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Molecular components supporting ryanodine receptor-mediated Ca²⁺ release: roles of junctophilin and TRIC channel in cardiac Ca²⁺ release

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Cardiac Ca²⁺-induced Ca²⁺ release (CICR)



DHPR: dihydropyridin receptor / L-type voltage-gated Ca²⁺ channel

RyR: ryanodine receptor / Ca²⁺ release channel

SERCA: SR/ER Ca²⁺⁻ pump

Cell-surface depolarization opens DHPR to generate Ca²⁺ influx.
Inflowing Ca²⁺ binds to RyR, opens its channel and triggers Ca²⁺ release.
Cytoplasmic Ca²⁺ binds to troponin and generates muscle force.

Cardiac excitation-contraction (E-C) coupling requires synchronized channel activation of DHPR and RyR.



Ryanodine receptor (RyR) functioning as Ca²⁺ release channel on SR/ER

Hydropathicity plot of RyR-1



Ryanodine receptor subtypes

subtype	locus	tissue distribution	knockout mouse	human disease
RyR1	mouse 7A2-B3 human 19q13.1	skeletal muscle brain	neonatal lethality respiratory failure	malignant hyperthermia*
RyR2	mouse 13 human 1q42-43	cardiac & smooth muscles, brain	embryonic lethality heart failure	polymorphic tachycardia**
RyR3	mouse 2E5-F3 human 15q14-1	skeletal & smooth 5 muscles, brain	impaired memory hyperlocomotion	
			*MacLennan et al. I **Priori et al. Circul	Nature 343, 559, 1990. ation 103, 196, 2001.

RyR2-knockout mice exhibit cardiac failure at early embryonic stage

Pups obtained by mating between RyR2(+/-) mice

embryonic day	+/+	+/-	-/-	
E8.5	8	12	3	
E9.5	32	38	24 (heartbeats)	
E10.5	30	31	18 (cardiac arrest)	
E11.5	9	15	12 (autolysis)	
E12.5	3	3	1 (autolysis) Bulbus cordis Bulbus cordis Bulboventricular sulcus Left	
E18.5/P0	22	32	0 Ventricle Ventricle Atrium Atrium Sinus	
			Vitelline Vitelline Venosus Venosus Venosus	



Histology of E9.5 RyR2-knockout embryo

embryo

heart region



RyR2-KO embryos show delayed development at this stage, but the mutant cardiac tubes show beating and retain normal cardiomyocytes.



Of RyR subtypes, only RyR2 is expressed in embryonic cardiomyocytes.

E9.5 and E10.5 cardiomyocytes retain spontaneous Ca²⁺ oscillations under store-depleted conditions



The loss of RyR2-mediated Ca²⁺ release dose not abolish Ca²⁺ oscillations in embryonic cardiomyocytes. Why does the RyR2-KO heart stop beating?

EM detects swollen SR elements and degraded mitochondria in RyR2-knockout cardiomyocytes E8.5 E9.5 E10.5



Ca²⁺ overloading of the swollen SR in RyR2-knockout cardiomyocytes



Fura-2 Ca²⁺ measurement in single cell preparations

CPA: cyclopiazonic acid SR Ca²⁺-ATPase inhibitor



As well as contributing to CICR (Ca²⁺ signal amplification), RyR2 prevents SR Ca²⁺ overloading in embryonic cardiomyocytes





RyR2-knockout myocytes



SR overloading abolishes its Ca²⁺ buffering in the cytoplasm, likely induces excess Ca²⁺ entry to other organelle and finally damages mitochondria.

Damaged mitochondria produce celldeath signals including *Cyt c* release.



cell death signals

Our immuno-proteomic survey is useful for the identification of muscle membrane proteins



Mitsugumins identified in our screening

mitsugumins	structure	function	
MG29 synaptophysin family		T-SR structure	
MG23	multi-TMs	?	
MG72 (junctophilin)	MORN motif protein	JMC formation	
MG53	RBCC family	membrane repair	
MG33 (TRIC channel)	trimer of multi-TMs	cation channel	
MG56 (calumin)	single TM	SR/ER Ca ²⁺ binding	

Because the cytoplasm has Ca²⁺-buffering property, efficient CICR probably requires co-localization of DHPR and RyR in junctional membrane complexes





MORN motifs shared by different proteins



MORN motif region interacts with various phospholipids

Overlay assay:	C17: 0.3 _µ g/ml				
Production of recombinant		S1P PtdIns(3,4)P ₂	Sphingosine S1P		GM1 GD3
J proteini ↓	PtdIns	PtdIns(3,5)P2	Phytosphingosine	- 41	Sulfatide
react with PIP &	PtdIns(3)P 🔘 🌒	PtdIns(4,5)P ₂	Ceramide		Psychosine
Sphingo-Strip [™]	PtdIns(4)P 👩 🔘	PtdIns(3,4,5)P ₃	SM		Cholesterol
	PtdIns(5)P	PA	SPC		Lyso-PC
Detection of	PE	PS	LPA	25	PC
protein bound	PC	Blank	Myriosine		Blank
using mAb	PIP Strip		SI	phingo St	rip

PIP₂ is enriched in PM, and PIP is enriched in endosome.

The data suggest that MORN motifs are responsible for phospholipidbinding to interact with membrane systems.

Junctophilin forms JMC

JP-cRNA expression in amphibian embryonic cells

Full-length JP





JP lacking TM segment



Deleting MORN motifs inhibits PM association.

EM observation of cell peripher



Formation of junctional membrane complex

No junctional membrane structure

Junctophilin forms junctional membrane complex by interacting with the plasma membrane and spanning the ER/SR membrane.

Junctophilin subtypes

subtype	locus	tissue distribution	knockout mouse	human disease		
JP1	mouse 1A2-5 human 8q21	skeletal muscle	neonatal lethality contraction deficiency			
JP2	mouse 2H1-3 human 20q12	skeletal, cardiac & smooth muscles	embryonic lethality heart failure	Hypertrophic cardiomyopath		
JP3	mouse 8E human 16q23-24	brain (neurons) 4	no obvious phenotype	e Huntington's disease type 2*		
JP4	mouse 14C1-2 human 14q11.1	brain (neurons)	no obvious phenotype	•		
		Double knockout mice lacking both JP-3 & 4: weaning lethality, abolished memory and motor learning				

*Holmes et al. Nature Genetics 29, 377, 2001.

JP2-knockout mice exhibit cardiac failure at early embryonic stage

Pups obtained by crosses between heterozygous mutants

embryonic day	+/+	+/-	-/-
E9.5	44	72	40 (weak heartbeats)
E10.5	10	27	11 (cardiac arrest in ~60% embryos)
E11.5	5	18	5 (autolysis)
E18.5/P0	18	35	0

Junctional membrane structures in E9.5 embryonic cardiomyocytes

12-nm junction (peripheral coupling)

30-nm junction

Z line-SR junction





SR Z SR 0.5 μM

wild-type 12.4 ± 0.2 2.2 ± 0.3 JP2-KO $1.5 \pm 0.7 * (*p < 0.01)$ 2.2 ± 0.9 (junctions / 100 µm plasma membrane)

91 ± 2.2 91 ± 2.0 (% of SR-bearing Z line)



diad with 12 nm gap in adult myocytes In embryonic cardiomyocytes, JP2 likely generates peripheral couplings.

Cardiomyocytes show random Ca²⁺ transients in hearts from E9.5 JP2-knockout embryos



Since the application of caffeine and ryanodine abolish the random transients in JP2-knockout hearts, the random transients are generated by Ca²⁺ release.

Ca²⁺ waves compose random transients in JP2-knockout cardiomyocytes

Intracellular Ca2+ wave

Pseudocolor images at indicated frames

Analysis of a single event of random Ca²⁺ transient



SR

RyRs



Ca²⁺ concentration



Loss of JP2-mediated JMC formation inhibits DHPR-RyR2 functional coupling, and thus likely generates SR overloading and RyR2-mediated Ca²⁺ waves



Efficient Ca²⁺ release is likely supported by counter-ion movement across ER/SR membrane



Without counter-ion channels, negative potential would be generated by initial Ca²⁺ release and inhibit following Ca²⁺ release.

TRIC (trimeric intracellular cation) channels contain three transmembrane segments



The C-terminus was proteinase-sensitive, and thus is assigned to the cytoplasmic side. Moreover, TRIC became hyper-sensitive when the FLAG tag was inserted between M1 and M2, suggesting that this putative cytoplasmic loop is likely associated with membrane lipids.

TRIC channels are ubiquitously expressed and localized on intracellular membranes

Northern blotting (mouse)

Cell fractionation and Western blots





TRIC-A immunostaining (muscle)



TRIC-A: excitable cell-specific subtype TRIC-B: common subtype

TRIC subtypes are localized on the ER/SR and nuclear membranes.

Homo-trimeric structure of TRIC channel

Chemical crosslinking

Immunogold staining





3D reconstruction of purified TRIC particles





Purified native and recombinant TRIC-A preparations forms a monovalent cation-selective channel

a Control	+ 100 µM decamethonium
-50 mV +50 mV	-50 mV +50 mV
ANNO ANNO ANNO ANNO ANNO ANNO ANNO ANNO	MANIMUMANA c
hand the second s	Marine -
MARA ALLIMAN ALLIMAN	man man mus
Charles and the second s	10 pA
b	C 0 mV
Mr. V. W. W. W. C.	Manhan martine and a state of the state of t
-	and the standard the standard the standard the standard of the standard the standar
C C	-10 mV
L10 pA	
100 ms	10 pA 100 ms
Control	+ mAb
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	10 pA 100 ms

TRIC-A shows moderate selectivity for K⁺ over Na⁺ (*P*K⁺/*P*Na⁺ = 1.5).

TRIC channel subtypes

subtype	locus	tissue distribution	knockout mouse	human disease		
TRIC-A	Mouse 8B3.3 Human 19p13.1	predominant in excitable cells	no obvious phenotype?			
TRIC-B	mouse 4B2 Human 9q3.1	ubiquitous	neonatal lethality ?			
		TRIC-A & B double-knockout mouse: embryonic lethality (heart failure)				

Double-knockout mice lacking TRIC-A and B exhibit embryonic heart failure



Toward cardiac arrest, the ER/SR becomes swollen in mutant cardiomyocytes from TRIC-DKO embryos



Because this abnormality is identical to that of RyR2-knocout myocytes, severe SR Ca²⁺ overloading is predicted in TRIC-DKO myocytes.

E8.5 TRIC-DKO cardiomyocytes exhibit weak spontaneous Ca²⁺ oscillations, but facilitated caffeine-induced transients

Fluo-4 Ca²⁺ measurement in cardiac tubes









1)Despite Ca²⁺ overloading in the SR, CICR is not well functioning in E8.5 TRIC-DKO cardiomyocytes.

2)The expression levels of major Ca²⁺-handling proteins including DHPR and RyR are normal in E8.5 DKO cardiomyocytes.

RyR2-mediated Ca²⁺ release is probably inhibited under TRIC-null conditions.

TRIC channels support SR Ca²⁺ release by neutralizing excessive membrane potentials

TRIC channel is counter-ion channel coupled with RyR Ca²⁺ RyR / IP₃R SERCA Ca²⁺ release Ca²⁺ K Ca²⁺ uptake **TRIC Ch** SR/ER Cytoplasm TCI-K⁺

There are still several unknown SR/ER channels detected by previous electrophysiological studies.

Embryonic cardiomyocytes is a model system in assessing Ca²⁺-handling proteins from excitable cells

Ca²⁺-handling proteins crucial in embryonic heart beating



We are still looking for new molecules that essentially contribute to SR/ER Ca²⁺ handling in excitable cells.

Collaborators

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