

Learning Objective

Identify the mechanisms responsible for the efficacy of antiepileptic drugs in non-epileptic conditions

Antiepileptic Drugs (AEDs)
FDA-Approved Agents

- Chronic treatment of epilepsy (26 agents):
 - acetazolamide, carbamazepine, clobazam, clonazepam, clorazepate, ethosuximide, ethotoin, ezogabine/retigabine, felbamate, gabapentin, lamotrigine, lacosamide, levetiracetam, mephentoin, methsuximide, oxcarbazepine, phenobarbital, phenytoin, pregabalin, primidone, rufinamide, tiagabine, topiramate, trimethadione, valproate, vigabatrin, zonisamide
- Acute therapy of status epilepticus (5 agents):
 - diazepam, fosphenytoin, lorazepam, midazolam, propofol

Prescribing information available from Drugs@FDA.gov.

Antiepileptic Drugs
In Late-Stage Development in the U.S.

- Eslicarbazepine acetate**
- Brivaracetam*
- Ganaxolone*
- Perampanel*§
- BGG 492*

Investigational agent, not FDA-approved
* Approved by the European Medicines Agency in April 2000
§ Approved by the European Medicines Agency in July 2012

Episodic Disorders Represent a Unique Type of Medical Syndrome

- Symptoms: cardiac arrhythmia, myotonia, periodic paralysis, seizure, migraine headache
- Dramatic events occur paroxysmally, often in otherwise normal individuals
- Often nonprogressive; full recovery between attacks
- Often have inciting factor, but may not be obvious
- Even neuropathic pain can be considered episodic: innocuous stimulation in allodynia triggers pain
- ? Depression, bipolar disorder

Episodic Disorders Are Commonly Channelopathies

- Cardiac muscle
 - Long QT syndrome: K⁺, Na⁺
- Skeletal muscle
 - Hyperkalemic periodic paralysis, paramyotonia congenita, potassium-aggravated myotonia, myotonia congenita, hypokalemic periodic paralysis: Na⁺, Cl⁻, Ca²⁺
- Cerebellum/neuromuscular junction
 - Episodic ataxia, type 1 and myokymia: K⁺
 - Episodic ataxia, type 2/Familial hemiplegic migraine/Spinocerebellar ataxia type 6: Ca²⁺

Rose MR. *Brit Med J.* 1998;316(7138):1104-1105. PMID: 9552942.


Episodic Disorders Are Commonly Channelopathies

- Spinal cord
 - Hyperekplexia: glycine receptor
- Brain/cranium
 - Familial hemiplegic migraine, type 1/episodic ataxia, type 2: Ca²⁺
- Dorsal root ganglion/spinal cord
 - Neuropathic pain: acquired Na⁺/Ca²⁺
- [? Brain region ?]
 - Depression, bipolar disorder (?channel?)

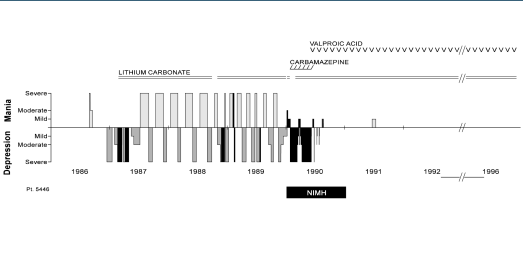
Rose MR. *Brit Med J.* 1998;316(7138):1104-1105. PMID: 9552942.

Bipolar Disorder. . .

- Has characteristics of an episodic disorder
- Antiepileptic drugs are often effective



Life Chart Showing Continuous Cycling in a Woman With Bipolar I Disorder



Post RM, et al. *Neuropsychobiology*. 1998;38(3):152-166. PMID: 9778604.

Clinical Connections

- Anti-manic effect of antiepileptic drugs resides in their ability to selectively inhibit synaptic transmission, especially with high frequency firing (Na^+ channels, SV2A)
- Antidepressant effect of antiepileptic drugs must represent a distinct action
 - 5-hydroxytryptamine (5-HT) reuptake (unlikely)
 - Inhibition of GABA release
 - Selective block of high-voltage activation of Ca^{2+} channels (?)

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