Down-Regulation of Inwardly Rectifying Kir2.1 K⁺ Channels by Human Parvovirus B19 Capsid Protein VP1

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Abstract Parvovirus B19 (B19V) has previously been shown to cause endothelial dysfunction. B19V capsid protein VP1 harbors a lysophosphatidylcholine producing phospholipase A2 (PLA2). Lysophosphatidylcholine inhibits Na⁺/K⁺ ATPase, which in turn may impact on the activity of inwardly rectifying K⁺ channels. The present study explored whether VP1 modifies the activity of Kir2.1 K⁺ channels. cRNA encoding Kir2.1 was injected into Xenopus oocytes without or with cRNA encoding VP1 isolated from a patient suffering from fatal B19V-induced inflammatory cardiomyopathy or the VP1 mutant H153AVP1 lacking a functional PLA2 activity. K⁺ channel activity was determined by dual electrode voltage clamp. In addition, Na⁺/K⁺-ATPase activity was estimated from K⁺-induced pump current (I_{pump}) and ouabain-inhibited current (Iouabain). Injection of cRNA encoding Kir2.1 into Xenopus oocytes was followed by appearance of inwardly rectifying K^+ channel activity (I_K) , which was significantly decreased by additional injection of cRNA encoding VP1, but not by additional injection of cRNA encoding H153AVP1. The effect of VP1 on I_K was mimicked by lysophosphatidylcholine (1 μg/ml) and by inhibition of Na⁺/K⁺-ATPase with 0.1 mM ouabain. In the presence of lysophosphatidylcholine, I_{K} was not further decreased by additional treatment with ouabain. The B19V capsid protein VP1 thus inhibits Kir2.1 channels, an effect at least partially due

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to PLA2-dependent formation of lysophosphatidylcholine with subsequent inhibition of Na⁺/K⁺-ATPase activity.

Keywords Parvovirus B19 · Phospholipase A2 · Channels · Xenopus · ATPase

Introduction

Parvovirus B19 (B19V) leads to common infections (Brown et al. 1994b) with variable clinical features (Koch 2001; Lehmann et al. 2003; Pattison 1988) including ervthema infectiosum (fifth disease), hydrops fetalis, and transient aplastic anemia (Anderson et al. 1983; Young and Brown 2004), arthritis (Dingli et al. 2000; Trapani et al. 1999), hepatitis (Drago et al. 1999; Hillingso et al. 1998; Karetnyi et al. 1999; Sokal et al. 1998; Yoto et al. 1996), vasculitic syndromes (Corman and Dolson 1992; Finkel et al. 1994), neurological disorders (Yoto et al. 1996), and myocarditis (Brown et al. 1994a; Kuhl et al. 2003; Malm et al. 1993; Schowengerdt et al. 1997). B19V infection of cardiac endothelial cells may result in isolated left ventricular diastolic dysfunction (Tschope et al. 2005) and is an important pathogenic agent in the etiology of inflammatory cardiomyopathy (iCMP) (Bock et al. 2010). B19V infection may occur during pregnancy leading to maternal and fetal myocarditis, congenital malformations, stillbirth, and abortion (Brown 1989; Crane 2002; Katz et al. 1990; Over et al. 2000). The consequences of antenatal infections are particularly severe as B19V preferably enters proliferating cells (Telerman et al. 1993). B19V may enter cells by binding to blood group P-antigen (Brown et al. 1993), α5β1 integrin and Ku80 autoantigen (Munakata et al. 2005; Weigel-Kelley et al. 2003). B19V, thus, preferably invades erythroid progenitor cells but may enter fetal myocytes,



follicular dendritic cells, and endothelial cells (Brown et al. 1993; Ellis et al. 2003; Munakata et al. 2005; Weigel-Kelley et al. 2003). In fatal iCMP, the virus was particularly abundant in endothelial cells (Bultmann et al. 2003; Klingel et al. 2004).

The B19V genome encodes the NS1 protein, which may function as helicase and transcription factor (Cotmore et al. 1986: Doerig et al. 1987: Heegaard and Brown 2002). transactivator of cellular and viral promoters (Mitchell 2002), stimulator of apoptosis (Hsu et al. 2004; Moffatt et al. 1998; Sol et al. 1999), and modulates inflammatory signaling by activation of the STAT3/PIAS3 pathway (Duechting et al. 2008). The B19V genome further encodes the structural capsid proteins VP1 and VP2 (Cotmore et al. 1986), which are decisive for the viral life cycle (Gigler et al. 1999; Young and Brown 2004). The VP1 protein contains a sequence similar to secreted phospholipase A2 (sPLA2) (Canaan et al. 2004; Li et al. 2001; Zadori et al. 2001), which probably generates eicosanoids (Dorsch et al. 2002; Zadori et al. 2001). The vPLA2 enzyme activity is disrupted by replacement of a histidine at position 153 with alanine (H153AVP1) (Dorsch et al. 2002; Zadori et al. 2001).

VP1 influences Ca²⁺ entry (Lupescu et al. 2006), voltage-gated K⁺ channels (Ahmed et al. 2014) and Na⁺/K⁺ ATPase (Almilaji et al. 2013b), effects abrogated by loss of function mutation of the PLA2 sequence, and mimicked by the vPLA2 product lysophosphatidylcholine (Almilaji et al. 2013b; Rabini et al. 1998).

Na⁺/K⁺ ATPase activity has previously been shown to strongly influence the activity of inwardly rectifying K⁺ channels (Lang and Rehwald 1992). The present study explored, whether expression of VP1 influences the activity of the inwardly rectifying Kir2.1 K⁺ channels, which have previously been shown to be expressed in endothelial cells (Nilius and Droogmans 2001).

Materials and Methods

Xenopus Oocytes

Xenopus oocytes were explanted from adult Xenopus laevis (NASCO), which were anesthetized by a 0.1 % Tricaine solution. After confirmation of anesthesia and disinfection of the skin, a small abdominal incision was made and oocytes were removed, following by closure of the skin by sutures. All animal experiments were conducted in accordance with the Helsinki Declaration of 1975 and according to the German law for the welfare of animals and the surgical procedures on the adult X. laevis were reviewed and approved by the respective government authority of the state Baden-Württemberg (Regierungspräsidium) prior to the start of the study (Anzeige für Organentnahme nach §6).



B19V DNA was isolated from deparaffinized myocardial tissue of a patient with fatal B19V-associated iCMP after proteinase K digestion, phenol/chloroform extraction, and ethanol precipitation (accession number: DQ225150). For cloning of the pWHE163-VP1 plasmid, the respective region was amplified by PCR using a high fidelity polymerase system (Roche, Basel, Switzerland). Constructs encoding wild-type VP1 (Almilaji et al. 2013b), PLA2-negative H153AVP1 mutant (Almilaji et al. 2013b), and wild-type Kir2.1 (Munoz et al. 2014) were used for generation of cRNA as described previously (Hosseinzadeh et al. 2013).

Voltage Clamp in Xenopus Oocytes

Xenopus oocytes were prepared as previously described (Bogatikov et al. 2012; Henrion et al. 2012). cRNA encoding VP1 (10 ng) was injected on the same day of preparation of the Xenopus oocytes (Hosseinzadeh et al. 2014; Munoz et al. 2013). All experiments were performed at room temperature (about 22 °C) 3 days after the injection (Hosseinzadeh et al. 2012b). In two-electrode voltage clamp experiments, Kir2.1 currents were elicited every 20 s with 1 s pulses from -150 to +30 mV applied from a holding potential of -60 mV. The data were filtered at 1 kHz and recorded with a Digidata 1322A A/D-D/A converter and Clampex V.9.2 software for data acquisition (Axon Instruments) (Shojaiefard et al. 2012; Warsi et al. 2014). The analysis of the data was performed with Clampfit 9.2 (Axon Instruments) software (Almilaji et al. 2013a; Pakladok et al. 2014). The oocytes were maintained at 17 °C in ND96 solution containing: 88.5 mM NaCl, 2 mM KCl, 1 mM MgCl₂, 1.8 mM CaCl₂, 5 mM HEPES, tetracycline (50 mg/l), ciprofloxacin (1.6 mg/l), refobacin (100 mg/l), and theophylline (90 mg/l) as well as sodium pyruvate (5 mM) were added to the ND96, pH was adjusted to 7.5 by addition of NaOH. The control superfusate (ND96) contained 96 mM NaCl, 2 mM KCl, 1.8 mM CaCl₂, 1 mM MgCl₂, and 5 mM HEPES, pH was adjusted to 7.4 by addition of NaOH (Alesutan et al. 2012; Hosseinzadeh et al. 2012a). The flow rate of the superfusion was 20 ml/min, and a complete exchange of the bath solution was reached within about 10 s (Mia et al. 2012; Pathare et al. 2012).

Statistical Analysis

Data are provided as mean \pm SEM, n represents the number of oocytes investigated. All experiments were repeated with at least three batches of oocytes; in all repetitions, qualitatively similar data were obtained. Data were tested for significance using analysis of variance (ANOVA)



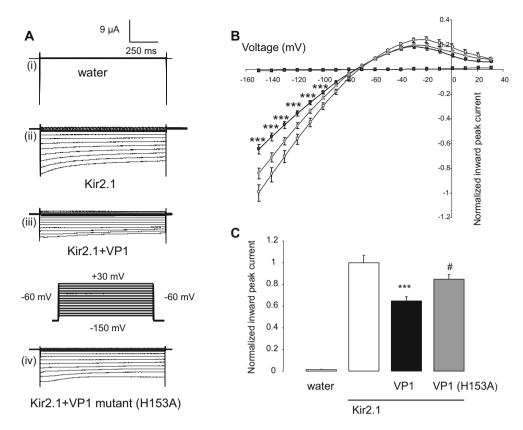


Fig. 1 Inhibition of K⁺ currents in Kir2.1 expressing *Xenopus* oocytes by coexpression of VP1 but not of $^{\rm H153A}$ VP1. **a** Original tracings recorded in *Xenopus* oocytes injected with water (*i*), with cRNA encoding Kir2.1 alone (*ii*), with cRNAs encoding both, Kir2.1 and VP1 (*iii*), and with cRNA encoding both, Kir2.1 and the PLA2-negative $^{\rm H153A}$ VP1 mutant (*iv*). The currents were elicited every 20 s with 1 s pulses from -150 to +30 mV applied from a holding potential of -60 mV. **b** Arithmetic mean \pm SEM (n=6-22) of the normalized Kir2.1 current as a function of voltage in *Xenopus* oocytes injected with water (*black squares*), or with cRNA encoding Kir2.1 alone (*white circles*), or with cRNA encoding both, Kir2.1 and VP1 (*black circles*), or with cRNA encoding Kir2.1 and PLA2-negative

or t test, as appropriate. Results with p < 0.05 were considered statistically significant.

Results

The present study explored, whether coexpression of parvovirus capsid protein VP1 influences the activity of Kir2.1 K^+ -channels. To this end, Kir2.1 was expressed in *Xenopus* oocytes with or without additional expression of VP1 and inwardly rectifying K^+ -currents taken as a measure of K^+ channel activity.

As shown in Fig. 1, inwardly rectifying currents were low in *Xenopus* oocytes injected with water. Expression of Kir2.1 resulted in a strong inwardly rectifying current ($I_{\rm K}$). Coexpression of wild-type VP1 was followed by a marked decline of $I_{\rm K}$ (Fig. 1). In contrast, coexpression of the

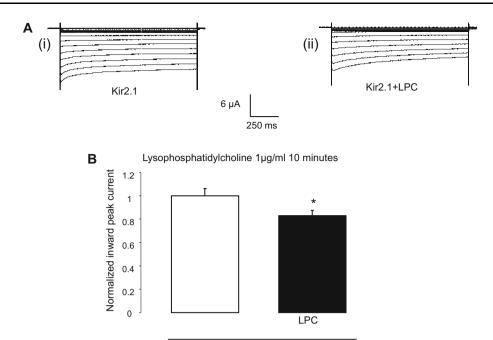
VP1 mutant (gray circles). Peak currents were normalized to the mean peak current at -150 mV in Xenopus oocytes injected with cRNA encoding Kir2.1. **c** Arithmetic mean \pm SEM (n=6-22) of the normalized Kir2.1 peak current at -150 mV in Xenopus oocytes injected with water (dotted bar), with cRNA encoding Kir2.1 alone (white bar), with cRNA encoding both, Kir2.1 and VP1 (black bar), or with cRNA encoding Kir2.1 and H153AVP1 mutant (gray bar). ***p < 0.001 indicates statistically significant difference from Xenopus oocytes injected with cRNA encoding Kir2.1 alone, *p < 0.05 indicates statistically significant difference from Xenopus oocytes injected with cRNA encoding wild-type VP1 (ANOVA-one way)

H153AVP1 mutant lacking functional PLA2 activity did not significantly modify Kir2.1 currents (Fig. 1). Accordingly, the K⁺ current was significantly higher following coexpression of Kir2.1 with H153AVP1 than following coexpression of Kir2.1 with VP1 (Fig. 1).

As PLA2 of VP1 is known to generate lysophosphatidylcholine, additional experiments were performed to test whether lysophosphatidylcholine influences K^+ currents in Kir2.1 expressing *Xenopus* oocytes. As illustrated in Fig. 2, the treatment of Kir2.1 expressing *Xenopus* oocytes with lysophosphatidylcholine (1 µg/ml) within 10 min significantly decreased the K^+ currents.

Additional experiments were performed to test whether the effect of VP1 expression or lysophosphatidylcholine treatment could be mimicked by inhibition of the Na⁺/K⁺ ATPase with ouabain (0.1 mM). As illustrated in Fig. 3, the treatment of Kir2.1 expressing *Xenopus* oocytes with



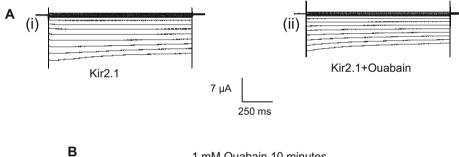


Kir 2.1

Fig. 2 Inhibition of K⁺-channel activity in Kir2.1 expressing *Xenopus* oocytes by lysophosphatidylcholine. **a** Original tracings recorded in oocytes injected with cRNA encoding Kir2.1 alone in the absence (*i*) or presence (*ii*) of lysophosphatidylcholine (1 μ g/ml). The currents were elicited every 20 s with 1 s pulses from -150 to +30 mV applied from a holding potential of -60 mV. **b** Arithmetic

mean \pm SEM (n=18) of the normalized K⁺-peak current in oocytes injected with cRNA encoding Kir2.1 alone in the absence (*white bar*) and presence (*black bar*) of lysophosphatidylcholine (1 µg/ml). *Asterisk* indicates statistically significant (p < 0.05) difference from absence of lysophosphatidylcholine (unpaired Student's t test)

Fig. 3 Inhibition of K⁺channel activity in Kir2.1 expressing Xenopus oocytes by ouabain. a Original tracings recorded in oocytes injected with cRNA encoding Kir2.1 alone in the absence (i) or presence (ii) of ouabain (0.1 mM). The currents were elicited every 20 s with 1 s pulses from -150 to +30 mV applied from a holding potential of -60 mV. **b** Arithmetic mean \pm SEM (n = 18) of the normalized K+-peak current in oocytes injected with cRNA encoding Kir2.1 alone in the absence (white bar) and presence (black bar) of ouabain (0.1 mM). Asterisk indicates statistically significant (p < 0.05) difference from absence of ouabain (unpaired Student's t test)



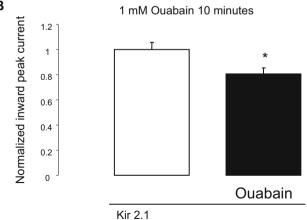
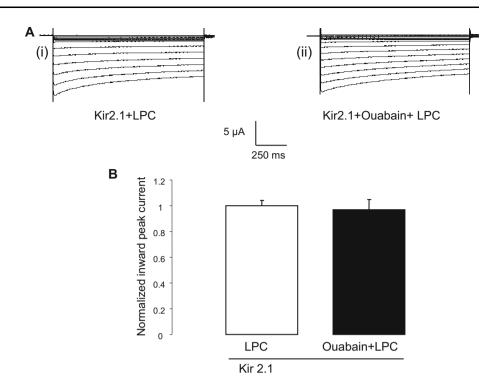




Fig. 4 Nonadditivity of lysophosphatidylcholine and ouabain on Kir2.1 K⁺ channel activity. a Original tracings recorded in oocytes injected with cRNA encoding Kir2.1 alone and treated for 3 min with lvsophosphatidylcholine (1 µg/ ml) (i) or with both, lysophosphatidylcholine (1 µg/ ml) and ouabain (0.1 mM) (ii). The currents were elicited every 20 s with 1 s pulses from -150to +30 mV applied from a holding potential of -60 mV. **b** Arithmetic mean \pm SEM (n = 19) of the normalized K⁺peak current in oocytes injected with cRNA encoding Kir2.1 alone in the presence of lysophosphatidylcholine (1 µg/ ml) (white bar), and presence (black bar) of both lysophosphatidylcholine (1 µg/ ml) and ouabain (0.1 mM)



ouabain within 10 min significantly decreased the K⁺ currents.

Further experiments tested, whether the inhibition of Na⁺/K⁺ ATPase was required for the inhibitory effect of lysophosphatidylcholine on Kir2.1. To this end, the Kir2.1 expressing oocytes were treated either with lysophosphatidylcholine (1 μ g/ml) alone or with both lysophosphatidylcholine (1 μ g/ml) and ouabain (0.1 mM). As illustrated in Fig. 4, the decline of $I_{\rm K}$ in Kir2.1 expressing oocytes was similar following combined treatment with lysophosphatidylcholine (1 μ g/ml) and ouabain (0.1 mM) and following treatment with lysophosphatidylcholine alone.

Discussion

The present observations disclose a novel effect of the B19V capsid protein VP1, i.e., the down-regulation of the inwardly rectifying K⁺ channel Kir2.1. As shown previously for Kv1.3 and Kv1.5 channels (Ahmed et al. 2014), Ca²⁺ entry (Lupescu et al. 2006) and Na⁺/K⁺ ATPase activity (Almilaji et al. 2013b), the effect of VP1 requires its PLA2-like motif (Canaan et al. 2004; Dorsch et al. 2002). Loss of function mutation of the motif disrupts the effect of VP1 on Kir2.1. Again, similar to what has been observed previously on the regulation of voltage-gated K⁺ channels (Ahmed et al. 2014), Ca²⁺ entry (Lupescu et al. 2006) and Na⁺/K⁺ ATPase activity (Almilaji et al. 2013b), the effect of VP1 expression on Kir2.1 channel activity was mimicked by the vPLA2 product lysophosphatidylcholine.

The effect of B19V on K^+ channels could contribute to the triggering of endothelial dysfunction, as B19V enters myocardial endothelial cells (Bultmann et al. 2003; Klingel et al. 2004). Inhibition of K^+ channels is expected to foster cell swelling (Lang 2007; Lang et al. 1998), as reduced K^+ channel activity leads to impaired K^+ exit, depolarization, Cl^- entry, and thus cellular accumulation of KCl with the respective osmotically obliged water (Lang 2007; Lang et al. 1998). The depolarization is further fostered by inhibition of Na^+/K^+ -ATPase activity (Almilaji et al. 2013b) with the resulting dissipation of the ion gradients across the cell membrane.

The inhibition of Kir2.1 channels could at least partially result from the inhibitory effect of lysophosphatidylcholine on the Na $^+$ /K $^+$ -ATPase (Almilaji et al. 2013b), as the channels are similarly down-regulated by the Na $^+$ /K $^+$ -ATPase inhibitor ouabain. Inwardly rectifying K $^+$ channels have previously been shown to be highly sensitive to Na $^+$ /K $^+$ -ATPase activity and to be rapidly down-regulated following pump inhibition (Lang and Rehwald 1992).

In conclusion, VP1 down-regulates the inwardly rectifying K⁺channel Kir2.1, an effect involving PLA2 activity of the parvovirus protein, lysophosphatidylcholine formation, and inhibition of Na⁺/K⁺-ATPase activity. The inhibition of endothelial K⁺ channels may lead to cell swelling, and thus participate in the pathophysiology of endothelial dysfunction during B19V infection.

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Conflict of interest There are no conflicts to disclose.

References

- Ahmed M, Almilaji A, Munoz C, Elvira B, Shumilina E, Bock CT, Kandolf R, Lang F (2014) Down-regulation of K(+) channels by human parvovirus B19 capsid protein VP1. Biochem Biophys Res Commun 450:1396–1401
- Alesutan I, Sopjani M, Dermaku-Sopjani M, Munoz C, Voelkl J, Lang F (2012) Upregulation of Na-coupled glucose transporter SGLT1 by Tau tubulin kinase 2. Cell Physiol Biochem 30:458–465
- Almilaji A, Munoz C, Hosseinzadeh Z, Lang F (2013a) Upregulation of Na⁺, Cl⁻-coupled betaine/γ-amino-butyric acid transporter BGT1 by Tau tubulin kinase 2. Cell Physiol Biochem 32:334–343
- Almilaji A, Szteyn K, Fein E, Pakladok T, Munoz C, Elvira B, Towhid ST, Alesutan I, Shumilina E, Bock CT, Kandolf R, Lang F (2013b) Down-regulation of Na⁻/K⁺ ATPase activity by human parvovirus B19 capsid protein VP1. Cell Physiol Biochem 31:638–648
- Anderson MJ, Jones SE, Fisher-Hoch SP, Lewis E, Hall SM, Bartlett CL, Cohen BJ, Mortimer PP, Pereira MS (1983) Human parvovirus, the cause of erythema infectiosum (fifth disease)? Lancet 1:1378
- Bock CT, Klingel K, Kandolf R (2010) Human parvovirus B19-associated myocarditis. N Engl J Med 362:1248–1249
- Bogatikov E, Munoz C, Pakladok T, Alesutan I, Shojaiefard M, Seebohm G, Foller M, Palmada M, Bohmer C, Broer S, Lang F (2012) Up-regulation of amino acid transporter SLC6A19 activity and surface protein abundance by PKB/Akt and PIKfyve. Cell Physiol Biochem 30:1538–1546
- Brown KE (1989) What threat is human parvovirus B19 to the fetus? A review. Br J Obstet Gynaecol 96:764–767
- Brown KE, Anderson SM, Young NS (1993) Erythrocyte P antigen: cellular receptor for B19 parvovirus. Science 262:114–117
- Brown KE, Hibbs JR, Gallinella G, Anderson SM, Lehman ED, McCarthy P, Young NS (1994a) Resistance to parvovirus B19 infection due to lack of virus receptor (erythrocyte P antigen). N Engl J Med 330:1192–1196
- Brown KE, Young NS, Liu JM (1994b) Molecular, cellular and clinical aspects of parvovirus B19 infection. Crit Rev Oncol Hematol 16:1–31
- Bultmann BD, Klingel K, Sotlar K, Bock CT, Baba HA, Sauter M, Kandolf R (2003) Fatal parvovirus B19-associated myocarditis clinically mimicking ischemic heart disease: an endothelial cellmediated disease. Hum Pathol 34:92–95
- Canaan S, Zadori Z, Ghomashchi F, Bollinger J, Sadilek M, Moreau ME, Tijssen P, Gelb MH (2004) Interfacial enzymology of parvovirus phospholipases A2. J Biol Chem 279:14502–14508
- Corman LC, Dolson DJ (1992) Polyarteritis nodosa and parvovirus B19 infection. Lancet 339:491
- Cotmore SF, McKie VC, Anderson LJ, Astell CR, Tattersall P (1986) Identification of the major structural and nonstructural proteins encoded by human parvovirus B19 and mapping of their genes by procaryotic expression of isolated genomic fragments. J Virol 60:548–557
- Crane J (2002) Parvovirus B19 infection in pregnancy. J Obstet Gynaecol Can 24:727–743
- Dingli D, Pfizenmaier DH, Arromdee E, Wennberg P, Spittell PC, Chang-Miller A, Clarke BL (2000) Severe digital arterial occlusive disease and acute parvovirus B19 infection. Lancet 356:312–314

- Doerig C, Beard P, Hirt B (1987) A transcriptional promoter of the human parvovirus B19 active in vitro and in vivo. Virology 157:539–542
- Dorsch S, Liebisch G, Kaufmann B, von Landenberg P, Hoffmann JH, Drobnik W, Modrow S (2002) The VP1 unique region of parvovirus B19 and its constituent phospholipase A2-like activity. J Virol 76:2014–2018
- Drago F, Semino M, Rampini P, Rebora A (1999) Parvovirus B19 infection associated with acute hepatitis and a purpuric exanthem. Br J Dermatol 141:160–161
- Duechting A, Tschope C, Kaiser H, Lamkemeyer T, Tanaka N, Aberle S, Lang F, Torresi J, Kandolf R, Bock CT (2008) Human parvovirus B19 NS1 protein modulates inflammatory signaling by activation of STAT3/PIAS3 in human endothelial cells. J Virol 82:7942–7952
- Ellis PD, Metcalfe JC, Hyvonen M, Kemp PR (2003) Adhesion of endothelial cells to NOV is mediated by the integrins alphavbeta3 and alpha5beta1. J Vasc Res 40:234–243
- Finkel TH, Torok TJ, Ferguson PJ, Durigon EL, Zaki SR, Leung DY, Harbeck RJ, Gelfand EW, Saulsbury FT, Hollister JR (1994) Chronic parvovirus B19 infection and systemic necrotising vasculitis: opportunistic infection or aetiological agent? Lancet 343:1255–1258
- Gigler A, Dorsch S, Hemauer A, Williams C, Kim S, Young NS, Zolla-Pazner S, Wolf H, Gorny MK, Modrow S (1999) Generation of neutralizing human monoclonal antibodies against parvovirus B19 proteins. J Virol 73:1974–1979
- Heegaard ED, Brown KE (2002) Human parvovirus B19. Clin Microbiol Rev 15:485–505
- Henrion U, Zumhagen S, Steinke K, Strutz-Seebohm N, Stallmeyer B, Lang F, Schulze-Bahr E, Seebohm G (2012) Overlapping cardiac phenotype associated with a familial mutation in the voltage sensor of the KCNQ1 channel. Cell Physiol Biochem 29:809–818
- Hillingso JG, Jensen IP, Tom-Petersen L (1998) Parvovirus B19 and acute hepatitis in adults. Lancet 351:955-956
- Hosseinzadeh Z, Bhavsar SK, Lang F (2012a) Down-regulation of the myoinositol transporter SMIT by JAK2. Cell Physiol Biochem 30:1473–1480
- Hosseinzadeh Z, Bhavsar SK, Lang F (2012b) Downregulation of ClC-2 by JAK2. Cell Physiol Biochem 29:737–742
- Hosseinzadeh Z, Dong L, Bhavsar SK, Warsi J, Almilaji A, Lang F (2013) Upregulation of peptide transporters PEPT1 and PEPT2 by Janus kinase JAK2. Cell Physiol Biochem 31:673–682
- Hosseinzadeh Z, Luo D, Sopjani M, Bhavsar SK, Lang F (2014) Down-regulation of the epithelial Na⁺ channel ENaC by Janus kinase 2. J Membr Biol 247:331–338
- Hsu TC, Wu WJ, Chen MC, Tsay GJ (2004) Human parvovirus B19 non-structural protein (NS1) induces apoptosis through mitochondria cell death pathway in COS-7 cells. Scand J Infect Dis 36:570–577
- Karetnyi YV, Beck PR, Markin RS, Langnas AN, Naides SJ (1999) Human parvovirus B19 infection in acute fulminant liver failure. Arch Virol 144:1713–1724
- Katz VL, Chescheir NC, Bethea M (1990) Hydrops fetalis from B19 parvovirus infection. J Perinatol 10:366–368
- Klingel K, Sauter M, Bock CT, Szalay G, Schnorr JJ, Kandolf R (2004) Molecular pathology of inflammatory cardiomyopathy. Med Microbiol Immunol 193:101–107
- Koch WC (2001) Fifth (human parvovirus) and sixth (herpesvirus 6) diseases. Curr Opin Infect Dis 14:343–356
- Kuhl U, Pauschinger M, Bock T, Klingel K, Schwimmbeck CP, Seeberg B, Krautwurm L, Poller W, Schultheiss HP, Kandolf R (2003) Parvovirus B19 infection mimicking acute myocardial infarction. Circulation 108:945–950



- Lang F (2007) Mechanisms and significance of cell volume regulation. J Am Coll Nutr 26:613S–623S
- Lang F, Rehwald W (1992) Potassium channels in renal epithelial transport regulation. Physiol Rev 72:1–32
- Lang F, Busch GL, Ritter M, Volkl H, Waldegger S, Gulbins E, Haussinger D (1998) Functional significance of cell volume regulatory mechanisms. Physiol Rev 78:247–306
- Lehmann HW, Knoll A, Kuster RM, Modrow S (2003) Frequent infection with a viral pathogen, parvovirus B19, in rheumatic diseases of childhood. Arthritis Rheum 48:1631–1638
- Li Y, Zadori Z, Bando H, Dubuc R, Fediere G, Szelei J, Tijssen P (2001) Genome organization of the densovirus from Bombyx mori (BmDNV-1) and enzyme activity of its capsid. J Gen Virol 82:2821–2825
- Lupescu A, Bock CT, Lang PA, Aberle S, Kaiser H, Kandolf R, Lang F (2006) Phospholipase A2 activity-dependent stimulation of Ca²⁺ entry by human parvovirus B19 capsid protein VP1. J Virol 80:11370–11380
- Malm C, Fridell E, Jansson K (1993) Heart failure after parvovirus B19 infection. Lancet 341:1408–1409
- Mia S, Munoz C, Pakladok T, Siraskar G, Voelkl J, Alesutan I, Lang F (2012) Downregulation of Kv1.5 K channels by the AMP-activated protein kinase. Cell Physiol Biochem 30:1039–1050
- Mitchell LA (2002) Parvovirus B19 nonstructural (NS1) protein as a transactivator of interleukin-6 synthesis: common pathway in inflammatory sequelae of human parvovirus infections? J Med Virol 67:267–274
- Moffatt S, Yaegashi N, Tada K, Tanaka N, Sugamura K (1998) Human parvovirus B19 nonstructural (NS1) protein induces apoptosis in erythroid lineage cells. J Virol 72:3018–3028
- Munakata Y, Saito-Ito T, Kumura-Ishii K, Huang J, Kodera T, Ishii T, Hirabayashi Y, Koyanagi Y, Sasaki T (2005) Ku80 autoantigen as a cellular coreceptor for human parvovirus B19 infection. Blood 106:3449–3456
- Munoz C, Almilaji A, Setiawan I, Foller M, Lang F (2013) Upregulation of the inwardly rectifying K⁺ channel Kir2.1 (KCNJ2) by protein kinase B (PKB/Akt) and PIKfyve. J Membr Biol 246:189–197
- Munoz C, Pakladok T, Almilaji A, Elvira B, Decher N, Shumilina E, Lang F (2014) Up-regulation of Kir2.1 (KCNJ2) by the serum and glucocorticoid inducible SGK3. Cell Physiol Biochem 33:491–500
- Nilius B, Droogmans G (2001) Ion channels and their functional role in vascular endothelium. Physiol Rev 81:1415–1459
- Oyer CE, Ongcapin EH, Ni J, Bowles NE, Towbin JA (2000) Fatal intrauterine adenoviral endomyocarditis with aortic and pulmonary valve stenosis: diagnosis by polymerase chain reaction. Hum Pathol 31:1433–1435
- Pakladok T, Hosseinzadeh Z, Lebedeva A, Alesutan I, Lang F (2014) Upregulation of the Na⁺-coupled phosphate cotransporters NaPi-IIa and NaPi-IIb by B-RAF. J Membr Biol 247:137–145
- Pathare G, Foller M, Daryadel A, Mutig K, Bogatikov E, Fajol A, Almilaji A, Michael D, Stange G, Voelkl J, Wagner CA, Bachmann S, Lang F (2012) OSR1-sensitive renal tubular phosphate reabsorption. Kidney Blood Press Res 36:149–161

- Pattison JR (1988) Diseases caused by the human parvovirus B19. Arch Dis Child 63:1426–1427
- Rabini RA, Fumelli P, Zolese G, Amler E, Salvolini E, Staffolani R, Cester N, Mazzanti L (1998) Modifications induced by plasma from insulin-dependent diabetic patients and by lysophosphatidylcholine on human Na⁺, K⁺-adenosine triphosphatase. J Clin Endocrinol Metab 83:2405–2410
- Schowengerdt KO, Ni J, Denfield SW, Gajarski RJ, Bowles NE, Rosenthal G, Kearney DL, Price JK, Rogers BB, Schauer GM, Chinnock RE, Towbin JA (1997) Association of parvovirus B19 genome in children with myocarditis and cardiac allograft rejection: diagnosis using the polymerase chain reaction. Circulation 96:3549–3554
- Shojaiefard M, Hosseinzadeh Z, Bhavsar SK, Lang F (2012) Downregulation of the creatine transporter SLC6A8 by JAK2. J Membr Biol 245:157–163
- Sokal EM, Melchior M, Cornu C, Vandenbroucke AT, Buts JP, Cohen BJ, Burtonboy G (1998) Acute parvovirus B19 infection associated with fulminant hepatitis of favourable prognosis in young children. Lancet 352:1739–1741
- Sol N, Le Junter J, Vassias I, Freyssinier JM, Thomas A, Prigent AF, Rudkin BB, Fichelson S, Morinet F (1999) Possible interactions between the NS-1 protein and tumor necrosis factor alpha pathways in erythroid cell apoptosis induced by human parvovirus B19. J Virol 73:8762–8770
- Telerman A, Tuynder M, Dupressoir T, Robaye B, Sigaux F, Shaulian E, Oren M, Rommelaere J, Amson R (1993) A model for tumor suppression using H-1 parvovirus. Proc Natl Acad Sci USA 90:8702–8706
- Trapani S, Ermini M, Falcini F (1999) Human parvovirus B19 infection: its relationship with systemic lupus erythematosus. Semin Arthritis Rheum 28:319–325
- Tschope C, Bock CT, Kasner M, Noutsias M, Westermann D, Schwimmbeck PL, Pauschinger M, Poller WC, Kuhl U, Kandolf R, Schultheiss HP (2005) High prevalence of cardiac parvovirus B19 infection in patients with isolated left ventricular diastolic dysfunction. Circulation 111:879–886
- Warsi J, Elvira B, Hosseinzadeh Z, Shumilina E, Lang F (2014) Downregulation of chloride channel CIC-2 by Janus kinase 3. J Membr Biol 247:387–393
- Weigel-Kelley KA, Yoder MC, Srivastava A (2003) Alpha5beta1 integrin as a cellular coreceptor for human parvovirus B19: requirement of functional activation of beta1 integrin for viral entry. Blood 102:3927–3933
- Yoto Y, Kudoh T, Haseyama K, Suzuki N, Chiba S (1996) Human parvovirus B19 infection associated with acute hepatitis. Lancet 347:868–869
- Young NS, Brown KE (2004) Parvovirus B19. N Engl J Med 350:586–597
- Zadori Z, Szelei J, Lacoste MC, Li Y, Gariepy S, Raymond P, Allaire M, Nabi IR, Tijssen P (2001) A viral phospholipase A2 is required for parvovirus infectivity. Dev Cell 1:291–302

