

## Parathyroid Hormone and Parathyroid Hormone-related Peptide Activate the Na<sup>+</sup>/H<sup>+</sup> Exchanger NHE-1 Isoform in Osteoblastic Cells (UMR-106) via a cAMP-dependent Pathway\*

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Parathyroid hormone (PTH) and parathyroid hormone-related peptide (PTHrP) regulate Na<sup>+</sup>/H<sup>+</sup> exchanger activity in osteoblastic cells, although the signaling components involved are not precisely defined. Since these peptide hormones can stimulate production of diverse second messengers (*i.e.* cAMP and diacylglycerol) that activate protein kinase A (PKA) and protein kinase C (PKC) in target cells, it is conceivable that either one or both of these pathways can participate in modulating exchanger activity. To discriminate among these possibilities, a series of synthetic PTH and PTHrP fragments were used that stimulate adenylate cyclase and/or PKC. In the osteoblastic cell line UMR-106, human PTH(1–34) and PTHrP(1–34) augmented adenylate cyclase activity, whereas PTH(3–34), PTH(28–42), and PTH(28–48) had no effect. Nevertheless, all these peptide fragments were found to enhance PKC translocation from the cytosol to the membrane in a dose-dependent (10<sup>–11</sup> to 10<sup>–7</sup> M) manner. PTHrP(1–16), a biologically inert fragment, was incapable of influencing either the PKA or PKC pathway. PTH(1–34) and PTHrP(1–34), but not PTH(3–34), PTH(28–42), PTH(28–48), or PTHrP(1–16), elevated Na<sup>+</sup>/H<sup>+</sup> exchanger activity, implicating cAMP as the transducing signal. In accordance with this observation, forskolin (10 μM), which directly stimulates adenylate cyclase, also activated Na<sup>+</sup>/H<sup>+</sup> exchanger activity. The involvement of PKA was verified when the highly specific PKA inhibitor, H-89, completely abolished the stimulatory effect of PTH(1–34) and forskolin on Na<sup>+</sup>/H<sup>+</sup> exchange. In addition, Northern blot analysis revealed the presence of only the NHE-1 isoform of the Na<sup>+</sup>/H<sup>+</sup> exchanger in UMR-106 cells. In summary, these results indicated that PTH and PTHrP activate the Na<sup>+</sup>/H<sup>+</sup> exchanger NHE-1 isoform in osteoblastic UMR-106 cells exclusively via a cAMP-dependent pathway.

(PTHrP) are important regulators of normal and pathological bone remodeling (1). In UMR-106 cells, a well characterized osteoblastic cell line (2, 3), both PTH and PTHrP can interact with a common G protein-coupled receptor that is functionally associated with both the adenylate cyclase-cAMP-protein kinase A (PKA) and phospholipase C-diacylglycerol-protein kinase C (PKC) pathways (4, 5). Thus, the ability of this receptor to couple to multiple effector systems is believed to account for the pleiotropic actions of these peptides in bone as well as other tissues. Nonetheless, the precise linkage of the PTH/PTHrP-receptor to these distinct signaling pathways and various downstream molecular targets remains poorly defined.

A recently identified target of PTH/PTHrP action in osteoblasts is the plasma membrane Na<sup>+</sup>/H<sup>+</sup> exchanger, which plays a central role in modulating intracellular pH (pH<sub>i</sub>) (6–8). In osteoblastic cells, regulation of pH<sub>i</sub> is a critical component of hormone-stimulated bone remodeling where local fluctuations occur in the osseous microenvironment (9). Numerous studies have shown that Na<sup>+</sup>/H<sup>+</sup> exchanger activity is acutely regulated by a wide variety of stimuli that activate diverse signal transduction systems (*i.e.* PKA, PKC, Ca<sup>2+</sup>/calmodulin-dependent protein kinase II, tyrosine kinases), although in many cases the precise mechanisms have yet to be fully elucidated (reviewed in Ref. 10). This extensive functional and regulatory diversity appears to be generated by tissue-specific expression of multiple isoforms of the Na/H exchanger as well as by variations in the signaling repertoire of individual cell types (reviewed in Ref. 11). To date, four members (NHE-1 to NHE-4) of this gene family have been identified and characterized by cDNA cloning (11–14) and functional expression studies (15–18). Overall, they share ~40–60% amino acid identity and contain one or more potential sites for phosphorylation by different serine/threonine protein kinases in their putative cytoplasmic carboxyl-terminal region. More recently, a putative fifth (19) and possibly sixth (20) isoform have been located by chromosomal mapping in humans.

In osteoblastic cell lines, there are conflicting reports regarding the regulation of the Na<sup>+</sup>/H<sup>+</sup> exchanger and pH<sub>i</sub> by PTH/PTHrP and second messengers. Elevation of intracellular cAMP levels by PTH, PTHrP, forskolin, or cAMP analogues has been reported to inhibit (6, 7, 21) or stimulate (22) Na<sup>+</sup>/H<sup>+</sup> exchanger activity in UMR-106 cells. Aside from methodological considerations, the reason for this difference is unclear. In addition, phorbol 12-myristate 13-acetate (PMA treatment) also leads to stimulation of Na<sup>+</sup>/H<sup>+</sup> exchanger activity, presumably through activation of PKC (22). Thus, at least two distinct signaling pathways appear to regulate this ion transporter in bone cells. In contrast to UMR-106 cells, PTH as well as epinephrine, a β-adrenergic agonist that also activates a G protein-linked receptor coupled to adenylate cyclase, were found to activate the Na<sup>+</sup>/H<sup>+</sup> exchanger independent of

Parathyroid hormone (PTH)<sup>1</sup> and PTH-related peptide

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<sup>1</sup> The abbreviations used are: PTH, parathyroid hormone; PTHrP, parathyroid hormone-related peptide; PKA, protein kinase A; PKC, dithiothreitol; αMEM, α minimum essential medium.

changes in cAMP accumulation in rat osteosarcoma ROS 17/2.8 cells (23). Further studies revealed that  $\beta$ -adrenergic receptor-mediated activation of the  $\text{Na}^+/\text{H}^+$  exchanger involved a G protein ( $\text{G}_{\alpha_{13}}$ ) that was not linked to either adenylate cyclase or phospholipase C (24, 25), thereby implicating the involvement of a novel third pathway. Whether this also applies to the PTH receptor is unknown. Nonetheless, it is conceivable that the PTH/PTHRP signal to modulate  $\text{Na}^+/\text{H}^+$  exchanger activity in osteoblasts is transduced by more than two signaling pathways. In addition, the regulatory diversity mentioned above may also be reflected by cellular expression of one or more isoforms of the  $\text{Na}^+/\text{H}^+$  exchanger that are differentially responsive to distinct signaling pathways. The identity of specific  $\text{Na}^+/\text{H}^+$  exchanger isoforms in osteoblastic cells has yet to be determined.

The purpose of this study was two-fold. First, using UMR-106 cells as a model system, we wished to examine in greater detail the reported linkage of PTH/PTHRP to the PKA and PKC signaling pathways, and possibly to another pathway involving  $\text{G}_{\alpha_{13}}$ , in regulating  $\text{Na}^+/\text{H}^+$  exchanger activity. This was accomplished as follows: (i) by using a series of synthetic peptide fragments of PTH and PTHRP that selectively activate adenylate cyclase and/or phospholipase C, and (ii) by using other downstream activators (*i.e.* forskolin and PMA) and inhibitors of the PKA and PKC pathways. Second, we wished to identify which isoform(s) of the  $\text{Na}^+/\text{H}^+$  exchanger is(are) present in these cells. Our results demonstrated that only the NHE-1 isoform is expressed in UMR-106 cells and that PTH and PTHRP selectively activate NHE-1 via a pathway involving PKA.

#### EXPERIMENTAL PROCEDURES

**Materials**—Phosphatidyl L-serine, dioleoin, dithiothreitol (DTT), phenylmethylsulfonyl fluoride (PMSF), EDTA, EGTA, and leupeptin were obtained from Sigma.  $\alpha$  Minimum essential medium ( $\alpha$ MEM), fetal bovine serum, trypsin-EDTA, and Geneticin were purchased from Life Technologies, Inc. Dowex AG50 WX4 (200–400 mesh) and neutral chromatographic Alumina WN-3 were from Bio-Rad. DEAE-Sephacel was purchased from Pharmacia Biotech Inc. Carrier-free  $^{22}\text{NaCl}$  (5 mCi/ml), and  $[\gamma\text{-}^{32}\text{P}]\text{ATP}$  (0.5 mCi/ml) were obtained from DuPont NEN. The different human PTH and PTHRP synthetic fragments were kind gifts of Dr. K. Muller (CIBA-Geigy, Basel, Switzerland). Forskolin, 1,9-dideoxyforskolin, PMA, 4 $\alpha$ -PMA, H-89, and chelerythrine chloride were purchased from Biomol Research Laboratories, Inc. (Plymouth Meeting, PA). All other chemicals were from Fisher Scientific and BDH.

**Tissue Culture**—Rat osteoblastic osteosarcoma cells (UMR-106) were maintained in Dulbecco's modified Eagle's medium containing 10% fetal bovine serum. The Chinese hamster ovary cell line devoid of endogenous NHE activity (AP-1) was transfected with cDNAs containing the entire coding region of rat NHE-1, NHE-2, or NHE-3 as described previously (13, 15). Rat NHE-4 was heterologously expressed in a Chinese hamster lung cell line (PS120) that also lacked endogenous NHE activity and was called PSCN-4 (generously provided by Dr. Eugene Chang; University of Chicago) (18). The transfected cells were grown in  $\alpha$ MEM supplemented with 10% fetal bovine serum and antibiotics (100 units/ml penicillin, 100  $\mu\text{g}/\text{ml}$  streptomycin, and 0.25  $\mu\text{g}/\text{ml}$  fungizone). Cells were incubated in a humidified atmosphere of 95% air, 5%  $\text{CO}_2$  at 37 °C.

**Adenylate Cyclase Activity**—Adenylate cyclase activity was determined using a method based on incorporation of  $[\text{H}^3]\text{adenine}$  into ATP and its conversion to  $[\text{H}^3]\text{cAMP}$  (3). Prior to each assay, confluent cells were incubated overnight in serum-free medium. The assay was initiated by adding  $[\text{H}^3]\text{adenine}$  ( $4 \times 10^5$  cpm) to each tissue culture well and incubating for 2 h. Following this incubation period, the medium was aspirated and the cells were washed twice with 1 ml of  $\alpha$ MEM without serum. Then, 0.5 ml of previously prepared solutions containing PTH or PTHRP synthetic fragments, forskolin, or PMA in  $\alpha$ MEM supplemented with 1 mM isobutylmethylxanthine (to prevent breakdown of cAMP by phosphodiesterases) were added to each well and cells were incubated for a period of 15 min. The medium of each well was then aspirated in the same order of application and 0.5 ml of ice-cold 10% trichloroacetic acid was added to each well to stop the reaction and extract the  $[\text{H}^3]\text{cAMP}$ . The  $[\text{H}^3]\text{cAMP}$  was isolated by chromatography on Dowex and Alumina columns and quantitated in a  $\beta$ -counter.

Adenylate cyclase activity was expressed as  $[\text{H}^3]\text{cAMP}$  produced/15 min/well.

**Protein Kinase C Activity**—PKC activity was assayed according to previously described procedures (26, 27). Briefly, cells were washed twice with serum-free media and stimulated with different concentrations of PTH or PTHRP synthetic fragments or PMA for a period of 2 min. At the end of the stimulation period, the cells were washed twice with ice-cold PBS and then gently scraped in a buffer (800  $\mu\text{l}$ ) containing 2 mM Tris-Cl (pH 7.5), 250 mM sucrose, 2 mM EDTA, 5 mM EGTA, 1 mM DTT, 50 mM PMSF, and 2.5  $\mu\text{g}/\text{ml}$  leupeptin. These cells were then sonicated twice on ice for a period of 10 s each using a Branson Sonifier (model 450) set at low intensity. This was followed by a 60-min ultracentrifugation at  $100,000 \times g$ . The supernatant containing the cytosolic fraction was removed. The pellet containing the membrane fraction was resuspended in the same buffer (800  $\mu\text{l}$ ) containing 10% Triton X-100 and sonicated twice on ice for 10 s at medium intensity. The sonicate was shaken at 4 °C for 1 h and then subjected to ultracentrifugation at  $100,000 \times g$  for 60 min. The supernatant containing the solubilized membrane fraction was then collected. The cytosol and solubilized membrane fractions were then each applied to a DEAE-cellulose column, which was washed with buffer containing 2 mM Tris-Cl (pH 7.5), 1 mM EDTA, 1 mM EGTA, 1 mM DTT, 50 mM PMSF, and 2.5  $\mu\text{g}/\text{ml}$  leupeptin. The PKC enzyme was eluted from the column with buffers containing 130 and 150 mM NaCl. The PKC activity of the eluate was assayed by incorporation of  $[\gamma\text{-}^{32}\text{P}]\text{ATP}$  into a seven-amino acid synthetic peptide (FKKSFKL-NH $_2$ ) and quantitated using a  $\beta$ -counter. All counts were then corrected for the amount of protein present in 50  $\mu\text{l}$  of the cytosolic or the solubilized membrane fraction. Results were calculated as the amount of PKC present in the membrane relative to the amount of PKC present in the cytosol, and control ratios were taken as basal activity and normalized to a value of 1.

**Northern Blotting**—Total RNA was extracted from cell cultures according to the method of Chomczynski and Sacchi (28). The RNA preparation was denatured in 37% formaldehyde and separated by agarose gel (1.5%) electrophoresis, transferred onto nitrocellulose membrane filters, and baked at 80 °C for 2 h. The RNA blots were then hybridized with cDNAs encoding rat NHE-1 (*Pst*I fragment, nucleotides +478 to +1850; number +1 begins at the ATG translation start codon), NHE-2 (*Bam*HI-*Sac*II fragment, nucleotides +269 to +1314), NHE-3 (*Pst*I fragment, nucleotides +1153 to +2434), or NHE-4 (*Kpn*I-*Dra*I fragment, nucleotides +1427 to +2535). Probes were labeled with  $[\alpha\text{-}^{32}\text{P}]\text{dCTP}$  using an Amersham Multiprime DNA labeling kit. The filters were prehybridized, hybridized, and washed as described previously (12). The filters were then exposed to autoradiographic film with an intensifying screen for 8 days at –80 °C.

**$^{22}\text{Na}^+$  Influx Measurements**—Amiloride-inhibitable  $^{22}\text{Na}^+$  Influx was used as a measure of  $\text{Na}^+/\text{H}^+$  exchanger activity as described previously (15). Briefly, UMR-106 cells were grown to confluence in 24-well plates. Cells were incubated in serum-free media overnight. The cells were then washed twice with a  $\text{Na}^+$ -saline solution containing 130 mM NaCl, 5 mM KCl, 1 mM  $\text{MgCl}_2$ , 2 mM  $\text{CaCl}_2$ , and 20 mM HEPES-Tris (pH 7.4) followed by a 15-min period of preincubation at 37 °C in the same  $\text{Na}^+$ -saline solution supplemented with appropriate concentrations of the various stimulatory agents. The cells were then washed twice with a solution containing 130 mM choline chloride, 1 mM  $\text{MgCl}_2$ , 2 mM  $\text{CaCl}_2$ , 5 mM glucose, and 20 mM HEPES-Tris (pH 7.4).  $^{22}\text{Na}^+$  influx assays were initiated by incubating the cells with the respective agents prepared in choline chloride solution containing 1 mM ouabain and 1  $\mu\text{Ci}/\text{ml}$   $^{22}\text{NaCl}$  (carrier-free), and in the absence or presence of 1 mM amiloride for 12 min (unless indicated otherwise) at room temperature. The incubation was terminated by adding 1 ml of an ice-cold NaCl stop solution containing 130 mM NaCl, 1 mM  $\text{MgCl}_2$ , 2 mM  $\text{CaCl}_2$ , and 20 mM HEPES-Tris (pH 7.4). The solution was quickly aspirated and then rapidly repeated an additional three times.

In experiments where exchanger activity was to be determined from the rate of  $^{22}\text{Na}^+$  influx at constant  $\text{H}^+$  concentration,  $\text{pH}_i$  was clamped by incubating the cells in medium of varying  $\text{K}^+$  concentration containing the  $\text{K}^+/\text{H}^+$  exchange ionophore nigericin (29). Because at equilibrium  $[\text{K}^+]_i/[\text{K}^+]_o = [\text{H}^+]_i/[\text{H}^+]_o$ , the desired  $\text{pH}_i$  was calculated from the imposed  $[\text{K}^+]$  gradient and the extracellular pH ( $\text{pH}_o = 7.4$ ), assuming an intracellular  $[\text{K}^+]$  of 140 mM. Briefly, the cell monolayer were washed twice with  $\text{Na}^+$ -saline solution and preincubated for 15 min in KCl solution. In this study, the  $\text{pH}_i$  was set at 6.6; the  $\text{pH}_i$  clamping solution contained 142 mM *N*-methyl-D-glucamine methanesulfonate, 14 mM KCl, 8 mM potassium glutamate, 2 mM NaCl, 1 mM  $\text{MgCl}_2$ , 10  $\mu\text{M}$  nigericin, and 10 mM HEPES. Then, the solution was removed and measurements were made in KCl solution supplemented with 1 mM ouabain and 1  $\mu\text{Ci}/\text{ml}$   $^{22}\text{NaCl}$  in the absence or presence of 1 mM amiloride.



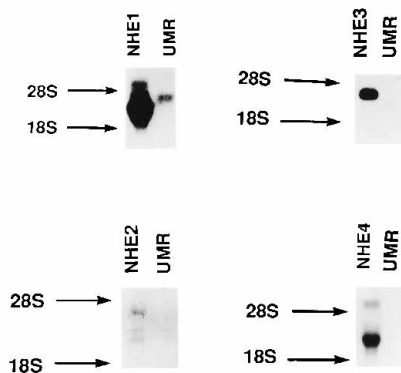


FIG. 3. **Determination of  $\text{Na}^+/\text{H}^+$  exchanger isoform expression in UMR-106 cells.** Total cellular RNA was extracted from the following cell lines: rat UMR-106 cells; AP-1 cell transformants that stably expressed either rat NHE-1, NHE-2, or NHE-3; and PS120 cells that stably expressed rat NHE-4. Total cellular RNA (20  $\mu\text{g}$ ) was analyzed by Northern blot hybridization (see "Experimental Procedures" for further details).  $^{32}\text{P}$ -Labeled isoform-specific cDNA fragments were used as probes. The positions of the 28 and 18 S rRNAs were used as markers and are shown on the left of the figure panels.

in PS120 cells transfected with rat NHE-4 (Fig. 3, bottom right panel). Thus, UMR-106 cells appear to express only the NHE-1 isoform.

**Influence of PTH and PTHRP Fragments on NHE-1 Activity**—As demonstrated above, synthetic peptide fragments of PTH and PTHRP were capable of activating either adenylate cyclase and PKC or just PKC. Hence, these fragments provide a useful means of determining whether stimulation of one or both pathways are associated with PTH/PTHRP regulation of NHE-1. To this end, preliminary studies were conducted to define appropriate assay conditions for measuring  $\text{Na}^+/\text{H}^+$  exchanger activity, defined as initial rates of amiloride-inhibitable  $^{22}\text{Na}^+$  influx, as a function of uptake time and hormone concentration. Following pretreatment of UMR-106 cells with 100 nM PTH(1–34) for 15 min in  $\text{Na}^+$ -saline medium, amiloride-inhibitable  $^{22}\text{Na}^+$  influx was found to increase linearly in the continual presence of the PTH analogue for a 12-min period (Fig. 4A). In view of this observation, subsequent measurements were performed using this time interval. PTH(1–34) also stimulated NHE-1 activity in a concentration-dependent manner, reaching levels of ~250–300% at 100 nM PTH(1–34); the maximum concentration tested (Fig. 4B). Thereafter, a concentration of 100 nM was adopted for the other peptide hormone fragments. As illustrated in Fig. 5, both PTH(1–34) and PTHRP(1–34) stimulated amiloride-inhibitable  $^{22}\text{Na}^+$  influx to a similar extent (~250%). However, PTH(28–42), which activated only PKC, had no effect on NHE-1 activity. An identical lack of potency was also observed for PTH(3–34) and PTH(28–48) (data not shown) as well as the biologically inert fragment PTHRP(1–16) (Fig. 5).

The above data supported the notion that PTH(1–34) and PTHRP(1–34) may be selectively mediating their effects on NHE-1 activity via a cAMP-dependent pathway. This possibility was tested by increasing intracellular levels of cAMP with forskolin, which can directly activate adenylate cyclase. As shown in Fig. 5, 10  $\mu\text{M}$  forskolin also increased NHE-1 activity to ~340% of control values, whereas a biologically inert forskolin analogue, 1,9-dideoxyforskolin (10  $\mu\text{M}$ ), had no effect. The absence of stimulation by 1,9-dideoxyforskolin indicated that forskolin-induced activation of NHE-1 activity was biologically relevant and not a nonspecific effect of the compound. To test this hypothesis further, the effect of a highly selective inhibitor of PKA, H-89 (36), was investigated. This cell permeant compound has been shown to effectively inhibit PKA while having

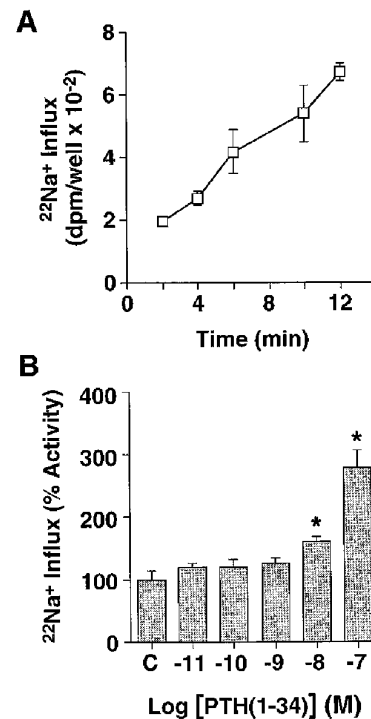


FIG. 4. **Effect of PTH(1–34) as a function of uptake time and concentration on  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells.** UMR-106 cells were grown to confluence in 24-well plates. A, prior to  $^{22}\text{Na}^+$  influx measurements, the cells were preincubated in PTH(1–34) (100 nM) for 15 min in isotonic NaCl solution. The cells were rapidly washed with  $\text{Na}^+$ -free isotonic choline chloride solution and then incubated in assay medium containing 1  $\mu\text{Ci}/\text{ml}$   $^{22}\text{NaCl}$  (carrier-free).  $^{22}\text{Na}^+$  influx was measured at increasing time intervals in the continuing presence of PTH(1–34). Low levels of background  $^{22}\text{Na}^+$  influx that were not inhibitable by 1 mM amiloride were subtracted from the total influx.  $\text{Na}^+/\text{H}^+$  exchanger activity was expressed as initial rates of amiloride-inhibitable  $^{22}\text{Na}^+$  influx. Each value is the mean  $\pm$  S.E. of 4–6 determinations. B, prior to  $^{22}\text{Na}^+$  influx measurements, the cells were preincubated with increasing concentrations of PTH(1–34) ( $10^{-11}$  to  $10^{-7}$  M) for 15 min in isotonic NaCl solution. The cells were then assayed for  $\text{Na}^+/\text{H}^+$  exchanger activity at the different concentrations of PTH(1–34) using a 12-min uptake period as described above. Each value is the mean  $\pm$  S.E. of up to 6 determinations from three experiments. Significance from control (C) measurements in the absence of PTH(1–34) is indicated by an asterisk (\*,  $p < 0.02$ ).

no detectable effect on the activities of PKC, protein kinase G, and  $\text{Ca}^{2+}$ /calmodulin-dependent protein kinase II when applied to whole cells at high micromolar concentrations (36). Therefore, UMR-106 cells were preincubated with 100  $\mu\text{M}$  H-89, followed by incubation in the absence or presence of 10  $\mu\text{M}$  forskolin and 100 nM PTH(1–34). As illustrated in Fig. 5, H-89 abrogated the effects of these agents and confirmed the involvement of PKA. Furthermore, the complete abolition of PTH(1–34) activation of NHE-1 by H-89 also indicated that the PTH receptor did not transduce its signal to the exchanger by a potential third pathway that was independent of adenylate cyclase and phospholipase C.

Forskolin also accelerated the NHE-1 activity to  $129 \pm 4.8\%$  ( $p < 0.05$ ) of control values ( $100 \pm 6.5\%$ ) under acid-loaded, clamped  $\text{pH}_i$  conditions ( $\text{pH}_i = 6.6$ ) using the ionophore  $\text{K}^+$ -nigericin. A similar effect was also observed for PTH(1–34) ( $127 \pm 3.9\%$ ;  $p < 0.05$ ). Although the percentage stimulation was lower compared to unclamped conditions, this represented only an apparent decrease in the percentage since the absolute rates of amiloride-inhibitable  $^{22}\text{Na}^+$  influx are greatly increased in both control and forskolin-treated cells under acid-loaded conditions. Thus, these compounds were able to accelerate NHE-1 activity even when the  $\text{H}^+$  substrate concentration was held

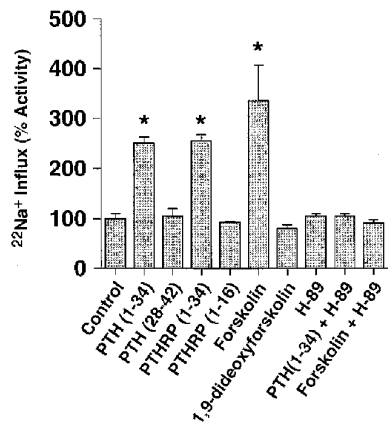


FIG. 5. Influence of PTH and PTHRP fragments and forskolin on  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells. Prior to measurements of  $\text{Na}^+/\text{H}^+$  exchanger activity, confluent UMR-106 cells were pretreated for 15 min with peptide fragments of PTH and PTHRP (each at 100 nM), forskolin (10  $\mu\text{M}$ ), or 1,9-dideoxyforskolin (10  $\mu\text{M}$ ), or pretreated for 1 h with the PKA antagonist H-89 (100  $\mu\text{M}$ ) to which PTH(1-34) or forskolin were added during the last 15 min. Results are shown as the difference between initial rates of  $^{22}\text{Na}^+$  influx in the absence and presence of 1 mM amiloride and are expressed as percent change in amiloride-inhibitable  $^{22}\text{Na}^+$  influx. Each value is the mean  $\pm$  S.E. of 6 determinations from three experiments. Significance from control measurements in the absence of any agent other than diluent was calculated using the Student's *t* test and is indicated by an asterisk (\*,  $p < 0.02$ ).

constant. Mechanistically, this suggested that the effect of both agents was not a consequence of increased metabolic production of acid.

Because other studies (8, 22) had indicated that  $\text{Na}^+/\text{H}^+$  exchanger activity could be stimulated by PKC in osteoblastic cells, it was somewhat surprising that PTH fragments (*i.e.* PTH(3-34), PTH(28-42), and PTH(28-48)) capable of increasing PKC activity were without effect. Since the earlier studies had evaluated the influence of PKC on  $\text{Na}^+/\text{H}^+$  exchanger activity by treatment of cells with phorbol esters, this class of agents was also examined. Consistent with the results obtained with PTH(3-34), PTH(28-42), and PTH(28-48), nanomolar concentrations (100 nM) of PMA that significantly activated PKC (see Fig. 2) had no effect on NHE-1 activity (Fig. 6A). In contrast, 1 and 10  $\mu\text{M}$  PMA significantly increased NHE-1 activity. Interestingly, the increase in PKC activity induced with 1  $\mu\text{M}$  PMA was not significantly different from that achieved with 0.1  $\mu\text{M}$  PMA. The biologically inactive PMA analogue, 4 $\alpha$ -PMA (10  $\mu\text{M}$ ), had no effect (Fig. 6A) and supported the view that PMA was acting in a specific and biologically relevant manner. Thus, only high concentrations of PMA (>0.1  $\mu\text{M}$ ) stimulated NHE-1 and suggested that a novel mechanism other than activation of PKC may be involved.

To investigate the validity of this supposition, the effect of chelerythrine chloride, a potent and selective inhibitor of PKC (37), was investigated. This cell permeant compound, used at a concentration of 1  $\mu\text{M}$ , effectively inhibits the catalytic domain of PKC but does not affect the binding of diacylglycerol or phorbol esters to the regulatory domain (37). As shown in Fig. 6B, 1  $\mu\text{M}$  chelerythrine chloride had only a marginal suppressive effect (~25–35%) on 1 and 10  $\mu\text{M}$  PMA-mediated stimulation of NHE-1. In contrast, 100  $\mu\text{M}$  H-89 completely prevented elevation of NHE-1 activity by 10  $\mu\text{M}$  PMA. These data supported the possibility that PMA may be modulating NHE-1 activity by a pathway involving PKA rather than PKC. Indeed, PMA has been reported to modulate adenylate cyclase type II activity in some cell systems via a mechanism that is partially (~50%) independent of PKC (38, 39). To explore this possibil-

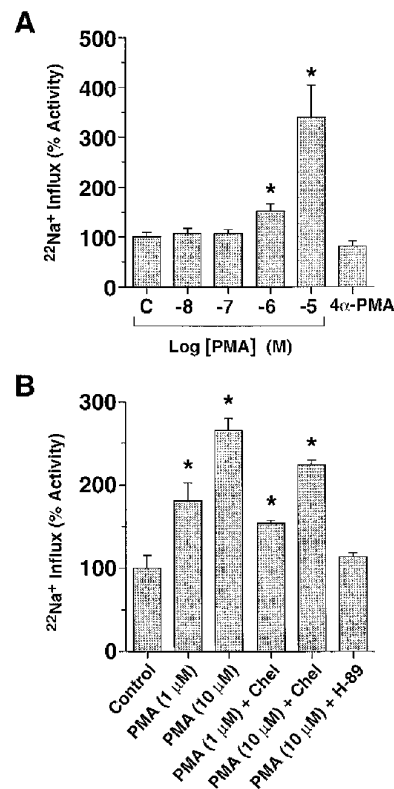


FIG. 6. Effect of phorbol ester on  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells. A, prior to amiloride-inhibitable  $^{22}\text{Na}^+$  influx measurements, UMR-106 cells were preincubated with increasing concentrations of PMA ( $10^{-8}$  to  $10^{-5}$  M) or 4 $\alpha$ -PMA (10  $\mu\text{M}$ ) for 15 min in isotonic NaCl solution. The cells were then assayed for  $\text{Na}^+/\text{H}^+$  exchanger activity in their continuing presence. B, UMR-106 cells were preincubated for 1 h in the absence or presence of 1  $\mu\text{M}$  chelerythrine chloride, a PKC antagonist, or 100  $\mu\text{M}$  H-89, a PKA antagonist. PMA was added at the indicated concentrations during the last 15 min of the preincubation period, followed by measurements of amiloride-inhibitable  $^{22}\text{Na}^+$  influx. Each value is the mean  $\pm$  S.E. of 6 determinations from two to three experiments. Significance from control measurements in the absence of any agent other than diluent was calculated using Student's *t* test and is indicated by an asterisk (\*,  $p < 0.02$ ).

ity, UMR-106 cells were treated with increasing concentrations of PMA and found to elevate adenylate cyclase activity, but only by a modest 2.5-fold at 10  $\mu\text{M}$  PMA (Fig. 7). This level of stimulation does not appear to be sufficient to activate the PKA  $\rightarrow$  NHE-1 pathway, since a minimum 20-fold increase in  $\text{cAMP}_i$  by 10 nM PTH(1-34) was required to significantly stimulate NHE-1 activity (see Figs. 1A and 4B). However, at present, one cannot exclude the possible existence of small compartmentalized accumulations of  $\text{cAMP}_i$  induced by high concentrations of PMA that are sufficient to activate localized pools of specific PKA subtypes (discussed below).

#### DISCUSSION

This study has identified that the  $\text{Na}^+/\text{H}^+$  exchanger isoform present in UMR-106 cells is NHE-1, which is the most broadly distributed isoform in mammalian tissues. Activation of the PTH/PTHRP receptor in these cells stimulates both the adenylate cyclase and phospholipase C signaling pathways and causes an increase in NHE-1 activity. However, only PTH analogues (*i.e.* PTH(1-34) and PTHRP(1-34)) capable of activating adenylate cyclase and PKA were able to stimulate NHE-1 activity, whereas those that retained the ability to enhance only PKC activity (*i.e.* PTH(3-34), PTH(28-42), and PTH(28-48)) were ineffective.

Prior studies examining the regulation of  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells are conflicting, with some reports

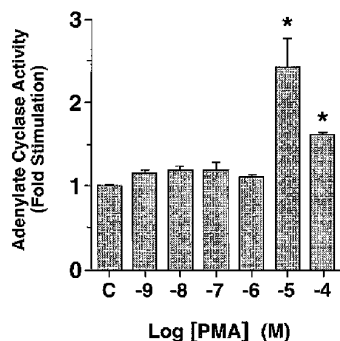


FIG. 7. Effect of PMA concentration on adenylate cyclase activity of UMR-106 cells. Experiments were performed as described under "Experimental Procedures." Results are the mean  $\pm$  S.E. of 6 determinations from three separate experiments. Control (C) adenylate cyclase activity was  $146 \pm 11$  cpm [ $^3\text{H}$ ]cAMP/15 min and was normalized to a value of 100%. Significance from control measurements in the absence of PMA is indicated by an asterisk (\*,  $p < 0.05$ ).

showing that elevation of  $\text{cAMP}_i$  levels by various agents was inhibitory (6, 7, 21) or stimulatory (22). Our results are in complete agreement with the latter study by Gupta and co-workers (22). These investigators, using the pH-sensitive fluorescent dye 2',7'-bis-(2-carboxyethyl)-5,6-carboxyfluorescein, demonstrated that forskolin could stimulate the rate of ethylisopropylamiloride-inhibitable  $\text{H}^+$  efflux, which is an alternative means of assessing  $\text{Na}^+/\text{H}^+$  exchanger activity, in UMR-106 cells at resting  $\text{pH}_i$  and following an intracellular acid load. These microfluorometric analyses of  $\text{pH}_i$  complemented our measurements of forskolin- and PTH(1–34)-induced increases in amiloride-inhibitable  $^{22}\text{Na}$  influx under similar conditions. Since these compounds accelerated NHE-1 activity even under an imposed acid load, it is unlikely that their effects can be solely accounted for by a mechanism involving cAMP enhancement of metabolic  $\text{H}^+$  production which can occur in some cell types (40). Moreover, the kinetic analyses of Gupta *et al.* (22) showed that forskolin increased both the magnitude and  $\text{H}^+$  affinity of the  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells. In contrast, other studies (6, 7, 21) have observed cAMP-mediated inhibition of  $\text{Na}^+/\text{H}^+$  exchanger activity in UMR-106 cells. The reason for the discrepancy is unclear but may reflect different experimental conditions. Both Gupta *et al.* (22) and our own studies were performed using adherent cell cultures, whereas the other studies determined  $\text{Na}^+/\text{H}^+$  exchanger activity in suspensions of UMR-106 cells after enzymatic digestion of the cultures. Cell attachment has been implicated in the regulation of  $\text{pH}_i$  through the action of integrins (41) and cytoskeletal components (42). In view of the fact that osteoblastic and particularly pre-osteoblastic cells *in vivo* (1) may communicate via cellular processes, the maintenance of the integrity of cell-cell communication may be important for accurately assessing hormone-regulated  $\text{Na}^+/\text{H}^+$  exchanger activity.

Additional evidence supporting a role for cAMP in the regulation of NHE-1 is rather sparse. Human (40) and rabbit (17) NHE-1 expressed in PS120 fibroblastic cells did not respond to cAMP analogues. In contrast, primary rat hepatocytes (43) and murine macrophages (44) showed significant cAMP-induced stimulation of  $\text{Na}^+/\text{H}^+$  exchanger activity. Subsequent investigations indicated that these tissues expressed only NHE-1 mRNA (12, 13).<sup>2</sup> Furthermore, preliminary data has shown that rat NHE-1 stably expressed in Chinese hamster ovary AP-1 cells is also activated by agonists that increase cAMP

accumulation.<sup>3</sup> In addition to mammalian NHE-1, the trout red cell also expresses a  $\text{Na}^+/\text{H}^+$  exchanger, called  $\beta\text{NHE}$ , that is cAMP-activable and has a primary structure with highest identity to that of mammalian NHE-1 (40). Thus, the diverse regulation of NHE-1 by increasing  $\text{cAMP}_i$  appears to be partly influenced by the signaling repertoire of individual cell types and perhaps by species variation. Further studies are in progress to define the precise molecular mechanism by which NHE-1 is regulated by agents that activate PKA.

Stimulation of  $\text{Na}^+/\text{H}^+$  exchange by phorbol esters has also been reported in rat UMR-106 (22) and human osteoblastic SaOS-2 (8) cells, presumably via activation of PKC. Our examination of the effects of PMA in UMR-106 cells produced mixed results that were concentration-dependent. At low concentrations of PMA (*i.e.* 100 nM), PKC activity was significantly increased, but no effect on NHE-1 activity was observed. This was consistent with data obtained using PTH analogues that exclusively activated PKC but did not alter NHE-1 activity. However, higher pharmacological concentrations ( $\geq 1 \mu\text{M}$ ) of PMA caused significant stimulation of NHE-1 and appeared to corroborate results from the previous study of UMR-106 cells (22) where a similar concentration of PMA was used. To resolve this seemingly contradictory result, our analyses were extended by assessing the effects of highly specific antagonists of PKA and PKC. Surprisingly, the effects of PMA were abolished by the PKA antagonist H-89 while being relatively unaffected by the PKC inhibitor chelerythrine chloride. This suggested that high concentrations of PMA could activate PKA via a nonclassical mechanism. At present, only limited circumstantial evidence exists for PKC-independent effects mediated by PMA. For example, in human embryonic kidney (HEK-293) cells, PMA has been reported to modulate adenylate cyclase type II activity in the range of 2–9-fold via a pathway that is only partially prevented ( $\sim 50\%$ ) by inhibition of PKC (38, 39), thereby implicating the involvement of additional mechanisms that are PKC-independent. This may also partly explain other observations that acute treatment of UMR-106 (45), ROS 17/2.8 (46), or fetal rat osteoblasts (47) with phorbol esters significantly enhanced PTH-mediated stimulation of adenylate cyclase activity. Regardless of the precise mechanism, but assuming that PMA activated PKA by elevating  $\text{cAMP}_i$ , it remained perplexing that  $10 \mu\text{M}$  PMA could substantially elevate NHE-1 activity by raising  $\text{cAMP}_i$  levels only 2.5-fold, whereas a 25-fold increase in  $\text{cAMP}_i$  levels was required to achieve a similar degree of stimulation by 100 nM PTH(1–34) or PTHRP(1–34). Although speculative, one possible explanation to account for this difference is that PTH(1–34) and PMA may mediate their effects on NHE-1 activity in UMR-106 cells by differential activation of distinct adenylate cyclase (48) and PKA (49) isoforms that reside in unique subcellular regions (for review, see Ref. 50). Indeed, compartmentalized increases in  $\text{cAMP}_i$  have been observed in living cells by microfluorescent techniques (51). Furthermore, individual hormones have been found to preferentially activate distinct PKA isoforms in a tissue-specific manner. For example, in UMR-106 cells, PTH and prostaglandin  $\text{E}_2$  ( $\text{PGE}_2$ ) were found to preferentially activate type I PKA, whereas in normal rat clavalial osteoblasts, PTH activated type I and II PKA to similar extents while  $\text{PGE}_2$  stimulated type II PKA almost exclusively (52). Regionalized membrane localization of NHE-1 has also been observed in adherent fibroblasts (42). Compartmentation of small changes in  $\text{cAMP}_i$  below the detection sensitivity of our assay may also explain why  $1 \mu\text{M}$  PMA activated NHE-1 without causing an

<sup>2</sup> Demaurex, N., Orlowski, J., Brisseau, G., Woodside, M., and Grinstein, S. (1995) *J. Gen. Physiol.* **106**, 85–111.

<sup>3</sup> R. Kandasamy, R. Harris, F. H. Yu, A. Boucher, J. W. Hanrahan, and J. Orlowski, manuscript in preparation.

observable change in adenylate cyclase activity. Thus, the magnitude and spatial localization of increases in  $\text{cAMP}_i$  resulting from different stimuli may be important in the signaling activation of NHE-1. Further experimentation will be required to resolve this phenomenon, but is beyond the scope of the current study.

Notwithstanding the unique regulation of NHE-1 by PMA in UMR-106 cells, a number of other studies have provided convincing data that NHE-1 is regulated by PKC. Stable expression of human (53) and rabbit (17) NHE-1 in fibroblastic cells (PS120) has shown that this isoform is rapidly activated following acute cell stimulation by nanomolar concentrations of phorbol esters as well as growth factors and other mitogens. Mechanistically, this response is associated with increased phosphorylation of a common set of tryptic peptide fragments in the cytoplasmic tail-region of the exchanger (53–55). Moreover, this isoform contains several putative PKC consensus sequences (56) in its carboxyl-terminal region. Interestingly, this region does not contain a classical consensus site (RRXS) for PKA. However, since there is overlap in consensus sequence determinants among protein kinases (56), one cannot exclude the potential for PKA phosphorylation of NHE-1. At present, however, it is unclear if phosphorylation of NHE-1 *in vivo* is mediated directly or indirectly by these protein kinases and, indeed, whether phosphorylation *per se* is responsible for the altered activity. It is conceivable that the true targets of protein kinases are cell-specific ancillary factors that subsequently interact with the  $\text{Na}^+/\text{H}^+$  exchanger and regulate its activity. Cell-specific expression of these factors could account for the differential responsiveness of NHE-1 to individual protein kinases.

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