

Antiepileptic agents



Excessive excitability of neurons in the CNS



Abnormal function of ion channels



Spread through neural networks



Abnormal neural activity leads to abnormal motor activity



Suppression of neural activity and its spread

Controlling neuronal activity



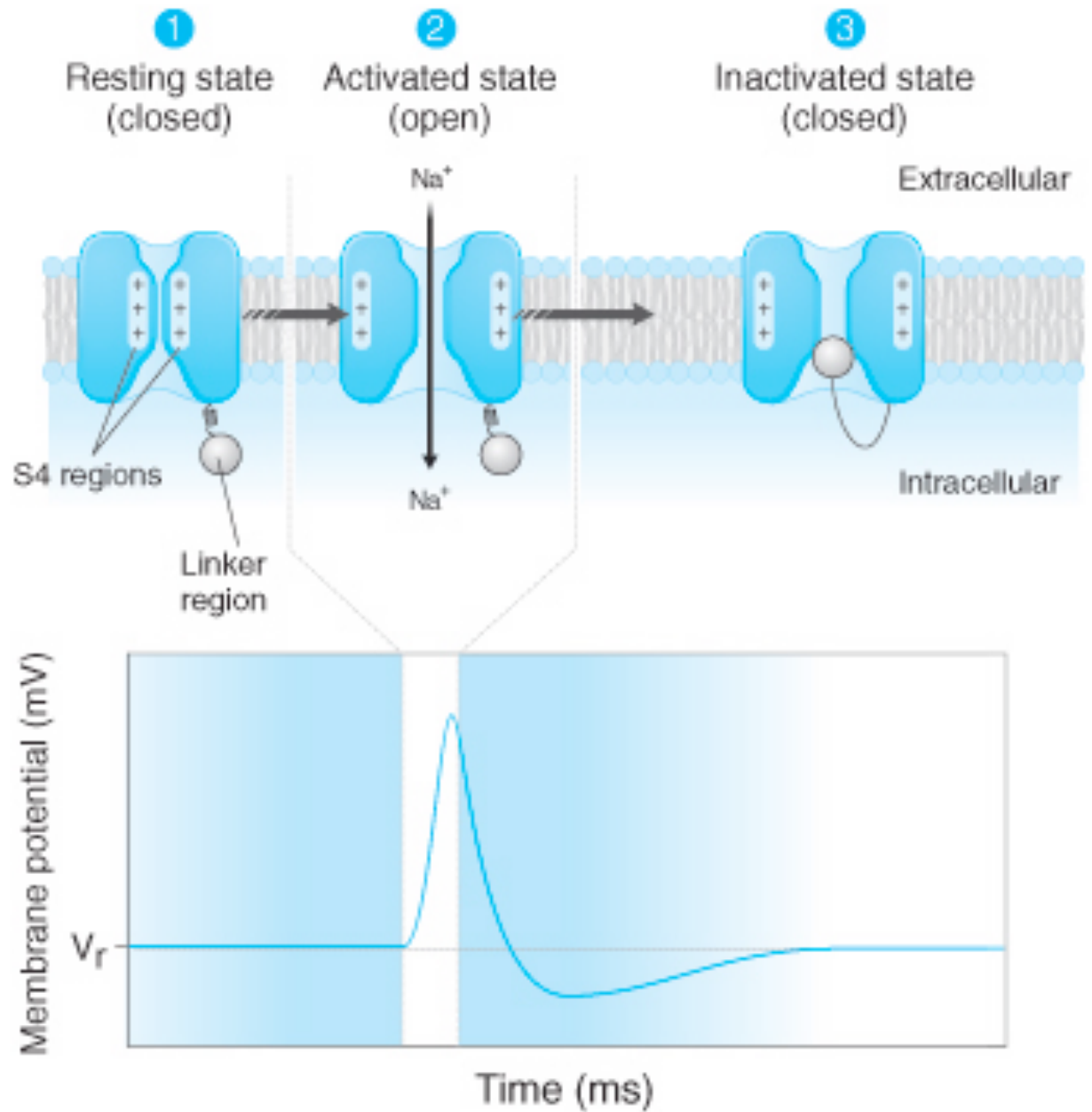
Na⁺ channel activation for excitability



Na⁺ channel inactivation



K⁺ channel activation for hyperpolarization



Intrinsic limitations on neuronal activity

Controlling neuronal activity



The role of neural networks in limiting the spread of activity



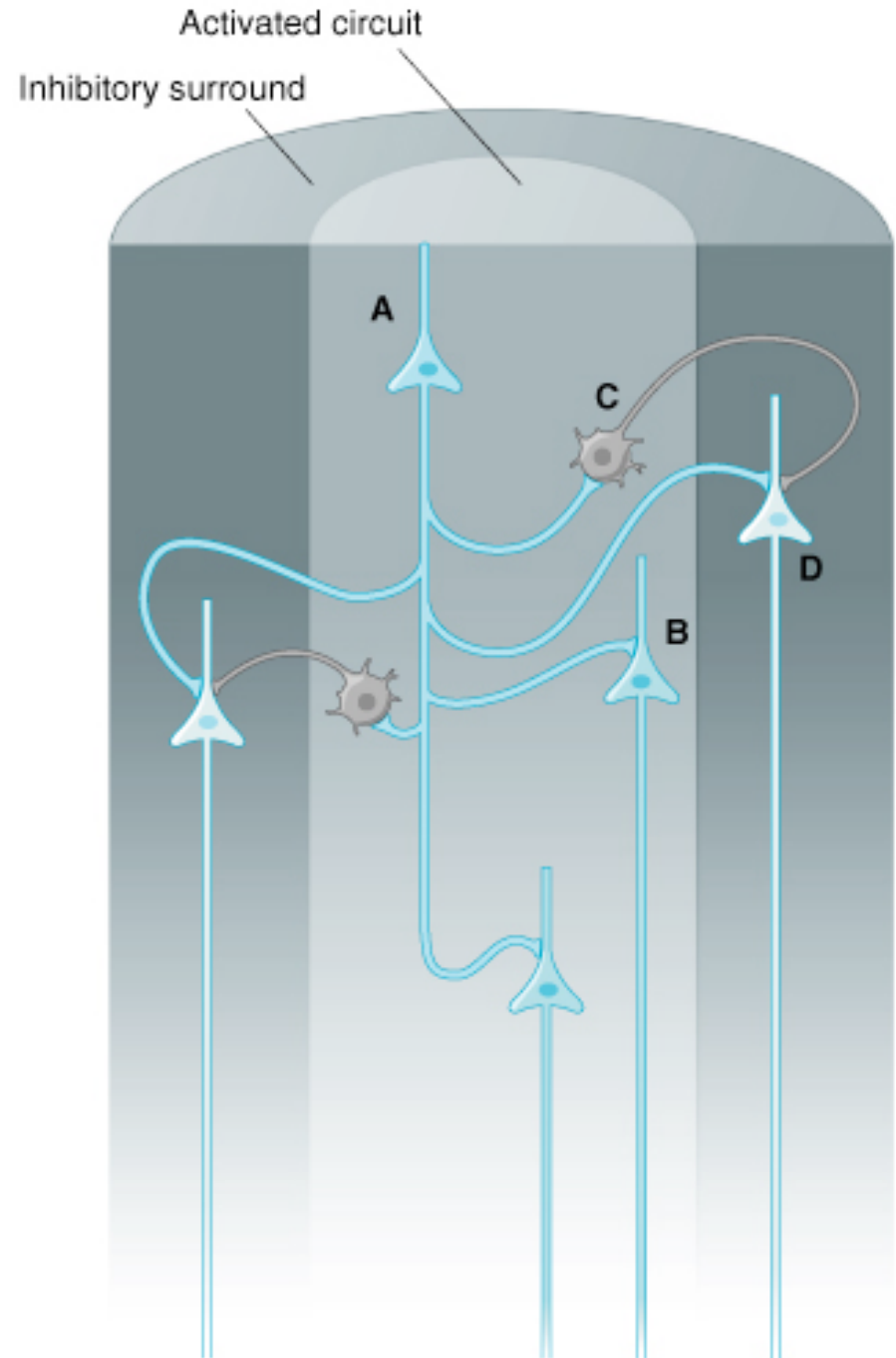
Inhibitory (GABA) signals to surrounding neurons



Surround inhibition



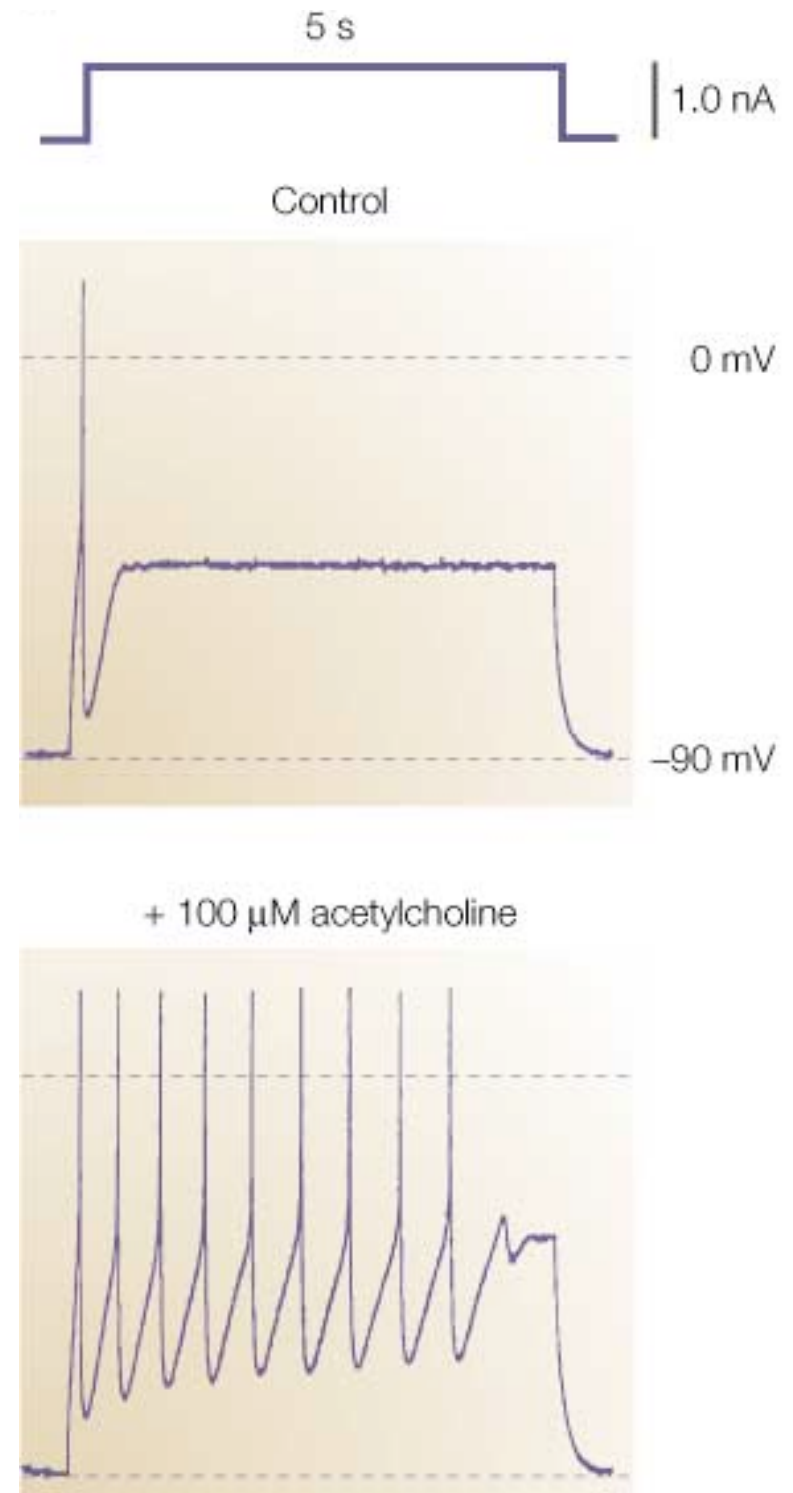
The role of surround inhibition in preventing seizures



Generation of seizures



A focus - a group of neurons with synchronous, high frequency discharge



Pathophysiology of seizures



Synchronization of surrounding neurons



Loss of “Surround Inhibition”



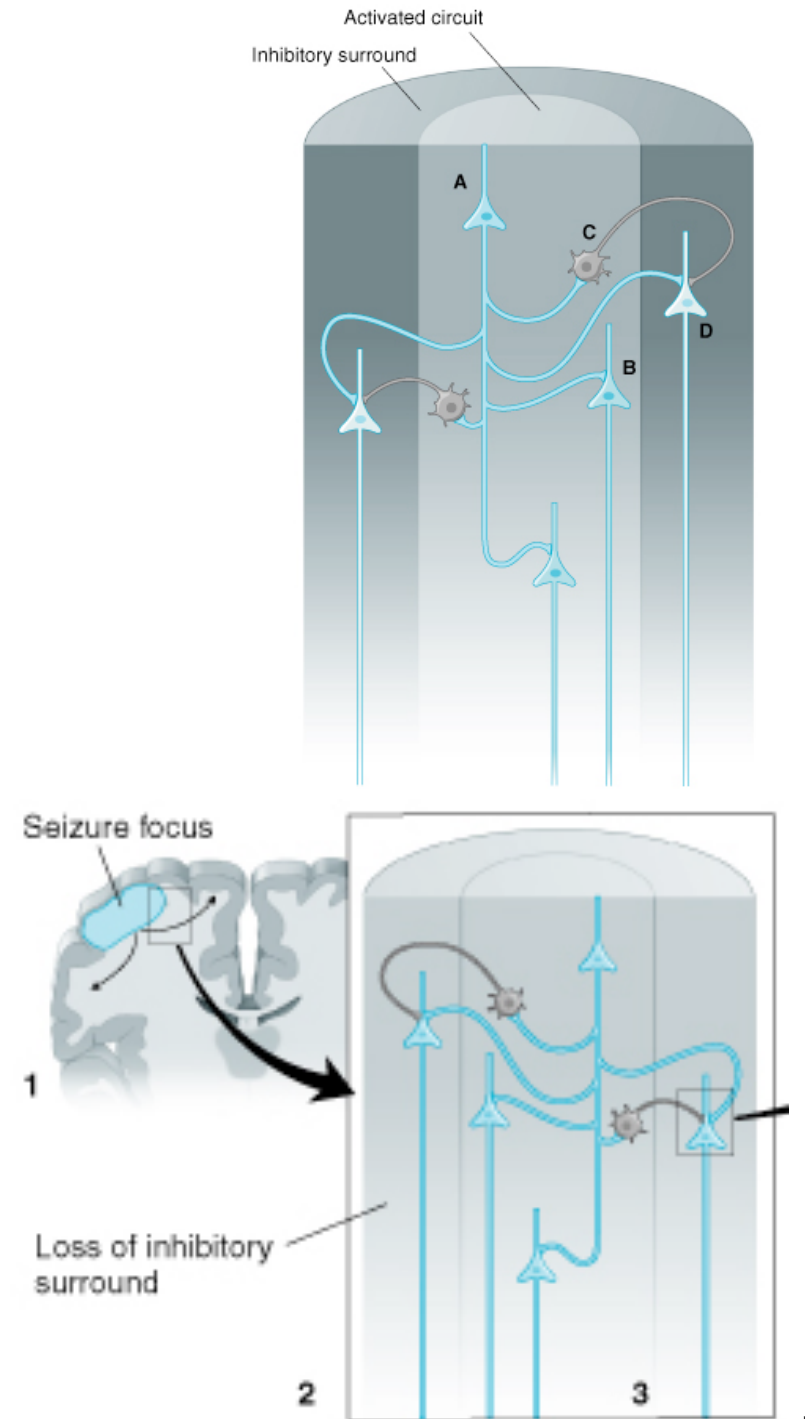
Decrease in GABA-mediated inhibition



Repetitive firing increases extracellular K^+



Depolarization induced opening of NMDA channels -- accumulation of Ca^{2+} in terminals



Generation of seizures



A focus - a group of neurons with synchronous, high frequency discharge



Causes - genetic defects, hypoxia at birth, head trauma, tumor



Dysfunction of ion channels - Channelopathies



Loss of 'Surround Inhibition'



Spread of discharge from the focus to other areas of brain



The nature of seizure depends on the location of the focus and connections of the neurons

Types of seizures

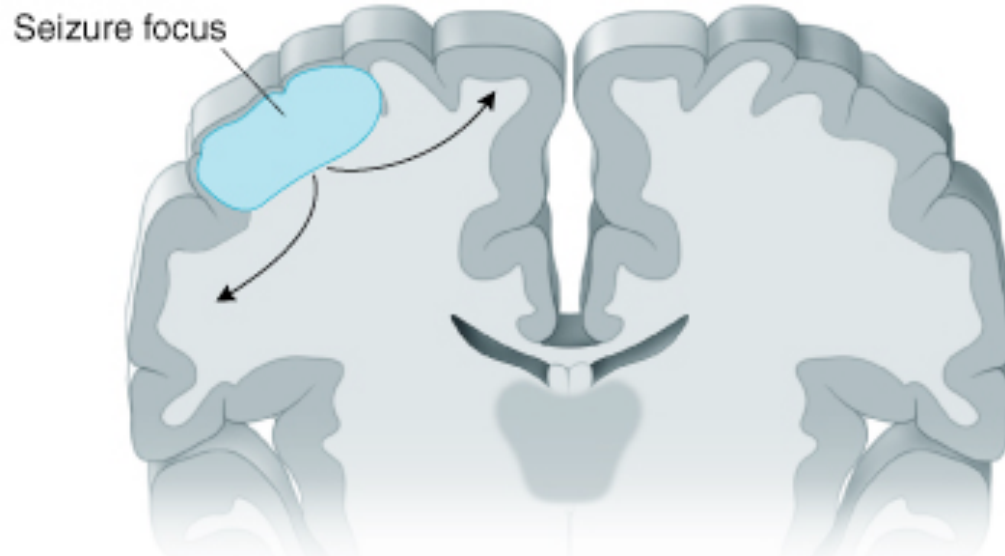


Partial or local seizures - starting at a focus, with limited spread, e.g., in a single limb

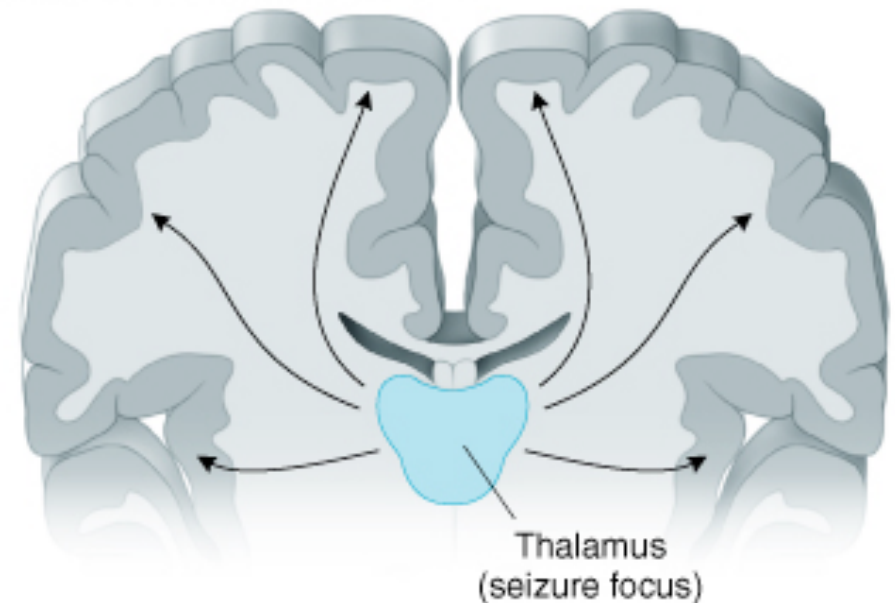


Generalized seizures - widespread seizure activity involving both hemispheres

A Partial seizure



Primary generalized seizure



Partial seizures



Starting at a focus - limited spread



Simple partial - symptoms depend on location of abnormal activity in the brain - Examples:



Involuntary, rapid movement (motor cortex)



Paresthesias (sensory cortex)



Flashing lights (visual cortex)



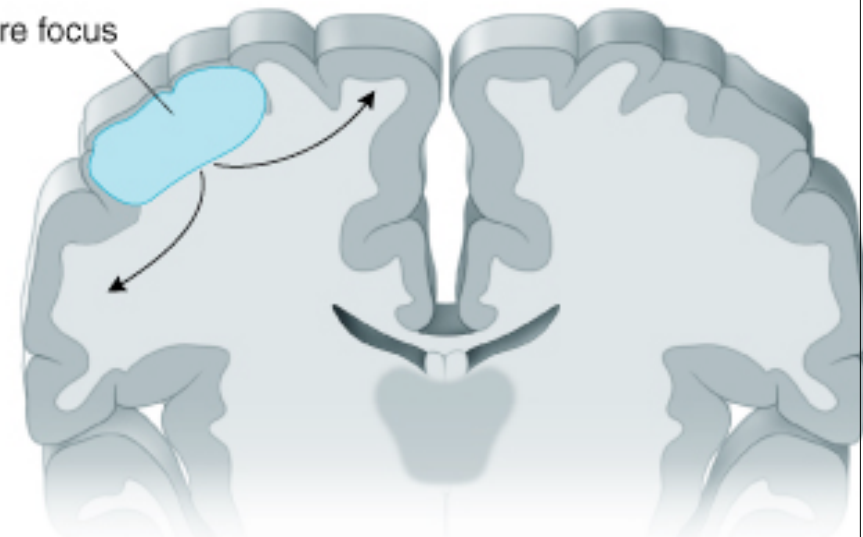
Complex partial - confused behavior and impairment of consciousness



Partial with secondary generalization

A Partial seizure

Seizure focus



Generalized seizures

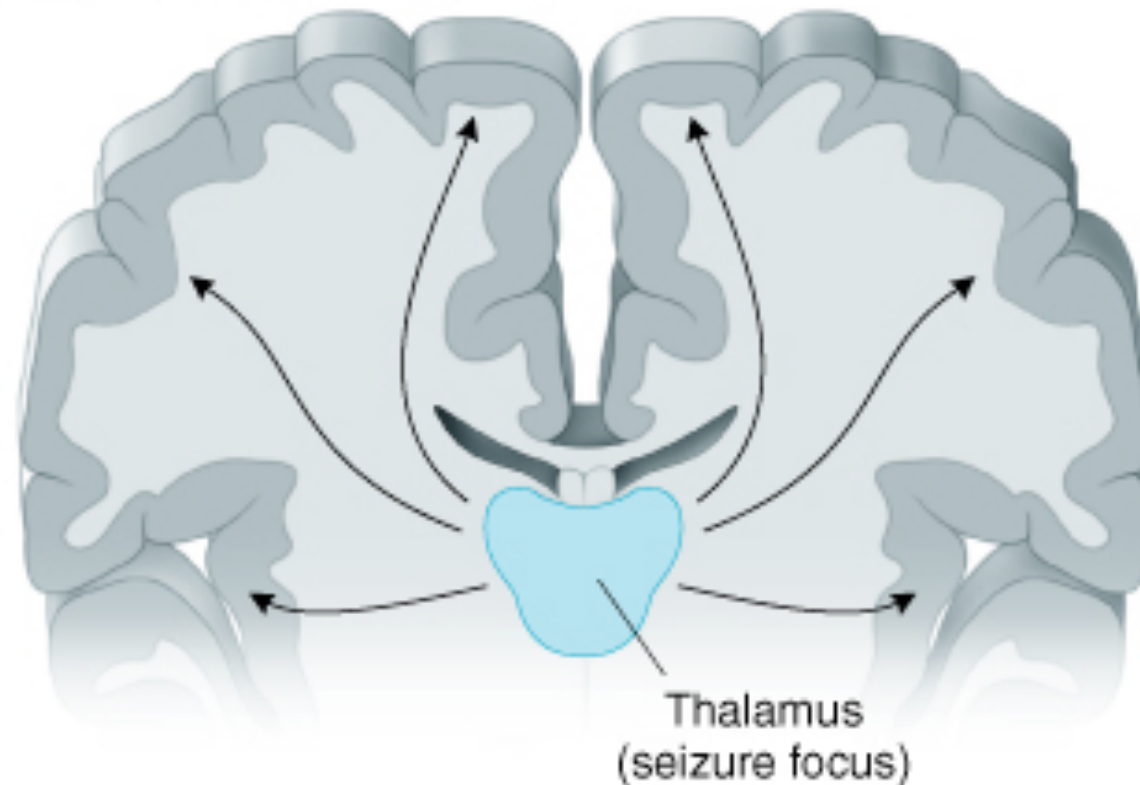


Tonic-clonic seizures (Grand Mal): muscle rigidity followed by synchronous muscle jerks



Myoclonic seizures: sudden muscle contractions

Primary generalized seizure



Generalized seizures



Absence seizures (Petit Mal): Very frequent but brief (10-30 s) episodes of loss of consciousness



Atonic seizures: sudden loss of muscle tone



Febrile seizures: fever-associated seizures in children (6 months - 5 years)



Status epilepticus: seizure activity that persists for a long time

Secondary generalization of partial seizures



For sufficiently strong focal activity - spread to neighboring regions of the cortex

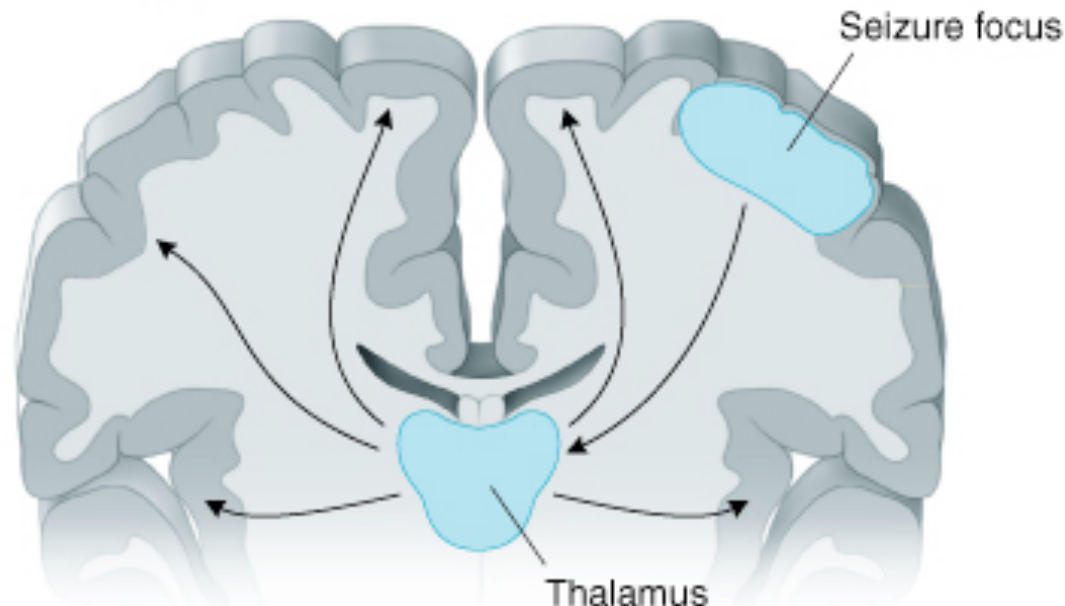


Spread between hemispheres via Corpus Callosum



Thalamocortical projections for spread to various regions of the brain

Secondary generalized seizure



Action of antiepileptic drugs



Suppression of neuronal discharge within the focus



Suppression of propagation of seizure activity

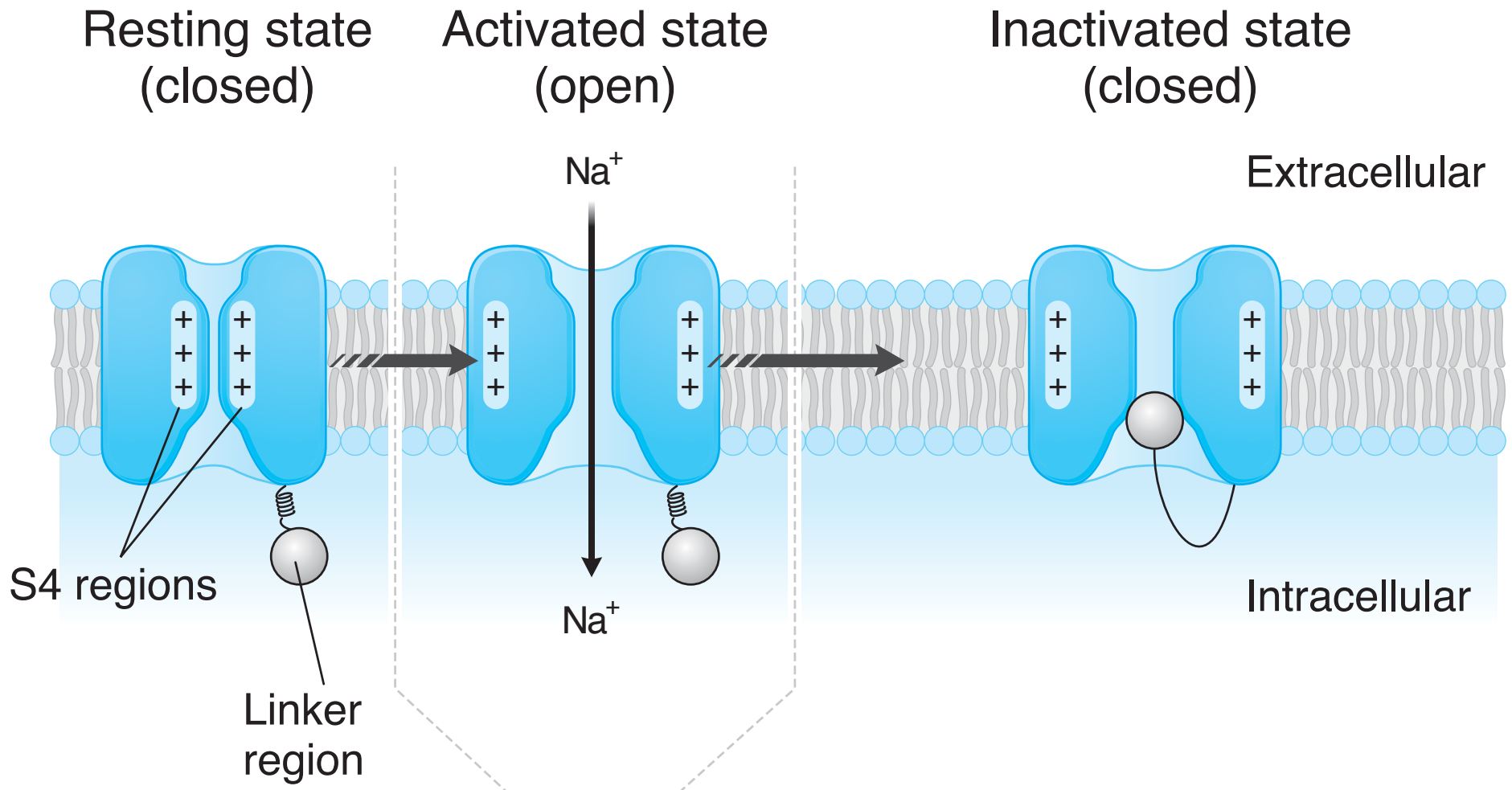
Suppression of sodium influx



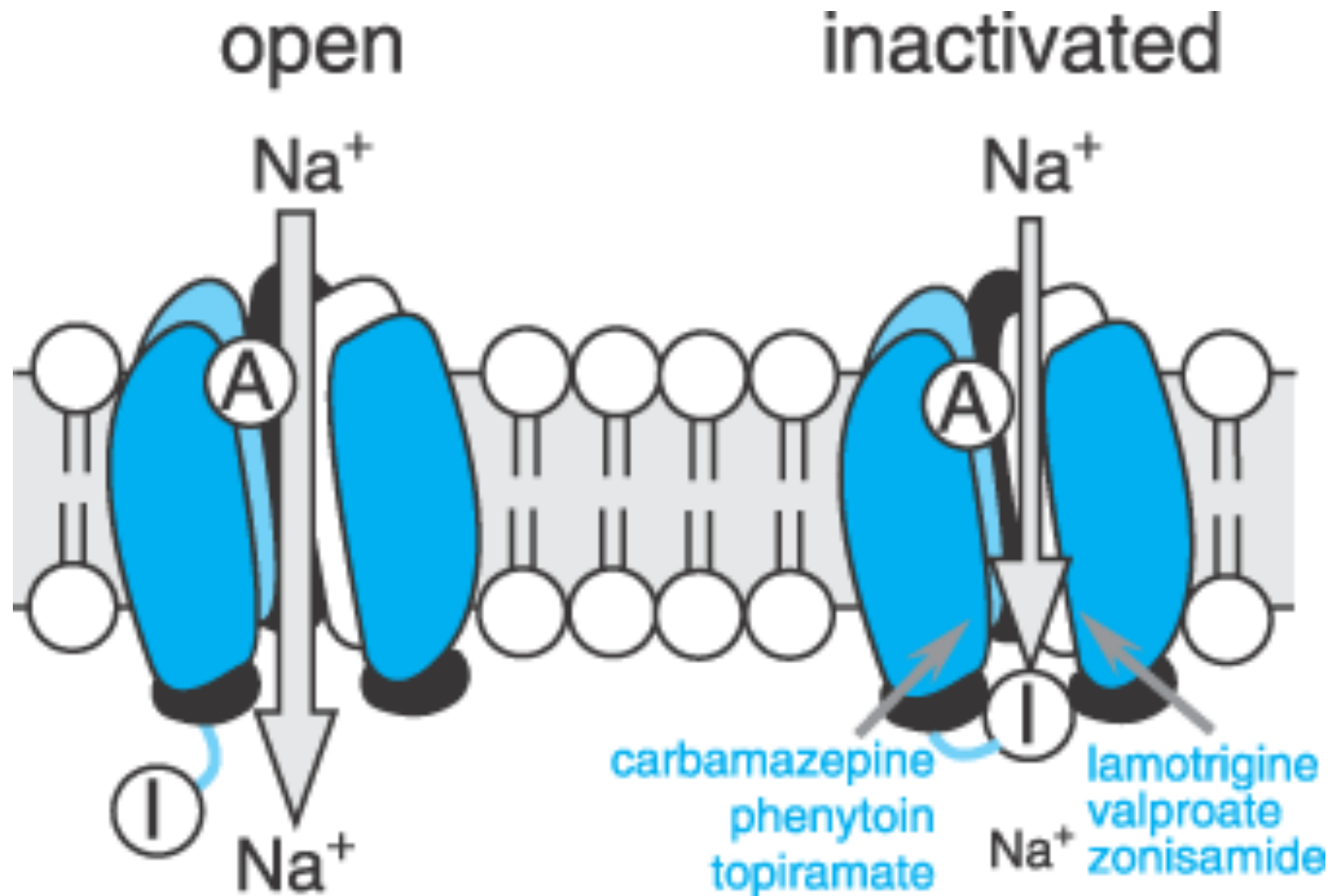
These drugs suppress sodium influx through voltage-gated Na^+ channels, reducing excitability



Closed, open and inactivated states



Enhanced Na⁺ channel inactivation



Prolongation of Na⁺ channel inactivation



Quick recovery from inactivation in normal neurons



Prolongation of inactivated state by drugs

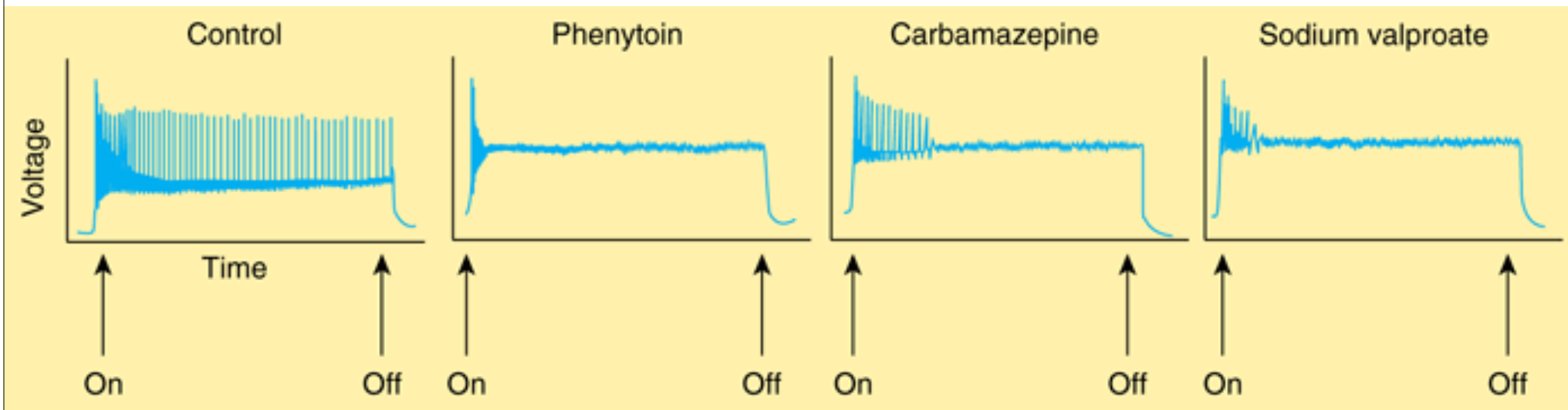


Resultant suppression of high frequency discharge



Phenytoin, carbamazepine, valproate, lamotrigine

Effect on neuronal excitability



Source: Katzung BG, Masters SB, Trevor AJ: *Basic & Clinical Pharmacology*, 12th edition: www.accessmedicine.com

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Suppression of Ca²⁺ influx



Voltage-gated Ca²⁺ channels, influx, excitability



Voltage-gated T-type Ca²⁺ channels in absence seizures



Inhibition of voltage-gated T-type Ca²⁺ channels by drugs

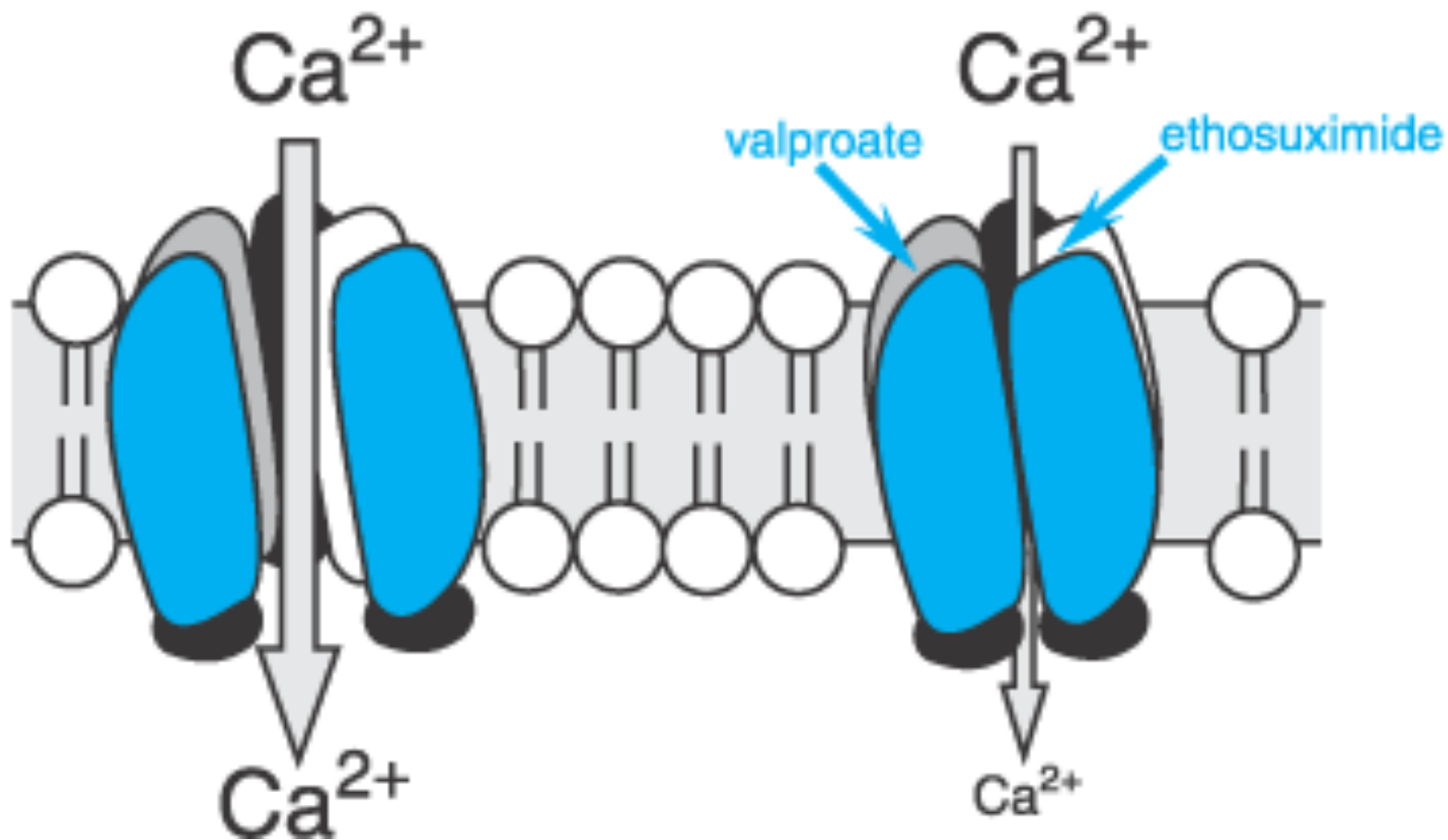


Resultant suppression of high frequency discharge



Valproate, ethosuximide

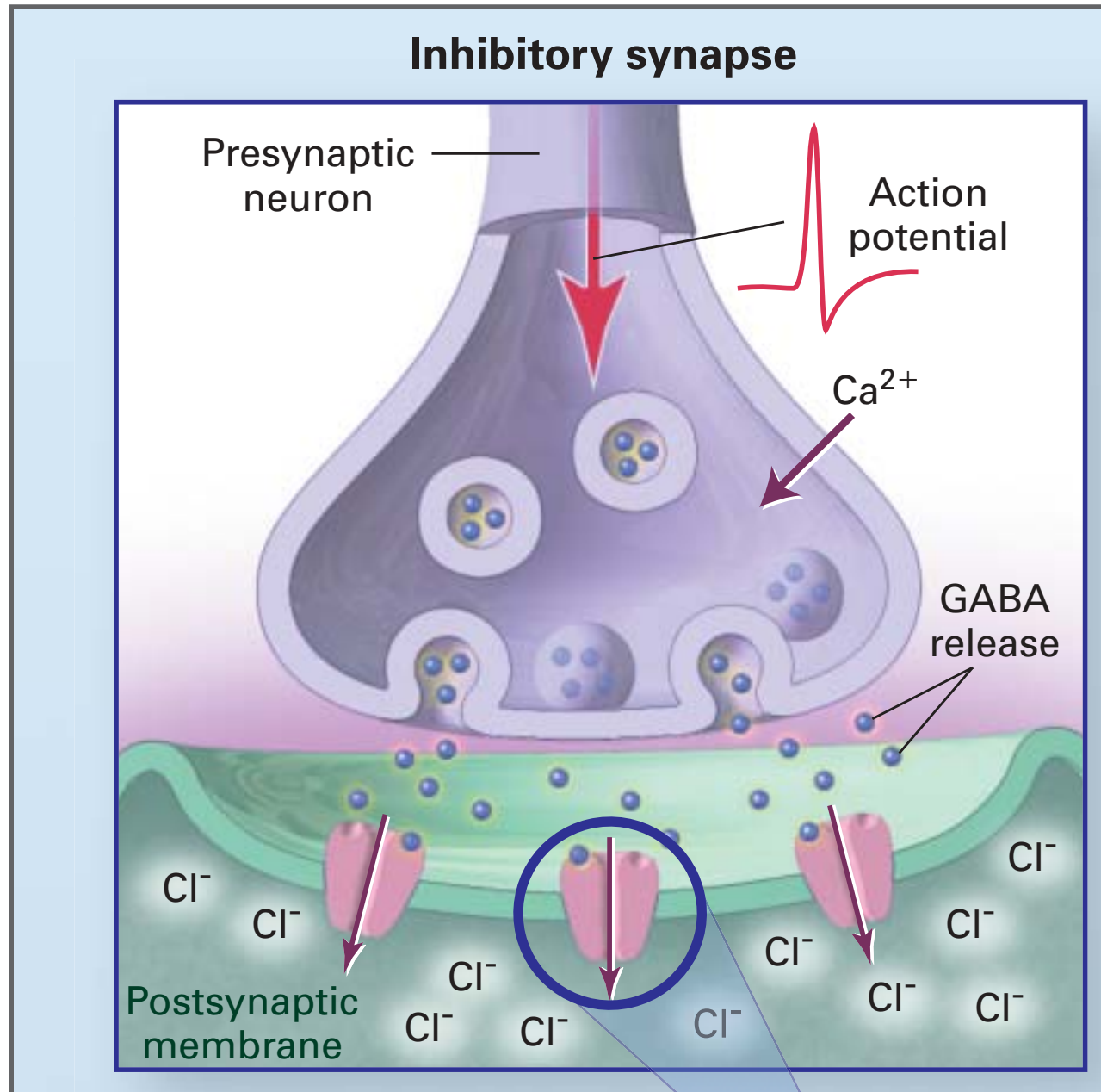
Reduced Ca²⁺ current



Potentialiation of GABA action



GABA as an inhibitory neurotransmitter



Potentiation of GABA action



GABA as an inhibitory neurotransmitter



Increased GABA action by binding directly to GABA receptors - benzodiazepines and barbiturates

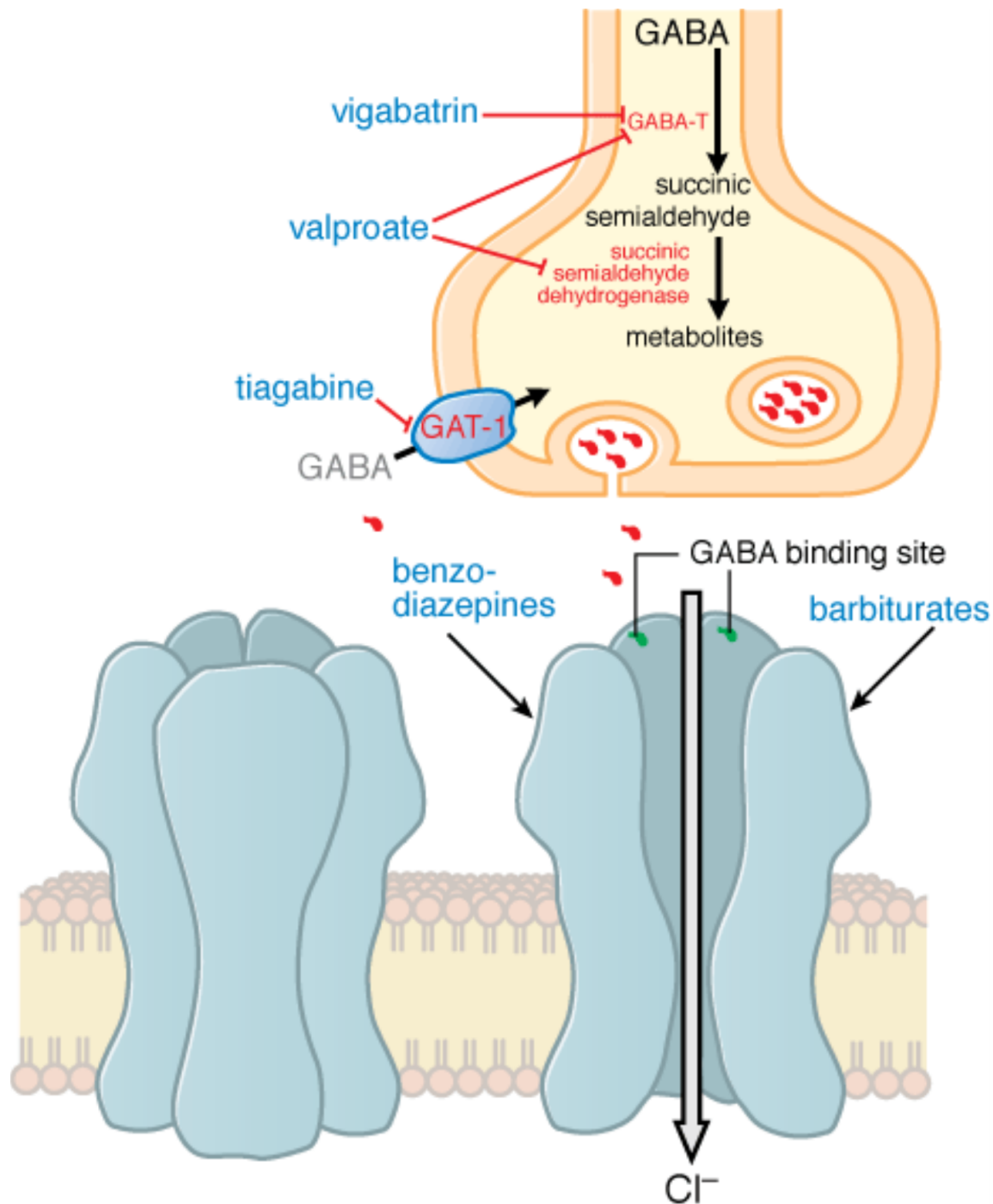


Increased GABA action by prolonging presence of GABA in the synapse - tiagabine



Increased GABA action by inhibiting the enzyme that degrades GABA - vigabatrin

Enhanced GABA synaptic transmission



Objectives of the lecture on Abnormal Electric Activity and Antiepileptic Drugs are to understand:



the role of abnormal electric activity in generating epileptic phenomena



the role of ion channels and receptors in generating and spreading abnormal electric activity



the role played by inhibitory neural circuits in preventing the spread of abnormal neuronal activity



various types of seizures



approaches to suppress abnormal electric activity and its spread through neural networks



antiepileptic drugs and the mechanisms underlying their action