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• 基础研究 BASIC RESEARCH •

EGF对小肠缺血再灌注后磷酸化p44/42 MAPK表达的影响

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Effects of EGF on expression of phosphorylated p44/42 MAPK in rat small intestine after ischemia-reperfusion injury

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Abstract

AIM:To investigate the effects of EGF on the characteristics of phosphrylated p44/42 MAPK expression and its biological significance in EGF-induced gut repair after ischemia-reperfusion (I/R) injury.

METHODS:A total of 80 Wistar rats were randomly divided into four groups, namely EGF treated group (E), normal saline control (R), ischemia group (I) and sham operated control (C). In group E and R, the rats were treated with intravenous EGF 100 μ g/kg/rat or normal saline respectively after 45 minutes of superior mesenteric artery occlusion. Blood samples were collected at 2, 6, 12 and 24 hours after reperfusion and plasma D-lactate were determined. Tissue samples from intestine were also taken for histological analysis and immunohistochemical analysis of phospho-p44/42 MAPK.

RESULTS:The changes of histological structure and D-lactate indicated that the intestinal barrier was damaged after intestinal I/R injury, while EGF treatment significantly improved the outcome. In group C and I positive signals of phospho-p44/42 MAPK were mainly located in the cytoplasm of the intestinal villi and crypts, while in group I positive cells increased significantly (P < 0.05). In group R, positive signals were

found in almost all the cells and the percentage of positive nuclei increased with the time of reperfusion, reaching its peak after 12h of reperfusion. In group E, the percentages were higher than those in group R and the peak of nuclear expression was earlier.

CONCLUSION:EGF administration improves the outcome of I/R induced intestinal damage. After I/R the expression and nuclear translocation of phspho-p44/42 MAPK increases with the time of reperfusion, suggesting its role in intestinal reconstitution. EGF treatment induces its early expression and translocation into the nucleus, suggesting the significance of p44/42 MAPK signaling pathway in EGF-induced gut repair.

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摘要

目的:观察表皮生长因子(EGF)对大鼠肠缺血 - 再灌注(I/R) 后磷酸化细胞外信号调节激酶(phospho - p44/42 MAPK)表达的影响.

方法:夹闭大鼠肠系膜上动脉根部 45 min 之后放松血管夹形成再灌注,同时经颈静脉分别注入 EGF 100 μg/kg 或生理盐水,分别于伤后 2、6、12 和 24 h 将动物活杀.设置对照组和单纯缺血组.检测血浆 D-乳酸浓度,取小肠组织进行形态学观察,用免疫组织化学方法研究磷酸化p44/42 MAPK 的表达.

结果:(1)再灌注后血浆 D-乳酸水平升高,小肠黏膜充血、水肿、炎细胞浸润及坏死糜烂,再灌注后6h最显著. EGF显著降低 D-乳酸水平升高的幅度(P<0.05),明显改善 I/R 引起的病理损害. (2)磷酸化 p44/42 MAPK 染色显示,正常大鼠的绒毛上皮、陷窝和固有层细胞均有阳性颗粒,主要存在于胞质内. 缺血和再灌注后阳性细胞数量显著增加,随再灌注时间的延长,阳性颗粒逐渐转位入核,在12h最显著. 24h主要表现为胞质内表达. EGF治疗后阳性细胞数量增多,细胞核表达的数量增加.

结论:肠道I/R损伤激活磷酸化p44/42 MAPK的表达,EGF促进p44/42 MAPK的早期表达与核转位,从而参与细胞的应激反应和增生与分化.

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0 引言

利用生长因子调控损伤修复的意义已经引起人们的重视^[1],表皮生长因子(EGF)参与内脏损伤后的主动修复过程也已得到实验证实^[2-5]. 与此同时,细胞外信号调节激酶(extracellular-signal regulated protein kinase, p44/42 MAPK)在 EGF等生长因子刺激引起的细胞反应中起重要调控作用^[6-8]. 体外研究证实,EGF可以通过激活 p44/42 MAPK 通路促进小肠细胞的增生反应^[9-11]. 本实验利用大鼠肠 I/R 损伤模型,给予大鼠静脉注射EGF,观察血浆 D- 乳酸浓度的变化规律以及相应的病理学改变,用免疫组织化学方法研究肠 I/R 引起的 p44/42 MAPK 的表达规律以及 EGF 对 p44/42 MAPK 表达的影响,进而探讨其在创伤修复中的作用.

1 材料和方法

1.1 材料 Wistar 大鼠, 体质量 200-250 g(购自军事 医学科学院动物中心),随机分为对照组(C)、肠缺血 组(I)、肠缺血 - 再灌注组(R)和 EGF 治疗组(E).根据缺 血后再灌注时间的不同将R组和E组又分成2,6,12 和 24 h 共 4 组(R₂, R₆, R₁₂, R₂₄以及 E₂, E₆, E₁₂, E₂₄), 每组8只动物. 实验前禁食12 h, 自由饮水. 采 用肠系膜上动脉(SMA)夹闭 - 松夹方式制成肠缺血 - 再 灌注模型. 大鼠腹腔注射30 g/L戊巴比妥钠(35 mg/kg)麻 醉,常规消毒后取腹正中切口 3-4 cm, 钝性分离 SMA 根部. E 组和 R 组动物以血管夹夹闭 SMA 根部,完全 阻断血流 45 min 之后放松血管夹,使肠道血流恢复形 成再灌注,在松开动脉夹的同时经右颈静脉注入 EGF 100 μg/kg(由中国科学院上海生物化学研究所提供)或生 理盐水 0.5 mL. 假手术组仅分离 SMA 不作夹闭, I组不 注射EGF或生理盐水.各组动物于关闭腹腔后皮下注射 10 ml 生理盐水抗休克.

1.2 方法 按照设定时间点将动物处死, 取动物肠道石 蜡包埋后切片、HE 染色,光镜下观察. 取门静脉血离 心后分离血浆,-80 保存,用酶联紫外分光光度法 测定血浆 D-乳酸水平. 动物肠道经 40 g/L 甲醛固定、 脱水、石蜡包埋、切片后,应用PowerVision™二步法研 究磷酸化 p44/42 MAPK 的表达.采用磷酸化 p44/42 MAPK 小鼠单克隆抗体(cell signaling technology, Inc, 美国)以及相应的第二抗体(北京中山生物技术有限公 司), DAB(二氨基联苯胺, 福州迈新生物技术公司), 按照试剂说明书要求进行免疫组织化学技术操作. 石蜡 切片按常规脱蜡至水,在体积分数为30 ml/L H₂O₂中孵 育 10 min,以消除内源性过氧化物酶活性. PBS 冲洗, 置于 0.01 mol/L, pH6.0 的枸橼酸盐缓冲液中行抗原 热修复后,滴加按1 100稀释的一抗,37 40 min. PBS 冲洗,滴加辣根过氧化物酶(HRP)标记的 木素复染,常规脱水,透明,封片,显微镜下观察,结 果以细胞质和/或细胞核着棕色者为阳性染色. 另用

PBS代替一抗做阴性对照. 光镜下观察阳性细胞在小肠黏膜的分布. 每只大鼠观察50个纵向切开的陷窝和绒毛(陷窝腔和绒毛应保持完整),统计阳性细胞百分率,其结果以均数 \pm 标准差($\bar{x}\pm s$)表示, SAS 软件包统计各组间差异.

2 结果

大鼠 SMA 夹闭后,肠道明显变紫,蠕动减慢. HE 染色见黏膜上皮出现充血、水肿和炎细胞浸润以及糜烂、坏死,以伤后 6 h 最明显,在再灌注后 24 h 基本恢复正常的黏膜结构,E组动物肠黏膜损伤的程度较R组明显减轻.

2.1 血浆 D - 乳酸浓度的变化 D - 乳酸是肠道细菌特有的代谢产物,血浆中 D - 乳酸含量的变化可反映肠黏膜通透性的改变[12,13]. 肠缺血 45 min 后,D - 乳酸浓度尚未发生明显改变. 再灌注 2 h 和 6 h,各组动物血浆D - 乳酸浓度较假手术组均显著升高,但R组升高的幅度显著高于 E 组(P < 0.01 或 P < 0.05,图 1).

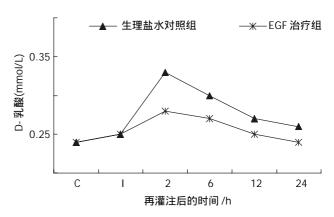
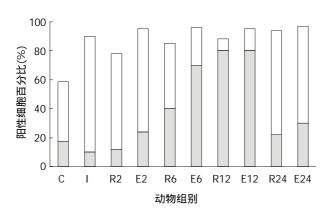


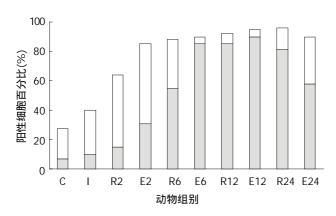
图 1 2 组动物门静脉血浆 D - 乳酸浓度的变化趋势.

2.2 磷酸化 p44/42 MAPK 的表达特征 C组、I组和 R 组:在正常和伤后大鼠,绒毛上皮、小肠陷窝和固 有层均可见到染色阳性的细胞.在 C 组大鼠的绒毛上皮 和小肠陷窝,阳性细胞的比例分别为59%和27.5%,表 现为散在分布于胞质内的棕色颗粒,大部分靠近细胞 核,少量细胞有核内表达.小肠陷窝核内表达 p44/42 MAPK的细胞主要位于陷窝的中下部,相当于干细胞、 短暂扩增细胞及其初级子代细胞的位置.杯状细胞的胞 质内也可见阳性颗粒.1组大鼠90%绒毛上皮细胞和40% 陷窝细胞的胞质内出现阳性颗粒,核内表达无明显改 变.R 组几乎全部绒毛上皮细胞和陷窝细胞表达磷酸化 p44/42 MAPK,但随着再灌注时间的延长,核内表达的 比例增加.在 R2 组和 R6 组阳性颗粒主要位于胞质中, R12组则主要位于细胞核 ,R24组核内表达的比例下降 接近 C 组. 各组动物的黏膜固有层均有少量的阳性细 胞 ,正常情况下主要位于胞质 ,随再灌注时间延长核内 表达增多,在R12组最显著(图2-4).E组绒毛上皮细胞 和陷窝的阳性细胞数量均高于 R 组相应时相点,核内

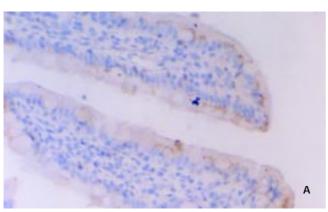
表达的比例也高于R组.E6和E12组主要表现为核内表达,以E6最为显著.E2和E24组主要为胞质内表达(图 2-4).

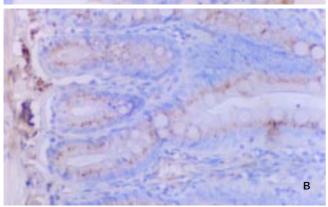


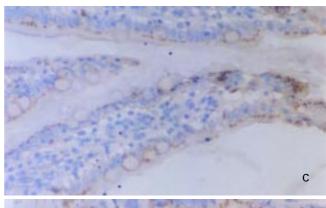
细胞核内出现阳性颗粒的细胞 图 2 各组动物小肠绒毛上皮磷酸化 p44/42 MAPK 阳性细胞数量的变化趋势.

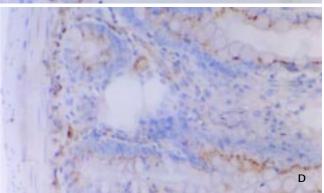


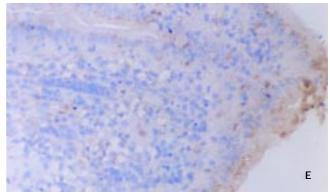
细胞核内出现阳性颗粒的细胞 图 3 各组动物小肠陷窝磷酸化 p44/42 MAPK 阳性细胞数量的变化趋势.

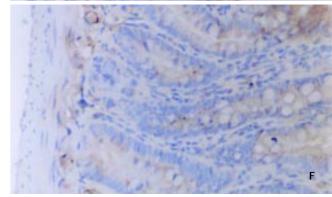












A:C 组小肠绒毛;B:C 组小肠陷窝;C:R6 组小肠绒毛;D:R6 组小肠陷窝;E:E6 组小肠绒毛;F:E6 组小肠陷窝。图 4 各组动物小肠磷酸化 p44/42 MAPK 的表达.

3 讨论

EGF 是强有力的促细胞分裂因子^[14,15],对胃肠道黏膜细胞具有促进生长和增生的作用^[16-21],p44/42 MAPK在胞质内广泛分布,在未受刺激的细胞内,主要表现为脱磷酸型,其苏氨酸和酪氨酸残基被磷酸化后发生激活,主要与细胞的增生通路有关^[22,23],已证明p44/42 MAPK途径是 EGF 诱导表皮成纤维细胞、角质细胞、

小肠癌细胞IEC-6等细胞增生的主要细胞内信号传导通 路[24-27]. 在心、肾、肺等多种组织中,均发现 I/R 损 伤可迅速激活 MAPK 信号传导通路,作为早期细胞内 信号参与细胞对应激反应的调节. 一般认为I/R时p44/42 MAPK 活性的增加是细胞针对缺氧刺激启动修复过程、 促进细胞存活的保护性机制,对于经历了 I/R 损伤的细 胞具有保护作用. 在 MAPK 信号途径中的各个组成成分 如 p44/42 MAPK、c-fos 的激活均具有相似的分子机 制,都需要保守位点上的双磷酸化作用,信号转导最终 通过基因表达来实现细胞调控,p44/42 MAPK的磷酸化 是 p44/42 MAPK 正在发生功能活动的标志^[28]. EGF 与其 受体(EGFR)结合后,再与 ras 结合,进而激活 raf-1, raf-1 接着激活 MEK1/MEK2(p44/42 MAPK 的上游激 酶), 进而激活 p44/42 MAPK, 后者进入核内, 通过 中间反应物介导原癌基因 c-myc、c-fos、c-jun、 Elk1、TAL1等的产生和磷酸化,影响下游基因的表 达,最终导致细胞的增生反应^[29-33]. p44/42 MAPK 被激 活后也可以停留在胞质中,作用于细胞表面分子如 EGFR、磷脂酶 A2, 启动多条细胞内信号传导通路, 介导 胞外环境应激条件信号,引起细胞内的抗应激反应.

p44/42 MAPK 被激活后,可以表现为持久激活或短暂激活,持久激活(活性高)的 p44/42 MAPK 可部分转入核内,可以使相应的转录因子发生磷酸化,而短暂激活(活性低)的 p44/42 MAPK 不能进入核内,二者由于"入核量"的差异使细胞表达不同质或量的产物,从而产生不同的细胞生物学效应,因此p44/42 MAPK在转录水平上的差异可以使其产生不同的效应.

本实验中,在假手术组大鼠的小肠黏膜上皮细胞 内,磷酸化p44/42 MAPK 主要存在于胞质,核内表达 较少.缺血 45 min 后,单层柱状上皮和小肠陷窝阳性细 胞的比例显著增加,表明缺血可以迅速激活 p44/42 MAPK 通路,此时仍主要为胞质内表达.随着再灌注时 间的延长,几乎全部细胞表达磷酸化p44/42 MAPK,而 肠道组织学改变和血浆D-乳酸水平的变化表明I/R引起 肠道损伤,提示 I/R 损伤持续激活 p44/42 MAPK 通路, 使其参与了 I/R 引起的应激反应. 值得注意的是,无论 在绒毛还是陷窝,核内表达磷酸化p44/42 MAPK的细胞 数量均随再灌注时间延长而增加,而进入核内是 p44/ 42 MAPK 发挥促进细胞增生作用的前提. R 组大鼠核内 表达 p44/42 MAPK 的高峰在再灌注后 12 h, EGF 治疗 组核内表达的时间较 R 组提前,持续时间也较 R 组延 长.由此看来, EGF 促进了 p44/42 MAPK 的早期激活和 核转位.由于绒毛单层柱状上皮主要为分化细胞,陷窝 主要由干细胞、短暂扩充细胞和较初级的增生细胞组 成,磷酸化 p44/42 MAPK 在这些部位的活跃表达表明 他与肠道细胞(包括干细胞)的增生与分化有密切联系. 本 结果表明,外源性 EGF 参与了肠道内脏损伤的修复过 程,其作用是通过早期激活 p44/42 MAPK 通路,参与 细胞的应激反应,促进细胞的增生与分化.该结果进一

步证实了我们以前所观察到的采用外源性补充生长因子 对缺血性内脏治疗作用的理论^[34].

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•消息•

世界胃肠病学杂志英文版获得第二届国家期刊奖百种重点期刊

本报讯 为了进一步繁荣期刊出版事业,2002年9月,经中共中央宣传部同意,新闻出版总署决定举办第二届国家期刊奖评选活动. 经过反复审核,全国共推荐出参评科技期刊 522种.这些参评期刊经过评选办公室的参评资格审查、出版规范审查、广告内容审查后,由专家组和评选工作委员会进行评选. 2002年12月初产生评选入围期刊,并将初评结果在《光明日报》、《科技日报》、《中国新闻出版报》和《中国图书商报》公示,接受全社会的监督,最终评出国家期刊奖科技类30名,国家期刊奖 14名奖50名,国家期刊奖百种重点期刊99名. 世界胃肠病学杂志英文版(World Journal of Gastroenterology)获得第二届国家期刊奖百种重点期刊,并荣获获奖证书、奖杯和获奖徽标.

国家期刊奖是期刊业中最权威的、也是最具影响的奖项. 我们衷心感谢全体编委及作者、读者对世界胃肠病学杂志英文版的支持,希望在今后能继续得到大家的关心爱护和大力支持,争取更大的成绩. (世界胃肠病学杂志社 2003 - 01 - 23)