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Safety Pharmacological Approach for Proarrhythmic Risk Prediction Using IQ-CSRC Drugs (I) – Patch-clamp Study –

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Introduction

Precise evaluation of cardiac safety in an early preclinical stage is essential for developing novel drugs. In particular, it is important to predict a possible risk for proarrhythmia in safety pharmacology testing. Since life-threatening drug-induced arrhythmia like *torsades de pointes* is well correlated with QT prolongation, which can be caused by blockade of the hERG potassium channels, electrophysiological assays on the hERG channel has been indispensable. Recently, QT prolongation associated with blockade of other cardiac ion channels has also been discussed. In this study, we implemented a mechanistic approach for understanding how individual

Results

• Dofetilide $(|_{Kr} >>> |_{Na}, |_{Ca})$



human cardiac ion channels are affected along with QT prolongation by the IQ-CSRC drugs.







Materials & Methods

- Drugs: 6 drugs used in the IQ-CSRC perspective study
 - Ondansetron
 - Quinine
 - Dolasetron
 - Moxifloxacin
 - Dofetilide
 - Levocetirizine (QT-negative)



all 6 drugs while inward currents through $Na_v 1.5$ and $Ca_v 1.2$ channels were less frequently inhibited.

- Dofetilide, ondansetron, and dolasetron showed highly selective hERG channel inhibition with little or small inhibitory effects on Na_V1.5 and Ca_V1.2 channels.

In vitro multi-channel assay: Whole-cell voltage-clamp recordings at RT - Cell lines

Transfected gene	host	Current
hNa _v 1.5	HEK	I _{Na,P} , I _{Na,L}
hCa _v 1.2/β2/α2δ1	CHO	I _{Ca}
hERG	HEK	I _{Kr}
hK _v LQT1/mink	СНО	I _{Ks}
hK _v 1.5	СНО	I _{Kur}
hK _v 4.3	СНО	I _{to}
hK _{ir} 2.1	СНО	I _{K1}

- Voltage protocol (step pulses)







2500 2000

1500

1000

500

-500

-1000

Quinine (multichannel blocker)



- Moxifloxacin moderately blocked hERG and $Ca_{v}1.2$ channels and weakly $Na_{v}1.5$ channel.

- Quinine and a QT-negative drug of levocetiridine showed strong inhibition of hERG channel and moderate inhibition of the other 6 channels.



Quinine (30 µmol/L)

• Levocetirizine (multichannel blocker, I_{kr} > other channels)









• Evaluations:

- Suppression rate after 3 to 5 min-administration - IC₅₀, hill slope, etc

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Conclusion

In the present study, we evaluated the blocking profiles of the IQ-CSRC drugs against human cardiac ion channels, serving for proarrhythmic risk prediction in the drug development process.