

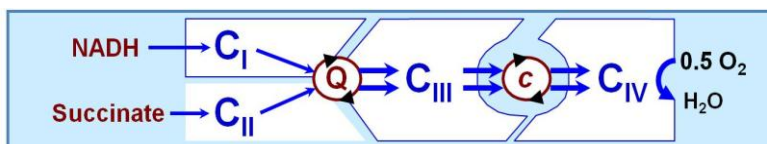


## MitoPathways at the Q-junction: mouse skeletal muscle fibres.

O2k-Workshop Report, IOC39,  
Schroegen, Austria.

Gnaiger E

<sup>1</sup>OROBOROS INSTRUMENTS Corp,  
high-resolution respirometry  
Schöpfstr 18, A-6020 Innsbruck, Austria  
erich.gnaiger@orooboros.at; [www.orooboros.at](http://www.orooboros.at)  
<sup>2</sup>Medical University of Innsbruck  
D. Swarovski Research Laboratory  
6020 Innsbruck, Austria



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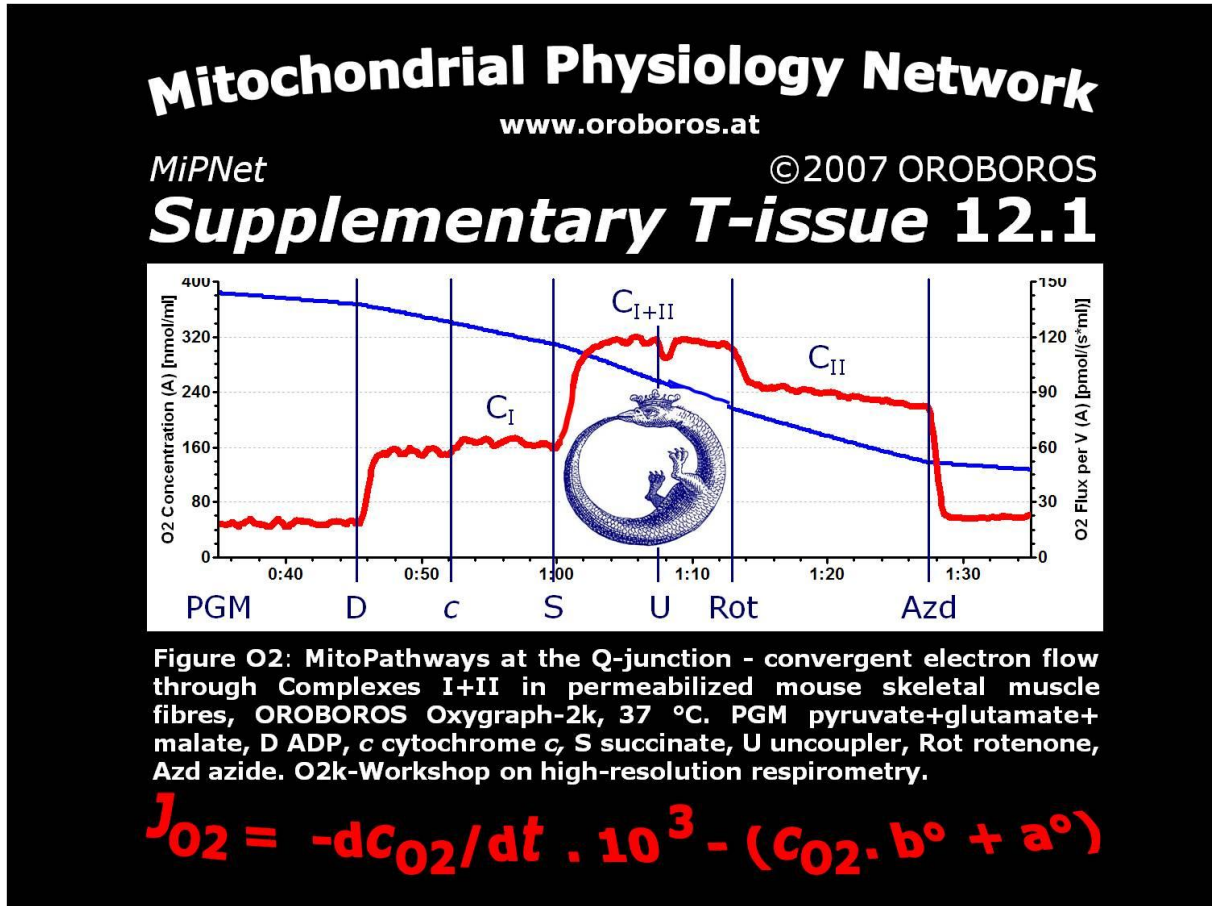


[High-resolution respirometry](#) with a [SUIE protocol](#)<sup>1</sup> for [OXPHOS](#) analysis<sup>2</sup> is presented as supplementary **T-issue** ([OROBOROS](#) T-shirt).

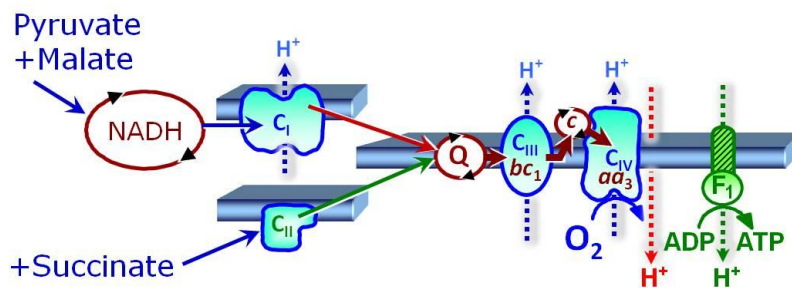
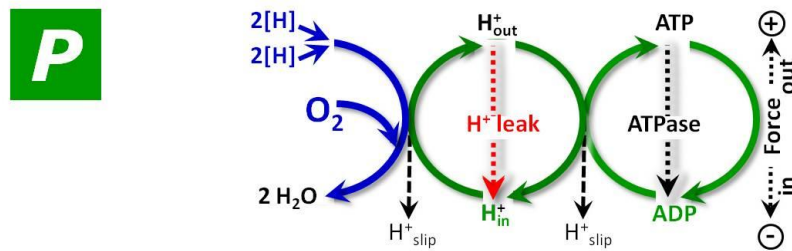
### 1. The SUIE protocol

[Pyruvate](#)+[glutamate](#)+[malate](#) (PGM) were used in combination to induce  $C_I$ -linked [LEAK respiration](#) in permeabilized mouse skeletal muscle (IOC39; Fig. O2).<sup>3,4</sup> Saturating [ADP](#) (D; 2.5 mM final concentration) stimulated respiration to the level of [OXPHOS capacity](#) ( $P$  state), with a small effect of 10  $\mu$ M [cytochrome c](#) (c), expressed as the [cytochrome c control factor](#) ( $FCF_c < 0.01$ ; indicating integrity of the outer mt-membrane). Without correction for residual oxygen consumption (ROX), the biochemical coupling efficiency,  $(P-L)/P$ , was 0.68 (RCR=3.1). Addition of [succinate](#) (S) stimulated respiration by convergent e-input through the [Q-junction](#). The corresponding succinate control factor was  $(C_{I+II} - C_I)/C_{I+II} = 0.47$ , i.e. succinate increased respiration by 47%.  $C_{I+II}$  OXPHOS capacity was not stimulated further by [uncoupler](#) titration (U). Therefore, the capacity of the [phosphorylation system](#) matched the [ETS capacity](#) ( $E$  state). At  $E=P$  the [E-P coupling control factor](#) is zero, indicating that there is no ETS excess capacity over  $P$ , in striking contrast to human skeletal and cardiac muscle mitochondria.<sup>1,5,6</sup> Inhibition of  $C_I$  by [rotenone](#) (Rot) inhibited respiration to the level of  $C_{II}$ -linked ETS capacity. The corresponding  $C_I$ -control factor is  $(C_{I+II} - C_{II})/C_{I+II} = 0.25$ .  $C_{II}$ - was higher than  $C_I$ -linked respiratory capacity ( $E=P$ ).  $C_{I+II}$ -linked respiratory capacity was higher than respiration with any single e-input substrate state,

indicating an additive effect at the Q-junction. However, since  $C_{I+II} < C_I + C_{II}$ , the additive effect was incomplete, which indicates that any electron channelling through supercomplexes to  $C_{IV}$  was incomplete. Addition of azide (Azd; 10 mM) inhibited respiration to the level of residual oxygen consumption (ROX). ROX was 0.18 of  $C_{I+II}$ -linked respiratory capacity.



**OXPHOS capacity: saturating [ADP]**



[http://wiki.orooboros.at/index.php/OXPHOS\\_capacity](http://wiki.orooboros.at/index.php/OXPHOS_capacity)

## 2. Limitations of the SUIT protocol

### 2.1. Maximum OXPHOS and ETS capacity

Evaluation of maximum respiratory capacities requires titration of further substrates activating additional [respiratory complexes](#) at the Q-junction ([C<sub>ETF</sub>](#) and [C<sub>GpDH</sub>](#)).

### 2.2. Malate concentration

The [malate](#) concentration was 2 mM, to saturate C<sub>I</sub>-linked respiration. However, at 2 mM malate, the fumarate concentration is increased to a level which inhibits succinate dehydrogenase. Then C<sub>I+II</sub>- and C<sub>II</sub>-linked respiratory capacities are underestimated. A malate concentration of 0.5 mM, which saturates C<sub>I</sub>-linked respiration and inhibits C<sub>II</sub>-linked respiration to a lesser extent, represents an improved standard. »[Optimum malate concentration in SUIT protocols](#)

### 2.3. ROX correction

The fact that ROX was higher in the C<sub>I+II</sub> substrate state compared to C<sub>I</sub>-linked LEAK respiration indicates that ROX is partially controlled by the substrate state. Therefore, a single measurement of ROX cannot be applied for correction of total oxygen consumption in the different substrate states. Total respiration, therefore, represents apparent coupling states  $L'$ ,  $P'$  and  $E'$  (Fig. 1). ROX correction is possible in the present experiment only for C<sub>I+II</sub>- and C<sub>II</sub>-linked respiration. [Azide](#) inhibits not only C<sub>IV</sub> but other heme-based oxidases and peroxidases, and therefore may interfere with ROX beyond blocking respiratory electron transfer. Based on this argument, a combination of C<sub>II</sub>- and C<sub>III</sub>-inhibitors (malonic acid, antimycin A, myxothiazol) may yield more consistent results, although any ROS scavenged by cytochrome c may in the absence of a C<sub>IV</sub>-inhibitor result in respiratory oxygen consumption through C<sub>IV</sub>.

## 3. References

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