

paraventricular, supraoptic and arcuate nucleus. The distribution pattern of these three neurohormone immunoreactive cells, however, were apparently different. The MET-ENK immunoreactive cell group were also found in the ventromedial nucleus and NT positive cells were found in the lateral hypothalamus. A small number of  $\beta$ -END immunoreactive nerve terminals were found in the internal layer of the median eminence. Two weeks after hypophysectomy, a number of  $\beta$ -END immunoreactive nerve terminals appeared in the external and internal layer of the median eminence. In the median eminence of the normal control rat, a dense meshwork of the MET-ENK and NT immunoreactive nerve terminals was observed exclusively in the external layer abutting on the portal vessels. The elution-restaining technique did not show any co-existence of these three neurohormones in the same neuron of the hypothalamus, although the above-mentioned two or three neurohormones have been reported to co-exist in various combination in the same cell of the anterior or medial lobe of the hypophysis.

The present data suggest that  $\beta$ -END, MET-ENK and NT have distinct neuronal system in the hypothalamus and that  $\beta$ -END as well as MET-ENK and NT is released into the portal vessels of the median eminence to modulate the anterior pituitary function.

#### 10. Involvement of Calcium Ion in the Release of Immunoreactive $\beta$ -endorphin-like Peptide from Dispersed Cells of the Neurointermediate Lobe of the Rat Pituitary Gland

Y. SAKODA, M. MUNEMURA, Y. HATADA,  
H. NISHIMURA, S. FUJISAKI, M. MAEYAMA\*\*  
and E. MIYAMOTO\*

*Dept. Obst. & Gynec.,*

*\*Dept. of Pharmacology,*

*Kumamoto Univ. Med. Sch., Kumamoto*

*\*\*Osaka Teishin Hosp., Osaka*

$\text{Ca}^{2+}$  plays an important role in hormone secretion. It was reported that  $\text{Ca}^{2+}$  is essential for the release mechanism of pituitary hormones. We investigated the involvement of  $\text{Ca}^{2+}$  and adenosine 3',5'-monophosphate (cAMP) system in the release of immunoreactive  $\beta$ -endorphin-like peptide (IR- $\beta$ -EP). The intermediate lobe of the rat pituitary gland is a homogeneous population of cells.

cAMP analogs, phosphodiesterase inhibitor, L-isoproterenol, cholera toxin and forskolin stimulated the release of IR- $\beta$ -EP from the dispersed cells of the

neurointermediate lobe rat pituitary gland. A calcium antagonist (verapamil) inhibited the effects of these stimulants, but cAMP accumulation was not inhibited. High  $\text{K}^{+}$  stimulated the release of IR- $\beta$ -EP without cAMP accumulation.  $\text{Na}^{+}$  ionophore, monensin enhanced the release of IR- $\beta$ -EP, but did not stimulate the formation of cAMP.

These findings suggest that  $\text{Ca}^{2+}$  and cAMP system might be participated in the release mechanism of IR- $\beta$ -EP. Intra- and extracellular  $\text{Ca}^{2+}$  may have an essential role in the release of pituitary hormone secretion.

#### 11. $\beta$ -endorphin and Gonadotropin in Estradiol Induced Feedback Test—Comparison between Normal Cycle and Hypothalamic Amenorrhea—

H. SUMIOKI, T. UTSUNOMIYA, K. IWASATO,  
K. MATSUOKA, M. KORENAGA and T. KADOTA

*Dept. Obst. & Gynec.,*

*Med. Institute of Bioregulation,*

*Kyushu Univ., Beppu*

Plasma variations of  $\beta$ -endorphin ( $\beta$ -E) and gonadotropin (Gn) in estradiol induced positive feedback test were investigated in 16 normal women and 8 hypothalamic amenorrheic women (HA). After intramuscular injection of estradiol benzoate (EB) 1 mg, serial determinations of plasma immunoreactive  $\beta$ -E (ir- $\beta$ -E), ACTH, LH, FSH, estradiol were made at 24 hours interval. Ir- $\beta$ -E was extracted using ODS-silica and was measured by RIA which crossreacts 100% with  $\beta$ -lipotropin.

Although the basal ir- $\beta$ -E levels of both groups were not significantly different, the pattern of response to EB was different. In normal women, plasma ir- $\beta$ -E increased to 140.7% (against basal level, mean) at 48 h when Gn showed small decrement and decreased to 85.1% at 72 h when Gn showed positive surge (LH: 365.4%, FSH: 165.3%). While in patients with HA, both ir- $\beta$ -E and Gn revealed no marked response. ACTH did not show any significant change.

Decreased responsiveness of Gn and  $\beta$ -E to estradiol in HA suggests the impaired release mechanism of GnRH from hypothalamus as well as that of  $\beta$ -E. In normal menstrual cycle, inverse relationship between Gn and  $\beta$ -E suggests that Gn release might be under tonic influence by  $\beta$ -E mechanism.

#### 12. Low Dose Intermittent Infusion of Naloxone to Variable Gonadal Conditions