

Durable Suppression of Spontaneous Seizures in a Mouse Model of KCNT1 Genetic Epilepsy with Divalent siRNA

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Abstract

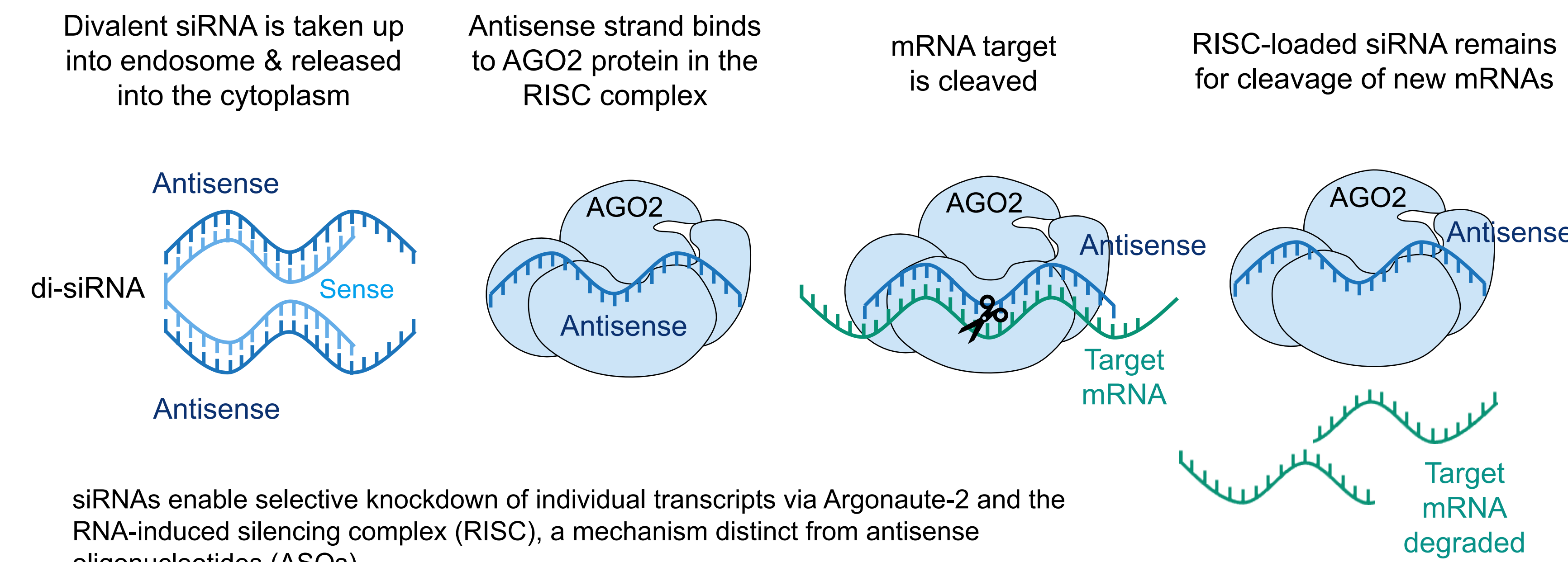
Background: Gain-of-function genetic variants in the *KCNT1* gene, which encodes a sodium-activated potassium ion channel, drive severe early-onset developmental epileptic encephalopathies including EIMFS (epilepsy of infancy with migrating focal seizures) and SHE (sleep-related hypermotor epilepsy). No therapy provides more than sporadic or incremental improvement. Here we report suppression of seizures in a genetic mouse model of KCNT1 epilepsy by targeting mouse *Kcnt1* with divalent small interfering siRNA (di-siRNA), an emerging variant of oligonucleotide technology developed for the CNS.

Methods: The ATL-201 molecule is two identical fully synthetic double-stranded siRNAs, covalently linked, with 100% base pair match to sequence identical in human *KCNT1* and mouse *Kcnt1*. Mechanistically, ATL-201 reduces potassium conductance by targeting both wildtype and mutant *KCNT1* alleles. ATL-201 was tested in mice homozygous for *Kcnt1-Y777H*, the mouse ortholog to the human pathogenic *KCNT1-Y796H* missense variant. Seizures were measured in freely-behaving mice with electrocorticogram from implanted leads combined with behavioral observations. The number and durations of seizures were measured in parallel groups dosed with ATL-201 or with PBS in a six-month durability study and in a two-month dose-efficacy study.

Results: ATL-201 reduced transcript from whole-cell lysate and eliminated potassium currents from cloned KCNT1 channels in heterologous expression. ATL-201 also eliminated sodium-activated potassium currents recorded from cultured mouse cortical neurons. In vivo, ATL-201 suppressed seizures in *Kcnt1-Y777H* homozygous mice in a dose-dependent manner with near-complete suppression from two weeks to at least four months. *Kcnt1-Y777H* mice had defects in nest-building behavior, whereas in ATL-201-treated mice nest-building was near equivalent to wildtype mice.

Conclusions: Patients with KCNT1-driven epilepsy experience up to hundreds of seizures a day and have severe impairment in cognitive, motor, and language development and high mortality. The dose-dependent efficacy and long durability of ATL-201 suggest that ATL-201 used clinically might suppress seizures and give improvements in overall function. ATL-201 targets sequence that does not encompass any known pathogenic variant in *KCNT1* and so in principle should be effective against any genotype of KCNT1 epilepsy. The efficacy and durability of the di-siRNA gives promise for a quarterly- or biannually-dosed disease-modifying treatment of KCNT1 epilepsy with a mechanism distinct from emerging antisense oligonucleotide and small molecule therapies.

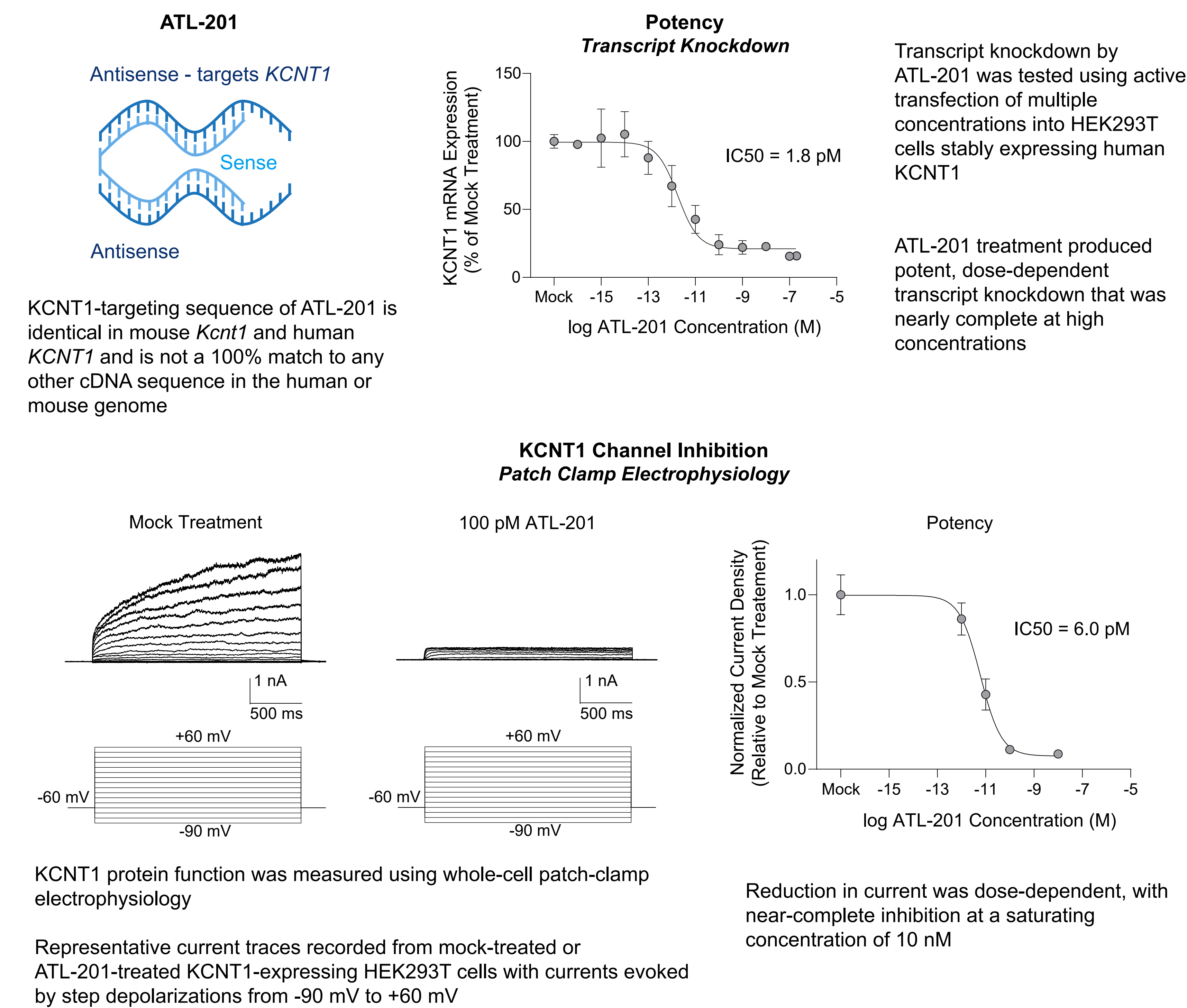
Background: Transcript Cleavage by siRNA



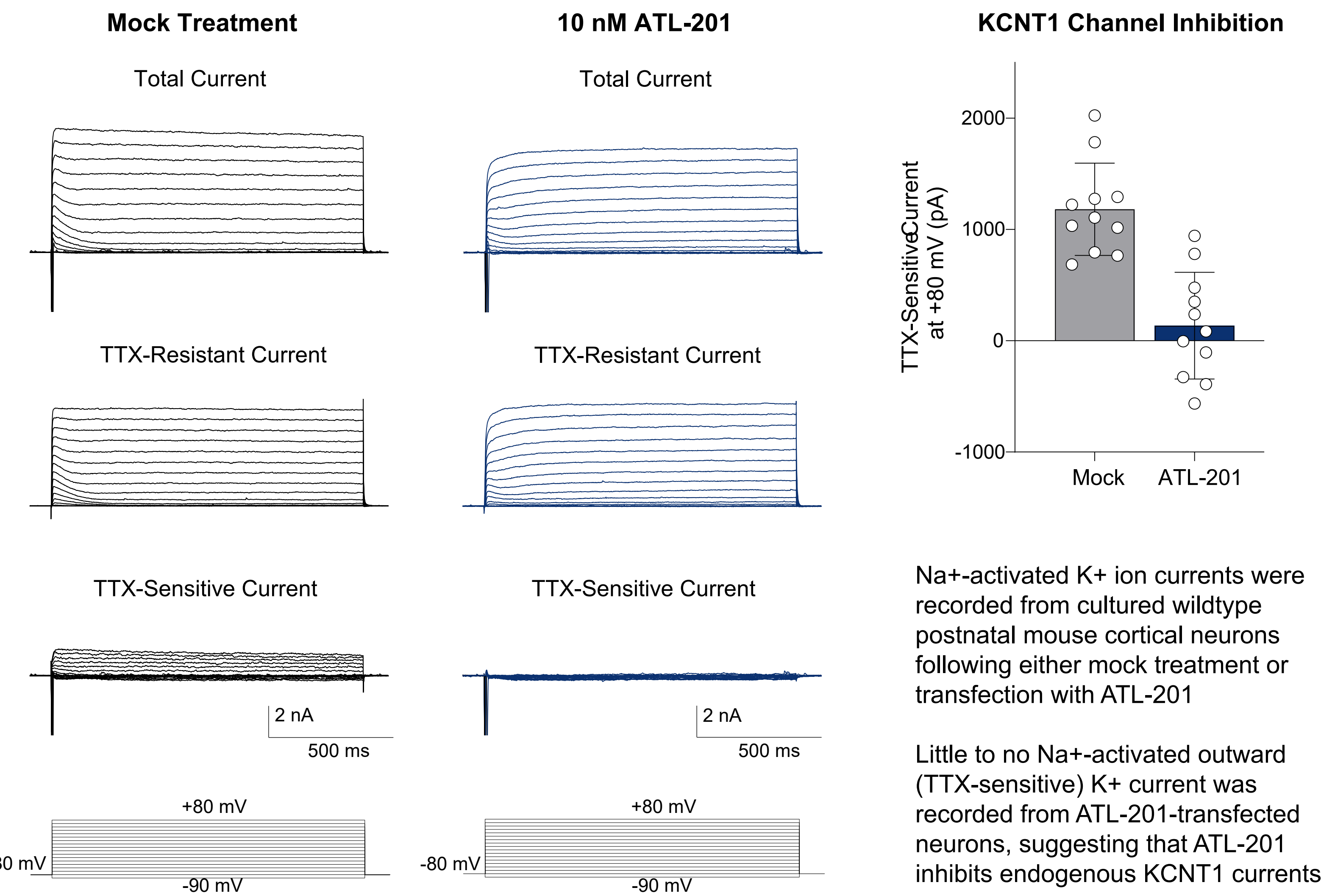
siRNAs enable selective knockdown of individual transcripts via Argonaute-2 and the RNA-induced silencing complex (RISC), a mechanism distinct from antisense oligonucleotides (ASOs)

Divalent siRNAs (di-siRNAs) distribute broadly through the CNS following dosing in saline into the cerebrospinal fluid, without lipid or other carriers

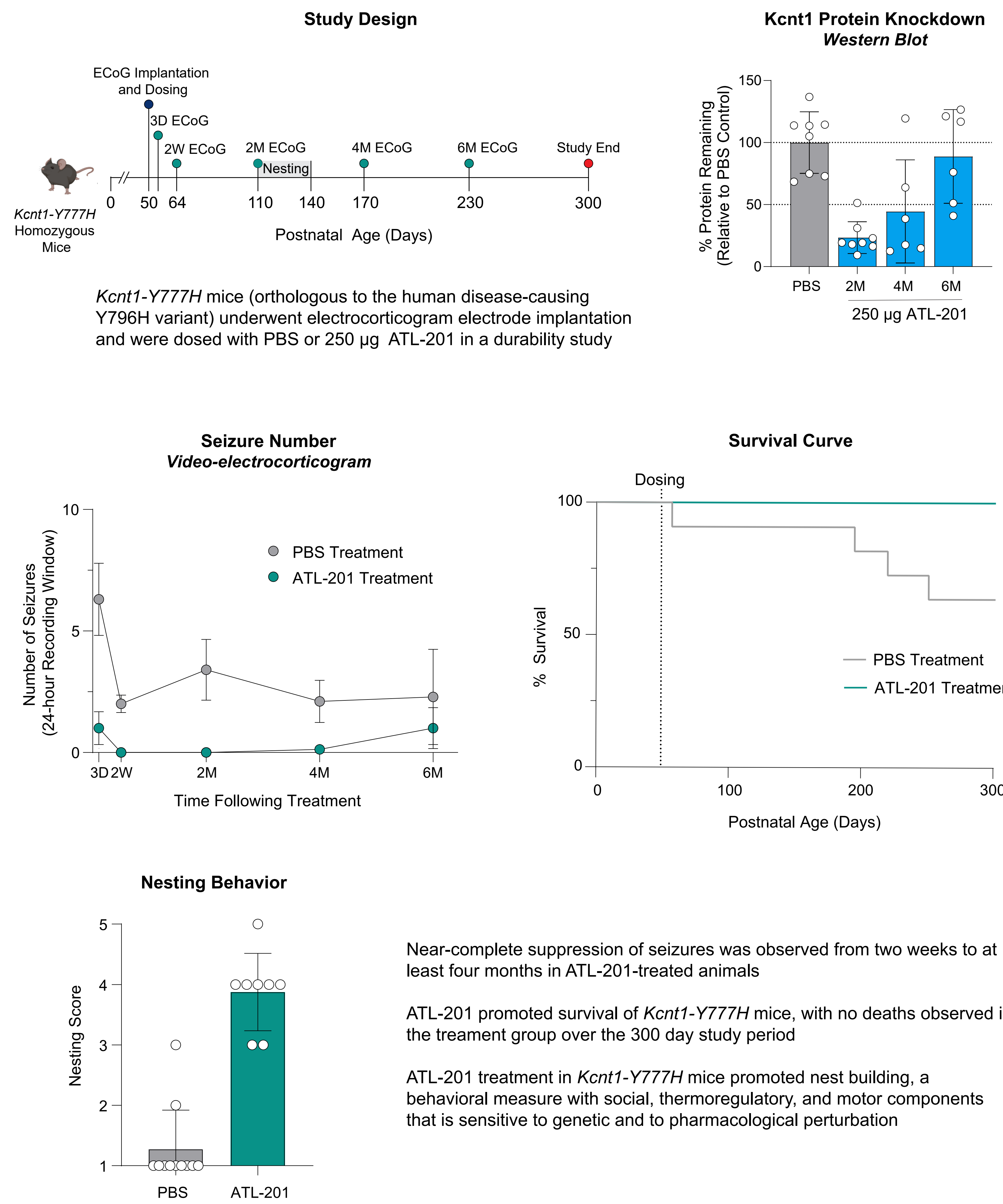
ATL-201 Knocks Down *KCNT1* Transcript and Protein In Vitro



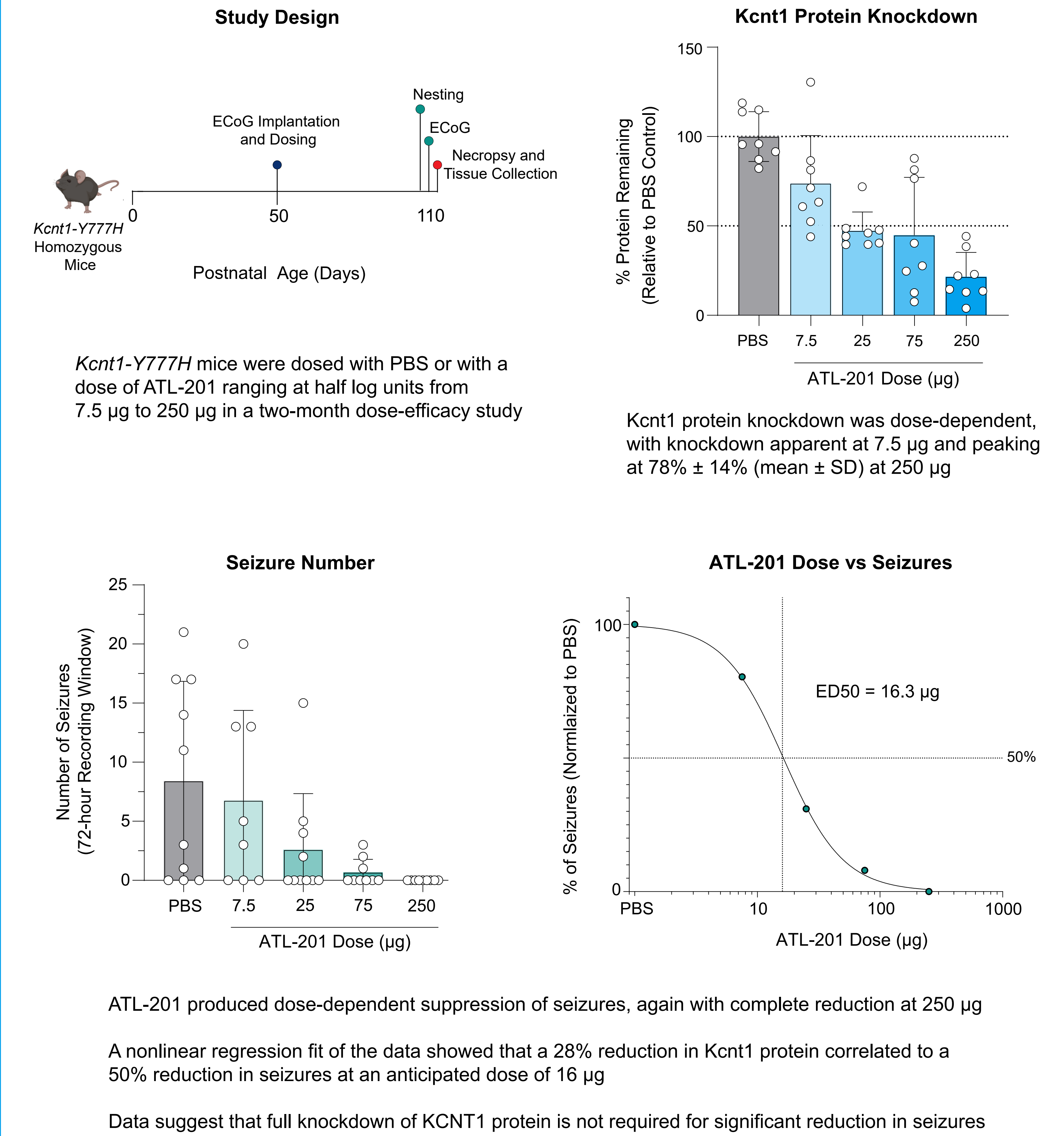
ATL-201 Inhibits Neuronal Sodium-Activated Potassium Currents



ATL-201 Durably Suppresses Seizures in the *Kcnt1-Y777H* Epilepsy Mouse Model



ATL-201 Efficacy is Dose-Dependent



Summary

- Divalent siRNA, an emerging small interfering RNA technology distinct from antisense oligonucleotide technology, has potency, distribution, and durability appropriate for neurological disease
- ATL-201, a novel di-siRNA targeting the human *KCNT1* gene, knocks down *KCNT1* transcript with consequent near-complete knockdown of KCNT1 protein
- A single dose of ATL-201 into cerebrospinal fluid gives durable, dose-dependent reduction in seizures and improvement in nesting behavior in a relevant preclinical model of human disease
- ATL-201 shows promise for disease-modifying treatment of a severe early-onset developmental epileptic encephalopathy that has no effective treatments