

## ENDOLYSOSOMAL CLC CHLORIDE/PROTON ANTIPORTERS - FROM BIOPHYSICS TO HUMAN GENETIC DISEASES

**Michael Pusch, Maria Antonietta Coppola, Abraham Tettey-Matey, Margherita Festa, Paola Gavazzo, Cristiana Picco, Francesca Sbrana, Alice Giusto, Irene Mazza, Raffaella Barbieri**

*Institute of Biophysics, CNR, Genoa, Italy; michael.pusch@ibf.cnr.it*

Endosomes and lysosomes are intracellular vesicular organelles with important roles in cell functions such as protein homeostasis, clearance of extracellular material, and autophagy. Endolysosomes are characterized by an acidic luminal pH that is critical for proper function. Five members of the gene family of dimeric voltage-gated Chloride Channels (CLC proteins) are localized to endolysosomal membranes, carrying out anion/proton exchange activity and thereby regulating pH and chloride concentration<sup>1</sup>. Mutations in the genes encoding these vesicular CLCs (vCLCs) cause global developmental delay, intellectual disability, various psychiatric conditions, lysosomal storage diseases, and neurodegeneration, resulting in severe pathologies or even death<sup>1-5</sup>. Currently, there is no cure for any of these diseases. Based on sequence homology and functional properties, vCLCs fall into two classes: the first comprises endosomal CIC-3, CIC-4, and CIC-5 that share a high sequence homology (the genes encoding these transporters are denoted for example as *CLCN3* for CIC-3). Among these, CIC-5 is kidney specific, while CIC-3 and CIC-4 are most important in neurons<sup>1</sup>. While CIC-3 is stable in homodimeric form, CIC-4 requires CIC-3 to form stable heterodimers<sup>6, 7</sup>. We characterized the first disease-mutations found in *CLCN3* and discovered a novel gain-of-function (GoF) effect associated with dramatically enhanced inward currents at acidic extracellular/luminal pH<sup>4</sup>. In parallel, we investigated a large number of X-linked *CLCN4* variants, some of which exhibited a similar GoF, while others induced a shift of the voltage-dependence to more positive voltages<sup>5</sup>. Both effects are expected to be dominant, explaining that such variants cause disease also in females<sup>5</sup>. Very recently, we discovered that the transmembrane protein of unknown function, TMEM9B strongly suppresses currents carried by CIC-3 and CIC-4, but not that of CIC-1 and CIC-7. We further showed physical interaction of TMEM9B with CIC-3 and CIC-4 using FLIM-FRET microscopy<sup>8</sup>. CIC-6 and CIC-7 form a separate branch and are located in late endosomes and lysosomes, respectively. Recently, we discovered that CIC-6 requires very positive voltages for transport activation, with slow activation kinetics, similar to CIC-7<sup>9</sup>. The GoF disease mutation Y553C<sup>3</sup> exhibited a leftward shift of the voltage-dependence of activation<sup>9</sup>. Recently we further characterized the luminal chloride and pH dependence of CIC-6 and CIC-7 and discovered that the two transporters exhibit opposite pH and chloride dependence: CIC-6 is activated, whereas CIC-7 is inhibited by acidic pH and high chloride. This shows that the two transporters play non-overlapping

physiological role in late endosomes and lysosomes, respectively<sup>10</sup>. Finally, we propose that inhibition of ClC-7 by high chloride serves to limit accumulation of lysosomal chloride in order to prevent an osmotic disaster.

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