

## BIOPHYSICS AND BIOCHEMISTRY

# Effect of $\alpha_2$ -Adrenergic Receptor Stimulation on the Isolated Rat Heart against the Background of $I_f$ Blockade

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The study examined the effect of  $\alpha_2$ -adrenoreceptor ( $\alpha_2$ -AR) activation against the background of preliminary blockage of  $I_f$  on the performance of Langerdorff-isolated rat heart. Stimulation of  $\alpha_2$ -AR in isolated rat hearts against the background of ZD7288 in concentrations of  $10^{-9}$  M and  $3 \times 10^{-5}$  M changed the negative dynamics of myocardial inotropy to positive (by 25 and 38%;  $p < 0.05$ ). Activation of  $\alpha_2$ -AR produced opposite effects on HR.  $I_f$  blockade abolished tachycardia caused by activation of  $\alpha_2$ -AR; HR deceleration in response to  $\alpha_2$ -AR agonist against the background of  $I_f$  blocker in a concentration  $10^{-9}$  M was 41% ( $p < 0.05$ ). We observed negative dynamics of coronary flow (by 38%;  $p < 0.05$ ) in isolated adult rat hearts after application of  $\alpha_2$ -AR agonist against the background of  $I_f$  blockade ( $10^{-9}$  M).

**Key Words:**  $\alpha_2$ -adrenergic receptors;  $I_f$ ; isolated heart; rat

$\alpha_2$ -Adrenergic receptors ( $\alpha_2$ -AR) are associated with heterotrimeric pertussis toxin-sensitive  $G_i/G_o$  and  $G_s$  proteins and affect the cascade of cell biochemical reactions [2]. In the heart of mammals and humans,  $\alpha_2$ -AR activation inhibits the release of acetylcholine from cholinergic synapses [6], participates in modulating norepinephrine release [10], in the protective reflex, sedative effect, reduces BP [3], and mediates vasoconstriction.  $\alpha_2$ -AR are located on the membranes of cardiomyocytes, vascular smooth muscles, cells of peripheral and central nervous system, intestinal and renal epithelium [8].

In the heart of mammals,  $\alpha_2$ -AR performs the function of modulation of regulatory influences. Activation of  $\alpha_2$ -AR inhibits cAMP synthesis by adenylate cyclase. Presumably, activation of  $\alpha_2$ -AR with a low concentration agonist leads to a decrease in intracellular cAMP content, while higher concentrations of the agonist in-

crease cAMP concentration [5].  $I_f$  of HCN channels are modulated by cAMP level and the sympathetic and parasympathetic departments of the autonomic nervous system [9]. Modulation of  $I_f$  through cAMP is an essential element in HR regulation by the autonomic nervous system. It was shown that stimulation of adrenergic receptors activates  $I_f$  thereby increasing the chronotropic function of the heart through  $\beta$ -AR-mediated increase in cAMP level [9]. Available data indicate a significant effect of  $\alpha_2$ -AR on cardiac performance: activation of  $\alpha_2$ -AR induces bradycardia and reduces systolic BP in rats, produces different effects on contractility of rat atrial and ventricular strips [12], reduces inotropy and produces opposite effects on HR and coronary flow in Langerdorff-isolated rat heart [14]. Non-selective stimulation of  $\alpha_2$ -AR against the background of preliminary  $I_f$  blockade reduces the severity of tachycardia caused by norepinephrine [13]; phenylephrine against the background of  $I_f$  blocker ZD-7288 induces a significant two-phase HR deceleration [7].

Heart automatism and regulation of neuronal excitability are controlled by current through hyperpo-

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larization-activated cyclic nucleotide-gated channels (HCN channels). This current in the nervous system is referred to as  $I_h$  (hyperpolarization-activated current). Recent ample molecular and pharmacological data confirmed the role of HCN channels and  $\alpha_2$ -AR in the regulation of nervous system functions [4,11]. For instance,  $\alpha_2$ -AR agonist dexmedetomidine has been shown to inhibit  $I_h$  [11]. Dexmedetomidine binds to  $\alpha_2$ -AR on the neuronal membrane, which leads to activation of G-protein-coupled  $K^+$  channels and inhibition of  $I_h$  leading to membrane hyperpolarization.

As HCN channels and  $\alpha_2$ -AR are present in cardiomyocytes,  $I_f$  can also serve as an effector of adrenergic regulation of the heart through this receptor. Here we studied the effect of  $\alpha_2$ -AR activation against the background of preliminary  $I_f$  blockade on the performance of Langendorff-isolated rat heart.

## MATERIALS AND METHODS

*Ex vivo* experiments were performed on 20-week-old white outbred rats ( $n=21$ ) on the Langendorff heart perfusion system (ADInstruments) in compliance with the principles of Good Laboratory Practice and ethical standards for the treatment of animals. The effects of  $\alpha_2$ -AR agonist clonidine hydrochloride alone (control) and against the background of preliminary  $I_f$  blockage with ZD7288 (experiment) were compared.

The rats were intraperitoneally anesthetized with 25% urethane (800 mg/kg). The hearts were isolated, washed, and placed in cold Krebs—Henseleit solution (2–5°C). The isolated heart was mounted on a cannula through the aorta and retrogradely perfused under a constant hydrostatic pressure of 60–65 mm Hg at 37°C with oxygenated (95%  $O_2$ , 5%  $CO_2$ ) solution. For  $\alpha_2$ -AR stimulation clonidine hydrochloride (Sigma) was added in a concentration of  $10^{-6}$  M;  $I_f$  blocker ZD7288 (Tocris) was added in concentrations of  $10^{-9}$  and  $3 \times 10^{-5}$  M. Contractile activity of the myocardium was studied in the isovolumic mode using MLT844 pressure sensor (ADInstruments) with a latex balloon filled with water and inserted into the left ventricle. HR (bpm), left ventricular pressure (LVDP, mm Hg), and coronary flow (ml/min) were calculated from the curve. Registration was performed on a Power Lab 8/35 installation (ADInstruments) using the LabChart Pro program.

Statistical processing of the results was carried out using one-way ANOVA (Statistica 8.0) and paired and unpaired Student's  $t$  tests. The differences were significant at  $p < 0.05$ .

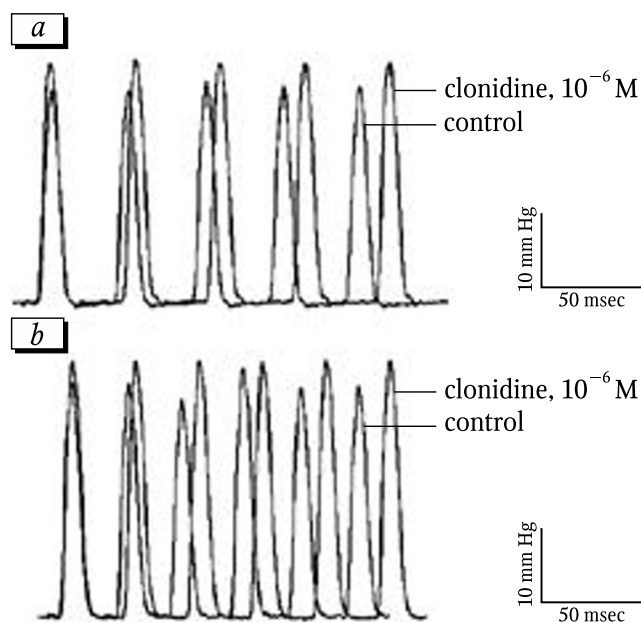
## RESULTS

To identify the relationship between  $I_f$  and  $\alpha_2$ -AR, experiments were carried out with the introduction of  $\alpha_2$ -

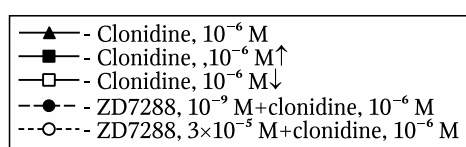
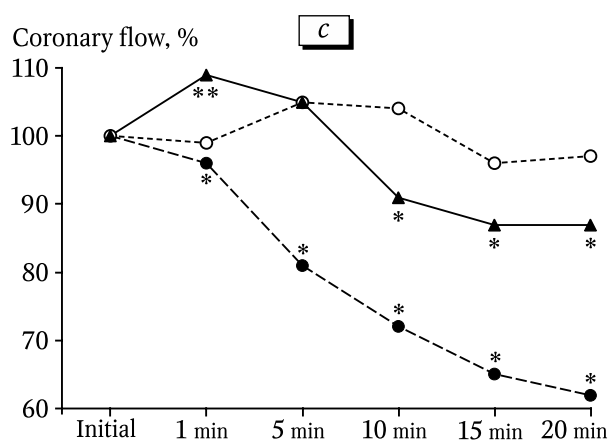
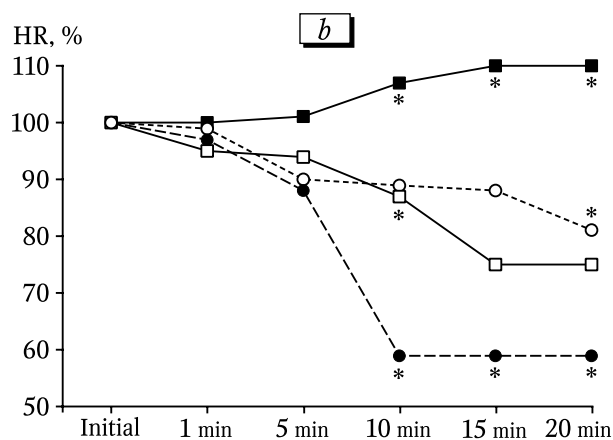
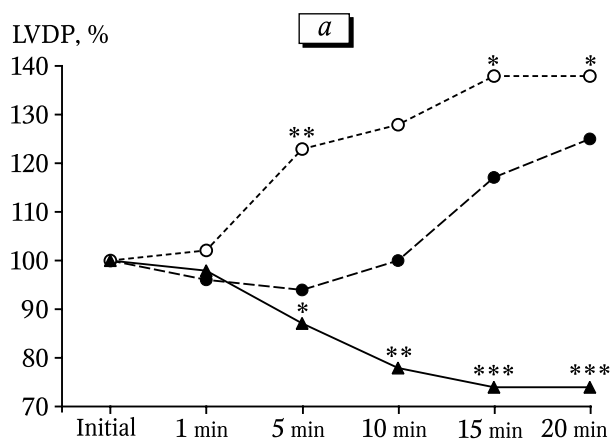
AR agonist clonidine hydrochloride ( $10^{-6}$  M) against the background of preliminary blockade  $I_f$  ZD7288.  $I_f$  blocker was administered in high ( $3 \times 10^{-5}$  M) or low ( $10^{-9}$  M) concentrations. Previous studies showed that  $I_f$  blocker ZD7288 in these concentrations caused significant changes in the functioning of the isolated heart [1].

Application of  $\alpha_2$ -AR agonist ( $10^{-6}$  M) against the background of the preliminary  $I_f$  blockade with ZD7288 ( $10^{-9}$  M) induced a decrease in LVDP from  $18.7 \pm 3.6$  to  $16.4 \pm 2.4$  mm Hg by the 4th min followed by an increase in this parameter to  $21.8 \pm 5.3$  mm Hg (by the 15th min) and  $23.4 \pm 5.9$  mm Hg (by the 20th min; Fig. 1, a). The increase in LVDP was 25% (Fig. 2, a). Non-selective stimulation with clonidine hydrochloride against the background of ZD7288 ( $3 \times 10^{-5}$  M) increased LVDP from  $18.1 \pm 3.5$  to  $22.4 \pm 3.9$  mm Hg ( $p < 0.01$ ) by the 5th min of the experiment. By the 20th min, LVDP increased to  $25 \pm 4.4$  mm Hg ( $p < 0.05$ ), i.e. by 38%. In the control group, application of  $\alpha_2$ -AR agonist ( $10^{-6}$  M) to the perfused solution reduced LVDP by 26% ( $p < 0.001$ ) (Fig. 2, a).

Clonidine hydrochloride stimulation against the background of ZD7288 blockade ( $10^{-9}$  M) reduced HR from  $139.9 \pm 15.7$  to  $83.1 \pm 14.5$  bpm ( $p < 0.05$ ) by the 10th min of the experiment and to  $82.1 \pm 15.2$  bpm (by 41%;  $p < 0.05$ ) by the 20th min. Application of  $\alpha_2$ -AP agonist against the background of  $I_f$  blockade ( $3 \times 10^{-5}$  M ZD7288) reduced HR from  $164.6 \pm 17.6$  to  $148.3 \pm 20.4$  bpm ( $p < 0.05$ ) by the 5th min of the



**Fig. 1.** Effect of  $\alpha_2$ -AR agonist clonidine hydrochloride ( $10^{-6}$  M) against the background of  $I_f$  blockade with ZD7288 in concentrations of  $10^{-9}$  M (a) and  $3 \times 10^{-5}$  M (b) on LVDP and HR of Langendorff-isolated rat heart (original record). Control: record prior to administration of  $\alpha_2$ -AP agonist.



**Fig. 2.** Effect of clonidine hydrochloride ( $10^{-6}$  M) against the background of  $I_f$  blockade with ZD7288 ( $10^{-9}$  and  $3 \times 10^{-5}$  M) on LVDP (a), HR (b), and coronary flow (c) in Langendorff-isolated rat heart. \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\*  $< 0.001$  in comparison with the initial values.

experiment, to  $140.0 \pm 21.4$  bpm ( $p < 0.05$ ) by the 16th min, and to  $133.5 \pm 21.4$  bpm (*i.e.* by 19%) ( $p < 0.05$ ) by the 20th min. In the control group, application of  $\alpha_2$ -AR agonist to the working solution induced opposite changes in HR (Fig. 2, b): in some hearts, HR increased from  $148.0 \pm 16.6$  to  $162.0 \pm 12.9$  bpm ( $p \leq 0.05$ ) by the 15th min (by 9%), while in others, this parameter decreased from  $167.7 \pm 26.3$  to  $145.9 \pm 24.4$  bpm ( $p \leq 0.05$ ) by the 10th min (by 25%).

Activation of  $\alpha_2$ -AR against the background of preliminary  $I_f$  blockade ( $10^{-9}$  M) reduced coronary flow from  $9.3 \pm 2.1$  to  $7.5 \pm 1.8$  ml/min ( $p \leq 0.05$ ) by the 5th min, to  $6.2 \pm 1.7$  ml/min ( $p \leq 0.05$ ) by the 15th min, and to  $5.8 \pm 1.9$  ml/min ( $p \leq 0.05$ ) by the 20th min of the experiment (Fig. 2, c). Thus, the decrease in coronary flow was 38%. Addition of clonidine hydrochloride against the background of  $I_f$  blockade ( $3 \times 10^{-5}$  M) increased coronary flow from  $8.7 \pm 2.2$  to  $9.5 \pm 2.6$  ml/min by the 5th min of observation. Then, this parameter decreased to  $8.3 \pm 2.0$  ml/min by the 15 min and to  $8.5 \pm 2.2$  ml/min by the 20 min (Fig. 2, c). The coronary flow changed by 3%. In the control group, application of  $\alpha_2$ -AR agonist increased coronary flow from  $3.80 \pm 0.09$  to  $4.10 \pm 0.09$  ml/min (by 9%;  $p \leq 0.01$ ) (Fig. 2, c). By the 20th min of the experiment, we observed

a gradual decrease in the coronary flow to  $3.3 \pm 0.04$  ml/min ( $p \leq 0.01$ ), *i.e.* by 13% of the initial value.

Comparative analysis of the effect of  $\alpha_2$ -AR activation with clonidine hydrochloride without (control group) and against the background of  $I_f$  blocker ZD7288 (experiment) showed that stimulation of  $\alpha_2$ -AR against the background of ZD7288 administration in high and low concentrations changed the dynamics of myocardial inotropy of the isolated heart of adult rats from negative to positive. Thus, stimulation of  $\alpha_2$ -AR reduced LVDP by 26%, while application of  $\alpha_2$ -AR agonist after  $I_f$  blocker in concentrations of  $10^{-9}$  and  $3 \times 10^{-5}$  M increased LVDP by 25 and 38%, respectively. In the control group, activation of  $\alpha_2$ -AR induced opposite changes in HR (decrease or increase).  $I_f$  blockade abolished the effect of tachycardia: only a decrease in HR was observed upon  $\alpha_2$ -AR stimulation. Bradycardia in response to application of  $\alpha_2$ -AR agonist against the background of the  $I_f$  blocker ( $10^{-9}$  M) was more pronounced (41%) than the isolated effect of the agonist (25%). The appearance of negative dynamics of the coronary flow was also observed in the isolated hearts of adult rats after addition of  $\alpha_2$ -AR agonist against the background of  $I_f$  blockade ( $10^{-9}$  M).

Thus, our experiments on evaluation of the role of  $I_f$  and  $\alpha_2$ -AR in adrenergic mechanisms of regulation of the function of adult isolated rat heart showed that preliminary blockade of  $I_f$  changed the dynamics of contractile activity of the heart, strengthened the bradycardic effect, and reduced blood supply in the isolated heart. Based on the literature data, several possible mechanisms of  $\alpha_2$ -AR and  $I_f$  interaction in the regulation of isolated heart work can be proposed. Some researchers suggest that  $\alpha_2$ -AR can be associated with not only cAMP, but also inositol phosphate regulation [11]. Hence, stimulation of  $\alpha_2$ -AR can activate protein kinase C leading to  $Ca^{2+}$  release, which can partially coincide with the data on the dependence of  $I_f$  on  $Ca^{2+}$  level [11]. In addition, activation of  $\alpha_2$ -AR with clonidine hydrochloride can directly inhibit  $I_f$  [6].

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