Effects of Various Reactive Oxygen Species on the Guinea Pig Trachea and Its Epithelium

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ABSTRACT—Reactive oxygen species (ROS) are key factors playing important roles in tissue damage of airways under different pathological conditions. Effects of ROS (superoxide anion, H\textsubscript{2}O\textsubscript{2} and hydroxyl radical) were recorded on isometric tension of intact and epithelium denuded, not precontracted guinea pig trachea. Superoxide anion was produced by xanthine/xanthine oxidase and hydroxyl radical either by FeSO\textsubscript{4}/H\textsubscript{2}O\textsubscript{2} or FeSO\textsubscript{4}/ascorbic acid. In intact preparations, the muscle tension was unaffected by superoxide anion, while H\textsubscript{2}O\textsubscript{2} and hydroxyl radical produced a biphasic response, contraction followed by relaxation. Both the amplitude and duration of contractions evoked by H\textsubscript{2}O\textsubscript{2} were larger than those caused by hydroxyl radical producing systems. On denuded tracheal strips, superoxide anion elicited also a biphasic response, and the H\textsubscript{2}O\textsubscript{2} and hydroxyl radical produced contractions were of higher amplitude and of longer duration than in intact tissues. Indomethacin pretreatment enhanced or slightly reduced the amplitude of contractions evoked by both H\textsubscript{2}O\textsubscript{2} and hydroxyl radical on the intact and denuded preparations, respectively. Moreover, the duration of contractions of the trachea induced by oxidative systems was prolonged. Indomethacin did not affect the action of superoxide anion on the intact tissues and reduced the amplitude of the biphasic response on denuded ones. Nordihydroguaiaretic acid pretreatment did not alter the responses elicited by ROS in intact preparations and reduced their action on the denuded ones. Our results suggest that a) various ROS contract tracheal smooth muscle with simultaneous release of epithelium derived relaxing factors, b) epithelium possesses superoxide anion scavenging capacity which is high enough to protect smooth muscle from its actions, and c) cyclooxygenase products participate in relaxation and lipoxygenase products in contraction caused by ROS in the guinea pig trachea.

Keywords: Superoxide anion, H\textsubscript{2}O\textsubscript{2}, Hydroxyl radical, Guinea pig trachea, Arachidonic acid metabolite

Many pathological processes in the human organism are associated with increased production of reactive oxygen species (ROS), such as superoxide anion, H\textsubscript{2}O\textsubscript{2}, hydroxyl radical and singlet oxygen. In recent years, numerous studies reported a close relationship between the increased ROS production and the incidence or development of pathological processes in the airways, such as bronchial hyperreactivity, asthma, adult and newborn respiratory distress syndromes, etc. (1 – 6).

The impairment and destruction of the epithelium, along with the increased airway tone and sensitivity to some contractile mediators, such as histamine or acetylcholine (7), is an important factor of bronchial hyperreactivity and asthma. It was shown that hypochlorous acid, ozone, H\textsubscript{2}O\textsubscript{2} and a hyperoxic environment can impair the function of the airway epithelium and its morphology in a dose- and time-dependent manner (8 – 13). Apart from the contractile factors, relaxant factors are also present and released upon various stimuli from the epithelium (9, 14, 15).

Rhoden and Barnes (16) described a biphasic response of isolated guinea pig trachea to H\textsubscript{2}O\textsubscript{2}. Later existence of species differences was demonstrated. H\textsubscript{2}O\textsubscript{2} was shown to relax the rabbit (17) and dog (18) trachea, contract the cat trachea (19) and cause biphasic effect on the guinea pig trachea (20). The effects of H\textsubscript{2}O\textsubscript{2} are generally considered to be modulated by cyclooxygenase inhibitors or epithelium removal (16, 21 – 25). Several studies investigating the role of prostaglandins in the mediation of the effects of H\textsubscript{2}O\textsubscript{2} came to contradictory conclusions (16, 20) and pointed to marked interspecies differences (16, 18, 20, 26, 27).

Although there are many studies focusing on the effect of H\textsubscript{2}O\textsubscript{2} on isolated trachea or bronchi of various animal species: rat (22), cow (21), ferret (28), rabbit (17), guinea...
pig (16, 17, 20, 29), human (25), less were done on the
effects of ozone (guinea pig trachea (30), feline bronchi
(31)), hypochlorous acid (guinea pig trachea (32, 33)),
hydroxyl radical (rabbit trachea (26)) and xanthine-xan-
thise oxidase (guinea pig Airways in vivo (34) and cat
bronchi in vitro (35)). The lack of comprehensive studies
that would compare the effects of long-lasting contact of
systems generating hydroxyl radical and superoxide anion
on the tone of the guinea pig trachea in the presence or
absence of epithelium with that of H2O2 on the same tissue
of a single animal species prompted us to compare them
in guinea pig trachea. We analyzed also the possible
involvement of arachidonic acid metabolites in the medi-
ation of the long-lasting effects of ROS.

MATERIALS AND METHODS

Experimental animals and organ preparation
The experiments were done on the isolated tracheas of
male Trik guinea pigs (300 – 400 g). After killing the
animals by cervical dislocation and exsanguination, the
tracheae were excised and cleaned thoroughly of surround-
ing connective tissue. They were then cut transversely into
two equal parts and opened longitudinally on the ventral
side. Then the trachea was cut alternately from one and
the other side to obtain a preparation where the axes of
individual strips of the tracheas overlapped with the axis
of the whole preparation (36). Such preparations were
mounted into a 20-ml organ bath filled with Krebs-
Henseleit solution at 37°C and gassed with 5% CO2 and
95% O2. The Krebs-Henseleit solution contained: 118 mM
NaCl, 4.7 mM KCl, 2.5 mM CaCl2, 1.64 mM MgSO4, 1.2 mM KH2PO4, 25 mM
NaHCO3 and 5.5 mM glucose (pH = 7.4). The isometric
tension was recorded using a strain gauge transducer (TDA
100; Mikrotechna, Prague, Czech Republic). One end of
the tissues was tied to the bottom of a 20-ml tissue bath
and the other to a transducer. Before administration of
substances, the preparations were equilibrated for 15 min
at 20-mN load and for another 30 min at 10-mN load. The
experiments were carried out on intact and epithelium-
denuded, not precontracted preparations at the initial
tension of 10 mN. The epithelium was removed with moist
cotton wool by gentle rubbing. Tissue sections stained with
hematoxyline and eosin were examined histologically to
control the effectiveness of epithelium removal. Only few
broken epithelium cells were noticed in the denuded pre-
parations in contrast to the controls. Control and experi-
mental responses of the trachea to ROS, indomethacin and
nordihydroguaiaretic acid (NDGA) were obtained in the
upper and lower part of the trachea alternatively to mini-
mize possible differences in the response of these two
parts.

The effects of ROS on muscle tone
The contraction and relaxation amplitudes, the area
under the curve of the contractile part of the 30-min lasting
responses (AUC), and the time when muscle tone returns
back to the initial tension (t0) were evaluated.

Various concentrations of H2O2 (1 μmol/l – 10 mmol/l
applied in single doses and cumulatively) and systems
generating superoxide anion radical (1 μmol/l – 1 mmol/l
xanthine with 0.1 – 5 mM/ml xanthine oxidase) or hydroxyl
radical (1 μmol/l – 1 mmol/l FeSO4 with 0.1 and 1 mmol
l H2O2, or 0.1 mmol/l FeSO4 with 1 μmol/l – 1 mmol/l
ascorbic acid) were tested in preliminary experiments. The
chosen concentrations of H2O2 (1 mmol/l) and of FeSO4
(0.1 mmol/l) with H2O2 (1 mmol/l) caused roughly equi-
efficient contractions. FeSO4 (0.1 mmol/l), ascorbic acid
(0.1 mmol/l), xanthine (10 μmol/l) and xanthine oxidase
(2 μM/ml) were applied in concentrations that did not
affect the tracheal tone when administered alone.

To study the involvement of the arachidonic acid meta-
bolites in the action of ROS, the tissues were pretreated
for 60 min either by the cyclooxygenase inhibitor indo-
methacin (1 μmol/l) or NDGA (10 μmol/l).

Assay of superoxide anion
Generation of superoxide anion by xanthine/xanthine
oxidase system was monitored by a method based on
cytochrome c reduction (37). The reaction mixture consist-
ed of xanthine (10 μmol/l), cytochrome c (60 μmol/l) and
phosphate-buffered saline of the following composition:
136 mM NaCl, 2.6 mM KCl, 0.6 mM CaCl2, 0.5 mM
MgCl2, 8 mM Na2HPO4, 1.5 mM KH2PO4 and 5.5
mmol/l glucose (pH = 7.4). Addition of xanthine oxidase
(2 μM/ml) to this solution started the reaction. In some experiments, superoxide dismutase
(200 U/ml) was used to remove superoxide anion. The
change of the absorbance at 550 nm against the control (the
mixture without xanthine oxidase) was recorded continu-
ously on an HP 8953 LA spectrophotometer over the period of
15 min and analyzed by Hewlett Packard software. To
calculate the produced superoxide anion, a molar extinction
coefficient of 21000 mol⁻¹·1·cm⁻¹ was used.

Chemicals and solutions
Chemicals used were: H2O2 and FeSO4 (Lachema, Brno,
Czech Republic); cytochrome c from bovine heart, indo-
methacin, nordihydroguaiaretic acid, catalase from bovine
liver (Fluka, Buchs, Switzerland); superoxide dismutase
from human erythrocytes, xanthine sodium salt and xan-
thise oxidase from buttermilk, chromatographically puri-
fied (Sigma, Deisenhofen, Germany); isoprenaline hydro-
chloride (Léčiva, Praha, Czech Republic); ascorbic acid
(Slovakofarma, Hlohovec, Slovak Republic); stobadine
(IEPh SAS, Bratislava, Slovak Republic).
Indomethacin was dissolved in 0.1 mol/l Na₂CO₃ and NDGA in 0.1 mol/l NaOH to create a 1 mmol/l stock solution. Under this condition, the pH value of the physiological salt solution was not altered at their final concentration of 1 μmol/l. All the other substances were dissolved in distilled water and administered in a volume not exceeding 1% of organ bath volume.

Statistical analyses
The data in the text and figures are expressed as the mean ± S.E.M. of at least seven trials. If a higher number of trials was performed, n is given in the text or legend to figures. The values were compared with the unpaired two-tailed Student’s t-test and probability values P<0.05 were considered significant.

RESULTS
The effect of ROS on muscle tone
H₂O₂ (1 mmol/l) contracted the intact trachea with a maximum of 2.39 ± 0.36 mN in the 2nd min. The muscle tone then slowly declined (tₜ 21 ± 3.2 min) and within 30 min, it reached the value of −0.56 ± 0.18 mN; i.e., a tone below its initial one (Fig. 1A). The contraction AUC was 18.7 ± 3.4. In tissues with removed epithelium, the H₂O₂ induced maximum of tracheal contraction was twice that of the intact tissue (4.23 ± 0.57 mN) and AUC was 85.4 ± 18.7. The muscle tone then slowly decreased but even after 30 min, lasting contact with the tissues was still at the level of 2.26 ± 0.29 mN (Fig. 1B). The effect of H₂O₂ was inhibited by catalase (250, 500 and 1000 U/ml, n = 6) in a concentration-dependent manner and was not affected by the hydroxyl radical scavenger stobadine (1 and 10 μmol/l, n = 8).

Two systems producing hydroxyl radical were used. The first hydroxyl radical generating system (0.1 mmol/l of FeSO₄ with 1 mmol/l of H₂O₂) elicited after a short-lived (5 – 7 min) increase (with maximum of 2.58 ± 0.30 mN within 2 – 3 min and AUC = 9.89 ± 1.63) a reduction of the muscle tone that reached the level of −3 to −4 mN within 10 – 30 min (tₜ 6.5 ± 1.2 min) (Fig. 2A). On the epithelium denuded tracheas, this system elicited an at least three times bigger contraction (reaching 8.46 ± 1.08 mN in the 4th min, AUC = 93.2 ± 19.5) than in the tissues with intact epithelium. The decline of this contraction resulted between the 15th and 20th min in a muscle tone that did not differ significantly from the initial one (0.61 ± 0.66 mN) (Fig. 2B). The qualitative alterations of the muscle tone produced by the second hydroxyl radical generating system (0.1 mmol/l of FeSO₄ with 0.1 mmol/l ascorbic acid) were similar to those produced by FeSO₄/H₂O₂. The amplitude of the initial contraction reached a lower maximum (0.54 ± 0.17 mN in the 2nd min) and AUC (2.09 ± 0.36) than that produced by FeSO₄/H₂O₂. The muscle tone then decreased below the initial level to −1.43 ± 0.32 mN in the 30th min, and tₜ was 6.5 ± 1.2 min (Fig. 3A). Epithelium-denuded preparations were responding again with roughly three times bigger contractions (amplitude = 1.69 ± 0.34 mN, AUC = 32.2 ± 6.2) compared to those with intact epithelium. Moreover, the contractions of denuded preparations elicited by FeSO₄/ascorbic acid (Fig. 3B) persisted longer (tₜ 28.3 ± 2.4) than those elicited by FeSO₄/H₂O₂ (Fig. 2B). The effect of hydroxyl radical generating systems was significantly (n = 8, P<0.01) decreased by stobadine (10 μmol/l, data not shown).

In contrast to previous ROS generating systems, xanthine (10 μmol/l) with xanthine oxidase (2 mU/ml) generating superoxide anion did not change significantly the tone

![Fig. 1.](image-url)
of the trachea with intact epithelium (amplitude = 0.09 ± 0.04 mN, AUC = 0.58 ± 0.09, Fig. 4A). To verify whether the effect of this system was not due to an inadequate generation of superoxide anion, its production was also measured. Xanthine (10⁻³ mol/l) with xanthine oxidase (2 mU/ml) elicited a superoxide dismutase (200 U/ml)-sensitive cytochrome c reduction for roughly 10 min; thereafter, the oxidation of cytochrome c overcame its reduction, leading to a reversal in the change of absorbance and apparent discontinuation of cytochrome c reduction. An example is given in Fig. 5.

Removal of epithelium unmasked the biphasic effect of the superoxide anion produced by xanthine/xanthine oxidase. The initial contraction with maximum amplitude of 1.24 ± 0.23 mN within 10 min (AUC = 7.46 ± 1.52) was followed by a decrease of the tone (t, 8.6 ± 1.9) to a level of −1.12 ± 0.20 mN in the 30th min (Fig. 4B). The effect of xanthine/xanthine oxidase was almost completely inhibited (n = 5, data not shown) by simultaneous administration of superoxide dismutase (100 U/ml) and catalase (1000 U/ml).

**Effects of indomethacin and NDGA on the action of ROS**

The cyclooxygenase inhibitor, indomethacin (1 μmol/l) and the lipoxygenase inhibitor NDGA (10 μmol/l), administered 60 min prior the respective ROS application, were present in the bathing fluid during their action. Indomethacin decreased the initial tone of the intact trachea by 5.85 ± 0.88 (n = 40) and that of the epithelium-denuded trachea by 2.03 ± 0.08 mN (n = 40). In contrast, NDGA
almost equally decreased the initial tone of both the intact (by 5.85 ± 0.88 mN, n = 29) and epithelium-denuded trachea (by 5.42 ± 0.08 mN, n = 29).

The characteristics of changes in responses of the intact trachea to H$_2$O$_2$ (Fig. 1A), FeSO$_4$/H$_2$O$_2$ (Fig. 2A) and FeSO$_4$/ascorbic acid (Fig. 3A) after pretreatment of the tissues with indomethacin (1 μmol/l) were similar. The maximum contraction amplitude reached was augmented significantly (4.73 ± 0.54 mN in the 10th min by H$_2$O$_2$, 10.3 ± 0.98 mN in the 11th min by FeSO$_4$/H$_2$O$_2$ and 3.51 ± 0.25 mN in the 7th min by FeSO$_4$/ascorbic acid). In contrast to the untreated tissue, the tone was still at the level of 50 – 90% of the maximum contraction amplitude in the 30th min (Figs. 1A, 2A and 3A). To exclude the role of the reduced resting tone in the indomethacin induced increase of the contractile effect of H$_2$O$_2$, its action was also studied in isoprenaline (1 μmol/l) relaxed tissues. Under these conditions, the contraction amplitude and the time course of the H$_2$O$_2$ induced response did not differ significantly from the control (n = 8). NDGA (10 μmol/l) pretreatment did not affect the time course and amplitude of responses to H$_2$O$_2$, FeSO$_4$/H$_2$O$_2$ and FeSO$_4$/ascorbic acid on the intact trachea (Figs. 1A, 2A and 3A).

On denuded preparations, indomethacin pretreatment slightly but not significantly reduced the H$_2$O$_2$ (Fig. 1B) and FeSO$_4$/ascorbic acid (Fig. 3B) induced initial contraction amplitude and significantly ($P<0.005$) reduced the FeSO$_4$/H$_2$O$_2$ (Fig. 2B) induced ones. In contrast to the untreated tissues, the contractions in all three systems were long lasting and did not differ significantly in the 30th min from the maxima reached. NDGA pretreatment of denuded preparations significantly attenuated the initial contractile
phase of the \( \text{H}_2\text{O}_2 \) (Fig. 1B), \( \text{FeSO}_4/\text{H}_2\text{O}_2 \) (Fig. 2B) and the \( \text{FeSO}_4/\text{ascorbic acid} \) (Fig. 3B) effects. In the case of \( \text{H}_2\text{O}_2 \), the tone remained elevated even in the 30th min (Fig. 1B).

In contrast to the effects of the above-mentioned ROS generating systems, the initial tone of the intact trachea was not significantly altered by xanthine (10 \( \mu \text{mol/l} \)) with xanthine oxidase (2 mU/ml) even when the tissue was pretreated by indomethacin or NDGA (Fig. 4A). The amplitude of the biphasic effect of xanthine/xanthine oxidase system on denuded preparations was, however, reduced by indomethacin or NDGA pretreatment by about 50% (Fig. 4B).

DISCUSSION

The effect of long lasting (30 min) contact of ROS with the guinea pig trachea in the presence and absence of epithelium was analyzed under in vitro conditions. The ROS were administered either into the bath solution directly (\( \text{H}_2\text{O}_2 \)) or as ROS-generating systems: \( \text{FeSO}_4/\text{H}_2\text{O}_2 \) or \( \text{FeSO}_4/\text{ascorbic acid} \) for hydroxyl radical or xanthine/xanthine oxidase for superoxide anion radical (38–42).

As described earlier, there are species variations among the responses of airways to \( \text{H}_2\text{O}_2 \): contraction in bovine (21), cat (19) and horse (27) trachea, relaxation in rabbit (17) (also by hydroxyl radical (26)) and dog trachea (18) and biphasic response in guinea pig trachea (16, 20). On long lasting contact of tissues with \( \text{H}_2\text{O}_2 \), \( \text{FeSO}_4/\text{H}_2\text{O}_2 \) and \( \text{FeSO}_4/\text{ascorbic acid} \), the contraction not only faded progressively with time but also a significant relaxation appeared, suggesting a biphasic character of the response in the present study. In untreated preparations the contraction dominated in the action of \( \text{H}_2\text{O}_2 \) and the relaxation in the action of \( \text{FeSO}_4/\text{ascorbic acid} \) generating hydroxyl radical in the intact trachea. The response to the system \( \text{FeSO}_4/\text{H}_2\text{O}_2 \), which was intermediate between the two mentioned above, was probably due to the simultaneous presence of both hydroxyl radical and \( \text{H}_2\text{O}_2 \).

In contrast, the superoxide anion generating system xanthine/xanthine oxidase did not affect the intact trachea, although the presence of superoxide anion was confirmed spectrophotometrically by superoxide dismutase sensitive reduction of cytochrome c. It is known that the airway epithelium contains non-enzymatic low-molecular weight antioxidants (43, 44), high-molecular weight antioxidant enzymes (15, 45, 46) and a putative unidentified antioxidant system (47). Since removal of the epithelium unmasked the biphasic response of trachea to superoxide anion, it seems likely that the antioxidant mechanisms of the epithelium are sufficient to eliminate superoxide anion before it reaches smooth muscle cells and elicits changes of the tracheal tone.

The contractile phase preceding the relaxatory one, on the long lasting contact of ROS with the guinea pig trachea, suggests that the mechanisms associated with the sequence of processes leading to contraction have faster kinetics or a lower threshold than those associated with relaxation. It might be also due to a difference in activation pathways; e.g., contraction being caused by direct action and relaxation by indirect (epithelium-, nerve-, etc. mediated) effect. Fast inactivation of the contractile components is unlikely because in indomethacin pretreated tissues, ROS induced more or less sustained contractions.

The difference between the intensity of contraction and relaxation caused by \( \text{H}_2\text{O}_2 \) and hydroxyl radical generating systems in intact tissues is probably due to release of a smaller amount of the relaxing factors by \( \text{H}_2\text{O}_2 \) than by hydroxyl radical. This hypothesis is supported by a more pronounced increase of hydroxyl radical- than \( \text{H}_2\text{O}_2 \)-induced contraction by indomethacin.

Gao and Vanhoutte (20) and Rhoden and Barnes (16) described an increase in contractile response to \( \text{H}_2\text{O}_2 \) of the epithelium denuded guinea pig trachea. Our findings show augmentation not only of \( \text{H}_2\text{O}_2 \)- but also of hydroxyl radical-induced contractions on epithelium removal. Under such a condition, the increased tone was persistent and the relaxant component of the response was absent. Removal of the epithelium was found to cause partial loss of relaxant factors following \( \text{H}_2\text{O}_2 \) administration also in other animal species (17, 18). Deepithelisation of the trachea is presumably also removing superoxide anion-eliminating mechanisms of the epithelium, thus unmasking direct actions of superoxide anion on the smooth muscle. This is in agreement with the suggestion that the epithelium is the source of a factor(s) (48) responsible for reduction of the contractile effect of ROS and protection of smooth muscle from their action. Thus an impaired epithelium plays an important role in development of persisting high tone induced by ROS under pathological conditions of the airways.

Findings of Charette et al. (49) demonstrated that in isolated guinea pig trachea, prostanoid tone is dependent on cyclooxygenase (COX)-2 activity. Moreover, it was found that of the two isoforms, the constitutive COX-1 and the inducible COX-2, only the latter is activated by \( \text{H}_2\text{O}_2 \) (50, 51) and superoxide (50). The COX inhibitor indomethacin relaxed both the intact and epithelium-denuded trachea in the present as well as in the earlier experiments (20). The indomethacin induced relaxation of the intact trachea was significantly greater than that of the epithelium-denuded trachea. This difference suggests that both epithelial and smooth muscle cells continuously produce contractile COX metabolites, which prevail over the relaxant ones (52). In contrast to COX, the contractile lipooxygenase products almost exclusively originated from smooth muscle, because inhibition of lipoxygenase by NDGA reduced the
tone of both the intact and epithelium-denuded trachea to a similar degree. Rhoden and Barnes (16) on the epithelium denuded and Gao and Vanhoutte (20) on the intact and denuded guinea pig trachea observed attenuation of H$_2$O$_2$-induced contraction in the presence of indomethacin. In contrast, Gupta and Prasad (17) found significant attenuation of H$_2$O$_2$-induced relaxation, and Prasad and Gupta (26) described a reversal of the relaxant effect of hydroxyl radical to contraction on the rabbit trachea after indomethacin pretreatment. Our results are supporting those of Prasad and Gupta (26), because in intact tissue, indomethacin pretreatment changed the biphasic character of tracheal responses to H$_2$O$_2$ and hydroxyl radical into a monophasic prolonged and increased contraction. Although isoprenaline, NDGA and indomethacin relaxed the preparations roughly to the same extent, the difference among their actions against ROS on intact tissues (enhancement of contraction by indomethacin and no effect of NDGA and isoprenaline) suggests that enhancement of contractions is not due to the tone decreased by indomethacin. This suggested a more pronounced ROS-induced release or synthesis of relaxant than contracting prostanoids in intact tissue.

Indomethacin reduced the peak contraction but prolonged the contractions elicited by H$_2$O$_2$ and hydroxyl radical on epithelium denuded preparations, suggesting that smooth muscle itself produces both relaxant and contractile prostanoids upon stimulation by these ROS. Furthermore, the ability of NDGA to suppress the initial contraction of denuded preparations suggests that lipoxygenase products are also involved in this initial part of the smooth muscle response. In light of the difference between the characteristics of the indomethacin effect on contraction to H$_2$O$_2$ and hydroxyl radical in the presence and absence of epithelium, it can be assumed that epithelial cells mainly produce relaxant prostanoids, while smooth muscle cells produce both relaxant and contractile prostanoids.

Superoxide anion in the epithelium denuded trachea, however, activates the production of both contracting and relaxing prostanoids since indomethacin pretreatment attenuates both phases of the superoxide anion action. The fact that indomethacin did not unmask the response to xanthine/xanthine oxidase, suggests that it does not interact with the superoxide anion eliminating antioxidants produced by the epithelium.

Sporn and Peters-Golden (53) observed a slight activation of alveolar macrophages lipoxygenase by H$_2$O$_2$ in low concentrations and its inhibition by higher concentrations. On the other hand, Burghuber et al. (54, 55) and Gurtner et al. (56) observed an increased leukotriene production following oxidative stress of the lung (57). Our results suggest that lipoxygenase products of smooth muscle cells could participate at least partially in the mediation of the effects of ROS on airways.

In conclusion our results showed that hydrogen peroxide and hydroxyl radical induced changes in smooth muscle tone of the same tissue and of the same animal species were probably due to the closely related processes involving the arachidonic acid cascade. The time course and the action of ROS scavengers exclude the simple intracellular conversion of H$_2$O$_2$ to hydroxyl radical. The systems generating hydroxyl radical seem to be able to release more epithelium derived relaxatory prostanoids than H$_2$O$_2$. Thus the present study, along with the relevant data from the literature, suggests participation of metabolites of the arachidonic acid cascade in the mediation of the effects of ROS (Fig. 6). The lack of the action of superoxide in the presence of epithelium suggests that epithelium possesses high superoxide scavenging capacity.

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**Fig. 6.** Summarization of our suggestion on the possible effects of reactive oxygen species on arachidonic acid metabolites in the epithelium and smooth muscle of the guinea pig trachea. COX$_{cp}$: cyclooxygenase contractile products, COX$_{rp}$: cyclooxygenase relaxatory products, LO$_{cp}$: lipoxygenase contractile products, O$_2^·$: other contractile products, O$_2^-$: superoxide anion, H$_2$O$_2$: hydrogen peroxide, OH: hydroxyl radical.
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