

Figure 3 Suppression of AITC-induced current density in DRG neurons by artemin. (A, B): Representative traces show TRPA1 currents produced by AITC application (300 μM, 1 min) in the absence (A) or presence (B) of artemin (100 ng/ml). AITC was applied for 1 min after artemin administration for 2 min. (C): Bar graph shows the effect of artemin on AITC activated current density (pA/pF). Numbers in parenthesis indicate cells tested. * p < 0.05 versus control (absence of artemin), unpaired t-test. (D): Concentration-response curves for AITC-induced current in the present or absence of artemin. Figure shows averaged data fitted with the Hill equation (see methods). EC50 = 343 μM and Maximum current density = -64.4 pA/pF in the absence of artemin, EC50 = 396 μM and Maximum current density = -19.8 pA/pF in the presence of artemin. Data for each point were generated from separate neurons by application of AITC for 1 min after pretreatment of artemin or vehicle. Holding potential (Vh) = -60 mV in all experiments.

induced a significant lifting and flinching behavior of the injected hindpaw during the 30 or 60 min post-injection period, whereas such behaviors were not observed in vehicle-injected rats (data not shown). The injection of artemin did not cause any inflammatory reactions (e.g. redness, swelling) and acute nocifensive behavior (e.g. paw lifting, flinching or licking). Five min after pre-treatment with the artemin, AITC or formalin was injected into the

same area of the hind paw. Pre-treatment with artemin induced a significant decrease of the number of paw lifts and the duration of paw flinches in the initial 30 min post-injection period of AITC, compared to those of rats pre-treated with vehicle (Figure 4). Administration of artemin preceding the formalin injection also reduced the number of flinches observed in both Phase I (0-5 min) and Phase II (10-60 min) (Figure 5).

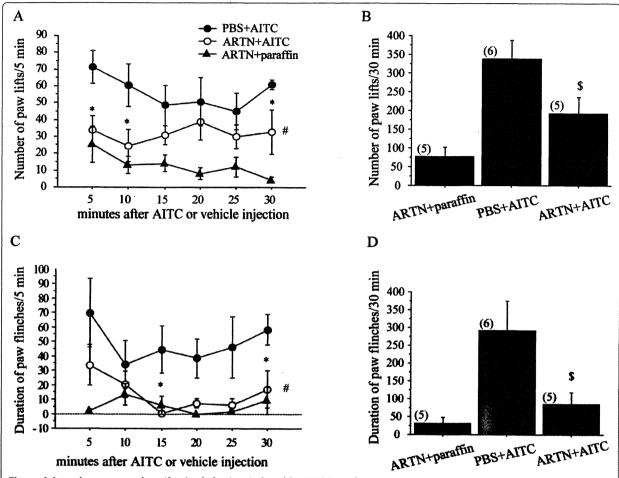


Figure 4 Artemin suppressed nocifensive behaviors induced by AITC intraplantar injection. Artemin (10 μg/ml) or PBS was pre-treated subcutaneously 5 min before AITC (3% in 50 μl liquid paraffin) injection. (A-D): Left panels show the time course of the number of hind paw liftings (A) and the duration of paw flinches (C) after AITC injection with artemin (ARTN) or PBS pre-treatment. The number counted per 5 min interval in the initial 30 min post-injection period. Right panels show cumulative number of paw lifts (B) and cumulative duration of flinches (D) over the first 30 min period after injection of AITC. * p < 0.05; versus PBS + AITC at each time point (unpaired t-test), # p < 0.05; ## p < 0.001; versus PBS + AITC group (two-way repeated ANOVA followed by Fisher's PLSD), \$ p < 0.05; \$\$ p < 0.01; versus PBS + AITC group (two-way factorial ANOVA). Numbers in parentheses indicate number of rats used in each group.

Discussion

In recent years, the role of artemin, a GDNF family member, in mediating neuropathic and inflammatory pain has been received much attention. Artemin is known to be one of the survival factors for sensory and sympathetic neurons in vitro and in vivo. The long-term intrathecal or systemic administration of artemin prevented many of the nerve injury-induced changes in the histochemistry of nociceptor neurons, and produced dose- and time-related reversal of nerve injury-induced pain behaviors [26-28]. On the other hand, overexpression of artemin up-regulated expression of TRPV1 and TRPA1 channels and subsequently led to an increase of neuronal activity and hyperalgesia [2,20]. Acute application of artemin induced a significant potentiation of

TRPV1 function and produced acute thermal hyperalgesia [21]. In the present study, in contrast to the potentiation of TRPV1 function by artemin, we observed that a short-term application of artemin significantly suppressed TRPA1 channels activity and the TRPA1-mediated pain behaviors.

Artemin binds to GFR $\alpha 3/Ret$ to induce extracellular signals [1]. We found TRPA1 was highly coexpressed with GFR $\alpha 3$ and RET (Figure 1). This finding is consistent with a previous report that indicates nearly all GFR $\alpha 3$ -positive neurons express TRPV1 immunoreactivity, and most of these neurons are also TRPA1 positive [2]. The high co-localization of TRPA1 and GFR $\alpha 3$ provides a possible histological prerequisite of the functional interaction between these two molecules.

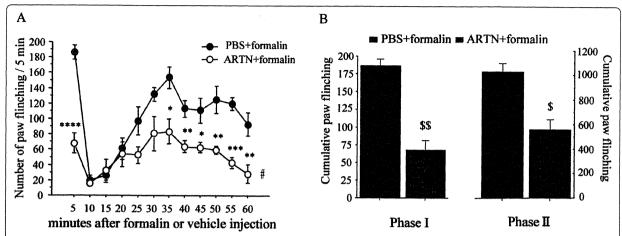


Figure 5 Artemin suppressed nocifensive behaviors induced by formalin. Artemin (10 μ g/ml) or PBS was pre-treated subcutaneously 5 min before formalin (3% in 50 μ l saline) injection. Time course (A) and cumulative data (B) of the number of hind paw flinches after formalin injection with artemin or PBS pre-treatment were measured. The number counted per 5 min interval in the initial 1 h post-injection period in A. B shows cumulative number of paw flinches during the Phase I (0-5 min) and the second Phase II (10-60 min) after injection of formalin. * p < 0.05; ** p < 0.01; *** p < 0.005; *** p < 0.0005; *** p < 0.0001 versus PBS + formalin (unpaired t-test), # p < 0.001; versus PBS + formalin (two-way repeated ANOVA followed by Fisher's PLSD), \$ p < 0.005; \$\$ p < 0.0001 versus PBS + formalin (two-way factorial ANOVA). Numbers in parentheses indicate number of rats used in each group.

We found in the present study that a short term application of artemin significant reduced the AITCinduced TRPA1 current. This inhibitory regulation was examined in two ways. First, artemin was delivered between two applications of AITC and then the normalized current (the next AITC-current versus the first one) was collected (Figure 2). This approach allowed us to confirm that the tested neuron was indeed a TRPA1expressing one, but tachyphylaxis of AITC-induced current may have interrupted the analysis and made it difficult to explain the reduced normalized current solely as an inhibition of TRPA1 channels, rather a cooperative effect of an artemin-induced inhibition and the tachyphylaxis may have taken place. Therefore, we also performed an experiment with sensory neurons pretreated by artemin and then applied AITC to evaluate the current density. Both of these results clearly indicated inhibitions of TRPA1 channel function by acute application of artemin.

Acute application of artemin has been reported to induce potentiation of another TRP channel, TRPV1, and produce acute thermal hyperalgesia [21], TRPV1 and TRPA1 are structurally endowed with the same TRP domain but have distinctly different intracellular loops. AITC activates TRPA1 by covalently modifying cysteine residues located in the N terminus of the channel, different from a classical lock-and-key binding mechanism for capsaicin-TRPV1. Thus it is not a wonder that the regulatory mechanism of TRPV1 and TRPA1 may differ. For example, PKC has been reported to potentiate TRPV1 [22,29,30] but did not have any

effect on TRPA1[23,24]. On the other hand, Elitt et al have reported that overexpression of artemin up-regulated expression of TRPV1 and TRPA1 channels and subsequently led to greater neuronal activity and hyperalgesia [2,20]. These reports suggested a post-transcriptional regulation of artemin (which might contribute as a neurotrophic factor) on TRPV1 and TRPA1 channels, are not discordant with our findings.

TRPA1 is known to be expressed on sensory neurons and acted as an important component of pain. If artemin can suppress the TRPA1activation, pain sensation that is caused through the TRPA1 channel may also be suppressed by the artemin activation. Topical application of AITC has been reported to excite sensory nerve fibers, thereby producing acute pain [5,17,31]. Consistent with our electrophysiological data, artemin produced a significantly persistent suppression of the duration of paw flinch and the number of paw lifts induced by intraplantar injection of AITC (Figure 3). A recent study indicates that TRPA1 is the principal site of formalin's pain-producing action in rodents [19]. The formalin test is a widely used model of continuous pain resulting from formalin-induced tissue injury. Subcutaneous injection of formalin into the rat hindpaw produces a biphasic pain response that consists of an early, acute phase (Phase I) and a late, tonic phase (Phase II) that is manifested behaviorally as lifting, flinching or licking of the affected paw, and these behaviors are robust and readily quantifiable [32,33]. Phase I is thought to result from direct activation of primary afferent sensory neurons, whereas Phase II has been

proposed reflect the combined effects of afferent input and central sensitization in the dorsal horn. In our present study, we found artemin treatment significantly suppressed the formalin-induced pain behaviors at both two phases (Figure 3). Direct inhibition of TRPA1 activity by local injection of artemin in the plantar nerve terminal may result the suppression of behaviors in Phases I, then the reduced input of primary afferent may contribute the reduction of pain behaviors in Phase II. These findings suggest that a short-term application of artemin inhibits the TRPA1 channel's activity and the sequential pain behaviors.

The mechanism of artemin-induced inhibition of TRPA1 activity is not clear. Two potential mechanisms are suggested to be involved in this regulation. One would be that artemin increases EC50 by suppressing the binding affinity of AITC to TRPA1. The other mechanism would be that artemin lowers the channel density of TRPA1 on cell membranes through promoting receptor internalization or by inhibiting membrane insertion of TRPA1 channels. In the present study, the concentration-response curves of AITC resulting from the effect of artemin (Figure 3C) revealed that artemin lowered the maximal response of AITC without conspicuously altering EC₅₀, indicating that artemin may suppress AITC response in DRG neurons principally by lowering the channel density. Distinct constitutive and regulated vesicular trafficking mechanisms have critical roles not only in controlling the surface expression of TRP channels but also their activation in response to stimuli [34]. TRPA1 may cycle between the plasma membrane and intracellular compartments, and the balance between membrane insertion and retrieval determines its surface abundance and activity [35]. A recent report indicated that TRPA1 channel desensitization in sensory neurons was regulated by internalization of itself [36]. Artemin-induced GFR α 3/RET activation results in stimulation of multiple signal transduction pathways, including the MAP kinase/Erk and PI3 kinase/Akt pathways. A potential mechanism of inhibition of TRPA1 by artemin in the present study may be the internalization of the channels, which is regulated by the downstream of GFR \alpha3/RET intracellular signals. On the other hand, it has been reported that TRPA1 is functionally inactivated in sensory neuron by extracellular Ca² influx [37]. Although activation of GFR \alpha3/RET signals results in intracellular Ca2 mobilization, however, it is not a likely mechanism for the AITC-evoked current decrease observed in our experiment. The reason simply comes from that cytosolic-free Ca2 is tightly chelated with the 5 mM EGTA included in the pipette solution. Anyway, detailed mechanisms of artemin regulation on TRPA1 need to be further studied.

Conclusions

Artemin is widely expressed in nervous system [38], supports the survival and regulates the differentiation of peripheral neurons, including sympathetic, parasympathetic, sensory and enteric neurons [3,39-41]. We now show the interaction of artemin and TRPA1 in the rat nervous system and provide a novel role of artemin in inhibitory regulation of sensory neurons in the current study. Artemin may have certain functions in both the neurotrophic effects and inhibitory actions on sensory neurons.

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Authors' contributions

NY carried out the electrophysiological and behavioral studies, performed the statistical analysis, and participated in drafting the manuscript. KK carried out the histochemistry studies. LY, GN, SW and SY participated in the electrophysiological studies. SW also participated in drafting the manuscript. KN supervised the project and edited the manuscript. YD conceived of the project, designed and coordinated the studies, and drafted the manuscript. All authors contributed to data interpretation, have read and approved the final manuscript.

Competing interests

The authors declare that they have no competing interests.

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脊髄障害性疼痛症候群の実態の把握と病態の解明に関する研究班

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