

## EDITORIAL

**Piezo channel mechanisms in health and disease**David J. Beech<sup>1</sup>  and Bailong Xiao<sup>2</sup> <sup>1</sup>Leeds Institute of Cardiovascular and Metabolic Medicine, School of Medicine, University of Leeds, Leeds, UK<sup>2</sup>School of Pharmaceutical Sciences, Tsinghua-Peking Joint Center for Life Sciences, IDG/McGovern Brain Research Institute, Tsinghua University, Haidian District, Beijing, China

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**Introduction**

Piezo proteins are large membrane proteins which assemble to form mechanically activated Ca<sup>2+</sup>-permeable non-selective cationic channels (Coste *et al.* 2010, 2012; Murthy *et al.* 2017; Wu *et al.* 2017). They serve to regulate membrane potential and Ca<sup>2+</sup> signalling coupled to downstream effectors such as calpain in cells of mammals and other classes (Coste *et al.* 2010, 2012; Li *et al.* 2014; Murthy *et al.* 2017; Rode *et al.* 2017; Wu *et al.* 2017). They are a distinct type of ion channel subunit which assembles as trimers with a central ion-conducting pore covered by a single cap and three complex arms reaching out into and curving the membrane (Ge *et al.* 2015; Guo & MacKinnon, 2017; Saotome *et al.* 2018; Zhao *et al.* 2018) (Fig. 1). The last two C-terminal transmembrane segments (TMs) form the functional pore module (Zhao *et al.* 2016) while the rest of the protein comprises nine repetitive units of four TMs assembled into a highly curved peripheral blade-like structure which is critical for mechano-sensing and transduction (Zhao *et al.* 2018; Fig. 1). The channels are inherent sensors of membrane tension and increases in this tension seem to be the primary physiological activator (Lewis & Grandl, 2015; Cox *et al.* 2016; Syeda *et al.* 2016). Activation or sensitisation to membrane tension occurs in response to a synthetic small molecule called Yoda1, which is a useful pharmacological tool (Syeda *et al.* 2015).

The Piezo proteins are widely expressed and a range of functions is emerging. Piezo1, for example, regulates epithelial cell crowding and division (Gudipaty *et al.* 2017), is critical for endothelial shear stress-sensing and vascular development (Li *et al.* 2014), regulates blood pressure and exercise performance (Rode *et al.* 2017), and determines neural stem cell lineage (Pathak *et al.* 2014). Mutations in the human *PIEZO1* gene cause anaemia (dehydrated stomatocytosis), consistent with the importance of Piezo1 channels in erythrocyte function (Zarychanski *et al.* 2012), and generalised lymphatic dysplasia, consistent with functional importance in lymphatic endothelial cells (Fotiou *et al.* 2015). Piezo2 is important in touch sensation (Woo *et al.* 2014; Chesler *et al.* 2016) and airway stretch sensation mediated by sensory neurones (Nonomura *et al.* 2017). Mutations in the *PIEZO2* gene cause distal arthrogryposis and other diseases (Coste *et al.* 2013; Alper, 2017).

**Focus of the review series**

Here we present a review series associated with our 'Piezo channel mechanisms and disease' symposium at the International Union of Physiological Sciences (IUPS) congress in Rio de Janeiro on 3 August 2017. The series focuses on three key topics from the symposium: Piezo1 channel structure (Wang & Xiao, 2018), Piezo1 in vascular physiology (Beech, 2018) and Piezo1 in genetic disease (Martin-Almedina *et al.* 2018). The structure article reviews the breakthrough in determining the tri-blade propeller-like arrangement of Piezo1 channels and discusses the hypothesis that the channels comprise discrete mechano-transduction and ion-conducting modules which coordinate to fulfil the overall purpose of the channels (Wang & Xiao, 2018). The physiology article reviews current knowledge of the role of Piezo1 channels in the endothelium, discussing the hypothesis that the channels are key sensors of the frictional force of blood flow, leading them to be essential in vascular development and necessary for redistribution of blood flow in exercise and optimal physical performance (Beech, 2018). The disease article reviews *PIEZO1*

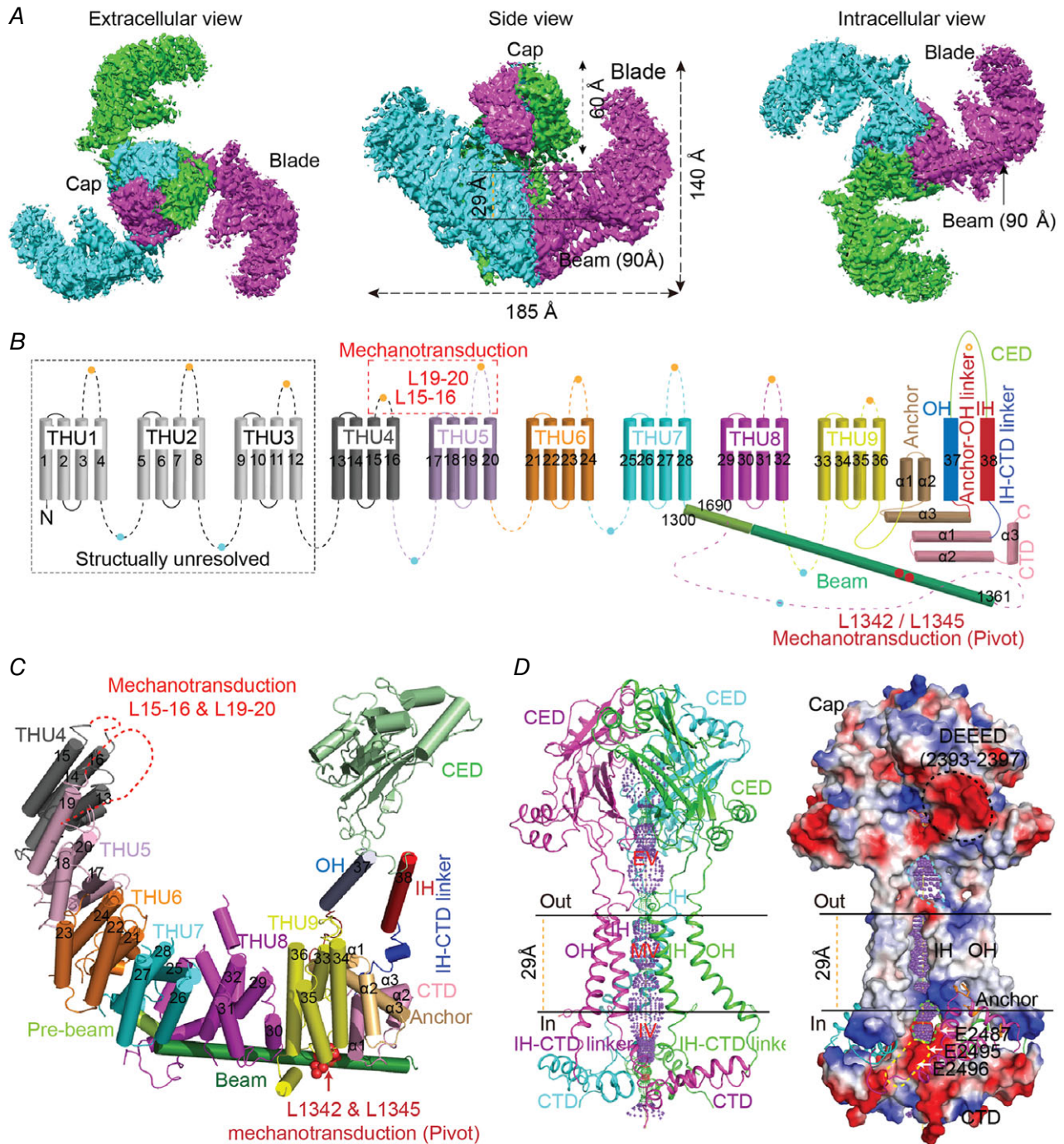
mutations which cause disease, discussing the relationship between stomatocytosis and lymphatic dysplasia and the challenges of understanding the disease consequences of loss-of-function and gain-of-function mutations (Martin-Almedina *et al.* 2018).

**Conclusion and perspective**

Piezo channels are relatively newly discovered – perhaps one of the last major ion channel families which had to be identified. What has been particularly striking has been the unanimous agreement from independent investigators across the world that these channels are indeed bona fide sensors of membrane tension in mammalian and other cell types and that their primary biological purpose is likely to be as sensors of mechanical force and transducers of this force into biological effect. Because of the importance of mechanical force sensation in biology, the implications are substantial. The symposium reviews provide important insight into this new field but should naturally be seen alongside the wider field and literature. As we are at the beginning of the Piezo era of biological discovery, we can expect and hope for many more original research articles on this topic as well as more symposia – small and large – and review articles as this field achieves its true potential and perhaps position alongside other great fields such as those focused on other membrane proteins such as the ionotropic glutamate receptors and tyrosine kinase receptors. We encourage you to read and enjoy the review articles and join the Piezo field.

**References**

- Alper SL (2017). Genetic diseases of *PIEZO1* and *PIEZO2* dysfunction. *Curr Top Membr* **79**, 97–134.
- Beech DJ (2018). Endothelial Piezo1 channels as sensors of exercise. *J Physiol* **596**, 979–984.
- Chesler AT, Szczot M, Bharucha-Goebel D, Ceko M, Donkervoort S, Laubacher C, Hayes LH, Alter K, Zampieri C, Stanley C, Innes AM, Mah JK, Grosmann CM, Bradley N, Nguyen D, Foley AR, Le Pichon CE & Bonnemann CG (2016). The role of *PIEZO2* in human mechanosensation. *N Engl J Med* **375**, 1355–1364.



**Figure 1. Structure and topology of the mechanosensitive Piezo1 channel**

A, the three-bladed, propeller-like cryo-EM structure of the Piezo1 ion channel. B, nine repetitive transmembrane helical units (THUs) and the 38-TM topology model. C, a cartoon model showing one subunit with featured structural domains labelled. D, the ion-conducting pore module shown as a ribbon diagram (left) and surface electrostatic potential (right). The functionally identified regions and residues critical for mechanical activation of Piezo1 are indicated in B and C. Figure reproduced with permission from Zhao *et al.* (2018).

- Coste B, Houge G, Murray MF, Stitzel N, Bandell M, Giovanni MA, Philippakis A, Hoischen A, Riemer G, Steen U, Steen VM, Mathur J, Cox J, Lebo M, Rehm H, Weiss ST, Wood JN, Maas RL, Sunyaev SR & Patapoutian A (2013). Gain-of-function mutations in the mechanically activated ion channel PIEZO2 cause a subtype of Distal Arthrogyrosis. *Proc Natl Acad Sci USA* **110**, 4667–4672.
- Coste B, Mathur J, Schmidt M, Earley TJ, Ranade S, Petrus MJ, Dubin AE & Patapoutian A (2010). Piezo1 and Piezo2 are essential components of distinct mechanically activated cation channels. *Science* **330**, 55–60.
- Coste B, Xiao B, Santos JS, Syeda R, Grandl J, Spencer KS, Kim SE, Schmidt M, Mathur J, Dubin AE, Montal M & Patapoutian A (2012). Piezo proteins are pore-forming subunits of mechanically activated channels. *Nature* **483**, 176–181.
- Cox CD, Bae C, Ziegler L, Hartley S, Nikolova-Krstevski V, Rohde PR, Ng CA, Sachs F, Gottlieb PA & Martinac B (2016). Removal of the mechanoprotective influence of the cytoskeleton reveals PIEZO1 is gated by bilayer tension. *Nat Commun* **7**, 10366.
- Fotiou E, Martin-Almedina S, Simpson MA, Lin S, Gordon K, Brice G, Atton G, Jeffery I, Rees DC, Mignot C, Vogt J, Homfray T, Snyder MP, Rockson SG, Jeffery S, Mortimer PS, Mansour S & Ostergaard P (2015). Novel mutations in PIEZO1 cause an autosomal recessive generalized lymphatic dysplasia with non-immune hydrops fetalis. *Nat Commun* **6**, 8085.
- Ge J, Li W, Zhao Q, Li N, Chen M, Zhi P, Li R, Gao N, Xiao B & Yang M (2015). Architecture of the mammalian mechanosensitive Piezo1 channel. *Nature* **527**, 64–69.
- Gudipaty SA, Lindblom J, Loftus PD, Redd MJ, Edes K, Davey CF, Krishnegowda V & Rosenblatt J (2017). Mechanical stretch triggers rapid epithelial cell division through Piezo1. *Nature* **543**, 118–121.
- Guo YR & MacKinnon R (2017). Structure-based membrane dome mechanism for Piezo mechanosensitivity. *Elife* **6**, e33660.
- Lewis AH & Grandl J (2015). Mechanical sensitivity of Piezo1 ion channels can be tuned by cellular membrane tension. *Elife* **4**, e12088.
- Li J, Hou B, Tumova S, Muraki K, Bruns A, Ludlow MJ, Sedo A, Hyman AJ, McKeown L, Young RS, Yuldasheva NY, Majeed Y, Wilson LA, Rode B, Bailey MA, Kim HR, Fu Z, Carter DA, Bilton J, Imrie H, Ajuh P, Dear TN, Cubbon RM, Kearney MT, Prasad RK, Evans PC, Ainscough JF & Beech DJ (2014). Piezo1 integration of vascular architecture with physiological force. *Nature* **515**, 279–282.
- Martin-Almedina S, Mansour S & Ostergaard P (2018). Human phenotypes caused by PIEZO1 mutations; one gene, two overlapping phenotypes? *J Physiol* **596**, 985–992.
- Murthy SE, Dubin AE & Patapoutian A (2017). Piezos thrive under pressure: mechanically activated ion channels in health and disease. *Nat Rev Mol Cell Biol* **18**, 771–783.
- Nonomura K, Woo SH, Chang RB, Gillich A, Qiu Z, Francisco AG, Ranade SS, Liberles SD & Patapoutian A (2017). Piezo2 senses airway stretch and mediates lung inflammation-induced apnoea. *Nature* **541**, 176–181.
- Pathak MM, Nourse JL, Tran T, Hwe J, Arulmoli J, Le DT, Bernardis E, Flanagan LA & Tombola F (2014). Stretch-activated ion channel Piezo1 directs lineage choice in human neural stem cells. *Proc Natl Acad Sci USA* **111**, 16148–16153.
- Rode B, Shi J, Endesh N, Drinkhill MJ, Webster PJ, Lotteau SJ, Bailey MA, Yuldasheva NY, Ludlow MJ, Cubbon RM, Li J, Futers TS, Morley L, Gaunt HJ, Marszalek K, Viswambharan H, Cuthbertson K, Baxter PD, Foster R, Sukumar P, Weightman A, Calaghan SC, Wheatcroft SB, Kearney MT & Beech DJ (2017). Piezo1 channels sense whole body physical activity to reset cardiovascular homeostasis and enhance performance. *Nat Commun* **8**, 350.
- Saotome K, Murthy SE, Kefauver JM, Whitwam T, Patapoutian A & Ward AB (2018). Structure of the mechanically activated ion channel Piezo1. *Nature* **554**, 481–486.
- Syeda R, Florendo MN, Cox CD, Kefauver JM, Santos JS, Martinac B & Patapoutian A (2016). Piezo1 channels are inherently mechanosensitive. *Cell Rep* **17**, 1739–1746.
- Syeda R, Xu J, Dubin AE, Coste B, Mathur J, Huynh T, Matzen J, Lao J, Tully DC, Engels IH, Petrassi HM, Schumacher AM, Montal M, Bandell M & Patapoutian A (2015). Chemical activation of the mechanotransduction channel Piezo1. *Elife* **4**, e07369.
- Wang Y & Xiao B (2018). The mechanosensitive Piezo1 channel: structural features and molecular bases underlying its ion permeation and mechanotransduction. *J Physiol* **596**, 969–978.
- Woo SH, Ranade S, Weyer AD, Dubin AE, Baba Y, Qiu Z, Petrus M, Miyamoto T, Reddy K, Lumpkin EA, Stucky CL & Patapoutian A (2014). Piezo2 is required for Merkel-cell mechanotransduction. *Nature* **509**, 622–626.
- Wu J, Lewis AH & Grandl J (2017). Touch, tension, and transduction – the function and regulation of Piezo ion channels. *Trends Biochem Sci* **42**, 57–71.
- Zarychanski R, Schulz VP, Houston BL, Maksimova Y, Houston DS, Smith B, Rinehart J & Gallagher PG (2012). Mutations in the mechanotransduction protein PIEZO1 are associated with hereditary xerocytosis. *Blood* **120**, 1908–1915.
- Zhao Q, Wu K, Geng J, Chi S, Wang Y, Zhi P, Zhang M & Xiao B (2016). Ion permeation and mechanotransduction mechanisms of mechanosensitive piezo channels. *Neuron* **89**, 1248–1263.
- Zhao Q, Zhou H, Chi S, Wang Y, Wang J, Geng J, Wu K, Liu W, Zhang T, Dong M-Q, Wang J, Li X & Xiao B (2018). Structure and mechanogating mechanism of the Piezo1 channel. *Nature* **554**, 487–492.

### Additional information

#### Competing interests

None of the authors has any conflicts of interests.

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