

## EFFECTS OF ESTROGEN RECEPTOR ACTIVATION ON PROSTATIC INFLAMMATION AND BLADDER OVERACTIVITY IN A RAT MODEL OF CHRONIC NONBACTERIAL PROSTATITIS

### Hypothesis / aims of study

Although it is known that chronic nonbacterial prostatitis (CNBP) is one of the common urological diseases among men, the treatment of CNBP is often unsuccessful. CNBP often causes irritative lower urinary tract symptom such as frequent urination or urgency. It has recently been reported that estrogen receptors (ERs), ER $\alpha$  and ER $\beta$ , modulate tissue inflammatory conditions and that ER $\beta$  stimulation can improve inflammation whereas ER $\alpha$  stimulation could be an accelerator of local inflammation. In this study, we investigated the role of ER $\beta$  in prostatic inflammation and bladder overactive condition using a rat model of CNBP since ER $\beta$  has been recognized as a therapeutic target for inflammation diseases in the skin or the central nerve system [1, 2].

### Study design, materials and methods

Male Sprague–Dawley rats at age of 8 weeks old were used. In the first set of experiments, rats were divided into formalin injection prostatitis (FG, n=5) and saline injection control groups (SG, n=5). Prostatic inflammation was induced by 5% formalin injection into bilateral ventral lobes of the prostate. In another set of experiments, rats with formalin-induced prostatitis were divided into the ER $\beta$  agonist therapy group (TG, n=4) and the placebo group (PG, N=4). TG rats was treated with 3 $\alpha$ diol, which is a selective agonist for ER $\beta$ , dissolved in olive oil at a dose of 3mg/kg daily from 2 days before induction of prostatitis for 30days whereas PG rats received olive oil only. In each group, continual filling cystometry was performed in a conscious condition on day 28 after induction of prostatitis (FG, TG, PG groups) or sham treatment (SG group). Urodynamic parameters including non-voiding contractions (NVCs) during the storage phase, voiding interval (VI) and postvoid residual volume (RV) were investigated. After cystometry, the prostate and bladder were excised, and the bladder was separated into mucosa and detrusor muscle layers under a microscope. Expression levels of P2X2 and TRPA1 mRNA in bladder mucosa and detrusor layers as well as mRNA expression levels of ER $\alpha$ , ER $\beta$ , TNF- $\alpha$ , iNOS, and COX2 in the prostate were investigated by real-time PCR in each group. Statistical analysis was performed using Mann-Whitney U test. P value less than 0.05 was considered statistically significant.

### Results

In cystometric investigation, the mean number of NVCs was significantly greater in FG rats than in SG rats (P<0.05), and VI were significantly decreased in FG rats compared with SG rats (P<0.05) (Figure 1). There was no significant difference in RV between FG and SG groups. In RT-qPCR analyses, mRNA expression of P2X2 and TRPA1 receptors was significantly increased in the bladder mucosa but not in the detrusor in FG rats compared with SG rats (P<0.05). In the prostate, expression levels of ER $\alpha$ , TNF- $\alpha$ , iNOS, and COX2 mRNA were significantly increased in FG rats compared with SG rats (P<0.05). However, expression of ER $\beta$  in the prostate was significantly decreased in FG rats compared with SG rats (P<0.05).

In comparison between TG and PG prostatitis groups, TG rats showed decreased NVCs and increased VI (P<0.05) (Figure1), and mRNA expressions of P2X2 and TRPA1 in the bladder mucosa as well as those of ER $\beta$ , TNF- $\alpha$ , iNOS, and COX2 in the prostate were significantly decreased in TG rats compared with PG rats (Figure2). Furthermore, ER $\beta$  mRNA expression in the prostate increased in TG rats compared with PG rats (P<0.05) (Figure2). The relative expression ratio of ER $\beta$  against ER $\alpha$  in FG rats was significantly decreased compared with SG rats (P<0.05); however, activation of ER $\beta$  by 3 $\alpha$ diol reversed the decreased ER $\beta$ /ER $\alpha$  ratio in the TG group compared with the PG group (p<0.05).

### Interpretation of results

Patients with CNBP often exhibit irritative bladder symptoms such as urinary frequency or urgency. In this study, prostatitis rats showed bladder overactive conditions evidenced by increased NVCs and decreased VI and also increased expression of P2X2 and TRPA1 in the bladder mucosa after prostatic inflammation, suggesting that the prostate-to-bladder cross-organ sensitization might be involved in the induction of bladder overactivity associated with upregulation of ATP (P2X2) and TRPA1 receptors in the bladder following CNBP. This study also showed that ER $\beta$  expression in the prostate is reduced after prostatitis and that ER $\beta$  stimulation by 3 $\alpha$ diol in prostatitis rats (TG group) improved not only prostatic inflammation evidenced by decreased expression TNF- $\alpha$ , iNOS and COX2, which is associated with increased ER $\beta$ /ER $\alpha$  ratio in the prostate, but also bladder overactivity as shown by decreased NVCs and increased VI in association with normalization of P2X2 and TRPA1 mRNA expression in the bladder mucosa when compared with placebo-treated prostatitis group (PG). These results indicate that ER $\beta$  activation that can normalize ER $\beta$  expression in the prostate has anti-inflammatory effects to reduce bladder overactivity and expression of the related molecules in the bladder as well as to improve prostatic inflammation.

### Concluding message

We demonstrated that: (1) CNBP in rats induces prostatic inflammation that involves cytokine production (TNF- $\alpha$ ) and upregulation of nitric oxide (iNOS) and prostaglandin (COX2) production systems and also bladder overactivity, possibly due to prostate-to-bladder cross-organ sensitization, and (2) ER $\beta$  activation effectively improves not only prostatic inflammation but also overactive bladder conditions, and normalizes ER $\beta$  expression in the prostate. Therefore, ER $\beta$  could be a therapeutic target for the treatment of prostatic inflammation and irritative bladder symptoms in patients with CNBP.

Figure1

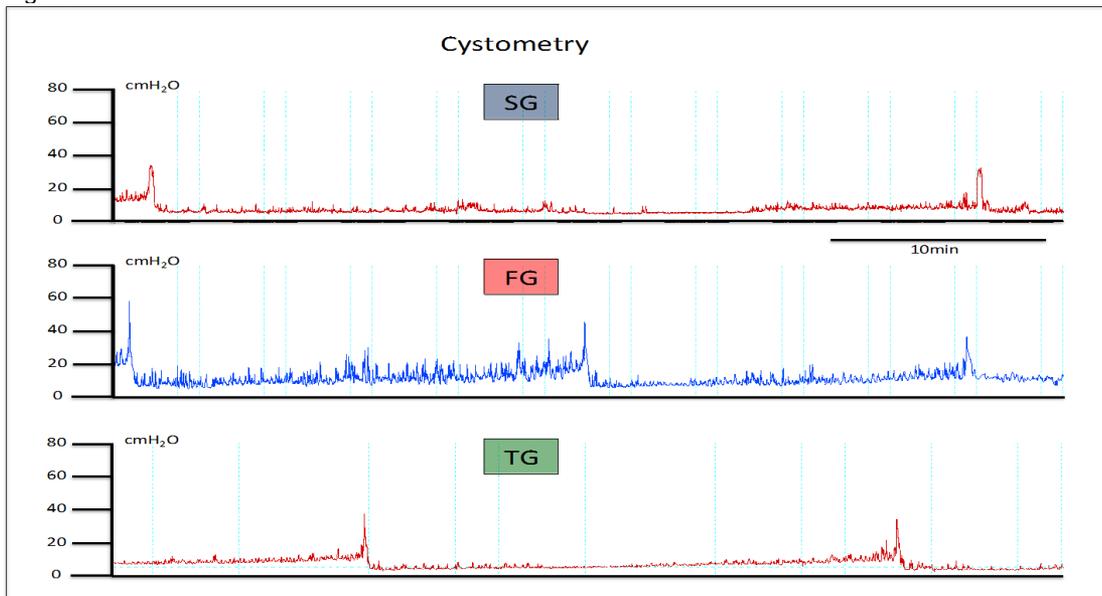
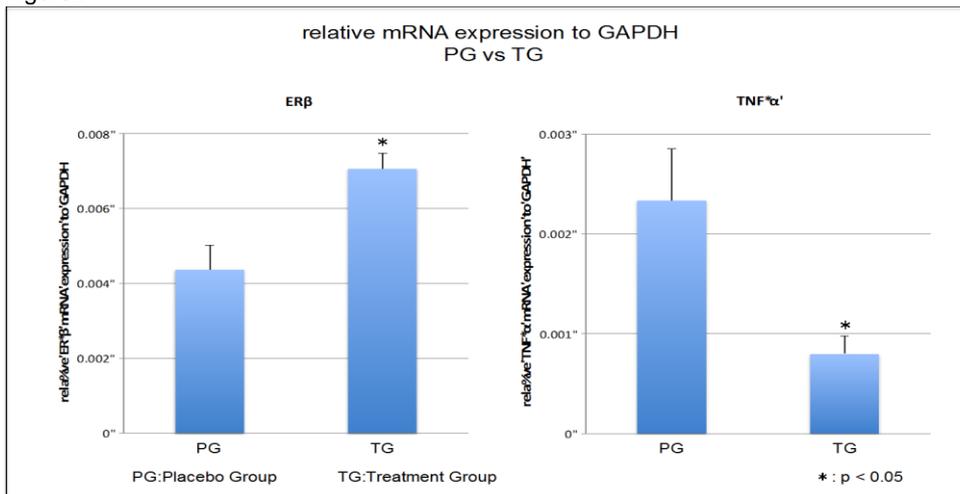


Figure2



References

1. Campbell, L. et al. Estrogen promotes cutaneous wound healing via estrogen receptor beta independent of its antiinflammatory activities. *J. Exp. Med.* 207, 1825–33 (2010)
2. Zuloaga, K. L. et al. The androgen metabolite, 5 $\alpha$ -androstane-3 $\beta$ ,17 $\beta$ -diol, decreases cytokine-induced cyclooxygenase-2, vascular cell adhesion molecule-1 expression, and P-glycoprotein expression in male human brain microvascular endothelial cells. *Endocrinology* 153, 5949–60 (2012).

Disclosures

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