

The inhibition of voltage-gated H⁺ channel (HVCN1) induces acidification of leukemic Jurkat T cells promoting cell death by apoptosis

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Abstract Cellular energetic deregulation is widely known to produce an overproduction of acidic species in cancer cells. This acid overload must be counterbalanced with a high rate of H⁺ extrusion to maintain cell viability. In this sense, many H⁺ transporters have been reported to be crucial for cell survival and proposed as antineoplastic target. By the way, voltage-gated proton channels (Hv1) mediate highly selective H⁺ outward currents, capable to compensate acid burden in brief periods of time. This structure is canonically described acting as NADPH oxidase counterbalance in reactive oxygen species production. In this work, we show, for the first time in a oncohematologic cell line, that inhibition of Hv1 channels by Zn²⁺ and the more selective blocker 2-(6-chloro-1H-benzimidazol-2-yl)guanidine (ClGBI) progressively decreases intracellular pH in resting conditions. This acidification is evident minutes after blockade and progresses under prolonged exposure (2, 17, and 48 h), and we firstly

demonstrate that this is followed by cell death through apoptosis (annexin V binding). Altogether, these results contribute strong evidence that this channel might be a new therapeutic target in cancer.

Keywords HVCN1 · Voltage-gated proton channel · Intracellular pH · Apoptosis · Leukemia · Cancer

Introduction

Voltage-gated H⁺ channels (Hv1), encoded by the *hvcn1* gene, mediate highly selective H⁺ outward currents [42], avoiding cell acidification and depolarization. This relevant homeostatic function of Hv1 channels is essential for a variety of immune cells such as neutrophils [33, 46, 57], eosinophils [9, 21, 39], basophiles, B lymphocytes [6] as well as spermatozoa [34], osteoclasts [44], and myocardial fibroblasts [7]. The intracellular pH (pH_i), which typically ranges in a narrow window (7.2–7.4), is finely controlled for cell survival since the vast majority of cell machinery has a well-defined pH for optimal activity (i.e., enzyme activity). Indeed, intracellular acidification is an early key event leading to cell death by different apoptotic stimuli [31, 36, 37]. Particularly, in cancer cells, it has been widely demonstrated that, regardless of the amount of oxygen available, a metabolic deregulation promotes the use of the less efficient glycolytic pathway increasing acidic species concentration [29, 56]. In the absence of compensatory mechanisms, tumor cell survival would be compromised. Thus, cell structures capable of reducing the acid load in tumor cells give them an advantage to escape from the acidification-related cell death. Hv1 channels are excellent candidates that can contribute to this process. The activity of Hv1 channels allows a quick compensation of acidic cell

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production without metabolic energy cost. It has been reported that Hv1 can restore cytoplasmic pH after heavy acid loads with a high efficacy (few seconds) in different cell types [5, 8, 14, 27, 40, 41, 55, 60]. Moreover, in solid tumors such as colorectal and breast cancer cells, Hv1 inhibition with Zn^{2+} produces acidification, a decrease in cell proliferation, and migration. In both tumors, Wang et al. have proved a clinicopathological correlation where high Hv1 expression is associated with shorter overall and recurrence-free survival of patients [63, 64].

In Jurkat T cells originated from a human acute leukemia, Gottlieb et al. demonstrated that intracellular acidification is an early event of the apoptotic process when these cells receive pro-apoptotic stimuli such as anti-Fas, cycloheximide, or UV light [22]. Although they demonstrated that this step is necessary for the death process to continue, it is poorly understood which mechanisms are responsible for the pH drop.

Since Hv1 channels are functionally expressed in Jurkat T cells [53], we have hypothesized that Hv1 channel activity could preclude cellular acidification representing an antiapoptotic advantageous mechanism in oncohematological cells to prolong its survival. On the contrary, cells subject to intracellular acidification by Hv1 blocking are highly prone to cell death by apoptosis. Potentially, Hv1 inhibition could be an additional ion channel target to induce leukemic cell death together with other ion channels already proposed [1] as well as other structures that induce H^+ efflux which were considered as auspicious targets in experimental oncology [58]: the Na^+/H^+ exchanger (NHE1), the monocarboxylic acid transporter (MCT4), and the V-ATPase.

In this study, we proved that the sole inhibition of Hv1 channels with Zn^{2+} or the more selective Hv1 inhibitor, the guanidine derivative 2-(6-chloro-1H-benzimidazol-2-yl)guanidine (CIGBI) [24], induced a progressive intracellular acidification. And, for the first time, we show that Hv1 blockade not only reduces proliferation but also induces apoptosis cell death.

Methodology

Cell culture

Jurkat T cells were grown in DMEM high-glucose (25 mM) medium supplemented with 10% (v/v) heat-inactivated fetal bovine serum (Internegocios), in 5% $CO_2/95\%$ humidified air at 37 °C at an average density of 10^6 cells/ml.

Patch clamp experiments

The cells were observed with a mechanically stabilized, inverted microscope (Telaval 3, Carl Zeiss, Jena) equipped with a 40× objective lens. The standard tight-seal whole-cell

configuration of the patch clamp technique was used to record macroscopic whole-cell currents [23]. Pipettes were drawn from capillary glass (PG52165-4, WPI, Boca Raton, FL, USA) on a two-stage vertical micropipette puller (PP-83, Narishige, Tokyo, Japan), and pipette resistances were 2–4 M Ω measured in extracellular saline solution (ESS). Ionic currents were measured with an appropriate amplifier (Axopatch 200A, Axon Instruments, Foster City, CA, USA). Whole-cell currents were filtered at 2 kHz, digitized (Digidata 1440, Molecular Devices, LLC, Orleans Drive, Sunnyvale, CA, USA) at a sample frequency of 10 kHz, and stored on a computer hard disk for later analysis. Total cell membrane capacitance was estimated by integrating the capacitive current transient elicited by the application of 10 mV hyperpolarizing step pulse from a holding potential of –60 mV. The estimated membrane capacitance of Jurkat T cells was 8.5 ± 2.8 pF ($n = 18$). Series resistance ranged from 10 to 15 M Ω . All the experiments were performed using an agar salt bridge.

Application of test solutions was performed through a multibarreled pipette positioned close to the cell investigated. After each experiment on a single cell, the experimental chamber was replaced by another one containing a new sample of cells. All experiments were performed at room temperature (~22 °C).

The ESS used for recording H^+ currents contained the following (in mM): 100 4-(2-hydroxyethyl)piperazine-1-ethanesulfonic acid (HEPES), 2 $MgCl_2 \cdot 6H_2O$, 90 *N*-methyl-D-glucamine (NMDG), 1 ethyleneglycol-bis(b-aminoethylether)-*N,N,N,N'*-tetraacetic acid (EGTA), and pH adjusted to 7.8 with HCl. The composition of the intracellular pipette solution (IPS) contained the following (in mM): 100 MES, 2 $MgCl_2 \cdot 6H_2O$, 90 NMDG, 1 EGTA, and pH adjusted to 6.3 with HCl.

For Hv1 blockade experiments, CIGBI solutions were made adding appropriate amounts of a 100 mM stock in dimethyl sulfoxide (DMSO) to ESS on the day of the experiment; corresponding controls contained 0.8% DMSO in ESS.

Fluorometric pH_i determination

Jurkat T cells were incubated with 10 μ g/ml of 2',7'-bis-(2-carboxyethyl)-5-(6)-carboxyfluorescein acetoxymethyl ester (BCECF-AM) for 20 min at 37 °C. Then, the dye-loaded cells were separated by centrifugation (700×g, 2 min), suspended in HEPES-buffered solution, re-incubated for 15 min in dye-free solution to complete the hydrolysis, washed, and suspended at a density of 2×10^7 cells/ml. Aliquots of 50 μ l of this suspension were diluted in 2 ml of HEPES-buffered solution for the measurement of the pH_i changes in the stirred and thermostatted cuvette of a spectrofluorometer Aminco-Bowman series II (Silver Spring, MD, USA). The suspension of cells loaded with BCECF was excited at 503 and 440 nm,

and the emitted fluorescence was collected at 535 nm. Cells were exposed to propionic acid to acidify the intracellular milieu; the recovery rate was measured in the presence of Zn^{2+} (1 mM nominal) or Hv1 blocker, CIGBI (200 μ M). Initial velocity of pH_i recovery for Jurkat T cells subjected to an acid load was calculated by fitting a linear regression of the first minute of the pH_i recovery after maximum acidosis. pH_i was calculated in each preparation calibrating with a high potassium-nigericin solution (135 mM KCl replaced the same concentration of NaCl in the HEPES solution, with 10 μ M nigericin, titrated with KOH to pH 7.8). Small volumes of 0.1 M HCl were added to decrease pH stepwise to 6.5. The relationship between the ratios of fluorescence 503/440 nm and the pH value obtained in each step was linear.

HEPES solution contained the following (mM): 133 NaCl, 5 KCl, 1.2 $MgSO_4$, 0.8 $MgCl_2$, 10 glucose, 1.35 $CaCl_2$, and 10 HEPES, pH adjusted to 7.4 with NaOH. In sodium-free experiments, NaCl was replaced by choline chloride in the same concentration.

In vitro exposure of Jurkat T cell line to Hv1 channel blockers for flow cytometry determinations

Cells were incubated in 96-well plates (200 μ l/well) at a starting concentration of 0.5×10^6 cells/ml and cultured in the conditions abovementioned (see “Cell culture” section) in normal Na^+ concentration. Cells were exposed for 2 and 17 h with Zn^{2+} (1 mM nominal) prior to the measurements. Due to medium complexity (mainly serum), it was hardly possible to calculate free Zn^{2+} concentration, and as it is known that this value is far below nominal [45], 1 mM was chosen to ensure a significant channel blockade. Independently, CIGBI was added at 200 and 800 μ M final concentration for 2, 17, and 48 h before the different assays; for these experiments, in control condition, DMSO was added to a final concentration of 0.8% (equal to the 800 μ M CIGBI wells) for 48 h.

Cell culture photographs

Ninety-six well plates were photographed with a Micrometrics CCD camera mounted on a Nikon Eclipse TS100 inverted microscope and analyzed with the Micrometrics SE Premium 4 software.

Flow cytometry pH_i determinations

The protocol described in Current Protocols in Cytometry (1997) [11] was used for pH measurement with BCECF using pseudo null calibration (also depicted by Franck et al. [17] and Eisner et al. [15], among others). Briefly, after incubation (see “In vitro exposure of Jurkat T cell line to Hv1 channel blockers

for flow cytometry determinations” section), cells were centrifuged 5 min at 500 rpm and loaded with 2 μ g/ml BCECF-AM 15 min at 37 °C, centrifuged, and resuspended in 10% FBS-HEPES solution. Prior to the measurement, every batch of cells was exposed to the corresponding blocker at the same concentration of incubation in order to prevent eventual pH_i recovery. Pseudo null calibration curve was performed according to Chow et al. [11] in each experiment (points pH = 8.0/7.7/7.4/7.1/6.8, see supplementary material Fig. S1). The fluorescence of BCECF was monitored by a FACSCalibur flow cytometer (Becton Dickinson) for an amount of 20,000 cells per tube. Data were acquired with CellQuest Pro 5.2.1 program and further analyzed with *Flowing Software v2.5.1* (by Perttu Terho, Turku Centre for Biotechnology, Finland) software. A two-order polynomial fitting between ratio of FL1/FL3 channels vs. calibration pH values was performed for each experiment (see supplementary material Fig. S1); the output equation was later used to calculate pH_i in each condition.

Flow cytometry annexin V binding determinations

In order to assess the extent of apoptosis after the incubation with Hv1 blockers (see “In vitro exposure of Jurkat T cell line to Hv1 channel blockers for flow cytometry determinations” section), annexin V binding was evaluated. In those experiments related with Zn^{2+} , annexin V-phycoerythrin (PE) labeling was performed, while in experiments regarding CIGBI, annexin V-FITC/propidium iodide (PI) double staining was employed [19].

After $ZnCl_2$ incubation, cells were stained with 1 μ l commercial annexin V-PE in binding buffer (eBioscience) for each sample (average of 100,000 cells per well) in the dark for 15 min at room temperature. Later, cells were washed and resuspended in PBS solution. Fluorescence was detected using a FACSCalibur flow cytometer (Becton Dickinson) acquiring 20,000 cells per tube. Data were analyzed with FlowJo X 10.0.7 software.

In CIGBI incubation experiments, the same procedure was followed with the difference of using annexin V-FITC (instead of annexin V-PE) and a subsequent staining with 1 μ g/ml PI 10 min in the dark (37 °C). Cells that were annexin V-FITC⁺ (with translocation of phosphatidylserine from the inner to the outer leaflet of the plasma membrane) and PI⁻ (with intact cellular membrane) were considered as early apoptotic cells, whereas annexin V-FITC⁺/PI⁺ were considered late apoptotic/necrotic. For every independent experiment, the gates were assigned in order to distinguish heat treated (55 °C 20 min, double-positive controls) from fresh viable cells (double-negative control), as exemplified in supplementary material (Fig. S2).

Statistics

The results are expressed as mean \pm standard error of the mean. Paired or unpaired Student's *t* tests were used to compare two groups. ANOVA (one-way or two-way, followed by Bonferroni post hoc test for means comparison) was used to compare three or more groups. In all cases, a *p* value lower than 0.05 was considered for establishing statistically significant differences. All statistics calculations have been done using OriginPro 9 software.

Reagents

BCECF-AM (Invitrogen Corporation, USA) and other flow cytometry reagents (annexin V-PE, annexin V-FITC, and propidium iodide) were purchased to Beckton and Dickinson (CA, USA). CIGBI (CAS no. 70590-32-8, PubChem CID 408159) was acquired from StruChem Co., Ltd. (Wujiang, China). All other reagents are from Sigma-Aldrich (St. Louis, MO) unless otherwise indicated. DMEM medium and FBS were purchased from local suppliers.

Results

Hv1 blockade by CIGBI

The presence of functional Hv1 channels in Jurkat T cells was reported by Schilling et al. [53] by patch clamp technique in

the whole-cell configuration. They showed slow-activating H^+ currents evoked by membrane depolarization depending on transmembrane pH gradient and blocked by Zn^{2+} . In this work, we tested the presence of Hv1 currents in our Jurkat T cell batch confirming the functional presence of these channels with the same electrophysiological properties observed before [53] (see Supplementary Fig. S3).

Figure 1 shows the effect of a newly synthesized Hv1 inhibitor, CIGBI, on whole-cell currents mediated by Hv1 channels. CIGBI is a membrane-permeable compound reported recently by Dr. Tombola's group, which has demonstrated the inhibitory effect and the specific blocking mechanism of different guanidine-related compounds [24]. Figure 1 depicts that this Hv1 blocker inhibits the voltage-activated H^+ currents in leukemic Jurkat T cells, in a reversible and concentration-dependent manner. We tested 200, 500, and 800 μM CIGBI, observing a clear maximal drug effect from 500 μM .

Short-term pH_i regulation

We further analyze if the Hv1 channel inhibition, by Zn^{2+} or CIGBI, effectively produces Jurkat T cell acidification in the same temporal course that these blockers affect the H^+ currents. Considering previous reports showing the NHE exchanger as an important regulator of pH_i in this cell line [32], we firstly used Na^+ -free extracellular solution to overcome its activity and isolate the potential effect of Hv1 inhibition on pH_i . In such condition, and using cuvette fluorometry with BCECF as intracellular pH indicator, we observed an immediate pH_i decrease when 1 mM

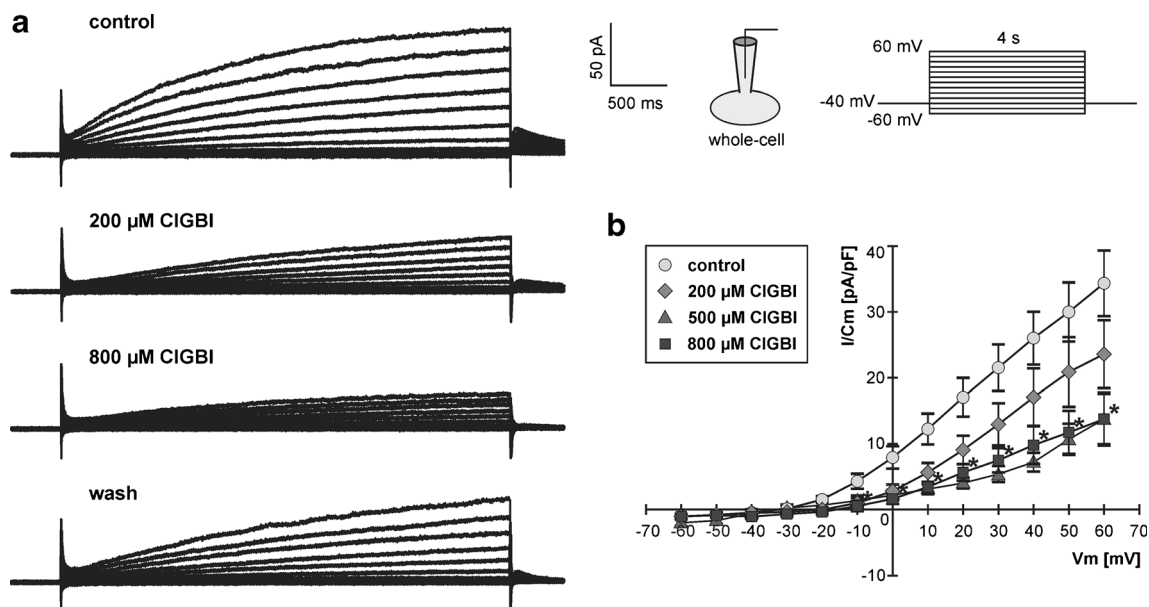


Fig. 1 CIGBI Hv1 current inhibition. **a** Superimposed representative whole-cell currents recorded in response to 4-s long pulses, stepping from a holding potential of -40 mV to levels ranging from $+60$ to -60 mV, with 10 mV increments in control conditions, after stable effect of different CIGBI concentrations and after the drug washout. **b**

Mean \pm SEM current density versus voltage (*I-V*) curves, corresponding to the control condition and CIGBI (200, 500, and 800 μM). The asterisk indicates a statistically significant difference by multiple comparison versus control group at each membrane potential ($n = 4-8$, $p < 0.05$)

Zn^{2+} or 200 μM CIGBI was added to the extracellular solution (Fig. 2a upper panel). Moreover, if we challenge the cells with an acidic stimulus such as a permeable propionic acid pulse, the pH_i recovery is significantly slower when Hv1 channels are inhibited, compared with the control condition (Fig. 2a, lower panel).

Furthermore, we tested the effect of CIGBI under physiological extracellular Na^+ concentration in order to see the impact of Hv1 blockade in the presence of active NHE (Fig. 2b, upper panel). According to the first result, even in the presence of such redundant mechanism, 200 μM CIGBI is able to affect basal pH_i inducing a significant acidification in 12 min and lowering the recovery rate after propionic acid pulse (Fig. 2b, lower panel). Although the differences in pH_i values obtained in both conditions (Hv1 inhibition with and without extracellular Na^+) indicate an important contribution of the NHE activity, the results clearly show a determinant role of the Hv1 channel in pH_i homeostasis.

Long-term pH_i regulation

We next evaluated the effect of long-term Hv1 inhibition on pH_i . Jurkat T cells were incubated with Zn^{2+} (1 mM, for 2 and 17 h) or CIGBI (200 and 800 μM , for 2, 17, and 48 h), and then, pH_i was measured by flow cytometry. In every case, time is considered as the number of hours where the cells were exposed to Hv1 inhibitors before cytometric measurements. Figure 3 (left panels) shows the obtained results expressed as mean values of total cells for each condition. These figures clearly show that in both cases, Hv1 inhibition induced by

Zn^{2+} (Fig. 3a) or by the more selective Hv1 blocker CIGBI (Fig. 3b) produces a significant time-dependent long-lasting acidification in Jurkat T cells. The effect of CIGBI was also dependent on drug concentration. Cumulative % of acidified cells illustrates (Fig. 3a, b, right panels) the progression of acidification as the amount of total cells whose pH_i falls below defined cutoff values (7.0, 6.9, and 6.8). Strong Hv1 blockade (1 mM Zn^{2+} and 800 μM CIGBI) derives in a vast majority of cells with pH_i below 7.0 in 2 h, whereas values at 48 h show that these cells continued acidification below 6.8. In the lower blockade condition (200 μM CIGBI), longer periods of time are required to reach a significant percentage of cells to fall below the same acid cutoff values.

Abnormal growing pattern

Moreover, we observed that the typical growing pattern of Jurkat T cells (first line Fig. 4) was visibly affected by Hv1 blocker incubation. Figure 4 shows 100 \times photographs of the time course of cell culture in control conditions (presence of DMSO 0.8%) and 200 and 800 μM of CIGBI. The presence of the Hv1 blocker avoids clump formation, a natural feature of proper growing. The same effect was observed with Zn^{2+} (data not shown). Although these observations are not precise about the involved mechanisms in the abnormal growing pattern, the presence of augmented cell death or proliferation arrest is evident which could be the consequence of acidification produced by Hv1 inhibition.

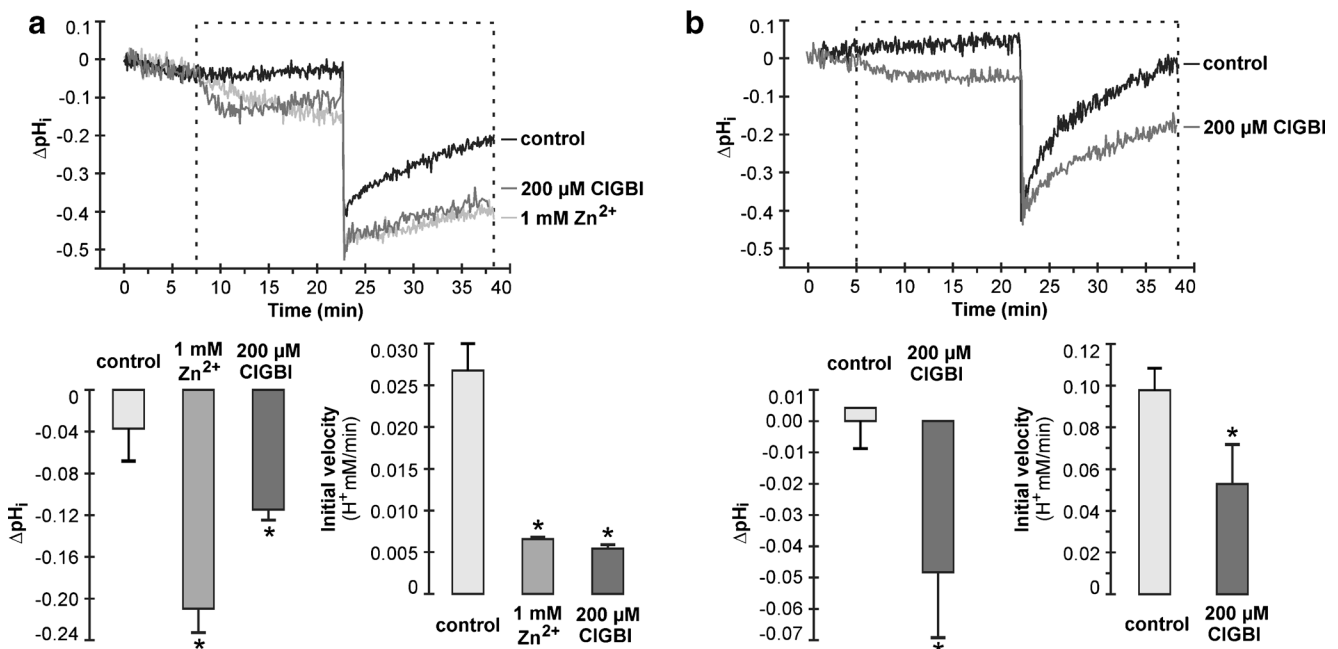


Fig. 2 Intracellular pH_i regulation in Jurkat T cells. Representative experiments of pH_i changes after blockade of Hv1 channel with 1 mM Zn^{2+} or 200 μM CIGBI (dotted line boxes) in free sodium HEPES-buffered solution (avoiding NHE activity, **a**) or in the presence of sodium (**b**). In the two cases, basal pH_i decreases when the Hv1 was

blocked (average in **a** and **b**). After 20 min, in both experiments, Jurkat T cells were acidified with propionic acid and initial rates of pH_i recovery were estimated from the slope of the line fitted by the least squares method. Asterisk indicates statistically significant differences by one-way ANOVA (**a**, $n = 6$) and Student's t test (**b**, $n = 6$), $p < 0.05$

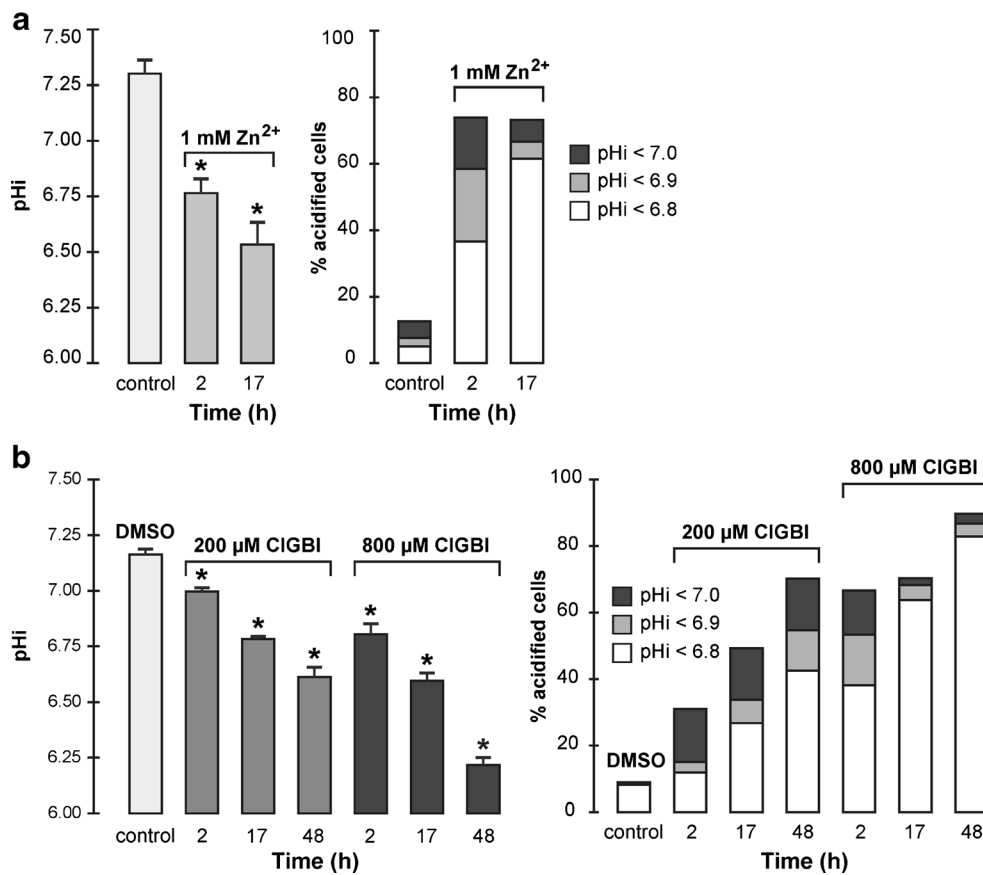


Fig. 3 Long-term pH_i determinations. **a** Mean values of pH_i in control condition (DMEM medium 17 h) and after 2 and 17 h of 1 mM Zn²⁺ exposure in culture conditions (*left panel*). The asterisks indicate statistically significant differences by one-way ANOVA test ($n = 4$, $p < 0.05$). Time course of percentage of the total cells with pH_i values below 7.0, 6.9, and 6.8 in Zn²⁺ treatment (*right panel*). **b** Mean values of pH_i in control condition and after 2, 17, and 48 h of 200 and 800 μM

CIGBI exposure in culture conditions (*left panel*). The asterisk means statistically significant effects by two-way ANOVA ($n = 4$, $p < 0.05$). Time course of percentage of the total cells with pH_i values below 7.0, 6.9, and 6.8 exposed to 200 or 800 μM CIGBI (*right panel*). Controls are in both cases, and vehicles applied at the higher concentration and longer period of treatment (DMSO 0.8% for 48 h)

Cell acidification is associated with apoptosis-mediated cell death

Therefore, we specifically evaluated by flow cytometry if Hv1 inhibition is able to induce Jurkat T cell apoptosis measuring breakdown of phosphatidylserine asymmetry of the plasma membrane using fluorochrome-labeled annexin V [19] and plasma membrane status with PI. Figure 5 show the corresponding plots for the different conditions and the mean values obtained with blockers. We could observe that 2 h after the addition of 1 mM Zn²⁺, a significant increase ($20.2 \pm 3.7\%$) in the frequency of annexin V⁺ cells was produced over the percentage of control condition, whereas in overnight exposure (17 h), this difference ascended to $47.8 \pm 7.0\%$, indicating that Zn²⁺ acidification is followed by apoptosis induction sharing both processes a common time course. Interestingly, CIGBI also produces apoptosis and finally cell death, in a time-dependent manner, according to the pH results. The concentration effect is significant in late apoptotic (annexin V-FITC⁺/PI⁺) and viable (annexin V-FITC⁻/

PI⁻) cells but not in early apoptotic (annexin V-FITC⁺/PI⁻) population (two-way ANOVA $p > 0.05$, $n = 4-7$). This latter result suggests that higher amounts of CIGBI (hence a more pronounced acidification) exert apoptosis induction in the same rate than 200 μM. However, this should be taken with caution considering that at 2 h, there seems to be a difference in early apoptotic cells between the two concentrations (not statistically significant), and particularly at 800 μM, this population declines over time at expenses of late apoptotic cell increase, while at 200 μM, percentage of annexin V-FITC⁺/PI⁻ is raising up to 48 h as the double-positive population develops a lower increase. This interpretation may be more in accordance with a statistically significant effect of dose over % of viable cells.

Discussion

A new role of Hv1 channels in Jurkat T cells is set forth in this work. For the first time, we present detailed evidence showing

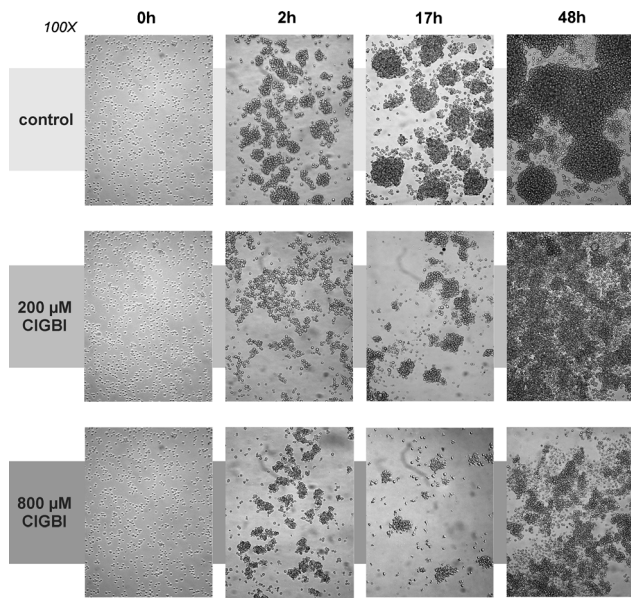


Fig. 4 Jurkat T cells' growing pattern. Photographs taken at different times after 0.8% DMSO (CIGBI solvent), 200 and 800 μM CIGBI addition to the culture media. Note the difference in clump formation in the three conditions. Superior views of culture petri dishes, $\times 100$ magnification

that both two Hv1 channel inhibitors induce intracellular acidification in the same temporal course, as measured current blockade, and how this pH_i decay is intensified under long-term culture conditions in a dose-dependent and time-dependent manner, being this paralleled by apoptosis induction monitored with annexin V-PI staining, giving new evidences of cell death routines involved. Although acidification is a known and relevant factor involved in apoptosis, our work highlights the point that Hv1 channel inhibition is enough to produce an increasing frequency of dead cells through apoptosis (Fig. 6).

In the last 10 years, the knowledge of biophysical properties of Hv1 channels has increased notably, mainly obtained in heterologous expression systems as *Xenopus* oocytes, which are very useful to study in deep Hv1 kinetic, conductance, voltage, and pH dependence among other properties [13, 20, 47]. However, the physiological and pharmacological regulation of these channels is mostly unknown yet. In our work, we show that the newly synthesized compound CIGBI blocks Hv1 channel in Jurkat T cells as Zn^{2+} do. Although Zn^{2+} has been extensively used to block the heterologous expressed Hv1 channel, in a native system, the results could be confusing due to its diverse known cellular effects [10, 25, 26, 61]. Here, we show that a more selective blocker, CIGBI, is a new useful pharmacological tool to test the functional role of these channels in native cells. Considering that it is a novel compound, we cannot discard additional effects that might influence the final effects of this drug; nevertheless, both blockers derived in the same results above strengthening the idea of Hv1 involvement.

Using CIGBI to induce Hv1 inhibition, we demonstrated a tight link between Hv1 channel activity and pH_i regulation in Jurkat T cells. While short-term Hv1 blockade induces a little but significant baseline pH_i decrement, long-term inhibition points out a requirement of Hv1 activity for pH_i homeostasis. Together, these results indicate that in these leukemic cells, this structure is useful not only for rapid recovery after acid loads but also for basal proton extrusion. In cancer cells, the current knowledge indicates that neoplastic transformation is associated with a metabolic deregulation which induces a significant acid overproduction, commonly known as the Warburg effect [29, 56]. Thus, the role of this ion channel consuming the pH gradient to extrude H^+ without metabolic energetic cost represents a novel counterbalance mechanism, mostly ignored compared with the well-characterized H^+ active transporters described to prevent cancer cell acidification. Namely, the NHE, proton pump V-ATPase, bicarbonate (HCO_3^-) transporter, and proton-lactate symporter require a direct or indirect expend of metabolic energy to perform its function [12, 58]. In addition, Hv1 conductivity is also strongly regulated by pH across the membrane, as the activation $V_{1/2}$ values raise markedly when extracellular pH decreases [13], making the channel opening only possible for H^+ extrusion. Thus, this salient feature makes Hv1 function as a perfect proton valve, preventing an eventual H^+ entry under acidic media like solid tumors or inflammatory environment (as one might speculate considering that Hv1 is a passive transport pathway).

Furthermore, in this work, we show that Hv1 inhibition, with Zn^{2+} or CIGBI, not only produces a significant acidification of Jurkat T cells but also induces apoptosis and finally cell death. After 2 h of Hv1 inhibition, the apoptotic process starts and progresses to about 45% of cell death after 48 h of Hv1 inhibition with the maximal CIGBI concentration. In the same conditions (CIGBI during 48 h), the pH_i of these cells progresses from a normal pH_i to values below 6.8. Although a few studies showed an early apoptosis-related intracellular alkalinization [3, 28], acidification is widely reported in both apoptosis pathways, "mitochondria-dependent" (intrinsic) or "death receptor" (extrinsic) (for a detailed revision, see Lagadic-Gossmann and Lecureur [31] and Matsuyama and Reed [38]). In the extrinsic pathway acidification, it has been described a downstream caspase activation preceding mitochondrial dysfunction [35], while in the intrinsic one, acidification appears to be caspase-independent and previous to this protease activation [37]. In Jurkat T cells, Gottlieb et al. described intracellular acidification in both pathway-related stimuli and showed how intracellular alkalinization reverted apoptosis progression [22]. Moreover, Jurkat T cell apoptosis has been described, prior to our work, to be induced by cellular acidification due to NHE1 inhibition [50]. According to these events, caspases [18, 37, 51, 54], endonucleases [2, 16], and some of the Bcl-2 family proteins [30, 59] have been

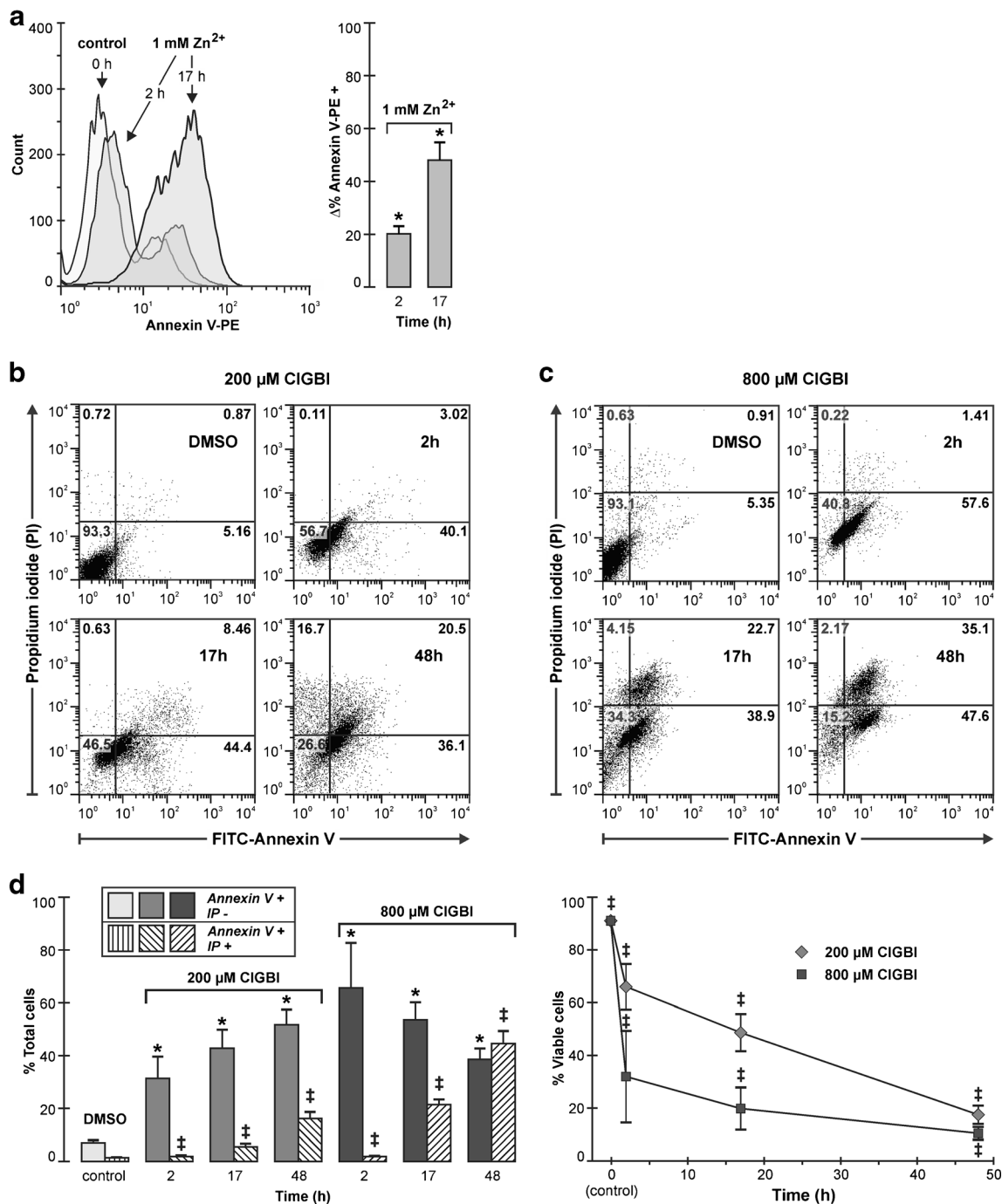


Fig. 5 Hv1 blockade is associated with apoptosis-mediated cell death. **a** Representative histograms of annexin V-PE labeling intensity of 1 mM Zn²⁺-treated cells: 2 and 17 h and control conditions (*left panel*). Mean values \pm SEM of the difference between each condition and its own control in % of annexin V-PE-positive cells (*right panel*). The *asterisk* means statistically significant difference from zero and between each other ($p < 0.05$, Student's t test, $n = 4$). **b** Representative dot plots of annexin V-FITC vs PI for different times of 200 μ M CIGBI treatment. **c** Equivalent figure for 800 μ M CIGBI treatment. **d** Mean %

values \pm SEM for early apoptotic (annexin V-FITC⁺/PI⁻) and late apoptotic/necrotic (annexin V-FITC⁺/PI⁺) cell populations at different times of CIGBI incubation (*left panel*). Decrement in % of viable cells (annexin V-FITC⁻/PI⁻) along CIGBI incubation (*right panel*). The *double daggers* indicate that viable and late apoptotic populations are affected significantly by incubation time and CIGBI concentration. The *asterisk* means that early apoptotic cells are significantly affected by time but not by CIGBI concentration (two-way ANOVA, $p < 0.05$, $n = 4-7$)

shown as pH_i-sensitive structures clearly responsible for apoptosis execution. Therefore, in this tight link between

leukemic cell death and pH_i regulation, the Hv1 channel emerges as a new interesting structure.

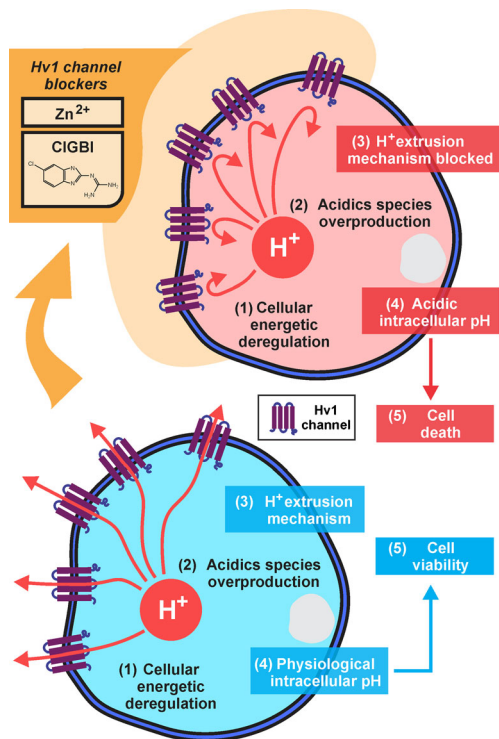


Fig. 6 The inhibition of voltage-gated H^+ channel induces intracellular acidification promoting cell death by apoptosis in the cell line studied. Depiction representing the hypothesis of Hv1 channel role in the context of neoplastic cells: Jurkat T lymphocytes, as other neoplastic cells, obtain energy via glycolytic pathways producing a high amount of acidic species that must be removed to the extracellular milieu. Blocking H^+ extrusion structures, mainly Hv1 channel, produces intracellular acidification that further derives in apoptosis

Ion channels are also frequently implicated in the control of proliferation, apoptosis, and cell migration of cancer cells, and the leukemic cells are not the exception. Recently, Arcangeli et al. reviewed the experimental and preclinical evidence that have ion channels as biological target in leukemia treatment [1]. However, up to date, no review of the field has mentioned Hv1 as a channel to be considered in apoptosis. In the same line, another feature to be further evaluated is if Hv1 blockade derives in membrane depolarization, another event coherent with apoptosis development [4, 43]. The use of new drugs or endogenous modulators that could selectively inhibit the channel may be useful not only in leukemia cells but also in solid tumors; recent works have shown that Hv1 downregulation or inhibition decreases the migratory and invasive abilities of highly metastatic colorectal [64], human breast [62, 63], and glioma [65] tumor cell, as well as impairing proliferation. Latest reports from the field reveal that Hv1 is also functionally expressed in human glioblastoma multiforme cells to which Zn^{2+} treatment induces cell death (PI staining), notwithstanding that significant intracellular acidification is only seen under extracellular Na^+ deprivation [49].

Our work presents evidences suggesting that Hv1 inhibition might be a new and promising therapeutic target in

leukemia treatment. It is worthwhile to note that KO mice lacking Hv1 channel are not associated with immunosuppression [48, 52], although decreased ROS production. Indeed, Clapham et al. challenged Hv1^{-/-} mice against *Staphylococcus aureus* intraperitoneal injection, *Pseudomonas aeruginosa*, and *Burkholderia cepacia* nasal inoculation and were unable to see a significant impairment on bacterial clearance in vivo compared with *w/w* mice [48]. These facts let us speculate that Hv1 pharmacological inhibition might be a safe strategy in oncohematological diseases in contrast to classical antineoplastic drugs. This work, among others, may contribute to keeping this potent structure in mind.

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Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

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