

Functional characterization of a novel mutation affecting the first Arginine in the S₄ segment of K_v7.2 channel causing Early-Onset Epileptic Encephalopathy

E. Miceli¹, M.V. Soldovieri², P. Ambrosino², E.C. Cooper³, M. Tagliatela^{1,2}

¹Dept. of Neuroscience, University of Naples Federico II, Naples, Italy

²Dept. of Medicine and Health Science, University of Molise, Campobasso, Italy

³Dept. of Neurology and Dept. of Neuroscience and Molecular and Human Genetics, Baylor College of Medicine, Houston, TX

Neonatal seizures are among the most frequent neurological symptoms in the first year of life. In neonatal convulsions, genetic determinants appear to play a relevant role. In particular, mutations in *KCNQ2*, and more rarely *KCNQ3* genes, encoding for the K_v7.2 and K_v7.3 voltage-gated K⁺ channel subunits, have been identified in patients with Benign Familial Neonatal Seizures (BFNS), a rare autosomal-dominant epilepsy of the newborn with mostly benign neurodevelopmental outcome. More recently, *KCNQ2* mutations have been also described in neonates affected with Early-Onset Epileptic Encephalopathy (EOEE), a group of devastating epilepsies characterized by refractory seizures and cognitive arrest or regression that typically carry a poor prognosis (Weckhuysen et al., 2012). K_v7.2 and K_v7.3 channels are mainly expressed in the Central Nervous System where they form homo- or hetero-tetrameric channels underlying a slow activating/deactivating K⁺ current called M-current which regulates neuronal firing (Soldovieri et al., 2011). Functional experiments in K_v7.2 and K_v7.3 channels carrying disease-causing mutations reveal that most of them cause a loss-of-function effect. However, we have recently studied four mutations, three in K_v7.2 and one in K_v7.3 channels, that cause EOEE by a gain-of-function (GOF) mechanism (Miceli et al., 2015).

In the present study, mutagenesis, electrophysiological and molecular modeling techniques have been used to investigate the consequences prompted by a novel mutation neutralizing the first Arg in the S₄ segment of K_v7.2 channels (R198Q), identified in three unrelated families with epileptic encephalopathy and later-onset seizures reported into a case registry/database (www.rikee.org). To this aim, we introduced the specific mutation in the human *KCNQ2* cDNA and studied their functional properties using the whole-cell configuration of the patch-clamp technique upon their transient expression in CHO cells. Electrophysiological experiments revealed that homomeric K_v7.2 R198Q subunits exhibited an approximately 2-fold increase in maximal current density and a robust leftward shift in activation voltage-dependence of about 30 mV, as previously reported (Miceli et al., 2008). When expressed with wild-type K_v7.2 and K_v7.3, to reproduce the genetic balance of the affected patients, the current density was equal to control, but activation was shifted approximately 10 mV to hyperpolarized potentials. These results suggest that this mutation, similar to those affecting the proximal part of S₄, induced a GOF effect on K_v7.2 channels. Therefore, in order to attempt to counteract these mutation-induced effects on K_v7.2 currents, we evaluated the effects of pH on currents elicited by heteromeric channels incorporating K_v7.2 R198Q subunits, since K_v7.2/3 currents are inhibited by H⁺ ions in a voltage-dependent manner (Prole et al, 2003). A decrease of pH dose-dependently rightwardly shifted (opposite to the mutation effect) the voltage-dependence of current activation, and at pH 6.4 we observed an almost complete restoration of the wild-type voltage-dependence of the channel.

In conclusion, we identified a novel K_v7.2 mutation that causes epileptic encephalopathy by a GOF mechanism and we found that a decrease in pH significantly reverts the gain of function of K_v7.2 R198Q mutant channel, suggesting that drugs causing a moderate acidosis, such as the carbonic anhydrase inhibitor acetazolamide, may be effective in this specific subgroup of patients.

Miceli et al. (2008): *Biophys J.* 95:2254-64

Miceli et al. (2015): *J Neurosci.* 35:3782-3793

Prole et al. (2003). *J Gen Physiol.* 122:775-793

Soldovieri et al. (2011). *Physiology.* 26:365-376

Weckhuysen et al. (2012). *Ann Neurol.* 71:15-25