

## 17 $\beta$ -Estradiol stimulates a rapid Ca<sup>2+</sup> influx in LNCaP human prostate cancer cells

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Audy MC, Vacher P, Dufy B. 17 $\beta$ -Estradiol stimulates a rapid Ca<sup>2+</sup> influx in LNCaP human prostate cancer cells. *Eur J Endocrinol* 1996;135:367–73. ISSN 0804–4643

Prostate growth is known to be controlled by steroids such as androgens and estradiol. For this reason steroids (estradiol, adrenal androgens) or steroid inhibitors are commonly used as palliative treatments for prostate carcinoma. In view of the pivotal role played by Ca<sup>2+</sup> ions in cell proliferation, we decided to investigate the effects of 17 $\beta$ -estradiol (E<sub>2</sub>) on intracellular calcium concentration ([Ca<sup>2+</sup>]<sub>i</sub>) in a human prostate tumor cell line, LNCaP. In this study, we show that E<sub>2</sub> induced a dose-dependent (0.1–100 nmol/l) influx of Ca<sup>2+</sup> in these cells. These effects occurred rapidly after the beginning of the ejection and were maintained in the presence of the hormone (plateau phase). Estradiol-induced Ca<sup>2+</sup> influx was unaffected by the saturation of the androgen receptor with pure antiandrogen flutamide. The use of tamoxifen, an antiestrogen binding to nuclear receptors, or E<sub>2</sub> covalently linked to bovine serum albumin that cannot penetrate the cell membrane, did not block the ([Ca<sup>2+</sup>]<sub>i</sub>) response. Our results suggest the existence of E<sub>2</sub> binding sites at the plasma membrane surface of LNCaP cells, linked to calcium signalling and, more specifically, Ca<sup>2+</sup> channels.

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Sex steroids (androgens and estrogens) are major regulators of prostate growth. For this reason, anti-androgen and estrogen therapies have been widely used as standard treatments for advanced prostate cancer, but the mechanisms by which they exert their effects are still unclear. Most of the known effects of steroid hormones are mediated by receptors in the cell nucleus that, upon ligand binding, act to modulate the transcription activity of the responsive cells. However, rapid steroid effects in various cell types, such as hepatocytes (1), granulosa cells (2), oocytes (3), spermatozoa (4), uterine smooth-muscle cells (5), intestine cells (6), osteoblasts (7) and prostate cells (8), suggest the possibility of alternative non-genomic action mechanisms, presumably at receptors on the cell surface.

The establishment of an androgen-sensitive human prostate cell line, LNCaP, has provided an *in vitro* model for prostate carcinoma cell study (9). Previous research had shown that estrogen- or progesterone-induced cell growth occurred in LNCaP cells, despite the absence of specific estrogen and progesterone receptors (10). A mutation allowing the binding of various steroids and antisteroids to the abnormal androgen receptor system of LNCaP has been described (11). However, more recently, 17 $\beta$ -estradiol (E<sub>2</sub>) binding sites have been identified in both cytosol and nuclear fractions of LNCaP (12) and it has been shown that the proliferative action of E<sub>2</sub> was mediated by its "own" receptors (13).

Cell calcium metabolism is intimately involved in the regulation of many biological and biochemical activities.

Data from several recent studies have shown that calcium plays a significant role in DNA synthesis and cell proliferation (14). The non-genomic action of steroids is receiving renewed interest. However, only little information is available yet about the early effects of steroids on intracellular calcium. Included in this information are recent reports showing increases in intracellular calcium concentration ([Ca<sup>2+</sup>]<sub>i</sub>) levels via Ca<sup>2+</sup> influx in response to androgens in LNCaP cells (8) and osteoblasts (15), while increases in [Ca<sup>2+</sup>]<sub>i</sub> levels in response to estrogen in granulosa cells occurred via intracellular Ca<sup>2+</sup> mobilization (2).

The aim of this study was to investigate a possible effect of estrogen on [Ca<sup>2+</sup>]<sub>i</sub> in LNCaP cells. 17 $\beta$ -Estradiol covalently coupled to high-molecular-weight molecules that cannot enter the cell (4) was also used to examine the possible involvement of a plasma membrane receptor. It was found that E<sub>2</sub> induced a rapid influx of Ca<sup>2+</sup>, independently of androgen receptors.

### Material and methods

#### *Cell culture*

LNCaP cells (passage 39) were maintained in RPMI 1640 medium (BioWhittaker Seromed, Strasbourg France) containing 10% fetal calf serum (Gibco, Grand Island, NY) at 37°C in a humidified atmosphere (5% CO<sub>2</sub>/95% air). They were fed with fresh medium every 2 or 3 days for 8 days. The cells were seeded on 10-mm

round glass coverslips pretreated with polyornithine (5 µg/ml). Forty-eight hours before the experiments, the normal culture medium was replaced by RPMI 1640 red phenol-free with 10% charcoal-dextran-treated fetal calf serum.

#### Measurements of cytosolic free $\text{Ca}^{2+}$ concentration $[\text{Ca}^{2+}]_i$

The experiments were performed using the fluorescent probe indo1 on the cell population as already described (16). Before the microspectrofluorimetric experiment, the nutrient medium was replaced by a modified Hank's solution containing 142.6 mmol/l NaCl, 5.6 mmol/l KCl, 2 mmol/l  $\text{CaCl}_2$ , 0.8 mmol/l  $\text{MgCl}_2$ , 5 mmol/l glucose and 10 mmol/l HEPES, buffered to pH 7.3 with NaOH. LNCaP seeded on 10-mm round coverslips were loaded with the fluorescent probe indo1 by exposure to 5 mmol/l indo1 AM (Calbiochem, Paris, France) in Hank's solution for 30 min at 37°C. The glass coverslide carrying the loaded cells was placed on a plastic holder in a quartz cuvette and  $[\text{Ca}^{2+}]_i$  was estimated from indo1 fluorescence by the ratio method, using single wavelength excitation (350 nm) and dual wavelength emission (405 and 480 nm) in a Hitachi F2000 spectrofluorimeter. The background fluorescence of unloaded cells was subtracted from each measurement before the ratio determinations. The indo1 fluorescence response to the intracellular calcium concentration was calculated from the 405/480 nm ratio of fluorescence values as described by Grynkiewicz et al. (17). The dissociation constant for the indo1- $\text{Ca}^{2+}$  complex was taken as 405 nmol/l. The values for  $R_{\text{max}}$  and  $R_{\text{min}}$  were calculated from measurements using 100 µmol/l digitonine and 10 mmol/l EGTA. Hormones and "anti-hormones" were added either alone or simultaneously according to the experimental protocol.

#### Test substances

17β-Estradiol ( $\text{E}_2$ ), dihydrotestosterone (DHT), flutamide (2-methyl-N-(4-nitro-3-(trifluoromethyl)phenyl)propanamide, FLU) and tamoxifen ((Z)-1-(p-dimethylaminoethoxyphenyl)-1,2-diphenyl-1-butene, TX) were purchased from Sigma (St Louis, MO); stock solutions ( $10^{-2}$  mol/l in ethanol) were serially diluted in Hank's solution before use. We utilized  $\text{E}_2$  covalently linked on the steroid nucleus via an O-carboxymethyloxime(CMO) to BSA ( $\text{E}_2$  CMO BSA) that cannot enter the cell. The preparation of  $\text{E}_2$  CMO BSA contained 30 mol  $\text{E}_2$ /mol BSA (Sigma St Louis, MO); a stock solution (0.1 mmol/l) was diluted in 0.1% BSA and 150 mmol/l NaCl. Free  $\text{E}_2$  was removed from solutions as described by Blackmore et al. (4): 100 µl of  $\text{E}_2$  CMO BSA (100 µmol/l),  $\text{E}_2$  CMO (100 µmol/l) or  $\text{E}_2$  (100 µmol/l) was incubated with 20 µl of charcoal (0.5 g/ml; BSA 4 mg/ml) at room temperature (4). They were administered in the spectrofluorimetric cuvette by extracellular pipette ejection.

#### Statistical analysis

Results were expressed as  $[\text{Ca}^{2+}]_i \pm \text{SEM}$  or as the percentage  $\pm \text{SEM}$  increase. Statistical comparisons were performed by one-way analysis of variance using ANOVA and Fisher PLSD as post-tests. Student's *t*-test was used when appropriate,  $p < 0.1$  was considered to be significant.

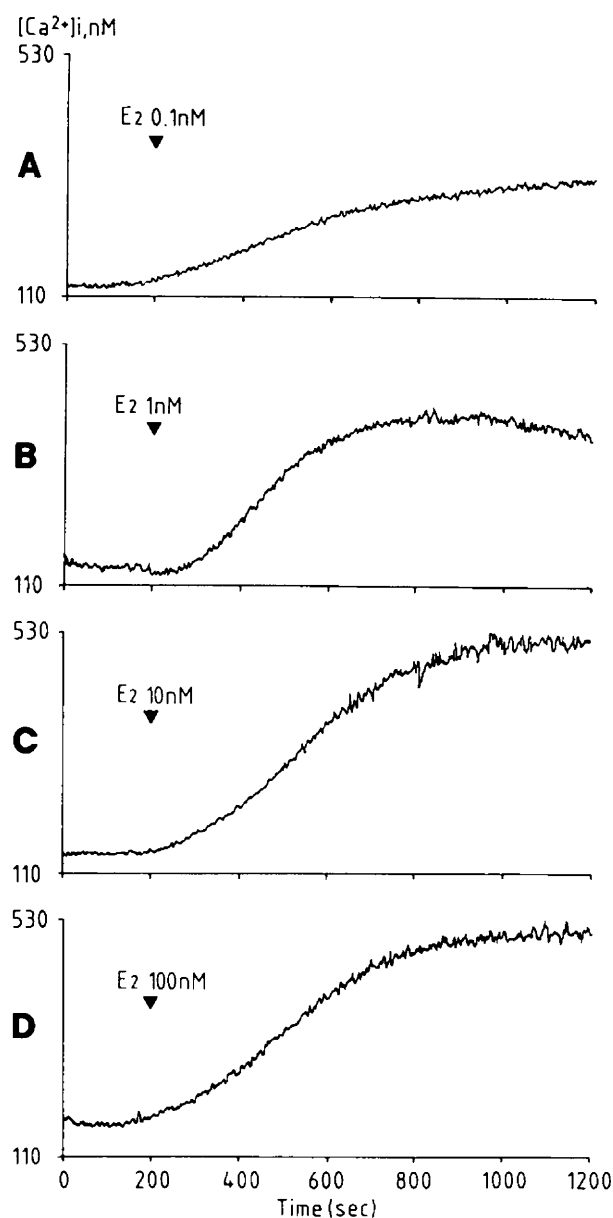


Fig. 1. Effects of long applications of  $\text{E}_2$  on intracellular calcium concentrations  $[\text{Ca}^{2+}]_i$  in LNCaP cells;  $[\text{Ca}^{2+}]_i$  was measured in cell populations by microfluorimetry (dual wavelength emission technique) using indo1 as the  $\text{Ca}^{2+}$  fluorescent probe. The arrow indicates the beginning of injection. Estradiol was present in the bath until the end of the recording; 0.1 (A), 1 (B), 10 (C) and 100 (D) nmol/l  $\text{E}_2$  induced a slow increase in  $[\text{Ca}^{2+}]_i$ .

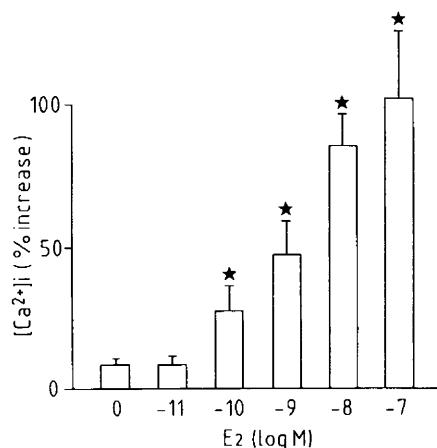


Fig. 2. Relationship between agonist doses and the percentage increase in intracellular calcium concentration ([Ca<sup>2+</sup>]<sub>i</sub>) (control being basal [Ca<sup>2+</sup>]<sub>i</sub>). Maximal plateau values of [Ca<sup>2+</sup>]<sub>i</sub> ± SEM were obtained between 1000 and 1200 s after administration of E<sub>2</sub> in the bath medium; \*p < 0.01.

## Results

### Effect of E<sub>2</sub> on [Ca<sup>2+</sup>]<sub>i</sub>

The resting [Ca<sup>2+</sup>]<sub>i</sub> in LNCaP cells was 133 ± 6 nmol/l. No spontaneous Ca<sup>2+</sup> oscillations were observed in these cells.

Application of E<sub>2</sub> rapidly elicited a dose-dependent [Ca<sup>2+</sup>]<sub>i</sub> rise, which was maintained (plateau) as long as the steroid was present in the medium; E<sub>2</sub> was effective in the concentration range from 0.1–100 nmol/l (Fig. 1). A low concentration of E<sub>2</sub> (0.01 nmol/l) was unable to induce any significant [Ca<sup>2+</sup>]<sub>i</sub> increase compared to the control (8.5 ± 2.5% vs 8.3 ± 2.1% NS); from 0.1 to 100 nmol/l E<sub>2</sub> the maximal value of [Ca<sup>2+</sup>]<sub>i</sub> increased significantly (28.5 ± 8.3%, N = 4, p < 0.05 for 0.1 nmol/l E<sub>2</sub>; 47.0 ± 12.2%, N = 3, p < 0.01 for 1 nmol E<sub>2</sub>; 84.4 ± 12.3%, N = 11, p < 0.01 for 10 nmol/l E<sub>2</sub>; 103.8 ± 29.2%, N = 5, p < 0.01 for 100 nmol/l E<sub>2</sub>) (Fig. 2). A concentration as low as 10 nmol/l produced a maximal effect, with no further increase for concentrations up to 100 nmol/l E<sub>2</sub> (p > 0.01). A concentration of 10 nmol/l was therefore chosen to characterize the E<sub>2</sub>-induced [Ca<sup>2+</sup>]<sub>i</sub> in the other experiments. The half-maximal value (63 ± 12% above control) was obtained 360 ± 40 s after the end of the ejection.

### Role of extracellular and intracellular calcium in the E<sub>2</sub>-induced [Ca<sup>2+</sup>]<sub>i</sub> response

To determine the origin (Ca<sup>2+</sup> influx or intracellular Ca<sup>2+</sup> mobilization) of Ca<sup>2+</sup> ions mobilized by E<sub>2</sub>, an ejection of 10 mmol/l EGTA was applied during the E<sub>2</sub>-induced [Ca<sup>2+</sup>]<sub>i</sub> rise, in order to chelate Ca<sup>2+</sup> ions contained in the extracellular medium. This resulted in

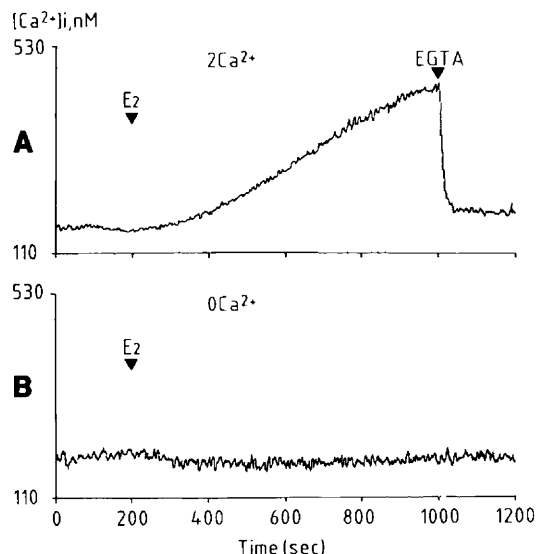


Fig. 3. Effect of an application of 10 nmol/l E<sub>2</sub> on the intracellular calcium concentration ([Ca<sup>2+</sup>]<sub>i</sub>) of LNCaP cells bathed in control medium (A) or a medium containing 0 mmol/l Ca<sup>2+</sup> and 2 mmol/l EGTA (B). In the absence of extracellular free Ca<sup>2+</sup>, the application of E<sub>2</sub> did not elicit any response. The arrow indicates the beginning of the injection.

complete blockade of the response (Fig. 3A). Similarly, application of E<sub>2</sub> to cells bathed in Ca<sup>2+</sup>-deprived medium did not elicit any [Ca<sup>2+</sup>]<sub>i</sub> response (Fig. 3B). These results suggested that the effects of E<sub>2</sub> were exclusively due to the stimulation of Ca<sup>2+</sup> entry through Ca<sup>2+</sup> channels.

### Estrogen binding sites in LNCaP cells

As estrogen binding sites have been described in LNCaP cells (18), we investigated whether the effects of E<sub>2</sub> on [Ca<sup>2+</sup>]<sub>i</sub> were due to the binding of the steroid to its own receptor or to a mutated androgen receptor. For this purpose LNCaP cells were pretreated with a pure antiandrogen, flutamide (FLU 10 nmol/l for 20 min), in order to compete with the androgen receptor. Although FLU pretreatment completely abolished the DHT-induced [Ca<sup>2+</sup>]<sub>i</sub> response (Fig. 4D), it did not affect the E<sub>2</sub>-induced [Ca<sup>2+</sup>]<sub>i</sub> increase (93.7 ± 17.1%, N = 7 vs 84.4 ± 12.3%, N = 11; NS) (Fig. 4B). Tamoxifen, described as an antiestrogen acting on intracellular receptors, was used to block the estrogen receptor. Tamoxifen alone (100 nmol/l or 1 μmol/l) did not affect [Ca<sup>2+</sup>]<sub>i</sub>. Pretreatment with tamoxifen (100 nmol/l or 1 μmol/l for 20 min) did not block the E<sub>2</sub>-induced Ca<sup>2+</sup> response (Fig. 5), suggesting that E<sub>2</sub> nuclear receptors were not involved. To confirm this hypothesis, we used immobilized E<sub>2</sub> coupled to high-molecular-weight BSA that cannot penetrate the plasma membrane. Free E<sub>2</sub> was suppressed by charcoal treatment. The efficiency of this treatment was confirmed by applying a charcoal-pretreated solution of 10 nmol/l E<sub>2</sub> to the cells. This solution was unable to increase [Ca<sup>2+</sup>]<sub>i</sub> (E<sub>2</sub> 11 ± 1%,

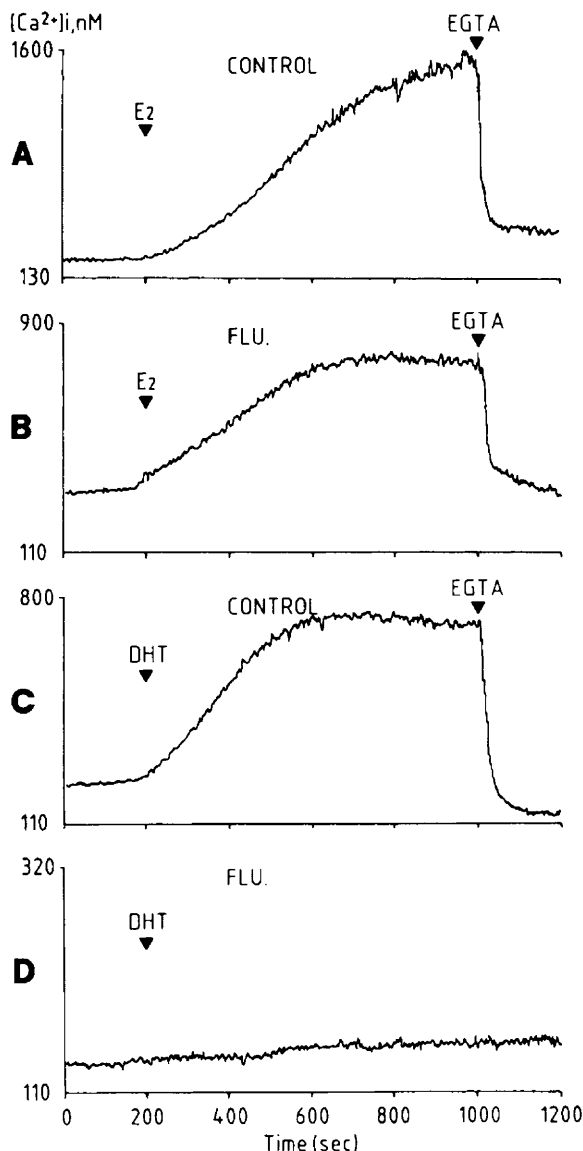


Fig. 4. Intracellular calcium levels in LNCaP cells before and after the administration of 10 nmol/l  $E_2$  (A and B) or of 10 nmol/l dihydrotestosterone (DHT) (C and D) in LNCaP cells pretreated (B and D) or not (A and C) with 10 nmol/l flutamide (FLU) for 20 min. The antiandrogen FLU was present throughout the entire recording period. Pretreatment with the antiandrogen FLU did not modify the response to  $E_2$ , whereas the response to DHT was completely blocked.

$N = 3$  vs HBSS  $8.3 \pm 2\%$ ,  $N = 3$ ; NS) (Fig. 6C). The 10 nmol/l  $E_2$  CMO elicited a rise in  $[Ca^{2+}]_i$  but was less potent than 10 nmol/l  $E_2$  ( $E_2$  CMO  $60.0 \pm 9.2\%$ ,  $N = 3$  vs  $84.5 \pm 15.3\%$ ,  $N = 3$ ;  $p > 0.01$ ) (Fig. 6A). The 10 nmol/l  $E_2$  CMO BSA treated with charcoal induced a  $[Ca^{2+}]_i$  response showing the same profile as the control ( $E_2$  CMO BSA charcoal-treated  $66.5 \pm 26.7\%$ ,  $N = 4$  vs  $E_2$  CMO  $60.0 \pm 9.2\%$ ,  $N = 3$ ; NS) (Fig. 6B); BSA alone had no effect (Fig. 6D).

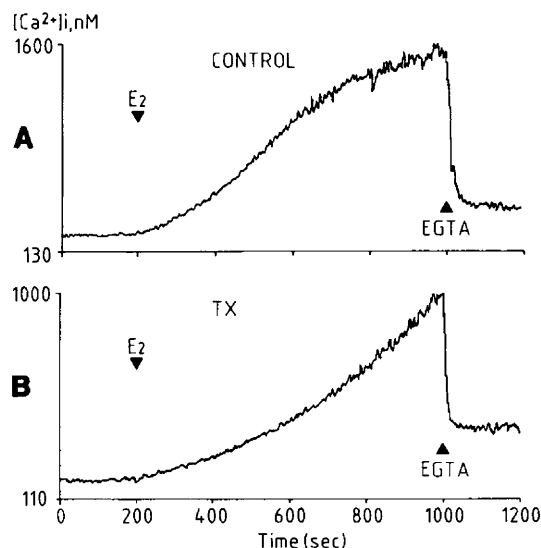


Fig. 5. Intracellular calcium levels in LNCaP cells measured after the administration of 10 nmol/l  $E_2$  to LNCaP cells pretreated (B) or not (A) with 100 nmol/l tamoxifen for 20 min before the addition of  $E_2$ . The antiestrogen tamoxifen was present throughout the entire recording period. Pretreatment with the antiestrogen tamoxifen did not block the response to  $E_2$ , although it modified the kinetics of the  $E_2$ -induced  $Ca^{2+}$  increase.

## Discussion

It is widely recognized that LNCaP cells are a good model for *in vitro* studies of human prostate cancer cells (9). Previous reports have demonstrated that LNCaP cells possess a mutant androgen receptor able to bind not only androgens but also antiandrogens, estrogens and progestins (11, 18). Androgens, mainly DHT (19), represent the main determinant in induction, growth and maintenance of the LNCaP cell line (10, 19–22). However, estrogen has been described as playing a role in growth control, both in androgen-sensitive (LNCaP) (13) and insensitive (PC3) (23) prostate cancer cell lines. For this reason, oral androgen treatment was rapidly associated with the administration of GnRH (24, 25) or  $E_2$  (26, 27) to enhance the cytotoxic effect.

The existence of estrogen receptors in prostate cells has long been controversial. However, multiple binding sites have been described recently in prostate cells and benign prostatic hyperplasia (12, 28). In LNCaP cells, it has been reported recently that the biological response to  $E_2$  is clearly mediated by its own receptors (13).

Numerous data are available concerning the genomic molecular action mechanism of steroids. The receptors appear to be predominantly nuclear (29), with a hormone–receptor complex regulating gene expression. On the other hand, the rapid response evoked by applying steroids to target cells is puzzling. In Sertoli cells, androgen causes a rapid increase in  $[Ca^{2+}]_i$  (30); in LNCaP cells an influx of  $Ca^{2+}$  through L-type calcium channels is induced by androgen (8); in chicken and pig

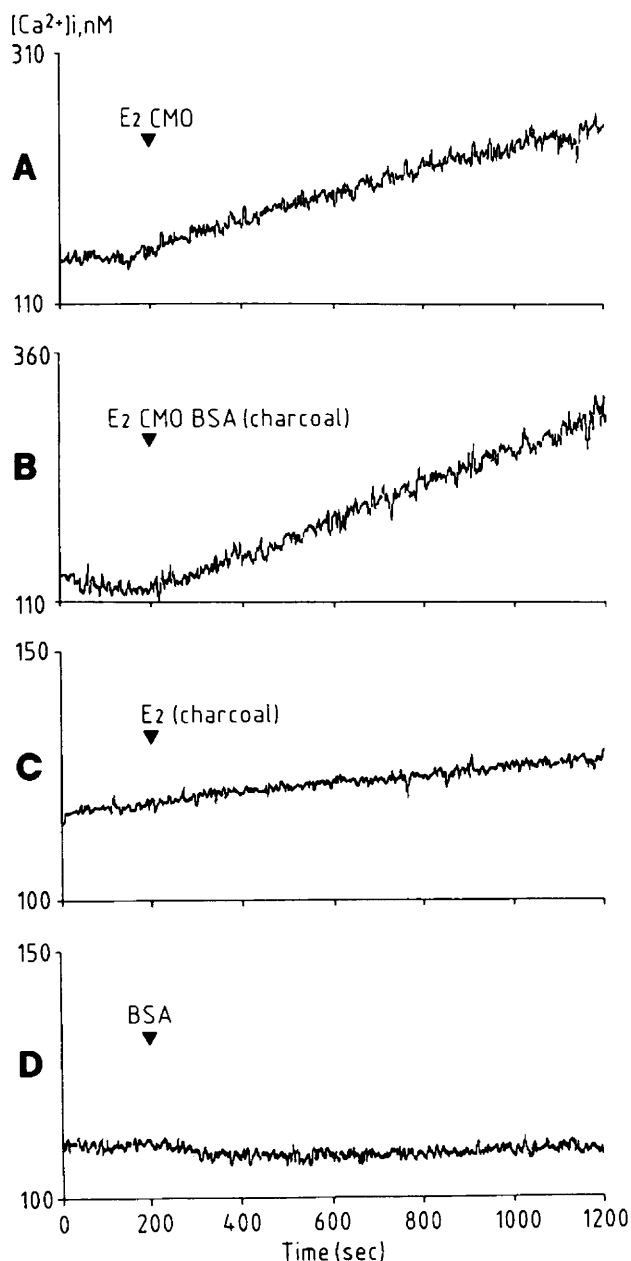


Fig. 6. Intracellular calcium concentration ( $[Ca^{2+}]_i$ ) levels in LNCaP cells after the administration of  $E_2$  covalently linked on the steroid nucleus via an *O*-carboxymethyloxime (CMO) to BSA ( $E_2$  CMO BSA); a solution of  $E_2$  CMO was used as the control. The  $[Ca^{2+}]_i$  was measured after the administration of  $E_2$  CMO (A), charcoal treated  $E_2$  CMO BSA (B), charcoal-treated  $E_2$  (C) or BSA (D). Like  $E_2$ , 10 nmol/l  $E_2$  CMO induced an increase in  $[Ca^{2+}]_i$ . Although 10 nmol/l  $E_2$  CMO BSA could not penetrate the cells, it still produced an increase in  $[Ca^{2+}]_i$ . BSA alone had no effect on  $[Ca^{2+}]_i$ .

ovarian granulosa cells  $E_2$  triggers a rapid release of intracellular  $Ca^{2+}$  (2). Here, we show the rapid effects of  $E_2$  on  $[Ca^{2+}]_i$  in LNCaP cells.  $17\beta$ -Estradiol triggered a rapid and sustained increase in  $[Ca^{2+}]_i$  due to  $Ca^{2+}$  influx. The fact that the prompt  $E_2$ -induced  $[Ca^{2+}]_i$  was not affected by incubating the cells with a pure

antiandrogen, flutamide, which binds to androgen receptors and suppresses the DHT-induced  $Ca^{2+}$  rise, suggests the existence of specific  $E_2$  receptors (13). It has been shown that the failure of tamoxifen to prevent the  $E_2$ -induced  $[Ca^{2+}]_i$  rise is due to  $E_2$  receptors other than the conventional nuclear receptors (31). In LNCaP cells the rapid response and the inability of tamoxifen to block the response also suggests a non-genomic action triggered at cell membrane level. Rapid effects of steroid hormones at the cell membrane level have been described also in neuronal tissue (32). It has been reported that immobilized ligands, coupled to high-molecular weight molecules such as BSA, do not enter the plasma membrane (4). When 10 nmol/l  $E_2$  CMO BSA, treated in a charcoal bath to suppress any free  $E_2$ , was applied to LNCaP cells, an  $E_2$ -induced  $[Ca^{2+}]_i$  rise was still observed, confirming a binding at the surface of the plasma membrane. The response to  $E_2$  in LNCaP cells is quick (measured in terms of minutes), but less so compared to the  $E_2$  stimulation of  $Ca^{2+}$  mobilization (measured in terms of seconds) as reported in granulosa cells (2). Moreover, the response of  $[Ca^{2+}]_i$  after  $E_2$  BSA application was weaker. Also, the kinetics of the  $E_2$ -induced  $Ca^{2+}$  rise appeared slightly modified in the presence of tamoxifen. Thus, the participation of  $E_2$  nuclear receptor binding sites with an  $E_2$ -induced membrane  $Ca^{2+}$  influx cannot be completely excluded. Receptor-activated  $[Ca^{2+}]_i$  variations have been reported in a large number of excitable and non-excitable cells (33–36). In osteoblasts, an androgen-induced rise in  $[Ca^{2+}]_i$  has been reported (15). This increase is apparently mediated through membrane receptors coupled to phospholipase C and G proteins. Both  $Ca^{2+}$  influx and  $Ca^{2+}$  mobilization from the endoplasmic reticulum contributed to the increase in  $[Ca^{2+}]_i$ . In LNCaP cells, both  $E_2$  and DHT induce only calcium influx.

The nature of the  $Ca^{2+}$  channels activated by  $E_2$  is not yet known. Electrophysiological experiments performed in our laboratory showed that LNCaP cells were devoid of the usual voltage-dependent  $Ca^{2+}$  channels. Thus, in LNCaP, as in other non-excitable cells,  $Ca^{2+}$  enters the cells through calcium channels that are neither voltage-dependent nor sensitive to dihydropyridine, as the application of PN200-110 did not affect the  $E_2$ -induced  $[Ca^{2+}]_i$  rise (data not shown). We cannot exclude the possibility of other processes, such as the inhibition of a  $Ca^{2+}$  pump, inducing an accumulation of  $Ca^{2+}$  ions inside the cell. Steroids are a well-known stimulant to cell proliferation. Indeed, growth of LNCaP cancer cells is stimulated by estrogens (13, 10). In parallel experiments we confirmed a dose-dependent effect of  $E_2$  on the proliferation of LNCaP cells, with a maximal increase at a concentration of 10 nmol/l  $E_2$  (data not shown). Conversely, a higher dose of  $E_2$  (10  $\mu$ mol/l) has been reported to inhibit the growth of androgen-insensitive cells. This is possibly due to an effect on the cell membrane (37), because these cells are

devoid of classical estrogen nuclear receptors (38). Furthermore, estrogens are able to induce apoptosis *in vivo* in an androgen-sensitive rat prostatic adenocarcinoma (39). Thus, effects of estrogen on cell proliferation and death appear to be dissociated, and further study is obviously required to relate the increase in calcium influx induced by estrogen to the phenotypic effects of estrogen treatments.

In conclusion, the data presented in this study show a rapid membrane effect of  $E_2$  in LNCaP cells, which suggests that the action of  $E_2$  occurs, at least in part, independently of nuclear androgen and estrogen receptors and thus through a non-genomic site that remains to be characterized. Several hypotheses may explain how this receptor is related to calcium entry and, in particular, the possibility that this receptor may be a  $Ca^{2+}$  channel or a binding site on a  $Ca^{2+}$  channel, as described for other ions. These hypotheses are currently under investigation in our laboratory.

**Acknowledgments.** We would like to thank Professor J André (Unité Inserm 329, Lyon) for providing the LNCaP cell line, MF Odessa for cell cultures and D Varoqueaux for the illustrations. This research was supported in part by grants from Association pour la Recherche sur le Cancer (ARC) and Association pour la Recherche sur les Tumeurs de la Prostate (ARTP).

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Received January 22nd, 1996

Accepted April 29th, 1996