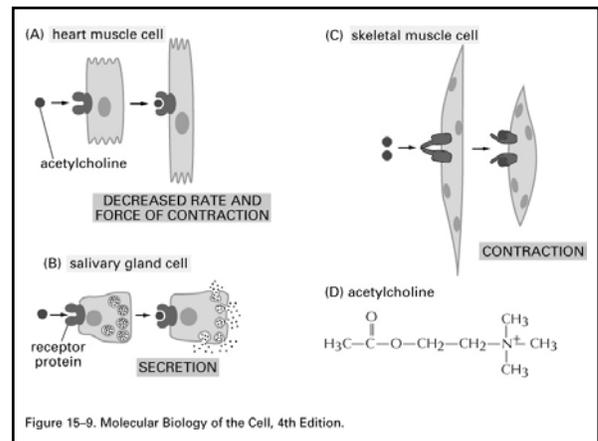
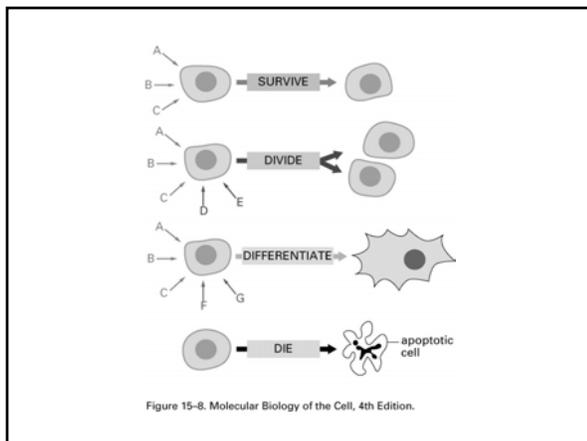
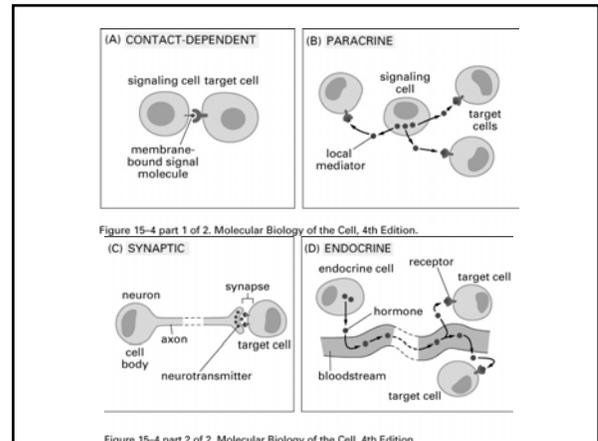
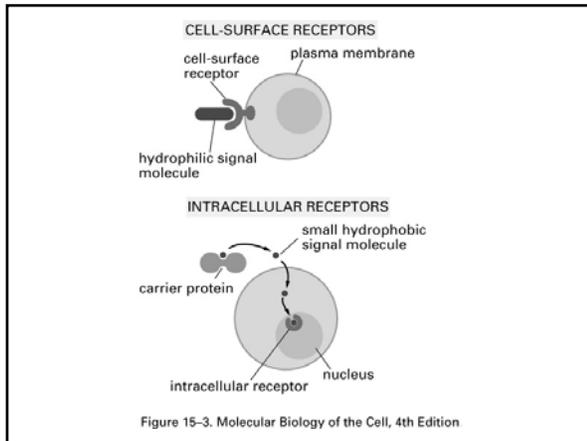
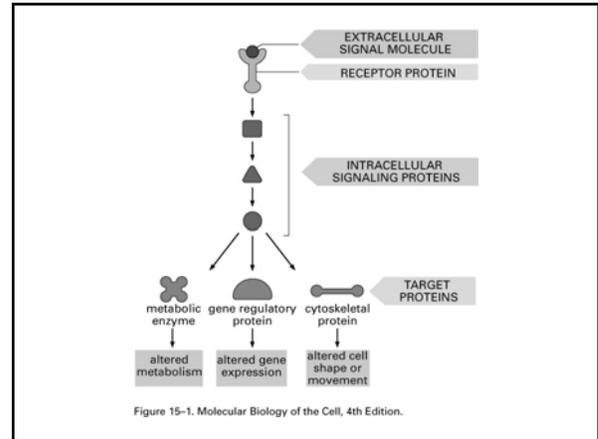
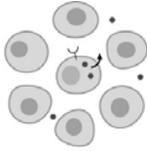


Paracrine signals

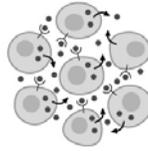
- Proteins, lipids that diffuse short distances
- Include growth factors and cytokines
- Secreted or synthesized as membrane-bound precursor (pro-peptide) that is proteolytically processed to produce soluble signal molecule
- Interact with cell surface receptors on target cell to induce a response
- Among the hundreds of known paracrine signals, several major families include:
 - Fibroblast growth factor (FGF)
 - Epidermal growth factor (EGF)
 - Hedgehog
 - Wnt
 - TGF- β (Transforming Growth factor)
- The names usually do not reflect the wide array of functions each growth factor performs
- Many growth factors can induce different responses in different cells. The response is controlled by the responding cell.



Autocrine signalling



A SINGLE SIGNALING CELL RECEIVES A WEAK AUTOCRINE SIGNAL



IN A GROUP OF IDENTICAL SIGNALING CELLS, EACH CELL RECEIVES A STRONG AUTOCRINE SIGNAL

Figure 15-6. Molecular Biology of the Cell, 4th Edition.

Signals are not always diffusible but may be membrane bound or a part of the extracellular matrix

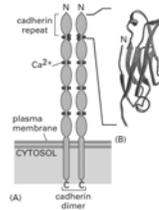


Figure 19-24 part 1 of 2. Molecular Biology of the Cell, 4th Edition.

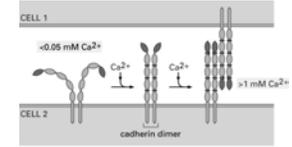


Figure 19-24 part 2 of 2. Molecular Biology of the Cell, 4th Edition.

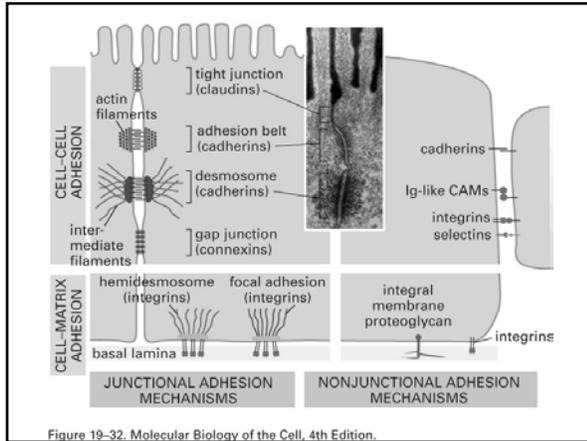


Figure 19-32. Molecular Biology of the Cell, 4th Edition.

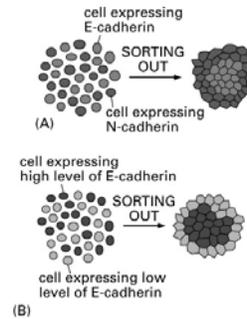


Figure 19-27. Molecular Biology of the Cell, 4th Edition

The inflammatory response

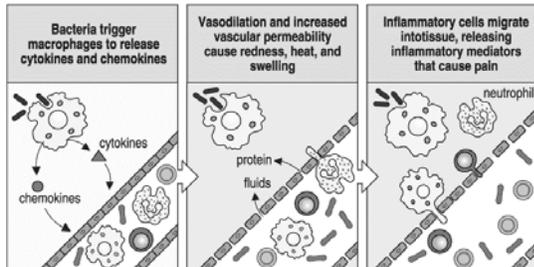
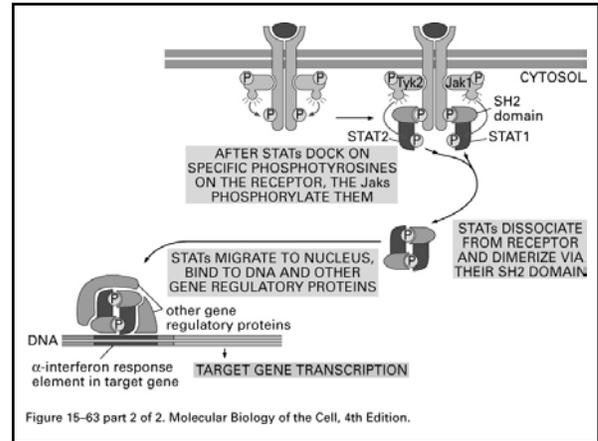
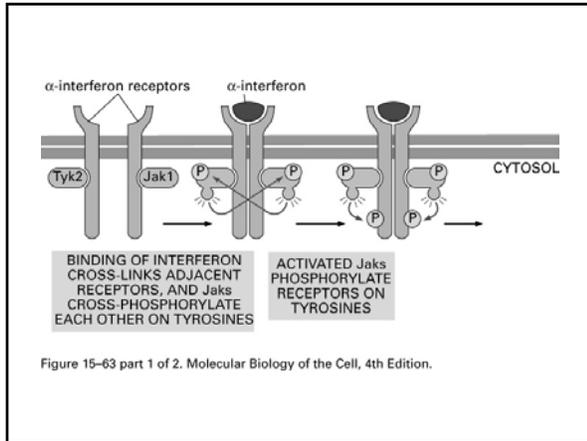


Fig 1.12 © 2001 Garland Science

Eosinophils secrete a range of inflammatory mediators

Class of product	Examples	Biological effects
Enzyme	Eosinophil peroxidase	Toxic to targets by catalyzing halogenation Triggers histamine release from mast cells
	Eosinophil collagenase	Remodels connective tissue matrix
Toxic protein	Major basic protein	Toxic to parasites and mammalian cells Triggers histamine release from mast cells
	Eosinophil cationic protein	Toxic to parasites
	Eosinophil-derived neurotoxin	Neurotoxin
Cytokine	IL-3, IL-5, GM-CSF	Amplify eosinophil production by bone marrow Cause eosinophil activation
Chemokine	IL-8	Promotes influx of leukocytes
Lipid mediator	Leukotrienes C4, D4, E4	Cause smooth muscle contraction Increase vascular permeability Increase mucus secretion
	Platelet-activating factor	Attracts leukocytes Amplifies production of lipid mediators Activates neutrophils, eosinophils, and platelets

Fig 12.12 © 2001 Garland Science



Eicosanoids

- Family of biological signaling molecules
- Act as short-range messengers
- Derived from polyunsaturated eicosanoic acids, e.g. arachidonate [20: 4; ($\Delta^{5,8,11,14}$)]
- Family includes:
 - Prostaglandins
 - Leukotrienes
 - Intermediates HPETE and HETE

HPETE = hydro-peroxy-eicosa-tetra-enoic acid
 HETE = hydroxy-eicosa-tetra-enoic acid

Prostaglandin / thromboxane synthesis

- “CYCLIC PATHWAY”
- **Phospholipase A₂** mediated hydrolysis of arachidonate from the 2-position of a membrane phospholipid.
- Bifunctional **prostaglandin H2 synthase (PGHS)** aka **cyclooxygenase (COX)**:
 - (A) cyclooxygenase activity
 - (B) peroxidase activity (requires glutathione)

How NSAIDs work

- NSAIDs = **nonsteroidal anti-inflammatory drugs** (aspirin, acetomenophen, ibuprofen, naproxen)
- Aspirin (acetylsalicylate) **irreversibly** inhibits the cyclooxygenase activity of COX
- Ibuprofen inhibits the same reaction probably by mimicking the substrate.

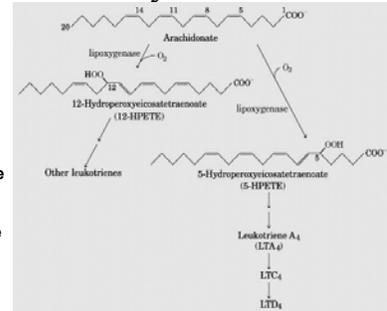
- Aspirin controlled thromboxane synthesis
 - Thromboxanes
 - induce constriction of blood vessels
 - Are generated from PGH₂ via **thromboxane synthase**, which is present in platelets (thrombocytes)
- New “aspirin-derivatives” without side effects
 - COX-1 expressed in stomach, -> regulation of gastric mucin via prostaglandins
 - COX-2 (bad “COX”) inducible isoform in inflammatory cells and immune cells
- Aspirin induced asthma (AIA)
 - Asthma = invasion by inflammatory cells

Leukotriene synthesis

- “LINEAR PATHWAY”

- Not inhibited by NSAIDs
- Lipoxygenases
- convert arachidonate to leukotrienes
- present in leukocytes, heart, brain, lung, spleen
- also present in plants

Leukotriene synthesis

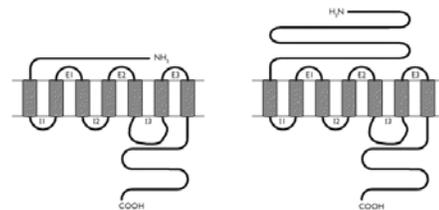


- Q: Is lipoxygenase
- an oxidase
 - a monooxygenase
 - a dioxygenase
 - a cyclooxygenase
 - a dehydrogenase
 - peroxidase

Prostanoid receptors

- Prostanoids exert their actions via membrane receptors on the surface of target cells [Narumiya et al., 1999]. We cloned a family of eight types and subtypes of the prostanoid receptors conserved in mammals from mouse to human. They are the PGD receptor (DP), four subtypes of the PGE receptor EP1, EP2, EP3, and EP4, the PGF receptor (FP), PGI receptor (IP) and TXA receptor (TP). They all are G protein-coupled rhodopsin-type receptors with seven transmembrane domains. Using homologous recombination, we have generated mice deficient in each of the prostanoid receptors individually, and subjected them to various models of human diseases.

General structure for eicosanoid receptors



Making a “knockout mouse”

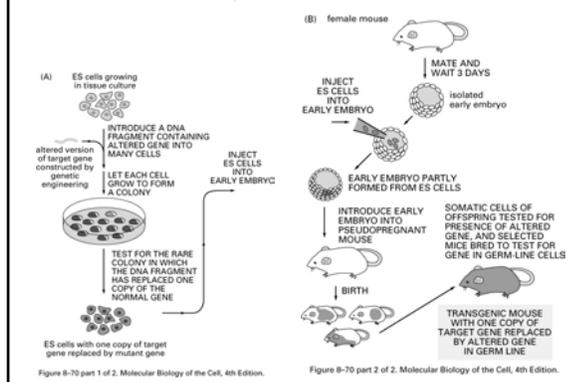
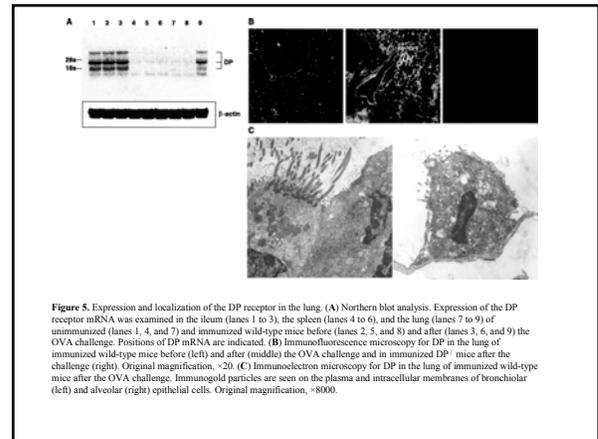
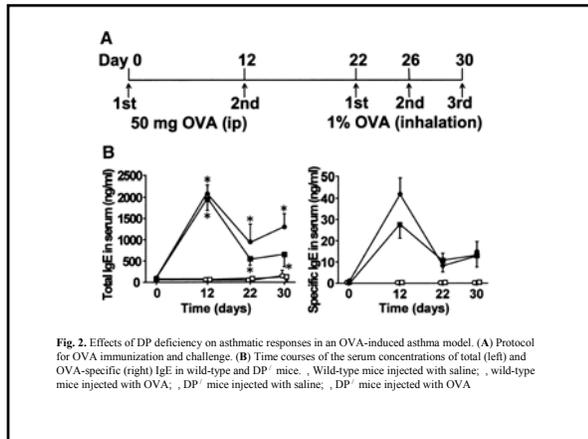
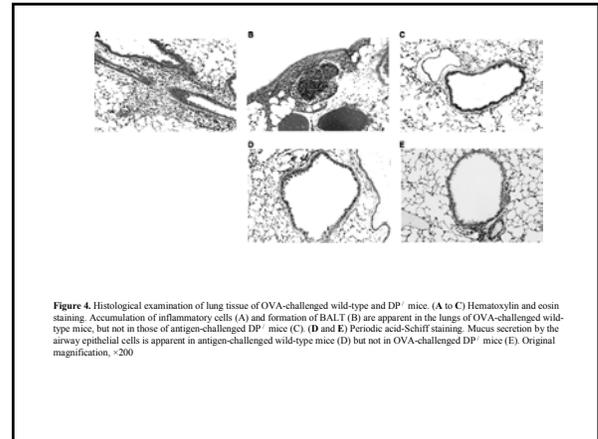
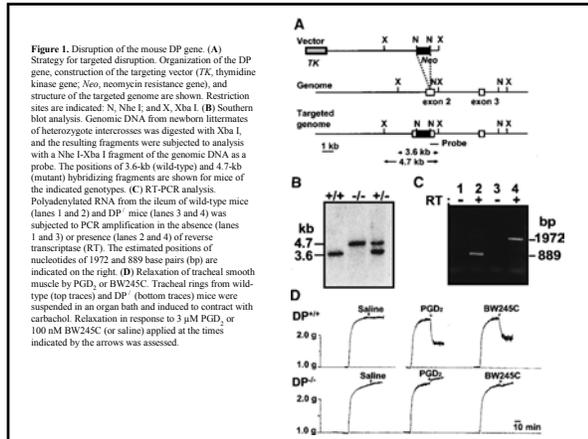


Figure 8-71. Molecular Biology of the Cell, 4th Edition.

Figure 8-71 Mouse with an engineered defect in fibroblast growth factor 5 (FGF5).

FGF5 is a negative regulator of hair formation. In a mouse lacking FGF5 (*right*), the hair is long compared with its heterozygous littermate (*left*). Transgenic mice with phenotypes that mimic aspects of a variety of human disorders, including Alzheimer’s disease, atherosclerosis, diabetes, cystic fibrosis, and some type of cancers, have been generated. Their study may lead to the development of more effective treatments. (Courtesy of Gail Martin, from J.M. Hebert et al., *Cell* 78:1017–1025, 1994. © Elsevier.)

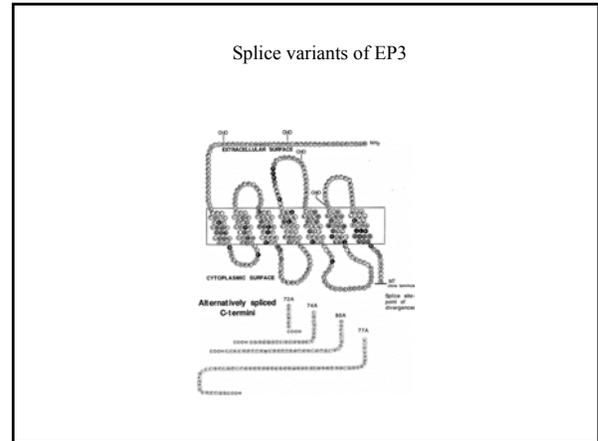
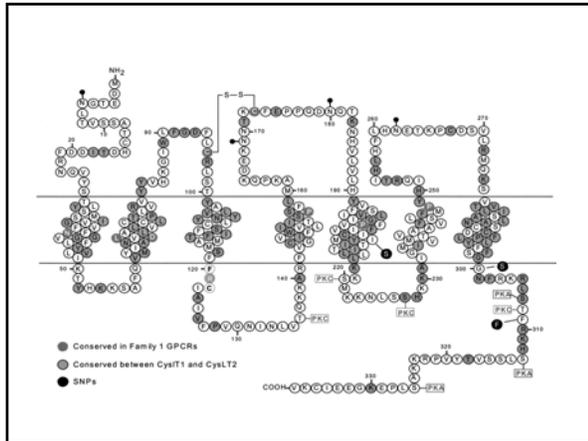


EP4^{-/-} and skin

- Immune response in the skin is triggered by uptake of exposed antigens by Langerhans cells, a type of dendritic cells (DCs). Langerhans cells then migrate to draining lymph nodes, and activate naive T cells to initiate immune response. It is therefore likely that, if PGE₂ in the skin works in immune response, it acts on Langerhans cells to modulate their functions. Using mice deficient in each EP subtype, we examined this issue [Kabashima et al., 2003a]. We found that, while Langerhans cells express all four PGE receptor (EP) subtypes, their migration to regional lymph nodes after antigen uptake was decreased only in EP4^{-/-} mice. Impairment in migration was reproduced in wild type mice treated with an EP4 antagonist, whereas an EP4 agonist promoted the migration of Langerhans cells. EP4 stimulation further increased expression of costimulatory molecules in Langerhans cells, and enhanced their ability to stimulate T cells in the mixed lymphocyte reaction *in vitro*. These results indicate that PGE₂-EP4 signaling promotes the migration and maturation of Langerhans cells and facilitates initiation of skin immune responses. Consistent with this hypothesis, contact hypersensitivity to antigen was impaired in EP4^{-/-} mice as well as in wild-type mice treated with the EP4 antagonist during sensitization.

PGE₂-EP4 signaling in inflammatory bowel disease

- Human inflammatory bowel disease (IBD), including Crohn's disease and ulcerative colitis, is a chronic, relapsing, and remitting condition of unknown origin, and is characterized by inflammation in the large and/or small intestine associated with diarrhea, occult blood, abdominal pain, weight loss, anemia, and leukocytosis [Faccchi, 1992]. Studies in humans have implicated impaired mucosal barrier function, pronounced innate immunity, production of proinflammatory and immunoregulatory cytokines, and the activation of CD4⁺ T cells in the pathogenesis of IBD. It is known that PGE₂ is produced abundantly in the affected intestine, and that the administration of NSAIDs often triggers and exacerbates IBD [Barnason et al., 1992]. These findings indicate that PGE₂ works to prevent the disease initiation and progression. However, the identity of the EP receptor and mechanism of such prevention remain unknown. We subjected mice deficient in each of the eight types and subtypes of prostanooid receptors to dextran sodium sulfate (DSS)-induced colitis, an animal model of IBD, and examined this issue by comparing their susceptibility to DSS treatment [Kabashima et al., 2002]. We found that, among the eight strains of knockout mice, only EP4-deficient mice developed severe colitis with 3% DSS treatment. This susceptibility in the absence of EP4 signaling was confirmed by reproducing this phenotype in wild type mice treated with an EP4-selective antagonist. We further found that the EP4 deficiency impaired mucosal barrier function, and induced epithelial loss, crypt damage and accumulation of neutrophils and CD4⁺ T cells in the colon. By DNA microarray, elevated expression of genes associated with immune response and reduced expression of genes with mucosal repair and remodeling were found in the colon of EP4-deficient mice. Thus our study revealed that EP4 maintains intestinal homeostasis by preserving mucosal integrity and down-regulating immune response.



Species and clone name	cDNA source	Unique sequence	Signal transduction	Expression cell line	Reference(s)
human					
h	Uterus	EEFWGN	1 cAMP, 1 Ca ²⁺	CHO	91
E	Intestine	EEFWGN	1 cAMP	JEG-3	82
b	Uterus	EEFWGN	1 cAMP, 1 Ca ²⁺	BHK-12	83
h	Kidney	EEFWGN	Not determined		147
h	Kidney	EEFWGN	1 cAMP	COS-7/CHO	148
h	Kidney	EEFEWEK	1 CRE	HEK-293	9, 99
human					
d	Uterus	M99-SRRLREGEFEWGN	1 cAMP	BHK-12	83
IV	Uterus	M99-SRRLREGEFEWGN	1 cAMP (weak), 1 Ca ²⁺	CHO	91
IV	Kidney	M99-SRRLREGEFEWGN	1 cAMP, 1 cAMP	COS-7/CHO	148
F	Intestine	M99-SRRLREG	Not determined		82
e	Uterus	M99-SRRLREGGLSRLTLYRQGLGHVGYKYPVC	1 cAMP	BHK-12	83
f	Uterus	M99-SRRLREGAPLPTPTVDPSPRFCAQFFRWFLD	1 cAMP	BHK-12	83
h	Kidney	LSFPAMSSHPQLPLTASFLLRPFCSVOLS	1 cAMP		
h	Kidney	MRYHTNMYASSSTLTHOCSST	1 CRE	HEK-293	9, 99
human					
j	Uterus	MRYHTNMYASSSTLPCOCSSTLMWSDHLER	1 cAMP, 1 Ca ²⁺	CHO	91
j	Kidney	MRYHTNMYASSSTLPCNCSSTLMWSDHLER	not determined		147
i	Kidney	MRYHTNMYASSSTLPCOCSSTLMWSDHLER	1 cAMP, 1 IP ₃	COS-7/CHO	148
A	Intestine	MRYHTNMYASSSTLPCOCSSTLMWSDHLER	1 cAMP	JEG-3	82
			MAP kinase	COS-7	149
k	Uterus	MRYHTNMYASSSTLPCOCSSTLMWSDHLER	1 cAMP, 1 Ca ²⁺	BHK-12	83
Mouse 0	PB15	RDHNTMYASSSTLPCPGSSALMWSDQLER	1 cAMP	CHO	86

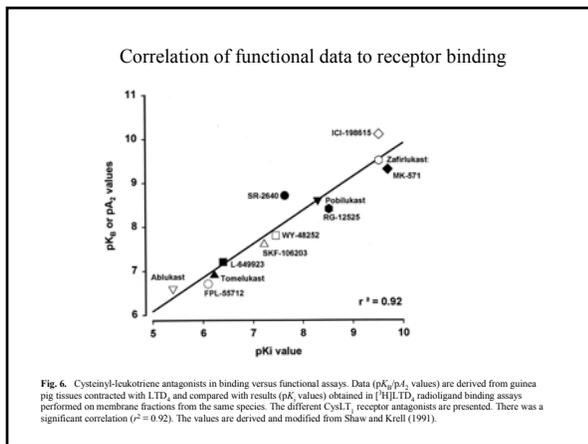
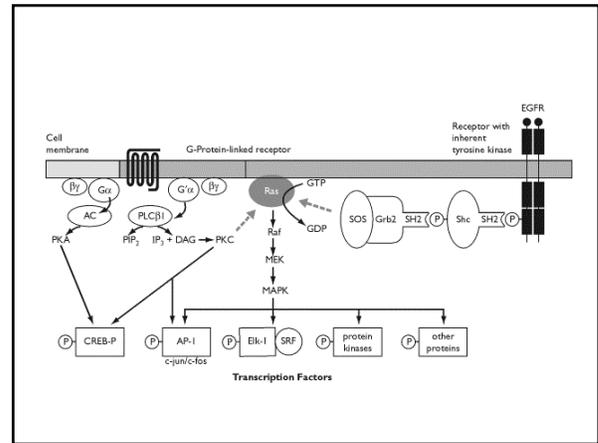
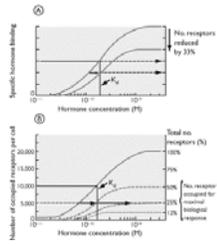


Fig. 6. Cysteinyl-leukotriene antagonists in binding versus functional assays. Data (pK₅₀/pA₅₀ values) are derived from guinea pig tissues contracted with LTD₄ and compared with results (pK_i values) obtained in [³H]LTD₄ radioligand binding assays performed on membrane fractions from the same species. The different CysLT₁ receptor antagonists are presented. There was a significant correlation (r² = 0.92). The values are derived and modified from Shaw and Krell (1991).

Table of biological actions of leukotrienes and lipoxins. The table is organized into columns for Actions and References. The actions listed include: Leukocyte adhesion, Optic nerve transection, Nuclear transcription (NF-κB), IgE synthesis, Bronchospasm, Plasma resolution, Vasorestriction, Vasodilation, Eosinophil recruitment, Cardiodenervation, Smooth muscle proliferation, Muscular necrosis, Regulation of cellular function, Inhibition of PMN-mediated inflammation in skin, lung and kidney, Protection in reperfusion injury, Enhancement of macrophage phagocytosis of bacteria, Enhancement of dendritic, cytosolic expression and gene regulation, Enhancement of clearance and accurate resolution of pulmonary edema, Anti-inflammatory properties, Reduction of COX-2 traffic in pain response, Inhibition of cell proliferation.



Relationship between specific hormone binding and total number of receptors. The K_d is the concentration of hormone required to occupy 50% of the receptors. When the total number of receptors is reduced by a third, K_d remains the same but the concentration of hormone required to achieve a certain level of hormone binding is increased (arrow).

These curves demonstrate the consequences of reducing the number of receptors when only 25% occupancy is required for maximal biological response. Again K_d remains unchanged but the concentration of hormone required to achieve the occupancy of 5000 receptors per cell increases (arrows).