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## Human Macrophage Differentiation Involves an Interaction between Integrins and Fibronectin

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## Abstract

We have examined the role of integrins and extracellular matrix (ECM) proteins in macrophage differentiation of 1) human HL-60 myeloid leukemia cells induced by phorbol 12-myristate 13-acetate (PMA) and 2) human peripheral blood monocytes induced by either PMA or macrophage-colony stimulating factor (M-CSF). Increased  $\beta_1$  integrin and fibronectin (FN) gene expression was observed in PMA-treated HL-60 cells and PMA- or M-CSF-treated monocytes, even at a time preceding the manifestation of macrophage markers. Treated HL-60 cells and monocytes also released and deposited FN on the culture dishes. An HL-60 cell variant, HL-525, which is deficient in protein kinase C  $\beta$  (PKC $\beta$ ) and resistant to PMA-induced differentiation, failed to express FN after PMA treatment. Restoration of PKC $\beta$  resulted in PMA-induced FN gene expression and macrophage differentiation. The macrophage phenotype induced in HL-60 cells or monocytes was attenuated by anti- $\beta_1$  integrin or anti-FN MAbs. We suggest that macrophage differentiation involves activation of PKC and expression of specific integrins and ECM proteins. The stimulated cells, through their integrins, attach and spread on these substrates by binding to the deposited ECM proteins. This attachment and spreading in turn, through integrin signaling, leads to the macrophage phenotype.

## Introduction

The extracellular matrix <sup>1</sup>(ECM) is an intricate assembly of proteins that includes collagen, laminin, and fibronectin, among others (1). Cells interact with these proteins and with each other via specific receptors located on their surface. A major class of these receptors is the integrins, each of which is composed of two distinct  $\alpha$  and  $\beta$  transmembrane glycoprotein subunits that are noncovalently linked (2). The integrins are classified into families of receptors. For example, the  $\beta_1$  integrin family, also called very late after activation antigens, is implicated in cell adhesion to the ECM (2); a member of this family,  $\alpha_4\beta_1$ , is also involved in cell-cell interactions (3). The integrins bind to specific recognition sites on ECM proteins. One of these sites, which is present on fibronectin (FN), is composed of an Arg-Gly-Asp-Ser (RGDS) motif (4). Synthetic peptides containing RGDS have been found to promote cell adhesion when immobilized on suitable substrates and to inhibit cell adhesion to tissue culture dishes precoated with FN (5).

Macrophages adhere to, spread on, and engulf foreign particles, including microorganisms; adherence and spreading on foreign substrates (including tissue culture dishes) are considered to be hallmarks of macrophages. A number of ECM proteins have been shown to enhance the maturation of blood monocytes into macrophages (6–8). It is thus conceivable that adhesion molecules not only define macrophage characteristics but also participate in the process that leads to macrophage differentiation. We report here the role that specific adhesion molecules, FN in

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<sup>1</sup>Abbreviations: BSA, bovine serum albumin; ECM, extracellular matrix; FN, fibronectin; GAPDH, glyeraldehyde-3-phosphate dehydrogenase; GPRP, Gly-Pro-Arg-Pro; M-CSF, Macrophage-colony stimulating factor; PBS, phosphate buffered saline; PCR, polymerase chain reaction; PKC, protein kinase C; PMA, phorbol 12-myristate 13-acetate; RA, all *trans*-retinoic acid; RGDS, Arg-Gly-Asp-Ser; RT, reverse transcriptase.

particular, play in macrophage differentiation of human leukemia cells and peripheral blood monocytes.

## Results

**Manifestation of integrins and fibronectin during human macrophage differentiation.** To define the role specific integrins and FN play in macrophage differentiation, we initially examined their manifestation on the surface of viable human HL-60 myeloid leukemia cells and on human peripheral blood monocytes during differentiation induced by either PMA or M-CSF. Untreated HL-60 cells, whether cultured for 4 h or 2 d, exhibited some  $\beta_1$  integrin immunostaining and little or no FN immunostaining (Fig. 1). Treatment of these cells with 3 nM PMA for 4 h caused the majority of the cells to display more intense immunostaining for both antigens. Prolonging this treatment to 2 d, which causes the HL-60 cells to acquire a macrophage phenotype (9), resulted in a marked increase in  $\beta_1$  integrin immunostaining and a lesser increase in FN immunostaining scattered throughout the surface of the cells (Fig. 1). In contrast, treatment of HL-60 cells for up to 2 d with 240 U/ml M-CSF, which does not evoke a macrophage phenotype in these cells (10), failed to cause an increase in either  $\beta_1$  integrin or FN immunostaining.

We also examined the immunostaining pattern of the  $\alpha_5$  antigen, which associates with  $\beta_1$  integrin and binds FN through its RGDS motif (2). The pattern and intensity of  $\alpha_5$  immunostaining in untreated and PMA-treated HL-60 cells corresponded to that of  $\beta_1$  immunostaining.

Because integrins belonging to other families may also be involved in macrophage differentiation, we examined the immunostaining pattern of  $\alpha_v\beta_3$  integrin, which, similar to  $\alpha_5\beta_1$ , binds FN

through its RGDS motif (2, 11). For comparison, we included a MAb to the  $\beta_4$  integrin, which binds to laminin but not to FN (12). Untreated HL-60 cells exhibited little or no immunostaining with the  $\alpha_v\beta_3$  MAb. After treatment for 2 d with PMA, 50% of the cells reacted with the MAb; however, the immunofluorescence was less intense than that observed in PMA-treated cells reacting with the anti- $\beta_1$  MAb. In contrast, untreated HL-60 cells showed reactivity with the anti- $\beta_4$  MAb, but the reactivity decreased markedly after PMA treatment.

Freshly isolated peripheral blood monocytes exhibited weak immunostaining for  $\beta_1$  integrin and FN. After two days in culture, a fraction of the cells displayed some immunostaining for these antigens (Fig. 2). Treatment of the isolated monocytes with either 3 nM PMA or 240 U/ml M-CSF for 4 h caused a majority of cells to display  $\beta_1$  integrin and FN immunostaining, which became intense after 2 d (Fig. 2). These 2 d treated cells also exhibited a typical macrophage cell spreading (Fig. 2).

A noteworthy observation was the abundance of speckled FN immunostaining in the intercellular spaces of the dishes containing activated monocytes or HL-60 macrophages, but not in those containing control cells (Figs. 1 and 2). Limited, scattered intercellular  $\beta_1$  integrin immunostaining was also observed, but this staining was, in large part, restricted to the vicinity of the adherent macrophages (Figs. 1 and 2). Little or no immunostaining with the isotypic control antibodies was observed in untreated cells or in differentiated monocytes or HL-60 cells.

These results indicate that acquisition of a macrophage phenotype in monocytes and HL-60

leukemia cells is associated with the cell surface manifestation of specific integrins and FN, with the latter being released and deposited on the culture dishes. Moreover, integrin and FN immunostaining was detected within 4 h after treatment with the inducer, a time frame which precedes the expression of the macrophage phenotype.

To provide evidence that protein kinase C (PKC) is involved not only in PMA- and M-CSF-induced macrophage differentiation (9, 13), but also in the increased levels of the  $\beta_1$  integrin and FN antigens, we examined the effect of H-7, an inhibitor of PKC, PKA, and PKG and HA-1004 (an inhibitor of PKA and PKG but not PKC) (14, 15). In treated HL-60 cells and monocytes, 20  $\mu$ M H-7 (but not 100  $\mu$ M HA-1004) decreased by about 70% the number of cells exhibiting macrophage markers, as well as the  $\beta_1$  integrin and FN immunostaining. In control HL-60 cells or monocytes, treatment with H-7 or HA-1004 failed to evoke such markers or to affect  $\beta_1$  integrin and FN immunostaining.

**Inhibition of PMA-induced macrophage differentiation in HL-60 cells.** We tested the RGDS peptide and MAbs to FN and FN-binding integrins for the ability to alter macrophage differentiation in HL-60 cells. We assumed that such MAbs or the peptide would block the interaction of these integrins with the FN deposited on the culture dishes by the PMA-treated HL-60 cells, with its RGDS motif in particular. If this interaction is essential for PMA-induced macrophage differentiation, then the presence of these antibodies or the RGDS peptide should inhibit such a differentiation in the HL-60 cells. Our results indicated that the anti-FN, anti- $\beta_1$ , and anti- $\alpha_5$  MAbs and the RGDS peptide attenuated the manifestation of PMA-evoked



macrophage markers such as cell adherence and spreading, staining for non-specific esterase activity, and phagocytosis (Table 1). Moreover, the anti-FN, anti- $\beta_1$  integrin, and anti- $\alpha_5$  integrin antibodies and the exogenous RGDS peptide diminished the PMA-evoked reduction in the number of cells (Table 1), which to a large degree is due to apoptosis (16). We also tested the MABs to the  $\alpha_v\beta_3$  and  $\beta_4$  integrins for their ability to inhibit cell adherence and spreading, and phagocytosis. The anti- $\alpha_v\beta_3$  MAB caused a reduction of 25–30% in the expression of these markers in the PMA-treated cells. In contrast, the anti- $\beta_4$  MAB failed to affect these markers in such treated cells. Control antibodies and the control peptide Gly-Pro-Arg-Pro (GPRP) had no effect on the expression of the PMA-induced markers or on the reduction in the number of cells (Table 1). The MABs or the peptides also had little or no effect on the replication or expression of maturation markers in control HL-60 cells (Table 1). These results indicate that PMA-induced macrophage differentiation in HL-60 cells involves an interaction between appropriate cell surface integrins and the RGDS motif present on FN, which is released and deposited on the surface of the culture dishes by the induced HL-60 cells.

**Restoration of FN immunostaining in PMA-treated HL-525 cells.** We studied cells from two HL-60 cell variants, HL-525 and HL-534 (17). Unlike the parental cells, these cells show diminished PKC  $\beta$  gene expression and are resistant to PMA-induced macrophage differentiation (17, 18). Relative to the parental HL-60 cells, HL-525 cells have a strikingly higher intensity of  $\beta_1$  and  $\alpha_5$  integrin immunofluorescence, and HL-534 cells have a much lower, barely visible, immunostaining for these antigens. In both variants, treatment with 30 nM PMA for up to 2 d caused a limited increase in  $\beta_1$  and  $\alpha_5$  immunostaining. Untreated HL-525 and HL-534 cells or

such cells treated with PMA failed to show FN immunostaining. Untreated and PMA-treated cells also failed to react with the anti- $\alpha_v\beta_3$  and anti- $\beta_4$  MAbs.

We have previously demonstrated that reestablishment of a functional PKC $\beta$  in HL-525 cells (via transfection with vectors containing PKC $\beta$  cDNA) restored their susceptibility to PMA-induced differentiation (9). The analysis of two PMA-treated transfectants (HL-525/ $\beta_1$ -C and HL-525/ $\beta_1$ -F) revealed that the same fraction of cells that differentiated also regained FN immunostaining patterns and intensities like those of the corresponding PMA-treated HL-60 cells (Table 2). Since these transfected cells have a tendency to revert to the PMA-resistant phenotype (9), a sizable fraction of the transfected HL-525 cells were not susceptible to PMA-induced differentiation and FN immunostaining. No restoration of FN immunostaining was observed in HL-525 cells transfected with the control vector (Table 2). Another way to restore PKC $\beta$  gene expression and PMA susceptibility HL-525 cells is by pretreatment with all *trans*-retinoic acid (RA (19). Treatment with RA followed by PMA caused FN immunostaining patterns and intensities similar to those of PMA-treated HL-60 cells (Table 2). Treatment of HL-525 cells with either RA or PMA alone failed to induce FN immunostaining or macrophage differentiation (Table 2). These results implicate PKC $\beta$  in PMA-induced manifestation of FN in the HL-60 cell system.

#### **Restoration of susceptibility to macrophage differentiation in HL-525 cells by exogenous FN.**

We cultured HL-525 and HL-534 cells on dishes precoated with human FN, which resulted in a time-dependent increase in markers such as adherence and spreading, non-specific esterase

activity, and phagocytosis in HL-525 cells, but not in HL-534 cells. After two days, more than 65% of the HL-525 cells had acquired a macrophage phenotype (Fig. 3 and Table 3). PMA treatment of HL-525 cells cultured on FN-precoated dishes caused a further increase in this percentage, to about 85%. No significant cell attachment and spreading was detected on dishes precoated with bovine serum albumin (BSA), polylysine, or other ECM proteins such as laminin, type I collagen, or type IV collagen.

To substantiate the involvement of  $\beta_1$  integrins and RGDS in FN-induced macrophage differentiation of HL-525 cells, we tested the effect of the anti- $\beta_1$  integrin MAb and exogenous RGDS peptide. For comparison, we included the anti-FN MAb. Our results indicated HL-525 macrophage differentiation on human FN-precoated dishes was inhibited in the presence of anti-FN, anti- $\beta_1$  integrin MAb, and exogenous RGDS, but not in the presence of control reagents (Table 3). These results further support our supposition that acquisition of a macrophage phenotype involves the binding of specific integrins to the appropriate recognition site on ECM proteins such as FN.

Unlike PMA-induced differentiation in HL-60 cells, FN-induced macrophage differentiation of HL-525 cells was not affected by either the presence of 50  $\mu$ M H-7 or 200  $\mu$ M HA-1004. H-7 and HA-1004 at higher doses evoked up to 30% cell death, as determined by trypan blue staining. These results imply that PKC does not play a critical role in the steps leading to HL-525 macrophage differentiation that follow the interaction between specific integrins and FN.

**Induction of FN-induced HL-60 cell attachment in the presence of  $\text{MnCl}_2$ .** No significant cell adherence and spreading was observed on any of the precoated dishes when untreated HL-60 cells were used, which we attribute to a low level of inactive FN-binding integrins (20). To test for this possibility, we incubated HL-60 cells on FN-precoated dishes in the absence and presence of  $\text{MnCl}_2$ , which activates integrin binding to FN (21, 22). For comparison we included HL-525 and HL-534 cells. After 1 h in the absence of  $\text{MnCl}_2$ , the attachment of HL-60 and HL-534 cells was <1% and that of HL-525 cells about 60%. Incubation for 1 h with 1 mM  $\text{MnCl}_2$  resulted in about 5% attachment of HL-534 cells, which exhibit little or no  $\beta_1$  and  $\alpha_5$  antigens; 40% attachment of HL-60 cells, which exhibit higher levels of these FN-binding integrins; and >90% attachment of HL-525 cells, which exhibit an abundance of these integrins. Incubation of HL-60, HL525, and HL-534 cells with  $\text{MnCl}_2$  for longer time periods (up to 24 h) resulted in cytotoxicity. These results implicate the need for both the presence and activation of FN-binding integrins in HL-60 cell attachment to FN.

**Expression of the  $\beta_1$  integrin and FN genes.** We analyzed the steady-state levels of  $\beta_1$  integrin and FN mRNA in HL-60 and HL-525 cells. The  $\beta_1$  integrin mRNA level of untreated HL-525 cells was higher than that of untreated HL-60 cells. PMA treatment of HL-60 cells increased the mRNA level in a time-dependent manner, with the steady-state level of  $\beta_1$  integrin mRNA already elevated about twofold at 4 h. An attempt to assess FN mRNA by standard hybridization of a FN probe to total RNA or polyA-enriched RNA yielded inconsistent results. To circumvent this problem, we introduced semiquantitative RT-PCR analysis. Using this approach with three different sets of primers (including one that codes for RGDS), we observed FN-specific

amplification products in untreated HL-60 cells and elevated levels 4 h after PMA treatment (Fig. 4). These products were either absent or detected at low levels in untreated and PMA-treated HL-525 cells (Fig. 4). In contrast, PMA-induced FN-specific amplification products were detected in HL-525 cells pretreated with RA or transfected with PKC $\beta$  cDNA, but not in HL-525 cells treated with RA alone or cells transfected with the control vector (Fig. 4). These results implicate gene expression as a major contributing factor in determining the level of  $\beta_1$  integrins and FN in HL-60 and HL-525 cells.

#### **Inhibition of macrophage differentiation in monocytes by anti- $\beta_1$ integrin or anti-FN MAb.**

To assure that the involvement of an interaction between FN and  $\beta_1$  integrins is not restricted to macrophage differentiation in the HL-60 cell system, we included peripheral blood monocytes in our studies. These cells, which are at a maturation stage close to macrophages, can acquire a macrophage phenotype after treatment with either PMA or M-CSF (23, 24). Our results indicated that after 2 d in culture, about 25% of the untreated adherent monocytes exhibited the spreading typical of a macrophage. Two days of treatment of monocytes with either PMA or M-CSF caused more than a twofold increase in the percentage of these macrophages. This treatment, however, failed to markedly alter the fraction of cells exhibiting phagocytosis (Table 4), because most macrophage markers also characterize monocytes. The anti-FN and anti- $\beta_1$  integrin MAbs were each able to reduce the fraction of spread cells in the PMA- and the M-CSF-treated monocytes; anti-FN MAb also reduced the fraction of spread cells in the control (Table 4). These two MAbs were each also able to reduce the fraction of cells exhibiting phagocytosis in both the untreated and the treated monocytes (Table 4). These results implicate an interaction

between  $\beta_1$  integrins and FN in PMA or M-CSF-induced macrophage differentiation in monocytes.

## Discussion

We propose that induction and interaction of cellular receptors such as integrins with specific ECM proteins (which are secreted by the cells and deposited on foreign substrates) are steps in a process that brings about macrophage differentiation in appropriate progenitor cells. We focused our attention on the  $\beta_1$  integrin family of receptors and fibronectin, because these adhesion proteins have been reported to be present in blood macrophages (25,26). We used HL-60 cells and peripheral blood monocytes for these studies because they can acquire a macrophage phenotype upon treatment with specific stimuli (9,23,24,27).

In our initial experiments, we determined the cell surface level of  $\beta_1$  integrin and FN antigens in HL-60 cells and monocytes by immunostaining with specific MAbs. PMA treatment of HL-60 cells and PMA or M-CSF treatment of monocytes resulted in an increased level of these antigens in a time-dependent manner. Moreover, the levels of FN and  $\beta_1$  integrin antigens were already increased at 4 h after treatment with the inducers, a time frame that precedes the acquisition of the mature phenotype (23, 28–30). In the case of FN, increased expression was associated with its secretion and deposition on the dishes.

Additional support for an association between macrophage differentiation and FN came from our studies with HL-525 cells, which are deficient in PKC $\beta$  and resistant to PMA-induced macrophage differentiation (18). These cells, whether treated with the macrophage inducer or not, failed to exhibit FN. Yet, FN immunostaining was found after restoration of PMA-induced macrophage differentiation by either transfection with PKC $\beta$  cDNA (9) or by pretreatment with

RA, which also increases the expression of the PKC $\beta$  gene (19). Analysis of FN and  $\beta_1$  integrin RNA steady-state levels by RT-PCR and Northern blotting, respectively, implicated gene expression as a major contributing factor in determining the level of these antigens in HL-60 and HL-525 cells. In this context, note that  $\beta_1$  integrin RNA transcripts were reported in M-CSF-treated human monocytes and in a number of normal and leukemic human blood cells, including HL-60 cells (26, 31).

Proof that increased levels of FN and appropriate FN binding integrins are intimately involved in the induction process itself came from our two experimental approaches. In one approach, we tested the ability of anti- $\beta_1$ -integrin and anti-FN MAbs to block macrophage differentiation in HL-60 cells and monocytes. We assumed that these molecules would prevent the interaction of  $\beta_1$  integrins with the deposited FN. If this interaction is involved in macrophage differentiation, then the presence of either antibody should inhibit such differentiation. Our studies indicate that indeed both the anti- $\beta_1$ -integrin and anti-FN MAbs were each able to attenuate macrophage differentiation in monocyte and HL-60 cells. Our results also showed such an attenuation in HL-60 cells when either anti- $\alpha_5$  integrin MAb or RGDS peptide [the  $\alpha_5\beta_1$  integrin binding site on FN (4)] was used. Because other integrins might also be involved in the interaction with FN (2), we included a MAb to  $\alpha_v\beta_3$ , an integrin that is present in cultured human macrophages (31) and that also binds FN through its RGDS motif (11). This antibody, which had limited reactivity with PMA-treated HL-60 cells, inhibited the expression of macrophage markers in these treated cells, but to a lesser degree than the anti- $\beta_1$  or  $\alpha_5$  MAbs. These results indicate that induction of macrophage differentiation involves the production and interaction of FN binding integrins



with FN, which is produced, released, and deposited on suitable substrates, most likely with its RGDS motif.

In another type of experiment, we used HL-525 cells, which do not express the PKC $\beta$  and FN genes. We have shown that when these cells are either transfected with PKC $\beta$  cDNA (9) or pretreated with RA (19), they regain PKC $\beta$  expression and susceptibility to PMA-induced differentiation, as well as the expression of FN. Also, culturing HL-525 cells (which express a higher level of the  $\alpha_5\beta_1$  integrin than HL-60 cells) on FN-precoated dishes caused their differentiation to macrophages even in the absence of PMA. No such differentiation was observed with dishes precoated with other ECM proteins such as laminin or type I or type IV collagens. The FN-induced differentiation was also inhibited by the anti-FN and anti- $\beta_1$  integrin MAbs and by RGDS. These studies further implicate FN and its interaction with suitable integrins in the attainment of a macrophage phenotype.

Our results are also consistent with the involvement of PKC in the manifestation of FN, but not in the steps that follow the interaction of FN with its receptor molecules. This conclusion is based on the following: a) PMA, an activator of PKC, induced the expression of the FN gene in both the HL-60 cells and monocytes; b) transfection of the HL-525 cells with PKC $\beta$  cDNA or pretreatment with RA (an inducer of PKC $\beta$ ) restored the PMA-evoked manifestation of FN and macrophage differentiation; c) H-7, but not HA-1004, prevented the appearance of FN and macrophage differentiation in HL-60 cells or monocytes; and d) neither H-7 nor HA-1004 inhibited FN-induced macrophage differentiation in HL-525 cells.

We propose that macrophage differentiation in human progenitor cells induced by PMA or M-CSF involves the activation of PKC, phosphorylation of a variety of proteins, and induction of appropriate signal transduction steps (9, 32-34). These events lead to the expression of genes that code for the appropriate integrins including  $\alpha_5\beta_1$  and ECM proteins, including FN, with the latter being produced, released, and deposited on foreign substrates. The stimulated cells, through their activated integrins, will attach and spread on these substrates by binding to specific motifs on the deposited FN and related ECM proteins. This attachment and spreading would in turn through integrin signaling lead to the activation of pertinent tyrosine kinase(s) and the expression of genes involved in the manifestation of the macrophage phenotype (35-40).

## Materials and Methods

**Reagents.** Isotypic controls (IgG<sub>1</sub>, IgG<sub>2a</sub>, and IgG<sub>2b</sub>), murine monoclonal antibodies (MAbs) to human fibronectin (FN-15, IgG<sub>1</sub>), an  $\alpha$ -naphthyl acetate esterase assay kit, RGDS and GPRP peptides, RA, and Ficoll-Hypaque were purchased from Sigma Chemical Co. (St. Louis, MO). MAbs to the human  $\beta_1$  chain integrin, CD<sub>29</sub> (K20, IgG<sub>2a</sub>); and human  $\alpha_5$  chain integrin, CD<sub>49e</sub> (SAM1, IgG<sub>2b</sub>) were purchased from Immunotech (Westbrook, ME). Indocarbocyanine-conjugated anti-murine goat immunoglobulin (CY3<sup>TM</sup>) was purchased from Jackson ImmunoResearch Lab, Inc., (West Grove, PA), and the MAb to the human  $\alpha_v\beta_3$  integrin, CD<sub>51</sub>/CD<sub>61</sub> MAb (23C<sub>6</sub>, IgG<sub>1</sub>) from Pharmingen (San Diego, CA). Anti-human  $\beta_4$  integrin MAb was kindly provided by Dr. S. Kennel (Oak Ridge National Laboratory). M-CSF was purchased from Biosource International (Camarillo, CA), and plates precoated with either mouse laminin, collagen type I, or collagen type IV from Becton Dickinson (Bedford, MA).

**Cells and Cell Culture.** The human myeloid HL-60 leukemia cell line was originally obtained from R.C. Gallo (National Cancer Institute). The HL-525 and HL-534 cells (17, 18), as well as the HL-525 cells transfected with either PKC $\beta_1$  cDNA (HL-525/ $\beta$ I-C and HL-525/ $\beta$ I-F) or control vector (HL-525/neo), were established in our laboratory (9). Monocytes were obtained from heparinized whole human venous blood and separated by Ficoll-Hypaque density gradient (1.077 g/ml) centrifugation as previously described (41). The cells were incubated in tissue culture plates with RPMI 1640 medium supplemented with 15% heat-inactivated fetal calf serum (Intergen Co., NY), 100  $\mu$ g/ml penicillin-streptomycin, and 2 mM L-glutamine (Life Technologies, Inc., Grand Island, NY) in a humidified atmosphere containing 8% CO<sub>2</sub> at 37°C.

**Differentiation markers.** To determine the percentage of adherent and spread cells, we inoculated  $(2.5-5) \times 10^5$  cells in 0.5 ml of medium into each well of a 24-well tissue culture plate in the presence or absence of PMA or M-CSF. For some experiments, we precoated the surface of the wells with either FN or BSA by overnight incubation at room temperature with 0.5 ml of phosphate buffered saline (PBS) solution containing 20  $\mu$ g protein/ml. The nonspecific sites were blocked with 1% BSA in PBS for 30 min. The wells were then washed with 3 mM  $MnCl_2$ , inoculated with the cells, and incubated for different time intervals. The percentage of cell attachment and cell spreading was determined as previously described (42). The fraction of attached cells was up to 20% higher than the percentage of attached cells with apparent spreading. Nonspecific esterase activity was determined by using the  $\alpha$ -naphthyl acetate esterase assay kit as described by the manufacturer. Phagocytosis was determined as described previously (9) by the ability of cells to ingest sterilized and opsonized 1.7- $\mu$ m (diameter) Fluoresbrite beads (Polysciences Inc., Warrington, PA). Cells were considered positive if they engulfed  $\geq 20$  beads per cell. To examine the blocking effect of MAbs or peptides on differentiation induction, we incubated the cells with the dialyzed MAb or the peptide for 20 min prior to, as well as during, the 2-d treatment with the inducers.

**Immunofluorescence.** The immunostaining procedures were carried out at 4°C using either 96-microwell plates or tissue culture chamber slides (Nunc, Inc., Naperville, IL). The cells were washed twice with PBSA (PBS containing 1% BSA and 0.1%  $NaN_3$ ) and were incubated for 45 min with the appropriate primary MAb under saturating conditions. The cells were then washed again twice with PBSA and incubated for an additional 45 min with the secondary antibody

CY3<sup>TM</sup>. After an additional wash with PBSA, the slides were mounted with phosphate-buffered Gelvatol<sup>TM</sup> (Becton Dickinson, Sunnyvale, CA). Fluorescence was examined using a MAC Digital Confocal microscope.

**RT-PCR Analysis.** RNA was purified by centrifugation through a CsCl cushion as previously described (43). cDNA was synthesized from total cellular RNA using SuperScript<sup>TM</sup> II reverse transcriptase (GibcoBRL) and the conditions recommended by the supplier. The reverse transcriptase (RT) reaction used 2 µg of total RNA and either 100 ng of oligo(dT) primer or 2 pmol of a gene-specific primer. Polymerase chain reaction (PCR) amplification used the *Tfi* polymerase (Stratagene) and conditions recommended by the supplier. The FN template primers, F1F/F2R (nucleotides [nt] 3945–3966 and 4325–4346; 396-bp product) and F5F/F6R (nt 3981–4001; 746-bp product) were derived from the human sequence (Genbank accession number X02761). The combination of primer F1F and F6R resulted in a 782-bp PCR product. The template primers for human glyceraldehyde-3-phosphate dehydrogenase (GAPDH), G1F/G2R (nt 713–734; 715-bp product), were derived from the human sequence (Genbank accession number X01677). One set of cycle parameters were used for all primers (denaturation at 94°C, 50; annealing at 63°C, 1 min; extension at 73°C, 1 min) with the total number of cycles (25–40) tailored to the specific primer pair. For all reactions, various amounts of the RT reaction were used to insure correspondence between the amount of amplified product and the input cDNA. For the FN amplification reactions, at least three independent primers pairs were used for each set of reverse transcriptase products to validate the amplification pattern.

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Table 1. Inhibition of PMA-induced macrophage differentiation in HL-60 cells by anti-FN, anti- $\beta_1$  integrin, or anti- $\alpha_5$  integrin MABs or by RGDS

Inhibitor	Number of cells ( $10^3$ /ml)		Adherent and spread cells (%)		Cells showing nonspecific esterase activity (%)		Phagocytizing cells (%)	
	-	+PMA	-	+PMA	-	+PMA	-	+PMA
Control	8.0 $\pm$ 0.3	2.6 $\pm$ 0.3	$\leq 1$	91 $\pm$ 7	$\leq 3$	68 $\pm$ 5	$\leq 3$	83 $\pm$ 9
Antibodies								
Anti-FN	7.3 $\pm$ 0.5	4.4 $\pm$ 0.3	$\leq 1$	17 $\pm$ 7	3 $\pm$ 2	18 $\pm$ 2	8 $\pm$ 4	27 $\pm$ 11
Anti- $\beta_1$	7.6 $\pm$ 0.1	3.8 $\pm$ 0.3	$\leq 1$	35 $\pm$ 4	$\leq 3$	34 $\pm$ 3	5 $\pm$ 1	33 $\pm$ 5
Anti- $\alpha_5$	7.2 $\pm$ 0.2	4.1 $\pm$ 0.3	$\leq 1$	32 $\pm$ 7	NT	NT	4 $\pm$ 1	38 $\pm$ 6
IgG	7.5 $\pm$ 0.4	2.5 $\pm$ 0.4	$\leq 1$	87 $\pm$ 4	$\leq 3$	65 $\pm$ 6	3 $\pm$ 1	84 $\pm$ 11
Peptides								
RGDS	7.1 $\pm$ 0.4	3.5 $\pm$ 0.1	$\leq 1$	45 $\pm$ 10	$\leq 3$	40 $\pm$ 5	$\leq 3$	42 $\pm$ 5
GPRP	7.3 $\pm$ 0.2	2.9 $\pm$ 0.2	$\leq 1$	88 $\pm$ 8	$\leq 3$	76 $\pm$ 1	$\leq 3$	73 $\pm$ 8

The cells were incubated for 2 d with 3 nM PMA in the presence or in the absence of the antibodies or peptides: 70  $\mu$ g/ml anti-FN, anti- $\beta_1$  or anti- $\alpha_5$  MoAb (or isotypic control MAb, IgG) or 700  $\mu$ g/ml RGDS peptide (or control peptide, GPRP). The results represent the mean  $\pm$  SD of 3-8 independent experiments. NT, not tested.

Table 2. Association between acquisition of a PMA-induced macrophage phenotype and induction of FN immunostaining in HL-60 and HL-525 cells

Treatment		Adherent and spread cells (%)	Cells reactive with anti-FN MAb (%)	IgG* (%)
HL-60				
2 d control		<1	<1	<1
2 d PMA		87±5	77±4	7±4
HL-525				
2 d control		<1	<1	3±1
2 d PMA		<1	<1	4±2
HL-525/ <sup>NEO</sup>				
2 d control		<1	<1	5±3
2 d PMA		<1	<1	3±1
HL-525/ $\beta_1$ -C				
2 d control		<1	<1	<1
2 d PMA		32±7	28±9	7±5
HL-525/ $\beta_1$ -F				
2 d control		<1	<1	8±3
2 d PMA		45±7	40±9	5±2
HL-525				
<u>3 d</u>	<u>2 d</u>			
control	control	<1	<1	2±1
ATRA	control	<1	<1	4±3
control	PMA	<1	4±2	9±5
ATRA	PMA	62±10	57±3	11±2

HL-60 cells were treated with 3 nM PMA while HL-525 cells and the transfectant with 30 nM PMA. The concentration of RA was 1  $\mu$ M. The results represent the means  $\pm$  SD of 2-6 independent experiments.

\*IgG column represents results obtained with mouse IgG<sub>2</sub>  $\beta$  antibody, which was used as a control for the anti-FN MAb.

Table 3. Inhibition of human FN-induced macrophage differentiation in HL-525 cells by anti-FN or anti- $\beta_1$  integrin MAb or by RGDS

Inhibitor	Number of cells ( $10^5$ /ml)		Adherent and spread cells (%)		Cells showing nonspecific esterase activity (%)		Phagocytizing cells (%)	
	BSA	FN	BSA	FN	BSA	FN	BSA	FN
Control	8.2 $\pm$ 0.5	3.3 $\pm$ 0.6	$\leq 1$	70 $\pm$ 10	2 $\pm$ 1	65 $\pm$ 1	2 $\pm$ 1	76 $\pm$ 4
Antibodies								
Anti-FN	7.3 $\pm$ 0.7	4.0 $\pm$ 0.7	3 $\pm$ 1	29 $\pm$ 3	2 $\pm$ 1	22 $\pm$ 12	4 $\pm$ 1	25 $\pm$ 16
Anti- $\beta_1$	7.5 $\pm$ 0.9	3.9 $\pm$ 0.2	3 $\pm$ 2	34 $\pm$ 2	4 $\pm$ 1	35 $\pm$ 13	5 $\pm$ 3	26 $\pm$ 12
IgG	7.8 $\pm$ 0.4	3.4 $\pm$ 0.3	3 $\pm$ 1	73 $\pm$ 9	2 $\pm$ 1	62 $\pm$ 7	3 $\pm$ 2	84 $\pm$ 7
Peptides								
RGDS	7.8 $\pm$ 0.3	4.3 $\pm$ 0.5	2 $\pm$ 1	23 $\pm$ 12	3 $\pm$ 1	15 $\pm$ 10	3 $\pm$ 2	30 $\pm$ 15
GPRP	7.7 $\pm$ 0.3	3.2 $\pm$ 0.1	$\leq 1$	70 $\pm$ 12	$\leq 1$	60 $\pm$ 15	3 $\pm$ 3	78 $\pm$ 5

Cells were incubated for 2 d on the BSA- or FN-coated wells in the presence or in the absence of the antibodies or peptides: 70  $\mu$ g/ml anti-FN or anti- $\beta_1$  MAb (or isotypic control, IgG) or 700  $\mu$ g/ml RGDS peptide (or control peptide, GPRP). The results are the mean  $\pm$  SD of 3-5 independent experiments.

Table 4. Inhibition of PMA- or M-CSF-induced macrophage differentiation in peripheral blood monocytes by either anti-FN or anti- $\beta_1$  integrin MAb

	Adherent and spread cells (%)			Phagocytizing cells (%)		
	-	PMA	M-CSF	-	PMA	M-CSF
Control	25 $\pm$ 10	70 $\pm$ 14	53 $\pm$ 6	60 $\pm$ 5	75 $\pm$ 5	64 $\pm$ 3
Antibodies						
Anti-FN	8 $\pm$ 2	15 $\pm$ 7	26 $\pm$ 3	41 $\pm$ 5	39 $\pm$ 4	33 $\pm$ 2
Anti- $\beta_1$	15 $\pm$ 7	30 $\pm$ 12	19 $\pm$ 3	43 $\pm$ 7	35 $\pm$ 2	46 $\pm$ 5
IgG	25 $\pm$ 12	66 $\pm$ 14	56 $\pm$ 4	63 $\pm$ 9	73 $\pm$ 3	60 $\pm$ 8

The monocytes obtained from three individuals were either treated or untreated for 2 d with 3 nM PMA or 240 U/ml M-CSF in the presence or in the absence of antibodies or peptides: 70  $\mu$ g/ml anti-FN or anti- $\beta_1$  MAb (or isotypic control, IgG). The results are the mean  $\pm$  SD 3-5 independent experiments.

## Figure Legends

*Figure 1* Manifestation of the  $\beta_1$  integrin and FN antigens on the surface of untreated and PMA-treated HL-60 cells. Cells were either incubated in the absence or the presence of 3 nM PMA and were then reacted with the MAb.

*Figure 2* Manifestation of the  $\beta_1$  integrin and FN antigens on the surface of untreated or either PMA or M-CSF-treated monocytes. Cells were either incubated for 48 h in the absence or the presence of 3 nM PMA or 240 U/ml M-CSF.

*Figure 3* Attachment and spreading of HL-525 cells incubated in tissue culture dishes precoated for 48 h with either BSA (A) or FN (B). The pattern of FN (C) on the precoated dishes in the absence of cells was visualized after immunostaining with anti-FN MAb.

*Figure 4* RT-PCR analysis of FN mRNA levels in PMA-treated HL-60 cells (A), RA/PMA-treated HL-525 cells (B), or PKC  $\beta$ -transfected HL-525 cells (C). HL-60 cells were treated with 3 nM PMA; HL-525 cells with 30 nM PMA and/or 1  $\mu$ M RA; and PKC  $\beta$ -transfected HL-525 cells were treated with 30 nM PMA.

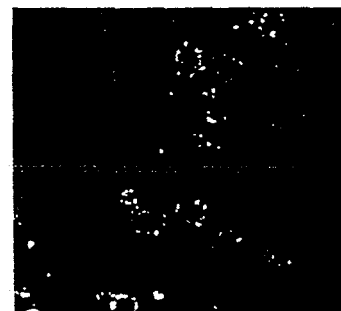
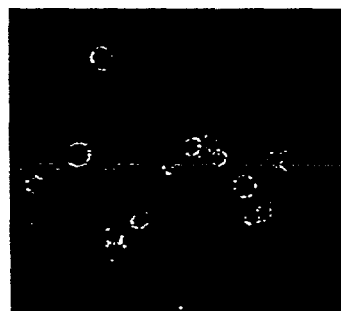


$\beta_1$ -integrin

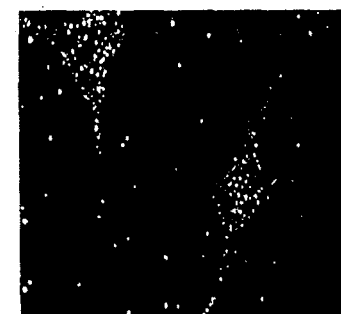
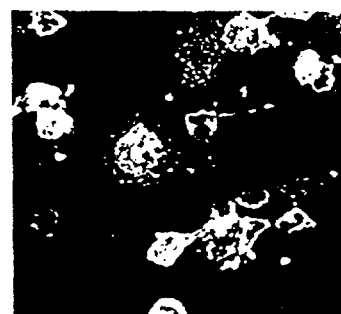
FN



Control  
48h



PMA  
4h



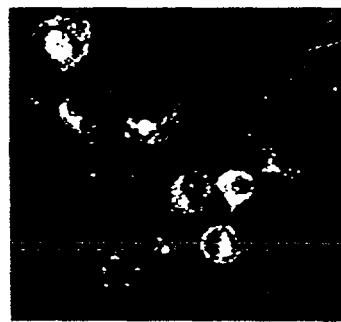
PMA  
48h

$\alpha_1$ -integrin

FN



Control

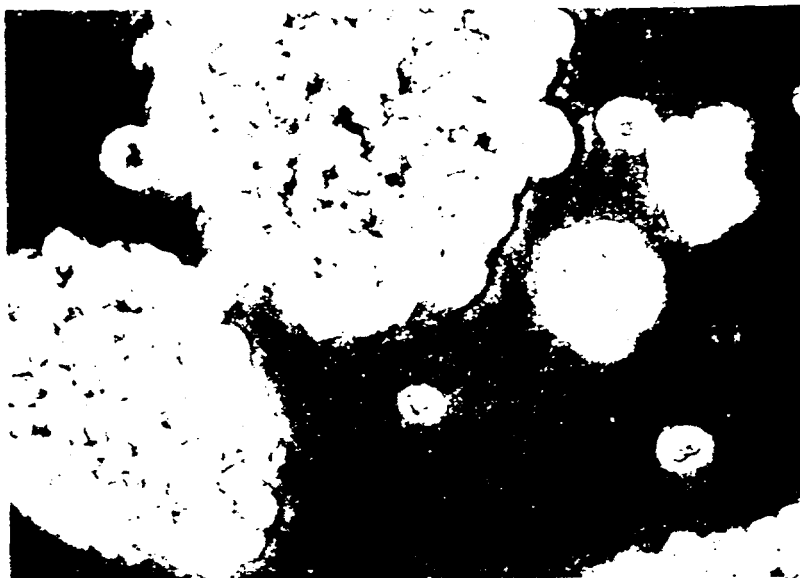


PMA



M-CSF

A



B



C

