2020 Epilepsy Genetics Update

Molecular studies of genes associated with epilepsies: *KCNQ2*

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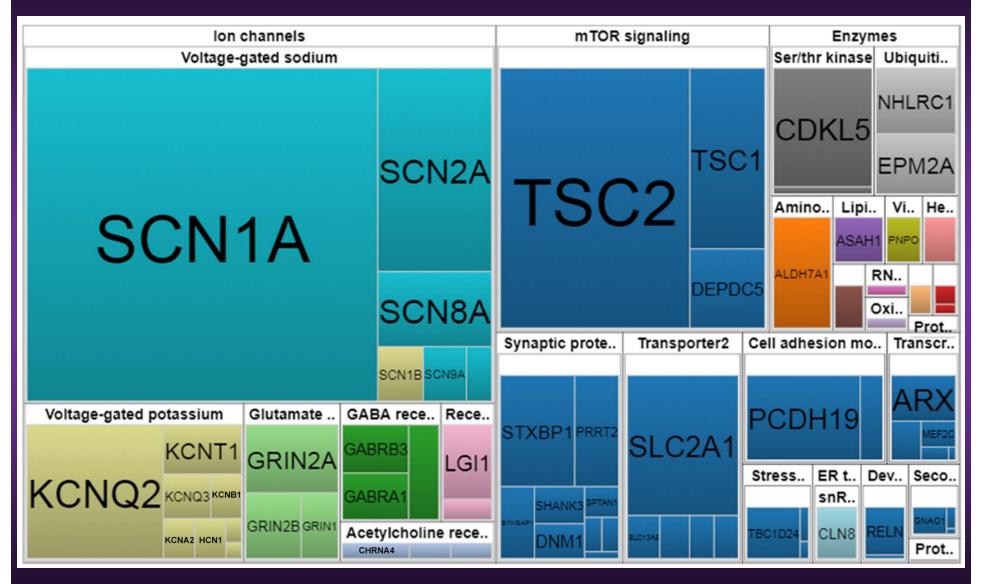
Disclosures – Alfred L. George, Jr., M.D.

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Allelic Heterogeneity in the Epilepsies



Source: HGMD[®] professional 2017.2 (6,125 variants)

Jennifer Kearney, Ph.D

Allelic Heterogeneity in the Epilepsies

Gene	Number of variants
SCN1A	1934
SCN2A	375
SCN3A	19
SCN8A	173
KCNQ2	379
KCNQ3	40
KCNT1	65
KCNB1	55
KCNA2	24
Glutamate receptors	332
GABA receptors	228
Acetylcholine receptors	45

Source: HGMD[®] professional 2020.1

Diagnostic outcomes for genetic testing of 70 genes in 8565 patients with epilepsy and neurodevelopmental disorders

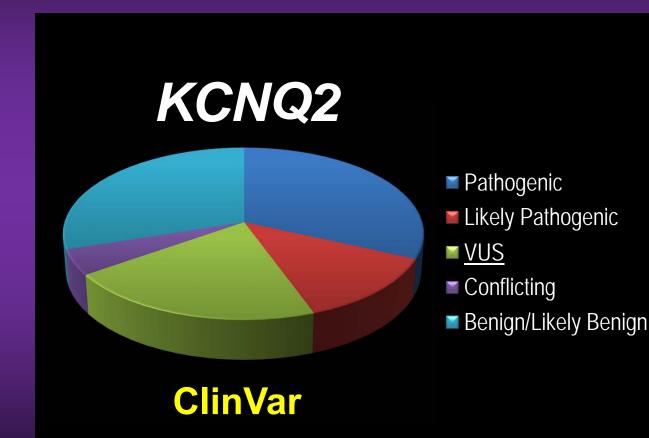
Amanda S. Lindy | Mary Beth Stosser | Elizabeth Butler | Courtney Downtain-Pickersgill | Anita Shanmugham | Kyle Retterer | Tracy Brandt Gabriele Richard | Dianalee A. McKnight

Epilepsia May 2018

70-gene panel and array CGH

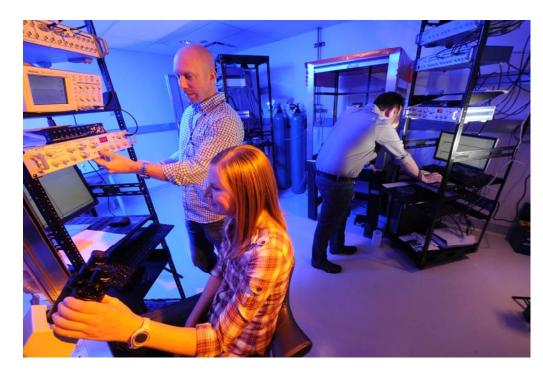
Gene	Positive Cases	% of Positive Cases
SCN1A	322	24.8%
KCNQ2	159	13.2%
SCN2A	96	7.4%
SCN8A	30	3.6%
Totals	607	49%

Variants of Unknown Significance in Channelopathy-associated Epilepsy



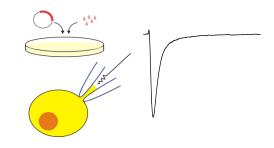
Functional Evaluation of Ion Channels Variants

Patch clamp electrophysiology is the gold standard



Conventional patch clamp:

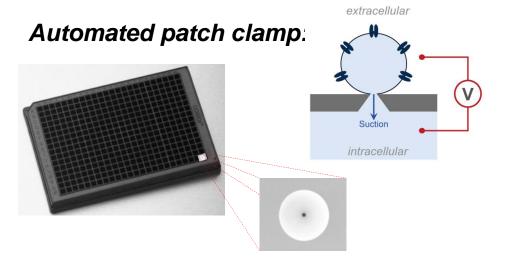
- 16 measurements/person/day
- days-weeks per mutation



Functional Evaluation of Ion Channels Variants

Patch clamp electrophysiology is the gold standard





- 768 measurements per hour
- multiple variants per day

SyncroPatch 768PE



#DasMachine-NU

Electroporation

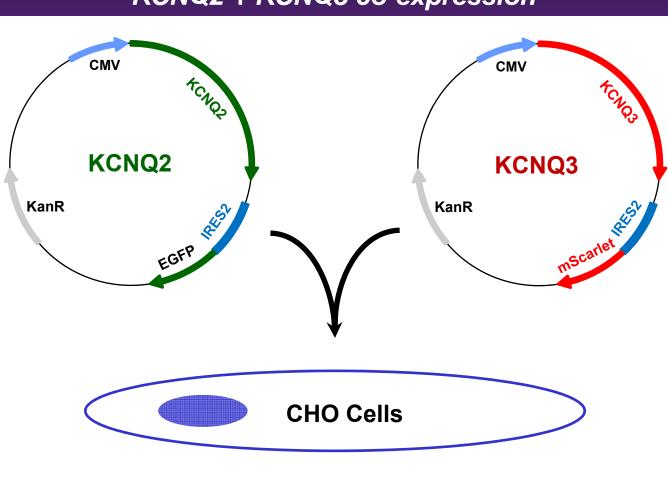


MaxCyte-STX

Automated patch-clamp

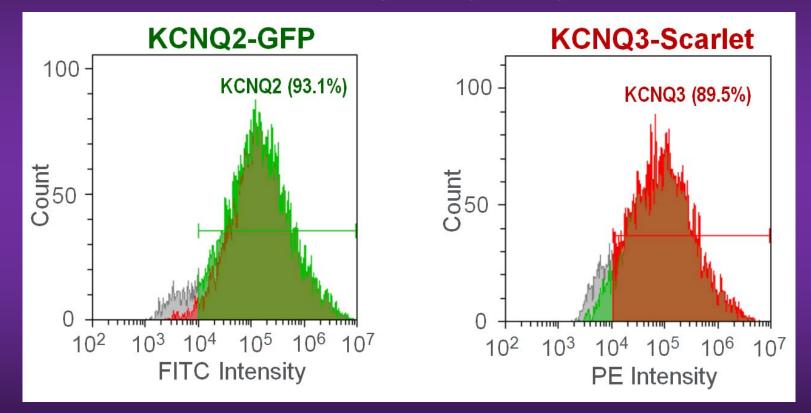


Syncropatch 768PE



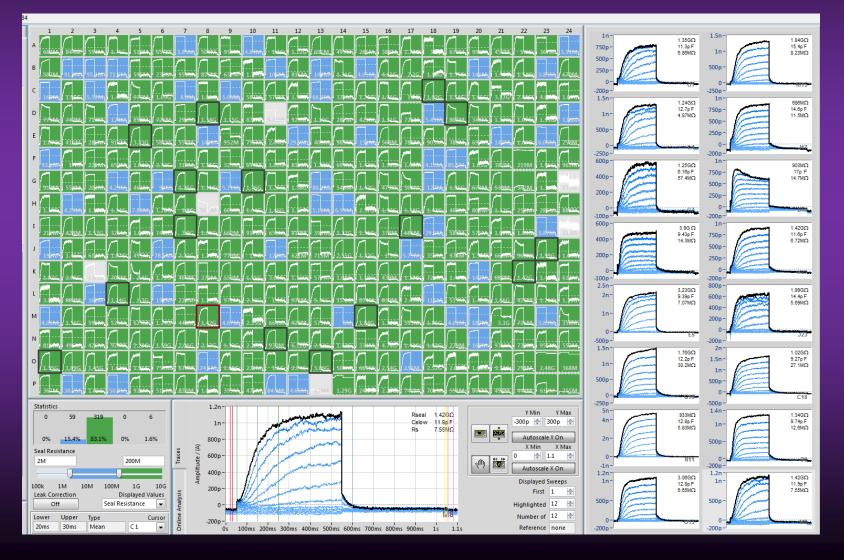
KCNQ2 + KCNQ3 co-expression

Electroporation of KCNQ2 and KCNQ3 in CHO cells evaluated by flow cytometry

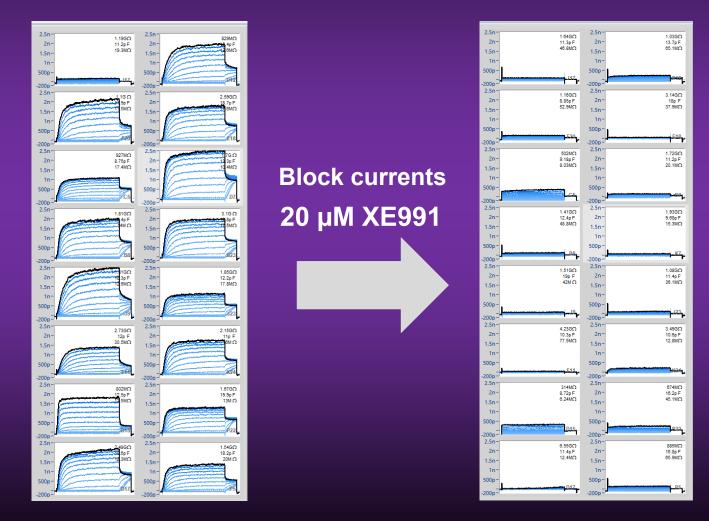


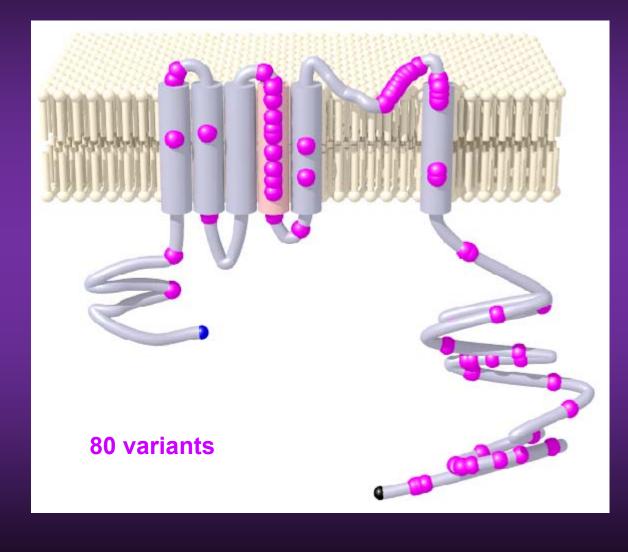
Percent Co-transfected: 88%

Syncropatch recording of KCNQ2 and KCNQ3

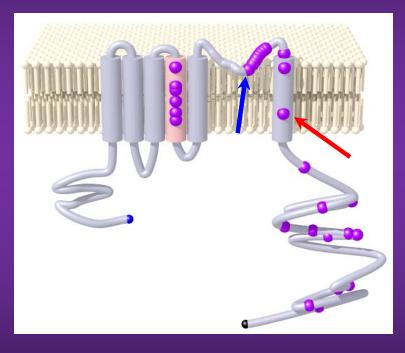


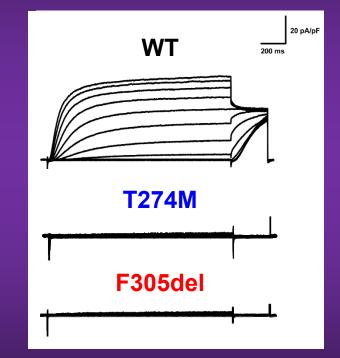
Syncropatch recording of KCNQ2 and KCNQ3



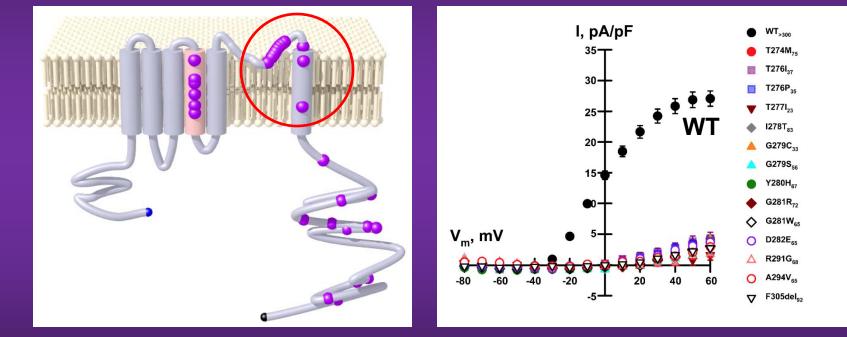


Variants with prominent loss-of-function

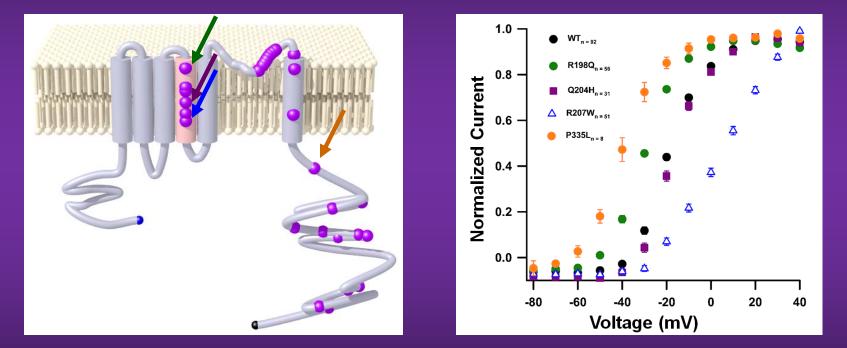


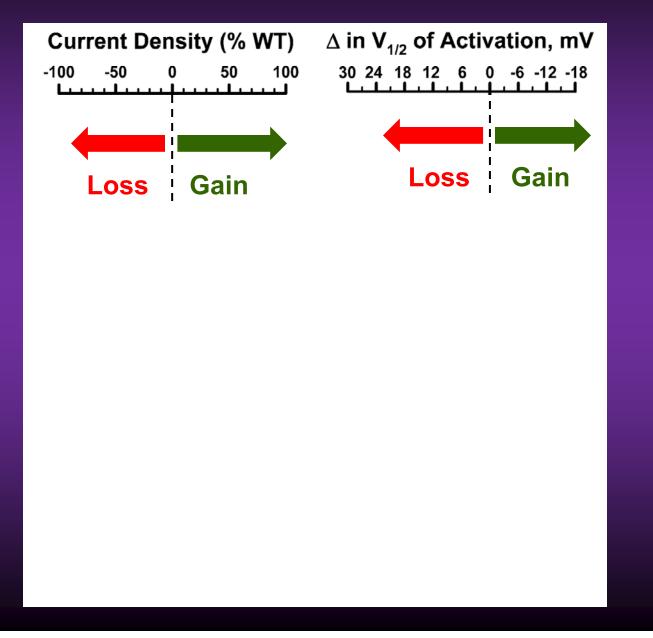


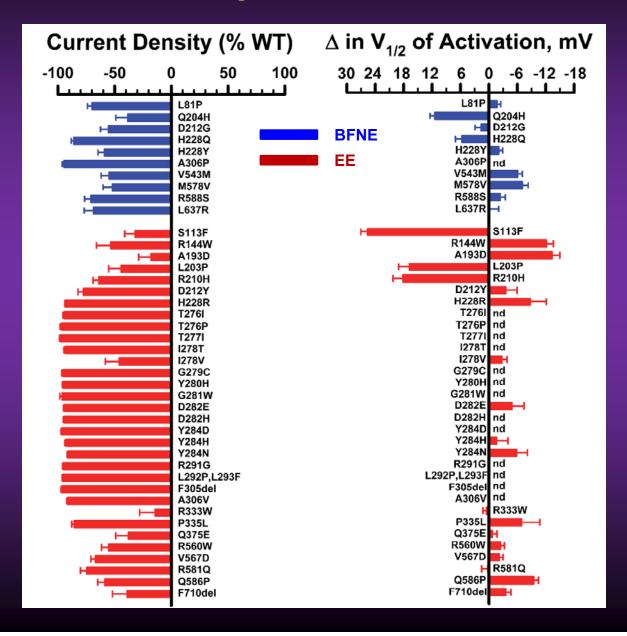
Variants with prominent loss-of-function



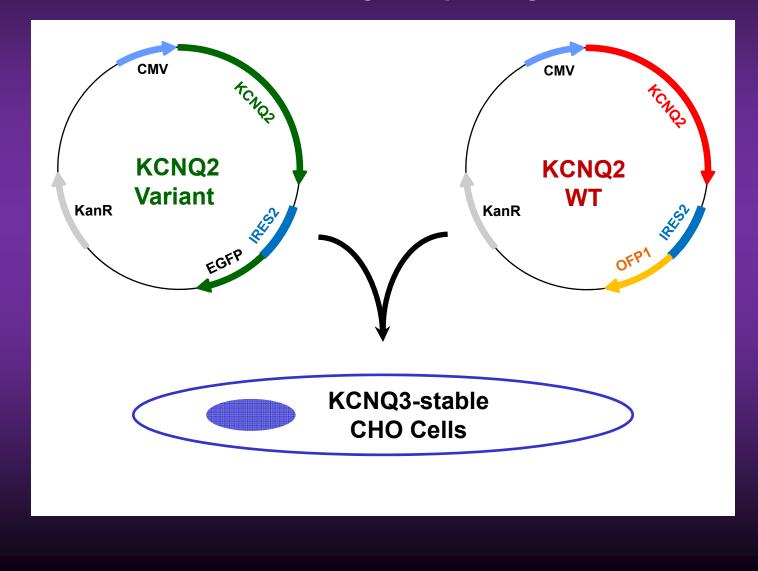
Variants with abnormal activation voltage dependence



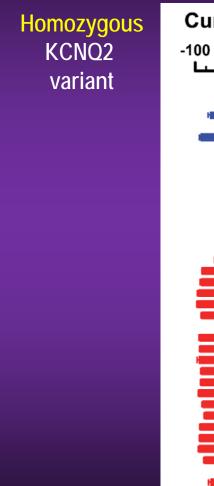


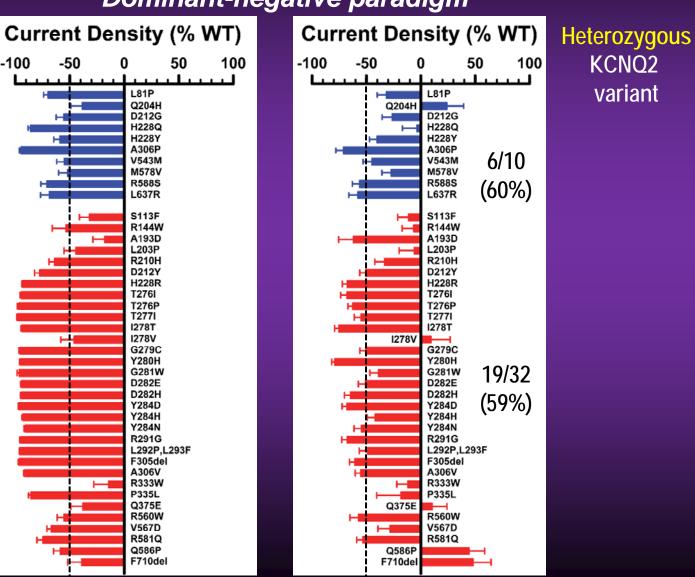


Dominant-negative paradigm



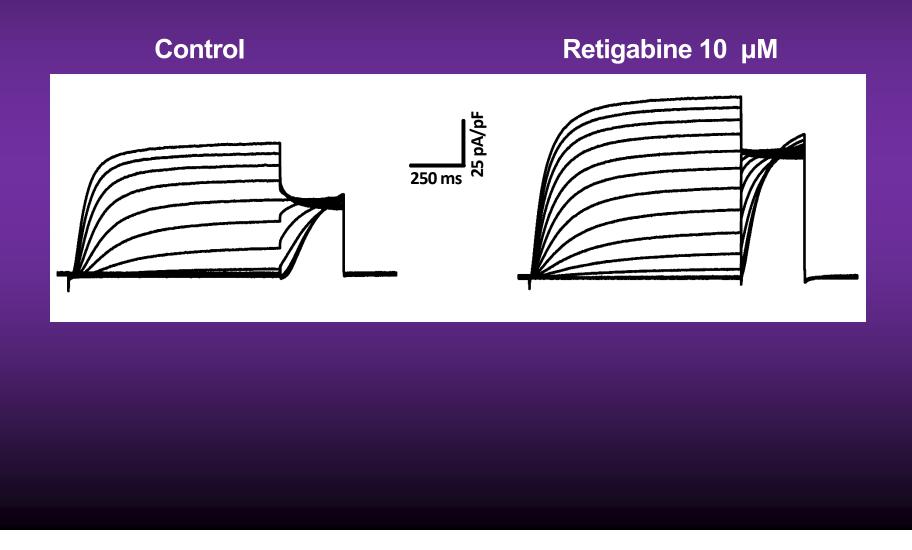
Dominant-negative paradigm





Pharmacological Effects of Retigabine

Expression of WT KCNQ2 in KCNQ3 stable CHO cells

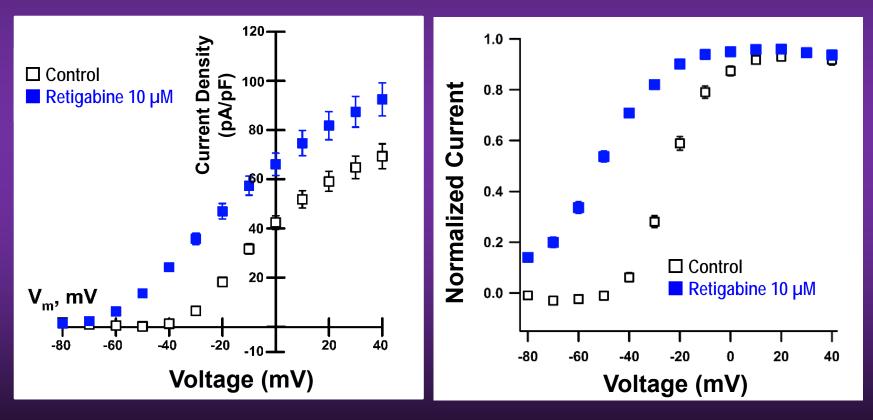


Pharmacological Effects of Retigabine

Expression of WT KCNQ2 in KCNQ3 stable CHO cells

Current-voltage

Activation



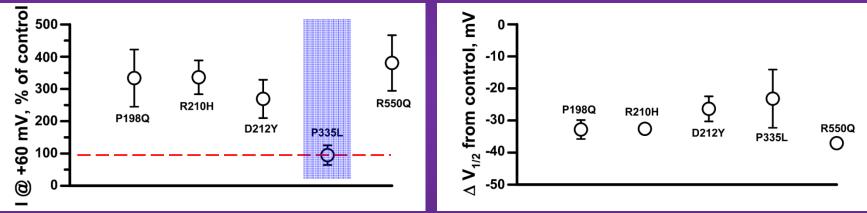
KCNQ2 Variant Responses to Retigabine

Expression of KCNQ2 variants in KCNQ3 stable CHO cells

Response to 10 µM retigabine

Peak current (% control)

Activation ∆V_{1/2}



Not all KCNQ2 variants respond to retigabine

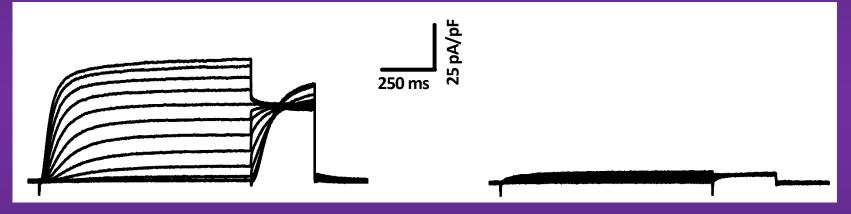
KCNQ2 Variant Responses to Retigabine

Expression of KCNQ2 variants in KCNQ3 stable CHO cells

KCNQ2-R144Q

Control

Retigabine 10 µM



Not all KCNQ2 variants respond to retigabine

KCNQ2 Variant Responses to Retigabine

Expression of KCNQ2 variants in KCNQ3 stable CHO cells

	%WT	Δ V 1⁄2		%WT	Δ V 1⁄2		%WT	Δ V 1⁄2		%WT	$\Delta V^{1/2}$
A43V	155.2%	-29.23	R214W	146.6%	-33.99	Y284D	4.6%	-23.44	M547V	126.2%	-35.19
L81P	51.2%	-26.38	H228R	5.2%	-32.41	Y284H	44.5%	-28.37	R550Q	52.0%	-38.39
F104L	179.9%	-23.90	H228Q	12.9%	-19.54	Y284N	13.4%	-33.20	Q555P	58.2%	-39.46
S113F	130.8%	-2.54	H228Y	48.4%	-30.73	R291G	2.5%	-30.29	R557S	117.0%	-27.74
1115L	156.7%	-34.62	1238V	118.0%	-25.71	L292P,L293F	5.2%	-7.71	R573C	73.4%	-34.19
E130K	12.3%	-1.04	L243F	12.4%	-25.78	A294G	40.5%	-32.04	T574S	216.4%	-25.81
R144Q	46.8%	-39.91	T274M	7.9%	-14.96	A294V	4.5%		L606R	79.4%	-29.24
R144W	82.9%	-45.57	T276I	8.6%	-28.06	F305del	1.3%		E632G	193.2%	-26.56
A193D	116.5%	-41.51	T276P	3.5%	-26.90	A306P	9.9%	-27.11	F670del	103.8%	-37.69
A196V	134.8%	-19.14	T277I	3.2%		A306T	56.0%	-25.86	G706S	99.6%	-26.08
R198Q	177.9%	-38.89	1278T	5.0%	-27.84	A306V	6.8%	-24.55	S720L	122.9%	-36.39
R201C	292.2%	-31.74	1278V	77.7%	-40.30	R333Q	218.1%	-14.81	Y724C	199.5%	-30.35
R201H	268.2%	-38.74	G279C	2.9%		R333W	147.2%	-29.59	G725S	211.3%	-23.87
L203P	83.3%	-7.06	G279S	4.4%		Q375E	105.5%	-25.88	R279H	163.5%	-37.35
Q204H	132.6%	-16.48	Y280H	3.6%	-8.14	P410L	70.1%	-39.25	T740I	79.2%	-31.23
R207Q	208.1%	-14.72	G281R	2.7%		A472V	76.6%	-40.98	N749T	100.4%	-40.84
R207W	198.6%	-1.02	G281W	3.7%		E484D	142.3%	-28.25	V762L	104.4%	-34.83
R210H	88.6%	-14.15	D282E	4.5%	-21.85	V512M	82.7%	-33.47	R823C	131.2%	-41.35
D212G	62.4%	-20.08	D282H	2.5%	-16.85	R529W	66.3%	-42.92	T826I	160.5%	-29.96
D212Y	37.9%	-26.45	Y284C	66.7%	-30.81	V536D	53.2%	-29.75	G827S	100.8%	-32.11

Retigabine 10 µM

Response

Non-response

Summary

- KCNQ2 channelopathy is an important cause of monogenic epilepsy
- Many KCNQ2 variants have unknown clinical significance
- Automated patch clamp can decrypt variants of unknown significance
- Loss of function KCNQ2 variants are not all retigabine responsive
- Functional studies may help classify KCNQ2 VUS

Acknowledgments



CHANNELOPATHY-ASSOCIATED EPILEPSY **RESEARCH CENTER**



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