

Effects of Glutamate Receptor Antagonists and Protein Synthesis Inhibitor on Delayed Neuronal Death Induced by Transient Global Ischemia in Rat Brain

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It has been well documented that transient forebrain global ischemia causes selective neuronal degeneration in hippocampal CA1 pyramidal neurons with a delay of a few days. The mechanism of this delayed hippocampal CA1 pyramidal neuronal death (DND) is still controversial. To delineate the mechanisms of the DND, the effects of treatment with MK-801, an NMDA receptor antagonist, kynurenic acid, a NMDA/non-NMDA receptor antagonist, and/or cycloheximide, a protein synthesis inhibitor, on the DND were investigated in male Wistar rats. To examine the participation of apoptotic neuronal death in the DND, TUNEL staining was performed in ischemic brain section. Global ischemia was induced by 4-vessel occlusion for 20 min. All animals in this study showed the DND 3 and 7 days after the ischemic insult. The DND that occurred 3 days and 7 days after the ischemia were not affected by pretreatment with MK-801 (1 mg/kg), but markedly attenuated by the pretreatment with kynurenic acid (500 mg/kg). Treatment with cycloheximide (1 mg/kg) also markedly inhibited the DND. The magnitudes of attenuation by the two drugs were similar. The magnitude of attenuation by co-treatments with kynurenic acid and cycloheximide was not greater than that with any single treatment. TUNEL staining was negative in the sections obtained 1 or 2 days after the ischemic insults, but it was positive at hippocampal CA1 pyramidal cells in sections collected 3 days after the ischemia. These results suggested that the DND should be mediated by the activation of non-NMDA receptor, not by the activation of NMDA receptor and that the activation of AMPA receptor should induce the apoptotic process in the DND.

Key Words: Global cerebral ischemia, Delayed neuronal death, MK-801, Kynurenic acid, Cycloheximide, Apoptosis

INTRODUCTION

Transient forebrain ischemia causes selective neuronal degeneration in hippocampal CA1 pyramidal neurons with a delay of a few days. Kirino (1982) observed this phenomenon in mongolian gerbils and named it delayed neuronal death (DND). The DND was observed in many species including human (Petito et al, 1987), rat (Pulsinelli et al, 1982; Kirino et al, 1984; Petito & Pulsinelli, 1984a, b; Freund et al,

1990; Deshpande et al, 1992) and gerbil (Ito et al, 1975; Kirino, 1982; Crain et al, 1988; Araki et al, 1989).

It has been well known that glutamate, a representative excitatory amino acid neurotransmitter of central nervous system (CNS); could kill the CNS neurons at high concentration, and it was named as excitotoxicity (Olney, 1986). The excitotoxicity is mediated through the overstimulation of ionotropic glutamate receptors, which are subdivided into NMDA and non-NMDA receptors. The excitotoxic neuronal death has been regarded as an important component of ischemic neuronal death (Auer et al, 1984; Benveniste et al, 1984; Simon et al, 1984; Wieloch,

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1985a, b; Choi, 1991, 1992). The involvement of excitotoxicity in the process of DND is still controversial.

Ischemic neuronal death has seemed a prototype for necrosis; indeed Wyllie et al (1980), who coined the term 'apoptosis', used ischemic insults as an example of necrosis. Some recent reports suggested that apoptosis should take part in the process of DND (Goto et al, 1990; Shigeno et al, 1990).

This study was performed to delineate the mechanism of the DND, focusing on the relationship between excitotoxicity and apoptosis in the process of DND. The effects of treatment with MK-801, an NMDA receptor antagonist, kynurenic acid, a NMDA/non-NMDA receptor antagonist, and/or cycloheximide, a protein synthesis inhibitor, on the DND were investigated in male Wistar rats. To examine the participation of apoptotic neuronal death in the DND, TUNEL (nick end-labelling of biotin-dUTP using terminal deoxynucleotidyltransferase) staining was performed in ischemic brain section.

METHODS

Transient forebrain ischemia

This study was performed in male Wistar rats supplied from the animal facility of the Korean Food and Drug Administration weighing 280~330 g. Transient forebrain ischemia was induced by four-vessel occlusion (4-VO), as described by Pulsinelli et al (1982). Briefly, the animals were anesthetized with intramuscular injection of ketamine (90 mg/kg) and xylazine (10 mg/kg), and both vertebral arteries were electrocauterized at the first cervical vertebrae. The common carotid arteries were isolated and a loose snare was placed around each artery. Twenty-four hours later, the common carotid arteries were re-exposed under the anesthesia with 1% halothane in 100% O₂. And then the anesthesia was discontinued and both carotid arteries were clamped with aneurysmal clips for 20 min. The animals showed righting reflex during the 20 min-ischemia were discarded. The rectal temperature of the animals was maintained at 37±1°C using Homeothermic Blanket Control Unit (Harvard, UK) during the operation period and until righting reflex was restored.

Histological assessment of DND

For histological assessment of DND at day 3 or 7 following the ischemic insult, the animals were anesthetized with pentobarbital sodium (100 mg/kg, i.p.) and sacrificed by transcardiac perfusion fixation with 4% paraformaldehyde in phosphate buffer (pH 7.4) preceded by a brief rinse with physiologic saline. The brains were immediately removed and fixed in a same fixative for 16~18 h. The brains were embedded in paraffin and cut into 15 µm coronal sections. The sections were deparaffinized and stained with hematoxylin and eosin. Measurements of neuronal damage were focused on the CA1 area of dorsal hippocampus in both hemisphere between 3.7~4.1 mm posterior to bregma. The histologic score of DND was graded using the Pulsinelli et al (1982) scale modified as follows: 0 = absence of lesion, 1 = less than 10% of damaged neurons, 2 = 10~50% of damaged neurons, 3 = 50~90% of damaged neurons, 4 = over 90% of damaged neurons. The grading was conducted by an observer who was blinded to experimental protocol. Sections from at least 2 different coronal levels of dorsal hippocampus from each animal were examined.

TUNEL staining

Nick end-labelling of biotin-dUTP using terminal deoxynucleotidyltransferase (TdT) was performed to detect DNA fragmentation in paraffin section 24 and 72 h after the ischemic insults. Briefly, after deparaffinizing sections and digesting protein in sections using proteinase K and then quenching endogenous peroxidase activity with 2% H₂O₂ in PBS, the slides were placed in equilibration buffer and then in the mixture of TdT enzyme and biotinylated dUTP, followed by stopping the reaction with 2×SSC (sodium chloride, sodium citrate) buffer. After applying streptavidin peroxidase to the slides, peroxidase was detected with 3-amino-9-ethylcarbazole (AEC), and then the slides were counterstained with hematoxylin.

Experimental protocol

Animals were randomly classified into sham-operation (n=6, bilateral vertebral artery coagulation without common carotid artery occlusion) and ischemia groups. The ischemia group was subclassified into one control (saline-treated) and four drug treated

groups. Each ischemia subgroup was further divided according to the survival time (3 days or 7 days) following the ischemic insults. Drug treated groups were MK-801 (1 mg/kg)- treated (3 days; n=9, 7 days; n=6), kynurenic acid (500 mg/kg) -treated (3 days; n=6, 7 days; n= 6), cycloheximide (1 mg/kg)-treated (3 days; n=8, 7 days; n= 6) and cycloheximide and kynurenic acid- co-treated (3 days; n=6, 7 days; n= 6). All drugs and saline except cycloheximide were injected intraperitoneally 30 min prior to ischemic insults with the volume of 0.1~0.2 ml/100 g. All animals pretreated with cycloheximide received another cycloheximide injection 24 hr after the ischemic insult.

Drug used

(+)-MK-801 hydrogen maleate was purchased from

Research Biochemical International (Natick, MA, USA), and cycloheximide and kynurenic acid were from Sigma (St. Louis, MO, USA). MK-801 or cycloheximide was dissolved in physiologic saline, and kynurenic acid was dissolved in 1N NaOH and adjusted to pH 7.4 with HCl.

Statistical analysis

The data were expressed as the mean \pm standard error of the mean (SEM). To compare the multiple means of histologic scores, Kruskal-Wallis analysis of variance (ANOVA), a non-parametric analysis method, was used. Analysis between 2 groups was evaluated by Mann-Whitney U test. Probability value of less than 0.05 was considered to be statistically significant.

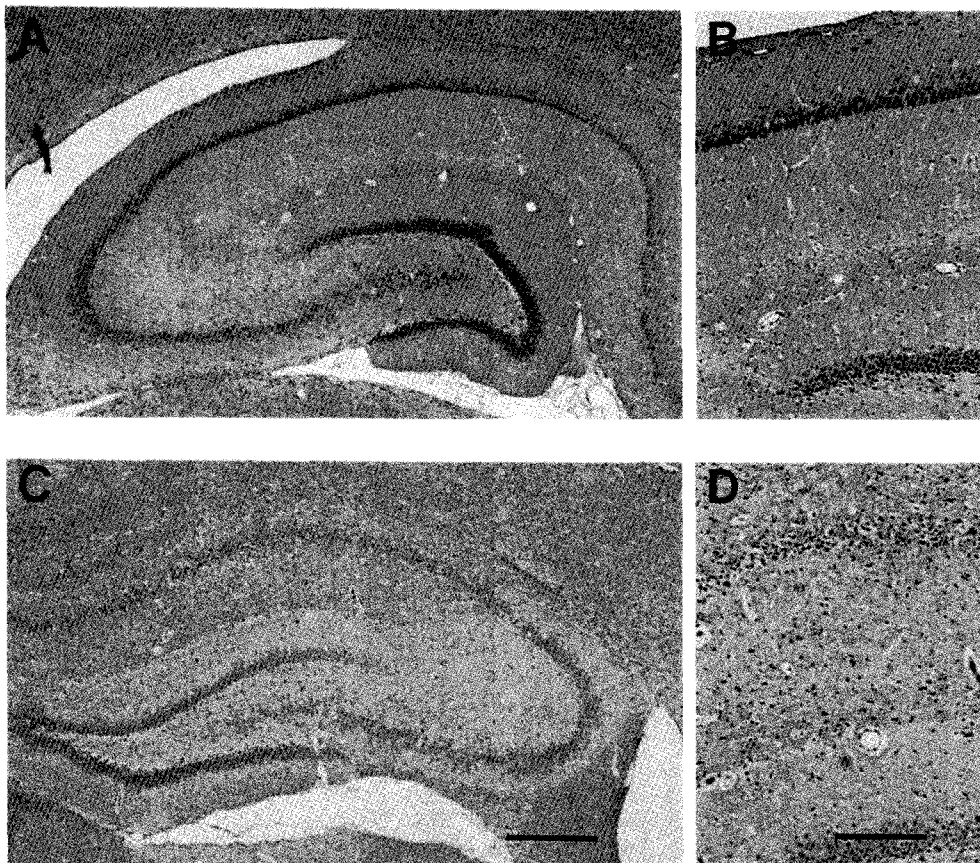


Fig. 1. Light micrographs of 15 μ m coronal sections stained with hematoxylin-eosin are showing hippocampal area 3 days following sham operation (A, B), 20 min global ischemia (C, D) in Wistar rat. B and D are pyramidal CA1 area in higher magnification. Calibration bars: 500 μ m in C and 190 μ m in D.

RESULTS

In sham-operated animals ($n=6$), the hippocampal CA1 pyradimal neurons did not show any morphological abnormalities 3 days after operation (Fig. 1. A, C). Three days following 20 min of 4-VO ischemia, however, selective neuronal death produced in the hippocampal CA1 pyradimal neurons (Fig. 1. B, D). Some of the 3-day survival group (4 out of 10) displayed partial neuronal death (histological scores; 2 or 3), while the rest of the animals showed almost entire neuronal death (histological score; 4). In 7-day survival group, all animals showed histological score 4 (Fig. 2).

The pretreatment with MK-801 (1 mg/kg), a non-competitive NMDA receptor antagonist, had no effect on the DND in either 3-day or 7-day survival group (Fig. 3). However, the pretreatment with kynurenic acid (500 mg/kg), a NMDA/non-NMDA receptor antagonist, significantly attenuated the DND in 3-day or 7-day survival group compared with the corresponding control ischemia group ($p<0.01$) (Fig. 4). The pre- and post-treatment with cycloheximide, a protein synthesis inhibitor, also significantly attenuated the DND in either 3-day or 7-day survival group ($p<0.01$). The inhibitory effect of cyclohexi-

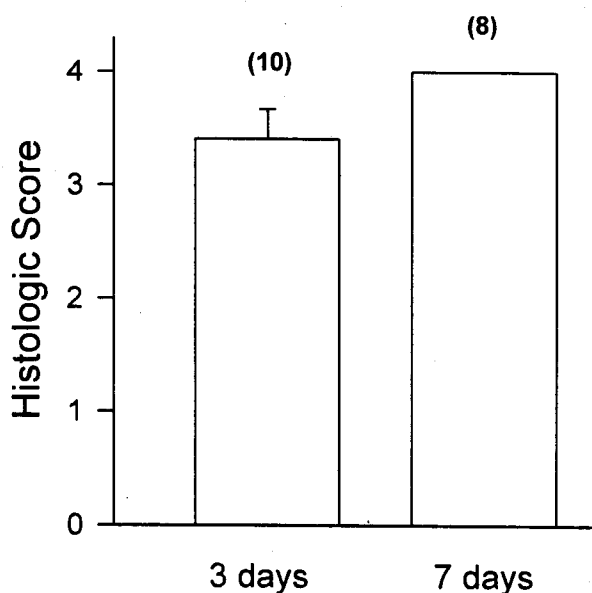


Fig. 2. Bar graph illustrating the histologic score 3 days and 7 days following 20 min-ischemia. Vertical bars are mean \pm SEM. Numerals in parenthesis are number of animals.

mide on DND was comparable to that of kynurenic acid (Fig. 5). These data indicated that not only kynurenic acid, an anti-excitotoxic agent, but also cy-

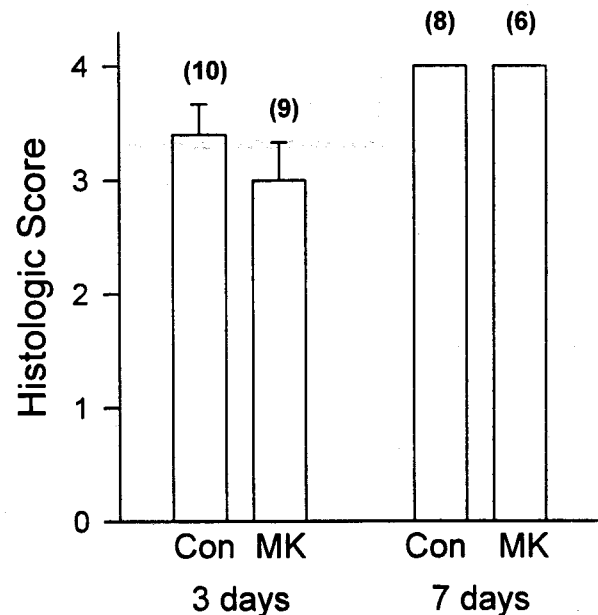


Fig. 3. MK-801 (1 mg/kg) has no protective effect on the ischemia-induced hippocampal CA1 pyradimal cell death. Legends are the same as in Fig. 2.

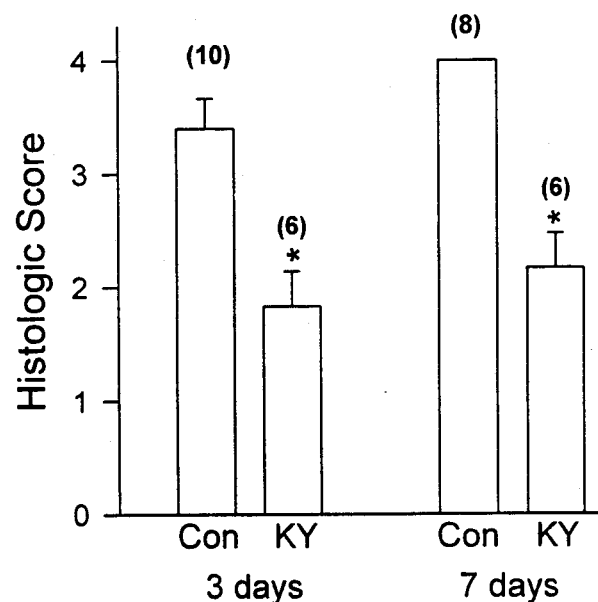


Fig. 4. Neuroprotective action of kynurenic acid (500 mg/kg) on the ischemia-induced hippocampal neurodegeneration. Legends are the same as in Fig. 2. Asterisk denotes significant difference comparing with control ischemic insults ($p<0.01$).

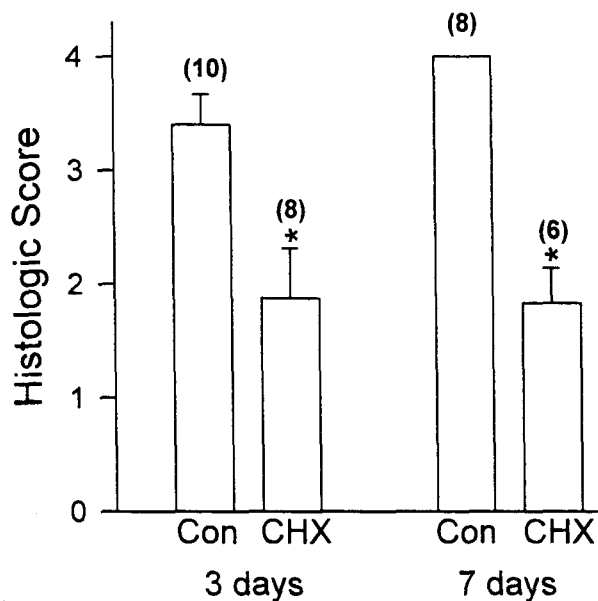


Fig. 5. Neuroprotective action of cycloheximide (1 mg/kg) on the ischemia-induced hippocampal neurodegeneration. Legends are the same as in Fig. 2. Asterisk denotes significant difference comparing with control ischemic insults ($p < 0.01$).

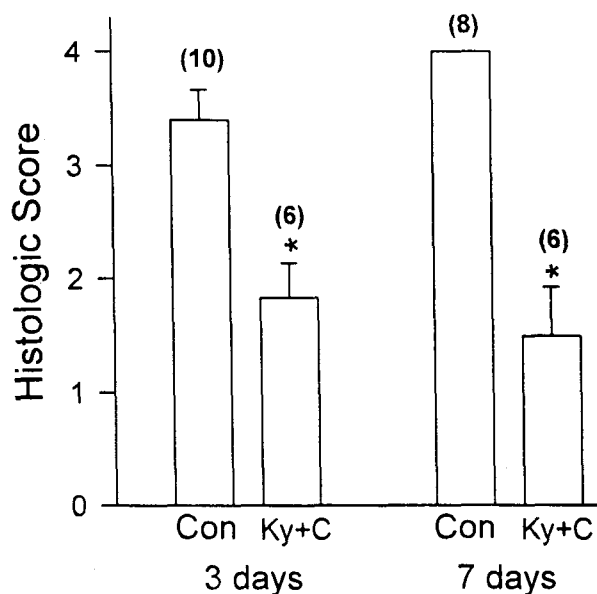


Fig. 6. Neuroprotective action of combined treatment of cycloheximide (1 mg/kg) and kynurenic acid (500 mg/kg) on the ischemia-induced hippocampal neurodegeneration. Legends are the same as in Fig. 2. Asterisk denotes significant difference comparing with control ischemic insults ($p < 0.01$).

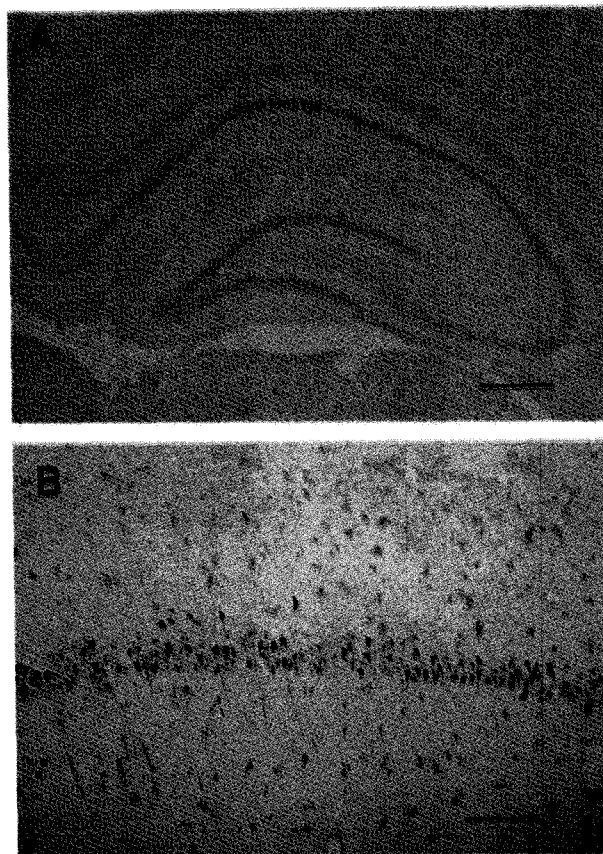


Fig. 7. Light micrographs of positive staining of TUNEL reaction in hippocampal CA1 pyramidal layers 3 days following 20 min-ischemia (A) and in higher magnification (B). Calibration bar: 500 μm in A and 100 μm in B. Labeling was done with 3-amino-9-ethylcarbazole. Hematoxylin counterstaining.

cycloheximide, an anti-apoptotic agent, could inhibit DND. Therefore, to examine the existence of synergism between the two drugs, the effect of combined treatment with kynurenic acid and cycloheximide on DND was investigated. The combined treatment with the two drugs also significantly attenuated the DND in either 3-day or 7-day survival group, however the magnitude of attenuation was not additive at all (Fig. 6).

Cycloheximide, which has been widely used as a pharmacological agent for inhibiting apoptotic cell death, significantly attenuated the DND (Fig. 5). We tried to examine the involvement of apoptosis in DND morphologically, using TUNEL staining. TUNEL staining was positive at hippocampal CA1 pyramidal cells in sections obtained 3 days after the ischemia (Fig. 7), but negative in the sections obtained 1 or 2 days after the ischemic insults (data not shown).

DISCUSSION

Present study demonstrated that pretreatment with MK-801, a non-competitive NMDA receptor antagonist, did not protect the DND. In accordance with our data, many laboratories have reported that NMDA receptor antagonists could not attenuate DND (Fleischer et al, 1989; Michenfelder et al, 1989; Lanier et al, 1990; Buchan et al, 1991a). However, it has been reported that treatment with MK-801 significantly attenuated the DND in mongolian gerbils (Gill et al, 1987) and rats (Rod & Auer, 1989; Swan & Meldrum, 1990). This disagreement of neuroprotective effect of MK-801 was explained by Pulsinelli et al (1993). They insisted that body temperature was a major reason for the discrepancy. It has been well known that hypothermia protects the experimental ischemic brain injury (Ginsberg et al, 1993) and that MK-801 induces hypothermia (Buchan & Pulsinelli, 1990). They demonstrated that MK-801 protected the DND with prolonged hypothermia. When normothermia was maintained, however, the neuroprotective effect was lost.

MK-801 failed to protect the DND, but the pretreatment with kynurenic acid (500 mg/kg), a non-selective NMDA/non-NMDA receptor antagonist, protected the DND in this study. These data indicated that the blockade of non-NMDA receptor might protect the DND. The major difference between NMDA and non-NMDA receptors is Ca^{2+} permeability, that is, calcium ion could pass through NMDA receptor channel, but not non-NMDA receptor channel. Non-NMDA receptors are subdivided into AMPA (amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid) and kainate receptors (Monaghan et al, 1989). Furthermore, AMPA receptors comprise four closely related subunits, GluR-1, 2, 3, 4 (Sommer & Seeburg, 1992). Homomeric or heteromeric channels assembled from GluR-1, GluR-3 and/or GluR-4 subunit are permeable to Ca^{2+} , but homomeric GluR-2 channels as well as heteromeric channels formed with the participation of GluR-2 drastically lose Ca^{2+} permeability (Hollmann et al, 1989; Burnashev et al, 1992). Sustained Ca^{2+} influx through glutamate receptor channels is thought to play a critical role in postischemic cell death (Choi, 1992). In accordance with this calcium hypothesis, Pellegrini-Giampietro et al (1992, 1994) reported that GluR-2 gene expression was preferentially reduced in CA1 hippocampal neurons at a time point that preceded their degeneration following a severe

transient forebrain ischemia. In addition to these reports, Buchan et al (1991a, b) demonstrated that MK-801 could not attenuate the DND, while NBQX, a selective AMPA receptor antagonist, could protect the DND. Taken together, the neuroprotective effect of kynurenic acid in this study should be resulted from the blockade of AMPA receptor.

Pre- and post-treatment with cycloheximide (1 mg/kg), a protein synthesis inhibitor, attenuated the DND in the present study. Cycloheximide has been reported as an anti-apoptotic agent in various neuronal apoptosis-related *in vitro* and *in vivo* experiments, such as developmental programmed neuronal death (Oppenheim et al, 1990; Oppenheim, 1991), the neuronal deaths induced by the deprivation of neurotrophins (Martin et al, 1988; Scott & Davies, 1990), staurosporin, a protein kinase inhibitor (Koh et al, 1995), irradiation (Inoyue et al, 1992; Ferrer 1992), global cerebral ischemia (Goto et al, 1990; Shigeno et al, 1990; Papas et al, 1992) or focal cerebral ischemia (Linnik et al, 1993). Furthermore, hippocampal CA1 pyramidal neurons were stained with TUNEL staining at sections obtained 3 days after ischemic insults. TUNEL staining is a well-known morphological marker for apoptotic cell death (Gavrieli et al, 1992; Heron et al, 1993). Even though there were several reports contrary to our results (Deshpande et al, 1992; Tortosa et al, 1994), present study strongly suggested that apoptosis should participate in the process of DND.

In this study, cycloheximide and kynurenic acid attenuated the DND with a similar magnitude, and a combined treatment of both drugs did not show any synergism. If the two drugs inhibited the DND through blocking different cell death pathways, the combined treatment would show synergism. In this point of view, these results implied that the activation of AMPA receptor induced by transient ischemia produced DND via apoptosis.

In conclusion, these results suggested that the DND should be mediated by the activation of non-NMDA receptor, but not by the activation of NMDA receptor, and that the activation of AMPA receptor is involved in the apoptotic process of the DND.

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