

Inhibition of Interleukin 2 Production by Prostaglandin E₂ Is Not Absolute but Depends on the Strength of the Stimulating Signal

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Received June 12, 1984; accepted August 5, 1984

In view of the eminently important role of interleukin-2 (IL-2) in T-cell responses, and in view of reports about immune stimulatory effects of PGE₂, we reinvestigated the question whether PGE₂ inhibits IL-2 production. It was found that PGE₂ does not inhibit IL-2 production in murine spleen cell cultures after optimal stimulation (5 μg/ml concanavalin A) but does inhibit at suboptimal stimulation conditions. The failure of PGE₂ to inhibit IL-2 production at optimal concanavalin A concentration was demonstrated by two independent IL-2 assays namely by the co-stimulator assay and by the proliferation of IL-2-dependent T-cell clone W-2. Our observations indicated that the inhibitory effect of PGE₂ depends on the strength of the stimulating signal. IL-2 production in cultures with 5 μg/ml concanavalin A was also *not* suppressed by PGE₁, by prostaglandin D₂, thromboxane B₂ (T × B₂), and prostaglandin F₂.

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INTRODUCTION

Prostaglandins of the E series and the lymphokine interleukin 2 (IL-2)¹ play altogether an eminently important role as intercellular mediators in the regulation of T lymphocyte responses. Prostaglandins are produced by macrophages in the course of immunogenical reactions (reviewed in (1, 2)) and are also produced by various types of tumor cells (reviewed in (3)). Patients with Hodgkin's disease have been found to contain prostaglandin-producing suppressor cells which are believed to be responsible for the depressed cellular immunity in these patients (4). It has also been reported that prostaglandins inhibit the rejection of tumors (3, 5); and prostaglandin of the E series, PGE₁ and PGE₂, have been shown to inhibit the activation of cytotoxic T lymphocytes (CTL) (6, 7). Prostaglandins have been shown to inhibit the proliferative response of lymphoid cells including interleukin-2-dependent cytolytic T-cell lines (8-12, reviewed in (1, 13)); and indomethacin and other inhibitors of prostaglandin synthesis have been shown to enhance the induction of cytotoxic responses against allogeneic cells (10). Recently, prostaglandins of the E type have also been reported to inhibit the production of IL-2 in human lymphocyte preparations (12, 14, 15). IL-2 of course, is of central importance for T-cell proliferation and for the generation of CTL responses as reviewed in (16).

¹ Abbreviations: CSCS, concanavalin A-activated spleen cell supernatant; CTL, cytotoxic T Lymphocyte; IL-2, interleukin-2; PG, prostaglandin; PGE₂, prostaglandin E₂; PGI₂, prostacyclin; TCF2, T cell cytotoxicity inducing factor 2; T × B₂, thromboxane B₂.

Recent reports about PGE₂ induced suppressor factors (17, 18) suggested, however, the possibility that such inhibitory factors might have interfered with the IL-2 assays and might have been responsible for the apparent reduction of the IL-2 titers by PGE₂ in the reported experiments (12, 14, 15). Moreover, in spite of the numerous reports on the suppressive effects of prostaglandins, there are also reports that prostaglandins may augment T-cell reactivity under certain experimental situations. Anti-PGE antibodies have been reported to inhibit the *in vivo* development of several types of T-cell-mediated immune reactions (19). A PGE₂ derivative (diM-PGE₂) was found to increase T-cell-mediated immune responses in B16 melanoma-bearing C57BL/6 mice and delayed the development of the tumor whereas indomethacin was found to enhance tumor development (20). And finally, PGE₂ has also been implicated as possible mediator of the biological activity of thymic factor (21). In view of these stimulatory effects of PGE₂, and in view of the central role of IL-2 in T-cell responses, we reinvestigated the question of whether PGE₂ inhibits IL-2 production. Using two different IL-2 assays we found that PGE₂ does *not* inhibit the production of IL-2 in murine spleen cell cultures with standard (optimal) concentrations of concanavalin A.

MATERIALS AND METHODS

Animals. The mice were obtained from Bomholtgard, Ry, Denmark. Most of the experiments were performed with 8- to 19-week-old male animals.

The application of indomethacin and prostaglandins. Indomethacin is a nonsteroidal anti-inflammatory drug and a potent irreversible inhibitor of prostaglandin synthesis (22-24). A stock solution of indomethacin (Sigma) was prepared by dissolving 10 mg/ml in ethanol. The cell cultures contained usually 0.5 μ g indomethacin per ml, i.e., 1:20,000 dilution of the stock solution in culture medium. The various types of prostaglandins were obtained from Sigma. Stock solutions (10^{-2} M in ethanol) were stored at -20°C . The prostaglandins were applied to cultures at concentrations of 10^{-6} M if not indicated otherwise. Control cultures with corresponding concentrations of ethanol were also tested routinely.

The preparation of Con A-activated spleen cell supernatant (CSCS). The CSCS preparations were obtained by culturing spleen cells (1×10^7 cells/ml) with concanavalin A (GIBCO) (5 μ g/ml if not indicated otherwise) in culture medium with fetal calf serum (GIBCO) and 3×10^{-5} M 2-mercaptoethanol usually for 24 hr. (The CSCS preparations in Fig. 2 have been obtained after 48 hr incubation.) Some of the cultures contained also prostaglandins (10^{-6} M if not indicated otherwise) and/or indomethacin (usually 0.5 μ g/ml). the supernatants were isolated by centrifugation at 300g for 10 min and stored frozen. Some of the CSCS preparations were dialyzed 3 times against $10\times$ the volume of culture medium in order to remove the prostaglandins. α -Methylmannoside at a final concentration of 1 mM (0.194 mg/ml) and HEPES (5×10^{-3} M) were added to the supernatant in order to neutralize the contaminating concanavalin A.

Assay for interleukin 2 with an IL-2-dependent T-cell line. Our interleukin 2 data are given as IL-2 activity units, based on the method described by Farrar *et al.* (25). The amount of IL-2 in supernatants was measured by their ability to support the growth of the T-cell clone W-2 as described in detail elsewhere (26).

Costimulator assay (27). The determination of IL-2 by the costimulator assay was performed as described by Shaw *et al.* (27). Briefly, 1×10^5 CBA thymocytes

were cultured with 0.6 μg concanavalin A and twofold dilutions of the CSCS preparation under test in 0.2 ml microcultures for 3 days. [^3H]Thymidine (1 μCi) was then added and the cultures were harvested on a Skatron cell harvester 4 hr later.

RESULTS AND DISCUSSION

We observed that the IL-2 production in spleen cell cultures with a standard concentration of 5 $\mu\text{g}/\text{ml}$ of concanavalin A was not inhibited by PGE_2 in concentrations up to $10^{-6} M$ as determined by the proliferation of the IL-2-dependent T-cell clone W-2 (Table 1) and by the costimulator assay (27) (Fig. 1). We found also that the presence of $10^{-6} M$ PGE_2 in Con A-stimulated spleen cell cultures did not alter the capacity of the resulting spleen cell blasts to absorb IL-2

TABLE I

The Effect of Prostaglandins on the Production of Interleukin 2 by Con A-Activated Spleen Cells^a

| Group | Indomethacin added | Prostaglandin added | | IL-2 units/ml | | |
|-------|--------------------|--|-------------|---------------|---------|----------|
| | | | | Exp. I | Exp. II | Exp. III |
| 1 | — | None | | 43 | 100 | 148 |
| 2 | + | None | | 66 | 163 | 148 |
| 3 | + | PGE_2 | $10^{-6} M$ | 57 | 146 | n.t. |
| 4 | + | | $10^{-7} M$ | 66 | | 135 |
| 5 | + | PGE_1 | $10^{-6} M$ | 61 | | |
| 6 | + | PGI_2 | $10^{-6} M$ | 44 | 64 | 104 |
| 7 | + | | $10^{-7} M$ | | 111 | 146 |
| 8 | + | 6-Keto- $\text{PGF}_{1\alpha}$ | $10^{-6} M$ | | | 114 |
| 9 | + | | $10^{-7} M$ | | | 124 |
| 10 | | $\text{PGF}_{2\alpha}$ | $10^{-6} M$ | 69 | | |
| 11 | + | PGD_2 | $10^{-6} M$ | 71 | | |
| 12 | + | T \times B ₂ | $10^{-6} M$ | | 142 | |
| 13 | + | PGI_2 | $10^{-6} M$ | | | 176 |
| | | was added to CSCS prep. (Gr. 2) after Con A activation and dialysis | | | | |
| 14 | + | None | | | | 145 |
| 15 | + | PGI_2 | $10^{-6} M$ | | | 140 |
| | | was added to CSCS prep. (Gr. 2) after Con A activation and dialysis but was removed again by a second dialysis procedure | | | | |

^a CBA spleen cells (3×10^8) were incubated in 30 ml culture medium with 0.15 mg concanavalin A plus the indicated materials. After 24 hr the supernatants were collected by centrifugation and then subjected to dialysis for 24 hr to remove the prostaglandins. The supernatants of groups 13 and 15 received the prostaglandin only after this dialysis procedure; and the supernatant in group 15 was then dialyzed a second time. These controls show that the IL-2-dependent proliferation of W-2 cells is not inhibited by PGI_2 . All supernatants were finally mixed with α -methylmannoside (1 mM) and tested for IL-2 activity.

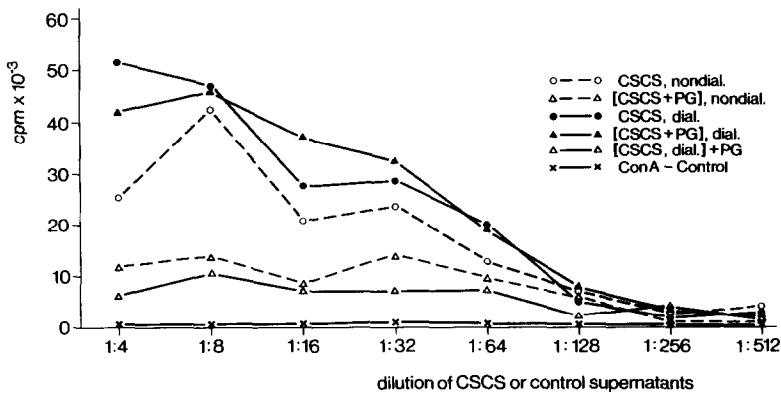


FIG. 1. Effect of PGE₂ on the activity of CSCS in the costimulator assay (27). Concanavalin A-stimulated thymocyte cultures received the indicated concentrations of a standard CSCS preparation without (○ --- ○) or with (● — ●) subsequent dialysis. A portion of the dialyzed CSCS preparation was mixed with PGE₂ (10⁻⁶ M) and then tested in the costimulator assay (△ — △). Another type of CSCS preparation was obtained by culturing the spleen cells with concanavalin A in the presence of 10⁻⁶ M PGE₂. This preparation was tested either without (△ --- △) or with (▲ — ▲) subsequent dialysis. A control preparation contained no CSCS but only the corresponding amounts of concanavalin A (× — ×). A series of CSCS preparations which were obtained as described above but with the only difference that 0.5 μg/ml indomethacin was added to the Con A-stimulated spleen cell cultures gave the same pattern of results (data not shown).

(data not shown). It was noted, however, that the IL-2 titers of CSCS preparations were (partly) inhibited when prostaglandin (PGI₂) or its degradation product 6-keto-prostaglandin F₁ was added to the Con A-stimulated spleen cell cultures (Table 1). The CSCS preparations had been subjected routinely (except for group 13 in Table 1 and the indicated groups in Fig. 1) to dialysis before the IL-2 assay in order to remove the prostaglandins. The control group 13 in Table 1 showed that PGI₂ did not suppress the proliferation of the IL-2-dependent W-2 T-cell line directly. Prostaglandin E₂ was found to suppress the proliferation of the W-2 cell line (Table 2), but it was obviously completely removed by dialysis as indicated by the data of Tables 1 and 2. The inhibitory effect of PGE₂ on the proliferation of an IL-2-dependent T-cell line has been described previously (11).

However, PGE₂ failed to suppress the production of IL-2 only in spleen cell cultures with 5 μg/ml concanavalin A but not with 1 μg/ml concanavalin A (Fig. 2). (The concentration of 5 μg/ml was in earlier experiments found to be the optimal concentration for the stimulation of IL-2 production and therefore routinely used as a standard concentration.)

Taken together, our experiments revealed that PGE₂ did not inhibit the IL-2 production in murine spleen cell cultures after optimal stimulation (5 μg/ml concanavalin A) as determined by two independent IL-2 assays, whereas IL-2 production in cultures with 1 μg/ml concanavalin A was markedly reduced. This indicated that the inhibitory effect of PGE₂ depends on the strength of the activating signal. Our experiments are not incompatible with the series of reports that PGE₂ inhibits IL-2 production in cultures of mitogen activated human lymphocytes (12, 14, 15). Possibly, these studies have been dealing with suboptimal stimulation conditions. The possibility that the IL-2 assays might have been sensitive against a PGE₂-induced suppressor factor might also explain the PGE₂-mediated inhibition

TABLE 2

Effect of PGE₂ on the Proliferation of the W-2 Cell Line (on the Apparent IL-2 Titers)^a

| Factor and materials added | Apparent IL-2 units/ml |
|---|------------------------|
| Exp. I | |
| Gr. 1 CSCS conc. | 130 |
| 2 CSCS 1:3 diluted | 26 |
| 3 CSCS 1:9 diluted | 8.5 |
| 4 CSCS conc. + PGE ₂ (10 ⁻⁶ M) | 51 |
| 5 CSCS 1:3 + PGE ₂ (10 ⁻⁶ M) | 13 |
| 6 CSCS 1:9 + PGE ₂ (10 ⁻⁶ M) | 3.4 |
| Exp. II | |
| Gr. 7 CSCS | 160 |
| 8 CSCS + PGE ₂ (10 ⁻⁶ M) | 110 |
| 9 CSCS + PGE ₂ (10 ⁻⁶ M) dialysed | 154 |
| Exp. III | |
| Gr. 10 EL-4 sup. | 100 |
| 11 EL-4 sup. + PGE ₂ (10 ⁻⁷ M) | 28 |

^a The IL-2 titer of two different CSCS preparations and an IL-2 containing EL-4 supernatant alone or in mixture with PGE₂ was assayed as described under Materials and Methods. In group 9, the mixture of CSCS plus PGE₂ had been dialyzed before the assay. Apparently, the prostaglandin was almost completely removed.

in the previous reports (12, 14, 15) and in our experiment of Fig. 2. Several laboratories have reported that PGE₂ activates inhibitory T cells (28-30), which produce suppressor factors (17, 18).

Our experiments showed also that PGE₂ inhibits the IL-2-dependent cell proliferation. This effect of PGE₂ is probably mediated by increased cyclic AMP levels in

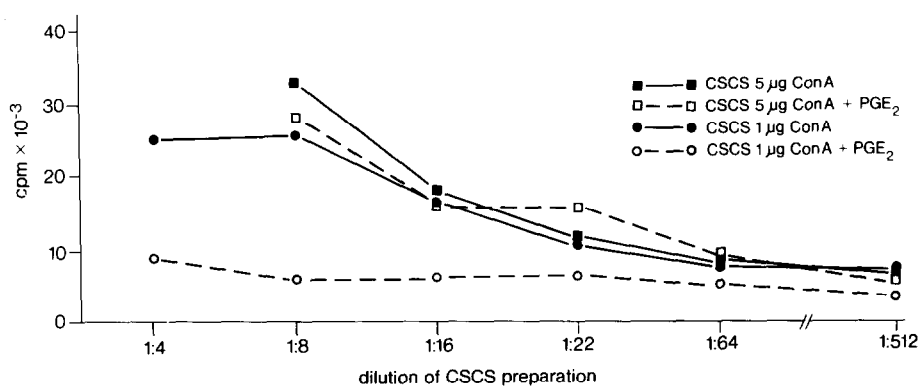


FIG. 2. PGE₂ inhibits the stimulation of IL-2 production by low concentrations of concanavalin A. CSCS was either prepared with 5 µg/ml concanavalin A and without PGE₂ (standard conditions, ■—■), or with 5 µg/ml Con A and with 10⁻⁶ M PGE₂ (□---□), with 1 µg/ml Con A and without PGE₂ (●—●), or with 1 µg/ml Con A and with 10⁻⁶ M PGE₂ (○---○). All CSCS preparations were dialyzed and subsequently tested for IL-2 activity in the costimulator assay (27). PGE₂ was found to reduce the apparent IL-2 titer in Con A-activated spleen cell cultures with 1 µg/ml Con A but not with 5 µg/ml Con A.

the target cells (1). The possibility that PGE₂ reduces the expression of IL-2 receptors seems less likely; at least in Con A-activated spleen cell cultures PGE₂ did not alter the capacity to absorb IL-2 (unpublished observation).

ACKNOWLEDGMENTS

We are grateful to Mrs. S. Nick and Mrs. H. Schmidt for expert technical assistance and to Mrs. I. Fryson and Mrs. J. Rami for assistance in the preparation of the manuscript. We thank Dr. D. Gemsa for valuable discussions.

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