

Stimulatory effect of GH3 cell line conditioned medium on the proliferation of the endothelial cell line (HECa10) *in vitro*

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Abstract

OBJECTIVES: The process of neoangiogenesis plays a key role in development and progression of solid tumours. The formation of new blood vessels different from the portal network system is important for pituitary tumour formation. The pivotal role of activated endothelial cells in angiogenesis was well documented. The degree of endothelial cells stimulation depends on the angiogenic activity of the tumorous cells.

The aim of the study was to elucidate the angiogenic properties of the lactosomatotrophic pituitary cell line.

MATERIAL AND METHODS: The study was carried out on the mouse endothelial HECa10 cell line subjected to medium obtained from the culture of rat lactosomatotrophic pituitary GH3 cell line. The endothelial cell growth was measured using the modified colorimetric method EZ4Y detecting the viable cells. The secretion of vascular endothelial growth factor (VEGF) to GH3 cells conditioned medium was assessed by immunoenzymatic method.

RESULTS: It was shown that the exposure of endothelial cells to pituitary tumorous conditioned medium significantly stimulated the cellular growth after 24 and 48 hours of incubation. Moreover, the concentration of VEGF in GH3 conditioned medium occurred to be 13 times higher than in the control medium.

CONCLUSION: Our results indicate the angiogenic activity of lactosomatotroph GH3 cell line and suggest the role of VEGF in pituitary tumorous angiogenesis.

Abbreviations:

bFGF	basic fibroblast growth factor
C-F10	complete F10 medium
C-RPMI	complete RPMI medium
GH	growth hormone
GH3-CM	GH3 conditioned medium
HUVEC	human umbilical endothelial cells
IGF-1	insulin-like growth factor
OD	optical density
PRL	prolactin
TCM	tumour conditioned medium
VEGF	vascular endothelial growth factor

Introduction

Angiogenesis, the development of new blood vessels is well known to be a crucial process for variety of physiological and pathological events [46]. Since Folkman et al [21] suggested the role of angiogenesis in tumour development, this process has been confirmed to play a key role in formation and progression of solid tumours. The molecular mechanisms of angiogenesis in malignant tumours is the result of the so-called angiogenic phenotype of neoplastic cells. It results in the excessive production of angiogenic growth factors stimulating the migration and proliferation of endothelial cells [49].

It was shown that the proliferation rate was 30–45 times greater in the endothelium of blood vessels in tumours than in normal vessels [10, 14, 15, 54]. The potential doubling time of the tumour endothelium was significantly shorter than the turnover time of the normal endothelial cells as well [27]. Nowadays there is a growing evidence showing the molecular differences between the vascular phenotype of normal and tumorous endothelium [13, 23]. Lane et al observed induction of special chemokines involved in neovascularization by Kaposi's sarcoma-associated herpes virus infected endothelial cells [34]. The strong expression of the specific growth factor by the majority of the glioblastoma cells as well as by vascular endothelial glioblastoma cells was stated [33]. The autocrine and paracrine stimulation of endothelium in tumorous angiogenesis was postulated. It was also demonstrated that invasive breast cancer vessels expressed proteins characteristic of proliferating and migrating endothelial cells and modulating endothelial apoptosis *in vitro* [42]. Therefore, endothelial cells are subjected to numerous neoangiogenesis studies

and they occurred to be a suitable experimental model useful for studies concerning the mechanisms of angiogenesis.

The studies on angiogenesis in pituitary adenomas revealed contradictory results. Some observations showed that pituitary adenomas had significantly lower vascular densities as compared to non-tumorous adenohypophyses [16, 31, 55]. On the other hand, increased vascularization was observed in experimentally induced pituitary tumours. The implantation of diethylstilbestrol resulted in marked hyperprolactinaemia and hyperplasia of pituitary prolactin cells accompanied by the increase of the pituitary vessel area and vessel density in rats [43, 44, 48]. The autopsy angiographic studies revealed the presence of extraportal artery supplies in 66% patients with microadenomas [25]. Pawlikowski observed the higher vascular density in human gonadotropinomas [45]. Vidal et al demonstrated a tendency of greater vascularization of invasive pituitary tumours [56]. In studies on lactotroph tumours, the invasive prolactinomas and macroprolactinomas appeared to be significantly more vascularized tumours [52, 53]. In the human pituitary tumours immunocytochemical studies of the basement membrane revealed changes characteristic of active arterial neovascularization as lack or fragmentation of this membrane [18].

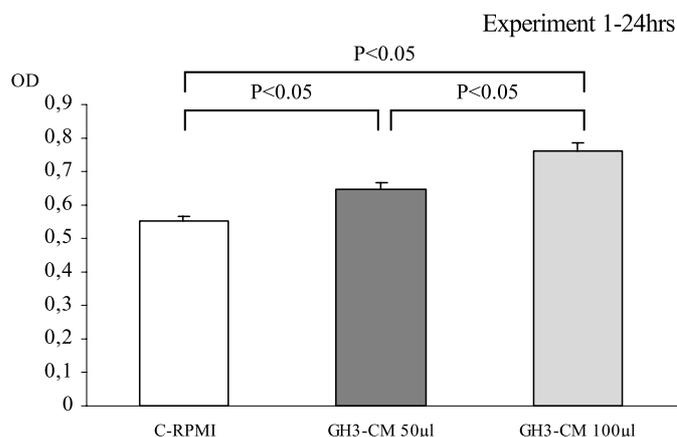
The aim of the present study was to investigate some angiogenic properties of the pituitary lactosomatotrophic GH3 cell line by evaluation the effect of GH3 conditioned medium on the proliferation of cultured HECa10 endothelial cells.

Material and methods

The murine endothelial cell line HECa10 [8] and the rat pituitary lactosomatotrophic cell line GH3 [50] were used in the experiments.

Cell culture of endothelial HECa10 cells: The continuous culture of the cells was maintained in culture flasks (Nunc EasY flask 25cm², NUNC). The cells were cultured in the complete medium composed of RPMI 1640 medium (Sigma) supplemented with 25 mM Hepes buffer (Sigma); 2 g/liter sodium bicarbonate (Sigma); 50 μM 2-mercaptoethanol (Serva); 4 mM L-glutamine

Figure 1A: The effect of GH3 conditioned medium (GH3-CM) on the viability of mouse endothelial cells (HECa10) incubated for 24 hrs; C-RPMI - control with complete RPMI, OD-optical density. Bars represent means ± SEM



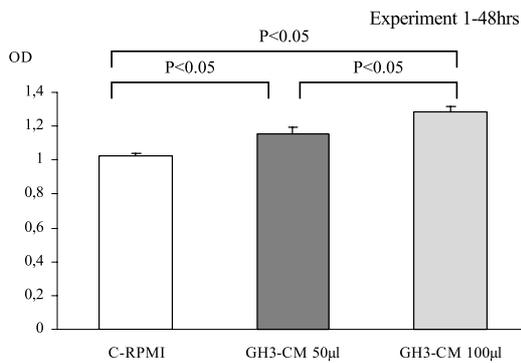


Figure 1B: The effect of GH3 conditioned medium (GH3-CM) on the viability of mouse endothelial cells (HECa10) incubated for 48 hrs; C-RPMI – control with complete RPMI, OD-optical density. Bars represent means±SEM

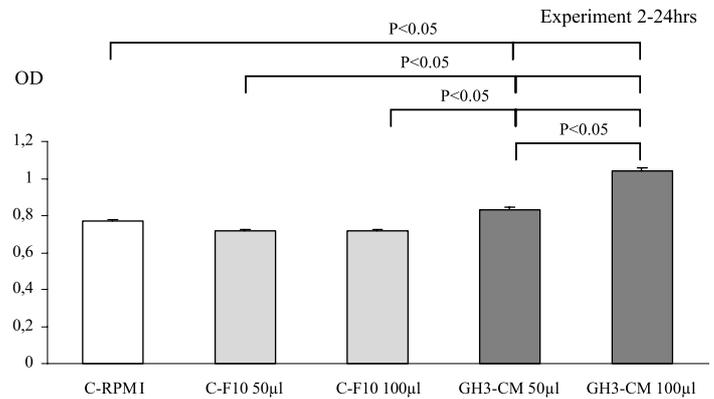


Figure 2A: The effect of GH3 conditioned medium (GH3-CM) on the viability of mouse endothelial cells (HECa10) incubated for 24 hrs; C/RPMI – control with complete RPMI; C-F10 – control with complete F-10, OD – optical density. Bars represent means±SEM.

(Sigma); 0.1 mM sodium pyruvate (Sigma); 100 U/ml penicillin and 100 µg/ml streptomycin solution (Sigma); 10% heat-inactivated fetal calf serum (FCS, Biochrom) at 37°C in the humidified atmosphere of 95% air and 5% CO₂. Before confluency (twice a week) the cells were harvested after a 2-min incubation at room temperature in the presence of trypsin-EDTA (0.05 and 0.02% respectively) in Hanks-balanced salt solution (Sigma). The cells were washed three times in complete RPMI and after last centrifugation seeded at 5×10^4 cells in 5ml of fresh medium.

Cell culture of lactosomatotrophic GH3 cells: The continuous culture of the cells was maintained in culture flasks (Nunc EasY flask 25cm², NUNC). The cells were cultured in complete medium composed of F-10 medium (Sigma) supplemented with 2 g/liter sodium bicarbonate (Sigma); 100 U/ml penicillin and 100 µg/ml streptomycin solution (Sigma); 2.5% heat-inactivated fetal calf serum (FCS, Biochrom) and 15% heat-inactivated horse serum (Sigma) at 37°C in the humidified atmosphere of 95% air and 5% CO₂. According to the amount of cells the complete medium was changed every 3–4 days. About once a week, prior to confluency, the cells were harvested after a 2-min incubation at 37°C in the presence of trypsin-EDTA (0.05 and 0.02% respectively) in Hanks-balanced salt solution (Sigma). The cells were washed twice in complete medium and after last centrifugation seeded at 5×10^5 cells in 5ml of fresh medium. The supernatant obtained from culture flasks before harvesting GH3 cells (GH3-conditioned medium – GH3-CM) was collected and stored at –80°C.

Experiments: Two experiments were carried out. The HECa10 cells were subjected to the trypsinization process as described above, suspended at 1×10^5 /ml cells (experiment 1) and at 1.4×10^5 /ml cells (experiment 2) in complete RPMI and 50 µl aliquots of cell suspension (5×10^3 cells for experiment 1 and 7×10^3 cells for experi-

ment 2) were placed in the assay wells of cell culture plates (Nunclon™ Δ 96 MicroWell Plates, NUNC). Then 50 µl or 100 µl of just defrosted GH3 conditioned supernatant (GH3-CM) was added to the appropriate wells. The equal volume of culture medium: complete RPMI (C-RPMI) for experiment 1 or complete RPMI and complete F-10 (C-F10) for experiment 2 was added to the control wells. The final volume in each well was 200 µl. After 24hrs or 48hrs of incubation the cell viability was measured using EZ4Y system (based on the reduction of substrate [3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyl-tetrazolium bromide] to a formazan product by mitochondrial dehydrogenases in living cells), following the procedure recommended by the producer of the kit (EZ4Y, Easy for You, The 4th Generation Non Radioactive Cell Proliferation & Cytotoxicity Assay, Biomedica Gruppe, Austria, Bellico Biomedica Poland). The optical density (OD), reflecting the quantity of viable cells in the sample was measured by microplate ELISA reader at 450 nm. In our previous studies a linear relationship between the OD and the number of viable HECa10 cell has been demonstrated (data not shown).

VEGF concentration assay: Mouse vascular endothelial growth factor kit (VEGF Immunoassay kit, Quantikine M, R&D Systems, USA) was used to measure VEGF concentration in the GH3 conditioned supernatant (sensitivity < 3pg/ml; intraassay precision CV < 8%). The optical density (OD) of each sample was measured by microplate reader at 450 nm and the sample values of VEGF (pg/ml) were read off standard curve.

Statistical evaluation: The results are expressed as means±SEM. Comparisons between tested groups were made by one-way analysis of variance. When ANOVA revealed a statistically significant difference, comparisons were further evaluated by the least statistical difference test (LSD). The differences were considered significant if $P < 0.05$.

Results

In both experiments the exposure of HECa10 cells to GH3 conditioned medium (GH3-CM) significantly stimulated in a dose dependent way the growth of endothelial cells (Figure: 1A, 2A, 1B, 2B).

The concentration of VEGF in GH3 conditioned medium (GH3-CM) was 13 times higher as compared with its concentration in the control medium (10.02 vs 138.8 pg/ml, Figure 3).

Discussion

The observed stimulatory effect of GH3 conditioned medium on the proliferation of endothelial cells indicate some angiogenic activity of tumorous pituitary cells. These results are in agreement with some observations of other authors. *In vivo* the increased numbers of circulating endothelial cells in cancer patients was noticed [7]. *In vitro* the greater proliferative activity of endothelial cells incubated with tumour conditioned medium (TCM) obtained from breast carcinoma and from small lung carcinoma cell lines was shown [26]. Li et al who also examined the effect of breast carcinoma cell line conditioned medium on the cell cycle of human umbilical endothelial cells (HUVEC), revealed more endothelial cells in the S phase [35]. The mitogenic and anti-apoptotic activities of above medium on these endothelial cells were also observed [36]. The authors suggest that the breast carcinoma cell line may secrete soluble pro-angiogenic factors that induce the HUVEC angiogenic switch including cell cycle progression, proliferation and growth. Increased survival accompanied by some crucial for angiogenesis phenotypic changes of endothelial cells incubated with malignant osteoblastic cell line conditioned medium but without inducing the proliferation was observed by Castilla et al [12]. These effects occurred to be inhibited by the blockade of vascular endothelial growth factor (VEGF) or by blockade of VEGF receptor. VEGF is endothelial-cell-specific mitogen secreted by

tumour tissue [1, 19, 51]. In our study VEGF produced by GH3 cells (Fig. 3) may be one of factors responsible for “angiogenic switch” and for the proliferative effect of GH3-CM on HECa10 cells. It is worth mentioning that whereas in normal pituitary VEGF has been reported to be produced only by folliculo-stellate cells [20, 30], pituitary tumour cells acquire the ability to produce VEGF. It was shown that both human pituitary tumour cells and different pituitary cell lines (GH3, AtT20, α T3-1) secreted VEGF under basal and stimulated conditions and that these tumorous pituitary cells might be involved in the angiogenic process in pituitary [4, 5, 37]. Our results are in agreement with these observations. The next possible mechanism is that GH3-CM caused stimulation of VEGF autocrine secretion by endothelial cells. Olaso et al observed the stimulation VEGF mRNA and protein synthesis by hepatic stellate cell line incubated with melanoma supernatants [41]. Autocrine secreted VEGF may additionally stimulate the proliferation of endothelial cells.

Boyd et al, who studied the cross talk between melanoma and endothelial cells in an *in vitro* co-culture model, revealed that uveal melanomas could support the growth of endothelium and that this effect could be modulated both by VEGF and by basic fibroblast growth factor (bFGF) [9]. In another study Il-8 produced by hepatocellular carcinoma cell line significantly accelerated the proliferation of HUVEC in co-culture of endothelial and carcinoma cells [2]. It is possible that not only VEGF but also bFGF or other cytokines are included in the observed in our study stimulatory effect of GH3-CM on HECa10 cells. This possibility can be supported by the observations of the elevated levels of VEGF and bFGF in the peripheral blood of patients with pituitary adenomas [32]. Induction of angiogenic phenotype through bFGF pathway by pituitary tumor-transforming gene (PTTG), protooncogene expressed in pituitary tumours [28], can also support above conclusion [58]. Moreover, medium conditioned from transfectants overexpressing the wild-type human

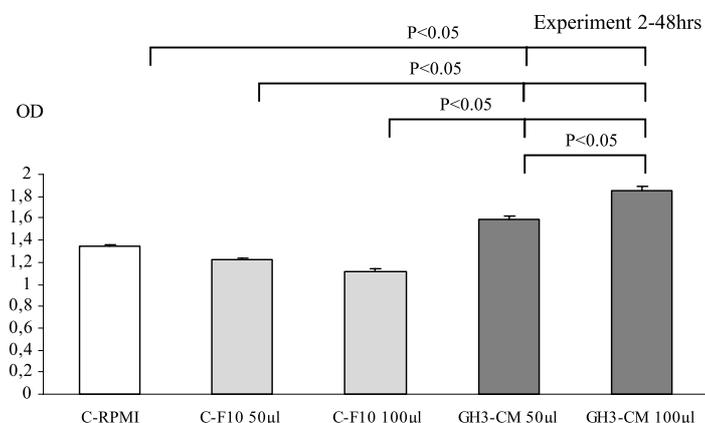


Figure 2B: The effect of GH3 conditioned medium (GH3-CM) on the viability of mouse endothelial cells (HECa10) incubated for 48 hrs; C-RPMI – control with complete RPMI; C-F10 – control with complete F-10, OD-optical density. Bars represent means \pm SEM

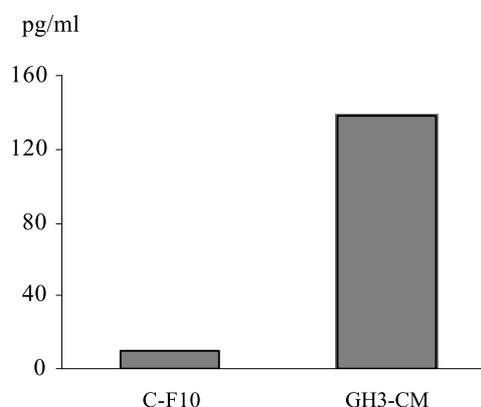


Figure 3: Concentration of VEGF (pg/ml) in complete F-10 medium (C-F10) and in GH3 conditioned medium (GH3-CM).

PTTG induced proliferation, migration and tube formation of endothelial cells [29].

The rat lactosomatotrophic cell line GH3 is known to secrete both prolactin (PRL) and growth hormone (GH) [3]. It has been shown that PRL possesses both angiogenic and antiangiogenic properties. While in some studies the inhibition of endothelial cells proliferation and antiangiogenic effects of the 16-kDa fragment of PRL were shown [22, 24], the study of Malaguarnera et al demonstrated the stimulation of human endothelial cell proliferation and increase of capillary formation induced by prolactin [39]. Enhanced release of VEGF from PRL treated macrophages was also shown [38]. The ability of human prolactin antagonist to inhibit endothelial cell proliferation, to disrupt the tube structures formation and to inhibit the signal transduction induced by PRL in human breast cancer cells were shown as well [6]. In our study PRL secreted by GH3 cells may be involved in the stimulatory effect of GH3-CM on HECa10 cells. Growth hormone is another hormone secreted by GH3 cells. Rac-curt et al localized the GH gene expression in surgical specimens of the mammary gland proliferative disorders. The authors detected GH mRNA in the endothelial cells in areas of neovascularization and suggested the pivotal role of autocrine GH in neoplastic mammary gland progression [47]. In our study the stimulatory effect of GH secreted by GH3 cells on endothelial cells proliferation may be also taken into consideration.

In our experiments the mechanism of apoptosis should also be discussed. The resistance of endothelial cells co-cultured with glioblastoma to apoptosis was shown [11]. According to the authors, the endothelial genes associated with survival may be up-regulated in endothelial cells growing in the tumour microenvironment. The ability of TCM to delay cell apoptosis was also shown by Wu et al [60]. The technique used in our study provides the global information on the number of living active cells. It is well correlated with other proliferation indices but it does not differentiate between the effects depending on proliferation, necrosis and apoptosis [40]. It is possible that the stimulatory effect of GH3-CM on the quantity of viable endothelial cells depends not only on the increased proliferation but on the inhibited apoptosis as well. Moreover, the observation by Wilson et al [59] that insulin-like growth factor (IGF-1) protected human retinal endothelial cells from apoptosis as well as the statement by Fagin et al [17] that GH3 cells expressed the gene for IGF-1 and secreted IGF-1 into the culture medium both may support that possibility.

Although pituitary adenomas seemed to be less vascularized than normal pituitary gland, the formation of new blood vessel network system, different from that portal one, remains crucial for pituitary tumour formation. The presence of specific Flk-1 receptors for the most potent angiogenic factor VEGF in endothelial cells of capillaries in the pituitary gland support above thesis [57].

In conclusion our results indicate the angiogenic activity of lactosomatotrophic GH3 cell line and suggest the role of tumourous VEGF in this process. Further studies are needed to explain the complete mechanism

of this activity and for better understanding the pathogenesis of pituitary adenomas.

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