Na⁺/HCO₃⁻ Cotransport in Normal and Cystic Fibrosis Intestine

Ursula Seidler, Oliver Bachmann, Petra Jacob, Stephanie Christiani, Irina Blumenstein, Heidi Rossmann

1st Department of Medicine, University of Tübingen. Tübingen, Germany

Summary

In a search for the HCO₃⁻ supply mechanisms to the enterocyte we cloned and sequenced an intestinal subtype of the Na⁺HCO₃⁻ cotransporter isoform I (dNBC1), which turned out to be identical to the pancreatic NBC1 subtype (pNBC1). Within the intestine, we found particularly high NBC1 expression levels in the duodenum and proximal colon. Experiments with stripped rabbit duodenum in Ussing-chambers revealed that Na⁺HCO₃⁻ cotransport (NBC) and CO₂ hydration/Na⁺/H⁺ exchange were equally important duodenal HCO_3^- supply pathways and were both upregulated during cAMP-mediated secretion. In the proximal colon, however, HCO_3^{-1} secretion was low but NBC1 expression even higher than in the duodenum. Ussing-chamber experiments with an NBC-specific inhibitor revealed that NBC, coupled to basolateral CI $/HCO_3^-$ exchange, was an important alternative Cl supply pathway to Na^+K^+2Cl cotransport (NKCC) during cAMP-stimulated colonic C1 secretion.

To investigate the functional integrity of anion uptake pathways in the absence of cystic fibrosis transmembrane conductance regulator (CFTR), we fluorometrically assessed NBC and NKCC transport rates and cell volume before and during forskolin-stimulation in isolated colonic crypts from normal and CFTR (-/-) mice. Although forskolin stimulation decreased cell volume only in normal, not in CFTR (-/-) crypts, it activated NBC and NKCC to a similar degree in both normal and CFTR (-/-) crypts. We conclude that, depending on the intestinal segment, NBC1 plays an important role in basolateral HCO₃⁻ or Cl⁻ uptake. Expression and activation by cAMP is preserved in CFTR (-/-) intestine.

In cystic fibrosis (CF) patients and CFTR (-/-) mice, intestinal, pancreatic and biliary HCO₃⁻ secretion is impaired. In all segments of *in vitro* CFTR (-/-) mouse intestine, we found a reduction in basal HCO₃⁻ secretory rate and a striking absence of a HCO₃⁻ secretory response to all tested physiologic agonists [1]. small intestinal peptic Since damage, malabsorption, and obstruction of biliary and pancreatic ducts as well as the intestinal lumen in CF patients may, at least in part, be secondary to the HCO_3^- secretory defect, we further investigated intestinal HCO₃⁻ transport pathways in normal and CF epithelium. The curious observation was that despite the molecular or functional presence of non-CFTR

anion channels in the intestine of CFTR (-/-) mice, and despite the fact that HCO₃⁻ secretion could be stimulated in CFTR (-/-) intestine using tools to alter enterocyte membrane potential, no physiologic stimulus was found that caused significant HCO₃⁻ secretion. Recent investigations have revealed a plethora of secondary defects in cells not expressing the CFTR protein, including defective expression and/or regulation of ion transport proteins [2-8]. We therefore speculated that downregulation of expression or defective regulation of basolateral HCO_3^{-1} uptake mechanisms may intensify the HCO_3^- secretory defect in CF intestine and possibly have secondary effects on the intracellular pH (pH_i) and volume regulatory or absorptive function of CF enterocytes. The HCO₃⁻ supply pathways during intestinal HCO_3^- secretion were ill defined, but some functional evidence existed that a stilbenesensitive transport pathway, possibly а Na⁺HCO₃⁻ cotransporter, was involved in HCO_3^{-} secretion in the duodenum, the intestinal segment with the highest HCO_3^- secretory rate [9, 10, 11].

We therefore aimed to 1) functionally identify the major base uptake mechanisms in isolated duodenal basolateral membranes, 2) clone and sequence potential intestinal base uptake mechanisms and demonstrate their physiological function in the HCO₃⁻ secretory process and 3) study their expression levels and regulation in normal and CF intestine.



Figure 1. A) pH-gradient driven ²²Na-uptake into duodenal BLMvs in the presence and absence of HCO_3^- , with and without DMA. B) High-stringency Northern Blot analysis of about 10 µg once purified poly (A+) RNA from rabbit gastric mucosa, duodenal mucosa, ileal mucosa, colonic mucosa, and kidney cortex. A glycerol aldehyde trisphosphate dehydrogenase (GAPDH) probe confirms loading of intact RNA in all lanes.

Na⁺HCO₃⁻ Cotransport in the Duodenum

Functional identification of the major base uptake mechanisms in duodenal basolateral membrane vesicles. Previous experiments had demonstrated that duodenal HCO_3^- secretion [9, 11] and base uptake into isolated duodenal cells [12, 13, 14] is Na⁺-dependent. Thus, the investigation of pH-gradient driven Na⁺ uptake should assess all physiological base uptake mechanisms in the duodenocyte. Figure 1A shows ²²Na⁺ uptake into rabbit duodenal basolateral membrane vesicles (BLMvs) in the absence and presence of HCO_3^- , with and without dimethyl-amiloride (DMA), an inhibitor of Na^+/H^+ exchange, and in the absence and presence of a pH-gradient. It is obvious that pH_i -dependent $^{22}Na^+$ uptake HCO₃⁻-dependent, consists of DMA a insensitive one (Na⁺HCO₃⁻ cotransport) and a DMA-sensitive, $HCO_3^$ independent one exchange). Consistent with (Na^+/H^+) this was the finding 4,4'concept that diisothiocyanatostilbene-2,2'-disulphonic acid (DIDS) inhibited the HCO3⁻ dependent, DMA insensitive, pH-gradient driven²²Na⁺ uptake, whereas more than 80% of DMA-sensitive, HCO₃⁻-independent ²²Na⁺ uptake was inhibited by 1 uM Hoe 642 (Hoechst compound 642) and therefore mediated by the NHE1 isoform of the Na⁺/H⁺ exchanger (NHE) gene family (data shown in [15]).

Molecular characterization and expression levels of duodenal basolateral HCO3⁻ Having transporters. obtained functional evidence for the presence of a Na⁺HCO₃⁻ cotransporter in the basolateral membrane of rabbit duodenocytes, we wanted to establish its molecular identity. We therefore cloned and sequenced cDNA fragments for all recently cloned NBC isoforms, and established their expression levels by a semiquantitative PCR protocol (data shown in [15]). Although other isoforms like NBC2 [16] and NBCn1 [17] were expressed in the intestinal tract, the NBC1

isoform had the highest expression levels. Figure 1B shows a Northern Blot with poly (A+) RNA from different gastrointestinal segments and kidney cortex, hybridized with cDNA fragments for NBC1 and NHE1, the two major basolateral base uptake mechanisms in rabbit duodenocyte. Both NBC1 and NHE1 are strongly expressed in duodenal mucosa. Since we observed a difference in mRNA size between NBC1 expressed in the intestine and the kidney, we cloned the complete NBC1 sequence from rabbit duodenum and pancreas and the N-terminal sequence from rabbit kidney and found that the gastrointestinal and the kidney isoform differ in their N-termini. Primers were chosen for the selective amplification of the different N-termini from the different gastrointestinal segments and kidney cortex. Figure 2 demonstrates that both NBC1 subtypes are expressed in intestine and kidney, but with a strong predominance of the intestinal NBC1 (dNBC1) subtype in the intestine and the kidney NBC1 (kNBC1) subtype in the kidney.

Thus, it is clear that Na⁺HCO₃⁻ cotransport in the intestine is mediated by different molecular entities, among which the intestinal subtype of NBC1 has the highest expression levels.



Figure 2. RT-PCR analysis of rabbit NBC1 mRNA variants, using specific forward primers for kNBC1 and dNBC1. EtBr-stained NBC1 amplification products (34 cycles) from rabbit gastric mucosa, duodenal mucosa, ileal mucosa, colonic mucosa, and kidney cortex RNA.

Physiological role of Na⁺HCO₃ *cotransport* and NHE1 in HCO_3^- secretion. After having identified a $Na^+HCO_3^-$ cotransporter and NHE1 as the major basolateral base importers in rabbit duodenocyte basolateral membrane, we studied their importance for basal and stimulated duodenal HCO₃⁻ secretion. 1 mM DIDS, which in this concentration will inhibit all currently known $Na^{+}HCO_{3}^{-}$ cotransporters, caused a strong reduction of basal ouabain-sensitive HCO_3^- secretion to about 50%, demonstrating that a major part of the actively secreted HCO_3^{-1} ions are supplied by uptake via Na⁺HCO₃⁻ cotransport. Unexpectedly, the 8-Br-cAMPstimulated increase in HCO₃⁻ secretion was unchanged from the control conditions (Figure 3AB). This suggested that another system for HCO₃⁻ supply was activated during secretion. Since the removal of CO_2/HCO_3^- diminished basal and stimulated HCO_3^- secretion by approximately 85% (data shown in [15]), only 15% can be generated by CO₂ hydration from intracellular sources or by import and secretion of a base other than HCO_3^- . Thus, the likely alternative system was CO₂ uptake and hydration via carboanhydrase, and basolateral extrusion of the generated protons by Na^+/H^+ exchange. 1 mМ acetazolamide caused ouabain-sensitive basal secretory rate to drop to approximately 50% of control value, but surprisingly, the 8-Br-cAMP-stimulated increase in HCO₃⁻ secretion was not diminished compared to the control, suggesting upregulation of Na⁺HCO₃⁻ cotransport (Figure 3C). Only the combination of DIDS and acetazolamide, or DIDS and 1 µM Hoe 642, which will inhibit NHE1 and thereby the basolateral extrusion of protons generated during CO₂ hydration, strongly reduced both the peak and the duration of the secretory response (Figure 3DE). These results demonstrate that Na⁺HCO₃⁻ cotransport and CO_2 hydration/Na⁺/H⁺ exchange via NHE1 are important pathways for duodenal equally HCO_3^- supply and are upregulated during cAMP-mediated stimulation





Figure 4. Short circuit current in isolated mouse colonic mucosae in an Ussing-chamber setup. Control conditions (A): stimulation with dB-cAMP. Stimulation with dB-cAMP in the presence of 0.5 mM bumetanide (B), 100 μ M of the NBC-inhibitor S 0859 (C), and S 0859 + bumetanide + acetazolamide (D).

Na⁺HCO₃⁻ Cotransport in the Colon

The Northern Blot in Figure 1 shows a strong NBC1 expression in the proximal colon as well as the duodenum. However, HCO_3^- secretion is low in this part of the intestinal tract. We therefore wondered what might be the physiological significance of this transporter in the colon. HCO_3^- ions are exchanged for luminal CI in the process of electroneutral salt absorption, and HCO3⁻ ions for this process could be in part taken up by Na⁺HCO₃⁻ cotransport. However, this would imply the concomitant uptake of Na^+ ions from the interstitium. would a process that seem somewhat counterproductive for NaCl absorption. On the other hand, Na⁺HCO₃⁻ cotransport, coupled to an electroneutral CI $/HCO_3^-$ exchange mechanism in the basolateral membrane, could serve as an alternative CI uptake mechanism to the $Na^{+}K^{+}2CI$ cotransporter during CI secretion. This concept would be consistent with earlier observations of residual anion secretion after pharmacological or gene technologic inhibition of Na⁺K⁺2Cl cotransport [18, 19], as well as explain the high colonic expression levels for the basolateral anion exchanger AE2 [20]. To test this hypothesis, we measured 8-Br-cAMPstimulated short-circuit current (Isc) and HCO₃⁻ secretion in murine muscle-stripped proximal Serosal colon in the Ussing-chamber.

bumetanide (100 µM) or the NBC-specific inhibitor S0859 (100 µM) reduced db-cAMPinduced ΔI_{sc} by 60% and 45%, respectively, the combination both plus bilateral of acetazo lamide inhibited ΔI_{sc} to the same extent as burnetanide in the absence of CO_2/HCO_3^{-1} (Figure 4A-D). Acetazolamide augmented the inhibitory effect of S0859 but not of serosal DIDS (inhibits NBC and AE2), suggesting that the HCO_3^- ions used for basolateral $CI/HCO_3^$ exchange (via AE2) are predominantly supplied by basolateral $Na^+HCO_3^-$ cotransport and to a minor extent by CO_2 hydration (data not shown). These results demonstrate that in the colon, basolateral Na⁺HCO₃⁻ cotransport is involved in CI uptake during colonic anion secretion.

NBC1 and NKCC1 Expression and Regulation in Normal and CF Colonic Crypts

and Na⁺K⁺2Cl cotransport Na⁺HCO₃⁻ is activated during cAMP-stimulated anion secretion, but whether this is a direct effect of the second messenger or secondary to cell volume reduction subsequent to CI channel opening (which by itself can activate protein kinases [21, 22, 23]), or both, is under debate [24-30]. We wondered if reduced expression levels or defective regulation of these anion uptake pathways may be a component of the secretory defect in CF epithelia. We did indeed observe a reduction in NBC1 and NKCC1 expression in the intestine of adult CFTR (-/-) mice in relation to the 18s rRNA, but not when compared to villin, a cytosceletal protein of a brush border membrane, suggesting that structural changes may occur in the intestine of these mice (Figure 5). Therefore, we searched for a model in which the activity of Na⁺HCO₃⁻ and Na⁺K⁺2CI cotransport could be assessed at a cellular level. Colonic cypts were isolated from the proximal colon of CFTR (-/-) mice and their normal littermates and NBC and NKCC activity were assessed fluorometrically



Figure 5. Expression of NBC1 and NKCC1 in relationship to 18s rRNA (upper panel) and normalized to villin (lower panel) in rabbit intestine and kidney in CFTR (+/+) and (-/-) mice as detected by semiquantitative RT-PCR.

after loading the crypts with the pH-sensitive 2'7'-bis(2-carboxyethyl)-5(6)dve carboxyfluorescein (BCECF). Crypt volume was measured by determining the cross sectional area of calcein-loaded crypts using confocal microscopy. We found that although basal NBC and NKCC activity were slightly reduced in CF crypts, forskolin activated both NBC and NKCC transport activity to the same degree in CFTR (+/+) and (-/-) crypts (data not shown). Forskolin stimulation caused a marked reduction in the crypt cross sectional area in CFTR (+/+) crypts, whereas no change in crypt volume was seen in CFTR (-/-) cells. This demonstrates that changes in cell volume is not the mechanism by which forskolin activates NKCC and NBC transport activity.

In summary, we found that the intestinal subtype of the NBC1 is strongly expressed in both the duodenum and colon. In the



Figure 6. Cellular model for $Na^+HCO_3^-$ cotransport action in the intestine.4

duodenum, its expression is in the villus region and it is a major HCO_3^- supply pathway during basal and stimulated HCO_3^- secretion. In the colon, it is expressed predominantly in the crypts and one of its physiological functions is to serve as an alternative CI uptake mechanism in conjunction with a basolateral anion exchanger. Our current concept of the anion transport mechanisms in duodenum and colon is depicted in Figure 6.

Methods

<u>BLMV isolation</u>. Basolateral membrane vesicles from rabbit duodenum were isolated by a combination of differential and sucrose density gradient centrifugation as previously described [15, 31].

 $\frac{2^2Na^+}{\mu}$ uptake experiments. To load BLMvs with the appropriate intravesiclar buffer, BLMvs were suspended, centrifuged and revesiculated in the appropriate buffer. To avoid the buildup of a diffusion potential, 20 µM valinomycin and high and equal K⁺ concentrations were present in the intravesiclar and uptake buffer. Details of the method and the appropriate buffer compositions are described elsewhere [15].

<u>Cloning and expression studies</u> To clone rabbit NBC1, degenerate primers were chosen based on the published sequence from ambystoma and human kidney [32, 33]. The N-termini of the intestinal and kidney NBC1 subtype were

cloned by rapid amplification of cDNA ends PCR (RACE PCR). Based on established cDNA sequences, appropriate primers for quantitative PCR analysis were searched for and tested, and a semiquantitative PCR protocol was established in which the amplification of the gene of interested was compared to that of a control gene in the exponential phase of the reaction [34].

<u>Ussing-chamber experiments</u> Muscle-stripped intestinal segments were placed in conventional Ussing-chambers, electrical parameters were recorded during continuous or intermittent voltage-clamp, and HCO_3^- secretion was measured by pH-stat titration.

<u>Colonic surface cell and crypt isolation</u> Colon crypts were isolated by vibration of everted proximal colon in EDTA-containing solutions, and sequential isolation of surface cells, then a few fractions that were discarded, and eventially whole crypts.

Fluorescence measurements To measure NBC transport rates, BCECF-loaded cypts were acidloaded by an ammonium prepulse, and pHrecovery measured in the presence of 700 μ M dimethyl-amiloride (DMA), which blocks all sodium-proton-exchanger isoforms in the colon. The corresponding flux rates were calculated from the pH_i recovery rate and the buffering capacity at the appropriate pH. To measure NKCC activity, we utilized the fact that NH₄⁺ can enter the cell via the NKCC, using the K⁺ transport site, and thereby causes a proton influx. After superfusion of the crypts with ammonium chloride, pH_i first increases sharply, because the cell permeable NH₃ causes an alkalinization. The pH recovery that follows is in part mediated by NH₄ uptake by NKCC. The base flux rate after ammonium pulse is mainly composed of an azosemide fraction, representing NKCC activity, and a DIDSsensitive fraction which reflects the activation of a Cl/base exchanger.

<u>Crypt volume measurements</u> Confocal images of the crypt cross sectional area were used as a measure for the crypt volume as described by Heitzmann *et al.* [27].

Key words Anions; Bicarbonates; Colon; Cystic Fibrosis; Duodenum; Intestinal Mucosa; Intestinal Obstruction; Intestinal Secretions; Ion Transport

Abbreviations AE: anion exchanger; BCECF: 2'7'-bis(2-carboxyethyl)-5(6)-

carboxyfluorescein: BLMvs: basolateral membrane vesicles; [C1]_i; intracellular C1 concentration; CF: cystic fibrosis; CFTR: cystic fibrosis transmembrane conductance regulator; DIDS: 4,4'-diisothiocyanatostilbene-2,2'disulphonic acid; DMA: dimethyl-amiloride; dNBC1: Na⁺HCO₃⁻ cotransporter isoform I; GAPDH: glycerol aldehyde trisphosphate dehydrogenase; Hoe: Hoechst compound; Isc: short-circuit current; kNBC1: kidney NBC1 subtype; NBC: Na⁺HCO₃⁻ cotransport; NHE: Na^+/H^+ exchanger: NKCC: $Na^{+}K^{+}2CI$ cotransport; pH: intracellular pH; pNBC1: pancreatic NBC1 subtype; RACE PCR: rapid amplification of cDNA ends PCR

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Correspondence

Ursula Seidler 1. Medizinische Klinik der Universität Tübingen Otfried-Müller Strasse 10 72026 Tübingen Germany Phone: +49-7071-298.3187 Fax: +49-7072-295.221 E-mail: ursula.seidler@uni-tuebingen.de

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