## THE CLINICAL SIGNIFICANCE FOR CONVULSION THERAPY OF TRACE METAL INTERACTIONS WITH SODIUM VALPROATE

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Sodium valproate (Epilim) has proved an effective anticonvulsant in the treatment of epilepsy and, more recently, in initial therapy of neonatal lead-induced convulsions (Fernando et al. 1981). The incidence of adverse reactions to the drug is low in comparison with other anticonvulsants, but still affects about 30% of patients. Epilim and most of its metabolites contain a labile carboxylate anion or carbonyl moiety. Any compounds formed with trace metals in vivo will affect sclubility and, possibly, the side reactions of the drug.

We have performed in vitro metathetical reactions between Epilim and salts of copper(II), iron(II) and (III), manganese(II), magnesium(II), nickel(II), zinc(II) and calcium(II), as well as the toxic metals mercury, cadmium and lead. Magnesium and calcium gave products of only slightly lower solubility than the initial sodium compound. Iron(II) spontaneously and rapidly oxidised to iron(III) with absorption of atmospheric water. These compounds were not further examined. All other salts precipitated. The products analysed to better than 1% for the appropriate oxidation state of the metal. Nickel(II), iron(III) and lead(II) valproates contained one molecule of water. Mass spectra for the metal fragments of two representative compounds are listed in Table 1. The infrared asymmetric and symmetric stretching vibrations for (COOT) are given in Table 2.

. Nickel a	and copper mass spectral	metal co	ntaining	fragments.
Intensity	Species	m/e	Intensit	y Species
100.0	Ni <sub>2</sub> (val) <sub>3</sub> +	413	90.9	Cu <sub>2</sub> (val)(valH) <sup>+</sup>
<b>3</b> 0.7	Ni <sub>2</sub> (val) <sub>2</sub> +	341	15.7	$Cu_2(val)(H_2C=CHCO_2H)^+$
18.9	Ni(CH3(CĤ2)3CO2H+	269		Cu <sub>2</sub> (val)+
<b>53.</b> 8	Ni (CHaCHaCHa)aC=CO2+	227	33.8	Cu2(CH3CH2CH2CH=CO2H)+
	J 2 2 2 2	205	23.3	си(сн <sub>3</sub> сн <sub>2</sub> сн <sub>2</sub> 5 <sub>2</sub> с=со <sub>2</sub> +
	Intensity 100.0 30.7 18.9	Intensity Species  100.0 Ni <sub>2</sub> (val) <sub>3</sub> + 30.7 Ni <sub>2</sub> (val) <sub>2</sub> + 18.9 Ni(CH <sub>3</sub> (CH <sub>2</sub> ) <sub>3</sub> CO <sub>2</sub> H+	Intensity Species m/e  100.0 Ni <sub>2</sub> (vel) <sub>3</sub> + 413 30.7 Ni <sub>2</sub> (vel) <sub>2</sub> + 341 18.9 Ni(CH <sub>3</sub> (CH <sub>2</sub> ) <sub>3</sub> CO <sub>2</sub> H+ 269 53.8 Ni (CH <sub>3</sub> CH <sub>2</sub> CH <sub>2</sub> ) <sub>2</sub> C=CO <sub>2</sub> + 227	Intensity Species m/e Intensit 100.0 Ni <sub>2</sub> (val) <sub>3</sub> + 413 90.9 30.7 Ni <sub>2</sub> (val) <sub>2</sub> + 341 15.7 18.9 Ni(CH <sub>3</sub> (CH <sub>2</sub> ) <sub>3</sub> CO <sub>2</sub> H+ 269 100.0 53.8 Ni (CH <sub>3</sub> CH <sub>2</sub> CH <sub>2</sub> ) <sub>2</sub> C=CO <sub>2</sub> + 227 33.8

Table 2.	Infra	red asymm	etric and symr	metric	(C-O) stretching vibrations (cm <sup>-1</sup> ).				
sodium	asym 1550	sym 1415	manganese	asym 1560	sym 1420	nickel	asym 1570	sym 1410	
mercury cadmium	1545 1567	1406 1413	copper zinc	1578 1590	1419 1429	iron(III) lead	1580 1525	1420 1380	

Mass spectra show oligomeric structures for several of the metal valproates with infrared data indicating bonding ranging from ionic to bidentate coordination.

If reaction occurs with similar facility in vivo then, at the typical dose level for the drug of 30mg/kg/day for a child and 1.8g/day in adults, trace metal chelation could occur. Thus, for example, zinc and copper deficiencies give rise to, inter alia, alopecia and wavy hair syndrome respectively. Such symptoms are observed in about 11% of patients undergoing valproate therapy. Other correlations can be drawn: for example, between manganese and the incidence of ataxia.

The scope of the reactions between sodium valproate and trace metals demonstrated in vitro indicate this is a likely contributing factor in the observed side effects of the drug. It is hoped that metal balance studies of patients taking valproate will test this hypothesis, and with the aid of dietary supplements may lead to a reduction in side effects.

Fernando, N.P., Healy, M.A., Aslam, M., Davis, S.S. and Hussain, A. (1981) Public Health, London, 95; 250-260.

0022-3573/82/120096P-01\$02.50/0 (c) 1982 J. Pharm. Pharmacol.