

Phenytoin protected mouse cortical cell cultures against neurotoxicity induced by kainate but not by NMDA

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Accepted July 30, 1996

Summary. Phenytoin (PHT) protected cultured mouse cortex neurons against kainate-induced excitotoxicity, but failed to protect against the N-methyl-D-aspartate (NMDA)-induced excitotoxicity. The voltage-clamp experiments showed that PHT significantly blocked kainate-induced currents but did not block NMDA-induced currents in the cultured neurons. These results indicate that PHT protects the cultures by blocking non-NMDA receptors and suggest that PHT has clinical efficacy against neuronal cell death through the excessive stimulation of non-NMDA receptors.

Keywords: Amino acids – Excitotoxicity – Voltage clamp – Diphenylhydantoin – DPH – PHT – LDH

Introduction

Glutamate-induced excitotoxicity has been proposed to participate in the neuronal cell death associated with various neurological diseases, typically ischaemia (Benveniste et al., 1984; Kirino et al., 1990; Monaghan et al., 1983; Wieloch et al., 1985). Although the mechanism of the neuronal cell death is still unclear, it has been found that blockers against the glutamate receptor subtypes protected against the excitotoxicity (Choi et al., 1988; Gill et al., 1987; Hao et al., 1991; Sheardown et al., 1990). To date, therefore, the search of the clinical blockers has been a center of attention.

PHT is a clinical antiepileptic drug exerting a variety of anticonvulsant actions on neurons with relative lack of neurological side effects at therapeutic doses (Rogawski and Porter, 1990). That is, PHT blocks voltage-gated Na channels, a principal anticonvulsant action (McLean and Macdonald, 1983; Willow et al., 1985) and voltage-gated Ca channels (Twombly et al., 1988), and potentiates GABA-mediated inhibition (McLean and Macdonald, 1983). Also, PHT is indicated to block glutamate receptors (Matthews and Connor, 1977; Sastry and Phillis, 1976) though there have been conflicting reports (McLean and Macdonald, 1983; Nicoll and Wojtowicz, 1980).

Several investigators reported that PHT protected the neurons of dogs (Suzuki et al., 1987) and rabbits (Cullen et al., 1979) against cerebral ischemia. However, they did not consider PHT as a glutamate blocker probably because the PHT blockage of glutamate receptors had been doubtful.

Recently we found that PHT, at clinical concentrations, competitively blocked the non-NMDA receptors, a glutamate receptor subtype, produced by *Xenopus* oocytes injected with ddY-strain mice whole brain mRNA (Kawano et al., 1994). These results imply that PHT is clinically effective against the excitotoxicity.

In the present study, we investigated the protective effect of PHT by measuring the lactate dehydrogenase (LDH) efflux in cultured mouse cerebral cortex neurons. Also, the blocking effect of PHT on voltage-clamp currents elicited by glutamate analogs was investigated to discuss the protective mechanisms.

Materials and methods

Cerebral cortex neurons of ddY-strain mouse were dissociated and cultured with established techniques (Matsuoka et al., 1987). In brief, cerebral cortex removed from mouse fetus (16-day gestation) was minced and incubated in trypsin for 15 min at 37°C. The cortex was then dissociated by trituration and plated as a single cell suspension on cover slips in 60 cm dishes (1.8×10^4 cell/cm²) for the voltage-clamp experiments in the presence of Eagle's MEM supplemented with glucose, bicarbonate, 5% heat-inactivated fetal bovine and 5% house serum. For LDH efflux measurement, the single cell suspension was plated on 24 well plates (1.6×10^5 cell/cm²). One day after plating, the medium was replaced with B18 (Brewer and Cotman, 1989). The cultures were fed with fresh B18 every 3 days for 10 days before exposure to kainate or NMDA in the presence or absence of PHT.

The blocking effect of PHT on the glutamate receptor subtypes was investigated under voltage-clamp conditions. The cultured neuron was whole cell clamped with a single glass electrode filled with 150 mM CsCl, 5 mM HEPES, 5 mM EGTA (pH 7.4, ~ 5 M Ω). The neurons eliciting transient inward currents on depolarization were irrigated with a saline solutions (145 mM NaCl, 5 mM KCl, 2.4 mM CaCl₂, 10 mM glucose, 10 mM HEPES, pH 7.4) and kainate or NMDA supplemented with 10 μ M glycine dissolved in the saline solution with/without 100 μ M PHT. The neurons responded to both kainate and NMDA were used.

The protective effect of PHT was estimated by monitoring the LDH efflux from damaged neurons during the 24 h exposure (Koh and Choi, 1987b). The cultured neurons released LDH through the exposure protocol even in the absence of the glutamate agonists. This background LDH efflux determined on sister cultures within each experiment was used as a unit to normalize values obtained from treated cultures. The mean \pm standard deviation of the background LDH activity (IU/l) was 90.8 ± 18.4 (n = 21).

Results

Voltage clamp experiments showed that PHT preferably blocked non-NMDA receptors. Figure 1 shows typical voltage-clamp currents as responses of non-NMDA and NMDA receptors. 100 μ M PHT substantially decreases the voltage-clamp current responses to 100 μ M kainate whereas PHT slightly decreases those to 100 μ M NMDA. Table 1 summarizes the blocking effect.

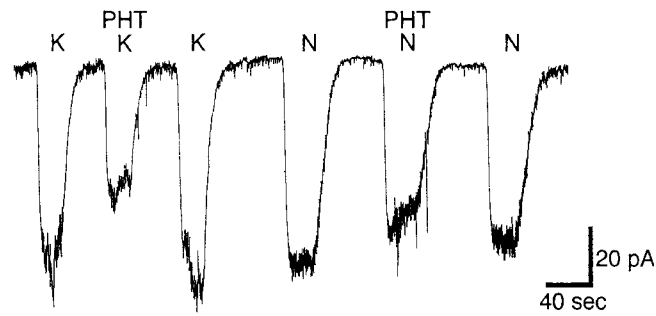


Fig. 1. Voltage-clamp currents elicited by kainate and NMDA in the absence and presence of PHT. The responses are recorded from the same cultured neuron voltage-clamped at -50 mV. *K* $100\mu\text{M}$ kainate; *N* $100\mu\text{M}$ NMDA + $10\mu\text{M}$ Gly; *PHT* $100\mu\text{M}$ phenytoin

Table 1. Relative magnitude of inward currents elicited by kainate and NMDA in the presence of PHT

	mean \pm S.D.
$100\mu\text{M}$ kainate + $100\mu\text{M}$ PHT	$0.60 \pm 0.04^*$
$100\mu\text{M}$ NMDA + $100\mu\text{M}$ PHT	0.92 ± 0.04

The inward currents were recorded from 5 cultured neurons voltage clamped at -50 mV. The values are means and SD of the magnitude of inward currents calculated relative to the responses in the absence of PHT. *significant decrease in magnitude of relative inward currents by the addition of PHT (two-tailed t-test; $p < 0.001$).

The addition of $100\mu\text{M}$ PHT significantly blocked non-NMDA receptors whereas PHT hardly blocked NMDA receptors.

Although PHT blocked the kainate receptors as mentioned above, the protective efficacy had been unknown. Hence we examined the protective effect of PHT on cultured mouse cerebral cortex cells. As Fig. 2A shows, $100\mu\text{M}$ PHT hardly decreases NMDA-induced LDH efflux. No significant differences are observed (two-way ANOVA). In contrast, $100\mu\text{M}$ PHT lowers LDH efflux induced by kainate (Fig. 2B). There is a significant interaction between kainate concentrations and PHT on LDH efflux (two-way ANOVA, $p < 0.001$). PHT appears to shift the LDH efflux curve to right. This shift agrees with our previous results that PHT competitively blocked electrical responses of non-NMDA receptors produced by brain mRNA-injected *Xenopus* oocytes (Kawano et al., 1994). Further experiments will clarify the relations between the extent of the block and the protection.

Figure 3 shows the protective effect of different concentrations of PHT against the neurotoxicity induced with $100\mu\text{M}$ kainate, the K_d value of kainate on the non-NMDA receptors (Kawano et al., 1994). The protective

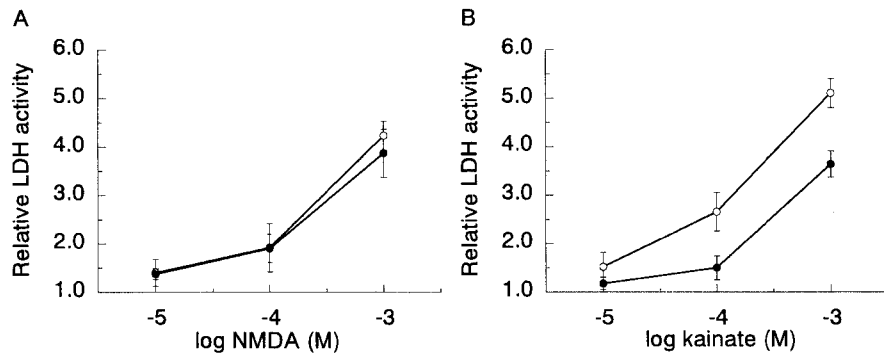


Fig. 2. LDH efflux induced by NMDA (**A**) or kainate (**B**) in the absence (open circles) or presence (closed circles) of 100 μ M PHT. Plotted data are obtained from at least 3 separate experiments each of which has three replicate culture plates and calculated relative to the LDH efflux from buffer-treated sister cultures. The interaction was significant between the kainate concentration and PHT on LDH efflux (two-way ANOVA; $p < 0.001$)

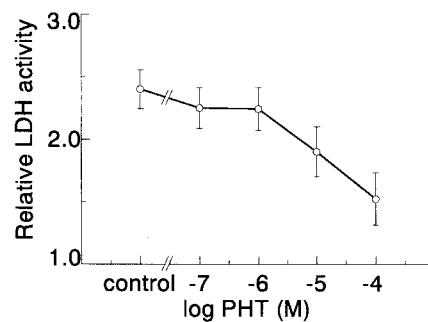


Fig. 3. PHT concentration-dependent protection against 100 μ M kainate-induced excitotoxicity. Plotted data are obtained and calculated in the same manner as those shown in Fig. 2. IC₅₀ value was estimated by an intersecting point between horizontal line crossing 50% of the mean of control LDH efflux and a solid line connecting data points. The difference was significant between the LDH efflux in the absence and presence of PHT (one-way ANOVA; $p < 0.001$). Also, the LDH efflux in the presence of 10 and 100 μ M PHT was significantly different from that in the absence or presence of lower concentrations of PHT (Tukey's multiple comparison, $p < 0.01$)

effect is significant (one-way ANOVA, $p < 0.001$). Also, the LDH efflux in the presence of 10 and 100 μ M PHT is significantly different from that in the absence or presence of lower concentrations of PHT (Tukey's multiple comparison, $p < 0.01$). IC₅₀ estimated from the figure is $\sim 30 \mu$ M.

Discussion

The present experiments showed that PHT protected only against kainate-induced neurotoxicity. The protective effect of PHT against ischemic brain damage (Cullen et al., 1979; Fukuda et al., 1983; Suzuki et al., 1987) and

kainate-induced neurotoxicity (Zaczek et al., 1978) in vivo agreed with our present results. No protective effect of PHT was found against glutamate-induced neurotoxicity in cortical cell culture (Koh and Choi, 1987a). Since PHT hardly protected against NMDA induced neurotoxicity, no protective effect reported is consistent with the present results.

Although IC₅₀ against 100 μ M kainate-induced neurotoxicity was \sim 30 μ M, 10 μ M PHT significantly lowered the neurotoxicity (Fig. 3). That is, 10 μ M PHT significantly protects neurons when a half of non-NMDA receptors there are activated, since the K_d value of kainate on non-NMDA receptors were close to 100 μ M (Kawano et al., 1994). As an anticonvulsant, PHT is clinically used at \sim 10 μ M in CSF without serious neurological side effects (Rogawski and Porter, 1990). Therefore, it is likely that PHT clinically protects neurons against kainate-induced excitotoxicity without serious neurological side effects.

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Received March 21, 1996