

3-Methylquercetin 對離體天竺鼠氣管的鬆弛作用

Relaxant Effect of 3-Methylquercetin in Isolated guinea Pig Trachea

中文摘要

3-Methylquercetin(3-MQ)可使離體天竺鼠氣管產生鬆弛作用，它對 histamine(30 μ M)、carbachol(0.2 μ M)及 isotonic KCl(17.5mM)預先收縮的 IC₅₀ 分別為 13.98 \pm 2.54(n=7)、14.56 \pm 0.92(n=6)及 21.15 \pm 2.92(n=9) μ M，彼此間無意義差，顯示無特殊選擇性。

3-MQ(30 μ M)預處理 20 分鐘，對累加 histamine 引起的收縮呈非競爭性的抑制，求得的 pD₂'s 值為 5.29 \pm 0.15(n=8)，有意義的大於鬆弛 histamine(30 μ M)預縮的 -logIC₅₀，顯示對內鈣釋放的抑制較有選擇性。

3-MQ(30 μ M)對高鉀(60mM)無鈣溶液，因外鈣增加而引起的收縮，能有意義的抑制，顯示它會抑制外鈣經由 voltage dependent calcium channel (VDC) 的流入。然而對 histamine(30 μ M)的預縮，它能夠使 nifedipine(10 μ M)的最大鬆弛進一步鬆弛，顯示它除了可能抑制 VDC 外尚有其他鬆弛機轉。

3-MQ 的鬆弛作用無須仰賴上皮細胞，亦與 β -受體活化或鉀通道開啓無關。它的鬆弛作用不被 2',5'-dideoxyadenosine(10 μ M)、methylene blue(25 μ M)或 oxyhemoglobin(10 μ M)所影響，顯示它的鬆弛作用並非活化 adenylate cyclase 或 guanylate cyclase 而來。但它(30-100 μ M)類似 protein kinase C (PKC)抑制劑 staurosporine(0.003-1 μ M)能劑量依存性地抑制 PKC 活化劑 phorbol 12-myristate 13-acetate(10 μ M)引起的氣管收縮，因此它對 PKC 可能也有抑制作用，而使氣管平滑肌鬆弛。因 3-MQ(15 μ M)也會使 staurosporine(1 μ M)或 nifedipine(10 μ M)及 staurosporine(1 μ M)之共同存在下的最大鬆弛進一步鬆弛，因此不能排除它抑制 PKC 外，尚有其他鬆弛機轉。3-MQ(7.5 及 15 μ M)像 3-isobutyl-1-methyl-xanthine(3 及 6 μ M)能使累積用量方式加入的 forskolin 或 nitroprusside 之對數劑量-反應曲線向左平行移動，而且呈劑量依存性，顯示它也有可能抑制 phosphodiesterase (PDE)。

3-MQ 使氣管鬆弛的可能機轉包括抑制外鈣流入和內鈣釋放、抑制 PKC 及抑制 PDE 而來。

英文摘要

3-Methylquercetin (3-MQ) had relaxant effects in guinea pig trachealis. Its IC₅₀ was 13.98 \pm 2.54 (n=7), 14.56 \pm 0.92 (n=6) and 21.15 \pm 2.92 (n=9) μ M for the precontractions induced by histamine (30 μ M), carbachol (0.2 μ M) and isotonic KCl (17.5 mM), respectively. There was no significant difference among them. It shows that 3-MQ has no special selectivity to these three contractile agents.

Pretreatment of tracheas with 3-MQ (30 μ M) for 20 min non-competitively inhibited the contractions induced by cumulative histamine. Its calculated pD_{25} value was 5.29 ± 0.15 ($n=8$). It is significantly greater than the $-\log IC_{50}$ for the precontraction induced by histamine (30 μ M). It shows that 3-MQ selectively inhibits more on the calcium release from intracellular calcium stores. 3-MQ (30 μ M) significantly inhibited the cumulative calcium-induced contractions in guinea pig trachealis, incubated in high potassium (60 mM) calcium-free medium. This suggests that 3-MQ may inhibit calcium influx through voltage dependent calcium channels (VDC). However, it produced further relaxation after nifedipine (10 μ M)-induced maximal relaxation. This suggests that 3-MQ may have other relaxing mechanism in addition to its inhibiting VDC.

The relaxant effect of 3-MQ was epithelium-independent, and was not correlated to β adrenoreceptor activation or potassium channel opening. Its relaxant effect was not affected by 2',5'-dideoxyadenosine (10 μ M), methylene blue (25 μ M) or oxyhemoglobin (10 μ M). The data suggest that the relaxant effect of 3-MQ may be not via activation of adenylate cyclase or guanylate cyclase. However, 3-MQ, similar to protein kinase C (PKC) inhibitor staurosporine (0.003-1 μ M), dose-dependently inhibited the precontraction induced by phorbol 12-myristate 13-acetate (10 μ M), an activator of PKC in guinea pig trachealis. Therefore the relaxant effect of 3-MQ may also be via inhibiting the PKC activity. However, 3-MQ (15 μ M) produced further relaxation after the relaxant effect produced by either staurosporine (1 μ M)- or nifedipine (10 μ M) and staurosporine (1 μ M). Therefore it may have additional relaxing mechanism. 3-MQ (7.5 and 15 μ M), similar to 3-isobutyl-1-methyl-xanthine (3 and 6 μ M), parallelly shifted leftward the log dose-response curves of forskolin and nitroprusside in a dose-dependent fashion. This shows that 3-MQ may also inhibit activity of phosphodiesterase (PDE).

3-MQ may relax tracheali via inhibition of calcium influx, calcium release from intracellular calcium stores, PKC, and PDE