Perampanel and decanoic acid show synergistic action against AMPA receptors and seizures

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Summary
Perampanel is an adjunctive treatment for epilepsy that works through the direct inhibition of AMPA receptors. The same molecular mechanism has recently been shown for a fatty acid, decanoic acid, prescribed in the medium chain triglyceride ketogenic diet for the treatment of patients with drug-resistant epilepsy. Because each compound has been proposed to act through a distinct AMPA receptor binding site, we predicted that perampanel and decanoic acid would act synergistically against AMPA receptors and, consequently, seizures. Here, we show a synergistic interaction between perampanel and decanoic acid in direct AMPA receptor inhibition, in an ex vivo model of seizure activity, and against seizure-induced activity in human brain slices. These data support a potential role for combination treatment using perampanel and dietary decanoic acid to provide enhanced seizure control.

KEYWORDS
AMPA receptors, decanoic acid, drug-resistant epilepsy, perampanel, synergy
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1 | INTRODUCTION

Perampanel (Fycompa) is a noncompetitive AMPA (α-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid) receptor antagonist and is an adjunctive treatment for partial-onset and primary generalized tonic-clonic seizures. However, it has dose-dependent behavioral side effects, thereby limiting its use in some patients. Although the binding site for perampanel has been well characterized on AMPA receptors, there is little information on its subtype specificity and potential synergistic action with other AMPA receptor antagonists.

The medium chain triglyceride (MCT) ketogenic diet provides a nonpharmacologic treatment for patients with drug-resistant epilepsy. Ketone generation was considered necessary for seizure control; however, recent studies have shown a direct antiseizure effect of medium chain fatty acids, likely to be through noncompetitive inhibition of AMPA receptors by decanoic acid (DA). Because in silico analysis suggests that DA binds to the AMPA receptor at a site distinct to that of perampanel, we hypothesized that combined perampanel and DA dosing will result in synergistic inhibition of AMPA receptors and enhanced seizure control.

2 | METHODS

2.1 | AMPA receptor oocyte electrophysiology

Recordings of recombinant AMPA receptor inward currents from Xenopus oocytes have been described previously. Perampanel was purchased from Apexmol Technology Co. Ltd. (Beijing, China).

2.2 | Rat Hippocampal pentylentetrazole seizure-like activity analysis

Seizure-like activity was induced in rat entorhinal cortex-hippocampal slices as described previously; perampanel (0, 100, or 500 nmol/L) and DA (increasing concentrations at 10 minute intervals) were then applied. The frequency of the discharges was measured at minute intervals, averaged every 5 minutes, and normalized to baseline. IC50 values (half maximal inhibitory concentration) were calculated using a Hill plot with statistical analysis by one-way analysis of variance (ANOVA) with Dunnett’s post hoc test.

2.3 | In vitro human brain slice studies

Neocortical human brain slices were derived from patients undergoing elective neurosurgical resection of a neoplasm, where 7 of 8 had a history of epileptic seizures. Preoperative informed consent was obtained for the use of resected brain tissue. This study was approved by the Newcastle and North Tyneside 2 Research Ethics Committee (06/Q1003/51), with clinical governance approved by the Newcastle Upon Tyne Hospitals National Health Service (NHS) Trust (CM/PB/3707). A human neocortical slice (450 μm) preparation was used as has been described previously. Statistical analysis was performed using a Mann-Whitney test.

3 | RESULTS

3.1 | Direct inhibition of AMPA receptors by perampanel and decanoic acid

Prior to the investigation of a synergistic effect between perampanel and decanoic acid, we first investigated the effect of perampanel on currents elicited by glutamate (100 μmol/L) application to Xenopus laevis oocytes expressing 2 AMPA receptor subunit combinations, GluA1/2 or 2/3. These 2 subunit combinations are the most commonly found combinations in the hippocampus. Perampanel inhibited AMPA receptor currents with an IC50 of 8.11 μmol/L against GluA2/3 (SEM [standard error of the mean] 2.05) and 6.27 μmol/L against GluA1/2 (SEM 1.02) (Figure S1A,B) in a noncompetitive manner (Figure S1C). Perampanel reduced maximal responses to 75.2% (at 2.5 μmol/L) and 16.9% (at 5 μmol/L) showing, for the first
time, the direct inhibition of AMPA receptors by perampanel through noncompetitive inhibition without subunit specificity.

Recent studies propose distinct binding sites for perampanel and DA on AMPA receptors,\(^3,6\) with perampanel binding at the S1-M1 and S2-M4 linker\(^1\) and DA binding to the M3 region.\(^6\) To confirm this, we expressed a GluA3 mutant resistant to the AMPA receptor antagonist GYKI,\(^3\) and assessed it for sensitivity to perampanel and DA (Figure 1D). Perampanel (20 \(\mu\)mol/L) reduced the wild-type AMPA receptor (GluA3) glutamate-induced currents by 94.7%, but the mutant receptor currents by only 54.3% \((P < 0.0001)\). In contrast, DA (1 \(\mu\)mol/L) reduced both currents by 74.5% (SEM 6.4) and 72.8% (SEM 0.3), respectively, strongly supporting the proposed distinct sites of action.

The existence of distinct AMPA receptor binding sites for DA and perampanel raises the possibility of synergism; therefore we tested AMPA receptor sensitivity to DA at 2 concentrations of perampanel (1 and 4 \(\mu\)mol/L) (Figure 1A, B, C). For GluA2/3, the IC\(_{50}\) for DA decreased from 0.52 \(\mu\)mol/L (no perampanel) to 0.15 \(\mu\)mol/L (1 \(\mu\)mol/L perampanel) or 0.12 \(\mu\)mol/L (4 \(\mu\)mol/L perampanel) \((P < 0.0001)\). For GluA1/2 the IC\(_{50}\) for DA decreased from 1.16 \(\mu\)mol/L (no perampanel) to 0.21 \(\mu\)mol/L (1 \(\mu\)mol/L perampanel) or 0.10 \(\mu\)mol/L (4 \(\mu\)mol/L perampanel) \((P < 0.0001)\). Repeating this approach using perampanel with 2 concentrations of DA (50 and 100 \(\mu\)mol/L) (Figure 1D,E,F) also showed a significant increase in the potency of perampanel, decreasing IC\(_{50}\) values from 8.1 \(\mu\)mol/L (no DA) to 1.7 and 1.6 \(\mu\)mol/L in the presence of DA at 50 and 100 \(\mu\)mol/L, respectively, in GluA2/3 and from 6.2 \(\mu\)mol/L in GluA1/2 to 2.1 and 2.2 \(\mu\)mol/L, respectively (both \(P < 0.0001)\). These results imply synergistic inhibition of AMPA receptors by DA and perampanel.

To validate a synergistic effect of both perampanel and DA on AMPA receptor currents, an isobolographic analysis was used. This approach can distinguish between additive and synergistic effects of 2 compounds with similar effects (Figure 1G,H). In this analysis, the isobolic line represents

additive effects of the compounds against both GluA1/2 and GluA2/3 receptors. From results provided here, combinatory treatment with perampanel and DA provides points at fixed ratios of each compound that lie below the isobolic line, indicating a synergistic effect. This analysis, therefore, supports a direct synergistic effect of perampanel and DA against AMPA receptors.

### 3.2 Effects of perampanel and decanoic acid on an ex vivo (animal) seizure model

To investigate a synergistic effect in controlling seizure-like activity and to avoid the confounders of systemic metabolism or pharmacokinetic interactions, we then investigated the effects of combinatory perampanel and DA on PTZ-induced seizure-like activity in rat hippocampal slices. In these experiments, increasing DA concentrations reduced epileptiform activity at 300 \(\mu\)mol/L with a block at 1000 \(\mu\)mol/L (Figure 2A,B), consistent with earlier data.\(^6\) Repeating the assay with added perampanel (100 and 500 \(\mu\)mol/L) with data normalized to perampanel alone, showed that DA (10 \(\mu\)mol/L) combined with perampanel (100 \(\mu\)mol/L) caused a significant reduction in seizure activity from 95.6% (confidence interval [CI] 81 to 110) in the absence of DA to 76.8% (CI 63-90, \(P = 0.048\)) in its presence, and a block at 600 \(\mu\)mol/L. A similar activity is also shown at higher perampanel (500 \(\mu\)mol/L) concentrations, reducing baseline (10 \(\mu\)mol/L) inhibition to 69.6% (CI 53-86, \(P = 0.015)\). These data also demonstrate a reduced IC\(_{50}\) for DA from 352 \(\mu\)mol/L (CI 200-621) to 196 \(\mu\)mol/L (145-264) and 122 \(\mu\)mol/L (49-302, \(P = 0.0252)\) at 100 and 500 \(\mu\)mol/L, respectively.

### 3.3 Effects of perampanel and decanoic acid on ex vivo human brain slice seizure activity

We then investigated the translational potential of the observed synergism between perampanel and DA in

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**FIGURE 1** Characterization of direct synergistic inhibition of AMPA receptors by perampanel and decanoic acid (DA). AMPA (GluA2/3, GluA1/2, or GluA3) receptors were expressed in Xenopus oocytes, and perfused with L-glutamate (100 \(\mu\)mol/L) and the indicated compound, unless stated otherwise. Currents were recorded using TEVC. A, Representative current traces of inhibitory dose-response curves for DA on GluA2/3 receptors at 1 or 4 \(\mu\)mol/L perampanel. Dose-response inhibition curves for DA at 1 or 4 \(\mu\)mol/L perampanel on (B) GluA2/3 and (C) GluA1/2 receptors. Points were normalized to maximal response to L-glutamate and solvent, 1 \(\mu\)mol/L perampanel, or 4 \(\mu\)mol/L perampanel and represent means and standard error of the mean (SEM) of 8-13 readings. Inserts show respective IC\(_{50}\) values in the presence of perampanel.

D, Representative current traces of inhibitory dose-response curves for perampanel on GluA2/3 receptors at 50 to 100 \(\mu\)mol/L DA. Dose-response inhibition curves for perampanel at 50 and 100 \(\mu\)mol/L DA on (E) GluA2/3 and (F) GluA1/2 receptors. Points were normalized to maximal response to L-glutamate with solvent, 50 and 100 \(\mu\)mol/L DA and represent means and SEM of 8-13 readings. Inserts show respective perampanel IC\(_{50}\) values in the presence of DA. Scale bars correspond to 60 and 75 nA for 1 and 4 \(\mu\)mol/L perampanel, respectively (A) and 200 and 50nA for 50 and 100 \(\mu\)mol/L DA, respectively (D). G, H, Isobolic analysis of the effect of perampanel and DA, showing the isobole (straight line) representing combinatorial doses that are additive. Data points, shown in the line below the isobole, indicate a synergistic effect between each compound at that dose combination \(* * * P \leq 0.001; * * * * P \leq 0.0001)
reducing epileptiform activity in human brain explants. Slices were obtained from 8 patients undergoing elective neurosurgery for removal of intraaxial neoplasms (Figure 2C). Using a proconvulsant artificial cerebrospinal fluid, epileptiform activity was induced and the impact of DA, perampanel, and combinatory treatment was examined (Figure 2D,E). Baseline epileptiform activity had a mean (95% CI) area power of 1690 μV² (CI 1192-2191 μV²; n = 21). In the presence of DA (100 μmol/L) alone the activity was reduced (1088 μV², CI: 393-1782 μV²; n = 8) but this difference was not statistically significant (P = 0.1390). The application of perampanel (0.5 μmol/L)
alone also did not have a significant effect \((P = 0.7554)\) on activity when compared to baseline activity \((1621 \mu V^2, CI: 681-2562 \mu V^2; n = 10)\). In contrast, the concurrent application of DA and perampanel significantly \((p < 0.0001)\) reduced the area power of epileptiform activity \((144.7 \mu V^2, CI: 15.6-274 \mu V^2; n = 11)\) with a virtual abolition of the pathologic network LFP (local field potential) activity. In addition, the combination of compounds had a significantly greater effect when compared with both DA \((P = 0.0005)\) and perampanel \((P = 0.0002)\) alone.

### DISCUSSION

These data confirm that combinatory use of DA and perampanel is effective in directly reducing AMPA receptor generated currents and in reducing PTZ-induced seizure-like activity in hippocampal slice preparations. Furthermore, this synergistic effect is also evident with epileptiform activity generated in resected human neocortical tissue, emphasizing the translational potential for this therapeutic approach in patients with epilepsy.

Mechanistic studies of perampanel inhibition of AMPA receptors have been complicated by low solubility, non-standard concentration response curves, and variable literature. Plasma concentrations of perampanel have been reported to vary between 1.06 and 3.26 \(\mu mol/L\). Our data indicate that perampanel directly inhibits AMPA receptor currents with IC\(_{50}\) values of 5.1-6.2 \(\mu mol/L\), similar to that shown using native rat and human cerebellar AMPA receptors microtransported into *Xenopus* oocytes (2.6-5.8 \(\mu mol/L\)). Why this is so different from IC\(_{50}\) values recorded from rat
neurons (60–93 nmol/L\textsuperscript{13,14}) is unclear, but may be due to the presence of other proteins in rat neurons.

Levels of DA have also been monitored in both human and animal models. In the blood of patients on the MCT ketogenic diet, the concentration of DA averages 157 μmol/L\textsuperscript{15,16} In rodent models, the ratio of DA in blood plasma to brain is around 0.7,\textsuperscript{17} and extrapolating this to the human brain suggests that DA is likely to be present at around 110 μmol/L. Our data indicate that 100 μmol/L DA results in a 3-fold increase in the inhibition of the AMPA receptor by perampanel, which translates to an even greater impact on seizure activity. In a clinical setting, these observations suggest that, with dietary decanoic acid, a reduction in perampanel dose to, for example, 2–4 mg/d, may provide effective seizure control. These data support the synergistic inhibition of AMPA receptors through combinatorial treatment with perampanel and dietary medium chain triglycerides containing DA that may provide both improved seizure control and reduced side effects in patient populations.

In the validation of new approaches for the treatment of epilepsy, in vivo animal studies are often used. The difficulty with in vivo analysis for this study is that metabolism of decanoic acid (or the MCT diet) provides a significant problem because rodents have a much increased metabolic rate (compared to humans). This is likely to lead to the rapid metabolism of decanoic acid in vivo, and thus does not elevate brain levels for a sufficient time following a single dose. Two in vivo studies of medium chain fatty acids in seizure control have used either 10-day MCT ketogenic diets\textsuperscript{18} or large single bolus delivery of these fats\textsuperscript{17} to analyze brain and blood levels. Due to this rapid metabolic effect, the only way to monitor synergistic effects related to decanoic acid and perampanel using an in vivo rodent model would be to establish IC\textsubscript{50} values for perampanel, in animals under standard dietary conditions or following maintenance on the MCT diet. However, this approach would not distinguish between potential synergy caused by decanoic acid or the resulting ketones provided by dietary treatment. Thus, since both MCT diets and perampanel are currently used in clinical treatment, future studies would need to investigate therapeutic outcomes in patient groups on an MCT diet with additionally prescribed perampanel.

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DISCLOSURES

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AUTHOR CONTRIBUTIONS

RSBW, MW, PEC, AD, MC, and KA contributed to the conception and design of the study. KA, RSBW, SW, and MC contributed to the acquisition and analysis of data. RW, MW, PC, and KA provided a substantial contribution to drafting the paper. MF, AJ, MAH, DH, PM, and AJ provided human tissue and contributed to writing the manuscript.

DATA AVAILABILITY

All data related to this study is available in the article.

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SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section at the end of the article.

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