

The Ryanodine Receptors Gene Family: Expression and Functional Meaning

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Abstract

The family of ryanodine receptor (RyR) genes encodes three Ca^{2+} release channels: RyR1, RyR2 and RyR3. In addition to their well known role in regulating contraction in striated muscles, RyRs are expressed in many other cell types, where eventually multiple RyR isoforms can be co-expressed. Recent studies have revealed that several important regulatory mechanisms can modulate RyRs activity under normal and pathological conditions. In this review we shall summarise the most recent developments in this area of research.

Key words: brain, calcium channel, calcium channel binding protein, muscle, muscle disease.

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Ca^{2+} is one of the most primitive second messengers in biological systems. In resting cells, the intracellular Ca^{2+} concentration is usually kept below 200 nM [14, 32], but it can rise in the micromolar concentration in response to extracellular stimulation [13, 19]. Although Ca^{2+} can enter eukaryotic cells through channels located in the plasma membrane, specialized subcompartments of the endoplasmic reticulum which function as intracellular Ca^{2+} stores have been also developed. These stores represent an important source of Ca^{2+} for generating signals and are provided by specialized Ca^{2+} channels and Ca^{2+} transport systems. Intracellular Ca^{2+} release channels belong to two main distinct families: the Inositol Trisphosphate Receptor family (InsP_3) is activated by inositol 1,4,5 trisphosphate and the Ryanodine Receptor family (RyR), which has been identified by its ability to bind with high affinity the plant alkaloid ryanodine [51, 152, 201].

RyRs are tetramers with a molecular mass of approximately 2.3 million Daltons. In vertebrates, three different genes have been identified that encode three isoforms of RyRs (RyR1, RyR2 and RyR3). By contrast, in invertebrate species only one RyR isoform has been cloned [75, 121]. Mammalian RyR1, RyR2 and RyR3 show a high degree of homology, with an amino acid sequence identity of 67 to 70% [110, 123, 137]. In particular, amino acid sequence identities between the RyR3/RyR2, RyR3/RyR1 and RyR1/RyR2 isoforms in rabbit is 70%, 67% and 67%, respectively [74]. Divergence among RyR isoforms can be restricted to three main regions named divergency (D) regions. With reference to the RyR1 sequence, region D1 spans amino acids 4254-4631, region D2 amino acids 1342-1403 and region D3, a glutamate rich sequence is localized be-

tween residues 1872 and 1923 [189, 240]. The overall protein structure of RyRs is similar to that of InsP_3 Rs, with a large cytosolic N-terminal region, a central modulatory domain and a C-terminal domain. Alignment of the amino acid sequences of RyRs and InsP_3 Rs reveals a certain degree of homology in the first 600 amino acids in the N-terminal region [57]. The central regions of RyRs and InsP_3 Rs are dissimilar in their sequence and are likely to contain domains with modulatory and transducing functions. In this region two internally repeated domains, referred to as RIH for "RyR and InsP_3 R Homology" have been described. The RIH domains lie between amino acid residues 466-643 and 2187-2364 in the human RyR1 and amino acid residues 199-677 and 1196-1356 in the human InsP_3 R1 [155].

The C-terminal domain of both InsP_3 Rs and RyRs contains the transmembrane segments that form the Ca^{2+} channel pore. Twelve hydrophobic domains have been predicted in the COOH-terminal region of the molecule by Zorzato et al. [246]. Of these, only 4 (M5, M6, M8, M10) were predicted by Takeshima et al. [194] to be transmembrane sequences. The amino acid sequences forming the transmembrane domains are highly conserved between InsP_3 Rs and RyRs, with the exception of domains 3 and 4 (accordingly to the model proposed by Takeshima et al. [194]) that show the lowest degree of homology. Different evidence has shown that the carboxy terminal region of RyRs is important for the correct localization and functional activity of the channel [17, 18, 195]. It has been demonstrated that M2, M7 and M10 are involved in tetramer assembly and channel pore formation [40]. A conserved sequence (GVRAGGGIGD) in transmembrane domain 9 (M9) has been proposed to be part of the pore-forming segment of RyRs [42, 242].

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Amino acids 4894 and 4899 in the rabbit RyR1 sequence have been proposed to be involved in channel conductance. Indeed mutations in these residues result in RyR1 channels displaying an altered K^+ conductance. Moreover, channels carrying mutations I4897A, I4897L, I4897V and D4917A show, in addition to a reduced K^+ conductance, lack of ryanodine binding and altered caffeine induced Ca^{2+} release [59].

Cryoelectron microscopy and three-dimensional reconstruction studies have confirmed the fourfold symmetry of the channels with a large cytoplasmic assembly and a small transmembrane region [164, 179, 180, 213]. Cryoelectron microscopy reconstructions of RyR2 have shown that much of the differences with RyR1 are located in the clamp domains that are thought to interact with DHPRs [180, 181]. In particular, the N-terminal domain has been found to be located at the corners within the clamp structure while the D1 region is adjacent to the calmodulin binding site in domain 3 [100, 101]. The D3 region has been recently mapped to domain 9 in the clamp structure, adjacent to the FKBP12 and FKBP12.6 binding sites [241].

The cytoplasmic assembly, corresponding to the N-terminal region of the RyRs is constructed from 10 or more domains that are loosely packed together and some of them consist of multidomain structures [164, 179, 180]. The large cytoplasmic domain represents the modulatory region of the receptor and contains several binding sites for nucleotide [74, 123, 194], calmodulin [128, 133, 134, 218, 231, 232, 241] FKBP12 [22, 23, 124], Mg^{2+} [247], as well as phosphorylation [38, 165, 166, 173, 174, 190, 192, 227] and glycosylation sites [18, 123]. High and low affinity binding sites for Ca^{2+} have been described in the C-terminal region of the channel [28, 31, 41, 141]. Cryoelectron microscopy and reconstruction analysis have allowed to identify the location of some RyR binding proteins on the three dimensional architecture of the channel. FKBP12 has been found to bind to the cytoplasmic region of RyR, near the face that would interact with the T-tubule system [213, 214]. The same studies have revealed that calmodulin can also bind the cytoplasmic assembly of RyR, in a region on the channel that faces the sarcoplasmic reticulum (SR) [213, 214]. Finally, Samso' et al. have investigated the three dimensional location of Imperatoxin A (IpTx_a), on RyR1 [178]. IpTx_a is a peptide toxin that mimics a DHPR domain that triggers RyR1 opening and that has been found to bind RyR1 and affect its function in vitro [44, 45, 66, 72, 96, 136, 182, 187, 210]. Interestingly, the three dimensional binding site of IpTx_a has been identified on the cytoplasmic assembly of RyR1, between the clamp and the handle domains, suggesting that this region may be involved in the excitation-contraction coupling transduction mechanism *in vivo* [178] (see below for a more detailed discussion on the excitation-contraction coupling mechanism). Leucine/isoleucine zipper motifs are pre-

sent in RyR1 and RyR2 and bind to corresponding domains in adaptor proteins for kinases and phosphatases [118]. RyR2 forms a macromolecular complex that includes FKBP12.6, PKA and its targeting protein mAKAP, PP1 and its targeting protein spinophilin and PP2 with its targeting protein PR130 [112, 117, 120, 174]. Phosphorylation of RyRs by PKA was demonstrated to occur at Ser²⁸⁴³ and Ser²⁸⁰⁹ in the skeletal and cardiac isoforms of ryanodine receptors, respectively [118, 166, 173]. The specific regions in RyR2 that contain LIZ motifs have been identified: amino acids from 555-604 in RyR2 contain the LIZ motif that mediate targeting of spinophilin/PP1 to RyR2, while region 1603-1631 mediates binding of PR130/PP2A to RyR2; region 3003-3039 contains the LIZ motif that mediates targeting of mAKAP/PKA to RyR2. The LIZ motifs that mediate the targeting of PKA and PP1 to RyR2 are conserved among RyR isoforms, but only RyR2 contains the PP2A targeting motif [118].

Ryres Expression and Function

Ryanodine receptors have been first identified because of the pronounced actions of the plant alkaloid ryanodine on insects and vertebrate striated muscles. Ryanodine receptors have been subsequently detected in different species, from platyhelminthes to mammals, including nematodes, molluscs, arthropods, fish, reptiles, amphibians and birds [191].

In vertebrate, three isoforms of RyRs have been identified. In mammals, RyR1 is the major intracellular Ca^{2+} release channel in skeletal muscle and RyR2 is most abundant in cardiac muscle and brain [110, 137]. RyR3 is widely expressed in different vertebrate tissues [61, 62, 74]. By contrast, in most avian, amphibian and fish skeletal muscles, two isoforms of RyRs, named α and β , that correspond to mammalian RyR1 and RyR3 are expressed [3, 92, 146, 150, 151]. A third isoform, which is better recognised by antibodies against the mammalian RyR2 than against avian α and β isoforms and is likely to represent the homologous of mammalian RyR2, has been detected in chicken heart [151].

The function of RyRs has been extensively studied in muscle cells as their expression has been associated with this tissue since their first identification as the "foot structure"/ Ca^{2+} channels of the sarcoplasmic reticulum. The preferential expression of RyRs in muscle tissues can be traced back to *C. elegans*, whose genome contains only one RyR gene [188]. Interestingly, the excitation-contraction coupling (E-C coupling) mechanism that regulates activation of muscle contraction through the coordinate activation of voltage-dependent Ca^{2+} channels and RyRs has been found to be a common feature of invertebrate and vertebrate striated muscles. Indeed, in *C. elegans*, the RyR-1 (unc-68) gene is expressed in adult body-wall muscles, pharyngeal muscle cells, neurons and other cells [175]. Unc-68 null mutants move poorly exhibiting an incomplete flaccid paralysis, yet have normal muscle ultrastructure. Pharyn-

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geal pumping is weaker in mutants than in wild types, although electrical activity during pharyngeal muscle contraction is normal. Since contraction in *unc-68* mutants is impaired but not eliminated, it seems that intracellular Ca^{2+} release is not essential for E-C coupling in *C. elegans* [122].

In mammals, RyR1 is the major intracellular Ca^{2+} release channel in skeletal muscle and RyR2 is most abundant in cardiac muscle, where they are closely associated with E-C coupling mechanisms that are specific for each muscle type. RyR3 has been found to be also expressed in mammalian skeletal muscle, although at levels that vary accordingly to the muscle type and the developmental stage [16, 36, 52]. In particular, expression studies on adult skeletal muscles from different mammalian vertebrates show detectable levels of RyR3 protein only in the diaphragm muscle [36], while in other muscles low to undetectable expression levels have been described. By contrast, during mouse muscle development, the RyR3 isoform is expressed in all muscles, from late embryonic stage and during the first two weeks after birth. RyR3 expression is down-regulated in most muscles starting from 2-3 weeks of post-natal life [16, 52]. The subcellular distribution of RyRs has been extensively studied in striated muscles. RyR1 and RyR2 display a precise localisation in skeletal and cardiac muscles to structures called triads and diads, respectively. These represent junctional complexes between the sarcoplasmic reticulum and the T tubule system that guarantee the direct interaction between dihydropyridine receptors and ryanodine receptors essential for activation of the E-C coupling mechanism [54, 161]. Recently, Felder and Franzini-Armstrong have shown that in skeletal muscle cells, RyR3 is likely localised in the parajunctional membranes immediately adjacent to the junctional region of skeletal muscles from toadfish and frog [48]. Although they do not unequivocally identify RyR3 as the main parajunctional channels in these muscles, the differential disposition of feet in the junctional and parajunctional domains of the sarcoplasmic reticulum and the typical disposition of tetrads in muscles expressing equal amount of RyR1 and RyR3 isoforms, suggest that RyR3 could be actually restricted to this area of the sarcoplasmic reticulum [48].

E-C coupling occurs with similar, but different mechanism in skeletal and cardiac muscles [95, 138, 156, 196, 197]. In skeletal muscle, a direct coupling model has been described. According to this model, RyR1s are physically coupled with DHPRs and open in relation to conformational changes of the DHPRs induced by membrane depolarization. In cardiac fibers, by contrast, RyR2s are not in physical association with DHPRs and are activated by a Calcium Induced Calcium Release (CICR) mechanism [15, 161]. Experiments with knockout animals have shown that RyR1 but not RyR2 can restore mechanical coupling in RyR1 deficient myotubes [139] and the skeletal muscle α_{1S} sub-

unit, but not the cardiac α_{1C} subunit of DHPR can restore skeletal muscle E-C coupling in DHPR deficient mice confirming the close relationship between expression of a particular subset of genes (skeletal vs cardiac isoforms of RyR and DHPR) and generation of a specific function in muscle tissue [65]. Different studies have indicated the II-III loop of the α_{1S} subunit of DHPR as the region responsible for RyR1 channel opening [104, 200]. Inside this region, a peptide corresponding to residues 681-690 represents the minimal structural element that can activate skeletal-muscle specific excitation-contraction coupling [46, 47]. A second region inside the II-III loop has been identified between residues 725-742 [65, 139, 140]. Indeed, the two regions seem to have opposite effects on RyR1 activation: region 671-690 (also known as peptide A) was found to activate the channel, whereas region 724-760 (peptide C) was shown to antagonize the effect of the peptide A [45, 176]. However, physiological studies on dysgenic myotubes expressing chimeric DHPRs showed that the presence of regions corresponding to peptide C were important in determining the skeletal muscle-type of E-C coupling [65, 138]. In particular, expression of chimeric proteins where region 724-760 of the skeletal DHPR was replaced by the corresponding region from cardiac DHPR could not restore skeletal muscle type E-C coupling in dysgenic myotubes. In a different study, chimeric DHPRs composed by a rabbit skeletal α_{1S} subunit in which the sequences corresponding to the II-III loop were replaced by corresponding regions of the DHPR of *Musca domestica*, that show only a 19% identity with skeletal and cardiac mammalian DHPR, were expressed in myotubes from dysgenic mice [225]. The chimeric DHPRs were not able to restore skeletal muscle E-C coupling. However, when the region corresponding to residues 720-764 of rabbit DHPR was reintroduced into the *musca* II-III loop, a complete rescue of skeletal muscle E-C coupling could be observed, suggesting that this domain may be essential for the correct regulation of this mechanism [225]. Inside this region, the four amino acid residues Ala⁷³⁹, Phe⁷⁴¹, Pro⁷⁴² and Asp⁷⁴⁴ were found to be essential for skeletal type E-C coupling [91]. Interestingly, changes of any of the four residues to their cardiac counterpart led to an alteration of the predicted secondary structure of the adjacent domains that may be responsible for failure of functional interaction with RyR1 and activation of skeletal muscle E-C coupling [91]. Actually, using a surface plasmon resonance detection system, O'Reilly and co-workers demonstrated that only region 671-690 of the II-III loop of the DHPR can bind RyR1 [144]. Interestingly, the interaction between this region and RyR1 is strongly dependent on binding of the immunophilin FKBP12 to RyR1 (see below for discussion on FKBP12) [144]. Indeed, a previous study by Dulhunty et al., 1999, showed that activation of both native and lipid bilayer reconstituted RyR1 channels by peptide A

required FKBP12 binding to RyR1 [43]. In contrast, no binding to RyR1 could be detected for region 724-760, although it was previously proven to be essential for determining the type of E-C coupling [65, 91, 139].

Nevertheless, a clear determination of the regions of DHPR that are precisely involved in E-C coupling is still to be attained. Actually, deletion analysis of the II-III loop of the skeletal muscle DHPR indicated that loss of region 671-690 does not effect skeletal muscle E-C coupling and, furthermore, that deletion of both 671-690 and 720-765 domains do not completely abolish skeletal muscle type E-C coupling, suggesting that other regions may contribute to activation of RyR1 during E-C coupling [2]. In addition, a scrambled sequence in residues 681-690 did not alter skeletal muscle E-C coupling when expressed in skeletal muscle cells, indicating that integrity of this region is not required for this mechanism [158]. Actually, recent studies showed that inside region 667-692, the secondary protein structure determined by alignment of a cluster of basic residues, more than the primary amino acid sequence, is important for RyR1 activation [9, 25, 243].

As to the sequences present in RyR1 responsible for E-C coupling, region from amino acid 1635 to amino acid 2636 has been found to play an important role in this mechanism [140]. Using *in vitro* interaction experiments between GST-fusion proteins of DHPR fragments corresponding to the II-III loop and *in vitro* translated RyR1 fragments, Leong and MacLennan showed that the 37 amino acid region spanning from Arg¹⁰⁷⁶ to Asp¹¹¹² in RyR1 was able to bind the II-III loop from skeletal muscle but not from cardiac DHPR [98]. In addition, the presence of the D2 region in RyR1 (namely aa 1303-1356) is important for E-C coupling. Actually, deletions of this region from RyR1 channels abolish E-C coupling and transfection of RyR1 knockout myocytes with expression vectors carrying the RyR2 cDNA do not restore E-C coupling. However, when chimeric channels in which the D2 region of RyR1 was replaced by the corresponding sequences of RyR2 were expressed in knockout myocytes, skeletal muscle E-C coupling could be recovered, indicating that the D2 region alone does not determine the functional differences between RyR1 and RyR2 [233].

Recently, using a yeast two-hybrid approach, a second region in RyR1 corresponding to residues 1837-2168 has been proposed to bind to the portion 720-765 of the II-III loop of the α_{1s} subunit of DHPR, suggesting that more domains in RyR1 might be involved in RyR1/DHPR interaction [159]. Expression of different RyR1/RyR2 chimeras in dyspedic myotubes showed that replacement of region 1626-3686 of RyR2 with the corresponding region 1653-3720 of RyR1 (named chimera R4) restored almost completely the skeletal muscle type E-C coupling in transfected cells. Interestingly, at least two non-overlapping regions inside chimera R4, corresponding to residues 1635-2559 and 2659-3720

can partially restore skeletal muscle E-C coupling [161]. Similarly, expression of chimeric channels where regions 2508-3088 and 1798-2617 of RyR3 were replaced with the corresponding regions of RyR1 (namely residues 1924-2446 and 2644-3223 in RyR1) restored skeletal muscle E-C coupling in dyspedic myotubes, suggesting that full functional coupling may result from interaction of DHPR with multiple regions in RyR1 [153].

The physiological role of the different RyR isoforms in the regulation of intracellular Ca^{2+} signalling has been addressed by generation of knockout mice. Mice carrying a targeted disruption of the RyR1 gene show complete loss of the skeletal muscle E-C coupling and die perinatally due to respiratory failure [160, 196]. Skeletal myotubes from RyR1 knockout mice fail to respond to electrical stimulation, although they retain the ability to release Ca^{2+} in response to caffeine [196]. As the RyR3 isoform is expressed in skeletal muscles, it has been proposed that this residual Ca^{2+} release could be mediated by this isoform [36, 197]. RyR3 is expressed in all skeletal muscles in the late stages of fetal development and between 2-3 weeks after birth. Later on RyR3 levels progressively decrease and this isoform is no longer detected in adult mouse muscles with the exception of the diaphragm muscle. In agreement with this pattern of expression, RyR3 knockout mice showed impairment of muscle contraction during the first weeks after birth. Tension developed following electrical stimulation was significantly lower in RyR3 knockout than in control mice, and an even stronger difference was observed when neonatal muscles were exposed to high caffeine concentrations [16]. By contrast, no significant difference between normal and RyR3 knockout mice was observed when analysing skeletal muscles from adult mice. The reduced contractility observed following electrical and caffeine stimulation in RyR3 knockout mice during the first weeks after birth is in agreement with a preferential expression of RyR3 during this developmental stage and suggests a qualitative contribution of RyR3-mediated Ca^{2+} release to regulation of contraction in neonatal skeletal muscles [16]. Interestingly, Yang et al., 2001 reported that the time required for diffusion of a Ca^{2+} signal following depolarisation from the membrane to the central region of a muscle fiber is higher in RyR3 knockout mice compared to control, suggesting that co-expression of RyR3 with RyR1 contributes to build a system of amplification which results in a more uniform and synchronous activation of Ca^{2+} release across the neonatal skeletal muscle fiber [236].

RyR1/RyR3 double mutant mice do not actively move and die after birth as was the case of RyR1 deficient mice [11, 78]. Double knockout mice confirm the functional data obtained from single knockout mice, showing a complete loss of E-C coupling and contraction in response to caffeine and ryanodine stimulation indicat-

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ing the absence of all ryanodine/caffeine sensitive pathways of Ca^{2+} release. Morphological analysis of double knockout muscles shows a severe muscular damage with loss of myofibrillar protein content [11].

Similarly to what observed in RyR1 knockout mice, generation of mice carrying a targeted disruption of the RyR2 gene indicated a pivotal role of this isoform in cardiac E-C coupling and during myocardial development. RyR2 knockout mice die at embryonic day (E) 10 and show morphological abnormalities in the heart tube. Mutant cardiac myocytes loose functional channel activity and no residual caffeine response can be detected. In addition, cardiac myocytes present ultrastructural defects as large vacuoles in the sarcoplasmic reticulum and abnormal mitochondria. It has been proposed that these abnormalities may be due to excessive overload of intracellular Ca^{2+} stores and mitochondria indicating that during myocardial development, RyR2 is required for intracellular Ca^{2+} homeostasis in myocytes [199].

Studies on RyR3 knockout mice have been also extended to other tissues than skeletal muscle, such as the nervous system and smooth muscles, where this isoform has been found to be expressed. Behavior tests showed that RyR3 knockout mice display a higher speed of locomotion, defects of spatial working memory and learning, suggesting an involvement of RyR3 in mechanisms of behavior associated with hippocampal activity [8, 90, 198]. Further studies by Balshun et al., have investigated the eventual role of RyR3 in LTP, which is thought to mediate processes of learning and memory formation at the cellular level. Actually, while no differences between RyR3 knockout mice and control were present in LTP generated by a strong tetanization protocol, LTP induced by a weak tetanization protocol and depotentiation were markedly changed by RyR3 deletion, suggesting a role of RyR3 in certain types of hippocampal synaptic plasticity [8].

A final field of investigation regarding RyR function is represented by studies on smooth muscle. In particular, the contribution of RyR isoforms to generation of localized Ca^{2+} release events in smooth muscle has been investigated. In smooth muscle, depending on membrane potential, Ca^{2+} sparks can trigger activation of Ca^{2+} -activated K^+ channels (BK), causing generation of "spontaneous transient outward currents" (STOCs) or activation of Ca^{2+} -activated Cl^- channels (ClCa), causing generation of "spontaneous transient inward currents" (STICS) [245]. Smooth muscle cells express different combinations of the three RyR isoforms. In order to identify which isoform could be responsible for generation of Ca^{2+} sparks in rat portal vein myocytes, Mironneau and colleagues used an antisense oligonucleotide strategy. They found that inhibition of either RyR1 or RyR2 strongly reduced generation of spontaneous Ca^{2+} sparks in myocytes following membrane depolarization, suggesting that these elementary Ca^{2+} release events may results from activation of mixed Ca^{2+} re-

lease units that require the presence of both channel types [37]. By contrast, inhibition of RyR3 by means of isoform-specific antisense oligonucleotides did affect neither Ca^{2+} sparks generation nor caffeine-induced Ca^{2+} release, indicating that both RyR1 and RyR2, but not RyR3, were required for Ca^{2+} release during Ca^{2+} sparks [37]. In contrast, in skeletal muscle, both RyR1 and RyR3 were found to contribute equally to generation of Ca^{2+} sparks [34, 35, 185]. In further studies performed by the same authors on rat portal vein myocytes and non-pregnant mouse myometrial cells, RyR3 activation was observed only by conditions of increased SR Ca^{2+} load, suggesting the existence of isoform specific mechanisms for the regulation of RyRs [130, 131]. In partial agreement with the previously described data, Löhn and co-workers reported that in arterial smooth muscle cells, RyR3 is apparently not involved in Ca^{2+} sparks generation. In particular, they measured the spatial-temporal characteristics of Ca^{2+} sparks in cells prepared from RyR3 knockout mice compared to control mice. No difference in amplitude, width and duration of Ca^{2+} sparks could be observed in RyR3 knockout cells compared to control. However, analysis of BK current activation in RyR3 knockout mice revealed a significant increase in the STOCs frequency compared to control, suggesting that, at least in this cellular model, RyR1 and RyR2 may contribute to Ca^{2+} release underlying a single spark, while RyR3 channels may control the basal Ca^{2+} spark frequency, although through a not yet defined mechanism [102].

Interestingly, a recent study by Jiang et al., reported that most of smooth muscle tissues from rabbit express a splice variant of RyR3 that contains a deletion of 87 base pair encompassing a predicted transmembrane segment [80]. Expression of the corresponding cDNA in HEK293 cells revealed that RyR3 subunits coded by this splice variant transcript could not form functional channels. However, they were found to combine with wild type RyR3 channel subunits to form heterotetrameric proteins that display a reduced caffeine sensitivity compared to homo-tetrameric RyR3, suggesting that expression of splice variant RyR3 transcripts in smooth muscle tissues may contribute a novel mechanisms to regulate intracellular Ca^{2+} signaling in these cells [80].

RyR Binding Proteins

The functional activity of RyRs is regulated by association with multiple proteins that may interact with both the N-terminal/cytoplasmic regions of the receptors and with domains facing the lumen of the endoplasmic reticulum. RyRs have been described to form a multi-protein complex that includes calsequestrin, a high capacity Ca^{2+} binding protein located on the junctional SR, triadin and junctin that anchor calsequestrin to the inner face of the junctional SR membrane [109, 239]. The large cytoplasmic domain of RyRs has been found to bind several accessory proteins that include the

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FK506 binding protein FKBP12 [22, 23, 124], calmodulin [128, 133, 134, 218, 231, 232, 241], protein kinases [38, 165, 166, 173, 174, 190, 192, 227], phosphatases [112, 117, 120, 174], S100 [208], sorcin [129] and homer proteins [77].

FKBP12

FKBP12 is a cis-trans prolyl isomerase, originally identified as the receptor for the immunosuppressant drugs FK506 and rapamycin. The FKBP family includes at least five members, with molecular masses from 12 to 52 kD. FKBP12 has been found to be tightly associated with the RyR1 Ca^{2+} channel [24, 81, 163]. Evidence for the association of FKBP12 and RyR1 came first from cloning and protein sequencing studies. Indeed, an additional peptide isolated from peptide mapping of purified skeletal muscle RyRs was identified as the N-terminal region of FKBP12 [33]. In addition, FKBP12 copurified with RyR1 during column chromatography and sucrose density centrifugation and anti-FKBP12 antibodies can immunoprecipitate RyR1 from purified preparations [237]. FKBP12 is localised in the terminal cisternae of the sarcoplasmic reticulum and not in the longitudinal tubules [237]. The stoichiometry of FKBP-RyR has been found to be one molecule of FKBP for a RyR protomer [203, 213, 214].

Numerous studies indicate that FKBP12 can regulate the ryanodine receptor activity. Incubation of muscle vesicles with FK506 or rapamycin removes FKBP12 from RyRs. The FKBP12 devoid channel is activated by lower concentration of Ca^{2+} or caffeine, displays longer mean open times and greater open probability and requires greater Mg^{2+} concentration for inactivation [Timerman 1995, 58, 125, 203, 219, 226]. In addition, recombinant RyR1 proteins expressed in non-muscle experimental models, such as Sf9 cells or *Xenopus* oocytes, as well as skeletal muscle channels treated with FK506, exhibit subconductance opening states to four distinct levels [1, 21, 29]. These effects can be reversed upon addition or co-expression of recombinant FKBP12 in Sf9 cells, suggesting that FKBP12 can enhance the cooperativity among the four subunits of RyRs, resulting in full conductance channels, with decreased open probability and stabilising the closed conformation of RyRs [21]. Other functions that can be mediated by FKBP12 are the “couple gating”, that is the simultaneous gating of multiple channels [119, 147, 148], the “rectification” of RyR1, in which FKBP12 induces unidirectional block of Ca^{2+} currents from the cytosol to the SR lumen [30, 106] and the “adaptation”, inducing the response of RyRs to repeated caffeine applications [73]. In addition, a more specific role of FKBP12 in the E-C coupling mechanism has been recently proposed by different authors [6, 43, 144]. In particular, it has been demonstrated that activation of RyR1 channels by peptides derived from the II-III loop of the skeletal DHPR can be substantially reduced after FKBP12 depletion [43, 144]. In addition, disruption of FKBP12 binding to

RyR1 was shown to severely compromise voltage-gated SR Ca^{2+} release, suggesting that FKBP12 could gain E-C coupling in the skeletal muscle [6].

In addition to FKBP12, another isoform of FKBP, the FKBP12.6 protein was found to be able to bind RyRs. Interestingly, the FKBP12.6 protein can bind selectively the RyR2 isoform of RyRs [22, 94, 124, 204, 205, 228], while RyR1 and RyR3 can bind both FKBP12 and FKBP12.6 [10, 23, 205]. As previously discussed, binding of FKBP12 to RyR1 can regulate channel activity. In contrast, the role of FKBP12.6 in the regulation of RyR2 is still controversial. Single channel recordings of RyR2 channels indicated that removal of FKBP12.6 from RyR2 increases the open probability of the channel and induces the appearance of long-lasting subconductance states [85, 226]. Conversely, Timerman et al. showed that depletion of FKBP12.6 from RyR2 channels did not significantly change the open probability of RyR2 nor the re-addition of FKBP12.6 to depleted channels alters the gating properties of RyR2 [205].

Recently, a direct correlation between dissociation of FKBP12.6 from RyR2 and development of heart failure has been proposed by Marks and co-workers [112, 117]. They reported that PKA phosphorylation of RyR2 can induce dissociation of FKBP12.6 from the channel, resulting in increased channel activity [112, 117]. Interestingly, hyperphosphorylation of RyR2 and depletion of FKBP12.6 has been reported in failing hearts [117, 149, 165, 167, 235]. Accordingly to the model proposed by Marx this condition may induce a defective channel function that may lead to delayed after depolarization and ventricular arrhythmias [111-114, 221, 222]. Interestingly, in heart failure, not only RyR2, but also RyR1 in skeletal muscles was found to be hyperphosphorylated by PKA [168, 216]. Hyperphosphorylation of RyR1 results in FKBP12 depletion from the channel that leads to an increased channel activity, impaired Ca^{2+} release from the sarcoplasmic reticulum due to appearance of leaky channels and early fatigue in skeletal muscle during heart failure [168]. Nevertheless, although intriguing, the role of phosphorylated RyR channels in muscle physiology is still controversial. Actually, other studies failed to detect dissociation of FKBP12.6 from phosphorylated RyR2 channels, suggesting that other mechanisms may be involved in altered channel function in failing hearts [227].

Additional insights on the role of FKBP12 on RyRs activity *in vivo* come from studies on knockout mice for FKBP12 and FKBP12.6 genes [Shou et al., 1998, 229]. The majority of FKBP12 deficient mice die between E14.5 and birth because of severe dilated cardiomyopathy and ventricular septal defects. At E18.5 FKBP12 knockout mice show dramatically enlarged hearts with ventricular septal defects, increased cavity diameters, thinner left ventricular walls, hypertrophic trabeculae, and deep intertrabeculae recesses. Mutant hearts also show diminished fractional shortening and ejection frac-

tion, compared to control, indicating a depression of contractile activity in the ventricular wall. Despite the role of FKBP12 in regulation of RyR1 activity, no evident skeletal muscle abnormalities could be observed in FKBP12 mutant mice. In addition, single channel recordings show increased open probability and subconductance states both for RyR1 and RyR2 channels. These data indicate that FKBP12 can alter the properties of both RyR1 and RyR2 and that FKBP12.6 cannot functionally replace FKBP12 in the heart [Shou et al., 1998].

In contrast, FKBP12.6 knockout mice grow normally and are fertile. Studies on cardiac myocytes derived from FKBP12.6 knockout showed a marked increase in calcium induced calcium release (CICR) gain, that is a much larger release from the sarcoplasmic reticulum following membrane depolarization. The increase in CICR gain was associated with a greater contraction of mutant ventricular myocytes compared to control. In addition, Ca^{2+} sparks in knockout cardiomyocytes were increased in amplitude and size and were longer in duration compared to wild type cells, suggesting that depletion of FKBP12.6 from RyR2 may result in longer channel opening [229]. Interestingly, the Ca^{2+} overload that results from altered RyR2 activity has been found to be associated with cardiac hypertrophy, but only in male hearts, suggesting activation of different adaptation mechanisms in male and female that have been proposed to involve oestrogen receptor signalling [229].

Calsequestrin

Calsequestrin is a high capacity Ca^{2+} binding protein localised to the junctional face membrane of the sarcoplasmic reticulum [53, 108]. Anchoring to the membrane seems to be mediated by interaction with two integral membrane proteins, junctin and triadin [70, 83, 89, 183, 239]. In particular, an asp-reach region corresponding to amino acids 354-367 of calsequestrin has been found to bind triadin in a Ca^{2+} dependent manner [183]. The localisation of calsequestrin to the junctional membranes of the sarcoplasmic reticulum favours the accumulation of large amounts of Ca^{2+} ions in proximity of their release sites, the RyRs [54, 135]. Actually, a quaternary complex between calsequestrin, triadin, junctin and RyR was proposed to be localised to the inner face of the junctional sarcoplasmic reticulum [64, 239]. The effect of calsequestrin on RyRs activity is still controversial. [^3H]ryanodine binding to solubilized SR membranes was found to be potentiated by the addition of calsequestrin [145]. Similarly, the open probability of RyRs incorporated into lipid bilayers was increased when calsequestrin was added to the luminal side of the channel [86]. The effect of calsequestrin on RyRs activity has been proposed to be dependent on its phosphorylation state. Namely, dephosphorylated calsequestrin induced channel opening of purified RyRs in the presence of 1 mM Ca^{2+} , while phosphorylated calsequestrin had apparently no effect [193]. C2C12 cells overex-

pressing calsequestrin showed an enhancement of both caffeine and voltage-induced Ca^{2+} release, associated with an increase in Ca^{2+} storage in the sarcoplasmic reticulum [184]. Similarly, cardiac myocytes overexpressing calsequestrin showed an increase of caffeine induced Ca^{2+} release, but an impairment of I_{Ca} -induced Ca^{2+} release [84] and a reduced frequency of Ca^{2+} sparks [215]. Likewise, Beard et al., reported that binding of calsequestrin suppresses RyR1 single channel activity in lipid bilayers whereas dissociation of calsequestrin was found to enhance channel opening [12]. It has still to be defined, however, whether the inhibitory effect of calsequestrin on RyRs activity is mediated by binding to other proteins, like triadin [12] and, in the case of cardiac myocytes overexpressing calsequestrin, by the increase in Ca^{2+} load of the sarcoplasmic reticulum that may itself exhibit a negative effect on RyR regulation [84].

Triadin and junctin

Junctin and triadin are integral membrane proteins localised to the terminal cisternae of the sarcoplasmic reticulum of both skeletal and cardiac muscles that share structural and amino acid sequence similarities [20, 26, 69, 71, 76, 83, 87, 88, 116, 224]. Both proteins contain a single membrane domain that is 62% identical, a short N-terminal cytoplasmic domain and a long C-terminal tail located in the SR lumen with a long run of alternating positively and negatively charged amino acids, rich in lysine and glutamic acid [71, 83, 87, 115]. Junctin can bind directly to calsequestrin, triadin and RyR and the site of interaction is localised in the C-terminal domain of junctin (residues 46-210 of canine cardiac junctin) [239]. Triadin is also able to bind junctin, calsequestrin and RyR via its luminal domain corresponding to residues 69-264 of rabbit cardiac triadin [70, 99, 239]. These properties indicate a direct role of triadin and junctin as anchoring proteins to support the accumulation of calsequestrin to the junctional face membranes close to the RyRs.

High affinity binding sites for RyR1 have been located to the segment corresponding to amino acids 110-280 of the skeletal muscle triadin [27]. On the other hand, the specific binding sites for triadin are located in the second intraluminal loop of RyR1 at residues D4878, D4907 and E4908 and the interaction between these two proteins requires the presence of the KEKE motif (amino acids 200-232) in triadin [96, 97]. Interestingly, *in vitro* studies on purified RyR1 showed that the cytoplasmic region of triadin can modulate channel activity [67, 145]. Actually, [^3H]ryanodine binding to solubilized, but not native SR membrane was found to be significantly higher in triadin depleted membranes than in control [145]. In addition, application of triadin to the cytoplasmic side, but not to the luminal side of RyR1 channels reconstituted in lipid bilayers reduced the open probability of the receptors [145]. Another study by Groh et al. pointed to the role of the cytoplasmic region

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of triadin in RyR1 modulation [67]. Using a plasmon resonance spectroscopy, a specific cytoplasmic domain corresponding to residues 18-46 of triadin has been found to interact with RyR1 in a Ca^{2+} dependent manner. Antibodies directed against the region of triadin interacting with RyR1 were found to inhibit Ca^{2+} release from the SR and to decrease the open probability of RyR1 channels [67].

Calmodulin

Calmodulin (CaM) is a Ca^{2+} binding protein containing four EF-hand type Ca^{2+} binding motifs, in the N-terminal and in the C-terminal regions. Both the N-terminal and C-terminal lobes of CaM can bind RyR1 at either high and low Ca^{2+} concentrations and each lobe has two possible binding sites [171, 172, 230]. The effect of calmodulin on RyRs activity was shown to be relatively complex and to be dependent on different factors. In the presence of CaM, the threshold for activation of RyR1 in [^3H]ryanodine binding experiments was found to be shifted to lower Ca^{2+} concentrations, suggesting that CaM may increase the sensitivity of RyR1 to Ca^{2+} dependent activation. Actually, the effect of calmodulin on RyR1 activity was shown to be dependent on Ca^{2+} concentration. At nanomolar Ca^{2+} concentration, calmodulin activates RyR1 channels, while at micromolar Ca^{2+} concentrations, calmodulin was shown to inhibit channel activity [209]. In addition, the effect of calmodulin on RyR1 is also dependent on Ca^{2+} binding to calmodulin. In its Ca^{2+} -free state (ApoCaM), calmodulin enhances RyR1 activity, while in its Ca^{2+} bound state (CaCaM) it inhibits the channel (Rodney et al., 2000). In order to understand the molecular basis of RyR regulation by calmodulin, numerous attempts aimed to identify the specific binding sites on both molecules have been performed. Each RyR tetramer can bind four molecules of calmodulin both in the absence and in the presence of Ca^{2+} [7, 133]. In particular, ApoCaM and CaCaM bind to overlapping sites located between residues 3614-3643 of RyR1 and 3583-3603 of RyR2 [133, 231, 232]. Namely, CaCaM was found to bind synthetic peptides matching amino acids 3614-3643 and 3614-3634, whereas apoCaM binds only the first peptide [171]. Mutations of residues 3624 and 3620 result in loss of high-affinity binding of CaM to RyR1. Expression of L3624D mutated RyR1 channels in dyspedic myotubes completely restored voltage-gated SR Ca^{2+} release, indicating that binding of calmodulin to RyR1 is not essential for E-C coupling in skeletal muscle [143]. However, expression in dyspedic myotubes of RyR1 channels lacking region 3614-3643 resulted in a dramatic reduction in depolarization, caffeine and 4-chloro-m-cresol- induced Ca^{2+} release and in changes in conductance and channel gating, suggesting that this domain may be important in the modulation of channel activity [244]. In addition, recent studies by Zhang et al. showed that CaCaM and ApoCaM can also bind to region 1975-1999 of RyR1 [241]. Within region

3614-3643, cysteine 3635 was found form a disulphide bond with the corresponding cysteine on an adjacent subunit in the RyR1 tetramer. Interestingly, binding of either CaCaM or apoCaM to RyR1 can block the inter-subunit disulphide bond formation, suggesting that calmodulin could be involved in redox modulation of RyR1 [134, 241]. Using calmodulin mutants in either the C-terminal or N-terminal lobes, Rodney et al. proposed a model in which the binding of Ca^{2+} to the C-terminal lobe of calmodulin is responsible for its conversion from an activator to an inhibitor of RyR1. Indeed, calmodulin mutants in the C-terminal lobe increase channel activity, while mutants in the N-terminal lobe inhibits RyR1 channels [172]. More recently, a second model for calmodulin/RyR1 interaction was proposed by Xiang et al. Accordingly to this model, the N-terminal and C-terminal lobes have each two possible binding sites on RyR1 (C1-C2 and N1-N2). The binding site of the C-terminal lobe is located within region 3614-3643 of RyR1 and which of the two possible sites is occupied by the lobe depends on interaction of the C-lobe with Ca^{2+} . Namely, binding of Ca^{2+} induces an N-terminal shift in the site of interaction of the C-terminal lobe (C1 to C2). The N-terminal lobe can bind alternatively sites N1 and N2. Occupancy of one of the two N sites depends on the location of the C-terminal lobe. In particular, when Ca^{2+} is bound and the C2 site is occupied, the N2 site is favoured and the opposite occurs at low Ca^{2+} . Occupancy of the N1 binding site increases the activity of the channel, while occupancy of the N2 binding site would inhibit the channel [230]. In addition, previous studies indicated the presence of CaM binding site to residues 2937-3225, 3610-3629 and 4534-4552 of RyR1 [128].

As regards RyR isoforms other than RyR1, controversial results have been obtained. [^3H]ryanodine binding to RyR2 was found to be inhibited by CaCaM at Ca^{2+} concentrations lower than 10 μM , while no effect could be observed at 100 μM Ca^{2+} [7]. In addition, at difference with RyR1, apoCaM binding to RyR2 resulted in channel inhibition [7]. By contrast, results from Fruen et al., indicate that CaM has no significant effect on Ca^{2+} dependent activation of [^3H]ryanodine binding to RyR2 channels [55, 56]. As to RyR3, CaM has been shown to exert both potentiating and inhibitory effects on CICR at low ($\text{pCa}>6$) and high ($\text{pCa}<5.5$) Ca^{2+} concentrations, respectively [79].

VES1/Homer

Homer proteins are a family of proteins that have been described to mediate clustering of metabotropic glutamate receptors [211]. The C-terminal tail of homer proteins contains a coiled-coil domain responsible for self-multimerization. The N-terminal region of homer proteins contains an Enabled/Vasp homology domain (EVH1) that is essential for binding to target proteins that contain a prolin rich motif (PPXXF) [211]. Known targets of homer proteins are the glutamate receptor

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mGluR1a, mGluR5a/b [4, 169, 211], the inositol 1,4,5-trisphosphate receptors [177, 211] and the cytoplasmic Shank proteins [142, 212]. The prolin-rich motif responsible for binding to homer proteins is also present in the RyR1 sequence. Immunoprecipitation and GST pull-down experiments by Feng et al., showed that RyR1 could interact with homer1c, homer 2 and homer3, although with different affinities and depending on the SR preparations [49]. In contrast, pull-down experiments and immunofluorescence studies on mouse skeletal muscle fibers did not show any co-precipitation or co-localization between homer 1a and/or 1b isoforms and RyR1 [177].

The effect of homer proteins of RyRs activity has not been completely defined. Single channel experiments performed in the presence of either homer1c and homer1 lacking the multimerization domains showed that homer proteins can enhance RyR1 channel open probability [49]. Furthermore, addition of homer proteins to skeletal muscle junctional membranes resulted in an increase in [³H]ryanodine binding, suggesting that these proteins may act as physiological modulators of RyR1. This activity is conferred by the EVH1 domains and is enhanced by homer multimerization [49]. More recently, a differential activity of homer1c (or V-1L) and of its short form lacking the coiled-coil domain (V-1S) on RyR1 activity has been reported [77]. In particular, both forms of homer can bind RyR1, but only homer1c (V-1L) can increase RyR1 activity in single channel recordings and in Ca²⁺ release experiments on rat skeletal muscle microsomes, whereas no effect could be observed for the short form. Nevertheless, increasing concentrations of V-1S decreased the effect of V-1L, likely by competing for the same binding site on RyR1 [77]. An opposite effect of V-1L has been reported by Westhoff et al., on RyR2. Actually, V-1L was shown to bind RyR2 but, at difference with RyR1, it reduced the channel activity both in experiments performed in intact cells and in single channel recordings. Similarly to what observed for RyR1, however, the short form of homer1c, V-1S was found not to exert any significant effect on RyR2 [223].

Recent studies on frog skeletal muscle fibers showed that both V-1L and V-1S were effective in increasing Ca²⁺ sparks frequency, without altering other spark parameters, such as the temporal properties [217]. These effects were also observed in [³H]ryanodine binding experiments and were counteracted by addition of homer proteins containing a mutation in the RyR-interacting domain (EVH1). On this bases the authors proposed a model in which the EVH1 domain is responsible for RyR activation by increasing RyR1 sensitivity for CICR. Interestingly, the effect of the two homer forms, long and short, was found to be additive, suggesting that, although the coiled-coil domain is not essential for RyR activation, it may be important to induce mul-

timeric association of RyRs that promotes Ca²⁺ spark activation [217].

RyR and Human Diseases

The human RYR1 gene is located on chromosome 19q13.1 and is composed of 106 exons spanning a genomic region of approximately 158 Kb [154].

Mutations in the RYR1 gene have been demonstrated to be linked to three muscle genetic disorders, malignant hyperthermia (MH), central core disease (CCD) and multi-minicore disease (MmD) [50, 107, 126, 132, 238]. MH is an autosomal-dominant inherited disorder that causes spasm tachycardia and hyperthermia in susceptible patients when exposed to volatile anaesthetics and muscle relaxants. Clinical diagnosis of MH is carried out by *in vitro* contracture tests performed on muscle tissues obtained by biopsies exposed to halotane and caffeine. CCD is a rare non-progressive autosomal dominant congenital myopathy, characterized by hypotrophy and hypotonia in the infancy. The clinical diagnosis is performed by histological analysis of sample muscles that usually reveals the presence of abundant central “cores” characterised by mitochondria depletion and sarcomere disorganization in type I fibers. CCD is closely associated with MH susceptibility, while only a fraction of MH patients is affected by CCD. MmD are also congenital myopathies, but, unlike CCD, they are characterized by appearance of small regions with sarcomeric disruption and lack of mitochondria in both fiber types I and II [68, 132].

The causative molecular defect for both MH and CCD has been proposed to lie in an altered release of Ca²⁺ through RyR1 channels that may lead either to a rapid and high increase in the myoplasmic Ca²⁺ concentration in response to volatile anaesthetics in MH patients or to a chronic Ca²⁺ overload in muscles of CCD patients. So far, clusters of mutations linked to MH/CCD have been described in the myoplasmic domain of RyR1 and in the C-terminal region. In particular, three hot spots of mutations have been identified in the N-terminal region (amino acids 35-614), in the central region (amino acids 2117-2787) and in the C-terminal region (amino acids 4136-4973). The substituted residues at the mutated sites are highly conserved among RyR isoforms and across species [127].

In the last decade, a detailed investigation of the causal role of single RyR1 mutations in the development of CCD/MH has been performed by *in vitro* characterization of RyR1 channels expressed either in HEK293 cells or in muscle cells. In general, mutated RyR1 exhibit a higher sensitivity to channel activators like caffeine or 4-chloro-cresol [63, 207, 220, 236] or prolonged ion channel open time which causes a transient increase in cytosolic Ca²⁺ levels, that can cause glycogenolysis, ATP depletion and muscle damage [103, 127, 186]. Interestingly, cells expressing CCD mutations show a lower intraluminal Ca²⁺ content as revealed by thapsigargin treatment, suggesting that the

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mutated channels may behave as leaky channels that cause Ca^{2+} depletion from intracellular stores [202]. Accordingly, measurements of resting Ca^{2+} in HEK293 cells transfected with either MH or MH/CCD mutations showed that the latter display higher cytosolic Ca^{2+} concentrations and low luminal Ca^{2+} content compared to MH mutations, supporting the hypothesis that channels carrying mutations linked to CCD may cause a chronic increase in intracellular Ca^{2+} in muscle cells from affected patients [207]. Although studies on HEK293 cells have revealed to be a convenient model to study RyR1 functional activity, they have the disadvantage not to represent the physiological environment in which RyRs are expressed. Actually, more recent studies performed in muscle cells allowed to identify new effects of RyR1 channels carrying the mutation I4897T (identified in a patient affected by CCD) on voltage gated Ca^{2+} release and interaction with DHPRs. In HEK293 cells, the I4897T mutated channels were found to behave as leaky channels, leading to an increase of the resting Ca^{2+} concentration and a decrease in the Ca^{2+} store content [105]. However, expression of the same mutation in dyspedic myotubes did not induce any alteration in the resting Ca^{2+} concentration nor in the Ca^{2+} store content. Actually, electrophysiological studies on dyspedic myotubes expressing the I4897T mutated proteins revealed that these channels lacked voltage gated Ca^{2+} release indicating that they were uncoupled from sarcolemmal excitation and DHPR activation [5, 39, 105]. On this basis, although many advances have been performed in the last years in understanding the causative role of RyR1 mutations in the development of MH/CCD, a more comprehensive characterization of these diseases requires defining not only the functional properties of RyR1 channels but also understanding their interactions with accessory proteins, such as DHPR or FKBP12. Likewise, mutations in the RyR1 gene have been also found in patients that present with heterogeneous classes of myopathies characterized by the presence of multiple cores (MmD). Interestingly, some severe recessive forms of MmD with mutations in the RyR1 gene, associated with ophthalmoplegia have been also reported [68, 132], suggesting that existence of large genetic heterogeneity for distinct forms of myopathies.

More recently, missense mutations in the RyR2 gene have been identified in patients exhibiting catecholaminergic polymorphic ventricular tachycardia and arrhythmogenic right ventricular cardiomyopathy [60, 93, 157, 206]. The electrocardiograph pattern of this ventricular tachycardia closely resembles the arrhythmias associated with Ca^{2+} overload and the delayed afterdepolarizations observed during digitalis toxicity. Interestingly, these mutations lie in regions of RyR2 that correspond to those representing hot spots of mutation in the RyR1 gene, further suggesting that they may contain crucial domains for channel function. In particular the R176Q mutation found in some patients affected by ar-

rhythmogenic right ventricular cardiomyopathy type 2 corresponds exactly to the Arg163Cys mutation found in the RyR1 gene in patients affected by malignant hyperthermia. As discussed in the “FKBP12” section, binding of FKBP12.6 to RyR2 appears to contribute to channel stabilization. In agreement with these observations, hyperphosphorylation of RyR2 by PKA and depletion of FKBP12.6 has been reported in failing hearts [117, 149, 165, 168, 235]. Interestingly, some mutations in the RyR2 channels found in patients affected by exercise-induced arrhythmias were found to reduce the channel affinity for FKBP12.6 and to induce an increase of channel activity, suggesting that leaky RyR2 channels may be responsible for triggering fatal cardiac arrhythmias [222]. Nevertheless, a precise causative role of RyR2 mutations and FKBP12.6 depletion from mutated channels in the development of cardiac defects is still to be completely elucidated. *In vitro* expression of RyR2 channels carrying the R4497C mutation in HEK293 cells showed that the mutated channels exhibit an increase in basal channel activity as revealed by single channel recordings and [^3H]ryanodine binding assays [80]. Conversely, RyR2 channels carrying mutations S2246L, N4104K and R4497C expressed in HL-1 cardiomyocytes did not show any increase in basal activity, suggesting that appropriate regulation of RyR2 may require interaction with accessory proteins that are not expressed in HEK293 cells [60]. However, β -adrenergic stimulation of RyR2 mutated channels expressed in HL-1 cells led to abnormal Ca^{2+} release and FKBP12.6 dissociation due to PKA hyperphosphorylation of RyR2. Nevertheless, the extent of FKBP12.6 dissociation from RyR2 was found to be equivalent for wild type and mutated channels, indicating that appearance of the disease phenotype may not be entirely due to differential phosphorylation or selective dissociation of FKBP12.6 from mutated channels.

In conclusion, increasing evidence indicate that RyRs are involved in different diseases of the striated muscle tissue. However, a more detailed understanding of the molecular interactions between RyR channels and accessory proteins and how these interactions can regulate RyRs activity is still required in order to better understand the mechanisms leading to altered Ca^{2+} homeostasis in muscle cells.

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