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卡托普利

阿司匹林

血小板

TXA<sub>2</sub>/PGI<sub>2</sub>

23

# 卡托普利对肾血管性高血压大鼠血小板胞浆[Ca<sup>2+</sup>]<sub>i</sub>及血浆TXA<sub>2</sub>/PGI<sub>2</sub>的影响

魏向荣<sup>1</sup>, 胡莲<sup>1</sup>, 杜俭<sup>1</sup> (珠江医院心内科, 广州 510282, 中国)

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**Effect of captopril on platelet cytosolic [Ca<sup>2+</sup>]<sub>i</sub> and plasma TXA<sub>2</sub>/PGI<sub>2</sub> in renovascular hypertensive rats**

WEI Xiang-Rong<sup>1</sup>, HU Lian, DU Jian<sup>1</sup>  
(Department of Cardiology, Zhujiang Hospital, Guangzhou 510282, China)

**KEY WORDS** blood pressure; renovascular hypertension; captopril; calcium; synthetic prostaglandins F; epoprostenol; thromboxane A<sub>2</sub>; platelet aggregation; angiotensin II

**AIM:** To study the effect of captopril (Cap) on platelet cytosolic free calcium concentration ([Ca<sup>2+</sup>]<sub>i</sub>), platelet aggregation (PAg), and plasma TXA<sub>2</sub>/PGI<sub>2</sub> ratio in the renovascular hypertensive rats.

**METHODS:** Blood pressure was measured once a week by tail-cuff microphonic manometer. Platelet [Ca<sup>2+</sup>]<sub>i</sub> was measured by Fura 2-AM. Plasma angiotensin II (Ang), thromboxane A<sub>2</sub> (TXA<sub>2</sub>), and prostacycline (PGI<sub>2</sub>) were measured by radio-immunoassay. **RESULTS:** Platelet [Ca<sup>2+</sup>]<sub>i</sub> and PAg increased (*P* < 0.01), while plasma Ang and TXA<sub>2</sub>/PGI<sub>2</sub> ratio elevated (*P* < 0.05) in the renovascular hypertensive rats; platelet [Ca<sup>2+</sup>]<sub>i</sub> and plasma TXA<sub>2</sub>/PGI<sub>2</sub> ratio reduced markedly after ig Cap 100 mg·kg<sup>-1</sup>·d<sup>-1</sup> compared with saline for 2 wk. **CONCLUSION:** The altered TXA<sub>2</sub>/PGI<sub>2</sub> after Cap treatment contributed to the improvement of the platelet [Ca<sup>2+</sup>]<sub>i</sub> and PAg.

**关键词** 血压; 肾血管高血压; 卡托普利; 钙; 合成前列腺素F类; 前列腺环素醇; 血栓素A<sub>2</sub>; 血小板聚集; 血管紧张素II

**目的:** 观察卡托普利 (Cap) 对血浆血栓素 A<sub>2</sub> (TXA<sub>2</sub>)、前列腺环素 (PGI<sub>2</sub>) 及血小板胞浆钙离子

浓度 ([Ca<sup>2+</sup>]<sub>i</sub>)、血小板聚集率 (PAg) 的影响。方法: 大鼠管饲 Cap 100 mg·kg<sup>-1</sup>·d<sup>-1</sup>, 2 wk. 结果: 二肾-一夹型肾血管性高血压大鼠血浆血管紧张素 II (Ang) 和 TXA<sub>2</sub>/PGI<sub>2</sub> 升高 (*P* < 0.05), 血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及 PAg 显著增高 (*P* < 0.01). Cap 在显著降低血压同时, 血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 显著降低 (*P* < 0.05), 且血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及 PAg 也明显降低 (*P* < 0.01). 结论: Cap 对血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及血小板功能的影响与其改善 TXA<sub>2</sub>/PGI<sub>2</sub> 比值有关。

血管紧张素 I 转换酶抑制剂卡托普利 (Cap) 降压作用不仅涉及肾素-血管紧张素系统, 还有缓激肽、前列腺素等的参与。缓激肽诱导内皮细胞生成一氧化氮和前列腺环素 (PGI<sub>2</sub>), 升高细胞内环磷酸腺苷 (cAMP), 使血管舒张<sup>[1]</sup>。血小板血栓素 A<sub>2</sub> (TXA<sub>2</sub>) 的生成与血小板 [Ca<sup>2+</sup>]<sub>i</sub> 存在有相互促进作用, 血小板胞膜及核膜也具有血管紧张素 II (Ang) 受体, Ang 可快速地升高血小板 [Ca<sup>2+</sup>]<sub>i</sub><sup>[2]</sup>。Cap 在降压过程中降低血小板聚集与减少血小板 TXA<sub>2</sub> 生成相平行<sup>[3]</sup>。Cap 对血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 的作用未见报道。本文观察 Cap 对肾血管性高血压大鼠血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 及血小板 [Ca<sup>2+</sup>]<sub>i</sub>、血小板聚集 (PAg) 的影响。

## MATERIALS AND METHODS

**模型建立**<sup>[4]</sup> Wistar 大鼠 26 只 (普通级, 合格证号: 94002, 购自第一军医大学实验动物中心), 鼠龄 12 wk. ♂ ♀ 各半, 体重 150-200 g. 随机分组: 手术组 20 只 (分成 Hypertensive 组 6 只, Captopril 组 7 只, Saline 组 7 只), 假手术组 6 只。普通饲料喂养, 自由饮水, 光照 12 小时。无噪音。大鼠戊巴比妥钠 (40 g·kg<sup>-1</sup>, ip) 麻醉, 右侧开腹, 剥离右肾动脉主干并放置 0.25 mm 银夹 (假手术组未置银夹, 余同), 缝合切口。大鼠无创血压测量应用 CRS-III 型大鼠血压仪 (浙江康乐仪器厂) 监测大鼠在清醒状态下的鼠尾收缩压<sup>[5]</sup>。每周一次。实验第 10 周, 由颈动脉取血, 各血浆样品置 -20℃ 储存待测。

**Cap 慢性降压实验**<sup>[6]</sup> 术后第 6 周 Cap 组以每只 Cap

<sup>1</sup> Now in Shanghai Hypertension Institute, Shanghai 200025, China.

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100 mg·kg<sup>-1</sup> (常州制药厂, 白色粉剂, 纯度98.5%, 生理盐水配制) 管饲, 每天1次, 连续两周; 对照组以每只生理盐水 5 mL·kg<sup>-1</sup> 管饲。观察血压变化, 每周一次。

**血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 的测定** 采用放免法检测血浆 TXA<sub>2</sub> 及 PGI<sub>2</sub> 代谢产物 TXB<sub>2</sub> 和 6-keto-PGF<sub>1α</sub>, 用 TXB<sub>2</sub>/6-keto-PGF<sub>1α</sub> 表示 TXA<sub>2</sub>/PGI<sub>2</sub>。药盒购自苏州医学院血栓与止血研究所。在 γ 计数仪 (西安 262 厂制造) 测定计数值。

**血浆 Ang 的测定** 放免法检测血浆 Ang 浓度, 药盒购自北方同位素公司。在 γ 计数仪 (西安 262 厂制造) 测定计数值。

**血小板聚集率的测定**<sup>[7]</sup> 制备富血小板血浆及贫血小板血浆, 加入二磷酸腺苷 (ADP) 作为诱导剂 (终浓度 5 μmol·L<sup>-1</sup>), 应用 DAM-1 型聚集仪 (江苏丹阳仪器厂制造) 测定最大聚集率。

**血小板内 [Ca<sup>2+</sup>]<sub>i</sub> 的测定** 采用双波长 (340/380 nm) 荧光法<sup>[8]</sup>, 将钙指示剂 Fura 2-AM (Sigma) 负载血小板内, 依次加入 CaCl<sub>2</sub> 1 mmol·L<sup>-1</sup>, Triton X-100 0.1% 和 egtazic acid 3 mmol·L<sup>-1</sup>, 用 RF-5000 荧光分光光度计 (日本 Nihon Konden 公司) 分别测定基础、最大、最小的荧光比值。

所有数据由  $\bar{x} \pm s$  表示, 组间显著性比较用组间 *t* 检验; 手术前后血压显著性比较用配对 *t* 检验。

## RESULTS

**收缩压变化** 手术组大鼠在第 4 周末形成稳定高血压 (22.1 ± 1.5 kPa vs 14.7 ± 1.9 kPa, *n* = 20, *P* < 0.01); 假手术组大鼠血压手术前后无明显变化 (14.7 ± 1.3 kPa vs 14.1 ± 1.6 kPa, *n* = 6, *P* > 0.05)。

二肾一夹型肾血管性高血压大鼠与假手术大鼠相比, 血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 升高 (*P* < 0.05), 血小板内 [Ca<sup>2+</sup>]<sub>i</sub> 及 PAg 显著增高 (*P* < 0.01), 而血浆 Ang 无变化 (*P* > 0.05) (Tab 1)。

**Tab 1. Levels of BP, angiotensin II (Ang), TXA<sub>2</sub>/PGI<sub>2</sub>, platelet [Ca<sup>2+</sup>]<sub>i</sub>, and platelet aggregation (PAg) in hypertensive rats. *n* = 6,  $\bar{x} \pm s$ . <sup>a</sup>*P* > 0.05, <sup>b</sup>*P* < 0.05, <sup>c</sup>*P* < 0.01 vs sham,**

	Sham	Hypertensive
SBP/kPa	16.0 ± 1.5	22.0 ± 2.0 <sup>c</sup>
Ang/ng·L <sup>-1</sup>	400 ± 100	470 ± 107 <sup>a</sup>
TXA <sub>2</sub> /PGI <sub>2</sub>	2.6 ± 0.6	4.2 ± 1.0 <sup>b</sup>
[Ca <sup>2+</sup> ] <sub>i</sub> /nmol·L <sup>-1</sup>	92 ± 26	280 ± 47 <sup>c</sup>
PAg/%	29 ± 5	63 ± 13 <sup>c</sup>

Cap 在显著降低血压同时, 血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 显著降低 (*P* < 0.05), 且血小板内 [Ca<sup>2+</sup>]<sub>i</sub> 及 PAg 也明显降低 (*P* < 0.01)。Cap 对血浆 Ang 无影响 (*P* > 0.05) (Tab 2)。

**Tab 2. Effect of captopril on BP, angiotensin II (Ang), TXA<sub>2</sub>/PGI<sub>2</sub>, platelet [Ca<sup>2+</sup>]<sub>i</sub>, and platelet aggregation (PAg) in hypertensive rats. *n* = 7,  $\bar{x} \pm s$ . <sup>a</sup>*P* > 0.05, <sup>b</sup>*P* < 0.05, <sup>c</sup>*P* < 0.01 vs saline.**

	Saline	Captopril
SBP/kPa	21.9 ± 2.0	7.7 ± 1.3 <sup>c</sup>
Ang/ng·L <sup>-1</sup>	350 ± 113	310 ± 115 <sup>a</sup>
TXA <sub>2</sub> /PGI <sub>2</sub>	4.1 ± 1.3	2.8 ± 1.4 <sup>b</sup>
[Ca <sup>2+</sup> ] <sub>i</sub> /nmol·L <sup>-1</sup>	280 ± 33	170 ± 41 <sup>c</sup>
PAg/%	60 ± 10	36 ± 5 <sup>c</sup>

## DISCUSSION

本实验显示: 二肾一夹型肾血管性高血压大鼠血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 与假手术组相比显著升高 (*P* < 0.05), 血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及其聚集率也明显增高 (*P* < 0.01), 表明肾血管性高血压大鼠存在血小板内 Ca<sup>2+</sup> 及 TXA<sub>2</sub>/PGI<sub>2</sub> 代谢异常, 与文献报道相似<sup>[9,10]</sup>。

Tab 2 显示: Cap 在显著降低血压同时, 血浆 Ang 无明显变化, 血浆 TXA<sub>2</sub>/PGI<sub>2</sub> 显著降低 (*P* < 0.05), 而且血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及血小板聚集率也显著降低 (*P* < 0.01)。在二肾一夹型高血压大鼠早期 (第 4 周) 血浆和主动脉 Ang 水平升高, 慢性期 (第 8-12 周) 血浆水平趋于正常, 但主动脉 Ang 仍处于高水平<sup>[4]</sup>; 而且 Cap 降压作用与局部组织肾素系统活性存在明显相关<sup>[6]</sup>。有报道 Cap 降低血小板聚集功能与减少血小板 TXA<sub>2</sub> 的生成相平行<sup>[3]</sup>。本实验结果表明 Cap 对肾血管性高血压大鼠血小板 [Ca<sup>2+</sup>]<sub>i</sub> 及血小板聚集率的影响与其改善 TXA<sub>2</sub>/PGI<sub>2</sub> 比值有关。

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## 二氢埃托啡耐受后小鼠脑内 cAMP 含量的减少及氨基酸含量的增加<sup>1</sup>

陈明辉<sup>2</sup>, 李其松<sup>1</sup>, 沈 煜, 马鸿建, 左晓洁

(上海医科大学基础医学院医学神经生物学国家重点实验室、神经生物学教研室, 上海 200032, 中国)

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### Decrease of cAMP and increase of amino acids contents in mouse brain after dihydroetorphine tolerance<sup>1</sup>

CHEN Ming-Hui<sup>2</sup>, LI Qi-Song, SHEN Yu, MA Hong-Jian, ZUO Xiao-Jie (State Key Laboratory of Medical Neurobiology; Department of Neurobiology, School of Basic Medical Sciences, Shanghai Medical University, Shanghai 200032, China)

**KEY WORDS** dihydroetorphine; drug tolerance; cyclic AMP; glutamic acid; aspartic acid; glutamine; GABA

**AIM:** To study the mechanism of dihydroetorphine (DHE) tolerance. **METHODS:** DHE tolerance was produced by repeated sc injections in progressively increased doses to mice for 8 d. The concentrations of amino acids and cAMP were detected by RP-HPLC/fluorescence assay and radioimmunoassay, respective-

ly. **RESULTS:** The basal contents of glutamic acid (Glu), aspartic acid (Asp), and GABA in whole brain (cerebellum removed) were increased respectively from  $14.1 \pm 2.1$ ,  $3.0 \pm 0.4$ , and  $1.8 \pm 0.8 \mu\text{mol/g}$  tissue in control mice to  $17.2 \pm 2.2$ ,  $4.1 \pm 0.6$ , and  $3.2 \pm 1.0 \mu\text{mol/g}$  tissue in tolerant mice, and the rates of increase were 22.0 % ( $P < 0.05$ ), 36.7 % ( $P < 0.01$ ), and 77.8 % ( $P < 0.05$  vs control), respectively. There was no significant difference in the basal contents of Glu ( $5.1 \pm 1.0$  vs  $4.5 \pm 1.7 \mu\text{mol/g}$  tissue of control). The basal contents of cAMP in hypothalamus and striatum were decreased respectively from  $271 \pm 38$  and  $189 \pm 31 \text{ nmol/g}$  tissue in control mice to  $96 \pm 15$  and  $65 \pm 21 \text{ nmol/g}$  tissue in tolerant mice ( $P < 0.01$ ), and the rates of decrease were 64.6 % and 65.6 %, respectively. There was no significant difference of cAMP in cerebral cortex ( $72 \pm 20$  vs  $55 \pm 15 \text{ nmol/g}$  tissue of control). **CONCLUSION:** The increases of Glu, Asp, and GABA in brain and the decrease of cAMP in hypothalamus and striatum were involved in DHE tolerance.

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<sup>2</sup> Pkn 86-21-6404-1900, ext 2211. Fax 86-21-6403-7222.

E-mail smulib@public.sta.net.cn

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氨基酸