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## Mitochondrial Ca<sup>2+</sup> Uniporter and CaMKII in heart

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### Abstract

The influx of cytosolic Ca<sup>2+</sup> into mitochondria is mediated primarily by the mitochondrial calcium uniporter (MCU)<sup>1</sup>, a small-conductance, Ca<sup>2+</sup>-selective channel<sup>2–6</sup>. MCU modulates intracellular Ca<sup>2+</sup> transients and regulates ATP production and cell death<sup>1</sup>. Recently, Joiner et al. reported that MCU is regulated by mitochondrial CaMKII, and this regulation determines stress response in heart<sup>7</sup>. They reported a very large current putatively mediated by MCU that was about two orders of magnitude greater than the MCU current ( $I_{MCU}$ ) that we previously measured in heart mitochondria<sup>3</sup>. Also, the current traces presented by Joiner et al. showed unusually high fluctuations incompatible with the low single-channel conductance of MCU. Here we performed patch-clamp recordings from mouse heart mitochondria under the exact conditions used by Joiner et al. We confirmed that  $I_{MCU}$  in cardiomyocytes is very small and showed that it is not directly regulated by CaMKII. Thus the currents presented by Joiner et al. do not correspond to MCU, and there is no direct electrophysiological evidence that CaMKII regulates MCU.

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The main differences in the experimental conditions used by Joiner et al.<sup>7</sup> and in our previous study<sup>3</sup> were: the use of hypotonic shock to prepare mitoplasts (vs. French Press in our study), the presence of high Na<sup>+</sup> concentration in recording solutions (vs. Na<sup>+</sup>-free solutions), and the age of the mice (2–3 months vs. 3–4 weeks).

Fig. 1a shows mouse heart mitoplasts obtained by exposure of mitochondria to hypotonic shock. The measured average membrane capacitance ( $C_m$ ) was  $0.65 \pm 0.03$  pF ( $\pm$ SEM,  $n=65$ ), which correlates well with  $C_m$  measurements reported for heart mitoplasts obtained with French press<sup>3</sup>, as well as with measurements of the inner mitochondrial membrane surface area using EM<sup>8,9</sup> and with estimated measurements of idealized cardiac mitochondria<sup>10</sup>. Therefore, the values reported by Joiner et al. are abnormally high (5–9 pF), indicating inaccuracy in monitoring  $C_m$  leading to faulty values of  $I_{MCU}$  densities throughout the paper.

We recorded  $I_{MCU}$  from heart mitoplasts isolated by hypotonic shock with 150 mM NaGluconate in the pipette and bath solutions (as in Joiner et al., Fig. 1b, left panel) and without Na<sup>+</sup> (conditions previously used by us<sup>3</sup>, Fig. 1b, middle panel). Interestingly,  $I_{MCU}$

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recorded in the presence of NaGluconate was significantly smaller than in its absence (Fig. 1b). Our data support the observation that elevated  $\text{Na}^+$  may regulate heart mitochondrial  $[\text{Ca}^{2+}]^{11,12}$ . Importantly, the whole-mitoplast  $I_{MCU}$  was about two orders of magnitude lower than the current reported by Joiner et al. ( $\sim 2$  pA at  $-160$  mV in  $0.2$  mM  $\text{Ca}^{2+}$  vs.  $\sim 180$  pA) and did not exhibit high fluctuations as expected for a small-conductance channel. Also, the current reported by Joiner et al. was not inhibited by Ru360 in the same fashion as the  $I_{MCU}^2$ . In  $10$  nM Ru360,  $I_{MCU}$  shows no immediate inhibition upon stepping from  $0$  mV to  $-120$  mV<sup>2</sup>, and the inhibition develops slowly over time<sup>2</sup>, whereas the current of Joiner et al. was inhibited immediately upon stepping from  $0$  to  $-160$  mV. All these observations indicate that Joiner et al. did not record  $I_{MCU}$ . We suggest that either they did not record from inner mitochondrial membrane or the integrity of their mitoplasts was compromised.

Next, we tested whether  $I_{MCU}$  is directly regulated by CaMKII as claimed by Joiner et al., who reported that addition of a constitutively active monomeric form of CaMKII (T287D mutant) to the patch pipette potentiated their currents. When we applied T287D, we failed to observe any functional change in  $I_{MCU}$ , either without (Fig 1c middle panel, and d) or with  $\text{Ca}^{2+}$  plus calmodulin (Fig. 1e). We further verified these results using wild-type monomeric CaMKII pre-autophosphorylated with thiol-ATP to prevent de-autophosphorylation and again observed no change in  $I_{MCU}$  (Fig. 1c right panel and d).

In conclusion, the noisy currents presented by Joiner et al. are not carried by MCU, and their extremely high amplitude misrepresents the actual MCU activity in heart. Heart, with abundant mitochondria and frequently elevated cytosolic  $\text{Ca}^{2+}$ , has very low MCU current<sup>3</sup>, which is likely critical for avoiding disruption of cytosolic  $\text{Ca}^{2+}$  signaling and preventing mitochondrial  $\text{Ca}^{2+}$  overload and cell death. Finally, our electrophysiological experiments with MCU currents did not indicate that MCU is regulated by CaMKII.

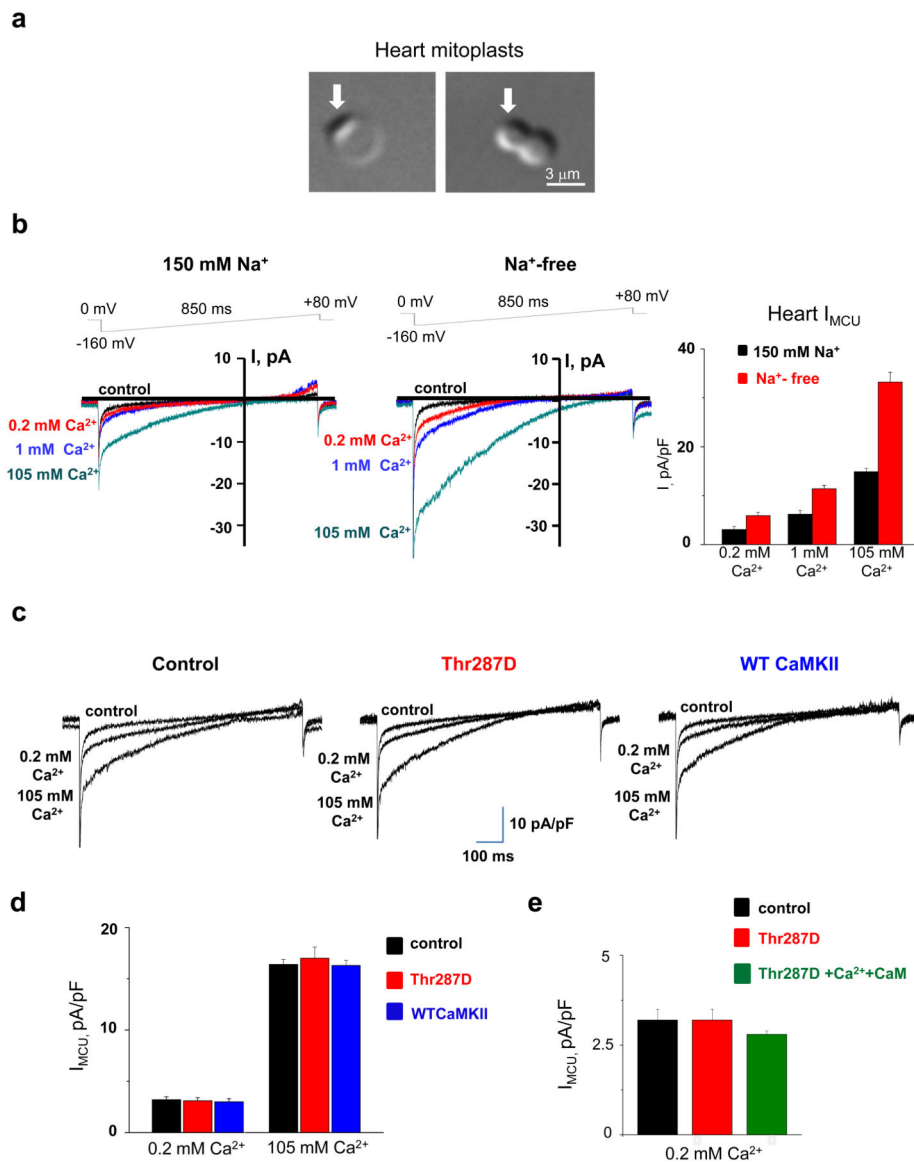
## Methods

Electrophysiological experiments were performed as in Fieni et al.<sup>3</sup>. Recombinant  $\delta$ -human monomeric CaMKII (1-137) was purified from baculovirus using an N-terminal 6X-HN tag and Ni chromatography followed by gel filtration. Activity of recombinant CaMKII was measured in NaGluconate pipette solution using the peptide substrate AC-2<sup>13</sup>. Constitutive activity (no  $\text{Ca}^{2+}$ /calmodulin) was undetectable for wild-type CaMKII and  $4.6$   $\mu\text{mol}/\text{min}/\text{mg}$  for T287D. The  $\text{Ca}^{2+}$ /calmodulin stimulated activity of T287D CaMKII was  $9.7$   $\mu\text{mol}/\text{min}/\text{mg}$ . Wild-type CaMKII was autophosphorylated in  $\gamma$ -thiol-ATP to promote Thr287 autophosphorylation, which allows CaMKII to be active without  $\text{Ca}^{2+}$ /calmodulin (i.e., autonomous activity)<sup>14</sup>. The autonomous activity of wild-type CaMKII was  $19.4$   $\mu\text{mol}/\text{min}/\text{mg}$  ( $\sim 91\%$  of the  $\text{Ca}^{2+}$ /calmodulin stimulated activity).

## References

1. Rizzuto R, Bernardi P, Pozzan T. Mitochondria as all-round players of the calcium game. *J Physiol.* 2000; 529 Pt 1:37–47. doi:PHY\_1167 [pii]. [PubMed: 11080249]
2. Kirichok Y, Krapivinsky G, Clapham DE. The mitochondrial calcium uniporter is a highly selective ion channel. *Nature.* 2004; 427:360–364. [PubMed: 14737170]

3. Fiene F, Bae Lee S, Jan YN, Kirichok Y. Activity of the mitochondrial calcium uniporter varies greatly between tissues. *Nat Commun.* 2012; 3:1317. doi:10.1038/ncomms2325 [pii]. [PubMed: 23271651]
4. Chaudhuri D, Sancak Y, Mootha VK, Clapham DE. MCU encodes the pore conducting mitochondrial calcium currents. *eLife.* 2013; 2:e00704.10.7554/eLife.00704 [PubMed: 23755363]
5. De Stefani D, Raffaello A, Teardo E, Szabo I, Rizzuto R. A forty-kilodalton protein of the inner membrane is the mitochondrial calcium uniporter. *Nature.* 2011; 476:336–340. doi:10.1038/nature10230 [pii]. [PubMed: 21685888]
6. Baughman JM, et al. Integrative genomics identifies MCU as an essential component of the mitochondrial calcium uniporter. *Nature.* 2011; 476:341–345. doi:10.1038/nature10234 [pii]. [PubMed: 21685886]
7. Joiner ML, et al. CaMKII determines mitochondrial stress responses in heart. *Nature.* 2012; 491:269–273. doi:10.1038/nature11444 [pii]. [PubMed: 23051746]
8. Page E. Quantitative ultrastructural analysis in cardiac membrane physiology. *The American Journal of Physiology.* 1978; 235:C147–158. [PubMed: 364994]
9. Smith HE, Page E. Morphometry of rat heart mitochondrial subcompartments and membranes: application to myocardial cell atrophy after hypophysectomy. *Journal of Ultrastructure Research.* 1976; 55:31–41. [PubMed: 1263300]
10. Williams GS, Boyman L, Chikando AC, Khairallah RJ, Lederer WJ. Mitochondrial calcium uptake. *Proceedings of the National Academy of Sciences of the United States of America.* 2013; 110:10479–10486.10.1073/pnas.1300410110 [PubMed: 23759742]
11. O'Rourke B, Maack C. The role of Na dysregulation in cardiac disease and how it impacts electrophysiology. *Drug Discovery Today Disease Models.* 2007; 4:207–217.10.1016/j.ddmod.2007.11.003 [PubMed: 18650959]
12. Maack C, et al. Elevated cytosolic Na<sup>+</sup> decreases mitochondrial Ca<sup>2+</sup> uptake during excitation-contraction coupling and impairs energetic adaptation in cardiac myocytes. *Circ Res.* 2006; 99:172–182.10.1161/01.RES.0000232546.92777.05 [PubMed: 16778127]
13. Ashpole NM, Hudmon A. Excitotoxic neuroprotection and vulnerability with CaMKII inhibition. *Molecular and cellular neurosciences.* 2011; 46:720–730.10.1016/j.mcn.2011.02.003 [PubMed: 21316454]
14. Rokita AG, Anderson ME. New therapeutic targets in cardiology: arrhythmias and Ca<sup>2+</sup>/calmodulin-dependent kinase II (CaMKII). *Circulation.* 2012; 126:2125–2139.10.1161/CIRCULATIONAHA.112.124990 [PubMed: 23091085]
15. Pusch M, Neher E. Rates of diffusional exchange between small cells and a measuring patch pipette. *Pflugers Archiv : European Journal of Physiology.* 1988; 411:204–211. [PubMed: 2451806]



**Fig. 1. Heart MCU current and CaMKII**

(a) Transmitted image of heart mitoplasts obtained by exposure of mitochondria to 5-minute hypotonic shock. Both round (*left panel*) and figure 8-shaped (*right panel*) mitoplasts were present in this preparation and used for electrophysiological experiments. Arrows indicate remnants of the outer mitochondrial membrane. Note that the average diameter of heart mitoplasts in this preparation is  $\sim 4.5 \mu\text{m}$  ( $n=65$ ), which corresponds well with the average membrane capacitance ( $C_m$ ) measurements of  $0.67 \text{ pF}$  that we previously reported. (b) Representative heart whole-mitoplast MCU currents ( $I_{MCU}$ ) recorded in the presence (*left panel*) or absence (*middle panel*) of  $150 \text{ mM NaGluc}$  in both the pipette and bath solutions.  $I_{MCU}$  was recorded with different bath  $\text{Ca}^{2+}$  concentrations:  $0.2 \text{ mM}$  (red),  $1 \text{ mM}$  (blue), and  $105 \text{ mM}$  (green).  $I_{MCU}$  was blocked by  $50 \text{ nM RuR}$  added to the  $0.2 \text{ mM Ca}^{2+}$  bath solution (control, black). Currents in *left* and *middle panels* are not normalized and were recorded from two different mitoplasts with comparable membrane capacitance ( $C_m$  =

0.80 pF and 0.84 pF, respectively). The voltage ramp protocol used to elicit  $I_{MCU}$  is indicated at the top. Note that with  $\text{Na}^+$  in the recording solutions we also observed a small outward current at high positive voltages. This current was absent in  $\text{Na}^+$ -free conditions (*middle panel* and Fieni et al<sup>3</sup>). Pipette solution, in mM: 150 NaGluconate, 40 HEPES, 2 NaCl, 1.5 EGTA, tonicity 450 mmol per kg with sucrose, pH 7.2 with NaOH. Bath  $\text{Ca}^{2+}$  solutions with 0.2 and 1 mM  $\text{Ca}^{2+}$  were prepared by addition of 1 M stock solution of  $\text{CaCl}_2$  into the bath solution containing, in mM: 150 NaGluconate, 40 HEPES, tonicity 300 mmol per kg, pH 7.4 with NaOH. The bath solution with 105 mM  $\text{Ca}^{2+}$  contained 105 mM  $\text{CaCl}_2$  and 10 mM HEPES, pH 7.2 with Tris base. *Right panel*, histogram representing average MCU current densities ( $I_{MCU}$  normalized to the  $C_m$ ) obtained in the presence (black) or absence (red) of 150 mM NaGluconate in recording solutions with different bath  $\text{Ca}^{2+}$  concentrations (0.2, 1, and 105 mM). Current amplitudes were measured at 5 ms after stepping from 0 to  $-160$  mV.  $I_{MCU}$  densities were as follows: at bath 0.2 mM  $\text{Ca}^{2+}$ ,  $3.3 \pm 0.4$  pA/pF ( $n = 8$ ) with 150 NaGluconate in recording solutions and  $6 \pm 0.7$  pA/pF without NaGluconate in recording solutions; at bath 1 mM  $\text{Ca}^{2+}$ ,  $6.2 \pm 0.7$  pA/pF ( $n = 9$ ) with NaGluconate and  $11.4 \pm 0.7$  pA/pF ( $n = 6$ ) without NaGluconate; at bath 105 mM  $\text{Ca}^{2+}$ ,  $14.2 \pm 0.7$  pA/pF ( $n = 12$ ) with NaGluconate and  $33.2 \pm 2$  pA/pF ( $n = 7$ ) without NaGluconate in the pipette solution. Statistical data are presented as mean  $\pm$  SEM. **(c)** Representative  $I_{MCU}$  in control (*left panel*), in the presence of a constitutively active monomeric CaMKII (Thr287D mutant) in the patch pipette (*middle panel*), and in the presence of wild-type monomeric CaMKII previously activated (autophosphorylated) with  $\text{Ca}^{2+}$ /calmodulin (CaM) and  $\text{Mg}^{2+}$ /ATP ( $\gamma$ -thiol-ATP) (*right panel*) in the patch pipette.  $I_{MCU}$  was elicited by a voltage ramp protocol (see panel b) in the presence of 0.2 and 105 mM  $\text{Ca}^{2+}$ .  $I_{MCU}$  amplitude was monitored for up to 35 min after formation of the whole-mitoplast configuration as in Joiner et al. (However, the calculated diffusion time<sup>15</sup> for the 35-kDa monomer of CaMKII from the pipette into the mitoplast is only  $\sim 25$  seconds.) Pipette solution contained, in mM: 150 NaGluconate, 40 HEPES, 2 NaCl, 1.5 EGTA, tonicity 450 mmol per kg with sucrose, pH 7.2 with NaOH. The recombinant Thr287D and wild-type CaMKII were added to the control solution at 0.5 or 1  $\mu\text{M}$ , in the presence of 2 mM  $\text{Na}_2\text{ATP}$  and 3 mM  $\text{MgCl}_2$ . (Addition of ATP and  $\text{Mg}^{2+}$  alone did not affect  $I_{MCU}$ .) **(d)** Histogram showing average  $I_{MCU}$  current densities obtained in the absence (black, control) or presence of Thr287D (red) or wild-type monomeric CaMKII pre-autophosphorylated with thiol-ATP (blue) in the pipette. Currents were measured in 0.2 and 105 mM  $\text{Ca}^{2+}$  as described in (c), and amplitudes were determined at 5 ms after stepping from 0 to  $-160$  mV.  $I_{MCU}$  densities were as follows: at bath 0.2 mM  $\text{Ca}^{2+}$ ,  $3.2 \pm 0.3$  pA/pF ( $n = 17$ ) in control,  $3.2 \pm 0.3$  pA/pF ( $n = 14$ ) for Thr287D, and  $3.0 \pm 0.3$  pA/pF ( $n = 8$ ) for autophosphorylated wild-type CaMKII; at bath 105 mM  $\text{Ca}^{2+}$ ,  $16.4 \pm 0.5$  pA/pF ( $n = 16$ ) in control,  $17.9 \pm 1.1$  pA/pF ( $n = 11$ ) for Thr287D, and  $16.2 \pm 0.5$  pA/pF ( $n = 5$ ) for autophosphorylated wild-type CaMKII. Statistical data are presented as mean  $\pm$  SEM. **(e)** Histogram showing average  $I_{MCU}$  current densities in control (black) and in the presence of a constitutively active monomeric CaMKII (Thr287D mutant) in the patch pipette either alone (red) or with 1  $\mu\text{M}$  CaM and 5–10  $\mu\text{M}$  free  $\text{Ca}^{2+}$  (green).  $I_{MCU}$  densities were as follows: at bath 0.2 mM  $\text{Ca}^{2+}$ ,  $3.2 \pm 0.3$  pA/pF ( $n = 17$ ) in control,  $3.2 \pm 0.3$  pA/pF ( $n = 14$ ) for Thr287D, and  $2.8 \pm 0.1$  pA/pF ( $n = 5$ ) for Thr287D in the presence of 1  $\mu\text{M}$  CaM

and 5–10  $\mu\text{M}$  free  $\text{Ca}^{2+}$ . Current amplitudes were measured at 5 ms after stepping from 0 to  $-160$  mV. Statistical data are presented as mean  $\pm$  SEM.

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