## SUPPLEMENTAL MATERIALS

## Dual effects of the small-conductance Ca<sup>2+</sup>-activated K<sup>+</sup> current on human atrial electrophysiology and Ca<sup>2+</sup>-driven arrhythmogenesis: an *in silico* study

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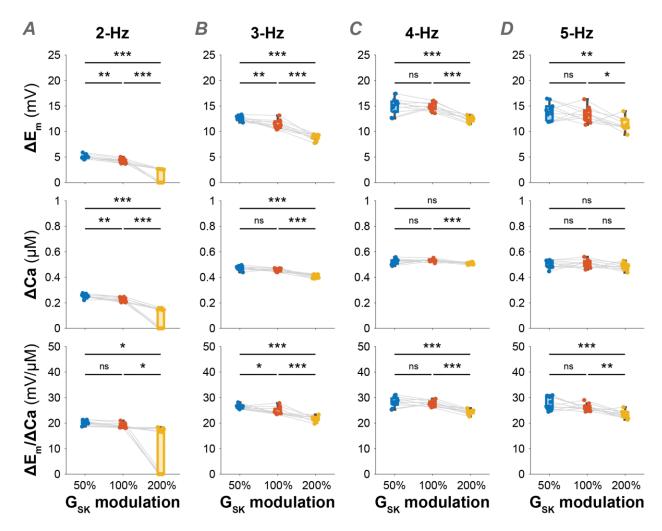


Figure S1. Increasing SK channel conductance enhances the repolarization force opposing Ca²+-dependent depolarization over a broad range of pacing rates. The analysis shown in Fig. 5B and C was performed varying the stimulation frequency. No voltage or  $[Ca^{2+}]_i$  oscillations were observed at 0.5 and 1-Hz pacing rates. We report here the summary data describing amplitude of membrane potential  $(E_m)$  and cytosolic  $Ca^{2+}$  concentration  $([Ca^{2+}]_i)$  oscillations  $(\Delta E_m$  and  $\Delta Ca)$ , and the  $\Delta E_m/\Delta Ca$  ratio in function of different values of SK channel maximal conductance  $(G_{SK})$  at 2 (1), 3 (B), 4 (C), and 5 Hz (D). Null values of  $\Delta E_m$ ,  $\Delta Ca$ , and  $\Delta E_m/\Delta Ca$  shown for 200%  $G_{SK}$  at 2-Hz pacing indicate absence of voltage or  $[Ca^{2+}]_i$  oscillations. Statistical analysis was performed by one-way ANOVA with Bonferroni correction (\*\*\*: p < 0.001; \*: p < 0.05; ns: not significant).

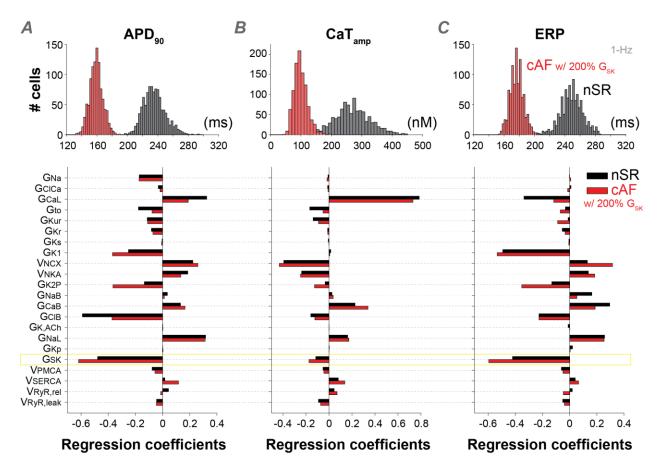


Figure S2. Sensitivity analysis performed simulating increased SK expression in chronic atrial fibrillation (cAF) vs. normal sinus rhythm (nSR). The analysis shown in Fig. 2 was replicated assuming increased  $G_{SK}$  in cAF vs. nSR myocytes. Top panels report histograms showing the distribution of action potential duration (APD) at 90% repolarization (APD<sub>90</sub>, A), Ca<sup>2+</sup> transient amplitude (CaT<sub>amp</sub>, B), and effective refractory period (ERP, C) assessed at 1-Hz pacing in nSR and cAF populations of 1,000 model variants. Bottom panels report the results of linear regression analysis performed to quantify the sensitivity of APD<sub>90</sub>, CaT<sub>amp</sub>, and ERP (assessed at 1-Hz pacing) to changes in the listed parameters in the nSR and cAF models. Simulated nSR data were obtained in a population of models built upon a baseline model with nominal SK channel maximal conductance (i.e., 100%  $G_{SK}$ ). Simulated cAF data were obtained in a population of models built upon a baseline model with increased SK channel maximal conductance (i.e., 200%  $G_{SK}$ ). Model variants exhibiting AP irregularities (1 in nSR, 4 in cAF) were excluded from the linear regression analysis.

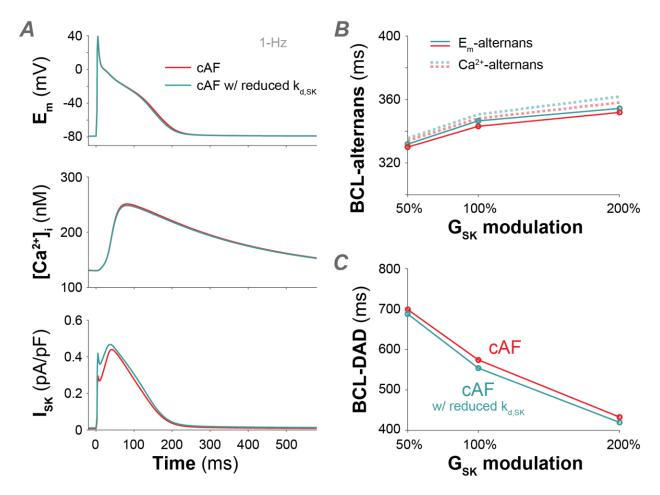


Figure S3. Increased SK channel  $Ca^{2+}$  affinity moderately affects atrial myocyte electrophysiology and arrhythmogenesis in cAF. A) Time course of  $E_m$ ,  $[Ca^{2+}]_i$ , and SK current ( $I_{SK}$ ) elicited in cAF myocytes during 1-Hz pacing with nominal (i.e.,  $K_{d,SK} = 350$  nM) or increased (i.e.,  $K_{d,SK} = 230$  nM) SK channel affinity for intracellular  $Ca^{2+}$ . B) Effect of  $K_{d,SK}$  modulation on the maximal basic cycle length (BCL) required for inducing voltage (solid lines) and  $Ca^{2+}$  (dotted lines) alternans in the baseline cAF model. C) Effect of  $K_{d,SK}$  modulation on the maximal BCL required for inducing delayed afterdepolarizations (DADs) in the baseline cAF model.

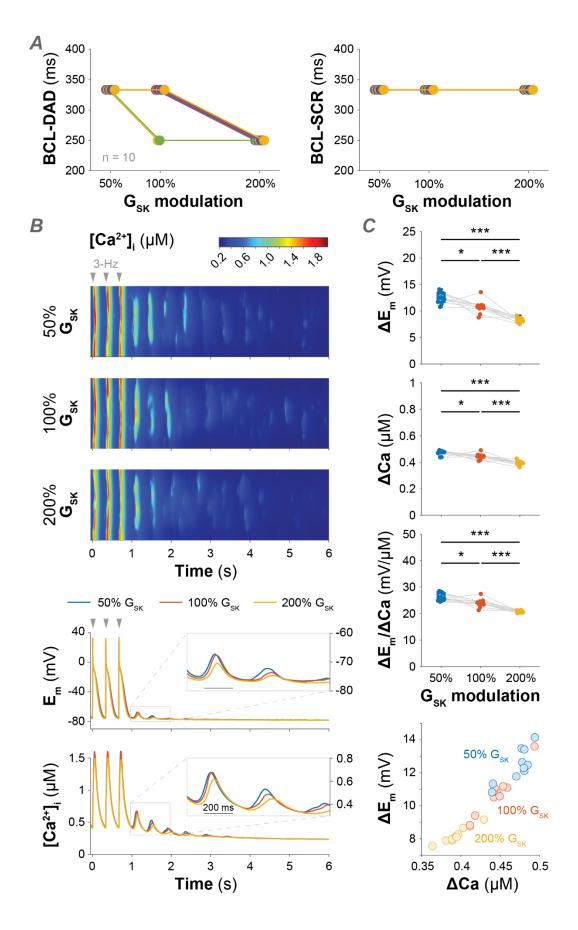


Figure S4. Increasing SK channel conductance enhances the repolarization force that counteracts DADs also when SK channel affinity for intracellular Ca2+ is increased. We replicated the simulations shown in Fig. 5 with increased SK channel affinity for intracellular Ca<sup>2+</sup> concentration (i.e., K<sub>d.SK</sub> reduced to 230 nM). A) Effect of changes in G<sub>SK</sub> on the maximal basic cycle length (BCL) inducing delayed depolarizations (DADs) and spontaneous Ca2+ release events (SCRs) in the 3D atrial myocyte model. We used 10 mV and 300 nM as thresholds for DADs and SCRs, respectively. The simulations were repeated for 10 randomly generated tubular structures with sparse tubular densities. B) Top panels show representative transverse line scans of local cytosolic Ca<sup>2+</sup> concentration obtained pausing the electrical stimulation after a train of impulses at 3-Hz pacing for different G<sub>SK</sub> values. The last three paced beats are reported in the figure. Bottom panels report the time course of corresponding global cytosolic Ca<sup>2+</sup> concentration and membrane potential. C) Summary data resulting from simulating the protocol described in panel B in the 10 different tubular structures. Top panels show amplitude of E<sub>m</sub> and [Ca<sup>2+</sup>]<sub>i</sub> oscillations ( $\Delta E_m$  and  $\Delta Ca$ ), and the  $\Delta E_m/\Delta Ca$  ratio in function of different  $G_{SK}$  values. Statistical analysis was performed by one-way ANOVA with Bonferroni correction (\*\*\*: p < 0.001; \*\*: p < 0.01; \*: p < 0.05; ns: not significant).  $\Delta E_m$  and  $\Delta Ca$  are also compared against each other in the scatter plot reported in the bottom panel.

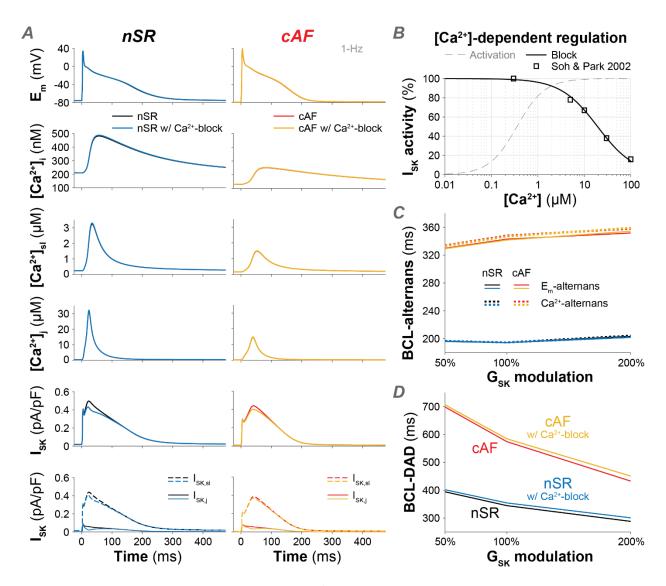


Figure S5. Inhibition of  $I_{SK}$  at high  $Ca^{2+}$  levels moderately affects atrial myocyte electrophysiology and arrhythmogenesis. A) Time course of  $E_m$ ,  $Ca^{2+}$  transients in cytosolic, sub-sarcolemmal, and junctional cleft compartments ( $[Ca^{2+}]_i$ ,  $[Ca^{2+}]_{sl}$ , and  $[Ca^{2+}]_i$ , respectively), and total SK current ( $I_{SK}$ ) and its sub-sarcolemmal and junctional cleft components ( $I_{SK,sl}$  and  $I_{SK,jl}$ ) elicited during 1-Hz pacing. These traces were obtained assuming that intracellular  $Ca^{2+}$  only causes  $I_{SK}$  activation (as done in all previous simulations), or that it also blocks  $I_{SK}$  at higher concentrations. B) Comparison between the formulations of  $Ca^{2+}$ -dependent  $I_{SK}$  activation ( $K_{d,SK}$  = 350 nM, dashed line) and block ( $IC_{50} \approx 20 \, \mu M$ , solid line) used in simulations.  $Ca^{2+}$ -dependent block is implemented as  $F_{block} = 1 - 1/(1 + \exp((log_{10}(0.0193)-log_{10}([Ca^{2+}]))/0.4)))$ , with  $[Ca^{2+}]$  expressed in mM. The symbols indicate the experimental data used to model  $Ca^{2+}$ -dependent block (Soh & Park, *Biophys J.* 2002 Nov;83(5):2528-38). C) Effect of  $Ca^{2+}$ -dependent block on the maximal BCL required for inducing voltage (solid lines) and  $Ca^{2+}$  (dotted lines) alternans in the baseline nSR and cAF models. D) Effect of  $Ca^{2+}$ -dependent block on the maximal BCL required for inducing DADs in the baseline nSR and cAF models.

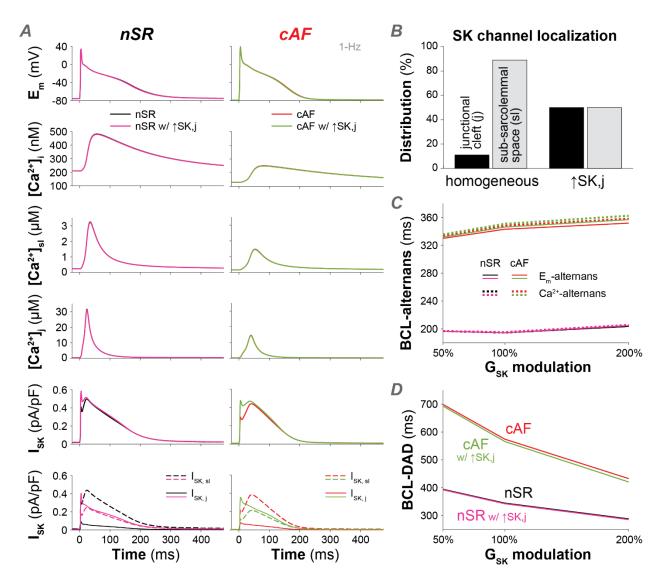


Figure S6. Increasing the density of SK channels in the junctional space minimally affects atrial myocyte electrophysiology and arrhythmogenesis. A) Time course of Em, Ca2+ transients in cytosolic, sub-sarcolemmal, and junctional cleft compartments ([Ca<sup>2+</sup>]<sub>i</sub>, [Ca<sup>2+</sup>]<sub>sl</sub>, and [Ca<sup>2+</sup>]<sub>i</sub>, respectively), and total SK current (I<sub>SK</sub>) and its sub-sarcolemmal and junctional cleft components (I<sub>SK,s</sub>) and I<sub>SK,i</sub>) elicited during 1-Hz pacing. These traces were obtained assuming that homogeneous distribution of SK channels through the membrane (as done in all previous simulations), or increased SK channel density in the junctional space (↑SK,j). B) Bar graph showing the fractions of SK channels in sub-sarcolemmal (grey) and junctional cleft (black) compartments used in the two sets of simulations. Since the Grandi et al. framework was developed assuming that 89% of the membrane is non-junctional, 11% of SK channels are expressed the junctional space in case of homogeneous distribution. To simulate higher SK channel density in this compartment, this fraction was increased to 50%. C) Effect of increased density of SK channels in the junctional space on the maximal BCL required for inducing voltage (solid lines) and Ca2+ (dotted lines) alternans in the baseline nSR and cAF models. D) Effect of increased density of SK channels in the junctional space on the maximal BCL required for inducing DADs in the baseline nSR and cAF models.

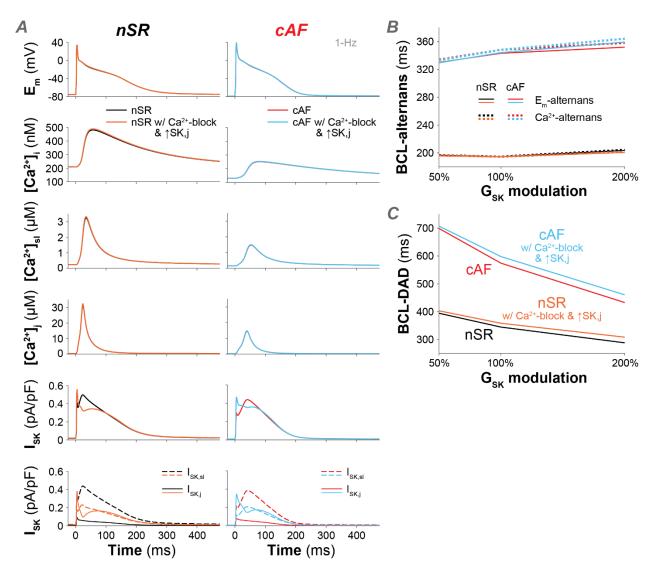


Figure S7. Increasing the density of SK channels in the junctional space enhances the effects of  $Ca^{2+}$ -dependent block of  $I_{SK}$ . A) Time course of  $E_m$ ,  $Ca^{2+}$  transients in cytosolic, subsarcolemmal, and junctional cleft compartments ( $[Ca^{2+}]_i$ ,  $[Ca^{2+}]_{sl}$ , and  $[Ca^{2+}]_i$ , respectively), and total SK current ( $I_{SK}$ ) and its sub-sarcolemmal and junctional cleft components ( $I_{SK,sl}$  and  $I_{SK,j}$ ) elicited during 1-Hz pacing. These traces were obtained by simulating the following two conditions: *i*) intracellular  $Ca^{2+}$  only causes  $I_{SK}$  activation and SK channels are homogeneously distributed, and *ii*) combined inclusion of  $Ca^{2+}$ -dependent block (as described in **Fig. S5**) and increase in SK channels density in the junctional space (as described in **Fig. S6**). B) Effect of combined changes on the maximal BCL required for inducing voltage (solid lines) and  $Ca^{2+}$  (dotted lines) alternans in the baseline nSR and cAF models. C) Effect of combined changes on the maximal BCL required for inducing DADs in the baseline nSR and cAF models.