

# Distinct Properties of CRAC and MIC Channels in RBL Cells

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**ABSTRACT** In rat basophilic leukemia (RBL) cells and Jurkat T cells, Ca<sup>2+</sup> release-activated Ca<sup>2+</sup> (CRAC) channels open in response to passive Ca<sup>2+</sup> store depletion. Inwardly rectifying CRAC channels admit monovalent cations when external divalent ions are removed. Removal of internal Mg<sup>2+</sup> exposes an outwardly rectifying current (Mg<sup>2+</sup>-inhibited cation [MIC]) that also admits monovalent cations when external divalent ions are removed. Here we demonstrate that CRAC and MIC currents are separable by ion selectivity and rectification properties: by kinetics of activation and susceptibility to run-down and by pharmacological sensitivity to external Mg<sup>2+</sup>, spermine, and SKF-96365. Importantly, selective run-down of MIC current allowed CRAC and MIC current to be characterized under identical ionic conditions with low internal Mg<sup>2+</sup>. Removal of internal Mg<sup>2+</sup> induced MIC current despite widely varying Ca<sup>2+</sup> and EGTA levels, suggesting that Ca<sup>2+</sup>-store depletion is not involved in activation of MIC channels. Increasing internal Mg<sup>2+</sup> from submicromolar to millimolar levels decreased MIC currents without affecting rectification but did not alter CRAC current rectification or amplitudes. External Mg<sup>2+</sup> and Cs<sup>+</sup> carried current through MIC but not CRAC channels. SKF-96365 blocked CRAC current reversibly but inhibited MIC current irreversibly. At micromolar concentrations, both spermine and extracellular Mg<sup>2+</sup> blocked monovalent MIC current reversibly but not monovalent CRAC current. The biophysical characteristics of MIC current match well with cloned and expressed TRPM7 channels. Previous results are reevaluated in terms of separate CRAC and MIC channels.

**KEY WORDS:** store-operated channel • CRAC channel • Ca<sup>2+</sup> channel • TRPM7 • cation channel

## INTRODUCTION

In T lymphocytes and rat basophilic leukemia (RBL)\* cells, Ca<sup>2+</sup>-release-activated Ca<sup>2+</sup> (CRAC) channels play a major role in Ca<sup>2+</sup> signaling and cellular activation events that lead to secretion and cell proliferation. CRAC channels, like other store-operated Ca<sup>2+</sup> channels, open by an unknown mechanism when Ca<sup>2+</sup> is depleted from intracellular stores (Hoth and Penner, 1992; Zweifach and Lewis, 1993). Active depletion of Ca<sup>2+</sup> stores can take place by receptor stimulation to generate IP<sub>3</sub>-induced Ca<sup>2+</sup> release, by addition of thapsigargin or other SERCA pump inhibitors to inhibit Ca<sup>2+</sup> sequestration, or by whole-cell recording with addition of IP<sub>3</sub> to the pipette solution. In a passive depletion paradigm, CRAC channels are activated during whole-cell recording within 1–3 min simply by dialyzing the cytoplasm with a high concentration of Ca<sup>2+</sup> chelator, either EGTA or BAPTA. Ca<sup>2+</sup> ions that passively leak from intracellular stores are rapidly bound, thereby depleting the Ca<sup>2+</sup> stores and resulting in CRAC channel activation (Lewis and Cahalan, 1989; Zweifach and Lewis, 1993).

CRAC channels, like voltage-activated Ca<sup>2+</sup> channels (Hess and Tsien, 1984; Almers and McCleskey, 1984) and several other cation channels, are selective for Ca<sup>2+</sup> ions in physiological solutions and conduct monovalent cations when external divalent ions are removed (Hoth and Penner, 1993; Premack et al., 1994). Within the series of alkali metal cations, Li<sup>+</sup>, Na<sup>+</sup>, K<sup>+</sup>, and Rb<sup>+</sup> are equally permeant but Cs<sup>+</sup> is only sparingly permeant through CRAC channels (Lepple-Wienhues and Cahalan, 1996). Monovalent current through CRAC channels retains the property of inward rectification seen with divalent ions. Upon removal of external divalent ions the monovalent current inactivates (also termed depotentiation; Zweifach and Lewis, 1996) within tens of seconds. All studies described above were performed with 1–3 mM internal free [Mg<sup>2+</sup>].

Omission of external and internal divalent ions led to a much larger monovalent current in Jurkat T cells, with properties that were similar but not identical to monovalent current through CRAC channels recorded with internal Mg<sup>2+</sup> present (Kerschbaum and Cahalan, 1998). In contrast to CRAC channels, the monovalent current did not inactivate, had a nearly linear I-V characteristic, and conducted Cs<sup>+</sup> just as well as Na<sup>+</sup>. During whole-cell recording from Jurkat and normal human T cells, 40-pS single channels with high open probability were seen during activation, inactivation, and run-down (Kerschbaum and Cahalan, 1999; Fomina et al., 2000). Under identical conditions, a similar current develops in RBL

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\*Abbreviations used in this paper: CRAC, Ca<sup>2+</sup>-release-activated Ca<sup>2+</sup>; IRK, inwardly rectifying K<sup>+</sup>; MIC, Mg<sup>2+</sup>-inhibited cation; RBL, rat basophilic leukemia.

cells and exhibits similar single-channel characteristics (Braun et al., 2001). These single channels were proposed to represent CRAC channels with properties modulated by  $Mg^{2+}$  removal (modulated CRAC hypothesis). However, the alternative possibility remained that a different type of cation channel was revealed by the simultaneous removal of  $Mg^{2+}$  from the cytoplasm and divalent ions from the bath (two-channel hypothesis). The difficulty of distinguishing between these two hypotheses was compounded by a lack of molecular information on CRAC channels and a corresponding lack of information on the mechanism of store-dependent activation and monovalent-current inactivation. However, the cloning and expression of TRPM7 (Nadler et al., 2001; Runnels et al., 2001), with properties that include outward rectification and inhibition by internal  $Mg^{2+}$ , force a reexamination of the modulated CRAC hypothesis. TRPM7, a novel TRP gene formerly named ChaK, TRP-PLIK, or LTRPC7 contains both channel and kinase sequence motifs and displays outwardly rectifying cation currents when expressed in mammalian cells, with properties similar to native currents recorded with low internal  $Mg^{2+}$  (or  $Mg^{2+}$ -ATP) in RBL and Jurkat T cells. The outwardly rectifying native currents that develop when  $Mg^{2+}$  and  $Mg^{2+}$ -ATP are omitted have been called magnesium-nucleotide-regulated metal cation current (MagNuM) (Hermosura et al., 2002) and  $Mg^{2+}$ -inhibited cation current (MIC) (Prakriya and Lewis, 2002); here we adopt the latter terminology.

Recent studies suggest that separate and independent CRAC and MIC channels provide the most parsimonious explanation of differences between currents in the presence and absence of internal  $Mg^{2+}$  (Hermosura et al., 2002; Prakriya and Lewis, 2002). Our results complement and extend these studies by providing additional ways to distinguish and separate the current components based on differences in ion permeation, pharmacological sensitivities, and susceptibility to run-down. We exploit selective run-down of MIC to compare and contrast properties of CRAC and MIC channels under identical ionic conditions with low internal  $Mg^{2+}$ . We discuss and reinterpret previous studies on Jurkat and human T cells (Kerschbaum and Cahalan, 1998, 1999; Fomina et al., 2000) in terms of separate MIC and CRAC currents, each capable of mediating  $Ca^{2+}$  influx. Some of the data presented in this article have appeared previously in abstract form (Kozak and Cahalan, 2001, 2002).

## MATERIALS AND METHODS

### Cell Culture

RBL-2H3 cells (Siraganian et al., 1982) were cultured in Eagle's MEM supplemented with 10% fetal bovine serum in 5%  $CO_2$ -humidified atmosphere at 37°C. Cells were passaged twice weekly

and plated on glass coverslips for recording (McCloskey and Cahalan, 1990).

### Patch-Clamp Recording

Whole-cell recordings were done on RBL cells 1–3 d after plating, using an EPC-9 patch clamp amplifier (HEKA Elektronik). Patch pipettes were fabricated from soda lime glass capillaries (Becton Dickinson and Kimble) on a DMZ-Universal Puller (Zeitz) and coated with sylgard (Dow Corning Corp.) near the tips. The resistances of fire-polished pipettes were 1.5–4 M $\Omega$  when filled with  $K^+$  or  $Cs^+$  glutamate-containing solutions. Fast and slow capacitance transients were compensated using the EPC-9 circuitry. Voltage ramps (–120 to 70 mV or –120 to 85 mV, 211-ms duration) were delivered at 0.5 Hz to obtain current-voltage relations. The holding potential between the ramps was 0 mV. Data were analyzed using Pulse/Pulsefit, v. 8.11 (HEKA Elektronik), Igor Pro (v. 3.1.2) (WaveMetrics), and Microcal Origin (v. 6) (Microcal Software) software. To determine the reversal potential of the current induced by dialysis, we subtracted I-V traces after complete run-down from I-V traces collected at the peak of current development (usually around 10 min after break-in) to correct for a small leakage current that did not vary significantly in good experiments. Experiments were conducted at room temperature.

The "high EGTA" internal solution contained (mM): 130  $Cs^+$  glutamate, 8 NaCl, 0.9  $CaCl_2$ , 12 EGTA, 10 HEPES, pH 7.3 titrated with CsOH. When necessary, 0.15–5 mM  $MgCl_2$  was added to this solution yielding free  $Mg^{2+}$  concentrations of  $\sim 83 \mu M$  to 3 mM as estimated by Maxchelator (v. 1.78) software (written by Chris Patton, Stanford University). The "low EGTA" internal solution contained (mM) 150  $K^+$  or  $Cs^+$  glutamate, 1 EGTA, 0.5  $CaCl_2$ , 10 HEPES, pH 7.3 titrated with  $K^+$  or CsOH. Free  $Ca^{2+}$  concentration in high and low EGTA internal solution was  $\sim 9$  nM and  $\sim 92$  nM, respectively, as estimated by Maxchelator. In some experiments, internal 12 mM EDTA with higher affinity for  $Mg^{2+}$  than EGTA was used in order to remove cytosolic  $Mg^{2+}$  more completely. Divalent-free external solution, referred to as "Na<sup>+</sup>-HEDTA," contained (mM): 154 Na<sup>+</sup> aspartate, 5 NaCl, 10 HEDTA, 10 HEPES, pH 7.3 titrated with NaOH.  $Li^+$ ,  $Cs^+$ , or  $NH_4^+$  were substituted for Na<sup>+</sup> in one series of experiments. Divalent-containing external solutions contained (mM): 2–5  $CaCl_2$  or  $MgCl_2$ , 10 HEPES, 167 Na<sup>+</sup> aspartate, pH 7.3 titrated with NaOH. Aspartate and glutamate were used as the main anions in internal and external solutions to minimize  $Cl^-$  currents. In most experiments, 2  $Cs^+$  methanesulfonate was added to block native inward rectifier  $K^+$  currents (Wischmeyer et al., 1995). Experiments testing the effect of increased internal  $Ca^{2+}$  on MIC activation parameters and comparing MIC and inward rectifier  $K^+$  current development time course were performed in external solution containing (mM): 4.5 KCl, 2  $Ca^{2+}$ , 1  $Mg^{2+}$ .

Spermine (hydrochloride) stock (5 mM) was prepared in divalent-free external solution and stored at 4°C. SKF-96365 (hydrochloride) (1-[b-[3-(4-methoxyphenyl)propoxy]-4-methoxyphenethyl]-1H-imidazole, HCl) and thapsigargin stock solutions were prepared in DMSO and kept frozen. After diluting in external solutions the final DMSO concentration was below 0.1%. Spermine, SKF-96365, and thapsigargin were from Calbiochem. All other chemicals were purchased from Sigma-Aldrich.

## RESULTS

Removal of internal  $Mg^{2+}$  changes the rectification and ion permeability characteristics of cation currents in RBL and Jurkat cells (Kerschbaum and Cahalan, 1998;

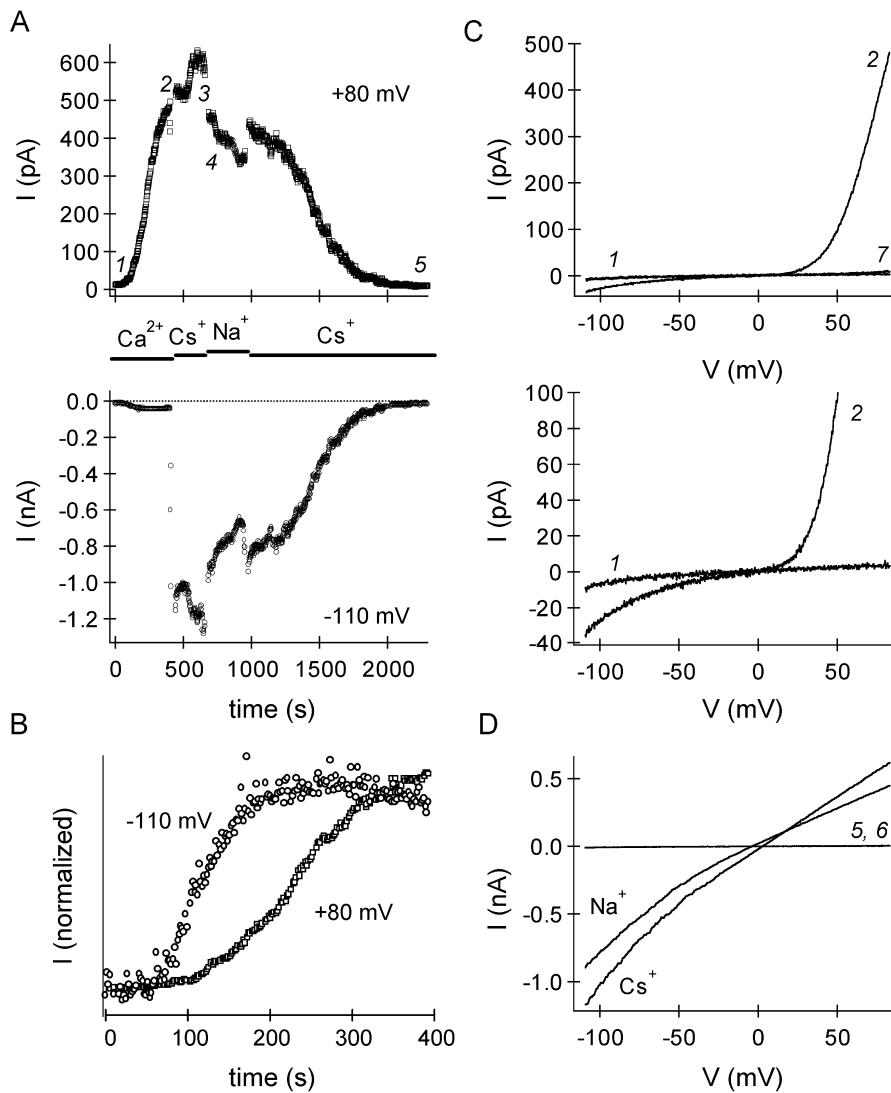


FIGURE 1. Development and run-down of CRAC and MIC currents in the presence and absence of external divalent ions. Internal solution contained 12 mM EGTA and no added  $Mg^{2+}$ . (A) Outward (top) and inward (bottom) current development in 2 mM external  $Ca^{2+}$ , followed at  $\sim 400$  s by exposure to  $Cs^{+}$ – then  $Na^{+}$ –HEDTA. MIC ran down gradually over 2,000 s. (B) Current development time course for inward and outward currents compared. The scaled and inverted inward current measured at  $-110$  mV is shown superimposed with the outward current (80 mV). The inward current clearly precedes the development of the outward current, despite its smaller size. (C) I-V plots of MIC current in 2 mM  $Ca^{2+}$  plotted with two different current amplitude scales. Traces 1 and 2 correspond to times indicated in A. Trace 7 was collected 51 min after break-in after reintroduction of 2 mM  $Ca^{2+}$ . (D) I-V plots of monovalent MIC current in  $Na^{+}$ – and  $Cs^{+}$ –HEDTA. Both  $Cs^{+}$  and  $Na^{+}$  are permeant through the channel. The indistinguishable traces 5 and 6 (taken 54 min after break-in) were obtained in  $Cs^{+}$  and  $Na^{+}$  solution, respectively, after complete run-down of MIC current.

Nadler et al., 2001; Hermosura et al., 2002; Prakriya and Lewis, 2002). Operationally, the additional current that develops as cytoplasmic  $[Mg^{2+}]$  is lowered can be defined as the MIC component of current. Fig. 1 outlines the general characteristics of currents activated by dialysis with a pipette solution containing high EGTA to deplete  $Ca^{2+}$  stores passively while lowering internal  $Mg^{2+}$ . Two components of current are present in this experiment but overlap kinetically. Within minutes after break-in, large outward currents carried by  $Cs^{+}$  and much smaller inward currents developed in external solution containing 2 mM  $Ca^{2+}$  (Fig. 1 A). The removal of external divalent ions (using a divalent-free solution with 10 mM HEDTA) increased the amplitude of inward currents with only minor change in the outward  $Cs^{+}$  current at 80 mV. Both  $Na^{+}$  and  $Cs^{+}$  carried inward current in divalent-free external solution. On expanded time and current amplitude scales, the inward current can be seen to activate somewhat more rapidly

than the outward current at the beginning of the experiment, suggesting the presence of more than one type of channel or, alternatively, the evolution of I-V characteristics of a single type of channel (Fig. 1 B). Current-voltage relations before, during, and after current development illustrate strong outward rectification of the induced current in the presence of external  $Ca^{2+}$  (Fig. 1 C). When  $Ca^{2+}$  was withdrawn, the I-V curves in  $Na^{+}$  and  $Cs^{+}$  revealed slight inward rectification (Fig. 1 D). After reaching a peak, the inward and outward currents declined to zero after  $\sim 2,000$  s. Our goal is to test whether reducing internal  $Mg^{2+}$  modulates CRAC channel properties or reveals a second population of outwardly rectifying MIC channels.

#### Properties of MIC Current

**Divalent and monovalent ion permeation.** One of the hallmarks of the CRAC current is its positive reversal potential in physiological levels of external  $Ca^{2+}$ . Reversal po-

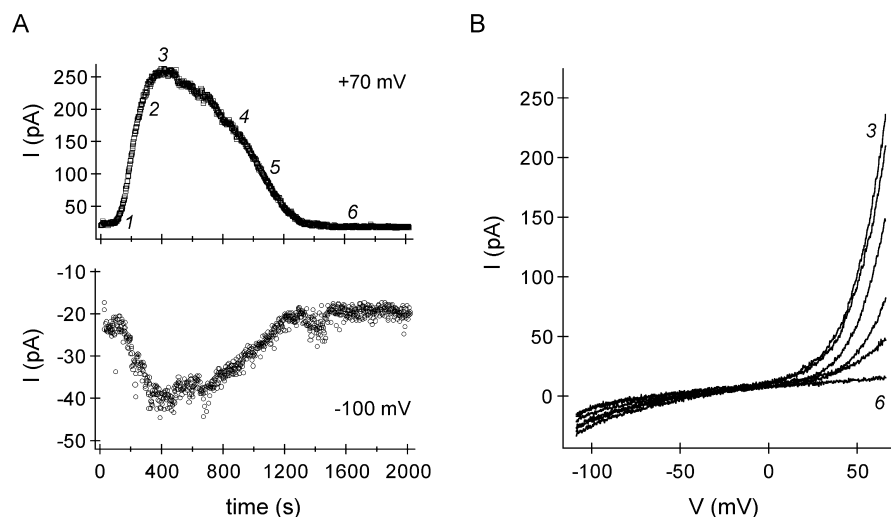


FIGURE 2. MIC current is permeable to external  $Mg^{2+}$ . Internal solution contained 12 mM EGTA and no added  $Mg^{2+}$ . External solution contained 2 mM  $Mg^{2+}$  and  $Na^+$  aspartate. (A) MIC-current development and run-down in 2 mM external  $Mg^{2+}$  with zero  $Ca^{2+}$ . (B) I-V relations of MIC current in 2 mM  $Mg^{2+}$  obtained at various times after break-in (same cell as in A).

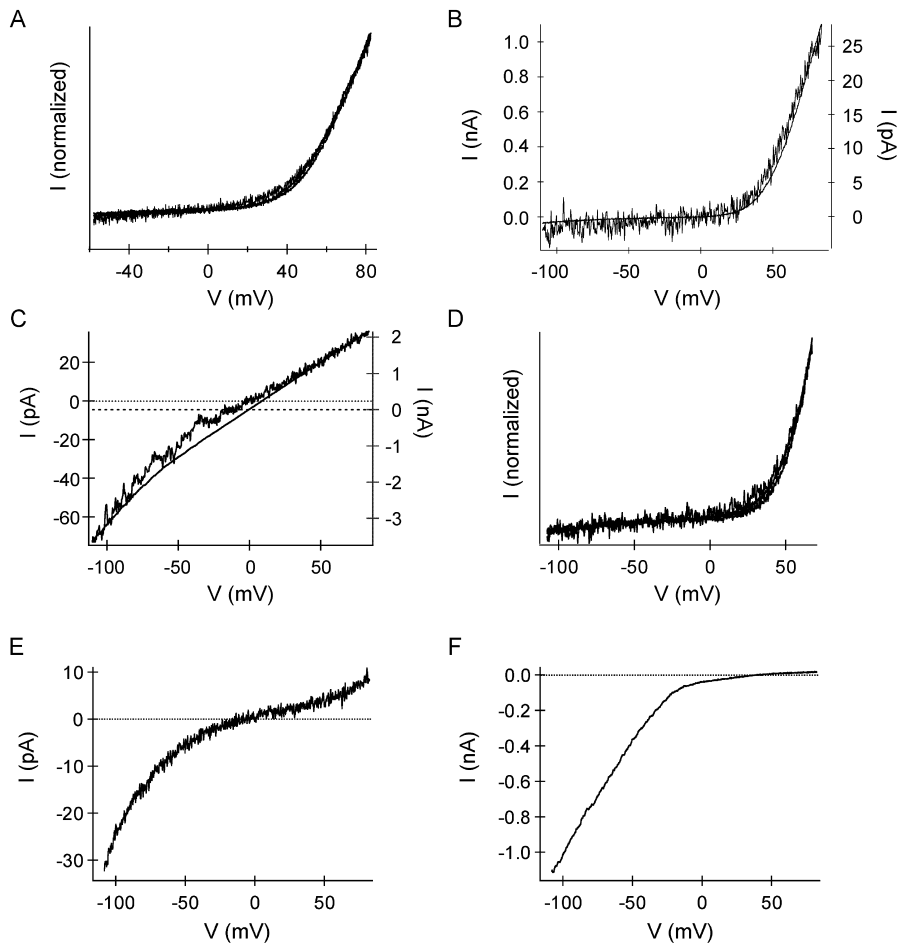
tentials of the induced current were close to 0 mV (Fig. 1 C, shown with two current scales in C) when the external medium contained 2 mM  $Ca^{2+}$ . Significantly, the reversal potential was also close to 0 mV when the external solution contained only  $Mg^{2+}$ ,  $Ca^{2+}$ ,  $Na^+$ , or  $Cs^+$  as the major external permeant ion, with  $Cs^+$  inside. Differences in reversal potential and permeant ions distinguish a larger component of MIC current from the smaller CRAC current. The current in external  $Cs^+$  usually reversed at slightly more positive potentials than in  $Na^+$  (Fig. 1 D), indicating that  $Cs^+$  is slightly more permeant through this channel than  $Na^+$ . By reversal potential measurement, the following cations had the relative permeability sequence:  $NH_4^+$  (1.3) >  $Cs^+$  (1.1) >  $Li^+$  (1.0)  $\sim$   $Na^+$  (1.0 by definition). Among larger monovalent cation substitutes, NMDG<sup>+</sup> was not measurably permeant and tetramethylammonium was sparingly permeant (unpublished data). These results are consistent with previous data (Kerschbaum and Cahalan, 1998), but with the revision that these properties are characteristic of the MIC component of current, not CRAC.

TRPM7 channels expressed in HEK cells are reportedly permeable to  $Mg^{2+}$  in the absence of  $Ca^{2+}$ , based on the presence of inward current in isotonic  $Mg^{2+}$  solution (Nadler et al., 2001). Since MIC currents in native Jurkat and RBL cells resemble TRPM7 in the expression system, we examined whether  $Mg^{2+}$  current can be detected using physiological levels of  $Mg^{2+}$  in RBL cells dialyzed with 12 mM EGTA and no added  $Mg^{2+}$ . With 2 mM external  $Mg^{2+}$  present and  $Ca^{2+}$  absent, an inward current developed and ran down in parallel with the outward current during dialysis with zero internal  $Mg^{2+}$  (Fig. 2), consistent with  $Mg^{2+}$  current through the MIC channel. Fig. 2 B illustrates I-V curves recorded at different time points of current development. At negative potentials, the inward current did not consistently increase when  $Mg^{2+}$  concentration

was varied from 2 to 5 mM. However, by process of elimination,  $Mg^{2+}$  is the main current-carrying ion, because inward current was still observed in the absence of external  $Na^+$  (substituted by the impermeant cation NMDG<sup>+</sup>), leaving  $Mg^{2+}$  as the only remaining cation. Substituting internal HEPES by TRIS also did not affect the inward current with external  $Mg^{2+}$  ( $n = 3$  cells). At positive potentials, the current was outward, conducting  $Cs^+$  from the inside. I-V shapes were similar with 2 mM external  $Mg^{2+}$  or  $Ca^{2+}$ , although currents were markedly and uniformly reduced at all potentials with external  $Mg^{2+}$  as the only divalent ion. We conclude that the MIC current discriminates poorly among monovalent cations (in the absence of divalent ions) as well as between  $Ca^{2+}$  and  $Mg^{2+}$ . The ability of  $Mg^{2+}$  and  $Cs^+$  to carry inward current is characteristic of the MIC, but not the CRAC component of current.

#### MIC I-V Shape Is $Mg^{2+}$ - and Time-invariant

Internal  $Mg^{2+}$  greater than  $\sim 3$  mM inhibited MIC current completely, in agreement with Nadler et al. (2001). If  $Mg^{2+}$  inhibition were mediated by a direct interaction with the conducting pore, intermediate levels of  $Mg^{2+}$  might alter I-V shape as a result of voltage-dependent block, as is seen in several types of ion channels interacting with  $Mg^{2+}$ , including inwardly rectifying  $K^+$  channels, nicotinic acetylcholine receptor channels, L-type  $Ca^{2+}$  channels, and voltage-gated  $Na^+$  channels (Matsuda et al., 1987; Vandenberg, 1987; Pusch, 1990; Ifune and Steinbach, 1992; Kuo and Hess, 1993; Nichols et al., 1994; Forster and Bertrand, 1995). However, at different internal free  $Mg^{2+}$  levels from subnanomolar (zero added  $Mg^{2+}$  with 12 mM EDTA) to 1.15 mM, the shape of the MIC I-V curve remained constant although current magnitudes varied widely, both in the presence or absence of external divalent ions (Fig. 3). When the pipette solution contained zero



rent recorded with internal NMDG<sup>+</sup> as the predominant cation. I-V curves in 2 mM Ca<sup>2+</sup> and Na<sup>+</sup>-HEDTA, respectively. The low-EGTA internal solution contained NMDG<sup>+</sup> as an impermeant cation substitute. External solutions were 2 mM Ca<sup>2+</sup> (E) and Na<sup>+</sup>-HEDTA (F).

added Mg<sup>2+</sup>, the I-V relation showed strong outward rectification in the presence of either Ca<sup>2+</sup> or Mg<sup>2+</sup> (Fig. 3 A). Fig. 3, B and C, shows scaled, superimposed I-V curves with Ca<sup>2+</sup> carrying the inward current and almost linear I-V relations with Cs<sup>+</sup> carrying the inward current in the absence of external divalent ions. Internal Mg<sup>2+</sup> reduced current magnitudes uniformly at all potentials. We also tested whether the MIC I-V shape is stationary during whole-cell recording as internal Mg<sup>2+</sup> is washed out during dialysis of cytoplasm by the pipette contents. During development and run-down of MIC current, the I-V shape remained constant, shown by superimposing scaled I-V curves at varying times after break-in (Fig. 3 D). In Fig. 3, E and F, the outward current did not develop when NMDG<sup>+</sup> was the sole cation in the pipette. After ~10 min of dialysis the external solution was switched from 2 mM Ca<sup>2+</sup> to Na<sup>+</sup>-HEDTA and the inward current became visible. Thus, it is possible for the MIC I-V to be inwardly rectifying when internal permeant ions are eliminated but not when internal Mg<sup>2+</sup> is increased. The MIC I-V shape ap-

pears to be intrinsic to the channel and is not tailored by dialyzable cytoplasmic constituents other than permeant monovalent cations.

*Internal and External Mg<sup>2+</sup> Inhibition Compared*

To address the mechanism of internal Mg<sup>2+</sup> inhibition, we took advantage of the observation that a small percentage of RBL cells (~5%) show a substantial MIC current upon break-in. With Mg<sup>2+</sup> omitted from the pipette solution the current increased until a maximum was reached after several minutes. When the pipette contained millimolar levels of Mg<sup>2+</sup>, the MIC current gradually declined, also with a slow time course. Fig. 4 A shows a recording from a cell with pre-activated MIC current with 5 mM Mg<sup>2+</sup> internal solution. The current was completely inhibited after ~9 min;  $t_{1/2}$  averaged  $117 \pm 41$  s,  $n = 7$  cells. The time course of internal Mg<sup>2+</sup> inhibition is too slow for direct channel block by Mg<sup>2+</sup>, since complete dialysis of the cell cytoplasm by Mg<sup>2+</sup> is complete within <1 min (Pusch and Neher, 1988). In contrast, block of mono-

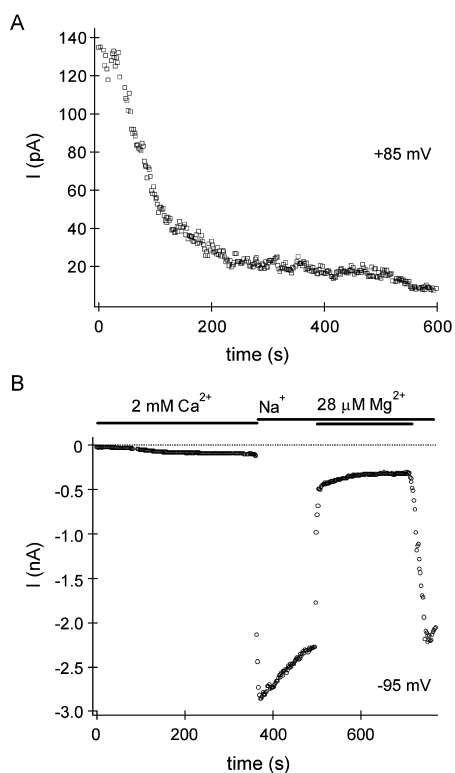


FIGURE 4. Effects of external and internal  $Mg^{2+}$  on MIC current. (A) Time course of internal  $Mg^{2+}$  inhibition of preactivated MIC current. The pipette solution contained: 12 mM EGTA, 5 mM total ( $\sim 3$  mM free)  $Mg^{2+}$ . Outward current amplitude was measured at 85 mV, and the half-time of inhibition was 85 s. (B) Time course of external  $Mg^{2+}$  inhibition of MIC current. The pipette solution contained: 12 mM EGTA, 0  $Mg^{2+}$ . MIC current developed first in 2 mM  $Ca^{2+}$  external. Monovalent MIC current in  $Na^+$ -HEDTA was blocked reversibly by 28  $\mu M$  external  $Mg^{2+}$  (8 mM HEDTA + 3 mM  $MgCl_2$ ).

valent current by external  $Mg^{2+}$  is fast and voltage-dependent, indicating a high-affinity binding site for  $Mg^{2+}$  within the pore (Fig. 4 B).

#### *Ca<sup>2+</sup> Buffering Does Not Affect the Size or the Time Course of MIC Current Development*

To determine whether store depletion is necessary to evoke the MIC current, we tested conditions that would be expected to alter store content. One approach to address this question is to increase internal free  $Ca^{2+}$  concentration, thus reducing the  $Ca^{2+}$  gradient between the intracellular store and the cytoplasm. In a paired comparison trial, the MIC current was recorded with low EGTA (1 mM) with ( $n = 7$  cells) or without ( $n = 14$  cells) 0.5 mM  $Ca^{2+}$  ( $\sim 90$  nM free) in the pipette. Neither the MIC current amplitude nor the rate of activation was reduced by inclusion of  $Ca^{2+}$ ; if anything these parameters were increased, contrary to expectations for a store-operated channel. MIC current amplitudes normalized to cell capacitance were  $5.5 \pm 1.6$  pA/pF in

$Ca^{2+}$ -free compared with  $13.1 \pm 2.8$  pA/pF in 0.5 mM  $Ca^{2+}$ , respectively (evaluated at 70 mV, 6 min after break-in); times to maximal current were  $854 \pm 110$  and  $577 \pm 55$  s, respectively. Furthermore, complete omission of chelators from the pipette solution (with 10 or 100  $\mu M$   $Ca^{2+}$  added) did not prevent the activation of MIC current either (unpublished data). Conditions that suppress CRAC channel activation do not alter development of MIC current when  $Mg^{2+}$  is withdrawn from the cytoplasm.

#### *Run-down of MIC and IRK Currents*

In addition to CRAC and MIC, RBL cells express inwardly rectifying  $K^+$  (IRK) channels thought to be Kir2.1. IRK currents run down spontaneously after prolonged dialysis (McCloskey and Cahalan, 1990; Wischmeyer et al., 1995). MIC and IRK conductances change in parallel during prolonged dialysis, first increasing to a maximum at a similar time and then running down (Fig. 5, A and B). Since IRK is a strong inward rectifier and MIC rectifies strongly in the outward direction, cross-contamination of currents is minimal at very positive and negative membrane potentials (Fig. 5 C). Contamination by CRAC channels at negative potentials is minimal due to the substantially larger IRK current magnitude. MIC and IRK run-down kinetics were highly variable from cell to cell but strongly correlated in an individual cell ( $n = 12$  cells). It is likely that the mechanisms that govern IRK and MIC run-down are both related to  $PIP_2$  depletion in the cell membrane (Huang et al., 1998; Rohacs et al., 1999; Runnels et al., 2002). In contrast, as we document further below, CRAC current is relatively resistant to run-down and can be characterized in isolation of other current components under conditions of low internal  $Mg^{2+}$ .

#### *MIC Current Is Blocked by External Spermine*

External  $Mg^{2+}$  in the micromolar range blocks monovalent MIC current in a voltage-dependent manner (Fig. 4 B). Polyamines also block several other channel types that display open channel  $Mg^{2+}$  block, including IRK channels and AMPA glutamate receptors (for review see Williams, 1997), nAChRs (Haghighi and Cooper, 2000), cyclic nucleotide-gated channels (Lu and Ding, 1999), and voltage-gated  $Na^+$  channels (Huang and Moczydlowski, 2001). Fig. 6 A shows that MIC currents carried by  $Cs^+$  in the absence of external divalent ions are blocked by spermine at micromolar concentrations. The dose-response relation for spermine block of  $Cs^+$  current (Fig. 6 B) indicates a  $K_d$  value of 2.3  $\mu M$  at  $-100$  mV. Like external  $Mg^{2+}$  block, spermine block was fast and voltage dependent, with relief of block at both depolarized and hyperpolarized potentials, indicating interaction with a site within the conducting

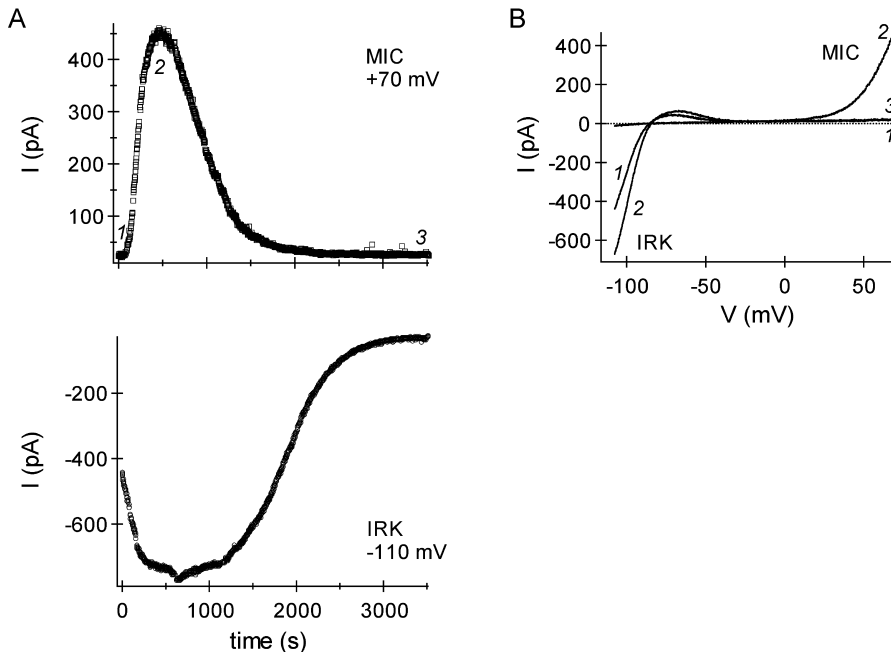


FIGURE 5. MIC and the endogenous IRK currents activate and run down in parallel. (A) Time course of development of MIC current measured at 70 mV and IRK current measured at -110 mV. (B) I-V shapes at various times. IRK was preactivated at break-in, whereas MIC was absent. The internal solution contained (mM):  $K^+$  glutamate, 1 EGTA, 0.5  $Ca^{2+}$ , 0  $Mg^{2+}$ . The external solution contained (mM) 4.5 KCl, 2  $Ca^{2+}$ , 1  $Mg^{2+}$ .

pore and punch through at very negative potentials. Spermine provides a pharmacological tool to test for monovalent MIC current.

#### SKF-96365 Accelerates Run-down of MIC Current

SKF-96365 (Merritt et al., 1990; Chung et al., 1994) has been shown to block CRAC current reversibly at 10–20  $\mu M$  ( $IC_{50}$  values vary from 11 to 16  $\mu M$ ). We investigated effects of 20  $\mu M$  SKF applied after complete development of MIC current (Fig. 7). SKF inhibits MIC with slow onset kinetics that are consistent with an indirect action rather than direct channel blockade. Indeed, SKF (20  $\mu M$ ) had very little effect on the MIC channels in human T cells (unpublished data). The time course of SKF inhibition was variable from cell to cell. Interestingly, SKF exposure seemed to prime the

currents for run-down; MIC currents continued to decrease at the same rate even after SKF was washed out. SKF inhibition was entirely irreversible. Pretreatment of intact RBL cells with SKF did not prevent the subsequent development of MIC, but SKF still exerted its inhibitory effect when reapplied. SKF also inhibited the monovalent current through MIC channels in divalent-free conditions. As a working hypothesis, we propose that SKF acts to facilitate the run-down process through an unknown mechanism that may involve accelerated  $PIP_2$  depletion. Consistent with this hypothesis, in preliminary experiments SKF also facilitated the run-down of IRK current. Since the speed of drug action varied from cell to cell, with no effect in a minority of cells, SKF inhibition of MIC current is not a simple and direct blocking action.

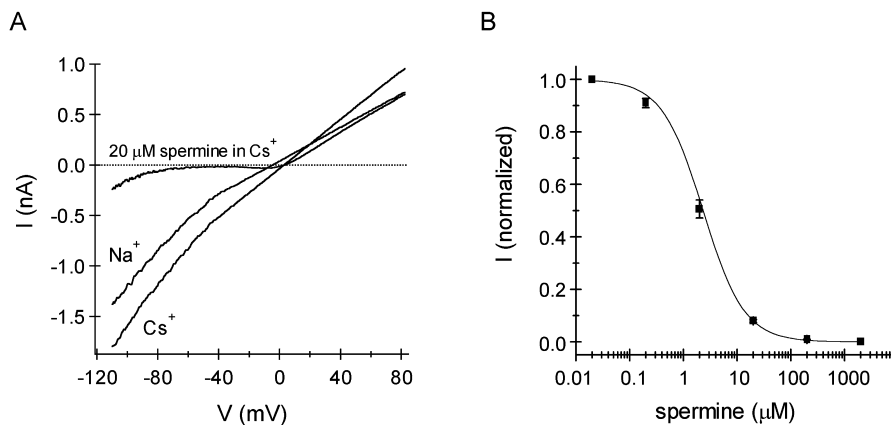
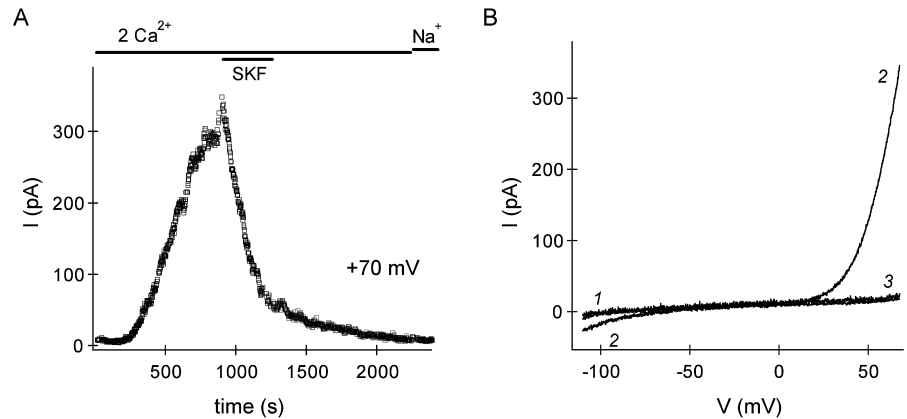


FIGURE 6. Extracellular spermine blocks the MIC current in divalent-free solution. (A) 20  $\mu M$  spermine was applied externally after MIC current had developed fully in divalent-free solution ( $Na^+$ - and  $Cs^+$ -HEDTA). Block was strongly voltage-dependent, blocking preferentially the inward current, but showing some relief of block at very negative potentials. Internal solution: 12 mM EGTA, 0  $Mg^{2+}$ . Spermine block was completely reversible (not shown). (B) Dose-response relationship for spermine block of  $Cs^+$  current (to minimize possible CRAC current contamination) at -100 mV. Data from nine cells are fitted with the Hill equation using a  $K_d$  value of 2.3  $\mu M$  and a Hill coefficient of 1.1.

FIGURE 7. SKF-96365 irreversibly inhibits MIC current. (A) 20  $\mu\text{M}$  SKF was applied after development of MIC current in 2 mM  $\text{Ca}^{2+}$ . (B) I-V relations in a different cell after break-in (1), after development of MIC current (2), and after SKF inhibition (3). Internal solution contained 2 mM EGTA.



### Properties of CRAC Current

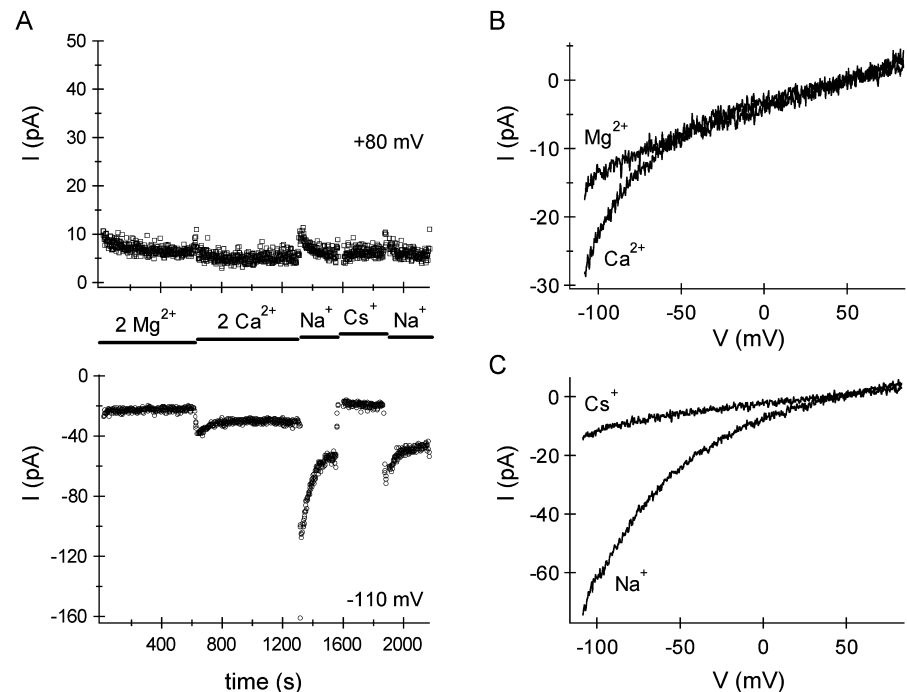
**Divalent and monovalent permeation.** To investigate CRAC channels in isolation, 6 mM internal  $\text{Mg}^{2+}$  (free  $[\text{Mg}^{2+}] = 3.67$  mM) was used to prevent activation of MIC channels (Fig. 8). In  $\text{Ca}^{2+}$ -free external solution (with 2 mM  $\text{Mg}^{2+}$ ) the characteristic development of inward CRAC current was not seen, because  $\text{Mg}^{2+}$  is impermeant. Nevertheless, CRAC channels were activated, because inward current was immediately detected upon switching the external solution to 2 mM  $\text{Ca}^{2+}$  (with 0  $\text{Mg}^{2+}$ ). Subsequently, after removal of all external divalent ions, an inactivating  $\text{Na}^+$  current was seen, and this current was greatly reduced in external  $\text{Cs}^+$ , confirming previous observations in Jurkat cells that CRAC channels do not conduct  $\text{Cs}^+$  well (Lepple-Wienhues and Cahalan, 1996). Fig. 8 B shows corresponding I-V curves in the presence and absence of external  $\text{Ca}^{2+}$  and  $\text{Mg}^{2+}$ . In  $\text{Ca}^{2+}$ , the current was inwardly rec-

tifying, whereas in  $\text{Mg}^{2+}$  inward currents were reduced and only a linear leak current was observed. Monovalent CRAC I-V curves in  $\text{Na}^+$  and  $\text{Cs}^+$  show that  $\text{Na}^+$ , but not  $\text{Cs}^+$ , permeates readily and displays the same degree of inward rectification as  $\text{Ca}^{2+}$  current (Fig. 8 C). These results confirm that CRAC channels are highly selective for  $\text{Ca}^{2+}$  over  $\text{Mg}^{2+}$  and, upon removal of divalents,  $\text{Na}^+$  over  $\text{Cs}^+$  (Hoth and Penner, 1993; Lepple-Wienhues and Cahalan, 1996).

### Varying Internal $\text{Mg}^{2+}$ Does Not Affect the I-V Shape of CRAC Channels

Fig. 9 A shows CRAC current with 5 mM internal  $[\text{Mg}^{2+}]$ , corresponding to  $\sim 3$  mM free  $[\text{Mg}^{2+}]$ . At this level of internal  $\text{Mg}^{2+}$ , the MIC current was very small, and only CRAC current was observed. With 2 mM external  $\text{Ca}^{2+}$ , the I-V of CRAC current was inwardly rectifying as ex-

FIGURE 8. Divalent and monovalent selectivity of CRAC channels. Internal solution contained 12 mM EGTA, with 6 mM total ( $\sim 3.67$  free)  $\text{Mg}^{2+}$  to block MIC current development. (A) Time course of inward and outward currents showing inward CRAC  $\text{Ca}^{2+}$  and monovalent currents. Recording was started in 2 mM  $\text{Mg}^{2+}$ ; the time-dependent activation of  $\text{Mg}^{2+}$  MIC current was absent. Adding 2 mM  $\text{Ca}^{2+}$  revealed CRAC current. The inward monovalent current showed partial inactivation in  $\text{Na}^+$  - HEDTA, and was greatly reduced in  $\text{Cs}^+$  - HEDTA. (B) I-V curves in 2 mM external  $\text{Mg}^{2+}$  and  $\text{Ca}^{2+}$ . (C) I-V curves in  $\text{Na}^+$  - and  $\text{Cs}^+$  - HEDTA.





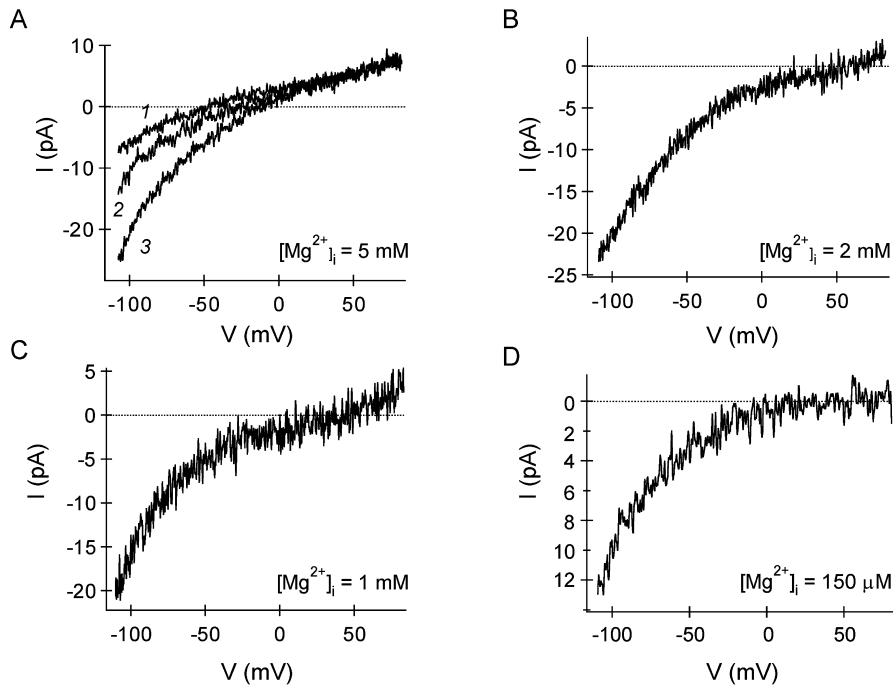


FIGURE 9. CRAC current inward rectification is independent of internal  $Mg^{2+}$ . All pipette solutions contained 12 mM EGTA. (A) Trace 1 shows current after break-in. Traces 2 and 3 show CRAC current in 2 and 5 mM external  $Ca^{2+}$ . Internal solution: 5 mM total ( $\sim 3$  mM free)  $Mg^{2+}$ . The current is strongly inwardly rectifying and shows no outward current at 80 mV, indicating that 3 mM free  $Mg^{2+}$  is sufficient to inhibit MIC current completely. The reversal potential is above 40 mV. Note the difference in the I-V shape compared with Fig. 1 C. (B) CRAC current in 2 mM external  $Ca^{2+}$ . Internal solution contained 2 mM total ( $\sim 1.15$  free)  $Mg^{2+}$ . (C) CRAC current in 5 mM external  $Ca^{2+}$  with 1 mM ( $\sim 563 \mu M$  free)  $Mg^{2+}$  in pipette. (D) CRAC current in 5 mM external  $Ca^{2+}$  with 150  $\mu M$  ( $\sim 83 \mu M$  free)  $Mg^{2+}$  in pipette. Traces shown in B–D were obtained after run-down of MIC current.

pected with a reversal potential more positive than 40 mV (compare Hoth and Penner, 1993). Increasing external  $Ca^{2+}$  from 2 to 5 mM increased the size of the inward CRAC current, also as expected. At lower internal  $Mg^{2+}$  levels, mixtures of CRAC and a much larger MIC current component were typically observed, but CRAC current persisted after MIC current ran down completely. Fig. 9, B–D, shows a comparison of CRAC I-V shapes when internal  $Mg^{2+}$  was lowered to 2, 1, and 0.15 mM  $Mg^{2+}$ , corresponding to calculated free  $[Mg^{2+}]$  levels of 1.15–0.083 mM. The CRAC I-V relationship retained the same degree of inward rectification. By taking advantage of the selective run-down of MIC current, we show that the CRAC I-V shape does not depend upon internal  $[Mg^{2+}]$ .

#### Pharmacological Properties of Monovalent Current through CRAC Channels

We tested the effects of external spermine and SKF-96365 on monovalent CRAC current to compare the pharmacological properties of CRAC and MIC currents. This section demonstrates that spermine had no effect on monovalent or divalent CRAC current, although it reversibly blocked monovalent MIC current (Fig. 6). In addition, SKF-96365 (20  $\mu M$ ) inhibited monovalent CRAC current reversibly (Fig. 10 A), as was shown previously for  $Ca^{2+}$  current through CRAC channels (Chung et al., 1994), although it inhibited MIC current irreversibly (Fig. 7). SKF-96365 block was reversible ( $n = 4$ ) and did not show apparent voltage dependence. As shown in Fig. 10 B, 20  $\mu M$  spermine failed to block  $Na^+$  current through CRAC channels. Like spermine, external  $Mg^{2+}$  also did not affect CRAC channels at a concentration of

external  $Mg^{2+}$  (28  $\mu M$  free) that almost completely blocked MIC channels (Fig. 10 B, c.f. Fig. 4 B).

#### Separation of CRAC and MIC Currents by SKF-facilitated Run-down: Changes in Relative $Na^+$ and $Cs^+$ Permeability

SKF accelerates run-down of MIC current but blocks CRAC current reversibly. This difference was exploited to separate MIC and CRAC components under identical ionic conditions with low internal  $Mg^{2+}$ . In Fig. 11 A, both CRAC and MIC currents developed in the presence of 2 and 5 mM external  $Ca^{2+}$ . Application of SKF reduced the outward MIC current to zero within several minutes and also reduced the inward current at the same time. Inward but not outward currents recovered upon washout of SKF. Under these conditions (5 mM external  $Ca^{2+}$ ), most of the inward current at negative potentials is carried through CRAC channels and is blocked reversibly by SKF. Although SKF decreases both CRAC and MIC components of inward current, the reduction of MIC current was complete and irreversible. Washout of SKF revealed CRAC current in isolation. A complementary approach to observe MIC current in isolation can be taken using  $Mg^{2+}$  as a selectively permeant ion (Fig. 11 B). In this experiment, with NMDG<sup>+</sup> substituted for  $Na^+$ ,  $Mg^{2+}$  serves as the only external permeant ion; the MIC current develops as expected during dialysis and then is irreversibly reduced by exposure to SKF. These experiments illustrate that CRAC and MIC components are separable according to characteristic properties of run-down and ion permeation.

If the current remaining after run-down of the MIC current is indeed CRAC, then one would expect the

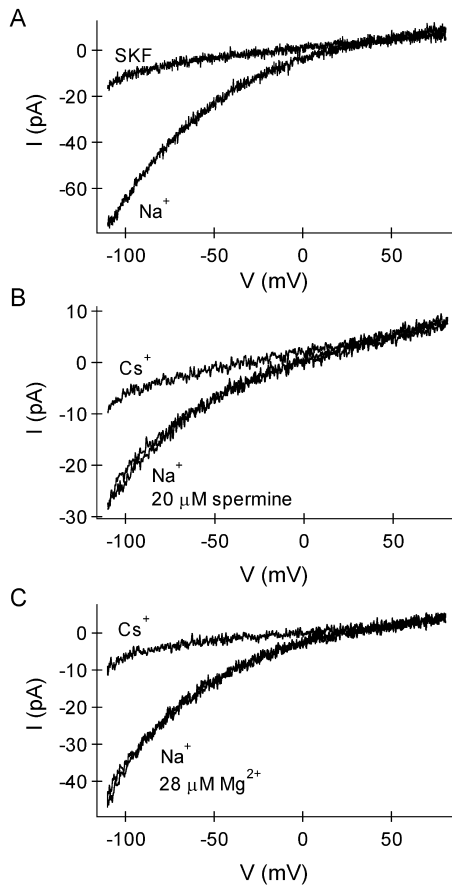


FIGURE 10. Pharmacological properties of monovalent CRAC current. CRAC current was allowed to develop in external  $\text{Ca}^{2+}$  and  $\text{Na}^+$  current through CRAC channels was recorded in  $\text{Na}^+$ -HEDTA. The internal solution contained: 12 EGTA, and 6 (3 mM free)  $\text{Mg}^{2+}$ . (A) Effect of 20  $\mu\text{M}$  SKF-96365 on  $\text{Na}^+$  current through CRAC channels. SKF block was fully reversible. (B) I-V of  $\text{Na}^+$  current through CRAC channels in the presence and absence of 20  $\mu\text{M}$  spermine. (C) I-V of  $\text{Na}^+$  current through CRAC channels in the presence and absence of 28  $\mu\text{M}$  external  $\text{Mg}^{2+}$ , a free  $\text{Mg}^{2+}$  concentration that effectively blocks MIC current (Fig. 4 B). At the end of the experiment (B and C) external  $\text{Na}^+$ -HEDTA was substituted by  $\text{Cs}^+$ -HEDTA; the loss of inward current confirms that the monovalent current is through CRAC channels.

monovalent permeability to change depending on the time of recording. In Fig. 12, the current is shown developing in presence of 2 mM external  $\text{Ca}^{2+}$ . The external solution was subsequently changed to  $\text{Na}^+$ - and then  $\text{Cs}^+$ -HEDTA in order to record the corresponding monovalent current. Both  $\text{Na}^+$  and  $\text{Cs}^+$  show large current with linear I-V relationship (Fig. 12, A and D), as expected if most of the current is MIC. Furthermore, both  $\text{Cs}^+$  and  $\text{Na}^+$  currents continued to increase as additional MIC channels activate. Subsequent application of SKF caused irreversible run-down of  $\text{Cs}^+$  current (Fig. 12, B and E, trace 5). At the end of the experiment, re-exposure to  $\text{Na}^+$ -HEDTA solution revealed a significant increase in inward monovalent current (Fig. 12, B and E, trace 6); the remaining  $\text{Na}^+$  current after run-down

of MIC current showed the familiar inwardly rectifying I-V shape, unlike the linear I-V relationship in the same solution before MIC current ran down. This experiment demonstrates that the combined monovalent permeability switches from  $\text{Cs}^+ \sim \text{Na}^+$  to  $\text{Na}^+ \gg \text{Cs}^+$  over the course of experiment, further confirming that two separate channels, with different permeability and I-V shape, carry the monovalent current. It also shows that the difference in selectivity of the monovalent currents recorded with high and low internal  $\text{Mg}^{2+}$  is not due to  $\text{Mg}^{2+}$  effects on the same channel, since the same internal solution is present throughout. Remarkably, CRAC current usually persists over extended periods of time (Fig. 8 A), long after MIC has completely disappeared. The fact that CRAC and MIC do not run down together can therefore be used for current separation.

#### DISCUSSION

CRAC channels are activated upon depletion of  $\text{Ca}^{2+}$  from the  $\text{IP}_3$ -sensitive intracellular store in Jurkat or RBL cells. Whole-cell and perforated-patch recordings have provided a biophysical characterization of these channels (Lewis and Cahalan, 1989; Hoth and Penner, 1992; Partiseti et al., 1994; for review see Parekh and Penner, 1997), but a detailed understanding of underlying molecular mechanisms remains elusive. We compared the properties of cation currents that develop during passive store depletion with and without internal  $\text{Mg}^{2+}$  using a wide range of membrane potentials, different ionic conditions, and several blocking agents. Table I serves as a guide for experimental manipulations that can isolate and distinguish CRAC and MIC channels by differences in ion permeation, kinetics of development and run-down, and pharmacological sensitivities. Differences in ion permeation and channel pharmacology argue in favor of two separate channels, but multiple effects of  $\text{Mg}^{2+}$  removal on a single channel type are difficult to rule out. In addition, we show that CRAC and MIC components can be isolated kinetically by exploiting the selective run-down of MIC current; this provides an opportunity to compare and contrast CRAC and MIC currents under identical ionic conditions. Our results show that CRAC currents, investigated in isolation without internal  $\text{Mg}^{2+}$  after MIC current run-down, retain their normal properties, including strong selectivity for  $\text{Ca}^{2+}$  over  $\text{Mg}^{2+}$  and  $\text{Na}^+$  over  $\text{Cs}^+$  and reversible block by SKF-96365 but not spermine or  $\text{Mg}^{2+}$ . The simplest interpretation of the available data is that CRAC and MIC currents represent two distinct channel types.

#### Comparison of MIC and CRAC Currents

Both MIC and CRAC are  $\text{Ca}^{2+}$ -permeable channels that activate gradually after whole-cell recording mode is established with  $\text{Ca}^{2+}$  chelators in the pipette. Inward currents are comparable in size and I-V shape at hyper-

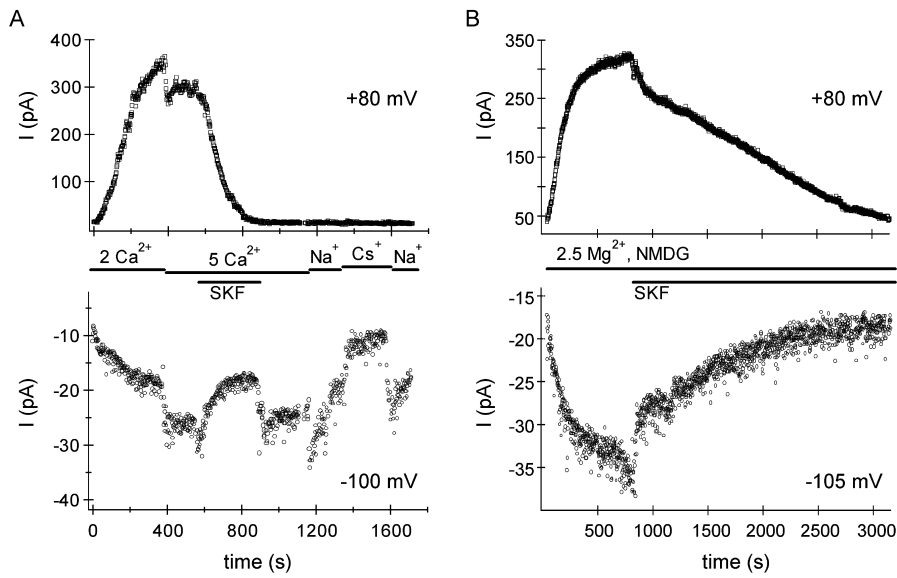


FIGURE 11. Separation of MIC and CRAC currents using SKF-induced run-down of MIC with low  $Mg^{2+}$  inside. (A) Development of MIC and CRAC currents in the same cell. External solution was 2 mM  $Ca^{2+}$  switched to 5 mM to increase current. SKF-96365 application caused slow reduction of both the outward and inward currents. The outward current ran down completely in presence of SKF. Removal of SKF did not increase outward current but reversed the inhibition of the inward current. The remaining inward current in 5 mM  $Ca^{2+}$  after washout of SKF is CRAC current. External solution is switched from  $Na^{+}$ - to  $Cs^{+}$ -HEDTA. Internal solution contained 12 EGTA, 0.5 mM  $Mg^{2+}$ . (B) MIC current isolated by use of 2.5 mM external  $Mg^{2+}$ . SKF caused irreversible run-down of both inward and outward currents, leaving no residual CRAC current in the absence of external  $Ca^{2+}$ .

polarized potentials (10–35 pA). Like voltage-gated  $Ca^{2+}$  channels, both MIC and CRAC conduct monovalent cations when external divalents are omitted. Although potent and selective blockers are not yet available, pharmacological sensitivities show some similarities.

Micromolar concentrations of SKF-96365 inhibit both currents in a voltage-independent manner, albeit with different kinetics of block. Lanthanides also block both MIC and CRAC. The present study emphasizes the major differences in ion permeation, regulation,

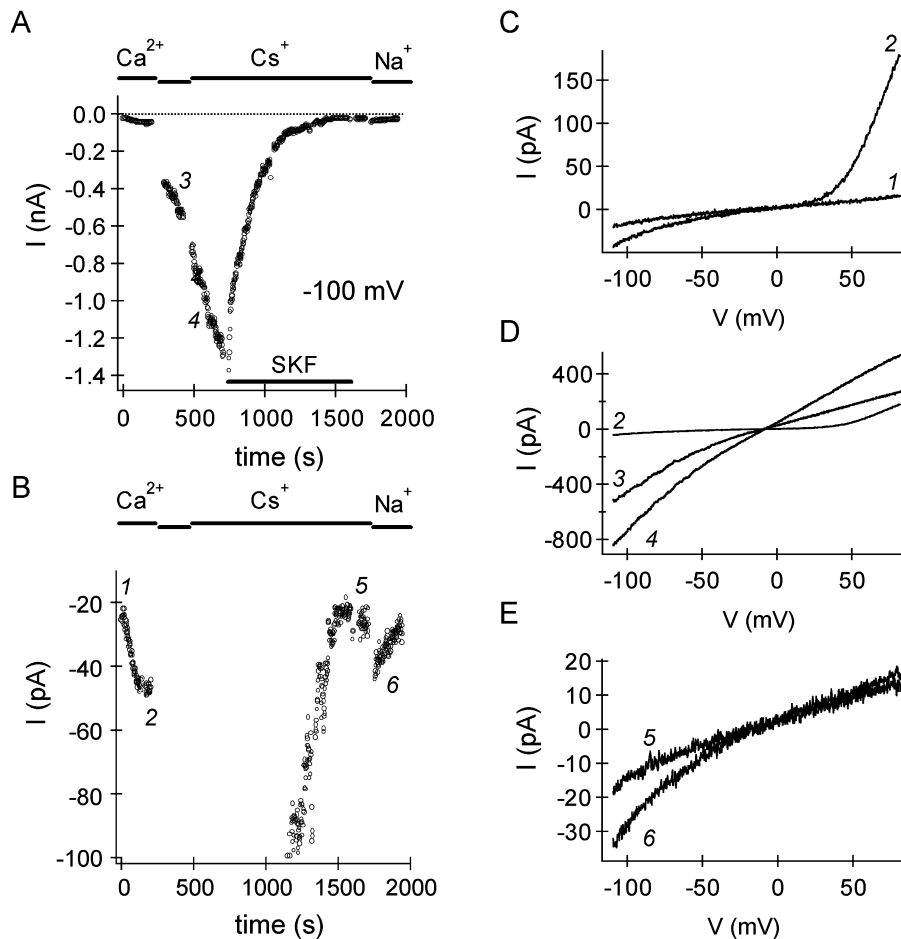


FIGURE 12. Change in the monovalent current selectivity after MIC current run-down induced by SKF-96365. Internal solution was 12 mM EGTA, 0.5 mM (280  $\mu$ M free)  $Mg^{2+}$ . (A) Time course of CRAC and MIC currents. SKF-96365 (20  $\mu$ M) is applied in  $Cs^{+}$  and the MIC current was allowed to run down completely. After washout of SKF, reintroduction of  $Na^{+}$  shows an increased inward current. (B) Same as A with expanded current scale. (C and D) I-V of the combined current before MIC current run-down in 2 mM  $Ca^{2+}$  (C, same trace at different scale in D) and  $Na^{+}$ - and  $Cs^{+}$ -HEDTA (D). (E) I-V of monovalent CRAC in  $Na^{+}$ - and  $Cs^{+}$ -HEDTA after MIC run-down.

TABLE I  
Properties of CRAC and MIC Channels in RBL Cells

	CRAC	MIC
Permeability to external Mg <sup>2+</sup>	not permeable	permeable <sup>a</sup>
Monovalent cation permeability	Na <sup>+</sup> >> Cs <sup>+</sup>	Cs <sup>+</sup> ≥ Na
Reversal potential (divalents)	>40 mV	~0 mV <sup>a</sup>
Reversal potential (Na <sup>+</sup> )	>25 mV	~0 mV <sup>a</sup>
Unitary Na <sup>+</sup> conductance	0.2 pS <sup>b</sup>	40 pS
Rectification of		
divalent current	strong inward	strong outward <sup>a</sup>
monovalent current	strong inward	semilinear <sup>a</sup>
Mg <sup>2+</sup> dependent rectification	No	No
Development time	50–200 s	100–500 s
Run-down with low internal Mg <sup>2+</sup>	infrequent	frequent
Store dependence	Yes	No <sup>a</sup>
Inhibition by internal Mg <sup>2+</sup>	No	Yes, mM <sup>a</sup>
Inhibition by external Mg <sup>2+</sup>	Yes, high mM	Yes, low mM
Inactivation of Na <sup>+</sup> current	Yes	No <sup>a</sup>
Sensitivity to SKF-96365		
divalent and monovalent	reversible block	irreversible inhibition
External spermine block		
monovalent	No	Yes, low μM

<sup>a</sup>Designates properties that are similar to TRPM7 (derived from Nadler et al., 2001; Runnels et al., 2001).

<sup>b</sup>Derived from Prakriya and Lewis (2002).

and block between these two currents, as summarized in Table I.

CRAC channels are permeable to Ca<sup>2+</sup>, Ba<sup>2+</sup>, and Sr<sup>2+</sup>, but not Mg<sup>2+</sup> ions (Zweifach and Lewis, 1993; Fierro and Parekh, 2000; Fig. 8), and readily admit Na<sup>+</sup>, Li<sup>+</sup>, K<sup>+</sup>, and Rb<sup>+</sup>, but not Cs<sup>+</sup> ions when external divalent ions are removed (Hoth and Penner, 1993; Lepple-Wienhues and Cahalan, 1996; Fig. 11). On the other hand, MIC channels are permeable to Mg<sup>2+</sup> and Cs<sup>+</sup> (Nadler et al., 2001; Figs. 1 and 2). Although Mg<sup>2+</sup> permeability is unusual it is not without precedent among nonselective cation channels (e.g., Dani and Eisenman, 1987). At physiological levels of external Ca<sup>2+</sup> and Na<sup>+</sup>, the reversal potentials were near 0 mV for MIC current, indicating a nonselective cation conductance, and were clearly >40 mV for CRAC current consistent with a highly Ca<sup>2+</sup>-selective current. In Jurkat and human T lymphocytes and in RBL cells, the macroscopic monovalent current that develops with low internal Mg<sup>2+</sup> consists of the summed activity of tens to hundreds of 40-pS channels (Kerschbaum and Cahalan, 1999; Fomina et al., 2000; Braun et al., 2001); these represent activity of MIC channels. Single CRAC currents still have not been detected. From analysis of current fluctuations, variance and mean current measurements provide an estimate in the low fS range with Ca<sup>2+</sup> as the permeant ion species, and from 2.8 to 0.2 pS with Na<sup>+</sup> as the permeant ion (Lepple-Wienhues and Cahalan, 1996; Prakriya and Lewis, 2002). In retrospect, the former estimate may have included a contribution from a small fraction of

MIC channels with a much larger single-channel conductance of ~40 pS (Kerschbaum and Cahalan, 1999).

MIC and CRAC channels showed marked differences in I-V characteristics; MIC is a strongly outward-rectifying current, increasing steeply in magnitude >40 mV, whereas CRAC is an inwardly rectifying current that reveals no detectable outward current beyond the same potential. In the absence of external divalents, CRAC current remained inwardly rectifying (Fig. 8), whereas MIC current lost outward rectification and became nearly linear (Fig. 3). With micromolar internal free Mg<sup>2+</sup> (recorded after MIC has run down), CRAC still demonstrated inward rectification (Fig. 12). Differences in CRAC and MIC I-V shapes appear to be intrinsic to each respective channel. During channel activation, both MIC and CRAC currents increased uniformly at all potentials, and I-V shapes were unaffected by widely varying levels of internal Mg<sup>2+</sup> (Figs. 3 and 9).

CRAC and MIC currents also exhibited distinct sensitivities to two different pharmacological agents, spermine and SKF-96365. In the absence of external divalent cations, MIC currents (carried by Cs<sup>+</sup> or Na<sup>+</sup>) were reversibly blocked at micromolar concentrations by external Mg<sup>2+</sup> or by external spermine, whereas monovalent CRAC was unaffected. Inhibition by internal Mg<sup>2+</sup> was voltage- and time-independent and clearly different from the voltage-dependent block produced by external Mg<sup>2+</sup> or spermine (Figs. 4 and 6). Both Mg<sup>2+</sup> and spermine block were strongly voltage-dependent with considerable relief of block observed at positive potentials and partial relief at extremely negative potentials, consistent with punch-through seen by several pore blockers in other channel types. 20 μM SKF-96365 inhibited divalent or monovalent CRAC currents rapidly and reversibly, with millimolar internal Mg<sup>2+</sup> or with low internal Mg<sup>2+</sup> after run-down of MIC (Figs. 10 and 11). In contrast, SKF reduced the MIC current slowly over several minutes, and this reduction in current amplitude (seen uniformly at all potentials) was irreversible (Fig. 7). The effect of SKF was complex and may imply that a loss of cytoplasmic factors from the cytoplasm is required for its expression. Preincubation with SKF did not noticeably alter development of MIC current. Moreover, SKF did not affect the MIC current when applied early during the recording. In the absence of an exact mechanism, we hypothesize that SKF may facilitate MIC current run-down.

#### What Are the Mechanisms of Activation and Run-down of MIC Current?

When internal Mg<sup>2+</sup> is reduced by whole-cell dialysis, MIC current develops gradually over several minutes, reaching a maximal amplitude ~10 min after break-in. Both the time course of MIC current development and the maximal current amplitudes varied from cell to cell. MIC current developed even when internal EGTA

was lowered from 12 to 1 mM and with levels of free  $\text{Ca}^{2+}$  that would be expected to sustain  $\text{Ca}^{2+}$ -store content, suggesting that passive depletion of stores was not important for activation. Pretreatment of the cells with 1  $\mu\text{M}$  thapsigargin (8 min) also did not change activation of MIC current (unpublished data). Furthermore, addition of 10 or 100  $\mu\text{M}$  internal free  $\text{Ca}^{2+}$  while omitting internal  $\text{Ca}^{2+}$  chelators also did not prevent MIC current from activating (unpublished data). Thus, we find no evidence that MIC is a store-operated conductance in RBL cells. A small fraction of cells exhibited significant MIC current immediately upon break-in. Inclusion of millimolar concentrations of free  $\text{Mg}^{2+}$  in the pipette reduced this preactivated component of MIC current with a time course slower than expected for free  $\text{Mg}^{2+}$  diffusion (Fig. 4 A), suggesting a mechanism more complex than a direct channel- $\text{Mg}^{2+}$  interaction. The mechanism for MIC-current activation may involve the removal of tonic inhibition by an endogenous molecule, since MIC current is not increased during prolonged perforated-patch recording (unpublished data). It is notable that in other cell types cation conductances that are blocked by external divalent ions also develop over a time course of minutes and are not store-dependent (e.g., Mubagwa et al., 1997).

MIC and IRK current develop and run down in parallel (Fig. 5 A), suggesting a common mechanism of regulation. The reasons for IRK increase after break-in remain unknown at present. IRK run-down is thought to be mediated by  $\text{PIP}_2$  depletion in the membrane (Hilgemann and Ball, 1996; Huang et al., 1998; Rohacs et al., 1999). IRK current can be reactivated by specific  $\text{PIP}_2$  isomers, is blocked by  $\text{PIP}_2$  antibodies, and is reversibly inhibited by agonist stimulation that activates the PLC pathway (Jones, 1996). Recently,  $\text{PIP}_2$  has been shown to be a required cofactor for TRPM7 channels (Runnels et al., 2002). Depletion of  $\text{PIP}_2$  may be a mechanism for the nearly synchronous run-down of both IRK and MIC currents.

#### *Comparison of MIC and CRAC to Cloned Channels*

The I-V characteristic of the native MIC current shows a marked similarity to the cloned TRPM7 channel (Nadler et al., 2001; Runnels et al., 2001; Yamaguchi et al., 2001), as noted previously (Hermosura et al., 2002). Like MIC, TRPM7 current is inhibited by internal  $\text{Mg}^{2+}$  or  $\text{Mg}^{2+}$  nucleotides at millimolar concentrations and is present in a wide variety of cells, including RBL cells. Heterologously expressed TRPM7 conducts both  $\text{Ca}^{2+}$  and  $\text{Mg}^{2+}$  (Nadler et al., 2001) and  $\text{Cs}^+$  and  $\text{Na}^+$  in the absence of external divalent ions (unpublished data) and reverses close to 0 mV. It is likely that the current described previously in Jurkat and human T cells (Kerschbaum and Cahalan, 1998, 1999; Fomina et al., 2000) represents the TRPM7 channel.

Monovalent cation channels that lack voltage-dependent gating are revealed by removal of external divalent cations in a wide variety of cell types, including amphibian epithelial membranes (Van Driessche et al., 1993), chick embryo ectoderm (Sabovic et al., 1996), *Xenopus* oocytes (Arellano et al., 1995), cardiac myocytes (Mubagwa et al., 1997; Bosteels et al., 1999), smooth muscle (Bae et al., 1999), hippocampal neurons (Xiong and MacDonald, 1999). Most of these channels have also been shown to conduct various divalent cations ( $\text{Ca}^{2+}$ ,  $\text{Ba}^{2+}$ ,  $\text{Sr}^{2+}$ ) in the inward direction. Divalent currents through these channels are usually much smaller than monovalent currents at the same voltage, even when divalent concentrations are in the millimolar range. All of the above-mentioned conductances display weak selectivity among  $\text{K}^+$ ,  $\text{Na}^+$ ,  $\text{Cs}^+$ ,  $\text{Rb}^+$ , and other small monovalent cations when external divalent ions are removed. Many of these native currents may represent activity of TRPM7 or related TRP channels.

Another member of the TRP family of ion channels, TRPV6 (also known as CaT1 or ECAC2) is a  $\text{Ca}^{2+}$ -permeable channel that has been proposed to be store operated and to underlie native CRAC currents (Yue et al., 2001). Some important properties of CaT1, such as  $\text{Na}^+$ / $\text{Cs}^+$  permeability, effects of 2-APB, and voltage-dependent gating, are, however, different from those of native CRAC currents (Voets et al., 2001). Effects of internal  $\text{Mg}^{2+}$  (or lack therein) on rectification can be considered a useful characteristic for testing candidate CRAC channel clones that express inwardly rectifying channels.

#### *Mechanisms of Inward Rectification – CRAC and other Channels*

Several channels are known to have inwardly rectifying I-V relationships. Internal  $\text{Mg}^{2+}$  can produce inward rectification in inwardly rectifying  $\text{K}^+$  channels, nicotinic acetylcholine receptor channels, L-type  $\text{Ca}^{2+}$  channels, and voltage-gated  $\text{Na}^+$  channels by blocking the open channel pore from inside at depolarized membrane potentials (Armstrong, 1969; Vandenberg, 1987; Matsuda et al., 1987; Pusch, 1990; Ifune and Steinbach, 1992; Kuo and Hess, 1993; Nichols et al., 1994; Forster and Bertrand, 1995). Here, we demonstrate that the inward rectification of CRAC channels is an intrinsic channel property and not a consequence of a voltage-dependent block of the channel by internal  $\text{Mg}^{2+}$ , as previously suggested (Kerschbaum and Cahalan, 1998).  $\text{Mg}^{2+}$  block as a mechanism for inward rectification of the CRAC channel was ruled out by varying internal  $\text{Mg}^{2+}$  systematically from micromolar to millimolar levels with no observed change in the characteristic shape of the I-V relation. In addition to open channel block by internal  $\text{Mg}^{2+}$ , another mechanism for rectification appears to be the voltage-dependent block of channels by internal spermine and other

polyamines, organic positively charged molecules present in vertebrate cells. This mechanism of rectification has been demonstrated in various channel types, such as inwardly rectifying K<sup>+</sup> channels, AMPA glutamate receptors (for review see Williams, 1997), and nAChRs (Haghighi and Cooper, 2000). However, inward rectification of CRAC channels is unlikely to be caused by another intracellular blocking ion because prolonged recording (30–60 min) in whole-cell mode does not alter the inward rectification of CRAC current. Thus, we propose that the mechanism of inward rectification of CRAC channels is intrinsic to the protein. TRPV6 (CaT1) and TRPV5 (CaT2) display pronounced inward rectification and a high degree of Ca<sup>2+</sup> selectivity. The mechanism for rectification is unexplored in these channels. However, it is unlikely that internal Mg<sup>2+</sup> mediates it, as strong inward rectification of CaT1 persists when Mg<sup>2+</sup> is in the micromolar range or is entirely omitted from intracellular solution (unpublished data; Vennekens et al., 2000; Voets et al., 2001; Yue et al., 2001). Importantly, CaT1 current carried by monovalent cations also maintains its inward rectification in the absence of internal Mg<sup>2+</sup> (Yue et al., 2001, Fig. 2). Thus, TRPV5 and 6 serve as examples of Ca<sup>2+</sup>-selective channels that display strong inward rectification independent of internal Mg<sup>2+</sup> block.

#### Physiological Roles

Ca<sup>2+</sup> influx through CRAC channels is required to generate Ca<sup>2+</sup> signaling, gene expression, and cell proliferation in T lymphocytes (for review see Lewis, 2001), but unfortunately mechanistic and molecular aspects of these channels remain unclear. It appears that we know even less about these channels than previously thought (Kerschbaum and Cahalan, 1999), since the single channels formerly attributed to CRAC are instead likely to be TRPM7 channels that coactivate when passive Ca<sup>2+</sup>-store depletion is combined with low internal Mg<sup>2+</sup>. Our results complement recent work and provide a cautionary note on current separation (Hermosura et al., 2002; Prakriya and Lewis, 2002). Noise estimates for single-channel CRAC conductance (Zweifach and Lewis, 1993; Prakriya and Lewis, 2002) suggest that CRAC channels are abundantly expressed in Jurkat T cells, from 5,000 to 10,000 functional channels per cell. Functional expression of MIC channels (previously identified as CRAC) is up-regulated by an order of magnitude when human T cells are stimulated to proliferate (Fomina et al., 2000), in parallel with dramatic changes in expression levels of voltage-gated K<sup>+</sup> channels (Kv1.3) and Ca<sup>2+</sup>-activated K<sup>+</sup> channels (IKCa1) (for review see Cahalan et al., 2001). It will be important to assess expression levels of CRAC channels in normal T cells, both resting and in varying states of activation. Selective blockers of the sort that have been developed for lymphocyte K<sup>+</sup> channels

(Chandy et al., 2001) are not yet available for CRAC or MIC channels. Molecular and pharmacological tools will be important to establish functional roles of CRAC and MIC channels in the immune system.

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