



Contents lists available at ScienceDirect

Prostaglandins, Leukotrienes and Essential Fatty Acids

journal homepage: www.elsevier.com/locate/plefa

Short communication

Correlation between platelet and brain PLA₂ activity



Leda L. Talib, Kette D. Valente, Silvia Vincentiis, Wagner F. Gattaz*

Laboratory of Neuroscience-LIM 27, Department and Institute of Psychiatry, Faculty of Medicine, University of Sao Paulo, Brazil

ARTICLE INFO

Article history:

Received 4 April 2013

Received in revised form

26 June 2013

Accepted 2 July 2013

Keywords:

PLA₂

Platelets

Brain tissue

Hippocampus

Neuropsychiatric disorders

Epilepsy

Radioenzymatic assays

ABSTRACT

The phospholipase A₂ (PLA₂) enzymes have been implicated in several neuropsychiatry disorders and activity alterations have been described in brain and platelet. Since brain tissue is not readily available for the measurement of PLA₂ activity, it would be of interest to test directly whether PLA₂ activities in both tissues are correlated. We performed this task assessing PLA₂ activity in platelets and hippocampus collected simultaneously from 19 patients undergoing temporal lobectomy for treatment of refractory epilepsy. Our findings suggest that total PLA₂ activity in platelets may reflect the total activity of the enzyme in the brain ($r_s=0.59$, $p=0.008$). However in our sample no correlations were found between the subgroups of the enzyme in brain and in platelets. This lack of correlations may be due to different effects of drug treatment on the PLA₂ subtypes. In face of the difficulty to obtain brain tissues from living patients, further studies with larger drug-free samples are warranted to clarify whether the use of platelets is a reliable strategy to reflect the subtypes of PLA₂ activity in the brain.

© 2013 Elsevier Ltd. All rights reserved.

1. Introduction

The phospholipase A₂ (PLA₂) enzymes catalyze the hydrolysis of membrane phospholipids at *sn*-2 position, releasing fatty acids and lysophospholipids, which mediate the transmission and processing of neuronal signals [1,2]. Increased PLA₂ activity has been described in platelets and in brain of schizophrenic and psychotic patients [3–10], whereas reduced enzyme activity was found in platelets and in post mortem brain of patients with Alzheimer's disease [11–13].

Platelets share many similar biologic properties to neurons and have been widely used in the search for biomarkers related to neuropsychiatric disorders [14–16]. There is indirect evidence suggesting that abnormal PLA₂ activity in platelets may reflect the enzyme activity in the brain. Since brain tissue is not readily available for the measurement of PLA₂ activity, it would be of interest to test directly whether PLA₂ activities in both tissues are correlated.

We performed this task in the present study, by assessing PLA₂ activity in platelets and hippocampus collected simultaneously from patients undergoing temporal lobectomy for treatment of refractory epilepsy.

2. Methods

2.1. Subjects

The sample comprised 19 patients (11 male/eight female, mean age 39.9 ± 14.2 years) with Temporal lobe epilepsy–mesial temporal sclerosis (TLE–MTS) who underwent an anterior temporal lobectomy at the Functional Neurosurgery Center, Institute of Psychiatry, University of São Paulo, for treatment of refractory epilepsy. Diagnosis of TLE was done according to ILAE criteria (Commission on Classification and Terminology of the International League Against Epilepsy 1989) [17] based on clinical anamnesis, EEG and video-EEG exams. Diagnosis of MTS was confirmed by 1.5 T MRI. Nine subjects of the study presented psychiatry comorbidity (five with psychoses and four with major depression). Exclusion criteria were comorbidity with alcohol and drug abuse, and with other organic or metabolic disease. Part of this sample (psychotic patients and individuals without psychiatric comorbidity) was described elsewhere [18]. All patients were on anti-epileptic drug (AED) treatment.

All 19 patients included in this study underwent a standard surgical procedure with an anterior temporal lobectomy with hippocampus removal performed with the same protocol and by the same neurosurgeon [19,20].

This study was approved by the local ethics committee of the University of São Paulo.

2.2. Determination of PLA₂ activity

2.2.1. Tissue preparations

The hippocampi and blood samples were collected at the same time during the surgery. The hippocampi were immediately frozen

* Correspondence to: Laboratório de Neurociências (LIM 27), Departamento e Instituto de Psiquiatria, Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo, Rua Dr. Ovídio Pires de Campos 785–3o andar, 05403-010 São Paulo, SP, Brazil. Tel.: +55 11 3069 7283; fax: +55 11 3085 5412.

E-mail address: gattaz@usp.br (W.F. Gattaz).

at -80°C . Tissue was defrost to 0°C , homogenized in 20 volume of 5 mM Tris–HCl buffer (pH 7.4) and again stored at -80°C until analysis. Prior to PLA₂ activity determination, total protein levels were determined in the homogenates by the Bio-Rad DC Protein Assay (Bio-Rad, Hercules, CA) modified from the Lowry assay [21].

2.2.2. Platelet preparation

Samples of fresh blood were obtained through the puncture of a peripheral vein in the forearm. Platelets were isolated by centrifugation at 515g for 15 min at 20°C with acid citrate dextrose solution (ACD-NIH-formel-A solution: glucose 123.8 mM, tri-sodium citrate 83.9 mM, citric acid 41.3 mM) (1:10v:v). Platelet-rich plasma (PRP) was collected and pH was adjusted to 6.5 by titration with ACD-NIH-formel-A. PRP was centrifuged at 1159g for 10 min at 20°C and the supernatant was carefully removed. A washing solution (30 mM sodium citrate pH 6.5; 5 mM potassium chloride; 2 mM calcium chloride; 1 mM magnesium chloride; 5 mM glucose; 500 $\mu\text{g}/\text{mL}$ albumin; 50 $\mu\text{g}/\text{mL}$ apyrase) was added to the supernatant and incubated for 10 min. The solution was centrifuged at 1159g for additional 8 min at 20°C and the pellet was re-suspended with tris-sucrose solution. Platelets aliquots were frozen immediately at -70°C until experimentation. Under these conditions, there was no evidence of platelet activation, (data not shown).

2.2.3. Radioactive substrates preparation

The radioactive substrates 1- α -1 palmitoyl-2-arachidonyl-phosphatidylcholine (PC-AA-[^{14}C])—(Perkin Elmer Life Science, USA) and 1-3 phosphatidylcholine, 1-palmitoyl-2-palmitoyl—PC-PA-[^{14}C])—(Amersham Biosciences, UK) both labeled in position 2 with [^{14}C], were processed similarly, i.e., diluted 1:10 in a 1:2 toluene–ethanol solution containing 140 mg/mL of antioxidant butylatedhydroxytoluene (BHT). The solution was then evaporated under stream of nitrogen (12 μl or 0.06 μCi per sample), re-suspended with 150 μL of ice-cold 0.3 mg/mL BSA solution and homogenized using a sonicator to form liposomes. The count of total radioactivity was standardized for both substrates (120,000 CPM). All assays were conducted with a blank sample. The assays were considered viable when the blank sample values were below 300 CPM.

2.2.4. Radioenzymatic assays for brain tissue

Aliquots of hippocampus homogenates were used to determine the activity of PLA₂ subtypes (cytosolic cPLA₂, secretory sPLA₂ and calcium-independent iPLA₂) by radioenzymatic assays as described elsewhere (Schaeffer and Gattaz, 2005). Briefly, the substrate used was PC-AA-[^{14}C]. Brain tissue homogenates were diluted to a final protein concentration of 1.5 mg/mL with 50 mM Tris–HCl (pH 8.5 for sPLA₂ and cPLA₂ or pH 7.5 for iPLA₂). The assays contained 100 mM Tris–HCl buffer (pH 8.5 or pH 7.5), 1 μM (for cPLA₂ and iPLA₂) or 2 mM CaCl_2 (for sPLA₂), 100 μM bromo-enol lactone (Biomol), (USA), 300 μg of protein from diluted homogenates, and 150 μL of PC-AA-[^{14}C]. After 15 min incubation at 37°C , the reactions were interrupted by the addition of 700 μl isopropanol–hydrochloric acid.

2.2.5. Radioenzymatic assays for platelets

This assay has been previously standardized by our group [22]. Briefly, the assay mixture contained 50 μl of 1.0 M Tris–HCl buffer pH 7.5, 200 μl of platelet (0.2 mg of homogenate protein), 150 μl of PC-AA-[^{14}C]. Calcium concentrations of 5 mM and 100 μM were used to measure sPLA₂ and cPLA₂ activity respectively. To measure iPLA₂ activity were used 5 mM EDTA and 150 μl of PC-PA-[^{14}C] (0.06 μCi). The solution was incubated for 30 min at 37°C and the

reaction was stopped by the addition of 700 μl isopropanol–hydrochloric acid.

For both procedures i.e. hippocampus and platelets samples the ^{14}C -labeled fatty acid released by PLA₂ was extracted with n-heptane, followed by adsorption of the unbroken phospholipids and the lysophospholipids on 60 mg of silica. The radioactivity was measured in a liquid scintillation counter (Tri-Carb 2100 TR; Packard, USA) for calculating PLA₂ activities (pmol/mg protein/min – 1). All PLA₂ activities were performed in triplicate. Inter- and intra-assay variation coefficients were below 5%. totalPLA₂ activities were calculated by the sum of the three group activity.

2.3. 3-Statistical analysis

Correlations between enzyme activities were calculated through Spearman Coefficients. All statistical analyses were done with the software Statistical Package for Social Science (SPSS, Chicago, USA), version 14.0 and significance level was set at $p < 0.05$.

3. Results

The correlations were tested with all samples and only in patients without psychiatric comorbidity. Table 1.

Total PLA₂ (tPLA₂) in the brain was significantly correlated with tPLA₂ in platelets ($r_s = 0.59$, $p = 0.008$). Moreover, tPLA₂ in the brain was also significantly correlated with sPLA₂ and cPLA₂ in platelets ($r_s = 0.60$, $p = 0.007$ and $r_s = 0.57$, $p = 0.01$ respectively)(Fig. 1). No correlations were found among the subtypes iPLA₂, sPLA₂ and cPLA₂ in the brain and in platelets. Table 2.

In the ten subjects without psychiatric comorbidity, the correlation remained significant among tPLA₂ in brain and tPLA₂, sPLA₂ and cPLA₂ in platelets ($r_s = 0.82$, $p = 0.004$; $r_s = 0.87$, $p = 0.001$ and $r_s = 0.84$, $p = 0.002$ respectively). Moreover, cPLA₂ in brain showed a correlation with tPLA₂ in platelets ($r_s = 0.65$, $p = 0.043$). No correlations were found among the subtypes iPLA₂, sPLA₂ and cPLA₂ in the brain and in platelets. No effects of age and sex were found on the correlations.

Table 3 describes the demographic data and PLA₂ group's activities of patients with and without psychiatric comorbidity.

4. Discussion

In this study we tested the correlations between PLA₂ activity in the hippocampus and in platelets of TLE–MTS patients. This is the first investigation in human subjects to correlate PLA₂ activity in platelets and in the brain in vivo, with both collected simultaneously during neurosurgical procedure for therapy-resistant TLE–

Table 1

Correlations between PLA₂ activity in the brain and in platelets in all patients ($n = 19$).

		Platelets			
		iPLA ₂	sPLA ₂	cPLA ₂	tPLA ₂
Brain	iPLA ₂	$r_s = -0.14$ $p = 0.285$	$r_s = 0.38$ $p = 0.112$	$r_s = 0.35$ $p = 0.068$	$r_s = 0.39$ $p = 0.098$
	sPLA ₂	$r_s = -0.21$ $p = 0.191$	$r_s = 0.34$ $p = 0.154$	$r_s = 0.31$ $p = 0.205$	$r_s = 0.30$ $p = 0.22$
	cPLA ₂	$r_s = -0.14$ $p = 0.571$	$r_s = 0.45$ $p = 0.05$	$r_s = 0.42$ $p = 0.072$	$r_s = 0.46$ $p = 0.046$
	tPLA ₂	$r_s = -0.27$ $p = 0.290$	$r_s = 0.60$ $p = 0.007$	$r_s = 0.57$ $p = 0.011$	$r_s = 0.59$ $p = 0.008$

r_s = Spearman's rho correlation coefficient.

Download English Version:

<https://daneshyari.com/en/article/5888528>

Download Persian Version:

<https://daneshyari.com/article/5888528>

[Daneshyari.com](https://daneshyari.com)