ministered in vivo, somatotropin induces amounts of O_2^- similar to those produced by IFN- γ at a concentration that is optimal for macrophage activation (18). Thus, somatotropin shares at least one biologic activity with IFN- γ , priming macrophages to produce augmented amounts of O_2^- . It will be important to learn whether other macrophage-activating properties of IFN- γ are also shared by somatotropin.

These data expand earlier results that have shown that somatotropin is involved in the regulation of immune events in vivo (10-14). Macrophages are central to the induction and expression of many immune responses, so perhaps a fundamental mechanism of action of somatotropin is at the level of macrophages. Since we used animals that had their pituitary source of somatotropin removed, these results may be particularly important for growth hormone-deficient children who receive exogenous recombinant somatotropin to stimulate growth. Although excessive amounts of reactive oxygen metabolites can damage host tissues and can kill intracellular bacteria (20), we believe that this discovery of macrophages as one target for the action of somatotropin is important for understanding reciprocal relationships between the immune and endocrine systems (21).

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Subset-Specific Expression of Potassium Channels in Developing Murine T Lymphocytes

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Ion channels were studied in four major subsets of developing murine thymocytes by using patch-clamp recording and cell-surface staining techniques. The expression of three types of voltage-gated potassium channels in thymocytes varies consistently with the cell's developmental state and functional class as defined by cell-surface markers. One class of potassium channel (type n) predominates in immature thymocyte subsets as well as in mature-phenotype CD4⁺CD8⁻ thymocytes (precursors to helper T lymphocytes), and the average surface density of this channel type correlates with the extent of cell proliferation. Two additional types of potassium channels (types n' and l) are found in the mature CD4⁻CD8⁺ thymocyte subset that contains precursors to cytotoxic and suppressor T cells. The subset-specific expression of type n' and l potassium channels suggests their use as additional cell-surface markers with which to identify precursors to the cytotoxic suppressor T cell lineage.

HE MOST PREVALENT VOLTAGE-GAT-

ed channels in mature T lymphocytes are potassium channels, similar in several respects to delayed rectifier channels of nerve and muscle (1-5). At least two distinct types of voltage-gated K⁺ channels have been observed in T lymphocytes from mice (5, 6), but their developmental origins and distribution among the several functional classes of T cells have not been determined. To investigate this question, we have applied patch-clamp recording techniques (7) to subsets of developing T cells in the murine thymus. Thymocyte subsets were identified by staining with fluorescently labeled monoclonal antibodies to CD4 (L3T4) and CD8 (Lyt-2) membrane glycoproteins or with fluorescently labeled peanut agglutinin (PNA). Functionally immature thymocytes are generally CD4⁻CD8⁻ (double-negative) or CD4⁺CD8⁺ (double-positive; also PNA⁺), whereas the phenotypes of the remaining thymocytes are the same as those of mature T cells; that is, CD4⁺CD8⁻ or CD4⁻CD8⁺ (8-10). After phenotypic identification by epifluorescence microscopy (11) (see cover), each cell was voltageclamped in the whole-cell or excised-patch recording mode (7) to characterize the channels present in its membrane.

In whole-cell recordings from over 200 thymocytes, we observed three types of voltage-dependent K^+ channels, termed n, n', and l. A set of biophysical and pharmacological properties provides a "fingerprint" for identifying each of the three classes of K^+

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channels. Type n and l K⁺ channels in peripheral murine T cells have been described (5, δ); n' channels, not previously characterized, resemble n channels in several respects. Most notably, both n and n', but not l channels, are blocked completely by 5 nM charybdotoxin (CTX), a peptide neurotoxin isolated from *Leiurus quinquestriatus* scorpion venom (12). We named the third channel type n' because the high affinity block by CTX may indicate structural homology between this channel and n channels (13). Additional properties that distinguish the three channel classes include the voltage dependence of activation, the degree to which channels are inactivated during repetitive depolarizations (Fig. 1A), the channel closing rate (Fig. 1B), and the sensitivity to blockade by tetraethylammonium ion (TEA) (Fig. 1C). Consistent with results from mature peripheral T cells (1-3, 5), type n K⁺ channels in thymocytes open at potentials more positive than -40 mV, are cumulatively inactivated during repetitive depolarizations, close relatively slowly at subactivating voltages, and are half-blocked by 10 mM TEA. Type l channels in thymocytes, like their counterparts in mature T cells (5), open only at potentials above -10 mV, display very little cumulative inactivation, close rapidly, and are highly sensitive to TEA blockade [half-blocking dose ($K_{1/2}$), 0.1 mM)]. Although type n' channels resemble n channels in their voltage dependence of activation, closing kinetics, and sensitivity to CTX, they display little or no cumulative inactivation and are less sensitive to TEA block ($K_{1/2}$, 0.1 mM). On the basis of their voltage dependence of activation, cumulative inactivation, and TEA sensitivity, we have identified single K⁺ channels in excised membrane patches that correspond to the



Fig. 1. Characterization of three types of thymocyte K^+ currents. In (A) to (C), columns 1 to 3 represent type *n*, *n'*, and *l* K^+ currents, respectively, and column 4 summarizes the results. Data were obtained from a PNA⁺ cell (column 1) and two CD4⁻CD8⁺ cells (columns 2 and 3). Type *n'* currents were recorded in the presence of 1 mM TEA to block any contribution from type *l* channels. (**A**) Cumulative inactivation of potassium current (I_K) during repetitive depolarizations. Voltage stimuli (200-msec pulses from -80 to +30 mV) were delivered at a rate of one per second from a holding potential of -80 mV. Seven responses are superimposed. Peak K⁺ current during each pulse is plotted in (A4). (**B**) Voltage dependence of K⁺-channel closing rates. Ten- to 20-msec activating pulses from the holding potential (-80 mV) to +30 mV (currents not shown) were followed by pulses of -100 to -40 mV. Exponential curves were fitted to the decay of tail currents at the latter voltages, and the decay time constants are plotted on a log scale against membrane potential in (B4). (**C**) K⁺-channel blockade by

TEA. K⁺ currents were elicited by pulses from -80 to +30 mV in the presence of 0.1 mM to 100 mM TEA. In (C1), TEA slows the apparent inactivation rate of the K⁺ current, not by unmasking a TEA-resistant current component, but through a direct effect on the kinetics of type *n* channels (26). The fraction of peak current remaining is plotted against TEA concentration on a log scale. Binding curves (1:1) have been fitted to the data points by eye, corresponding to dissociation constants of 0.1 mM (type *n*), and 100 mM (type *n'*). All experiments were conducted at 20° to 24°C by standard recording methods (7). Voltage-clamp data were filtered at 2 kHz with an eight-pole Bessel filter and were corrected for linear capacitive and leakage currents. Cells were bathed with Ringer solution: 160 mM NaCl, 4.5 mM KCl, 2 mM MgCl₂, 1 mM CaCl₂, and 5 mM Na-Hepes (*p*H 7.4). Pipette (internal) solution contained 134 mM KF, 11 mM K₂-EGTA, 1.1 mM CaCl₂, 2 mM MgCl₂, and 10 mM K-Hepes (*p*H 7.2), with less than 2 nM free Ca²⁺ (1).

three classes of whole-cell currents. The K⁺ channels differ in their unitary conductance; values are 18 pS for type n, 17 pS for type n', and 27 pS for type l channels (Fig. 2).

Both the number and types of K⁺ channels present were closely linked to the surface phenotype of each thymocyte subset (Fig. 3). Channel density was estimated from measurements of the maximum K⁺ conductance (q_K) and the membrane capacitance of individual cells, quantities proportional to the number of channels and the membrane area, respectively. The types of channels expressed in each cell were identified by the properties described above. Of the four thymocyte subsets we examined, immature thymocytes (that is, double-negative and double-positive cells) displayed a comparatively high surface density of type n K^+ channels (Fig. 3A). In the double-negatives, which include the most primitive cells in the thymus (8-10), *n* channels were expressed at 1.90 ± 0.41 nS/pF (mean \pm SEM, n = 18). Assuming a specific membrane capacitance of $1 \mu F/cm^2$ and a unitary channel conductance of 18 pS, this corresponds to a surface density of $\sim 1 n$ channel per square micrometer of membrane area, or ~ 100 *n* channels per cell. K⁺-channel density was highest in the double-positives. Large cells of this class probably represent cortical blasts, whereas small cells are presumably the blasts' offspring, commonly referred to as small cortical thymocytes (8– 10). Overall, the mean K⁺-channel density of double-positives was 4.77 ± 0.63 nS/pF (n = 35), equivalent to ~ 3 *n* channels per square micrometer of membrane area, or ~ 300 *n* channels per cell. In our sampling of immature thymocytes we found no definitive evidence for either type *n'* or *l* channels, suggesting that if these channel types are expressed, they occur either in a small proportion of immature cells, or at a level too low to be detected by our methods (14).

In thymocytes with mature phenotypes, the types of K^+ channels expressed were highly correlated with cell-surface phenotype, and hence with immunological function. CD4⁺CD8⁻ thymocytes, primarily precursors to helper T cells that recognize class II antigens of the major histocompatibility complex (MHC) (15, 16), displayed type n channels at densities one-tenth to one-fifth those of either of the immature thymocyte populations (Fig. 3B). Excluding the few cells in this class with unusually high numbers of channels ($q_{\rm K} > 3$ nS), the average normalized conductance was $0.40 \pm$ 0.07 nS/pF (n = 20), corresponding to ~ 0.2 *n* channels per square micrometer of membrane area, or ~ 20 *n* channels per cell.



Fig. 2. Unitary conductances of three types of K⁺ channels. (A) to (C) show multiple openings of single K⁺ channels in three excised, outside-out patches, stimulated by voltage ramps from -60 to +80 mV in the absence or presence of bath-applied TEA. Pipette solution as in Fig. 1. Unitary conductance was determined from least-squares fits to the current through open channels. (A) An *n*-type K⁺ channel with a slope conductance of 18 pS (A1); 10 mM TEA reduces the apparent single-channel conductance by 56% (A2). (B) An *n'*-type K⁺ channel with conductance of 17 pS. A subconductance state of 10 pS is also evident (B1) (CD4⁻CD8⁺ cell); 100 mM TEA blocks the channel by 58% (B2). (C) An *l*-type K⁺ channel with a conductance of 27 pS (C1) (CD4⁻CD8⁺ cell). The *l* channel is blocked 50% by 0.1 mM TEA (C2). The increased noise in the presence of TEA represents rapid blocking and unblocking events. Data were low-pass filtered at 800 Hz (A and C) or 400 Hz (B).

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In CD4⁻CD8⁺ thymocytes, principally precursors of cytotoxic or suppressor T cells recognizing MHC class I antigens (16, 17), the average normalized conductance was 1.70 ± 0.22 nS/pF (*n* = 59). Unlike the immature and CD4⁺CD8⁻ thymocyte populations, channel expression in the CD4⁻CD8⁺ cells was heterogeneous. In only 5 of 59 cells did type n channels predominate. The majority of CD4⁻CD8⁺ cells exhibited n' and l channels in various proportions, with *l* channels predominating in some and n' channels predominating in others (Fig. 3C). These results are summarized in the tentative lineage diagram in Fig. 3D.

Our finding that immature thymocytes abundantly express type $n \ K^+$ channels agrees well with previous results from patchclamp studies of thymocytes from humans (18) and mice (19). These reports demonstrate that n channels appear in the T lymphocyte lineage before the onset of immunological competence (Fig. 3D). Type n'and l channels were not reported in an earlier study of CD4⁻CD8⁺ thymocytes (19), probably because the particular experimental protocols that distinguish among the several classes of K⁺ channels were not used (see Fig. 1).

The preponderance of type n channels in double-negative, double-positive, and $CD4^+CD8^-$ cells and of type n' and lchannels in CD4⁻CD8⁺ cells raises the possibility that the channels have functions related to immunological activity or T cell development. Thus far, the functions of n'and l channels in T lymphocytes are unknown. However, previous evidence suggests that expression of n-type K⁺ channels in amounts of hundreds per cell is required for T cells to proliferate in response to mitogens (1, 6, 20, 21). These channels may play a similar role in thymocyte proliferation, because large double-positive and double-negative thymocytes, which account for the bulk of actively cycling cells in the thymus (8), have on average significantly greater numbers of n channels than do the largely quiescent CD4+CD8- cells. An abundance of type n channels is not a sufficient mitogenic stimulus, however, as the channels are present at high density in postmitotic, small cortical thymocytes (small double-positive cells in Fig. 3A) and in resting human T cells (1, 2, 21). It has been suggested that small cortical thymocytes inherit their K⁺ channels from the cortical blasts (19), by analogy to their "passive" acquisition of blast-cell TL antigen (22).

The expression of type n' and $l K^+$ channels by CD4⁻CD8⁺ cells suggests that they may also be useful as cell-surface markers to identify possible precursors to the cytotoxic



Fig. 3. Pattern of K⁺-channel expression is linked to the cell-surface phenotype of thymocyte subsets. In (A) to (C), maximum K⁺ conductance (g_{K}) is plotted against total membrane capacitance, a measure of membrane surface area (1 pF corresponds to ~100 μ m²). For each cell, $g_{\rm K}$ was determined from a Boltzmann curve fitted to the K⁺ conductance-voltage relation or from the current elicited at +30 mV, assuming a reversal potential of -80 mV. Capacitance was calculated from the average current transient evoked by a pulse from -80 to -70 mV, with correction for pipette capacitance. Open symbols represent cells with primarily type n channels, and closed symbols are those with type n' or l channels. (A) Double-negative and double-positive thymocytes. (B) CD4⁺CD8⁻ thymocytes. (C) CD4⁻CD8⁺ thymocytes. Cells in this class with large K⁺ conductance ($g_{\rm K} > 2$ nS) had either predominantly type *n* or *l* channels; the remainder generally expressed a combination of n' and *l* channels. (**D**) A simplified summary diagram relating K⁺-channel expression to cell-surface phenotype and lineage in the thymus. The tentative lineage scheme is modified from (8). The dashed line reflects the uncertainty over the origins of mature T cells. Only the majority phenotype of CD4-CD8+ cells is indicated; a minority of $CD4^{-}CD8^{+}$ cells displayed large numbers of type *n* or *l* channels.

suppressor T cell lineage. Although much evidence suggests that mature T cells are ultimately derived from a double-negative thymic stem cell (8–10, 23), thymocytes may pass through an obligatory double-positive stage during maturation (8, 9, 24) (Fig. 3D). If precursor cells acquire n' or l channels prior to the mature CD4⁻CD8⁺ phenotype, then these channels should be detectable in a small fraction of double-negative or double-positive cells. In this regard it is interesting that type $l K^+$ channels are functionally defective abundant in CD4⁻CD8⁻ peripheral T cells from mice homozygous for the lpr gene mutation (5, 6). These cells are hypothesized to represent the aberrant expansion of a set of immature T cell precursors (25) and thus support the notion that a small population of normal immature thymocytes may express type l channels.

This report demonstrates that K⁺-channel diversity is linked to the developmental fate of thymocyte subclasses. Cells destined to become MHC class II-restricted helper T cells (CD4⁺CD8⁻) have type n channels, whereas most of the cells that will become MHC class I-restricted cytotoxic or suppressor T cells (CD4⁻CD8⁺) express type n' and $l K^+$ channels. The stereotyped pattern of K⁺-channel expression among subsets of normal thymocytes may offer important clues for future studies of the roles of K⁺ channels in T cell development and function.

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- 14. Type *l* channels are easily distinguishable from both *n* and *n'* channels; the selective blocking action of CTX allows the detection of single l channels in whole-cell recording even from cells expressing a great excess of n' channels. Similarities between nand n' channels would make positive identification of a small number of n' channels amid hundreds of nchannels more difficult. In immature cells, a series of several repetitive depolarizations cause an almost complete cumulative inactivation of K^+ channels, indicative of type n channels (see Fig. 1A). In most cases the residual current elicited by the last pulse decays with a time course identical to that of the K current elicited by the first pulse, indicating the lack of any measurable contributions from non-inactivat ing type n' channels. 15. D. P. Dialynas et al., J. Immunol. 131, 2445 (1983).
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Expression of a Distinctive BCR-ABL Oncogene in Ph¹-Positive Acute Lymphocytic Leukemia (ALL)

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The Philadelphia chromosome (Ph¹) is a translocation between chromosomes 9 and 22 that is found in chronic myelogenous leukemia (CML) and a subset of acute lymphocytic leukemia patients (ALL). In CML, this results in the expression of a chimeric 8.5-kilobase BCR-ABL transcript that encodes the P210^{BCR-ABL} tyrosine kinase. The Ph¹ chromosome in ALL expresses a distinct ABL-derived 7-kilobase messenger RNA that encodes the P185^{ALL-ABL} protein. Since the expression of different oncogene products may play a role in the distinctive presentation of Ph¹positive ALL versus CML, it is necessary to understand the molecular basis for the expression of P185^{ALL-ABL}. Both P210^{BCR-ABL} and P185^{ALL-ABL} are recognized by an antiserum directed to BCR determinants in the amino-terminal region of both proteins. Antisera to BCR determinants proximal to the BCR-ABL junction in CML immunoprecipitated P210^{BCR-ABL} but not P185^{ALL-ABL}. Nucleotide sequence analysis of complementary DNA clones made from RNA from the Ph¹-positive ALL SUP-B15 cell line, and S1 nuclease protection analysis confirmed the presence of BCR-ABL chimeric transcripts in Ph1-positive ALL cells. In Ph1-positive ALL, ABL sequences were joined to BCR sequences approximately 1.5 kilobases 5' of the CML junction. P185^{ALL-ABL} represents the product of a BCR-ABL fusion gene in Ph¹-positive ALL that is distinct from the BCR-ABL fusion gene of CML.

HE LEUKEMIC CELLS OF MORE than 95% of CML patients (1) and _ of 5 to 20% of ALL patients (2, 3) carry the t(9;22)(q34;q11) translocation known as the Philadelphia chromosome (Ph^1) (4). In CML, the C-ABL gene on chromosome 9 is translocated into the middle of the BCR gene on chromosome 22 (5). Although the breakpoint on chromosome

22 is variable, it occurs within a defined 5.8kb region of the BCR gene known as the breakpoint cluster region, or bcr (6). RNA splicing generates an 8.5-kb BCR-ABL chimeric transcript that is larger than the normal 6- and 7-kb C-ABL transcripts (7, 8). This results in the expression of the P210^{BCR-ABL} protein (9) in which NH₂terminal C-ABL sequences are replaced by sequences from the BCR gene (10).

Despite the fact that the Ph¹ chromosomes of CML and ALL are indistinguishable by cytogenetic analysis, cells from most Ph¹-positive ALL patients express ABL-derived protein and RNA species that are distinct from the BCR-ABL products of CML (11, 12). Ph¹-positive ALL cells display a high level of ABL-related tyrosine kinase activity in proteins of 180 and 185 kD, referred to collectively as P185^{ALL-ABL} (11). Comparison of tryptic phosphopep-tide maps between $P210^{BCR-ABL}$ and $P185^{ALL-ABL}$ revealed similar, but not identical, phosphorylation patterns suggesting some structural similarities (11, 13). The appearance of P185^{ALL-ABL} correlates with the expression of a 6.5- to 7.0-kb ABL messenger RNA (mRNA) (11-13) in contrast to the 8.5-kb BCR-ABL transcript in CML cells. Genomic DNA analysis (11-15) and in situ hybridization studies (15) of the Ph¹ chromosome from ALL cells suggested that the breakpoint on chromosome 22 may not be in the bcr region as in the Ph¹ chromosome of CML. It is possible that a breakpoint elsewhere in the BCR gene, or within another gene on chromosome 22, could generate the altered ABL products in Ph¹-positive ALL. Alternatively, unusual RNA splicing within the ABL fusion partner may also account for the expression of P185ALL-ABL

To determine whether P185^{ALL-ABL} contains BCR sequences, we compared the im-munoreactivity of P185^{ALL-ABL} and P210^{BCR-ABL} with a panel of site-directed BCR antisera. Normal rabbit sera (NRS) did not recognize either protein (Fig. 1), while antisera directed against NH2-terminal BCR sequences (antisera A) immunopre-



Fig. 1. P185^{ALL-ABL} displays BCR homology limited to the NH2-terminal region of BCR. K562 cells (23) (lanes 1) or the Ph^T-positive ALL cell line, ALL-1 (lanes 2) (15, 24) were immunoprecipitated with either normal rabbit serum (NRS) or with a panel of rabbit antisera raised against specific BCR determinants as illustrated in Fig. 2. Antiserum A was raised by immunizing rabbits with a *trpE-BCR* fusion protein expressed in the pATH-11 expression vector as described (26). Antigenic BCR sequences were encoded by a 1.4-kb Bam HI fragment (8). Antiserum B corresponds to the BCR 558 antiserum as reported (10). Rabbit antiserum C (27) was raised against a peptide sequence, IKSDIQREKRAN-KGSY, beginning 134 amino acids and 403 base pairs upstream of the BCR-ABL junction of K562 cells. The COOH-terminal tyrosine is not found in this position in the BCR sequence. Cell lysates were immunoprecipitated with the indicated antisera and prepared for the autokinase labeling reaction as described (11). The proteins were then reprecipitated with the same antisera used for the first cycle immunoprecipitation, separated by 8% SDS-polyacrylamide gel electrophoresis, and detected by autoradiography.

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