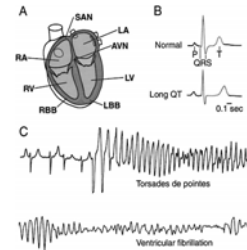


## Regulation of Ion Channels by Drugs and Hormones

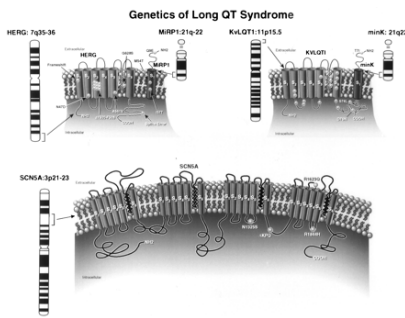
- Roles of local signaling complexes
- Lessons from Investigation of Human Disease
- Pharmacology Unique to Voltage-Gated Ion channels

## Adrenergic Regulation of Cardiac Electrical Activity: Lessons from Human Disease

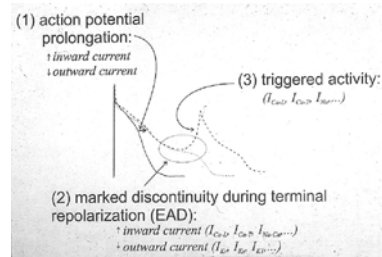


Keating & Sanguinetti, Cell, 2001.

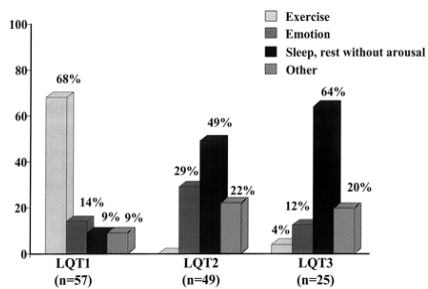
## LQTS: Genetic Linkage to Multiple Ion Channel Genes



## AP Prolongation Can Trigger Arrhythmias

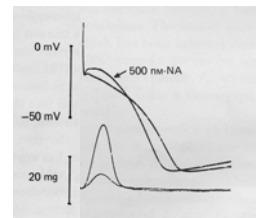


## Triggers Are Gene-specific



Circ 2001;103:89-95

## $\beta$ -Adrenergic Stimulation Shortens AP Duration

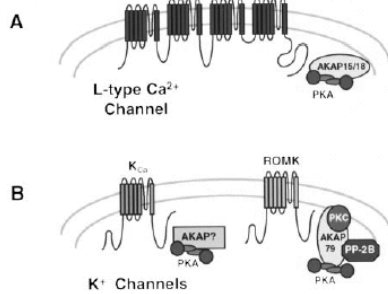
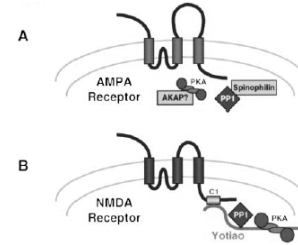


(Kass & Wiegner, J Physiol. 1982)

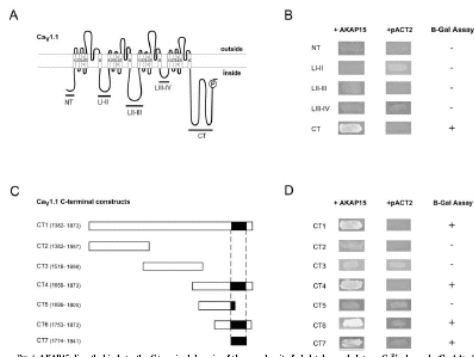


## Adaptor Proteins:

Molecular Basis for Receptor/Substrate  
Diversity: Channel as  
**Macromolecular Complexes**



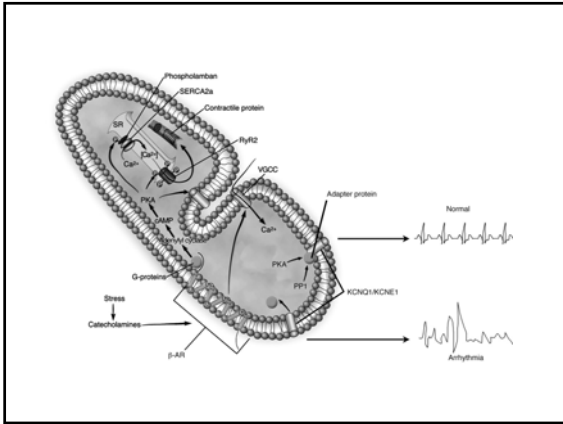
## Calcium Channel Complex



## Channels as **Macromolecular** Signaling Complexes

- Signaling **Microdomains** expand diversity of receptor-mediated cellular responses
- Disruption of **Microdomains** in disease can unbalance physiological responses



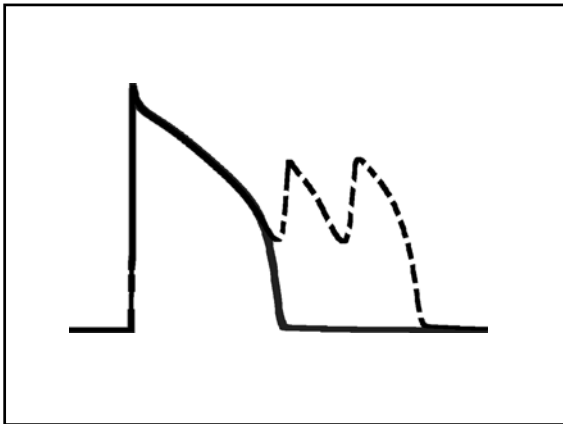


## AP Prolongation Can Trigger Arrhythmias

(1) action potential prolongation:  
↑ inward current  
↓ outward current

(2) marked discontinuity during terminal repolarization (EAD):  
↑ inward current ( $I_{CaL}$ ,  $I_{CaT}$ ,  $I_{Kr}$ ,  $I_{K1}$ )  
↓ outward current ( $I_{K1}$ ,  $I_{Kr}$ ,  $I_{K1}$ )

(3) triggered activity:  
( $I_{CaL}$ ,  $I_{CaT}$ ,  $I_{Kr}$ )



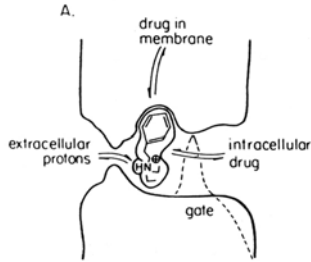
## State-dependent Block of Ion Channels by drugs

- The Modulated Receptor Hypothesis
- Hille, B. (1977). Local anesthetics: hydrophilic and hydrophobic pathways for the drug-receptor reaction. *Journal of General Physiology* **69**, 497-515.

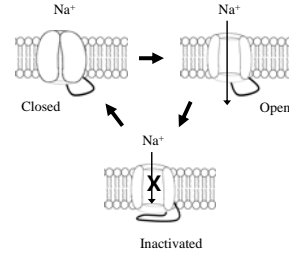
### Sodium and Calcium Channels are Targets of Voltage-Regulated Drugs

Fig. 3 Structural model of L-type  $Ca^{2+}$  channel from skeletal muscle. Left: ribbon structure of L-type  $Ca^{2+}$  channel from skeletal muscle transverse tubules as determined from biochemical studies.  $\beta$ , phosphorylation site. Below: proposed binding patterns of the polypeptide components of the skeletal muscle  $Ca^{2+}$  channel as predicted from the amino acid sequences deduced from cDNA cloning and sequencing. Recognition sites of three anti-peptide antibodies directed against amino acid sequences beginning at residues 1025, 1329 and 1382 are indicated (boxes). See Ref. 11 for ref. details.

Drug Ionization Restricts Access to Drug Receptor



Na<sup>+</sup> channel open state inactivation

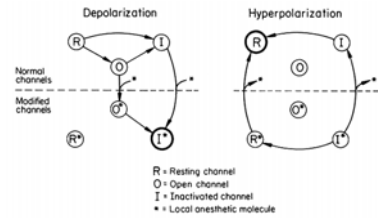


## Use-Dependent Block

- Pulse-dependent channel availability depends on recovery from inactivation;
- Drug-Bound Channels recovery slower than drug-free channels;
- Channels are not available for excitation when drug-bound.

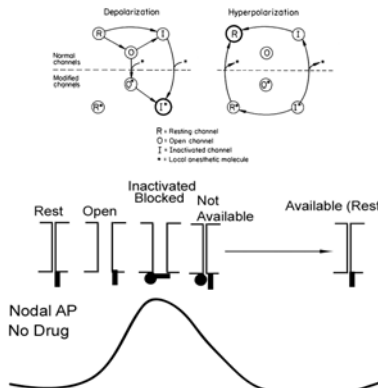
Drug binding is influenced by the state of the channel:

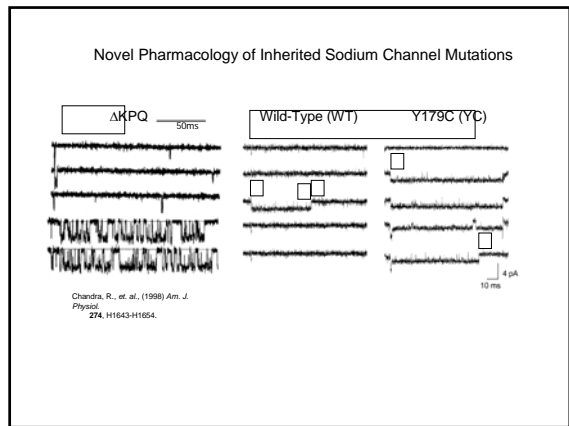
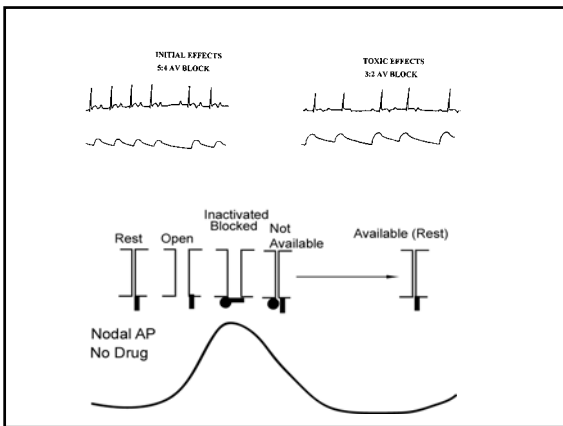
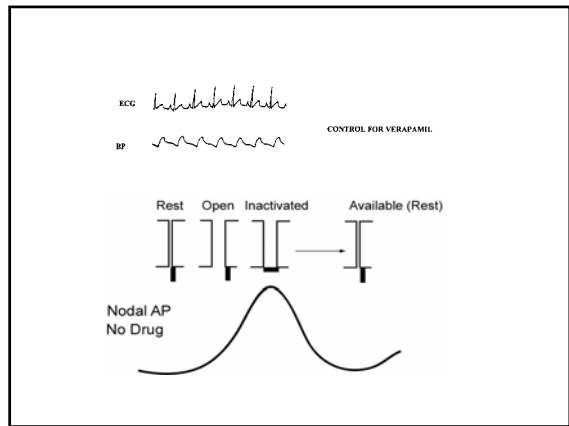
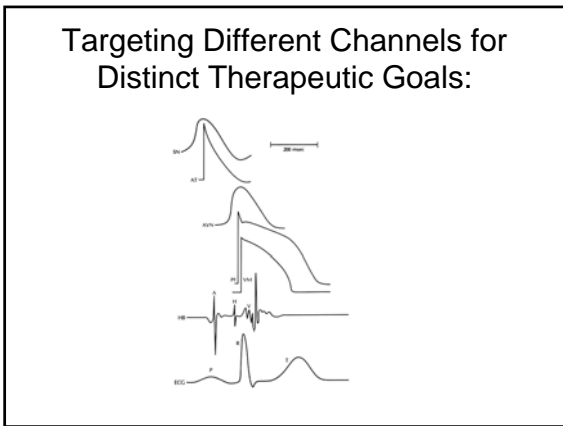
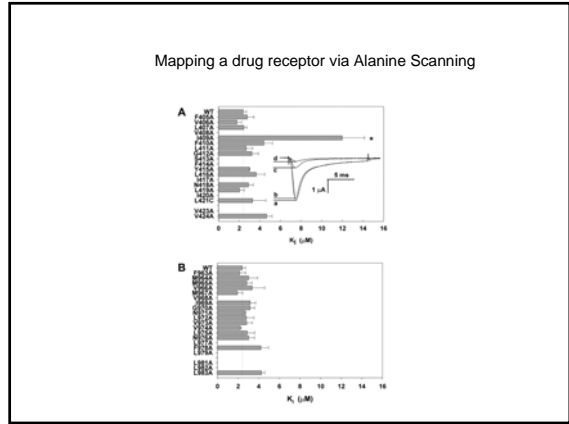
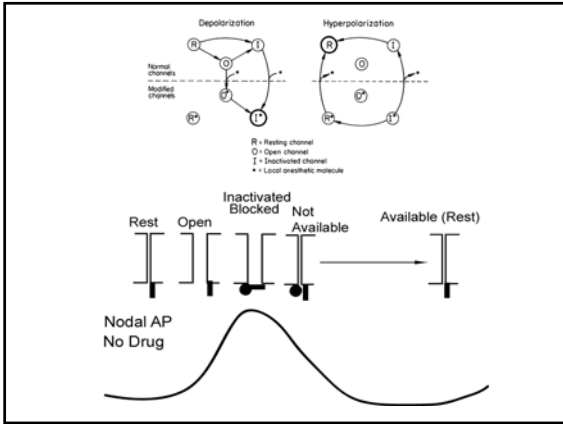
### Preferential binding to and Stabilization of the Inactivated State



## Block Develops During Repetitive electrical Activity

- Block During Depolarization (systole)
- Unblock During Repolarization (Diastole)





The Local Anesthetic Receptor for Voltage-Gated Sodium Channels

