

Calcium elevation in mouse pancreatic beta cells evoked by extracellular human islet amyloid polypeptide involves activation of the mechanosensitive ion channel TRPV4

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Abstract

Aims/hypothesis To investigate the mechanism by which human islet amyloid polypeptide (hIAPP) fibril formation results in calcium influx across the plasma membrane of pancreatic beta cells, and its association with apoptosis.

Methods Cytoplasmic intracellular calcium concentrations ($[Ca^{2+}]_i$) were monitored for 2 h as the 340/380 nm fluorescence ratio in fura-2 loaded cells of the MIN6 mouse pancreatic beta cell line. Cell morphology was evaluated by transmission electron microscopy, and viability by FACS.

Results hIAPP (10 μ mol/l) increased $[Ca^{2+}]_i$ in 21% of MIN6 cells in standard buffer, and in 8% of cells in Na^+ -free buffer. Transient receptor potential (TRP) channel inhibitors (gadolinium and ruthenium red) prevented the $[Ca^{2+}]_i$ rise under both conditions, whilst nifedipine was only effective in the presence of Na^+ . hIAPP increased apoptosis in both insulinoma cells and islets in primary culture, and cell viability was partially rescued by ruthenium red ($p < 0.001$).

By RT-PCR, we detected expression of the mechanosensitive TRP cation channel subfamily V member 4 (*Trpv4*) in MIN6 cells and mouse pancreas. Small interference RNA against *Trpv4* prevented hIAPP-induced $[Ca^{2+}]_i$ rises, decreased hIAPP-triggered expression of the endoplasmic reticulum (ER) stress response, and reduced hIAPP-triggered cell death by 50% ($p < 0.05$).

Conclusions/interpretation Alterations in $[Ca^{2+}]_i$ play a key role in hIAPP-induced beta cell cytotoxicity. By electron microscopy, we detected extracellular hIAPP aggregates adjacent to irregular invaginated regions of the plasma membrane. We propose that TRPV4 channels may sense physical changes in the plasma membrane induced by hIAPP aggregation, enabling Ca^{2+} entry, membrane depolarisation and activation of L-type Ca^{2+} channels. Decreasing the activity of TRPV4 prevented hIAPP-induced $[Ca^{2+}]_i$ changes, reduced hIAPP-triggered ER stress and improved cell viability.

Keywords Amylin · Amyloid · Apoptosis · Calcium · IAPP · Plasma membrane · *Trpv4*

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Abbreviations

$[Ca^{2+}]_i$	intracellular calcium concentration
ER	endoplasmic reticulum
FBS	fetal bovine serum
hIAPP	human islet amyloid polypeptide
IAPP	islet amyloid polypeptide
PI	propidium iodide
rIAPP	rodent islet amyloid polypeptide
RR	ruthenium red
siRNA	small interfering RNA
ThT	thioflavin T
TRP	transient receptor potential
TRPV4	TRP cation channel subfamily V member 4

Introduction

Islet amyloid polypeptide (IAPP), also known as amylin, is the main component of islet amyloid [1, 2], which is found within the pancreatic islets of Langerhans in patients with type 2 diabetes mellitus [3, 4]. Because deposits of islet amyloid colocalise with areas of cell degeneration, the process of amyloidosis has been strongly associated with the progressive loss of pancreatic beta cell mass that is one of the hallmarks of type 2 diabetes mellitus [5–8]. A target region of human IAPP (hIAPP) between positions 20 and 29 is thought to be responsible for the formation of amyloid fibrils [9]. Rodent IAPP (rIAPP), which differs from the human sequence at several residues within this critical region, is not amyloidogenic [9].

The process of ordered aggregation into amyloid fibrils is a common event in many cell-degenerative diseases, including Alzheimer's disease, Parkinson's disease, prion protein related encephalopathies and several other local and systemic amyloidoses [10]. Although the peptides that form amyloid deposits show no apparent primary sequence homology, they all adopt a beta strand secondary structure after conversion to fibrils [11], suggesting that partially folded states serve as the precursors for nucleation [12–14]. However, the toxicity of amyloidogenic peptides appears to lie in the oligomeric intermediates rather than the mature fibrils [15, 16]. Thus, the conversion of a normally soluble protein into amyloid can give rise to a gain in toxic function, providing a common mechanism by which amyloid contributes to disease pathogenesis through cell toxicity and cell death [17].

Amyloid peptides have been reported to induce cell death by apoptosis [6, 18–20], which may result from the disruption of calcium homeostasis [21]. Indeed, in the MIN6 mouse pancreatic beta cell line, we recently showed that hIAPP triggered calcium changes that were associated with the induction of apoptosis via a pathway involving activation of the endoplasmic reticulum (ER) stress response [22]. The elevation of intracellular calcium in neurons and astrocytes has been reported to follow the formation and extracellular deposition of several amyloid peptides, including hIAPP [23–27], and a range of potential underlying mechanisms for the increased calcium permeability have been proposed. In cell-free systems such as phospholipid bilayers, hIAPP amyloid has been reported to form cation-permeable channels as a result of its insertion into membranes [28], but also to destabilise the membrane structure in parallel with the measured kinetics of hIAPP fibril growth [29] and to cause a non-specific increase in conductance [16, 30–33]. In addition, however, activation of cell-surface receptors coupled to calcium influx has been reported in a neural cell line exposed to beta-amyloid peptide aggregation [34]. Although diverse, these mechanisms

are compatible with the idea that the cytotoxicity of hIAPP is initiated on the cell surface and requires close contact between the aggregation process and the beta cell plasma membrane [6]. In regions where this occurs, the plasma membrane of pancreatic beta cells in amyloidogenic islets in vivo is usually characterised by ultrastructural morphological abnormalities [2, 35–37].

The aim of the present study was to investigate the mechanism by which hIAPP fibril formation results in calcium influx across the plasma membrane of pancreatic beta cells and its association with apoptosis.

Methods

Cell culture The mouse pancreatic beta cell line MIN6 [38] was cultured in Dulbecco's modified Eagle's medium supplemented with 10% fetal bovine serum (FBS), 2 mmol/l L-glutamine, 5 μ mol/l β -mercaptoethanol, 100 U/ml penicillin and 100 μ g/ml streptomycin, at 37°C with 5% CO₂.

Islet isolation and culture Islets were isolated by collagenase (Roche Diagnostics, Indianapolis, IN, USA) digestion of the pancreas, and separated from exocrine tissue on a Histopaque (Sigma-Aldrich, Steinheim, Germany) density gradient. Hand-picked islets were transferred to RPMI-1640 medium (Gibco-BRL, Paisley, UK) containing 11.1 mmol/l glucose and supplemented with 10% FBS, 2 mmol/l L-glutamine, 100 U/ml penicillin and 100 μ g/ml streptomycin, and cultured at 37°C with 5% CO₂. All procedures were carried out with male mice on a C57BL/6 background and in accordance with the Institutional Animal Ethics Committee's policies.

Solutions and chemicals Synthetic human and rat IAPP peptides (Bachem, Bubendorf, Switzerland) were dissolved in sterile water at 500 μ mol/l and incubated at room temperature for 10 min before use at a final concentration of 10 μ mol/l. Drugs and chemicals were purchased from Sigma-Aldrich (Poole, UK) unless otherwise stated, and were added to the bath solutions as indicated. The bath solution for calcium imaging experiments was a Krebs–Ringer bicarbonate solution containing (mmol/l): 149.5 NaCl, 6.5 KCl, 31.2 NaHCO₃, 2.7 MgCl₂, 4.3 CaCl₂ and 26 HEPES (pH 7.4), to which 1.3% (wt/vol.) BSA and 1 mmol/l glucose were added. The Na⁺-free buffer contained choline⁺ in place of Na⁺.

Transmission electron microscopy For ultrastructural analysis of insoluble aggregates, a 4 μ l sample of the same suspension was applied to a Formvar carbon-coated copper grid for 1 min, dried, stained with 2% (wt/vol.) uranyl acetate in water for 1 min and air dried. For cellular ultrastructural

analysis, MIN6 cells in culture were fixed in 2.5% (wt/vol.) glutaraldehyde in 0.1 mol/l phosphate buffer (pH 7.4) at 4°C for 1.5 h, rinsed in 0.1 mol/l phosphate buffer and post-fixed in osmium tetroxide 1% (wt/vol.) in the same buffer for 1 h. The samples were dehydrated in an ascending series of acetone concentrations, embedded in Spurr resin and polymerised at 60°C for 48 h. Ultra-thin sections (60–90 nm) were cut using a Reichert-Jung Ultracut E ultramicrotome (Leica Instruments, Nussloch, Germany). They were then placed on 200 mesh copper grids and double stained with uranyl acetate (2% wt/vol.) and lead citrate. The grids were examined using a Jeol 1010 transmission electron microscope (Jeol, Tokyo, Japan) operating at an accelerating voltage of 80 kV.

Thioflavin T (ThT) fluorescence assay The development of hIAPP fibrils was monitored by a ThT fluorescence assay. Each reaction was performed with 5 µmol/l ThT in assay buffer (50 mmol/l TRIS, 100 mmol/l KCl, 1 mmol/l EDTA, pH 8.0) containing 10 µmol/l freshly reconstituted hIAPP or rIAPP peptide. Measurements were recorded at 37°C by using a microplate spectrofluorometer (SpectraMax GeminiXS; Molecular Devices, Sunnyvale, CA, USA). Excitation and emission wavelengths were set at 440 and 482 nm, respectively.

Intracellular calcium concentration $[Ca^{2+}]_i$ measurements Cells were plated on glass-bottom dishes (Mattek, Ashland, MA, USA) 1–3 days prior to use and loaded with 2 µmol/l fura-2 as the acetoxymethylester (Molecular Probes, Leiden, the Netherlands) for 30 min in bath solution containing 1 mmol/l glucose at room temperature. Measurements were made on an inverted Fluorescence Microscope (Olympus IX71, Southall, UK) with a ×40 oil-immersion objective. Excitation at 340 and 380 nm was achieved using a combination of a 75 W Xenon arc lamp and a monochromator (Cairn Research, Faversham, UK) controlled by MetaFluor software (Molecular Devices, Wokingham, UK) and emission was recorded with an Orca ER CCD camera (Hamamatsu Photonics UK, Welwyn Garden City, UK) using a dichroic mirror and a 510 nm long pass filter. Minimal and maximal signals were recorded in the presence of 5 µmol/l ionomycin in 5 mmol/l EGTA/0 mmol/l Ca^{2+} and 5 mmol/l Ca^{2+} , respectively, at the end of the experiment.

RNA interference Small interfering RNA (siRNA) duplexes for mouse transient receptor potential cation channel subfamily V member 4 (*Trpv4*) and amylase 2 (*Amy2*) were obtained from Dharmacon (Lafayette, CO, USA). A total of 170 nmol/l of each siRNA duplexes was transfected into MIN6 cells using Lipofectamine 2000 (Invitrogen, Carlsbad, CA, USA). Cells were processed and analysed after 48 h of transfection. Cells treated with siRNA against *Amy2* (siAmy2) were used as control. Prior to siRNA experi-

ments, transfection optimisation to ensure maximum siRNA uptake was performed with siGLO green fluorescent control reagent (Dharmacon). Transfection efficiency expressed as the percentage of green fluorescent-positive cells was $91 \pm 6\%$ (mean \pm SEM from four independent experiments).

RT-PCR Total RNA was extracted using TRI reagent (Sigma-Aldrich) following the manufacturer's instructions. Thereafter, cDNA was synthesised from 1 µg total RNA using SuperScript II RNase H reverse transcriptase (Invitrogen). PCR was carried out with 50 ng cDNA and specific oligonucleotide primers using *Taq* DNA polymerase (Promega, Madison, WI, USA). Primers for *Trpv4* were 5'-ATCAACTCGCCCTTCAGAGA-3' and 5'-GGTGTTCTCTCGGGTGTGT-3', for β -actin (*Actb*) were 5'-TGAGAGGGAAATCGTGCGTG-3' and 5'-TGCTTGCTGATCCACATCTGC-3', and for analysis of mouse X-box binding factor-1 (*Xbp1*) mRNA splicing were 5'-GAACCAGGAGTTAAGAACACG-3' and 5'-AGGCAA CAGTGTCAAGTCC-3'. PCR products were separated by electrophoresis on a 1.5–2.5% (wt/vol.) agarose gel and visualised by ethidium bromide staining. Unspliced and spliced *Xbp1* (*sXbp1*) gave products of 205 and 179 bp, respectively. The percentage of *sXbp1* to total *Xbp1* was determined by densitometry using Quantity One software (Bio-Rad Laboratories, Hercules, CA, USA).

Real-time quantitative RT-PCR The heat shock protein 90 kDa beta member-1 (*Hsp90b1*) and *Actb* genes were amplified using SYBR Green PCR Core Reagents (Applied Biosystems, Warrington, UK) with primers 5'-CACACTAGG TCGTGAACAACA-3' and 5'-TCTGTCTTGCTACTCCA CACGT-3', and 5'-GATCTGGCACCACCTTCTACA-3' and 5'-CGTCACCGGAGTCCATCACAA-3', respectively. PCR was run with 1 ng cDNA using an ABI Prism 7900HT Sequence Detection System (Applied Biosystems) following the manufacturer's instructions. A standard curve of each primer set was generated from serial dilutions of cDNA. PCR products were verified using dissociation curve analysis after the run using SDS software (Applied Biosystems). *Actb* values were used to normalise *Hsp90b1* expression.

Apoptosis assay MIN6 cells were harvested and pooled with their medium in order to evaluate also cells that had lost their adherent properties during apoptosis. The protocol for isolation of single islet cells was as published previously [22]. Islets were digested in PBS containing 0.125 mg/ml trypsin and 0.05 mg/ml EDTA at 37°C. The cell suspension was cycled for 5 min on ice to allow islets to sediment. The supernatant fraction containing single cells was removed and placed in FBS. To obtain additional single islet cells, the digestion process was repeated three times. Thereafter, cells were stained with annexin V-FITC and propidium iodide (PI) using an Annexin V-FITC Apoptosis Detection

Kit (Becton Dickinson, San Jose, CA, USA). Samples were analysed by FACS within 1 h on a FACS Calibur with Cell Quest software (Becton Dickinson). FACS gating based on forward and side scatter of 20,000 cells was included for analysis. Annexin V-FITC- and PI-negative cells were considered as viable, annexin V-FITC-positive cells as early apoptotic and those positive for both annexin V-FITC and PI as late apoptotic or dead cells.

Statistical analysis Data are presented as means±SEM. Comparisons between groups were performed by the Student's *t* test. Differences in frequencies between groups were assessed by the χ^2 test.

Results

As reported previously, hIAPP was observed to aggregate spontaneously in solution over the course of 2 h [14]. Electron microscopy of freshly prepared solutions containing 10 $\mu\text{mol/l}$ hIAPP showed that prefibrillar hIAPP structures were first observed after 10 min, with maximum formation after 30–45 min (Fig. 1a, left panel). At 2 h we also detected fibrils of hIAPP (Fig. 1a, right panel). The development of hIAPP fibrils was confirmed by monitoring the fluorescence of ThT at 482 nm, the intensity of which reflects the binding to, and hence the formation of, amyloid fibrils. In solutions containing 10 $\mu\text{mol/l}$ hIAPP, but not 10 $\mu\text{mol/l}$ rIAPP, ThT fluorescence increased throughout the 2 h incubations, indicating the progressive formation of fibrils (Fig. 1b).

To investigate whether hIAPP increases cytosolic calcium concentrations in the insulinoma cell line MIN6, we monitored the 340/380 nm fluorescence ratio in cells loaded with the calcium indicator dye, fura-2. When MIN6 cells were incubated in 10 $\mu\text{mol/l}$ hIAPP for 2 h, we observed a >1.4-fold elevation of the fluorescence ratio in 21% of cells (70/328), indicative of a rise in $[\text{Ca}^{2+}]_i$ (Fig. 2a–e). By contrast, no calcium changes of this magnitude were observed in 128 cells treated with rIAPP or in 87 cells incubated without additions (Fig. 2f,g; $p < 0.001$ vs hIAPP). In the cells incubated with hIAPP, the latency of the calcium rise had a bimodal distribution, with a first peak occurring at 25–30 min and a second at 75–90 min (Fig. 2b). The timing of the first peak coincides with the first appearance of IAPP deposits by light microscopy. In those cells that exhibited a rise in $[\text{Ca}^{2+}]_i$, the 340/380 nm ratio increased progressively until, in many cases, the cell was observed to detach from the glass dish, thereby preventing calibration of the calcium signal in individual responsive cells. The mean peak ratio before detachment in the cells that exhibited a calcium rise was 2.0 ± 0.4 ($n = 41$),

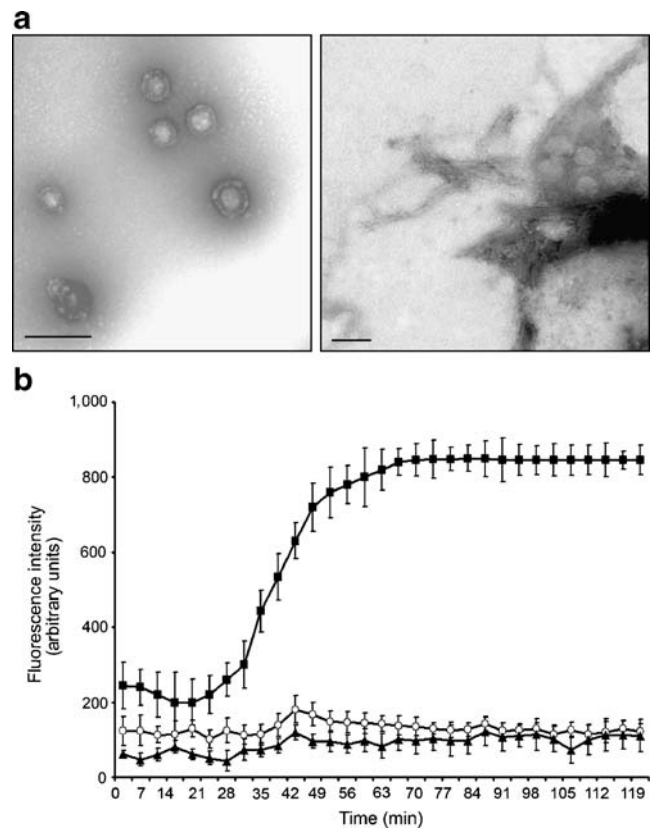


Fig. 1 hIAPP aggregation process. **a** Electron microscopy images showing spontaneous aggregation of 10 $\mu\text{mol/l}$ hIAPP. Prefibrillar hIAPP structures were first observed after 10 min, and maximum formation was achieved after 30–45 min (left panel). hIAPP fibrils were detected at 2 h (right panel). Scale bar, 0.2 μm . **b** Formation of hIAPP fibrils was monitored over time by the fluorescence intensity of ThT. Experiments were performed with either 10 $\mu\text{mol/l}$ hIAPP (squares), rIAPP (triangles) or control assay solution (circles; $n = 8$)

similar to the maximum ratio of 1.9 ± 0.5 ($n = 72$) in the remaining cells treated at the end of the experiment with ionomycin and 5 mmol/l Ca^{2+} . This suggests that the calcium concentration in affected cells rose to at least 1 $\mu\text{mol/l}$.

We next investigated whether the rise in $[\text{Ca}^{2+}]_i$ was dependent on calcium entry through voltage-gated Ca^{2+} channels. Inclusion of 5 $\mu\text{mol/l}$ nifedipine in the incubation medium significantly abolished the hIAPP-triggered rise in the fura-2 ratio (0/198 cells responded, $p < 0.001$ compared with hIAPP alone) (Fig. 3a), suggesting that L-type Ca^{2+} channels contribute to the calcium rise in MIN6 cells. As L-type Ca^{2+} channels normally only open at a threshold membrane potential of approximately -40 mV, the most likely explanation for their recruitment by hIAPP is as a consequence of membrane depolarisation. To investigate the role of Na^+ ions in any initial depolarisation, we repeated the experiments in buffer containing choline⁺ in place of Na^+ . In the absence of hIAPP, the calcium concentration in MIN6 cells was less stable in this Na^+ -free buffer, and tended to rise slightly during the 2 h incubation, with 4/187

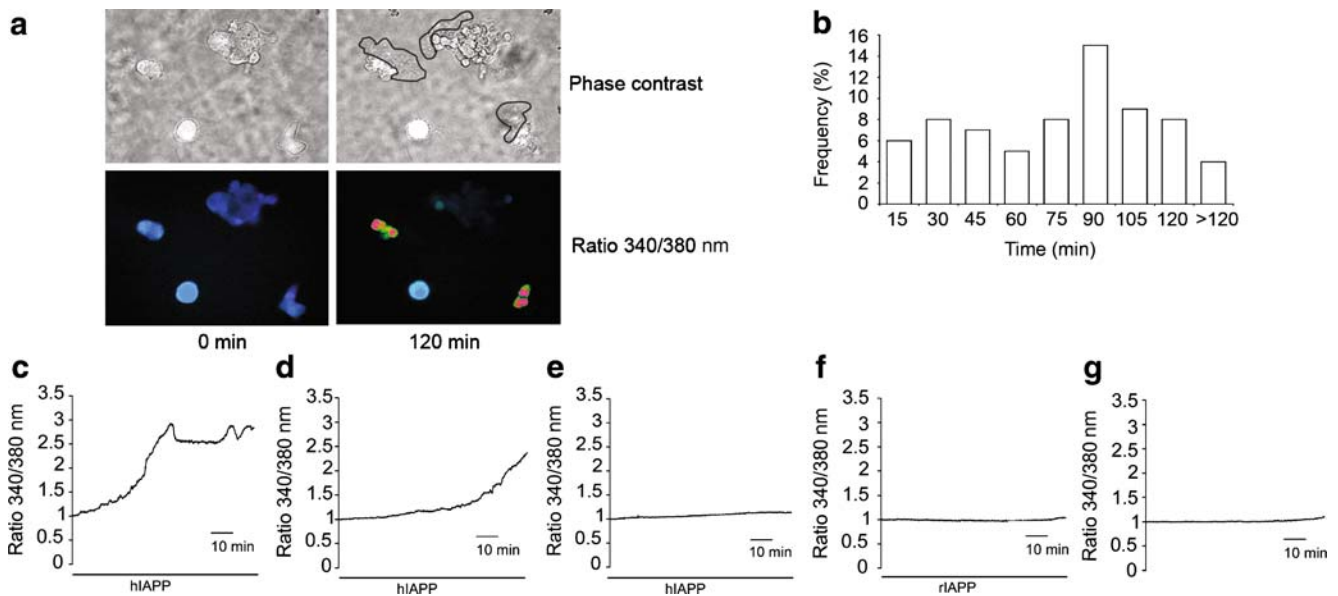


Fig. 2 Effect of human and rIAPP on $[Ca^{2+}]_i$ in MIN6 cells. **a** $[Ca^{2+}]_i$ was monitored for 2 h as the 340/380 nm fluorescence ratio in fura-2 loaded MIN6 cells. Treatment with 10 $\mu\text{mol/l}$ hIAPP led to the formation of insoluble aggregates (outlined) after 30–45 min and was associated with an increase in 340/380 nm fluorescence ratio. Image representative of 12 independent experiments from different cell preparations. Blue, basal $[Ca^{2+}]_i$; green to pink, elevate $[Ca^{2+}]_i$. **b** Frequency histogram of the latencies of Ca^{2+} responses in the 21.3% of hIAPP-treated MIN6 cells that exhibited a rise in the 340/380 nm fluorescence ratio ($n=328$ cells, 12 independent experiments). Latency was measured as the time to achieve a 1.4-fold increase in fluorescence ratio. Latencies were binned into 15 min intervals, and

are labelled with the time at the end of the respective 15 min period. **c–e** Representative traces of early responsive (<60 min) (**c**), late responsive (>60 min) (**d**) and unresponsive (**e**) MIN6 cells treated with 10 $\mu\text{mol/l}$ hIAPP. Traces are representative of 12 independent experiments from different cell preparations ($n=328$). **f** No appreciable increase in 340/380 nm fluorescence ratio was observed in MIN6 cells treated with 10 $\mu\text{mol/l}$ rIAPP. The trace is representative of two independent experiments from different cell preparations ($n=128$). **g** $[Ca^{2+}]_i$ monitored in MIN6 cells in buffer without IAPP. The trace is representative of four independent experiments from different cell preparations ($n=87$)

cells (2%) showing a fluorescence ratio change of >1.4-fold (Fig. 3b). This may be explained by Na^+/Ca^{2+} exchangers operating in reverse when extracellular Na^+ is removed, resulting in persistent Ca^{2+} influx, as described previously in beta cells [39]. Removal of extracellular Na^+ did not, however, prevent the larger calcium responses to hIAPP, which were observed in 8% of cells (7/85, $p<0.01$ compared with Na^+ -free buffer alone; Fig. 3c,d). Interestingly, however, in Na^+ -free buffer, nifedipine was no longer able to abolish hIAPP-triggered calcium responses, which were still observed in 8% of cells (13/154: not significantly different from the response rate with hIAPP in Na^+ -free buffer alone) (Fig. 3e). This suggests that under Na^+ -free conditions, hIAPP activates a Ca^{2+} influx pathway distinct from the opening of L-type Ca^{2+} channels.

The results raised the possibility that a non-voltage-dependent Ca^{2+} channel, such as a transient receptor potential (TRP) channel, might be implicated in responses to hIAPP, and we speculated that a mechanosensitive member of the TRP channel family might play a role. To test this hypothesis, we first investigated the effect of the relatively non-specific TRP channel inhibitor, gadolinium (Gd^{3+} , 100 $\mu\text{mol/l}$). In support of our hypothesis, addition of Gd^{3+} , in the presence of Na^+ -free buffer and nifedipine, abolished the calcium responses

to hIAPP (0.3% responders, 1/311 cells, $p<0.001$ compared with hIAPP in Na^+ -free buffer without Gd^{3+} ; Fig. 3f).

We next examined our microarray database [40] for mechanosensitive TRP channels expressed in MIN6 cells, and the search identified the Ca^{2+} -permeable channel *Trpv4* as a possible candidate. To investigate the potential role of TRPV4, we tested the effect of ruthenium red (RR), a general inhibitor of TRPV channels. In both standard buffer and Na^+ -free buffer, RR (10 $\mu\text{mol/l}$) abolished the effect of hIAPP on $[Ca^{2+}]_i$ (only 0.6% of cells responded in the standard bath and 1% responded in Na^+ -free buffer, $p<0.001$ compared with hIAPP in standard or Na^+ -free buffer without RR, respectively; Fig. 3g,h).

By electron microscopy, we observed that hIAPP aggregates interacted with the cell membrane of MIN6 cells early after treatment (Fig. 4a). In these regions, the plasma membrane became irregular and exhibited membrane protrusions, which were clearly evident after 2 h. hIAPP-induced membrane changes were also observed in the presence of RR, indicating that the effect of RR was not to prevent membrane changes or fibril formation (Fig. 4a).

To study the downstream effect of hIAPP cytotoxicity, we measured apoptosis by FACS analysis, assessing staining for both PI and annexin-V. Cells incubated for 24 h in the

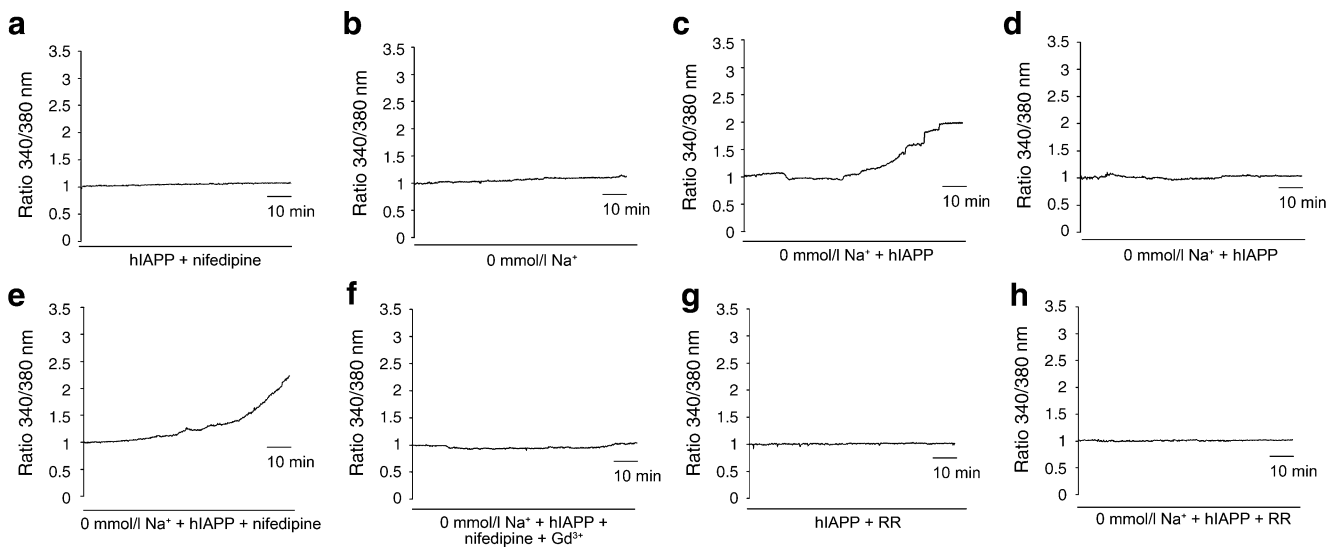


Fig. 3 Effect of Na^+ , nifedipine, Gd^{3+} and RR on $[\text{Ca}^{2+}]_i$ changes induced by 10 $\mu\text{mol/l}$ hIAPP in MIN6 cells. **a** No appreciable increase in $[\text{Ca}^{2+}]_i$ was observed in MIN6 cells treated with 10 $\mu\text{mol/l}$ hIAPP and 5 $\mu\text{mol/l}$ nifedipine for 2 h. The trace is representative of four independent experiments from different cell preparations ($n=198$). **b** In Na^+ -free buffer, $[\text{Ca}^{2+}]_i$ was stable for 2 h in 97.9% (183/187) of MIN6 cells in the absence of hIAPP. The trace is representative of four independent experiments from different cell preparations ($n=187$). **c**, **d** In Na^+ -free buffer, 10 $\mu\text{mol/l}$ hIAPP treatment increased $[\text{Ca}^{2+}]_i$ in 8.2% of MIN6 cells (7/85). Representative traces of a responsive (**c**) and a non-responsive (**d**) cell are shown, taken from two independent experiments on different cell preparations ($n=85$). **e** In Na^+ -free buffer, administration of 5 $\mu\text{mol/l}$ nifedipine could not prevent the

increases in $[\text{Ca}^{2+}]_i$ triggered by 10 $\mu\text{mol/l}$ hIAPP, which were still observed in 8.4% of MIN6 cells (13/154). The trace is representative of a responsive cell taken from two independent experiments on different cell preparations ($n=154$). **f** In Na^+ -free buffer, $[\text{Ca}^{2+}]_i$ was stable in 99.7% of cells (310/311) when 100 $\mu\text{mol/l}$ Gd^{3+} was added in the presence of 10 $\mu\text{mol/l}$ hIAPP and 5 $\mu\text{mol/l}$ nifedipine. The trace is representative of three independent experiments from different cell preparations ($n=311$). **g**, **h** In the presence of 10 $\mu\text{mol/l}$ RR and 10 $\mu\text{mol/l}$ hIAPP, $[\text{Ca}^{2+}]_i$ remained stable in 99.4% of MIN6 cells (340/342) in standard bath solution (**g**), and in 98.8% of cells (169/171) in Na^+ -free buffer (**h**). Traces are representative of four independent experiments from different cell preparations in each buffer

presence of hIAPP exhibited only 68% viability compared with control cells (compared with 93% viability using rIAPP; Fig. 4b). Addition of RR in the presence of hIAPP improved cell viability to 79% ($p=0.006$), representing a 45% reduction in hIAPP-induced cell death (Fig. 4b). We next investigated whether we could confirm the key observed effects of RR on hIAPP cytotoxicity in primary cultures of mouse pancreatic islets (Fig. 4d). After 72 h treatment with or without 10 $\mu\text{mol/l}$ hIAPP, islets were disaggregated in single cells before viability was analysed by FACS. Cell viability in treated islets decreased significantly to 22% compared with 73% in the controls ($p<0.001$; Fig. 4c). Treatment with RR in the presence of hIAPP improved islet cell viability to 45% ($p<0.05$), representing a 52% reduction in hIAPP-induced apoptosis (Fig. 4c).

We further evaluated the potential involvement of TRPV4 in hIAPP-triggered calcium changes and apoptosis using siRNA technology. By RT-PCR, we detected *Trpv4* expression in MIN6 cells, as well as liver, testis and pancreas (Fig. 5a). Transient transfection of MIN6 cells with siRNA against *Trpv4* (siTrpv4) decreased expression of *Trpv4*, as assessed by RT-PCR, whereas the control siRNA against *Amy2* (siAmy2) had no effect on *Trpv4* expression (Fig. 5b). When fura-2-loaded, siAmy2-treated MIN6 cells were

incubated in hIAPP for 2 h, elevation of the 340/380 nm fluorescence ratio was detected in 10% of cells (14/156), whereas siTrpv4-treated cells showed a significant protection against hIAPP-induced $[\text{Ca}^{2+}]_i$ elevation (1% responders, 2/229 cells, $p<0.001$ compared with siAmy2; Fig. 5c,d).

We also investigated whether silencing the *Trpv4* gene had a protective effect on hIAPP-induced apoptosis, by measuring cell viability and apoptosis after 24 h of hIAPP treatment. Cell viability was ~78% in control cells transfected with either siAmy2 or siTrpv4. Whilst hIAPP reduced viability in the control siAmy2 cells to 26%, it only decreased viability to 52% in the siTrpv4 cells ($p=0.002$ for comparison between siAmy2 and siTrpv4 cells each treated with hIAPP). This represents a 50% reduction in hIAPP-triggered cell death in the cells with reduced expression of *Trpv4* (Fig. 5e).

Recent findings revealed that the hIAPP-triggered calcium elevation and apoptosis in MIN6 cells were associated with activation of the ER stress response [22]. To attempt to distinguish between the possibilities that hIAPP-induced ER stress might be either a trigger for, or a consequence of, the observed $[\text{Ca}^{2+}]_i$ changes, we assessed the degree of ER stress in siTrpv4-treated cells, as these exhibited significantly reduced hIAPP-triggered $[\text{Ca}^{2+}]_i$ changes. ER stress was quantified by measuring the activation of *Xbp1*. The

spliced active form of *Xbp1* encodes a key transcription factor for upregulation of ER chaperones during ER stress responses [41], and has been shown to be important for maintenance of pancreatic beta cell ER function [42]. Splicing of *Xbp1* mRNA in MIN6 cells under control conditions was

$23\pm 2\%$ of the total *Xbp1* (Fig. 5f). Exposure of siAmy2-treated cells to $10\ \mu\text{mol/l}$ hIAPP for 2 h significantly increased the levels of s*Xbp1* to $41\pm 3\%$ ($p<0.05$ vs basal condition), whereas no increment was observed in cultures treated with siTrpv4 ($21\pm 2\%$ of total *Xbp1*; Fig. 5f). Twenty-

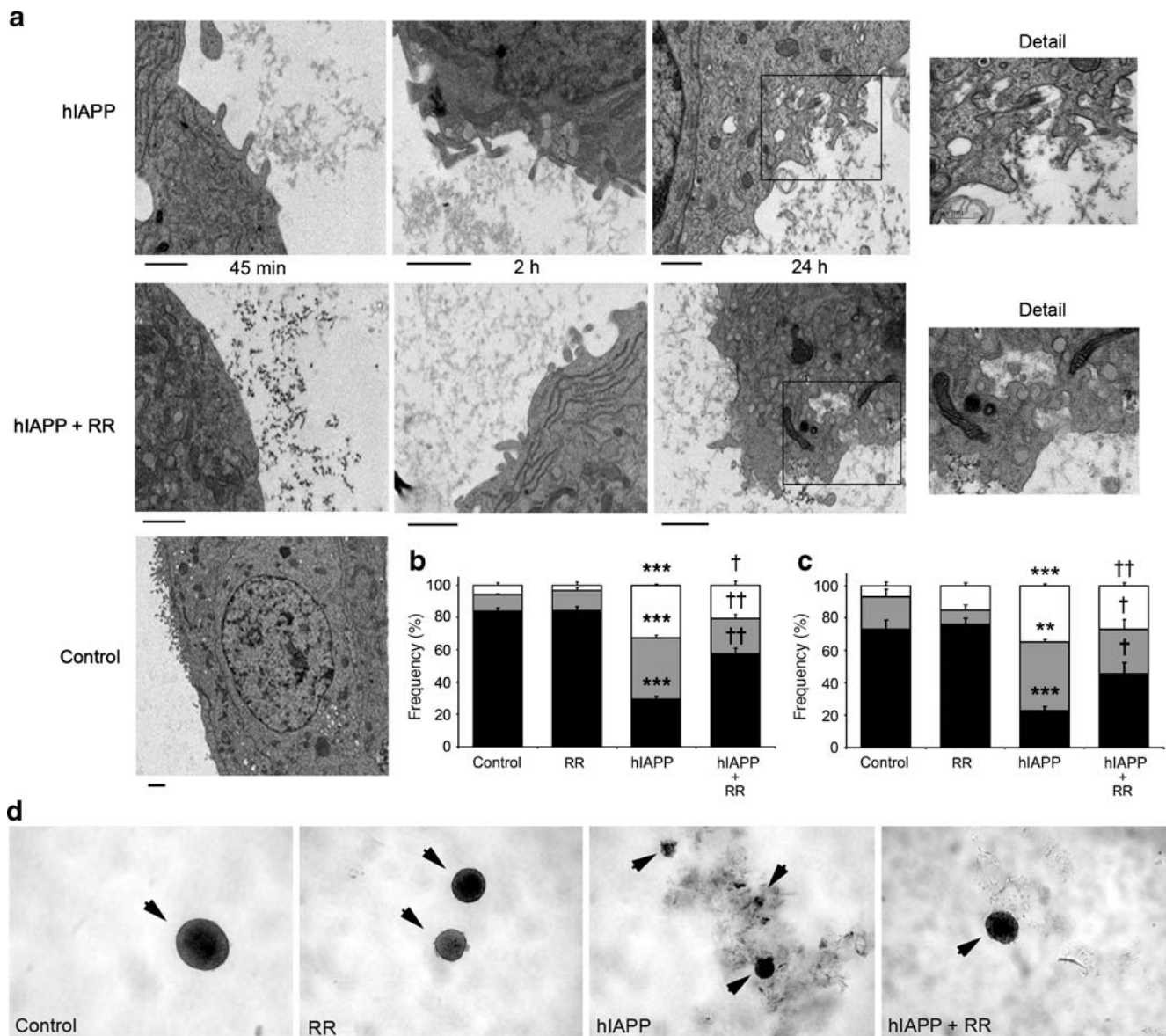


Fig. 4 Effect of $10\ \mu\text{mol/l}$ RR on cell morphology and viability induced by $10\ \mu\text{mol/l}$ hIAPP in MIN6 cells. **a** MIN6 cells treated with $10\ \mu\text{mol/l}$ hIAPP were studied over time by electron microscopy. Images revealed that extracellular hIAPP insoluble forms were in close contact with the plasma membrane of MIN6 cells. In these regions, the plasma membrane became irregular, and at 24 h deep invaginations were observed in both the absence and presence of $10\ \mu\text{mol/l}$ RR. The scale bar represents $1\ \mu\text{m}$ in each image. **b** Apoptosis assay of MIN6 cells treated for 24 h with $10\ \mu\text{mol/l}$ hIAPP and/or $10\ \mu\text{mol/l}$ RR, as indicated, measured by annexin V-FITC plus PI staining and FACS analysis. Bars show the percentages of cells that were viable (black bars), early apoptotic (grey bars) or late apoptotic/dead (white bars). Results are means \pm SEM ($n=6$). *** $p<0.001$ compared with control;

$\dagger p<0.01$ and $\dagger\dagger p<0.001$ compared with $10\ \mu\text{mol/l}$ hIAPP. **c** Apoptosis assays were performed on dispersed islet cells following treatments as above, by staining with annexin V-FITC plus PI and analysis by FACS. Bars show the percentages of cells that were viable (black bars), early apoptotic (grey bars) or late apoptotic/dead (white bars). Results are means \pm SEM ($n=6$). ** $p<0.01$ and *** $p<0.001$ compared with control; $\dagger p<0.05$ and $\dagger\dagger p<0.01$ compared with $10\ \mu\text{mol/l}$ hIAPP. **d** Mouse pancreatic islets (arrowheads) were cultured for 72 h with $10\ \mu\text{mol/l}$ hIAPP and/or $10\ \mu\text{mol/l}$ RR, as indicated. Treatment with $10\ \mu\text{mol/l}$ hIAPP led to the formation of insoluble aggregates in contact with islet borders. Note the disintegration of the islet shape in islets incubated with hIAPP vs controls. Representative images ($\times 10$ magnification)

four hours after treatment, the increase of *sXbp1* product had returned to near basal levels in siAmy2- and remained normal in siTrpv4-treated cells ($30\pm 4\%$ and $21\pm 0.4\%$, respectively; Fig. 5f). We also studied the expression level of *Hsp90b1*, which encodes a resident ER luminal molecular chaperone, known to be elevated by the activity of *sXbp1* as a consequence of ER stress [41]. siAmy2-treated cells incubated in the presence of hIAPP showed significantly increased expression of *Hsp90b1* after both 2 and 24 h ($p=0.02$ and $p=0.01$ at 2 and 24 h, compared with untreated siAmy2 cells). In cells treated with siTrpv4 and incubated with hIAPP, expression of *Hsp90b1* was normal at 2 and 24 h (Fig. 5g). These data represent a significant reduction in hIAPP-triggered ER stress in the cells with reduced expression of *Trpv4* (Fig. 5f,g), which is in agreement with the observed protection against hIAPP-triggered cell death (Fig. 5e).

Discussion

Our results show that hIAPP triggers calcium changes in a model of the pancreatic beta cell, the MIN6 cell line. Calcium elevation was progressive and severe, and frequently resulted in cell detachment. The calcium changes corresponded in time with the appearance of hIAPP aggregates in the solution, alterations in the surface membrane morphology, and a reduction in cell viability. Pharmacological and siRNA experiments suggested that activation of both TRPV4 and L-type calcium channels contributed to the hIAPP-triggered calcium rise.

The synthetic IAPP peptide concentration used in the present study is within the range of concentrations used in the literature to spontaneously form IAPP oligomers and fibrils in culture [6, 9, 16, 22]. In type 2 diabetes mellitus, IAPP fibrils are often found accumulated between beta cells

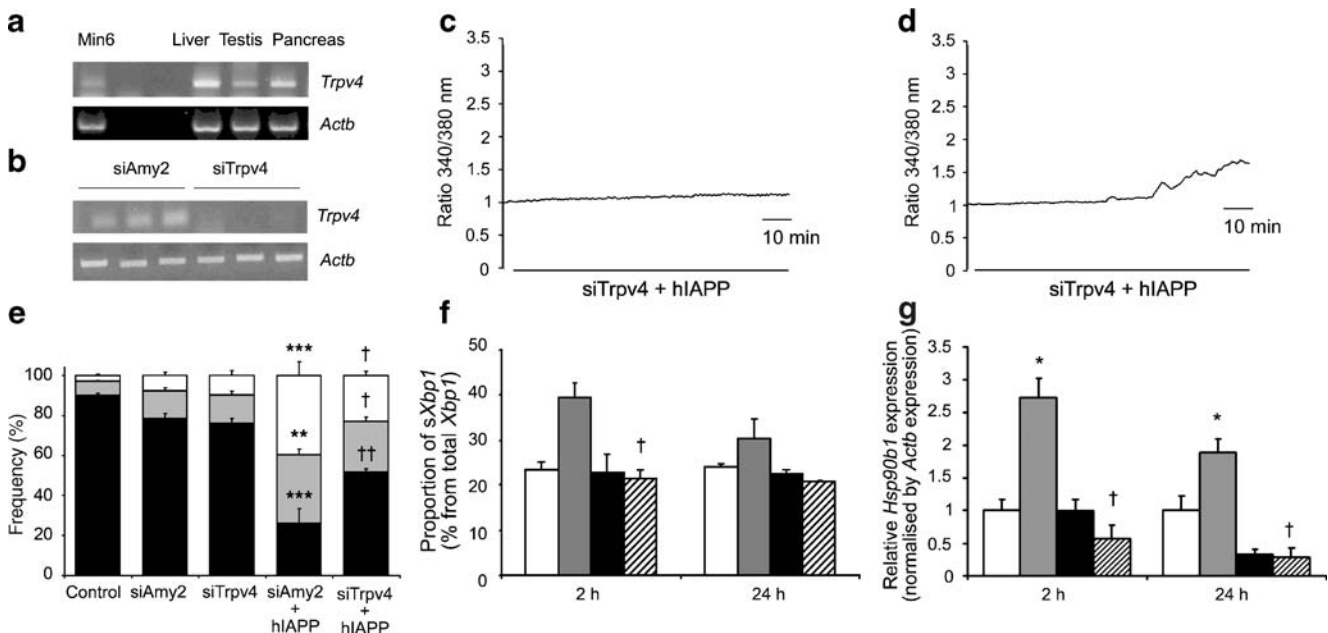


Fig. 5 Expression of *Trpv4* and protective effects of siTrpv4 in the presence of $10\ \mu\text{mol/l}$ hIAPP. **a** Representative electrophoresis gel images showing PCR amplification products corresponding to *Trpv4* and *Actb* expression in MIN6 cells and mouse liver, testis and pancreas. **b** siRNA duplexes for mouse *Trpv4* were transfected into MIN6 cells at $170\ \text{nmol/l}$. After 48 h, cells were treated with or without $10\ \mu\text{mol/l}$ hIAPP for a further 24 h. Cells treated with siAmy2 were used as a negative control. Representative electrophoresis gel images showing PCR amplification products corresponding to *Trpv4* and *Actb* expression in MIN6 cells following siRNA treatments. **c, d** In the presence of $10\ \mu\text{mol/l}$ hIAPP for 2 h, $[\text{Ca}^{2+}]_i$ remained stable in 99% (229/231) of siTrpv4-transfected MIN6 cells (**c**), but increased in 10% (14/156) of siAmy2-transfected MIN6 cells (**d**). Traces are representative of five independent experiments from different cell preparations in each condition. **e** Apoptosis assay performed on MIN6 cells transfected with siAmy2 or siTrpv4, and treated for 24 h with or without $10\ \mu\text{mol/l}$ hIAPP compared with control (non-transfected, untreated cells). Cells were stained with annexin V-FITC plus PI and analysed by FACS. Bars show the percentages of cells that were viable

(black bars), early apoptotic (grey bars) or late apoptotic/dead (white bars). Results are means \pm SEM ($n=6$). ** $p<0.01$ and *** $p<0.001$ compared with siAmy2; $\dagger p<0.05$ and $\dagger\dagger p<0.01$ compared with siAmy2 with $10\ \mu\text{mol/l}$ hIAPP. **f** RT-PCR analysis of *Xbp1* splicing was performed on MIN6 cells transfected with siAmy2 or siTrpv4, and treated with or without $10\ \mu\text{mol/l}$ hIAPP for 2 and 24 h using primers flanking the intron excised from mouse *Xbp1* mRNA. The percentages of *sXbp1* to total *Xbp1* determined by densitometry are illustrated. siAmy2 control (white bars), siAmy2 plus hIAPP (grey bars), siTrpv4 control (black bars), siTrpv4 plus hIAPP (diagonal stripes). Data are means \pm SEM ($n=6$); * $p<0.05$ compared with siAmy2; $\dagger p<0.05$ compared with siAmy2 with $10\ \mu\text{mol/l}$ hIAPP. **g** Induction of *Hsp90b1* expression, a marker of ER stress, measured by real-time quantitative RT-PCR on MIN6 cells transfected with siAmy2 or siTrpv4, and treated with or without $10\ \mu\text{mol/l}$ hIAPP for 2 and 24 h. siAmy2 control (white bars), siAmy2 plus hIAPP (grey bars), siTrpv4 control (black bars), siTrpv4 plus hIAPP (diagonal stripes). Results are means \pm SEM ($n=6$). * $p<0.05$ compared with siAmy2; $\dagger p<0.01$ compared with siAmy2 with $10\ \mu\text{mol/l}$ hIAPP

and islet capillaries [2, 35–37], indicating that there may be insufficient clearance of secreted IAPP, and making it technically difficult to estimate in vivo the IAPP concentrations that accumulate locally throughout the years of disease progression. Nevertheless, we showed here that the ultrastructural morphology of MIN6 cells in the amyloidogenic conditions was characterised by plasma membrane alterations compared with the control cells. These alterations included cell membrane irregularities and invaginations filled with fibrils, similar to those described in human islets from type 2 diabetes mellitus patients [2, 35–37].

Amyloid oligomers (including hIAPP) have been reported to increase $[Ca^{2+}]_i$ in neurons and astrocytes [23–27], although the effect of hIAPP on pancreatic beta cells is not well documented. We showed recently that increases in $[Ca^{2+}]_i$ could be detected in hIAPP-treated MIN6 cells, with associated activation of the ER stress response and induction of apoptosis [22]. An earlier study, by contrast, suggested that hIAPP does not trigger changes in $[Ca^{2+}]_i$ in insulinoma cells [43], but the conclusions were derived from measurements of $[Ca^{2+}]_i$ in cell populations, which might have excluded any non-attached cells. Our finding that individual MIN6 cells detached soon after experiencing an hIAPP-triggered Ca^{2+} rise might explain the previous failure to detect Ca^{2+} changes in insulinoma cells.

The mechanisms previously implicated in calcium responses to amyloid oligomers in other cell types and cell-free systems include direct formation of Ca^{2+} -permeable pores by the amyloid oligomers themselves and the activation of voltage-gated calcium channels [28, 34]. Amyloid pores are unlikely to underlie our findings in MIN6 cells, as the Ca^{2+} changes were inhibited by nifedipine, Gd^{3+} and RR, none of which has been found to block amyloid channels. The inhibition of hIAPP-triggered Ca^{2+} responses by nifedipine in MIN6 cells indicated, however, that L-type Ca^{2+} channels were activated by hIAPP, either as a result of changes in the properties of the L-type Ca^{2+} channels themselves, or as a secondary consequence of membrane depolarisation. The latter idea is supported by the findings in Na^+ -free buffer, as an additional nifedipine-insensitive Ca^{2+} -elevating pathway was identified under these conditions. This was found to be blocked by Gd^{3+} or RR, indicating the likely involvement of specific members of the TRP channel family. siRNA mediated knockdown of the mechanosensitive TRP channel, TRPV4, protected against the toxic effects of hIAPP on $[Ca^{2+}]_i$ as well as on induction of ER stress and apoptosis. Our subsequent *Trpv4* knockdown experiments, using loss of cell viability as a marker of hIAPP-induced apoptosis, supported the notion that activation of this channel may be an early response to hIAPP.

TRPV4 is a mechano- and osmosensitive channel located on the cell surface, with a Ca^{2+}/Na^+ permeability ratio of ~6 [44], which is inhibited by Gd^{3+} and RR, and is not blocked

by 2-aminoethyl diphenylborinate (2-APB). The observed morphological deformations in the plasma membrane following hIAPP treatment suggest that the deposition of hIAPP insoluble aggregates, which can reach high molecular masses [45], might weaken the mechanical strength of the plasma membrane, making it susceptible to TRPV4 activation. We propose that it may provide a link between hIAPP-induced mechanical perturbations of the beta cell plasma membrane by hIAPP and the depolarising Ca^{2+} influx. The finding that siTrpv4 protected against both hIAPP-induced ER stress and $[Ca^{2+}]_i$ changes suggests that this channel is involved at a step that precedes the ER stress response, perhaps at the level of $[Ca^{2+}]_i$ modulation. However, as RR did not protect completely against amyloid cytotoxicity, our data cannot exclude the additional involvement of other early mechanisms in the induction of islet amyloid cytotoxicity. Activation of TRPV4 may play a more widespread role in mediating some of the effects of amyloid on $[Ca^{2+}]_i$ that have been previously described in the literature. Amyloid-induced Ca^{2+} entry has, for example, been attributed to activation of channels with a relatively high selectivity for Ca^{2+} over Na^+ [46], which are insensitive to L-type Ca^{2+} channel blockers [26]. The potential involvement of TRPV4 and alternative mechanosensitive channels in mediating amyloid-induced Ca^{2+} changes, ER stress and apoptosis in other cell types will require further evaluation.

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Duality of interest The authors declare that there is no duality of interest associated with this manuscript.

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