Fig. S1. Immunohistochemical detection of iGluR2 protein in single islet cells. *A*: α cells identified using glucagon-specific antibody express the iGluR2 subtype of AMPA receptor. 24 out of 26 identified α cells were positive to iGluR2 antibody (Santa Cruz, sc-7611). *B*: a glucagon-positive α cell was stained with another iGluR2-specific antibody directly labeled with Alexa-488 dye (Alomone, GluR2-ATTO_488). 15 out of 17 identified α cells expressed iGluR2 immunoreactivity. *C*: an insulinpositive β cell, 20 out of identified 23 β cells expressed iGluR2. *D*: a somatostatin-positive δ cell. For this staining we used FITC-labeled secondary antibody for somatostatin and TRITC-labeled secondary antibody for iGluR2. For consistency with other labelings, the color coding was switched. Only 3 out of 11 δ cells showed a weak iGluR2 signal. Scale bars indicate 5 µm. Antibodies used were as follows. *A*: mouse anti-glucagon (1:100 dilution)/goat anti-mouse TRITC (1:500) and rabbit anti-iGluR2 (1:100)/goat anti-rabbit FITC (1:200). *B*: mouse anti-glucagon (1:100)/goat anti-mouse TRITC (1:200). *D*: mouse anti-guinea pig FITC (1:500) and rabbit anti-iGluR2 (1:100)/goat anti-rabbit FITC (1:200).

Fig. S2. Activation of islet iGluR by different agonists. *A*: time courses of inward current activated by 100-ms pulses of 1 mmol/l L-glutamate, AMPA, and kainate at -60 mV. All records were obtained from the same lifted whole cell in Na⁺-rich external solution. *B-D*: concentration dependence of peak currents activated by L-glutamate (n = 8 - 10), AMPA (n = 5 - 8) and kainate (n = 9 - 12) at -60 mV. Peak current amplitudes were normalized to the value obtained with 1 mmol/l of each agonist and were fitted with the Hill equation (Eq. 1). The Hill coefficients for all agonists were nearly unity: 1.37 for L-glutamate, 1.10 for AMPA, 0.93 for AMPA peak currents (filled circles), and 0.98 for AMPA steady-state currents (empty circles).

Fig. S3. Single-channel recording of iGluRs. Top three traces were recorded from an excised outsideout patch upon 10 mM glutamate application at -60 mV. The ensemble average obtained from 95 traces from the same patch showed a desensitization time constant of 6.0 ms (broken line). Single traces were filtered at 500 Hz and the traces used for the ensemble average were filtered at 1 kHz. In some traces single-channel opening at the end of desensitization was observed as marked with an arrow.

Fig. S4. Current-voltage relations of iGluRs. *A-C*: time courses of currents evoked by 100 ms pulses of 1 mmol/l L-glutamate, AMPA, and kainate. Membrane potential was varied between –80 mV and 80 mV in 20 mV steps. All traces were obtained from the same cell. *D-F*: current-voltage relations of

the agonist-evoked peak currents. Data points were fitted with second-order polynomial curves. Reversal potentials for L-glutamate, AMPA and kainate were 3.6, 8.2, and 2.1 mV, respectively, in this single experiment. To describe the curvature of the *I-V* relations quantitatively, a rectification index (RI) was defined as the ratio of the whole-cell slope conductance at +40 mV and -40 mV. RI values of 1, >1, <1 indicate linear, outwardly rectifying, and inwardly rectifying *I-V* relations, respectively. The RI was 0.9 ± 0.04 (n = 5) for L-glutamate, 0.9 ± 0.1 (n = 7) for AMPA, and 1.8 ± 2.2 (n = 9) for kainate.

Fig. S5. Ca^{2+} permeability of iGluRs. *A*: time courses of L-glutamate-evoked currents with 135 mmol/l Na⁺-rich external solution and evoked by 100 ms pulses of 1 mmol/l L-glutamate. Membrane potentials were varied between -80 and 80 mV in 10 mV steps but only 20 mV intervals were displayed for clarity. *B*: current records from the same cell as *A* in 100 mmol/l Ca²⁺- rich external solution. *C*: *I-V* relations of peak currents (•, Na⁺-rich and \circ , Ca²⁺-rich solutions). Measured reversal potentials were -5.4 mV and -45.1 mV, respectively. *D*: rectification index (RI) plotted against Ca²⁺ permeability (*n* = 10). A scatter plot of the Ca²⁺ permeability against the RI calculated in Na⁺-rich solution showed that islet iGluRs have a mean RI near 1.0, indicating a linear *I-V* relation and relatively low Ca²⁺ permeability.

Fig. S6. A: Cytoplasmic accumulation of serotonin (5-hydroxytryptamine) was indirectly assessed using its fluorescent analog 5,7-dyhydroxytryptamine (5,7-DHT, shown as inset with an additional hydroxyl group marked). Islet cells were incubated with 1 mM 5,7-DHT and 1 mM ascorbic acid to reduce spontaneous oxidation of 5,7-DHT for different times. 5,7-DHT fluorescence was measured at 410 nm with excitation at 360 nm. Open circles are the average 5,7-DHT fluorescence measured from all islet cells measured and closed triangles from cells smaller than 7 μ m in diameter. After 6 hr-incubation, cells were treated with 1 μ M of bafilomycin A1 (Calbiochem) for 10 min and 5,7-DHT fluorescence was measured (red symbols). Increase of fluorescence upon bafilomycin A1 may suggest cytoplasmic release of 5,7-DHT from secretory granules where the dye is not fluorescent due to low

pH. Alternatively 5,7-DHT became fluorescent after collapse of proton gradient and increase of intragranular pH. Fluorescence and cell size were determined using a high magnification lens (100 X). *B:* Immunocytochemical detection of vesicular monoamine transporter (VMAT2, Millipore, AB1767) proteins in single islet cells. α cells identified using glucagon-specific antibody were positive to anti-VMAT2 antibody (15 out of 15 identified α cells). β cells expressed VMAT2 proteins (17 out of 17 identified β cells). Scale bars indicate 5 µm. Antibodies used were as follows. *B*: mouse anti-glucagon (1:100 dilution)/donkey anti-mouse IgG-FITC (1:100) and rabbit anti-rat VMAT2 (1:50)/goat anti-rabbit IgG-TRITC (1:1000). Guinea pig anti-insulin (1:500 dilution)/goat anti-guinea pig Alexa488 (1:1000) and rabbit anti-rat VMAT2 (1:50)/goat anti-rabbit TRITC (1:1000).

Fig. S7. Three types of $[Ca^{2+}]_i$ responses to kainate and glucose stimulation. Single islet cells are incubated with 3.3 mmol/l glucose initially and then challenged successively with 0.5 mmol/l kainate (KA) for 10 s to test for iGluRs, with 16.7 mmol/l glucose for 5 min, with kainate again, and finally with 135 mmol/l K⁺ external solution for 10 s to verify responsiveness to depolarization.

Α	Glucagon	iGluR2	Merge
В	Glucagon	iGluR2/Alexa*	Merge
	\circ		O
С	Insulin	iGluR/2	Merge
D	Somatostatin	iGluR2	Merge
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