# Distinct mechanisms for activation of  $Cl^-$  and  $K^+$  currents by  $Ca<sup>2+</sup>$  from different sources in mouse sympathetic neurones

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(Received 21 February 2000; accepted after revision 12 June 2000)

- 1. We have investigated the roles of different voltage-dependent  $Ca^{2+}$  channels in the activation of the  $Cl^-$  and  $K^+$  channels responsible for the afterdepolarization (ADP) and slow afterhyperpolarization (AHP) in sympathetic neurones of the isolated mouse superior cervical ganglion in vitro.
- 2. The ADP and its associated  $Ca^{2+}$ -activated Cl<sup> $-$ </sup> current were markedly decreased by  $\omega$ -agatoxin IVA (40-200 nm) and nifedipine (1-10  $\mu$ m), but not by  $\omega$ -conotoxin GVIA  $(300 \text{ nm})$ .
- 3. In contrast, the AHP and the apamin-sensitive  $Ca^{2+}$ -activated K<sup>+</sup> current that underlies this potential were blocked by  $\omega$ -conotoxin GVIA, but were not affected by  $\omega$ -agatoxin IVA and were only slightly reduced by nifedipine.
- 4. Ryanodine (20  $\mu$ M) reduced the Ca<sup>2+</sup>-activated Cl<sup>-</sup> current following an action potential by 75% but on average did not affect the  $Ca^{2+}$ -activated K<sup>+</sup> current.
- 5. Evidence that R-type channels provide a proportion of the  $Ca^{2+}$  activating both types of  $Ca<sup>2+</sup>$ -dependent channel was obtained.
- 6. We conclude that  $Ca^{2+}$  entering through L- and P-type  $Ca^{2+}$  channels preferentially activates the  $Cl^-$  current responsible for the ADP in mouse sympathetic neurones, predominantly via  $Ca^{2+}$ -induced  $Ca^{2+}$  release, whereas the  $Ca^{2+}$  that activates the K<sup>+</sup> channels responsible for the AHP enters predominantly through N\_type channels. The data can be explained by the selective association of each type of  $Ca^{2+}$  channel with particular intracellular mechanisms for activating other membrane channels, one indirect and the other direct, probably located at discrete sites on the soma and dendrites.

In mammalian sympathetic ganglion cells,  $Ca^{2+}$  entry during action potential firing activates  $K^+$  and  $Cl^$ conductances which contribute to slow afterpotentials (McAfee & Yarowsky, 1979; Sacchi et al. 1995; De Castro et al. 1997). In rat superior cervical ganglion (SCG) cells, which exhibit a long afterhyperpolarization (AHP),  $Ca^{2+}$  entry via N-type channels activates apamin-sensitive  $Ca^{2+}$ -activated  $K^+$  channels (SK-type), which are responsible for most of the underlying conductance change (Davies et al. 1996). This conductance has been named  $g_{K, \text{Cat}}$  (Cassell & McLachlan, 1987a), to distinguish it from the slower  $Ca^{2+}$ -dependent conductance  $g_{K,Ca2}$ , which underlies a prolonged AHP in one subclass of sympathetic neurone, and from  $I_{AHP}$ , which differs in kinetic and pharmacological characteristics between several types of central neurone (Sah, 1996). On the other hand, in rat SCG cells, large conductance  $Ca^{2+}$ . activated  $K^+$  channels (BK-type) are in part activated by  $Ca<sup>2+</sup>$  entering through L-type channels, which has no effect on  $g_{K, \text{Cat}}$  (Davies *et al.* 1996). These observations suggest

that  $Ca^{2+}$  entering through a specific channel type during the action potential (AP) is directed predominantly to a particular type of  $K^+$  channel. Recently, N-type and BK-type channels in some cases, and L-type and SK-type channels in others, have been identified in single patches isolated from hippocampal somata, providing direct evidence for colocalization of pairs of functionally linked channels (Marrion & Tavalin, 1998). While the relative locations of  $Ca^{2+}$  and  $K^+$  channels must be crucial in determining the electrical behaviour of neurones, these data imply that particular associations between channels are not necessarily the same for all neurone types. Data from sympathetic neurones have confirmed that, even for this one type of neurone, there are species differences and differences between phenotypically distinct classes of neurone in the way  $Ca^{2+}$  entry is linked to activation of BK and SK channels (Ireland et al. 1998; Davies et al. 1999).

In mouse SCG cells,  $Ca^{2+}$  entry during the AP activates, in addition to  $g_{K, \text{Cat}}$ , a Cl<sup>-</sup> conductance  $(g_{\text{CLCa}})$  that produces an afterdepolarization (ADP; De Castro et al. 1997). When the cell is clamped at  $-55$  mV, this is recorded as an inward current. About  $45\%$  of the high-voltage-activated  $Ca^{2+}$ current evoked by a step depolarization in dissociated mouse SCG somata flows through  $P/Q$ -type channels, 40% through N\_type channels, 10% through L\_type channels and a small proportion through channels resistant to known selective organic antagonists (here called R\_type channels; Namkung et al. 1998). The question then arises as to how  $Ca^{2+}$  entering through these diverse types of voltage-dependent  $Ca^{2+}$ channel during an AP activates the  $Cl^-$  and  $K^+$  conductances.

In this study, we have used pharmacological antagonists to distinguish the origin of the  $Ca^{2+}$  responsible for activation of  $Ca^{2+}$ -dependent afterpotentials in mouse sympathetic neurones. The experiments have utilized recordings from intact mouse SCG neurones, as the distribution of channels on the soma and dendrites is not uniform (e.g. Westenbroek et al. 1998) so that responses from dissociated somata will not necessarily reflect physiological events. Our data indicate that, as in rat SCG cells, the  $K^+$  channels responsible for the slow AHP are activated mainly by  $Ca^{2+}$  entering through N-type channels, whereas Cl<sup>-</sup> channel activation results from  $Ca^{2+}$  entering through L- and P-type  $Ca^{2+}$  channels.  $Ca^{2+}$ induced  $Ca^{2+}$  release from intracellular stores is a major contributor to  $Cl^-$  channel activation but participates in  $K^+$ channel activation in only a subgroup of cells. Some of the results have been presented in abstract form (Mart únez-Pinna et al. 1998).

#### METHODS

The methods used for intracellular and voltage-clamp recording have been described previously (De Castro et al. 1997). Briefly, 5- to 7-week-old male mice (Swiss OF-1) were deeply anaesthetized by an I.p. injection of sodium pentobarbitone  $(40 \text{ mg kg}^{-1})$  and perfused through the heart with cold oxygenated saline. The superior cervical ganglion was taken from the animal and pinned to the Sylgard (Dow-Corning, Midland, MI, USA) bottom of a chamber continuously perfused with saline (mm: NaCl, 128; KCl, 5; CaCl<sub>2</sub>, 2; NaH<sub>2</sub>PO<sub>4</sub>, 1; NaHCO<sub>3</sub>, 16; MgSO<sub>4</sub>, 1·2; and glucose, 5·5) equilibrated with 95%  $O_2-5\%$   $CO_2$  (pH 7·4) at room temperature (22-25 °C). The ganglion was illuminated from one side by a fine fibre optic light source, allowing the cells on the surface to be seen using a microscope  $(\times 375-600)$ . The experimental procedures were in accordance with the guidelines of the ethics committee of the Instituto de Neurociencias de la Universidad Miguel Hernández-CSIC.

Potentials were measured with respect to a  $Ag-AgCl$  pellet submerged in the outflow section of the bath. Cells were impaled with microelectrodes filled with  $3 \text{ M}$  KCl (50–90 M $\Omega$ ) and data were collected only if the neurone generated APs of at least 70 mV in amplitude at the resting potential. The sampling frequency for discontinuous single-electrode current and voltage clamp was  $2-6$  kHz, with a duty cycle of  $30/70$  (Axoclamp 2B, Axon Instruments Inc.). Capacitance compensation was continuously monitored and adjusted to ensure head stage settling. Data were digitized and stored on a computer for subsequent analysis using commercial software (pCLAMP6, Axon Instruments Inc.). After impaling a cell, we waited for the membrane potential to stabilize and then measured the basic electrical properties at the resting membrane potential, including the amplitude and duration of the afterpotentials. Action potential half-width was measured as the duration at half the peak amplitude. Input resistance was calculated from the linear part of the  $I-V$  relationship determined near the end of 200 ms hyperpolarizing current pulses. APs were initiated after a 5 ms depolarizing current pulse or by a train, usually of six pulses at 40 Hz, and the ensuing afterpotentials were examined. To test the effect of the different drugs, we adjusted the membrane potential to  $-55$  mV by passing current in discontinuous currentclamp mode before making measurements of APs and tail currents. Generally, we averaged five sweeps when a single AP was evoked and three when recording a train of discharges. To enable the degree of block to be quantified, cells were selected with relatively large outward tail currents (measures of  $g_{K, Ca1}$ ) or inward tail currents (measures of  $g_{\text{Cl,Ca}}$ ) so that their responses are not necessarily representative of those of all SCG neurones.

Tail currents underlying the afterpotentials were measured using a hybrid clamp protocol in which APs were evoked with depolarizing current pulses and the amplifier was switched to voltage clamp mode, either after repolarization of a single AP, or 10 ms after the end of a brief train at 40 Hz. Tail currents were recorded under voltage clamp at  $-55$  mV after filtering at  $0.3$  kHz and were analysed using commercial software (Origin, Microcal Software Inc., Northampton, MA, USA). After digital smoothing using a 9\_point running average, the peak values were measured and the currents integrated from 20 ms after the peak of the AP in order to derive the amount of charge transferred. To test the effects of increasing  $Ca^{2+}$  loads on the current underlying the ADP, we could not use trains of  $> 10$  APs because large ADPs were generated that reduced AP amplitude by inactivating  $\mathrm{Na}^+$  currents. Therefore, for these experiments, the cells were voltage clamped in the presence of  $1 \mu$ M TTX and 100 nM apamin and trains of 5 ms pulses (to 0 mV) from a holding potential of  $-55$  mV) of varying duration at  $40$  Hz were applied. All values are expressed as means  $\pm$  s.E.M. Statistical comparisons were made using Student's paired  $t$  test (Sigmastat, Jandel Scientific Software, Erkrath, Germany).

All drugs were obtained from Sigma, except nifedipine (RBI, Natick, MA, USA) and  $\omega$ -agatoxin IVA (Peptides International, KY, USA), and were applied dissolved in the perfusing solution. Cytochrome c  $(0.1 \text{ mg m}]^{-1}$  was added to the toxin stock solutions to saturate nonspecific peptide binding to the apparatus. Care was taken when using nifedipine to protect it from breakdown by light. The antagonists were used at concentrations that are relatively selective for different channel types.  $\omega$ -Conotoxin GVIA blocks N-type channels quite selectively with an  $IC_{50}$  of 1-40 nm (Regan et al. 1991; Boland et al. 1994).  $\omega$ -Agatoxin IVA blocks both P- and Q-type channels but with very different  $IC_{50}$  values of  $1-20$  nm and  $\sim 100$  nm, respectively (Mintz et al. 1992; Randall & Tsien, 1995). Dihydropyridines block neuronal L\_type channels with an IC<sub>50</sub> of 0·3-2  $\mu$ M (Jones & Jacobs, 1990; Regan *et al.* 1991). We usually applied a relatively high concentration of 10  $\mu$ M, which is commonly used in intact neurones to ensure full blockade. This concentration has no non-specific actions in rat SCG cells (Davies et al. 1996). It should be noted, however, that 1 and 10  $\mu$ M nifedipine had similar effects in the present experiments. Application of the drugs or toxins had significant effects on the input resistance, time constant, the holding current required to maintain the resting potential at  $-55$  mV or the amplitude and duration of the AP only in the cases that are noted specifically.

## RESULTS

#### Properties of SCG neurones of the mouse

The electrical properties of 71 mouse SCG neurones measured in control solution were: resting membrane potential,  $-51 + 1.0$  mV; AP amplitude,  $99 + 1.2$  mV; AP half-width,  $2.4 \pm 0.1$  ms; input resistance,  $54 \pm 3.1$  M $\Omega$ ; capacitance,  $171 \pm 10$  pF; and time constant,  $8.6 \pm 0.6$  ms.

Depolarizing and hyperpolarizing afterpotentials following AP firing varied greatly between neurones. In all cells, the fast AHP after repolarization of the AP was followed by a slow AHP (Fig.  $1B$ ). The slow AHP was separated from the fast AHP by a depolarizing inflection in 22% of the cells (Fig.  $1B$ , arrow) including those cells  $(6\%)$  in which the peak of this inflection was positive to the resting membrane potential, i.e. an ADP (Fig. 5Aa; see also De Castro et al.

#### Figure 1.  $Ca^{2+}$ -dependent afterpotentials in mouse sympathetic ganglion cells

Records from a neurone in the superior cervical ganglion. A, addition of 500  $\mu$ M Cd<sup>2+</sup> reduced action potential (AP) half-width without affecting its amplitude.  $B$ , addition of  $Cd^{2+}$  abolished the depolarizing inflection following AP repolarization (arrow) and markedly reduced the afterhyperpolarization (AHP) following a single AP. C, addition of  $Cd^{2+}$  abolished the afterdepolarization (ADP) and reduced the AHP after a train of six APs at 40 Hz. APs in B and C are truncated (as in subsequent figures) and traces in control and test solutions have been superimposed with labels placed closest to the relevant trace. In these, and in the current-clamp records in subsequent figures, the dashed line indicates the baseline membrane potential, which was maintained close to  $-55$  mV by passing current through the microelectrode.

1997). In all but six of the remaining cells, the transition from fast to slow AHP was marked by a change in the rate of depolarization (Fig.  $2Ba$ , arrow). A train of six APs at 40 Hz generated an ADP followed by a slow AHP in 46% of cells (Fig.  $1C$ ; see also De Castro *et al.* 1997). In another 31% of cells, the membrane potential at the end of the train was more positive than the initial fast AHP (Fig.  $3Ab$ ), indicating that a depolarizing conductance had been activated during the train. In the remaining cells, the train generated a slow AHP that built up from the fast AHP. Thus, the relative magnitude of the conductances underlying the AHP and ADP differed between cells.

#### Afterpotentials depend on  $Ca<sup>2+</sup>$  entry

As in other mammalian SCG cells (Adams & Harper, 1995), blockade of Ca<sup>2+</sup> entry by addition of Cd<sup>2+</sup> (100-500  $\mu$ M) to the perfusate  $(n = 9)$  abolished both of the slower after-



	Single action potential		Action potential train	
	Current peak	Total charge	Current peak	Total charge
	(nA)	(pC)	(nA)	(pC)
Apamin $(n=6)$	$-0.08 + 0.03$	$-6.7 + 3.7$	$-1.7 + 0.4$	$-279+69$
$\text{Apamin} + \omega \text{Cgtx}$ GVIA	$-0.09 + 0.04$	$-8.6 + 5.1$	$-1.5 \pm 0.4$	$-255 \pm 80$
Apamin $(n=10)$	$-0.11 \pm 0.01$	$-8.4 \pm 0.9$	$-2.0 \pm 0.3$	$-334+58$
Apamin + $\omega$ Aga IVA	$-0.06 + 0.01**$	$-3.5 + 0.9$ **	$-1.2 + 0.2**$	$-165 + 36$ **
Apamin $(n=9)$	$-0.22 + 0.06$	$-20.9 + 7.6$	$-3.0 + 0.6$	$-490 + 119$
$\text{Apamin} + \text{nifedipine}$	$-0.09 + 0.03$ **	$-6.6 + 2.6*$	$-1.5 + 0.4$ **	$-184 + 53$ **
Apamin $(n=5)$	$-0.24 \pm 0.05$	$-30.9 \pm 7.9$	$-2.8 \pm 0.9$	$-481 \pm 158$
$\text{A}\text{pamin} + \text{ryanodine}$	$-0.09 + 0.05*$	$-7.6 + 4.4*$	$-2.2 + 0.8*$	$-319+131*$

 Table 1. Effect of  $\omega C$ gtx GVIA,  $\omega$ Aga IVA, nifedipine and ryanodine on  $g_{CL,Ca}$  in the presence of apamin

Tail currents after a single action potential or after a train of six action potentials at 40 Hz were recorded in voltage clamp at a holding potential of  $-55$  mV. Inward  $Ca^{2+}$ -activated Cl<sup>-</sup> currents were isolated by blocking  $g_{K,Ca1}$  with 100 nM apamin. Changes after adding nifedipine (10  $\mu$ M),  $\omega$ Cgtx GVIA (300 nM),  $\omega$ Aga IVA (40 nM) or ryanodine (20  $\mu$ M) were compared using Student's paired t test (\*P < 0.05; \*\* $P < 0.01$ ).

 Table 2. Effects of  $\omega C$ gtx GVIA,  $\omega$ Aga IVA, nifedipine and ryanodine on  $g_{K, Ca1}$  in the presence of 9AC

	Single action potential		Action potential train	
	Current peak	Total charge	Current peak	Total charge
	(nA)	(pC)	(nA)	(pC)
$9AC(n=5)$	$0.32 + 0.06$	$41.9 + 12.4$	$0.72 + 0.08$	$190 + 31$
$9AC + \omega Cgtx$ GVIA	$0.14 + 0.03**$	$12 \cdot 1 + 4 \cdot 2^*$	$0.46 + 0.08*$	$111 + 31$ **
$9AC (n = 5)$	$0.47 + 0.06$	$75.5 + 16.7$	$0.80 + 0.08$	$329 + 48$
$9AC + \omega$ Aga IVA	$0.46 + 0.05$	$74.0 + 11.4$	$0.90 + 0.08$	$371 + 36$
$9AC (n = 11)$	$0.44 + 0.03$	$62.2 + 4.8$	$0.87 + 0.05$	$290 + 24$
$9AC + nifedipine$	$0.41 + 0.03$	$50.0 + 5.3*$	$0.94 + 0.07$	$277 + 21$
$9AC (n = 7)$	$0.39 + 0.03$	$82.7 + 17.7$	$0.66 + 0.07$	$352 + 64$
$9AC + \text{ryanodine}$	$0.33 + 0.03$	$60.6 + 8.0$	$0.63 + 0.09$	$298 + 47$

Tail currents after a single action potential or after a train of six action potentials at 40 Hz were recorded in voltage clamp at a holding potential of  $-55$  mV. Outward  $Ca^{2+}$ -activated K<sup>+</sup> currents were isolated by blocking  $g_{\text{CLCa}}$  with 2 mm 9AC. Changes after adding nifedipine (10  $\mu$ m),  $\omega$ Cgtx GVIA (300 nm),  $\omega$ Aga IVA (40 nM) or ryanodine (20  $\mu$ M) were compared using Student's paired t test (\*P < 0·05; \*\*P < 0·01).

potentials (when present) after a single AP (Fig.  $1B$ ) or a train of APs (Fig. 1C).  $Cd^{2+}$  also produced a 32% decrease in AP half-width (Fig. 1A; control,  $2 \cdot 2 \pm 0.20$  ms; Cd<sup>2+</sup>,  $1.5 \pm 0.10$  ms;  $P < 0.01$ ).

#### Blockade of SK channels with apamin reveals  $g_{\text{CLCa}}$

As in the rat SCG (Kawai & Watanabe, 1986), apamin (100 nm) largely abolished the slow AHP (Fig. 2A). In  $52\%$ of 37 cells, addition of apamin to the control solution revealed an ADP after a single AP (Fig.  $2Aa$ ) and the same occurred after a train of APs in all but one cell, including those neurones in which only an AHP was detected in control solution. Apamin increased the amplitude and duration of ADPs after a train (Fig. 2Ab), generating repetitive discharges in 11 cells. In contrast, very rarely one or two APs occurred during a large ADP in control solution. These data indicate that, in most cells that lacked an ADP in control solution, activation of the Cl<sup>-</sup> conductance after a single discharge was obscured by the  $K^+$  conductance underlying the AHP.

When the cells were voltage clamped in control solution, the currents recorded at  $-55$  mV after an AP had different shapes due to the variable amounts of inward  $Cl^-$  and outward  $K^+$  conductances. There was usually an early inward inflection or plateau in the outward current after a single AP (Fig.  $2Ac$  and  $Bc$ ) but, after a train, a small net



Figure 2. Apamin and 9AC reveal the Cl<sup>-</sup> and  $K^+$  currents underlying afterpotentials

Responses following a single AP are shown on the left  $(a)$  and after a train of six APs at 40 Hz on the right  $(b)$  in this and subsequent figures. A, in one cell, addition of apamin  $(100 \text{ nm in this and subsequent figures})$ abolished the slow AHP, revealing an ADP after one AP  $(a)$  and enhancing the ADP after a train of six APs at 40 Hz  $(b)$ . In the same neurone, outward tail currents following a single AP  $(c)$  or a train of APs  $(d)$ were blocked by apamin, revealing inward tail currents.  $B$ , in another cell, addition of  $9AC (2 \text{ mm in this})$ and subsequent figures) reduced the depolarizing inflexion in the AHP after a single AP  $(a)$  and the small ADP following a train of APs (b), enhancing the AHP. Arrow points to the transition from fast to slow AHP. In the same neurone, 9AC blocked the inward currents after a single AP (c) and after a train of APs  $(d)$ , enhancing the outward tail currents. In these, and in voltage-clamp records in the following figures, the dashed line indicates the holding current needed to keep the membrane potential at  $-55$  mV. In this, and in the following figures except Fig.  $5Ab$ , the trains consisted of six APs at 40 Hz.

inward current of variable amplitude was generated and was followed by an outward current (Fig. 2Ad and Bd). In the presence of apamin  $(100 \text{ nm})$ , the outward tail currents were largely blocked, revealing a clear inward current after one AP (Fig. 2Ac) and increasing markedly the inward current that followed a train (Fig.  $2Ad$ ). The enhancement of the inward current after a train resulted in as much as 40 times the total charge transfer as that following a single AP (Table 1).

Thus application of 100 nM apamin reveals the inward  $Cl^$ current, providing a measure of the  $Ca^{2+}$ -activated Cl<sup>-</sup> conductance,  $g_{CLCa}$  (see Introduction). In all the voltageclamp experiments on  $g_{\scriptstyle{\text{Cl,Ca}}}$  described below, 100 nM apamin was present throughout.

In 14 cells in which electrical properties were measured in control solution, apamin decreased the holding current needed to keep the resting membrane potential at  $-55$  mV (from  $-0.43 \pm 0.10$  to  $-0.29 \pm 0.09$  nA,  $P < 0.05$ ) and also increased input resistance (from  $43 \pm 4$  to  $60 \pm 8$  M $\Omega$ ,  $P < 0.05$ ). Apamin also increased AP amplitude (from  $94 \pm 2$  to  $101 \pm 2$  mV,  $P < 0.01$ ) but reduced AP duration (from  $2.6 \pm 0.16$  to  $2.3 \pm 0.13$  ms,  $P < 0.01$ ). These results suggest that apamin blocks a  $K^+$  conductance that is active at  $-55$  mV. Such a conductance was not detected in rat (Davies et al. 1996) or guinea-pig (Ireland et al. 1998) sympathetic neurones.

# Blockade of Cl<sup>-</sup> channels with 9AC reveals  $g_{K,Ca1}$

As reported previously (De Castro et al. 1997), addition of the  $Cl^-$  channel blocker anthracene-9-carboxylic acid (9AC;  $2 \text{ mm}$ ,  $n = 21$ ) substantially reduced the amplitude of the ADP, increasing the amplitude and duration of the AHP (Fig. 2Ba and b) and the outward current carried by  $g_{K, Ca1}$ 



Figure 3. N-type  $Ca^{2+}$  channels contribute to activation of the AHP but not the ADP

A, in one cell, addition of 300 nm  $\omega$ Cgtx GVIA reduced the AHP, therefore increasing the ADP. B, averaged inward currents from six cells in the presence of apamin showed little variation when  $\omega Cgtx$ GVIA was added. C, averaged outward currents from five cells in the presence of 9AC were reduced when  $\omega$ Cgtx GVIA was added.

(Fig.  $2Bc$  and d). In general, the degree of block produced by 9AC was more marked after a single AP than after a train. The enhancement of the outward current after the train resulted in about 4 times as much total charge transfer as that following a single AP (Table 2).

Thus, application of 2 mm 9AC reveals the outward  $K^+$ current, providing a measure of the  $Ca^{2+}$ -activated K<sup>+</sup> conductance  $g_{K, \text{Cat}}$  (see Introduction). In all the voltageclamp experiments on  $g_{K,Ca1}$  described below, 2 mm 9AC was present throughout.

## N-type Ca<sup>2+</sup> channel block has no effect on  $g_{\text{Cl,Ca}}$  but reduces  $g_{K,Ca1}$

The N-type channel antagonist  $\omega$ -conotoxin GVIA ( $\omega$ Cgtx GVIA, 300 nM) decreased the AHP in all cells tested ( $n = 9$ , Fig.  $3Aa$ ) and increased the ADP following a train of APs (Fig. 3Ab). On average, the membrane voltage measured at the end of the train shifted from  $-2.4 \pm 6.1$  mV to  $4.2 \pm$ 5.6 mV ( $P < 0.001$ ). These results suggest that blockade of  $Ca<sup>2+</sup>$  entry through N-type channels decreased activation of  $g_{K, \text{Ca}_1}$ , as occurs in rat SCG neurones (Davies *et al.* 1996), allowing for a greater effect of  $g_{\text{Cl,Ca}}$  in depolarizing the membrane following AP discharge.

N-type channels were not involved in the activation of  $g_{\text{CLCa}}$ because 300 nm  $\omega$ Cgtx GVIA had no significant effect on the mean inward current evoked after a single AP or a train of APs  $(n = 6; Fig. 3B$  and Table 1; see also Fig. 11A).

In contrast,  $\omega$ -Cgtx GVIA reduced  $g_{K, \text{Ca}_1}$ , the effect being larger on the outward tail current evoked by a single AP (Fig.  $3Ca$ ) than on that following a train (Fig.  $3Cb$ ), when measured as either charge transfer or mean peak outward current ( $n = 5$ ; Table 2; see also Fig. 11B). Thus,  $Ca^{2+}$ entering through N-type channels activates  $g_{K,Cat}$ .



Figure 4. P-type  $Ca^{2+}$  channels contribute to activation of the ADP but not the AHP

A, in one cell, addition of  $\omega$ Aga IVA (40 nM) decreased the ADP, therefore increasing the AHP. B, averaged inward currents from 10 cells in the presence of apamin were partially blocked by  $\omega A$ ga IVA. C, averaged outward currents from five cells in the presence of  $9AC$  showed little variation when  $\omega$ Aga IVA was added.

## P-type Ca<sup>2+</sup> channel block reduces  $g_{CLCa}$  but has no effect on  $g_{K,\text{Ca1}}$

Relatively selective blockade of P\_type channels can be achieved by using  $\omega$ -agatoxin IVA ( $\omega$ Aga IVA) at concentrations  $< 50$  nm, as the IC<sub>50</sub> for Q-type channels is  $\sim$ 100 nM (Randall & Tsien, 1995). Application of  $\omega$ Aga IVA  $(40 \text{ nm}, n = 3)$  always enhanced the AHP, particularly after a train of APs (Fig.  $4A$ ), suggesting that P-type channel block reduces the activation of  $g_{\text{Cl,Ca}}$  without having much effect on  $g_{K,Ca1}$ .

In 10 cells,  $40 \text{ nm}$   $\omega$ Aga IVA decreased peak inward current by 45% and charge transfer by about 60% after a single AP, the effect being slightly smaller after a train (Fig.  $4B$  and Table 1; see also Fig. 11A). The peak inward current after a single AP was not affected by  $20 \text{ nm } \omega$ Aga IVA whereas peak current was reduced by 53% and charge transfer by 61% in 200 nm  $\omega$ Aga IVA (n = 3). This latter change was not significantly different from the effect of  $40 \text{ nm}$   $\omega$ Aga IVA, suggesting that the toxin's action was more likely to have occurred by blockade of P-type than Q\_type channels.

In contrast outward currents were not decreased by 40 nm  $\omega$ Aga IVA in any of the five cells studied (Fig. 4C and Table 2; see also Fig. 11B). These data indicate that  $Ca^{2+}$ entering through P-type channels has no effect on  $g_{K,Cat}$ .

## L-type Ca<sup>2+</sup> channel block reduces  $g_{\text{Cl,Ca}}$  but has little effect on  $g_{\text{K}}$  Ca1

In 12 cells, the L-type  $Ca^{2+}$  channel antagonist nifedipine  $(10 \mu M)$  reduced or abolished the ADP that followed APs (Fig. 5A). In contrast, the peak amplitude of the slow AHP increased, consistent with the majority of the  $Ca^{2+}$  for



Figure 5. L-type  $Ca^{2+}$  channels contribute to activation of the ADP but have little effect on the AHP A, addition of 10  $\mu$ M nifedipine abolished the ADP revealing an AHP after one AP (a) and reduced the ADP without affecting AHP amplitude after a train of 13 APs (b). B, averaged inward currents from nine cells in apamin were reduced when nifedipine was added. C, averaged outward currents from 11 cells in the presence of 9AC showed, when nifedipine was added, a small decrease after a single AP (a) and a change in the time course after a train of APs (b).

activation of the slow AHP entering through channels other than L-type ones.

The amplitude and duration of  $g_{\text{Cl,Ca}}$  were substantially reduced by 10  $\mu$ M nifedipine (n = 9), both after a single AP and after a train (Fig.  $5B$  and Table 1; see also Fig. 11A). These results suggest that, during an AP, the great majority of  $Ca^{2+}$  entering through L-type channels is directed towards activation of Cl<sup> $-$ </sup> channels with little effect on  $g_{K, \text{Cat}}$ .

In agreement with this idea, nifedipine  $(n = 11)$  had no significant effect on the peak amplitude of the outward current after a single AP, although it produced a small significant reduction in charge transfer (Fig.  $5Ca$  and Table 2; see also Fig. 11B). There was no significant effect after a train of APs (Table 2). However, the responses to nifedipine differed between cells, which could be separated into two distinct groups on the basis of the time course of decay of  $g_{K, \text{Cat}}$  (Fig. 6). In six of the 11 cells (type I), outward currents initially fell either above (Fig.  $6Aa$ ) or on the exponential fitted to the later decay of  $g_{K, Ca1}$ . In the remaining five cells (type II), there was a plateau during the early part of the outward current, so that the data fell below the extrapolated exponential (Fig.  $6Ba$ ; see also Fig. 8Ca). In type I cells, nifedipine had no significant effect on  $g_{K, \text{Cat}}$  after one AP and produced a small increase in the peak outward current after a train (from  $0.87 \pm 0.09$  to  $1.00 \pm 0.08$  nA,  $P < 0.05$ ). This increase could be due to concurrent block of residual  $g_{CLCa}$  (due to incomplete block by 9AC). In type II cells, nifedipine decreased  $g_{K, Ca1}$  after one AP (Fig.  $6B$ ), blocking  $35\%$  of the charge transfer (from 69  $\pm$  6 to 45  $\pm$  10 pC, P < 0.05) and 17% of the peak current (from  $0.42 \pm 0.04$  to  $0.35 \pm 0.06$  nA,  $P < 0.05$ ), but had no significant effect on  $g_{K, \text{Cat}}$  after a train. This suggests that, with low  $Ca^{2+}$  loads, such as those generated by a single AP, L-type channels are involved in the activation of  $g_{K, \text{Ca}_1}$  only in type II SCG neurones but not in type I neurones.

## Ryanodine reduces  $g_{\rm Cl,Ca}$  but has little effect on  $g_{\rm K,Ca1}$ To investigate the contribution of  $Ca^{2+}$ -induced  $Ca^{2+}$  release (CICR) in the activation of  $g_{\text{Cl,Ca}}$  and  $g_{\text{K,Ca1}}$ , we applied ryanodine (20  $\mu$ M), which blocks Ca<sup>2+</sup> release from intracellular stores (Meissner, 1994).

Ryanodine  $(n = 5)$  markedly decreased the inward current following an AP and to a lesser extent that following a train (Figs 7A and 11A, Table 1). This suggests that, after a single AP,  $g_{CLCa}$  is activated predominantly by CICR but, as



Figure 6. L-type Ca<sup>2+</sup> channels contribute to activation of  $g_{K, Ca1}$  in a subgroup of neurones

Two groups of cells were identified on the basis of the time course of the outward current recorded in the presence of 9AC. A, response of type I cells. When an exponential function was fitted to the outward current, starting 150 ms after the AP (continuous line), and extrapolated to the initial part (dotted line in this and subsequent figures), the outward current of type I cells either fitted the exponential well or initially fell above it (a). When 10  $\mu$ M nifedipine was added, the outward current from a type I cell was not affected after one AP  $(a)$  and showed a small increase in peak current after a train  $(b)$ . B, response of type II cells. The outward current of type II cells initially fell below the extrapolated exponential (a). In one type II cell, nifedipine markedly reduced  $g_{K\text{Cat}}$  after one AP (a) and had a smaller effect on the latter part of the current after a train (b).

intracellular  $Ca^{2+}$  concentration increases, the proportion of  $Cl^-$  channels activated directly by  $Ca^{2+}$  entering the cell also increases. When the cells were challenged with pulse trains of increasing duration, the proportion of the peak inward current blocked by ryanodine decreased from about 75% for a single pulse to about 35% for the longer trains  $(n = 5)$ ; Fig. 7B). Thus, CICR plays an important role in activating  $g_{\text{CLCa}}$  when intracellular Ca<sup>2+</sup> concentration is low (i.e. in the physiological range).

In contrast, ryanodine did not significantly affect the averaged outward currents  $(n = 7)$  recorded in 9AC (Fig. 8A) and Table 2; see also Fig.  $11B$ ). However, if the above criteria were used to separate the cells on the basis of the decay of  $g_{\text{K Ca1}}$ , the responses to ryanodine differed between type I and type II cells. In four type I cells, ryanodine had no significant effect (Fig.  $8B$ ) but in three type II cells (Fig.  $8C$ ) ryanodine clearly decreased the outward current after one AP (charge transfer,  $46 \pm 1.1\%$  block,  $P < 0.01$ ) and to a smaller degree after a train  $(32 \pm 7.0\%$  block,  $P < 0.05$ ). This suggests that CICR contributes to activation of  $g_{K, \text{Cat}}$ only in type II cells, in which it delays the decline in the outward current after an AP, whereas  $g_{K, CaI}$  is probably activated directly by  $Ca^{2+}$  entering through N-type channels in type I cells.

The effects of ryanodine on  $g_{\text{Cl,Ca}}$  and on  $g_{\text{K,Ca1}}$  in type II cells were almost identical to those of nifedipine. In other cell types, activation of CICR commonly occurs via the  $Ca^{2+}$ that enters through L-type channels (Shoshan-Barmatz  $\&$ Ashley, 1998). We therefore tested the effects of adding ryanodine on the residual  $g_{\text{Cl,Ca}}$  and  $g_{\text{K,Ca1}}$  that remained after application of 10  $\mu$ M nifedipine. In four cells, nifedipine blocked  $g_{\text{CLCa}}$  as described above, but subsequent application of ryanodine produced no significant change in  $g_{CLCa}$ (Fig. 9A). Similarly, nifedipine decreased  $g_{K,Ca1}$  in four type II cells, but ryanodine did not reduce the current further (Fig. 9B). Thus,  $Ca^{2+}$  entry through L-type channels triggers the ryanodine-sensitive mechanism that activates  $g_{\text{Cl,Ca}}$  and, in type II cells,  $g_{\text{K,Ca1}}$ .

## Resistant Ca<sup>2+</sup> channels contribute to both  $g_{CLCa}$  and  $g_{\rm K,Ca1}$

Because the degree of block of  $g_{\text{CLCa}}$  was similar (about 65%) when either P- or L-type channels were blocked, we examined whether R-type channels were involved in the activation of  $g_{\text{Cl,Ca}}$  by applying both  $\omega$ Aga IVA (40–200 nm) and nifedipine  $(1-10 \mu\text{m})$  in the presence of 100 nm apamin  $(n = 4)$ . After a single AP, charge transfer was blocked by about 70% and peak current by about 65%, whereas after a train, block was about 70 and 60%, respectively (Figs 10A



Figure 7.  $Ca^{2+}$ -induced  $Ca^{2+}$  release contributes to activation of  $g_{C1,Ca}$ 

A, averaged inward currents from five cells in the presence of apamin were markedly reduced after one AP when 20  $\mu$ M ryanodine was added (a) but less so after a train (b). B, mean inward currents from five cells following 5 ms depolarizing pulses (to 0 mV from  $-55$  mV) applied at 40 Hz, plotted against the number of pulses in the train. The reduction in peak current was larger (75%) when one or two pulses were applied than when the train was prolonged (35%). Note the logarithmic ordinate. Error bars show s.e.m.

and 11A). Given the lack of effect of N\_type channel blockers on  $g_{\text{Cl Ca}}$ , this result indicates that R-type channels contributed to activation of the inward current.

To test whether  $Ca^{2+}$  entering through R-type channels also activates  $g_{K, \text{Cat}}$ , we applied nifedipine (10  $\mu$ M) and  $\omega$ Cgtx GVIA (300 nm) in the presence of 2 mm 9AC  $(n = 3)$ . Overall block of the outward current was much greater after a single AP (charge transfer about 85%, peak current about 75%) than after a train (charge transfer about 50%, peak current 30%; Figs  $10B$  and  $11B$ ), but there was clearly a fraction of  $g_{K, \text{Cat}}$  resistant to both drugs, even after a single AP, because  $300 \mu \text{m} \text{Cd}^{2+}$  blocked the remaining current. Since P-type channel block did not affect  $g_{K, Ca1}$ , this result suggests that  $Ca^{2+}$  entry through R-type channels contributes to activation of  $g_{K,Ca1}$ .

### DISCUSSION

Our main conclusion is that activation of the  $Cl^$ conductance  $(g_{\text{Cl,Ca}})$  responsible for the ADP following APs in mouse SCG neurones involves  $Ca^{2+}$  entering through Pand L-type channels and acting via  $Ca^{2+}$  release from ryanodine-sensitive intracellular stores. In contrast, the  $K^+$ conductance responsible for the slow AHP  $(g_{K, Ca1})$  is activated predominantly by  $\mathrm{Ca}^{2+}$  entering through N-type channels. Assuming that our pharmacological tools provide selective and complete blockade, we can conclude that a smaller proportion of both currents is activated directly by  $Ca^{2+}$ entering through R-type channels.

These conclusions rest on the assumption that nifedipine,  $\omega$ Cgtx GVIA and  $\omega$ Aga IVA did not directly block Cl<sup>-</sup> or  $K^+$  channels. None of these drugs had effects on AP amplitude or passive properties, indicating that they do not



Figure 8. Ca<sup>2+</sup>-induced Ca<sup>2+</sup> release contributes to activation of  $g_{K, Ca1}$  only in type II cells A, ryanodine (20  $\mu$ M), applied after 9AC, had no significant effect on the averaged outward currents from seven cells. When the cells were separated into two groups as in Fig. 6, ryanodine did not significantly affect the averaged outward currents from four type I cells (B) but decreased  $g_{K, Ca1}$  in three type II cells (C) after a single  $AP(a)$  and after a train  $(b)$ .



Figure 9.  $Ca^{2+}$ -induced  $Ca^{2+}$  release is activated by  $Ca^{2+}$  entering through L-type channels A, averaged inward tail currents from four cells in the presence of apamin were decreased by  $10 \mu$ M

nifedipine, but showed no significant reduction when  $20 \mu$ M ryanodine was added. B, averaged outward tail currents from four type II cells were decreased by nifedipine, but not by subsequent addition of ryanodine.



Figure 10. R-type channels contribute to activation of the currents underlying afterpotentials

A, averaged inward tail currents from four cells in the presence of apamin were markedly reduced, but not completely abolished, in the presence of 40 nm  $\omega$ Aga IVA and 10  $\mu$ m nifedipine. B, averaged outward tail currents from three cells in the presence of 9AC were markedly reduced, but not completely blocked, in the presence of 10  $\mu$ M nifedipine and 300 nM  $\omega$ Cgtx GVIA. Subsequent addition of 300  $\mu$ M Cd<sup>2+</sup> blocked the remaining outward currents.

 $\overline{A}$ 



Figure 11. Percentage block of  $Ca^{2+}$ -activated Cl<sup>-</sup> and K<sup>+</sup> conductances following different treatments suggests the mechanisms of their activation by APs

Changes in  $g_{\text{Cl,Ca}}$  (A) and changes in  $g_{\text{K,Ca1}}$  (B) (measured as total charge transfer) produced by  $\omega$ Cgtx GVIA,  $\omega$ Aga IVA, nifedipine and ryanodine (see also Tables 1 and 2).  $\square$ , effect after a single AP;  $\mathbb{S}$ , effect following a train. Data were obtained in the presence of  $100 \text{ nm}$  apamin (A) or 2 mm 9AC (B). Error bars indicate s.e.m. Statistically significant comparisons between different groups are indicated. All changes were significantly different from control (in the absence of any  $Ca^{2+}$  current blocker) except those marked  $*$ (see Tables 1 and 2).  $g_{CLCa}$  was blocked to a similar extent by all treatments except  $\omega$ Cgtx GVIA. The data suggest that  $Ca^{2+}$  from P- and L-type channels must act together to release  $Ca^{2+}$  from intracellular stores that, in turn, activates  $CI^-$  channels underlying the ADP. In contrast,  $\omega Cgx$  GVIA markedly reduced  $g_{K, \text{Cat}}$ , suggesting a direct link between  $\text{Ca}^{2+}$  entering through N-type channels and SK channels underlying the AHP. A small amount of  $Ca^{2+}$  entry through L-type channels also contributes to activation of SK channels in type II cells. See text for further discussion.

interfere with  $Na<sup>+</sup>$  currents or most  $K<sup>+</sup>$  currents as previously shown in rat SCG neurones (Davies et al. 1996). This is in agreement with the known specificity of  $\omega$ Cgtx GVIA for N-type  $Ca^{2+}$  channels (Olivera *et al.* 1994) and of  $\omega$ Aga IVA for P/Q-type channels (Randall & Tsien, 1995). Also, ryanodine did not directly affect  $Ca^{2+}$ , K<sup>+</sup> or Cl<sup>-</sup> channels because AP shape and input resistance were not modified. Furthermore, the currents generated by  $g_{K, CaI}$  in type I cells were not reduced in the presence of ryanodine.

## Activation of  $g_{\text{Cl,Ca}}$

Our results after blocking  $g_{K, CaI}$  with apamin demonstrate that most, if not all, normal mouse SCG neurones express  $g_{CLCa}$ , as suggested by De Castro *et al.* (1997). Also, when 9AC was applied to cells that apparently lacked an ADP, the AHP became larger, indicating that blockade of  $g_{CLCa}$ allowed  $g_{K, \text{Cat}}$  to hyperpolarize the membrane further.

The function of  $g_{\text{Cl,Ca}}$  in sympathetic neurones is not clear (e.g. Sánchez-Vives & Gallego, 1994). When SK channels were blocked with apamin, the ADP often generated APs, which is very rare in control solution (Sánchez-Vives & Gallego, 1994; De Castro *et al.* 1997). This suggests that decreases in the AHP, either indirectly following inhibition of N\_type channels by e.g. catecholamines and neuropeptides (Toth & Miller, 1995), or directly following inhibition of SK-type channels by e.g. muscarinic agonists (Cassell  $\&$ McLachlan, 1987b), might lead to repetitive discharge. Thus the  $Cl^-$  conductance underlying the ADP is expressed to a greater or lesser extent in all mouse SCG neurones where it could play a role in generating bursts of activity. However, this mechanism to increase firing appears to be absent from normal sympathetic neurones of other species (Cassell & McLachlan, 1987 $a$ ; Sánchez-Vives & Gallego, 1994).

Activation of  $g_{CL,Ca}$  was dependent on  $Ca^{2+}$  entering through  $L$ -, P- and R-type channels (Fig. 11A). Functional coupling between L-type channels and Cl<sup>-</sup> channels in sensory neurones has been previously implied by the potentiation of  $Cl^-$  tail currents by BayK8644, an L-type channel agonist (Scott et al. 1988). Although L- and N-type channels have been implicated in the activation of  $Ca^{2+}$ -dependent Cl<sup>-</sup> currents in rabbit parasympathetic neurones (Akasu et al. 1990),  $\omega$ Cgtx GVIA did not affect  $g_{\text{Cl,Ca}}$  in mouse SCG neurones.

After one AP,  $g_{\text{Cl,Ca}}$  was blocked by about 70% by ryanodine (Fig. 11A), indicating that CICR plays an important role in its activation. The fact that either L\_ or P-type channel blockade reduced  $g_{\text{Cl,Ca}}$  by approximately the same amount (Fig. 11A) suggests that  $Ca^{2+}$  entering through these channels activates CICR. The lack of effect of ryanodine on  $g_{\text{Cl,Ca}}$  and  $g_{\text{K,Ca1}}$  when applied after nifedipine confirms this for L\_type channels, as has been shown in muscle cells (Shoshan-Barmatz  $&$  Ashley, 1998) and some neurones (Osmanovic & Shefner, 1993; Tanabe et al. 1998; Cordoba-Rodriguez et al. 1999). It appears, however, that both L- and P-type channels are needed simultaneously to trigger CICR in mouse SCG neurones, because a similar degree of block (70%) was produced when the two drugs were applied together (Fig. 11A). As the amounts of  $Ca^{2+}$ entering through each type of channel during an AP are quite different (J. Martínez-Pinna & R. Gallego, unpublished observations), they presumably act co-operatively but nonlinearly in activating CICR. As the amount of  $g_{CLCa}$  (30%) remaining after combined blockade of L- and P-type channels (Fig.  $11A$ ) was similar to the ryanodine-insensitive component,  $Ca^{2+}$  entry through R-type channels probably activates  $g_{\scriptscriptstyle{Cl,Ca}}$  directly.

The fact that the degree of block of  $g_{CLCa}$  by nifedipine and  $\omega$ Aga IVA was similar after a single AP and after a train of six APs (when the peak inward current was about 16 times larger) implies that 'spill over' from channels other than Land P-type was relatively ineffective in activating  $g_{\text{Cl-Ca}}$ . This suggests that CICR activation of  $g_{\text{Cl,Ca}}$  is spatially restricted (Berridge, 1998). This arrangement would allow CICR to deliver the concentration of  $Ca^{2+}$  necessary for activation of  $g_{\text{Cl,Ca}}$  because the Ca<sup>2+</sup> sensitivity of the Cl<sup>-</sup> channels is relatively low ( $EC_{50} \sim 25 \mu$ M; Gomez-Hernandez et al. 1997; Hallani et al. 1998). In contrast, after a train of six APs, ryanodine produced a smaller degree of block  $(40\%, \text{Fig. 11A})$  than that produced by nifedipine and  $\omega$ Aga IVA (65%), suggesting that  $Ca^{2+}$  entering through L- and P-type channels, as well as through R-type channels, can activate  $g_{\text{Cl},\text{Ca}}$  directly when the neurone is overloaded with  $Ca^{2+}$  (see Fig. 7). Since sympathetic ganglion cells fire in vivo at low frequencies (McLachlan et al. 1997), the physiological activation of  $g_{\text{Cl,Ca}}$  probably depends primarily on CICR mechanisms. Recent evidence in dorsal root ganglion neurones confirms that Cl<sup>-</sup> channels can be activated by  $Ca^{2+}$  released from intracellular stores during one AP (Ayar & Scott, 1999).

#### Activation of  $g_{K,Ca1}$

Activation of  $g_{K, Ca1}$  after a single AP is clearly dependent on  $Ca^{2+}$  entry through N-type channels (Fig. 11B). This dependence is in agreement with findings in rat hypoglossal (Viana *et al.* 1993), vagal (Sah, 1995), sympathetic (Davies *et* al. 1996) and trigeminal (Kobayashi et al. 1997) neurones and guinea-pig sympathetic neurones (Ireland et al. 1998), as well as lamprey spinal neurones (Wikström  $\&$  El Manira, 1998). Because  $g_{K, \text{Cat}}$  primarily involves SK channels, the functional link between these and N-type  $Ca^{2+}$  channels is therefore common to many neurones (cf. Marrion & Tavalin, 1998). On the other hand, R\_type channels also contribute to  $g_{K, \text{Cat}}$  activation because the combined application of nifedipine and  $\omega$ Cgtx GVIA did not abolish the outward current (Fig.  $11B$ ).

Ryanodine had different effects in two subtypes of mouse SCG neurone that could be separated on the basis of the time course of  $g_{K, \text{Ca1}}$ . In type II cells, in which  $g_{K, \text{Ca1}}$ showed a plateau before it declined, CICR activated about half of the current after one AP, whereas in type I cells in which  $g_{K,Ca1}$  declined exponentially, CICR played no significant role. A small contribution of CICR (30%) to

 $g_{K, \text{Cat}}$  was previously reported in guinea-pig prevertebral sympathetic neurones (Jobling et al. 1993). Because nifedipine inhibited  $g_{\text{K Ca1}}$  and blocked the effect of ryanodine only in type II cells, its action is most likely to have been to prevent activation of CICR. According to this interpretation,  $g_{K, Ca1}$ activation in type I neurones depends entirely on  $Ca<sup>2</sup>$ entering through N- and R-type channels, whereas in type II neurones,  $Ca^{2+}$  release induced by  $Ca^{2+}$  entering through L-type channels is also involved. L-type channels, CICR and  $Ca^{2+}$ -activated K<sup>+</sup> (SK) channels are functionally linked in vascular smooth muscle (Jaggar et al. 1998) and hippocampal neurones (Tanabe et al. 1998).

The contribution of R-type channels to  $g_{\rm K, Ca1}$  activation was substantially larger after a train than after one AP (Fig.  $11B$ ), consistent with 'spill over' of accumulated  $Ca^{2+}$ . Under these conditions, there was only slight inhibition of  $g_{K,Ca1}$  by nifedipine or ryanodine in type II cells (Figs  $6Bb$  and  $8Cb$ ), consistent with the saturation of CICR by  $Ca^{2+}$  influx after a few APs.

#### Distinct intracellular mechanisms for activation of Cl<sup>-</sup> and  $K^+$  channels

The physical bases for the functional links between  $Ca^{2+}$  and  $K^+/Cl^-$  channels in intact neurones are not known. The present results could be explained if, in mouse SCG neurones, L\_ and P\_type channels are linked to an intracellular pathway, perhaps the store in the subsurface cisternae (Berridge, 1998), from which  $Ca^{2+}$  release directly activates membrane Cl<sup>-</sup> channels, whereas N-type channels are closely juxtaposed to SK channels. R-type channels provide  $Ca^{2+}$ that activates both  $Cl^-$  and SK channels, to a much greater extent following a train of APs, and so they may be more widely distributed. Colocalization of  $Ca^{2+}$  and  $K^+$  channels has been demonstrated directly at the neuromuscular junction, where BK channels are located adjacent to N\_type channels in the presynaptic terminal (Robitaille *et al.* 1993), and in membrane patches from hippocampal somata (Marrion & Tavalin, 1998). In the latter case, N\_type, SK and BK channels were present in the same somatic patch but SK channels were not activated by  $Ca^{2+}$  entering through the N\_type channels, suggesting that some form of direct linkage between channels can exist at the molecular level.

Another possibility is that the different channels are located in separate regions of the cell (Davies et al. 1996). Although a dendritic location for high-threshold  $Ca^{2+}$  channels in sympathetic neurones has been proposed (Hirst & McLachlan, 1986), no data are available about the distribution of the different channel types in the somatodendritic membrane. In central neurones, L-type channels, although present in distal dendrites, are more common in the cell body and proximal dendrites, whereas N\_type channels are more or less equally expressed in both cellular compartments (Westenbroek et al. 1998). Based on indirect evidence, it has been proposed that the Cl<sup>-</sup> channels responsible for the ADP are located in the dendrites (Sánchez-Vives & Gallego, 1994; De Castro et al. 1997) which, in mouse SCG neurones, are

relatively few in number and short. If this were the case, L\_ and P-type  $Ca^{2+}$  channels may also be located on the dendrites. There might even be two distinct populations of  $Cl^-$  channels in mouse SCG cells: a larger one that is activated via intracellular pathways dependent on  $Ca^{2+}$ entering via L- and P-type channels and another population that is activated by  $\tilde{Ca}^{2+}$  derived from R-type channels. While the second population of  $CI^-$  channels might be activated either directly or indirectly, it is likely to be spatially distinct from the  $Cl^-$  channels dependent on  $Ca^{2+}$ entering via L- and P-type channels.

In conclusion, our results provide the first evidence for distinct mechanisms linking the physiological entry of  $Ca^{2+}$ through particular channel types during AP firing with the activation of  $Cl^-$  and  $K^+$  membrane conductances in the same neurone. The data confirm that general intracellular  $Ca<sup>2+</sup>$  levels are unlikely to reflect the localized consequences of  $Ca^{2+}$  influx through specific channels during physiological events.

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#### Acknowledgements

This work was supported by grants PM95\_0107 and PM98\_0102 C02\_01 from the DGICYT of Spain and by grant 970852 from the National Health and Medical Research Council of Australia. J.M.P. holds a graduate fellowship from the DGES of Spain. We thank Eva Quintero and Alfonso Pérez-Vegara for technical assistance and F elix Viana and James A. Brock for helpful comments on the manuscript.

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