RESEARCH ARTICLE

Comparative Study of Toxic Effects of Anatase and Rutile Type Nanosized Titanium Dioxide Particles *in vivo* and *in vitro*

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Abstract

Two types of nanosized titanium dioxide, anatase (anTiO₂) and rutile (rnTiO₂), are widely used in industry, commercial products and biosystems. TiO, has been evaluated as a Group 2B carcinogen. Previous reports indicated that an TiO₂ is less toxic than rn TiO₂, however, under ultraviolet irradiation an TiO₂ is more toxic than rnTiO, in vitro because of differences in their crystal structures. In the present study, we compared the in vivo and in vitro toxic effects induced by anTiO, and rnTiO,. Female SD rats were treated with 500 µg/ml of anTiO, or rnTiO, suspensions by intra-pulmonary spraying 8 times over a two week period. In the lung, treatment with anTiO, or rnTiO, increased alveolar macrophage numbers and levels of 8-hydroxydeoxyguanosine (8-OHdG); these increases tended to be lower in the anTiO, treated group compared to the rnTiO, treated group. Expression of MIP1 α mRNA and protein in lung tissues treated with an TiO₂ and rn TiO₂ was also significantly up-regulated, with MIP1a mRNA and protein expression significantly lower in the anTiO₂ group than in the rnTiO₂ group. In cell culture of primary alveolar macrophages (PAM) treated with anTiO, and rnTiO,, expression of MIP1 α mRNA in the PAM and protein in the culture media was significantly higher than in control cultures. Similarly to the *in vivo* results, MIP1 a mRNA and protein expression was significantly lower in the anTiO, treated cultures compared to the rnTiO, treated cultures. Furthermore, conditioned cell culture media from PAM cultures treated with anTiO, had less effect on A549 cell proliferation compared to conditioned media from cultures treated with rnTiO,. However, no significant difference was found in the toxicological effects on cell viability of ultra violet irradiated anTiO, and rnTiO,. In conclusion, our results indicate that anTiO, is less potent in induction of alveolar macrophage infiltration, 8-OHdG and MIP1 α expression in the lung, and growth stimulation of A549 cells in vitro than rnTiO,.

Keywords: Nanosized titanium dioxide - anatase - rutile - lung toxicity - MIP1a

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Introduction

There are three mineral forms of natural titanium dioxide particles: rutile, anatase and brookite. Engineered anatase and rutile nanosized titanium dioxide particles (anTiO₂ and rnTiO₂) are being manufactured in large quantities worldwide and applied in many fields including material industry, electronic industry, commercial products and biosystems. Due to differences in crystal structure, anTiO₂ has better photocatalytic activity than rnTiO₂ (Kakinoki et al., 2004). Accordingly, anTiO₂ is mainly used in paints, such as surface painting of the walls and windows of buildings and vehicles, and photocatalytic systems, while rnTiO₂ is preferentially used in cosmetics, sunscreen and food additives.

Large quantity production and widespread application of nTiO, have given rise to concern about its health and

environmental effects. Anatase and rutile type titanium dioxide particles, nanosized and larger, are evaluated as Group 2B carcinogens (possibly carcinogenic to humans) by WHO/International Agency for Research on Cancer (IARC, 2010), based on 2-year animal aerosol inhalation studies (Mohr et al., 2006). Pulmonary exposure to rnTiO₂ promotes DHPN-induced lung carcinogenesis in rats, and the promotion effect is possibly associated with rnTiO₂ burdened alveolar macrophage derived macrophage inflammatory protein 1 alpha (MIP1 α), which acts as a growth factor to stimulate the proliferation of human lung adenocarcinoma cells (A549) *in vitro* (Xu et al., 2010). Dermal application of anTiO₂ has been shown to cause significant increases in the level of superoxide dismutase and malondialdehyde in hairless mice (Wu et al., 2009).

Size and photoactivation affect the *in vitro* toxicity of $anTiO_2$ and $rnTiO_2$. $anTiO_2$ (10 and 20 nm) induces

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oxidative DNA damage, lipid peroxidation and micronuclei formation, and increases hydrogen peroxide and nitric oxide production in BEAS-2B cells, a human bronchial epithelial cell line, but anTiO₂ 200 nm particles do not (Gurr et al., 2005). In contrast, both nano-sized and 200nm ruTiO₂ are toxic *in vitro* (Gurr et al., 2005; Sayes et al., 2006). On the other hand, under ultraviolet irradiation, anTiO₂ is 100 times more toxic to human dermal fibroblasts and A549 cells than rnTiO₂, and is more potent than rnTiO₂ in the induction of lactate dehydrogenase release, reactive oxygen species production and interleukin 8 secretion (Sayes et al., 2006). Experimental data demonstrating differences in the toxic effects of anTiO₂ and rnTiO₂ *in vivo*, however, are still lacking.

Respiratory exposure to nTiO₂ particles can occur both at the workplace, e.g., in manufacturing and packing sites, and outside the workplace during their use (Maynard et al., 2006; Schulte et al., 2008). In the present study, we delivered anTiO₂ and rnTiO₂ to the rat lung by trans-tracheal intra-pulmonary spraying (TIPS) and compared lung inflammation and several toxicological parameters induced by anTiO₂ and rnTiO₂. The results indicated that obvious lung inflammatory lesions were not observed in the rats, and anTiO₂ or rnTiO₂ particles were phagocytosed by alveolar macrophages. Analysis of alveolar macrophage induction, 8-OHdG level in the lung, and MIP1 α expression both *in vivo* in the lung and *in* vitro in PAM indicated that anTiO₂ elicited lower levels of biological responses than rnTiO₂. Long-term toxic effects of anTiO₂ and rnTiO₂ still need to be clarified.

Materials and Methods

Preparation and characterization of nTiO, suspension

Nanosized TiO₂ particles (anatase type without coating, primary size 25 nm and rutile type without coating, primary size 20 nm) were provided by Japan Cosmetic Association, Tokyo, Japan. Both anTiO₂ and rnTiO₂ particles were suspended in saline at 500 μ g/ml and then autoclaved. The suspensions were sonicated for 20 min shortly before use to prevent aggregate formation.

Characterization of $nTiO_2$ was conducted as follows: The shapes of $nTiO_2$ in suspension were imaged by transmission electron microscopy (TEM) and scanning electron microscopy (SEM). Element analysis was performed by a an X-ray microanalyzer (EDAX, Tokyo, Japan), after aliquots of $nTiO_2$ were loaded onto a carbon sheet. For size distribution analysis, aliquots of the 500 µg/ ml $nTiO_2$ suspension were loaded onto clean glass slides and photographed under a polarized light microscope (Olympus BX51N-31P-O polarized light microscope, Tokyo, Japan), and the photos were then analyzed by an image analyzer system (IPAP, Sumika Technos Corporation, Osaka, Japan). Over 1000 particles of anTiO₂ and rnTiO₂ were measured.

Animals

Female Sprague-Dawley rats (SD rats) were purchased from CLEA Japan Co., Ltd (Tokyo, Japan). The animals were housed in the animal center of Nagoya City University Medical School, maintained on a 12 hour light-dark cycle and received oriental MF basal diet (Oriental Yeast Co., Tokyo, Japan) and water *ad lib*. The research was conducted according to the Guidelines for the Care and Use of Laboratory Animals of Nagoya City University Medical School and the experimental protocol was approved by the Institutional Animal Care and Use Committee (H22M-19).

Trans-tracheal intra-pulmonary spraying (TIPS) protocol

Three groups of 6 female SD rats (Group 1, saline; Group 2, anTiO₂; and Group 3, rnTiO₂) aged 9 weeks were acclimated for 7 days prior to the start of the study. Saline and nTiO₂ suspensions were administered by TIPS to the animals under isoflurane anesthesia: The nozzle of a Microsprayer (series IA-1B Intratracheal Aerosolizer, Penn-century, Philadelphia, PA) connected to a 1 ml syringe was inserted into the trachea through the larynx and a total volume of 0.5 ml suspension was sprayed into the lungs synchronizing with spontaneous inspiration by the animal (Xu et al., 2010). Rats were treated once every the other day over a 2 week period, a total of eight treatments. The total amount of anTiO₂ and rnTiO₂ administered to Groups 2 and 3 was 2.0 mg per rat. Six hours after the last spraying, the animals were killed and the whole lung was excised and divided into two parts; the left lung was cut into pieces and immediately frozen at -80°C and used for biochemical analysis, and the right lung was fixed in 4% paraformaldehyde solution in phosphatebuffered saline (PBS) adjusted to pH 7.3 and processed for immunohistochemical, light microscopic and transmission electron microscopic (TEM) examinations.

Light microscopy and transmission electron microscopy

Hematoxylin and eosin (H&E) stained sections were used for pathological observation. The number of alveolar macrophages in H&E lung tissue slides was counted and expressed as number per mm².

Slides were observed under light microscopic observation, the corresponding area in the paraffin block was cut out, deparaffinized and embedded in epoxy resin and processed for TEM and titanium element analysis with a JEM-1010 transmission electron microscope (JEOL Co. Ltd, Tokyo, Japan) equipped with an X-ray microanalyzer (EDAX, Tokyo, Japan).

Analysis of 8-hydroxydeoxy guanosine levels

For the analysis of 8-hydroxydeoxyguanosine (8-OHdG) levels, genomic DNA was isolated from a piece of the left lung with a DNA Extractor WB kit (Wako Chemicals Co. Ltd). 8-OHdG levels were determined with an 8-OHdG ELISA Check kit (Japan Institute for Control of Aging, Shizuoka, Japan).

RNA isolation, cDNA synthesis and RT-PCR analysis of gene expression

Pieces of the left lungs (50-100 mg) were thawed, rinsed 3 times with ice cold PBS, and total RNA was isolated using 1 ml Trizol Reagent (Invitrogen, Karlsruhe, Germany). For reverse transcription PCR (RT-PCR) and real-time PCR, first strand cDNA synthesis from 2 mg of total RNA was performed using SuperScript[™] III First-Strand Synthesis System (Invitrogen of Life Technologies, CA) according to the manufacturer's instructions. PCR primers for rat MIP1α were 5'-TTTTGAGACCAGCAGCCTTT -3' (forward) and 5'- CTCAAGCCCCTGCTCTACAC-3' (reverse), and the product size was 191bp. b-actin was used as internal control and the primers were 5'- AGCCATGTACGTAGCCATCC-3' (forward) and 5'-CTCTCAGCTGTGGTGGTGAA-3', and the product size was 228 bp. RT-PCR was conducted using an iCycler (BioRad Life Sciences, CA) as follows: 95°C 20 sec, 60°C 20 sec, 72°C 30sec, 30 cycles for MIP1α; and 95°C 20 sec, 60°C 20 sec, 72°C 30sec, 15 cycles for b-actin. Real-time PCR analysis of MIP1a gene expression was performed with a 7300 Real Time PCR System (Applied Biosystem, CA) using Power SYBR Green PCR Master Mix (Applied Biosystem, CA) according to the manufacturer's instructions. b-actin gene was used as the normalizing reference gene.

Immunohistochemical analysis

Paraffin embedded lung tissues sections were immunostained with polyclonal anti-rat MIP1 α (BioVision, Lyon, France). Antigen retrieval was carried out by microwave for 20 min in 10 mmol/L citrate buffer (pH 6.0). Antibody was diluted 1:100 in blocking solution and applied to the slides, and the slides were incubated at 4°C overnight. Immunohistochemical staining was done by the avidin-biotin complex method (ABC) using the Vectastain Elite ABC system (Vector Laboratories, Burlingame, CA). Biotinylated goat anti-rabbit IgG (Vector Laboratories) was used as a secondary antibody at a dilution of 1:500 for 1 hour and visualized using avidin-conjugated alkaline phosphatase complex (ABC kit, Vector laboratories) and Alkaline Phosphatase Substrate Kit (Vector Laboratories). Sections were lightly counterstained with hematoxylin for microscopic examination.

ELISA for MIP10 in the lung tissues and the supernatants of cell culture

Left lung tissue samples (50-100mg) were thawed, rinsed 3 times with ice cold PBS and homogenized in 1 ml of tissue extraction reagent (PeproTech, London, UK) containing 1% (v/v) Proteinase Inhibitor Cocktail (Sigma-Aldrich, St Louis, MO, USA). The homogenates were clarified by centrifugation at 10,000g, 4°C for 5 min. The protein content in the supernatants was measured with a BCATM Protein assay kit (Pierce). The levels of MIP1 α in the supernatants were measured using rat MIP1 α ELISA Development Kit (Cat#: 900-K75, Peprotech, Inc., Rocky Hill, NJ.) according to the manufacturer's instruction, and expressed as pg/mg lung tissue protein. The levels of MIP1 α in cell culture supernatants were measured as described above and expressed as pg/ml.

Isolation of PAM and exposure of nTiO, to PAM cells

Induction and isolation of alveolar macrophages in female SD rats was performed as described previously (Xu et al., 2010). 10⁶ primary alveolar macrophages (PAM) were cultured in RPMI1640 containing 2% fetal bovine serum and antibiotics overnight at 37°C, 5% CO₂. 500 μ g/ml of anTiO₂ and rnTiO₂ suspensions was then added

to the cultures to a final concentration of 10 μ g/ml and the cells were incubated for another 24 hours. RNA was isolated from the PAM and the level of MIP1 α protein in the conditioned culture media was measured by ELISA.

In vitro cell proliferation assay

A549 cells were seeded into 96-well culture plates at 2×10^3 cells per well in 2% fetal bovine serum Dulbecco's modified Eagle's medium (Wako Chemicals Co., Ltd). After overnight incubation, the medium was replaced with the conditioned PAM culture media treated with anTiO₂ or rnTiO₂, and the cells were incubated for another 72 hours, with or without 20 µg/ml of anti-MIP1 α neutralizing antibody (R&D Systems, Minneapolis, MN). The relative cell number of A549 cells was determined using a Cell counting Kit-8 (Dojindo Molecular Technologies, Rockville, MD) according to the manufacturer's instruction.

Cytotoxicity assay in vitro

A549 cells, the primary human lung fibroblast cell line CCD34 (ECACC, Cat. No. 90110514) and PAM were used for cytotoxicity analyses. Cells were seeded in 96 well plates at 5×10^3 /well and incubated overnight. The cells were then treated with anTiO₂ and rnTiO₂ suspensions at final concentrations of 0, 2, 10, or 50 µg/ml and then incubated for another 24 hours. The relative cell number was determined as described above.

Cytotoxicity of $anTiO_2$ and $rnTiO_2$ under ultraviolet B irradiation

A549 cells were used for analysis of nTiO₂ cytotoxicity under ultraviolet irradiation. First, we determined an irradiation time that did not affect the cell viability as follows: A549 cells were seeded into 96 well plates at 1×10^3 /well in 200 μ L Dulbecco's modified Eagle's medium (Wako Chemicals Co., Ltd) containing 10% fetal bovine serum and incubated overnight. The cells were irradiated with ultraviolet B (UVB) for 0, 30 sec, 1 min, 2 min, 5 min and 10 min with a transilluminator (Vilber Lourmat, France). The light intensity was 1000 mW/cm², and the emission spectrum was from 270 nm to 330 nm with a peak at 312 nm. The non-irradiated control wells were covered with a sterile aluminium sheet to prevent irradiation. The relative cell number was determined after incubation for 48 hours at 37°C, 5% CO₂.

Next, we observed the effect of $anTiO_2$ and $rnTiO_2$ on cell viability under UVB. A549 cells were seeded into 96 well plate at 1×10³ well in 100 μ L culture media and incubated overnight. Then, 100 mL of $anTiO_2$ or $rnTiO_2$ suspensions in DMEM culture medium containing 10% FBS was added into the wells to final concentration of 0, 2, 5 and 10 μ g/ml and incubated for 30 min. The cells were irradiated with UVB for 2 min (2 min UVB irradiation did not affect cell viability), and incubated for another 48 hours, before determination of relative cell number.

Statistical and analysis

Statistical significance of the *in vitro* and *in vivo* findings was analyzed using the two-tailed Student's t-test. *In vitro* and *in vivo* data are presented as means±standard

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deviations. A value of p < 0.05 was considered to be significant.

Results

Characterization of nTiO, particles in suspension

TEM images showed that individual anTiO₂ particles were spherical in shape, while individual rnTiO₂ particles had a rod-like shape, and both anTiO₂ and rnTiO₂ formed large aggregates in suspension (Figure. 1A and B). Similarly, SEM observation indicated aggregate formation of both types of nTiO₂ particles (Figure. 1C and D). Peaks of titanium (green arrows) and oxygen (blue arrows), which are present in both types of nTiO₂ particles, and carbon (white arrows) and nitrogen (red arrow), which are present in the carbon sheets used in the SEM, were observed by elemental scanning (Figure. 1E and F). Peaks of other elements were not detected in either the rnTiO₂ or anTiO₂ samples. Analyses of particle size showed that the mean and medium diameters were 5.491±2.727 mm and 5.127 mm for anTiO₂, and 3.799±2.231 mm and 3.491 mm for rnTiO₂ (Figure. 1G), confirming aggregate formation of both types of nTiO₂ particles in suspension.

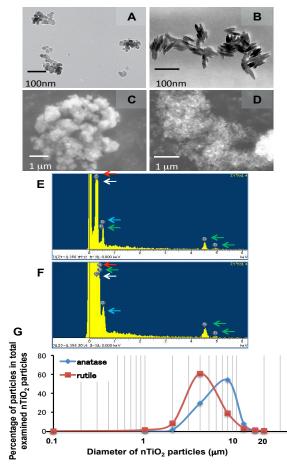


Figure 1. Characterization of $nTiO_2$ Particles in Suspension. A and B: TEM imagines of $anTiO_2$ and $rnTiO_2$ particles in suspension. C and D: SEM images of $anTiO_2$ and $rnTiO_2$ particles. E and F: Element scanning showed peaks of titanium (green arrows), oxygen (blue arrows), carbon (white arrows) and nitrogen (red arrows) in $anTiO_2$ and $rnTiO_2$ particles. G: Size distribution of $anTiO_2$, and $rnTiO_2$ in suspension

Histological observation and 8-OHdG level in the lung tissue

Only a few small lung inflammatory lesions were observed in rats treated with anTiO₂ and rnTiO₂ (Figure. 2A, B and C). Alveolar macrophage infiltration was found throughout the lung tissue, and most of the alveolar macrophages were seen with phagocytosed anTiO, particles or rnTiO₂ particles (Figure. 2D, E an F). TEM observation demonstrated that both anTiO₂ and rnTiO₂ were deposited in various sizes in the cytoplasm of the alveolar macrophages (Figure. 2G and H). Neither anTiO₂ or rnTiO₂ particles were found in other types of cells in the lung tissue. The number of macrophages per mm² lung tissue section was 67.1 ± 15.8 (saline), 165.0 ± 34.9 (anTiO₂) and 214.2 ± 44.1 (rnTiO₂). The numbers of macrophages in the anTiO₂ and rnTiO₂ treated groups was significantly higher than in the control group (p<0.001), and the anTiO₂ treated group had lower macrophage infiltration than the rnTiO₂ treated group.

The level of 8-OHdG, a parameter of oxidative DNA damage caused by reactive oxygen species (ROS), in the lung tissue in rats treated with anTiO₂ and rnTiO₂ was 1.96 ± 0.77 and 3.07 ± 1.25 (pg per mg DNA), respectively, and was higher than that of the control (1.44 ± 0.63): The increase in 8-OHdG in the lungs of rnTiO₂, but not anTiO₂, treated rats was significantly higher than the control

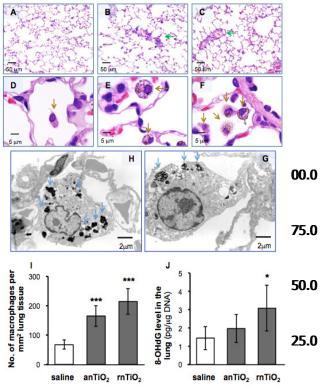


Figure 2. Histological Observation and 8-OHdG Level in the Lung Tissue. A, B and C: Histological imagines of lung tissue treated with saline, anTiO₂ and rnTiO₂, respectively. Green arrows indicate small inflammatory lesions. D (saline), E (anTiO₂) and F (rnTiO₂): Higher magnification imagines of alveolar macrophages (brown arrows). nTiO₂ particles are clearly observed. G and H: TEM imagines of alveolar macrophages with anTiO₂ and rnTiO₂ particles in their cytoplasm (blue arrows). I and J: The numbers of alveolar macrophages and 8-OHdG levels in the lung tissue. *, *** represent p<0.05 and 0.001, respectively, versus saline

31.3

0

(p<0.05) (Figure. 2J).

MIP1a expression in the lung tissue

RT-PCR suggested an increase in MIP1 α mRNA expression in lung tissue treated with anTiO₂ or rnTiO₂ (Figure. 3A). Real-time PCR analysis indicated that compared with the control group, the increase was 2.79fold for anTiO₂ and 5.35-fold for rnTiO₂. MIP1 α mRNA expression was also significantly lower in the anTiO₂ treated group compared to the rnTiO₂ treated group (Figure. 3B). The levels of MIP1 α protein in the lung tissue were 32.8±0.31 and 52.7±0.58 pg/mg lung protein in the anTiO₂ and rnTiO₂ treated groups, both significantly higher than that of the control group (20.8±0.24) (Figure. 3C). Similarly to MIP1 α mRNA expression, MIP1 α protein expression was significantly lower in the anTiO₂ treated group compared to the rnTiO₂ treated group.

To find out what cells in the lung accounted for the increased MIP1 α protein expression, we examined tissue samples using MIP1 α immunohistochemistry. As shown in Figure. 3D, E and F, MIP1 α protein was produced by anTiO₂ or anTiO₂ burdened alveolar macrophages.

Exposure of PAMs to $anTiO_2$ and $rnTiO_2$ and cell proliferation assays in vitro

As in the lung tissue, *in vitro* exposure of PAM to $nTiO_2$ induced expression of MIP1 α mRNA (Figure. 4A) and protein (Figure. 4B). Treatment with anTiO₂ and $rnTiO_2$ caused 11.96-fold and 15.26-fold increases in the expression of MIP1 α mRNA, respectively, in cultured PAM. The level of MIP1 α protein in the cell culture medium was 32.8±1.1 pg/mL for anTiO₂ and 52.7±1.3 pg/mL for rnTiO₂, significantly higher than that of the control

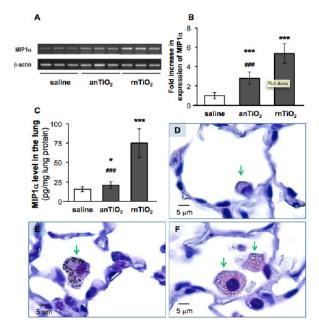


Figure 3. Expression of MIP1 α in the Lung Tissue. A, B and C: Analysis of expression of MIP1 α mRNA by RT-PCR (A) and real-time PCR (B) and protein by ELISA (C). D, E, and F: Immunohistochemistry shows MIP1 α expressed in alveolar macrophages of lung tissue treated with saline (D), anTiO₂ (E) and rnTiO₂ (F). *, *** represent p<0.05 and 0.001, respectively, versus saline; ### represent p<0.001, versus rnTiO₂

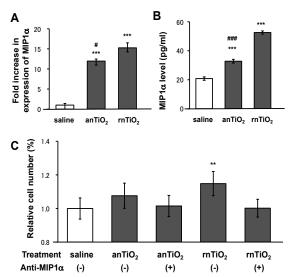


Figure 4. The Effect of anTiO₂ and rnTiO₂ on PAM Cells. The expression of MIP1 α mRNA in cultured PAM (A) and protein in the culture media (B) indicate that treatment with anTiO₂ or rnTiO₂ increased MIP1 α expression in the PAM. Conditioned cell culture media of PAM treated with rnTiO₂, but not anTiO₂, had a significant effect on proliferation of A549 cells, and this promotion was attenuated by addition of 20 µg/ ml MIP1 α neutralizing antibody (C). **, ***represent p<0.01 and 0.001, versus saline; #, ###represent p<0.05 and 0.001, versus rnTiO₂

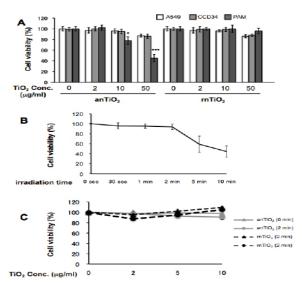


Figure 5. *In vitro* **Assays.** A: The effect of $an TiO_2$ and $rn TiO_2$ on the viability of A549, CCD34 and PAM cells. B: The effect of UVB irradiation on the viability of A549 cells. C: The effect of $an TiO_2$ and $rn TiO_2$ on the vi ability of A549 under UVB irradiation. *, *** represent p<0.05 and 0.001, versus the vehicle

 $(20.8\pm1.2 \text{ pg/mL})$. Both mRNA and protein expression of MIP1 α was significantly lower in the anTiO₂ treated PAM compared to the rnTiO₂ treated cells.

The supernatants of the culture media of PAM treated with anTiO₂ showed only a tendency to increase A549 cell proliferation, while those collected from PAM treated with rnTiO₂ significantly promoted proliferation of A549 cells (115%) compared to supernatants from the saline treated group (Figure. 4C). The promotion effect of the supernatants of PAM cell cultures treated with anTiO₂or

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rnTiO₂ was attenuated by anti-MIP1 α neutralizing antibodies, indicating MIP1 α is probably a mediator of the increase in A549 cell proliferation.

In vitro cytotoxicity assays

In vitro cytotoxicity assays indicated that both anTiO₂ and rnTiO₂ had little effect on the cell viability of A549 and CCD34 cells at a concentration of up to 50 mg/ml. anTiO₂ had a cytotoxic effect on the cell viability of PAM at doses of 10 and 50 mg/ml, while rnTiO₂ did not impair the cell viability of PAM at any of the examined concentrations (Figure. 5A).

To investigate whether UVB irradiation affected the cytotoxic effects of $anTiO_2$ and $rnTiO_2$ on cell viability, we first determined the exposure times that ultraviolet B irradiation itself did not impair the viability of A549 cells. As shown in Figure .5B, irradiation for up to 2 min did not have any effect on the viability of A549 cells. With 2 min of UVB irradiation, neither $anTiO_2$ or $rnTiO_2$ at doses of 2, 5 or 10 µg/ml resulted in any decrease in the viability of A549 cells (Figure .5C).

Discussion

The toxicity of nanoparticles usually includes tiers of biological responses such as induction of ROS and inflammation (Nel et al., 2006). This may contribute to carcinogenic potential (Tsuda et al., 2009). Thus, in the present study, we compared several parameters ofr inflammation and oxidative stress induced by TIPS of anTiO₂ and rnTiO₂. The results indicated that both anTiO₂ and rnTiO₂ particles were phagocytosed by alveolar macrophages and did not cause strong lung inflammation. Treatment with anTiO₂ and rnTiO₂ increased alveolar macrophage infiltration, MIP1 α expression and 8-OHdG production: anTiO₂ had less effect than rnTiO₂.

Phagocytosis by alveolar macrophages is a major defense mechanism for deposition and clearance of inhaled particles (Heppleston, 1984; Rom et al., 1991; Geiser et al., 2008). However, activation of alveolar macrophages is strongly associated with inflammatory reactions and ROS production (Renwick et al., 2001; Bhatt et al., 2002; Wang et al., 2007). Also, MIP1 α , secreted from rnTiO₂ burden alveolar macrophages, is possibly involved in the promotion of lung carcinogenesis (Xu et al., 2010). Similarly, pleural macrophage recruitment and activation are involved in the pathogenesis of asbestos (Choe et al., 1997). These results indicate two contrasting roles of alveolar macrophages in pathogenesis and host defense.

The toxic effects of nanoparticles are dependent on their size, shape, surface functionality and composition (Albanese et al., 2012). In the present study, we used comparable sizes of anTiO₂ and rnTiO₂ particles. Both types of nTiO₂ had no surface coating and had no obvious difference in elemental composition. Therefore, differences in alveolar macrophage induction, MIP1 α expression and 8-OHdG production between anTiO₂ and rnTiO₂ are likely due to their different crystal structures and shapes. The lower toxicity of anTiO₂ compared to rnTiO₂ in the absence of UVB irradiation in our study is consistent with a previous *in vitro* study with bulk rutile and anatase TiO_2 (Gurr et al., 2005). In contrast to a previous study (Sayes et al., 2006), in the present study anTiO₂ and rnTiO₂ did not exhibit different toxicities on the cell viability of A549 cells under ultraviolet irradiation.

It should be noted that both types of $anTiO_2$ and $rnTiO_2$ particles formed aggregates in suspension, and aggregation may alter their bio-reactivity. Whether $anTiO_2$ and $rnTiO_2$ particles have different long-term effects remains to be clarified.

In conclusion, *in vivo* exposure of the rat lung to anTiO₂ or rnTiO₂ particles increased alveolar macrophage infiltration, MIP1 α expression and 8-OHdG production, with anTiO₂ eliciting lower levels of biological responses than rnTiO₂. Similarly, exposure of primary alveolar macrophages to rnTiO₂ *in vitro* resulted the cells producing more MIP1 α mRNA and protein than cells exposed to anTiO₂. Cytotoxicity assays *in vitro* indicated that both anTiO₂ and rnTiO₂ had very low cellular toxicity even under UVB irradiation.

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