

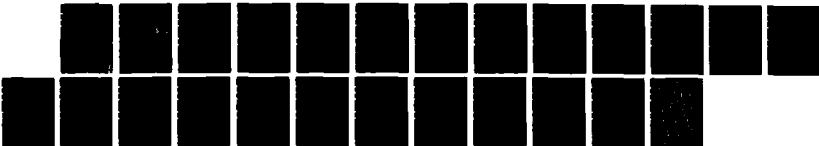
NO 858 704

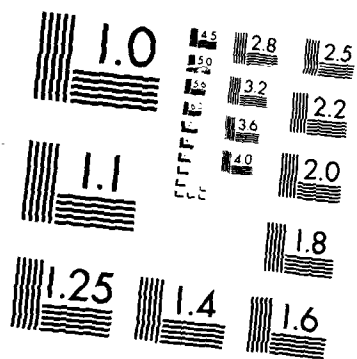
STUDY OF ERYTHROCYTE LIPID PEROXIDATION AND  
DEFORMABILITY IN INDIVIDUALS WITH SICKLE CELL TRAIT  
(NBC)(U) MEHARRY MEDICAL COLL NASHVILLE TN S K DAS  
14 FEB 88 DAMD17-87-C-7027 F/G 6/5

171

UNCLASSIFIED

NL





DTIC FILE COPY

2

AD \_\_\_\_\_

STUDY OF ERYTHROCYTE LIPID PEROXIDATION AND DEFORMABILITY IN  
INDIVIDUALS WITH SICKLE CELL TRAIT (HBC)

AD-A195 704

ANNUAL REPORT

Salil K. Das

February 14, 1988

Supported by

DTIC  
ELECTE  
MAY 24 1988  
S D  
CAD

U. S. ARMY MEDICAL RESEARCH AND DEVELOPMENT COMMAND  
Fort Detrick, Frederick, Maryland 21701-5012

Contract No. DAMD17-87-C-7027

Meharry Medical College  
1005 David Todd Blvd  
Nashville, TN 37208

Approved For Public Release: Distribution Unlimited

The findings in this report are not to be construed as an  
Official Department of the Army position unless so designated by  
other authorized document

88 5 23 091

**REPORT DOCUMENTATION PAGE**

Form Approved  
OMB No. 0704-0188

1a. REPORT SECURITY CLASSIFICATION Unclassified		1b. RESTRICTIVE MARKINGS	
2a. SECURITY CLASSIFICATION AUTHORITY		3. DISTRIBUTION / AVAILABILITY OF REPORT  Approved for public release; distribution unlimited	
2b. DECLASSIFICATION / DOWNGRADING SCHEDULE			
4. PERFORMING ORGANIZATION REPORT NUMBER(S)		5. MONITORING ORGANIZATION REPORT NUMBER(S)	
6a. NAME OF PERFORMING ORGANIZATION Meharry Medical College	6b. OFFICE SYMBOL (If applicable)	7a. NAME OF MONITORING ORGANIZATION	
6c. ADDRESS (City, State, and ZIP Code) 1005 David Todd Blvd., Nashville, TN 37208		7b. ADDRESS (City, State, and ZIP Code)	
8a. NAME OF FUNDING / SPONSORING ORGANIZATION U.S. Army Medical Research & Development Command	8b. OFFICE SYMBOL (If applicable)	9. PROCUREMENT INSTRUMENT IDENTIFICATION NUMBER DAMD17-87-C-7027	
8c. ADDRESS (City, State, and ZIP Code) Fort Detrick, Frederick, MD 21701		10. SOURCE OF FUNDING NUMBERS	
		PROGRAM ELEMENT NO. 61102A	PROJECT NO. 3M1-61102BS10

11. TITLE (Include Security Classification)  
Study of Erythrocyte Lipid Peroxidation and Deformability in Individuals with Sickle Cell Trait

12. PERSONAL AUTHOR(S)  
Salil K. Das

13a. TYPE OF REPORT Annual	13b. TIME COVERED FROM 1/15/87 TO 1/14/88	14. DATE OF REPORT (Year, Month, Day) 1988/ February 14	15. PAGE COUNT 21
-------------------------------	--	--	----------------------

16. SUPPLEMENTARY NOTATION

17. COSATI CODES			18. SUBJECT TERMS (Continue on reverse if necessary and identify by block number) → Sickle Cell Trait; Physical Stress; Lipid Peroxidation; Deformability; exercise (physiology); (x) ←
FIELD	GROUP	SUB-GROUP	
06	16		
06	03		

19. ABSTRACT (Continue on reverse if necessary and identify by block number)  
Tread mill exercise causes an increase in the activity of SOD, GSHPx and 6-PGA dehydrogenase without any change in the activity of catalase and G-6-P dehydrogenase in SCT RBC. However, it did not affect the activity of any of the peroxide scavengers, but increased the activity of both NADPH generating enzymes in normal. Exercise did not have any significant effect on lipid peroxidation potential of either normal or SCT RBC. However, it caused an increase in the Ca<sup>++</sup> content in SCT which was associated with an increase in the activity of Na<sup>+</sup>, K<sup>+</sup> - Ca<sup>++</sup>-ATPases of RBC membranes. Furthermore, exercise caused an increase in the amount of light membranes in SCT RBC.

20. DISTRIBUTION / AVAILABILITY OF ABSTRACT <input checked="" type="checkbox"/> UNCLASSIFIED/UNLIMITED <input checked="" type="checkbox"/> SAME AS RPT. <input type="checkbox"/> DTIC USERS		21. ABSTRACT SECURITY CLASSIFICATION Unclassified	
22a. NAME OF RESPONSIBLE INDIVIDUAL Mary Frances Bostian		22b. TELEPHONE (Include Area Code) 301-663-7325	22c. OFFICE SYMBOL SGRD-RMI-S

SUMMARY

Adverse effects of physical stress in SCT individuals may be associated with biochemical changes in RBC. In this study, we have monitored the effects of tread mill exercise on several biochemical parameters of RBC in 18-40 years old normal and SCT male subjects. Basal activities of catalase and G-6-P dehydrogenase were similar in normal and SCT; however the basal activities of SOD, GSHPx and 6-PGA dehydrogenase were lower in SCT than normal. Exercise caused an increase in the activity of SOD, GSHPx and 6-PGA dehydrogenase without any change in the activity of catalase and G-6-P dehydrogenase in SCT. On the other hand, exercise did not affect the activity of any of the peroxide scavengers, but increased the activity of both NADPH generating enzymes in normal. Even though exercise increased the activity of some of the peroxide scavengers in SCT, this increase was not sufficient to bring the values to the basal levels of the control. Exercise did not have any significant effect on the lipid peroxidation potential of either normal or SCT RBC. However, it caused an increase in the  $Ca^{++}$  content in SCT which was associated with an increase in the activity of  $Na^+, K^+$ , and  $Ca^{++}$  ATPases of RBC membranes. Not only did physical stress increase the density of cell membranes as indicated by an increase in the amount of heavy membranes and a corresponding decrease in the amount of light membranes, but it also brought about changes in the activity of some important enzymes.



Accession For	
NTIS CRA&I	<input checked="" type="checkbox"/>
DTIC TAB	<input type="checkbox"/>
Unannounced	<input type="checkbox"/>
Justification	
By	
Distribution	
Availability Codes	
Dist	Avail and/or Special
A-1	

## TABLE OF CONTENTS

	Page
Summary	1
Table of Contents	2
List of Tables	3
Body of the Report	4-11
Introduction	4
Objective	4
Methodology	4-5
Significant Findings	5-8
Conclusions	9
Literature Cited	9-11
Appendixes : 8 Tables	12-20
Fig. 1 ( Preparation of Erythrocyte Membrane )	
Distribution list	21

## LIST OF TABLES

1. References for Assay Systems.
2. Effect of Physical Stress on Complete Blood Count and Blood Gas Profile of Normal and Sickle Cell Trait Individuals.
3. Effect of Physical Stress on Protein Content of RBC and Ghost of Normal and Sickle Cell Trait Individuals.
4. Effect of Physical Stress on Peroxide Scavengers of RBC and Ghost of Normal and Sickle Cell Trait Individuals.
5. Effect of Physical Stress on  $\text{Na}^+$ ,  $\text{K}^+$ , and  $\text{Ca}^{++}$ -ATPase Activities in Erythrocyte Membranes of Normal and Sickle Cell Trait Individuals.
6. Effect of Physical Stress on Glucose-6-Phosphate and 6-phosphogluconate Dehydrogenase Activities in Normal and Sickle Cell Trait Individuals.
7. Effect of Physical Stress on Intracellular and Membrane  $\text{Ca}^{++}$  ion Concentration of RBC of Normal and Sickle Cell Trait Individuals.
8. Effect of Physical Stress on in vitro Lipid Peroxidation of RBC of Normal and Sickle Cell Trait Individuals.

## BODY OF THE REPORT

### 1. INTRODUCTION

Controversy exists concerning the risks assumed by individuals with sickle cell trait (SCT) while engaged in military activities that involve exposure to hypoxic environments and other stress situations. Some claim that individuals with SCT are relatively asymptomatic, have normal life span ( 1,2 ) and their responses to exercise are not impaired ( 2-4 ). However, several other reports indicate that physical stress is hazardous to individuals with SCT and cause several problems, such as renal failure ( 5,6 ), splenic infarction ( 7-10 ), intravascular coagulation ( 5,6 ), rhabdomyolysis ( 5,6,11 ), sickle cell anemia ( 12 ), lowering of exercise values for heart rate and work load ( 13 ) and sudden death ( 14- 17 ).

It is known that high morbidity and mortality in individuals with sickle cell disease are associated with red blood cell abnormality in terms of hemoglobin polymerization and membrane property changes ( 18 ). Furthermore, we have earlier reported that the sickle erythrocyte membrane is more susceptible to peroxidative damage due to some intracellular protective defect ( 19 ). It is therefore important that we know whether the adverse effects of physical activity on SCT individuals is related to RBC membrane changes.

### 2. OBJECTIVE

The long range objective of this project is to test the HYPOTHESIS that individuals with SCT undergo some changes in specific clinical, biochemical and physical properties of their red blood cells under conditions of (a) physical stress and/or (b) deoxygenation.

### 3. METHODOLOGY

13-40 yrs old male subjects with or without SCT are subjected to continuous graded exercise on a Tread Mill according to Bruce protocol, with electrocardiographic monitoring, followed by 15 minutes of rest. Blood is drawn before exercise, immediately after exercise, and after 15 minutes of rest, for analysis of clinical, biochemicals and physical parameters. During the first year of the project, we have subjected 8 normal and 5 sickle cell trait subjects to continuous graded exercise on the Tread Mill. Furthermore, we have used blood from 6 AA and 3 SS male subjects for standardization of several experimental conditions. Data are treated statistically and

the differences between AA and SCT groups are determined by calculating the t statistic for two means, i.e., the nonpaired t-test (20). It should be pointed out that additional data will be collected on both AA and SCT subjects during the second year of the project. Therefore, we are reporting here only the mean data for both groups. Statistical interpretation will be made after collecting additional data.

For clinical parameters, we record CBC and blood gas profile as well as cardiac function ( EKG, blood pressure, heart rate ). For biochemical parameters, we record (a) the protein content of RBC and ghosts, (b) the peroxide scavenger status of RBC by measuring the activity of SOD, GSHPx and catalase, (c) the activity of NADPH generating enzymes, such as G-6-P and 6-PGA dehydrogenase, (d) the activity of  $\text{Na}^+$ ,  $\text{K}^+$ , and  $\text{Ca}^{++}$  - ATPases, (e) the intracellular and membrane  $\text{Ca}$  concentration, and (f) the peroxidation potential of RBC lipids. For physical parameters, we record the filtrability and deformability of RBC under oxygenated and deoxygenated conditions. These parameters are recorded by following the procedures referred in Table 1 ( see Appendix ).

In this study, we prepare two types of RBC membranes, differing in density and they are referred as heavy and light. Since the preparation of membrane is not parallel to current scientific technique, a schematic representation of the membrane preparation is shown in Fig. 1 ( see Appendix ).

#### 4. SIGNIFICANT FINDINGS

##### A. Effect of Physical Stress on Complete Blood Cell Count and Blood Gas Profile of Normal and Sickle Cell Trait Individuals ( see Table 2 ).

1. The WBC count is increased during exercise and returns to the basal level after resting in both normal and SCT. It is noteworthy that the basal WBC count is less in SCT than normal.
2. %  $\text{O}_2\text{Hb}$  is less in SCT than normal. Exercise increases the level in both. However, during resting, it is brought back to the basal level in normal, but not in SCT.
3. % CO Hb level in normal is decreased remarkably during exercise and comes back to the basal level

after resting. However, in SCT, there is no remarkable change due to exercise. The basal level is less in SCT than that in normal.

4. % met Hb value is decreased in normal, but increased in SCT during exercise and resting. The basal level is less in SCT than normal.
5. The basal value of O<sub>2</sub> ct is same in AA and SCT. Exercise causes an increase in both. After resting, the value returns to the basal level in AA, but not in SCT.
6. pH becomes slightly acidic during exercise, but returns to the basal level during resting in both cases.
7. pO<sub>2</sub> value is lower in SCT than normal. The value is increased during exercise in both, returning to the basal level in normal after resting. However, in SCT, the value remained increased during resting.
8. The value for BE (base excess) is decreased from a positive to a negative number in AA due to exercise. After resting, this value returns to the basal level. In SCT, the value is also decreased during exercise, but the change is minimal in comparison to that in AA.
9. Other parameters (RBC count, Hb, Hct %, mcv, pCO<sub>2</sub>, HCO<sub>3</sub><sup>-</sup> and CO<sub>2</sub>ct) did not change by exercise in either normal or SCT.

B. Effect of Physical Stress on Protein Content of RBC and Ghost of Normal and SCT Individuals (see Table 3).

1. There is no remarkable change in the protein content of RBC during exercise in either AA or SCT.
2. 3 K pellet from SCT contains more protein than that of AA during exercise and resting, suggesting that exercise causes some change in SCT RBC whereby it becomes more resistant to osmotic shock.
3. Protein content is increased in heavy membrane but decreased in light membrane in SCT during exercise. No such change occurs in AA. It indicates that RBC membrane becomes more rigid in SCT due to exercise.

4. Light membrane has more proteins than heavy membranes in both groups.
- C. Effect of Physical Stress on Peroxide Scavengers of RBC and Ghost of Normal and Sickle Cell Trait Individuals (see Table 4).
1. SCT RBC hemolyzate has less superoxide dismutase (SOD) than normal. SOD activity is continually increased in SCT during exercise and resting; however the level is still lower than the basal level of AA. Exercise does not have any remarkable effect on AA RBC.
  2. SCT membranes (both light and heavy) have lower SOD level than normal. Exercise does not have any remarkable effect on either AA or SCT.
  3. RBC hemolyzate and membranes (both light and heavy) have lower GSHPx activity in SCT than normal. Exercise increases the activity in RBC of both normal and SCT. Between peak exercise and resting, the value decreases in normal, but continually increases in SCT.
  4. There is no remarkable effect of exercise on catalase activity in either normal or SCT RBC. However, in heavy membrane of SCT, there is an increase in catalase activity between peak exercise and resting.
- D. Effect of Physical Stress on  $\text{Na}^+$ ,  $\text{K}^+$ , and  $\text{Ca}^{++}$ -ATPase Activities in Erythrocyte Membranes of Normal and Sickle Cell Trait Individuals (see Table 5).
1. Both heavy and light membranes contain less  $\text{Na}^+$ ,  $\text{K}^+$ -ATPase activity in SCT than AA. During exercise, the activity decreases to some extent in AA. But in SCT, the value is increased remarkably beyond the basal level of AA.
  3. No significant difference is observed in  $\text{Ca}^{++}$ -ATPase activity in light membrane between normal and SCT. The activity is increased during exercise and resting in SCT but not in AA.
  4. Heavy membrane has higher  $\text{Ca}^{++}$ -ATPase activity in SCT than normal. The activity in heavy membrane is not affected by exercise in AA, but is decreased in SCT. Between peak exercise and resting, the activity in SCT is increased remarkably.

E. Effect of Physical Stress on G-6-P and 6-PGA Dehydrogenase Activity in Normal and Sickle Cell Trait Individuals ( see Table 6 ).

1. There is no remarkable difference in the basal G-6-P dehydrogenase activity between AA and SCT. However, the basal 6-PGA dehydrogenase activity is lower in SCT than AA. Exercise causes an increase in the activity of both enzymes in AA, whereas it causes a decrease in SCT. However, between peak exercise and resting, the activity in SCT is increased, whereas in AA, it is decreased.

F. Effect of Physical Stress on Intracellular and Membrane  $Ca^{++}$  Ion Concentration of RBC of Normal and SCT Individuals (see Table 7).

1. There is no significant change in normal intracellular RBC, 3 K pellet and heavy membrane  $Ca^{++}$  ion concentration during exercise and resting. However, in normal light membrane,  $Ca^{++}$  ion concentration is decreased during exercise.
2. SCT has higher intracellular and membrane  $Ca^{++}$  ion concentration than normal. During exercise, the value is increased in all fractions except in light membrane in which a decrease is observed. After resting, the calcium level is returned to the basal level in all fractions.

G. Effect of Physical Stress on In Vitro Lipid Peroxidation of RBC of Normal and SCT Individuals (see Table 8).

1. RBC has higher lipid peroxidation potential in SCT than AA.
2. Exercise causes an increase in the MDA production in AA, but not in SCT.
3. The endogeneous level of MDA is higher in SCT than AA.

H. Effect of Physical Stress on Deformability and Calcium Accumulation of RBC of Normal and SCT Individuals.

Currently, we are standardizing experimental conditions for filtering RBC drawn from normal, SCT and SS subjects through a 5  $\mu$  nucleopore membrane filter under both oxygenated and deoxygenated conditions, to monitor the rise in  $pO_2$  by a Grass Polygraph Recorder through a statham P-23 XL Pressure Transducer.

## 5. CONCLUSIONS

Physical stress causes an increase in the density of RBC membrane of SCT subjects as evident by an increase in the amount of heavy membrane and a corresponding decrease in the amount of light membrane. This observation needs to be confirmed by additional data which will be gathered from the second year of the project. After establishing this important finding, we will proceed to study the mechanism of this event. In order to achieve this goal, we would like to propose the following future studies ( January 1989 - December 1991 ).

- Aim = 1. Whether any alteration of lipid/protein ratio due to physical stress is the cause for a change in the RBC membrane density in SCT ?
- Aim = 2. Whether any alteration of membrane fluidity due to physical stress is associated with RBC membrane density in SCT ?
- Aim = 3. Whether the heavy membrane comes from the heavy cells (high density) and the light membrane comes from the light cells (low density). Does exercise cause part of the light cells to be converted to heavy cells. If so, is this event related to the accumulation of calcium in RBC ?
- Aim = 4. Is there any relationship between loss of deformability and increase in RBC membrane density due to physical stress in SCT ?
- Aim = 5. Is there any association between calcium accumulation in RBC and loss of filtrability due to exercise in SCT ?
- Aim = 6. Is lectin binding property of RBC membrane protein altered due to physical stress in SCT ?
- Aim = 7. Is there any ultrastructural change in RBC membrane due to physical stress in SCT ?

## 6. LITERATURE CITED

1. Ashcraft, M.T and Desai, P. (1976) Mortality And Morbidity In Jamaican Adults With Sickle Cell Trait and With Normal Hemoglobin Followed Up For 12 Years., Lancet 2 : 784.

2. Ramirez, A., Hartley, L. H., Rhodes, D. and Abelman, W. H. (1976) Morphological Features of Red Blood Cells in Subjects With Sickle Cell Trait., Arch. Intern Med. 36 : 1064-1066.
3. Robinson, J. R., Stone, W. J., and Asendorf, A. D. (1976) Exercise Capacity of Black Sickle Cell Trait Males. Med. Sci. Sports 8 : 244-245.
4. Holden, C. (1981) Air Force Challenged on Sickle Trait Policy. Science 211: 257.
5. Koppes, G. M., Daly, J. J., Coltman, C. A. and Butkus, D. E. (1977) Exertion-Induced Rhabdomyolysis With Acute Renal Failure and Disseminated Intravascular Coagulation in Sickle Cell Trait. Amer. J. Med. 63: 313-317.
6. Hynd, R. F., Bharadwaja, K., Mitas, J. A. and Lord, J. T. (1982) Rhabdomyolysis, Acute Renal Failure, and Disseminated Intravascular Coagulation in a Man With Sickle Cell Trait. Southern Med. J. 78 : 890-891.
7. Conn, H. O. (1954) Sickle Cell Trait and Splenic Infarction Associated With High-Altitude Flying. New Eng. J. Med. 251: 417-420.
8. Cox, R. E. (1982) Splenic Infarct in a White Man With Sickle Cell Trait . Ann Emerg. Med. 11 : 668-669.
9. Diggs, L. W. (1984) The Sickle Cell Trait in Relation to the Training and Assignment of Duties in the Armed Forces: II. Aseptic Splenic Necrosis. Aviat. Space Environ. Med. 55: 271-276.
10. Lane, P. A. and Githens, J. H. (1985) Splenic Syndrome at Mountain Altitudes in Sickle Cell Trait. Its Occurrence in Nonblack Persons. JAMA 253: 2251-2254.
11. Zimmerman, M. C, Mummert, K., Granatir, R. and Cioffi, R. (1974) Sickle Crisis Precipitated By Exercise Rhabdomyolysis in a Patient With Sickle Cell Trait: Case Report. Milit. Med. 139: 313-315.
12. Mease, A. D., Longo, D. L. and Hakami, N. (1976) Sicklemia and Unexpected Death in Sickle Cell Trait: Observations of Five Cases. Milit. Med. 141: 470-473.

13. Alpert, B. S., Flood, N. L., Strong, W. B., Blair, J. R., Walpert, J. B. and Levy, A. L. (1985) Responses to Exercise in Children With Sickle Cell Trait. *Am. J. Dis. Child* 136: 1002-1004.
14. Rosenheim, S. H. (1970) Sickle-Cell Trait and Sudden Death (Cont.) *New Eng. J. Med.* 283: 1229-1231.
15. Jones, S. R., Binder, R. A. and Donowho, E. M. (1970) Sudden Death in Sickle-Cell Trait. *New Eng. J. Med.* 282: 323-325.
16. Kark, J. A., Posey, D. M., Schumacher, H. R. and Ruehle, C. J. (1987). Sickle-Cell Trait As A Risk Factor For Sudden Death In Physical Training. *New Eng. J. Med.* 317: 781-787.
17. Monahan, T. (1987) Sickle Cell Trait. A Risk for Sudden-Death During Physical Stress. *Phys. Sport* 15 : 143.
18. Rucknagel, D. L. and Neel, J. V. (1961). The Haemoglobinopathies. *Prog. Med. Genet.* 1 : 158.
19. Das, S. K. and Nair, C. R. (1980) Superoxide Dismutase, Glutathione Peroxidase, and Catalase and Lipid Peroxidation of Normal and Sickled Erythrocytes. *Brit. J. Hematol.* 44 : 87-92.
20. Alder H. L. and Roessler, E. B. (1975) Introduction to Probability and Statistics, W. H. Freeman and Company, San Francisco, California.

TABLE 1

ASSAY SYSTEMS

Protein	Lowry et al., J. Biol. Chem. 193 : 265, 1951
Superoxide Dismutase	Hyland et al., Anal. Biochem. 135: 280, 1983
Glutathione Peroxidase	Flohe and Gunzler, Methods in Enzymol. 105 : 114, 1984
Catalase	Sinha, Anal. Biochem. 47: 389, 1972
6-6-PD and 6-PGD	Beutler, in Methods in Hematol: Red Cell Metab. 16 : 57, 1986
Na <sup>+</sup> , K <sup>+</sup> , and Ca <sup>++</sup> - ATPases	Sen & Ray, Arch. Biochem. Biophys. 198 : 548, 1979
Calcium	Olson, J. Membrane Biol. 48: 265, 1979
Peroxidation Potential	Stocks & Dormandy, Br. J. Haematol. 20 : 95, 1971

TABLE 2

**Effect of Physical Stress on Complete Blood Count (CBC ) and Blood Gas Profile of Normal and Sickle Cell Trait Individuals**

Parameter	Before Exercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
RBC ( x10 <sup>9</sup> /ml)	5.06	5.40	5.14	5.61	4.83	5.57
WBC ( x10 <sup>9</sup> /ml)	5.34	4.05	7.22	5.10	5.38	4.70
Hgb (g/dl )	15.27	15.50	15.97	16.18	14.86	15.57
Hct (%)	44.83	45.30	46.14	47.25	43.73	45.60
mcv (fl)	89.83	84.00	90.25	84.50	90.50	84.50
% O <sub>2</sub> Hb	57.67	44.00	80.58	59.30	55.83	70.25
% CO Hb	1.70	0.80	0.23	0.85	1.43	0.95
%met Hb	0.28	0.11	0.23	0.15	0.22	0.35
O <sub>2</sub> ct	9.81	9.20	16.67	13.05	12.05	14.85
pH	7.336	7.320	7.200	7.284	7.285	7.354
p CO <sub>2</sub> (mmHg)	53.38	54.35	52.02	52.30	47.83	55.05
p O <sub>2</sub> (mmHg)	42.89	29.05	52.77	37.50	35.15	43.35
BE (mEQ/L)	+ 7.84	+ 7.35	- 3.09	+ 2.40	+ 4.80	+ 4.55
HCO <sub>3</sub> <sup>-</sup> (mEQ/L)	27.58	27.25	20.03	23.70	22.80	24.35
CO <sub>2</sub> ct (mEQ/L)	29.21	28.95	21.45	25.30	24.53	25.70

TABLE 3

**Effect of Physical Stress on Protein Content of RBC and Ghost of Normal and Sickle Cell Trait Individuals**

Sample	Before Exercise		AT Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
RBC Hemo-lysate	43.52*	38.48	41.71	34.41	43.02	44.13
Unhemolyzed cells (3k pellet)	0.22	0.25	0.18	0.42	0.21	0.42
Heavy Membrane	0.45	0.51	0.41	0.87	0.45	0.62
Light Membrane	0.80	0.92	0.89	0.67	0.84	0.64

\* Values are mean pg/cell

TABLE 4

**Effect of Physical Stress on Peroxide Scavengers of RBC and  
Ghost of Normal and Sickle Cell Trait Individuals**

Sample	Before Exercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
<b>A. Superoxide Dismutase (unit <math>\times 10^{-9}</math> / cell )</b>						
a.Hemolysate	60.96	16.87	62.48	22.70	60.42	44.28
b.Heavy Mem -brane	2.79	1.19	3.18	1.99	3.96	2.10
c.Light Mem -brane	5.06	1.34	4.81	1.57	5.91	1.66
<b>B.Glutathione Peroxidase ( <math>\mu</math> moles <math>\times 10^{-10}</math> NADPH oxidized /cell /min)</b>						
a.Hemolysate	30.89	18.15	45.44	19.01	38.42	28.75
b.Heavy Mem -brane	0.60	0.19	0.31	0.95	0.51	0.50
c.Light Mem -brane	0.63	0.35	0.48	0.21	0.40	0.67
<b>C.Catalase ( <math>\mu</math> moles <math>\times 10^{-7}</math> of <math>H_2 O_2</math> decomposed / cell /min)</b>						
a.Hemolysate	26.38	23.97	28.31	24.49	23.34	25.69
b.Heavy Mem -brane	0.12	0.11	0.17	0.27	0.16	0.41
c.Light Mem -brane	0.44	0.57	0.41	0.40	0.48	0.41

TABLE 5

**Effect of Physical Stress on Na<sup>+</sup>, K<sup>+</sup> - and Ca<sup>2+</sup> -ATPase Activities in Erythrocyte Membranes of Normal and Sickle Cell Trait Individuals**

Sample	Before Exercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
<b>A. Na<sup>+</sup>, K<sup>+</sup> - ATPase</b>						
Heavy Membrane	44.61*	52.86	34.79	74.81	39.51	66.99
Light Membrane	100.57	50.03	75.51	177.71	85.05	142.94
<b>B. Ca<sup>2+</sup> - ATPase</b>						
Heavy Membrane	70.51	100.71	69.47	60.27	53.49	162.94
Light Membrane	71.03	71.73	49.82	130.47	64.46	172.75

\* Values are mean n moles  $\times 10^{-9}$  P<sub>i</sub> formed /cell /hr.

TABLE 6

**Effect of Physical Stress on Glucose-6-Phosphate and 6-Phosphogluconate Dehydrogenase Activity in Normal and Sickle Cell Trait Individuals**

Sample	Before EXercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
<b>A. Glucose-6-PO<sub>4</sub> Dehydrogenase</b>						
a. Hemolysate	103.22*	98.81	184.01	49.63	118.40	77.67
b. Heavy Mem -brane	3.33	4.66	1.39	1.69	2.41	0.92
c. Light Mem -brane	3.84	9.40	20.67	1.29	4.80	2.30
<b>B. 6- Phosphogluconate Dehydrogenase</b>						
a. Hemolysate	82.90	37.58	204.62	35.80	125.40	86.34
b. Heavy Mem -brane	1.14	0.86	1.04	0.85	1.08	1.10
c. Light Mem -brane	4.00	0.78	24.10	1.19	6.30	1.72

\* Value are mean  $\mu$  moles  $\times 10^{-9}$  NADP reduced /cell /min.

TABLE 7

The Effect of Physical Stress on Intracellular and Membrane  
 $\text{Ca}^{2+}$ -ion concentration of RBC of Normal and Sickle Cell  
 Trait Individuals

Sample	Before Exercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
a. RBC	34.10 *	68.30	41.60	100.0	35.20	51.60
b. Unhemolyzed cell (3K pellet )	2.30	6.50	3.20	15.5	2.50	7.30
c. Heavy Membrane	8.60	9.40	9.85	18.3	8.90	10.10
d. Light Membrane	16.34	24.70	8.80	17.6	10.2	25.10

\* Values are mean f moles x  $10^{-9}$  / cell

TABLE 8

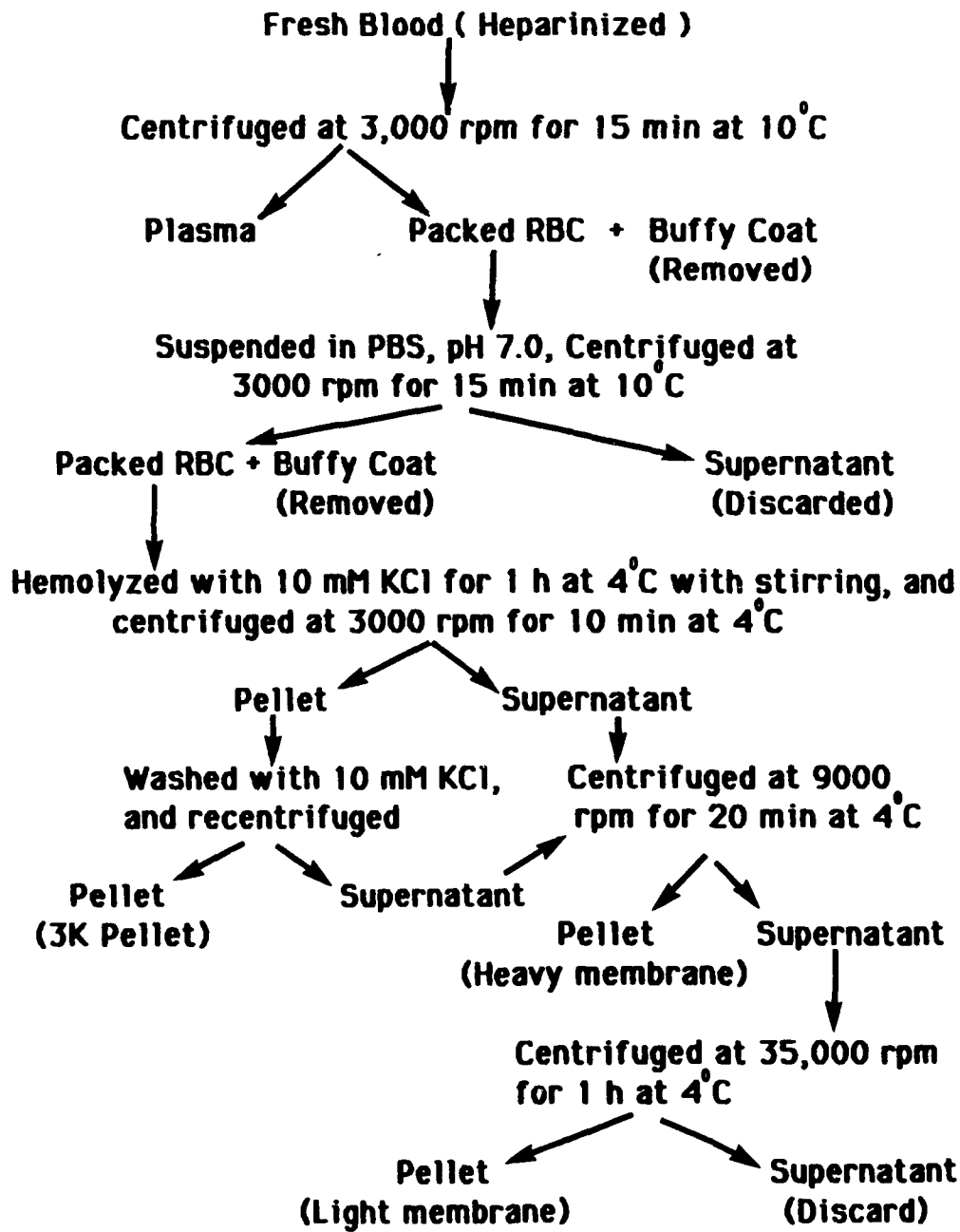
Effect of Physical Stress on *in vitro* Lipid Peroxidation of RBC  
Of Normal and Sickle Cell Trait Individuals

Sample	Before Exercise		At Peak Exercise		After Exercise	
	Normal	Sickle	Normal	Sickle	Normal	Sickle
a. RBC	5.66 *	8.65	7.62	11.24	9.76	9.98
b. RBC + H <sub>2</sub> O <sub>2</sub>	16.56	26.53	20.07	23.02	27.18	25.59
c. RBC + H <sub>2</sub> O <sub>2</sub> + Na-azide	267.28	52.94	238.93	49.04	207.44	50.66

\* Values are mean n moles x10<sup>-9</sup> MDA formed /cell  
N.D = Not detected.

FIG. 1

Preparation of Erythrocyte Membrane



DISTRIBUTION LIST

5 copies            Director  
Walter Reed Army Institute of Research  
Walter Reed Army Medical Center  
ATTN: SGRD-UWZ-C  
Washington, DC 20307-5100

1 copy             Commander  
US Army Medical Research and Development Command  
ATTN: SGRD-RMI-S  
Fort Detrick, Frederick, Maryland 21701-5012

2 copies            Defense Technical Information Center (DTIC)  
ATTN: DTIC-DDAC  
Cameron Station  
Alexandria, VA 22304-6145

1 copy             Dean  
School of Medicine  
Uniformed Services University of the  
Health Sciences  
4301 Jones Bridge Road  
Bethesda, MD 20814-4799

1 copy             Commandant  
Academy of Health Sciences, US Army  
ATTN: AHS-CDM  
Fort Sam Houston, TX 78234-6100

ENID

DATED

FILM

8-88  
DTIC