IDENTIFICATION OF EPILEPSY MODIFIER GENES IN A MOUSE MODEL

By

Nicole Alise Hawkins

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Approved:

Jennifer Kearney, Ph.D.

Alfred George, Ph.D.

E. Michelle Southard-Smith, Ph.D.

Douglas Mortlock, Ph.D.

To my parents, for their endless support

and

To my husband, who fulfills my life, one giggle at a time

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LIST OF ABBREVIATIONS

General Abbreviations

The major pore forming subunit of a channel
The auxiliary subunit of a channel
129/SvJ Strain
Analysis of variance test
C57BL/6J Strain
Bacterial artificial chromosome
Benign familial neonatal-infantile seizures
Base pair
Calcium
Domain 1-4, homologous domains in sodium channel α subunit topology
DBA/2J
Electrocorticography
Electroencephalography
Ethylnitrosourea
Outcross between two different inbred strains
Fragments per kilobase of exon per million fragments mapped
Gamma-Aminobutyric acid
Genetic epilepsy with febrile seizure plus
Generalized tonic-clonic seizure

IGE	Idiopathic generalized epilepsy
ISC	Interval-specific congenic
K+	Potassium
lncRNA	Long non-coding RNA
LOD	Logarithm of the odds
LVA	Low voltage activated calcium current
Mb	Megabase
MIT	Microsatellite markers
Moel	Modifier of epilepsy 1, chromosome 11
Moe2	Modifier of epilepsy 2, chromosome 19
n	Number
ncRNA	Non-coding RNA
NS	Non-synonymous
Р	Postnatal Day
PAR bZIP	Proline and acidic amino acid-rich basic leucine zipper
PDXK	Pyridoxal kinase
PLP	Pyridoxal 5' phosphate
PLSD	Fisher's protected least significant difference post hoc test
QTL	Quantitative trait locus
RIN	RNA Integrity number
S1-S6	Transmembrane segment 1-6
SJL	SJL/J Strain
SNPs	Single nucleotide polymorphisms

SUDEP	Sudden unexplained death in epilepsy
SWDs	Spike-wave discharges
TGF-β	Transforming growth factor β
TSS	Transcription start site
VCF	Variant call format

Common Gene Abbreviations

CACNA1G, Cacna1g	Human, Mouse: Calcium channel, voltage-dependent, T type, α 1G subunit
CACNB1, Cacnb1	Human, Mouse: Calcium channel, voltage-dependent, β 1 subunit
HLF, Hlf	Human, Mouse: Hepatic leukemia factor
KCNQ2, Kcnq2	Human, Mouse: Potassium channel, voltage-gated, KQT-like subfamily, member 2
KCNV2, Kcnv2	Human, Mouse: Potassium channel, subfamily 5, member 2
SCN1A, Scn1a	Human, Mouse: Sodium channel, voltage-gated, type 1, α subunit
SCN1B, Scn1a	Human, Mouse: Sodium Channel, voltage-gated, type 1, β subunit
SCN2A, Scn2a	Human, Mouse: Sodium channel, voltage-gated, type 2, α subunit
SCN3A, Scn3a	Human, Mouse: Sodium channel, voltage-gated, type 3, α subunit
SCN8A, Scn8a	Human, Mouse: Sodium channel, voltage-gated, Type 8, α subunit
SCN9A, Scn9a	Human, Mouse: Sodium channel, voltage-gated, type 9, α subunit

Mouse Alleles

1G5	Cacnalg Transgenic mouse
1G5;Q54	Double mutant 1G5 and <i>Scn2a</i> ^{Q54}

- ISC-A B6-derived chromosome 11 segment 81-104 Mb on congenic SJL strain
 ISC-B B6-derived chromosome 11 segment 81-93 Mb on congenic SJL strain
 ISC-C B6-derived chromosome 11 segment 93-104 Mb on congenic SJL strain
- ISC-D B6-derived chromosome 11 segment 89-104 Mb on congenic SJL strain
- Q54 $Scn2a^{Q54}$

CHAPTER I

INTRODUCTION

Epilepsy

Epilepsy is a common neurological disease defined as experiencing two or more unprovoked seizures separated by at least 24 hours (1, 2). While seizures differ in cause, severity and regions of brain involvement, all result from abnormal excessive or synchronous neuronal activity (3). Epilepsy is considered a spectrum disorder with more than 25 associated epilepsy syndromes, ranging from the severe, debilitating Dravet and Lennox-Gastaut syndromes to mild and treatable conditions, such as GEFS+ (Genetic Epilepsy with Febrile Seizure Plus) and absence epilepsies (4-6).

Epilepsy currently affects approximately 3 million Americans of all ages and 1% of the worldwide population (7). Two-thirds of patients diagnosed with epilepsy have no known cause for their disease, however recent evidence suggests most result from complex genetic interactions (8, 9). Roughly 20 years of research has resulted in major advancements in identifying genes that contribute to the monogenic epilepsies. The genes identified are components of neuronal signaling, including nicotinic acetylcholine and GABA receptors, chloride channels and voltage-gated potassium and sodium channels (10). Identification of these genes provides clues about the etiology of common epilepsy syndromes with more complex inheritance.

Voltage-Gated Sodium Channels

Voltage-gated sodium channels are responsible for the initiation and propagation of action potentials and are vital regulators of neuronal excitability. Voltage-gated sodium channel brain complexes were identified as a single α subunit associated with auxiliary β subunits (11). The α structure contains four homologous domains (D1-D4), each consisting of six α -helical transmembrane segments (S1-S6) (12). S4 of each domain is positively charged and contains the voltage sensors of the complex, which initiate channel activation (Figure 1.1) (13-19). Furthermore, there is evidence of S4/D4 having a unique role in inactivation (12, 16, 20). The β subunits (β 1- β 4) are single transmembrane segments that modulate voltage dependence, kinetics and localization of the α subunits (21, 22). The α subunits primarily expressed in the brain are encoded by *SCNIA*, *SCN2A*, *SCN3A* and *SCN8A* (12, 23-25). *SCNIA* and *SCN3A* channels are located mainly in neuronal cell bodies, *SCN2A* channels are localized to dendrites, unmyelinated or pre-myelinated axons and *SCN8A* channels are found in dendrites and the nodes of Ranvier (26-30).



Figure 1.1 Voltage-Gated Sodium Channel Structure Missense and truncation mutations of *SCN1A* and *SCN2A* described in the introduction are indicated.

Voltage-Gated Sodium Channels and Epilepsy

Currently, nearly 900 mutations in SCNIA have been reported in patients with various types of epilepsy, making it the most common cause of monogenic epilepsy (31). Mutations in voltage-gated sodium channels are responsible for several types of human epilepsy, including GEFS+ and Dravet Syndrome, formerly known as Severe Myoclonic Epilepsy of Infancy (10). GEFS+ is a benign, childhood-onset syndrome with autosomal dominant inheritance (OMIM 604233). This familial syndrome is characterized by febrile seizures that persist beyond six years of age and afebrile, generalized seizure types later in life (32, 33). In 1998, the GEFS+ mutation $SCN1B^{C121W}$ was identified in the β 1 subunit gene (34). The effect of this mutation was impaired modulation of the sodium channel α subunit (35). In 1999, linkage analysis of two large families identified a second GEFS+ locus localized to chromosome 2 (36, 37). The nonrecombinant interval contained a sodium channel gene cluster that includes SCN1A, SCN2A, SCN3A and SCN9A. It was found that affected individuals from one family were heterozygous for SCN1A^{R1648H} and affected members from another family were heterozygous for (38). When the $SCN1A^{T875M}$ and $SCN1A^{R1648H}$ SCN1A^{T875M} mutations were heterologously expressed with β 1 and β 2 subunits, both GEFS+ mutations exhibited noninactivating inward sodium currents (39). Additionally, single channel analysis of SCN1A^{R1648H} activity revealed mutants had a higher probability of late channel openings (39). The data suggest that these GEFS+ variants result in gain-of-function mutations caused by defects in sodium channel inactivation, thereby enhancing sodium current. Persistent sodium influx is hypothesized to extend neuronal depolarization, initiate hyperexcitability and increase seizure susceptibility (39).

Dravet syndrome is the phenotype most frequently associated with mutations of *SCN1A* (OMIM 607208) (40). Over 80% of reported *SCN1A* mutations have been identified in Dravet syndrome or its variant, severe myoclonic epilepsy, borderline (SMEB) (31, 40). Approximately 90% of *SCN1A* mutations found in Dravet patients arose *de novo* and nearly half are nonsense, frameshift or splice site mutations resulting in protein truncation (10, 41, 42). This syndrome is characterized by infant-onset generalized clonic, generalized tonic-clonic or hemiclonic seizures, often precipitated by fever. Although development is normal prior to disease onset, progression is often coupled to a severe decline of psychomotor and cognitive development (43, 44). Dravet patients develop other types of seizures, including absence and partial seizures and respond poorly to anti-epileptic drugs.

Recently, seven *SCN1A* variants were identified by exome sequencing of patients with infantile spasms or Lennox-Gastaut (45). These epileptic encephalopathies, like Dravet syndrome, are severe epilepsy disorders characterized by early seizure onset with cognitive and behavioral delays due to regular epileptic activity (45).

A smaller number of mutations have been reported in the other neuronal sodium channel genes *SCN2A*, *SCN3A* and *SCN8A*. *SCN2A* is a paralogous sodium channel gene closely linked to *SCN1A* on chromosome 2. Several missense mutations in *SCN2A* have been detected in patients with Benign Familial Neonatal-Infantile Seizures (BFNIS), GEFS+, Dravet and Ohtahara syndromes (46, 47). Interestingly, recent studies have attributed several *SCN2A* mutations to intellectual disability and autism (48, 49). This is of particular significance as estimates predict epilepsy affects 7-46% of autism spectrum

patients (50-52). Furthermore, epilepsy occurs more often in autism patients who also have an intellectual disability (53).

BFNIS is characterized by the onset of afebrile generalized seizures typically between 2 days and 3.5 months of life, which spontaneously remit by age one (54). Twelve *SCN2A* missense mutations have been found in BFNIS patients (55-60). These BFNIS *SCN2A* mutants exhibit a wide range of functional abnormalities hypothesized to contribute to seizure generation (58-62). Two mutations, *SCN2A*^{R187W} and *SCN2A*^{R1918H}, have been identified in GEFS+ patients (63, 64). Electrophysiological recordings illustrate abnormalities that may be responsible for the hyperexcitability leading to seizures at the neuronal level (64). Seven missense mutations and the nonsense mutation *SCN2A*^{R102X} were all identified in Dravet patients (65-69). Several *SCN2A* Dravet mutations have been expressed in heterologous systems and displayed abnormalities suggestive of epileptiform activities (64, 67, 70).

The $SCN2A^{A263V}$ missense mutation was identified in a set of monozygotic twins with Ohtahara syndrome (47). Ohtahara syndrome is classified as an early onset epileptic encephalopathy, characterized by developmental impairment and devastating seizures starting at birth (71). The Ohtahara diagnosis was based on neonatal seizures and a distinct EEG pattern. Additionally, both twins had brain structure abnormalities, characteristic of a progressive neurodegenerative disease (47). Furthermore, the $SCN2A^{R853Q}$ missense mutation was identified in two unrelated patients, diagnosed with either infantile spasms or Lennox-Gastaut, two epileptic encephalopathies (45).

Five mutations of *SCN3A* have been identified in childhood epilepsy. The missense mutation $SCN3A^{K345Q}$ was found in an individual with partial epilepsy (72).

Functional analysis of *SCN3A*^{K345Q} revealed altered sodium currents providing a pathophysiological basis for the epilepsy linked mutation (73). Our laboratory identified four additional *SCN3A* mutations in a cohort of pediatric patients with cryptogenic focal epilepsy (74). *In vitro* analysis of all four mutations demonstrated significant functional defects including increased levels of persistent current and increased ramp current (74). Alterations in ramp current and persistent current have both previously been indicated in epilepsy related mutations (39, 72, 75-78).

Advances in whole genome sequencing allowed for recent identification of *SCN8A* mutations involved in the severe epileptic encephalopathies. The *SCN8A*^{N1768B} missense mutation resulted in early-onset seizures, autism, intellectual disability, ataxia and sudden unexplained death in epilepsy (SUDEP) (79). The functional consequences of the mutation were evaluated *in vitro*, revealing a remarkable increase in sodium current, incomplete channel inactivation, increased spontaneous firing and firing frequency (79). Two additional missense mutations, *SCN8A*^{G214D} and *SCN8A*^{L875Q}, were identified in patients diagnosed with infantile spasms or Lennox-Gastaut. These *SCN8A* mutations are predicted to increase neuronal excitability, which has previously been implicated in seizure development.

Several microdeletions and duplications of the voltage gated sodium channel gene cluster (2q24) have been identified. Chromosomal deletions of 2q24 have been described in patients who suffer from epilepsy (80-94). A broad disparity in seizure characteristics and diagnosis has been detailed in 2q24 deletions, ranging from infantile spasms, minor convulsions and sporadic myoclonic jerks to generalized tonic-clonic seizures, status epilepticus and Dravet syndrome (83). Five cases of 2q24 duplications have been

implicated in epilepsy. These duplications all resulted in early-onset infantile seizures and global developmental delays (95-99).

Variable Expressivity of Sodium Channel Mutations in Epilepsy

A common feature of inherited epilepsy due to a sodium channel mutation is that family members who carry the same mutation often display a difference in the clinical severity of the disease. This is seen in both GEFS+ and Dravet syndrome. In a GEFS+ family carrying the *SCN1A*^{T875M} mutation, half of the affected family members had only febrile seizures, while the other mutation carriers had more severe types of seizures as adults, including generalized tonic-clonic, absence, atonic and hemicorporeal clonic seizures (37, 38). In another GEFS+ family with the *SCN1A*^{K1270T} mutation, eleven family members had only febrile seizures plus and five family members had evidence of temporal lobe epilepsy (100).

The *SCN2A*^{A263V} mutation implicated in monozygotic twins with Ohtahara syndrome was previously identified in a patient with an epileptic encephalopathy resembling BFNIS (59). While the BFNIS patient had neonatal onset seizures and late onset episodic symptoms, the dramatic characteristics identified in the Ohtahara patients were not observed (47, 59).

In rare cases, Dravet patients have inherited an *SCN1A* mutation from a mildly affected parent (101-103). Gennaro and colleagues described a family in which two siblings with Dravet syndrome inherited the *SCN1A*^{P1748fsX1779} mutation from their mother, who had only a single febrile seizure in childhood (102). Two *SCN1A* truncation mutations have been identified that did not result in Dravet syndrome (104). Instead,

SCN1A^{S662X} and *SCN1A*^{M145fsx148} produced GEFS+ and focal seizures, much milder forms of epilepsy not commonly associated with *SCN1A* truncations (104).

Variable expressivity suggests that other factors in addition to a primary mutation influence the clinical manifestation of epilepsy. This could include stochastic events during development, accumulation of somatic mutations during the lifetime of an individual or environmental insults such as trauma (105). Variation in inheritance of other genetic risk alleles in different family members may also modify the clinical severity of epilepsy.

Epilepsy Models With Sodium Channel Mutations

Several mouse models with seizure-related phenotypes recapitulating GEFS+ and Dravet syndrome have been generated by introducing mutations in voltage-gated sodium channel α subunits. A GEFS+ model was developed by knocking-in the *SCN1A*^{R1648H} mutation into the orthologous mouse gene (106). The *Scn1a*^{tm1.1Aesc} mouse allele is referred to as *Scn1a*^{R1648H}. To study Dravet syndrome, we and others have developed targeted null alleles of *Scn1a* (107, 108). The mouse model *Scn1a*^{tm1Kzy}, a knock-in of the *SCN1A*^{R1407X} mutation, was generated to examine the effects of truncated *Scn1a* (109).

SCN1A^{R1648H} was the first human GEFS+ mutation studied *in vivo*. *Scn1a*^{R1648H/R1648H} homozygous mice experienced premature lethality by postnatal day 26 (P26) (106). Behavioral observations revealed both heterozygous and homozygous mutant animals exhibited spontaneous, generalized seizures that were confirmed by electrocorticography (ECoG) recordings (106). Heterozygous mutant mice were more susceptible to seizure induction by the chemiconvulsant flurothyl and therefore had reduced times to seizure onset (106). Flurothyl-induced seizure thresholds were restored to wildtype levels by administration of the anticonvulsant valproic acid, commonly used to treat GEFS+ patients, validating the knock-in as a model for GEFS+ (106). Electrophysiological analysis revealed cortical GABAergic bipolar interneurons from heterozygous $Scn1a^{R1648H/+}$ and homozygous $Scn1a^{R1648H/R1648H}$ mice displayed reduced total sodium current amplitudes, increased use-dependence and slower recovery from inactivation (106). Additionally, homozygous animals had a significant reduction in action potential firing in these interneurons (106). It is hypothesized that reduced excitability of GABAergic interneurons is a key contributor to seizure generation in the $Scn1a^{R1648H/+}$ GEFS+ model (106).

A Dravet mouse model, $Scn1a^{tm1Wac}$, was generated by disruption of the Scn1a gene. $Scn1a^{KO/KO}$ homozygous null mice exhibited spontaneous seizures and ataxia by P9, with premature lethality by P15 (110). $Scn1a^{KO/+}$ heterozygous mice displayed frequent, spontaneous seizures that were confirmed by ECoG recordings (110). $Scn1a^{KO/+}$ heterozygotes experienced sporadic death beginning at P21, with 40% lethality by the 15th week of life (110). Electrophysiological analysis of isolated neurons revealed a significant reduction of sodium current levels in hippocampal GABAergic interneurons from $Scn1a^{KO/+}$ heterozygous and $Scn1a^{KO/KO}$ homozygous mice (110). GABAergic interneurons also displayed significant decreases in action potential firing, frequency and amplitude in both $Scn1a^{KO/+}$ heterozygous and $Scn1a^{KO/KO}$ homozygous mice (110). These abnormalities are indicative of reduced GABAergic transmission, a major contributor to neuronal hyperexcitability and seizure generation. In addition to the seizure phenotype, $Scn1a^{KO/+}$ heterozygous mice display autism-spectrum features, including

hyperactivity, stereotyped behaviors, social interaction deficits and impaired contextdependent spatial memory (111). SUDEP was also shown to occur in $Scn1a^{KO/+}$ heterozygous mice (112). SUDEP in $Scn1a^{KO/+}$ mice is hypothesized to occur from seizure-induced parasympathetic hyperactivity resulting in lethal bradycardia and electrical dysfunction in the heart (112).

An additional knock-in model of Dravet was generated carrying a premature stop codon recapitulating the human $SCN1A^{R1407X}$ mutation identified in three unrelated patients (101, 109, 113, 114). At P12, homozygous $Scn1a^{R1407X/R1407X}$ mice exhibited tonic-clonic seizures confirmed by ECoG and experienced premature lethality by P21 (109). Heterozygous $Scn1a^{R1407X/+}$ mice developed seizures at P21, with a 40% mortality rate by three months of age, similar to the heterozygous $Scn1a^{KO/+}$ null allele (109).

Our laboratory has developed the mouse model Tg(Eno2-Scn2a1*)Q54Mm with a missense mutation of *Scn2a*, designated *Scn2a*^{Q54} (Q54), which resembles an epilepsy phenotype of human patients. The transgenic Q54 mouse has a gain-of-function mutation [GAL(879-881)QQQ], located in the S4-S5 intracellular linker in D2. Q54 mice have a progressive epilepsy phenotype which begins with brief, focal motor seizures (115). As they age, Q54 mice exhibit more frequent focal seizures, along with secondarily generalized seizures and have a reduced lifespan (115). Recordings of isolated excitatory hippocampal pyramidal neurons from Q54 mice revealed increased persistent sodium current which is hypothesized to contribute to seizure generation by increasing neuronal hyperexcitability (115). Functional studies of several human GEFS+ mutations in heterologous expression systems have also shown increased persistent current of similar magnitude (39, 77, 116). Hippocampal slice recordings from Q54 mice demonstrated

network hyperexcitability during recording of spontaneous and evoked activity, supporting the hypothesis that increased persistent current leads to neuronal hyperexcitability (117).

Genetic Background Influences Epilepsy Models

A common feature of seizure mouse models, including sodium channel mutants, is that seizure frequency and animal survival varies significantly depending on the genetic background of the mouse. This supports the idea of genetic modifiers in epilepsy. Consequently, these models provide a useful system for identifying modifier genes that may also contribute to variable expressivity in human epilepsy patients. Genes that influence a mutant phenotype can be identified systematically by crossing the mutation onto different background strains. Modifier loci have been mapped for several diseases in human and mouse, including cystic fibrosis, long QT syndrome, cancer, retinal, cochlear and motor neuron degeneration, aganglionosis, otocephaly, tremor and dystonia (118-126). Modifier genes have been identified for several of these loci (120, 126-132).

Early studies revealed that there were considerable differences in seizure susceptibility dependent on genetic strain background (133, 134). Ferraro and colleagues demonstrated that genetic factors in C57BL/6J (B6) and DBA/2J (DBA) influence seizure susceptibility, with the B6 strain being far more seizure resistant than the DBA strain to a variety of seizure induction methods (135-140). Genetic mapping approaches identified *Kcnj10*, an inward rectifying potassium channel, as a candidate gene for seizure susceptibility in these two strains (141, 142).

 $Scn1a^{KO/+}$ heterozygotes on the B6 strain have an 80% lethality rate by 13 weeks of age and frequent, spontaneous seizure activity (107). When $Scn1a^{KO/+}$ was bred to and maintained on the 129/SvJ (129) strain, only 10% of heterozygotes died by 15 weeks and seizure activity was not observed (107). Loss of Scn1a is more severe on the B6 strain, suggesting the 129 strain contributes modifier genes that improve the epilepsy phenotype. Also, the $Scn1a^{R1407X}$ mutation was found to be far less penetrate on the 129 strain (109).

Q54 mice on the B6 strain exhibit a low incidence of seizures, with less than 20% having seizures at three months of age and a 75% survival rate to six months of age (143). When B6.Q54 mice are crossed to the SJL/J (SJL) strain, the resulting F1 generation display a high incidence of seizures (>80%) with early onset and only 25% survival to six months of age (143). This observation indicates the SJL strain contributes dominant modifiers which affect the severity of the epilepsy phenotype (143). Genetic mapping was performed which identified two modifier loci responsible for the strain difference: *Moe1* (Modifier of Epilepsy 1) and *Moe2* (143). The voltage-gated potassium channel *Kcnv2* was identified as the modifier gene for *Moe2* (144, 145). Identification and verification of modifier genes in *Moe1* is discussed in Chapters II and III.

Genetic Modifiers of Epilepsy

The idea of genetic modifiers influencing clinical severity is becoming increasingly important for understanding the pathophysiology of inherited disease. Several genes have already been identified in mouse models which alter seizure phenotype and verified in human epilepsy patients (145, 146) Scn8a has been identified as a modifier of Dravet syndrome. The Scn8a^{med-jo} mouse model contains a missense mutation that results in neuromuscular abnormalities, but has increased thresholds to seizure induction (147-152). When Scn8a^{med-jo} heterozygotes were crossed with Scn1a^{KO/+} heterozygotes to generate double heterozygous mutants, the Scn8a^{med-jo} allele was able to rescue reduced seizure thresholds of Scn1a^{KO/+} mice and improve their premature lethality (148). These findings suggest *Scn8a* can improve the severity of the *Scn1a* seizure phenotype.

The calcium channel mutant *Cacna1a*^{1g/tg} recapitulates absence epilepsy and was identified as a modifier of the temporal lobe epilepsy model *Kcna1. Kcna1* mutants lack the Kv1.1 α -subunit of the Shaker-type potassium (K⁺) channels and therefore the loss of K+ channel regulation of action potential firing. *Kcna1^{KO/KO}* null mutants experienced premature lethality with a 26% survival rate to ten weeks of age and frequent, severe, tonic-clonic seizures (153). When *Cacna1a*^{1g/tg} is crossed to *Kcna1^{KO/KO}* nulls to generate double homozygous mutants, 87% of animals survived to ten weeks of age (153). Additionally, double homozygous mutants lacked absence seizures and had a 60% and 80% reduction in tonic-clonic frequency and length of seizure, respectively (153). The modifier effect is hypothesized to be the reduced neurotransmission of *Cacna1a*^{1g/tg} diminishing *Kcna1^{KO/KO}* hyperexcitability.

Recent work has suggested human variants in *CACNA1A* and *SCN9A* modify the Dravet syndrome phenotype. Patients with mutations in both *CACNA1A* and *SCN1A* experienced higher rates of absence seizures, earlier seizure onset and significantly more prolonged seizures compared to Dravet patients with only a *SCN1A* mutation (146). The *SCN9A*^{N641Y} mutation was identified in a large family with 21 individuals experiencing

febrile seizure before six years of age (154, 155). Ten of the affected family members continued with subsequent afebrile seizures (154, 155). Due to the expansive phenotype seen in $SCN9A^{N641Y}$ patients, it was hypothesized that SCN9A may act as a genetic modifier of epilepsy. Singh *et al.* identified *SCN9A* mutations in seven Dravet syndrome patients. Six of these patients were also positive for mild *SCN1A* missense mutations not usually associated with Dravet (155). Furthermore, five *SCN9A* variants were identified in 18 Dravet syndrome patients negative for *SCN1A* mutations (156). The same study also identified seven additional *SCN9A* variants in *SCN1A* positive Dravet patients (156). The results suggest that variants in *SCN9A* alone or in combination with *SCN1A* missense mutations, result in Dravet syndrome (155, 156).

We demonstrated the voltage-gated potassium and sodium channel mutants $Kcnq2^{V182M/+}$ and $Scn1a^{R1648H/+}$ were modifiers of the Q54 seizure model (157, 158). $Kcnq2^{V182M/+}$ heterozygous animals have a reduced threshold to seizure induction but no spontaneous seizure activity (159). When $Kcnq2^{V182M/+}$ heterozygotes were combined with Q54, double mutants experienced early-onset, tonic-clonic seizures and juvenile lethality by three weeks of age, unlike the single mutant littermates (158). When $Scn1a^{R1648H/+}$ heterozygotes were combined with Q54, double heterozygotes were combined with Q54, double heterozygotes were combined with Q54, double mutants experienced and frequent, spontaneous tonic-clonic seizures (157). These experiments are detailed in Chapter IV. These modifier effects demonstrate that neuronal excitability is influenced by the net activity of ion channels (157).

Supporting the role for human genetic modifiers of epilepsy, mutations have been identified in *CACNA1A*, *KCNJ10*, *KCNQ2* and *KCNV2* in patients with absence, generalized, BFNIS and partial epilepsies, respectively (160-165).

Conclusions and Specific Aims

As described throughout the introduction, epilepsy is a common neurological disorder with a wide spectrum of phenotypic severity. Among monogenic epilepsies, like Dravet syndrome and GEFS+, affected family members who possess the same mutation can have dramatic differences in the clinical presentation of their disease. This suggests that other factors, including genetic, must modify the primary mutation, resulting in a more or less severe phenotype.

Genetic epilepsies with complex inheritance likely account for a considerable amount of epilepsies with unknown origin (166). In complex inheritance, each individual gene may have only a small effect on clinical severity of epilepsy, but in combination with risk alleles in other genes, the additive effects can be devastating.

Mutations in voltage-gated sodium channels are major contributors to genetic epilepsies, with 80% of Dravet syndrome and 10% of GEFS+ patients having mutations in *SCN1A* (167). Generation of mouse models recapitulating voltage-gated sodium and other neuronal ion channel mutations have allowed for more accurate models of Dravet syndrome, GEFS+, absence and temporal lobe epilepsies. The *in vivo* models are not only beneficial to assess behavioral consequences of ion channel mutations, but are also used to study the molecular mechanisms altered by mutations, therefore expanding our understanding of epilepsy. An increasing amount of evidence from these models has shown that seizure phenotypes resulting from gene mutations are modified by the genetic strain background.

The Q54 transgenic mouse model has a gain-of-function mutation that results in persistent sodium current and epilepsy. Q54 mice on the B6 strain exhibit a low incidence

of seizures and a relatively normal lifespan (143). When crossed to the SJL strain, the resulting F1.Q54 offspring display a high seizure frequency with early onset and significantly reduced survival (143). Genetic mapping identified two modifier loci responsible for the strain difference in Q54 mice: *Moe1* and *Moe2* (143, 145).

I proposed to identify and evaluate candidate genes that alter seizure susceptibility at the *Moel* locus through the following specific aims:

Specific Aim 1. To fine map Moe1 on chromosome 11 to ≤ 10 Mb using interval-specific congenics and perform RNA-Seq to identify candidate genes.

Specific Aim 2. To test Moel candidate modifier genes by transgenic transfer of the modified phenotype.

In Specific Aim 1, I utilized interval-specific congenic lines to fine-map *Moe1* and narrow the modifier interval. We then used a next-generation sequencing technique, RNA-Seq, to evaluate differences in gene and transcript expression, as well as coding sequence, between B6 and SJL strains. Fine mapping and RNA-Seq suggested several candidate modifier genes, including *Cacna1g* and *Hlf*, for *Moe1*. These results are described in detail in Chapter II, modified from *Hawkins & Kearney, 2012*. I hypothesized candidate genes identified by fine mapping and RNA-Seq contributed to the variable phenotype of Q54.

In Specific Aim 2, I tested the modifier potential of *Cacnalg* and *Hlf* by systematically evaluating the candidate modifier genes through generation of *Cacnalg* BAC transgenic and *Hlf* targeted knockout animal models. I tested their ability to enhance or reduce seizure severity of the Q54 phenotype by generating double mutant

animals. Descriptions of these experiments and validation of *Cacna1g* and *Hlf* as candidate modifier genes of the Q54 phenotype are detailed in Chapter III.

I also proposed Specific Aim 3, which focused on taking a functional candidate gene approach to evaluate known epilepsy mutations on the $Scn1a^{R1648H/+}$ phenotype.

Specific Aim 3. To test the Q54 and $Kcnq2^{V182M/+}$ epilepsy models as functional candidate modifiers of the GEFS+ knock-in model $Scn1a^{R1648H/+}$.

To assess the modifier potential of Q54 and $Kcnq2^{V182M/+}$ mutations on the $Scn1a^{R1648H/+}$ phenotype, we generated double mutant mice. I then utilized ECoG to monitor seizure activity in our mutants. I hypothesized that by combining reduced GABAergic transmission from $Scn1a^{R1648H/+}$ with reduced seizure thresholds from the $Kcnq2^{V182M/+}$ mutation or hyperexcitability from Q54, a severe seizure phenotype would result in each cross. These results are described in detail in Chapter IV, modified from *Hawkins et al.*, 2011.

Identification of modifier genes that improve or exacerbate epilepsy may increase the understanding of the molecular events of epileptogenesis, advance molecular diagnostic capabilities and identify novel therapeutic targets for the improved treatment of human patients

References

- 1. Commission on Epidemiology and Prognosis I.L.A.E. (1993) Guidelines for epidemiologic studies on epilepsy. *Epilepsia*, **34**, 592-596.
- 2. Fisher R.S., Leppik I. (2008) Debate: When does a seizure imply epilepsy? *Epilepsia*, **49 Suppl 9**, 7-12.
- 3. Fisher R.S., van Emde B.W., Blume W., Elger C., Genton P., Lee P. and Engel J., Jr. (2005) Epileptic seizures and epilepsy: definitions proposed by the International League Against Epilepsy (ILAE) and the International Bureau for Epilepsy (IBE). *Epilepsia*, **46**, 470-472.
- 4. Berg A.T., Berkovic S.F., Brodie M.J. *et al.* (2010) Revised terminology and concepts for organization of seizures and epilepsies: report of the ILAE Commission on Classification and Terminology, 2005-2009. *Epilepsia*, **51**, 676-685.
- 5. England MJ, Liverman CT, Schultz Andrea M, Strawbridge LM. Epilepsy Across the Spectrum: Promoting Health and Understanding. 3-30-2012.
- 6. Noebels JL, Avoli M, Rogawski MA (2012) Jasper's Basic Mechanisms of the Epilepsies.
- 7. Hauser W.A., Annegers J.F. and Kurland L. (1993) Incidence of epilepsy and unprovoked seizures in Rochester, Minnesota: 1935-1984. *Epilepsia*, **34**, 453-468.
- 8. Kwan P., Brodie M.J. (2000) Early identification of refractory epilepsy. *N.Engl.J.Med.*, **342**, 314-319.
- 9. Poduri A., Lowenstein D. (2011) Epilepsy genetics--past, present, and future. *Curr.Opin.Genet.Dev.*, **21**, 325-332.
- 10. Meisler M.H., Kearney J.A. (2005) Sodium channel mutations in epilepsy and other neurological disorders. *J. Clin. Invest*, **115**, 2010-2017.
- 11. Beneski D.A., Catterall W.A. (1980) Covalent labeling of protein components of the sodium channel with a photoactivable derivative of scorpion toxin. *Proc.Natl.Acad.Sci.U.S.A*, **77**, 639-643.
- 12. Catterall W.A. (2000) From ionic currents to molecular mechanisms: the structure and function of voltage-gated sodium channels. *Neuron*, **26**, 13-25.
- 13. Armstrong C.M. (1981) Sodium channels and gating currents. *Physiol Rev.*, **61**, 644-683.
- 14. Catterall W.A. (1986) Molecular properties of voltage-sensitive sodium channels. *Annu.Rev.Biochem.*, **55**, 953-985.
- 15. Chanda B., Bezanilla F. (2002) Tracking voltage-dependent conformational changes in skeletal muscle sodium channel during activation. *J.Gen.Physiol*, **120**, 629-645.

- 16. Chen L.Q., Santarelli V., Horn R. and Kallen R.G. (1996) A unique role for the S4 segment of domain 4 in the inactivation of sodium channels. *J.Gen.Physiol*, **108**, 549-556.
- 17. Stuhmer W., Conti F., Suzuki H., Wang X.D., Noda M., Yahagi N., Kubo H. and Numa S. (1989) Structural parts involved in activation and inactivation of the sodium channel. *Nature*, **339**, 597-603.
- 18. Yang N., Horn R. (1995) Evidence for voltage-dependent S4 movement in sodium channels. *Neuron*, **15**, 213-218.
- 19. Yang N., George A.L., Jr. and Horn R. (1996) Molecular basis of charge movement in voltage-gated sodium channels. *Neuron*, **16**, 113-122.
- 20. Sheets M.F., Kyle J.W., Kallen R.G. and Hanck D.A. (1999) The Na channel voltage sensor associated with inactivation is localized to the external charged residues of domain IV, S4. *Biophys.J.*, **77**, 747-757.
- 21. Isom L.L., Ragsdale D.S., De Jongh K.S., Westenbroek R.E., Reber B.F., Scheuer T. and Catterall W.A. (1995) Structure and function of the beta 2 subunit of brain sodium channels, a transmembrane glycoprotein with a CAM motif. *Cell*, **83**, 433-442.
- 22. Isom L.L. (2002) The role of sodium channels in cell adhesion. *Front Biosci.*, **7**, 12-23.
- 23. Goldin A.L., Barchi R.L., Caldwell J.H. *et al.* (2000) Nomenclature of voltagegated sodium channels. *Neuron*, **28**, 365-368.
- 24. Goldin A.L. (2001) Resurgence of sodium channel research. *Annu.Rev.Physiol*, **63**, 871-894.
- 25. Trimmer J.S., Rhodes K.J. (2004) Localization of voltage-gated ion channels in mammalian brain. *Annu.Rev.Physiol*, **66**, 477-519.
- 26. Boiko T., Rasband M.N., Levinson S.R., Caldwell J.H., Mandel G., Trimmer J.S. and Matthews G. (2001) Compact myelin dictates the differential targeting of two sodium channel isoforms in the same axon. *Neuron*, **30**, 91-104.
- 27. Caldwell J.H., Schaller K.L., Lasher R.S., Peles E. and Levinson S.R. (2000) Sodium channel Na(v)1.6 is localized at nodes of ranvier, dendrites, and synapses. *Proc.Natl.Acad.Sci.U.S.A*, **97**, 5616-5620.
- Kaplan M.R., Cho M.H., Ullian E.M., Isom L.L., Levinson S.R. and Barres B.A. (2001) Differential control of clustering of the sodium channels Na(v)1.2 and Na(v)1.6 at developing CNS nodes of Ranvier. *Neuron*, **30**, 105-119.
- 29. Westenbroek R.E., Merrick D.K. and Catterall W.A. (1989) Differential subcellular localization of the RI and RII Na+ channel subtypes in central neurons. *Neuron*, **3**, 695-704.
- Westenbroek R.E., Noebels J.L. and Catterall W.A. (1992) Elevated expression of type II Na+ channels in hypomyelinated axons of shiverer mouse brain. *J.Neurosci.*, 12, 2259-2267.

- 31. Parihar R., Ganesh S. (2013) The SCN1A gene variants and epileptic encephalopathies. *J.Hum.Genet.*,
- 32. Scheffer I.E., Berkovic S.F. (1997) Generalized epilepsy with febrile seizures plus. A genetic disorder with heterogeneous clinical phenotypes. *Brain*, **120**, 479-490.
- 33. Singh R., Scheffer I.E., Crossland K. and Berkovic SF (1999) Generalized epilepsy with febrile seizures plus: a common childhood-onset genetic epilepsy syndrome. *Ann Neurol*, **45**, 75-81.
- 34. Wallace R.H., Wang D.W., Singh R. *et al.* (1998) Febrile seizures and generalized epilepsy associated with a mutation in the Na+-channel beta1 subunit gene SCN1B. *Nat Genet*, **19**, 366-370.
- 35. Meadows L.S., Malhotra J., Loukas A., Thyagarajan V., Kazen-Gillespie K.A., Koopman M.C., Kriegler S., Isom L.L. and Ragsdale D.S. (2002) Functional and Biochemical Analysis of a Sodium Channel beta 1 Subunit Mutation Responsible for Generalized Epilepsy with Febrile Seizures Plus Type 1. *J.Neurosci.*, **22**, 10699-10709.
- 36. Baulac S., Gourfinkel-An I., Picard F., Rosenberg-Bourgin M., Prud'homme J.F., Baulac M., Brice A. and LeGuern E. (1999) A second locus for familial generalized epilepsy with febrile seizures plus maps to chromosome 2q21-q33. *Am J Hum Genet*, **65**, 1078-85.
- 37. Moulard B., Guipponi M., Chaigne D., Mouthon D., Buresi C. and Malafosse A. (1999) Identification of a new locus for generalized epilepsy with febrile seizures plus (GEFS+) on chromosome 2q24-q33. *Am.J.Hum.Genet*, **65**, 1396-1400.
- 38. Escayg A., MacDonald B.T., Meisler M.H. *et al.* (2000) Mutations of SCN1A, encoding a neuronal sodium channel, in two families with GEFS+2. *Nat Genet*, **24**, 343-5.
- 39. Lossin C., Wang D.W., Rhodes T.H., Vanoye C.G. and George A.L., Jr. (2002) Molecular basis of an inherited epilepsy. *Neuron*, **34**, 877-84.
- 40. Claes L.R., Deprez L., Suls A., Baets J., Smets K., Van D.T., Deconinck T., Jordanova A. and De J.P. (2009) The SCN1A variant database: a novel research and diagnostic tool. *Hum.Mutat.*, **30**, E904-E920.
- 41. Claes L., Del-Favero J., Ceulemans B., Lagae L., Van Broeckhoven C. and De Jonghe P. (2001) De novo mutations in the sodium-channel gene SCN1A cause severe myoclonic epilepsy of infancy. *Am J Hum Genet*, **68**, 1327-32.
- 42. Scheffer I.E., Zhang Y.H., Jansen F.E. and Dibbens L. (2009) Dravet syndrome or genetic (generalized) epilepsy with febrile seizures plus? *Brain Dev.*, **31**, 394-400.
- 43. Dravet C. (1978) Les epilepsies graves de l'enfant. *Vie Med*, **8**, 543-548.
- 44. Dravet C., Bureau M., Oguni H., Fukuyama Y. and Cokar O. (2005) Severe myoclonic epilepsy in infancy: Dravet syndrome. *Adv.Neurol.*, **95**, 71-102.
- 45. Consortium K., Epilepsy P. (2013) De novo mutations in epileptic encephalopathies. *Nature*, advance online publication,

- 46. Meisler M.H., O'Brien J.E. and Sharkey L.M. (2010) Sodium channel gene family: epilepsy mutations, gene interactions and modifier effects. *J.Physiol*, **588**, 1841-1848.
- 47. Touma M., Joshi M., Connolly M.C. *et al.* (2013) Whole genome sequencing identifies SCN2A mutation in monozygotic twins with Ohtahara syndrome and unique neuropathologic findings. *Epilepsia*, **54**, e81-e85.
- 48. Rauch A., Wieczorek D., Graf E. *et al.* (2012) Range of genetic mutations associated with severe non-syndromic sporadic intellectual disability: an exome sequencing study. *Lancet*, **380**, 1674-1682.
- 49. Sanders S.J., Murtha M.T., Gupta A.R. *et al.* (2012) De novo mutations revealed by whole-exome sequencing are strongly associated with autism. *Nature*, **485**, 237-241.
- 50. Bolton P.F., Carcani-Rathwell I., Hutton J., Goode S., Howlin P. and Rutter M. (2011) Epilepsy in autism: features and correlates. *Br.J.Psychiatry*, **198**, 289-294.
- 51. Danielsson S., Gillberg I.C., Billstedt E., Gillberg C. and Olsson I. (2005) Epilepsy in young adults with autism: a prospective population-based follow-up study of 120 individuals diagnosed in childhood. *Epilepsia*, **46**, 918-923.
- 52. Giovanardi R.P., Posar A. and Parmeggiani A. (2000) Epilepsy in adolescents and young adults with autistic disorder. *Brain Dev.*, **22**, 102-106.
- 53. Amiet C., Gourfinkel-An I., Bouzamondo A., Tordjman S., Baulac M., Lechat P., Mottron L. and Cohen D. (2008) Epilepsy in autism is associated with intellectual disability and gender: evidence from a meta-analysis. *Biol.Psychiatry*, **64**, 577-582.
- 54. Kaplan R.E., Lacey D.J. (1983) Benign familial neonatal-infantile seizures. *Am.J.Med.Genet.*, **16**, 595-599.
- 55. Berkovic S.F., Heron S.E., Giordano L. *et al.* (2004) Benign familial neonatalinfantile seizures: characterization of a new sodium channelopathy. *Ann.Neurol.*, **55**, 550-557.
- 56. Herlenius E., Heron S.E., Grinton B.E., Keay D., Scheffer I.E., Mulley J.C. and Berkovic S.F. (2007) SCN2A mutations and benign familial neonatal-infantile seizures: the phenotypic spectrum. *Epilepsia*, **48**, 1138-1142.
- 57. Heron S.E., Crossland K.M., Andermann E. *et al.* (2002) Sodium-channel defects in benign familial neonatal-infantile seizures. *Lancet*, **360**, 851-852.
- 58. Liao Y., Deprez L., Maljevic S. *et al.* (2010) Molecular correlates of age-dependent seizures in an inherited neonatal-infantile epilepsy. *Brain*, **133**, 1403-1414.
- 59. Liao Y., Anttonen A.K., Liukkonen E. *et al.* (2010) SCN2A mutation associated with neonatal epilepsy, late-onset episodic ataxia, myoclonus, and pain. *Neurology*, **75**, 1454-1458.
- 60. Shi X., Yasumoto S., Kurahashi H., Nakagawa E., Fukasawa T., Uchiya S. and Hirose S. (2012) Clinical spectrum of SCN2A mutations. *Brain Dev.*, **34**, 541-545.
- 61. Misra S.N., Kahlig K.M. and George A.L., Jr. (2008) Impaired NaV1.2 function and reduced cell surface expression in benign familial neonatal-infantile seizures. *Epilepsia*, **49**, 1535-1545.
- 62. Scalmani P., Rusconi R., Armatura E., Zara F., Avanzini G., Franceschetti S. and Mantegazza M. (2006) Effects in neocortical neurons of mutations of the Na(v)1.2 Na+ channel causing benign familial neonatal-infantile seizures. *J.Neurosci.*, **26**, 10100-10109.
- 63. Haug K., Hallmann K., Rebstock J. *et al.* (2001) The voltage-gated sodium channel gene SCN2A and idiopathic generalized epilepsy. *Epilepsy Res.*, **47**, 243-246.
- 64. Sugawara T., Tsurubuchi Y., Agarwala K.L. *et al.* (2001) A missense mutation of the Na+ channel alpha II subunit gene Na(v)1.2 in a patient with febrile and afebrile seizures causes channel dysfunction. *Proc Natl Acad Sci U S A*, **98**, 6384-9.
- 65. Ito M., Shirasaka Y., Hirose S., Sugawara T. and Yamakawa K. (2004) Seizure phenotypes of a family with missense mutations in SCN2A. *Pediatr.Neurol.*, **31**, 150-152.
- 66. Kamiya K., Kaneda M., Sugawara T. *et al.* (2004) A nonsense mutation of the sodium channel gene SCN2A in a patient with intractable epilepsy and mental decline. *J Neurosci*, **24**, 2690-8.
- 67. Ogiwara I., Ito K., Sawaishi Y. *et al.* (2009) De novo mutations of voltage-gated sodium channel alphaII gene SCN2A in intractable epilepsies. *Neurology*, **73**, 1046-1053.
- 68. Shi X., Yasumoto S., Nakagawa E., Fukasawa T., Uchiya S. and Hirose S. (2009) Missense mutation of the sodium channel gene SCN2A causes Dravet syndrome. *Brain Dev.*, **31**, 758-762.
- 69. Wang J.W., Shi X.Y., Kurahashi H., Hwang S.K., Ishii A., Higurashi N., Kaneko S. and Hirose S. (2012) Prevalence of SCN1A mutations in children with suspected Dravet syndrome and intractable childhood epilepsy. *Epilepsy Res.*, **102**, 195-200.
- 70. Lossin C., Shi X., Rogawski M.A. and Hirose S. (2012) Compromised function in the Na(v)1.2 Dravet syndrome mutation R1312T. *Neurobiol.Dis.*, **47**, 378-384.
- 71. Kato M., Yamagata T., Kubota M. *et al.* (2013) Clinical spectrum of early onset epileptic encephalopathies caused by KCNQ2 mutation. *Epilepsia*, **54**, 1282-1287.
- 72. Holland K.D., Kearney J.A., Glauser T.A., Buck G., Keddache M., Blankston J.R., Glaaser I.W., Kass R.S. and Meisler M.H. (2008) Mutation of sodium channel SCN3A in a patient with cryptogenic pediatric partial epilepsy. *Neurosci.Lett.*, **433**, 65-70.
- 73. Estacion M., Gasser A., Dib-Hajj S.D. and Waxman S.G. (2010) A sodium channel mutation linked to epilepsy increases ramp and persistent current of Nav1.3 and induces hyperexcitability in hippocampal neurons. *Exp.Neurol.*, **224**, 362-368.
- 74. Vanoye C.G., Gurnett C.A., Holland K.D., George A.L., Jr. and Kearney J.A. (2013) Novel SCN3A Variants Associated with Focal Epilepsy in Children. *Neurobiol.Dis.*,

- 75. Kahlig K.M., Rhodes T.H., Pusch M., Freilinger T., Pereira-Monteiro J., Ferrari M., van den Maagdenberg A.M., Dichgans M. and George A.L. (2008) Divergent sodium channel defects in familial hemiplegic migraine. *Proc Natl Acad Sci U S A*, **105**, 9799-9804.
- Lampert A., Hains B.C. and Waxman S.G. (2006) Upregulation of persistent and ramp sodium current in dorsal horn neurons after spinal cord injury. *Exp.Brain Res.*, 174, 660-666.
- 77. Rhodes T.H., Lossin C., Vanoye C.G., Wang D.W. and George A.L., Jr. (2004) Noninactivating voltage-gated sodium channels in severe myoclonic epilepsy of infancy. *Proc Natl Acad Sci U S A*, **101**, 11147-52.
- 78. Spampanato J., Aradi I., Soltesz I. and Goldin A.L. (2004) Increased neuronal firing in computer simulations of sodium channel mutations that cause generalized epilepsy with febrile seizures plus. *J Neurophysiol*, **91**, 2040-50.
- 79. Veeramah K.R., O'Brien J.E., Meisler M.H. *et al.* (2012) De novo pathogenic SCN8A mutation identified by whole-genome sequencing of a family quartet affected by infantile epileptic encephalopathy and SUDEP. *Am.J.Hum.Genet.*, **90**, 502-510.
- 80. Bernar J., Sparkes R.S. and Allensworth S. (1985) Interstitial deletion 2q24.3: case report with high resolution banding. *J.Med.Genet.*, **22**, 226-228.
- 81. Boles R.G., Pober B.R., Gibson L.H., Willis C.R., McGrath J., Roberts D.J. and Yang-Feng T.L. (1995) Deletion of chromosome 2q24-q31 causes characteristic digital anomalies: case report and review. *Am.J.Med.Genet.*, **55**, 155-160.
- 82. Buchanan P.D., Rhodes R.L. and Stevenson C.E., Jr. (1983) Interstitial deletion 2q31 leads to q33. *Am.J.Med.Genet.*, **15**, 121-126.
- 83. Davidsson J., Collin A., Olsson M.E., Lundgren J. and Soller M. (2008) Deletion of the SCN gene cluster on 2q24.4 is associated with severe epilepsy: an array-based genotype-phenotype correlation and a comprehensive review of previously published cases. *Epilepsy Res.*, **81**, 69-79.
- 84. Langer S., Geigl J.B., Wagenstaller J., Lederer G., Hempel M., umer-Haas C., Leifheit H.J. and Speicher M.R. (2006) Delineation of a 2q deletion in a girl with dysmorphic features and epilepsy. *Am.J.Med.Genet.A*, **140**, 764-768.
- 85. Lurie I.W., Supovitz K.R., Rosenblum-Vos L.S. and Wulfsberg E.A. (1994) Phenotypic variability of del(2) (q22-q23): report of a case with a review of the literature. *Genet.Couns.*, **5**, 11-14.
- 86. Maas S.M., Hoovers J.M., van Seggelen M.E., Menzel D.M. and Hennekam R.C. (2000) Interstitial deletion of the long arm of chromosome 2: a clinically recognizable microdeletion syndrome? *Clin.Dysmorphol.*, **9**, 47-53.
- 87. Madia F., Striano P., Gennaro E. *et al.* (2006) Cryptic chromosome deletions involving SCN1A in severe myoclonic epilepsy of infancy. *Neurology*, **67**, 1230-1235.

- 88. McMilin K.D., Reiss J.A., Brown M.G. *et al.* (1998) Clinical outcomes of four patients with microdeletion in the long arm of chromosome 2. *Am.J.Med.Genet.*, **78**, 36-43.
- 89. Pereira S., Vieira J.P., Barroca F., Roll P., Carvalhas R., Cau P., Sequeira S., Genton P. and Szepetowski P. (2004) Severe epilepsy, retardation, and dysmorphic features with a 2q deletion including SCN1A and SCN2A. *Neurology*, **63**, 191-2.
- 90. Pescucci C., Caselli R., Grosso S. *et al.* (2007) 2q24-q31 deletion: report of a case and review of the literature. *Eur.J.Med.Genet.*, **50**, 21-32.
- 91. Ramer J.C., Mowrey P.N., Robins D.B., Ligato S., Towfighi J. and Ladda R.L. (1990) Five children with del (2)(q31q33) and one individual with dup (2)(q31q33) from a single family: review of brain, cardiac, and limb malformations. *Am.J.Med.Genet.*, **37**, 392-400.
- 92. Slavotinek A., Schwarz C., Getty J.F., Stecko O., Goodman F. and Kingston H. (1999) Two cases with interstitial deletions of chromosome 2 and sex reversal in one. *Am.J.Med.Genet.*, **86**, 75-81.
- 93. Takahashi Y., Narahara K., Kikkawa K., Wakita Y., Kimura S., Murakami M., Kasai R. and Kimoto H. (1985) Interstitial deletion of the long arm of chromosome 2: a case report and review of the literature. *Jinrui.Idengaku.Zasshi*, **30**, 297-305.
- 94. Wamsler C., Muller B., Freyberger G. and Schmid M. (1991) Interstitial deletion del(2)(q24q31) with a phenotype similar to del(2)(q31q33). *Am.J.Med.Genet.*, **39**, 204-206.
- 95. Heron S.E., Scheffer I.E., Grinton B.E., Eyre H., Oliver K.L., Bain S., Berkovic S.F. and Mulley J.C. (2010) Familial neonatal seizures with intellectual disability caused by a microduplication of chromosome 2q24.3. *Epilepsia*, **51**, 1865-1869.
- 96. Lim B.C., Min B.J., Park W.Y., Oh S.K., Woo M.J., Choi J.S., Kim K.J., Hwang Y.S. and Chae J.H. (2013) A Unique Phenotype of 2q24.3-2q32.1 Duplication: Early Infantile Epileptic Encephalopathy Without Mesomelic Dysplasia. *J.Child Neurol.*,
- 97. Okumura A., Yamamoto T., Shimojima K., Honda Y., Abe S., Ikeno M. and Shimizu T. (2011) Refractory neonatal epilepsy with a de novo duplication of chromosome 2q24.2q24.3. *Epilepsia*, **52**, e66-e69.
- 98. Raymond G., Wohler E., Dinsmore C., Cox J., Johnston M., Batista D. and Wang T. (2011) An interstitial duplication at 2q24.3 involving the SCN1A, SCN2A, SCN3A genes associated with infantile epilepsy. *Am.J.Med.Genet.A*, **155A**, 920-923.
- 99. Vecchi M., Cassina M., Casarin A., Rigon C., Drigo P., De P.L. and Clementi M. (2011) Infantile epilepsy associated with mosaic 2q24 duplication including SCN2A and SCN3A. *Seizure.*, **20**, 813-816.
- 100. Abou-Khalil B., Ge Q., Desai R., Ryther R., Bazyk A., Bailey R., Haines J.L., Sutcliffe J.S. and George A.L., Jr. (2001) Partial and generalized epilepsy with febrile seizures plus and a novel SCN1A mutation. *Neurology*, **57**, 2265-72.

- 101. Fukuma G., Oguni H., Shirasaka Y. *et al.* (2004) Mutations of Neuronal Voltagegated Na+ Channel alpha1 Subunit Gene SCN1A in Core Severe Myoclonic Epilepsy in Infancy (SMEI) and in Borderline SMEI (SMEB). *Epilepsia*, **45**, 140-148.
- 102. Gennaro E., Veggiotti P., Malacarne M. *et al.* (2003) Familial severe myoclonic epilepsy of infancy: truncation of Nav1.1 and genetic heterogeneity. *Epileptic Disord*, **5**, 21-5.
- 103. Nabbout R., Gennaro E., Dalla Bernardina B. *et al.* (2003) Spectrum of SCN1A mutations in severe myoclonic epilepsy of infancy. *Neurology*, **60**, 1961-7.
- 104. Yu M.J., Shi Y.W., Gao M.M., Deng W.Y., Liu X.R., Chen L., Long Y.S., Yi Y.H. and Liao W.P. (2010) Milder phenotype with SCN1A truncation mutation other than SMEI. *Seizure.*, **19**, 443-445.
- 105. Weiss K.M. (2005) Cryptic causation of human disease: reading between the (germ) lines. *Trends Genet.*, **21**, 82-88.
- 106. Martin M.S., Dutt K., Papale L.A. *et al.* (2010) Altered function of the SCN1A voltage-gated sodium channel leads to gamma-aminobutyric acid-ergic (GABAergic) interneuron abnormalities. *J.Biol.Chem.*, **285**, 9823-9834.
- 107. Yu F.H., Mantegazza M., Westenbroek R.E. *et al.* (2006) Reduced sodium current in GABAergic interneurons in a mouse model of severe myoclonic epilepsy in infancy. *Nat Neurosci.*, **9**, 1142-1149.
- 108. MISTRY A, MILLER A, THOMPSON C, KEARNEY J, GEORGE AL. Strain and age-dependent differences in hippocampal neuron sodium current densities in a mouse model of Dravet syndrome. Society for Neuroscience Meeting Planner . 2012.
- 109. Ogiwara I., Miyamoto H., Morita N. *et al.* (2007) Na(v)1.1 localizes to axons of parvalbumin-positive inhibitory interneurons: a circuit basis for epileptic seizures in mice carrying an Scn1a gene mutation. *J.Neurosci.*, **27**, 5903-5914.
- 110. Yu F.H., Mantegazza M., Westenbroek R.E., Robbins C.A., Spain W.J., Burton K.A., McKnight G.S., Scheuer T. and Catterall W.A. Deletion of the Nav1.1 channel: a mouse model for severe myoclonic epilepsy of infancy. Program No. 479.5. 2004 Abstract Viewer/Itinerary Planner, Washington, DC: Society for Neuroscience, 2004. Online,
- 111. Han S., Tai C., Westenbroek R.E. *et al.* (2012) Autistic-like behaviour in Scn1a+/mice and rescue by enhanced GABA-mediated neurotransmission. *Nature*, **489**, 385-390.
- 112. Kalume F., Westenbroek R.E., Cheah C.S., Yu F.H., Oakley J.C., Scheuer T. and Catterall W.A. (2013) Sudden unexpected death in a mouse model of Dravet syndrome. *J.Clin.Invest*, **123**, 1798-1808.
- 113. Fujiwara T., Sugawara T., Mazaki-Miyazaki E. *et al.* (2003) Mutations of sodium channel {alpha} subunit type 1 (SCN1A) in intractable childhood epilepsies with frequent generalized tonic-clonic seizures. *Brain*, **126**, 531-546.

- 114. Sugawara T., Mazaki-Miyazaki E., Fukushima K., Shimomura J., Fujiwara T., Hamano S., Inoue Y. and Yamakawa K. (2002) Frequent mutations of SCN1A in severe myoclonic epilepsy in infancy. *Neurology*, **58**, 1122-4.
- 115. Kearney J.A., Plummer N.W., Smith M.R., Kapur J., Cummins T.R., Waxman S.G., Goldin A.L. and Meisler M.H. (2001) A gain-of-function mutation in the sodium channel gene Scn2a results in seizures and behavioral abnormalities. *Neuroscience*, **102**, 307-317.
- 116. Rhodes T.H., Vanoye C.G., Ohmori I., Ogiwara I., Yamakawa K. and George A.L., Jr. (2005) Sodium channel dysfunction in intractable childhood epilepsy with generalized tonic-clonic seizures. *J.Physiol*, **569**, 433-445.
- 117. Kile K.B., Tian N. and Durand D.M. (2008) Scn2a sodium channel mutation results in hyperexcitability in the hippocampus in vitro. *Epilepsia*, **49**, 488-499.
- 118. Cormier R.T., Bilger A., Lillich A.J., Halberg R.B., Hong K.H., Gould K.A., Borenstein N., Lander E.S. and Dove W.F. (2000) The Mom1AKR intestinal tumor resistance region consists of Pla2g2a and a locus distal to D4Mit64. *Oncogene*, **19**, 3182-3192.
- 119. Hide T., Hatakeyama J., Kimura-Yoshida C., Tian E., Takeda N., Ushio Y., Shiroishi T., Aizawa S. and Matsuo I. (2002) Genetic modifiers of otocephalic phenotypes in Otx2 heterozygous mutant mice. *Development*, **129**, 4347-4357.
- 120. Ikeda A., Zheng Q.Y., Zuberi A.R., Johnson K.R., Naggert J.K. and Nishina P.M. (2002) Microtubule-associated protein 1A is a modifier of tubby hearing (moth1). *Nat Genet*, **30**, 401-405.
- 121. Manenti G., Acevedo A., Galbiati F., Gianni B.R., Noci S., Salido E. and Dragani T.A. (2002) Cancer modifier alleles inhibiting lung tumorigenesis are common in inbred mouse strains. *Int.J.Cancer*, **99**, 555-559.
- 122. Owens S.E., Broman K.W., Wiltshire T., Elmore J.B., Bradley K.M., Smith J.R. and Southard-Smith E.M. (2005) Genome-wide linkage identifies novel modifier loci of aganglionosis in the Sox10Dom model of Hirschsprung disease. *Hum.Mol.Genet*, **14**, 1549-1558.
- 123. Salvatore F., Scudiero O. and Castaldo G. (2002) Genotype-phenotype correlation in cystic fibrosis: the role of modifier genes. *Am.J.Med Genet*, **111**, 88-95.
- 124. Silverman K.A., Koratkar R., Siracusa L.D. and Buchberg A.M. (2002) Identification of the modifier of Min 2 (Mom2) locus, a new mutation that influences Apc-induced intestinal neoplasia. *Genome Res.*, **12**, 88-97.
- 125. Ulbrich M., Schmidt V.C., Ronsiek M., Mussmann A., Bartsch J.W., Augustin M., Jockusch H. and Schmitt-John T. (2002) Genetic modifiers that aggravate the neurological phenotype of the wobbler mouse. *Neuroreport*, **13**, 535-539.
- 126. Crotti L., Monti M.C., Insolia R., Peljto A., Goosen A., Brink P.A., Greenberg D.A., Schwartz P.J. and George A.L., Jr. (2009) NOS1AP is a genetic modifier of the long-QT syndrome. *Circulation*, **120**, 1657-1663.

- 127. Buchner D.A., Trudeau M. and Meisler M.H. (2003) SCNM1, a putative RNA splicing factor that modifies disease severity in mice. *Science*, **301**, 967-9.
- 128. Dragani T.A. (2003) 10 years of mouse cancer modifier loci: human relevance. *Cancer Res.*, **63**, 3011-3018.
- 129. Floyd J.A., Gold D.A., Concepcion D. *et al.* (2003) A natural allele of Nxf1 suppresses retrovirus insertional mutations. *Nat Genet*, **35**, 221-228.
- 130. Howell V.M., Jones J.M., Bergren S.K., Li L., Billi A.C., Avenarius M.R. and Meisler M.H. (2007) Evidence for a direct role of the disease modifier SCNM1 in splicing. *Hum.Mol.Genet*, **16**, 2506-2516.
- 131. Noben-Trauth K., Zheng Q.Y. and Johnson K.R. (2003) Association of cadherin 23 with polygenic inheritance and genetic modification of sensorineural hearing loss. *Nat Genet*, **35**, 21-23.
- 132. Schultz J.M., Yang Y., Caride A.J. *et al.* (2005) Modification of human hearing loss by plasma-membrane calcium pump PMCA2. *N.Engl.J.Med*, **352**, 1557-1564.
- 133. Engstrom F.L., Woodbury D.M. (1988) Seizure susceptibility in DBA and C57 mice: the effects of various convulsants. *Epilepsia*, **29**, 389-395.
- 134. Kosobud A.E., Crabbe J.C. (1990) Genetic correlations among inbred strain sensitivities to convulsions induced by 9 convulsant drugs. *Brain Res.*, **526**, 8-16.
- 135. Ferraro T.N., Golden G.T., Smith G.G. and Berrettini W.H. (1995) Differential susceptibility to seizures induced by systemic kainic acid treatment in mature DBA/2J and C57BL/6J mice. *Epilepsia*, **36**, 301-7.
- 136. Ferraro T.N., Golden G.T., Smith G.G., Schork N.J., St Jean P., Ballas C., Choi H. and Berrettini W.H. (1997) Mapping murine loci for seizure response to kainic acid. *Mamm Genome*, **8**, 200-8.
- 137. Ferraro T.N., Golden G.T., Snyder R., Laibinis M., Smith G.G., Buono R.J. and Berrettini W.H. (1998) Genetic influences on electrical seizure threshold. *Brain Res*, **813**, 207-10.
- 138. Ferraro T.N., Golden G.T., Smith G.G. *et al.* (1999) Mapping loci for pentylenetetrazol-induced seizure susceptibility in mice. *J Neurosci*, **19**, 6733-9.
- 139. Ferraro T.N., Golden G.T., Smith G.G. *et al.* (2001) Quantitative genetic study of maximal electroshock seizure threshold in mice: evidence for a major seizure susceptibility locus on distal chromosome 1. *Genomics*, **75**, 35-42.
- 140. Ferraro T.N., Golden G.T., Smith G.G., DeMuth D., Buono R.J. and Berrettini W.H. (2002) Mouse strain variation in maximal electroshock seizure threshold. *Brain Res*, **936**, 82-6.
- 141. Ferraro T.N., Golden G.T., Smith G.G. *et al.* (2004) Fine mapping of a seizure susceptibility locus on mouse Chromosome 1: nomination of Kcnj10 as a causative gene. *Mamm Genome*, **15**, 239-51.

- 142. Ferraro T.N., Golden G.T., Dahl J.P., Smith G.G., Schwebel C.L., MacDonald R., Lohoff F.W., Berrettini W.H. and Buono R.J. (2007) Analysis of a quantitative trait locus for seizure susceptibility in mice using bacterial artificial chromosome-mediated gene transfer 4. *Epilepsia*, **48**, 1667-1677.
- 143. Bergren S.K., Chen S., Galecki A. and Kearney J.A. (2005) Genetic modifiers affecting severity of epilepsy caused by mutation of sodium channel Scn2a. *Mamm.Genome*, **16**, 683-690.
- 144. Bergren S.K., Rutter E.D. and Kearney J.A. (2009) Fine mapping of an epilepsy modifier gene on mouse Chromosome 19. *Mamm.Genome*, **20**, 359-366.
- 145. Jorge B.S., Campbell C.M., Miller A.R., Rutter E.D., Gurnett C.A., Vanoye C.G., George A.L., Jr. and Kearney J.A. (2011) Voltage-gated potassium channel KCNV2 (Kv8.2) contributes to epilepsy susceptibility. *Proc.Natl.Acad.Sci.U.S.A*, **108**, 5443-5448.
- 146. Ohmori I., Ouchida M., Kobayashi K., Jitsumori Y., Mori A., Michiue H., Nishiki T., Ohtsuka Y. and Matsui H. (2013) CACNA1A variants may modify the epileptic phenotype of Dravet syndrome. *Neurobiol.Dis.*, 50, 209-217.
- 147. Burgess D.L., Kohrman D.C., Galt J., Plummer N.W., Jones J.M., Spear B. and Meisler M.H. (1995) Mutation of a new sodium channel gene, Scn8a, in the mouse mutant 'motor endplate disease'. *Nat.Genet.*, **10**, 461-465.
- 148. Martin M.S., Tang B., Papale L.A., Yu F.H., Catterall W.A. and Escayg A. (2007) The voltage-gated sodium channel Scn8a is a genetic modifier of severe myoclonic epilepsy of infancy. *Hum.Mol.Genet*, **16**, 2892-2899.
- 149. Dick D.J., Boakes R.J., Candy J.M., Harris J.B. and Cullen M.J. (1986) Cerebellar structure and function in the murine mutant "jolting". *J.Neurol.Sci.*, **76**, 255-267.
- 150. Kohrman D.C., Plummer N.W., Schuster T., Jones J.M., Jang W., Burgess D.L., Galt J., Spear B.T. and Meisler M.H. (1995) Insertional mutation of the motor endplate disease (med) locus on mouse chromosome 15. *Genomics*, **26**, 171-177.
- 151. Kohrman D.C., Harris J.B. and Meisler M.H. (1996) Mutation detection in the med and medJ alleles of the sodium channel Scn8a. Unusual splicing due to a minor class AT-AC intron. *J.Biol.Chem.*, **271**, 17576-17581.
- 152. Kohrman D.C., Smith M.R., Goldin A.L., Harris J. and Meisler M.H. (1996) A missense mutation in the sodium channel Scn8a is responsible for cerebellar ataxia in the mouse mutant jolting. *J.Neurosci.*, **16**, 5993-5999.
- 153. Glasscock E., Qian J., Yoo J.W. and Noebels J.L. (2007) Masking epilepsy by combining two epilepsy genes. *Nat.Neurosci.*, **10**, 1554-1558.
- 154. Peiffer A., Thompson J., Charlier C. *et al.* (1999) A locus for febrile seizures (FEB3) maps to chromosome 2q23-24. *Ann.Neurol.*, **46**, 671-678.
- 155. Singh N.A., Pappas C., Dahle E.J. *et al.* (2009) A role of SCN9A in human epilepsies, as a cause of febrile seizures and as a potential modifier of Dravet syndrome. *PLoS.Genet*, **5**, e1000649.

- 156. Mulley J.C., Hodgson B., McMahon J.M. *et al.* (2013) Role of the sodium channel SCN9A in genetic epilepsy with febrile seizures plus and Dravet syndrome. *Epilepsia*, **54**, e122-e126.
- 157. Hawkins N.A., Martin M.S., Frankel W.N., Kearney J.A. and Escayg A. (2011) Neuronal voltage-gated ion channels are genetic modifiers of generalized epilepsy with febrile seizures plus. *Neurobiol.Dis.*, **41**, 655-660.
- 158. Kearney J.A., Yang Y., Beyer B., Bergren S.K., Claes L., Dejonghe P. and Frankel W.N. (2006) Severe epilepsy resulting from genetic interaction between Scn2a and Kcnq2. *Hum.Mol.Genet*, **15**, 1043-1048.
- 159. Frankel W.N., Taylor L., Beyer B., Tempel B.L. and White H.S. (2001) Electroconvulsive thresholds of inbred mouse strains. *Genomics*, **74**, 306-12.
- 160. Bockenhauer D., Feather S., Stanescu H.C. *et al.* (2009) Epilepsy, ataxia, sensorineural deafness, tubulopathy, and KCNJ10 mutations. *N.Engl.J.Med*, **360**, 1960-1970.
- 161. Imbrici P., Jaffe S.L., Eunson L.H., Davies N.P., Herd C., Robertson R., Kullmann D.M. and Hanna M.G. (2004) Dysfunction of the brain calcium channel CaV2.1 in absence epilepsy and episodic ataxia. *Brain*, **127**, 2682-2692.
- 162. Kearney JA, George AL, Gurnett C. *KCNV2* (Kv8.2) influences epilepsy susceptibility in mice and humans. Gordon Conference on Mechanisms of Epilepsy and Neuronal Synchronization [Waterville, ME], 08-08-08/13. 8-11-2010. Ref Type: Abstract
- 163. Lenzen K.P., Heils A., Lorenz S., Hempelmann A., Hofels S., Lohoff F.W., Schmitz B. and Sander T. (2005) Supportive evidence for an allelic association of the human KCNJ10 potassium channel gene with idiopathic generalized epilepsy. *Epilepsy Res.*, **63**, 113-118.
- 164. Scholl U.I., Choi M., Liu T. *et al.* (2009) Seizures, sensorineural deafness, ataxia, mental retardation, and electrolyte imbalance (SeSAME syndrome) caused by mutations in KCNJ10. *Proc Natl Acad Sci U S A*, **106**, 5842-5847.
- 165. Turnbull J., Lohi H., Kearney J.A., Rouleau G.A., gado-Escueta A.V., Meisler M.H., Cossette P. and Minassian B.A. (2005) Sacred disease secrets revealed: the genetics of human epilepsy. *Hum.Mol.Genet*, **14 Spec No. 2**, 2491-2500.
- 166. Shorvon SD, Perucca E, Fish D, Dodson PD (2004) *The Treatment of Epilepsy*. Blackwell, Malden.
- 167. Ottman R., Hirose S., Jain S., Lerche H., Lopes-Cendes I., Noebels J.L., Serratosa J., Zara F. and Scheffer I.E. (2010) Genetic testing in the epilepsies--report of the ILAE Genetics Commission. *Epilepsia*, **51**, 655-670.

CHAPTER II

CONFIRMATION OF AN EPILEPSY MODIFIER LOCUS ON MOUSE CHROMOSOME 11 AND CANDIDATE GENE ANALYSIS BY RNA-SEQ^{*}

Introduction

Mutations in voltage-gated sodium channels are responsible for several types of human epilepsy (1). Mutations in *SCN1A* were first identified in patients with Genetic Epilepsy with Febrile Seizure Plus (GEFS+) (2). Subsequently, *SCN1A* mutations were identified in patients with Dravet, a severe infant-onset epileptic encephalopathy (3). To date, nearly 900 epilepsy mutations in *SCN1A* have been reported. A smaller number of mutations in *SCN2A* have been identified in patients with benign familial neonatal-infantile seizures (BFNIS), GEFS+, Dravet and Ohtahara syndromes. (4). Affected family members with the same sodium channel mutation often display variability in the clinical severity of their disease, a common feature of genetic epilepsy. This suggests that epilepsy phenotype is influenced by other factors, which may include genetic modifiers.

A common feature of mouse seizure models, including sodium channel mutants, is that seizure susceptibility and severity vary significantly depending on the genetic strain background. This indicates that complex genetics, for example genetic modifiers, contribute to the variable phenotype observed in seizure models. These mouse models provide a useful system for identifying modifier genes that may also contribute to variable expressivity in human epilepsy patients. Genes that influence a mutant phenotype

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can be identified systematically by evaluating the seizure phenotype on different background strains. Several strain-dependent seizure susceptibility loci and genes have already been identified (5-16).

The transgenic mouse model $Scn2a^{Q54}$ (Q54) has an epilepsy phenotype due to a mutation in Scn2a that slows channel inactivation and results in persistent sodium current (17). Severity of the epilepsy phenotype in Q54 mice is highly dependent on the genetic background. The phenotype is less severe on the resistant C57BL/6J (B6) strain, while it is more severe on the SJL/J (SJL) strain. We previously mapped two loci, *Moe1* (Modifier of epilepsy) on chromosome 11 and *Moe2* on chromosome 19, that influence severity of the Q54 phenotype (18). Fine mapping of *Moe2* identified *Kcnv2* as a strong candidate gene (19). Transgenic transfer of the modified phenotype *in vivo* supported the identification of *Kcnv2* as a modifier gene in mice (20). Discovery of two novel human *KCNV2* mutations in pediatric epilepsy patients suggested that *KCNV2* may also contribute to human epilepsy susceptibility (20).

In this study, we generated interval-specific congenic (ISC) lines to confirm and fine map the *Moel* locus on chromosome 11. Our results indicated the *Moel* locus is complex with at least two modifiers in the interval that exhibit sex-specific effects. We then used an RNA-Seq approach for candidate gene analysis within the *Moel* sub-intervals. *Moel* RNA-Seq data revealed numerous transcriptome differences and coding single-nucleotide polymorphisms (SNPs) between sex and strain. We further evaluated and prioritized candidate modifier genes that may contribute to strain-dependent differences in seizure susceptibility in Q54 mice.

Materials and Methods

Mice

Q54 transgenic mice [Tg(Eno2-Scn2a1*)Q54Mm] were generated as previously described (17). The Q54 line congenic on the B6 strain (B6.Q54) was established as described and is maintained by continued backcrossing of B6.Q54 hemizygous males to B6 females (Jackson Labs stock #000664) (18). Mice were group-housed with access to food and water *ad libitum*. All studies were approved by the Vanderbilt University Animal Care and Use Committees in accordance with the National Institutes of Health Guide for the Care and Use of Laboratory Animals.

Generation of ISC Lines

Four ISC lines were generated carrying differing B6-derived chromosome 11 segments within *Moe1* on a congenic SJL background. B6 males were crossed with SJL females to create F1 progeny. Offspring from each generation were then continually backcrossed to SJL to generate congenic lines. Whole genome genotyping was performed at generations N2 and N5 using the mouse MMDAP 768 SNP panel on the Illumina GoldenGate Platform (Illumina, San Diego, CA, USA) (21). Animals retaining B6 alleles in *Moe1* with the lowest percentage of B6 alleles in the rest of the genome were selected for breeding to the next generation. Once established, ISC strains were maintained by continued backcrossing to SJL and genotyping for chromosome 11 microsatellite (MIT) markers at all generations. All ISC lines were backcrossed for \geq 10 generations prior to experiments.

Genotyping

Mice were tail biopsied on postnatal day 14 and genotyped. DNA was prepared from tail biopsies by phenol:chloroform extraction and ethanol precipitation or using the Gentra Puregene Mouse Tail Kit according to the manufacturer's instructions (Qiagen, Valencia, CA, USA). The Q54 transgene was genotyped as previously described (18). ISC lines were genotyped for chromosome 11 MIT markers by polymerase chain reaction and analyzed on 2% agarose or 7% non-denaturing polyacrylamide gels.

Phenotyping

Chromosome 11 ISC females were crossed with hemizygous B6.Q54 males to generate (B6.Q54 \times ISC.SJL).F1 offspring (F1.Q54) carrying heterozygous or homozygous B6 alleles in *Moe1*. We used a similar phenotyping paradigm used for low-resolution mapping of the *Moe1* locus (18). Briefly, F1.Q54 offspring underwent 30 minute video-taped observations at three and six weeks of age. All observation sessions occurred between 1:00 PM and 4:00 PM. On the basis of prior extensive video-electroencephalogram monitoring, spontaneous behavioral seizures were assessed offline by a blinded observer using Observer XT software (Noldus, Wageningen, Netherlands) (17). We counted the number of visible focal motor seizures with forelimb clonus and repetitive movements lasting one to five seconds (Racine seizure scale 3) (22). Seizure counts from the three and six week observations were combined to obtain a frequency of seizures in 60 minutes for each animal.

Statistical Analysis

Average seizure frequencies were compared between ISC lines and controls by analysis of variance (ANOVA) with Fisher's protected least significant difference (PLSD) *post hoc* test ($n \ge 9$ per group). Outlier analysis was performed and subjects with seizure frequencies two standard deviations above and below the mean at three or six weeks of age were removed. Mice with missing three or six week data due to outlier frequencies or death were not included in the study. Preliminary analysis indicated that males and females differed within the strains. Therefore, male and female data were analyzed separately. Survival was assessed until 12 weeks of age using Kaplan-Meier analysis with P-values reported from Logrank Mantel-Cox.

RNA Isolation

Total RNA was isolated from whole brains of six week old B6 or SJL male and female mice with the TRIzol reagent according to the manufacturer's instructions (Invitrogen, Carlsbad, CA, USA). RNA integrity was assessed on an Agilent 2100 Bioanalyzer (Agilent, Santa Clara, CA, USA) and all samples received RNA integrity numbers (RIN) of \geq 8.20. For each group, total RNAs from four mice were combined to generate a pooled sample.

Sample Preparation for RNA-Seq

Starting with three µg of total RNA, samples underwent poly-A selection, chemical fragmentation and first and second strand cDNA synthesis using the TruSeq RNA sample preparation kit (Illumina, San Diego, CA, USA). Following second strand

cDNA synthesis, samples were prepared for sequencing on the Illumina HiSeq 2000 platform in the Vanderbilt Technologies for Advanced Genomics Core (http://vantage. vanderbilt.edu) according to standard methods (23). Two multiplexed lanes of 100-bp single-end sequencing were performed, resulting in 75 million mappable reads per lane.

RNA-Seq Data Analysis

Base calling and filtering of sequence reads were performed with the Illumina pipeline (23). Subsequent analysis was performed using Tuxedo Tools on the open, webbased platform GALAXY (24-26). Tophat aligned RNA-Seq reads to the mm9 genome using Bowtie, allowing reads that span exon–exon boundaries to be aligned to the correct genomic location. Following alignment, novel splice variants were identified (27-29). Cufflinks assembled transcripts, estimated abundance in fragments per kilobase of exon per million fragments mapped (FPKM) and tested for differential expression and regulation. Cuffcompare combined Cufflink transcript data across sex and strain. Cuffdiff tested for statistically significant differences in total gene and transcript expression, splicing, transcription start sites (TSS) and promoter usage (30-32). Parameter settings for each analysis tool are detailed in Table 2.1.

Variant calls were performed by the Vanderbilt Computational Genomics Core using the Genome Analysis Toolkit for SNP discovery (http://www.broadinstitute.org/ gsa/wiki/index.php/Main_Page). Quality filtering retained SNPs with a Phred score of >Q20. Additional manual filtering removed the following: SNPs that were different between male and female of the same strain, heterozygous or groups with missing sample data. SNPs that were homozygous alternate from the B6 reference genome were retained. Variant call format (VCF) files were uploaded to Ensembl's Variant Effect Predictor to reveal the functional consequences of identified variants (33). Non-synonymous amino acid substitutions were uploaded to sift (http://sift.jcvi.org/) to predict the potential impact on protein function (34).

Table 2.1 Parameter Settings for GALAXY RNA-Seq Analysis RNA-Seq analysis was performed by GALAXY using the following parameters. RNA-Seq reads were aligned by Tophat to the mm9 genome by Bowtie. Cufflinks assembled transcripts, estimated abundance in FPKM and tested for differential expression and regulation. Cuffcompare combined Cufflinks transcript data across sex and strain. Cuffdiff tested for statistically significant differences in total gene and transcript expression, splicing, TSS and promoter usage.

Tool	Parameter	Setting
	Anchor length	8
	Max. number of mismatches in the anchor region of spliced alignment	0
	Min. intron length	70
	Max. intron length	500000
	Allow indel search	Yes
	Max insertion length	3
	Max deletion length	3
	Max. number of alignments allowed	20
Tophat	Min. intron length found during split-segment (default) search	50
$(V \ 1 \ 1 \ 2)$	Max. intron length found during split-segment (default) search	500000
(*. 1.1.2)	Number of mismatches allowed in the initial read mapping	2
	Number of mismatches allowed in each segment alignment for reads mapped	2
	Min. length of read segments	25
	Use own junctions	No
	Use closure search	No
	Use coverage search	Yes
	Min. intron length that may be found during coverage search	50
	Max. intron length that may be found during coverage search	20000
	Use microexon search	No
	Max. intron length	300000
	Min. isoform fraction	0.1
Cufflinks	Pre MRNA fraction	0.15
(V, 0, 0, 5)	Perform quartile normalization	No
(*.0.0.3)	Use reference annotation	Yes
	Perform bias correction	No
	Set parameters for paired-end reads	No
Cuff-	Use reference annotation	Yes
compare	Use sequence data	Yes
(V. 0.0.5)	Choose the source for the reference list	Local
	Perform replicate analysis	No
	False discovery rate	0.05
Cuffdiff	Min. alignment count	1000
(V. 0.0.5)	Perform quartile normalization	No
	Perform bias correction	No
	Set parameters for paired-end reads	No

Results

Interval-Specific Congenics

We previously mapped the Q54 modifier *Moe1* to mouse chromosome 11 with a peak at D11MIT289 (95 Mb) (18). Inheritance of an SJL allele at this locus conferred increased seizure resistance, while homozygosity for B6 alleles conferred increased susceptibility. To confirm the initial mapping results and refine the *Moe1* interval, we generated four ISC lines. Each line contained varying B6-derived chromosome 11 segments within the *Moe1* 1 LOD support interval on a congenic SJL background. ISC lines are represented by their MIT marker location. The resulting ISC lines were as follows: ISC-A (D11Mit33-D11Mit58, 81–104 Mb); ISC-B (D11Mit33-D11Mit122, 81–93 Mb); ISC-C (D11Mit122-D11Mit58, 93–104 Mb); ISC-D (D11Mit284-D11Mit58, 89–104 Mb) (Figure 2.1).



Figure 2.1 Fine Mapping of *Moe1* with ISC Lines

ISC lines were generated with varying B6-derived chromosome 11 segments (colors) on an SJL background (white). MIT markers used for ISC generation are identified along the chromosome. The original mapping for epilepsy susceptibility localized the *Moe1* peak to D11Mit289.

ISC Phenotyping

Chromosome 11 ISC females were crossed with B6.Q54 males to generate F1.Q54. Offspring were heterozygous or homozygous for B6 alleles in *Moe1* (Figure 2.2). Genotypes for the F1 generation were obtained at the expected Mendelian ratios. F1.Q54 offspring underwent 30 minute video-taped observations for visible spontaneous focal motor seizures at three and six weeks of age. Average seizure frequencies (# seizures/60 minutes) were compared between ISC groups carrying homozygous B6 alleles and controls carrying heterozygous alleles. Preliminary analysis indicated within-strain sex differences suggesting the possibility of sex-specific modifier effects.



Figure 2.2 ISC Phenotyping Paradigm

ISC lines were crossed with B6.Q54, generating F1.Q54 offspring. F1.Q54 mice will be heterozygous or homozygous for B6 alleles in *Moe1*.

A significant difference in seizure frequency was identified between ISC males and controls by ANOVA ($F_{4,70} = 3.321$, p < 0.015). Male mice carrying homozygous B6 alleles in the ISC-D interval (89–104 Mb) exhibited more seizures than heterozygous control littermates (p < 0.003) (Figure 2.3). Interestingly, males with homozygous B6 alleles in the ISC-C interval (93-104 Mb) showed no difference compared to heterozygous control littermates (p > 0.496) (Figure 2.3). This suggests that the small region of non-overlap between ISC-C and ISC-D (D–C; 89–93 Mb) is likely responsible for increased seizure frequency in males.



Figure 2.3 Seizure Frequency in ISC Males

Average number of seizures in 60 minutes for each genotype group is shown. Significant differences between genotype groups were determined by ANOVA: $F_{4,70}$ = 3.321, p < 0.015 with significant p-values determined by Fishers PLSD *post hoc* test. Data are represented as mean ± SEM.

A significant difference in seizure frequency was identified between ISC females and controls by ANOVA ($F_{4,70} = 2.601$, p < 0.043). Female mice carrying homozygous B6 alleles in the ISC-C interval (93–104 Mb) exhibited more seizures than heterozygous control littermates (p < 0.047) (Figure 2.4). This suggests that B6 homozygosity in the distal *Moe1* interval is permissive in females. Surprisingly, females with homozygous B6 alleles in the ISC-D interval (89–104 Mb) showed no difference in seizure frequency compared to heterozygous control littermates (p > 0.805). This suggests the male modifier located in the small region of non-overlap between ISC-C and ISC-D (D–C; 89– 93 Mb) may mask the effect of the distal permissive modifier in females.



Figure 2.4 Seizure Frequency in ISC Females Average number of seizures in 60 minutes for each genotype group is shown. Significant differences between genotype groups were determined by ANOVA: $F_{4,70}$ = 2.601, p < 0.043 with significant p-values determined by Fishers PLSD *post hoc* test. Data are represented as mean ± SEM.

In both sexes, B6 homozygosity in the large ISC-A region (81–104 Mb) that spans the entire *Moel* 1 LOD support interval did not result in significant differences in seizure frequency compared to heterozygous controls (Males: p > 0.312; Females: p >0.097). This suggests that multiple modifiers lie within *Moel*. B6 homozygosity in the proximal region of the *Moel* interval may mask the effect of more distal permissive modifiers in both males and females. However, B6 homozygosity in the small ISC-B proximal interval (81–93 Mb) alone does not significantly reduce seizure frequency compared to heterozygous controls (Males: p > 0.713; Females: p > 0.201).

ISC x B6.Q54 Survival

We also determined the effect of ISC regions on lifespan in the F1.Q54 offspring generated by crossing ISC-A, B, C and D lines with B6.Q54. Following seizure analysis described above, F1.Q54 mice were monitored for survival to 12 weeks of age. We compared survival between F1.Q54 mice carrying B6 alleles in the ISC intervals with control heterozygous littermates using Kaplan Meier analysis. Survival to 12 weeks of age was significantly altered in females. Female mice carrying homozygous B6 alleles in the ISC-A interval had significantly reduced survival compared to heterozygous control littermates (p < 0.004) and ISC-B females (p < 0.007) (Figure 2.5, dashed). There was no significant difference in survival identified in males (Figure 2.5, solid). Within genotype groups there were sex-specific significant differences in survival. Among mice with homozygous B6 alleles in ISC-A, males lived significantly longer than females (p < 0.009) (Figure 2.5).



Figure 2.5 Kaplan Meier Survival Plot of ISC and Control Lines

F1.Q54 ISC-A, B, C, D and control heterozygous littermates were monitored until 12 weeks of age. ISC-A females live significantly shorter lives than control littermates (p < 0.004) and ISC-B females (p < 0.007). When comparing across sex, ISC-A males live significantly longer than ISC-A females (p < 0.009).

Candidate Gene Analysis by RNA-Seq

Due to the complexity of the *Moe1* interval and the high gene density of chromosome 11, we performed sequence-based transcriptome analysis in order to identify candidate modifier genes in *Moe1*. Focused analysis of *Moe1* revealed numerous significant differences in total gene and transcript expression, TSS, alternate promoter usage and splicing (Table 2.2). Our ISC results indicated that B6 homozygosity in the D–C interval (89–93 Mb) increased seizure frequency in males. Within the D–C interval, RNA-Seq identified three genes with significant gene or transcript expression differences between B6 and SJL males. On the basis of our female ISC experiments, B6 homozygosity in the ISC-C interval (93–104 Mb) increased seizure frequency. In the ISC-C region, RNA-Seq analysis revealed 32 genes with significant gene or transcript expression differences between B6 and SJL females. A complete list of significant differences in the *Moe1* region by RNA-Seq is provided in Table 2.2.

 Table 2.2 Significant Differences in the Moel Interval Via RNA-Seq

Grey shading in	idicates a	significant	difference;	Open box	es indicate	no	difference.	Abbreviations	are	as
follows: $B = C5$	7BL/6J, S	= SJL/J, M	= Male, F=	Female.						

			Ge	ene		Tı	an	scr	ipt		T	SS		P	ron	not	er	S	Spli	cin	g
Interval	Gene	BM v BF	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF
	Aatf																				
	Akap 1																				
	Cltc																				
	Dgke																				
В	Dhx40																				
	Dusp14																				
	Dynll2																				
	Ggnbp2																				
	Gm11478																				

Table 2.2 (Cont.) Significant Differences in the Moel Interval Via RNA-Seq

Grey shading indicates a significant difference; Open boxes indicate no difference. Abbreviations are as follows: B = C57BL/6J, S = SJL/J, M = Male, F = Female.

			Gene			Tı	ran	scr	ipt		T	SS		Promoter				Splicing			
Interval	Gene	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF
	Gm11512																				
	Gm11516																				
	Ints2																				
	Med13																				
	Msi2																				
	Pigw																				
В	Rffl																				
	Rpl13-ps1																				
	Rps6kb1																				
	Tada2a																				
	Usp32																				
	Vmp1																				
	Znhit3																				
	Gm11511																				
	Gm11512																				
DC	Gm11516																				
D-C	Hlf																				
	Stxbp4																				
	Tom 111																				
	1110035M17Rik																				
	1700081L11Rik																				
	Aarsd1																				
	Abi3																				
	Acly																				
	Atp5g1																				
	Atxn7l3																				
С	Becn1																				
	Cacnalg																				
	Cacnb1																				
	Ccdc56																				
	Cdc27																				
	Cdk5rap3																				
	Dcakd																				
	Dhx58																				

Table 2.2 (Cont.) Significant Differences in the Moel Interval Via RNA-Seq

Grey shading indicates a significant difference; Open boxes indicate no difference. Abbreviations are as follows: B = C57BL/6J, S = SJL/J, M = Male, F = Female.

			Ge	ene		Tı	an	scr	ipt		T	SS		P	ron	not	er	S	Spli	cin	g
Interval	Gene	$BM \vee BF$	SM v SF	BM v SM	BF v SF	BM v BF	SM v SF	BM v SM	BF v SF	BM v BF	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	BM v BF	SM v SF	BM v SM	BF v SF
	Dnajc7																				
	Dusp3																				
	Eftud2																				
	Ezh1																				
	Fam134c																				
	Fam171a2																				
	Fbxl20																				
	Gfan																				
	Gm 10039																				
	<i>Gm10039</i>																				
	Gm11318	_																			_
	Gm12339																			ļ	_
	Gosr2																				_
	Gpatch8																				
	Hap 1																				
	Hdac5																				
	Itga3																				
	Jup																				
С	Kat2a																				
	Krt222																				
	Lrrc46																				
	Lsm12																				
	Luc/l3																				
	Med1 Med24								_												-
	Mpp2																				
	Мрр3																				
	Myst2																				
	Nfe2l1																				
	Nme1																				
	Npepps																				
	Nr1d1 Nef																				
	Nt5c31								-												_
	Pcgf2																				
	Pdk2	1																			
	Pip4k2b	1																		<u> </u>	
	Plcd3	1							┢					┢							
	Plekhh3																				

Table 2.2 (Cont.) Significant Differences in the Moel Interval Via RNA-Seq

Grey shading indicates a significant difference; Open boxes indicate no difference. Abbreviations are as follows: B = C57BL/6J, S = SJL/J, M = Male, F = Female.

			Ge	ene		Tı	an	scr	ipt		T	SS		P	ror	not	er	5	Spli	cin	ıg
Interval	Gene	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF	$BM \vee BF$	SM v SF	BM v SM	BF v SF
	Plxdc1																				
	Pnpo																				
	Rab5c																				
	Slc25a39																				
	Smarce1																				
0	Snx11																				
C	Sp2																				
	Srcin1																				
	Tbkbp1																				
	Ubtf																				
	Xylt2																				
	Zfp385c																				

To further evaluate candidate genes, we performed SNP analysis to identify genes with coding sequence polymorphisms between B6 and SJL. In region D–C (89–93 Mb), which contains 26 known and predicted genes, we identified 25 SNPs, including two non-synonymous (NS) SNPs in the gene *Tom111*. In interval C (93–104 Mb), which contains 534 known and predicted genes, we identified 630 SNPs, including 29 NS SNPs in 22 genes. The complete list of NS-coding polymorphisms in *Moe1* and the predicted impact on protein function are provided in Table 2.3.

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Table 2.3 Non-Synonymous Coding SNPS in Moe1SNPs were uploaded to Ensembl's variant call predictor to reveal functional consequences of variants. NS amino acid substitutions were uploaded to SIFT to predict the potential impact on protein function.

			Amino			
Interval	Gene	Location	Change	SNP	RS#	Sift Prediction
incivai	Zfp830	11:82578439	R/K	aGg/aAg	Ro #	TOLERATED with a score of 0.95
	Lig3	11:82604104	R/S	agG/agT	rs28225588	TOLERATED with a score of 1
	Lig3	11:82609212	K/R	aAa/aGa	rs28225573	TOLERATED with a score of 0.26
	Lig3	11:82610931	V/D	eTt/eAt	rs28225563	TOLERATED with a score of 1
	Lig3	11:82613102	N/S	aAt/aGt	rs28225556	TOLERATED with a score of 1
	Rad51i3	11.82605305	V/A	«Tc/«Cc	rs28209138	AFFECT PROTEIN FUNCTION with a score of 0.02
	Nle1	11:82718877	V/I	Gtt/Att	rs13468707	TOLERATED with a score of 1
	Dusp 14	11:83862583	W/R	Teg/Ceg	rs13459132	TOLERATED with a score of 0.59
	Ints?	11:86031421	МЛ	atG/atA	rs29431276	TOLERATED with a score of 0.07
	Ints2	11:86064535	R/H	cGt/cAt	rs29420094	TOLERATED with a score of 1
	Tubd1	11.86004333	т/5		rs27026986	TOLERATED with a score of 0.96
	Dana 1	11.80374707	G/R	Gaa/Aaa	rs51462366	TOLERATED with a score of 0.64
В	Bzrap 1	11:87570706	мл	Atg/Ctg	rs28278310	TOLERATED with a score of 0.34
	Bzrap I	11:87501464	A/S	Gen/Ten	rs28278307	TOLERATED with a score of 0.54
	Биро	11:87591464	N/S	t A a/t Ca	ro12472575	TOLERATED with a score of 0.46
	Lpo Miss1	11.87623710	I/S K/R	aAg/aGg	rs51587946	TOLERATED with a score of 1
	M ks l	11:87670369	K/K S/A	Tca/Gca	rs20/3/28/	TOLERATED with a score of 0.89
	Vezri	11:87886991	N/V	A at/Tat	1329434204	TOLERATED with a score of 0.07
		11:8/9981/4	IN/ I M/I	Adt/1 at	1828240982	TOLERATED with a score of 0.21
	Акарт	11:88705691	тл	arG/arC	1829403244	TOLERATED with a score of 0.06
	Akap I	11:88706130	1/I ЕЛ	acc/arc	1827110277	TOLERATED with a score of 0.75
	Akapl	11:88706174	F/L		182/1102/0	TOLERATED with a score of 0.75
	Akap I	11:88706910	C/S	tT=#C=	182/1102/5	TOLERATED with a score of 0.02
	Coil	11:88842523	L/5	rigicg	1829405595	A FEFECT PROTEIN EUNCTION VI CO 02
	Coil	11:88843369	G/D	gGc/gAc	121/0207	AFFECT PROTEIN FUNCTION with a score of 0.03
D-C	Tom111			aCt/aIt	rs13469307	TOLERATED with a score of 0.027
	Samd14	11.94886027	N/H	Aac/Cac	rs27101631	TOLERATED with a score of 0.09
	Ube2z	11:95926522	S/A	Tcg/Gcg	1027101001	TOLERATED with a score of 0.38
	Cdk5rap3	11:96770100	T/M	aCg/aTg		TOLERATED with a score of 0.10
	Sp2	11:96822911	T/I	aCc/aTc	rs3708840	TOLERATED with a score of 0.62
	Arhgap 23	11:97309791	I/V	Atc/Gtc	rs45809946	TOLERATED with a score of 0.80
	Cwc25	11:97614056	R/W	Cgg/Tgg	rs27089733	DAMAGING with a score of 0.01
	Plxdc1	11:97802222	A/E	gCg/gAg	rs27073969	TOLERATED with a score of 0.31
	Plxdc1	11:97817828	Q/R	cAa/cGa	rs27057105	TOLERATED with a score of 0.53
	Nr1d1	11:98631530	R/Q	cGg/cAg	rs27041024	TOLERATED with a score of 0.29
	Rap gefl1	11:98708468	R/P	cGg/cCg		TOLERATED with a score of 0.15
	Top2a	11:98855618	P/L	cCt/cTt		TOLERATED with a score of 0.19
	Top2a	11:98855703	T/A	Act/Gct	rs27025992	TOLERATED with a score of 0.61
	Krt10	11:99250636	L/R	cTa/cGa		AFFECT PROTEIN FUNCTION with a score of 0.00
	Fkbp10	11:100284113	G/S	Ggc/Agc		AFFECT PROTEIN FUNCTION with a score of 0.00
С	Nt5c3l	11:100291151	C/Y	tGc/tAc		TOLERATED with a score of 1
	Nt5c3l	11:100291164	Y/H	Tac/Cac	rs29442152	TOLERATED with a score of 0.55
	Nt5c3l	11:100301235	C/F	tGt/tTt		TOLERATED with a score of 0.72
	Cnp	11:100441755	D/G	gAt/gGt		AFFECT PROTEIN FUNCTION with a score of 0.03
	Zfp385c	11:100490929	A/T	Gct/Act	rs27090504	TOLERATED with a score of 0.47
	Ramp2	11:101107793	P/T	Ccg/Acg		TOLERATED with a score of 0.25
	Wnk4	11:101136570	A/S	Gct/Tct	rs52181149	TOLERATED with a score of 1
	Aarsd1	11:101278496	S/N	aGc/aAc	rs13468999	TOLERATED with a score of 0.51
	Rundc1	11:101292783	V/A	gTg/gCg	rs27057199	TOLERATED with a score of 0.59
	Rundc1	11:101294928	H/P	cAc/cCc		TOLERATED with a score of 1
	Rundc1	11:101295155	L/I	Ctt/Att	rs6402514	TOLERATED with a score of 1
	Rundc1	11:101295452	V/M	Gtg/Atg		TOLERATED with a score of 0.07
	Etv4	11:101632794	I/F	Att/Ttt	rs28234792	TOLERATED with a score of 0.71
	Tmub2	11:102149413	S/N	aGc/aAc	rs29484653	TOLERATED with a score of 0.49
	Adam11	11:102634721	Q/K	Cag/Aag		TOLERATED with a score of 0.91

Following RNA-Seq analysis, we prioritized candidate genes based on the ISC mapping results, consideration of gene function, location and timing of expression and prior evidence of involvement in neuronal hyperexcitability (Table 2.4). Top candidate modifier genes were identified as *Hlf* in males and *Cacna1g* and *Cacnb1* in females.

Table 2.4 Top Candidate Modifier Genes in Moe1

[†]Priority rating is based on biological function and prior association with neuronal hyperexcitability phenotypes. *** highest priority; **moderate priority; *low priority.

Interval	Priority [†]	Gene Symbol	Gene Name
р	*	Cltc	Clathrin
D	*	Dynll2	Dynein Light Chain 2
D-C	***	Hlf	Hepatic Leukemia Factor
	***	Cacnalg	Voltage-Dep. Ca ²⁺ Channel, T type, α1G
	***	Cacnb1	Voltage-Dep. Ca^{2+} Channel, $\beta 1$
С	**	Slc25a39	Solute Carrier Family 25, Member 39
	*	Pnpo	Pyridoxine 5'-Phosphate Oxidase
	*	Hap 1	Huntingtin-Associated Protein 1

In the D–C interval (89–93 Mb) that contains the male-specific modifier, there were significant expression differences between B6 and SJL males in two genes, *Hlf* (hepatic leukemia factor) and *Stxbp4* (syntaxin binding protein 4) and a processed pseudogene, *GM11512*. *Stxbp4* functions in the insulin receptor signaling pathway and glucose transport (35). Currently, there is no evidence linking *Stxbp4* to neuronal hyperexcitability. *Hlf* is a member of the proline and acidic amino acid-rich basic leucine zipper (PAR bZIP) transcription factor family which has previously been linked to epilepsy (36). A significant difference in a *Hlf* transcript was only identified between B6

and SJL males, consistent with a male-specific effect (Figure 2.6). Taken together, this suggests that *Hlf* is a strong candidate modifier gene in males (Table 2.4).



Figure 2.6 Expression of *Hlf-002* **Transcript in B6 and SJL Brain** The RNA-Seq FPKM values and confidence interval for each group is shown. Boxes represent the range of values and whiskers represent the 95% confidence interval calculated by Cuffdiff. Q-values are false

discovery rate-adjusted p-values (*Hlf-002*= ENSMUST00000043658).

The ISC-C interval (93–104 Mb) which harbors a female-specific modifier contains numerous genes with expression differences between B6 and SJL females. Of the five genes with a total gene expression difference between females, three are involved in basic cellular processes and two have unknown function. RNA-Seq identified 32 genes with significant differences in transcript expression. A large fraction of these genes are involved in basic cellular processes, with no direct evidence connecting them to neuronal hyperexcitability. There was a significant strain difference in transcript expression of

Slc25a39, which is a member of the mitochondrial solute carrier family 25 (SLC25) (37). A family-based study of epilepsy with suggestive linkage to chromosome 17q12-24 showed differential expression of *SLC25A39* in affected family members (38). However, sequencing did not reveal a pathogenic variant in this gene. On the basis of its tenuous association with epilepsy, *Slc25a39* was retained as candidate modifier gene with lower priority (Table 2.4).

Cacna1g and *Cacnb1* emerged as top candidate modifier genes in females based on their direct connection to epilepsy and the strong association between ion channels and epilepsy. Human mutations in both genes have been identified in epilepsy patients (39-41). Differences in five major *Cacna1g* transcripts were identified between B6 and SJL females (Figure 2.7). These transcripts, differing in splicing of exons 14, 25 and 26, have known differences in gating, kinetics and voltage dependencies (42-44). There were also several significant differences in promoter usage, TSS and splice variants between sex and strain. A *Cacnb1* female-specific difference was identified between B6 and SJL in transcript *Cacnb1*-006, a processed transcript that is not translated (Figure 2.8). There were also several significant differences in promoter usage, TSS and splice variants between sex and strain.



Figure 2.7 Differential Expression of Cacnalg Alternatively Spliced Transcripts

Inclusion/exclusion of cassette exons 14 and 26 and alternate splicing of exon 25 are shown for the five transcripts that exhibited significant differences between B6 and SJL females. The location of alternatively spliced exons are shown on the *Cacna1g* channel protein (bottom). FPKM values and confidence intervals for B6 and SJL females are shown. Q-values are false discovery rate-adjusted p-values.



Figure 2.8 Alternative Splicing and Differential Expression of Cacnb1

A. *Cacnb1* alternatively spliced transcripts are shown. Purple shaded boxes represent coding regions and blue shaded boxes are non-coding regions. **B.** Respective FPKM values and confidence intervals for B6 and SJL female transcripts are shown (*q < 0.02). Q-values are false discovery rate-adjusted p-values.

Discussion

Genetic modifier loci influencing the Q54 epilepsy phenotype were initially mapped to chromosomes 11 (*Moe1*) and 19 (*Moe2*) in a backcross between B6 and SJL strains (18). We constructed ISC strains to confirm the presence of *Moe1* on chromosome 11 and refine the critical interval. Our results revealed that the interval likely contains multiple modifiers that contribute to phenotype severity of Q54 mice. Sex specific modifiers were also identified within the interval. Similar to our results, previous studies of epilepsy quantitative trait loci (QTL) in polygenic mouse models have shown that the substructure of QTL can be complex with multiple genes contributing to the low-resolution mapping peak (14, 45).

In females, B6 homozygosity in the ISC-C interval conferred increased seizure frequency, suggesting the presence of a permissive modifier gene in this interval. The large ISC-A region that spans the entire *Moel* 1 LOD support interval resulted in females with near-significant differences in seizure frequency (p > 0.097) and reduced survival (p < 0.004) compared to heterozygous controls. This suggests that significant differences in seizure frequency in ISC-A would likely result if more females were added to the study. Significant seizure frequency differences in ISC-A further supports *Moel* as a modifier locus of the Q54 phenotype.

In males, increased seizure frequency was associated with B6 homozygosity in the ISC-D interval but not in the ISC-C interval. This suggests that a male-specific permissive modifier is located in the small non-overlapping interval between ISC-C and ISC-D (D–C; 89–93 Mb). Interestingly, ISC-A males did not experience significant differences in seizure frequency compared to heterozygous controls (p > 0.312). This suggests that multiple modifiers lie within *Moe1* which affect the male Q54 phenotype. B6 homozygosity in the proximal region of the *Moe1* interval may mask the effect of more distal permissive modifiers in males. However, B6 homozygosity in the small ISC-B proximal interval (81–93 Mb) alone does not significantly reduce male seizure frequency compared to heterozygous controls (p > 0.713).

Utilizing RNA-Seq, we were able to identify a significant number of transcripts that exhibited within-strain sex differences throughout the *Moe1* interval. These differences likely result from multiple different causes, which may include brain sexual dimorphism, epigenetics and endocrine influences.

Combined ISC line seizure data and RNA-Seq analysis identified several strong candidate modifiers that may contribute to severity of the Q54 seizure phenotype. Top candidate modifier genes include *Cacna1g* and *Cacnb1* in females and *Hlf* in males. Although we identified significant transcript differences in *Cacna1g*, *Cacnb1* and *Hlf*, we did not identify SNPs within the coding regions. It is likely that non-coding SNPs contribute to the observed transcript differences. Future sequencing of the non-coding regions of *Cacna1g*, *Cacnb1* and *Hlf* will determine the contribution of non-coding SNPs.

Cacna1g is a T-type calcium (Ca²⁺) channel α_1 subunit which propagates lowvoltage activated (LVA) Ca²⁺ currents (46). T-type channels regulate neuronal firing by conducting Ca²⁺ during action potentials and can switch neurons between firing modes (47). T-type channels are expressed at high densities on thalamic neurons. These neurons innately oscillate during sleep, but can also inappropriately oscillate and cause a generalized seizure (48, 49). Rapid activation of T-type channels is responsible for the generation of low-threshold spikes, which trigger epileptic 'burst-firing' patterns. It is also responsible for abnormal spike-wave discharges (SWDs) in absence epilepsy that arise from synchronous firing of thalamocortical networks (50-52). Several spontaneous mouse models of absence epilepsy, including *lethargic*, *tottering* and *stargazer*, exhibit abnormalities in LVA Ca²⁺ currents, likely resulting in abnormal thalamocortical synchronization and absence epilepsy in the mutant animals (53). Deletion of *Cacna1g* in mice suppressed GABA_B receptor agonist-induced SWDs, indicating an essential role for this gene in seizure expression (52, 54). In humans, SNPs in *CACNA1G* have been associated with idiopathic generalized epilepsy (41).

Our RNA-Seq analysis identified expression, TSS, promoter usage and splicing differences in *Cacnalg* between sex and strain. Alternative splicing of T-type Ca²⁺ channels is known to contribute to their functional diversity. We identified significant strain differences between females in the expression of five major *Cacnalg* transcripts with known functional diversity. The inclusion of cassette exon 14 has been shown to shift steady-state inactivation in the hyperpolarized direction and accelerate activation and inactivation kinetics (42, 43). Inclusion of cassette exon 26 contributes to more hyperpolarized steady-state inactivation and slower recovery from inactivation (42). Exon 25 has an internal donor site, resulting in a short exon 25 (B) or full length (A) (Figure 2.7) (42-44, 55). Transcripts with the 25A exon activate and inactivate at more hyperpolarized potentials, while 25B exon transcripts have slower activation and inactivation kinetics (42). On the basis of this information, transcripts that exhibit significantly higher expression in SJL females have the most hyperpolarized steady-state inactivation potential and the fastest activation and inactivation kinetics (Figure 2.7). We hypothesize that SJL females have a higher portion of *Cacnalg* channels that activate

quickly, but inactivate rapidly and prematurely. This early inactivation state may lead to a low probability for neurons to reach synchronous oscillations, a common feature of epilepsy (50-52). Conversely, transcripts expressed at higher levels in B6 females compared to SJL are those with depolarized steady-state inactivation potentials and slower rates of activation and inactivation (Figure 2.7) (42). We hypothesize B6 females have an increased number of *Cacna1g* channels that are prone to hyperexcitability. This hyperexcitability emerges from an altered window current, resulting from inactivation shifts and rate changes, a known contributor to epilepsy (56).

Cacnb1 encodes one of four homologous Ca²⁺ channel β subunits. β subunits modulate α_1 channel trafficking, gating and kinetics (57-59). *Cacnb1* has four splice variants, which are highly expressed in the hippocampus and dentate gyrus (57, 58). β subunits have been previously linked to epilepsy in mice. *Lethargic* mice have a mutation in *Cacnb4* that results in absence epilepsy, severe ataxia and loss of motor coordination (39, 60). In humans, surgical resection samples from temporal lobe epilepsy patients exhibited an upregulation of *CACNB1* and *CACNB2* (59). It was hypothesized that the increased expression may underlie enhanced Ca²⁺ currents commonly seen in rodent kindling and kainate models of temporal lobe epilepsy (59, 61-63). *CACNB1* mutations have been identified in patients with a history of febrile seizures, juvenile myoclonic epilepsy, episodic ataxia, generalized epilepsy and praxis-induced seizures (39, 40).

RNA-Seq analysis determined that SJL females express significantly higher levels of transcript *Cacnb1*-006 than B6 females (Figure 2.8). Although this transcript does not contain an open reading frame, it does undergo post-transcriptional processing, suggesting the possibility that it may act as a long non-coding RNA (lncRNA). Recent evidence shows the importance of non-coding RNAs (ncRNA) in the brain (64-68). ncRNAs have been shown to contribute to neural differentiation and cell identity, hippocampal development, oligodendrocyte myelination and synaptic plasticity (69). Additionally, lncRNAs have been implicated in neurodevelopmental, neurodegenerative, neuroimmunological and psychiatric disorders and, relevant to our studies, epilepsy (69). Mice deficient in the lncRNA *Evf2* had reduced numbers of GABAergic interneurons in the hippocampal formation and displayed reduced synaptic inhibition (70). This suggests the importance of a lncRNA in the formation of GABA circuitry and suggests a potential mechanism for hyperexcitability. The lncRNA *BC1* has also been implicated in a seizure phenotype. *BC1*^{KO/KO} homozygous knockout mice exhibited audiogenic seizures and it is hypothesized that *BC1* lncRNA modulates hyperexcitability via the metabotropic glutamate receptor pathway (71). It is possible that the *Cacnb1*-006 transcript may act as an lncRNA that directly or indirectly influences neuronal excitability.

Hlf is a member of the PAR bZIP transcription factor family. The loss of the PAR bZIP transcription factor family (*Hlf*, *Dbp* and *Tef*) results in mice with spontaneous, generalized tonic-clonic and absence seizures (36). Microarray expression analysis performed to investigate contributors to the PAR bZIP knockout epilepsy phenotype, revealed a twofold reduction in pyridoxal kinase (PDXK). PDXK encodes a coenzyme involved in the conversion of pyridoxine to pyridoxal 5'-phosphate (PLP), a key coenzyme involved in amino acid and neurotransmitter metabolism (36, 72). Mice defective in PLP metabolism experience fatal seizures, found to be a consequence of significantly reduced GABA levels (73). Mice maintained on a pyridoxine deficient diet, resulting in reduced PLP levels, experienced increased audiogenic seizures (74-76).

Human pyridoxine-dependent epilepsies can be successfully treated with PLP (77). Our RNA-Seq analysis showed that B6 males have a significant reduction in *Hlf* expression compared to SJL males (Figure 2.6). Reduced expression of *Hlf* in B6 males may lead to reduced PDXK and PLP levels and increased seizure susceptibility. Future studies testing the effect of pyridoxine deficiency on B6.Q54 mice may help determine the contribution of this pathway to Q54 epilepsy severity.

On the basis of our ISC and RNA-Seq data, along with further analysis of gene function and association with seizures, we nominate *Cacna1g*, *Cacnb1* and *Hlf* as strong functional candidates for *Moe1*. Future testing of high priority candidate genes will be necessary to determine if they contribute to the epilepsy severity of Q54 mice. Understanding the molecular basis of genetic modifiers in a mouse model can provide insight into human epilepsy. It has the potential to advance molecular diagnostic capabilities and identify novel therapeutic targets for the improved treatment of patients.

References

- 1. Meisler M.H., Kearney J.A. (2005) Sodium channel mutations in epilepsy and other neurological disorders. *J. Clin. Invest*, **115**, 2010-2017.
- 2. Escayg A., MacDonald B.T., Meisler M.H. *et al.* (2000) Mutations of SCN1A, encoding a neuronal sodium channel, in two families with GEFS+2. *Nat Genet*, **24**, 343-5.
- 3. Claes L., Del-Favero J., Ceulemans B., Lagae L., Van Broeckhoven C. and De Jonghe P. (2001) De novo mutations in the sodium-channel gene SCN1A cause severe myoclonic epilepsy of infancy. *Am J Hum Genet*, **68**, 1327-32.
- 4. Meisler M.H., O'Brien J.E. and Sharkey L.M. (2010) Sodium channel gene family: epilepsy mutations, gene interactions and modifier effects. *J.Physiol*, **588**, 1841-1848.
- 5. Chaix Y., Ferraro T.N., Lapouble E. and Martin B. (2007) Chemoconvulsantinduced seizure susceptibility: toward a common genetic basis? *Epilepsia*, **48 Suppl 5**, 48-52.
- 6. Ferraro T.N., Golden G.T., Smith G.G. *et al.* (2001) Quantitative genetic study of maximal electroshock seizure threshold in mice: evidence for a major seizure susceptibility locus on distal chromosome 1. *Genomics*, **75**, 35-42.
- 7. Ferraro T.N., Golden G.T., Smith G.G. *et al.* (2004) Fine mapping of a seizure susceptibility locus on mouse Chromosome 1: nomination of Kcnj10 as a causative gene. *Mamm Genome*, **15**, 239-51.
- 8. Ferraro T.N., Smith G.G., Schwebel C.L., Lohoff F.W., Furlong P., Berrettini W.H. and Buono R.J. (2007) Quantitative trait locus for seizure susceptibility on mouse chromosome 5 confirmed with reciprocal congenic strains. *Physiol Genomics*, **31**, 458-462.
- 9. Ferraro T.N., Golden G.T., Dahl J.P., Smith G.G., Schwebel C.L., MacDonald R., Lohoff F.W., Berrettini W.H. and Buono R.J. (2007) Analysis of a quantitative trait locus for seizure susceptibility in mice using bacterial artificial chromosome-mediated gene transfer 4. *Epilepsia*, **48**, 1667-1677.
- 10. Ferraro T.N., Smith G.G., Schwebel C.L., Doyle G.A., Ruiz S.E., Oleynick J.U., Lohoff F.W., Berrettini W.H. and Buono R.J. (2010) Confirmation of multiple seizure susceptibility QTLs on chromosome 15 in C57BL/6J and DBA/2J inbred mice. *Physiol Genomics*, **42A**, 1-7.
- 11. Ferraro T.N., Smith G.G., Ballard D. *et al.* (2011) Quantitative trait loci for electrical seizure threshold mapped in C57BLKS/J and C57BL/10SnJ mice. *Genes Brain Behav.*, **10**, 309-315.
- 12. Frankel W.N., Johnson E.W. and Lutz C.M. (1995) Congenic strains reveal effects of the epilepsy quantitative trait locus, El2, separate from other El loci. *Mamm Genome*, **6**, 839-43.
- 13. Gershenfeld H.K., Neumann P.E., Li X., St Jean P.L. and Paul S.M. (1999) Mapping quantitative trait loci for seizure response to a GABAA receptor inverse agonist in mice. *J Neurosci*, **19**, 3731-8.
- 14. Legare M.E., Bartlett F.S.2. and Frankel W.N. (2000) A major effect QTL determined by multiple genes in epileptic EL mice. *Genome Res*, **10**, 42-8.
- 15. Maihara T., Noda A., Yamazoe H., Voigt B., Kitada K. and Serikawa T. (2000) Chromosomal mapping of genes for epilepsy in NER: a rat strain with tonic-clonic seizures. *Epilepsia*, **41**, 941-949.
- Winawer M.R., Gildersleeve S.S., Phillips A.G., Rabinowitz D. and Palmer A.A. (2011) Mapping a mouse limbic seizure susceptibility locus on chromosome 10. *Epilepsia*, 52, 2076-2083.
- 17. Kearney J.A., Plummer N.W., Smith M.R., Kapur J., Cummins T.R., Waxman S.G., Goldin A.L. and Meisler M.H. (2001) A gain-of-function mutation in the sodium channel gene Scn2a results in seizures and behavioral abnormalities. *Neuroscience*, **102**, 307-317.
- 18. Bergren S.K., Chen S., Galecki A. and Kearney J.A. (2005) Genetic modifiers affecting severity of epilepsy caused by mutation of sodium channel Scn2a. *Mamm.Genome*, **16**, 683-690.
- 19. Bergren S.K., Rutter E.D. and Kearney J.A. (2009) Fine mapping of an epilepsy modifier gene on mouse Chromosome 19. *Mamm.Genome*, **20**, 359-366.
- Jorge B.S., Campbell C.M., Miller A.R., Rutter E.D., Gurnett C.A., Vanoye C.G., George A.L., Jr. and Kearney J.A. (2011) Voltage-gated potassium channel KCNV2 (Kv8.2) contributes to epilepsy susceptibility. *Proc.Natl.Acad.Sci.U.S.A*, 108, 5443-5448.
- 21. Moran J.L., Bolton A.D., Tran P.V. *et al.* (2006) Utilization of a whole genome SNP panel for efficient genetic mapping in the mouse. *Genome Res.*, **16**, 436-440.
- 22. Racine R.J. (1972) Modification of seizure activity by electrical stimulation. II. Motor seizure. *Electroencephalogr.Clin.Neurophysiol.*, **32**, 281-294.
- 23. Bentley D.R., Balasubramanian S., Swerdlow H.P. *et al.* (2008) Accurate whole human genome sequencing using reversible terminator chemistry. *Nature*, **456**, 53-59.
- 24. Blankenberg D., Von K.G., Coraor N., Ananda G., Lazarus R., Mangan M., Nekrutenko A. and Taylor J. (2010) Galaxy: a web-based genome analysis tool for experimentalists. *Curr.Protoc.Mol.Biol.*, Chapter 19, Unit-21.
- 25. Giardine B., Riemer C., Hardison R.C. *et al.* (2005) Galaxy: a platform for interactive large-scale genome analysis. *Genome Res.*, **15**, 1451-1455.
- 26. Goecks J., Nekrutenko A. and Taylor J. (2010) Galaxy: a comprehensive approach for supporting accessible, reproducible, and transparent computational research in the life sciences. *Genome Biol.*, **11**, R86.

- 27. Langmead B., Trapnell C., Pop M. and Salzberg S.L. (2009) Ultrafast and memoryefficient alignment of short DNA sequences to the human genome. *Genome Biol.*, **10**, R25.
- 28. Langmead B., Schatz M.C., Lin J., Pop M. and Salzberg S.L. (2009) Searching for SNPs with cloud computing. *Genome Biol.*, **10**, R134.
- 29. Trapnell C., Pachter L. and Salzberg S.L. (2009) TopHat: discovering splice junctions with RNA-Seq. *Bioinformatics.*, **25**, 1105-1111.
- 30. Roberts A., Trapnell C., Donaghey J., Rinn J.L. and Pachter L. (2011) Improving RNA-Seq expression estimates by correcting for fragment bias. *Genome Biol.*, **12**, R22.
- 31. Roberts A., Pimentel H., Trapnell C. and Pachter L. (2011) Identification of novel transcripts in annotated genomes using RNA-Seq. *Bioinformatics.*, **27**, 2325-2329.
- 32. Trapnell C., Williams B.A., Pertea G., Mortazavi A., Kwan G., van Baren M.J., Salzberg S.L., Wold B.J. and Pachter L. (2010) Transcript assembly and quantification by RNA-Seq reveals unannotated transcripts and isoform switching during cell differentiation. *Nat Biotechnol.*, **28**, 511-515.
- 33. McLaren W., Pritchard B., Rios D., Chen Y., Flicek P. and Cunningham F. (2010) Deriving the consequences of genomic variants with the Ensembl API and SNP Effect Predictor. *Bioinformatics.*, **26**, 2069-2070.
- 34. Kumar P., Henikoff S. and Ng P.C. (2009) Predicting the effects of coding nonsynonymous variants on protein function using the SIFT algorithm. *Nat.Protoc.*, **4**, 1073-1081.
- 35. Min J., Okada S., Kanzaki M. *et al.* (1999) Synip: a novel insulin-regulated syntaxin 4-binding protein mediating GLUT4 translocation in adipocytes. *Mol.Cell*, **3**, 751-760.
- 36. Gachon F., Fonjallaz P., Damiola F. *et al.* (2004) The loss of circadian PAR bZip transcription factors results in epilepsy. *Genes Dev.*, **18**, 1397-1412.
- 37. Haitina T., Lindblom J., Renstrom T. and Fredriksson R. (2006) Fourteen novel human members of mitochondrial solute carrier family 25 (SLC25) widely expressed in the central nervous system. *Genomics*, **88**, 779-790.
- 38. Siren A., Polvi A., Chahine L. *et al.* (2010) Suggestive evidence for a new locus for epilepsy with heterogeneous phenotypes on chromosome 17q. *Epilepsy Res.*, **88**, 65-75.
- 39. Escayg A., Jones J.M., Kearney J.A., Hitchcock P.F. and Meisler M.H. (1998) Calcium channel beta 4 (CACNB4): human ortholog of the mouse epilepsy gene lethargic. *Genomics*, **50**, 14-22.
- 40. Ohmori I., Ouchida M., Miki T., Mimaki N., Kiyonaka S., Nishiki T., Tomizawa K., Mori Y. and Matsui H. (2008) A CACNB4 mutation shows that altered Ca(v)2.1 function may be a genetic modifier of severe myoclonic epilepsy in infancy. *Neurobiol.Dis.*, **32**, 349-354.

- 41. Singh B., Monteil A., Bidaud I. *et al.* (2007) Mutational analysis of CACNA1G in idiopathic generalized epilepsy. Mutation in brief #962. Online. *Hum.Mutat.*, **28**, 524-525.
- 42. Chemin J., Monteil A., Bourinet E., Nargeot J. and Lory P. (2001) Alternatively spliced alpha(1G) (Ca(V)3.1) intracellular loops promote specific T-type Ca(2+) channel gating properties. *Biophys.J.*, **80**, 1238-1250.
- 43. Emerick M.C., Stein R., Kunze R., McNulty M.M., Regan M.R., Hanck D.A. and Agnew W.S. (2006) Profiling the array of Ca(v)3.1 variants from the human T-type calcium channel gene CACNA1G: alternative structures, developmental expression, and biophysical variations. *Proteins*, **64**, 320-342.
- 44. Monteil A., Chemin J., Bourinet E., Mennessier G., Lory P. and Nargeot J. (2000) Molecular and functional properties of the human alpha(1G) subunit that forms Ttype calcium channels. *J.Biol.Chem.*, **275**, 6090-6100.
- 45. Legare M.E., Frankel W.N. (2000) Multiple seizure susceptibility genes on chromosome 7 in SWXL-4 congenic mouse strains. *Genomics*, **70**, 62-5.
- 46. Ernst W.L., Noebels J.L. (2009) Expanded alternative splice isoform profiling of the mouse Cav3.1/alpha1G T-type calcium channel. *BMC.Mol.Biol.*, **10**, 53.
- 47. Cain S.M., Snutch T.P. (2010) Contributions of T-type calcium channel isoforms to neuronal firing. *Channels (Austin.)*, **4**, 475-482.
- 48. McCormick D.A., Contreras D. (2001) On the cellular and network bases of epileptic seizures. *Annu.Rev.Physiol*, **63**, 815-846.
- 49. Perez-Reyes E. (2003) Molecular physiology of low-voltage-activated t-type calcium channels. *Physiol Rev.*, **83**, 117-161.
- 50. Blumenfeld H. (2005) Cellular and network mechanisms of spike-wave seizures. *Epilepsia*, **46 Suppl 9**, 21-33.
- 51. Contreras D. (2006) The role of T-channels in the generation of thalamocortical rhythms. *CNS.Neurol.Disord.Drug Targets.*, **5**, 571-585.
- 52. Ernst W.L., Zhang Y., Yoo J.W., Ernst S.J. and Noebels J.L. (2009) Genetic enhancement of thalamocortical network activity by elevating alpha 1g-mediated low-voltage-activated calcium current induces pure absence epilepsy. *J.Neurosci.*, **29**, 1615-1625.
- 53. Zhang Y., Mori M., Burgess D.L. and Noebels J.L. (2002) Mutations in high-voltage-activated calcium channel genes stimulate low-voltage-activated currents in mouse thalamic relay neurons. *J.Neurosci.*, **22**, 6362-6371.
- 54. Kim D., Song I., Keum S., Lee T., Jeong M.J., Kim S.S., McEnery M.W. and Shin H.S. (2001) Lack of the burst firing of thalamocortical relay neurons and resistance to absence seizures in mice lacking alpha(1G) T-type Ca(2+) channels. *Neuron*, **31**, 35-45.

- 55. Mittman S., Guo J. and Agnew W.S. (1999) Structure and alternative splicing of the gene encoding alpha1G, a human brain T calcium channel alpha1 subunit. *Neurosci.Lett.*, **274**, 143-146.
- 56. Vreugdenhil M., Faas G.C. and Wadman W.J. (1998) Sodium currents in isolated rat CA1 neurons after kindling epileptogenesis. *Neuroscience*, **86**, 99-107.
- 57. Buraei Z., Yang J. (2010) The ss subunit of voltage-gated Ca2+ channels. *Physiol Rev.*, **90**, 1461-1506.
- 58. Dolphin A.C. (2003) Beta subunits of voltage-gated calcium channels. *J.Bioenerg.Biomembr.*, **35**, 599-620.
- 59. Lie A.A., Blumcke I., Volsen S.G., Wiestler O.D., Elger C.E. and Beck H. (1999) Distribution of voltage-dependent calcium channel beta subunits in the hippocampus of patients with temporal lobe epilepsy. *Neuroscience*, **93**, 449-456.
- 60. Burgess D.L., Jones J.M., Meisler M.H. and Noebels J.L. (1997) Mutation of the Ca2+ channel beta subunit gene Cchb4 is associated with ataxia and seizures in the lethargic (lh) mouse. *Cell*, **88**, 385-392.
- 61. Beck H., Steffens R., Elger C.E. and Heinemann U. (1998) Voltage-dependent Ca2+ currents in epilepsy. *Epilepsy Res.*, **32**, 321-332.
- 62. Faas G.C., Vreugdenhil M. and Wadman W.J. (1996) Calcium currents in pyramidal CA1 neurons in vitro after kindling epileptogenesis in the hippocampus of the rat. *Neuroscience*, **75**, 57-67.
- 63. Vreugdenhil M., Wadman W.J. (1994) Kindling-induced long-lasting enhancement of calcium current in hippocampal CA1 area of the rat: relation to calcium-dependent inactivation. *Neuroscience*, **59**, 105-114.
- 64. Berretta J., Morillon A. (2009) Pervasive transcription constitutes a new level of eukaryotic genome regulation. *EMBO Rep.*, **10**, 973-982.
- 65. Brosius J. (2005) Waste not, want not--transcript excess in multicellular eukaryotes. *Trends Genet.*, **21**, 287-288.
- 66. Cao X., Yeo G., Muotri A.R., Kuwabara T. and Gage F.H. (2006) Noncoding RNAs in the mammalian central nervous system. *Annu.Rev.Neurosci.*, **29**, 77-103.
- 67. Kapranov P., Cheng J., Dike S. *et al.* (2007) RNA maps reveal new RNA classes and a possible function for pervasive transcription. *Science*, **316**, 1484-1488.
- 68. Mehler M.F., Mattick J.S. (2006) Non-coding RNAs in the nervous system. *J.Physiol*, **575**, 333-341.
- 69. Qureshi I.A., Mattick J.S. and Mehler M.F. (2010) Long non-coding RNAs in nervous system function and disease. *Brain Res.*, **1338**, 20-35.
- 70. Bond A.M., Vangompel M.J., Sametsky E.A., Clark M.F., Savage J.C., Disterhoft J.F. and Kohtz J.D. (2009) Balanced gene regulation by an embryonic brain ncRNA is critical for adult hippocampal GABA circuitry. *Nat.Neurosci.*, **12**, 1020-1027.

- 71. Zhong J., Chuang S.C., Bianchi R., Zhao W., Lee H., Fenton A.A., Wong R.K. and Tiedge H. (2009) BC1 regulation of metabotropic glutamate receptor-mediated neuronal excitability. *J.Neurosci.*, **29**, 9977-9986.
- 72. John R.A. (1995) Pyridoxal phosphate-dependent enzymes. *Biochim.Biophys.Acta*, **1248**, 81-96.
- 73. Waymire K.G., Mahuren J.D., Jaje J.M., Guilarte T.R., Coburn S.P. and MacGregor G.R. (1995) Mice lacking tissue non-specific alkaline phosphatase die from seizures due to defective metabolism of vitamin B-6. *Nat.Genet.*, **11**, 45-51.
- 74. Coleman D.L., SCHLESINGER K. (1965) EFFECTS OF PYRIDOXINE DEFICIENCY ON AUDIOGENIC SEIZURE SUSCEPTIBILITY IN INBRED MICE. *Proc.Soc.Exp.Biol.Med.*, **119**, 264-266.
- 75. SCHLESINGER K., Schreiber R.A. (1969) Interaction of drugs and pyridoxine deficiency on central nervous system excitability. *Ann.N.Y.Acad.Sci.*, **166**, 281-287.
- 76. SCHLESINGER K., Uphouse L.L. (1972) Pyridoxine dependency and central nervous system excitability. *Adv.Biochem.Psychopharmacol.*, **4**, 105-140.
- 77. Plecko B., Stockler S. (2009) Vitamin B6 dependent seizures. *Can.J.Neurol.Sci.*, **36** Suppl 2, S73-S77.

CHAPTER III

VALIDATION OF CACNA1G AND HLF AS GENETIC MODIFIERS OF THE $SCN2A^{Q54}$ EPILEPSY PHENOTYPE

Introduction

Epilepsy is a common neurological disorder affecting approximately 3 million people in the United States (1). Nearly 900 mutations identified in voltage-gated sodium channel genes result in several types of human epilepsies, including Genetic Epilepsy with Febrile Seizures Plus (GEFS+), Benign Familial Neonatal-Infantile Seizures (BFNIS), Dravet and Ohtahara syndromes (2-4). Among affected family members who possess the same sodium channel mutation, the clinical severity of their disease can be strikingly different. This suggests that other factors, possibly genetic, must modify the primary mutation, resulting in a more or less severe phenotype.

Several mouse models have been generated in order to study the genetic basis of epilepsy. A common feature found in these models is that the genetic strain background alters the disease phenotype, suggestive of genetic modifiers in epilepsy. The *Scn2a*^{Q54} (Q54) transgenic mouse model has a gain-of-function mutation that results in persistent sodium current and epilepsy (5). On the C57BL/6J (B6) strain background, B6.Q54 mice have infrequent, adult-onset focal motor seizures and a 75% survival rate beyond six months of age (6). When crossed with the SJL/J (SJL) strain, the resulting F1.Q54 generation experience high seizure frequency with juvenile onset and less than 25% survival until six months of age (6). We mapped two dominant loci that modify seizure susceptibility in Q54, designated *Moe1* (Modifier of Epilepsy) on chromosome 11 and

Moe2, on chromosome 19 (6). *Kcnv2* was identified as the modifier gene at *Moe2* (7). Recent fine-mapping and RNA-Seq data suggested two sex-specific candidate modifier genes at the *Moe1* locus, *Cacna1g* and *Hlf* in females and males, respectively (8).

Cacna1g encodes the T-type calcium channel α_1 subunit that propagates lowvoltage activated (LVA) calcium currents (9). Several mouse models that exhibit abnormalities in LVA calcium currents exhibit absence seizures and abnormal thalamocortical synchronization (10). Furthermore, single-nucleotide polymorphisms in human *CACNA1G* have been identified in patients with generalized epilepsy (11). *Cacna1g* has twelve identified alternative splice sites, resulting in numerous transcripts with distinct current properties (9, 12-15). *Cacna1g* is hypothesized to modify the Q54 seizure phenotype through significant strain-specific differences in expression profiles of transcripts that have functional kinetic diversity in their LVA currents (8). SJL female mice preferentially express *Cacna1g* channels that reduce the likelihood of synchronous thalamocortical oscillations, a common feature of epilepsy (8, 16-18). In contrast, B6 female mice express *Cacna1g* channels that are prone to hyperexcitability (8).

Hlf encodes hepatic leukemia factor, a member of the PAR bZIP transcription factor family. Deletion of the PAR bZIP transcription factor family (*Hlf*, *Dbp* and *Tef*) in a knock-out mouse model resulted in mice with spontaneous, generalized tonic-clonic and absence seizures (19). Microarray expression analysis was utilized to determine contributors to the epilepsy phenotype (19). A two-fold reduction in pyridoxal kinase (PDXK), a key enzyme involved in the conversion of pyridoxine to pyridoxal 5' phosphate (PLP) was discovered (19). PLP is a key coenzyme involved in amino acid and neurotransmitter metabolism, including GABA and glutamate (Figure 3.1) (20).

Interestingly, PLP has a substantial connection to epilepsy. Pyridoxine-dependent epilepsies are successfully treated with PLP (21). Mice maintained on a pyridoxine deficient diet, consequently reducing PLP levels, experienced increased seizure frequency (22-24). Furthermore, mice defective in PLP metabolism experienced fatal seizures (25). *Hlf* is hypothesized to modify the Q54 seizure phenotype possibly by altering PDXK and PLP levels in a strain-dependent manner (Figure 3.1) (8). In males, B6 express *Hlf* at a significantly reduced level compared to SJL (8). A reduction in *Hlf*, with consequent reductions in PDXK and PLP levels, may be responsible for the increased seizure susceptibility seen in B6 males (8).



Figure 3.1 The Pyridoxine Pathway

Diagram illustrates the involvement of PDXK, PLP and pyridoxine in neurotransmitter metabolism (26). When the PAR bZIP family is knocked out, including *Hlf*, PDXK levels are reduced two-fold (19). Reprinted with permission (26).

To determine the contribution of *Cacnalg* and *Hlf* to the seizure phenotype of Q54 mice, we utilized *Cacnalg* BAC transgenic and *Hlf* targeted knockout mouse models. We systematically evaluated the candidate modifier genes by testing their ability

to enhance or reduce severity of the Q54 seizure phenotype in double mutant mice. In addition to seizure analysis, we also evaluated our *Hlf* hypothesis by testing the effects of pyridoxine deficient and enriched diets on the Q54 phenotype. Furthermore, to determine whether *Hlf* would modify other types of epilepsy, we assessed the ability of *Hlf* to modify the Dravet phenotype of $Scn1a^{KO/+}$ heterozygous knockout mice.

Materials and Methods

Mice

A BAC clone containing *Cacna1g* (RP23-65I14) was obtained from BACPAC Resources (http://bacpac.chori.org/home.htm). BAC DNA was prepared with the NucleoBond BAC 100 kit, according to manufacturer's instructions (Macherey-Nagel). DNA was reconstituted in polyamine injection buffer (27). Pronuclear injections into SJL fertilized oocytes were performed by the Vanderbilt University Transgenic Mouse/ESC Shared Resource. Injections resulted in a single *Cacna1g* BAC transgenic founder. The resulting strain, 1G5, is maintained on the SJL strain by continued backcrossing of hemizygous males to SJL females (Jackson Labs stock #000686).

 Hlf^{tm1Schb} ($Hlf^{KO/+}$) targeted knockout embryos congenic on B6 were obtained from the European Mouse Mutant Archive (www.emmanet.org) (19). Fifty $Hlf^{KO/+}$ heterozygous knockout embryos were implanted into pseudopregnant females at the Vanderbilt Transgenic Mouse/ESC Shared Resource. The $Hlf^{KO/+}$ heterozygous knockout line is maintained on the B6 strain by continued backcrossing of B6. $Hlf^{KO/+}$ males to B6 females (Jackson Labs stock #000664). Q54 transgenic mice [Tg(Eno2-Scn2a1*)Q54Mm] were generated as previously described (5). The B6.Q54 line is maintained on the B6 strain by continued backcrossing of hemizygous B6.Q54 males to B6 females (Jackson Labs stock #000664). *Scn1a*^{tm1Kea} (*Scn1a*^{KO/+}) heterozygous knockout mice were generated as previously described (28). The *Scn1a*^{KO/+} line is maintained on the 129S6/SvEvTac (129) strain by continued backcrossing of 129.*Scn1a*^{KO/+} males to 129 females (Taconic model #129SVE).

Mice were group-housed with access to food and water *ad libitum*. All studies were approved by the Vanderbilt University Animal Care and Use Committees in accordance with the National Institutes of Health Guide for the Care and Use of Laboratory Animals.

Genotyping

Mice were tail biopsied on postnatal day 14 (P14) and genotyped. DNA was prepared from tail biopsies using the Gentra Puregene Mouse Tail Kit according to the manufacturer's instructions (Qiagen). 1G5 transgenics were identified by using the 1G SP6 and 1G T7 primers indicated (Table 3.1). These primers amplify a 200 bp and 220 bp product, respectively. *Hlf* knockout mice were genotyped using primers designed to target the LacZ cassette. Primers *LacZ R*: 5'ATGTGAGCGAGTAACAACCCGTCGGA TCT, *Hlf_LF*: 5'CCCTTTTTCTTCTTCAGCATTTAG and *Hlf_R*: 5'GGATGCCATTC TCTGACAGG amplify a 200 bp wildtype product and a 400 bp knockout product. The Q54 transgene was genotyped as previously described (5). *Scn1a* knockouts were genotyped as previously described (28). All genotyping was performed by PCR and analyzed on 2% agarose gels.

BAC Integrity, Copy Number and Expression

BAC integrity was evaluated in genomic DNA by PCR amplification of microsatellite and vector markers spanning the BAC (Table 3.1). SP6 and T7 vector markers flanked each end of the BAC construct, while D11VU microsatellite markers were located approximately every 32 Kb, including two within *Cacna1g* (Figure 3.2).

To assess copy number, we used a Taqman assay as described previously by Chandler, *et al* (29). Quantitative PCR (qPCR) was performed using custom-designed *Cacna1g* and reference *Scn5a* Taqman assays described previously by Ernst, *et al* (Table 3.1) (18). Genomic DNA from transgenic (n=17), homozygous transgenic (n=6) and control (n=8) littermates was used as template and a standard curve was applied to estimate copy number. Copy number standards were prepared by spiking SJL genomic DNA with BAC plasmid DNA equivalent to 0, 5, 10 and 20 copies per diploid genome.

Transcript expression analysis was performed using Taqman gene expression assays (Applied Biosystems) (Table 3.1). RNA was extracted from whole brains of six week old transgenic (n=15), homozygous transgenic (n=7) and control (n=10) littermates using the RNeasy kit (Qiagen). Total RNA was then reverse transcribed using the SuperScript III First-Strand Synthesis System according to the manufacturer's instructions (Invitrogen). Samples were run in triplicate on an ABI 7900 HT and replicated over four plates. Relative transcript levels were assessed using the $\Delta\Delta$ CT method (30). Expression differences were compared between groups by ANOVA with Fisher's PLSD *post hoc* tests.

Table 3.1 Primer Sequences for *Cacna1g* BAC Evaluation

Evaluation of the BAC construct was completed through BAC integrity, copy number and expression analyses. BAC integrity was determined using the microsatellite markers indicated which spanned the entire BAC construct. Copy number was assessed by Taqman assay on genomic DNA. Expression analysis was performed on whole brain RNA using Taqman gene expression assays.

BAC Integrity					
Primer Name	Forward Sequence	Reverse Sequence			
D11VU2	TCCCATGGAGCATTGAAATC	AGAGGAAGCTAGCCCCAGAG			
D11VU3	TTTCCCGATCACCAAGAGAC	GACCCTCAGCTAGGCAGTTG			
D11VU5	CTGGATATTTCCCCCTGGAG	CGGTTCTTCCAGGACAGGTA			
D11VU8	TTCTGCCCTCCCAGAGATAA	TCCTCAGGAGGGGATATCGT			
D11VU11	TGATCCCCCTGCATAACACT	TGGTGAGCCTCTGAAGGTTT			
D11VU14	GAAGCAGCCAGGTTTCTCAC	TTCCAGTGGCAAACACCATA			
D11VU15	TTTACATTTTGACCAGCAAATAGC	TCAGCCAGCCTAGTTGAACA			
D11VU17	TACCCTTTGCCACGATAAGG	GAGGCACTTCCAACCTTTCA			
1G T7	TAATACGACTCACTATAGGG	ATGGAGTGGACACATTGCAG			
1G SP6	GATTTAGGTGACACTATAG	TTCTAGGGACGTCAGGAAGC			
Copy Number					
Assay Name	Forward / Taqman Assay Sequence	Reverse Taqman Assay Sequence			
Cacna1g	TGGAACTGCCCATCATGAGAT	CCTCATTCTGCTGTCCTGCTAAT			
Scn5a	AGGGTTTCTCTGTGACCCAAAC	AGAGCTACGGGACACAGTATCCA			
TaqM_Cacna1g	5'-6FAM-ATCACCGGTAAGGGAATGCATGCCAC-TAMRA-3'				
TaqM_Scn5a	5'-6FAM-CTTCCCCTACCCTTTTCCAGGCTCTCA-TAMRA-3				
Expression					
Assay Name	Taqman Assay				
Cacna1g	Mm00486571_m1				
Tbp	Mm00446971_m1				

Generation of Double Mutant Mice

Cacna1g double mutant mice were generated by crossing SJL.1G5 females with B6.Q54 males. The resulting F1 generation had F1.1G5;Q54 mice and single mutant littermate controls at the expected Mendelian ratios.

Hlf double mutant mice were generated on two background strains. First, B6.*Hlf* ^{KO/+} heterozygous females were crossed with B6.Q54 males to generate heterozygous B6.*Hlf* ^{KO/+};Q54 offspring. To produce animals for phenotyping experiments, B6.*Hlf* ^{KO/+};Q54 males were crossed with either B6.*Hlf* ^{KO/+} or SJL females. Crossing B6.*Hlf* ^{KO/+};Q54 with B6.*Hlf* ^{KO/+} resulted in homozygous knockout, *Hlf* ^{KO/KO};Q54 and heterozygous knockout B6.*Hlf* ^{KO/+};Q54 test mice and control

littermates. Offspring from this cross were not obtained at the expected Mendelian ratios (See Results section). Crossing B6.*Hlf* $^{KO/+}$;Q54 with SJL resulted in F1 double mutant F1.*Hlf* $^{KO/+}$;Q54 offspring and control F1.Q54 and F1.*Hlf* $^{KO/+}$ littermates that were obtained at the expected Mendelian ratios.

To assess if *Hlf* was able to modify the Dravet phenotype of $Scn1a^{KO/+}$ mice, B6.*Hlf*^{KO/+} females were crossed with 129.*Scn1a*^{KO/+} males. The resulting F1 generation produced double mutant F1.*Hlf*^{KO/+};*Scn1a*^{KO/+} and single mutant littermate controls at the expected Mendelian ratios.

Phenotyping

Experimental mice were phenotyped as previously described (8). Briefly, littermates underwent 30 minute video-taped observations at three and six weeks of age. All observation sessions occurred between 1:00 PM and 4:00 PM. On the basis of prior extensive video-electroencephalogram monitoring, spontaneous behavioral seizures were assessed offline by a blinded observer using Observer XT software (Noldus) (5). We counted the number of visible focal motor seizures with forelimb clonus and repetitive movements lasting one to five seconds (Racine seizure scale 3) (31). Seizure counts from the three and six week observations were combined to obtain a frequency of seizures in 60 minutes for each animal. Other seizure types, including generalized tonic-clonic seizures (GTCS), were also counted if observed.

Pyridoxine Deficient and Enriched Diets

B6.Q54, F1.Q54, B6.*Hlf*^{KO/+}, B6.*Hlf*^{KO/KO}, B6.*Hlf*^{KO/KO};Q54 and wildtype littermates were maintained on pyridoxine deficient (AIN-93G/No added pyridoxine), pyridoxine enriched (AIN-93G/8250 ppm added pyridoxine) or control (AIN-93G) diets (Purina Test Diet). At three weeks of age, mice were placed on the modified or control diet for six weeks. Animals were weighed and evaluated for general health once per week. At nine weeks of age, all mice underwent 30 minute video-taped observation to determine seizure frequency, as described above.

Neurochemistry

A subset of mice maintained on the deficient or control diet were used for neurochemistry studies performed at nine weeks of age (n=4 for each genotype, sex and diet). Mice were deeply anesthetized with isoflurane, decapitated and forebrain was rapidly dissected and frozen in liquid nitrogen. Neurochemistry was performed at the Vanderbilt Neurochemistry Core Laboratory to assay for biogenic amine neurotransmitters, biogenic amine metabolites, amino acids and amino acid neurotransmitters. Detection was achieved using Waters high performance liquid chromatography (HPLC) systems equipped with autosamplers and either a Decade II electrochemical (monoamines) or 474 scanning fluorescence (amino acids) detector.

Statistical Analysis

Seizure frequencies for phenotyping studies were compared between double mutant and single mutant control littermates using either analysis of variance (ANOVA) with Fisher's protected least significant difference (PLSD) *post hoc* tests or unpaired twotailed Student's t-test. Outlier analysis was performed and subjects with seizure frequencies two standard deviations above and below the mean at three or six weeks of age were removed. Mice with missing three or six week data due to outlier frequencies or death were not included in the study. Seizure frequencies for the pyridoxine diet studies were compared between modified and control diet mice by unpaired two-tailed Student's t-test. Survival was assessed using Kaplan-Meier analysis with Logrank Mantel-Cox pvalues. Male and female data were analyzed separately, unless otherwise indicated.

Results

Cacnalg

Generation and Evaluation of Cacna1g BAC Transgenic Mice

To evaluate the contribution of *Cacna1g* to the seizure phenotype of F1.Q54 mice, we generated a *Cacna1g* BAC transgenic mouse model. Pronuclear injections of the BAC clone RP23-65I14, which contained *Cacna1g*, into SJL fertilized oocytes resulted in a single female *Cacna1g* BAC transgenic founder, designated 1G5.

Integrity of the 1G5 BAC construct was initially determined using primers designed for the SP6 and T7 ends flanking the BAC insert (Table 3.1). The 1G5 founder genotyped positive for both end markers. Since the BAC construct was derived from B6 and injected into SJL, additional genotyping was performed using microsatellite markers spanning the BAC to ensure a whole construct was present. The microsatellite markers

were located approximately every 32 Kb, including two within *Cacna1g* (Figure 3.2). All markers were found to be heterozygous, suggesting integration of an intact construct.



Figure 3.2 Verification of BAC Integrity Genotyping was performed to confirm complete integration of the RP23-65I14 BAC into the SJL genome. Location of the flanking SP6 and T7 markers and the internal microsatellite markers are indicated.

After confirming the incorporation of an intact BAC construct in the 1G5 line, we assessed copy number by qPCR (29). Custom-designed *Cacna1g* and reference *Scn5a* Taqman assays were previously developed to detect the RP23-65I14 construct (18). We plotted Δ Ct values from the copy number standards on the Y-axis with the known copy number plotted on the X-axis, using a linear scale. From this, we generated a linear trendline with an accompanying *y*=m*x*+b slope equation (Figure 3.3). The resulting equation was used to estimate copy number of 1G5 hemizygous (n=17), homozygous (n=6) and control (n=8) mice. By fitting Δ Ct values (*y*) from 1G5 offspring DNA, we estimated the BAC copy number (*x*) to be between 5-8 transgene copy integrations.

During breeding of the 1G5 N2 generation (1G5 Tg N1 male by SJL female), it became apparent that the construct integrated onto the X chromosome due to the Xlinked inheritance pattern. Therefore, we intercrossed 1G5 females (N2) and 1G5 males (N1) to generate transgene positive males. Offspring from this intercross were obtained in the expected Mendelian ratios for an X-linked trait. Females had a 1:1 homozygous (n=19) to hemizygous (n=22) ratio and males had a 1:1 hemizygous (n=22) to wildtype (n=22) ratio.



Figure 3.3 Evaluation of 1G5 Copy Number To assess copy number, a Taqman assay was performed on genomic DNA from 1G5 offspring and controls. A standard curve was generated with 0, 5, 10 and 20 copies which revealed transgenic mice have an estimated 5-8 transgene copy integrations.

As a final evaluation of the 1G5 line, we performed transcript analysis to detect if *Cacna1g* was expressed at an increased level compared to wildtype SJL. RNA was extracted from whole brains of six week old hemizygous (Female n=8; Male n=7), homozygous (Female n=7) and control (Female n=8; Male n=2) littermates and then reverse transcribed. Expression was determined using Taqman gene expression assays for *Cacna1g* (Mm 00486571_m1) and the control *Tbp* (Mm 00446971_m1). This qPCR assay revealed only hemizygous 1G5 males had a significant increase in expression compared to wildtype (p < 0.007) (Figure 3.4). Hemizygous 1G5 females were not significantly different from wildtype levels. There was a significant two-fold increase in expression between homozygous 1G5 females and hemizygous 1G5 females and males

(Figure 3.4). These results suggest the 1G5 transgene may be subject to partial X-inactivation. Complete inactivation of the 1G5 transgene would result in equivalent *Cacna1g* expression levels in homozygous 1G5 females and hemizygous 1G5 males.



Figure 3.4 1G5 Expression Using a Taqman qPCR Assay To assess expression, a Taqman assay was performed on 1G5 offspring and controls. Fold difference in six week old whole-brain expression of *Cacna1g* are as follows: wildtype controls= 0 ± 0.079 , 1G5 hemizygous females= 0.649 ± 0.037 , 1G5 hemizygous males= 1 ± 0.065 and 1G5 homozygous females= 2.26 ± 0.032 . ANOVA $F_{(3,49)}$ = 15.697, p < 0.0001. P-values were determined by Fishers PLSD *post hoc* test. Error bars represent SEM.

Effect of Cacnalg on F1.Q54 Phenotype

We systematically evaluated *Cacna1g* by testing its ability to enhance or reduce severity of the F1.Q54 seizure phenotype. To do this, we generated double mutant mice by crossing female SJL.1G5 with B6.Q54 males to generate F1 offspring carrying both transgenes (F1.1G5;Q54) and controls carrying either F1.Q54 or F1.1G5. Experimental mice underwent 30 minute video-taped observations for visible, spontaneous seizures at three and six weeks of age. The two time points were then combined to determine the seizure frequency in 60 minutes. Seizure analysis of F1.1G5 offspring (Male n=17; Female n=18) revealed no apparent motor seizures. This was consistent with previous work on transgenic mice generated with the same BAC construct that exhibited frequent behavioral arrest but lacked evident motor seizures or other obvious neurological abnormalities (18). Therefore, the average seizure frequency was compared between double mutant F1.1G5;Q54 mice and single F1.Q54 controls.

Double transgenic F1.1G5;Q54 males had significantly more seizures than F1.Q54 controls (p < 0.004) (Figure 3.5). No difference in seizure frequency was identified between female F1.1G5;Q54 and F1.Q54 controls (p > 0.858) (Figure 3.6).

Following seizure phenotyping, mice from the SJL.1G5 by B6.Q54 cross were retained until 12 weeks of age to examine the effect of *Cacna1g* overexpression on the lifespan of F1.Q54 mice. The transgene had no effect on survival between F1.1G5;Q54 mice compared to F1.Q54 controls in males or females (Data not shown).

To properly evaluate the contribution of *Cacna1g* on the seizure phenotype of F1.Q54 mice, at least two separate transgenic lines are required to confirm the phenotype and avoid misinterpretation of results due to BAC insertion site effects. At this time, we were only able to generate and evaluate one *Cacna1g* BAC transgenic mouse model, designated 1G5. Results from the SJL.1G5 by B6.Q54 cross suggest *Cacna1g* is a genetic modifier of the F1.Q54 phenotype in males. We were unable to reliably determine if *Cacna1g* was a genetic modifier of the F1.Q54 phenotype in the F1.Q54 phenotype in females due to the possibility that the transgene is subject to X-inactivation.



Figure 3.5 Average Seizure Frequency of SJL.1G5 X B6.Q54 Males

Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for males are as follows: F1.1G5= 0, F1.Q54= 22.3 ± 1.76 and F1.1G5;Q54= 29.6 ± 1.68 . P-value was determined by Student's t-test. Error bars represent SEM.



Figure 3.6 Average Seizure Frequency of SJL.1G5 X B6.Q54 Females

Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for females are as follows: F1.1G5= 0, F1.Q54= 30.3 ± 2.31 and F1.1G5;Q54= 32.3 ± 2.84 . P-value was determined by Student's t-test. Error bars represent SEM.

Generation of Hlf Double Mutant Mice

In order to systematically evaluate *Hlf*, we tested its ability to alter the seizure phenotype of F1.Q54 and B6.Q54 mice. To do this, we generated double mutant mice on two strain backgrounds. B6.Hlf KO/+ females were first crossed with B6.Q54 males to generate B6.*Hlf* ^{KO/+};Q54 offspring. To generate double mutant animals on the F1 strain background, B6.*Hlf*^{KO/+};Q54 males were crossed with SJL females. This cross resulted in F1.*Hlf*^{KO/+};Q54 test mice and controls carrying either F1.Q54 or F1.*Hlf*^{KO/+} (Figure 3.7). The resulting offspring were obtained at the expected Mendelian ratios. To generate double mutant mice on the B6 strain, we crossed B6.*Hlf*^{KO/+};Q54 males with B6.*Hlf*^{KO/+} females which resulted in homozygous knockout B6.*Hlf* ^{KO/KO}:O54 and heterozygous knockout B6.*Hlf*^{KO/+};Q54 test mice and control littermates carrying B6.*Hlf*^{KO/+}, B6.*Hlf*^{KO/KO}, or B6.Q54 (Figure 3.7). Offspring from this cross were not obtained at the expected Mendelian ratios. While no difference was identified in males, female genotype ratios were significantly different (χ^2 = 17.836, p < 0.003) (Table 3.2). More specifically, there was a reduction in female B6.*Hlf*^{KO/KO};Q54 and B6.*Hlf*^{KO/+} births and an increase in B6.*Hlf*^{KO/+};Q54 births.



Figure 3.7 Generation of *Hlf* X B6.Q54 Double Mutant Mice

Two background strains of *Hlf* double mutant mice were generated. To produce animals for phenotyping experiments, B6.*Hlf* $^{KO/+}$;Q54 males were crossed with either B6.*Hlf* $^{KO/+}$ or SJL females. Crossing B6.*Hlf* $^{KO/+}$;Q54 with B6.*Hlf* $^{KO/+}$ resulted in homozygous B6.*Hlf* $^{KO/+}$;Q54 and heterozygous B6.*Hlf* $^{KO/+}$;Q54 test mice and control littermates. Crossing B6.*Hlf* $^{KO/+}$;Q54 with SJL resulted in F1.*Hlf* $^{KO/+}$;Q54 test mice and control offspring.

Table 3.2 Ratio of Genotypes Observed From B6.*Hlf*^{KO/+};Q54 X B6.*Hlf*^{KO/+}

B6.*Hlf* ^{KO/+};Q54 males were crossed with B6.*Hlf* ^{KO/+} females to generate homozygous B6.*Hlf* ^{KO/KO};Q54 and heterozygous B6.*Hlf* ^{KO/+};Q54 mice and control littermates. Males were born at the expected Mendelian ratios, while females differed significantly from the expected genotype ratios, predominantly homozygous knockout B6.*Hlf* ^{KO/+};Q54 and KA ^{KO}

Genotype		# Observed	#Expected	Chi Sq
Males (n=392)	B6	56	49	
	B6.Q54	48	49	1
	B6. <i>Hlf</i> ^{KO/+}	94	98	$\chi^{2=2.571}$
	B6. <i>Hlf</i> ^{KO/+} ;Q54	104	98	p > 0.766
	B6. <i>Hlf</i> ^{KO/KO}	42	49	
	B6. <i>Hlf</i> ^{KO/KO} ;Q54	48	49	
Females (n=414)	B6	55	52	
	B6.Q54	48	52	
	B6. <i>Hlf</i> ^{KO/+}	86	104	χ 2=17.836
	B6. <i>Hlf</i> ^{KO/+} ;Q54	129	104	p < 0.003
	B6. <i>Hlf</i> ^{KO/KO}	62	52	
	B6. <i>Hlf</i> ^{KO/KO} ;Q54	34	52	

Effect of Hlf on F1.Q54 Phenotype

Offspring from the B6.*Hlf* ^{KO/+} by SJL cross underwent 30 minute video-taped observations for visible, spontaneous seizures at three and six weeks of age. The two time points were then combined to determine the seizure frequency in 60 minutes. Seizure analysis of F1.*Hlf* ^{KO/+} offspring (Male n=15; Female n=15) revealed no apparent motor seizures. This was consistent with previous work on *Hlf* knockout mice, not in combination with other PAR bZIP knockout lines, which reported no evidence of seizures or neurological abnormalities (19). Therefore, average seizure frequency was compared by Student's t-test between double mutant F1.*Hlf* ^{KO/+};Q54 and F1.Q54 controls.

No significant difference in seizure frequency was observed between F1.*Hlf* ^{KO/+};Q54 and F1.Q54 controls in either males (p > 0.348) or females (p > 0.124) (Figures 3.8 and 3.9). Although it was not significant, there was a trend towards increased seizure frequency in F1.*Hlf* ^{KO/+};Q54 females compared to F1.Q54 controls.

Following seizure phenotyping, mice from the F1 cross were retained until 12 weeks of age to determine if heterozygous loss of *Hlf* altered the lifespan of F1.Q54 mice. We did not observe any significant effect on the survival of F1.*Hlf* $^{KO/+}$;Q54 mice compared to F1.Q54 controls (Data not shown).



Figure 3.8 Average Seizure Frequency of B6.*Hlf*^{KO/+};Q54 X SJL Males

Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for males are as follows: F1.*Hlf*^{KO/+}= 0, F1.Q54= 24.8 \pm 3.36 and F1.*Hlf*^{KO/+};Q54= 20.5 \pm 3.03. P-value was determined by Student's t-test. Error bars represent SEM.



Figure 3.9 Average Seizure Frequency of B6.*Hlf*^{KO/+};Q54 X SJL Females

Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for females are as follows: F1.*Hlf*^{KO/+}= 0, F1.Q54= 17.9 \pm 2.63 and F1.*Hlf*^{KO/+};Q54= 24.8 \pm 3.34. P-value was determined by Student's t-test. Error bars represent SEM.

Effect of Hlf on B6.Q54 Phenotype

Offspring from the B6.*Hlf*^{KO/+};Q54 by B6.*Hlf*^{KO/+} cross underwent 30 minute video-taped observations as described. Seizure analysis of B6.*Hlf*^{KO/+} (Male n=15; Female n=15) and B6.*Hlf*^{KO/KO} (Male n=15; Female n=15) offspring revealed no motor seizures, therefore average seizure frequency was compared between heterozygous knockout B6.*Hlf*^{KO/+};Q54, homozygous knockout B6.*Hlf*^{KO/KO};Q54 mice and B6.Q54 controls by ANOVA.

A significant difference in seizure frequency was observed in males ($F_{(2,38)}$ = 6.348, p < 0.004). Double mutant heterozygous B6.*Hlf* ^{KO/+};Q54 and homozygous B6.*Hlf* ^{KO/KO};Q54 males had significantly (p < 0.001 and p < 0.023, respectively) lower seizure frequencies than B6.Q54 controls (Figure 3.10). However, there was no significant difference in seizure frequency between heterozygous knockout B6.*Hlf* ^{KO/KO};Q54 male mice (p > 0.353). Although we originally hypothesized that loss of *Hlf* would increase seizure frequency, a suggested cause for the reduced seizure frequency emerged from detailed analysis of the video records. Male homozygous B6.*Hlf* ^{KO/KO};Q54 mice experienced a significant number of GTCS (χ^2 = 6.209, p < 0.045) (Figure 3.11). This more severe phenotype is not observed in Q54 mice in this age range (5, 7, 8, 32). No significant difference in seizure frequency (Figure 3.12).

Following seizure phenotyping, we retained mice until 12 weeks of age to determine if loss of *Hlf* altered the lifespan of B6.Q54 mice. We did not observe any effect on the survival of heterozygous B6.*Hlf* ^{KO/+};Q54 or homozygous B6.*Hlf* ^{KO/KO};Q54 mice compared to B6.Q54 controls in either males or females (Data not shown).



Figure 3.10 Average Seizure Frequency of B6.*Hlf*^{KO/+}**;Q54 X B6.***Hlf*^{KO/+}**Males** Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for males are as follows: B6.*Hlf*^{KO/+}= 0, B6.*Hlf*^{KO/KO}= 0, B6.Q54= 11.6 \pm 2.8, B6.*Hlf*^{KO/+};Q54= 2.21 \pm 0.89 and B6.*Hlf*^{KO/KO};Q54= 4.92 \pm 1.52. Significant differences between groups were determined by ANOVA: F_(2.38) = 6.348, p < 0.004. P-values determined by Fishers PLSD *post hoc* test. Error bars represent SEM.



Figure 3.11 Percentage of B6.*Hlf*^{KO/+}**;Q54 X B6.***Hlf*^{KO/+} **Males Experiencing GTCS** Percentage of mice experiencing GTCS in 60 minutes for each genotype is shown. Percentages for males are as follows: B6.*Hlf*^{KO/+} 0%, B6.*Hlf*^{KO/KO} 0%, B6.*Hlf*^{KO/+};Q54= 0%, B6.*Hlf*^{KO/+};Q54= 0% and B6.*Hlf*^{KO/KO};Q54= 18.9%. P-value was determined by Chi-squared analysis (χ^2 = 6.209, p < 0.045).



Figure 3.12 Average Seizure Frequency of B6.*Hlf*^{KO/+}**;Q54 X B6.***Hlf*^{KO/+}**Females** Average number of seizures in 60 minutes for each genotype is shown. Average seizure frequencies for females are as follows: B6.*Hlf*^{KO/+}= 0, B6.*Hlf*^{KO/KO}= 0, B6.Q54= 13.7 \pm 2.87, B6.*Hlf*^{KO/+};Q54= 10.2 \pm 3.25 and B6.*Hlf*^{KO/KO};Q54= 8.9 \pm 1.29. Significant differences between groups were determined by ANOVA: F_(2,36) = 0.744, p > 0.482. P-values determined by Fishers PLSD *post hoc* test. Error bars represent SEM.

Effect of Pyridoxine Deficient and Enriched Diet on Q54

To further evaluate our *Hlf* hypothesis, we tested the effects of pyridoxine deficient and enriched diets on the Q54 phenotype. Deletion of the PAR bZIP transcription factor family (*Hlf, Dbp* and *Tef*) in a knock-out mouse model resulted in mice with spontaneous, generalized tonic-clonic and absence seizures (19). Microarray expression analysis was utilized to determine contributors to the epilepsy phenotype (19). A two-fold reduction in PDXK, a key enzyme involved in the conversion of pyridoxine to PLP, was discovered (19). PLP is a key coenzyme involved in amino acid and neurotransmitter metabolism, including GABA (Figure 3.13). We hypothesized that B6.Q54 and F1.Q54 mice on pyridoxine deficient diet would have increased seizure PLP frequency compared controls. due reduced levels. to to



Figure 3.13 Simplified Pyridoxine Pathway

Loss of the PAR bZIP transcription factor family (*Hlf, Dbp* and *Tef*) result in mice with spontaneous GTCS and a two-fold reduction in PDXK levels. We predict loss of *Hlf* alters the pyridoxine pathway, consequently reducing GABA and neurotransmitter levels.

Furthermore, we evaluated the effect of a pyridoxine enriched diet, to determine if elevated levels of pyridoxine reduced seizure frequency in B6.Q54 and F1.Q54 mice. Male and female B6.Q54 and F1.Q54 mice were placed on either the modified or control diet at three weeks of age and were maintained on the diet for six weeks. At nine weeks of age, all mice underwent 30 minute video-taped observations as described above, to assess seizure frequency. We also monitored survival until nine weeks of age to determine if pyridoxine deficient or enriched diets had any effect on the lifespan. Although we provided modified and control diets to B6, F1, B6.*Hlf*^{KO/+} and B6.*Hlf*^{KO/KO} male and female mice, no diet effects were detected in any of these groups. Therefore data for these groups are not shown.

No significant difference in seizure frequency was observed in B6.Q54 males maintained on the modified diets compared to control diet (p > 0.175, p > 0.598) (Figure 3.14). While not statistically significant, there was a trend toward increased seizure frequency in F1.Q54 males maintained on the deficient and enriched diets compared to control diet (p > 0.055 and p > 0.065, respectively).

No significant effect was observed when comparing the survival of B6.Q54 males maintained on either modified diet compared to controls (Data not shown). However, F1.Q54 males maintained on the enriched diet had a significant reduction in lifespan compared to controls (p < 0.017) (Figure 3.15). The seizure and survival data indicate that the F1.Q54 male phenotype is altered by both pyridoxine deficient and enriched diets, while the B6.Q54 male phenotype is not changed by either modified diet.

A significant difference in seizure frequency was observed in females. B6.Q54 females maintained on a pyridoxine deficient diet had significantly more (p < 0.017) seizures compared to B6.Q54 females on the control diet (Figure 3.16). No change was observed in B6.Q54 females on the pyridoxine enriched diet (p > 0.893). No significant difference in seizure frequency was observed in F1.Q54 females maintained on either modified diet (p > 0.451 and p > 0.564, respectively) (Figure 3.16).

A significant reduction in the lifespan of B6.Q54 females maintained on the pyridoxine deficient diet compared to controls was identified (p < 0.011) (Figure 3.17). No significant effect was observed when comparing the survival of F1.Q54 females maintained on either modified to controls (Data not shown). The seizure and survival data indicate that the B6.Q54 female phenotype is altered by a pyridoxine deficient diet, while the F1.Q54 female phenotype is not changed by either modified pyridoxine diet.



Figure 3.14 Average Seizure Frequency of Males on Modified Pyridoxine Diets

Average number of seizures in 30 minutes for each genotype is shown. Average seizure frequencies for males are as follows: Control B6.Q54= 0.188 ± 0.101 , Deficient B6.Q54= 0.6 ± 0.34 , Enriched B6.Q54= 0.3 ± 0.213 , Control F1.Q54= 0.587 ± 0.345 , Deficient F1.Q54= 2.46 ± 0.779 and Enriched F1.Q54= 3.2 ± 1.828 . Significant differences were determined by Student's t-test. Error bars represent SEM.



Figure 3.15 Kaplan Meier Survival of F1.Q54 Males on Modified Pyridoxine Diets Survival of F1.Q54 male mice maintained on control, deficient or enriched pyridoxine diets are shown. Survival was monitored until 9 weeks of age. P-value was determined by Logrank Mantel-Cox.



Figure 3.16 Average Seizure Frequency of Females on Modified Pyridoxine Diets Average number of seizures in 30 minutes for each genotype is shown. Average seizure frequencies for females are as follows: Control B6.Q54= 0.117 ± 0.081 , Deficient B6.Q54= 0.91 ± 0.368 , Enriched B6.Q54= 0.1 ± 0.1 , Control F1.Q54= 4.23 ± 1.29 , Deficient F1.Q54= 3 ± 0.699 and Enriched F1.Q54= 3.11 ± 1.328 . Significant differences were determined by Student's t-test. Error bars represent SEM.



Figure 3.17 Kaplan Meier Survival of B6.Q54 Females on Modified Pyridoxine Diets Survival of B6.Q54 female mice maintained on control, deficient or enriched pyridoxine diets are shown. Survival was monitored until 9 weeks of age. P-value was determined by Logrank Mantel-Cox.

Effect of Pyridoxine Deficient Diet on Neurochemistry

A subset of mice maintained on the pyridoxine deficient and control diets were used for neurochemistry studies. Neurochemistry assays for biogenic amine neurotransmitters and metabolites, amino acids and amino acid neurotransmitters were used to determine if the deficient diet altered brain chemistry.

Relevant to our phenotyping studies, F1.Q54 males on the deficient diet had a significant increase in glutamate and GABA concentration compared to controls (Figure 3.18). This supports our seizure data which indicated F1.Q54 males on the deficient diet had more seizures compared to controls (Figure 3.14). Although B6.Q54 females experienced increased seizures on the deficient diet, no significant difference in glutamate or GABA was identified (Data not shown).

Regardless of genotype, all males maintained on the pyridoxine deficient diet had detectable brain concentrations of proline, while controls did not (Figure 3.19). B6 and B6.Q54 males on the deficient diet had significant differences in proline concentration compared to controls (p < 0.027 and p < 0.024, respectively). Proline was not detected in any females. Altered proline concentrations, such as those in Hyperprolinemia type II, cause pyridoxine deficiency by endogenous accumulation of the PLP deactivator P5C, resulting in pyridoxine dependent seizures (21, 33). This suggests that males, in particular B6 and B6.Q54, are more susceptible to the metabolic changes associated with a pyridoxine deficient diet, although an obvious phenotype was not observed.



Figure 3.18 F1.Q54 Male Brain Concentrations of Glutamate and GABA

F1.Q54 male mice were maintained on the deficient or control diet for six weeks. Glutamate and GABA concentrations were assayed in forebrain. Average concentrations are as follows: Glutamate: F1.Q54 control= 139.6 \pm 7.34 and F1.Q54 deficient= 194.4 \pm 10.7. GABA: F1.Q54 control= 34.4 \pm 3.11 and F1.Q54 deficient= 44.5 \pm 2.71. P-values determined by Student's t-test. Error bars represent SEM.





Male mice were maintained on the deficient or control diet for six weeks. Proline concentrations were assayed in forebrain. Average concentrations are as follows: B6, B6.Q54, B6.*Hlf*^{KO/+}, B6.*Hlf*^{KO/KO}, F1 and F1.Q54 controls= 0, B6 deficient= 8.74 ± 3.02 , B6.Q54 deficient= 8.89 ± 2.97 , B6.*Hlf*^{KO/+} deficient= 2.63 ± 2.63 , B6.*Hlf*^{KO/KO} deficient= 2.42 ± 2.42 , F1 deficient= 5.96 ± 3.45 and F1.Q54 deficient= 4.07 ± 4.07 . P-values determined by Student's t-test. * represents significance compared to control diet. * < 0.01. Error bars represent SEM.

Effect of Hlf on the Dravet Phenotype of Scn1a^{KO/+} Heterozygous Knockout Mice

To determine whether *Hlf* would modify other types of epilepsy, we assessed the ability of *Hlf* to alter the Dravet phenotype of *Scn1a*^{KO/+} heterozygous knockout mice. To do this, we generated double mutant mice by crossing B6.*Hlf* ^{KO/+} females with 129.*Scn1a*^{KO/+} males to generate F1 double heterozygous knockout F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} offspring and controls carrying either F1.*Hlf* ^{KO/+} or F1.*Scn1a*^{KO/+}. Double heterozygous and control mice were then monitored for survival until 12 weeks of age to determine if loss of *Hlf* altered the lifespan of F1.*Scn1a*^{KO/+} mice. A significant reduction in lifespan was observed between F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} and control F1.*Scn1a*^{KO/+} mice (p < 0.001) (Figure 3.20). By four weeks of age, only 45% of double heterozygous knockout F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} mice survived, compared to the 71% survival rate of F1.*Scn1a*^{KO/+} mice. By 12 weeks of age, only 29% of F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} mice have no phenotype with 100% survival throughout the study.



Figure 3.20 Kaplan Meier Survival of B6.*Hlf* ^{KO/+} **X 129.***Scn1a*^{KO/+} **Mice** Survival of F1.*Hlf* ^{KO/+}, F1.*Scn1a*^{KO/+} and F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} mice are shown. Survival was monitored until 12 weeks of age. Kaplan Meier analysis was performed. P-value determined by Logrank Mantel-Cox.

Discussion

We previously mapped a dominant locus on chromosome 11, designated *Moe1*, which modified seizure susceptibility of Q54 mice. Fine-mapping and RNA-Seq data suggested two sex-specific candidate modifier genes at the *Moe1* locus: *Cacna1g* in females and *Hlf* in males (8). To determine the contribution of these genes to the seizure phenotype of Q54 mice, we utilized *Cacna1g* BAC transgenic and *Hlf* targeted knockout mouse models. We systematically evaluated the candidate modifier genes by testing their ability to enhance or reduce seizure severity of the Q54 phenotype in double mutant mice. In addition to seizure analysis, we also evaluated our *Hlf* hypothesis by testing the effects of modified dietary pyridoxine on the Q54 phenotype and assessed *Hlf's* ability to modify the Dravet phenotype of *Scn1a*^{KO/+} mice.

Validation of Cacna1g as a Genetic Modifier of F1.Q54 Mice

Cacna1g, encoding the T-type calcium channel α_1 subunit, was prioritized as a top candidate modifier gene of the *Moe1* locus based on previous research attributing *Cacna1g* mutations to human and mouse epilepsy (8, 10, 11). *Cacna1g* was hypothesized to modify the Q54 seizure phenotype through significant strain-specific differences in expression profiles of transcripts which have functional diversity (8). *Cacna1g* channels preferentially expressed in SJL females reduce synchronous thalamocortical oscillations, a common feature of epilepsy, while B6 females express *Cacna1g* channels prone to hyperexcitability (8, 16-18). Therefore, we wanted to systematically evaluate overexpression of B6 *Cacna1g* to determine if it increased the seizure frequency of F1.Q54 mice.

To evaluate the contribution of *Cacna1g* to the seizure phenotype of F1.Q54 mice, we generated a *Cacna1g* BAC transgenic mouse model. It was determined that the 1G5 line had X-chromosome integration of an estimated 5-8 transgene copies and expressed *Cacna1g* at increased levels compared to wildtype. Double transgenic F1.1G5;Q54 males had significantly more seizures than F1.Q54 controls, while there was no difference in females.

Although previous mapping data (Chapter II) suggested *Cacnalg* as a femalespecific modifier, results from female F1.1G5;Q54 mice were difficult to interpret due to the possibility that the transgene may be subject to X-inactivation (8). Prior work indicated transgene integration onto the X chromosome can result in partial or complete inactivation (8, 34-36). Total or partial inactivation of the 1G5 BAC may have resulted in incomplete transgene expression. Consequently, seizure frequency of F1.1G5:Q54 females may not be altered due to technical reasons. Moreover, it is possible that females, which already have a high seizure frequency, may experience a ceiling effect.

While our previous mapping data did not suggest *Cacna1g* as a candidate modifier in males, it is not unexpected as *CACNA1G* is directly involved in human epilepsy (8, 11). We hypothesize that males may have a protective modifier gene in *Moe1* which may have masked *Cacna1g*'s effect on seizure frequency in our mapping study (8). Future work is necessary to verify the full modifier potential of *Cacna1g*, including generation of additional *Cacna1g* BAC transgenic lines.
Validation of Hlf as a Genetic Modifier of Q54 Mice

Hlf, encoding hepatic leukemia factor, a PAR bZIP transcription factor, was prioritized as a top candidate modifier gene of the *Moe1* locus in males. This was based on a PAR bZIP transcription factor family knockout mouse model that experienced spontaneous GTCS and absence seizures (19). Further analysis of the model revealed a reduction in PDXK, a key enzyme involved in the conversion of pyridoxine to PLP (19). PLP is a key coenzyme involved in amino acid and neurotransmitter metabolism, including GABA and glutamate (20). PLP has a substantial connection to human and mouse epilepsy, as pyridoxine-dependent epilepsies are successfully treated with PLP and mice defective in PLP metabolism experience fatal seizures (21, 25).

Hlf was hypothesized to modify the Q54 seizure phenotype by contributing to strain-specific PDXK and PLP levels (Figure 3.1) (8). *Hlf* is expressed at a significantly reduced level in B6 males compared to SJL (8). Furthermore, we observed a trend toward significant reduction of PDXK expression (p > 0.135) in B6 males compared to SJL in brain RNA-Seq analysis (Unpublished observations, N. Hawkins and J. Kearney,). These reductions in B6 may decrease PLP levels, consequently increasing seizure susceptibility. Therefore we wanted to systematically evaluate if loss of *Hlf* would increase seizure frequency of F1.Q54 and B6.Q54 mice.

On the F1 strain, no significant differences in seizure frequency or survival were observed between heterozygous knockout F1.*Hlf* ^{KO/+};Q54 mice and F1.Q54 controls in either sex. This outcome was expected as SJL mice express *Hlf* at significantly increased levels compared to B6. The single SJL *Hlf* copy may be enough to support sufficient PDXK and PLP levels.

On the B6 strain, double mutant heterozygous knockout B6.*Hlf*^{KO/+};Q54 and homozygous knockout B6.*Hlf*^{KO/KO};Q54 males had significantly lower seizure frequencies compared to B6.Q54 controls. We originally hypothesized that loss of *Hlf* would increase seizure frequency. While B6.*Hlf*^{KO/+};Q54 and B6.*Hlf*^{KO/KO};Q54 had reduced total focal motor seizures compared to controls, B6.*Hlf*^{KO/KO};Q54 males experienced GTCS not traditionally seen in the B6.Q54 model. Although much older B6.Q54 mice may experience rare GTCS, in our previous studies of B6.Q54 we never observed GTCS at three or six weeks of age (5, 7, 8, 32). Therefore, we conclude that complete loss of *Hlf* exacerbated the seizure phenotype of B6.Q54 male mice.

No significant difference in seizure frequency was observed in B6.*Hlf*^{KO/+};Q54 or B6.*Hlf*^{KO/KO};Q54 females. Although an overt seizure phenotype was not detected in either heterozygous or homozygous knockout females, B6.*Hlf*^{KO/+}, heterozygous B6.*Hlf*^{KO/+};Q54 and homozygous B6.*Hlf*^{KO/KO};Q54 females were born at significantly altered ratios than expected. The ratio shift suggests reduced viability of B6.*Hlf*^{KO/KO};Q54 females. Future studies will determine if B6.*Hlf*^{KO/KO};Q54 females are dying before tail biopsy at P14 or are not being born. Either outcome suggests *Hlf* modifies the survival of female B6.Q54 mice.

In addition to seizure analysis, we evaluated our *Hlf* hypothesis by testing the effects of pyridoxine deficient and enriched diets on the Q54 phenotype. We hypothesized that a pyridoxine deficient diet would increase seizure frequency, based on past data which revealed mice maintained on a deficient diet experienced increased seizure frequency (22-24). B6.Q54 females on the pyridoxine deficient diet had increased seizure frequency and reduced survival compared to controls. The B6.Q54 male seizure

phenotype was not altered. This could be due to a variety of reasons, including the relatively short length of time mice were maintained on the deficient diet. Neurochemistry studies revealed B6.Q54 males maintained on the deficient diet had significant levels of proline detected in their brains, whereas controls had zero. Hyperprolinemia has been associated with seizures and epilepsy (21). This may indicate the start of an altered metabolic state in male B6.Q54 mice and suggests that a phenotype may emerge if the deficient diet was continued for longer than six weeks. Although F1.Q54 females maintained on the pyridoxine deficient diet had no changes in seizure frequency. Neurochemistry studies revealed F1.Q54 males had significant changes in glutamate and GABA concentrations compared to controls. Given the functions of glutamate and GABA, we predict these altered levels may contribute to the modified seizure phenotype of F1.Q54 male mice.

We hypothesized a pyridoxine enriched diet would decrease seizure frequency, given pyridoxine dependent epilepsies are successfully treated with PLP (21). No reduction in seizure frequency was observed in B6.Q54 males or females maintained on the pyridoxine enriched diet. It is possible that the already low seizure frequency of B6.Q54 mice may make significant reductions impossible due to floor effects. Alternatively, pyridoxine enrichment may not have an effect on seizure frequency in B6.Q54 mice. F1.Q54 females maintained on the pyridoxine enriched diet had no changes in seizure frequency or survival. F1.Q54 males had increased seizure frequency and reduced survival on the enriched diet compared to controls. Of the ten F1.Q54 males maintained on the enriched diet, only five survived until 9 weeks of age. At least in

males, pyridoxine enrichment has no positive effect on reducing the seizure phenotype of F1.Q54 mice, rather it exacerbates the seizure phenotype.

Finally, *Hlf* was shown to modify the Dravet phenotype of $Scn1a^{KO/+}$ heterozygous knockout mice. Double heterozygous knockout F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} mice had a significant reduction in lifespan compared to controls. By four weeks of age, only 45% of F1.*Hlf* ^{KO/+};*Scn1a*^{KO/+} mice survived compared to 71% of F1.*Scn1a*^{KO/+} controls. The *Scn1a*^{KO/+} mice recapitulate many features of Dravet syndrome, including development of early onset epilepsy, spontaneous seizures and premature death (37, 38). It is hypothesized that reduced sodium currents in GABAergic inhibitory interneurons are responsible for the *Scn1a*^{KO/+} seizure phenotype (38). Our *Scn1a*^{KO/+} model replicated those studies and identified an increase in sodium current density in pyramidal neurons (28). The loss of *Hlf*, hypothesized to reduce PDXK and PLP, may alter neurotransmitter synthesis. This in combination with *Scn1a*^{KO/+} increased hyperexcitability, may be responsible for the decreased survival seen in F1.*Hlf*^{KO/+};*Scn1a*^{KO/+} mice.

Through seizure analysis and modified diet studies, *Hlf* was shown to be a modifier of the Q54 phenotype. Although previous data did not suggest *Hlf* as a female candidate modifier gene, it is not unexpected, as loss of *Hlf* is hypothesized to alter PLP enzyme levels and thus increase seizure susceptibility. Furthermore, *Hlf* was shown to modify the phenotype of Dravet mice. Future identification of *HLF* risk variants in epilepsy patients would validate this gene as a contributor to human epilepsy.

Verification of *Cacna1g* and *Hlf* as epilepsy modifier genes may suggest new targets for improved treatment of epilepsy and advance molecular diagnostic capabilities by identifying those patients who are most at-risk for developing severe epilepsy.

References

- 1. Hauser W.A., Annegers J.F. and Kurland L. (1993) Incidence of epilepsy and unprovoked seizures in Rochester, Minnesota: 1935-1984. *Epilepsia*, **34**, 453-468.
- 2. Meisler M.H., O'Brien J.E. and Sharkey L.M. (2010) Sodium channel gene family: epilepsy mutations, gene interactions and modifier effects. *J.Physiol*, **588**, 1841-1848.
- 3. Touma M., Joshi M., Connolly M.C. *et al.* (2013) Whole genome sequencing identifies SCN2A mutation in monozygotic twins with Ohtahara syndrome and unique neuropathologic findings. *Epilepsia*, **54**, e81-e85.
- 4. Nakamura K., Kato M., Osaka H. *et al.* (2013) Clinical spectrum of SCN2A mutations expanding to Ohtahara syndrome. *Neurology*,
- 5. Kearney J.A., Plummer N.W., Smith M.R., Kapur J., Cummins T.R., Waxman S.G., Goldin A.L. and Meisler M.H. (2001) A gain-of-function mutation in the sodium channel gene Scn2a results in seizures and behavioral abnormalities. *Neuroscience*, **102**, 307-317.
- 6. Bergren S.K., Chen S., Galecki A. and Kearney J.A. (2005) Genetic modifiers affecting severity of epilepsy caused by mutation of sodium channel Scn2a. *Mamm.Genome*, **16**, 683-690.
- 7. Jorge B.S., Campbell C.M., Miller A.R., Rutter E.D., Gurnett C.A., Vanoye C.G., George A.L., Jr. and Kearney J.A. (2011) Voltage-gated potassium channel KCNV2 (Kv8.2) contributes to epilepsy susceptibility. *Proc.Natl.Acad.Sci.U.S.A*, **108**, 5443-5448.
- 8. Hawkins N.A., Kearney J.A. (2012) Confirmation of an epilepsy modifier locus on mouse chromosome 11 and candidate gene analysis by RNA-Seq. *Genes Brain Behav.*, **11**, 452-460.
- 9. Ernst W.L., Noebels J.L. (2009) Expanded alternative splice isoform profiling of the mouse Cav3.1/alpha1G T-type calcium channel. *BMC.Mol.Biol.*, **10**, 53.
- 10. Zhang Y., Mori M., Burgess D.L. and Noebels J.L. (2002) Mutations in high-voltage-activated calcium channel genes stimulate low-voltage-activated currents in mouse thalamic relay neurons. *J.Neurosci.*, **22**, 6362-6371.
- 11. Singh B., Monteil A., Bidaud I. *et al.* (2007) Mutational analysis of CACNA1G in idiopathic generalized epilepsy. Mutation in brief #962. Online. *Hum.Mutat.*, **28**, 524-525.
- 12. Chemin J., Monteil A., Bourinet E., Nargeot J. and Lory P. (2001) Alternatively spliced alpha(1G) (Ca(V)3.1) intracellular loops promote specific T-type Ca(2+) channel gating properties. *Biophys.J.*, **80**, 1238-1250.
- 13. Emerick M.C., Stein R., Kunze R., McNulty M.M., Regan M.R., Hanck D.A. and Agnew W.S. (2006) Profiling the array of Ca(v)3.1 variants from the human T-type calcium channel gene CACNA1G: alternative structures, developmental expression, and biophysical variations. *Proteins*, **64**, 320-342.

- 14. Mittman S., Guo J. and Agnew W.S. (1999) Structure and alternative splicing of the gene encoding alpha1G, a human brain T calcium channel alpha1 subunit. *Neurosci.Lett.*, **274**, 143-146.
- 15. Monteil A., Chemin J., Bourinet E., Mennessier G., Lory P. and Nargeot J. (2000) Molecular and functional properties of the human alpha(1G) subunit that forms Ttype calcium channels. *J.Biol.Chem.*, **275**, 6090-6100.
- 16. Blumenfeld H. (2005) Cellular and network mechanisms of spike-wave seizures. *Epilepsia*, **46 Suppl 9**, 21-33.
- 17. Contreras D. (2006) The role of T-channels in the generation of thalamocortical rhythms. *CNS.Neurol.Disord.Drug Targets.*, **5**, 571-585.
- 18. Ernst W.L., Zhang Y., Yoo J.W., Ernst S.J. and Noebels J.L. (2009) Genetic enhancement of thalamocortical network activity by elevating alpha 1g-mediated low-voltage-activated calcium current induces pure absence epilepsy. *J.Neurosci.*, **29**, 1615-1625.
- 19. Gachon F., Fonjallaz P., Damiola F. *et al.* (2004) The loss of circadian PAR bZip transcription factors results in epilepsy. *Genes Dev.*, **18**, 1397-1412.
- 20. John R.A. (1995) Pyridoxal phosphate-dependent enzymes. *Biochim.Biophys.Acta*, **1248**, 81-96.
- 21. Plecko B., Stockler S. (2009) Vitamin B6 dependent seizures. *Can.J.Neurol.Sci.*, **36** Suppl 2, S73-S77.
- 22. Coleman D.L., SCHLESINGER K. (1965) EFFECTS OF PYRIDOXINE DEFICIENCY ON AUDIOGENIC SEIZURE SUSCEPTIBILITY IN INBRED MICE. *Proc.Soc.Exp.Biol.Med.*, **119**, 264-266.
- 23. SCHLESINGER K., Schreiber R.A. (1969) Interaction of drugs and pyridoxine deficiency on central nervous system excitability. *Ann.N.Y.Acad.Sci.*, **166**, 281-287.
- 24. SCHLESINGER K., Uphouse L.L. (1972) Pyridoxine dependency and central nervous system excitability. *Adv.Biochem.Psychopharmacol.*, **4**, 105-140.
- 25. Waymire K.G., Mahuren J.D., Jaje J.M., Guilarte T.R., Coburn S.P. and MacGregor G.R. (1995) Mice lacking tissue non-specific alkaline phosphatase die from seizures due to defective metabolism of vitamin B-6. *Nat.Genet.*, **11**, 45-51.
- 26. Sorolla M.A., Rodriguez-Colman M.J., Tamarit J., Ortega Z., Lucas J.J., Ferrer I., Ros J. and Cabiscol E. (2010) Protein oxidation in Huntington disease affects energy production and vitamin B6 metabolism. *Free Radic.Biol.Med.*, **49**, 612-621.
- 27. Saunders T. (2006) Purification of Bacterial Artificial Chromosome (BAC) DNA Prepared with the NucleoBond System. *CSH.Protoc.*, **2006**,
- 28. MISTRY A, MILLER A, THOMPSON C, KEARNEY J, GEORGE AL. Strain and age-dependent differences in hippocampal neuron sodium current densities in a mouse model of Dravet syndrome. Society for Neuroscience Meeting Planner . 2012.

- 29. Chandler K.J., Chandler R.L., Broeckelmann E.M., Hou Y., Southard-Smith E.M. and Mortlock D.P. (2007) Relevance of BAC transgene copy number in mice: transgene copy number variation across multiple transgenic lines and correlations with transgene integrity and expression. *Mamm.Genome*, **18**, 693-708.
- 30. Livak K.J., Schmittgen T.D. (2001) Analysis of relative gene expression data using real-time quantitative PCR and the 2(-Delta Delta C(T)) Method 1. *Methods*, **25**, 402-408.
- 31. Racine R.J. (1972) Modification of seizure activity by electrical stimulation. II. Motor seizure. *Electroencephalogr.Clin.Neurophysiol.*, **32**, 281-294.
- 32. Bergren S.K., Rutter E.D. and Kearney J.A. (2009) Fine mapping of an epilepsy modifier gene on mouse Chromosome 19. *Mamm.Genome*, **20**, 359-366.
- 33. Farrant R.D., Walker V., Mills G.A., Mellor J.M. and Langley G.J. (2001) Pyridoxal phosphate de-activation by pyrroline-5-carboxylic acid. Increased risk of vitamin B6 deficiency and seizures in hyperprolinemia type II. *J.Biol.Chem.*, **276**, 15107-15116.
- 34. Sugimoto M., Tan S.S. and Takagi N. (2000) X chromosome inactivation revealed by the X-linked lacZ transgene activity in periimplantation mouse embryos. *Int.J.Dev.Biol.*, **44**, 177-182.
- 35. Tan S.S., Williams E.A. and Tam P.P. (1993) X-chromosome inactivation occurs at different times in different tissues of the post-implantation mouse embryo. *Nat.Genet.*, **3**, 170-174.
- 36. Wu H., Fassler R., Schnieke A., Barker D., Lee K.H., Chapman V., Francke U. and Jaenisch R. (1992) An X-linked human collagen transgene escapes X inactivation in a subset of cells. *Development*, **116**, 687-695.
- 37. Kalume F., Westenbroek R.E., Cheah C.S., Yu F.H., Oakley J.C., Scheuer T. and Catterall W.A. (2013) Sudden unexpected death in a mouse model of Dravet syndrome. *J.Clin.Invest*, **123**, 1798-1808.
- 38. Yu F.H., Mantegazza M., Westenbroek R.E. *et al.* (2006) Reduced sodium current in GABAergic interneurons in a mouse model of severe myoclonic epilepsy in infancy. *Nat Neurosci.*, **9**, 1142-1149.

CHAPTER IV

NEURONAL VOLTAGE-GATED ION CHANNELS ARE GENETIC MODIFIERS OF GENERALIZED EPILEPSY WITH FEBRILE SEIZURE PLUS*

Introduction

During the past 20 years, research has revealed several genes underlying rare monogenic forms of idiopathic generalized epilepsy (IGE); however there has been less progress towards the identification of genes involved in the more common, genetically complex forms of IGE (1-3). Many of the genes now known to cause monogenic forms of epilepsy encode neuronal ion channel subunits, including voltage-gated sodium and potassium channels. Mutations in the voltage-gated sodium channel genes *SCN1A*, *SCN2A* and *SCN1B* result in genetic epilepsy with febrile seizures plus (GEFS+) (4-6).We recently generated a mouse model of GEFS+ by introducing the human *SCN1A*^{R1648H} GEFS+ mutation, which was identified in a large pedigree with 13 affected members, into the orthologous mouse *Scn1a* gene (7).

 $Scn1a^{R1648H/+}$ heterozygous mutants display a normal lifespan, reduced thresholds to flurothyl and hyperthermia induced seizures and infrequent spontaneous generalized seizures as adults (7). $Scn1a^{R1648H/R1648H}$ homozygous mice exhibit spontaneous generalized seizures and have an average lifespan of 18.5 days. Cortical interneurons from $Scn1a^{R1648H/+}$ and $Scn1a^{R1648H/R1648H}$ mice display slowed recovery from inactivation, increased use-dependence and a reduced ability to fire action potentials.

^{*}*Modified from*: Hawkins NA, Martin MS, Frankel WN, Kearney JA and Escayg A. (2011) Neuronal voltage-gated ion channels are genetic modifiers of generalized epilepsy with febrile seizure plus. *Neurobiology of Disease*, **41**, 655-660.

These electrophysiological abnormalities are predicted to reduce the level of GABAergic inhibition, providing a mechanism for seizure generation (7).

Mutations in the voltage-gated sodium channel gene *SCN2A* have also been associated with human epilepsy syndromes including GEFS+, benign familial neonatalinfantile seizures (BFNIS), Dravet and Ohtahara syndromes (8-10). The transgenic mouse model $Scn2a^{Q54}$ (Q54) has a gain-of function mutation in *Scn2a*, resulting in a progressive epilepsy phenotype characterized by focal motor seizures that begin in the second month of life. Later development of secondary generalized seizures and a reduced lifespan also occur. Hippocampal pyramidal neurons from Q54 mice exhibit increased persistent sodium current (11).

Mutations in the voltage-gated potassium channel genes *KCNQ2* and *KCNQ3* are associated with benign familial neonatal convulsions (BFNC). This syndrome is characterized by clusters of seizures in the first days of life and remission within the first year (12-14). *KCNQ2* and *KCNQ3* encode Kv7.2 and Kv7.3 respectively, which heterodimerize to form a slowly activating and inactivating voltage-gated potassium channel. These channels generate M current, important for controlling repetitive firing upon strong excitatory stimulation (15, 16). The *Kcnq2*^{V182M/+} line was generated by ethylnitrosourea (ENU) mutagenesis and carries the amino acid substitution in the third transmembrane segment of *Kcnq2*. Heterozygous *Kcnq2*^{V182M/+} mutants exhibit reduced thresholds for minimal clonic seizures and rare spontaneous seizures as adults even though they have a normal lifespan (17). We previously showed genetic interaction between *Scn2a* and *Kcnq2* in mice (17).

SCN8A mutations are associated with ataxia and behavioral abnormalities in humans and movement disorders in mice. Mice homozygous for the $Scn8a^{\text{med-jo}}$ missense mutation exhibit tremor and cerebellar ataxia. Although $Scn8a^{\text{med-jo}}$ heterozygous mutants have no visible abnormalities, they do have spontaneous spike-wave discharges characteristic of non-convulsive absence seizures (18-21). We recently found that the loss-of-function mutations in heterozygous $Scn8a^{\text{med-jo}}$ mutants and heterozygous $Scn8a^{\text{med-jo}}$ mutants and heterozygous $Scn8a^{\text{med-jo}}$ mutants were more resistant to flurothyl and kainic acid induced seizures. We also showed that the $Scn8a^{\text{med-jo}}$ allele could rescue the reduced seizure threshold and premature lethality of heterozygous Scn1a knockout ($Scn1a^{\text{KO/+}}$) mice, suggesting that Scn8a may play an important role in the excitatory circuits that influence convulsive seizure thresholds (22).

Unrelated individuals with GEFS+ exhibit a wide range of epilepsy subtypes and severities that may reflect, in part, the relative effect of different *SCN1A* mutations on channel function. Similar variability is also seen between affected family members who carry the same *SCN1A* mutation (23, 24). This suggests that in addition to the primary mutation, the clinical manifestation of epilepsy can be influenced by other factors such as stochastic events during development, environmental influences or genetic modifiers. Mouse models with sodium channel mutations exhibit variable phenotypes depending on the genetic background, supporting a role for genetic modifiers (17, 25-27). Based on these observations, we hypothesize that genetic modifier loci may contribute to the variable clinical presentation observed in GEFS+.

To test the hypothesis that genetic modifiers can contribute to GEFS+ variability, we examined the effect of mutations in Scn2a, Kcnq2 and Scn8a on the epilepsy

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phenotype of the $Scn1a^{R1648H/+}$ mouse model. Here we demonstrate that mutations in Scn2a and Kcnq2 exacerbate the phenotype, whereas altered Scn8a function ameliorates it. Our results provide support for genetic modification as one mechanism by which the clinical presentation of GEFS+ can be altered, indicating that neuronal excitability is influenced by the net activity of ion channels.

Materials and Methods

Mice

 $Kcnq2^{V182M/+}$ mice were generated by ENU mutagenesis (http://nmf.jax.org) at The Jackson Laboratory (Jackson Labs stock #004703). $Kcnq2^{V182M/+}$ heterozygous mutants are maintained by continued backcrossing to C57BL/6J (B6) background strain (Jackson Labs stock #000664). Q54 transgenic mice congenic on the B6 strain (B6.Q54) were established as described and are maintained by continued backcrossing of hemizygous B6.Q54 males to B6 females (Jackson Labs stock #000664) (25). $Scn8a^{\text{med-jo}}$ mice were obtained from The Jackson Laboratory and are maintained on the B6 background (Jackson Labs stock #003798). $Scn1a^{R1648H/+}$ mice were generated as previously described (7). $Scn1a^{R1648H/+}$ mice on a mixed 129S6.C57BL/6J(N2–3) background were used for mating with $Scn8a^{\text{med-jo}}$ mice. $Scn1a^{R1648H/+}$ mice on the 129S6/SvEvTac (129) background were used for mating with B6.Q54 and B6. $Kcnq2^{V182M/+}$ mice. 129. $Scn1a^{R1648H/+}$, B6.Q54, B6. $Kcnq2^{V182M/+}$ and $Scn8a^{\text{med-jo}}$ mice were genotyped as previously described (7, 11, 17, 22).

Generation of Double Mutant Mice

Double heterozygous mutants were generated by crossing $129.Scn1a^{R1648H/+}$ females with B6.*Kcnq2*^{V182M/+} or B6.Q54 males generating F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} or F1.*Scn1a*^{R1648H/+};Q54 mice and F1 control littermates. *Scn1a*^{R1648H/+} females on a mixed B6/129 background were used for mating to *Scn8a*^{med-jo} males. *Scn1a*^{R1648H/R1648H};*Scn8a*^{med-jo} mutants and controls were generated by crossing *Scn1a*^{R1648H/+};*Scn8a*^{med-jo} males with *Scn1a*^{R1648H/+} females. All double mutants were obtained at expected Mendelian ratios. Littermates were used for all experiments to minimize variation due to differences in genetic background. Mice were housed in pathogen-free mouse facilities with 12-h light/dark cycles. Food and water were available *ad libitum*. All experimental protocols were approved by the Emory University and Vanderbilt University IACUC committees.

Flurothyl Seizure Induction

Mice between eight and twelve weeks of age were placed in a clear Plexiglas chamber and flurothyl (2,2,2-trifluroethylether) was slowly introduced into the chamber via a syringe pump at a rate of 20 µl/min and allowed to volatilize (Sigma-Aldrich). Seizure thresholds were determined by measuring latency to the first myoclonic jerk (MJ) and generalized tonic-clonic seizure (GTCS). The MJ is the first observable behavioral response, characterized by a brief jerk of the shoulders and/or neck. The GTCS is characterized by convulsions of the entire body and loss of posture. Data from males and females were analyzed separately. No sex differences were observed therefore data from both sexes were combined. Statistical analysis between genotypes was performed using one-way analysis of variance (ANOVA) followed by Fisher's protected least significant difference (PLSD) *post hoc* test.

Video-ECoG Monitoring

prefabricated Mice were implanted with headmounts for video-Electrocorticography (ECoG) monitoring (Pinnacle Technology, Inc.). Briefly, mice were anesthetized with isoflurane and placed in a stereotaxic frame and headmounts were attached to the skull with four stainless steel screws that serve as cortical surface electrodes (Kopf). Headmounts were positioned 0-0.5 mm posterior to lambda. The anterior screw electrodes were 0.5–1 mm posterior to bregma and 1 mm lateral from the midline. The posterior screws were 4.5–5 mm posterior to bregma. After ≥ 24 hours of recovery, mice were placed in a Plexiglas bowl (14" $h \times 16$ " diameter) and ECoG data were collected from freely moving mice. Acquisition and analysis of digitized data was performed with Sirenia software along with contemporaneous video recordings (Pinnacle Technology, Inc.). Epileptiform activity was scored manually.

Results

Q54 and Kcnq2^{V182M/+} Alleles Exacerbate the Phenotype of Scn1a^{R1648H/+} Mutants

To model the effect of inheriting mutations in sodium channel genes Scn1a and Scn2a, we generated F1. $Scn1a^{R1648H/+}$;Q54 double mutants by crossing 129. $Scn1a^{R1648H/+}$ females with B6.Q54 males. Sporadic death of F1. $Scn1a^{R1648H/+}$;Q54 double mutants began to occur at postnatal day 16 (P16) with 100% mortality by P24 (Figure 4.1).

Beginning at postnatal day 16 (P16), F1.*Scn1a*^{R1648H/+};Q54 double mutants exhibited spontaneous focal motor seizures and GTCS. In 137 hours of ECoG recording, we observed 25 GTCS and 11 focal motor seizures (Table 4.1; Figure 4.2B). Generalized seizures lasted 45–100 s, during which time mice experienced repetitive jerking of all four limbs and neck, running, jumping and tail clonus. These seizures often ended with tonic hindlimb extension, indicative of a severe seizure. During ECoG recording we observed two F1.*Scn1a*^{R1648H/+};Q54 mice that had severe seizures with hindlimb extension followed by death. Focal motor seizures lasted 10 s and were characterized by forelimb clonus. F1.Q54 littermates displayed a similar number of focal motor seizures. However, GTCS were rare in F1.Q54, with only one observed during 168 hours of ECoG recordings (Table 4.1). We saw no seizures in F1.*Scn1a*^{R1648H/+} littermates (Table 4.1, Figure 4.2A). This was expected as previous monitoring of three to five month old *Scn1a*^{R1648H/+} mice detected spontaneous seizures with a low average frequency of one seizure per 64 hours of recording (7).

To model the effect of inheriting mutations in *Scn1a* and *Kcnq2*, we generated F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} double heterozygous mutants by crossing 129.*Scn1a*^{R1648H/+} females with B6.*Kcnq2*^{V182M/+} males. At P19, sporadic death of F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} mice began to occur, with 42% mortality by P25, demonstrating the ability of the *Kcnq2*^{V182M} allele to exacerbate the phenotype of *Scn1a*^{R1648H/+} mice (Figure 4.1). Interestingly, 47% of F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} double heterozygous mutants survived for more than 100 days (Figure 4.1).

At P16, F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} mice began to display spontaneous generalized seizures. In 330 hours of ECoG recording, we observed 87 MJ, four GTCS

and one focal motor seizure in F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} double heterozygous mutants (Table 4.1; Figure 4.2C). During a generalized seizure the mice typically experienced repetitive jerking of all four limbs and neck, running, jumping and tail clonus. Generalized seizures were periodically followed by tonic extension of the hindlimbs. During ECoG recording we observed two F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} mice that had severe seizures with hindlimb extension followed by death. Epileptiform events were not observed in F1.*Scn1a*^{R1648H/+} or F1.*Kcnq2*^{V182M/+} control littermates (Table 4.1).

Table 4.1 Recorded ECoG Events from F1 Double Mutant Mice

Video ECoG data was collected from freely moving mice. Double mutants and single mutant control littermates ($n \ge 3$) were observed in 12 hour intervals. Data acquisition and analysis were performed with contemporaneous video. Epileptiform activity was manually scored.

Genotype	GTCS	<u>Events</u> Partial	MJ	п	Age Range (Days)	Total Hours of ECoG monitoring
F1.Scn1a ^{R1648H/+} ;Q54	25	11	3	5	17-21	137
F1. $Scn1a^{R1648H/+}$; $Kcnq2^{V182M/+}$	4	1	87	7	18-36	330
F1.Scn1a ^{R1648H/+}	0	0	0	4	18-42	240
F1.Q54	1	14	0	3	17-25	168
F1.Kcnq2 ^{V182M/+}	0	0	0	3	22-44	350





Survival of F1 double mutant mice and littermate controls are shown. Survival was monitored until 100 days of age. All genotypes had $n \ge 24$.



Figure 4.2 Q54 and *Kcnq2*^{V182M/+}**Alleles Exacerbate the** *Scn1a*^{R1648H/+}**Phenotype** A. Representative normal ECoG pattern from a control F1.*Scn1a*^{R1648H/+} heterozygote mouse. B. Representative ECoG recording from a F1.*Scn1a*^{R1648H/+};Q54 double heterozygous mutant during a seizure. C. Representative ECoG recording from a F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} double heterozygous mutant during a seizure. Channel 1 recorded from right posterior to left posterior. Channel 2 recorded from right anterior to left posterior.

Scn8a Dysfunction Restores Normal Seizure Thresholds in Scn1a^{R1648H/+} Mutants

We previously demonstrated that two heterozygous *Scn8a* mutants, *Scn8a*^{med-jo} and *Scn8a*^{med}, exhibited increased resistance to flurothyl and kainic acid induced seizures (22). In contrast, *Scn1a*^{R1648H/+} mutants had reduced thresholds to flurothyl induced GTCS (7). To investigate whether the *Scn8a*^{med-jo} allele could alter convulsive seizure thresholds in *Scn1a*^{R1648H/+} mice, we generated double heterozygous *Scn1a*^{R1648H/+};*Scn8a*^{med-jo} mutants. Thresholds to flurothyl induced seizures were



Figure 4.3 Latency to Flurothyl Induced Seizures

Average latency in minutes to the first GTCS is shown. Group sizes were n=9-10. Significant differences between groups were determined by ANOVA: $F_{(3,35)}$ = 9.858, p < 0.001. P-values were determined by Fisher's PLSD *post hoc* test. * indicated p < 0.05 compared to wildtype littermates. # indicates p < 0.001 compared with *Scn1a*^{R1648H/+} mutants. Error bars represent SEM.

compared between $Scn1a^{R1648H/+}$; $Scn8a^{med-jo}$ double mutants and control single heterozygote and wildtype littermates, which revealed a significant effect by ANOVA $(F_{(3,35)}= 9.858, p < 0.001)$. In agreement with our previous observations, the average latency to flurothyl-induced GTCS in $Scn8a^{med-jo}$ mutants was 30% longer compared to wildtype littermates (Figure 4.3) (7, 22). *Post hoc* analysis of the increased latency to GTCS experienced by $Scn8a^{med-jo}$ compared to wildtype littermates was statistically significant (p < 0.05). In contrast, a 21% reduction was observed in $Scn1a^{R1648H/+}$ mutants when compared to wildtype littermates, which was statistically significant (p < 0.05) by *post hoc* analysis (Figure 4.3). The average latency to GTCS of $Scn1a^{R1648H/+}$; $Scn8a^{med-jo}$ double mutants was 50% longer compared to $Scn1a^{R1648H/+}$ mutants. *Post hoc* analysis revealed the increased latency to GTCS observed in $Scn1a^{R1648H/+}$; $Scn8a^{med-jo}$ double mutants was statistically significant when compared to $Scn1a^{R1648H/+}$ mutants (p < 0.001), but not statistically different from wildtype littermates (p > 0.05). These results demonstrate seizure thresholds can be restored to more normal levels in $Scn1a^{R1648H/+}$ mice by altering the function of Scn8a.

Scn8a^{med-jo} Mutation Prolongs the Lifespan of Scn1a^{R1648H/R1648H} Mutants

To determine whether the presence of the $Scn8a^{\text{med-jo}}$ allele could improve the survival of homozygous $Scn1a^{\text{R1648H/R1648H}}$ mice, we compared the lifespans of $Scn1a^{\text{R1648H/R1648H}}$ and $Scn1a^{\text{R1648H/R1648H}}$; $Scn8a^{\text{med-jo}}$ littermates. Similar to previous observations, $Scn1a^{\text{R1648H/R1648H}}$ mutants exhibited 50% mortality by P19.5 and 100% lethality by P25 (Figure 4.4) (7). In contrast, only 25% mortality was observed for $Scn1a^{\text{R1648H/R1648H}}$; $Scn8a^{\text{med-jo}}$ mice at P25 and 47% of these mutants survived for over 100 days, a significant (p < 0.001) improvement compared to controls (Figure 4.4).



Figure 4.4 Survival of *Scn1a*^{R1648H/R1648H}; *Scn8a*^{med-jo} and Control Littermates Survival of double mutant $Scn1a^{R1648H/R1648H}$; $Scn8a^{med-jo}$ mice and littermate $Scn1a^{R1648H/R1648H}$ controls are shown. Survival was monitored until 100 days of age. All genotypes had n = 11-16.

Discussion

One characteristic feature of GEFS+ is the wide range of seizure types and severities frequently seen among family members with the same *SCN1A* mutation (23, 24, 28). Based on these observations, we hypothesized that the variable clinical presentation in GEFS+ is possibly due to contributions from additional genetic modifiers.

Even though it is well recognized that genetic modifiers can influence the clinical presentation of a disorder, we know of relatively few human modifier genes. Cystic fibrosis (CF) represents one good example of a monogenic human disease with a known genetic modifier. CF results from recessive mutations in CFTR, a cAMP-dependent chloride channel (29). Multiple studies have shown a significant association between two transforming growth factor- β (TGF- β) polymorphic variants and lung disease severity in CF (30, 31). TGF- β is an inflammatory cytokine and directly inhibits CFTR function (32). As a result, polymorphisms that increase circulating TGF- β levels are more common in patients with severe lung disease.

Although genetic interactions have been difficult to demonstrate in epilepsy patients, model organisms can help in the search for genetic modifiers of seizure severity. We previously demonstrated that mutations in other ion channels could modify spontaneous seizure activity and lifespans of $Scn1a^{KO/+}$ and Q54 mutants (17, 22). In the presence of the $Scn8a^{\text{med-jo}}$ allele, the severe seizure phenotype of $Scn1a^{KO/+}$ mice was dramatically ameliorated (22). In contrast, the $Kcnq2^{V182M/+}$ and Szt1 mutations exacerbated the epilepsy phenotype of Q54 mice (17).

Here we demonstrated *Scn2a*, *Kcnq2* and *Scn8a* mutant alleles modified the phenotype of $Scn1a^{R1648H/+}$ mice. This supports genetic modification as one mechanism

by which the clinical presentation of GEFS+ can be altered. The genetic interactions between these ion channels imply that variants within Scn2a, Kcnq2 and possibly Kcnq3, may exacerbate the clinical presentation of GEFS+, shifting it to a more severe part of the GEFS+ spectrum. As previously observed with $Scn1a^{KO/+}$ mutants, the $Scn8a^{med-jo}$ allele could rescue the increased susceptibility to flurothyl induced GTCS in $Scn1a^{R1648H/+}$ mice by raising seizure thresholds to a level comparable to wildtype littermates (22). In addition, while Scn1a^{R1648H/R1648H} mutants do not survive more than 26 days, 47% of Scn1a^{R1648H/R1648H}; Scn8a^{med-jo} mutants were still alive after 100 days. These results demonstrate that altered *Scn8a* function is capable of compensating for abnormalities in neuronal excitability caused by Scnla mutations. These results suggest that selective blocking of Scn8a may be similarly protective in patients with epilepsy. Interestingly, although Scn8a^{med-jo} heterozygotes have increased resistance to convulsive seizures, we recently reported they do have spontaneous absence seizures, characterized by hypersynchrony of the thalamocortical system (20). This underscores the idea that the net effect of sodium channel dysfunction in different neuronal circuits is highly dependent on the channel composition and synaptic function within each circuit.

In contrast, whereas $Scn1a^{R1648H/+}$ mice have infrequent, adult-onset generalized seizures, the presence of either the Q54 or $Kcnq2^{V182M/+}$ alleles resulted in severe, juvenile-onset generalized seizures and shortened lifespan. Recordings of neurons isolated from Scn1a mutant mice suggest there is decreased GABAergic neurotransmission in the hippocampus and cortex (7, 26, 27). In F1. $Scn1a^{R1648H/+}$;Q54 double mutants, the combination of increased excitability of pyramidal neurons due to the Scn2a mutation and decreased inhibition from the Scn1a mutation resulted in severe

generalized seizures and lethality. Reduced GABAergic inhibition may prevent localized seizure termination, resulting in secondary generalization of seizures and the more severe phenotype. Similarly, it was demonstrated that loss of M-current in *Kcnq2* mutants resulted in hyperexcitability of hippocampal pyramidal CA1 neurons, which in combination with reduced GABAergic inhibition, may permit secondary generalization of seizures in double F1. *Scn1a*^{R1648H/+}; *Kcnq2*^{V182M/+} mutants (33, 34). Alternatively, because these genes have widespread expression in the brain, it is possible that the severe phenotype observed in double mutant mice was the result of primary generalized seizures.

Given that the $Scn1a^{R1648H/R1648H}$; $Scn8a^{med-jo}$ and F1. $Scn1a^{R1648H/+}$; $Kcnq2^{V182M/+}$ compound mutants were on mixed genetic backgrounds, the respective 47% and 42% survival rates observed raises the possibility that genetic variants which differ between the B6 and 129 inbred strains may influence disease severity. Alternatively, the increased mortality between P20 and P40 in the double mutant heterozygotes may reflect a more vulnerable juvenile stage due to ongoing maturation processes in the developing brain. In humans, *KCNQ2* dysfunction leads to BFNC, an epilepsy disorder affecting neonates that typically remits by one year of age. The spontaneous remission of BFNC appears to correlate with brain maturation (15). However, it is also plausible that the observed survival rates are due to stochastic events.

Together with our previous study analyzing the B6.Q54; $Kcnq2^{V182M/+}$ mice, our observations from F1. $Scn1a^{R1648H/+}$; $Kcnq2^{V182M/+}$ mutants illustrate that M-channel dysfunction in a background of abnormal excitability promotes seizure initiation and increases seizure severity. This suggests that increasing M-current may be of therapeutic

benefit in individuals with generalized epilepsy. The M-current enhancer ezogabine has therapeutic benefit as an adjunctive therapy in patients with drug-resistant focal epilepsy (35-37)

Our findings show that voltage-gated ion channel variants can modify the phenotype of a mouse model of GEFS+ and therefore suggest that coding and possibly noncoding variants in *Scn2a*, *Scn8a* and *Kcnq2* may influence clinical presentation and severity in patients with *SCN1A* mutations. The demonstrated genetic interactions between *Scn1a*, *Scn2a*, *Scn8a* and *Kcnq2*, together with previous reports showing a genetic interaction between *Scn2a* and *Kcnq2*, and *Kcnq1* and *Cacna1a*, support the notion that neuronal firing patterns are determined by the net sum of voltage-gated ion channel activity (17, 38). Hence, screening patients for mutations in a panel of selected ion channel genes may improve the utility of molecular diagnosis for risk assessment and guiding disease treatment. Traditional single gene screening approaches will be replaced by next-generation sequencing technologies, which will enable targeted re-sequencing of panels of selected genes, or whole exome analysis. Clinical diagnostic testing using next-generation sequencing of gene panels is already being applied to epilepsy genetics (GeneDx) and are likely to replace single gene testing in the near future.

References

- 1. Greenberg D.A., Pal D.K. (2007) The state of the art in the genetic analysis of the epilepsies. *Curr.Neurol.Neurosci.Rep.*, **7**, 320-328.
- 2. Heron S.E., Scheffer I.E., Berkovic S.F., Dibbens L.M. and Mulley J.C. (2007) Channelopathies in idiopathic epilepsy. *Neurotherapeutics.*, **4**, 295-304.
- 3. Tan N.C., Mulley J.C. and Scheffer I.E. (2006) Genetic dissection of the common epilepsies. *Curr.Opin.Neurol.*, **19**, 157-163.
- 4. Escayg A., MacDonald B.T., Meisler M.H. *et al.* (2000) Mutations of SCN1A, encoding a neuronal sodium channel, in two families with GEFS+2. *Nat Genet*, **24**, 343-5.
- 5. Sugawara T., Tsurubuchi Y., Agarwala K.L. *et al.* (2001) A missense mutation of the Na+ channel alpha II subunit gene Na(v)1.2 in a patient with febrile and afebrile seizures causes channel dysfunction. *Proc Natl Acad Sci U S A*, **98**, 6384-9.
- 6. Wallace R.H., Wang D.W., Singh R. *et al.* (1998) Febrile seizures and generalized epilepsy associated with a mutation in the Na+-channel beta1 subunit gene SCN1B. *Nat Genet*, **19**, 366-370.
- 7. Martin M.S., Dutt K., Papale L.A. *et al.* (2010) Altered function of the SCN1A voltage-gated sodium channel leads to gamma-aminobutyric acid-ergic (GABAergic) interneuron abnormalities. *J.Biol.Chem.*, **285**, 9823-9834.
- 8. Meisler M.H., O'Brien J.E. and Sharkey L.M. (2010) Sodium channel gene family: epilepsy mutations, gene interactions and modifier effects. *J.Physiol*, **588**, 1841-1848.
- 9. Nakamura K., Kato M., Osaka H. *et al.* (2013) Clinical spectrum of SCN2A mutations expanding to Ohtahara syndrome. *Neurology*,
- 10. Touma M., Joshi M., Connolly M.C. *et al.* (2013) Whole genome sequencing identifies SCN2A mutation in monozygotic twins with Ohtahara syndrome and unique neuropathologic findings. *Epilepsia*, **54**, e81-e85.
- 11. Kearney J.A., Plummer N.W., Smith M.R., Kapur J., Cummins T.R., Waxman S.G., Goldin A.L. and Meisler M.H. (2001) A gain-of-function mutation in the sodium channel gene Scn2a results in seizures and behavioral abnormalities. *Neuroscience*, **102**, 307-317.
- 12. Biervert C., Schroeder B.C., Kubisch C., Berkovic S.F., Propping P., Jentsch T.J. and Steinlein O.K. (1998) A potassium channel mutation in neonatal human epilepsy. *Science*, **279**, 403-406.
- Charlier C., Singh N.A., Ryan S.G., Lewis T.B., Reus B.E., Leach R.J. and Leppert M. (1998) A pore mutation in a novel KQT-like potassium channel gene in an idiopathic epilepsy family. *Nat. Genet.*, 18, 53-55.
- 14. Singh N.A., Charlier C., Stauffer D. *et al.* (1998) A novel potassium channel gene, KCNQ2, is mutated in an inherited epilepsy of newborns. *Nat.Genet.*, **18**, 25-29.

- 15. Cooper E.C., Jan L.Y. (2003) M-channels: neurological diseases, neuromodulation, and drug development. *Arch Neurol*, **60**, 496-500.
- 16. Delmas P., Brown D.A. (2005) Pathways modulating neural KCNQ/M (Kv7) potassium channels. *Nat.Rev.Neurosci.*, **6**, 850-862.
- Kearney J.A., Yang Y., Beyer B., Bergren S.K., Claes L., Dejonghe P. and Frankel W.N. (2006) Severe epilepsy resulting from genetic interaction between Scn2a and Kcnq2. *Hum.Mol.Genet*, **15**, 1043-1048.
- 18. Dick D.J., Boakes R.J., Candy J.M., Harris J.B. and Cullen M.J. (1986) Cerebellar structure and function in the murine mutant "jolting". *J.Neurol.Sci.*, **76**, 255-267.
- 19. Kohrman D.C., Smith M.R., Goldin A.L., Harris J. and Meisler M.H. (1996) A missense mutation in the sodium channel Scn8a is responsible for cerebellar ataxia in the mouse mutant jolting. *J.Neurosci.*, **16**, 5993-5999.
- 20. Papale L.A., Beyer B., Jones J.M. *et al.* (2009) Heterozygous mutations of the voltage-gated sodium channel SCN8A are associated with spike-wave discharges and absence epilepsy in mice. *Hum.Mol.Genet.*, **18**, 1633-1641.
- 21. Sidman R.L., Cowen J.S. and Eicher E.M. (1979) Inherited muscle and nerve diseases in mice: a tabulation with commentary. *Ann.N.Y.Acad.Sci.*, **317**, 497-505.
- 22. Martin M.S., Tang B., Papale L.A., Yu F.H., Catterall W.A. and Escayg A. (2007) The voltage-gated sodium channel Scn8a is a genetic modifier of severe myoclonic epilepsy of infancy. *Hum.Mol.Genet*, **16**, 2892-2899.
- 23. Fujiwara T. (2006) Clinical spectrum of mutations in SCN1A gene: severe myoclonic epilepsy in infancy and related epilepsies. *Epilepsy Res.*, **70 Suppl 1**, S223-S230.
- 24. Singh R., Andermann E., Whitehouse W.P. *et al.* (2001) Severe myoclonic epilepsy of infancy: extended spectrum of GEFS+? *Epilepsia*, **42**, 837-844.
- 25. Bergren S.K., Chen S., Galecki A. and Kearney J.A. (2005) Genetic modifiers affecting severity of epilepsy caused by mutation of sodium channel Scn2a. *Mamm.Genome*, **16**, 683-690.
- 26. Ogiwara I., Miyamoto H., Morita N. *et al.* (2007) Na(v)1.1 localizes to axons of parvalbumin-positive inhibitory interneurons: a circuit basis for epileptic seizures in mice carrying an Scn1a gene mutation. *J.Neurosci.*, **27**, 5903-5914.
- 27. Yu F.H., Mantegazza M., Westenbroek R.E. *et al.* (2006) Reduced sodium current in GABAergic interneurons in a mouse model of severe myoclonic epilepsy in infancy. *Nat Neurosci.*, **9**, 1142-1149.
- 28. Meisler M.H., Kearney J.A. (2005) Sodium channel mutations in epilepsy and other neurological disorders. *J.Clin.Invest*, **115**, 2010-2017.
- 29. Riordan J.R., Rommens J.M., Kerem B. *et al.* (1989) Identification of the cystic fibrosis gene: cloning and characterization of complementary DNA. *Science*, **245**, 1066-1073.

- 30. Arkwright P.D., Laurie S., Super M., Pravica V., Schwarz M.J., Webb A.K. and Hutchinson I.V. (2000) TGF-beta(1) genotype and accelerated decline in lung function of patients with cystic fibrosis. *Thorax*, **55**, 459-462.
- 31. Drumm M.L., Collins F.S. (1993) Molecular biology of cystic fibrosis. *Mol.Genet.Med.*, **3**, 33-68.
- 32. Howe K.L., Wang A., Hunter M.M., Stanton B.A. and McKay D.M. (2004) TGFbeta down-regulation of the CFTR: a means to limit epithelial chloride secretion. *Exp.Cell Res.*, **298**, 473-484.
- 33. Otto J.F., Yang Y., Frankel W.N., White H.S. and Wilcox K.S. (2006) A spontaneous mutation involving Kcnq2 (Kv7.2) reduces M-current density and spike frequency adaptation in mouse CA1 neurons 4. *J.Neurosci.*, **26**, 2053-2059.
- 34. Singh N.A., Otto J.F., Dahle E.J. *et al.* (2008) Mouse models of human KCNQ2 and KCNQ3 mutations for benign familial neonatal convulsions show seizures and neuronal plasticity without synaptic reorganization 2. *J.Physiol*, **586**, 3405-3423.
- 35. Bialer M., Johannessen S.I., Levy R.H., Perucca E., Tomson T. and White H.S. (2009) Progress report on new antiepileptic drugs: a summary of the Ninth Eilat Conference (EILATIX) 1. *Epilepsy Res.*, **83**, 1-43.
- 36. Brodie M.J., Lerche H., Gil-Nagel A., Elger C., Hall S., Shin P., Nohria V. and Mansbach H. (2010) Efficacy and safety of adjunctive ezogabine (retigabine) in refractory partial epilepsy. *Neurology*, **75**, 1817-1824.
- French J.A., bou-Khalil B.W., Leroy R.F., Yacubian E.M., Shin P., Hall S., Mansbach H. and Nohria V. (2011) Randomized, double-blind, placebo-controlled trial of ezogabine (retigabine) in partial epilepsy. *Neurology*, 76, 1555-1563.
- 38. Glasscock E., Qian J., Yoo J.W. and Noebels J.L. (2007) Masking epilepsy by combining two epilepsy genes. *Nat.Neurosci.*, **10**, 1554-1558.

CHAPTER V

CONCLUSIONS AND FUTURE DIRECTIONS

Conclusions

Summary

Epilepsy is a common neurological disease, affecting almost 3 million Americans and 1% of the worldwide population (1). Considered a spectrum disorder, epilepsy has more than 25 associated syndromes. These range from the severe and debilitating Dravet and Lennox Gastaut syndromes to the mild and treatable conditions of GEFS+ (Genetic Epilepsy with Febrile Seizure Plus) and absence epilepsy (2-4).

Two-thirds of patients diagnosed with epilepsy have no known cause for their disease, however recent evidence suggests most result from complex genetic interactions (5, 6). Mutations identified in nicotinic acetylcholine and GABA receptors, chloride channels and voltage-gated potassium and sodium channels are known to be responsible for monogenic epilepsies (7). Identification of these genes provided clues about the etiology of common epilepsy syndromes with more complex inheritance.

Mutations in voltage-gated sodium channels are responsible for several types of human epilepsy, including GEFS+, Benign Familial Neonatal-Infantile Seizures (BFNIS), Dravet and Ohtahara syndromes (8-10). Family members who inherit the same epilepsy-associated sodium channel mutation frequently have clinical phenotypes that vary dramatically. This is seen in both GEFS+ and Dravet syndrome. This suggests that other factors, possibly genetic, modify the primary mutation, resulting in a more or less severe phenotype.

Mouse models have been generated to study the genetic basis of epilepsy. Often, the genetic strain background alters the disease phenotype, suggestive of genetic modifiers in epilepsy. The $Scn2a^{Q54}$ (Q54) transgenic mouse model has a gain-offunction mutation that results in persistent sodium current and epilepsy (11). On the C57BL/6J (B6) strain background, B6.Q54 mice have infrequent, adult-onset focal motor seizures and a 75% survival rate beyond six months of age (12). When crossed with the SJL/J (SJL) strain, the resulting F1.Q54 offspring experience high seizure frequency with juvenile onset and less than 25% survival until six months of age (12). We mapped two dominant loci that modify seizure susceptibility in Q54, designated *Moe1* (Modifier of Epilepsy) on chromosome 11 and *Moe2*, on chromosome 19 (12).

Chapter II focused on fine-mapping and narrowing of the *Moe1* interval. We utilized interval-specific congenic lines spanning the *Moe1* locus and RNA-Seq to identify candidate modifier genes of the Q54 seizure phenotype. *Cacna1g* and *Hlf* were selected among the top *Moe1* candidates.

Cacna1g, encoding the T-type calcium channel α_1 subunit, was prioritized as a top female candidate modifier gene of the *Moe1* locus based on previous research attributing *Cacna1g* mutations to human and mouse epilepsy (13-15). *Cacna1g* was hypothesized to modify the Q54 seizure phenotype based on the significant strain-specific differences in expression profiles of transcripts which have functional kinetic diversity (13). *Cacna1g* channels preferentially expressed in SJL females reduce

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synchronous thalamocortical oscillations, a common feature of epilepsy, while B6 females express *Cacna1g* channels prone to hyperexcitability (13, 16-18).

Hlf, encoding hepatic leukemia factor, a PAR bZIP transcription factor, was prioritized as a top candidate modifier gene of the *Moe1* locus in males. This was based on previous research of a PAR bZIP transcription factor family knockout mouse model that experienced spontaneous GTCS and absence seizures (19). Further analysis of the model revealed a reduction in PDXK, a key enzyme involved in the conversion of pyridoxine to pyridoxal 5' phosphate (PLP) (19). PLP is a key coenzyme involved in amino acid and neurotransmitter metabolism, including GABA and glutamate (20). PLP has a substantial connection with human and mouse epilepsy (20-22). *Hlf* was hypothesized to modify the Q54 seizure phenotype by contributing to strain-specific PDXK and PLP levels (13). *Hlf* is expressed at a significantly reduced level in B6 males compared to SJL (13). Furthermore, we observed a trend toward significant reduction (p=0.135) of PDXK expression in B6 males compared to SJL by RNA-Seq (N. Hawkins and J. Kearney, unpublished observations). These reductions in B6 may decrease PLP levels, consequently increasing seizure susceptibility.

Chapter III focused on assessing the modifier potential of *Cacna1g* and *Hlf*. Through generation of *Cacna1g* BAC transgenic (SJL.1G5) and *Hlf* targeted knockout (B6.*Hlf* $^{KO/+}$) animal models, we systematically evaluated the ability of *Cacna1g* transgenic expression or loss of *Hlf* to alter seizure severity of the Q54 phenotype.

We tested the candidate modifier gene *Cacna1g* by crossing the BAC transgenic SJL.1G5 line with B6.Q54 to generate double mutant mice. Double transgenic F1.1G5;Q54 males, not females, had significantly more seizures than F1.Q54 controls.

Although data from Chapter II suggested *Cacna1g* was a female-specific modifier, results from female F1.1G5;Q54 mice were difficult to interpret due to the possibility that the transgene may be subject to X-inactivation (13). These results suggest *Cacna1g* is a genetic modifier of the male F1.Q54 phenotype. Future evaluation of additional BAC transgenic lines with autosomal integration of the transgene will confirm if *Cacna1g* is a genetic modifier of the female F1.Q54 phenotype.

To evaluate the contribution of *Hlf* on the seizure phenotype of Q54 mice, we generated double mutant mice on two genetic strain backgrounds by crossing B6.*Hlf*^{KO/+};Q54 males with B6.*Hlf*^{KO/+} or SJL females. On the F1 strain, no significant differences in seizure frequency or survival were observed between heterozygous knockout F1.*Hlf*^{KO/+};Q54 mice and F1.Q54 controls in either sex. On the B6 strain, double mutant homozygous knockout B6.*Hlf*^{KO/KO};Q54 males experienced GTCS not traditionally seen in the B6.Q54 model. Although no overt seizure phenotype was observed in either heterozygous B6.*Hlf*^{KO/+};Q54 or homozygous B6.*Hlf*^{KO/KO};Q54 females, these mice were born at significantly reduced ratios than expected. The ratio shift suggests reduced viability of B6.*Hlf*^{KO/KO};Q54 females. Overall, these results suggest that total loss of *Hlf* is detrimental to the B6.Q54 phenotype.

In addition to seizure analysis, we evaluated our *Hlf* hypothesis by testing the effects of altering dietary pyridoxine on the Q54 phenotype. We hypothesized that a pyridoxine deficient diet would increase seizure frequency, based on past data which demonstrated that mice maintained on a deficient diet experienced increased seizure frequency (23-25). B6.Q54 females on the pyridoxine deficient diet had increased seizure frequency and reduced survival compared to controls. While the B6.Q54 male seizure

phenotype was not altered, neurochemistry studies showed B6.Q54 males maintained on the deficient diet had significant levels of proline detected in their brains, indicating an altered metabolic state. F1.Q54 males maintained on the deficient diet trended toward increased seizure frequency, while there was no change in F1.Q54 females. Neurochemistry studies showed F1.Q54 males had significant changes in glutamate and GABA concentrations compared to controls. These results suggest that maintaining adequate dietary pyridoxine levels is important when there is an underlying epilepsy risk.

We hypothesized that a pyridoxine enriched diet would decrease seizure frequency, given that pyridoxine dependent epilepsies are successfully treated with PLP (21). No reduction in seizure frequency was observed in B6.Q54 males or females maintained on the pyridoxine enriched diet. F1.Q54 females maintained on the pyridoxine enriched diet had no changes in seizure frequency or survival. Paradoxically, F1.Q54 males had increased seizure frequency and reduced survival on the enriched diet compared to controls. These results suggest that dietary supplementation with pyridoxine megadoses offer no additional benefit.

Finally, *Hlf* was shown to modify the Dravet phenotype of $Scn1a^{KO/+}$ heterozygous knockout mice. By four weeks of age, only 45% of double heterozygous knockout F1.*Hlf* $^{KO/+}$;*Scn1a* $^{KO/+}$ mice survived compared to 71% of F1.*Scn1a* $^{KO/+}$ controls. This further supports *Hlf* as a genetic modifier of epilepsy as loss of *Hlf* alters two diverse epilepsy syndromes.

Chapter IV focused on a functional candidate gene approach to evaluate known epilepsy mutations Q54 and $Kcnq2^{V182M/+}$ on the phenotype of the $Scn1a^{R1648H/+}$ epilepsy model. To assess the modifier potential of Q54 and $Kcnq2^{V182M/+}$ mutations, we generated

double mutant mice and monitored seizure activity by ECoG and survival. Double mutant F1.*Scn1a*^{R1648H/+};Q54 and F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} mice exhibited GTCS with 100% and 42% mortality by P25, respectively, unlike their single mutant control littermates. This suggests that genetic interaction between ion channels is one mechanism which contributes to the variable clinical presentation of inherited epilepsies.

Implications for Epilepsy

Complex genetics are likely responsible for the majority of epilepsy cases with no known origin (5, 6). Several Dravet and GEFS+ voltage-gated sodium channel gene mutations result in variable expressivity of an epilepsy phenotype. While some individuals have a severe, debilitating seizure diagnosis, many have remitting seizures or no phenotype at all. This trend is likely a result of complex inheritance of protective and risk alleles in multiple genes. Mildly affected patients have possibly inherited protective alleles that reduced or prevented seizure activity. Alternatively, individuals with a more devastating phenotype likely inherited risk alleles that altered network function and resulted in a hyperexcitable, seizure-prone brain. Hypothesized epilepsy modifier genes responsible for the altered phenotype are relatively unknown. Our lab previously identified a modifier gene in mice that was subsequently shown to contribute to epilepsy risk in human patients (26). Kcnv2, encoding the voltage-gated potassium subunit Kv8.2, was identified as a modifier gene that influences the Q54 epilepsy phenotype (26). Kcnv2 forms functional potassium channels by complexing with another potassium channel subunit, *Kcnb1*, which encodes Kv2.1, the major contributor to delayed rectifier potassium current (26). This Kv8.2/Kv2.1 heteromeric configuration results in altered

delayed rectifier channel kinetics (27, 28). In human epilepsy patients, two KCNV2 missense variants were detected and when coexpressed with KCNB1, resulted in increased suppression of delayed rectifier potassium currents (26). Recently, a KCNB1 variant was identified by exome sequencing of infantile spasm and Lennox-Gastaut families (29). *Hlf* was identified as a candidate modifier of the Q54 epilepsy phenotype due to its hypothesized influence on the pyridoxine pathway (13, 19). Traditional pyridoxine dependent epilepsies are defined by severe neonatal seizures that are successfully treated with pyridoxine or PLP, not classical AEDs (30). Recent research revealed a "hidden" pyridoxine deficient epilepsy patient whose phenotype resembled Dravet syndrome, which is uncharacteristic of pyridoxine dependent epilepsies (30). The patient was screened for two genes in the pyridoxine pathway, ALDH7A1 and PNPO. (30). A pathogenic mutation was identified in ALDH7A1, suggesting some unexplained epilepsies may result from pyridoxine deficiencies (30). This further supports Hlf as a candidate modifier gene of an epilepsy phenotype as mutations in *Hlf* may reduce the efficiency of the pyridoxine pathway and thus increase seizure susceptibility. This demonstrates that identification of mouse epilepsy modifier genes can directly influence discovery of human epilepsy modifier genes.

We have highlighted several examples throughout Chapters I-IV demonstrating that exacerbated or ameliorated epilepsy phenotype result from combining mutations from two different genes. This suggests that variants in multiple genes may modify the clinical phenotype in human epilepsy. This is particularly important for advancements in diagnostic and long-term prognostic capabilities as well as in designing novel therapeutic targets. Patients can wait months or even years to receive a specific epilepsy diagnosis. While genetic testing in epilepsy is more accessible, especially in the more severe epileptic encephalopathies such as Dravet syndrome, its full impact has not yet been attained. Recent exome sequencing projects have started to identify novel genes responsible for epilepsy with a previously unknown origin, but exome sequencing is not yet routinely used in the clinic (9, 29, 31). Moreover, even if a hypothesized disease-causing mutation in a gene is detected, prognosis is uncertain. For example, mutations in *SCN1A* can lead to the devastating Dravet syndrome or the very treatable GEFS+. Complicating things further is the phenotypic variability often seen in patients with the same mutation.

By identifying genetic modifiers of epilepsy in mice, including *Cacna1g* and *Hlf*, improvements in both patient diagnosis and prognosis can occur. While genetic tests often include calcium channels, screening for variants in calcium and additional ion channels in the same patient may predict a possible severe seizure phenotype. Furthermore, adding modifier genes to genetic screens, including *Hlf*, may advance prognosis efficiency. Detection of a primary mutation with additional variants in modifier genes may suggest a disease course. For example, if a *SCN1A* positive GEFS+ patient also has an *Hlf* variant, we might predict a more severe phenotype. Alternatively, if the patient has inherited a protective modifier allele, we could predict a mild phenotype.

Identification of epilepsy modifier genes can also advance therapeutics. Current antiepileptic medications mainly target GABA receptors, voltage-gated sodium channels and calcium channels (32). A third of epilepsy patients are unable to attain seizure control using these medications (33). For patients who are seizure free, many have tried at least two drugs before achieving seizure control (33, 34). Furthermore, controlled epilepsies

frequently are a result of combination therapy, with patients taking at least two drugs simultaneously (33, 34). The pharmacoresistance observed in epilepsy patients is hypothesized to result from both genetic and environmental factors (35, 36). If we focus drug discovery efforts to non-traditional targets, like modifier genes, the novel therapeutics generated may alleviate seizure symptoms with reduced side effects. Since currently available drugs act on broad pathways like GABA, many patients experience extreme drowsiness or fatigue. Through targeting modifier genes, novel drugs may prevent seizures intrinsically rather than universally targeting and sedating brain activity.

To test *Cacna1g* as a potential drug target for epilepsy treatment, a high throughput screen to identify novel pharmacological inhibitors of *Cacna1g* would first be performed. Positive candidates from the screen would be further evaluated using whole-cell electrophysiology. Using HEK cells stably expressing *Cacna1g*, drug candidates would be assayed to identify those which inhibit calcium currents in a dose-dependent manner. The ideal drug would specifically target *Cacna1g*, therefore control experiments testing T, L, P, Q and N calcium channels is needed. Once a *Cacna1g* targeted drug is identified and validated *in vitro*, it can advance to *in vivo* testing. Essential experiments include seizure threshold testing to determine whether the drug raises the threshold to seizure induction compared to placebo treatment and EEG recordings of calcium channel mutants with epilepsy to determine if drug treatment reduces or prevents seizures.

To test *Hlf* as a potential drug target for epilepsy treatment, the molecular basis of *Hlf* function would first be determined. Currently, we hypothesize *Hlf* acts on the pyridoxine pathway, but it is unknown what this transcription factor regulates or where in the pathway it has its influence. Through the use of chromatin immunoprecipitation and

next-generation sequencing of immunoprecipated DNA (ChIP-seq), we can identify regions of the genome that are potentially targeted and bound by *Hlf*. Once these regions are determined, we can test the identified gene candidates to assess their influence on seizure susceptibility. We can generate a transgenic or knockout mouse model of each candidate gene to determine if spontaneous seizure activity occurs or if a reduced threshold to induced seizures exists. To further validate each model and bridge the candidate gene(s) and *Hlf* to the pyridoxine pathway, we can test if administration of PLP can prevent seizure activity or extend the threshold to induced seizures.

Verification of *Cacna1g* and *Hlf* as epilepsy modifier genes will suggest new targets for improved treatment of epilepsy and advance molecular diagnostic capabilities by identifying those patients who are most at-risk for developing severe epilepsy.

Future Directions

Investigation of additional candidate genes

We selected *Cacna1g* and *Hlf* as top priority candidate genes for evaluation of their potential modifier effects on the Q54 seizure phenotype. However other genes, including *Cacnb1*, *Slc25a39* and *Pnpo*, were also considered strong candidate modifier genes at the *Moe1* locus (Table 2.4). *Cacnb1* encodes a calcium β subunit and has previously been linked to epilepsy (37-39). RNA-Seq identified a significant expression difference in the *Cacnb1*-006 transcript between B6 and SJL females. Interestingly, the *Cacnb1*-006 transcript is thought to act as a long non-coding RNA (lncRNA) (13). To evaluate the modifier potential of *Cacnb1*, a targeted *Cacnb1*-006 siRNA could be utilized to knockdown the lncRNA in the Q54 mouse model. Furthermore, we could determine the *Cacnb1* lncRNA targets to understand how it may affect excitability.

We also hypothesized a protective modifier gene is located within the *Moe1* locus (13). *Cltc* and *Dynll2* were suggested as top candidate genes within the protective region. By generating animal models overexpressing *Cltc* or *Dynll2*, we can evaluate if each gene has a protective effect on the Q54 phenotype. Furthermore, identification of protective alleles may provide novel therapeutic targets which have the ability to treat seizures with fewer side effects.

Comprehensive analysis of Cacna1g and Hlf modifier effects

To verify the full modifier potential of *Cacna1g*, it is necessary to generate and evaluate additional *Cacna1g* BAC transgenic lines. Recent pronuclear injections of the BAC clone containing *Cacna1g* (RP23-65I14) into B6 fertilized oocytes at the University of Michigan Transgenic Animal Model Core resulted in two transgenic founders, 1G3 and 1G6. BAC integrity was preliminarily analyzed, suggesting both transgenics have complete integration of the construct. At this time, the 1G3 male transgenic founder has not.

Hlf was verified as a modifier of the Q54 phenotype. Further investigation is needed to assess the mechanism of the *Hlf* modifier effect. Most importantly, ECoG analysis of homozygous B6.*Hlf* ^{KO/KO};Q54 and heterozygous B6.*Hlf* ^{KO/+};Q54 mice is crucial. This will confirm GTCS events seen during phenotyping as well as identify additional abnormal brain activity, like absence seizures. Female B6.*Hlf* ^{KO/+},
B6.*Hlf*^{KO/+};Q54 and B6.*Hlf*^{KO/KO};Q54 mice were born at significantly altered ratios than expected, suggesting reduced female viability. Future studies should include determining when B6.Hlf KO/+;Q54 and B6.Hlf KO/KO;Q54 females are being lost. Hlf was also identified as a modifier of survival of Dravet mice, an additional epilepsy model. To evaluate if F1.*Hlf*^{KO/+}:*Scn1a*^{KO/+} mice are dying significantly earlier compared to controls due to increased seizure frequency or severity, ECoG recordings are necessary. Furthermore, we determined the B6.*Hlf* $^{\text{KO/+}}$ mouse model contains roughly ~45 Mb of 129 S2/SvPas ES cell DNA on chromosome 11. This is problematic, as it adds a third genetic strain into our mouse crosses. Due to the original 129 construct DNA being present, B6.Hlf KO/+;Q54 and B6.Hlf KO/KO;Q54 offspring are actually F1.(129 X B6) and homozygous 129, respectively, in Moel instead of congenic B6. Moreover, from ISC line production (Chapter II) we are aware that multiple recombination "hot-spots" exist within Moe1. This may explain the inconsistency observed in seizure frequency and survival of B6.*Hlf*^{KO/+};Q54 and B6.*Hlf*^{KO/KO};Q54 mice. Offspring may have different regions of 129 present in Moel due to recombination. To identify if recombination of B6 and 129 regions along chromosome 11 is responsible for the discrepancies observed in the *Hlf*^{KO/+} X Q54 phenotyping crosses, genotyping must be performed on all phenotyped offspring. This will determine if recombination occurred and if so, we can categorize offspring into groups based on the amount of 129 DNA present.

Finally, to determine if these modifier genes are relevant to human epilepsy risk, it is essential to screen epilepsy patients for genetic variation in *HLF* and *CACNA1G*. This approach was utilized in our lab previously and validated the approach that identifying genetic modifier genes in mouse is translatable to human epilepsy gene detection (26).

Ohtahara syndrome as a result of Scn2a and Kcnq2 mutations

Since the publication of Hawkins et al, 2011 both SCN2A and KCNO2 have been implicated by whole genome sequencing in Ohtahara syndrome (9, 10, 40, 41). F1.*Scn1a*^{R1648H/+};Q54 Hundreds of hours of **ECoG** data from and F1.Scn1a^{R1648H/+};Kcnq2^{V182M/+} offspring and controls are available for analysis. These offspring may serve as compelling mouse models of Ohtahara syndrome. For Hawkins et al, the focus was to identify GTCS, absence and focal seizures. We did not examine ECoG data for other irregular features such as classic Ohtahara suppression burst patterns. Furthermore, brain histology was not performed on offspring. Ohtahara patients usually have severe brain abnormalities, including atrophy of the cortex, corpus callosum and cerebellum (10, 10, 42). Future studies should inspect ECoG data from F1.Scn1a^{R1648H/+};Q54 and F1.Scn1a^{R1648H/+}; $Kcnq2^{V182M/+}$ offspring and controls for Ohtahara characteristics. Additionally, brain histology of offspring may also support F1.*Scn1a*^{R1648H/+};Q54 and F1.*Scn1a*^{R1648H/+};*Kcnq2*^{V182M/+} offspring as Ohtahara models.

References

- 1. Hauser W.A., Annegers J.F. and Kurland L. (1993) Incidence of epilepsy and unprovoked seizures in Rochester, Minnesota: 1935-1984. *Epilepsia*, **34**, 453-468.
- 2. Berg A.T., Berkovic S.F., Brodie M.J. *et al.* (2010) Revised terminology and concepts for organization of seizures and epilepsies: report of the ILAE Commission on Classification and Terminology, 2005-2009. *Epilepsia*, **51**, 676-685.
- 3. England MJ, Liverman CT, Schultz Andrea M, Strawbridge LM. Epilepsy Across the Spectrum: Promoting Health and Understanding. 3-30-2012.
- 4. Noebels JL, Avoli M, Rogawski MA (2012) Jasper's Basic Mechanisms of the Epilepsies Ref Type: Book, Whole
- 5. Kwan P., Brodie M.J. (2000) Early identification of refractory epilepsy. *N.Engl.J.Med.*, **342**, 314-319.
- 6. Poduri A., Lowenstein D. (2011) Epilepsy genetics--past, present, and future. *Curr.Opin.Genet.Dev.*, **21**, 325-332.
- 7. Meisler M.H., Kearney J.A. (2005) Sodium channel mutations in epilepsy and other neurological disorders. *J.Clin.Invest*, **115**, 2010-2017.
- 8. Meisler M.H., O'Brien J.E. and Sharkey L.M. (2010) Sodium channel gene family: epilepsy mutations, gene interactions and modifier effects. *J.Physiol*, **588**, 1841-1848.
- 9. Touma M., Joshi M., Connolly M.C. *et al.* (2013) Whole genome sequencing identifies SCN2A mutation in monozygotic twins with Ohtahara syndrome and unique neuropathologic findings. *Epilepsia*, **54**, e81-e85.
- 10. Nakamura K., Kato M., Osaka H. *et al.* (2013) Clinical spectrum of SCN2A mutations expanding to Ohtahara syndrome. *Neurology*,
- 11. Kearney J.A., Plummer N.W., Smith M.R., Kapur J., Cummins T.R., Waxman S.G., Goldin A.L. and Meisler M.H. (2001) A gain-of-function mutation in the sodium channel gene Scn2a results in seizures and behavioral abnormalities. *Neuroscience*, **102**, 307-317.
- 12. Bergren S.K., Chen S., Galecki A. and Kearney J.A. (2005) Genetic modifiers affecting severity of epilepsy caused by mutation of sodium channel Scn2a. *Mamm.Genome*, **16**, 683-690.
- 13. Hawkins N.A., Kearney J.A. (2012) Confirmation of an epilepsy modifier locus on mouse chromosome 11 and candidate gene analysis by RNA-Seq. *Genes Brain Behav.*, **11**, 452-460.
- 14. Singh B., Monteil A., Bidaud I. *et al.* (2007) Mutational analysis of CACNA1G in idiopathic generalized epilepsy. Mutation in brief #962. Online. *Hum.Mutat.*, **28**, 524-525.
- 15. Zhang Y., Mori M., Burgess D.L. and Noebels J.L. (2002) Mutations in high-voltageactivated calcium channel genes stimulate low-voltage-activated currents in mouse thalamic relay neurons. *J.Neurosci.*, **22**, 6362-6371.

- 16. Blumenfeld H. (2005) Cellular and network mechanisms of spike-wave seizures. *Epilepsia*, **46 Suppl 9**, 21-33.
- 17. Contreras D. (2006) The role of T-channels in the generation of thalamocortical rhythms. *CNS.Neurol.Disord.Drug Targets.*, **5**, 571-585.
- 18. Ernst W.L., Zhang Y., Yoo J.W., Ernst S.J. and Noebels J.L. (2009) Genetic enhancement of thalamocortical network activity by elevating alpha 1g-mediated low-voltage-activated calcium current induces pure absence epilepsy. *J.Neurosci.*, **29**, 1615-1625.
- 19. Gachon F., Fonjallaz P., Damiola F. *et al.* (2004) The loss of circadian PAR bZip transcription factors results in epilepsy. *Genes Dev.*, **18**, 1397-1412.
- 20. John R.A. (1995) Pyridoxal phosphate-dependent enzymes. *Biochim.Biophys.Acta*, **1248**, 81-96.
- Plecko B., Stockler S. (2009) Vitamin B6 dependent seizures. *Can.J.Neurol.Sci.*, 36 Suppl 2, S73-S77.
- 22. Waymire K.G., Mahuren J.D., Jaje J.M., Guilarte T.R., Coburn S.P. and MacGregor G.R. (1995) Mice lacking tissue non-specific alkaline phosphatase die from seizures due to defective metabolism of vitamin B-6. *Nat.Genet.*, **11**, 45-51.
- 23. Coleman D.L., SCHLESINGER K. (1965) EFFECTS OF PYRIDOXINE DEFICIENCY ON AUDIOGENIC SEIZURE SUSCEPTIBILITY IN INBRED MICE. *Proc.Soc.Exp.Biol.Med.*, **119**, 264-266.
- 24. SCHLESINGER K., Schreiber R.A. (1969) Interaction of drugs and pyridoxine deficiency on central nervous system excitability. *Ann.N.Y.Acad.Sci.*, **166**, 281-287.
- 25. SCHLESINGER K., Uphouse L.L. (1972) Pyridoxine dependency and central nervous system excitability. *Adv.Biochem.Psychopharmacol.*, **4**, 105-140.
- Jorge B.S., Campbell C.M., Miller A.R., Rutter E.D., Gurnett C.A., Vanoye C.G., George A.L., Jr. and Kearney J.A. (2011) Voltage-gated potassium channel KCNV2 (Kv8.2) contributes to epilepsy susceptibility. *Proc.Natl.Acad.Sci.U.S.A*, **108**, 5443-5448.
- 27. Czirjak G., Toth Z.E. and Enyedi P. (2007) Characterization of the heteromeric potassium channel formed by kv2.1 and the retinal subunit kv8.2 in Xenopus oocytes. *J.Neurophysiol.*, **98**, 1213-1222.
- 28. Ottschytsch N., Raes A., Van H.D. and Snyders D.J. (2002) Obligatory heterotetramerization of three previously uncharacterized Kv channel alpha-subunits identified in the human genome. *Proc Natl Acad Sci U S A*, **99**, 7986-7991.
- 29. Consortium K., Epilepsy P. (2013) De novo mutations in epileptic encephalopathies. *Nature*, advance online publication,
- 30. Baumgart A., Spiczak S.V., Verhoeven-Duif N.M. *et al.* (2013) Atypical Vitamin B6 Deficiency: A Rare Cause of Unexplained Neonatal and Infantile Epilepsies. *J.Child Neurol.*,

- 31. Veeramah K.R., Johnstone L., Karafet T.M. *et al.* (2013) Exome sequencing reveals new causal mutations in children with epileptic encephalopathies. *Epilepsia*, **54**, 1270-1281.
- 32. Rogawski M.A., Loscher W. (2004) The neurobiology of antiepileptic drugs. *Nat.Rev.Neurosci.*, **5**, 553-564.
- 33. Brodie M.J., Barry S.J., Bamagous G.A., Norrie J.D. and Kwan P. (2012) Patterns of treatment response in newly diagnosed epilepsy. *Neurology*, **78**, 1548-1554.
- 34. Brodie M.J. (2013) Road to refractory epilepsy: the Glasgow story. *Epilepsia*, **54 Suppl 2**, 5-8.
- 35. Kwan P., Schachter S.C. and Brodie M.J. (2011) Drug-resistant epilepsy. *N.Engl.J.Med.*, **365**, 919-926.
- 36. Remy S., Beck H. (2006) Molecular and cellular mechanisms of pharmacoresistance in epilepsy. *Brain*, **129**, 18-35.
- 37. Escayg A., Jones J.M., Kearney J.A., Hitchcock P.F. and Meisler M.H. (1998) Calcium channel beta 4 (CACNB4): human ortholog of the mouse epilepsy gene lethargic. *Genomics*, **50**, 14-22.
- 38. Ohmori I., Ouchida M., Miki T., Mimaki N., Kiyonaka S., Nishiki T., Tomizawa K., Mori Y. and Matsui H. (2008) A CACNB4 mutation shows that altered Ca(v)2.1 function may be a genetic modifier of severe myoclonic epilepsy in infancy. *Neurobiol.Dis.*, 32, 349-354.
- 39. Lie A.A., Blumcke I., Volsen S.G., Wiestler O.D., Elger C.E. and Beck H. (1999) Distribution of voltage-dependent calcium channel beta subunits in the hippocampus of patients with temporal lobe epilepsy. *Neuroscience*, **93**, 449-456.
- 40. Kato M., Yamagata T., Kubota M. *et al.* (2013) Clinical spectrum of early onset epileptic encephalopathies caused by KCNQ2 mutation. *Epilepsia*, **54**, 1282-1287.
- 41. Saitsu H., Kato M., Koide A. *et al.* (2012) Whole exome sequencing identifies KCNQ2 mutations in Ohtahara syndrome. *Ann.Neurol.*, **72**, 298-300.
- 42. Beal J.C., Cherian K. and Moshe S.L. (2012) Early-Onset Epileptic Encephalopathies: Ohtahara Syndrome and Early Myoclonic Encephalopathy. *Pediatric Neurology*, **47**, 317-323.