

## The Wellcome Prize Lecture

# Store-operated $\text{Ca}^{2+}$ entry: dynamic interplay between endoplasmic reticulum, mitochondria and plasma membrane

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In eukaryotic cells, hormones and neurotransmitters that engage the phosphoinositide pathway evoke a biphasic increase in intracellular free  $\text{Ca}^{2+}$  concentration: an initial transient release of  $\text{Ca}^{2+}$  from intracellular stores is followed by a sustained phase of  $\text{Ca}^{2+}$  influx. This influx is generally store-dependent and is required for controlling a host of  $\text{Ca}^{2+}$ -dependent processes ranging from exocytosis to cell growth and proliferation. In many cell types, store-operated  $\text{Ca}^{2+}$  entry is manifest as a non-voltage-gated  $\text{Ca}^{2+}$  current called  $I_{\text{CRAC}}$  ( $\text{Ca}^{2+}$  release-activated  $\text{Ca}^{2+}$  current). Just how store emptying activates CRAC channels remains unclear, and some of our recent experiments that address this issue will be described. No less important from a physiological perspective is the weak  $\text{Ca}^{2+}$  buffer paradox: whereas macroscopic (whole cell)  $I_{\text{CRAC}}$  can be measured routinely in the presence of strong intracellular  $\text{Ca}^{2+}$  buffer, the current is generally not detectable under physiological conditions of weak buffering following store emptying with the second messenger  $\text{InsP}_3$ . In this review, I describe some of our experiments aimed at understanding just why  $\text{InsP}_3$  is ineffective under these conditions and which lead us to conclude that respiring mitochondria are essential for the activation of  $I_{\text{CRAC}}$  in weak intracellular  $\text{Ca}^{2+}$  buffer. Mitochondrial  $\text{Ca}^{2+}$  uptake also increases the dynamic range over which  $\text{InsP}_3$  functions as the second messenger that controls  $\text{Ca}^{2+}$  influx. Finally, we find that  $\text{Ca}^{2+}$ -dependent slow inactivation of  $\text{Ca}^{2+}$  influx, a widespread but poorly understood phenomenon that helps shape the profile of an intracellular  $\text{Ca}^{2+}$  signal, is regulated by mitochondrial  $\text{Ca}^{2+}$  buffering. Thus, by enabling macroscopic store-operated  $\text{Ca}^{2+}$  current to activate and then by controlling its extent and duration, mitochondria play a crucial role in all stages of store-operated  $\text{Ca}^{2+}$  influx. Store-operated  $\text{Ca}^{2+}$  entry reflects therefore a dynamic interplay between endoplasmic reticulum, mitochondria and plasma membrane.

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An increase in intracellular free  $\text{Ca}^{2+}$  concentration is a ubiquitous signalling mechanism that regulates a broad spectrum of kinetically disparate processes ranging from exocytosis to cell growth and proliferation (Carafoli, 2002). Two major ways whereby eukaryotic cells can increase their cytosolic  $\text{Ca}^{2+}$  concentration are release of the ions from intracellular stores (mainly the endoplasmic/sarcoplasmic reticulum) or entry of  $\text{Ca}^{2+}$  into the cell from the external solution (Berridge, 1993; Pozzan *et al.* 1994). Because the intracellular stores have a limited capacity,  $\text{Ca}^{2+}$  entry into the cell down an enormous electrochemical potential gradient is important for supporting the activities of numerous  $\text{Ca}^{2+}$ -dependent processes. In excitable tissues, like nerve and muscle,  $\text{Ca}^{2+}$  entry is accomplished by the

opening of  $\text{Ca}^{2+}$ -permeable ion channels (voltage- and ligand-gated; Burnashev, 1998; Catterall, 2000). Much is known about the biophysical properties of these proteins, their stoichiometry, and even the identity of amino acids that are crucial for key channel functions like selectivity and gating (Burnashev, 1998; Catterall, 2000; Hille, 2001).

However, until relatively recently, our understanding of how  $\text{Ca}^{2+}$  enters non-excitable cells has been weak. Non-excitable cells are cells that do not fire action potentials and include the cells of the immune system, endothelia lining the blood vessels, epithelia that line the respiratory and digestive tracts, and glial cells in the brain. In these cell types,  $\text{Ca}^{2+}$  entry is essential for maintaining normal cell function but voltage-operated  $\text{Ca}^{2+}$  channels tend not to be

expressed and ligand-gated  $\text{Ca}^{2+}$ -permeable channels are sparse. Instead, a major route for  $\text{Ca}^{2+}$  influx in these cells is via store-operated  $\text{Ca}^{2+}$  channels (Parekh & Penner, 1997).

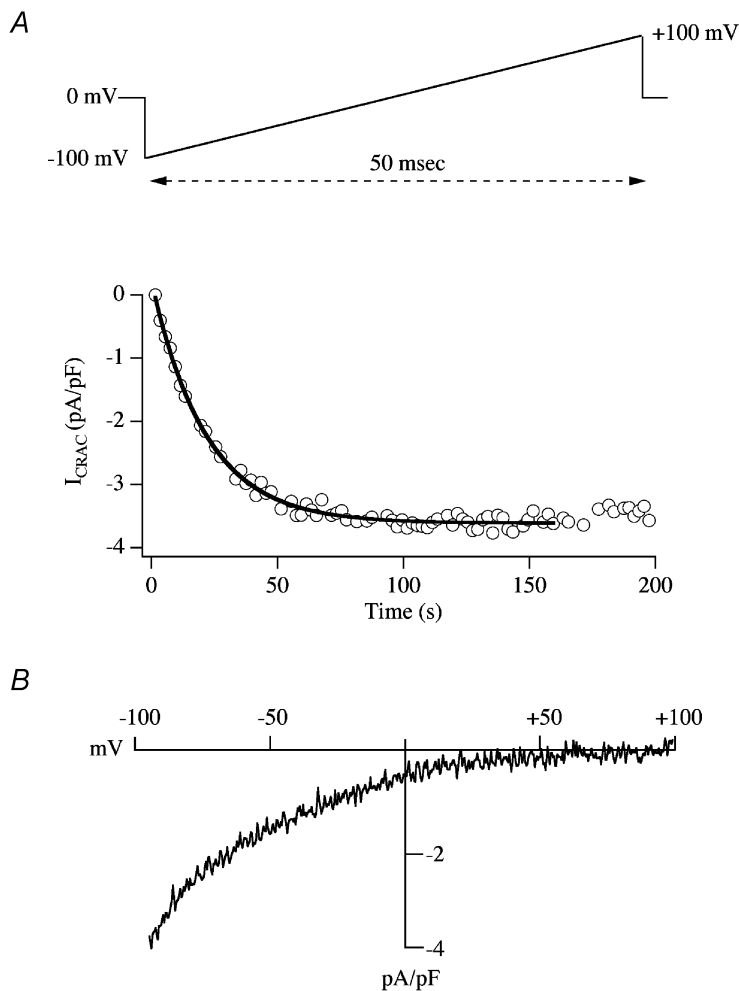
### Store-operated $\text{Ca}^{2+}$ influx

In an erudite paper published in 1986, James Putney proposed a model for  $\text{Ca}^{2+}$  influx in non-excitable cells, which he called capacitative  $\text{Ca}^{2+}$  entry (Putney, 1986). The fundamental tenet of this model was that the  $\text{Ca}^{2+}$  entry pathway in the plasma membrane was controlled by the  $\text{Ca}^{2+}$  content of the intracellular stores. As the store  $\text{Ca}^{2+}$  content fell, a signal was somehow sent from the stores which caused the  $\text{Ca}^{2+}$  entry pathway to open (now referred to as store-operated  $\text{Ca}^{2+}$  entry). Although indirect evidence began to accrete in support of Putney's model, it was not until 1992 that Reinhold Penner directly demonstrated, in an elegant series of experiments, that  $\text{Ca}^{2+}$  store depletion resulted in the activation of a  $\text{Ca}^{2+}$ -selective current which was called  $I_{\text{CRAC}}$  (Hoth & Penner, 1992).  $\text{Ca}^{2+}$  entry through store-operated  $\text{Ca}^{2+}$  channels is important for regulating a host of temporally diverse processes from exocytosis and enzymatic activity to gene transcription and cell proliferation (Parekh & Penner, 1997; Putney & McKay, 1999). Aberrant store-operated

entry has been reported to underlie debilitating human diseases like certain primary immunodeficiencies (Partiseti *et al.* 1994) and acute pancreatitis (Raraty *et al.* 2000; Parekh, 2000). It now seems clear that store-operated  $\text{Ca}^{2+}$  channels are not a homogeneous class but instead reflect a family with different biophysical properties. The best characterised store-operated current is  $I_{\text{CRAC}}$ , which is found in several types of cell including mast cells, lymphocytes, macrophages, megakaryocytes and hepatocytes (Parekh & Penner, 1997; Lewis, 1999).

Although store-operated entry is a widespread  $\text{Ca}^{2+}$  influx pathway, it is by no means the only route for  $\text{Ca}^{2+}$  entry in non-excitable cells. In addition to a range of second-messenger operated  $\text{Ca}^{2+}$ -permeable channels (activated by  $\text{Ca}^{2+}$ ,  $\text{InsP}_3/\text{InsP}_4$ , cyclic nucleotides; reviewed in Clapham, 1995), growing evidence indicates that a  $\text{Ca}^{2+}$  influx pathway controlled by arachidonic acid might be prominent under certain conditions (reviewed in Taylor, 2002).

In this Wellcome Prize Lecture review, I shall focus on some of our work over the past several years that has been aimed at understanding the mechanisms that control  $I_{\text{CRAC}}$ . It is, as befits a prize lecture, a subjective account and is not a general review of the literature. Because of space



**Figure 1. Development of  $I_{\text{CRAC}}$  following store depletion**

A, the upper panel shows the typical voltage ramp protocol used to monitor  $I_{\text{CRAC}}$  in mast cells, the related rat basophilic leukaemia (RBL-1) cell line and jurkat T-lymphocytes. The ramp spans  $-100$  to  $+100$  mV in 50 ms, and is applied from a holding potential of 0 mV once every 2 s. The lower panel depicts the time course of activation of  $I_{\text{CRAC}}$ . The current amplitude, measured at  $-80$  mV from each ramp, has been normalised for cell size by dividing the current by cell capacitance. The thick line shows a mono-exponential fit to the activation time course. B shows the current–voltage relationship, once the current had reached steady state. Note the inward rectification and very positive reversal potential, characteristic of  $I_{\text{CRAC}}$ . The pipette solution is caesium glutamate based, supplemented with  $\text{InsP}_3$  and 10 mM EGTA.

constraints, certain papers have not been cited and I apologise to those authors for this.

### Basic features of $I_{\text{CRAC}}$

CRAC channels are activated by the process of emptying the intracellular  $\text{Ca}^{2+}$  stores. It is of little consequence how the stores are actually emptied, the net result is the same (Hoth & Penner, 1992; Parekh & Penner, 1997). Physiologically, stores are emptied following cell-surface receptor stimulation which increases the levels of the  $\text{Ca}^{2+}$  releasing messenger  $\text{InsP}_3$ . Experimentally, stores can be emptied by increasing net  $\text{Ca}^{2+}$  flux out of the stores following application of receptor agonists, increasing intracellular  $\text{InsP}_3$  by dialysis with a patch pipette or by exposure to  $\text{Ca}^{2+}$  ionophores. Alternatively, suppressing  $\text{Ca}^{2+}$  re-uptake into the stores allows the endogenous  $\text{Ca}^{2+}$  leak pathway to deplete the stores. Inhibition of store refilling can occur by exposure to thapsigargin, a potent inhibitor of the sarcoplasmic/endoplasmic reticular  $\text{Ca}^{2+}$  ATPase (SERCA) pumps on the stores.

The  $\text{Ca}^{2+}$  flux through CRAC channels gives rise to the small  $\text{Ca}^{2+}$  current  $I_{\text{CRAC}}$ , which can be measured directly and unambiguously using the whole cell patch clamp technique. With  $\text{Ca}^{2+}$  as the charge carrier,  $I_{\text{CRAC}}$  activates mono-exponentially (time constant of around 20 s; Fig. 1A) and is a non-voltage-gated, inwardly rectifying current with a very positive reversal potential ( $> +60$  mV; Fig. 1B), the latter indicating high selectivity for  $\text{Ca}^{2+}$ . Although  $\text{Na}^+$  ions outnumber  $\text{Ca}^{2+}$  by 70:1 in the external solution, neither the extent of  $I_{\text{CRAC}}$  nor the positive reversal potential (still  $> +60$  mV) appear to be altered by substituting external  $\text{Na}^+$  for organic cations like  $\text{NMDG}^+$  in the presence of physiological levels of external  $\text{Ca}^{2+}$  (1–2 mM) (Fierro & Parekh, 2000). Moreover, removal of external  $\text{Ca}^{2+}$  in the continuous presence of external  $\text{Na}^+$  and  $\text{Mg}^{2+}$  abolishes the current completely (Hoth & Penner, 1992; Zweifach & Lewis, 1993; Fierro & Parekh, 2000). Because of the lack of a clear reversal potential for  $I_{\text{CRAC}}$  with  $\text{Ca}^{2+}$  as the charge carrier, the permeability ratio of  $\text{Ca}^{2+}$  to  $\text{Na}^+$  ( $P_{\text{Ca}}/P_{\text{Na}}$ ) has been hard to establish. Using the 'added buffer method', where cells are loaded with sufficient Fura-2 to capture all the incoming  $\text{Ca}^{2+}$  through CRAC channels, it has been estimated that CRAC channels are as selective for  $\text{Ca}^{2+}$  as their voltage-operated counterparts (Hoth, 1995), the latter exhibiting a  $P_{\text{Ca}}/P_{\text{Na}}$  of 1000. However, CRAC channels discriminate between various divalent cations, with  $\text{Ba}^{2+}$  and  $\text{Sr}^{2+}$  supporting less current than  $\text{Ca}^{2+}$  (Hoth & Penner, 1992; Zweifach & Lewis, 1993; Fierro & Parekh, 1999a). The single CRAC channel conductance is low. Stationary noise analysis has estimated it to be well below 1 pS, beyond the current level of detection (Hoth & Penner, 1992; Zweifach & Lewis, 1993). A consequence of this is that there are estimated to be at least 5000 functional CRAC channels in the plasma membrane following stimulation.

### Activation mechanism

The unique gating of  $I_{\text{CRAC}}$  has made it an attractive target of investigation for the identification of new signal transduction pathways. CRAC channels are activated by the emptying of intracellular  $\text{Ca}^{2+}$  stores. But just how a reduction in store content is translated into opening of these channels remains unclear. A sensor within the stores presumably detects the fall in  $\text{Ca}^{2+}$  content and this then initiates a process resulting in a signal being sent from the stores to the channels in the plasma membrane. Virtually nothing is known about the identity of the sensor, other than it is probably not calreticulin (Fasolato *et al.* 1998), the major intraluminal  $\text{Ca}^{2+}$  binding protein of non-muscle cells. As for the activation signal, three models have been put forward (see Fig. 2; reviewed in Parekh & Penner, 1997; Putney & McKay, 1999): (1) the vesicular fusion hypothesis (in which CRAC channels are inserted into the plasma membrane upon store depletion via an exocytotic mechanism; Yao *et al.* 1999; Alderton *et al.* 2000); (2) conformational coupling (where  $\text{InsP}_3$  receptors on the stores are physically attached to CRAC channels in the plasma membrane; Berridge, 1995; Kiselyov *et al.* 1999), including the related secretion-like coupling model (where peripheral endoplasmic reticulum (ER) moves to the plasma membrane upon store depletion so that coupling can take place and this movement is regulated by the peripheral cytoskeleton; Patterson *et al.* 1999; Rosado *et al.* 2000), and (3) the diffusible messenger model (in which a small mobile factor is released from the stores upon their emptying and which then directly opens CRAC channels; Ramdriamampita & Tsien, 1993; Csutora *et al.* 1999).

The vesicular fusion model does not provide any insight into the activation signal itself. It postulates instead that this signal results in the insertion of CRAC channels into the plasma membrane. The fusion model therefore could be accommodated within either of the other two contemporary models. However, we found that dialysing the cytosol with small GTP-binding proteins known to be involved in vesicular trafficking (Parekh & Penner, 1996), interfering with GTP-binding protein function (Fierro & Parekh, 1999b) or exposing cells to either clostridial neurotoxins or to recombinant proteins that suppress exocytosis (in collaboration with Professor Burgoyne, Liverpool) all fail to affect the activation of  $I_{\text{CRAC}}$ , findings that are not readily reconcilable with a fusion mechanism. The secretion-like conformational coupling model predicts that, first, intimate interactions between the ER and plasma membrane are essential for  $I_{\text{CRAC}}$  to activate, second,  $\text{InsP}_3$  receptors are required for all stages of store-operated  $\text{Ca}^{2+}$  entry, and third, that interfering with the peripheral cytoskeleton should impair the ability of  $I_{\text{CRAC}}$  to activate. We have tested these predictions in rat basophilic leukaemia (RBL-1) cells (Bakowski *et al.* 2001). Inflating the cell by applying positive pressure to the patch

pipette (cell ballooning) did not interfere with the ability of CRAC channels to activate, in spite of some rather marked changes in the cellular architecture (Bakowski *et al.* 2001). A variety of  $\text{InsP}_3$  receptor inhibitors did not affect  $I_{\text{CRAC}}$  development, in spite of occupying  $\text{InsP}_3$  receptors, and pharmacological tools directed towards reshaping the cytoskeleton consistently failed to interfere with the activation of  $I_{\text{CRAC}}$  (Bakowski *et al.* 2001). Hence, a secretion-like coupling model is probably not a viable candidate for the activation of CRAC channels in RBL-1 cells. As for the diffusible messenger hypothesis, no convincing candidate has yet been identified. Recently, we have found that inhibition of the lipoxygenase family of enzymes impairs the activation of  $I_{\text{CRAC}}$  (Glitsch *et al.* 2002a). The inhibitors are much less effective if administered after CRAC channels have been activated. Such findings raise the intriguing possibility that a lipoxygenase might be involved in the activation mechanism, although, as discussed in Glitsch *et al.* (2002), such a conclusion is not unequivocal as it is based on a pharmacological approach.

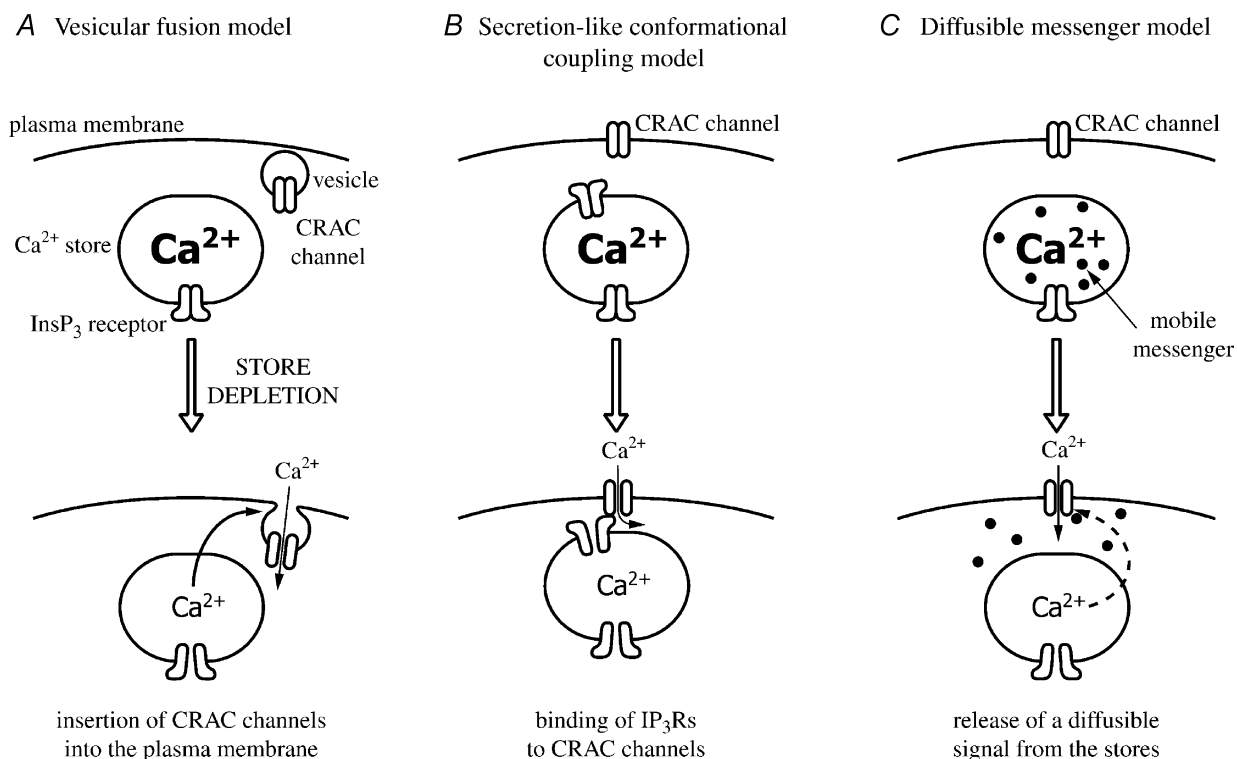
Clearly, the ability to study single CRAC channel currents in an inside-out patch would greatly facilitate identification of key regulatory molecules involved in channel gating, as would the identification of the CRAC channel gene(s). It was recently suggested that the protein TRPV6 comprises all or part of the CRAC channel pore (Yue *et al.* 2001). But work by us and others suggests that this is probably not the case (Bakowski & Parekh, 2002a,b; Hermosura *et al.* 2002;

Prakriya & Lewis, 2002). Understanding the molecular identity of the CRAC channel as well as the activation signal remain outstanding questions in the field.

### The weak buffer paradox

Another major problem concerning  $I_{\text{CRAC}}$  is the weak  $\text{Ca}^{2+}$  buffer paradox. Whereas  $I_{\text{CRAC}}$  can be activated maximally following whole cell dialysis with a patch pipette containing  $\text{InsP}_3$  and strong buffer (10 mM EGTA), the current generally fails to develop in the presence of weak  $\text{Ca}^{2+}$  buffer (0.1 mM EGTA; Fig. 3, modified from Bakowski & Parekh, 2001; see also Broad *et al.* 1999; Fierro & Parekh, 2000). Such low concentrations of EGTA are only slightly larger than the levels of endogenous mobile  $\text{Ca}^{2+}$  buffers (Zhou & Neher, 1993).  $\text{InsP}_3$  is able to release  $\text{Ca}^{2+}$  from the stores under these conditions (Parekh *et al.* 1997). Hence the inability of  $\text{InsP}_3$  to activate  $I_{\text{CRAC}}$  in weak  $\text{Ca}^{2+}$  buffer does not reflect a failure to mobilise  $\text{Ca}^{2+}$  from the stores. Clearly, resolution of why  $\text{InsP}_3$  is so ineffective in weak buffer is essential if we are to place  $I_{\text{CRAC}}$  in any kind of physiological context.

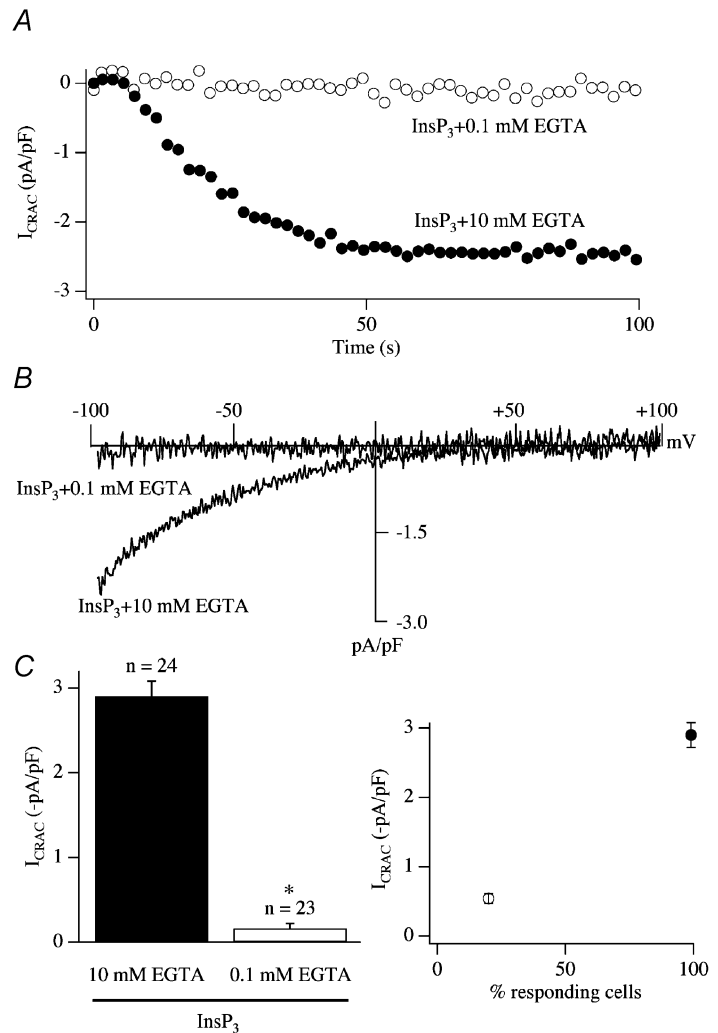
The first explanation that we considered was that the inability of  $\text{InsP}_3$  to activate  $I_{\text{CRAC}}$  in weak  $\text{Ca}^{2+}$  buffer was an idiosyncrasy of our recording conditions. Like most electrophysiologists, we routinely work at room temperature. To see whether  $\text{InsP}_3$  was effective at physiological temperature, we compared the effects of  $\text{InsP}_3$  in weak versus strong buffer at 36°C. However,  $\text{InsP}_3$  was still ineffective in weak buffer (Fig. 4A and B, modified from



**Figure 2.** The three contemporary models proposed to account for the activation mechanism of  $I_{\text{CRAC}}$

**Figure 3. The weak buffer paradox**

A,  $InsP_3$  generally fails to activate  $I_{CRAC}$  in weak intracellular  $Ca^{2+}$  buffer (0.1 mM EGTA) whereas it is effective in strong buffer (10 mM EGTA). B, current–voltage relationships for the two recordings from A, taken at steady state. C, the mean amplitude of  $I_{CRAC}$  (left-hand panel) and the fraction of cells responding (right-hand panel) for each condition is shown. In this and all subsequent figures, data from RBL-1 cells are shown. \* $P < 0.01$ .

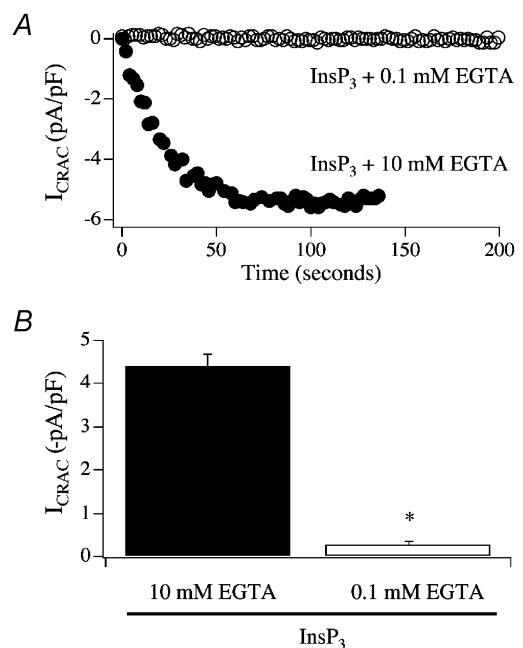


Fierro *et al.* 2000). We also systematically altered the composition of the pipette solution to see whether we could render  $InsP_3$  more effective. However,  $InsP_3$  was still largely ineffective in weak buffer in either a  $Cs^+$ - or  $K^+$ -

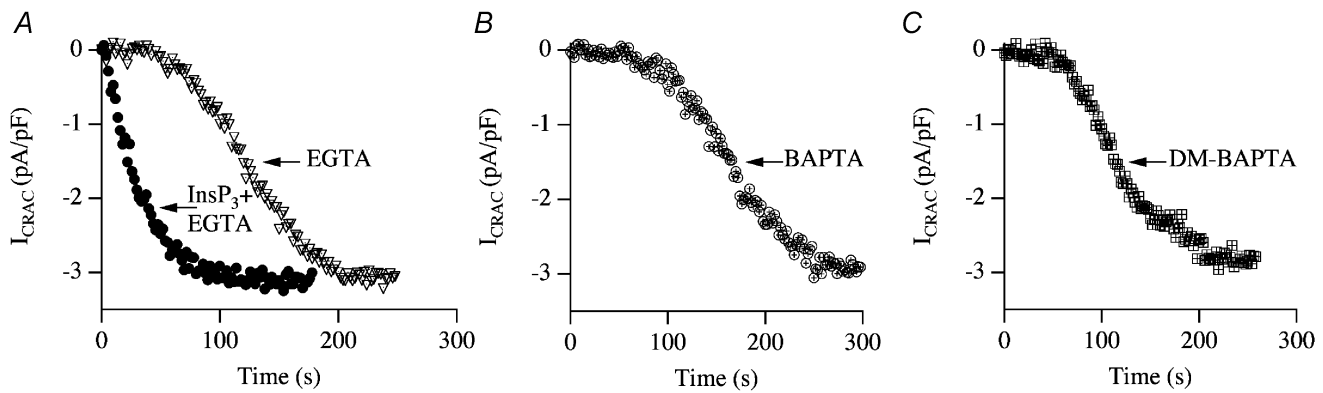
based pipette solution, when  $Cl^-$  was the dominant anion or when EGTA was replaced by BAPTA or dimethyl BAPTA (Fierro & Parekh, 2000; Gilbert & Parekh, 2000). Non-metabolisable analogues of  $InsP_3$  were also incapable

**Figure 4.  $InsP_3$  still fails to activate  $I_{CRAC}$  in weak  $Ca^{2+}$  buffer at physiological temperature**

Experiments were carried out at 36 °C. A, whereas  $InsP_3$  evoked a large  $I_{CRAC}$  at 36 °C in 10 mM EGTA, no current was detectable in 0.1 mM EGTA. B, aggregate data are summarised. \* $P < 0.01$  (Student's *t* test).







**Figure 5. Passive activation of  $I_{CRAC}$**

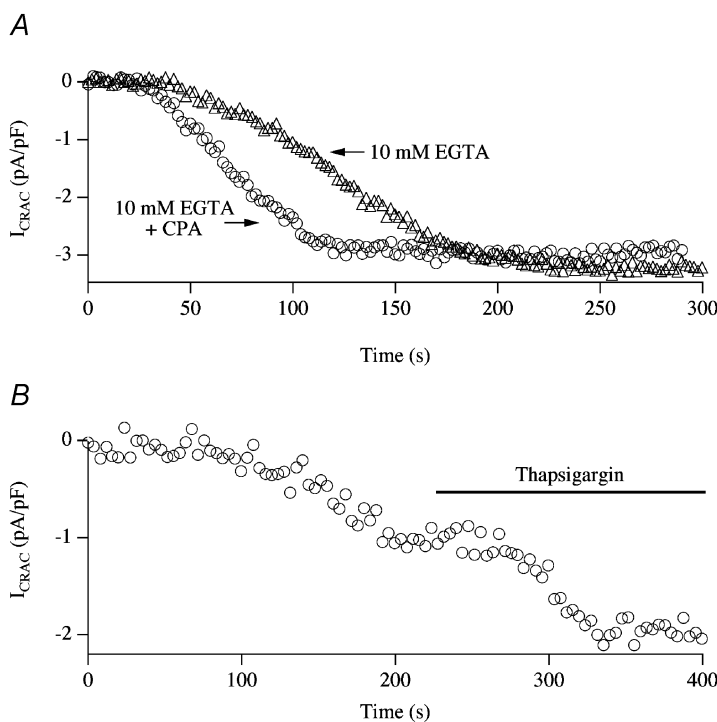
A, comparison of the time course of development of  $I_{CRAC}$  following dialysis with either 10 mM EGTA alone or 30  $\mu$ M  $InsP_3$  + EGTA. Note the initial slow development of  $I_{CRAC}$  followed by a second, faster phase in response to EGTA alone. B, development of  $I_{CRAC}$  following dialysis with 10 mM BAPTA or dimethyl BAPTA (panel C).

of routinely generating the current, as was receptor stimulation, the latter being used as a physiological route to generate  $InsP_3$ .

### Passive activation of $I_{CRAC}$

An important clue came from experiments designed to try to understand the mechanism underlying activation of  $I_{CRAC}$  following passive depletion of stores (Fierro & Parekh, 1999c). Dialysis with a high concentration of  $Ca^{2+}$  chelator alone (10 mM EGTA or BAPTA) is sufficient to maximally activate  $I_{CRAC}$ , a process referred to as passive depletion of stores (Hoth & Penner, 1992). Passive depletion is thought to rely only on the endogenous leak of  $Ca^{2+}$  from the stores. In strong buffer (several millimolar chelator), cytoplasmic  $Ca^{2+}$  is strongly clamped at very low levels, so as  $Ca^{2+}$  leaks out of the stores it is captured by the

chelator and cannot therefore be taken back up. Stores will be drained gradually of  $Ca^{2+}$  and hence empty sufficiently for  $I_{CRAC}$  to activate (passive activation). Figure 5A–C shows the pattern of development of  $I_{CRAC}$  following dialysis with 10 mM of EGTA, BAPTA or dimethyl BAPTA. Superimposed on the EGTA trace in Fig. 5A is a recording from a cell in which  $InsP_3$  was also included in the pipette. With  $InsP_3$ ,  $I_{CRAC}$  activated rapidly and mono-exponentially. In marked contrast, the pattern of development of the current to passive depletion was much slower than that seen with  $InsP_3$ . With EGTA (Fig. 5A), BAPTA (Fig. 5B) or dimethyl BAPTA (Fig. 5C), the development of the current was kinetically complex: after a sizeable delay of around 60 s,  $I_{CRAC}$  initially activated slowly (first phase of development), followed by a faster developing phase (second phase of



**Figure 6. SERCA pumps shape the pattern of passive activation of  $I_{CRAC}$**

A, inclusion of cyclopiazonic acid (CPA) eliminates the initial slow phase of current development, leaving the second component intact. B, following dialysis with 2.5 mM EGTA,  $I_{CRAC}$  activated partially in this cell. Subsequent application of thapsigargin increased the extent of the current, as well as its rate of development.

development). We analysed the various features of the current (delay, rate of development of the two phases as well as their durations, their relative contributions to total current amplitude) and these were not significantly different between the chelators (Fierro & Parekh, 1999b). These chelators have apparent equilibrium dissociation constants of 150, 225 and 150 nM, respectively, and on-rates of  $1.5 \times 10^6 \text{ M}^{-1} \text{ s}^{-1}$  for EGTA and  $5 \times 10^8 \text{ M}^{-1} \text{ s}^{-1}$  for BAPTA and dimethyl BAPTA at pH 7.2. Hence neither the speed of binding  $\text{Ca}^{2+}$  nor the equilibrium affinity of the chelators accounts for the complex kinetic profile.

### Importance of SERCA pumps

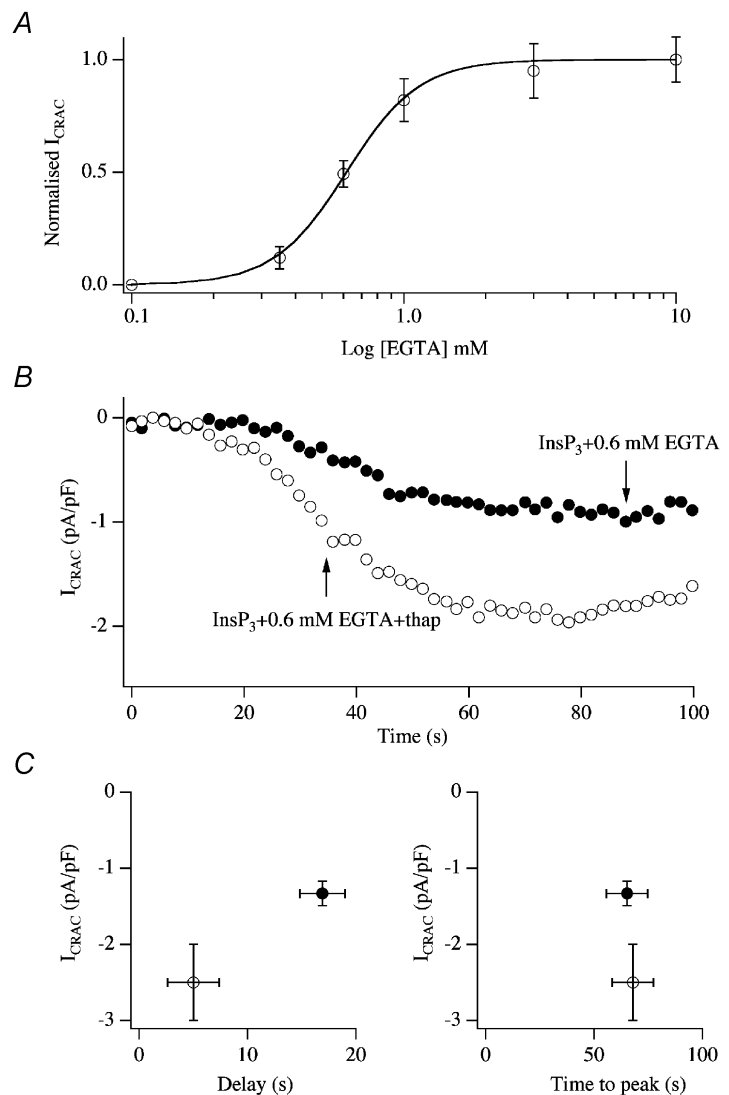
We found that SERCA pumps were extremely influential in shaping the pattern of development of  $I_{\text{CRAC}}$  following passive store depletion (Fierro & Parekh, 1999c). When SERCA pumps were inhibited with either cyclopiazonic acid or thapsigargin, the kinetics of  $I_{\text{CRAC}}$  changed dramatically compared with the current activated in 10 mM EGTA alone (Fig. 6A). The biphasic nature of the current (initial slow phase followed by a second faster phase), which was always seen with passive depletion using

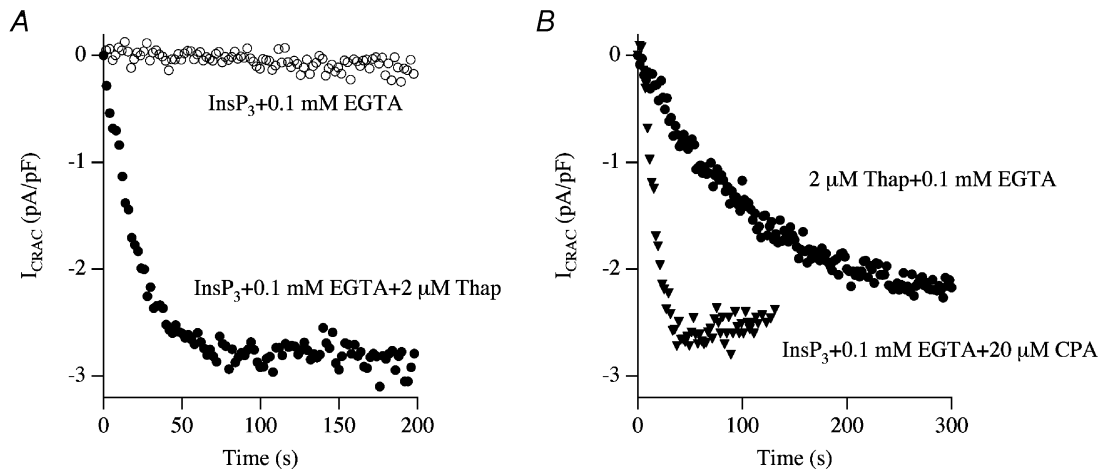
10 mM EGTA, was not present when SERCA pumps were blocked. Now, the initial slow component was lost and instead the rapid phase developed in isolation. The slow initial activation therefore reflects a dynamic interplay between  $\text{Ca}^{2+}$  leakage from the stores and SERCA pump-mediated  $\text{Ca}^{2+}$  reuptake. The  $\text{Ca}^{2+}$  pumps help shape the profile of  $I_{\text{CRAC}}$  development, even in 10 mM EGTA.

For lower concentrations of EGTA (1–2.5 mM), the effects of SERCA pumps were even more striking. Following dialysis with EGTA < 2.5 mM,  $I_{\text{CRAC}}$  activated slowly and mono-phasically to reach a submaximal steady-state amplitude (Fig. 6B). Once the small current had reached steady-state, application of the SERCA pump blocker thapsigargin increased the size of the current further. This demonstrates that the submaximal  $I_{\text{CRAC}}$  reflected a steady state between  $\text{Ca}^{2+}$  efflux from the stores and reuptake by SERCA pump activity (Fierro & Parekh, 1999b). Moreover, even in the presence of a relatively high concentration of EGTA (2.5 mM), SERCA pumps were still active and were able to re-sequester  $\text{Ca}^{2+}$  into the stores.

### Figure 7. SERCA pumps function in the presence of $\text{InsP}_3$

A, the relationship between intrapipette EGTA concentration and amplitude of  $I_{\text{CRAC}}$  (evoked by dialysis with  $30 \mu\text{M}$   $\text{InsP}_3$ ) is plotted. Note that  $I_{\text{CRAC}}$  was clearly submaximal in the presence of 0.6 mM EGTA. Each point is the mean  $\pm$  S.E.M. of at least 5 cells. B, recordings are shown for a cell dialysed with  $30 \mu\text{M}$   $\text{InsP}_3$  and 0.6 mM EGTA (●) and for one dialysed with this solution but supplemented with  $2 \mu\text{M}$  thapsigargin, a SERCA blocker (○). Note the increase in the size of  $I_{\text{CRAC}}$  following inhibition of the pumps. C, the amplitudes, delays and times to peak are summarised for experiments as in B. Filled circles denote  $\text{InsP}_3 + 0.6 \text{ mM EGTA}$  whereas open circles represent  $\text{InsP}_3 + 0.6 \text{ mM EGTA} + \text{thapsigargin}$ .





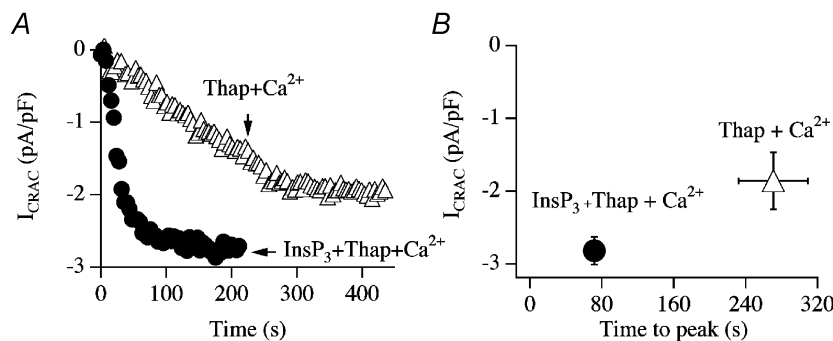
**Figure 8.  $\text{InsP}_3$  activates  $I_{\text{CRAC}}$  in weak buffer provided SERCA pump activity is compromised**

A,  $\text{InsP}_3$  together with thapsigargin activates  $I_{\text{CRAC}}$  in weak buffer whereas  $\text{InsP}_3$  alone is ineffective. B,  $\text{InsP}_3$  with cyclopiiazonic acid, a structurally distinct SERCA pump blocker, is also effective. SERCA pump block alone ( $2 \mu\text{M}$  Thap +  $0.1 \text{ mM}$  EGTA) can also activate  $I_{\text{CRAC}}$ , albeit at a much slower rate.

### SERCA and $\text{InsP}_3$

Although the preceding results demonstrate that SERCA pumps are very powerful and their activity needs to be overcome in order for  $I_{\text{CRAC}}$  to activate fully, they do not address the key question as to whether the pumps can sculpt the ability of the natural trigger, namely  $\text{InsP}_3$ , to activate  $I_{\text{CRAC}}$  under physiological conditions of weak  $\text{Ca}^{2+}$  buffering. Because the current cannot be measured when cells are dialysed with  $\text{InsP}_3$  in weak  $\text{Ca}^{2+}$  buffer (Fig. 3), we therefore determined the lowest concentration of EGTA that would still enable us to reliably measure macroscopic  $I_{\text{CRAC}}$  and, having found this, we examined the effects of SERCA pump block on the features of the current (Glitsch & Parekh, 2000). Figure 7A summarises results from experiments in which cells were dialysed with a maximally effective concentration of  $\text{InsP}_3$  and different concentrations of EGTA. Concentrations of EGTA less than  $0.35 \text{ mM}$  generally failed to support any macroscopic activation of

$I_{\text{CRAC}}$  whereas close to maximal activation was seen with  $1 \text{ mM}$  EGTA. However, with  $0.6 \text{ mM}$  EGTA,  $I_{\text{CRAC}}$  clearly had a sub-maximal amplitude in spite of the cells being continuously exposed to a high concentration of  $\text{InsP}_3$  via the patch pipette. We reasoned that the stores might nevertheless refill partially in the presence of such a moderate  $\text{Ca}^{2+}$  chelator concentration and this would therefore reduce the overall extent of  $I_{\text{CRAC}}$  activation. If true, then one might expect that the size of  $I_{\text{CRAC}}$  would increase under these conditions if SERCA pumps were to be blocked since this would suppress store refilling. The results of Fig. 7B show that this was indeed the case. Inclusion of thapsigargin in the recording pipette together with  $\text{InsP}_3$  and  $0.6 \text{ mM}$  EGTA significantly increased the size of the current compared with  $\text{InsP}_3$  and  $0.6 \text{ mM}$  EGTA alone. Moreover, the delay before the current activated was also reduced by blocking SERCA pumps, although the time to peak was unaffected (Fig. 7C).



**Figure 9. SERCA pump block is sufficient to activate  $I_{\text{CRAC}}$  even in high intracellular  $\text{Ca}^{2+}$**

A,  $\text{InsP}_3$  and thapsigargin can activate  $I_{\text{CRAC}}$  in weak buffer even in the presence of high intracellular  $\text{Ca}^{2+}$  ( $100 \mu\text{M}$  total  $\text{CaCl}_2$  in the pipette solution, free  $\text{Ca}^{2+}$  concentration estimated to be in the micromolar range). Thapsigargin alone was also able to evoke  $I_{\text{CRAC}}$  under these conditions, but after a delay and at a slower rate. B, aggregate data are summarised.



Collectively, these results demonstrate that SERCA pumps can refill stores, even in the continuous presence of  $\text{InsP}_3$ , and to the extent that  $I_{\text{CRAC}}$  activates only partially.

### $\text{InsP}_3$ activates $I_{\text{CRAC}}$ in physiological buffer provided SERCA pumps are blocked

The preceding results provide an explanation as to why  $\text{InsP}_3$  is largely ineffective in activating  $I_{\text{CRAC}}$  under physiological conditions of weak  $\text{Ca}^{2+}$  buffering. The SERCA pumps are so effective that they can prevent  $\text{InsP}_3$  from depleting the stores sufficiently or long enough for  $I_{\text{CRAC}}$  to activate. If true, then one would expect  $\text{InsP}_3$  together with a SERCA pump blocker to activate  $I_{\text{CRAC}}$  in weak buffer. Figure 8 shows experiments designed to test this (Fierro & Parekh, 2000). Whereas  $\text{InsP}_3$  was ineffective in weak  $\text{Ca}^{2+}$  buffer, the combination of  $\text{InsP}_3$  and thapsigargin evoked a large current (Fig. 8A). The effects of thapsigargin were mimicked by the different SERCA pump blockers cyclopiazonic acid (Fig. 8B) and thapsigarginin (which is almost as potent as thapsigargin but less hydrophobic). Inhibition of SERCA pumps alone, in the absence of  $\text{InsP}_3$ , also activated  $I_{\text{CRAC}}$  (Fig. 8B; Fierro & Parekh, 2000). This occurred at a much slower rate than that seen in the presence of  $\text{InsP}_3$  because store depletion to thapsigargin alone occurs via the background leak pathway.

In fact, provided SERCA pumps were blocked,  $I_{\text{CRAC}}$  could activate even in the absence of any exogenous  $\text{Ca}^{2+}$  chelator (Fierro & Parekh, 2000). Figure 9 shows the development of  $I_{\text{CRAC}}$  following dialysis with  $\text{InsP}_3$ , thapsigargin,  $100 \mu\text{M}$   $\text{Ca}^{2+}$  and no added  $\text{Ca}^{2+}$  chelator.  $\text{Ca}^{2+}$  in the pipette solution was weakly buffered by ATP (2 mM) and glutamate (main anion in the patch pipette). The current activated at the normal rate (trace marked  $\text{InsP}_3 + \text{Thap} + \text{Ca}^{2+}$  in Fig. 9A). Dialysis with thapsigargin and  $100 \mu\text{M}$   $\text{Ca}^{2+}$  (in the absence of  $\text{InsP}_3$ ) also activated  $I_{\text{CRAC}}$ , with the typical slow kinetics expected for thapsigargin alone (trace marked  $\text{Thap} + \text{Ca}^{2+}$ ). Aggregate data are summarised in Fig. 9B. Although the free  $\text{Ca}^{2+}$  concentration in the cells is not known precisely under these conditions (due to exogenous buffering/removal), in experiments with thapsigargin alone the slow development of  $I_{\text{CRAC}}$  would ensure that reasonable dialysis with micromolar  $\text{Ca}^{2+}$  concentrations would have occurred as  $I_{\text{CRAC}}$  activated.

$I_{\text{CRAC}}$  can therefore activate when cytosolic  $\text{Ca}^{2+}$  is in the micromolar range. Moreover, exogenous  $\text{Ca}^{2+}$  chelators are not required for  $I_{\text{CRAC}}$  to be activated.

### SERCA and secretion

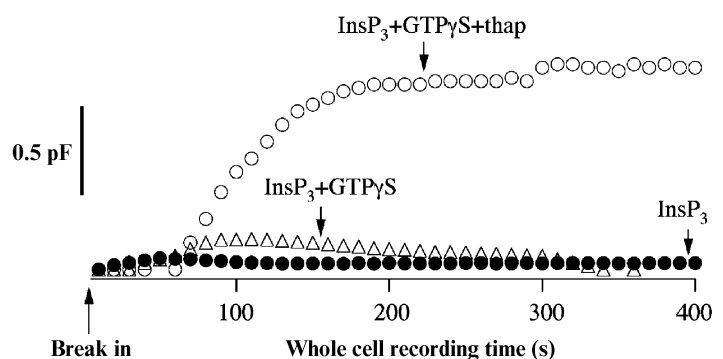
Upon stimulation, mast cells and basophils degranulate, thereby releasing a host of factors into the extracellular medium which are important in shaping a local inflammatory response. We measured secretion from individual RBL-1 cells using the capacitance method to track vesicular fusion (Artalejo *et al.* 1998). We found that exocytosis required both an increase in  $\text{Ca}^{2+}$  and a GTP-dependent step, at least in the whole cell configuration of the patch clamp technique. Strikingly, dialysis with  $\text{InsP}_3$  in weak  $\text{Ca}^{2+}$  buffer failed to evoke any clear secretory response unless thapsigargin was present (Fig. 10). No doubt, part of the effects of thapsigargin are likely to involve reduced  $\text{Ca}^{2+}$  removal by SERCA pumps. But it seems likely that  $\text{Ca}^{2+}$  entry following the development of  $I_{\text{CRAC}}$ , as a consequence of exposure to the combination of  $\text{InsP}_3$  and thapsigargin, will also promote a larger secretory response.

### Central role for mitochondria in development of $I_{\text{CRAC}}$

SERCA pump activity therefore appears to be one of the main determinants of whether  $I_{\text{CRAC}}$  activates or not under physiological conditions. Only when SERCA pump activity is reduced does  $I_{\text{CRAC}}$  develop. How might SERCA pump activity be reduced under physiological conditions of weak  $\text{Ca}^{2+}$  buffering? We reasoned that an increase in the rate of  $\text{Ca}^{2+}$  removal from the cytosol by another clearance mechanism might be particularly effective because this would compete effectively with SERCA pumps and hence reduce the rate and extent of store refilling. Stores would therefore empty more and  $I_{\text{CRAC}}$  should activate. Moreover, enhanced  $\text{Ca}^{2+}$  clearance away from the endoplasmic reticulum might also reduce  $\text{Ca}^{2+}$ -dependent inactivation of  $\text{InsP}_3$  receptors (Taylor & Traynor, 1995). Combined, this would enable  $\text{InsP}_3$  to deplete stores sufficiently for  $I_{\text{CRAC}}$  to activate. We focused on mitochondria for three reasons. First, much recent evidence has established that they can and do take up significant amounts of  $\text{Ca}^{2+}$  following cytosolic  $\text{Ca}^{2+}$  increases under physiological conditions (Rizzuto *et al.* 1993, 1998; Jouavaille *et al.* 1995;

**Figure 10. The combination of  $\text{InsP}_3$  and thapsigargin evokes a robust secretory response in weak buffer, whereas  $\text{InsP}_3$  alone is largely ineffective**

$\text{InsP}_3$  alone (●) or in combination with GTP $\gamma$ S ( $\Delta$ ) did not trigger a detectable increase in membrane capacitance, whereas  $\text{InsP}_3$  together with thapsigargin and GTP $\gamma$ S produced a prominent secretory response (○). In these experiments, cells were clamped at  $-60 \text{ mV}$ .

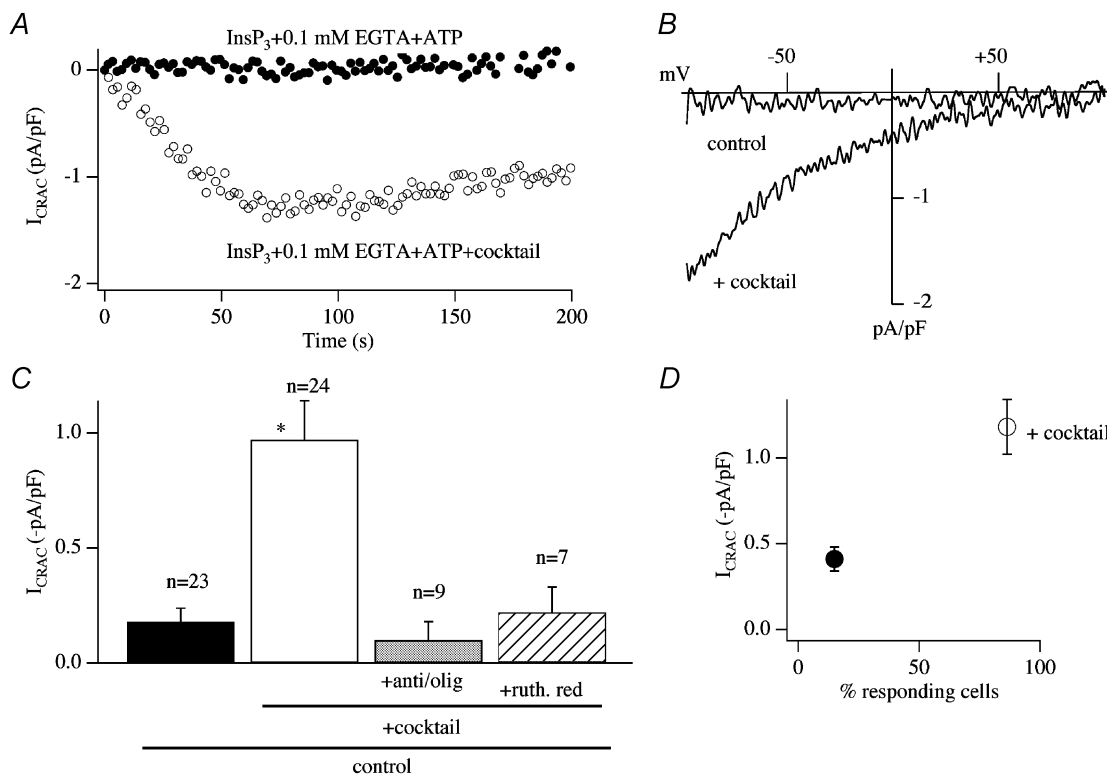


Babcock *et al.* 1997; Hajnoczky *et al.* 1999; Tinel *et al.* 1999; Montero *et al.* 1999; Park *et al.* 2001; Arnaudeau *et al.* 2001) and this  $\text{Ca}^{2+}$  uptake, which occurs via a relatively low affinity ruthenium red-sensitive uniporter, is driven by the large inner mitochondrial membrane potential (Duchen, 2000). Second, mitochondria are often physically very close to the endoplasmic reticulum (Rizzuto *et al.* 1998; Park *et al.* 2001; Csordas & Hajnoczky, 2001), an arrangement that would greatly facilitate interaction between the two  $\text{Ca}^{2+}$ -handling organelles. Third, mitochondria can take up  $\text{Ca}^{2+}$  that has entered via the store-operated pathway (Lawrie *et al.* 1996; Hoth *et al.* 1997; Hartmann & Verkhratsky, 1999).

To examine the effects of mitochondria on the ability of  $\text{InsP}_3$  to activate  $I_{\text{CRAC}}$  in weak  $\text{Ca}^{2+}$  buffer, we dialysed cells with a pipette solution containing weak buffer and no thapsigargin but supplemented with a cocktail (malate, pyruvate,  $\text{NaH}_2\text{PO}_4$ , cAMP and GTP) known to be important for sustaining respiring mitochondria in the whole cell recording configuration (Gunter & Pfeiffer, 1990; Herrington *et al.* 1996). The results were dramatic (Fig. 11).  $\text{InsP}_3$  in the absence of cocktail usually failed to activate any detectable  $I_{\text{CRAC}}$  (Fig. 11A–C) and, in the small

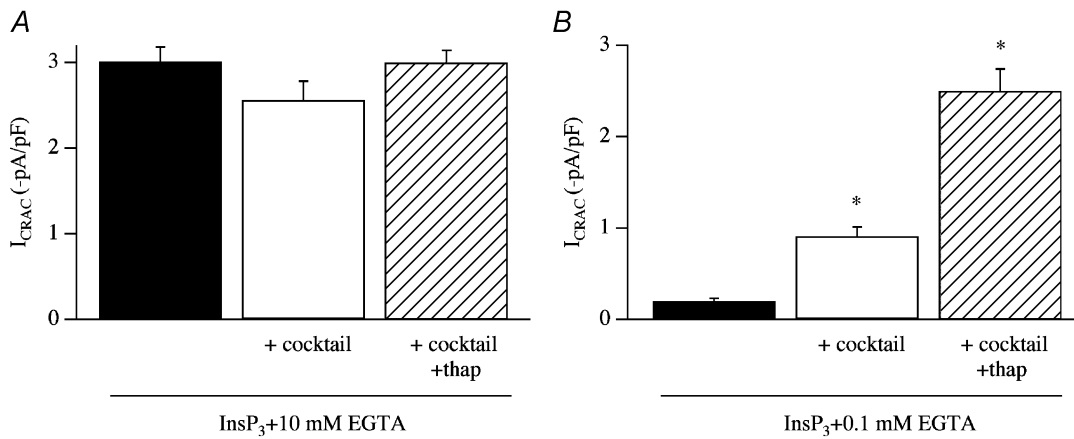
fraction of cells that responded (Fig. 11D), the current was very small. Inclusion of the cocktail had striking effects (Gilbert & Parekh, 2000). A robust  $I_{\text{CRAC}}$  could now be activated (Fig. 11A–C) and the vast majority of cells responded (Fig. 11D), although the size of the current was smaller than that seen in strong buffer. The effects of the cocktail were prevented by pre-treatment with the combination of antimycin A and oligomycin or by including ruthenium red in the pipette together with  $\text{InsP}_3$  and cocktail (Fig. 11C). Oligomycin alone was without effect (Glitsch *et al.* 2002b). Hence mitochondrial  $\text{Ca}^{2+}$  uptake is required for  $\text{InsP}_3$  to activate  $I_{\text{CRAC}}$  under physiological conditions.

The effects of the mitochondrial cocktail solution were  $\text{Ca}^{2+}$ -dependent, because no enhancing effect was seen in strong  $\text{Ca}^{2+}$  buffer (Fig. 12A). Strong  $\text{Ca}^{2+}$  buffer prevents a rise in intracellular  $\text{Ca}^{2+}$  by chelating  $\text{Ca}^{2+}$  both released from the stores and entering the cell, and hence a requirement for mitochondrial  $\text{Ca}^{2+}$  uptake would be obviated. Importantly, neither antimycin A and oligomycin nor ruthenium red impaired the ability of  $I_{\text{CRAC}}$  to activate in strong buffer, arguing against a direct channel blocking action of these drugs (Glitsch *et al.* 2002b).



**Figure 11.  $\text{InsP}_3$  activates  $I_{\text{CRAC}}$  in weak buffer provided mitochondria are energised**

A, time course of activation of  $I_{\text{CRAC}}$  in the presence of the mitochondrial cocktail (○).  $I_{\text{CRAC}}$  does not activate in weak  $\text{Ca}^{2+}$  buffer in response to  $\text{InsP}_3$  alone (●). B, steady-state  $I-V$  relationships are shown for the cells in A. C, the effects of cocktail are suppressed by preventing mitochondrial  $\text{Ca}^{2+}$  uptake by either depolarising mitochondria (pre-treatment with antimycin A ( $5 \mu\text{g ml}^{-1}$ ) and oligomycin ( $0.5 \mu\text{g ml}^{-1}$ )) or inhibiting the uniporter with ruthenium red. D, the presence of cocktail dramatically increases the fraction of cells that respond to  $\text{InsP}_3$  in weak  $\text{Ca}^{2+}$  buffer. \*  $P < 0.01$ .



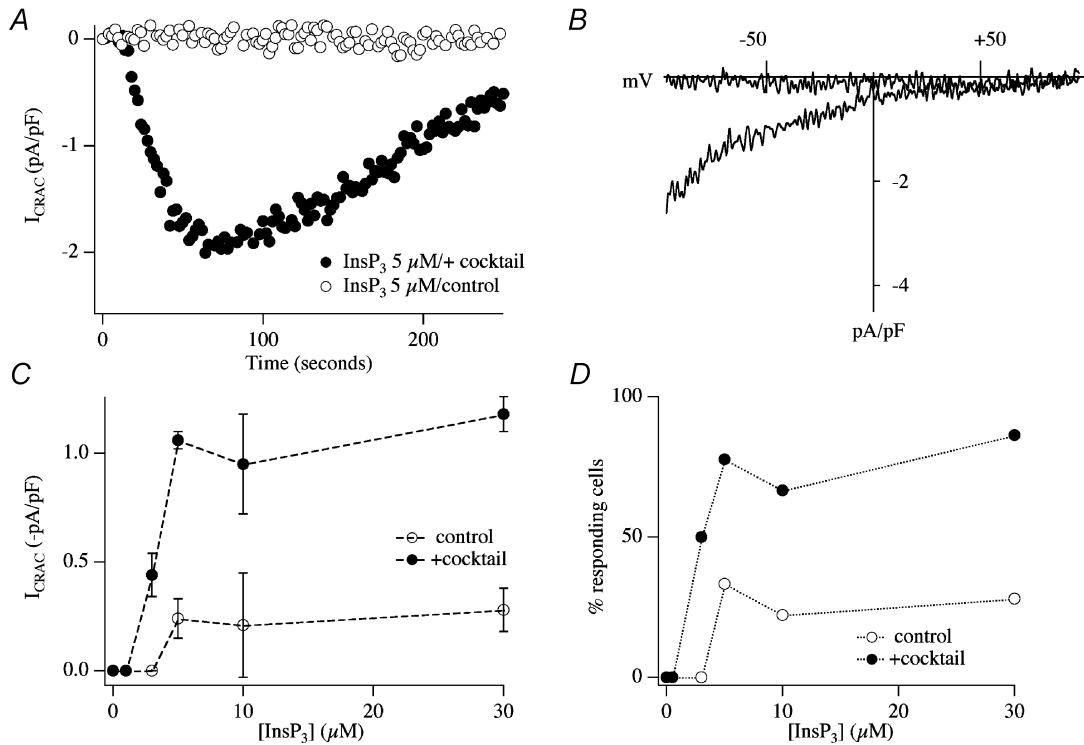
**Figure 12. Physiological antagonism between SERCA pumps and mitochondria**

A, the potentiation of  $I_{CRAC}$  by cocktail is suppressed by strong intracellular  $Ca^{2+}$  buffer (10 mM EGTA), indicating that the effect is  $Ca^{2+}$ -dependent. B, the extent of  $I_{CRAC}$  to  $InsP_3$  in weak buffer alone, in mitochondrial cocktail and cocktail plus thapsigargin is compared. \*  $P < 0.01$ .

**SERCA pumps compete with mitochondria for removal of cytosolic  $Ca^{2+}$**

In the presence of energised mitochondria, the extent of  $I_{CRAC}$  following dialysis with  $InsP_3$  is only around 35 % the size of that seen in strong buffer. This smaller current in weak buffer could reflect some  $Ca^{2+}$ -dependent store

refilling, which would imply that not all the  $Ca^{2+}$  that has been released from the stores has been taken up by mitochondria but instead that some has been resequestrated into the stores by the SERCA pumps. To examine this, we measured the size of  $I_{CRAC}$  evoked by dialysis with  $InsP_3$  in weak buffer in the absence and



**Figure 13. Energised mitochondria increase the ability of  $InsP_3$  to activate  $I_{CRAC}$  in weak  $Ca^{2+}$  buffer**

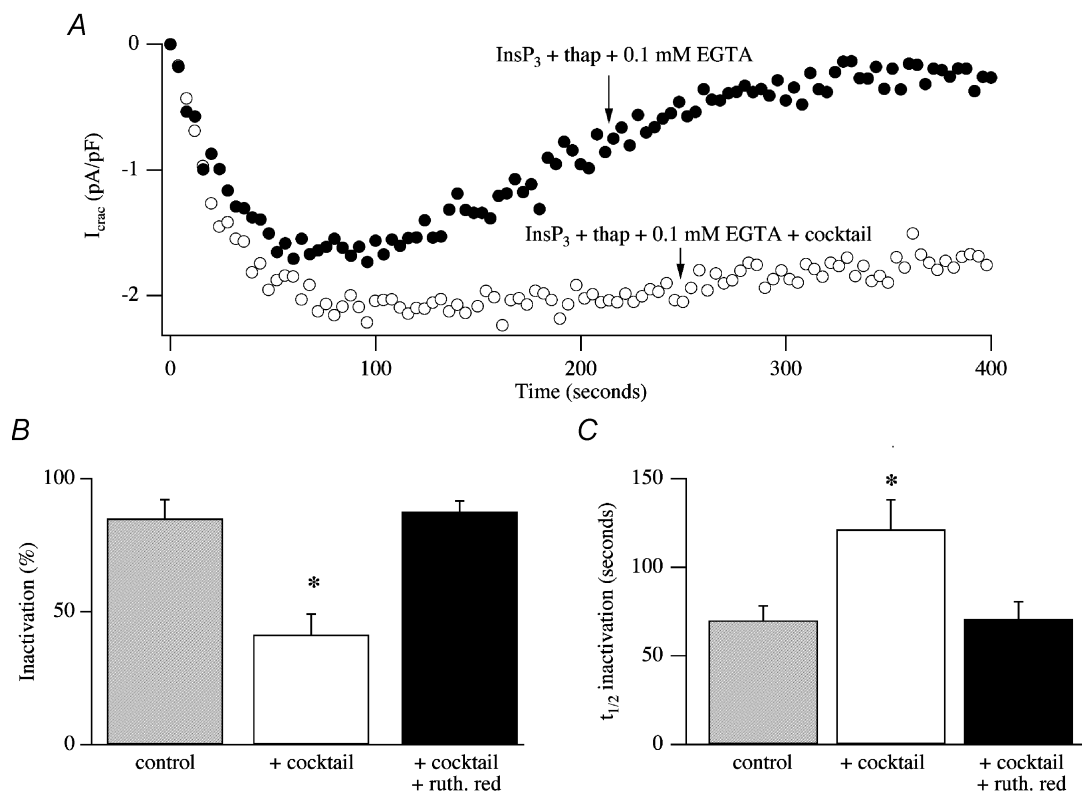
A, whereas 5  $\mu M$   $InsP_3$  is ineffective in weak buffer ( $\circ$ ), it evokes a prominent  $I_{CRAC}$  in the presence of energised mitochondria ( $\bullet$ ). B,  $I-V$  relationships for the cells shown in A, taken at steady state. C, concentration–response curve to  $InsP_3$  in the absence ( $\circ$ ) and presence ( $\bullet$ ) of cocktail. D, the fraction of cells responding versus concentration of  $InsP_3$  is plotted in the absence ( $\circ$ ) and presence ( $\bullet$ ) of energised mitochondria.

presence of thapsigargin in the cocktail (Gilibert *et al.* 2001). Results are summarised in Fig. 12B. Inclusion of thapsigargin resulted in an almost threefold increase in the size of the current, and the amplitude now was similar to that seen in strong buffer. No such potentiating effects were seen when these experiments were repeated in strong buffer (Fig. 12A). The results are consistent with the notion that mitochondria and SERCA pumps compete for removing  $\text{Ca}^{2+}$  and this form of physiological antagonism between two major  $\text{Ca}^{2+}$  clearance mechanisms, which is particularly acute under physiological conditions of weak intracellular  $\text{Ca}^{2+}$  buffering, impacts upon the extent of store depletion and subsequent activation of  $I_{\text{CRAC}}$ . In RBL cells, there is good morphological evidence documenting a very close apposition between mitochondria and SERCA pumps on the endoplasmic reticulum (Csordas & Hajnoczky, 2001), which would greatly promote competition for  $\text{Ca}^{2+}$  removal between these two organelles.

### Respiring mitochondria reduce the threshold for activation of $I_{\text{CRAC}}$ by $\text{InsP}_3$

The previous experiments have all involved supra-maximal concentrations of  $\text{InsP}_3$ . To investigate whether mitochondrial  $\text{Ca}^{2+}$  uptake potentiates  $I_{\text{CRAC}}$  to more

moderate levels of  $\text{InsP}_3$ , we compared the size of  $I_{\text{CRAC}}$  over a range of  $\text{InsP}_3$  concentrations in the presence and absence of mitochondrial cocktail (Gilibert *et al.* 2001). The results are summarised in Fig. 13. Whereas  $5 \mu\text{M}$   $\text{InsP}_3$  generally failed to activate  $I_{\text{CRAC}}$  in weak  $\text{Ca}^{2+}$  buffer (Fig. 13A and B), it evoked a sizeable current in the presence of the cocktail (Fig. 13A and B). Aggregate data are depicted in Fig. 13C. Comparing the results in the absence and presence of mitochondrial cocktail revealed several striking differences. First, the size of  $I_{\text{CRAC}}$  was potentiated in cells exposed to mitochondrial cocktail over a range of concentrations of  $\text{InsP}_3$  ( $5\text{--}30 \mu\text{M}$ ; Fig. 13C). Second, the fraction of cells that responded over this concentration range increased substantially in the presence of energised mitochondria (Fig. 13D). Third, whereas  $3 \mu\text{M}$   $\text{InsP}_3$  consistently failed to evoke any current and is therefore a subthreshold concentration in the absence of the cocktail, around half the cells responded to this dose when mitochondria were energised (Fig. 13C and D). Mitochondrial  $\text{Ca}^{2+}$  uptake therefore increases the sensitivity of store-operated  $\text{Ca}^{2+}$  influx to  $\text{InsP}_3$ , and lowers the threshold concentration of  $\text{InsP}_3$  that is required to activate  $I_{\text{CRAC}}$ . Mitochondrial  $\text{Ca}^{2+}$  buffering increases the dynamic range of concentrations over which  $\text{InsP}_3$  is able to function as



**Figure 14. Mitochondrial  $\text{Ca}^{2+}$  uptake reduces the rate and extent of  $\text{Ca}^{2+}$ -dependent slow inactivation**

A, dialysis with  $\text{InsP}_3$  and thapsigargin in weak buffer (control) activates  $I_{\text{CRAC}}$  but then the current inactivates slowly ( $\bullet$ ). The extent of inactivation is reduced if mitochondria are energised ( $\circ$ ). B and C summarise aggregate data comparing the extent (B) and rate (C) of inactivation of  $I_{\text{CRAC}}$  in control cells, in those in which cocktail was added to the solution and in cells exposed to cocktail and ruthenium red, to inhibit mitochondrial  $\text{Ca}^{2+}$  uptake. \*  $P < 0.01$ .  $t_{1/2}$ , time at which  $I_{\text{CRAC}}$  had inactivated by 50%.

the physiological messenger that triggers activation of store-operated  $\text{Ca}^{2+}$  influx (Gilibert *et al.* 2001).

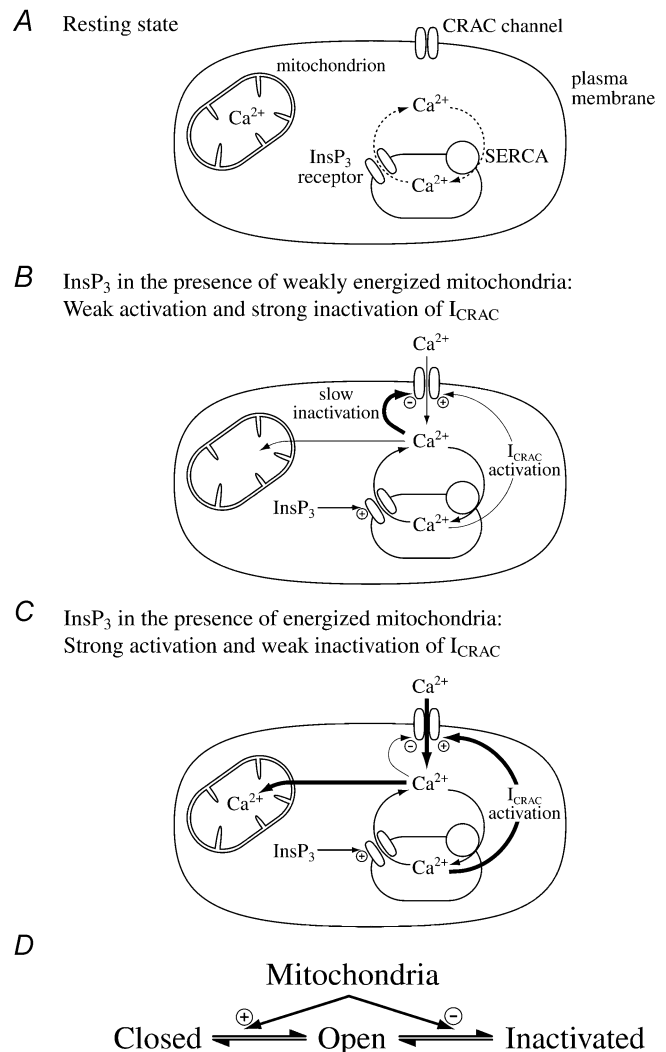
### $\text{Ca}^{2+}$ -dependent inactivation of CRAC channels is reduced by mitochondria

We have identified three mechanisms whereby a rise in cytosolic  $\text{Ca}^{2+}$  can inhibit CRAC channel activity.  $\text{Ca}^{2+}$ -dependent fast inactivation occurs when permeating  $\text{Ca}^{2+}$  ions feed back to partially inactivate the channel through which they permeated (Fierro & Parekh, 1999a). Inactivation occurs with time constants of 10 and 100 ms, is largely independent of the macroscopic current (consistent with local feedback) and is more effectively reduced by BAPTA than EGTA, suggesting that the intracellular  $\text{Ca}^{2+}$  binding site is within a few nanometres of the pore (Fierro & Parekh, 1999a). This is very similar to fast inactivation first described in mast cells and jurkat T-cells (Hoth & Penner, 1993; Zweifach & Lewis, 1995a). Importantly, fast inactivation is unaffected by either energising mitochondria (Gilibert & Parekh, 2000) or depolarising them (Glitsch *et al.* 2002b), indicating that mitochondrial  $\text{Ca}^{2+}$  uptake does not seem to interfere with this form of  $\text{Ca}^{2+}$ -dependent inactivation. Two slower  $\text{Ca}^{2+}$ -dependent regulatory pathways

also exist, operating over a time frame of several tens of seconds:  $\text{Ca}^{2+}$ -dependent store refilling (Bakowski *et al.* 2001) and  $\text{Ca}^{2+}$  entry-dependent but store-independent inactivation (Parekh, 1998). These pathways can be separated by the use of thapsigargin, as was originally described in jurkat T cells (Zweifach & Lewis, 1995b). By inhibiting store refilling, thapsigargin eliminates the store-dependent component and enables the slow  $\text{Ca}^{2+}$ -dependent inactivation mechanism to be studied in relative isolation, although the latter's contribution is probably exaggerated somewhat by thapsigargin because a major  $\text{Ca}^{2+}$  removal mechanism has been inhibited. Figure 14A shows an experiment in which a cell was dialysed with a pipette solution containing  $\text{InsP}_3$  and thapsigargin in weak  $\text{Ca}^{2+}$  buffer.  $I_{\text{CRAC}}$  activated but then gradually decayed with a half-time of around 100 s, as  $\text{Ca}^{2+}$ -dependent slow inactivation developed (● in Fig. 14A). Strikingly, if mitochondria were maintained in an energised state by including the cocktail, the extent of this slow inactivation was reduced significantly and the rate at which it developed was slowed (○ in Fig. 14A). Pooled data are summarised in Fig. 14B and C. Blocking mitochondrial  $\text{Ca}^{2+}$  uptake with ruthenium red prevented the cocktail from reducing

### Figure 15. A diagrammatic scheme for the role of mitochondria in controlling $I_{\text{CRAC}}$ under physiological conditions of weak intracellular $\text{Ca}^{2+}$ buffering

A, the resting state, where  $I_{\text{CRAC}}$  is not functioning, is shown. Stores are largely full and any  $\text{Ca}^{2+}$  that leaks from the stores is taken back up by the SERCA pumps. B, increasing  $\text{InsP}_3$  levels in the absence of active mitochondrial  $\text{Ca}^{2+}$  uptake, releases  $\text{Ca}^{2+}$  from the stores. However, the SERCA pumps are able to re-sequester sufficient  $\text{Ca}^{2+}$  so only a very small fraction of CRAC channels are activated (undetectable in whole cell mode). Furthermore, the rise in cytosolic  $\text{Ca}^{2+}$  results in  $\text{Ca}^{2+}$ -dependent slow inactivation of CRAC channels, and possibly  $\text{InsP}_3$  receptors as well. C, in the presence of respiring mitochondria,  $\text{InsP}_3$  activates macroscopic  $I_{\text{CRAC}}$ .  $\text{Ca}^{2+}$  released from the stores by  $\text{InsP}_3$  is taken up by mitochondria. This reduces the amount of  $\text{Ca}^{2+}$  available to the SERCA pumps and in the vicinity of open  $\text{InsP}_3$  receptors such that the stores are depleted sufficiently for macroscopic  $I_{\text{CRAC}}$  to activate (less refilling by SERCA pumps and less inactivation of  $\text{InsP}_3$  receptors). Some refilling does occur because inclusion of thapsigargin enhances the size of the current. Furthermore, mitochondrial  $\text{Ca}^{2+}$  buffering reduces the rate and extent of  $\text{Ca}^{2+}$ -dependent slow inactivation, thereby increasing the size and duration of the current. D, a simplified gating scheme for CRAC channels summarising the role of mitochondrial  $\text{Ca}^{2+}$  buffering. Mitochondria facilitate opening (Closed to Open transition) whilst, simultaneously, reducing inactivation (Open to Inactivated transition). In this way, mitochondria have a much larger impact on  $I_{\text{CRAC}}$  than through either transition alone.





the extent of slow inactivation (Fig. 14B and C). Hence mitochondrial  $\text{Ca}^{2+}$  uptake can prolong the time course of store-operated  $\text{Ca}^{2+}$  influx by reducing  $\text{Ca}^{2+}$ -dependent slow inactivation (Gilabert & Parekh, 2000). A similar process has recently been reported in Jurkat T cells (Hoth *et al.* 2000).

### Dual actions of mitochondria on $I_{\text{CRAC}}$

It is particularly striking that the same mechanism,  $\text{Ca}^{2+}$  uptake by mitochondria, should have such pronounced effects on both the activation and inactivation of  $I_{\text{CRAC}}$ . By facilitating the ability of  $\text{InsP}_3$  to activate  $I_{\text{CRAC}}$  (by promoting more extensive store emptying) and, at the same time, reducing  $\text{Ca}^{2+}$ -dependent slow inactivation, mitochondria will both increase the extent of  $I_{\text{CRAC}}$  as well as its duration to a much greater extent than through an action on activation or inactivation alone. A diagram summary depicting this dual action is shown in Fig. 15.

Under physiological conditions therefore, mitochondria play a pivotal role in all stages of store-operated  $\text{Ca}^{2+}$  entry, determining whether the whole cell current develops or not, to what extent and for how long it stays operational. We are now trying to understand how mitochondrial  $\text{Ca}^{2+}$  buffering impacts upon physiologically relevant responses like exocytosis.

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