

# Long-term amiodarone exposure augments late sodium current via PI3K/Akt signaling

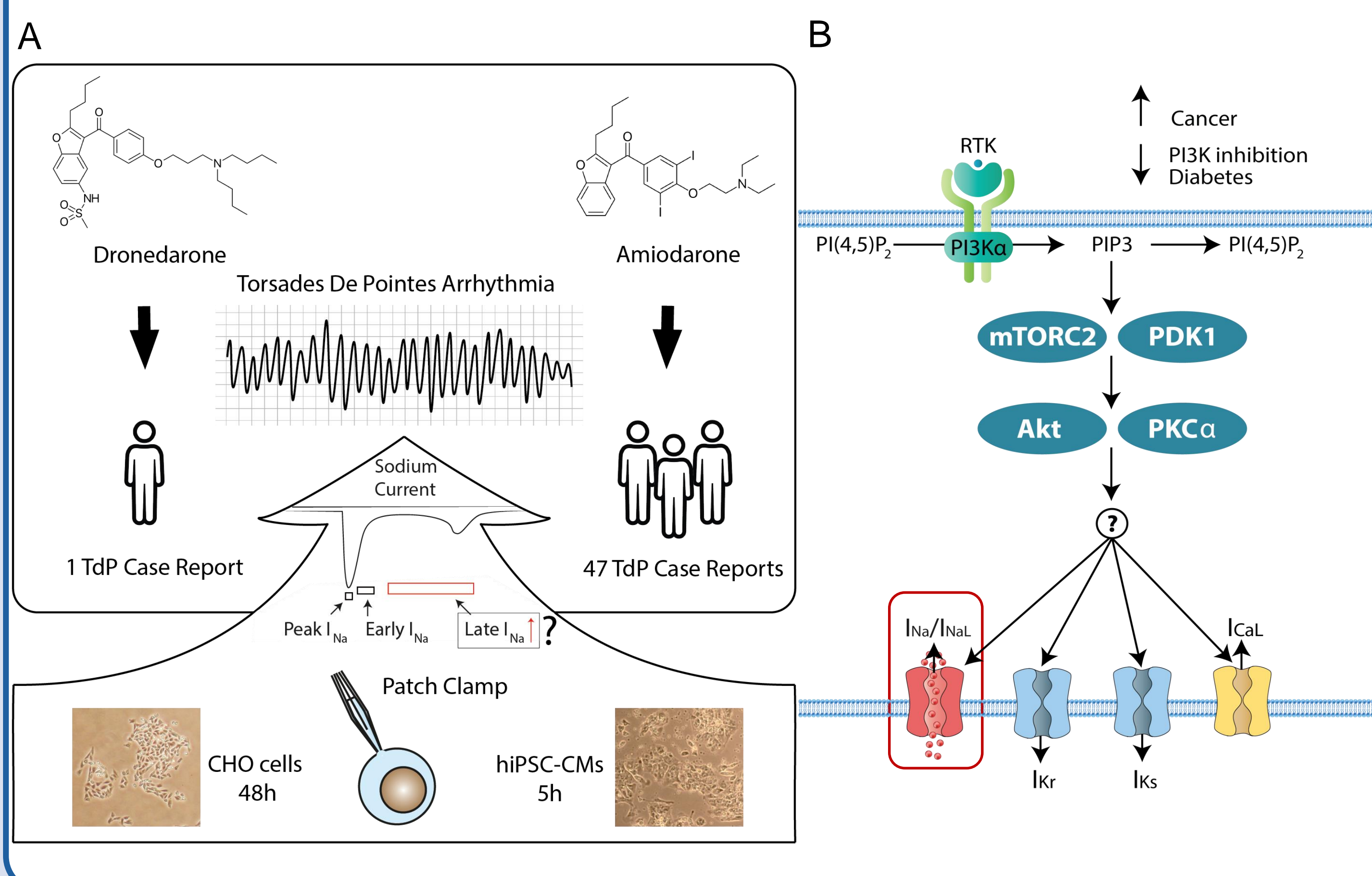
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## Background

- Amiodarone is an effective antiarrhythmic drug (AAD) with distinct acute and long-term electrophysiological effects. Dronedarone was developed as a less-toxic alternative (Fig. 1A), but its differential acute and long-term effects compared to amiodarone remain largely unknown.
- We aimed to investigate the mechanism distinguishing distinct long-term electrophysiological effects between these drugs. As a potential mechanism, we focused on inhibition of PI3K signaling, which has been shown to affect multiple cardiac ion currents including the late sodium current ( $I_{NaL}$ ; Fig. 1B).

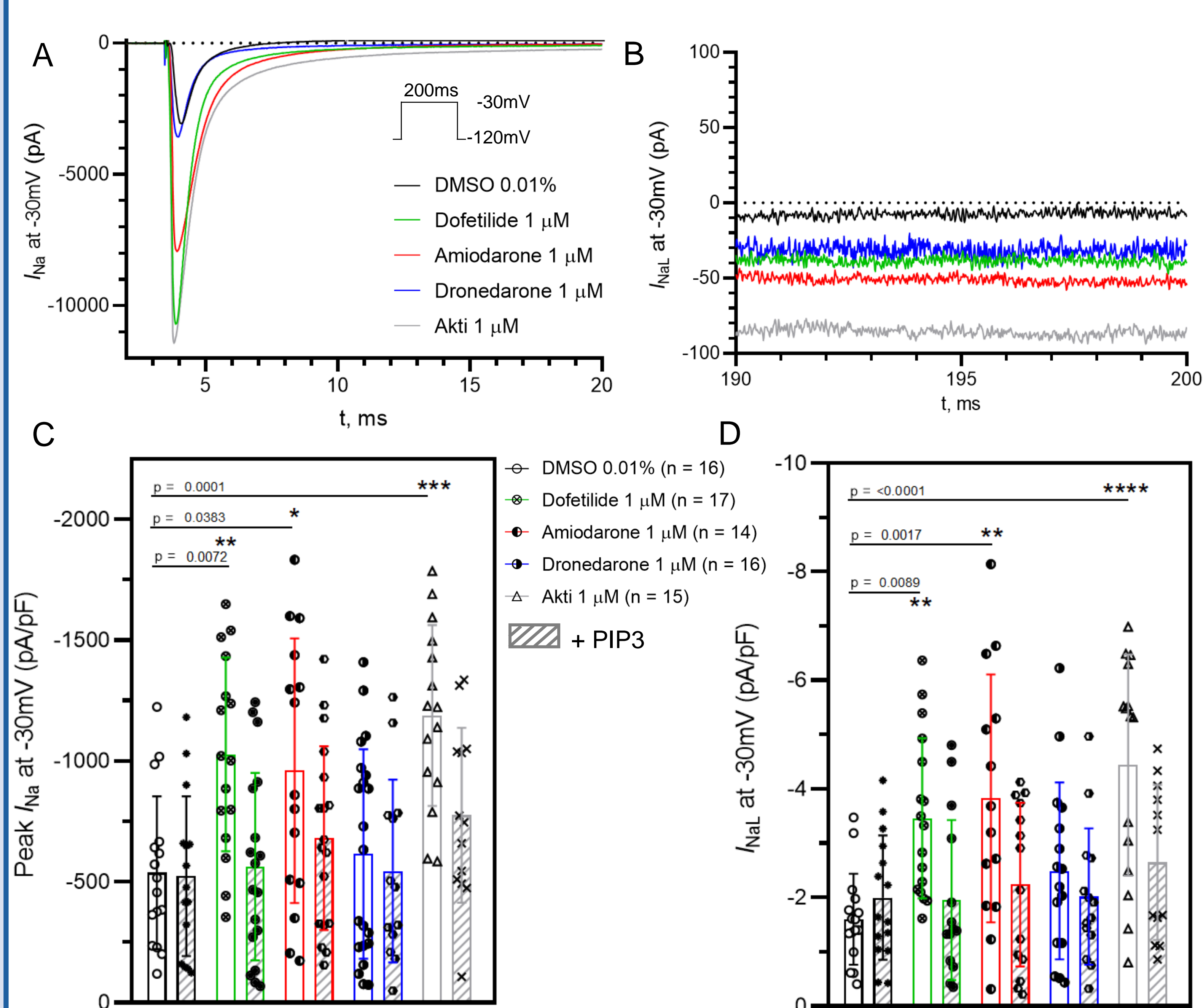
Figure 1: Differential effects of amiodarone versus dronedarone on ion channels via effects on PI3K signaling



## Methods

- Membrane currents were measured using the whole-cell patch-clamp technique in Chinese Hamster Ovary (CHO) cells transiently transfected with plasmid carrying wild-type SCN5A and GFP-protein, or in human induced pluripotent stem-cell derived cardiomyocytes (hiPSC-CMs).
- Peak  $I_{Na}$  and tetrodotoxin (TTX)-sensitive  $I_{NaL}$  currents were measured at room temperature. Cells were incubated with different AADs or Akt inhibitor (Akti 1  $\mu$ M) for 5 hours (hiPSC-CMs) or 48 hours (CHO) at 37°C.

Figure 2: Chronic exposure to amiodarone augments  $I_{NaL}$  in CHO cells via Akt



## Results

- Long-term inhibition of Akt (48 h) in CHO cells augmented both peak  $I_{Na}$  (Fig. 2A, C) and  $I_{NaL}$  (Fig. 2B, D). The latter was fully abolished by PI3K pathway activation with intrapipette phosphatidylinositol (3,4,5)-trisphosphate (PIP3; Fig. 1B; Fig. 2C, D).
- Dofetilide and amiodarone increased peak  $I_{Na}$ , by 1.9 and 1.8 fold (Fig. 2C), respectively, and  $I_{NaL}$  by 2.2 and 2.4 fold (Fig. 2D), compared to control, albeit, to a lesser degree than Akti. This  $I_{Na}/I_{NaL}$  increase was fully abolished by PIP3 (Fig. 2C, D).
- Dronedarone had no significant effect on peak  $I_{Na}$ , nor  $I_{NaL}$  and showed no significant changes with PIP3 present.
- In CHO cells, all tested drugs, except for dronedarone, increased current density in I-V relationship (Fig. 3A). By contrast, dronedarone, dofetilide and Akti induced faster channel reactivation (Fig. 3B), whereas amiodarone had opposite effects, increasing refractoriness. A rightward shift in voltage dependence of inactivation was observed for all drugs (Fig. 3C), whereas voltage-dependent activation was only significantly altered for dofetilide (Fig. 3D).
- In hiPSC-CMs, amiodarone also increased peak  $I_{Na}$  and  $I_{NaL}$  currents (Fig. 4A-C) after 5 hours of exposure.

Figure 3: Chronic dronedarone does not increase  $I_{Na}$  unlike amiodarone in CHO

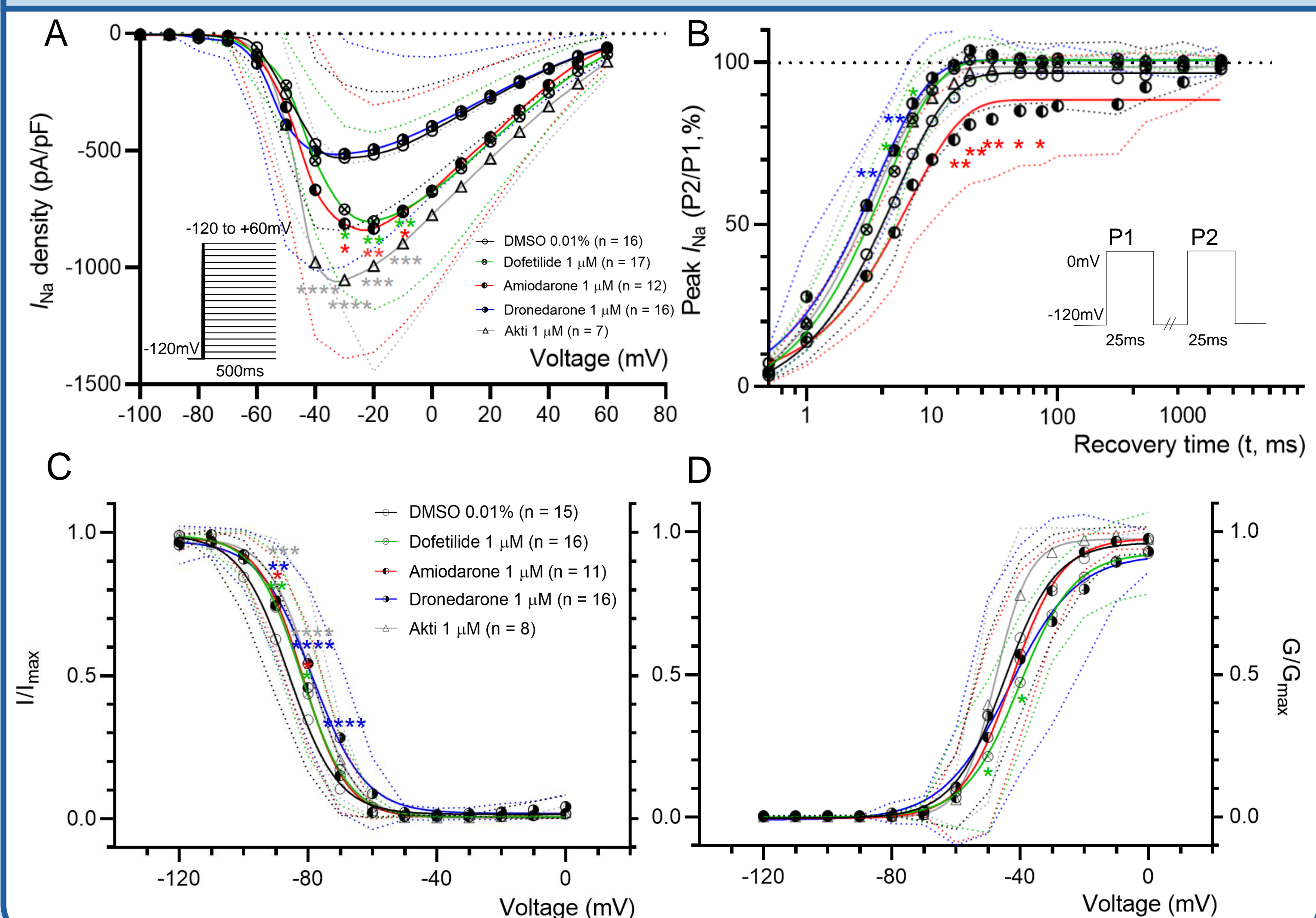
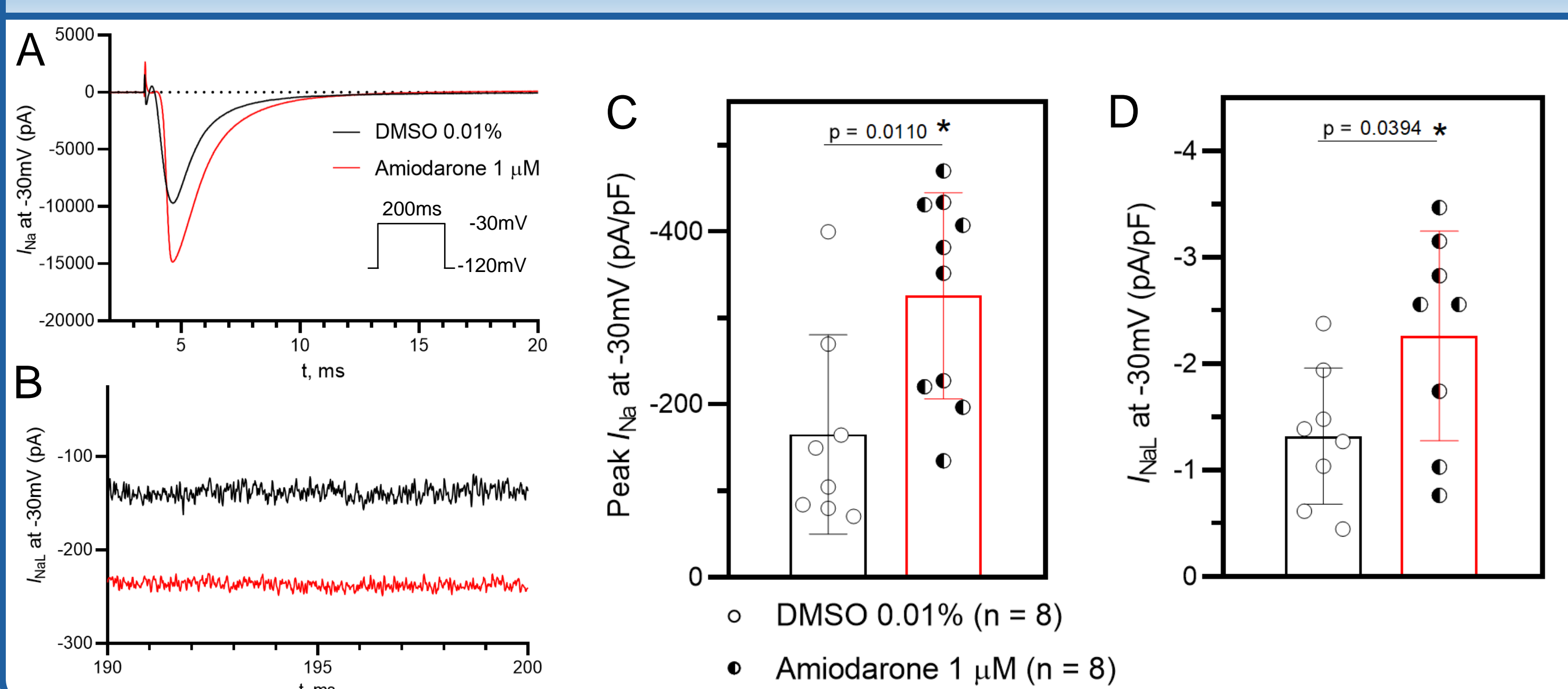


Figure 4: In hiPSC-CMs amiodarone increases  $I_{Na}$  and  $I_{NaL}$  after 5h treatment



## Conclusions

- Inhibition of PI3K/Akt signaling contributes to the increase in  $I_{NaL}$  induced by long-term treatment with amiodarone or dofetilide (Fig. 2B, D).
- Dronedarone did not augment  $I_{NaL}$  and might therefore be considered a safer treatment option in proarrhythmia-susceptible patients.
- The differential long-term effects of amiodarone and dronedarone on  $I_{NaL}$  could contribute to the higher TdP rates with amiodarone (Fig. 1A).
- Although acute  $I_{Kr}$  block is common for all examined compounds, it is necessary to elucidate long-term drug effects on other ion currents, as observed with  $I_{NaL}$  in this and previous studies.