## Genetics in cardiac arrhythmias

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## ECG and action potential (AP)



#### Ionic & molecular basis for AP



## Experiment of inherited arrhythmia (I)



#### Experiment of inherited arrhythmia (II)



#### Cardiomyocytes isolation



## Patch clamp (electrophysiologic study)











## Inherited arrhythmias

- Long QT syndrome (LQTS)
- Short QT syndrome (SQTS)
- Brugada syndrome
- Catecholaminergic polymorphic ventricular tachycardia (CPVT)

## Long QT syndrome (LQTS)



## Short QT syndrome (SQTS)



### Brugada syndrome



## Catecholaminergic polymorphic ventricular tachycardia (CPVT)



#### Genes involved in inherited arrhythmias

Phenotype	Gene <sup>₄</sup>	Protein	Effect of mutation	OMIM identifier <sup>®</sup>
LQTS	<i>KCNQ1</i> (11p15.5)	K <sup>+</sup> voltage-gated channel, KQT-like subfamily, member 1 (K <sub>v</sub> 7.1)	Loss of function, reduced Iks	607542
	<i>KCNH2</i> (7q35)	K+ voltage-gated channel, subfamily H (eag-related), member 2 (K <sub>v</sub> 11.1; HERG)	Loss of function, reduced $I_{\rm Kr}$	152427
	<i>SCN5A</i> (3p21)	Na+ channel, voltage-gated, type V, α subunit (Na <sub>V</sub> 1.5)	Impaired inactivation, increased persistent I <sub>Na</sub>	600163
	<i>ANK2</i> (4q25)	Ankyrin 2, neuronal	Aberrant localization of ion transporters	106410
	<i>KCNE1</i> (21q22.1)	K+ voltage-gated channel auxiliary subunit	Reduced I <sub>Ks</sub>	176261
	KCNE2 (21q22.1)	K+ voltage-gated channel auxiliary subunit	Reduced / <sub>Kr</sub>	603796
	<i>CAV3</i> (3p25)	Caveolin 3	Increased persistent <i>I</i> <sub>Na</sub>	601253
	<i>SCN4B</i> (11q23)	Na+ channel, voltage-gated, type IV, β subunit	Increased persistent <i>I</i> <sub>Na</sub>	608256
	<i>SNTA1</i> (20q11.2)	Syntrophin, α1	Increased persistent <i>I</i> <sub>Na</sub>	601017
	<i>AKAP9</i> (7q21)	A kinase (PRKA) anchor protein ( <i>yotiao</i> ) 9	Reduced I <sub>Ks</sub>	604001
	<i>KCNJ5</i> (11q24)	K+ inwardly rectifying channel, subfamily J, member 5 (Kir3.4)	Reduced I <sub>K,ACh</sub>	600734
Jervell and Lange-Nielson syndrome	<i>KCNQ1</i> (11p15.5)	K <sup>+</sup> voltage-gated channel, KQT-like subfamily, member 1 (K <sub>v</sub> 7.1)	Loss of function, reduced $I_{\rm Ks}$	607542
2	<i>KCNE1</i> (21q22.1)	K+ voltage-gated channel auxiliary subunit	Reduced I <sub>Ks</sub>	176261
Andersen syndrome	<i>KCNJ2</i> (17q23.1)	K+ inwardly rectifying channel, subfamily J, member 2 (Kir2.1)	Loss of function, reduced $I_{\rm K1}$	600681
Timothy syndrome	<i>CACNA1C</i> (12p13.3)	Ca <sup>2+</sup> channel, voltage-dependent, L type, α1C subunit (Ca <sub>V</sub> 1.2)	Gain of function, increased <i>l</i>	<sub>ca</sub> 114205

#### Genes involved in inherited arrhythmias

Phenotype	Gene <sup>A</sup>	Protein	Effect of mutation O	MIM identifier <sup>®</sup>
SQTS	<i>KCNQ1</i> (11p15.5)	K+ voltage-gated channel, KQT-like subfamily, member 1 (K <sub>V</sub> 7.1)	Gain of function, increased $I_{\rm Ks}$	607542
	<i>KCNH2</i> (7q35)	K+ voltage-gated channel, subfamily H (eag-related).member 2 (Kv11.1; HERG)	Gain of function, increased $I_{\rm Kr}$	152427
	<i>KCNJ2</i> (17q23.1)	K+ inwardly rectifying channel, subfamily J, member 2 (Kir2.1)	Gain of function, increased $I_{\rm K1}$	600681
	CACNA1C (12p13.3)	voltage-gated Ca <sup>2+</sup> channel, Ca <sub>v</sub> 1.2	Loss of function, reduced /ca	114205
	CACNB2 (10p12)	Ca <sup>2+</sup> channel, voltage-dependent, 62 subunit	Loss of function, reduced log	600003
	CACNA2D1 (7q21)	Ca <sup>2+</sup> channel, voltage-dependent, $\alpha 2/\delta$ subunit 1	Loss of function, reduced $I_{Ca}$	114204
BrS	<i>SCN5A</i> (3p21)	Na⁺ channel, voltage-gated, type V, α subunit (Nav1.5)	Loss of function, reduced $I_{\rm Na}$	600163
	GPD1L (3q22.3)	glycerol-3-phosphate dehydrogenase 1-like	Reduced /Na	611778
	SCN1B (19g13.1)	Na <sup>+</sup> channel, voltage-gated, type I, β subunit	Reduced /Na	600235
	SCN3B (11q23.3)	Na+ channel, voltage-gated, type III, β subunit	Reduced / <sub>Na</sub>	608214
	<i>MOG1</i> (17p13.1)	RAN guanine nucleotide release factor	Reduced /Na	607954
	<i>KCND3</i> (1p13.3)	K+ voltage-gated channel, Shal-related subfamily, member 3 (Kv4.3)	Gain of function, increased <i>I</i> <sub>to</sub>	605411
	<i>KCNE3</i> (11q13)	K+ voltage-gated channel auxiliary subunit	Increased I <sub>to</sub>	604433
	<i>KCNE5</i> (Xg22.3)	K+ voltage-gated channel auxiliary subunit	Increased Ito	300328
	CACNA1C (12p13.3)	Ca <sup>2+</sup> channel, voltage-dependent, L type, α1C subunit (Ca <sub>v</sub> 1.2)	Loss of function, reduced <i>I</i> <sub>Ca</sub>	114205
	CACNB2 (10p12)	Ca <sup>2+</sup> channel, voltage-dependent, β2 subunit	Loss of function, reduced Ica	60003
	<i>KCNJ8</i> (12p12.1)	K <sup>+</sup> inwardly rectifying channel, subfamily J, member 8 (Kir6.1)	Gain of function, increased $I_{K,AT}$	<sub>P</sub> 600935
CPVT	<i>RYR2</i> (1q42.1)	Ryanodine receptor 2 cardiac	Gain of function, increased SR Ca <sup>2+</sup> release	180902
	CASQ2 (1p13.3)	Calsequestrin 2 cardiac muscle	Loss of function, reduced <i>I</i> ca	114251
	TRDN (6q22)	Triadin	Impaired regulation of SR Ca <sup>2+</sup> release	603283

# Experiment of inherited arrhythmias with induced pluripotent stem cells (iPSs)





Sarcomeric actin

## Modeling LQTS with iPSs



## Modeling CPVT with iPSs





## Summary of studies with iPSs

Summary of studies of iPS-derived cardiomyocytes from patients with inherited arrhythmias

Phenotype	N	AP frequency (Hz)	MDP (mV)	APA (mV)	Maximal upstroke velocity (dV/dt)	APD50 (ms)	APD90 (ms)	Age (d)	Syndrome	Reference
Control cells										
Working	31	1.43 ± 0.11	-58 ± 1.6	97 ± 2.7	44 ± 6.7	145 ± 16	211 ± 17	20-25		27
Ventricular	32	1.70 ± 0.10	–76 ± 1.2	104 ± 1.1	28 ± 4.8		414 ± 22	30–32		46
Ventricular	37	0.73 ± 0.04	-63 ± 1.7	88 ± 2.6		241 ± 15	320 ± 17	10/20/30		25
Ventricular	39	0.73 ± 0.05	-63 ± 1.5	88 ± 2.4		239 ± 10	312 ± 11.20	10/20/30		25
Ventricular	40	1.00 <sup>A</sup>	–66 ± 1.2	108 ± 1.2		318 ± 19	373 ± 22	30–90	LQT1	31
Ventricular	NA					221 ± 85 <sup>в</sup>	297 ± 118 <sup>B</sup>	25-30	LQT2	35
Ventricular	60	0.46 ± 0.10	–57 ± 1.0	109 ± 3	9.5 ± 1.8	308 ± 24 <sup>8</sup>	436 ± 23 <sup>8</sup>		LQT2	33
Ventricular	13	1.2 ± 0.10	-63 ± 1.3	113 ± 2.4		265 ± 15	311 ± 20		LQT2	34
Ventricular	16						400 ± 45 <sup>B</sup>	37	LQT8	36
Ventricular	15							25	AD-CPVT	40
Ventricular	9	1.00	-75 ± 3.0			252 ± 29 <sup>в</sup>		30-120	AD-CPVT	41
Working	10	$0.64 \pm 0.06$	-58 ± 3.0 <sup>B</sup>	99 ± 3 <sup>B</sup>	6.20 ± 0.1 <sup>B</sup>	201 <sup>B</sup> ± 27 <sup>B</sup>		21	AR-CPVT	43
Patient-deriv	ed cel	ls								
Ventricular	36	1.00 <sup>A</sup>	-67 ± 1.20	110 ± 1.3		481 ± 33	554 ± 35	30-90	LQT1	31
Ventricular	NA					454 ± 90 <sup>в</sup>	635 ± 119 <sup>в</sup>	25-30	LQT2	35
Ventricular	58	0.26 ± 0.30	-55 ± 2	116 ± 4	10 ± 1.3	440 ± 9 <sup>B</sup>	864 ± 8 <sup>B</sup>		LQT2	33
Ventricular	13	0.90 ± 0.10	-62 ± 0.90	117 ± 1.4		455 ± 26	516 ± 26	180	LQT2	34
Working	16						1,130 ± 150 <sup>B</sup>	37	LQT8	36
Ventricular	16	1.00 <sup>A</sup>	79 ± 2.70 <sup>в</sup>			234 ± 21 <sup>B</sup>	293 ± 23 <sup>B</sup>	60-120	AD-CPVT	41
Working	20		-56 ± 1 <sup>B</sup>	98 ± 1.0 <sup>B</sup>	7.60 ± 1.2 <sup>B</sup>	368 ± 41 <sup>B</sup>		21	AD-CPVT	43
Ventricular	24							25	AR-CPVT	40

<sup>A</sup>Experiments with electrically stimulated cells (nonspontaneous beating). <sup>B</sup>Data derived from graphs. AD, autosomal dominant; AR, autosomal recessive; AP, action potential; MDP, maximum diastolic potential; APA, action potential amplitude.

#### **R644C Mutation of Lamin A Causes Cardiac Fibroblasts Senescence**

## Background

- Lamin A/C
  - Nuclear membrane protein
  - It affects cell proliferation
  - Mutation  $\rightarrow$  cardiomyopathy, arrhythmia, progeria



### Lamin A, R644C mutation



## Methods

We generated recombinant adenoviruses and

expressed Flag-tagged wild type Lmna (LmnaWT)

and mutant Lmna R644C in fibroblasts isolated from

mouse hearts.

#### Lamin A Mutation (R644C) decreases Cell Proliferation In Mouse Cardiac Fibroblasts





#### **Cell Proliferation (Ki67 expression) is reduced** in Lamin A Mutation (R644C) In Mouse Cardiac **Fibroblasts**



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Lmna<sup>R644C</sup>

#### Lamin A Mutation (R644C) causes Cellular Senescence In Mouse Cardiac Fibroblasts (SA-beta galactosidase assay)



#### Lamin A Mutation (R644C) causes Nucleus Blebbing In Mouse Cardiac Fibroblasts





#### Lamin A Mutation (R644C) causes prelamin expression In Mouse Cardiac Fibroblasts





#### Lamin A Mutation (R644C) reduces Rb phosphorylation In Mouse Cardiac Fibroblasts



#### Lamin A Mutation (R644C) causes

#### dissociation of binding proteins in Mouse Cardiac Fibroblasts





#### **Hypothesis**



#### L-type Ca<sup>2+</sup> channel activation by ROSinduced activation of CaMKII.

#### Introduction

#### Cardiovascular System



#### Cardiac Myocyte







2) CDF: CaMKII mediated reaction
# **Study Plan**

- Effect of ROS on L-type Ca<sup>2+</sup> channel
- CaMKII: Involvement & mechanism
- Role of Ca<sup>2+</sup>
- Comparison with CDF
- Long term potentiation: LTP

## **Materials & Methods**

# **Chemicals and Solutions**

- Normal Tyrode solution (mM): 140 NaCl, 5.4 KCl, 0.5 MgCl<sub>2</sub>, 1.8 CaCl<sub>2</sub>, 10 glucose, and 5 HEPES, titrated to pH 7.4 with NaOH.
- Ca<sup>2+</sup>-free solution (mM): 140 NaCl, 5.4 KCl, 0.5 MgCl<sub>2</sub>, 10 glucose, and 5 HEPES, titrated to pH 7.4 with NaOH.
- The high K<sup>+</sup>, low Cl<sup>-</sup> solution (mM): 70 KOH, 40 KCl, 50 L-glutamic acid, 20 taurine, 20 KH2PO4, 3 MgCl2, 10 glucose, 10 HEPES, and 0.5 EGTA.
- The pipette solution (mM): 100 CsOH, 110 gluconic acid, 10 NaCl, 20 HEPES, 20 tetraethylammonium-Cl, 4 Mg-ATP, 5 Na-phosphocreatine, and 10 EGTA titrated to pH 7.3 with CsOH.
- Drugs were prepared as concentrated stock solutions either in distilled water or dimethyl sulfoxide.
- All experiments were conducted at room temperature (22-25 ℃).

- Male Sprgue-Dawley rat
- The removed heart was perfused with digestion solution containing collagenase through Langendorff system.
- The ventricles were cut into small pieces and individual myocytes were obtained by gentle trituration.
- The isolated cells were stored in the high K<sup>+</sup>, low Cl<sup>-</sup> solution at 4°C until used in experiments.

# Voltage Clamp Recording & Analysis

- Patch pipettes were pulled from borosilicate glass capillaries (Clark Electromedical Instruments, UK) using a pipette puller (model PP-83, Narishige Scientific Instrument Lab. Janpan) and were fire polished.
- Pipettes exhibited 3 to 4 M $\Omega$  resistance when filled with a pipette solution
- Voltage clamp was performed by using the conventional whole cell method.
- All recordings were initiated at least 10 min after rupture of membrane to allow complete dialysis of the cytoplasm.
- All the I<sub>ca,L</sub> recording were made at room temperature (22-25 °C) using Axopatch amplifier (Axon Instruments, CA).
- Signals from the patch amplifier were filtered at 1 kHz and digitized with an A/D converter (PCI-6040E, National Instrument, USA) at a sampling rate of 1 kHz and stored on a hard disc installed in a personal computer using a software made in our laboratory (R-clamp, by SY Ryu) written with Delphi 6.0 (Borland Software Co.).

## Western Blot

- The removed rat heart was perfused with specific solutions dependent on 4 each condition (+/- Ca<sup>2+</sup>, +/- H<sub>2</sub>O<sub>2</sub>) through Langendorff system for 10 min.
- The ventricles were cut into small pieces and weighed about 300g and homogenized into the same solutions as perfused on previous step.
- the total proteins was quantified by Brad-Ford assay
- 100 g of protein from the each samples was separated on 10%
  SDS-polyacrylamide gel and electrophoretically transferred onto the polyvinylidene difluoride membrane

## **Results**

# Action potential (AP) changes By H<sub>2</sub>O<sub>2</sub>



## Spontaneous SR Ca<sup>2+</sup> spark



# H<sub>2</sub>O<sub>2</sub> increases phosphorylation of CaMKII



## H<sub>2</sub>O<sub>2</sub> induced APD prolongation is mediated by CaMKII



# CaMKII



#### Mechanism of CaMKII



#### Activation of CaMKII



# Facilitation of $I_{Ca,L}$ by $H_2O_2$



## Oxidation-dependent Facilitation of I<sub>Ca,L</sub> (ODF)



#### **ODF** mediated by CaMKII



Occlusion of ODF with CDF (Ca<sup>2+</sup> dependent facilitation)



#### Ca<sup>2+</sup> Source of ODF & CDF



## Ca<sup>2+</sup> Source of ODF & CDF



## Phosphorylation in ODF & CDF (Autophosphorylation, Catalytic activity)



### Phosphorylation in ODF & CDF



ODF; Autophosphorylation-independent non-catalytic reaction

CDF; Autophosphorylation-dependent non-catalytic reaction

# The effects of kinase inhibitors related to ROS on ODF



#### Long term potentiation (LTP)



### The effct of DTT on LTP



## Oxidation-dependent Autophosphorylation of CaMKII



Langendorff perfusion with Solutions (+/- Ca<sup>2+</sup>, +/- H<sub>2</sub>O<sub>2</sub>) →Cut & grind vent. tissue →Western blot

Ca <sup>2+</sup>	+	+		
$H_2O_2$	—	+	—	+

P-CaMK

Actin



# The New Mechanism of CaMKII Activation



#### CaMKII Oxidation alone in LTP



#### SR Ca<sup>2+</sup> Dependency















#### Summary



#### The Effect of Duration of H<sub>2</sub>O<sub>2</sub> Perfusion on LTP


### Discussion

## Activation of CaMKII



# Interaction of CaMKII & L-type Ca<sup>2+</sup> Channel

#### Non-catalytic reaction



# The New Mechanism of CaMKII Activation

