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Citation	The 8th Medical Research Conference, Medical Science Group, The University of Hong Kong, Queen Mary Hospital, Hong Kong, 25-26 January 2003, v. 9 n. 1 Suppl, p. 20
Issued Date	2003
URL	http://hdl.handle.net/10722/54103
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## CVS-03 Inhibition of the unique repolarisation $K^{\scriptscriptstyle +}$ channel current $I_{_{Kur}}$ by verapamil in human atrial myocytes

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**Introduction:** Verapamil is widely used as an antiarrhythmic drug in patients with atrial arrhythmias, and its  $Ca^{2+}$  antagonistc action is usually believed to be the mechanism. The present study was to determine if anti-atrial arrhythmia was related to the blockade of the unique repolarization K<sup>+</sup> current ( $I_{Kur}$ , ultra-rapid delayed rectifier K<sup>+</sup> current). **Method:** Whole-cell patch clamp technique was used to determine  $I_{Kur}$  and another voltage-gated current, transient outward K<sup>+</sup> current ( $I_{toi}$ ) in human atrial myocytes.

**Results:** It was found that verapamil inhibited  $I_{Kur}$  in a dose-dependent manner (EC<sub>50</sub> = 3.74 mM). The effect was fully reversed upon washout of the drug. At test potential of +50 mV, Verapamil at 5 mM decreased  $I_{Kur}$  by 40.3 ± 5.1% (2.68 ± 0.21 pA/pF in control and 1.84± 0.17 pA/pF after verapamil, n=8, p<0.01). The inhibition of  $I_{Kur}$  by verapamil is voltage-independent. In contrast, verapamil (0.1~50 mM) exhibited a slight increase in  $I_{to1}$ , but did not show a dose-response fashion. However, verapamil accelerated inactivation of  $I_{to1}$ . At 1 mM, the time constant of  $I_{to1}$  inactivation was reduced to 51.16± 5.29 from 71.74± 3.3 ms of control (+50 mV, n=8, p<0.01). Other kinetics of  $I_{to1}$  were not affected by verapamil.

**Conclusion:** The present study has demonstrated for the first time that verapamil, a well-known calcium blocker, significantly blocks the unique repolarization  $K^+$  current  $I_{Kur}$ , and revealed a novel antiarrhythmic mechanism of verapamil.

## CVS-04 Effects of genistein on K<sup>+</sup> currents in rat ventricular myocytes

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**Introduction:** Previous studies showed that genistein modulated ionic channels in a protein tyrosine kinase- (PTK) dependent or independent way upon species and/or channel types. The present study was designed to determine whether transient outward K<sup>+</sup> current ( $I_{to}$ ), sustained K<sup>+</sup> current ( $I_{sus}$ ), inward rectifier K<sup>+</sup> current ( $I_{K1}$ ) were regulated by genistein in rat ventricular myocytes.

**Methods:** Whole-cell patch technique was applied to record  $I_{to}$ ,  $I_{sus}$ , and  $I_{K1}$  in enzymatically dissociated ventricular myocytes from rat hearts. All experiments were conducted at 22~23°C.

**Results:** Genistein reversibly inhibited  $I_{to}$  in a concentration-dependent manner (IC<sub>50</sub> = 27.8 µM. The compound (50 mM) shifted midpoint of voltage (V<sub>0.5</sub>) for inactivation of  $I_{to}$  to -42.5 ±1.0 from -37.6±0.6 mV (P<0.01), while the V<sub>0.5</sub> for  $I_{to}$  activation was not significantly altered. In addition, genistein reversibly suppressed  $I_{sus}$  with IC<sub>50</sub> of 17.1 µM. Moreover, the compound at 50 mM reduced  $I_{K1}$  at -100 and -50 mV by 40.6±6.2% and 51.4±0.7%, respectively. However, the effects of genistein on  $I_{to}$ ,  $I_{Ksus}$ , and  $I_{K1}$  were not affected by the application of phosphotyrosine phophatase inhibitor (sodium orthovanadate, 1 mM). On the other hand, daidzein (100 mM), an inactive analogue of genistein, did not show significant effect on the three K<sup>+</sup> currents. Another type of PTK inhibitor, typhostin A23, had no effect on  $I_{to}$ ,  $I_{Ksus}$ , and  $I_{K1}$ .

**Conclusion:** 1) The PTK inhibitor genistein, not tyrphostin A23, reversibly inhibited  $I_{to}$ ,  $I_{Ksus}$ , and  $I_{K1}$  in rat ventricular myocytes, and 2) the effects were not affected by the protein tyrosine phosphatase inhibitor orthovanadate. The present study has provided the first information that genistein-induced suppression of  $I_{to}$ ,  $I_{Ksus}$ , and  $I_{K1}$  is independent of PTK inhibition.