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Titanium-Alloy Particles Induced Cyclooxygenase-2 in Human Macrophage-Like Cells in Vitro

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Prostaglandin E$_2$ (PGE$_2$) has been reported to be an important mediator in aseptic loosening and/or periprosthetic osteolysis in total joint arthroplasties. Previous studies have reported that human macrophages stimulated with particles in vitro release PGE$_2$. However, they have not shown the expression of cyclooxygenases (COX) which are rate-limiting enzymes of PGE$_2$ synthesis. We hypothesized that PGE$_2$ production by activated macrophages is dependent upon the induction of COX-2, not upon the constitutive isozyme, COX-1. When we evaluated the expression of COX-1 and COX-2 in titanium-alloy particle-stimulated human macrophages, the expression of COX-2 mRNA was up-regulated by the particles, on the other hand, the expression of COX-1 mRNA was not affected. In addition, NS-398, a COX-2 inhibitor drastically suppressed up-regulated PGE2 production by the particles. These results provide strong evidence that PGE$_2$ production by particle-stimulated macrophages is dependent upon the induction of COX-2, not COX-1.

Aseptic loosening is a major cause of failure of total joint arthroplasty and often requires revision surgery. Adverse tissue response to prosthetic wear particles is recognized to be an important factor in the development of periprosthetic osteolysis and to be a cause of aseptic loosening (2, 14, 22, 26, 28). The macrophage is thought to be a key cell in the events associated with periprosthetic osteolysis and aseptic loosening of prosthesis (12, 28), because these phenomena are thought to result from increased local synthesis of bone-resorbing factors by activated macrophages (2, 14, 22). These cells phagocytose wear particles of polyethylene, metal, or bone cement, and release proinflammatory cytokines, such as tumor necrosis factor-α(TNF-α), interleukin-1β(IL-1β), interleukin-6(IL-6) that have been identified as the mediators of bone resorption (1, 4, 10, 12, 17, 20). These factors are suggested to act in an autocrine and paracrine manner to stimulate the differentiation, maturation, and activation of osteoclasts and produce localized bone resorption, but the mechanism has not been fully understood. In addition to these factors, prostaglandin E$_2$ (PGE$_2$) has long been suspected to be an important mediator of aseptic loosening and osteolysis, based on its abundance in periprosthetic membranes of failed implants (8, 9) and its known roles in bone metabolism (16). In addition, previous in vitro studies have shown increased PGE$_2$ production of cultured monocytes/macrophages exposed to particulate debris such as titanium (11, 18, 25, 29). As a result, it has been recognized that PGE$_2$ produced by macrophages which phagocytosed particulate wear debris may be associated with periprosthetic osteolysis and aseptic loosening.

Among prostaglandin synthesis, the cyclooxygenases are the most important rate-limiting
enzymes in the pathway (21). It is now well known that cyclooxygenases exist as two iso-enzymes encoded by two different genes, cyclooxygenase-1 (COX-1) and cyclooxygenase-2 (COX-2). In general, COX-1 is the constitutive form that is important in maintaining homeostatic functions; COX-2 is the inducible form that is induced by various stimuli, such as proinflammatory cytokines and is believed to modulate inflammatory responses (21). However, the role of these two iso-enzymes in bone metabolisms is still unclear. Recent studies have shown that many of the agents that regulate prostaglandin production also regulate COX-2 in a similar direction and to a similar extent in cell and organ cultures with smaller or absent effects on COX-1 (15, 24). These studies suggest that COX-2 may have a role distinct from that of COX-1 in bone metabolisms. In the condition of aseptic loosening, recently, COX-2 has been detected immunohistologically in macrophages laden with wear debris in the pseudomembrane at the bone-implant interface (13). Therefore, COX-2 may be implicated in the mechanism of periprosthetic bone resorption associated with prosthesis loosening. However, the association of these two iso-enzymes, COX-1 and COX-2 in this condition has not been well described in the past studies. Similarly, previous in vitro studies have not shown the expression of COX-2 by particle-stimulated human macrophages, although they have shown increased PGE2 production. In order to investigate the roles of COX-1 and COX-2 in wear debris-induced bone resorption, we challenged the titanium-alloy particles on the human macrophage-like cells, and COX-1 and COX-2 mRNA expression were evaluated. Subsequent PGE2 production and the effect of a COX inhibitor on PGE2 production were also evaluated.

MATERIALS AND METHODS

Cell culture. The human monocyte-like cell line U937 (from American Type Culture Collection) was cultured in RPMI-1640 medium (Gibco BRL Life Technologies, Grand Island, NY, USA) supplemented with 10% heat-inactivated fetal bovine serum (Sigma Chemical, St. Louis, MO, USA), 100 U/ml penicillin and 100 µg/ml streptomycin in a humidified environment of 5% CO2 at 37°C. Cells at a logarithmic phase of growth were harvested, adjusted to 5X10^5 cells/ml in the presence of 10 nM of phorbol 12-myristate 13-acetate (PMA)(Sigma) and incubated for 3 days to differentiate into adherent macrophage-like cells (3). The cells were harvested with a cell scraper and washed twice with phosphate buffered saline (PBS); cell viability and number were assessed using the trypan blue dye exclusion test. Then the cells were placed in 24-well plates at 1X10^6 cells/ml/well, and quiesced for 24 hours before the experiments.

Cell-particle co-culture. Titanium-alloy (Titanium-6Aluminium-4Vanadium) particles were provided by Zimmer. These are less than 5 µm in diameter, a size consistent with phagocytosis and activation of macrophages (12). These particles were suspended in PBS at a concentration of 35 mg/ml. They were sterilized in an autoclave before the experiments. The particles were added to the wells to attain final concentrations of 0.1, 0.5 and 1mg/ml. These treatments were carried out in triplicate to give three repetitions for each treatment. The supernatants were examined for the endotoxin level using the Limulus amebocyte lysate (Sigma). The supernatants both with and without the particles contained less than 10 pg/ml of endotoxin. The endotoxin level of the supernatant of the cell culture challenged with 1mg/ml particles was 6.9 pg/ml, and that of the supernatant of the cell culture without particles was ≤ 5 pg/ml. When 10 pg/ml of endotoxin was added to the cells, neither the production of PGE2, nor the expression of COX-2 mRNA were affected, indicating that endotoxin contamination was not responsible for any of the effects seen in our results. Separate wells were challenged with 1µg/ml lipopolysaccharide (LPS)(Sigma) as a positive
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cell-particle co-cultures and controls were incubated at 37°C in a humidified environment of 5% CO₂.

**PGE₂ assay.** Supernatants were harvested at intervals of 4, 12 and 24 hours. They were then centrifuged to remove cellular and particulate debris, and the aliquots were stored at −80°C prior to analysis. PGE₂ levels in the supernatants were quantified using enzyme-linked immunosorbent assay (ELISA) kit (NEOGEN Corporation, Lexington, KY, USA).

**Total RNA isolation and reverse transcription-polymerase chain reaction.** After a 4 hour culture period, total cellular RNA was isolated with RNeasy Mini Kit (QIAGEN K.K., Tokyo, Japan), according to the manufacturer's protocol. From each sample, approximately 1μg of total RNA was reverse-transcribed, using 0.5mg/ml of oligo(dT) primer, Reverse Transcription 10XBuffer, 10mM dNTP Mix and AMV Reverse Transcriptase (Promega Corporation, Madison, WI, USA). PCR was carried out using a thermal cycler (Program Temp. Control System PC-701, ASTEC, Fukuoka, Japan). PCR conditions were denaturation at 95°C for 9 minutes, followed by 25-40 cycles of denaturation at 94°C for 1 minute, annealing at 55°C for 1 minute and extension at 72°C for 1 minute. Thereafter, a 7-minute extension time at 72°C was allowed. Specific primers for cyclooxygenase-1 (COX-1) (23), cyclooxygenase-2 (COX-2) (23) and glyceraldehyde-3-phosphate-dehydrogenase (GAPDH) (23) were as follows:

- **COX-1**
  - sense primer: 5'-TGCCCAGCTCCTGGCCCGCCGCTT-3'
  - antisense primer: 5'-GTGCATCAACACAGGCGCCTCTTC-3'

- **COX-2**
  - sense primer: 5'-TTCAAATGAGATTGTGGGAAAATTGCT-3'
  - antisense primer: 5'-AGATCATCTCTGCTGAGTATCTT-3'

- **GAPDH**
  - sense primer: 5'-CCACCCATGGCAAATTCCATGGCA-3'
  - antisense primer: 5'-TCTAGACGGGAGGTCAGGTCCACC-3'

GAPDH was used as an internal control. The expected sizes of PCR products were 303 bp for COX-1, 305 bp for COX-2, and 593 bp for GAPDH. PCR products were loaded on 2.5% agarose gel; the bands of interest were visualized by ethidium bromide staining under UV light exposure.

**Treatment with a COX inhibitor.** The cells were pretreated with a COX-2 selective inhibitor, NS-398 (Cayman Chemical, Ann Arbor, MI, USA) (7) at concentrations of 0.001, 0.01, 0.1, 1, 10 μM for 30 minutes, and challenged with the particles at concentrations of 0.5 mg/ml. After a 12 hour culture period, the supernatants were collected and assayed for PGE₂ concentration as described above. These studies were carried out in triplicate to give three repetitions for each treatment.

**Statistical analysis.** Data are expressed as mean ± SD. Statistical significance was calculated using ANOVA followed by Fisher’s PLSD comparison test. P< 0.05 was considered statistically significant.

**RESULTS**

*The particles increased PGE₂ production by human macrophage-like cells.* PGE₂ released in the supernatant at 4, 12, 24 hours for the different particle concentrations are
presented in Figure 1(a, b, c). After a 4 hour culture period, no increased PGE2 production was observed. However, after a 12 hour culture period, increased PGE2 production was observed in the cells challenged with the particles at the 0.5 and 1mg/ml concentrations.
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After a 24 hour culture period, the particles elicited a 12-fold increase in PGE₂ production (23.89 ± 6.4 ng/ml) at the 0.5 mg/ml concentration, and a 19-fold increase (38.47 ± 1.72 ng/ml) at the 1 mg/ml concentration over non-stimulated cells (2.09 ± 0.03 ng/ml). The particles increased PGE₂ production both in a dose and time-dependent manner.

The particles induced COX-2 mRNA in human macrophage-like cells. RT-PCR analysis showed that COX-1 mRNA was constitutively expressed in both cells with and without challenging the particles. On the other hand, COX-2 mRNA was markedly induced in the cells challenged with the particles in contrast to the non-stimulated cells. The up-regulation of COX-2 mRNA was observed at the 0.5 and 1mg/ml concentrations of the particles. This up-regulation of COX-2 mRNA was dose-dependent, which is consistent with the up-regulation of PGE₂ production. Thus the particles were capable of inducing COX-2 mRNA in the cells (Figure 2).

Figure 2. After a 4 hour culture period, total cellular RNA was isolated. From each sample, approximately 1µg of total RNA was reverse-transcribed, then PCR was carried out. RT-PCR analysis showed that COX-1 mRNA was constitutively expressed both by challenging, and without challenging the particles. On the other hand, COX-2 mRNA was markedly induced in the cells challenged with the particles in contrast to the non-stimulated cells. The first lane shows a molecular weight marker.
A COX-2 selective inhibitor suppressed the up-regulation of PGE2 production by the particles. To determine if there is any direct link between PGE2 production and COX-2 induction by the particle-challenged cells, activity of COX-2 was inhibited by using NS-398, which is widely recognized as a COX-2 selective inhibitor. The PGE2 production induced by the particles was drastically suppressed by NS-398 in a dose-dependent manner (Figure 3). All induction of PGE2 production by the particles was eradicated completely by 1µM of NS-398, establishing a direct association between the up-regulated PGE2 production by the particles and the induction of COX-2.

**DISCUSSION**

In this study, we challenged titanium-alloy (Ti-6Al-4V) particles, under 5µm in diameter that can undergo phagocytosis by macrophages (12), on human macrophage-like cells. Particles of a variety of compositions, such as polyethylene, bone cement and metal, have been implicated in the etiology and pathogenesis of aseptic loosening of prostheses and periprosthetic osteolysis. This was originally thought to be a “cement disease”, however, it has now been recognized as a “particle disease”. Moreover, it has been reported that the black staining of tissues around failed prostheses is due to large numbers of titanium-alloy (Ti-6Al-4V) particles (5, 27). In two recent studies, particles of titanium debris were found in 63 and 75 per cent of membranes retrieved from patients managed with revision surgery (6, 19). These observations suggest that titanium-alloy wear particles may play a substantial role in aseptic loosening of prosthesis and periprosthetic osteolysis.

Cells exposed to the particles were examined periodically using an inverted light microscope.
Particles were observed collecting and clumping within the confines of the cell membrane in a time dependent manner, and were believed to be phagocytosed by the cells. Subsequent PGE₂ production by the cells was stimulated in both a particle dose-dependent and a time-dependent manner. These results were compatible with previous in vitro studies.

RT-PCR analysis showed that COX-2 mRNA was induced at a higher rate in the cells treated with LPS than in the cells challenged with the particles at the 1 mg/ml concentration (Figure 2). However, after a 24 hour culture period, PGE₂ production in the cells treated with LPS was rather lower than PGE₂ production in the cells challenged with the particles at the 1 mg/ml concentration (Figure 1(c)). We hypothesize that this may have been caused by an inaccurate estimation of COX-2 protein expression. In this study, we did not evaluate the quantification of COX-2 protein. Therefore, COX-2 mRNA expression was considered to be the same as shown in our data; however, it is possible that COX-2 protein expression was lower in the cells treated with LPS than in the cells challenged with the particles at the 1 mg/ml concentration, thus explaining the seeming paradoxical result whereby PGE₂ production reduced in the cells challenged with the particles.

RT-PCR analysis showed that the expression of COX-2 mRNA was stimulated by the particles in contrast to the expression of COX-1 mRNA, which was expressed constitutively with or without the particles. These results demonstrate that the particles induced the expression of COX-2, which is the inducible isozyme.

At the same time, mRNA expressions of TNF-α, IL-1β, IL-6 were also up-regulated with the particles in the cells (data not shown). Therefore, it is possible that the induction of COX-2 was a direct effect of the particles doing what or an indirect effect via the effects of these cytokines.

The relationship between the up-regulation of PGE₂ production and the induction of COX-2 mRNA expression by the particles was further established by using a COX-2 selective inhibitor, NS-398. The PGE₂ production induced by the particles was drastically suppressed by NS-398 in a dose-dependent manner. All induction of PGE₂ production by the particles was completely eradicated by 1 µM of NS-398, establishing a direct association between the up-regulated PGE₂ production and the induction of COX-2.

Based on these data, a direct link between the up-regulation of PGE₂ production and the induction of COX-2 mRNA expression by the particles demonstrated that COX-2, not COX-1 is the critical enzyme for PGE₂ production in this condition.

The results of this study indicate that human macrophage-like cells produce large amounts of PGE₂ via the induction of COX-2 by phagocytosis of titanium-alloy particles. PGE₂ has been suspected to be an important mediator of periprosthetic bone resorption associated with prosthesis loosening as described above. Thus this study confirms the important role of COX-2, that is distinct from that of COX-1, in wear particles-mediated bone resorption. Periprosthetic bone resorption may be accelerated via the induction of COX-2. Therefore, COX-2 could possibly become the therapeutic target in preventing periprosthetic bone resorption. In this study, as the PGE₂ production induced by titanium-alloy particles was suppressed to basal level by a COX-2 selective inhibitor, our results may have implications for the management of aseptic loosening and osteolysis, by anti-inflammatory agents able to suppress the synthesis or activity of the inducible isozyme of COX, COX-2.
REFERENCES


