

Electrophysiological actions of γ -aminobutyric acid and clomethiazole on recombinant GABA_A receptors

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Received 4 April 2002; received in revised form 30 July 2002; accepted 6 August 2002

Abstract

Clomethiazole is a γ -aminobutyric acid (GABA)-mimetic agent with anticonvulsant, sedative and neuroprotective properties. The pharmacological actions of clomethiazole that underlie its functional profile have not been fully explored, but are known to result from an interaction with the GABA_A receptor. Here, we present a quantitative electrophysiological study of clomethiazole action at human recombinant GABA_A receptors. Whole-cell currents were recorded from murine L(tk-) cells stably transfected with either α 1, β 1 and γ 2 or α 1, β 2 and γ 2 GABA_A receptor subunits. Clomethiazole directly activated GABA_A currents in α 1/ β 1/ γ 2- and α 1/ β 2/ γ 2-containing cells, with EC₅₀ values of 0.3 and 1.5 mM, respectively. A low concentration of clomethiazole (30 μ M) also potentiated the action of GABA in both cell types, equivalent to a 3-fold increase in potency and up to 1.8-fold increase in maximal current. Both direct activation and gamma-aminobutyric acid potentiation are likely to contribute to the in vivo profile of clomethiazole.

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Keywords: GABA_A receptor; GABA (γ -aminobutyric acid)-mimetic; Clomethiazole; Neuroprotective agent; Bicuculline

1. Introduction

Clomethiazole is a well-established γ -aminobutyric acid (GABA_A)-mimetic drug that has been used clinically as an anxiolytic, sedative and anticonvulsant drug (see Green, 1998). Clomethiazole is also an effective neuroprotective agent in animal models of cerebral ischaemia (Green, 1998; Green et al., 2000a) and against 3,4-methylenedioxymethamphetamine-induced neurotoxicity (Colado et al., 1998). Biochemical evidence suggests that clomethiazole interacts with the GABA_A receptor complex. It inhibits the binding of [³⁵S]butyl-bicyclopophosphorothionate (TBPS), an effect indicative of GABA_A receptor-channel activation (Cross et al., 1989; Green et al., 1996; Moody and Skolnick, 1989), by increasing the rate of [³⁵S]TBPS dissociation (Cross et al., 1989) and decreasing the binding affinity (Cross et al., 1989; Moody and Skolnick, 1989). Clomethiazole, like the barbiturates, also enhances [³H]muscimol binding, though this is

only a modest effect, with a 20% increase at 1 mM clomethiazole (Cross et al., 1989; Green et al., 1996; Leeb-Lundberg et al., 1981). However, in contrast to the barbiturates, it does not potentiate [³H]flunitrazepam binding (Cross et al., 1989; Green et al., 1996; Zhong and Simmonds, 1997). These studies suggest that clomethiazole interacts with the GABA_A receptor in a manner that is similar, but not identical, to that of the barbiturates (Cross et al., 1989; Green et al., 1996; Zhong and Simmonds, 1997). This suggestion is supported by the fact that clomethiazole is an effective neuroprotective agent against cerebral damage caused by either focal or global ischaemia (see Green, 1998) or MDMA administration (Colado et al., 1998, 1999), while pentobarbitone is not (Cross et al., 1991). The present study has been undertaken to clarify the unique interaction between clomethiazole and the GABA_A receptor.

Gamma-aminobutyric acid (GABA), acting at GABA_A receptors, is the main fast inhibitory neurotransmitter in mammalian central nervous system (Costa, 1998; Mehta and Ticku, 1999). At least 19 different GABA_A receptor subunits have been identified, including α 1–6, β 1–3 and γ 1–3 subunits, in addition to δ , ϵ and others (see Cherubini and Conti, 2001; Costa, 1998; McKernan and Whiting, 1996). The GABA_A receptor is known to be a pentameric complex

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with an integral chloride-selective ion channel, and fluorescence energy transfer suggests that the most prevalent subunit composition is $\alpha 2\beta 1\gamma$, with δ or ϵ being able to substitute for the γ subunit (Farrar et al., 1999; McKernan and Whiting, 1996). Antibody co-labelling methods suggest that the most abundant co-localization of protein subunits in adult rat brain is $\alpha 1\beta 2\gamma 2$, this combination being present in most brain regions, with overall abundance of 43% (Fritschy et al., 1992; Fritschy and Mohler, 1995; McKernan and Whiting, 1996).

GABA_A-mimetic agents, which activate GABA_A receptors either directly, or by potentiating the agonist action of GABA, have found widespread clinical use as anxiolytics, general anaesthetics, antiepileptic drugs and sedative/hypnotics (Chebib and Johnston, 2000; Lees, 1998; Mehta and Ticku, 1999; Sieghart, 1995). In addition, some have been shown to act as neuroprotective agents in animal models of acute ischaemic stroke (see (Green et al., 2000a; Schwartz-Bloom and Sah, 2001). GABA_A receptor activation has also been suggested to be a possible target for relief of neuropathic pain (Stubley et al., 2001).

Previous studies of clomethiazole have suggested an allosteric GABA-potentiating action of the compound, via a non-benzodiazepine, non-barbiturate binding site (Cross et al., 1989; Green et al., 1996; Harrison and Simmonds, 1983; Zhong and Simmonds, 1997) and, in addition, a direct GABA_A receptor activating action (Hales and Lambert, 1992; Moody and Skolnick, 1989; Nelson et al., 2000) possibly via the GABA binding site (Hales and Lambert, 1992). Here we present the first quantitative electrophysiological study of clomethiazole, using whole-cell recording from mammalian cells transfected with recombinant $\alpha 1\beta 2\gamma 2$ GABA_A receptor subunits, and fast extracellular perfusion. To test the influence of β subunit, we compared cells transfected with $\alpha 1\beta 1\gamma 2$ subunits. Some data have been previously reported in abstract form (Nelson et al., 2001a).

2. Materials and methods

2.1. Cell culture conditions

Mouse L(tk-) cells stably transfected with human $\alpha 1$, $\beta 1$ and $\gamma 2L$ or $\alpha 1$, $\beta 2$ and $\gamma 2S$ GABA_A receptor subunits (Hadingham et al., 1992), were grown in Dulbecco's modified Eagle medium (DMEM) containing 10% fetal bovine serum at 37 °C, 5% CO₂. Transfected subunits were under the control of a dexamethasone-sensitive promoter and selection pressure (1 mg/ml geneticin) applied every 4 weeks. Cells that were to be used for measurement of whole-cell currents were grown on glass cover slips coated with poly-L-lysine (2 µg/ml) using DMEM supplemented with 10% fetal bovine serum for 24 h at 37 °C, 5% CO₂. After this period, the medium was replaced and supplemented with dexamethasone (100 nM). Cells were then

incubated for an additional 48 h to induce GABA_A receptor expression.

2.2. Electrophysiological procedures

Cover slips were placed in a 35 mm Petri dish (Falcon, Beckton-Dickinson, CA, USA) on a Nikon TMS inverted microscope and continuously perfused with HEPES buffered saline (HBS) consisting of (in mM): NaCl (135), KCl (2.5), CaCl₂ (2.0), MgSO₄ (0.5), NaH₂PO₄ (1.0), HEPES acid (10), glucose (10), pH 7.4 with NaOH.

Patch-pipettes were pulled from 1.5 mm borosilicate capillary glass (Clarke Electromedical, Pangbourne, UK), coated with beeswax and fire-polished immediately before use. Pipette resistances were typically 5 MΩ when filled with a CsCl-based intracellular solution containing (in mM): CsCl (140), EGTA (3.0), MgSO₄ (8.0), HEPES (10), Na₂-ATP (4.0), pH 7.4 with CsOH. Standard whole-cell recordings were made at room temperature using an Axopatch-200 patch clamp amplifier (Axon Instruments, Foster City, CA, USA) and a CED1401 interface (Cambridge Electronic Design, Cambridge, UK), driven by Strathclyde software (freeware kindly supplied by Dr. J. Dempster; see <http://innovol.sibs.strath.ac.uk/physpharm/ses>). The holding voltage for cells was -60 mV unless stated otherwise. Records were filtered at 500 Hz (-3 dB, 8-pole Bessel response, Fylde Electronics, Preston, UK) and sampled at 1 kHz.

Drugs were dissolved at a known concentration in HBS and applied via a custom-built fast-perfusion system for 500 ms, separated by rest periods of 60 s. The drug-induced current amplitude was measured from the computer screen using cursors manually placed at peak current amplitude.

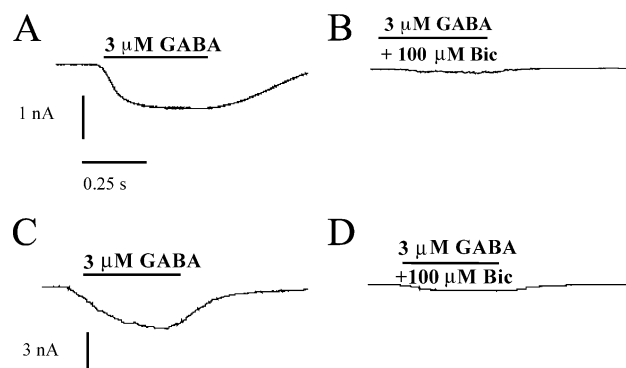


Fig. 1. GABA-activated whole-cell currents in L(tk-) cells transfected with GABA_A receptor subunits $\alpha 1\beta 1\gamma 2$ (A–B) or $\alpha 1\beta 2\gamma 2$ (C–D). (A) Current evoked in response to application of GABA (3 µM, 500 ms). (B) Response of the same cell to application of GABA in the presence of bicuculline (Bic; 100 µM). (C, D) Currents evoked in response to application of GABA (3 µM, 500 ms) in the absence (C) or presence (D) of bicuculline. The holding voltage was -30 mV in each panel. Vertical scale bars show 1 nA (A–B) or 3 nA (C–D); horizontal scale bar shows 250 ms.

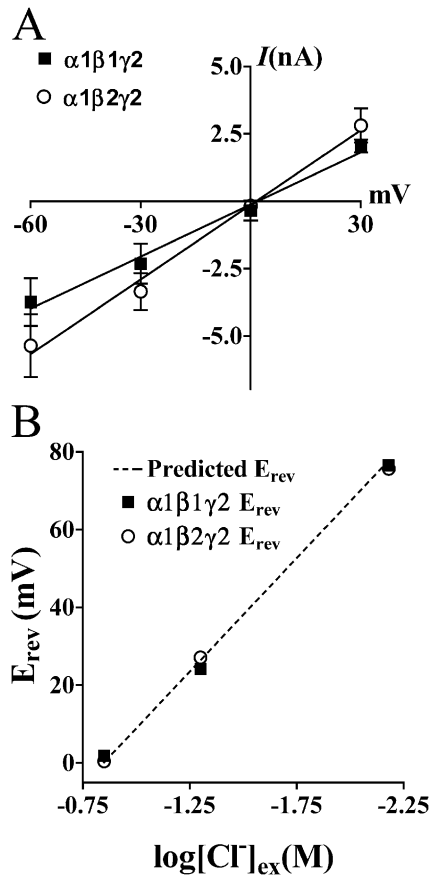


Fig. 2. Electrophysiological behaviour of GABA-activated currents. (A) Average current–voltage curves for $\alpha 1\beta 1\gamma 2$ - and $\alpha 1\beta 2\gamma 2$ -transfected cells, with GABA application (3 μM) as in Fig. 1, and standard recording conditions (142 mM external $[Cl^-]$). Points show mean \pm S.E.M. from four to eight cells. Regression lines of best fit are shown for the two cell types. (B) Variation of zero current–voltage with logarithm of external $[Cl^-]$. Data points show values determined from current–voltage curves such as that in A, pooled from experimental recordings with external $[Cl^-]$ of 6.5, 50 or 142 mM (n = at least 3 for each point). The dashed straight line shows the Nernst voltage, E_{Cl} , predicted for a perfectly chloride-selective conductance with internal $[Cl^-]$ of 140 mM.

Whole-cell currents were measured in response to GABA at concentrations ranging between 0.1 and 100 μM for $\alpha 1\beta 1\gamma 2$ -transfected cells, and 0.1 and 300 μM for $\alpha 1\beta 2\gamma 2$ -transfected cells. To determine if clomethiazole was able to activate GABA_A receptors directly, varying concentrations of clomethiazole were applied (10 μM –30 mM) in the absence of any added GABA. The effect of bicuculline on GABA- or clomethiazole-induced whole-cell currents was also determined. GABA (3 μM) or CMZ (1 mM) was applied for 500 ms. After a 15 s wash, bicuculline (100 μM) was applied in conjunction with GABA or clomethiazole for a further 500 ms. After a further 30 s wash, GABA or clomethiazole alone was reapplied for 500 ms. To determine the potentiating effect of clomethiazole on GABA-induced whole-cell currents, clomethiazole (30 or 100 μM) was co-applied with varying GABA concentrations.

To test the ionic selectivity of the GABA- or clomethiazole-evoked currents, extracellular chloride concentrations were varied while the intracellular chloride concentration was maintained at 140 mM. Extracellular chloride concentrations of 6.5, 50 or 141.5 mM were obtained by varying the NaCl content (replacement with Na-acetate). Whole-cell currents were recorded in response to a single concentration of GABA (3 μM) or clomethiazole (1 mM), applied for 500 ms, with 10 mV voltage increments. The zero-current voltage in each case was then determined from current–voltage graphs.

2.3. Data analysis

Concentration–response data were fitted by least squares nonlinear regression (GraphPad Prism) and statistical analysis was performed using two-way analysis of variance with post hoc tests using Bonferroni's multiple comparison (GraphPad Prism).

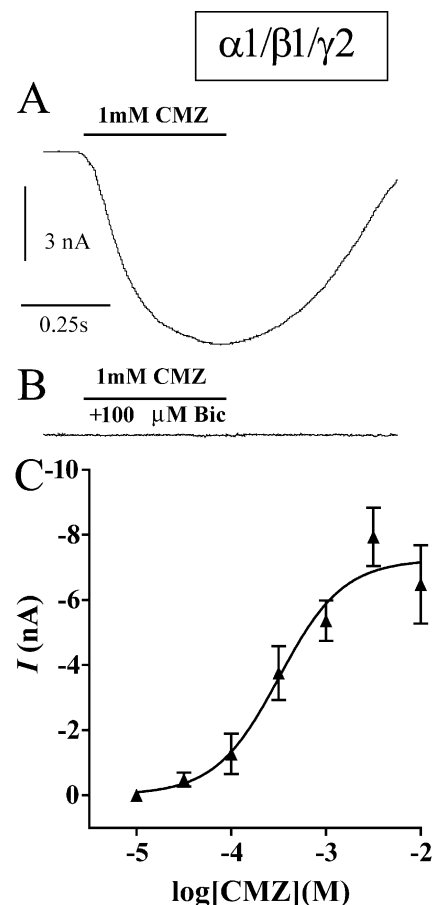


Fig. 3. Clomethiazole directly activated whole-cell currents in cells transfected with $\alpha 1\beta 1\gamma 2$ GABA_A receptor subunits. (A, B) Current evoked in response to application of clomethiazole (CMZ, 1 mM, 500 ms) in the absence (A) or presence (B) of bicuculline (Bic; 100 μM); holding potential was -30 mV in each case. (C) Pooled concentration–response data. Points show clomethiazole-activated peak current (I), mean \pm S.E.M. from six cells. The Langmuir–Hill curve of best fit is shown (solid line).

3. Results

3.1. Actions of GABA on $\alpha 1/\beta 1/\gamma 2L$ or $\alpha 1/\beta 2/\gamma 2S$ subunit-transfected cells

Application of GABA to L(tk-) cells, transfected with either $\alpha 1/\beta 1/\gamma 2L$ or $\alpha 1/\beta 2/\gamma 2S$ GABA_A receptor subunits, evoked large whole-cell currents (Fig. 1). In both cell types, the currents evoked in response to GABA (3–10 μM) were almost completely inhibited by the GABA_A receptor antagonist bicuculline (100 μM , $n=3-4$, see Fig. 1) and recovered on washing out the antagonist (not shown). The current–voltage relations for GABA-evoked currents in both cell types were approximately linear over the voltage range -60 to +30 mV (Fig. 2A). When the chloride ion concentration in the extracellular solution

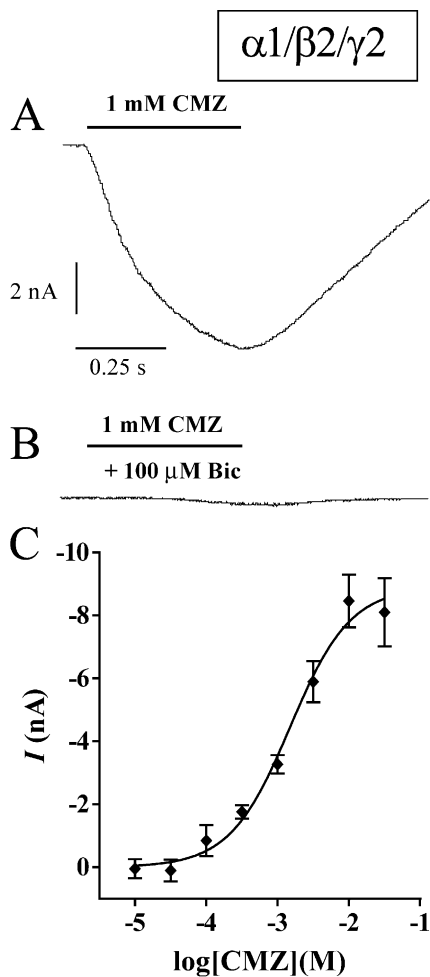


Fig. 4. Clomethiazole directly activated whole-cell currents in cells transfected with $\alpha 1/\beta 2/\gamma 2$ GABA_A receptor subunits. (A, B) Current evoked in response to application of clomethiazole (CMZ, 1 mM, 500 ms) in the absence (A) or presence (B) of bicuculline (Bic; 100 μM); holding potential was -30 mV in each case. (C) Pooled concentration–response data. Points show clomethiazole-activated peak current (I), mean \pm S.E.M. from five cells. The Langmuir–Hill curve of best fit is shown.

Table 1
Recombinant GABA_A receptor activation

	$\alpha 1/\beta 1/\gamma 2$		$\alpha 1/\beta 2/\gamma 2$	
	EC ₅₀ (μM)	n_H	EC ₅₀ (μM)	n_H
GABA	2.4 \pm 0.23	1.4	11 \pm 0.32	1.2
GABA + clomethiazole ^a	0.8 \pm 0.27	1.7	3.4 \pm 0.24	2.3
Clomethiazole	300 \pm 0.17	1.8	1500 \pm 0.11	2.8

L(tk-) cells were transfected with either $\alpha 1$, $\beta 2$ and $\gamma 2$ or $\alpha 1$, $\beta 2$ and $\gamma 2$ human GABA_A receptor subunits. Columns show half-maximal concentration (EC₅₀) values together with the S.E.M. and Hill coefficient (n_H) for Langmuir curves of best fit to pooled data in Figs. 3–6.

^a Parameters for GABA in the presence of a fixed concentration of clomethiazole (30 μM).

was varied (6.5–142 mM), the zero-current potential for GABA-evoked currents varied in a manner very similar to that predicted for a chloride-selective conductance (Fig. 2B).

3.2. Direct activation of GABA_A currents by clomethiazole in $\alpha 1/\beta 1/\gamma 2L$ or $\alpha 1/\beta 2/\gamma 2S$ subunit-transfected cells

Application of clomethiazole (1 mM), in the absence of GABA, to $\alpha 1/\beta 1/\gamma 2$ or $\alpha 1/\beta 2/\gamma 2$ subunit-containing cells produced large whole-cell currents (Figs. 3 and 4). In each cell type, the currents evoked by clomethiazole (1 mM) were almost completely inhibited by bicuculline (100 μM ; $n=3$, see Figs. 3 and 4), indicating a GABA_A receptor-dependent mechanism. These currents that were directly evoked by clomethiazole, like those evoked by GABA, displayed a near-linear current–voltage relation and chloride-selective zero-current potential with external $[Cl^-]$ in the range 6.5–142 mM ($n=4$, data not shown). Maximal current activation was obtained with concentrations of 3–10 mM clomethiazole (Figs. 3 and 4). EC₅₀ values obtained from the fitted Langmuir–Hill curves are given in Table 1.

3.3. Potentiation of GABA-evoked currents by clomethiazole in $\alpha 1/\beta 1/\gamma 2L$ or $\alpha 1/\beta 2/\gamma 2S$ subunit-transfected cells

In both $\alpha 1/\beta 1/\gamma 2$ - and $\alpha 1/\beta 2/\gamma 2$ -containing cells, the current evoked by a low concentration of GABA (3 μM) was greatly increased on co-application of clomethiazole (30–100 μM) (Figs. 5 and 6). The effect of clomethiazole (30 μM) on the concentration–response relation of GABA was determined. This concentration of clomethiazole produced negligible currents by direct activation (see Figs. 3 and 4). In cells containing $\alpha 1/\beta 1/\gamma 2$ subunits, the EC₅₀ for current activation by GABA alone was 2.4 μM (Table 1) and a maximal effect achieved with 10 μM GABA (Fig. 5C). Clomethiazole (30 μM) potentiated current amplitude at all GABA concentrations in the range 0.1–30 μM (Fig. 5C). Potentiation of current at higher GABA concentrations was not significant. A Langmuir–Hill relation fitted to the data points in the concentration range 0.1–10 μM had an

EC_{50} of $0.8 \mu\text{M}$ (Fig. 5). The maximal current response, derived from the fitted curves, was augmented by a factor of about 1.8 (Fig. 5C).

GABA was less potent in cells containing $\alpha 1/\beta 2/\gamma 2$ subunits (Fig. 6). The fitted EC_{50} for GABA alone was $11 \mu\text{M}$ and a maximal effect was achieved at a concentration of $100 \mu\text{M}$ GABA (Fig. 6C). Clomethiazole ($30 \mu\text{M}$) potentiated GABA-evoked currents throughout the concentration range of 0.1 – $100 \mu\text{M}$ GABA (Fig. 6C). The potentiating

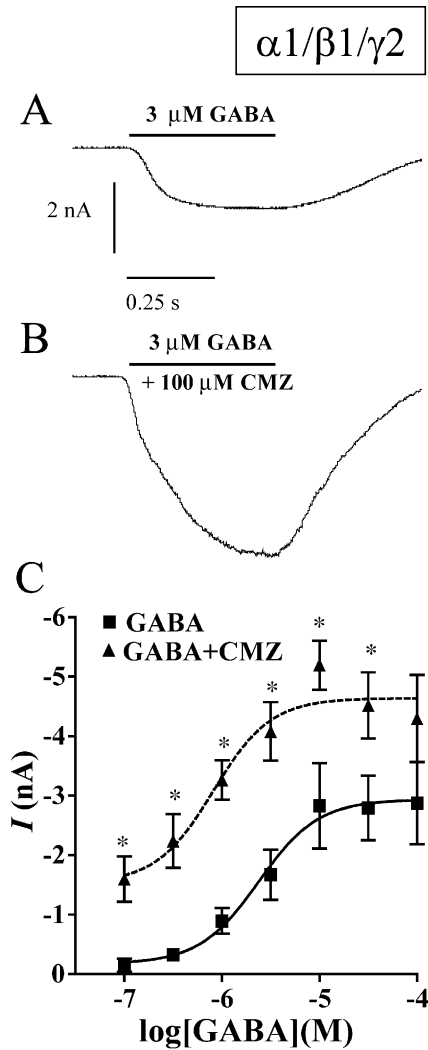


Fig. 5. Clomethiazole-potentiated GABA-activated currents in $\alpha 1/\beta 1/\gamma 2$ -transfected cells. Currents evoked in response to application of GABA ($3 \mu\text{M}$, 500 ms) in the absence (A) or presence (B) of clomethiazole (CMZ; $100 \mu\text{M}$); holding potential was -30 mV in each case. The current evoked by this low concentration of clomethiazole by direct activation is likely to be very low (see Figs. 3 and 4). (C) Pooled concentration–response data. Points show mean \pm S.E.M. of GABA-activated peak current (I) in the absence (squares, data from eight cells) or presence (triangles, data from five cells) of a low concentration of clomethiazole (CMZ; $30 \mu\text{M}$). Asterisks mark GABA concentrations where co-application of clomethiazole produced significant potentiation ($p < 0.05$). The Langmuir–Hill curves of best fit are shown for GABA alone (solid line) and GABA in the presence of clomethiazole (dashed line).

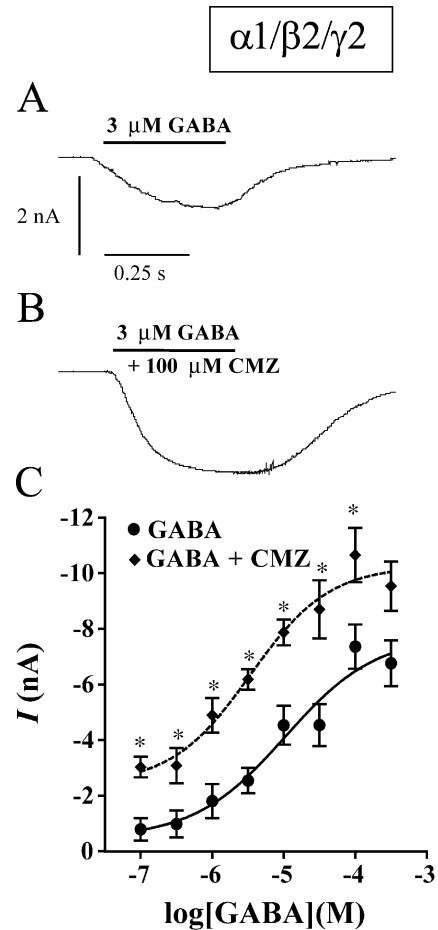


Fig. 6. Clomethiazole-potentiated GABA-activated currents in $\alpha 1/\beta 2/\gamma 2$ -transfected cells. Currents evoked in response to application of GABA ($3 \mu\text{M}$, 500 ms) in the absence (A) or presence (B) of clomethiazole (CMZ; $100 \mu\text{M}$); holding potential was -30 mV in each case. (C) Pooled concentration–response data. Points show mean \pm S.E.M. of GABA-activated peak current (I) in the absence (circles, data from four cells) or presence (diamonds, data from four cells) of a low concentration of clomethiazole (CMZ; $30 \mu\text{M}$). Asterisks mark GABA concentrations where co-application of clomethiazole produced significant potentiation. The Langmuir–Hill curves of best fit are shown for GABA alone (solid line) and GABA in the presence of clomethiazole (dashed line).

effect of clomethiazole corresponded to a modified EC_{50} of $3.4 \mu\text{M}$ for GABA. The maximal response was augmented by a factor of 1.2 (Fig. 6C).

4. Discussion

4.1. General points

We studied the electrophysiological actions of GABA and clomethiazole on cell lines transfected with two different recombinant GABA_A receptor subunit compositions: $\alpha 1/\beta 2/\gamma 2$, which is the most abundant combination in mammalian central nervous system (Fritschy et al., 1992; McKernan and Whiting, 1996) and $\alpha 1/\beta 1/\gamma 2$.

Brief application of GABA produced chloride-selective, bicuculline-sensitive currents in both cell types, with approximately 4-fold higher potency in the $\alpha 1/\beta 1/\gamma 2$ subunit-containing cells. It is possible that the GABA_A currents recorded might have been carried by a heterogeneous population of receptor types (α/β , β , β/γ , etc.), but this seems unlikely for three reasons. First, the concentration–response relations for both cell types were fitted by single Langmuir–Hill curves for either GABA or clomethiazole. Second, for both drugs, these curves were well-separated for the two cell types, which differed only in the β subunit present. Finally, HEK293 cells transfected with $\alpha 1$, $\beta 2$ and $\gamma 2$ subunits were shown, using FRET analysis, to contain only GABA_A receptors of stoichiometry $\alpha 1_2\beta 2_2\gamma 2$ (Farrar et al., 1999). It also seems unlikely that the differences in responses to brief drug application, observed here, resulted from the different γ subunits present. The $\gamma 2L$ and $\gamma 2S$ subunits are splice variants, differing only in an eight amino acid insert in the cytoplasmic TM3–TM4 linker (see Mehta and Ticku, 1999).

4.2. Direct activation by clomethiazole

In the absence of GABA, clomethiazole ($\geq 30 \mu\text{M}$) directly activated GABA_A currents in a bicuculline-sensitive manner. In an earlier study, direct current activation was observed in bovine chromaffin cells on pressure ejection of clomethiazole (3 mM), and virtually abolished in the presence of bicuculline (Hales and Lambert, 1992). These data were interpreted as evidence for an action of clomethiazole at the GABA-binding site (Hales and Lambert, 1992). Bicuculline has more recently been shown not only to compete for the GABA agonist binding site, but also to prevent channel activation once bound, by acting as an allosteric “inverse agonist” (Bianchi and Macdonald, 2001; Ueno et al., 1997). Thus, it is likely that direct activation by clomethiazole does not arise from action at the GABA recognition site. Indeed, clomethiazole (1 mM) did not displace labelled muscimol from rat cortical membranes, indicating that clomethiazole has negligible affinity for the GABA agonist binding site on native receptors (Green et al., 1996).

Clomethiazole displaced [³⁵S]-labelled TBPS-binding, indicative of channel activation, in HEK293 cells transfected either with $\beta 3$ subunits alone, or with $\beta 3$ together with $\alpha 1$, $\gamma 2$ or $\alpha 1/\gamma 2$, in each case with IC₅₀ of about 90 μM (range 84–99 μM) (Zezula et al., 1996). This value is very close to that obtained in both rat cortical membrane preparations (Cross et al., 1989; Moody and Skolnick, 1989; Vincens et al., 1989) and cerebellar membrane preparations (Zezula et al., 1996). In contrast to clomethiazole, a range of compounds—including GABA, alphaxolone, (+)-etomidate, pentobarbital and propofol—exhibited different potencies for [³⁵S]TBPS displacement from cells transfected with $\beta 3$, $\alpha 1/\beta 3$, $\beta 3/\gamma 2$, or $\alpha 1/\beta 3/\gamma 2$ (Zezula et al., 1996). One interpretation of this study is that clomethiazole binds to

the β subunit, in a fashion insensitive to the other subunits present. An alternative interpretation is that clomethiazole is completely promiscuous, and binds to α , β and γ subunits equally well. Our findings of 5-fold difference in potency between $\beta 1$ and $\beta 2$ containing cells favour the former view, that clomethiazole acts via the β subunit, at least for direct channel activation. The Hill coefficient for clomethiazole data suggests multiple clomethiazole binding sites per channel (see Table 1).

4.3. Allosteric action of clomethiazole

At concentrations where negligible direct current activation was observed, clomethiazole (30 μM) enhanced currents evoked by GABA, equivalent to ~ 3 -fold increase in potency, in both cell types. In previous electrophysiological studies, clomethiazole (100 μM) also enhanced currents evoked by brief pressure ejections of GABA, both in CHO cells transfected with $\alpha 1/\beta 1$ GABA_A subunits (Hill-Venning et al., 1992) and in bovine chromaffin cells (Hales and Lambert, 1992; Lambert et al., 1991), known to contain predominantly $\alpha 1$, $\gamma 2$ and a β subunit (see McKernan and Whiting, 1996). This potentiating effect of clomethiazole is believed to result from an allosteric action on the GABA_A receptor complex, in common with the actions of several other GABA_A mimetics, including pento-barbitone, propofol and loreclezole, e.g. (Hales and Lambert, 1992; Hill-Venning et al., 1992; Lambert et al., 1991; Thompson et al., 1996, 1999; Wafford et al., 1994; Zhong and Simmonds, 1997). The allosteric action of clomethiazole at concentrations $< 10^{-4}$ M could result from increased single-channel density, conductance, or open probability. Previous data indicated an increase in channel open probability, probably resulting from prolongation of burst length by clomethiazole at a concentration of 100 μM (Hales and Lambert, 1992).

4.4. Conclusion

We conclude that clomethiazole can directly activate GABA_A receptors at low concentrations ($\geq 100 \mu\text{M}$), in addition to potentiating the agonist action of GABA. Clinically, the plasma concentration of clomethiazole can reach 100–200 μM at hypnotic doses (Kim and Khanna, 1983) and studies in rats have shown that brain tissue concentrations of clomethiazole are around 40% greater than the plasma concentration (Green et al., 2000b). Thus, brain clomethiazole concentrations of around 100 μM in patients are likely to occur at clinically relevant doses. The concentration observed in rat brain following an acute dose of clomethiazole, which produces sedative, anticonvulsant and neuroprotective activity, has also been shown to be in the 100–200 μM range (Green et al., 2000b). Thus, both mechanisms of action considered here, direct activation and allosteric potentiation, may be relevant in vivo. Direct activation is likely to be a potent tonic

inhibitory influence at extra-synaptic GABA_A receptors (Mody, 2001), while the allosteric effect is likely to be more relevant at synaptic sites, potentiating the neurotransmitter action of GABA. In pathological states where ambient levels of GABA are low (for example, following acute cerebral ischaemia), clomethiazole could activate GABA_A receptors, leading to restoration of GABAergic function (Green et al., 2000a). This proposal is supported by recent in vitro studies using ischaemic rat cortical tissue (Nelson et al., 2000, 2001b).

Acknowledgements

We thank Dr. P.J. Whiting and Ms. J. Kerby, of Merck Sharp & Dohme Research Laboratories, Harlow, for the cell lines used and Dr. P.A. Butler and Dr. D.A. Armitage for expert help and advice. We are grateful to AstraZeneca Global R&D CNS and Pain for financial assistance.

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