

**Propylthiouracil inhibits the conversion of l-thyroxine to l-triiodothyronine: *An explanation of the antithyroxine effect of propylthiouracil and evidence supporting the concept that triiodothyronine is the active thyroid hormone***

Jack H. Oppenheimer, ... , Harold L. Schwartz, Martin I. Surks

*J Clin Invest.* 1972;51(9):2493-2497. <https://doi.org/10.1172/JCI107063>.

**Concise Publication**

6-*n*-propylthiouracil (PTU) administered to male Sprague-Dawley rats maintained on 2 and 5 µg L-thyroxine (T<sub>4</sub>)/100 g body weight resulted in a marked reduction in the rate of conversion of L-thyroxine to L-triiodothyronine (T<sub>3</sub>). These effects could not be ascribed to induced hypothyroidism since the group maintained on 5 µg T<sub>4</sub>/day had normal levels of liver mitochondrial alpha glycerophosphate dehydrogenase. In confirmation of previous studies, PTU also reduced the fractional rate of deiodination of T<sub>3</sub>. These observations provide a possible explanation of the many published observations indicating that PTU antagonizes the tissue effects of T<sub>4</sub> but not of T<sub>3</sub>. The data suggest that monodeiodination of T<sub>4</sub> but not of T<sub>3</sub> is essential before hormonal effects can be manifested at the cellular level.

**Find the latest version:**

<https://jci.me/107063/pdf>



## Propylthiouracil Inhibits the Conversion of L-Thyroxine to L-Triiodothyronine

AN EXPLANATION OF THE ANTITHYROXINE EFFECT OF  
PROPYLTHIOURACIL AND EVIDENCE SUPPORTING THE  
CONCEPT THAT TRIIODOTHYRONINE IS THE  
ACTIVE THYROID HORMONE

JACK H. OPPENHEIMER, HAROLD L. SCHWARTZ, and MARTIN I. SURKS

*From the Endocrine Research Laboratory, Department of Medicine,  
Montefiore Hospital and Medical Center and the Albert Einstein College  
of Medicine, Bronx, New York 10467*

**ABSTRACT** 6-*n*-propylthiouracil (PTU) administered to male Sprague-Dawley rats maintained on 2 and 5  $\mu\text{g}$  L-thyroxine ( $T_4$ )/100 g body weight resulted in a marked reduction in the rate of conversion of L-thyroxine to L-triiodothyronine ( $T_3$ ). These effects could not be ascribed to induced hypothyroidism since the group maintained on 5  $\mu\text{g}$   $T_4$ /day had normal levels of liver mitochondrial alpha glycerophosphate dehydrogenase. In confirmation of previous studies, PTU also reduced the fractional rate of deiodination of  $T_3$ . These observations provide a possible explanation of the many published observations indicating that PTU antagonizes the tissue effects of  $T_4$  but not of  $T_3$ . The data suggest that monodeiodination of  $T_4$  but not of  $T_3$  is essential before hormonal effects can be manifested at the cellular level.

### INTRODUCTION

In addition to its well recognized effects on intrathyroidal iodine metabolism, 6-*n*-propylthiouracil (PTU)<sup>1</sup> inhibits

Dr. Oppenheimer is a Career Scientist of the Health Research Council of the City of New York (Award I-222).

Received for publication 16 February 1972 and in revised form 2 June 1972.

<sup>1</sup>Abbreviations used in this paper:  $\alpha$ -GPD, alpha glycerophosphate dehydrogenase; PTU, propylthiouracil;  $T_3$ , L-triiodothyronine;  $T_4$ , L-thyroxine; TSH, thyroid-stimulating hormone.

the peripheral hormonal manifestations of injected  $T_4$ . Thus, in rats PTU and many related thiouracil-type compounds reduce the capacity of a given dose of  $T_4$  to increase the oxygen consumption of the whole animal (1-6) and isolated tissues (7, 8), to raise the activity of mitochondrial alpha glycerophosphate dehydrogenase ( $\alpha$ -GPD) in heart, liver, and kidney (5, 8-10), to inhibit the pituitary release of TSH (7, 11-14), and to decrease the heart rate (15). The peripheral tissue effects of PTU have been attributed to the capacity of this drug to inhibit  $T_4$  deiodination (7, 15-20). Curiously, however, PTU does not antagonize the peripheral effects of injected  $T_3$ ; a variety of studies show either no change, or in fact a slight increase in the tissue effects of  $T_3$  when administered to PTU-treated animals (4-6, 10, 14, 21). although the biological effects of  $T_3$  are not decreased, PTU inhibits its deiodination as effectively as it does the deiodination of  $T_4$  (15, 17, 20).

The recent demonstration that  $T_4$  is converted to  $T_3$  under physiological conditions both in man (22-24) and in the rat (25) afforded a possible explanation of these findings. Quantitative considerations based on the biological potency ratio of  $T_3$  to  $T_4$  and the extent of  $T_4$  to  $T_3$  conversion in the rat raised the possibility that all of the hormonal effect of injected  $T_4$  may be derived from its peripheral conversion to  $T_3$  (25). Thus, if PTU inhibited the monodeiodination of  $T_4$  to form  $T_3$ , a marked

TABLE 1  
Effect of PTU on Conversion of T<sub>4</sub> to T<sub>3</sub>

| Group                                     | n  | (T <sub>3</sub> /T <sub>4</sub> ) |                | λ <sub>4</sub> | K              | CR         |
|---|----|-----------------------------------|----------------|----------------|----------------|------------|
|   |    | Observed                          | Corrected      |                |                |            |
| PTU + 2 μg T <sub>4</sub> /100 g body wt. | 12 | 0.0262*±0.0030                    | 0.0224*±0.0031 | 0.0344*±0.0013 | 0.0026*±0.0004 | 7.51*±0.90 |
| PTU + 5 μg T <sub>4</sub> /100 g body wt. | 6  | 0.0174*±0.0041                    | 0.0153*±0.0070 | 0.0456±0.0170  | 0.0028*±0.0008 | 6.20*±1.76 |
| Control‡                                  | 11 | 0.1000±0.0038                     | 0.0873±0.0038  | 0.0492±0.0020  | 0.0083±0.0008  | 16.9±1.0   |

*Explanation of symbols:* n, number of animals in each group; T<sub>3</sub>/T<sub>4</sub>, the ratio of isotopic T<sub>3</sub> to T<sub>4</sub> in the carcass; λ<sub>4</sub>, fractional removal rate of T<sub>4</sub>; K, fractional rate of nonradioactive T<sub>4</sub> to T<sub>3</sub> conversion; CR, conversion ratio = (K/λ<sub>4</sub>) × 100.

\* Statistically different from control group at P < 0.01 level (Student's *t* test). Conversion ratios for 2 μg and 5 μg T<sub>4</sub> groups were not significantly different from each other.

‡ Control data has previously been published (25). Mean ±SE are indicated.

reduction in T<sub>4</sub> hormonal effects would be anticipated. On the other hand, inhibition of deiodination of T<sub>3</sub> would not be expected to result in a diminution in hormonal effect. The following studies were therefore undertaken to determine whether in fact PTU inhibits the conversion of T<sub>4</sub> to T<sub>3</sub>.

## METHODS

Methods for quantitating the conversion of T<sub>4</sub> to T<sub>3</sub> in PTU-treated male Sprague-Dawley rats (100–150 g) were identical to those described in a previous communication dealing with this phenomenon in untreated animals (25). In brief, animals were killed 48 hr after the injection of tracer <sup>125</sup>I-T<sub>4</sub>. The carcass was homogenized and extracted with ethanol. After addition of authentic <sup>125</sup>I-T<sub>3</sub>, T<sub>3</sub> in the extract was isolated and purified by serial chromatography in three paper and one thin-layer cycles. The final eluate of the T<sub>3</sub> region was chromatographed on paper in three different solvent systems. The ratio of <sup>125</sup>I-T<sub>3</sub> to <sup>125</sup>I-T<sub>4</sub> was determined and the content of <sup>125</sup>I-T<sub>3</sub> in the carcass calculated. Account was taken of artifactual in vitro T<sub>4</sub> to T<sub>3</sub> conversion by repeating similar procedures in animals killed within 1 min after the intravenous injection of tracer <sup>125</sup>I-T<sub>4</sub>. The fractional removal rate of T<sub>4</sub> (λ<sub>4</sub>), was determined from the residual T<sub>4</sub> in the carcass. The fractional removal rate of T<sub>3</sub> (λ<sub>3</sub>), was measured in a separate series of paired animals as previously described (26). It was possible to calculate K, the fractional rate of nonradioactive T<sub>4</sub> to T<sub>3</sub> conversion, and the conversion ratio (CR), the percentage of nonradioactive T<sub>4</sub> ultimately converted to T<sub>3</sub>, by appropriate substitution of carcass <sup>125</sup>I-T<sub>3</sub>/<sup>125</sup>I-T<sub>4</sub>, λ<sub>4</sub>, and λ<sub>3</sub>, and t = 48 hr into the following equation derived in reference 25,

$$CR = \frac{K(100)}{\lambda_4} = \frac{200 \left( \frac{^{125}\text{I-T}_3}{^{125}\text{I-T}_4} \right) \left( \frac{\lambda_3}{\lambda_4} - 1 \right)}{1 - e^{-(\lambda_3 - \lambda_4)t}}$$

In some animals, fecal and urinary radioactivity were also measured. The fraction of total radioactivity disposed of via the deiodinative pathways, F<sub>v</sub>, and the fraction of total radioactivity disposed via the fecal route, F<sub>f</sub>, were calculated as previously described (26). The fractional fecal excretion rate (λ<sub>f</sub>) and the fractional deiodinative removal rate (λ<sub>v</sub>) were calculated respectively from the product of λ and F<sub>f</sub> and λ and F<sub>v</sub>.

Animals were maintained on 0.10% PTU in their drinking water from 3.5 to 8 wk. During this period, T<sub>4</sub> was administered daily by subcutaneous injection in 0.01 N NaOH solution (2 and 5 μg/100 g body weight). The animals were in good health during this period and gained weight normally. Since the present series of studies followed immediately upon our analysis of T<sub>4</sub> to T<sub>3</sub> transformation in untreated animals and since an identical strain of rats and identical techniques were used, the results of the previously published study were considered adequate as controls in determining the T<sub>4</sub> to T<sub>3</sub> transformation under the influence of PTU. The level of the mitochondrial enzyme α-GPD was determined by the method of Lee and Lardy (27).

## RESULTS

PTU effects a marked reduction in the fractional conversion of T<sub>4</sub> to T<sub>3</sub> (Table I). In both groups of PTU-treated animals, the conversion ratio was reduced to at least 40% of the control value.<sup>2</sup> There was no statistical difference between the conversion ratio of the PTU-treated group supplemented with 2 μg T<sub>4</sub>/100 g body weight and those PTU-treated animals supplemented

<sup>2</sup> Since PTU is known effectively to block thyroïdal synthesis of T<sub>4</sub> and T<sub>3</sub>, the theoretical possibility arises that the lower T<sub>3</sub> content in the PTU-treated animals is attributable to a more effective thyroïdal blockade provided by the PTU than by the 1 mg NaI alone administered daily to the control group. This explanation, however, is not tenable since less than 0.06% of the radioactivity in the injected <sup>125</sup>I-T<sub>4</sub> dose was found in the thyroïd of control animals 48 hr after injection. The release rate of total thyroïdal radioactivity from the gland in animals treated with a high iodine diet is small, less than 20% per day. Thus, the amount of free T<sub>3</sub>, either in the gland or in the carcass derived from recycled labeled iodine, is several orders of magnitude less than the <sup>125</sup>I-T<sub>3</sub> actually observed.

The possibility that the results obtained were due to a differential extraction of T<sub>3</sub> in control and PTU-treated animals was considered. Successive extractions were performed in two PTU and two control animals sacrificed within 2 min after the injection of a combined dose of <sup>125</sup>I-T<sub>4</sub> and <sup>125</sup>I-T<sub>3</sub>. The extraction characteristics were the same for both iodothyronines and there was no difference between control and PTU-treated animals.

TABLE II  
Mitochondrial  $\alpha$ -GPD in PTU-Treated Rats

|                                | $\alpha$ -GPD          | P       |
|--------------------------------|------------------------|---------|
|                                | $\Delta OD/mg$ per min |         |
| Normal                         | 0.1355 $\pm$ 0.0135    |         |
| PTU + 5 $\mu$ g T <sub>4</sub> | 0.1294 $\pm$ 0.0087    | NS      |
| Normal                         | 0.0981 $\pm$ 0.0106    |         |
| PTU + 2 $\mu$ g T <sub>4</sub> | 0.0483 $\pm$ 0.0028    | < 0.001 |
| Thyroidectomized               | 0.0396 $\pm$ 0.0038    | < 0.001 |

Mean  $\pm$ SE are indicated. Statistical comparisons are made with simultaneously run untreated intact rats.

with 5  $\mu$ g/100 g body weight. As indicated in Table II, administration of 2  $\mu$ g T<sub>4</sub>/100 g body weight, however, was insufficient to maintain the animals in the euthyroid state. This was inferred from the reduced activity of hepatic mitochondrial  $\alpha$ -GPD, an enzyme which has been shown to be a sensitive index of the thyroidal state of tissues (27). Since the daily dose of T<sub>4</sub> required to maintain the euthyroid state is probably 2  $\mu$ g/100 g body weight or less (8, 28), the finding of a low  $\alpha$ -GPD is probably an example of the well documented antagonism between PTU and T<sub>4</sub> which prompted this study. Since the administration of 5  $\mu$ g T<sub>4</sub>/100 g body weight led to a normal liver activity of  $\alpha$ -GPD, the reduction in the fractional conversion of T<sub>4</sub> to T<sub>3</sub> in this group cannot be ascribed to hypothyroidism.

Table III summarizes kinetic data obtained in those groups which were studied primarily in order to determine the fractional removal rate of T<sub>3</sub>, ( $\lambda_3$ ), in the treated animals. As pointed out above, this value is necessary in the calculation of T<sub>4</sub> to T<sub>3</sub> conversion. In confirmation of previous studies (15, 17, 20), PTU effected a marked reduction in the fraction of labeled iodine from T<sub>3</sub> and T<sub>4</sub>

which was disposed of via deiodinative pathways (F<sub>u</sub>). PTU caused a modest reduction in the fractional removal rate of T<sub>4</sub> ( $\lambda_4$ ). In the case of T<sub>3</sub>, PTU appeared to reduce slightly the fractional removal in the animals treated with 2  $\mu$ g/100 g body weight and to increase slightly the fractional removal rate in the animals treated with 5  $\mu$ g/100 g body weight. In all cases, however, the fractional rate of deiodination ( $\lambda_u$ ) was markedly reduced in PTU-treated animals. Of interest was the slight but consistent increase in the fractional rate of fecal excretion ( $\lambda_f$ ) in all groups. An increase in the fractional disposition via the fecal route offsets the decreased fractional rate of deiodination, thus stabilizing the overall fractional removal rate ( $\lambda = \lambda_u + \lambda_f$ ). It is entirely probable that the increase in the fraction of hormone iodine excreted via the fecal pathway (F<sub>f</sub>) is related to the increase in biliary clearance of T<sub>4</sub> and T<sub>3</sub> previously reported by Lang and Premachandra (29). A decrease in distribution space, especially in the case of T<sub>3</sub> was noted. Unfortunately, no plasma binding studies were performed in order to assess the contribution of alterations in plasma binding to the reduction of distribution volume. Increased binding of rat plasma proteins associated with hypothyroidism (30), however, could not explain the reduced distribution volume of T<sub>3</sub> since this change was also found in the group of animals treated with 5  $\mu$ g T<sub>4</sub>/100 g body weight, a dosage regimen which maintained animals in the euthyroid condition.

## DISCUSSION

The most important result of these studies is the demonstration that PTU causes a marked reduction in the fractional conversion of T<sub>4</sub> to T<sub>3</sub>. No information is currently available regarding the site of inhibition, nor is it known where monodeiodination of T<sub>4</sub> occurs. In this connection, however, it is of interest to evaluate the ratio K/ $\lambda_u$ ,

TABLE III  
Effect of PTU on Tracer T<sub>3</sub> and T<sub>4</sub> Metabolism

|                                 | n  | V <sub>T</sub>    | F <sub>u</sub>   | F <sub>f</sub>   | $\lambda$            | $\lambda_u$          | $\lambda_f$          |
|---------------------------------|----|-------------------|------------------|------------------|----------------------|----------------------|----------------------|
|                                 |    | ml/100 g body wt. |                  |                  | hr <sup>-1</sup>     | hr <sup>-1</sup>     | hr <sup>-1</sup>     |
| <sup>125</sup> I-T <sub>3</sub> |    |                   |                  |                  |                      |                      |                      |
| Control                         | 10 | 213.0 $\pm$ 29.2  | 0.49 $\pm$ 0.03  | 0.51 $\pm$ 0.03  | 0.122 $\pm$ 0.0020   | 0.0600 $\pm$ 0.0039  | 0.0626 $\pm$ 0.0031  |
| PTU + 2 $\mu$ g T <sub>4</sub>  | 10 | 107.8* $\pm$ 8.1  | 0.16* $\pm$ 0.01 | 0.84* $\pm$ 0.01 | 0.0982* $\pm$ 0.0036 | 0.0158* $\pm$ 0.0011 | 0.0823* $\pm$ 0.0037 |
| PTU + 5 $\mu$ g T <sub>4</sub>  | 8  | 119.7* $\pm$ 16.3 | 0.22* $\pm$ 0.02 | 0.78* $\pm$ 0.02 | 0.1384 $\pm$ 0.0092  | 0.0294* $\pm$ 0.0036 | 0.1090* $\pm$ 0.0061 |
| <sup>125</sup> I-T <sub>4</sub> |    |                   |                  |                  |                      |                      |                      |
| Control                         | 10 | 21.2 $\pm$ 1.0    | 0.40 $\pm$ 0.02  | 0.60 $\pm$ 0.02  | 0.0461 $\pm$ 0.0013  | 0.0183 $\pm$ 0.0012  | 0.0278 $\pm$ 0.0010  |
| PTU + 2 $\mu$ g T <sub>4</sub>  | 10 | 18.1* $\pm$ 0.4   | 0.13* $\pm$ 0.01 | 0.87* $\pm$ 0.01 | 0.0398* $\pm$ 0.0016 | 0.0050* $\pm$ 0.0003 | 0.0347* $\pm$ 0.0015 |

\* Significant difference from control at P < 0.01 level.

Explanation of symbols: n, number of animals in group; V<sub>T</sub> volume of distribution; F<sub>u</sub>, fraction of labeled hormone iodine excreted in urine; F<sub>f</sub>, fraction of labeled hormone iodine excreted in feces;  $\lambda$ , fractional removal rate of hormone (per hour);  $\lambda_u = (\lambda)(F_u)$ ;  $\lambda_f = (\lambda)(F_f)$ . Mean  $\pm$ SE indicated.

where  $K$  is fractional rate of conversion of  $T_4$  to  $T_3$  and  $\lambda_u$ , the fractional deiodinative removal rate of  $T_4$ . From the data in Tables I and III, one can calculate that in control animals  $K/\lambda_u = 0.45$  and in PTU-treated animals, 0.52. These results suggest that one-half of all  $T_4$  which is deiodinated is converted to  $T_3$ . Recent data from our laboratory are compatible with the idea that iodine atoms are detached from both the inner and outer ring of  $T_4$  in a random fashion (31). If deiodination occurs more rapidly than transformation of other parts of the thyronine molecule, random deiodination would result exactly in a 50% conversion of  $T_4$  to  $T_3$ . These considerations raise the interesting possibility that  $T_3$  formation is an obligatory step in all biological deiodination of  $T_4$  regardless of the tissue involved.

If one assumes that the entire hormonal potency of injected  $T_4$  is derived from its conversion to  $T_3$ , it is possible to provide an estimate of the degree of inhibition of  $T_4$  activity expected to result from the concurrent administration of PTU. Within a restricted range, hormonal tissue effects appear to be grossly proportional to the exchangeable hormonal tissue pool (32). Since only 5% of total body  $T_3$  in the rat is bound to plasma protein, and the rest is contained within the cells (26), the total exchangeable body pool of  $T_3$  can be regarded as a first approximation of the tissue pool. Thus, the following equation can be written:

$$\Delta E = \alpha P_3 = \frac{\alpha (CR) S_4}{100 \lambda_3}$$

where  $\Delta E$  is the increment in a given hormonal tissue effect over base line hypothyroid levels produced by  $S_4$ , the daily dose of injected  $T_4$ ;  $\alpha$ , a proportionality constant;  $P_3$ , the exchangeable body pool of  $T_3$ ; CR, the conversion ratio expressed in per cent; and  $\lambda_3$ , the fractional rate of  $T_3$  removal. It is assumed that in this system, the only source of  $T_3$  is the injected  $T_4$ . If PTU exerts its effects by inhibiting the conversion of  $T_4$  to  $T_3$ , it follows that

$$\frac{\Delta E_{PTU}}{\Delta E_{CON}} = \frac{(CR)_{PTU}}{(CR)_{CON}} \cdot \frac{(\lambda_3)_{CON}}{(\lambda_3)_{PTU}}$$

where the subscripts refer to control and PTU-treated groups.

If we substitute in the expression the average value for the conversion ratio in PTU-treated (6.9%), control animals (16.9%), and the corresponding average  $\lambda_3$  in control animals (0.122/hr) and PTU-treated animals (0.118/hr), the predicted value for  $\Delta E_{PTU}/\Delta E_{CON}$  would be 0.42. Experimentally, the value for  $\Delta E_{PTU}/\Delta E_{CON}$  can be estimated best from the data of Hoffman, Richert, and Westerfield (5) in which the effect of PTU on the increase in tissue mitochondrial  $\alpha$ -GPD is measured at various doses of injected  $T_4$ . For liver,  $\Delta E_{PTU}/\Delta E_{CON}$  is 0.37

and for kidney,  $\Delta E_{PTU}/\Delta E_{CON}$ , 0.47. The anticipated decrease in  $T_4$  activity brought about by PTU is thus in general agreement with the experimentally observed values. Because the effect of PTU on the fractional turnover of  $T_3$  is not marked, it is apparent that PTU would be expected to have no major effect on the effectiveness of injected  $T_3$ . In fact, a slight slowing of the fractional turnover might explain the enhanced effectiveness of  $T_3$  reported in some of the published studies.

The internal consistency of this formulation lends additional credence to the concept that most, if not all, of the hormonal effect of  $T_4$  is due to its conversion to  $T_3$ . This proposal was first advanced by Gross and Pitt-Rivers (33) and was supported specifically by the studies of Maclagan, Sprott, and Wilkinson (34) and Wilkinson and Maclagen (35). Nevertheless, the report by Lassiter and Stanbury negating  $T_4$  to  $T_3$  conversion in man (36) led to an abandonment of the concept that  $T_3$  was the active thyroid hormone. Renewed interest in the problem was aroused by the demonstration by Braverman, Ingbar, and Sterling (22) that  $T_4$  to  $T_3$  conversion did in fact occur in man and that the earlier conclusion by Lassiter and Stanbury was premature. Additional evidence favoring the concept that  $T_3$  is the active hormone has been the finding of limited capacity anterior pituitary sites for  $T_3$  but not  $T_4$  (37) and the demonstration of stereospecific binding of  $T_3$  but not  $T_4$  by rat hepatic and renal nuclei (38).

#### ACKNOWLEDGMENTS

The authors wish to thank Mr. Francisco Martinez and Mr. Jose Guerra for their expert technical assistance and Miss Maria Morel for secretarial support.

This work was supported by U. S. Public Health Service Grant 9 RO1 AM 15421-12, and U. S. Army Contract DA-49-193-MD-2967.

#### REFERENCES

- Andik, I., L. Balogh, and S. Z. Donhoffer. 1949. The effect of thyroxine in thyroidectomized rats treated with methylthiouracil. *Experientia (Basel)*. 5: 249.
- Barker, S. B., C. E. Kiely, Jr., and H. J. Lipner. 1949. Metabolic effects of thyroxine injected into normal thiouracil-treated and thyroidectomized rats. *Endocrinology*. 45: 624.
- Stasilli, N. R., R. L. Kroc, and R. Edlin. 1960. Selective inhibition of the calorogenic activities of certain thyroxine analogues with chronic thiouracil treatment in rats. *Endocrinology*. 66: 872.
- Hsieh, A. C. L. 1962. The effects of triiodo-L-thyronine and L-thyroxine on the oxygen consumption and body weights of rats fed on a diet containing 0.05% propylthiouracil. *J. Endocrinol.* 26: 55.
- Hoffman, W. W., D. A. Richert, and W. W. Westerfield. 1966. Effect of thiouracil-type drugs on the  $\alpha$ -glycerophosphate dehydrogenase response to thyroxine analogues. *Endocrinology*. 78: 1189.
- Bray, G. A., and S. Hildreth. 1967. Effect of propylthiouracil and methimazole on the oxygen consumption

- of hypothyroid rats receiving thyroxine or triiodothyronine. *Endocrinology*. **81**: 1018.
7. Braverman, L. E., and S. H. Ingbar. 1962. Effects of propylthiouracil and thiouracil on the metabolism of thyroxine and several of its derivatives by rat kidney slices *in vitro*. *Endocrinology*. **71**: 701.
  8. Ruegamer, W. R., W. W. Westerfield, and D. A. Richert. 1964.  $\alpha$ -Glycerophosphate dehydrogenase response to thyroxine in thyroidectomized, thiouracil-fed and temperature-adapted rats. *Endocrinology*. **75**: 908.
  9. Ruegamer, W. R., J. S. Warren, M. Barstow, and W. Beck. 1967. Effects of thiouracil on rat liver alpha-glycerophosphate dehydrogenase and serum PBI responses to L-thyroxine. *Endocrinology*. **81**: 277.
  10. Seif, F. J., and H. Guglielmi. 1969. Der Einfluss von 2-thiouracil und Thiamozol auf die Aktivität der L-Glyzerophosphat-oxidase der Rattenleber in Abhängigkeit von L-Thyroxine, L-3',3,5-Trijodthyronin und L-3'-Isopropyl-3,5-Dijodthyronin. *Acta Endocrinol.* **60**: 696.
  11. Jagiello, G. M., and J. M. McKenzie. 1960. Influence of propylthiouracil on the thyroxine-thyrotropin interplay. *Endocrinology*. **67**: 451.
  12. Escobar del Rey, F., G. Morreale de Escobar, M. D. García García, and J. Mouriz García. 1961. Increase of the rate of release of thyroidal iodine-131 and of circulating thyrotrophic activity at early stages of propylthiouracil treatment in the rat. *Nature (Lond.)*. **191**: 1171.
  13. Escobar del Rey, F., G. Morreale de Escobar, M. D. García García, and J. Mouriz García. 1962. Increased secretion of thyrotrophic hormone in rats with a depressed peripheral deiodination of thyroid hormone and a normal or high plasma PBI. *Endocrinology*. **71**: 859.
  14. Balfour, W. E. 1969. Inhibition of thyrotrophin secretion and deiodination of thyroxine. *J. Physiol.* **200**: 48.
  15. Morreale de Escobar, G., and F. Escobar del Rey. 1962. Influence of thiourea, potassium perchlorate and thiocyanate and of graded doses of propylthiouracil on thyroid hormone metabolism in thyroidectomized rats, isotopically equilibrated with varying doses of exogenous hormone. *Endocrinology*. **71**: 906.
  16. Hogness, J. R., T. Wong, and R. H. Williams. 1954.  $I^{131}$  excretion after injection of radiothyroxine into hyperthyroid, hypothyroid or normal rats. *Metab. (Clin. Exp.)*. **3**: 510.
  17. Van Arsdell, P. P., Jr., and R. H. Williams. 1956. Effect of propylthiouracil on degradation of  $I^{131}$ -labeled thyroxine and triiodothyronine. *Am. J. Physiol.* **186**: 440.
  18. Jones, S. L., and L. Van Middlesworth. 1960. Normal  $I^{131}$  L-thyroxine metabolism in the presence of potassium perchlorate and interrupted by propylthiouracil. *Endocrinology*. **67**: 855.
  19. Escobar del Rey, F., and G. Morreale de Escobar. 1961. The effect of propylthiouracil, methylthiouracil and thiouracil on the peripheral metabolism of L-thyroxine in thyroidectomized, L-thyroxine maintained rats. *Endocrinology*. **69**: 456.
  20. Van Middlesworth, L., and S. L. Jones. 1961. Interference with deiodination of some thyroxine analogues in the rat. *Endocrinology*. **69**: 1085.
  21. Mouriz, J., G. Morreale de Escobar, and F. Escobar del Rey. 1966. Evaluation of the peripheral deiodination of L-thyroxine as an index of its thyrotrophin suppressing effectiveness. *Endocrinology*. **79**: 248.
  22. Braverman, L. E., S. H. Ingbar, and K. Sterling. 1970. Conversion of thyroxine (T4) to triiodothyronine (T3) in athyreotic human subjects. *J. Clin. Invest.* **49**: 855.
  23. Sterling, K., M. A. Brenner, and E. S. Newman. 1970. Conversion of thyroxine to triiodothyronine in normal human subjects. *Science (Wash. D. C.)*. **169**: 1099.
  24. Pittman, C. S., J. B. Chambers, Jr., and V. H. Read. 1971. The extrathyroidal conversion rate of thyroxine to triiodothyronine in normal man. *J. Clin. Invest.* **50**: 1187.
  25. Schwartz, H. L., M. I. Surks, and J. H. Oppenheimer. 1971. Quantitation of extrathyroidal conversion of L-thyroxine to 3,5,3'-triiodothyronine in the rat. *J. Clin. Invest.* **50**: 1124.
  26. Oppenheimer, J. H., H. L. Schwartz, H. C. Shapiro, G. Bernstein, and M. I. Surks. 1970. Differences in primary cellular factors influencing the metabolism and distribution of 3,5,3'-L-triiodothyronine and L-thyroxine. *J. Clin. Invest.* **49**: 1016.
  27. Lee, Y.-P., and H. A. Lardy. 1965. Influence of thyroid hormones on L- $\alpha$ -glycerophosphate dehydrogenases and other dehydrogenases in various organs of the rat. *J. Biol. Chem.* **240**: 1427.
  28. Stasilli, N. R., R. L. Kroc, and R. I. Meltzer. 1959. Antigoitrogenic and calorogenic activities of thyroxine analogues in rats. *Endocrinology*. **64**: 62.
  29. Lang, S., and B. N. Premachandra. 1963. Propylthiouracil and hepatic clearance of thyroid hormones. *Am. J. Physiol.* **204**: 133.
  30. Oppenheimer, J. H., H. C. Shapiro, H. L. Schwartz, and M. I. Surks. 1971. Dissociation between thyroxine metabolism and hormonal action in phenobarbital-treated rats. *Endocrinology*. **88**: 115.
  31. Surks, M. I., and J. H. Oppenheimer. 1971. Metabolism of phenolic- and tyrosyl-ring labeled L-thyroxine in human beings and rats. *J. Clin. Endocrinol. Metab.* **33**: 612.
  32. Oppenheimer, J. H. 1968. Role of plasma proteins in the binding distribution and metabolism of the thyroid hormones. *N. Engl. J. Med.* **278**: 1153.
  33. Gross, J., and R. Pitt-Rivers. 1952. The identification of 3:5:3'-triiodothyronine in human plasma. *Lancet*. **1**: 439.
  34. Maclagan, N. F., W. E. Sprott, and J. H. Wilkinson. 1952. Effect of 3:5:3'-L-triiodothyronine and certain anti-thyroxine substances on the oxygen consumption of mice. *Lancet*. **2**: 915.
  35. Wilkinson, J. H., and N. F. Maclagan. 1953. Effect of an anti-thyroxine compound on the metabolism of radioactive thyroxine and triiodothyronine in rats. *Lancet*. **2**: 1024.
  36. Lassiter, W. E., and J. B. Stanbury. 1958. The *in vivo* conversion of thyroxine to 3:5:3'-triiodothyronine. *J. Clin. Endocrinol. Metab.* **18**: 903.
  37. Schadow, A. R., M. I. Surks, H. L. Schwartz, and J. H. Oppenheimer. 1972. Specific triiodothyronine binding sites in the anterior pituitary of the rat. *Science (Wash. D. C.)*. **176**: 1252.
  38. Oppenheimer, J. H., D. Koerner, H. L. Schwartz, and M. I. Surks. Specific nuclear triiodothyronine binding sites in rat liver and kidney. *J. Clin. Endocrinol. Metab.* In press.