

Forum Minireview

ATP- and Adenosine-Mediated Signaling in the Central Nervous System: Adenosine Stimulates Glutamate Release From Astrocytes via A_{2a} Adenosine ReceptorsTomoyuki Nishizaki^{1,*}¹Department of Physiology, Hyogo College of Medicine, 1-1 Mukogawa-cho, Nishinomiya 663-8501, Japan

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Abstract. Adenosine enhanced intracellular Ca²⁺ concentrations in astrocytes via A_{2a} adenosine receptors involving protein kinase A (PKA) activation. The Ca²⁺ rise is inhibited by brefeldin A, an inhibitor of vesicular transport; but not by neomycin and U73122, phospholipase C inhibitors; xestospongine, an IP₃-receptor inhibitor; ryanodine, a ryanodine-receptor inhibitor; TMB-8, an endoplasmic reticulum calcium-release blocker; octanol, a gap-junction inhibitor; or cadmium, a non-selective, calcium-channel blocker. Adenosine stimulates astrocytic glutamate release via an A_{2a} adenosine receptors/PKA pathway, and the release is inhibited by the vesicular transport inhibitors brefeldin A and bafilomycin A1. A_{2a} adenosine receptors and the ensuing PKA events, thus, are endowed with vesicular Ca²⁺ release from an unknown intracellular calcium store and vesicular glutamate release from astrocytes.

Keywords: adenosine, A_{2a} receptor, glutamate release, Ca²⁺, astrocyte

A new neuromodulatory pathway with a glial contribution mediated via A_{2a} adenosine receptors

Several lines of evidence have pointed to direct communications between neurons and astrocytes. Astrocytes express a wide range of receptors and respond to synaptically released neurotransmitters released from presynaptic terminals (1). Astrocytes, alternatively, release neurotransmitters in response to an increase in intracellular Ca²⁺ concentrations, which in turn stimulates neurons (2–6). A low concentration (10 nM) of adenosine facilitates hippocampal neurotransmission, where adenosine does not affect synaptically released glutamate and GABA or postsynaptic glutamatergic and GABAergic conductances (7). Adenosine, on the other hand, inhibits functions of the astrocytic glutamate transporter GLT-1 and stimulated glutamate release via A₂ adenosine receptors involving protein kinase A (PKA) activation (7). Those actions could enhance synaptic glutamate concentrations, responsible for the facilitatory action of adenosine on hippocampal neurotransmission. Adenosine, thus, modulates hippocampal

neurotransmission by targeting astrocytes.

Intracellular Ca²⁺ rise in astrocytes via A_{2a} adenosine receptors

Adenosine (10 nM) increases astrocytic intracellular Ca²⁺ concentrations in Ca²⁺-containing and -free extracellular solution, indicating that adenosine stimulates Ca²⁺ release from intracellular Ca²⁺ stores in astrocytes (7). The Ca²⁺ rise is inhibited by 3,7-dimethyl-1-propargylxanthine (DMPX), an antagonist of A₂ adenosine receptors, or H-89, a selective inhibitor of PKA (7). This suggests that the intracellular Ca²⁺ rise is regulated via an A_{2a} adenosine receptors/PKA pathway. In further support of this idea, the A₂ adenosine receptor agonist CGS21680 enhances intracellular Ca²⁺ concentrations in astrocytes, and the effect is inhibited by DMPX or H-89 (Fig. 1). Surprisingly, brefeldin A, an inhibitor of vesicular transport, inhibits the CGS21680 action (Fig. 1). This, taken together with the fact that the intracellular Ca²⁺ rise is not affected by the phospholipase C inhibitors neomycin and U73122, the IP₃-receptor inhibitor xestospongine, the ryanodine-receptor inhibitor ryanodine, the endoplasmic reticulum (ER) calcium-release blocker TMB-8, the gap-junction inhibitor

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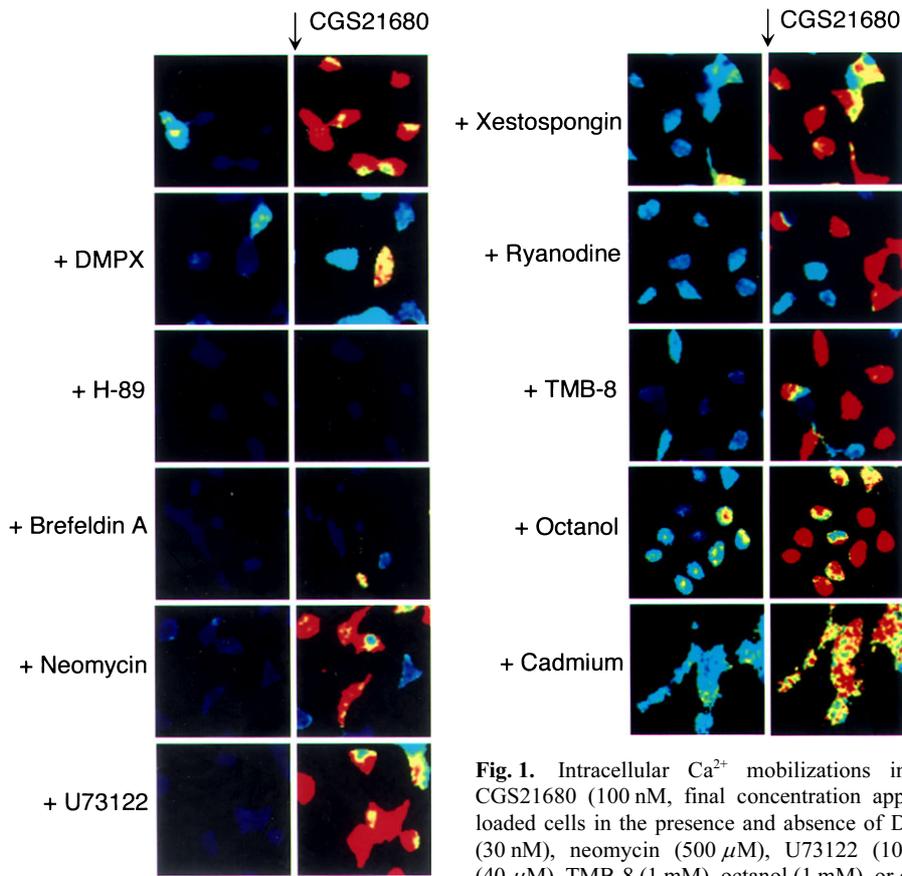
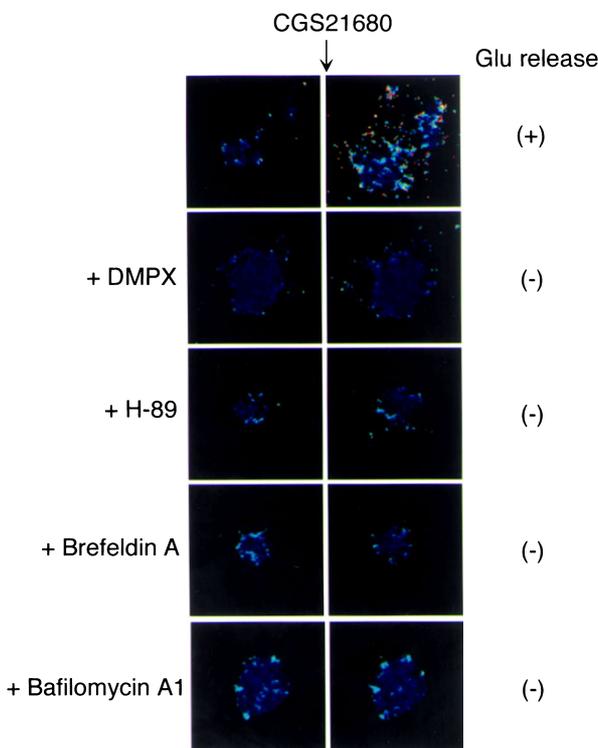


Fig. 1. Intracellular Ca^{2+} mobilizations in cultured rat hippocampal astrocytes. CGS21680 (100 nM, final concentration approx. 10 nM) was bath-applied to fura-2-loaded cells in the presence and absence of DMPX (10 μ M), H-89 (5 μ M), brefeldin A (30 nM), neomycin (500 μ M), U73122 (10 μ M), xestospongin (50 μ M), ryanodine (40 μ M), TMB-8 (1 mM), octanol (1 mM), or cadmium (200 μ M).



from glutamate to α -ketoglutarate. NADA fluorescence, therefore, is used as an indirect indicator of glutamate level. CGS21680 (approx. 10 nM) was bath-applied to cells in the presence and absence of DMPX (10 μ M), H-89 (5 μ M), brefeldin A (30 nM), or bafilomycin A1 (4 μ M).

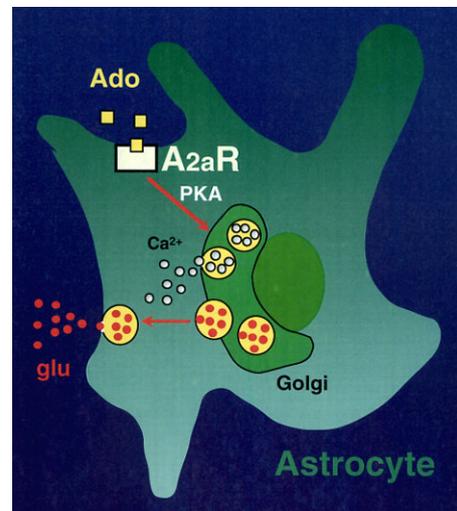


Fig. 3. Diagram for astrocytic glutamate release via an A_{2a} adenosine receptor/PKA signaling pathway. $A_{2a}R$, A_{2a} adenosine receptors; Ado, adenosine; glu, glutamate.

Fig. 2. Glutamate release from cultured rat hippocampal astrocytes. Glutamate released from astrocytes was detected by using an enzymatic assay. L-Glutamic dehydrogenase (GDH) reduces β -nicotinamide adenine dinucleotide (NAD^+) to $NADH$, which fluoresces when excited with UV, in parallel with a reaction

octanol, or the non-selective calcium channel blocker cadmium (Fig. 1), raises the possibility that A_{2a} adenosine receptors and the ensuing PKA events bear vesicular Ca^{2+} release from an as yet unidentified intracellular Ca^{2+} store in astrocytes.

Glutamate release from astrocytes via A_{2a} adenosine receptors

It is shown that intracellular Ca^{2+} rise triggers glutamate release from astrocytes (2–6, 8). As expected, adenosine causes a 2–3-fold increase in glutamate release from cultured hippocampal astrocytes from normal rats and mice (7). A similar increase is obtained with cultured astrocytes from GLT-1 knock-out mice and the glutamate release is not inhibited by the GLT-1 inhibitor dehydrokainic acid or by deleting Na^+ from extracellular solution (7). These demonstrate that the glutamate release is not due to reverse transport by transporters including GLT-1. Adenosine-induced glial glutamate release is inhibited by DMPX or H-89, but not by 8-CPT, an agonist of A_1 adenosine receptors (7). Additionally, CGS21680 stimulates astrocytic glutamate release; and the effect is inhibited by DMPX, H-89, or the vesicular transport inhibitors brefeldin A and bafilomycin A1 (Fig. 2). It is concluded from these results that adenosine stimulates vesicular glutamate release from astrocytes via A_{2a} adenosine receptor involving PKA activation (Fig. 3). Astrocytes contain synaptic proteins such as synaptobrevin II, cellubrevin, syntaxin, and SNAP-25 analogue (9–11). Then, the next important question as to how PKA interacts with those synaptic proteins awaits resolution.

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