

RSV-induced prostaglandin E2 production occurs via cPLA₂ activation: Role in viral replication

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Received 13 April 2005; returned to author for revision 24 May 2005; accepted 9 August 2005

Available online 8 September 2005

Abstract

Prostaglandins (PGs) are lipid mediators that participate in the regulation of immunological and inflammatory responses, and PG production can affect viral replication. In this study, we have investigated the mechanism of PGE₂ production in airway epithelial cells, following respiratory syncytial virus (RSV) infection, and its role in viral replication. We show that RSV infection strongly induces PGE₂ secretion, in a time- and replication-dependent manner, through increased cyclooxygenase-2 (COX-2) expression, which occurs independently from viral or cellular protein synthesis. RSV infection induces arachidonic acid release through induction of cytoplasmic phospholipase A₂ (cPLA₂) enzymatic activity and its membrane translocation. Specific inhibitors of cPLA₂ significantly block RSV-induced PGE₂ secretion, indicating a key role of cPLA₂ in viral-induced PG production. Blocking PG secretion, through cPLA₂ or COX-2 inhibition, results in impairment of RSV replication and subsequent RSV-mediated epithelial cell responses, suggesting that inhibition of PG secretion could be beneficial in RSV infection by reducing proinflammatory mediator production.

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Keywords: RSV; Airway epithelial cells; Prostaglandin; Inflammation

Introduction

Prostaglandins (PGs) are ubiquitous fatty acid derivatives produced by a variety of tissues and cell types and participate in the regulation of both physiological and pathophysiological processes. Normal physiological processes include regulation of renal function, vasomotor tone, platelet aggregation and blood clotting, differentiation of immune cells, wound healing, nerve growth, bone metabolism, ovulation, and initiation of labor. Prostaglandins also participate in the regulation of immunological and inflam-

matory responses. Production of prostaglandin E₂ (PGE₂) is markedly increased in response to a variety of stimuli including interleukin-1 (IL-1), tumor necrosis factor (TNF) α , antigen/antibody complexes, lipopolysaccharide (LPS), and infectious agents (Arias-Negrete et al., 1995; Corbett et al., 1993; Steer et al., 2003). PGE₂ often plays an immunosuppressive role during inflammatory responses, thus preventing overactivation of cellular immunity. For example, PGE₂ is able to inhibit cytokine production, as well as T and B cell proliferation (Phipps et al., 1991). A variety of DNA and RNA viruses have been shown to stimulate PGE₂ production through cyclooxygenase (COX)-2 expression (Bartz et al., 2002; Nokta et al., 1996; Rossen et al., 2004), although certain viruses, like Epstein–Barr virus, have been shown to suppress PGE₂ secretion and COX-2 mRNA accumulation (Savard et al.,

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2000). Respiratory syncytial virus (RSV), an enveloped negative-sense single-stranded RNA virus (Hall and McCarthy, 1995), is a leading cause of epidemic respiratory tract illness in children in the US and worldwide, resulting in more than 100,000 hospital admissions annually in the US alone (Hall and McCarthy, 1995). RSV infection results in the production of a variety of mediators involved in lung immune/inflammatory responses, like cytokines, chemokines, interferons, and upregulating adhesion molecules and MHC antigens on the surface of infected cells (reviewed in Garofalo and Haeberle, 2000). Though RSV infection of the lung results in profound airway inflammation, it is not associated with robust and long-lasting immunological responses so that re-infection is common throughout life (Garofalo and Ogra, 1996). Indeed, RSV infection has been shown to inhibit mononuclear cell responses, as well as lymphocyte proliferation (Franke et al., 1995; Keles et al., 1999), possibly through PGE₂ production (Keles et al., 1998, 1999). RSV induction of PGE₂ was demonstrated by infecting human cord blood macrophages (Midulla et al., 1993) and dendritic cells (Bartz et al., 2002). When compared with influenza and parainfluenza virus, RSV was the strongest PGE₂ inducer. In vivo studies, either in cattle experimentally infected with bovine RSV (Gershwin et al., 1989) or in infants positive for RSV infection (Sznajder et al., 2004), have also shown increased levels of PGE₂ in the plasma or endotracheal aspirates. Recently, Richardson et al. have shown PGE₂ production and COX-2 expression in alveolar epithelial cells infected with RSV, as well as in the lungs of RSV-infected cotton rats (Richardson et al., 2005). The latter study, however, did not address in depth the mechanism of RSV-induced PGE₂ prostaglandin secretion and did not investigate the effect of inhibition of PGE₂ production on RSV replication. Indeed, increased production of PGE₂ has been shown to result in increased replication of many different types of viruses, including herpes, adenovirus, picorna viruses, and HIV, although PGE₂ can inhibit viral replication of a few ones, such as adenovirus, parainfluenza, and measles (reviewed in Steer et al., 2003). In this study, we show that alveolar epithelial cells are strong producers of PGE₂ following RSV infection, in a time- and replication-dependent manner, through COX-2 mRNA expression and protein synthesis. RSV-induced COX-2 expression does not require either viral or cellular protein synthesis as it occurs in the presence of cycloheximide, an inhibitor of protein translation. RSV infection of airway epithelial cells induces arachidonic acid (AA) release by activation of cytoplasmic phospholipase A₂ (cPLA₂), and specific inhibitors of cPLA₂ significantly block RSV-induced PGE₂ secretion in A549 cells, indicating a key role of cPLA₂ in viral-induced prostaglandin production. Inhibition of PGE₂ secretion, using either specific COX-2 or cPLA₂ inhibitors, results in significant impairment of RSV replication and therefore RSV-mediated airway epithelial cell responses, such as chemokine production, as well as transcription factor activation, suggesting

that selective inhibition of PGE₂ could be beneficial in RSV infection by dampening the secretion of proinflammatory mediators and possibly promoting stronger immunological responses.

Results

RSV infection induces PGE₂ secretion through COX-2 expression in A549 cells

We and others have previously shown that airway epithelial cells, the target cells of RSV infection, play an important role in initiating mucosal immune/inflammatory responses by producing a variety of soluble factors, like cytokines, chemokines, interferons, etc., that regulate communication among cells of the immune system (Garofalo and Haeberle, 2000). Since PGE₂ levels have been shown to be elevated in children with severe RSV infection (Sznajder et al., 2004), we investigated whether A549 cells, a lung carcinoma cell line that retains features of type II alveolar epithelial cells (Lieber et al., 1976; Smith, 1977), were able to produce PGE₂ following RSV infection. A549 cells is a widely accepted model for studying RSV–epithelial cell interactions (Fiedler et al., 1996; Garofalo et al., 1996; Jamaluddin et al., 1998), and we have previously shown that these cells behave very similar to normal human airway epithelial cells, such as the small alveolar epithelial cells, in terms of chemokine/cytokine gene expression, transcription factor, and signaling pathway activation following RSV infection (Garofalo et al., 1996; Olszewska-Pazdrak et al., 1998; Casola et al., 2001a; Zhang et al., 2001; Pazdrak et al., 2002). A549 cells were infected with purified RSV, and culture supernatants were harvested at different time post-infection (p.i.) to determine PGE₂ secretion by ELISA. As shown in Fig. 1A, RSV exposure resulted in a time-dependent increased production of PGE₂, starting as early as 6 h p.i., with maximal production at 36 h p.i., time after which infected cells started to lose viability. Addition of UV-inactivated virus, which is unable to replicate, did not induce PG production (data not shown).

The first event in eicosanoid production is the release of arachidonic acid (AA) by PLA₂. COX enzymes catalyze the oxidation of AA to PGH₂ which is then isomerized to various prostanoids, including PGE₂. There are three known isoforms of COX (reviewed in Smith et al., 2000). COX-1 and COX-2 are similar in size, substrate specificity, and kinetics but differ in distribution and expression. COX-1 is constitutively expressed by many cell types, and PGs produced by this isoform are involved in the regulation of several normal physiological functions (Smith et al., 2000). While COX-2 is constitutively expressed in certain organs or tissues, such as brain, kidney, and testes, in most cell types, its expression is rapidly upregulated by a variety of stimuli, and it is responsible for inducible PG secretion (Smith et al., 2000). Therefore, to determine whether increased PGE₂ release was dependent on COX-2 activa-

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