# Bicarbonate and Fast-Twitch Muscle: Evidence for a Major Role in pH Regulation

J. Grossie, Carol Collins, and Mark Julian

Department of Physiology, Ohio State University College of Medicine, Columbus, Ohio 43210

Summary. Internal pH (pH) was analyzed in rat extensor digitorum longus (Edl) muscle at 30°C with single-barrel liquid ionselective electrodes. Average pH<sub>i</sub> in 284 cells was  $7.197 \pm 0.006$ . Increases in CO<sub>2</sub> from nominally 0 to 5% produced an acidification from which recovery took place. In different groups of cells, recovery from the 5% CO<sub>2</sub> acidification was significantly inhibited by 100 µM 4,4' diisothiocyanatostilbene 2,2' disulfonic acid (DIDS), CI removal, Na removal and 2 mm amiloride. Prepulsing with 20 mM NH<sub>4</sub> in the presence of CO<sub>2</sub>/HCO<sub>3</sub> typically reduced pH<sub>i</sub> to only about neutral, whereas 50 mM reduced pH<sub>i</sub> to 6.7-6.8. In the nominal absence of CO<sub>2</sub>/HCO<sub>3</sub>, 20 mM NH<sub>4</sub> reduced pH<sub>i</sub> to about 6.7 from which recovery took place at about 58% of the rate seen in different cells in the presence of  $CO_2/HCO_3$ . In the presence of  $CO_2/HCO_3$ , cells prepulsed with 50 mM NH<sub>4</sub> had fully recovered to an average pH<sub>i</sub> of 7.22  $\pm$  0.04 about 90 min after removal of NH<sub>4</sub>. However, 90 min after removal of 20 mM  $NH_4$  in the absence of  $CO_2/HCO_3$ , average  $pH_i$  was significantly less (7.05  $\pm$  0.03). Intrinsic buffering capacity ( $\beta_i$ ) was obtained during pulses of CO<sub>2</sub>, acetic acid or after an NH<sub>4</sub> pulse.  $\beta_i$  was significantly reduced in the absence of HCO<sub>3</sub>, Cl or Na and HCO<sub>3</sub>. The data provide significant support for an important role of  $HCO_3$  in the control of  $pH_i$  in fast-twitch muscle.

**Key Words** fast-twitch muscle  $\cdot$  pH regulation  $\cdot$  bicarbonate  $\cdot$  chloride

# Introduction

Internal pH (pH<sub>i</sub>) in a variety of cell types is maintained at a level distinctly alkaline to that which would occur if internal and external H activities were distributed in equilibrium with the membrane potential. The mechanism by which this alkaline pH<sub>i</sub> is maintained in mammalian soleus (Aickin & Thomas, 1977) and frog skeletal muscle is largely by way of an amiloride-sensitive Na-H exchange. The role of external HCO<sub>3</sub> in the regulation of pH<sub>i</sub> in these muscles is minor and in frog semitendinosis appears virtually inoperative if the resting potential is near normal (Putnam, Roos & Wilding, 1986).

Whether this same Na-H exchanger is the prime mode of  $pH_i$  regulation in all types of mammalian

skeletal muscle remains a matter of conjecture. In an earlier study using DMO to determine  $pH_i$ , it was found that removal of Cl from the external solution caused a prominent reduction in acid extrusion in rat diaphragm (Roos & Boron, 1978). This strongly implicates a HCO<sub>3</sub>-Cl exchange as an important means of correcting pH<sub>i</sub> in this muscle type. With the exception of this study, the literature does not address modes of pH<sub>i</sub> regulation in fast-twitch muscle. From well-known differences in types of skeletal muscle, one can easily speculate that fast-twitch muscle might possess a more elaborate means of controlling pH<sub>i</sub>. For example, <sup>31</sup>P NMR studies by Kushmerick (1987) show that in fast-twitch muscle contraction causes a decrease in  $pH_i$ , whereas in slow-twitch muscle contraction causes pH<sub>i</sub> to rise. Present interest in the mode of  $pH_i$  regulation in this muscle was prompted by several other studies. The resting potential  $(V_m)$  in extensor digitorum longus (Edl) muscle from ketoacidotic diabetic rats was significantly depolarized but repolarized to nearly normal upon removal of Cl, (Grossie, 1985) while  $V_m$  in soleus muscle from the same type of animal was normal (Paulus & Grossie, 1983). Experiments on normal Edl muscle showed that in the absence of external HCO<sub>3</sub>,  $V_m$  becomes more positive due in part to increases in internal Na and Cl (Grossie, 1985). The return of  $HCO_3$  reverses these effects. Removal of external Na or Cl also caused repolarization in solutions free of  $HCO_3$ . In the course of these studies, it was found that internal Cl activity is less than expected via a passive distribution. The literature shows that at least one other cell. Aplysia neurone, has a similar Cl distribution and in this case  $HCO_3$  is likely to have a role in pH<sub>i</sub> regulation (Russell, 1978). The present studies were undertaken to ascertain what role HCO<sub>3</sub> might have in the control of  $pH_i$  regulation in fast-twitch muscle, and the data strongly suggests that HCO<sub>3</sub> is much more involved in pH<sub>i</sub> regulation in this muscle than is the case for mammalian soleus.

# **Materials and Methods**

Adult Sprague-Dawley or Wistar rats of either sex were anesthesized with ether, and the Edl muscle was removed. The muscle was continually superfused with the basic Ringers solution at 20°C during its removal and subsequent placement in the recording chamber. Upon removal of extraneous tissue, the chamber was heated to 30°C and allowed to equilibrate for approximately 20 min before experiments began. The 30°C temperature was used because it has been found that at 37°C, the muscle undergoes a slowly developing contracture after about 2 hr in the bath as evidenced by a wavy appearance of the fibers. This apparent contracture is delayed or prevented at 30°C and is almost never observed at 20°C. All recordings were made from the posterolateral surface on the distal end of the muscle, an area that is composed almost entirely of fast-twitch fibers (Niederle & Mayr, 1978).

Internal hydrogen activity was determined with H-selective electrodes using the ligand prepared by Ammann et al. (1981). Single-barrel pH electrodes were constructed with filamented glass tubing (W-P Instruments). After construction, the micropipette tips were dipped in a 0.1% solution of Dow-Corning 1107 in acetone, heated at 300°C for 6-8 hr and then stored over selica gel until use. The micropipettes were backfilled with the H-sensitive ligand and then backfilled with a buffer identical to that used by Ammann et al. (1981). The microelectrodes were connected to a varactor bridge electrometer (Analog Devices 311J) with the output connected to a digital voltmeter, oscilloscope, polygraph (Grass P7A) and a differential amplifier. The microelectrodes were calibrated in four solutions of known pH ranging from 6.5 to 7.8 determined with a glass pH electrode (Radiometer). These calibrating solutions had the following composition (in mM): NaCl, 129.9; KCl, 10; Na<sub>2</sub>HPO<sub>4</sub>, 10; Na<sub>2</sub>B<sub>4</sub>O<sub>7</sub>, 2.8. HCl was added to adjust pH to approximately 6.5, 7.0, 7.4 and 7.8. The slope-relating voltage to pH was calculated. The average slope was 61  $\pm$  0.8 mV/10-fold change in H activity (n = 114). The mean difference between the pre- and post-recording calibration was  $0.042 \pm 0.5$  mV/10-fold change in H activity. Most of these pH electrodes showed no sensitivity to any ions or drugs used. However, some were found to have an apparent sensitivity to CO<sub>2</sub>, since they gave a pH that was always much more acidic than that determined by the glass pH electrodes. However, these pH microelectrodes were discarded.

Membrane voltage was recorded with 3M KCl electrodes (resistance 5–10 M $\Omega$ ) made with ordinary borosilicate glass tubing (i.e. 1 mm). Filamented glass tubing was also used to make 3M KCl electrodes in which the resistance was about 25–35 M $\Omega$ . Either type was connected to an electrometer (W-P Instruments, M4A) that contained a circuit for injection of current through the recording microelectrode. The electrometer output was connected to a digital voltmeter, oscilloscope, polygraph and a differential amplifier. Microelectrodes were mounted on a micromanipulator (Jena). The cell was first impaled with the pH electrode and about 15 sec allowed for the voltage to attain a steady value. Subsequently, the  $V_m$  electrode was placed into the same cell 50-100 µM away and a small (5-10 nA) anodal current was passed. A hyperpolarization recorded from the pH electrode confirmed that the two were in the same cell. The anodal current was turned off and  $pH_i$  was recorded for at least 1 min before any manipulations were carried out. It was found that when drift occurred in the  $pH_i$  record, it was apparent during the first minute, i.e., soon after impalement by the KCl electrode. In fresh preparations, drift in the pH<sub>i</sub> record was seldom a problem, but in preparations that had been in the bath for 5-6 hr or more, an alkaline drift was common and frequently resulted in termination of the experiment. This problem was particularly acute in experiments where an NH<sub>4</sub> prepulse was used to acidify the cell.

 $V_m$  and pH<sub>i</sub> were recorded on different channels of the polygraph at its minimal chart speed of 0.25 mm/sec. Voltage deflections of the pH<sub>i</sub> channel pen were read to the nearest 0.25 mm which, with a typical pH microelectrode, represented a pH difference of 0.003 unit. While continually monitoring pH<sub>i</sub> and  $V_m$ , various test solutions were introduced into the bath chamber by gravity flow via glass tubing at an initial rate sufficient to produce a fourfold change in bath volume in approximately 20 sec. Inflow was then slowed to 8–10 ml/min. Recovery of pH<sub>i</sub> during exposure to acidifying agents is due to extrusion of acid equivalents and was expressed as a rate of change of pH<sub>i</sub> per minute. Recovery rates in the presence of CO<sub>2</sub> were taken as the change in pH<sub>i</sub> from the minimal value to the maximal pH<sub>i</sub> at 15 min. Recovery rates following an NH<sub>4</sub> prepulse were determined from the slope of a line drawn tangent to the pH<sub>i</sub> record at a pH<sub>i</sub> of 6.9.

When cellular acidification was elicited with acetate or  $CO_2$ , estimates of buffering capacity ( $\beta$ ) were calculated from the difference between the pre-acid pH<sub>i</sub> and the lowest pH<sub>i</sub> attained during acid exposure. When acetate was used,  $\beta$  was calculated with the following formula

$$\beta = \frac{C \cdot 10^{(pH_i - pK)}}{\Delta pH_i (1 + 10^{(pH_o - pK)})}$$
(1)

where C is the total concentration of acetate and acetic acid, pK was 4.57 and pH<sub>o</sub> is the external pH. In the presence of CO<sub>2</sub>/ HCO<sub>3</sub> buffers and acetate, the above equation gives the total buffering capacity ( $\beta\tau$ ). Intrinsic (non-CO<sub>2</sub>) buffering capacity ( $\beta_i$ ) was obtained by subtracting CO<sub>2</sub> buffering capacity ( $\beta$ CO<sub>2</sub>) from  $\beta\tau$ .  $\beta$ CO<sub>2</sub> was determined from pH<sub>i</sub> and the internal [HCO<sub>3</sub>] ( $\beta$ CO<sub>2</sub> = ln 10 [HCO<sub>3</sub>]<sub>i</sub>).  $\beta$  was also determined from the change of pH<sub>i</sub> attendant to the removal of NH<sub>4</sub> by an equation analogous to the above, transposing the pH and the pK of 9.41. In the nominal absence of CO<sub>2</sub>, the above formula yields  $\beta_i$ . Intrinsic buffering capacity was also calculated from the change in pH<sub>i</sub> induced by increasing CO<sub>2</sub>

$$\beta_i = \frac{\delta P \text{CO}_2 \ 10^{(\text{pH}_i - \text{pK})}}{\Delta \text{pH}_i} \ . \tag{2}$$

In this formula, the CO<sub>2</sub> solubility coefficient ( $\delta$ ) was taken as 0.0298 (Harned & Bonner, 1945) and the dissociation constant (pK) was taken as 6.05 (Harned & Davis, 1943). Calculations of  $\beta_i$  were done pursuant to the following assumptions: that the carbonic and acetic acid dissociation constants and CO<sub>2</sub> solubility coefficient are the same inside and outside the cell. In the case where NH<sub>4</sub> was used to acidify the cell, it was assumed that all internal NH<sub>4</sub> diffused from the cell as NH<sub>3</sub>, although this probably was not the case in the absence of CO<sub>2</sub>/HCO<sub>3</sub> (*see* Discussion). It was also assumed that  $\beta_i$  was independent of pH<sub>i</sub>.

#### Solutions

The basic Ringer solution consisted of the following (in mM): NaCl 126; KCl 5; Na<sub>2</sub>HPO<sub>4</sub> 1; NaHCO<sub>3</sub> 24; MgCl<sub>2</sub> 1; glucose 11. Oxygen (95%) and CO<sub>2</sub> (5%) were added to the solution to give a pH of 7.37–7.4. Nominally HCO<sub>3</sub>-free solutions were made by substituting HCO<sub>3</sub> with 24 mM N-2-hydroxyethylpiperazine N 2 ethane sulfonic acid (HEPES). An appropriate amount of NaOH was added to adjust the pH to 7.4 at 30°C. These solutions were



**Fig. 1.** (A) Average  $pH_i$  and  $V_m$  in Edl muscle cells in response to an increase in CO<sub>2</sub> from nominally 0 to 5%. (B) DIDS (100  $\mu$ M) was added to the CO<sub>2</sub>/HCO<sub>3</sub> solution. (C) 2 mM amiloride was added to the 5% CO<sub>2</sub> solution. Horizontal bars represent the period of CO<sub>2</sub> application

equilibrated with 100% O2 with other constituents being the same as the basic Ringer solution. For Na-free, HCO<sub>3</sub>-free solutions, 24 mM HEPES was used instead of NaHCO3 and N-methyl-Dglucammonium (NMDG) was supplemented for Na. For Na-free solutions buffered with CO<sub>2</sub>/HCO<sub>3</sub>, NMDG was substituted for Na and choline HCO3 was substituted for NaHCO3. Na-free acetate solutions were prepared by adjusting an appropriate concentration of acetic acid to a neutral pH by addition of a known amount of NMDG. These solutions were equilibrated with 100% O2. When acetic acid was used to reduce pHi at normal Na concentrations, external Cl was held constant by substituting 20 тм Na gluconate for 20 mм NaCl. Na gluconate was withheld from the Na acetate solution with all other ingredients being the same as for the basic Ringer solution. Cl-free solutions were prepared by substituting gluconate salts and adding 10 mM Ca gluconate to maintain Ca activity (Kenyon & Gibbons, 1977). Abolition of contractile activity in the Cl-free solution was achieved by adding 20 mM of commercially (Aldrich) obtained 2,3 butanedione monoxime (BDM), which appears to inhibit crossbridge function (Mulieri & Alpert, 1984). When an NH4 prepulse was used as an acidifying agent, 20 or 50 mм NaCl was withheld for equimolar quantities of NH4. All solutions contained 0.5 mg/ml bovine serum albumin. Amiloride and 4,4' diisothiocyanatostilbene 2,2' disulfonic acid (DIDS) were obtained commercially (Sigma).

#### PROCEDURE

A practical means of reducing  $pH_i$  was via application of  $CO_2$ , since recovery could be observed during exposure.  $pH_i$  transients in a group of control cells were recorded. Recovery rates and buffering capacities in these cells were then compared to others in the same or different muscles in order to determine effects of drugs or of different solutions. The criteria for a successful recording was a lack of drift in the  $pH_i$  record before perturbations were initiated, maintenance of impalement for an appropriate period and the return of the  $V_m$  and pH electrode voltages to 2 mV of the initial value.

### Results

At 30°C in the basic CO<sub>2</sub>/HCO<sub>3</sub> Ringer solution, the average pH<sub>i</sub> in 284 cells from 52 Edl muscles was 7.197  $\pm$  0.006 and the average  $V_m$  was  $-76.9 \pm 0.24$  mV.

Upon switching from nominally CO<sub>2</sub>-free to 5% CO<sub>2</sub> solution, the mean pH<sub>i</sub> in 12 cells decreased from 7.29  $\pm$  0.028 to 7.15  $\pm$  0.027, and then began to alkalize at an average rate of 0.0044  $\pm$  0.0006 pH unit/min (Fig. 1A). Removal of CO<sub>2</sub> after a 15-min exposure resulted in an overshoot, which was followed by an acidification over the subsequent 15-min period. The average V<sub>m</sub> in the CO<sub>2</sub>-free Ringer was lower than in conditions of normal CO<sub>2</sub>/HCO<sub>3</sub>. Upon increasing CO<sub>2</sub>, V<sub>m</sub> became more negative then depolarized upon removal of CO<sub>2</sub>/HCO<sub>3</sub>.

The pH<sub>i</sub> recovery during CO<sub>2</sub> exposure was sensitive to DIDS as shown in Fig. 1*B* where the mean pre-CO<sub>2</sub> pH<sub>i</sub> was  $7.31 \pm 0.06$  and decreased to an average of  $7.18 \pm 0.04$  in the presence of CO<sub>2</sub> and 100  $\mu$ M of DIDS. The recovery rate in three cells average 0.00076  $\pm$  0.0007 and significantly (*P* = <0.01) less than controls. The average V<sub>m</sub> was slightly less than controls initially but began to repolarize upon increasing CO<sub>2</sub>/HCO<sub>3</sub>. In a separate



**Fig. 2.** Average  $pH_i$  and  $V_m$  in Edl muscle cells in the presence of normal Cl ( $\bullet$ ) and in a Cl-free ( $\bigcirc$ ) condition. Horizontal bar represents the period of CO<sub>2</sub> application. BDM (20 mM) is present throughout in all solutions

group of five cells (*not shown*), 100  $\mu$ M of DIDS was added to both the HEPES buffered pre-CO<sub>2</sub> and the CO<sub>2</sub> solution. With continuous exposure to DIDS, the average pre-CO<sub>2</sub> pH<sub>i</sub> was 7.19 ± 0.03 and decreased to a mean of 6.97 ± 0.02 in the CO<sub>2</sub>HCO<sub>3</sub> solution with no recovery seen during the CO<sub>2</sub> pulse. The mean  $V_m$  was initially  $-66 \pm 1.7$  mV but no repolarization was seen during CO<sub>2</sub> exposure as was the case in the control condition (Fig. 1A).

In a third group of four cells, amiloride (2 mM) was added to the CO<sub>2</sub>/HCO<sub>3</sub> solution (Fig. 1*C*). The average initial pH<sub>i</sub> in this group was  $7.35 \pm 0.03$ . No recovery was seen as the mean pH<sub>i</sub> gradually acidified in the presence of CO<sub>2</sub>. Removal of CO<sub>2</sub> was followed by an undershoot of the original pre-CO<sub>2</sub> pH<sub>i</sub>. Initially  $V_m$  was similar to controls, but there was no repolarization in the presence of CO<sub>2</sub>.

Separate groups of cells were first exposed to the HCO<sub>3</sub>-free Ringer solution that also contained 20 mM BDM (Fig. 2). In five cells, the average pH<sub>i</sub> decreased from 7.29  $\pm$  0.02 upon application of CO<sub>2</sub> also containing 20 mM BDM. The subsequent average recovery rate was 0.0038  $\pm$  0.0004 pH unit/min and not significantly different from controls (Fig.



**Fig. 3.**  $V_m$  and pH<sub>i</sub> transients in single cells in response to a 10min pulse (horizontal bar) of 20 mM (**①**) and 50 mM (**①**) NH<sub>4</sub>, both in the continuous presence of CO<sub>2</sub>/HCO<sub>3</sub>, and 20 mM ( $\bigcirc$ ) NH<sub>4</sub> in the absence of CO<sub>2</sub>/HCO<sub>3</sub>

1A). CO<sub>2</sub> removal was followed by an overshoot and then a return to the pre-CO<sub>2</sub> pH<sub>i</sub>. Average  $V_m$  in this group was initially more negative than other controls but the repolarization normally seen in the presence of CO<sub>2</sub> was not apparent. Separate muscles were exposed to a Cl-free, CO<sub>2</sub>/HCO<sub>3</sub>-free Ringer plus 20 mM BDM. Upon switching to a Clfree solution with normal CO<sub>2</sub>/HCO<sub>3</sub> concentrations, pH<sub>i</sub> fell from 7.27  $\pm$  0.029 to 7.09  $\pm$  0.029. Recovery during CO<sub>2</sub> exposure was very slight (0.00084  $\pm$  0.0006 pH<sub>i</sub> unit/min) and significantly (P = < 0.001) less than normal or BDM-treated controls with normal Cl.

Three cells were analyzed in response to  $CO_2$ acidification in the absence of Na in both the pre- $CO_2$  and the  $CO_2$  solution. No recovery was observed during  $CO_2$  application in any cell. These studies were not vigorously pursued, however, since they would not distinguish between a Na-H antiport and a Na-dependent  $HCO_3/Cl$  transport.

An increase in  $CO_2$  consistently failed to produce a substantial decrease in pH<sub>i</sub>. Indeed, the lowest mean pH<sub>i</sub> attained in the presence of CO<sub>2</sub> was only 7.15. In an effort to reduce pH<sub>i</sub> to lower levels, several muscles were exposed to 20 or 50 mM NH<sub>4</sub>. Examples of these responses are seen in Fig. 3. In the presence of normal CO<sub>2</sub>/HCO<sub>3</sub>, a 10-min prepulse of 20 mM NH<sub>4</sub> consistently failed to reduce pH<sub>i</sub> much beyond neutral with complete recovery occurring in about 40 min. In order to consistently

Acidifying		Ion/drug	$\beta_i$	n
Agent	Buffer	(Added+/omitted-)	(meq H/pH//liter SE)	
0-5% CO <sub>2</sub>	HEPES/HCO3		101 ± 11	12
Acetic	HCO <sub>3</sub>		$95 \pm 15$	11
0-5% CO <sub>2</sub>	HEPES/HCO <sub>3</sub>	+DIDS <sup>b</sup>	$120 \pm 6$	3
0-5% CO2	HEPES/HCO <sub>3</sub>	+DIDS <sup>c</sup>	$40 \pm 2$	5
0-5% CO2	HEPES/HCO <sub>3</sub>	+Amiloride	$93 \pm 5$	4
0-5% CO2	HEPES/HCO <sub>3</sub>	+ BDM	$108 \pm 7$	5
0-5% CO2	HEPES/HCO <sub>3</sub>	+BDM, -Cl	$64 \pm 12$	5
0-5% CO <sub>2</sub>	HEPES/HCO3	+NMDG,-Na	$67 \pm 10$	3
Acetic	HEPES	$-HCO_3$	$52 \pm 4$	8
Acetic	HEPES	-HCO <sub>3</sub> ,-Na	$44 \pm 3$	13
NH₄ª	HCO <sub>3</sub>		$97 \pm 18$	8
NH4 <sup>a</sup>	HEPES	-HCO <sub>3</sub>	$87 \pm 10$	6

**Table.** Apparent intrinsic buffering capacities  $(\beta_i)$  of Edl muscle measured by various methods

<sup>a</sup>  $\beta_i$  measured from the fall in pH<sub>i</sub> occurring upon NH<sub>4</sub> removal.

<sup>b</sup> DIDS was applied only during CO<sub>2</sub> acidification.

<sup>c</sup> DIDS was applied before, during and after CO<sub>2</sub> acidification.

decrease pH<sub>i</sub> to lower levels in the normal CO<sub>2</sub>/ HCO<sub>3</sub> solution, muscles were exposed to 50 mM NH<sub>4</sub> for 10 min. This decreased pH<sub>i</sub> to about 6.8. However, full recovery from the 50-mM prepulse typically required almost 90 min. In four cells in which impalement was maintained to near completion, recovery rates at a pH<sub>i</sub> of 6.9 averaged 0.015  $\pm$ 0.0009 pH unit/min. V<sub>m</sub> became more positive upon NH<sub>4</sub> removal.

In the nominal absence of  $CO_2/HCO_3$ , five cells were prepulsed with 20 mM NH<sub>4</sub>. In this condition, this concentration of NH<sub>4</sub> was sufficient to reduce pH<sub>i</sub> to 6.7–6.8, but typically, complete recovery required considerable time. In these cells, the mean recovery rate at pH<sub>i</sub> 6.9 was 0.0087  $\pm$  0.0012 and significantly ( $P = \langle 0.01 \rangle$ ) less than that of cells in the normal  $CO_2/HCO_3$  solution.  $V_m$  underwent repolarization upon NH4 removal. Attempts to record pH<sub>i</sub> over these extended periods proved quite difficult. However, measurements of  $pH_i$  in individual cells gave support to the slow recovery seen in the absence of  $CO_2/HCO_3$ . At an average of 95 ± 6 min after a 10-min prepulse of 20 mM NH<sub>4</sub>, the average  $pH_i$  in 10 cells was 7.05  $\pm$  0.027. However, at a similar period (96  $\pm$  3 min) in other muscles exposed to a 10-min prepulse of 50 mM  $NH_4$  in the presence of  $CO_2/HCO_3$ , the average pH<sub>i</sub> in 7 cells was 7.22  $\pm$  0.038 and significantly (P = <0.01) higher than those in the CO<sub>2</sub>/HCO<sub>3</sub>-free condition. Thus, there appears to be little doubt that removal of CO<sub>2</sub>/HCO<sub>3</sub> slows recovery to a significant degree.

The apparent buffering capacity was obtained with  $CO_2$  or acetic acid pulses in the presence and absence of  $CO_2/HCO_3$  and in Cl-free conditions (Table). The average  $\beta_i$  obtained upon increasing CO<sub>2</sub> from 0 to 5% was 101  $\pm$  11 meq H/pH<sub>i</sub>/liter. This average was not significantly altered in the presence of BDM. DIDS and amiloride had no effect on apparent  $\beta_i$  when both were applied only during the CO<sub>2</sub> pulse. However, when DIDS was applied to both the HEPES and the CO<sub>2</sub> solutions, the average  $\beta_i$  was 40 ± 2 meq H/pH<sub>i</sub>/liter (Table) and significantly  $(P = \langle 0.001 \rangle)$  less than the control average. The removal of Cl produced a significant (P =<0.01) reduction in apparent  $\beta_i$ . In the presence of  $CO_2/HCO_3$ ,  $\beta_i$  calculated with a 20-mm pulse of Na acetate was comparable to that found with  $CO_2/$ HCO<sub>3</sub> pulses. Exposure to the same concentration of Na acetate in the absence of CO<sub>2</sub>/HCO<sub>3</sub> resulted in an apparent  $\beta_i$  significantly ( $P = \langle 0.05 \rangle$ ) less than that of either CO<sub>2</sub>/HCO<sub>3</sub> pulses in normal Cl or Na acetate in the presence of CO<sub>2</sub>/HCO<sub>3</sub>. However, the apparent  $\beta_i$  for Na acetate in the absence of CO<sub>2</sub>HCO<sub>3</sub> was not significantly different from that obtained with a CO<sub>2</sub>HCO<sub>3</sub> pulse in the absence of Cl. In the absence of both Na and CO<sub>2</sub>/HCO<sub>3</sub>,  $\beta_i$ measured with 20 mM NMDG acetate gave an average similar to those obtained with Cl-free CO<sub>2</sub>/ HCO<sub>3</sub> pulses and for those measured with Na acetate in a CO<sub>2</sub>/HCO<sub>3</sub>-free state. The removal of Na also significantly ( $P = \langle 0.05 \rangle$ ) reduced  $\beta_i$ .

In the presence of  $CO_2/HCO_3$ , the apparent  $\beta_i$  calculated with a 50-mM NH<sub>4</sub> prepulse was similar to that calculated with a  $CO_2$  pulse. However, in the absence of  $CO_2/HCO_3$ , a prepulse with 20 mM NH<sub>4</sub> produced an apparent  $\beta_i$  similar to that obtained in the presence of  $CO_2/HCO_3$ . For reasons to be discussed, the latter result is probably unreliable.

# Discussion

As shown previously (Grossie, 1985), the removal of  $CO_2/HCO_3$  is followed by a depolarization which is enhanced at 30°C and expectedly tends to be aggravated by dual impalement. The lower  $V_m$  was considered a complicating factor for interpretation of a subsequent acid pulse. As a result of this concern, it was deemed more appropriate to pursue these analyses in cells not previously impaled where maximum voltages could be obtained, then comparing the average pH<sub>i</sub>,  $V_m$  and recovery rates by simple statistics.

The data shows that Edl muscle responds to  $CO_2$  in a manner similar to that seen in sould axon (Boron & De Weer, 1976) and snail neurone (Thomas, 1977). Rat diaphragm appears to recover from CO<sub>2</sub> acidification (Roos & Boron, 1978) whereas frog sartorius and semitendinosis (Bolton & Vaughan-Jones, 1977; Abercrombie, Putnam & Roos, 1983; Putnam et al., 1986) show no recovery from this form of acidification. Similarly, rat soleus does not recover during CO<sub>2</sub> acidification (Vanheel, Hemptinne & Leusen, 1986). The present data shows a rather rapid recovery in response to  $CO_2$ . but followed by an overshoot which is attentuated in comparison with that of depolarized frog muscle (Putnam et al., 1986). Reacidification followed the post-CO<sub>2</sub> overshoot. It may be argued that the alkalizing response seen during CO<sub>2</sub> exposure is merely electrode drift. However, it is highly improbable that the electrode would drift in an alkaline direction during CO<sub>2</sub> exposure, then upon withdrawal of  $CO_2$  suddenly reverse and drift in an acid direction. Presently we cannot fully explain the mild overshoot, although it must be influenced by the inability to instantly and completely remove CO<sub>2</sub>. It is possible that an alkaline-recovery system may also exist which would blunt the overshoot. However, it is concluded that the alkalizing response seen during CO<sub>2</sub> application is an actual loss of H or equivalent gain in OH or HCO<sub>3</sub>.

The recovery from  $CO_2$  acidification is strongly curtailed in the absence of Cl and was almost abolished when DIDS was applied only during  $CO_2$  exposure as well as when the drug was applied before, during and after  $CO_2$  application. These significant reductions in recovery rates strongly implicate a dependence on  $HCO_3$  and Cl for the recovery process at least over this upper range of  $pH_i$  values.

The application of 2 mM of amiloride served to convert the usual recovery into an acidification. Taken alone this segment of data would strongly indicate that recovery from  $CO_2$  acidification is entirely due to a Na-H exchange, but this is difficult to reconcile with the clear effects of DIDS and Cl re-

moval and provides no explanation for the effects of low Cl on acid recovery in rat diaphragm (Roos & Boron, 1978). The employed dose of amiloride is rather large and, therefore, may exert nonspecific effects. Amiloride is known to inhibit both a Naconductive pathway and the Na-H antiport systems in various epithelial cells and it is important that, generally, much higher concentrations are required to inhibit the Na-H exchange pathway than the conductive pathway (Benos, 1982). In Edl muscle, Cl is passively driven inward (Grossie, 1985) while HCO<sub>3</sub> is directed outward. Therefore, an alkalizing HCO<sub>3</sub>-Cl exchange is not possible unless an active transport system exists. On the other hand, a system that exchanges external NaHCO3 for internal Cl could be amiloride sensitive. In renal collecting tubules, an amiloride-sensitive NaHCO<sub>3</sub> transport has been reported (McKinney & Burg, 1978). Therefore, a possible explanation for the present data is that the drug can inhibit both types of acid recovery. Given the differential effects of amiloride dose on the conductive and Na-H pathways, experiments with smaller doses of amiloride would still be inconclusive. If a reduced rate of (or no effect on) recovery were observed with, for example, 0.1 or 1 mm amiloride, one might conclude that the dose was too low to inhibit the Na-H exchanger and experiments with higher doses would be indicated. An additional disturbing feature of the amiloride data was that the removal of CO<sub>2</sub> and amiloride elicited an increase in  $pH_i$  to a level that was still lower than the pre-CO<sub>2</sub> value. A similar transient was shown with 1 mm amiloride applied to normally polarized frog muscle (Putnam et al., 1986), but currently we can offer no explanation for the observation.

In mouse soleus, removal of 10 or 20 mM NH<sub>4</sub> consistently reduces  $pH_i$  well below 7.0 in  $CO_2/$ HCO3 (Aickin & Thomas, 1977) or 20 mM HEPES (Vanheel et al., 1986). In these reported experiments, intracellular H activity peaked several minutes after NH<sub>4</sub> removal and recovery was complete in about 10 min. In the present experiments, however, 20 mM  $NH_4$  frequently failed to produce an acidification lower than about neutral if HCO3 was present. To consistently decrease pH<sub>i</sub> to lower levels in the presence of  $CO_2/HCO_3$ ,  $[NH_4]$  was raised to 50 mm. This reduced  $pH_i$  to about 6.7, but time for complete recovery was about four-fold that of mouse soleus (Aickin & Thomas, 1977b). Although many recordings failed, usually because of a loss of impalement, a sufficient number of cells were followed to obtain an average recovery rate at a  $pH_i$  of 6.9 with a 6% SEM. In the absence of  $CO_2/HCO_3$ , however, a similar level of acidity was achieved with only 20 mM NH<sub>4</sub> with an even greater amount of time necessary for recovery as reflected in the

significantly lower mean recovery rate. This slow rate was confirmed in other cells at various times following NH<sub>4</sub> removal. Although the pH<sub>4</sub> recording was not sufficiently stable for continuous measurement, their pH<sub>i</sub>, obtained upon initial impalement, showed a significantly lower value than cells in other muscles exposed to an  $[NH_4]$  2.5 times higher in the normal  $CO_2/HCO_3$  environment. While the data shows that recovery rate in the nominal absence of  $CO_2/HCO_3$  is only about 58% of that seen in the presence of  $CO_2/HCO_3$ , the actual total buffering capacity of the cell is reduced in the nominal absence of CO<sub>2</sub>/HCO<sub>3</sub>. Therefore, the average H extrusion rate following an NH<sub>4</sub> prepulse is far less than in the presence of HCO<sub>3</sub>. These experiments strongly suggest a prominent role for HCO<sub>3</sub> in the recovery process in this muscle.

An analysis of the apparent  $\beta_i$  also suggests an involvement of HCO3 in pHi regulation. Meaningful assessments of  $\beta_i$  can only be obtained in conditions in which all forms of H or OH transport are eliminated. Most likely this qualification is not fully attained except in the absence of Cl, Na or NaHCO<sub>3</sub>. The presence of these ions will facilitate H transport either by the Na-H or the putative NaHCO<sub>3</sub>-Cl exchange, thus reducing the  $\Delta pH_i$  and increasing the apparent  $\beta_i$ . It is also noteworthy that the apparent  $\beta_i$  was greatly reduced when DIDS was applied both before and during CO<sub>2</sub> exposure. When applied in this manner, DIDS reduced  $\beta_i$  to a value similar to that seen in the absence of NaHCO<sub>3</sub>. The larger apparent  $\beta_i$  values seen in control conditions are taken as further evidence that not only the Na-H antiport but an additional HCO<sub>3</sub> transport system serves to raise  $pH_i$  in this muscle while acidification is being induced. However, when this transport is eliminated by removal of Na, Cl or HCO<sub>3</sub> or by appropriate application of DIDS, the calculated intrinsic buffering capacity of Edl muscle is similar to that reported for soleus muscle (Aickin & Thomas, 1977a).

When  $\beta_i$  was calculated from the decrease in pH<sub>i</sub> occurring upon NH<sub>4</sub> removal, the absence of CO<sub>2</sub>/HCO<sub>3</sub> appeared to have no effect. In the absence of CO<sub>2</sub>/HCO<sub>3</sub>, the influx of NH<sub>3</sub> usually caused a greater rise in pH<sub>i</sub>, followed by a more rapid acidification. A possible explanation for the enhanced "plateau acidification" in the HCO<sub>3</sub>-free state is an increased permeability of the sarco-lemma to NH<sub>4</sub> coupled, perhaps, with the absence of an inward transport of HCO<sub>3</sub>. As a result of a higher permeability, a portion of the internal NH<sub>4</sub> leaves the cell as the ion instead of the NH<sub>3</sub> form, which leaves H in the cell. These events would lead to a reduction in the pH<sub>i</sub> change seen upon NH<sub>4</sub> removal.

In summary, the presented data shows that Edl muscle undergoes recovery from a CO<sub>2</sub> acidification. This recovery is significantly reduced by DIDS and CI removal. Recovery from acidification produced by an NH<sub>4</sub> prepulse is reduced by about 40% in the absence of  $HCO_3$ . The absence of  $HCO_3$  also appears to prevent pH<sub>i</sub> from attaining a value of about 7.2 normally found in the CO<sub>2</sub>/HCO<sub>3</sub> condition. Therefore, while HCO<sub>3</sub> has but a limited role in the regulation of  $pH_i$  in soleus (Aickin & Thomas, 1977b), the present data shows that  $HCO_3$  has considerable importance in the complete recovery of pH<sub>i</sub> in Edl muscle and in this regard is similar to barnacle muscle (Boron, McCormick & Roos, 1979). smooth muscle (Aickin & Brading, 1984), snail (Thomas, 1977) and cravfish (Moody, 1981) neurones. The proposed model in fast-twitch muscle is that regulation is accomplished by both a Na-H exchanger and a second system in which external Na and HCO<sub>3</sub> is exchanged for internal Cl. Each system is responsible for removal of about equal amounts of acid equivalents from the cell until  $pH_i$ rises to about 7.0–7.1. Above this range, the Na-H exchanger operates at a rate so low as to be negligible, whereas the Na/HCO<sub>3</sub>-Cl exchanger raises  $pH_i$ to maintain a value of about 7.2. This model explains most of the observed pH<sub>i</sub> transients as well as providing a physiological basis for the finding that internal CI activity in Edl muscle is less than that predicted by a passive distribution and definitely appears to be controlled, in part, by external HCO<sub>3</sub> (Grossie, 1985).

The authors express genuine appreciation to Professor W. Simon, Zurich, for the H exchanger and to the Ohio State University Graduate School for partial support.

# References

- Abercrombie, R.F., Putnam, R.W., Roos, A. 1983. The intracellular pH of frog skeletal muscle: Its regulation in isotonic solution. J. Physiol. (London) 345:175-187
- Aickin, C.C., Brading, A.F. 1984. The role of chloride-bicarbonate exchange in the regulation of intracellular chloride in guinea-pig vas deferens. J. Physiol. (London) 349:587-606
- Aickin, C.C., Thomas, R.C. 1977a. Microelectrode measurement of the intracellular pH and buffering power of mouse soleus muscle fibres. J. Physiol. (London) 267:791-810
- Aickin, C.C., Thomas, R.C. 1977b. An investigation of the ionic mechanism of intracellular pH regulation in mouse soleus muscle fibres. J. Physiol. (London) 273:295-316
- Ammann, D., Lanter, F., Steiner, R.A., Schulthess, P., Shijo, V., Simon, W. 1981. Neutral carrier based hydrogen ion selective microelectrodes for extra and intracellular studies. *Anal. Chem.* 53:2267–2269
- Benos, D.J. 1982. Amiloride: A molecular probe of sodium transport in tissues and cells. Am. J. Physiol. 242:C131-C145

J. Grossie et al.: pH Regulation in Fast-Twitch Muscle

- Bolton, T.B., Vaughan-Jones, R.D. 1977. Continuous direct measurement of intracellular chloride and pH in frog skeletal muscle. J. Physiol. (London) 270:801–833
- Boron, W.F., DeWeer, P. 1976. Intracellular pH transients in squid giant axons caused by CO<sub>2</sub>, NH<sub>3</sub>, and metabolic inhibitors. *J. Gen. Physiol.* **67**:91–112
- Boron, W.F., McCormick, W.C., Roos, A. 1979. pH regulation in barnacle muscle fibers: Dependence on intracellular and extracellular pH. Am. J. Physiol. 237:C185-C193
- Grossie, J. 1982. Contractile and electrical characteristics of extensor muscle from alloxan-diabetic rats: An in vitro study. *Diabetes* 31:194–202
- Grossie, J. 1985. Effect of bicarbonate on resting potentials in mammlian skeletal muscle. J. Cell. Physiol. 125:115–121
- Harned, H.S., Bonner, F.T. 1945. The first ionization of carbonic acid in aqueous solutions of sodium chloride. J. Am. Chem. Soc. 67:1026-1031
- Harned, H.S., Davis, R. 1943. The ionization constant of carbonic acid in water and the solubility of carbon dioxide in water and aqueous salt solutions for 0 to 50°. J. Am. Chem. Soc. 65:2030-2037
- Kenyon, J.L., Gibbons, W.R. 1977. Effects of low chloride solutions on action potentials of sheep cardiac Purkinje fibers. J. Gen. Physiol. 70:635–660
- Kushmerick, M.J. 1987. Energetics studies of muscles of different types. Basic Res. Cardiol. (Suppl. 2) 82:17–30
- McKinney, T.D., Burg, M.B. 1978. Bicarbonate absorption by rabbit cortical collecting tubules in vivo. Am. J. Physiol. 234:F141-F145

- Moody, W.J. Jr. 1981. The ionic mechanism of intracellular pH regulation in crayfish neurones. J. Physiol. (London) 316:293-308
- Mulieri, L.A., Alpert, N. 1984. Differential effects of 2,3-butanedione monoxime (BDM) on activation and contraction. *Biophys. J.* 45:47a
- Niederle, B., Mayr, R. 1978. Course of denervation atrophy in type I and type II fibres of rat extensor digitorum longus muscle. Anat. Embryol. 153:9–21
- Paulus, S.F., Grossie, J. 1983. Skeletal muscle in alloxan-diabetes: A comparison of isometric contractions in fast and slow twitch muscle. *Diabetes* 32:1035–1039
- Putnam, R.W., Roos, A., Wilding, T.J. 1986. Properties of the intracellular pH regulating system of frog skeletal muscle. J. Physiol. (London) 381:205-219
- Roos, A., Boron, W.F. 1978. Intracellular pH transients in rat diaphragm muscle measured with DMO. Am. J. Physiol. 235:C49-C54
- Russell, J. 1978. Effects of ammonium and bicarbonate-CO<sub>2</sub> on intracellular chloride levels in *Aplysia* neurones. *Biophys. J.* 22:131–137
- Thomas, R.C. 1977. The role of bicarbonate, chloride and sodium ions in the regulation of intracellular pH in snail neurones. J. Physiol. (London) 273:317-338
- Vanheel, B., Hemptinne, A. de, Leusen, I. 1986. Influence of surface pH on intracellular pH regulation in cardiac and skeletal muscle. Am. J. Physiol. 250:C748-C760

Received 10 March 1988; revised 27 June 1988