

Enzymatic and receptor mediated effects of secretory phospholipase A₂ on the pathophysiology of inflammatory diseases

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Overview of phospholipases

Phospholipases A₂ are enzymes that share the common attribute to hydrolyze fatty acids from the *sn*-2 position of glycerol phospholipids [1–3]. Groups I, II, V and X PLA₂ are four sets of enzymes in a highly conserved family of secreted PLA₂ found in mammals [4–14]. Other non-secreted PLA₂ enzymes include group IV, cytosolic PLA₂ (cPLA₂) [15–17], group VI, calcium-independent PLA₂ (iPLA₂) [18–22] and groups VII and VIII, selective acetyl hydrolases [23–28]. The secretory family of enzymes has a number of features that distinguish them from other PLA₂ families including a relatively low molecular weight (~ 14 kDa), high disulfide bond content and a requirement for relatively high concentrations of calcium for maximal activation [29, 30]. In contrast, cytosolic enzymes are generally higher molecular weight proteins and require no calcium or very low calcium concentrations for optimal activation [18, 22]. Many sPLA₂ isotypes are synthesized as proenzymes that contain a signal peptide sequence that facilitates its release from cells. sPLA₂ isotypes have been studied extensively in mammals and in snake venoms, yet there is no clear understanding of their physiological and pathophysiological roles. Inspection of numerous publications dealing with sPLA₂s reveals that they have potential to mediate a wide range of biological activities including:

- 1) Producers of AA that contributes to eicosanoid formation [31–36];
- 2) Generation of lysophospholipids that contribute to electrophysiologic alteration that lead to arrhythmogenesis in the heart or altered airway permeability and surfactant properties in the lung [37–48];
- 3) Potent antibacterial effects and implications in viral infections [49–54];
- 4) Key components in glycerophospholipid digestion [55];
- 5) Serum markers and potential regulators of severe illnesses such as sepsis, shock, organ injury and pancreatitis, all of which are linked to the development of adult respiratory distress syndrome or multiple organ failure [56–75];

- 6) Regulators of platelet aggregation in hemorrhagic diseases [76–78];
- 7) Prevention of apoptosis of inflammatory cells and initiators of cell proliferation in several cancer cell lines [79–82];
- 8) A potent modifying locus in intestinal tumorigenesis in mice that is absent in human [83];
- 9) Pro-inflammatory components in diseases such as rheumatoid arthritis and asthma [84–93].

This overwhelming list of biological activities and diseases raises deep-seated questions as to whether sPLA₂ cause or is merely associated with the aforesaid effects. It also raises questions about molecular mechanisms that this family of enzymes could influence in order to control such a wide range of biological activities.

Role of sPLA₂ on cell function and animal physiology

With the milieu of so many potential biological activities, inhibitors, antibodies, antisense oligonucleotides and genetic models have been used to better define the essential processes induced by sPLA₂ secretion into sites of inflammation [94–105]. While some inhibitors, antibodies and antisense oligonucleotides have been developed that block sPLA₂ activity and inflammatory processes, the lack of selectivity among these reagents against different sPLA₂ isotypes make data interpretation ambiguous. Various genetic models have been discovered or developed in order to address the complex issue of the role sPLA₂ isotypes may play in diseases [106–111]. For example, peritoneal macrophages from mice with targeted gene disruption of group IV cPLA₂ show a marked reduction in their capacity to synthesize leukotriene B₄ (LTB₄), leukotriene C₄ (LTC₄), prostaglandin E₂ (PGE₂) and platelet-activating factor (PAF) [111]. These animals have attenuation in pulmonary responses and hyper-responsiveness after allergen challenge. In terms of sPLA₂, Nevalainen and colleagues designed experiments where transgenic mice expressed more than eighty fold more group II PLA₂ in most tissues including liver, lung, kidney and skin than non-transgenic littermates. Histopathological analysis of these animals revealed a disorder in skin consisting of hyperkeratosis, epidermal and adrenectral hypoplasia [112]. Chronic hypoplasia and hyperkeratosis observed in these animals is similar to that seen in a variety of skin disorders including human psoriasis. Certain mouse strains (C57BL/6, 129, A/J, C58 and P/J) have been shown to have a natural disruption of group IIA PLA₂ gene [106]. Thus, these strains are deficient in functional group IIA PLA₂ and have been used to determine the need for this enzyme in cell function. Interestingly, mast cells obtained from PLA₂g2a^{+/+} and PLA₂g2a^{-/-} mice both contained sPLA₂ activity and release similar quantities of AA upon antigen stimulation. Studies using these animals and antisense oligonucleotides reveal that group V sPLA₂, and not IIA, is likely an important sPLA₂ iso-

type in mast cell immune activation [113]. Similar studies using antisense oligonucleotide specific for group V PLA₂ in macrophages also demonstrated that group V PLA₂ has an important role in extracellular AA release after endotoxin and PAF stimulation [114]. Fonteh and colleagues have also shown that cells over-expressing group IIA PLA₂ and group V PLA₂ release more AA than mock-transfected cells [115]. Together, these studies show that various sPLA₂ isotypes can induce AA release from a variety of inflammatory cells.

Cytokine-like effects of sPLA₂ in inflammatory diseases

sPLA₂ may contribute to the pathogenesis of an inflammatory disease such as asthma in one of the following ways. First, sPLA₂ may induce lipid mediator formation. Second, sPLA₂ may induce degranulation of inflammatory cells leading to the release of preformed mediators such as histamine. Third, sPLA₂ may induce the synthesis of inflammatory cytokines. Our data show that sPLA₂ can also induce the formation of cytokines that prevent mast cells from undergoing apoptosis, thus preventing the resolution of inflammation. These potential effects of sPLA₂ summarized in Figure 1 and discussed in detail below can have significant ramifications in the management of inflammatory diseases.

Eicosanoid biosynthesis

Although the existence of sPLA₂ receptors has been recognized for several years, few studies have focused on the significance of receptor occupancy or the signaling mechanisms associated with receptor occupancy and how these events manifest themselves in inflammatory disease processes. Early work on sPLA₂ receptors focused on the neurotoxic effects of snake venom sPLA₂ acting through high affinity for sPLA₂ receptors. It has been speculated that somewhere along the evolution of sPLA₂, the mannose receptor may have been duplicated to accommodate other forms of and other functions of sPLA₂. These sPLA₂ receptors and their agonists (sPLA₂) regulate events in inflammatory cells that are critical to the pathogenesis of diseases such as asthma. Thus, sPLA₂ isotypes can act through their receptors in both autocrine and cytokine-like fashion. For example, mast cells contain and release group V PLA₂ during antigen activation and our data reveal that mast cells contain plasma membrane receptors and respond to receptor occupancy by sPLA₂ [116, 117]. A sPLA₂ receptor pathway could clarify several studies in the literature. For example, Arm and colleagues have shown that there are two phases of prostaglandin production in cultured mast cells that are primed with *c-kit* ligand and stimulated with antigen [118, 119]. AA is supplied for the first phase of prostanoids synthesis by cPLA₂ activation and AA for the second phase is provided by sPLA₂. It has

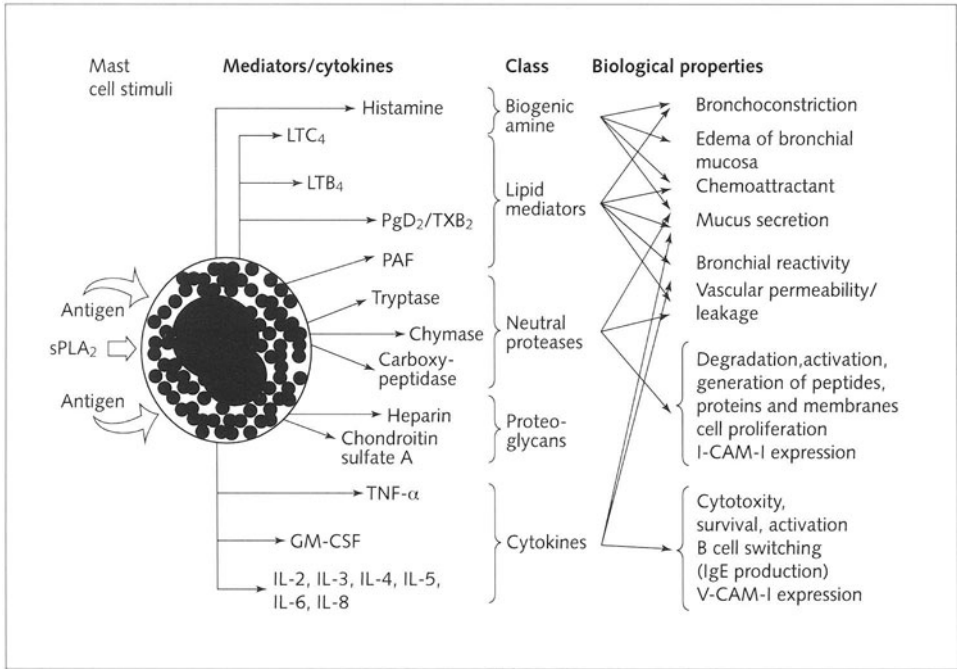


Figure 1

Stimulation of mast cells by sPLA₂, formation of mediators and their biological properties sPLA₂ receptor occupancy results in the activation of mast cells. Mediators released include preformed biogenic amines (histamine), newly formed lipid mediators of inflammation (leukotrienes (LTC₄, LTB₄), prostaglandins (PGD₂), thromboxane (TXB₂) and platelet activating factor (PAF)), neutral proteases, proteoglycans and cytokines. These mediators induce various biological functions that are linked to disease processes.

been proposed that sPLA₂ hydrolyzes AA from membrane phospholipids to supply the substrate for PGD₂ biosynthesis. Fonteh and colleagues have provided evidence that sPLA₂ binds to cell surface receptors on mast cells that may initiate subsequent activation of cPLA₂, cyclo-oxygenase and lipoxygenase enzymes needed for AA release, prostaglandin formation and leukotriene biosynthesis, respectively [115, 116]. sPLA₂ also could have cytokine-like roles in that it could be released from one cell type and subsequently act on a variety of other cells types expressing sPLA₂ receptors. For example, it is well documented that high levels of sPLA₂ are found in serum of patients with sepsis, shock, organ injury or pancreatitis. Tools for studying these diseases suggest that group IIA sPLA₂ is involved. However, many of these studies used antibodies that are non-specific recognizing group IIA, V and X PLA₂. Thus, it is not clear which of the various sPLA₂ isotypes play a role in these diseases.

We have postulated that sPLA₂ isotypes released from mast cells after antigen challenge are found in sites of inflammation and these sPLA₂ isotypes induce lipid mediator formation or influence the recruitment and function of cells that participate in airway diseases. A study by Reddy and colleagues showing that mast cells can provide sPLA₂ to fibroblasts for prostaglandin production supports this postulation [120]. Cells other than mast cells can also provide sPLA₂ in airways. For example, using an enzyme-linked immunoassay specific for groups IIA and V PLA₂, has shown that human eosinophils have approximately 14-fold more of the enzymes than human neutrophils and this activity is released very rapidly upon cell activation [121]. In a related study, Hundley and colleagues have shown that sPLA₂ is released from human basophils and likely participates in leukotriene generation [122]. Thus, there is also potential for sPLA₂ from eosinophils or basophils to have both autocrine and cytokine effects in airway disease by inducing the formation of eicosanoids.

Degranulation of inflammatory cells

In addition to eicosanoid production, sPLA₂ has been shown to induce degranulation of several cells. Fonteh and colleagues showed that incubation of mast cells with different sPLA₂ isotypes resulted in the release of histamine. Likewise Triggiani and colleagues have duplicated these mast cell studies using macrophages, monocytes and eosinophils [123–125]. Their studies show that sPLA₂ induce the release of β -glucuronidase and the production of IL-6, IL-8, IL-12 and TNF- α by these cells. They conclude that this process is mediated *via* the mannose receptor and another receptor based on experiments showing that sPLA₂ isotypes are not cytotoxic to macrophages that were used in their studies. Together, these studies suggest that sPLA₂ may induce immune and inflammatory responses in cells by inducing exocytosis resulting in the release of mediators such as histamine and cytokines. Mast cells and macrophages also contain other proteases, which are released by activated inflammatory cells [126–129]. Induction of the release of these can result in bronchoconstriction, edema of the bronchial mucosa, chemoattraction, mucus secretion, vascular permeability and leakage, cell proliferation and expression of adhesion molecules (Fig. 1). Together, these biological properties constitute events related to inflammatory diseases of the airway.

Induction of cytokine formation

An important observation in mast cells, macrophages, monocytes and eosinophils incubated with sPLA₂ is that these cells while releasing AA still remain viable, indicating that these enzymes are not cytotoxic to these cells. This paradoxical effect can

be explained by the fact that sPLA₂ acts on receptors to induce processes that prevent apoptosis. For example, sPLA₂ acting on sPLA₂ receptors may activate mitogen-activated protein kinase (MAP kinase) and this process may result in the biosynthesis of cytokines, which prevent apoptosis. We confirmed this process by showing that incubation of bone marrow-derived mast cells with low concentrations of sPLA₂ resulted in the induction of IL-3 release into supernatant fluids. Only sPLA₂ isotypes that induced IL-3 production prevent apoptosis of mast cells [130]. A similar study showed that some sPLA₂ isotypes induce IL-6, IL-8, IL-12 and TNF- α formation by other inflammatory cells [123–125]. In addition to preventing apoptosis, cytokines induced by sPLA₂ also induce several biological effects including bronchial reactivity, chemoattraction, and activation of other inflammatory cells and the induction of adhesion molecules. Prevention of apoptosis of inflammatory cells such as mast cells and macrophages keep these cells longer in the site of inflammation and thus prevent quick resolution of the inflammatory process.

Mechanisms that account for the biologic functions of sPLA₂

sPLA₂ receptors

To date, most of the biological activities of sPLA₂ have been attributed to its capacity to hydrolyze membrane phospholipids. However, several of the biological functions described above cannot be easily reconciled with enzymatic activity alone. For example, intradermal injection of inactivated sPLA₂ causes similar phenotypic changes in skin to those observed when the fully active enzyme was injected [131]. Similarly, others have shown that the physiologic action of sPLA₂ is not due to hydrolytic activity [125, 132]. We have demonstrated that very low concentrations of sPLA₂ (low nanomolar levels) of certain sPLA₂ isotypes induce AA release, histamine release, and proliferation of some cells and enhance the survival of other cells in a receptor-mediated fashion [82]. Our studies also show that sPLA₂'s cause the selective release of AA and not other more abundant fatty acids from cells that express sPLA₂ receptors [115]. In contrast, cells that do not express sPLA₂ receptors do not selectively release AA when incubated with low amounts of sPLA₂.

Recently, different subtypes of membrane receptors for sPLA₂ have been identified in a variety of cells by determining their affinities for various types of sPLA₂. Arita and colleagues described the existence of a specific receptor family termed PLA₂-I receptor that is abundant in brain and several other tissues and has high affinity for the binding of pancreatic-type PLA₂ [133–136]. More recently, receptors have been divided into two classes termed N-type receptors (neuronal) or M-type receptor (muscle). Lambeau and colleagues report that a major difference between N-type and M-type receptors is their capacity to bind group III PLA₂ from bee venom [137, 138]. N-type receptor associates very tightly with both pancreatic

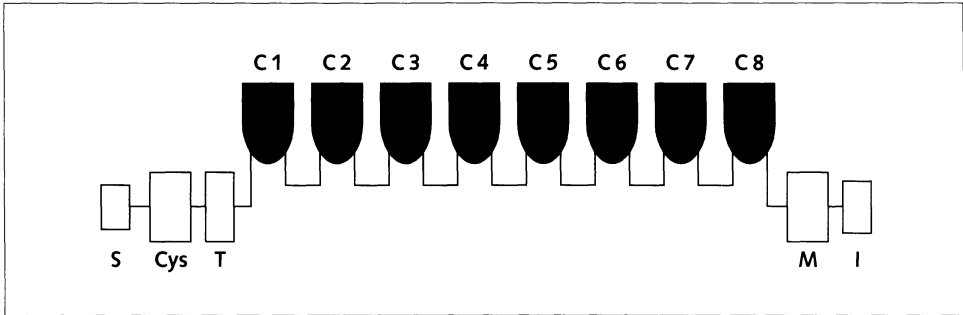


Figure 2

Domain organization of the sPLA₂ receptor

S, signal sequence; Cys, cysteine-rich domain; T, fibronectin type repeat; C1–C8, carbohydrate-like domain; M, membrane spanning domain; I, intracellular region

sPLA₂ and bee venom group III PLA₂ while rabbit muscle M-type receptor tightly binds human synovial fluid group II PLA₂ but does not bind bee venom sPLA₂. Our studies show that bee venom sPLA₂ at extremely low concentrations induced the selective release of AA from mast cells suggesting that this mast cell line expresses a protein that is similar if not identical to N-type receptors. Both membrane and plasma bound sPLA₂ receptors have been described [139]. The plasma bound sPLA₂ receptors seem to prevent the LPS-induced inflammatory process by binding sPLA₂ and thus preventing septic shock during bacterial infections [140].

Despite the fact that these receptor subtypes show somewhat different sPLA₂ binding profiles, their amino acid sequences are strikingly similar with as much as 82% homology. Additionally, the sequences of the cloned sPLA₂ receptor is homologous to that of the macrophage mannose receptor and DEC-205, suggesting that these proteins constitute a new family of membrane proteins [137]. The sPLA₂ receptor is composed of an N-terminal cysteine rich domain (Cys) a fibronectin-like type II domain (T), eight carbohydrate recognition domains (C1–C8), a membrane spanning domain (M) and an intracellular tail (I) (Fig. 2). sPLA₂ is thought to bind to the M-type receptor *via* the carbohydrate domains (particular C5) [137]. Although occupancy of the sPLA₂ receptor has been suggested to enhance cell survival, proliferation, cell migration, much remains to be learned about the molecular events and physiological ramifications of sPLA₂ receptor activation.

Hydrolytic activity of sPLA₂

In addition to receptor binding, the hydrolytic activity of PLA₂ may also play an important role in releasing fatty acids from cells. There are several distinct features

that distinguish receptor-mediated effects of sPLA₂ from enzymatic activity. First, whereas sPLA₂ receptor-mediated release is specific for AA [35, 115, 116], hydrolytic activity releases other more abundant fatty acids and degrades phospholipids [141]. Various reports have shown more release of oleic acid than AA in cells where hydrolytic activity is the major mechanism of action. Secondly, very low levels of sPLA₂ (nanomolar amounts) are required for receptor-mediated release of AA. In contrast, 1,000 fold more sPLA₂ is needed to release fatty acids by hydrolytic activity. Thirdly, disruption of cell membrane is not required for receptor-mediated AA release, while perturbation of cellular membranes is needed for hydrolytic activity [79, 130, 142]. Disruption of cell membranes or loss of membranes phospholipid asymmetry is usually accomplished using cell-activating agents such as ionophore and thrombin in the case of platelets or antigen in the case of mast cells [143, 144]. Additionally, there is alteration in membrane asymmetry when cells are undergoing apoptosis. A combination of disruptive agents and sPLA₂ treatment, or treatment of apoptotic cells, usually results in enhanced fatty acid mobilization. Fourthly, sPLA₂ receptor-mediated AA release is predominantly from the phosphatidylethanolamine pool whereas hydrolytic release favors phosphatidylcholine [35, 145, 146]. As shown in Figure 3, very low amounts of sPLA₂ (0.1 nM) induce the selective formation of lysophosphatidylethanolamine from [³H]-ethanolamine-labeled mast cells while higher concentrations (100 nM) are required to significantly form lysophosphatidylcholine from [³H]-choline labeled mast cells. It is important to note that the receptor-mediated release from a pool of phospholipid that is usually found within the inner bilayer of cell membranes will only be possible if there is recruitment of another lipase activity within cells. Importantly, it is worth noting that the profile of AA release in mast cells incubated with sPLA₂ (receptor-mediated) is similar to that of IgE-receptor mediated release of AA. Finally, sPLA₂-receptor mediated processes may lead to enhanced cell survival or cell proliferation while hydrolysis inevitably results in cell death as a result of lysis of cell membranes. Similarities between receptor-mediated and hydrolytic activity revolve around the fact that both processes release AA from phospholipid pools and also form lysophospholipids. These lysophospholipids can be acetylated to form PAF or can act as mediators of several processes in cells [147–149]. Thus, AA and lysophospholipids released by hydrolytic action of sPLA₂ can be converted to eicosanoid or PAF, respectively and these lipid mediators can then induce several biological effects at sites of inflammation.

sPLA₂ receptor-mediated signaling pathways

Although several sPLA₂ binding proteins have been described in various mammalian cells, little is currently known about signaling events that are initiated once sPLA₂ isotypes or mannose receptors are occupied by ligands. Although little is known about binding of group I PLA₂ to N-type receptors, it is clear that calcium is not

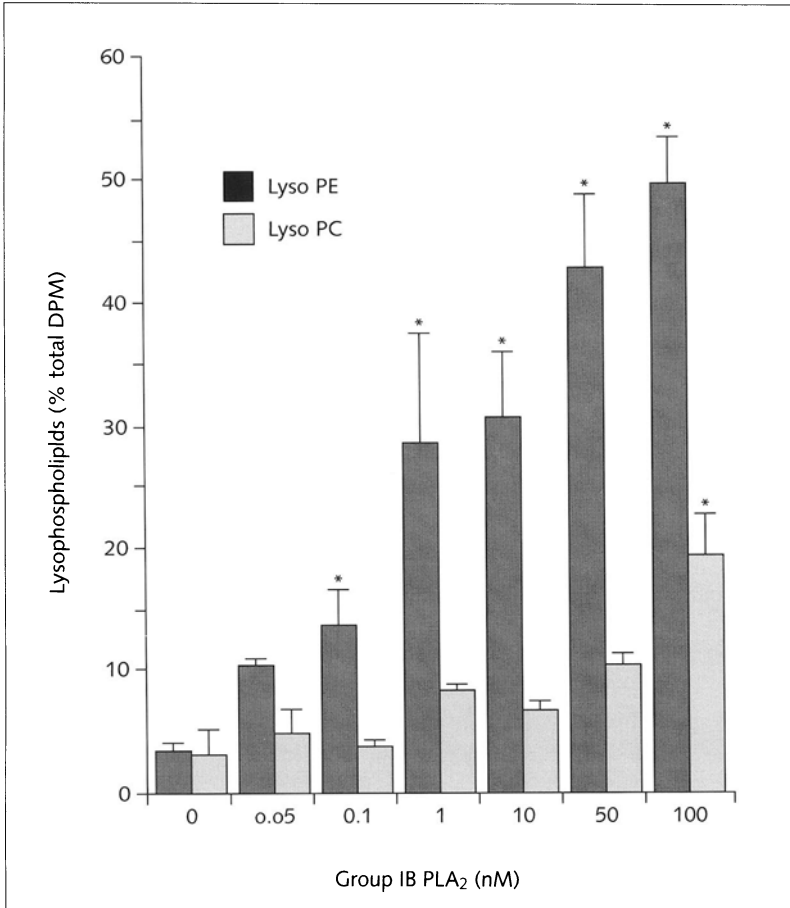


Figure 3

Mobilization of lysophospholipids by group IB PLA₂

Mast cells labeled with [³H]-ethanolamine or [³H]-choline are incubated with increasing concentrations of group IB sPLA₂. Lysophosphatidylethanolamine (Lyso PE) and lysophosphatidylcholine (Lyso PC) were isolated using thin layer chromatography and radioactivity in these lipid species determined using lipid scintillation counting (*p < 0.05).

required, while calcium is required for the mannose receptor. Mannose receptor occupancy is linked with tyrosine phosphorylation while sPLA₂ receptors have been recently shown to mediate cell proliferation and AA release by MAP kinase activation [116, 150]. Demonstration of sPLA₂ receptor function as opposed to catalytic action is based on studies using catalytically inactive sPLA₂ or ligands of sPLA₂ receptors that are devoid of hydrolytic activity. In these studies, catalytically inactive sPLA₂ induced the selective release of AA from mast cells and prevented apop-

tosis of these same cells when they were cultured in cytokine-depleted cell culture medium. Likewise, a ligand of the mannose receptor, *p*-amino-phenyl-D-mannopyranoside BSA (APDM-BSA) is shown to induce AA release from mast cells and to compete with sPLA₂ in this process. Binding studies also show that only sPLA₂ isoforms that selectively induce AA release can compete with each other for specific binding. Interestingly, APDM-BSA does not prevent mast cells from undergoing apoptosis. This suggests that there are at least two sPLA₂ receptor subtypes in mast cells, one that is linked to AA release (binds APDM-BSA) and another that prevents apoptosis. Alternatively, there are multiple signaling pathways in mast cells activated differentially likely due to difference in receptor affinity of the different ligands. These signaling events are reviewed below.

In receptor-mediated AA release, another lipase activity must be recruited if sPLA₂ activity is not required. As described above, AA is mobilized from phospholipid pools (mainly PE) that are normally found within cells. Therefore, an ideal PLA₂ that can release this AA pool is the hormonally regulated cytosolic PLA₂ (cPLA₂). cPLA₂ is translocated to a membrane location in response to an increase in cytosolic calcium and activated by phosphorylation of serine 505 or other phosphorylation sites by MAP kinases [151–154]. The extracellular signal-regulated kinase (ERKs, p42/p44) initially was thought to be the major kinases responsible for cPLA₂ phosphorylation. However, recent studies suggest that p38 kinase pathway, which can be activated by environmental stresses and inflammatory cytokines, may also phosphorylate/activate cPLA₂. In stimulated platelets, inhibitors of p38 kinase have been shown to prevent cPLA₂ activation while these same inhibitors indicate that ERKs and not p38 kinase may activate cPLA₂ in other cell types [155, 156]. Wykle and colleagues have shown in human neutrophils that both ERKs and p38 kinases are important in cPLA₂ activation depending on the stimuli used. Fonteh and colleagues have also shown that tyrosine kinase inhibitors attenuate sPLA₂-induced cPLA₂ and Ras activation [116]. Since Ras activation is upstream of MAP kinase activation, we have proposed the signaling pathway depicted in Figure 4A for cPLA₂ recruitment and AA release after sPLA₂ receptor occupancy. We have proposed that the sPLA₂ receptor is similar to other protein tyrosine kinase (PTK) receptors that may have an intrinsic kinase activity or may be able to recruit kinases from cytosol upon ligand binding. Once tyrosine kinases are activated, a sequence of events including Ras, ERKs or p38 activation lead to the phosphorylation and translocation of cPLA₂ from cytosol to membranes [116]. This results in the mobilization of AA that is utilized for eicosanoid formation (Fig. 4A). It is likely that the c-Jun pathway may also be linked to cPLA₂ activation. As the tools become available for studying and discriminating between the various signaling pathways, it will become clearer whether c-Jun kinases phosphorylate cPLA₂ and induce AA release from cells.

The high affinity IgE receptor is a well-characterized membrane bound protein that belongs to the multi-chain system of receptors involved in hypersensitivity reac-

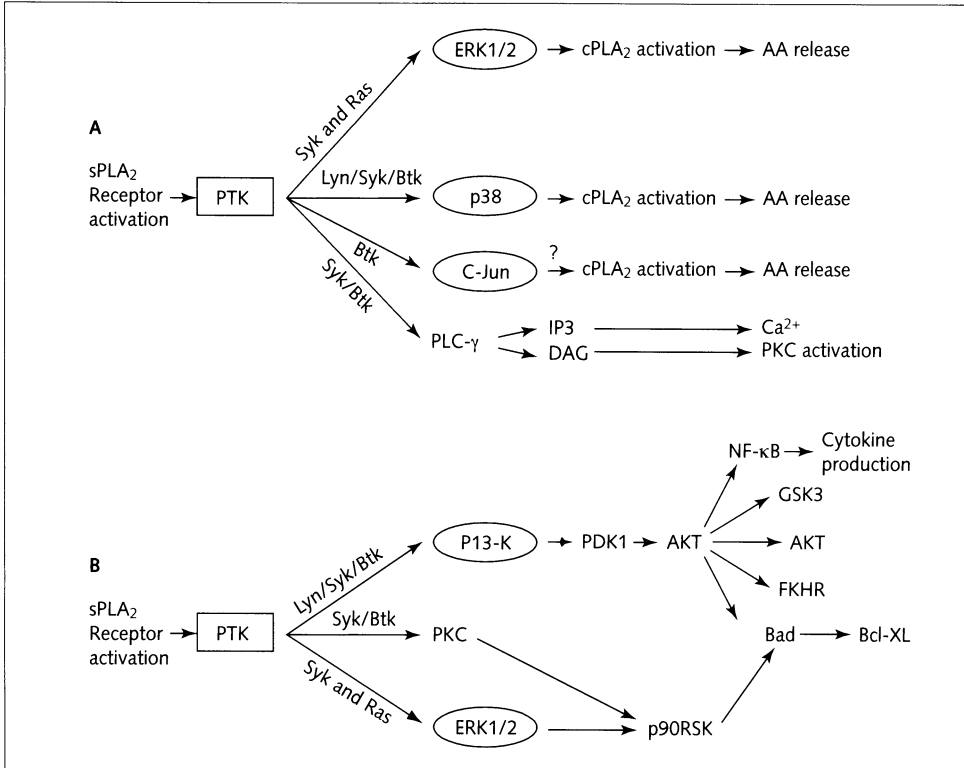


Figure 4

sPLA₂-receptor mediated signaling pathways

A) Cytosolic PLA₂ activation. Binding of sPLA₂ to its receptors results in the activation of kinase pathways (protein tyrosine kinase (PTK), tyrosine kinases (Syk, Syk and Btk), MAP kinases (ERK1/2, p38, c-Jun)). These kinases activate cytosolic phospholipase A₂ (cPLA₂) via phosphorylation of various amino acid residues. Activated cPLA₂ translocates to membrane fraction of cells and releases AA that is used for eicosanoid biosynthesis. Other second messengers (DAG and Ca²⁺) are also initiated via PLCγ.

B) Anti-apoptotic signaling pathways. sPLA₂ binds to its receptors and activates kinase pathways (phosphoinositide 3-kinase (PI3-K), phosphatidylinositol dependent kinase (PDK), glycogen synthase kinase (GSK)), transcription factors (nuclear factor kappa B (NF-κB) and anti-apoptotic proteins such as Bad. Activation of these pathways prevents apoptosis of cells and/or induces cell growth and differentiation.

tions [157]. These receptors lack intrinsic tyrosine kinase activity and so have to recruit cytoplasmic tyrosine kinase that phosphorylates the receptor at sites known as immunoreceptor tyrosine-based activation motifs (ITAMs). Phosphorylation of ITAMs results in protein tyrosine kinase activation. Three major PTKs have been

described in mast cells including Lyn, Syk and Burton's tyrosine kinase (Btk) that are upstream of the three subfamilies of MAK kinases (ERKs, p38 and c-Jun NH₂ terminal kinases) [158–160]. Activation of PTKs and their respective downstream MAP kinases result in cPLA₂ activation and the formation of pro-inflammatory mediators described above. Another group of mast cell receptors characterized by *kit*, have intrinsic tyrosine kinase activity and are involved in mast cell survival and proliferation [160, 161]. Similar to *kit*, the high affinity nerve growth factor (NGF, 165 kDa) receptor autophosphorylates tyrosine residues to activate multiple downstream effectors including PLC γ , MAP kinases and phosphoinositide-3-kinase (PI3-K/Akt). Of the many signaling pathways influenced by *kit* and NGF, the PI3-K/Akt pathway has been implicated in mast cell survival and growth. PI3-K is a dual kinase consisting of an 85 kDa regulatory unit and a 110 kDa catalytic unit. PI3-K adds a phosphate molecule specifically to the 3 position of the inositol ring of phosphatidylinositols resulting in the formation of products that have been implicated in survival, proliferation or cell migration. There are striking similarities between *kit*, NGF and the sPLA₂ receptor when one examines mast cell survival. First, the cloned sPLA₂ receptor (180 kDa) has one membrane-spanning domain, as does the NGF receptor. Secondly, NGF prevents apoptosis of mast cells, as does sPLA₂ isotypes that bind specifically to sPLA₂ receptors. Thirdly, NGF activates PI3-K/Akt pathway. We have shown that PI3-K specific inhibitors reverse the anti-apoptotic effects observed in mast cells incubated with very low levels of sPLA₂. Moreover, sPLA₂ also induce Akt phosphorylation in mast cells while inhibitors of nuclear factor kappa B (NF- κ B) are shown to prevent sPLA₂ effects on mast cells. Both active and catalytically inactive sPLA₂ induce IL-3 production from mast cells and NF- κ B inhibitors reverse this property of sPLA₂ [130]. Taken together, these data show that sPLA₂ produce IL-3 by activating the PTK/PI3-K/Akt/NF- κ B pathway. Similarly antigen-stimulated mast cells have been shown to produce cytokines *via* PTK/PI3-K/Akt/NF- κ B activation.

Conclusions

The first step in designing new pharmaceutical agents is the identification of a candidate target. Elucidation of all biological properties of the identified target plays a crucial role in conceptualizing new strategies for selectively blocking disease-related events.

The above review examines sPLA₂ from mast cells as a candidate ligand and sPLA₂ receptor as a potential target responsible for important biological functions linking sPLA₂ to inflammatory diseases. To our knowledge, the concept that sPLA₂ receptors play an important role in inflammatory diseases is novel and potentially interesting to pursue in the development of agents to avert allergic and inflammatory reactions associated with these diseases.

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References

- 1 Dennis EA (1997) The growing phospholipase A₂ superfamily of signal transduction enzymes. *Trends Biochem Sci* 22: 1–2
- 2 Murakami M, Nakatani Y, Atsumi G, Inoue K, Kudo I (1997) Regulatory functions of phospholipase A₂. *Crit Rev Immunol* 17: 225–283
- 3 Kramer RM (1993) Structure, function and regulation of mammalian phospholipases A₂. *Adv Second Messenger Phosphoprotein Res* 28: 81–89
- 4 Kramer RM, Hession C, Johansen B, Hayes G, McGray P, Chow EP, Tizard R, Pepinsky RB (1989) Structure and properties of a human non-pancreatic phospholipase A₂. *J Biol Chem* 264: 5768–5775
- 5 Cupillard L, Koumanov K, Mattei MG, Lazdunski M, Lambeau G (1997) Cloning, chromosomal mapping, and expression of a novel human secretory phospholipase A₂. *J Biol Chem* 272: 15745–15752
- 6 Balboa MA, Balsinde J, Winstead MV, Tischfield JA, Dennis EA (1996) Novel group V phospholipase A₂ involved in arachidonic acid mobilization in murine P388D1 macrophages. *J Biol Chem* 271: 32381–32384
- 7 Cho W, Han SK, Lee BI, Snitko Y, Dua R (1999) Purification and assay of mammalian group I and group IIa secretory phospholipase A₂. *Methods Mol Biol* 109: 31–38
- 8 Han SK, Lee BI, Cho W (1997) Bacterial expression and characterization of human pancreatic phospholipase A₂. *Biochim Biophys Acta* 1346: 185–192
- 9 Chen J, Shao C, Lazar V, Srivastava CH, Lee WH, Tischfield JA (1997) Localization of group IIc low molecular weight phospholipase A₂ mRNA to meiotic cells in the mouse. *J Cell Biochem* 64: 369–375
- 10 Tischfield JA (1997) A reassessment of the low molecular weight phospholipase A₂ gene family in mammals. *J Biol Chem* 272: 17247–17250
- 11 Seeds MC, Jones DF, Chilton FH, Bass DA (1998) Secretory and cytosolic phospholipases A₂ are activated during TNF priming of human neutrophils. *Biochim Biophys Acta* 1389: 273–284
- 12 Shimbara S, Murakami M, Kambe T, Kudo I (1999) Comparison of recombinant types IIA, V and IIC phospholipase A₂S, the three related mammalian secretory phospholipase A₂ isozymes [In Process Citation]. *Adv Exp Med Biol* 469: 209–214
- 13 Gelb MH, Valentin E, Ghomashchi F, Lazdunski M, Lambeau G (2000) Cloning and recombinant expression of a structurally novel human secreted phospholipase A₂. *J Biol Chem* 275: 39823–39826
- 14 Tischfield JA (1997) A reassessment of the low molecular weight phospholipase A₂ gene family in mammals. *J Biol Chem* 272: 17247–17250

- 15 Kramer RM, Roberts EF, Hyslop PA, Utterback BG, Hui KY, Jakubowski JA (1995) Differential activation of cytosolic phospholipase A₂ (cPLA₂) by thrombin and thrombin receptor agonist peptide in human platelets. Evidence for activation of cPLA₂ independent of the mitogen-activated protein kinases ERK1/2. *J Biol Chem* 270: 14816–14823
- 16 Sharp JD, White DL, Chiou XG, Goodson T, Gamboa GC, McClure D, Burgett S, Hoskins J, Skatrud PL, Sportsman JR (1991) Molecular cloning and expression of human Ca(2+)-sensitive cytosolic phospholipase A₂. *J Biol Chem* 266: 14850–14853
- 17 Pickard RT, Striffler BA, Kramer RM, Sharp JD (1999) Molecular cloning of two new human paralogs of 85-kDa cytosolic phospholipase A₂. *J Biol Chem* 274: 8823–8831
- 18 Ackermann EJ, Dennis EA (1995) Mammalian calcium-independent phospholipase A₂. *Biochim Biophys Acta* 1259: 125–136
- 19 Gross RW (1998) Activation of calcium-independent phospholipase A₂ by depletion of internal calcium stores. *Biochem Soc Trans* 26: 345–349
- 20 Hazen SL, Stuppy RJ, Gross RW (1990) Purification and characterization of canine myocardial cytosolic phospholipase A₂. A calcium-independent phospholipase with absolute f1-2 regioselectivity for diradyl glycerophospholipids. *J Biol Chem* 265: 10622–10630
- 21 Portilla D, Crew MD, Grant D, Serrero G, Bates LM, Dai G, Sasner M, Cheng J, Buonanno A (1998) cDNA cloning and expression of a novel family of enzymes with calcium-independent phospholipase A₂ and lysophospholipase activities. *J Am Soc Nephrol* 9: 1178–1186
- 22 Underwood KW, Song C, Kriz RW, Chang XJ, Knopf JL, Lin LL (1998) A novel calcium-independent phospholipase A₂, cPLA₂-gamma, that is prenylated and contains homology to cPLA₂. *J Biol Chem* 273: 21926–21932
- 23 Endo S, Inada K, Yamashita H, Takakuwa T, Nakae H, Kasai T, Kikuchi M, Ogawa M, Uchida K, Yoshida M (1994) Platelet-activating factor (PAF) acetylhydrolase activity, type II phospholipase A₂, and cytokine levels in patients with sepsis. *Res Commun Chem Pathol Pharmacol* 83: 289–295
- 24 MacPhee CH, Moores KE, Boyd HF, Dhanak D, Ife RJ, Leach CA, Leake DS, Milliner KJ, Patterson RA, Suckling KE et al (1999) Lipoprotein-associated phospholipase A₂, platelet-activating factor acetylhydrolase, generates two bioactive products during the oxidation of low-density lipoprotein: Use of a novel inhibitor. *Biochem J* 338 (Pt 2): 479–487
- 25 Nijssen JG, Roosenboom CF, van den? BH (1986) Identification of a calcium-independent phospholipase A₂ in rat lung cytosol and differentiation from acetylhydrolase for 1-alkyl-2-acetyl-*sn*-glycero-3-phosphocholine (PAF-acether). *Biochim Biophys Acta* 876: 611–618
- 26 Soubeyrand S, Lazure C, Manjunath P (1998) Phospholipase A₂ from bovine seminal plasma is a platelet-activating factor acetylhydrolase. *Biochem J* 329 (Pt 1): 41–47
- 27 Tjoelker LW, Eberhardt C, Unger J, Trong HL, Zimmerman GA, McIntyre TM, Stafforini DM, Prescott SM, Gray PW (1995) Plasma platelet-activating factor acetylhydrolase is a secreted phospholipase A₂ with a catalytic triad. *J Biol Chem* 270: 25481–25487

- 28 Touqui L, Herpin-Richard N, Gene RM, Jullian E, Aljabi D, Hamberger C, Vargaftig BB, Dessange JF (1994) Excretion of platelet activating factor-acetylhydrolase and phospholipase A₂ into nasal fluids after allergenic challenge: Possible role in the regulation of platelet activating factor release. *J Allergy Clin Immunol* 94: 109–119
- 29 Fonteh AN, Bass DA, Marshall LA, Seeds M, Samet JM, Chilton FH (1994) Evidence that secretory phospholipase A₂ plays a role in arachidonic acid release and eicosanoid biosynthesis by mast cells. *J Immunol* 152: 5438–5446
- 30 Scott DL, Sigler PB (1994) Structure and catalytic mechanism of secretory phospholipases A₂. *Adv Protein Chem* 45: 53–88
- 31 Bomalaski JS, Baker DG, Brophy L, Resurreccion NV, Spilberg I, Muniain M, Clark MA (1989) A phospholipase A₂-activating protein (PLAP) stimulates human neutrophil aggregation and release of lysosomal enzymes, superoxide, and eicosanoids. *J Immunol* 142: 3957–3962
- 32 Hsueh W, Tan XD, Qu XW, Sun XM, Gonzalez-Crussi F (1997) Injurious and protective mechanisms in the gut. Interaction of PAF, phospholipase A₂, eicosanoids, and nitric oxide synthase. *Adv Exp Med Biol* 407: 365–369
- 33 Kramer RM, Jakubowski JA, Deykin D (1988) Hydrolysis of 1-alkyl-2-arachidonoyl-*sn*-glycero-3-phosphocholine, a common precursor of platelet-activating factor and eicosanoids, by human platelet phospholipase A₂. *Biochim Biophys Acta* 959: 269–279
- 34 Nakae H, Endo S, Inada K, Yamashita H, Yamada Y, Takakuwa T, Kasai T, Ogawa M, Uchida K (1995) Plasma concentrations of type II phospholipase A₂, cytokines and eicosanoids in patients with burns. *Burns* 21: 422–426
- 35 Fonteh AN, Bass DA, Marshall LA, Seeds M, Samet JM, Chilton FH (1994) Evidence that secretory phospholipase A₂ plays a role in arachidonic acid release and eicosanoid biosynthesis by mast cells. *J Immunol* 152: 5438–5446
- 36 Fonteh AN, Samet JM, Chilton FH (1995) Regulation of arachidonic acid, eicosanoid, and phospholipase A₂ levels in murine mast cells by recombinant stem cell factor. *J Clin Invest* 96: 1432–1439
- 37 Balsinde J (2002) Roles of various phospholipases A₂ in providing lysophospholipid acceptors for fatty acid phospholipid incorporation and remodelling. *Biochem J* 364: 695–702
- 38 Metz SA (1986) Lysophosphatidylinositol, but not lysophosphatidic acid, stimulates insulin release. A possible role for phospholipase A₂ but not *de novo* synthesis of lysophospholipid in pancreatic islet function. *Biochem Biophys Res Commun* 138: 720–727
- 39 Arbibe L, Koumanov K, Vial D, Rougeot C, Faure G, Havet N, Longacre S, Vargaftig BB, Bereziat G, Voelker DR et al (1998) Generation of lyso-phospholipids from surfactant in acute lung injury is mediated by type-II phospholipase A₂ and inhibited by a direct surfactant protein A-phospholipase A₂ protein interaction. *J Clin Invest* 102: 1152–1160
- 40 Edelson JD, Vadas P, Villar J, Mullen JB, Pruzanski W (1991) Acute lung injury induced

- by phospholipase A₂. Structural and functional changes. *Am Rev Respir Dis* 143: 1102–1109
- 41 Fisher AB, Dodia C, Chander A, Jain M (1992) A competitive inhibitor of phospholipase A₂ decreases surfactant phosphatidylcholine degradation by the rat lung. *Biochem J* 288 (Pt 2): 407–411
- 42 Furue S, Mikawa K, Nishina K, Shiga M, Ueno M, Tomita Y, Kuwabara K, Teshirogi I, Ono T, Hori Y et al (2001) Therapeutic time-window of a group IIA phospholipase A₂ inhibitor in rabbit acute lung injury: Correlation with lung surfactant protection. *Crit Care Med* 29: 719–727
- 43 Koike K, Yamamoto Y, Hori Y, Ono T (2000) Group IIA phospholipase A₂ mediates lung injury in intestinal ischemia-reperfusion. *Ann Surg* 232: 90–97
- 44 Liu L (1999) Regulation of lung surfactant secretion by phospholipase A₂. *J Cell Biochem* 72: 103–110
- 45 Chilton FH, Averill FJ, Hubbard WC, Fonteh AN, Triggiani M, Liu MC (1996) Antigen-induced generation of lyso-phospholipids in human airways. *J Exp Med* 183: 2235–2245
- 46 De Windt LJ, Willems J, Roemen TH, Coumans WA, Reneman RS, Van Der Vusse GJ, Van Bilsen M (2001) Ischemic-reperfused isolated working mouse hearts: Membrane damage and type IIA phospholipase A₂. *Am J Physiol Heart Circ Physiol* 280: H2572–H2580
- 47 Fletcher JE, Yang CC, Rosenberg P (1982) Basic phospholipase A₂ from *Naja nigricollis* snake venom: Phospholipid hydrolysis and effects on electrical and contractile activity of the rat heart. *Toxicol Appl Pharmacol* 66: 39–54
- 48 Van Bilsen M, Van Der Vusse GJ (1995) Phospholipase-A₂-dependent signalling in the heart. *Cardiovasc Res* 30: 518–529
- 49 Gronroos JO, Laine VJ, Nevalainen TJ (2002) Bactericidal group IIA phospholipase A₂ in serum of patients with bacterial infections. *J Infect Dis* 185: 1767–1772
- 50 Juffrie M, Meer GM, Hack CE, Haasnoot K, Sutaryo Veerman AJ, Thijs LG (2001) Inflammatory mediators in dengue virus infection in children: Interleukin-6 and its relation to C-reactive protein and secretory phospholipase A₂. *Am J Trop Med Hyg* 65: 70–75
- 51 Laine VJ, Grass DS, Nevalainen TJ (2000) Resistance of transgenic mice expressing human group II phospholipase A₂ to *Escherichia coli* infection. *Infect Immun* 68: 87–92
- 52 Rintala EM, Nevalainen TJ (1993) Group II phospholipase A₂ in sera of febrile patients with microbiologically or clinically documented infections. *Clin Infect Dis* 17: 864–870
- 53 Tunaz H, Park Y, Buyukguzel K, Bedick JC, Nor Aliza AR, Stanley DW (2003) Eicosanoids in insect immunity: Bacterial infection stimulates hemocytic phospholipase A₂ activity in tobacco hornworms. *Arch Insect Biochem Physiol* 52: 1–6
- 54 Degousee N, Ghomashchi F, Stefanski E, Singer A, Smart BP, Borregaard N, Reithmeier R, Lindsay TF, Lichtenberger C, Reinisch W et al (2002) Groups IV, V, and X phospholipases A₂s in human neutrophils: Role in eicosanoid production and gram-negative bacterial phospholipid hydrolysis. *J Biol Chem* 277: 5061–5073

- 55 Borgstrom B (1980) Importance of phospholipids, pancreatic phospholipase A₂, and fatty acid for the digestion of dietary fat: *In vitro* experiments with the porcine enzymes. *Gastroenterology* 78: 954–962
- 56 Gijon MA, Perez C, Mendez E, Sanchez CM (1995) Phospholipase A₂ from plasma of patients with septic shock is associated with high-density lipoproteins and C3 anaphylatoxin: Some implications for its functional role. *Biochem J* 306 (Pt 1): 167–175
- 57 Gonzalez RJ, Moore EE, Ciesla DJ, Meng X, Biffl WL, Silliman CC (2001) Post-hemorrhagic shock mesenteric lymph lipids prime neutrophils for enhanced cytotoxicity via phospholipase A₂. *Shock* 16: 218–222
- 58 Green JA, Smith GM, Buchta R, Lee R, Ho KY, Rajkovic IA, Scott KF (1991) Circulating phospholipase A₂ activity associated with sepsis and septic shock is indistinguishable from that associated with rheumatoid arthritis. *Inflammation* 15: 355–367
- 59 Marshall LA, Hall RH, Winkler JD, Badger A, Bolognese B, Roshak A, Flamberg PL, Sung CM, Chabot-Fletcher M, Adams JL et al (1995) SB 203347, an inhibitor of 14 kDa phospholipase A₂, alters human neutrophil arachidonic acid release and metabolism and prolongs survival in murine endotoxin shock. *J Pharmacol Exp Ther* 274: 1254–1262
- 60 Sorensen J, Kald B, Tagesson C, Lindahl M (1994) Platelet-activating factor and phospholipase A₂ in patients with septic shock and trauma. *Intensive Care Med* 20: 555–561
- 61 Vadas P, Pruzanski W, Stefanski E (1988) Extracellular phospholipase A₂: Causative agent in circulatory collapse of septic shock? *Agents Actions* 24: 320–325
- 62 Vadas P, Pruzanski W (1991) Serum phospholipase A₂ values and septic shock. *Crit Care Med* 19: 988–990
- 63 Xu D, Lu Q, Deitch EA (1995) Calcium and phospholipase A₂ appear to be involved in the pathogenesis of hemorrhagic shock-induced mucosal injury and bacterial translocation. *Crit Care Med* 23: 125–131
- 64 Aufenanger J, Samman M, Quintel M, Fassbender K, Zimmer W, Bertsch T (2002) Pancreatic phospholipase A₂ activity in acute pancreatitis: A prognostic marker for early identification of patients at risk. *Clin Chem Lab Med* 40: 293–297
- 65 Bird NC, Goodman AJ, Johnson AG (1989) Serum phospholipase A₂ activity in acute pancreatitis: An early guide to severity. *Br J Surg* 76: 731–732
- 66 Buchler M, Malfertheiner P, Schadlich H, Nevalainen TJ, Friess H, Beger HG (1989) role of phospholipase A₂ in human acute pancreatitis. *Gastroenterology* 97: 1521–1526
- 67 Eskola JU, Nevalainen TJ (1986) Pancreatic phospholipase A₂ in human acute pancreatitis. *Mater Med Pol* 18: 132–135
- 68 Friess H, Shrikhande S, Riesle E, Kashiwagi M, Baczako K, Zimmermann A, Uhl W, Buchler MW (2001) Phospholipase A₂ isoforms in acute pancreatitis. *Ann Surg* 233: 204–212
- 69 Gronroos JM, Nevalainen TJ (1992) Increased concentrations of synovial-type phospholipase A₂ in serum and pulmonary and renal complications in acute pancreatitis. *Digestion* 52: 232–236
- 70 Kempainen E, Hietaranta A, Puolakkainen P, Sainio V, Halttunen J, Haapiainen R, Kivilaakso E, Nevalainen T (1999) Bactericidal/permeability-increasing protein and

- group I and II phospholipase A₂ during the induction phase of human acute pancreatitis. *Pancreas* 18: 21–27
- 71 Matsuda Y, Ogawa M, Nishijima J, Miyauchi K, Mori T (1986) Usefulness of determination of serum immunoreactive pancreatic phospholipase A₂ content for early identification of severe acute pancreatitis. *Hepatogastroenterology* 33: 214–216
- 72 Miura M, Endo S, Kaku LL, Inoue Y, Sato N, Wakabayashi G, Baba E, Katsuya H, Inada K, Sato S (2001) Plasma type II phospholipase A₂ levels in patients with acute pancreatitis. *Res Commun Mol Pathol Pharmacol* 109: 159–164
- 73 Nevalainen TJ (1989) The role of phospholipase A₂ in human acute pancreatitis. *Klin Wochenschr* 67: 180–182
- 74 Schuppisser JP, Grotzinger U, Reichlin B, Tondelli P (1985) The role of phospholipase A₂ in respiratory failure of acute pancreatitis. *Helv Chir Acta* 51: 665–667
- 75 Touqui L, Arbibe L (1999) A role for phospholipase A₂ in ARDS pathogenesis. *Mol Med Today* 5: 244–249
- 76 Blackwell GJ (1978) Phospholipase A₂ and platelet aggregation. *Adv Prostaglandin Thromboxane Res* 3: 137–142
- 77 Hazlett TL, Deems RA, Dennis EA (1990) Activation, aggregation, inhibition and the mechanism of phospholipase A₂. *Adv Exp Med Biol* 279: 49–64
- 78 Nakano T, Hanasaki K, Matsumoto S, Arita H (1988) Retinol induces platelet aggregation *via* activation of phospholipase A₂. *Biochem Biophys Res Commun* 154: 1075–1080
- 79 Atsumi G, Murakami M, Tajima M, Shimbara S, Hara N, Kudo I (1997) The perturbed membrane of cells undergoing apoptosis is susceptible to type II secretory phospholipase A₂ to liberate arachidonic acid. *Biochim Biophys Acta* 1349: 43–54
- 80 Yagami T, Ueda K, Asakura K, Hayasaki-Kajiwara Y, Nakazato H, Sakaeda T, Hata S, Kuroda T, Takasu N, Hori Y (2002) Group IB secretory phospholipase A₂ induces neuronal cell death *via* apoptosis. *J Neurochem* 81: 449–461
- 81 Yagami T, Ueda K, Asakura K, Hata S, Kuroda T, Sakaeda T, Takasu N, Tanaka K, Gamba T, Hori Y (2002) Human group IIA secretory phospholipase A₂ induces neuronal cell death *via* apoptosis. *Mol Pharmacol* 61: 114–126
- 82 Fonteh AN, Marion CR, Barham BJ, Edens MB, Atsumi G, Samet JM, High KP, Chilton FH (2001) Enhancement of mast cell survival: A novel function of some secretory phospholipase A₂ isotypes. *J Immunol* 167: 4161–4171
- 83 Riggins GJ, Markowitz S, Wilson JK, Vogelstein B, Kinzler KW (1995) Absence of secretory phospholipase A₂ gene alterations in human colorectal cancer. *Cancer Res* 55: 5184–5186
- 84 Bomalaski JS, Clark MA (1990) Activation of phospholipase A₂ in rheumatoid arthritis. *Adv Exp Med Biol* 279: 231–238
- 85 Bowton DL, Seeds MC, Fasano MB, Goldsmith B, Bass DA (1997) Phospholipase A₂ and arachidonate increase in bronchoalveolar lavage fluid after inhaled antigen challenge in asthmatics. *Am J Respir Crit Care Med* 155: 421–425

- 86 Busse W (1998) The role and contribution of leukotrienes in asthma. *Ann Allergy Asthma Immunol* 81: 17–26
- 87 Calabrese C, Triggiani M, Marone G, Mazzearella G (2000) Arachidonic acid metabolism in inflammatory cells of patients with bronchial asthma. *Allergy* 55 (Suppl 61): 27–30
- 88 Hurt-Camejo E, Paredes S, Masana L, Camejo G, Sartipy P, Rosengren B, Pedreno J, Vallve JC, Benito P, Wiklund O (2001) Elevated levels of small, low-density lipoprotein with high affinity for arterial matrix components in patients with rheumatoid arthritis: Possible contribution of phospholipase A₂ to this atherogenic profile. *Arthritis Rheum* 44: 2761–2767
- 89 Komatsubara T, Tojo H, Ying Z, Tomita T, Ochi T, Okamoto M (1995) Serum phospholipase A₂ activity and immunoreactive group II phospholipase A₂ in rheumatoid arthritis. *Clin Chim Acta* 236: 109–112
- 90 Kortekangas P, Aro HT, Nevalainen TJ (1994) Group II phospholipase A₂ in synovial fluid and serum in acute arthritis. *Scand J Rheumatol* 23: 68–72
- 91 Kramer RM, Pepinsky RB (1991) Assay and purification of phospholipase A₂ from human synovial fluid in rheumatoid arthritis. *Methods Enzymol* 197: 373–381
- 92 Lin MK, Farewell V, Vadas P, Bookman AA, Keystone EC, Pruzanski W (1996) Secretory phospholipase A₂ as an index of disease activity in rheumatoid arthritis. Prospective double blind study of 212 patients. *J Rheumatol* 23: 1162–1166
- 93 Pruzanski W, Vadas P (1988) Secretory synovial fluid phospholipase A₂ and its role in the pathogenesis of inflammation in arthritis. *J Rheumatol* 15: 1601–1603
- 94 Barbour SE, Dennis EA (1993) Antisense inhibition of group II phospholipase A₂ expression blocks the production of prostaglandin E₂ by P388D1 cells. *J Biol Chem* 268: 21875–21882
- 95 Bayburt T, Yu BZ, Lin HK, Browning J, Jain MK, Gelb MH (1993) Human nonpancreatic secreted phospholipase A₂: Interfacial parameters, substrate specificities, and competitive inhibitors. *Biochemistry* 32: 573–582
- 96 Bernard P, Pintore M, Berthon JY, Chretien JR (2001) A molecular modeling and 3D QSAR study of a large series of indole inhibitors of human non-pancreatic secretory phospholipase A₂. *Eur J Med Chem* 36: 1–19
- 97 Blanchard SG, Andrews RC, Brown PJ, Gan LS, Lee FW, Sinhababu AK, Wheeler TN (1998) Discovery of bioavailable inhibitors of secretory phospholipase A₂. *Pharm Biotechnol* 11: 445–463
- 98 Flower R (1978) Steroidal anti-inflammatory drugs as inhibitors of phospholipase A₂. *Adv Prostaglandin Thromboxane Res* 3: 105–112
- 99 Glaser KB (1995) Regulation of phospholipase A₂ enzymes: Selective inhibitors and their pharmacological potential. *Adv Pharmacol* 32: 31–66
- 100 Hansford KA, Reid RC, Clark CI, Tyndall JD, Whitehouse MW, Guthrie T, McGeary RP, Schafer K, Martin JL, Fairlie DP (2003) D-tyrosine as a chiral precursor to potent inhibitors of human non-pancreatic secretory phospholipase A₂ (IIa) with anti-inflammatory activity. *Chembiochem* 4: 181–185

- 101 Jain MK, Streb M, Rogers J, DeHaas GH (1984) Action of phospholipase A₂ on bilayers containing lysophosphatidylcholine analogs and the effect of inhibitors. *Biochem Pharmacol* 33: 2541–2551
- 102 Kokotos G, Kotsovolou S, Six DA, Constantinou-Kokotou V, Beltzner CC, Dennis EA (2002) Novel 2-oxoamide inhibitors of human group IVA phospholipase A₂. *J Med Chem* 45: 2891–2893
- 103 Kokotos G, Constantinou-Kokotou V, Noula C, Nicolaou A, Gibbons WA (1996) Synthesis of lipidic amino acid and dipeptide inhibitors of human platelet phospholipase A₂. *Int J Pept Protein Res* 48: 160–166
- 104 Lappas M, Munns MJ, King RG, Rice GE (2001) Antisense oligonucleotide inhibition of type II phospholipase A₂ expression, release and activity *in vitro*. *Placenta* 22: 418–424
- 105 Tanaka K, Arita H (1995) Secretory phospholipase A₂ inhibitors. Possible new anti-inflammatory agents. *Agents Actions* (Suppl) 46: 51–64
- 106 Kennedy BP, Payette P, Mudgett J, Vadas P, Pruzanski W, Kwan M, Tang C, Rancourt DE, Cromlish WA (1995) A natural disruption of the secretory group II phospholipase A₂ gene in inbred mouse strains. *J Biol Chem* 270: 22378–22385
- 107 Lilja I, Smedh K, Olaison G, Sjodahl R, Tagesson C, Gustafson-Svard C (1995) Phospholipase A₂ gene expression and activity in histologically normal ileal mucosa and in Crohn's ileitis. *Gut* 37: 380–385
- 108 MacPhee M, Chepenik KP, Liddell RA, Nelson KK, Siracusa LD, Buchberg AM (1995) The secretory phospholipase A₂ gene is a candidate for the Mom1 locus, a major modifier of ApcMin-induced intestinal neoplasia. *Cell* 81: 957–966
- 109 Fox N, Song M, Schrementi J, Sharp JD, White DL, Snyder DW, Hartley LW, Carlson DG, Bach NJ, Dillard RD et al (1996) Transgenic model for the discovery of novel human secretory non-pancreatic phospholipase A₂ inhibitors. *Eur J Pharmacol* 308: 195–203
- 110 Nevalainen TJ, Laine VJ, Grass DS (1997) Expression of human group II phospholipase A₂ in transgenic mice. *J Histochem Cytochem* 45: 1109–1119
- 111 Uozumi N, Kume K, Nagase T, Nakatani N, Ishii S, Tashiro F, Komagata Y, Maki K, Ikuta K, Ouchi Y et al (1997) Role of cytosolic phospholipase A₂ in allergic response and parturition. *Nature* 390: 618–622
- 112 Grass DS, Felkner RH, Chiang MY, Wallace RE, Nevalainen TJ, Bennett CF, Swanson ME (1996) Expression of human group II PLA₂ in transgenic mice results in epidermal hyperplasia in the absence of inflammatory infiltrate. *J Clin Invest* 97: 2233–2241
- 113 Bingham CO III, Murakami M, Fujishima H, Hunt JE, Austen KF, Arm JP (1996) A heparin-sensitive phospholipase A₂ and prostaglandin endoperoxide synthase-2 are functionally linked in the delayed phase of prostaglandin D₂ generation in mouse bone marrow-derived mast cells. *J Biol Chem* 271: 25936–25944
- 114 Balsinde J, Barbour SE, Bianco ID, Dennis EA (1994) Arachidonic acid mobilization in P388D1 macrophages is controlled by two distinct Ca²⁺-dependent phospholipase A₂ enzymes. *Proc Natl Acad Sci USA* 91: 11060–11064

- 115 Fonteh AN, Samet JM, Surette M, Reed W, Chilton FH (1998) Mechanisms that account for the selective release of arachidonic acid from intact cells by secretory phospholipase A₂. *Biochim Biophys Acta* 1393: 253–266
- 116 Fonteh AN, Atsumi G, LaPorte T, Chilton FH (2000) Secretory phospholipase A₂ receptor-mediated activation of cytosolic phospholipase A₂ in murine bone marrow-derived mast cells. *J Immunol* 165: 2773–2782
- 117 Bingham CO III, Fijneman RJ, Friend DS, Goddeau RP, Rogers RA, Austen KF, Arm JP (1999) Low molecular weight group IIA and group V phospholipase A₂ enzymes have different intracellular locations in mouse bone marrow-derived mast cells. *J Biol Chem* 274: 31476–31484
- 118 Fujishima H, Sanchez Mejia RO, Bingham CO III, Lam BK, Sapirstein A, Bonventre JV, Austen KF, Arm JP (1999) Cytosolic phospholipase A₂ is essential for both the immediate and the delayed phases of eicosanoid generation in mouse bone marrow-derived mast cells. *Proc Natl Acad Sci USA* 96: 4803–4807
- 119 Murakami M, Austen KF, Arm JP (1995) The immediate phase of c-s*n*-ligand stimulation of mouse bone marrow-derived mast cells elicits rapid leukotriene C₄ generation through post-translational activation of cytosolic phospholipase A₂ and 5-lipoxygenase. *J Exp Med* 182: 197–206
- 120 Reddy ST, Winstead MV, Tischfield JA, Herschman HR (1997) Analysis of the secretory phospholipase A₂ that mediates prostaglandin production in mast cells. *J Biol Chem* 272: 13591–13596
- 121 Blom M, Tool AT, Wever PC, Wolbink GJ, Brouwer MC, Calafat J, Egesten A, Knol EF, Hack CE, Roos D et al (1998) Human eosinophils express, relative to other circulating leukocytes, large amounts of secretory 14-kD phospholipase A₂. *Blood* 91: 3037–3043
- 122 Hundley TR, Marshall LA, Hubbard WC, MacGlashan DW Jr (1998) Characteristics of arachidonic acid generation in human basophils: Relationship between the effects of inhibitors of secretory phospholipase A₂ activity and leukotriene C₄ release. *J Pharmacol Exp Ther* 284: 847–857
- 123 Triggiani M, Granata F, Oriente A, De MV, Gentile M, Calabrese C, Palumbo C, Marone G (2000) Secretory phospholipases A₂ induce beta-glucuronidase release and IL-6 production from human lung macrophages. *J Immunol* 164: 4908–4915
- 124 Triggiani M, Granata F, Oriente A, Gentile M, Petraroli A, Balestrieri B, Marone G (2002) Secretory phospholipases A₂ induce cytokine release from blood and synovial fluid monocytes. *Eur J Immunol* 32: 67–76
- 125 Triggiani M, Granata F, Balestrieri B, Petraroli A, Scalia G, Del Vecchio L, Marone G (2003) Secretory phospholipases A₂ activate selective functions in human eosinophils. *J Immunol* 170: 3279–3288
- 126 Galli SJ (2000) Mast cells and basophils. *Curr Opin Hematol* 7: 32–39
- 127 Galli SJ (1993) New concepts about the mast cell. *N Engl J Med* 328: 257–265
- 128 Gordon JR, Galli SJ (1991) Release of both preformed and newly synthesized tumor necrosis factor alpha (TNF-α)/cachectin by mouse mast cells stimulated *via* the Fc

- epsilon RI. A mechanism for the sustained action of mast cell-derived TNF- α during IgE-dependent biological responses. *J Exp Med* 174: 103–107
- 129 Wedemeyer J, Tsai M, Galli SJ (2000) Roles of mast cells and basophils in innate and acquired immunity. *Curr Opin Immunol* 12: 624–631
- 130 Fonteh AN, Marion CR, Barham BJ, Edens MB, Atsumi G, Samet JM, High KP, Chilton FH (2001) Enhancement of mast cell survival: A novel function of some secretory phospholipase A₂ isotypes. *J Immunol* 167: 4161–4171
- 131 Nair X, Nettleton D, Clever D, Tramposch KM, Ghosh S, Franson RC (1993) Swine as a model of skin inflammation. Phospholipase A₂-induced inflammation. *Inflammation* 17: 205–215
- 132 Babu AS, Gowda TV (1994) Dissociation of enzymatic activity from toxic properties of the most basic phospholipase A₂ from *Vipera russelli* snake venom by guanidination of lysine residues. *Toxicon* 32: 749–752
- 133 Arita H, Hanasaki K (1993) Physiological aspects of a high affinity binding site for pancreatic-type phospholipase A₂. *J Lipid Mediat* 6: 217–222
- 134 Hanasaki K, Arita H (2002) Phospholipase A₂ receptor: A regulator of biological functions of secretory phospholipase A₂. *Prostaglandins Other Lipid Mediat* 68–69: 71–82
- 135 Hanasaki K, Arita H (1996) Structure and function of phospholipase A₂ receptor. *Adv Exp Med Biol* 416: 315–319
- 136 Ishizaki J, Kishino J, Teraoka H, Ohara O, Arita H (1993) Receptor-binding capability of pancreatic phospholipase A₂ is separable from its enzymatic activity. *FEBS Lett* 324: 349–352
- 137 Lambeau G, Lazdunski M (1999) Receptors for a growing family of secreted phospholipases A₂. *Trends Pharmacol Sci* 20: 162–170
- 138 Lambeau G, Ancian P, Nicolas JP, Beiboer SH, Moinier D, Verheij H, Lazdunski M (1995) Structural elements of secretory phospholipases A₂ involved in the binding to M-type receptors. *J Biol Chem* 270: 5534–5540
- 139 Ancian P, Lambeau G, Mattei MG, Lazdunski M (1995) The human 180-kDa receptor for secretory phospholipases A₂. Molecular cloning, identification of a secreted soluble form, expression, and chromosomal localization. *J Biol Chem* 270: 8963–8970
- 140 Hanasaki K, Yokota Y, Ishizaki J, Itoh T, Arita H (1997) Resistance to endotoxic shock in phospholipase A₂ receptor-deficient mice. *J Biol Chem* 272: 32792–32797
- 141 Koduri RS, Gronroos JO, Laine VJ, Le Calvez C, Lambeau G, Nevalainen TJ, Gelb MH (2002) Bactericidal properties of human and murine groups I, II, V, X, and XII secreted phospholipases A₂. *J Biol Chem* 277: 5849–5857
- 142 Fourcade O, Simon MF, Viode C, Rugani N, Leballe F, Ragab A, Fournie B, Sarda L, Chap H (1995) Secretory phospholipase A₂ generates the novel lipid mediator lysophosphatidic acid in membrane microvesicles shed from activated cells. *Cell* 80: 919–927
- 143 Bevers EM, Comfurius P, Zwaal RF (1983) Changes in membrane phospholipid distribution during platelet activation. *Biochim Biophys Acta* 736: 57–66
- 144 Dekkers DW, Comfurius P, Bevers EM, Zwaal RF (2002) Comparison between Ca²⁺-

- induced scrambling of various fluorescently labelled lipid analogues in red blood cells. *Biochem J* 362: 741–747
- 145 Fonteh AN, Chilton FH (1993) Mobilization of different arachidonate pools and their roles in the generation of leukotrienes and free arachidonic acid during immunologic activation of mast cells. *J Immunol* 150: 563–570
- 146 Fonteh AN, Chilton FH (1992) Rapid remodeling of arachidonate from phosphatidylcholine to phosphatidylethanolamine pools during mast cell activation. *J Immunol* 148: 1784–1791
- 147 Benveniste J, Chignard M, Le Couedic JP, Vargaftig BB (1982) Biosynthesis of platelet-activating factor (PAF-ACETHER) II. Involvement of phospholipase A₂ in the formation of PAF-ACETHER and lyso-PAF-ACETHER from rabbit platelets. *Thromb Res* 25: 375–385
- 148 Blank ML, Fitzgerald V, Smith ZL, Snyder F (1995) Generation of the precursor (lyso-PAF) of platelet-activating factor via a CoA-dependent transacylase. *Biochem Biophys Res Commun* 210: 1052–1058
- 149 Snyder F, Lee TC, Blank M, Malone B, Woodard D, Robinson M (1985) Platelet-activating factor: Alternate pathways of biosynthesis, mechanism of inactivation, and recylation of lyso-PAF with arachidonate. *Adv Prostaglandin Thromboxane Leukot Res* 15: 693–696
- 150 East L, Isacke CM (2002) The mannose receptor family. *Biochim Biophys Acta* 1572: 364–386
- 151 Durstin M, Durstin S, Molski TF, Becker EL, Sha'afi RI (1994) Cytoplasmic phospholipase A₂ translocates to membrane fraction in human neutrophils activated by stimuli that phosphorylate mitogen-activated protein kinase. *Proc Natl Acad Sci USA* 91: 3142–3146
- 152 Gordon RD, Leighton IA, Campbell DG, Cohen P, Creaney A, Wilton DC, Masters DJ, Ritchie GA, Mott R, Taylor IW et al (1996) Cloning and expression of cytosolic phospholipase A₂ (cPLA₂) and a naturally occurring variant. Phosphorylation of Ser505 of recombinant cPLA₂ by p42 mitogen-activated protein kinase results in an increase in specific activity. *Eur J Biochem* 238: 690–697
- 153 Hazan-Halevy I, Levy R (2000) Activation of cytosolic phospholipase A₂ by opsonized zymosan in human neutrophils requires both ERK and p38 MAP-kinase. *Adv Exp Med Biol* 479: 115–123
- 154 Hefner Y, Borsch-Haubold AG, Murakami M, Wilde JI, Pasquet S, Schieltz D, Ghomashchi F, Yates JR III, Armstrong CG, Paterson A et al (2000) Serine 727 phosphorylation and activation of cytosolic phospholipase A₂ by MNK1-related protein kinases. *J Biol Chem* 275: 37542–37551
- 155 Kramer RM, Roberts EF, Hyslop PA, Utterback BG, Hui KY, Jakubowski JA (1995) Differential activation of cytosolic phospholipase A₂ (cPLA₂) by thrombin and thrombin receptor agonist peptide in human platelets. Evidence for activation of cPLA₂ independent of the mitogen-activated protein kinases ERK1/2. *J Biol Chem* 270: 14816–14823
- 156 Kramer RM, Roberts EF, Um SL, Borsch-Haubold AG, Watson SP, Fisher MJ,

- Jakubowski JA (1996) p38 mitogen-activated protein kinase phosphorylates cytosolic phospholipase A₂ (cPLA₂) in thrombin-stimulated platelets. Evidence that proline-directed phosphorylation is not required for mobilization of arachidonic acid by cPLA₂. *J Biol Chem* 271: 27723–27729
- 157 Kawakami T, Galli SJ (2002) Regulation of mast-cell and basophil function and survival by IgE. *Nat Rev Immunol* 2: 773–786
- 158 Hata D, Kawakami Y, Inagaki N, Lantz CS, Kitamura T, Khan WN, Maeda-Yamamoto M, Miura T, Han W, Hartman SE et al (1998) Involvement of Bruton's tyrosine kinase in Fc epsilon RI-dependent mast cell degranulation and cytokine production. *J Exp Med* 187: 1235–1247
- 159 Petro JB, Khan WN (2001) Phospholipase C-gamma 2 couples Bruton's tyrosine kinase to the NF-kappa B signaling pathway in B lymphocytes. *J Biol Chem* 276: 1715–1719
- 160 Tsai M, Chen RH, Tam SY, Blenis J, Galli SJ (1993) Activation of MAP kinases, pp90rsk and pp70-S6 kinases in mouse mast cells by signaling through the c-kit receptor tyrosine kinase or Fc epsilon RI: Rapamycin inhibits activation of pp70-S6 kinase and proliferation in mouse mast cells. *Eur J Immunol* 23: 3286–3291
- 161 Galli SJ, Tsai M, Wershil BK (1993) The c-kit receptor, stem cell factor, and mast cells. What each is teaching us about the others. *Am J Pathol* 142: 965–974