

# Stimulation of prostaglandin E<sub>2</sub> (PGE<sub>2</sub>) production by arachidonic acid, oestrogen and parathyroid hormone in MG-63 and MC3T3-E1 osteoblast-like cells

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## Abstract

Polyunsaturated fatty acids (PUFAs) as well as oestrogen (E2) and parathyroid hormone (PTH) affect bone cells. The aim of the study was to determine whether arachidonic acid (AA), E2, and PTH increase prostaglandin E<sub>2</sub> (PGE<sub>2</sub>) synthesis in MG-63 and MC3T3-E1 osteoblastic cells and the level of mediation by COX-1 and COX-2. PGE<sub>2</sub> levels were determined in the conditioned culture media of MG-63 and MC3T3-E1 osteoblasts after exposure to AA, PTH and E2. Cells were pre-incubated in some experiments with the unselective COX inhibitor indomethacin or the COX-2 specific blocker NS-398. Indirect immunofluorescence was performed on MG-63 cells to detect the presence and location of the two enzymes involved. AA increased PGE<sub>2</sub> secretion in both cell lines; production by MC3T3-E1 cells, however, was significantly higher than that of MG-63 cells. This could be due to autoamplification via the EP<sub>1</sub> subtype of PGE receptors in mouse MC3T3-E1 osteoblasts. Both COX-1 and COX-2 affected the regulation of PGE<sub>2</sub> synthesis in MG-63 cells. E2 had no effect on PGE<sub>2</sub> secretion in both cell lines, while PTH caused a slight increase in PGE<sub>2</sub> synthesis in the MG-63 cell line.

## 1. Introduction

Polyunsaturated fatty acids (PUFAs) as well as the bone modulating hormones, oestrogen (E2) and parathyroid hormone (PTH) have positive effects on bone homeostasis. Hormones may affect bone cell activity by stimulating or suppressing the release of locally acting factors such as the prostaglandins (PGs) in the bone cell environment [1].

PUFAs are converted via a series of desaturation and elongation steps to various longer chain PUFAs specifically arachidonic acid (AA) and eicosapentaenoic acid, which in turn can act as precursors for PGs [2] (Fig. 1). Some studies suggested that PGs may mediate the anabolic effects of E2 in rats and mice [3] and [4], while both PGs and E2 seem to target early osteoblast precursors in the bone marrow [5]. PTH induces PG synthesis by osteoblasts [6] and [7], and PGs can induce bone resorption, an effect of PTH at physiological concentrations [6]. PTH may therefore exert some of its effects via induction of PG synthesis. Exposure of cultured mouse parietal bones to AA and PTH simultaneously amplified PG production in response to PTH [8].

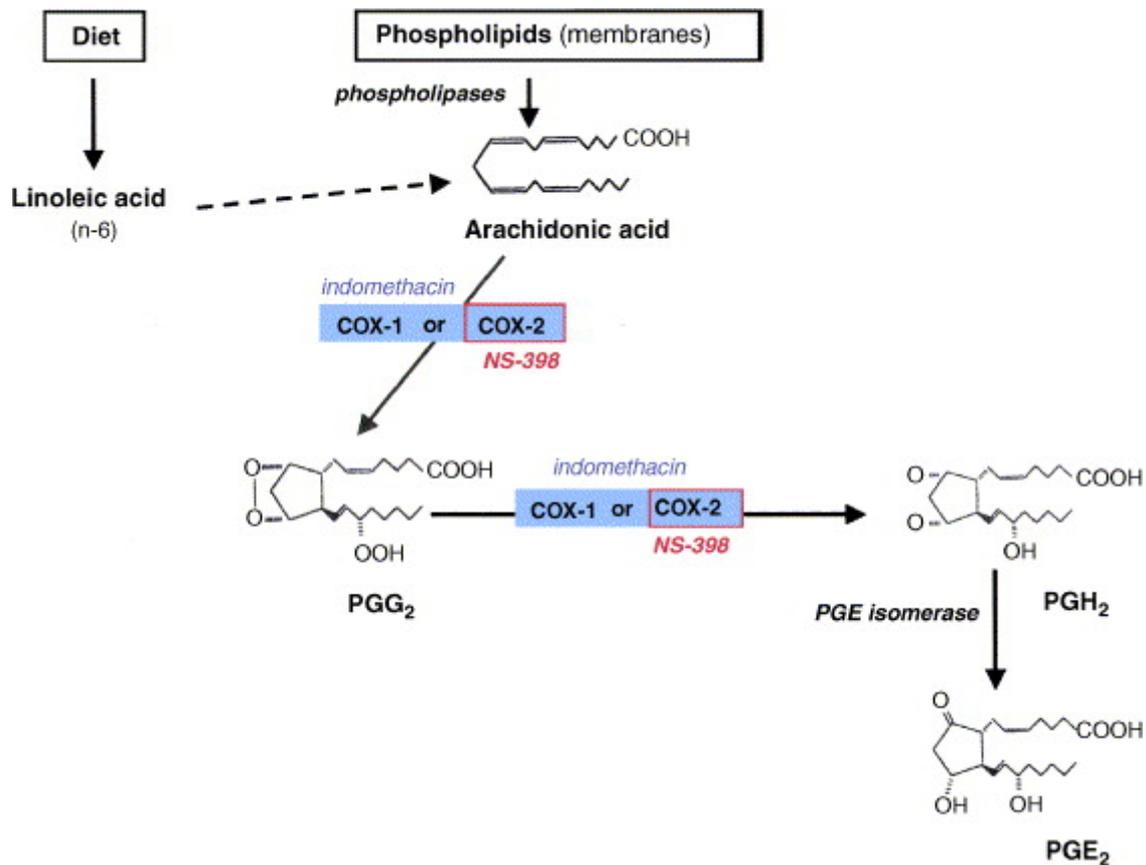


Fig. 1. The prostaglandin pathway indicating the enzymes involved in the synthesis of PGE<sub>2</sub> from its substrate AA. Indomethacin is an unselective blocker of both COX-1 and COX-2, while NS-398 blocks only COX-2.

Two iso-enzymes, cyclooxygenase-1 (COX-1) (constitutive) and cyclooxygenase-2 (COX-2) (inducible) regulate PG synthesis (Fig. 1). Two isoforms of the PGE synthase for prostaglandin E<sub>2</sub> (PGE<sub>2</sub>) biosynthesis have been cloned and characterized. Membrane-associated PGE synthase (mPGES) is thought to be an inducible enzyme whilst cytosolic PGE synthase (cPGES) is constitutively expressed [9], [10] and [11]. cPGES is functionally coupled with COX-1 and mPGES is functionally coupled with COX-2 [10], [12] and [13]. PTH induces COX-2 expression with little or no effects on COX-1 or cPLA<sub>2</sub> [14]. PTH and PTH-related peptide are potent stimulators of PGE<sub>2</sub> secretion in cultured neonatal rat calvaria [15].

Following their intracellular synthesis, PGs exit the cell, act on the parent cell and/or neighbouring cells in an autocrine and/or paracrine fashion through specific PG receptors thereby affecting changes in the levels of second messengers [16]. PGE receptors belong to the G protein-coupled seven transmembrane domain family of receptors. There are at least four distinct receptors for PGE<sub>2</sub> with differential signaling pathways: EP<sub>1</sub> with Ca<sup>2+</sup> mobilization; EP<sub>2</sub> and EP<sub>4</sub> with stimulation of cAMP production; and EP<sub>3</sub> mainly with the inhibition of cAMP production [17] and [18]. Recently, Sakuma et al. [19], using primary cultures of murine osteoblasts, demonstrated that PGE<sub>2</sub> is an effective stimulator of cAMP production and an inducer of COX-2. This effect was attributed to cAMP-dependent activation of PKA and to be the result of the combined effects of activation of the EP<sub>2</sub> and EP<sub>4</sub> receptors [19].

Nonsteroidal, antiinflammatory drugs (NSAIDs) inhibit synthesis of PGs. A well known example of this class, indomethacin, reversibly inhibits PG synthesis by competing with the substrate AA for the active site of the enzyme, thus blocking both COX-1 and COX-2 activity [20] and [21]. NS-398 on the other hand, is known to selectively block only COX-2 mediated PG production [21] and [22]. It is possible that

modulation of PG synthesis in osteoblasts using selective NSAIDs may affect bone formation or resorption. Fig. 1 illustrates the action of indomethacin and NS-398 on COX-1 and COX-2.

The purpose of the study was to determine whether AA alone or in combination with E2 and PTH induces PGE<sub>2</sub> synthesis in osteoblast-like cells and to determine, by employing specific blockers, to what extent COX-1 and COX-2 contribute to the observed effects.

## 2. Materials and methods

### 2.1. Cell cultures

MG-63 (human osteoblast-like, osteosarcoma-derived) cells were purchased from the American Type Culture Collection, Rockville, MD, USA. Nontransformed MC3T3-E1 mouse calvaria fibroblasts (established from the calvaria of an embryo/fetus C57BL/6 mouse) described to differentiate to osteoblasts [23], were purchased from Deutsche Sammlung von Mikroorganismen und Zellkulturen, Braunschweig, Germany.

### 2.2. Reagents

Sigma Chemical Co (St. Louis, MO, USA) supplied DMEM, l-glutamine, crystal violet, trypan blue, AA, E2, PTH fragment 1–34, indomethacin, gamma globulin, dextran-coated charcoal and PGE<sub>2</sub>. Heat inactivated fetal calf serum (FCS) was obtained from Highveld Biological (Pty) Ltd. (Sandringham, SA). Gentamycin was supplied by Gibco BRL (Invitrogen Corporation, Carlsbad, CA, USA). NS-398 was obtained from Cayman Chemical Company (Ann Arbor, MI, USA). All other chemicals were of analytical grade and supplied by Sigma Chemical Co (St. Louis, MO, USA)

### 2.3. Methods

#### 2.3.1. Cell culture

Following trypan blue exclusion, MG-63 and MC3T3-E1 cells were seeded at densities of 40 000 cells per well in 24-well cluster plates. Cells were cultured in DMEM with 10% heat-inactivated FCS, as measurable PGE<sub>2</sub> is not produced by cells in serum-free media [24]. Regulation of PGE<sub>2</sub> biosynthesis in MG-63 cells is cell density dependent. Subconfluent cultures displayed a greater response to cytokine stimulation than confluent cultures [25]. It thus seems that signaling pathways resulting in PGE<sub>2</sub> biosynthesis are subject to complex regulation by cell–cell or cell–extracellular matrix interactions, therefore only subconfluent cell cultures were used in these experiments. After 24 h, medium was changed and subconfluent cells exposed to vehicle (0.2% ethanol), PTH (10<sup>-7</sup> M), E2 (10<sup>-6</sup> M) or AA (20 µg/ml) for 4 h. To determine the role of the PGHS enzymes COX-1 and COX-2 on PGE<sub>2</sub> synthesis, cells were incubated with the unselective COX blocker indomethacin (1 µM) or the COX-2 specific blocker NS-398 (0.1 µM) which were added to the growth medium 45 min prior to the addition of AA and hormones [22] and [24]. Cell cultures were maintained at 37 °C in a humidified atmosphere of 95% air and 5% CO<sub>2</sub>. All cell cultures were supplemented with 2 mM l-glutamine and gentamycin (25 µg/ml). After 4 h conditioned media were aspirated from cultured cells and stored at –70 °C until analyzed. Following removal of medium, cell numbers were determined by crystal violet staining [26] and [27]. In short, cultures were fixed with 1% glutaraldehyde, stained with 1% crystal violet, and the dye extracted with 0.2% Triton X-100. Absorbance (OD) was read on an ELX800 Universal Microplate Reader (Bio-Tek Instruments Inc., Analytical Diagnostic Products, Weltevreden Park, SA) at a wavelength of 570 nm;

0.2% Triton X-100 in water was used as a blank. Crystal violet is a basic dye, which stains cell nuclei [26]. Spectrophotometer readings of colour intensity are therefore an indication of DNA content and therefore cell numbers. Results were analyzed using a linear standard curve established from known cell numbers. Three independent experiments were conducted in quadruplicate.

### 2.3.2. Radioimmunoassay (RIA) of PGE<sub>2</sub> in cell culture media

The amount of PGE<sub>2</sub> produced by the cells and released into the media was assessed using a competitive binding RIA, adapted from a method described by Raisz and Simmons [15]. In this assay, unlabelled PGE<sub>2</sub> samples or standards diluted in working buffer (0.01 M Tris-HCl in 0.14 M NaCl, pH 7.6, containing 2 mg gamma globulin/ml) were incubated overnight at 4 °C with radiolabelled PGE<sub>2</sub> (<sup>3</sup>H]-PGE<sub>2</sub>, New England Nuclear™ Life Science Products, Inc., Boston, MA, USA) and unlabelled PGE<sub>2</sub> antibody (provided by Dr. Laurence Levine, Brandeis University, Waltham, MA, USA). The samples were put on ice and subsequently dextran-coated charcoal was added to each polystyrene tube. Free PGE<sub>2</sub> was removed by centrifugation for 15 min at 3000 rpm at 4 °C with a Rotixa 120R, Hettich centrifuge. Thereafter, the supernatant was transferred to a counting vial and Lquiscent (NEN) scintillation cocktail (Packard Bioscience B.V., Groningen, The Netherlands) added. Samples were counted for 10 min each on the <sup>3</sup>H channel using a Beckman L55000CE Liquid Scintillation counter. The percentage of bound versus unbound [<sup>3</sup>H]-PGE<sub>2</sub> was compared to a standard curve to calculate the amount of PGE<sub>2</sub> in the original samples.

### 2.3.3. Indirect immunofluorescence for detection of COX-1 and COX-2 in MG-63 cells

Following trypan blue exclusion, cells were seeded at a density of 200 000 cells per heat-sterilized coverslip in 6-well cluster plates and left to adhere for 24 h. Fresh growth medium containing vehicle only (0.2% ethanol)(control) or 20 µg/ml AA was added to near confluent layers. Cells were exposed for 4 h at 37 °C. At the end of the experiment, after discarding the medium, cells were fixed in 10% formaldehyde (v/v) in (2 mM EGTA in PBS) for 10 min at room temperature. The presence of COX-1 and COX-2 after exposure to AA were visualized by indirect immunofluorescence as follows:

The coverslips were transferred to a staining dish and rinsed three times with PBS at room temperature. Cells were then permeabilized in ice cold 97% methanol containing 2 mM EGTA in PBS at -20 °C for 4 min whereafter they were rinsed thrice with PBS. Primary antibody (25 µl mouse monoclonal antibody against human COX-1 or COX-2 (1:1000 in PBS)(Cayman Chemical Company, Ann Arbor, MI, USA), was added to each coverslip and incubated for 60 min at 37 °C in a damp environment. After rinsing the cells with PBS, the cells were incubated with the secondary antibody (25 µl 1:100 biotin-conjugated anti-mouse IgG (Fab-specific, developed in goat) in FITC-conjugate diluent) (Diagnostic and Technical Services, Johannesburg, SA), for 1 h at 37 °C in a damp environment. After rinsing, cells were finally incubated with ExtrAvidin®-FITC conjugate (1:200 in FITC-conjugate diluent) (Sigma Chemical Co) (St. Louis, MO, USA) for 60 min. The coverslips were then mounted with a glycerol-based mounting fluid after the final washing step. Photographs were taken with 400 ASA film on a fluorescent microscope (Nikon Optiphot microscope equipped with an episcopic-fluorescence attachment and an excitation-emission filter with an average wavelength of 495 nm for FITC).

## 2.4. Statistics

Data presented are the results of three separate experiments ( $n=4$ ). Statistical analysis was performed using Statistics for Windows software (version 2, Tallahassee, Florida, USA). Student's paired *t*-test was used to evaluate differences between the sample of interest and its respective control. A *P* value of less than 0.05 was considered to be statistically significant.

### 3. Results

#### 3.1. Effects of cyclooxygenase blockers and AA on PGE<sub>2</sub> production in MG-63 cells

The effects of the cyclooxygenase blockers indomethacin and NS-398 and AA on PGE<sub>2</sub> production in MG-63 cells is shown in Fig. 2. Compared to control incubation of MG-63 cells with either indomethacin or NS-398 resulted in almost 90% inhibition of PGE<sub>2</sub> production. Inhibition was similar for both treatments.

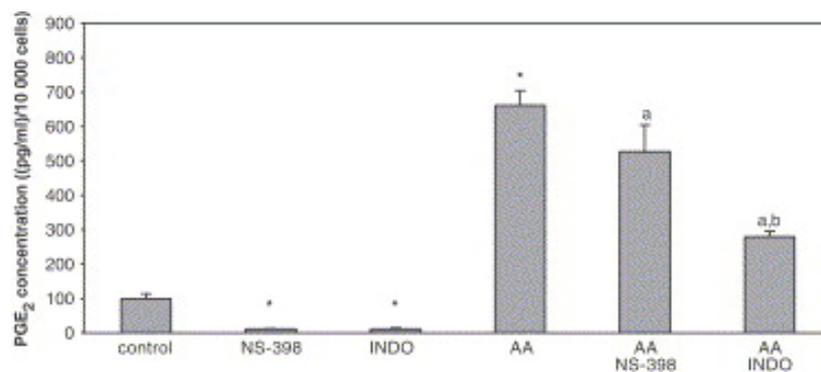


Fig. 2. Effects of cyclooxygenase blockers and AA on PGE<sub>2</sub> production in MG-63 cells. MG-63 cells were treated with vehicle (0.2% ethanol) or AA (20 µg/ml) for 4 h before sampling of the media. Indomethacin (INDO) (1 µM) and NS-398 (0.1 µM) were added 45 min prior to AA treatment. PGE<sub>2</sub> radioimmunoassay was performed as described in Materials and Methods and expressed as (pg/ml)/10 000 cells. \*Significant difference from control; (a) significant difference from AA; (b) significant difference from (AA+indomethacin),  $P < 0.05$ ,  $n = 4$ . Data are from a representative experiment. The experiment was repeated three times, each experiment yielding comparable data.

AA increased PGE<sub>2</sub> synthesis 4–6fold compared to control. Pre-incubation with COX blockers prior to AA treatment inhibited PGE<sub>2</sub> secretion. Indomethacin-mediated inhibition, however, was greater than NS-398-mediated inhibition (60% compared to 20%) as indicated in Fig. 2. Application of blockers did not result in the very low levels of PGE<sub>2</sub> synthesis observed when AA-unstimulated cells (controls) were exposed to these blockers.

#### 3.2. Indirect immunofluorescence staining for COX-1 and COX-2 in control and AA-activated MG-63 cells

Fig. 3 depicts the presence of COX-1 and COX-2 enzymes in control and AA-activated MG-63 cells as shown by indirect immunofluorescence staining. Exposing MG-63 cells to either vehicle (0.2% ethanol) (control) or AA (20 µg/ml) in the presence of FCS, resulted in detection of both COX-1 (Fig. 3A and B) and COX-2 (Fig. 3C and D) enzymes. Morita et al. [28] reported that COX-1 and COX-2 are both located in the endoplasmic reticulum as well as the nuclear envelope. COX-2, however, is more highly concentrated on the nuclear membrane than COX-1 [28]. This phenomenon is confirmed in Fig. 3. No difference in the densities of either COX-1 (Fig. 3A and B) or COX-2 (Fig. 3C and D) in control or AA-treated cells was found.

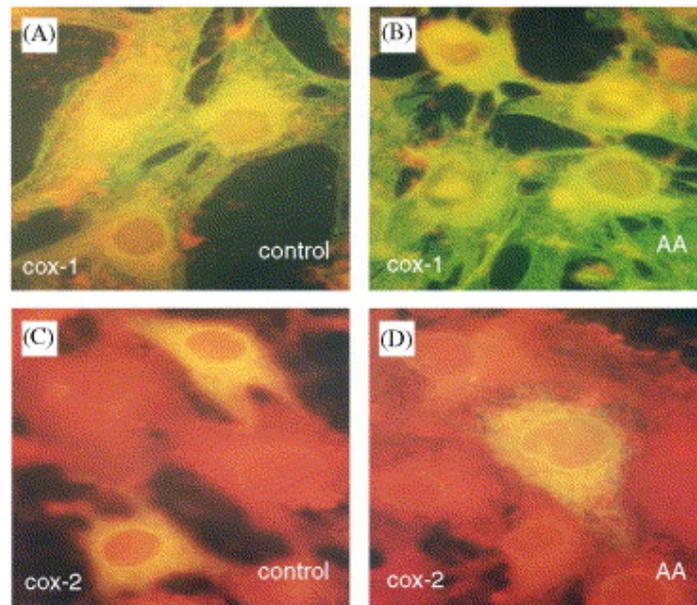


Fig. 3. Immunofluorescent staining for COX-1 and COX-2 in control and AA-activated MG-63 cells. After MG-63 cells were cultured with DMEM with 10% FCS for 24 h, fresh growth medium containing vehicle only (0.2% ethanol) (control) or 20  $\mu\text{g/ml}$  AA was added to near confluent layers. Cells were exposed for 4 h at 37  $^{\circ}\text{C}$ . At the end of the experiment, cells were subjected to indirect immunofluorescence staining using mouse monoclonal antibody against human COX-1 (A and B) or COX-2 (C and D) and then biotin-conjugated anti-mouse IgG (Fab-specific, developed in goat) in FITC-conjugate diluent. Photographs were taken with 400 ASA film on a fluorescent microscope.

### 3.3. Effects of AA and PTH on PGE<sub>2</sub> production in MG-63 cells

Fig. 4 depicts the effects of AA and PTH on PGE<sub>2</sub> production in MG-63 cells. Exposure to PTH ( $10^{-7}$  M) for 4 h, resulted in a 30% increase in PGE<sub>2</sub> production compared to control. Simultaneous exposure of these cells for 4 h to AA and PTH did not increase PGE<sub>2</sub> secretion above the AA only stimulated PGE<sub>2</sub> production. It thus seems that AA–PTH co-treatment had no synergistic effect on PGE<sub>2</sub> production in this model. Pre-incubation of MG-63 cells with the COX blockers indomethacin or NS-398 prior to the combined PTH–AA treatment, yielded results similar to those observed when blockers were added prior to AA treatment only. Therefore no PTH-mediated COX stimulation could be observed.

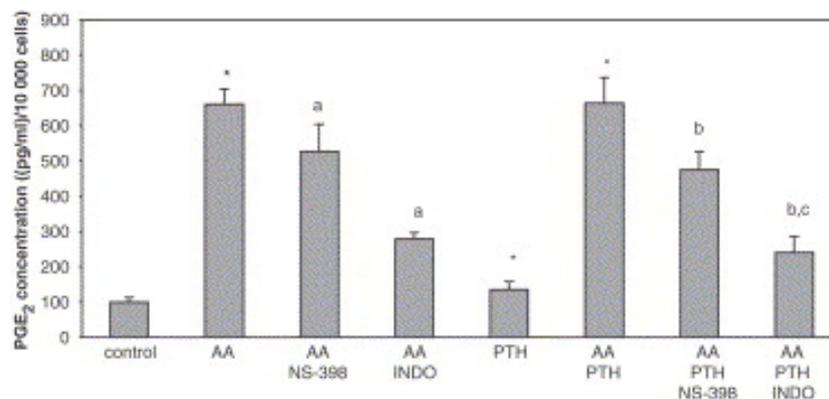


Fig. 4. Effects of AA and PTH on PGE<sub>2</sub> production in MG-63 cells. MG-63 cells were treated with vehicle (0.2% ethanol), AA (20  $\mu\text{g/ml}$ ) and PTH ( $10^{-7}$  M) for 4 h before sampling of the media. Indomethacin (INDO) (1  $\mu\text{M}$ ) and NS-398 (0.1  $\mu\text{M}$ ) were added 45 min prior to AA treatment. PGE<sub>2</sub> radioimmunoassay was performed as described in the Materials and Methods and expressed as (pg/ml)/10 000 cells. \*Significant difference from control; (a) significant difference from AA; (b) significant difference from (AA+PTH); (c) significant difference from (AA+PTH+NS-398),  $P < 0.05$ ,  $n = 4$ . Data are from a representative experiment. The experiment was repeated three times, each experiment yielding comparable data.

### 3.4. Effects of AA and oestrogen (E2) on PGE<sub>2</sub> production in MG-63 cells

Fig. 5 depicts the effects of AA and E2 on PGE<sub>2</sub> production in MG-63 cells. Exposing MG-63 cells to E2 ( $10^{-6}$  M) for 4 h did not affect PGE<sub>2</sub> production compared to control. Exposing cells to AA and E2 simultaneously did not enhance PGE<sub>2</sub> production above that already observed after AA exposure only. Pre-incubation of MG-63 cells with the COX blockers indomethacin or NS-398 prior to the combined E2–AA treatment, yielded similar results to those observed when blockers were added prior to AA treatment only. Therefore, E2 was not able to enhance AA-stimulated PGE<sub>2</sub> synthesis.

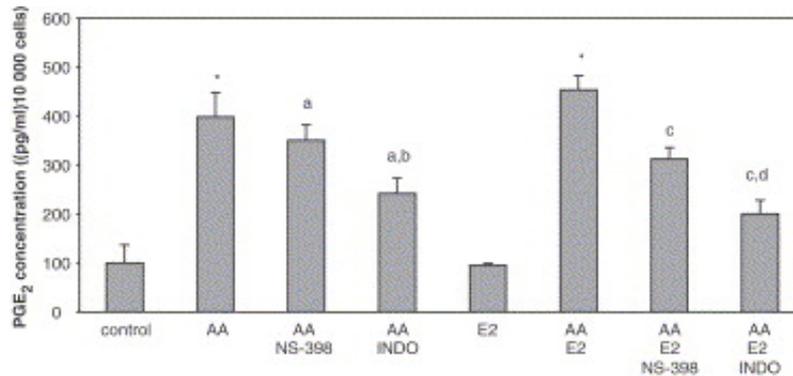


Fig. 5. Effects of AA and oestrogen (E2) on PGE<sub>2</sub> production in MG-63 cells. MG-63 cells were treated with vehicle (0.2% ethanol), AA (20  $\mu$ g/ml) or E2 ( $10^{-6}$  M) for 4 h before sampling of the media. Indomethacin (1  $\mu$ M) and NS-398 (0.1  $\mu$ M) were added 45 min prior to AA treatment. PGE<sub>2</sub> radioimmunoassay was performed as described in the Materials and Methods and expressed as (pg/ml)/10 000 cells. \*Significant difference from control; (a) significant difference from AA; (b) significant difference from (AA+NS-398); (c) significant difference from (AA+E2); (d) significant difference from (AA+E2+NS-398),  $P < 0.05$ ,  $n = 4$ . Data are from a representative experiment. The experiment was repeated three times, each experiment yielding comparable data.

### 3.5. Effects of AA, oestrogen and PTH on PGE<sub>2</sub> production in MC3T3-E1 cells

The MG-63 osteoblast is an osteosarcoma derived cell line. These cells have undergone an extended period of abnormal growth in vivo [29]. Concern has been expressed that cell lines derived from tumor tissue are different from their normal counterparts because cell regulatory mechanisms in permanently transformed cells might differ from those in normal cells. Therefore one comparative experiment to examine PG synthesis following exposure to AA, and systemic hormones, E2 and PTH was conducted on normal murine osteoblast-like cells.

Fig. 6 depicts the effects of AA, E2 and PTH on PGE<sub>2</sub> production in MC3T3-E1 murine osteoblasts. Exposing MC3T3-E1 cells to AA for 4 h stimulated PGE<sub>2</sub> secretion significantly. PGE<sub>2</sub> synthesis in the MC3T3-E1 cells was amplified more than three times over and above what was observed in the MG-63 cells after exposure to AA. Compared to control, AA-stimulated PGE<sub>2</sub> secretion was 12–14fold in MC3T3-E1, compared to 4–5fold in MG-63 cells (Fig. 2 and Fig. 6). No stimulation of PGE<sub>2</sub> secretion was observed after exposure of the MC3T3-E1 cells to PTH or E2.

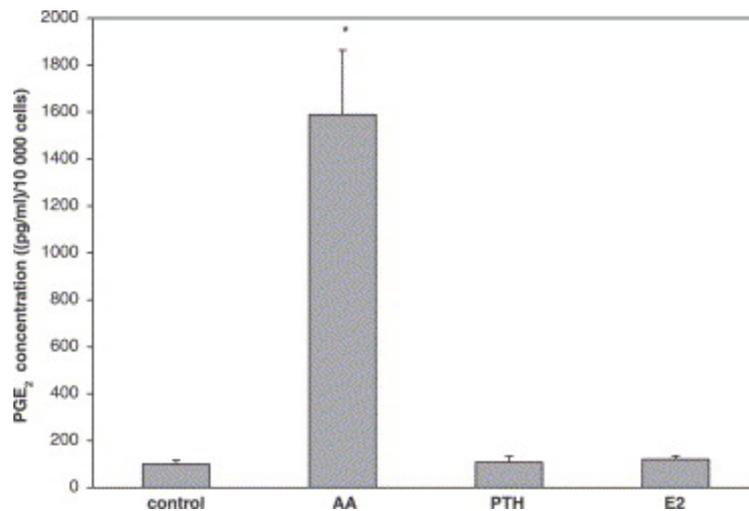


Fig. 6. Effects of AA, PTH and oestrogen (E2) on PGE<sub>2</sub> production in MC3T3-E1 cells. Cells were treated with vehicle (0.2% ethanol), AA (20 µg/ml), oestrogen (E2) (10<sup>-6</sup> M) and PTH (10<sup>-7</sup> M) for 4 h before sampling of the media. PGE<sub>2</sub> radioimmunoassay was performed as described in the Materials and Methods and expressed as (pg/ml)/10 000 cells. \*Significant difference from control,  $P < 0.05$ ,  $n = 4$ . Data are from a representative experiment. The experiment was repeated three times, each experiment yielding comparable data.

#### 4. Discussion

The aim of this study was to determine whether AA, E2 and PTH modulate PGE<sub>2</sub> synthesis in MG-63 and MC3T3-E1 osteoblast-like cell lines, and whether COX-1 or COX-2 is involved. Exposure to AA enhanced PGE<sub>2</sub> production significantly in both MG-63 and MC3T3-E1 cell lines. Since AA is the natural substrate for PGE<sub>2</sub> synthesis [16] and PGE<sub>2</sub> the major PG produced by osteoblastic cells [30] and [31] this observation was expected. The AA-stimulated production of PGE<sub>2</sub> by MC3T3-E1 cells, however, was significantly higher than that in MG-63 cells. This observation might reflect a difference in the stimulatory mechanisms involved in PGE<sub>2</sub> production in these cell lines. PGE<sub>2</sub> may autoamplify its own production by inducing COX-2 in bone [1], [7], [19], [32] and [33]. Suda et al. [34] showed that autoamplified production of PGE<sub>2</sub> is mediated via the EP<sub>1</sub> subtype of PGE receptors in mouse MC3T3-E1 osteoblasts. It is not known whether MG-63 cells express the EP<sub>1</sub> receptor.

PGs act on the parent cell and/or neighbouring cells in an autocrine and/or paracrine fashion through specific prostanoid receptors thereby affecting changes in the levels of second messengers [16]. There are at least four distinct receptors for PGE<sub>2</sub> with differential signaling pathways: EP<sub>1</sub> with Ca<sup>2+</sup> mobilization; EP<sub>2</sub> and EP<sub>4</sub> with stimulation of cAMP production; and EP<sub>3</sub> mainly with the inhibition of cAMP production [17] and [18]. The expression patterns of PG receptors differ in various cell types, differentiation status of these cells, tissues, and species. MC3T3-E1 mouse osteoblastic cells were reported to predominantly express EP<sub>1</sub> and EP<sub>4</sub> receptors [31], whilst human mesenchymal stem cells express EP<sub>4</sub> receptors [13].

To elucidate whether AA increased PGE<sub>2</sub> via COX-1 and/or COX-2, COX blockers were included before exposure to AA. Indomethacin is known to block both COX-1 and COX-2, while low concentrations of NS-398 are responsible for COX-2 specific inhibition [22] and [24]. Exposing MG-63 control cells to either NSAIDS inhibited PGE<sub>2</sub> production significantly. As both blockers are responsible for COX-2 inhibition and the PGE<sub>2</sub> inhibitory effects by these blockers were similar, it is possible that the observed inhibition could be attributed mainly to COX-2 suppression. In our experiment cells were cultured in DMEM with 10% heat-inactivated FCS, as measurable PGE<sub>2</sub> was not produced by cells in serum-free

media [24]. FCS contains AA in its composition, however, the concentration thereof may be different for different batches [35]. It has been reported that COX-1 requires higher concentrations of AA for its optimal function than does COX-2, implying that the amount of AA supplied critically influences which COX isozymes are utilized [12]. One can thus speculate that in basal conditions, with low AA concentrations present in the culture media, COX-2 could be the major cyclooxygenase responsible for AA metabolism.

In the MG-63 cells pre-incubation with either indomethacin or NS-398 prior to AA supplementation resulted in a decrease in PGE<sub>2</sub> production compared to AA-stimulated PGE<sub>2</sub> production. The degree of inhibition of the blockers, however, was not the same. The use of indomethacin resulted in a much larger inhibitory effect than NS-398, suggesting that both COX-1 and COX-2 were involved in AA-stimulated PGE<sub>2</sub> production. When PGE<sub>2</sub> production was stimulated by exogenous AA supplementation, pre-incubation with COX blockers did not reduce PGE<sub>2</sub> production to the same low levels observed when these blockers were applied to basal culture conditions. Hamilton et al. [36] reported similar results and showed that increasing the supply of AA in rats in vivo reduces the effectiveness of NSAIDs as inhibitors of prostanoid production [36].

In order to confirm the observation that both COX-1 and COX-2 isoenzymes are involved in AA-stimulated PGE<sub>2</sub> synthesis, indirect immunofluorescence was applied to determine the presence and location of the COX enzymes in MG-63 cells. Exposing control and AA-activated MG-63 cells to either vehicle (0.2% ethanol) or AA in the presence of FCS, resulted in detection of both COX-1 and COX-2 enzymes. Morita et al. [28] reported that COX-1 and COX-2 are both located in the endoplasmic reticulum as well as the nuclear envelope. COX-2, however, is more highly concentrated on the nuclear membrane than COX-1 [28]. Our study confirmed this observation. Indirect immunofluorescence did not show any difference in the densities of either COX-1 or COX-2 in control or AA-treated cells, suggesting that the experimental conditions applied did not affect distribution of these enzymes. However, FCS itself can induce COX-2 expression [24] and [28]. The lack of effect of AA on COX distribution in our experiment may thus be masked by the FCS-stimulated effect on COX-2 expression. In order to confirm this observation, cells should also be cultured in FCS-free conditions.

Systemic hormones can influence PG production [6] and [16]. In order to determine whether the bone active hormones E2 and PTH affected PGE<sub>2</sub> production in osteoblast-like cells, MG-63 and MC3T3-E1 cells were exposed to these hormones. Although it was reported by others that E2 inhibited osteoblastic production of PGE<sub>2</sub> in primary osteoblasts, human osteosarcoma osteoblasts and organ culture [37] E2 exposure did not affect PGE<sub>2</sub> production in either MG-63 or MC3T3-E1 cell lines in our study. However, it is well documented that E2 acts through oestrogen receptors (ER) located on the nuclear membrane, thereby affecting intracellular pathways [38]. It might be necessary to determine whether the cell lines used in our study express sufficient ER levels to be affected by E2 treatment. One can thus speculate that the cells investigated in our study might be ER deficient or may express very low levels of ER. Low ER expression levels in MC3T3-E1 cells have been reported [39] and could explain the inability of these cells to respond to E2 treatment.

In our study PTH-treatment stimulated PGE<sub>2</sub> production significantly in MG-63 cells. Others confirmed this observation [6], [7] and [8]. The mechanisms implicated in this observation are not clear. PTH stimulation of PGE<sub>2</sub> synthesis has been attributed to induction of COX-2 [6] and [7] as well as increased release of incorporated AA from cell membranes [40]. PTH could act through cAMP, which can increase PG production in bone [41]. In our study, PTH however, had no stimulatory effect on PGE<sub>2</sub> production by MC3T3-E1 cells. Suda et al. [23] reported the presence of PTH receptors in this cell line [23], however, subcloning of this original nontransformed cell line, may have resulted in loss or modification of the PTH receptor.

In conclusion, our study confirms that exogenously added AA stimulates PGE<sub>2</sub> production significantly in both the MG-63 human osteosarcoma cell line as well as the nontransformed murine MC3T3-E1 osteoblast-like cell line. Stimulated PGE<sub>2</sub> production by MC3T3-E1 cells, however, was significantly higher than that of MG-63 cells. This observation might be attributed to autoamplification as PGE<sub>2</sub> autoamplification is mediated via the EP<sub>1</sub> subtype of PGE receptors in mouse MC3T3-E1 osteoblasts [34]. Although others [6], [7] and [8] reported a stimulatory effect of PTH on PGE<sub>2</sub> production in osteoblasts, we could only demonstrate a stimulatory effect in the MG-63 cell line. Rickard et al. [37] reported that E2 inhibits PGE<sub>2</sub> production in osteoblast-like cells but we were unable to confirm these effects in the cell lines used and our experimental conditions. Variation in responses may reflect species differences, differences in the mechanism of cell line immortalization, or differences in the degree of osteoblastic differentiation. Further work, including receptor studies, needs to be done to elucidate these responses or lack thereof.

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