

Heart failure drug digitoxin induces calcium uptake into cells by forming transmembrane calcium channels

Nelson Arispe, Juan Carlos Diaz, Olga Simakova, and Harvey B. Pollard*

Department of Anatomy, Physiology, and Genetics, and Institute for Molecular Medicine, Uniformed Services University School of Medicine, Bethesda, MD 20814

Communicated by Bernhard Witkop, National Institutes of Health, Bethesda, MD, December 31, 2007 (received for review October 29, 2007)

Digitoxin and other cardiac glycosides are important, centuries-old drugs for treating congestive heart failure. However, the mechanism of action of these compounds is still being elucidated. Calcium is known to potentiate the toxicity of these drugs, and we have hypothesized that digitoxin might mediate calcium entry into cells. We report here that digitoxin molecules mediate calcium entry into intact cells. Multimers of digitoxin molecules also are able to form calcium channels in pure planar phospholipid bilayers. These digitoxin channels are blocked by Al^{3+} and La^{3+} but not by Mg^{2+} or the classical L-type calcium channel blocker, nitrendipine. In bilayers, we find that the chemistry of the lipid affects the kinetics of the digitoxin channel activity, but not the cation selectivity. Antibodies against digitoxin promptly neutralize digitoxin channels in both cells and bilayers. We propose that these digitoxin calcium channels may be part of the mechanism by which digitoxin and other active cardiac glycosides, such as digoxin, exert system-wide actions at and above the therapeutic concentration range.

cardiac glycoside | cytotoxicity

Despite long experience with cardiac glycosides, the exact mechanism of action for these drugs has remained an enigma. Operationally, the observed action of these drugs on the failing myocardium is to cause an increase in intracellular calcium, resulting in more efficient contraction (1, 2). Because toxic concentrations of these drugs block NaKATPase activity, it has been hypothesized that the enzyme may be partially blocked even at the lower drug concentrations found in the therapeutic range (3). A consequence of this slight depolarization process is that voltage-dependent calcium channels may open, thereby permitting calcium entry into the cell. However, this reasoning has been challenged by the fact that nitrendipine, a classical voltage-dependent calcium channel blocker, fails to reverse cardiac glycoside-induced side effects in healthy human volunteers (4). An alternative mechanism has been a slight increase in intracellular Na, followed by exchange for extracellular Ca^{2+} by the NCX sodium/calcium exchanger (5). However, very high concentrations of cardiac glycosides are needed to clearly observe NCX activation. Finally, at the upper end of the therapeutic concentration window, digitoxin toxicity is potentiated by elevations in circulating calcium concentrations (6). However, the mechanism by which calcium potentiates cardiac glycoside toxicity is not known either.

A further puzzling aspect of the NaKATPase rationale is the fact that, although the complex between cardiac glycosides and NaKATPase is virtually irreversible (7), toxicity in humans can be reversed in minutes by i.v. administration of Digibind (8–10). Digibind is an inactivating Fab fragment antibody against the digitalis pharmacophore, which is widely available in all poison control centers. In fact, the NaKATPase hypothesis for the regulation of positive inotropic effects of cardiac glycosides has been under continuous questioning by investigators for many years without compelling resolution (11–16). Non-NaKATPase effects also have been observed. For example, quite low subnanomolar concentrations of the cardiac glycoside digitoxin also are able to block TNF- α /NF- κ B signaling (17, 18). Thus, the

mechanism for calcium-specific actions of digitoxin and other medicinal cardiac glycosides remains to be fully understood.

Our approach to this problem has been to build on previous studies by ourselves and others showing that a variety of small molecules are able to form multimeric, transmembrane ion-conducting channels (19–25). On this basis, we hypothesized that digitoxin also might mediate calcium entry into cells by forming ion channels. Experiments to test this hypothesis are described in the present article.

Results

Digitoxin Induces Ca^{2+} Uptake into Cells. As shown in Fig. 1*a*, the addition of digitoxin to cells results in a dose-dependent increase in the number of cells responding with changes in intracellular calcium concentration. These data were derived from averaging three independent experiments featuring 50–80 cells each. The criterion for identifying a cell as responsive was taken to be a change of at least 25 nM from the baseline value. In parallel, we also measured the exact changes in intracellular calcium concentration as a function of digitoxin concentration in the extracellular medium. Fig. 1*b* shows the peak change in intracellular calcium as a function of digitoxin concentration. A Hill plot based on these data (see Fig. 1*c*) indicates that the $k_{1/2,app}$ is 178 nM, with a Hill coefficient n_H of 1.3. Based on a conventional cooperativity interpretation of the Hill coefficient, more than one digitoxin molecule may thus be responsible for the calcium uptake process. In addition, the sigmoid shape of the uptake curve also supports the concept that a multimer of digitoxin molecules may be responsible for calcium uptake from the medium into cells.

Above a threshold of *ca.* 40 nM, most of the responsive cells begin uptake after a lag of only a few seconds [see supporting information (SI) Fig. 5*a* in *SI Appendix*]. Furthermore, based on an EGTA experiment, the source of the calcium increment appears to be extracellular (see SI Fig. 5*b* in *SI Appendix*). In addition, as shown in SI Fig. 5*c* in *SI Appendix*, digitoxin-induced calcium uptake is blocked by a monoclonal antibody against digitoxin. These latter data suggest that the digitoxin channel is accessible from the outside of the cell and that functional digitoxin channels are not internalized, but remain in the plasma membrane.

Digitoxin Compromises Cell Survival. The acute effects of digitoxin on calcium uptake suggested that longer term experiments might elicit evidence of a cytotoxic effect. To test this hypothesis, we incubated cells for 3 days with different concentrations of digitoxin. On the third day, we measured the release of lactic dehydrogenase (LDH), a soluble cytosolic enzyme (see SI Fig. 6 in *SI Appendix*). Simultaneously, we measured the remaining

Author contributions: N.A. and H.B.P. designed research; N.A., J.C.D., and O.S. performed research; N.A. and H.B.P. contributed new reagents/analytic tools; N.A., O.S., and H.B.P. analyzed data; and N.A. and H.B.P. wrote the paper.

The authors declare no conflict of interest.

Freely available online through the PNAS open access option.

*To whom correspondence should be addressed. E-mail: hpollard@usuhs.mil.

This article contains supporting information online at www.pnas.org/cgi/content/full/0712270105/DC1.

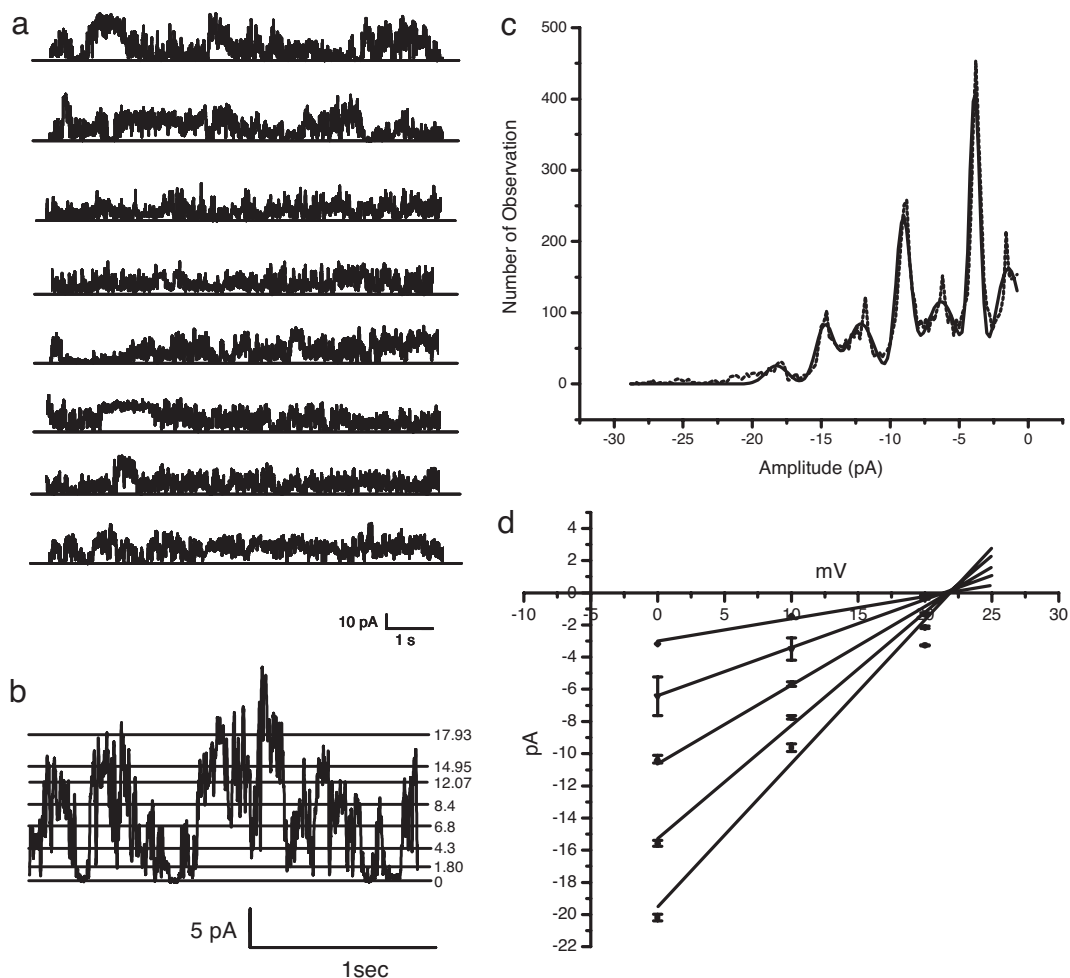


Fig. 2. Digitoxin forms ion-conducting channels in acidic phospholipid planar lipid bilayers. (a) Electrical activity generated by the flow of ions through digitoxin channels formed in a POPS/POPE planar lipid bilayer. A single continuous record of an ionic current of nearly 60 s is shown. No electrical potential difference was imposed. The membrane separates two chambers with asymmetric contents. One chamber contained 200 mM CsCl, whereas the other contained 50 mM CsCl. Digitoxin was directly added to the chamber containing 200 mM CsCl, to a final concentration of 43 nM. (b) Multiple conductance states of digitoxin in a POPS/POPE planar lipid bilayer. Two seconds of electrical recording from the experiment described in a illustrate the presence of different single-channel current levels. The current amplitudes are identified by numbers next to each of the calculated stable current values. The bilayer electrical potential is zero. An asymmetric CsCl gradient (200/50 mM) is the sole driving force. (c) Amplitude histogram of digitoxin channels in a POPS/POPE planar lipid bilayer. Conductance events, collected over a 2-s period, were fit to a multi-Gaussian function and analyzed as a current–amplitude histogram. Marquardt least squares fitting of this histogram indicated that the current values distributed mainly into seven Gaussians. (d) I – V curve for digitoxin channel in POPS/POPE planar lipid bilayer. The current–events amplitudes from the Gaussian-fitted histograms were plotted for different bilayer potential values. The slopes from the linear regression lines through the data estimate the main subconductance levels to be 150.20 ± 0.01 , 305.300 ± 0.007 , 450.000 ± 0.009 , 672.00 ± 0.06 , and 845.00 ± 0.12 pS. The line intercepts generate an average equilibrium potential of 23.13 ± 1.51 mV.

amplitude in PC, although other conductances can be readily detected. Finally, the I – V curve in Fig. 4d reveals a reversal potential of +27 mV. This value is somewhat closer to the calculated reversal potential of +35 mV than that calculated in POPS membranes. Thus, although the ion selectivity of the digitoxin channel is similar in either PS or PC, the kinetics are significantly different. The importance of this distinction between high levels of activity in PS membranes and significantly lower levels of activity in PC membranes may be relevant to the fact that, *in vivo*, proapoptotic cells preferentially express PS on their outer leaflets.

Digitoxin Channels Are Blocked by Anti-Digitoxin Antibodies. As mentioned in the Introduction, an overdose of digitoxin or digoxin in humans treated for heart failure can be quickly reversed over a 15- to 30-min time period by administering specific anti-digitoxin/digoxin antibodies (14–16). Therefore, we hypothesized that if digitoxin channel activity contributed to cytotoxic adverse events,

anti-digitoxin antibodies might quickly block both channel activity *in vitro* and digitoxin-dependent calcium uptake into cells. As shown in SI Fig. 8a in *SI Appendix*, digitoxin channel amplitudes are reduced by nearly 50% by 10 min after the addition of the antibody. After 14 min, the channel activity is barely detectable. SI Fig. 8b in *SI Appendix* (“After 14 min”) shows that the distribution of amplitudes is very close to zero. However, the I – V curves in SI Fig. 8c in *SI Appendix* show that the antibody has virtually no effect on the reversal potential of the digitoxin channel. Thus, as hypothesized, the antibody quickly reduces the rate with which digitoxin channels conduct ions. Nonetheless, the selectivity of the digitoxin ion channel remains intact.

Digitoxin Is Differentially Sensitive to Conventional Calcium Channel Blockers. The data so far collected suggested that digitoxin channels conduct cations, including calcium. To further test this hypothesis, we examined the effect of various known calcium channel inhibitors

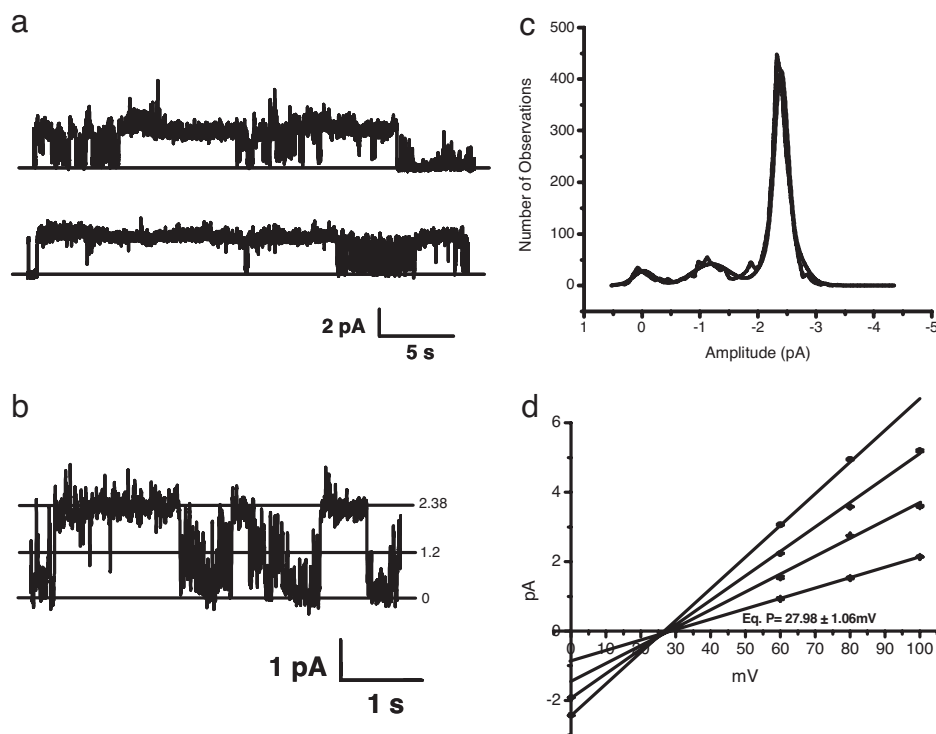


Fig. 4. Digitoxin forms ion-conducting channels in neutral phospholipid planar lipid bilayers. (a) Digitoxin channels formed in a neutral planar lipid bilayer. A single continuous record of ionic current of >60 s is shown. The planar lipid bilayer was prepared from a 1:1 mixture of POPE and POPC. No electrical potential difference was imposed. The membrane separates two chambers with asymmetric contents. One chamber contained 200 mM CsCl, whereas the other contained 50 mM CsCl. Digitoxin was directly added to the chamber containing 200 mM CsCl to a final concentration of 42 nM. The pattern of current activity exhibits well defined current levels and long time-duration openings. The amplitudes of the main conductances are ≈ 10 times smaller than the one observed from digitoxin channels formed in POPS/POPE bilayers. These data are representative of many hours of recording the activity from digitoxin channels. (b) Multilevel conductance activity of digitoxin channels in a neutral (POPC/POPE) planar lipid bilayer. A current trace of 4.5 s from the experiment described in a illustrates the presence of two clearly defined single-channel current levels. The current amplitudes are identified by numbers (in pA) next to each of the calculated stable current values. The bilayer electrical potential is zero. An asymmetric CsCl gradient (200/50 mM) is the sole driving force. (c) Current-amplitude histogram of digitoxin channels in a neutral (POPC/POPE) planar lipid bilayer. The current amplitude histogram shows the distribution of the current events from a representative 60-s current segment taken at zero bilayer potential. The histogram was fitted by the Marquardt least squares-fitting algorithm to a multi-Gaussian function. (d) I - V curve for digitoxin channels in neutral (POPC/POPE) planar lipid bilayer. The current-event amplitudes obtained from the Gaussian-fitted histograms were plotted for different bilayer electrical potential values. The slopes from the linear regression lines through the data indicate that the main subconductance levels are 30.20 ± 2.16 , 51.170 ± 0.005 , 70.480 ± 0.001 , and 92.10 ± 0.09 pS. The line-intercepts generate an average equilibrium potential of 27.98 ± 1.06 mV.

statistically significant above *ca.* 60 nM digitoxin. This value also is the range in which significant toxicity has been documented to occur *in vivo* to human patients (see calculation in *SI Text 1* in *SI Appendix*). Finally, nitridipine fails to block either digitoxin channels or digitoxin-mediated calcium entry into cells. This failure also is paralleled by clinical experience (4). Although other entry mechanisms cannot be excluded, these data together constitute strong evidence that intrinsic calcium channel activity constitutes a biologically important, calcium-dependent toxicity mechanism for digitoxin and other clinically important cardiac glycosides.

The data also are consistent with the concept that the digitoxin structure is directly responsible for the fundamental channel property of selectivity. For example, digitoxin forms biophysically classical channels for which the amplitude and kinetics of digitoxin channels are dependent on whether the bilayer is composed of acidic PS or neutral PC. However, in both cases, digitoxin channels exhibit the same cation selectivity. This behavior stands in contrast to the multimeric triterpenes (avicins) that form highly cation-selective channels in acidic phospholipid bilayers, but show no selectivity whatsoever in neutral phospholipids (20). The avicins, unlike digitoxin, have been interpreted to follow the toroidal model, typical of pore-forming peptides, such as the magainins, melittin, and protegrins (21–23). Thus, it would seem that digitoxin channels are more like the classical channel former alamethacin, which assembles as a multimeric “barrel stave” structure for which

the ion selectivity is independent of phospholipid composition (24, 25). Many other types of sterols are altogether electrically silent (27), further supporting the structural specificity of the digitoxin channel.

As summarized in *SI Fig. 14* in *SI Appendix*, the calcium transport/channel functions of digitoxin can be clearly distinguished from other digitoxin functions that distribute over a wide concentration range. These other functions appear to be nonexclusive. For example, digitoxin blockade of proinflammatory TNF- α /NF- κ B signaling occurs at subnanomolar concentrations (17, 18, 28). This function is therefore unlikely to be dependent on digitoxin calcium channels, which only become active above a threshold of *ca.* 40 nM. Both digitoxin and digoxin have similar calcium channel activities, suggesting that channel activity does not provide an explanation for the reported clinical advantages of digitoxin over digoxin (29, 30). The inhibition of both NaKATPase (13) and the NaKATPase-linked Na/Ca exchanger (5) occur at much higher cardiac glycoside concentrations. Accordingly, a possible role for digitoxin calcium channels in these processes, although less likely, cannot be ruled out. Therefore, we suggest that this insight into the occurrence and function of digitoxin-based calcium channels will serve to promote a better translational understanding of how to manage therapeutic use of these old cardiac glycoside drugs at bedside.

Materials and Methods

Cells and Cell Culture. The immortalized human neuronal cell line GT1-7 (a gift from M. Kawahara, Kyushu University of Health and Welfare, Kyushu, Japan) was cultured in DMEM/Ham's F-12 medium (mixed 1:1), 10% FBS, 2 mM L-glutamine, and 1.5 g/liter Na_2HCO_3 . Rat neuronal PC12 cells were a gift from Gordon Guroff (deceased; National Institutes of Health, Bethesda, MD) and have been continuously maintained in our laboratory since their arrival.

Reagents. Oleandrin (I) was obtained from Indofine. Digitoxin (II), digoxin (III), and digoxigenin 3,12-diAcetyl (VIII) were obtained from Sigma-Aldrich (see ref. 17). Rabbit polyclonal anti-digitoxin antisera (lot no. P4050312) was obtained from Fitzgerald and used at a dilution of 1:200.

Assays of Intracellular-Free Calcium Measurements. To measure the intracellular-free calcium after the addition of digitoxin, cells were plated at a density of 3×10^5 cells per milliliter on glass coverslips coated with Vitrogen collagen (1:100 in PBS) in 24-well plastic plates (Corning). Two days later, cells (when at $\approx 80\%$ confluence) were loaded with the calcium-sensitive probe FURA-2 a.m. at $4 \mu\text{M}$ (Molecular Probes) at 37°C for 25 min in a serum-free BSS medium [135 mM NaCl, 10 mM glucose, 5 mM KCl, 2.5 mM CaCl_2 , 10 mM Na-Hepes, 1.2 mM MgCl_2 (pH 7.2)]. Excess FURA-2 a.m. was removed by rinsing twice with serum-free BSS medium, and intracellular FURA-2 a.m. was allowed to be hydrolyzed for 15 min at 37°C . Cells were optically marked for analysis, and the $[\text{Ca}^{2+}]_i$ followed over time after the addition of different concentrations of digitoxin or other cardiac glycosides. Changes in fluorescence of at least 50 cells were measured simultaneously at 340-nm and 380-nm excitation wavelengths and 510-nm emission wavelength by using an inverted epifluorescence/phase contrast microscope equipped with a low-light level-integrating CCD camera plus microphotometer assembly (InCyT I/P-2 TM Imaging and Photometry System; Intracellular Imaging). The solvent, 0.01% EtOH, was without effect on any of the parameters.

Assays of Cell Viability. To measure the cytotoxicity of digitoxin, cells were incubated in either normal or serum-free medium, to which were added different concentrations of digitoxin. Cell survival was measured 24 h later.

Cell viability was measured by using a colorimetric XTT assay for mitochondria (cell proliferation kit II; Roche Molecular Biochemicals) or by using an LDH release kit for plasma membrane integrity (Roche Molecular Biochemicals).

FACS. For flow-cytometric analysis and cell sorting, PC12 cells were incubated in Annexin V-FITC and binding buffer (Annexin V-FITC apoptosis detection kit; Sigma-Aldrich) for 20 min. The manufacturer's directions were followed in every detail. Cells with different Annexin V-FITC affinity were separated by FACSaria (BD Biosciences). All single cells were included. Low-pressure (30 psi) and low-speed (3,000 events per second) cell-sorting techniques were used for all preparative work.

Planar Lipid Bilayer Methodology. Planar lipid bilayers and ionic current analysis were made as described previously (19, 31). Briefly, a suspension of POPS or palmitoyloleoyl PC (POPC) and POPE (1:1) in *n*-decane was prepared. This suspension was applied to an orifice of ≈ 100 – $120 \mu\text{m}$ in diameter in a Teflon film separating two compartments, 1.2-ml volume each. The ionic solutions in the compartments contained asymmetrical concentrations of CsCl (200_{cis}/50_{trans} mM) or asymmetrical concentrations of CsCl and CaCl_2 (37.5 mM CsCl_{cis} /25 mM CaCl_2_{trans}). The two ionic compartments were electrically connected via agar bridges and Ag/AgCl pellet electrodes to the input of a voltage clamp amplifier. Current was recorded by using a patch-clamp amplifier [Axopatch-1D equipped with a low-noise (CV-4B) headstage; Axon Instruments], and data were stored on computer disk memory. Off-line analysis of the channel activity was carried out by using the software package pClamp (Axon Instruments).

Statistics. All data are presented as the means \pm SEM of three to five experiments. Origin scientific analysis software was used for fitting lines on experimental points and for determining significance levels using Student's *t* test. A single asterisk denotes $P < 0.05$ or $P < 0.001$ as indicated.

ACKNOWLEDGMENTS. This work was supported by National Institutes of Health Grants RO1-DK-53051 and NO-1-HV-28187 (to H.B.P.), the Cystic Fibrosis Foundation (H.B.P.), the Institute for the Study of Aging (H.B.P.), and the Alzheimer's Association of America (N.A.).

- Kelly RA, Smith TW (1996) in *Goodman and Gilman's The Pharmacological Basis of Therapeutics*, eds Hardman JG, et al. (McGraw-Hill, New York), 9th Ed, pp 809–838.
- Roden DM (1996) in *Goodman and Gilman's The Pharmacological Basis of Therapeutics*, eds Hardman JG, et al. (McGraw-Hill, New York), 9th Ed, p 864.
- Schwartz A (1976) Is the cell membrane Na^+K^+ -ATPase enzyme system the pharmacological receptor for digitalis? *Circ Res* 39:2–7.
- Kirch W, Logemann C, Heidemann H, Santos SR, Ohnhaus EE (1986) Effect of two different doses of nitrendipine on steady state plasma digoxin level and systolic time intervals. *Eur J Clin Pharmacol* 31:391–395.
- Altamirano J, et al. (2006) The inotropic effect of cardioactive glycosides in ventricular myocytes requires $\text{Na}^+/\text{Ca}^{2+}$ function. *J Physiol (London)* 575:845–854.
- Bower JO, Mengle, HAK (1936) The additive effects of calcium and digitalis: A warning with a report of two deaths. *J Am Med Assoc* 106:1151–1153.
- Clark AF, Swanson PD, Stahl WL (1975) Increase in dissociation rate constants of cardiotonic steroid-brain (Na^+K^+)-ATPase complexes by reduction of the unsaturated lactone. *J Biol Chem* 250:9355–9359.
- Spiegel A, Marchlinski FE (1985) Time course for reversal of digoxin toxicity with digoxin-specific antibody fragments. *Am Heart J* 109:1397–1399.
- Wenger T, et al. (1985) Treatment of sixty three severely digitalis toxic patients with digoxin-specific antibody fragments. *J Am Coll Cardiol* 5:118A–123A.
- Smith TW, Haber E, Yeatman L, Butler VP, Jr (1976). Reversal of advanced digoxin intoxication with Fab fragments of digoxin-specific antibodies. *New Eng J Med* 294:797–800.
- Bachmaier A, Ebner F, Reiter M (1985) Potassium changes the relationship between receptor occupancy and the inotropic effect of cardiac glycosides in guinea-pig myocardium. *Br J Pharmacol* 85:755–765.
- Ebner F, Korth M, Kuhlkamp V (1986) The reaction of ouabain with the sodium pump of guinea-pig myocardium in relation to its inotropic effect. *J Physiol (London)* 379:187–203.
- Marban E, Tsien RW (1982) Enhancement of calcium current during digitalis inotropy in mammalian heart: Positive feedback regulation by intracellular calcium? *J Physiol (London)* 329:589–614.
- Weingart R, Kass RS, Tsien RW (1978) Is digitalis inotropy associated with enhanced slow inward calcium current? *Nature* 273:389–392.
- Wasserstrom JA, Aistrup GL (2005) Digitalis: New actions for an old drug. *Am J Physiol Heart Circ Physiol* 289:H1781–H1793.
- Wang L, Wible BA, Wan X, Ficker E (2007) Cardiac glycosides as novel inhibitors of human Ether-a-go-go-related gene channel trafficking. *J Pharm Exp Therap* 320:525–534.
- Srivastava M, et al. (2004) Digitoxin mimics CFTR-gene therapy, and suppresses hypersecretion of proinflammatory Interleukin-8 (IL-8) from cystic fibrosis lung epithelial cells. *Proc Natl Acad Sci USA* 101:7693–7698.
- Yang Q-F, et al. (2005) Cardiac glycosides inhibit $\text{TNF}\alpha/\text{NF}\kappa\text{B}$ signaling by blocking recruitment of TRADD to the TNF receptor. *Proc Natl Acad Sci USA* 102:9631–9636.
- Arispe N, Rojas E, Pollard HB (1993) Alzheimer disease amyloid β protein forms calcium channels in bilayer membranes: Blockade by tromethamine and aluminum. *Proc Natl Acad Sci USA* 90:567–571.
- Li XX, Davis B, Haridas V, Guterman JU, Colombini M (2005) Proapoptotic triterpene electrophiles (avicins) form channels in membranes: Cholesterol dependence. *Biophys J* 88:2577–2584.
- Cruciani RA, et al. (1992) Magainin 2, a natural antibiotic from frog skin, forms ion channels in lipid bilayer membranes. *Eur J Pharmacol* 226:287–296.
- Yang L, Harroun TA, Weiss TM, Ding L, Huang HW (2001) Barrel-stave model or toroidal model? A case study on melittin pores. *Biophys J* 81:1475–1485.
- Shai Y, Oren Z (2001) From "carpet" mechanism to de-novo designed diastereomeric cell-selective antimicrobial peptides. *Peptides* 22:1629–1641.
- Boheim G (1974) Statistical analysis of alamethicin channels in black lipid membranes. *J Memb Biol* 19:277–303.
- Cafiso D (1994) Alamethicin: A peptide model for voltage gating and protein-membrane interaction. *Ann Rev Biophys Biomol Struct* 23:141–165.
- Lakshminarayanaiah N (1984) *Equations of Membrane Biophysics* (Academic, Orlando, FL).
- Micelli S, Meleleo D, Picciarelli V, Gallucci E (2004) Effects of sterols on β -amyloid peptide (A β 1–40) channel formation and their properties in planar lipid bilayers. *Biophys J* 86:2231–2237.
- Tabary O, et al. (2006) Calcium-dependent regulation of NF- κ B activation in cystic fibrosis airway epithelial cells. *Cell Signal* 18:652–660.
- Roever C, Ferrante J, Gonzalez EC, Naazneen P, Roetzheim RG (2000) Comparing the toxicity of digoxin and digitoxin in a geriatric population: Should an old drug be rediscovered? *Southern Med J* 93:199–202.
- Belz GG, Breithaupt-Grogler K, Osowski U (2001) Treatment of congestive heart failure—current status of use of digitoxin. *Eur J Clin Invest* 31(Suppl 2):10–17.
- Wonderlin V, French RJ, Arispe N (1988) in *Neuro-Methods Neurophysiological Techniques: Basic Methods and Concept*, eds Boulton A, Baker G, Vanderwolf C (Humana, Clifton, NJ), Vol 14, pp 35–142.