1 Supplemental Figures

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| 3 | Fig. 1: Connexin 43 (Cx43) and Nav1.5 colocalize to the same discrete subcellular |
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| 4 | regions. |
| 5 | Representative confocal micrographs of immunofluorescent (top) and proximaty ligation assay |
| 6 | (PLA; bottom) signals from isolated CPVT ventricular myocytes immunolabeled for Cx43 and |
| 7 | $Na_v 1.5$. Across all images (n = 22) the median number of PLA punctae observed per myocyte |
| 8 | was 18.5 ± 8.9 with $90 \pm 3\%$ being observed along the cell's periphery. |
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| 10 | Fig. 2: β -AR stimulation increases TTX-sensitive nNa _v -mediated persistent I _{Na} in wild type |
| 11 | (WT). Representative traces of persistent I_{Na} elicited using the protocol shown in the inset. ISO |
| 12 | enhanced persistent I_{Na} in WT cardiomyocytes ($p < 0.001$ Kruskal-Wallis test, n = 13 and 11, |
| 13 | respectively, * <i>p</i> =0.006 Wilcoxon rank-sum test). This response to ISO was completely |
| 14 | abolished by 100nM TTX (n = 10, # <i>p</i> =0.003 Wilcoxon rank-sum test). |
| 15 | |
| 16 | Fig. 3: Effect of various Na ⁺ channel blockers on peak Na ⁺ current. Inward Na ⁺ currents |
| 17 | obtained by 200 ms depolarization steps to 0 mV in 5 mV increments at 3 sec intervals. The |
| 18 | depolarization step is preceded by a pre-step to -140 mV from holding potential -80 mV. (Right) |
| 19 | Corresponding peak I/V relationship for CPVT cardiomyocytes under control conditions and |
| 20 | during exposure to riluzole (10 μ M), TTX (100 nM), or flecainide (2.5 μ M), (n = 14, 8, 12, 14, |
| 21 | respectively; $p < 0.05$ Kruskal-Wallis test, $p < 0.05$ Wilcoxon rank-sum test). |
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| 23 | Fig. 4: Effect of TTX-sensitive nNa $_{v}$ -mediated persistent I _{Na} augmentation and increased |
| 24 | SERCA2a expression on SR Ca ²⁺ load. (a) Direct augmentation of nNa _v -mediated persistent |
| 25 | I_{Na} with $\beta\text{-PMTX}$ (40 $\mu\text{M})$ in CPVT myocytes exposed to ISO (100 nM) did not have a significant |

effect on caffeine-induced CaT amplitude (n = 42 for CPVT-ISO, n = 31 for CPVT-ISO+ β -PMTX,

p=ns Wilcoxon rank-sum test). CPVT ventricular cardiomyocytes were loaded with Ca²⁺ 27 28 indicator, Fluo-3 AM. Furthermore, none of the interventions tested had a significant effect on 29 caffeine-induced CaT amplitude (n = 11 for CPVT-ISO+ β -PMTX+TTX, n = 15 for CPVT-ISO+ β -PMTX+Ril and n = 15 for CPVT-ISO+β-PMTX+Flec, p=ns Kruskal-Wallis test). Likewise, CPVT-30 31 SERCA myocytes did not evidence higher caffeine-induced CaT amplitude during treatment 32 with β -PMTX relative to the untreated ones (n = 18 and 17, p=ns Wilcoxon rank-sum 33 test).Importantly, CPVT-SERCA myocytes evidenced similar caffeine-induced CaT relative to 34 CPVT myocytes treated with ISO. (b) Neither intervention, whether pharmacological (KN-93, 1 35 µM) or genetic (S2814), had a significant effect on caffeine-induced CaT amplitude relative to 36 ISO treated CPVT myocytes (n = 42 for CPVT- ISO, n = 17 for CPVT- ISO -KN93, n = 20 for 37 CPVT2814-ISO and n = 16 for CPVT2814-ISO+Ril, p=ns Kruskal-Wallis test). 38 39 Fig. 5: Neuronal Na⁺ channels and RyR2 colocalize to the same discrete subcellular 40 regions in WT ventricular myocytes. (a) Representative confocal micrographs of ventricular 41 myocytes isolated from WT mice showing fluorescent proximity ligation assay (PLA) signal for 42 RyR2 with different nNa_v isoforms (Na_v1.x). Below each image, are shown the results of digital segmentation with the cell mask in grey and PLA signal in red. (b) Plot of average number of 43 PLA punctae per μm^2 (*, p=0.002, p=0.009 and p=1 Wilcoxon rank-sum test between WT and 44 45 CPVT for Na_V1.1, 1.3 and 1.6, respectively; for WT n = 3165, 53, 2756 punctae from 10, 6 and 8 46 cells for Nav1.1, 1.3 and 1.6, respectively).

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Fig. 6: Effect of Na_v1.6 blockade with 4,9-anhydro-TTX on SR Ca²⁺ load. Na_v1.6 blockade with 4,9-anhydro-TTX (4,9ah-TTX; 300 nM) in CPVT myocytes exposed to ISO (100 nM) did not have a significant effect on caffeine-induced CaT amplitude (n = 19 for CPVT-ISO, n = 28 for CPVT-ISO+4,9ah-TTX, p=ns Wilcoxon rank-sum test).

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Fig. 7: Na_v1.6 silencing. Values are reported as percentage of control (n = 3-4 hearts per group) in (a) and (b). Decreased Na_v1.6 (a) mRNA and (b) protein after siRNA treatment, respectively.

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57 Fig. 8: Neuronal Na⁺ channels and NCX colocalize to the same discrete subcellular

58 **regions in CPVT ventricular myocytes. (a)** Representative confocal micrographs of

59 ventricular myocytes isolated from CPVT mice showing fluorescent proximity ligation assay

60 (PLA) signal for NCX with different nNa_v isoforms (Na_v1.x). Below each image, are shown the

results of digital segmentation with the cell mask in grey and PLA signal in red. (b) Plot of

62 average number of PLA punctae per μm^2 (*p* = 0.0195 Kruskal-Wallis test; *, *p*=0.005 Wilcoxon

for Na_v1.1vs. 1.3 and p=0.244 Wilcoxon rank-sum test for Na_v1.1vs. 1.6. n = 778,

1969, 1526 punctae from 8, 9 and 10 cells for Na_v1.1, 1.3 and 1.6, respectively).

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