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Research Article

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Potassium Depletion Increases Luminal Na⁺/H⁺ Exchange and Basolateral Na⁺:CO₃⁻:HCO₃⁻ Cotransport in Rat Renal Cortex

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Abstract

Most HCO₃ reabsorption in proximal tubules occurs via electroneutral Na⁺/H⁺ exchange in brush border membranes (BBMS) and electrogenic Na⁺:CO₃⁻:HCO₃⁻ cotransport in basolateral membranes (BLMS). Since potassium depletion (KD) increases HCO_3^- reabsorption in proximal tubules, we evaluated these transport systems using BBM and BLM vesicles, respectively, from control (C) and KD rats. Feeding rats a potassium deficient diet for 3-4 wk resulted in lower plasma [K⁺] (2.94 mEq/liter, KD vs. 4.47 C), and higher arterial pH (7.51 KD vs. 7.39 C). KD rats gained less weight than C but had higher renal cortical weight. Influx of 1 mM ²²Na⁺ at 5 s (pH_o 7.5, pH_i 6.0, 10% CO₂, 90% N₂) into BLM vesicles was 44% higher in the KD group compared to C with no difference in equilibrium uptake. The increment in Na⁺ influx in the KD group was DIDS sensitive, suggesting that Na⁺:CO₃⁻:HCO₃⁻ cotransport accounted for the observed differences. Kinetic analysis of Na⁺ influx showed a K_m of 8.2 mM in KD vs. 7.6 mM in C and V_{max} of 278 nmol/min/mg protein in KD vs. 177 nmol/min/mg protein in C. Influx of 1 mM ²²Na⁺ at 5 s (pH_o 7.5, pH_i 6.0) into BBM vesicles was 34% higher in the KD group compared to C with no difference in equilibrium uptake. The increment in Na⁺ influx in the KD group was amiloride sensitive, suggesting that Na⁺/H⁺ exchange was responsible for the observed differences. Kinetic analysis of Na⁺ influx showed a K_m of 6.2 mM in KD vs. 7.1 mM in C and V_{max} of 209 nmol/min/mg protein in KD vs. 144 nmol/min/mg protein in C. Uptakes of Na⁺-dependent [³H]glucose into BBM and ¹⁴Clsuccinate into BLM vesicles were not different in KD and C groups, suggesting that the Na⁺/H⁺ exchanger and Na⁺:CO₃⁻:HCO₃⁻ cotransporter activities were specifically altered in KD. We conclude that adaptive increases in basolateral Na⁺:CO₃⁻:HCO₃⁻ cotransport and luminal Na⁺/H⁺ exchange are likely responsible for increased HCO₃ reabsorption in proximal tubules of KD animals. (J. Clin. Invest. 1990. 86:1076-1083.) Key words: hypokalemia • metabolic alkalosis • renal growth • acid-base balance

Introduction

Potassium depletion has been associated with an increased ability of the renal tubules to reabsorb HCO_3^- (1-4). This adaptive change in HCO_3^- reabsorption has been invoked as a possible mechanism involved in the pathogenesis of systemic metabolic alkalosis in disorders associated with potassium depletion (5). Selective potassium deficiency has been shown to cause metabolic alkalosis in humans (6, 7) and in most studies in rats (1-4, 8, 9). In experiments in dogs (10-12) and rabbits (13), however, potassium deficiency resulted in metabolic acidosis. The majority of studies evaluating the effect of potassium depletion on renal acidification processes have been conducted in rats. In the rat, segmental analysis of the nephron indicates that potassium depletion is associated with increased HCO_3^- reabsorption by the proximal tubules (1-4).

Most HCO₃ reabsorption in the kidney results from the collective effects of the Na⁺/H⁺ exchange system in the brush border membrane (14) and the Na⁺:CO₃⁻:HCO₃ cotransport system in the basolateral membrane (15–23) of the proximal tubule acting in series. In the present studies we have used brush border membrane (BBM)¹ and basolateral membrane (BLM) vesicles isolated from the renal cortex of potassium-depleted and control rats to study the characteristics of luminal Na⁺/H⁺ exchange and basolateral Na⁺:CO₃⁻:HCO₃⁻ cotransport. The results suggest that potassium depletion induces a parallel adaptation in these transport processes. The increase in the activity of luminal Na⁺/H⁺ exchange and basolateral Na⁺:CO₃⁻:HCO₃⁻ cotransport is, evidently, due to an increase in the V_{max} of the transporters.

Methods

Animal model. Potassium depletion was induced by placing male Sprague Dawley rats (175-200 g) on a potassium deficient diet similar to that employed by others (24) for 3-4 wk. The potassium deficient diet was prepared by replacing K^+ salts with Na⁺. The composition of control and potassium deficient diets is given in Table I. Rats were housed two per cage. The total amount of food provided to animals in each control and experimental cage was 15 g/d. Both control and experimental animals readily consumed their respective diets. Animals had free access to water until they were killed.

Membrane vesicle preparation. Animals were killed by intraperitoneal injection of 12.5 mg of sodium pentobarbital. Arterial blood for blood gas determinations and other chemical analysis was obtained from the abdominal aorta at the time of sacrifice. BBM vesicles were isolated from the renal cortices by a Ca^{++} aggregation method (25) as employed previously (26). BLM vesicles were isolated from the renal

Portions of these studies were presented at the Annual meeting of the American Society for Clinical Investigation, Washington, DC, May, 1989, and published in abstract form (*Clin. Res.* 37:585*a*, 1989).

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^{1.} Abbreviations used in this paper: BBM, brush border membrane; BLM, basolateral membrane; C, control; DIDS, disodium 4,4' diiso-thiocyanostilbene-2,2'-disulfonate; KD, potassium depletion.

Table I. Constituents of Control and Potassium Deficient Diets

	Control	K-Deficien
Casein	360 g	360 g
Corn starch	200 g	200 g
Sucrose	320 g	320 g
Corn oil	35 ml	35 ml
Peanut oil	35 ml	35 ml
Vitamins*	10 g	10 g
CaHPO₄	10 g	10 g
MgSO₄	6 g	6 g
NaCl	6 g	6 g
K ₂ HPO ₄	8.3 g	0
Na ₂ HPO ₄	0	6.8 g
KCL	9.5 g	0

* Vitamin diet fortification mixture, ICN Pharmaceuticals, Inc., Cleveland, OH.

cortices by a minor modification of differential and Percoll gradient centrifugation described previously (21) using Sorvall models RC5C superspeed and OTD 55B ultracentrifuges (DuPont Co., Wilmington, DE). Both BBM and BLM vesicles were frozen and stored at -70°C and used within 2 wk of preparation. The purity of the vesicle preparations was estimated by measuring the specific activities of alkaline phosphatase and Na⁺, K⁺-ATPase in the initial homogenate and final membrane suspension. The specific activity of alkaline phosphatase in BBM vesicles and initial homogenates was 171.3±14.2 and 19.3±2.4 μ mols P-nitrophenol/mg protein/min in the control (n = 3) and 198.1 \pm 18.9 and 21.6 \pm 2.0 μ mols P-nitrophenol/mg protein/min in the K-depleted group (n = 3) (P > 0.05). The specific activity of Na⁺, K⁺-ATPase in BLM vesicles and initial homogenates was 4.30±0.33 and 0.38±0.03 nmol Pi/min/mg protein, respectively, in the control, and 3.99±0.36 and 0.39±0.05 nmol Pi/min/mg protein, respectively, in the K-depleted group (P > 0.05). Additionally, HCO₃-dependent ²²Na⁺ uptake in BBM and amiloride sensitive ²²Na⁺ uptake in BLM vesicles were measured to further evaluate the contamination of BBM with BLM and vice versa. In BBM vesicles, HCO₃-dependent ²²Na⁺ uptake was 5.7%±5.8 of total uptake in control membranes and $5.3\% \pm 7.6$ in potassium depletion (KD) membranes (P > 0.05). Conversely, amiloride sensitive ²²Na⁺ uptake in BLM vesicles from control animals was 3.7%±6.7 of total uptake compared to 6.1%±5.3 in the KD group (P > 0.05). Thus, these results indicate relatively little cross contamination of BBM with BLM and vice versa. The BBM vesicle size, calculated from external Na⁺ and equilibrium values for ²²Na⁺ uptake, was not significantly different in K-depleted and control groups (1.40±0.21 μ l/mg protein in C vs. 1.81±0.25 KD, P > 0.05). The BLM vesicle size was 1.77±0.29 µl/mg protein in control compared to 1.97 ± 0.35 in K-depleted animals (P > 0.05).

Transport measurements. Intravesicular content of 22 Na⁺, [³H]glucose, and [I⁴C]succinate were assayed in triplicate at room temperature by a rapid filtration method, as previously described (27). The ice-cold medium used to dilute and wash the vesicles consisted of 170 mM K gluconate, 10 mM Hepes/TMA hydroxide, pH 7.5. Each filter (0.45 μ m, DAWP; Millipore Continental Water Systems, Bedford, MA) was placed in 5 ml of scintillation fluid (Ready-Solv HP; Beckman Instruments Inc., Fullerton, CA) and radioactivity was determined by scintillation spectroscopy. The membrane suspension and all experimental media were continuously gassed with 100% N₂ or 10% CO₂/90% N₂. Every solution was titrated to the indicated pH with TMA hydroxide. The final composition of the experimental media and other details of the protocols are given in the figure legends. All experiments were performed using vesicles treated with valinomycin (0.5 mg/ml) and preequilibrated in media of appropriate composition to ensure that $[K^+]_o = [K^+]_i$ during uptake measurements. The adequacy of voltage clamping by this method has been verified previously (23, 28). For kinetic studies, uptake was measured at 4 s, since we and others have shown that under conditions similar to those used in the present studies ²²Na⁺ uptake via Na⁺/H⁺ exchange in BBM vesicles (29) and via Na⁺:CO₃⁻:HCO₃⁻ cotransport in BLM vesicles is linear up to this time (30). Preliminary results indicated that uptakes in BBM and BLM vesicles from potassium depleted and control animals were also linear at these times (data not shown).

The permeability of vesicles to hydrogen ions was evaluated as described previously (31, 32). Briefly, an outward H⁺ gradient was imposed across both the BBM and BLM vesicles (pHi 6.0, pHo 7.5) of control and K-depleted animals. 10 μ l of BBM or BLM vesicles were then added to 2 ml of a sodium-free medium (pH 7.5) that contained 6 μ M acridine orange. The fluorescence of acridine orange was determined at room temperature using a spectrofluorimeter (LS-3B; Perkin-Elmer Corp., Norwalk, CT) with excitation and emission wavelengths of 492 and 530. The rate of change of acridine orange fluorescence after the initial quenching was measured and used to determine the proton permeability of the vesicles. The relative rate of change of acridine orange fluorescence in BBM vesicles from KD animals to that of control group was 1.23 ± 0.27 -fold for three experiments (P > 0.05). Similarly, BLM vesicles of K-depleted animals did not show any significant difference in proton permeability compared to control (relative rate of change of acridine orange fluorescence in KD group to that of control animals was 1.15 ± 0.14 -fold for three experiments, P > 0.05).

The data are presented as the mean±SEM. Statistical analysis was determined using t test for paired or unpaired observations. A value of P < 0.05 was considered statistically significant.

Materials. ²²NaCl (sp act, 906 mCi/mg), [¹⁴C]succinate (sp act, 56 mCi/mmol) and [³H]glucose (sp act, 14.4 mCi/mmol) were obtained from New England Nuclear (Boston, MA). Percoll, valinomycin, acridine orange, amiloride/HCL, and disodium 4,4' diisothiocyanostilbene-2,2'-disulfonate (DIDS) were obtained from Sigma Chemical Co. (St. Louis, MO). Valinomycin was dissolved in 95% ethanol and added to the membrane vesicles in a 1:100 dilution. Other chemicals were obtained from Sigma Chemical Co.

Results

Body and kidney weights in control and potassium depleted animals are given in Table II. At the time that they were killed, potassium-depleted animals weighed significantly less than controls (P < 0.01). Compared to their initial weights, potassium-depleted rats gained only 13%, whereas control animals gained 47% (P < 0.04). However, when compared to controls, kidney weights in the potassium-depleted animals were 56% higher ($3.21\pm.088$ vs. 2.05 ± 0.048 /two kidneys, P < 0.001). The kidney per body weight ratio in the potassium-depleted animals was twice that of control animals (0.014 ± 0.0004 vs. 0.007 ± 0.0001 , P < 0.001).

Plasma [K⁺] and arterial blood gas values in control animals and ones fed the potassium deficient diet are given in Table III. Plasma [K⁺] was significantly lower in the potassium deficient rats (2.94 ± 0.073 mEq/liter vs. 4.47 ± 0.095 mEq/liter in controls, P < 0.001). Arterial pH was significantly higher in potassium depleted rats (7.51 ± 0.008 vs. 7.39 ± 0.007 in controls, P < 0.001). Potassium-depleted animals had an arterial pCO₂ of 43.1 mm Hg (control, 39.2 mm Hg) and a calculated plasma HCO₃⁻ concentration of 31.2 mM (control, 23.7 mM). These results confirm that rats fed a potassium deficient diet develop both hypokalemia and metabolic alkalosis. This is in accordance with previous studies evaluating the effect of dietary-induced potassium depletion on systemic acid base balance (1–4, 8, 9).

	Body weight				
	Initial	Final	Weight gain (%)	Kidney weight	Kidney/body weight
	g	g		g	
Control	187.6±2.1	274.8±6.1	46.5±2.3	2.05±0.048	0.007±0.0001
K-depleted	189.9±1.9	215.8±3.9*	13.1±1.1*	3.21±0.088*	0.014±0.0004*
		(P < 0.01 [n = 32])	(P < 0.04 [n = 32])	$(P < 0.001 \ [n = 28])$	$(P < 0.001 \ [n = 28])$

 Table II. Body and Kidney Weights in Control and Potassium-Depleted Animals

To examine for possible effects of potassium depletion on the luminal Na⁺/H⁺ exchanger, the influx of Na⁺ into BBM vesicles was measured in the presence of an inwardly directed pH gradient. The time course of pH-dependent ²²Na⁺ uptake in vesicles isolated from control and potassium depleted rats is shown in Fig. 1. An inward pH gradient resulted in the transient uphill accumulation of Na⁺ (overshoot) in both control and potassium-depleted groups. However, at early time points, the potassium depleted group showed increased Na⁺ influx compared to controls with no significant difference in the equilibrium values. These results suggest that potassium depletion activates the Na⁺/H⁺ exchange system. To determine if the increment in Na⁺ influx was indeed because of increased activity of Na⁺/H⁺ exchange system, the initial rate (5 s) of ²²Na⁺ influx was measured in the presence of an inward pH gradient with or without 1 mM amiloride in the external solution (Fig. 2). ²²Na⁺ influx was 34% higher in vesicles from potassium-depleted animals compared to control (1.56±0.16 vs. 1.15 ± 0.14 nmol/mg protein, P < 0.05). The increment in the ²²Na⁺ influx in the potassium depleted group was completely abolished in the presence of 1 mM amiloride, suggesting that the observed difference between the two groups resulted from increased activity of the Na⁺/H⁺ exchanger in the potassium-depleted group. To examine the mechanism of increased activity of the Na⁺/H⁺ exchanger in BBM vesicles from potassium-depleted rats, we evaluated the kinetics of this exchanger by measuring initial rates (4 s) of ²²Na⁺ influx as a function of the [Na⁺] in vesicles isolated from control and potassium-depleted animals. Hanes-Woolf plots of the results (Fig. 3) demonstrate an increase in the V_{max} for Na⁺ with no significant change in $K_{\rm m}$ in the potassium-depleted group, consistent with either an increase in the number and/or turnover rate of the Na⁺/H⁺ transporter.

We next evaluated the activity of the Na⁺:CO₃⁻:HCO₃⁻ cotransporter in BLM vesicles isolated from control and potassium-depleted rats. In the experiment illustrated in Fig. 4, the time course of Na⁺ influx into these vesicles was assayed in the presence of an inward pH and HCO₃⁻ gradient. An inward HCO₃⁻ gradient was associated with an accumulation of Na⁺ above equilibrium (overshoot) both in control and potassiumdepleted groups. However, at early time points, the potassium-depleted group showed increased Na⁺ influx compared to control with no significant differences in the equilibrium values. Since in these experiments, an inward HCO_3^- gradient was imposed in the presence of inward pH gradient, the possibility of a pH effect as the cause of the increment in ²²Na⁺ influx in potassium-depleted group cannot be excluded. Such an effect could be possible specifically if there was significant contamination of the BLM vesicles with BBM in this group. Although there were no differences in enrichment ratios for BLM in the two groups of vesicles, to further address this possibility, we measured the initial rate of HCO₃-dependent Na⁺ influx in the presence and absence of 1 mM DIDS, an inhibitor of Na⁺:CO₃⁼:HCO₃⁻ cotransport that does not have any effect on the Na⁺/H⁺ exchange system. The results are shown in Fig. 5. ²²Na⁺ influx in vesicles from potassium depleted rats was 44% greater than that in control vesicles $(2.56\pm0.31 \text{ vs. } 1.77\pm0.26 \text{ nmol/mg protein}, P < 0.04)$. Furthermore, the increment in ²²Na⁺ influx in the potassium-depleted group was completely abolished when DIDS was added to the external solution, suggesting that the observed difference between the potassium depleted and control groups was mediated via $Na^+:CO_3^-:HCO_3^-$ cotransport. To examine the mechanism of increased activity of Na⁺:CO₃⁻:HCO₃⁻ cotransport in BLM vesicles from potassium-depleted rats, we evaluated the kinetics of this transport process. The initial rate (4 s) of ²²Na⁺ influx in vesicles isolated from control and potassium-depleted animals was measured as a function of the [Na⁺]. Hanes-Woolf plots of the results are shown in Fig. 6, and demonstrate that the V_{max} for Na⁺ was increased in the potassium-depleted group with no significant change in $K_{\rm m}$. These results are consistent with either an increase in the number or turnover rate of the transporter.

To determine if potassium depletion affects the luminal Na^+/H^+ exchange and basolateral $Na^+:CO_3^-:HCO_3^-$ cotransport processes specifically or causes more generalized effects, we compared the initial rates (5 s) of Na^+ -dependent [³H]glucose (33) and [¹⁴C]succinate (34) uptake in BBM and BLM vesicles, respectively, isolated from both control and potassium depleted rats (Table IV). The relative rate of Na^+ -dependent [³H]glucose uptake was not different in control and potassium-depleted groups. Similarly, the relative rate of Na^+ dependent [³H]glucose uptake was not different in control and potassium-depleted groups.

Table III. Plasma [K⁺] and Arterial Blood Gases in Control and Potassium-depleted Animals

	[K ⁺]	рН	pCO ₂	pO ₂
Control	4.47 ± 0.095	7.39 \pm 0.007	39.2±0.5	97.2±2.7
K-depleted	$2.94 \pm 0.073^* (P < 0.001 [n = 14])$	7.51 \pm 0.008* ($P < 0.001$ [$n = 13$])	43.1±0.7* (<i>P</i> < 0.01 [<i>n</i> = 13])	93.8±1.9

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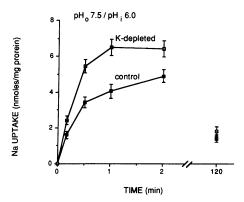


Figure 1. Effect of pH gradient on Na⁺ influx. BBM vesicles from potassium-depleted and control animals were preequilibrated for 120 min at 20°C in a medium consisting of 52 mM TMA gluconate, 108 mM potassium gluconate, 52 mM Mes, 42 TMA hydroxide, pH 6.0. Uptake of 1 mM ²²Na⁺ into the vesicles was assayed in the presence of a medium consisting of 52 mM TMA gluconate, 108 potassium gluconate, 31 mM mannitol, 10 mM Mes, 31 mM TMA hydroxide, pH 7.5. Values shown for uptake represent mean±SE for experiments performed in triplicate on three different membrane preparations.

pendent [¹⁴C]succinate uptake was not different between the two groups.

Discussion

Induction of potassium deficiency in rats (and humans) results in the development of metabolic alkalosis (1–4, 6–9). This is manifested by an elevated plasma HCO_3^- concentration and is associated with the (paradoxical) excretion of an acid urine (1, 35, 36). It has been suggested that potassium deficiency increases renal tubular H⁺ secretion and subsequently, bicarbonate reabsorption (1–7). Both metabolic alkalosis and paradoxical aciduria could result from these processes (1–4, 35, 36). Several studies employing free-flow micropuncture or in

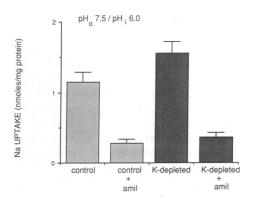


Figure 2. Effect of amiloride on pH dependent Na⁺ influx. The 5-s uptake of 22 Na⁺ into BBM vesicles preequilibrated in pH 6.0 medium was assayed in the presence of pH 7.5 medium as described in Fig. 1. Amiloride (1 mM) was added as the hydrochloride salt to the external solution. Valinomycin was added at the start of preequilibration period. Values shown for uptake represent mean±SE for experiments performed in triplicate on four different membrane preparations.

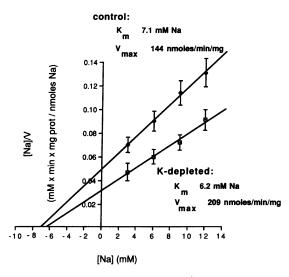


Figure 3. Kinetics of pH dependent Na⁺ influx into BBM vesicles (BBMV). BBMV from potassium-depleted and control animals were preequilibrated for 120 min at 20°C in a medium consisting of 67 mM TMA gluconate, 92 mM potassium gluconate, 52 mM Mes, 42 TMA hydroxide, pH 6.0. The 4-s uptake of ²²Na⁺ into vesicles was assayed in the presence of a medium consisting of 67 mM TMA gluconate, 92 potassium gluconate, 31 mM mannitol, 10 mM Mes, 31 mM TMA hydroxide, pH 7.5. The Na⁺ concentration was varied by replacing TMA gluconate with sodium gluconate in the uptake medium. Valinomycin was added at the start of preequilibration period. Values shown for uptake represent mean±SE for experiments performed in triplicate on three different membrane preparations.

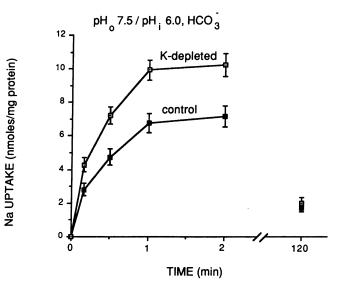


Figure 4. Effect of HCO_3^- gradient on Na⁺ influx into BLM vesicles (BLMV). BLMV from potassium-depleted and control animals were preequilibrated for 120 min at 20°C in a medium consisting of 52 mM TMA gluconate, 108 mM potassium gluconate, 52 mM Mes, 42 TMA hydroxide, pH 6.0, gassed with 10% CO₂. Uptake of 1 mM ²²Na⁺ into vesicles was assayed in the presence of a medium consisting of 52 mM TMA gluconate, 51 potassium gluconate, 57 mM potassium bicarbonate, 31 mM mannitol, 10 mM Mes, 31 mM TMA hydroxide, pH 7.5, gassed with 10% CO₂. Values shown for uptake represent mean±SE for experiments performed in triplicate on three different membrane preparations.

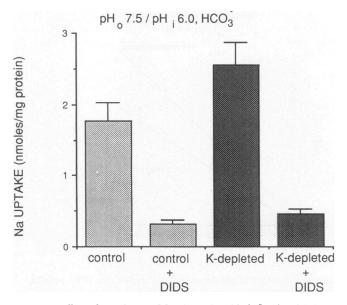


Figure 5. Effect of DIDS on HCO₃-dependent Na influx in BLMV. The 5 s uptake of 2 mM 22 Na⁺ into the BLM vesicles preequilibrated in pH 6.0 medium was assayed in the presence of 57 mM HCO₃, 10% CO₂ at pH 7.5 as described in Fig. 4. DIDS (1 mM) was added as the disodium salt to the external solution. Valinomycin was added at the start of the preequilibration period. Values shown for uptake represent mean±SE for experiments performed in triplicate on four different membrane preparations.

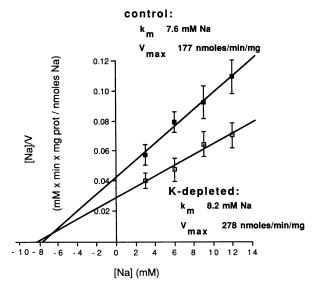


Figure 6. Kinetics of HCO_3^- -dependent Na⁺ influx into BLMV. BLMV from potassium-depleted and control animals were preequilibrated for 120 min at 20°C in a medium consisting of 67 mM TMA gluconate, 92 mM potassium gluconate, 52 mM Mes, 42 TMA hydroxide, pH 6.0 and gassed with 10% CO₂. The 4-s uptake of ²²Na⁺ into vesicles was assayed in the presence of a medium consisting of 67 mM TMA gluconate, 35 potassium gluconate, 57 mM potassium bicarbonate, 31 mM mannitol, 10 mM Mes, 31 mM TMA hydroxide, pH 7.5. The Na⁺ concentration was varied by replacing TMA gluconate with sodium gluconate in the uptake medium. Valinomycin was added at the start of preequilibration period. Values shown for uptake represent mean±SE for experiments performed in triplicate on three different membrane preparations.

Table IV. Na ⁺ -dependent [³ H]Glucose
and [¹⁴ C]Succinate Uptakes into BBMV and BLMV
from Potassium-Depleted and Control Animals

Influx	Percentage of control
Na-dependent [³ H]glucose cotransport (BBMV)	107±8.2
Na-dependent [¹⁴ C]succinate cotransport (BLMV)	113±8.4

BBM and BLM vesicles from potassium-depleted and control animals were preequilibrated for 120 min at 20°C in a medium consisting of 52 mM TMA gluconate, 108 mM potassium gluconate, 52 mM TMA gluconate, 42 mM Hepes, 21 TMA hydroxide, pH 7.5. The 5-s uptake of 50 μ M [³H]glucose into brush border membrane vesicles was assayed in the presence of a medium consisting of 52 mM TMA gluconate, 108 potassium gluconate, 52 mM sodium gluconate, 42 mM Hepes, 21 mM TMA hydroxide, pH 7.5. The 5-s uptake of 5 μ M [¹⁴C]succinate into basolateral membrane vesicles was assayed in the presence of a similar medium. Values shown for uptake represent mean±SE for experiments performed in triplicate on three different membrane preparations.

vivo microperfusion techniques in rat kidneys have demonstrated that the rate of proximal tubular HCO₃⁻ reabsorption is elevated in potassium deficiency (1–4). Using continuous microperfusion techniques in proximal tubules enhanced HCO₃⁻ reabsorption has been observed when tubules and peritubular capillaries of potassium deficient rats were exposed to HCO₃⁻ concentrations typically observed in hypokalemia (3). However, in some other reports an increase in the absolute amount of HCO₃⁻ reabsorbed by the proximal tubules of potassium deficient rats was not shown (9, 37).

The majority of HCO_3^- filtered across the glomerulus is reabsorbed in the proximal tubule by a process of (secondarily) active proton secretion. The principal pathway for movement of protons from cell to tubular fluid is via luminal membrane Na^+/H^+ exchange (14). HCO₃⁻ transport across the BLM of the proximal tubule is mediated predominantly via electrogenic Na^+ :HCO₃ cotransport (15-23) with an apparent stoichiometry of three equivalents of base per Na⁺ ion (18, 23). Recent studies indicate that the three base equivalents are comprised of one CO_3^{-} ion and one HCO_3^{-} ion cotransported with one Na^+ ion (30). It has been suggested that potassium deficiency increases the rate of H⁺ secretion via activation of the Na⁺/H⁺ exchanger in the proximal tubular BBM resulting in increased HCO₃⁻ reabsorption (38, 39). Results of preliminary experiments evaluating Na⁺/H⁺ exchange in rat renal cortical BBM vesicles by Seifter et al. (39) are consistent with this conclusion. In BBM vesicles isolated from control and potassium-depleted rats, they showed that potassium depletion increased the activity of luminal Na⁺/H⁺ exchange. Our results indicate that potassium depletion increases the activity of pH dependent ²²Na⁺ influx in renal cortical BBM vesicles. The increase in ²²Na⁺ influx was amiloride sensitive, suggesting that Na⁺/H⁺ exchange was responsible for the increase. The time course of the pH dependent ²²Na⁺ influx showed persistently higher levels of ²²Na⁺ influx at early time points but no difference in equilibrium values in vesicles from potassium-depleted animals. Moreover, our results suggest that increased activity of the Na^+/H^+ exchanger is due to an increase in the V_{max} with no

significant change in the K_m of the exchange process. These findings are consistent with either an increase in the number or turnover rate of the Na^+/H^+ exchange transport proteins. The cellular mechanism(s) by which potassium depletion increases Na⁺/H⁺ exchange, and, therefore, H⁺ secretion into the proximal tubular fluid remains unknown. It has been suggested that increased H⁺ secretion by proximal tubules in potassium-depleted rats results from intracellular acidosis. A reduced intracellular pH in proximal tubule cells has been reported in this setting (40, 41). The mechanism(s) responsible for generation of this intracellular acidosis is unknown as discussed below. This acidic pH could increase the rate of the Na⁺/H⁺ exchanger via at least two mechanisms. First, intracellular acidosis increases substrate (H⁺) availability for the exchanger at the inner surface of the luminal membrane. Second, an increase in the intracellular proton concentration can stimulate the exchanger by binding to the modifier site located at the inner surface of the Na^+/H^+ exchange transport protein (42).

We also studied the effect of potassium depletion on pathways involved in the exit of HCO₃ across the BLM of proximal tubule cells. The increase in HCO_3^- dependent ²²Na⁺ influx we observed in BLM vesicles prepared from potassium-depleted animals was DIDS sensitive suggesting that increased activity of the Na⁺:CO $_3^-$:HCO $_3^-$ cotransporter was responsible for the results. The time course of HCO₃-dependent ²²Na⁺ influx showed persistently higher levels of ²²Na⁺ influx at early time points, but not at equilibrium, in vesicles from potassium-depleted animals. Kinetic studies evaluating the nature of these adaptive changes showed that there was an increase in V_{max} with no change in K_m . These results are consistent with either an increase in the number or turnover rate of the $Na^+:CO_3^-:HCO_3^-$ cotransporters. Increased activity of this cotransporter, in association with increased activity of luminal Na⁺/H⁺ exchange, could lead to increased reabsorption of HCO_{3}^{-} and, thus, an increase in plasma $[HCO_{3}^{-}]$ in the potassium-depleted state.

The molecular mechanism(s) by which potassium depletion induces adaptive changes in luminal Na⁺/H⁺ exchange and basolateral Na⁺:CO $\frac{1}{3}$:HCO $\frac{1}{3}$ cotransport is not certain. By unknown mechanisms potassium depletion in rats causes generalized renal growth (43). Whether there is an association between the renal growth and the observed acid-base changes or between the renal growth and the adaptive changes in luminal Na⁺/H⁺ exchange and basolateral Na⁺:CO₃⁻:HCO₃⁻ cotransport is not clear. One speculation is that potassium depletion could function as a growth factor. Cell growth in a renal epithelial cell line (BSC-1) was stimulated by a low medium concentration of potassium (44). Growth factors have been shown to increase the activity of pH regulating mechanisms (45, 46). Therefore, it is possible that potassium depletion, by virtue of its growth promoting characteristics, may activate processes involved in regulation of cell pH; e.g., Na⁺/H⁺ exchange and Na⁺:CO₃⁻:HCO₃⁻ cotransport. Interestingly, potassium depletion does not induce metabolic alkalosis (47) or accelerated renal growth in rabbits (McKinney, T. D., and K. K. Davidson, unpublished observations).

Another possibility with regard to the effect of potassium depletion on adaptive changes in luminal Na^+/H^+ exchange and basolateral $Na^+:CO_3^-:HCO_3^-$ cotransport is that potassium depletion might increase the electrochemical driving forces for

one or both of these transport processes. It is noteworthy in this regard that increased activity of one of these transport processes will affect the other transporter if cell pH is to be maintained in a narrow range. A primary increase in activity of the Na⁺/H⁺ exchanger will increase cell pH. Under the effect of cytosolic carbonic anhydrase this increased pH will lead to generation of more HCO₃, thus providing additional substrate for the Na⁺:CO $_{3}^{=}$:HCO $_{3}^{-}$ cotransporter. On the other hand, a primary increase in Na⁺:CO₃⁻:HCO₃⁻ cotransporter activity will decrease intracellular pH due to HCO₃ extrusion across the basolateral membrane. Subsequently, this would provide more substrate for the Na⁺/H⁺ exchanger in the luminal membrane. Since proximal tubule cell pH is lower in potassium depleted rats (40, 41), it would appear that the luminal Na⁺/H⁺ exchanger is not the primary process affected since an alkaline cell pH would be the expected result of a primary increase in activity of this exchanger. The mechanism(s) responsible for the intracellular acidosis in proximal tubule cells of potassium depleted rats is not certain. It has been postulated that this may result from H⁺ redistribution (48). However, another plausible explanation is that the intracellular pH falls because of increased base extrusion across the basolateral membrane due to increased activity of the basolateral Na⁺:CO $\frac{1}{3}$:HCO $\frac{1}{3}$ cotransporter. The cellular mechanism by which potassium depletion might activate this cotransporter remains speculative. Na⁺:CO₃⁻:HCO₃⁻ cotransport is an electrogenic process and is, therefore, affected by changes in membrane potential. Alpern (17) has shown in rat proximal tubule cells that increasing peritubular potassium from 5 to 50 mEq/liter, a maneuver that has been shown to cause depolarization of the basolateral membrane, induces cell alkalinization. In the presence of barium, the same maneuver failed to change the cell pH. In the presence of HCO_3^- and a relative electropositive vesicle interior (produced by the combination of the potassium ionophore valinomycin an inwardly directed potassium gradient) causes transient uptake of Na⁺ above equilibrium values in basolateral membrane vesicles isolated from rabbit renal cortex (21). These results suggest that the exit of $HCO_{\overline{3}}$ across the BLM is sensitive to changes in membrane potential. With a stoichiometry of three equivalents of $HCO_3^$ ions/Na⁺ ion, membrane depolarization should decrease, whereas hyperpolarization should increase the rate of base extrusion via Na⁺:CO₃⁼:HCO₃⁻ cotransport. Using a double barrel microelectrode, Cemerikic et al. (49) have shown that potassium deficiency induces hyperpolarization of the basolateral membrane of proximal tubule cells. Therefore, it is possible that changes in membrane potential induced by potassium depletion could be responsible for the increased activity of the $Na^+:CO_3^-:HCO_3^-$ cotransporter observed in our studies. According to this scheme, potassium depletion induces hyperpolarization of the basolateral membrane that, in turn, increases the electrochemical driving force for base exit across the BLM via electrogenic Na⁺:CO $_3^{-}$:HCO $_3^{-}$ cotransport. This leads to acidification of the cell providing more substrate for the Na^{+}/H^{+} exchanger in the luminal membrane whose activity subsequently increases. The intracellular acidosis in proximal tubule cells observed in potassium depletion would also be compatible with the above scheme. It is noteworthy that the increases in the luminal Na⁺/H⁺ exchanger and basolateral $Na:CO_3^-:HCO_3^-$ cotransporter induced by potassium depletion

may be underestimated because of the generation of a metabolic alkalosis that has been shown to decrease the activities of these two transport systems (50).

In summary, potassium depletion causes a parallel adaptive increase in the luminal Na^+/H^+ exchanger and basolateral $Na:CO_3^-:HCO_3^-$ cotransporter in rat kidney proximal tubule. These adaptive changes are probably responsible in the generation and maintenance of metabolic alkalosis in potassium depletion.

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