

# Receptor-mediated Calcium Influx in PC12 Cells

## ATP AND BRADYKININ ACTIVATE TWO INDEPENDENT PATHWAYS\*

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In the neurosecretory cell line PC12 the cytosolic free  $Ca^{2+}$  concentration,  $[Ca^{2+}]_i$ , and membrane potential were affected by both external ATP and the nonapeptide bradykinin, BK. The latter caused a rapid and large release of  $Ca^{2+}$  from intracellular stores ( $Ca^{2+}$  redistribution) and, in the presence of external  $Ca^{2+}$ , a long lasting, but moderate  $Ca^{2+}$  influx, which was insensitive to dihydropyridine blockers. On the contrary, ATP evoked a  $[Ca^{2+}]_i$  rise which rapidly inactivated. At least three different mechanisms accounted for the ATP-induced increase in  $[Ca^{2+}]_i$ : less than 20% of the total response was due to intracellular  $Ca^{2+}$  redistribution, consistent with a small increase in inositol 1,4,5-trisphosphate level; the rest (over 80%) was equally accounted for by ATP-activated cation channels and voltage-gated  $Ca^{2+}$  channels. ATP and BK (the latter after  $K^+$  channel blockade) caused plasma membrane depolarization. With both agonists the inward current was carried by both  $Na^+$  and  $Ca^{2+}$ , although the BK-activated current appeared to be more selective for  $Ca^{2+}$ . Channels triggered by ATP and BK differed not only in their cation selectivity, but also in modulation by both  $[Ca^{2+}]_i$  and drugs such as the phorbol ester phorbol 12-myristate 13-acetate and the new antagonist of ligand-activated  $Ca^{2+}$  influx, SK&F 96365.

The demonstration that soluble second messengers are involved in regulating  $Ca^{2+}$  influx is based, in fact, on indirect evidence.

$Ca^{2+}$  redistribution from intracellular stores, due to  $Ins(1,4,5)P_3$ , and  $Ca^{2+}$  influx are often simultaneously triggered by agonists of receptors linked to  $PtdInsP_2$  hydrolysis (3). As far as  $Ca^{2+}$  influx is concerned, general consensus has only been reached on the fact that it is sustained by the activation of a  $Ca^{2+}$  inward current, independent of  $Ca^{2+}$  VOCs. In PC12 cells  $Ca^{2+}$  influx due to the natural nonapeptide BK has been shown to be due to a  $B_2$  type receptor coupled to  $PtdInsP_2$  hydrolysis and  $Ins(1,4,5)P_3$  formation (4). Stimulation by BK is also accompanied by activation of an inward current and (after  $K^+$  channel blockade) by plasma membrane depolarization whose dose dependence, pharmacological sensitivity, and kinetics correlate with the BK-stimulated  $Ca^{2+}$  influx.

In the last few years several reports have appeared indicating that, in a variety of eukaryotic cells, external ATP rises  $[Ca^{2+}]_i$ . In some cells triggering of the ATP receptors causes both  $Ca^{2+}$  redistribution and  $Ca^{2+}$  influx (5, 7). In other cells, however, particularly in smooth muscle, external ATP appears to control only the opening of cation channel(s), permeable to both monovalent and divalent cations (8, 10).

In this paper we demonstrate that in PC12 cells ATP and BK increase  $Ca^{2+}$  permeability through distinct mechanisms. The response to ATP seems to depend in part on indirect activation of  $Ca^{2+}$  VOCs and in part on a cation channel different from that modulated by BK in terms of cation selectivity and pharmacological sensitivity.

Some of the data characterizing the response to ATP in PC12 cells will be shown in miniprint form.

### MATERIALS AND METHODS<sup>2</sup>

#### RESULTS

**ATP and BK: Two Independent Pathways for Cation Fluxes**—The natural nonapeptide BK (4) and ATP rapidly increase the  $[Ca^{2+}]_i$  of PC12 cells. The data, reported below, stress the major differences between the two agonists. Further characterization of the ATP response in PC12 cells will be found in the Miniprint.

**A)  $Ca^{2+}$  Redistribution and Influx**—PC12 cells, loaded with the  $Ca^{2+}$  indicator fura-2, were challenged with an optimal dose of ATP (100  $\mu M$ , Fig. 1, a and b, continuous trace) or BK (0.2  $\mu M$ , Fig. 1, a and b, dashed trace). In the presence of 1 mM external  $Ca^{2+}$  (Fig. 1a), ATP evoked a rapid and short

In eukaryotic cells, the best characterized pathway of  $Ca^{2+}$  influx is that occurring through voltage-gated  $Ca^{2+}$  channels ( $Ca^{2+}$  VOCs)<sup>1</sup> (1). In the last few years, however, much interest has focused on other types of  $Ca^{2+}$  channels, the so called "receptor-operated channels" (ROCs), where the channel is part of the receptor itself and "second messenger-operated channels" (SMOCs) activated by a soluble second messenger (2, 3). Unlike the situation for ROCs, our understanding of  $Ca^{2+}$  SMOCs is rather primitive. In particular, whether one or more types of  $Ca^{2+}$  SMOCs coexist in the same cell and whether the definition of SMOCs is correct is still unclear.

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<sup>1</sup> The abbreviations used are: VOCs, voltage-gated  $Ca^{2+}$  channels;  $[Ca^{2+}]_i$ , cytosolic free  $Ca^{2+}$  concentration; BK, bradykinin; PMA, phorbol 12-myristate 13-acetate; EGTA, [ethylenebis(oxyethylene-nitrilo)]tetraacetic acid; ROCs, receptor-operated channels; SMOCs, second messenger-operated channels;  $Ins(1,4,5)P_3$ , inositol 1,4,5-trisphosphate;  $PtdInsP_2$ , phosphatidylinositol 4,5-bisphosphate.

<sup>2</sup> Portions of this paper (including "Materials and Methods," part of "Results," and Figs. 5-8) are presented in miniprint at the end of this paper. Miniprint is easily read with the aid of a standard magnifying glass. Full size photocopies are included in the microfilm edition of the Journal that is available from Waverly Press.

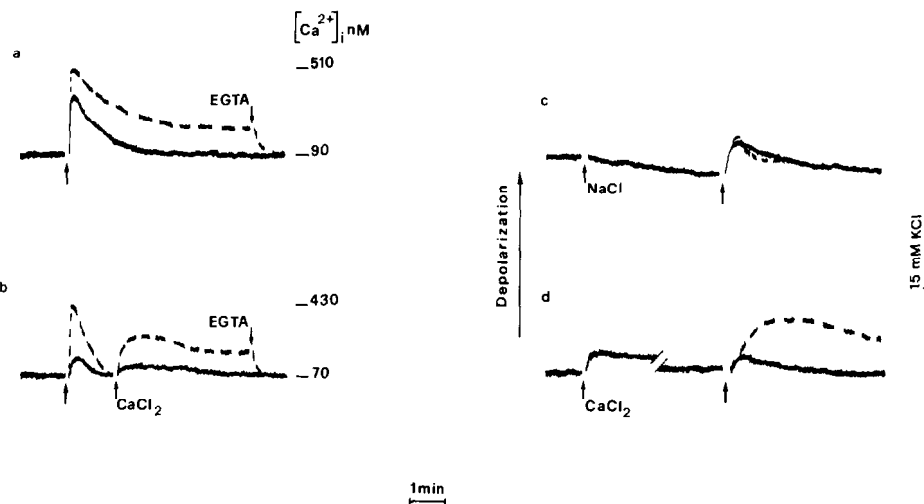


FIG. 1. **Effects of ATP and BK on  $[Ca^{2+}]_i$  and cation influx.** *a* and *b*, effects of ATP and BK on  $[Ca^{2+}]_i$ . Conditions: fura-2-loaded cells (see "Materials and Methods") were incubated in  $Ca^{2+}$ -containing medium (*a*) or in  $Ca^{2+}$ -free, EGTA (100  $\mu$ M)-containing medium (*b*). Cell number  $0.5 \times 10^6$ /ml. Arrows indicate agonist addition, 100  $\mu$ M ATP (continuous trace) or 0.2  $\mu$ M BK (dashed trace). Where indicated 1 mM EGTA and 1 mM  $CaCl_2$  were added. In this and the following figures, the calibrated  $[Ca^{2+}]_i$  is reported on the right-hand side. Traces shown are typical of results obtained in 12 (ATP) or eight (BK) experiments. Resting  $[Ca^{2+}]_i$  varied in the range  $91 \pm 8$  nM in  $Ca^{2+}$ -containing medium, and  $72 \pm 9$  nM in  $Ca^{2+}$ -free, EGTA-containing medium. *c* and *d*, effects of ATP and BK on depolarization in sucrose-based medium. PC12 cells were pre-equilibrated with bisoxonol, apamin (0.4  $\mu$ M), and tetraethylammonium (10 mM) in a sucrose-based medium (see "Materials and Methods"). Where indicated 30 mM NaCl (*c*) or 1 mM  $CaCl_2$  were added (*d*). Arrows indicate 100  $\mu$ M ATP (continuous trace) or 0.2  $\mu$ M BK (dashed trace) addition. 4 min interruption (//).

lived  $[Ca^{2+}]_i$  rise with a peak ( $329 \pm 71$  nM,  $n = 35$ ) at 5–8 s and a half-life of less than 1 min. BK, on the contrary, elicited a larger and more sustained  $[Ca^{2+}]_i$  rise (peak at  $535 \pm 84$  nM,  $n = 30$ ; half-life  $> 5$  min). The most evident difference between the two agonists was thus the presence of a long lasting plateau with BK, but not with ATP.

The initial  $[Ca^{2+}]_i$  rise evoked by BK was almost entirely due to  $Ca^{2+}$  release from internal stores as the peak  $[Ca^{2+}]_i$  was little affected by removal of extracellular  $Ca^{2+}$  (Fig. 1*b*, dashed trace). As shown previously (4), the plateau phase, due to BK, depended on the presence of  $Ca^{2+}$  in the external medium. In contrast, a minor part of the ATP-induced  $[Ca^{2+}]_i$  rise was due to  $Ca^{2+}$  redistribution (*cf.* Fig. 1, *a* and *b*, continuous traces). As measured in different cell batches, the contribution of  $Ca^{2+}$  redistribution accounted for  $18 \pm 8\%$  ( $n = 12$ ) of the total response to 100  $\mu$ M ATP. Consistent with these findings, ATP induced only a small accumulation of [ $^3H$ ]Ins(1,4,5) $P_3$  compared with that observed with BK (*cf.* Miniprint, Fig. 5, inset).

**B) Membrane Potential**—In  $Ca^{2+}$ -containing medium, both ATP and BK, at optimal doses, depolarized membrane potential (the latter only after  $K^+$  channel blockade, see Ref. 4). When sucrose-based medium was used (devoid of permeant cations) neither BK nor ATP induced depolarization (not shown and see Ref. 4). However, when mM  $CaCl_2$  or NaCl were added to the sucrose medium, both agonists did depolarize the cells (see Fig. 1, *c* and *d*; ATP, continuous trace; BK, dashed trace). The depolarization caused by BK was almost identical to that evoked by ATP in the presence of 30 mM NaCl. It was, however, three times bigger and more sustained when  $Ca^{2+}$  (1 mM) was the permeant cation (Fig. 1, *c* and *d*, dashed traces).

Additional evidence, for the existence of two distinct cation pathways, emerged from the following three different "pharmacological" treatments: lowering the  $[Ca^{2+}]_i$ , exposing the cells to the inhibitor of ligand-activated  $Ca^{2+}$  channels, SK&F 96365, and to the phorbol ester PMA.

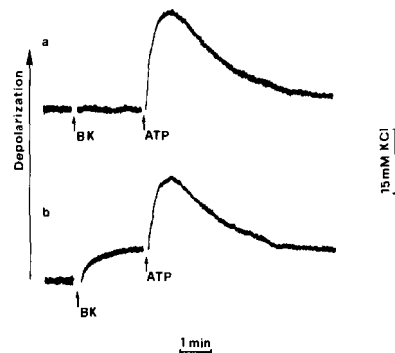


FIG. 2. **Effect of  $[Ca^{2+}]_i$  on ATP- and BK-induced depolarization.** *a*, PC12 cells ( $10^7$  ml) were incubated at 37 °C for 15 min with 30  $\mu$ M quin2/AM in RPMI medium supplemented with 3% fetal calf serum and 1 mM EGTA. Cells were then diluted (1:5) with the same medium, left for a further 45 min at 37 °C, washed, and resuspended in  $Ca^{2+}$ -free, EGTA-containing medium with apamin and tetraethylammonium. Under these conditions the  $[Ca^{2+}]_i$  was 15 nM. *b*, aliquots from the same quin2-loaded cells were incubated in  $Ca^{2+}$ -containing medium for 15 min until a stable level of  $[Ca^{2+}]_i$  was reached (180 nM). Depolarization was checked in the  $Ca^{2+}$ -containing medium with apamin and tetraethylammonium as described in Fig. 7*b* (Miniprint). Where indicated 0.2  $\mu$ M BK and 100  $\mu$ M ATP were added.

**C) Effect of Lowering the  $[Ca^{2+}]_i$** —Fig. 2 shows that when  $[Ca^{2+}]_i$  was lowered to 10–15 nM (by loading cells with quin2/AM in EGTA-containing medium) the depolarization induced by BK was completely abolished, while that due to ATP was unaltered (Fig. 2*a*). Unspecific effects of quin2 treatment can be excluded since the same cells were capable of responding to BK after short recovery in the  $Ca^{2+}$ -containing medium (Fig. 2*b*).

**D) Effect of SK&F 96365**—Fig. 3 shows that the novel inhibitor of receptor-mediated  $Ca^{2+}$  entry, SK&F 96365 (12), largely prevented the prolonged  $[Ca^{2+}]_i$  plateau caused by BK, while it had practically no effect on the peak rise caused by

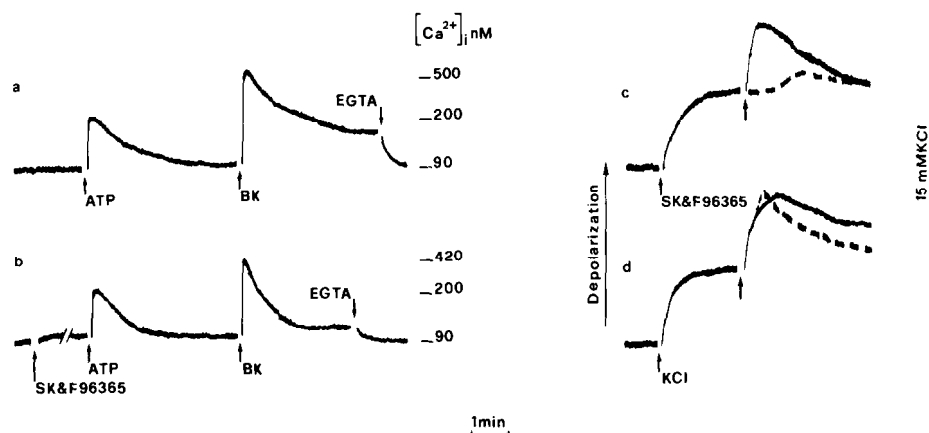


FIG. 3. Effects of SK&F 96365 on  $[Ca^{2+}]_i$ , rise and depolarization due to ATP and BK. *a* and *b*, effects on  $[Ca^{2+}]_i$ . Conditions as in Fig. 1.  $Ca^{2+}$ -containing medium. Where indicated 100  $\mu$ M ATP, 0.2  $\mu$ M BK, and 30  $\mu$ M SK&F 96365 were added. Trace *b* was interrupted for 2 min (//). *c* and *d*, effects on membrane potential. Conditions as in Fig. 7c (Miniprint).  $Ca^{2+}$ -free, EGTA-containing medium supplemented with apamin and tetraethylammonium. Where indicated 30  $\mu$ M SK&F 96365 or 15 mM KCl were added. Arrows indicate 100  $\mu$ M ATP (continuous trace) or 0.2  $\mu$ M BK (dashed trace) addition.

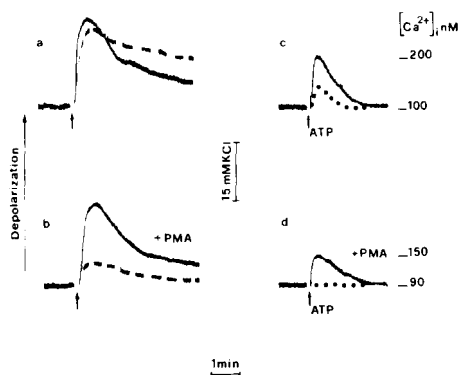


FIG. 4. Effect of PMA on  $[Ca^{2+}]_i$ , rise and depolarization due to ATP and BK. *a* and *b*, effects on depolarization. Conditions as in Fig. 7c (Miniprint).  $Ca^{2+}$ -free, EGTA-containing medium with apamin and tetraethylammonium. *b*, PMA-treated cells. PC12 cells were preincubated at 37  $^{\circ}$ C for 5 min with 100 nM PMA. Arrows indicate 100  $\mu$ M ATP (continuous trace) or 0.2  $\mu$ M BK (dashed trace). *c* and *d*, effects of PMA on  $[Ca^{2+}]_i$ , evoked by ATP. Continuous trace,  $Ca^{2+}$ -containing, sucrose-based medium. Dotted trace,  $Ca^{2+}$ -free, EGTA-containing, sucrose-based medium. *d*, PMA treatment as in panel *b*. Where indicated 100  $\mu$ M ATP was added.

ATP (Fig. 3, *a* and *b*). Since SK&F 96365 is known to inhibit  $Ca^{2+}$  VOCs as well (12), in this experiment the cells were pretreated with verapamil to reduce the contribution of  $Ca^{2+}$  VOCs to the ATP response (see Miniprint). Fig. 3c shows that SK&F 96365 had an unexpected effect on membrane potential, causing a small depolarization. Control cells were thus treated with a dose of KCl that produced equivalent depolarizations. SK&F 96365 caused a marked inhibition of the BK-dependent depolarization (70–80%, cf. Fig. 3, *c* and *d*, dashed traces) while depolarization by ATP was hardly altered by the drug (Fig. 3, *c* and *d*, continuous traces).

*E) Effect of PMA*—Fig. 4 shows that a 5-min pretreatment with the potent protein kinase C activator PMA had a substantial inhibitory effect on the BK-induced depolarization (Fig. 4, *a* and *b*, dashed traces; see Ref. 4). On the contrary, PMA did not affect the ATP-induced depolarization (Fig. 4, *a* and *b*, continuous traces). The effect of PMA on  $[Ca^{2+}]_i$  rises was complicated by the well-known inhibitory effect of PMA on  $Ca^{2+}$  VOCs (13). The effect of PMA on  $[Ca^{2+}]_i$  rise due to ATP was therefore investigated under conditions where the contribution of  $Ca^{2+}$  VOCs was negligible. Fig. 4 (*c* and *d*)

shows an experiment performed in sucrose-based,  $Ca^{2+}$ -containing medium. Under these conditions, PMA still reduced the total ATP response (continuous traces). The inhibition, however, appeared to be entirely due to the effect of PMA on  $Ca^{2+}$  redistribution (dotted traces). Similar results were obtained in  $Na^{+}$ -based medium in the presence of  $Ca^{2+}$  VOCs inhibitors (not shown).

On the other hand, pharmacological treatments known to affect receptors coupled to inhibition of adenylate cyclase, such as incubation with pertussis toxin (14), did not alter significantly the responses to the two agonists.

## DISCUSSION

Extensive evidence suggests that agonists linked to Ptd-InsP<sub>2</sub> hydrolysis cause, in addition to intracellular  $Ca^{2+}$  release, also the opening of cation channels permeable to  $Ca^{2+}$  (2). The BK receptor (B<sub>2</sub>) expressed in PC12 cells appears to be a typical example (4). In a number of systems, an ATP receptor, classified as P<sub>2y</sub> (5), also appears to be coupled to PtdInsP<sub>2</sub> hydrolysis,  $Ca^{2+}$  redistribution, and stimulated influx. The relative importance of  $Ca^{2+}$  influx versus redistribution varies in different cell models (6, 10). The PC12 cells, available in our laboratory, are characterized by ATP receptors coupled to activation of a large  $Ca^{2+}$  influx, with little release of  $Ca^{2+}$  from internal stores.

$Ca^{2+}$  influx induced by BK and ATP shows different characteristics, in particular duration, contribution of  $Ca^{2+}$  VOCs, and sensitivity to a number of pharmacological treatments. In this respect, the parallel investigation of agonist-induced  $[Ca^{2+}]_i$  rises and membrane potential depolarization was particularly useful.

As far as time courses are concerned,  $Ca^{2+}$  influx due to BK lasted for several minutes and so did depolarization (after K<sup>+</sup> channel blockade), while  $Ca^{2+}$  influx due to ATP inactivated within 1 min. Interestingly, under parallel conditions, depolarization by ATP did not return to basal levels for several minutes. This latter observation indicates that ATP activates a long-lasting current which, however, sustains little or no net  $Ca^{2+}$  influx. The rapid inactivation of the ATP-triggered  $Ca^{2+}$  influx was not due to ATP hydrolysis nor to receptor down-regulation (see Miniprint).

A second major difference between BK and ATP was the contribution of  $Ca^{2+}$  VOCs to the overall  $Ca^{2+}$  influx. While BK-induced influx was highly insensitive to blockers of  $Ca^{2+}$

VOCs (nitrendipine,  $\omega$ -conotoxin, verapamil) (4, 15), that induced by ATP was partially sensitive (30–40%). Accordingly, in sucrose medium containing  $CaCl_2$ ,  $Ca^{2+}$  influx due to BK was increased while that due to ATP was reduced; under the same conditions, ATP-evoked depolarization was in fact negligible.

About a third of the  $[Ca^{2+}]_i$  rise caused by ATP was due to activation of a cation influx which is linked to plasma membrane depolarization. These data concur with those of Inoue *et al.* (11) indicating that in PC12 cells ATP activates an inward cation current. A number of results indicate that this pathway is different from that triggered by BK. (a) The depolarization due to ATP is stronger than that due to BK, as indicated by its activation even in the absence of  $K^+$  channel blockers. (b) Although both ATP- and BK-activated currents can be sustained by choline $^+$  or *N*-methylglucamine $^+$ , the BK-evoked depolarization appeared 3-fold larger than that activated by ATP when  $Ca^{2+}$  was the only permeant cation. (c) SK&F 96365 (12) blocked more than 70% of  $Ca^{2+}$  influx and depolarization caused by BK, while leaving the ATP-induced depolarization and VOCs-independent,  $Ca^{2+}$  influx clearly unaltered. (d) BK-induced depolarization was potently inhibited by reducing  $[Ca^{2+}]_i$  below resting level, while the effect of ATP was unchanged. The same independence from  $[Ca^{2+}]_i$  of the ATP-activated channel was also observed in smooth muscle cells by Benham and Tsien (8) in patch clamp studies. (e) Protein kinase C activation, through the phorbol ester PMA, inhibited both  $Ca^{2+}$  redistribution,  $Ca^{2+}$  influx and depolarization caused by BK (4), but did not alter ATP-evoked depolarization and VOCs-independent  $Ca^{2+}$  influx.

As far as the mechanism by which BK and ATP activated the cation channels, the present data allow us only to exclude the involvement of a few obvious candidates, such as pertussis toxin-sensitive G protein(s), protein kinase C, and  $[Ca^{2+}]_i$ . In the case of BK, we have previously demonstrated that InsPs levels are not the moment-to-moment regulators of  $Ca^{2+}$  influx (4). ATP caused only a minor accumulation of Ins(1,4,5) $P_3$ , without significantly altering the concentration of either inositol 1,3,4-trisphosphate or inositol 1,3,4,5-tetrakisphosphate. Concentrations of BK which caused InsPs increases, similar to those of ATP, induced negligible stimulation of  $Ca^{2+}$  influx or depolarization. Thus the involvement of InsPs in ATP-induced  $Ca^{2+}$  influx depolarization seems unlikely. This conclusion is perfectly consistent with the

results of Benham and Tsien (8) in smooth muscle cells. In that model clear evidence demonstrated that ATP-activated current is not mediated by a soluble second messenger. This channel-linked ATP receptor may be regarded as a true ROC, for which we propose the name of  $P_{2C}$  (C, for channel).

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## Supplementary Material to

### Receptor mediated calcium influx in PC12 cells: ATP and BK activated two independent pathways

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## MATERIALS AND METHODS

**Abbreviations** -  $[Ca^{2+}]_i$ , free cytosolic  $Ca^{2+}$  concentration; AM, acetoxymethyl ester; BK, bradykinin; ATP $_3$ , adenosine 5' -  $\gamma$  - (3-thiotriphosphate); GTP S, guanosin 5' -  $\gamma$  - (3-thiotriphosphate); AMP-PNP, adenosine 5' -  $\gamma$  - (p-imidoditriphosphate); AMP-PCP, adenosine 5' -  $\gamma$  - (methylene)triphosphate; ApA, adenosin(5')tetraphosph(5') adenosine; PtdInsP $_2$ , phosphatidylinositol (4,5)bisphosphate; InsPs, inositol phosphates; Ins(1,4,5) $P_3$ , Ins(1,3,4) $P_3$  and Ins(1,3,4,5) $P_4$ ; inositol tris- and tetrakisphosphate; HPLC, high performance liquid chromatography; EGTA, ethylenediamineoxyethylenetrinitrilotetraacetic acid; Hepes, 4-(2-hydroxyethyl)-1-piperazineethane sulfonic acid; Ap, apamin; TEA, tetraethylammonium chloride;  $\omega$ -CGTx,  $\omega$ -conotoxin; PMA, phorbol 12-myristate-13-acetate; Me, divalent cation.

**Cells and Chemicals** - PC12 cells, obtained initially from Dr. Calissano (Rome), were subcultured in our laboratory as described (16). The standard medium contained in mmol/liter: 125 NaCl, 5 KCl, 1 MgSO $_4$ , 1 Na $_2$ HPO $_4$ , 5 glucose, 1 CaCl $_2$  and 20 Hepes (pH 7.4, 37°C); alternatively CaCl $_2$  was omitted and 0.1 EGTA was added instead. In some experiments NaCl was replaced by equimolar amounts of either choline-HCl (choline-based medium) or *N*-methylglucamine (*N*-methylglucamine-based medium), or sucrose (sucrose-based medium). In these latter media, Na $_2$ HPO $_4$  was replaced by K $_2$ HPO $_4$  and the pH adjusted to 7.4 with Tris-HCl. BK, PMA, Ap, nitrendipine and sulfindazole were purchased from SIGMA, St. Louis, MO, USA; quinidine and bisoxonol from Molecular Probes, Eugene, OR, USA; fura-2/AM and bisoxonol from Molecular Probes, Eugene, OR, USA; adenosine, ATP and all other nucleotides from Boehringer Mannheim, West Germany; RPMI-1640 from Flow Labs, Milano, Italy; inositol-free RPMI, fetal calf serum and horse serum from Seromed, Berlin, West Germany;  $^3H$ -Ins(1,4,5) $P_3$ ,  $^3H$ -Ins(1,3,4,5) $P_4$  and  $^3H$ -inositol from Amersham International, U.K.;  $^3H$ -CGTx was a kind gift of Dr. E. Sher, Milano, Italy; pertussis toxin was a kind gift of Dr. R. Rappuoli, Siena, Italy; SK&F 96365 was a kind gift of Dr. J. Merritt (SK&F Welwyn, England). All other materials were analytical or highest available grade.

**Measurement of  $[Ca^{2+}]_i$**  - Loading with fura-2 was performed essentially as described (17). Briefly PC12 cells suspensions ( $10^7 \times$  cells/ml) were incubated for 30 min at 37°C, under continuous stirring in RPMI-1640 medium supplemented with 1% fetal calf serum, 20 mM Hepes (pH 7.4 at 37°C) and 2  $\mu$ M fura-2/AM. The cells were then washed with fresh medium and kept in RPMI medium containing 1% fetal serum and left at room temperature until use. Before each experiment, cell aliquots ( $2 \times 10^6$ ) were centrifuged, the pellets were resuspended in different, prewarmed media, and maintained under continuous stirring, in a thermostated (37°C) cuvette. Excitation and emission wavelengths were 330 and 505 nm, respectively. Sulfindazole (250  $\mu$ M) was added at the beginning of each experiment to prevent fura-2 leakage (18). The calibration of the fluorescent signal in term of  $[Ca^{2+}]_i$  was performed as described (17).

**Membrane Potential** - Measurements of membrane potential with the fluorescent probe, bisoxonol (540–580 nm) were performed as described in detail by Di Virgilio *et al.* (19). The fluorescent signal was calibrated by adding 0.5  $\mu$ M gramicidin D or 60 mM KCl at the end of each experiment.

**Inositol Phosphate Extraction and Separation** - Nearly confluent PC12 cells were incubated for 48 h in RPMI inositol-free medium, supplemented with 20 mM Hepes, 1% fetal calf serum and 6  $\mu$ Ci/ml of  $^3H$ -inositol. The cells were then washed twice and resuspended in appropriate media. Cell aliquots (about  $5 \times 10^6$  cells) were used for each sample. Inositol phosphate extraction and separation was performed as previously described (4) with a Partisil SAX HPLC column (Technicol, U.K.). Identification of Ins(1,4,5) $P_3$  and Ins(1,3,4,5) $P_4$  was based on commercial  $^3H$ -InsPs standards. The  $^3H$ -CGTx control cells received the same treatment without  $^3H$ -InsPs, as described by Downes *et al.* (20).

**$\omega$ -Conotoxin Treatment** -  $\omega$ -CGTx treatment was performed as described by Sher *et al.* (15) with a slight modification. PC12 cells ( $10^7$  cells/ml), previously loaded with fura-2, were incubated for 30 min at 37°C in RPMI supplemented with 1% fetal calf serum, 250  $\mu$ M sulfindazole and 2  $\mu$ M  $\omega$ -CGTx. Control cells received the same treatment without  $\omega$ -CGTx. Cells were then washed and immediately used.

**Pertussis Toxin Treatment** - Semi-confluent PC12 cells were incubated for 15 h in culture medium supplemented with pertussis toxin (200 ng/ml). Cells were then washed and loaded with fura-2 as described above.

**Permeabilization Test** - Membrane integrity was checked by testing the ability of the cells to exclude the fluorescent dye ethidium bromide (305-580 nm) (21). Calibration was performed by adding 10 μM digitonin at the end of each experiment.

**Data Analysis** - The ATP response in PC12 cells varied significantly from one batch of cells to another, especially in term of absolute [Ca<sup>2+</sup>]<sub>i</sub> peak values (from 200 to 400 nM) and extent of depolarization (1-2 fold the depolarization caused by 15 mM KCl). The reason of this variability, which was only quantitative and not qualitative, is not known, and is now under investigation. Each experiment presented was performed at least on three different batches of cells. When effects on [Ca<sup>2+</sup>]<sub>i</sub> and membrane potential were compared, the experiments were performed on aliquots of the same batch of cells. ATP<sup>\*</sup> concentrations, in different media, were calculated by using the binding constants for Mg<sup>2+</sup>, Ca<sup>2+</sup> and H<sup>+</sup> to EGTA and ATP as given by Gould et al. (22).

RESULTS

**Desensitization of the ATP-dependent [Ca<sup>2+</sup>]<sub>i</sub> rise.** Fig 5 (panels a and d) shows that the response to ATP<sub>1</sub> (a slowly hydrolyzable ATP analogue) was almost identical, in size and duration, to that induced by ATP. Furthermore PC12 cells became unresponsive to high ATP concentrations (up to 500 μM) after being challenged with optimal doses of ATP or ATP<sub>1</sub> (100 μM) (Fig 5 a and d). This desensitization required the continuous presence of the nucleotide. In fact, when the cells were first treated with saturating concentrations of ATP for 5 min and then washed, they responded normally to a second dose of the stimulant (not shown). In contrast, if PC12 cells were first stimulated with ATP, and then with BK (or viceversa), they did not reveal cross-desensitization (see Fig 5 b and e). Combination of the two stimuli resulted in a partially additive effect (Fig 5c). These findings suggest that inactivation of the ATP-triggered Ca<sup>2+</sup> influx, was not dependent on ATP hydrolysis, since i) inactivation with the same time course was observed even with ATP concentrations 10 times higher than those eliciting maximal response and ii) similar inactivation was obtained with ATP<sub>1</sub>.

The inset of Fig 5 shows that a short (10 s) stimulation with ATP (500 μM; similar results in the 5μM-5mM concentration range) induced a small accumulation of <sup>3</sup>H-Ins(1,4,5)P<sub>2</sub>, compared to that observed with BK (0.2 μM) (120% and 310% of control cells, respectively). Moreover, in contrast to the results obtained with BK, stimulation with ATP (500 μM), from 10 s to 5 min, was unable to modify significantly the levels of both <sup>3</sup>H-Ins(1,3,4,5)P<sub>2</sub> and <sup>3</sup>H-Ins(1,3,4,5)P<sub>1</sub> (not shown; see ref. 4).

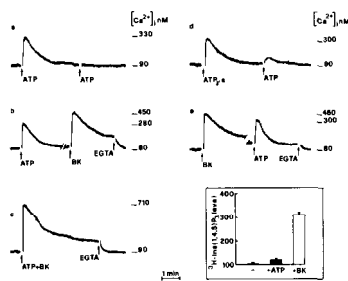


FIGURE 5. Desensitization of the ATP-dependent [Ca<sup>2+</sup>]<sub>i</sub> rise. Conditions as in Fig 1. a-e: Ca<sup>2+</sup>-containing medium. a and d: first addition of ATP or ATP<sub>1</sub> (100 μM), second ATP addition, 500 μM. b: PC12 cells were first challenged with 100 μM ATP and then with 0.2 μM BK (// trace interrupted for 4 min). e: Same conditions as in panel b with BK added first and ATP second. c: 100 μM ATP and 0.2 μM BK were added together. Inset: Cells were labeled with <sup>3</sup>H-myo-inositol for 48h (see Exp. Proc.) and stimulated for 10 s with 500 μM ATP (hatched bar) or 0.2 μM BK (open bar) in Ca<sup>2+</sup>-containing medium. <sup>3</sup>H-Ins(1,4,5)P<sub>2</sub> was isolated by HPLC, with a Partisil SAX column and measured as percent of that found in unstimulated cells (solid bar).

Different nucleotides were tested for their ability to mimic the response to ATP (Fig 6). AMP-PCP, ADP, AMP and adenosine, at concentrations up to 500 μM were completely ineffective. At 100 μM CTP and dATP were about ten times less effective than ATP. At higher doses (500 μM), however, they evoked about 50% of the response obtained with ATP. All the other compounds tested (between 5 μM - 500 μM) caused less than 30% of the [Ca<sup>2+</sup>]<sub>i</sub> rise induced by 500 μM ATP.

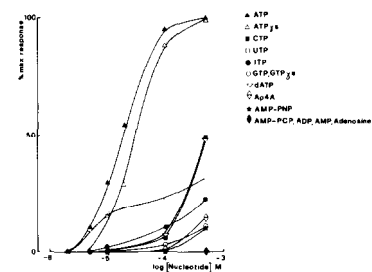


FIGURE 6. Dose-response curve of [Ca<sup>2+</sup>]<sub>i</sub> rises caused by different nucleotides. Conditions as in Fig 1. [Ca<sup>2+</sup>]<sub>i</sub> rises due to different nucleotides (listed on the right side of the figure), tested at concentrations ranging from 5 to 500 μM, were measured as percent of the maximal [Ca<sup>2+</sup>]<sub>i</sub> increase induced by 500 μM ATP. The results shown are from a typical experiment, which was repeated in 3 different PC12 batches.

Data obtained in recent years suggest that the molecular form of ATP active at the level of Ca<sup>2+</sup>-mobilizing receptors is ATP<sup>\*</sup> instead of MgATP<sup>\*</sup> or MgATP<sup>2+</sup>. In order to investigate this point, experiments were carried out in Mg<sup>2+</sup>-free medium. The results obtained show that in PC12 cells the [Ca<sup>2+</sup>]<sub>i</sub> rise evoked by ATP did not require Mg<sup>2+</sup>, but rather was enhanced in Mg<sup>2+</sup>-free medium. Under the latter conditions, the dose-response curve for ATP-induced [Ca<sup>2+</sup>]<sub>i</sub> rise was shifted to the left (see below). Absence of Mg<sup>2+</sup>, on the other hand, failed to modify the BK responses (not shown).

**Effect of ATP on Membrane Potential.** In Ca<sup>2+</sup>-containing medium, ATP (100 μM)-induced depolarization dissipated, although only in part, within 2 min (Fig 7a). Such a depolarization was enhanced in the presence of the Ca<sup>2+</sup>-activated K<sup>+</sup> channel inhibitors, apamin (0.4 μM) and TEA (10 mM) (Fig 7 b,c). Under the latter conditions, the dose response curve of the ATP-induced depolarization in Ca<sup>2+</sup>-free, EGTA-containing medium, was slightly shifted to the left compared to that obtained for the [Ca<sup>2+</sup>]<sub>i</sub> rises in the Ca<sup>2+</sup>-containing medium (Fig 7 inset A). The differences between the two curves disappeared when the results were normalized to [ATP<sup>\*</sup>]<sup>-1</sup> rather than total [ATP] (Fig 7 inset B).

Similarly to BK (4), ATP still induced a small depolarization when choline<sup>+</sup> and N-methylglucamine<sup>+</sup> were used to replace Na<sup>+</sup> in the incubation medium (not shown; see ref. 4) suggesting that cation channels of low selectivity are activated by both agonists. ATP-induced depolarization was also observed in a Ca<sup>2+</sup>- and Mg<sup>2+</sup>-free, Na<sup>+</sup>-containing medium. Under those conditions 2 μM total ATP, a subthreshold dose under standard conditions, was already maximally effective (cfr. Fig 7 inset B). The depolarization observed with 2 μM ATP in Ca<sup>2+</sup> and Mg<sup>2+</sup>-free medium was not due to cellular damage since, under the latter conditions, permeabilization to ethidium bromide was not observed even after 10 min incubation (not shown).

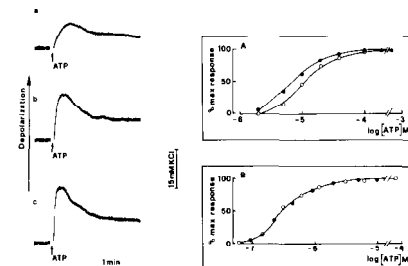


FIGURE 7. Effects of ATP on membrane potential and [Ca<sup>2+</sup>]<sub>i</sub>. a: Ca<sup>2+</sup>-containing medium. b: Ca<sup>2+</sup>-containing medium supplemented with Ap (0.4 μM) and TEA (10 mM). c: Ca<sup>2+</sup>-free, EGTA (0.1 mM)-containing medium, with Ap and TEA as in panel b. Cells (0.5 x 10<sup>6</sup>/ml) were pre-equilibrated with 100 nM bisoxonol for 5-10 min at 37°C. Depolarization is indicated by an increase in the bisoxonol fluorescence. On the right hand side the increase in fluorescence caused by 15 mM KCl is shown. Inset A: dose response curves of the [Ca<sup>2+</sup>]<sub>i</sub> rises, in Ca<sup>2+</sup> medium, (open circle) and the depolarization, in Ca<sup>2+</sup>-free, EGTA-containing medium with Ap and TEA, (closed circle). The percent of maximal ATP response is plotted as a function of the total ATP concentration. Data are from a typical experiment which was repeated in 3 different PC12 batches. Inset B: the same data of inset A were plotted as a function of the ATP<sup>\*</sup> concentration.

**Voltage Operated Ca<sup>2+</sup> channels (VOCs) involvement in the effects of ATP on [Ca<sup>2+</sup>]<sub>i</sub>.** In standard media, the BK induced [Ca<sup>2+</sup>]<sub>i</sub> rise was unaffected by blockers of Ca<sup>2+</sup> VOCs (4,15). On the contrary, nitrendipine (0.4 μM) a specific inhibitor of L-type Ca<sup>2+</sup> VOCs, induced a partial inhibition, ranging from 15 to 25% of the total [Ca<sup>2+</sup>]<sub>i</sub> rise evoked by 100 μM ATP. Under the same conditions, nitrendipine treatment resulted in a 60% inhibition of the [Ca<sup>2+</sup>]<sub>i</sub> peak and totally prevented the plateau induced by 60 mM KCl (not shown and see below). The [Ca<sup>2+</sup>]<sub>i</sub> rise due to KCl was greatly reduced (> 85%) when nitrendipine and ω-CgTx (an inhibitor of N-type Ca<sup>2+</sup> VOCs) were used together (cfr. Fig 8 a and b). In contrast, under the latter conditions, the ATP-induced [Ca<sup>2+</sup>]<sub>i</sub> response was still observed (A above 55% of control cells, cfr. Fig 8 a,b). Such an ATP-induced, nitrendipine- and ω-CgTx-insensitive, [Ca<sup>2+</sup>]<sub>i</sub> rise was sustained only in small part by intracellular Ca<sup>2+</sup> release (Fig 8, dashed traces). Verapamil (20 μM) a widely used, but not very specific, inhibitor of Ca<sup>2+</sup> VOCs was also used and the inhibition by this drug was greater than that obtained with nitrendipine alone and similar to that of nitrendipine plus ω-CgTx (45% inhibition of a maximal ATP response, not shown).

In the sucrose-based medium, supplemented with 1 mM external CaCl<sub>2</sub>, the ATP-induced depolarization was very small compared to that obtained in standard medium (cfr. Fig 1d and 2b). Under these conditions, the ATP-induced [Ca<sup>2+</sup>]<sub>i</sub> rise was similar to that observed in standard medium in the presence of nitrendipine plus ω-CgTx (cfr. Fig 8 b and c), and it was insensitive to the Ca<sup>2+</sup> VOCs blockers (not shown).

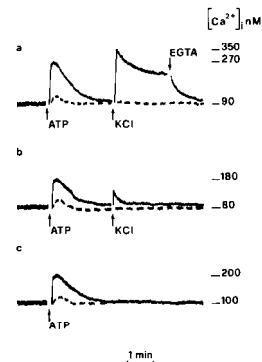


FIGURE 8. Ca<sup>2+</sup> VOCs contribution to ATP effects on [Ca<sup>2+</sup>]<sub>i</sub>. Conditions as in Fig 1. a-c: Continuous traces, Ca<sup>2+</sup>-containing medium, dashed traces, Ca<sup>2+</sup>-free, EGTA-containing medium. a: Control cells. b: Cells treated for 30 min at 37°C with 2 μM ω-CgTx, then washed and resuspended in media containing 0.4 μM nitrendipine. c: Sucrose-based medium. Where indicated 100 μM ATP, 60 mM KCl and 1 mM EGTA were added.

Our data suggest that ATP-induced Ca<sup>2+</sup> redistribution is due to different receptors than those causing Ca<sup>2+</sup> influx. In fact pretreatment of PC12 cells with low UTP concentrations completely desensitized the ATP-induced Ca<sup>2+</sup> redistribution, leaving ATP-dependent Ca<sup>2+</sup> influx and plasma membrane depolarization unaffected. (Pasolunghi unpublished observation). Of interest, Kim et al (7) showed that, in bovine chromaffin cells, Ca<sup>2+</sup> redistribution can be activated by either ATP or UTP, while ATP only triggers Ca<sup>2+</sup> influx and catecholamine secretion. Thus although in our PC12 cells, a P<sub>2</sub> subtype of ATP receptor (5), coupled to PtdInsP<sub>2</sub> hydrolysis, is probably expressed, the main response to the nucleotide depends on the activation of a type of ATP receptor differently described by Benham and Tsien (8) in smooth muscle cells and by Gerschwind et al. (10) in HIT cells. On the other hand this receptor differs in pharmacological specificity from that expressed in rat heart myocytes (9). In fact the ATP receptor of our PC12 cells appears to be sensitive to ATP<sup>\*</sup> while that expressed in myocytes is activated by MgATP<sup>\*</sup>. In addition, like the cardiac myocyte receptor, in our model, the sugar residue, the purinic base and the gamma phosphate appear essential for effective stimulation.