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### Research Article

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# Chloride Secretory Mechanism Induced by Prostaglandin E<sub>1</sub> in a Colonic Epithelial Cell Line

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## Abstract

Confluent T<sub>84</sub> monolayers grown on permeable supports and mounted in a modified Ussing chamber secrete chloride (Cl<sup>-</sup>) in response to prostaglandin E<sub>1</sub>. The threshold stimulation was observed at 10<sup>-9</sup> M and a maximal effect at 10<sup>-6</sup> M. Unidirectional flux studies showed an increase in both serosal to mucosal and mucosal to serosal Cl<sup>-</sup> fluxes with 10<sup>-6</sup> M prostaglandin E<sub>1</sub>; the increase in serosal to mucosal Cl<sup>-</sup> flux exceeded the increase in mucosal to serosal flux, resulting in net Cl<sup>-</sup> secretion. Na<sup>+</sup> transport was not affected in either direction and the changes in net Cl<sup>-</sup> flux correlated well with the changes in short circuit current. To identify the electrolyte transport pathways involved in the Cl<sup>-</sup> secretory process, the effect of prostaglandin E<sub>1</sub> on ion fluxes was tested in the presence of putative inhibitors. Bumetanide was used as an inhibitor for the basolaterally localized Na<sup>+</sup>, K<sup>+</sup>, Cl<sup>-</sup> cotransport system whose existence and bumetanide sensitivity have been verified in earlier studies (Dharmasathaphorn et al. 1984. *J. Clin. Invest.* 75:462-471). Barium was used as an inhibitor for the K<sup>+</sup> efflux pathway on the basolateral membrane whose existence and barium sensitivity were demonstrated in this study by preloading the monolayers with <sup>86</sup>Rb<sup>+</sup> (as a tracer for K<sup>+</sup>) and simultaneously measuring <sup>86</sup>Rb<sup>+</sup> efflux into both serosal and mucosal reservoirs. Both bumetanide and barium inhibited the net chloride secretion induced by prostaglandin E<sub>1</sub>, suggesting the involvement of the Na<sup>+</sup>, K<sup>+</sup>, Cl<sup>-</sup> cotransport and a K<sup>+</sup> efflux pathways on the basolateral membrane in the Cl<sup>-</sup> secretory process. The activation of another Cl<sup>-</sup> transport pathway on the apical membrane by prostaglandin E<sub>1</sub> was suggested by Cl<sup>-</sup> uptake studies. Our findings indicate that the prostaglandin E<sub>1</sub>-stimulated Cl<sup>-</sup> secretion, which is associated with an increase in cyclic AMP level, intimately involves (a) a bumetanide-sensitive Na<sup>+</sup>, K<sup>+</sup>, Cl<sup>-</sup> cotransport pathway that serves as a Cl<sup>-</sup> uptake step across the basolateral membrane, (b) the stimulation of a barium-sensitive K<sup>+</sup> efflux mechanism on the basolateral membrane that most likely acts to recycle K<sup>+</sup>, and (c) the activation of a Cl<sup>-</sup> transport pathway on the apical membrane that serves as a Cl<sup>-</sup> exit pathway.

## Introduction

Prostaglandins and other arachidonic acid metabolites may play an important role in the regulation of ion transport in the intestine. These compounds are synthesized in the intestinal mucosa and appear to be increased in inflammatory bowel disease (1-3). In isolated intestine, prostaglandins cause an increase in

water and electrolyte secretion associated with an increase in mucosal cyclic AMP levels (4-7). This study utilized a cultured colonic cell line as a model system to investigate the mechanisms and the transport pathways involved in the chloride (Cl<sup>-</sup>) secretory process stimulated by prostaglandin E<sub>1</sub>. The advantages of using a cultured cell line result from the uniformity of the model, which contains only a single cell type. This allows elimination of the influence of the preexisting peptide hormones or neurotransmitter. Further, the equal accessibility of both apical and basolateral membranes allows localization of the transport pathways involved in the transport process. We have previously shown that this epithelial cell line becomes very well differentiated when grown to confluency on a permeable support. The cell monolayers have a columnar epithelial appearance and retain many receptor-mediated electrolyte transport processes, including the response to prostaglandin E<sub>1</sub>, vasoactive intestinal polypeptide (VIP),<sup>1</sup> carbachol, etc. (8, 9). Several transport pathways have been identified in this cell line and their participation in the Cl<sup>-</sup> secretory process induced by VIP, calcium ionophore A23187, or carbachol has been demonstrated (10-15). These include the Na<sup>+</sup>, K<sup>+</sup>, Cl<sup>-</sup> cotransport and one or several K<sup>+</sup> efflux pathways on the basolateral membrane, together with a Cl<sup>-</sup> conductance pathway on the apical membrane. Because the response to prostaglandin E<sub>1</sub> in this cell line resembles that observed in the intact intestine of animals and humans, we have chosen this cell line as a model system to study the mechanism of Cl<sup>-</sup> secretion induced by prostaglandin E<sub>1</sub>.

## Methods

**Growth and maintenance of T<sub>84</sub> cells.** T<sub>84</sub> cells were grown as monolayers in a 1:1 mixture of Dulbecco-Vogt modified Eagle's medium and Ham's F-12 medium supplemented with 15 mM Na<sup>+</sup>-Hepes buffer, pH 7.5, 1.2 g of NaHCO<sub>3</sub>, 40 mg of penicillin, 8 mg of ampicillin, and 90 mg of streptomycin per liter, and 5% newborn calf serum. Confluent monolayers were subcultured by trypsinization with 0.1% trypsin and 0.9 mM EDTA in Ca<sup>2+</sup>- and Mg<sup>2+</sup>-free phosphate-buffered saline as reported earlier (10).

**Transepithelial electrolyte transport studies.** The Ussing chamber was modified to allow maintenance of the integrity of the cell monolayers during the study. The modified chamber was designed to minimize turbulence created by the air lift system and to avoid edge damage to the monolayers. These modifications permitted the monolayer to remain intact for >3-4 h.

For the Ussing chamber experiments, 10<sup>6</sup> T<sub>84</sub> cells were plated on a permeable support (1.98-cm<sup>2</sup> surface area) and maintained for 7 d prior to use. At this time, the transepithelial conductance of the preparations became stable. The supports were suspended over the bottom of a 100-mm culture dish to permit "bottom feeding" by laying them on top of a layer of glass beads. These supports were similar to the "filter-bottom dish" developed by Handler et al. (16), consisting of a rat tail collagen-coated polycarbonate Nuclepore filter (Nuclepore Corp., Pleasanton, CA, 5-μm pore size), glued to one open end of a Lexan ring. Crude rat tail

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1. Abbreviations used in this paper: I<sub>sc</sub>, short circuit current; PD, potential difference; VIP, vasoactive intestinal polypeptide.

collagen was solubilized by dissolving 1 g of rat tail tendons in 100 ml of 1% acetic acid. Further steps in preparation of rat tail collagen and procedures for collagen coating Nuclepore filters were as described by Cereijido et al. (17). After cell growth, the entire ring assembly was inserted into the Ussing chambers. No pressure was exerted directly on the monolayers and hence edge damage was avoided. Procedures after this point followed those described for isolated intestine by Binder et al. (18). Mucosal and serosal reservoirs contained identical volumes of oxygenated Ringer's solution (pH 7.4, at 37°C), containing (in millimolar): Na<sup>+</sup>, 140; K<sup>+</sup>, 5.2; Ca<sup>++</sup>, 1.2; Mg<sup>++</sup>, 1.2; Cl<sup>-</sup>, 119.8; HCO<sub>3</sub><sup>-</sup>, 25; H<sub>2</sub>PO<sub>4</sub><sup>-</sup>, 2.4; HPO<sub>4</sub><sup>-</sup>, 0.4; and glucose, 10. Potential difference (PD) across the cell monolayer was measured by calomel electrodes in 3 M KCl and monitored with a potentiometer. Throughout the experiment, except for 5–10 s every 5 min while the PD was being recorded, spontaneous tissue PD was short circuited and nullified by an automatic voltage clamp (W-P Instruments, Inc., New Haven, CT) with Ag/AgCl<sub>2</sub> electrodes. Tissue conductance was calculated from the PD and the imposed current according to Ohm's law. Unidirectional <sup>22</sup>Na<sup>+</sup> and <sup>36</sup>Cl<sup>-</sup> fluxes were carried out simultaneously in tissue pairs with similar conductance. Our preliminary experiments demonstrated that the unidirectional flux rates of <sup>22</sup>Na<sup>+</sup> and <sup>36</sup>Cl<sup>-</sup> were stable for up to 2.5 h, and that unidirectional <sup>22</sup>Na<sup>+</sup> and <sup>36</sup>Cl<sup>-</sup> fluxes under basal conditions varied directly with the conductance (all  $r \geq 0.85$ ,  $P < 0.005$ ).

**<sup>86</sup>Rb<sup>+</sup> efflux studies.** For this set of experiments, monolayers were grown on collagen-coated Nuclepore filters, under conditions identical to those used in the ion flux studies described above. Prior to use, the monolayers were equilibrated overnight with <sup>86</sup>Rb<sup>+</sup> by adding 0.35  $\mu$ Ci/ml <sup>86</sup>Rb<sup>+</sup> to the culture media ( $\sim 4.3$  mM K<sup>+</sup>) and sterile filtering. The preincubated monolayers were washed rapidly in two changes of Ringer's solution, mounted in the Ussing chambers, and voltage clamped as described earlier. The washing and mounting procedure took  $\sim 15$  s. Serial samples were taken simultaneously from the serosal and mucosal reservoirs (every 8 min for this study) with buffer replacement. 3 mM BaCl<sub>2</sub> or 0.3 mM bumetanide was added at 20 min as indicated. 1  $\mu$ M prostaglandin E<sub>1</sub> was added at 40 min. All additions were made to both the mucosal and serosal reservoirs. The data were corrected for sampling volume (0.5 ml of a 5-ml reservoir) and previous sampling loss due to buffer replacement. The results for serosal and mucosal <sup>86</sup>Rb<sup>+</sup> efflux were analyzed independently using the closed three-compartment system with the assumption that <sup>86</sup>Rb<sup>+</sup> acts as a perfect tracer for K<sup>+</sup> and the rate of return flux back into the cell from either compartment was negligible (19). This assumption is reasonable for the time period of the experiment.<sup>2</sup> The apparent rate constants for serosal ( $k_s$ ) and mucosal ( $k_m$ ) efflux were determined for each sampling time using the relationships:

$$k_s = \frac{\Delta Q}{\Delta t} \cdot \frac{1}{Po - R - Q};$$

$$k_m = \frac{\Delta R}{\Delta t} \cdot \frac{1}{Po - R - Q},$$

2. Backflux of <sup>86</sup>Rb<sup>+</sup> into the cells can be ignored for two reasons. First, at all times, the rate constants relating uptake and efflux are a function of the "size" of the compartments, i.e., the total amount of K<sup>+</sup> in each compartment. Because the K<sup>+</sup> contained in the cellular compartment is  $\sim 40$ -fold smaller than either extracellular compartment, then as long as the size of the cellular compartment does not change radically, the rate constant for <sup>86</sup>Rb<sup>+</sup> uptake is 40-fold smaller than the rate constant for efflux. Second, during the times of the experiment, although as much as 60% of the label leaves the cell, the specific activity in either extracellular compartment is still at least 30-fold smaller than that in the cellular compartment. The rate of <sup>86</sup>Rb<sup>+</sup> uptake, which is equal to the product of the rate constant for uptake and the specific activity in the extracellular compartment, is negligibly small ( $< 1/1,000$ th) compared to the rate of <sup>86</sup>Rb<sup>+</sup> efflux. Therefore, the differential equations describing the three-compartment system (31, 36) can be reduced to those describing simple decay.

where  $Po$  is the initial amount of <sup>86</sup>Rb<sup>+</sup> in the cell, and  $R$  and  $Q$  are the amount of isotope in the mucosal and serosal compartments, respectively.  $Po$  was determined experimentally as the total amount of <sup>86</sup>Rb<sup>+</sup> in replicate tissues and as the total amount in the experimental tissues at the end of the experiment plus the amount in the bathing media. The calculated intracellular K<sup>+</sup> of the monolayers which was estimated to be  $\sim 639$  nmol (derived from <sup>86</sup>Rb<sup>+</sup> counts of the monolayers as compared to <sup>86</sup>Rb<sup>+</sup> counts in the culture media with [K<sup>+</sup>] of 4.3 mM) and extracellular K<sup>+</sup> in the bathing reservoir which was 26  $\mu$ mol (5 ml of solution with [K<sup>+</sup>] of 5.2 mM).

**<sup>36</sup>Cl<sup>-</sup> uptake studies.** Confluent monolayers were grown on collagen-coated Nuclepore filters of 1.98 cm<sup>2</sup> surface area identical to those utilized in the Ussing chamber studies. The monolayers were washed three times with 2 ml of KCl buffer (containing 140 mM KCl, 20 mM Tris-SO<sub>4</sub>, pH 7.5, 1 mM Mg gluconate, and 1 mM Ca gluconate) and incubated for 1.5 h at 37°C in the same buffer. They were then washed three times with 2 ml sucrose buffer (containing 241 mM sucrose, 20 mM Tris-SO<sub>4</sub>, pH 7.5, 1 mM Mg gluconate, and 1 mM Ca gluconate) and incubated in the same buffer containing 0.5 mM ouabain and 0.1 mM bumetanide for another hour at room temperature. Both the serosal and mucosal surfaces were so treated. The uptakes were carried out by replacing the preincubation buffer with uptake buffer containing 140 mM Na gluconate, 20 mM Tris-SO<sub>4</sub>, pH 7.5, 1 mM Mg gluconate, 1 mM Ca gluconate, 0.5 mM ouabain, 0.1 mM bumetanide, and 1  $\mu$ Ci/ml <sup>36</sup>Cl<sup>-</sup> (final [Cl] = 4.3 mM) with or without 10<sup>-6</sup> M prostaglandin E<sub>1</sub>. This buffer was added to one side of the monolayers, while an identical buffer without <sup>36</sup>Cl<sup>-</sup> was added simultaneously to the opposite side. Uptakes were carried out for 3 min before terminating by dunk-washing in four successive 1-liter containers of MgSO<sub>4</sub> sucrose buffer (containing 20 mM Tris-Hepes, 100 mM MgSO<sub>4</sub>, and 137 mM sucrose).

**Extraction and measurement of cAMP.** Cells were grown to confluency (7 d) in 35-mm culture plates. To disrupt the tight junctions and allow better access to the basolateral membrane, the cells were washed twice with 2 ml of Ca<sup>++</sup>-free Ringer's solution containing 10 mM glucose and then incubated at 37°C for 1 h in 1 ml of the same buffer. This solution was aspirated and replaced with 0.7 ml Ringer's solution containing 10 mM glucose, 1.2 mM Ca<sup>++</sup>, and varying concentrations of prostaglandin E<sub>1</sub> or prostaglandin E<sub>1</sub> and/or the inhibitor for transport pathway of interest. The cells were incubated in these solutions at 37°C in a 5% CO<sub>2</sub> atmosphere, to approximate conditions used in the Ussing chamber studies, for the duration of 15 min. The reaction was stopped with the addition of 1.4 ml of iced 95% ethanol. (We have demonstrated in preliminary studies that practically all of the cyclic AMP was confined to the intracellular compartment and similar results were obtained with monolayers mounted in the Ussing chamber as compared to this method of incubation.) Samples were kept at 4°C for at least 15 min, then centrifuged at 1,500 g for 20 min. Methods then followed those described by Harper and Brooker (20). Briefly, duplicate 25- $\mu$ l samples of supernatant were added to 100  $\mu$ l of 50 mM acetate (pH 6.2). Samples were acetylated with 5  $\mu$ l of a mixture of triethylamine/acetic anhydride, 2:1. 100  $\mu$ l of <sup>125</sup>I-cyclic AMP and 100  $\mu$ l of cyclic AMP antiserum were added, and the samples incubated at 4°C for 18 h. 2 ml of iced 50 mM acetate (pH 6.2) were added to each tube and samples were centrifuged at 1,500 g for 20 min. The supernatant was decanted and the precipitate was counted for radioactivity. A standard curve was done for each assay by adding known amounts of cyclic AMP to buffer solution and processing these standards in the same manner as experimental samples. Representative monolayers were taken for determination of their protein content by the method of Lowry et al. (21) using bovine serum albumin as a standard.

**Materials.** All radionuclides and cyclic AMP antisera were obtained from New England Nuclear, Boston, MA. Prostaglandin E<sub>1</sub> was purchased from The Upjohn Co., Kalamazoo, MI. Bumetanide was a gift from Dr. P. W. Feit of Leo Pharmaceutical Products, Ballerup, Denmark. Barium chloride dihydrate was purchased from J. T. Baker Chemical Company, Phillipsburg, NJ, and anthracene-9-carboxylic acid from Aldrich Chemical Company, Milwaukee, WI. Stock solutions of bumetanide and anthracene-9-carboxylic acid were made in dimethyl sulfoxide as 10 mM

and 1 M solutions, respectively, while prostaglandin  $E_1$  was dissolved in ethanol. Preliminary studies indicate that dimethyl sulfoxide up to 50  $\mu$ l and ethanol up to 25  $\mu$ l per 5 ml, the amount used to dissolve prostaglandin  $E_1$  or specific inhibitors, did not affect unidirectional  $Na^+$  or  $Cl^-$  fluxes.

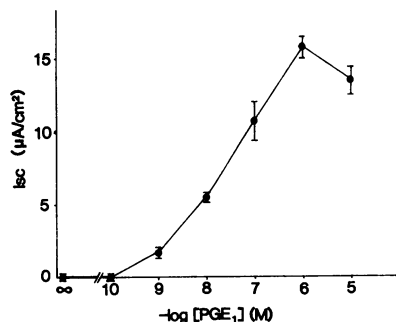
**Statistical analysis.** Student's  $t$  tests and analysis of variance were used as indicated (22).

## Results

After 5 d or more in culture,  $T_{84}$  cells, grown on permeable, collagen-coated Nuclepore filters appear as a columnar epithelial monolayer with their basolateral membrane firmly attached to the collagen-coated surface, and their apical membrane facing the medium (9). These monolayers maintained a transepithelial resistance of  $\sim 1.5 \text{ k}\Omega \cdot \text{cm}^2$ . The collagen-coated Nuclepore membrane, which served as the attachment support for the cells, had a resistance  $< 4 \Omega \cdot \text{cm}^2$ ; thus it contributed insignificantly to the transepithelial resistance. For electrolyte transport studies carried out in the modified Ussing chamber, we have denoted the basolateral membrane side as the serosal side and the apical membrane surface as the mucosal side.

**Stimulation of net  $Cl^-$  secretion across  $T_{84}$  monolayers by prostaglandin  $E_1$ .** The addition of  $10^{-6}$  M prostaglandin  $E_1$  to the serosal bathing solution caused an immediate increase in short circuit current ( $I_{sc}$ ) which reached the peak 10–15 min after the addition. Thereafter, the  $I_{sc}$  gradually declined, although it remained significantly elevated throughout the study period. Mucosal addition had little or no effect except at high concentrations ( $\geq 10^{-6}$  M) where a small increase in  $I_{sc}$  was observed (data not shown). The response to prostaglandin  $E_1$  was dose dependent with the threshold stimulation occurring at  $10^{-9}$  M, and maximal response at  $10^{-6}$  M (Fig. 1). Because a maximal response was observed with  $10^{-6}$  M prostaglandin  $E_1$ , this concentration was used in all subsequent studies.

Unidirectional flux results are summarized in Table I with the time course of the changes in  $I_{sc}$  and net fluxes illustrated in Fig. 2. Net flux and  $I_{sc}$  in the absence of added secretagogues remained at or near zero for  $> 100$  min (Fig. 2 A). After the addition of  $10^{-6}$  M prostaglandin  $E_1$ , the increase in net chloride secretion was observed (illustrated by the solid bars in Fig. 2 B)



**Figure 1.** Graded dose effect of prostaglandin  $E_1$  on the changes in  $I_{sc}$ .  $T_{84}$  monolayers were grown on permeable supports with a surface area of  $1.98 \text{ cm}^2$ . At the basal state the monolayers has a spontaneous PD and  $I_{sc}$  close to 0. Prostaglandin  $E_1$  ( $PGE_1$ ) were added to the serosal side 35 min after mounting. The  $I_{sc}$  values represent the actual  $I_{sc}$  15 min after the addition of prostaglandin  $E_1$  at the concentration indicated and are expressed as the mean  $\pm$  SE of four to six experiments in microamperes per square centimeter. Only one addition was made to each monolayer.

and could totally account for the change in  $I_{sc}$ . Changes in the  $I_{sc}$  and net  $Cl^-$  secretion had an excellent correlation ( $r = 0.90$ ;  $P < 0.01$ ). No significant effects were observed on net  $Na^+$  flux (illustrated by the open bars in Fig. 2 B). Examination of the unidirectional fluxes showed no changes in mucosal-to-serosal or in serosal-to-mucosal  $Na^+$  movement after the addition of prostaglandin  $E_1$ . In contrast, both serosal-to-mucosal and mucosal-to-serosal  $Cl^-$  fluxes increased, with the increase in the serosal-to-mucosal direction being consistently greater, resulting in net  $Cl^-$  secretion (Table I).

**Inhibition of prostaglandin  $E_1$ -stimulated  $Cl^-$  secretion by bumetanide.** A recent study verified the existence of a basolaterally localized  $Na^+, K^+, Cl^-$  cotransport system in the  $T_{84}$  cell; the study also demonstrated that bumetanide, a loop diuretic, inhibited the  $Na^+, K^+, Cl^-$  cotransport system in this cell line (10). Therefore, bumetanide was used to test the involvement of the  $Na^+, K^+, Cl^-$  cotransport system in the  $Cl^-$  secretory process. Bumetanide inhibited the action of prostaglandin  $E_1$  in a dose-dependent manner when it was added to the serosal bathing media (Fig. 3). A significant inhibitory effect was observed at  $10^{-6}$  M. The inhibition by bumetanide was not complete, at concentrations as high as  $10^{-3}$  M,  $\sim 15\%$  of the peak  $I_{sc}$  induced by prostaglandin  $E_1$  persisted. The time course of response to prostaglandin  $E_1$  in the presence of bumetanide was much shorter in duration, as compared to that observed in the absence of bumetanide. The results of unidirectional and net fluxes are summarized in Table I and Fig. 2 C. Bumetanide (0.3 mM) selectively reduced the increase in serosal-to-mucosal  $Cl^-$  flux stimulated by prostaglandin  $E_1$  resulting in a 80% decrease in net  $Cl^-$  secretion with a similar decrease in  $I_{sc}$ . Bumetanide by itself had no effect on the basal  $Na^+$  or  $Cl^-$  fluxes under our experimental condition. It should be noted that, in the presence of bumetanide, prostaglandin  $E_1$  still increased the transepithelial  $Cl^-$  permeability as reflected by the increased bidirectional  $Cl^-$  fluxes. The increased transepithelial  $Cl^-$  permeability occurred despite the cessation of net  $Cl^-$  secretion. The inhibitory effect of bumetanide was reversible; the  $I_{sc}$  rose significantly when the monolayers were washed and the bathing media were replaced with media containing  $10^{-6}$  M prostaglandin  $E_1$  (without bumetanide). Bumetanide also reversed the action of prostaglandin  $E_1$  when added after prostaglandin  $E_1$  elicited a response (data not shown). The effect of bumetanide was observed only with serosal application. Mucosal addition of bumetanide at  $10^{-5}$  or less had no effect.

**Inhibition of prostaglandin  $E_1$ -stimulated  $Cl^-$  secretion by barium.** Barium, a putative  $K^+$  channel blocker, has been found to inhibit  $Cl^-$  secretion in a number of epithelia (23, 24). We found that  $BaCl_2$  inhibited the increase in  $I_{sc}$  induced by prostaglandin  $E_1$  in a dose-dependent manner when added serosally (Fig. 3), while mucosal addition had little or no effect. A threshold inhibition is observed with  $10^{-4}$  M. At a concentration of  $10^{-3}$  M,  $> 90\%$  of the effect of prostaglandin  $E_1$  was inhibited. The results of unidirectional and net fluxes of  $Na^+$  and  $Cl^-$ , summarized in Table I and Fig. 2 D, confirm that barium inhibited net  $Cl^-$  secretion. Similar to bumetanide, barium by itself had no effect on basal  $I_{sc}$  or on unidirectional  $Na^+$  and  $Cl^-$  fluxes under our experimental condition. Also similar to bumetanide, barium did not inhibit the increase in  $Cl^-$  permeability induced by prostaglandin  $E_1$ , in spite of its ability to inhibit net  $Cl^-$  secretion. Unidirectional  $Cl^-$  fluxes in both directions were augmented by prostaglandin  $E_1$  regardless of the presence of barium. The inhibitory effect of barium on the action of prostaglandin

Table 1. Unidirectional Sodium and Chloride Fluxes across  $T_{84}$  Cell Monolayers: Inhibition of Prostaglandin-induced Chloride Secretion by Inhibitors of Transport Pathways

Experimental groups	Addition	Flux period	Flux								$I_{sc}$	$G$
			$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$	$J_{Na}^{Na}$		
Control ( $n = 6$ )	No addition	1	$0.37 \pm 0.05$	$0.50 \pm 0.09$	$0.13 \pm 0.06$	$0.44 \pm 0.07$	$0.54 \pm 0.11$	$0.10 \pm 0.11$	$0.03 \pm 0.01$	$0.75 \pm 0.11$		
	No addition	2	$0.41 \pm 0.08$	$0.50 \pm 0.09$	$0.10 \pm 0.03$	$0.55 \pm 0.10$	$0.56 \pm 0.11$	$0.01 \pm 0.05$	$0.02 \pm 0.01$	$0.82 \pm 0.13$		
	No addition	3	$0.39 \pm 0.07$	$0.52 \pm 0.08$	$0.13 \pm 0.07$	$0.51 \pm 0.09$	$0.61 \pm 0.08$	$0.10 \pm 0.09$	$0.03 \pm 0.01$	$0.80 \pm 0.12$		
Prostaglandin $E_1$ ( $n = 6$ )	No addition	1	$0.42 \pm 0.09$	$0.42 \pm 0.06$	$0.0 \pm 0.07$	$0.52 \pm 0.09$	$0.49 \pm 0.07$	$-0.03 \pm 0.09$	$0.02 \pm 0.01$	$0.72 \pm 0.09$		
	No addition	2	$0.42 \pm 0.08$	$0.41 \pm 0.05$	$-0.01 \pm 0.08$	$0.55 \pm 0.09$	$0.49 \pm 0.07$	$-0.06 \pm 0.08$	$0.04 \pm 0.01$	$0.76 \pm 0.09$		
	Prostaglandin $E_1$	3	$0.40 \pm 0.06$	$0.40 \pm 0.06$	$0.0 \pm 0.06$	$1.88 \pm 0.08^*$	$1.10 \pm 0.08^*$	$-0.78 \pm 0.06^*$	$0.64 \pm 0.05^*$	$0.98 \pm 0.05^*$		
Bumetanide and prostaglandin $E_1$ ( $n = 5$ )	No addition	1	$0.45 \pm 0.14$	$0.44 \pm 0.11$	$-0.01 \pm 0.05$	$0.56 \pm 0.14$	$0.47 \pm 0.14$	$-0.09 \pm 0.04$	$0.01 \pm 0.01$	$0.73 \pm 0.20$		
	Bumetanide	2	$0.51 \pm 0.10$	$0.46 \pm 0.10$	$-0.05 \pm 0.05$	$0.58 \pm 0.15$	$0.47 \pm 0.11$	$-0.11 \pm 0.06$	$0.01 \pm 0.01$	$0.97 \pm 0.31$		
	Bumetanide and prostaglandin $E_1$	3	$0.66 \pm 0.23$	$0.58 \pm 0.17$	$-0.08 \pm 0.10$	$1.10 \pm 0.29^{\dagger\dagger}$	$0.96 \pm 0.25^*$	$-0.16 \pm 0.03^{\dagger}$	$0.16 \pm 0.03^{\dagger}$	$1.43 \pm 0.38^*$		
$BaCl_2$ and prostaglandin $E_1$ ( $n = 6$ )	No addition	1	$0.39 \pm 0.07$	$0.41 \pm 0.08$	$0.02 \pm 0.05$	$0.45 \pm 0.10$	$0.42 \pm 0.05$	$-0.03 \pm 0.07$	$0.01 \pm 0.01$	$0.77 \pm 0.16$		
	$BaCl_2$	2	$0.43 \pm 0.07$	$0.38 \pm 0.05$	$-0.05 \pm 0.04$	$0.51 \pm 0.10$	$0.48 \pm 0.07$	$-0.03 \pm 0.05$	$0.01 \pm 0.01$	$0.71 \pm 0.13$		
	$BaCl_2$ and prostaglandin $E_1$	3	$0.37 \pm 0.09$	$0.41 \pm 0.06$	$0.04 \pm 0.06$	$1.19 \pm 0.21^{\dagger\dagger}$	$1.14 \pm 0.31^*$	$-0.05 \pm 0.13^{\dagger}$	$0.11 \pm 0.01^{\dagger\dagger}$	$0.84 \pm 0.10$		
Anthracene-9-COOH and prostaglandin $E_1$ ( $n = 6$ )	No addition	1	$0.36 \pm 0.08$	$0.44 \pm 0.07$	$0.08 \pm 0.05$	$0.47 \pm 0.09$	$0.48 \pm 0.10$	$0.01 \pm 0.03$	$0.03 \pm 0.01$	$0.71 \pm 0.11$		
	Anthracene-9-COOH	2	$0.27 \pm 0.04$	$0.33 \pm 0.04$	$0.06 \pm 0.03$	$0.41 \pm 0.07$	$0.39 \pm 0.04$	$-0.03 \pm 0.05$	$0.05 \pm 0.01$	$0.68 \pm 0.06$		
	Anthracene-9-COOH and prostaglandin $E_1$	3	$0.49 \pm 0.11$	$0.42 \pm 0.04$	$-0.07 \pm 0.07$	$0.85 \pm 0.12^{\dagger\dagger}$	$0.65 \pm 0.06^{\dagger}$	$-0.12 \pm 0.09^{\dagger}$	$0.20 \pm 0.04^{\dagger\dagger}$	$0.87 \pm 0.09$		

Results are expressed as mean  $\pm$  SE; the number of paired monolayers for each experimental group ( $n$ ) is indicated in parenthesis. Periods 1, 2, and 3 represent the average to two consecutive 10-min flux periods starting 17 min, 47 min, and 77 min after mounting the addition isotope to the Ussing chambers, respectively. Additions, if made, were at 40 and 70 min for the first and second addition, respectively. The concentration of prostaglandin  $E_1$  was  $1 \mu M$ ; bumetanide,  $0.3 \text{ mM}$ ;  $BaCl_2$ ,  $3 \text{ mM}$ ; and anthracene-9-carboxylic acid,  $10 \text{ mM}$ . \* Significant differences ( $P < 0.05$ ) as compared to controls. † Significant differences as compared to prostaglandin  $E_1$  experiments. Abbreviations:  $G$ , conductance;  $J$ , flux; m, mucosal; s, serosal.

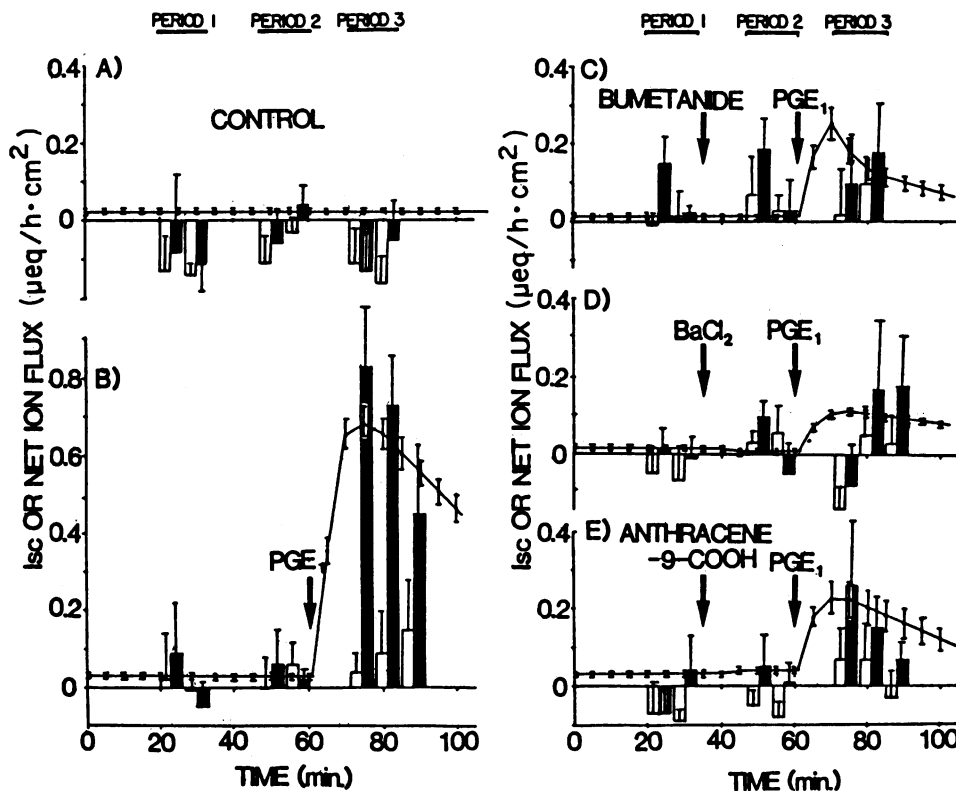


Figure 2. Time course of net  $\text{Na}^+$  and  $\text{Cl}^-$  transport and correlation of net  $\text{Cl}^-$  secretion with the  $I_{sc}$ . (A) Control; (B)  $10^{-6}$  M prostaglandin  $\text{E}_1$  ( $\text{PGE}_1$ ) alone; (C)  $10^{-6}$  M prostaglandin  $\text{E}_1$  in the presence of 0.1 mM bumetanide; (D)  $10^{-6}$  M prostaglandin  $\text{E}_1$  in the presence of 3 mM  $\text{BaCl}_2$ ; (E)  $10^{-6}$  M prostaglandin  $\text{E}_1$  in the presence of 10 mM anthracene-9-carboxylic acid. The means  $\pm$  SE from the same paired monolayers in Table I, which summarizes unidirectional flux rates, are illustrated. The circles and line represent the  $I_{sc}$ ; solid bars represent net  $\text{Cl}^-$  transport, and open bars represent net  $\text{Na}^+$  transport measured over 10-min intervals.  $I_{sc}$  and flux rates are expressed in microequivalents per hour per square centimeter. Values above the line indicate net secretion, and values below the line, net absorption. The time periods covered by periods 1, 2, and 3 in Table I are indicated by lines at the top of the figure.

$\text{E}_1$  was reversible. Barium also reversed the action of prostaglandin  $\text{E}_1$  when barium was added after prostaglandin  $\text{E}_1$  elicited a response (data not shown).

**Evidence for prostaglandin  $\text{E}_1$ -induced  $\text{K}^+$  efflux on the basolateral membrane and its inhibition by barium.** In a variety of epithelia, agents that increased  $\text{Cl}^-$  secretion also caused an increase in basolateral membrane conductance to  $\text{K}^+$ . In order to verify the existence of a  $\text{K}^+$  efflux pathway and test whether barium or bumetanide inhibited this process, monolayers were preloaded with  $^{86}\text{Rb}^+$  (as a tracer for  $\text{K}^+$ ) and mounted in the Ussing chamber. This method allowed the measurement of  $^{86}\text{Rb}^+$  efflux across both the apical and basolateral surfaces while  $\text{Cl}^-$

secretion was simultaneously monitored. The apparent first-order rate constants, along with the mean  $I_{sc}$  (which reflected the net  $\text{Cl}^-$  secretion) and conductance of the monolayer for each of three time intervals in which additions were made, are shown in Table II. At the basal state, the rate of  $^{86}\text{Rb}^+$  efflux into the mucosal bath was  $\sim 20$ -fold smaller than that into the serosal bath. Basal  $^{86}\text{Rb}^+$  efflux rates were not decreased by 3 mM barium or 0.3 mM bumetanide. The addition of prostaglandin  $\text{E}_1$  (which was added to both sides) increased the rate of  $^{86}\text{Rb}^+$  efflux into the serosal bath by approximately twofold, whereas the rate of  $^{86}\text{Rb}^+$  efflux into the mucosal bath was not affected. The increase in basolateral membrane  $^{86}\text{Rb}^+$  efflux rate was totally inhibited by prior addition of 3 mM  $\text{BaCl}_2$  to the bathing media. Net  $\text{Cl}^-$  secretion induced by prostaglandin  $\text{E}_1$  in these experiments was also inhibited by  $\text{BaCl}_2$  as indicated by the  $I_{sc}$ . Somewhat unexpectedly, 0.3 mM bumetanide also inhibited  $^{86}\text{Rb}^+$  efflux induced by prostaglandin  $\text{E}_1$ .

**Inhibition of prostaglandin  $\text{E}_1$ -stimulated  $\text{Cl}^-$  secretion by anthracene-9-carboxylic acid.** Anthracene-9-carboxylic acid was used in this study as a possible  $\text{Cl}^-$  channel blocker, as reported by Welsh (25). Results summarized in Table I and Fig. 2 E demonstrate that  $10^{-2}$  M anthracene-9-carboxylic acid inhibited the effect of prostaglandin  $\text{E}_1$  on unidirectional and net  $\text{Cl}^-$  fluxes. Partial inhibitory action was observed with  $10^{-3}$  M. Both mucosal and serosal addition were equally effective. However, as noted below, anthracene-9-carboxylic acid also inhibited the increase in cyclic AMP production caused by prostaglandin  $\text{E}_1$ . This nonspecific action of anthracene-9-carboxylic acid complicated the interpretation of the results.

**Sidedness of prostaglandin  $\text{E}_1$ -stimulated  $^{36}\text{Cl}^-$  uptake.** Although the study utilizing a putative  $\text{Cl}^-$  channel blocker, anthracene-9-carboxylic acid, was inconclusive, unidirectional  $\text{Na}^+$  and  $\text{Cl}^-$  flux measurements clearly demonstrated a selective in-

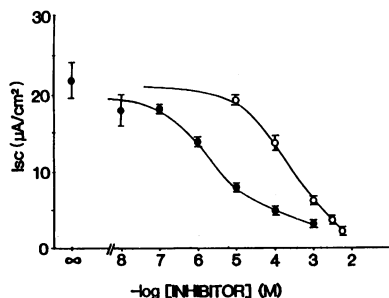


Figure 3. Graded dose effect of bumetanide and barium for inhibition of prostaglandin  $\text{E}_1$ -stimulated  $I_{sc}$ . Varying concentrations of bumetanide ( $\bullet$ ) or barium ( $\circ$ ) were added at 30 min after mounting. After that,  $10^{-6}$  M prostaglandin  $\text{E}_1$  was added to the serosal side of the monolayers mounted in the Ussing chamber at the concentration indicated at 50 min (20 min after the addition of the inhibitors). The means  $\pm$  SE of the peak  $I_{sc}$  observed within 15 min after addition are expressed in microamperes per square centimeter. Three to four experiments were carried out in each group, only one concentration of the inhibitor was tested in each monolayer.

Table II.  $^{86}\text{Rb}^+$  Efflux from  $T_{84}$  Monolayers Mounted in Ussing Chambers

	Period	Addition	$^{86}\text{Rb}^+$ efflux rate constant		$I_{sc}$ $\mu\text{A}/\text{cm}^2$	$G$ $\text{mS}/\text{cm}^2$
			Mucosal	Serosal		
			$h^{-1}$	$h^{-1}$		
Control	1	No addition	$0.040 \pm 0.014$	$0.473 \pm 0.019$	$1.5 \pm 0.3$	$0.7 \pm 0.1$
	2	No addition	$0.046 \pm 0.012$	$0.587 \pm 0.019$	$0.9 \pm 0.2$	$0.5 \pm 0.1$
	3	No addition	$0.034 \pm 0.001$	$0.588 \pm 0.027$	$0.9 \pm 0.2$	$0.4 \pm 0.1$
Bumetanide	1	No addition	$0.046 \pm 0.019$	$0.569 \pm 0.048$	$1.4 \pm 0.6$	$0.7 \pm 0.2$
	2	Bumetanide	$0.037 \pm 0.014$	$0.533 \pm 0.045$	$0.5 \pm 0.1$	$0.5 \pm 0.1$
	3	Bumetanide	$0.043 \pm 0.006$	$0.671 \pm 0.063$	$0.5 \pm 0.1$	$0.5 \pm 0.1$
$\text{BaCl}_2$	1	No addition	$0.034 \pm 0.005$	$0.492 \pm 0.072$	$1.4 \pm 0.2$	$0.6 \pm 0.0$
	2	$\text{Ba}^{++}$	$0.025 \pm 0.006$	$0.494 \pm 0.051$	$0.5 \pm 0.1$	$0.5 \pm 0.1$
	3	$\text{Ba}^{++}$	$0.041 \pm 0.009$	$0.578 \pm 0.082$	$0.5 \pm 0.1$	$0.4 \pm 0.1$
Prostaglandin $\text{E}_1$	1	No addition	$0.031 \pm 0.002$	$0.486 \pm 0.050$	$0.9 \pm 0.2$	$0.6 \pm 0.1$
	2	No addition	$0.034 \pm 0.006$	$0.599 \pm 0.050$	$0.5 \pm 0.1$	$0.4 \pm 0.1$
	3	Prostaglandin $\text{E}_1$	$0.071 \pm 0.009$	$1.218 \pm 0.135^*$	$20.4 \pm 1.9^*$	$0.7 \pm 0.1$
Bumetanide and prostaglandin $\text{E}_1$	1	No addition	$0.031 \pm 0.007$	$0.479 \pm 0.066$	$1.4 \pm 0.2$	$0.6 \pm 0.1$
	2	Bumetanide	$0.026 \pm 0.007$	$0.564 \pm 0.097$	$0.9 \pm 0.2$	$0.5 \pm 0.1$
	3	Bumetanide and prostaglandin $\text{E}_1$	$0.056 \pm 0.006$	$0.688 \pm 0.061$	$4.2 \pm 0.6$	$0.7 \pm 0.1$
$\text{BaCl}_2$ and prostaglandin $\text{E}_1$	1	No addition	$0.029 \pm 0.002$	$0.574 \pm 0.054$	$1.4 \pm 0.2$	$0.6 \pm 0.1$
	2	$\text{Ba}^{++}$	$0.020 \pm 0.005$	$0.578 \pm 0.058$	$1.4 \pm 0.2$	$0.5 \pm 0.1$
	3	$\text{Ba}^{++}$ and prostaglandin $\text{E}_1$	$0.030 \pm 0.002$	$0.637 \pm 0.034$	$3.7 \pm 0.2$	$0.7 \pm 0.1$

The results were analysed during three time intervals. Period 1, 0–24 min; period 2, 24–40 min; and period 3, 48–80 min. Within each time frame, the points were fit to straight lines by the method of least squares. The slope of the line, representing the apparent constant for  $^{86}\text{Rb}^+$  efflux is shown in the table for both apical (mucosal) and basolateral (serosal) effluxes together with the changes in  $I_{sc}$  and conductance ( $G$ ). The results are the mean  $\pm$  SE of three experiments. The concentration of bumetanide was 0.3 mM;  $\text{BaCl}_2$ , 3mM, and prostaglandin  $\text{E}_1$ , 1  $\mu\text{M}$ . \* Significant differences ( $P < 0.05$ ).

crease in  $\text{Cl}^-$  flux across  $T_{84}$  monolayers in both directions in response to prostaglandin  $\text{E}_1$ . These findings suggest that prostaglandin  $\text{E}_1$  activates a  $\text{Cl}^-$  transport pathway. Unilateral  $^{36}\text{Cl}^-$  uptakes were carried out as another independent method to confirm the opening of a  $\text{Cl}^-$  transport pathway by prostaglandin  $\text{E}_1$  and to localize this pathway to the apical or basolateral membrane. The applicability of this  $^{36}\text{Cl}^-$  uptake method has been demonstrated in a recent study (12). We found that VIP, whose action is very similar to prostaglandin  $\text{E}_1$ , stimulated  $^{36}\text{Cl}^-$  efflux as well as  $^{36}\text{Cl}^-$  uptake via a  $\text{Cl}^-$  transport pathway which was apically localized. This  $\text{Cl}^-$  transport pathway in the  $T_{84}$  cells was not inhibited by bumetanide or 4,4'-diisothiocyanostilbene-2,2'-disulfonic acid but was inhibited by *n*-phenyl anthranilic acid and most likely represents the " $\text{Cl}^-$  channel" reported in the literature.  $^{36}\text{Cl}^-$  uptake in the presence of bumetanide reflects the activity of this pathway. The results shown in Fig. 4 indicated that, at the basal state, both apical and basolateral membrane  $\text{Cl}^-$  permeability were observed; however, the increase in  $\text{Cl}^-$  permeability activated by prostaglandin  $\text{E}_1$  was localized to the apical membrane alone. This increase in  $\text{Cl}^-$  permeability on the apical membrane by prostaglandin  $\text{E}_1$  was not inhibited by bumetanide, and most likely represented the site for electrogenic  $\text{Cl}^-$  exit in the  $\text{Cl}^-$  secretory process stimulated by prostaglandin  $\text{E}_1$ .

*Effect of prostaglandin  $\text{E}_1$  and specific inhibitors on cyclic AMP production.* To test whether the action of prostaglandin  $\text{E}_1$

was associated with an increase in cyclic AMP levels, we measured the cyclic AMP in response to prostaglandin  $\text{E}_1$  (Table III). Cellular cyclic AMP production increased dramatically when the  $T_{84}$  cells were incubated with prostaglandin  $\text{E}_1$ , confirming that the action of prostaglandin  $\text{E}_1$  in the  $T_{84}$  cells was similar to those reported for isolated intestine. To test whether the inhibitory effects of bumetanide, barium, and anthracene-9-carboxylic acid were independent of the cyclic AMP levels, cellular cyclic AMP production in response to  $10^{-6}$  M prostaglandin  $\text{E}_1$  were measured in the presence and absence of these inhibitors. The presence of bumetanide and  $\text{BaCl}_2$ , at the concentrations that inhibit  $\text{Cl}^-$  secretion, did not prevent the increase in cyclic AMP produced by prostaglandin  $\text{E}_1$ . Bumetanide did reduce the level of cyclic AMP produced in response to prostaglandin  $\text{E}_1$ . However, a similarly low level of cyclic AMP (stimulated by a lower concentration of prostaglandin  $\text{E}_1$ ) readily caused  $\text{Cl}^-$  secretion, suggesting that the inhibitory effect on  $\text{Cl}^-$  secretion occurs at a step distal to the production of cyclic AMP. However, cyclic AMP production was totally inhibited by anthracene-9-carboxylic acid and *n*-phenyl anthranilic acid, indicating that these compounds were not specific.

## Discussion

The use of cultured cell lines as model systems may allow better elucidation of the cellular mechanisms involved in the electrolyte

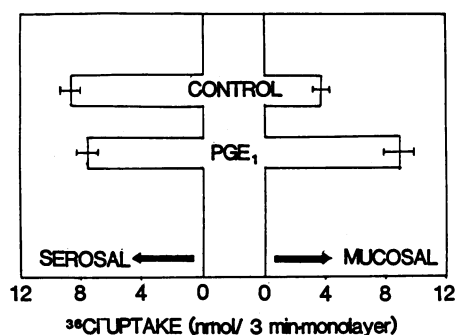


Figure 4. Confluent monolayers grown on permeable supports similar to those utilized in the Ussing chamber studies were preincubated in KCl and sucrose-ouabain buffer as described in Methods. Both the serosal and mucosal surfaces were so treated.  $^{36}\text{Cl}^-$  uptake was carried out in uptake buffer consisting of 140 mM Na gluconate, 20 mM Tris-Hepes, 1 mM Ca gluconate, 1 mM Mg gluconate, 0.5 mM ouabain, 0.1 mM bumetanide, 1  $\mu\text{Ci/ml}$   $^{36}\text{Cl}$  (final concentration = 4.3 mM), with or without  $10^{-6}$  M prostaglandin  $\text{E}_1$  ( $\text{PGE}_1$ ). An identical buffer, without added  $^{36}\text{Cl}^-$ , was added simultaneously to the opposite side. Uptakes were carried out for 3 min at room temperature before terminating by dunk-washing in four successive 1-liter containers of Mg gluconate-sucrose buffer. Results are the means  $\pm$  SE of triplicate determinations.

secretory processes. Cultured cells possess a number of distinct advantages and disadvantages (26, 27). The advantages stem from the homogeneity of the cultured cell population which, in contrast to intact epithelial tissues, contains only a single cell type. Among the disadvantages is the concern that cultured cell

Table III. Cyclic AMP Production by  $\text{T}_{84}$  Cells in Response to Prostaglandin  $\text{E}_1$

Experiment (15 min)	cAMP level pmol per mg protein
Control	$5 \pm 1$
$10^{-8}$ M $\text{PGE}_1$	$14 \pm 1^*$
$10^{-7}$ M $\text{PGE}_1$	$25 \pm 3^*$
$10^{-6}$ M $\text{PGE}_1$	$100 \pm 4^*$
$10^{-6}$ M $\text{PGE}_1$ + DMSO	$142 \pm 6^*$
$10^{-6}$ M $\text{PGE}_1$ + 0.3 mM bumetanide	$44 \pm 2^*\ddagger$
$10^{-6}$ M $\text{PGE}_1$ + 0.1 mM bumetanide	$53 \pm 4^*\ddagger$
$10^{-6}$ M $\text{PGE}_1$ + 3 mM $\text{BaCl}_2$	$109 \pm 10^*$
$10^{-6}$ M $\text{PGE}_1$ + 10 mM anthracene-9-carboxylic acid	$6 \pm 1\ddagger$
$10^{-6}$ M $\text{PGE}_1$ + 10 mM <i>n</i> -phenyl anthranilic acid	$10 \pm 1\ddagger$

Cyclic AMP production in response to prostaglandin  $\text{E}_1$  ( $\text{PGE}_1$ ) in  $\text{T}_{84}$  cells in the presence and absence of specific inhibitors.  $\text{T}_{84}$  cells were preincubated for 15 min with the indicated agents as described in Methods. The results are expressed as mean  $\pm$  SE of four experiments in picomoles per milligram of protein. Bumetanide, barium, or anthracene-9-carboxylic acid by itself did not affect basal cyclic AMP production. Dimethyl sulfoxide (DMSO) up to 10  $\mu\text{l/ml}$ , the amount needed to dissolve anthracene-9-carboxylic acid and *n*-phenyl anthranilic acid did not inhibit cyclic AMP production induced by  $\text{PGE}_1$ .

\* Significant difference as compared to control.

$\ddagger$  Significant difference as compared to results obtained with  $10^{-6}$  M  $\text{PGE}_1$ .

lines, which lack certain mechanisms of normal growth control, may also be different from normal cells in other aspects. Thus, cultured cell lines should be useful for the study of certain physiologic mechanisms only if they possess similar properties as compared to those observed in intact organs.

In this report, we have demonstrated that  $\text{T}_{84}$  monolayers responded to prostaglandin  $\text{E}_1$  in a manner similar to those occurring with isolated intestine of animals and humans (4–7); and therefore, the cell line may serve as a useful model system to study the mechanism of action of prostaglandin  $\text{E}_1$ . In the  $\text{T}_{84}$  cells, prostaglandin  $\text{E}_1$  caused an increase in both serosal-to-mucosal and mucosal-to-serosal  $\text{Cl}^-$  movements with the increase in the serosal-to-mucosal direction being consistently greater, resulting in net  $\text{Cl}^-$  secretion. The only differences as compared to isolated intestine include (a) the fact that  $\text{Na}^+$  fluxes were not also affected by prostaglandin  $\text{E}_1$ , and (b) the graded dose effect of prostaglandin  $\text{E}_1$  was at least 10–100-fold more potent, as compared to that reported previously with isolated intestine. The finding that  $\text{Na}^+$  fluxes did not change actually is similar to that observed in isolated colon and support the belief that  $\text{Cl}^-$  is the ion primarily regulated by prostaglandin  $\text{E}_1$ . The lack of absorptive cells and our ability to short circuit the monolayers better, together with the high resistance of the monolayers, might make passive paracellular movement of  $\text{Na}^+$  more restricted as compared to isolated small intestine. Regarding the increased sensitivity to prostaglandin  $\text{E}_1$ , this may be a result of the monolayer presenting less barrier to prostaglandin  $\text{E}_1$ , as compared to isolated intestine. Because the only barrier was a relatively thin and porous collagen-coated Nuclepore filter, more prostaglandin  $\text{E}_1$  might reach the basolateral membrane where it could activate the  $\text{Cl}^-$  secretory function of the cells. A similar increase in sensitivity of  $\text{T}_{84}$  cells to other secretagogues, such as VIP, has been observed in an earlier study (10). Another postulate is that isolated intestine might be presensitized or down-regulated by endogenous prostaglandin  $\text{E}_1$ . Support for this idea is the finding that indomethacin, which blocks endogenous prostaglandin synthesis, increased the sensitivity of isolated intestine to prostaglandins by about 10-fold (6). The relatively transient response to prostaglandin  $\text{E}_1$  is also compatible with a possible down-regulation.

Measurement of cyclic AMP confirmed that the effect of prostaglandin  $\text{E}_1$  was associated with an increase in cellular cyclic AMP. A similar increase in cyclic AMP production was also observed with VIP, which caused  $\text{Cl}^-$  secretion identical to prostaglandin  $\text{E}_1$  in the  $\text{T}_{84}$  cell line (10, 28). The results suggest that both prostaglandin  $\text{E}_1$  and VIP cause net  $\text{Cl}^-$  secretion via the same cyclic AMP-mediated mechanism, similar to those observed in isolated intestine (7, 29). Our studies did not address the question why the response to prostaglandin  $\text{E}_1$  appeared to be less sustained as compared to VIP. One explanation is that the level of cyclic AMP maximally produced by prostaglandin  $\text{E}_1$  was lower.

The major aims of our study were to identify the transport pathways involved in the  $\text{Cl}^-$  secretory process activated by prostaglandin  $\text{E}_1$ . The homogeneity of our cell model together with the accessibility to both apical and basolateral membrane provides unique advantages for this type of study. We selected to test the involvement of three transport pathways, including the  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport pathway, the  $\text{K}^+$  channels, and the  $\text{Cl}^-$  channels, because other studies in the  $\text{T}_{84}$  cell imply their involvement in the  $\text{Cl}^-$  secretory process induced by VIP, carbachol, and calcium ionophore A23187 (10–15).



By the use of bumetanide, we have implicated the involvement of the  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport pathway on the basolateral membrane. The results also suggest that this transport pathway serves as the  $\text{Cl}^-$  uptake step in the  $\text{Cl}^-$  secretory process, and is required to sustain the action of prostaglandin  $\text{E}_1$ .  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport has been observed in a variety of cells and is inhibitable by bumetanide (30–37). In a recent study, the existence of a bumetanide-sensitive  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport pathway has been demonstrated in the  $\text{T}_{84}$  cells and localized to the basolateral membrane (10). In the present study, we have shown that serosal application of bumetanide inhibited net  $\text{Cl}^-$  secretion induced by prostaglandin  $\text{E}_1$ . That bumetanide inhibition occurred only when it was present on the serosal surface is compatible with the notion that the cotransport pathway serves as a  $\text{Cl}^-$  uptake step across the basolateral membrane, and that this pathway is localized to the basolateral membrane (10). It should be noted that inhibition by bumetanide was incomplete. This might be due to incomplete blockage of the cotransport system by bumetanide. Alternate explanations include the possibility that  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport might not be directly regulated by prostaglandin  $\text{E}_1$ , but rather serves to bring  $\text{Cl}^-$  into the cell in the presence of a favorable electrochemical gradient, i.e., after  $\text{Cl}^-$  is secreted from the cells. The sensitivity of  $\text{Cl}^-$  secretion to loop diuretic has been observed in a variety of epithelia (38–44) and suggests that similar  $\text{Cl}^-$  uptake mechanisms may be shared by many epithelial cell types that secrete  $\text{Cl}^-$ .

A sequence of studies confirms the critical role of  $\text{K}^+$  recycling in the  $\text{Cl}^-$  secretory process. Firstly, by measuring  $\text{Na}^+$  and  $\text{Cl}^-$  fluxes, we have observed that  $\text{Cl}^-$  secretion was inhibited by serosal application of barium. Secondly, utilizing  $^{86}\text{Rb}^+$  efflux technique, we demonstrated the existence of a  $\text{K}^+$  efflux pathway on the basolateral membrane. Thirdly, by the same technique, we showed that the activity of this  $\text{K}^+$  efflux pathway was stimulated by prostaglandin  $\text{E}_1$ . Finally, we proved that barium inhibited the increase in  $\text{K}^+$  efflux by prostaglandin  $\text{E}_1$  across the basolateral membrane. Participation of  $\text{K}^+$  channels in the  $\text{Cl}^-$  secretory process has been suggested in a number of studies. Barium, an inhibitor for a number of  $\text{K}^+$  channels (45–50), has been found to inhibit electrogenic  $\text{Cl}^-$  secretion in frog and piglet gastric mucosa (23, 24). Increased basolateral membrane permeability has also been observed, and attributed to  $\text{K}^+$ , during  $\text{Cl}^-$  secretion in other epithelial cells (51, 52).

Activation of a  $\text{Cl}^-$  exit pathway by prostaglandin  $\text{E}_1$  has been implicated both indirectly and directly in the present study. The persistent increase in bidirectional  $\text{Cl}^-$  fluxes by prostaglandin  $\text{E}_1$  regardless of the presence of bumetanide or barium indirectly suggests the activation of another  $\text{Cl}^-$  transport pathway besides the  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport system. Utilizing  $^{36}\text{Cl}^-$  uptake techniques, we detected a  $\text{Cl}^-$  transport pathway on the apical membrane which is insensitive to bumetanide and stimulated by prostaglandin  $\text{E}_1$ . Under the same experimental conditions, this  $\text{Cl}^-$  transport pathway in the  $\text{T}_{84}$  cells has been demonstrated to function in both uptake and efflux directions (12). Verification that this  $\text{Cl}^-$  transport pathway represented the  $\text{Cl}^-$  channel was beyond the scope of this study, as our experimental techniques could not directly differentiate between a "channel" and a "carrier." The findings in this study compare favorably with those observed in other epithelia, i.e., the intestine, trachea, and gallbladder, which suggests that cyclic AMP or prostaglandin  $\text{E}_1$  increase  $\text{Cl}^-$  permeability of the apical membrane (51–54). In this study, we have observed that the  $\text{Cl}^-$  secretory process was inhibited by anthracene-9-carboxylic acid similarly to  $\text{Cl}^-$  secretion in the trachea (25). However, the find-

ing that anthracene-9-carboxylic acid inhibited cyclic AMP production, which mediated the  $\text{Cl}^-$  secretory process, complicated the results. Our study indicates the need for cautious interpretation of the action of this putative  $\text{Cl}^-$  channel blocker.

The interrelation between these transport pathways in the  $\text{Cl}^-$  secretory process remains to be fully elucidated.  $\text{Na}^+, \text{K}^+, \text{ATPase}$  pump activity appeared to be needed for the net  $\text{Cl}^-$  secretory process, as ouabain effectively inhibited net  $\text{Cl}^-$  secretion (data not shown). Our studies suggest that the driving force for net  $\text{Cl}^-$  secretion, provided by the  $\text{Na}^+, \text{K}^+, \text{ATPase}$  pump, is closely associated with the  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport and the  $\text{K}^+$  efflux pathways, all located basolaterally. Inhibition of  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport or  $\text{K}^+$  recycling by bumetanide or barium, respectively, resulted in an inhibition of net  $\text{Cl}^-$  secretion. Our studies also provide evidence that prostaglandin  $\text{E}_1$  activates or opens a  $\text{Cl}^-$  transport pathway, presumably the  $\text{Cl}^-$  channel on the apical membrane, and suggest that this activation occurs rapidly and independently of the  $\text{Na}^+, \text{K}^+, \text{Cl}^-$  cotransport and  $\text{K}^+$  efflux mechanisms. An opening of the  $\text{Cl}^-$  channels, which by itself may not increase  $\text{Cl}^-$  secretion, allowed an effective  $\text{Cl}^-$  secretory process to occur in the presence of the proper driving force. In addition, other factors such as cell volume and electrical properties of the cell may also be important.

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