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Use of an $\alpha 3$ - $\beta 4$ nicotinic acetylcholine receptor subunit concatamer to characterize ganglionic receptor subtypes with specific subunit composition reveals species-specific pharmacologic properties

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Abstract

Drug development for nicotinic acetylcholine receptors (nAChR) is challenged by subtype diversity arising from variations in subunit composition. On-target activity for neuronal heteromeric receptors is typically associated with CNS receptors that contain $\alpha 4$ and other subunits, while off-target activity could be associated with ganglionic-type receptors containing $\alpha 3\beta 4$ binding sites and other subunits, including $\beta 4$, $\beta 2$, $\alpha 5$, or $\alpha 3$ as a structural subunit in the pentamer. Additional interest in $\alpha 3 \beta 4 \alpha 5$ -containing receptors arises from genome-wide association studies linking these genes, and a single nucleotide polymorphism (SNP) in $\alpha 5$ in particular, to lung cancer and heavy smoking. While $\alpha 3$ and $\beta 4$ readily form receptors in expression system such as the *Xenopus* oocyte, since $\alpha 5$ is not required for function, simple co-expression approaches may under-represent $\alpha 5$ -containing receptors. We used a concatamer of human $\alpha 3$ and $\beta 4$ subunits to form ligand-binding domains, and show that we can force the insertions of alternative structural subunits into the functional pentamers. These $\alpha 3\beta 4$ variants differ in sensitivity to ACh, nicotine, varenicline, and cytisine. Our data indicated lower efficacy for varenicline and cytisine than expected for $\beta 4$ -containing receptors, based on previous studies of rodent receptors. We confirm that these therapeutically important $\alpha 4$ receptor partial agonists may present different autonomic-based side-effect profiles in humans than will be seen in rodent models, with varenicline being more potent for human than rat receptors and cytisine less potent. Our initial characterizations failed to find functional effects of the $\alpha 5$ SNP. However, our data validate this approach for further investigations.

Keywords

Smoking cessation; drug screening; ganglionic receptors; partial agonists

1.0 Introduction

Early single channel studies of the nicotinic acetylcholine receptors of autonomic neurons revealed a rich diversity of channel subtypes (Papke, 1993). Although it is now appreciated

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that, at least in embryonic ganglia, rapidly desensitizing $\alpha 7$ -containing nAChRs are of functional importance, blocking $\alpha 7$ receptors in adult animals generally does not impair ganglionic function, and it is likely that the early single-channel studies only detected an array of more slowly desensitizing heteromeric receptor subtypes. We now know, based on recent studies using knockout animals, that ganglionic receptors are primarily assembled as pentameric complexes containing varying arrangements of $\alpha 3$, $\beta 2$, $\beta 4$, and $\alpha 5$ subunits (David et al., 2010).

Although ganglionic blockers were the first drugs used clinically to target neuronal nAChR, most current drug development programs intended to target nAChR in the CNS, either for therapeutics or nicotine dependence, view ganglionic receptors containing $\alpha 3$ in various combinations with $\beta 2$, $\beta 4$, and $\alpha 5$ as potential sites for off-target side effects. The human $\alpha 3$ - $\beta 4$ - $\alpha 5$ genes are in a cluster at chromosomal location 15q24, and recent genome-wide association studies indicated strong correlations between single nucleotide polymorphisms in the $\alpha 3$ - $\beta 4$ - $\alpha 5$ gene cluster and risk for both cancer and nicotine dependence (Chen et al., 2009; Stevens et al., 2008). Nicotine addiction and dependence has been clearly linked to $\alpha 4^*$ and $\alpha 6^*$ receptors (Wu and Lukas, 2011), and $\alpha 5$ co-assembly into $\alpha 4^*$ receptors also promotes high sensitivity to nicotine, suggesting a link between nicotine use and $\alpha 4\beta 2\alpha 5$ receptors (Kuryatov et al., 2011). However, recent studies have also demonstrated a link between $\alpha 3\beta 4\alpha 5$ -containing receptors in the medial habenula and nicotine-related behavior, promoting receptors with combinations of these subunits as an alternative target for the development of smoking cessation drugs (Fowler et al., 2011; Frahm et al., 2011; Gallego et al., 2011; Salas et al., 2009).

It has been shown both *in vivo* (Grady et al., 2009) and in heterologous expression systems (Boulter et al., 1990; Gerzanich et al., 1998) that $\alpha 3$ will form receptors in various combinations with $\beta 2$, $\beta 4$ and $\alpha 5$ subunits. However, $\alpha 3$ and $\beta 4$ subunits readily form functional receptors without additional subunits, and functional effects of $\alpha 5$ co-expression are much more easily detectable in $\beta 2$ -containing than in $\beta 4$ -containing receptors (Gerzanich et al., 1998). Therefore, since most effectively targeted drug development relies on the use of receptors with known subunit composition, we adopted a strategy previously shown to be useful for controlling the subunit composition of $\alpha 4^*$ receptors (Zhou et al., 2003), by constructing a concatamer of $\beta 4$ and $\alpha 3$ ($\beta 4$ - $\alpha 3$), suitable for co-expression with monomeric $\alpha 3$, $\beta 2$, $\beta 4$, or $\alpha 5$ subunits. The $\beta 4$ - $\alpha 3$ construct will provide ligand-binding domains with $\alpha 3$ - $\beta 4$ interfaces, so that co-expressed subunit monomers will, with high likelihood, take the fifth position as a structural subunit in the assembled pentamer.

We provide pharmacological validation of hypothesized subunit compositions and characterize the agonist and partial-agonist profiles of the $\alpha 3\beta 4$ receptor subtypes for ACh, nicotine, and the smoking cessation agents, cytisine and varenicline. Cytisine and varenicline have been proposed to have therapeutic utility through potent partial agonist effects on CNS $\alpha 4$ -containing receptors. However, it has been a concern that the reportedly high efficacy of these agents on ganglionic $\alpha 3$ -containing receptors might be a source of autonomic side effects. We reevaluate those data and show significant differences from the previously reported data based on the use of rodent receptor subtypes and our current studies based on the use of human receptor clones. Additionally, we used the $\beta 4$ - $\alpha 3$ construct to study the D376N variant of $\alpha 5$, specifically associated with smoking and cancer risks.

2.0 Methods and materials

2.1 ACh receptor clones

Human nAChR clones were obtained from Dr. Jon Lindstrom (University of Pennsylvania, Philadelphia PA). Alpha3 and $\beta 4$ were subcloned into the pSGEM vector, obtained from Dr.

solution (115 mM NaCl, 10 mM HEPES, 2.5 mM KCl, 1.8 mM CaCl₂) containing 1 μM atropine to block muscarinic acetylcholine receptors which may be native in the oocytes. Agonist solutions were delivered from 96-deepwell plates using disposable tips. Flow rates were set at 4 ml/min.

2.5 Experimental protocols and data analysis

Responses were calculated as both net charge and peak currents. Each oocyte received initial control applications of 100 μM acetylcholine (ACh), then experimental drug applications, and follow-up control applications of ACh. Responses to experimental drug applications were calculated relative to the preceding ACh control responses in order to normalize the data, compensating for the varying levels of channel expression among the oocytes. A second normalization step was applied to adjust for the empirically determined difference between the 100 μM ACh control responses and the observed ACh maximum for each receptor subtype. Average values and standard errors (SEM) were calculated from the normalized responses of at least four oocytes for each experimental condition. For concentration-response relations, data were plotted using Kaleidagraph 3.0.2 (Abelbeck Software; Reading, PA), and curves were generated from the Hill equation:

$$\text{Response} = I_{\max} [\text{agonist}]^n / ([\text{agonist}]^n + (EC_{50})^n)$$

I_{\max} denotes the maximal response for a particular agonist/subunit combination, and n represents the Hill coefficient. I_{\max} , n , and the EC_{50} were all unconstrained for the fitting procedures, except in the case of the ACh response curves. Since ACh is our reference full agonist, for the ACh concentration-response curves the data were normalized to the observed ACh maximum, and the I_{\max} of the ACh curve fits were constrained to equal one.

3.0 Results

3.1 Experiments confirming the incorporation of specific structural subunits

When β4–6–α3 was expressed alone it was capable of forming functional receptors with properties similar to those formed when was β4–6–α3 co-expressed with β4, suggesting the assembly of α3(2)β4(3) receptors with tethered supernumerary α3 subunits. That is, the ACh concentration-response curves and the recoveries from TMPH and BTMPS responses were similar (data not shown). In order to obtain better control of structural subunit identity, the RNAs for the monomeric constructs were co-expressed at a five-fold excess to the concatamer. We confirmed pharmacologically that this approach was successful, as shown in Figure 1.

When mutations known to increase the reversibility of inhibition by the non-competitive antagonist BTMPS (Francis et al., 1998) were present in the β2 or β4 subunits expressed as monomers, the receptors assembled with the concatamers showed more rapid recovery from inhibition by BTMPS (Figure 1A), confirming the functional incorporation of the mutant subunits in the accessory subunit position with the concatamer providing the ligand binding domains.

We have previously shown that receptors containing α5 subunits have reduced sensitivity to prolonged inhibition by the antagonist TMPH (Papke et al., 2005), and the co-expression of α5 with the β4–6–α3 concatamer yielded reduced sensitivity compared to receptors formed with other subunit compositions (Figure 1B). We also confirmed that the β4–6–α3 concatamer could be used to generate functional receptors containing the potentially important α5 single nucleotide polymorphism (SNP) which generates a D376N mutation.

3.2 Pharmacological characterization of $\alpha 3\beta 4$ receptor subtypes

3.2.1 ACh responses—We conducted studies of the ACh concentration-response relationships of the various $\alpha 3\beta 4$ subtypes. The data indicated that substitution of $\alpha 3$, but not $\alpha 5$, for the $\beta 4$ subunit in the accessory position produced a decrease in ACh potency, while the substitution of a $\beta 2$ subunit produced receptors with increased ACh sensitivity (Figure 2 and Table 1). For all of the combinations studied, the kinetics of the ACh-evoked responses were similar with both high and low concentrations of ACh (Figure 3), so the results based on either peak currents or net charge were equivalent (not shown). However, as shown in Figure 3, the currents of $\alpha 3$ and $\alpha 5$ containing receptors evoked by 1 mM ACh showed decay during the agonist application pulse. This was most likely due to channel block by ACh, consistent with the appearance of rebound current when the ACh began to be washed out of the chamber.

The curves for $\alpha 3$ -containing and $\beta 2$ -containing receptors were fit with Hill slopes that were distinctly different than the curves for the $\beta 4$ and $\alpha 5$ containing receptors. It is difficult to interpret the Hill slopes for macroscopic current responses since multiple factors can affect the amplitude and kinetics of the responses (Papke, 2009). For example, a steep Hill slope, as seen for the $\alpha 3(3)\beta 4(2)$ receptors, could be produced if channel block by agonist became a limiting factor to the ACh-evoked responses, thereby creating a narrow range for effectively increasing ACh-evoked current. In this case of the $\alpha 3(3)\beta 4(2)$ receptors the potency for activation is low and does not approach the expected potency of ACh for channel block (Lape et al., 2008). The shallow Hill slope of $\beta 2$ -containing receptors could be due to a mixed population of receptors or possibly alternative subunit interfaces functioning as low potency agonist binding sites.

3.2.2 Nicotine responses—For each of the receptors studied, the waveforms of the nicotine-evoked responses were different from the ACh evoked responses (Figure 3), so that concentration-response data based on peak currents and net charge were significantly different (Figure 4). Analysis of peak currents suggested that nicotine was a full agonist for $\alpha 3(2)\beta 4(2)\beta 2$ receptors, a 30% partial agonist for $\alpha 3(2)\beta 4(2)\alpha 5$ and $\alpha 3(2)\beta 4(3)$ receptors, and with intermediate efficacy for $\alpha 3(3)\beta 4(2)$ receptors (Table 2). At high concentrations of nicotine, evoked responses were protracted for all subunit combinations. For the $\alpha 3(2)\beta 4(2)\beta 2$ receptor net charge data, this effect had the appearance of making nicotine appear more efficacious than ACh, possibly because nicotine was retained at the binding site of these receptors and remained continuously active when the free drug concentrations were being reduced.

It should also be noted that from the appearance of rapid peak currents and subsequent rebounds for several receptors, channel block by nicotine may have also played a role in shaping the unique waveforms of the responses and limiting the apparent efficacy for all subtypes other than the $\alpha 3(2)\beta 4(2)\beta 2$ receptors.

3.2.3 Responses to cytisine and varenicline—Cytisine and varenicline are agents presently in use as smoking cessation aids (Rollema et al., 2010). Their efficacy for this indication is believed to be related to a potent but weak partial agonism of the $\alpha 4\beta 2$ nAChR subtype(s) (Mihalak et al., 2006; Papke and Heinemann, 1994; Papke et al., 2011; Papke et al., 2010) which are highly expressed in the CNS. However, these agents have also been reported to be strong activators of ganglionic $\alpha 3\beta 4^*$ nAChR (Mihalak et al., 2006; Papke and Heinemann, 1994), a hypothetically off-target effect assumed to be a potential source of autonomic side effects. We evaluated the activity of these agents on the $\alpha 3\beta 4$ receptors formed with different accessory subunits (Figure 5). Contrary to expectations based on prior literature, we found these agents to be only partial agonists of the $\alpha 3\beta 4$ receptor subtypes.

Cytisine was most efficacious but least potent for $\alpha 3(3)\beta 4(2)$ receptors and had an efficacy of no more than 20% that of ACh for the other subtypes tested. The pattern was similar for varenicline except that in all cases it was at least 30-fold more potent than cytisine (Table 3). Additionally we noted that at concentrations higher than 100 μM varenicline, but not cytisine had effects on the response waveforms (not shown) similar to those of nicotine (Figure 3), (Shytle et al., 2011) suggesting limiting effects of channel block.

3.3 Species-specific features of cytisine and varenicline activation of $\alpha 3\beta 4$ receptors

The initial studies (Mihalak et al., 2006; Papke and Heinemann, 1994) which reported high efficacy of cytisine and varenicline for $\alpha 3\beta 4$ receptors utilized the standard procedure of injecting equal ratios of $\alpha 3$ and $\beta 4$ RNAs and were conducted using rat cDNA clones. More recently, we reported that for mouse $\alpha 3\beta 4$ receptors, cytisine was a full agonist, while varenicline had an efficacy approximately 50% that of ACh (Papke et al., 2010). In order to confirm that the low efficacy we observed for cytisine and varenicline was a characteristic of human $\alpha 3\beta 4$, we conducted direct comparisons between human and rat $\alpha 3\beta 4$ receptors with the standard procedure of monomer co-expression.

3.3.1 ACh responses—As shown in Figure 6A, the ACh concentration response curves were nearly identical for rat and human $\alpha 3\beta 4$ receptors, with an ACh potency like that of the $\alpha 3(2)\beta 4(3)$ receptors generated with controlled accessory subunit (Table 4).

3.3.2 Responses to cytisine and varenicline—Consistent with previous data on rat $\alpha 3\beta 4$ (Papke and Heinemann, 1994) we found (Figure 6B) cytisine to be a full agonist for rat $\alpha 3\beta 4$ receptors, although the potency was rather low ($520 \pm 50 \mu\text{M}$). At all concentrations of cytisine $> 30 \mu\text{M}$, the responses of human $\alpha 3\beta 4$ receptors formed by the expression of monomers were significantly ($p < .001$) lower than the responses of rat receptors, with curve fits for the concentration-response curves indicating both lower I_{max} and higher EC_{50} values for human $\alpha 3\beta 4$ receptors compared to rat. It should be noted, however that the expression of monomers did suggest a higher cytisine I_{max} relative to ACh than was seen in the concatamer experiments.

The potency and efficacy of varenicline for human $\alpha 3\beta 4$ in the monomer co-expression experiments (Figure 6B) were inbetween the values for putative $\alpha 3(3)\beta 4(2)$ and $\alpha 3(2)\beta 4(3)$ receptors obtained with the concatamer (Table 3). Although the efficacy of varenicline was similar for rat and human $\alpha 3\beta 4$, the potency of varenicline was approximately 5-fold greater for human than for rat, so that the evoked responses at concentrations from 3 μM to 30 μM varenicline were significantly larger for human than for rat receptors, in striking contrast to the results obtained with cytisine.

3.4 Evaluations of the functional effects of the $\alpha 5$ SNP

3.4.1 Agonist-evoked responses—The $\alpha 5$ SNP D376N was studied along with the wild-type $\alpha 5$ in all of the agonist concentration-response studies (Figure 7 A–C). No functional effects of the $\alpha 5$ SNP were detected in those experiments (Tables 1–3). Although the curve fit values for nicotine net charge data suggest that there might be an effect, it should be noted that the curve for the wild-type $\alpha 5$ data is not well fit by the Hill equation since no clear plateau response was achieved at concentrations $\sim 3 \text{ mM}$ nicotine.

3.4.2 Inhibition by an $\alpha 7$ -selective agonist—Orthosteric ligands that are selective for the $\alpha 7$ nAChR have been proposed for a variety of indications from Alzheimer's disease to asthma. In addition to producing selective activation of $\alpha 7$ receptors, most of these drugs also inhibit other nAChR subtypes such as $\alpha 3\beta 4^*$ receptors (Horenstein et al., 2008). We evaluated the inhibitory activity of a prototypical agent in this class, GTS-21 (3-

(2,4dimethoxybenzylidene)anabaseine) on $\alpha 3\beta 4$ receptors incorporating either wild-type $\alpha 5$ or the $\alpha 5$ SNP as the accessory subunit (Figure 7D). The IC_{50} for the GTS-21 inhibition of the concatamer co-expressed with wild-type $\alpha 5$ was $9.17 \pm 1.08 \mu M$, not significantly different than when co-expressed with $\alpha 5D376N$ ($8.63 \pm 1.41 \mu M$).

4.0 Discussion

It has been shown both in vivo and in heterologous expression systems that $\alpha 3$ will form receptors in various combinations with $\beta 2$, $\beta 4$, and $\alpha 5$ subunits. Unconstrained expression, when all of these subunits are present, results in a heterogeneous population of receptor subtypes both in neurons and in oocytes. We adopted the strategy of co-expressing a concatamer of $\beta 4$ and $\alpha 3$ ($\beta 4-6-\alpha 3$), with monomeric $\beta 2$, $\beta 4$, or $\alpha 5$ subunits and were able to confirm that we obtained pharmacologically distinct populations of receptors useful for drug characterization.

For the subtypes specifically associated with the $\alpha 3-\beta 4-\alpha 5$ gene cluster, our approach to co-expression appeared to be largely successful at generating distinct, potentially homogeneous, populations of receptors. However, it may be noted that the acetylcholine response curve of the putative $\alpha 3(2)\beta 4(2)\beta 2$ receptors (Figure 2) appears as though it may contain two populations of receptors. There appears to be a high sensitivity component, likely to contain $\beta 2$ subunits, and an incomplete suppression of the $\alpha 3\beta 4$ type receptors that occur when the concatamers were expressed alone.

We found that nicotine responses were affected by the identity of the $\alpha 3\beta 4^*$ structural subunits, as previously reported for $\alpha 4\beta 2^*$ receptors (Kuryatov et al., 2008). Receptors containing $\beta 2$ structural subunits were most sensitive to low concentrations of nicotine. Our data also indicate that structural subunits will affect the channel-blocking activity of nicotine, as well as other noncompetitive antagonists.

Our data indicate that the specific $\alpha 3\beta 4$ receptor subtypes will have unique profiles of response to cytosine and related agents that are in development for smoking cessation. Importantly, our data highlighted a disparity between the activity of the agents on human $\alpha 3\beta 4$ receptor subtypes and previous findings based on rodent receptors. It is particularly interesting that the species-specific differences for the two agents tested were in opposite directions and therefore likely to rely on different elements in the receptors. We typically use rodent models for preclinical testing of whole animal drug effects. In the context of our previous studies of mouse nAChR (Papke et al., 2010), we noted that cytosine and varenicline have similar activity profiles for rodent and human $\alpha 4^*$ and $\alpha 7^*$ type receptors. However, data for human $\alpha 3\beta 4^*$ receptors were not available at that time. Our current results therefore highlight the potential importance of comprehensive cross-species validation of pharmacology before the translation of preclinical results to human therapeutics.

Constipation is a commonly reported side effect of varenicline-based smoking cessation programs. This side effect might easily be associated with depolarizing block of autonomic ganglia, consistent with the high sensitivity to varenicline we see for human $\alpha 3\beta 4$ receptors. Cytosine (Tabex®) is commonly used as a smoking cessation agent in Europe, and reportedly has only mild side-effects, which may in part be due to the low sensitivity of human $\alpha 3\beta 4$ receptors to cytosine. Interestingly, $\alpha 3\beta 4$ receptors in the central nervous system (CNS) have also been linked to nicotine's effects on appetite and weight loss (Mineur et al., 2011), and so differences in the $\alpha 3\beta 4$ activity of specific smoking cessation agents may also affect the process of weight gain that often occurs following successful smoking cessation. Additionally, there have been numerous reports of adverse neuropsychiatric side

effects for varenicline, while there have been fewer such reports for cytisine (Moore et al., 2011; Shytle et al., 2011). The potential importance of $\alpha 3\beta 4$ receptors in the medial habenula and other parts of the brain associated with mood and behavior might suggest that the differences in the neuropsychiatric side effect profiles of varenicline and cytisine could also be related to their differing activity profiles for human $\alpha 3\beta 4^*$ receptors.

The gene for the nAChR $\alpha 5$ subunit was first identified as part of the gene cluster with $\alpha 3$ and $\beta 4$ in 1990 (Boulter et al., 1990). The predicted gene product was classified as an alpha subunit based on sequence similarity to other nAChR alpha subunits, most notably the presence of the two vicinal cystines in the structural subdomain of the ligand binding site currently identified as the C-loop. The $\alpha 5$ gene was subsequently confirmed to be expressed in autonomic ganglia (Wang et al., 2002), hippocampus (Sudweeks and Yakel, 2000) and the cortex (Han et al., 2000), as well as the particularly nAChR-rich brain structures of the medial habenula and interpeduncular nucleus (Fowler et al., 2011; Grady et al., 2009). However, for many years the identification of the protein as a putative alpha subunit was something of a puzzle since it was not functional in heterologous expression systems either alone or in combinations with $\beta 2$ or $\beta 4$, subunits known to form functional receptors with neuronal alpha subunits. The $\alpha 5$ subunit was subsequently confirmed to be an obligatory structural subunit that could form functional receptors in combination with $\alpha 4$ and $\beta 2$, or $\alpha 3$ and $\beta 4$, and possibly other combinations of subunits which would not require $\alpha 5$ for function (Ramirez-Latorre et al., 1996) (Grinevich et al., 2005). Although $\alpha 5$ subunits were not required for function, the presence of $\alpha 5$ subunits has significant effects on receptor pharmacology, in most cases increasing the agonist sensitivity of the receptors formed.

Based on immunoprecipitation and Western blot studies of wild-type and knockout mutant mice, it has been estimated that the nAChR of mouse autonomic ganglia contain approximately 55% $\alpha 3\beta 4$, 21% $\alpha 3\beta 4\beta 2$, and 24% $\alpha 3\beta 4\alpha 5$ nAChRs (David et al., 2010). Therefore, although $\alpha 5$ -containing receptors play a role in autonomic transmission, the knockout of $\alpha 5$ does not produce a serious deficit in autonomic function, as seen with $\alpha 3$ or $\beta 4$ knockouts (Wang et al., 2002). Knockout of $\alpha 5$ however, does appear to impact nicotine-mediated behaviors relevant to development of nicotine dependence (Jackson et al., 2011) and adult brain circuitry required for attentional performance (Bailey et al., 2011). It may be the case that the role of $\alpha 5$, in combination with $\alpha 3$ and $\beta 4$ in the habenular/interpeduncular circuit, accounts for the knockout phenotype related to nicotine associated behavior, while the phenotype associated with attentional performance may relate to receptors containing $\alpha 4$ and $\beta 2$ in combination with $\alpha 5$ in the cortex, hippocampus, and other parts of the brain associated with cognitive function (Bailey et al., 2011).

The polymorphisms in the $\alpha 3$ - $\beta 4$ - $\alpha 5$ gene cluster associated with cancer risk and smoking behavior include several variations in untranslated sequence and a single salient mutation in the sequence coding for the $\alpha 5$ subunit protein. This SNP changes an aspartic acid to an asparagine at amino acid 376 (mature protein numbering, or 398 from start codon), a site within the putative amphipathic helix of the intracellular domain. In co-expression studies with $\alpha 4$ - $\beta 2$ concatamers, Lindstrom and co-workers (Kuryatov et al., 2011) found this mutant in $\alpha 5$ lowered the calcium permeability of the receptors compared to wild-type and may have also affected the receptor's kinetic properties. They studied the effects of the $\alpha 5$ SNP in co-expression with $\alpha 3$ and $\beta 4$ using the more conventional approach of expressing monomeric subunits at ratios hypothesized to give enriched populations of $\alpha 5$ -containing receptors. Using that approach they found no clear effect of the $\alpha 5$ SNP on the calcium permeability of the putative $\alpha 3\beta 4\alpha 5$ receptors. Functional effects were also undetected when these subunits were co-expressed in HEK cells (Li et al., 2011). Consistent with these previous studies, no functional effects of the $\alpha 5$ SNP were detected in the current study on the agonist response profiles of the $\alpha 3\beta 4\alpha 5$ receptors. However, as with the introduction of

any new experimental tool, our experiments touch upon only a small fraction of the questions that might be addressed.

5.0 Conclusion

Receptors containing $\alpha 3\beta 4$ nAChR subunits have long been considered strictly off target for nAChR targeting CNS therapeutics. However, as new roles are being discovered for these receptors in the CNS, in regard to nicotine use and appetite control (Mineur et al., 2011), it becomes important to characterize the $\alpha 3\beta 4$ receptor subtypes and understand how to target them selectively. Therefore programs are being developed for high throughput screening of $\alpha 3\beta 4$ -containing receptors, and the use of the $\beta 4-6-\alpha 3$ concatamer will permit detailed follow up characterizations of potential new drug candidates that may be applied to smoking and other novel CNS indications. Our data additionally highlight the importance of cross characterization of potentially useful therapeutic agents with *in vitro* tests of both the receptors relevant to animals models and the human receptor subtypes that will ultimately be the molecular targets of therapeutics.

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Abbreviations

BTMPS	bis-(2,2,6,6-tetramethyl-4-piperidiny)-sebacate
TMPH	2,2,6,6-tetramethylpiperidin-4-yl heptanoate
GTS-21	3-(2,4dimethoxybenzylidene)anabaseine
SNP	single nucleotide polymorphism

References

- Bailey CD, De Biasi M, Fletcher PJ, Lambe EK. The nicotinic acetylcholine receptor alpha5 subunit plays a key role in attention circuitry and accuracy. *J Neurosci*. 2011; 30:9241–9252. [PubMed: 20610759]
- Boulter J, O'Shea-Greenfield A, Duvoisin RM, Connolly J, Wada E, Jensen A, Gardner PD, Ballivet M, Deneris ES, McKinnon D, Heinemann S, Patrick J. $\alpha 3$, $\alpha 5$, and $\beta 4$: Three members of the rat neuronal nicotinic acetylcholine receptor-related gene family form of gene cluster. *J. Biol. Chem*. 1990; 265:4472–4482. [PubMed: 1689727]
- Chen X, Chen J, Williamson VS, An SS, Hetteima JM, Aggen SH, Neale MC, Kendler KS. Variants in nicotinic acetylcholine receptors alpha5 and alpha3 increase risks to nicotine dependence. *Am J Med Genet B Neuropsychiatr Genet*. 2009; 150B:926–933. [PubMed: 19132693]
- David R, Ciuraszkiewicz A, Simeone X, Orr-Urtreger A, Papke RL, McIntosh JM, Huck S, Scholze P. Biochemical and functional properties of distinct nicotinic acetylcholine receptors in the superior cervical ganglion of mice with targeted deletions of nAChR subunit genes. *Eur J Neurosci*. 2010; 31:978–993. [PubMed: 20377613]
- Fowler CD, Lu Q, Johnson PM, Marks MJ, Kenny PJ. Habenular alpha5 nicotinic receptor subunit signalling controls nicotine intake. *Nature*. 2011; 471:597–601. [PubMed: 21278726]
- Frahm S, Slimak MA, Ferrarese L, Santos-Torres J, Antolin-Fontes B, Auer S, Filkin S, Pons S, Fontaine JF, Tsetlin V, Maskos U, Ibanez-Tallon I. Aversion to nicotine is regulated by the

- balanced activity of beta4 and alpha5 nicotinic receptor subunits in the medial habenula. *Neuron*. 2011; 70:522–535. [PubMed: 21555077]
- Francis MM, Choi KI, Horenstein BA, Papke RL. Sensitivity to voltage-independent inhibition determined by pore-lining region of ACh receptor. *Biophys. J.* 1998; 74:2306–2317. [PubMed: 9591658]
- Gallego X, Molas S, Amador-Arjona A, Marks MJ, Robles N, Murtra P, Armengol L, Fernandez-Montes RD, Gratacos M, Pumarola M, Cabrera R, Maldonado R, Sabria J, Estivill X, Dierssen M. Overexpression of the CHRNA5/A3/B4 genomic cluster in mice increases the sensitivity to nicotine and modifies its reinforcing effects. *Amino Acids*. 2011 Epub ahead of print.
- Gerzanich V, Wang F, Kuryatov A, Lindstrom J. alpha 5 Subunit alters desensitization, pharmacology, Ca⁺⁺ permeability and Ca⁺⁺ modulation of human neuronal alpha 3 nicotinic receptors. *J. Pharmacol. Exp. Ther.* 1998; 286:311–320. [PubMed: 9655874]
- Grady SR, Moretti M, Zoli M, Marks MJ, Zanardi A, Pucci L, Clementi F, Gotti C. Rodent habenulo-interpeduncular pathway expresses a large variety of uncommon nAChR subtypes, but only the alpha3beta4* and alpha3beta3beta4* subtypes mediate acetylcholine release. *J Neurosci*. 2009; 29:2272–2282. [PubMed: 19228980]
- Grinevich VP, Letchworth SR, Lindenberger KA, Menager J, Mary V, Sadieva KA, Buhlman LM, Bohme GA, Pradier L, Benavides J, Lukas RJ, Bencherif M. Heterologous expression of human {alpha}6{beta}4{beta}3{alpha}5 nicotinic acetylcholine receptors: binding properties consistent with their natural expression require quaternary subunit assembly including the {alpha}5 subunit. *J Pharmacol Exp Ther.* 2005; 312:619–626. [PubMed: 15356217]
- Han ZY, Le Novere N, Zoli M, Hill JA Jr, Champtiaux N, Changeux JP. Localization of nAChR subunit mRNAs in the brain of *Macaca mulatta*. *Eur J Neurosci*. 2000; 12:3664–3674. [PubMed: 11029636]
- Horenstein NA, Leonik FM, Papke RL. Multiple pharmacophores for the selective activation of nicotinic alpha7-type acetylcholine receptors. *Mol Pharmacol*. 2008; 74:1496–1511. [PubMed: 18768388]
- Jackson KJ, Marks MJ, Vann RE, Chen X, Gamage TF, Warner JA, Damaj MI. Role of alpha5 nicotinic acetylcholine receptors in pharmacological and behavioral effects of nicotine in mice. *J Pharmacol Exp Ther.* 2011; 334:137–146. [PubMed: 20400469]
- Kuryatov A, Berrettini W, Lindstrom J. Acetylcholine receptor (AChR) alpha5 subunit variant associated with risk for nicotine dependence and lung cancer reduces (alpha4beta2)alpha5 AChR function. *Mol Pharmacol*. 2011; 79:119–125. [PubMed: 20881005]
- Kuryatov A, Onksen J, Lindstrom J. Roles of accessory subunits in alpha4beta2(*) nicotinic receptors. *Mol Pharmacol*. 2008; 74:132–143. [PubMed: 18381563]
- Lape R, Colquhoun D, Sivilotti LG. On the nature of partial agonism in the nicotinic receptor superfamily. *Nature*. 2008; 454:722–727. [PubMed: 18633353]
- Li P, McCollum M, Bracamontes J, Steinbach JH, Akk G. Functional characterization of the alpha5(Asn398) variant associated with risk for nicotine dependence in the alpha3beta4alpha5 nicotinic receptor. *Mol Pharmacol*. 2011; 80:818–827. [PubMed: 21856741]
- Mihalak KB, Carroll FI, Luetje CW. Varenicline is a partial agonist at alpha4beta2 and a full agonist at alpha7 neuronal nicotinic receptors. *Mol Pharmacol*. 2006; 70:801–805. [PubMed: 16766716]
- Miller C. Genetic manipulation of ion channels: a new approach to structure and mechanism. *Neuron*. 1989; 2:1195–1205. [PubMed: 2483110]
- Mineur YS, Abizaid A, Rao Y, Salas R, DiLeone RJ, Gundisch D, Diano S, De Biasi M, Horvath TL, Gao XB, Picciotto MR. Nicotine decreases food intake through activation of POMC neurons. *Science*. 2011; 332:1330–1332. [PubMed: 21659607]
- Moore TJ, Furberg CD, Glenmullen J, Maltzberger JT, Singh S. Suicidal behavior and depression in smoking cessation treatments. *PLoS One*. 2011; 6:e27016. [PubMed: 22073240]
- Papke RL. The kinetic properties of neuronal nicotinic receptors: genetic basis of functional diversity. *Prog. in Neurobio*. 1993; 41:509–531.
- Papke RL. Tricks of Perspective: Insights and limitations to the study of macroscopic currents for the analysis of nAChR activation and desensitization. *Journal of Molecular Neuroscience*. 2009; 40:77–86. [PubMed: 19672724]

- Papke RL, Buhr JD, Francis MM, Choi KI, Thinschmidt JS, Horenstein NA. The effects of subunit composition on the inhibition of nicotinic receptors by the amphipathic blocker 2,2,6,6-tetramethylpiperidin-4-yl heptanoate. *Mol Pharmacol*. 2005; 67:1977–1990. [PubMed: 15761116]
- Papke RL, Heinemann SF. The partial agonist properties of cytosine on neuronal nicotinic receptors containing the beta2 subunit. *Mol. Pharm*. 1994; 45:142–149.
- Papke RL, Trocme-Thibierge C, Guendisch D, Abbas Al Rubaiy SA, Bloom SA. Electrophysiological perspectives on the therapeutic use of nicotinic acetylcholine receptor partial agonists. *J Pharmacol Exp Ther*. 2011; 337:367–379. [PubMed: 21285282]
- Papke RL, Wecker L, Stitzel JA. Activation and inhibition of mouse muscle and neuronal nicotinic acetylcholine receptors expressed in *Xenopus* oocytes. *J Pharmacol Exp Ther*. 2010; 333:501–518. [PubMed: 20100906]
- Ramirez-Latorre J, Yu C, Qu X, Perin F, Karlin A, Role L. Functional contributions of alpha5 subunit to neuronal acetylcholine receptor channels. *Nature*. 1996; 380:347–351. [PubMed: 8598930]
- Rollema H, Shrikhande A, Ward KM, Tingley FD 3rd, Coe JW, O'Neill BT, Tseng E, Wang EQ, Mather RJ, Hurst RS, Williams KE, de Vries M, Cremers T, Bertrand S, Bertrand D. Pre-clinical properties of the alpha4beta2 nicotinic acetylcholine receptor partial agonists varenicline, cytisine and daniacline translate to clinical efficacy for nicotine dependence. *Br J Pharmacol*. 2010; 160:334–345. [PubMed: 20331614]
- Salas R, Sturm R, Boulter J, De Biasi M. Nicotinic receptors in the habenulo-interpeduncular system are necessary for nicotine withdrawal in mice. *J Neurosci*. 2009; 29:3014–3018. [PubMed: 19279237]
- Shytle, R.; Sheehan, D.; Sanberg, PR.; Arias, HR. Neuronal nicotinic receptors as therapeutic targets for mood disorders. In: Arias, HR., editor. *Pharmacology of Nicotinic Acetylcholine Receptors from the Basic and Therapeutic Perspectives*. India: Research Signpost; 2011. p. 187-198.
- Stevens VL, Bierut LJ, Talbot JT, Wang JC, Sun J, Hinrichs AL, Thun MJ, Goate A, Calle EE. Nicotinic receptor gene variants influence susceptibility to heavy smoking. *Cancer Epidemiol Biomarkers Prev*. 2008; 17:3517–3525. [PubMed: 19029397]
- Sudweeks SN, Yakel JL. Functional and molecular characterization of neuronal nicotinic ACh receptors in rat CA1 hippocampal neurons. *J Physiol*. 2000; 527(Pt 3):515–528. [PubMed: 10990538]
- Wang N, Orr-Urtreger A, Korczyn AD. The role of neuronal nicotinic acetylcholine receptor subunits in autonomic ganglia: lessons from knockout mice. *Prog Neurobiol*. 2002; 68:341–360. [PubMed: 12531234]
- Wu J, Lukas RJ. Naturally-expressed nicotinic acetylcholine receptor subtypes. *Biochem Pharmacol*. 2011; 82:800–807. [PubMed: 21787755]
- Zhou Y, Nelson ME, Kuryatov A, Choi C, Cooper J, Lindstrom J. Human alpha4beta2 acetylcholine receptors formed from linked subunits. *J Neurosci*. 2003; 23:9004–9015. [PubMed: 14534234]

Highlights

A concatamer of human $\alpha 3$ and $\beta 4$ nAChR subunits was constructed for expression in *Xenopus* oocytes.

Insertion of specific subunits was confirmed with selective antagonists and resistant mutants.

No effects of the $\alpha 5$ D376N SNP were observed on agonist-evoked responses of $\alpha 3\beta 4\alpha 5$ receptors.

Compared to rat, human $\alpha 3\beta 4$ receptors respond more to varenicline and less to cytisine.

Our data will potentially impact the side-effect liability of agents used for smoking cessation.

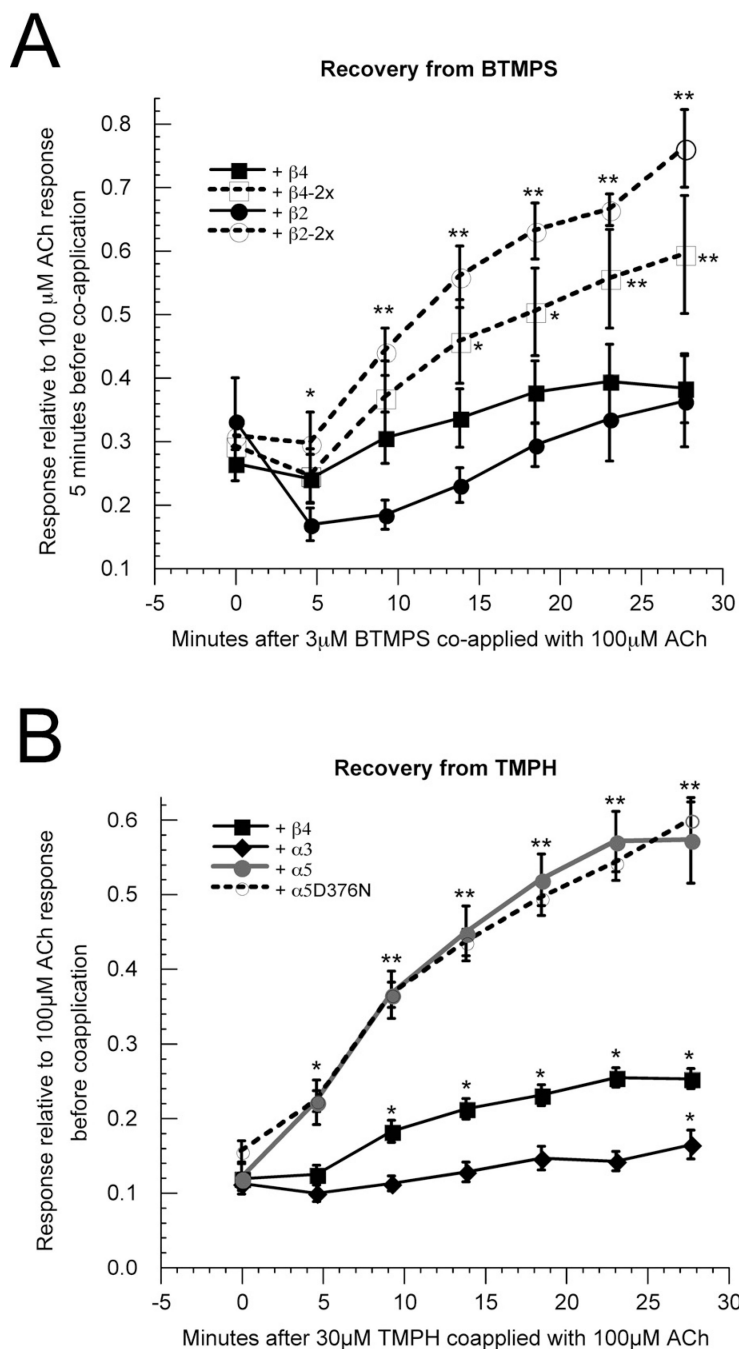


Figure 1. BTMPS and TMPH confirm the functional incorporation of structural subunits. **A)** The β4–6–α3 concatamer was co-expressed at 1:5 RNA ratio with either wild type β4 or β2 or with beta subunits containing mutations at the 6' and 10' sites (Miller, 1989) in the second transmembrane domain (TM2) (β2-2x and β4-2x). These sites have previously been shown to regulate the reversibility of the use-dependent antagonist BTMPS (Francis et al., 1998). After obtaining two control responses to the application of 100 μM ACh, 3 μM BTMPS was co-applied with 100 μM ACh. While cells expressing wild-type beta subunits showed no significant increase in response between the original co-application response and responses recorded 14–28 minutes later, cells expressing the beta subunit mutants showed progressive

recovery, and responses after 9.2 minutes ($\beta 2$ -2x) and 18.5 minutes ($\beta 4$ -2x) were significantly larger than those recorded during the co-application, * indicates $p < 0.05$, ** indicates $p < 0.001$. All points represent the average data (\pm SEM) for at least four cells. B) TMPH is an amphipathic non-competitive antagonist of heteromeric neuronal nAChR, which produces long-lived inhibition of receptors containing only $\alpha 3$ and $\beta 4$ or $\alpha 4$ and $\beta 2$ subunits and more readily-reversible inhibition of receptors containing $\alpha 5$ as an accessory subunit. The $\beta 4$ - $\alpha 3$ concatamer was co-expressed at 1:5 RNA ratio with either wild-type $\beta 4$, $\beta 2$, or $\alpha 5$ subunits or with the $\alpha 5D376N$ variant. After obtaining two control responses to the application of 100 μ M ACh, 30 μ M TMPH was co-applied with 100 μ M ACh. Cells expressing $\alpha 3$ or $\beta 4$ subunits showed much less recovery after the co-application response than the cells expressing the $\alpha 5$ subunits, where responses after 4.6 minutes were significantly larger than those recorded during the co-application. Cells expressing $\alpha 3$ or $\beta 4$ subunits required 28 minutes and 9.2 minutes, respectively, for responses to be significantly larger than those recorded during the co-application, * indicates $p < 0.05$, ** indicates $p < 0.001$. At all points after the co-applications the responses of the $\alpha 5$ -containing receptors were significantly larger than those of the $\alpha 3$ or $\beta 4$ -containing receptors ($p < 0.01$). All points represent the average data (\pm SEM) for at least four cells.

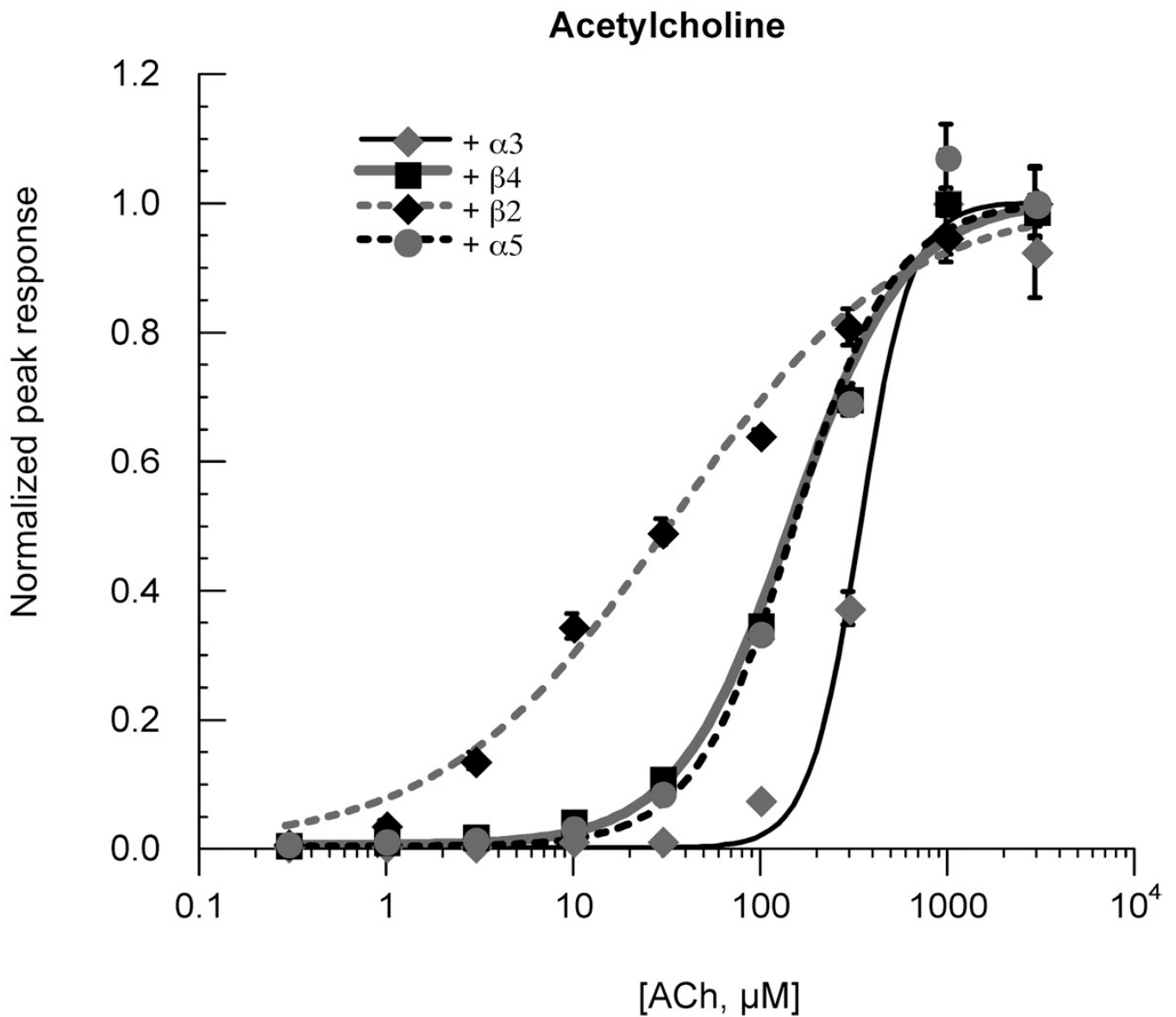


Figure 2. ACh concentration-response curves. The $\beta 4-6-\alpha 3$ concatamer was co-expressed at 1:5 RNA ratio with either $\alpha 3$, $\beta 4$, $\beta 2$, or $\alpha 5$. Data were initially normalized to 100 μM ACh control responses obtained immediately prior to the test responses and subsequently adjusted to the empirically determined ACh maximum responses. ACh controls remained of stable amplitude throughout each experiment. All points represent the average data (\pm SEM) for at least four cells. EC_{50} values (Table 1) were determined by fits of the data to the Hill equation (Methods).

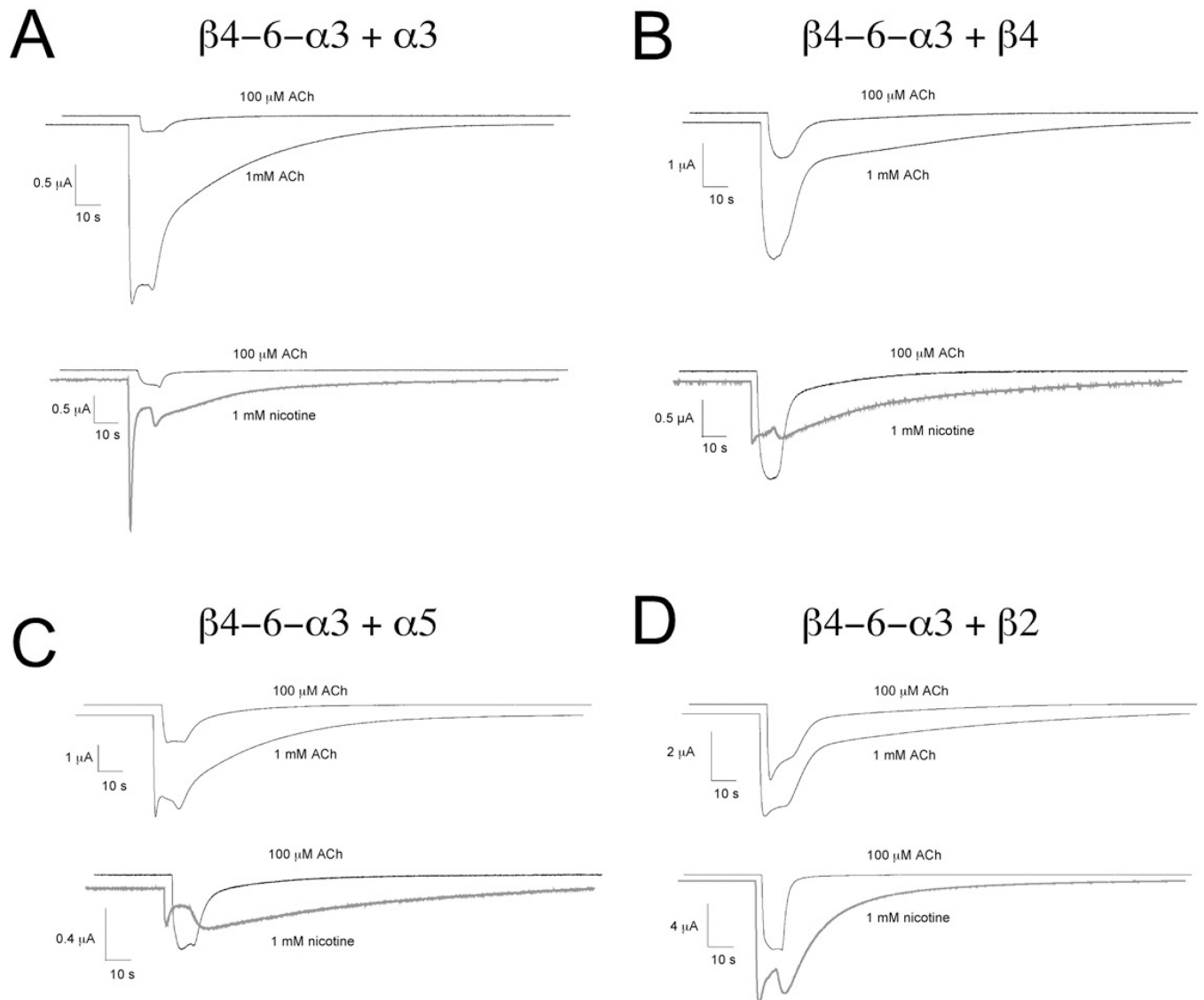


Figure 3. Sample traces of high ACh and nicotine responses of the receptors formed by concatamer and monomer co-expression, compared to 100 μ M ACh controls obtained from the same cells. Note that the waveforms of the 1 mM ACh-evoked responses are relatively similar to the 100 μ M ACh control responses, with only small indications of channel block for the $\alpha 3(3)\beta 4(2)$ (A) and $\alpha 3(2)\beta 4(2)\alpha 5$ (C) receptors. In contrast, there is strong indication of channel block and rebound for the nicotine-evoked responses of all the subtypes.

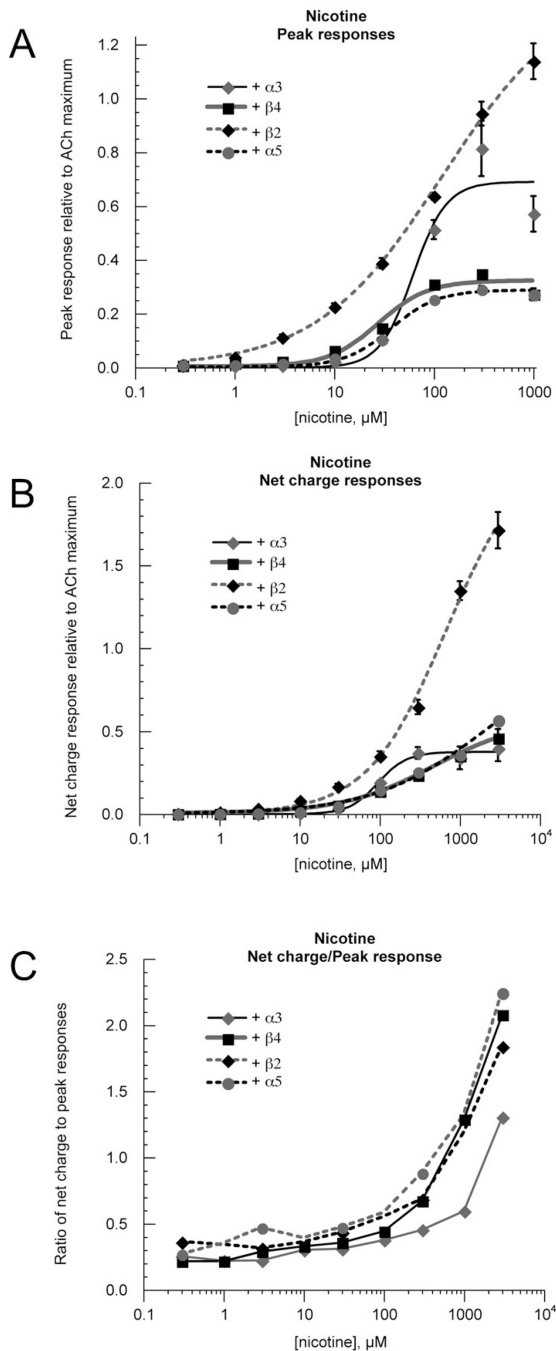
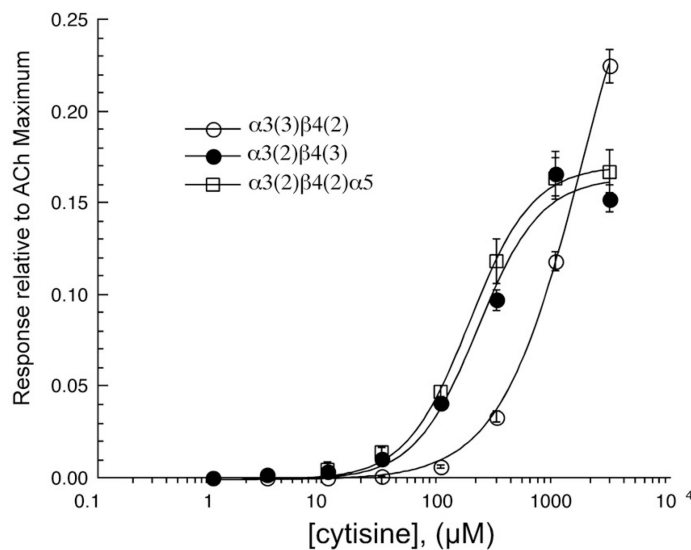


Figure 4. Nicotine peak current and net charge responses. **A)** Nicotine peak current concentration-response curves. The $\beta 4$ - $\alpha 3$ concatamer was co-expressed at a 1:5 RNA ratio with either $\alpha 3$, $\beta 4$, $\beta 2$, or $\alpha 5$. Data were initially normalized to 100 μM ACh control responses obtained immediately prior to the test responses and subsequently adjusted to the empirically determined ACh maximum responses. **B)** Nicotine net-charge concentration-response curves. The $\beta 4$ - $\alpha 3$ concatamer was co-expressed at a 1:5 RNA ratio with either $\alpha 3$, $\beta 4$, $\beta 2$, or $\alpha 5$. Data were initially normalized to 100 μM ACh control responses obtained immediately prior to the test responses and subsequently adjusted to the empirically

determined ACh maximum responses. **C)** The ratio of net charge to peak current (relative to 100 μM ACh controls) for nicotine-evoked responses. **A–C** Data for progressive increases in nicotine concentration were used from a single experiment only under conditions when ACh controls remained of stable amplitude throughout each experiment. In some cases, nicotine applications prevented the full recovery of ACh controls; in those cases, responses evoked by nicotine relative to ACh were determined in a series of single concentration experiments using new sets of cells for each nicotine concentration. All points represent the average data (\pm SEM) for at least four cells.

A Cytisine-evoked peak currents



B Varenicline-evoked peak currents

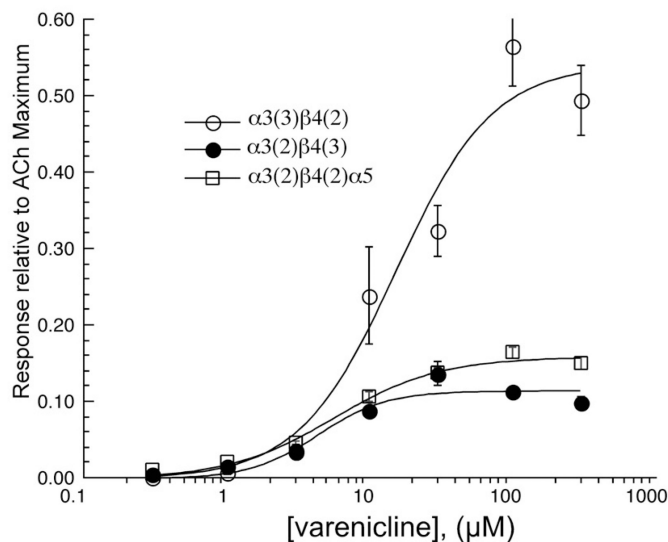


Figure 5.

Concentration-response curves for (A) Cytisine and (B) Varenicline. The $\beta 4$ - $\alpha 3$ concatamer was co-expressed at a 1:5 RNA ratio with either $\alpha 3$, $\beta 4$, or $\alpha 5$. Data were initially normalized to 100 μM ACh control responses obtained immediately prior to the test responses and subsequently adjusted to the empirically determined ACh maximum responses. ACh controls remained of stable amplitude throughout each experiment. All points represent the average data (\pm SEM) for at least four cells. EC_{50} values (Table 3) were determined by fits of the data to the Hill equation (Methods).

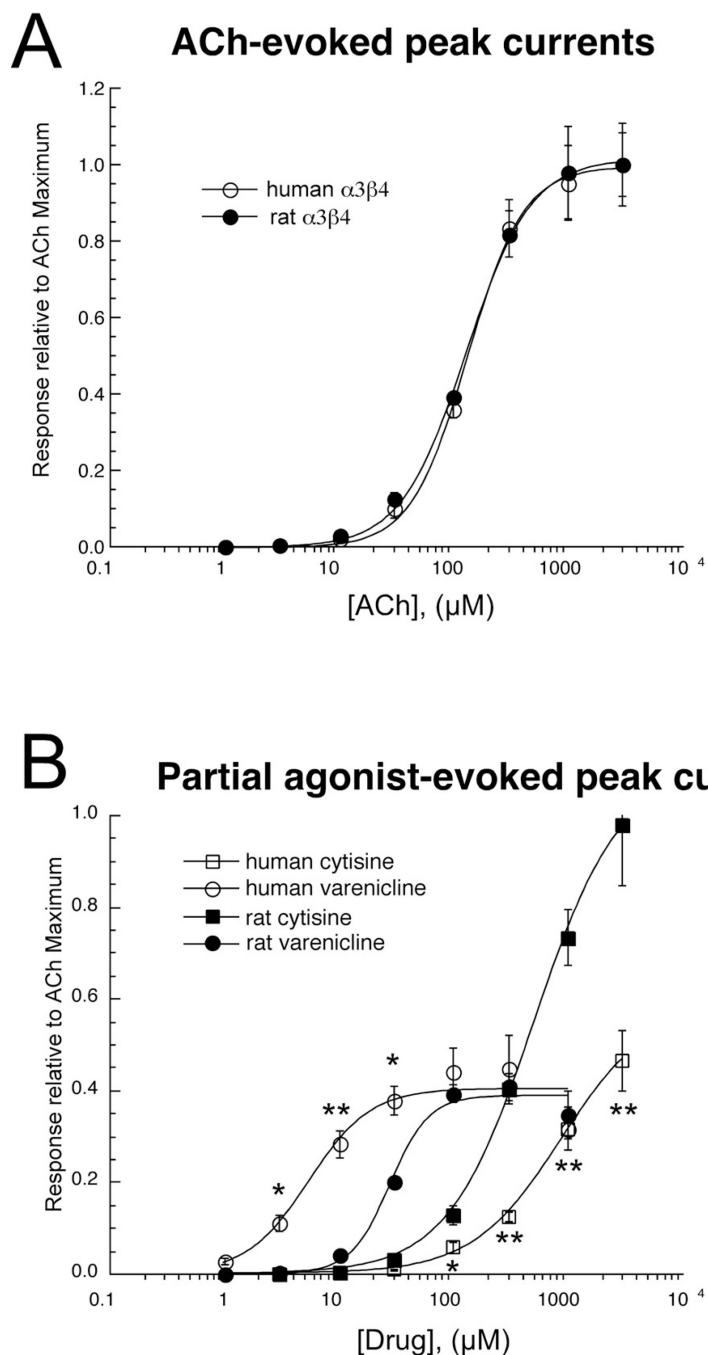


Figure 6.

A) ACh concentration-response curves for rat and human $\alpha 3\beta 4$ nAChR formed with the conventional method of co-expressing RNA for the subunit monomers at a 1:1 ratio. **B)** Cytisine and varenicline concentration-response curves for rat and human $\alpha 3\beta 4$ nAChR formed with the conventional method of co-expressing RNA for the subunit monomers at a 1:1 ratio. All points represent the average data (\pm SEM) for at least four cells. Statistical analysis based on t-tests between the normalized responses of rat and human receptors indicated significance values of $p < 0.01$ (*), or $p < 0.001$ (**).

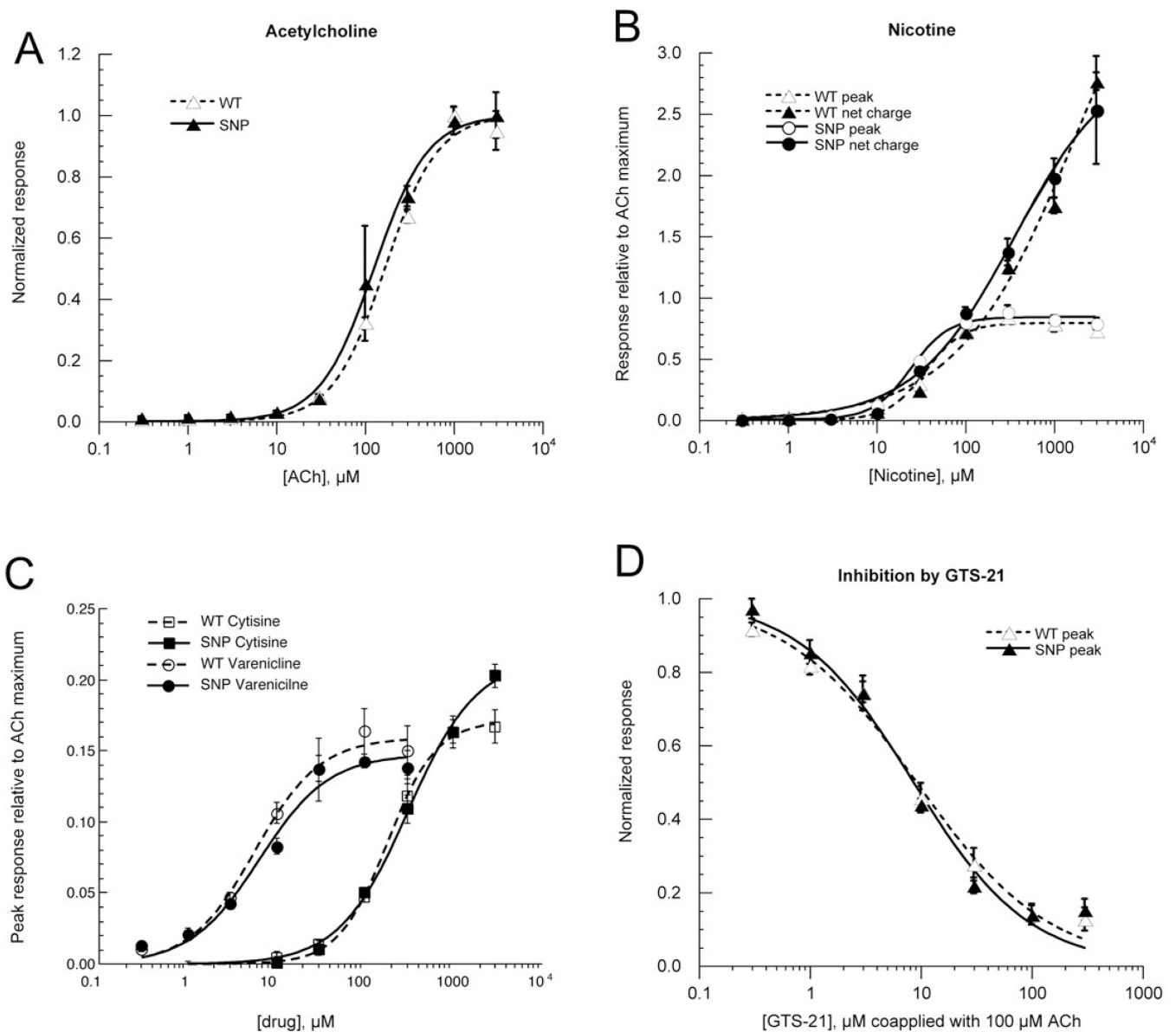


Figure 7.

Data for $\alpha 3\beta 4\alpha 5$ receptors containing either wild-type $\alpha 5$ or the $\alpha 5\text{D}376\text{N}$ SNP. **A)** ACh peak current responses. **B)** Nicotine peak current and net charge responses. **C)** Cytisine and varenicline peak current responses. **D)** Inhibition of ACh-evoked peak current responses by co-applications of GTS-21. (**A–C**) Data were initially normalized to 100 μM ACh control responses obtained immediately prior to the test responses and subsequently adjusted to the empirically determined ACh maximum responses. ACh controls remained of stable amplitude throughout each experiment. (**A–D**) All points represent the average data (\pm SEM) for at least four cells.

Table 1

Acetylcholine potency, peak current data

Accessory subunit	EC50, μM
$\alpha 3$	349.4 ± 22.0
$\beta 4$	153.9 ± 9.9
$\beta 2$	34.1 ± 3.9
$\alpha 5$	157.7 ± 16.4
$\alpha 5\text{D}376\text{N}$	126.8 ± 8.0

Table 2

Nicotine potency and efficacy

Accessory subunit	Peak		Net Charge	
	EC ₅₀ μM	I _{max} relative to ACh _{max}	EC ₅₀ μM	I _{max} relative to ACh _{max}
α3	62.0 ± 15.6	0.69 ± 0.06	95.3 ± 8.36	0.38 ± 0.01
β4	28.3 ± 6.7	0.32 ± 0.02	488.8 ± 77.2	0.57 ± 0.03
β2	121.8 ± 21.6	1.4 ± 0.07	685.4 ± 184.9	2.21 ± 0.21
α5	35.6 ± 4.5	0.27 ± 0.01	1996 ± 2019	0.99 ± 0.31
α5D376N	24.9 ± 1.9	0.28 ± 0.01	366.41 ± 96.379	0.55 ± 0.04

Table 3

Cytisine and Varenicline potency and efficacy, peak current data

Accessory subunit	Cytisine		Varenicline	
	EC ₅₀ μM	I _{max} relative to ACh _{max}	EC ₅₀ μM	I _{max} relative to ACh _{max}
α3	1750 ± 300	0.34 ± 0.03	16 ± 5	0.54 ± 0.06
β4	214 ± 32	0.16 ± 0.01	4.5 ± 1.4	0.11 ± 0.01
α5	180 ± 8	0.17 ± 0.01	5.8 ± 0.9	0.16 ± 0.01
α5D376N	309 ± 43	0.21 ± 0.01	6.5 ± 1.5	0.15 ± 0.01

Table 4Species dependent effects on $\alpha 3\beta 4$ responses using monomeric constructs

Acetylcholine potency, peak current data				
Species	EC ₅₀ , μM			
human $\alpha 3\beta 4$	131 \pm 7			
rat $\alpha 3\beta 4$	127 \pm 6			

Species	Cytisine		Varenicline	
	EC ₅₀ μM	I _{max} relative to ACh _{max}	EC ₅₀ μM	I _{max} relative to ACh _{max}
human $\alpha 3\beta 4$	890 \pm 120	0.59 \pm 0.03	5.6 \pm 1.8	0.40 \pm 0.03
rat $\alpha 3\beta 4$	520 \pm 50	1.10 \pm 0.04	28 \pm 3.2	0.39 \pm 0.02