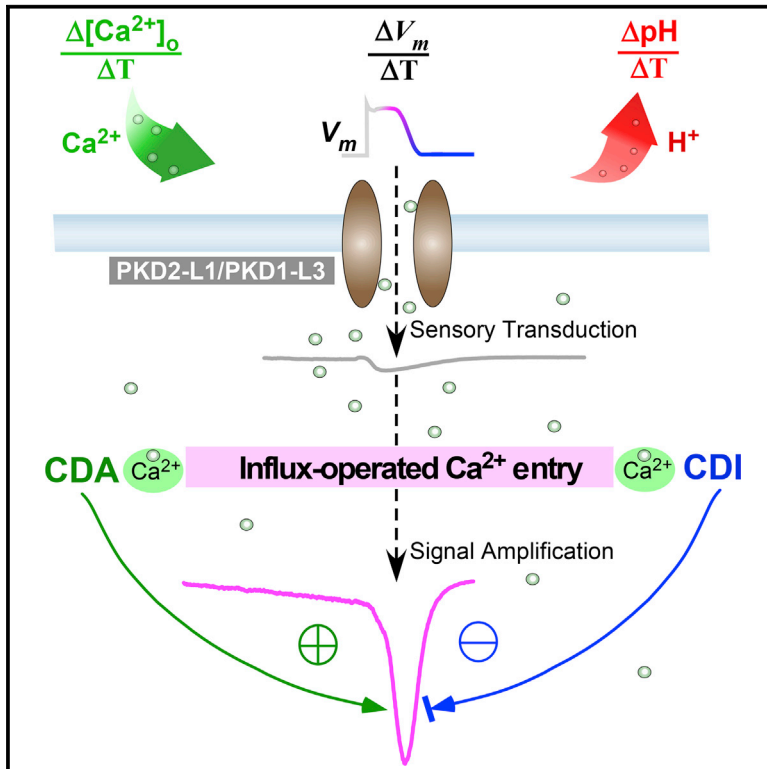


## Influx-Operated $\text{Ca}^{2+}$ Entry via PKD2-L1 and PKD1-L3 Channels Facilitates Sensory Responses to Polymodal Transient Stimuli

### Graphical Abstract



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### In Brief

Sensing profiles of recombinant PKD2-L1/PKD1-L3 channels challenge their suggested function as molecular transducers. Hu et al. find that influx-operated  $\text{Ca}^{2+}$  entry can produce  $\text{Ca}^{2+}$  spikes that augment and reshape sensory responses to polymodal stimuli, including  $\text{Ca}^{2+}$  exposure, voltage repolarization, and acid withdrawal.

### Highlights

- PKD2-L1/PKD1-L3 channel  $\text{Ca}^{2+}$  influx drives both positive and negative feedback
- $\text{Ca}^{2+}$  spikes are inducible when the balance of this feedback is well tuned
- Sensory responses to stimuli with rapid onset/offset are facilitated by  $\text{Ca}^{2+}$  spikes
- $\text{Ca}^{2+}$ -binding EF hands of PKD2-L1 regulate  $\text{Ca}^{2+}$  feedback and  $\text{Ca}^{2+}$  spikes



# Influx-Operated $\text{Ca}^{2+}$ Entry via PKD2-L1 and PKD1-L3 Channels Facilitates Sensory Responses to Polymodal Transient Stimuli

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## SUMMARY

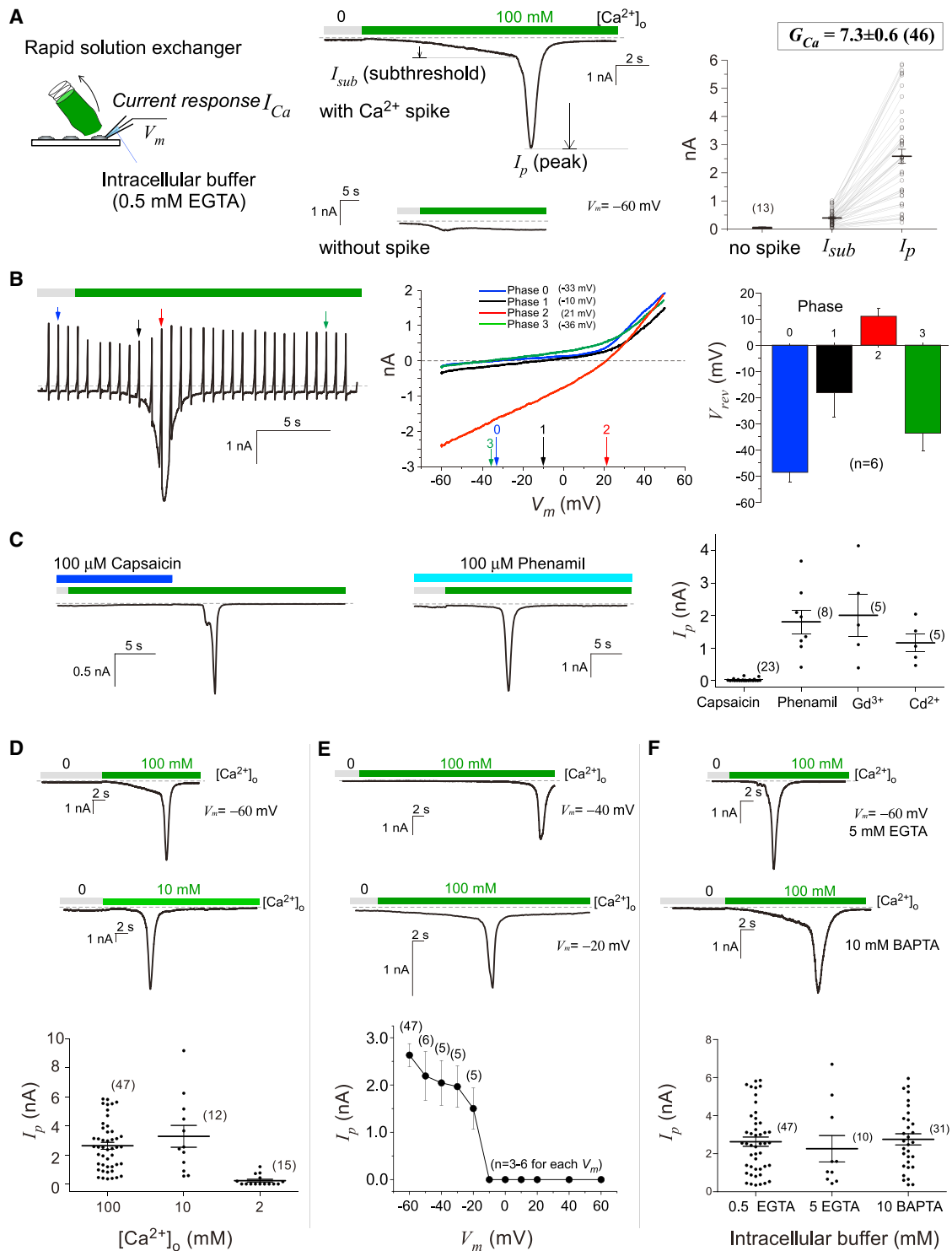
The polycystic TRP subfamily member PKD2-L1, in complex with PKD1-L3, is involved in physiological responses to diverse stimuli. A major challenge to understanding whether and how PKD2-L1/PKD1-L3 acts as a bona fide molecular transducer is that recombinant channels usually respond with small or undetectable currents. Here, we discover a type of  $\text{Ca}^{2+}$  influx-operated  $\text{Ca}^{2+}$  entry (ICE) that generates pronounced  $\text{Ca}^{2+}$  spikes. Triggered by rapid onset/offset of  $\text{Ca}^{2+}$ , voltage, or acid stimuli,  $\text{Ca}^{2+}$ -dependent activation amplifies a small  $\text{Ca}^{2+}$  influx via the channel.  $\text{Ca}^{2+}$  concurrently drives a self-limiting negative feedback ( $\text{Ca}^{2+}$ -dependent inactivation) that is regulated by the  $\text{Ca}^{2+}$ -binding EF hands of PKD2-L1. Our results suggest a biphasic ICE with opposite  $\text{Ca}^{2+}$  feedback regulation that facilitates sensory responses to multimodal transient stimuli. We suggest that such a mechanism may also occur for other sensory modalities and other  $\text{Ca}^{2+}$  channels.

## INTRODUCTION

The polycystin subfamily of TRP (TRPP) genes encodes a class of  $\text{Ca}^{2+}$ -permeable non-selective cation channels (Gees et al., 2010). TRPPs are named after the disease-causing genes TRPP2 (PKD2) and PKD1, mutations in which are responsible for autosomal dominant polycystic kidney disease (ADPKD) (Zhou, 2009). TRPP3 (PKD2-L1) has been linked to various aspects of transmembrane signaling, including sour taste perception and proton-mediated pain (Huang et al., 2006; Huque et al., 2009; Orts-Del'Immagine et al., 2014, 2015),  $\text{Ca}^{2+}$  homeostasis and sonic hedgehog signaling in primary cilia (DeCaen et al., 2013; Delling et al., 2013), cystic disorders in *Krd* (kidney and retinal defects) mice (Keller et al., 1994), and an aversive response to high salt (Oka et al., 2013). It has been speculated

that PKD2-L1/PKD1-L3 channels may act as the sought-after molecular transducers of voltage,  $\text{Ca}^{2+}$ , pH, heat, and mechanical stress (Chen et al., 1999; Higuchi et al., 2014; Murakami et al., 2005; Shimizu et al., 2009). However, in contrast to prominent  $\text{Ca}^{2+}$  signals observed in native settings, currents of recombinant PKD2-L1/PKD1-L3 channels in mammalian cells are often very small or undetectable, raising fundamental questions as to whether PKD2-L1 channel complexes indeed function as bona fide transducers to mediate sensory functions in vivo. For example, while data from native preparations support that PKD2-L1 and PKD1-L (PKD1-L1 or PKD1-L3) are involved in mechanosensation of primary cilia (Delling et al., 2013; Murakami et al., 2005; Nauli et al., 2003) and in acid sensing of sour taste (Huang et al., 2006; Kawaguchi et al., 2010), recombinant heteromeric PKD2-L1 channel complexes exhibit little activation in response to physiologically relevant mechanical stress (60 mm Hg or lower) or acid stimuli (pH of 3 or higher) (DeCaen et al., 2013; Inada et al., 2008; Shimizu et al., 2009). Furthermore, PKD2-L1 sensitivity to transmembrane potentials ( $V_m$ ) is poor as inward currents are small and have weak voltage dependence (Ishimaru et al., 2006), arguing against an important role in action potential-related  $\text{Ca}^{2+}$  signaling (Orts-Del'Immagine et al., 2014, 2015; Wu et al., 1998). Another signal, extracellular  $\text{Ca}^{2+}$ , might also act as the stimulus that activates PKD2-L1 in taste cells or primary cilia as postulated (Delling et al., 2013; Tordoff, 2001). Indeed, exposure to high concentrations of extracellular  $\text{Ca}^{2+}$  ( $[\text{Ca}^{2+}]_o$ ) was reported to activate homomeric PKD2-L1 channels reconstituted in *Xenopus* oocytes, giving rise to an inward  $\text{Ca}^{2+}$  current that displayed inactivation (Chen et al., 1999; Zheng et al., 2015). Unfortunately, such  $\text{Ca}^{2+}$ -activated  $\text{Ca}^{2+}$  current ( $I_{Ca}$ ) responses have not been observed for either homomeric or heteromeric PKD2-L1 channels overexpressed in mammalian cells (DeCaen et al., 2013).

Here, we examine activities of recombinant PKD2-L1/PKD1-L3 channels in HEK293 cells in response to transient  $\text{Ca}^{2+}$ ,  $V_m$ , or acid stimuli. We report the discovery and analyses of a type of  $\text{Ca}^{2+}$  spike that is autonomously controlled by  $\text{Ca}^{2+}$  influx through the channel (influx-operated  $\text{Ca}^{2+}$  entry or ICE). We suggest that ICE may occur in other sensory contexts and other physiological functions.



**Figure 1.  $Ca^{2+}$  Spikes from PKD2-L1/PKD1-L3 Channels Are Induced by  $Ca^{2+}$  Exposure**

(A)  $Ca^{2+}$  spikes from PKD2-L1/PKD1-L3. Representative whole-cell recording of  $I_{Ca}$  with or without  $Ca^{2+}$  spikes when  $[Ca^{2+}]_o$  was quickly switched from 0 to 100 mM, with  $\sim 100$  ms to completely switch the solutions. Peak currents ( $I_p$ ) of  $Ca^{2+}$  spike ( $2.6 \pm 0.2$  nA,  $n = 47$ ) and the gain ( $G_{Ca} = I_p/I_{sub}$ ) for rapid  $Ca^{2+}$  exposure protocol ( $7.3 \pm 0.6$ ,  $n = 46$ ) were estimated (mean  $\pm$  SEM) under standard experimental conditions:  $V_m = -60$  mV, 100 mM  $[Ca^{2+}]_o$  exposure, and 0.5 mM EGTA included in pipettes, unless otherwise indicated.

(legend continued on next page)

## RESULTS

**Induction of Ca<sup>2+</sup> Spikes by Rapid Ca<sup>2+</sup> Exposure**

PKD2-L1 and PKD1-L3 were co-expressed in mammalian cell lines to test whether high Ca<sup>2+</sup> stimuli could produce a similar response to pronounced  $I_{Ca}$  from homomeric PKD2-L1 channels in oocytes (Chen et al., 1999). In initial trials, only a very small response was elicited by 100 mM Ca<sup>2+</sup> via a regular (slow) bath perfusion system (Figure S1A). Surprisingly, upon a much faster Ca<sup>2+</sup> exposure, i.e., a 100-mM step by rapid solution exchanger, we recorded nA-sized  $I_{Ca}$  ( $2.6 \pm 0.2$  nA,  $n = 47$ ) in 45% of patched HEK293 cells (Figure 1A), and similarly in Chinese hamster ovary (CHO) cells (Figure S2B). In most traces, following an initial brief suppression and a subsequent gradual deflection, an inward current got accelerated at some threshold, rapidly peaked, and then inactivated, altogether forming a Ca<sup>2+</sup> spike-like response (Figure 1A). Such  $I_{Ca}$  with Ca<sup>2+</sup> spike essentially facilitates responses to external stimuli: the small response of early subthreshold phase is dramatically amplified into a Ca<sup>2+</sup> spike. To quantify this amplification, we define a gain factor ( $G_{Ca}$ ) as the ratio of the peak of the Ca<sup>2+</sup> spike to the amplitude of the subthreshold current ( $G_{Ca} = 7.3 \pm 0.6$ ,  $n = 46$ ).

Ca<sup>2+</sup> entry during the Ca<sup>2+</sup> spike was confirmed by patch recording and simultaneous Ca<sup>2+</sup> imaging with GCaMP3, a genetically encoded Ca<sup>2+</sup> sensor (Figures S2I and S2J). The reversal potential ( $V_{rev}$ ) during the Ca<sup>2+</sup> spike was positively shifted, consistent with an increase of Ca<sup>2+</sup> conductance (Figures 1B and S3). The relative permeability of Ca<sup>2+</sup> versus Na<sup>+</sup> was estimated ( $P_{Ca}/P_{Na} = 5.3 \pm 0.7$ ,  $n = 10$ ) by switching Ca<sup>2+</sup> solution to Na<sup>+</sup> solution during Ca<sup>2+</sup> spikes (Figure S3), consistent with the documented values (about 4–11) (Chen et al., 1999; DeCaen et al., 2013; Inada et al., 2008).

Ca<sup>2+</sup> spikes appear to be specific to PKD2-L1/PKD1-L3, as no spikes were observed from either PKD2-L1 expressed alone in HEK293 cells or any other cDNA combinations that we tested (Figure S2F). When the N terminus of PKD1-L3 was truncated, Ca<sup>2+</sup> spikes also became absent (Figure S4). To further confirm that PKD2-L1/PKD1-L3 mediates  $I_{Ca}$  spikes, we added 100  $\mu$ M capsaicin, a known antagonist of the channel complex (Ishii et al., 2012), which reversibly blocked the Ca<sup>2+</sup> spike (Figure 1C). We examined the potential role of stimulus strength  $[Ca^{2+}]_o$  (Ishii et al., 2012), membrane potential  $V_m$  (Ishimaru et al., 2006), intracellular buffers, and the speed of transient stimuli  $\Delta[Ca^{2+}]_o/\Delta T$ .  $I_{Ca}$  spikes were clearly identified for  $[Ca^{2+}]_o \geq 10$  mM, suggesting a mechanism of Ca<sup>2+</sup>-dependent activation (CDA) (Figure 1D). Ca<sup>2+</sup> spikes could be induced at  $V_m \leq -20$  mV but

were absent at  $V_m \geq -10$  mV, exhibiting apparent inward rectification (Figure 1E). Notably,  $I_{Ca}$  spikes recorded with 0.5 mM EGTA, 5 mM EGTA, or 10 mM BAPTA are indistinguishable (Figure 1F). This contrasts with eliminated Ca<sup>2+</sup> response from homomeric PKD2-L1 in oocytes by EGTA at mM concentrations (Chen et al., 1999). This difference might be due to active participation of PKD1-L3 in pore formation and ion permeation of the channel complex (Yu et al., 2012). Such buffer insensitivity of PKD2-L1/PKD1-L3 suggests that Ca<sup>2+</sup> spikes are likely not triggered by an increase of bulk cytosolic Ca<sup>2+</sup>. Consistent with this, Ca<sup>2+</sup> spikes could not be induced by intracellular Ca<sup>2+</sup> ( $[Ca^{2+}]_i$ ) elevations achieved via either store depletion or pipette delivery (Figure S5). The probability of eliciting a Ca<sup>2+</sup> spike varied according to the speed of Ca<sup>2+</sup> exposure: the slower the rate of change (or the longer transient time  $\Delta T$ ), the less likely it became to trigger Ca<sup>2+</sup> spikes. At the slowest speed to achieve  $\Delta[Ca^{2+}]_o$  by bath perfusion ( $\Delta T \geq 120$  s), no spikes were elicited (Figure 2A). The dependence of spike generation on the time rate of Ca<sup>2+</sup> stimuli ( $\Delta[Ca^{2+}]_o/\Delta T$ ) rather than just  $[Ca^{2+}]_o$  or  $\Delta[Ca^{2+}]_o$  is inconsistent with a simple extracellular mechanism of CDA.

**Induction of Ca<sup>2+</sup> Spikes by  $V_m$  Repolarization**

We devised a voltage protocol, mimicking action potentials, where the time rate of  $V_m$  repolarization was varied using different ramping speeds (Figure 2B).  $V_m$  repolarization produced pronounced Ca<sup>2+</sup> spikes, resembling those obtained with fast Ca<sup>2+</sup> exposure. However, Ca<sup>2+</sup> spikes were absent when the speed of repolarization was substantially slowed down ( $\Delta T \geq 120$  s for  $\Delta V_m = 80$  mV). In the case of high  $[Ca^{2+}]_o$  built up by slow bath perfusion, which itself was unable to trigger spikes (Figure S1A), an instantaneous  $V_m$  drop induced Ca<sup>2+</sup> spikes (Figure 2C). These results suggest that the kinetics of Ca<sup>2+</sup> influx or the speed of Ca<sup>2+</sup> entry is critical to trigger Ca<sup>2+</sup> spikes. If so, Ca<sup>2+</sup> exposure and  $V_m$  repolarization essentially may share a similar mechanism of action for triggering Ca<sup>2+</sup> spikes.

The notion of common mechanism is further supported by the fact that the latency to induce spikes ( $T_p$ , defined in Figure S2A) for either rapid  $\Delta V_m$  or  $\Delta[Ca^{2+}]_o$  was comparable ( $\sim 12$  s). Similar to  $G_{Ca}$ , a gain factor of  $G_{V_m}$  can be defined and estimated ( $14.3 \pm 5.5$ ,  $n = 8$ ) to quantify the amplification by repolarization-induced Ca<sup>2+</sup> spikes. The value of the conditioning voltage step preceding repolarization (pre-drop  $V_m$ ) strongly influenced the induction of Ca<sup>2+</sup> spike. An instantaneous repolarization ( $\Delta V_m = 80$  mV) failed to trigger Ca<sup>2+</sup> spikes when the conditioning voltage step was set to  $-60$  or  $-30$  mV (Figure 2D). Ca<sup>2+</sup> influx through the channel during the conditioning step could lead to

(B) Reversal potentials measured at different  $I_{Ca}$  phases.  $I-V$  curves were obtained from voltage ramps (from  $-60$  mV to  $+50$  mV of 100-ms durations) at 500-ms intervals, by which  $V_{rev}$  values were determined ( $n = 6$  cells): pre-exposure phase "0,"  $-48.6 \pm 3.8$  mV; subthreshold phase "1,"  $-18.1 \pm 9.6$  mV; Ca<sup>2+</sup>-spike phase "2,"  $11.1 \pm 3.1$  mV; and inactivation phase "3,"  $-33.6 \pm 6.6$  mV (mean  $\pm$  SEM). More details are available in Figure S3.

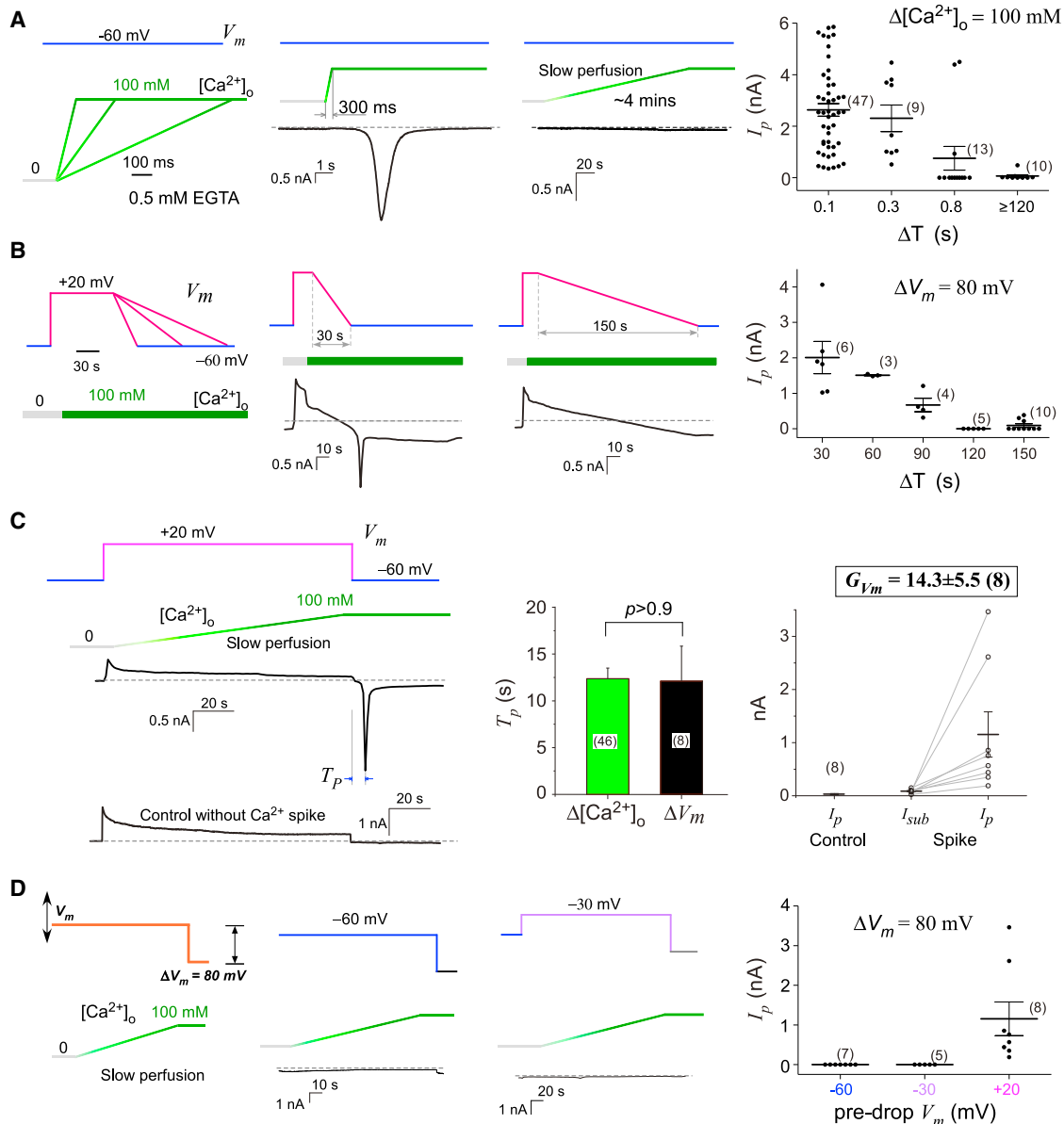
(C) Blockage of Ca<sup>2+</sup> spikes by compounds. 100  $\mu$ M capsaicin blocked Ca<sup>2+</sup> spikes, which was subsequently washed off ( $n = 3$ ). 100  $\mu$ M of phenamil, GdCl<sub>3</sub>, and CdCl<sub>2</sub> all failed to block.

(D)  $I_{Ca}$  with different  $[Ca^{2+}]_o$ . 10 mM or higher  $[Ca^{2+}]_o$  triggered  $I_{Ca}$  spikes ( $3.3 \pm 0.7$  nA,  $n = 12$ ) (mean  $\pm$  SEM), whereas 2 mM  $[Ca^{2+}]_o$  only produced rather mild responses without major characteristics of Ca<sup>2+</sup> spike.

(E) Tests with different holding  $V_m$ .  $I_{Ca}$  traces with Ca<sup>2+</sup> spikes when  $V_m$  was held at  $-40$  mV (upper,  $2.0 \pm 0.5$  nA,  $n = 5$ ) or  $-20$  mV (lower,  $1.5 \pm 0.4$  nA,  $n = 6$ ) (mean  $\pm$  SEM). In contrast, when  $V_m \geq -10$  mV,  $I_{Ca}$  spikes failed to get triggered (totally 24 cells).

(F) Tests with different intracellular Ca<sup>2+</sup> buffers. For intracellular buffers of 5 mM EGTA (upper) or 10 mM BAPTA (lower), instead of 0.5 mM EGTA as in (A)–(F),  $I_{Ca}$  spikes: 0.5 mM EGTA ( $2.6 \pm 0.2$  nA,  $n = 47$ ), 5 mM EGTA ( $2.3 \pm 0.7$  nA,  $n = 10$ ), and 10 mM BAPTA ( $2.8 \pm 0.3$  nA,  $n = 31$ ) (mean  $\pm$  SEM).

See also Figure S2.



**Figure 2.  $V_m$  Repolarization Triggers  $Ca^{2+}$  Spikes**

(A) Speed dependence of  $Ca^{2+}$  exposure.  $I_{Ca}$  spikes could be triggered by rapid  $\Delta[Ca^{2+}]_o$  of 100 mM (transient time  $\Delta T \leq 800$  ms achieved by rapid solution exchanger) but not by slower  $Ca^{2+}$  perfusion ( $\Delta T = 2\text{--}4$  min via chamber perfusion).

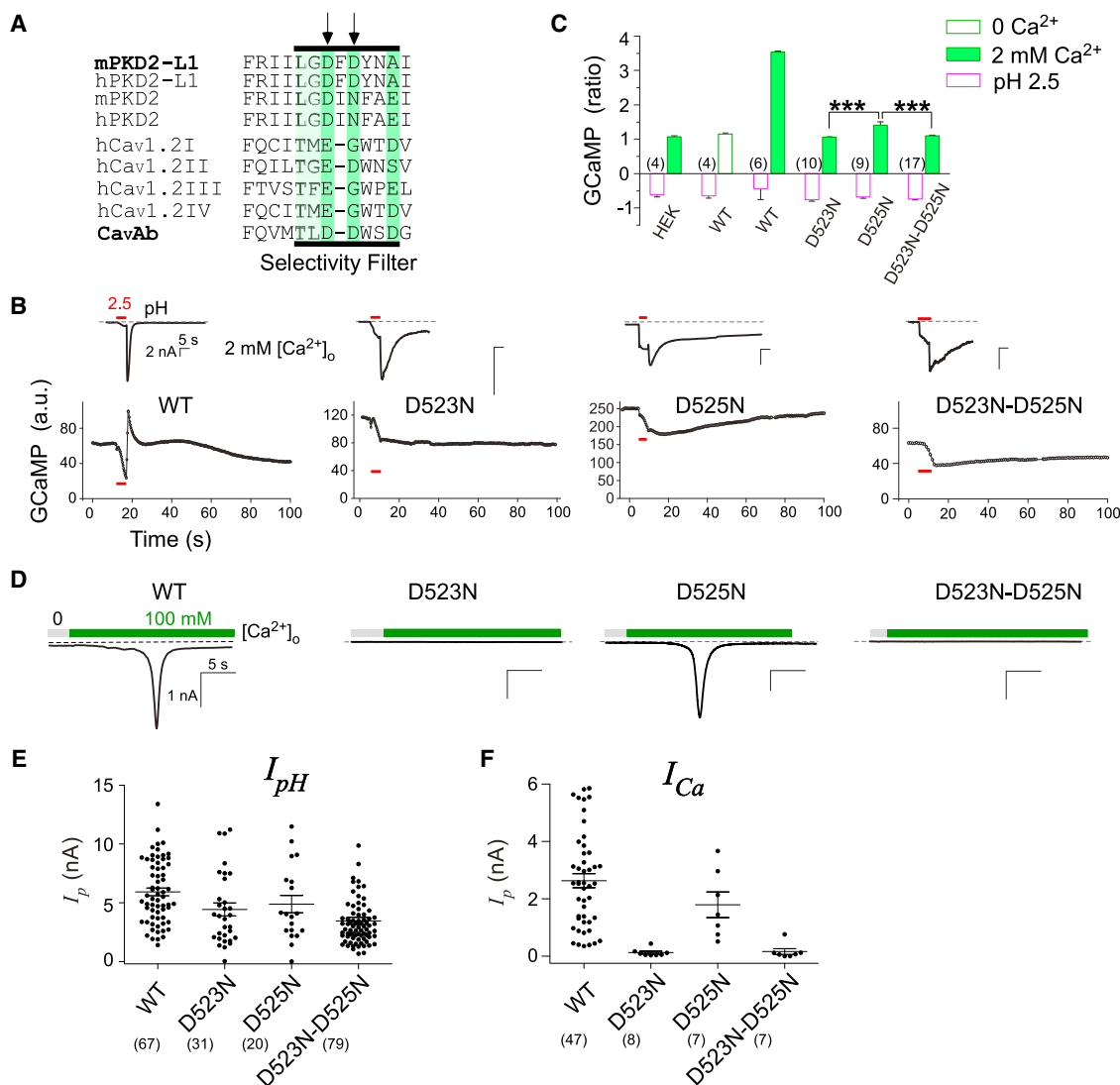
(B) Speed dependence of  $V_m$  repolarization.  $V_m$  was held at a positive level of +20 mV before 100 mM  $Ca^{2+}$  perfusion. If subsequent  $V_m$  drop ( $\Delta V_m = 80$  mV) was fast enough ( $\Delta T \leq 90$  s),  $Ca^{2+}$  spikes were inducible, as compared with slower  $V_m$  drop ( $\Delta T \geq 120$  s), which failed to trigger spikes.

(C) Signal amplification revealed by  $V_m$  drop. Slow (bath) perfusion of 100 mM  $Ca^{2+}$  was applied when  $V_m$  was held at +20 mV.  $Ca^{2+}$  spikes were induced following  $\Delta V_m$  of 80 mV (eight out of 16 cells in total).  $T_p$  time here by  $\Delta V_m$  was comparable to that by  $\Delta[Ca^{2+}]_o$  in Figure 1A ( $p > 0.9$ ). Gain factor of  $G_{Vm}$  was estimated ( $14.3 \pm 5.5$ ,  $n = 8$ ) (mean  $\pm$  SEM).

(D) Pre-drop  $V_m$  and  $Ca^{2+}$  spikes. For the same  $V_m$  drop ( $\Delta V_m = 80$  mV), pre-drop  $V_m$  of +20 mV was able to trigger  $I_{Ca}$  spikes as in (C), but no spike was observable when pre-drop  $V_m$  was set to  $-60$  mV or  $-30$  mV.

$Ca^{2+}$ -dependent inactivation (CDI) (Chen et al., 2015; Inada et al., 2008), which would be expected to impair CDA and prevent spikes. Conditioning voltage steps above the reversal potential would avoid such unfavorable  $Ca^{2+}$  influx and be permissive for CDA and spikes. Rapid  $Ca^{2+}$  influx across plasma membrane implemented by voltage-gated  $Ca^{2+}$  channels ( $Ca_v$ ) or light-sen-

sitive  $Ca^{2+}$  permeable channels (CatCh) did not induce  $I_{Ca}$  spikes, nor did direct delivery of high  $[Ca^{2+}]_i$  (up to 2 mM) through recording pipettes (Figure S5). These results argue that the determinant of spike induction is  $Ca^{2+}$  either passing through or exiting from the pore of PKD2-L1/PKD1-L3 channels and cannot be achieved by other sources of  $Ca^{2+}$ .



**Figure 3. Ca<sup>2+</sup> Influx Underlies Ca<sup>2+</sup> Spikes**

(A) Sequence alignment of selectivity filters with the two pore mutations of PKD2-L1 indicated. The critical residues for Ca<sup>2+</sup> selectivity are in dark- or light-green shades.

(B) Simultaneous monitoring of current and Ca<sup>2+</sup> for *I*<sub>pH</sub>. GCaMP3 fluorescence intensity (a.u.) was examined in HEK cells expressing WT PKD2-L1 or pore mutants with D523N and/or D525N. Ca<sup>2+</sup> dynamics was indicated by fluorescence changes following the initial decrease due to proton quenching (Figure S2). Red bar represents the application of acid stimuli at a pH of 2.5. Experimental conditions: *V*<sub>m</sub> = -60 mV, 2 mM [Ca<sup>2+</sup>]<sub>o</sub> and 5 mM intracellular EGTA.

(C) Summary of Ca<sup>2+</sup> fluorescence associated with *I*<sub>pH</sub>. [Ca<sup>2+</sup>]<sub>o</sub> was quantified by ratio of fluorescence change. Acid applications directly caused fluorescence inhibitions, indistinguishable among all cases. Fluorescence increases reflect Ca<sup>2+</sup> influx via *I*<sub>pH</sub>: HEK control (1.08 ± 0.03, n = 4), WT PKD2-L1/PKD1-L3 in 0 mM [Ca<sup>2+</sup>]<sub>o</sub> (1.18 ± 0.03, n = 4), WT (3.53 ± 0.03, n = 6), D523N (1.05 ± 0.01, n = 10), D525N (1.41 ± 0.10, n = 9), and D523N-D525N (1.10 ± 0.02, n = 17) in 2 mM [Ca<sup>2+</sup>]<sub>o</sub> (in ratio, mean ± SEM, \*\*\*p < 0.001).

(D) Effects of pore mutation. Mutations of D523N and D523N-D525N did not produce Ca<sup>2+</sup> spikes, but D525N with residue Ca<sup>2+</sup> permeability as shown in (C) did generate *I*<sub>Ca</sub> spikes.

(E and F) Summary of *I*<sub>pH</sub> and *I*<sub>Ca</sub> recordings. All pore domain mutants similarly produced *I*<sub>pH</sub>: WT PKD2-L1/PKD1-L3 (5.9 ± 0.3 nA, n = 67), D523N (4.1 ± 0.3 nA, n = 31), D525N (4.9 ± 0.7 nA, n = 20), and D523N-D525N (3.5 ± 0.3 nA, n = 79). Only WT (2.6 ± 0.2 nA, n = 47) and D525N (1.8 ± 0.4 nA, n = 7) were able to produce *I*<sub>Ca</sub> spikes (mean ± SEM).

See also Figure S5.

### Ca<sup>2+</sup> Influx Autonomously Triggers Ca<sup>2+</sup> Spikes

To test the notion that Ca<sup>2+</sup> influx through the PKD2-L1/PKD1-L3 channel is required to induce Ca<sup>2+</sup> spikes, we mutated the two aspartate residues in the pore (D523N and D525N) that are crit-

ical for Ca<sup>2+</sup> permeability (Fujimoto et al., 2011; Tang et al., 2014; Yu et al., 2012) (Figure 3A). First, we performed GCaMP-based Ca<sup>2+</sup> imaging to validate the pore mutations (Figure 3B). In response to strong acid (pH 2.5), PKD2-L1/PKD1-L3 channels

would not produce much onset current; however, as soon as the acid was withdrawn, a pronounced inward current was triggered by the rapid change (offset) of pH, known as off response ( $I_{pH}$ ) (Inada et al., 2008). GCaMP fluorescence associated with  $I_{pH}$  of D523N or D523N-D525N mutants exhibited nearly no change.  $Ca^{2+}$  fluorescence from D525N, though impaired, was significantly higher than other mutants, indicating incomplete blockage of  $Ca^{2+}$  influx (Figure 3C). All mutant channels are functional as confirmed by their  $I_{pH}$  (Figure 3E), but with different abilities to produce  $I_{Ca}$  spikes that positively correlate with their relative  $Ca^{2+}$  permeabilities (Figures 3D and 3F). Hence, substantial  $Ca^{2+}$  influx via the channel is both necessary and sufficient for spike induction, which represents a unique form of autonomous CDA.

### EF Hands of PKD2-L1 Profoundly Affect $Ca^{2+}$ Spikes

The importance of  $Ca^{2+}$  in channel activation was further demonstrated by the rising speed ( $t_r$ ) of  $I_{Ca}$  spikes (Figure S2A). With weak intracellular buffer of 0.5 mM EGTA,  $I_{Ca}$  spikes induced by 100 mM  $Ca^{2+}$  exhibited much faster  $t_r$  compared with those elicited with 10 mM  $Ca^{2+}$  (Figure 4A). Putative  $Ca^{2+}$  binding sites might lie in EF hands at the carboxyl terminus of PKD2-L1. A structural model of EF-hand motifs of PKD2-L1 was computationally achieved based on the homology to EF hands of PKD2 (Petri et al., 2010) and canonical EF hands of calmodulin (CaM) (Figure 4B). In addition to a highly conserved EF2 domain, EF1 domain of PKD2-L1 might also participate in channel regulations by  $Ca^{2+}$ . Indeed, mutants featuring deletion of EF1, EF2, or both turned into faster channels (Figure 4C). Such a facilitatory role of EF hands in CDA was made more evident by 2 mM  $[Ca^{2+}]_o$  exposure: wild-type (WT) channels (mPKD2-L1/PKD1-L3) failed to produce any definitive  $Ca^{2+}$  spike (Figure 4D); in contrast, the same protocol readily triggered  $Ca^{2+}$  spikes from mutant channels with EF-hand deletions.

### Channel Inactivation Is Fully $Ca^{2+}$ Dependent

Homomeric PKD2-L1 channels are subject to CDI subsequent to channel activation (Chen et al., 1999). Similar CDI has also been observed in acid-evoked  $I_{pH}$  of PKD2-L1/PKD1-L3 (Chen et al., 2015; Inada et al., 2008). Our data demonstrated that the decay time ( $t_d$ , Figure S2A) of  $I_{Ca}$  was significantly faster with high  $[Ca^{2+}]_o$  100 mM (Figure 5A). To avoid complications arising from the opposite effects of CDI and CDA, we focused instead on inactivation of  $I_{pH}$  provided that  $I_{Ca}$  and  $I_{pH}$  undergo similar CDI. Inactivation of  $I_{pH}$  was confirmed to be highly regulated by  $[Ca^{2+}]_o$  in the range from 0 to 100 mM (Figure 5B) and sensitive to intracellular  $Ca^{2+}$  buffers of different strength (Figure 5C). To examine the dependence of inactivation on  $Ca^{2+}$ , we used a combination of strongly buffered  $[Ca^{2+}]_i$  (10 mM BAPTA) and 0  $[Ca^{2+}]_o$ , which completely abolished the inactivation in 12 out of 27 cells, converting the decay into a “flat” phase (Figure 5E). Such elimination of inactivation suggests a completely  $Ca^{2+}$ -dependent phenomenon and also firmly excludes an extracellular contribution to the CDI. Dual mutations of D523N and D525N in the pore domain uncovered the full  $Ca^{2+}$  dependence of  $I_{pH}$  inactivation (summarized in Figure 5G). Even with 2 mM  $[Ca^{2+}]_o$  present, a number of  $I_{pH}$  traces (10 out of 33, Figure 5F) of the mutant channel exhibited ultra-

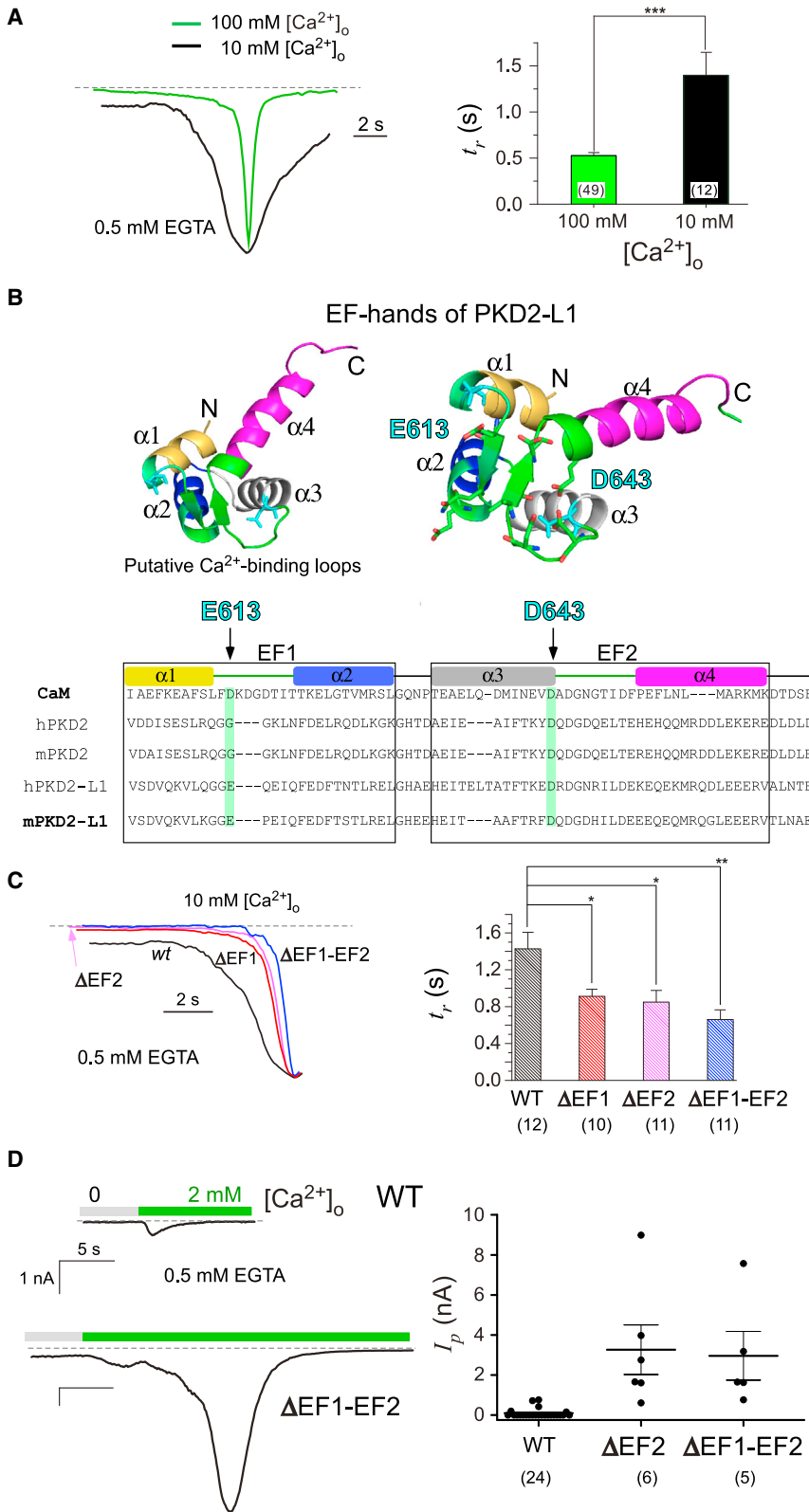
slow inactivation, similar to that observed under  $Ca^{2+}$ -free conditions (Figure 5E).

Collectively, strong intracellular buffers can attenuate but not eliminate CDI, unless  $Ca^{2+}$  influx through the channel is also knocked out. Key sites underlying CDI may include residues along permeation pathway and/or of the cytosolic motifs. Within such CDI scheme, we analyzed putative  $Ca^{2+}$ -binding motifs on PKD2-L1 (Figure 4B). Mutagenesis suggested that EF hands are directly linked to CDI (Figure 5H) by binding  $Ca^{2+}$ , as CDI can be substantially attenuated by point mutations of E613A in EF1, D643A in EF2, dual mutations of ED/AA, and by deletions of  $\Delta$ EF1 or  $\Delta$ EF2. All these mutants are functionally capable of producing  $I_{Ca}$  and  $I_{pH}$  with indistinguishable amplitudes (Figure S6).

### Further Manifestations of ICE with Channel Variants and Acid Sensing

As unveiled by our data and analyses,  $Ca^{2+}$  spikes are essentially operated by CDA and CDI, both of which are tightly controlled by  $Ca^{2+}$  influx through the channel; therefore, we also termed this phenomena as ICE. Most experiments along the way to discover ICE were conducted with mPKD2-L1, originally cloned from mouse taste receptor cells (TRC) (Ishimaru et al., 2006). However, PKD2-L1 is widely expressed in a variety of tissues and organs, encoded by differential splice variants. Human PKD2-L1 (hPKD2-L1) reportedly has at least three other splice variants, cloned from kidney, liver, or testis, respectively (Li et al., 2002). We examined whether the key aspects of ICE revealed from mPKD2-L1 would be applicable to hPKD2-L1 variants. Sequence alignments indicate that these genes share high homology (Figure S7), except for a few discrepancies, e.g., hPKD2-L1\_Liver lacks EF2. In spite of sequence differences, all four isoforms similarly produced pronounced responses upon  $Ca^{2+}$  exposure or acid withdrawal (Figure S7), except that hPKD2-L1\_Liver exhibited weaker CDI (slower decay in  $I_{pH}$ ) than hPKD2-L1\_Kidney (Figure 6A). The critical role of EF2 motif in ICE also manifested itself with hPKD2-L1 variants; when exposed to 10 mM  $[Ca^{2+}]_o$ , the liver variant produced ICE spikes, whereas the kidney variant did not (Figure 6B).

One major concern relating to recombinant PKD2-L1/PKD1-L3 channels is that the sensing threshold is very acidic (very small  $I_{pH}$  for pH = 3), in comparison with native responses (Figure S1C). We found that when the balance between CDA and CDI was appropriately tuned, even though the initial acid response (the first peak) might be small, the subsequent ICE and resulted spikes (the second peak) could offer substantial signal amplifications (gain factor of  $G_{pH}$ :  $13.9 \pm 2.6$ ,  $n = 12$ ) (Figure 6C).  $Ca^{2+}$  spikes here should be directly triggered by  $Ca^{2+}$  influx via  $I_{pH}$  other than prior  $Ca^{2+}$  exposure, since  $T_p$  latency associated with  $\Delta$ pH was significantly shorter ( $p < 0.001$ ) than that with  $\Delta[Ca^{2+}]_o$ . ICE amplification can make striking differences in acid sensitivity for the same channel as demonstrated by mPKD2-L1\_ $\Delta$ EF1-EF2 (Figure 6D). Upon acid (pH = 3) withdrawal in 0  $[Ca^{2+}]_o$ , only small  $I_{pH}$  can be observed from the mutant channel, similar to WT mPKD2-L1; in contrast, under the same conditions except for  $[Ca^{2+}]_o$  changed to 2 mM, surprisingly large  $I_{pH}$  responses were elicited through ICE-mediated  $Ca^{2+}$  spikes, more clearly evidenced as the second peaks in some traces.  $Ca^{2+}$  sensitized channels (but not the mutant of



**Figure 4. EF Hands Affect CDA of  $Ca^{2+}$  Spikes**

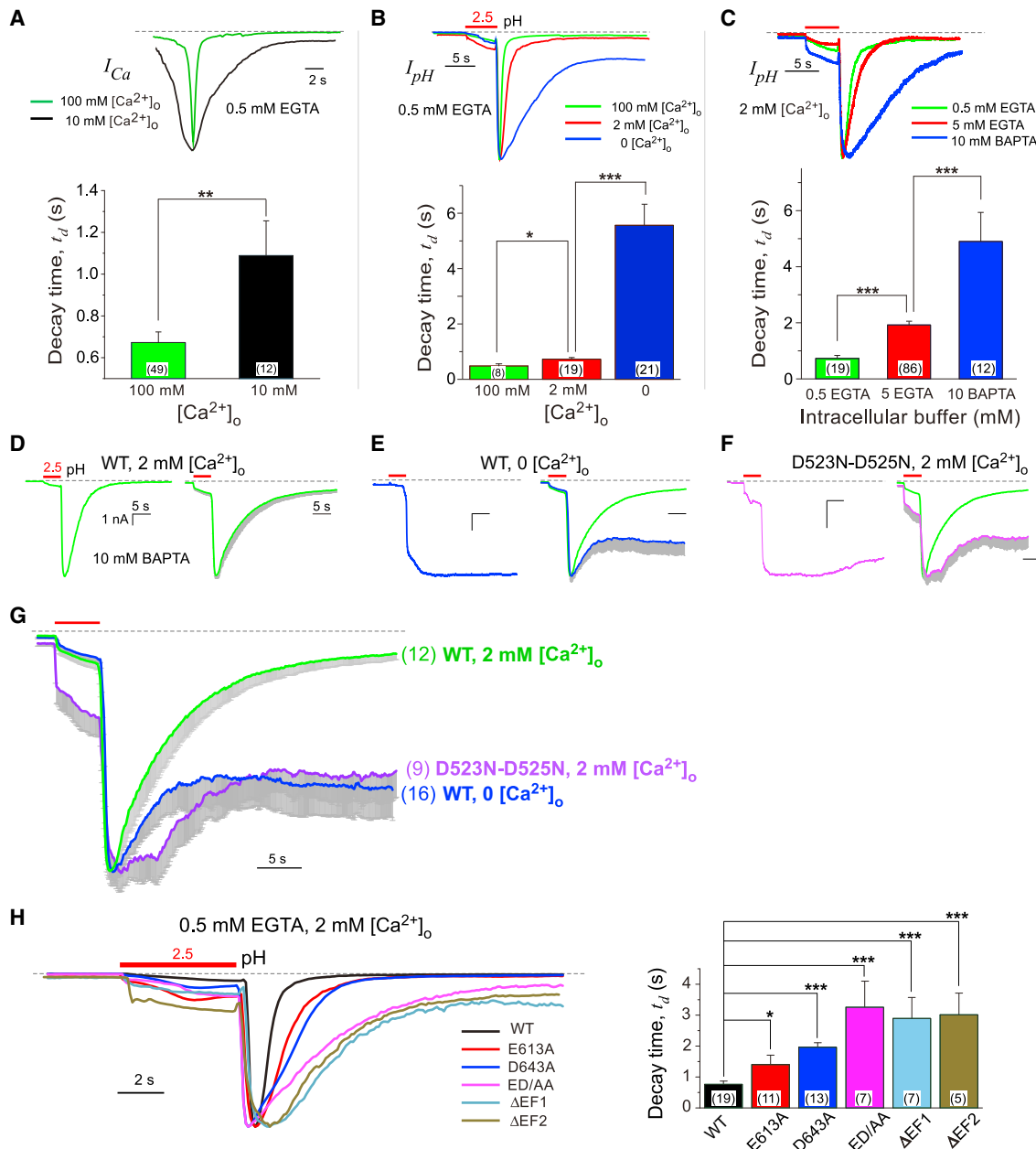
(A) Speed of rising phase with different  $[Ca^{2+}]_o$ .  $I_{Ca}$  traces were normalized and compared for 100 and 10 mM  $[Ca^{2+}]_o$  exposure (left). Statistical summary (right):  $t_r$  with 100 mM  $[Ca^{2+}]_o$  ( $0.53 \pm 0.03$  s,  $n = 49$ ), significantly different from  $t_r$  with 10 mM  $[Ca^{2+}]_o$  ( $1.43 \pm 0.18$  s,  $n = 12$ ) (mean  $\pm$  SEM, \*\*\* $p < 0.001$ ). (B) Homology modeling for EF hands of PKD2-L1. The homology structure was predicated by computational modeling, based on the alignment of EF-hand sequences from CaM, PKD2, and PKD2-L1 of mouse and/or human. The EF hands between two  $\alpha$ -helices are putative  $Ca^{2+}$ -binding loops.

(C) EF-hand deletions slowed down  $t_r$ .  $I_{Ca}$  traces from EF-hand mutants were normalized and compared. Statistical summary of  $t_r$  values for channel complexes: WT ( $1.43 \pm 0.18$  s,  $n = 12$ ),  $\Delta$ EF1 ( $0.91 \pm 0.08$  s,  $n = 10$ ),  $\Delta$ EF2 ( $0.85 \pm 0.13$  s,  $n = 11$ ), and  $\Delta$ EF1-EF2 ( $0.66 \pm 0.10$  s,  $n = 11$ ) (mean  $\pm$  SEM, \* $p < 0.05$ , \*\* $p < 0.005$ ). Experimental conditions:  $V_m = -60$  mV, 0.5 mM EGTA, and 10 mM  $[Ca^{2+}]_o$ .

(D) EF-hand deletions and  $Ca^{2+}$ -spike induction. EF-hand deletions unveiled  $I_{Ca}$  spikes with 2 mM  $[Ca^{2+}]_o$  (lower left,  $\Delta$ EF1-EF2 mutant), but no spike with WT PKD2-L1/PKD1-L3 (upper left). Statistical summary (right):  $\Delta$ EF2 mutant ( $3.3 \pm 1.2$  nA,  $n = 6$ ) and  $\Delta$ EF1-EF2 mutant ( $3.0 \pm 1.2$  nA,  $n = 5$ ) (mean  $\pm$  SEM); in contrast, WT channels failed to elicit  $I_{Ca}$  spikes ( $n = 24$ ).

See also Figure S6.





**Figure 5.  $Ca^{2+}$  Dependence of Inactivation and Regulatory Roles of EF Hands**

(A) Decay speed for  $Ca^{2+}$  spikes with different  $[Ca^{2+}]_o$ .  $I_{Ca}$  traces were normalized for comparisons:  $t_d$  for 100 mM  $[Ca^{2+}]_o$  ( $0.66 \pm 0.05$  s,  $n = 49$ ) and 10 mM  $[Ca^{2+}]_o$  ( $1.17 \pm 0.15$  s,  $n = 12$ ) (mean  $\pm$  SEM, \*\*p < 0.005).

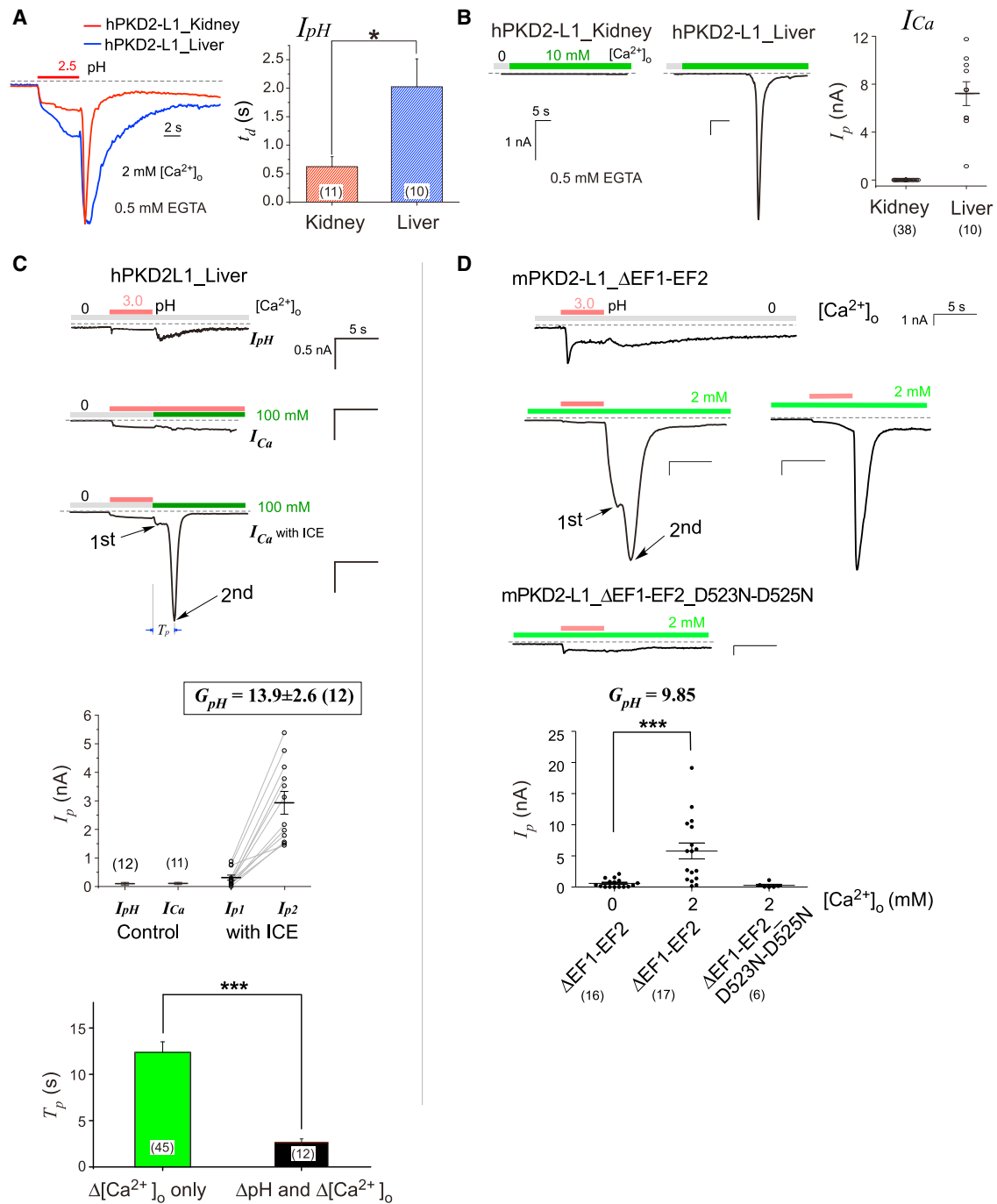
(B) Decay speed of  $I_{pH}$  in different  $[Ca^{2+}]_o$ . Normalized  $I_{pH}$  traces were compared by their  $t_d$  values: 100 mM  $[Ca^{2+}]_o$  ( $0.48 \pm 0.07$  s,  $n = 8$ ), 2 mM  $[Ca^{2+}]_o$  ( $0.84 \pm 0.09$  s,  $n = 19$ ), and 0  $[Ca^{2+}]_o$  ( $5.56 \pm 0.77$  s,  $n = 21$ ) (mean  $\pm$  SEM, \*p < 0.05).

(C) Decay speed of  $I_{pH}$  with different intracellular  $Ca^{2+}$  buffers.  $I_{pH}$  traces with 0.5 mM EGTA, 5 mM EGTA, and 10 mM BAPTA included in pipettes were compared, all with 2 mM  $[Ca^{2+}]_o$  in the bath. Statistical summary of  $t_d$  values: 0.5 mM EGTA ( $0.84 \pm 0.09$  s,  $n = 19$ ), 5 mM EGTA ( $1.95 \pm 0.12$  s,  $n = 86$ ), and 10 mM BAPTA ( $4.90 \pm 1.04$  s,  $n = 12$ ) (mean  $\pm$  SEM, \*\*\*p < 0.001).

(D–G) Inactivation when eliminating intra- and/or extra-cellular  $Ca^{2+}$ . With 10 mM intracellular BAPTA, representative (left) and averaged (right)  $I_{pH}$  from WT and mutant channels, in 0 or 2 mM  $[Ca^{2+}]_o$ . In (E) and (F), channel inactivation was completely abolished for WT in 0  $[Ca^{2+}]_o$  (12 out of 27 cells) and for D523N-D525N mutant in 2 mM  $[Ca^{2+}]_o$  (ten out of 33 cells). Averaged traces of (D)–(F) are summarized and compared in (G).

(H) EF-hand mutations modulated  $I_{pH}$  decay. Normalized  $I_{pH}$  traces (left) and statistical summary of  $t_d$  (right): WT ( $0.84 \pm 0.09$  s,  $n = 19$ ), E613A ( $1.40 \pm 0.31$  s,  $n = 11$ ), D643A ( $1.96 \pm 0.14$  s,  $n = 13$ ), E613A-D643A or ED/AA ( $3.26 \pm 0.84$  s,  $n = 7$ ),  $\Delta$ EF1 ( $2.90 \pm 0.67$  s,  $n = 7$ ), and  $\Delta$ EF2 ( $3.01 \pm 0.69$  s,  $n = 5$ ) (mean  $\pm$  SEM, \*p < 0.05, \*\*\*p < 0.001).

See also Figure S6.



**Figure 6. Manifestations of ICE with PKD2-L1 Variants and Acid Sensing**

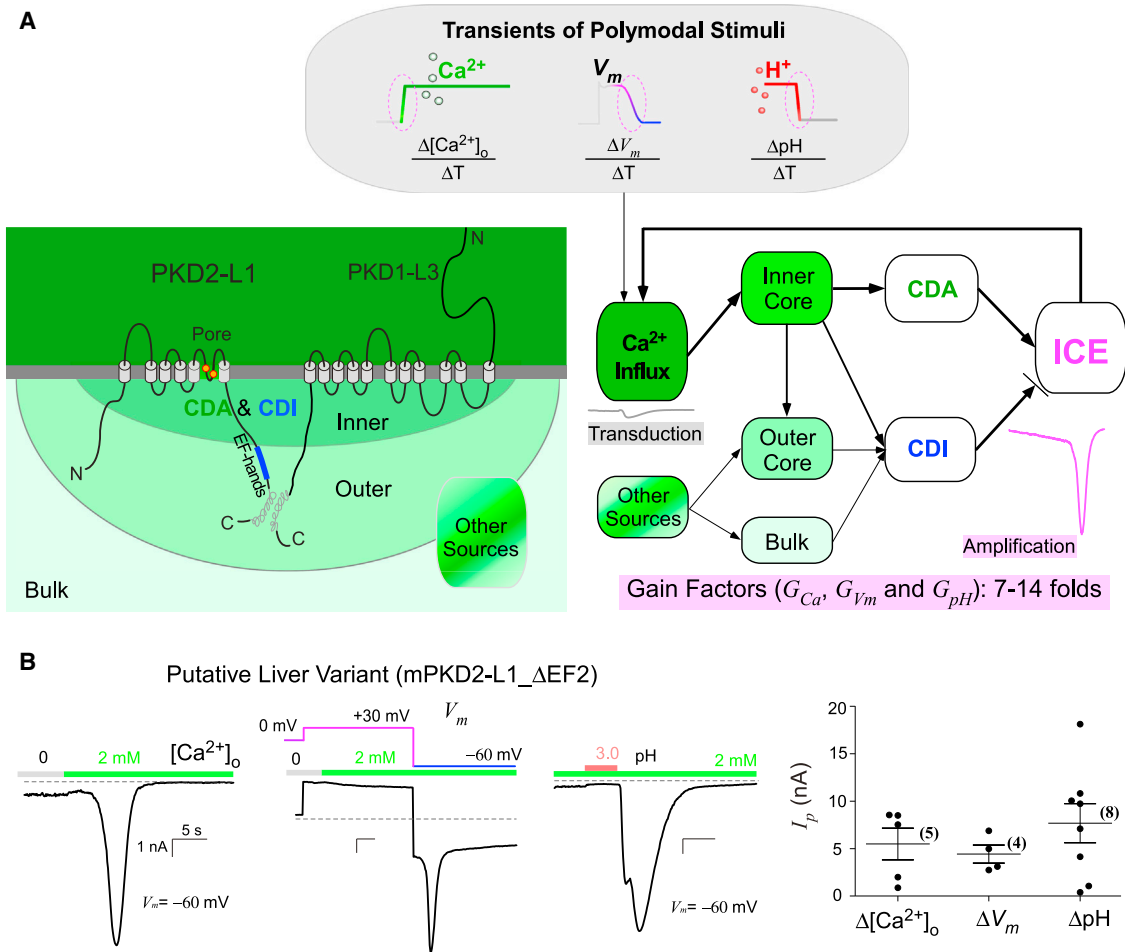
(A) Comparison for hPKD2-L1 splice variants by  $t_d$  values of  $I_{pH}$ : hPKD2-L1\_Kidney ( $0.62 \pm 0.18$  s,  $n = 11$ ) versus hPKD2-L1\_Liver ( $2.02 \pm 0.49$  s,  $n = 10$ ) (mean  $\pm$  SEM,  $*p < 0.05$ ). Other conditions:  $V_m = -60$  mV, 2 mM  $[Ca^{2+}]_o$  and 0.5 mM EGTA.

(B) Upon 10 mM  $[Ca^{2+}]_o$  exposure, ICE spikes were evidenced from hPKD2-L1\_Liver ( $7.2 \pm 1.0$  nA,  $n = 10$ ) (mean  $\pm$  SEM) but not from hPKD2-L1\_Kidney ( $n = 38$ ).

(C) ICE amplification of acid sensing with hPKD2-L1\_Liver. For weak  $I_{pH}$  (pH = 3), substantial amplifications with gain factor ( $G_{pH}$ ) of  $13.9 \pm 2.6$  ( $n = 12$ ) were achieved by  $Ca^{2+}$  spikes subsequent to weak  $I_{pH}$ .  $T_p$  associated with acid withdrawal was significantly shorter than that with standard  $I_{Ca}$  spikes (mean  $\pm$  SEM,  $***p < 0.001$ ).

(D) ICE amplification of acid sensing with  $\Delta EF1-EF2$  mutant of mPKD2-L1. With 0  $[Ca^{2+}]_o$ , weak acid of pH 3 barely produced recognizable  $I_{pH}$  ( $0.59 \pm 0.16$  nA,  $n = 16$ ), in contrast to pronounced  $I_{pH}$  with 2 mM  $[Ca^{2+}]_o$  ( $5.8 \pm 1.3$  nA,  $n = 17$ ) (mean  $\pm$  SEM,  $***p < 0.001$ ).

See also [Figure S7](#).



**Figure 7. Scheme of ICE: Ca<sup>2+</sup> Feedback Regulations and Transient Signal Facilitations**

(A) Foundational scheme of ICE. Besides other sources in the cell (e.g., bulk Ca<sup>2+</sup> and Ca<sup>2+</sup> via other channels), Ca<sup>2+</sup> nanodomain as seen by the channel is mainly created by Ca<sup>2+</sup> influx through the pore of the channel and can be divided into two major subdomains (left): the inner core and the outer core. The inner core of the Ca<sup>2+</sup> nanodomain associated with ICE is composed of the pore and the immediate vicinity to inner mouth of the channel. This inner core nanodomain is featured with ultrafast Ca<sup>2+</sup> transients in ultrahigh concentrations and is resistant to Ca<sup>2+</sup> buffers, even to a high dose of BAPTA. Ca<sup>2+</sup> from the inner core is sufficient and necessary for CDA, the positive feedback with relatively fast on rate. Beyond the core, the Ca<sup>2+</sup>-buffer (EGTA/BAPTA)-sensitive outer core is dynamically affected by core Ca<sup>2+</sup> and other Ca<sup>2+</sup> sources in the cell. Apparently opposed to CDA, Ca<sup>2+</sup> also negatively regulates channels (CDI) with slower on rate than CDA. CDI is evidently mediated by Ca<sup>2+</sup> core and also regulated by other sources of Ca<sup>2+</sup> in the cell. EF hands of PKD2-L1 could facilitate ICE spikes once the EF hands are impaired. For channels of transduction-only mode, only small and sometimes obscure responses are produced (Figure S1); in contrast, for channels with CDI and CDA appropriately tuned, stimuli at fast rate of change ( $\Delta[\text{Ca}^{2+}]_o/\Delta T$ ,  $\Delta V_m/\Delta T$  or  $\Delta\text{pH}/\Delta T$ ) could be amplified (7- to 14-fold) and reshaped by ICE local to individual channels.

(B) ICE spikes with putative mPKD2-L1<sub>Liver</sub> channels. Rapid transient stimuli with physiological constraints were applied:  $\Delta[\text{Ca}^{2+}]_o$  (from 0 to 2 mM),  $\Delta V_m$  (with 2 mM  $[\text{Ca}^{2+}]_o$  constantly present), and  $\Delta\text{pH}$  (acid withdrawal from a pH of 3). mPKD2-L1\_ΔEF2 channels (in complex with PKD1-L3) were capable of ICE spikes:  $5.5 \pm 1.7$  nA (n = 5),  $4.4 \pm 0.9$  nA (n = 4), and  $7.7 \pm 2.1$  nA (n = 8), respectively (mean  $\pm$  SEM).

D523N-D525N impermeable to Ca<sup>2+</sup>) to acid withdrawal (averaged  $G_{\text{pH}}$ : 9.85 in response to  $\Delta\text{pH}$ ). Similar augmentations for stronger stimuli (pH = 2.5) were evidenced as double peaks from hPKD2-L1<sub>Liver</sub> or mPKD2-L1<sub>D643A</sub> (Figure S7).

## DISCUSSION

The results suggest a scheme for how ICE emerges in the context of gating and signaling of the PKD2-L1/PKD1-L3 complex (Figure 7A). Ca<sup>2+</sup> passing through the pore and Ca<sup>2+</sup> in the immediate vicinity of the cytosolic mouth of the

channel constitutes the inner core of a Ca<sup>2+</sup> nanodomain sensed by the channel. Ca<sup>2+</sup> in the inner core, which is present at mM concentrations (Tadross et al., 2013), is sufficient and necessary for autonomous activation (CDA). Ca<sup>2+</sup> influx via neighboring Ca<sub>v</sub> or CatCh (Figure S5) was unable to trigger CDA of PKD2-L1/PKD1-L3, suggesting the Ca<sup>2+</sup> sensor for this process could be deeply buried within the pore structure and may not be accessible by Ca<sup>2+</sup> diffusion from other channels. It is imperative for future investigations to look into molecular details regarding how Ca<sup>2+</sup> in the core activates the channel.

PKD2-L1/PKD1-L3 is also subject to the negative feedback of CDI, by global (outer core) and/or local (inner core)  $\text{Ca}^{2+}$  (Figure 7A). Other cytosolic  $\text{Ca}^{2+}$  sources such as integrated bulk  $\text{Ca}^{2+}$  or intracellular channels potentially including PKD2-L1 itself (Sharif-Naeini et al., 2009) also contribute to CDI. CDI is a common gating feature, shared by almost all TRP channels that permeate  $\text{Ca}^{2+}$ , that acts as a self-limiting mechanism to adjust  $\text{Ca}^{2+}$  influx and  $\text{Ca}^{2+}$  homeostasis for the cell (Gordon-Shaag et al., 2008). Mechanisms underlying local and global CDI are of great interest, e.g., CaM-mediated CDI of voltage-gated  $\text{Ca}^{2+}$  channels (Dick et al., 2008). We report here that PKD2-L1/PKD1-L3 channels also exhibit both local and global forms of CDI, although they are unlikely mediated by CaM (Figure S6). EF hands participate at least in global CDI, and local CDI can be eliminated only when  $\text{Ca}^{2+}$  influx is knocked out. Further molecular details of CDI, especially of influx-operated CDI, await future investigations.

Our data suggest that CDA should require higher  $[\text{Ca}^{2+}]$  than CDI, because CDI overwhelmingly persists under almost all test conditions, whereas CDA often becomes absent once  $\text{Ca}^{2+}$  or  $\text{Ca}^{2+}$  influx is reduced or impaired (e.g., Figures 2A, 3D, and 4D). Moreover, bulk cytosolic  $\text{Ca}^{2+}$  even at the resting level causes CDI; in contrast, delivery of substantial amount of  $\text{Ca}^{2+}$  to the channel by various ways, other than through  $\text{Ca}^{2+}$  influx of its own, does not trigger CDA. Meanwhile, considering the critical time period right before spike induction, CDI has slow  $t_d$  of about 5 s or more (Figure 5B), in contrast to much faster rising phase (CDA dominant) in  $\text{Ca}^{2+}$  spikes. Although future efforts are needed to quantify the detailed gating kinetics, hints from our data suggest a relatively faster transition to open states via CDA and a slower on rate for CDI, together providing the time window for  $\text{Ca}^{2+}$  spikes to possibly happen.

ICE is uniquely different from responses of other  $\text{Ca}^{2+}$ -activated TRP channels (Hofmann et al., 2003; Launay et al., 2002; Prawitt et al., 2003; Sura et al., 2012; Wang et al., 2008; Zurborg et al., 2007) in biophysical profiles. First, ICE activation is strictly local (Figures 1 and 3). ICE is still readily inducible when intracellular  $\text{Ca}^{2+}$  is strongly buffered (Figure 1) and, using alternative routes to deliver  $\text{Ca}^{2+}$  into the cell, is unable to reproduce ICE (Figure S5). Second, ICE exhibits inward rectification (Figures 1 and 2). Third, the profile of ICE blockage is unconventional as many known blockers of PKD2-L1 including  $\text{Gd}^{3+}$  and amiloride derivatives (Ishimaru et al., 2006) all failed to block ICE spikes (Figures 1 and S2). Fourth, PKD2-L1/PKD1-L3 inactivation is fully dependent on  $\text{Ca}^{2+}$ , as a rigorous form of CDI (Figure 5). Finally, EF-hand motifs play significant roles in ICE (Figures 4 and 5). It has been speculated that EF hands could mediate activation of PKD (Petri et al., 2010) or PKD2-L1 channels (Ishimaru et al., 2006; Li et al., 2002). Our data clearly demonstrate that EF hands indirectly and negatively regulate CDA by way of CDI mediated by EF hands.

$\text{Ca}^{2+}$  influx via the pore of PKD2-L1/PKD1-L3 channels is necessary and sufficient for CDA, and also important for full-strength CDI. The importance of  $\text{Ca}^{2+}$  influx to PKD2-L1/PKD1-L3 gating is a hallmark of ICE. Considering physiological stimuli normally only induce limited  $\text{Ca}^{2+}$  entry, autonomous sensitization to gain signal amplification would be a simple and efficient strategy; localization of the CDA machinery to the inner core en-

ures high specificity of information encoding in space, modality, and time. Meanwhile, the decay of ICE is dominated by the process of CDI, highly sensitive to both  $\text{Ca}^{2+}$  influx and bulk  $\text{Ca}^{2+}$  in the cell, to acquire maximum speed and strength to inactivate channel activities, serving as a form of desensitization to stimuli. Thus, ICE could serve as potential mechanisms for sensory adaptation, a key physiological feature universal to diverse sensory receptors or systems (Fain, 2003).

ICE spikes essentially turn PKD2-L1/PKD1-L3 channels into a unique type of molecular transducers specific to transient sensing/amplification, i.e., particularly sensitive to the onset/offset of the stimuli (Figure 7A). Restrictions of stimuli in the time rate of change ( $\Delta\text{Stimuli}/\Delta T$ ) have been evidenced from multiple modalities:  $[\text{Ca}^{2+}]_o$  (Figure 2A),  $V_m$  (Figure 2B), and pH (Inada et al., 2008). Physiological stimuli, which might be weaker or slower than experimental conditions, would sequentially act on a certain number of channels and locally induce  $\text{Ca}^{2+}$  entries, leading to ICE events at the level of individual channels. Depending on various factors including  $\text{Ca}^{2+}$  conditions and functional expression, such temporally isolated ICE might or might not exhibit  $\text{Ca}^{2+}$  spike as we observed from “synchronized” ensemble channels at the whole-cell level, but the mechanisms of action and physiological significance should stay true regardless of spike induction. Each channel could still autonomously facilitate its own signaling with similar gain factors of  $G_{Ca}$ ,  $G_{Vm}$ , and  $G_{pH}$  (about 7–14, Figures 1A, 2C, and 6C). ICE synchronization and spike induction is mainly determined by the balance between CDI and CDA of the channels. The “speed dependence” of polymodal stimuli essentially constrains the kinetics of  $\text{Ca}^{2+}$  influx to ensure that CDA would win over CDI. Sensitivity to transient rather than steady-state signals/stimuli is a prominent feature intrinsic to many sensory processes. We here present an exemplar of such transient-signal amplification and also provide mechanistic insights within the context of “time window” for  $\text{Ca}^{2+}$  spikes. To consolidate above notions, we examined putative natural splice variant of mPKD2-L1<sub>Liver</sub> with physiologically relevant stimuli, and all exhibited  $\text{Ca}^{2+}$  spikes and signal amplification, even under stringent conditions, e.g., 2 mM  $[\text{Ca}^{2+}]_o$  (Figure 7B).

PKD2-L1/PKD1-L channel complexes are capable of sensing polymodal stimuli, a common feature to TRP family (Voets et al., 2005). ICE discovered herein highlights the notion that the recombinant system with overexpression under appropriate conditions (e.g.,  $\text{Ca}^{2+}$ ) should be an advantageous strategy to elucidate sensory transduction of candidate channels, many of which still remain unidentified. Exciting directions include the putative mechanosensitivity of cilia to the fluid flow (Delling et al., 2013; Murakami et al., 2005; Nauli et al., 2003), the unidentified mechanoelectrical transducer in hair cells (Fettiplace, 2009), the high-salt sensation in aversive taste (Oka et al., 2013), the potential involvement in calcium taste (Tordoff, 2001), and the unexplored role in  $\text{Ca}^{2+}$  signaling coupled with action potentials in cardiac myocytes or neurons (Li et al., 2007; Orts Del'Imagine et al., 2015). ICE might also involve in  $\text{Ca}^{2+}$  regulations and  $\text{Ca}^{2+}$  signaling related to PKD2-L1 pathophysiology (Barretto et al., 2015; DeCaen et al., 2013; Delling et al., 2013; Desimone et al., 2012; Djenoune et al., 2014; Huang et al., 2006; Orts-Del'Imagine et al., 2014, 2015). PKD2-L1/PKD1-L3 with ICE could

segregate its  $\text{Ca}^{2+}$  signaling into divergent biological tasks by active or transduction-amplification mode versus passive or transduction-only mode (Figure 7A). Our work invites future investigations on whether and how ICE dysfunction would affect  $\text{Ca}^{2+}$  signaling related to sensory functions and neural development in PKD2-L1 expressing neurons, or  $\text{Ca}^{2+}$  homeostasis and hedgehog signaling in primary cilia.

Dysregulated PKD channels with impaired  $\text{Ca}^{2+}$  signaling would cause serious consequences as in ADPKD (Vassilev et al., 2001), or left-right determination (Yoshida et al., 2012). TRPPs including PKD and PKD2-L1 share high homology in sequence, structure, assembly, and functionality. PKD activities exhibit a bell-shaped  $\text{Ca}^{2+}$  dependence (Cai et al., 2004; Ćelić et al., 2012; Koulen et al., 2002; Yoshida et al., 2012), resembling the dual  $\text{Ca}^{2+}$ -dependent processes unveiled in ICE (both CDA and CDI). It is thus attractive to speculate that PKD complex might also utilize ICE-like mechanism to facilitate its transmembrane signaling. If proved, this would not only elucidate unresolved mechanisms underlying key functions of PKD, but also promise cellularly robust, physiologically relevant, and drug-screening-compatible assays aimed at potential therapeutics for this prevalent but unconquered channelopathy (Zhou, 2009).

We present here a type of  $\text{Ca}^{2+}$  influx-operated  $\text{Ca}^{2+}$  spike-like response or ICE from PKD2-L1/PKD1-L3 channel complex, which serves to augment and reshape its transmembrane signaling. ICE opens up promising avenues to understand the gating, signaling, and pathophysiology of PKD2-L1/PKD1-L3; meanwhile, as a mode of action, such autonomous ICE is expected to expand onto other channels and other modalities (Delmas, 2005; Yu and Catterall, 2004).

## EXPERIMENTAL PROCEDURES

### Molecular Biology

TRPP3 and PKD1-L3 of *Mus musculus* (mPKD2-L1 [GenBank: A2A259]; mPKD1-L3 [GenBank: AY164486]) were provided by Dr. H. Matsunami (Duke University). TRPP3 of *Homo sapiens* (hPKD2-L1 [GenBank: NM\_016112]) were from Drs. Yong Yu (St. John's University) and Dominic Norris (Medical Research Council). CatCh was subcloned from Chr2 (Dr. Karl Deisseroth, Stanford University). Point mutations related to the pore domain or EF hands were achieved by QuikChange Lightning Site-Directed Mutagenesis Kit (Agilent Technologies). All segments subject to PCR or QuikChange were verified by sequencing. Details about cDNA constructs and molecular biology are provided in Supplemental Experimental Procedures.

### Transfection of cDNA Constructs

HEK293 or CHO cells with recombinant channels were prepared according to established protocols (Liu et al., 2010). Additional cDNA constructs were applied when necessary, including GCaMP3 (from Drs. Minmin Luo and Sen Song, Tsinghua University),  $\text{Ca}_v2.2$  and CaM or CaM<sub>1234</sub> (from Dr. David Yue, Johns Hopkins University), and CatCh. PKD2 and PKD1 of *Homo sapiens* were generous gifts from Dr. Terry Watnick (Johns Hopkins University). PKD1-L1 of *Mus musculus* (mPKD1-L1 [GenBank: XM\_126005]) were from Drs. Yong Yu (St. John's University) and Dominic Norris (Medical Research Council).

### Patch-Clamp Electrophysiology

Electrodes were pulled and heat-polished, resulting in 1- to 3-M $\Omega$  resistances. Whole-cell signals were acquired and analyzed by an Axopatch 200B amplifier and the pCLAMP system (Molecular Devices). The rapid solution changer RSC-200 (Bio-Logic) was used for brief applications of acid stimulus or rapid exposure of high  $\text{Ca}^{2+}$ . Bath solutions were perfused into a recording chamber with Valve Commander ALA-VM4 (ALA Scientific Instruments). Relative

permeability of  $\text{Ca}^{2+}$  versus  $\text{Na}^+$  can be calculated from estimated reversal potentials ( $V_{rev, Ca}$  and  $V_{rev, Na}$ ) in extracellular solutions of  $\text{Ca}^{2+}$ -based ( $\text{Na}^+$  free) or  $\text{Na}^+$ -based ( $\text{Ca}^{2+}$  free) during the spike phase (Hille, 2001; Yu et al., 2012):

$$P_{Ca}/P_{Na} = \frac{[Na^+]_o}{4[Ca^{2+}]_o} e^{\frac{F}{RT}(V_{rev, Ca} - V_{rev, Na})} (e^{\frac{F}{RT}V_{rev, Ca}} + 1).$$

Details about solutions and calculations are provided in Supplemental Experimental Procedures.

### Chemicals and Reagents

Chemical compounds including phenamil, capsaicin,  $\text{GdCl}_3$ , and thapsigargin were all purchased from Sigma-Aldrich. These compounds were dissolved in DMSO or water at stock concentration (phenamil, capsaicin, and  $\text{GdCl}_3$ : 10 mM; thapsigargin: 1 mM) and then diluted by bath/electrode solutions to final working concentrations.

### Fluorescence $\text{Ca}^{2+}$ Imaging

Experiments were carried out in HEK293 cells expressing PKD1-L3, PKD2-L1 or their mutants, along with GCaMP3. Fluorescence images were acquired with a Nikon Ti-S inverted microscope with Neo sCMOS CCD at a frame interval of 1–5 s and analyzed with iQ2 software (Andor Technology).

### Structure Modeling

For structure homology modeling of EF hands from mPKD2-L1, we used online website Swiss modeler (<http://swissmodel.expasy.org/>) and took the structure of the EF-hand domain of hPKD2 from Protein Data Bank (PDB: 2Y4Q) as the template. PyMOL was used for superimposition and inspection of the structures (DeLano Scientific).

### Data Analysis and Statistics

Data were analyzed in Clampfit (Molecular Devices), Origin software (Origin-Lab), and Excel (Microsoft). SEM and Student's t test (two-tailed, criteria of significance: \* $p < 0.05$ ; \*\* $p < 0.01$ ; or \*\*\* $p < 0.001$ ) were calculated when applicable.

## SUPPLEMENTAL INFORMATION

Supplemental Information includes Supplemental Experimental Procedures and seven figures and can be found with this article online at <http://dx.doi.org/10.1016/j.celrep.2015.09.041>.

## AUTHOR CONTRIBUTIONS

M.H. and Y.L. performed experiments and analyses and helped prepare the manuscript. J.W. acquired data during pilot experiments and conducted preliminary analyses. X.L. conceived the project, designed the experiments, conducted analyses, and wrote the paper.

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