



Figures and figure supplements

PIP₂ depletion promotes TRPV4 channel activity in mouse brain capillary endothelial cells

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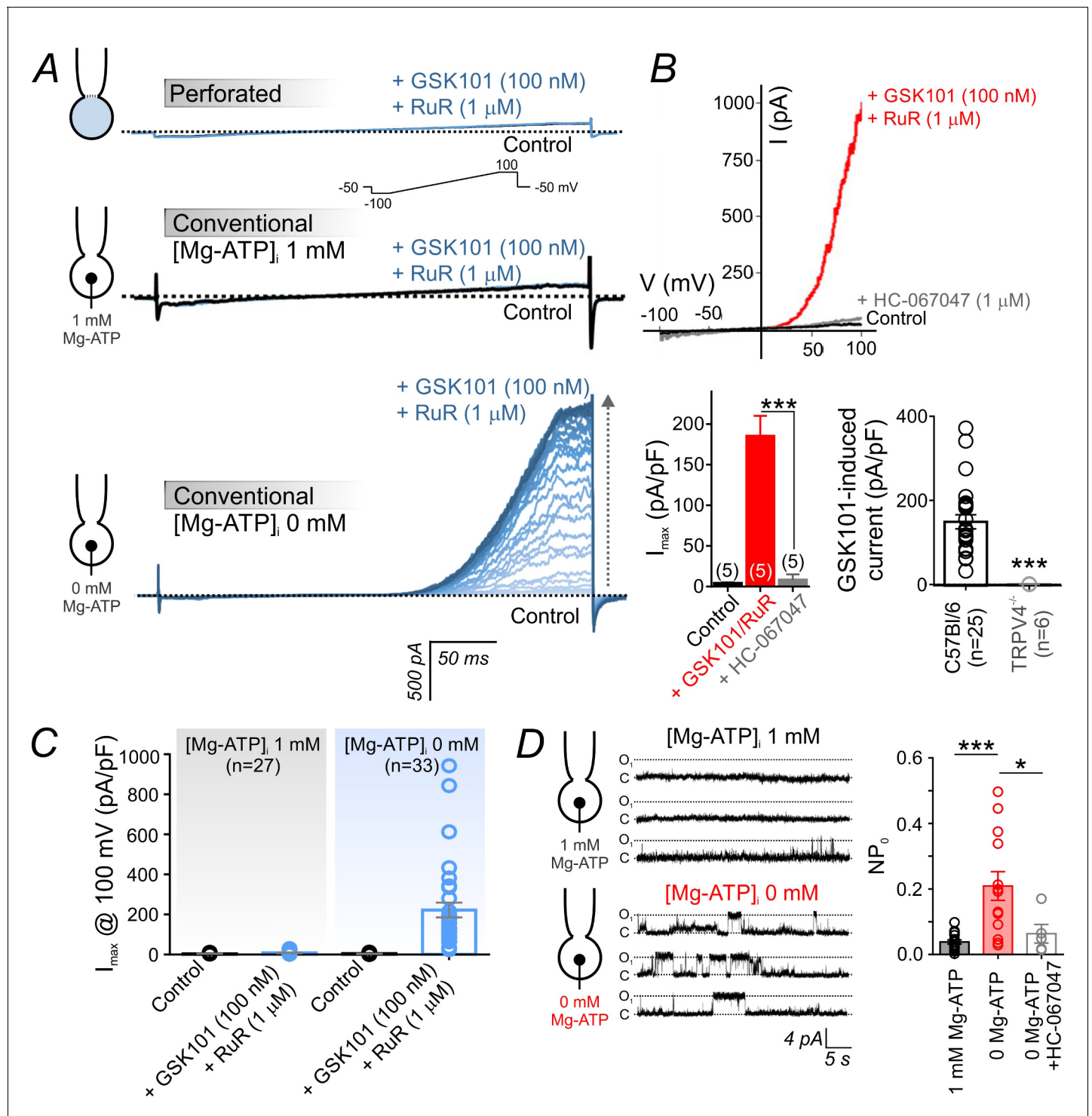


Figure 1. Intracellular ATP suppresses TRPV4 currents in cECs. (A) Representative traces of TRPV4 currents recorded from freshly isolated cECs using voltage ramps (–100 to 100 mV, from a holding potential –50 mV; inset) and different patch-clamp configurations before (black) and after (blue) the application of 100 nM GSK101 and 1 μ M RuR. Top: Currents recorded in the perforated whole-cell configuration. Middle: Currents recorded in the conventional whole-cell configuration (dialyzed cytoplasm, 1 mM Mg-ATP in the pipette solution). Bottom: Currents recorded in the conventional whole-cell configuration (0 mM Mg-ATP in the pipette solution) developed gradually over ~4 min. (B) Current-voltage relationship (top) and summary data (bottom left) of currents recorded before (control) and after the cumulative application of GSK101 (100 nM)+RuR (1 μ M) followed by HC-067047 (1 μ M) (means \pm SEM, *** p <0.001, unpaired Student's t -test; n = 5 each). Bottom right: Individual-value plot of peak outward GSK101 (100 nM)-induced currents in cECs isolated from brains of C57Bl/6 (n = 25) or TRPV4^{–/–} (n = 6) mice. A minimum duration of ~5 min after the application of GSK101 was

Figure 1 continued on next page

Figure 1 continued

allowed for outward TRPV4 current to develop in each cEC. Data are presented as means \pm SEM (** $p < 0.001$, unpaired Student's *t*-test). (C) Individual-value plot of peak outward currents recorded at 100 mV before and after the application of GSK101 (100 nM) onto cECs dialyzed with 0 or 1 mM Mg-ATP in the pipette solution. Individual data points are shown together with means (column bars) and SEM (error bars). (D) Representative traces (*left*) and summary individual-value plot (*right*) of TRPV4 single-channel activity. Single-channel openings of TRPV4 channels were recorded as outward quantal K⁺ currents from cECs in the absence of GSK101 (conventional whole-cell configuration; holding potential, +50 mV; sampling rate, 20 kHz; low-pass filter frequency, 1 kHz; average recording time for each data point, 6 min). cECs were dialyzed with 0 mM (*n* = 13) or 1 mM (*n* = 16) Mg-ATP. One group of cECs dialyzed with 0 mM Mg-ATP was treated with 1 μ M HC-067047 (*n* = 5). Data are presented as means (column bars) \pm SEM (error bars; * $p < 0.05$, *** $p < 0.001$, one-way ANOVA followed by Tukey's multiple comparisons test).

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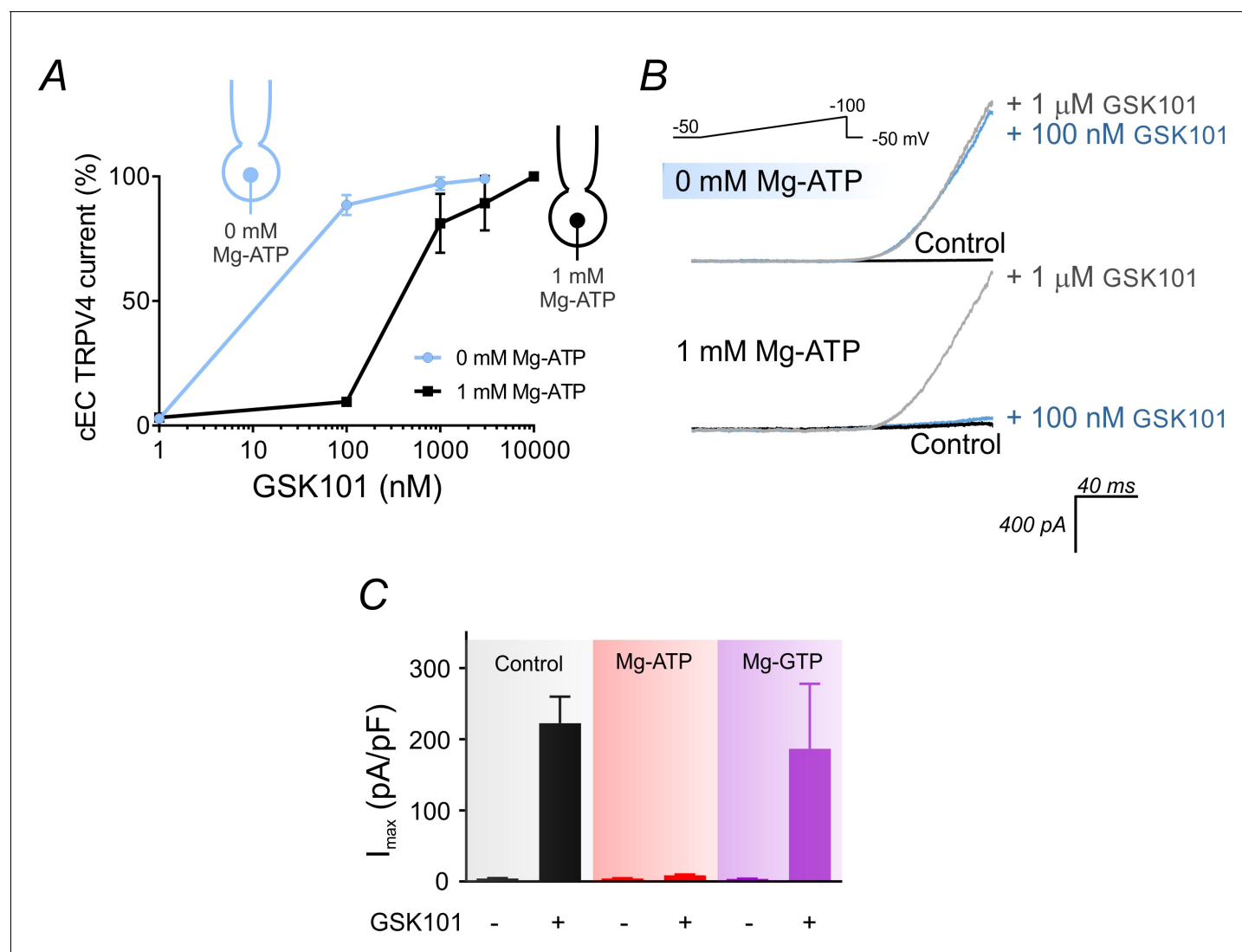


Figure 1—figure supplement 1. Intracellular ATP suppresses TRPV4 activity in cECs. (A) GSK101 concentration-response curve. Currents were measured at 100 mV using the conventional whole-cell configuration in cECs in the presence of 1 μ M RuR. cECs were dialyzed with 0 or 1 mM Mg-ATP in the pipette solution and GSK101-evoked currents developed over ~5 min. TRPV4 current densities with 100 nM GSK101 were 192 ± 30 pA/pF (0 mM Mg-ATP) and 13 ± 2 pA/pF (1 mM Mg-ATP). Data are presented as means \pm SEM (0–1000 nM GSK101, $n = 9$ cECs; 3–10 μ M GSK101, $n = 2$ –3 cECs). (B) Representative traces from two cECs dialyzed with 0 mM Mg-ATP (upper) or 1 mM Mg-ATP (lower). Currents were recorded using voltage ramps (–50 to 100 mV) before and after the application of 100 nM and then 1 μ M GSK101. (C) Summary data showing outward currents at 100 mV, before and after 100 nM GSK101, recorded in dialyzed cECs using different intracellular nucleotide compositions: no nucleotides (control), 1 mM Mg-ATP, or 1 mM Mg-GTP ($n = 7$ –25). For each cEC, a minimum of 5 min was allowed for outward TRPV4 current to develop after the application of GSK101.

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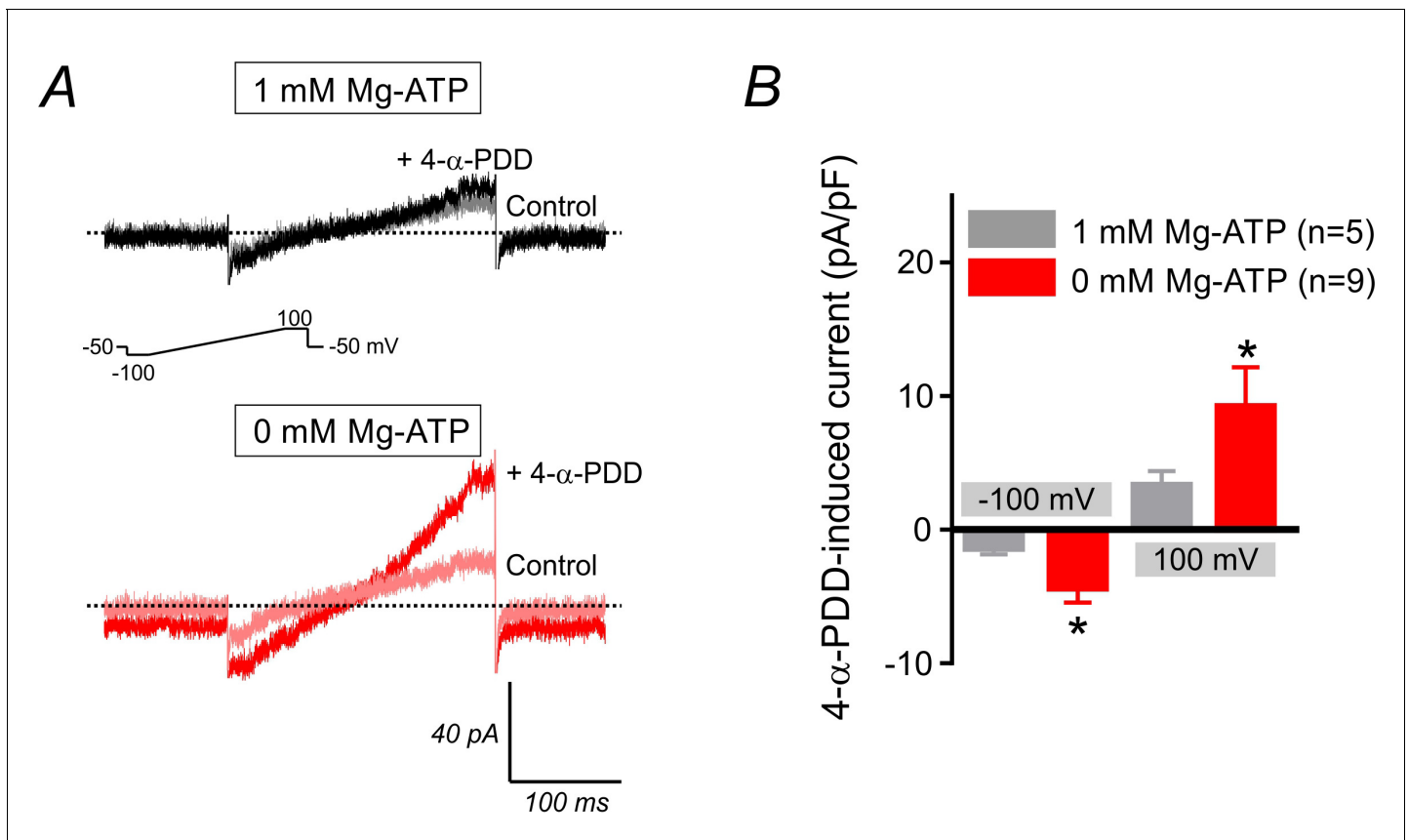


Figure 1—figure supplement 2. 4- α -PDD-induced current in cECs. (A) Representative traces recorded from two cECs dialyzed with 1 mM (upper) and 0 mM Mg-ATP (lower), before and after the application of 4- α -PDD (5 μ M), using 300 ms voltage ramps (–100 to 100 mV, inset). Ruthenium red was not used in this experiment. (B) Summary data represent 4- α -PDD (5 μ M)-induced inward (at –100 mV) and outward (at 100 mV) currents in cECs dialyzed with 0 or 1 mM Mg-ATP. Data represent means \pm SEM (* p <0.05 unpaired Student's t-test vs. the 1 mM Mg-ATP condition, n = 5–9 cECs per condition). DOI: <https://doi.org/10.7554/eLife.38689.005>

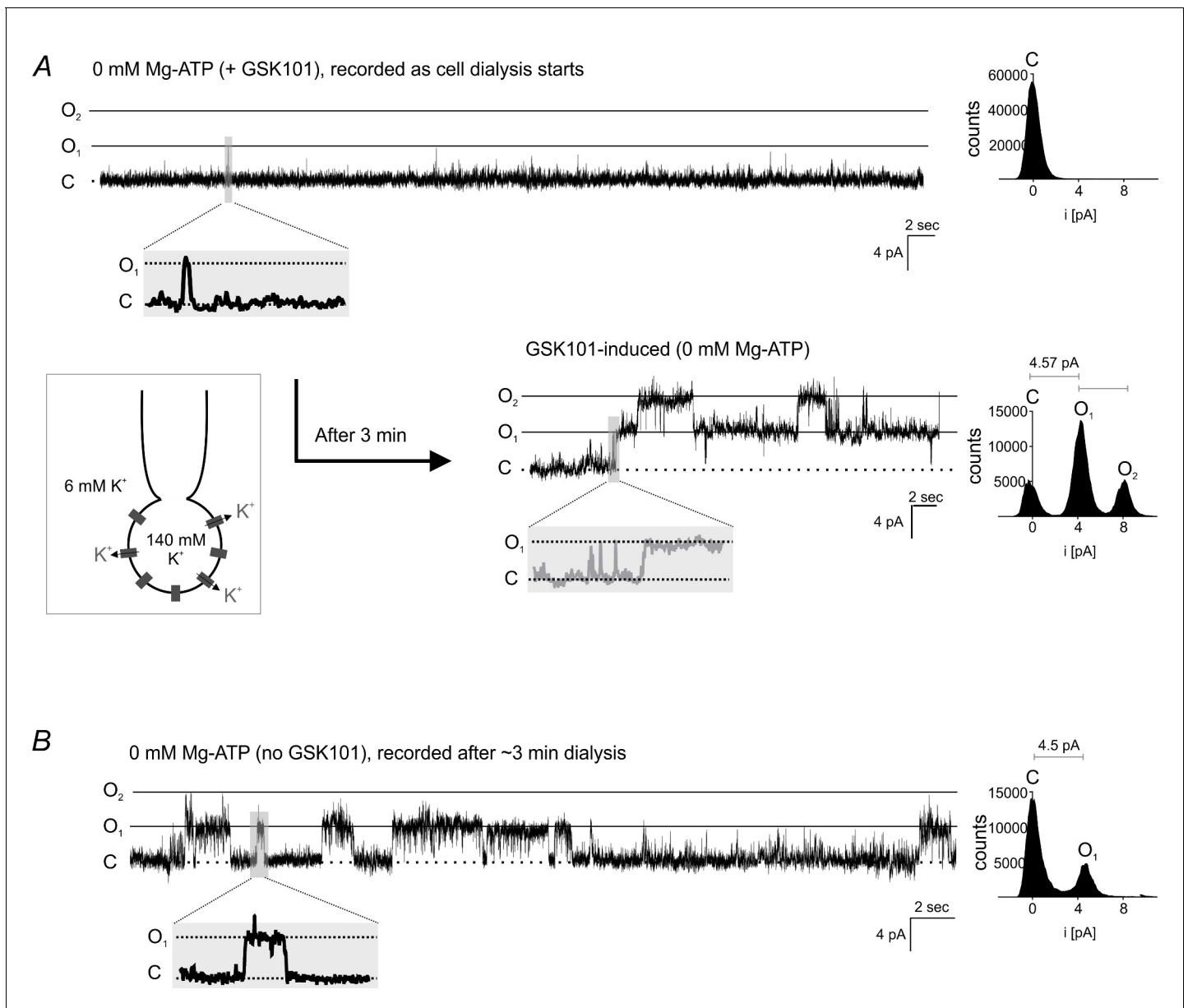


Figure 1—figure supplement 3. Single-channel TRPV4 currents in cECs. (A) Agonist-induced single-cell TRPV4 currents in a cEC. Top: Representative trace (left) and corresponding histogram (right) of single-channel activity in a cEC dialyzed with 0 mM Mg-ATP. Currents were recorded in the conventional whole-cell configuration in the presence of 100 nM GSK101 immediately after gaining electrical access to the cell (holding potential, +50 mV; sampling rate, 20 kHz; low-pass filter frequency, 1 kHz). Bottom: Trace and histogram for the same cEC recorded ~3 min after initiating dialysis when the effect of GSK101 commenced. The amplitude histogram revealed a unitary TRPV4 current amplitude (i) of 4.57 pA. (B) Single-cell TRPV4 currents in the absence of GSK101. Traces and corresponding histogram of single TRPV4 channel currents in a cEC dialyzed with 0 mM Mg-ATP (conventional whole-cell configuration) in the absence of an agonist. The cEC was held at +50 mV, and currents were recorded after dialyzing for ~3 min. The unitary current amplitude was 4.5 pA.

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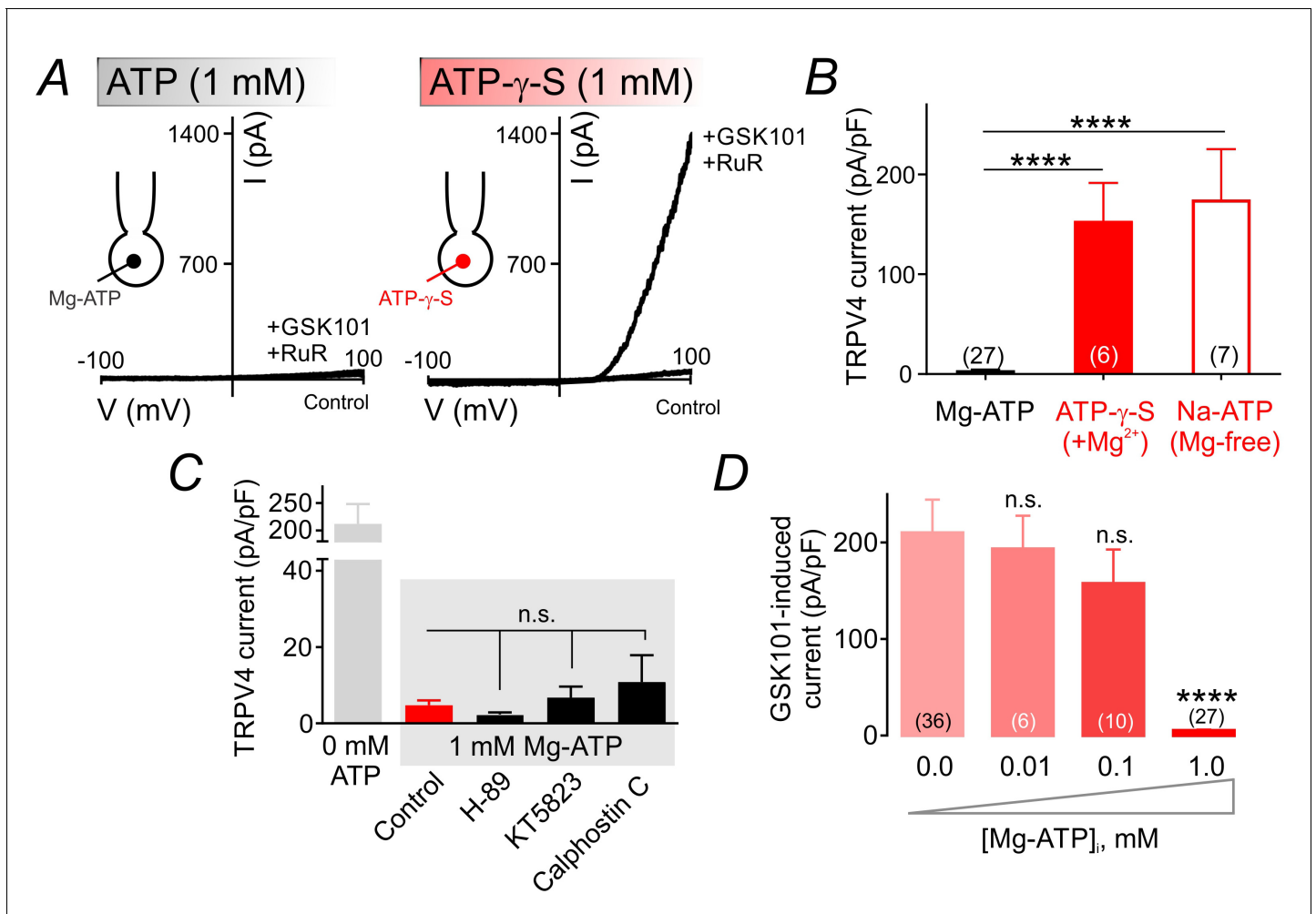


Figure 2. ATP hydrolysis is required for ATP-mediated suppression of TRPV4 channel activity. (A) Representative traces of current-voltage relationships in cECs recorded using voltage ramps (−100 to 100 mV) before and after the application of 100 nM GSK101 and 1 μ M RuR. cECs were dialyzed with 1 mM Mg-ATP (left) or 1 mM Mg-ATP- γ -S (right). (B) Summary data showing GSK101 (100 nM)-induced outward currents at 100 mV in cECs dialyzed with Mg-ATP (1 mM), Mg-ATP- γ -S (1 mM) or Na-ATP (1 mM, in Mg²⁺ free solution). A minimum duration of 5 min after the application of GSK101 was allowed for outward TRPV4 current to develop in each cEC. Data are presented as means \pm SEM (**** p <0.0001 vs. Mg-ATP, one-way ANOVA followed by Dunnett's multiple comparisons test). (C) TRPV4 outward currents induced by 100 nM GSK101 at 100 mV, recorded from dialyzed cECs (0 and 1 mM Mg-ATP). Mg-ATP-dialyzed cECs (gray shadow) were pre-treated with inhibitors of PKA (H-89, 1 μ M), PKG (KT5823, 1 μ M) or PKC (calphostin C, 0.5 μ M) for ~10–15 min prior to GSK101 application, or left untreated (control). Data are presented as means \pm SEM (n.s. denotes not significant vs. control Mg-ATP, one-way ANOVA, Dunnett's multiple comparisons test, n = 6–24). (D) Summary data showing the effect of raising intracellular Mg-ATP concentration on GSK101-induced TRPV4 currents. Data are means \pm SEM (**** p <0.0001, one-way ANOVA followed by Dunnett's multiple comparisons test).

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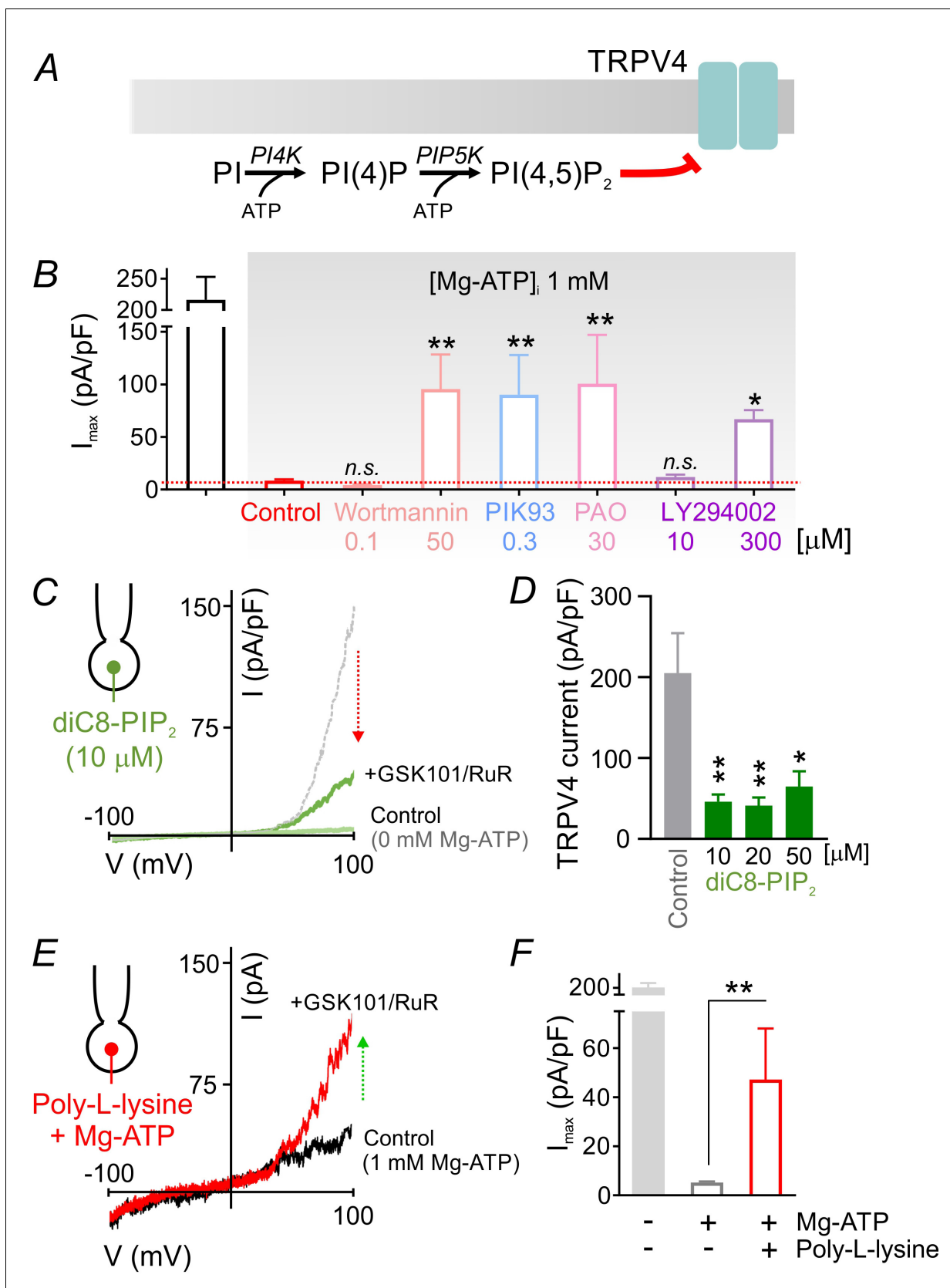


Figure 3. PIP₂ mediates tonic inhibition of capillary TRPV4 channels. (A) Schematic diagram showing the ATP-dependent synthesis steps leading to the production of PIP₂. (B) Average maximum outward TRPV4 current induced by 100 nM GSK101, recorded in cECs at 100 mV using the conventional Figure 3 continued on next page

Figure 3 continued

whole-cell configuration. cECs dialyzed with 1 mM Mg-ATP were treated for ~10 min with wortmannin (0.1, 50 μ M), PIK93 (0.3 μ M), PAO (30 μ M) or LY294002 (10, 300 μ M), or were left untreated (control). A minimum duration of 10–15 min after the application of GSK101 was allowed for outward TRPV4 current to develop in each cEC. Data are means \pm SEM (** p <0.01, * p <0.05 vs. control Mg-ATP, one-way ANOVA followed by Dunnett's multiple comparisons test; n = 6–27). (C) Traces of current-voltage relationship obtained from a cEC dialyzed with 10 μ M diC8-PIP₂ and 0 mM Mg-ATP using a voltage ramp (–100 to 100 mV) before and after (green) the application of GSK101 (100 nM) and RuR (1 μ M). The dotted gray trace is a representative GSK101-induced current recorded from a control cEC dialyzed with 0 μ M diC8-PIP₂ and 0 mM Mg-ATP. (D) Summary data showing GSK101 (100 nM)-induced currents at 100 mV in cECs dialyzed with different concentrations of diC8-PIP₂ (10, 20, 50 μ M) or 0 μ M phosphoinositide (control). The pipette solution lacked Mg-ATP in all groups. GSK101-evoked outward currents developed over ~5 min. Data are presented as means \pm SEM (* p <0.05, ** P <0.01, one-way ANOVA followed by Dunnett's multiple comparisons test; n = 10–18). (E, F) Representative trace (E) and summary data showing GSK101-induced currents in cECs dialyzed with 1 mM Mg-ATP and poly-L-lysine (3 μ g/ml). A duration of 10 min was allowed after the application of GSK101 for outward TRPV4 current to develop in each cEC. Data in F are presented as means \pm SEM (** p <0.01, unpaired Student's t -test; n = 8–18). DOI: <https://doi.org/10.7554/eLife.38689.014>

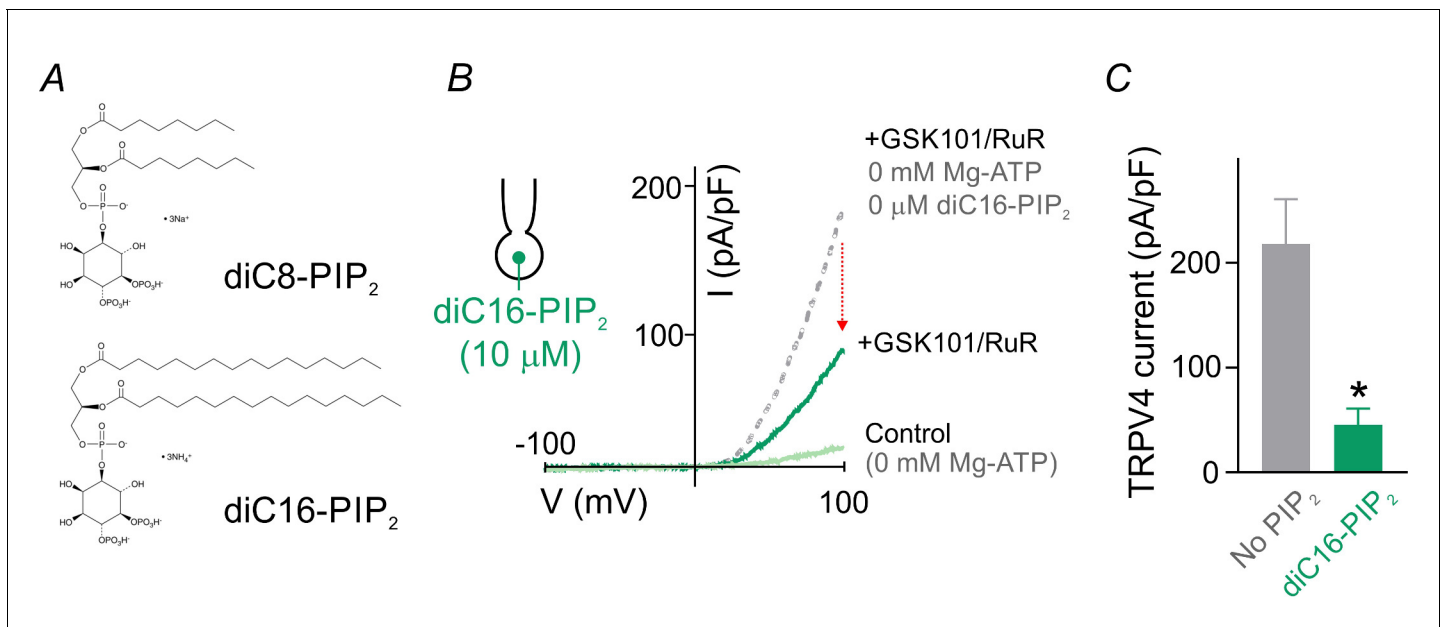


Figure 3—figure supplement 1. The long-acyl chain PIP₂, diC16-PIP₂, suppresses TRPV4 currents. **(A)** Chemical structures of short (dioctanoyl, diC8-PIP₂) and long (dipalmitoyl, diC16-PIP₂) acyl chain PIP₂ salts used in this study. **(B)** Current-voltage relationship represents currents obtained from a cEC dialyzed with 10 μM diC16-PIP₂ and 0 mM Mg-ATP before (light green) and after (dark green) the application of GSK101 (100 nM) and RuR (1 μM), recorded using a voltage ramp (−100 to 100 mV). Outward current developed over 5 min. The dotted gray trace is a representative GSK101-induced current recorded from a control cECs dialyzed with 0 mM diC16-PIP₂ and 0 mM Mg-ATP. **(C)** Summary data showing GSK101 (100 nM)-induced currents at 100 mV in cECs dialyzed with diC16-PIP₂ (10 μM) or 0 μM phosphoinositide (control). The pipette solution lacked Mg-ATP in both groups. Data are presented as means ± SEM (*p < 0.05, unpaired Student's t-test; n = 3–4 cECs).

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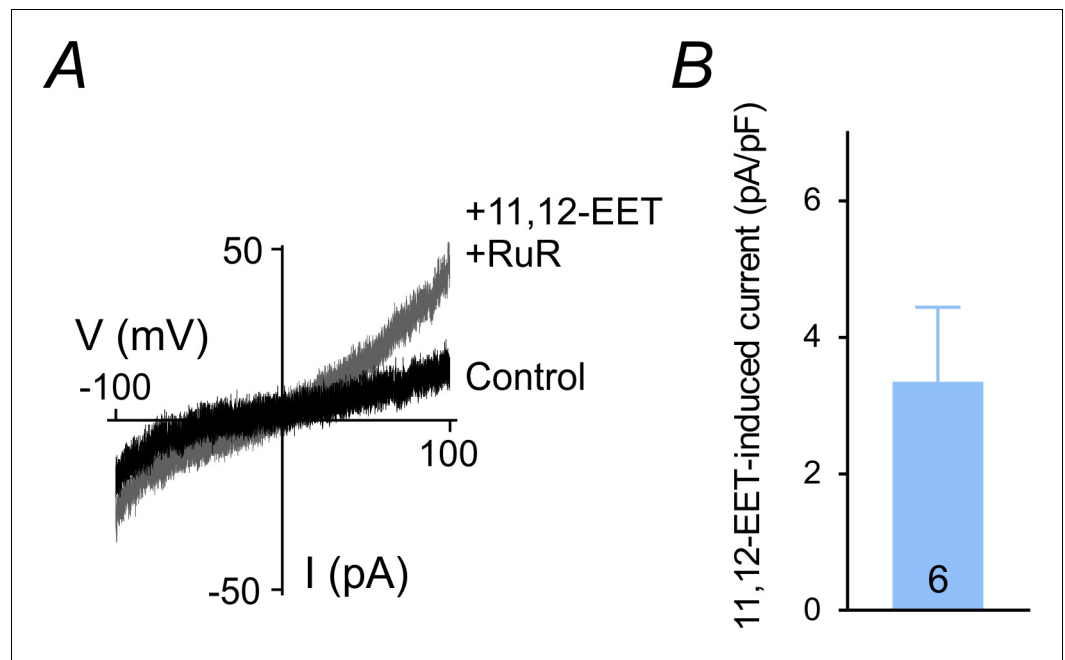


Figure 3—figure supplement 2. 11,12-EET-induced currents in cECs. (A) Current-voltage relationship represent currents obtained from a cEC dialyzed with 0 μ M diC8-PIP₂ and 0 mM Mg-ATP before (control) and after the application of 11,12-EET (1 μ M) and RuR (1 μ M), recorded using 300 ms voltage ramps (–100 to 100 mV). (B) Summary data showing 11,12-EET-induced outward currents at 100 mV in dialyzed cECs based on experiments in A (n = 6 cECs).

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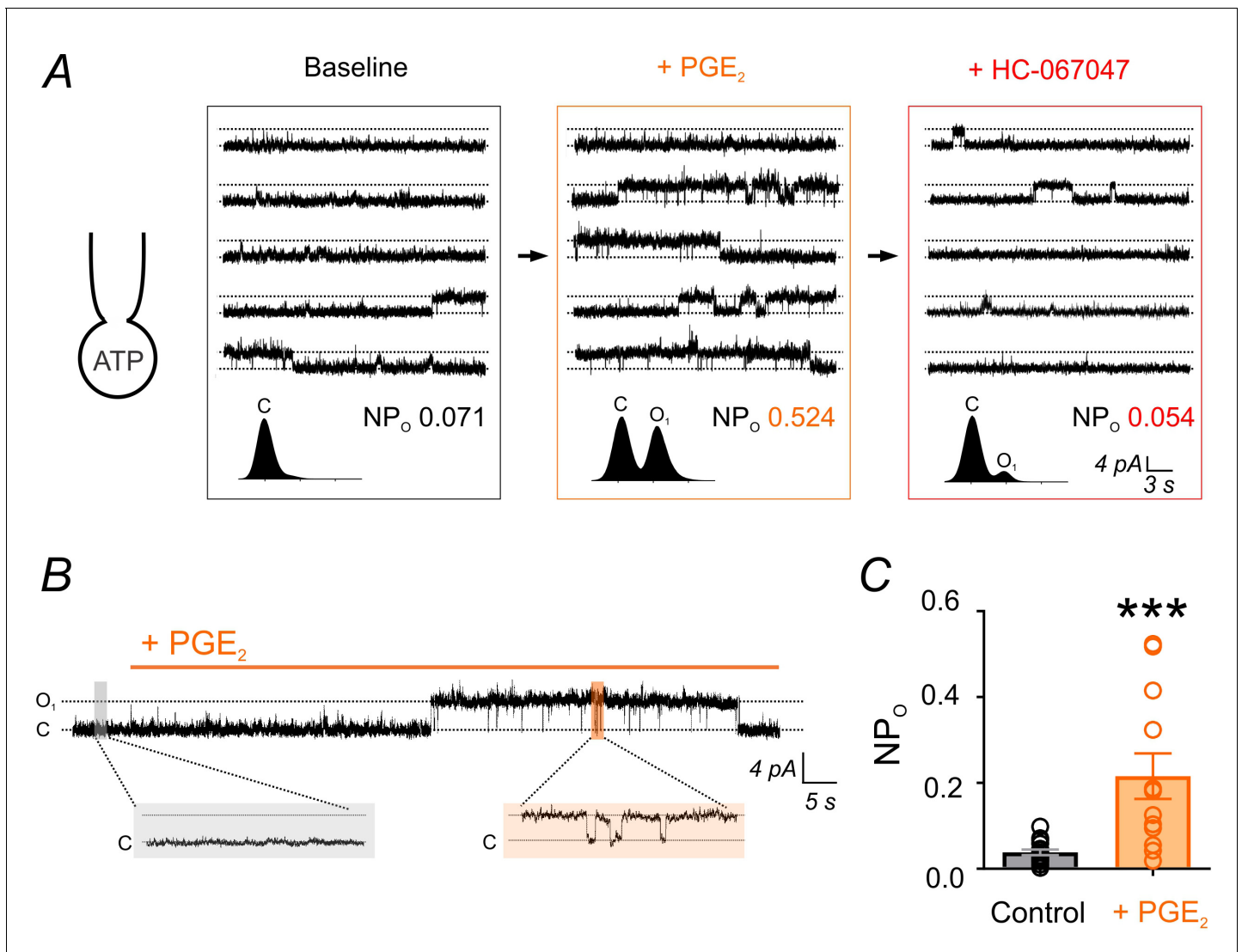


Figure 4. PGE_2 enhances TRPV4 channel activity. (A) Top: Representative conventional whole-cell recordings from a cEC dialyzed with 1 mM Mg-ATP in the absence of GSK101 and held at a membrane potential of +50 mV. Quantal outward K^+ currents (unitary current, 4.6 pA; sampling rate, 20 kHz; lowpass filter frequency, 1 kHz), reflecting single-channel openings, were recorded before (baseline) and after the consecutive application of PGE_2 (2 μM) and HC-067047 (1 μM). Bottom: Corresponding amplitude histograms and open probability (NP_O) values. (B, C) Representative trace (B) and individual-value plot (C) of TRPV4 NP_O in cECs (dialyzed with 1 mM Mg-ATP, held at +50 mV) in the absence (control; $n = 16$) and presence ($n = 12$) of 2 μM PGE_2 . Data in C are means (column bars) \pm SEM (error bars, *** $p < 0.001$, unpaired Student's t -test). Each data point represents a recording from a cEC; the average duration of each recording was 5 min.

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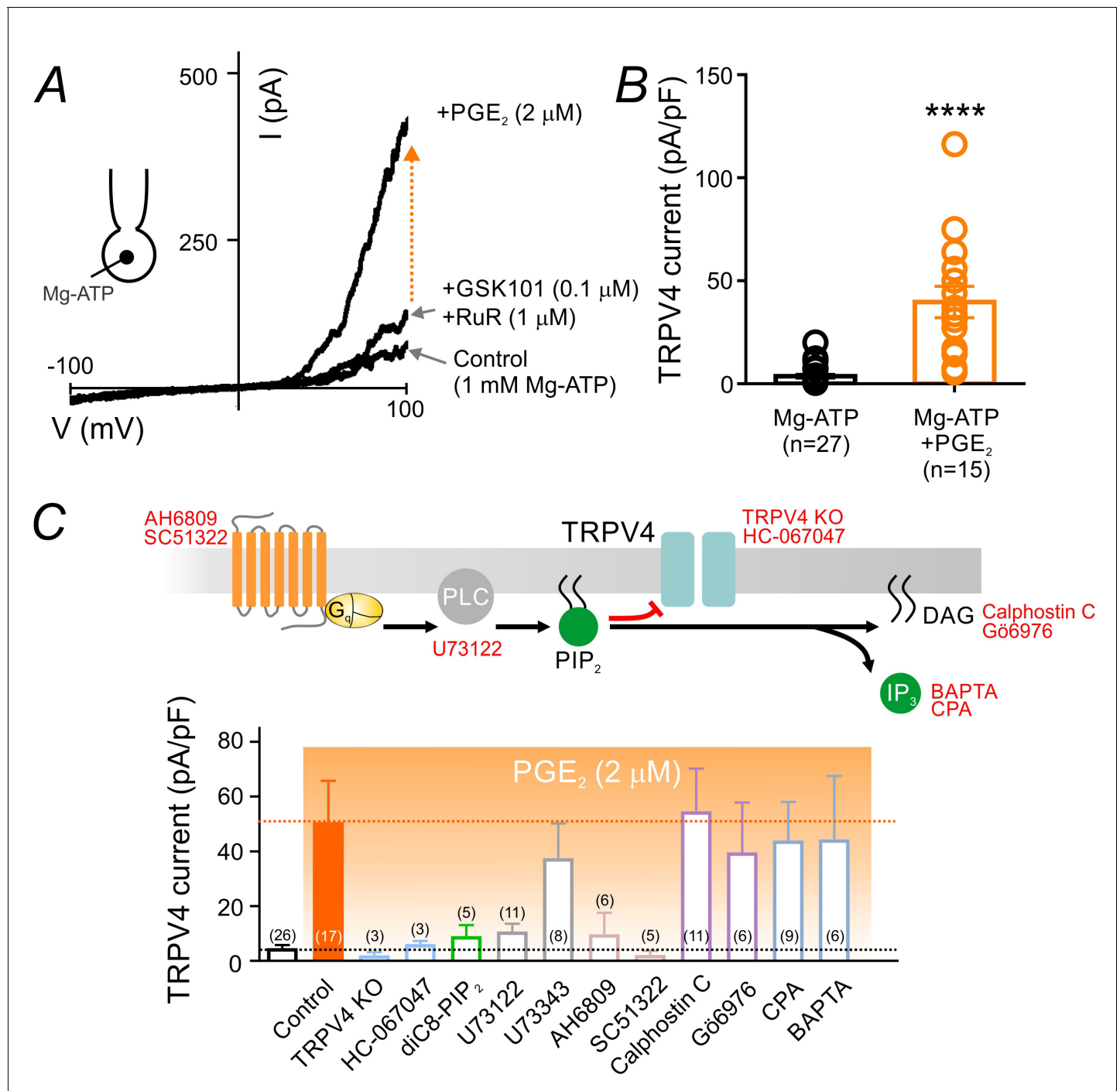


Figure 5. PGE₂ relieves PIP₂-mediated TRPV4 channel suppression. (A) Representative current-voltage plots obtained from a cEC dialyzed with 1 mM Mg-ATP and treated consecutively with GSK101 (100 nM) and RuR (1 μ M) followed by 2 μ M PGE₂. (B) Summary individual-value plot of GSK101-induced TRPV4 currents at 100 mV in cECs dialyzed with 1 mM Mg-ATP in the absence (black; n = 27) and presence (orange; n = 15) of 2 μ M PGE₂. Incubation of cECs with PGE₂ lasted ~15 min. Data in B are means (column bars) \pm SEM (error bars, ****p < 0.0001, unpaired Student's t-test). (C) Top: Schematic diagram showing the G_qPCR-dependent hydrolysis of PIP₂ and the interventions used to test different components of the proposed pathway. Bottom: Summary data showing GSK101 (100 nM)-induced currents recorded at 100 mV in cECs dialyzed with 1 mM Mg-ATP. Currents were recorded in the absence and presence of 2 μ M PGE₂ (orange shading), with or without (control) the indicated interventions. Concentrations (and application method): HC-067047, 1 μ M (bath); diC8-PIP₂, 10 μ M (pipette); U73122, 10 μ M (bath); U73343, 10 μ M (bath); AH6809, 10 μ M (bath); SC51322, 1 μ M (bath); calphostin C, 0.5 μ M (bath); Gö6976, 1 μ M (bath); CPA, 30 μ M (bath); BAPTA, 5.4 mM (pipette). For bath application, pharmacological agents were added 10–15 min before PGE₂ application.

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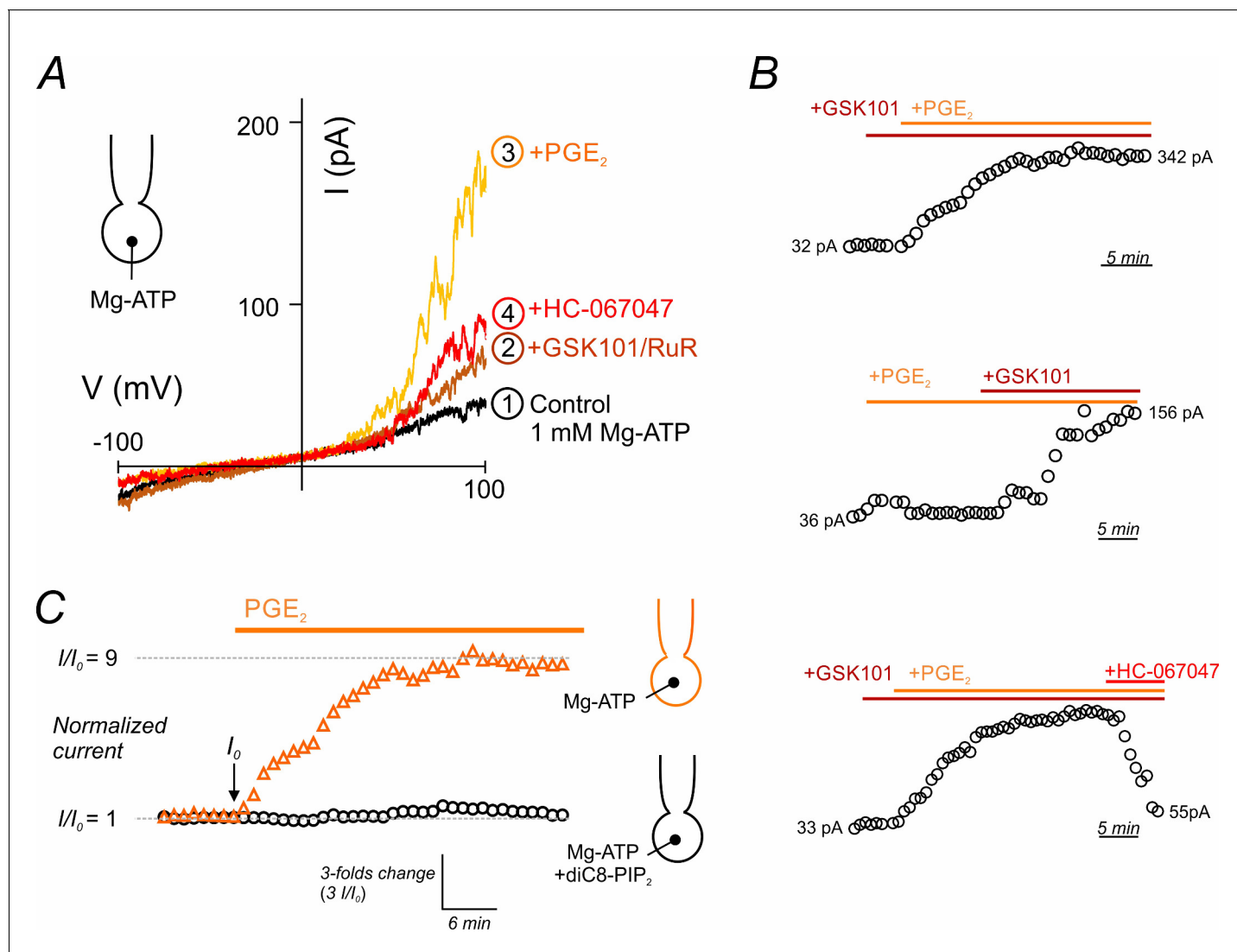


Figure 5—figure supplement 1. PGE₂ relieves TRPV4 current inhibition. (A) Current-voltage relationship recorded in a cEC dialyzed with 1 mM Mg-ATP using voltage ramps (−100 to 100 mV). The circled numbers indicated the sequential and cumulative application of GSK101 (100 nM)+RuR (1 μM) followed by 2 μM PGE₂ and lastly, the TRPV4 blocker HC-067047 (1 μM). (B) Representative scatter plots of peak current amplitudes (at 100 mV) in three cECs dialyzed with 1 mM Mg-ATP and treated with 100 nM GSK101 followed by 2 μM PGE₂ (or PGE₂ first followed by GSK101). Note that PGE₂-induced activation of TRPV4 current plateaued after ~13–15 min. (C) Scatter plots of normalized GSK101-induced outward currents (at 100 mV), normalized to the current at zero time, I_0 (when 2 μM PGE₂ was applied), in two cECs, one dialyzed with 1 mM Mg-ATP (orange symbols) and the other dialyzed with 1 mM Mg-ATP +10 μM diC8-PIP₂ (black symbols). Currents normalized to I_0 are presented before and after the application of PGE₂ for 35 min.

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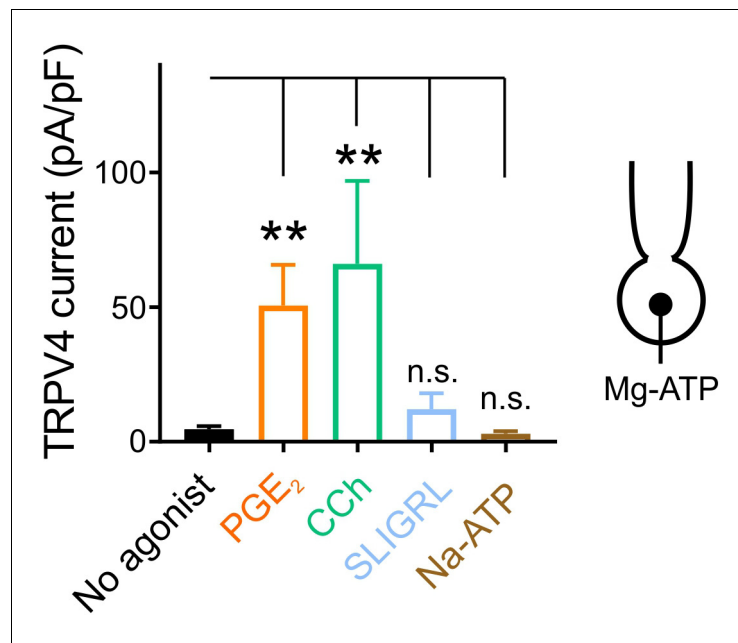


Figure 5—figure supplement 2. Different G_qPCR agonists differentially regulate TRPV4 activity. Summary data showing TRPV4 currents evoked by 100 nM GSK101 at 100 mV in Mg-ATP (1 mM)-dialyzed cECs. Cells were treated with GSK101 alone (no agonist) or together with the G_qPCR agonist PGE₂ (2 μM), carbachol (CCh; 10 μM), SLIGRL (5 μM), or Na-ATP (50 μM). cECs were incubated with different agonists for 15 min while TRPV4 current development was monitored. Data are presented as means ± SEM (**p<0.01, one-way ANOVA followed by Dunnett's multiple comparisons test; n = 11–17 cECs).

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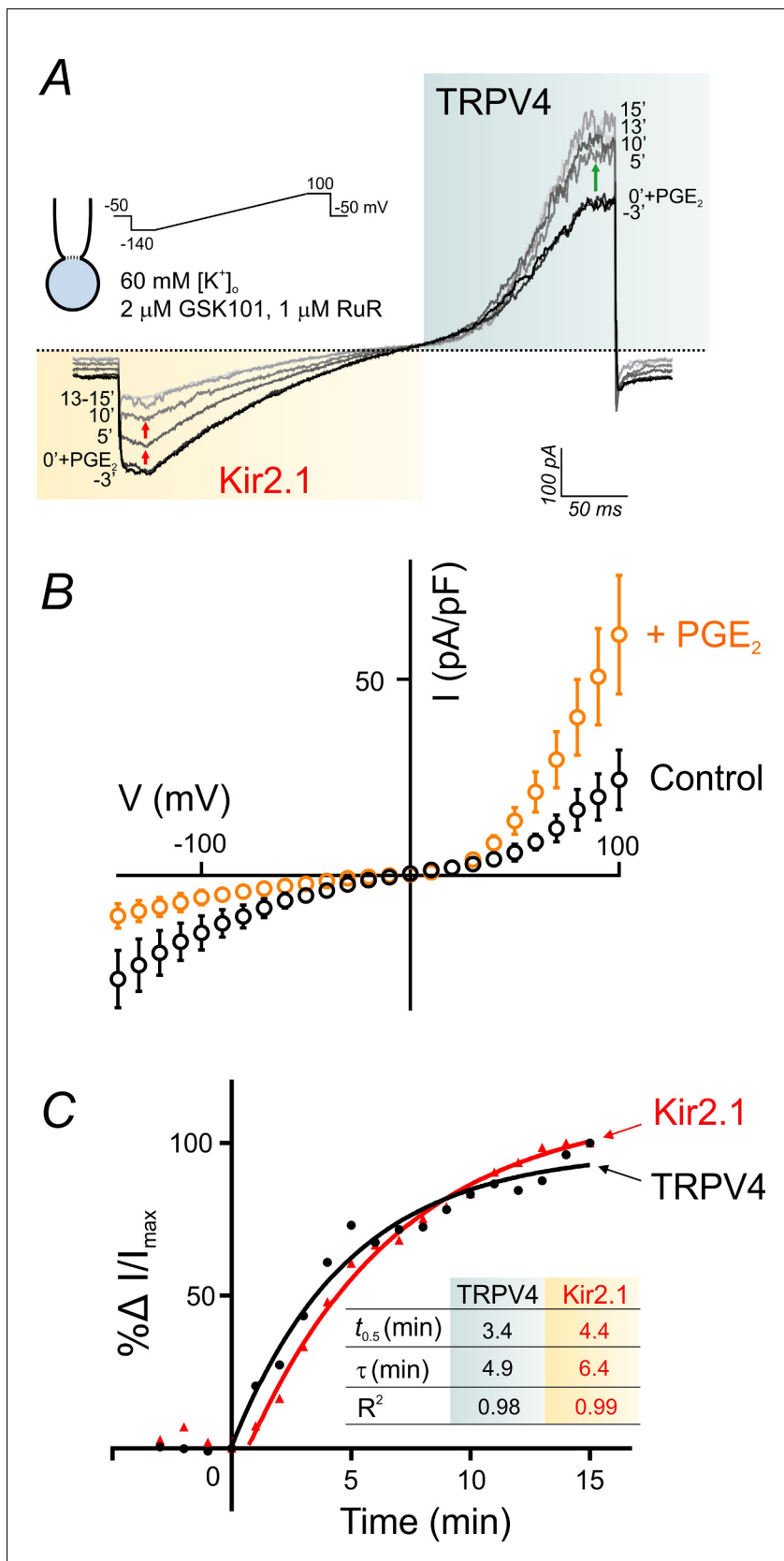


Figure 6. PGE₂ simultaneously and reciprocally regulates TRPV4 and Kir2.1 channel activities. (A) Representative traces illustrate simultaneous recordings of Kir2.1 (inward) and TRPV4 (outward) currents in a cEC obtained using the perforated whole-cell configuration. Voltage ramps (300 ms, Figure 6 continued on next page

Figure 6 continued

–140 to 100 mV) were used and the cEC was bathed in a 60 mM $[K^+]_o$ solution supplemented with 2 μ M GSK101 and 1 μ M RuR. Traces represent currents before and for a duration of 15 min after the application of 2 μ M PGE₂. (B) Averaged current-voltage relationship ($n = 5$ cECs) corresponding to the experiment in A, before (control) and after (maximum changes at 15 min) application of PGE₂. (C) Summary data showing the kinetics of TRPV4 current enhancement (black) and Kir2.1 current decline (red) following application of 2 μ M PGE₂ onto cECs (as in A) at room temperature. Points are average percentage change in normalized currents before and over 15 min after PGE₂ application ($n = 5$). Curves are best fits of exponential change (rise: TRPV4; decay: Kir2.1). *Inset table*: kinetic parameters based on the two curve fits. Changes in currents plateaued ~13 min after the application of PGE₂.

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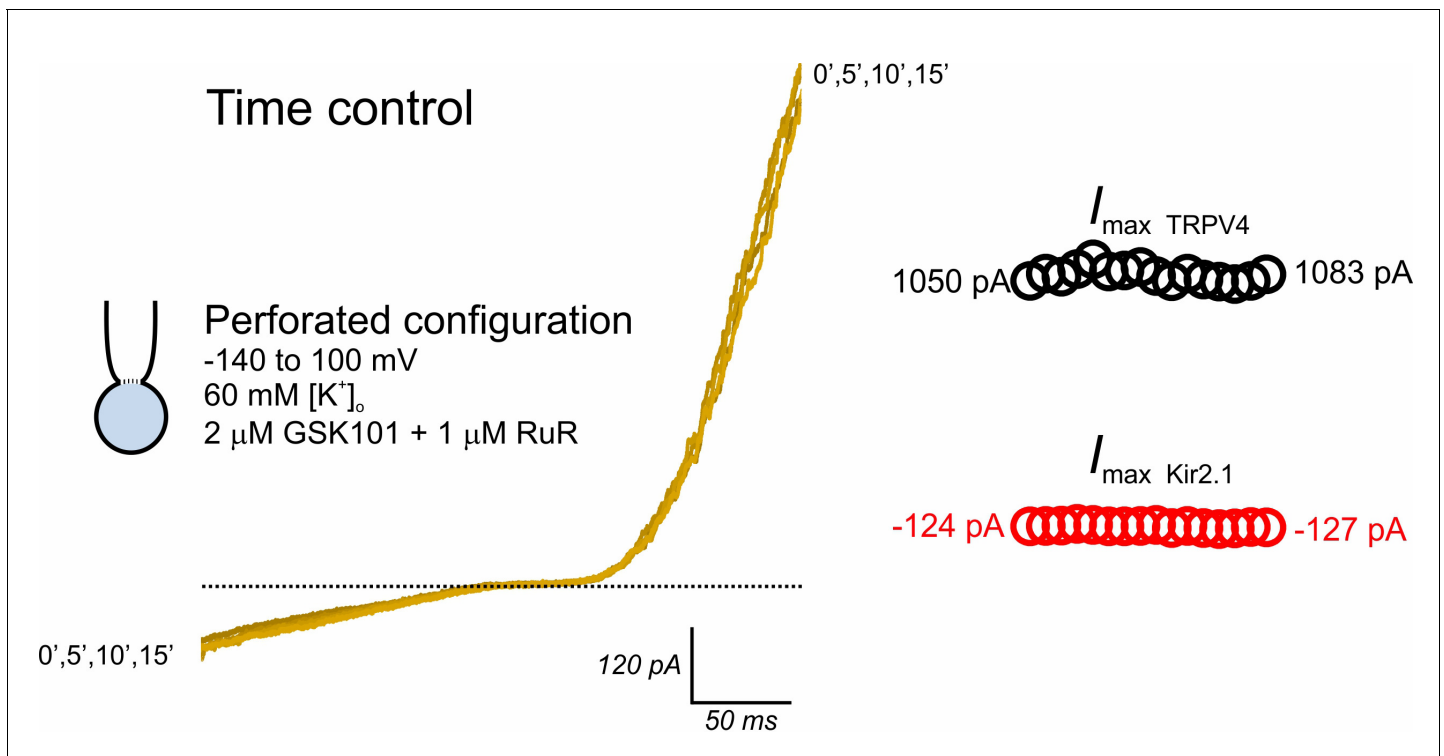


Figure 6—figure supplement 1. TRPV4 and Kir2.1 currents are preserved in cytoplasm-intact cECs. Representative traces obtained from a cEC using the same experimental protocol used in **Figure 6** (perforated whole-cell configuration, 60 mM $[K^+]_o$, bath application of 2 μ M GSK101 + 1 μ M RuR). Inward current reflects Kir2.1 activity, and outward current reflects TRPV4 activity. Traces (*left*) and scatter plots (*right*) track inward and outward currents over a duration of 15 min.

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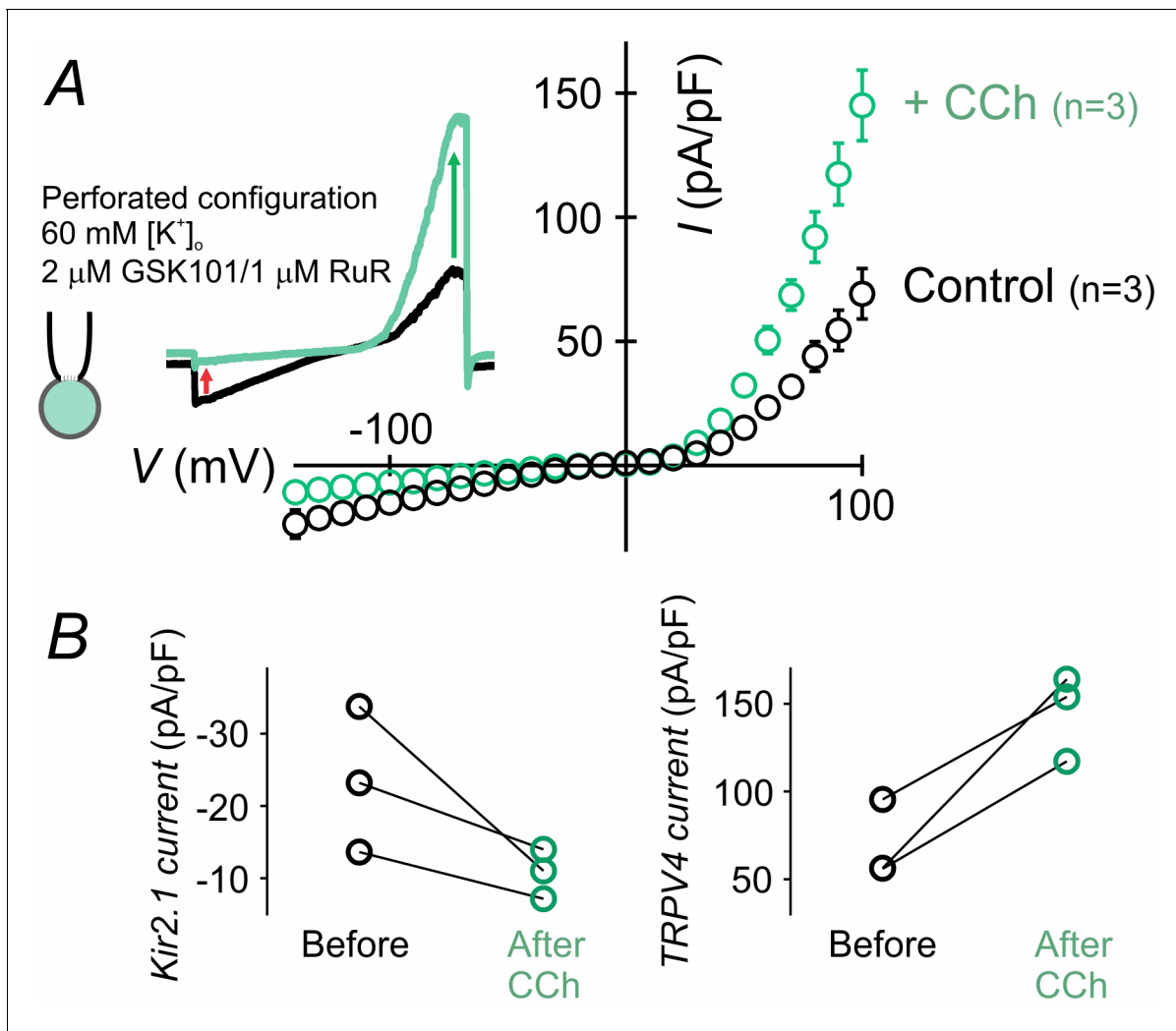


Figure 6—figure supplement 2. The muscarinic receptor agonist carbachol activates TRPV4 currents and inhibits Kir2.1 currents. **(A)** Representative traces and averaged current-voltage relationship for Kir2.1 (inward) and TRPV4 (outward) currents, simultaneously recorded in cECs using the perforated whole-cell configuration. The cEC was bathed in 60 mM $[K^+]_o$ solution supplemented with 2 μ M GSK101 and 1 μ M RuR, and currents were recorded using voltage ramps (300 ms, -140 to 100 mV). Traces and curves represent current values before and 15 min after the application of carbachol (CCh; 10 μ M). **(B)** Paired scatter plots show maximum Kir2.1 (inward at -140 mV) and TRPV4 (outward at 100 mV) current densities before and 15 min after CCh ($n = 3$ each).

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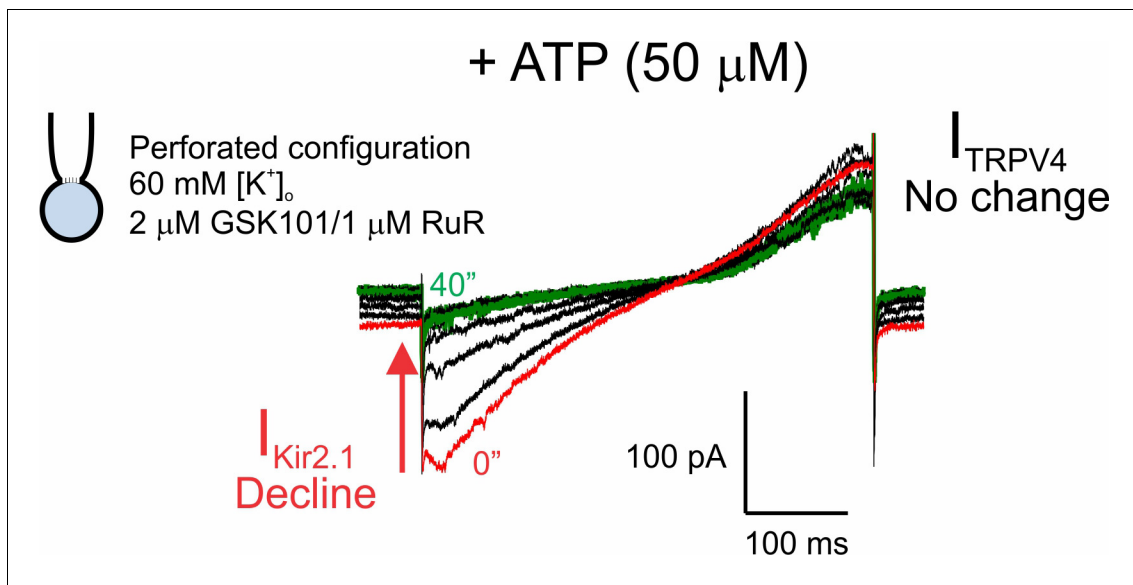


Figure 6—figure supplement 3. Purinergic receptor activation affects Kir2.1 channels but not TRPV4 channels. Representative traces of Kir2.1 (inward) and TRPV4 (outward) currents in a cEC, simultaneously recorded using the perforated whole-cell configuration. The cEC was bathed in 60 mM $[K^+]_o$ solution supplemented with 2 μ M GSK101 and 1 μ M RuR, and currents were recorded using voltage ramps (300 ms, -140 to 100 mV). Traces represent current values before and at various times up to 40 min after the bath-application of 50 μ M Na-ATP.

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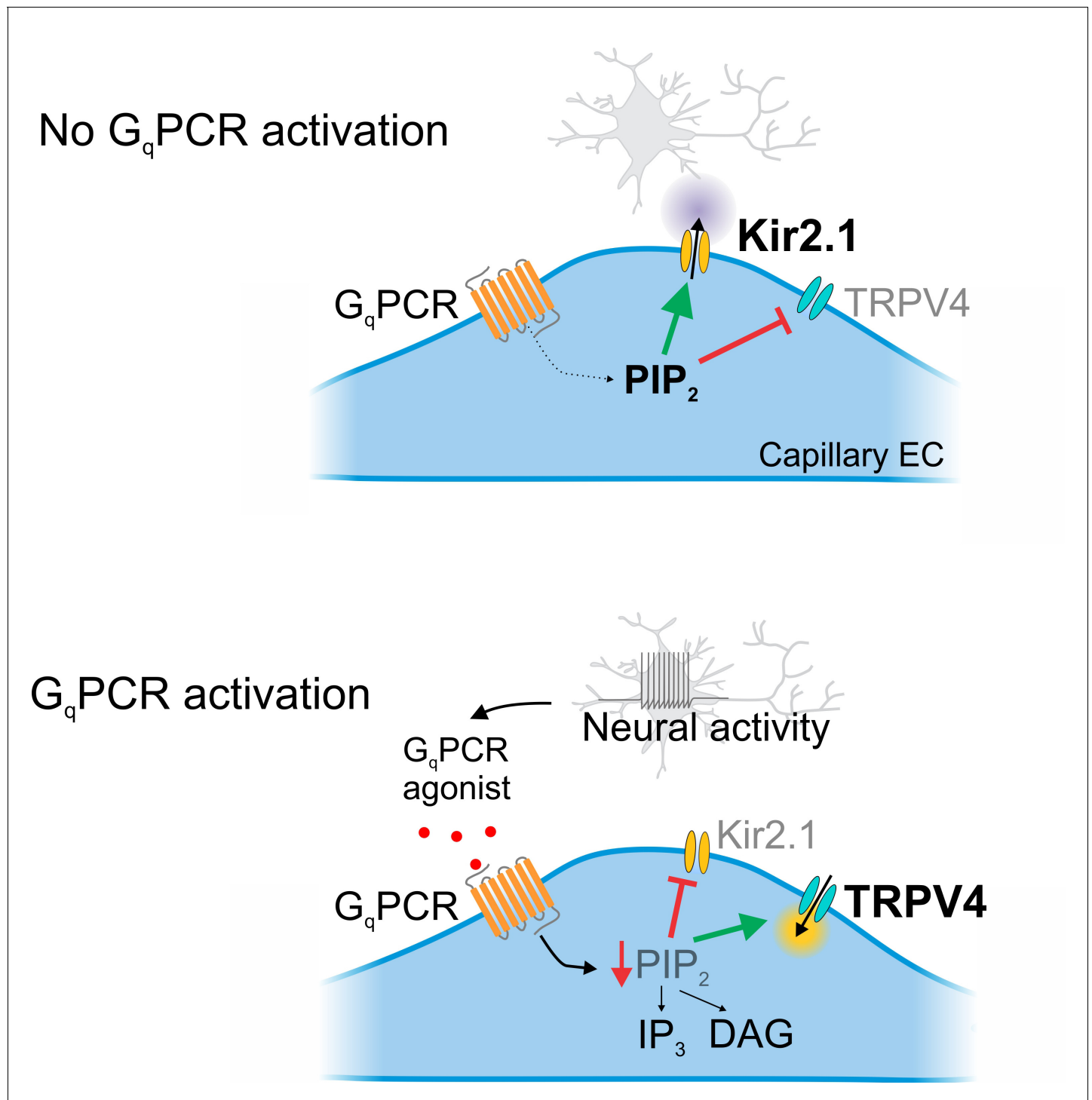


Figure 7. Cartoon representation of G_q PCR-mediated reciprocal effects on capillary ion channel activity. Schematic diagram summarizing the proposed mechanism. *Top:* In the absence of G_q PCR stimulation, endogenous PIP₂ levels are sufficient to tonically inhibit TRPV4 channels and maintain Kir2.1 channel activity. *Bottom:* G_q PCR activation with an agonist stimulates PIP₂ hydrolysis, resulting in the loss of PIP₂-mediated maintenance of Kir2.1 activity and inhibition of TRPV4 activity.

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