Variations in the cellular proliferation of prolactin cells from late pregnancy to lactation in rats

José Carretero, Manuel Rubio, Enrique Blanco, Deborah J. Burks, José L. Torres, Elena Hernández, Pilar Bodego, José M. Riesco, Juan A. Juanes, and Ricardo Vázquez

Laboratorio de Neuroendocrinología, Instituto de Neurociencias de Castilla y León, Departamento de Anatomía e Histología Humanas, Facultad de Medicina, Universidad de Salamanca, Avda. Alfonso X El Sabio s/n, 37007 Salamanca, Spain

Summary. Lactation is a physiological process associated with hyperactivity of hypophyseal prolactin-producing cells. It is known that the percentage of these cells is increased during lactation, although there are discrepancies in the reports regarding the mechanisms responsible for increasing the number of prolactin cells. In order to analyse whether this increase is a result of previous proliferation, variations in the proliferation rate of prolactinpositive cells were determined from late pregnancy to lactation in adult female rats by means of observation of the immunohistochemical expression of PCNA as a marker of cellular proliferation. During late pregnancy, a very significant increase in the percentage of proliferating prolactin cells was observed in comparison to non-pregnant females in the proestrus phase (p < 0.01). Although the percentage of prolactin-positive cells after one week of lactation was higher than in non-lactating or in pregnant females (p < 0.01), the proliferation rate was lower than in the other groups studied. In sum, our results suggest that late pregnancy constitutes a preliminary proliferative phase preparatory to the ensuing lactation phase and that endocrine changes in late pregnancy involve the cellular proliferation of hypophyseal prolactin cells in order to prepare the gland for later demands and to prevent proliferative changes from occurring during lactation.

Key words: Prolactin cells – Cellular proliferation – Late pregnancy – Lactation

Introduction

Prolactin is a hypophyseal hormone involved in the regulation of lactation and its release is increased during this physiological process (Meites and Turner 1948; Meites et al. 1972; Cowie et al. 1980). Within the first days and weeks postpartum, basal prolactin levels remain elevated and suckling episodes trigger a rapid release of hypophyseal prolactin (Tyson and Friesen 1973; Noel et al. 1974). This increase in prolactin secretion is accompanied by a suckling-induced increase in hypophyseal prolactin mRNA levels (Lee et al. 1989).

Basal prolactin levels gradually increase throughout the course of pregnancy (Tyson and Friesen 1973; Rigg et al. 1977; Ben-David et al. 1973). This has been attributed to the stimulatory effect of estrogens on hypophyseal lactotrophs. When hypophyseal prolactin synthesis and secretion are stimulated the lactotroph population increases. It has been suggested that this increase could be due to the differentiation of somatotroph to lactotroph cells (Boockfor et al. 1987) or to the proliferation of lactotroph cells (Boockfor et al. 1987) or to the proliferation of lactotroph cells (Lloyd et al. 1975; Kalbermann et al. 1979; Perez et al. 1986). A gradual increase in the number of hypophyseal lactotrophs during pregnancy has been reported (Goluboff and Ezrin 1969; Scheithauer et al. 1990). However, the proliferative mechanisms involved in this increase remain obscure.

The aim of the present study was to determine whether cellular proliferation is involved in the increase in the percentage of prolactin cells during late pregnancy and lactation and to determine whether proliferation occurs during both late pregnancy and lactation.

Correspondence to: J. Carretero E-mail: jcar@usal.es



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Materials and methods

Animals. Fifteen female adult Sprage-Dawley rats (200 g b/w) were used and were kept under standard conditions ($22 \pm 2^{\circ}$ C, RH: $50 \pm 5\%$, 8.00 to 20.00 light hours), with water and food (Panlab[®] maintenance diet) ad libitum. Animals were handled (cleaning, handling, hygiene) according to the guidelines of the European Communities Council Directive ($\frac{86}{609}$ /EEC) and current Spanish legislation for the use and care of laboratory animals (BOE 67/8509-12,1998).

The rats were divided into 3 experimental groups (5 animals per group): (1) untreated rats in the proestrous phase, as determined by vaginal smears, were considered as normal and employed as controls; (2) rats sacrified after 1 week of suckling in their respective litters; (3) animals killed on day 19 of pregnancy.

Sacrifice of animals and sample processing. The animals were sacrificed by decapitation following anesthesia by Forene inhalation. The hypophyses were carefully dissected out and immediately fixed in a solution of 15% saturated pricric acid in 4% paraformaldehyde in 0.1 M phosphate buffer, pH 7.4, for 24 h. Then, they were dehydrated in ethanol, cleared with xylene, and embedded in paraffin in order to obtain coronal serial sections of 5 μ m thickness. These were placed on slides treated with gelatin-chrome alum and were then used for the inmunohistochemical study.

Immunohistochemistry. To study PCNA-positive cells and to determine the PCNA-Prolactin labelling index, a double labelling immunohistochemical method for PCNA and prolactin was developed. Endogenous peroxidase was blocked with H₂O₂ in methanol and non-specific reactions of the secondary antibody by incubation in normal goat serum (Dako, diluted 1:30). Sections were incubated overnight at 4°C with mouse anti-PCNA monoclonal antibody (PC 10, Dako, diluted 1:3000 in TBS). Biotinylated goat anti-mouse IgG (Dako, diluted 1:100) and Avidin-Biotinylated horseradish peroxidase complex (ABC kit, Dako, diluted 1:100) were successively applied at room temperature for 40 min and 30 min, respectively. The reaction was developed in freshly prepared 3,3'-DAB (0.025% in TRIS buffer containing 0.03% of H₂O₂). Following PCNA immunolabelling, the peroxidase-antiperoxidase (PAP) reaction was performed for the detection of prolactin, using as primary serum anti-prolactin rabbit serum at a dilution of 1:800, swine antirabbit serum (Dako, diluted 1:100), and rabbit-PAP complex (Dako, diluted 1:100). Preabsorption tests with Prolactin and tests substituting the specific serum by normal rabbit serum abolished the reaction. Using ELISA, the specificity of swine anti-rabbit IgG was lower than 1% for rat and mouse IgG and 100% for rabbit IgG. For the washes and dilutions of the sera, TRIS buffer (0.05 M, pH 7.4) containing 0.8% NaCl was used. The reaction was developed in freshly prepared 4-chloro-1naphthol $(1.7 \times 10^{-3} \text{ M in } 3\%$ absolute ethanol and TRIS-buffer containing 0.3% H₂O₂).

Prolactin- and PCNA-prolactin-immunoreactive cell quantification. Four thousand cells per animal were evaluated using a Leitz Dialux EB-20 microscope at a final magnification of 500×. The cells were randomly selected from different areas of the gland. The following parameters were determined: 1) PCNA-positive cells; 2) Prolactin-positive cells; 3) PCNA- and prolactin-positive cells (always calculated as percentages of the total number of cells analyzed). The percentage of PCNA- and prolactin-immunoreactive cells was also calculated from the total of prolactinimmunoreactive cells.

Statistical analysis. For each parameter evaluated, the values obtained were processed statistically and the differences

observed were compared using analysis of variance, accepting p values of <0.05 as significant for the Scheffé F test. Results are expressed as arithmetic means \pm standard error of the mean.

Results

Hypophyseal proliferation. Hypophyseal proliferation, determined as the percentage of cells with PCNA-immunoreactive nuclei, was low in females in proestrous (0.74 ± 0.05). In late pregnancy, a significant increase in cells undergoing proliferation was observed: $9.41 \pm 0.79\%$ of glandular cells were PCNA positive (p < 0.01 in comparison to nonpregnant females). In suckling females, the percentage of proliferating cells was similar to normal animals (0.55 ± 0.09 vs. 0.74 ± 0.05) and significantly lower (p < 0.01) than that observed in pregnant females.

Prolactin-positive cell proliferation. Prolactin-PCNApositive cells in females in the proestrous phase were 0.44 ± 0.01 %. This means that 1.46% of the prolactin cells were proliferating cells. In these animals 30.22 ± 0.28 % of the glandular cells were prolactin-positive.

Pregnancy was seen to be an important proliferationinducing agent in prolactin-positive cells. In the pregnant animals $4.00 \pm 0.51\%$ of all cells were prolactin-PCNApositive, and hence 14.06% of the prolactin cells were proliferating cells during late pregnancy. Although the



Fig. 1. Plot showing the mean values of the percentage of the percentage of PCNA-positive cells in the different groups studied.

percentage of prolactin-positive cells was lower than in proestrous females, the observed statistical differences were not significant $(28.44 \pm 0.90 \text{ vs. } 30.22 \pm 0.28)$.

The percentage of proliferating prolactin-positive cells in suckling females was very low, since $0.22 \pm 0.08\%$ were both prolactin- and PCNA-positive cells (p < 0.05 in relation to the proestrous animals and p < 0.01 in relation to the pregnant females). Thus, during suckling only 0.49% of prolactin-positive cells were undergoing proliferation.



Fig. 2. Plot showing the mean values of the percentage of prolactin-positive cells in the different groups studied.



Fig. 3. Plot showing the mean values of the percentage of PCNA- and prolactin-positive cells in the different groups studied.

Comparatively, the percentage of prolactin-immunoreactive cells was higher in suckling females than in the animals in proestrus (44.67 ± 1.38 vs. 30.22 ± 0.28 , p < 0.01) or late pregnancy (44.67 ± 1.38 vs. 28.44 ± 0.90 , p < 0.01).



Fig. 4. Micrographs showing the immunostain for PCNA (brown) and/or prolactin (dark blue) in proestrus female rats $(4a: \times 100, 4b: \times 300)$, pregnant female rats $(4c: \times 100, 4d: \times 300)$ and lactating female rats $(4e: \times 100, 4f: \times 300)$.

Discussion

It is conventionally accepted that the hypophyseal cellular proliferation rate is very low in adult animals (Pomerat 1941; Hunt 1943; Städtler et al. 1970; Stepién et al. 1978). Oishi et al. (1993) reported important variations related to the different phases of estrual cycle and lactotroph cells were found to show the highest proliferation rate of all types of hypophyseal cells. In agreement with the findings reported by Oishi and co-workers, our results demonstrate a low cellular proliferation in female rats during the proestrous phase.

The cellular proliferation of lactotroph cells has mainly been analysed following treatment with estradiol and dopamine antagonists or in tumor cells (Lloyd et al. 1975; Kalbermann et al. 1979; Pérez et al. 1986; Stefaneanu et al. 1992; Oishi et al. 1993; Carretero et al. 1995).

Except during postnatal development (Carbajo-Pérez y Watanabe 1990), the proliferation of lactotroph cells decreases progressively in relation to age (Takahashi et al. 1984). However, the proliferation of lactotroph cells is very important for the maintenance of total hypophyseal proliferation because 60.6% of proliferating cells in female rats are lactotroph cells (Oishi et al. 1993).

Although variations in the number of prolactin cells along pregnancy and lactation have been reported (Goluboff y Ezrin 1969; Amat and Muñoz-Barragán 1974; Scheithauer et al. 1990), very few studies using proliferation markers have been published (Kalbermann et al. 1979).

Kalbermann et al. (1979) reported a decrease in BrdU incorporation in the hypophysis at the end of pregnancy, which they explained as being a result of hyperprolactinemia. The present study – the first to use PCNA as a proliferation marker – demonstrates a significant increase in proliferating lactotroph cells during late pregnancy.

The discrepancies with the findings of Kalbermann could be due to the fact that PCNA is 5-fold more sensitive for the detection of hypophysial proliferating cells than BrdU (Oishi et al. 1993).

However, our results are consistent with the massive hyperplasia of lactotroph cells described in women by Scheithauer et al. (1990) and with the increase in mitosis in lactotrophs of gestating women reported by Stefaneanu et al. (1992).

In view of the elevated prolactin activity during lactation – probably due to the stimulating effect of oxytocin, TRH and VIP, a decrease in dopamine tonic inhibition and suckling stimulation (Matsuzaki et al. 1997) – it is clear that during lactation lactotroph cells must be numerous and hyperactive, as seen here. Nevertheless, this increase in the number of cells does not agree with the finding in our study of low proliferative activity during lactation. Therefore, the need for prolactin to be produced during post-partum lactation requires a previous preparative phase, which is achieved by high proliferative activity during late gestation, as demonstrated in this study. In sum, our results demonstrate that the increase in lactotroph cells observed during lactation is a consequence of cellular proliferation in late pregnancy and, without rejecting the possibility of the appearance of mammosomatotroph cells, suggest the existence of a preparatory proliferative phase of lactotroph cells prior to the demands for prolactin during lactation.

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