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# Q1 Endothelial calcium dynamics, connexin channels and blood-brain barrier function

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#### ABSTRACT

Situated between the circulation and the brain, the blood-brain barrier (BBB) protects the brain from circulating toxins while securing a specialized environment for neuro-glial signaling. BBB capillary endothelial cells exhibit low transcytotic activity and a tight, junctional network that, aided by the cytoskeleton, restricts paracellular permeability. The latter is subject of extensive research as it relates to neuropathology, edema and inflammation. A key determinant in regulating paracellular permeability is the endothelial cytoplasmic  $Ca^{2+}$  concentration ( $[Ca^{2+}]_i$ ) that affects junctional and cytoskeletal proteins.  $Ca^{2+}$  signals are not one-time events restricted to a single cell but often appear as oscillatory  $[Ca^{2+}]_i$  changes that may propagate between cells as intercellular  $Ca^{2+}$  waves. The effect of  $Ca^{2+}$  oscillations/ waves on BBB function is largely unknown and we here review current evidence on how  $[Ca^{2+}]_i$  dynamics influence BBB permeability.

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*Abbreviations:* ARC, arachidonate-regulated Ca<sup>2+</sup> entry channels; BBB, blood–brain barrier; BCEC, bovine brain capillary endothelial cells; BK, bradykinin; CaM, calmodulin; CaMKII, Ca<sup>2+</sup>/calmodulin-dependent kinase II; cGMP, cyclic guanosine monophosphate; CRAC, Ca<sup>2+</sup> release-activated channels; Cx, connexin; ER, endoplasmic reticulum; GPCR, G-protein coupled receptor; ICAM1, intercellular adhesion molecule 1; InsP<sub>3</sub>, inositol 1,4,5-trisphosphate; InsP<sub>3</sub>R, inositol 1,4,5-trisphosphate receptor; MAPK, mitogen-activated protein kinase; MDCK, Madine–Darby canine kidney cells; MLC, myosin light chain; MLCK, myosin light chain kinase; MMP, matrix-metalloproteinase; NADPH oxidase, nicotinamide adenine dinucleotide phosphate oxidase; NFkB, nuclear factor κB; NMDA-R, N-methyl-D-aspartate-sensitive receptor; NOS, nitric oxide synthase; PAR, protease-activated receptor; p/sGC, particulate/soluble guanylyl cyclase; PKC, protein kinase C; PLA2, phospholipase A2; PLC, phospholipase C; ROS, reactive oxygen species; STIM, stromal interaction molecule; TRP, transient receptor potential; VASP, vasodilator-stimulated phosphoprotein; VEGF, vascular endothelial growth factor; ZO, zonula occludens.

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# 3. Conclusions and future perspectives. 000 Acknowledgements . 000 References . 000

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#### 1. Introduction

16 Reliable electrical signaling in the brain requires a strict 17 composition of the extracellular milieu around synapses and axons 18 which is maintained by the blood-brain barrier (BBB). The BBB is a 19 highly selective, lipophilic barrier situated between the systemic 20 blood circulation and the cerebral tissue that plays an essential role 21 in maintaining brain homeostasis: it determines the ionic 22 interstitial microenvironment, it prevents exo- and endogenous 23 toxins from entering the brain and it separates peripheral from 24 central neurotransmitter pools. The BBB is therefore crucial for 25 normal neuronal and glial activity (Abbott et al., 2010; Bradbury, 26 1993). The first indications of the presence of a BBB were, in 27 sequential order, provided by Ehrlich, Lewandowski and Goldman 28 who reported that aniline dyes are only able to stain the brain 29 tissue when administered via the intracerebroventricular route but 30 not when injected into the blood stream, and that ferrocyanide is 31 lethal at low doses when injected in the brain but requires doses a 32 100 times higher when injected in the blood stream [see 33 (Bechmann et al., 2006) for original citations]. Reese and 34 Karnovsky finally indicated that the anatomical basis of the 35 vertebrate BBB is the structurally and functionally unique 36 endothelium that lines the brain capillary lumens. The BBB 37 endothelial cells are interconnected by a sophisticated inter-38 endothelial junctional complex which consists of adherens 39 junctions and tight junctions that limit paracellular diffusion of 40 solutes from blood to brain (and vice versa) (Abbott et al., 2006; 41 Bechmann et al., 2006; Ge et al., 2005; Wolburg and Lippoldt, 42 2002). This restricted paracellular movement of (charged) solutes 43 is reflected in a relatively high transendothelial electrical resis-44 tance. The absence of pinocytotic activity and the presence of a 45 strictly regulated set of transport proteins and enzymes add up to the specific features of BBB endothelial cells (Abbott et al., 2010), 46 47 altogether rendering these vessels far less permeable to endoge-48 nous molecules (and tracer compounds) than their peripheral 49 counterparts. However, many, if not all, central nervous system 50 disorders including stroke, inflammation, Alzheimer's disease, 51 Parkinson's disease, epilepsy and multiple sclerosis are associated with an increased permeability of the BBB, either as a cause or 52 53 consequence, further aggravating the course of the disease 54 (Hawkins and Davis, 2005; Stanimirovic and Friedman, 2012; 55 Zlokovic, 2008). Most of the current knowledge focuses on the 56 harmful effects of a BBB permeability increase; it is however worth 57 to note here that BBB permeability changes are not always 58 deleterious, but may, for example, lead to attenuation of brain 59 edema (Campbell et al., 2012).

60 It is long known that Ca<sup>2+</sup> ions play an important role in the 61 control of BBB permeability. Normal BBB function is indeed disturbed when the extracellular Ca<sup>2+</sup> concentration [normally 62 63  $\sim$ 1.5 mM at the blood side and  $\sim$ 1 mM at the brain interstitial side (Somjen, 2004)] is decreased and/or the intracellular free Ca<sup>2+</sup> 64 65 concentration [[Ca<sup>2+</sup>]<sub>i</sub>, normally 50–100 nM (Hess et al., 1989; Koenig et al., 1989)] is increased. Decreased extracellular Ca<sup>2+</sup> 66 67 levels result in a disruption of cell-cell and cell-matrix adhesive 68 interactions (Wilhelm et al., 2007), but also give rise to dynamic changes in [Ca<sup>2+</sup>]<sub>i</sub> (De Bock et al., 2012a). With regard to [Ca<sup>2+</sup>]<sub>i</sub>-69 70 dependent BBB alterations, most of the current knowledge is 71 derived from work in ischemic conditions or work with vasoactive, 72 inflammatory substances. Many of these share the ability to trigger 73 a substantial increase in endothelial [Ca<sup>2+</sup>]<sub>i</sub> thereby activating

 $Ca^{2+}$ -sensitive signaling pathways. Preventing the  $[Ca^{2+}]_i$  increase 74 protects against BBB malfunctioning in many different experi-75 mental scenarios; hence,  $[Ca^{2+}]_i$  was identified as a major regulator 76 of BBB function (Abbott, 1991, 1998, 2000; Brown and O'Neil, 77 2009). In the Ca<sup>2+</sup> field it is largely acknowledged that Ca<sup>2+</sup> signals 78 do not only appear as simple one-time events restricted in time 79 and space (as for instance observed in neurotransmitter release), 80 but often occur as repetitive, oscillatory [Ca<sup>2+</sup>]<sub>i</sub> changes or spatially 81 spreading [Ca<sup>2+</sup>]<sub>i</sub> elevations that traverse the cell boundaries and 82 propagate as an intercellular Ca<sup>2+</sup> wave. In the BBB field, the effect 83 of Ca<sup>2+</sup> oscillations and intercellular Ca<sup>2+</sup> waves on barrier function 84 has hardly been studied and we here explore how such  $[Ca^{2+}]_i$ 85 dynamics can influence the BBB. Modulation of barrier function 86 can occur at different levels including alterations in (i) paracellular 87 permeability, (ii) pinocytotic activity and, (iii) transporter and 88 enzyme activity. Since little is known on Ca<sup>2+</sup>-regulation of 89 pinocytosis, enzymes or transporters in BBB endothelial cells, we 90 will focus in this review on the Ca<sup>2+</sup>-mediated increase in 91 paracellular permeability. The original observations outlined in 92 this overview are all derived from work with primary or 93 immortalized brain 'microvascular' endothelial cells unless stated 94 otherwise. It is however not always clear whether these 95 microvascular cells have a capillary origin and it is sparsely 96 documented to what extent BBB characteristics are maintained in 97 arteriolar and venular endothelial cells. Notably, in pre- and post-98 capillary segments where endothelial BBB characteristics are less 99 pronounced, the barrier function is aided by phagocytic scavenging 100 in the vessel wall and perivascular spaces, a process that is not 101 available in brain capillaries (Abbott et al., 2006; Bechmann et al., 102 2006; Ge et al., 2005). 103

#### 1.1. $Ca^{2+}$ as a major determinant of BBB function

About three decades ago, research on the participation of  $Ca^{2+}$  in 105 the regulation of BBB function was initiated by Søren-Peter Olesen 106 who published a series of reports highlighting the role of an 107 endothelial [Ca<sup>2+</sup>]<sub>i</sub> increase as an important determinant of BBB 108 permeability. Comparing a variety of vasoactive agents from 109 different chemical classes, Olesen concluded that substances 110 stimulating changes in permeability shared the common charac-111 teristic of increasing  $[\mathsf{Ca}^{2^+}]_i$  in endothelial cells from pial 112 microvessels (Olesen, 1985, 1989). Evaluating different second 113 messenger systems, Olesen further concluded that only a rise in 114 [Ca<sup>2+</sup>]<sub>i</sub> but not in the other major second messenger, cyclic 115 adenosine monophosphate (cAMP), decreased resistance in these 116 microvessels (Olesen, 1987). In the years that followed, the role of 117 Ca<sup>2+</sup> as an important second messenger involved in the regulation 118 of barrier function was further emphasized for different Ca<sup>2+</sup>-119 mobilizing, vasoactive and inflammatory agents as well as in 120 ischemic conditions. The study of pathogen and leukocyte passage 121 over the BBB has additionally brought up interesting insights on 122 endothelial [Ca<sup>2+</sup>]<sub>i</sub> changes and their relation to BBB functioning. 123

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Free cytoplasmic Ca<sup>2+</sup> represents only a small part of the total 124 cellular Ca<sup>2+</sup> reserve as most of the intracellular Ca<sup>2+</sup> is sequestered 125 into intracellular stores in order to prevent a potential deleterious 126 action of Ca<sup>2+</sup> ions in the cytoplasm, mitochondria and nucleus 127 where it can lead to the aggregation of proteins and nucleic acids, to 128 the precipitation of phosphates and to disruption of lipid 129 membranes (Case et al., 2007). The endoplasmic reticulum (ER) is 130 considered the predominant Ca<sup>2+</sup> store as it contains approximately 131

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