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## TALK-1 channels control $\beta$ cell endoplasmic reticulum $\text{Ca}^{2+}$ homeostasis

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### Abstract

$\text{Ca}^{2+}$  handling by the endoplasmic reticulum (ER) serves critical roles controlling pancreatic  $\beta$ -cell function and becomes perturbed during the pathogenesis of diabetes. ER  $\text{Ca}^{2+}$  homeostasis is determined by ion movements across the ER membrane, including  $\text{K}^{+}$  flux through  $\text{K}^{+}$  channels. Here, we demonstrated that  $\text{K}^{+}$  flux through ER-localized TALK-1 channels facilitated  $\text{Ca}^{2+}$  release from the ER in mouse and human  $\beta$ -cells. We found that  $\beta$ -cells from mice lacking TALK-1 exhibited reduced basal cytosolic  $\text{Ca}^{2+}$  and increased ER  $\text{Ca}^{2+}$  concentrations, suggesting reduced ER  $\text{Ca}^{2+}$  leak. These changes in  $\text{Ca}^{2+}$  homeostasis were presumably due to TALK-1-mediated ER  $\text{K}^{+}$  flux, because we recorded  $\text{K}^{+}$  currents mediated by functional TALK-1 channels on the nuclear membrane, which is continuous with the ER. Moreover, overexpression of  $\text{K}^{+}$ -impermeable TALK-1 channels in HEK293 cells did not reduce ER  $\text{Ca}^{2+}$  stores. Reduced ER  $\text{Ca}^{2+}$  content in  $\beta$ -cells is associated with ER stress and islet dysfunction in diabetes, and islets from TALK-1-deficient mice fed a high-fat diet showed reduced signs of ER stress, suggesting that TALK-1 activity exacerbated ER stress. Our data establish TALK-1 channels as key regulators of  $\beta$ -cell ER  $\text{Ca}^{2+}$ , and suggest that TALK-1 may be a therapeutic target to reduce ER  $\text{Ca}^{2+}$  handling defects in  $\beta$ -cells during the pathogenesis of diabetes.

### INTRODUCTION

Pancreatic  $\beta$ -cell  $\text{Ca}^{2+}$  influx triggers insulin secretion, and endoplasmic reticulum (ER)  $\text{Ca}^{2+}$  ( $\text{Ca}^{2+}_{\text{ER}}$ ) handling plays a key role in this process (1).  $\text{Ca}^{2+}_{\text{ER}}$  serves many essential functions in  $\beta$ -cells, such as controlling protein processing and metabolism, and defects in  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis can trigger the unfolded protein response (UPR) (2). The importance of precise  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  handling is evident in type-1 and type-2 diabetes mellitus (T2DM), during which  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis is disrupted, leading to  $\beta$ -cell dysfunction and eventual

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destruction (1–8). Impaired  $\text{Ca}^{2+}_{\text{ER}}$  handling also causes defects in glucose-stimulated insulin secretion (GSIS), contributing to hyperglycemia (3, 9). Therefore, treatments which reduce ER stress in the context of  $\beta$ -cell dysfunction improve glucose tolerance (10–12). However, while it is known that  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  concentrations are perturbed in diabetes (2, 4–7), the molecular determinants which set  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  are poorly understood.

Maintenance of  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis requires that  $\text{Ca}^{2+}$  movement across the ER membrane is balanced with a simultaneous  $\text{K}^{+}$  flux in the opposite direction (13–15). Without this  $\text{K}^{+}$  countercurrent,  $\text{Ca}^{2+}$  release from the ER would rapidly generate a negative charge on the inside of the ER membrane, inhibiting further  $\text{Ca}^{2+}_{\text{ER}}$  release. To date, only a few ER  $\text{K}^{+}$  channels have been identified, including TRIC-A channels, which regulate  $\text{Ca}^{2+}_{\text{ER}}$  stores in myocytes (16, 17); TRIC-B channels, which control  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis in alveolar epithelial cells and osteoblasts (18, 19); and SK  $\text{Ca}^{2+}$ -activated  $\text{K}^{+}$  channels, which modulate  $\text{Ca}^{2+}_{\text{ER}}$  uptake in neurons and cardiomyocytes (20). Genetic ablation or pharmacological inhibition of these channels impairs  $\text{Ca}^{2+}_{\text{ER}}$  handling. For example, knockout of TRIC-A or TRIC-B channels results in increased  $\text{Ca}^{2+}_{\text{ER}}$  stores, presumably due to the loss of a  $\text{K}^{+}$  countercurrent which regulates the ability of  $\text{Ca}^{2+}$  to exit the ER (15, 16, 18). Despite the importance of  $\text{K}^{+}$  countercurrents in maintaining  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis, nothing is known about the mediators or functions of  $\beta$ -cell ER  $\text{K}^{+}$  countercurrents.

ER localization has been reported for several K2P channels, including TASK-1 (21), TASK-3 (22), TASK-5 (23), TWIK-2 (24, 25), and THIK-2 (24). Although the subcellular localization of TALK-1 channels has not been reported, a protein interactome study has determined that a majority (>60%) of the proteins interacting with TALK-1 are ER-resident proteins (26). Similarly, a human pancreatic islet cDNA library generated and screened in a membrane yeast-two-hybrid assay to identify islet TALK-1 interacting proteins detected multiple ER-resident proteins that interact with TALK-1 (27). In accordance with these observations, TALK-1 shows substantial intracellular staining in human and mouse pancreatic  $\beta$ -cells (28). Although these findings suggest that TALK-1 channels may serve an intracellular role, investigations of intracellular K2P channels have focused primarily on elucidating the factors that enable their functional expression on the plasma membrane, and an ER function for K2P channels has not been identified.

In  $\beta$ -cells, TALK-1 contributes to plasma membrane potential ( $V_m$ ) hyperpolarization, thereby regulating cytosolic  $\text{Ca}^{2+}$  ( $\text{Ca}^{2+}_c$ ) influx and insulin secretion (28). TALK-1 is distributed in pancreatic islets as well as gastric somatostatin cells (29, 30), and is the most abundant islet  $\text{K}^{+}$  channel at the transcriptional level (31–33). A primary physiological function of  $\beta$ -cell TALK-1 channels is to limit glucose-induced islet electrical and  $\text{Ca}^{2+}_c$  oscillations, controlling second-phase pulsatile insulin secretion (28). Furthermore, a non-synonymous polymorphism in TALK-1 (rs1535500) associated with T2DM (34–36) causes a gain-of-function in TALK-1 activity (28), which may impair  $\text{Ca}^{2+}_c$  oscillations and pulsatile insulin secretion. However, the molecular mechanisms underlying TALK-1 regulation of islet  $\text{Ca}^{2+}_c$  oscillations remain unclear.

Here, we tested the hypothesis that TALK-1 channels were functional in the ER and mediated ER  $\text{K}^{+}$  countercurrents which support  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis. By measuring

$\text{Ca}^{2+}_{\text{ER}}$ ,  $\text{Ca}^{2+}_{\text{c}}$ , and single-channel K2P currents on the ER membrane, we demonstrated that TALK-1 channels conducted ER  $\text{K}^{+}$  countercurrents which enhanced  $\text{Ca}^{2+}_{\text{ER}}$  leak in mouse and human  $\beta$ -cells. We found that TALK-1 control of  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  modulated islet  $\text{Ca}^{2+}_{\text{c}}$  dynamics, which has important implications for understanding the regulation of  $\text{Ca}^{2+}_{\text{c}}$  oscillations that underlie pulsatile insulin secretion. Moreover, we showed that other ER-localized K2P channels, such as TASK-1, could function in an identical manner. Inhibition of  $\text{K}^{+}$  currents through either TALK-1 or TASK-1 increased steady-state  $\text{Ca}^{2+}_{\text{ER}}$  concentrations, demonstrating that the  $\text{K}^{+}$  channel function of these proteins was essential for their effects on  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis. Moreover, islets from mice lacking TALK-1 channels showed reduced signs of ER stress induced by chronic exposure to a high-fat diet (HFD), suggesting that defects in TALK-1 channel activity can perturb ER health and contribute to islet dysfunction in T2DM. Overall, these findings identify an intracellular function of K2P channels, and reveal TALK-1 channels as a possible therapeutic target to modulate  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis to reduce  $\beta$ -cell ER stress in diabetes.

## RESULTS

### TALK-1 activity promotes $\text{Ca}^{2+}_{\text{ER}}$ leak

TALK-1's prominent intracellular staining pattern (28) and physical association with several ER-resident proteins (26) suggested that TALK-1 could be localized to the ER. To determine the subcellular localization of TALK-1, we performed immunofluorescence staining of mouse pancreas sections, and detected co-localization of TALK-1 with the ER marker calreticulin (Fig. 1A). Additionally, co-expression of a TALK-1/mCherry fusion protein and an ER-targeted indicator (37) in mouse islet cells revealed TALK-1 in the ER (Fig. S1).

While TALK-1 conducts  $\text{K}^{+}$  currents on the plasma membrane in  $\beta$ -cells (28), it has not yet been determined whether K2P channels in the ER, such as TALK-1, are functional. To test if TALK-1 channel function could affect  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis, we first directly measured  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  from control (wild-type) and TALK-1 KO islets (28) with the ER-targeted, genetically encoded  $\text{Ca}^{2+}$  indicator D4ER (38) (Fig. 1B). Under both low and high glucose conditions, TALK-1 KO  $\beta$ -cells had significantly higher  $\text{Ca}^{2+}_{\text{ER}}$  concentrations (Fig. 1, B and C). Inhibition of sarco-endoplasmic  $\text{Ca}^{2+}$  ATPases (SERCAs) with cyclopiazonic acid (CPA) produced a greater decrease in  $\text{Ca}^{2+}_{\text{ER}}$  in KO  $\beta$ -cells compared with controls (Fig. 1D). Absolute  $\text{Ca}^{2+}_{\text{ER}}$  concentrations in KO  $\beta$ -cells remained above wild-type  $\beta$ -cells after application of CPA. These findings suggest that inhibition of SERCAs was insufficient to completely empty  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  stores, as observed in neurons (39), and implied that TALK-1 channels were a critical determinant of  $\beta$ -cell steady-state  $\text{Ca}^{2+}_{\text{ER}}$  concentrations. As a slight reduction in  $\text{Ca}^{2+}_{\text{ER}}$  stimulates  $\beta$ -cell proliferation (40), we tested if TALK-1 activity affected  $\beta$ -cell number or proliferation. The absence of TALK-1 did not alter islet cellular composition, nor did it impair adaptive proliferation (as determined by BrdU incorporation) in response to a short term (one week) HFD stimulus (41) (Fig. S2, A to F), suggesting that inhibition of TALK-1 did not influence islet cell composition.

To further confirm that TALK-1 modulates  $\text{Ca}^{2+}_{\text{ER}}$ , we quantified  $\text{Ca}^{2+}_{\text{ER}}$  indirectly in wild-type and KO  $\beta$ -cells by measuring  $\text{Ca}^{2+}_{\text{c}}$  in response to multiple stimuli. Treating  $\beta$ -cells with the  $\text{Ca}^{2+}$  ionophore ionomycin in the absence of extracellular  $\text{Ca}^{2+}$  resulted in more

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Ca<sup>2+</sup> release from KO than wild-type  $\beta$ -cells (Fig. S3, A and B), suggesting increased intracellular Ca<sup>2+</sup> stores. We next perfused isolated wild-type and TALK-1 KO  $\beta$ -cells with Ca<sup>2+</sup>-free buffer containing diazoxide to selectively monitor Ca<sup>2+</sup><sub>c</sub> independently of Ca<sup>2+</sup> entry through plasma membrane channels (Fig. 1E). Under these conditions, TALK-1 KO  $\beta$ -cells exhibited lower basal Ca<sup>2+</sup><sub>c</sub>, and the addition of CPA produced a larger increase in Ca<sup>2+</sup><sub>c</sub> (Fig. 1, E and F), suggesting reduced Ca<sup>2+</sup><sub>ER</sub> leak and increased Ca<sup>2+</sup><sub>ER</sub> stores. Following washout of CPA, addition of Ca<sup>2+</sup> to the extracellular buffer led to a similar amount of Ca<sup>2+</sup><sub>c</sub> influx in wild-type and TALK-1 KO cells, showing that activation of store-operated Ca<sup>2+</sup> entry (SOCE) was not impaired in TALK-1 KO  $\beta$ -cells (Fig. 1, E and F). However, the reduced basal Ca<sup>2+</sup><sub>c</sub> observed without external Ca<sup>2+</sup> was maintained in the presence of extracellular Ca<sup>2+</sup> in TALK-1 KO  $\beta$ -cells (Fig. 1, E and G).

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As TALK-1 is also detected in human  $\beta$ -cells (28), we next examined whether TALK-1 was present in the ER of human  $\beta$ -cells. Immunofluorescent staining of human pancreas sections revealed co-localization of TALK-1 with the ER marker calreticulin (Fig. 2A). To assess TALK-1-mediated regulation of human  $\beta$ -cell Ca<sup>2+</sup><sub>ER</sub>, we measured CPA-induced Ca<sup>2+</sup><sub>ER</sub> release in  $\beta$ -cells expressing a dominant-negative TALK-1 (TALK-1 DN) construct (Fig. 2B). The TALK-1 DN contains a pore mutation which inhibits K<sup>+</sup> conductance when it interacts with endogenous TALK-1 (28). The TALK-1 DN construct also contains a P2A element between the sequences encoding TALK-1 and an mCherry reporter, allowing us to detect cells expressing the TALK-1 DN by mCherry fluorescence;  $\beta$ -cells were identified by post-staining for insulin (28). Inhibition of TALK-1 with the TALK-1 DN caused a significant increase in CPA-induced Ca<sup>2+</sup><sub>ER</sub> release (Fig. 2C), demonstrating that TALK-1 modulates Ca<sup>2+</sup><sub>ER</sub> homeostasis in human  $\beta$ -cells.

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To test whether TALK-1 activity reduced Ca<sup>2+</sup><sub>ER</sub> storage, we examined the effects of TALK-1 expression on Ca<sup>2+</sup><sub>ER</sub> in HEK293 cells. Two channel-forming isoforms of TALK-1 (1b and 1a) (42) co-localized with an ER-targeted YFP marker in these cells (Fig. 3A). We next assessed the consequences of TALK-1 expression on Ca<sup>2+</sup><sub>ER</sub> homeostasis in these cells. To minimize potential deleterious effects of protein overexpression, we used the TALK-1 DN mutant as a control, which permitted dissociation of the effects of TALK-1-mediated K<sup>+</sup> conductance and protein-protein interactions on Ca<sup>2+</sup><sub>ER</sub> homeostasis. Overexpression of K<sup>+</sup>-conducting wild-type TALK-1 yielded a substantial increase in basal Ca<sup>2+</sup><sub>c</sub> and a concomitant reduction in total Ca<sup>2+</sup> released from the ER during CPA-induced inhibition of SERCAs when compared to the non-K<sup>+</sup>-conducting TALK-1 DN channels (Fig. 3, B through D). These observations suggest that TALK-1 channel activity promotes Ca<sup>2+</sup><sub>ER</sub> leak. Addition of Ca<sup>2+</sup> to the extracellular buffer produced a larger increase in Ca<sup>2+</sup><sub>c</sub> in wild-type-TALK-1 compared to TALK-1 DN-expressing cells, and similar to CPA-induced Ca<sup>2+</sup><sub>ER</sub> release, stimulation of IP3-triggered Ca<sup>2+</sup><sub>ER</sub> release with carbachol elicited a greater response in cells expressing TALK-1 DN (Fig. 3, B and E). Thus, the K<sup>+</sup>-channel function of TALK-1 is sufficient to alter Ca<sup>2+</sup><sub>ER</sub> homeostasis.

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To confirm the specificity of the effect of TALK-1 on Ca<sup>2+</sup><sub>ER</sub>, we compared Ca<sup>2+</sup><sub>ER</sub> storage in cells stably and inducibly expressing different K2P channels (43) (Fig. 4A, Fig. S4, A and B). Similar to transfected cells, TALK-1 induction reduced Ca<sup>2+</sup><sub>ER</sub> stores (Fig. 4A). We also found that expression of TASK-1 (Fig. 4A) and TASK-3 (Fig. S5, A and B) channels (21,

22) also caused a reduction in  $\text{Ca}^{2+}_{\text{ER}}$ . We confirmed the  $\text{Ca}^{2+}_{\text{ER}}$  reduction in TALK-1- and TASK-1-expressing cells by directly measuring  $\text{Ca}^{2+}_{\text{ER}}$  using the genetically encoded  $\text{Ca}^{2+}_{\text{ER}}$  indicator T1ER (44) (Fig. 4B). However, not all K2P channels influenced  $\text{Ca}^{2+}_{\text{ER}}$ , as demonstrated by the absence of a  $\text{Ca}^{2+}_{\text{ER}}$  phenotype following induction of TREK-2 or TREK-1 channels (Fig. 4A, Fig. S5 C through F).

This finding prompted us to examine whether pharmacological modulation of K2P channels could be used to manipulate  $\text{Ca}^{2+}_{\text{ER}}$  storage. Because specific pharmacology for TALK-1 channels does not presently exist, we tested if selective TASK-1 inhibition with ML365 (a small molecule antagonist of TASK-1 (45), and a partial TASK-3 inhibitor) could influence  $\text{Ca}^{2+}_{\text{ER}}$ . Inhibition of TASK-1 channel activity with ML365 treatment significantly restored  $\text{Ca}^{2+}_{\text{ER}}$  loss caused by TASK-1 channel induction (Fig. 4, C and D). As ML365 also partially blocks TASK-3, treatment of TASK-3-expressing cells with this compound caused a modest increase in  $\text{Ca}^{2+}_{\text{ER}}$  (Fig. S5, A and B). However, ML365 did not influence  $\text{Ca}^{2+}_{\text{ER}}$  in cells expressing TREK-1 or TREK-2 (Fig. S5, C through F). These data further support the hypothesis that  $\text{K}^{+}$  flux through ER K2P channels enhances  $\text{Ca}^{2+}_{\text{ER}}$  leak.

Although these observations suggested that pharmacological modulation of K2P channels could be used to regulate  $\text{Ca}^{2+}_{\text{ER}}$ , immortalized cell lines expressing TASK-1 may not recapitulate  $\text{Ca}^{2+}_{\text{ER}}$  handling of primary tissues. Thus, we tested whether pharmacological blockade of TASK-1 could alter  $\text{Ca}^{2+}_{\text{ER}}$  in primary islet  $\alpha$ -cells, where they regulate glucagon secretion (46). ML365 treatment increased  $\alpha$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  stores (Fig. 4, E and F). These data demonstrate that TASK-1 affects  $\alpha$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis, and that pharmacological inhibition of  $\text{Ca}^{2+}_{\text{ER}}$ -modulating K2P channels could be used to control  $\text{Ca}^{2+}_{\text{ER}}$  in primary islet cells.

TASK-1 mutations have been implicated in pulmonary arterial hypertension (PAH), one of which (G203D) is a dominant-negative mutation that directly impairs  $\text{K}^{+}$  conductance through TASK-1 (47). Expression of TASK-1 G203D produced a significantly greater increase in  $\text{Ca}^{2+}_{\text{ER}}$  stores compared to that of control TASK-1 channels (Fig. S5, G and H), an effect similar to that of expressing the TALK-1 DN mutant, which increased  $\text{Ca}^{2+}_{\text{ER}}$  stores compared to cells expressing wild-type TALK-1. These observations imply that defects in TASK-1  $\text{K}^{+}$  conductance may inappropriately increase  $\text{Ca}^{2+}_{\text{ER}}$  or impair physiologically important  $\text{Ca}^{2+}_{\text{ER}}$  fluxes.

### TALK-1 and TASK-1 form functional channels across the ER membrane

During  $\text{Ca}^{2+}_{\text{ER}}$  release,  $\text{K}^{+}$  moves across the ER membrane to maintain ER electroneutrality and sustain the driving force for  $\text{Ca}^{2+}_{\text{ER}}$  release (14, 16, 48, 49). To directly assess whether TALK-1 functions as an ER  $\text{K}^{+}$  channel, we used nuclear patch clamp electrophysiology (50) to measure channel activity on the outer nuclear membrane, which is continuous with the ER (Fig. 5, A and B). In nuclei from cells expressing TREK-2, which does not affect  $\text{Ca}^{2+}_{\text{ER}}$ , we did not detect TREK-2 channel activity (Figure 5C). However, nuclei from cells expressing TALK-1 (Fig. 5D) or TASK-1 (Fig. 5E) exhibited single-channel openings consistent with their respective biophysical profiles, suggesting that TALK-1 and TASK-1 form functional channels on the ER membrane.

These results implied that TALK-1 and TASK-1 regulate  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis by allowing  $\text{K}^+$  flux across the ER membrane. We further tested whether TALK-1 modulation of  $\text{Ca}^{2+}_{\text{ER}}$  release depended on  $\text{K}^+$  flux by manipulating the cytosolic  $\text{K}^+$  concentration. Using digitonin-permeabilized HEK293 cells expressing wild-type or DN TALK-1 and the genetically encoded  $\text{Ca}^{2+}_{\text{ER}}$  indicator G-CEPIA1er (37), we examined  $\text{Ca}^{2+}_{\text{ER}}$  leak in response to SERCA inhibition with CPA. In the presence of  $\text{K}^+$ ,  $\text{Ca}^{2+}_{\text{ER}}$  leak was faster in cells expressing wild-type TALK-1 compared to TALK-1 DN (Fig. S6, A through D). Therefore,  $\text{K}^+$  flux through TALK-1 supports the movement of  $\text{Ca}^{2+}$  across the ER membrane. We also examined whether TALK-1 functions as an ER  $\text{K}^+$  channel in primary cells by performing nuclear patch clamp recordings on nuclei isolated from wild-type and TALK-1 KO islets. We detected single channel openings (Fig. 5F) with a current amplitude comparable to cloned TALK-1 in  $55.6 \pm 6.3\%$  of wild-type islet cell nuclei (Fig. 5G). However, only  $31.2 \pm 2.7\%$  of nuclei from TALK-1 KO islets displayed K2P-like channel openings (Fig. 5H). Together, our findings suggest that TALK-1 and TASK-1 form functional channels on the ER membrane, allowing for a  $\text{K}^+$  countercurrent that supports  $\text{Ca}^{2+}_{\text{ER}}$  leak and helps to set  $\text{Ca}^{2+}_{\text{ER}}$ .

### TALK-1 regulation of $\beta$ -cell $\text{Ca}^{2+}_{\text{ER}}$ handling modulates islet $\text{Ca}^{2+}$ oscillations

To dissect the role of TALK-1 modulation of  $\text{Ca}^{2+}_{\text{ER}}$  during  $\beta$ -cell  $\text{Ca}^{2+}$  influx, we controlled  $\beta$ -cell  $\text{Ca}^{2+}_{\text{c}}$  influx with  $\text{K}^+$ -induced depolarization of diazoxide-treated cells, in the presence or absence of the SERCA inhibitor thapsigargin (51) (Fig. 6A). Under these conditions, the role of plasma membrane TALK-1 channels is effectively dissociated from its intracellular functions: diazoxide circumvents the depolarizing effects of glucose by activating  $\text{K}_{\text{ATP}}$  channels, and  $\text{K}^+$  depolarization activates voltage-gated  $\text{Ca}^{2+}$  channels (VDCCs) independently of  $\text{K}^+$  channel activity (52). Subtracting the control trace from the thapsigargin-treated trace revealed the  $\text{Ca}^{2+}_{\text{ER}}$  contribution to the  $\text{Ca}^{2+}_{\text{c}}$  signal (Fig. 6B). During  $\text{Ca}^{2+}$  influx,  $\text{Ca}^{2+}_{\text{ER}}$  uptake was observed (Figure 6B, downward deflection), whereas  $\text{Ca}^{2+}_{\text{ER}}$  release occurred following the depolarizing  $\text{K}^+$  pulse (Figure 6B, upward component). We found reduced  $\text{Ca}^{2+}_{\text{ER}}$  release in KO  $\beta$ -cells (Fig. 6, B and C), in accordance with our finding that TALK-1 channel activity promotes  $\text{Ca}^{2+}_{\text{ER}}$  release.

$\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  release has been implicated in the activation of hyperpolarizing  $\text{Ca}^{2+}$ -activated  $\text{K}^+$  currents (53–55). When stimulated with glucose, KO islets show accelerated  $\text{Ca}^{2+}$  oscillations (28), which may be due to changes in  $\text{Ca}^{2+}_{\text{ER}}$  control of the  $V_{\text{m}}$  and VDCC activity. We tested this by depleting  $\text{Ca}^{2+}_{\text{ER}}$  using CPA in wild-type and TALK-1 KO islets undergoing glucose-stimulated  $\text{Ca}^{2+}$  oscillations (Fig. 6D). Under low glucose conditions, basal  $\text{Ca}^{2+}_{\text{c}}$  concentrations were modestly lower in KO islets (Fig. 6E). Upon stimulation with high glucose,  $\text{Ca}^{2+}$  influx was significantly greater in KO islets (Fig. 6E). However,  $\text{Ca}^{2+}_{\text{ER}}$  depletion with CPA normalized  $\text{Ca}^{2+}_{\text{c}}$  concentrations in KO islets to similar to those in wild-type islets (Fig. 6E). As depletion of  $\text{Ca}^{2+}_{\text{ER}}$  removes the contribution of the ER from the glucose-stimulated  $\text{Ca}^{2+}_{\text{c}}$  signal, this finding suggested that TALK-1 influences  $\beta$ -cell  $\text{Ca}^{2+}_{\text{c}}$  by modulating  $\text{Ca}^{2+}_{\text{ER}}$  handling, which in turn regulates plasma membrane  $\text{K}^+$  currents and  $\text{Ca}^{2+}$  influx. Therefore, we proceeded to test the relationship between TALK-1 regulation of  $\text{Ca}^{2+}_{\text{ER}}$  release and  $\beta$ -cell  $\text{Ca}^{2+}$ -activated  $\text{K}^+$  currents.



The termination of each electrical oscillation is triggered by a slowly activating,  $\text{Ca}^{2+}$ -dependent  $\text{K}^+$  current termed  $\text{K}_{\text{slow}}$ , which is mediated by intermediate-conductance  $\text{K}_{\text{Ca}}$  channels (IK), apamin-insensitive small conductance (SK)  $\text{K}_{\text{Ca}}$  channels, and  $\text{K}_{\text{ATP}}$  channels (55–57). The  $\beta$ -cell ER can release  $\text{Ca}^{2+}$  close to the plasma membrane (58), and  $\text{K}_{\text{slow}}$  activity is sensitive to  $\text{Ca}^{2+}_{\text{ER}}$  release (53–55). In KO islets,  $V_m$  repolarization is reduced by approximately 50% at the termination of each electrical oscillation (28), suggesting that  $\text{K}_{\text{slow}}$  may be impaired in KO islets. We tested this notion by measuring  $\text{K}_{\text{slow}}$  in wild-type and KO  $\beta$ -cells.  $\text{K}_{\text{slow}}$  amplitude (Fig. 7A, inset) was reduced in KO  $\beta$ -cells by  $48 \pm 17\%$  relative to wild-type  $\beta$ -cells (Fig. 7, B and C). TALK-1 is not activated by  $\text{Ca}^{2+}_{\text{c}}$  in oocytes (59), and we also found that TALK-1 activity in HEK293 (Fig. 7D) or  $\beta$ -cells (Fig. 7E) was insensitive to  $\text{Ca}^{2+}_{\text{c}}$ , making it unlikely that TALK-1 is a constituent channel of  $\text{K}_{\text{slow}}$ . These findings suggest that TALK-1 may modulate  $\beta$ -cell  $\text{K}_{\text{slow}}$  indirectly through control of  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis. To assess whether modulation of K2P channels activity affects depolarization-induced  $\text{Ca}^{2+}_{\text{ER}}$  uptake and release, we inhibited TASK-1 in  $\alpha$ -cells with ML365. We found that TASK-1 channel inhibition reduced  $\text{Ca}^{2+}_{\text{ER}}$  release induced by  $V_m$  depolarization (51) (Fig. 7, G and H), suggesting that TASK-1 facilitates  $\alpha$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  release.

### TALK-1 channel activity exacerbates islet ER stress

Reduced  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  content is associated with ER stress and islet dysfunction in diabetes (4, 60–63). Our results indicated that TALK-1 channels were a determinant of  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  concentrations, and suggested that TALK-1 channel activity could exacerbate  $\text{Ca}^{2+}_{\text{ER}}$  depletion which leads to ER stress. Therefore, we determined whether the absence of functional TALK-1 channels impacted islet responses to the metabolic stress of a HFD. After one week of HFD feeding, the expression of genes involved in ER stress signaling did not differ between wild-type and TALK-1 KO islets (Fig. 8A). SERCA abundance is reported to change as a function of  $\text{Ca}^{2+}_{\text{ER}}$  content (64, 65); however, we did not detect differences in the expression of mRNAs encoding SERCA2b and SERCA3 in wild-type and TALK-1 KO islets. However, after prolonged (20 weeks) exposure to a HFD, TALK-1 KO islets exhibited decreased expression of multiple ER stress genes, as well as significantly decreased expression of mRNA encoding SERCA2b and SERCA3 (Fig. 8B). The decreased *SERCA* expression may represent a compensatory mechanism to reduce  $\text{Ca}^{2+}_{\text{ER}}$  overloading and maintain  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  concentrations in an optimal range.

We also assessed whether the T2DM-linked gain-of-function polymorphism (rs1535500) encoding TALK-1 A277E (28) interfered with ER function. ATF6 transcriptional activation occurs in response to ER  $\text{Ca}^{2+}$  depletion and protein misfolding (65, 66), which we measured in INS-1 cells (with a luciferase reporter containing five tandem repeats of ATF6 binding sites (67, 68)) after application of tunicamycin, which inhibits protein glycosylation and causes protein misfolding and ER stress. INS-1 cells expressing wild-type TALK-1 or TALK-1 A277E were significantly more susceptible to tunicamycin-induced ATF6 activation than cells expressing the non-conducting TALK-1 DN. Furthermore, TALK-1 A277E activated ATF6 to a significantly greater extent than wild-type TALK-1 (Fig. 8C). However, co-expression of TALK-1 A277E with the TALK-1 DN reduced ATF6 activation to amounts comparable to that induced by expression of TALK-1 DN alone (Fig. 8C). INS-1

cells expressing TALK-1 A277E showed reduced  $\text{Ca}^{2+}_{\text{ER}}$  concentrations compared to cells expressing wild-type TALK-1 (Fig. 8D). Together, our findings indicate that TALK-1 channels control  $\text{Ca}^{2+}_{\text{ER}}$  fluxes in the islet, which may regulate plasma membrane ion channel activity, electrical excitability, and  $\text{Ca}^{2+}_{\text{ER}}$  concentrations important for protein processing (Fig. S7).

## DISCUSSION

Tight regulation of  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  is required to sustain insulin synthesis, metabolism, as well as intracellular  $\text{Ca}^{2+}$  signaling, and perturbations in  $\text{Ca}^{2+}_{\text{ER}}$  handling contribute to diabetes pathogenesis.  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  is controlled by several proteins including SERCAs (38, 62), IP3Rs (69), RyRs (2, 69, 70), and the translocon (71). However, the ubiquitous distribution of most  $\text{Ca}^{2+}_{\text{ER}}$  handling proteins precludes their clinical use in treating diabetes. Here, we demonstrated that pharmacological manipulation of K2P channels can be used to control primary cell  $\text{Ca}^{2+}_{\text{ER}}$ . Moreover, our data indicated that inhibiting TALK-1 channel activity could protect islets from ER stress induced by prolonged exposure to a HFD. These observations suggest the exciting potential of utilizing K2P channels such as TALK-1 as a therapeutic target to reduce  $\beta$ -cell ER dysfunction under diabetic conditions.

$\text{Ca}^{2+}_{\text{ER}}$  is determined by a balance of SERCA activity,  $\text{Ca}^{2+}_{\text{ER}}$  release, and  $\text{Ca}^{2+}_{\text{ER}}$  buffering.  $\text{Ca}^{2+}_{\text{ER}}$  release shifts the ER membrane potential ( $V_{\text{m(ER)}}$ ) towards the  $\text{Ca}^{2+}_{\text{ER}}$  reversal potential ( $E_{\text{Ca}^{2+}(\text{ER})}$ ), where net  $\text{Ca}^{2+}_{\text{ER}}$  efflux would stop. However, the  $\text{K}^{+}$  countercurrent across the ER membrane maintains  $V_{\text{m(ER)}}$  positive of  $E_{\text{Ca}^{2+}(\text{ER})}$ , facilitating  $\text{Ca}^{2+}_{\text{ER}}$  release (16, 20, 49, 72). Our data indicate that ER TALK-1  $\text{K}^{+}$  currents support the electrochemical driving force for  $\text{Ca}^{2+}_{\text{ER}}$  release, consistent with our observation that TALK-1 overexpression decreased  $\text{Ca}^{2+}_{\text{ER}}$  storage by increasing  $\text{Ca}^{2+}_{\text{ER}}$  leak. Conversely, inhibition of TALK-1 should move the  $V_{\text{m(ER)}}$  closer to  $E_{\text{Ca}^{2+}(\text{ER})}$ , resulting in reduced  $\text{Ca}^{2+}_{\text{ER}}$  leak and increased  $\text{Ca}^{2+}_{\text{ER}}$  (15), a prediction in accordance with the phenotype of TALK-1 KO  $\beta$ -cells.

Although a diminished contribution of  $\text{Ca}^{2+}_{\text{ER}}$  leak to bulk  $\text{Ca}^{2+}_{\text{c}}$  might be predicted to impair GSIS, TALK-1 KO islets exhibit increased glucose-stimulated  $\text{Ca}^{2+}$  influx and insulin secretion (28). These observations suggest that  $\beta$ -cell  $\text{Ca}^{2+}$  influx through VDCCs is increased following loss of TALK-1 channels.  $\text{Ca}^{2+}_{\text{ER}}$  can play important roles in controlling plasma membrane channels that tune VDCC activity. For example,  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  release influences insulin secretion through modulation of currents which hyperpolarize the  $V_{\text{m}}$ , such as  $\text{K}_{\text{slow}}$ , thereby indirectly controlling VDCC activity. In TALK-1 KO  $\beta$ -cells, reduced  $\text{Ca}^{2+}_{\text{ER}}$  release presumably results in less  $\text{K}_{\text{slow}}$  activation, leading to  $V_{\text{m}}$  depolarization and more persistent electrical activity, culminating in a net increase in  $\text{Ca}^{2+}_{\text{c}}$  and enhanced GSIS.  $\text{Ca}^{2+}_{\text{ER}}$  release serves an important role in regulating 2<sup>nd</sup>-phase  $\text{Ca}^{2+}_{\text{c}}$  influx and insulin secretion, which are increased when SERCAs are inhibited pharmacologically and is also observed in islets lacking SERCA3 (38, 73, 74). Similarly, we find that both 2<sup>nd</sup>-phase  $\text{Ca}^{2+}_{\text{c}}$  and insulin secretion are increased in the absence of functional TALK-1 channels (28). These observations suggest that TALK-1 modulation of the  $\text{Ca}^{2+}_{\text{ER}}$  handling which control 2<sup>nd</sup>-phase insulin secretion is a key physiological function of  $\beta$ -cell TALK-1 channels.



As mentioned above, TALK-1 KO islets exhibit increased insulin secretion, a higher frequency of  $\text{Ca}^{2+}_c$  oscillations, and increased plateau fraction (the fraction of time spent in electrically excitable periods) (28). The present study helps resolve the molecular mechanisms underlying these phenotypes. A rationale for the increased plateau fraction and oscillation frequency in TALK-1 KO islets is that ER TALK-1 channels sustain  $\text{Ca}^{2+}_{\text{ER}}$  release, which results in greater  $\text{K}_{\text{slow}}$  activity and  $V_m$  hyperpolarization. Because this  $\text{Ca}^{2+}_{\text{ER}}$  release is reduced in TALK-1 KO  $\beta$ -cells,  $\text{K}_{\text{slow}}$  activation is diminished, resulting in an increased plateau fraction. This is in accordance with observations that depletion of  $\text{Ca}^{2+}_{\text{ER}}$  inhibits  $\text{K}_{\text{slow}}$  and accelerates  $\text{Ca}^{2+}_c$  oscillations (53).  $\text{Ca}^{2+}_{\text{ER}}$  concentrations also determine the activation of depolarizing store-operated currents, as demonstrated by the acceleration of  $V_m$  and  $\text{Ca}^{2+}_c$  oscillations after treatment of islets with SERCA inhibitors (75–77), presumably due to inhibition of  $\text{K}_{\text{slow}}$  and activation of SOCE. These observations highlight that SOCE serves an important role in shaping islet  $\text{Ca}^{2+}_c$  oscillations, and future studies are required to dissect the relationship between TALK-1 modulation of  $\text{Ca}^{2+}_{\text{ER}}$  stores, SOCE,  $V_m$  and  $\text{Ca}^{2+}_c$  oscillations, and insulin secretion.

ER  $\text{K}^+$  channels are also important for  $\text{Ca}^{2+}_{\text{ER}}$  uptake, as demonstrated by the influence of ER-localized SK channels in regulating neuronal and cardiomyocyte ER and SR  $\text{Ca}^{2+}$  uptake (20). SK channels are predicted to preserve ER pH homeostasis through activation of an ER  $\text{K}^+/\text{H}^+$  antiporter that promotes ER  $\text{H}^+$  entry to balance SERCA-mediated  $\text{H}^+$  loss during  $\text{Ca}^{2+}$  uptake (20). Although we cannot exclude a role for K2P channels in modulating SERCA function, we found reduced basal  $\text{Ca}^{2+}_{\text{ER}}$  when TALK-1 was heterologously expressed, and conversely found increased  $\text{Ca}^{2+}_{\text{ER}}$  in TALK-1 KO  $\beta$ -cells. These findings suggest that if TALK-1 controls  $\text{Ca}^{2+}_{\text{ER}}$  uptake, it would presumably do so by inhibiting SERCA function, in contrast to SK channels, which enhance SERCA function. Any effects of TALK-1 on SERCA activity could be through indirect mechanisms modulated by  $\text{Ca}^{2+}_{\text{ER}}$ , such as mitochondrial ATP production which energizes the  $\beta$ -cell SERCA pump (78).

Our observations suggested that TALK-1 activity controls  $\text{Ca}^{2+}_{\text{ER}}$ , which impacts many aspects of  $\beta$ -cell function in health and disease. In addition to controlling  $\text{Ca}^{2+}_c$  signals, another essential function of  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  handling is to maintain insulin production and processing, which is impaired under conditions of  $\beta$ -cell stress induced by insulin resistance or decreased  $\beta$ -cell mass. A hallmark of ER stress is increased  $\text{Ca}^{2+}_{\text{ER}}$  leak (2), which can be caused in  $\beta$ -cells by reductions in the abundance of proteins which affect  $\text{Ca}^{2+}_{\text{ER}}$  such as SERCA2b (60, 62) or sorcin (68). Our data indicate that TALK-1 activity aggravated islet ER stress under conditions of increased systemic insulin demand. Moreover, our finding that T2DM-associated TALK-1 A277E channels exacerbated  $\text{Ca}^{2+}_{\text{ER}}$  leak and ER stress responses suggests that defects in TALK-1 channel activity could contribute to islet ER dysfunction in diabetes. *TALK-1* transcript abundance is reduced under conditions that cause ER stress in diabetes (such as palmitate or inflammatory cytokine treatment (79)), which may be a protective mechanism to preserve  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis by reducing  $\text{Ca}^{2+}_{\text{ER}}$  leak. It will be important to determine how TALK-1 participates in the cellular response to other diabetes-associated ER stressors.

Mutations in other K2P channels have also been associated with various disorders that may be associated with defects in  $\text{Ca}^{2+}_{\text{ER}}$  handling. For example, dominant-negative mutations in

TASK-1 or TASK-3 result in PAH or Birk-Barel syndrome, respectively (47). We found that a PAH-linked mutation in TASK-1 (G203D) enhanced  $\text{Ca}^{2+}_{\text{ER}}$  stores relative to wild-type TASK-1. Thus, in patients with the TASK-1 G203D mutation, disruptions in ER/SR  $\text{Ca}^{2+}$  handling may contribute to PAH (80). In pulmonary arterial smooth muscle cells, impaired  $\text{Ca}^{2+}_{\text{ER}}$  transfer to mitochondria leads to pulmonary vascular remodeling, a defect that can be targeted with clinically used chemical chaperones to ameliorate PAH (80, 81). Inhibition of TASK-1 using the specific inhibitor A293 causes pulmonary vascular remodeling and PAH in rats, and pharmacological activation of TASK-1 protects from the development of PAH (82). TASK-3 also controls  $\text{Ca}^{2+}_{\text{ER}}$ , and a mutation in *KCNK9* (which encodes TASK-3, G236R) causes Birk-Barel syndrome, which is characterized by intellectual disability, hypotonia, and facial dysmorphism. TASK-3 is also implicated in mitochondrial function (83), highlighting the importance of determining the relationship between TASK-3 modulation of  $\text{Ca}^{2+}_{\text{ER}}$  handling and mitochondrial function. As we found that pharmacological regulation of TASK-1 could control primary cell  $\text{Ca}^{2+}_{\text{ER}}$ , K2P channels such as TASK-1, TASK-3 or TALK-1 could be targeted for cell-selective therapies to reduce ER dysfunction.

Not all K2P channels regulate  $\text{Ca}^{2+}_{\text{ER}}$ , as demonstrated by our finding that neither TREK-1 channels nor TREK-2 channels affected  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis. These findings could be due to localization of these channels; TREK-1 channels are found primarily on the plasma membrane (84), whereas the subcellular localization of TREK-2 channels has not been determined. However, all  $\text{K}^{+}$  channels are assembled in the ER prior to their delivery to the plasma membrane (85). It remains to be determined how certain K2P channels (specifically, TALK-1, TASK-1, and TASK-3) regulate  $\text{Ca}^{2+}_{\text{ER}}$  whereas others (specifically, TREK-1 and TREK-2) do not. As many  $\text{K}^{+}$  channels, such as  $\text{K}_{\text{ATP}}$ , require a physical interaction with the plasma membrane lipid phosphatidylinositol 4,5-bisphosphate ( $\text{PIP}_2$ ) to conduct  $\text{K}^{+}$ , K2P channels that are dependent on  $\text{PIP}_2$  for activity may not function in the ER membrane. This property could be due to intrinsically low  $\text{PIP}_2$  concentrations on the ER membrane, which limits  $\text{K}^{+}$  channel activity until they are transported to the plasma membrane (86). TREK-1 is highly sensitive to  $\text{PIP}_2$ , whereas both TASK-1 and TASK-3 channels, both of which affect  $\text{Ca}^{2+}_{\text{ER}}$ , are insensitive to  $\text{PIP}_2$  (87). Future studies are needed to better understand the regulatory mechanisms underlying K2P channel activity in the ER, and how these impact  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis.

In conclusion, we demonstrate that TALK-1 in the ER regulates  $\text{Ca}^{2+}_{\text{ER}}$  handling, thus controlling  $\text{K}_{\text{slow}}$  activity,  $\text{Ca}^{2+}$  influx, and insulin secretion. These findings highlight a physiological function of K2P channels in the regulation of  $\text{Ca}^{2+}_{\text{ER}}$ . K2P channels may provide cell-selective targets to modulate  $\text{Ca}^{2+}_{\text{ER}}$  to treat the many diseases characterized by dysfunctional  $\text{Ca}^{2+}_{\text{ER}}$  handling.

## MATERIALS AND METHODS

### Chemicals

Unless otherwise specified, all reagents were obtained from Sigma-Aldrich.

## Mouse Models

The mice used in this study were 8–12 week-old males on a C57Bl6/J background. The generation of *Kcnk16*<sup>-/-</sup> (TALK-1 KO) mice has been previously described (28). For experiments using mouse  $\alpha$ -cells, transgenic mice expressing tdRFP specifically in  $\alpha$ -cells were used (46). All mice used in this study were handled in compliance with protocols reviewed and approved by the Vanderbilt University Institutional Animal Care and Use Committee, according to guidelines set forth by the NIH.

## Islet isolation and culture

Mouse islets were isolated using collagenase P (Roche) digestion of the pancreas and density gradient centrifugation (5). Human islets from adult nondiabetic donors (donor information is provided in Table S1) were obtained through isolation centers organized by the Integrated Islet Distribution Program. In experiments using D4ER, cells were transduced with Ad-D4ER (38) 48 hours prior to imaging. In human  $\beta$ -cell experiments, cells were transfected with TALK-1 DN- or mCherry-expressing plasmids (28). Islets and dispersed cells were cultured for 24–48 hours prior to experimentation (28).

## Cell culture and luciferase assays

The development of TREx-293 cells with inducible expression of K2P channels has been previously described (43). To measure TALK-1 and TASK-1 expression in induced cells, lysates from TALK-1- or TASK-1-TREx-293 cells treated for 24 hours with or without tetracycline (1  $\mu$ g/mL) induction were run on 4–12% Bis-Tris polyacrylamide gels (Invitrogen). The protein was then transferred to a nitrocellulose blotting membrane (BioRad) which was probed with TALK-1 (Novus Biologicals #NBP1-83071) or TASK-1 (Abcam #49433) antibodies. Equal loading of wells was assessed by stripping and reprobing membranes with a  $\beta$ -actin antibody (Cell Signaling Technologies #4970). Representative blots are shown in Fig. S4. For experiments comparing the effects of wild-type TALK-1 and TALK-1 DN on  $\text{Ca}^{2+}_{\text{ER}}$  handling, HEK293 cells were transfected with pCDNA3.1 plasmids encoding these channels using Lipofectamine 3000 (Thermo Fisher) according to the manufacturer's instructions, and imaged 48 hours post-transfection.

INS-1 (832/13) cells were cultured in RPMI 1640 supplemented with 15% FBS and penicillin-streptomycin. INS-1 cells were transfected with p5 $\times$ ATF6-GL3 (Addgene #11976) and plasmids encoding wild-type TALK-1, TALK-1 A277E, or TALK-1 DN (28). Cells were incubated overnight with vehicle (DMSO) or tunicamycin (0.25  $\mu$ g/mL) for 16–20 hours prior to performing a luciferase assay using the Steady-Glo Luciferase Assay System (Promega) according to the manufacturer's instructions.

## Patch clamp electrophysiology

An Axopatch 200B amplifier (Molecular Devices) was used to measure whole-cell  $\text{K}^{+}$  channel currents in the voltage-clamp mode; currents were digitized using a Digidata 1440, lowpass filtered at 1 kHz and sampled at 10 kHz. For  $\text{K}_{\text{slow}}$  recordings, pipettes were filled with an intracellular solution (57) containing (in mM) 28.4  $\text{K}_2\text{SO}_4$ , 63.7 KCl, 11.8 NaCl, 1  $\text{MgCl}_2$ , 20.8 HEPES, 0.5 EGTA (pH 7.22 with KOH) and  $\sim 0.05 \text{ mg}\cdot\text{ml}^{-1}$  amphotericin B. Nuclear patch clamp experiments were performed using the approach described by Mak and

colleagues (50). Nuclei were patched in a solution containing (in mM): 150 KCl, 10 HEPES, 0.5 EGTA, 0.36 CaCl<sub>2</sub> (pH 7.3 with KOH). Patch electrodes were pulled to a resistance of 8–10 MΩ, loaded with recording solution, and coated with Sigmacote. Single-channel currents were lowpass filtered at 1 kHz and sampled at 50 kHz. When intracellular [Ca<sup>2+</sup>] was clamped, cells were recorded using the whole-cell configuration using electrodes filled with a solution containing (in mM) 140 KCl, 5 HEPES, 4 Mg·ATP, 1 EGTA, 137 μM (for 50 nM Ca<sup>2+</sup> final) or 946 μM (for 5 μM Ca<sup>2+</sup> final) CaCl<sub>2</sub>, (pH 7.22 with KOH). [Ca<sup>2+</sup>] was determined using MAXCHELATOR software. The extracellular buffer used for islet-cells (A modified Krebs-Ringer buffer, KRB) contained (in mM) 119 NaCl, 2.5 CaCl<sub>2</sub>, 4.7 KCl, 25 HEPES, 1.2 MgSO<sub>4</sub>, 1.2 KH<sub>2</sub>PO<sub>4</sub>, 11 glucose (pH 7.35 with NaOH). The extracellular buffer used for HEK293 cells (HEK buffer) contained (in mM) 150 NaCl, 5 KCl, 2 MgCl<sub>2</sub>, 2.5 CaCl<sub>2</sub>, 10 HEPES, and 10 glucose (pH 7.35 with NaOH). When assessing the Ca<sup>2+</sup> sensitivity of TALK-1 in β-cells, the extracellular buffer was supplemented with a cocktail of K<sup>+</sup> channel inhibitors including 200 μM tolbutamide (MP Biomedicals), 10 mM tetraethylammonium chloride (Acros Organics), 100 nM apamin (Alomone Labs), 100 nM iberiotoxin (Alomone Labs), 100 nM TRAM-34 (Alomone Labs), and 10 μM nifedipine to inhibit voltage-gated Ca<sup>2+</sup> channels. Cells were recorded with a voltage-clamp protocol used to assess K2P channel currents (28). Recordings were analyzed using Clampfit 10 (Molecular Devices) and Microsoft Excel software.

### Calcium imaging

Mouse and human β-cells were loaded with 2 μM Fura-2 AM (Molecular Probes) and imaged as previously described (88). Cyclopiazonic acid (CPA; Alomone Labs) was used at a concentration of 50 μM; ionomycin was used at a concentration of 5 μM (Alomone Labs). Human β-cells were post-stained for insulin (88). In all experiments, cells were perfused with a flow of 2 mL·min<sup>-1</sup> at 37 °C. For analysis of mouse β-cell Ca<sup>2+</sup><sub>ER</sub> uptake and release (51), Fura-2 loaded cells were incubated for 10 minutes in KRB supplemented with 11 mM glucose, 125 μM diazoxide (Enzo) and 1.25 μM thapsigargin (Alomone Labs) or vehicle. In high-[K<sup>+</sup>] stimulus buffer, NaCl was reduced accordingly to maintain osmolarity. For experiments using D4ER, cells were incubated for 20 minutes in KRB containing 2 mM glucose prior to imaging.

For assays comparing the effects of expression of K2P channels in stably transduced TREx-293 cells, 30,000 cells/well were seeded to 384-well black-wall, clear-bottom, amine-coated plates (BD Biosciences). Channel expression was induced with 1 μg·ml<sup>-1</sup> tetracycline in culture medium, and the cells were cultured overnight in a 5% CO<sub>2</sub> incubator at 37 °C. The cells were washed using an ELx405CW plate washer (Bio-Tek Instruments, Inc.), and loaded with 4 μM Fluo-4 AM (Molecular Probes) for 45 minutes in a 5% CO<sub>2</sub> incubator at 37 °C. The cells were then washed with buffer supplemented with 1 mM EGTA and incubated in a 5% CO<sub>2</sub> incubator at 37 °C for 8 minutes before imaging. Plates were then loaded into a whole-plate kinetic-imaging Functional Drug Screening System (FDSS 6000, Hamamatsu, Bridgewater, NJ) and imaged at 37 °C as previously described (43).

When assessing the effects of TASK-1 or TASK-3 channel blockade, cells were loaded three hours before imaging with 500 nM ML365 (Tocris) or DMSO vehicle in culture medium,

and in  $\alpha$ -cells, the culture medium also contained 125  $\mu$ M diazoxide. ML365 was present throughout the experiment. For high-speed imaging of  $\alpha$ -cell  $\text{Ca}^{2+}$  influx, cells were loaded with 5  $\mu$ M Fluo-4 AM for 25 minutes, followed by washing with KRB (11 mM glucose).  $\alpha$ -cells were then patched according to the perforated patch clamp protocol described above on a Nikon Eclipse TE2000-U microscope equipped with an X-Cite 120Q widefield fluorescence light source (Excelitas Technologies) and a D-104 microscope photometer (Photon Technologies Inc.). Upon obtaining a low-leak, G $\Omega$  seal, the fluorescence light source was activated, and plasma membrane currents were recorded using the  $K_{\text{slow}}$  voltage-clamp protocol (57) simultaneously with Fluo-4 fluorescence. Currents and photometer signal were digitized and sampled at 10 kHz. For analysis of the effects of TALK-1 on the CPA-induced  $\text{Ca}^{2+}_{\text{ER}}$  leak rate, TREx-293 cells transfected with wild-type TALK-1 or DN and CEPIA1-ER (37) (Addgene #58215) were permeabilized for 4 minutes in a 5%  $\text{CO}_2$  incubator at 37  $^{\circ}\text{C}$  in an intracellular buffer containing (in mM): 140 potassium gluconate or 140 Tris base ( $\text{K}^+$ -free), 10 HEPES, 1 EGTA, 0.432  $\text{CaCl}_2$ , 3 Mg $\cdot$ ATP, with sucrose added as needed to match osmolarity (pH 7.24), and supplemented with 50  $\mu\text{g}\cdot\text{ml}^{-1}$  digitonin (Santa Cruz). Cells were then washed for an additional 5 minutes in the appropriate buffer without digitonin prior to the start of imaging. To determine the rate constant of CPA-induced  $\text{Ca}^{2+}$  leak, the normalized data was fit to a one-phase exponential decay model using GraphPad Prism7 software. Data were analyzed using Nikon Elements, Microsoft Excel, Clampfit 10 and GraphPad Prism7 software.

### Site-directed mutagenesis

The TASK-1 G203D point mutation was generated using a previously described approach (28). The sequences of oligonucleotide primers (Integrated DNA Technologies) used to create the TASK-1 G203D mutant were ACCACCATCGGCTTCGACGACTACGTGGCGCTGCAGA (forward) and TCTGCAGCGCCACGTAGTCGTCGAAGCCGATGGTGGT (reverse). PCRs were performed in 50  $\mu\text{L}$  with Q5 high-fidelity DNA polymerase (New England Biolabs) with 100 ng of pCDNA3.1-KCNK3 plasmid. DNA was then incubated with 1  $\mu\text{L}$  DpnI for two hours at 37  $^{\circ}\text{C}$ . Clones were sequenced to confirm mutagenesis.

### Quantitative real-time PCR (qPCR)

qPCR of cDNA obtained from mouse islets was performed according to the approach described by Tong and colleagues (62). A list of primers can be found in Table S3.

### Immunofluorescence

Processing and staining of paraffin-embedded mouse and human pancreas sections was performed as previously described (human donor information is provided in Table S2) (28). Sections were stained using primary antibodies against TALK-1 (Novus Biologicals #NBP1-83071; 1:175) and calreticulin (Santa Cruz #N-19; 1:125); secondary antibodies used were Alexa Fluor 488-conjugated donkey anti-rabbit (Jackson Immunoresearch #711-546-152; 1:300) and DyLight 650-conjugated donkey anti-goat (Thermo Fisher #SA5-10089; 1:250). HEK293 cells co-transfected with TALK-1a or TALK-1b (28) and ER-targeted EYFP (Addgene #56589) were washed twice with cold phosphate-buffered saline (PBS), then fixed in 4% paraformaldehyde (Electron Microscopy Sciences) for 30 minutes at



4 °C. Cells were then incubated in PBS supplemented with 0.2% bovine serum albumin (BSA), 2% normal donkey serum (NDS; Jackson Immunoresearch), and 0.05% Triton X-100 for one hour, followed by incubation in PBS containing primary antibodies against TALK-1 (1:175) and GFP (Novus Biologicals NB600-597; 1:300), 0.2% BSA, 1% NDS, and 0.1% Triton X-100, overnight at 4 °C. Following removal of the primary antibody solution, the cells were subjected to two 10-minute PBS washes, then incubated in the dark for one hour at room temperature in PBS containing 1% NDS and secondary antibodies: Alexa Fluor 488-conjugated donkey anti-rabbit (1:300) and Alexa Fluor 647-conjugated goat anti-mouse (Thermo Fisher A21237; 1:300). The secondary antibody solution was removed and the cells were subjected to three 8-minute PBS washes prior to imaging. All images were obtained using a Zeiss LSM 710 or Zeiss LSM 780 confocal laser scanning microscope. Images were analyzed using ImageJ software.

For analysis of islet cell numbers, paraffin embedded were processed as described above, and stained using primary antibodies against insulin (Dako #A0564; 1:500), somatostatin (Santa Cruz Biotechnology sc-7819: 1:250), and glucagon (Proteintech #15954-I-AP: 1:500); secondary antibodies used were Alexa Fluor 488-conjugated donkey anti-rabbit (Jackson Immunoresearch #711-546-152; 1:500), DyLight 650-conjugated donkey anti-goat (Thermo Fisher #SA5-10089; 1:250), Cy3-conjugated donkey anti-guinea pig (Jackson Immunoresearch #706-165-148; 1:500).

For analysis of high-fat diet induced islet-cell proliferation, age-matched wild-type and TALK-1 KO were placed on a high-fat diet (60% kcal/fat; Research Diets #D12492) for 10 days. Four days prior to sacrifice, mice were provided with drinking water containing BrdU (0.8 mg·ml<sup>-1</sup>) supplemented with Splenda artificial sweetener (20 mg·ml<sup>-1</sup>). Paraffin embedded pancreata were processed as described above, and were subjected to antigen retrieval performed in 1× NaCitrate pH 6.0, for 14 minutes in a microwave at high power, followed by cooling at room temperature in 1× NaCitrate solution for 25 minutes. Following antigen retrieval, slides were washed for 10 minutes in ddH<sub>2</sub>O, followed by two 2-minute washes in PBS. Sections were the stained using primary antibodies against insulin (Dako #A0564; 1:500), somatostatin (Santa Cruz Biotechnology sc-7819: 1:250), glucagon (Proteintech #15954-I-AP; 1:500), and BrdU (Developmental Studies Hybridoma Bank #G3G4; 1:50). Secondary antibodies used were Alexa Fluor 647-conjugated goat anti-mouse (Life Technologies #A21237: 1:250), DyLight 488-conjugated Donkey anti-mouse (Thermo Scientific #SA5-10166; 1:300), and Alexa Fluor 594-conjugated Donkey Anti-Guinea Pig (Jackson Immunoresearch #706-586-148; 1:400), DyLight 650-conjugated donkey anti-goat (Thermo Fisher #SA5-10089; 1:250), Alexa Fluor 488-conjugated donkey anti-rabbit (Jackson Immunoresearch #711-546-152; 1:500). Blocking was done in a dark humidity chamber for one hour using Dako Blocking Solution (Ref # X0909). Primary antibodies were diluted to above concentrations in DAKO Antibody Diluent Solution (Ref#S3002) and incubated on the sections overnight at 4 °C. Following primary antibody incubation, slides were washed for 5 minutes in PBS twice. Secondary antibodies were diluted to the above concentrations in PBS supplemented with 5% NDS and incubated on slides in the dark for 2 hours at room temperature. Sections were then washed twice for five minutes in PBS and DAPI was added (1:1000 for 2 minutes). Following DAPI staining, sections were washed for 5 minutes in ddH<sub>2</sub>O and then mounted with a coverslip.



All sections were imaged with an Aperio ImageScope and analyzed using an algorithm developed with Aperio IndicaLabs- CytoNuclear FLv1.2 software. The algorithm is designed to take into account factors such as nuclear staining, cytoplasm radius, nuclear size, nuclear roundness, and dye fluorescence wavelength (Cy2, Cy3, or Cy5), to identify, differentiate, and count  $\beta$ ,  $\delta$ , and  $\alpha$  cells. The algorithm was also used to count the number of  $\beta$ -,  $\delta$ -, and  $\alpha$ - cells on the slides labeled with Brd-U, which was further analyzed using ImageJ software and Microsoft Excel.

### Statistics

The data is presented as recordings that are averaged or representative of results obtained from at least three independent cultures. All values presented are the mean  $\pm$  SEM. Statistical differences between means were assessed using Student's *t*-test or one-way ANOVA, as appropriate. The significance of all experimental findings presented as fold changes was assessed by performing statistical tests on log-transformed data.  $P < 0.05$  was considered as significant.

### Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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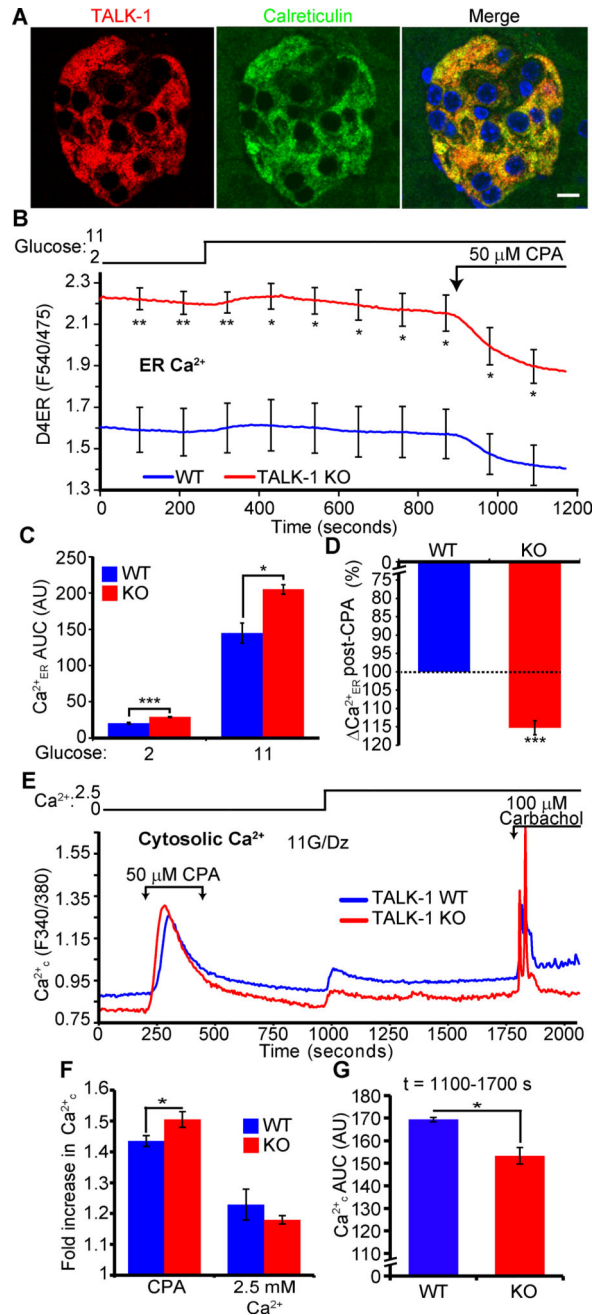
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### Figure 1. TALK-1 channels modulate $\beta$ -cell $\text{Ca}^{2+}_{\text{ER}}$ homeostasis

(A) Representative images of a mouse pancreas section stained for TALK-1 and calreticulin. Scale bar is 10  $\mu\text{m}$ . Images are representative of results obtained from 3 mice. (B)  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  measurements made with the genetically encoded  $\text{Ca}^{2+}_{\text{ER}}$  indicator D4ER. Cells were perfused with solutions containing indicated glucose concentrations and 50  $\mu\text{M}$  CPA ( $N=3$  mice per genotype). (C) Area under the curve (AUC) analysis of  $\text{Ca}^{2+}_{\text{ER}}$  under low (2 mM) and high (11 mM) glucose conditions from (B). (D) CPA-induced reduction in  $\text{Ca}^{2+}_{\text{ER}}$ , presented as percent of maximum  $\text{Ca}^{2+}_{\text{ER}}$  of wild-type (WT)  $\beta$ -cells from (B). (E) WT and TALK-1 KO  $\beta$ -cells were perfused with the indicated solutions; 11 mM glucose (G)

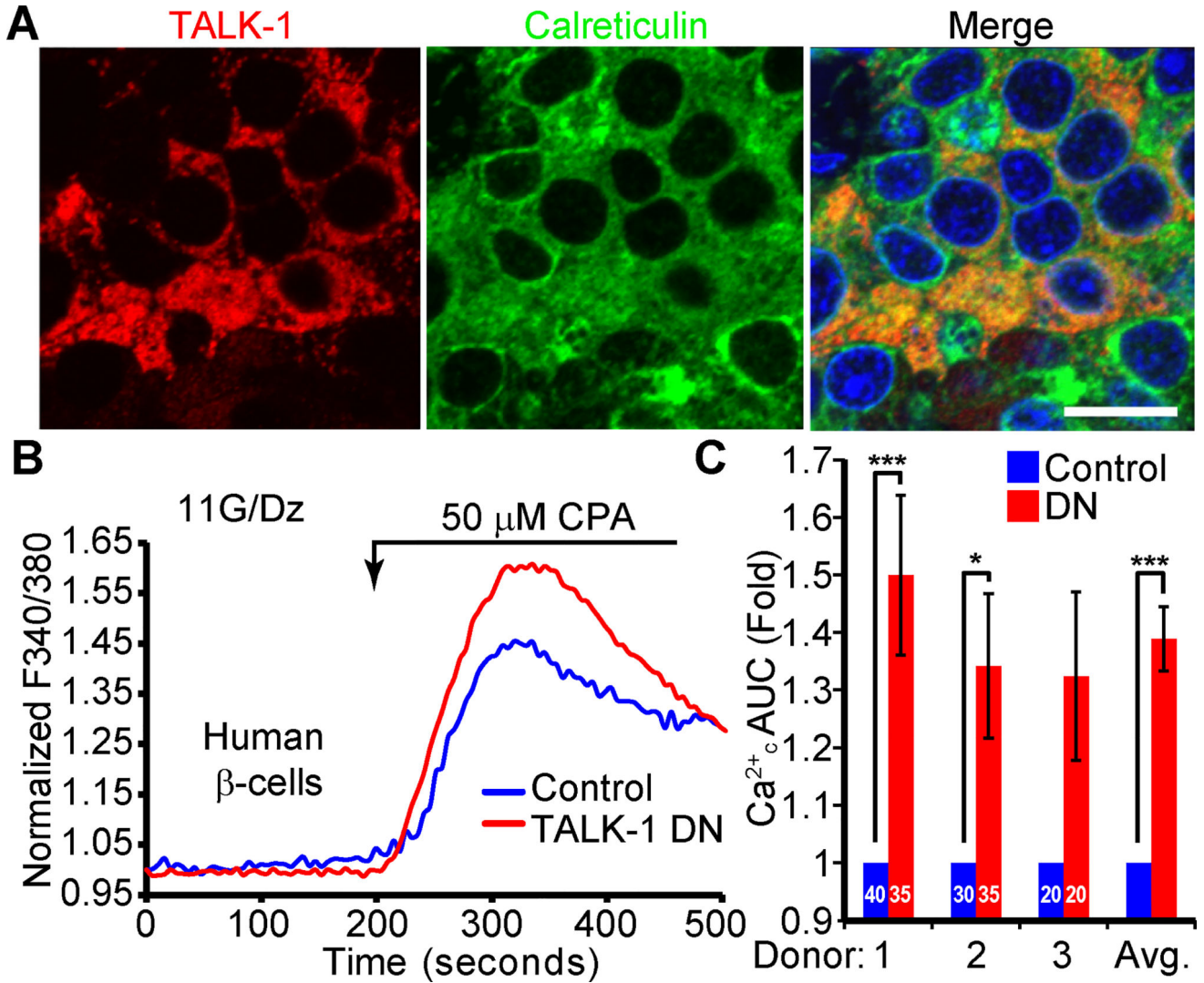
and 125  $\mu\text{M}$  diazoxide (Dz) were present throughout the experiment. **(F)** Fold increase in  $\text{Ca}^{2+}$  in response to the indicated treatments. **(G)**  $\text{Ca}^{2+}$  AUC for the period following addition of 2.5 mM  $\text{Ca}^{2+}$  to the extracellular buffer ( $t=1000\text{--}1750$  s) ( $N=5$  mice per genotype for E to G). Statistical significance was determined by Student's  $t$ -test; \* $P<0.05$ , \*\* $P<0.01$ , \*\*\* $P<0.005$ .

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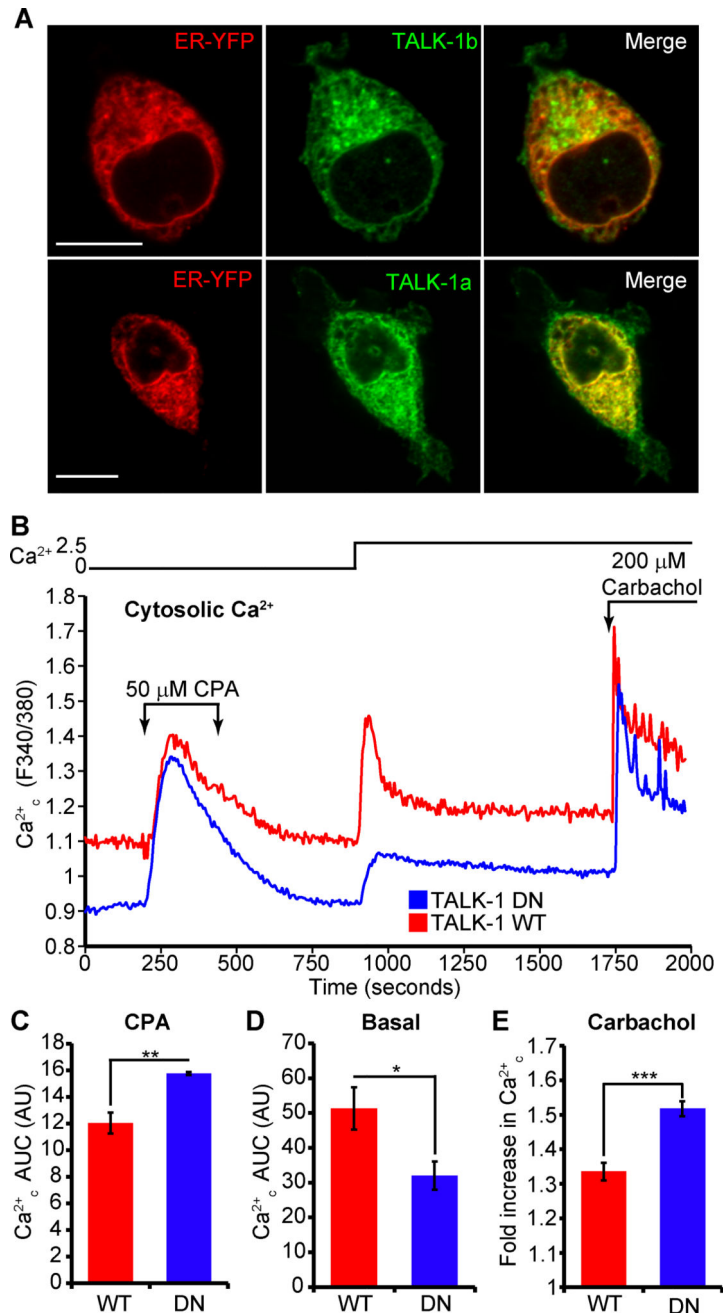
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**Figure 2. TALK-1 channels modulate human  $\beta$ -cell  $\text{Ca}^{2+}_{\text{ER}}$  homeostasis**

(A) Representative image of a human pancreas section stained for TALK-1 and calreticulin. Scale bar is 10  $\mu\text{m}$ . (B) Representative recordings of intracellular  $\text{Ca}^{2+}$  in human  $\beta$ -cells transfected with either TALK-1 dominant negative mutant (DN) or mCherry control. 11 mM glucose (G), 0 mM  $\text{Ca}^{2+}$ , 125  $\mu\text{M}$  diazoxide (Dz), and 1 mM EGTA were present throughout. (C) Quantification of the fold change in the  $\text{Ca}^{2+}_{\text{c}}$  AUC in response to treatment with CPA in human  $\beta$ -cells. The number of  $\beta$ -cells per donor are indicated on the graph. Statistical significance was determined by Student's *t*-test and one-way ANOVA followed by Bonferroni's multiple comparison test; \* $P < 0.05$ , \*\* $P < 0.01$ , \*\*\* $P < 0.005$ .



**Figure 3. The K<sup>+</sup> channel function of TALK-1 contributes to its regulation of Ca<sup>2+</sup><sub>ER</sub> homeostasis**

(A) TALK-1b and -1a co-localize with the ER marker ER-YFP. Images are representative of 3 independent experiments. Scale bar is 10 μm. (B) Representative recordings of HEK293 cells expressing either WT TALK-1 or TALK-1 DN and perfused with the indicated solutions; 10 mM glucose was present throughout the experiment. (C) Normalized Ca<sup>2+</sup> AUC for the period during treatment with CPA (t=250–600 s). (D) Ca<sup>2+</sup> AUC for the period following addition of 2.5 mM Ca<sup>2+</sup> to the extracellular buffer (t=1000–1750 s). (E) Fold increase in Ca<sup>2+</sup> in response to treatment with the muscarinic receptor agonist carbachol (*N*

= 3 independent experiments for B to D). Statistical significance was determined by Student's *t*-test; \* $P < 0.05$ , \*\* $P < 0.01$ , \*\*\* $P < 0.005$ .

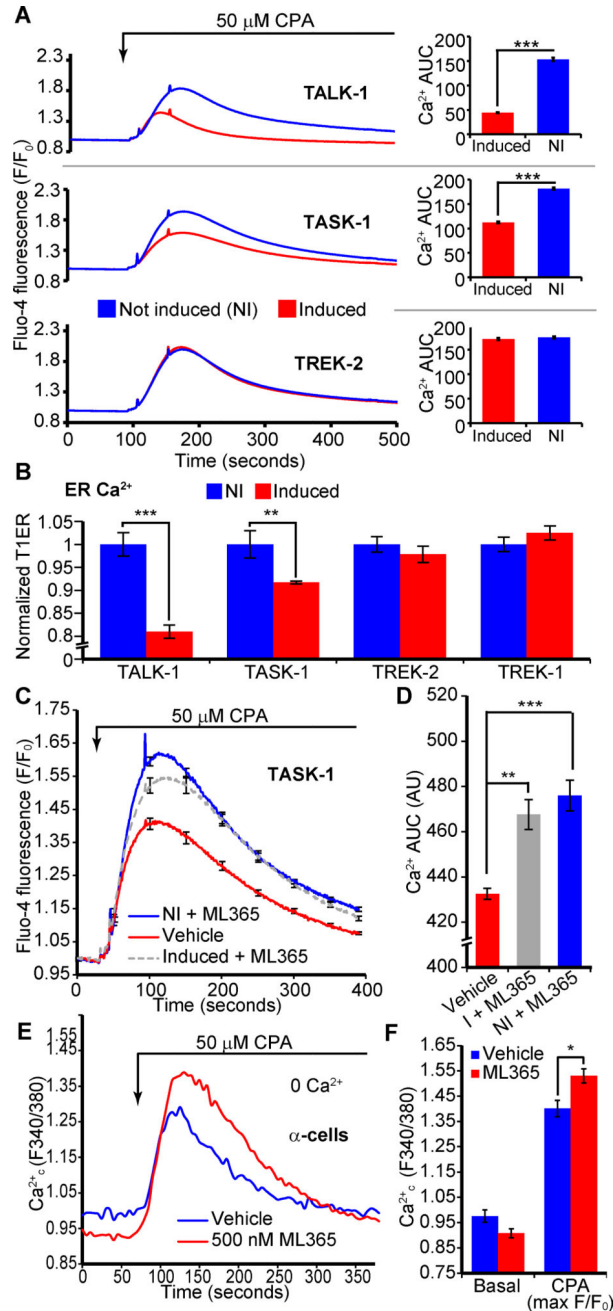
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**Figure 4. Pharmacological manipulation of K2P channel activity can alter steady-state Ca<sup>2+</sup><sub>ER</sub> concentrations**

(A) Representative recordings of CPA-induced Ca<sup>2+</sup><sub>ER</sub> release in cell lines with tetracycline-inducible expression of the indicated K2P channels. Ca<sup>2+</sup> AUC in response to CPA is shown to the right (representative of  $N=3$  independent experiments; NI: not induced). (B) Direct quantification of Ca<sup>2+</sup><sub>ER</sub> concentration in HEK293 cells with inducible expression of TALK-1, TASK-1, TREK-2, TREK-1 and the Ca<sup>2+</sup><sub>ER</sub> indicator T1ER ( $N=3$  independent experiments). (C and D) Treatment of TASK-1-expressing cells with ML365 restores Ca<sup>2+</sup><sub>ER</sub> to pre-channel expression concentrations (C); AUC quantification (D) ( $N=3$

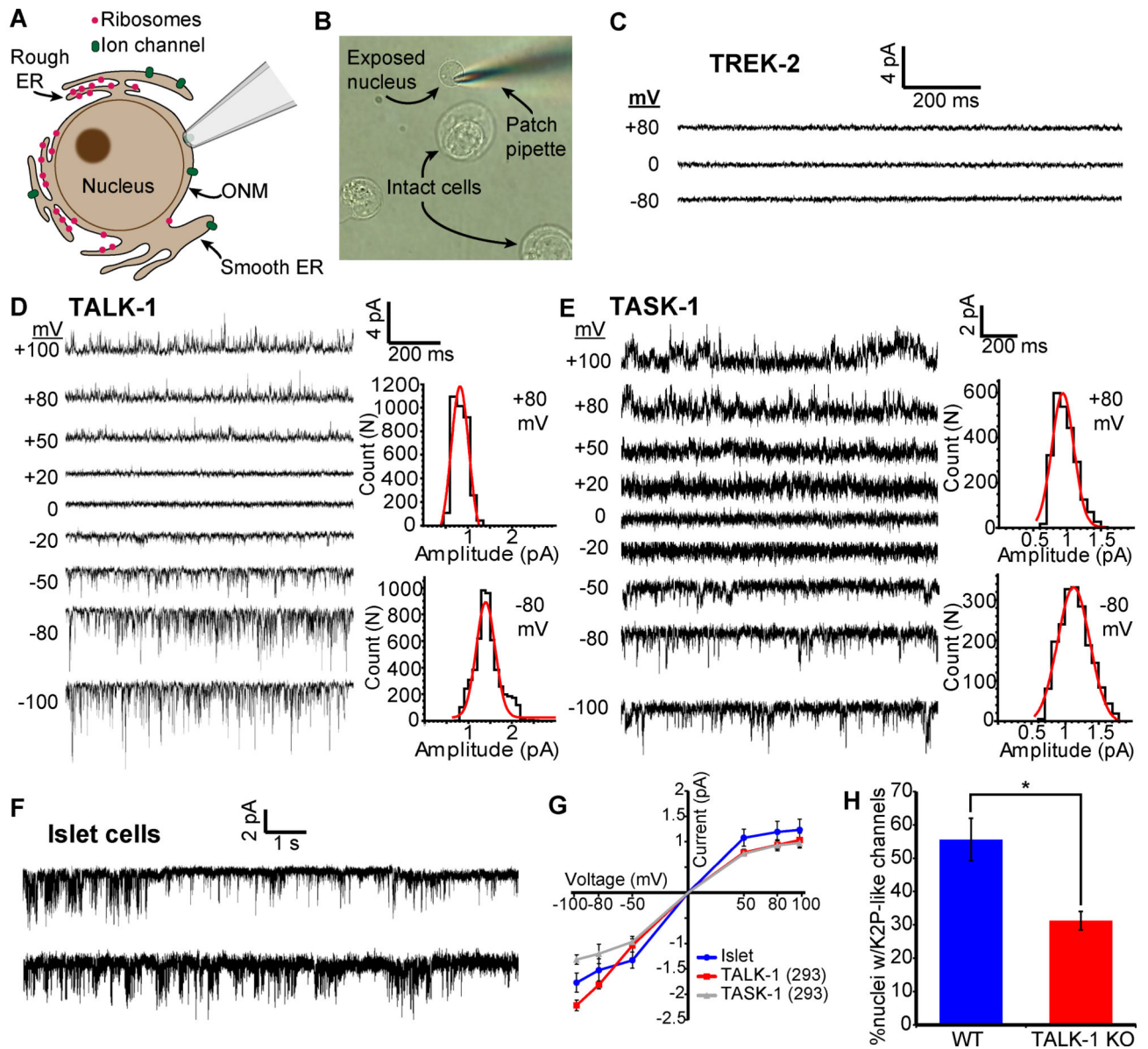
independent experiments). (E) Mouse  $\alpha$ -cells were treated with ML365 in the presence of 11 mM glucose and 125  $\mu$ M diazoxide (representative of  $N = 3$  independent experiments). The response to CPA is quantified in (F) ( $N = 3$  independent experiments). Statistical significance was determined by Student's  $t$ -test; \* $P < 0.05$ , \*\* $P < 0.01$ , \*\*\* $P < 0.005$ .

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**Figure 5. Functional TALK-1 and TASK-1 channels are present in the ER membrane**  
**(A)** Nuclear patch clamp of the outer nuclear membrane (ONM) permits detection of ER ion channels. **(B)** Representative image of isolated mouse islet nuclei with patch pipette positioned on nucleus. **(C)** Recordings obtained from the nucleus of a TREK-2-expressing HEK293 cell (representative of 5 nuclei). **(D)** Current trace obtained from the nucleus of a TALK-1 expressing HEK293 cell. Representative current amplitude histograms at right (representative of 8 nuclei). **(E)** As in **D**, but recorded from the nucleus of a TASK-1 expressing cell (representative of 7 nuclei). **(F)** Representative current traces obtained from WT mouse nuclei; patches held at  $-50$  mV (representative of 42 nuclei) **(G)** Single-channel current-voltage relationships from nucleus recordings obtained from TALK-1- ( $N=8$ ) and TASK-1- ( $N=7$ ) expressing HEK293 cells and WT islet-cells ( $N=42$ ). **(H)** Percent of nuclei with K2P-channel-like channel activity detected in WT and TALK-1 KO  $\beta$ -cells ( $N=$

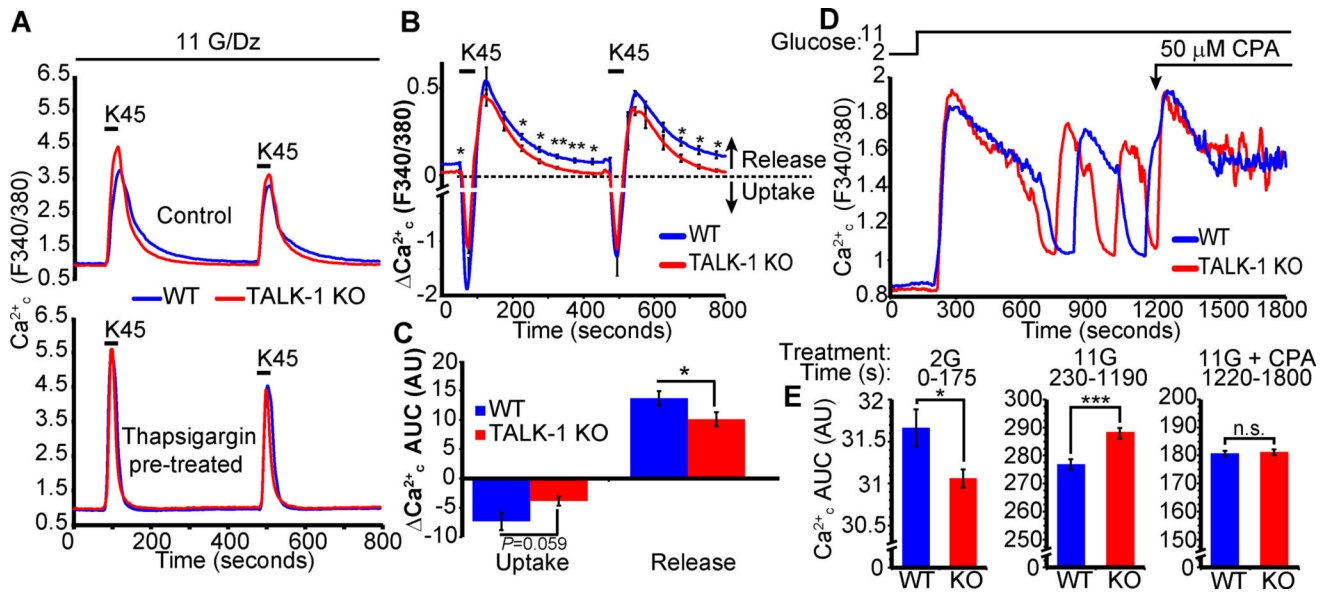
42 nuclei; 4 mice per genotype). Statistical significance was determined by Student's *t*-test; \**P*<0.05.

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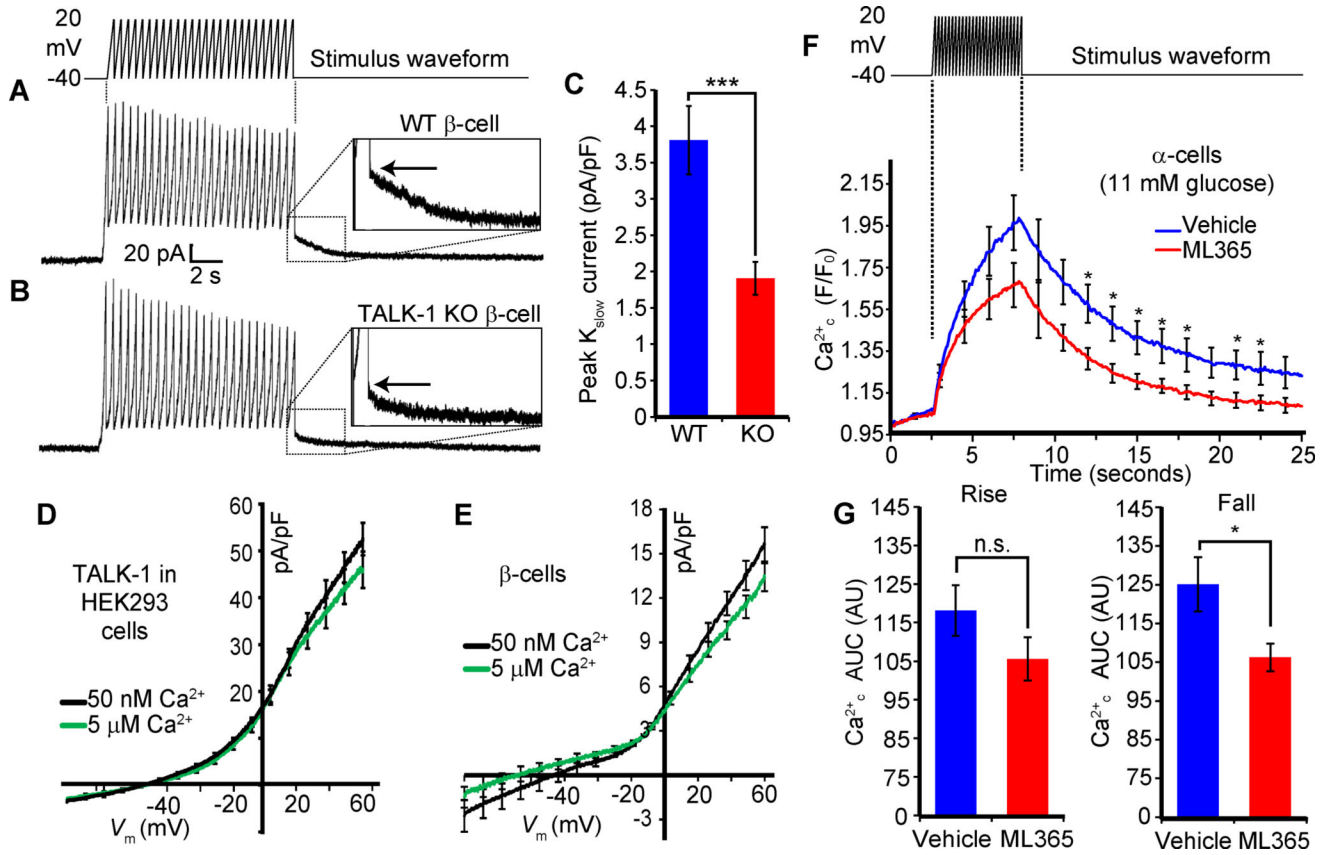
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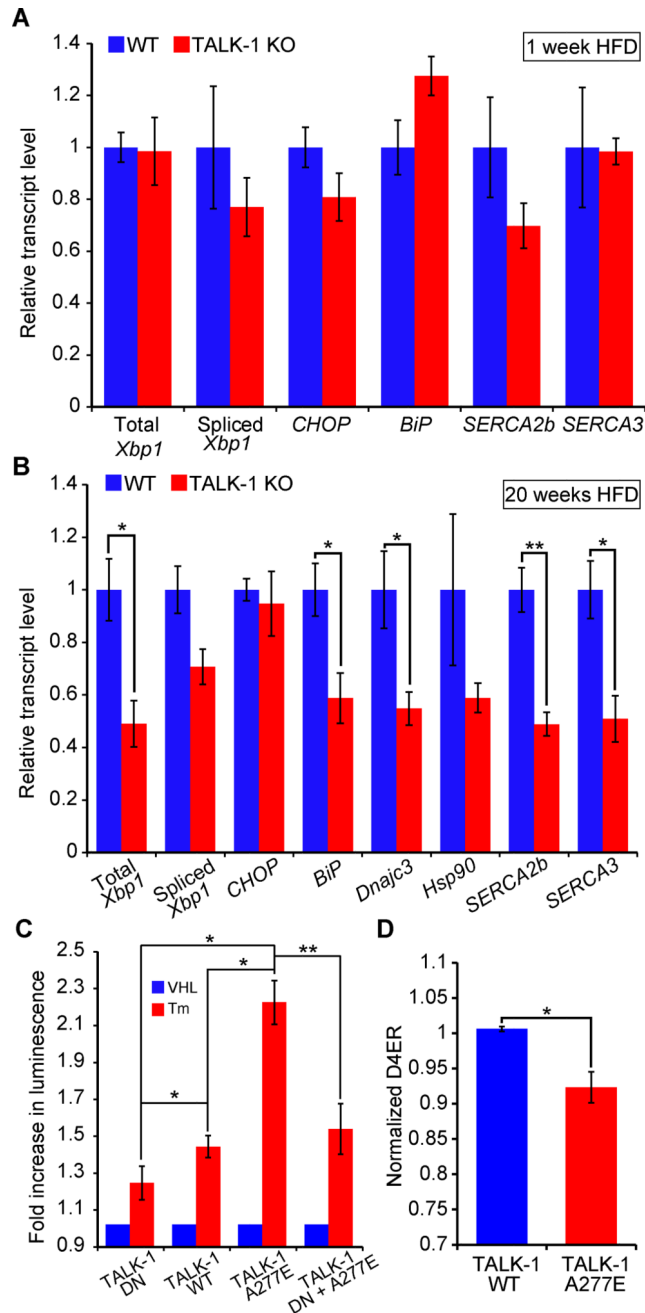


**Figure 6. TALK-1 regulates Ca<sup>2+</sup><sub>ER</sub> handling during plasma membrane Ca<sup>2+</sup> influx in β-cells**  
**(A)** Intracellular Ca<sup>2+</sup> oscillations in response to pulses of 45 mM K<sup>+</sup> (K45) for 40 seconds in the presence or absence of thapsigargin (1.25 μM). Recordings were performed in the presence of 11 mM glucose (G), 2.5 mM Ca<sup>2+</sup>, and 125 μM diazoxide (Dz). **(B)** Subtraction of the thapsigargin-treated trace from the control trace in A reveals the kinetics of Ca<sup>2+</sup><sub>ER</sub> uptake and release. **(C)** Quantification of average Ca<sup>2+</sup><sub>ER</sub> uptake and release in WT and TALK-1 KO β-cells (*N* = 3 mice per genotype). **(D)** Effect of CPA on glucose-stimulated Ca<sup>2+</sup> influx in WT and KO islets. **(E)** Area under the curve (AUC) analysis of glucose-stimulated Ca<sup>2+</sup> influx for periods corresponding to low glucose (2G), high glucose (11G), and CPA (11G + CPA) (*N* = 49 WT and 53 TALK-1 KO islets). Statistical significance was determined by Student's *t*-test; \**P* < 0.05, \*\**P* < 0.01, \*\*\**P* < 0.005.



**Figure 7. Reduced  $K_{\text{slow}}$  currents are associated with altered  $\text{Ca}^{2+}_{\text{ER}}$  dynamics**  
 (A and B) Representative  $K_{\text{slow}}$  currents recorded from WT (A) and TALK-1 KO (B)  $\beta$ -cells. The peak of the  $K_{\text{slow}}$  tail current is indicated by the arrow. (C) Quantification of  $K_{\text{slow}}$  currents recorded from WT and TALK-1 KO  $\beta$ -cells ( $N=26$  cells; 4 mice per genotype). (D and E) Average whole-cell currents recorded in HEK293 cells expressing TALK-1 with intracellular buffer containing low  $\text{Ca}^{2+}$  (50 nM, black line) or high  $\text{Ca}^{2+}$  (5  $\mu\text{M}$ , green line) in HEK293 (D,  $N=11$  cells per condition) and mouse  $\beta$ -cells (E,  $N=15$  (50 nM  $\text{Ca}^{2+}$ ) and 13 cells (5  $\mu\text{M}$ )). (F) Depolarization-induced  $\text{Ca}^{2+}$  influx in mouse  $\alpha$ -cells treated with vehicle or ML365. (G) AUC analysis of rising (rise) and decaying (fall) phase of  $\text{Ca}^{2+}$  influx in  $\alpha$ -cells suggests reduced  $\text{Ca}^{2+}$ -induced  $\text{Ca}^{2+}_{\text{ER}}$  release in ML365-treated  $\alpha$ -cells ( $N=11$  cells per condition). Statistical significance was determined by Student's  $t$ -test; \* $P<0.05$ , \*\*\* $P<0.005$ .





**Figure 8. TALK-1 channel activity exacerbates ER stress**

(A) Reverse-transcribed RNA from islets isolated from wild-type (WT) and TALK-1 KO mice fed a HFD for 1 week was subjected to quantitative real-time PCR (qRT-PCR) to measure total *Xbp1*, spliced *Xbp1*, *CHOP*, *BiP*, *Atp2a2* (*SERCA2b*), and *Atp2a3* (*SERCA3*) expression ( $N = 4-5$  mice per genotype). (B) Reverse-transcribed RNA from islets isolated from wild-type (WT) and TALK-1 KO mice fed a HFD for 20 weeks was subjected to qRT-PCR to measure total *Xbp1*, spliced *Xbp1*, *CHOP*, *BiP*, *Dnajc3*, *Hsp90*, *Atp2a2* (*SERCA2b*), and *Atp2a3* (*SERCA3*) expression ( $N = 3-4$  mice per genotype). (C) INS-1 cells co-transfected with TALK-1 DN mutant, wild-type TALK-1 (WT), or TALK-1 A277E and an

ATF6 promoter luciferase reporter (p5×ATF6-GL3) were treated with vehicle (VHL) (DMSO, 0.0125% v/v) or tunicamycin (Tm) (0.25 µg/mL) for 16–20 hours prior to cell lysis and luciferase assay ( $N=4$  independent experiments). **(D)** INS-1 cells were co-transfected with TALK-1 WT or TALK-1 A277E and pCMV-D4ER to measure basal  $\text{Ca}^{2+}_{\text{ER}}$  concentrations in 11 mM glucose ( $N=4$  independent experiments). Statistical significance was determined by Student's  $t$ -test; \* $P<0.05$ , \*\* $P<0.01$ .

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