

## COMMENTARY

# Can bethanechol distinguish between different muscarinic signalling pathways in neurones?

\*<sup>1</sup>Andrew Constanti<sup>1</sup>Department of Pharmacology, The School of Pharmacy, 29/39 Brunswick Square, London WC1N 1AX*British Journal of Pharmacology* (2003) **138**, 1185–1187. doi:10.1038/sj.bjp.0705158**Keywords:** Bethanechol; Muscarinic receptors; Calcium channels; G-proteins; Superior cervical ganglion; Neuronal signal transduction**Abbreviations:** BAPTA, 1,2-bis(*o*-aminophenoxy)ethane-*N,N,N',N'*-tetraacetic acid; BeCh, Bethanechol; OXO-M, Oxotremorine-M; PTX, Pertussis toxin; SCG, Superior cervical ganglion

The reversible modulation of certain types of voltage-dependent  $\text{Ca}^{2+}$  currents in peripheral and central neurones by activation of muscarinic (acetylcholine) and other various G-protein coupled receptors has been known for some considerable time (Wanke *et al.*, 1987; Carbone & Swandulla, 1989; Toselli & Lux, 1989). However, the signal transduction pathways that link such receptor activation to the modulation of  $\text{Ca}^{2+}$  channels still remain rather elusive. Since intracellular  $\text{Ca}^{2+}$  is involved in such a multitude of important neuronal functions, that is, neurotransmitter release, control of calcium-dependent enzymes, neuronal development (Linden, 1994), as well as influencing the expression (e.g. Ginty, 1997; Kobayashi *et al.*, 2002), and properties of other voltage-sensitive and ligand-gated ion channels involved in controlling membrane excitability, it is quite understandable why so much interest has been devoted over the years, to the elucidation and understanding of such receptor-regulated G-protein signalling pathways, and also, the molecular mechanisms by which  $\text{Ca}^{2+}$  channel modulation actually occurs. The quest is made even more interesting in the light of recent data showing that  $\text{Ca}^{2+}$  current modulation by neurotransmitters may show different characteristics in different neuronal compartments (e.g. dendrites; Delmas *et al.*, 2000), suggesting a specialized function of  $\text{Ca}^{2+}$  signalling in important processes such as synaptic integration and long-term synaptic plasticity (for reviews, see Magee *et al.*, 1998; Weiss & Burgoyne, 2002).

The adult rat superior cervical ganglion (SCG) neurone has proved a robust and convenient model system for studying signalling cascades linked to  $\text{Ca}^{2+}$  current ( $I_{\text{Ca}}$ ) inhibition. Based on such experiments, it is now clear that concentration-dependent, muscarinic suppression of  $\text{Ca}^{2+}$  channel activity in these cells (mainly N- and L-type; Mathie *et al.*, 1992) occurs by both rapid- and slow-onset processes; the former (N-type) is sensitive to pertussis toxin (PTX) and acts through a voltage-dependent, membrane-delimited pathway linked to muscarinic  $\text{M}_2/\text{M}_4$  receptors (via a  $\text{GoA}$ -type G protein), whereas the latter (N- and L-type) is PTX-insensitive, voltage-independent and utilizes an unknown diffusible cytoplasmic second

messenger (not  $\text{Ca}^{2+}$ , cAMP, cGMP, or protein kinase C) linked to  $\text{M}_1$  receptors (via a  $\text{G}_{\alpha_q}$  G protein) (Bernheim *et al.*, 1991, 1992; Hille, 1994; Hille *et al.*, 1995; Delmas *et al.*, 1998). The cytoplasmic messenger nevertheless, appears to be partly  $\text{Ca}^{2+}$ -dependent and partly sensitive to the internal divalent cation chelator 1,2-bis(*o*-aminophenoxy)ethane-*N,N,N',N'*-tetraacetic acid (BAPTA; in whole-cell patch experiments), since a low (0.1 mM) BAPTA, concentration in the recording pipette is necessary to see the response (Beech *et al.*, 1991; Mathie *et al.*, 1992). A fast PTX-insensitive pathway may also be present in adult ganglia (Beech *et al.*, 1992), possibly coupled to a  $\text{G}_{\alpha_z}$ -type G protein subunit (Jeong & Ikeda, 1998; see also Delmas *et al.*, 1998). The 'fast' PTX-sensitive pathway exhibits two further characteristic properties: voltage-dependence – manifested as a temporary relief of muscarinic  $I_{\text{Ca}}$  blockade following a positive conditioning prepulse (cf. Elmslie *et al.*, 1990; Williams *et al.*, 1998), and possibly mediated by a G-protein-dependent blocking particle (Lopez & Brown, 1991), and 'kinetic slowing', seen as a significant slowing of  $I_{\text{Ca}}$  activation kinetics and positive shift in voltage dependence of  $\text{Ca}^{2+}$  channels most likely because of the direct binding of 'free' G-protein  $\beta\gamma$  subunits to the N-type  $\text{Ca}^{2+}$  channels (the 'willing-reluctant' model: Ikeda & Dunlap, 1999; Colecraft *et al.*, 2000).

Faced with such an extensive collection of existing data, can anything new be added to the already complex muscarinic  $I_{\text{Ca}}$  modulation story? To date, the two muscarinic signalling pathways in ganglia have been pharmacologically distinguished using established muscarinic receptor antagonists (Bernheim *et al.*, 1992) or by utilizing a muscarinic  $\text{M}_1$ – $\text{M}_4$  knockout approach in mice (Shapiro *et al.*, 2001). In this issue of the journal, Liu & Rittenhouse (2003) present some new data showing that a clean discrimination between the signalling cascades can be made by using the conventional muscarinic agonist bethanechol (BeCh). The principal aim of their experiments was to establish whether the fast and slow muscarinic transduction mechanisms originally observed in adult SCG were present in *neonatal* SCG cells; using neonates allowed a better separation of the two signalling pathways, since the fast (membrane-delimited) PTX-insensitive component was absent in these cells (cf. Beech *et al.*, 1992). Whole-cell and cell-attached single channel recordings of

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N- and L-type  $\text{Ca}^{2+}$  currents were made under patch clamp from acutely dissociated neurones, using a protocol designed to optimize L-currents (addition of dihydropyridine L-type channel agonists to the bathing solution, and  $\text{Ba}^{2+}$  as charge carrier); also by raising or lowering the internal BAPTA concentration in their patch pipettes or pretreating cells with PTX, they could effectively isolate the slow diffusible second messenger pathway from the fast pathway in any given experiment. Under these conditions, the muscarinic agonist oxotremorine-M (OXO-M;  $0.01\text{--}100\text{ }\mu\text{M}$ ) was able to suppress both N- and L-type currents indiscriminately by activating either signalling pathway, thereby confirming their existence in the neonate. In contrast, BeCh (up to  $3\text{ mM}$ ) was unable to activate the slow (voltage-independent) pathway, but appeared selective for the fast membrane-delimited pathway. This was elegantly demonstrated in PTX-pretreated cells, whereupon the effects of BeCh (but not OXO-M) on N- and L-type currents were eliminated. Interestingly, despite high concentrations of either agonist, the maximal degree of current inhibition by the fast pathway was never greater than 60%, most likely reflecting some basal constitutive G-protein activity. In their concluding series of experiments, the authors showed that the effect of BeCh was not mediated via  $\text{M}_1$  or  $\text{M}_4$  muscarinic receptors (cf. adult SCG), since it was unaffected by the specific  $\text{M}_1$  toxin MT-7 (Adem & Karlsson, 1997) or by pirenzepine (acting here as an  $\text{M}_4$  antagonist in the presence of MT-7), respectively, but was blocked by the  $\text{M}_2$  antagonist methoctramine; the current inhibition by OXO-M, acting via the slow pathway, was however, abolished by MT-7, confirming it was  $\text{M}_1$  mediated (as in the adult).

BeCh, a  $\beta$ -methyl analogue of carbachol, was first synthesized and investigated in the 1930s (Heller Brown & Taylor,

1996). The apparent high selectivity of this agonist for  $\text{M}_2$  receptors in the SCG is therefore quite surprising, as the authors themselves admit, since (to my knowledge) no *absolute* selectivity for intact peripheral or central  $\text{M}_2$  receptors has previously been demonstrated. In this respect, it would have been interesting to know if other muscarinic agonists (e.g. methacholine, arecoline, pilocarpine, carbachol) could show a similar selectivity in their system. Nevertheless, their paper is novel in that it presents one long-established muscarinic agonist as a new tool for distinguishing between different muscarinic signalling pathways in neurones; whether BeCh exerts a similar selectivity towards  $\text{M}_2$  receptors on other neuronal preparations, however, remains to be seen.

On a final note, Beech *et al.*, (1991) drew attention to the fact that muscarinic suppression of the M-current ( $I_{\text{M}}$ ; a subthreshold voltage- and time-dependent  $\text{K}^+$  current; Brown & Adams, 1980) in SCG neurons also occurs via a slow BAPTA-sensitive modulatory pathway, implying that the same diffusible second messenger may be involved (see also Mathie *et al.*, 1992). Interestingly, only very recently, Suh & Hille (2002) proposed that the long sought-after 'mystery message' responsible for ganglionic muscarinic suppression of  $I_{\text{M}}$  was actually a *depletion* of membrane lipid phosphatidylinositol 4,5-bisphosphate ( $\text{PIP}_2$ ) following G-protein activation of phospholipase C (PLC), and that intracellular ATP and lipid rephosphorylation by phosphoinositide 4-kinase (PI 4-K) were required for  $I_{\text{M}}$  recovery from modulation. It will be interesting to see whether the same  $\text{PIP}_2$  recycling mechanism can also account for the slow voltage-independent muscarinic modulation of L- and N-type  $\text{Ca}^{2+}$  (and perhaps other) ion channels in sympathetic neurones.

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