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Title: TNF α -induced glucocorticoid resistance: Effect of steroidal and non-steroidal GR agonists, formoterol and inhibition of inflammatory signalling

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Body: Inhaled glucocorticoids (GCs) w/wo long-acting β_2 -adrenoceptor agonists (LABA) are the most effective treatment for asthma. However, GC insensitivity is a facet of severe asthma and COPD. We have examined TNFα-induced resistance to GC-dependent transcription by steroidal and non-steroidal GC receptor (GR) ligands in the absence and presence of a LABA, formoterol. METHODS: GC-dependent transcription was modeled by a simple 2×GRE-luciferase reporter in human bronchial epithelial BEAS-2B cells treated with TNFα (10 ng/ml) for 1 h prior to addition of GR ligands, and harvested after 6 h for luciferase assay. RESULTS: TNFα reduced by 43-54% the ability to drive 2×GRE-dependent transcription by dexamethasone, budesonide, fluticasone propionate or fluticasone furoate. The GCs des-ciclesonide, GW870086X, RU24858 and the non-steroidal GR agonist, GSK9027, all showed reduced maximal responses (E_{max}) with intrinsic activities 0.5-0.77 relative to dexamethasone. In each case, TNF α reduced $\mathsf{E}_{\mathsf{max}}$ by a further 39-55%. Conversely, formoterol enhanced GRE-dependent transcription by each ligand and rescued the resistance induced by TNF α ; these effects were proportional to the E_{max} of each drug. Statistically significant reversal of TNFα-induced resistance was observed with the c-jun N-terminal kinase inhibitor, JNK8, and PS-1145, an IkB kinase 2 (IKK2) inhibitor. CONCLUSIONS: TNF α induces GC resistance to steroidal GR ligands that are both full and partial agonists, as well as to a non-steroidal GR agonist. This effect is rescued by the addition of formoterol. It is possible that inhibition of inflammatory signalling may also reduce GC resistance.