

Hypertonic Stress Induces VEGF Production in Human Colon Cancer Cell Line Caco-2: Inhibitory Role of Autocrine PGE₂

Luciana B. Gentile^{1,2}, Bruno Piva³, Bruno L. Diaz^{3*}

1 Divisão de Biologia Celular, Coordenação de Pesquisa, Instituto Nacional de Câncer, Rio de Janeiro, Rio de Janeiro, Brasil, **2** Programa de Pós-Graduação em Ciências Morfológicas, Instituto de Ciências Biomédicas, Universidade Federal do Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brasil, **3** Programa de Imunobiologia, Instituto de Biofísica, Universidade Federal do Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brasil

Abstract

Vascular Endothelial Growth Factor (VEGF) is a major regulator of angiogenesis. VEGF expression is up regulated in response to micro-environmental cues related to poor blood supply such as hypoxia. However, regulation of VEGF expression in cancer cells is not limited to the stress response due to increased volume of the tumor mass. Lipid mediators in particular arachidonic acid-derived prostaglandin (PG)E₂ are regulators of VEGF expression and angiogenesis in colon cancer. In addition, increased osmolarity that is generated during colonic water absorption and feces consolidation seems to activate colon cancer cells and promote PGE₂ generation. Such physiological stimulation may provide signaling for cancer promotion. Here we investigated the effect of exposure to a hypertonic medium, to emulate colonic environment, on VEGF production by colon cancer cells. The role of concomitant PGE₂ generation and MAPK activation was addressed by specific pharmacological inhibition. Human colon cancer cell line Caco-2 exposed to a hypertonic environment responded with marked VEGF and PGE₂ production. VEGF production was inhibited by selective inhibitors of ERK 1/2 and p38 MAPK pathways. To address the regulatory role of PGE₂ on VEGF production, Caco-2 cells were treated with cPLA₂ (ATK) and COX-2 (NS-398) inhibitors, that completely block PGE₂ generation. The Caco-2 cells were also treated with a non selective PGE₂ receptor antagonist. Each treatment significantly increased the hypertonic stress-induced VEGF production. Moreover, addition of PGE₂ or selective EP₂ receptor agonist to activated Caco-2 cells inhibited VEGF production. The autocrine inhibitory role for PGE₂ appears to be selective to hypertonic environment since VEGF production induced by exposure to CoCl₂ was decreased by inhibition of concomitant PGE₂ generation. Our results indicated that hypertonicity stimulates VEGF production in colon cancer cell lines. Also PGE₂ plays an inhibitory role on VEGF production by Caco-2 cells exposed to hyperosmotic stress through EP₂ activation.

Citation: Gentile LB, Piva B, Diaz BL (2011) Hypertonic Stress Induces VEGF Production in Human Colon Cancer Cell Line Caco-2: Inhibitory Role of Autocrine PGE₂. PLoS ONE 6(9): e25193. doi:10.1371/journal.pone.0025193

Editor: Ben C. B. Ko, Chinese University of Hong Kong, Hong Kong

Received: December 17, 2010; **Accepted:** August 30, 2011; **Published:** September 28, 2011

Copyright: © 2011 Gentile et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Funding: This work was supported by grants from Conselho Nacional de Desenvolvimento Científico e Tecnológico (CNPq, Brazil) and Fundação Carlos Chagas Filho de Amparo a Pesquisa do Estado do Rio de Janeiro (FAPERJ, Brazil) (to BLD) and a Ministry of Health (Brazil) PhD fellowship (to LBG). The funders had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript.

Competing Interests: The authors have declared that no competing interests exist.

* E-mail: bldiaz@biof.ufrj.br

Introduction

Formation of new blood vessels from pre-existing vasculature is a central process in the development of most tumors especially solid ones. This process is called angiogenesis and is regulated by the balance of negative and positive biochemical signals. The newly formed blood vessels are responsible for supplying oxygen and nutrients for the growing tumor mass and a route for dissemination of metastatic cancerous cells. VEGF is the most prominent positive regulator of angiogenesis due to its ability to recruit endothelial cells to hypoxic sites and to stimulate the proliferation of this cellular type, promoting the differentiation of vascular structures [1]. VEGF expression correlates positively with negative outcome in cancer patients. In colon cancer, expression of VEGF correlates with increased metastatic potential [2], while expression of its receptor is a marker of shorter post-operative survival [3].

VEGF expression is up regulated in response to micro-environmental cues related to poor blood supply such as hypoxia

[4], acidosis [5] and low nutrient levels [6]. In tumors, decreased levels of O₂ leads to HIF-1 α stabilization, a subunit of the transcriptional factor HIF-1, and subsequent transcriptional activation of genes presenting a hypoxia-responsive element (HRE) in their promoters, such as VEGF. However, VEGF expression regulation in cancer cells is not limited to the stress response due to the increased volume of the tumor mass. Several other factors have been shown to induce VEGF such as reactive oxygen species [7–9], growth factors [10,11], cytokines [12], and lipid mediators [13–16]. Arachidonic acid-derived prostaglandin (PG)E₂ is a major regulator of VEGF expression and angiogenesis in several different cancer types and in colon cancer in particular. Exogenous PGE₂ induces HIF-1 α stabilization [13] and VEGF expression [17] in colon cancer cell lines. VEGF and COX-2 expression and tumor angiogenesis are positively correlated in colon cancer samples [18–20].

However, hypoxia is not the only external stress stimulus which activates cellular responses in colon cancer. The continuously

changing contents of intestinal lumen expose normal and cancerous epithelial cells to a myriad of stimuli. Such physiological stimulation may provide signaling for cancer promotion. In fact, increased osmolarity that is generated during the process of colonic water absorption and feces consolidation [21–23] appears to activate colon cancer cells and promote COX-2 expression and PGE₂ generation but does not activate normal intestinal cells [24]. Our aim in this study was to determine the effect of hypertonic stress on VEGF production by Caco-2 colon cancer cell line. The potential role of autocrine PGE₂ and MAPK signaling pathways in the modulation of VEGF generation was also analyzed.

Methods

Reagents

Sodium chloride (NaCl) was obtained from Sigma Chemical Co. (St. Louis, MO) and dissolved in sterile water for a stock solution at 2 M concentration. The iPLA₂ inhibitor, Bromoenol lactone (BEL), the cPLA₂/iPLA₂ inhibitor, Arachidonyl Trifluoromethyl Ketone (ATK), and Prostaglandin E₂ were purchased from Cayman Chemical Co. (Ann Arbor, MI) and diluted in ethanol accordingly to manufacturer's instructions. The inhibitors for COX-2, NS-398 (Cayman); p38, SB202190; JNK, SP600125; MEK1/2, U0126 (all from BIOMOL, Plymouth Meeting, PA) were diluted in DMSO (Sigma). Monoclonal antibodies for immunoblot assays were anti-COX-2 IgG mouse (clone 33) from BD Transduction Laboratories and anti-GAPDH (clone 6C5) IgG mouse from Santa Cruz Biotechnology (Santa Cruz, CA), diluted at 0.003 µg/mL. The goat HRP-linked secondary antibody anti-mouse IgG from Santa Cruz Biotechnology was used at 0.1 µg/mL.

Cell culture and treatments

Caco-2 (ATCC HTB-37, gift of Dr. José Morgado Díaz, Instituto Nacional de Câncer, Brazil) cell line was maintained in Dulbecco Modified Eagle medium (DMEM) supplemented with 10% fetal bovine serum (FBS), 44 mM NaHCO₃, 1 mM NaH₂PO₄·H₂O, 1 mM sodium pyruvate, 10 mM HEPES, MEM vitamins solution, MEM essential and non-essential amino acids solution, 2 mM L-glutamine, 55 µM β-mercaptoethanol, 100 U/mL penicillin, and 100 µg/mL streptomycin (all cell culture reagents from Invitrogen). IEC-6 cell line (Rio de Janeiro Cell Bank, Brazil) was maintained in DMEM supplemented with 5% FBS and 100 U/mL penicillin, and 100 µg/mL streptomycin. Cells were maintained in culture flasks (cell growth surface area 25, 75 and 150 cm²). Cells were collected by 0.25% trypsin and 0.38 g/L EDTA in HBSS without Ca⁺⁺ and Mg⁺⁺ and 5 × 10⁵ cells/well were plated in 6-well flat-bottom plates (area of 9.03 cm²/well, Techno Plastic Products, Switzerland). 1.9 mL of fresh supplemented DMEM culture medium was added to culture wells with or without pharmacological inhibitors and cells were incubated for 15 min (30 min for MAP kinases inhibitors) at 37°C. All cells received the same amount of vehicle, therefore, the final concentration was below 0.1% of DMSO or ethanol and did not modify cell activation. Cells were stimulated with the addition of 0–100 µL of 2 M NaCl solution. DMEM was added to the well to complete final volume of 2 mL. Final osmolarity of the medium after addition of 100 mM NaCl was approximately 540 mOsm as compared to 367 mOsm of isosmotic medium. Medium osmolarity was empirically determined by freezing method using an osmometer (Advanced Instruments Inc., Norwood, MA). To minimize variation in the kinetic experiments the total time in culture after plating was the same for every time point analyzed.

Determination of PGE₂ and VEGF on supernatants

The PGE₂ production by Caco-2 cell line was determined by EIA in culture supernatant accordingly to manufacturer's instructions (Cayman) and as described before [25]. Briefly, culture medium was collected 24 h after cellular activation by hypertonic stress and centrifuged at 250 × g for 5 min to remove floating cells and frozen at –70°C. PGE₂ levels were assayed using a monoclonal antibody PGE₂ EIA Kit. After development plate was read at 405 nm in a plate reader (Spectra Max 190, Molecular Devices, Sunnyvale, CA). The VEGF production by Caco-2 cell line was determined by ELISA in culture supernatant accordingly to manufacturer's instructions (R&D Systems, UK). Briefly, culture medium was collected 24 h after cellular activation by hypertonic stress and centrifuged at 250 × g for 5 min to remove floating cells and frozen at –70°C. VEGF levels were assayed using a human VEGF DuoSet (R&D Systems, UK). After development plate was read at 450 nm in a plate reader (Spectra Max 190, Molecular Devices, Sunnyvale, CA).

Immunoblot analysis

Cells were collected with a cell scraper (COSTAR) and 100 µL of 10% SDS was added per well of the 6-well cell culture plate. 100 µL of 2 × loading buffer (1.4 M β-mercaptoethanol, 184 mM Tris base, 80 µM Bromophenol blue, 3% glycerol, 8% SDS, pH 6.8) was added to the cell lysate. Cellular lysates were immediately heated at 100°C for 5 minutes prior to sonication at 30% of amplitude and 30 J of energy in a high intensity ultra-sonic processor. Samples were resolved by electrophoresis on a SDS-PAGE 10% polyacrylamide gel at 29 mA/gel for 1 h. Separated proteins were transferred to nitrocellulose membranes (Santa Cruz) and blocked in 5% non-fat dry milk in 1 × TBS (Tris 10 mM; NaCl 150 mM pH 7.4) for 12 h for COX-2 labeling, or for 2 h for all other antibodies at room temperature. After washing, membranes were incubated with primary antibodies diluted in TTBS (TBS with 0.2% Tween 20) and 0.05% sodium azide for 2 hours at room temperature for COX-2 or 12 hours at 4°C for other antibodies. After secondary labeling with HRP-linked anti-IgG antibodies, proteins were analyzed using ECL Western Blotting Analysis System (Amersham Biosciences).

Statistical analysis

Data are expressed as mean ± standard error of the mean (SEM) of experiments performed in triplicates. Graphs and western blots shown are representative of at least three independent experiments. Multiple comparisons among groups were performed by one-way ANOVA followed by Bonferroni's or Dunnett's test (Prism version 4.03, Graphpad Software, Inc. La Jolla, CA). The symbols ⁺ and ^{*} represent *p* values < 0.05 when compared to control non-stimulated group or hypertonic stress/CoCl₂-stimulated group respectively.

Results

Hypertonic stress induces VEGF production by Caco-2 and PGE₂ modulates the angiogenic factor production in this environmental stress

Hypertonic stress stimulates the VEGF production by Caco-2 after 24 hours of activation (Figure 1A) following the same dose response and time course (data not shown) of PGE₂ generation under the same stimulatory conditions [24]. As PGE₂ has been described to play a role in angiogenesis and VEGF production we determined whether PGE₂ was regulating VEGF production by Caco-2 during the stimulation with hypertonic medium. Inhibition of PGE₂ production by treatment with cPLA₂ (ATK) (Figure 1B)

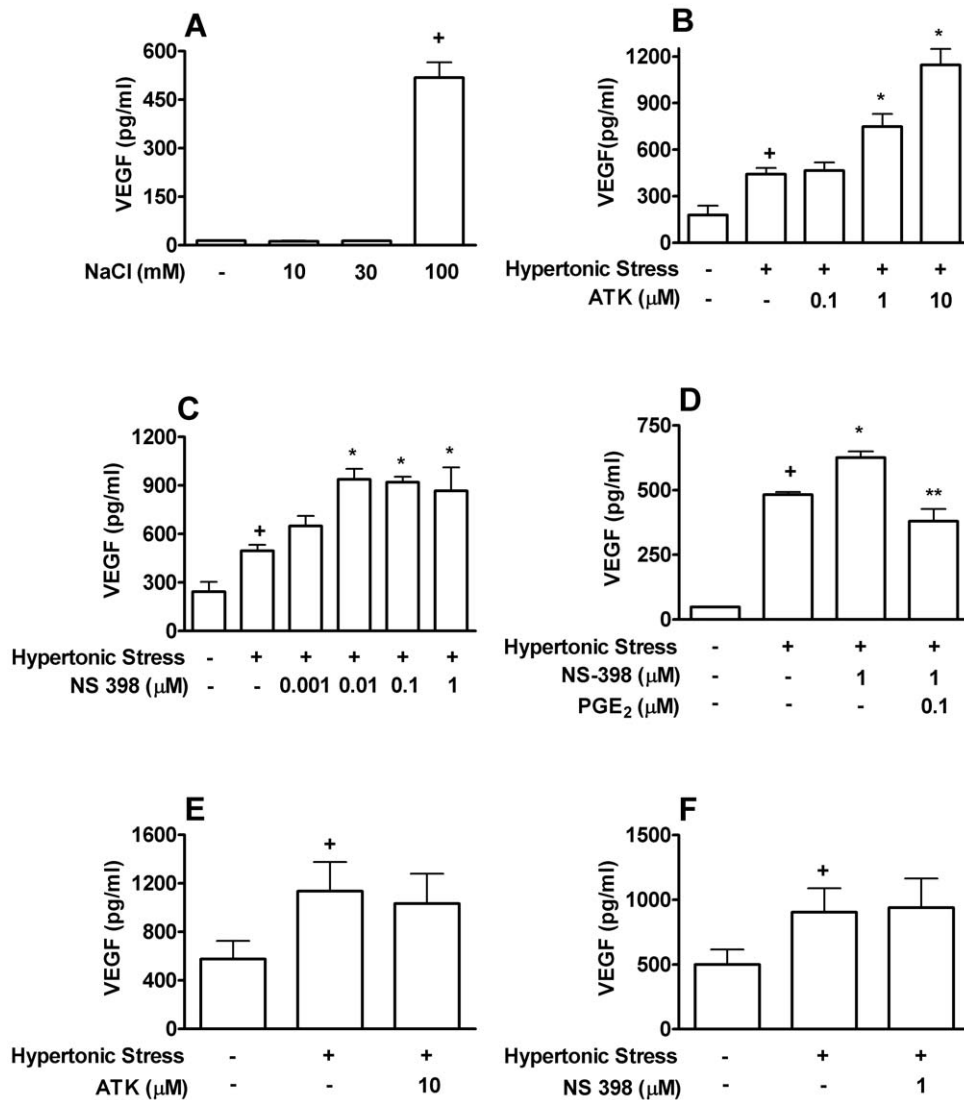


Figure 1. Endogenous PGE₂ modulates VEGF production by hypertonic stress-stimulated Caco-2 cells. (A) Caco-2 cells were stimulated with 10–100 mM of NaCl during 24 h before VEGF production analysis. VEGF production was determined by ELISA in supernatants of Caco-2 cells stimulated with hypertonic stress (100 mM NaCl) during 24 h after pre-treatment with inhibitors of cPLA₂, ATK (B); COX-2, NS-398 (C) or PGE₂ (D). HCT116 cells were stimulated with 100 mM of NaCl during 24 h after pre-treatment with inhibitors of cPLA₂, ATK (E); COX-2, NS-398 (F). +, * $p < 0.05$, to non-stimulated cells or stimulated cells, respectively. ** $p < 0.05$, when compared to NS-398-treated cells. Graph bars show means \pm SEM from triplicate samples.

doi:10.1371/journal.pone.0025193.g001

or COX-2 (NS-398) (Figure 1C) inhibitors increased VEGF production. This phenomenon was reversed by the addition of PGE₂ to the cell culture medium (Figure 1D) indicating a specific role for PGE₂.

To verify whether inhibition of VEGF production by Caco-2 stimulated with hypertonic stress was a consequence of PGE₂ action and not a consequence of the nonspecific action of pharmacological drugs used in the experiments, we performed the same experiment in HCT116, a colon cancer cell line that does not express COX-2 and produces no detectable levels of PGE₂ under hypertonic stress. We did not observe any changes in the VEGF production, excluding the possibility of interference of the pharmacological inhibitors (Figures 1E and F). Those results showed that PGE₂ produced by Caco-2 activated by hypertonic stress has an autocrine inhibitory action on VEGF production.

EP₂ receptor plays a role in the regulation of VEGF production through PGE₂ in Caco-2 stimulated with hypertonic stress

To determine what is the mechanism of action of PGE₂ in the regulation of VEGF production in hypertonic stress, Caco-2 cells were activated with hypertonic medium during 24 hours and treated with AH6809, an EP receptor antagonist. We verified the inhibition of EP receptor signaling caused an increase of VEGF production (Figure 2A). Then, to identify which specific receptor is involved in this phenomenon Caco-2 were stimulated with hypertonic medium and treated with ATK and EP receptors agonists. The cPLA₂ inhibitor (ATK) removed the interference of PGE₂ produced by colon cancer cells and EP receptors were activated only by exogenously added agonists. Accordingly, figure 2B shows that treatment with ATK increases VEGF production and when PGE₂ or

16,16-dimethyl PGE₂, a pan EP receptor agonist, were added to the medium this effect was reversed, reinforcing that EP receptor activation has an inhibitory effect on VEGF production. Increase in VEGF production by inhibition of endogenous PGE₂ was also reversed by butaprost, a specific EP2 receptor agonist (Figure 2B). Activation with EP1, 17-phenyl-trinor-PGE₂, or EP3, Sulprostone, agonists had no effect on increased VEGF production. Since EP4 expression seems to be absent in Caco-2 cells [26], our results indicate that endogenous PGE₂ modulates VEGF production induced by hypertonic stress through activation of EP2.

EP2 is a rhodopsin type receptor coupled to Gs and mediates increases in camp [27]. Thus we tested if PKA played a role in PGE₂ effects mediated through EP2 during hypertonic stress. Inhibition of PKA by H-89 increased VEGF production by Caco-2 cells exposed to hypertonic medium (Figure 2C). Reinforcing the potential inhibitory pathway involving PGE₂-EP2-cAMP-PKA.

Role of endocrine PGE₂ on CoCl₂-induced VEGF production

We also verified whether PGE₂ had a role in the regulation of VEGF production under a standard stimulatory condition. To activate the Hypoxia-Induced Factor (HIF) pathway and simulate hypoxia, Caco-2 cells were activated with CoCl₂. After 24 hours of stimulation with CoCl₂, Caco-2 presented marked production of PGE₂ (Figure 3A) and increased expression of COX-2 (Figure 3B). Further experiments were performed after addition of 1 mM of CoCl₂ to the medium after 24 hours of activation. Moreover,

CoCl₂-stimulated PGE₂ generation is dependent on COX-2 as it was completely inhibited by NS-398 (Figure 3C).

Similar to hypertonic stress stimulation, CoCl₂-activated cell also produced VEGF (Figure 3D). However, autocrine PGE₂ appears to have an opposite effect in this condition since NS-398 treatment inhibited VEGF production (Figure 3E). Those results indicate that PGE₂ has a stimulatory autocrine role on VEGF production in CoCl₂ activation.

Role of MAPKs in VEGF production by Caco-2 cells

To determine if the VEGF production was differentially regulated in Caco-2 cells beyond the potential autocrine role of PGE₂, we turned to the identification of MAPK pathways involved. Since we have shown before a role for ERK 1/2, JNK and p38 in PGE₂ generation [24] and to avoid the potential problem this may pose to interpret the results, experiments were performed in the presence of 1 μM of NS-398. Pharmacological inhibition of ERK 1/2 and p38 pathways indicated a common role in activation by either hypertonic stress or CoCl₂ (Figures 4A and B). JNK role was more restricted, as SP 600125 markedly inhibited VEGF production induced by CoCl₂ activation while it did not affect VEGF production induced by hypertonic stress (Figures 4A and B).

Discussion

The role of PGE₂ in cancer development is usually described as an autocrine factor capable of modulating many aspects of the

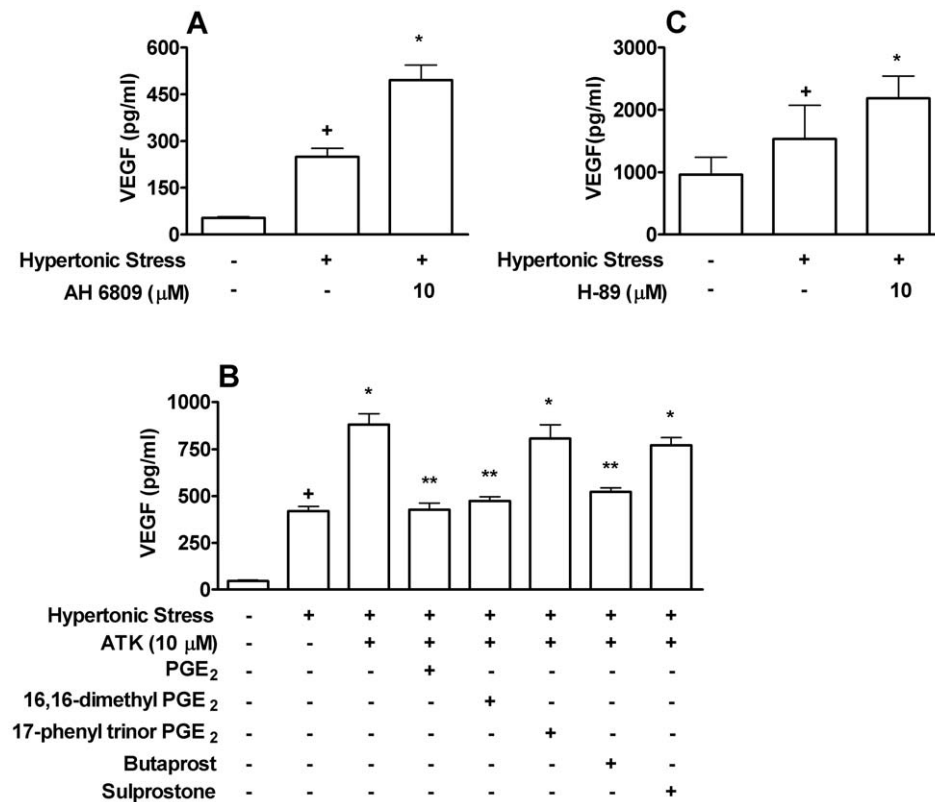


Figure 2. EP₂ receptor plays a role in endogenous PGE₂ regulation of VEGF production by Caco-2 stimulated with hypertonic stress. (A) Caco-2 cells were stimulated by hypertonic stress (100 mM NaCl) during 24 h after pre-treatment with EP and DP receptors antagonist, AH 6809 (A); with inhibitor of cPLA₂, ATK (10 μM); PGE₂; EP receptors agonist, 16,16-dimethyl Prostaglandin E₂; EP1 and EP3 receptors agonist, 17-phenyl trinor Prostaglandin E₂; EP2 receptor agonist, butaprost and EP3 receptor agonist, sulprostone (B); or with PKA inhibitor, H-89. PGE₂ and its analogs were used at 0.1 μM. VEGF production was determined by ELISA in supernatants of Caco-2 cells. +, * *p* < 0.05, when compared to non-stimulated cells or stimulated cells, respectively. ** *p* < 0.05, when compared to ATK-treated cells. Graph bars show means ± SEM from triplicate samples. doi:10.1371/journal.pone.0025193.g002

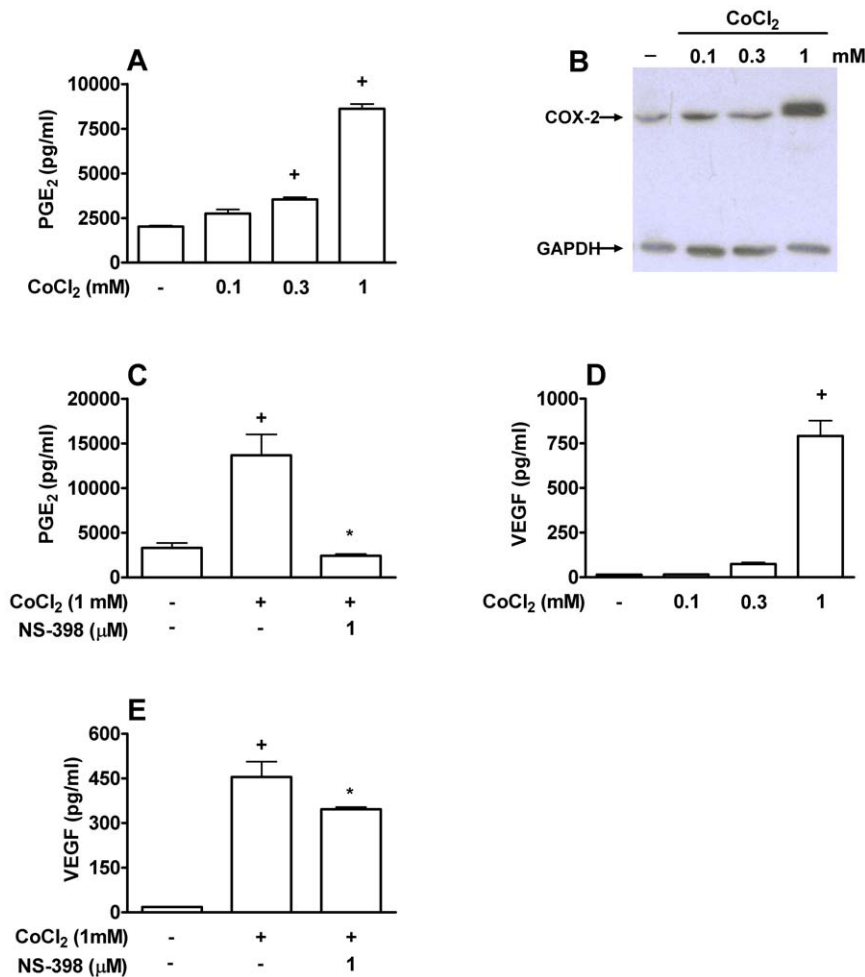


Figure 3. PGE₂ stimulates VEGF production by Caco-2 cells activated with CoCl₂. Caco-2 cells were stimulated with 0.1–1 mM of CoCl₂ during 24 h before PGE₂ and VEGF production (A and D, respectively) and COX-2 protein expression (B) analysis. PGE₂ and VEGF production by Caco-2 cells stimulated with 1 mM of CoCl₂ during 24 h after pre-treatment with inhibitor of COX-2, NS-398 (C and E, respectively). VEGF production by Caco-2 cells stimulated with 0.1–1 mM of CoCl₂ during 24 h (D). PGE₂ and VEGF production were determined by ELISA in supernatants of Caco-2 cells. COX-2 and GAPDH expression in cell pellets was analyzed by Western blotting. +, * $p < 0.05$, when compared to non-stimulated cells or stimulated cells, respectively. Graph bars show means \pm SEM from triplicate samples.
doi:10.1371/journal.pone.0025193.g003

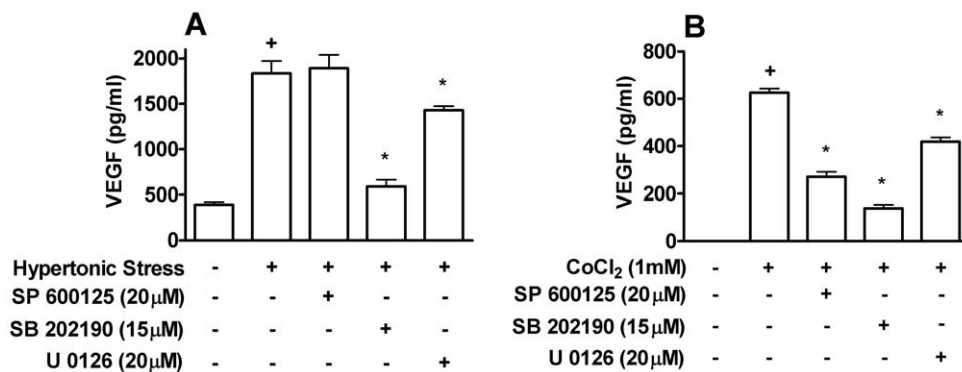


Figure 4. Role of MAPKs in VEGF production by Caco-2 cells. Inhibitors of JNK, SP600125; p38, SB202190; and MEK 1/2, U0126 were added before stimulation with hypertonic stress (100 mM NaCl) (A) or 1 mM CoCl₂ (B) for 24 h. Caco-2 cells were pretreated with 1 μM of NS-398 to prevent endogenous PGE₂ production in all samples. VEGF production was determined by ELISA in supernatants of Caco-2 cells. +, * $p < 0.05$, when compared to non-stimulated cells or stimulated cells, respectively. Graph bars show means \pm SEM from triplicate samples.
doi:10.1371/journal.pone.0025193.g004

cancer cell biology, in particular those of epithelial origin [28,29]. PGE₂ has been shown to increase proliferation, metastatic capacity and production of pro-angiogenic factors [17,30,31]. However, such studies usually lack information on the stimuli that will drive the arachidonic acid cascade and ultimately PGE₂ generation beyond induced expression of COX-2. We have recently demonstrated that a hyperosmotic milieu can induce COX-2 expression and PGE₂ generation in Caco-2 colon cancer cells [24]. Most importantly, hyperosmolarity can trigger the limiting step in PGE₂ generation by activating cPLA₂- α and inducing the release of free arachidonic acid. Normal intestinal epithelial cells showed no production of PGE₂ under the same hyperosmotic stimulus. Having identified a relevant physiological stimulus for colon cancer cells, we investigated the effect of hypertonic medium on the production of the major pro-angiogenic factor, VEGF, and the potential autocrine influence of PGE₂.

Exposure of Caco-2 cells to hypertonic medium led to a significant production of VEGF. As demonstrated before this VEGF production occurred in parallel with the PGE₂ generation. PGE₂ is described as a potent inducer of VEGF based on experiments where COX-2 overexpression increased VEGF production by colon and breast cancer cell lines. Furthermore, this VEGF production was inhibited by selective COX-2 inhibitors. We therefore sought to investigate the autocrine influence of PGE₂ generation on Caco-2 cells stimulated by hypertonic medium. Surprisingly, inhibition of either cPLA₂ or COX-2, by ATK or NS-398 respectively, further increased the production of VEGF. This effect could be attributed to inhibition of PGE₂ generation as restoration of PGE₂ levels by exogenous addition reverted VEGF production to its original levels in ATK treated Caco-2 cells. HCT116 cells can also be activated by hypertonic medium to produce VEGF. However, HCT116 cells neither express COX-2 nor produce PGE₂ [31] despite the cells being activated or not. Thus, the lack of effect of ATK and NS-398 on HCT116 excludes any potential off target effects of these inhibitors [32].

PGE₂ acts on a group of G-protein-coupled receptors (GPCRs). There are four GPCRs responding to PGE₂ designated subtypes EP1, EP2, EP3 and EP4, leading to distinct signaling pathway and overall biological effect [27]. To determine the dependence of PGE₂ autocrine effects on EP signaling, we used a nonspecific antagonist of all four EP receptors, AH 6809. The treatment with AH 6809 mimicked the effect of inhibition of VEGF production by PGE₂, indicating that PGE₂ signals through its plasma membrane receptors to down regulate VEGF production induced by hypertonic medium. The particular subtype involved appears to be EP2 as its selective agonist, Butaprost, is able to fully substitute for PGE₂. On the opposite, neither EP1 nor EP3 agonists treatments presented the inhibitory effect on VEGF production. EP2 seems to couple with increased cAMP levels and subsequent activation of PKA, as inhibition of PKA by H-89 reproduces the effects of inhibiting PGE₂ generation or action. It is important to note that the experiments were performed with PGE₂ and its analogs in concentrations that were compatible with the endogenously produced levels. Effects in VEGF production by colon cancer cells have been ascribed to PGE₂ using concentrations of up to 100 μ M [13] what far exceed the amount of PGE₂ actually needed to activate its receptors [27] or what is produced in the tumoral mass [33].

It has been shown the activation of EP2-cAMP-PKA-GSK-3 signaling pathway leads to decrease of beta-catenin phosphorylation, allowing its translocation and activation of Tcf/Lef dependent-transcription (for a review, see [34]) of genes involved

in cancer, such as COX-2 and VEGF. However, in our model of hypertonic stress, EP2 signaling pathway activation causes repression of VEGF production. To better understand the regulation of this pathway in the hypertonic stress we investigated the role of GSK-3 in this activation with the use of SB216763, a competitive GSK-3 α and β inhibitor (50–5000 nM, data not shown). The treatment increased the VEGF production, indicating that the inhibitory effect of EP2 on the angiogenic factor production is not dependent on this kinase. One possibility for the distinct effect of EP2 activation in hypertonic stress is that this regulation is occurring through cAMP. Some studies have been shown cAMP can inhibit the production of cytokines by inhibiting Ras-dependent signals by PKA, inactivating MEK/ERK signaling or by blocking phosphorylation of p38 MAPK [35–37]. As ERK/p38 MAPK pathway is involved in our model inducing VEGF production, such findings could be indicative of the mechanism by which EP2 signaling is blocking VEGF production in hypertonic stress.

To determine whether the inhibitory role of PGE₂ may be extended to other stimuli, we used CoCl₂ to induce HIF-1 α stabilization and mimic the response to hypoxia [13]. As shown for hypertonic stimulation, CoCl₂ induced PGE₂ generation was dependent on COX-2. The PGE₂ generation was also paralleled by VEGF production. Induction of VEGF production by CoCl₂ has been shown before in human fibroblasts [38], lung cancer cell line [39], retina epithelium [40], glioma cell lines [41], prostate cancer cell lines [42] and in astrocytes [43], however there was no attempt to investigate the potential production of PGE₂ or its autocrine effects. Inhibition of COX-2 inhibited VEGF production induced by CoCl₂, indicating a stimulatory role for PGE₂ and that the autocrine effect of PGE₂ is dependent on the type of stimuli used.

Hypertonic medium induces activation of several MAP kinases that may be involved in regulating VEGF expression [24]. Since these MAP kinases are also involved in stimulating cPLA₂- α activity and production of PGE₂, we eliminated the inhibitory effect of PGE₂ before attempting to analyse their role on VEGF production. Caco-2 cells activated by hypertonic medium in the presence of NS-398 clearly show a marked dependence on p38 and less so on ERK 1/2 to produce VEGF. CoCl₂-induced VEGF production by Caco-2 cells showed similar sensitivity profile to MAP kinase inhibitors with the exception of a marked reduction by the JNK inhibitor. The distinct roles for JNK pathway indicate that differences in hypertonic medium and CoCl₂-induced production of VEGF go beyond sensitivity to autocrine inhibitory effects of PGE₂. It is currently under investigation if such signaling differences may be responsible for the distinct effects of PGE₂ on each type of stimuli.

One of the hallmarks in the current model for the regulation of angiogenesis in the tumor mass, particularly in colon cancer, is the regulation of endothelial cell function by the cancerous cells. Accordingly, the role of PGE₂ in angiogenesis is limited to an autocrine stimulation of pro-angiogenic factors production by the tumor cell. Although interesting, this model neither comprises the potential external stimuli involved in COX-2 expression and VEGF production nor situations where the cell expressing COX-2 and producing PGE₂ is other than the cancer cell. For instance, ectopic growth of HCT116 and HT29, cells that do not express COX-2 or produce PGE₂, is dependent on COX-2 expression by endothelial and stromal cells [44]. COX-2 expression in mouse models of familial adenomatous polyposis, *Min* [33,44] and *Apc* ^{Δ 716} [45] mice, is restricted to stromal and interstitial cells. Differences in JNK dependency and autocrine PGE₂ inhibitory

effect on VEGF production by the same colon cancer cell line are a clear indication on how the model must also take into account that these cells are exposed to different microenvironmental stimuli.

Acknowledgments

The authors wish to thank Dr Karen A. Bell for her comments on the manuscript.

References

- Ferrara N (2004) Vascular Endothelial Growth Factor: Basic Science and Clinical Progress. *Endocr Rev* 25: 581–611.
- Takahashi Y, Kitadai Y, Bucana CD, Cleary KR, Ellis LM (1995) Expression of vascular endothelial growth factor and its receptor, KDR, correlates with vascularity, metastasis, and proliferation of human colon cancer. *Cancer Res* 55: 3964–3968.
- Okita NT, Yamada Y, Takahari D, Hirashima Y, Matsubara J, et al. (2009) Vascular Endothelial Growth Factor Receptor Expression as a Prognostic Marker for Survival in Colorectal Cancer. *Jpn J Clin Oncol* 39: 595–600.
- Shweiki D, Neeman M, Itin A, Keshet E (1995) Induction of Vascular Endothelial Growth Factor Expression by Hypoxia and by glucose Deficiency in Multicell Spheroids: Implications for Tumor Angiogenesis. *PNAS* 92: 768–772.
- Shi Q, Le X, Wang B, Abbruzzese JL, Xiong Q, et al. (2001) Regulation of vascular endothelial growth factor expression by acidosis in human cancer cells. *Oncogene* 20: 3751–3756.
- Bobrovnikova-Marjon EV, Marjon PL, Barbash O, Vander Jagt DL, Abcouwer SF (2004) Expression of Angiogenic Factors Vascular Endothelial Growth Factor and Interleukin-8/CXCL8 Is Highly Responsive to Ambient Glutamine Availability: Role of Nuclear Factor- κ B and Activating Protein-1. *Cancer Res* 64: 4858–4869.
- Kuroki M, Voest EE, Amano S, Beerepoot LV, Takashima S, et al. (1996) Reactive oxygen intermediates increase vascular endothelial growth factor expression in vitro and in vivo. *J Clin Invest* 98: 1667–1675.
- Brown NS, Streeter EH, Jones A, Harris AL, Bicknell R (2005) Cooperative stimulation of vascular endothelial growth factor expression by hypoxia and reactive oxygen species: the effect of targeting vascular endothelial growth factor and oxidative stress in an orthotopic xenograft model of bladder carcinoma. *Br J Cancer* 92: 1696–1701.
- Arbiser JL, Petros J, Klafier R, Govindajaran B, McLaughlin ER, et al. (2002) Reactive oxygen generated by Nox1 triggers the angiogenic switch. *PNAS* 99: 715–720.
- Bermont L, Lamielle F, Fauconnet S, Esumi H, Weisz A, et al. (2000) Regulation of vascular endothelial growth factor expression by insulin-like growth factor-I in endometrial adenocarcinoma cells. *Int J Cancer* 85: 117–123.
- Fukuda R, Hirota K, Fan F, Jung YD, Ellis LM, et al. (2002) Insulin-like growth factor 1 induces hypoxia-inducible factor 1-mediated vascular endothelial growth factor expression, which is dependent on MAP kinase and phosphatidylinositol 3-kinase signaling in colon cancer cells. *J Biol Chem* 277: 38205–38211.
- Cohen T, Nahari D, Cerem LW, Neufeld G, Levi BZ (1996) Interleukin 6 induces the expression of vascular endothelial growth factor. *J Biol Chem* 271: 736–741.
- Fukuda R, Kelly B, Semenza GL (2003) Vascular Endothelial Growth Factor Gene Expression in Colon Cancer Cells Exposed to Prostaglandin E2 Is Mediated by Hypoxia-inducible Factor 1. *Cancer Res* 63: 2330.
- Jurek D, Udilova N, Jozkowicz A, Nohl H, Marian B, et al. (2005) Dietary lipid hydroperoxides induce expression of vascular endothelial growth factor (VEGF) in human colorectal tumor cells. *FASEB J* 19: 97–99.
- Ko HM, Seo KH, Han SJ, Ahn KY, Choi IH, et al. (2002) Nuclear factor kappaB dependency of platelet-activating factor-induced angiogenesis. *Cancer Res* 62: 1809–1814.
- Mezentsev A, Seta F, Dunn MW, Ono N, Falck JR, et al. (2002) Eicosanoid regulation of vascular endothelial growth factor expression and angiogenesis in microvessel endothelial cells. *J Biol Chem* 277: 18670–18676.
- Tsuji M, Kawano S, Tsuji S, Sawaoka H, Hori M, et al. (1998) Cyclooxygenase regulates angiogenesis induced by colon cancer cells. *Cell* 93: 705–716.
- Cianchi F, Cortesini C, Bechi P, Messerini L, Vannacci A, et al. (2001) Up-regulation of cyclooxygenase 2 gene expression correlates with tumor angiogenesis in human colorectal cancer. *Gastroenterology* 121: 1339–1347.
- Chapple KS, Scott N, Guillou PJ, Coletta PL, Hull MA (2002) Interstitial cell cyclooxygenase-2 expression is associated with increased angiogenesis in human sporadic colorectal adenomas. *Journal of Pathology* 198: 435–441.
- Rao M, Yang W, Seifalian AM, Winslet MC (2004) Role of cyclooxygenase-2 in the angiogenesis of colorectal cancer. *International Journal of Colorectal Disease* 19: 1–11.
- Powell DW (1995) Dogma destroyed: colonic crypts absorb. *J Clin Invest* 96: 2102–2103.
- Thiagarajah JR, Jayaraman S, Naftalin RJ, Verkman AS (2001) In vivo fluorescence measurement of Na(+) concentration in the pericryptal space of mouse descending colon. *Am J Physiol Cell Physiol* 281: C1898–C1903.
- Naftalin RJ (1994) The dehydrating function of the descending colon in relationship to crypt function. *Physiol Res* 43: 65–73.
- Gentile LB, Piva B, Capizzani BC, Furlaneto LG, Moreira LS, et al. (2010) Hypertonic environment elicits cyclooxygenase-2-driven prostaglandin E2 generation by colon cancer cells: role of cytosolic phospholipase A2-alpha and kinase signaling pathways. *Prostaglandins Leukot Essent Fatty Acids* 82: 131–139.
- Moreira LS, Piva B, Gentile LB, Mesquita-Santos FP, D'Avila H, et al. (2009) Cytosolic phospholipase A2-driven PGE2 synthesis within unsaturated fatty acids-induced lipid bodies of epithelial cells. *Biochimica et Biophysica Acta (BBA) - Molecular and Cell Biology of Lipids* 1791: 156–165.
- Shoji Y, Takahashi M, Kitamura T, Watanabe K, Kawamori T, et al. (2004) Downregulation of prostaglandin E receptor subtype EP3 during colon cancer development. *Gut* 53: 1151–1158.
- Narumiya S, Sugimoto Y, Ushikubi F (1999) Prostanoid Receptors: Structures, Properties, and Functions. *Physiol Rev* 79: 1193–1226.
- Greenhough A, Smartt HJ, Moore AE, Roberts HR, Williams AC, et al. (2009) The COX-2/PGE2 pathway: key roles in the hallmarks of cancer and adaptation to the tumour microenvironment. *Carcinogenesis* 30: 377–386.
- Wang D, DuBois RN (2010) The role of COX-2 in intestinal inflammation and colorectal cancer. *Oncogene* 29: 781–788.
- Tsuji M, Kawano S, DuBois RN (1997) Cyclooxygenase-2 expression in human colon cancer cells increases metastatic potential. *Proc Natl Acad Sci U S A* 94: 3336–3340.
- Sheng H, Shao J, Kirkland SC, Isakson P, Coffey RJ, et al. (1997) Inhibition of human colon cancer cell growth by selective inhibition of cyclooxygenase-2. *J Clin Invest* 99: 2254–2259.
- Zhong H, Willard M, Simons J (2004) NS398 reduces hypoxia-inducible factor (HIF)-1alpha and HIF-1 activity: multiple-level effects involving cyclooxygenase-2 dependent and independent mechanisms. *Int J Cancer* 112: 585–595.
- Chulada PC, Thompson MB, Mahler JF, Doyle CM, Gaul BW, et al. (2000) Genetic disruption of PtgS-1, as well as PtgS-2, reduces intestinal tumorigenesis in Min mice. *Cancer Res* 60: 4705–4708.
- Regan JW (2003) EP2 and EP4 prostanoid receptor signaling. *Life Sci* 74: 143–153.
- Grader-Beck T, van Puijenbroek AA, Nadler LM, Boussiotis VA (2003) cAMP inhibits both Ras and Rap1 activation in primary human T lymphocytes, but only Ras inhibition correlates with blockade of cell cycle progression. *Blood* 101: 998–1006.
- Feng WG, Wang YB, Zhang JS, Wang XY, Li CL, et al. (2002) cAMP elevators inhibit LPS-induced IL-12 p40 expression by interfering with phosphorylation of p38 MAPK in murine peritoneal macrophages. *Cell Res* 12: 331–337.
- D'Angelo G, Lee H, Weiner RI (1997) cAMP-dependent protein kinase inhibits the mitogenic action of vascular endothelial growth factor and fibroblast growth factor in capillary endothelial cells by blocking Raf activation. *J Cell Biochem* 67: 353–366.
- Poulios E, Trougakos IP, Gonos ES (2006) Comparative effects of hypoxia on normal and immortalized human diploid fibroblasts. *Anticancer Res* 26: 2165–2168.
- Litz J, Krystal GW (2006) Imatinib inhibits c-Kit-induced hypoxia-inducible factor-1alpha activity and vascular endothelial growth factor expression in small cell lung cancer cells. *Mol Cancer Ther* 5: 1415–1422.
- Cai J, Jiang WG, Grant MB, Boulton M (2006) Pigment epithelium-derived factor inhibits angiogenesis via regulated intracellular proteolysis of vascular endothelial growth factor receptor 1. *J Biol Chem* 281: 3604–3613.
- Newcomb EW, Lukyanov Y, Schnee T, Ali MA, Lan L, et al. (2006) Noscapine inhibits hypoxia-mediated HIF-1alpha expression and angiogenesis in vitro: a novel function for an old drug. *Int J Oncol* 28: 1121–1130.
- Liu XH, Kirschenbaum A, Yao S, Stearns ME, Holland JF, et al. (1999) Upregulation of vascular endothelial growth factor by cobalt chloride-simulated hypoxia is mediated by persistent induction of cyclooxygenase-2 in a metastatic human prostate cancer cell line. *Clin Exp Metastasis* 17: 687–694.
- Ijichi A, Sakuma S, Tofflon PJ (1995) Hypoxia-induced vascular endothelial growth factor expression in normal rat astrocyte cultures. *Glia* 14: 87–93.

Author Contributions

Conceived and designed the experiments: BLD LBG. Performed the experiments: LBG BP. Analyzed the data: LBG BP BLD. Wrote the paper: BLD LBG.

44. Leahy KM, Ornberg RL, Wang Y, Zweifel BS, Koki AT, et al. (2002) Cyclooxygenase-2 Inhibition by Celecoxib Reduces Proliferation and Induces Apoptosis in Angiogenic Endothelial Cells in Vivo. *Cancer Res* 62: 625–631.
45. Takeda H, Sonoshita M, Oshima H, Sugihara Ki, Chulada PC, et al. (2003) Cooperation of Cyclooxygenase 1 and Cyclooxygenase 2 in Intestinal Polyposis. *Cancer Res* 63: 4872–4877.