

2. Ravindranath V, Anandatheerthavarada HK and Shankar SK, NADPH cytochrome P-450 reductase in rat, mouse and human brain. *Biochem Pharmacol* **39**: 1013–1018, 1990.
3. Ravindranath V, Anandatheerthavarada HK and Shankar SK, Xenobiotic metabolism in human brain—presence and cytochrome P-450 and associated monooxygenases. *Brain Res* **496**: 331–335, 1989.
4. Anandatheerthavarada HK, Shankar SK and Ravindranath V, Rat brain cytochromes P-450: catalytic, immunochemical properties and inducibility of multiple forms. *Brain Res* **536**: 339–343, 1990.
5. Ziegler DM, Microsomal flavin-containing monooxygenase: Oxygenation of nucleophilic nitrogen and sulphur compounds. In: *Enzymatic Basis of Detoxification* (Ed. Jakoby WB), Vol. I, pp. 201–207. Academic Press, New York, 1980.
6. Ziegler DM, Flavin-containing monooxygenases: catalytic mechanism and substrate specificities. *Drug Metab Rev* **19**: 1–32, 1988.
7. Ravindranath V and Anandatheerthavarada HK, Preparation of brain microsomes with cytochrome P-450 activity using calcium aggregation method. *Anal Biochem* **187**: 310–313, 1990.
8. Cavagnaro J, Rauckman EJ and Rosen GM, Estimation of FAD-monoxygenase in microsomal preparations. *Anal Biochem* **118**: 204–211, 1981.
9. Bradford MM, A rapid and sensitive method for the quantitation of microgram quantities of protein utilizing the principle of dye binding. *Anal Biochem* **72**: 248–254, 1976.
10. Jeffcoate CRE, Gaylor JL and Calabrese RL, Ligand interaction with cytochrome P-450: binding of primary amines. *Biochemistry* **8**: 3455–3465, 1969.
11. Cashman JR and Hanzlik RP, Microsomal oxidation of thiobenzamide: a photometric assay for FMO. *Biochem Biophys Res Commun* **98**: 147–153, 1981.
12. Tynes RE and Hodgson E, Catalytic activity and substrate specificity of the flavin-containing monooxygenase in microsomal systems: characterization of the hepatic, pulmonary and renal enzymes of the mouse, rabbit and rat. *Arch Biochem Biophys* **240**: 77–93, 1985.
13. Duffel MW and Gillespie SG, Microsomal flavin-containing monooxygenase activity in rat corpus striatum. *J Neurochem* **42**: 1350–1353, 1984.

Differential expression and ciprofibrate induction of hepatic UDP-glucuronyltransferases for thyroxine and triiodothyronine in Fischer rats

(Received 26 October 1990; accepted 9 March 1991)

The possible implication of thyroid hormone in the hypolipidaemic action of phenoxyisobutyrate (fibrate) drugs has been suggested by the finding that clofibrate stimulates liver mitochondrial α -glycerophosphate dehydrogenase activity, a classical thymimetic response [1]. Observations of a drug-induced increase in hepatic uptake of thyroxine (T_4 *) have been interpreted in support of this view [1]. Although clofibrate treatment raises the plasma level of T_4 -binding proteins, competitive displacement of T_4 from these sites by the drug augments the plasma free T_4 fraction with a resultant shift into the tissues [1–3]. However, it is questionable if this results in a thyrotoxic state of the tissues, since the plasma free T_4 concentration during chronic clofibrate treatment is normal [2, 3].

Enzymatic deiodination determines the bioactivity of T_4 through conversion to the active hormone 3,3',5'-triiodothyronine (T_3) or to the inactive isomer 3,3',5'-triiodothyronine (reverse T_3) [4]. Both metabolites are also further metabolized by deiodination. Other important pathways in the metabolism of thyroid hormone involve the conjugation of the phenolic hydroxyl group with glucuronic acid or sulfate [4]. The sulfate conjugates are

rapidly degraded in the liver by the type I iodothyronine deiodinase, and T_4 and T_3 are excreted in rat bile largely as glucuronides [4]. In contrast to an early report [5], clofibrate has been shown to stimulate the biliary clearance of T_4 [6]. Not only clofibrate [6, 7] but also fenofibrate [7], the fibrate derivative nafenopin [8] and ciprofibrate [9] accelerate the metabolic clearance of T_4 in rats. It has been demonstrated that nafenopin and ciprofibrate strongly increase the faecal clearance of T_4 , whereas the urinary (deiodinative) clearance of T_4 is not affected [8] or even inhibited [9]. Little effect of these drugs was noted on the metabolic clearance of T_3 [8, 9]. Fibrates are well-known inducers of bilirubin UDP-glucuronyltransferase (UDPGT) in the liver [10, 11]. In this study we examined the effects of ciprofibrate administration to rats on hepatic T_4 and T_3 UDPGT activities. In order to gain more insight into the isozymes responsible for the glucuronidation of T_4 and T_3 we investigated, in parallel, the effects of ciprofibrate on *p*-nitrophenol (PNP) and androsterone UDPGT activities.

Materials and Methods

L- T_4 , L- T_3 , PNP and Brij 56 were obtained from the Sigma Chemical Co. (St Louis, MO, U.S.A.), [125 I] T_4 (1500 μ Ci/ μ g) and [125 I] T_3 (2800 μ Ci/ μ g) from Amersham (Amersham, U.K.), androsterone from Steraloids (Wilton, NH, U.S.A.), [3 H]androsterone (116 μ Ci/ μ g) from New England Nuclear (Boston, MA, U.S.A.) and UDP-glucuronic acid (UDPGA) from Boehringer (Mannheim, F.R.G.). Fischer 344 rats were obtained from Charles River (Margate, U.K.) and Wistar rats from Harlan

* Abbreviations: DTT, dithiothreitol; HA, high activity; LA, low activity; MC, 3-methylcholanthrene; PNP, *p*-nitrophenyl; PCB, polychlorobiphenyl; TCDD, 2,3,7,8-tetrachlorodibenzo-*p*-dioxin; T_3 , 3,3',5'-triiodothyronine; T_4 , thyroxine; TBG, T_4 -binding globulin; UDPGA, UDP-glucuronic acid; UDPGT, UDP-glucuronyltransferase.

Sprague Dawley (Zeist, The Netherlands).

Male Fischer 344 rats were treated orally for 14 days with ciprofibrate (30 mg/kg body wt per day) or with vehicle. Twenty-four hr after the last dose blood was taken for measurement of serum T_4 and T_3 concentrations. Livers were isolated, perfused with saline and homogenized in 0.25 M sucrose, 50 mM Tris-HCl (pH 7.4) and 1 mM DTT (25% w/w). Homogenates were centrifuged for 40 min at 9000 g and the supernatants for 60 min at 100,000 g. The resulting microsomal pellets were suspended in 0.25 M sucrose, 50 mM Tris-HCl (pH 7.4) and 1 mM DTT at a protein concentration of 10–20 mg/mL, and aliquots were stored at -70° until further analysis. Liver microsomes were prepared similarly from untreated male Wistar rats.

UDPGT activities were determined in duplicate at 37° in 200 μ L 50–100 mM Tris-HCl (pH 7.4–7.8), 5–10 mM $MgCl_2$ and 0.05% Brij 56, with or without (blanks) 5 mM UDPGA as cofactor [10]. T_4 and T_3 UDPGT activities were assayed by incubation of 1 μ M ($\approx 0.1 \mu$ Ci) [^{125}I] T_4 or [^{125}I] T_3 for 1 hr with 1 mg microsomal protein/mL. Reactions were stopped by addition of 200 μ L ice-cold methanol and analysed by Sephadex LH-20 chromatography of the supernatants [12]. PNP UDPGT activity was assayed by incubation of 1 mM PNP for 30 min with 0.5 mg microsomal protein/mL. Reactions were stopped by addition of 3.8 mL 0.1 M NaOH and analysed by measuring the decrease in absorbance at 407 nm [13]. Androsterone UDPGT activity was assayed by incubation of 10 or 100 μ M ($\approx 0.1 \mu$ Ci) [3H]androsterone for 30 min with 0.25–0.5 mg microsomal protein/mL. Reactions were stopped by the addition of 2 mL ice-cold water and analysed by liquid scintillation counting after extraction of remaining substrate with ethyl acetate [14].

UDPGT activities in untreated rats of different strains were compared using analysis of variance followed by a test of least significant differences. The significance of differences in UDPGT activities between control and ciprofibrate-treated Fischer rats was determined using Student's *t*-test.

Results and Discussion

Treatment of Fischer rats with ciprofibrate produced a pronounced decrease in serum T_4 from 38.4 ± 4.5 (SD) to 7.7 ± 1.1 nmol/L ($P < 0.001$), while serum T_3 was not changed (0.55 ± 0.15 nmol/L in controls and 0.55 ± 0.08 nmol/L in ciprofibrate-treated rats). Analysis of the liver microsomes from these animals showed that ciprofibrate induced an approximately 3-fold increase in T_4 UDPGT activity and a 57% increase in T_3 UDPGT activity, whereas UDPGT activities for PNP and androsterone were decreased by 45% and 22%, respectively (Table 1).

We have recently observed a discontinuous variation in the T_3 UDPGT activity of Wistar rat liver microsomes which exactly matched the genetic heterogeneity of androsterone UDPGT in this rat strain [15]. The latter has been documented extensively by Matsui and Hakoziaki [14], who showed that the difference between Wistar rats with low activity (LA) and those with high activity (HA) of androsterone UDPGT represents an autosomal recessive trait. It has recently been demonstrated that the defect is caused by a deletion mutation in the gene coding for this UDPGT [10]. T_4 glucuronidation is only slightly lower in LA compared with HA rats, and PNP UDPGT activity is not different between these phenotypes [15].

Figure 1 shows the comparison between the UDPGT activities for T_4 , T_3 and androsterone in liver microsomes from untreated Fischer and Wistar rats. Hepatic PNP UDPGT activity in normal Fischer rats is about one-third of that in Wistar rats (25.6 ± 2.4 (SD) vs 74.1 ± 6.0 nmol/min/mg protein). Androsterone UDPGT activity in Wistar rat livers shows the well-established heterogeneity; under the assay conditions used, enzyme activity in LA microsomes is less than 10% of that in HA microsomes. Liver

Table 1. Effects of treatment of Fischer rats with ciprofibrate on liver microsomal UDPGT activities

Substrate	UDPGT activity*	
	Control	Ciprofibrate
T_4	1.61 ± 0.19	$4.60 \pm 0.25^\ddagger$
T_3	0.35 ± 0.05	$0.55 \pm 0.03^\ddagger$
PNP	25.6 ± 2.4	$14.2 \pm 1.2^\ddagger$
Androsterone†	86 ± 9	$67 \pm 2^\ddagger$

* Expressed as pmol (T_4 , T_3 , androsterone) or nmol (PNP) per min per mg protein (mean \pm SD, $N = 10$).

† Assayed using 10 μ M substrate and 0.5 mg microsomal protein/mL.

‡ Significantly different from controls ($P < 0.001$).

microsomal androsterone UDPGT activity in Fischer rats is the same as that in Wistar LA microsomes. T_4 is glucuronidated at roughly equal rates by liver microsomes from the different strains. However, T_3 glucuronidation shows a clear dichotomy with high activities in Wistar HA rats and low activities ($\approx 30\%$) in Wistar LA and Fischer rats.

Several conclusions can be drawn from the present and previous findings concerning the identity of the UDPGT isozymes involved with the conjugation of thyroid hormone. (1) With an androsterone UDPGT activity as low as that in the Wistar LA phenotype, Fischer rats appear to have a constitutive defect in this isozyme. (2) Normally, T_3 is glucuronidated mainly by androsterone UDPGT or by another isoenzyme with an identically transmitted genetic defect. However, T_3 is also conjugated to some extent by an UDPGT isozyme which is induced by ciprofibrate [this study]. Glucuronidation of T_4 is not impaired in Wistar LA and Fischer rats, suggesting that it is largely conjugated by other isozymes than androsterone UDPGT. (3) Hepatic T_4 glucuronidation is stimulated by both 3-methylcholanthrene

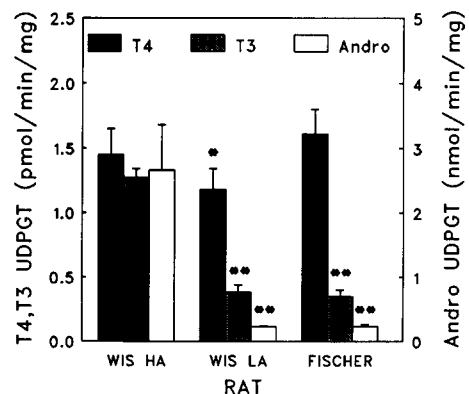


Fig. 1. UDPGT activities (mean \pm SD) in liver microsomes from untreated Wistar HA ($N = 8$), Wistar LA ($N = 4$) and Fischer ($N = 10$) rats. Androsterone UDPGT activity was assayed using 100 μ M substrate and 0.25 mg microsomal protein/mL. * Significantly different from Wistar HA rats, $P < 0.05$; ** $P < 0.001$.

(MC)-type microsomal enzyme inducers such as MC itself [16], polychlorobiphenyls (PCB) [15, 17], and 2,3,7,8-tetrachlorodibenzo-*p*-dioxin (TCDD) [18, 19], as well as by ciprofibrate (this study). Studies with PCB and TCDD have shown that T₃ UDPGT activity is not increased [15, 18]. A selective induction of the metabolic clearance of T₄ and not of T₃ has recently also been found with the fibrate nafenopin [8]. Clofibrate and other fibrates appear to be specific inducers of bilirubin UDPGT [10, 11]. Therefore, these findings collectively suggest that T₄ is a substrate for both MC-inducible phenol UDPGT and clofibrate-inducible bilirubin UDPGT.

In conclusion, it has become clear that multiple UDPGT isozymes are involved with the glucuronidation of thyroid hormone. T₃ is perhaps primarily glucuronidated by androsterone UDPGT, whereas T₄ seems to be conjugated by both phenol and bilirubin UDPGT isozymes.

* Department of Internal
Medicine III and Clinical
Endocrinology

Erasmus University Medical
School

Rotterdam

The Netherlands

‡ Sterling-Winthrop Research
Centre
Alnwick

Northumberland, U.K.

THEO J. VISSER*†
ELLEN KAPTEIN*
ERNIE S. HARPUR‡

REFERENCES

- Ruegamer WR, Ryan NT, Richert DA and Westerfield WW, The effects of *p*-chlorophenoxyisobutyrate on the turnover rate and distribution of thyroid hormone in the rat. *Biochem Pharmacol* **18**: 613–624, 1969.
- McKerron CG, Scott RL, Asper SP and Levy RI, Effects of clofibrate (Atromid S) on the thyroxine-binding capacity of thyroxine-binding globulin and free thyroxine. *J Clin Endocrinol* **29**: 957–961, 1969.
- Lehotay DC, Paul HS, Adibi SA and Levey GS, Influence of clofibrate on thyroid hormone and muscle protein turnover. *Metabolism* **33**: 1048–1051, 1984.
- Visser TJ, Van Buuren JCJ, Rutgers M, Eelkman Rooda SJ and De Herder WW, The role of sulfation in thyroid hormone metabolism. *Trends Endocrinol Metab* **1**: 211–218, 1990.
- Osorio C, Walton KW, Browne CHW, West D and Whystock P, The effect of *p*-chlorophenoxyisobutyrate ('Atromid S') on the biliary excretion and distribution of thyroxine in the rat. *Biochem Pharmacol* **14**: 1479–1481, 1965.
- Harland WA and Orr JS, The effect of clofibrate on thyroxine metabolism. In: *Thyroid Hormone Metabolism* (Eds. Harland WA and Orr JS), pp. 65–87. Academic Press, London, 1975.
- Hinton RH, Mitchell FE, Mann A, Chescoe D, Price SC, Nunn A, Grasso P and Bridges JW, Effects of phthalic esters on the liver and thyroid. *Environ Health Perspect* **70**: 195–210, 1986.
- Kaiser CA, Seydoux J, Giacobino JP, Girardier L and Burger AG, Increased plasma clearance rate of thyroxine despite decreased 5'-monodeiodination: study with a peroxisome proliferator in the rat. *Endocrinology* **122**: 1087–1093, 1988.
- Astley N, Deavy L, Harpur ES, Bonner FW, Lockwood G and Visser TJ, The effects of short term ciprofibrate administration on thyroid hormone metabolism in the male Fischer 344 rat. *Human Exp Toxicol* **10**: 88–89, 1991.
- Burchell B and Coughtrie MWH, UDP-glucuronyltransferases. *Pharmacol Ther* **43**: 261–289, 1989.
- Boiteux-Antoine AF, Magdalou J, Fournel-Gigleux S and Siest G, Comparative induction of drug-metabolizing enzymes by hypolipidaemic drugs. *Gen Pharmacol* **20**: 407–412, 1989.
- Rutgers M, Pigmans IGAI, Bonthuis F, Docter R and Visser TJ, Effects of propylthiouracil on the biliary clearance of thyroxine (T₄) in rats. *Endocrinology* **125**: 2175–2186, 1989.
- Bock KW, Fröhling W, Remmer H and Rexer B, Effects of phenobarbital and 3-methylcholanthrene on substrate specificity of rat liver microsomal UDP-glucuronyltransferase. *Biochim Biophys Acta* **327**: 46–56, 1973.
- Matsui M and Hakozaki M, Discontinuous variation in hepatic uridine diphosphate glucuronyltransferase toward androsterone in Wistar rats. *Biochem Pharmacol* **28**: 411–415, 1979.
- Beetstra JB, Van Engelen JGM, Karels P, Van der Hoek HJ, De Jong M, Docter R, Krenning EP, Hennemann G, Brouwer A and Visser TJ, Thyroxine and triiodothyronine are glucuronidated in rat liver by different UDP-glucuronyltransferases. *Endocrinology* **128**: 741–746, 1991.
- Bastomsky CH and Papapetrou PD, The effect of methylcholanthrene on biliary thyroxine excretion in normal and Gunn rats. *J Endocrinol* **56**: 267–273, 1973.
- Bastomsky CH, Effects of a polychlorinated biphenyl mixture (Aroclor 1254) and DDT on biliary thyroxine excretion in rats. *Endocrinology* **95**: 1150–1155, 1974.
- Bastomsky CH, Enhanced thyroxine metabolism and high uptake goiters in rats after a single dose of 2,3,7,8-tetrachlorodibenzo-*p*-dioxin. *Endocrinology* **101**: 292–296, 1977.
- Henry EC and Gasiewicz TA, Changes in thyroid hormones and thyroxine glucuronidation in hamsters compared with rats following treatment with 2,3,7,8-tetrachlorodibenzo-*p*-dioxin. *Toxicol Appl Pharmacol* **89**: 165–174, 1987.

† Address for correspondence: Theo J. Visser, PhD., Department of Internal Medicine III, Erasmus University Medical School, P.O. Box 1738, 3000 DR Rotterdam, The Netherlands.