# Pancreatic changes in somatostatin content and receptor/effector system after intrapancreatic injection of 5,7-dihydroxytryptamine

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#### Abstract

To date, it is unknown whether intrapancreatic serotonergic nerves can influence pancreatic somatostatin (SS) content and the SS receptor/effector system in the exocrine pancreas. In this study, the intrapancreatic serotonergic nerves were chemically ablated by injecting a specific serotonin (5-HT) neurotoxin, 5,7-dihydroxytryptamine (5,7-DHT), into the substance of the gland. Three days after the injection, the 5-HT-like immunoreactive levels in the pancreas were reduced by more than 85% whereas somatostatin-like immunoreactive levels had increased (86%). The number of SS receptors in the pancreatic acinar cell membranes of the 5,7-DHT-treated rats was also increased (72%). No significant differences were seen in basal or forskolin-stimulated adenylate cyclase (AC) enzyme activities in the control and the 5,7-DHTtreated groups. In spite of the increase in the number of SS receptors in the pancreatic acinar cell membranes of 5,7-DHT-treated rats, SS caused a significantly lower inhibition of AC activity in these membranes. This finding is related to the observed decrease of a 41 kD pertussis toxin-sensitive substrate, presumably the  $\alpha_i$  subunit of the guanine nucleotide inhibitory protein, in pancreatic acinar cell membranes 3 days after intrapancreatic 5,7-DHT administration when compared with the corresponding controls. The functions of pancreatic serotonergic nerves seem to be associated with enteropancreatic communication. These data together with the present results suggest that pancreatic SS content and the SS receptor/effector system in the exocrine pancreas may be regulated by enteropancreatic serotonergic nerve fibers and may participate in enteropancreatic reflexes.

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#### Introduction

Several studies have shown anatomical and functional interconnections between the serotonergic and somatostatinergic systems in the rat brain (Tanaka & Tsujimoto 1981, Kakigi & Maeda 1992). However, the possible interconnection of these two systems at the pancreatic level is less well known. The pancreas receives a serotonergic innervation which may be derived exclusively from the myenteric plexus of the stomach and duodenum (Kirchgessner & Gershon 1990). Most serotonergic immunoreactive axons in the pancreas terminate in ganglia although some fibers are also observed near acini, ducts, vessels, and islets of Langerhans cells (Kirchgessner & Gershon 1990). Recently pancreatic serotonergic receptors (5-HT<sub>1A</sub> and 5-HT<sub>1P</sub>) were found along nerve fiber bundles located in the stroma between acini, and over single cells scattered in the pancreatic parenchyma (Kirchgessner et al. 1992, 1993). The density of 5-HT<sub>1P</sub> binding sites was higher than that of 5-HT<sub>1A</sub> binding sites in the rat pancreas (Kirchgessner et al. 1993). On the other hand, somatostatin (SS) in the pancreas is localized in the (so-called) D cells in the islets of Langerhans (Arimura

et al. 1975). Normal rat pancreatic acinar cell membranes possess specific SS receptors which have been characterized previously (Srikant & Patel 1986, Viguerie et al. 1988). These receptors are probably coupled to the adenylate cyclase (AC) enzyme system via a guanine nucleotide inhibitory protein (Gi) (Sakamoto et al. 1987). Guanine nucleotides inhibit SS binding to its receptors in pancreatic acinar cell membranes (Sakamoto et al. 1987). These receptors are accessible to circulating SS as wellas to high local concentrations of islet SS. Serotonin (5-HT) and SS have been described as inhibiting insulin (Feldman et al. 1972, Alberti et al. 1973) and exocrine pancreatic secretion on a functional level (Mori et al. 1979, Susini et al. 1980, Matsushita et al. 1993). To date, whether intrapancreatic serotonergic nerves influence pancreatic SS content and the SS mechanism of action in the exocrine pancreas is not known. The experiments in this paper investigate the effects of chemical ablation of intrapancreatic serotonergic nerves by 5,7-dihydroxytryptamine (5,7-DHT) on the SS receptor/effector system in pancreatic acinar membranes and on total pancreatic somatostatin-like immunoreactive (SSLI) content.

#### Materials and Methods

#### Materials

Synthetic Tyr<sup>11</sup>-SS was purchased from Universal Biologicals Ltd (Cambridge, UK); carrier-free Na[125I] (IMS 30, 100 mCi/ml) was purchased from the Radiochemical Center (Amersham, Bucks, UK); 5,7-DHT, bacitracin, phenyl-methylsulphonylfluoride (PMSF), guanosine triphosphate (GTP), 5'-guanylylimidodiphosphate (Gpp-3-isobutyl-1-methylxanthine (IBMX) bovine serum albumin (BSA) were purchased from Sigma (St Louis, MO, USA). The rabbit antibody used in the radioimmunoassay technique was purchased from the Radiochemical Centre (Amersham). This antiserum was raised in rabbits against SS-14 conjugated to BSA and is specific for SS, but since SS-14 constitutes the C-terminal portion of both SS-25 and SS-28, the antiserum does not distinguish between these three forms. The binding of SS-14 to this antibody does not depend on an intact disulfide bond in the molecule, since breaking the disulfide bond with 0.1% mercaptoethanol boiling water bath for 5 min does not change peptide immunoreactivity. Cross-reactivity with other peptides was less than 0.5%. Cross-reaction with several SS analogues demonstrated that neither the N-terminal glycine nor the C-terminal cysteine residue is required for antibody binding, suggesting that the antigen site is directed towards the central part of the molecule containing the tryptophan residue. All other reagents were of the highest purity commercially available.

#### Experimental animals

The specific 5-HT neurotoxin, 5,7-DHT (Azmitia & Marovitz 1980), was dissolved to a final concentration of 5 × 10<sup>-4</sup> M in Krebs Ringer buffer, pH 7.4, supplemented with ascorbic acid (10<sup>-3</sup> M) as an antioxidant and the monoamine oxidase inhibitor, pargyline (10<sup>-4</sup> M) (Jansson et al. 1985). Male Wistar rats weighing 225-250 g were anaesthetized with ether and the pancreas was exposed through a midline laparatomy. The pancreas was infiltrated completely with 2 ml 5,7-DHT solution injected into the substance of the gland through a 25 gauge needle as previously described (Jansson et al. 1985). The abdominal wound was closed. Control rats received an identical surgical procedure and infiltration of the pancreas with the buffer alone. The rats were decapitated 3 days after the infiltration. The pancreas was removed and trimmed free of fat, connective tissue and lymph nodes.

#### Measurement of 5-HT

Analysis by HPLC was performed as described earlier (Hansson & Rosengren 1978). Briefly, the pancreas was homogenized with an internal standard in 2 ml 0.4 m perchloric acid and after centrifugation the supernatant

was further processed.  $\alpha$ -Methyl-5-HT (150 ng) was used as internal standard. A model 6000A Waters high pressure pump equipped with a Rheodyne sample valve injector (Model 7125) and an electrochemical detector (Bioanalytical Systems, Model LC 10) were used. The detector potential was set at +0.75 V vs an Ag/AgCl reference electrode. 5-HT was adsorbed on a weak cation-exchange resin at pH 6.0 (Amberlite XE-64,  $20 \times 4$  mm). After washing, the column was eluted in 0.25 ml fractions with 1.2 m HCl. The different fractions were analyzed by HPLC using a reversed phase column (5  $\mu$ m Nucleosil C<sub>18</sub>,  $250 \times 4.6$  mm). The mobile phase consisted of aqueous methanol (17%) with 40 g methanesulphonic acid and 2.9 g phosphoric acid at pH 2.5. The method yields a 78% recovery.

## Preparation of rat pancreatic acinar membranes

Dispersed pancreatic acini were obtained from male Wistar rats after enzymatic degradation of the organ with 0·2 units collagenase/ml in an oxygenated Krebs-Ringer medium as described by Amsterdam et al. (1978). After thorough washing by sedimentation, acini were transferred to 0·3 M sucrose and homogenized at 4 °C by use of a Potter homogenizer following the method described by Meldolesi et al. (1971). After sedimentation at 1500 g for 12 min, the homogenized membranes were resuspended in 1·56 M sucrose. This suspension was overlaid with 0·3 M sucrose and centrifuged at 105.000 g for 150 min. The plasma membrane-enriched fraction collected from the interphase was pelleted and stored at -70 °C.

# Binding of [125I]-Tyr11-SS

Binding of [125I]-Tyr<sup>11</sup>-SS was assayed on pancreatic acinar membranes from rats by a modified method (Colas et al. 1992). Tyr<sup>11</sup>-SS was radioiodinated by chloramine-T iodination according to the method of Greenwood et al. (1963). Separation of iodinated SS from unincorporated iodine was carried out on a Sephadex G-25 (fine) column equilibrated and eluted with 0·1 M acetic acid in BSA (0·1% w/v). The specific activity of the radioligand was 600 Ci/mmol.

Binding of [125I]-Tyr<sup>11</sup>-SS to pancreatic acinar membranes was carried out in a total volume of 250 µl 50 mm Tris-HCl buffer (pH 7·4) containing 0·5 mm MgCl<sub>2</sub> 3 mm NaCl, 0·2 mm CaCl<sub>2</sub>, 0·2% (w/v) BSA, 0·5 mg/ml bacitracin and 0·3 mg/ml soybean trypsin inhibitor (binding buffer). Plasma membranes (75 µg protein/ml) were incubated for 90 min at 20 °C with 35 pm [125I]-Tyr<sup>11</sup>-SS in the absence or presence of 0·01–10 nm unlabelled SS After incubation at 20 °C for 90 min, bound and free ligand were separated by centrifugation at 11 000 g for 4 min in a microcentrifuge. Radioactivity in the pellet was measured with a gamma scintillation counter. Non-specific binding was estimated as membrane-associated

satioactivity in the presence of 1 µm SS and specific binding was calculated as the difference between total and non-specific membrane-associated radioactivity.

#### tavaluation of radiolabelled peptide degradation

to determine the extent of tracer degradation during membation, the ability of preincubated peptide to bind to fresh pancreatic acinar membranes was measured. Briefly, [125] Tyr<sup>11</sup>-SS (35 pm) was incubated with pancreatic acinar membranes (75 µg protein/ml) for 90 min at 20 °C. After this preincubation, aliquots of the medium were added to fresh pancreatic acinar membranes and incubated for an additional 90 min at 20 °C. The fraction of the added radiolabelled peptide which specifically bound during the second incubation was measured and expressed as 4 percentage of the binding that had been obtained in control experiments performed in the absence of pancreatic acinar cell membranes during the preincubation period. Pancreatic acinar cell membranes from control and 5,7-DHT-treated rats showed a similar peptide degradation capacity and the values varied by no more than 9% m all the experimental groups.

## Adenylate cyclase assay

Activity of AC was measured as previously reported (Houslay et al. 1976) with minor modifications. Briefly, rat pancreatic acinar membranes (0.12 mg/ml) were incubated with 1.5 mm ATP, 5 mm MgSO<sub>4</sub>, 1 µm Gpp(NH)p and ATP-regenerating system (7.5 mg/ml creatine phosphate and 1 mg/ml creatine kinase), 1 mm IBMX, 0-1 mм PMSF, 1 mg/ml bacitracin, 1 mм EDTA, and test substances  $(10^{-11} - 10^{-6} \text{ m SS or } 10^{-4} \text{ m forskolin (FK)})$ in 0·1 ml 0·025 м triethanolamine—HCl buffer (pH 7·4). After 30 min incubation at 30 °C, the reaction was stopped by heating the mixture for 3 min. After cooling, 0.2 ml alumina slurry (0.75 g/ml in triethanolamine-HCl buffer, pH 7·4) was added and the suspension centrifuged. The supernatant was taken for assay of cAMP by the method of Gilman (1970).

#### Pertussis toxin-catalyzed ADP ribosylation

The pertussis-toxin (PTX)-catalyzed ADP ribosylation was carried out as previously reported (Bokoch et al. 1983). After PTX activation, membranes (1.6 mg protein/ml) were incubated with the PTX (16 µg/ml) in 100 mm Tris-HCl buffer (pH 8.0), containing 10 mm thymidine, 1 mm ATP, 100 μm GTP, 2·5 mm MgCl<sub>2</sub>, 1 mm EDTA, 2 µm [32P]NAD+ (30 Ci/mmol) and an ATP-regeneration system. After 30 min at 30 °C, the reaction was stopped by addition of 1 ml ice-cold 100 mm Tris-HCl buffer (pH (80), sedimented by centrifugation for 10 min at 30 000 g and solubilized with 0.1 ml 60 mm Tris-HCl buffer (pH

6.8) containing 10% glycerol, 0.001% bromophenol blue and 3% SDS (SDS-sample buffer). After heating for 30 min at 60 °C, the suspension was centrifuged for 10 min at 100 000 g and aliquots of the supernatant were submitted to SDS-PAGE using the procedure of Laemmli (1970) as previously described (Laburthe et al. 1984). The gels were run, fixed, dried and exposed to Dupont films (cronex 4) for 1-7 days at  $-80 \, ^{\circ}\text{C}$  using an intensifying

#### Tissue extraction and SS radioimmunoassay

For SSLI measurement, the pancreata were rapidly homogenized in 1 ml 2 M acetic acid using a Brinkman polytron (setting 5, 30 s). The extracts were boiled for 5 min and aliquots (100 µl) were removed for protein determination (Lowry et al. 1951). The homogenates were subsequently centrifuged at 15 000 g for 15 min at 4 °C and the supernatant was neutralized with 2 M NaOH. The extracts were stored at -70 °C until assay. The SS concentration was determined in tissue extracts by a modified radioimmunoassay method (Patel & Reichlin 1978) with a sensitivity limit of 10 pg/ml. Incubation tubes prepared in duplicate contained 100 µl samples of unknown or standard solutions of 0-500 pg cyclic SS-14 diluted in phosphate buffer (0.05 M, pH 7.2 containing 0.3% BSA, 0.01 M EDTA), 200 µl appropriately diluted anti-SS serum, 100 µl freshly prepared [125I]-Tyr11-SS diluted in buffer to give 6000 c.p.m. (equivalent to 5-10 pg) and enough buffer to give a final volume of 0.8 ml. All reagents as well as the assay tubes were kept chilled on ice before their incubation for 48 h at 4 °C. Bound hormone was separated from free hormone by the addition of 1 ml dextran-coated charcoal (dextran T-70, 0.2% w/v, Pharmacia, Uppsala, Sweden; charcoal: Norit A, 2% w/v, Serva, Feinbiochemica, Heidelberg, Germany). Serial dilution curves for the samples were parallel with the standard curve. The intra- and interassay coefficients of variation were 6.0 and 8.8% respectively.

#### Data analysis

The LIGAND computer program (Munson & Rodbard 1980) was used to analyze the binding data. The use of this program made it possible to select the models of receptors which best fit a given set of binding data. The same program was also used to present data in the form of Scatchard plots (Scatchard 1949) and to compute the values for receptor affinity  $(K_d)$  and density  $(B_{max})$  that best fit the sets of binding data for each rat. Statistical comparisons of all the data were analyzed by ANOVA and the Newman-Keuls t-test. Means among groups were considered significantly different when the P value was less than 0.05. Each individual experiment was performed in duplicate.

TABLE 1. Effect of 5,7-dihydroxytryptamine (5,7-DHT) on somatostatin-like immunoreactive (SSLI) concentration, on the levels of serotonin (5-HT) in rat pancreas and on the equilibrium parameters for somatostatin (SS) binding to rat pancreatic acinar membranes

SS r	eceptor
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	B <sub>max</sub>	$K_{\rm d}$	SSLI	5-HT
Groups Control 5,7-DHT	922 ± 39·53 1587 ± 134·39**	$0.12 \pm 0.01$ $0.15 \pm 0.01$	$5.8 \pm 1.1$ $10.8 \pm 0.9**$	$0.20 \pm 0.01$ $0.03 \pm 0.002***$

Binding parameters were calculated from Scatchard plots by linear regression, Units for SSLI are ng SS per mg protein, units for  $K_d$  are nm, units for  $B_{max}$  are finol of SS bound per mg of protein and units for 5-HT levels are  $\mu$ mol per kg of pancreatic wet weight. The results are represented as the means  $\pm$  s.e.m. of five separate experiments. Statistical comparison versus control: \*\*P<0.01; \*\*\*P<0.001.

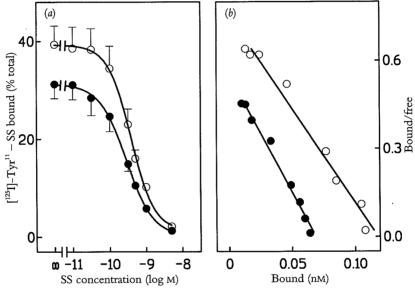


FIGURE 1. (a) Competitive inhibition of specific [<sup>125</sup>I]-Tyr<sup>11</sup>-somatostatin ([<sup>125</sup>I]-Tyr<sup>11</sup>-SS, 35 pM) binding to pancreatic acinar membranes by unlabelled somatostatin (SS). The membranes (75 µg protein/ml) were incubated for 90 min at 20 °C in the presence of 35 pM [<sup>125</sup>I]-Tyr<sup>11</sup>-SS and increasing concentrations of native peptide. Points correspond to values for animals in the control (●) and 5,7-dihydroxytryptamine (5,7-DHT)-treated (○) groups. (b) Scatchard analysis of the same data.

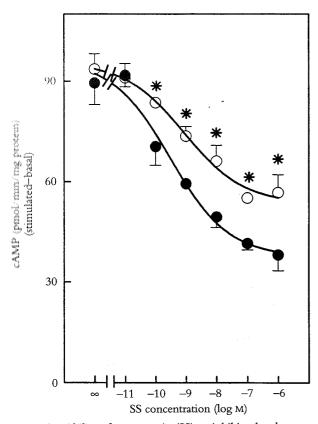
## Results

Intrapancreatic injection of 5,7-DHT in vivo resulted in an approximately 85% depletion of 5-HT in the pancreas at 3 days after the injection whereas the SSLI content was increased (86%) as compared with the control group (Table 1).

Preliminary experiments confirmed that specific binding of [1251]-Tyr<sup>11</sup>-SS to pancreatic acinar cell membranes changed linearly with protein concentration and was time-dependent in all experimental groups. An apparent equilibrium was observed between 60 and 120 min at 20 °C (data not shown). All subsequent binding exper-

iments were therefore conducted at 20 °C for 90 min. The binding of [ $^{125}$ I]-Tyr $^{11}$ -SS to its specific receptors in pancreatic acinar cell membranes of rats treated with 5,7-DHT was significantly increased (Table 1 and Fig. 1) Scatchard analysis indicated that the number of SS receptors (B<sub>max</sub>) in this tissue was markedly increased after lesions with 5,7-DHT, but that receptor affinity ( $K_{\rm d}$ ) was not altered (Table 1).

SS receptors were negatively coupled to the AC system in pancreatic acinar cell membranes from control and 5,7-DHT treated rats (Fig. 2). SS inhibited basal and FK-stimulated AC activity in the control and 5,7-DHT treated groups. However, the effect of SS on basal and



PIGURE 2. Ability of somatostatin (SS) to inhibit adenylate cyclase activity in rat pancreatic acinar membranes from the control ( $\bullet$ ) and 5,7-dihydroxytryptamine (5,7-DHT)-treated ( $\circ$ ) groups. Basal levels of cAMP were subtracted from the corresponding stimulated values. Data are expressed as the mean  $\pm$  s.e.m. of six duplicate experiments. Statistical comparison versus control: \*P<0.05.

FK-stimulated AC activity was markedly diminished in pancreatic acinar membranes from 5,7-DHT-treated rats as compared with the control animals ( $11 \pm 1\%$  vs  $28 \pm 4\%$  and  $12 \pm 1\%$  vs  $25 \pm 2\%$  respectively). This decrease was related to a reduced efficacy of SS in inhibiting AC, although there was no change in the potency of the neuropeptide (Fig. 2).

To test if the changes observed after injecting 5,7-DHT were related to a modification in AC activity or to an alteration in the coupling of the enzyme to regulatory proteins (Gi), we measured the response of AC to the diterpene FK, which is assumed to act directly upon the catalytic subunit of AC, and then examined the  $\alpha_i$  subunits of Gi using PTX-catalyzed ADP ribosylation of membranes from control and 5,7-DHT-treated rats. Neither the potency nor the efficacy of FK to stimulate AC activity were significantly altered by the intrapancreatic injection of 5,7-DHT. In addition, no significant differences were seen for basal AC activities between the control and the 5,7-DHT-treated groups.

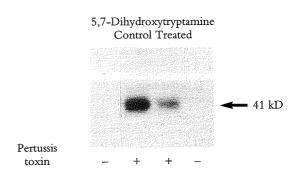


FIGURE 3. Autoradiograph of [<sup>32</sup>P]ADP-ribosylated pancreatic acinar membrane proteins. Pancreatic acinar membranes from control and 5,7-dihydroxytryptamine (5,7-DHT)-treated rats were incubated in the presence of [<sup>32</sup>P]NAD<sup>+</sup>, with and without pertussis toxin. This experiment is representative of six others.

The study of PTX-catalyzed ADP-ribosylation showed a decrease of a 41 kD PTX substrate, presumably the  $\alpha_i$  subunit of Gi, in pancreatic acinar membranes from 5,7-DHT treated rats (Fig. 3).

#### Discussion

The aim of the present study was to evaluate the role of intrapancreatic serotonergic nerves on the SS receptor/ effector system and SS content in the rat pancreas. The levels of 5-HT in the pancreas of control rats were similar to those previously reported (Lundquist et al. 1989). The injection of 5,7-DHT severely decreased the level of 5-HT (85%) in the rat pancreas 3 days after its injection in agreement with previously published values (Jansson et al. 1985). Thus, 5-HT axon innervation in the pancreas was nearly abolished by 5,7-DHT.

The SSLI content in pancreata from control rats was similar to that previously reported by others (Patel & Reichlin 1978) and the SS receptors from rat pancreatic acinar membrane consist of a single class of high affinity sites (Srikant & Patel 1986, Viguerie et al. 1988). The binding affinity of SS receptors in this tissue was higher than that previously observed in rat brain, pituitary and adrenal cortex using the same radioligand (Srikant & Patel 1986). Thus, the SS receptors in the exocrine pancreas appear to contain the highest affinity for SS so far identified in the rat. The binding capacity of the SS receptors was comparable to that reported previously (Srikant & Patel 1986, Viguerie et al. 1988). Although the number of SS-receptor subtypes (SSTRs) cloned is growing (Bell & Reisine 1993), the rat pancreas appears to express only the subtype SSTR2 (Bruno et al. 1993).

Intrapancreatic serotonergic nerves are present not only within the islets but also between the exocrine acini (Koevary et al. 1983, Kirchgessner & Gershon 1990). Pancreatic 5-HT<sub>1A</sub> and 5-HT<sub>1P</sub> receptors were found along nerve fiber bundles that were located in the stroma between acini, and over single cells scattered in the pancreatic parenchyma (Kirchgessner et al. 1992, 1993). These locations suggest that the effect of ablation of intrapancreatic serotonergic nerves by 5,7-DHT on the SS content and its receptor/effector system could be due either to an indirect effect mediated by the nerve terminals carrying 5-HT receptors which release other transmitters, or a direct effect that would be mediated by the already described 5-HT receptors in the acini and islets of Langerhans.

The ablation of 5-HT nerve fibers within the pancreas increased pancreatic SSLI content as compared with the control group but the reason for this increase is still unclear. Whether this increase in SSLI reflects a decreased release, increased biosynthesis or decreased degradation of SSLI cannot be answered at this time. In agreement with the present results, a widespread increase in rat hippocampal and cortical SSLI levels has been reported after intracerebroventricular injection of 5,7-DHT (Kakigi & Maeda 1992, Kondo *et al.* 1993).

It is important to emphasize that our data indicate that the number of SS receptors, as assessed by agonist binding studies, increased after ablation of intrapancreatic 5-HT nerves whereas a 41 kD PTX substrate, presumably the  $\alpha_i$  subunit of Gi, decreased. Thus this study indicates that 5-HT axons exert a strong influence on SS receptors and on some post-SS-receptor mechanisms.

The mechanism by which axonal 5-HT influences SS receptors has not been determined although it may involve an effect by a 5-HT axonal component (either 5-HT itself or a cotransmitter) on SS receptor regulatory mechanisms at the level of cell membrane events, such as increased insertion or decreased degradation of existing receptors, or on earlier events such as the synthesis of new SS receptors.

The observations of other authors showing that FK stimulated rat pancreatic AC activity (Dehaye et al. 1985) are confirmed here. SS was a partial antagonist of FKstimulated pancreatic AC activity in agreement with Heisler (1983). The efficacy of SS to inhibit AC is diminished in pancreatic acinar membranes from 5,7-DHT-treated animals as compared with controls. However, there did not appear to be any defect in the catalytic unit of AC itself since similar levels of activities were noted in membranes from either control or 5,7-DHT-treated rats when this enzyme was stimulated directly by the diterpene FK. However, the decreased inhibitory effect of SS on AC activity may possibly be related to the observed decrease of the 41 kD PTX substrate, presumably the  $\alpha_i$  subunit of Gi, in pancreatic acinar cell membranes. Although the present results do not discard the possibility that the intrapancreatic injection of 5,7-DHT may exert effects directly on pancreatic tissue, other authors (Alonso & Soubrie 1991) do not find a direct effect of 5,7-DHT on

G protein levels in the brain. Since the exposure of intact cells to AC inhibitory agonists can apparently decrease the level of Gi $\alpha$  proteins (Jones & Bylund 1988), the increase in the SS level and its receptors would be compatible with a decrease in the level of Gi $\alpha$  proteins. Reithmann et al. (1990) have proposed that the down-regulation of the level of membrane Gi $\alpha$  proteins is a rather general cellular response to long term AC inhibition that serves as an intracellular negative feedback control against prolonged receptor activation. Whether a loss of Gi protein after ablation of 5-HT intrapancreatic nerves represents a quantitative decrease in the level of this protein or a qualitative change resulting from a transcriptional or posttranslational modification will require further investigation.

An inconsistency between changes in receptors and signal transduction is not unprecedented. For example, chronic exposure of primary cultures of mouse cortical neurons to the muscarinic antagonist atropine has been shown to increase the density of muscarinic receptors while decreasing carbachol-stimulated phosphoinositide hydrolysis (Smith et al. 1989). Alternatively, the lack of correlation between the magnitude of SS inhibition of AC and the density of [125I]-Tyr11-SS receptors may suggest the coupling of SS receptors to multiple signal transduction mechanisms or may be related to factors such as multiple and spare receptor sites. Of relevance to this observation is a recent report demonstrating no apparent match between the level of SS receptor sites and the magnitude of SS inhibition of AC activity in the frontal cortex of a group of Alzheimer's disease patients (Bergström et al. 1991).

It is probable that all of the serotonergic axons in the pancreas are of enteric origin since no serotonergic nerve cell bodies have been observed in pancreatic ganglia (Kirchgessner & Gershon 1990). Therefore, the functions of pancreatic serotonergic nerves are likely to be associated with enteropancreatic communication. These findings together with the present results suggest that pancreatic SS content and the SS receptor/effector system in the exocrine pancreas may be regulated by enteropancreatic serotonergic nerve fibers and thus may participate in enteropancreatic reflexes.

Besides the well-known rise in pancreatic SS content in diabetes (Patel & Weir 1976) there is evidence that suggests a role for serotonergic innervation in the pathogenesis of abnormal islet function in humans with type II diabetes (de Leiva et al. 1978). The fact that serotonergic neurons may control the SS receptor/effector system could be of interest in the understanding of the pathophysiology of type II diabetes.

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