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Diverse forms of severe militation threatening state include system Distress Syndrome (ARDS). Or dysfunction. Two candidate me necrosis factor- α (TNF- α) and the derived glycoprotein, SPARC mechanisms of TNF α -, LPS-, experimental system that preclus host factors. We studied the inf bovine serum albumin across bin chemotaxis chambers. We all reorganization. We found that in transendothelial ¹⁴ C-BSA flux The LPS effect was profoundly	ary injuries can all lead to multi- nic vascular collapse, dissemi- ne common element to these co- diators of pulmonary vascular I he exogenous factor, bacterial I (Secreted Protein Acidic and R and SPARC-induced change des hydrostatic pressure change luence of human rTNF α , E.col ovine pulmonary vascular EC so studied whether these three is TNF α , LPS, and SPARC each and that these changes in barrier v serum-dependent and this serue	hated intravascular complications is the present of	agulation, ence of enc nclude the PS). In add ulates EC er function cells, or of urine SPAI confluence dothelial be and temper ted through be satisfied	and the Adult Respirato dothelial cell (EC) injury endogenous mediator turn lition, an LPS-induced, E shape. To better study to n, we utilized an <i>in vi</i> , other nonendothelial-deriv RC on the movement of ¹⁴ on filter supports moun arrier function through ac rature-dependent increment to EC actin depolymerization d by LPS-binding protein
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FOREWORD

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INTRODUCTION:

STATEMENT OF PROBLEM: Tumor Necrosis Factor α (TNF α) and endotoxin or bacterial lipopolysaccharide (LPS) are both candidate mediators of pulmonary vascular endothelial cell (EC) injury. Although the endogenous mediator TNF α , and the exogenous bacterial product LPS, are structurally unrelated, they share an exceedingly long stimulus-to-response lag time compared to other anaphylatoxins. Further, LPS is a potent stimulus for increased TNF α expression. The mechanism(s) by which TNF α and/or LPS regulate pulmonary vascular endothelial barrier function is unknown.

BACKGROUND OF PREVIOUS WORK:

<u>TNF α -induced Pulmonary Vascular Endothelial Injury In Vivo</u>: Elevated circulating levels of TNF α have been reported in humans following endotoxin infusion as well as in septic patients. Septic shock patients with detectible plasma TNF α have a higher incidence and severity of the Adult Respiratory Distress Syndrome (ARDS). Further, increased TNF α bioactivity has been recovered from alveolar macrophages of endotoxin-challenged dogs and in bronchoalveolar lavage fluid (BALF) of ARDS patients.

In 1987, we demonstrated that human rTNF α augments pulmonary edema formation and pulmonary extravasation of ¹²⁵I-albumin in rabbits (1,2). Electron microscopy revealed endothelial gap formation, pervascular edema and extravasation of permeability tracer. rTNF α also induces acute lung injury in other experimental animals, as well as tachypnea with fluid retention in cancer patients. It was not clear whether hemodynamic alterations are essential to rTNF α -induced lung injury. rTNF α -induced pulmonary extravasation of ¹²⁵I-albumin in guinea pigs is not associated with significant increments of mean left atrial and pulmonary pressures. Similarly, rTNF α -induced increments of vascular permeability to ¹²⁵I-albumin in isolated perfused rat lungs occurs in the absence of changes in pulmonary artery (PA) perfusion pressures. On the other hand, $rTNF\alpha$ infusion into awake sheep produces rapid onset, transient increases in PA pressure and pulmonary vascular resistance coincident with increases of pulmonary lymph flow and transvascular protein clearance. It was also unclear whether $TNF\alpha$ induced lung injury was, in part, granulocyte-dependent. TNF α induces pulmonary leukostasis TNF α augments granulocyte-to-endothelial interactions, stimulates in numerous species. neutrophil degranulation and granulocyte oxygen-dependent metabolism, and increases granulocyte-mediated cytotoxicity for EC. Granulocyte depletion has been shown to prevent TNF α -induced pulmonary endothelial injury in guinea pigs. In another report, granulocyte depletion failed to block rTNF α -induced lung injury in sheep. We showed that a rTNF α challenge that does not produce pulmonary leukostasis can induce pulmonary vascular endothelial injury in rabbits (2). Therefore, whether hemodynamic alterations and/or granulocyte-dependent mechanisms are essential to or even operative in rTNF α -induced lung injury in vivo is uncertain.

Effects of rTNF α on the Pulmonary Vascular Endothelial Barrier In Vitro: There are reports that rTNF α increases movement of radiolabeled tracers across bovine and ovine PA endothelial monolayers within minutes. Using bovine EC from a nonpulmonary source, other investigators

have found that $TNF\alpha$ augments transendothelial albumin flux first detectable at 12h or 2h with a progressive increase over 3-4h. These *in vitro* studies suggest that $rTNF\alpha$ can reversibly influence endothelial barrier function in the absence of hemodynamic alterations, granulocyte effector cells, or EC injury.

Role for LPS in Gram-Negative, Sepsis-Associated EC Injury: Gram-negative septic processes can be complicated by systemic vascular collapse, disseminated intravascular coagulation, the adult respiratory distress syndrome (ARDS), and brain edema. One common element to these complications is the presence of EC injury and/or dysfunction. This loss of endothelial integrity permits movement of intravascular fluid into tissues which results in an ineffective circulating blood volume and tissue edema formation. Evidence exists that the bacterial component responsible for much of the EC injury associated with Gram-negative bacterial sepsis is the bacterial cell envelope constituent, LPS. First, LPS bioactivity has been detected in the bloodstream of Gram-negative septicemic patients and levels of circulating LPS predict development of multiple organ failure, including ARDS. In patients with gram-negative bacterial meningitis, cerebrospinal fluid concentrations of LPS correlate with brain edema. Thus, LPS has been demonstrated within relevant body compartments temporally coincident with loss of endothelial barrier function. Second, administration of LPS alone to experimental animals Lastly, immunological and induces manifestations of EC injury and dysfunction. pharmacological interventions that specifically target the LPS molecule, reportedly protect against the EC complications associated with gram-negative sepsis or experimental LPS challenge.

Direct LPS-EC Interactions and LPS-Induced EC Responses: Although LPS induces numerous mediators of EC injury, evidence also exists for a direct role for LPS. During endotoxemia, the first host tissue barrier seen by circulating LPS is the endothelium. Not only is blood-borne LPS in close proximity to the EC surface but it actually can be transported across and localized to the endothelium. Although LPS internalization and intracellular trafficking through nonendothelial cells has been reported, EC processing of LPS is unclear. Further, LPS directly induces numerous EC responses, *in vitro*, in the absence of nonendothelial-derived host mediator systems. LPS induces EC arachidonate metabolism, nitric oxide production, and cytotoxicity. It upregulates expression of cytokines and leukocyte adhesion molecules, pushes the endothelial surface into a prothrombotic state, and induces endothelial barrier dysfunction.

PURPOSE OF PRESENT WORK AND METHODS OF APPROACH: We hypothesized that TNF α and/or LPS induce actin reorganization in pulmonary vascular EC which leads to EC shape change, cell-to-cell reorientation, and intercellular gaps which permit paracellular transit of macromolecules. In an in <u>vitro experimental</u> system that obviates hydrostatic pressure changes, granulocyte effector cells and nonendothelial cell-derived host factors, we studied the influence of TNF α and LPS on pulmonary vascular endothelial barrier function.

BODY:

A. EXPERIMENTAL METHODS:

Recombinant Human Tumor Necrosis Factor α (rTNF α) **Preparation:** rTNF α was generously provided by Knoll Pharmaceuticals/BASF K&K Corp., Whippany, NJ 07981. The molecule was produced in *Escherichia coli* and purified. The rTNF α had a specific activity, in an actinomycin D-free L929 cytotoxicity assay, of 9.8 X 10⁶ units per mg protein and contained <5 Endotoxin units/mg protein in the Limulus Amoebocyte Lysate Assay (Whittaker, M.A. Bioproducts, Walkersville, M.D.) The rTNF α was received lyophilized and frozen for storage at -70 C. The rTNF α was thawed only once for each experiment without re-freezing. The rTNF α was reconstituted in a 2% BSA solution in sterile nonpyrogenic normal saline (Travenol Laboratories). The BSA was globulin-and fatty acid-free (Sigma).

LPS AND LIPID A PREPARATIONS:

Purified native LPS phenol-extracted from *Escherichia coli* serotype 0111:B4 (Sigma) was dissolved in phosphate- buffered saline (PBS) st 1 mg/ml and stored at -20 C. For experiments, the LPS stock solution was further dissolved into supplemented tissue culture media as described below.

Salmonella minnesota lipopolysaccharide (LPS) chemotypes Ra, Rb, Rc, Rd, Re, and wild type; E. coli 0111:B4 LPS, E. coli J5 (Rc chemotype) LPS, and E. coli K12 lipid A were purchased from List Biological Laboratories Inc. (Campbell, CA). Monophosphoryl lipid A (MPL) and synthetic diphosphoryl lipid A (DPL) were purchased from ICN Biomedicals Inc. (Costa Mesa, CA).

De-o-acylated LPS: E. coli J5LPS (10.3mg) was suspended in 1.8ml of 0.1M NaOH solution. The cloudy suspension was heated in a water bath at 65° C for 2h. The reaction mixture was cooled in an ice/water bath, neutralized with 1.0M HCl to pH 6.8 and centrifuged at 10,000 x g for 10min. to remove insoluble material. The clear supernate was desalted on a PD-10 column (Pharmacia-LKB Biotechnology Inc. Piscataway, NJ) using water as eluant. The desalted sample was lyophilized. Yield of J5-DLPS was 4.5mg.

De-o-acylated lipid A: 1.0mg of lipid A from *E. coli* K12 strain D31M4 was suspended in 1.0 ml of 0.1M NaOH solution and the suspension was heated in a water bath at 65°C for 2h. The solution was cooled in an ice/water bath and was neutralized with 1.0M HCl to pH 7.0. The neutral solution was centrifuged at 10,000 X g for 10min. to remove insoluble material. The clear supernate was desalted on a PD-10 column using water as eluant. The desalted sample was lyophilized. Yield of de-o-acylated lipid A was 0.45mg.

Lipid A solution: Lipid A from *E. coli* K12 (1.0mg) was dissolved in 100ul of a mixture of chloroform (69%), methanol (27%), water (4%) in a small tube. The clear solution was evaporated to dryness by passing a slow stream of N_2 over the solution. The dry residue was

resuspended in 1.0ml of water. The resulting suspension was sonicated in an ultrasonic bath (Branson model 5200) for 10min. It gave a slightly hazy solution. A control sample was prepared by taking 100ul of the solvent mixture in a similar tube (without lipid A) and processed as described above.

Murine SPARC Preparation: Briefly, mouse PYS-2 cells, a teratocarcinoma cell line derived from parietal yolk sac endoderm, was used as a source for SPARC. Subconfluent PYS-2 cells were incubated in serum-free Dulbecco's Modified Eagles medium for 24-48h. The conditioned medium was harvested, clarified of cell debris, and concentrated by precipitation with 50% (w/v) ammonium sulfate in the presence of protease inhibitors. The precipitated proteins were then pelleted and dissolved in and dialyzed against 4M urea-50mM Tris-HC1 buffer (pH 8). The proteins were first separated by diethylamine ethyl (DEAE) - cellulose ion exchange chromatography (SPARC eluted with NaC1, 175mM). The peak containing SPARC was dialyzed vs. distilled H₂O for preferential precipitation of SPARC. The precipitate was dissolved in Tris-buffered saline and further purified by molecular sieve chromatography over Sephadex G-200 at 4°C. Several SPARC preparations were pooled for use in these studies. The SPARC preparations contained 0.0005-0.02ng endotoxin/ μ g protein as determined by the Limulus Amoebocyte Lysate Assay. To monitor the SPARC purification, selected cell cultures were radiolabeled with ³⁵S-methionine.

EC Culture: Bovine pulmonary artery EC were obtained from the American Tissue Culture Collection (Rockville, MD). EC were grown at 37°C under 5% CO₂ in Dulbecco's Modified Eagles Medium (DMEM) (Sigma) enriched with 20% heat-inactivated (56°C, 30 min) fetal bovine serum (FBS) (Hyclone Laboratories, Inc.; Logan, UT), L-glutamate 4mM, nonessential amino acids, and vitamins in the presence of penicillin (50 u/ml) and streptomycin (50 μ g/ml) (Sigma). The cells were washed and gently detached with a brief (1-2 min) trypsin (0.5 mg/ml) (Sigma) exposure with gentle agitation followed immediately by neutralization with FBScontaining medium. The cells were counted and suspended in medium for immediate seeding of assay chambers (4 X 10⁵ cells/ml) or 6-well tissue culture plates (2.9 x 10⁵ cells/ml). Cultures were determined to be endothelial by uniform morphology and by quantitative determination of angiotensin-converting enzyme activity with commercially available ³H-benzoyl-Phe-Ala-Pro substrate (Ventrex Laboratories, Inc., Portland, Maine 04103).

Assay of Transendothelial Albumin Flux: Transendothelial ¹⁴C-BSA flux was assayed as we have previously described (3). Polycarbonate filters (13 mm diameter, 0.4 μ m pore size) (Nucleopore, Inc., Pleaston, CA) were treated with 0.5% acetic acid (50°C 20 min), washed in distilled H₂O and immersed in boiling pig skin gelatin (Fisher Scientific, Pittsburgh, PA) solution (5mg/L distilled H₂O) for 60 min. The filters were then dried, glued to polystyrene chemotactic chambers (ADAPS, Inc., Dedham, MA), and gas sterilized with ethylene oxide. These chambers which served as the upper compartment for the assay chambers were inserted into wells of 24-well plates, each well containing 1.5 ml media and serving as the lower compartment of the assay chamber. Each upper compartment was seeded with 2 X 10⁵ EC in 0.5 ml media and cultured for 72 hr (37°C, 5% CO₂). We used ¹⁴C-BSA (Sigma) with a specific activity of 30.1 μ Ci per mg protein as the tracer molecule. The baseline barrier function of each

monolayer was determined by applying an equivalent and reproducible amount of ¹⁴C-BSA (4,800 dpm/0.5 ml) to each upper compartment for 1 hr at 37°C, after which 0.5 ml from the lower compartment was added to 4.5 ml of Optifluor Scintillation fluid (Packard Instruments Co., Downers Grove, IL) and counted in a Tri-carb 1500 Liquid Scintillation Analyzer (Packard). Only endothelial monolayers retaining $\geq 97\%$ of the ¹⁴C-BSA were studied. The monolayers were then exposed to increasing rTNF α , LPS or SPARC concentrations for 6 h. Based on the established dose-response relationship, other monolayers were exposed to agonist at a fixed concentration for 0.5, 1, 2, 4, and 6h exposure times. Simultaneous controls with medium alone were performed for each time point. Transfer of ¹⁴C-BSA across endothelial monolayers was again assayed.

In selected experiments, the monolayers were pretreated with the specific F-actin stabilizing agent, 7-nitrobenz-2-oxa-1, 3-diazole (NBD)-phallicidin (Molecular Probes, Eugene, OR), 0.3 μ M for 3h prior to and throughout the standard rTNF α , LPS, SPARC, or medium exposure. Incorporation of NBD-phallicidin into EC actin filaments was confirmed by epifluorescence microscopy. In other experiments, monolayers were pretreated with protein synthesis inhibitor, cycloheximide (Sigma) 50 μ g/ml, 0.5 h prior to and throughout the rTNF α , LPS, SPARC, or media exposures. This concentration of cycloheximide inhibited > 95% EC protein synthesis as measured by $\begin{bmatrix} 35 \\ 55 \end{bmatrix}$ methionine (New England Nuclear; Du Pont; Boston, MA) incorporation into trichloracetic acid-precipitable protein as we have previously described (3). Simultaneous NBD-phallicidin (0.3 μ M) and cycloheximide (50 μ g/ml) controls were also included.

Effect of LPS on Endothelial Cell Viability: To determine whether LPS-induced changes in endothelial barrier function could be explained by cell injury or loss of viability, LPS-exposed and medium control monolayers were serially studied for trypan blue exclusion and lactate dehydrogenase (LDH) release (3-6). EC were seeded into the wells of 24-well plates (2 X 10⁵ cells/well) and cultured for 72h to achieve confluence. The media was decanted and replaced with media containing rTNF α , LPS, SPARC, or media alone for increasing exposure times. For trypan blue exclusion, supernatants were harvested from experimental and media control monolayers which were then washed with Hanks' balanced salt solution (HBSS). The supernatant and wash from each well were centrifuged (300g, 10 min) and the cell pellet suspended with respective detached monolayers for staining with trypan blue 0.4% (Sigma) for 5 min. Viable and nonviable cells were counted in triplicate using a hemocytometer. For the LDH release assay, supernatants were harvested from experimental and media control monolayers and the monolayers solubilized (Triton X-100 3%, 0.5h). LDH activity was assayed in the medium and the cell lysate. Test samples were mixed with reconstituted LD-L reagent (Lactate 50 mM, NAD 7mM, pH 9.8) (Sigma) and ΔA_{340nm} was measured at 37°C over 1.5 min in a Gilford Response II Spectrophotometer (Ciba Corning Diagnostics). LDH release was expressed as percent of total LDH (LDH in medium plus LDH in cells). Correction was made for LDH in FBS.

<u>Assays for EC ⁵¹Cr and ³H-Adenine Release</u>: To determine whether rTNF α -, LPS-, or SPARC-induced changes in endothelial barrier function could be explained by EC injury, treated and medium control monolayers were studied for ⁵¹Cr and ³H-adenine release. EC were seeded

into the wells of 24-well plates (2 X 10⁵ cells/well) and cultured for 72h to achieve confluence. For the ⁵¹Cr release assay, confluent monolayers labeled with [⁵¹Cr]-sodium chromate (Amersham Arlington, IL), 12 μ Ci per well, for 3 hours at 37°C as we have previously described (3). The labeled monolayers were washed and the washes were counted for 2 minutes in a gamma counter (Pharmacia LKB, Piscataway, NJ). The ⁵¹Cr-labeling efficiency was calculated as total CPM per well-CPM in washes/total CPM per well x 100% to be 3%. The washed, labeled monolayers were incubated with either rTNF α , LPS, or medium alone for increasing exposure times after which the supernatants were counted. To differentiate between actual cell release of ⁵¹Cr and cell detachment into supernatants, aliquots of washes were centrifuged (300g, 10 min) before counting. All washed monolayers were solubilized with 1% Triton X-100 (Sigma) to induce maximum release. The lysates were centrifuged and the supernatants counted for ⁵¹Cr-activity. EC injury was expressed as: (⁵¹Cr supernatant)/(⁵¹Cr supernatant)/(⁵¹Cr supernatant + ⁵¹Cr cell lysate) X 100%.

For the ³H-adenine release assay, confluent monolayers were labeled with $\begin{bmatrix} 8 & - & 3H \end{bmatrix}$ adenine (Amersham) 1.0 μ Ci/ml (Specific activity = 25 Ci/mmol) for 1h at 37°C. This brief labeling time with postconfluent stationary phase cells avoids significant ³H-adenine incorporation into the nucleus. The monolayers were washed x 3 and incubated with either LPS 10 ng/ml or medium alone for increasing exposure times. Selected ³H-adenine-labeled media control monolayers were solubilized with Triton X-100 for 30 min to determine maximum ³H-adenine release. At each time point, supernatants were harvested, and together with washes, centrifuged (1000g, 5 min), and 0.5 ml of resultant supernatant added to 4.5 ml Optifluor scintillation fluid (Packard) to determine ³H-activity in a liquid scintillation counter (Packard). The 1h ³H-adenine incubation followed by three washes yielded a labeling efficiency of 13%. ³H-adenine was expressed as percent of maximum release.

F-actin Epifluorescence Microscopy: To maintain endothelial monolayers under identical experimental conditions to our permeability assay (4,5), we directly stained and visualized the monolayers on polycarbonate filters (4,5,7). EC grown to confluence on filters were exposed to media, rTNF α , LPS or SPARC for 0.5, 1, 2, 4, and 6h. The monolayers were fixed (formaldehyde 3.7%, 20 min), permeabilized (Triton X-100 0.5% in HEPES buffer, 5 min), and stained with the F-actin probe, fluorescein-phalloidin (1.65 x 10⁻⁷M, 20 min) (Molecular Probes). The filters and their attached monolayers were mounted cell-side up on microscope slides and photographed through a Zeiss Axioskop 20 Microscope equipped for epifluorescence.

EC Numbers and Total Protein Concentrations in EC Monolayers: Methodologies for determining F- and G-actin pools involve fixation, permeabilization and extraction procedures which preclude cell counts and protein determinations on the same monolayers. Further, $TNF\alpha$ and LPS are each known to alter EC growth, to induce EC cytotoxicity, and to influence protein synthesis. Therefore, additional simultaneously plated EC were cultured under identical conditions as the monolayers to be assayed for the F- and G-actin pools. Postconfluent monolayers in the wells of 6-well plates were washed twice with phosphate-buffered saline (PBS), trypsin-detached as above, and counted in triplicate. The cells were centrifuged (600g, 10 min), again washed in PBS X 2, and lysed in lysing buffer Sodium dodecyl sulfate (SDS)

3%, dithiothreitol (DTT) 1mM, phenylmethylsufonyl fluoride (PMSF) $10\mu M$, ethylenediaminetetra acetic acid (EDTA) 1mM, Tris-HC1 50 mM, pH 8.0]. Lysates were assayed for protein concentration with the standard Bio-Rad DC Protein Assay (Bio-Rad Chem. Div., Richmond, CA). Total EC protein was used to standardize F- and G-actin measurements.

F-Actin Quantification by Spectrofluorometry: EC F-actin was fluorometrically measured as previously described (5). EC (5.8 x 10⁵ cells in 2 ml media) were seeded into the wells of 6well plates and cultured for 72h (37°C, 5% CO₂). The monolayers were exposed to varying concentrations of TNF α , LPS, SPARC, or medium alone for varying exposure times after which they were washed twice in a buffer (KCl 75mM, MgSO₄ 3mM, ethylene glycol tetraacetic acid (EGTA) 1mM, imidazole 10mM, DDT 0.2mM, aprotinin 10µg/ml, PMSF 0.1 mM) and fixed with formaldehyde 3.7% for 15 min. Monolayers were permeabilized (Triton X-100 0.2% in buffer, 5 min), stained with NBD-phallicidin (1.65 x 10⁻⁷M, 20 min), and extracted with ice cold methanol (overnight, -20 C). Staining and extractions were performed in the dark. Extracts were harvested into cuvettes and intraendothelial fluorescence was measured in a Perkin-Elmer LS30 Luminescence Spectrometer at room temperature at 465 nm excitation (10 nm slit) and 535 nm emission (10 nm slit) and expressed in arbitrary fluorescence units per mg total EC protein. Application of NBD-phallicidin to fixed permeabilized endothelial monolayers resulted in 78.8% penetration of the probe into cells and 99.98% of intracellular probe was extracted with a single methanol treatment as measured by fluorometry. In other experiments, monolayers again were pretreated with cycloheximide $50\mu g/ml$ 30 min prior to and throughout the standard rTNF α , LPS, or medium exposure.

Deoxyribonuclease (DNAse) 1 Inhibition Assay: EC G-actin was measured using the DNAse 1 inhibition assay as we have described (5). This assay utilizes the ability of monomeric G-actin to inhibit DNAse 1 hydrolysis of type 1 DNA into its component nucleotides. DNAse 1 obtained from bovine pancreas (Sigma) was dissolved at 10 mg protein/ml in 0.125M Tris-HCl (pH 7.5) 5mM MgCl₂, 2mM CaCl₂, 1mM NaN₃, and 0.1mM PMSF to increase its stability. The stock solution was then diluted 100X with 20mM imidazole, pH 7.5, 30mM NaCl₂, and 15% glycerol. The enzyme was freshly made every 2 h and kept on ice. Calf thymus DNA (Type 1, Sigma) was used as substrate for the DNAse 1. The fibrous DNA preparation was cut into fine pieces and suspended in 0.1M Tris-HCl (pH = 7.5), 4mM MgSO₄, 1.8mM CaCl₂ at a concentration of 80µg DNA/ml. The DNA was brought into solution by slow stirring at 4°C for 48h after which the solution was sequentially passed through 0.45 and $0.22\mu M$ pore size filters and stored at 4°C. The absorbance of the final substrate at 260 nm varied between 1.05 and 1.15. The DNAse 1 was mixed with DNA substrate in the cuvette of a Gilford Response II Spectrophotometer (Ciba Corning Diagnostics) and the slope of the linear portion of the ΔA 260 recorded. Purified bovine skeletal muscle actin (Sigma) was used as the G-actin standard to calibrate the assay. This preparation was > 90% G-actin by SDS PAGE, had a MW of 43,000, and was dissolved in 20 mM Tris-HCl (pH 7.5), 1 M Na Acetate, 1 mM CaCl₃, 1.0 mM ATP, 0.75 M guanidine HCl. DNAse 1 inhibitory activity within a range of 30-70% inhibition is directly proportional to monomeric G-actin. Endothelial monolayers grown in 6well plates were exposed to media or varying concentrations of rTNF α or LPS for varying exposure times. The monolayers were washed with Dulbecco's PBS (without Ca²⁺ and Mg²⁺)

and permeabilized with lysing buffer (HBSS with 1% Triton X-100, 2mM MgCl₃, 2mM EGTA, 0.2 mM ATP, 0.5 mM DTT, 0.1 mM PMSF) 0.5 ml/well for 5 min. The G-actin-containing supernatants then were tested in the DNAse 1 inhibition assay to generate inhibitory activities that fell on the linear portion of the standard curve (i.e., 30-70% inhibition). The inhibitory activities were interpolated to G-actin concentrations which were used to calculate G-actin expressed in μ g per mg total EC protein. In selected experiments, monolayers were preincubated with NBD-phallicidin 0.3 μ M for 3h prior to standard rTNF α , LPS, or media exposure. In other experiments, monolayers were pretreated with cycloheximide 50 μ g/ml 30 min prior to and throughout the rTNF α , LPS, or media exposures.

Quantitative Immunoblotting for Total Actin: Postconfluent monolayers grown in 6-well plates were exposed to rTNF α , LPS, or media alone for 6h. Cell counts and total protein concentrations were determined as described above. Cell lysates were solubilized in 2% SDS, 10% 2-mercaptoethanol, 10% glycerol, 20mM Na₂PO₄, and bromophenol blue 0.001% and boiled at 100°C for 10 min. Cell lysates and known concentrations (10-500ng) of pure bovine skeletal muscle actin standard (Sigma) were loaded onto a 10% SDS-PAGE vertical slab gel, electrophoresed, and transferred onto nitrocellulose. The nitrocellulose membrane blots were blocked (2% BSA, 0.2% Tween-20 in PBS, pH 7.4), rinsed, and incubated with murine antiavian actin IgG₁ kappa chain (ICN, Costa Mesa, CA) at 1:1000 dilution for 1hr at room The blots were washed 3 times and incubated with Protein G-Horseradish temperature. Peroxidase conjugate (BioRad, Richmond, CA) at 1:3000 dilution for 1 hr at room temperature. The blots were again washed, incubated with Enhanced Chemiluminescence substrates (Amersham, Arlington Heights, Il), and exposed to Kodak XAR X-Ray film for varying exposure times. Autoradiographs were scanned by laser densitometry (Molecular Dynamics, Sunnyvale, CA) and actin was quantified by interpolation from the actin standard curve. The correlation coefficients for all standard curves simultaneously run with each immunoblot were within range of 0.97 to 0.99. The actin concentrations were standardized to total EC protein and expressed as μg actin/mg total protein.

Actin Immunoprecipitation of ³⁵S-Methionine Labeled Endothelial Cells: Postconfluent endothelial monolayers grown in 6-well plates were washed and metabolically labeled with ³⁵Smethionine (Amersham, Arlington Heights, IL) in supplemented methionine-free DMEM (Gibco, Grand Island, NY) and stimulated with rTNF α , LPS, or media alone for 6h. Monolayers were washed in HBSS x 3, trypsin-detached, resuspended in DMEM with 10% FBS and the cells counted. The cells were then washed x 3 in HBSS (200g, 10 min, RT). The final cell pellets were aspirated dry and placed on ice. Cell pellets were lysed with 1 ml ice-cold lysis butter (3% SDS, 1% 2-mercaptoethanol, 50mM Tris-Hcl, pH 8.0, 10 μ M PMSF, 10 μ g/ml leupeptin, 1mM EDTA) and vortexted rigorously. For immunoprecipitation of actin, 200 μ l lysate was incubated with rabbit anti-avian actin polyclonal antibody (Sigma) in Na₂HPO₄ 50mM, pH 7.4, and deinonized H₂O used to bring the final volume up to 500 μ l. The samples were equilibrated 15 min/RT followed by an 18h incubation at 4°C. Actin:antibody complexes were then incubated with precleaned and prewashed Protein G (OmnisorbTM, Calbiochem, LaJolla, CA) for 30 min on ice with vortexing every 10 min. Each sample was microfuged (10,000 rpm, 5 min), the supernatants decanted, and the pellets washed and suspended in Tris buffered saline. The resuspended pellets were transferred to scintillation vials into Optifluor Scintillation fluid (Packard) and β counts obtained (³⁵S/¹⁴C window). ³⁵S-methionine incorporation into actin immunoprecipitates, i.e., new actin synthesis, was expressed as dpms per immunoprecipitate.

Filter Detachment Assay: Polycarbonate filters (25mm diameter, 0.4μ m pore size) (Nucleopore) which were gelatin impregnated and mounted in polystyrene chemotactic chambers (ADAPS) as described above, were inserted into the wells of 6-well plates. Each filter was seeded with 3.5 x 10⁵ EC in 3ml media and cultured for 72h (37°C, 5% CO₂). The postconfluent monolayers were either exposed for 6h to increasing concentrations of LPS or SPARC or to LPS 10ng/ml or medium alone for increasing exposure times. In selected experiments, EC were subjected to an ambient temperature of 4°C or serum deprivation as described above. The supernatant and one wash from each well were pooled and the cells counted in duplicate. The remaining monolayers were trypsin-detached (0.5mg/ml, 15min), and counted. After trypsin treatment, filters were stained with Coumassie's blue to document and wash]/[total cells in supernatant, wash, and filter] x 100%.

<u>Statistical Methods</u>: The mean response of each experimental group was compared to its simultaneous control by two-tailed student's t test. Analyses of variance were used to compare the mean responses among experimental and control groups.

B. <u>RESULTS:</u>

Role of TNF α (*In Vivo*): As a first test of the direct involvement of TNF α in acute pulmonary vascular endothelial injury, we administered human rTNF α to rabbits in 5 equivalent 200,000-unit bolus infusions every 0.5h over the first 2h of a 5h study period (i.e., 2.5 x 10⁵ units or 5 ug per kg BW) (2). At this dose, rTNF α -challenged animals displayed no significant granulocytopenia or pulmonary leukostasis as determined by both histological (alveolar septal wall granulocytes per high power field) and biochemical markers (myeloperoxidase activity per gm lung tissue) compared to saline-infused controls. rTNF α increased lung wet/dry weight ratios (a gravimetric index of pulmonary edema formation) (p<0.02) and pulmonary extravasation of ¹²⁵I-labeled rabbit serum albumin (p<0.01). Electron microscopy of lung sections from rTNF α -challenged rabbits demonstrated endothelial gap formation with extravasation of a preinfused permeability tracer through the gaps. These findings implicated the pulmonary vascular endothelial surface as a major target for TNF α and a paracellular route for movement of macromolecules across the endothelial barrier.

<u>Role of TNF α (*In Vitro*):</u> To study the mechanisms of cytokine-induced changes in pulmonary vascular endothelial permeability and/or injury on a cellular/molecular level, we studied the influence of human rTNF α on movement of ¹⁴C-BSA across confluent bovine PA EC monolayers (3).

rTNF α dose-dependently increased Dose-, Time-, and Temperature-Dependence: transendothelial ¹⁴C-BSA flux, which significantly (p < 0.02) correlated with the concentration of 24h rTNFα exposure (Fig. 1). Maximum ¹⁴C-BSA flux of 0.74 pmoles/h or 13.16% transfer of the tracer was seen after rTNF α exposure with 2000 u with subsequent plateauing. The effect of rTNF α (200 u/ml) on transendothelial ¹⁴C-BSA flux was also time-dependent (Fig. 2 and Only after an incubation time of $\geq 4h$ did rTNF α significantly (p<0.005) increase 3). transendothelial albumin flux (Fig. 2) and rTNF α pulse exposures as brief as 5 min induced significantly (p < 0.005) increased albumin transfer detectible at 6h (Fig. 3). Note: Unless otherwise stated, rTNF α 200 u/ml x 6h was used in subsequent experiments. To determine whether the change in ¹⁴C-BSA transfer was temperature-dependent, monolayers were exposed to rTNF α for 20 minutes at 4°C, 20°C, and 37°C (Fig. 4). rTNF α significantly (p<0.001) increased ¹⁴C-BSA transfer only at 37°C (Fig. 4A). To determine whether the initial rTNF α exposure and/or the subsequent \geq 4h lag time was temperature-dependant, monolayers were exposed to rTNFa for 20 minutes at 4°C, washed at 4°C and then incubated at either 4°C or 37°C (Fig. 4B). Monolayers incubated at 37°C after brief rTNFα exposure at 4°C displayed a significant (p < 0.005) increase in ¹⁴C-BSA transfer compared to simultaneous controls. These experiments suggest that the initial rTNF α -EC interaction was not temperature-dependent but that the subsequent cellular events were.

<u>Contribution of LPS</u>: To exclude any contribution of LPS, transendothelial ¹⁴C-BSA flux was assayed after exposure to rTNF α , rTNF α preincubated with neutralizing rabbit anti-human rTNF α polyclonal antibody (Knoll Pharmaceuticals/BASF K&K Corp., Whippany, NJ 07981), boiled rTNF α , a 100,000-fold greater concentration of *Escherichia coli* 0111:B4 LPS (1.0 ng/ml

media) (Difco Lab, Detroit, MI) than the maximum but undetectable LPS concentration that could be present in the rTNF α preparation, or media alone (Fig. 5). The cytokine preparation and media contained no detectible LPS activity by Limulus Amoebocyte Lysate Assay (LAL) (Whittaker, MA Bioproducts, Walkersville, MD). Only the fresh rTNF α in the absence of antisera significantly (p<0.001) increased transendothelial ¹⁴C-BSA flux. Although the changes in barrier function cannot be ascribed solely to LPS, a synergistic action between rTNF α and undetectable amounts of LPS cannot be excluded.

Prolonged Stimulus-to-Response Time: To address the stimulus-to-response lag time intrinsic to rTNF α -induced changes in endothelial barrier function, we studied the impact of rTNF α on EC proliferation, injury, and viability (Fig. 6-9). EC at subconfluent density were exposed to rTNFa or media alone for increasing time intervals, detached for trypan blue staining, and viable and nonviable EC counted (Fig. 6). rTNF α did not alter EC populations after 3,6, or 12h exposures compared to media controls. rTNF α exposures of \geq 24h significantly (p<0.02) inhibited EC growth and exposures of \geq 36h significantly (p < 0.04) decreased EC viability. To study the effect of rTNF α on EC proliferation, ³H-thymidine was added to subconfluent (Fig. 7) or postconfluent (Fig. 8) cultures in the presence or absence of rTNF α and ³H-thymidine incorporation serially determined. Under subconfluent conditions, $rTNF\alpha$ was not cytostatic at 3 or 6h but at ≥ 12 it was (p<0.001). Under postconfluent conditions, rTNF α had to effect on ³H-thymidine incorporation over 6h. Using a ⁵¹Chromium release assay as a measure of EC injury, no significant differences between rTNF α -exposed postconfluent monolayers and media controls were demonstrated over 24h (Fig. 9). These data demonstrate that rTNF α -induced alterations in endothelial barrier function seen at 4-6h cannot be ascribed to EC growth inhibition, cell injury or loss of cell viability. In fact, we have now demonstrated that after either 5 min or 6h TNF α exposures, endothelial barrier function returns to basal levels 16h after removal of rTNF α (Fig. 10). To address the potential issue of "unstirred layers" contributing to a prolonged stimulus-to-response time, the effects of rTNF α in agitated and nonagitated assay chambers were compared and no difference was found (Fig. 11).

Role of Protein Synthesis: We then determined whether the rTNF α -induced alterations in endothelial barrier function were protein synthesis-dependent (Fig. 12). Monolayers were preincubated with cycloheximide at concentrations (25-200 ug/ml media) that inhibited >95% protein synthesis as measured by ³⁵S-methionine incorporation into trichloroacetic acid-(TCA)precipitable protein. The monolayers were then exposed to rTNF α and assayed for ¹⁴C-BSA Prior protein synthesis inhibition failed to block rTNF α -induced alterations in transfer. endothelial barrier function, suggesting that de novo protein synthesis is not essential to the process. In fact, the protein synthesis inhibition at all cycloheximide concentrations tested significantly (p < 0.001) enhanced the rTNF α -induced increments in ¹⁴C-BSA flux. Similar results were demonstrated using actinomycin D (0.125-1.0 ug/ml) to inhibit mRNA synthesis (Fig. 12). In addition, we have shown that a subthreshold rTNF α exposure significantly (p < 0.01) protects against a subsequent suprathreshold rTNF α challenge (Fig. 13). These combined data are compatible with a rTNF α -induced protein synthesis-dependent process protective against loss of endothelial barrier function.

<u>Tracer Specificity</u>: To determine whether rTNF α -induced changes in endothelial barrier function were specific to albumin, assays were simultaneously performed using equimolar amounts of ¹⁴C-BSA (MW=66,000) and ³H-Dextran (average MW=70,000; Specific Activity=214 uCi/mg) (Amersham Corp., Arlington Heights, IL) (Fig. 14). Transfer of both ¹⁴C-BSA and ³H-Dextran were significantly (p<0.01) increased across endothelial monolayers exposed to all 3 rTNF α concentrations compared to the control and ¹⁴C-BSA flux was not significantly different than ³H-Dextran flux at all concentrations tested. Therefore, the effect of rTNF α on movement of macromolecules across the endothelium is not albumin-specific.

Actin Cytoskeletal Structure-Function Relationship: We have demonstrated that human rTNF α induces changes in endothelial barrier function temporally coincident with EC actin depolymerization (Fig. 15) and intercellular gap formation (Fig. 16) (4). Preloading EC with a selective probe that binds to and stabilizes F-actin against depolymerization protects against the rTNF α -induced G-actin incement (Fig. 17) and barrier dysfunction (Fig. 18). In contrast, prior protein synthesis inhibition greatly enhances them (Fig. 17 and 18). The rTNF α -induced changes in endothelial barrier function were clearly time-dependent. Coincident with these rTNF α -induced increments in permeability, we demonstrated thinning of cytoplasmic actin microfilaments and intraendothelial cell gap formation (Fig. 16). rTNFa increased the G-actin pool with a reciprocal, although delayed, decrease in the endothelial F-actin pool (Fig. 15). The rTNF α -induced decrement in F-actin could only be detected at 6h, with a maximal mean percent decrease of -7% (Fig. 15). rTNF α concentrations of up to 10,000u/ml failed to induce greater F-actin decrements (Fig. 19). This decrease in F-actin was greatly enhanced by prior protein synthesis inhibition, with a mean percent decrease of -44% (Fig. 20). This suggested that new actin synthesis might partially compensate for and mask the rTNF α -induced F-actin decrement. The rTNF α -induced increment in G-actin could be first detected at 2h, with a maximal percent mean increase of +51% (Fig. 17). This G-actin increment was reversible (Fig. 21). The Gactin increment was, in part, blocked by prior F-actin stabilization with phallicidin and, in part, by protein synthesis inhibition (Fig. 17). These findings suggested that the G-actin increment could be explained by both F-actin depolymerization and new actin synthesis. That $rTNF\alpha$ stimulated actin synthesis was further substantiated by an increased total actin pool (Fig. 22) as well as increase [³⁵S]-methionine incorporation into actin immunoprecipitates (Fig. 23).

The shift from the F- to G-actin pools was not perfectly reciprocal. The increment in G-actin both preceded and exceeded the decrement in F-actin. First, although the stoichiometries between phallicidin and actin monomers incorporated into microfilaments and between DNase I and G-actin are comparable, it is not possible to reconcile micrograms in the DNase I inhibition assay for G-actin with arbitrary fluorescence units in the fluorometric assay for Factin. Second, new actin synthesis contributes to the increment in G-actin without cost to the F-actin pool and possibly increases it. In the face of protein synthesis inhibition, the F-actin decrement was -44% (vs. -8%) and the G-actin increment was +13% (vs. +51%). Therefore, in the absence of new actin synthesis, the F-actin decrement was enhanced and the G-actin increment lessened, making the reciprocal changes more comparable. Third, actin pool measurements reflect mean changes over an entire monolayer, although area-to-area differences within the same monolayer may exist. Although cultured cells can behave differently from

experiment to experiment, the pretreatment baselines for mean $(\pm SE)$ F-actin for the three different data sets $(266.1\pm5.3,270.4\pm7.9, 272.4\pm7.44)$ were not significantly different, and the mean percent changes from baseline at 6h were -6.9, -8.7, and -8.3%, respectively. Similarly, there was no significant differences between the pretreatment baselines for mean $(\pm SE)$ G-actin $(168.7\pm6.52, 179.2\pm6.10, \text{ and } 173.5\pm5.00)$, and at 2h the mean percent changes from the baseline were +50.7, +36.4, and 44.8%, respectively. Therefore, the two assays were reproducible. More important than the absolute F- and G-actin values are their relative changes over time.

Effects of LPS on Endothelial Barrier Function: We studied the effect of native LPS derived from Escherichia coli 0111:B4 on movement of ¹⁴C-bovine serum albumin (BSA) across postconfluent bovine pulmonary artery EC monolayers (6). In the presence of serum, LPS augmented transendothelial ¹⁴C-BSA flux in a dose-, time-, and temperature-dependent manner. A 6h LPS exposure increased (p < 0.001) ¹⁴C-BSA flux compared to the media controls at concentrations ≥ 0.5 ng/ml with plateauing at ≥ 10 ng/ml (Fig. 24-see hatched bars). Continuous LPS (10 ng/ml) exposures of $\geq 2h$ increased (p<0.005) ¹⁴C-BSA flux with further increments at 4h and 6h (Fig. 25). We have also demonstrated that LPS exposure times as brief as 10min was sufficient to induce a biological response demonstrable only after a considerable lag time (Fig. 26). LPS exposure increased (p<0.0001) ¹⁴C-BSA flux compared to the isothermal media control at 37°C but not at 4°C (Fig. 27). That LPS-induced changes in endothelial barrier function are saturable, temperature-dependent, and can be elicited after very brief LPS exposures, is compatible with a receptor-mediated process. When bovine pulmonary arterial, aortic, and retinal microvascular EC monolayers were each exposed to LPS, ¹⁴C-BSA flux across all three endothelia increased (p < 0.001) compared to their respective media controls (Fig. 28)-i.e., extrapulmonary endothelia, including a microvascular endothelium that is part of the blood-brain barrier, responded similarly to LPS. Lastly, three cytotoxicity/viability assays of varying sensitivity and specificity were used to determine whether LPS-induced changes in barrier function could be ascribed to EC injury or death (Table 1). On the basis of trypan blue exclusion and LDH release, there was no loss of membrane integrity or viability in LPS-exposed monolayers. When the more sensitive but less stringent ⁵¹Cr detection system was used, LPS increased ⁵¹Cr release at 4 and 6h (p < 0.04). LPS induced ³H-adenine release at all time points tested suggesting a selective effect on nucleotide pools and transport. These data suggest that LPS can induce EC membrane perturbation without frank loss of viability.

Influence of Serum on LPS-Induced Changes in Endothelial Barrier Function: The LPSinduced changes in endothelial barrier function were profoundly serum-dependent (6). In the presence of 10% FBS, LPS concentrations as low as 0.5 ng/ml increased ¹⁴C-BSA flux (p < 0.001) (Fig. 24-see hatched bars). In the absence of FBS, only LPS concentrations $\geq 10^5$ ng/ml increased flux (p < 0.0001) (Fig. 24-see open bars). Therefore, the presence of serum increased EC sensitivity to the LPS stimulus by ~20,000-fold. Albumin flux across serum-starved monolayers was also measured after a 6h exposure to a fixed LPS concentration (10 ng/ml) or media, both in the presence of increasing FBS concentrations (Fig. 29). LPS increased (p < 0.04) ¹⁴C-BSA flux at serum concentrations $\geq 0.5\%$ reaching the maximum effect at 2.5%. At the intervening FBS concentrations, i.e., 0.5 to 2.5%, the LPS effect on flux increased with

increasing FBS concentrations.

Role of LPS-Binding Protein (LBP) in LPS-Induced Changes in Endothelial Barrier Function: The ability of LBP to support the LPS-induced EC response was studied (6). Albumin flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100 ng/ml without serum, media enriched with 10% FBS, LPS and FBS, LPS 100 ng/ml with an estimated equimolar concentration of rabbit LBP (1.2µg/ml), LPS with human LBP, or media with rabbit or human LBP alone, as well as species-matched protein controls (Fig. 30). LPS only in the presence of FBS or either species LBP increased transendothelial ¹⁴C-BSA flux (p < 0.002). When monolayers were exposed for 6h to a fixed LPS concentration (100 ng/ml) in the presence of varying rabbit LBP concentrations, the LPS/LBP effect increased as the LBP concentration increased (Fig. 31). The maximal LPS/LBP effect was seen in the presence of LBP 1.0µg/ml, a close approximation of the estimated equimolar concentration of LBP (MW=60 kDa) for LPS 100 ng/ml (estimated ave. MW=5,000 Da). These data are compatible with an optimal LPS:LBP ratio of 1:1 or 1 lipid A-binding site per LBP molecule. In the presence of human serum, anti-human LBP antisera blocked the LPS-induced endothelial barrier dysfunction (p<0.00005) (Fig. 32). Therefore, the single protein, LBP, could replace whole serum in the promotion of the LPS effect.

Role of sCD14 in LPS-Induced Changes in Endothelial Barrier Function: The ability of sCD14 to support the LPS-induced changes in the absence of serum or LBP was studied (6). Albumin flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100ng/ml without serum, LPS with human sCD14 50 ng/ml, LPS with human LBP 100 ng/ml, LPS with both sCD14 and LBP, sCD14 alone, LBP alone, sCD14 and LBP, as well as species-matched protein control (Fig. 33). LPS with sCD14 in the absence of serum or LBP increased ¹⁴C-BSA flux compared to either LPS or sCD14 controls (p<0.001). • When monolayers were exposed for 6h to a fixed LPS concentration (100 ng/ml) in the presence of varying sCD14 concentrations, the LPS/sCD14 effect increased as the sCD14 concentration increased (Fig. 34). Soluble CD14 concentrations \geq 25 ng/ml in the presence of LPS increased albumin flux compared to sCD14 alone (p<0.02). The LPS/sCD14 effect plateaued at sCD14 concentrations of \geq 500 ng/ml. LBP further enhanced the LPS-sCD14 induced increment compared to that seen after exposure to LPS-sCD14 alone (P=0.0003) (Fig. 33). Again, in the presence of human serum, antihuman CD14 antibody blocked the LPS-induced barrier dysfunction (p < 0.00005) (Fig. 32). In a serum-free reconstituted LPS-human LBP system, anti-CD14 antibody had no effect. In addition, HS immunodepleted of sCD14 with immobilized antihuman CD14 antibody failed to support the LPS effect (Fig. 35). This CD14-depleted HS contained suprathreshold concentrations of LBP and no anti-CD14 antibody. Therefore. immunoblockade with anti-CD14 antibody prevented LPS-induced changes only in the presence of serum - i.e., it targeted sCD14, not EC membrane-associated CD14. These studies demonstrate that sCD14 participates in and is even essential to LPS-induced changes in endothelial barrier function.

Kinetic Analysis of LPS-Induced Changes in Endothelial Barrier Function in the Presence of LBP, sCD14, or Both: LBP, sCD14, or both accessory molecules together, were studied for their ability to promote the LPS-induced changes in barrier function over time (Fig. 36) (6). LPS in the presence of either LBP or both LBP and sCD14 increased ¹⁴C-BSA flux compared to LPS alone at all time points \geq 1h (p<0.0005). LPS in the presence of sCD14 alone (50 or 500 ng/ml) did not increase ¹⁴C-BSA flux until 6h (p<0.0001). Therefore, the LPS-induced changes in endothelial barrier function in the presence of either LBP or sCD14 alone are kinetically distinct. Again, LPS in the presence of both LBP and sCD14 for 6h induced greater ¹⁴C-BSA flux than did LPS with either accessory molecule alone (p<0.01).

Structure-Function Relationship Between the LPS Molecule and Endothelial Function: To determine which portion of the LPS molecule was responsible for changes in endothelial barrier function, LPS derived from well-defined mutants as well as biochemically purified LPS components were employed. When LPS obtained from the *E. coli* J5 Rc mutant was compared on the basis of KDO content to LPS derived from the wild type, *E. coli* 0111:B4, there was no significant difference; deacylation of J5 reduced its activity (p < 0.01) (Fig. 37). LPS derived from series of *Salmonella minnesota* mutants with varying O-polysaccharide chain lengths all displayed similar bioactivities (Fig. 38). When a wide range of concentrations of purified *E. coli* lipid A and O-polysaccharide devoid of lipid A were compared on a dry weight-for-weight basis, lipid A induced dose-dependent increments in endothelial permeability whereas the O-polysaccharide preparation did not (Fig. 39). These data suggest that lipid A is the portion of the LPS molecule required to induce an EC response, that the acyl chains on lipid A are essential for the LPS-EC interaction, and O-polysaccharide of varying chain lengths does not interfere.

Actin Cytoskeletal Structure-Function Relationship: We have studied whether LPS regulates endothelial barrier function through actin reorganization (5). Postconfluent EC monolayers were exposed to LPS 10 ng/ml or media alone for up to 6h and evaluated for: (1) transendothelial ¹⁴Calbumin flux, (2) F-actin organization with fluorescence microscopy, (3) F-actin quantitation by spectrofluorometry and (4) monomeric G-actin levels by the DNAse 1 inhibition assay. LPS induced increments in ¹⁴C-albumin flux (p<0.001) (Fig. 25), G-actin (p<0.002) (Fig. 40), and intercellular gap formation at \geq 2-6h (Fig. 41). During this same time period the EC F-actin pool was not significantly changed (Fig. 40). LPS concentrations up to 10⁵ ng/ml all failed to significantly decrease F-actin (Fig. 42). Prior F-actin stabilization with phallicidin protected against the LPS-induced increments in G-actin (p=0.040) (Fig. 43) as well as changes in barrier function (p < 0.0001) (Fig. 44). Prior protein synthesis inhibition unmasked an LPS-induced decrement in F-actin (p=0.0044) (Fig. 45), blunted the G-actin increment (p=0.010) (Fig.43), and increased LPS-induced changes in barrier function (p < 0.0001) (Fig. 44). These data are compatible with LPS-induced endothelial F-actin depolymerization, intercellular gap formation, and barrier dysfunction. Over the same time period, LPS increased total actin (p=0.0017) (Fig. 46) and new actin synthesis (p=0.0063) (Fig. 47) which may be a compensatory EC response to LPS-induced F-actin disassembly.

Effect of LPS on EC Detachment: The effect of LPS on both transendothelial ¹⁴C-BSA flux and EC detachment were studied in parallel (Fig. 48-52). The dose (Fig. 48), time (Fig. 49), temperature (Fig. 50), and serum (Fig. 51) requirements for these two EC responses were

similar. Further, when EC detachment (%) was correlated with transendothelial ¹⁴C-BSA flux (pmol/hr), the correlation coefficient = 0.925 (Fig. 52).

SPARC - A Postulated Mediator for LPS-Induced Increments in Endothelial Permeability: Another potential mechanism for LPS-induced changes in EC shape and barrier function involves increased EC expression of SPARC (Secreted Protein Acidic and Rich in Cysteine) (7). SPARC, known also as osteonectin and BM-40, is a 43KDa glycoprotein constitutively secreted by EC at 1-3% of total secreted protein. Exposure of cells to picogram concentrations of LPS induces up to a 3-fold increase in expression of this protein in \geq 1.5h. Exogenous SPARC induces dose-dependent rounding of confluent EC in the absence of cell injury. We have now studied whether SPARC, through its ability to regulate EC shape, might regulate endothelial barrier function (7). We studied the effect of exogenous murine SPARC, which shares an amino acid sequence identity of 92% with bovine SPARC, on the movement of ¹⁴C-BSA across bovine EC monolayers (Fig. 53-59). SPARC increased ¹⁴C-BSA flux compared to controls (p < 0.02) in a dose-dependent manner at all concentrations $\geq 0.5 \ \mu g/ml$ (Fig. 53). At 15 $\mu g/ml$, exposure times of \geq 1h increased ¹⁴C-BSA flux (p<0.005) with further time-dependent increments (Fig. 54). The SPARC-induced changes in barrier function could be blocked (p < 0.01) by prior incubation with neutralizing rabbit anti-murine SPARC polyclonal antibody, trypsin digestion, and heat treatment (Fig. 55) but not by protein synthesis inhibition (Fig. 56). Thus, the SPARCinduced changes in endothelial barrier function could not be ascribed to either LPS contamination or, de novo synthesis of a second protein mediator. In addition, SPARC exposure was not associated with loss of cell viability (Table 2). Scanning electron microscopy of SPARCexposed monolayers revealed cell rounding and intercellular gaps (Fig. 57). F-actin fluorescence microscopy of SPARC-exposed, phalloidin-probed monolayers confirmed the rounded morphology and intercellular gap formation (Fig. 58 A-C). Prior F-actin stabilization with phallicidin protected against the SPARC-induced changes in barrier function (p=0.0001) (Fig. Therefore, SPARC induced specific dose-, time, and F-actin-dependent changes in 58D). endothelial barrier function temporally coincident with intercellular gap formation. Although LPS upregulates EC SPARC expression and SPARC can regulate EC shape and barrier function, a causal role for SPARC in LPS-induced barrier dysfunction has yet to be proven.

(7) <u>CONCLUSIONS:</u>

A. Summary of Completed Research

1. Influence of $TNF\alpha$ on Endothelial Barrier Function:

- a. TNF α increases transendothelial ¹⁴C-BSA flux in a dose-, time-, and temperaturedependent manner.
- b. $TNF\alpha$ -induced barrier dysfunction requires a brief exposure time but a prolonged stimulus-to-response lag time.
- c. The TNF α -induced changes in barrier function were saturable, were not protein synthesis-dependent, could not be ascribed to cytotoxicity or loss of EC viability, and was, in fact, reversible.
- d. The TNF α effect on transendothelial flux of macromolecules was not specific for albumin.
- e. A structure-function relationship exists between $TNF\alpha$ -induced changes in endothelial barrier function and EC actin reorganization. $TNF\alpha$ induces depolymerization of filamentous F-actin to soluble, monomeric G-actin and this actin depolymerization is a prerequisite to $TNF\alpha$ -induces barrier dysfunction.
- f. TNF α induces EC actin synthesis which may be a host cell compensatory response to TNF α -induced F-actin disassembly.

2. Influence of LPS on Endothelial Barrier Function:

- a. LPS induces dose-, time-, and temperature-dependent increments in endothelial permeability.
- b. LPS-induced barrier dysfunction requires a brief exposure time but a prolonged stimulusto-response lag time.
- c. The LPS effect was saturable, was not protein synthesis-dependent, and could not be explained through loss of EC viability.
- d. The LPS effect was profoundly serum-sensitive. The addition of low concentrations of serum increased the EC sensitivity to the LPS stimulus many fold.
- e. LBP and sCD14 could each satisfy this serum requirement.
- f. A causal structure-function relationship exists between LPS-induced loss of barrier function and EC actin depolymerization.
- g. LPS induces de novo actin synthesis in EC.

3. Influence of SPARC on Endothelial Barrier Function:

- a. SPARC induces changes in endothelial barrier function in a dose-, time-, and temperature-dependent manner.
- b. The SPARC effect was comparable for endothelia harvested from systemic and pulmonic large vessels as well as the blood-brain barrier microvasculature.
- c. The SPARC effect was F-actin dependent and protein synthesis-independent.

B. Recommendations for Future Work

Important overlap exists between $\text{TNF}\alpha$ and LPS and their abilities to regulate endothelial barrier function. These include a prolonged stimulus-to-response lag time, actin depolymerization, endothelial cell shape changes, and intercellular gap formation. A logical next step(s) will be to delineate intracellular effector mechanisms that are activated by $\text{TNF}\alpha/\text{LPS}$ that lead to actin depolymerization and intercellular gap formation i.e. opening of the paracellular pathway. These include established signal transduction pathways as well as phosphorylation of target protein substrates within the specialized apparatus found at the cell-cell (zonula adherence, zonula occludens) and cell-matrix (focal adhesions) interfaces. These should address the role of adherence junction and/or focal adhesion disassembly in intercellular gap formation and loss of barrier function.

(8) <u>REFERENCES PUBLISHED BY THE PRINCIPAL INVESTIGATOR RELEVANT TO</u> <u>THIS GRANT</u>:

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APPENDIX A: TABLES

TABLE 1: MEASUREMENTS OF ENDOTHELIAL CELL INJURY OR DEATH AFTER LPS EXPOSURE

_	· · · · · · · · · · · · · · · · · · ·	·, ·	,)
Ē	6)	(23) (23)	(01) (10)	(01)
<u>6h</u>	8.34 ± 1.31 6.79 ± 1.12	$\begin{array}{c} 2.22 \pm 0.81 \\ 4.40 \pm 0.99 \end{array}$	$\frac{13.00 \pm 0.50}{16.26 \pm 1.33*}$	6.70 ± 0.52 $50.20 \pm 1.72*$
(11)	(6) (6)	6)	(10)	99
41	7.48 ± 0.70 4.21 ± 0.40	$\begin{array}{c} 2.97 \pm 0.79 \\ 2.98 \pm 1.33 \end{array}$	8.76 ± 0.23 13.10 \pm 0.42*	5.77 ± 0.76 $36.39 \pm 1.07*$
(11)	(6) (9)	(6) (6)	(01)	(9) (9)
<u>2h</u>	$\begin{array}{c} 8.49 \pm 2.10 \\ 5.73 \pm 0.80 \end{array}$	$\frac{1.98}{3.30} \pm 0.77$	8.13 ± 0.28 7.60 ± 0.44	5.00 ± 0.89 $10.08 \pm 0.39*$
(11)	(6) (6)	(6) (6)	(01)	(9) (9)
11	$\begin{array}{c} 7.02 \pm 0.52 \\ 6.99 \pm 1.17 \end{array}$	$\begin{array}{c} 4.93 \pm 1.74 \\ 2.14 \pm 0.72 \end{array}$	$5.83 \pm 0.51 \\ 6.73 \pm 0.29$	4.02 ± 0.53 7.61 \pm 1.31*
TIME	TRYPAN BLUE EXCLUSION ¹ (% NONVIABLE) MEDIA CONTROL LPS (10 ng/ml)	LDH RELEASE (%) ² MEDIA CONTROL LPS (10 ng/ml)	⁵¹ CIIROMIUM RELEASE (%) ³ MEDIA CONTROL LPS (10 ng/ml)	³ II-ADENINE RELEASE (%) ⁴ MEDIA CONTROL LPS (10 ng/ml)

I Mean (\pm SE) percent cells failing to exlude trypan blue.

2 Mean (± SE) percent LDH release calculated as LDH in medium/LDH in medium + LDH in cell lysate x 100%;

3 Mean (± SE) percent ³¹Chromium release calculated as ³¹Chromium activity in supernatant/total ⁵¹Chromium activities

4 Mean (\pm SE) percent ³H-adenine release into the medium relative to maximum release from Triton X-100 solubilized cells; in supernatant and cell lysate x 100%.

* Significantly increased compared to simultaneous media controls at p < 0.04.

4

TABLE 2: EFFECT OF SPARC ON EC DETACHMENT AND CYTOTOXICITY

	Medium Control*	(n)	SPARC [†]	(n)	
Total EC Counts(x10 ⁶) per monolayer [‡]	1.11 <u>+</u> 0.07	(11)	1.05 <u>+</u> 0.09 ^s	(12)	
EC Detachment(%) [‡]	2.0 <u>+</u> 0.17	(6)	3.5 <u>+</u> 0.37 ¹	(6)	
Trypan Blue Exclusion ¹ (%nonviable)	2.45 <u>+</u> 0.26	(6)	2.56 <u>+</u> 0.26 ⁸	(6)	
LDH Release(%)**	3.58 <u>+</u> 0.55	(8)	3.65 <u>+</u> 0.85 [±]	(8)	
*Media controls were after 6h; † SPARC exposure was 15 μ g/ml for 6h; ‡Mean (+ SE) cell counts or percent detachment determined for postconfluent monolayers cultured on 25mm					

determined for postconfluent monolayers cultured on 25mm filters suspended in 6-well plates; $\$ significant compared to medium control; $\$ significantly increased compared to medium control at p=0.0028; $\|$ Mean (\pm SE) percent cells failing to exclude trypan blue; **Mean (\pm SE) percent LDH release calculated as [LDH in medium]/[LDH in medium + LDH in cell lysate] x 100%.

APPENDIX B: FIGURE LEGENDS

Figure 1: Dose-dependent effect of human rTNF α on transendothelial [¹⁴C]BSA flux. 1-h transfer of [¹⁴C]BSA across endothelial monolayers immediately after a 24-h exposure to increasing concentrations of rTNF α . Transendothelial [¹⁴C]BSA flux was expressed as pmol/h. Vertical bars represent means (+SE) transendothelial [¹⁴C]BSA flux. Mean (+SE) pretreatment baseline transendothelial [¹⁴C]BSA flux is represented by closed bar and mean (+SE) [¹⁴C]BSA flux across naked membrane filters by open bar.

Figure 2: Time-dependent effect of rTNF α on transendothelial [¹⁴C]BSA flux. 1-h transendothelial [¹⁴C]BSA flux in pmol/h immediately after increasing exposure times to rTNF α , 200 U/ml (cross-hatched bars) and simultaneous media controls (open bars). Vertical bars represent means (+SE) transendothelial [¹⁴C]BSA transfer. Mean (+SE) pretreatment baseline transendothelial [¹⁴C]BSA transfer is shown by closed bar. *Significantly increased compared with simultaneous media control at P < 0.005.

Figure 3: rTNF α **exposure time requirements.** 1-h transfers of [¹⁴C]BSA across endothelial monolayers all determined 6 h after onset of increasing rTNF α exposure times (200 U/ml) (cross-hatched bars) and their simultaneous media controls (open bars). Vertical bars represent means (+SE) transendothelial [¹⁴C]BSA transfer. Mean (+SE) pretreatment baseline transendothelial [¹⁴C] BSA transfer is shown by closed bar. *Significantly increased compared with simultaneous media control at P < 0.005.

Figure 4: Temperature-dependent effect of rTNF α on transendothelial [¹⁴C]BSA flux. *A*: transendothelial [¹⁴C]BSA transfer across monolayers exposed to rTNF α , 200 U/ml for 6 h at 37,20, and 4°C (\square) and their simultaneous media controls studied at respective temperatures (\square). *B*: endothelial monolayers were exposed to rTNF α , 4,000 U/ml for 20 min at 4°C, washed at 4°C, and after replacing the media, incubated at either 4 or 37°C (\square). Again, simultaneous control monolayers were performed with media alone under identical temperature conditions (\square). Simultaneous rTNF α or media treatment and incubations were also performed at 37°C. Vertical bars represent means (\pm SE) transendothelial [¹⁴C]BSA transfer. Mean (\pm SE) pretreatment baseline transendothelial [¹⁴C]BSA transfer is represented by closed bars (\blacksquare). *Significantly increased compared with media control at *P*<0.001.

Figure 5: Exclusion of endotoxin contamination. 1-h transfers of [¹⁴C]BSA across endothelial monolayers after 6-h exposures to rTNF α 200 U/ml, boiled rTNF α , rTNF α preincubated with neutralizing rabbit antihuman rTNF α polyclonal antibody, *E. coli* lipopolysaccharide 1ng/ml, or media alone. Vertical bars represent means (+SE) transendothelial [¹⁴C]BSA flux. Mean (+SE) pretreatment baseline transendothelial [¹⁴C]BSA flux is represented by closed bar. *Significantly increased compared with the simultaneous media control at *P*<0.001.

Figure 6: Viable and nonviable EC counts of postconfluent EC monolayers after exposure to $rTNF\alpha$ 200 U/ml media or media alone were serially determined over 72h in triplicate using trypan blue exclusion.

Figure 7: Effect of rTNF α on ³H-thymidine incorporation by subconfluent EC.

Figure 8: Effect of rTNF α on ³H-thymidine incorporation by postconfluent EC.

Figure 9: Effects of rTNF α on EC ⁵¹Cr release. ⁵¹Chromium-loaded EC were exposed to either rTNF α , 200 U/ml (- \blacksquare -) or media (- \Box -) for increasing time intervals up to 24 h. Mean (+SE) EC ⁵¹Chromium release was determined in rTNF α -exposed endothelial monolayers and media controls at each time point in triplicate. ⁵¹Chromium release was expressed as a percentage of maximum or 100% release from monolayers treated with Triton X-100.

Figure 10: Reversibility. 1-h transfers of [¹⁴C]BSA across endothelial monolayers at 0 h (baseline) and at time points after a 6-h exposure to rTNF α 200 U/ml or media control. Symbols represent means (+SE) transendothelial [¹⁴C]BSA transfer at each time point. *Significantly increased compared with simultaneous media control at P < 0.05.

Figure 11: Effect of agitation on rTNF α -induced endothelial barrier dysfunction.

Figure 12: Effect of protein synthesis inhibition on rTNF α -induced increments in transendothelial [¹⁴C]BSA flux. Transendothelial [¹⁴C]BSA transfer was determined across monolayers incubated with media alone, media containing cycloheximide 25,100, or 200 μ g/ml, media containing rTNF α , 200 U/ml, and cycloheximide pretreatment with subsequent rTNF α exposure. Vertical bars present means (+SE) transendothelial [¹⁴C]BSA transfer. Mean (+SE) pretreatment baseline transendothelial [¹⁴C]BSA transfer is represented by closed bar. *Significantly increased compared with rTNF α 200 U/ml without prior protein synthesis inhibition at P < 0.001.

Figure 13: Ability of rTNF α pre-exposure to protect vs subsequent rTNF α challenge.

Figure 14: Comparison of transendothelial transfer of two permeability tracers of similar molecular weight. 1-h transfers of equimolar amounts of [¹⁴C]BSA (open bars) and [³H]dextran (cross-hatched bars) across endothelial monolayers immediately after 6h exposures to rTNF α (0,20,200, and 2,000 U/ml). Vertical bars represent means (+SE) transendothelial transfers. Mean (+ SE) pretreatment baseline transendothelial transfers are also represented.

Figure 15: Time-dependent effect of rTNF- α on EC F- and G-actin pools. For F-actin studies, EC monolayers were exposed to 1,000 U/ml rTNF- α for increasing exposure times, fixed, permeabilized, incubated with 7-nitrobenz-2-oxa-1,3-diazole (NBD)-phallicidin, and extracted with methanol. Extracts were spectrofluorometrically assayed and F-actin concentrations at each time point expressed as means (+SE) fluorescent units per mg total EC protein (\circ). For G-actin measurements, similarly treated monolayers were permeabilized, and the supernatants were tested in a DNase I inhibition assay standardized with purified actin. Each point represents mean (+SE) G-actin in μ g per mg total EC protein (\bullet). *Significantly changed from pretreatment baseline at P < 0.01.

Figure 16: Fluorescein-phalloidin staining of endothelial monolayers grown on filters before and after rTNF- α exposure (1,000 U/ml). A: medium control (x500). B: medium control (x800). C: rTNF- α , 2 h (x500). D: rTNF- α , 2h (x800). E: rTNF- α , 6 h (x500). F: rTNF- α , 6 h (x800). After above treatments, monolayers were fixed, permeabilized, stained with fluorescein-phalloidin, and examined by epifluorescence microscopy. Small arrows point to cytoplasmic actin filaments; large arrows point to peripheral actin bands; arrowheads point to focal disruptions in actin lattice and intercellular gaps.

Figure 17: Effect of F-actin stabilization and protein synthesis inhibition on cytochalasin **B- and rTNF-\alpha-induced increments in G-actin.** EC monolayers were exposed to media, 0.5% DMSO, 0.3 μ M NBD-phallicidin, 50 μ g/ml cycloheximide, 20 μ g/ml cytochalasin B in DMSO, or 1,000 U/ml rTNF- α . Selected monolayers were pretreated with either NBD-phallicidin for 3h or cycloheximide for 0.5h before and throughout exposure to either cytochalasin B or rTNF- α . After 2h, monolayers were permeabilized, and supernatants were tested in the standardized DNase I inhibition assay. Each hatched bar represents mean (+SE) G-actin in μ g per mg total EC protein.

Figure 18: Effect of F-actin stabilization and protein synthesis inhibition on cytochalasin **B-** and rTNF- α -induced increments in transendothelial [¹⁴C]BSA flux. Endothelial monolayers grown on filters were pretreated with 0.3 μ M NBD-phallicidin or media alone for 3 h before either cytochalasin B (20 μ g/ml, 2 h) or rTNF- α exposure (1,000 U/ml, 6 h). In other experiments, monolayers were pretreated with 50 μ g/ml cycloheximide for 0.5 h before and throughout rTNF- α exposure. Simultaneous controls for media, 0.5% DMSO, 0.3 μ M NBDphallicidin, 50 μ g/ml cycloheximide, 20 μ g/ml cytochalasin B, and 1,000 U/ml rTNF- α are each represented. Hatched bars represent means (+SE) transendothelial [¹⁴C]BSA flux in pmol/h. Mean (+SE) pretreatment baseline transendothelial [¹⁴C]BSA transfer is shown by solid bar.

Figure 19: Dose-dependent effect of rTNF- α on EC F- and G-actin pools. Endothelial monolayers were exposed to increasing concentrations of rTNF- α for exposure times at which maximum changes in F-actin (6 h) and G-actin (2 h) occur. Each symbol represents mean (+SE) F-actin in fluorescent units per mg total protein ($^{\circ}$) or mean (+SE) G-actin in μ g per mg total protein ($^{\bullet}$). *Significantly changed from simultaneous media control at P < 0.005.

Figure 20: Effect of protein synthesis inhibition on rTNF- α -induced decrements in EC Factin. EC monolayers were exposed for 6h to media, 50μ g/ml cycloheximide, or 1,000 U/ml rTNF- α , or to cycloheximide for 0.5h before and throughout a 6h rTNF- α exposure. Monolayers were fixed, permeabilized, incubated with NBD-phallicidin, and extracted with methanol. Extracts were fluorometrically assayed and F-actin concentrations expressed as means (+SE) fluorescent units per mg total EC protein.

Figure 21: Reversibility of rTNF α -induced increments in the G-actin pool.

Figure 22: Quantitative immunoblotting for total EC actin. Endothelial monolayers were exposed to 1,000 U/ml rTNF- α or media alone for 6 h. Endothelial extracts were

electrophoresed on SDS-polyacrylamide gels, transferred onto nitrocellulose, incubated with murine anti-avian actin immunoglobulin G_1 followed by protein G-horseradish peroxidase conjugate with enhanced chemiluminescence substrates, and exposed to film. A simultaneous standard curve with known concentrations of pure bovine skeletal muscle actin was run on each gel. Autoradiographs were scanned by laser densitometry, and total actin extracted from each monolayer was quantified by interpolation from the actin standard curve.

Figure 23: Effect of rTNF- α on total actin pool and new actin synthesis. *A.* quantitative immunoblotting was performed on extracts obtained from rTNF- α (1,000 U/ml)-exposed monolayers as well as simultaneous media controls. Total EC cell actin was expressed as μg actin per mg total protein. *B*: [³⁵S]methionine-labeled EC were stimulated with rTNF- α (1,000 U/ml) or media alone for 6 h, immunoprecipitated with anti-actin antibody, and the actin immunoprecipitates counted for ³⁵S activity. [³⁵S]methionine incorporation into actin immunoprecipitates, i.e., new actin synthesis, is expressed as DPMs per immunoprecipitate.

Figure 24: Dose-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux. Cross-hatched bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after 6h exposures to increasing concentrations of LPS in the presence of 10% FBS. Open bars represent mean (\pm SE) ¹⁴C-BSA flux across serum-starved monolayers exposed to increasing concentrations of LPS for 6h in the absence of FBS. Mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux across both standard and serum-starved monolayers as well as mean (\pm SE) ¹⁴C-BSA flux across naked filters (stippled bar) are also shown. n indicates the number of monolayers studied in the presence of FBS and (n) is the number of monolayers studied in serum-free conditions. * = significantly increased compared to the simultaneous media control at p < 0.001; ** = significantly increased compared to the serum-free media control at p < 0.0001.

Figure 25: Time-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after increasing exposure times to LPS 10 ng/ml (cross-hatched bars) and simultaneous medium controls (open bars). Mean (\pm SE) pretreatment baseline is shown by the closed bar.

Figure 26: LPS Exposure Time Requirements. Mean (\pm SE) transendothelial ¹⁴C-BSA flux across endothelial monolayers all determined 6h after onset of increasing LPS exposure times (10ng/ml, 10min-6h) (cross-hatched bars) and their simultaneous media controls (open bars). Mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux is shown by the closed bar. * = significantly increased compared with simultaneous media control at p < 0.03.

Figure 27: Temperature-dependence of LPS-induced barrier dysfunction.

Figure 28: Relative Responsiveness of Pulmonary Artery, Aortic, and Retinal Endothelia to LPS. Endothelial monolayers isolated from bovine pulmonary artery, aorta, and retina were exposed to LPS 10ng/ml for 6h. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after LPS exposure (cross-hatched bars) or simultaneous media

controls (open bars). Mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux is shown by the closed bars. *= significantly increased compared to the simultaneous medium control at p < 0.001.

Figure 29: Serum-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux. Transendothelial ¹⁴C-BSA flux across serum-starved monolayers exposed to LPS 10 ng/ml or media for 6h in the presence of increasing FBS concentrations. Each symbol represents mean (\pm SE) transendothelial ¹⁴C-BSA flux in the presence of a specific FBS concentration. Mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux is shown by the open bar. Insert contains n values for both LPS-exposed monolayers and the media controls in the presence of increasing FBS concentrations. * = significantly increased compared to the simultaneous media control containing an equivalent FBS concentration at p < 0.045.

Figure 30: Effect of LPS-Binding Protein (LBP) on LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100 ng/ml in serum-free media, media enriched with 10% FBS, LPS 100 ng/ml in media with 10% FBS, LPS 100 ng/ml with an equimolar concentration of rabbit LBP ($1.2 \mu g/ml$) in serum-free media, LPS 100 ng/ml with an equimolar concentration of human LBP in serum-free media, LPS 100 ng/ml with human Creactive protein (CRP) ($1.2 \mu g/ml$), or serum-free media with either rabbit or human LBP or CRP, alone. Vertical cross-hatched bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and mean (\pm SE) pretreatment baseline is shown by the closed bar.

Figure 31: Dose-Dependent Effect of LBP on LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100 ng/ml in serum-free media, LPS 100 ng/ml in the presence of increasing concentrations of rabbit LBP, or rabbit LBP (3μ g/ml) alone. Vertical cross-hatched bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and the mean (\pm SE) pretreatment baseline is shown by the closed bar. * = significantly increased compared to LPS in the absence of LBP at p < 0.002.

Figure 32: Effect of Anti-LBP and Anti-CD14 Immunoblockade on LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serumstarved monolayers exposed for 6h to media enriched with 10% human serum (HS), LPS 100ng/ml in media with 10% HS, LPS in media with 10%HS in the presence of anti-human LBP antibody (1 mg/ml), LPS 100 ng/ml in media with 10% HS in the presence of anti-human CD14 antibody (10 μ g/ml), LPS 100 ng/ml and human LBP 1.2 μ g/ml in serum-free media, LPS 100 ng/ml and human LBP 1.2 μ g/ml in serum-free media in the presence of anti-human CD14 antibody, LPS 100 ng/ml and human sCD14 100 ng/ml in serum-free media, LPS 100 ng/ml and human sCD14 in serum-free media in the presence of anti-human CD14 antibody or their species-matched controls alone. Vertical cross-hatched bars represent mean (±SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and mean (+SE) pretreatment baseline is shown by the closed bar.

Figure 33: Effect of sCD14 on LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100ng/ml serum-free media, human sCD14 50 ng/ml, LPS 100 ng/ml with sCD14 50 ng/ml, LPS 100 ng/ml with human decay accelerating factor (DAF) 50 ng/ml, LPS 100 ng/ml with bovine folate binding protein (FBP) 50 ng/ml, human LBP 100 ng/ml, LPS 100 ng/ml, sCD14 and LBP, and LPS with both sCD14 and LBP. Vertical cross-hatched bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and mean (\pm SE) pretreatment baseline is shown by the closed bar.

Figure 34: Dose-Dependent Effect of sCD14 on LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serum-starved monolayers exposed for 6h to serum-free media, LPS 100 ng/ml increasing sCD14 concentrations, or these same sCD14 concentrations in the presence of LPS 100 ng/ml. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and mean (\pm SE) pretreatment baseline is shown by the closed bar. * = significantly increased compared to sCD14 in the absence of LPS at p < 0.02; ** = significantly increased compared to the media control at p < 0.002.

Figure 35: Effect of CD14-Depletion on Serum-Dependent LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serumstarved monolayers exposed for 6h to media enriched with 10% HS, LPS 100 ng/ml in media with 10% HS, media with 10% CD14-depleted HS from the same donor, or LPS 100 ng/ml with 10% CD14-depleted HS. The LBP concentrations in the HS and CD14-depleted HS were 27 μ g/ml and 23 μ g/ml, respectively. Vertical bars represent mean (+SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately following stimulation and the mean (+SE) pretreatment baseline is shown by the closed bar.

Figure 36: Kinetic Analysis of Accessory Molecule(s) Regulation of LPS-Induced Changes in Endothelial Barrier Function. Transendothelial ¹⁴C-BSA flux was determined across serumstarved monolayers immediately after increasing exposure times to serum-free media, LPS 100 ng/ml serum-free media, LPS with LBP (1.2 μ g/ml), LPS with sCD14 (50 or 500 ng/ml), and LPS with both LBP and sCD14 (50 ng/ml). Each symbol represents the mean (+SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after increasing exposure times.

Figure 37: Effect of LPS, rough LPS and deacylated LPS on endothelial barrier function.

Figure 38: Effect of wild type and mutant *S. minnesota* LPS with varying lengths of O-polysaccharide side chain on endothelial barrier function.

Figure 39: Effects of Lipid A and O-polysaccharide LPS fractions on endothelial barrier function.

Figure 40: Time-Dependent Effect of LPS on the EC F- and G-Actin Pools. A. For F-actin studies, endothelial cell monolayers were exposed to LPS 10ng/ml ($\bullet - \bullet$) or media alone ($\bigcirc - \bigcirc$) for increasing exposure times, fixed, permeabilized, incubated with NBD-phallicidin, and extracted with methanol: The extracts were spectrofluorometrically assayed and F-actin concentrations at each time point expressed as mean (+SE) fluorescent units per mg total

endothelial cell protein. B. For G-actin measurements, monolayers were exposed to LPS 10ng/ml ($\bullet - \bullet$) or media alone (O-O) for increasing exposure times, permeabilized, and the supernatants tested in DNAse 1 inhibition assay standardized with pure actin. Each point represents the mean (\pm SE) G-actin in μ g per mg total endothelial cell protein. n, the number of control or LPS-exposed monolayers studied, is indicated by the (numeral) next to each symbol. *=significantly increased compared to the simultaneous media control at p < 0.002.

Figure 41: Fluorescein-Phalloidin Staining of LPS-Exposed Endothelial Monolayers. Endothelial monolayers grown on filters were exposed to media or LPS (10ng/ml) for increasing exposure times. the monolayers were fixed, permeabilized, stained with fluorescein-phalloidin, and examined by epifluorescence microscopy. A. medium control; B. LPS, 2h; C. and D. LPS, 6h. Arrows in A point to cycloplasmic actin filaments, arrows in B and C point to intercellular gaps, and arrows in D point to peripheral actin bands. (Magnification 400X).

Figure 42: Dose-Dependent Effect of LPS on the EC F- and G-Actin Pools. Endothelial monolayers were exposed to increasing concentrations of LPS for 6h. Each symbol represents mean (\pm SE) F-actin in fluorescent units/mg total protein ($\bigcirc-\bigcirc$) or mean (\pm SE) G-actin in μ g/mg total protein ($\bigcirc-\bigcirc$). n, the number of monolayers studied, is indicated by the (numeral) next to each symbol. *=significantly changed from the simultaneous media control at p < 0.03.

Figure 43: Effect of F-Actin Stabilization and Protein Synthesis Inhibition on LPS-Induced Increments in G-Actin. EC monolayers were exposed to media, NBD-phallicidin 0.3μ M, cycloheximide 50μ g/ml, or LPS 10ng/ml. Selected monolayers were pretreated with either NBD-phallicidin for 3h or cycloheximide for 0.5h, prior to and throughout exposure to either media or LPS. After 2h, monolayers were permeabilized and the supernatants tested in the standard DNAse 1 inhibition assay. Each cross-hatched bar represents the mean (+SE) G-actin in μ g per mg total EC protein.

Figure 44: Effect of F-Actin Stabilization and Protein Synthesis Inhibition on LPS-Induced Increments in Transendothelial ¹⁴C-BSA Flux. EC monolayers grown on filters were pretreated with NBD-phallicidin 0.3μ M or media alone for 3h prior to and throughout either LPS (10ng/ml, 6h) or media exposures. In other experiments, monolayers were pretreated with cycloheximide (50 μ g/ml) for 0.5h prior to and throughout LPS exposure. Simultaneous control for media, NBD-phallicidin (0.3μ M), cycloheximide (50 μ g/ml), and LPS (10ng/ml), are each represented. Cross-hatched bars represent mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux in pmol/h. The mean (\pm SE) pretreatment baseline transendothelial ¹⁴C-BSA flux is shown by the closed bar.

Figure 45: Effect of Protein Synthesis Inhibition on the LPS-Induced Changes in EC F-Actin. EC monolayers were exposed for 6h to media, cycloheximide $50\mu g/ml$, LPS 10ng/ml, or cycloheximide for 0.5h prior to and throughout a 6h LPS exposure. The monolayers were fixed, permeabilized, incubated with NBD-phallicidin, and extracted with methanol. The extracts were fluorometrically assayed and F-actin concentrations expressed as mean (+SE) fluorescent units per mg total EC protein.

Figure 46: Quantitative Immunoblotting for Total EC Actin. Endothelial extracts obtained

from LPS-exposed and medium control monolayers were electrophoresed on SDS polyacrylamide gels, transferred onto nitrocellulose, incubated with murine anti-avian actin IgG_1 followed by Protein G-HRP conjugate with enhanced chemiluminescence substrates and exposed to film. A simultaneous standard curve with known concentrations of bovine skeletal muscle actin were run on each gel. Autoradiographs were scanned by laser densitometry and actin quantified by interpolation from the actin standard curve.

Figure 47: Effect of LPS on the Total Actin Pool and New Actin Synthesis. A. Quantitative immunoblotting was performed on extracts obtained from LPS (10ng/ml) exposed monolayers as well as simultaneous media controls. Total EC actin was expressed as μg actin/mg total protein. B. ³⁵S-methionine-labeled EC were stimulated with LPS 10ng/ml or media alone for 6h, immunoprecipitated with anti-actin antibody, and the actin immunoprecipitates counted for ³⁵S-activity. ³⁵S-methionine incorporation into actin immunoprecipitates, i.e., new actin synthesis, is expressed as dpm's/immunoprecipitate.

Figure 48: Dose-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux and EC Detachment. A. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after 6h exposures to increasing concentrations of LPS (cross-hatched bars). B. Vertical bars represent mean (\pm SE) percent EC detachment from gelatin-impregnated filters after 6h exposures to increasing concentration of LPS. n for each experimental group notated in each bar. *= significantly increased compared to the simultaneous medium control at p < 0.001.

Figure 49: Time-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux and EC Detachment. A. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h immediately after increasing exposure times to LPS 10ng/ml (cross-hatched bars) or media alone (open bars). B. Vertical bars represent mean (\pm SE) percent EC detachment after increasing exposure times to LPS 10ng/ml (cross-hatched bars) or media alone (open bars). n for each group notated in each bar. *= significantly increased compared to the simultaneous media controls at p < 0.03.

Figure 50: Temperature-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux and <u>EC Detachment.</u> A. Mean (\pm SE) transendothelial ¹⁴C-BSA flux across in pmol/h monolayers exposed to LPS 10ng/ml (cross-hatched bars) or media alone (open bars) for 6h at 4°C or 37°C. B. Mean (\pm SE) percent EC detachment after exposure to LPS 10ng/ml (cross-hatched bars) or media alone (open bars) for 6h at 4°C or 37°C. n for each experimental group is notated in each bar. * = significantly increased compared to the simultaneous isothermal medium control at p < 0.0001.

Figure 51: Serum-Dependent Effect of LPS on Transendothelial ¹⁴C-BSA Flux and EC Detachment. A. Vertical bars represent mean (\pm SE) transendothelial ¹⁴C-BSA flux in pmol/h after exposure to LPS 10ng/ml (cross-hatched bars) or media alone (open bars) for 6h in the presence or absence of FBS. B. Mean (\pm SE) percent EC detachment after exposure to LPS 10ng/ml (cross-hatched bars) for 6h in the presence or absence of FBS. The n for each experimental group is notated within each bar. * = significantly increased compared to the simultaneous medium control at p < 0.0001.

Figure 52: Correlation Between Endothelial Barrier Function and EC Detachment. The mean values from the experimental and control groups found in Figures 1,2,6, and 8 were used to plot.

Figure 53: Dose-Dependent Effect of SPARC on Transendothelial Flux of ¹⁴C-BSA. Vertical bars represent mean (\pm SE) transendothelial flux of ¹⁴C-BSA in pmol/h. Baseline ¹⁴C-BSA flux is shown by a closed bar in each panel. n indicates number of monolayers studied. *indicates a significant increase compared to the simultaneous media control at p<0.02.

<u>Figure 54: Time-Dependent Effect of SPARC on Endothelial Barrier Function.</u> ¹⁴C-BSA flux immediately after increasing exposure times to SPARC ($15\mu g/ml$) (cross-hatched bars) and simultaneous controls (open bars) in the absence of FBS.

Figure 55: Exclusion of contribution of LPS to SPARC-induced changes in endothelial barrier function. Ability of anti-SPARC antibody, trypsin proteolysis, or heat treatment to abort the SPARC effect.

Figure 56: Effect of prior protein synthesis inhibition on SPARC-induced changes in endothelial barrier function.

Figure 57: Effects of SPARC on EC Morphology. SEM of postconfluent monolayers grown on filters in assay chambers after exposure to SPARC ($15\mu g/ml$ for 6h) (B and C) or to medium alone (A). A. Control monolayers were in tight apposition and displayed the typical cobblestone appearance (x 2000). B. Monolayers exposed to SPARC remained attached to matrix-coated filters (closed arrowheads) but exhibited extensive interendothelial gaps (closed arrows). Occasional cells assumed an extremely rounded phenotype (open arrows) (x 2000). C. Selected cells (open arrows) became rounded with marked separation from neighboring cells and displayed numerous slender processes (small arrowheads) and extensive blebs (small closed arrows) (x 4000).

Figure 58: SPARC-Induced Actin Reorganization and Changes in Endothelial Barrier Function. Endothelial monolayers grown on filters were exposed to medium (A) or SPARC $(15\mu g/ml \text{ for } \ge 2h)$ (B and C). The monolayers were fixed, rendered permeable, and stained with fluorescein-phalloidin (x800). A. Monolayers exposed to medium alone contained continuous transcytoplasmic actin cables and exhibited tight cellular apposition without intercellular gaps. B and C. Exposures of SPARC $\ge 2h$ induced intercellular gaps (closed arrows). C. Note circumferential F-actin redistribution (small closed arrows). D. Endothelial cell monolayers grown on filters were pretreated with NBD-phallicidin (0.3 μ M) or media alone for 3h prior to and throughout either a 6h exposure to SPARC or medium alone in the absence of FBS. Vertical bars represent mean (\pm SE) transendothelial flux of ¹⁴C-BSA. Baseline (\pm SE) ¹⁴C-BSA flux is shown by the closed bar.

APPENDIX C: FIGURES


Figure1



 $rTNF\alpha$ Incubation Time (Hours)



 $rTNF\alpha$ Exposure Time







TIME (HOURS)

17











.-13







rTNF& Units/mL

















Fig. 7. Quantitative immunoblotting for total endothelial cell actin. Endothelial monolayers were exposed to 1,000 U/ml rTNF- α or media alone for 6 h. Endothelial extracts were electrophoresed on SDS-polyacrylamide gels, transferred onto nitrocellulose, incubated with murine anti-avian actin immunoglobulin G₁ followed by protein G-horseradish peroxidase conjugate with enhanced chemiluminescence substrates, and exposed to film. A simultaneous standard curve with known concentrations of pure bovine skeletal muscle actin was run on each gel. Autoradiographs were scanned by laser densitometry, and total actin extracted from each monolayer was quantified by interpolation from actin standard curve.









LPS Exposure time (hours)

14C Albumin Flux (pmol/hr)



LPS Exposure Time



14C Albumin flux (pmol/hr)



(14/lomq) xult nimudlA O4r



14C Albumin flux (pmol/hr)

















14C

Albumin flux (pmol/hr)


i

0.12 7



(14/lomq) xult nimudIA 34r



(14C Albumin flux (pmol/hr)



















Fig. 7. Quantitative immunoblotting for total endothelial cell actin. Endothelial extracts obtained from LPS-exposed and medium control monolayers were electrophoresed on SDS polyacrylamide gels, transferred onto nitrocellulose, incubated with murine anti-avian actin IgG, followed by protein G-HRP conjugate with enhanced chemilumi-

nescence substrates, and exposed to film. A simultaneous standard curve with known concentrations of bovine skeletal muscle actin were run on each gel. Autoradiographs were scanned by laser densitometry and actin quantified by interpolation from the actin standard curve.







Figure 49

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Figure 56





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