

Effects of Dexamethasone and DHEA on the Changes of Glutamate and Polyamine Uptake in Rat Astrocytes by Lipopolysaccharide and Antimycin A

Sang-Hyun Choi, Bum Lee, Kyung-Ho Shin, Bon-Hong Min, Yeon-Sook Chun, and Boe-Gwon Chun

Department of Pharmacology, Korea University College of Medicine, Seoul 136–705, Korea

Interactions among dexamethasone, dehydroepiandrosterone (DHEA), lipopolysaccharide (LPS), and antimycin A on the glutamate uptake and the polyamine uptake were investigated in primary cultures of rat cerebral cortical astrocytes to examine the effects of dexamethasone and DHEA on the regulatory role of astrocytes in conditions of increased extracellular concentrations of glutamate or polyamines. 1. [³H]Glutamate uptake: LPS and antimycin A decreased V_{max} , but both drugs had little effect on K_m . Dexamethasone also decreased basal V_{max} without any significant effect on K_m . And dexamethasone further decreased the antimycin A-induced decrease of V_{max} . DHEA did not affect the kinetics of basal glutamate uptake and the change by LPS or antimycin A. 2. [¹⁴C]Putrescine uptake: LPS increased V_{max} , and antimycin A decreased V_{max} . They showed little effect on K_m . Dexamethasone decreased V_{max} of basal uptake and further decreased the antimycin A-induced decrease of V_{max} , and also decreased V_{max} to less than control in LPS-treated astrocytes. DHEA did not affect K_m and the change of V_{max} by LPS or antimycin A. 3. [¹⁴C]Spermine uptake: Antimycin A decreased V_{max} , and LPS might increase V_{max} . K_m was little affected by the drugs. Dexamethasone decreased basal V_{max} and might further decrease the antimycin A-induced decrease of V_{max} . And dexamethasone also decreased V_{max} to less than control in LPS-treated astrocytes. DHEA might increase basal V_{max} and V_{max} of LPS-treated astrocytes. 4. V_{max} of glutamate uptake by astrocytes was increased by putrescine (1000 μ M & 2000 μ M) and spermidine (200 μ M, 500 μ M & 2000 μ M). Spermine, 200 μ M (and 100 μ M), also increased V_{max} , but a higher dose of 2000 μ M decreased V_{max} . K_m of glutamate uptake was not significantly changed by these polyamines, except that higher doses of spermine showed tendency to decrease K_m of glutamate uptake. In astrocytes, dexamethasone inhibited the glutamate uptake and the polyamine uptake in normal or hypoxic conditions, and the polyamine uptake might be stimulated by LPS and DHEA. Polyamines could aid astrocytes to uptake glutamate.

Key Words: Astrocytes, Dexamethasone, Dehydroepiandrosterone, Lipopolysaccharide, Antimycin A, Glutamate uptake, Putrescine uptake, Spermine uptake

INTRODUCTION

Glutamate is one of the major excitatory neurotransmitters in the brain and affect neuronal activity

through ionotropic and metabotropic receptors (Rothman & Olney, 1986). Glutamate is ubiquitous in brain and compartmentalized intracellularly. At high extracellular concentration, glutamate is neurotoxic because of the overactivation of glutamate receptors on neurons. The excessive release of glutamate implicated in neurodegenerative processes associated with ischemia, epilepsy, and other neuropathologic states is an early and critical event in the Ca^{2+} -mediated cell death of

Corresponding to: Boe-Gwon Chun, Department of Pharmacology, Korea University College of Medicine, Seoul 136-705, Korea. (Tel) 920-6287, (Fax) 927-0824, E-mail: bgchun@kucenx.korea.ac.kr

neurons.

Polyamines such as putrescine, spermidine, and spermine are essential for cell growth and proliferation (Tabor & Tabor, 1984; Pegg, 1986; Heby & Persson, 1990), and the cellular levels of polyamines are regulated by the activities of polyamine transporters (Pegg, 1988; Lessard et al, 1995) as well as by the activities of synthetic enzymes, ornithine decarboxylase (ODC) and S-adenosylmethionine decarboxylase, spermidine/spermine N^1 -acetyltransferase, and oxidases (Seiler, 1987; Pegg, 1988; Casero & Pegg, 1993). ODC is activated in various pathologic conditions of the brain such as seizure (Martinez et al, 1991), excitotoxic conditions (Reed & de Belleruche, 1990; Gardiner et al, 1992; Porcella et al, 1992), and ischemia (Dempsey et al, 1988; Paschen, 1992). Putrescine is a putative neurotoxic substance (Paschen et al, 1992), because of the activation of Ca^{2+} influx (Komulainen & Bondy, 1987) and the release of excitotoxic amino acids from nerve endings (Reed & de Belleruche, 1990). And extracellular level of putrescine in hippocampus showed a rapid and sustained increase by 5 min occlusion of bilateral carotid arteries (Shin et al, 1994).

Astrocytes form contacts with blood vessels and other astrocytes and surround neurons and their processes (Kuffler et al, 1984). Their intimate relationship with neurons put them in an ideal position to respond to and modify events at synapses. The transport and metabolic functions of astrocytes have been known to support the signaling functions of neurons. Brain contains multiple transport systems for excitatory amino acids, and astrocytes possess multiple uptake systems for glutamate (Ferkany & Coyle, 1986; Erecinska & Silver, 1990; Balcar & Li, 1992). Mitigating effect of astroglial uptake of glutamate and other excitatory amino acids on neuronal injury has been well established both *in vivo* and *in vitro* (Choi, 1988; Rosenberg et al, 1992).

Lipopolysaccharide (LPS), an inflammatory signal in brain, leads to the transformation of resting astrocytes to reactive astrocytes (Lieberman et al, 1989; Chung & Benveniste, 1990).

Metabolic inhibition by hypoxia, hypoglycemia, and ischemia leads to neuronal hyperpolarization accompanying increased extracellular $[K^+]$. This hyperpolarization may contribute to EEG silence, synaptic transmission failure, and astrocytic swelling (Hansen et al, 1982; Fujiwara et al, 1987; Kawasaki et al, 1988; Walz et al, 1993). Also, inhibition of astrocyte

metabolism can lead to alterations of the astrocyte reactivities (Walz, 1989; Yu et al, 1989; Nicholls & Attwell, 1990). Antimycin A, a blocker of mitochondrial respiration, can induce failure of aerobic metabolism and act to inhibit oxidative ATP production in cultured astrocytes (Erecinska et al, 1981; Olson et al, 1986). It can cause incomplete ischemia where oxygen but not glucose is depleted (Swanson, 1992). Steroids can be synthesized *de novo* in the brain from cholesterol, mainly by glial cells (Baulieu & Robel, 1990; Robel et al, 1991). The concentrations of dehydroepiandrosterone (DHEA) and its sulfate form (DHEA-S) remain virtually unchanged in the rat brain after the removal of steroidogenic endocrine glands, and thus DHEA can be referred to as a neurosteroid (Corpéchet et al, 1981; Baulieu, 1991; Korneyev et al, 1993; Schumacher et al, 1996). The neurosteroids affect neuronal excitability (Majewska, 1992; French-Mullen et al, 1994) and glial cells as well (Chvatal & Kettenmann, 1991; Del Cerro et al, 1995; Garcia-Segura et al, 1996).

Therefore, this study was carried out to investigate the effect of DHEA on the changes of glutamate uptake and of polyamine uptake by primary cultured astrocytes in conditions of LPS-activation and of antimycin A-induced hypoxia and to compare it with the effect of dexamethasone.

METHODS

Primary culture of astrocytes and drug treatment

Astrocytes were prepared and cultured by the method modified from McCarthy & de Vellis' (1980). Cerebral cortices were obtained from neonatal rats (Sprague-Dawley, 2 days old or younger). They were free from meninges and vessels aseptically in cold phosphate-buffered saline without Ca^{2+} (PBS). The cortices were dissociated through mesh, and then suspended in DMEM containing 10% fetal bovine serum (FBS) and penicillin-streptomycin (100 IU/ml-100 μ g/ml). The suspended cells were washed and resuspended in DMEM with FBS and penicillin-streptomycin, and cell count and viability were examined. The cells were cultured in humidified 5% CO_2 atmosphere at 37°C. The medium was changed after 24 hours and then twice a week, so that the culture cells could reach to confluence. And then the confluent cultures were shaken (250 rpm) at 37°C for

12 hours. The adherent cells were washed and subcultured after trypsinized with 0.125% trypsin containing 1.3 mM EDTA. Immunoreactivity of the cultured cells to glial fibrillary acidic protein (GFAP) was more than 95%.

Astrocytes were plated and incubated in 24-well plates. When the cultures were grown to be confluent, the culture medium was changed to a fresh serum free DMEM. The astrocytes were treated with dexamethasone (10^{-6} M; control, ethanol 0.1%) or DHEA (5×10^{-5} M; control, ethanol 0.1%) 4 hours before the treatment with LPS (from *E. coli* 055: B5; 1 μ g/ml; control, PBS) or antimycin A (50 μ g/ml; control, PBS). After 20 hours of final treatments, uptake assays were performed.

[³H]Glutamate uptake measurement

Glutamate uptake by astrocytes was measured as described by Drejer et al (1982), Bender et al (1989), and Yu et al (1986). Culture medium was changed to DMEM containing L-glutamate and L-³H]glutamate (Amersham). The kinetics of glutamate uptake was measured in terms of the function of glutamate concentration (200 μ M glutamate with 0.4 μ Ci/ml L-³H]glutamate and 2-fold decrements to 6.25 μ M). The uptake was performed for 7 min at 37°C in 5% CO₂ atmosphere, and another batch was incubated at 4°C to determine the nonspecific binding of glutamate to cell membrane. The uptake reaction was terminated by two washes with 1 ml of ice-cold PBS, followed by cell lysis in 0.5 ml of 1 N NaOH. The radioactivity of one aliquot was measured by β -scintillation counter, and another was used for protein assay (Bradford, 1976).

To study the influences of polyamines on the glutamate uptake, astrocytes were incubated with L-glutamate and L-³H]glutamate in the presence of putrescine, spermidine, or spermine.

[¹⁴C]Putrescine and [¹⁴C]spermine uptake measurement

Polyamine uptake by astrocytes was measured as described by Porter et al (1985) and Lessard et al (1995).

Astrocytes cultured and treated in 24-well plates were washed with PBS (37°C) and incubated in 500 μ l/well of PBS containing [¹⁴C]putrescine (40 μ M to 2.5 μ M; Amersham) or [¹⁴C]spermine (2.5 μ M to

0.04 μ M; Amersham) for 60 min at 37°C in 5% CO₂ atmosphere. Another batch was incubated at 4°C to determine the nonspecific binding. At the end of the incubation, 1 ml of ice-cold PBS containing 1 mM putrescine or 1 mM spermine was added to the well, and astrocytes were washed twice with ice-cold PBS. And then astrocytes in each well were dissolved in 200 μ l of 1 N NaOH at 60°C for 60 min. Aliquots of the solution neutralized with 200 μ l of 1 N HCl were used for the radioactivity measurement using β -scintillation counter and for protein assay (Bradford, 1976).

The kinetic parameters of uptake, K_m and V_{max} , were determined by Edie-Scatchard plot and linear regression analysis.

RESULTS

Effects of dexamethasone and DHEA on the change of [³H]glutamate uptake by LPS or antimycin A

LPS and antimycin A decreased V_{max} of glutamate uptake by astrocytes, but both drugs had little effect on K_m of glutamate uptake. Dexamethasone also decreased basal V_{max} without a significant effect on K_m . And dexamethasone further decreased the antimycin A-induced decrease of V_{max} . DHEA did not affect the kinetics of basal glutamate uptake and the change by LPS or antimycin A (Fig. 1 & Table 1).

Effects of dexamethasone and DHEA on the change of [¹⁴C]putrescine uptake by LPS or antimycin A

LPS increased V_{max} of putrescine uptake, and antimycin A decreased the V_{max} . They showed little effect on K_m . Dexamethasone decreased V_{max} of basal uptake and further decreased the antimycin A-induced decrease of V_{max} , and also decreased V_{max} to less than control in LPS-treated astrocytes. DHEA did not affect K_m and the change of V_{max} by LPS or antimycin A (Fig. 2 & Table 2).

Effects of dexamethasone and DHEA on the change of [¹⁴C]spermine uptake by LPS or antimycin A

Antimycin A decreased V_{max} , and LPS might increase V_{max} of spermine uptake. K_m was only marginally affected by the drugs. Dexamethasone decreased basal V_{max} and might further decrease the

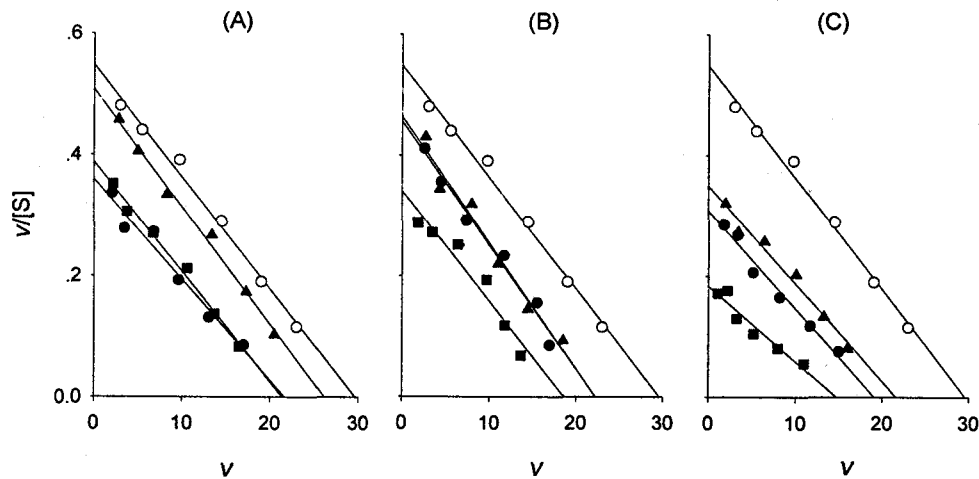


Fig. 1. Effects of dexamethasone and DHEA on the change of [^3H]glutamate uptake by LPS and antimycin A in astrocytes. Data were analysed by Edie-Scatchard plot; (A) \circ - \circ : control ($r^2 = 0.99$), \blacksquare - \blacksquare : dexamethasone ($r^2 = 0.99$), \blacktriangle - \blacktriangle : DHEA ($r^2 = 0.99$), \bullet - \bullet : dexamethasone & DHEA ($r^2 = 0.96$); (B) \circ - \circ : control ($r^2 = 0.99$), \bullet - \bullet : LPS ($r^2 = 0.98$), \blacksquare - \blacksquare : LPS & dexamethasone ($r^2 = 0.94$), \blacktriangle - \blacktriangle : LPS & DHEA ($r^2 = 0.97$); (C) \circ - \circ : control ($r^2 = 0.99$), \bullet - \bullet : antimycin A ($r^2 = 0.98$), \blacksquare - \blacksquare : antimycin A & dexamethasone ($r^2 = 0.93$), \blacktriangle - \blacktriangle : antimycin A & DHEA ($r^2 = 0.98$). Each point represents mean \pm S.E. of 4 independent experiments.

Table 1. Effects of dexamethasone (Dex) and DHEA on the changes of [^3H]glutamate uptake by LPS or antimycin A (AA) in astrocytes

Treatment	K_m	V_{max}
Control	54.03 \pm 5.01	29.62 \pm 2.52
Dex	55.01 \pm 5.67	21.39 \pm 2.63*
DHEA	51.49 \pm 4.92	26.16 \pm 2.85
Dex&DHEA	60.27 \pm 5.84	21.69 \pm 2.42*
LPS	48.82 \pm 5.32	22.24 \pm 2.02*
LPS&Dex	54.78 \pm 5.49	18.67 \pm 2.12**
LPS&DHEA	47.93 \pm 5.23	22.22 \pm 2.46*
AA	61.90 \pm 6.30	19.07 \pm 2.05**
AA&Dex	80.24 \pm 7.65**	14.71 \pm 1.02** [†]
AA&DHEA	61.79 \pm 5.62	21.59 \pm 2.23**

K_m : μM , V_{max} : nM/mg protein/min

Each value represents mean \pm S.E. of 4 independent experiments.

*, **: $p < 0.1$ & $p < 0.05$, respectively, in comparison to the control value

[†], ^{††}: $p < 0.1$ & $p < 0.05$, respectively, in comparison to LPS- or AA-treated value

antimycin A-induced decrease of V_{max} . And dexamethasone also decreased V_{max} to less than control in LPS-treated astrocytes. DHEA might increase basal V_{max} and V_{max} of LPS-treated astrocytes (Fig. 3 & Table 3).

Effects of polyamines on the [^3H]glutamate uptake by astrocytes

V_{max} of glutamate uptake by astrocytes was increased by putrescine (1000 μM & 2000 μM) and spermidine (200 μM , 500 μM & 2000 μM). Spermine, 200 μM (and 100 μM), also increased V_{max} , but higher dose of 2000 μM decreased V_{max} .

K_m of glutamate uptake by astrocytes was not significantly changed by these polyamines, except that higher doses of spermine showed tendency to decrease K_m of glutamate uptake (Fig. 4 & Table 4).

DISCUSSION

In our recent study, DHEA is supposed to inhibit the changes of astrocyte responses by dexamethasone. Dexamethasone are involved in the process of neuronal injury by inhibiting the release of arachidonic

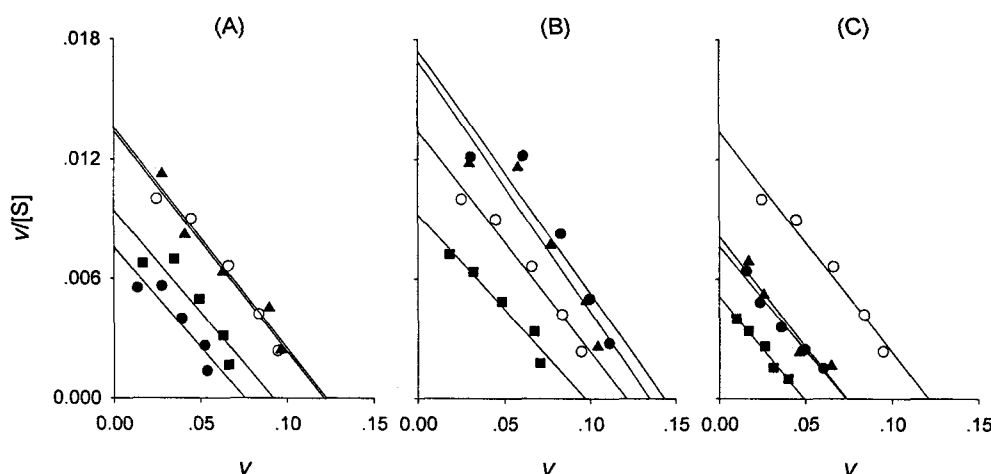


Fig. 2. Effects of dexamethasone and DHEA on the change of [¹⁴C]putrescine uptake by LPS and antimycin A in astrocytes. Data were analysed by Edie-Scatchard plot; (A) ○-○: control ($r^2 = 0.97$), ■-■: dexamethasone ($r^2 = 0.84$), ▲-▲: DHEA ($r^2 = 0.95$), ●-●: dexamethasone & DHEA ($r^2 = 0.85$); (B) ○-○: control ($r^2 = 0.97$), ●-●: LPS ($r^2 = 0.87$), ■-■: LPS & dexamethasone ($r^2 = 0.95$), ▲-▲: LPS & DHEA ($r^2 = 0.88$); (C) ○-○: control ($r^2 = 0.97$), ●-●: antimycin A ($r^2 = 0.97$), ■-■: antimycin A & dexamethasone ($r^2 = 0.97$), ▲-▲: antimycin A & DHEA ($r^2 = 0.92$). Each point represents mean \pm S.E. of 4 independent experiments.

Table 2. Effects of dexamethasone and DHEA on the changes of [¹⁴C]putrescine uptake by LPS or antimycin A in astrocytes

Treatment	K_m	V_{max}
Control	9.04 \pm 0.91	121.07 \pm 10.42
Dex	9.77 \pm 1.02	92.05 \pm 11.06*
DHEA	9.01 \pm 0.95	122.66 \pm 10.32
Dex&DHEA	9.98 \pm 0.97	75.62 \pm 9.50**
LPS	8.23 \pm 0.87	143.35 \pm 9.86
LPS&Dex	10.53 \pm 0.93	97.11 \pm 10.26 ^{††}
LPS&DHEA	7.97 \pm 0.81	134.75 \pm 11.96
AA	9.57 \pm 0.92	73.18 \pm 9.18**
AA&Dex	9.61 \pm 1.02	49.20 \pm 5.86** [†]
AA&DHEA	9.04 \pm 0.85	73.70 \pm 8.54**

K_m : μ M, V_{max} : pM/mg protein/min

acid, IL-6, and NO from astrocytes exposed to LPS (Choi et al, 1999). DHEA is synthesized and presented in brain as well as in circulation, though the precursors and enzymes responsible for its biosynthesis in brain are unknown (Corpéchet et al, 1981; Schumacher et al, 1996). The actions of DHEA have

been said to be state-dependency and to buffer the actions of dexamethasone in periphery (Regelson et al, 1990). And interactions of dexamethasone and DHEA in the regulation of proliferation and differentiation of astroglial cells (Jung-Testas et al, 1992; Del Cerro et al, 1995; Crossin et al, 1997) proposed the significance of the interactions of dexamethasone and DHEA concerning the responses of astrocytes to brain injury.

Therefore, the effects of DHEA and dexamethasone on glutamate uptake and polyamine uptake by astrocytes in conditions of LPS treatment or of antimycin A-induced hypoxia were studied to investigate the different roles of these steroids in the neuropathologic conditions in which excitatory amino acids or polyamines, putative neurotoxic substances, may overwhelm the neuronal viability.

Several activities of astrocytes directed toward the maintenance of the extracellular milieu are energy dependent (Nicholls & Attwell, 1990; Walz, 1989; Yu et al, 1989); glutamate uptake into astrocytes is an energy demanding process since glutamate is co-transported with two or three Na⁺ which have to be transported out of the cells by the Na⁺/K⁺ ATPase (Dennis et al, 1976; Sonnewald et al, 1997). So antimycin A markedly inhibited glutamate uptake

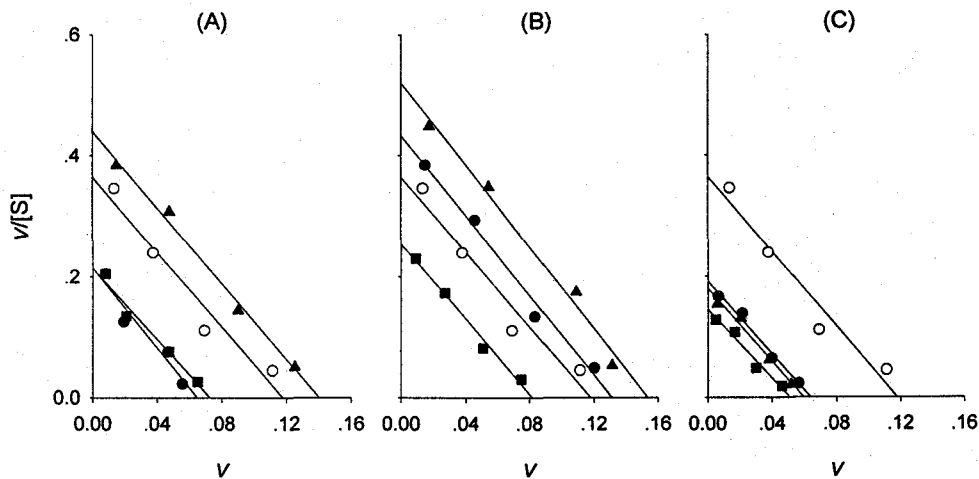


Fig. 3. Effects of dexamethasone and DHEA on the change of [^{14}C]spermine uptake by LPS and antimycin A in astrocytes. Data were analysed by Edie-Scatchard plot; (A) \circ - \circ : control ($r^2 = 0.95$), \blacksquare - \blacksquare : dexamethasone ($r^2 = 0.97$), \blacktriangle - \blacktriangle : DHEA ($r^2 = 0.99$), \bullet - \bullet : dexamethasone & DHEA ($r^2 = 0.93$); (B) \circ - \circ : control ($r^2 = 0.95$), \bullet - \bullet : LPS ($r^2 = 0.99$), \blacksquare - \blacksquare : LPS & dexamethasone ($r^2 = 0.99$), \blacktriangle - \blacktriangle : LPS & DHEA ($r^2 = 0.99$); (C) \circ - \circ : control ($r^2 = 0.95$), \bullet - \bullet : antimycin A ($r^2 = 0.98$), \blacksquare - \blacksquare : antimycin A & dexamethasone ($r^2 = 0.96$), \blacktriangle - \blacktriangle : antimycin A & DHEA ($r^2 = 0.98$). Each point represents mean \pm S.E. of 4 independent experiments.

Table 3. Effects of dexamethasone and DHEA on the changes of [^{14}C]spermine uptake by LPS or antimycin A in astrocytes

Treatment	K_m	V_{max}
Control	0.323 ± 0.029	117.78 ± 9.84
Dex	0.338 ± 0.033	$72.59 \pm 7.92^{**}$
DHEA	0.318 ± 0.030	139.95 ± 13.94
Dex&DHEA	0.300 ± 0.028	$64.61 \pm 8.30^{**}$
LPS	0.303 ± 0.027	131.12 ± 12.86
LPS&Dex	0.321 ± 0.028	$81.82 \pm 8.74^{**,\dagger\dagger}$
LPS&DHEA	0.295 ± 0.032	$153.62 \pm 13.84^*$
AA	0.333 ± 0.027	$63.77 \pm 6.48^{**}$
AA&Dex	0.354 ± 0.027	$51.21 \pm 5.96^{**}$
AA&DHEA	0.332 ± 0.031	$59.63 \pm 6.72^{**}$

K_m : μM , V_{max} : pM/mg protein/min

with little effect on the affinity of the transporters. In case of glutamate uptake, the decrease of V_{max} by antimycin A was about 35.6% of the control, and it did not differ from other reports that the uptake was maintained at 54% to 63% of control despite maximal inhibition of oxidative ATP production (Swanson,

1992). The remarkable viability of astrocytes in oxygen-depleted conditions (Goldberg et al, 1987; Tombaugh & Sapolsky, 1990) and the maintenance of ability to uptake may show the persistent significance of astrocytes to uptake excitotoxic glutamate in hypoxic conditions.

However, the steroids used in this study could not reverse the antimycin A-induced inhibition of glutamate uptake. Moreover, dexamethasone further decreased the uptake velocity and the affinity of transporter to glutamate. This inhibitory effect of dexamethasone on the glutamate uptake opposes the ability to induce glutamine synthetase activity; the activity of glutamine synthetase which determines the proportion of glutamate converted to glutamine is regulated by glucocorticoids in brain and cultured astrocytes (Patel et al, 1983; Patel & Hunt, 1985), and transcription of the glutamine synthetase gene is inducible by corticosteroids (O'Banion et al, 1994). These results pose a possibility that glucocorticoids may impair the ability of astrocytes to help neurons during the pathologic states involving hypoxia.

In spite of the significance of polyamine metabolism in the pathophysiology of brain such as the putative neurotoxicity of polyamines (Paschen et al, 1992) and the linkage of polyamine metabolism to

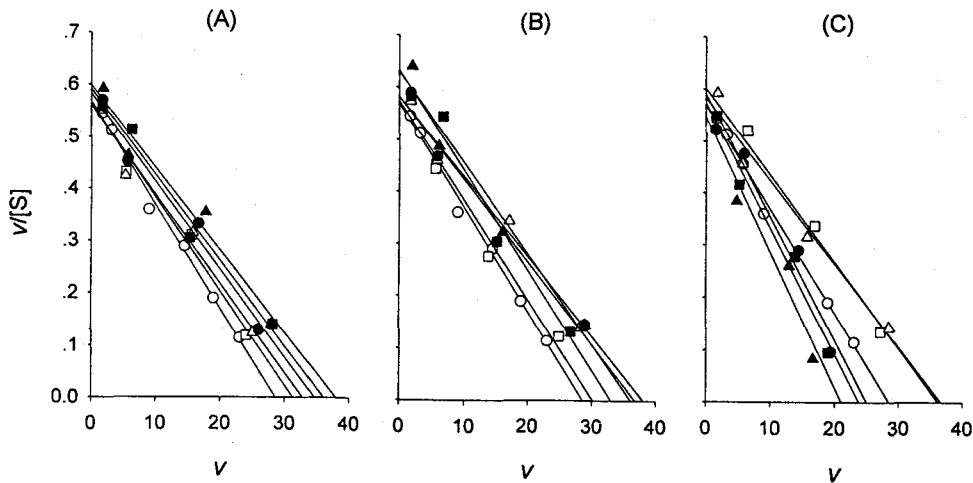


Fig. 4. Effect of putrescine, spermidine, and spermine on the [³H]glutamate uptake by astrocytes. Data were analysed by Edie-Scatchard plot; (A) ○-○: control (*r*² = 0.99), □-□: putrescine 100 μM (*r*² = 0.97), △-△: 200 μM (*r*² = 0.96), ●-●: 500 μM (*r*² = 0.97), ■-■: 1000 μM (*r*² = 0.98), ▲-▲: 2000 μM (*r*² = 0.96); (B) ○-○: control (*r*² = 0.99), □-□: spermidine 100 μM (*r*² = 0.97), △-△: 200 μM (*r*² = 0.98), ●-●: 500 μM (*r*² = 0.97), ■-■: 1000 μM (*r*² = 0.97), ▲-▲: 2000 μM (*r*² = 0.97); (C) ○-○: control (*r*² = 0.99), □-□: spermine 100 μM (*r*² = 0.98), △-△: 200 μM (*r*² = 0.97), ●-●: 500 μM (*r*² = 0.96), ■-■: 1000 μM (*r*² = 0.97), ▲-▲: 2000 μM (*r*² = 0.95). Each point represents mean ± S.E. of 4 independent experiments.

Table 4. Effects of putrescine, spermidine, and spermine on the [³H]glutamate uptake by astrocytes

Treatment	<i>K_m</i>	<i>V_{max}</i>
Control	50.21 ± 5.52	28.57 ± 2.71
Putrescine 100 uM	55.33 ± 5.54	31.29 ± 2.77
200 uM	58.47 ± 5.68	32.79 ± 2.65
500 uM	59.37 ± 5.91	34.58 ± 2.79
1000 uM	60.90 ± 6.01	36.02 ± 2.84*
2000 uM	63.28 ± 6.08	37.91 ± 2.83**
Spermidine 100 uM	52.58 ± 5.53	30.15 ± 2.89
200 uM	65.54 ± 5.96	38.12 ± 2.91**
500 uM	63.38 ± 5.97	36.83 ± 2.69*
1000 uM	52.21 ± 5.62	33.04 ± 2.65
2000 uM	57.33 ± 5.49	36.16 ± 2.71*
Spermine 100 uM	60.22 ± 6.23	36.20 ± 3.01
200 uM	62.79 ± 6.45	36.61 ± 2.96*
500 uM	42.39 ± 5.01	25.04 ± 2.77
1000 uM	41.49 ± 4.79	23.81 ± 2.56
2000 uM	38.60 ± 4.01	21.09 ± 2.50*

K_m: uM, *V_{max}*: nM/mg protein/min

epileptogenic GABA metabolism (De Sarro et al, 1986), only a small number of studies have been conducted on the polyamine uptake by astrocytes. Specific polyamine transport systems have been reported to have Michaelis-Menten type kinetics in enterocytes (Kumagai & Johnson, 1988), pneumocytes (Wyatt et al, 1988), neuroblastoma cells (Chen & Rinehart, 1981), and in astrocytes of epileptic mice (Laschet et al, 1992). The putrescine uptake and the spermine uptake showed similar kinetic changes by dexamethasone and DHEA in antimycin A-treated astrocytes. Comparatively, polyamine transport systems of astrocytes seemed to be activated by LPS. And DHEA clearly increased velocity of spermine uptake by non-hypoxic astrocytes. Considering these results, astrocyte activities with LPS- or DHEA-treatment seem to be partly ascribed to the polyamine uptake, though astrocytes may be less capable of uptaking polyamines than of uptaking glutamate.

Many studies say that polyamines play an important role in biological responses to brain ischemia (Paschen, 1992; Paschen et al, 1992). Also, the activation of NMDA receptor has been known to be positively modulated by polyamines (Nussenzveig et al, 1991; Williams et al, 1991; Lazarewicz et al,

1992; Araneda et al, 1993). In relation to these reports, the effects of various extracellular concentrations of polyamines on the kinetics of glutamate uptake by astrocytes were studied. Higher levels of spermidine or putrescine could increase the velocity of glutamate uptake. However, higher level of spermine could inhibit the velocity of uptake and had tendency to increase the transporter's affinity to glutamate. These findings suggested that polyamines might facilitate glutamate uptake by astrocytes as well as participate in the activation of NMDA receptors in brain.

Conclusively, dexamethasone inhibited the glutamate uptake and the polyamine uptake by astrocytes in normal or hypoxic conditions, and polyamine uptake was stimulated by LPS and DHEA. Polyamines might influence to aid astrocytes to uptake glutamate.

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