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人胃平滑肌不同亲和性毒蕈碱受体的分布¹

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Distribution of muscarinic receptors of different affinities in smooth muscle of human stomach¹

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ABSTRACT Muscarinic receptors of high and low affinity were found in the fundus and the body of human stomach through the contraction experiment combined with ligand method *in vitro*. The 2 types of muscarinic receptors with different affinity regulated respectively the contractions of the longitudinal and the circular muscle of human gastric fundus and gastric body. However, in the antrum exists only one kind of muscarinic receptors of high affinity, which regulated the contractions of the longitudinal and the circular muscles of human stomach.

The contractile force of the longitudinal muscle induced by exogenous ACh in the fundus and that in the body of human stomach were found to be similar to each other. The contractile force of the circular

muscle in the body was found to be the strongest, and the contractile force of both longitudinal and circular muscles in antrum was weaker.

KEY WORDS smooth muscle; stomach; radioligand assay; muscarinic receptors; quinuclidinyl benzilate

摘要 用离体收缩实验和放射配体结合实验相结合的方法, 发现人胃底、胃体部平滑肌上有高低两种不同亲和性的 M 受体, 分别支配纵、环肌的收缩; 而胃窦部只存在一种高亲和性的 M 受体, 支配纵、环肌的收缩。外源性 ACh 引起的人胃底、胃体部纵肌收缩力相近; 胃体部环肌收缩力最强; 胃窦部纵环两肌收缩力均较弱。

关键词 平滑肌; 胃; 放射配体测定; 毒蕈碱受体; 奎纽定二苯羟乙酸盐

近年来对胃平滑肌 M 受体亚型的研究日渐增加, 认为豚鼠、大鼠、猪胃平滑肌上都存在 M 受体亚型⁽¹⁻⁴⁾。对于人胃平滑肌 M 受体亚型的研究迄今未见报道。本项研究的目的是检定人胃平滑肌不同亲和性 M 受体的分布。

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MATERIALS AND METHODS

人胃癌($n=4$)、贲门癌($n=6$)和胃溃疡病($n=8$)手术切除的正常胃底、胃体及胃窦部平滑肌组织(经病理切片镜检确认正常),放在冰浴K-H液中,男14人,女4人。

离体收缩功能实验 18℃下,取胃壁组织放在盛有营养液的平皿中,展平固定,剪去胃粘膜,在实体显微镜下,按纤维走行方向制备胃底、胃体和胃窦部纵、环肌标本($10 \times 1.5\text{mm}$)。一端固定在 $37 \pm 1^\circ\text{C}$ 的麦氏浴管中,另一端与LY-10型力位移换能器相连。实验中不通气体,灌流K-H液 $1.5\text{ ml} \cdot \text{min}^{-1}$ 。纵、环肌前负荷分别是1.5和2.0 g。稳定40 min后开始实验,经XWT-204型台式平衡记录仪记录胃各部纵、环肌对药物的收缩反应。利用做图法计算 pD_2 和 pA_2 。

放射配体结合实验 冰浴中剪去胃粘膜,每克胃壁组织(湿重)加20 ml Na, K磷酸缓冲液 $50\text{ mmol} \cdot \text{L}^{-1}$ (pH 7.4)。按照文献^[5]制做豚鼠肠平滑肌匀浆的方法,制备人胃各部平滑肌组织匀浆,并检测与 $[^3\text{H}]\text{quinclidinyl benzilate}$ ($[^3\text{H}]\text{QNB}$)的特异结合。

取组织匀浆 $50\ \mu\text{l}$,在特异和非特异结合反应中,分别加入 $[^3\text{H}]\text{QNB}$ $0.2\text{--}32\text{ nmol} \cdot \text{L}^{-1}$,用缓冲液调至终容量为2.0 ml。但在非特异结合管中加终浓度为 $10\ \mu\text{mol} \cdot \text{L}^{-1}$ 的阿托品。以上均在冰浴中进行。反应管在 30°C 震荡温育1 h,加冰浴缓冲液终止反应。用玻璃纤维滤膜(GF/B型,英国)减压抽滤1 min。取下滤膜置入测量瓶内,加入闪烁液10 ml,暗化24 h,用液闪仪(Packard 4430型,美国)测量。按Scatchard法做图。

用酚试剂法^[6]测定匀浆中蛋白含量。

$[^3\text{H}]\text{QNB}$ (比放射活性 $1.57\text{ PBq} \cdot \text{mol}^{-1}$, Amersham UK)。硫酸阿托品(北京制药厂)。ACh (acetylcholine chloride, 上海试剂三厂)。

RESULTS

阿托品对ACh引起的人胃各部纵、环肌收缩功能的影响 阿托品 $10\text{ nmol} \cdot \text{L}^{-1}$ 使胃底、胃体和胃窦部纵、环肌对ACh引起收缩反应的量效曲线平行右移。在胃底、胃体部的环肌和胃窦部的纵、环肌对ACh $100\text{ nmol} \cdot \text{L}^{-1}$ 才产生收缩效应(Fig 1)。

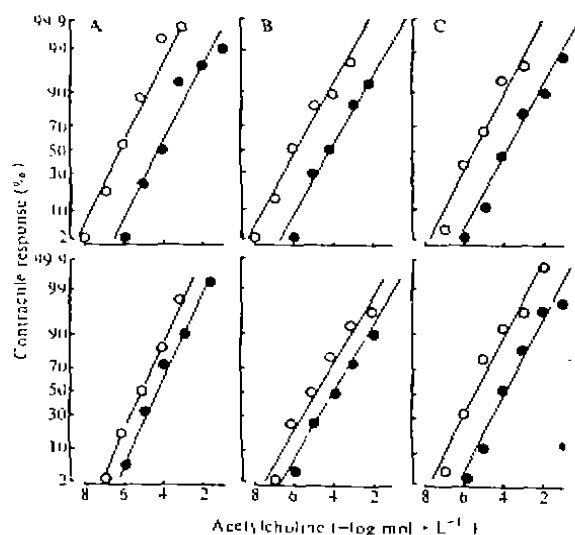


Fig 1. Effects of acetylcholine (ACh) on contraction of longitudinal (upper) and circular (lower) muscles in human gastric fundus (A), body (B) and antrum (C) in the absence (○) and presence (●) of atropine $10\text{ }\mu\text{mol} \cdot \text{L}^{-1}$. $n=6$.

胃底、胃体部纵肌最大收缩(C_{max})相近;胃体部环肌收缩力最强;胃窦部纵、环肌的 C_{max} 均较弱(Tab 1)。

Tab 1. Contraction caused by ACh in human gastric circular and longitudinal smooth muscles. $n=6$, $\bar{x} \pm \text{SD}$. * $P > 0.05$, *** $P < 0.01$ vs longitudinal smooth muscles.

	Maximal tension (g)	
	Circular muscles	Longitudinal muscles
Fundus	$2.95 \pm 0.21^{***}$	2.25 ± 0.29
Body	$3.40 \pm 0.34^{***}$	1.96 ± 0.31
Antrum	$1.95 \pm 0.25^*$	1.71 ± 0.22

人胃各部纵、环肌对 ACh 和阿托品的亲和性(Tab 2) 胃底、胃体部纵、环肌对 ACh 反应的 pD_2 和对阿托品反应的 pA_2 有非常显著差异($P < 0.01$), 胃窦部纵、环肌对 ACh 的 pD_2 和阿托品的 pA_2 无显著差异($P > 0.05$).

Tab 2. pD_2 for acetylcholine and pA_2 for atropine tested on longitudinal and circular muscles of gastric fundus, body and antrum. $n=6$, $\bar{x} \pm SD$. * $P > 0.05$, *** $P < 0.01$ vs circular muscle.

	Fundus	Body	Antrum
	Circular muscle		
pD_2	5.23 ± 0.41	4.83 ± 0.27	5.56 ± 0.26
pA_2	9.02 ± 0.33	8.88 ± 0.50	9.39 ± 0.29
	Longitudinal muscle		
pD_2	$6.37 \pm 0.16^{***}$	$6.13 \pm 0.13^{***}$	$5.54 \pm 0.34^*$
pA_2	$9.87 \pm 0.14^{***}$	$10.06 \pm 0.34^{***}$	$9.29 \pm 0.34^*$

放射配位体结合分析(Fig 2) [3H]QNB 与人胃底、胃体部平滑肌匀浆结合呈明显双项性. 在 $0.2-4 \text{ nmol} \cdot \text{L}^{-1}$ 结合达到饱和, 浓度加大时, 又出现第二个结合高峰; 而胃窦部只表现单项结合峰. 按 Scatchard 法分析做图, 在胃底、胃体部均得到斜率不同的两条直线, 而胃窦部只有一条直线. 它们在横坐标的截距为各自最大结合容量(B_{max}). 解离常数 K_d 和

B_{max} 见 Tab 3. 胃底、胃体部为高亲和性、低结合容量和低亲和性、高结合容量两种 M 受体结合部位; 而胃窦部只存在高亲和性、低结合容量一种 M 受体结合部位.

Tab 3. K_d ($\text{mol} \cdot \text{L}^{-1}$) and B_{max} ($\text{pmol} / \text{mg protein}$) of [3H]QNB binding to homogenates from gastric fundus, body and antrum calculated by Scatchard analysis. $n=6$, $\bar{x} \pm SD$.

	K_d	B_{max}
High affinity		
Fundus	0.59 ± 0.08	0.36 ± 0.12
Body	0.59 ± 0.06	0.28 ± 0.08
Antrum	0.69 ± 0.04	0.30 ± 0.07
Low affinity		
Fundus	13.57 ± 0.63	1.31 ± 0.13
Body	14.70 ± 2.17	1.27 ± 0.32

DISCUSSION

pD_2 和 pA_2 值是鉴别受体亚型的一种常用手段, 其值不同提示可能有受体亚型的存在. 本实验发现人胃各部纵、环肌上的 M 受体对同一药物(ACh 或阿托品)呈现不同的亲和性. 胃底、胃体部纵肌对 ACh 和阿托品的亲和性(pD_2 和 pA_2)远大于环肌, 其 pD_2 和 pA_2 值相差一个数量级. 故提示, 人胃底、胃

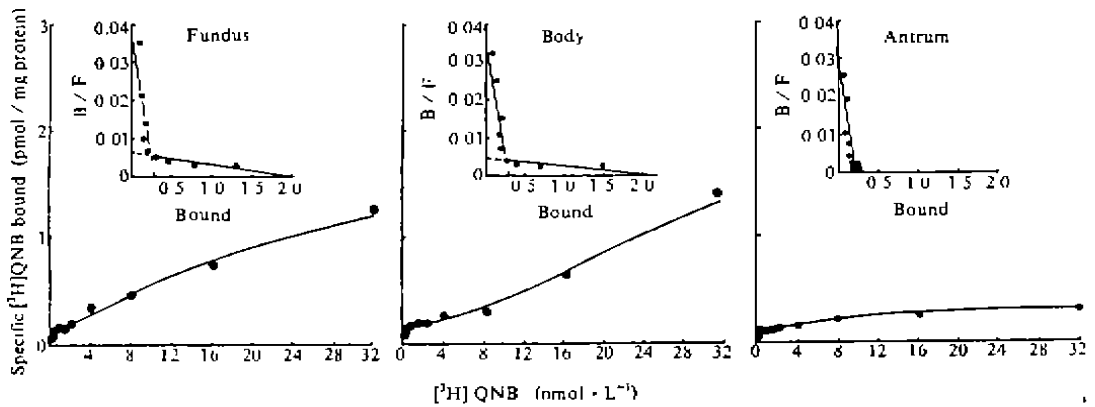


Fig 2. Specific binding the difference between measurements made in the presence and absence of atropine $10 \mu\text{mol} \cdot \text{L}^{-1}$ and Scatchard plot of [3H]QNB in smooth muscle homogenates obtained from human stomach. $n=6$.

体部纵肌上可能存在着高亲和性 M 受体, 环肌上存在着低亲和性 M 受体, 分别支配纵环两肌的收缩. 胃窦部纵、环肌对 ACh 和阿托品的亲和性(pD_2 和 pA_2)相近, 说明胃窦部可能只存在一种亲和性的 M 受体, 支配纵环两肌的收缩. 这与豚鼠离体胃平滑肌收缩功能实验结果⁽⁷⁾相一致.

放射配体结合实验中, 人胃底、胃体部平滑肌匀浆与 [³H]QNB 结合时, 随着 [³H]QNB 浓度的增加, 出现两个结合高峰. 经 Scatchard 分析, 胃底、胃体部高亲和性、低结合容量 M 受体结合部位较低亲和性、高结合容量 M 受体结合部位的 K_D 值分别高 23 和 25 倍, 上述两种 M 受体结合部位的 B_{max} 分别是后者的 1/3 和 1/5. 胃底、胃体部与 [³H]QNB 结合时而产生的这种亲和性和 B_{max} 的变化, 说明胃底、胃体部存在两种结构不同的 M 受体. 因为在相同的条件下, 胃窦部只有单项结合峰, 且蛋白修饰实验已初步证实豚鼠胃平滑肌上存在的两种亲和性的 M 受体分子结构不同⁽³⁾.

综上所述, 在人胃底、胃体部纵、环肌上存在高低两种不同亲和性的 M 受体, 分别支配纵、环肌的收缩; 而胃窦部只有一种高亲和性的 M 受体, 支配纵、环肌的收缩. 至于这两种亲和性的 M 受体属于 M 受体的何种亚

型, 有待用特异性激动剂和拮抗剂研究.

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