

The effect of prolonged exposure to NO₂ from birth on airways responsiveness in rabbits sensitized at birth

G.J. Douglas*, J.F. Price**, C.P. Page*

The effect of prolonged exposure to NO₂ from birth on airways responsiveness in rabbits sensitized at birth. G.J. Douglas, J.F. Price, C.P. Page. ©ERS Journals Ltd 1995.

ABSTRACT: Our aim was to determine whether daily exposure to 4 ppm nitrogen dioxide (NO₂) from birth until 3 months of age influenced the development of airways hyperresponsiveness and atopic sensitivity in immunized rabbits.

Littermate New Zealand White (NZW) rabbits were immunized within 24 h of birth by *i.p.* injection of house dust mite antigen in Al(OH)₃ gel, and exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹, 5 days·week⁻¹. At 3 months, bronchoalveolar lavage (BAL) and serum samples were obtained. Airways responsiveness was measured as the provocative concentrations (mg·ml⁻¹) of histamine or methacholine required to elicit a 50% increase in airway resistance (RLPC₅₀) and a 35% decrease in dynamic compliance (C_{dyn}PC₃₅).

There were no differences in total cell or differential cell counts recovered in BAL fluid between control and NO₂ exposed animals. Airways responsiveness did not differ between groups of animals (histamine RLPC₅₀ values: air (n=15) versus NO₂ (n=13), respectively, 9.98±1.32 versus 16.43±1.45 mg·ml⁻¹; C_{dyn}PC₃₅ values: 16.60±1.44 versus 14.95±1.43 mg·ml⁻¹; methacholine RLPC₅₀ values: air (n=14) versus NO₂ (n=12), respectively, 2.18±1.51 versus 2.21±1.32 mg·ml⁻¹; C_{dyn}PC₃₅ values: 2.64±1.41 versus 2.85±1.31 mg·ml⁻¹). There was no difference in sensitization between groups of animals exposed to air or NO₂, evaluated either by cutaneous responsiveness to intradermal antigen, or serum immunoglobulin E (IgE) levels assessed by the passive cutaneous anaphylaxis (PCA) reaction.

We conclude that daily inhalation of 4 ppm NO₂ during the first three months of life does not affect airways responsiveness and atopic status of rabbits sensitized at birth. The lack of influence of NO₂ in this model may be related to the *i.p.* route of immunization.

Eur Respir J., 1995, 8, 246–252.

*Dept of Pharmacology, King's College, University of London, London, UK. **Dept of Thoracic Medicine, King's College Hospital, London, UK.

Correspondence: G.J. Douglas
Dept of Pharmacology
King's College
Manresa Road
London SW3 6LX
UK

Keywords: Air pollution
house dust mite
neonatal immunization
nitrogen dioxide
rabbits

Received: July 26 1994
Accepted after revision December 18 1994

Over the past decade, a number of studies from several countries have shown that the incidence of atopy and asthma is increasing, particularly amongst children, but the cause of this rise remains unknown [1, 2]. Together with a genetic predisposition for allergy, some environmental factor is thought to influence the development of asthma and other allergic disorders [3]. An association between air pollutants and the incidence of respiratory disease and asthma has been reported in a number of epidemiological studies, and there is strong evidence that asthma is more frequent and severe in polluted urban areas as opposed to unpolluted rural areas [1, 4, 5], but there is some controversy whether outdoor air pollution influences the prevalence of asthma. Efforts to reduce sulphur dioxide (SO₂) and black smoke emissions in Western countries have not resulted in a decrease in asthma. On the contrary, recent reports suggest that there is more asthma and hayfever in cities located in the former West Germany compared to former East German cities, that had far greater levels of SO₂ and particulates prior to reunification of the country [6, 7]. However,

during the same period, nitrogen dioxide (NO₂) levels were higher in the West German cities than those in East Germany [7].

Nitrogen dioxide is a pollutant gas present both in the outdoor environment, resulting from emissions from automobile exhausts, and the indoor environment, from gas fires and cookers, which has been associated with an increased morbidity rate for respiratory disease in children [1, 4]. A number of actions implicate NO₂ as a co-factor in the development of asthma. In laboratory animals, NO₂ inhalation decreases respiratory clearance rates [8, 9], inhibits alveolar macrophage function [10, 11], and alters subpopulations of T-lymphocytes [12, 13].

Over 60% of asthma at any age has its origins in childhood, and most severe childhood asthma has its origins in infancy. It is now well-recognized that the initial contact with an allergen early in life, before the immune system has reached full competency, will determine later sensitivity to that allergen [14]. In rabbits, immunization within 24 h of birth with an antigen together with the adjuvant Al(OH)₃ induces the preferential

production of antigen specific immunoglobulin E (IgE) antibodies [15]. Animals sensitized neonatally in this way exhibit several features of the asthmatic. They undergo early and late airways responses following antigen challenge [16–18], which is associated with airways oedema and inflammatory cell infiltration [19, 20], are hyperresponsive to inhaled histamine and methacholine compared with naive rabbits [21, 22], and exhibit airways hyperresponsiveness following challenge with either antigen or platelet-activating factor [18–21]. Repeated measurements of lung function are readily made in the rabbit, and each animal may be used as its own control [22–24]. We have, therefore, chosen the rabbit as the species in which to conduct our experiments investigating the effects of exposure to pollutant gases from birth.

Thus, the environmental pollutant NO₂ not only has direct effects on the airways, but additionally has been implicated as an adjuvant factor in the development of atopy and asthma [25, 26]. Nonetheless, the precise contribution of NO₂ and other pollutant gases to the development of atopy or bronchial hyperresponsiveness remains unknown. In this study, we asked whether exposure to NO₂ during the first three months of life increases airways hyperresponsiveness and sensitization in rabbits immunized against the house dust mite (HDM) *Dermatophagoides pteronyssinus*.

Materials and methods

Animals

New Zealand White rabbits were supplied by Froxfield Farms (Petersfield, Hampshire, UK). Naive male rabbits (2.0–3.0 kg) and neonatal littermates of either sex were used. In the prolonged study, littermate rabbits of both sexes were immunized, using the protocol outlined below, and exposed to air or NO₂ at the breeders' unit before transfer to our laboratory at 3 months of age. Animals were housed under identical conditions when not in the exposure chamber. Littermates were held together with their dame until weaning at 3 weeks. All procedures described were subject to Home Office approval and were performed under the Animals (Scientific Procedures) Act 1986.

Study design

After immunization, an equal number of pups from each litter were randomly assigned to undergo exposure to either ambient air or NO₂ (4 ppm) for 2 h·day⁻¹. Data were obtained in this study from 29 rabbits originating from five separate litters. Prolonged exposure studies were performed on immunized rabbits from the day of birth. At 3 months of age, bronchoalveolar lavage (BAL) and serum samples were obtained on the day following the last exposure. Measurements of airways responsiveness to the bronchoconstrictors histamine and methacholine

were made 3–8 days after the final air or gas exposure. Two parameters of allergic sensitization were measured: the immediate inflammatory response in the skin was assessed, and indices of serum IgE levels were determined using the homologous passive cutaneous anaphylaxis (PCA) reaction in naive rabbits.

Materials and drugs

Materials and drugs were purchased from the following sources: nitrogen (BOC Ltd, London, UK); mixtures of 10% NO₂ in air (BOC Ltd, Special Gases, Guildford, Surrey, UK); sterile aluminium hydroxide Al(OH)₃ gel (Rehydragel; Reheis, Dublin, Eire); sterile pyrogen free 0.9% sodium chloride solution (saline; Baxter Health Care, Thetford, Norfolk, UK); lyophilized allergen extract of *Dermatophagoides pteronyssinus* (Aquagen, ALK [503]; vial number 4: 100,000 SQ-U·ml⁻¹ batch No. 2556/236154; ALK Allergologisk Laboratorium A/S, Hørsholm, Denmark); chromotrope 2R, sterile Dulbecco's phosphate buffered saline (PBS), Evans blue dye, haematoxylin, histamine diphosphate, methacholine hydrochloride and sodium pentobarbitone (Sigma Chemical Co., Poole, Dorset, UK); diazepam (Roche Products Ltd, Welwyn Garden City, Hertfordshire, UK); Hypnorm (a mixture of fentanyl citrate, 0.315 mg·ml⁻¹, and fluanisone, 10 mg·ml⁻¹) (Janssen Pharmaceutical Ltd, Grove, Oxfordshire, UK).

Pulmonary function measurements

Measurements of pulmonary function were made in spontaneously breathing 3 month old rabbits, premedicated with diazepam (2.5 mg·kg⁻¹, *i.p.*) and anaesthetized with Hypnorm (0.4 ml·kg⁻¹, *i.m.*), using a modification of the method described previously [23]. Animals were intubated with a 3.0 mm cuffed endotracheal tube, and a latex oesophageal balloon was inserted into the lower third of the oesophagus. Measurements of flow were obtained by attachment of the endotracheal tube to a heated (37.5°C) Fleisch pneumotachograph connected to a differential pressure transducer. The oesophageal balloon was attached to a second differential pressure transducer open to air, from which values of transpulmonary pressure (Ptp) were derived. Using an on-line respiratory analyser (PMS Version 4.0; Mumed Ltd, London, UK), values for lung resistance (R_L) and dynamic compliance (C_{dyn}) were calculated from measurements of flow and Ptp [23].

Measurement of airways responsiveness

Airways responsiveness was measured in response to inhaled histamine or methacholine using minor modifications of the method described previously [23]. Agents were aerosolized in an ultrasonic nebulizer and administered directly into the lungs *via* the endotracheal tube. After measurement of basal lung function parameters,

animals were administered saline as an aerosol for 2 min, as a baseline with which to compare responses to the bronchoconstrictors, and lung function measurements were again made. Doubling concentrations of either histamine (1.25–80 mg·ml⁻¹) or methacholine (0.31–20 mg·ml⁻¹) aerosols were then cumulatively administered for 2 min periods. Lung function parameters were recorded either immediately (following histamine challenge), or after a 2 min period of equilibration (following methacholine challenge). The provocation concentrations (PC) of histamine or methacholine that produced a 50% increase in R_L (RLPC₅₀) and a 35% decrease in C_{dyn} (C_{dyn}PC₃₅) were determined for individual animals by linear interpolation, and used as indices of airways responsiveness.

Bronchoalveolar lavage (BAL) and serum samples

BAL samples were obtained from intubated rabbits anaesthetized with diazepam/Hypnorm, 1 day after the last exposure to air or gas. A polyethylene cannula was passed down the endotracheal tube until it was wedged gently against the airway wall. Saline (5.0 ml) was instilled into, and immediately aspirated from, the lungs under vacuum and collected in a polystyrene tube. The numbers of cells recovered were determined, and after staining with Lendrum's stain differential cell counts were made [23]. Blood samples (approx. 6 ml) were taken from the marginal ear vein into glass phlebotomy tubes (Monoject Z/10) at the same time that BAL was performed, kept at room temperature for 1 h and stored overnight at 4°C. Serum was aspirated from the clot, centrifuged to remove debris, aliquoted and stored at -20°C until required for PCA tests.

Immunization to house dust mite antigen

Rabbits were immunized with an extract of *Dermaphagoides pteronyssinus* in Al(OH)₃ gel [27]. HDM antigen (0.5 ml; 100,000 SQ-U·ml⁻¹) was mixed with Al(OH)₃ moist gel (0.5 ml) and saline (1.0 ml). Each rabbit received 0.5 ml of this antigen-adjuvant mixture within 24 h of birth by the *i.p.* route. The injection was repeated weekly for the first month of life, and then biweekly until 13 weeks of age.

Exposure to NO₂

The environmental exposure chamber system employed has been described previously [27]. Laboratory air was drawn through a large (0.71 m³) stainless steel and glass chamber, which can hold a litter of rabbits up to 3 months of age, by a centrifugal fan at a rate of 0.42 m³·min⁻¹ (25 m³·h⁻¹), equivalent to 35 complete air changes per hour. Cylinder NO₂ gas was diluted in the incoming air stream to the desired concentration. The gas level within the chamber was continuously monitored throughout the exposure period by an electrochemical gas diffusion sensor, displayed on a digital readout, and recorded

on a flatbed pen recorder. After rapid equilibration, the gas concentration within the chamber was reliably maintained for at least 8 h [27].

Measurement of cutaneous sensitivity to HDM

Direct skin tests to HDM antigen were performed in immunized rabbits following completion of lung function measurements. Rabbits were anaesthetized by an *i.v.* injection of sodium pentobarbitone (30 mg·kg⁻¹) via an indwelling cannula (23 gauge Butterfly; Abbot Ireland Ltd, Sligo, Eire) in the marginal ear vein. The dorsal skin hair was closely clipped and a balanced site pattern marked either side of the midline. Evans blue dye (10 mg·kg⁻¹, 2.5% in saline) was administered *i.v.* to aid visualization of the inflammatory response. Ten minutes later serial twofold dilutions of HDM antigen (0.3–80 SQ-U·site⁻¹), or PBS as the control, were injected intradermally (0.1 ml) in four replicates. The rabbits were killed 60 min after *i.d.* injection with an overdose of sodium pentobarbitone (60 mg·kg⁻¹ *i.v.*) and the back skin was removed. The titration end-point was taken as the concentration of HDM antigen that caused a greater response in at least two replicates than that of the control when viewed from the underside.

Passive cutaneous anaphylaxis reactions

An index of the serum IgE levels from immunized rabbits was obtained by titration of immune sera samples against a nonimmune serum in the passive cutaneous anaphylaxis (PCA) test. Recipient naive male rabbits (2.0–3.0 kg) were anaesthetized with Hypnorm (0.4 ml·kg⁻¹ *i.m.*) and the dorsal skin hair was closely clipped. A pattern of six blocks of nine sites for 54 *i.d.* injections was marked on either side of the midline. Serial twofold dilutions (between 1:2–1:512) in PBS were made of eight test sera and one nonimmune serum, and injected (0.1 ml) *i.d.* into three recipient rabbits. After a 72 h fixation period, the recipient rabbits were re-anaesthetized with sodium pentobarbitone (30 mg·kg⁻¹ *i.v.*) via an indwelling cannula (23 gauge Butterfly) in the marginal ear vein. Evans blue dye (10 mg·kg⁻¹) was administered *i.v.* followed 10 min later by *i.v.* HDM antigen (5,000 SQ-U·kg⁻¹). Thirty minutes after antigen challenge, the rabbits were killed with an overdose of sodium pentobarbitone (60 mg·kg⁻¹ *i.v.*) and the back skin removed. The titration end-point was taken as the highest dilution at which the test serum caused a greater response than that of the control serum in at least two recipient rabbits when the skin was viewed from the underside.

Statistical analysis

In vivo histamine and methacholine potency values are expressed as the geometric mean±SEM. Values for RLPC₅₀ and C_{dyn}PC₃₅ were log₁₀ transformed before statistical analysis was performed with the unpaired

Table 1. – Total numbers of cells ($\times 10^4$) and percentage of individual cell types recovered in bronchoalveolar lavage (BAL) fluid from 3 month old HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹ from birth

Gas	n	Mononuclear	Neutrophils	Eosinophils	Total cells
Total number of cells $\times 10^4$					
Air	11	168.65 (55.58–335.60)	8.23 (1.43–21.00)	0.00 (0.00–1.23)	169.50 (57.00–339.50)
NO ₂	11	135.00 (26.68–424.01)	2.43 (0.00–49.74)	0.00 (0.00–1.30)	140.63 (31.00–473.75)
Percentage of individual cell types					
Air	11	96 (86.0–99.5)	4 (0.5–14.0)	0 (0.0–0.5)	n/a
NO ₂	11	96 (22.5–100)	4 (0.0–72.5)	0 (0.0–1.0)	n/a

BAL was performed on the day following the final exposure to either air or NO₂. Data are presented as median value, and ranges in parenthesis. There were no significant differences in cell numbers between groups of rabbits ($p > 0.05$). HDM: house dust mite; n/a: not applicable.

t-test. Cell data, PCA titres (given as the reciprocal of the titration end-point) and direct skin test titres (given as the lowest concentration of HDM antigen giving a response) are presented as the median together with the range and were compared using the Mann-Witney test. Results were considered significant at $p < 0.05$.

Results

BAL samples

BAL fluid samples were obtained from most animals in the study. Total and differential cell counts recovered from BAL fluid on the day following the last exposure to air or test gas are shown in table 1. Neither the total numbers of cells recovered nor the proportions of cells recovered differed between groups of animals exposed to either 4 ppm NO₂ gas or their corresponding air exposed controls.

Effect of prolonged exposure to NO₂ on airways responsiveness

Figure 1 shows the RLPC₅₀ and CdynPC₃₅ values obtained for histamine in littermate groups of HDM-immunized rabbits exposed 2 h·day⁻¹, 5 days·week⁻¹ from birth to 3 months of age to either ambient air or 4 ppm NO₂. Figure 2 presents these values obtained for methacholine in the same groups of animals. There were no differences in responsiveness to either histamine or methacholine between HDM-immunized rabbits exposed to NO₂ or their littermate HDM-immunized air-exposed controls ($p > 0.05$).

Where possible, full dose-response curves to the bronchoconstrictor agents were completed. No differences in the maximum responses attained to either bronchoconstrictor was apparent, either in RL or Cdyn measurements, between air exposed and NO₂ exposed HDM-immunized rabbits (table 2).

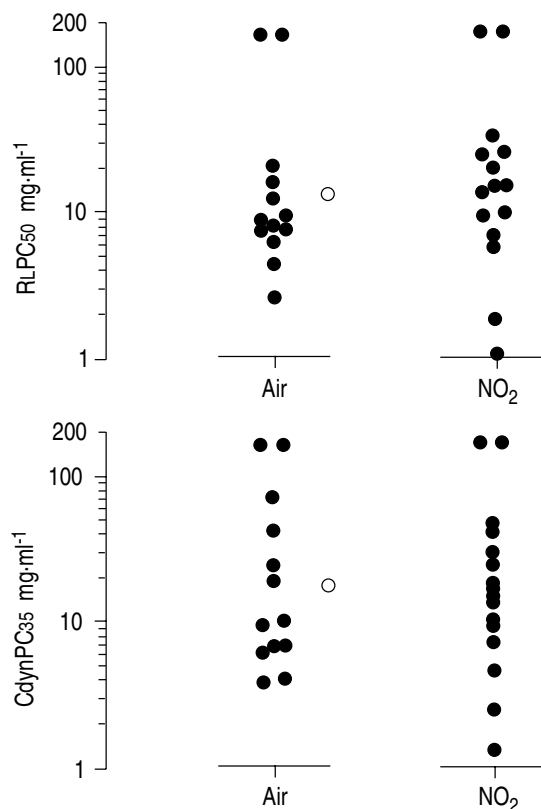


Fig. 1. – Airways responsiveness (RLPC₅₀ and CdynPC₃₅) of spontaneously breathing anaesthetized 3 month old HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹, 5 days·week⁻¹ from birth to aerosolized histamine. Filled symbols represent values from individual rabbits and open symbols represent the geometric mean \pm SEM values. RLPC₅₀: provocative concentration of agonist required to elicit a 50% increase in airway resistance; CdynPC₃₅: provocative concentration of agonist required to elicit a 25% decrease in dynamic compliance; HDM: house dust mite.

Effect of prolonged exposure to NO₂ on sensitization

Cutaneous responses. Direct skin tests were carried out on 16 rabbits, all of which gave positive immediate skin responses. There was a trend to increased responsiveness in the NO₂ exposed rabbits (fig. 3), which, however,

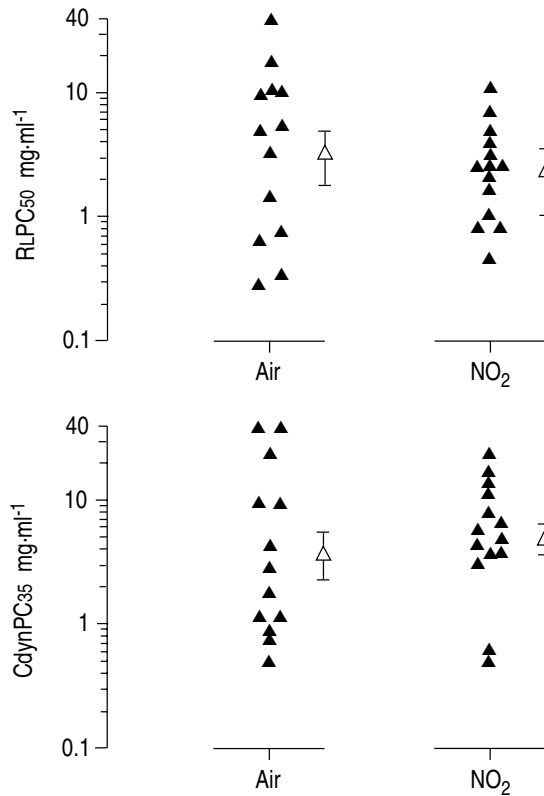


Fig. 2. — Airways responsiveness (RLPC₅₀ and CdynPC₃₅) of spontaneously breathing anaesthetized 3 month old HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹, 5 days·week⁻¹ from birth to aerosolized methacholine. Filled symbols represent values from individual rabbits and open symbols represent the geometric mean ± SEM values. For abbreviations see legend to figure 1.

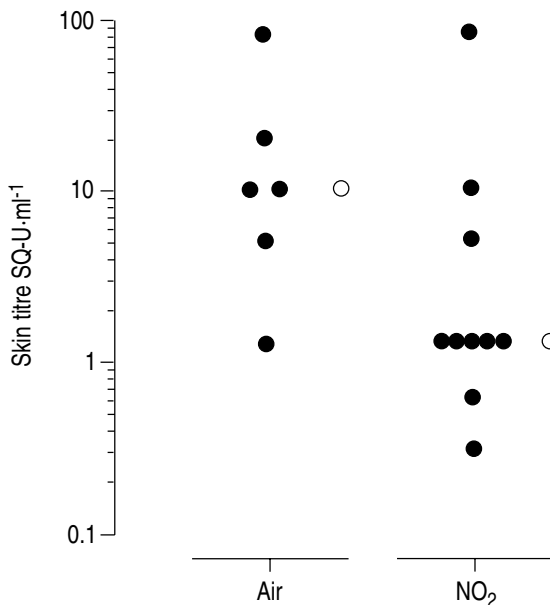


Fig. 3. — Direct skin test titres to HDM antigen in HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹ from birth. Serial twofold dilutions of antigen were injected *i.d.* into the shaved dorsal skin of the anaesthetized rabbits. The titration end-point was taken as the lowest amount (SQ-U·site⁻¹) of HDM antigen injected which gave a positive response after 60 min. Filled symbols represent values from individual rabbits and the median values are indicated by the open symbols. HDM: house dust mite.

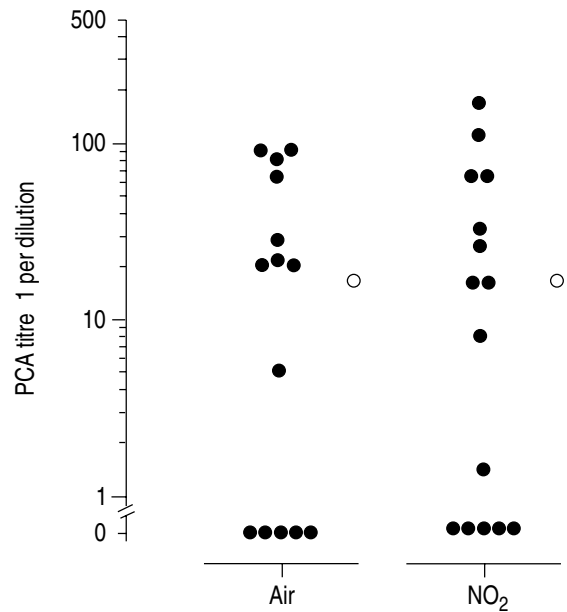


Fig. 4. — PCA titres of sera from HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹ from birth. Serial twofold dilutions of sera were injected *i.d.* into the shaved dorsal skin of anaesthetized naive rabbits. After 72 h antigen was administered *i.v.* and the cutaneous responses were assessed after 30 min. The titration end-point was taken as the reciprocal of the highest dilution of serum injected which gave a positive response. Filled symbols represent values from individual sera samples obtained in at least two naive rabbits, and the median values are indicated by the open symbols. PCA: passive cutaneous anaphylaxis; HDM: house dust mite.

was not significant. The median (range) values obtained for skin test titres in air and NO₂ exposed rabbits given as the lowest concentration of HDM antigen (SQ-U·site⁻¹) eliciting a positive response were: air, 10.0 (1.25–80.0), n=6, versus NO₂, 1.25 (0.3–80.0), n=10 (p=0.0559).

PCA titres. Serum IgE levels measured by the homologous PCA reaction and used as an index of sensitization are shown in figure 4. In both groups of animals, immunization was not completely successful, with 5 of 14 and 5 of 15 rabbits in air and NO₂ groups, respectively, having PCA titres of zero. The PCA titres did not differ between groups of rabbits exposed to either air or NO₂. The median (range) values obtained for air and NO₂ exposed rabbits given as the reciprocal of the PCA titre were: air, 16 (0–128), n=14, versus NO₂, 16 (0–128) n=15 (p>0.05).

Discussion

Our results demonstrate that daily exposure to 4 ppm NO₂ for 2 h·day⁻¹, 5 days·week⁻¹ during the first three months of life does not increase airways responsiveness and sensitization in rabbits immunized neonatally by the *i.p.* route to HDM antigen. At the end of 3 months exposure to NO₂ there were no differences in total cell numbers or differential cell counts recovered in BAL fluid samples compared to those obtained from air exposed rabbits. Measurements of basal pulmonary function

Table 2. – Maximal changes of R_L and C_{dyn} obtained in response to aerosolized histamine or methacholine in 3 month old HDM-immunized rabbits exposed to either ambient air or 4 ppm NO₂ for 2 h·day⁻¹ from birth

Gas	n	Histamine				Methacholine			
		R _L max cmH ₂ O·l ⁻¹ ·s ⁻¹	ΔR _L max %	C _{dyn,min} ml·cmH ₂ O ⁻¹	ΔC _{dyn,max} %	R _L max cmH ₂ O·l ⁻¹ ·s ⁻¹	ΔR _L max %	C _{dyn,min} ml·cmH ₂ O ⁻¹	ΔC _{dyn,max} %
Air	13	69.84±7.14	131±18	2.12±0.15	-50±4.7	122.78±16.32	256±55	2.22±0.21	-58±4.6
NO ₂	14	73.63±6.85	132±21	1.95±0.17	-58±5.3	162.49±44.52	339±100	1.73±0.14	-61±3.1

Data are presented as mean±SEM. R_Lmax: maximum recorded lung resistance; ΔR_Lmax: maximum percentage increase in recorded R_L; C_{dyn,min}: minimum recorded dynamic compliance; ΔC_{dyn,max}: maximum percentage decrease in C_{dyn}; HDM: house dust mite.

revealed no differences in resting values of R_L, C_{dyn}, maximal P_{tp}, tidal volume, minute volume or breathing frequency between groups of animals [27]. Neither did values of R_L, C_{dyn}, maximum P_{tp} or breathing frequency differ from those of naive animals. Thus, neither immunization nor exposure to NO₂ influences basal pulmonary function parameters.

Airway responsiveness to inhaled histamine and methacholine was measured, and a wide range of values were obtained. However, this is similar to previous findings in man. COCKCROFT *et al.* [28] showed that persistent airways hyperresponsiveness was a characteristic feature of asthma, and described a gradient of increasing airways responsiveness to histamine, from normals to severe asthmatics that is quantitative rather than qualitative, with a considerable degree of overlap. Like human asthmatics, there is a gradient of responsiveness to inhaled histamine from naive animals to rabbits sensitized at birth, with shifts in the measured R_LPC50 and C_{dyn}PC35 [23]. However, no effect of NO₂ exposure was apparent on values obtained for R_LPC50 or C_{dyn}PC35 for either spasmogen. We tested two parameters of allergic sensitization. In direct skin tests, all of the rabbits tested gave an immediate cutaneous response, and although there was a trend for increased responsiveness in the NO₂ exposed rabbits, this did not reach significance. We also used the PCA reaction to obtain indices of IgE levels in sera from all of the animals in the study. Approximately two thirds of serum samples in both groups gave positive PCA results, but the PCA titres did not differ between groups of rabbits exposed to either air or NO₂.

Previous studies have demonstrated increased airways responsiveness to the bronchoconstrictors histamine or methacholine in rabbits immunized within 24 h of birth with the antigens ragweed, horseradish peroxidase or *Alternaria* together with an adjuvant [21–23]. Other studies using the inhaled route for sensitization have used the more common antigen ovalbumin [25, 29]. In the current study, we immunized the rabbits to HDM antigen, since house dust mites are now recognized as important indoor sources of allergens associated with asthma [30].

Our results do not agree with previous observations, that exposure to NO₂ increases allergic sensitization and airways responsiveness in laboratory animals [25, 30–32]. However, other investigators have recently failed to demonstrate any effect of prolonged exposure of rats to NO₂ on the *in vitro* contractile responsiveness of airway

smooth muscle [33], or of *in vitro* exposure to NO₂ of bronchial smooth muscle from allergic guinea-pigs [34].

All of the animals used in the present study were immunized by the *i.p.* injection of antigen together with a known adjuvant, Al(OH)₃. The lack of influence of these environmental pollutant gases in this model may be related to the *i.p.* route of administration of the antigen, or to the use of the adjuvant Al(OH)₃ as a nonspecific stimulant of the immune system. Presumably, during the primary sensitization of asthmatic human subjects the antigen is inhaled into the lungs. It seems probable, therefore, that the route of administration of antigen during the immunization procedure is of importance to the airways responsiveness to bronchoconstrictor agents, such as histamine and methacholine. Indeed, recent reports suggest that 5 ppm SO₂ enhances allergic sensitization in the guinea-pig to inhaled ovalbumin [35, 36].

We are currently using a technique of immunization that allows direct presentation of a particulate antigen to lung tissues in young animals. We hope, in the future, to be able to investigate the putative role of these pollutant gases as adjuvants in sensitization of airway tissues to antigens, such as those of the HDM, and the impact of this on the airways responsiveness to bronchoconstrictor agents.

We conclude that, in rabbits sensitized at birth with *i.p.* HDM antigen and Al(OH)₃, daily inhalation of NO₂ at 4 ppm for 2 h·day⁻¹, 5 days·week⁻¹ does not affect either the incidence or the degree of sensitization, or influence airways responsiveness to histamine or methacholine.

Acknowledgements: The authors thank the Wellcome Trust for support of this study (Project Grant No. 034840/Z/91/Z) and the staff of Froxfield Farms (Petersfield, Hampshire, UK) for invaluable technical support.

References

1. Bousquet J, Burney P. Evidence for an increase in atopic disease and possible causes. *Clin Exp Allergy* 1993; 23: 484–492.
2. Anderson HR, Butland BK, Strachan DP. Trends in prevalence and severity of childhood asthma. *Br Med J* 1994; 308: 1600–1604.
3. Åberg N. Familial occurrence of atopic disease: genetic versus environmental factors. *Clin Exp Allergy* 1993; 23: 829–834.
4. Pierson WE, Koenig JQ. Respiratory effects of air

- pollution on allergic disease. *J Allergy Clin Immunol* 1992; 90: 557–566.
5. Wardlaw AJ. The role of air pollution in asthma. *Clin Exp Allergy* 1993; 23: 81–96.
 6. von Mutius E, Fritsch C, Weiland SK, Röhl G, Magnussen H. Prevalence of asthma and allergic disorders among children in united Germany: a descriptive comparison. *Br Med J* 1992; 305: 1395–1399.
 7. von Mutius E, Martinex FD, Fritsch C, Nicolai T, Roell G, Thiemann H-H. Prevalence of asthma and atopy in two areas of West and East Germany. *Am J Respir Crit Care Med* 1994; 149: 358–364.
 8. Vollmuth TA, Driscoll KE, Schlesinger RB. Changes in early alveolar particle clearance due to single and repeated nitrogen dioxide exposures in the rabbit. *J Toxicol Environ Health* 1986; 19: 255–266.
 9. Rasmussen R, Mannix RC, Oldham MJ, Phalen RF. Effects of nitrogen dioxide on respiratory clearance in the ferret. *J Toxicol Environ Health* 1994; 41: 109–120.
 10. Acton JD, Myrvik QN. Nitrogen dioxide effects on alveolar macrophages. *Arch Environ Health* 1972; 24: 48–52.
 11. Robison TW, Duncan, Forman HJ. Chemoattractant and leukotriene B₄ production from rat alveolar macrophages exposed to nitrogen dioxide. *Am J Cell Mol Biol* 1990; 3: 21–26.
 12. Richters A, Damji KS. Changes in T-lymphocyte subpopulations and natural killer cells following exposure to ambient levels of nitrogen dioxide. *J Toxicol Environ Health* 1988; 25: 247–256.
 13. Damji KS, Richters A. Reduction in T-lymphocyte subpopulations following acute exposure to 4 ppm nitrogen dioxide. *Environ Res* 1989; 49: 217–224.
 14. Holt PG, McMenamin C, Nelson D. Primary sensitization to inhalant allergens during infancy. *Pediatr Allergy Immunol* 1990; 1: 3–13.
 15. Pinkard RN, Halonen M, Meng AL. Preferential expression of anti-bovine serum albumin IgE homocytotropic antibody synthesis and anaphylactic sensitivity in the neonatal rabbit. *J Allergy Clin Immunol* 1972; 49: 301–310.
 16. Shampain MP, Behrens BL, Larsen GL, Henson PM. An animal model of late pulmonary responses to *Alternaria* challenge. *Am Rev Respir Dis* 1982; 126: 493–498.
 17. Murphy KR, Wilson MC, Irvin CG, *et al.* The requirement for polymorphonuclear leukocytes in the late asthmatic response and heightened airway reactivity in an animal model. *Am Rev Respir Dis* 1986; 134: 62–68.
 18. Coyle AJ, Page CP, Atkinson L, Sjoerdsma K, Touway C, Metzger WJ. Modification of late onset airway obstruction and bronchial hyperresponsiveness in an allergic model by the selective platelet-activating factor antagonist BN 52021. *J Allergy Clin Immunol* 1989; 84: 960–967.
 19. Larsen GL, Wilson MC, Clark ARF, Behrens BL. The inflammatory reaction in the airway in an animal model of the late asthmatic response. *Fed Proc* 1987; 46: 105–112.
 20. Marsh WR, Irvin CG, Murphey KR, Behrens BL, Larsen GL. Increases in airway reactivity to histamine and inflammatory cells in bronchoalveolar lavage after the late asthmatic response in an animal model. *Am Rev Respir Dis* 1985; 131: 875–879.
 21. Metzger WJ, Sjoerdsma K, Brown L, Coyle T, Page C, Touway C. The late phase asthmatic response in the allergic rabbit: a role for platelet-activating factor (PAF) and modification by PAF antagonist, ginkgolide BN 52021. *In: Braquet P, ed. Ginkgolides: Chemistry, Biology, Pharmacology and Clinical Perspectives.* Barcelona, J.R. Prous Science Publishers, 1988; Vol. 1: pp. 313–331.
 22. Bloom JW, Baumgartener-Folkerts C, Palmer JD, Halonoen M. Airway cholinergic responsiveness in rabbits in relation to antigen sensitization and challenge. *Immunopharmacology* 1988; 15: 157–167.
 23. Minshall EM, Riccio MM, Herd CM, *et al.* A novel animal model for investigating persistent airway hyperresponsiveness. *J Pharmacol Toxicol Methods* 1993; 30: 177–188.
 24. Herd CM, Donigi-Gale D, Shoupe TS, Burroughs DA, Yeadon M, Page CP. Effect of a 5-lipoxygenase inhibitor and leukotriene antagonist (PF 5901) on antigen-induced airway responses in neonatally immunized rabbits. *Br J Pharmacol* 1994; 112: 292–298.
 25. Riedel F. Influence of adjuvant factors on development of allergy. *Pediatr Allergy Immunol* 1991; 2: 1–5.
 26. Holt PG. Environmental pollutants as co-factors in IgE production. *Curr Opin Immunol* 1989; 1: 643–646.
 27. Douglas GJ, Price JF, Page CP. A method for the long-term exposure of rabbits to environmental pollutant gases. *Eur Respir J* 1994; 7: 1516–1526.
 28. Cockcroft DW, Killian DN, Mellon JJA, Hargreave FE. Bronchial reactivity to inhaled histamine: a method and clinical survey. *Clin Allergy* 1977; 7: 235–243.
 29. Holt PG, Britten D, Sedgewick JD. Suppression of IgE responses by antigen inhalation: studies on the role of genetic and environmental factors. *Immunology* 1987; 60: 97–102.
 30. Platts-Mills TAE. Dust mite allergens and asthma: report of a second international workshop. *J Allergy Clin Immunol* 1992; 89: 1046–1059.
 31. Matsumura Y. The effects of ozone, nitrogen dioxide, and sulfur dioxide on the experimentally-induced allergic respiratory disorder in guinea-pigs. I. The effect on sensitization with albumin through the airway. *Am Rev Respir Dis* 1970; 102: 430–437.
 32. Matsumura Y, Mizuno K, Miyamoto T, Suzuki T, Oshima Y. The effects of ozone, nitrogen dioxide, and sulfur dioxide on the experimentally-induced allergic respiratory disorder in guinea-pigs. IV. Effects on respiratory sensitivity to inhaled acetylcholine. *Am Rev Respir Dis* 1972; 105: 262–267.
 33. Chitano P, Boniotti A, Papi A, *et al.* Rat bronchial smooth muscle responses *in vitro* after prolonged exposure to nitrogen dioxide. *Eur Resp J* 1993; 6 (Suppl. 17): 330s.
 34. Chitano P, Coser E, Lucchini RE, *et al.* *In vitro* exposure to nitrogen dioxide (NO₂) does not alter bronchial smooth muscle responsiveness in ovalbumin-sensitized guinea-pigs. *Pulmon Pharmacol* 1994; 7: (in press).
 35. Riedel F, Krämer M, Schiebenbogen C, Rieger CHL. Effects of SO₂ exposure on allergic sensitization in the guinea-pig. *J Allergy Clin Immunol* 1988; 82: 527–534.
 36. Riedel F, Naujokat S, Rüschoff J, Petzoldt S, Rieger CHL. SO₂-induced enhancement of inhalative allergic sensitization: inhibition by anti-inflammatory treatment. *Int Arch Allergy Appl Immunol* 1992; 98: 386–391.