## Cellular mechanisms of failure and arrhythmia in the diseased heart

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The RyR2 ligand-gated  $Ca^{2+}$  release channel is found embedded in the membrane of the intracellular  $Ca^{2+}$  store (the sarcoplasmic reticulum; SR), within the heart. It forms the hub of a large macromolecular complex that plays a vital role controlling cellular  $Ca^{2+}$  handling and specifically in SR  $Ca^{2+}$  release leading to systole. Maintaining a highly regulated and robust release of  $Ca^{2+}$  during systole and minimizing  $Ca^{2+}$  release, or leak, through the RyR2 during diastole is essential to healthy heart function. In heart failure, excess  $Ca^{2+}$  release or leak through RyR2 during diastole is prevalent. This leak is an arrhythmic substrate (Shannon *et al.*, 2002), which can be induced by changes in channel sensitivity to  $Ca^{2+}$  (Marx *et al.*, 2000; Terentyev *et al.*, 2008; Walweel *et al.*, 2017), the loss of regulatory co-factors and covalent modification by stress-induced reactive oxygen/nitrogen species and enhanced phosphokinase activity (reviewed in Dobrev *et al.*, 2014).

We have previously shown that RyR2 is hyperphosphorylated at S2808 and S2814 and redox modified in human heart failure (Walweel *et al.*, 2017). There is a reduction in the association of regulatory phosphatases with RyR2, which in part can account for the hyperphosphorylation observed in human heart failure patients (Walweel *et al.*, 2017). These phosphor/redox-dependent changes correlate with a loss of channel responsiveness to  $Ca^{2+}$ , and to a reduced association of the regulatory co-factors FKBP12 and FKBP12.6 from the channel (Walweel *et al.*, 2017). Our results illustrate that changes in  $Ca^{2+}$  sensitivity are also observed in a number of other cardiac pathologies, including a model of RyR2-linked arrhythmogenic right ventricular cardiomyopathy and viral induced-myocarditis. Very recent data show a changed pattern of  $Ca^{2+}$  handling protein expression between atrial and ventricular healthy human heart tissue. Comparing failing heart atria and ventricle, we find not only very varied protein expression patterns, but also differences in phosphor/redox-RyR2 modification and RyR2 calcium handling.

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