sub>50</sub> for U 46619 in absence of the antagonist. Dose-ratios obtained from preparations from 5 different animals were averaged and s.e.m calculated.

### *Arterial preparations*

Rabbit superior mesenteric artery and was removed after exsanguination of animals and placed immediately in Krebs solution (as above). Pig gastro-epiploic artery was obtained after exsanguination of pigs (25-35 Kg) under Stesnil ( $20\text{mgkg}^{-1}$  intramuscularly) and pentobarbitone ( $20\text{mgkg}^{-1}$  intravenous) anaesthesia being used for other purposes. Dog mesenteric artery was obtained from dogs under pentobarbitone anaesthesia being used for other purposes. Human mesenteric artery was obtained from patients undergoing gastrointestinal surgery for a number of conditions. In all cases connective tissue and fat were removed from apparently healthy sections of artery and 4 rings (2-4 mm wide) obtained by transecting the artery. The rings were set up in 10 ml organ baths for isometric tension recording by Grass FT03 force displacement transducers coupled to a Grass polygraph. Arterial rings were stretched to an optimal tension of 1.5 g and readjusted to this level throughout the equilibration period (1 hr). All rings were initially contracted with  $100\ \mu\text{M}$  phenylephrine (PE) to establish the tissue maximum. Stable tone levels of 60-80% of the maximum were obtained in all preparations with 1-3  $\mu\text{M}$  PE. Responses of the dog mesenteric artery to PE were more variable and KCl, 10 or 15 mM, was used instead giving stable tone levels of 40-60 % of maximum. On each preparation two cumulative concentration-response curves to iloprost were obtained followed by one of the test compound. Since experiments showed no change in the responsiveness to iloprost between second and third exposures, equi-effective molar ratios (EMR) were calculated from  $\text{IC}_{50}$  values for iloprost (second curve) and the test compound. EMR derived from single preparations obtained from 5 different animals were averaged and s.e.m. calculated.

### *Graphs*

All graphs in this thesis show the arithmetic mean of responses. The bars represent  $\pm$  the standard error of the mean.

## RADIOLIGAND BINDING ASSAY

### *Preparation of platelet suspension*

Blood was collected by venepuncture from a forearm vein of human volunteers and mixed with ~20% volume of acid citrate-dextrose solution. The blood was then centrifuged at 250 g for 20 minutes. The platelet rich plasma (PRP) was then transferred to a clean tube and 5-10 ng/ml of PGI<sub>2</sub> added. A platelet pellet was prepared by further centrifugation of the PRP at 450 g for 20 minutes. The supernatant plasma was removed with a pasteur pipette before the pellet was carefully resuspended in ~50 mls of assay buffer (pH = 7.4): NaCl (100 mM), glucose (5 mM), Tris HCl (50 mM) with indomethacin (1 μM). The platelet suspension was kept at 37°C until use.

### *Radioligand binding assay*

The method used follows closely that of Narumiya et al (1986). Aliquots of the platelet suspension (100 μl) were added to Eppendorf tubes which already contained 0.02 pmol [<sup>125</sup>I]-PTA-OH (50 μl) and increasing concentrations of the displacing agents (50 μl). Each displacer was tested at six different concentrations in a 1, 3, 10, 30 etc. sequence and each concentration was tested in triplicate. Each tube was incubated at 37°C for 30 minutes. In the experiments in which the displacing agent was a TP receptor agonist, 4 nM cicaprost was included in the incubation mixture in order to prevent aggregation. Three tubes containing vehicle instead of displacing agent were also included, thus allowing measurement of the total binding of the radioligand. An additional three tubes contained 1 μM ONO11120 - which was used to determine the non-specific binding of the radioligand.

Following incubation, the tubes were centrifuged at 16,000 g for 1 minute in a MSE 'Centaur 2' centrifuge. and the supernatant removed by tapping the tube on absorbent paper. The pellets were then gently washed with 1 ml of cold (0 °C) assay buffer, which was discarded and any remaining solution removed from the tubes using a cotton bud. The

radioactivity present in each tube was measured by a gamma counter (LKB, Universal Gamma Counter).

### *Results*

The displacement to each concentration of displacer is expressed as a % of the maximum specific binding, calculated by subtraction of the non-specific binding from the total binding obtained in each assay. The data was plotted as % specific binding versus log of the concentration of displacer and the IC<sub>50</sub> (concentration of displacer to cause 50% inhibition of specific binding) calculated from the graph. The relationship between IC<sub>50</sub> and displacer K<sub>d</sub> is given below

$$IC_{50} = \frac{K_d}{1 + [L]/K_L}$$

Where L is the radioligand concentration and K<sub>L</sub> is the dissociation constant if the radioligand.

When [L] is << [K<sub>L</sub>], then the IC<sub>50</sub> of each displacer can be taken to represent its K<sub>d</sub> value. In this study this study the K<sub>d</sub> of the ligand of ~20 nM (Mais et al, 1985a; Narumiya et al, 1986; Halushka et al, 1987) is considerably higher than the ligand concentration of 0.1 nM.

Responses and K<sub>d</sub> values are expressed as arithmetic means (± s.e.m) .

Chapter 3  
IP-Receptor Studies

## INTRODUCTION

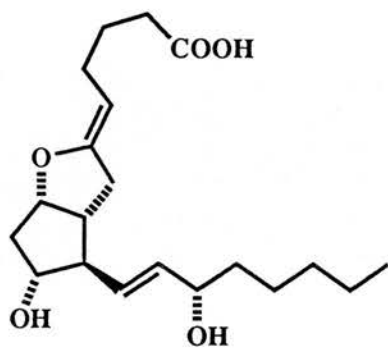
### *Platelet and vascular actions*

Moncada et al (1976) found that microsomal preparations of pig and rabbit aorta and pig mesenteric artery transformed prostaglandin endoperoxides into an unstable substance (then named PGX), which differed from all currently known prostaglandins and thromboxanes (or their metabolites). PGX was found to have potent platelet antiaggregatory properties and relaxed strips of rabbit coeliac and mesenteric artery (Bunting et al, 1976a and b). Subsequently, Johnson et al (1976) elucidated the structure of PGX and it was renamed prostacyclin (PGI<sub>2</sub>). Since then prostacyclin has been shown to be a potent inhibitor of platelet aggregation (0.5-20 nM) *in vivo* in a wide range of species (Sturzebecher et al, 1986). Prostacyclin elevates cyclic AMP which in turn prevents platelet aggregation independently of its effects on cytosolic free Ca<sup>2+</sup> (Gorman et al, 1977). In human platelet rich plasma (PRP), PGD<sub>2</sub> and PGE<sub>1</sub> are 20 and 40 times less active than PGI<sub>2</sub> as inhibitors of aggregation (Whittle et al, 1978). Experiments have shown that PGE<sub>1</sub> inhibits aggregation via the PGI<sub>2</sub> (IP) receptor while PGD<sub>2</sub> has a distinct site of action (Whittle et al, 1978; Miller and Gorman, 1979). In addition, PGI<sub>2</sub> has been shown to disaggregate white thrombi in a system in which blood from animals or humans is superfused over collagen strips (Bandt et al, 1984). When infused into humans PGI<sub>2</sub> reduces platelet aggregability, dissipates circulating platelet aggregates and prolongs the bleeding time (Gryglewski et al, 1978; Szczeklik and Gryglewski, 1979). In addition, PGI<sub>2</sub> has been demonstrated to exert this anti-thrombotic action in many animal models of venous and arterial thrombosis (Witt et al, 1986).

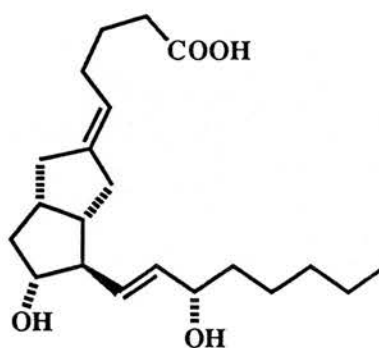
However, prostacyclin also has a potent dilatory action on vessels from a number of species, and *in vivo* it causes a drop in systemic blood pressure and reduces peripheral resistance by dilatation of arterioles. In humans this action causes reddening of the face and neck and unpleasant vascular headaches (see Whittle and Moncada, 1984).

In view of these two major actions of PGI<sub>2</sub> recent chemical effort has centred on the synthesis of chemically and metabolically stable PGI<sub>2</sub>

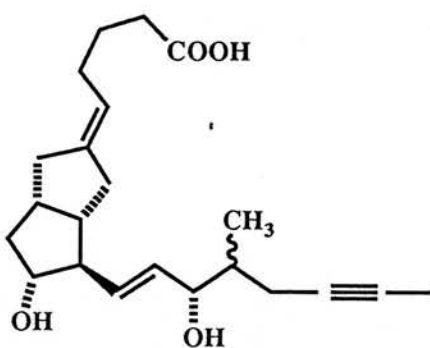
Figure 3.1: Structure of PGI<sub>2</sub> analogues and EP 157



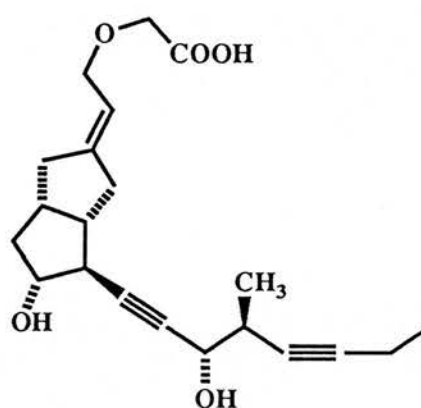
PGI<sub>2</sub>



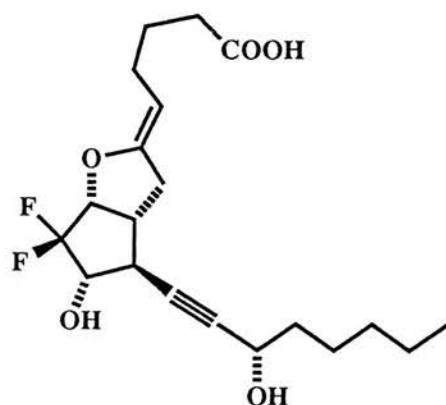
Carbacyclin



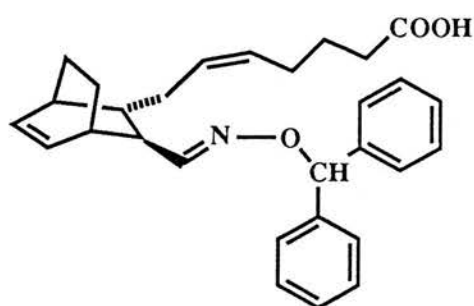
Ilprost



Cicaprost



MMM-I-135



EP 157

analogues which retain the anti-thrombotic actions but have reduced vasodilatory activity.

The chemical instability of PGI<sub>2</sub> (Fig. 3.1) is due to the strained enolether structure which can be protonated by the nearby carboxylic function. Stabilization has been obtained by replacing the oxygen of the enolether with a carbon, sulphur or nitrogen atom (Skuballa et al, 1987). In carbacyclin (Fig. 3.1), the substitution is a carbon atom, and this compound has been shown to be 3-10 times less active than PGI<sub>2</sub> as an inhibitor of platelet aggregation and in reducing systemic arterial blood pressure in a number of species (Whittle et al, 1980). Further modifications of the carbacyclin structure have been shown to produce increased agonist potency at IP receptor sites on both platelet and vessel. In iloprost (ZK 36374) (Schorr et al, 1981) there is an additional single methyl group at C16 and an acetylenic group at C18, and this compound has been shown to be equipotent with PGI<sub>2</sub> both as an inhibitor of platelet aggregation and as a vasodilator (Casals-Stenzel et al, 1983).

Iloprost has also been shown to be orally active in man with a half-life of 20-30 minutes (Fitscha et al, 1987), however, in the clinical situation it would be useful to have an even greater duration of action. The relatively short half-life of iloprost is due to rapid metabolism, primarily by  $\beta$ -oxidation of the upper side chain (Krause et al, 1984). The most recent PGI<sub>2</sub> analogue to be synthesized, cicaprost (Skuballa et al, 1986), (Fig. 3.1) contains an ether oxygen in the 3 position to prevent  $\beta$ -oxidation. In addition, increased potency has been obtained by: (a) converting the 13,14 double bond into a triple bond (b) introduction of a pure 16(S) methyl group and (c) addition of a further methyl group at C20 (it is notable that unlike cicaprost, iloprost is a mixture (approx. 50:50) of 2 diastereoisomers epimeric at C16: Skuballa and Vorbruggen, 1983). Cicaprost (ZK 96480) has been shown to be 5-12 fold more potent than PGI<sub>2</sub> with respect to *in vivo* hypotensive and antiaggregatory actions, with a duration of action of 5-48 hours (Mueller et al, 1984; Sturzebecher et al, 1986).

There is no indication from the above studies that the IP receptor on the platelet differs from that on blood vessels. However, Whittle and



Moncada (1984) used a 'selectivity ratio' to give an indication of the separation between antiaggregatory and vasodilatory actions of a series of PGI<sub>2</sub> analogues. They found that it was possible to lose platelet activity while retaining vascular actions, and on this basis proposed that there may be differences in the structural requirements for binding to these sites. However, as pointed out by the authors the data have to be interpreted with caution: they have compared *in vivo* (cardiovascular) results with *in vitro* (platelet) and the data have been obtained from different species (rat blood pressure *vs* human platelet).

Later studies have demonstrated that certain PGI<sub>2</sub> analogues display antagonist actions on the vasculature while retaining antiplatelet (agonist) actions (Fassina et al, 1985; Corsini et al, 1987; Olivia et al, 1989). However, the interpretation of these results is called into question by recent findings that a number of PGI<sub>2</sub> analogues (iloprost and carbacyclin) and indeed PGI<sub>2</sub> itself, have significant EP<sub>1</sub> agonist activity (Dong and Jones, 1982; Dong et al, 1986; Sheldrick et al, 1988; Lawrence and Jones, 1988). EP receptors are known to mediate contractile responses in a number of tissues and these may oppose any IP-mediated relaxation via physiological antagonism.

There appears to be a need for comprehensive study of the actions of a number of PGI mimetics in both the platelet and vasculature from a range of species. We have investigated the relaxant action of iloprost, cicaprost and carbacyclin in visceral arterial vessels *in vitro* from man, pig, rabbit and dog and compared this to their antiaggregatory action in platelets from the same species. Since iloprost appears, from the literature (see Gryglewski and Stock, 1987), to be the most widely studied PGI<sub>2</sub> analogue it was used as the standard agonist. Any EP-mediated contractile actions of the compounds could be assessed on the basis of (1) the effect of the EP<sub>1</sub>-receptor antagonist, AH 6809 (Coleman et al, 1985) (2) the fact that cicaprost has been shown to be highly selective for the IP receptor with little EP<sub>1</sub> receptor activity (Dong et al, 1986).

In addition, we have further investigated the actions of EP 157. Earlier work (Armstrong et al, 1986) has shown that the endoperoxide analogues, EP 157 and EP 035, behave as specific thromboxane receptor

antagonists in isolated smooth muscle preparations which are prostacyclin-insensitive (rabbit aorta, dog saphenous vein and guinea-pig trachea). However, in human platelets EP 157 inhibits aggregation induced by ADP, PAF and thromboxane, maximally activates membrane-bound adenylate cyclase and displaces [<sup>3</sup>H] iloprost binding. These actions suggest that the compound is an agonist at platelet IP receptors - this is of particular interest in view of the fact that EP 157 bears little structural resemblance to PGI<sub>2</sub> (Fig. 3.1). Thus, EP 157 has been included in the study of vascular IP receptors.

#### *Actions in gastrointestinal smooth muscle of the guinea-pig ileum*

Like PGE<sub>2</sub>, prostacyclin (PGI<sub>2</sub>) is synthesised in the human and animal intestinal tract (Bennet et al, 1971; Whittle, 1981). As discussed above PGI<sub>2</sub> appears to be a relaxant agent in a range of vascular smooth muscle preparations from different species. However, Gaion and Trento (1983) have shown that PGI<sub>2</sub> (1 nM-1 μM) produces concentration-dependent contractions of the longitudinal muscle of the guinea-pig ileum. They found that at a concentration near the EC<sub>50</sub> (20 nM), these contractions were abolished by TTX (10 nM), and inhibited by atropine (1-30 nM) and hemicholinium-3 (20 μM). In addition, PGI<sub>2</sub> potentiated electrically-induced contractions while having no effect on the response to exogenous Ach. On the basis of these results they proposed that PGI<sub>2</sub>-induced contractions are mediated by Ach released from cholinergic neurones as a consequence of increased excitability of the cell bodies (see 'Action of TTX'). Further evidence for this mechanism of action was presented by Gaion and Trento (1984b) in finding that the action of PGI<sub>2</sub> was inhibited by noradrenaline (30-300 nM), morphine (10-50 nM) and the purinergic receptor agonist N<sup>6</sup>-phenylisopropyl adenosine (PIA) (10-50 nM). Noradrenaline, enkephalins and adenine nucleotides have all been identified in intestinal nerves of the guinea-pig and other species (Furness and Costa, 1982), and are known to presynaptically modulate cholinergic function (Paton and Vizi, 1969; Grintzler et al, 1975; Szerb, 1982; Moody and Burnstock, 1982.).

However, these results appear to be at variance with earlier work showing that PGI<sub>2</sub> has a contractile action in the guinea-pig ileum in

the presence of high concentrations of atropine (Moncada et al, 1976; Kennedy et al, 1982), although under these conditions PGI<sub>2</sub> appears to be considerably less active (EC<sub>50</sub>= 2.7 μM). Gaion and Gambaratto (1987) later confirmed these results showing that in the presence of TTX (1 μM) or atropine (30 nM) 1 μM PGI<sub>2</sub> retained 20-30% of its contractile response. In addition, this response was unaffected by procaine or by quercetin, although both drugs inhibited contractions in the absence of TTX. There is evidence that procaine interferes with Ach release (Paton et al, 1971) leaving the direct response to some agonists unaffected (Bury and Mashford, 1976). This would also appear to be true for quercetin as it was found to have no effect on direct contractions induced by Ach. The authors suggest that at high concentrations, in addition to a neuronal component, PGI<sub>2</sub> has a direct contractile component of action mediated by IP receptors present on the smooth muscle cells. However, in view of the EP<sub>1</sub> agonist action of PGI<sub>2</sub> demonstrated by Dong et al (1986), an obvious explanation for the TTX/atropine-resistant component of action would be a direct agonist action of PGI<sub>2</sub> on the EP<sub>1</sub> receptors known to be present in the guinea-pig ileum (see Chapter 4).

In view of the unique nature of this IP receptor linked to neurotransmitter release we have investigated the action of a number of PGI<sub>2</sub> analogues in this system. The nature of the transmitters released by IP-receptor activation has been studied using the muscarinic receptor antagonist, atropine and the substance P receptor antagonist, SP150. In addition, EP<sub>1</sub> receptor activity of these analogues was studied using the EP<sub>1</sub> receptor antagonist, AH 6809.

Some details of the physiology of the guinea-pig ileum and the mechanism of action of the compounds used to inhibit enteric nerve function are given below:

### *Physiology*

The gastrointestinal tract of the guinea-pig ileum consists of two muscle layers and embedded between these two layers lies the enteric nervous system. The majority of enteric neurones belong to the myenteric plexus (Auerbach's), which lies just underneath the outermost muscle layer of the gut wall, the longitudinal muscle, being sandwiched

between this layer and the major gut muscle layer, the circular muscle. The main role of these nerves is to bring about the ordered patterns of contraction and relaxation seen during peristalsis.

The neurones of the myenteric plexus contain many neurotransmitters, and neuromodulators including Ach, enkephalin, 5HT, VIP, substance P, ATP, cholecystokinin, somatostatin, neuropeptide Y, galanin and GABA (North, 1982; Jensen et al 1987). Evidence would suggest that Ach is the major excitatory transmitter from the myenteric plexus of the guinea-pig ileum to the cells of the longitudinal muscle layer (Paton, 1957) and also within the plexus (Nishi and North, 1973). Electrical stimulation of the enteric nervous system leads to the release of several substances (North, 1982), of which Ach is the most readily detectable and the most widely studied (Szerb, 1982). In addition, peristalsis and electrically-induced twitches of the guinea-pig ileum are inhibited to a large extent by atropine (Kosterlitz and Lees, 1964 ; Hirst, 1979.). However, there is also evidence that besides Ach, substance P (SP) is a major excitatory transmitter in the gastrointestinal tract. SP occurs within very large numbers of nerve processes and in about 5% of cell bodies in the myenteric plexus (Furness and Costa, 1980). A role for SP in peristalsis is most likely because there seems to be an arrangement of SP neurones capable of maintaining propulsive motility in the presence of atropine (Bartho and Holzer, 1985).

#### *Action of morphine*

It has been known for a number of years that morphine inhibits the reflex peristaltic contractions and longitudinal muscle contractions of the isolated guinea-pig ileum (Kosterlitz and Robinson 1957, Gyang et al 1964). Schaumann (1957) found that morphine decreases the spontaneous release of acetylcholine (Ach) from the guinea-pig ileum without inhibiting its synthesis or release from ground ileal tissue. These observations led him to suggest that morphine reduces the excitability of the neurones that release Ach - a conclusion which still stands today. In addition, Paton (1957) showed that while morphine did not affect the contractions of the tissue to Ach, it depressed twitches of the tissue induced by coaxial stimulation. These early observations have been confirmed by later electrophysiological studies. Extracellular

recording has shown that morphine and enkephalin (1 nM-1  $\mu$ M) will inhibit firing of myenteric neurones, and almost all neurones tested were sensitive to inhibition (North and Williams, 1977). Intracellular recording from myenteric neurones has revealed that most cells are hyperpolarised by morphine (North and Tonini, 1977). Furthermore, the hyperpolarisation takes place primarily on the cell process - this has been shown to prevent action potential propagation along the process of the myenteric neurone (Morita and North, 1981).

While it has generally been thought that endogenous opioids inhibit peristalsis and twitch of the electrically stimulated ileum by inhibiting the release of enteric Ach, there is evidence that additional mechanisms may be involved (Kromer and Schmidt, 1982). It has been shown that effective peristalsis can be evoked in the presence of atropine and this effect is abolished by the [Met] - enkephalin analogue FK33-842 (Bartho et al 1982a). There is evidence that atropine-resistant contractions of the guinea-pig ileum in response to electrical stimulation are mediated by substance P: these have been shown to be inhibited by morphine (Bartho et al, 1982b). In addition, Donnerer et al (1984) could only demonstrate an appreciable release of substance P immunoreactivity during peristalsis in the presence of naloxone. These results may reflect modulation of <sup>the release of</sup> enteric substance P by opioids (Bartho and Holzer, 1985).

#### *Action of TTX*

TTX is known to block the passage of sodium ions through axonal membrane channels, and as sodium currents are important in the generation of action potentials TTX will block impulse conduction. However, TTX is without effect on either the release of transmitter from nerve terminals or the sensitivity of the post-synaptic membrane to the transmitter (Narahashi, 1974). Hence, preparations treated with TTX are useful for studies on the mechanism of transmitter release .

## RESULTS

### VASCULAR RELAXATION

#### *Concentration-response curves*

*PGI analogues:* Log concentration-response curves obtained on the human mesenteric artery, pig gastro-epiploic artery, rabbit mesenteric artery and the dog mesenteric artery are shown in Fig. 3.2. Sensitivity to iloprost decreased in the order man, dog, rabbit, pig and cicaprost was slightly more active than iloprost on all four preparations. EP 157 showed threshold relaxation at 20 nM in the human (Fig. 3.7A) and 200 nM in the dog, rabbit and pig (Fig. 3.7C). At the highest concentration tested (6.7  $\mu$ M) it gave relaxations of 70-95% of the iloprost maximum. In the pig gastroepiploic artery, concentration-response curves to carbacyclin were shallow reaching a maximum of ~40% at 100 nM. At concentrations above this carbacyclin produced discrete contractions of the preparation (see Fig. 3.7C).

*PGE analogues:* In vessels from man, pig and rabbit PGE<sub>2</sub> was highly active as a relaxant, however in the pig and rabbit the curves reversed at concentrations above 50 nM (see Fig. 3.3). 16,16-Dimethyl PGE<sub>2</sub> contracted all three preparations; the pig vessel was considerably more sensitive (EC<sub>50</sub>, 5 nM) than those of the human and rabbit (see Fig. 3.3).

#### *Action of AH 6809*

AH 6809 (10  $\mu$ M) slightly accentuated the relaxant action of PGE<sub>2</sub> in the rabbit mesenteric artery and inhibited the reversal of the curve (Fig. 3.4). However, in the pig vessels (Fig. 3.5) the blocker had no effect on the concentration-response curve of carbacyclin or 16,16-dimethyl PGE<sub>2</sub>.

#### *Action of EP 092*

In the pig EP 092 (1  $\mu$ M) caused a parallel rightward shift in the concentration-response curve of U46619 consistent with a pA<sub>2</sub> of 7.6. However, this concentration of blocker had no effect on the

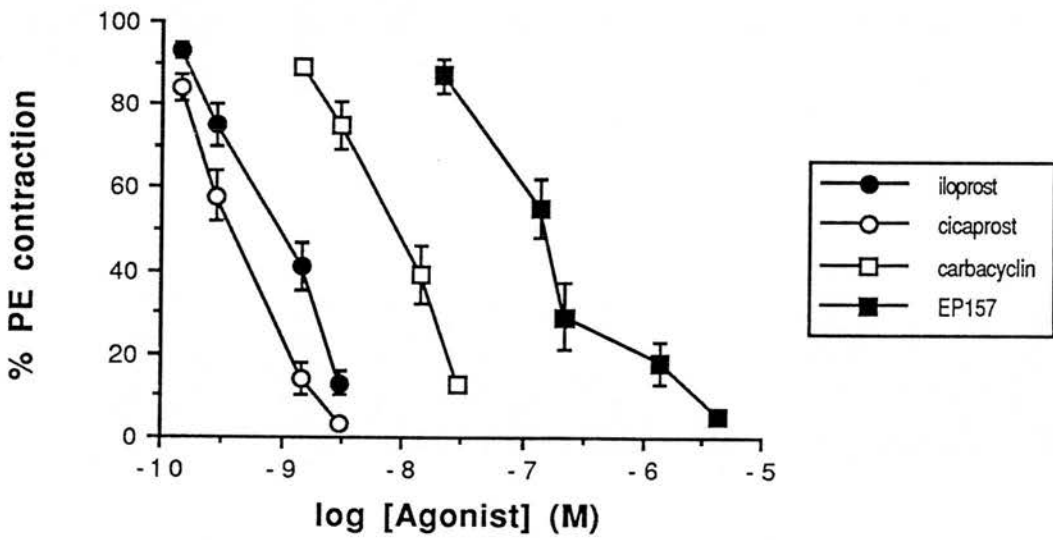
Figure 3.2: Log-concentration response curves for relaxation of

(a) human mesenteric artery (b) pig gastro-epiploic artery

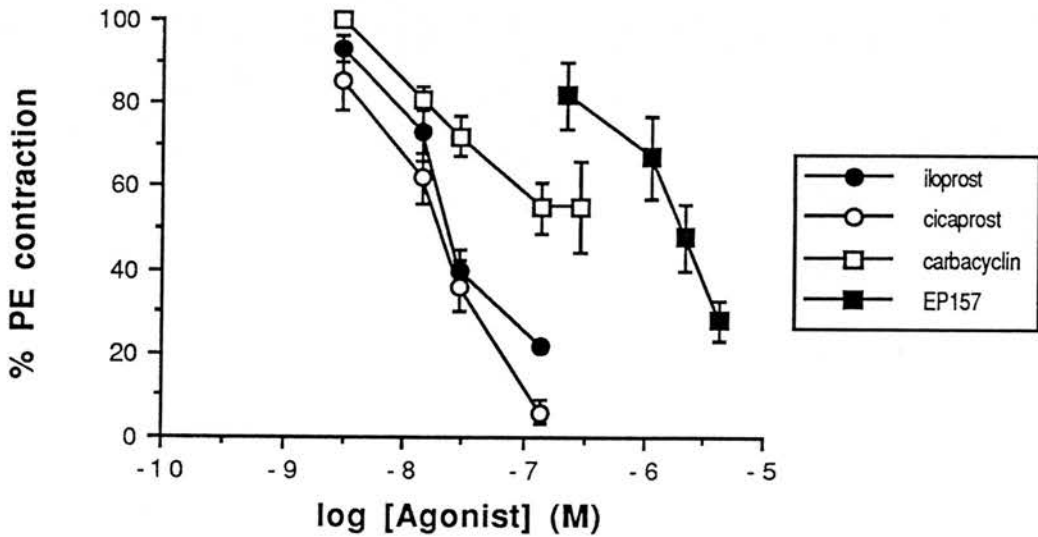
(c) rabbit mesenteric artery (means of 6-9 experiments) and

(d) dog mesenteric artery (means of 4-6 experiments).

a)

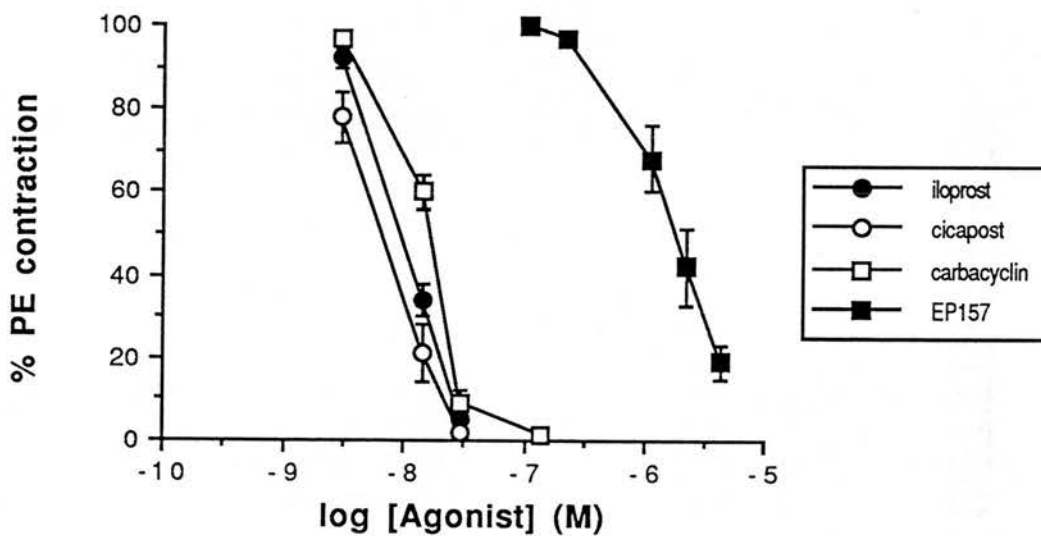


b)



(bars represent the s.e.m)

c)



d)

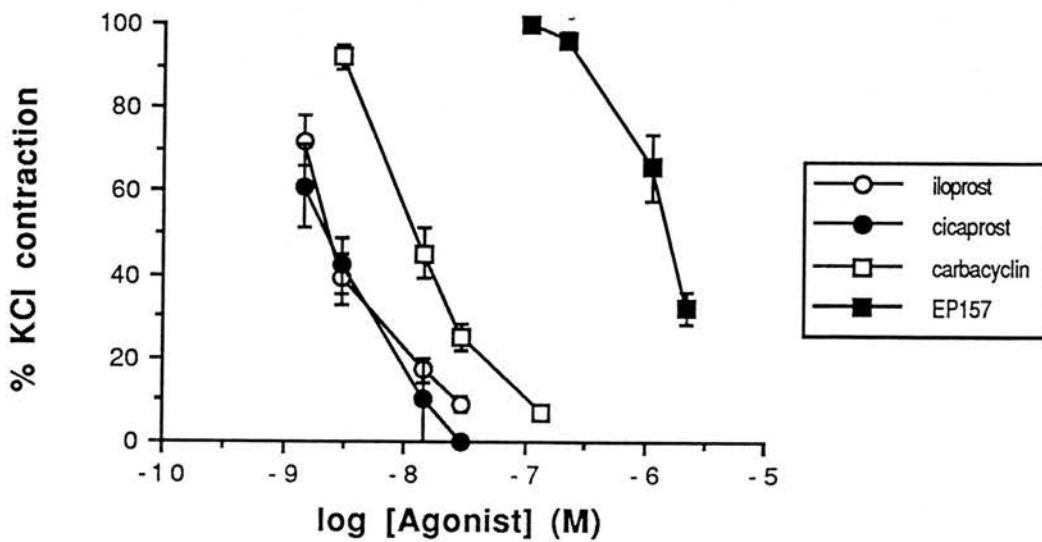




Figure 3.3: Log-concentration response curves of (a) PGE<sub>2</sub> (b) 16,16 dimethyl PGE<sub>2</sub> for relaxation/contraction of visceral arteries from the pig, human and rabbit (mean of 2 expts.).

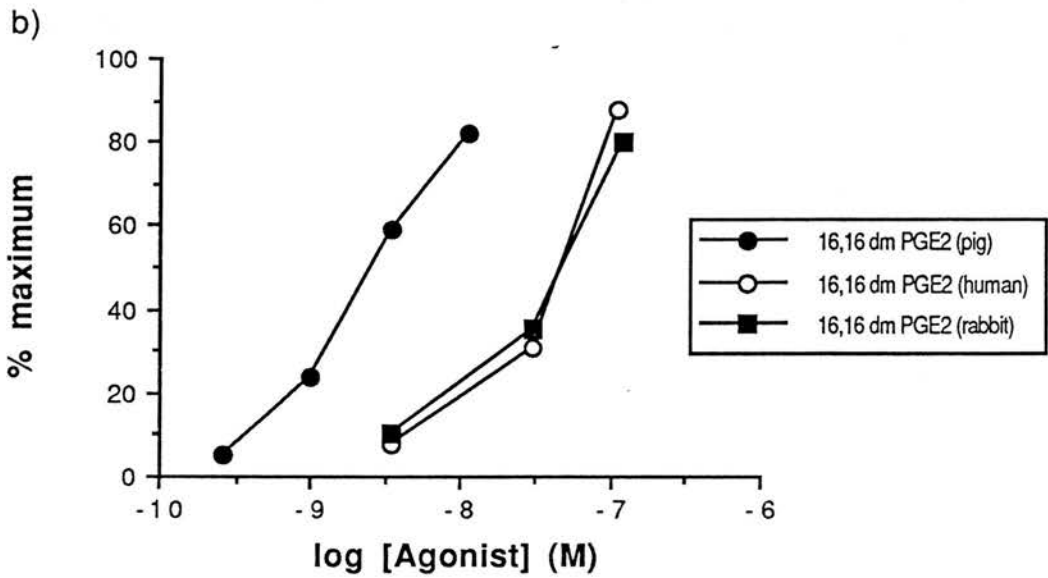
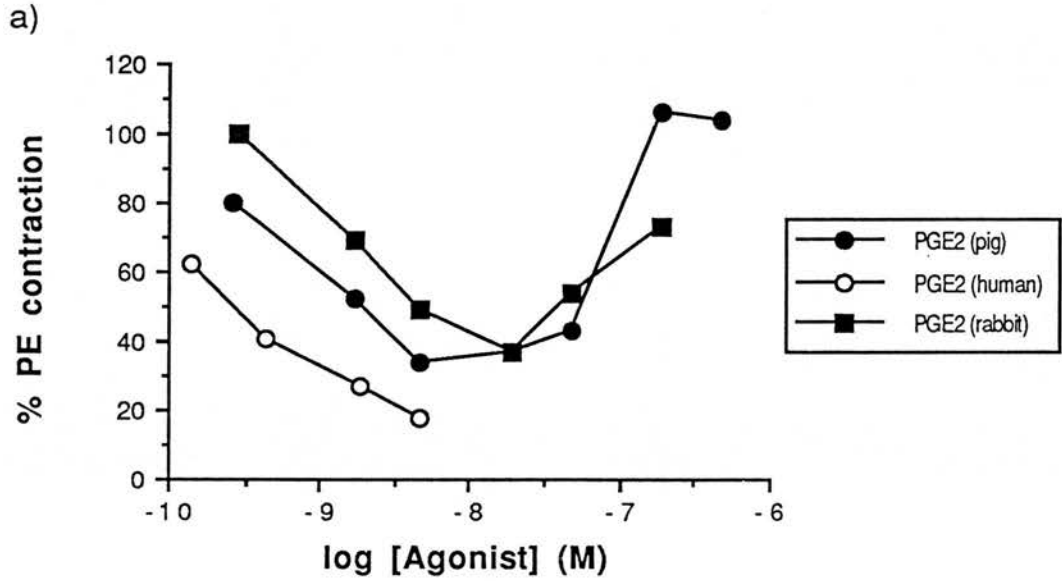


Figure 3.4: Effect of AH 6809 (10 $\mu$ M) on log concentration-response curves of PGE<sub>2</sub> in the rabbit mesenteric artery (mean of 2 expts.).

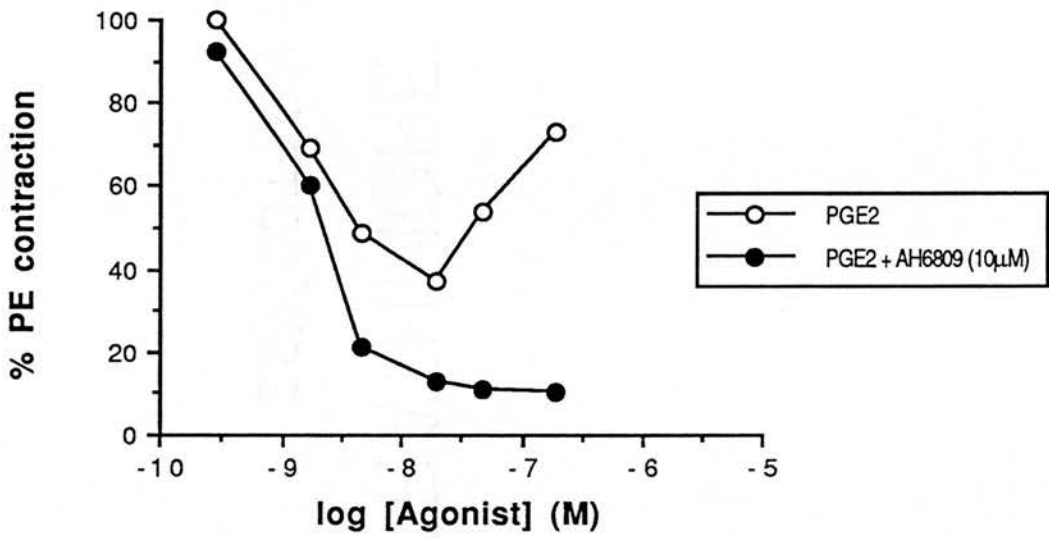
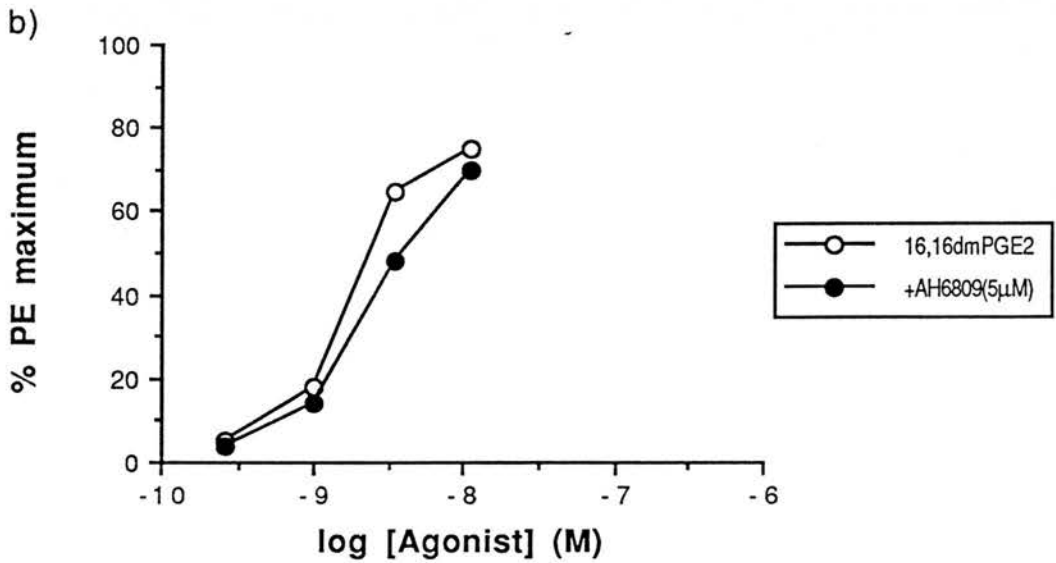
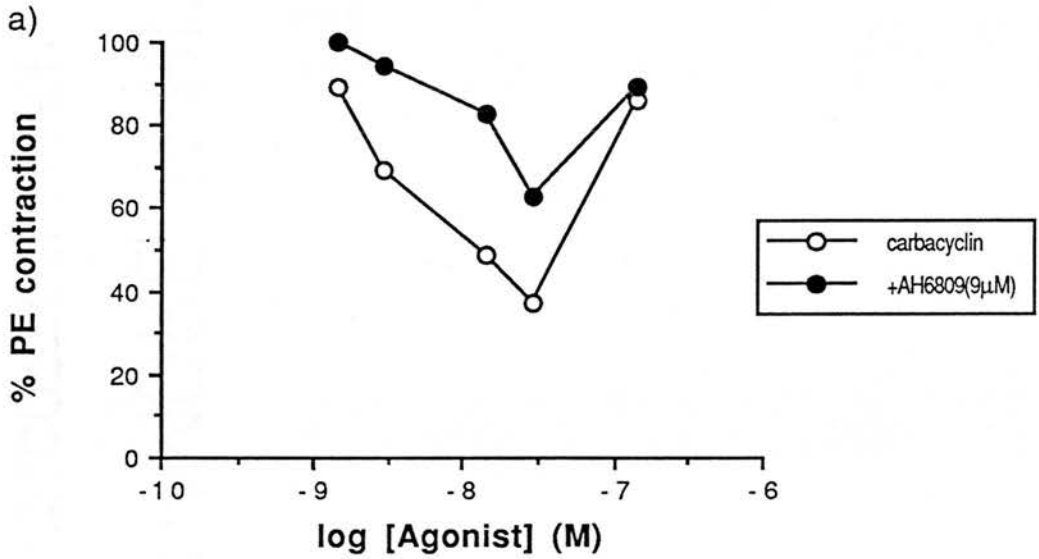


Figure 3.5: The effect of AH 6809 on the log concentration-response curves of (a) carbacyclin and (b) 16,16-dimethyl PGE<sub>2</sub> in the pig gastro-epiploic artery (mean 2 expts.).



concentration-response curve of carbacyclin or 16,16-dimethyl PGE<sub>2</sub>  
(Fig. 3.6)

Figure 3.6: Effect of EP 092 (1 $\mu$ M) on log concentration-response curves of (a) U 466219 (b) carbacyclin and (c) 16,16 dimethyl PGE<sub>2</sub> in contraction/relaxation of the pig gastro-epiploic artery (mean of 2 expts.).

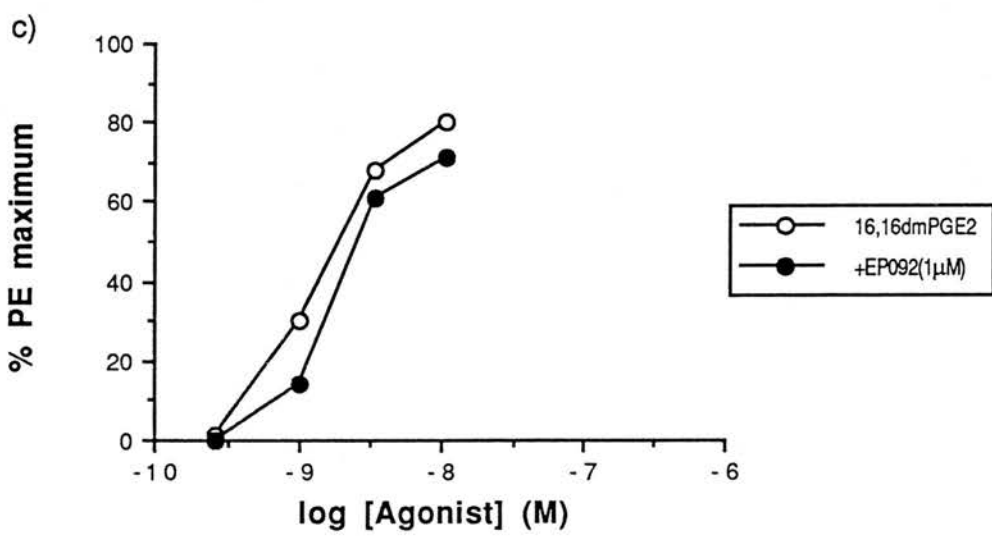
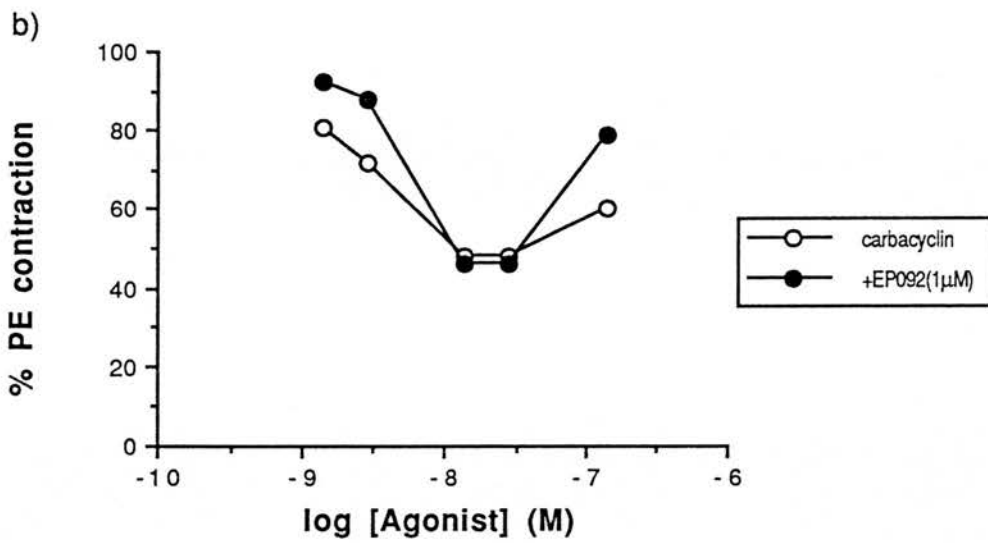
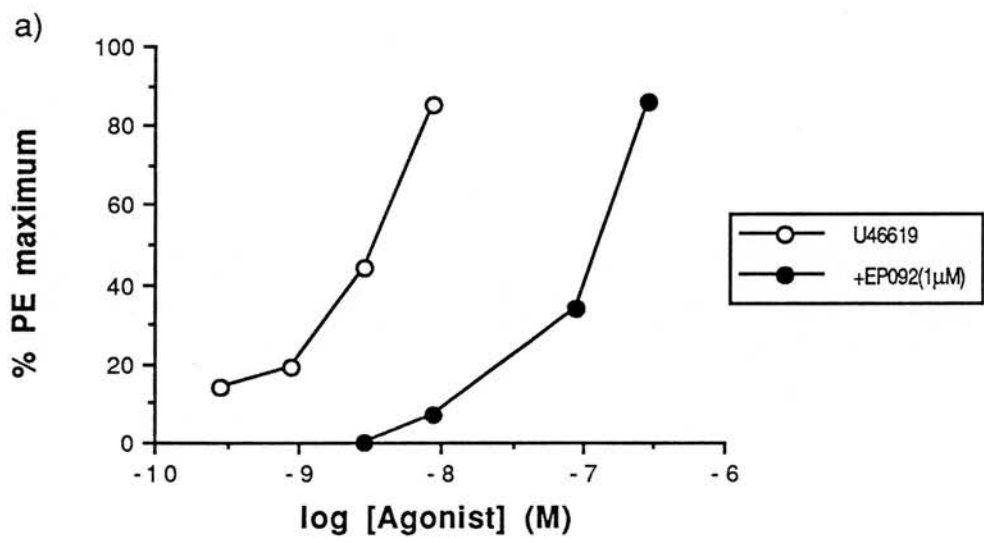


Figure 3.7A: Trace showing the relaxation of the human mesenteric artery, precontracted with phenylephrine ( $2\mu\text{M}$ ), by (a) iloprost and (b) EP 157.

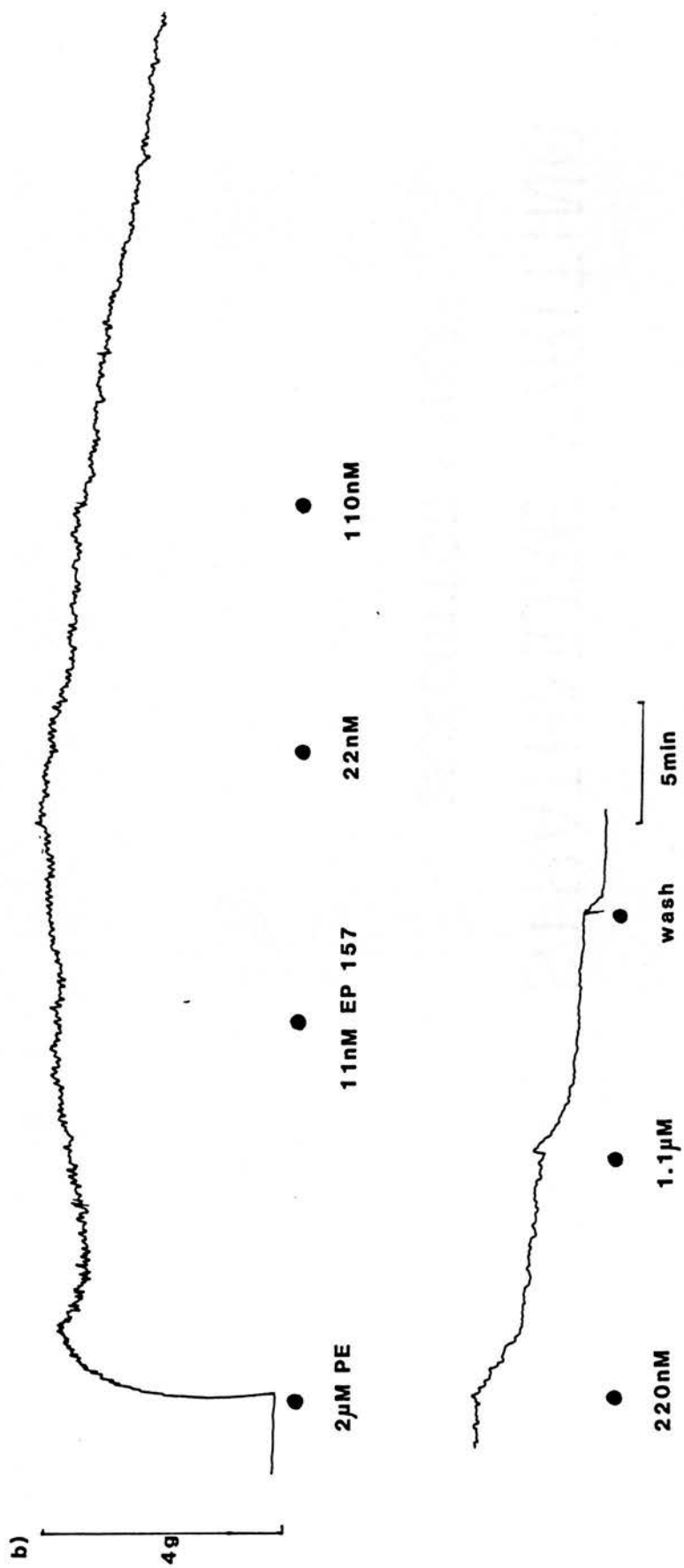
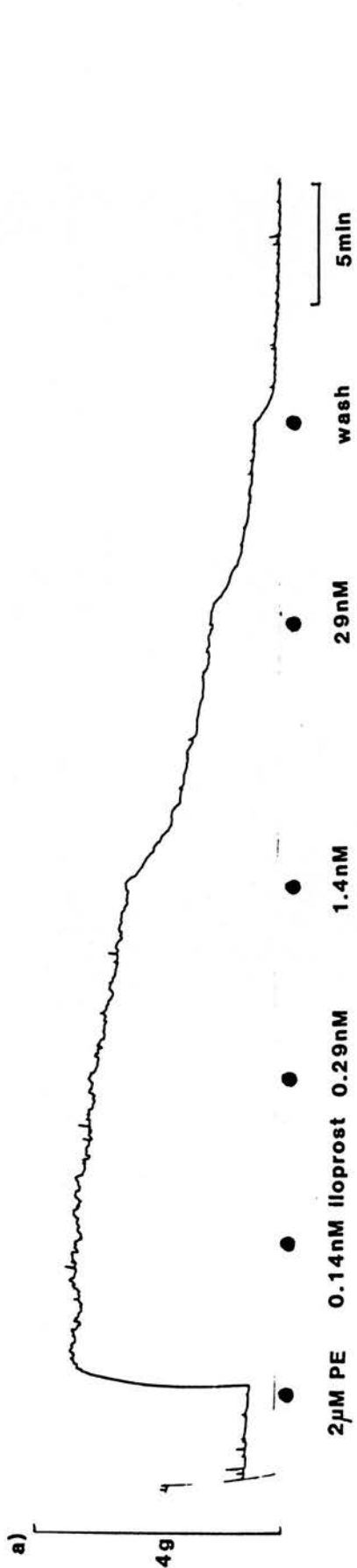




Figure 3.7B: Trace showing the relaxation of the rabbit mesenteric artery precontracted with phenylephrine ( $3\mu\text{M}$ ) by (a) iloprost and (b) carbacyclin.

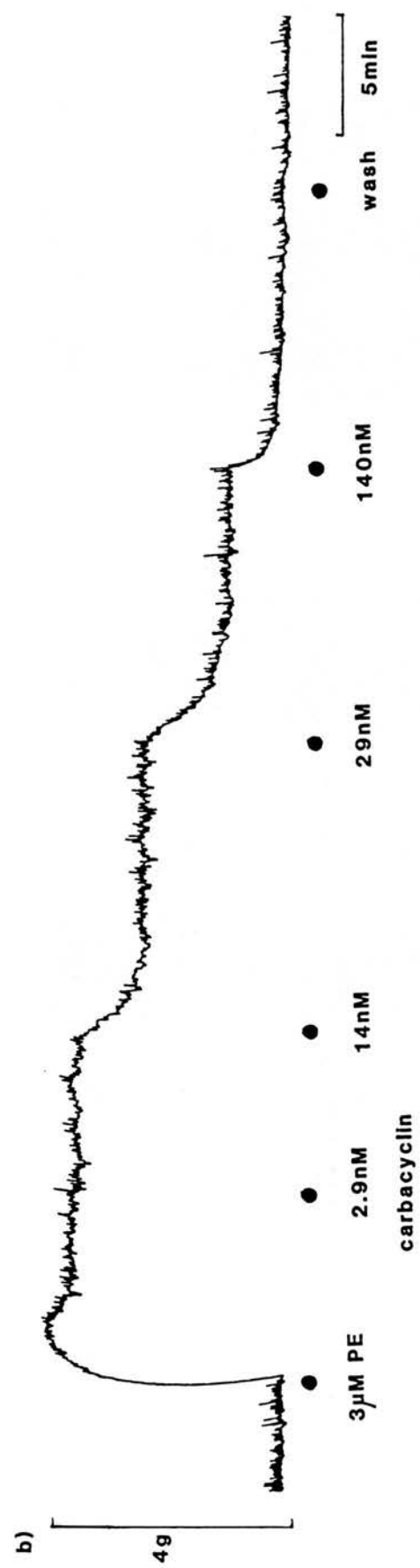
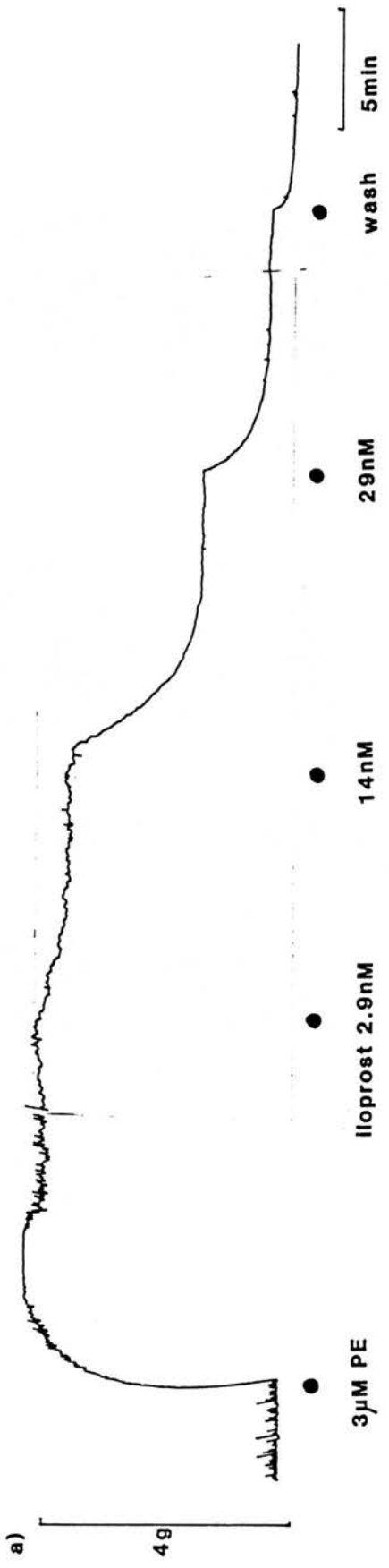
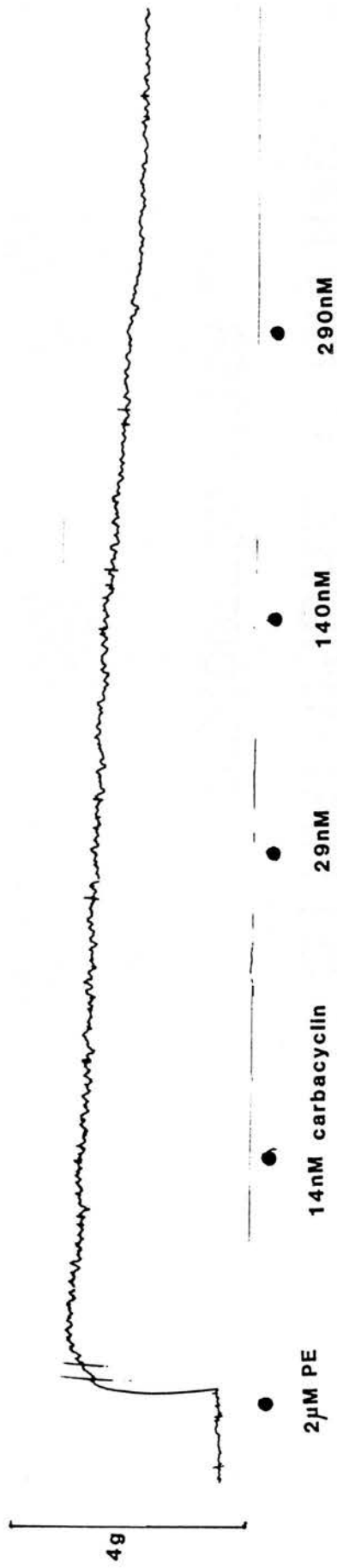


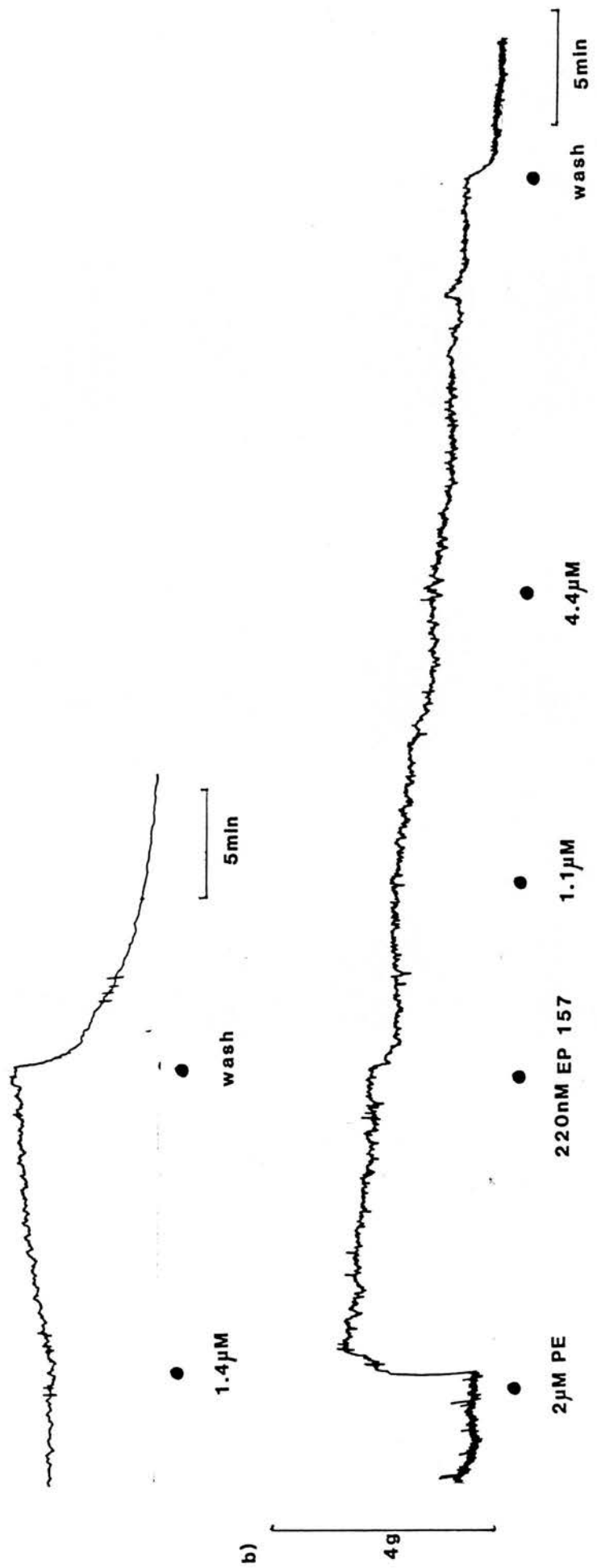
Figure 3.7C: Trace showing the relaxation of the pig gastro-epiploic artery precontracted with phenylephrine ( $2\mu\text{M}$ ) by (a) carbacyclin and (b) EP 157.

a)



45

b)



## GUINEA-PIG ILEUM

### *Concentration-response curves*

Log concentration-response curves on preparations untreated with antagonists/inhibitors are shown in Fig. 3.8. All the PGI analogues tested acted as contractile agents, the rank order of potency being cicaprost > iloprost > PGI<sub>2</sub> > MMM-I-135 > carbacyclin. The curves for cicaprost and MMM-I-135 reached a considerably lower maximum than those of PGI<sub>2</sub>, iloprost and carbacyclin. In addition, the curve for cicaprost appears to be bell-shaped, turning back on itself at concentrations of greater than 10 nM.

### *Action of morphine and TTX*

*Single doses of the prostanoids:* Morphine caused a dose-related inhibition of responses to single submaximal doses (which gave responses of 60-70% of the Ach maximum) of cicaprost, iloprost and carbacyclin (Fig. 3.9). The action of cicaprost (13 nM) was abolished by morphine (IC<sub>50</sub> = 13 nM). The contractile action of iloprost (14 nM) and carbacyclin (150 nM) could only be partially blocked by morphine (60% and 30% respectively). At 1 μM TTX exhibited an identical profile of inhibitory action to that of 1 μM morphine: the response to cicaprost was abolished and that to iloprost and carbacyclin partially inhibited (Table 3.1). The effect of 100nM on a single dose of cicaprost is shown in Figure 3.15A.

*Concentration-response curves:* Figure 3.10 shows the effect of morphine on the log concentration-response curves of the prostanoids. The curves of PGI<sub>2</sub> and iloprost were subject to a significant shift in the presence of 1 μM morphine. In addition, the log concentration-response curve of iloprost appears to plateau at a maximum of 55-60%. In contrast, the curve for carbacyclin was subject to a small shift which was not statistically significant. In the presence of 1 μM morphine cicaprost (see Fig. 3.15B) and MMM-I-135 were devoid of activity at concentrations of up to 1 μM.

Figure 3.8: Log concentration-response curves of (a) cicaprost and MMM-I-135 and (b) iloprost, PGI<sub>2</sub> and carbacyclin in the guinea-pig ileum (means of 4-6 expts.).

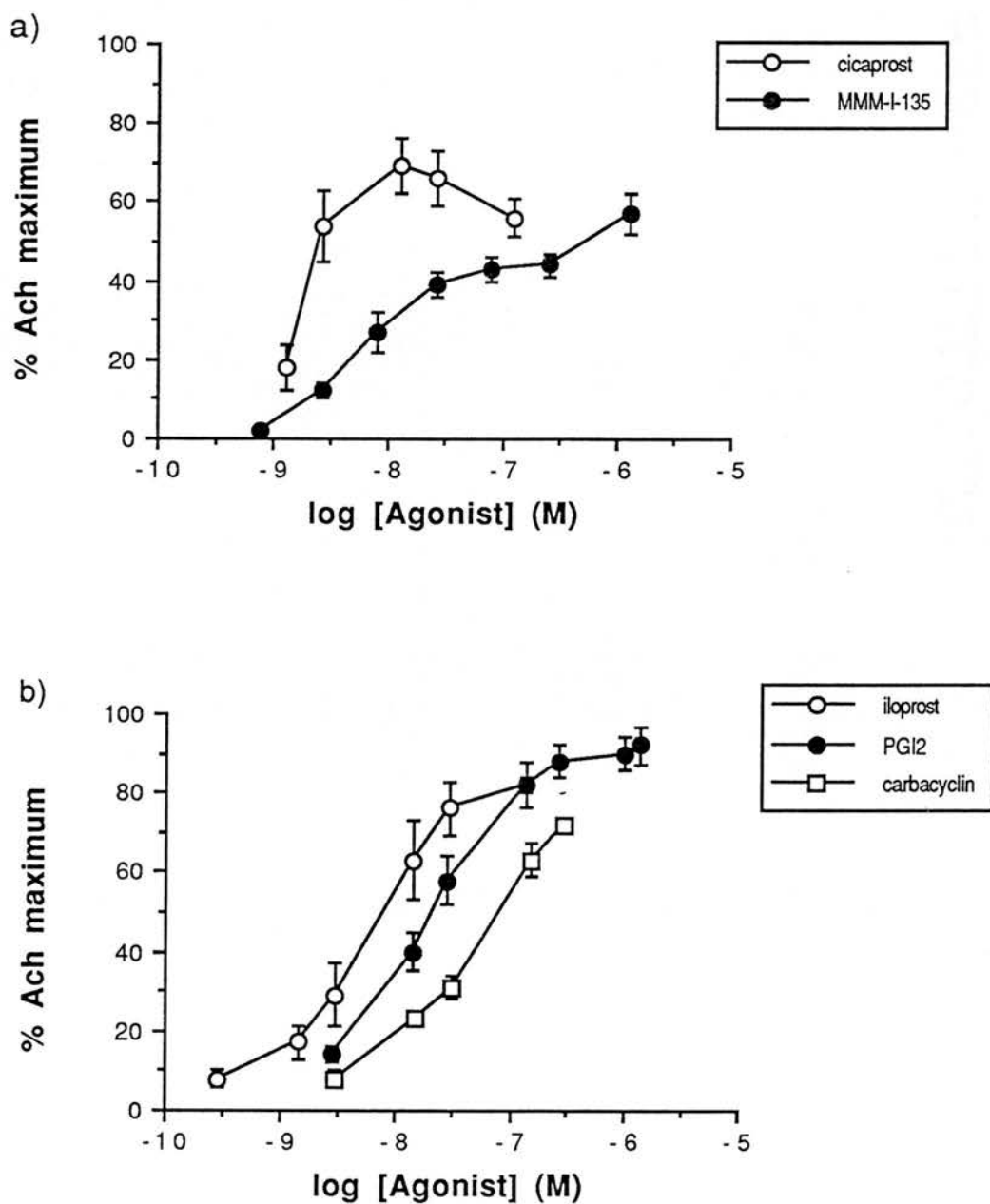


Figure 3.9: Log concentration-response curves for morphine vs single doses of PGE<sub>2</sub> (14nM), cicaprost (13nM), iloprost (14nM) and carbacyclin (150nM) (mean 4-6 expts.).

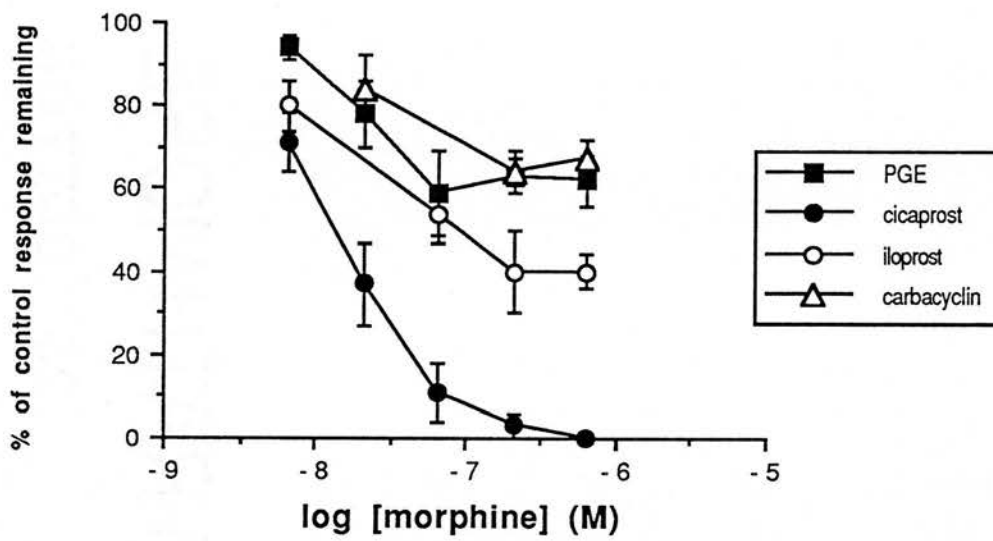


Table 3.1 : The effect of TTX (1 $\mu$ M), Morphine (1 $\mu$ M) and AH 6809 (1 $\mu$ M) on the response to single doses of PGE<sub>2</sub>, cicaprost, iloprost, carbacyclin and PGI<sub>2</sub> in the guinea-pig ileum (mean of 4-6 expts.). ( $\pm$  s.e.m)

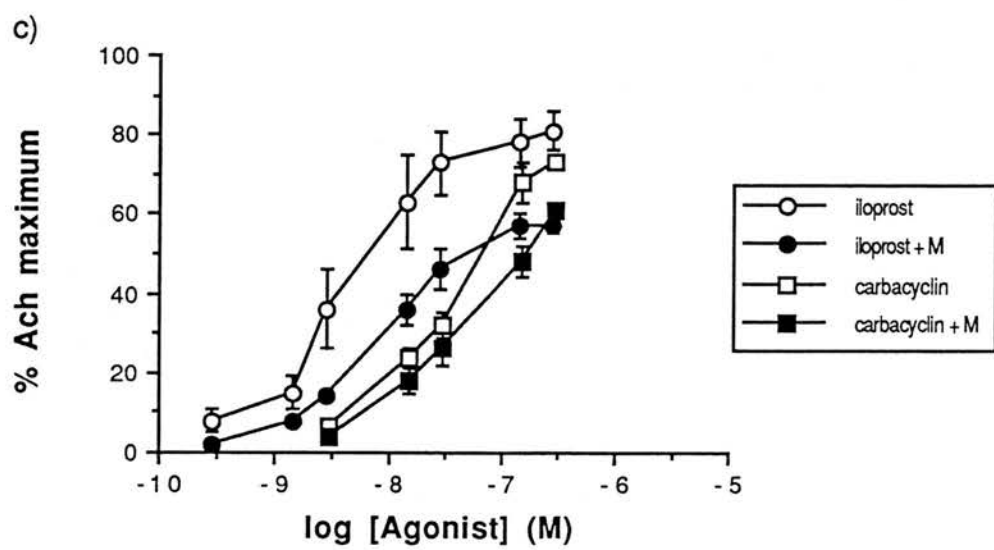
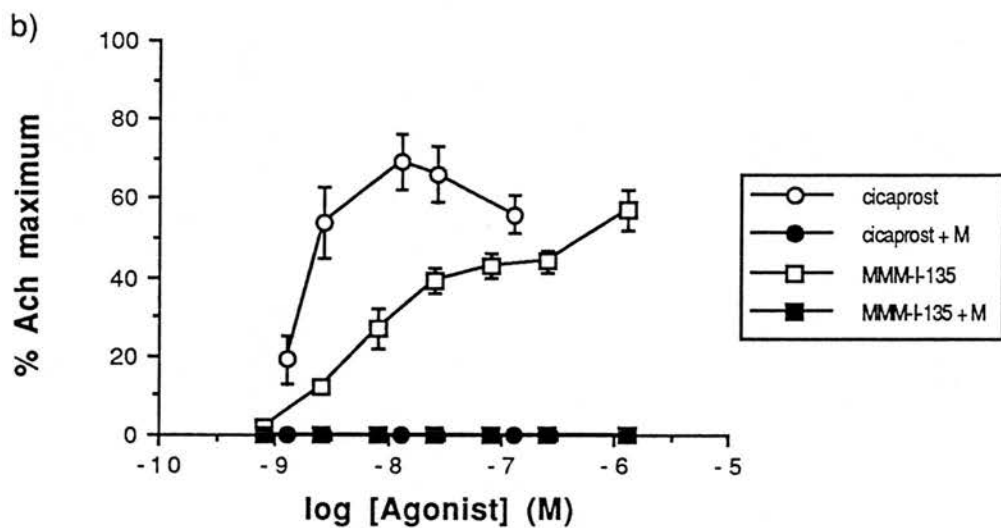
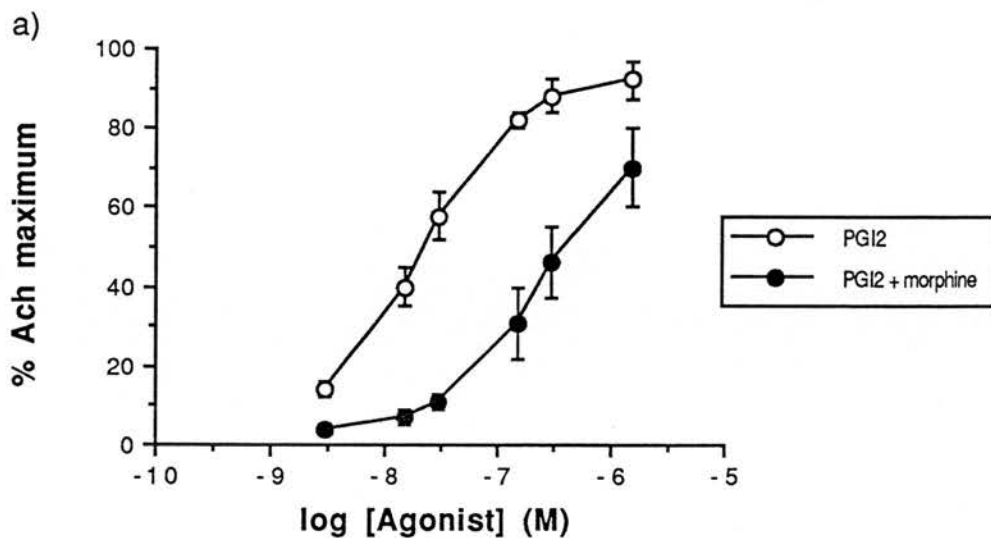
TREATMENT	PGE (14nM)	% CONTROL RESPONSE REMAINING cicaprost (13nM)	iloprost (14nM)	carbacyclin (150nM)	PGI <sub>2</sub> (1 $\mu$ M)
TTX (1 $\mu$ M)	63 $\pm$ 3**	0***	37 $\pm$ 7**	61 $\pm$ 5**	-
morphine (1 $\mu$ M)	62 $\pm$ 6**	0***	40 $\pm$ 3***	67 $\pm$ 5**	-
AH6809 (1 $\mu$ M)	33 $\pm$ 4***	87 $\pm$ 5	45 $\pm$ 6***	54 $\pm$ 8**	58 $\pm$ 5**
AH6809 (1 $\mu$ M) +morphine (1 $\mu$ M)	7 $\pm$ 4***	0	-	-	27 $\pm$ 10**

\*\*\* P>0.001

\*\* P>0.01



Figure 3.10: Effect of morphine (M) ( $1\mu\text{M}$ ) on the log concentration-response curves of (a)  $\text{PGI}_2$  (b) cicaprost and MMM-I-135 and (c) iloprost and carbacyclin in the guinea-pig ileum (mean 4-6 expts.).



### *Action of AH 6809*

*Single doses of the prostanoids:* The response to a single dose of cicaprost (13 nM) was unaffected by 1  $\mu$ M AH 6809, however that to iloprost (14 nM), carbacyclin (150 nM) and PGI<sub>2</sub> (1  $\mu$ M) were significantly inhibited (Table 3.1).

*Concentration-response curves:* The presence of 2  $\mu$ M AH 6809 in the Krebs solution was found to greatly increase the spontaneous activity of the preparation, making response measurements impossible, however, the presence of morphine (1  $\mu$ M) significantly reduced this effect. Hence, concentration-response curves were obtained in the presence of morphine (1  $\mu$ M) and in the presence of morphine (1  $\mu$ M) plus AH 6809 (2  $\mu$ M), thus eliminating any neuronally-mediated action of the prostanoids. AH 6809 caused a highly significant shift in the curves for both iloprost and carbacyclin (Fig. 3.11). However, the log concentration-response curves of iloprost did not appear to be parallel and the dose-ratio obtained at the EC<sub>25</sub> level (245) is ~10 times greater than that found for carbacyclin.

### *Action of atropine and SP 150*

At a concentration of 200 nM atropine produced a dose ratio of 427 against Ach, consistent with a pA<sub>2</sub> of 9.3 (Fig. 3.12). In the presence of this concentration of atropine the concentration-response curve of cicaprost appears to have a lower maximum, however, the EC<sub>50</sub> values (as calculated from the maximum of each curve) are similar (see Fig. 3.15C). The concentration-response curves of iloprost and carbacyclin were shifted to a similar extent as in the presence of 1  $\mu$ M morphine (Fig. 3.13).

Table 3.2 shows results demonstrating that at concentrations of 5 and 10  $\mu$ M of the SP blocker appeared to be non-specific, inhibiting responses to both SP (3 nM) and Ach (37 nM). However, at 1  $\mu$ M SP 150 reduced the response to a submaximal dose of SP by 91%, but had no effect on the response to Ach. In addition, this dose of SP 150 significantly inhibited (37%) the response to 13 nM cicaprost (Table 3.3).

Figure 3.11: Effect of AH 6809 (2 $\mu$ M) on the log concentration-response curves of (a) iloprost and (b) carbacyclin in the guinea-pig ileum (mean of 4-6 expts.).

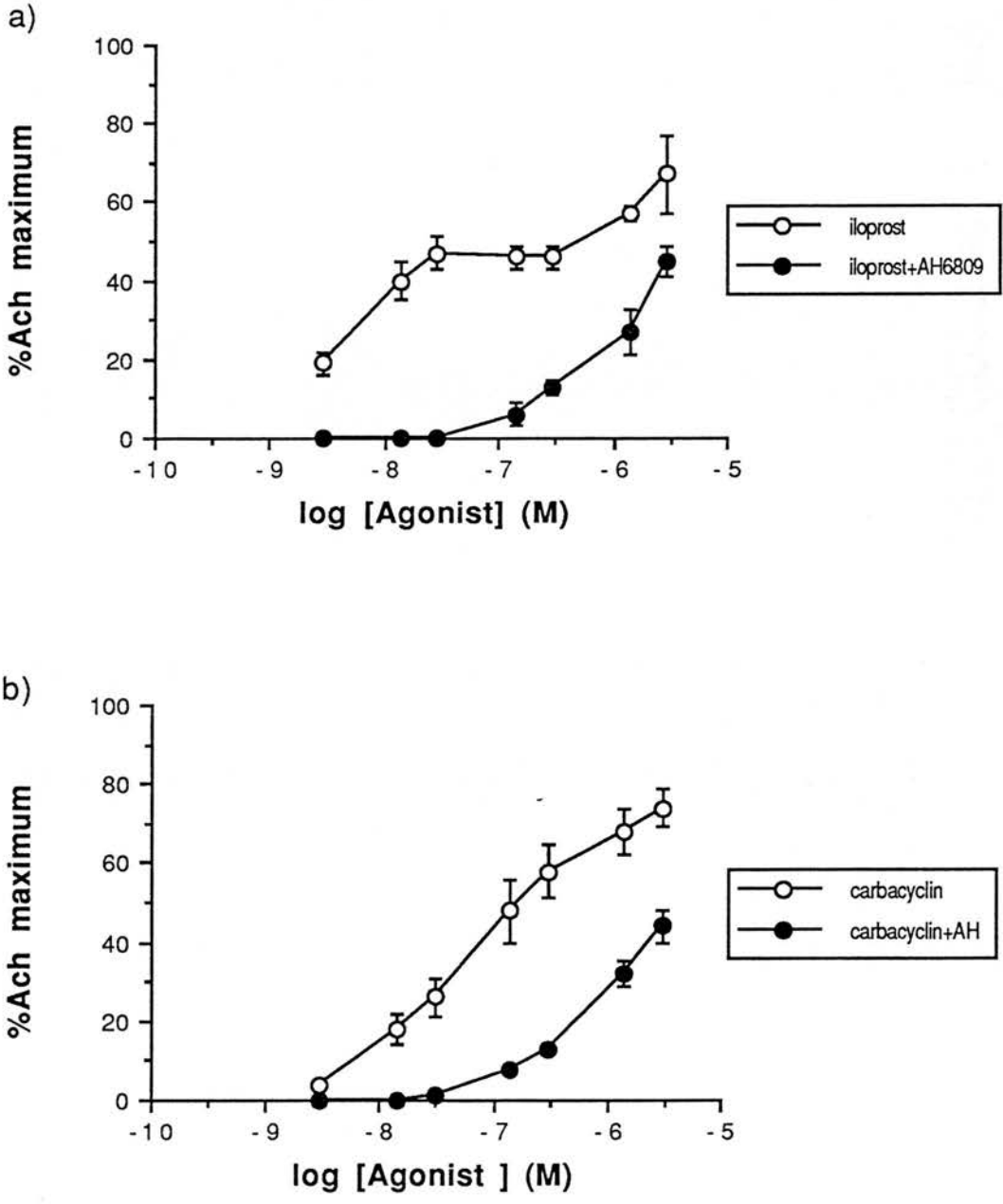


Figure 3.12: Effect of atropine (200nM) on the log concentration-response curves of Ach in the guinea-pig ileum (mean of 2 expts.).

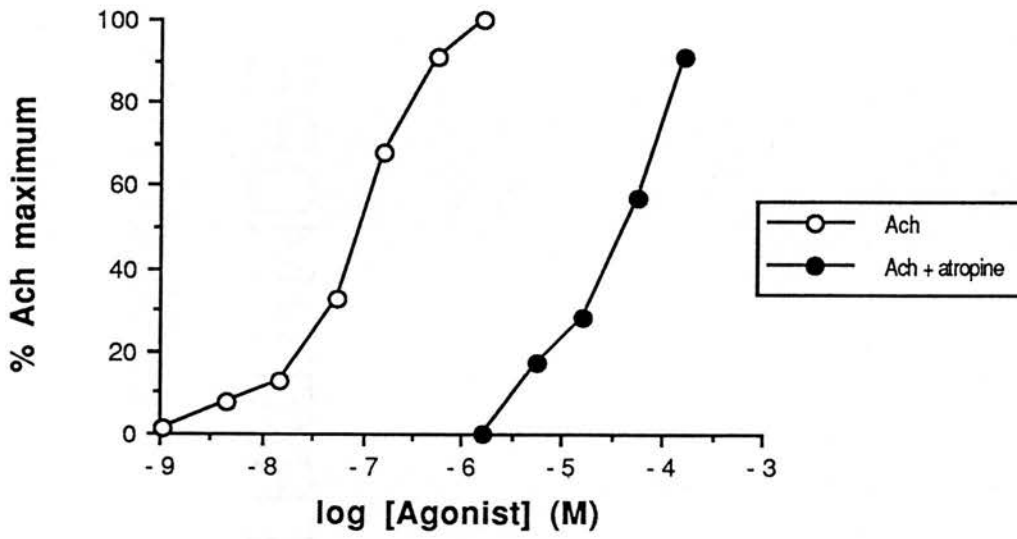


Figure 3.13: Effect of atropine (200nM) on log concentration-response curves of (a) cicaprost (b) iloprost and (c) carbacyclin (mean 4-6 expts.).

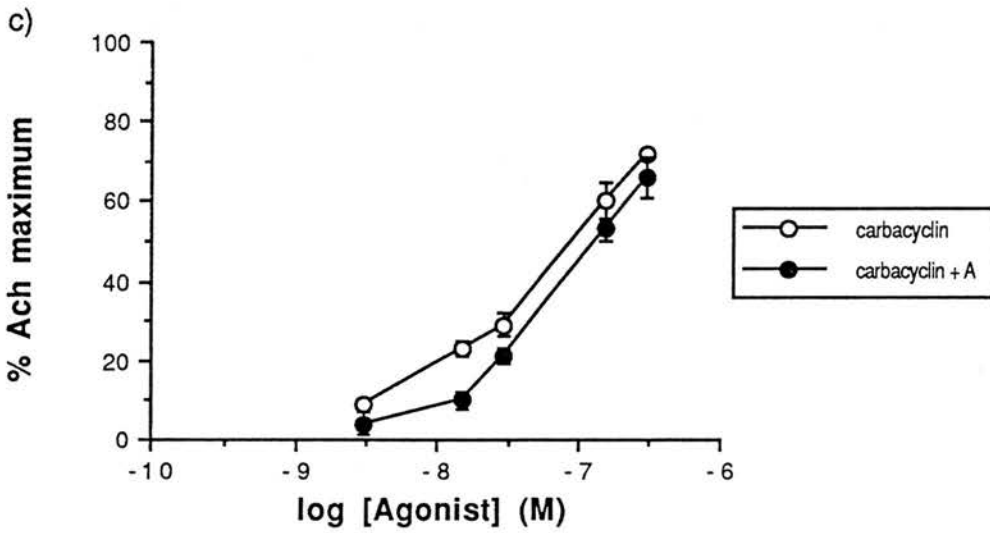
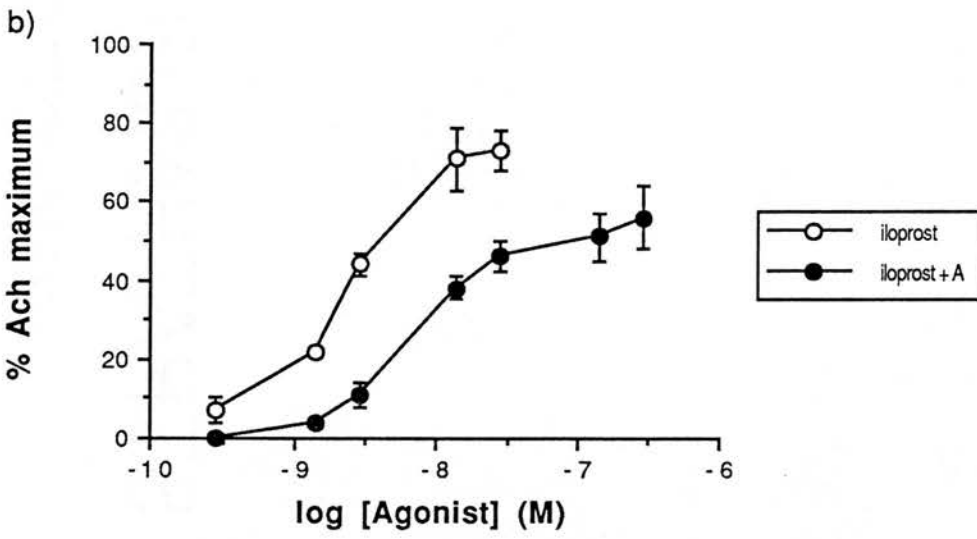
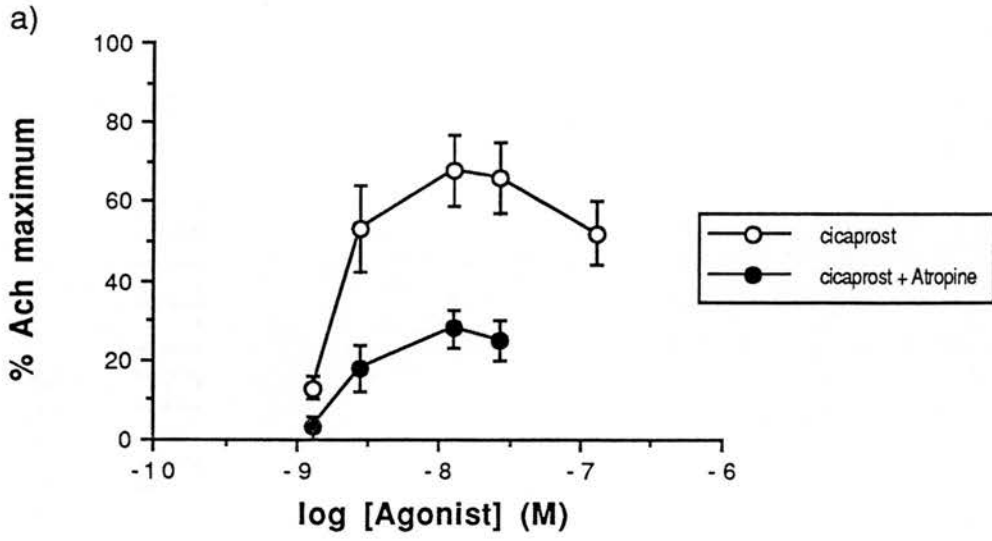


Table 3.2: The effect of various concentrations of SP 150 on the response to single doses of Ach, cicaprost, PGE<sub>2</sub> and Substance P in the guinea-pig ileum.

SP 150 concentration	% INHIBITION			
	ACh (37nM)	Cicaprost (13nM)	PGE <sub>2</sub> (14nM)	Substance P (3nM)
10 $\mu$ M (n = 2)	50	100	60	100
5 $\mu$ M (n = 2)	35	81	42	100
1 $\mu$ M (n = 5)	0 $\pm$ 0	37 $\pm$ 6	22 $\pm$ 5	98 $\pm$ 2



Table 3.3: The effect of morphine (1  $\mu$ M), Atropine (200 nM) and SP 150 (1  $\mu$ M) on the response to single doses of PGE<sub>2</sub>, cicaprost, Ach and Substance P in the guinea-pig ileum (mean of 4-6 expts.).

TREATMENT	% CONTROL RESPONSE REMAINING			
	PGE <sub>2</sub> (14nM)	cicaprost (13nM)	Ach (37nM)	substance P (3nM)
atropine (200nM)	73 $\pm$ 1*	34 $\pm$ 11*	0	80 $\pm$ 4*
SP150 (1 $\mu$ M)	78 $\pm$ 5*	63 $\pm$ 6**	98 $\pm$ 2	9 $\pm$ 2***
atropine (200nM) + SP150 (1 $\mu$ M)	53 $\pm$ 5**	0	-	-
morphine (1 $\mu$ M)	62 $\pm$ 5**	0	-	-
morphine (1 $\mu$ M) + SP150 (1 $\mu$ M)	63 $\pm$ 6	-	-	-

\*\*\* P<0.001

\*\* P<0.01

\* P<0.05

### *Inhibition of Histamine-induced contractions*

Cicaprost consistently caused a dose-related inhibition of contractions of the ileum induced by sub-maximal doses of histamine (Fig. 3.14 and 3.15D), the  $IC_{25}$  obtained was  $22 \pm 3$  nM. PGI<sub>2</sub> and iloprost (see Figure 3.15D) also inhibited Histamine contractions. However, they caused an initial contraction of the tissue prior to inhibition and the inhibitory effect did not reach a maximum until several subsequent histamine doses had been added. In a number of tissues (2/6 for iloprost and 2/5 for PGI<sub>2</sub>) no inhibition was observed. In contrast, carbacyclin did not inhibit histamine concentrations but instead potentiated these responses.

Figure 3.14: Log concentration-response curve of cicaprost for the inhibition of histamine -induced contraction of the guinea-pig ileum (mean of 5 expts.).

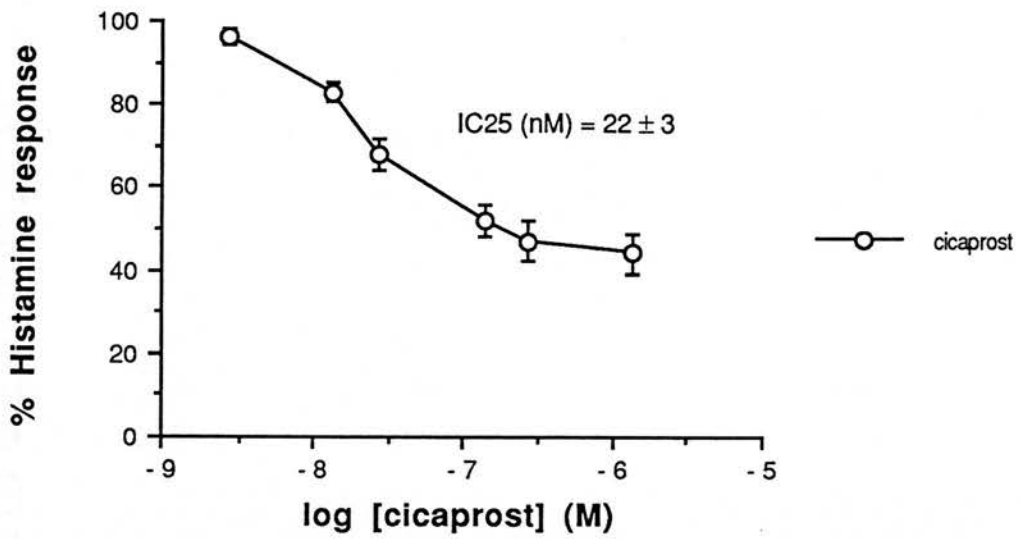


Figure 3.15A: Trace showing contraction of the guinea-pig ileum by cicaprost (13nM) and inhibition of this effect by TTX (100nM).

29

62

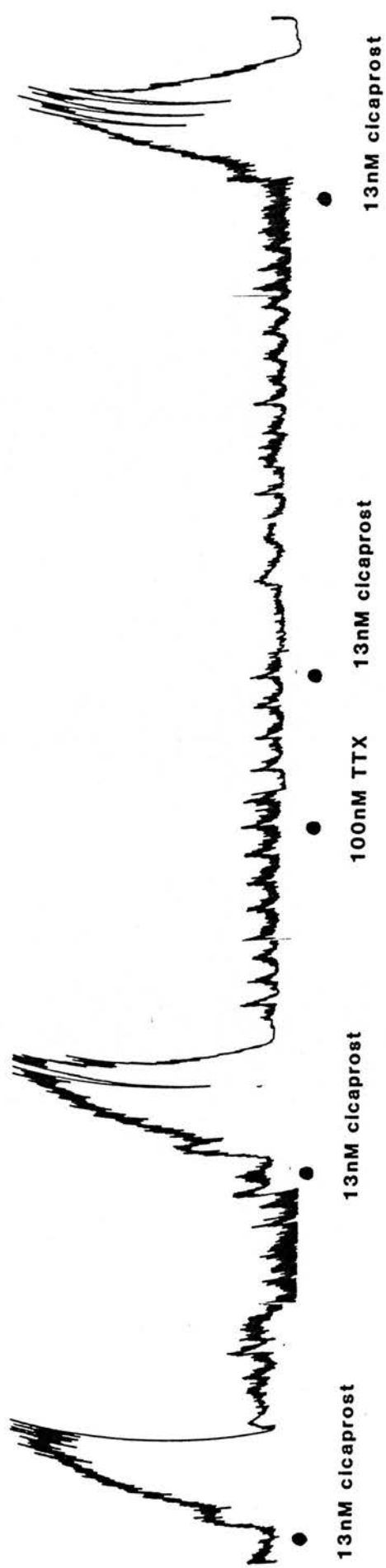


Figure 3.15B: Trace showing the effect of morphine ( $1\mu\text{M}$ ) on the contractile action of increasing concentrations of cicaprost in the guinea-pig ileum.

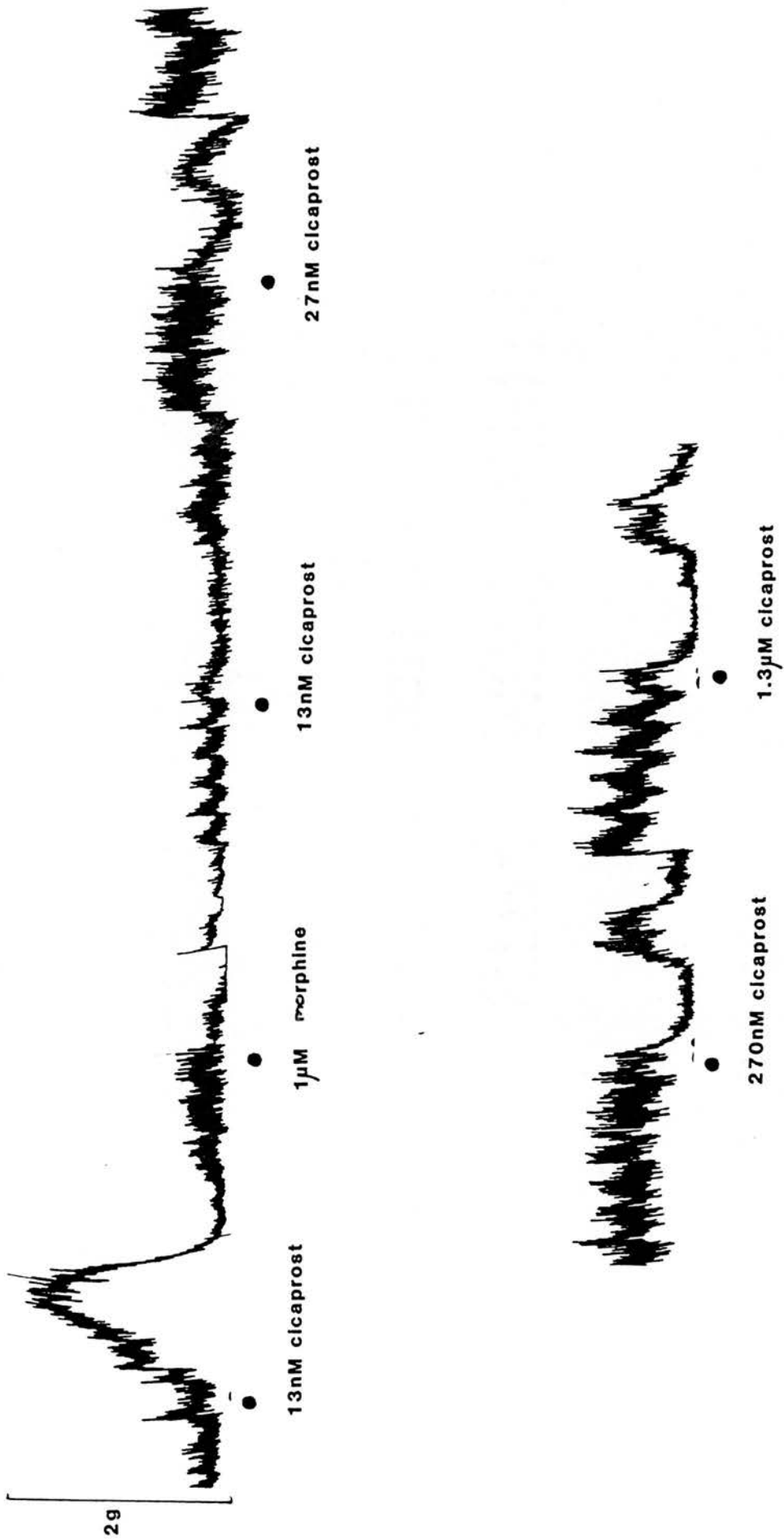
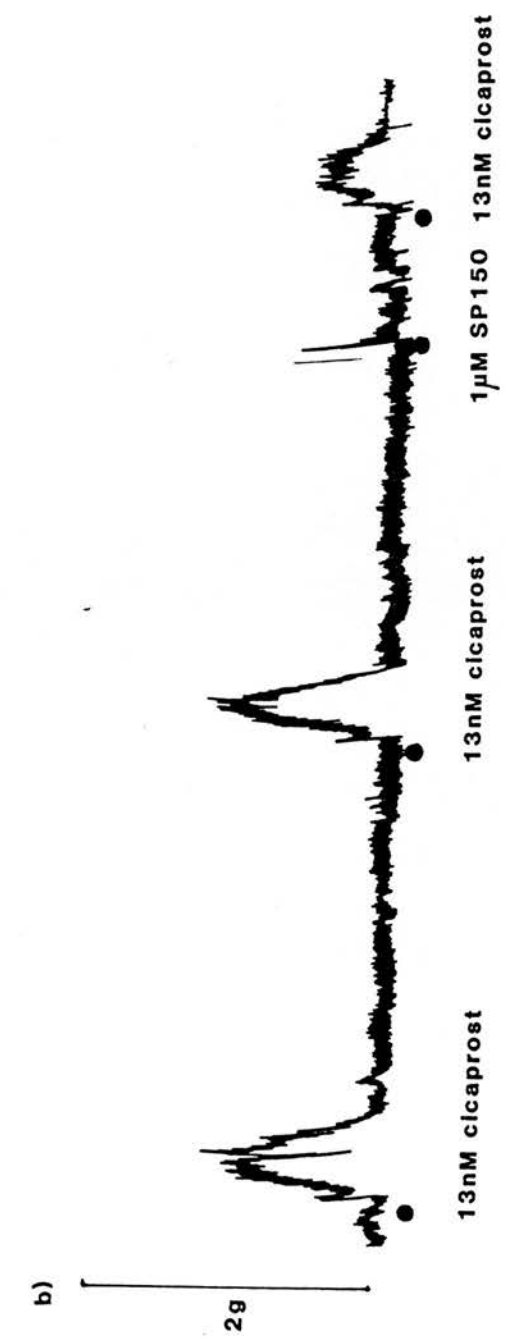
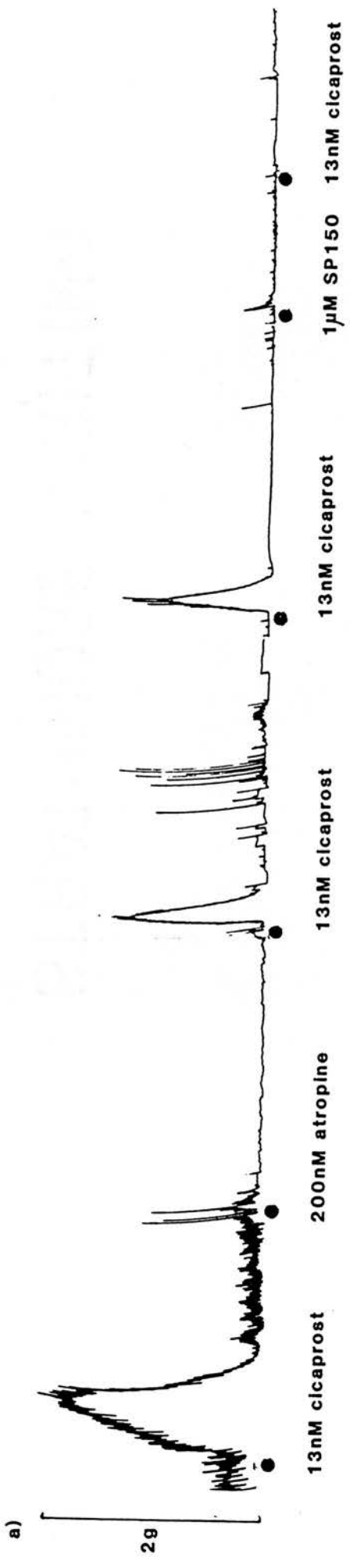


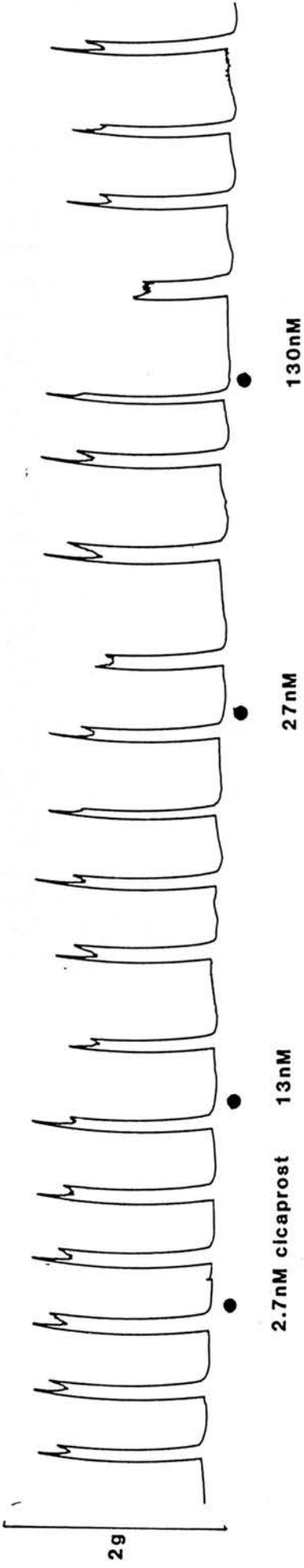
Figure 3.15C: Trace showing the effect of (a) atropine (200nM) and SP 150 (1 $\mu$ M) and (b) SP 150 (1 $\mu$ M) on the contractile action of cicaprost (13nM) in the guinea-pig ileum.



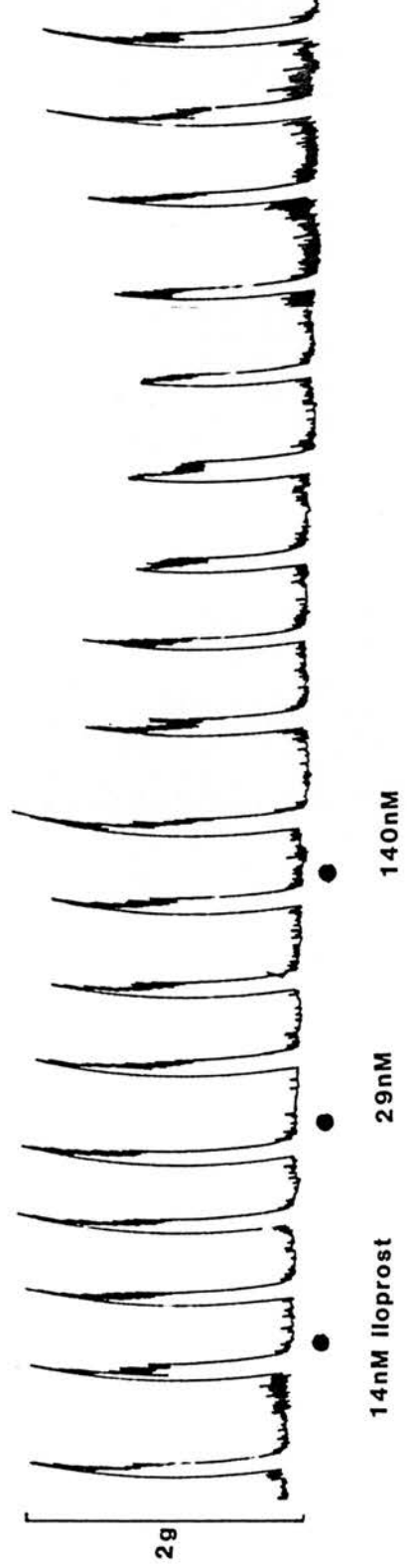


**Figure 3.15D: Trace showing the inhibitory action of increasing concentrations of (a) cicaprost and (b) iloprost on contractions of the guinea-pig ileum induced by histamine. The tissues were bathed in Tyrodes solution containing AH 6809 (2 $\mu$ M) and morphine (1 $\mu$ M).**

a)



b)



## DISCUSSION

### *Vascular Actions*

The results obtained with iloprost and cicaprost (Table 3.4) closely parallel those obtained by Hadhzay (1986) who found that PGI<sub>2</sub> relaxed the human mesenteric artery with an IC<sub>50</sub> of 7 nM and the sensitivity of the mesenteric vasculature decreased in the order man, dog, rabbit, pig. The data presented show that the human mesenteric artery is the most sensitive preparation, with an IC<sub>50</sub> of 1.2 nM for iloprost. Investigations of the pig vasculature showed that the pulmonary, intralobular and coronary arteries were not relaxed by PGI<sub>2</sub>, and the gastro-epiploic artery was found to be the most sensitive vessel (iloprost IC<sub>50</sub> = 24 nM).

It is possible that the true activity of the compounds at the IP-receptor may be obscured/accentuated by agonist actions at additional prostanoid receptor sites present on the smooth muscle. Table 3.5 shows the vascular relaxant and contractile activity of PGE<sub>2</sub> and 16,16-dimethyl PGE<sub>2</sub>. In visceral vessels from the pig, man and dog PGE<sub>2</sub> is highly active as a dilator, the vessel from man being the most sensitive (IC<sub>50</sub> = 0.27 nM). In general smooth muscle relaxation is thought to be mediated by an EP<sub>2</sub> receptor (Dong et al, 1986; Coleman et al, 1989), this is supported by the finding that PGE<sub>2</sub>-mediated relaxation in the rabbit mesenteric artery is not inhibited by the EP<sub>1</sub> receptor blocker, AH 6809. However, previous work has shown that iloprost has little activity at EP<sub>2</sub>-receptors in the guinea-pig and cat trachea (Dong et al, 1986; Sheldrick et al, 1988). In addition, our studies suggest that iloprost and carbacyclin have little activity at the EP<sub>2</sub>-receptor mediating relaxation of the rabbit jugular vein (see Chapter 4). Thus, an agonist action of the PGI<sub>2</sub> analogues at the EP<sub>2</sub> receptors of the arteries is unlikely.

There is, however, evidence for the presence of an EP-receptor mediating contractile responses in these vessels: (1) In the pig and rabbit the log concentration-response curve for PGE<sub>2</sub>-mediated relaxation reverses at higher concentrations, and (2) 16,16-dimethyl PGE<sub>2</sub>, which is highly active at EP<sub>1</sub>/EP<sub>3</sub> receptors (Dong et al, 1986; see Chapter 4) contracts all three preparations. In vessels from man and

TABLE 3.4 : Relaxant activity of prostacyclin mimetics on visceral arterial vessels.

COMPOUND	Equi-effective molar ratio			
	Human mesenteric artery	Pig gastro-epiploic artery	Rabbit mesenteric artery	Dog mesenteric artery
iloprost	1.0 ( $IC_{50} = 1.2 \pm 0.3nM$ )	1.0 ( $24 \pm 3nM$ )	1.0 ( $10 \pm 1nM$ )	1.0 ( $2.4 \pm 0.6nM$ )
cicaprost	$0.36 \pm 0.08$	$0.87 \pm 0.17$	$0.53 \pm 0.03$	$0.46 \pm 0.03$
carbacyclin	$9.6 \pm 1.5$	(see text)	$2.1 \pm 0.2$	$3.6 \pm 0.04$
EP157	$220 \pm 46$	$81 \pm 26$	$230 \pm 32$	$898 \pm 134$

Each value is the mean of 6-9 observations in the human, pig and rabbit vessels and 4-6 in the dog vessel.

Table 3.5: Relaxant and contractile activity of PGE<sub>2</sub> and 16,16 dimethyl PGE<sub>2</sub> in arterial vessels from the human, pig and rabbit.

PROSTANOID	IC <sub>50</sub> / EC <sub>50</sub> (nM)		
	Human	Pig	Rabbit
PGE <sub>2</sub>	↓ 0.27	↓ 2	↓ 4
	–	↑ >100	↑ >100
16,16 dm PGE <sub>2</sub>	*↑ 40	*↑ 5	*↑ 30

↓ Relaxation of Phenylephrine-induced contraction

↑ Contraction in the presence/\*absence of Phenylephrine

rabbit, 16,16-dimethyl PGE<sub>2</sub> contracts the tissue at relatively high concentrations (EC<sub>50</sub> >30 nM) and there is no evidence that the PGI-mimetics are acting on EP-contractile receptors. However, in the pig gastro-epiploic artery, in which the EC<sub>50</sub> for 16,16-dimethyl PGE<sub>2</sub> is 5 nM, carbacyclin has a considerably lower maximum for relaxation than iloprost and at concentrations above 100 nM it causes discrete contractions. An opposing action of carbacyclin at contractile EP-receptors may explain these results. In this preparation, the concentration-response curves of carbacyclin and 16,16-dimethyl PGE<sub>2</sub> are unaffected by AH 6809 indicating that the contractile receptor is not EP<sub>1</sub>. It is notable that Ahluwalia et al (1988) have demonstrated EP<sub>3</sub> mediated vascular smooth muscle contraction in the rabbit renal artery. Experiments (Table 3.6 Jones, unpublished data) have shown that carbacyclin has EP<sub>3</sub> agonist activity in the guinea-pig vas deferens, although it is considerably less active than PGE<sub>2</sub> (EMR, 70). The low sensitivity of the pig vessel to relaxation induced by IP receptor agonists may allow this contractile action to become apparent. An action of carbacyclin at contractile thromboxane (TP)-receptors is excluded by the failure of the TP-receptor blocker, EP 092 to affect the concentration-response curve (Fig. 3.6).

PGI<sub>2</sub> has previously been shown to have a weak contractile action in vessels from the pig, human and rat (Dusting et al, 1977; Levy, 1978; Davis et al, 1980); these effects are probably mediated by EP<sub>1</sub>/EP<sub>3</sub> receptors. It is notable that when Rucker and Schror (1983) investigated the binding of [<sup>3</sup>H]-iloprost to smooth muscle cells of the pig aorta they found that the Hill plot was linear with a slope of 1.9. The authors presented two possible explanations for this: (1) positive cooperativity with two agonists binding to the same site and (2) the ligand binding to a component other than the IP-receptor. The data presented here would suggest that the PGI<sub>2</sub> analogue may have bound to an EP<sub>1</sub>/EP<sub>3</sub> receptor.

Invoking the above explanation for the low maximum of carbacyclin in the pig, the data suggest that the IP-receptors present in vessels from man, pig and rabbit are the same. In these tissues the order of potency is cicaprost, iloprost, carbacyclin, EP 157. EP 157 relaxed at concentrations 100-200 times that of iloprost. However, in the dog

Table 3.6: pD<sub>50</sub> values for PGE<sub>2</sub>, cicaprost, iloprost and carbacyclin for contraction of the guinea-pig trachea and for inhibition of the twitch response of the guinea-pig vas deferens (mean of 4 expts.).

PROSTANOID	Guinea-pig vas deferens		Guinea-pig trachea
	pD <sub>50</sub>	EMR	pD <sub>50</sub>
PGE <sub>2</sub>	8.76 ± 0.03	(1)	–
cicaprost	≤ 6.0	(>500)	< 6.0
iloprost	6.79 ± 0.09	(88)	8.08 ± 0.13
carbacyclin	6.96 ± 0.12	(70)	7.57 ± 0.10



TABLE 3.7: Comparison of the abilities of prostacyclin mimetics to inhibit aggregation and to raise cyclicAMP levels (bracketed values) in platelets from different species (Armstrong et al, 1989).

Prostanoid	Equi-effective molar concentrations				
	Human	Pig	Horse	Rabbit	Rat
iloprost	1.0 IC <sub>50</sub> = 0.15 ± 0.04	1.0 2.3 ± 0.8nM	1.0 23nM	1.0 17.1 ± 2.6nM	1.0 4.7 ± 1.5nM
cicaprost	0.88 ± 0.06 (1.0)	1.1 ± 0.26 (1.20)	0.4 (1.0)	1.3 ± 0.21 (0.91)	0.6 ± 0.09 (0.96)
carbacyclin	31 ± 6 (23)	13.5 ± 6.7 (27)	15 (5.8)	3.3 ± 0.4 (2.9)	3.5 ± 0.5 (2.7)
EP157	54 ± 9 (72)	101 ± 23* (>1100)	98 (57)	990 ± 210* (>890)	3500 ± 1500* (>1300)

mesenteric artery, although the order of potency is the same as that found in the other vessels, EP 157 was 900 times less active than iloprost. Similar results were found in initial studies by Armstrong and Jones (unpublished observations) on anaesthetized dogs in which changes in arterial blood flow were recorded in response to close intra-arterial infusion of different prostanoids: iloprost was a highly active dilator but EP 157 had no effect. Taken together these results suggest that the IP receptor present in the dog vasculature may differ from that present in the other species. However, no work has been done to investigate the vasodilator activity *in vivo* of EP 157 in the other species.

As discussed in the introduction the emphasis of recent chemistry/pharmacology has been on synthesis of a PGI<sub>2</sub> analogue which retains antiaggregatory actions but has reduced vascular activity. However, in this study the order of activity of EP 157 in the vasculature closely parallels that found on the platelet (Table 3.7) of the same species (man, pig and rabbit) (Armstrong et al, 1989), suggesting that the IP- receptors present in the two systems are the same. This finding seems to leave little hope for separation of the two effects in man. However, the possibility of partial agonism at the platelet IP receptor has been demonstrated (Armstrong et al, 1989). It may be that a compound with lower efficacy and higher affinity than EP 157 could suppress platelet aggregation while having little effect on the vasculature.

### *Guinea-pig ileum*

We have confirmed the findings of Gaion and Trento (1983) indicating the presence of a neuronal PGI<sub>2</sub> receptor in the guinea-pig ileum: the contractile action of PGI<sub>2</sub> is inhibited by morphine and appears to be mediated by activation of the enteric neurones. The results obtained are summarised in Table 3.8. All the PGI<sub>2</sub> analogues tested were active as contractile agents, and the responses to single submaximal doses of cicaprost, iloprost and MMM-I-135 were significantly reduced by both morphine and TTX, indicating that they are agonists at the neuronal IP-receptor site. However, only the responses to cicaprost and MMM-I-135 were abolished by morphine; in the presence of 1  $\mu$ M morphine

Table 3.8: pD<sub>25</sub> values for PGI<sub>2</sub> analogues in the guinea-pig ileum in the absence and presence of morphine (1 μM) and AH 6809 (2 μM) (mean of 4-6 expts.).

PROSTANOID	MAX (%Ach)	pD <sub>25</sub>	pD <sub>25</sub> MORPHINE (1μM)	pD <sub>25</sub> AH6809 (2μM)
cicaprost	70 ± 8	8.89 ± 0.11	<6	-
iloprost	85 ± 7	8.62 ± 0.12	8.15 ± 0.06	5.96 ± 0.12
carbacyclin	80 ± 5	7.72 ± 0.08	7.59 ± 0.14	6.05 ± 0.11
PGI <sub>2</sub>	95 ± 2	8.12 ± 0.08	6.99 ± 0.17	-
MMM-I-135	~60	8.05 ± 0.18	<5.89	-

concentration-response curves to PGI<sub>2</sub>, iloprost and carbacyclin could be obtained.

The longitudinal muscle of the guinea-pig ileum contains both EP<sub>1</sub> and EP<sub>3</sub> receptors mediating contraction via a direct action on the smooth muscle cells (see Chapter 4). Investigation of the effect of AH 6809 on the action of the PGI<sub>2</sub> analogues suggests that the morphine-resistant component of action of the PGI<sub>2</sub> analogues is mediated by an EP receptor: (1) the responses to single submaximal doses of PGI<sub>2</sub>, iloprost and carbacyclin are significantly inhibited by 1 μM AH 6809 and (2) the concentration-response curves of these compounds are subject to a large shift in the presence of 2 μM AH 6809. We have found PGI<sub>2</sub>, iloprost and carbacyclin to contract the guinea-pig trachea, a preparation known to contain EP<sub>1</sub> receptors. Although they appear to be more selective for the EP<sub>1</sub>-receptor, the compounds also have some activity on the EP<sub>3</sub> receptors of the chick ileum and the guinea-pig vas deferens (Table 3.6). These results parallel earlier findings on the actions of PGI<sub>2</sub> and iloprost on EP<sub>1</sub> and EP<sub>3</sub> receptors (Dong et al, 1986; Sheldrick et al, 1988). As mentioned in the introduction Gaion and Gambaratto (1987) found that at 1 μM PGI<sub>2</sub> retains a contractile action in the presence of TTX. They suggest that this is mediated by an IP-receptor present on the smooth muscle. However, our data indicates that the TTX/morphine - resistant component of action of PGI<sub>2</sub> is more likely to be due to activation of EP<sub>1</sub> (and perhaps EP<sub>3</sub>) receptors. The complete inhibition of the contractile action of cicaprost by 1 μM morphine confirms the work of Dong et al (1986) demonstrating that it is a highly selective IP-receptor agonist. MMM-I-135 would appear to be less active at, but equally selective for the IP receptor.

Further investigations of the nature of the excitatory transmitters released in the response to neuronal IP receptor activation revealed that the action of cicaprost is only partially inhibited by atropine (Table 3.9). It may be that it is easier for atropine to block the effects of exogenous Ach than that released from the myenteric plexus. For example, it has been shown that considerably higher doses of atropine were required to inhibit the response to cholinergic transmission in response to nerve stimulation than those needed to inhibit the response to exogenously

Table 3.9 : The effect of Morphine (1  $\mu$ M) and Atropine (200 nM) on the concentration-response curves of PGI<sub>2</sub> analogues in the guinea-pig ileum (mean of 4-6 expts.).

PROSTANOID	DOSE RATIO IN THE PRESENCE OF:	
	Morphine (1 $\mu$ M)	Atropine (200 nM)
PGI <sub>2</sub>	18.9 $\pm$ 5 ***	—
cicaprost	>1000	4.2 $\pm$ 2 *
iloprost	3.5 $\pm$ 1.2 *	4.4 $\pm$ 0.73 *
carbacyclin	1.6 $\pm$ 0.5	1.9 $\pm$ 0.32 *
MMM-I-135	>200	—

\*\*\* P < 0.001

\* P < 0.05

added Ach (Bowman et al, 1968). Alternatively, cicaprost may be mediating the release of an additional transmitter whose action is not blocked by atropine but whose release is blocked by morphine. The data would suggest that the residual action of cicaprost is mediated by release of substance P: the substance P blocker, SP 150 abolished the response to cicaprost in the presence of 200 nM atropine. Pharmacological (Franco et al, 1979a and b) and immunological evidence (Donnerer et al, 1987) suggest that Ach or the ganglionic stimulant DMPP are capable of stimulating the intrinsic SP neurones of the intestine. While there is also evidence for the ability of SP to release Ach from the myenteric plexus (Yau et al, 1982 ; Bartho and Holzer, 1985). However, our data show that both atropine and SP 150 inhibit the response to cicaprost, and their action appears to be additive, thus it would appear that IP- receptor activation mediates the release of both SP and Ach.

It has been shown by a number of groups (see '*Action of morphine*' ) that the release of both Ach and SP is inhibited by morphine. This appears to be true in this system where neither transmitter is released in the presence of 1  $\mu$ M morphine. In fact, Bartho and Holzer (1985) stated that "among the drugs and procedures that influence SP release there is not one which would not influence the release of Ach in the same direction". It has been proposed that the similarities in the pharmacological profiles of enteric cholinergic and SP neurones is due to their co-localization in the same enteric neurones (Furness et al, 1984). It is notable that it has previously been suggested that SP release from nerve endings could be implicated in the algescic response to both PGE<sub>1</sub> and PGI<sub>2</sub>. Nakamura and Smith (1988) reported that the inflammatory hyperalgesic response to both prostanoids was mimicked by SP and inhibited by a SP antagonist.

The fact that the log concentration-response curve for cicaprost is bell shaped (Fig 3.8) prompted us to investigate the activity of the compound as an inhibitory agent. Fig.3.15D shows that cicaprost causes a dose-related inhibition of histamine-induced responses, occurring at doses corresponding to those at which the log concentration-response curve bells. These results suggest that the preparation contains an additional

IP-receptor present on the smooth muscle (any neuronal activity is inhibited by the presence of 1 $\mu$ M morphine), which mediates inhibitory responses.

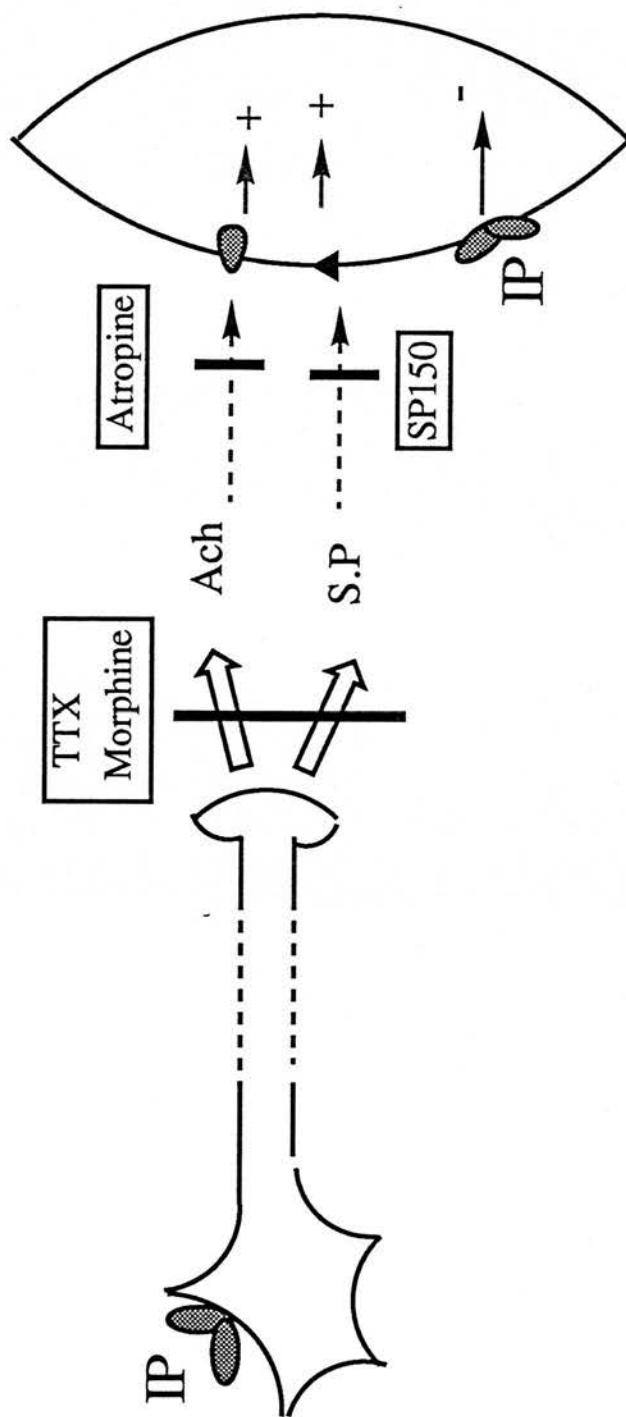
PGI<sub>2</sub> and iloprost also inhibit histamine responses, however, the results are inconsistent. Although these experiments were carried out in the presence of 1  $\mu$ M morphine and 2  $\mu$ M AH 6809, in some preparations there is evidence of an increase in tone prior to inhibition. This is probably due to an EP<sub>1</sub> (overcoming the block) and/or and EP<sub>3</sub> action of these compounds and makes it difficult to assess the level of inhibition obtained with these compounds. It is notable that the shift in the concentration-response curve of iloprost in the presence of 2  $\mu$ M AH 6809 (Dose ratio = 249) is considerably larger than that of any other PGE (Dose ratio against PGE<sub>2</sub> is 34, see following Chapter) or PGI analogue tested. This may reflect a high EP<sub>1</sub>-selectivity of this compound, however, it seems more likely that the shift is accentuated by the agonist action of high concentrations of iloprost at IP-relaxant receptors. In contrast, carbacyclin does not display any inhibitory actions but rather contracts the tissue thus potentiating histamine-induced responses. As found in the pig gastro-epiploic artery this is probably due to an agonist action of this compound at contractile EP<sub>1</sub>/EP<sub>3</sub> receptors opposing any inhibitory effects mediated by IP-receptors.

A schematic representation of the IP receptors found in the longitudinal muscle of the guinea-pig ileum is shown in Figure 3.16. Taking into account the EP receptor activity of the analogues, the data presented shows that the EMR values obtained are similar at both the neuronal and the smooth muscle IP-receptor sites. Thus, there is no evidence to suggest that these sites differ from one another or from those found on the vasculature of the human, pig or rabbit.

### *Structure-Activity Relationships*

The results presented confirm the finding that the introduction of a CH<sub>3</sub> group at the C16 position of the carbacyclin molecule enhances the potency of the compound at all the IP-receptor sites investigated. As mentioned in the introduction iloprost used in this study contains both

Figure 3.16: Schematic representation of IP receptor sites in the guinea-pig ileum

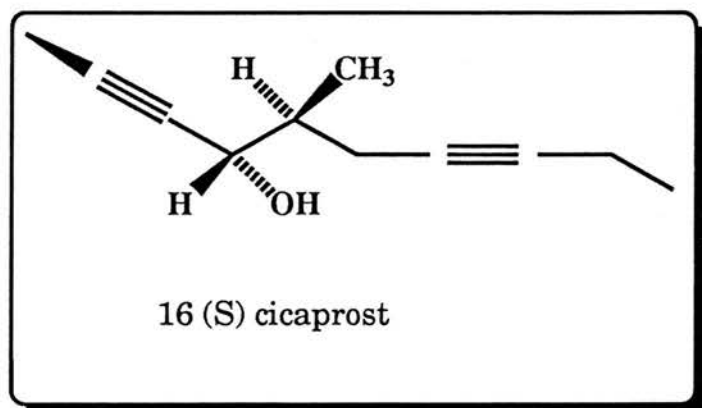
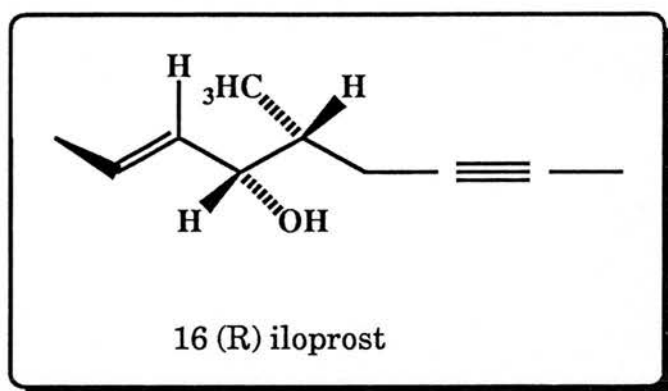
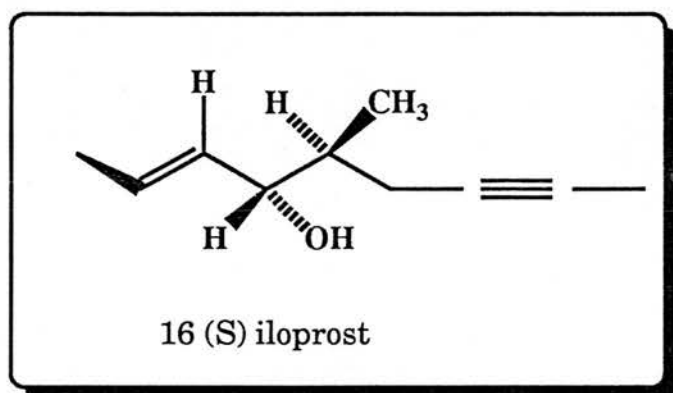




the 16(R) and the 16(S) isomers (Figure 3.17). However, Tsai et al (1988) have recently demonstrated that the 16(S) isomer was 20-times more potent than the 16(R) isomer in inhibiting collagen-induced platelet aggregation. In addition, study of the binding of the isomers to platelet membranes demonstrated that the 16(S) isomer had a significantly higher affinity for the site than the 16(R) isomer ( $K_d = 13$  nM and 288 nM respectively). The authors suggest that the (S) methyl group limits the flexibility of the molecule which facilitates the binding and allows close interaction of the functional groups of iloprost with the IP receptor site. These results have recently been confirmed in experiments by Imaki et al (1989). They synthesised carbacyclin and 6-keto PGE<sub>1</sub> (an IP receptor agonist - Hoult and Moore, 1986) with an alkyl cyclopentane ring on the  $\omega$  chain in which there are two new chiral centres at C16 and C18 and found that the 16(S) isomers of both compounds were considerably more potent than the 16(R) isomer in both platelet and blood vessel. In view of these findings it would be of interest to investigate whether the IP activity of these compounds is confined to the 16(S) and the EP<sub>1</sub>/EP<sub>3</sub> to the 16(R) isomer.

The potency and specificity of cicaprost for the IP receptor may therefore be due to: (a) the introduction of a pure 16(S) methyl group (Figure 3.17) and (b) further restriction of side chain movement conferred by the 13,14-acetylenic bond. While MMM-I-135 appears to retain the specificity of cicaprost due to the 13,14 acetylenic bond, the absence of the CH<sub>3</sub> group at C16 may account for the lower potency of the compound.

Figure 3.17: Structures of the 16 (S) and 16 (R) isomers of iloprost and cicaprost.



Chapter 4  
EP-Receptor Studies

## INTRODUCTION

Prostaglandin E (PGE) was first isolated by Bergstrom (1966) in a pure crystalline form from sheep prostatic glands. Since their discovery, prostanoids of the E series have been shown to have activity in a range of smooth muscle systems. They are known to be potent vasodilators in most vascular beds (Holmes et al, 1963; Horton, 1963 and 1965; Bergstrom et al, 1965; Euler, 1966; Nakano and McCurdy, 1967; Hatano et al, 1980), and more recently PGE<sub>2</sub> has been shown to constrict vascular smooth muscle (Hatano et al, 1980 and 1981; Hayashi et al, 1986; Ahluwalia et al, 1988; Baxter et al, 1989). PGE also mediates both relaxation and constriction of respiratory and uterine smooth muscle (Horton, 1969; Apperley et al, 1979; Gardiner and Collier, 1980; Coleman and Kennedy, 1985; Coleman et al, 1989). Finally, PGE has potent actions in the gastrointestinal tract: in general it relaxes circular and contracts longitudinal smooth muscle (Horton, 1965; Bennet et al, 1968; Bennet et al, 1975).

In addition to their actions on smooth muscle, PGE<sub>1</sub> and PGE<sub>2</sub> can both inhibit and promote neurotransmitter release in a number of tissues (Ehrenpreis et al, 1973). They are potent inhibitors of gastric acid secretion in many species (Karim et al, 1973; Konturek et al, 1976; Frame and Main, 1980; Broughton-Smith and Whittle, 1981; Reeves et al, 1988) and have a range of actions on both the eye and the kidney (Pederson, 1975; Bentley and McGahen, 1982; Remuzzi et al, 1987).

Prostaglandins of the E series have also been implicated in the pathophysiology of a range of conditions including: inflammation (Lewis, 1983); rheumatism (Moilanen et al, 1987); pain (Deraedt et al, 1980; Ferreira, 1983); cancer (Bennet, 1983) and pyrexia (Milton and Wendlandt, 1971).

### *PGE receptors (see Table 4.1a and 4.1b)*

Bennet and Posner (1971) first suggested that subtypes of the PGE<sub>2</sub> receptor may exist. They showed that the dibenzoxazepine SC 19220 (Figure 4.1C) blocked the contractile action of PGE<sub>2</sub> on the longitudinal muscle of the guinea-pig ileum, while the relaxant action on the

Table 4.1a: Summary table of the EP-receptor work prior to this thesis.

Receptor	Tissue	Response	Agonists	Antagonists
EP <sub>1</sub>	Guinea-pig ileum longitudinal muscle	contraction	ICI 80205	SC 19220 AH 6809
	Guinea-pig/dog stomach fundus	"		
	Guinea-pig trachea	"		
	Bullock iris sphincter	"		
EP <sub>2</sub>	Cat/guinea-pig trachea	relaxation	11-deoxy PGE <sub>1</sub>	none
	Guinea-pig ileum circular muscle	"		
EP <sub>3</sub>	Chick ileum	contraction	sulprostone	none
	Guinea-pig vas deferens	inhibition of neurotransmitter release		
	Rat gastric mucosa	Inhibition of acid secretion		

TABLE 4.1b: Previous work on EP receptor sites in various tissues.  
GPT= guinea-pig trachea (\* 16,16 dimethyl PGE<sub>2</sub> = standard agonist),  
RSF=rat stomach fundus, CT= cat trachea,GPVD= guinea-pig vas  
deferens, RGAS= rat gastric acid secretion, ChI= Chick ileum, GPF=  
Guinea-pig fundus.

NA = not active and p.a = partial agonist.

References (Bracketed):

- |                           |                              |
|---------------------------|------------------------------|
| (1) Dong et al (1986)     | (6) Eglen and Whiting (1988) |
| (2) Coleman et al (1988)  | (7) Gardiner (1986)          |
| (3) Reeves et al (1988)   | (8) Sheldrick et al (1986)   |
| (4) Coleman et al (1987a) | (9) Kennedy et al (1982)     |
| (5) Coleman et al (1987b) |                              |

EQUI-EFFECTIVE MOLAR RATIO (PGE<sub>2</sub>=1)

PROSTANOID	EQUI-EFFECTIVE MOLAR RATIO (PGE <sub>2</sub> =1)									
	EP <sub>1</sub>		EP <sub>2</sub>		EP <sub>3</sub>		GAS		ChI	
	GPT	RSF	GPF	CT	GPT	GPVD	RGAS	ChI		
	(contraction)				(relaxation)					
<i>PGE analogues</i>										
16,16dimethyl PGE <sub>2</sub>	1* (1)	0.27 (1)	0.08 (2)	9.4 (1)	14 (1)	0.12 (3)	0.13 (3)	-		
				27 (2)						
ICI80205	0.23* (1)	0.048 (1)	-	70 (1)	NA (1)	-	-	-		
sulprostone	5.6 (4)	-	3.6 (4)	>10,000(4)	>100 (4)	0.16 (3)	0.05 (3)	0.7 (5)		
misoprostol	21 (7)	-	43 (2)	3.7 (2)	NA (6)	1.0 (3)	0.24 (3)	-		
11-deoxy PGE <sub>1</sub>	NA* (1)	65 (1)	-	13 (1)	12 (1)	-	-	-		
butaprost	NA (7)	>10,000(7)	-	26 (7)	<1 (7)	-	-	>1000 (7)		
<i>PGI analogues</i>										
PGI <sub>2</sub>	~250 (1)	~47 (1)	20 (9)	~200 (1)	>680 (1)	-	-	13 (9)		
iloprost	p.a* (1)	p.a (1)	0.8 (8)	1-10 (8)	>70 (8)	<70 (8)	-	-		
			>270 (1)							
cicaprost	>1000*(1)	530 (1)		>300 (1)	>660 (1)	-	-	-		

circular muscle was unaffected. More recently, it has been shown that SC 19220 blocks PGE<sub>2</sub>-induced contractions of the guinea-pig ileum, guinea-pig and dog fundus and the guinea-pig trachea in a competitive manner (Kennedy et al, 1982; Coleman and Kennedy, 1985), whereas PGE<sub>2</sub>-induced contraction of the chick ileum and relaxation of the cat trachea are not inhibited. These results are the basis for the classification of PGE<sub>2</sub> receptors into EP<sub>1</sub> (blocked by SC 19220) and EP<sub>2</sub> (unaffected by SC 19220).

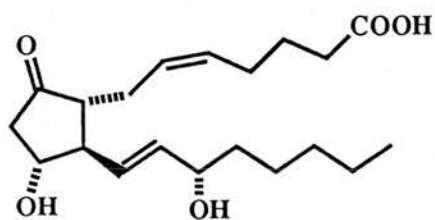
In 1985, Coleman et al reported on a compound with an identical profile to SC 19220 although 10-40 fold more potent as an EP<sub>1</sub> antagonist. They found that AH 6809 (Figure 4.1C) was a specific competitive prostanoid antagonist (pA<sub>2</sub> 6.8) on those preparations thought to contain EP<sub>1</sub> receptors (guinea-pig ileum longitudinal muscle, guinea-pig fundus and dog fundus), but weak or inactive (pA<sub>2</sub> <5) on those containing EP<sub>2</sub>, FP or TP receptors (cat trachea chick ileum, dog iris and guinea-pig lung respectively).

Using agonists, Coleman et al (1987a) produced further evidence for this subdivision: the PGE<sub>2</sub> analogue, sulprostone was found to be highly active as a contractile agent in the guinea-pig longitudinal muscle but inactive as a relaxant in the cat trachea. This pattern was reversed for the PGE<sub>1</sub> analogue, AY 23626. Similarly, Dong et al (1986) compared the contractile and relaxant activity of a number of PGE analogues on a range of preparations. They found that in the bullock iris sphincter, rat stomach fundus, and the guinea-pig trachea ICI 80205 and 16,16-dimethyl PGE<sub>2</sub> were more active as contractile agents than PGE<sub>2</sub>, whereas, for relaxant action on the cat trachea, guinea-pig trachea and dog hind limb arterial vessels *in vivo* the order of potency was reversed. In contrast, 11-deoxy PGE<sub>1</sub> exhibited greater relaxant than contractile potency when compared to PGE<sub>2</sub>.

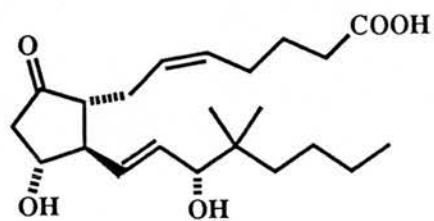
Studies by Coleman et al (1987b) on sulprostone and AY 23626 lead to a further subdivision of PGE<sub>2</sub> receptors. On studying their action on the chick ileum and the cat trachea (both contain receptors resistant to block by AH 6809) they found that AY 23626 was active in both preparations (EMR of 5.5 and 1.2 respectively). However, sulprostone



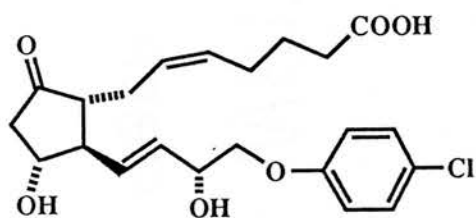
Figure 4.1A: Structures of PGE<sub>2</sub> analogues.



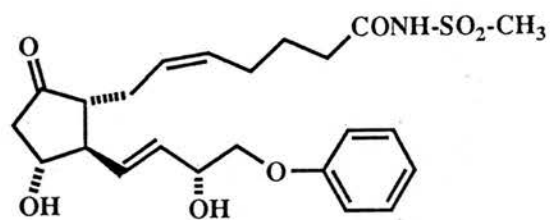
PGE<sub>2</sub>



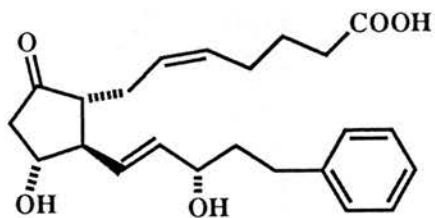
16,16 dimethyl PGE<sub>2</sub>



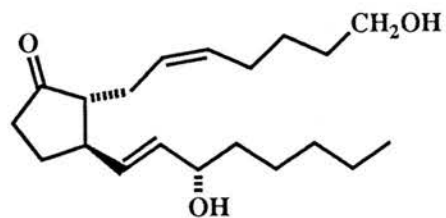
ICI 80205



Sulprostone

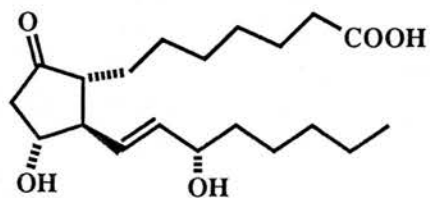


17-phenyl PGE<sub>2</sub>-ω-trinor

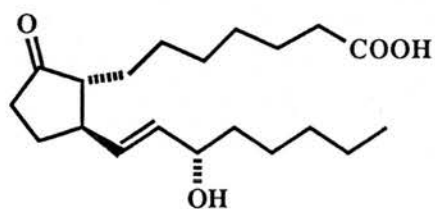


11-deoxy PGE<sub>2</sub> 1-alcohol

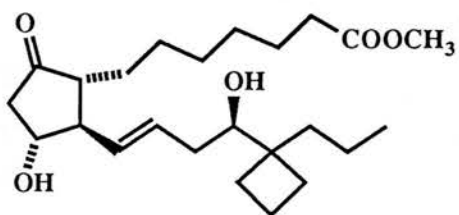
Figure 4.1B: Structures of PGE<sub>1</sub> analogues.



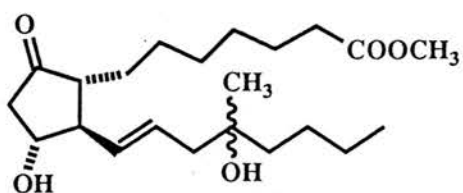
PGE<sub>1</sub>



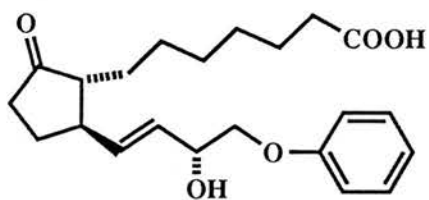
11-deoxy PGE<sub>1</sub>



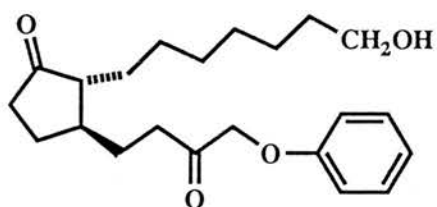
Butaprost



Misoprostol

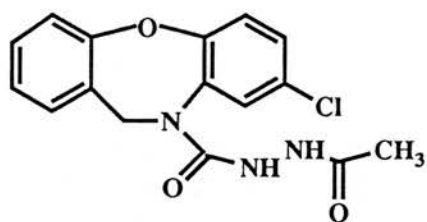


MB 28767

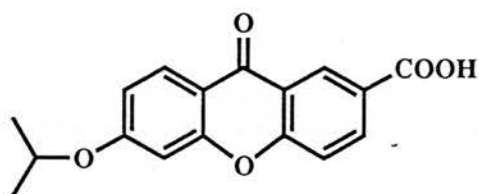


Oxoprostol

Figure 4.1C: Structures of PGE receptor antagonists



SC 19220



AH 6809

was >9000 times less active than PGE<sub>2</sub> in the cat trachea. They proposed the existence of a subgroup of EP<sub>2</sub> receptors to be known as EP<sub>3</sub>, upon which sulprostone is highly active. Similar results were reported by the group on comparing the action of sulprostone on the guinea-pig vas deferens and the guinea-pig ileum circular muscle (Coleman et al 1987c). Again, sulprostone was found to be highly active on one preparation (as an inhibitor of twitch in field stimulated guinea-pig vas deferens) and inactive on the other (relaxation of the guinea-pig ileum circular muscle). The agonist activity of PGE<sub>2</sub> on both preparations was unaffected by SC 19220 (300 μM) or AH 6809 (10 μM). More recently, Reeves et al (1988) reported investigations of the activity of various prostanoids as inhibitors of histamine-induced acid secretion in rat isolated gastric mucosa. The rank order of agonist potency was very similar to that found on the guinea-pig vas deferens and the action of sulprostone was unaffected by 300 μM SC 19220. The authors proposed that the effects were mediated by an EP<sub>3</sub> receptor.

In this thesis the actions of PGE<sub>2</sub> and a range of PGE analogues have been investigated in three smooth muscle preparations. There are two primary aims of the study: (1) to further characterise the receptors present in these preparations and assess the usefulness of the tissues in future study of EP receptor subtypes and (2) to study the selectivity/specificity of a range of analogues and comment on their use in the classification of EP receptors.

### *Tissues investigated*

#### *Chick ileum*

As discussed earlier the chick ileum and the cat trachea were initially thought to contain EP<sub>2</sub> receptors as PGE<sub>2</sub>-induced relaxation was not blocked by SC 19220 (Kennedy et al, 1982). However, subsequent research has shown that sulprostone is active in this preparation but devoid of relaxant activity in the cat trachea (Coleman et al, 1987b). Thus, the receptor mediating contraction of the chick ileum has been defined as EP<sub>3</sub>. Initial results in the guinea-pig vas deferens indicate that this tissue has a similar profile to the chick ileum (Reeves et al, 1988).

### *Rabbit jugular vein*

Previous work has shown that the rabbit jugular vein (RJV) contains a number of receptors for non-prostanoids: adrenaline, bradykinin and histamine (Kenakin, 1984).

More recently, the existence of prostanoid receptors in this tissue has been investigated. Giles et al (1989) found that the thromboxane mimetic, U 46619 contracted the preparation with an  $EC_{50}$  of  $\sim 6$  nM. The concentration-response curve of the compound was subject to a parallel rightward shift in the presence of the thromboxane blocker, BM 13.177, consistent with a  $pA_2$  of  $6.01 \pm 0.01$ .

This group also investigated the relaxant actions of  $PGD_2$  against histamine-induced contractions. In the absence of BM 13.177, the concentration-relaxation curve for  $PGD_2$  was bell shaped - contractions being produced at concentrations of  $>100$  nM. In the presence of  $30 \mu M$  BM 13.177,  $PGD_2$  displayed only inhibitory responses with a  $IC_{50}$  of  $\sim 80$  nM. The relaxations induced by  $PGD_2$  and the  $PGD_2$ -mimetic, BW 245C, were blocked by the potent DP-receptor antagonist, BW A868C. However, both compounds displayed a phase of relaxation which was resistant to the antagonist, and this effect was not blocked by the  $EP_1$ -receptor blocker, AH 6809. On the basis of these results the authors suggested that the BW A868C-resistant relaxation may be mediated by an  $EP_2$  receptor.

We have further investigated the possibility that the rabbit jugular vein contains  $EP_2$  receptors, investigating the relaxant activity of  $PGE_2$ ,  $PGE_1$ ,  $PGI_2$  and a range of their analogues.

### *Guinea-pig ileum - longitudinal muscle*

Prostaglandins have been found in the gastrointestinal wall of man and many other animals including the guinea-pig (Ambache et al, 1966). It has been shown that both  $PGE_1$  and  $PGE_2$  (2-500 nM) contract the longitudinal muscle of the guinea-pig ileum in a concentration dependent manner. These contractions are unaffected by hexamethonium but partially blocked by tetrodotoxin (TTX), hyoscine and atropine (Horton, 1965; Bennet et al, 1968.). In view of these results it

was suggested that prostanoids stimulate two sites in the longitudinal muscle: intrinsic cholinergic nerves and smooth muscle cells (Bennet et al, 1968). Further evidence for a neural component of the action of PGE<sub>2</sub> was found in experiments involving the use of morphine (see Chapter 3 - Introduction). Sanner (1971) demonstrated that 0.26  $\mu$ M morphine produced an inhibition of the contractile response to PGE<sub>1</sub> (60%) and PGE<sub>2</sub> (41%). He noted that "prostaglandins have the potential for producing part of their stimulatory effect by way of the intrinsic nervous system. Whether this action is seen under physiological conditions is open to conjecture".

A number of attempts have been made to measure the effect of PGE<sub>2</sub> on Ach release in the isolated guinea-pig ileum longitudinal muscle. Hadhzay et al (1973) and Illes et al (1974) found that PGE<sub>2</sub> in concentrations up to 50 nM had no effect on Ach release. However, Kadlec et al (1978) reported data showing that PGE<sub>2</sub> caused a significant increase in Ach release at low concentrations (6 nM). The discrepancy may be explained by the finding that the ability of PGE<sub>2</sub> to increase Ach was inversely proportional to the initial output (Kadlec, 1978). Yagasaki et al (1981) demonstrated the release of Ach from Auerbach's plexus by PGE<sub>1</sub>, this action was inhibited by TTX.

A physiological role for PGE<sub>2</sub> in cholinergic transmission has been postulated on the basis of experiments investigating the effect of the cyclooxygenase inhibitor, indomethacin on electrically-induced contractions of the tissue. Ehrenpreis et al (1973) demonstrated that indomethacin inhibited electrically-induced contractions of the ileum, although the very high concentration used (111  $\mu$ M) has been subsequently shown to have non-specific inhibitory effects on Ach and histamine contractions (Bennet et al, 1975). However, using a modified Krebs solution a number of groups have demonstrated an inhibitory action of lower concentrations (1-3  $\mu$ M) indomethacin on electrically-induced contractions, which could be reversed by PGE<sub>2</sub> (Kadlec et al, 1974; Bennet et al, 1975; Poll et al, 1988 a and b).

In order to show unequivocally that PGE has a physiological role in mediating cholinergic transmission in the guinea-pig ileum one should

measure the degree of synthesis inhibition and the degree of twitch inhibition simultaneously in each tissue. Also, the action of a number of structurally distinct cyclo-oxygenase inhibitors should be compared. Botting and Salzmann (1974) found that 2.8  $\mu\text{M}$  indomethacin caused a significant inhibition of PGE output both at rest and during field stimulation, however it had no effect on Ach output during field stimulation. In addition, Hedqvist et al (1980) demonstrated that PGE<sub>2</sub> enhanced the contractile responses of the ileum to nerve stimulation, Ach and direct muscle stimulation. However, the author concluded that this was due to a postsynaptic potentiating action as PGE<sub>2</sub> had no effect on the release of Ach during field stimulation.

*EP-receptors present:* Kennedy et al (1982) investigated the action of various prostanoids in the guinea-pig ileum in the presence of atropine, indomethacin and phenoxybenzamine, thus restricting their action to a direct one on smooth muscle cells. They found that SC 19220 (30-300  $\mu\text{M}$ ) caused a dose-related parallel rightward shift in the concentration-response curves of PGE<sub>1</sub>, PGE<sub>2</sub> and PGF<sub>2 $\alpha$</sub> . In addition, PGI<sub>2</sub> was almost 100 times less active than PGE<sub>2</sub>, while PGD<sub>2</sub> and the thromboxane mimetic, U 46619 were found to be inactive. On the basis of these results they defined the guinea-pig ileum as an EP<sub>1</sub>-selective preparation. More recently, AH 6809 has been shown to antagonise the contractile action of PGE<sub>2</sub> in this tissue (Coleman et al, 1987a). The neuronal EP receptor has never been fully characterised. Recent work by Poll et al (1988a and b) (see discussion) suggests that this receptor may be a subtype other than EP<sub>1</sub>. Finally, Gardiner (1986) found that high concentrations (3-10  $\mu\text{M}$ ) of butaprost (which the authors have proposed to be EP<sub>2</sub>-selective agonist) caused a non-competitive inhibition of histamine-induced contractions of this preparation. They proposed the existence of an additional EP<sub>2</sub> receptor mediating smooth muscle relaxation.

The guinea-pig longitudinal muscle is at present widely accepted to be an EP<sub>1</sub> selective preparation, however, in view of the above results there is a need for further study of the nature of the EP receptors present. In this thesis the EP receptors on both the smooth muscle and neuronal

elements have been characterised using a range of PGE analogues and the EP<sub>1</sub> receptor antagonist, AH 6809.

*Analogues investigated (see Figure 4.1 and Table 4.1)*

PGE<sub>2</sub> analogues (Figure 4.1A)

*16,16-dimethyl PGE<sub>2</sub>*: This prostanoid has been shown to contract the rabbit aortic strip and induce irreversible aggregation of human platelets: these effects are abolished by thromboxane receptor blockade (Jones et al, 1979; 1982). It is a potent EP<sub>1</sub> receptor agonist, being more active than PGE<sub>2</sub> in contraction of the bullock iris sphincter, rat stomach fundus strip, guinea-pig trachea, fundus and ileum (Dong et al, 1986; Coleman et al, 1987; Coleman et al, 1988). It is also highly active at the EP<sub>3</sub> receptors of the guinea-pig vas deferens and the rat isolated gastric mucosa (Reeves and Stables, 1985; Reeves et al, 1988). However, Dong et al (1986) found it to be less active than PGE<sub>2</sub> at EP<sub>2</sub> receptors mediating relaxation of the guinea-pig trachea, cat trachea and dog hind limb blood flow *in vivo*. A recent report indicated that 16,16-dimethyl PGE<sub>2</sub> was 27 times less active than PGE<sub>2</sub> in the cat trachea (Coleman and Sheldrick, 1988).

*ICI 80205*: Similarly to 16,16-dimethyl PGE<sub>2</sub>, ICI 80205 has thromboxane mimetic properties (Dong et al 1986). Jones et al (1979) and Dong and Jones (1982) also found this compound to have a similar profile to that of 16,16-dimethyl PGE<sub>2</sub> at EP receptors, although it appears to be more selective for EP<sub>1</sub> receptors. Their studies showed it to be highly active at the contractile receptors of the bullock iris sphincter, the rat stomach fundus and the guinea-pig trachea, but inactive as a relaxant agent in the guinea-pig trachea, and only weakly active in the cat trachea and the dog hind limb. ICI 80205 has not yet been studied on any EP<sub>3</sub> systems.

*17-phenyl PGE<sub>2</sub>- $\omega$ -trinor*: No biological data has been reported in the literature.

*Sulprostone*: Coleman et al (1987a) have shown sulprostone to be active at EP<sub>1</sub> receptors in the guinea-pig ileum and the guinea-pig and dog



fundus, where it is only 2-4 fold less active than PGE<sub>2</sub>. It is, however, highly potent in all tissues containing EP<sub>3</sub> receptors: chick ileum (Coleman et al, 1987b), guinea-pig vas deferens (Coleman et al 1987c) and rat isolated gastric mucosa (Reeves et al, 1988). Sulprostone appears to be devoid of any EP<sub>2</sub> agonist activity, being inactive or weakly active on the cat trachea, guinea-pig ileum circular muscle, and dog saphenous vein (Coleman et al 1987a).

*11-deoxy PGE<sub>2</sub> 1-alcohol*: No biological data is available in the literature.

PGE<sub>1</sub> analogues (Figure 4.1B)

*MB28767*: Banerjee et al (1981a and b) found that this compound caused prolonged inhibition of pentagastrin-stimulated gastric acid secretion by oral dosing in conscious rats, and was 17 times more potent than their control compound: 16,16-dimethyl PGE<sub>2</sub> methyl ester. Although not reported as such this may have been due to a potent action on EP<sub>3</sub> receptors, now known to be present in this system (Reeves et al, 1988). However, more recently (Banerjee et al, 1985) MB28767 has been shown to have potent contractile action on the rabbit aorta (EC<sub>50</sub>, 2 μM) and mesenteric artery (EC<sub>50</sub>, 200 nM), the EMR vs U 46619 being ~2.5 and 1 respectively. It also induced irreversible aggregation of rat and human platelets *in vitro* (Banerjee et al, 1985; Halushka et al, 1987). These actions are indicative of thromboxane agonist activity.

*Oxoprostonol*: No biological data as yet available in the literature, for chemistry -see Facchini and Jones (1988).

*Misoprostol*: Misoprostol (Collins et al, 1985) has been shown to be an effective anti-secretory agent against a number of stimuli and provides protection of the gastric mucosa of a range of species (Bauer, 1985; Hanson et al, 1988). These types of activity have since been associated with EP<sub>3</sub> receptors ( see Coleman et al, 1990). In addition, the compound is highly active on the guinea-pig vas deferens and the rat isolated gastric mucosa (Reeves et al, 1988) - both known to contain EP<sub>3</sub> receptors. Conflicting results have been reported on the activity of misoprostol on EP<sub>1</sub> and EP<sub>2</sub> receptors. Coleman et al (1988) reported results showing a high potency for this compound at EP<sub>2</sub> receptors of

the cat trachea, but low activity in the guinea-pig fundus (EP<sub>1</sub>). While Eglen and Whiting (1988) found misoprostol to be equi-active with PGE<sub>2</sub> in two EP<sub>1</sub> contractile preparations (guinea-pig ileum, and oesophageal muscularis muscle) and 20 times less active in another (guinea-pig trachea), but inactive as an EP<sub>2</sub> agonist (relaxation in guinea-pig trachea).

*11-deoxy PGE<sub>1</sub>*: Dong et al (1986) reported a low activity of this compound at EP<sub>1</sub> contractile receptors in the bullock iris sphincter, rat stomach fundus and the guinea-pig trachea. However, it was found to have greater activity at EP<sub>2</sub> receptors in the guinea-pig trachea, the cat trachea and the dog hind limb. 11-Deoxy PGE<sub>1</sub> has not to date been investigated in any preparations containing EP<sub>3</sub> receptors.

*Butaprost*: Gardiner (1986) has shown that on preparations containing both EP<sub>1</sub> and EP<sub>2</sub> receptors (guinea-pig trachea and lung, cat lung strip and human bronchial tissue) the compound acted as a potent relaxant, in comparison to PGE<sub>2</sub> which displayed considerable contractile effects. In the cat trachea, butaprost was found to be 26 times less potent than PGE<sub>2</sub>. However, butaprost was shown to be devoid of activity on the chick ileum and was only weakly active in the guinea-pig ileum, the maximal response being <20% of that of histamine.

## RESULTS

### CHICK ILEUM

#### *Log Concentration-response curves*

Results are shown in Figure 4.2. All the PGE analogues tested contracted the chick ileum. At the EC<sub>25</sub> level the rank order of potency was: 16,16-dimethyl PGE<sub>2</sub> > ICI80205 > PGE<sub>2</sub> > MB 28767 > sulprostone > butaprost > misoprostol > oxoprostol > 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor > 11-deoxy PGE<sub>2</sub> 1-alcohol.

The log concentration-response curve of PGE<sub>2</sub> reached ~80% of the Ach maximum. However, the maxima of some of the analogues tested were significantly lower: sulprostone (40%  $\pm$  4), butaprost (47%  $\pm$  3), MB 28767 (56%  $\pm$  4) and oxoprostol (~56 %).

#### *Action of AH 6809*

2  $\mu$ M AH 6809 caused a rightward shift in the log concentration-response curve of PGE<sub>2</sub> (Fig. 4.3). The dose-ratio of 2.7  $\pm$  0.8 was significant at the P < 0.05. This is consistent with a pA<sub>2</sub> of 5.9 for AH 6809.

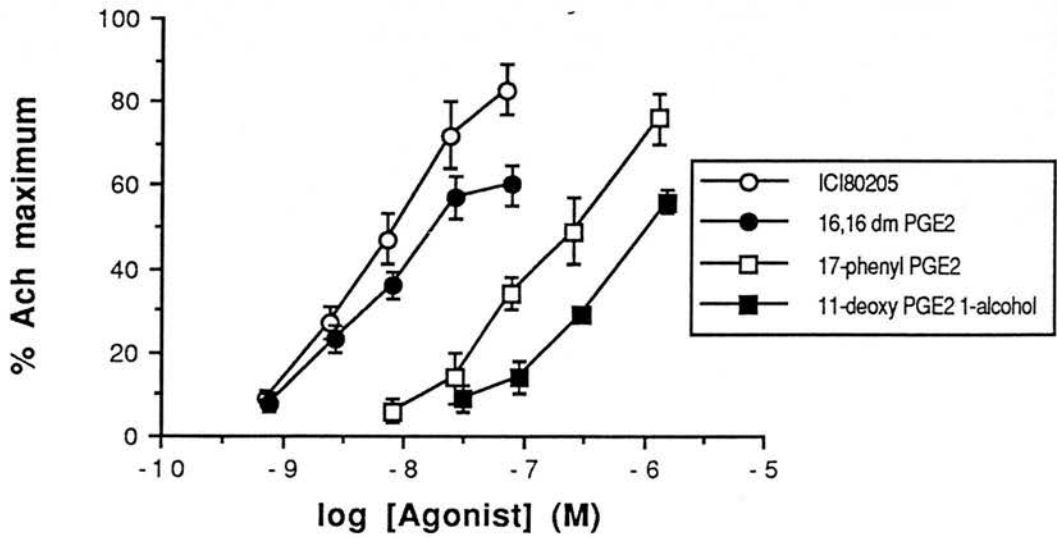
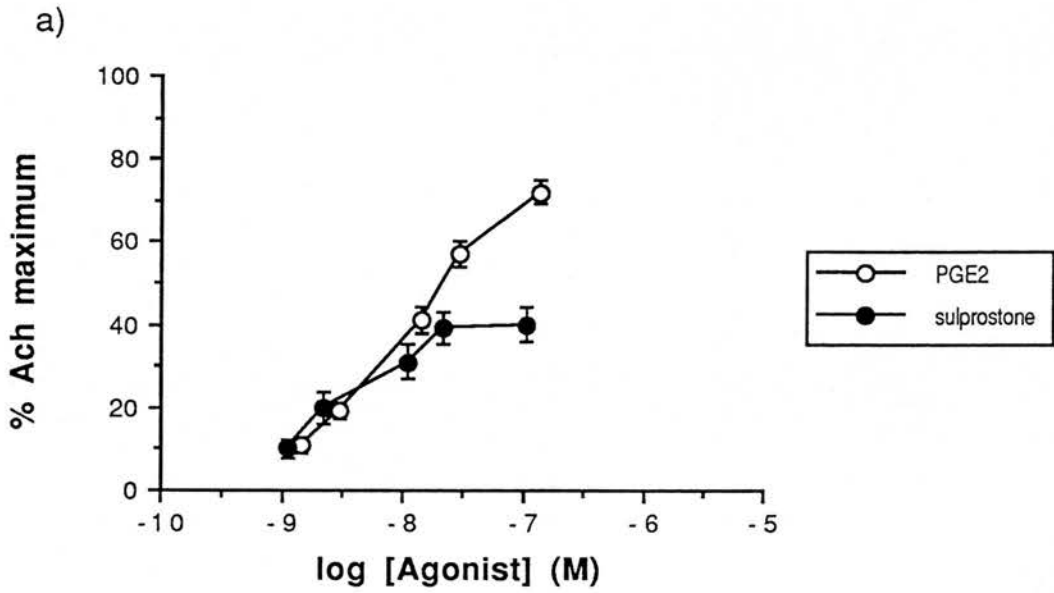
#### *Interaction of PGE<sub>2</sub> and sulprostone*

When doses of PGE<sub>2</sub> were added to a preparation which had been precontracted with a supramaximal (220 nM) concentration of sulprostone, the response levels corresponded closely to those predicted for an additive interaction between the two agonists (see Fig 4.4 and Fig. 4.5).

#### *The effect of the 'cocktail' of antagonists on PGE<sub>2</sub> and Butaprost*

The cocktail of antagonists (see discussion) used by Gardiner (1986) had no effect on the log concentration-resposne curves of PGE<sub>2</sub> and butaprost (Fig. 4.18)

Figure 4.2: Log concentration-response curves of (a) PGE<sub>2</sub> analogues and (b) PGE<sub>1</sub> analogues for contraction of the chick ileum (mean of 4-6 expts.). (bars represent the s.e.m)



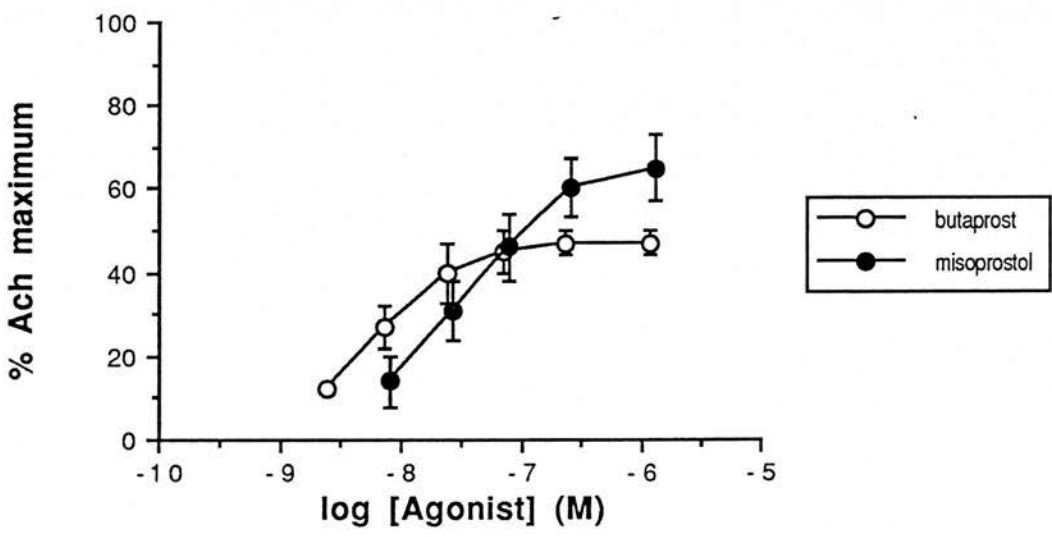
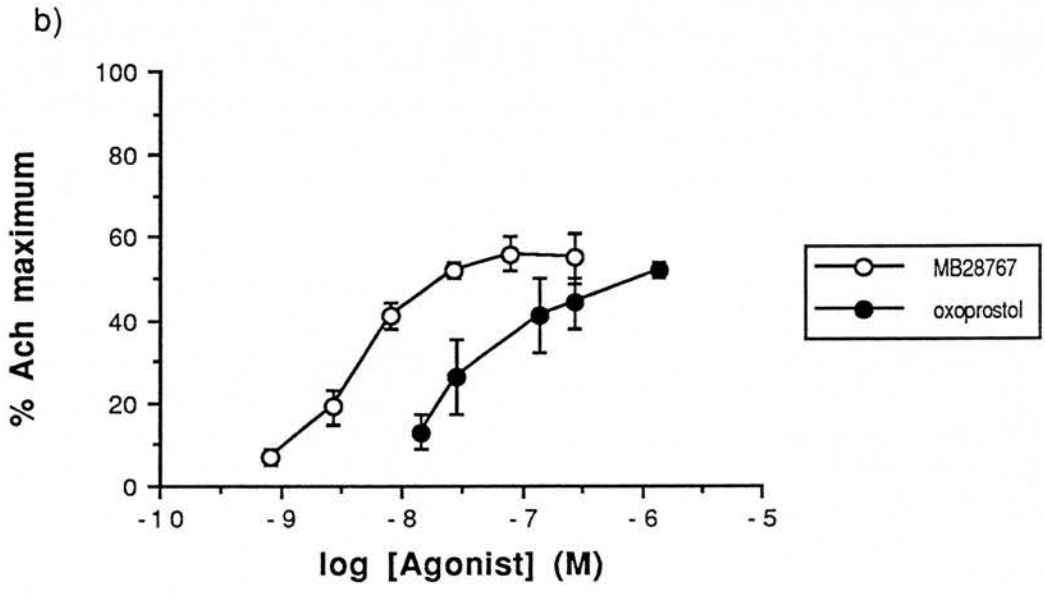


Figure 4.3: Effect of AH 6809 (2 $\mu$ M) on the log concentration-response curve of PGE<sub>2</sub> in the chick ileum (mean of 4 expts.).

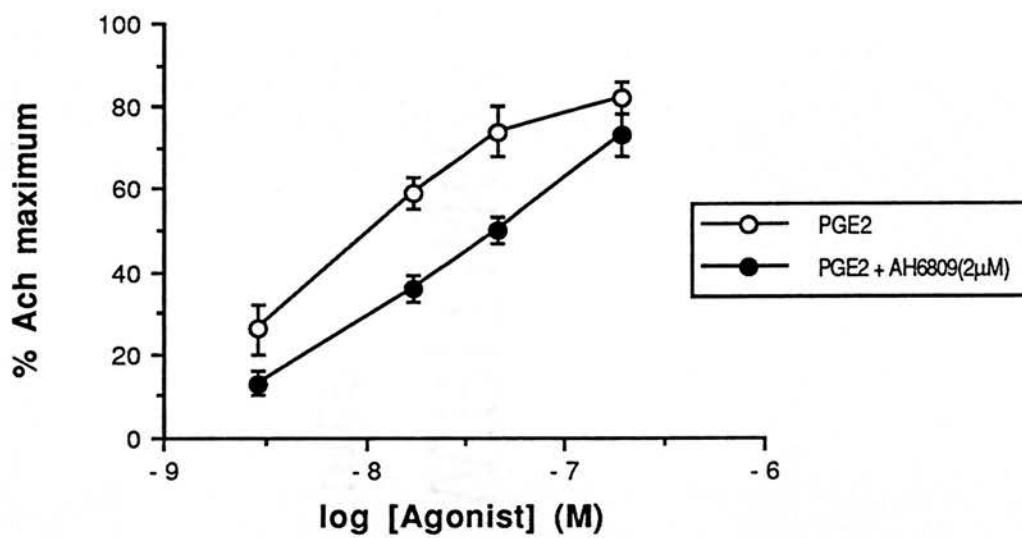


Figure 4.4: (a) Log concentration-response curve of PGE<sub>2</sub> in the absence and the presence of 220nM sulprostone and (b) Log concentration-response curve of PGE<sub>2</sub> alone and that predicted in the presence of 220nM sulprostone if the interaction of the compounds is additive in nature.

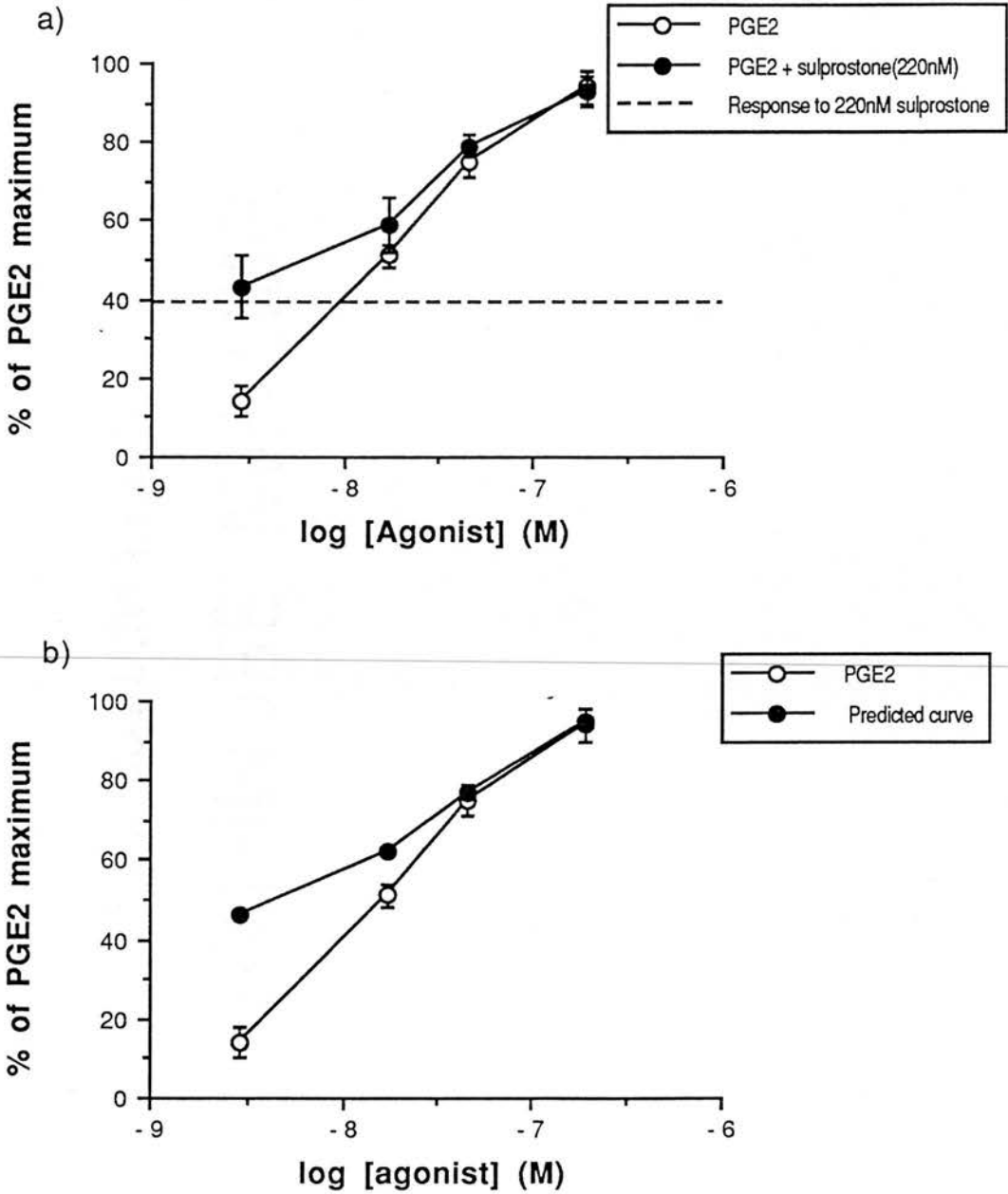
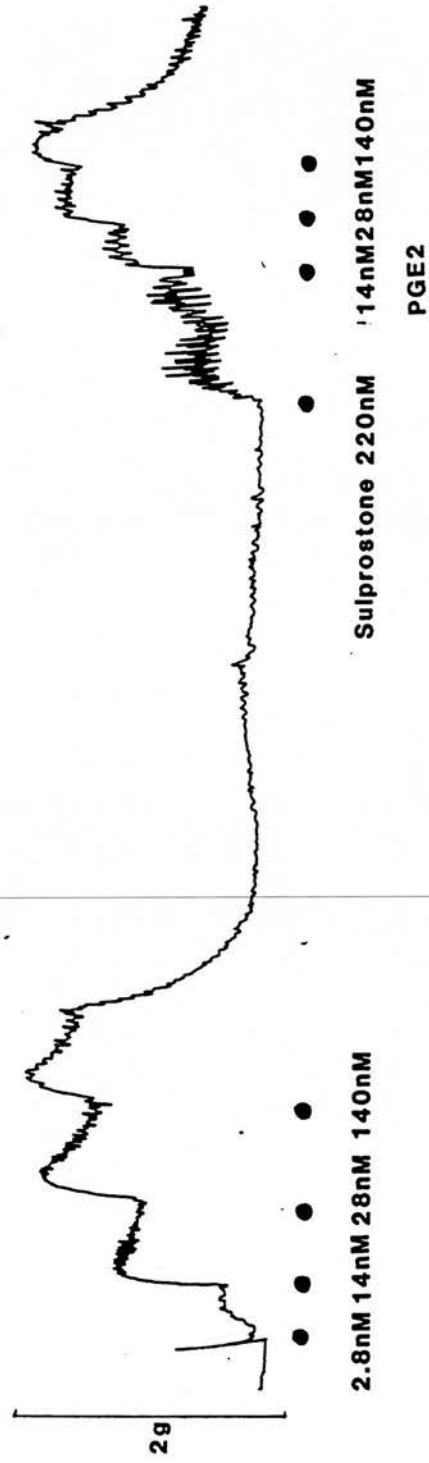


Figure 4.5: Trace showing the contraction of the chick ileum by cumulative additions of PGE<sub>2</sub> and the effect of sulprostone (200nM) on these responses.





## RABBIT JUGULAR VEIN

### *Relaxation of histamine-induced contractions*

The log concentration-response curve of PGE<sub>2</sub> was unaffected by the presence of 10 μM GR 32191, the IC<sub>50</sub> being 0.69 ± 0.15 and 0.61 ± 0.11 in its absence and presence respectively.

In the presence of 10 μM GR 32191 the rank order of potency of PGE analogues was as follows: PGE<sub>2</sub> > 16,16-dimethyl PGE<sub>2</sub> ≥ (nat) 11-deoxy PGE<sub>2</sub>, (rac) 11-deoxy PGE<sub>1</sub> > 11-deoxy PGE<sub>2</sub> 1-alcohol > misoprostol > ICI80205 > 17-phenyl PGE<sub>2</sub>-ω-trinor > butaprost > MB 28767 > sulprostone > oxoprostol (see Fig 4.9). For PGI analogues: cicaprost > iloprost > carbacyclin (Fig. 4.6).

The log concentration-response curves of sulprostone (Fig. 4.9B) and oxoprostol failed to reach the IC<sub>25</sub> level, the maxima being 22 ± 8 (at the highest concentration tested, 3.6 μM) and 14 ± 5 % (at the highest concentration tested, 1.4 μM) respectively. The curve for MB 28767 appears to be bell-shaped, reaching a maximum relaxation of 47 ± 9 % at 100-400 nM, with an IC<sub>25</sub> of 76 ± 40 nM. Concentrations of MB 28767 in excess of 400 nM produced a contractile response (Fig 4.9B).

### *The effect of the TP-receptor antagonist GR 32191*

The TP-receptor agonist, U 46619 produced dose-related contractions of the preparation, with an EC<sub>50</sub> of 4.6 ± 1 nM. In the presence of 10 μM GR 32191 the log concentration-response curve for U 46619 was subject to a parallel rightward shift consistent with a pA<sub>2</sub> of 7.2 ± 0.1 (Fig. 4.7 and Fig. 4.9C).

In the absence of GR 32191, MB 28767 contracted the vessel rings (EC<sub>50</sub>, 26 ± 3 nM). At 10 μM the blocker caused a large rightward shift in the curve. The pA<sub>2</sub> could not be accurately measured as the maximum response obtained in the presence of GR 32191 was 28 ± 15 % at 4.3 μM. However, an estimate of 7.5 for the pA<sub>2</sub> was made from the dose ratio obtained at the IC<sub>25</sub> level.

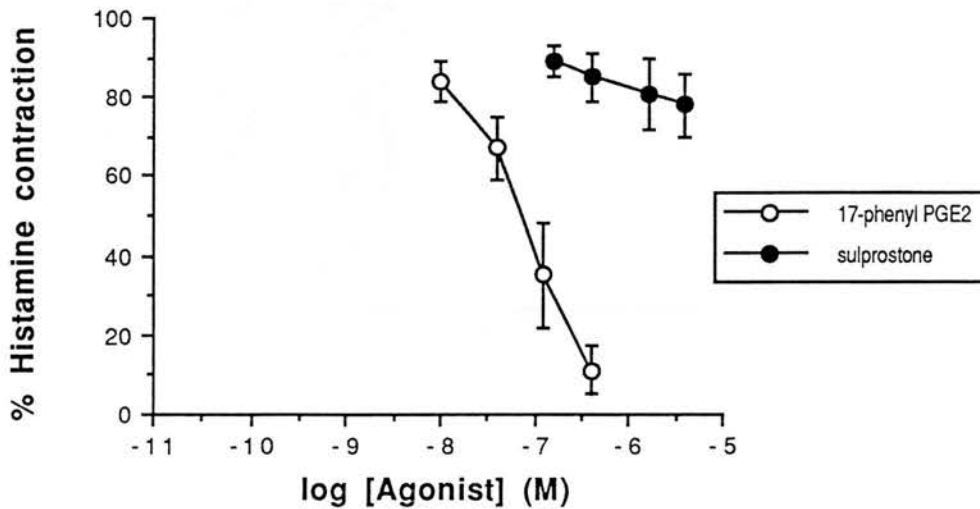
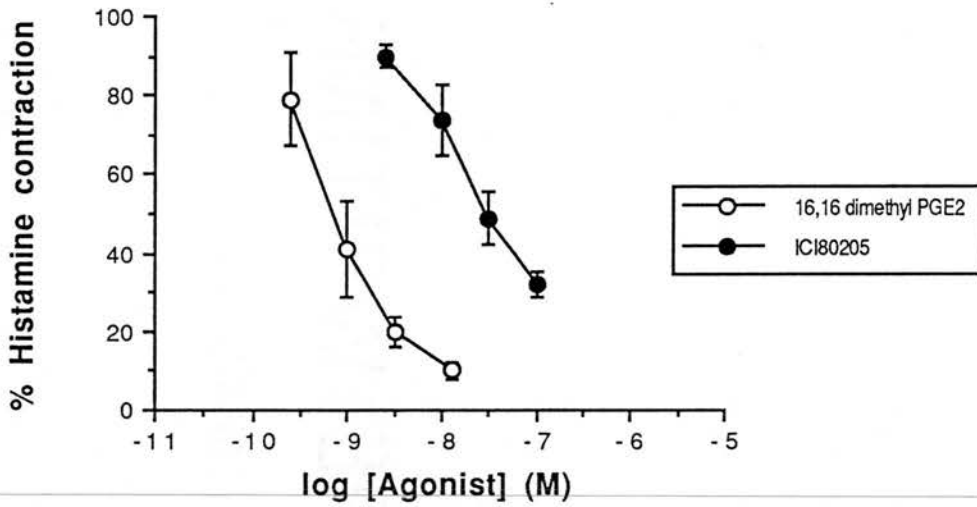
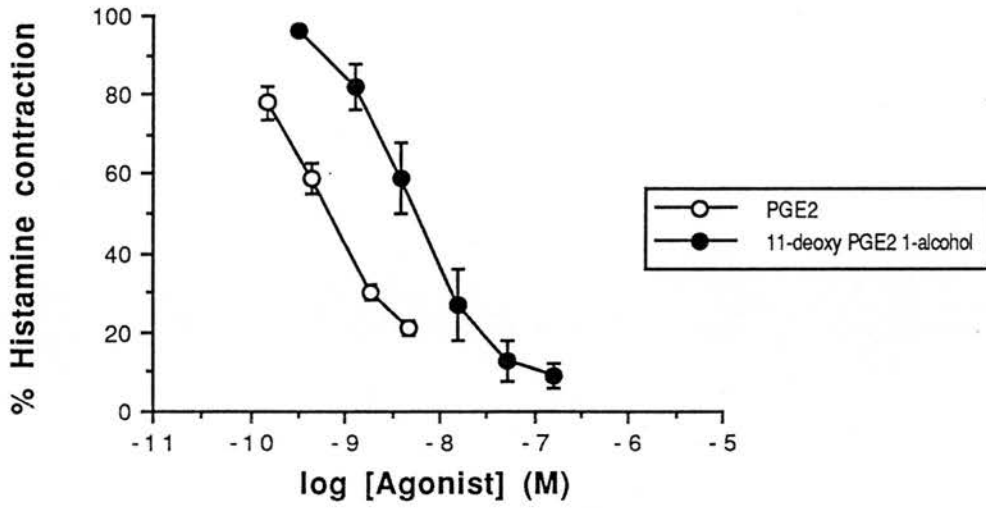
*The effect of AH 6809*

At a concentration of 2  $\mu$ M AH 6809 had no significant ( $P < 0.001$ ) effect on the log concentration-response curve of PGE<sub>2</sub> (Fig. 4.8), the dose ratio was  $0.87 \pm 0.03$ .

Figure 4.6: Log concentration-response curves of (a) PGE<sub>2</sub> analogues and (b) PGE<sub>1</sub> analogues for relaxation of histamine-induced contraction in the rabbit jugular vein (mean of 4-6 expts.).

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a)



b)

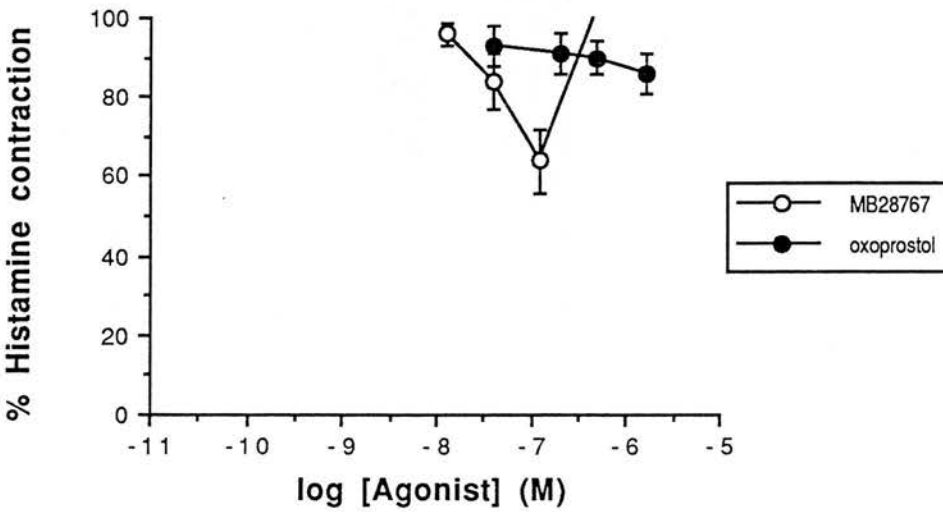
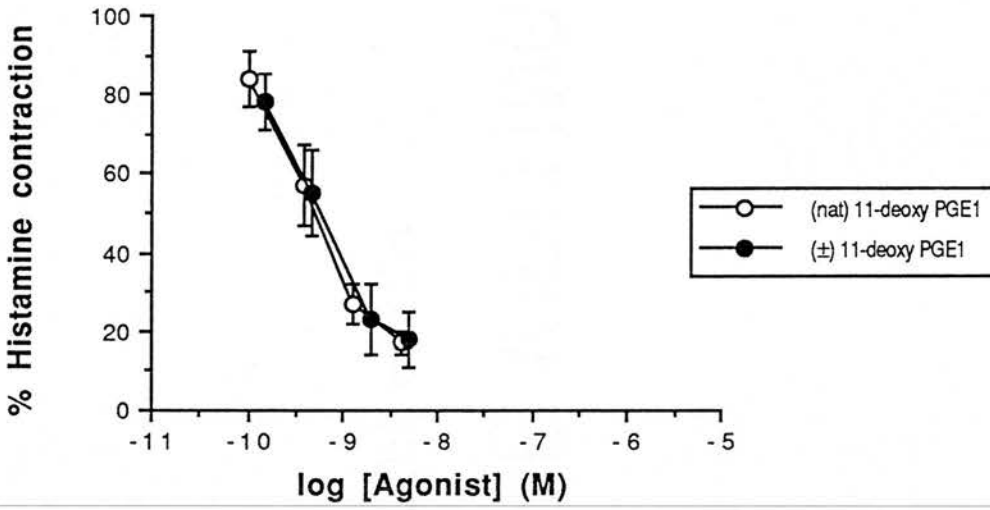
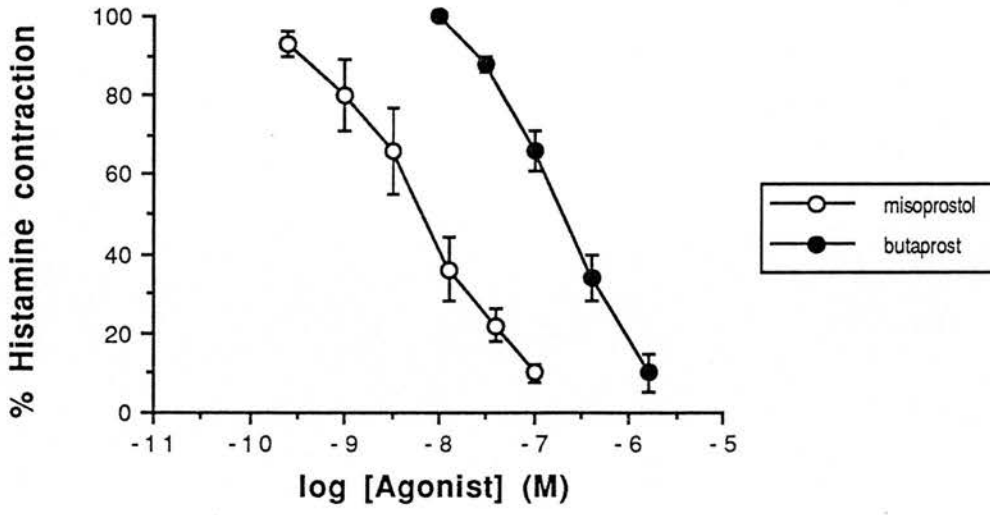


Figure 4.7: Effect of GR 32191 (10 $\mu$ M) on the log concentration-response curves of U 46619 and MB 28767 for contraction of the rabbit jugular vein (mean of 4 expts.).

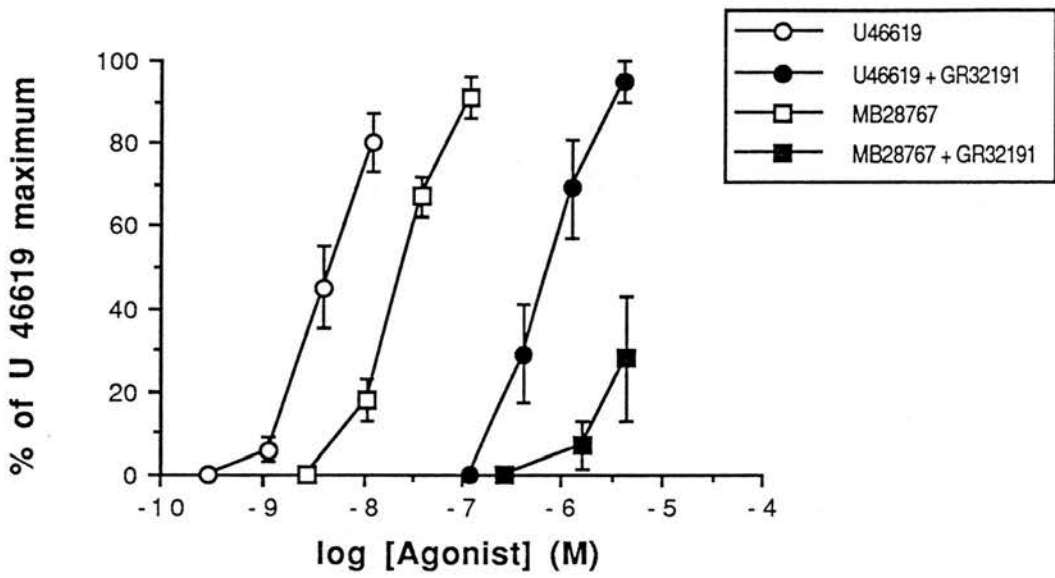


Figure 4.8: Effect of AH 6809 (2 $\mu$ M) on the log concentration-response curve of PGE<sub>2</sub> in the rabbit jugular vein (mean of 5 expts.).

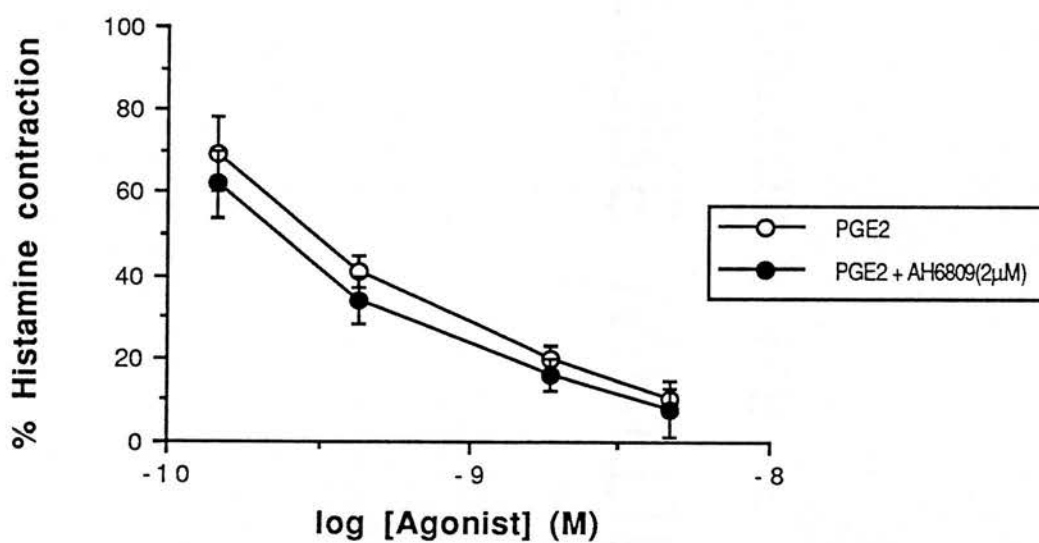




Figure 4.9A: Trace showing the relaxation of the rabbit jugular vein, precontracted with histamine ( $1\mu\text{M}$ ), by (a)  $\text{PGE}_2$  (b) 11-deoxy  $\text{PGE}_1$  and (c) butaprost. The tissues were bathed in Krebs solution containing GR 32191 ( $10\mu\text{M}$ ).

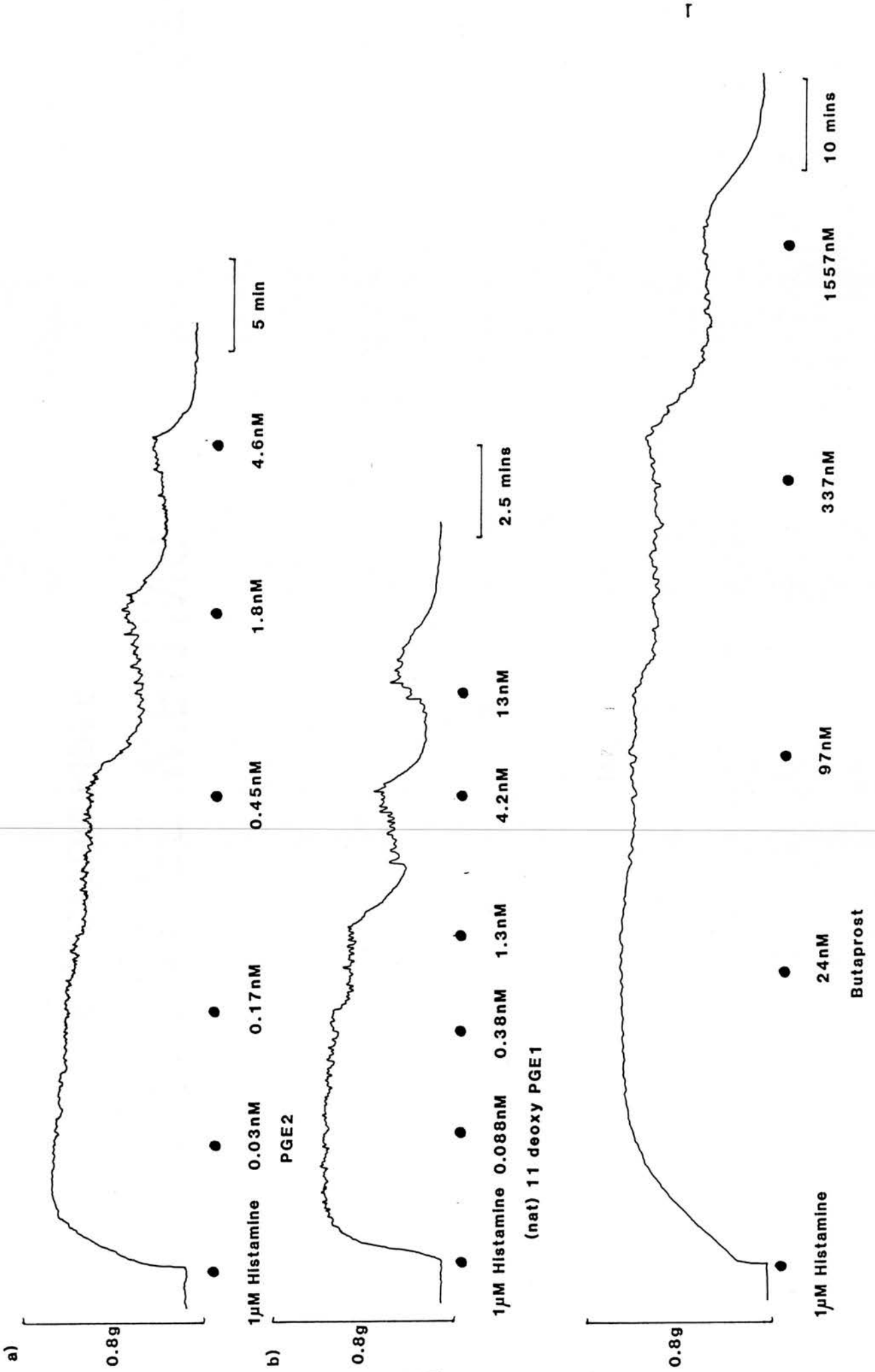


Figure 4.9B: Trace showing the relaxation of the rabbit jugular vein precontracted with histamine ( $1\mu\text{M}$ ) by (a) sulprostone and (b) MB 28767. The tissues were bathed in Krebs solution containing GR 32191 ( $10\mu\text{M}$ ).

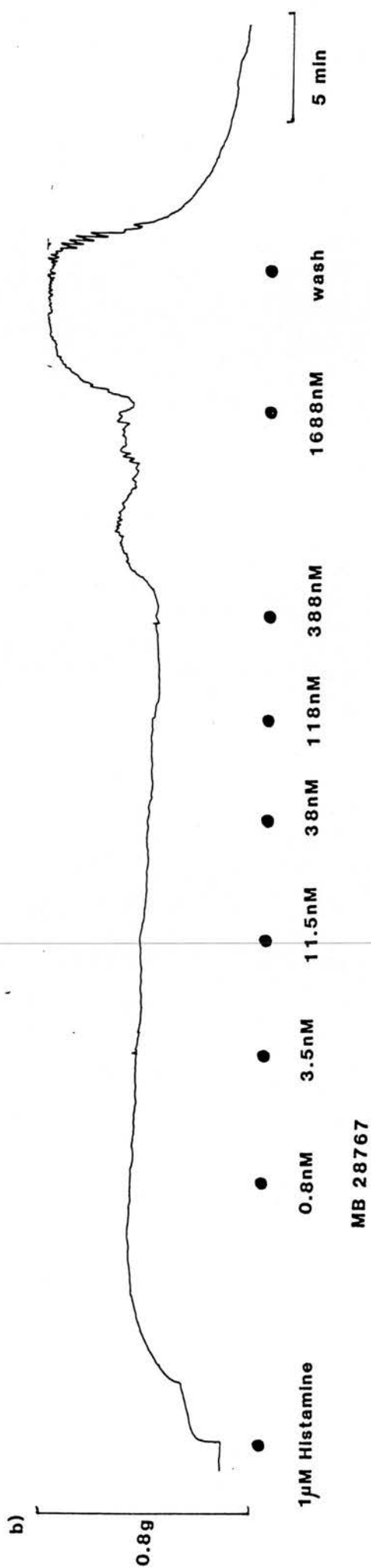
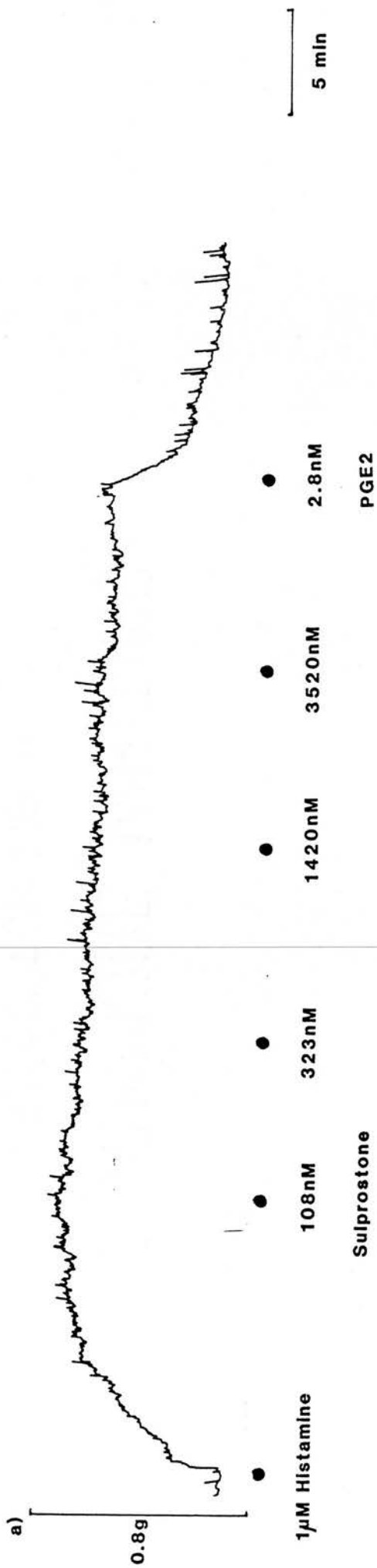
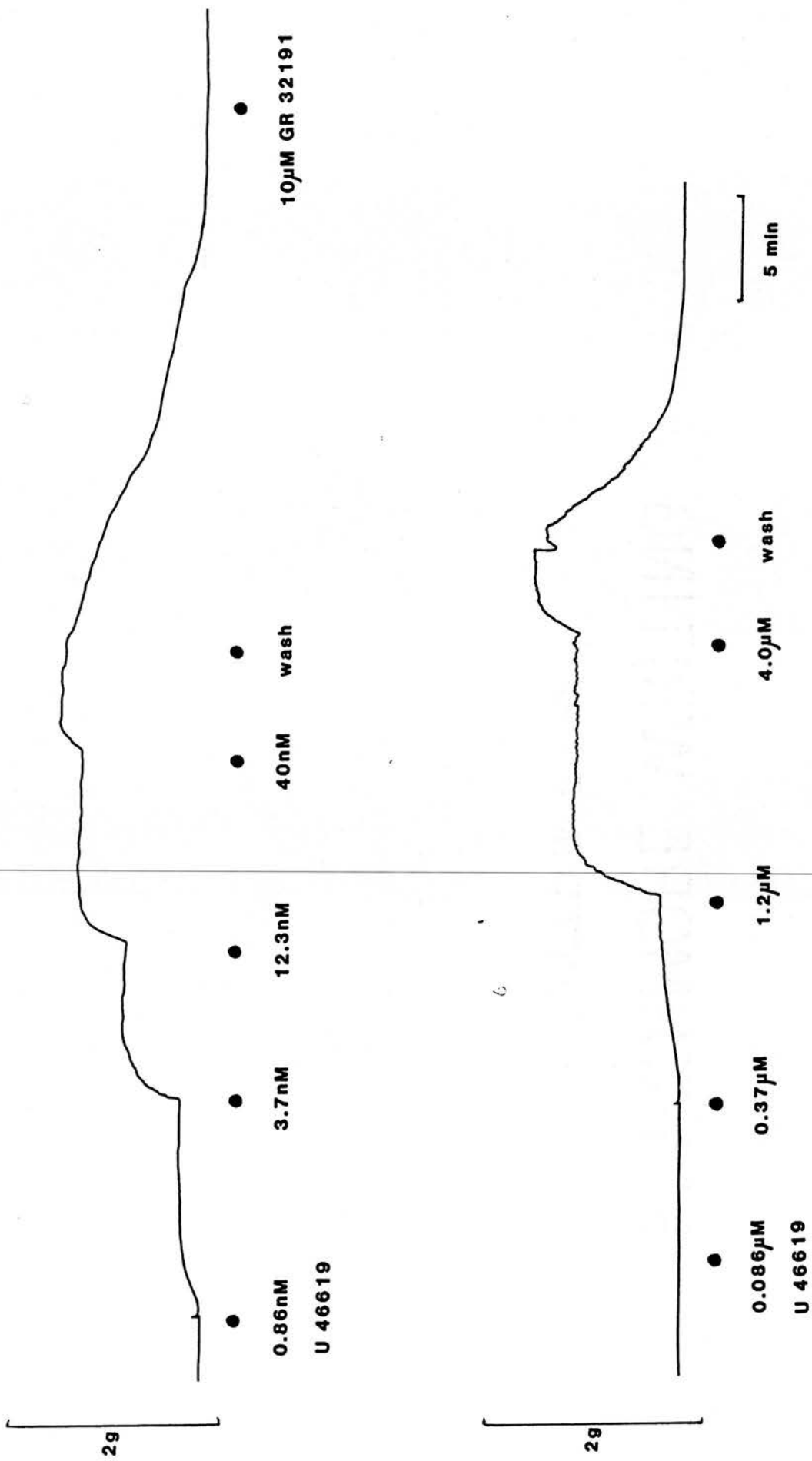


Figure 4.9C: Trace showing the contraction of the rabbit jugular vein by U 46619 and inhibition of this contractile action by GR 32191 (10 $\mu$ M).



## GUINEA-PIG ILEUM

### *Log concentration-response curves*

*PGE analogues:* Log concentration-response curves are shown in Figure 4.10. All the PGE analogues tested were found to have some activity as contractile agents. The rank order of potency was as follows: ICI80205 > 16,16-dimethyl PGE<sub>2</sub> > PGE<sub>2</sub> > MB 28767 > 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor > misoprostol > sulprostone > 11-deoxy PGE<sub>2</sub> 1-alcohol > oxoprostol > 11-deoxy PGE<sub>1</sub> > butaprost. The curves for a number of compounds reached a significantly lower maximum than PGE<sub>2</sub>: 11-deoxy PGE<sub>2</sub> 1-alcohol, 11-deoxy PGE<sub>1</sub>, oxoprostol and butaprost.

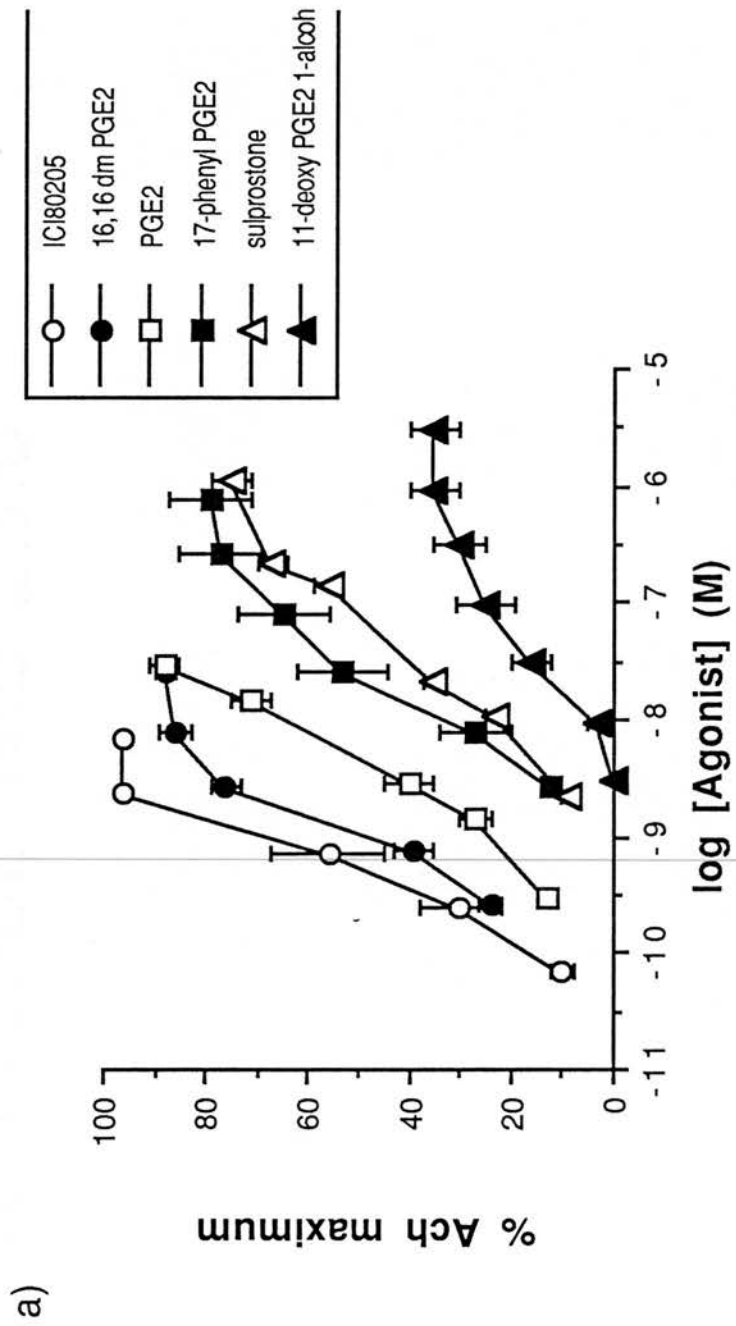
*Other prostanoids:* The thromboxane mimetic, U 46619 was inactive at concentrations up to 3  $\mu$ M. PGF<sub>2 $\alpha$</sub>  contracted the preparation (EC<sub>25</sub>, ~200 nM), however, the prostanoid retained little activity in the presence of 2  $\mu$ M AH 6809. The PGF<sub>2 $\alpha$</sub>  mimetic, ICI 81008 was inactive as a contractile agent at concentrations up to 2  $\mu$ M (Table 4.2).

### *Effect of morphine and TTX*

*Single dose of PGE<sub>2</sub>:* At a concentration of 1  $\mu$ M morphine caused a significant inhibition (38%  $\pm$  6) of the response to a single sub-maximal dose (14nM) of PGE<sub>2</sub>. The inhibitory action of 1  $\mu$ M TTX was similar (37%  $\pm$  3) (Fig. 4.11). Inhibition of a single dose of PGE<sub>2</sub> by 100 nM TTX is shown in Figure 4.17A.

*Log concentration-response curves:* Log concentration-response curves are shown in Figure 4.12. At the EC<sub>25</sub> level the log concentration-response curves of sulprostone and 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor were unaffected by the presence of 1  $\mu$ M morphine and the small shifts in the curves of ICI80205, 16,16-dimethyl PGE<sub>2</sub> and oxoprostol were not significant. However, the Concentration-response curves of PGE<sub>2</sub> and MB 28767 were subject to a small, but statistically significant, rightward shift in the presence of morphine.

Figure 4.10: Log concentration-response curves of (a) PGE<sub>2</sub> analogues and (b) PGE<sub>1</sub> analogues for contraction of the guinea-pig ileum (mean of 4-6 expts.).





b)

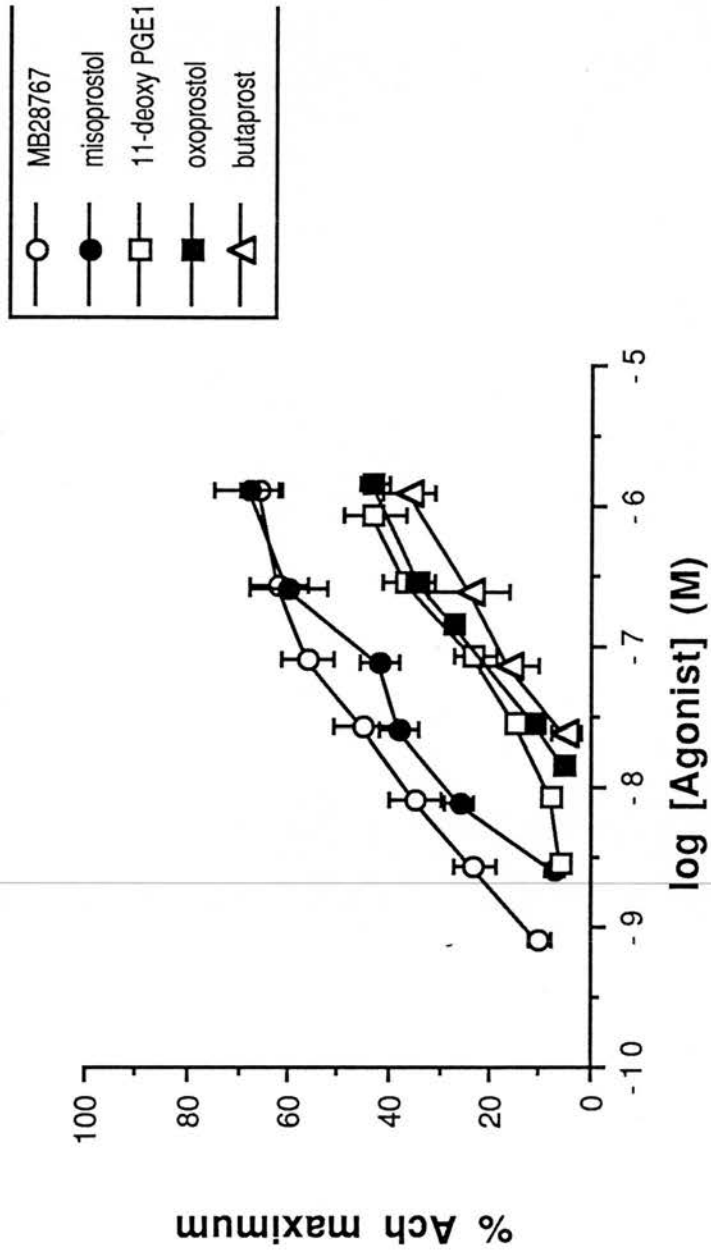


Table 4.2: pD<sub>25</sub> values of U 46619, PGF<sub>2α</sub>, ICI 81008 and substance P in the guinea-pig ileum.

COMPOUND	PD <sub>25</sub>	
	Alone	+ AH6809 (2μM)
U 46619	<5.54	—
PGF <sub>2α</sub>	6.75	<5.85
ICI 81008	<5.85	—
Substance P	9	—

Figure 4.11: Histograms showing the effect of (a) TTX (1 $\mu$ M) and morphine (1 $\mu$ M) and (b) AH 6809 (1 $\mu$ M) on the response to a single submaximal dose of PGE<sub>2</sub> (14nM), cicaprost (13nM), iloprost (14nM) and carbacyclin (150nM) (mean of 4-6 expts.).

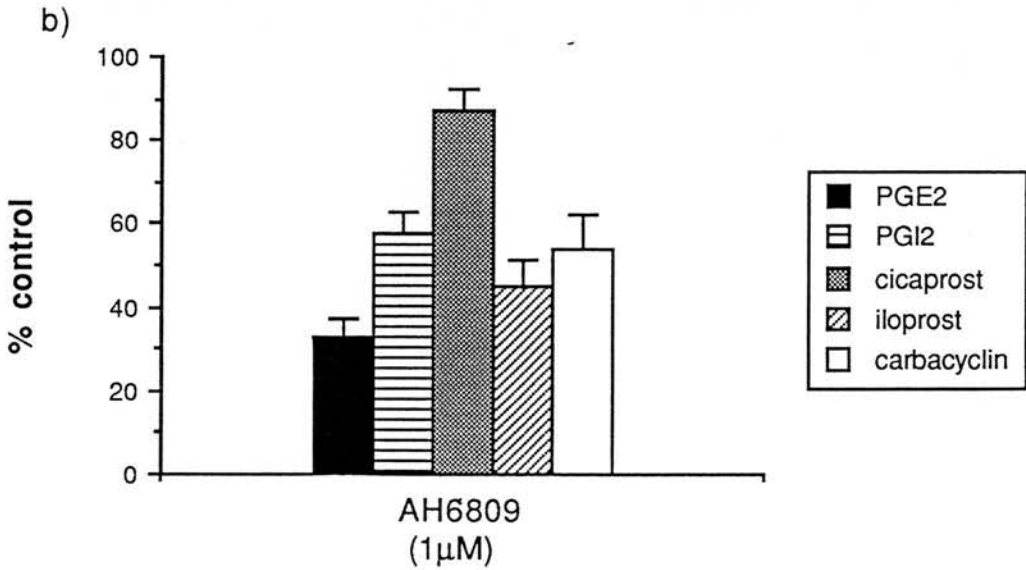
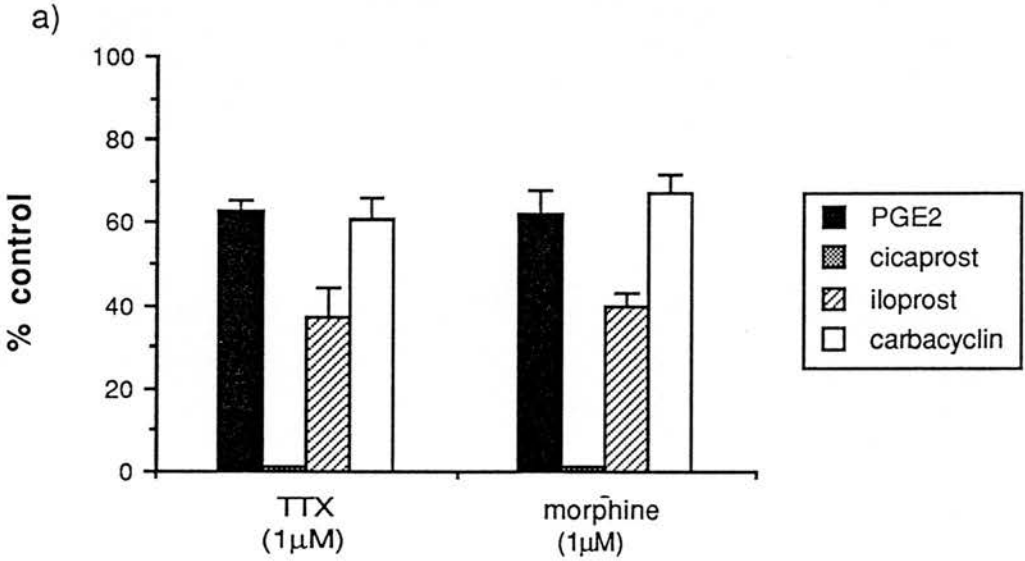
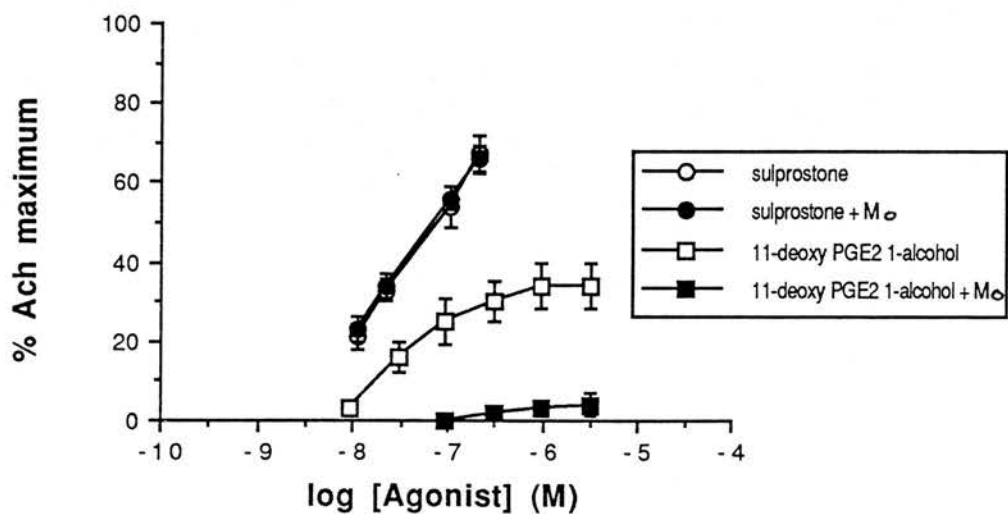
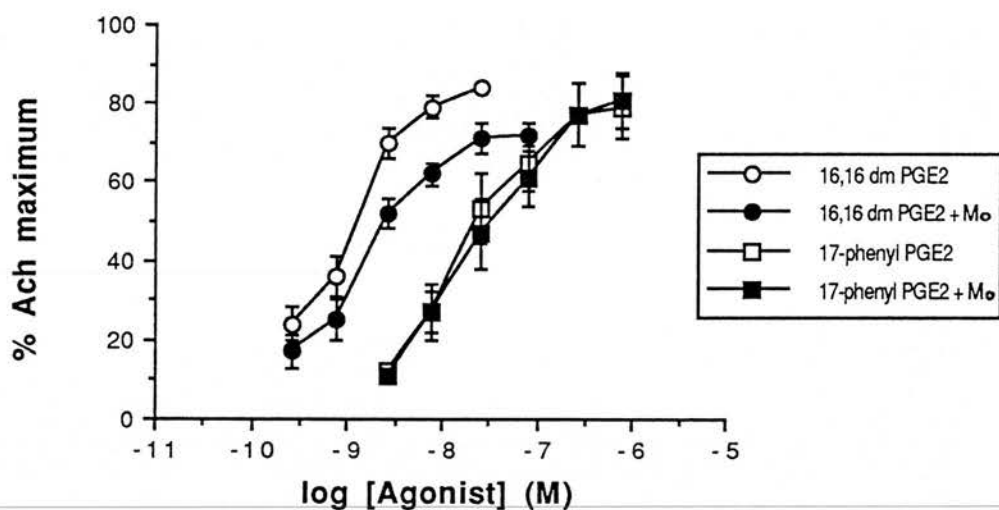
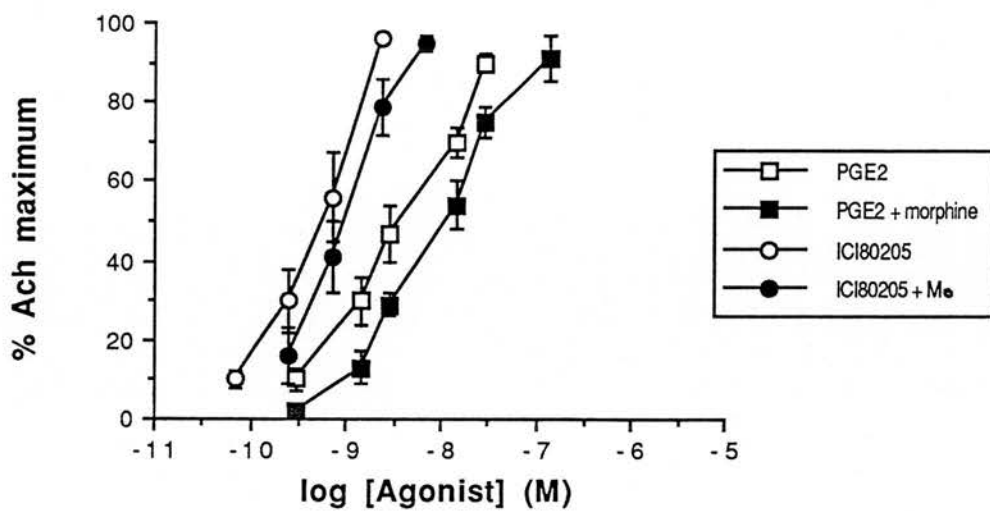
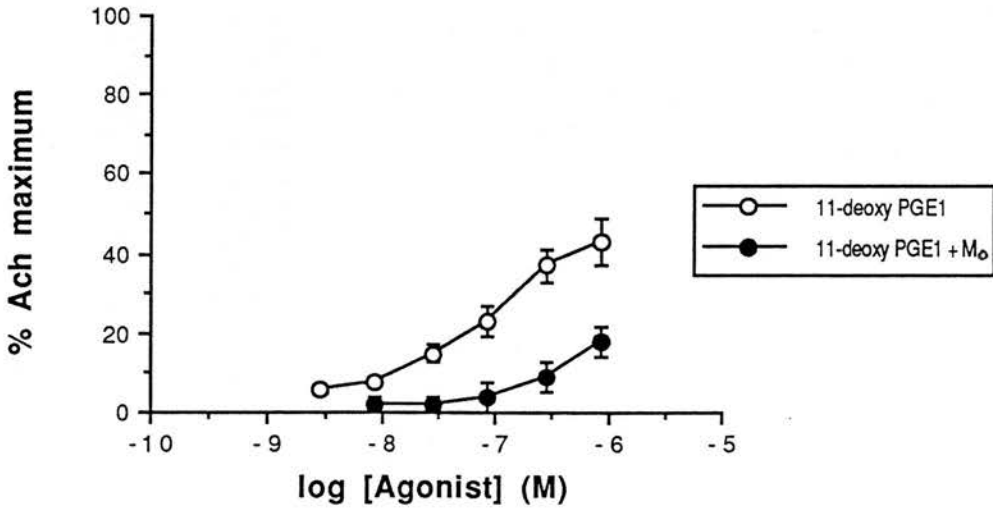
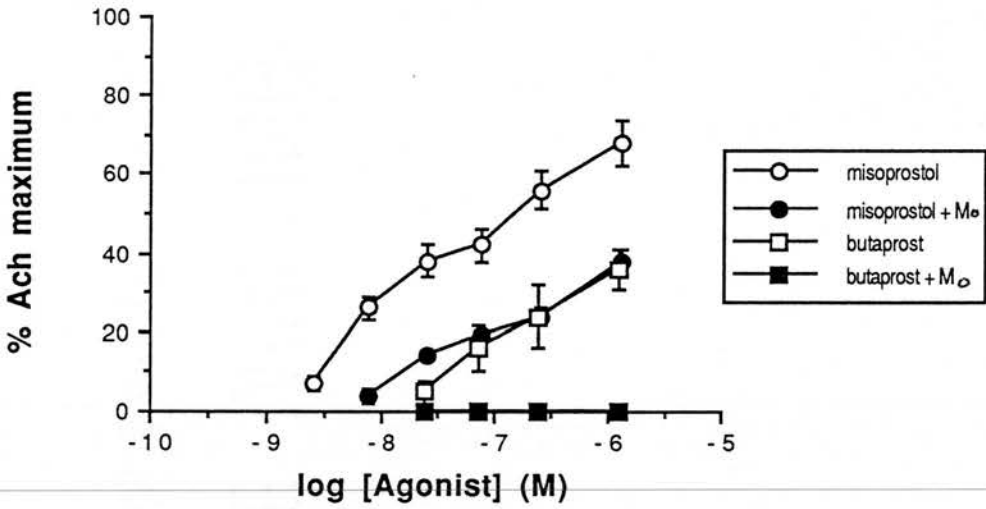
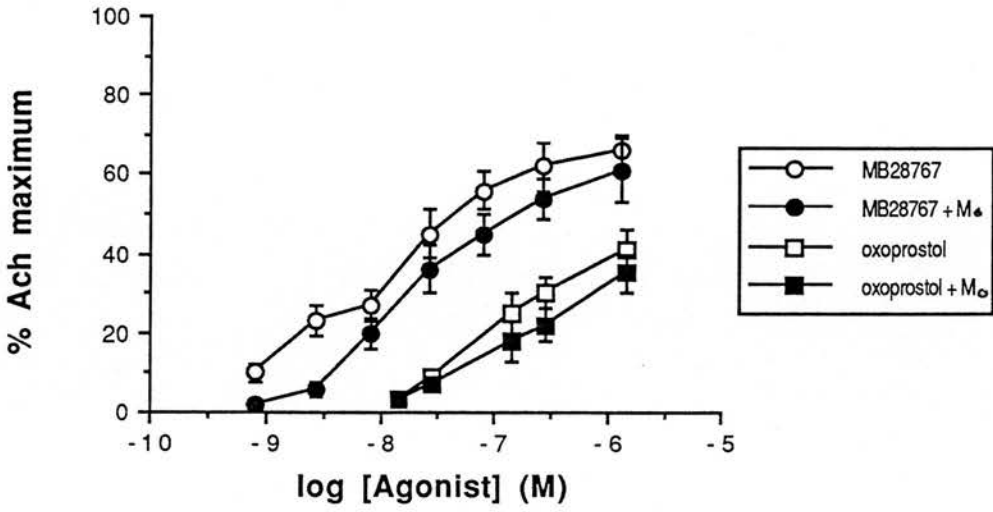


Figure 4.12: Effect of morphine (M) ( $1\mu\text{M}$ ) on the log concentration-response curves of (a)  $\text{PGE}_2$  and (b)  $\text{PGE}_1$  analogues in the guinea-pig ileum (mean of 4-6 expts.).

a)



b)



Misoprostol, 11-deoxy PGE<sub>2</sub> 1-alcohol, 11-deoxy PGE<sub>1</sub> and butaprost were subject to a large highly significant rightward shift in the presence of 1  $\mu$ M morphine.

#### *Effect of atropine and SP150*

At 200 nM atropine partially inhibited ( $27\% \pm 1$ ) responses to a single submaximal dose (14 nM) of PGE<sub>2</sub> (Fig. 4.14).

The log concentration-response curve of PGE<sub>2</sub> and 16,16-dimethyl PGE<sub>2</sub> were also significantly shifted by 200 nM atropine, while that of sulprostone was unaffected (Fig 4.13).

The SP blocker, SP150 caused a significant inhibition ( $22\% \pm 5$ ) of the response to 14 nM PGE<sub>2</sub> (Fig. 4.17B). However, in the presence of 1  $\mu$ M morphine SP150 has no effect on the response to this dose of PGE<sub>2</sub> (Fig. 4.14 and 4.17B). In the presence of both SP150 and atropine the response to PGE<sub>2</sub> was inhibited by  $47\% \pm 5$ . (Fig. 4.17C).

#### *Effect of AH 6809*

In the absence of morphine, 1  $\mu$ M AH 6809 caused a 67% inhibition of the response to a single sub-maximal dose of PGE<sub>2</sub> (14 nM) (Fig. 4.11).

The effect of AH 6809 on log concentration-response curves is shown in Figure 4.15. With morphine present, 2  $\mu$ M AH 6809 caused a parallel rightward shift in the log concentration-response curve of PGE<sub>2</sub> (dose ratio, 31), consistent with a pA<sub>2</sub> of  $7.08 \pm 0.14$  ( range = 6.3 - 7.4). The blocker caused a similar degree of shift in the curves of 16,16-dimethyl PGE<sub>2</sub>, ICI80205, 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor and misoprostol, while that of oxoprostol was subject to a small but significant shift.

At the 10-30% response level the curve of sulprostone was unaffected by 2  $\mu$ M AH 6809 but at concentrations giving responses of 40-70% the shift was similar to that produced in the PGE<sub>2</sub> curve. In contrast, at all the concentrations tested the responses to MB 28767 were unaffected by AH 6809.

Figure 4.13: Effect of Atropine (200nM) on the log concentration-response curves of (a) PGE<sub>2</sub> (b) 16,16 dimethyl PGE<sub>2</sub> and (c) sulprostone in the guinea-pig ileum (mean of 4 expts.).

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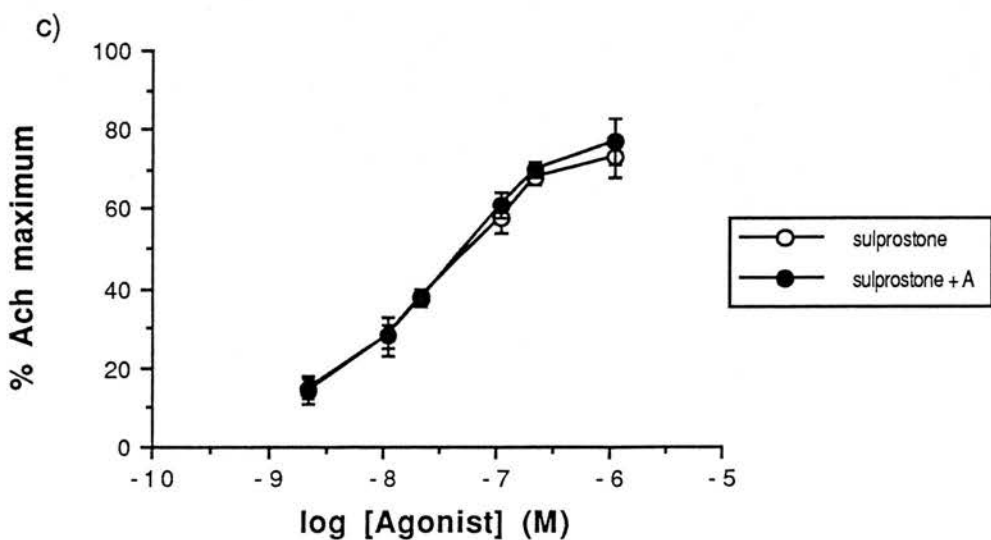
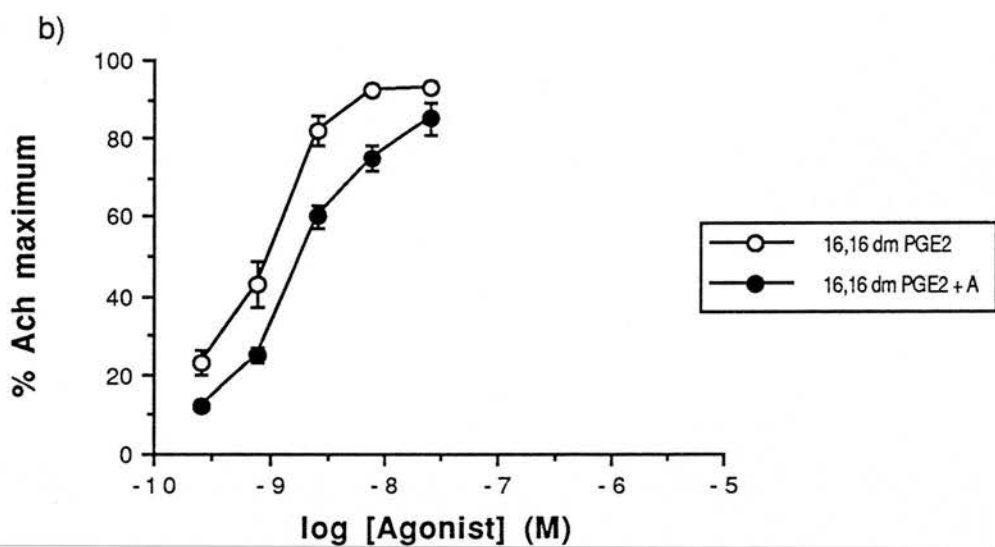
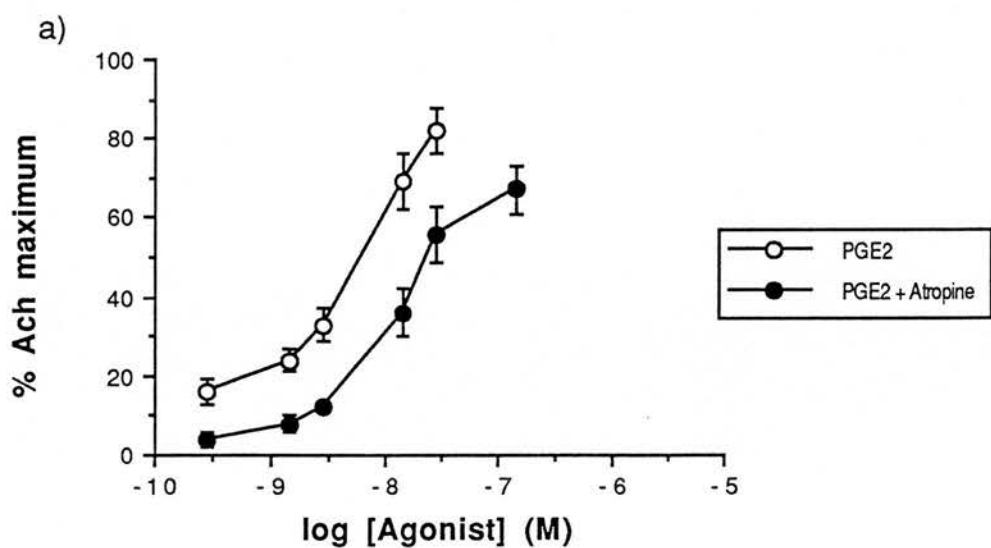


Figure 4.14: Histogram showing the effect of atropine (200nM), SP150 (1μM) and morphine (1μM) on the response to single submaximal doses of PGE<sub>2</sub> (14nM) and cicaprost (13nM) in the guinea-pig ileum (mean of 4-6 expts.).

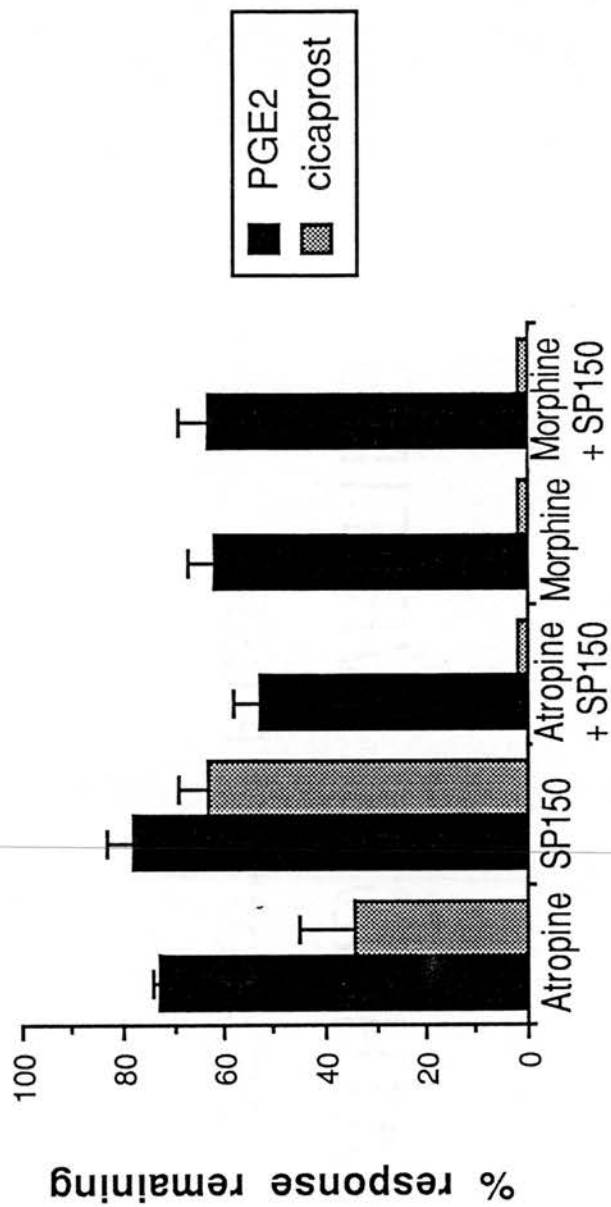
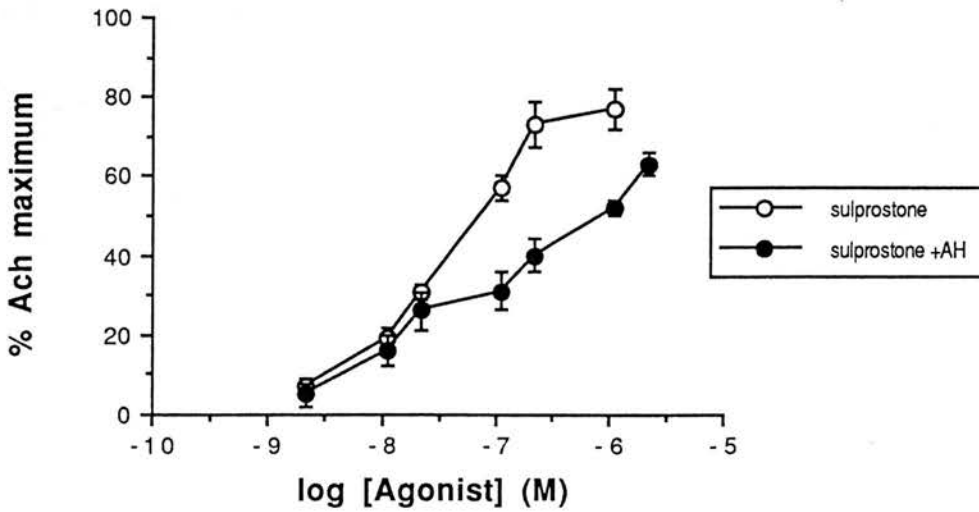
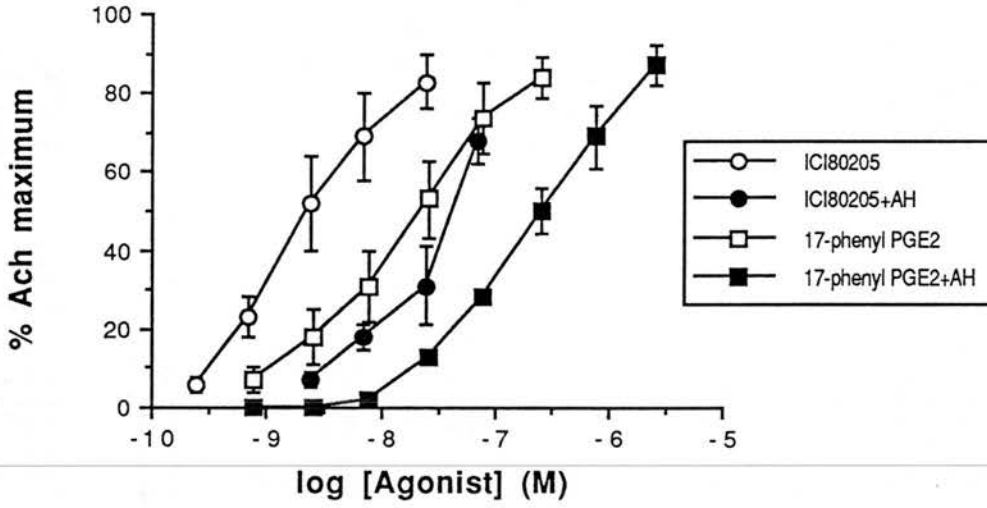
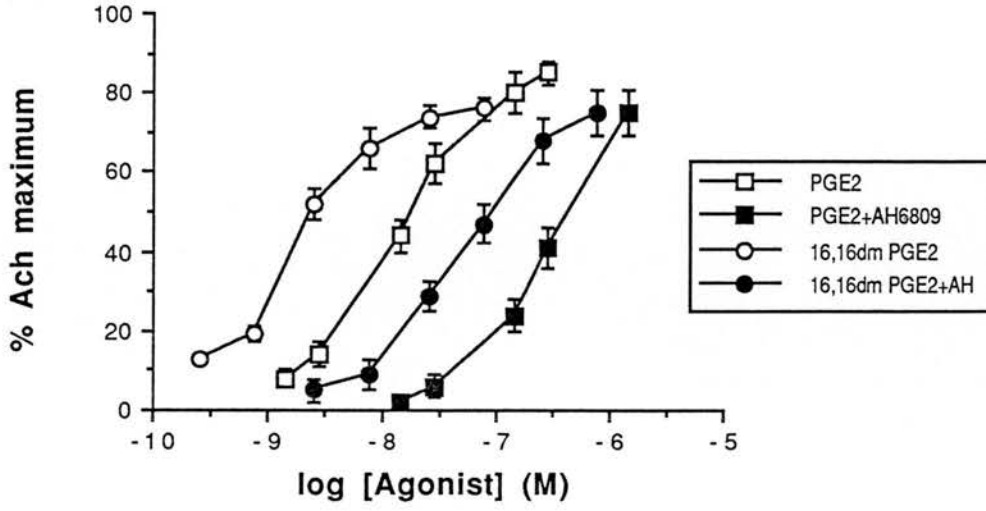


Figure 4.15: Effect of AH 6809 (2 $\mu$ M) on the log concentration-response curves of (a) PGE<sub>2</sub> analogues and (b) PGE<sub>1</sub> analogues in the guinea-pig ileum (mean of 4-6 expts.).

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a)



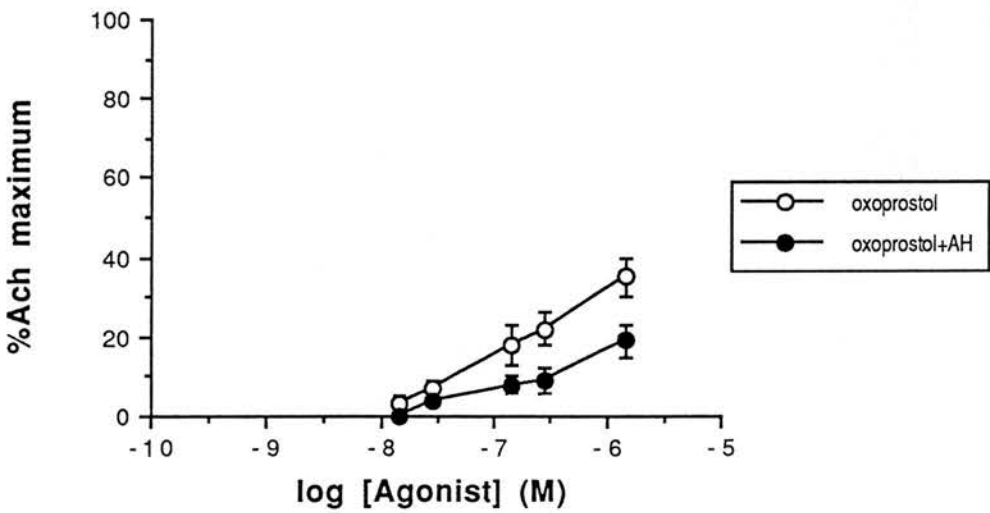
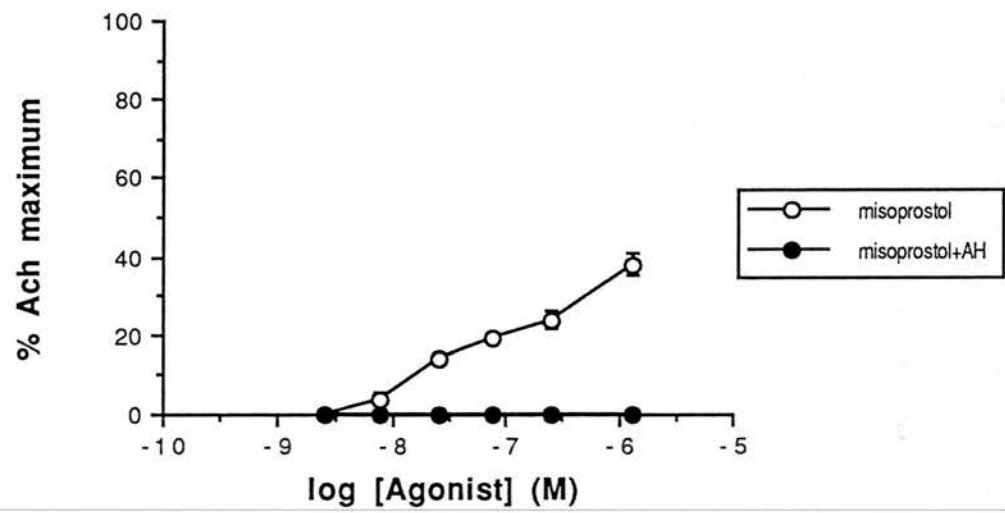
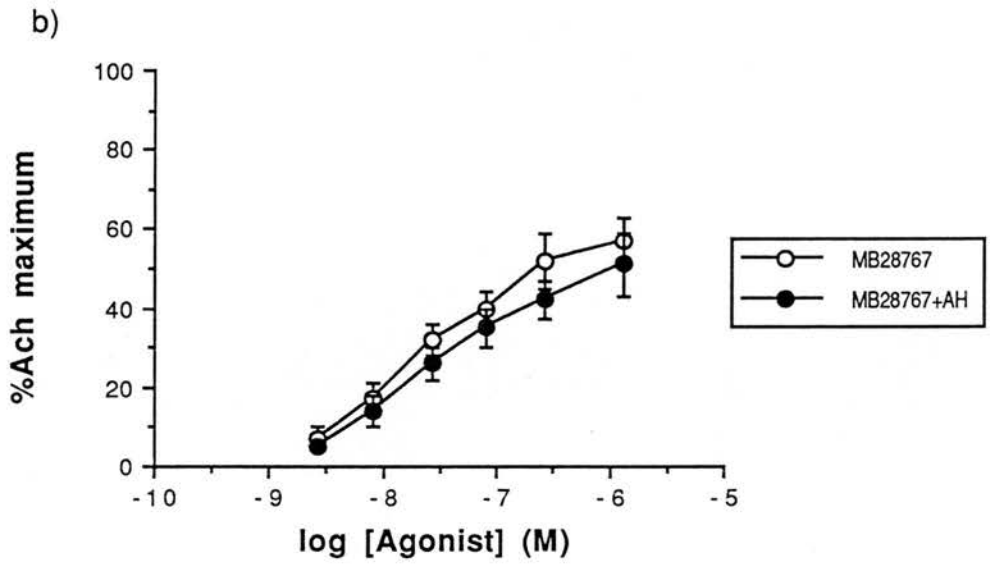
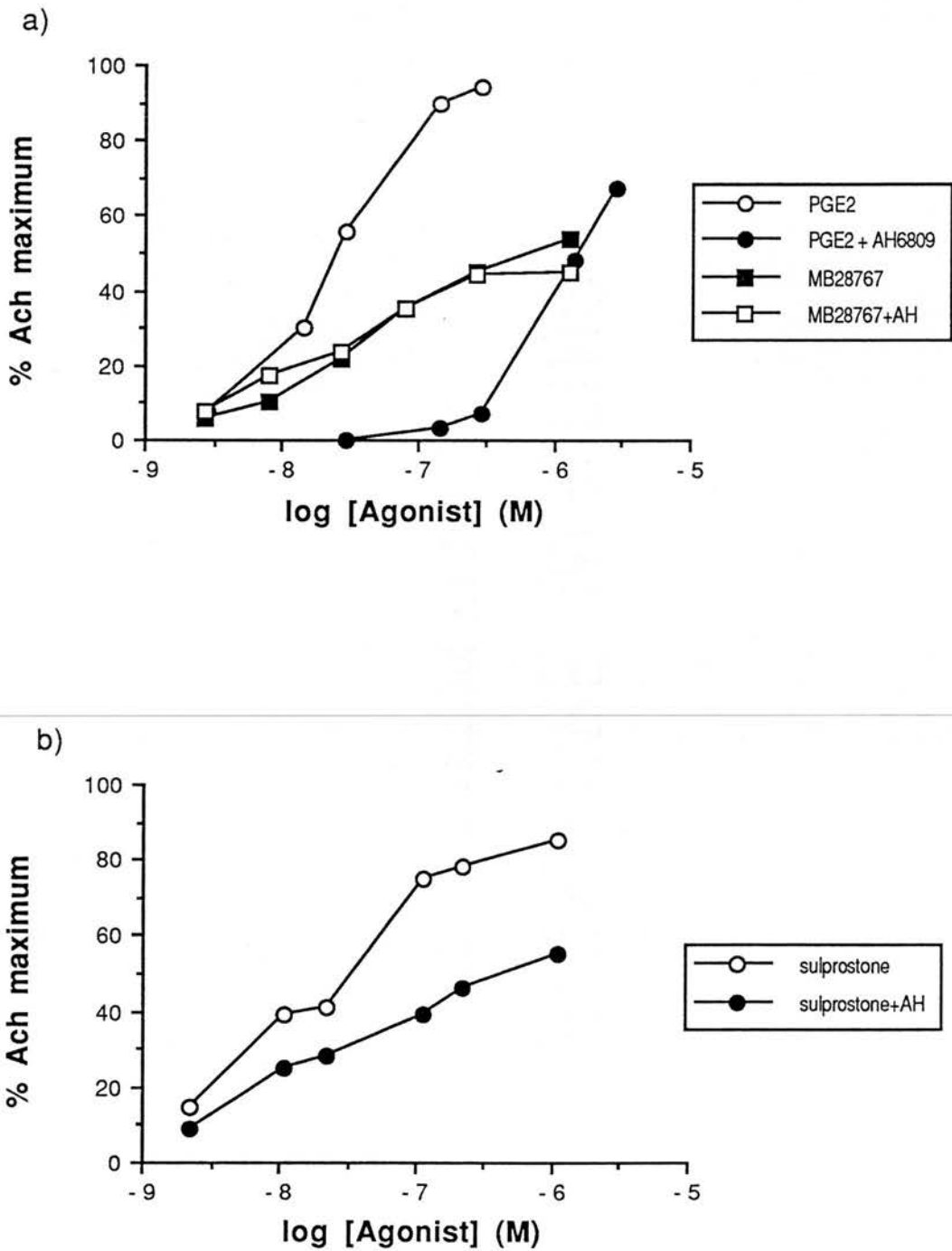


Figure 4.16: Effect of AH 6809 (10 $\mu$ M) on the concentration-response curves of (a) PGE<sub>2</sub> and MB 28767 and (b) sulprostone in the guinea-pig ileum (mean of 2 expts.).



Increasing the concentration of AH 6809 to 10  $\mu\text{M}$  (Fig. 4.16) caused a greater shift in the curves of  $\text{PGE}_2$  (dose ratio, 52), however, the curve of MB 28767 was not shifted.

*Inhibition of Histamine-induced contractions*

There was no evidence of inhibition of histamine responses with  $\text{PGE}_2$  however, in some preparations potentiation of the histamine contractions could be observed at doses which produced no observable increase in the resting tone of the preparation (see Figure 4.17D). Butaprost had no effect on the contractions at any of the concentrations tested in 2/4 preparations (Figure 4.17D) but slightly potentiated the actions of histamine in the other two preparations.

Figure 4.17A: Trace showing the effect of (a) TTX (100nM) and (b) AH 6809 (1 $\mu$ M) on the contractile action of PGE<sub>2</sub> (14nM) in the guinea-pig ileum.

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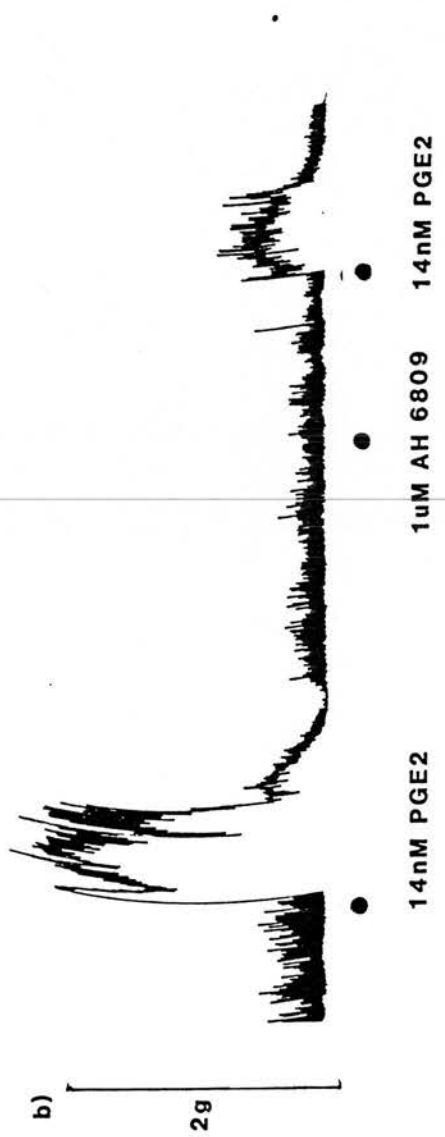
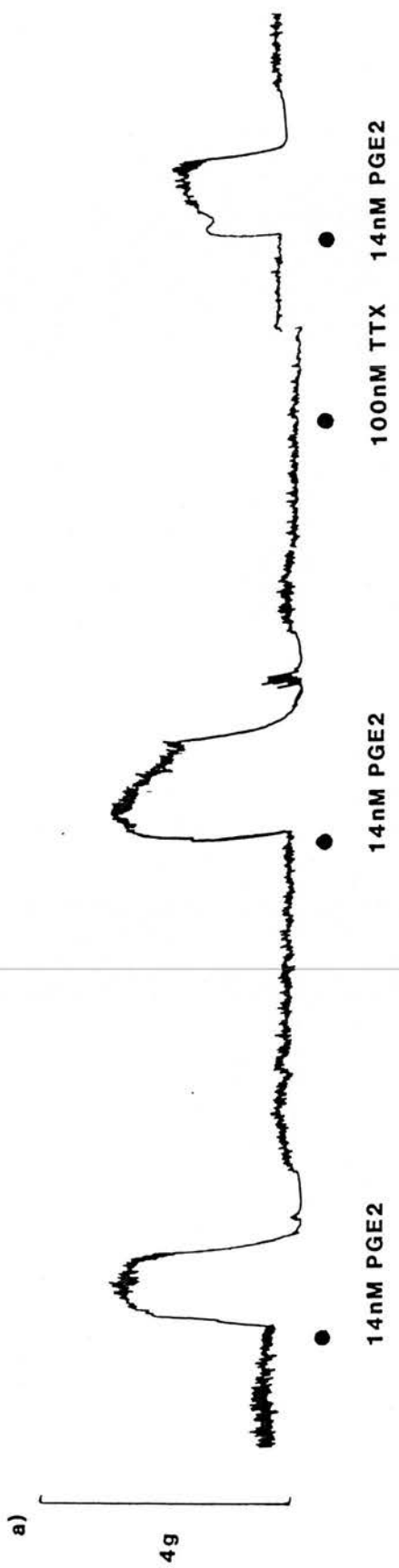
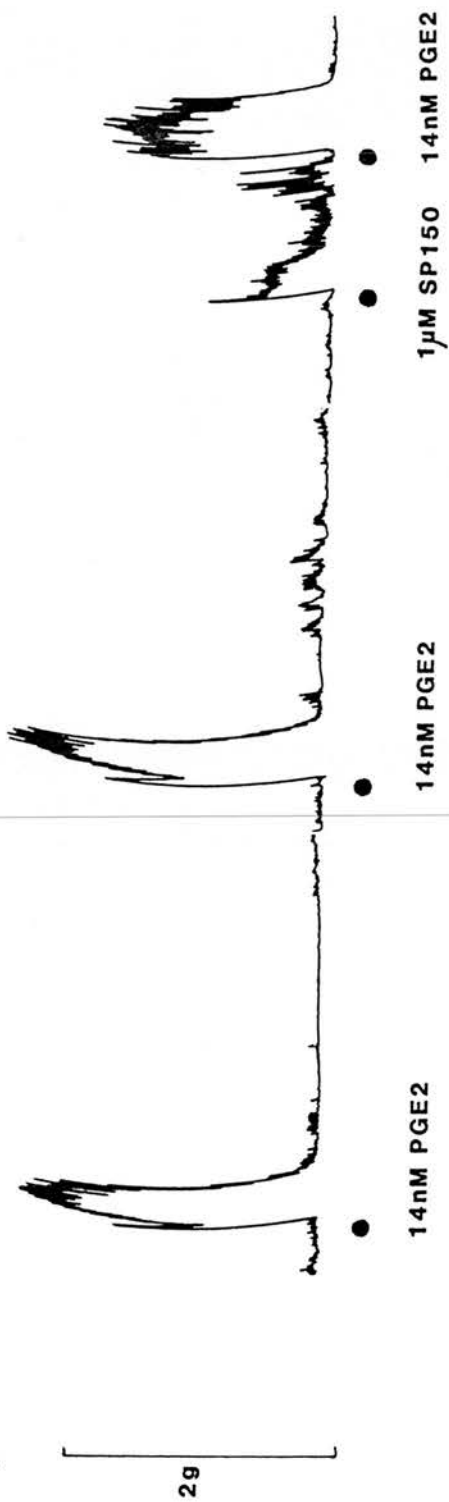


Figure 4.17B: Trace showing the effect of (a) SP 150 (1 $\mu$ M) and (b) SP 150 (1 $\mu$ M) in the presence of morphine (1 $\mu$ M) on the contractile action of PGE<sub>2</sub> in the guinea-pig ileum.

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a)



b)

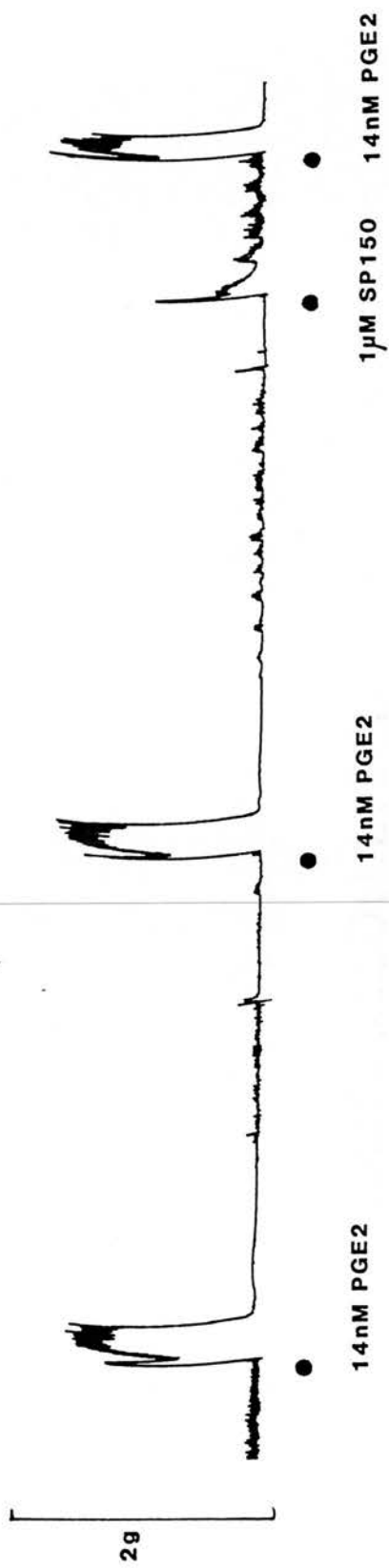


Figure 4.17C: Trace showing the effect of atropine (200nM) and SP 150 (1 $\mu$ M) on the contractile action of PGE<sub>2</sub> in the guinea-pig ileum.

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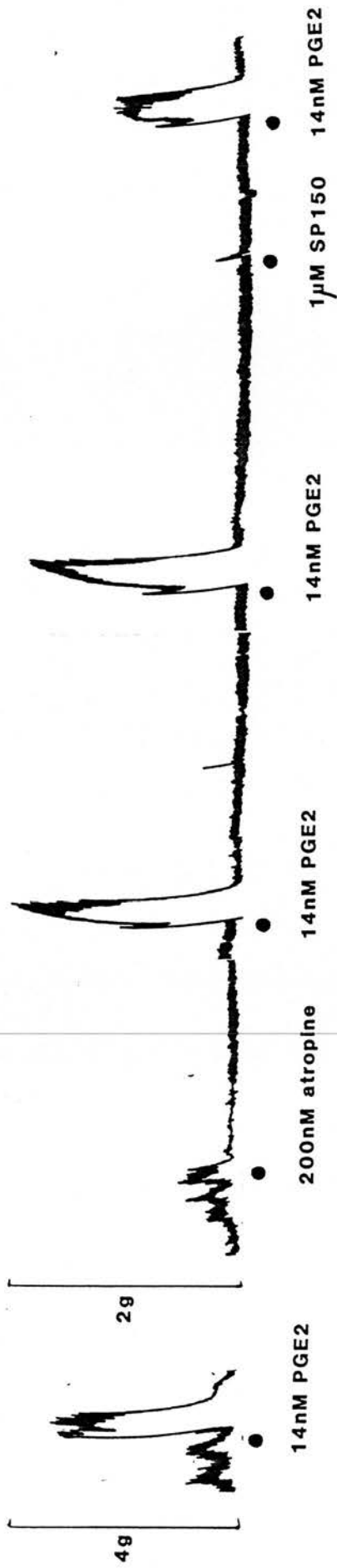
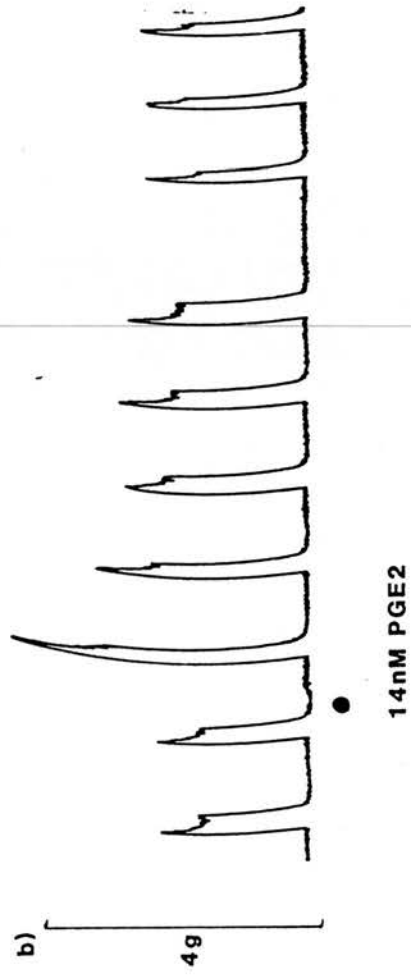
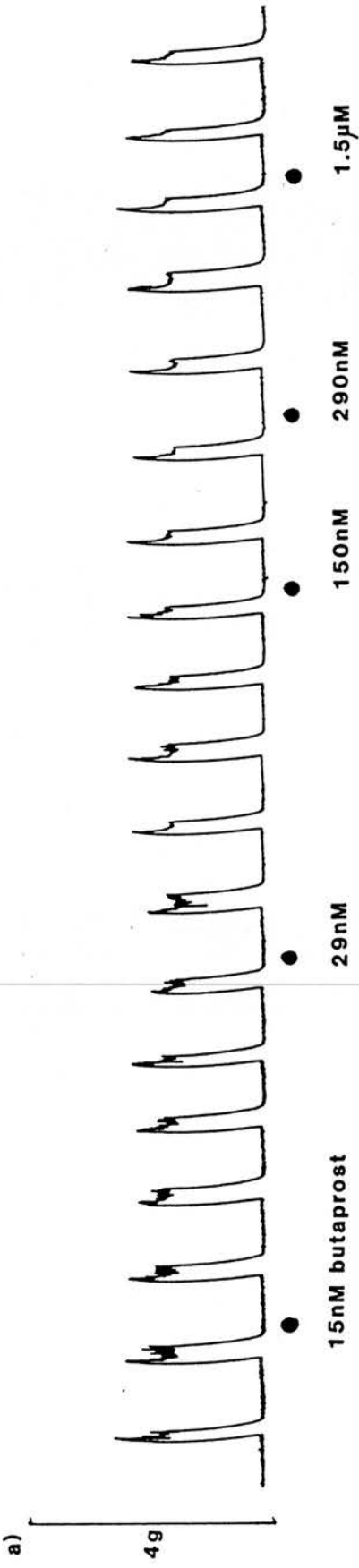


Figure 4.17D: Trace showing the effect of (a) butaprost and (b) PGE2 on contractions of the guinea-pig ileum induced by histamine. The tissues were bathed in Tyrodes solution containing AH 6809 (2 $\mu$ M) and morphine (1 $\mu$ M).

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## DISCUSSION

### *Chick ileum*

The results obtained in the chick ileum (Table 4.3) appear to confirm that the tissue contains an EP<sub>3</sub> receptor: (1) contractions are only subject to a small shift (Dose ratio = 2.7) in the presence of AH 6809 and (2) those compounds which are highly active as inhibitors of the twitch response in the guinea-pig vas deferens (Jones, unpublished: Table 4.4A) are also active as contractile agents in this tissue (16,16-dimethyl PGE<sub>2</sub>, ICI 80205, sulprostone, MB 28767 and misoprostol). However, there are a number of anomalies in the results obtained. Firstly, in the chick ileum a number of these PGE analogues have a considerably lower maximum than PGE<sub>2</sub>: they are sulprostone, MB 28767 and oxoprostol. It is possible that these compounds are partial agonists at the EP<sub>3</sub> receptor, or that they have contractile and relaxant actions which effectively cancel one another out. However, the PGE<sub>2</sub> concentration-response curve in the presence of a supramaximal concentration (220 nM) of sulprostone fits that predicted for an additive interaction of the two compounds. Secondly, the PGE<sub>1</sub> analogue butaprost, which is inactive as an inhibitor of the twitch response in the guinea-pig vas deferens (Table 4.4A), is highly active as a contractile agent in this preparation. However, the maximum response of 47% at ~100 nM is again lower than that obtained for PGE<sub>2</sub>. These results are at variance with those of Gardiner (1986) who found butaprost to be inactive in the chick ileum over a wide concentration range (2 nM - 200 μM). The experiments were carried out in Krebs solution containing a mixture of receptor antagonists (hyoscine 0.1 μg/ml, mepyramine 0.1 μg/ml, phenoxybenzamine 0.1 μg/ml, propranolol 3 μg/ml and methysergide 0.2 μg/ml) and indomethacin (3 μM). However, as shown in Figure 4.18 the presence of this cocktail had no effect on the activity of butaprost.

Butaprost has been shown (Gardiner, 1986) to be active in preparations containing EP<sub>2</sub> receptors (relaxation of the cat/guinea-pig trachea), but to have low EP<sub>1</sub> activity (contraction of the guinea-pig trachea, guinea-pig ileum). We have confirmed these results in the guinea-pig trachea (Jones, unpublished: Table 4.4B) and ileum. Thus, it may be postulated that the chick ileum contains an EP<sub>2</sub> receptor mediating contraction in



TABLE 4.3:  $pD_{25}$  values and equi-effective molar ratios (EMR) of prostanoids in the chick ileum (mean of 4-6 expts.). ( $\pm$  s.e.m)

PROSTANOID	$pD_{25}$	EMR
<i>PGE analogues</i>		
PGE <sub>2</sub>	8.39 $\pm$ 0.06	1
16,16 dimethyl PGE <sub>2</sub>	8.58 $\pm$ 0.06	0.32 $\pm$ 0.03
ICI80205	8.62 $\pm$ 0.45	0.44 $\pm$ 0.15
17-phenyl PGE <sub>2</sub>	7.40 $\pm$ 0.13	13 $\pm$ 2
sulprostone	8.18 $\pm$ 0.41	1.9 $\pm$ 0.45
MB28767	8.52 $\pm$ 0.12	1.3 $\pm$ 0.1
oxoprostol	7.26 $\pm$ 0.16	12 $\pm$ 5
misoprostol	7.69 $\pm$ 0.21	4.9 $\pm$ 2.1
11-deoxy PGE <sub>2</sub> 1-alcohol	6.68 $\pm$ 0.06	65 $\pm$ 20
butaprost	7.97 $\pm$ 0.19	2.5 $\pm$ 0.7
<i>PGI analogues</i>		
cicaprost	<5.89	-

TABLE 4.4A: pD<sub>50</sub> values and equi-effective molar ratios (EMR) of PGE analogues for the inhibition of twitch of the guinea-pig vas deferens and contraction of the guinea-pig trachea (mean of 4 expts. except oxoprostol, 11-deoxy PGE<sub>2</sub> 1-alcohol and butaprost, 3 expts).  
Jones, unpublished.

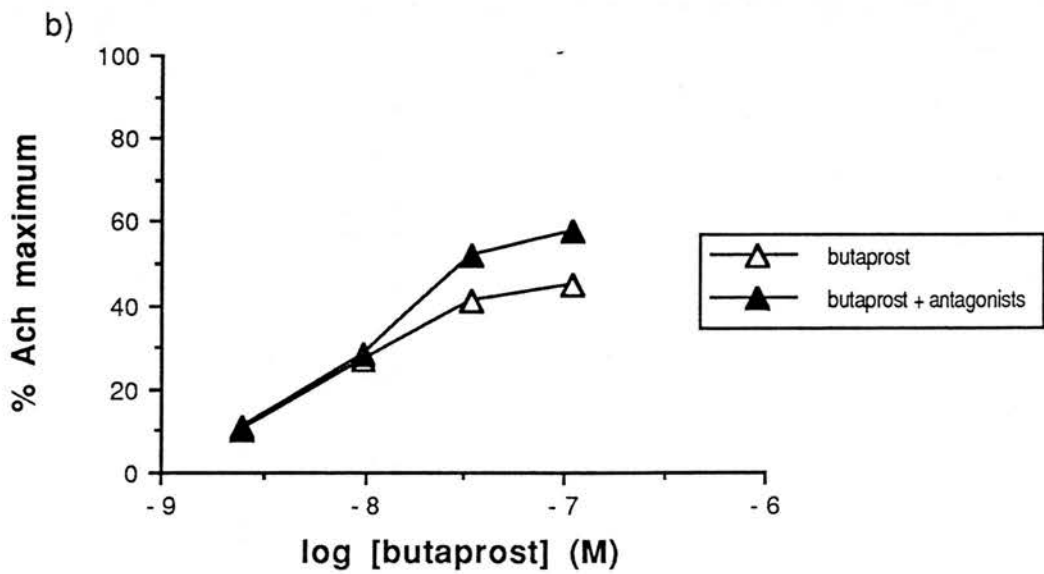
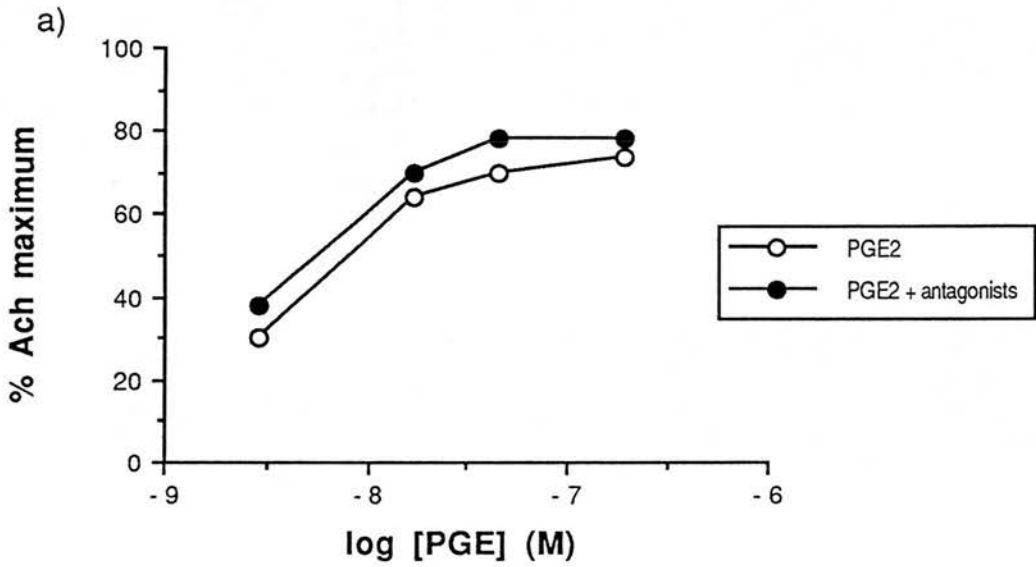
PROSTANOID	Guinea-pig vas deferens		Guinea-pig trachea
	pD <sub>50</sub>	EMR	pD <sub>50</sub>
PGE <sub>2</sub>	8.76 ± 0.03	(1)	—
16,16 dimethyl PGE <sub>2</sub>	9.62 ± 0.08	(0.13)	9.72 ± 0.06
ICI80205	9.02 ± 0.10	(0.76)	—
17-phenyl PGE <sub>2</sub>	7.96 ± 0.06	(6.3)	8.68 ± 0.10
sulprostone	9.69 ± 0.03	(0.15)	8.14 ± 0.07
MB28767	8.97 ± 0.10	(0.72)	—
oxoprostol	8.38	(3.1)	—
misoprostol	9.12 ± 0.07	(0.51)	—
11-deoxy PGE <sub>2</sub> 1-alcohol	7.81	(10.5)	—
butaprost	< 6.0	(>900)	—

Table 4.4B: Equi-effective molar ratios of PGE analogues for the relaxation of the guinea-pig trachea and cat trachea (3-4 expts).

Prostanoid	Equi-effective Molar Ratio	
	Guinea-pig trachea	Cat trachea
PGE <sub>2</sub>	1.0	1.0
11-deoxy PGE <sub>2</sub> 1-alcohol	9.5	-
11-deoxy PGE <sub>1</sub>	11 *	13 *
Misoprostol	1.0	3.7 **
Butaprost	3.8	27 ***

\* Dong et al, 1986; \*\* Coleman et al, 1988; \*\*\* Gardiner, 1986.

Figure 4.18: Effect of a cocktail of antagonists (see Gardiner, 1986) on the log concentration-response curves of (a) PGE<sub>2</sub> and (b) butaprost in the chick ileum (mean of 2 expts.).



addition to the EP<sub>3</sub> receptor. The existence of a second receptor in the tissue would also explain the low maximum of the EP<sub>3</sub>-selective compounds: sulprostone, MB 28767 and oxoprostol. However, as will be discussed in the following section, the results obtained show butaprost to be considerably less active than PGE<sub>2</sub> (EMR ~700) at the EP<sub>2</sub>-receptors in the rabbit jugular vein. In addition, the profile of action of 11-deoxy PGE<sub>2</sub> 1-alcohol is the reverse of that of butaprost: it is only 4 fold less active than PGE<sub>2</sub> as a vasorelaxant in the rabbit jugular vein, but 65 times less active in contracting the chick ileum. On the basis of these results it is could be postulated that the EP<sub>2</sub> receptors present in the two tissues are different.

A number of problems must be addressed in relation to this hypothesis (1) why do the EP<sub>1</sub>/EP<sub>3</sub> selective agonists, ICI 80205 and 17-phenyl PGE<sub>2</sub> reach a maximum response ? (2) why is there a significant shift in the log concentration-response curve of PGE<sub>2</sub> in the presence of the EP<sub>1</sub> receptor antagonist, AH 6809 ? One could postulate that the EP<sub>2</sub> receptor in the chick ileum is considerably more sensitive to ICI 80205 and 17-phenyl PGE<sub>2</sub> than that found in the RJV, however this seems unlikely as there is no evidence of relaxation of the guinea-pig trachea (Table 4.4A) or the cat trachea (Dong et al, 1986) with these agonists. It could however, be postulated that the chick ileum contains, in addition to the EP<sub>3</sub> receptor, a new EP receptor subtype. These hypotheses will remain purely conjecture until selective antagonists for these subtypes become available.

#### *Rabbit jugular vein*

The data obtained (Table 4.5) would suggest that relaxation of the rabbit jugular vein (RJV) by PGE analogues is mediated by an EP<sub>2</sub> receptor. Firstly, the responses are unaffected by the EP<sub>1</sub>-receptor blocker, AH6809 at a concentration which produces a large shift in the concentration-response curve to PGE<sub>2</sub> in preparations containing EP<sub>1</sub> receptors (see *guinea-pig ileum*). In addition, the EP<sub>1</sub>/EP<sub>3</sub> selective agonist, sulprostone is virtually inactive as a vasorelaxant in this preparation; earlier work has shown the compound to have little EP<sub>2</sub> activity (Coleman et al, 1987a). Finally, a number of compounds which displayed solely relaxant actions in the guinea-pig trachea (11-deoxy

TABLE 4.5: pD<sub>50</sub> and equi-effective molar ratio (EMR) of prostanoids in the rabbit jugular vein (mean of 4-6 expts.).

PROSTANOID	pD <sub>50</sub>	EMR
<i>PGE analogues</i>		
PGE <sub>2</sub>	9.34 ± 0.11	1
16,16 dimethyl PGE <sub>2</sub>	9.21 ± 0.19	2.1 ± 0.5
ICI80205	7.25 ± 0.17	83 ± 15
17-phenyl PGE <sub>2</sub>	7.21 ± 0.11	200 ± 53
sulprostone	—	>3000
MB28767	—	414 ± 100 *
oxoprostol	—	>2000
misoprostol	8.21 ± 0.21	8.3 ± 1.7
11-deoxy PGE <sub>2</sub> 1-alcohol	8.27 ± 0.16	4.6 ± 0.59
(nat) 11-deoxy PGE <sub>1</sub>	9.35 ± 0.12	1.4 ± 0.59
(±) 11-deoxy PGE <sub>1</sub>	9.22 ± 0.14	2.05 ± 0.64
butaprost	6.70 ± 0.10	685 ± 194
<i>PGI analogues</i>		
cicaprost	8.02 ± 0.19	—
iloprost	7.90 ± 0.08	—
carbacyclin	7.26 ± 0.19	—

\* calculated using the IC<sub>25</sub> values.

PGE<sub>2</sub> 1-alcohol, 11-deoxy PGE<sub>1</sub> and misoprostol) are highly active in the RJV.

The preparation is highly sensitive to PGE<sub>2</sub> (IC<sub>50</sub>, 0.61 nM), considerably more so than the cat trachea (IC<sub>30</sub>, 40 nM: Dong et al, 1986; IC<sub>50</sub>, 20 nM: Coleman et al, 1988a) or the guinea-pig trachea (IC<sub>30</sub>, 10 nM: Dong et al, 1986). Thus, this preparation may prove very useful in study of the EP<sub>2</sub> activity of PGE analogues. The usefulness of the RJV is demonstrated in assessment of the potency of 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor (EMR, 200). An accurate estimate of the EP<sub>2</sub> activity of this compound would not have been possible from the cat trachea (due to the insensitivity of the preparation) or the guinea-pig trachea (due to the high potency of the compound on the EP<sub>1</sub> receptors mediating contraction).

The results obtained confirm those of Dong et al (1986) showing that 16,16-dimethyl PGE<sub>2</sub> has considerable activity at EP<sub>2</sub> receptors mediating relaxation of the cat trachea. ICI 80205 has less EP<sub>2</sub> activity in the rabbit jugular vein, again consistent with the results obtained by Dong et al (1986) on the relaxation of the guinea-pig/cat trachea.

The data is at variance with that of Eglen and Whiting (1988) who found that at 300 nM misoprostol elicited contractions of the guinea-pig trachea, with no evidence of relaxation. However, Coleman et al (1988a) found misoprostol to be highly active at EP<sub>2</sub> receptors mediating relaxation of the cat trachea. In addition, it has recently been shown (Jones et al, 1989) that at 200 nM the compound rapidly abolishes submaximal contractions of the guinea-pig trachea induced by persistent TP receptor agonists such as EP 171. A possible explanation for this discrepancy may be that Eglen and Whiting used zig-zag preparations while we have used rings, although this is unlikely to account for such a large difference.

11-Deoxy PGE<sub>1</sub> and 11-deoxy PGE<sub>2</sub> 1-alcohol appear to be active EP<sub>2</sub> agonists. They also appear to be more selective for this subtype than misoprostol having less EP<sub>1</sub> (guinea-pig trachea/ileum) and EP<sub>3</sub> activity (guinea-pig vas deferens), and may prove useful in the investigation of EP<sub>2</sub> receptors.

As mentioned earlier, work by Gardiner (1986) suggested that butaprost is a highly selective EP<sub>2</sub> agonist. Studies by Jones (unpublished) have also shown that the compound is active as a relaxant in the guinea-pig trachea with no evidence of contractile activity. However, in the RJV butaprost appears to be considerably less active at EP<sub>2</sub> receptors than predicted from the above results. As will be discussed later, this preparation is known to contain TP-receptors mediating contraction, however the experiments were carried out in the presence of 10 µM GR 32191, a potent TP-receptor blocker. In addition, Gardiner (1986) found the compound to be inactive in the guinea-pig lung and the guinea-pig trachea - both known to contain TP receptors.

It may be that the potency of PGE<sub>2</sub> as a relaxant in the guinea-pig trachea is being vastly underestimated, thus making EP<sub>2</sub>-selective agonists appear considerably more active relative to PGE<sub>2</sub> in this preparation. However, this would not explain the finding that in the guinea-pig trachea 11-deoxy PGE<sub>2</sub> 1-alcohol is less active relative to PGE<sub>2</sub> than butaprost, while in the RJV it is considerably more active. Another possible explanation may be the presence of esterase activity in *one* of these tissues which produces the free acid form of butaprost from its methyl ester, the former having greater activity at EP<sub>2</sub> receptors. However, preliminary experiments (Jones, unpublished) show that the anticholinesterase, diisopropyl-fluorophosphonate (DFP) had no effect on the concentration-response curve of butaprost in the guinea-pig trachea. In addition, one would expect such enzyme activity to similarly affect misoprostol (see figure 4.1), however, this compound has the same order of activity in both preparations.

It may be that the RJV contains a subtype of the EP<sub>2</sub> receptor distinct from that found in the guinea-pig trachea, cat trachea and chick ileum. However, this hypothesis cannot be confirmed without highly selective EP<sub>2</sub> agonists and antagonists - which are not, as yet, available.

We have confirmed data obtained by Giles et al (1989) showing that the tissue contains a TP receptor, which is highly sensitive to U 46619 (EC<sub>50</sub>, 4.6 nM). The contractile action of MB 28767 would appear to be mediated by an action on the thromboxane receptor as its actions are inhibited by

the TP receptor blocker GR 32191. The relative potency of the compound *vs* U 46619 ( $6.5 \pm 0.7$ ) is slightly higher than that obtained at thromboxane receptors of a range of tissues (Banerjee et al, 1986; Halushka et al, 1987).

It is notable that the  $pA_2$  (7.2) of GR 32191 against U 46619 is significantly lower than that reported for other tissues (Lumley et al, 1987) - this finding is discussed in detail in Chapter 5. However, the shift of  $\sim 200$  in the concentration-response curve produced by  $10 \mu\text{M}$  GR 32191 is sufficient to give an indication of the  $EP_2$  activity of MB 28767 and to eliminate the TP agonist action of ICI 80205 at the doses producing relaxation. In the presence of the blocker the concentration-response curve for relaxation of histamine-induced contractions of MB 28767 is bell-shaped, indicating that the  $EP_2$  relaxant activity is being overcome by the TP contractile action at high doses.

In conclusion, the rabbit jugular vein appears to contain a highly sensitive  $EP_2$  receptor system mediating relaxation. In the presence of thromboxane receptor antagonists the preparation is most useful in the study of the  $EP_2$  selectivity of a range of PGE analogues. However, the nature of the  $EP_2$  receptor in relation to those present in other preparations (guinea-pig trachea and cat trachea) requires further study.

#### *Guinea-pig ileum*

As previously reported (Sanner, 1971; Kadlec et al, 1971) we have found that the contractile response of the guinea-pig ileum to  $PGE_2$  has a component due to the action of activation of enteric neurones (Table 4.6), which is inhibited to a similar extent by both TTX and morphine. Studies with atropine and the substance P antagonist, SP 150 indicate that both acetylcholine and substance P are released. As was found for the IP system (see Chapter 3) the effects of the blockers is additive, and neither has any further activity in the presence of  $1 \mu\text{M}$  morphine.

The concentration-response curves for misoprostol, 11-deoxy  $PGE_2$  1-alcohol, 11-deoxy  $PGE_1$  and butaprost are subject to a large shift in the presence of  $1 \mu\text{M}$  morphine (Table 4.7). As discussed above these



Table 4.6: The pD<sub>25</sub> values for PGE analogues in the absence and presence of Morphine (1μM) and AH6809 (2μM).

PROSTANOID	MAX. (% ACH)	pD <sub>25</sub>	pD <sub>25</sub> MORPHINE (1μM)	pD <sub>25</sub> AH6809 (2μM)
PGE <sub>2</sub>	88 ± 3	8.96 ± 0.17	8.42 ± 0.17	6.88 ± 0.13
16,16 dimethyl PGE <sub>2</sub>	90 ± 2	9.38 ± 0.11	9.19 ± 0.11	7.66 ± 0.10
ICI80205	96 ± 1	9.54 ± 0.27	9.28 ± 0.24	7.95 ± 0.11
17-phenyl PGE <sub>2</sub>	96 ± 1	8.10 ± 0.10	8.11 ± 0.10	7.31 ± 0.12
sulprostone	75 ± 4	7.92 ± 0.07	7.86 ± 0.06	7.39 ± 0.23
MB28767	67 ± 4	8.50 ± 0.11	7.85 ± 0.19	7.58 ± 0.20
oxoprostol	45 ± 3	7.03 ± 0.16	6.34 ± 0.28	5.69 ± 0.14
misoprostol	70 ± 7	8.10 ± 0.09	6.55 ± 0.09	>5.89
11-deoxy PGE <sub>2</sub>				
1-alcohol	35 ± 5	7.11 ± 0.14	<5.52	-
11-deoxy PGE <sub>1</sub>	45 ± 6	6.87 ± 0.22	<5.70	-
butaprost	36 ± 5	6.67 ± 0.28	<5.92	-

Table 4.7 : The effect of Morphine (1 $\mu$ M) and Atropine (200nM) on the dose-response curves of PGE<sub>2</sub> analogues in the guinea-pig ileum (mean of 4-6 expts.).

PROSTANOID	DOSE RATIO:	
	Morphine (1 $\mu$ M)	Atropine (200nM)
PGE <sub>2</sub>	3.58 $\pm$ 0.38 *	4.66 $\pm$ 2 *
16,16 dimethyl PGE <sub>2</sub>	1.62 $\pm$ 0.24	2.40 $\pm$ 0.24 *
ICI80205	1.96 $\pm$ 0.19	—
17 phenyl PGE <sub>2</sub>	0.94 $\pm$ 0.04	—
sulprostone	1.15 $\pm$ 0.03	1.40 $\pm$ 0.27
MB28767	5.2 $\pm$ 1.4 *	—
oxoprostol	4.0 $\pm$ 1.2	—
misoprostol	42 ***	—
11-deoxy PGE <sub>2</sub> 1-alcohol	>50	—
11-deoxy PGE <sub>1</sub>	>20	—
butaprost	>10	—

\*\*\* P < 0.001

\*\* P < 0.01

\* P < 0.05

compounds have been shown to be active at the EP<sub>2</sub> receptors in a range of tissues: rabbit jugular vein, guinea-pig trachea (Jones, unpublished Table 4.4), cat trachea (Dong et al, 1986; Coleman et al, 1988; Gardiner, 1986). In contrast, those compounds whose activity was not significantly affected by morphine (ICI 80205, sulprostone, 17-phenyl PGE<sub>2</sub>- $\omega$ -trior and oxoprostol) have low activity at the EP<sub>2</sub> receptors of the RJV, and are contractile agents in the guinea-pig trachea. On the basis of these results one could suggest the receptor subtype mediating the indirect action of PGE analogues in the guinea-pig ileum is EP<sub>2</sub>.

Poll et al (1988a) showed that in the presence of 10  $\mu$ M AH 6809 (see introduction), PGE<sub>2</sub> caused a concentration-related potentiation of electrically-induced contractions, and reversed inhibition produced by indomethacin (1-30  $\mu$ M). The authors suggest that excitatory neuronal responses to PGE<sub>2</sub> in the guinea-pig ileum are mediated by a receptor other than EP<sub>1</sub>. However, although their data suggests the existence of a receptor additional to EP<sub>1</sub>, a neuronal site of action cannot be definitely concluded from these experiments (see Hedqvist, 1980). Recently, however, the group (Poll et al, 1988b) have demonstrated that this potentiating action of PGE<sub>2</sub> is inhibited by cyclopentyladenosine, known to act presynaptically to inhibit transmitter release (Gintzler<sup>8</sup> 1975; Fredholm & Dunwiddie, 1988.).

Classification of the neuronal EP receptor, at this stage, must be purely tentative for a number of reasons. Firstly, studies lack a compound which is a potent and selective EP<sub>2</sub> receptor agonist / antagonist. In addition, the situation is made more complex by the conflicting results obtained in studies of the EP<sub>2</sub> receptors of the rabbit jugular vein, cat trachea and guinea-pig trachea which raise the possibility of the existence of subtypes of the receptor.

Some of the results presented on the action of butaprost in this preparation are at variance with those of Gardiner (1986). Firstly, Gardiner (1986) found that the concentration-response curve for this compound was bell-shaped - the maximum response being <20% of the tissue maximum at 1 $\mu$ M. In contrast, the results presented in this thesis show that the concentration-response curve of butaprost has no

evidence of bell-shaped curves and 36% of the tissue maximum is reached at the highest concentration tested, 3  $\mu$ M. Secondly, Gardiner (1986) reported an inhibitory action of the compound on histamine-induced contractions at concentrations of 3 and 10  $\mu$ M. However, as is shown in Figure 4.17 no such inhibition was evident in the results obtained.

The experiments of Gardiner (1986) involve concentrations of butaprost of up to 200  $\mu$ M, which would require aqueous stock solutions of ~2mg/ml. However, in our hands when a 2mg/ml solution of the compound, in 100% ethanol, was diluted to 100  $\mu$ g/ml in saline opalescence appeared. The solution did not clear on warming. It should be noted that butaprost is a methyl ester thus the addition of sodium bicarbonate does not increase its aqueous solubility as with free acid prostanoids. Thus the aqueous top stock used in the experiments presented here was 50  $\mu$ g/ml - a dilution into saline of a 1mg/ml ethanol solution. It may be that Gardiner (1986) has used a high proportion of ethanol/DMSO to ensure solubility of high concentrations of butaprost and these agents are responsible for the inhibitory effects observed.

Our studies have shown that the EP<sub>1</sub> blocker, AH 6809, causes a parallel rightward shift in the concentration-response curve of PGE<sub>2</sub>, consistent with a pA<sub>2</sub> of 7.08  $\pm$  0.14 (6.3-7.4). AH 6809 also produced a large shift in the concentration-response curves of 16,16-dimethyl PGE<sub>2</sub>, ICI 80205 and 17-phenyl PGE<sub>2</sub>- $\omega$ -trior (Table 4.8), this is not unexpected as these compounds are all highly active at EP<sub>1</sub> receptor sites in the guinea-pig trachea (Table 4.4). However, certain results indicate the presence of another contractile receptor in addition to EP<sub>1</sub>: both sulprostone (at concentrations giving 10-30% responses) and MB 28767 are resistant to block by 2  $\mu$ M AH 6809. Similar results were obtained using 10  $\mu$ M AH 6809.

It is unlikely that this effect is due to an action of the compounds on TP receptors as the TP-receptor agonist, U 46619 is inactive in this preparation. In addition, the contractile action of PGF<sub>2 $\alpha$</sub>  is blocked by AH 6809 indicating that it is acting at EP<sub>1</sub> receptors. Both sulprostone and MB 28767 are highly active in the chick ileum and the guinea-pig vas deferens, indicating that the AH 6809-resistant receptor of the

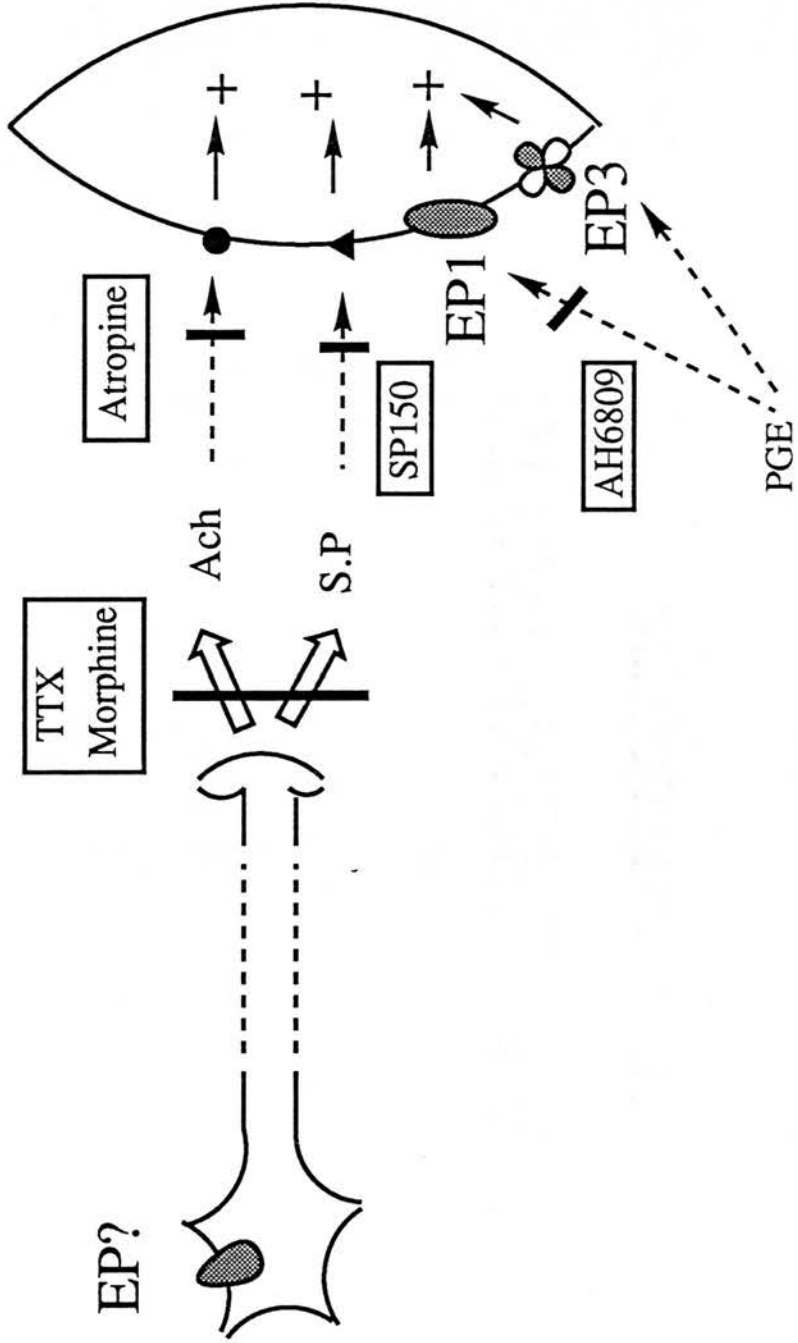
Table 4.8: Effect of AH 6809, 2  $\mu$ M ( mean of 4-6 expts) and 10 $\mu$ M (2 expts) on the concentration-response curves on PGE and PGI analogues in the guinea-pig ileum.

PROSTANOID	DOSE RATIO IN THE PRESENCE OF AH6809	
	2 $\mu$ M	10 $\mu$ M
<i>PGE analogues</i>		
PGE <sub>2</sub>	31.2 $\pm$ 7 ***	52.5
16,16 dimethyl PGE <sub>2</sub>	24.2 $\pm$ 5 ***	—
ICI80205	12.6 $\pm$ 1 ***	—
17-phenyl PGE <sub>2</sub>	11.5 $\pm$ 2 ***	—
sulprostone	3.5 $\pm$ 2	4.6
MB28767	1.8 $\pm$ 0.5	1.6
oxoprostol	3.9 $\pm$ 1 *	—
misoprostol	>10 *	—
<i>PGI analogues</i>		
iloprost	245 $\pm$ 57 ***	—
carbacyclin	24.9 $\pm$ 8 ***	—

\*P < 0.05

\*\*\*P < 0.001

Figure 4.19: Schematic representation of the EP receptor sites in the guinea-pig ileum



guinea-pig ileum may be EP<sub>3</sub>. The shift in the sulprostone curve at higher concentrations reflects its activity at EP<sub>1</sub> receptors, also seen in the guinea-pig trachea (Table 4.4a).

In conclusion, the data presented demonstrates that the guinea-pig longitudinal muscle contains EP receptors additional to the EP<sub>1</sub> subtype (see Fig 4.19). Thus, data claiming EP<sub>1</sub> selectivity of a compound on the basis of high activity in this preparation should be interpreted with caution. In order to state unequivocally the receptor subtype involved one should investigate the effect of both morphine and AH 6809 on the contractile action. Making use of these blockers, however, the guinea-pig ileum remains a useful tissue in assessing the EP selectivity of PGE analogues. It is notable that other tissues used to measure EP<sub>1</sub> activity (see introduction) have added complications: the guinea-pig trachea has highly sensitive EP<sub>2</sub> receptors mediating relaxation and recent work by Jones (unpublished) suggests that the guinea-pig fundus may have an additional population of EP receptors which are resistant to block by AH 6809 (possibly EP<sub>3</sub>).

#### *Structure-Activity Relationships*

Previous work has shown that certain structural features are essential for EP receptor agonists activity. These are as follows:

- (a) An  $\alpha$  chain of 7 carbon atoms (Grudzinskas et al, 1980).
- (b) A cyclopentane ring (Grudzinskas et al, 1980).
- (c) A substituent at C9, usually carbonyl (Lin et al, 1976; Kimball et al, 1979; Carpio et al, 1987).
- (d) A hydroxyl group at C15 or C16 (Grudzinskas et al, 1980; Floyd et al, 1980).

All the analogues fulfil these criteria, however there is considerable variation in the activity of these compounds at the various EP receptor subtypes studied.

The results confirm earlier findings (Grudzinskas et al, 1980; Hess et al, 1980; Schaaf et al, 1981) that the substitution of a methanesulphonamido group at C1 (sulprostone) greatly reduces EP<sub>2</sub> activity, leaving EP<sub>1</sub> and EP<sub>3</sub> unaffected. Loss of the 11-hydroxy group (11-deoxy PGE<sub>2</sub> 1- alcohol, 11-deoxy PGE<sub>1</sub>, MB 28767 and oxoprostol)

reduces the EP<sub>1</sub> activity of these analogues but is not essential for EP<sub>2</sub>/EP<sub>3</sub> activity (see Grudzinskas et al 1980; Carpio et al, 1987; Floyd et al, 1987). The 16-methyl group (16,16-dimethyl PGE<sub>2</sub>) appears to enhance both EP<sub>1</sub> and EP<sub>3</sub> activity, with only small loss of EP<sub>2</sub> activity. The results are consistent with those of Banerjee et al (1981a) showing that the presence of the 16-phenoxy group (ICI 80205, sulprostone, MB 28767 and oxoprostol) leads to potent EP<sub>3</sub> activity but reduces EP<sub>2</sub> actions. The addition of a halogen (ICI 80205) appears to enhance the potency at EP<sub>1</sub> and EP<sub>3</sub> receptors. Finally, substitution of the terminal n-propyl unit by phenyl leads to EP<sub>1</sub> selectivity, reduced activity at EP<sub>3</sub> receptors and little EP<sub>2</sub> receptor activity.

In summary, the results indicate that a number of the compounds studied may prove useful in the classification of EP receptors (see Fig 4.20):

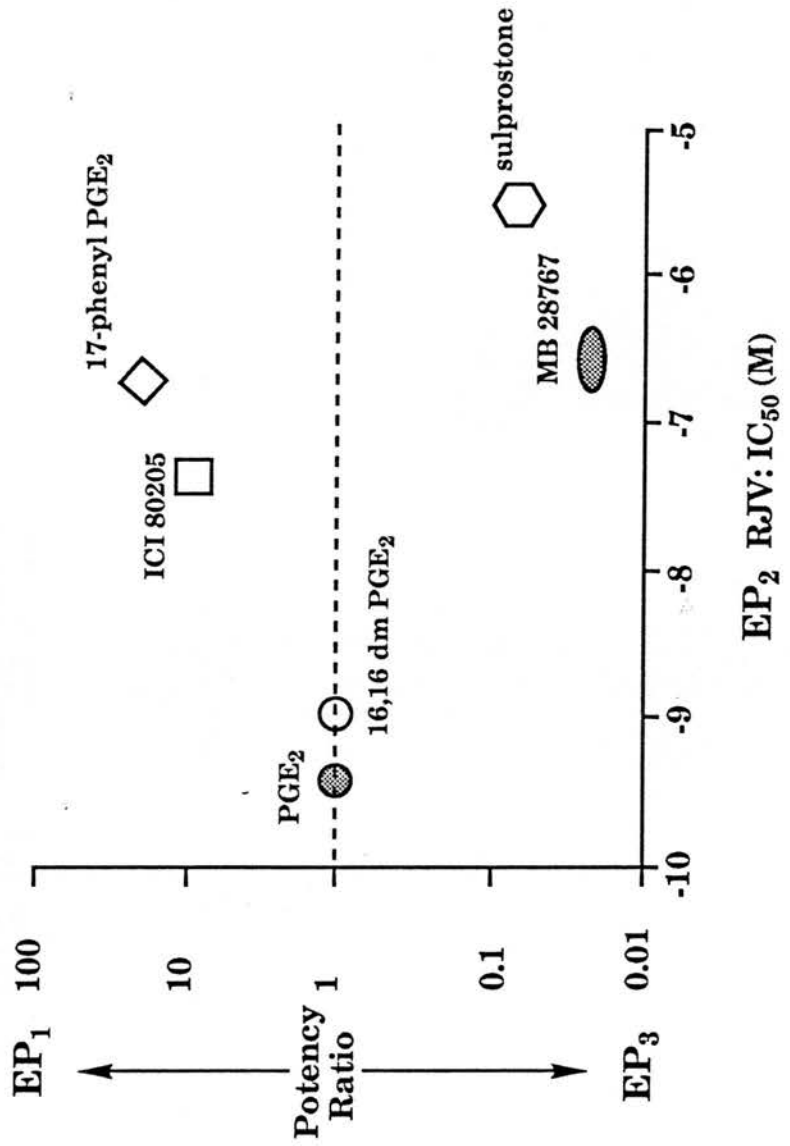
*EP<sub>1</sub>*: 17-phenyl PGE<sub>2</sub>- $\omega$ -trilor appears to be the most selective EP<sub>1</sub> agonist tested: it is highly active in the guinea-pig trachea and ileum and is 200 times less active than PGE<sub>2</sub> in the rabbit jugular vein. However, the compound retains a certain degree of EP<sub>3</sub> activity.

*EP<sub>2</sub>*: As previously demonstrated (Gardiner, 1986) the results show the butaprost has no activity at EP<sub>1</sub> or EP<sub>3</sub> receptors, thus it is useful in the study of EP<sub>2</sub> receptors. However, in certain EP<sub>2</sub> systems (rabbit jugular vein) it is 700 times less active than PGE<sub>2</sub>. 11-deoxy PGE<sub>2</sub> 1-alcohol and 11-deoxy PGE<sub>1</sub> are potent EP<sub>2</sub> agonists, however, they lack the selectivity of butaprost.

*EP<sub>3</sub>*: The data confirms that sulprostone is devoid of activity in the most sensitive EP<sub>2</sub> system as yet characterised (rabbit jugular vein), however, it retains potent agonist action at EP<sub>1</sub> receptors. MB 28767 may prove more useful an EP<sub>3</sub> selective agonist than sulprostone: it has low EP<sub>2</sub> activity and shows no evidence of EP<sub>1</sub> agonist action in the guinea-pig trachea or guinea-pig ileum. However, experiments show that the analogue has considerable agonist action at TP receptor.



Figure 4.20: Agonist selectivity of EP receptor systems. EP<sub>1</sub> activity measured in the guinea-pig trachea (contraction), EP<sub>3</sub> activity measured in the field stimulated guinea-pig vas deferens (inhibition of the twitch response) and EP<sub>2</sub> activity measured in the rabbit jugular vein.



Chapter 5  
TP-Receptor Studies

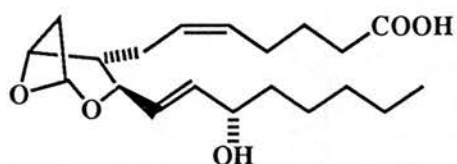
## INTRODUCTION

The first description of thromboxane A<sub>2</sub> was based on superfusion bioassay experiments carried out by Piper and Vane (1969). They detected the release from the passively sensitized guinea-pig lung, when challenged with antigen, of a labile material which contracted the rabbit aorta and affected the other tissues much less than stable prostaglandins. The substance was called rabbit aorta contracting substance (RCS). Later, Hamberg et al (1974) identified and named the major component of RCS as thromboxane A<sub>2</sub> (TXA<sub>2</sub>), a highly unstable intermediate in the conversion of prostaglandin G<sub>2</sub> to thromboxane B<sub>2</sub>.

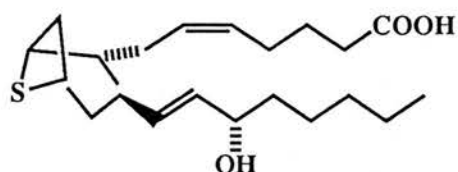
TXA<sub>2</sub> is highly potent as a stimulator of platelet aggregation (Svensson et al, 1976; Kinlough-Rathborne et al, 1977; Moncada and Vane, 1978) and a constrictor of vascular and other types of smooth muscle (Hamberg et al, 1975; Needleman et al, 1976; Moncada et al, 1976; Tuveno et al, 1976; Svensson and Fredholm, 1977; Ellis et al, 1977; Dusting et al 1978). In addition, TXA<sub>2</sub> has been implicated in the pathophysiology of a range of conditions including: thrombosis and occlusive vascular disease (Fitzgerald et al, 1987; Green and Vesterqvist, 1986; Catella et al, 1987).

As mentioned above, TXA<sub>2</sub> is highly unstable with a half-life of about 30 seconds at 37°C and pH 7.4. By comparison with the time courses of action of the other natural prostanoids, it would seem unlikely that TXA<sub>2</sub> establishes equilibrium occupancy at TP receptors within its half-life. This poses a major difficulty in studying the pharmacology of TP receptors and in particular the properties of TP receptor antagonists. It has therefore been necessary to develop stable and specific TXA<sub>2</sub> mimetics (TP receptor agonists) (Fig. 5.1A). One of the first to be synthesized was 11,9-epoxymethano PGH<sub>2</sub> (U 46619). Although strictly an analogue of PGH<sub>2</sub>, it has been shown that this compound has a profile of activity very similar to that of TXA<sub>2</sub> (Fitzpatrick et al, 1978; MacIntyre et al, 1978) and as yet, it has the most favourable combination of potency, specificity and rapidity of action (Jones et al, 1989). Jones and Marr (1977) showed that replacing the terminal 4 carbon unit of PGF<sub>2α</sub> with a *p*-fluorophenoxy group produced a compound with a 50 fold

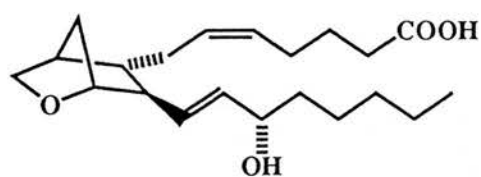
Figure 5.1A: Structure of TP-receptor agonists



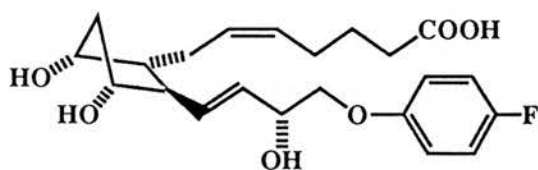
TXA<sub>2</sub>



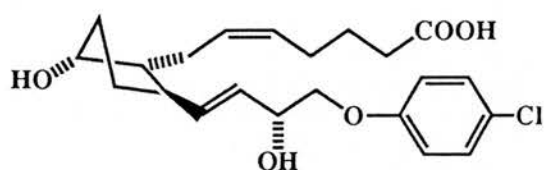
STA<sub>2</sub>



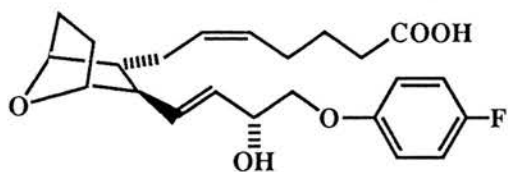
U 46619



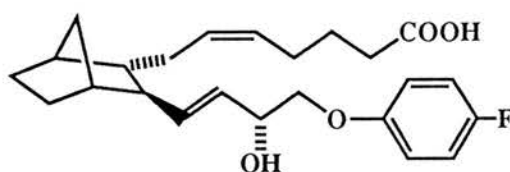
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11-deoxy-16-p-chlorophenoxy  
 $\omega$ -tetranor PGF<sub>2 $\alpha$</sub>

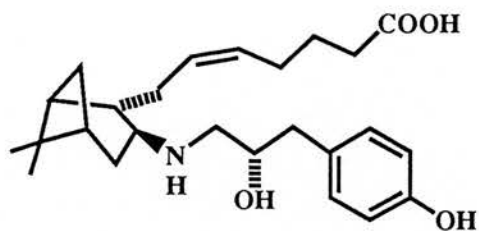


EP 171

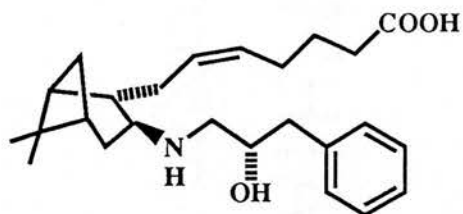


EP 031

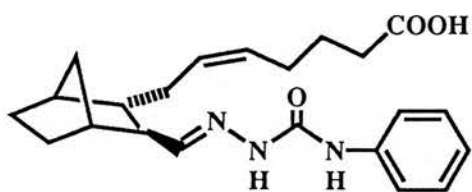
Figure 5.1B: Structure of TP-receptor antagonists



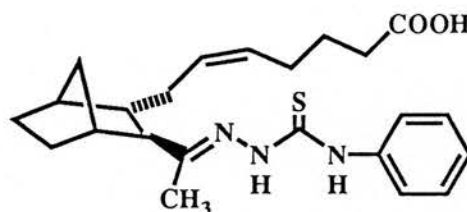
PTA-OH



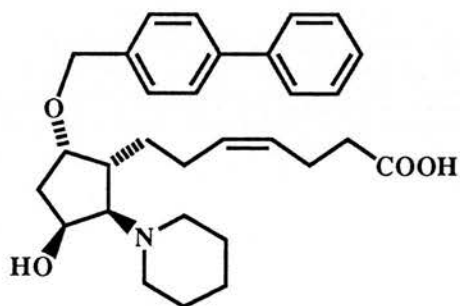
ONO 11120



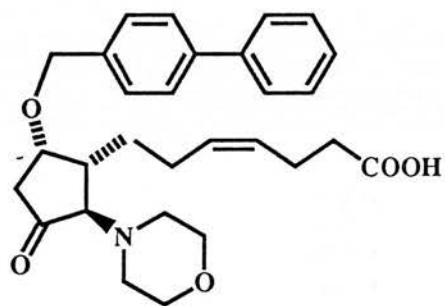
EP 045



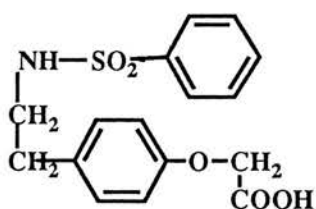
EP 092



GR 32191



AH 23848



BM 13177

increase in potency at TP receptors in various isolated preparations (ICI 79939 - Dukes et al, 1974). A similar substitution on ring analogues of PGH<sub>2</sub> has led to synthesis of EP 031 and EP 171, both highly potent TXA<sub>2</sub> mimetics (Jones et al,1989). Other potent TXA<sub>2</sub> mimetics include a thia derivative of TXA<sub>2</sub>, 11a-carba-9,11-thia TXA<sub>2</sub> (STA<sub>2</sub>) (Katsura et al, 1983).

A range of structurally diverse compounds have been synthesized which specifically antagonise the actions of thromboxane mimetics in both platelet and vasculature of a number of species (Fig 5.1B). The TP receptor antagonists can be divided into three distinct categories. Firstly, those which are modified thromboxane / endoperoxide structures. The original TXA<sub>2</sub> antagonists were of this type: LeBreton et al (1979) demonstrated that 13 azapostanoic acid (APA) inhibited aggregation to PGH<sub>2</sub> and a similar profile was demonstrated for pinane TXA<sub>2</sub> (PTA<sub>2</sub>) (Nicolaou et al, 1979). However, subsequent studies (Jones et al, 1984) have shown that PTA<sub>2</sub> is, in fact, a partial agonist. Jones et al (1984) and Wilson and Jones (1985) produced the TP receptor antagonists EP 045 and the more potent EP 092, which retain the natural  $\alpha$  chain and bicyclo [2.2.1] heptane ring but have a semicarbazone modification to the  $\omega$  chain. Finally, ONO 11120 (Katsura et al, 1983) is a TXA<sub>2</sub> antagonist developed from the combination of 2 classes of antagonist, the aza prostanoids and the pinane series. The second category of antagonists include compounds with prostanoid structures bearing little resemblance to thromboxane/endoperoxides. AH 23848 (Brittain et al, 1985) and GR 32191 (Lumley et al,1987) nominally have the PGD ring structure with a modified  $\omega$  chain and addition to the C9 hydroxyl of a 4-phenylbenzyl group.

The final group of antagonists bear no relation to the prostanoid structure; this group includes BM 13,177 (Patscheke et al, 1984) which is a sulphonamide derivative.

Lefer et al (1981) were first to claim a dissociation between the platelet and vascular actions of thromboxane: they found that carbacyclic TXA<sub>2</sub> (CTA<sub>2</sub>) was a vasoconstrictor in the cat coronary artery but antagonised

arachidonic acid-induced aggregation of human platelets (platelet rich plasma, PRP). A number of other early studies (Gorman et al, 1981b; LeDuc et al, 1981) have also suggested differences between the TP receptor on the platelet and vasculature. However the results have to be interpreted with caution for the following reasons. Firstly, many of the platelet studies employed PRP. Analogues which are lipophylic will bind to the plasma proteins present in PRP and this will result in a considerable decrease in the effective free concentration. Secondly, these groups did not investigate the ability of compounds to induce platelet shape change, which would indicate partial agonist properties. In the platelet, partial agonists may cause shape change but not a full aggregation wave. The shape change and even small aggregation waves are not always obvious if the test compound is added to the PRP at room temperature before placing in the heated cell block of the aggregometer. It is notable that CTA<sub>2</sub> has been shown to induce a rapidly reversing aggregation wave and also inhibits the aggregating wave of U 46619, indicating partial agonist activity (Armstrong et al, 1986). Finally, the platelet contains IP and DP receptors which mediate inhibition of aggregation - agonist activity of thromboxane analogues at these receptors may reduce their effectiveness as aggregatory agents.

Studies by Mais et al (1985a, 1988) have demonstrated a difference in the rank order of potency of a range of 13-azapinane TP receptor antagonists in the platelet and vasculature (saphenous vein) of both the human and the dog. The problem of plasma protein binding has been eliminated from these later studies as washed platelets have been used. In addition, this group (Mais et al, 1985c) have resolved three of the analogues used in the above study (ONO 11120, PTA-OH and I-PTA-OH), and found that in the saphenous vein one of the enantiomers, of all three compounds, was ~3 times more potent than the other, while in the platelet the epimers were of equal potency. The authors concluded that there was a difference in the TP receptor present in the platelet and vasculature.

More recent investigation of a wide range of structurally distinct agonist and antagonists in both platelet and vasculature (Swayne et al, 1988; Jones et al, 1989) show no differences in the rank order of potency at the

two TP receptors involved. Thus, the hypothesis for the existence of distinct receptors on the platelet and vasculature is based on differences seen within a close series of 13-azapinane TP receptor antagonists.

A number of groups (Burke et al, 1983; Jones et al, 1987; Narumiya, et al, 1986; Swayne et al, 1988) have found the rabbit platelet to be 20 - 300 times less sensitive to TP-receptor antagonists than those of other species. Recently, Jones et al (1989) have demonstrated that the  $pA_2$  values of a wide range of structurally distinct TP receptor antagonists are significantly lower in the rabbit platelet and aorta as compared to platelet and vessels from other species, however no such difference is observed with TP receptor agonists.

As yet, studies on the nature of the vascular TP receptor in the rabbit have been restricted to the aorta. We have extended the study to include investigation of the action of TP receptor agonists and antagonists in the jugular vein. One reason for this is the requirement to effectively block TP receptors in this preparation when studying the  $EP_2$  receptor mediating relaxation (see Chapter 4).

Several attempts have been made to characterise platelet TP receptors biochemically using radiolabelled analogues. Hung et al (1983) used [ $^3H$ ]-13-azaprostanoic acid (APA) and found two classes of binding activity on the human platelet membrane: one with a  $K_d$  of ~100 nM and the other with a  $K_d$  of ~3.5  $\mu$ M. Halushka et al (1985) used [ $^{125}I$ ] cis-APA and described a single class of binding sites, however, the compound had a high  $K_d$  of 1.48  $\mu$ M. Armstrong et al (1983) investigated the binding of [ $^3H$ ]-15(S) 9,11- epoxyethano  $PGH_2$ . They found that the  $K_d$  was approximately 70 nM and binding could be displaced by a wide range of agonists and antagonists. However, the compound had a large component of non-displaceable binding. Similar results were obtained by Kattleman et al (1986) who demonstrated binding of [ $^3H$ ]-11,9- epoxyethano  $PGH_2$  (U 46619) to a single class of binding site on the human platelet ( $K_d$ , 108 nM), which was displaced by a series of TP receptor antagonists. However, the above assays have been made difficult by the low affinity and specific activity (<20 Ci/mmol) of the ligands used.



Mais et al (1985b) prepared radioiodinated 13-aza-13,14-dihydro-16 (*p*-hydroxy-*m*-iodophenyl)- $\omega$ -tetranor PTA<sub>2</sub> ( [<sup>125</sup>I]-PTA-OH ) and showed that the process did not affect the biological activity of the compound (antagonism of platelet aggregation). They found that [<sup>125</sup>I]-PTA-OH bound to a single class of receptor with a K<sub>d</sub> of 21 nM and specific binding of 40-50%. The epimers of the iodinated ligand had equal activity on human platelets. These results have since been confirmed by Narumiya et al (1986) and Halushka et al (1987) who also investigated the displacement of the ligand by a range of analogues and compared the IC<sub>50</sub> values with those obtained for platelet aggregation *in vitro*. The results showed that the rank order of potency for agonists correlates well. Thus, [<sup>125</sup>I]-PTA-OH appears to be a most useful high affinity, high specific activity (2000 Ci/mmol) ligand for the study of TP receptors. More recently, however, the TP receptor antagonist SQ 29, 548 (Ogletree et al, 1985) has been radiolabelled with tritium and the binding to human platelets characterised (Hedberg et al, 1988). The compound was shown to bind to a single class of receptors with a K<sub>d</sub> of 5nM and specific binding was 90-97% of the total binding.

We have used [<sup>125</sup>I]-PTA-OH to investigate the binding of various TP receptor agonists and antagonists to the human platelet. The aim of the study is two fold. Firstly, to further characterise agonist binding at TP receptors, particularly that of EP 171, the most potent TP receptor agonist so far reported (Jones et al, 1989). EP 171 is similar in structure to EP 031 (see Fig.5.1) which has been shown to have a particularly slow rate of onset and offset. The assumption was made that this was due to the removal of the highly lipophilic analogue from the extracellular space into adjacent lipid domains. However, studies have shown that EP 171, although considerably less lipophilic, also has a very slow rate of onset and offset such that concentration-response curves often cannot be obtained by cumulative addition of EP 171. Secondly, we were approached by Glaxo to see if we would be willing to measure the K<sub>i</sub> of two of their potent TP receptor antagonists, AH 23848 and GR 32191 and the EP<sub>1</sub> receptor antagonist, AH 6809 on human platelets. The arrangement included Glaxo paying for the expensive radioligand.

## RESULTS

### *Ligand Binding*

*Non-specific binding:* The non specific binding, calculated by including 1  $\mu$ M ONO 11120 in the assay mixture, was 50-60% of the total binding. This value and the  $K_d$  of  $69 \pm 14$  for U 46619 correspond to those obtained in previous studies.

[ <sup>125</sup> I]-PTA-OH	$K_d$ (nM)		specific binding (% of maximum)	Reference
	[ <sup>125</sup> I]-PTA-OH	U 46619		
$21 \pm 5$	$84 \pm 10$		60%	Mais et al (1986)
$22 \pm 3$	$125 \pm 17$		40%	Narumiya et al (1986)
$\sim 20$	$140 \pm 13$		40 - 50%	Halushka et al (1987)

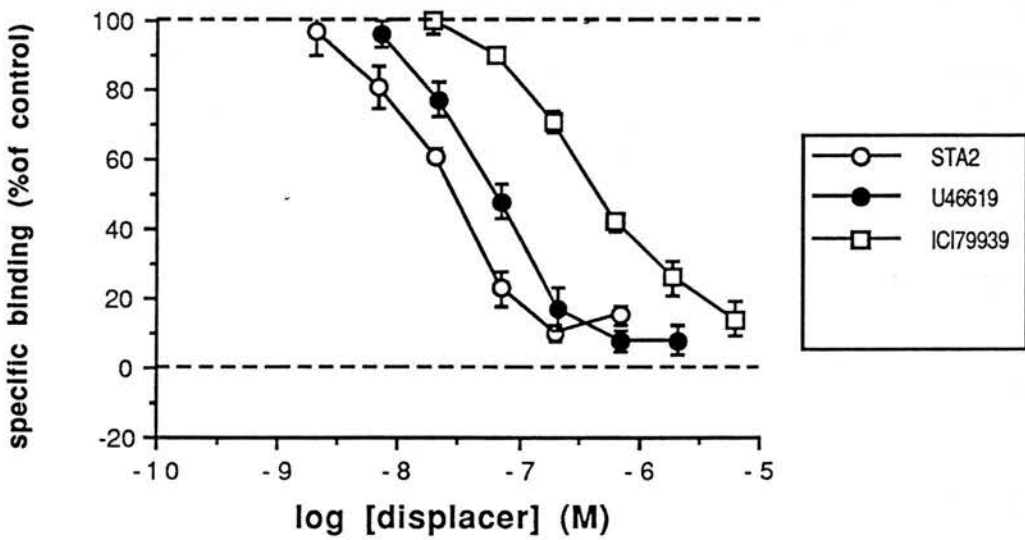
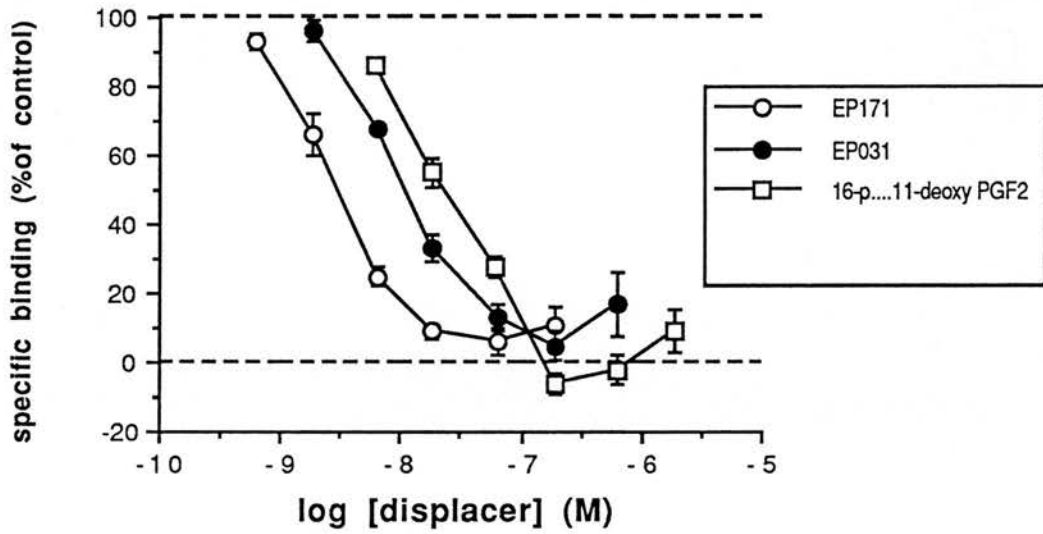
*Agonist displacement curves:* The displacement curves are shown in Figure 5.2. The rank order of affinity of the compounds tested was: EP 171 > EP 031 > 16-*p*-chlorophenoxy-*w*-tetranor-11-deoxy PGF<sub>2 $\alpha$</sub>  > STA<sub>2</sub> > U 46619 > ICI 79939. The log concentration-inhibition curves for a number of compounds (EP 171, EP 031, STA<sub>2</sub>, 19-*p*- chlorophenoxy PGF<sub>2 $\alpha$</sub> ) turned back slightly at highest concentration tested.

*Antagonist displacement curves:* The rank order of affinity of the compounds tested was: GR 32191 > AH 23848. Again the log concentration-inhibition curves of both compounds reversed at higher concentrations.

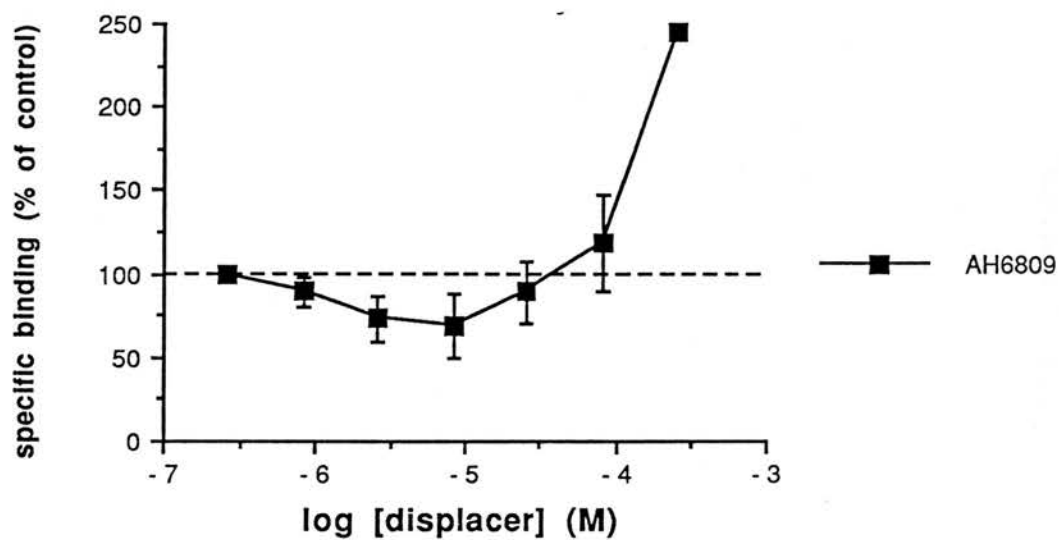
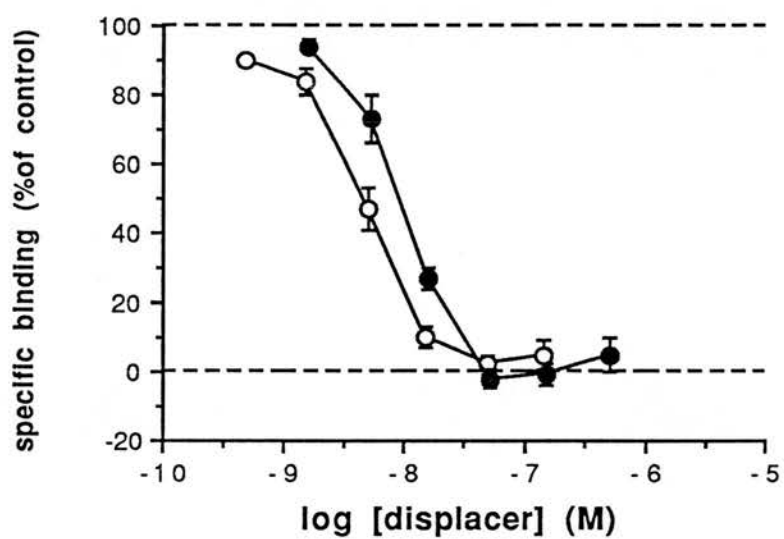
*Displacement curves for the EP<sub>1</sub> receptor agonist, AH 6809:* AH 6809 caused a maximum inhibition of specific binding of 20% at 25  $\mu$ M, the curve then turned back dramatically, giving counts of 200% of the control maximum binding at 250  $\mu$ M.

Figure 5.2: Inhibition of [ $^{125}$ I]-PTA-OH binding to human platelets by (a) TP-receptor agonists and (b) TP-receptor antagonists (means of 4 expts). (bars represent the s.e.m)

a)



b)



*Rabbit jugular vein*

The vessel was highly sensitive to U 46619, which had an EC<sub>50</sub> of ~6 nM. Both STA<sub>2</sub> and EP 171 contracted the preparation, the EMR values were 0.26 and 0.0217 respectively (Fig 5.3). The response to EP 171 was very slow, the lower doses taking 40-50 minutes to reach a stable level of tone. The log concentration-response curve of U 46619 was subject to a parallel rightward shift in the presence of 10 μM GR 32191 (Fig 5.4), consistent with a pA<sub>2</sub> of 7.22 ± 0.10.

Figure 5.3: Log concentration-response curves for contraction of the rabbit jugular vein by EP 171, STA<sub>2</sub> and U 46619 (mean of 4 expts).

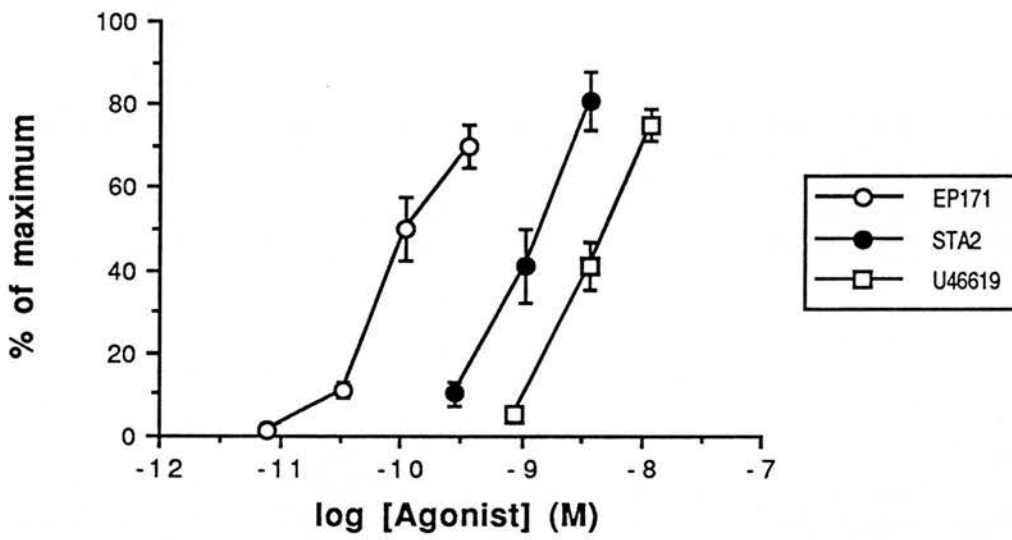
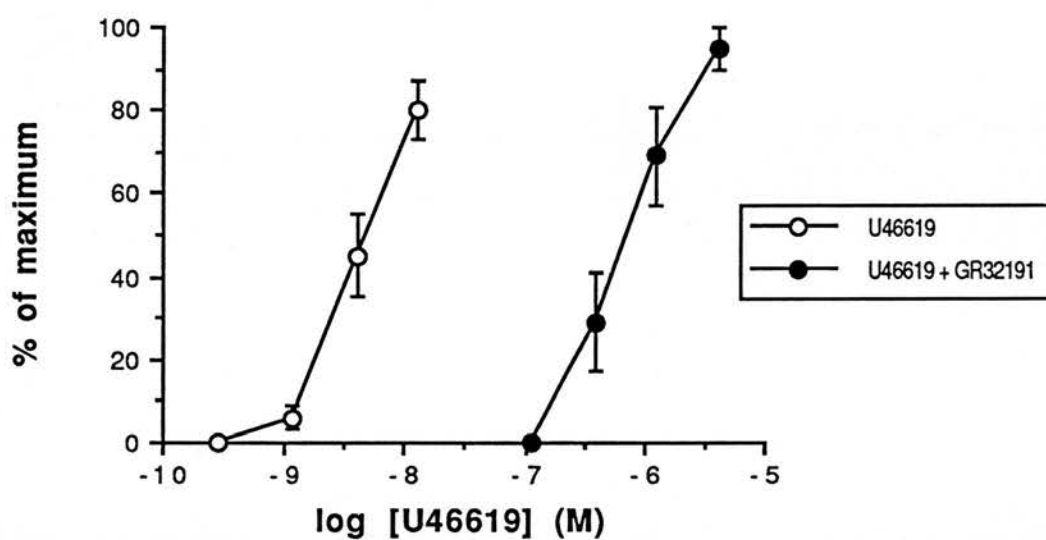


Figure 5.4: Effect of GR 32191 (10 $\mu$ M) on the log concentration-response curve of U 46619 in the rabbit jugular vein (mean of 4 expts).



## DISCUSSION

### *Ligand Binding*

The  $IC_{50}$  value of 69 nM obtained for displacement of [ $^{125}I$ ]-PTA-OH binding by U 46619 is comparable to that obtained by Mais et al (1985) (84 nM), Narumiya et al (1986) (125 nM) and Halushka et al (1987) (140nM). The data in Table 5.1 and 5.2 shows that the rank order of potency of a series of agonists and antagonists as displacing agents correlates well with their potency in the platelet. A similar correlation was demonstrated with a different series of antagonists by Halushka et al (1987).

The agonist ranking (Table 5.3) for EP 171,  $STA_2$  and U 46619 is the same as that obtained on measuring the potency of these compounds as contractile agents in various smooth muscle preparations (Jones at al, 1989) and the rabbit jugular vein. Similarly, the  $K_i$  values obtained for the antagonists, GR 32191 and AH 23848 correlate with those obtained in the vasculature (Lumley et al, 1987; Brittain et al, 1985). Thus, the data present no evidence that the TP receptors on the platelet differ from those in the vasculature.

There are a number of possible reasons why the true  $K_i$  of some of the prostanoids may be lower than that measured in ligand binding experiments. Firstly, a number of the compounds used (EP 171, EP 031, 16-p-chlorophenoxy  $PGF_{2\alpha}$ , AH 23848) are racemic and it is possible that only one enantiomer competes effectively with the radioligand in the binding assay. It is notable that it has previously been shown (Sprague et al, 1985) that in the case of the parent compound the isomer formally related to  $PGH_2/TXA_2$  is ~100 fold more active than the mirror image as an activator of platelets. Secondly, there may be a reduction in the initial free concentration of the displacing agent due to TP receptor binding. For example, assuming the platelet has 1700 TP receptors (Armstrong et al, 1983), the concentration of TP receptors will be about 0.7 nM. At the  $IC_{50}$  for the compound the concentration of receptors in the free and bound form will be equal (i.e 0.35 nM) hence, at the  $IC_{50}$  value of 1.45 nM (assuming only one enantiomer is active) the active species of EP 171 will be reduced to about 1 nM. This will only affect



Table 5.1: Comparison of the potency of TP receptor agonists in terms of shape change production and inhibition of [<sup>125</sup>I]-PTA-OH binding in human washed platelets (mean of 4-6 expts.). (± s.e.m)

Agonist	EC <sub>50</sub> for shape change: (nM)	Inhibition of [ <sup>125</sup> I]-PTA-OH binding: K <sub>i</sub> (nM)
EP 171	0.065 ± 0.011 *	2.9 ± 0.4
EP 031	0.55 ± 0.08 *	11 ± 1.0
16- <i>p</i> -Chlorophenoxy- ω-tetranor-11-deoxy PGF <sub>2α</sub>	2.7 ± 0.6 *	23 ± 14
STA <sub>2</sub>	1.8 ± 0.4 **	27 ± 4
U 46619	5.4 ± 0.9 *	69 ± 14
ICI 79939	27 ± 8 *	440 ± 32

\* Jones et al (1989)

\*\*Lawrence et al (1988)

Table 5.2: Comparison of the potency of TP receptor antagonists in terms of inhibition of aggregation and inhibition of [<sup>125</sup>I]-PTA-OH binding in washed human platelets (mean of 4-6 expts.).

Antagonist	Inhibition of platelet aggregation: K <sub>d</sub> † (nM)	Inhibition of [ <sup>125</sup> I]-PTA-OH binding: K <sub>i</sub> (nM)
GR 32191	1.7 ± 0.2 *	4.6 ± 0.7
AH 23848	5.4 ± 1.1 *	8.8 ± 1.0

\* Lawrence et al (1988)

† K<sub>d</sub> = antilog pA<sub>2</sub> vs U 46619 platelet aggregation

high potency compounds, as the initial free concentration of less potent displacing agents would be reduced by less than 10%. The  $K_d$  of 1nM for EP 171 may account for its slow onset of action on platelets. For example, if the association rate constant,  $k_1$  is  $1 \times 10^7 \text{ M}^{-1}\text{s}^{-1}$  and the dissociation rate constant  $k_2$  is  $0.01\text{s}^{-1}$  (from  $K_d$  of 1nM) then at a concentration of 0.05 nM the calculated occupation half time is 45 seconds. The measured half time of onset of shape change for EP 171 (Jones et al, 1989) is  $38 \pm 3$  seconds and for U 46619,  $9.4 \pm 0.4$  seconds.

The  $IC_{50}$  values for the agonists obtained in the ligand binding assay are significantly higher (10-20 fold) than the  $EC_{50}$  values for inducing shape change, while the  $K_i$  values for antagonists are only slightly (~2 fold) higher than those obtained for inhibition of platelet aggregation. A similar difference in  $IC_{50}$  values obtained by radioligand binding and  $EC_{50}$  for platelet aggregation was observed by Halushka et al (1987). The existence of spare receptors would have predictable consequences for the comparison of binding and functional data for agonists. If spare receptors are present, the biological response could still be a linear function of the number of receptors occupied, but the response would be maximal when the number of receptors occupied is less than the total number of receptors by the number of spare receptors. In this case the biological response for agonists is platelet shape change and it has previously been shown (Armstrong et al, 1983) that only approximately 5% of receptors are occupied by U 46619 at the  $EC_{50}$ . Hence, the concentration of ligand that elicits a half maximal response in the radioligand binding experiment (i.e inhibits 50% of [ $^{125}\text{I}$ ]-PTA-OH specific binding) will be considerably higher than the  $EC_{50}$  measured biologically.

It is notable that the  $K_i$  values obtained for the antagonists, GR 32191 and AH 23848 obtained from the ligand binding study compare well with those obtained functionally. In the case of antagonists the biological response is inhibition of a full aggregation wave of U 46619, thus, the agonist receptor occupancy may be near maximal and the proportion of spare receptors considerably lower than that present at the  $EC_{50}$  level for shape change. Hence, one would expect the  $K_i$  values for the antagonists obtained in the radioligand binding experiment to

correspond more closely to those obtained biologically. Similar results have been reported in studies of both opioid and adrenergic receptors (Tallarida, 1988):  $K_i$  values for agonists obtained in functional studies were consistently 1-2 log units lower than those obtained from binding studies, in contrast, for antagonists the two values were very similar. However, the author explains these findings in terms of a two site receptor model. In this model the agonist binding converts the receptor to a second state for which agonists have a considerably lower affinity and produces little response on binding. Antagonists, however, have equal affinity for both states.

The finding that the  $EP_1$  receptor antagonist, AH 6809 displaces [ $^{125}$ I]-PTA-OH agrees with data showing that this compound inhibits U 46619-induced human platelet aggregation with a  $pA_2$  of 4.4 (Kerry and Lumley, 1988). However, the  $K_i$  cannot be estimated due to the dramatic turning back of the concentration-response curve at concentrations of 20-200  $\mu$ M.

The data have not been analysed using the Hill equation due to the tendency of the binding curves of a number of displacing agents (both agonists and antagonist) to reverse slightly with increasing concentration. It is not clear whether this phenomenon is related to the more marked bellling of the curve of AH 6809. There is no obvious explanation for this effect. It is possible that the presence of high concentrations of displacing agents unmasks additional binding sites for the radioligand.

#### *Rabbit Jugular Vein*

Investigation of the contractile action of EP 171 and  $STA_2$  in the rabbit jugular vein (Table 5.3) shows that the activity in terms of EMR (*vs* U 46619) and absolute potency compare with those obtained in other smooth muscle systems (Jones et al, 1989). However, the  $pA_2$  value (7.2) for GR 32191 appears to be considerably lower than those previously reported for the compound (Table 5.4). It seems that the RJV is similar to other rabbit tissue (both platelet and vasculature) in having a low sensitivity to TP receptor antagonists but not agonists (Tymkewcz et al, 1989). It is notable that BM 13.177 has been shown to have similar

Table 5.3 : Comparison of the agonist potencies of EP 171, STA<sub>2</sub> and U 46619 at TP receptors in the rabbit jugular vein with those of other smooth muscle preparations (mean of 4-6 expts).

Preparation	EC <sub>50</sub> for EP171 (pM)	Equieffective molar ratio (U46619 = 1)	
		EP171	STA <sub>2</sub>
Rabbit aorta	138	0.0136 ± 0.0025 *	0.23 ± 0.06*
Rat aorta	45	0.0094 ± 0.0006 *	0.15 ± 0.02*
Pig pulmonary artery	70	0.0093 ± 0.0008 *	0.21 ± 0.03*
Dog saphenous vein	120	0.0302 ± 0.0034 *	0.30 ± 0.05*
Guinea-pig trachea	57	0.0096 ± 0.0012 *	0.35 ± 0.04*
Rabbit jugular vein	125	0.0217 ± 0.0047	0.26 ± 0.06

\* Jones at al (1989)

Table 5.4: Comparison of the pA<sub>2</sub> values obtained for GR 32191 and AH 23848 in the rabbit jugular vein with that obtained in other vascular preparations (mean of 4-6 expts).

Preparation	pA <sub>2</sub>	
	GR 32191	AH 23848
Human pulmonary vessels	8.2 *	7.7 **
Guinea-pig aorta	8.7 *	—
Rat aorta	7.9 *	7.9 **
Rabbit Jugular vein	7.22 ± 0.1	

\* Lumley et al (1987)

\*\* Brittain et al (1985)

activity in rabbit tissues (aorta and platelets) to those of other species (Tymkewcz and Jones, unpublished data). Giles et al (1989) found that the  $pK_B$  ( $6.01 \pm 0.10$ ) of this blocker in the rabbit jugular vein was similar to that obtained in both the rabbit aorta and human platelet.

The experimental finding of equal  $pA_2$  values of an antagonist measured against two different agonists is taken to indicate that the agonists are binding to the same receptor site, while different  $pA_2$  values indicate that the agonists are acting at different receptors. The assumption is made that both agonist and antagonist bind to precisely the same site. However, if the antagonists bind to accessory sites adjacent to the agonist binding site then different  $pA_2$  values may be obtained despite identical agonist binding sites (see Raffa et al, 1989). This would arise in the case of multiple antagonist accessory binding sites or with multiple subtypes of the antagonist receptor. Such a situation may exist with TP receptors: the antagonist binding site in the rabbit may differ from that found in other species. In addition, the findings of Mais et al (1985a,c ; 1988) showing a different rank order of potency for 13-azapinane TP receptor antagonists in the platelet and vasculature of humans and dogs suggest that the binding sites in the two systems may differ.

Similar observations have been made in other receptor systems. In the 5HT system the data obtained with agonists in various isolated preparations is not consistent with antagonist data (Leff and Martin, 1988). While the affinity values for 5HT are all found to be within a relatively narrow range, there is a wide variation (200 fold) in the antagonist affinity measurements. Also, antagonists of the histamine,  $H_1$  and dopamine,  $D_1$  receptor show a wide structural diversity such that they have been classified on the basis of chemical subgroups, and it has been proposed that they interact with different areas of the transmembrane section of one agonist receptor molecule (Ariens, 1987).

It could, of course, be argued that the range of TP receptor agonists tested to date is too small and by chance we have selected those which show the smallest differences. However, the difficulties associated with

agonists such as EP 171 may discourage the experimenter from a much larger screening process.

We have demonstrated, however, that both the TP receptor antagonists and agonists displace [<sup>125</sup>I]-PTA-OH binding to human platelets. It is notable that Narumiya et al (1986) failed to demonstrate specific binding of [<sup>125</sup>I]-PTA-OH to rabbit platelets. It would be interesting to study the binding of a radiolabelled agonist to rabbit platelets and determine if both agonists and antagonists displace the compound. EP 171 may be useful in a study of this nature although the radioligand would have to have a high specific activity since the free ligand concentration would be 1-10 nM.



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