## Supplementary Figure 1



## Supplementary Figure 1 Stimulus-secretion coupling in pancreatic beta-cells.

(A) When extracellular glucose, and thus beta-cell metabolism, are low  $K_{ATP}$  channels are open. Consequently, the cell membrane is hyperpolarised. This keeps voltage-gated Ca<sup>2+</sup> channels closed, so that Ca<sup>2+</sup> influx remains low and insulin secretion is inhibited. (**B**) When extracellular glucose increases, glucose metabolism generates ATP at the expense of MgADP, thereby closing  $K_{ATP}$  channels. This leads to membrane depolarization, opening of voltage-gated Ca<sup>2+</sup> channels, Ca<sup>2+</sup> influx and insulin secretion. (**C**) Loss-of function mutations in  $K_{ATP}$  channel genes lead to a lack of  $K_{ATP}$  channel activity, either because of a reduced channel density or an inability to of the channel respond to the stimulatory effects of MgADP. Consequently, the membrane is permanently depolarised, causing continuous Ca<sup>2+</sup> channel activity and Ca<sup>2+</sup> influx. This produces persistent and unregulated insulin secretion. (**D**) Gain-of function mutations in  $K_{ATP}$  channel activity and Ca<sup>2+</sup> influx. This produces persistent and unregulated insulin secretion. (**D**) Gain-of function mutations in  $K_{ATP}$  channel to be open even when metabolism and cellular ATP levels are high. Consequently, the membrane remains hyperpolarised, preventing opening voltage-gated Ca<sup>2+</sup> channels, Ca<sup>2+</sup> influx and insulin secretion, even when blood glucose levels are high. This leads to diabetes.



Supplementary Figure 2

(A) Representative wild-type, hetT293N and homT293M whole-cell currents evoked by a voltage step from -10mV to -30mV. The bars indicate the application of 3mM azide or 0.5mM tolbutamide (tolb). The dashed line indicates the zero current level. (B) Representative wild-type and hetT294M whole-cell currents evoked by a voltage step from -10mV to -30mV. The bars indicate the application of 3mM azide,  $340\mu$ M diazoxide or 0.5mM tolbutamide.

## Hetero Kir6.2-T294M/SUR1



## Supplementary Figure 3

Representative single  $K_{ATP}$  channel currents recorded at -60 mV from inside-out patches from oocytes injected with SUR1 and a 1:1 ratio of Kir6.2 and Kir6.2-T294M to simulate the heterozygous state. The dashed line indicates the zero current level. C, closed state.