

Targeting Voltage-Gated Sodium Channels for the Treatment of Epilepsy



Christopher Makinson, PhD
Postdoctoral Fellow
Stanford University
Department of Neurology and Neurological Sciences
Huguenard Lab

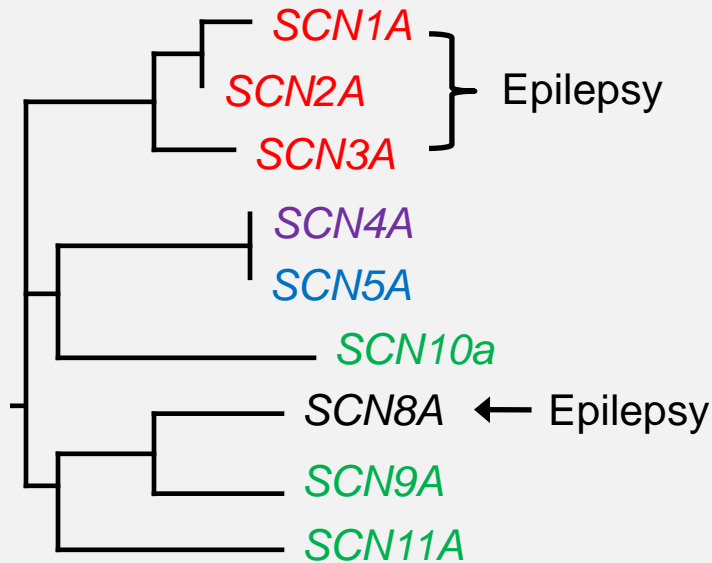
Epilepsy Overview

- Excessive neuronal activity and hypersynchrony
- Affects ~3-4% of people in their lifetime
- Genetic vs. symptomatic epilepsy
- Co-morbidities are common in epilepsy
- ~30% of patients do not respond well current treatments



Background: Voltage-gated sodium channel (VGSC) epilepsies

VGSC genes: Epilepsy risk genes



Red – Brain

Purple – Skeletal Muscle

Blue – Heart

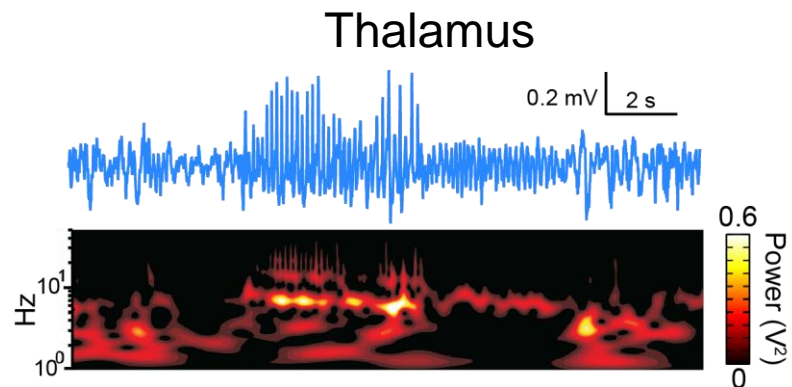
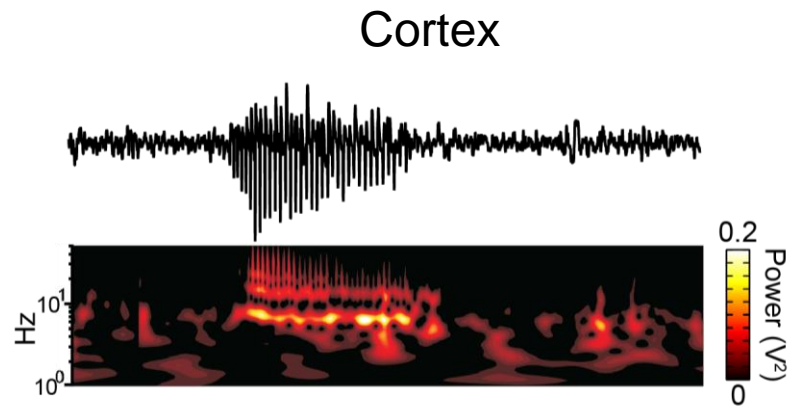
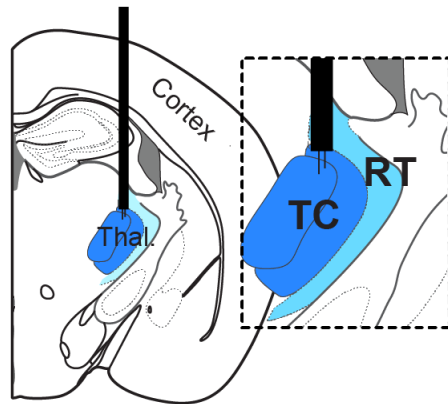
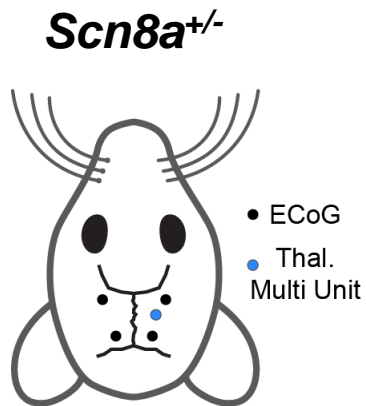
Green – PNS

Black - Ubiquitous

VGSC blockers: Antiepileptic drugs

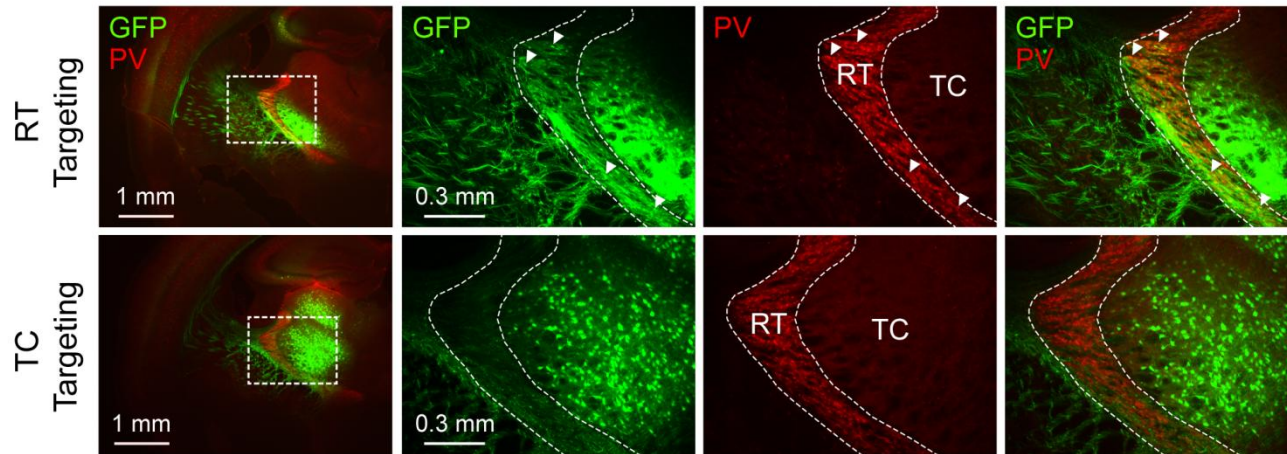
Phenytoin
Carbamazepine
Lamotrigine
Felbamate
Topiramate
Oxcarbazepine
Zonisamide
Rufinamide
Lacosamide
Eslicarbazepine acetate

Thalamocortical seizures by loss of *Scn8a*

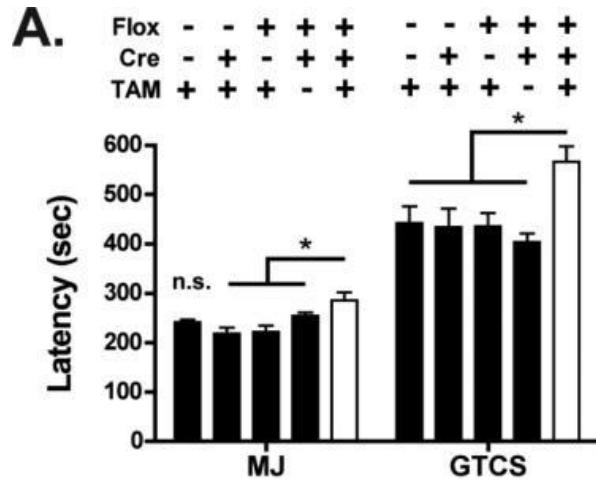


Absence seizures detected in the cortex and thalamus

Knockdown of *Scn8a* in RT causes thalamocortical seizures

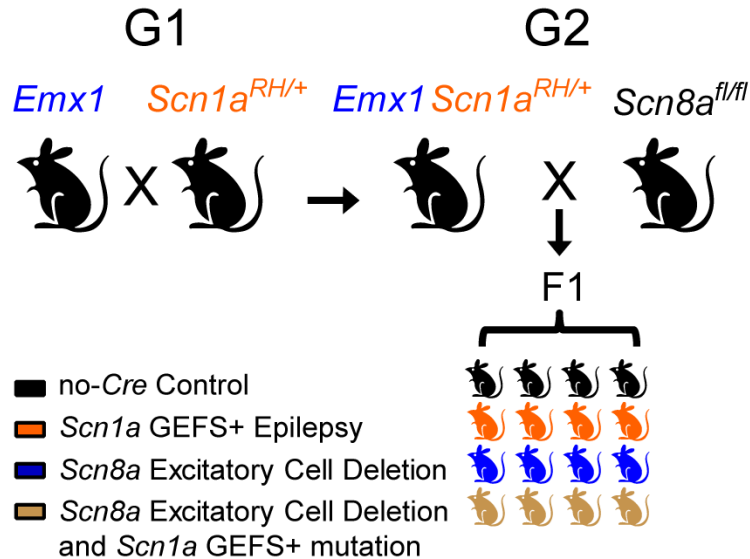


Targeting *Scn8a* in adult animals confers resistance to proconvulsants

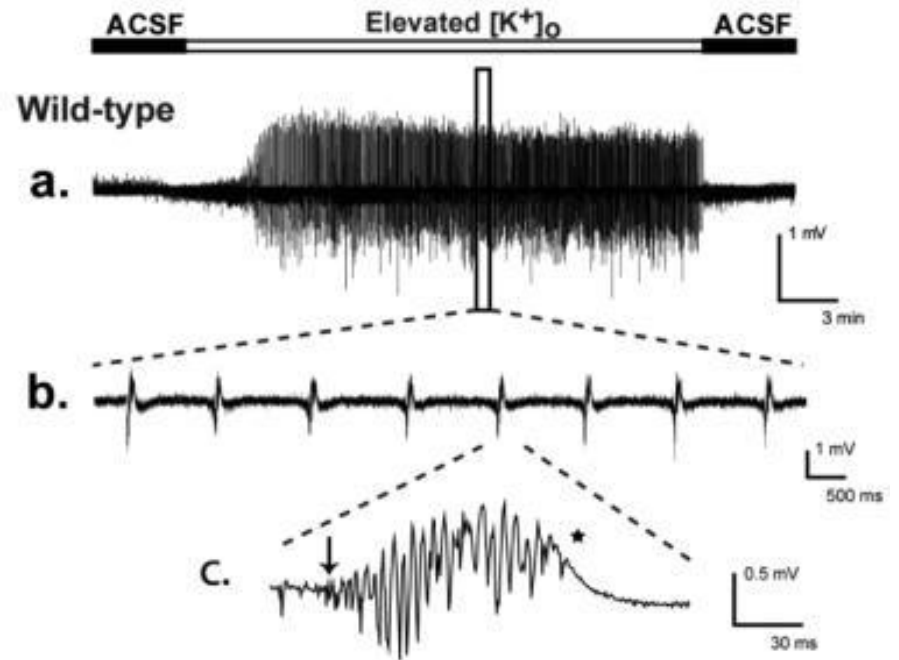
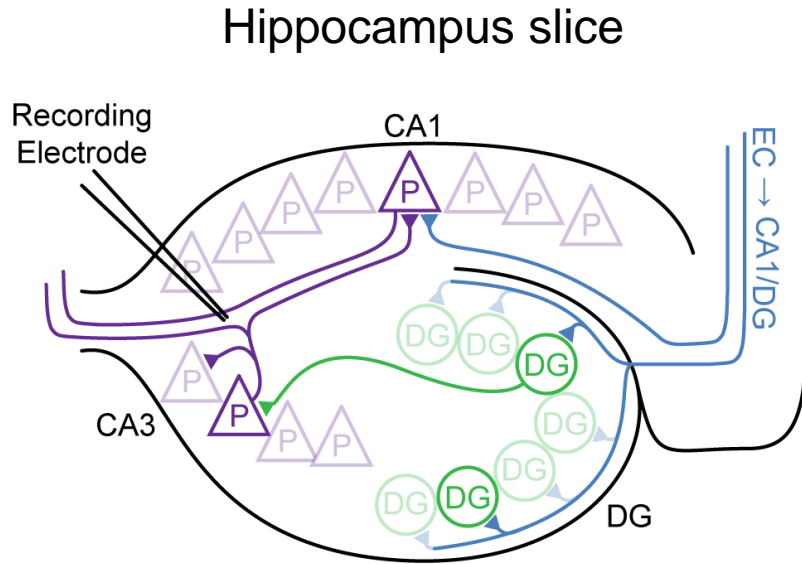


Deletion of *Scn8a* confers resistance to *Scn1a* epilepsies

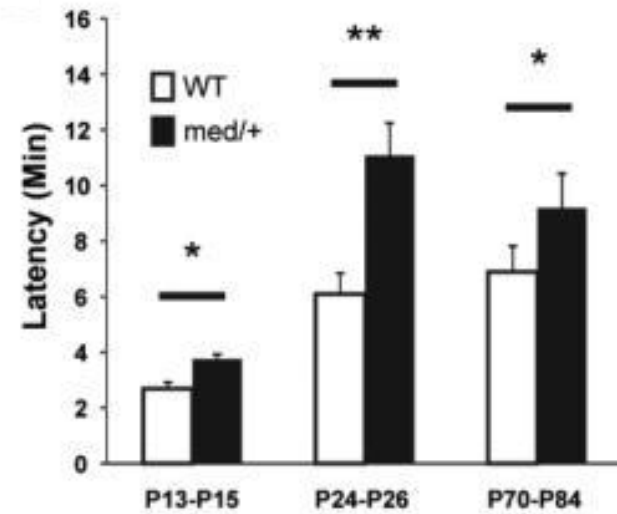
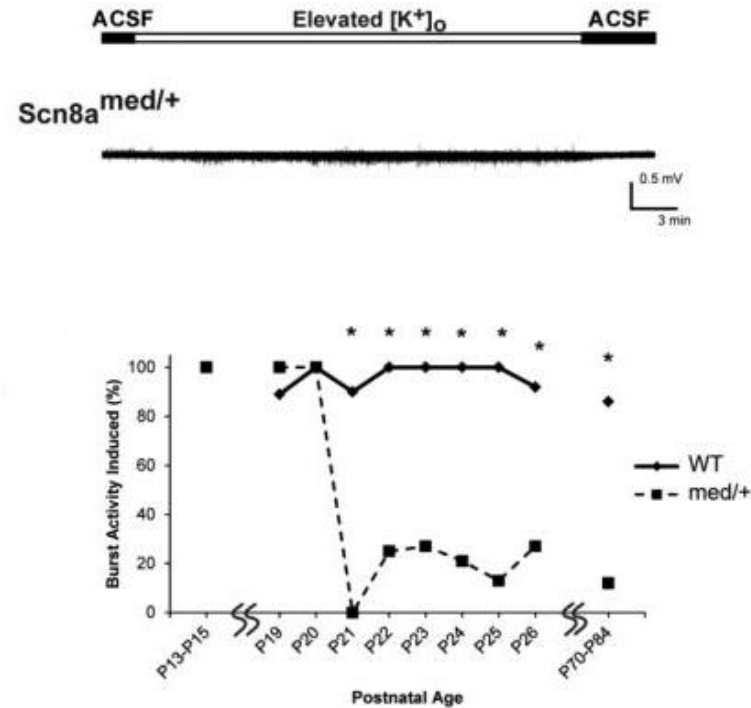
A.



Targeting *Scn8a* for the treatment of temporal lobe epilepsy



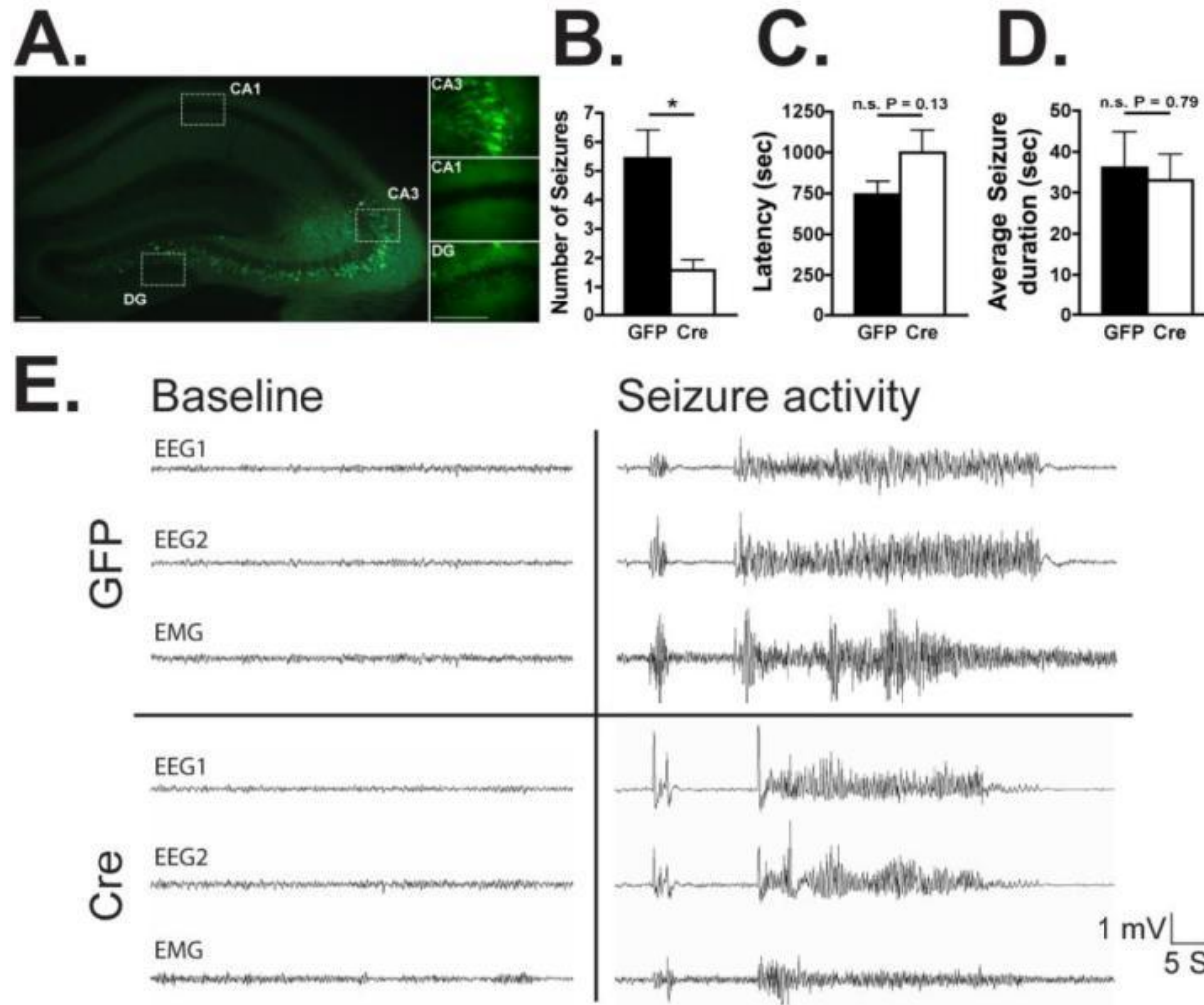
Targeting *Scn8a* reduces epileptiform hippocampal bursting *in vitro*



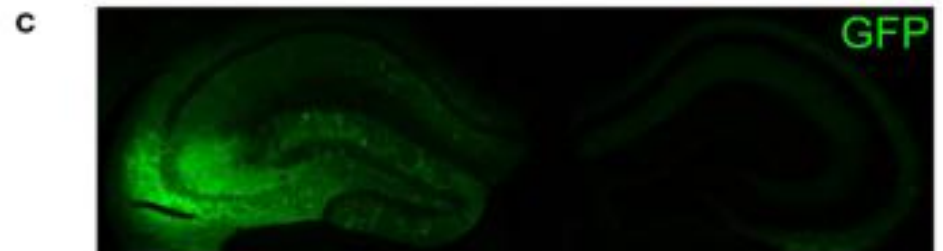
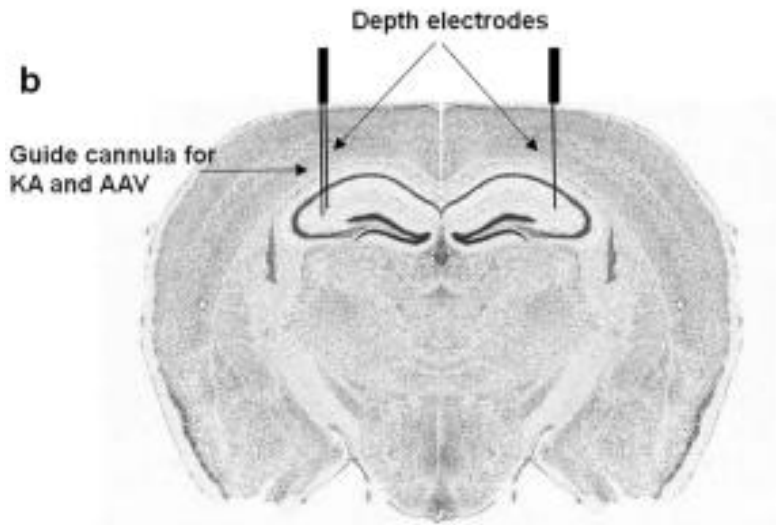
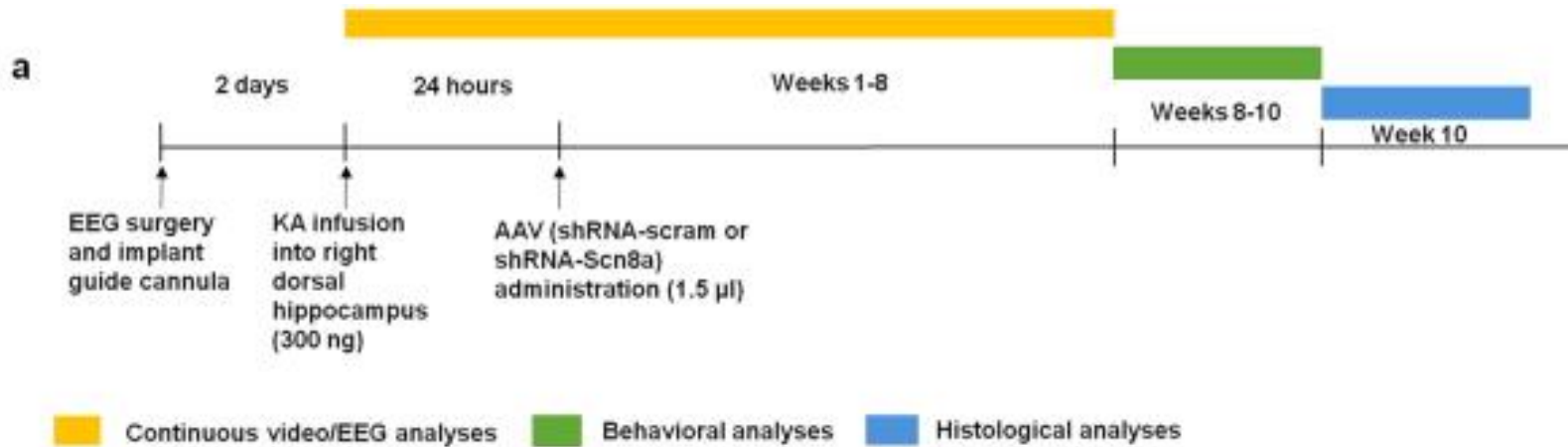
	P13-P15	P19	P20	P21	P22	P23	P24	P25	P26	P70-P84
WT	100 % (5, 2)	89 % (9, 3)	100 % (9, 3)	90 % (10, 5)	100 % (11, 4)	100 % (8, 3)	100 % (10, 4)	100 % (8, 3)	92 % (12, 4)	86 % (7, 4)
med/+	100 % (4, 2)	100 % (5, 2)	100 % (4, 2)	0 % (6, 3)	25 % (8, 7)	27 % (11, 4)	21 % (14, 5)	13 % (16, 5)	27 % (15, 4)	12 % (17, 6)

(# of slices, # of mice)

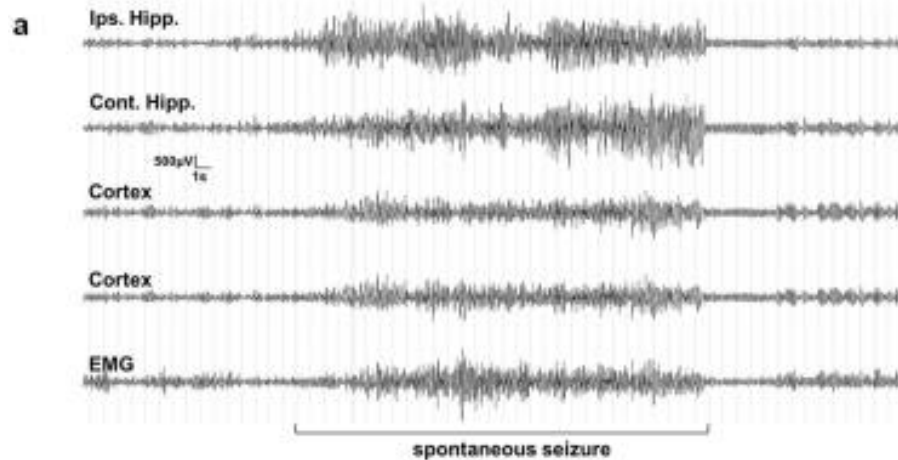
Targeting *Scn8a* in the hippocampus reduces seizures *in vivo*



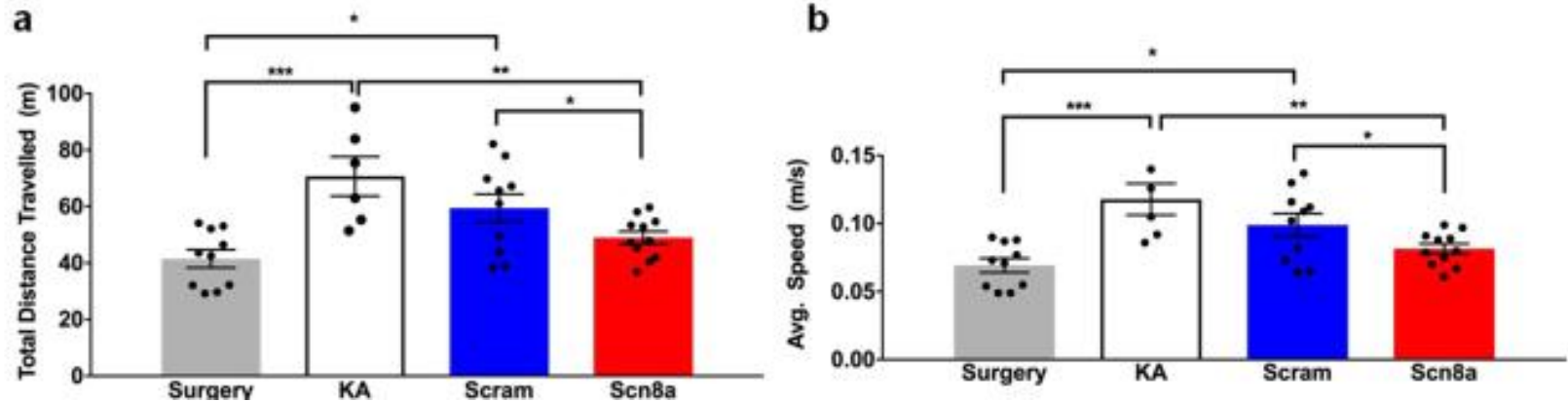
Targeting *Scn8a* in treatment-resistant temporal lobe epilepsy



Targeting *Scn8a* in treatment-resistant temporal lobe epilepsy



Targeting *Scn8a* in treatment-resistant temporal lobe epilepsy



Conclusions

↓ *Scn8a* in cortical circuits leads to widespread reductions in neural excitability and ↓ convulsive seizures

↓ *Scn8a* in the thalamus leads to ↑ non-convulsive thalamocortical seizures

↓ *Scn8a* selectively in the hippocampus is an effective seizure control strategy in models of temporal lobe epilepsy

Some side effects can be avoided using a brain region and cell-type selective targeting strategy

Viral-mediated RNAi approaches may represent a viable alternative to pharmacology for difficult classes of therapeutic targets (e.g. VGSCs)

Acknowledgements



Huguenard Lab
John Huguenard

Jordan Sorokin
Tanya Weerakody



EMORY
UNIVERSITY

Escayg Lab
Andrew Escayg

Jennifer Wong



Goldin Lab
Alan Goldin

Brian Tanaka



**AMERICAN
EPILEPSY
SOCIETY**

