AIP suppresses LCR characteristics in permeabilized SANC, decreases phosphorylation of RyR, PLB and reduces the SR Ca^{2+} load. Thus, normal automaticity of SANC is regulated by basal CaMKII-dependent phosphorylation, partly via modulation of intrinsic SR Ca^{2+} cycling, i.e. SR Ca^{2+} pumping and release attained through phosphorylation of PLB and RyR.

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Cardiomyopathy-Causing Mutations in Thin Filament Regulatory Proteins Acutely Affeect Ca²⁺-Buffering and Ca²⁺-Dependent Signalling In Situ

Paul Robinson, Xing Luo, Yin Hua Zhang, Barbara Casadei, Hugh Watkins, Charles Redwood.

University of Oxford, Oxford, United Kingdom.

Hypertrophic cardiomyopathy (HCM) is caused by mutations in thin filament regulatory proteins that confer distinct primary alterations of cardiac contractility. We believe that altered Ca²⁺-buffering by mutant thin filaments leads to altered Ca²⁺ handling and, via Ca²⁺-dependent signalling pathways, contributes to disease pathogenesis. We are studying the *in situ* effect on Ca²⁺-flux of a HCM causing mutations in human cardiac troponin T (R92Q), troponin I (R145G) and a-tropomyosin (D175N) by adenoviral expression in adult guinea pig cardiomyocytes. Western blot and immunolocalisation analysis showed that recombinant protein was found at the I band and comprised ~50% of the total protein 48 hours after infection. Simultaneous measurement of unloaded sarcomere-shortening and Ca2+-transients, showed the HCM mutations had a significant decrease in the basal sarcomere length coupled with an increase in the diastolic Ca²⁺ concentration. Caffeine challenging indicated that the SR load was reduced and the sodium calcium exchanger (NCX) dependant tau decay time was increased in the HCM mutant cells. Ca²⁺-dependent signalling cascades were assessed by observing, the nuclear translocation of the transcription factor NFAT by immunofluorescence. Chronically paced HCM mutant cells had a ~2.5 fold increase in nuclear NFAT compared to unpaced or wild type infected cells. A potential mechanism for this was ryanodine receptor leak which was increased ~7 fold in cTnI R145G mutant cells. The same mutation reduced the ability of the SR to respond to PKA dependant contractile sensitization, upon Isoproterinol treatment. These data strongly implicate Ca²⁺-buffering as a driving mechanism of the macroscopic remodelling observed in the pathological disease state of HCM. Ca²⁺ Buffering is now being directly measured by simultaneously integrating the NCX current of patch clamped mutant cardiomyocytes, as the cells are challenged with caffeine.

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Orail Mediates Exacerbated Ca²⁺ Entry in Dystrophic Skeletal Muscle Xiaoli Zhao¹, Joseph G. Moloughney², Sai Zhang², Shinji Komazaki³, Noah Weisleder¹.

¹The Ohio State University, Columbus, OH, USA, ²UMDNJ, Piscataway, NJ, USA, ³Saitama Medical University, Saitama, Japan.

There is substantial evidence indicating that disruption of Ca²⁺ homeostasis and activation of cytosolic proteases play a key role in the pathogenesis of Duchenne Muscular Dystrophy (DMD). However, the exact nature of the Ca² deregulation and Ca^{2+} signaling pathways that are altered in dystrophic muscles have not yet been resolved. Here we examined the contribution of the store-operated Ca²⁺ entry (SOCE) for the pathogenesis of DMD. RT-PCR and Western blot found that the expression level of Orai1, the pore-forming unit of SOCE, was significantly elevated in the dystrophic muscles, while parallel increases in SOCE activity and SR Ca²⁺ storage were detected in adult mdx muscles using Fura-2 fluorescence measurements. High-efficient shRNA probes against Orai1 were delivered into the flexor digitorum brevis muscle in live mice and knockdown of Orai1 eliminated the differences in SOCE activity and SR Ca^{2+} storage between the *mdx* and wild type muscle fibers. SOCE activity was repressed by intraperitoneal injection of BTP-2, an Orai1 inhibitor, and cytosolic calpain1 activity in single muscle fibers was measured by a membrane-permeable calpain substrate. We found that BTP-2 injection for 2 weeks significantly reduced the cytosolic calpain1 activity in mdx muscle fibers. Additionally, ultrastructural changes were observed by EM as an increase in the number of triad junctions was identified in dystrophic muscles. Compensatory changes in protein levels of SERCA1, TRP and NCX3 appeared in the mdx muscles, suggesting that comprehensive adaptations occur following altered Ca²⁺ homeostasis in mdx muscles. Our data indicates that upregulation of the Orai1-mediated SOCE pathway and an overloaded SR Ca²⁺ store contributes to the disrupted Ca^{2+} homeostasis in *mdx* muscles and is linked to elevated proteolytic activity, suggesting that targeting Orail activity may be a promising therapeutic approach for the prevention and treatment of muscular dystrophy.

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Intracellular Na⁺ Spatially Controls Ca²⁺ Signaling during Acidosis in the Ventricular Myocyte

Pawel Swietach¹, Kenneth W. Spitzer², Richard D. Vaughan-Jones¹.

¹University of Oxford, Oxford, United Kingdom, ²Cardiovascular Research & Training Institute, University of Utah, Salt Lake City, UT, USA.

Myocardial intracellular pH (pH_i) exerts major effects on cardiac function. Decreased pH_i can depress Ca²⁺-transients (CaTs) via effects on SR CaATPase and ryanodine-receptors. The inhibition is typically offset by low pHi stimulation of sarcolemmal Na/H exchange (NHE). This raises [Na⁺]_i sufficiently to increase SR Ca²⁺-loading via t-tubular Na/Ca exchange, thus increasing CaTamplitude, which helps to protect contraction. We find that NHE activity (rat ventricular myocytes) also affects Ca²⁺-signalling spatially. A longitudinal pHi non-uniformity can be induced by microperfusion of the weak acid, acetate (80mM), over one end of the cell. pH_i falls in the acetate-exposed region, resulting in a stable pHi-gradient of ~0.6 units. With NHE inhibited (30µM cariporide), this procedure persistently reduced CaT amplitude, but only in the acidic region. With functional NHE (no cariporide), the same stably-imposed pH_igradient increased CaT-amplitude uniformly throughout the myocyte. This occurred despite NHE being stimulated only at the acidic end of the cell. One explanation is that local Na⁺-influx during regional NHE-stimulation uniformly elevates [Na⁺]_i, thus increasing SR Ca²⁺-loading in both acidic and non-acidic regions. This requires that cytoplasmic Na⁺ be readily diffusible, as NHE protein is mainly expressed at surface sarcolemma and intercalateddisks (not in transverse-tubules). We therefore imaged [Na⁺]_i (AM-loaded SBFI) during localised NHE-stimulation (local acetate microperfusion, rest of cell exposed to Na-free solution; 10⁻⁶ M strophanthidin throughout to inhibit Na/K-transporters). This induced a local NHE-mediated [Na⁺]_i-rise, which dissipated longitudinally, with an apparent diffusion-coefficient of 680µm²/s (~50% of that in pure water), consistent with rapid Na^+_i -mobility. We therefore propose that high Na⁺_i-mobility permits local NHE activity to unify CaTamplitude spatially, even during pHi non-uniformity. NHE activity in the ventricular myocyte thus not only enhances Ca²⁺-signalling during acidosis, to protect contraction, but also spatially unifies Ca²⁺-signalling within the cell.

Platform: Protein-Lipid Interactions I

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Novel Concept of Delivery of Diagnostic and Therapeutic Agents to Cells in Acidic Diseased Tissue using Energy of Membrane-Associated Folding Oleg A. Andreev¹, Donald M. Engelman², Yana K. Reshetnyak¹. ¹University of Rhode Island, Kingston, RI, USA, ²Yale, New Haven,

¹University of Rhode Island, Kingston, RI, USA, ²Yale, New Haven, CT, USA.

We are developing a novel technology for selective delivery of imaging probes and membrane-impermeable molecules to cells with low extracellular pH. It is based on action of water-soluble membrane peptide, $\ensuremath{\text{pHLIP}}\xspace^{\circledast}$ (pH [Low] Insertion Peptide), which inserts and folds in cellular membrane at slightly acidic environment, characteristic for various pathological states including cancer and ischemic myocardium. pHLIP possess dual delivery capability. Imaging agents (fluorescent, PET, SPECT or MRI) could be attached to the N-terminus of the peptide to mark tumor mass and tumor margins with high precision. At the same time, therapeutic molecules attached to the C-inserting end, could be moved across membrane to reach cytoplasmic target. Among translocated molecules are synthetic cyclic peptides, gene regulation agent (peptide nucleic acid) and phalla- and amanita toxins with hydrophobicity tuned by attachment of fatty acids for optimum delivery. We performed sequence variation and investigated 16 pHLIP variants with main goals of understanding the main principles of peptide-lipid interactions and tune delivery capability of pHLIP. The biophysical studies including thermodynamics and kinetics of the peptides interaction with a lipid bilayer of liposomes and cellular membranes were carried out. We found that peptides association to membrane at neutral and low pH could be modulated by 3-4 times. The apparent pK of transition from surface bound to membrane-inserted state could be tuned from 6.5 to 4.5. The rate of peptide's insertion across a bilayer could be enhanced 100 times compared to parent pHLIP. As a result, blood clearance and tumor targeting were modulated in a significant degree. The work is supported by NIH grants CA133890 to OAA, DME, YRK.

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Membrane Structure and Interactions of the Amphipathic N-Terminus of Huntingtin

Matthias Michalek, Evgeniy Salnikov, **Burkhard Bechinger**. University of Strasbourg, Strasbourg, France.