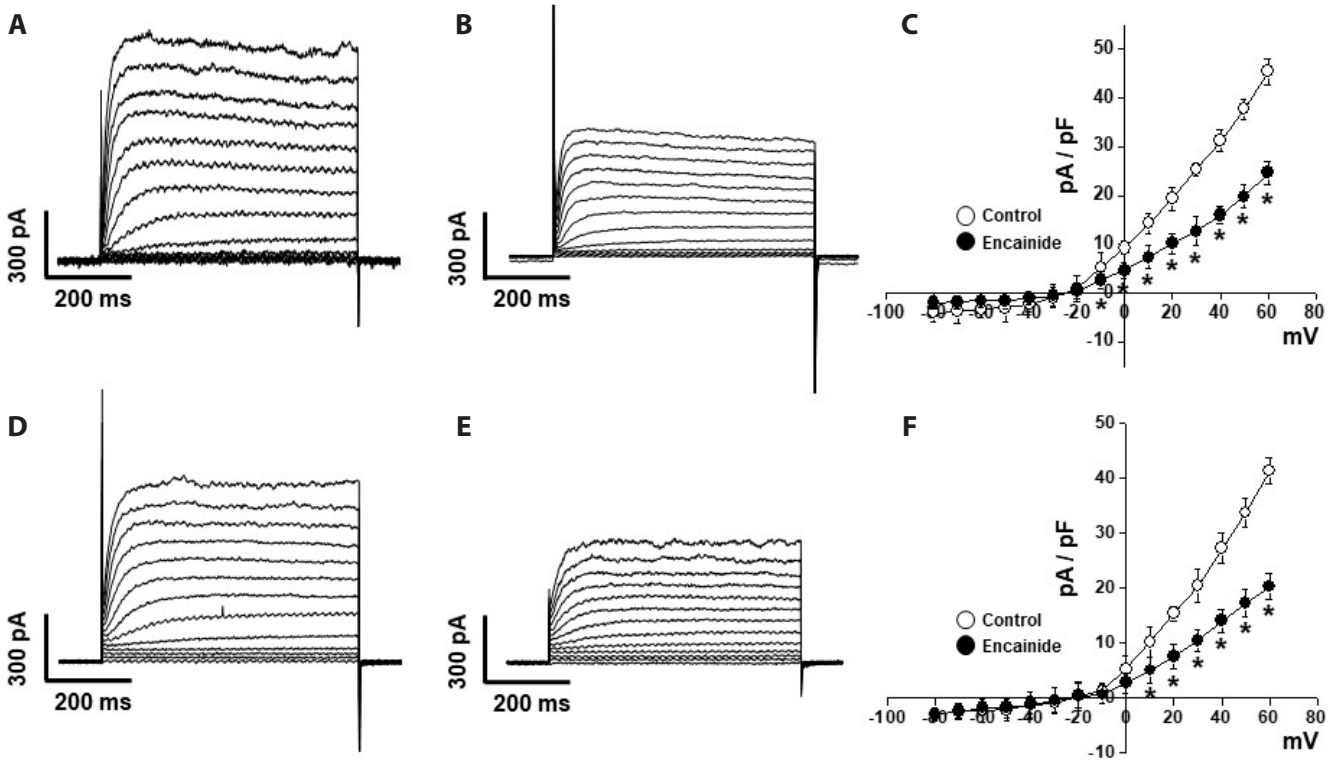
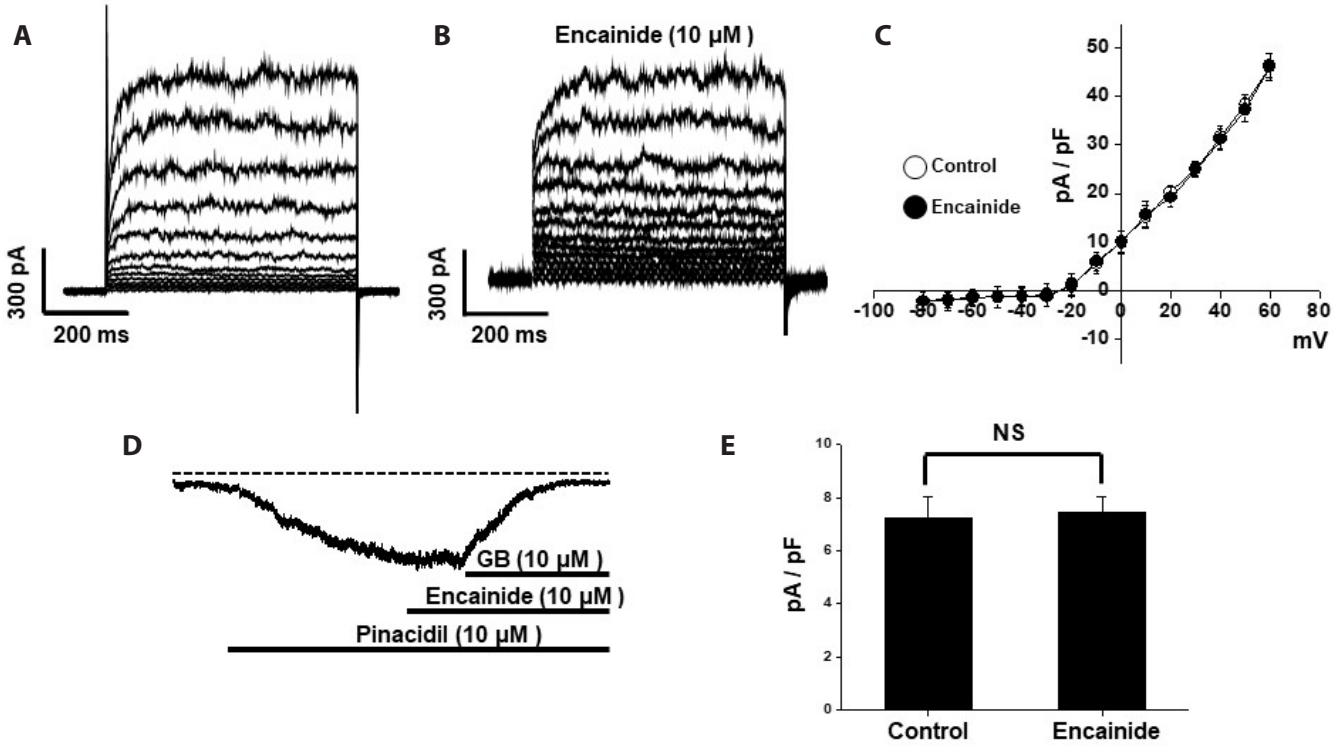


Supplementary Fig. 1. Reduction of voltage-dependent K^+ (Kv) currents by encainide in smooth muscle cells isolated from femoral and mesenteric arteries. Kv currents in femoral arterial smooth muscle cells under the control condition (A) and in the presence of 10 μM encainide (B). (C) Summary of the current-voltage (*I-V*) relationship at steady-state Kv currents in the control (○) and in the presence of 10 μM encainide (●). $n = 4$. *$p < 0.05$. Kv currents in mesenteric arterial smooth muscle cells under the control condition (D) and in the presence of 10 μM encainide (E). (F) Summary of the *I-V* relationship at steady-state Kv currents in the control (○) and in the presence of 10 μM encainide (●). $n = 5$. *$p < 0.05$.



Supplementary Fig. 2. Effects of encainide on large-conductance Ca^{2+}-activated K^+ (BK_{Ca}) and ATP-sensitive K^+ (K_{ATP}) currents in coronary arterial smooth muscle cells. Representative iberiotoxin-sensitive BK_{Ca} currents were induced by depolarizing volage steps from –80 to +60 mV in the absence (A) and presence (B) of encainide. (C) Summary of the *I-V* relationship at steady-state BK_{Ca} currents in the control (○) and in the presence of 10 μM encainide (●). $n = 4$. (D) Traces showing whole-cell K_{ATP} currents activated by pinacidil, following the application of encainide, and glibenclamide (GB) as indicated. (E) Summary of the effects of encainide on K_{ATP} currents. $n = 4$. NS, not significant.