

## Vasopeptidase-activated latent ligands of the histamine receptor-1

Lajos Gera<sup>1</sup>, Caroline Roy<sup>2</sup>, Xavier Charest-Morin<sup>2</sup>, François Marceau<sup>2\*</sup>

<sup>1</sup>Department of Biochemistry, University of Colorado Denver, Aurora CO 80045, U.S.A.

<sup>2</sup>Centre de recherche en rhumatologie et immunologie, CHU de Québec, Québec QC, Canada G1V  
4G2

\*Corresponding author: François Marceau, M.D., Ph.D., Centre de recherche en rhumatologie et immunologie, Room T1-49, CHU de Québec, 2705 Laurier Blvd., Québec QC Canada G1V 4G2. Tel.: 418-525-4444, ext. 46155. Fax: 418-654-2765. e-mail:

[francois.marceau@crchul.ulaval.ca](mailto:francois.marceau@crchul.ulaval.ca)

## Abstract

Whether peptidases present in vascular cells can activate prodrugs active on vascular cells has been tested with 2 potential latent ligands of the histamine H<sub>1</sub> receptor (H<sub>1</sub>R). First, a peptide consisting of the antihistamine cetirizine (CTZ) condensed at the N-terminus of ε-aminocaproyl-bradykinin (εACA-BK) was evaluated for an antihistamine activity that could be revealed by degradation of the peptide part of the molecule. CTZ-εACA-BK had a submicromolar affinity for the BK B<sub>2</sub> receptor (B<sub>2</sub>R; IC<sub>50</sub> of 590 nM, [<sup>3</sup>H]BK binding competition), but a non-negligible affinity for the human H<sub>1</sub> receptor (H<sub>1</sub>R; IC<sub>50</sub> of 11 μM for [<sup>3</sup>H]pyrilamine binding). In the human isolated umbilical vein, a system where both endogenous B<sub>2</sub>R and H<sub>1</sub>R mediate strong contractions, CTZ-εACA-BK exerted mild antagonist effects on histamine-induced contraction that were not modified by omapatrilat or by a B<sub>2</sub>R antagonist that prevents endocytosis of the BK conjugate. Cells expressing recombinant ACE or B<sub>2</sub>R incubated with CTZ-εACA-BK did not release a competitor of [<sup>3</sup>H]pyrilamine binding to H<sub>1</sub>Rs. Thus, there is no evidence that CTZ-εACA-BK can release free cetirizine in biological environments. The second prodrug was a blocked agonist, L-alanyl-histamine, potentially activated by aminopeptidase N (APN). This compound did not compete for [<sup>3</sup>H]pyrilamine binding to H<sub>1</sub>Rs. The human umbilical vein contractility assay responded to L-alanyl-histamine (EC<sub>50</sub> 54.7 μM), but the APN inhibitor amastatin massively (17-fold) reduced its apparent potency. Amastatin did not influence the potency of histamine as a contractile agent. One of the 2 tested latent H<sub>1</sub>R ligands, L-alanyl-histamine, supported the feasibility of pro-drug activation by vascular ectopeptidases.

**Keywords:** angiotensin converting enzyme; aminopeptidase N; bradykinin B<sub>2</sub> receptor; histamine H<sub>1</sub> receptor; human umbilical vein; prodrug.

## 1. Introduction

Peptidases expressed in vascular tissue are important modulators of the pharmacology of vasoactive peptides. Angiotensin converting enzyme (ACE), expressed in endothelial cells, hydrolyses both angiotensin I and bradykinin (BK). In the first case, this is a physiological activation, as the product angiotensin II is the optimal agonist of the AT<sub>1</sub> receptors, while the second reaction leads to BK inactivation [1]. However, we reported lately that the peptide Met-Lys-bradykinin-Ser-Ser is paradoxically activated by its reaction with ACE, that frees the BK C-terminal sequence needed to activate the cognate B<sub>2</sub> receptor (B<sub>2</sub>R) [2]. The modulatory role of vascular aminopeptidase N (APN) has also been illustrated, as the blockade of this ectopeptidase, expressed in vascular smooth muscle, potentiates such peptides as Lys-des-Arg<sup>9</sup>-BK (the optimal agonist of human and rabbit BK B<sub>1</sub> receptor), some peptide antagonists of B<sub>1</sub> receptors and angiotensin III [3, 4].

BK is a fragile peptide inactivated rapidly both in the extracellular compartment and in endosomes. The nonapeptide BK, via its preformed, phosphorylatable and G protein coupled B<sub>2</sub>R, is an excellent example of an agonist submitted to endocytosis and degradation [5]. Endosomal BK degradation obligatorily precedes the dissociation of  $\beta$ -arrestins from the B<sub>2</sub>R and receptor recycling to the cell surface, as shown by several inactivation-resistant B<sub>2</sub>R agonists that promote the persistence of this intracellular complex for at least 12 h and prolonged signaling [6, 7]. Fluorophore conjugated analogs (carboxyfluorescein- or AlexaFluor-350- $\epsilon$ -aminocaproyl-BK) model the intracellular inactivation of the kinin, notably because the inhibitor of the proton pump V-ATPase, bafilomycin A1, prevents the time-dependent disappearance of the fluorescent peptides in endosomes of B<sub>2</sub>R-expressing cells [8, 9]. Free carboxyfluorescein is also released into the cytosol as a function of time in these cells, suggesting a particular strategy to release a drug cargo from BK conjugates.

A possible manner to generate diversity in drug candidates is to design ligands for more than one pharmacological target; for instance omapatrilat has been designed to block both BK-destroying peptidases ACE and neutral endopeptidase (NEP) with nanomolar affinities [10]. A further step could concern ligands that successively bind to one target, and then to another upon metabolic alteration. Among several carboxylic acids that have been condensed with  $\epsilon$ -aminocaproyl-BK, we recently reported the antihistamine drug cetirizine (Fig. 1) [9]. As other N-terminally extended analogs of BK, cetirizine- $\epsilon$ -aminocaproyl-bradykinin (CTZ-  $\epsilon$ ACA-BK) is a full agonist of the  $B_2R$ , but with a low affinity [9]. A similarly designed analog, carboxyfluorescein- $\epsilon$ ACA-BK, has an affinity for ACE that is identical to that of BK [8]. Testing the concept of a pro-drug activable by vascular tissue metabolism may be based on CTZ-  $\epsilon$ ACA-BK because cetirizine has a high persistence of its binding to histamine  $H_1$  receptor ( $H_1R$ ) [11]. Conjugated cetirizine, with its carboxylic acid function engaged in an amide bond, is predicted to have a low or no affinity for the  $H_1R$ . An alternative pro-drug potentially activated by a vasopeptidase was based on the agonist histamine condensed with alanine: L-alanyl-histamine (Fig. 1) was tested as a latent  $H_1R$  agonist activable by aminopeptidase N (APN, CD13, EC 3.4.11.2), on the model of the standard chromogenic substrate of APN, L-Ala-p-nitroanilide [12]. In addition to molecular studies based on recombinant  $B_2R$  and  $H_1R$ , we exploited the human umbilical vein contractility assay naturally expressing these two receptor types that mediate important contractile responses [13,14]. This vein also expresses ACE [2, 15]. The ectopeptidase APN is present in the vascular smooth muscle cells of the umbilical artery [3, 4] and at least in the endothelium of the umbilical vein [16, 17].

## 2. Materials and methods

### 2.1. Synthesis of L-alanyl-histamine

The synthesis of L-alanyl-histamine (4-[ $\beta$ -( $\alpha$ -alanyl-amido)-ethyl]-1-*H*-imidazole (2-amino-N-[2-(1*H*-imidazol-4-yl)ethyl]-(2*S*)-propanamide) has been previously reported [18] based on Boc-L-Ala and tritylsulfonyl-histamine using the diisopropyl-carbodiimide coupling reagent. This method was slightly modified using histamine dihydrochloride and the BOP coupling reagent.

Diisopropylethylamine (4 mmol, 697  $\mu$ l) was added to the stirred suspension of Boc-Ala (1 mmol, 189.2 mg) (Benzotriazol-1-yloxy)tris(dimethylamino)phosphonium hexafluorophosphate (BOP, 1 mmol, 442.3 mg), and histamine dihydrochloride (1 mmol, 184.1 mg) in 25 ml acetonitrile. The mixture was stirred overnight at room temperature. The solvent was removed in vacuum and the oily residue was dissolved in 75 mL ethyl acetate. The organic phase was extracted with 5 %  $\text{KHSO}_4$  (3  $\times$  10 ml), brine (10 ml), 5 %  $\text{NaHCO}_3$  (3  $\times$  10 ml), brine (10 ml). The organic phase was dried over anhydrous  $\text{Na}_2\text{SO}_4$ . The solvent was evaporated affording a white powder. The crude product can be used for the Boc-deprotection without further purification or could be purified by preparative HPLC on a C18 column (131 mg, 46.4 %), (2-[[[(1,1-dimethylethoxy)carbonyl]amino]-N-[2-(1*H*-imidazol-4-yl)ethyl]-(2*S*)-propanamide,  $\text{N}^a$ -Boc-L-alanyl-histamine,  $\text{C}_{13}\text{H}_{22}\text{N}_4\text{O}_3$ : 282.34).

The  $\text{N}^a$ -Boc-group was cleaved according to the classical deprotection procedure. The Boc-compound (141.2 mg, 0.5 mmol) was dissolved in 25 % TFA in dichloromethane (DCM, 25 ml). After 30 min, the solution was concentrated under reduced pressure at room temperature and the residue was lyophilized from 15 ml of  $\text{H}_2\text{O}$  to give the crude product as a trifluoroacetic acid (TFA) salt of 2-amino-N-[2-(1*H*-imidazol-4-yl)ethyl]-(2*S*)-propanamide (L-alanyl-histamine). The crude product was purified by preparative HPLC on a C18 column. The lyophilized L-alanyl-

histamine.TFA salt was dissolved in 0.25 N cold HCl (25 ml) and was lyophilized to obtain the L-alanyl-histamine.2HCl salt (53.5 mg, 41.9 %, C<sub>8</sub>H<sub>14</sub>N<sub>4</sub>O.2HCl: 255.15). LC-MC m/z calculated for [M+H]<sup>+</sup> 183.23, found 183.51.

## 2.2. Other drugs

BK was purchased from Bachem Biosciences (King of Prussia, PA) and histamine dihydrochloride, cetirizine dihydrochloride, pyrilamine maleate and amastatin from Sigma-Aldrich (St. Louis, MO). LF 16-0687 (anatabin; 1-[[2,4-dichloro-3-[(2,4-dimethylquinolin-8-yl)oxy]methyl]phenyl]sulfonyl]-N-[3-[[4-(aminoiminomethyl)-phenyl]carbonylamino]propyl]-2(S)-pyrrolidinecarboxamide, mesylate salt), a previously described nonpeptide B<sub>2</sub>R antagonist [19], was a gift from Laboratoires Fournier (Daix, France). CTZ- εACA-BK has been previously described [9]. The vasopeptidase inhibitor omapatrilat was kindly provided by Bristol-Myers Squibb (Princeton, NJ).

## 2.3. Radioligand binding studies

[<sup>3</sup>H]BK ([2,3-prolyl-3,4-<sup>3</sup>H(N)]-bradykinin, 85.7 Ci/mmol) and [<sup>3</sup>H]pyrilamine ([pyridinyl-5-<sup>3</sup>H]-pyrilamine, 20 Ci/mmol) were purchased from PerkinElmer (Boston, MA) and American Radiolabeled Chemicals, Inc. (St. Louis, MO). In preliminary experiments, Chinese-hamster ovary (CHO) cells were found suitable to express good levels of both H<sub>1</sub>R and myc-B<sub>2</sub>R; they were grown in Dulbecco's modified Eagle's medium, supplemented with fetal bovine serum (10%) and antibiotics. Cells were transiently transfected with the myc-B<sub>2</sub>R vector [6], which codes for a fully functional N-terminally myc-tagged rabbit BK B<sub>2</sub> receptor, or a vector coding for human H<sub>1</sub>R (clone HRH0100000 inserted into pcDNA3.1, obtained from University of Missouri-Rolla cDNA Resource Center, Rolla, MO) (transfection methods as in Gera et al., [8]).

The binding of either radioligand to adherent intact CHO cells transiently expressing H<sub>1</sub>R or myc-B<sub>2</sub>R (plates of 24 wells) was evaluated in the following manner: cells were washed with an assay buffer common to both binding assays (ice-cold phosphate-buffered saline [PBS], pH 7.4, supplemented with 0.02% NaN<sub>3</sub>, 0.1% bovine serum albumin, 1 mM phenylmethylsulfonyl fluoride [PMSF], and 1 μM captopril). 0.5 ml of this buffer was left in each cell well, to which were optionally added cold competitors and the radioligand. After 90 min incubation at 0°C, cell wells were washed 3 times with 1 ml of ice-cold PBS. The wells' supernatants were discarded and the cells were dissolved in 1 ml NaOH 0.1 N. This suspension was transferred in a scintillation vial containing 7 ml of Ecolite Plus and counted for radioactivity.

The binding assays were applied to construct saturation curves for both radioligands by varying the concentration of each radioligand. Non-specific binding was obtained in matched cell wells co-treated with unlabeled BK (1 μM) or pyrilamine (1 μM) and subtracted from total binding to evaluate specific binding. A second series of experiments involved the competition of a fixed concentration of each radioligand with a panel of unlabeled drugs used at variable concentrations to evaluate their affinity at each receptor from binding competition curves.

#### *2.4. Radioreceptor assay*

A variation of the competition protocol (radioreceptor assay) was used to evidence the possible metabolic activation of the latent antihistamine effect of CTZ-εACA-BK by cellular systems competent to show the intracellular or extracellular degradation of BK. CTZ-εACA-BK (1 μM) was added to a simplified version of the PBS-based binding buffer (without PMSF or sodium azide for both cell systems, and also without captopril for ACE-expressing cells) that was pre-warmed and

replaced the culture medium of the following cells in 35 mm petri dishes: (1) HEK 293 cells stably expressing the fluorescent construction B<sub>2</sub>R-GFP, previously used to model the intracellular endosomal inactivation of BK [7]; (2) HEK 293a cells that transiently expressed recombinant human ACE, to model the extracellular inactivation of BK [2] (the corresponding peACE expression vector was a generous gift from Prof. P. Corvol, Paris, France). After 30 min of incubation at 37°C, the cells supernatants were harvested, centrifuged to remove any debris and frozen for further use. The thawed supernatants (0.5 ml/well), to which were added 2 nM [<sup>3</sup>H]pyrilamine, were later directly used without dilution in the binding assay to H<sub>1</sub>R expressed in CHO cells (see above). Displacement of [<sup>3</sup>H]pyrilamine binding was taken as evidence of the release of free cetirizine from CTZ-εACA-BK.

### *2.5. β-arrestin<sub>1</sub> condensation assay*

CHO cells were co-transfected with a vector encoding β-arrestin<sub>1</sub>-cherry (kind gift from Dr. Martin Beaulieu, Université Laval, Quebec City, Canada) and another one encoding one of the receptors under study. The cells were stimulated with drugs (37°C, 30 min) and the red epifluorescence was then observed. The goal of the experiment was to monitor the endosomal condensation of the β-arrestin (as in [8]) in response to a given compound: if the condensation occurs, the ligand is an agonist. If no condensation is noted, the agent may not bind the studied type of receptor or may be an antagonist of this receptor.

### *2.6. Contractility assay*

The anonymous use of human umbilical cords obtained after elective caesarean section deliveries was approved by a local institutional research ethics board. The preparation of the umbilical vein rings was described elsewhere [20]. This vein is a suitable contractile bioassay for both the B<sub>2</sub>R and



H<sub>1</sub>R [13, 14]. After a 2.5-h equilibration period during which tissues were periodically washed with fresh Krebs buffer, tissues were randomly assigned to one of the experimental groups in several protocols further described in Results.

### *2.7. Immunofluorescence of peptidases in the human umbilical vein*

The conversion of the latent H<sub>1</sub>R ligands in the venous contractility assay described above is dependent on the presence of peptidases in the vascular structure, minimally ACE and APN. Five- $\mu$ m-thick paraffin tissue section of the human umbilical vein in situ were rehydrated and processed for the immunofluorescence of ACE using anti-ACE polyclonal antibodies C28 (dilution 1:50) raised against the C-terminal sequence of human ACE [21] (gift from Prof. P. Corvol, INSERM U36, Paris, France) and of APN (CD13) using the mouse monoclonal anti-CD13 antibodies (BD Pharmingen, clone WM-15, dilution 1:50) (general immunofluorescence methods as in Morissette et al., [22]). Other sections were stained using anti- $\alpha$ -actin monoclonal antibodies (dilution 1:100, clone 1A4, Sigma-Aldrich) to identify vascular smooth muscle. Staining was revealed using the appropriate AlexaFluor-conjugated secondary antibodies and sections were observed (epifluorescence, 100  $\times$ ).

### *2.8. Data analysis*

Numerical values are reported as means  $\pm$  s.e.m. The data from competition assays involving radioligand binding were fitted by nonlinear regression to a one-site competition equation to derive IC<sub>50</sub> values (Prism 5.0, GraphPad Software Inc., San Diego, CA). The contractility concentration-effect data were analyzed with Prism (sigmoidal dose-response curve with variable slope) to obtain EC<sub>50</sub> values and their 95% confidence limits (C.L.).  $\chi^2$  statistics (comparison of frequencies) was used to determine qualitative drug effect on the endosomal labeling by recombinant  $\beta$ -arrestin<sub>1</sub>, the

categories being: presence or absence of robust labeling.

### 3. Results

#### 3.1. Radioligand binding studies

As judged from the results of radioligand binding assays, CHO cells were found suitable to transiently express both recombinant human histamine H<sub>1</sub>R and the tagged construction myc-B<sub>2</sub>R (Fig. 2); the latter has an intact pharmacological profile relative to the wild type BK B<sub>2</sub>R [6]. Thus, the specific binding of [<sup>3</sup>H]pyrilamine to H<sub>1</sub>R is apparently saturable with a calculated K<sub>D</sub> of 3.19 nM and an extrapolated B<sub>max</sub> of 123 fmol/well (Fig. 2A). Other cells that expressed myc-B<sub>2</sub>R bound negligible amounts of the tritiated antihistamine (Fig. 2A). Conversely, the specific binding of [<sup>3</sup>H]BK to myc-B<sub>2</sub>R was important (B<sub>max</sub> 42.9 fmol/well), of high affinity (K<sub>D</sub> 1.67 nM), but non-existent in other CHO cells that expressed H<sub>1</sub>R (Fig. 2B).

These separate binding assays were exploited to calculate the potency of a panel of unlabeled drugs at each receptor type by competition of a fixed concentration of each radioligand (2 nM of [<sup>3</sup>H]pyrilamine at the H<sub>1</sub>R, 3 nM of [<sup>3</sup>H]BK at myc-B<sub>2</sub>R; Figs. 2C, D). The unlabeled antihistamines were potent competitors at the H<sub>1</sub>R (calculated IC<sub>50</sub> of 5.5 and 532 nM for pyrilamine and cetirizine, respectively). The natural agonist histamine itself has a low absolute affinity at H<sub>1</sub>R (IC<sub>50</sub> 55.5 μM). Of note, CTZ-εACA-BK was capable of competing for [<sup>3</sup>H]pyrilamine binding to H<sub>1</sub>R (IC<sub>50</sub> 11.0 μM, thus only ~20-fold less potent than cetirizine). The typical B<sub>2</sub>R ligands BK (agonist) and LF 16-0687 (antagonist) were inactive to displace [<sup>3</sup>H]pyrilamine binding from H<sub>1</sub>R at pharmacologically relevant concentrations.

The same set of non-radioactive agents were tested as competitors of [<sup>3</sup>H]BK binding to myc-B<sub>2</sub>R (Fig. 2D). The non-peptide antagonist LF 16-0867 and the peptide agonist BK exhibited the highest

affinity in the competition assay ( $IC_{50}$  of 6.1 and 11.5 nM, respectively), followed by CTZ- $\epsilon$ ACA-BK (690 nM). The typical  $H_1R$  ligands (pyrilamine, cetirizine, histamine) did not significantly compete for [ $^3H$ ]BK binding to myc- $B_2R$  at 10  $\mu$ M (Fig. 2D).

### 3.2. $\beta$ -arrestin<sub>1</sub> condensation in CHO cells

An assay based on  $\beta$ -arrestin condensation at the level of endosomes, where many phosphorylated receptors are translocated (including the  $B_2R$  [8]), was performed to confirm the agonist or antagonist status of some ligands in co-transfected CHO cells that expressed either recombinant  $H_1R$  or myc- $B_2R$  along with  $\beta$ -arrestin<sub>1</sub>-cherry (Fig. 3). BK and CTZ- $\epsilon$ ACA-BK, used at concentrations that displaced [ $^3H$ ]BK binding from myc- $B_2R$  (Fig. 2D) effectively condensed the arrestin at the level of multiple granular structures located in the cytosol (Fig. 3). Histamine was inactive in this respect in cells that expressed myc- $B_2R$  but was active in those expressing  $H_1R$  (the frequency of the response being significant relative to control, but smaller than that achieved with BK stimulation of myc- $B_2R$ ). The histamine  $H_1R$  did not mediate arrestin condensation in response to either BK sequences (Fig. 3), either because BK has no affinity at this receptor (as proven by Fig. 2B) or because the CTZ conjugate is an antagonist ligand of the  $H_1R$ .

### 3.3. Metabolic activation of CTZ- $\epsilon$ ACA-BK in the human umbilical vein

HEK 293 cells that stably express the fluorescent receptor  $B_2R$ -GFP exhibit the endocytosis of this construction in response to CTZ- $\epsilon$ ACA-BK (5  $\mu$ M) and this translocation was prevented by treatment with LF 16-0687 [9]. Whether the intracellular metabolism of the conjugated peptide in endosomes releases free cetirizine has been tested using the competition assay (binding of 2 nM [ $^3H$ ]pyrilamine to  $H_1R$  expressed in CHO cells, Fig. 4A). HEK 293 cells expressing high levels of  $B_2R$ -GFP were stimulated at 37°C with CTZ- $\epsilon$ ACA-BK (1  $\mu$ M, 30 min) and the cell supernatant

was then harvested, frozen, and later applied undiluted to the [<sup>3</sup>H]pyrilamine competition assay. The conjugated peptide, which competes very little for this binding at 1 μM (Fig. 2C), was not rendered more active by preincubation with cells that expressed B<sub>2</sub>R-GFP (Fig. 3A). Alternatively, the latent antihistamine effect of CTZ-εACA-BK could be activated by extracellular enzymatic systems that initiate BK degradation, primarily ACE. CTZ-εACA-BK (1 μM) was incubated with HEK 293a cells that transiently expressed human recombinant ACE; the supernatants were again tested as competitors in the [<sup>3</sup>H]pyrilamine binding assay (Fig. 4B). Again, no gain of potency was observed at H<sub>1</sub>Rs.

The human isolated umbilical vein is a tissue that expresses peptidases such as ACE and APN (Supplementary Fig. 1) and endogenous B<sub>2</sub> and H<sub>1</sub> receptors. In this preparation, CTZ-εACA-BK exerted mild antagonist effects on histamine-induced contraction that were not modified by omapatrilat, an inhibitor of ACE and neutral endopeptidase, or by a B<sub>2</sub>R antagonist that prevents endocytosis of the BK conjugate. These conclusions are supported by the online data supplement (Supplementary Results, Supplementary Figs. 2-4 and Supplementary Tables 1 and 2). Thus, based on the lack of gain of function, there is no evidence that CTZ-εACA-BK can release free cetirizine in biological environments.

#### *3.4. Pharmacology and metabolic activation of L-alanyl- histamine*

When used at concentrations up to 300 μM, L-alanyl-histamine did not compete intensely enough with for [<sup>3</sup>H]pyrilamine binding to H<sub>1</sub>Rs expressed by CHO cells to calculate an IC<sub>50</sub> value (Fig. 5A), whereas authentic histamine displaced the radioligand (IC<sub>50</sub> 75 μM in this set of experiments). In the human umbilical vein contractility assay, L-alanyl-histamine, is a contractile agent less potent than histamine (Fig. 5B, numerical parameters in Table 1). Pretreatment of tissue with the APN

inhibitor amastatin had contrasting effects on the apparent potency of the 2 agonists: it did not affect that of histamine, but reduced 17-fold that of L-alanyl-histamine, supporting that the latter derivative is a pro-drug metabolically releasing histamine *in situ*.

#### 4. Discussion

It was hypothesized that peptidases expressed in blood vessels, and specifically in the robust contractility assay based on the human umbilical vein, would release H<sub>1</sub>R ligands from peptide-like pro-drugs. In the present study, the previously reported conjugate CTZ-εACA-BK [9] was further characterized as a dual ligand of both B<sub>2</sub>R and H<sub>1</sub>R based on radioligand competition assays (Fig. 2C, D), and categorized as an agonist and probable antagonist of these respective receptors, based on the arrestin condensation assay (Fig. 3). As the peptide BK is metabolized via several degradative pathways in endosomes following B<sub>2</sub>R-mediated internalization [23], the endosomal release of cetirizine from a prodrug that is a B<sub>2</sub>R agonist was an alternate possibility. The direct affinity for the H<sub>1</sub>R in a binding assay conducted at ice temperature was unexpected and constituted a first limitation of the approach, because the metabolic release of free cetirizine would have increased its potency by about 20-fold only at the H<sub>1</sub>R (compare the relative potencies in Fig. 2C). Thus, despite the facts that the fluorescent conjugate CF-εACA-BK binds to ACE with an affinity equal to BK and that this peptide apparently releases free carboxyfluorescein after endocytosis [8], metabolic release of free cetirizine from the analog peptide CTZ-εACA-BK was not pharmacologically detected under the forms of a potent antagonism of histamine or of a competitor for the binding of [<sup>3</sup>H]pyrilamine to recombinant H<sub>1</sub>Rs. The drug-peptide conjugate behaved as a weak H<sub>1</sub>R antagonist in the umbilical vein under all circumstances, with or without a wide spectrum peptidase inhibitor or B<sub>2</sub>R blockade.

The proof-of-concept of the metabolic activation of a H<sub>1</sub>R latent ligand is provided by the very simple compound L-alanyl-histamine. Oddly, this compound had been previously synthesized as a carbonic anhydrase activator [18]; we rather re-discovered it as an analogue of some of the highly

efficient APN substrates, such as L-Ala-p-nitroanilide (see Introduction). As predicted, L-alanyl-histamine has practically no affinity for the H<sub>1</sub>R (Fig. 5A), but naturally expressed APN released histamine from it (detected as a contractile agent in the umbilical vein, Fig. 5B). The APN inhibitor amastatin abated the conversion of L-alanyl-histamine into a H<sub>1</sub>R stimulant, consistent with the metabolic activation model. Thus, the potency of L-alanyl-histamine as a contractile agent in the isolated vein (Fig. 5B) is determined by the enzymatic velocity of the APN, the diffusion rates of the pro-drug into, and that of the produced histamine out of the tissue and, possibly, by histamine degradation within the tissue (the general problem of non-equilibrium pharmacological effects on isolated tissues is discussed elsewhere [14]).

The interest of activation of pro-drugs by ectopeptidases will essentially depend on the distribution of these enzymes in tissues. We have previously shown the activation of a B<sub>2</sub>R agonist from the peptide Met-Lys-BK-Ser-Ser by ACE [2]. ACE is essentially endothelial (Supplementary Fig. 1), renal and plasmatic and there may be valid reasons for locally stimulating the endothelial B<sub>2</sub>Rs with selectivity, e.g., elicit vasodilation without stimulation of afferent nerve terminals where B<sub>2</sub>Rs are also present. APN is rather widely expressed [24], but is overexpressed during tumoral angiogenesis and in certain tumors [16, 17, 25, 26], raising for instance the possibility to use L-alanyl-histamine as a vasodilator adjuvant to deliver chemotherapeutic agents.

One of the two tested latent H<sub>1</sub>R ligands, L-alanyl-histamine, supported the feasibility of pro-drug activation by vascular ectopeptidases.

## **Authorship**



L.G. designed and synthesized novel pharmacologically active compounds, participated to the general design of the project. C.R. and X.C.-M. executed most experiments. F.M. designed the experiments and drafted the manuscript.

### **Conflict of interest**

The authors have no competing interests for this article.

### **Acknowledgements**

We thank Professor Martin Beaulieu (Québec, Canada) for the gift of  $\beta$ -arrestin<sub>1</sub>-cherry vector and Ms. Johanne Bouthillier for technical help. This work was supported by the grant MOP-93773 from the Canadian Institutes for Health Research.

## References

[1] Hoover TA, Lippmann M, Grouzmann E, Marceau F, Herscu P. Angiotensin converting enzyme inhibitor induced angioedema: a review of the pathophysiology and risk factors. *Clin Exp Allergy* 2010;40:50-61.

[2] Gera L, Roy C, Bawolak MT, Bouthillier J, Adam A, Marceau F. Met-Lys-bradykinin-Ser-Ser, a peptide produced by the neutrophil from kininogen, is metabolically activated by angiotensin converting enzyme in vascular tissue. *Pharmacol Res* 2011 64: 528-34.

[3] Pelorosso FG, Brodsky PT, Zold CL, Rothlin RP. Potentiation of des-Arg<sup>9</sup>-kallidin-induced vasoconstrictor responses by metallopeptidase inhibition in isolated human umbilical artery. *J Pharmacol Exp Ther* 2005;313:1355-60.

[4] Gera L, Fortin JP, Adam A, Stewart JM, Marceau F. Discovery of a dual-function peptide that combines aminopeptidase N inhibition and kinin B<sub>1</sub> receptor antagonism. *J Pharmacol Exp Ther* 2006;317: 300-8.

[5] Leeb-Lundberg LM, Marceau F, Müller-Esterl W, Pettibone DJ, Zuraw BL. International union of pharmacology. XLV. Classification of the kinin receptor family: from molecular mechanisms to pathophysiological consequences. *Pharmacol Rev* 2005; 57: 27-77.

- [6] Bawolak MT, Fortin S, Bouthillier J, Adam A, Gera L, C-Gaudreault R, Marceau F. Effects of inactivation-resistant agonists on the signalling, desensitization and down-regulation of bradykinin B<sub>2</sub> receptors. *Br J Pharmacol* 2009;158:1375-86.
- [7] Bawolak MT, Roy C, Gera L, Marceau F. Prolonged signalling and trafficking of the bradykinin B<sub>2</sub> receptor stimulated with the amphibian peptide maximakinin: Insight into the endosomal inactivation of kinins. *Pharmacol Res* 2012; 65:247-53.
- [8] Gera L, Bawolak MT, Roy C, Lodge R, Marceau F. Design of fluorescent bradykinin analogs: application to imaging of B<sub>2</sub> receptor-mediated agonist endocytosis and trafficking and angiotensin-converting enzyme. *J Pharmacol Exp Ther* 2011; 337: 33-41.
- [9] Gera L, Roy C, Bawolak MT, Charest-Morin X, Marceau F. N-terminal extended conjugates of the agonists and antagonists of both bradykinin receptor subtypes: structure-activity relationship, cell imaging using ligands conjugated with fluorophores and prospect for functionally active cargoes. *Peptides* 2012;34:433-46.
- [10] Fryer RM, Segreti J, Banfor PN, Widomski DL, Backes BJ, Lin CW, Ballaron SJ, Cox BF, Trevillyan JM, Reinhart GA, von Geldern TW. Effect of bradykinin metabolism inhibitors on evoked hypotension in rats: rank efficacy of enzymes associated with bradykinin-mediated angioedema. *Br J Pharmacol* 2008;153: 947-55.

- [11] Gilliard M, Van der Perren C, Moguilevsky N, Massingham R, Chatelain P. Binding characteristics of cetirizine and levocetirizine to human H<sub>1</sub> histamine receptors: contribution of Lys<sup>191</sup> and Thr<sup>194</sup>. *Mol Pharmacol* 2002;61:391-9.
- [12] Lendeckel U, Wex T, Reinhold D, Kähne T, Frank K, Faust J, Neubert K, Ansorge S. Induction of the membrane alanyl aminopeptidase gene and surface expression in human T-cells by mitogenic activation. *Biochem J* 1996; 319: 817-21.
- [13] Altura BM, Malaviya D, Reich CF, Orkin LR. Effects of vasoactive agents on isolated human umbilical arteries and veins. *Am J Physiol* 1972;222:345-55.
- [14] Marceau F, deBlois D, Petitclerc E, Levesque L, Drapeau G, Audet R, Godin D, Larrivée JF, Houle S, Sabourin T, Fortin JP, Morissette G, Gera L, Bawolak MT, Koumbadinga GA, Bouthillier J. Vascular smooth muscle contractility assays for inflammatory and immunological mediators. *Int Immunopharmacol* 2010;10:1344-53.
- [15] Koumbadinga GA, Bawolak MT, Marceau E, Adam A, Gera L, Marceau F. A ligand-based approach to investigate the expression and function of angiotensin converting enzyme in intact human umbilical vein endothelial cells. *Peptides* 2010;31:1546-54.
- [16] Fukasawa K, Fujii H, Saitoh Y, Koizumi K, Aozuka Y, Sekine K, Yamada M, Saiki I, Nishikawa K. Aminopeptidase N (APN/CD13) is selectively expressed in vascular endothelial cells and plays multiple roles in angiogenesis. *Cancer Lett* 2006;243:135-43

- [17] Di Matteo P, Arrigoni GL, Alberici L, Corti A, Gallo-Stampino C, Traversari C, Doglioni C, Rizzardi GP. Enhanced expression of CD13 in vessels of inflammatory and neoplastic tissues. *J Histochem Cytochem* 2011;59:47-59.
- [18] Supuran CT, Scozzafava A. Carbonic anhydrase activators: amino acyl/dipeptidyl histamine derivatives bind with high affinity to Isozymes I, II and IV and act as efficient activators. *Bioorg Med Chem* 1999;7:2915-23.
- [19] Pruneau D, Paquet JL, Luccarini JM, Defrêne E, Fouchet C, Franck RM, Loillier B, Robert C, Bélichard P, Duclos H, Cremers B, Dodey P. Pharmacological profile of LF 16-0687, a new potent non peptide bradykinin B<sub>2</sub> receptor antagonist. *Immunopharmacology* 1999;43:187-94.
- [20] Bawolak MT, Gera L, Morissette G, Stewart JM, Marceau F. B-9972 (D-Arg-[Hyp<sup>3</sup>,Igl<sup>5</sup>,Oic<sup>7</sup>,Igl<sup>8</sup>]-bradykinin) is an inactivation-resistant agonist of the bradykinin B<sub>2</sub> receptor derived from the peptide antagonist B-9430 (D-Arg-[Hyp<sup>3</sup>,Igl<sup>5</sup>,D-Igl<sup>7</sup>,Oic<sup>8</sup>]-bradykinin): pharmacologic profile and effective induction of receptor degradation. *J Pharmacol Exp Ther* 2007;323:534-46.
- [21] Sibony M, Segretain D, Gasc JM. Angiotensin-converting enzyme in murine testis: step-specific expression of the germinal isoform during spermiogenesis. *Biol Reprod* 1994;50:1015-26.
- [22] Morissette G, Petitclerc E, Marceau F. Loss of function of vascular smooth muscle cells by nitric oxide-dependent and -independent interactions with tumorigenic cells. *Int J Cancer* 2004;112:830-39.

[23] Munoz CM, Leeb-Lundberg LM. Receptor-mediated internalization of bradykinin. DDT1 MF-2 smooth muscle cells process internalized bradykinin via multiple degradative pathways. *J Biol Chem* 1992;267:303-9.

[24] Jardinaud F, Banisadr G, Noble F, Mélik-Parsadaniantz S, Chen H, Dugave C, Laplace H, Rostène W, Fournié-Zaluski MC, Roques BP, Popovici T. Ontogenic and adult whole body distribution of aminopeptidase N in rat investigated by in vivo autoradiography. *Biochimie* 2004;86:105-13.

[25] Alberici L, Roth L, Sugahara KN, Agemy L, Kotamraju VR, Teesalu T, Bordignon C, Traversari C, Rizzardì GP, Ruoslahti E. De novo design of a tumor-penetrating peptide. *Cancer Res* 2013;73:804-12.

[26] Schmitt C, Voegelin M, Marin A, Schmitt M, Schegg F, Hénon P, Guenot D, Tarnus C. Selective aminopeptidase-N (CD13) inhibitors with relevance to cancer chemotherapy. *Bioorg Med Chem* 2013; in press. doi: 10.1016/j.bmc.2012.12.038.

Table 1. Parameters of concentration-effect curves generated by contractility experiments in rings of human umbilical veins (experiments reported in Fig. 5B).

pre-treatment (2.5 h)	agonist (3 h)	parameters	
		EC <sub>50</sub> (μM)	EC <sub>50</sub> 95% C.L.
saline vehicle	histamine	0.13	0.09-0.20
amastatin 3 μM	histamine	0.19	0.10-0.36
saline vehicle	L-alanyl-histamine	54.7	40.2-74.5
amastatin 3 μM	L-alanyl-histamine	916	739-1136

## Fig. legends

Fig. 1. Structure of the tested prodrugs and potential enzymatic reactions that may release H<sub>1</sub>R ligands from them. A. Cetirizine- $\epsilon$ -aminocaproyl-BK (CTZ- $\epsilon$ ACA-BK), a known BK B<sub>2</sub>R agonist. B. L-Alanyl-histamine. Some of the arrows indicate putative hydrolysis sites by enzymes (ACE: angiotensin converting enzyme; NEP: neutral endopeptidase; APN: aminopeptidase N).

Fig. 2. Radioligand binding assays to CHO cells transiently expressing recombinant receptors (human histamine H<sub>1</sub>R or bradykinin myc-B<sub>2</sub>R, as indicated). A. Saturation of [<sup>3</sup>H]pyrilamine binding. B. Saturation of [<sup>3</sup>H]BK binding. C. Competition of [<sup>3</sup>H]pyrilamine (2 nM) binding to H<sub>1</sub>R by a panel of unlabeled agents. D. Competition of [<sup>3</sup>H]bradykinin (3 nM) binding to myc-B<sub>2</sub>R by a panel of unlabeled agents. Specific binding values (either fmol/well or percent of control) are the means  $\pm$  S.E.M. of the number of duplicate determinations indicated by *n*. Derived numerical affinity estimates are reported in Results.

Fig. 3. Endosomal condensation of  $\beta$ -arrestin<sub>1</sub>-cherry in CHO cells that expressed either H<sub>1</sub>R or myc-B<sub>2</sub>R. Cells were stimulated for 30 min as indicated (red epifluorescence, 1000  $\times$ ). Histograms at the right represent the proportion of cells with robust endosomal labeling for cells expressing either H<sub>1</sub>R (white bars) or myc-B<sub>2</sub>R (grey ones). Numbers at the right of histograms represent the numbers of cells evaluated during several days of experiment.  $\chi^2$  statistics: only proportions significantly different from control ones were indicated with a P value.



Fig. 4. Competition of [<sup>3</sup>H]pyrilamine (2 nM) binding to H<sub>1</sub>R by a panel of conditioned media prepared to reveal the metabolic activation of the latent antihistamine activity of CTZ-εACA-BK. A. Media transferred from untreated or CTZ-εACA-BK-treated HEK 293 cells that stably expressed B<sub>2</sub>R-GFP. B. Media transferred from untreated or drug-treated HEK 293a cells that transiently expressed ACE. Presentation as in Fig. 2.

Fig. 5. Pharmacology and metabolic activation of L-alanyl-histamine. A. Competition of [<sup>3</sup>H]pyrilamine (2 nM) binding to H<sub>1</sub>R expressed in CHO cells by histamine and its derivative. Presentation as in Fig. 2C. B. Cumulative concentration-effect curves constructed for histamine or L-alanyl-histamine (separate tissues pretreated or not with amastatin 3 μM). A maximal concentration of histamine (1 mM) was added at the end of the curves constructed with L-alanyl-histamine to evaluate the full effect mediated by endogenous H<sub>1</sub>Rs. Values are expressed as the % of the maximal histamine-induced maximal contractile response in each tissue and are means ± s.e.m. of 4 determinations in separate tissues. The curve parameters computed from the data (EC<sub>50</sub>, C.L.) are reported in Table 1.

Figure 1

Fig. 1

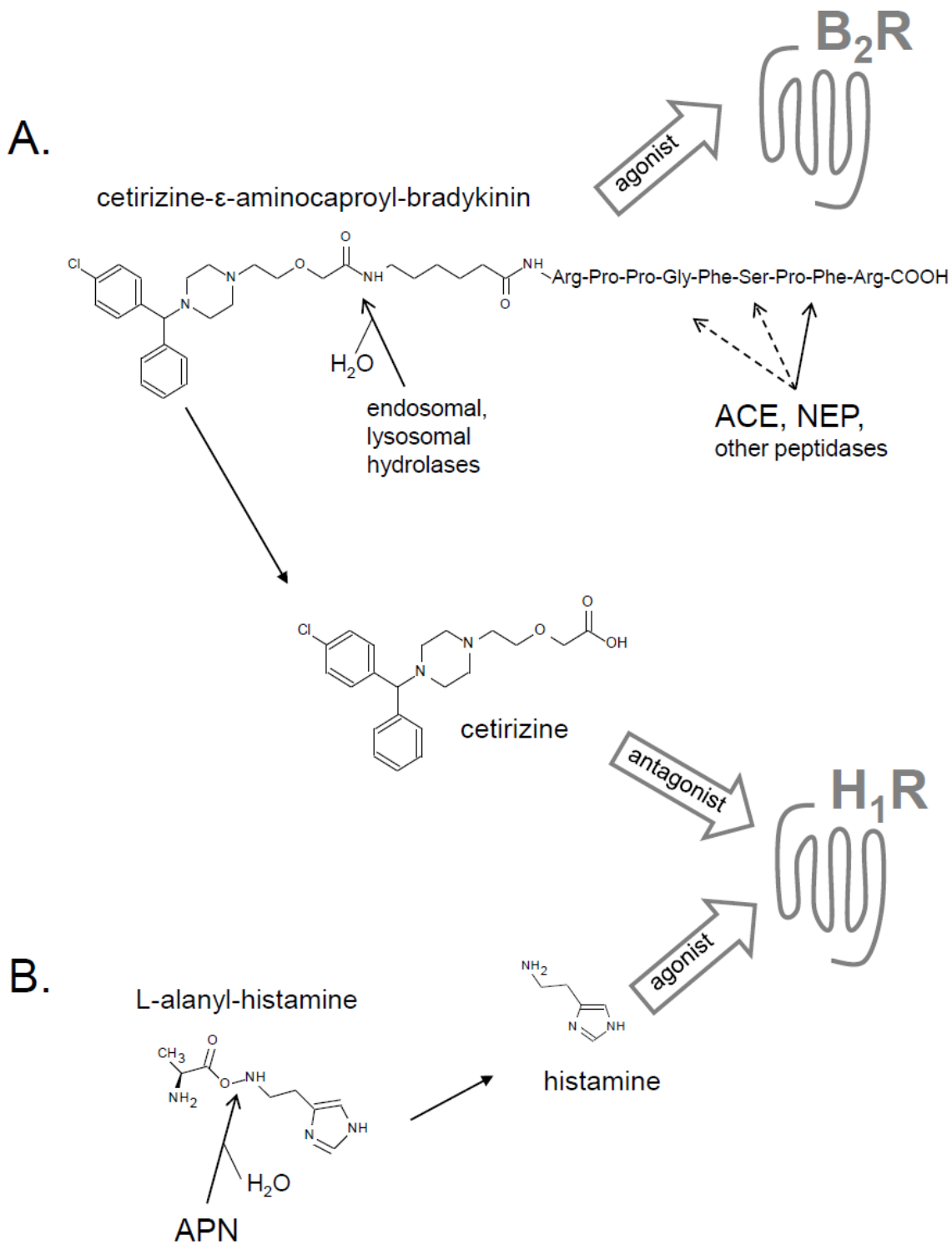
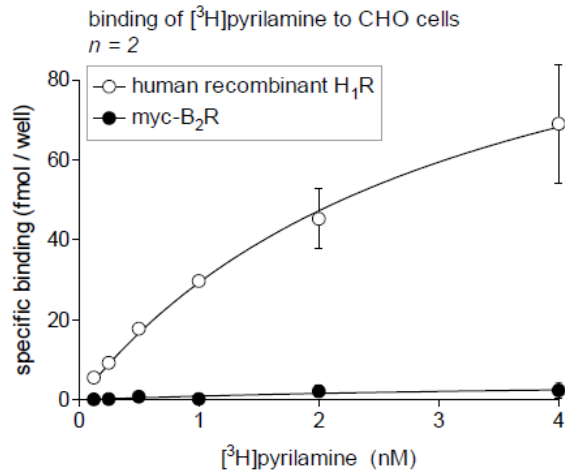


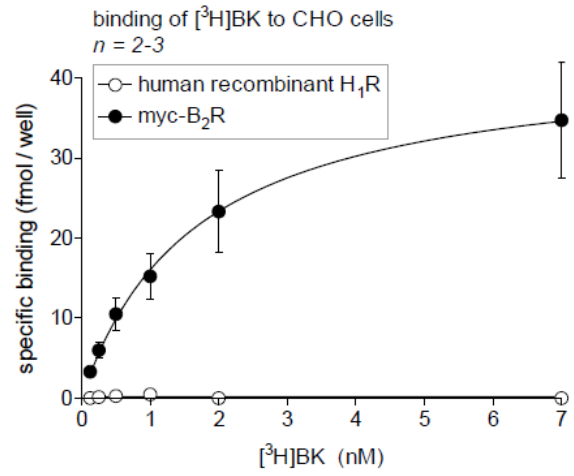
Figure 2

Fig. 2

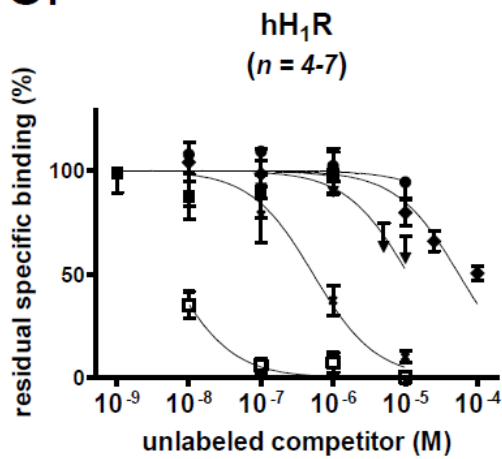
A.



B.



C.



D.

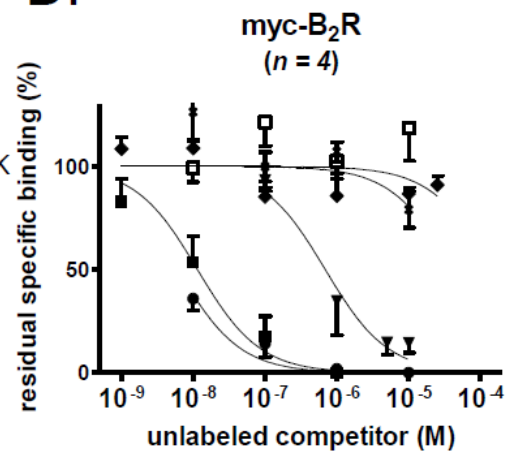


Figure 3

$\beta$ -arrestin<sub>1</sub>-mCherry + →

H<sub>1</sub>R

myc-B<sub>2</sub>R

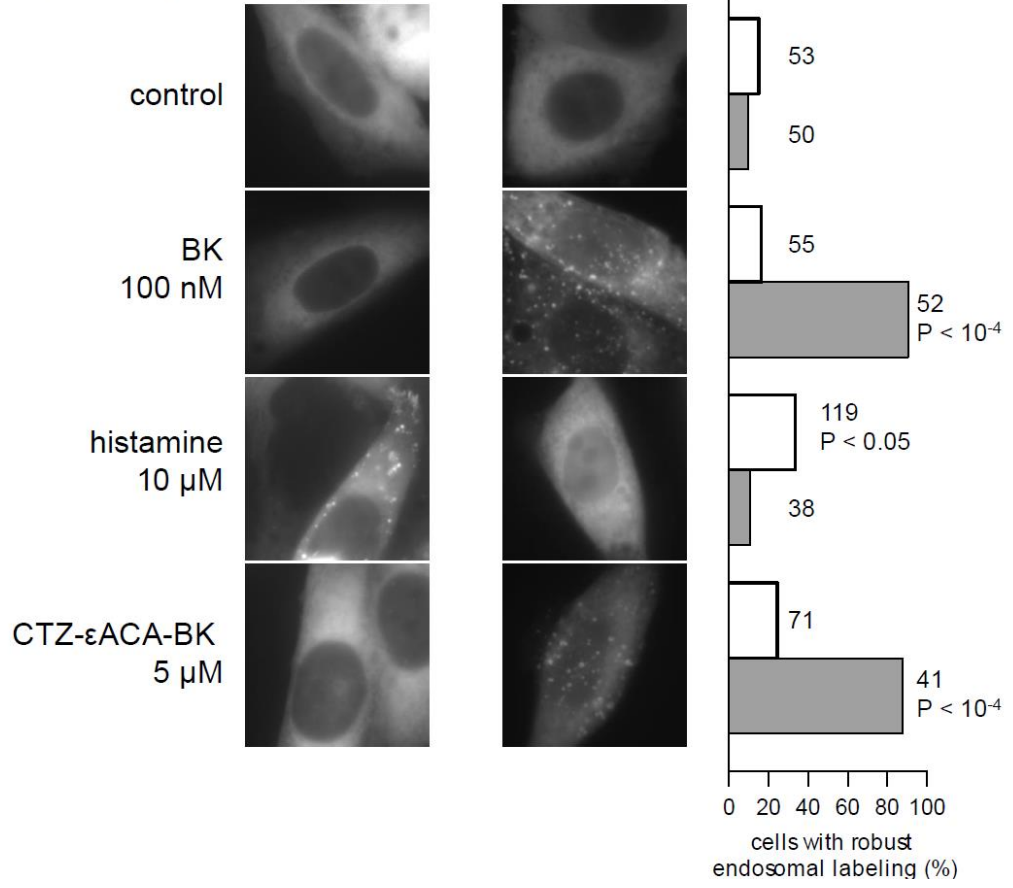


Fig. 3

Figure 4

Fig. 4

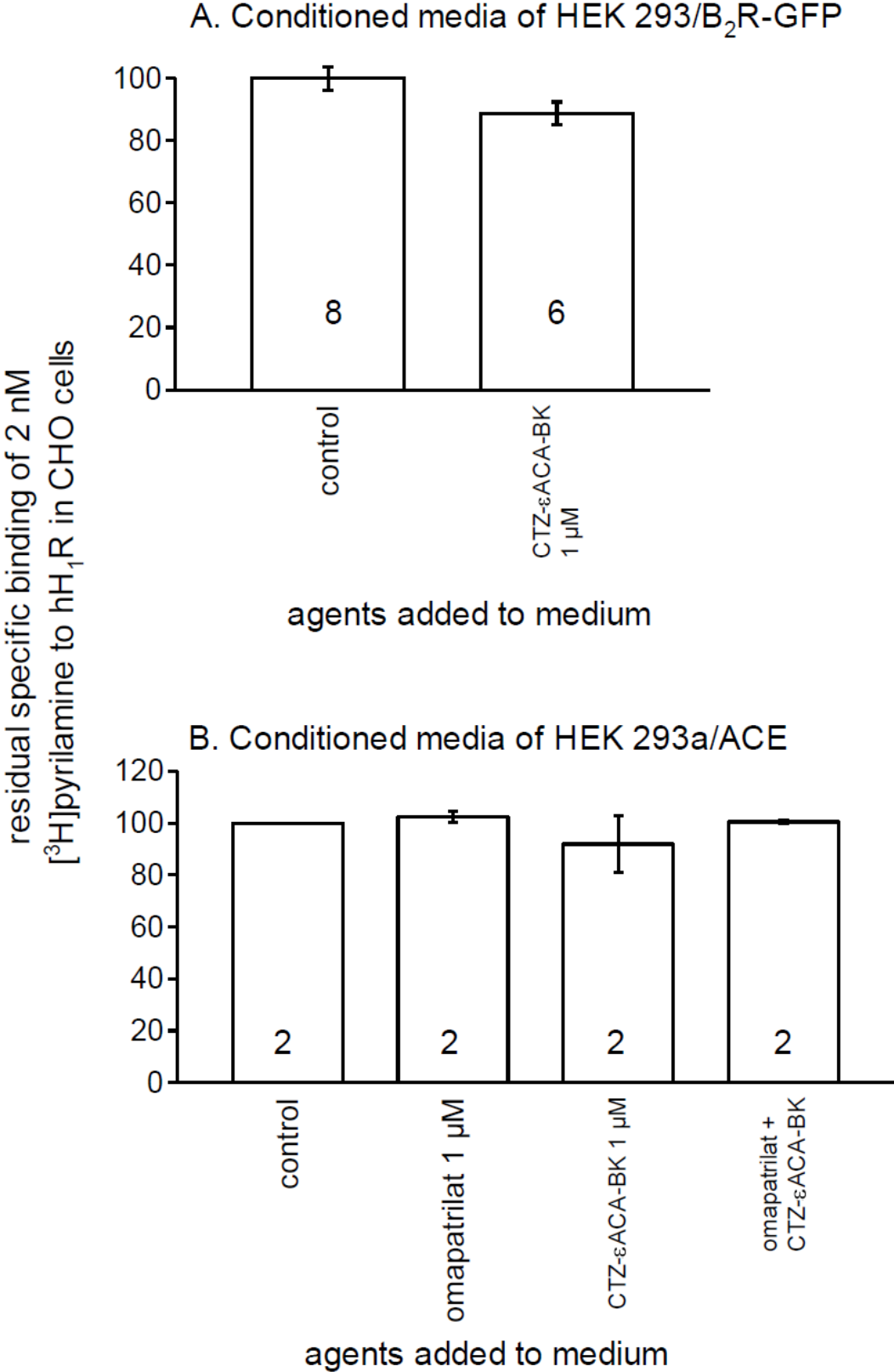
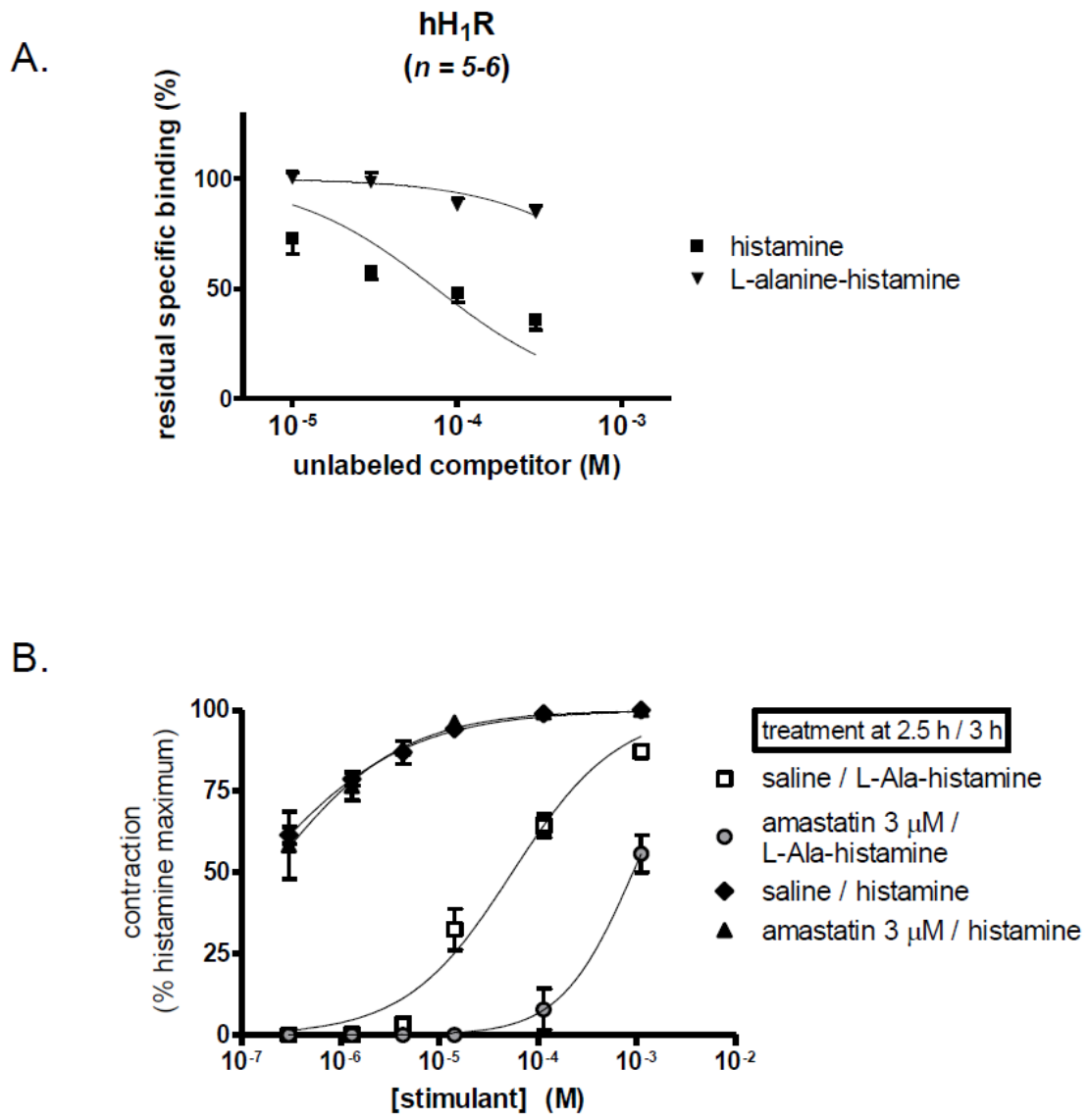


Figure 5

Fig. 5



## **Supplementary material to Gera et al., Vasopeptidase-activated latent ligands of the histamine receptor-1**

*Supplementary Results: Lack of evidence for the metabolic activation of CTZ- $\epsilon$ ACA-BK in the isolated human umbilical vein*

The contractility assay exploited in the present studies is based on the human umbilical vein. ACE was identified essentially at the luminal surface of venous tissue section (immunofluorescence, Supplementary Fig. 1) consistent with the endothelial expression of this ectopeptidase.

Amino peptidase N seemed expressed by both the endothelium, as previously reported for cultured human umbilical vein endothelial cells [16], and the smooth muscle cells, although generally less intensely in the latter case (the muscle cell layer can be identified by comparison with cells positive for  $\alpha$ -actin, Supplementary Fig. 1).

The fresh rings of umbilical veins were allowed 2.5 h of equilibration post-mounting in organ tissues baths. Protocol I (schematic representation in Supplementary Fig. 2A) was designed to verify that authentic cetirizine (25 nM) antagonized histamine-induced contraction (concentration-effect curve constructed at time 4 h) without affecting that induced by BK (curve constructed at 3 h). This prediction was fully verified, the apparent potency of histamine being reduced 50-fold without a significant loss of the extrapolated maximal effect (Supplementary Fig. 2B, C;  $EC_{50}$  and  $E_{max}$  statistics reported in Supplementary Table 1).

Whether CTZ- $\epsilon$ ACA-BK could antagonize histamine in the vein contractility was then tested (Protocol II, schematically represented in Supplementary Fig. 3A; results in Supplementary Fig. 3B

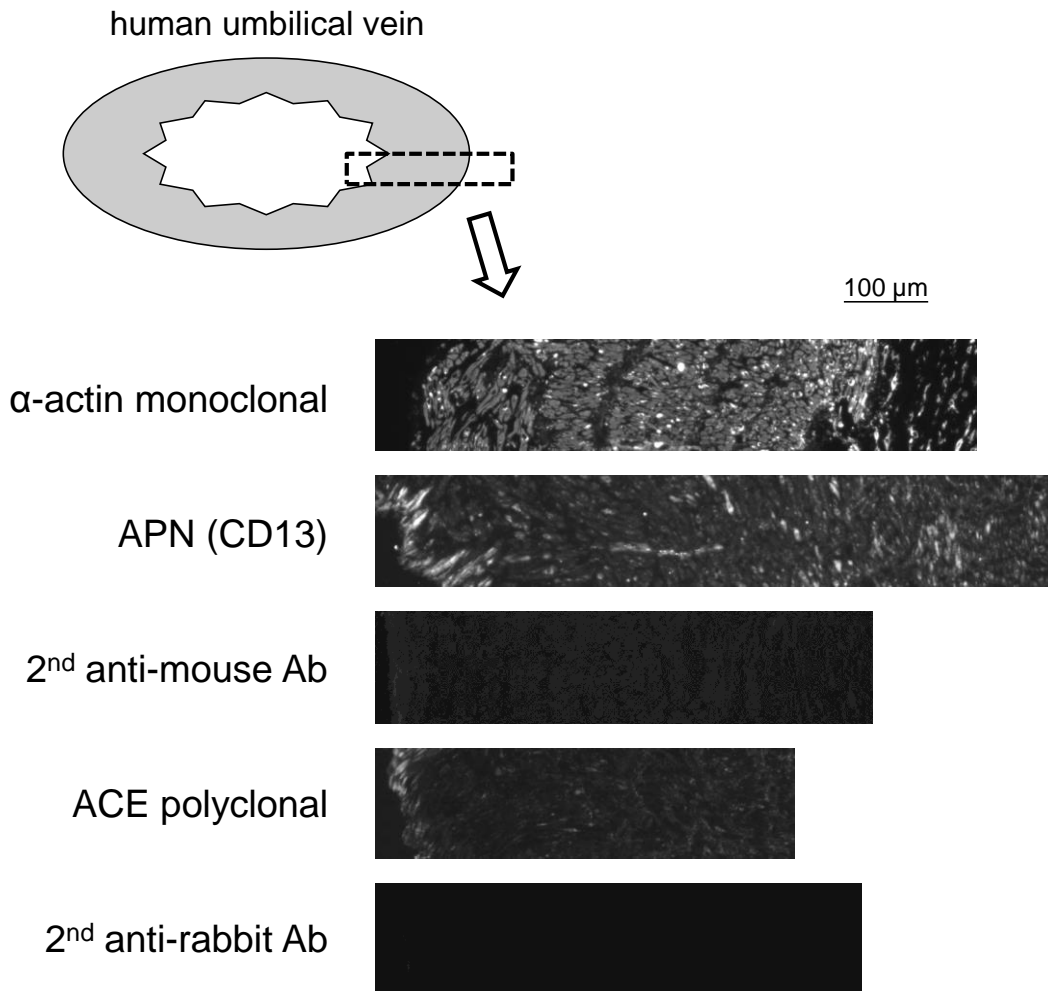
and Supplementary Table 2). LF16-0687, a potent nonpeptide B<sub>2</sub>R antagonist, was present in all tissues to isolate effects on H<sub>1</sub>Rs from B<sub>2</sub>R-dependent effects, such as contraction or endocytosis of the ligand (LF16-0687 inhibits the endocytosis of a comparable agonist, carboxyfluorescein- $\epsilon$ ACA-BK; [8]). At the relatively low concentration of 0.59  $\mu$ M, CTZ- $\epsilon$ ACA-BK shifted the concentration-effect curve of histamine to the right by 6.6-fold (compare experimental conditions A and B in Supplementary Fig. 3B). This significant B<sub>2</sub>R-independent antagonism is compatible with either an extracellular release of cetirizine from CTZ- $\epsilon$ ACA-BK in the venous tissues or with a direct effect of the conjugated peptide at H<sub>1</sub>Rs. Additional experimental conditions in Protocol II were included to address the possible activation of the latent anti-histamine properties of CTZ- $\epsilon$ ACA-BK by kininases naturally expressed in vascular tissues. Omapatrilat has been designed to block both BK-destroying peptidases angiotensin converting enzyme (ACE) and neutral endopeptidase (NEP) with nanololar affinities [9]. This inhibitor did not abate the antagonism of histamine exerted by CTZ- $\epsilon$ ACA-BK. Thus, results do not support the metabolic activation of the antihistamine properties of the peptide.

Stimulation of venous tissue with CTZ- $\epsilon$ ACA-BK should lead to the endocytosis of the peptide conjugate via endogenous B<sub>2</sub>Rs with possible hydrolysis and release of free cetirizine in the endosomes and diffusion to cell surface H<sub>1</sub>Rs. This was tested using contractility protocol III (Supplementary Fig. 4A) where the B<sub>2</sub>R antagonist LF16-0687 was optionally used to inhibit B<sub>2</sub>R-mediated endocytosis of the conjugated peptide. These experiments exploited a larger concentration of the conjugated peptide (5.9  $\mu$ M) or a BK concentration (3.3 nM) that are both submaximal in the venous contraction assay [8]. Thus, precontraction of tissues with CTZ- $\epsilon$ ACA-BK at time 3 h followed by ample washout was associated with the antagonism of histamine at time 4 h (Supplementary Fig. 4B, Supplementary Table 2). Pretreatment of tissues with LF16-0687 virtually



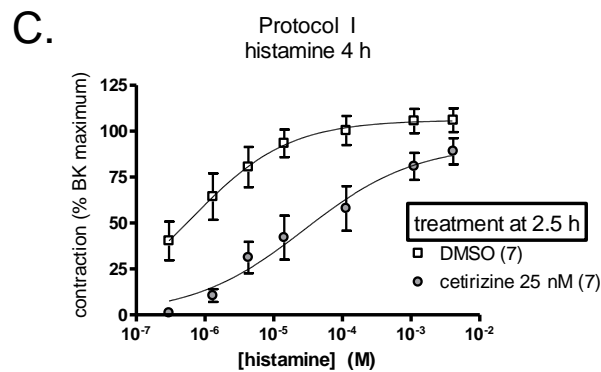
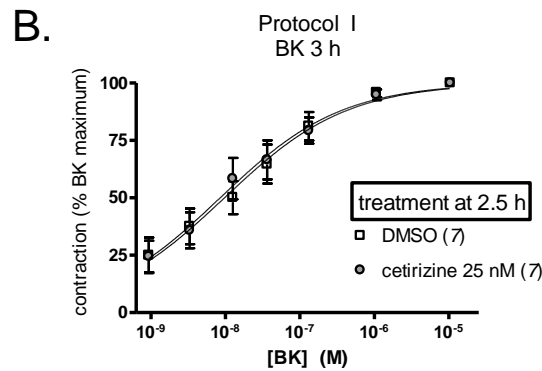
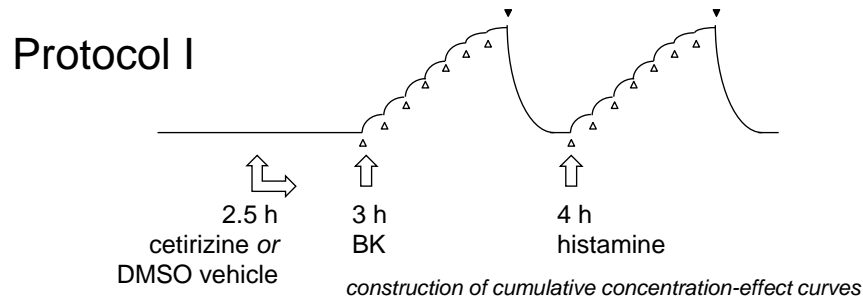
abolished CTZ- $\epsilon$ ACA-BK-induced contraction (Supplementary Fig. 4C), but did not influence the persistent antagonism of histamine (Supplementary Fig. 4B, C, Supplementary Table 2).

Precontraction of tissues with BK was abolished by LF16-0687 (Supplementary Fig. 4C), but BK, associated or not with LF16-0687, did not influence the apparent potency of histamine (compare experimental conditions C and D in Supplementary Fig. 4B with the effect of histamine in the control group of Supplementary Fig. 3B). Thus, tissues once exposed to CTZ- $\epsilon$ ACA-BK, whether the B<sub>2</sub>R was blocked or not, exhibited persistent antagonism of histamine. These observations did not support the metabolic release of free cetirizine via B<sub>2</sub>R-mediated endocytosis of the conjugated peptide.

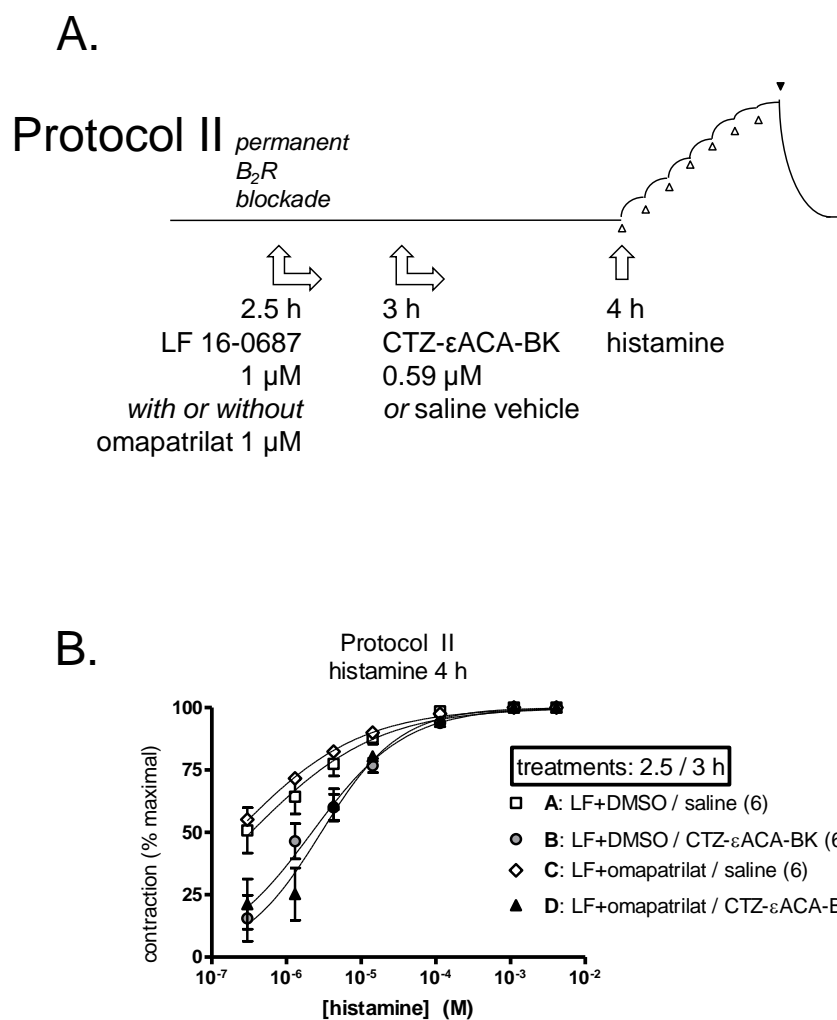


Supplementary Fig. 1. Immunofluorescence of ACE and aminopeptidase N (APN) in sections of the human umbilical vein. The intimal direction is at the left of images. Controls for identifying contractile smooth muscle cells using anti- $\alpha$  actin antibodies and for non-specific staining by secondary antibodies alone were included.

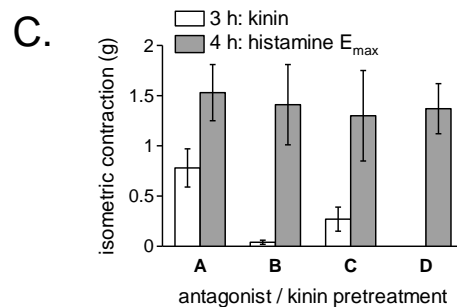
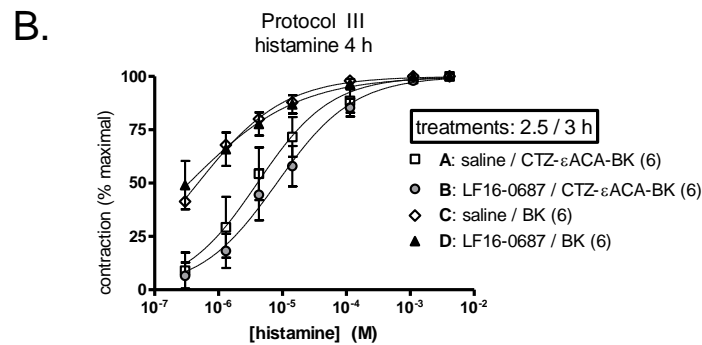
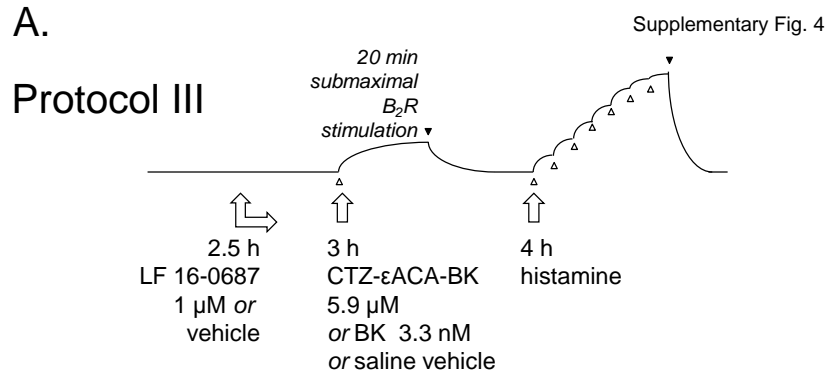
## A. Human umbilical vein contractility:



Supplementary Fig. 2. A. Schematic representation of the protocol I used to analyze the contractile response to BK and histamine in rings of human umbilical veins. Imaginary tracings illustrate contraction (vertical axis) as a function of time (horizontal axis). Indicated time points are relative to tissue mounting in organ baths. Open arrowheads indicate the injection of contractile agonists; closed arrowheads, the first of a series of stimulant washouts. B, C. Cumulative concentration-effect curves constructed for BK (B) and histamine (C) in protocol I. Values are expressed as the % of the maximal BK-induced maximal contractile response in each tissue and are means  $\pm$  s.e.m. of the number of determinations indicated between parentheses.



Supplementary Fig. 3. A. Schematic representation of the protocol II used to attempt the generation of an anti-histamine activity from ectopeptidase-mediated degradation of CTZ-εACA-BK in rings of human umbilical veins. Presentation as in Supplementary Fig. 1A. B. Cumulative concentration-effect curves constructed for histamine in protocol II (values are expressed as the % of the maximal histamine-induced maximal contractile response in each tissue and are means  $\pm$  s.e.m. of the number of determinations indicated between parentheses). The groups of tissues corresponding to the combination of successive treatments are indicated either by a letter (A-D) as in panel C. The curve parameters computed from the data ( $EC_{50}$ ,  $E_{max}$ ) are reported in Supplementary Table 1.



Supplementary Fig. 4. A. Schematic representation of the protocol III used to attempt the generation of an anti-histamine activity from  $B_2R$ -mediated internalization and endosomal degradation of CTZ- $\epsilon$ ACA-BK in rings of human umbilical veins. Presentation as in Supplementary Fig. 1A. B. Cumulative concentration-effect of histamine constructed at time 4 h as a function of successive pretreatments (presentation as in Supplementary Fig. 2B). C. In experiments reported in panel B, the results of the maximal histamine-induced contraction ( $E_{max}$ , in g) did not differ between groups, but that of a kinin measured at 3.5 h was virtually abolished by pretreatment with LF16-0687 (column A vs. B:  $P < 0.01$ ; column C. vs. D:  $P < 0.05$ ; Mann-Whitney test). The groups of tissues corresponding to the combination of successive treatments are indicated by a boldface letter (A-D) as in panel B.

Supplementary Table 1. Parameters of concentration-effect curves generated by contractility experiments in rings of human umbilical veins.

Treatment 2.5 h	BK (3 h)		histamine (4 h)			
<b>Protocol I</b>	EC <sub>50</sub> (nM)	EC <sub>50</sub> 95% C.L.	EC <sub>50</sub> (μM)	EC <sub>50</sub> 95% C.L.	E <sub>max</sub> (% BK max)	E <sub>max</sub> 95% C.L.
DMSO	9.7	5.9-15.9	0.56	0.28-1.52	106.1	93.4-118.7
cetirizine 25 nM	8.5	5.1-14.1	28.1	5.00-157	62.9	67.1-118.7

Supplementary Table 2. Parameters of the concentration-effect curves generated for histamine by protocols II and III in rings of human umbilical veins.

	Treatment 2.5 h	Treatment 3 h	histamine (4 h)	
			EC <sub>50</sub> ( $\mu$ M)	EC <sub>50</sub> 95% C.L.
Protocol II	A: LF16-0687 1 $\mu$ M + DMSO	saline	0.33	0.18-0.62
	B: LF16-0687 1 $\mu$ M + DMSO	CTZ- $\epsilon$ ACA-BK 0.59 $\mu$ M	2.20	1.57-3.08
	C: LF16-0687 1 $\mu$ M + omapatrilat 1 $\mu$ M	saline	0.21	0.12-0.37
	C: LF16-0687 1 $\mu$ M + omapatrilat 1 $\mu$ M	CTZ- $\epsilon$ ACA-BK 0.59 $\mu$ M	2.93	2.01-4.25
Protocol III	A: saline	CTZ- $\epsilon$ ACA-BK 5.9 $\mu$ M	4.05	2.34-7.03
	B: LF16-0687 1 $\mu$ M	CTZ- $\epsilon$ ACA-BK 5.9 $\mu$ M	8.16	5.13-12.97
	C: saline	BK 3.3 nM	0.48	0.35-0.65
	D: LF16-0687 1 $\mu$ M	BK 3.3 nM	0.34	0.16-0.72