mune system. The amount of tissue culture interferon purified by affinity chromatography that was used in our experiments totaled about 5×10^6 units per mouse, which corresponds roughly to 2×10^5 units per gram of tissue. This represents at the most 0.5 μ g of protein per gram of tissue, which, on a weight basis, makes interferon a highly active inhibitor of cellular immunity.

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Synthesis of $[6^{-3}H] - 1\alpha$ -Hydroxyvitamin D₃ and Its Metabolism in vivo to $[{}^{3}H]-1\alpha$, 25-Dihydroxyvitamin D₃

Abstract. $[6^{-3}H]$ - 1_{α} -Hydroxyvitamin D, was chemically synthesized and its full biological activity and radiochemical purity were demonstrated. With the use of this preparation it has been possible to demonstrate in vivo that in rats the $[6^{-3}H]-1 \alpha$ -hydroxyvitamin D_3 is converted to $[6^{-3}H]$ -1 α , 25-dihydroxyvitamin D_3 , the natural hormone. In fact, in the intestine and bone of rats given 32 picomoles of $[6^{-3}H]-1\alpha$ -hydroxyvitamin D, each day for 6 days, more than 80 percent of the lipid-soluble radioactivity exists as $[6^{-3}H]-1\alpha$, 25dihydroxyvitamin D_3 , a finding that suggests that much of the biological effectiveness of 1α -hydroxyvitamin D_3 is due to its conversion to $1 \alpha 25$ -dihydroxyvitamin D_3 .

In order for vitamin D to carry out its physiological role in stimulating the mobilization of calcium from the intestine and bone, it must first be hydroxylated on C-25 in the liver and on C-1 in the kidney to 1,25-dihydroxyvitamin D₃ [1,25-(OH)₂D₃] (1). The fact that the kidney is essential in the synthesis of this hormone has led to the idea that renal osteodystrophy may be di-



Fig. 1. Cochromatography of $[6^{-3}H]$ -1 α -OH-D₃ with crystalline synthetic 1_{α} -OH-D₃. (A) Sephadex LH-20 column (1 by 60 cm) packed and developed with CHCl₃ and Skellysolve B (1:1). (B) High pressure liquid chromatography (2.5 cm by 2.0 mm) on Zorbax-Sil (du Pont de Nemours), developed with isopropanol and Skellysolve B (1:9). Abbreviation: dpm, disintegrations per minute.

rectly related to depressed production of $1,25-(OH)_2D_3$ and that replacement therapy with the hormone would be useful in correcting these lesions (2). The first reported chemical synthesis of $1,25-(OH)_2D_3$ suggested that synthesis of this hormone might be difficult and expensive (3). This prompted the synthesis of $1,25-(OH)_2D_3$ analogs that were easier and less expensive to prepare (4). The most promising analog appeared to be 1α -hydroxyvitamin D₃ (1α - $OH-D_3$) (Fig. 1A), which was prepared as a model for the synthesis of 1α , 25-(OH)₂D₃ (5). Holick et al. (5) showed that 1α -OH-D₃ is capable of stimulating intestinal calcium transport and bone calcium mobilization in normal and anephric rats. Furthermore, this analog is about 20 to 50 percent as active as 1,25-(OH)₂D₃ on a weight basis in the rat bioassay systems (6) and equally as active in eliciting biological responses in the chicken (7).

The question as to whether 1α -OH-D, is hydroxylated on C-25 before it can function has been raised (6-8). Zerwekh et al. (8), using their chromatin-associated 1,25- $(OH)_2D_3$ receptor assay for $1,25-(OH)_2D_3$, have suggested that the intestine of the chicken rapidly converts 1α -OH-D₃ to its 25-hydroxy derivative and that this hydroxylation can be demonstrated in vitro. However, as Zerwekh et al. stated, the metabolism of 1α -OH-D₃ to $1,25-(OH)_2D_3$ can only be established with radioactive 1α-OH-D₃.

Using an intermediate available through our earlier work on the synthesis of 1,25- $(OH)_2D_3$ and 1α -OH-D₃ (3, 5), we have prepared $[6^{-3}H]$ -1 α -OH-D₃ and have demonstrated that it is metabolized to 1,25- $(OH)_2D_3$. The introduction of a tritium at C-6 was accomplished by reducing $1\alpha, 3\beta$ diacetoxy-5 α -cholestan-6-one (9) with NaBT₄ (New England Nuclear) in isopropanol. The resulting $[6-^{3}H]-6\beta$ -alcohol was dehydrated in pyridine with POCl₃ to yield $[6^{-3}H] - 1\alpha, 3\beta$ -diacetoxycholest-5-ene. Allylic bromination with N,N'-dibromodimethylhydantoin and dehydrobromination with trimethyl phosphite yielded the corresponding $\Delta^{5,7}$ -intermediate (λ_{max} 295, 282, 271 nm), which on irradiation yielded 1α -[6-³H] hydroxy-previtamin D₃-1 α , 3 β -

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Fig. 2. Profiles of chromatographed lipid extracts of (A) intestine and (B) bone from rats that received 32 pmole of $[6^{-3}H]$ -1 α -OH-D₃ orally for 6 days. Sephadex LH-20 column (1 by 60 cm) packed and developed with CHCl₃ and Skellysolve (15 : 25).

diacetate (λ_{max} 260 nm). Saponification of the previtamin with KOH in methanolic at 80° C for 2 hours yielded [6-³H]-1 α -OH-D₃ (λ_{max} 265 nm, λ_{min} 228 nm). The final product cochromatographed with crystalline synthetic 1 α -OH-D₃ on Sephadex LH-20 (CHCl₃ and Skellysolve B, 1 : 1) and on high pressure liquid chromatography with 10 percent isopropanol in Skellysolve B, a procedure that separates all known metabolites of vitamin D₃ (10) (Fig. 1).

For bioassay and metabolism studies, male weanling rats (Holtzman) were fed a vitamin D-deficient rachitogenic diet (11) for 2 weeks and groups of nine animals were given 32 pmole of either $[6^{-3}H]^{-1}\alpha^{-}$ OH-D₃ or crystalline 1α -OH-D₃ (6) orally in 0.1 ml of propylene glycol daily for the next 6 days while the control group received only 0.1 ml of propylene glycol. On day 7 the animals were killed, their radii and ulnae were collected for antirachitic assay (12), and their small intestines were used for intestinal calcium transport studies (13). A group of three animals receiving

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the tritiated compound had their small intestines, femurs, tibias, and fibulas removed and extracted with CHCl₃, MeOH, and H_2O (2:2:1) for chromatography. Intestinal and bone extracts were chromatographed on a Sephadex LH-20 column (1 by 60 cm) slurried and developed with CHCl₃ and Skellysolve B (75:25) (14). Cochromatography was done on Sephadex LH-20 slurried and developed with either CHCl₃ and Skellysolve B (65:35) or CHCl, and Skellysolve B (1:1) (15) and on high pressure liquid chromatography with 10 percent isopropanol in Skellysolve B. The [26,27-14C]-1,25-(OH)₂D₃ was prepared with chicken kidney homogenates (16) in vitro from [26,27-14C]-25- $OH-D_3$ synthesized as described (17).

When rats were dosed orally for 6 days with 32 pmole of $[6^{-3}H]$ -1 α -OH-D₃, the major component of lipid-soluble radioactivity in both the bone and intestine was a metabolite that migrated in the region of the Sephadex chromatogram where 1,25-(OH)₂D₃ normally elutes (Fig. 2). This polar metabolite of 1α -OH-D₃ isolated from the intestine cochromatographs identically with [26,27-14C]-1,25-(OH)₂D₃ on Sephadex LH-20 (CHCl₃ and Skellysolve B, 65:35) and with synthetic 1α , 25-(OH)₂D₃ and [26,27-14C]-1,25-(OH)₂D₃ on high pressure liquid chromatography (Fig. 3). Similarly the polar metabolite from the bone also cochromatographed with [26,27- ^{14}C]-1,25-(OH)₂D₃ in both systems.

The calcification response for the animals receiving the $[6-^{3}H]-1\alpha$ -OH-D₃ was identical to that observed with crystalline synthetic 1_{α} -OH-D₃ (both gave antirachitic activity values of 150 units per microgram; vitamin D_3 gave values of 40 units per microgram). Similarly the intestinal calcium transport as determined by the everted gut sac technique in the same animals showed ratios of serosal to mucosal 45 Ca of 4.0 \pm 0.2 and 3.5 \pm 0.2 for the labeled and unlabeled materials, while that from vitamin D-deficient controls was 1.8 ± 0.2 . These results demonstrate that the $[6^{-3}H]$ -1 α -OH-D₃ is fully as biologically active as crystalline 1α -OH-D₃.

These experiments show that $[6^{-3}H]^{-1}\alpha^{-0}$ OH-D₃ given each day for 6 days was hydroxylated on C-25 to produce the natural hormone 1,25-(OH)₂D₃. Furthermore 24 hours after the last dose of 1 α -OH-D₃, more than 80 percent of the lipid-soluble radioactivity in the intestine and bone was in 1,25-(OH)₂D₃. The fact that the polar metabolite was 1,25-(OH)₂D₃ is demonstrated by its ability to comigrate with [26,27-¹⁴C]-1,25-(OH)₂D₃ and synthetic 1 α ,25-(OH)₂D₃ on Sephadex LH-20 and high pressure liquid chromatography, the latter being capable of separating 25,26dihydroxyvitamin D₃ [25,26-(OH)₂D₃]



Fig. 3. (A) Cochromatography of $[6^{-3}H]^{-1}\alpha$,25-(OH)₂D₃ with $[^{14}C]^{-1}\alpha$,25-(OH)₂D₃ on Sephadex LH-20 (1 by 60 cm packed and developed with CHCl₃ and Skellysolve B, 65 : 35); (B) cochromatography of $[6^{-3}H]^{-1}\alpha$,25(OH)₂D₃ with crystalline 1α ,25-(OH)₂D₃ and $[26,27^{-14}C]^{-1}$,25-(OH)₂D₁ by high pressure liquid chromatography (25 cm by 2.1 mm) on Zorbax-Sil developed with isopropanol and Skellysolve B (1 : 9).

from $1,25-(OH)_2D_3$ and $1,25-(OH)_2D_3$ from $1,25-(OH)_2D_2$ (9).

The question as to whether 1α -OH-D₃ requires hydroxylation on C-25 before it can function cannot be determined from the data presented. Although 1,25- $(OH)_2D_3$ is generated from 1α -OH-D₃ in vivo in rats, it is not vet known whether the hydroxylation occurs rapidly enough to account for the early responses reported for this compound in chicks and rats (6, 7). Furthermore, it is unknown whether the 25-hydroxylation occurs in the liver as in the case with vitamin $D_3(l)$ or in the intestine as suggested by Zerwekh et al. (8). These and other questions relating to the use of 1α -OH-D₃ can now be approached with the use of $[6-{}^{3}H]-1\alpha$ -OH-D₃.

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Regulation of Serum 1α , 25-Dihydroxyvitamin D₃ by Calcium and Phosphate in the Rat

Abstract. A new radioreceptor assay was used to quantify changes in serum concentration of 1_{α} , 25-dihydroxyvitamin D_{α} in rats with low calcium or low phosphate diets. Low availability of either ion elicits a fivefold increase in the circulating concentration of $1_{\alpha,25}$ -dihydroxyvitamin D₃. The enhancement of $1_{\alpha,25}$ -dihydroxyvitamin D₃ concentration in response to calcium deficiency is dependent on the presence of the parathyroid or thyroid glands (or both), suggesting that this effect is mediated by parathyroid hormone. In contrast, the response to phosphate deficiency is independent of these glands and may result from an action of low serum phosphate concentration or some factor associated with phosphate depletion on the renal synthesis of the 1α ,25-dihydroxyvitamin D_3 hormone.

Vitamin D₃ is metabolized to 25-hydroxyvitamin D₃ (25-OHD₃) (1) and subsequently to 1α , 25-dihydroxyvitamin D₃ $[1\alpha, 25-(OH)_2D_3]$ (2). The latter conversion occurs exclusively in the kidney (3) and produces what is considered to be the hormonal form of the vitamin. In stimulating both intestinal calcium transport and bone calcium mobilization, 1α , 25-(OH)₂D₃ is the most active and the fastest acting metabolite of vitamin D (4).

The production of this hormone is influenced by the calcium and vitamin D status of the animal (5, 6). The primary regulated step appears to be the 1α -hydroxylation of 25-OHD₃ in the kidney (6); however, the mechanism and details of this endocrine regulation are poorly understood. DeLuca and his co-workers, on the basis of the in vivo conversion of radioactive 25-OHD₃ to 1α ,25-(OH)₂D₃, have reported (5) that hypocalcemia in the rat stimulates the production of 1α , 25-(OH)₂D₃, and that this stimulation is dependent on the presence of the parathyroid glands (7). In contrast to these findings, and also to those of Fraser and Kodicek (8), MacIntyre and associates have observed that in both rats (in vivo) (9)and chicks (in vitro) (10) parathyroid glands are not essential for the production of 1α , 25-(OH)₂D₃. Moreover, Tanaka and DeLuca (11) have reported that phosphate deficiency also results in enhanced production of the 1α , 25-(OH)₂D₃ hormone. To date, all experiments investigating the control of 1α ,25-(OH)₂D₃ formation have used either the measurement of the renal 1α -hydroxylase in vitro, or the ability of the animal to metabolize 25-OHD₃ to dihydroxy derivatives. Since these methods measure the conversion of 25-OHD₃ to 1α , 25-(OH)₂D₃ at any given time and are affected by the pool size of 25-OHD₃ precursor, they may not reflect the steady state concentration of this hormonal product in the blood. In any case, the regulation of the renal synthesis and secretion of $1\alpha, 25$ - $(OH)_2D_3$ appears to be a complex endocrine feedback system which will probably require the results of a number of experimental approaches before it can be adequately described.

Since the recent development of a specific and sensitive radioreceptor assay for 1α ,25-(OH)₂D₃ (12), it has become possible to eliminate the effects of alterations in hormone degradation rates and determine the total serum activity of the hormone. Using this assay, it is possible to directly assess the effects of proposed regulators of

 1α ,25-(OH)₂D₃ serum concentration. The data obtained from the measurement of the circulating concentration of this hormone, combined with the data obtained by in vitro enzyme activity studies and in vivo conversion experiments, should clarify the control of 1α , 25-(OH)₂D₃ formation as well as the relationships between vitamin D and mineral homeostasis.

In our study, the serum 1α , 25-(OH)₂D₃ concentration was measured in response to changes in dietary calcium and phosphorus content and in response to surgical removal of the thyroid and parathyroid (TPTX) glands of rats that were subsequently given replacement thyroxine. Thus, the TPTX rats were deficient in calcitonin and parathyroid hormone. A total of 169 male weanling Holtzman rats, either intact or TPTX, were fed one of the following partially synthetic diets: (i) a normal diet (0.6 percent calcium, 0.6 percent phosphorus); (ii) a low calcium diet (0.01 percent calcium, 0.6 percent phosphorus); (iii) a low phosphorus diet (0.6 percent calcium, 0.04 percent phosphorus); or (iv) high calcium diet (1.8 percent calcium, 0.65 percent phosphorus, 20 percent lactose). The concentration of salts (potassium phosphate, calcium carbonate, and potassium chloride) were varied in these diets in order to achieve the desired levels of calcium and phosphorus; fibrin was used as the source of protein because of its low phosphorus content; and when lactose was used, it was substituted for sucrose. The constituents of these different diets (13) were essentially the same except for inorganic salt content. All diets contained vitamin D₃ (2 international units per gram of diet). After 2 weeks on the diets, blood was obtained from the rats by cardiac puncture for measurement of serum calcium, phosphorus, and $1\alpha_{2}$ -(OH)₂D₃. The serum sample (14) for the 1α , 25-(OH)₂D₃ assay was extracted with a mixture of methanol and chloroform (2:1, by volume), and the vitamin D hormone was isolated by successive Sephadex LH-20 and Celite column chromatography (15). A sensitive, competitive binding assay with a high affinity, saturable receptor system from the hormone's target tissue was used to measure the 1α , 25-(OH)₂D₃ concentration in the serum (12). This technique has been shown to be a reliable and valid method for detecting hormone concentrations as low as 1.0 ng per 100 ml of serum (12), and recent modifications (15, 16) have improved the speed of this radioreceptor assay.

In intact animals (no surgery) on a normal calcium and phosphate diet, circulating 1a,25-(OH)₂D₃ was 17.3 ng/100 ml (Table 1). A marked increase of this hormone to 90 or 82 ng/100 ml occurs when the dietary intake of either calcium or