

## Fenamates Potentiate the $\alpha_1$ -Adrenoceptor-Activated Nonselective Cation Channels in Rabbit Portal Vein Smooth Muscle

Kazunori Yamada, Yoshiki Waniishi, Ryuji Inoue\* and Yushi Ito

*Department of Pharmacology, Faculty of Medicine, Kyushu University, Fukuoka 812–82, Japan*

*Received October 16, 1995 Accepted November 7, 1995*

**ABSTRACT**—The agonistic action of fenamates on the  $\alpha_1$ -adrenoceptor-activated cationic current ( $I_{\text{cat}}$ ) in rabbit portal vein smooth muscle was investigated with the whole-cell patch clamp technique. At  $-50$  mV, the fenamates ( $100$ – $500$   $\mu\text{M}$ ) increased  $I_{\text{cat}}$  dose-dependently, up to several fold. This increase was not accompanied by changes in the reversal potential and strongly inhibited by  $500$   $\mu\text{M}$   $\text{Cd}^{2+}$  or  $10$  mM procaine. The enhancing effect of fenamates was also observed on the cationic current activated by intracellularly applied  $\text{GTP}\gamma\text{S}$ . These results suggest that fenamates may be useful as a new class of activator for receptor-operated cation channels in smooth muscle.

**Keywords:** Cation channel opener, Smooth muscle, Fenamate

Nonselective cation channels (NSCCs) constitute a large heterogeneous family of transmembrane channels that allow nonspecific passage of cations and open in response to a wide variety of stimuli imposed on the cell membrane. Despite their postulated significance in various cellular functions, the pharmacology of these channels remains poorly elucidated (1).

Fenamates such as mefenamate and flufenamate are derivatives of diphenylamine-2-carboxylate (DPC) and have emerged as non-steroidal antiinflammatory drugs. Although early electrophysiological studies reported that these compounds inhibit anionic movements, e.g., through a band 3 anion transporter in erythrocytes and  $\text{Ca}^{2+}$ -activated  $\text{Cl}^-$  channels in *Xenopus* oocytes (for review, see ref. 1), they were later shown to block NSCCs at micromolar concentrations in pancreatic exocrine gland (2). Since then, fenamates have been regarded as blockers for NSCCs in various tissues including smooth muscle (3).

In this paper, we describe a novel action of fenamates on NSCCs, i.e., their activation of the  $\alpha_1$ -adrenoceptor-activated cation channels in rabbit portal vein smooth muscle. This seems to have considerable pharmacological importance, because no chemicals are so far known to activate NSCCs except for naturally occurring marine toxins such as maitotoxin and palytoxin.

Male albino rabbits (1.8–2.0 kg, Japanese White;

Kajitani, Fukuoka) were anesthetized with intravenous sodium pentobarbitone (40 mg/kg) and then exsanguinated. A segment of the portal vein was excised after opening the abdominal cavity. The details for cell dispersion and the equipment and procedures employed in the patch clamp experiments are described elsewhere (4, 5). For quantifying changes in the amplitude of small noisy cationic currents, the current amplitude was integrated over 10 sec and averaged as the charge transported per second.

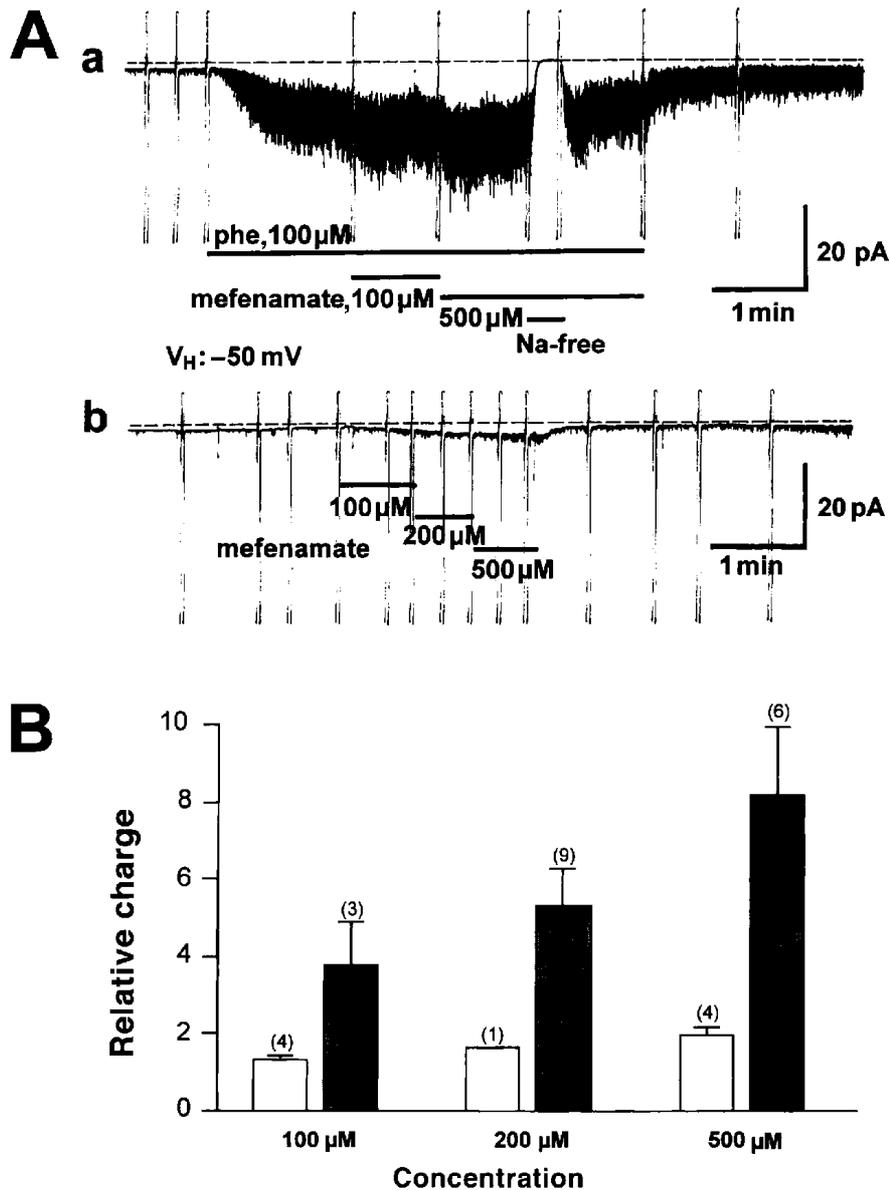
**Solutions:** modified Krebs solution: 140 mM  $\text{Na}^+$ , 5 mM  $\text{K}^+$ , 1.0 mM  $\text{Ca}^{2+}$ , 1.2 mM  $\text{Mg}^{2+}$ , 149.4 mM  $\text{Cl}^-$ , 5 mM glucose, 10 mM Hepes/Tris (pH 7.35–7.4); pipette solution: 130 mM  $\text{Cs}^+$ , 2 mM  $\text{Mg}^{2+}$ , 20 mM  $\text{Cl}^-$ , 110 mM aspartate $^-$ , 2 mM  $\text{SO}_4^{2-}$ , 10 mM EGTA and 10 mM Hepes (titrated to 7.2 with Tris base). The liquid junction potential of the internal solution with regard to the modified Krebs solution ( $-6$  mV) was corrected on later analysis.

**Chemicals:** Mefenamate and flufenamate were purchased from Wako Pure Chemical Industries, Ltd. (Osaka). All drugs, dissolved in DMSO as 200–500 mM stock solutions, were freshly diluted in the bathing solution just before use.

All statistical data represent means  $\pm$  S.E.M.

Figures 1Aa and 2Ba are typical records demonstrating the effects of fenamates on phenylephrine (phe)-induced ( $\alpha_1$ -adrenoceptor-activated) inward current ( $I_{\text{cat}}$ ; 4, 6). Addition of either mefenamate or flufenamate into the

\* To whom correspondence should be addressed.

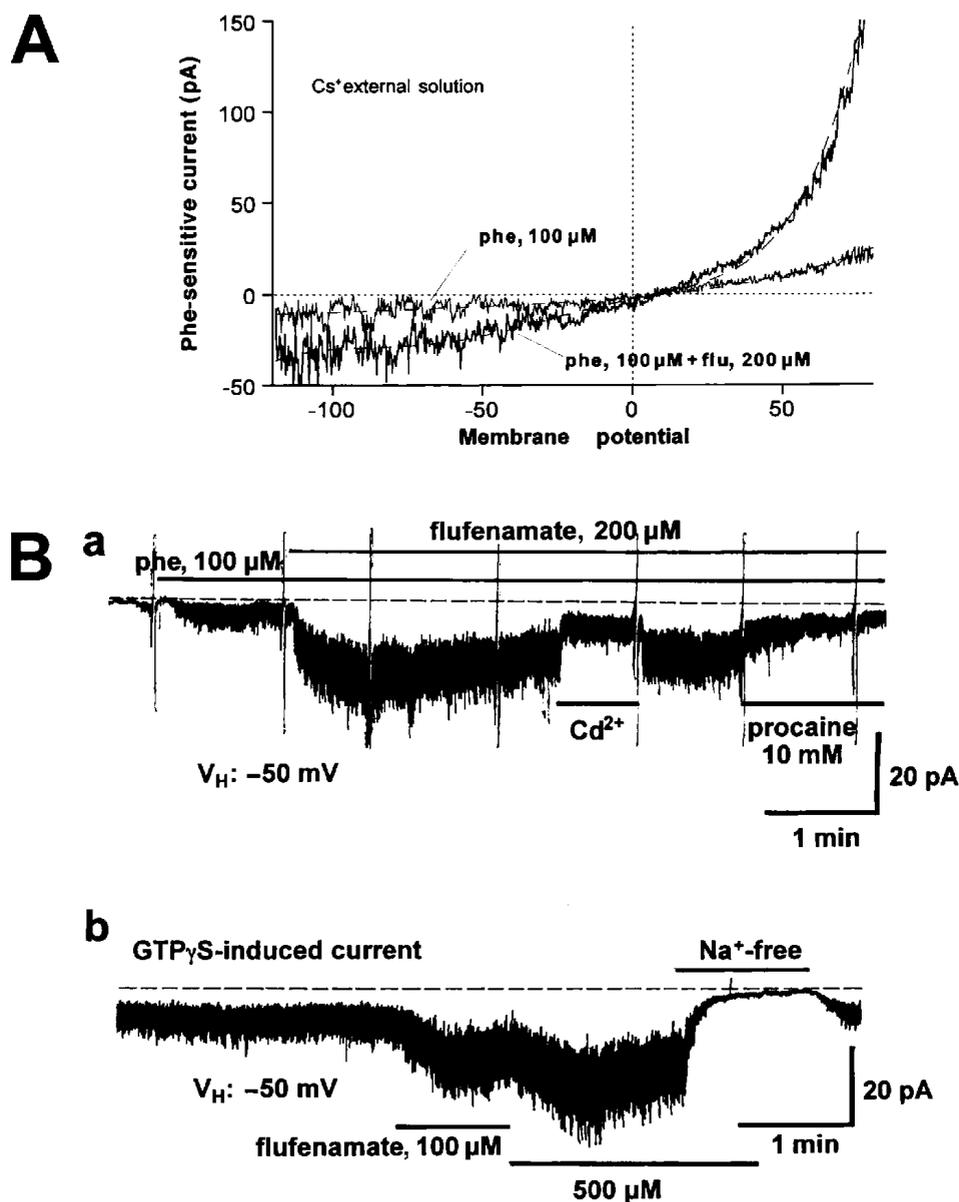


**Fig. 1.** Fenamates potentiate phenylephrine (phe)-induced cationic currents. **A:** Effects of mefenamate on the membrane current (at a holding potential of  $-50$  mV) in the presence (a) and absence (b) of  $100 \mu$ M phe, from the same cell. In  $\text{Na}^+$ -free solution, all cations except for protons were substituted by equimolar *N*-methyl *D*-glucamine. A slowly progressive decline in  $I_{\text{cat}}$  was observed in the continued presence of phe and/or fenamates. Dashed lines indicate the zero current level. **B:** Summary of fenamate-induced potentiation of  $I_{\text{cat}}$  (in the presence of  $100 \mu$ M phe). Open column, mefenamate; filled column, flufenamate. Columns and bars indicate the mean  $\pm$  S.E.M., respectively. The charge carried through  $I_{\text{cat}}$  at a given concentration of fenamate is normalized to that in its absence. The numbers in parentheses are the number of experiments.

bath produced a dose-dependent increase in the amplitude of inward currents in the presence of phe, which was completely abolished upon substituting external cations with *N*-methyl *D*-glucamine. The main part of this increase is unlikely to result from direct activation of the cationic current by the fenamates, since they could occasionally induce only small inward currents in the absence of phe (Fig. 1Ab: at  $-50$  mV,  $0.3 \pm 0.2$  pA in 2 out of 6 cells and  $0.9 \pm 0.4$  pA in 2 out of 4 cells with 200 and

$500 \mu$ M mefenamate, respectively, and  $0.9 \pm 0.3$  pA in 9 out of 16 cells and  $2.2 \pm 0.4$  pA in 7 out of 10 cells with 200 and  $500 \mu$ M flufenamate, respectively). The percent increase of  $I_{\text{cat}}$  attained by  $500 \mu$ M fenamates was  $195 \pm 24\%$  ( $n=4$ ) and  $818 \pm 177\%$  ( $n=6$ ) for mefenamate and flufenamate, respectively, suggesting that flufenamate is fourfold more potent than mefenamate (Fig. 1B).

The enhancing effect of fenamates on  $I_{\text{cat}}$  was still observed when the external cation was substituted by a sin-



**Fig. 2.** Properties of cationic currents after potentiation by flufenamate (flu). **A:** Current-voltage-relationship of  $I_{\text{cat}}$  under conditions where external cations were substituted by equimolar  $\text{Cs}^+$ . Voltage ramps of 2 sec ( $-120$  to  $80$  mV) were applied with and without phenylephrine (phe), and the net current obtained from the latter was subtracted from that obtained from the former. Dashed curves in panel A are drawn according to the best fit of data with 4th- to 5th-order polynomials from which the reversal potentials were measured. **Ba:** Inhibition of  $I_{\text{cat}}$  by  $500 \mu\text{M}$   $\text{Cd}^{2+}$  and  $10$  mM procaine. **Bb:** Flufenamate caused a dose-dependent increase in the cationic current induced by  $50 \mu\text{M}$   $\text{GTP}\gamma\text{S}$ . Dashed lines in panel B indicate the zero-current level.

gle cation,  $\text{Cs}^+$ , and the reversal potential of  $I_{\text{cat}}$  was little affected after potentiation by fenamates (Fig. 2A: the shift of reversal potential was  $-0.3 \pm 0.7$  mV in  $\text{Cs}^+$  external solution ( $n=4$ ) and  $0.1 \pm 0.4$  mV in modified Krebs solution ( $n=5$ )). These results suggest that the large increment induced by fenamates may not result from the altered ionic permeability of the phe-activated cation channels.

The degree of increase in  $I_{\text{cat}}$  by fenamates appeared to depend on the membrane potential (Fig. 2A): the percentage increase induced by  $200 \mu\text{M}$  flufenamate at  $-50$ ,  $50$  and  $75$  mV were 317%, 375% and 659%, respectively. This suggests that membrane depolarization might potentiate the fenamate-induced increase in the cationic current. Addition of potent blockers for receptor-operated cationic channels,  $500 \mu\text{M}$   $\text{Cd}^{2+}$  or  $10$  mM procaine (3,

4), strongly inhibited the fenamate-induced increase in  $I_{\text{cat}}$  (Fig. 2Ba).

The major site of action of fenamates may be located downstream from the  $\alpha_1$ -adrenoceptor, since the degree of increase in  $I_{\text{cat}}$  did not significantly alter with different concentrations of phe or even when a muscarinic agonist carbachol (4) was used to activate  $I_{\text{cat}}$  (data not shown). Furthermore, fenamates caused a similar increase ( $2.2 \pm 0.2$  ( $n=4$ )- and  $3.8 \pm 0.3$  ( $n=3$ )-fold with 200  $\mu\text{M}$  mefenamate and flufenamate, respectively) in the small noisy cationic currents that were induced by adding 50  $\mu\text{M}$  GTP $\gamma$ S into the patch pipette ( $15.0 \pm 2.1$  pA at  $-50$  mV,  $n=5$ ) bypassing the process of ligand-receptor binding (Fig. 2Bb), although whether the properties of this cationic current are identical to those of  $I_{\text{cat}}$  requires further investigation.

The present results have revealed that fenamates, which have been regarded as general blockers for various types of NSCCs (1), could act agonistically for a certain type of NSCC, i.e., the  $\alpha_1$ -adrenoceptor-activated cation channels in portal vein smooth muscle.

Literally, there are so far only two marine toxins known to activate the nonselective cation channels without mediation of cell surface receptors or intracellular messengers. Maitotoxin, a water-soluble polyether, has been reported to stimulate  $\text{Ca}^{2+}$  entry into the cell by opening 40 pS cation-selective channels in renal epithelial cells (7), and another non-peptide toxin, palytoxin, is found to depolarize the membrane due to activation of 10 pS monovalent cation permeable channels in cardiac myocytes (8). However, the mechanisms underlying the agonistic effects of fenamates seem basically different from those of these toxins. First, fenamates seem to need prior activation of cation channels through  $\alpha_1$ -adrenoceptors to exert their agonistic actions, although marginally small inward currents were sometimes detected in the sole presence of fenamates. Secondly, their duality to behave both antagonistically and agonistically depending on the type of NSCCs is certainly a notable difference. These actions of fenamates, together with the fact that the cationic currents activated by internal perfusion of GTP $\gamma$ S or by the agonists related to distinct receptors and G-proteins (i.e., phe and carbachol) also show similar sensitivities to fenamates, imply close association of fenamate's action with the cation channel per se, and thus may be reminiscent of those of dihydropyridines such as nifedipine and BAY K 8644 on the high-threshold voltage-dependent  $\text{Ca}^{2+}$  channels, where partial modification of side chains or differences in the

spatial configurations of these compounds significantly affect their antagonistic or agonistic properties (e.g., 9).

It is conceivable that whether fenamates act antagonistically or agonistically might depend on subtle differences in the cation channel architecture, since the muscarinic receptor cation channel in guinea pig ileal smooth muscle, which resembles the cation channel of  $\alpha_1$ -adrenoceptor in many respects (4), is potentially blocked by fenamates (3). Hence, fenamates might serve as a useful starting point to design agonists and antagonists for the receptor-operated nonselective cation channels in smooth muscle. Further efforts are needed to investigate more details of the actions of fenamates, since these compounds have also been reported to activate certain types of  $\text{K}^+$  channels in recent studies (e.g., 10).

#### Acknowledgments

We heartily thank Dr. A.F. Brading for improving our manuscript.

#### REFERENCES

- 1 Hescheler J and Schultz G: Nonselective cation channels: Physiological and pharmacological modulations of channel activity. *In* Nonselective Cation Channels, Edited by Siemen D and Hescheler J, pp 27–43, Birkhäuser, Basel (1993)
- 2 Gögelein H, Dahlem D, Engert HC and Lang HJ: Flufenamic and mefenamic acid inhibit single nonselective cation channels in the rat exocrine pancreas. *FEBS Lett* **268**, 79–82 (1990)
- 3 Chen S, Inoue R and Ito Y: Pharmacological characterization of muscarinic receptor-activated cation channels in guinea pig ileum. *Br J Pharmacol* **109**, 793–801 (1993)
- 4 Inoue R and Kuriyama H: Dual regulation of cation-selective channels by muscarinic and  $\alpha_1$ -adrenergic receptors in the rabbit portal vein. *J Physiol (Lond)* **465**, 427–448 (1993)
- 5 Inoue R, Waniishi Y, Yamada K and Ito Y: Extracellular  $\text{H}^+$  modulates acetylcholine-activated nonselective cation channels in guinea-pig ileum. *Am J Physiol* **268**, C162–C170 (1995)
- 6 Wang Q and Large WA: Noradrenaline-evoked cation conductance recorded with the nystatin whole-cell method in rabbit portal vein cells. *J Physiol (Lond)* **435**, 21–39 (1991)
- 7 Dietl P and Volkl H: Maitotoxin activates a nonselective cation channel and stimulates  $\text{Ca}^{2+}$  entry in MDCK renal epithelial cells. *Mol Pharmacol* **45**, 300–305 (1994)
- 8 Ikeda M, Mitani K and Ito K: Palytoxin induces a nonselective cation channel in single ventricular cells of rat. *Naunyn Schmiedebergs Arch Pharmacol* **337**, 591–593 (1988)
- 9 Hille B: *Ionic Channels of Excitable Membranes*, 2nd Edition, Sinauer Associates Inc, Sunderland (1992)
- 10 Farrugia G, Rae JL and Szurszewski JH: Characterization of an outward potassium current in canine jejunal circular smooth muscle and its activation by fenamates. *J Physiol (Lond)* **468**, 297–310 (1993)