

Effects of oleic acid on SP-B expression and release in A549 cells

D.-J. ZHOU¹, Y. CHEN², X.-J. ZHANG³, C. MA¹, J. QIU¹, J.-H. ZHOU¹

¹State Key Laboratory of Trauma, Burns and Combined Injury, Department 4, Institute of Surgery Research, Daping Hospital, Third Military Medical University, Chongqing, P. R. China

²The 3rd Ward of Medical Department, Chongqing Emergency Medical Center, Chongqing, P.R. China

³Pharmaceutical and Biological Engineering College, Chongqing University of Technology, Chongqing, P.R. China

Abstract. – OBJECTIVE: Pulmonary surfactant-associated protein B (SP-B), which is synthesized and secreted by alveolar epithelial type II cells, is crucial for normal functioning of pulmonary surfactant. Degeneration of pulmonary surfactant is the essential cause of acute lung injury (ALI). ALI is often studied in animal models using oleic acid, and the effects of oleic acid on pulmonary surfactant and SP-B are not clear. In this study, we examined the effects of oleic acid on the A549 cell line which resembles the alveolar epithelial type II cells.

MATERIALS AND METHODS: A549 cells were exposed for 24 hours to 300, 400, 500 or 600 μ M of oleic acid. Cell morphological changes were observed using an inverted microscope, and cell proliferation was quantified with the Cell Counting Kit-8. Extracellular SP-B levels were assessed by ELISA, whereas intracellular SP-B expression by Western blot.

RESULTS: Oleic acid caused dose-dependent changes in cell morphology of A549 cells and decreased their proliferation. This was accompanied by release of SP-B into extracellular supernatants and corresponding decrease of intracellular levels of this protein.

CONCLUSIONS: Oleic acid causes a dose-dependent injury to A549 cells, release of SP-B into extracellular compartment, and decrease of intracellular SP-B expression. Our findings provide mechanistic insights into animal modeling of ALI with oleic acid.

Key Words:

Acute lung injury, Surfactant protein B, Oleic acid, Intervention.

function of pulmonary surfactant mainly depends on the pulmonary surfactant-associated protein B (SP-B), which is synthesized, packaged and secreted by alveolar epithelial type II cells⁴⁻⁶. This protein is crucial in decreasing the surface tension of alveoli, preventing the end-expiratory pulmonary alveoli collapse, promoting the recirculation of pulmonary surfactant, as well as for promoting maturity and secretion of SP-C⁷⁻¹⁰.

ALI is often studied in animal models. The optimal animal model should be able to demonstrate the mechanism, occurrence and development of ALI^{11,12}. The current animal models of ALI include the endotoxin induced injury model, hyperoxia induced injury model, mechanical ventilation induced injury model, and oleic acid induced injury model^{13,14}. The latter model has been established in 1968¹⁵ and has since then become the most commonly used animal model of ALI¹⁶⁻¹⁹.

In mammals, oleic acid is the most abundant free fatty acid, comprising about 60% of the total free fatty acid content^{20,21}. Oleic acid in ALI model directly affects capillary endothelial cells²². In fact there is hyperemia in lung tissue and extensive bleeding in pulmonary alveoli. Formation of microthrombus in pulmonary alveoli and epithelial cell necrosis cause direct injury to blood capillary endothelium by an unknown mechanism^{23,24}. To explain the mechanisms of the oleic acid induced ALI, the oxidative stress, increased procoagulant activity, and endothelin mechanisms have been proposed^{25,26}. There have been no studies on the effects of oleic acid on SP-B. In this study, we examined the effects of oleic acid using the A549 cell line exposed to different concentrations of this compound. This cell line has the same phenotype and characteristics as alveolar epithelial type II cells. A549 cells

Introduction

Degeneration of pulmonary surfactant is the essential cause of acute lung injury (ALI)¹⁻³. The

synthesize, transport and secrete SP-B *in vitro* and are, thus, the most commonly used cell type to study ALI in cell culture²⁷⁻²⁹.

Materials and Methods

Materials

Foetal bovine serum, Dulbecco's Modified Eagle Medium (DMEM), dimethyl sulfoxide (DMSO), and oleic acid were from Sigma-Aldrich (St. Louis, MO, USA). Streptomycin and penicillin were provided by the Pharmacy of Daping Hospital, Third Military Medical University (Chongqing, China). Pancreatin was from Thermo Fisher Scientific (Waltham, MA, USA), SP-B ELISA kit and monoclonal antibody were, respectively, from Wuhan HuaMei Biological Engineering Co. (Wuhan, China) and (Santa Cruz Biotechnology, Santa Cruz, CA, USA). The CCK-8 Cell Counting Kit was purchased from Dojindo Laboratories (Kyushu, Japan).

Cell Culture and Preparation of Oleic Acid Solution

The human pulmonary adenocarcinoma A549 cells represented the alveolar type II epithelial cells. The cells were provided by the Cancer Center of Daping Hospital, Third Military Medical University. A549 cells were cultured in DMEM containing 100 µg/ml streptomycin, 100 µg/ml penicillin, and 10% foetal bovine serum (FBS).

Oleic acid was prepared as follows. Oleic acid (0.49 ml) was mixed with 3.5 ml of absolute ethyl alcohol; the mixture was filtered 2 times in the dark and kept aliquoted at -20° C. For experiments, oleic acid stock was mixed with 0.15 M NaOH to prepare 0.2 M working.

In the experiments described below, A549 cells were exposed for 24 hours to serum-free DMEM (control cells) or 300, 400, 500 or 600 µM of oleic acid.

Cell Morphology and Proliferative Activity

For experiments, 200 µl of cell suspension (concentration of 4×10^4 cells/ml) were plated onto a 96-well culture plate. After 24 hours of cell growth, 200 µl of different concentrations of oleic acid were added to corresponding wells (all experimental conditions done in quintuplicate), and cells were cultured for further 24 hours. Cells were then observed under the microscope

(X200 magnification). After that, 10 µl of CCK-8 solution was added, and cells were incubated for 2 hours. Then, optical densities were measured at 450 nm.

SP-B Detection by ELISA and Western Blot

For ELISA, cells (4×10^4 /ml) were plated onto a 96-well culture plate and treated with oleic acid as above. ELISA was conducted per manufacturer's instructions to detect SP-B levels in cell supernatants.

For Western blot analysis, the cells were counted to prepare culture flasks with 2×10^6 cells per flask. Five flasks were prepared, and 4 ml of serum-free medium or different concentrations of oleic acid were added to corresponding flasks. After 24 hours, supernatants and cells were collected. Western Blot was used to detect the SP-B levels.

Statistical Analysis

The SPSS16.0 statistical package (SPSS Inc., Chicago, IL, USA) was used to analyze the data. Data were presented as mean \pm SD and compared using a *t*-test for independent samples. A *p* value of < 0.05 was considered as statistically significant. The Origin software was used to prepare graphs.

Results

Cell Morphological Changes

Control A549 cells showed polygonal shape with abundant cytoplasm and evident protuberance (Figure 1A). The cells adhered well to a culture plate and fused together. There was no karyopyknosis. When the cells were treated with 300 µM of oleic acid (Figure 1B), A549 cells rounded up, their volume was slightly decreased, and there were granules of different sizes. These changes became more pronounced with higher concentrations of oleic acid. Thus, cells treated with 400 µM of oleic acid became substantially rounder than control cells; this was accompanied by a decrease in cell volumes, shortening of cell protuberance, and increase in number of different size granules (Figure 1C). When exposed to 500 µM of oleic acid, A549 cells started to break, and the volume was significantly decreased. The organelles were disintegrated and fragmented (Figure 1D). At 600 µM of oleic acid, cells

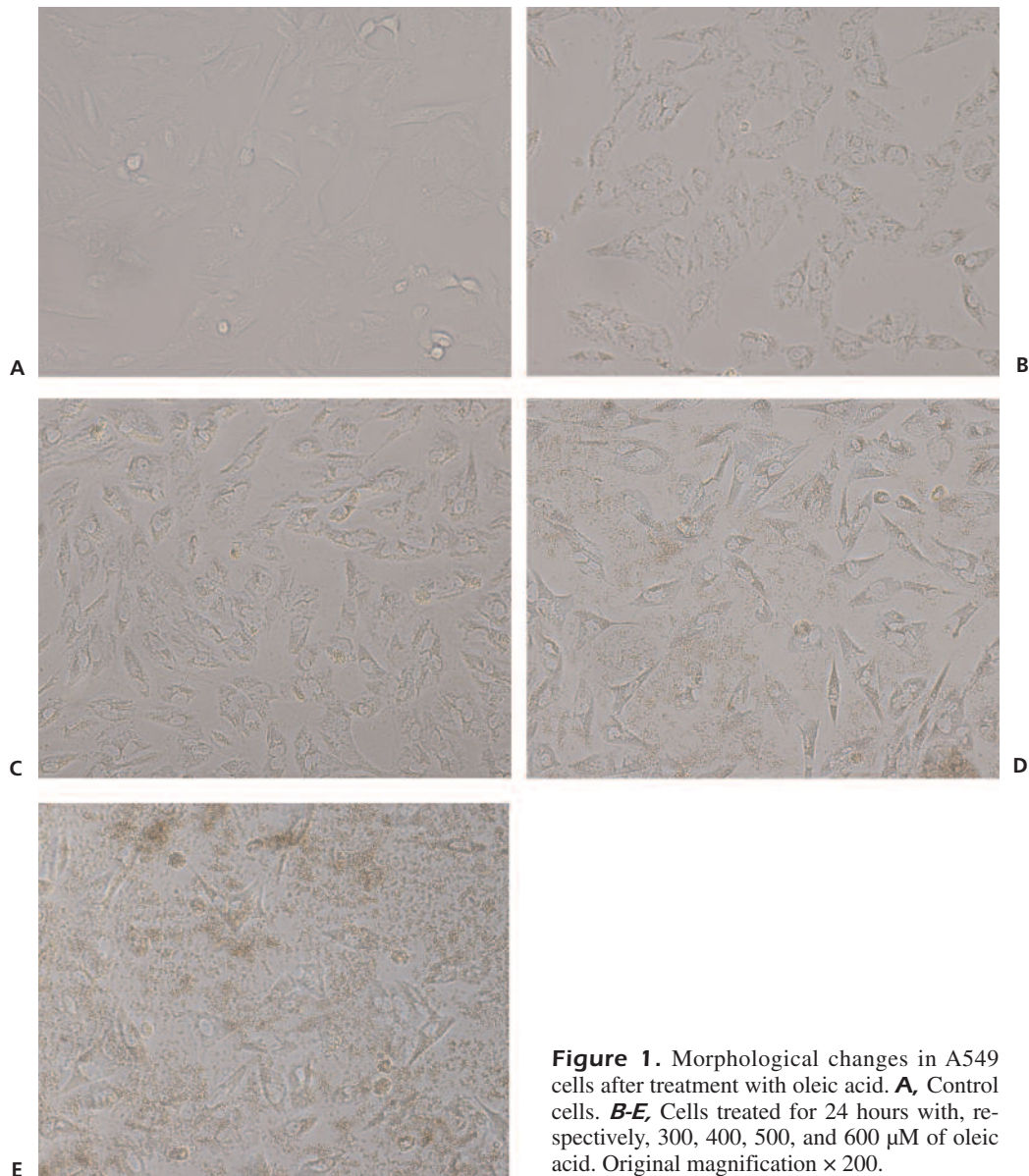


Figure 1. Morphological changes in A549 cells after treatment with oleic acid. **A**, Control cells. **B-E**, Cells treated for 24 hours with, respectively, 300, 400, 500, and 600 μM of oleic acid. Original magnification $\times 200$.

were mostly broken, there was a shirking of the nucleus, and the organelles were visibly disintegrated and fragmented (Figure 1E).

Cell Proliferation

We next tested cell proliferation. Judging by the optical density, A549 cells showed a dose-dependent decrease in cell proliferation (Table I).

Expression of SP- in Supernatants Detected by ELISA

Subsequently, SP-B expression in cell supernatants was detected by ELISA. The extracellular levels of SP-B increased along with increas-

Table I. Optical density (OD) of cell proliferation after treatment with oleic acid.

Experimental conditions	OD
Control cells	2.92 ± 0.14
300 μM of oleic acid	$2.54 \pm 0.16^*$
400 μM of oleic acid	$2.21 \pm 0.14^{*\#}$
500 μM of oleic acid	$1.88 \pm 0.11^{*##}$
600 μM of oleic acid	$1.66 \pm 0.07^{*##\S}$

Data are mean \pm SD of five experiments. * $p < 0.05$ vs. control cells; # $p < 0.05$ vs. cells treated with 300 μM of oleic acid; * $p < 0.05$ vs. cells treated with 400 μM of oleic acid; § $p < 0.05$ vs. cells treated with 500 μM of oleic acid.

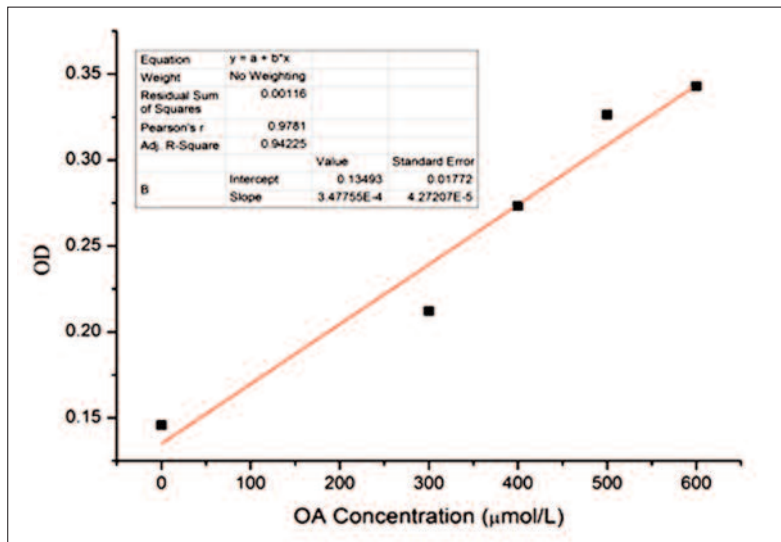


Figure 2. Change of optical density (OD) of SP-B after treatment with oleic acid.

ing concentrations of oleic acid (Table II and Figure 2).

Intracellular SP-B Expression Detected by Western Blot

Finally, we quantified intracellular expression of SP-B expressions. This concentration decreased dose-dependently after treatment with oleic acid (Figure 3). We also observed the presence of fragments of SP-B of lower molecular weight (around 30 kDa).

Discussion

In this study, we tested the effects of oleic acid on A549 cells. Oleic acid caused dose-dependent changes in cell morphology and decreased proliferation of A549 cells. This was accompanied by increased release of SP-B into extracellular supernatants and corresponding decrease of intracellular levels of this protein. It suggests that in ALI models, cell injury caused by oleic acid

Table II. Change of SP-B optical density (OD) after treatment with oleic acid.

Experimental conditions	OD
Control cells	0.15 ± 0.02
300 μM oleic acid	0.21 ± 0.01 *
400 μM oleic acid	0.27 ± 0.01 * #
500 μM oleic acid	0.32 ± 0.01 * # &
600 μM oleic acid	0.34 ± 0.01 * # & ¶

Data are mean ± SD of five experiments. **p* < 0.05 vs. control cells; #*p* < 0.05 vs. cells treated with 300 μM of oleic acid; **p* < 0.05 vs. cells treated with 400 μM of oleic acid; §*p* < 0.05 vs. cells treated with 500 μM of oleic acid.

causes gradual release of intracellular SP-B into extracellular compartment.

SP-B is first expressed as a 42 kDa monomer pro-form which further undergoes post-translational modifications. After pyrolysis, mature SP-B is formed and preserved in the lamellar bodies. It can interact with phospholipid membrane to

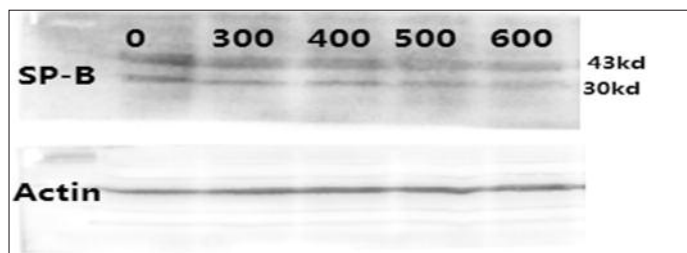


Figure 3. Changes in SP-B expression after treatment with different concentrations of oleic acid. SP-B expression was detected by Western blot. At the top, concentrations of oleic acid (μM) are shown. The 43 kDa bands represent pro-form of SP-B, and 30 kDa bands represent proteolytically cleave fragments of SP-B.

initiate the secretion, which requires proteolytic cleavage and formation of active SP-B comprising 79 amino acid residues with a molecular weight of about 18 kDa³⁰⁻³². Using Western blot, we demonstrate that A549 cells treated with oleic acid exhibit decreased expression of the 43 kDa proform and presence of incomplete SP-B fragments with a molecular weight of 28-32 kDa.

Conclusions

Oleic acid causes a dose-dependent injury to A549 cells which is accompanied by release of SP-B into extracellular compartment and decrease of intracellular SP-B expression. Our findings provide mechanistic insights into animal modeling of ALI with oleic acid.

Funding Source

National Natural Science Foundation of China (grant number: 81471865).

Conflict of Interest

The Authors declare that they have no conflict of interests.

References

- MOKRA D, DRGOVA A, KOPINCOVA J, PULLMANN R, CALKOVSKA A. Anti-inflammatory treatment in dysfunction of pulmonary surfactant in meconium-induced acute lung injury. *Adv Exp Med Biol* 2013; 756: 189-196.
- PACE PW, YAO LJ, WILSON JX, POSSMAYER F, VELD-HUIZEN RA, LEWIS JF. The effects of hyperoxia exposure on lung function and pulmonary surfactant in a rat model of acute lung injury. *Exp Lung Res* 2009; 35: 380-398.
- HUANG TK, UYEHARA CF, BALARAMAN V, MIYASATO CY, PERSON D, EGAN E, EASA D. Surfactant lavage with lidocaine improves pulmonary function in piglets after HCl-induced acute lung injury. *Lung* 2004; 182: 15-25.
- MAHINY AJ, DEWERTH A, MAYS LE, ALKHALED M, MOTHESS B, MALAEKSEFAT E, LORETZ B, ROTTENBERGER J, BROSCHE DM, REAUTSCHNIG P, SURAPOLCHAI P, ZEYER F, SCHAMS A, CAREVIC M, BAKELE M, GRIESE M, SCHWAB M, NURNBERG B, BEER-HAMMER S, HANDGRETINGER R, HARTL D, LEHR CM, KORMANN MS. In vivo genome editing using nuclease-encoding mRNA corrects SP-B deficiency. *Nat Biotechnol* 2015; 33: 584-586.
- WALTHER FJ, HERNANDEZ-JUVIEL JM, GORDON LM, WARING AJ. Synthetic surfactant containing SP-B and SP-C mimics is superior to single-peptide formulations in rabbits with chemical acute lung injury. *PeerJ* 2014; 2: e393.
- SHARIFAHMADIAN M, SARKER M, PALLEBOINA D, WARING AJ, WALTHER FJ, MORROW MR, BOOTH V. Role of the N-terminal seven residues of surfactant protein B (SP-B). *PLoS One* 2013; 8: e72821.
- OLMEDA B, GARCIA-ALVAREZ B, PEREZ-GIL J. Structure-function correlations of pulmonary surfactant protein SP-B and the saposin-like family of proteins. *Eur Biophys J* 2013; 42: 209-222.
- SYLVESTER A, MACEACHERN L, BOOTH V, MORROW MR. Interaction of the C-terminal peptide of pulmonary surfactant protein B (SP-B) with a bicellar lipid mixture containing anionic lipid. *PLoS One* 2013; 8: e72248.
- PARRA E, ALCARAZ A, CRUZ A, AGUILELLA VM, PEREZ-GIL J. Hydrophobic pulmonary surfactant proteins SP-B and SP-C induce pore formation in planar lipid membranes: evidence for proteolipid pores. *Biophys J* 2013; 104: 146-155.
- FEHRHOLZ M, BERSANI I, KRAMER BW, SPEER CP, KUNZMANN S. Synergistic effect of caffeine and glucocorticoids on expression of surfactant protein B (SP-B) mRNA. *PLoS One* 2012; 7: e51575.
- LAKSHMI SP, REDDY AT, NAIK MU, NAIK UP, REDDY RC. Effects of JAM-A deficiency or blocking antibodies on neutrophil migration and lung injury in a murine model of ALI. *Am J Physiol Lung Cell Mol Physiol* 2012; 303: L758-766.
- CHOBAN PS, MCKNIGHT T, FLANCAUBAUM L, SABOURIN CL, BIJUR GN, BOROS LG, MARLEY J, BURGE JC, ROBERTSON FM. Characterization of a murine model of acute lung injury (ALI): a prominent role for interleukin-1. *J Invest Surg* 1996; 9: 95-109.
- DAVIES SW, LEONARD KL, FALLS RK, JR., MAGEAU RP, EFIRD JT, HOLLOWELL JP, TRAINOR WE, 2ND, KANAAN HA, HICKNER RC, SAWYER RG, POULIN NR, WAIBEL BH, TOSCHLOG EA. Lung protective ventilation (ARDSNet) versus airway pressure release ventilation: ventilatory management in a combined model of acute lung and brain injury. *J Trauma Acute Care Surg* 2015; 78: 240-249; discussion 249-251.
- BANG JO, HA SI, CHOI IC. The effect of positive-end expiratory pressure on oxygenation during high frequency jet ventilation and conventional mechanical ventilation in the rabbit model of acute lung injury. *Korean J Anesthesiol* 2012; 63: 346-352.
- Ashbaugh DG, Uzawa T. Respiratory and hemodynamic changes after injection of free fatty acids. *J Surg Res* 1968; 8: 417-423.
- INOUE H, NAKAGAWA Y, IKEMURA M, USUGI E, NATA M. Molecular-biological analysis of acute lung injury (ALI) induced by heat exposure and/or intravenous administration of oleic acid. *Leg Med (Tokyo)* 2012; 14: 304-308.
- BULMUS FG, GURSU MF, MUZ MH, YAMAN I, BULMUS O, SAKIN F. Protective effects of alpha-lipoic acid on oleic acid-induced acute lung injury in rats. *Balkan Med J* 2013; 30: 309-314.

- 18) SALMAN AE, YETISIR F, KILIC M, ONAL O, DOSTBIL A, ZEYBEK D, AKSOY M, KAYMAK F, CELIK T, UNVER S. The impact of pretreatment with bolus dose of enteral glutamine on acute lung injury induced by oleic acid in rats. *J Anesth* 2014; 28: 354-362.
- 19) TURKOGLU S, MUZ MH, OZERCAN R, GURSU F, KIRKIL G. Effects of lycopene on the model of oleic acid-induced acute lung injury. *Tuberk Toraks* 2012; 60: 101-107.
- 20) MITTAL N, SANYAL SN. In vivo effect of surfactant on inflammatory cytokines during endotoxin-induced lung injury in rodents. *J Immunotoxicol* 2011; 8: 274-283.
- 21) HARRIS RA, SHUMBULA PM, VAN DER WALT H. Analysis of the interaction of surfactants oleic acid and oleylamine with iron oxide nanoparticles through molecular mechanics modeling. *Langmuir* 2015; 31: 3934-3943.
- 22) HARVEY KA, WALKER CL, XU Z, WHITLEY P, PAVLINA TM, HISE M, ZALOGA GP, SIDDIQUI RA. Oleic acid inhibits stearic acid-induced inhibition of cell growth and pro-inflammatory responses in human aortic endothelial cells. *J Lipid Res* 2010; 51: 3470-3480.
- 23) NAKAZAWA K, YOKOYAMA K, YAMAKAWA N, MAKITA K. Effect of positive end-expiratory pressure on inflammatory response in oleic acid-induced lung injury and whole-lung lavage-induced lung injury. *J Anesth* 2007; 21: 47-54.
- 24) ALTINTAS ND, ATILLA P, ISKIT AB, TOPELI A. Long-term simvastatin attenuates lung injury and oxidative stress in murine acute lung injury models induced by oleic Acid and endotoxin. *Respir Care* 2011; 56: 1156-1163.
- 25) GAIO E, MELO E SILVA CA, BRITO F, FIRMINO MA, STORCK R, FREITAS E. Stability of the animal model of oleic acid-induced acute lung injury. *J Bras Pneumol* 2009; 35: 759-766.
- 26) KANG OH, KIM SB, SEO YS, JOUNG DK, MUN SH, CHOI JG, LEE YM, KANG DG, LEE HS, KWON DY. Curcumin decreases oleic acid-induced lipid accumulation via AMPK phosphorylation in hepatocarcinoma cells. *Eur Rev Med Pharmacol Sci* 2013; 17: 2578-2586.
- 27) BEIN K, DI GIUSEPPE M, MISCHLER SE, ORTIZ LA, LEIKAUF GD. LPS-treated macrophage cytokines repress surfactant protein-B in lung epithelial cells. *Am J Respir Cell Mol Biol* 2013; 49: 306-315.
- 28) MARGARITORA S, CESARIO A, CUSUMANO G, DALL'ARMI V, PORZIELLA V, MEACCI E, LOCOCO F, D'ANGELILLO R, CONGEDO MT, GRANONE P. Pneumonectomy with and without induction chemo-radiotherapy for non-small cell lung cancer: short and long-term results from a single centre. *Eur Rev Med Pharmacol Sci* 2013; 17: 29-40.
- 29) KETKO AK, DONN SM. Surfactant-associated proteins: structure, function and clinical implications. *Curr Pediatr Rev* 2014; 10: 162-167.
- 30) BECK-BROICHSITTER M, RUPPERT C, SCHMEHL T, GUNTHER A, SEEGER W. Biophysical inhibition of pulmonary surfactant function by polymeric nanoparticles: role of surfactant protein B and C. *Acta Biomater* 2014; 10: 4678-4684.
- 31) AKELLA A, TIWARI AK, PATNE SC, DESHPANDE SB. Mesobuthus tamulus venom induces acute respiratory distress syndrome in rats involving additional mechanisms as compared to oleic acid model. *Toxicon* 2015; 97: 15-22.
- 32) YILDIRIM IO, BAYSAL T, CELIK MR. The evaluation of MDCT and quantitative first-pass perfusion in lung cancers. *Eur Rev Med Pharmacol Sci* 2013; 17: 2390-2395.