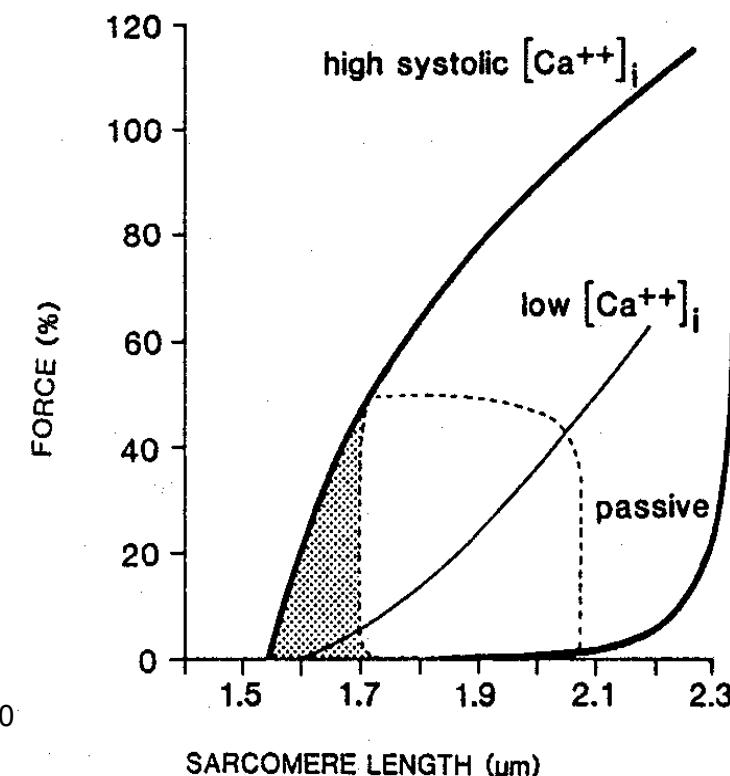
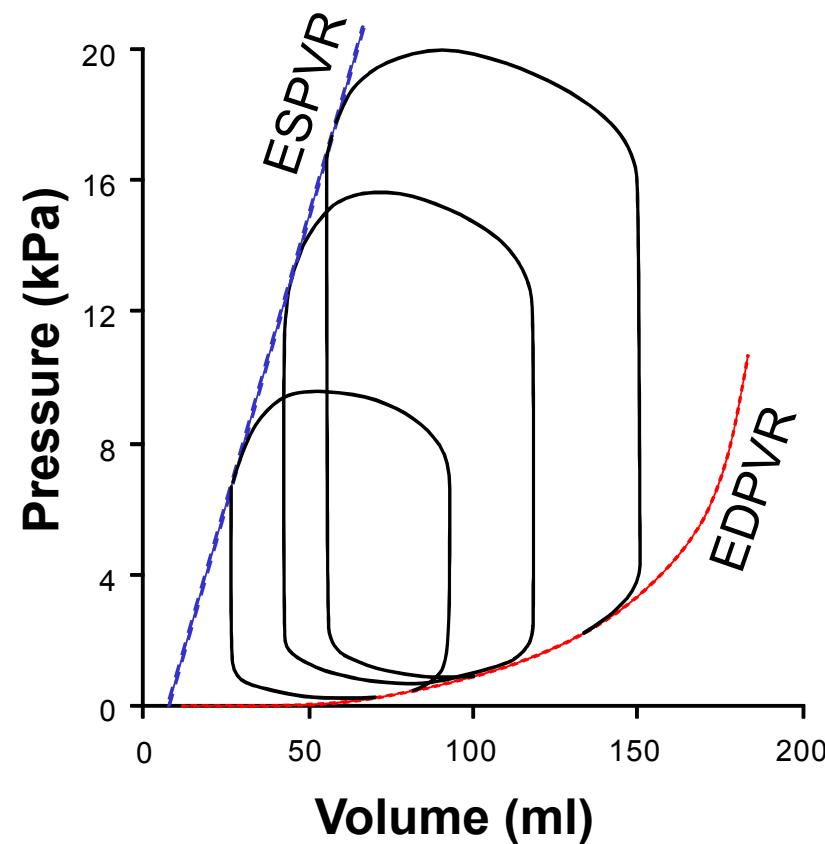
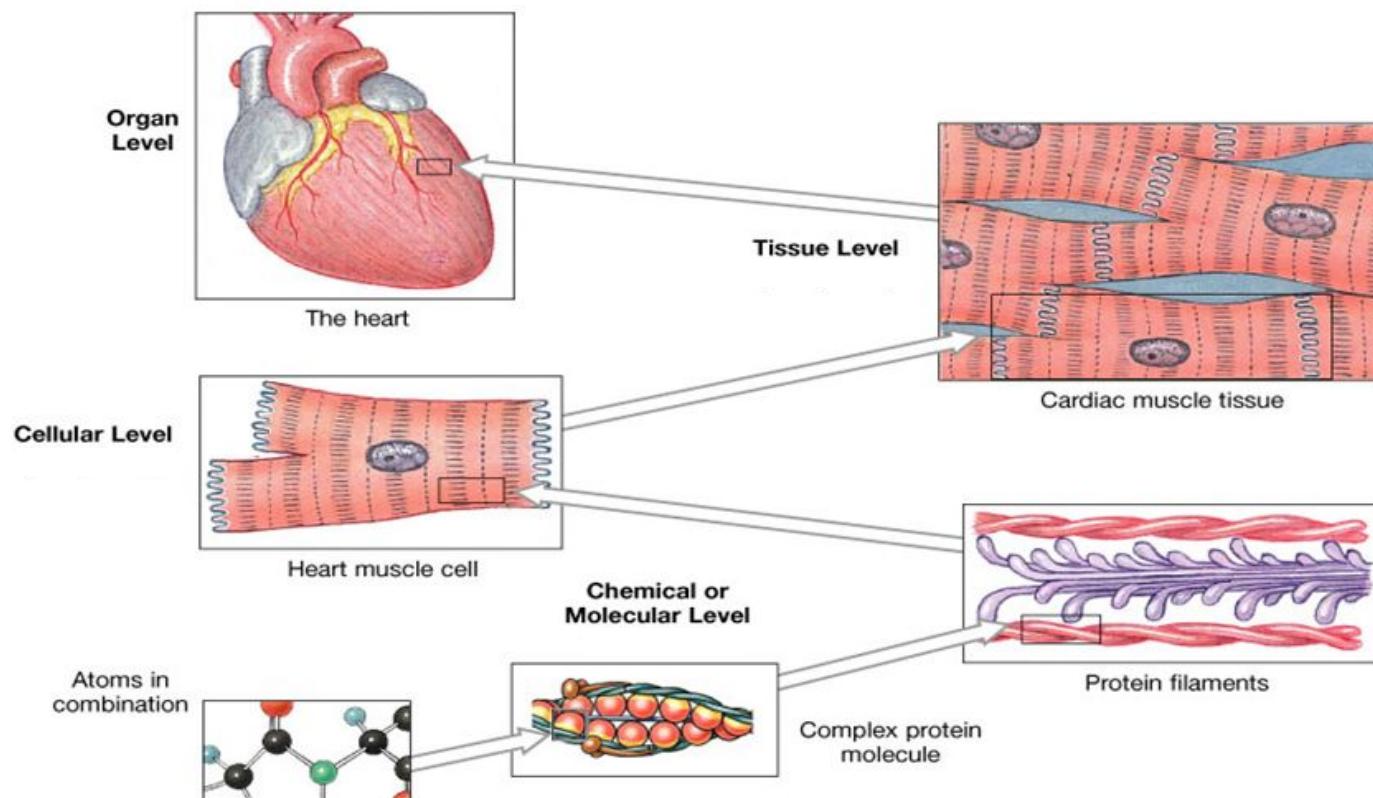


Physiological Basis of the Frank-Starling Mechanism

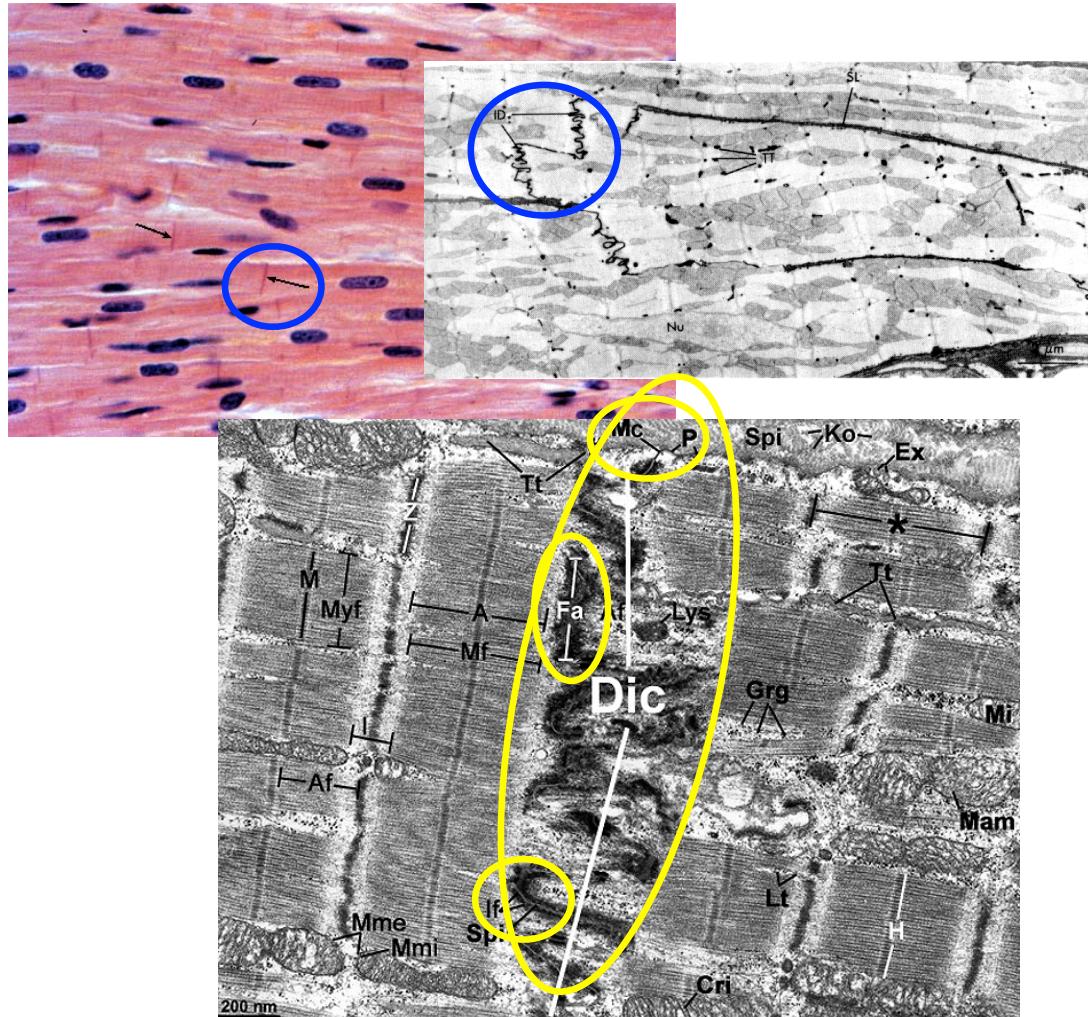


Levels of Organization



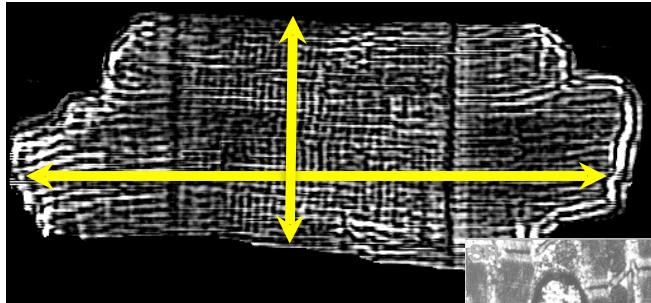
Physiology M.Ilker Gelisen MD

Cardiac Myocyte Connections



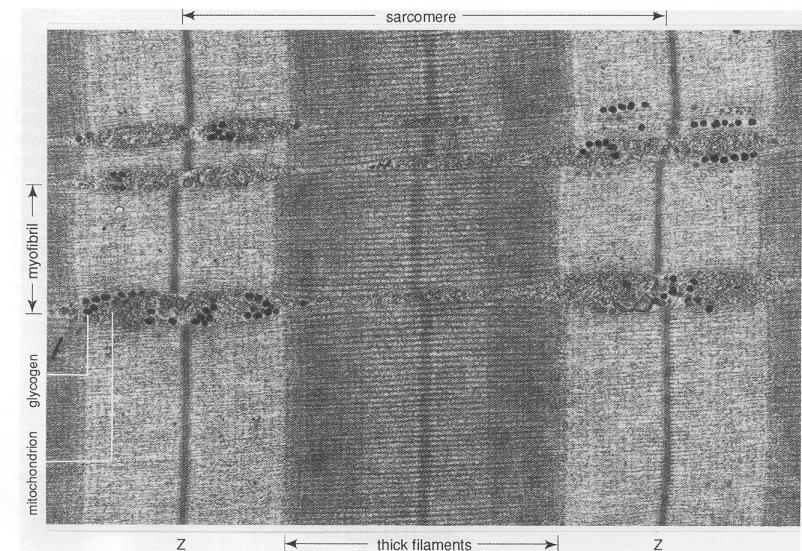
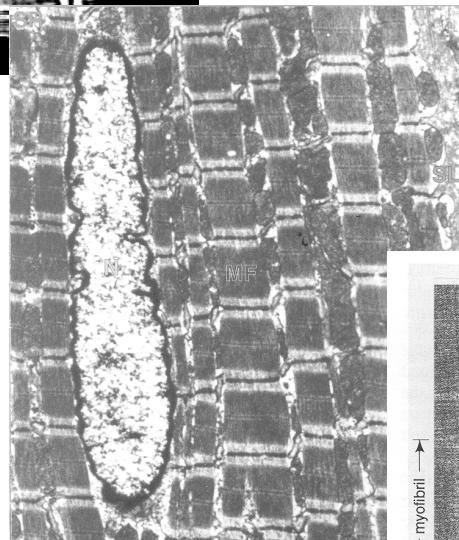
- Myocytes connect to an average of 11 other cells (half end-to-end and half side-to-side)
- Functional *syncytium*
- Myofiber angle *dispersion* (about 12-15°)
- Intercalated discs
 - gap junctions
 - connexons
 - connexins
 - adherens junctions (fascia adherens)
 - anchoring sites for sarcomeres (actin)
 - desmosomes (macula adherens)
 - connect cytoskeleton (intermediate filaments) between cells.

Myocytes



- Rod-shaped
- Striated
- 80-100 μm long
- 15-25 μm diameter

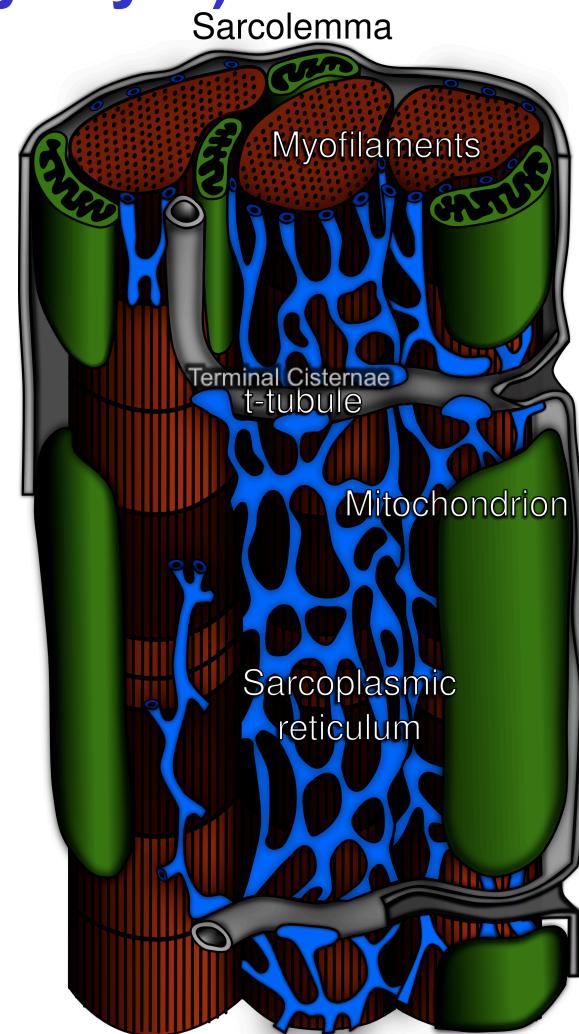
- Sarcolemma
- Mitochondria (M)
~30%
- Nucleus (N)
- Myofibrils (MF)
- Sarcoplasmic
Reticulum and T-
tubule network

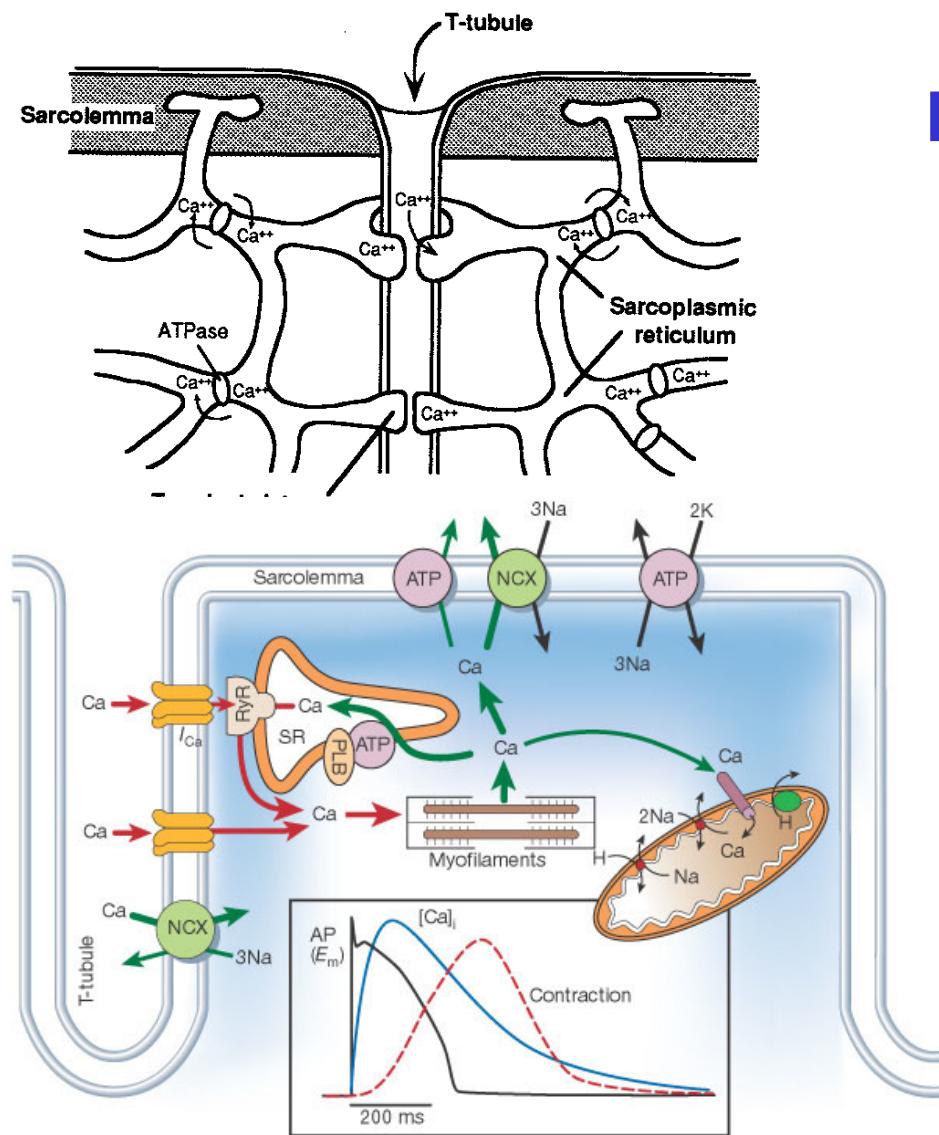


- Slow cardiac myosin isoforms
- Cardiac troponin
- Titin

The Muscle Fiber (Myocyte)

- Sarcolemma (plasma membrane)
- Sarcoplasm (cytosol)
- Sarcoplasmic Reticulum (ER)
- Mitochondria (ATP powerhouse)
- Transverse (T) Tubule
- Junctional SR



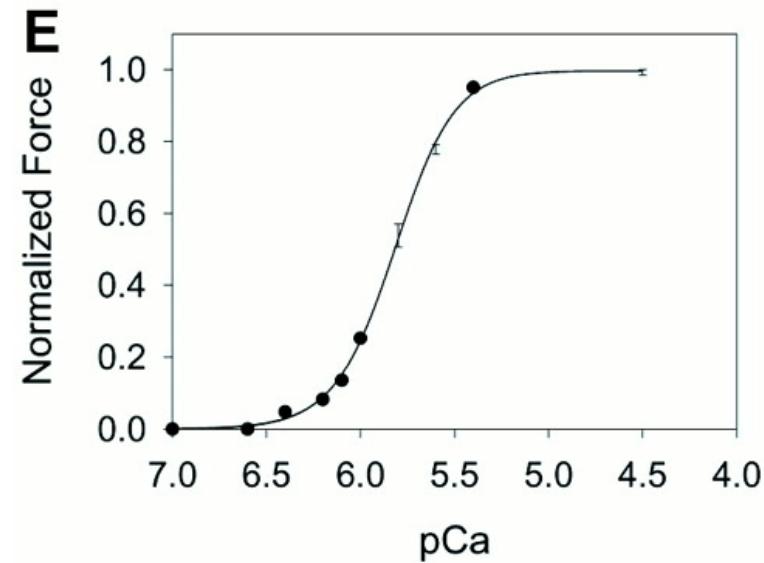
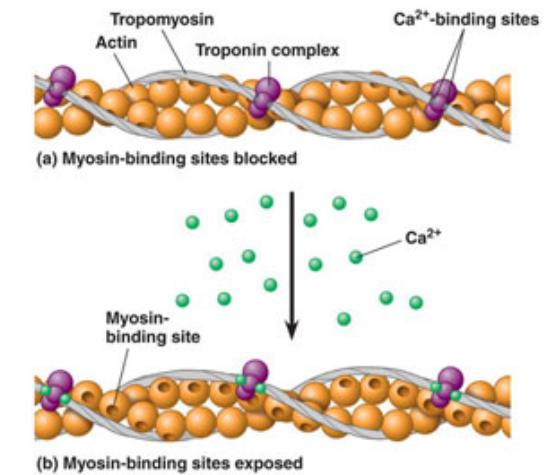
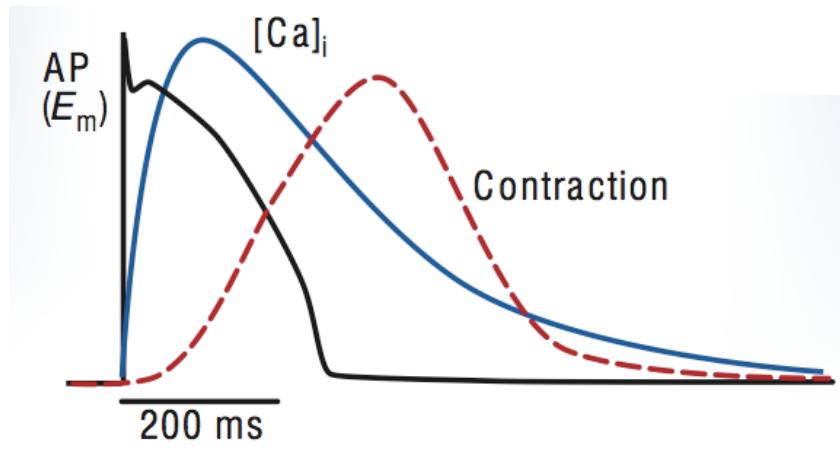


Excitation-Contraction Coupling

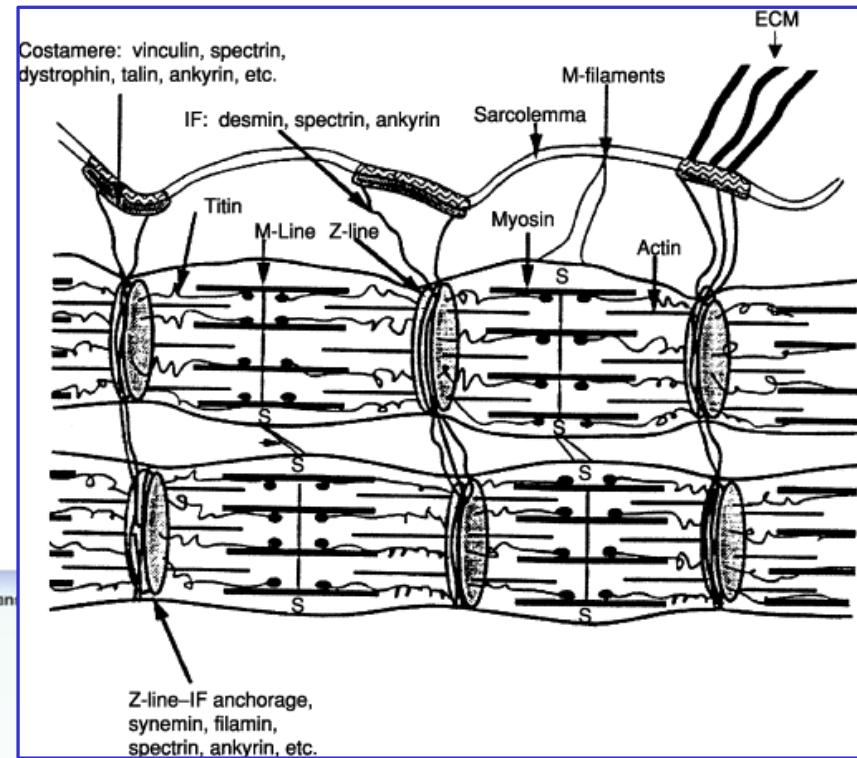
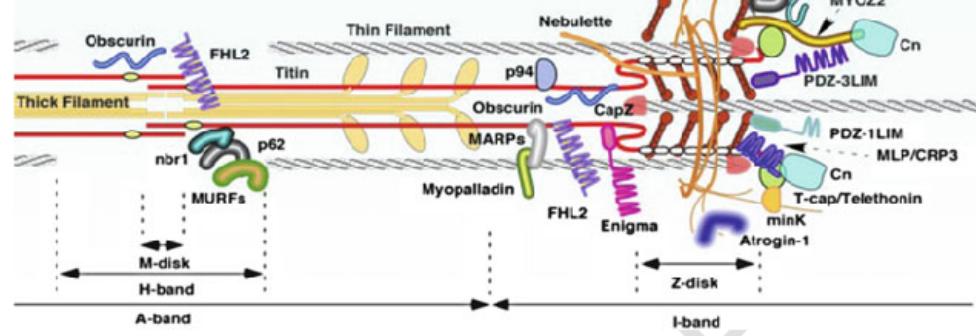
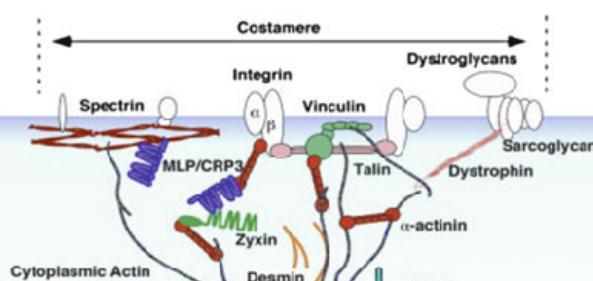
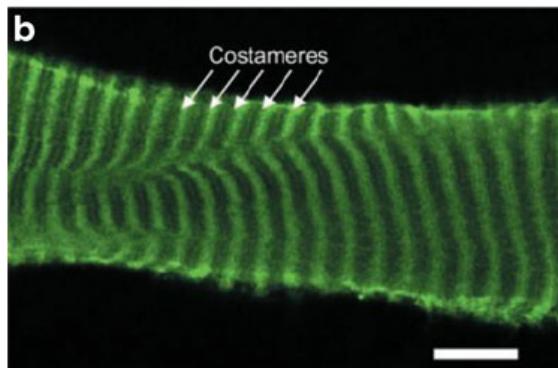
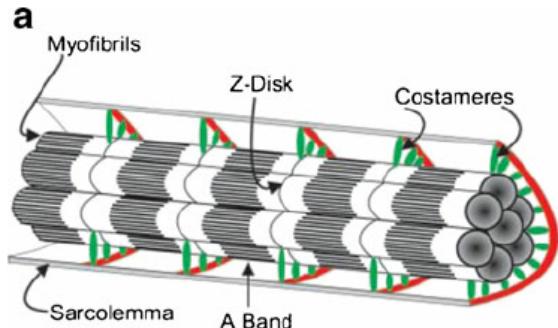
- L-type Calcium current
- Calcium-induced calcium release from the sarcoplasmic reticulum via ryanodine receptors
- $\text{Na}^{+}/\text{Ca}^{2+}$ exchange
- Sarcolemmal Ca^{2+} pump
- SR Ca^{2+} ATP-dependent pump

Myofilament Activation

- Force-development is triggered by the intracellular $[Ca^{2+}]$ transient.
- Ca^{2+} binds to troponin-C sites, which are separated by neighboring troponin-C sites every 7 actin monomers
- Nearest neighbor cooperative activation

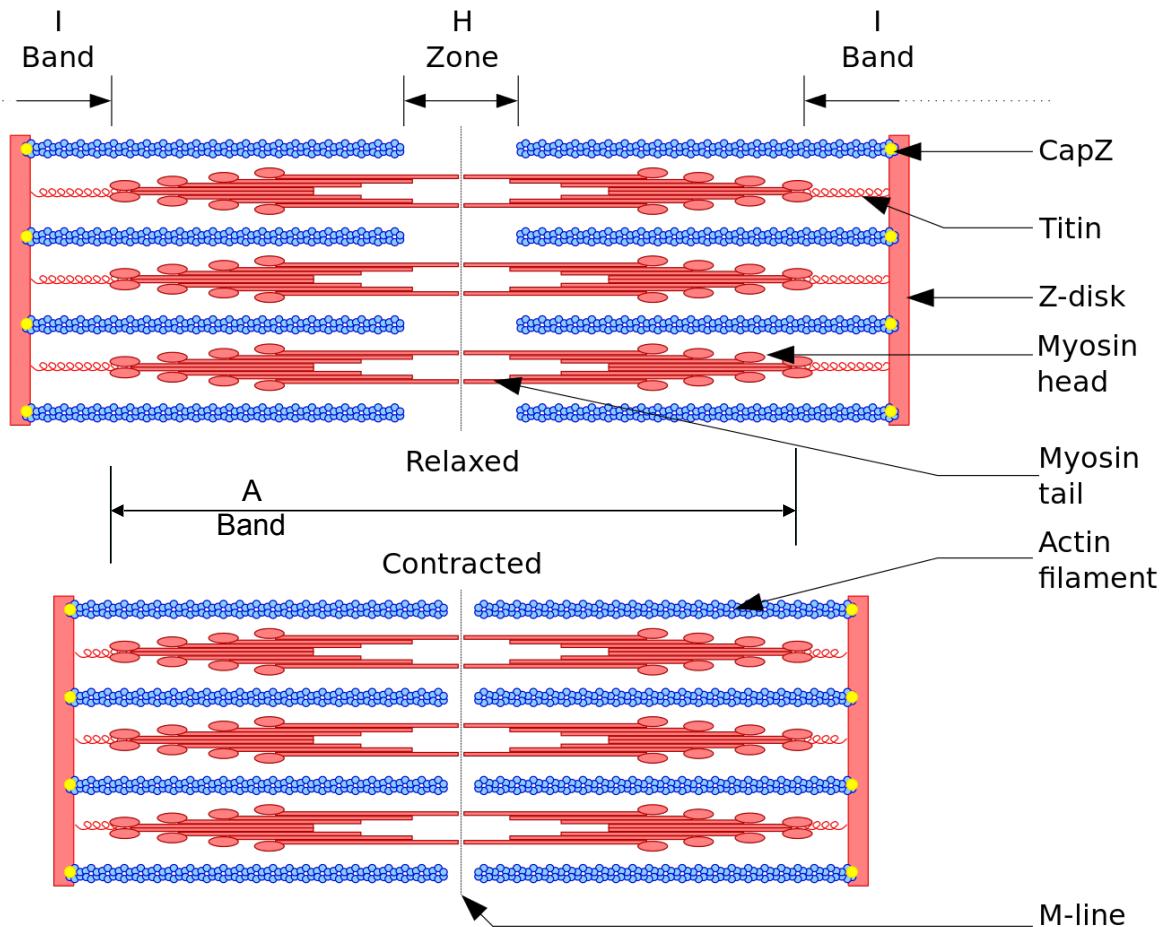


Costameres



Diastole

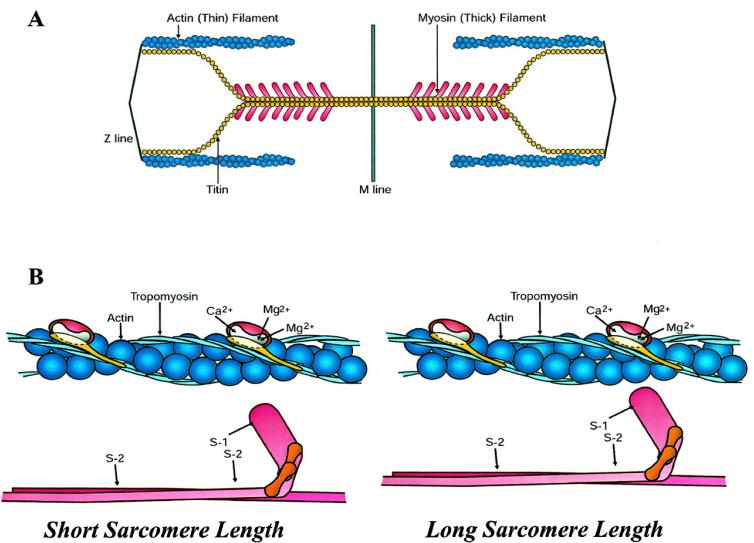
The Sarcomere



Systole

Credit: Slashme

Source: <http://en.wikipedia.org/wiki/File:Sarcomere.svg>



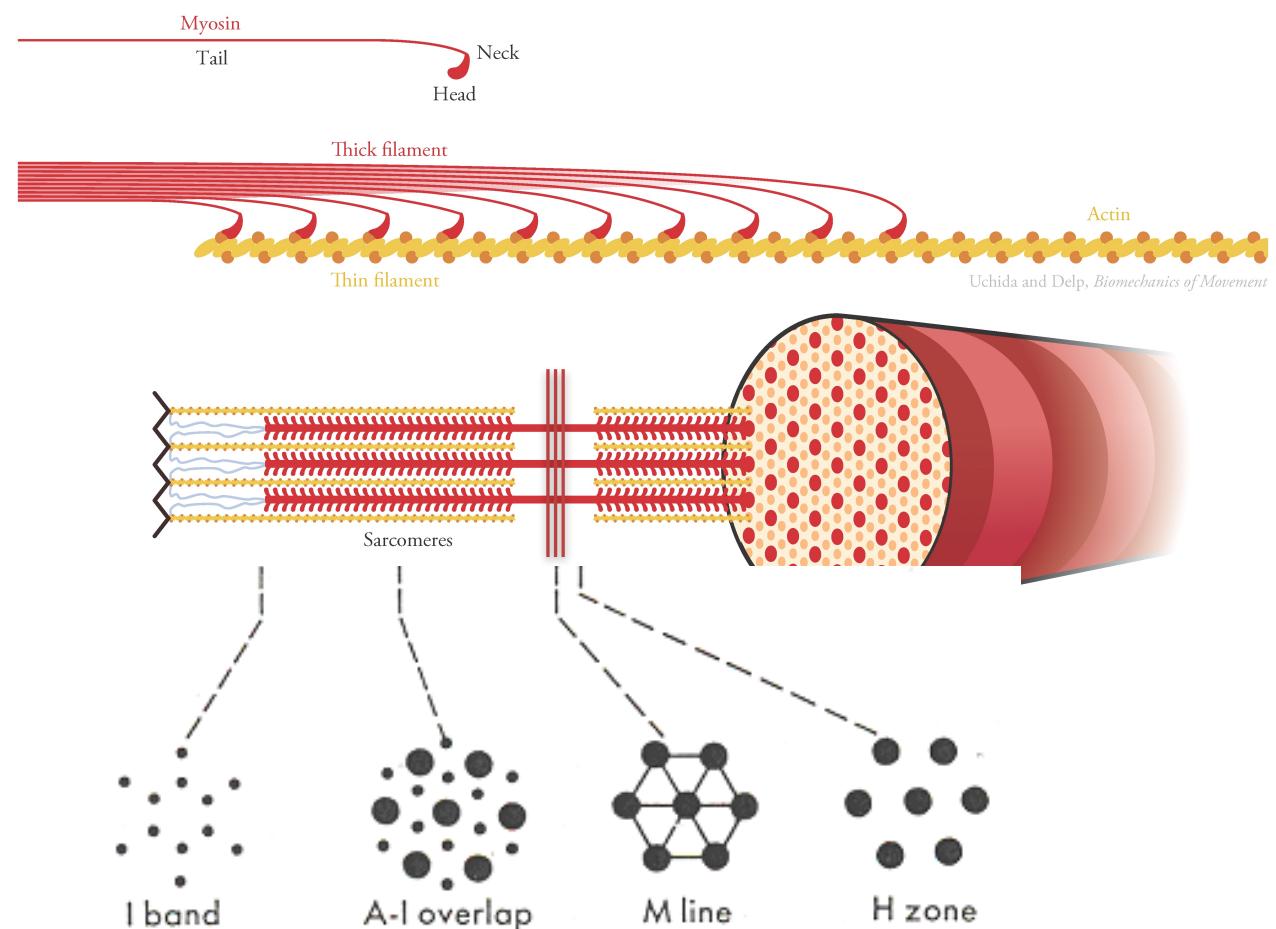
The Sarcomere

Contractile Filaments

- Thick Myosin Filaments
- Thin Actin Filaments
- Z-line to Z-line
- A and I bands

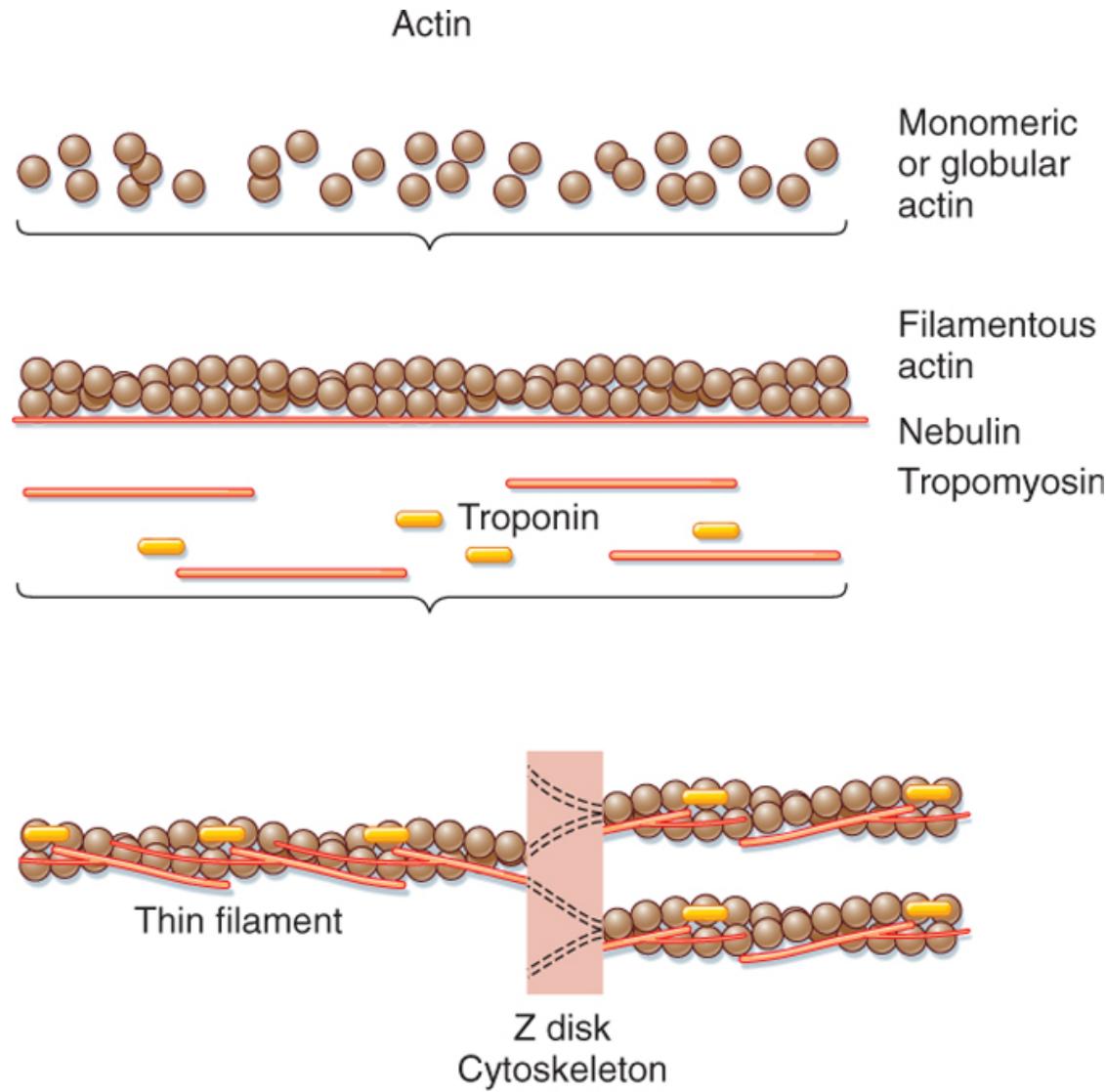
Titin

- Entropic molecular spring
- Connects Z-line to M-line, allows for force transmission
- Primary cellular contributor to passive stiffness



Thin Filament

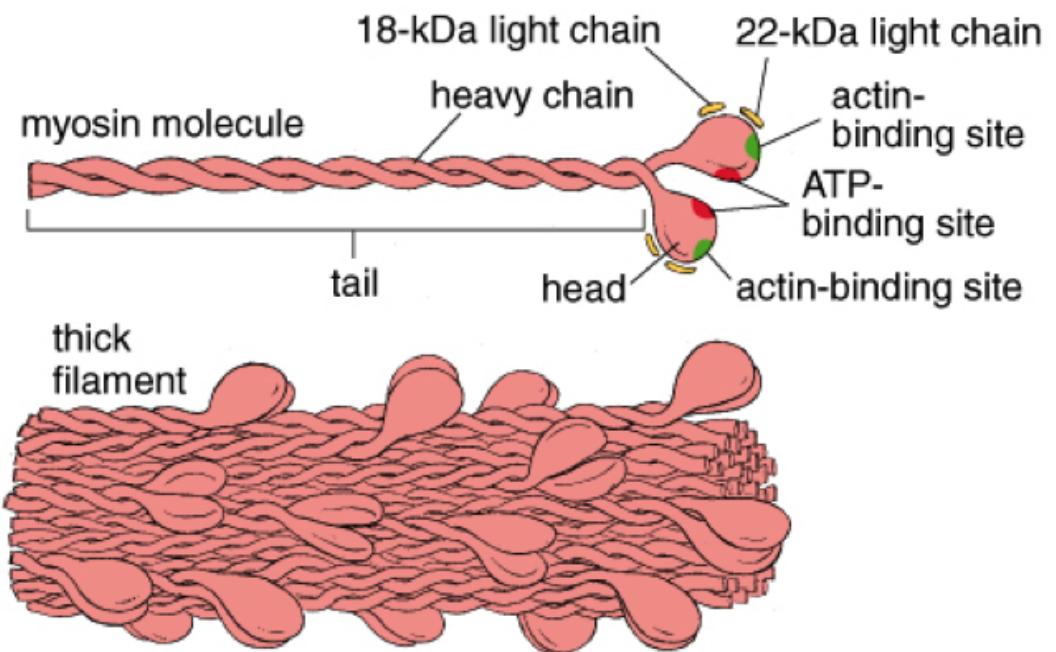
- F-actin molecule (7 nm diameter)
- Double helix with period ~37 nm
- Nebulin (600–900 kDa) binds ~200 actin monomers
- 1 Tropomyosin ~40 nm long per actin period
- Troponin T, I and C molecules (with a strong affinity for Ca^{2+}) attach to thin filament every 7 G-actin monomers
- Actin filaments anchor at Z-disks



Koeppen & Stanton: Berne and Levy Physiology, 6th Edition.
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Thick Filament

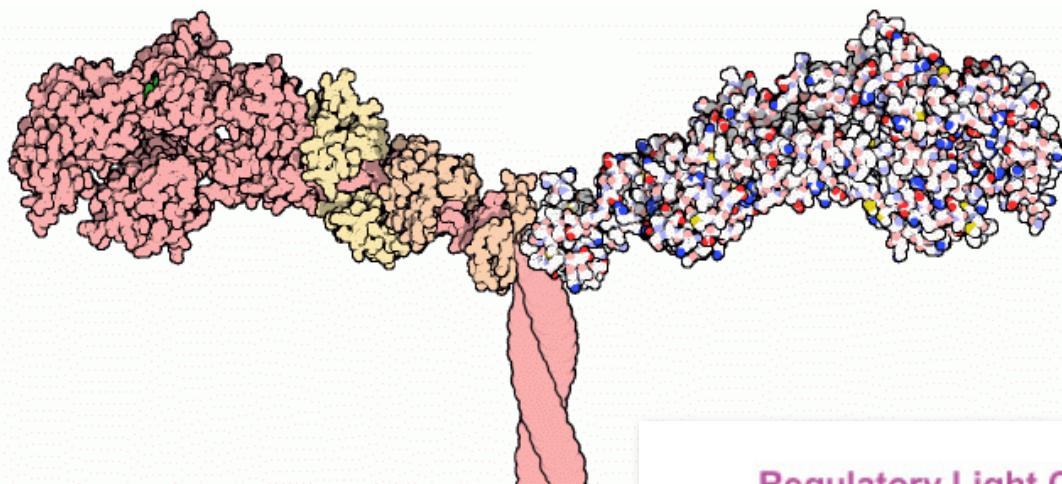
- Oligomerized myosin molecules
 - Two myosin heavy chains
 - Two myosin light chains per heavy chain
 - One S1-head molecular motor domains per heavy chain
- Heads protrude in pairs at 180°
- ~50 pairs of cross-bridges at each end
- 14.3 nm between S1 head pairs
- Thick filament makes a complete twist every 3 pairs



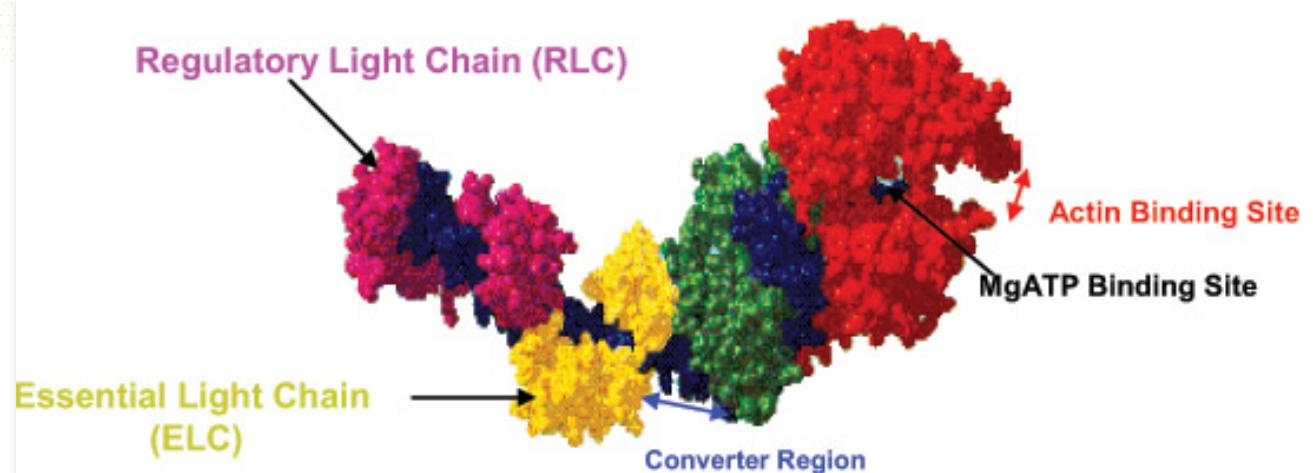
Unfig. 10.2. Thick filament.

Copyright © 2003 Lippincott Williams and Wilkins

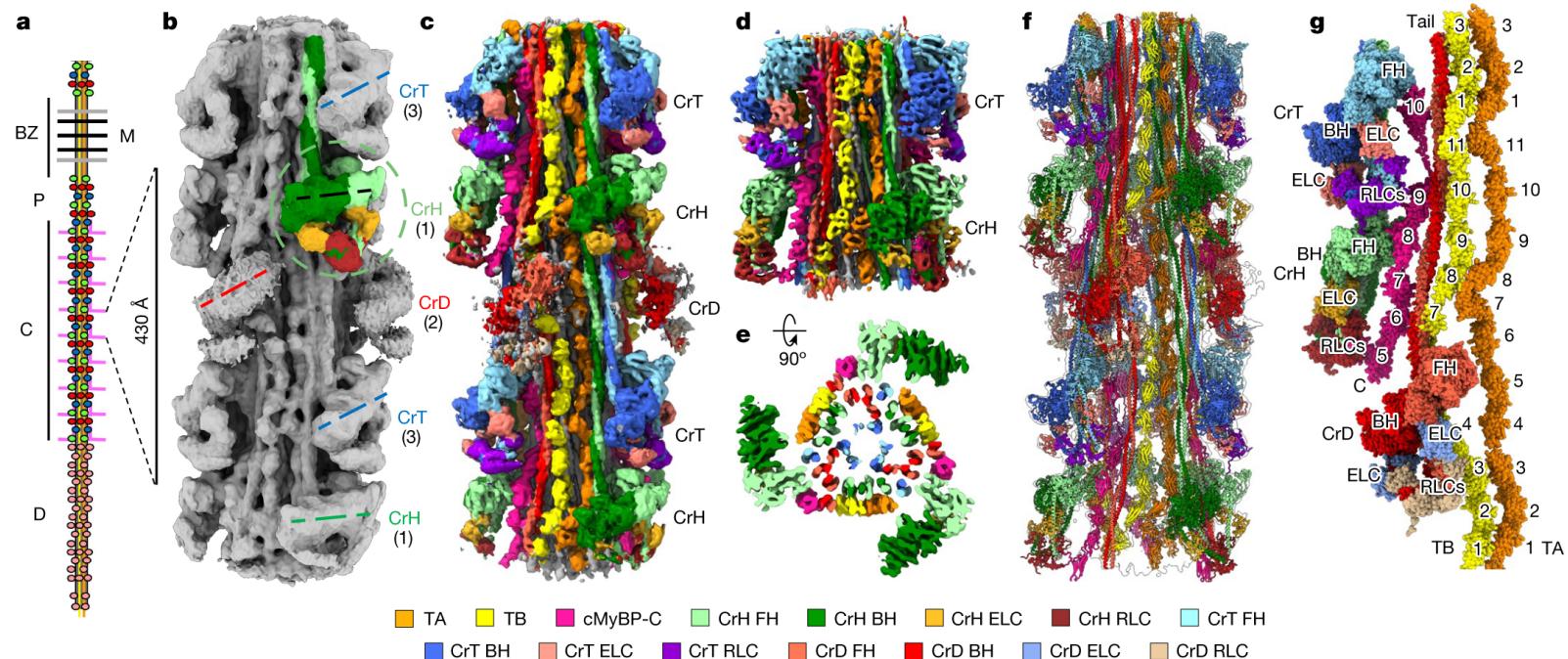
Myosin Light Chains: Regulatory and Essential



Heavy chain atoms are pink red on the left-hand side, and light chain atoms are orange and yellow. -
- David S. Goodsell, TSRI

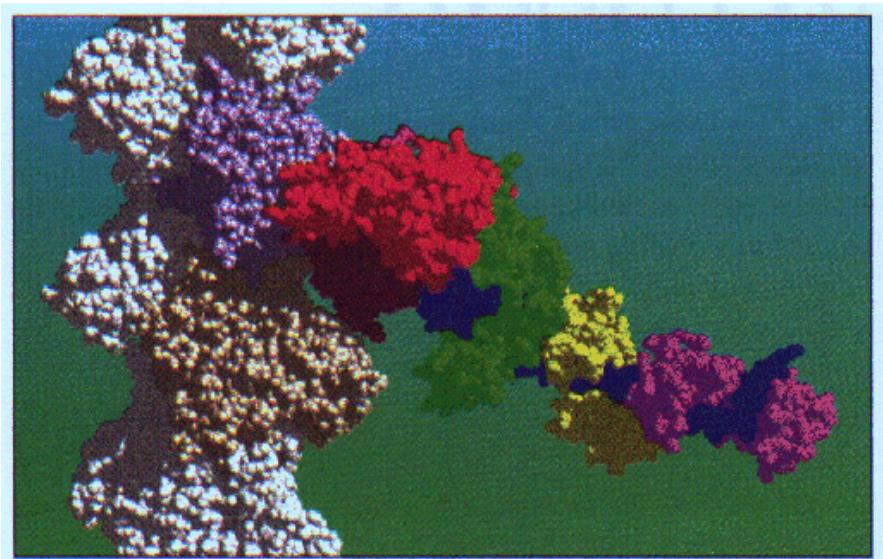


Single-particle 3D reconstruction of the C-zone reveals the organization of titin, cMyBP-C and myosin heads and tails

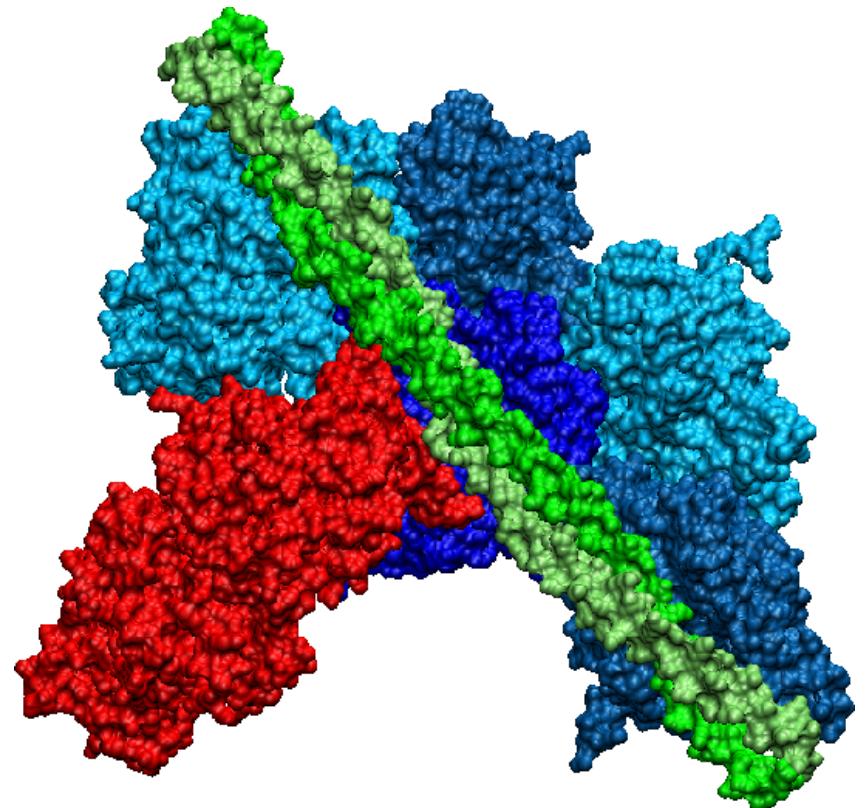


Dutta, D., Nguyen, V., Campbell, K.S. et al. Cryo-EM structure of the human cardiac myosin filament. *Nature* **623**, 853–862 (2023). <https://doi.org/10.1038/s41586-023-06691-4>

Myosin binding to Actin



The actomyosin complex, a molecular motor (1993, Rayment et al.)

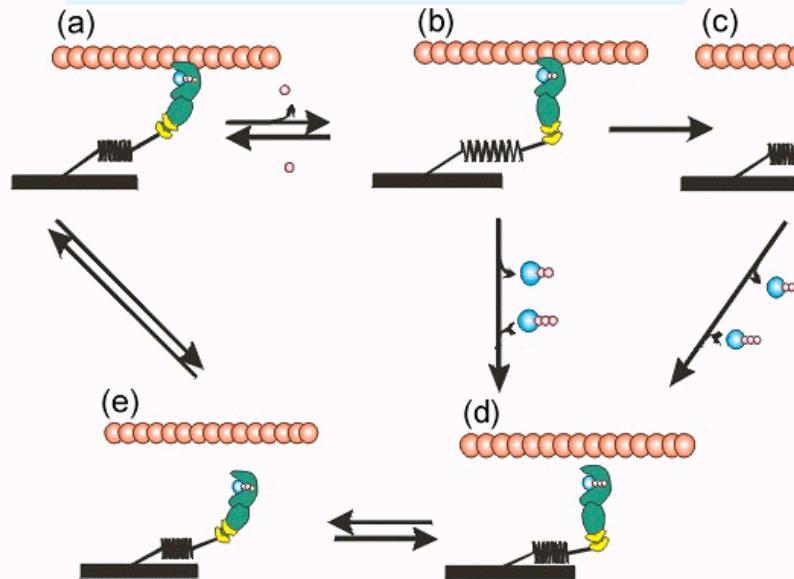


PDB: 4A7F (Behrmann 2012)

Crossbridge Cycle

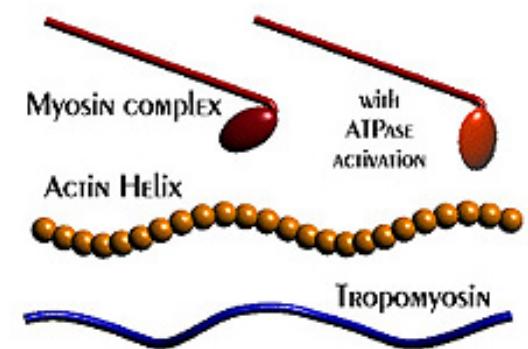
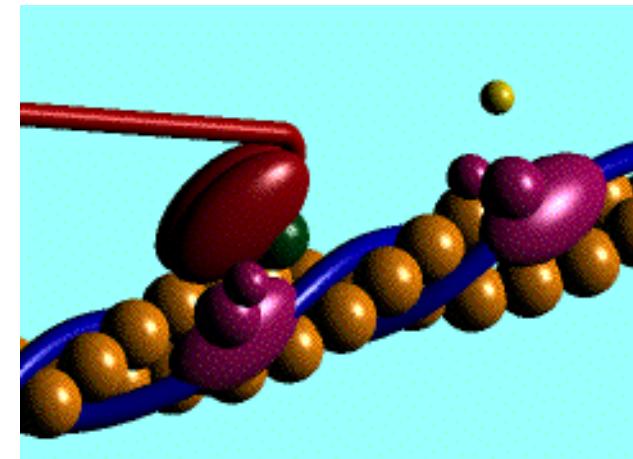
With M bound to A, Pi is released and XB undergoes **powerstroke**

ADP and Pi stay bound until **M.ADP.Pi binds to A.**
If an actin site is within reach of the myosin head, it will bind rapidly & reversibly



After detachment, **ATP is rapidly (10 ms) hydrolyzed** but ADP and Pi remain bound. Hydrolysis is reversible ($K_{eq} = 10$), i.e. free energy of ATP remains in the M.ADP.Pi complex. Hydrolysis causes **conformational change repriming the power stroke.**

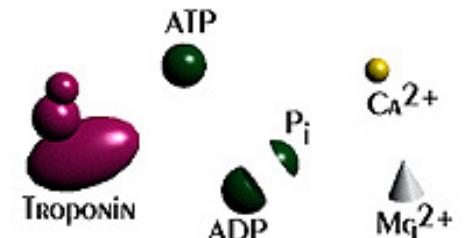
ATP binding to myosin head (b or c) changes conformation in the head causing rapid, almost irreversible dissociation from actin (d).



ATP/ADP, Blue/Pink
Pi, Pink

Stefan Weiss & Mike Geeves

Actin monomers
Myosin head

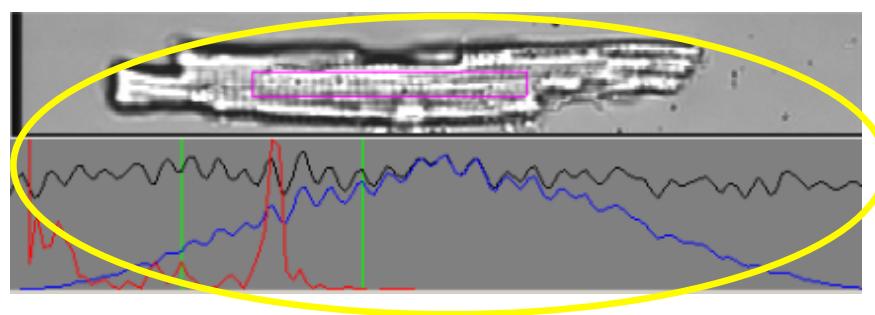
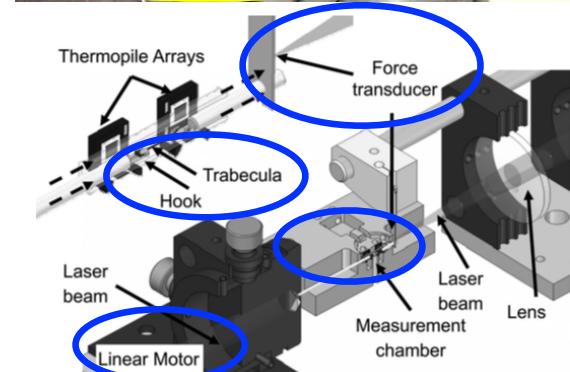
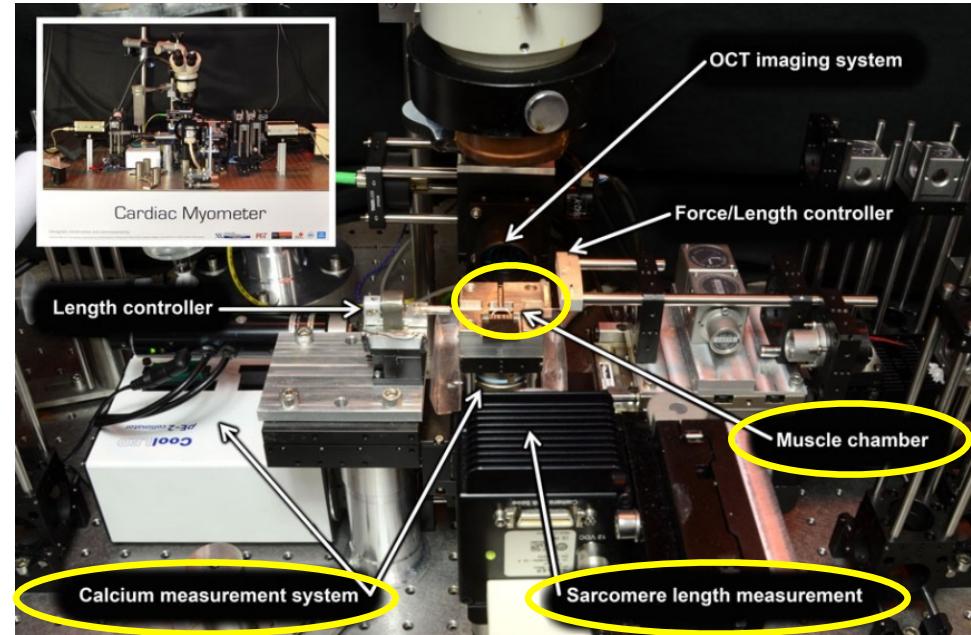


Primary Determinants of Force Production in Cardiac Muscle

- Intracellular calcium concentration
- Sarcomere length (SL)
- Rate of change in SL (velocity)



Cardiac Muscle Testing



Tissue chamber and preparation

- isolated right ventricular trabeculae
- $4000 \times 200 \times 90 \mu\text{m}$

Force transducers

- cantilever - laser interferometry
- piezoresistive 1 V/mN , capacitive 0.1 V/mN

Motor

- linear servomotor

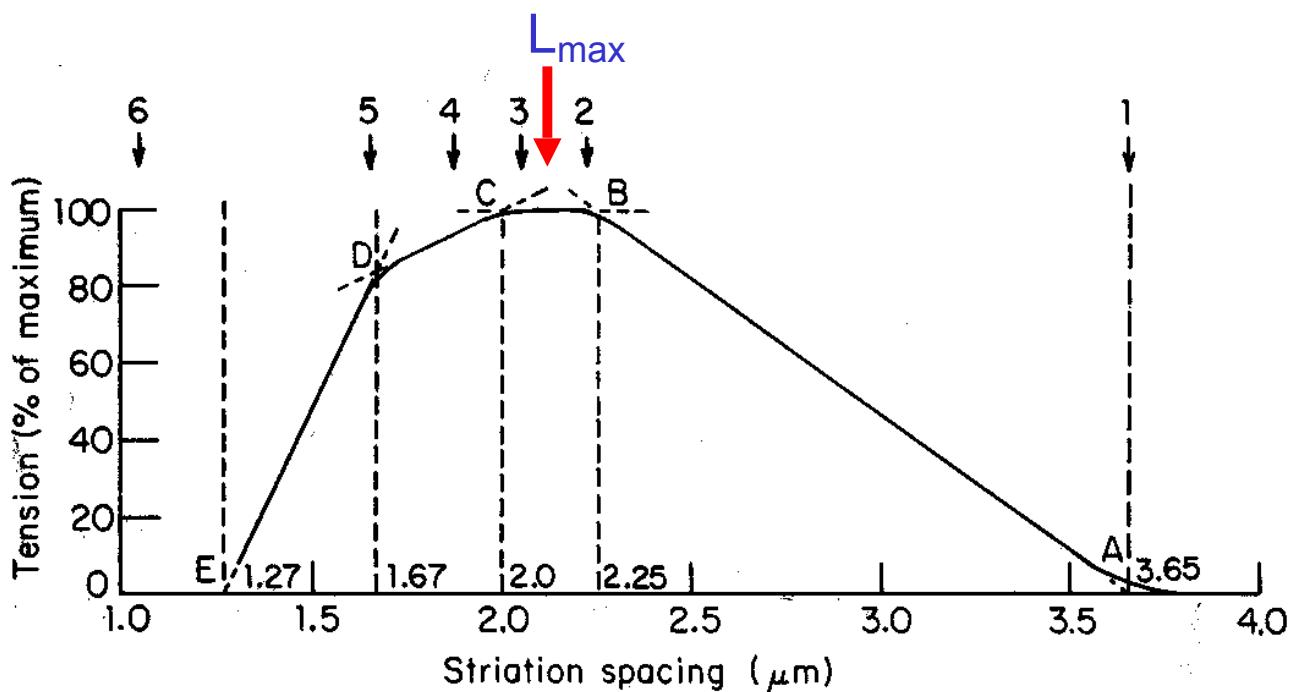
Sarcomere length

- laser diffraction or Fourier imaging

Calcium

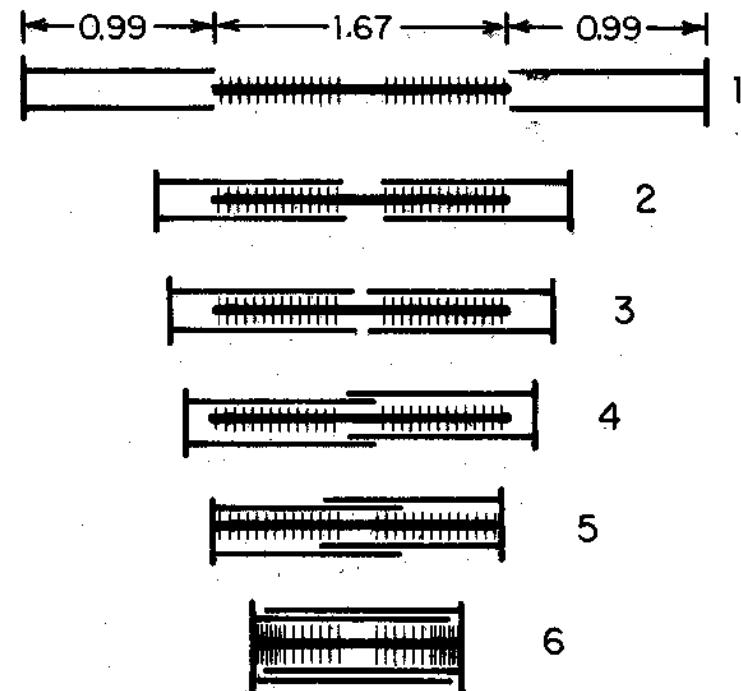
- ratiometric fluorescence imaging

Skeletal Muscle Isometric Tension: Sliding Filament Theory

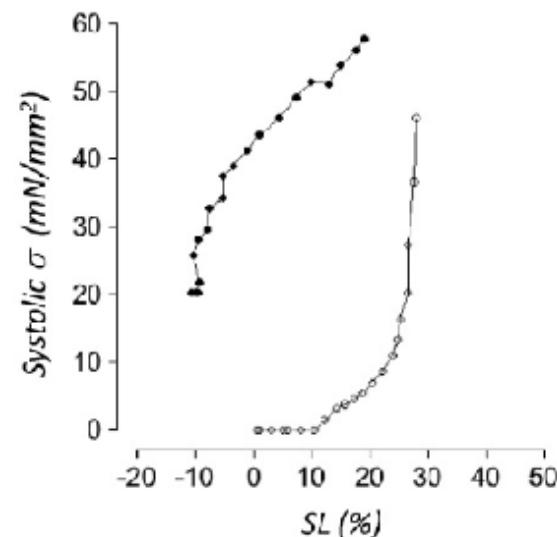
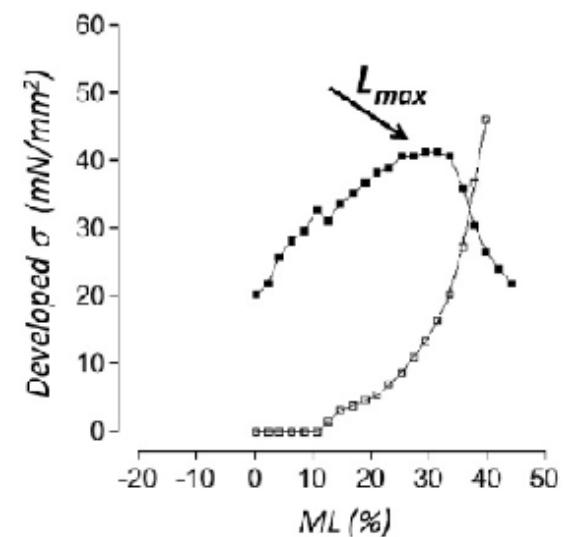
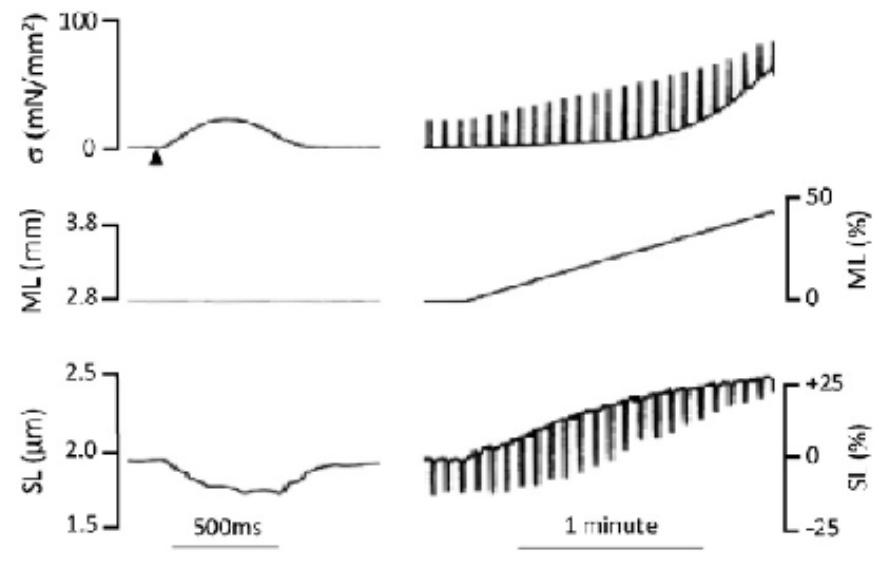


Developed tension versus length for a single isometric fiber of frog semitendinosus muscle

Sliding filament theory

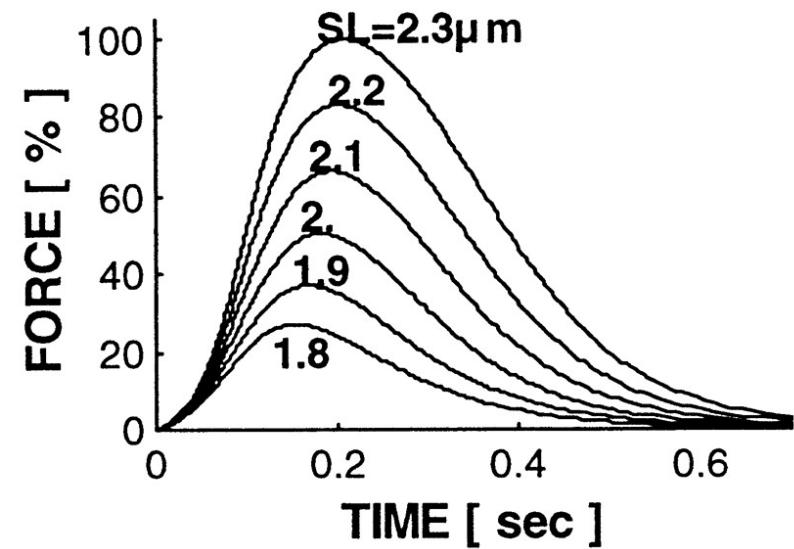
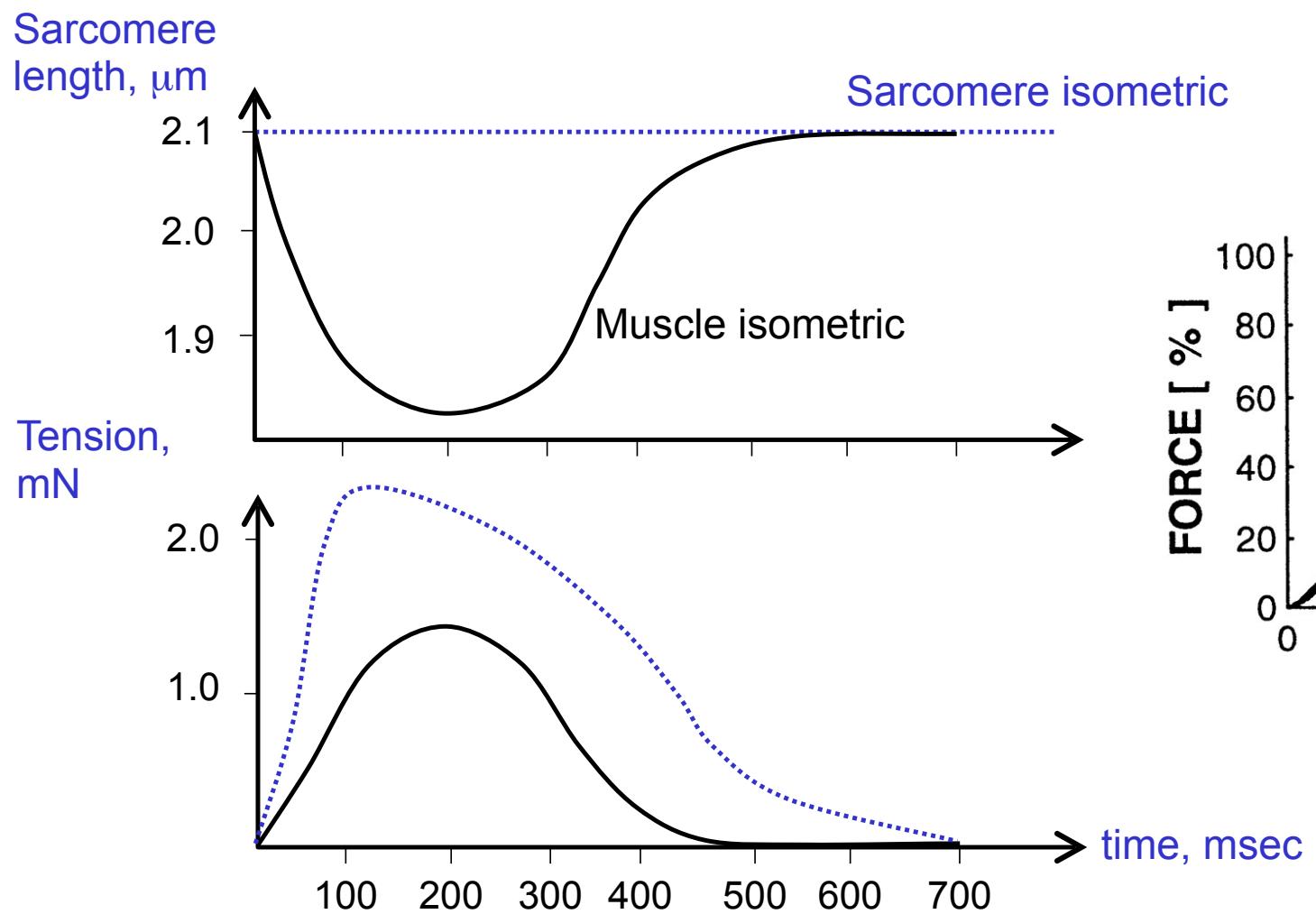


Cardiac Muscle Isometric Twitch Testing

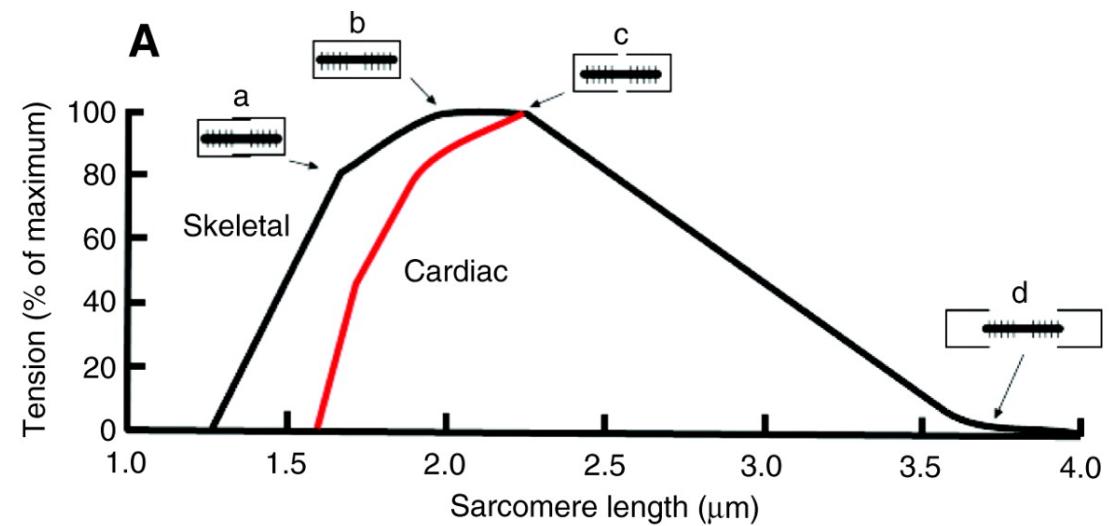
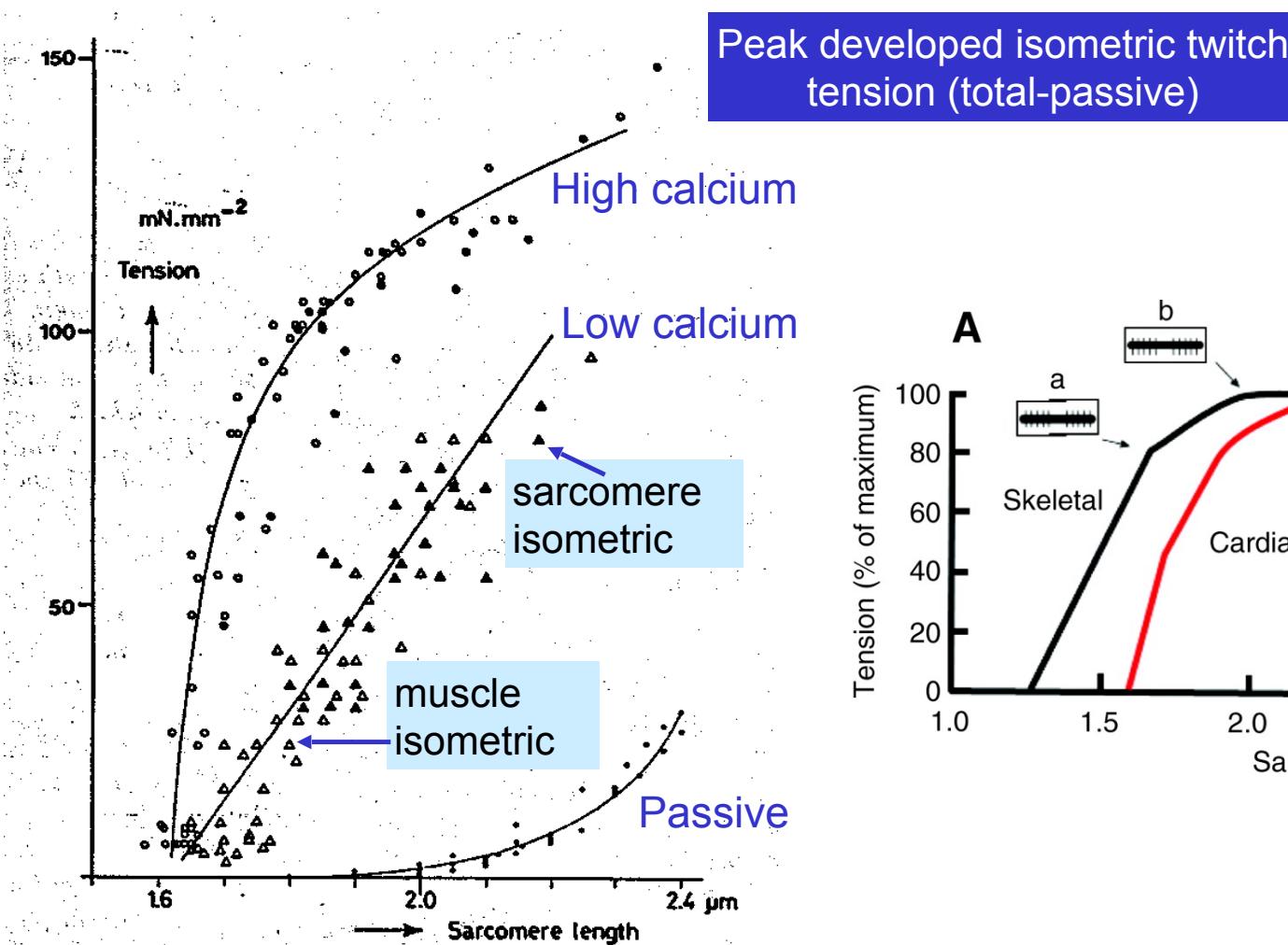


At constant muscle length, muscle preparation shortens in the middle at the expense of lengthening at the damaged ends. de Tombe and ter Keurs (2016)
Journal of Molecular and Cellular Cardiology 91: 148–150

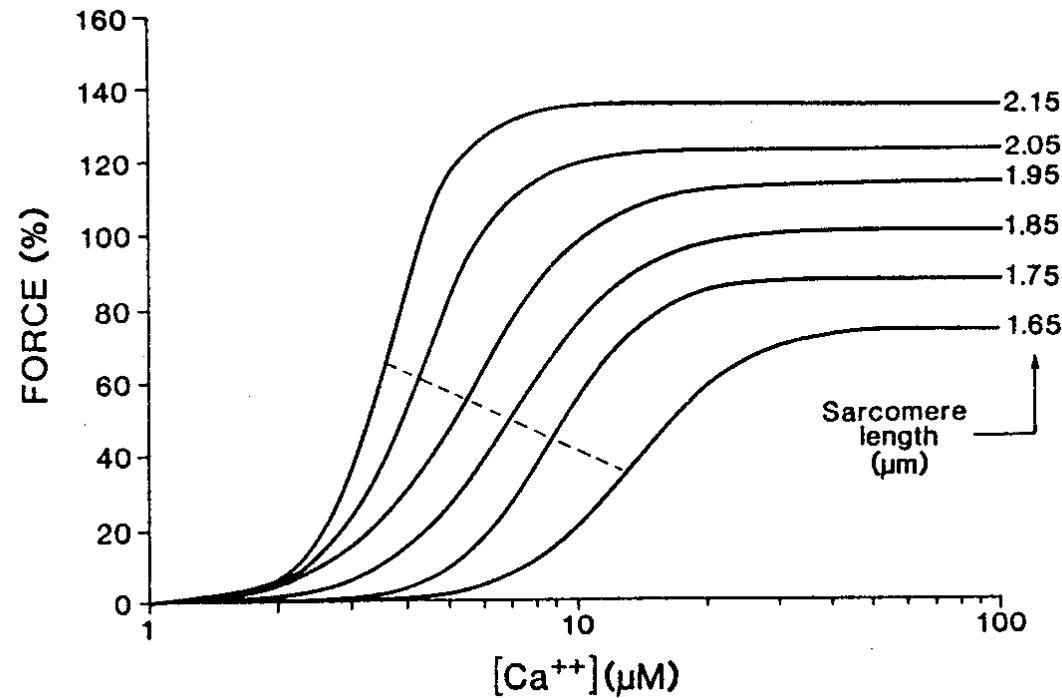
Cardiac Muscle Isometric Twitch Testing



Cardiac Muscle Isometric Length-Peak Tension Curve



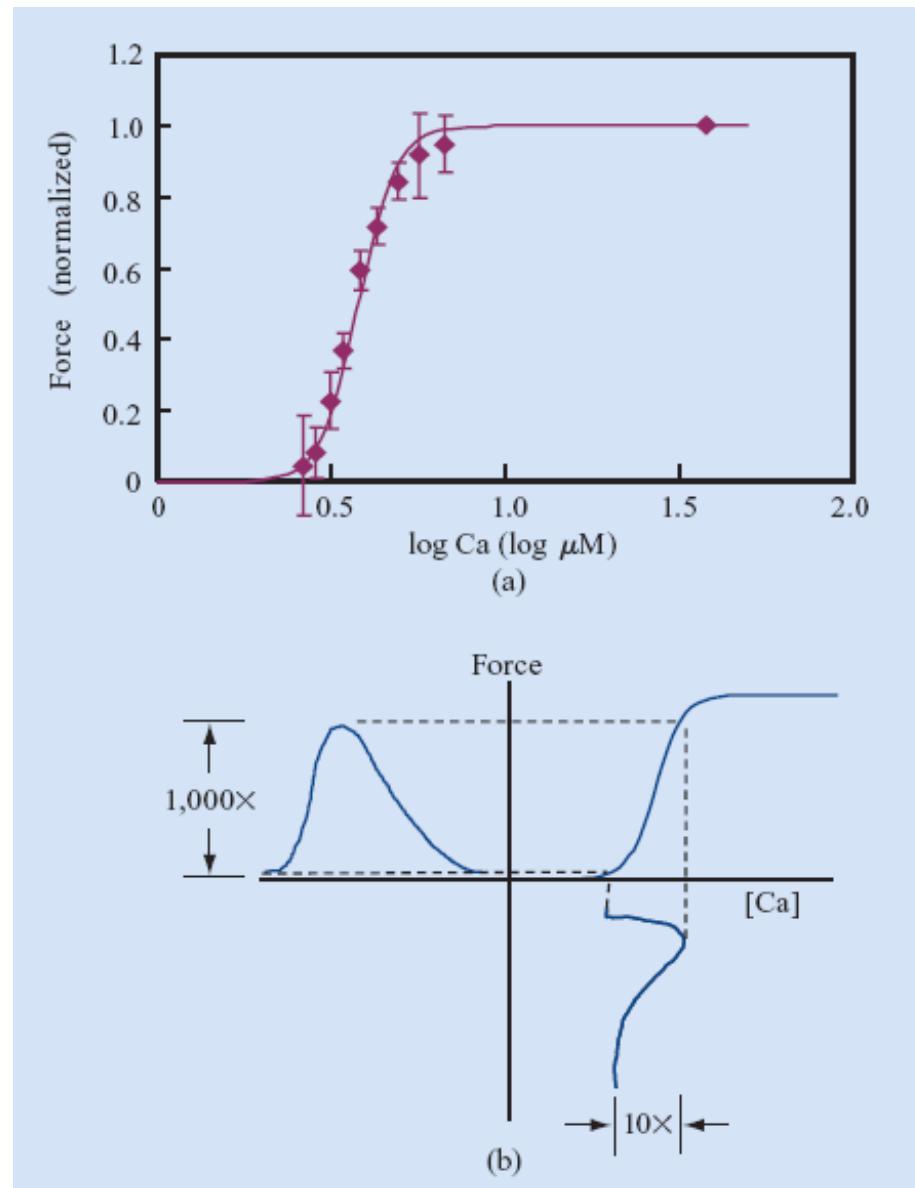
Length-Dependent Activation



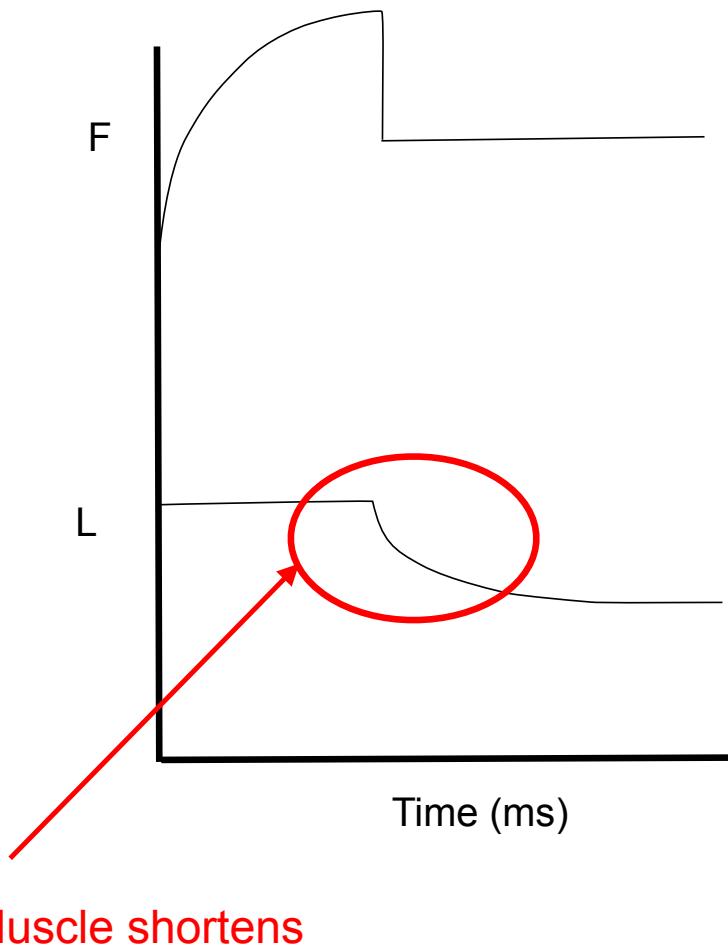
Isometric peak twitch tension in cardiac muscle continues to rise at sarcomere lengths $>2 \mu m$ due to sarcomere-length dependent increase in myofilament calcium sensitivity

Cooperative Myofilament Activation

- Developed force is a steep nonlinear function of [Ca].
- Experimental data from rat cardiac muscle.
- Small change in [Ca] produces a larger relative change in force
- Twitch forces rises slower than the calcium transient and falls faster



Isotonic (constant force) Test



Here, the isotonic force is ~ 50% of the isometric max. Now if, the isotonic force is only about 20% of the isometric value. Which is true?

- (A) The shortening velocity is lower
- (B) The shortening velocity is higher
- (C) The shortening velocity is the same in but the total shortening is less
- (D) The shortening velocity is the same in but the total shortening is more
- (E) The shortening velocity and the total amount of shortening are the same

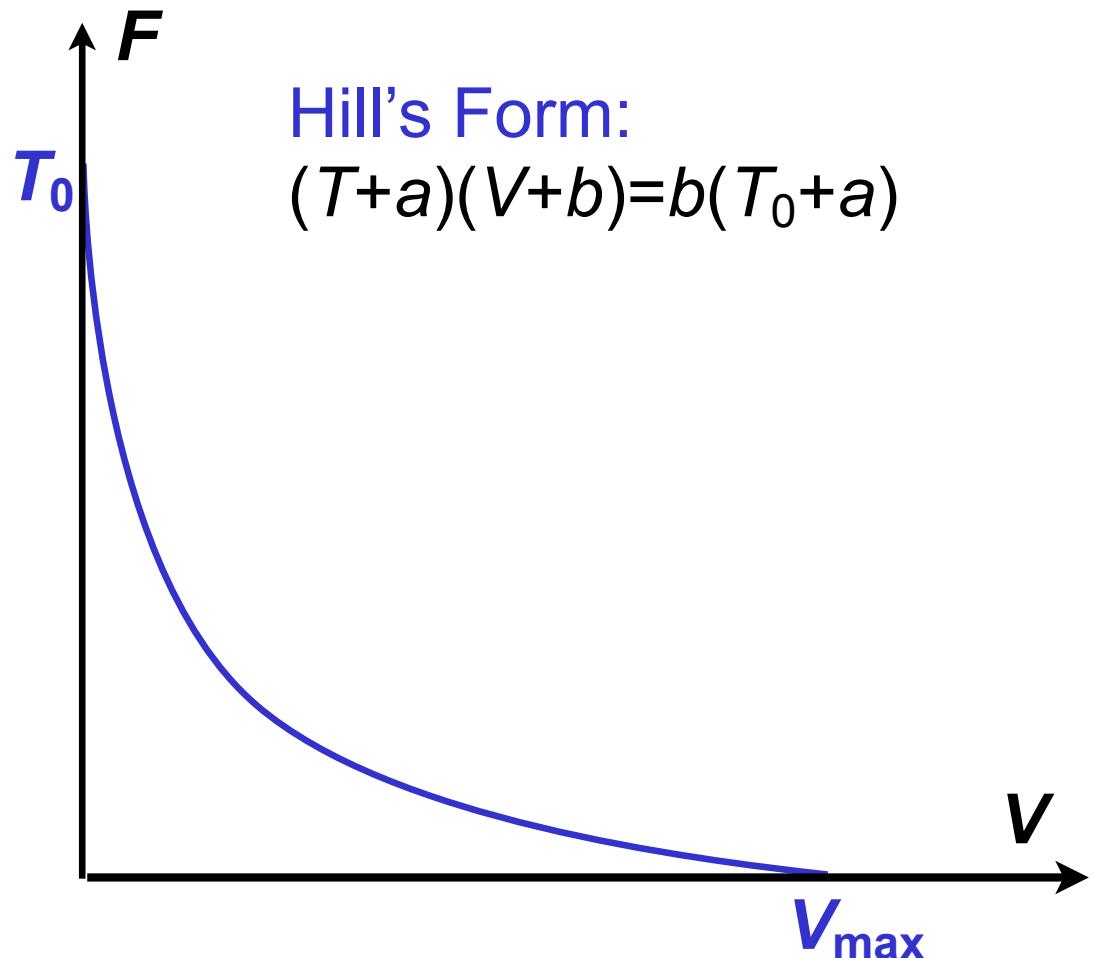
Hill's Force-Velocity Relation

Dimensionless forms:

$$\frac{V}{V_{\max}} = \frac{1 - T/T_0}{1 + c(T/T_0)}$$

$$\frac{T}{T_0} = \frac{1 - V/V_{\max}}{1 + c(V/V_{\max})}$$

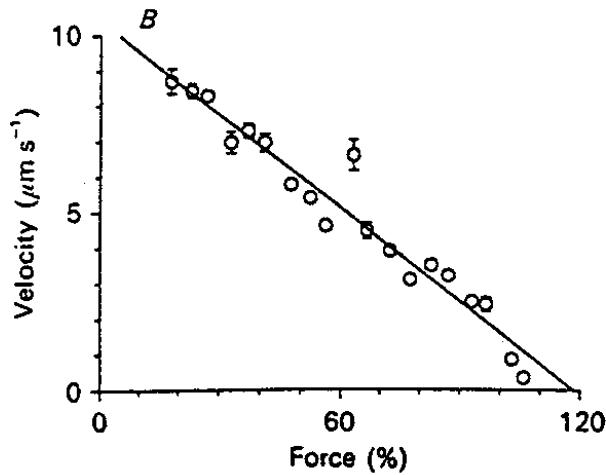
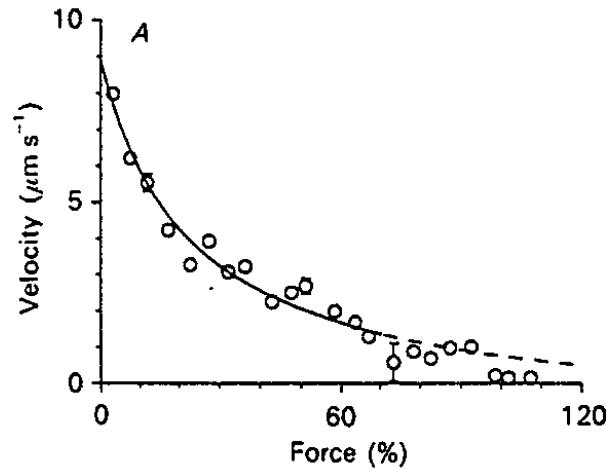
- $-a$, $-b$ = asymptotes
- T_0 = Isometric tension
- V_{\max} = unloaded shortening velocity
- $c = T_0/a$ (ranges from 1.2-4.0)



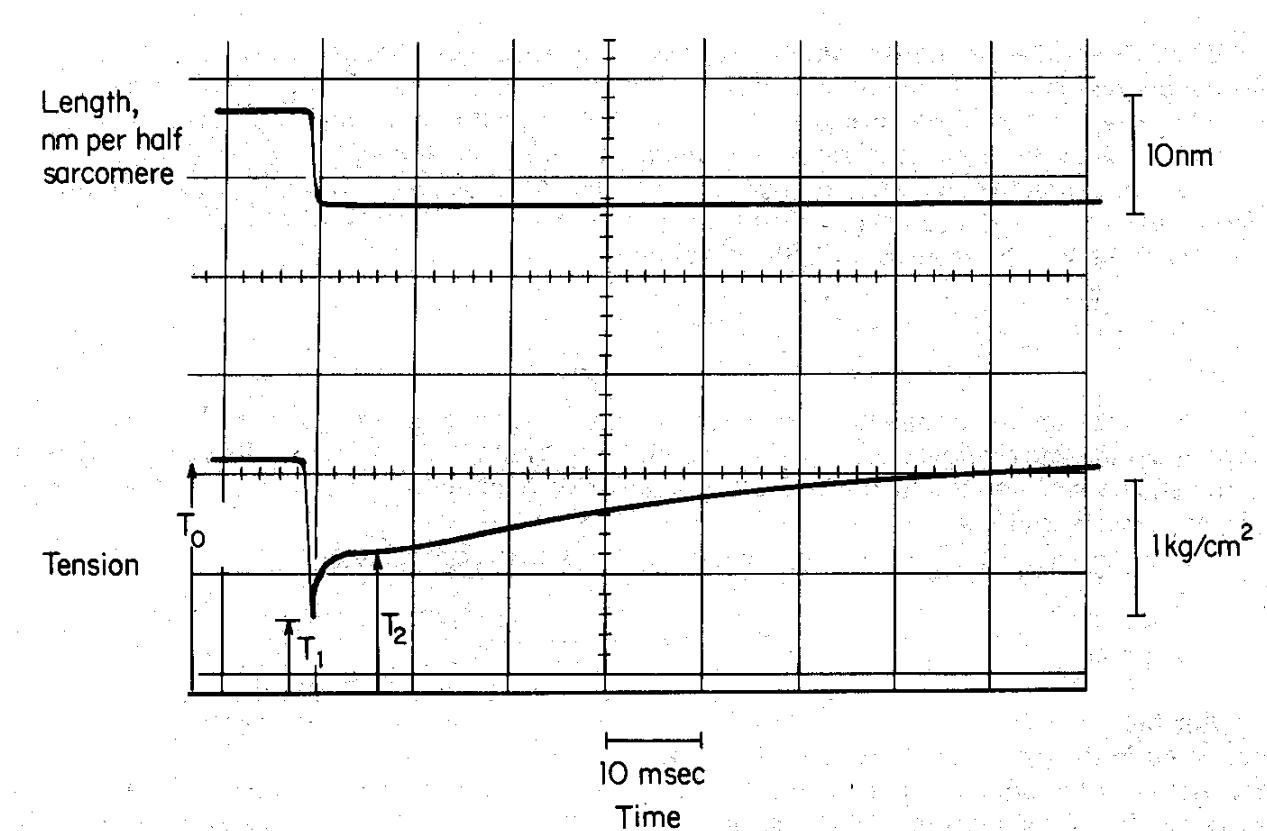
Isotonic Force-Velocity Relation

Isovelocity release experiment conducted during a twitch

Cardiac muscle force-velocity relation corrected for viscous forces of passive cardiac muscle which reduce shortening velocity



Transient Responses



Tetanized single frog muscle fiber at 0°C during a 1% shortening step lasting 1 ms

Cardiac Muscle: Summary

- *Cardiac muscle fibers* (cells) are short and rod-shaped but are connected by *intercalated disks* and collagen matrix into a spiral-wound *laminar fibrous architecture*
- The *cardiac sarcomere* is similar to the skeletal muscle sarcomere
- Cardiac muscle has a very slow twitch but it can not be tetanized because the *cardiac action potential* has a refractory period
- *Calcium* is the intracellular trigger for cardiac muscle contraction
- *Cardiac muscle testing* is much *more difficult* than skeletal muscle: *laser diffraction* has been used in trabeculae
- Cardiac muscle has relatively *high resting stiffness* due to more collagen and shorter titin isoforms.
- The *cardiac muscle isometric length-tension curve* has no real descending limb