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**Pharmacological evidence for the existence of four separate  $\beta$ -adrenoceptors in chick embryo ventricular cardiac myocytes**

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**Introduction:** There is conflicting evidence concerning the existence of various  $\beta$ -adrenoceptor sub-types in cardiac tissue. The presence of a low affinity version of the  $\beta_1$ -adrenoceptor has been shown in mammalian heart cells (Freestone *et al*, 1999). This third stimulatory cardiac  $\beta$ -adrenoceptor has been confused with the inhibitory  $\beta_3$ -adrenoceptor in cardiac tissue. Work is continuing to separate out the contributions of these different  $\beta$ -adrenoceptor sub-types to cardiac function. The aim of the present study was to pharmacologically isolate the contributions of the four cardiac  $\beta$ -adrenoceptors to the physiology of cardiac cells.

**Method:** Spontaneously beating cultures of ventricular myocytes were obtained as previously described from seven day old chick embryos (Rabkin, Freestone and Quamme, 1994). Specific combinations of  $\beta$ -agonists and antagonists were used to stimulate each of the four  $\beta$ -adrenoceptor sub-types individually and the beating rate responses of the cells monitored by video microscopy.

**Results:** The addition of 100nM isoprenaline ( $\beta_1/\beta_2$  agonist) led to an increase in the mean spontaneous contraction rate from  $56 \pm 2.81$  bpm to  $73 \pm 4.09$  bpm ( $n=16$ ,  $p = 0.0002$ ). The subsequent introduction of 200nM propranolol ( $\beta_1/\beta_2$  antagonist) reduced the mean spontaneous contraction rate by  $\approx 34\%$  (from  $73 \pm 4.09$  bpm to  $48 \pm 3.82$  bpm,  $n=16$ ,  $p = 0.0003$ ). A further reduction in the mean spontaneous contraction rate was observed with the sequential addition of a  $\beta_3$  agonist, 600nM BRL37344, (from  $48 \pm 3.82$  bpm to  $40 \pm 1.84$  bpm,  $n=16$ ,  $p = 0.0108$ ). Conversely, the addition of  $1\mu\text{M}$  CGP12177 ( $\beta_{1L}$ -adrenoceptor agonist) resulted in an increase in the mean spontaneous contraction rate; however, the increase was 25% lower than the increase observed with the addition of 100nM isoprenaline. The addition of  $1\mu\text{M}$  CGP12177 increased the mean spontaneous contraction rate by  $\approx 27\%$  (from  $40 \pm 1.84$  bpm to  $55 \pm 4.30$  bpm,  $n=16$ ,  $p = 0.0021$ ). BRL37344 (600 nm) when added alone reduced the contraction rate from  $92.5 \pm 12$  bpm to  $79.3 \pm 13$  bpm ( $p = 0.007$ ;  $n=12$ ).

Blockade of  $\beta_2$ -adrenoceptors with IC1118551 revealed stimulation ( $p < 0.0001$ ) of the contraction rate by noradrenaline (from  $80 \pm 0.55$  bpm to  $125 \pm 0.16$  bpm;  $n= 12$ ) working through high affinity  $\beta_1$ -adrenoceptors ( $\beta_{1H}$ ). Blockade of  $\beta_1$ -adrenoceptors with CGP20712 revealed stimulation ( $p < 0.0001$ ) of the contraction rate by adrenaline (from  $75 \pm 0.53$  bpm to  $91 \pm 0.07$  bpm;  $n= 12$ ) working through  $\beta_2$ -adrenoceptors.

**Discussion:** This preliminary pharmacological evidence suggests that the combined  $\beta_1/\beta_2$  agonist, ISO and  $\beta_{1(H)}$ ,  $\beta_2$  and  $\beta_{1(L)}$  agonists (adrenaline, noradrenaline and CGP12177 respectively) mediate positive chronotropic responses whilst agonists binding to the  $\beta_3$  adrenoceptor (eg. BRL37344) mediate negative chronotropic responses in chick embryo ventricular myocytes. Thus the presence of four distinct  $\beta$ -adrenoceptor populations mediating different contractile effects has been identified and characterised in one cardiac cell preparation for the first time.