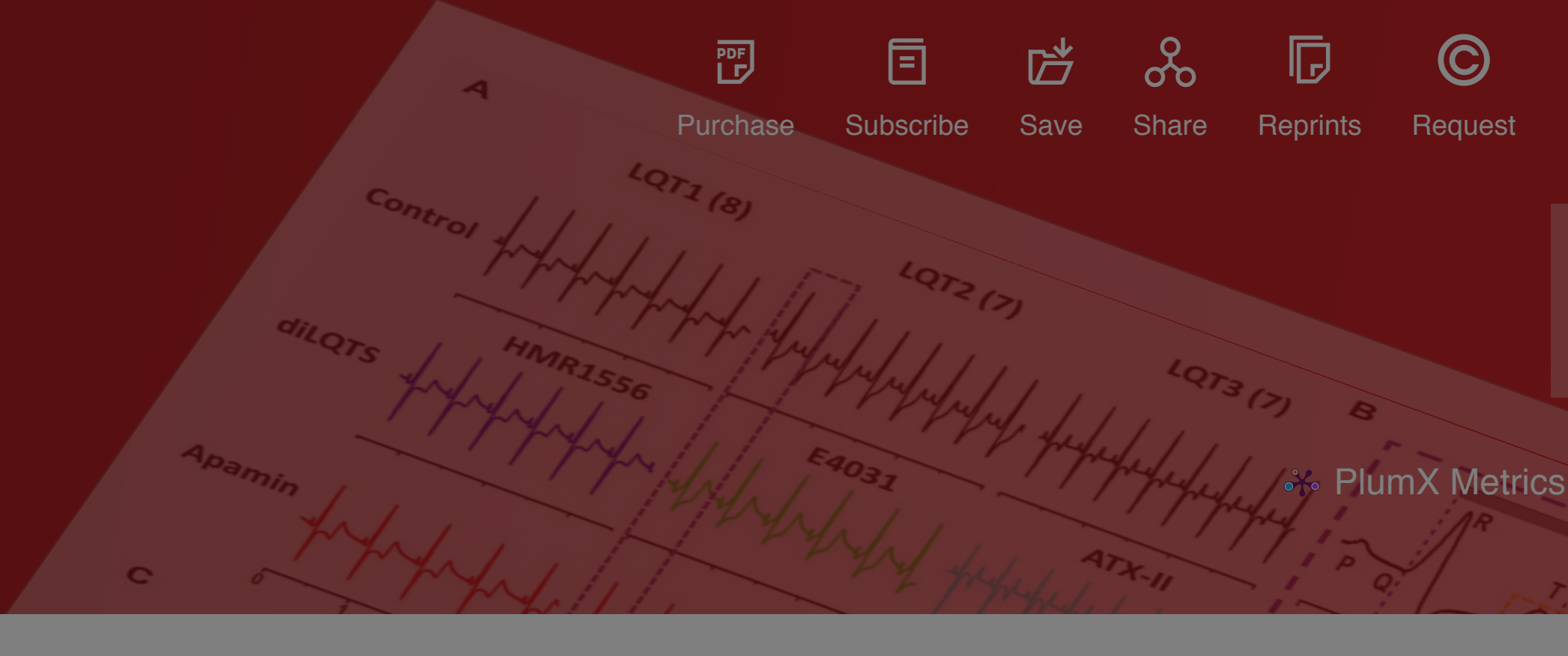


# Sex-specific I<sub>KAS</sub> activation in rabbit ventricles with drug-induced QT prolongation

Adonis Z. Wu, PhD • Mu Chen, MD • Dechun Yin, MD • ... James N. Weiss, MD • Zhilin Qu, PhD • Peng-Sheng Chen, MD, FHRS

Published: July 21, 2020 • DOI: <https://doi.org/10.1016/j.hrthm.2020.07.020>



## Background

Female sex is a known risk factor for drug-induced long QT syndrome (dILQTS). We recently demonstrated a sex difference in apamin-sensitive small-conductance Ca<sup>2+</sup>-activated K<sup>+</sup> current (I<sub>KAS</sub>) activation during β-adrenergic stimulation.

## Objective

The purpose of this study was to test the hypothesis that there is a sex difference in I<sub>KAS</sub> in the rabbit models of dILQTS.

## Methods

We evaluated the sex difference in ventricular repolarization in 15 male and 22 female Langendorff-perfused rabbit hearts with optical mapping techniques during atrial pacing. HMR1556 (slowly activating delayed rectifier K<sup>+</sup> current [I<sub>Kd</sub>] blocker), E4031 (rapidly activating delayed rectifier K<sup>+</sup> current [I<sub>Kr</sub>] blocker) and sea anemone toxin (ATX-II, late Na<sup>+</sup> current [I<sub>NaL</sub>] activator) were used to simulate types 1-3 long QT syndrome, respectively. Apamin, an I<sub>KAS</sub> blocker, was then added to determine the magnitude of further QT prolongation.

## Results

HMR1556, E4031, and ATX-II led to the prolongation of action potential duration at 80% repolarization (APD<sub>80</sub>) in both male and female ventricles at pacing cycle lengths of 300–400 ms. Apamin further prolonged APD<sub>80</sub> (pacing cycle length 350 ms) from 187.8±4.3 to 206.9±7.1 (P=0.14) in HMR1556-treated, from 209.9±7.8 to 224.9±7.8 (P=0.03) in E4031-treated, and from 174.3±3.3 to 188.1±3.0 (P=0.002) in ATX-II-treated female hearts. Apamin did not further prolong the APD<sub>80</sub> in male hearts. The Ca<sub>v</sub> transient duration (Ca<sub>v</sub>TD) was significantly longer in dILQTS than baseline but without sex differences. Apamin did not change Ca<sub>v</sub>TD.

## Conclusion

We conclude that I<sub>KAS</sub> is abundantly increased in female but not in male ventricles with dILQTS. Increased I<sub>KAS</sub> helps preserve the repolarization reserve in female ventricles treated with I<sub>Ks</sub> and I<sub>Kr</sub> blockers or I<sub>NaL</sub> activators.

## Keywords

Calcium transient • Optical mapping • Potassium and late sodium currents • Repolarization reserve • SK current

To read this article in full you will need to make a payment. Purchase one-time access. Subscribe to Heart Rhythm. Already a print subscriber? Claim online access. Already an online subscriber? Sign in. Register: Create an account. Institutional Access: Sign in to ScienceDirect.

## References

1. Roden D.M. Drug-induced prolongation of the QT interval. N Engl J Med. 2004; 350: 1013-1022.
2. Mitcheson J.S. • Chen J. • Lin M. • Culbertson C. • Sanguinetti M.C. A structural basis for drug-induced long QT syndrome. Proc Natl Acad Sci U S A. 2000; 97: 12329-12333.
3. Pollard C.E. • Abi Gerges N. • Bridgland-Taylor M.H. • Easter A. • Hammond T.G. • Valentin J.P. An introduction to QT interval prolongation and non-clinical approaches to assessing and reducing risk. Br J Pharmacol. 2010; 159: 12-21.
4. Priori S.G. • Wilde A.A. • Horie M. • et al. HRS/EHRA/APHS/AAP/APHRS expert consensus statement on the diagnosis and management of patients with inherited primary arrhythmia syndromes. Heart Rhythm. 2013; 10: 1932-1963.
5. Lehtonen A. • Fodstad H. • Laitinen-Forsblom P. • Toivonen L. • Kontula K. • Swan H. Further evidence of inherited long QT syndrome gene mutations in antiarrhythmic drug-associated torsades de pointes. Heart Rhythm. 2007; 4: 603-607.
6. Kaab S. • Crawford D.C. • Sinner M.F. • et al. A large candidate gene survey identifies the KCNE1 D85N polymorphism as a possible modulator of drug-induced torsades de pointes. Circ Cardiovasc Genet. 2012; 5: 91-99.
7. Ramirez A.H. • Shaffer C.M. • Delaney J.T. • et al. Novel rare variants in congenital cardiac arrhythmia genes are frequent in drug-induced torsades de pointes. Pharmacogenomics J. 2013; 13: 325-329.
8. Weeke P. • Mosley J.D. • Hanna D. • et al. Exome sequencing implicates an increased burden of rare potassium channel variants in the risk of drug-induced long QT interval syndrome. J Am Coll Cardiol. 2014; 63: 1430-1437.
9. Nagy N. • Szuts V. • Horvath Z. • et al. Does small-conductance calcium-activated potassium channel contribute to cardiac repolarization?. J Mol Cell Cardiol. 2009; 47: 656-663.
10. Zhang X.D. • Lieu D.K. • Chiamvimonvat N. Small-conductance Ca<sup>2+</sup>-activated K<sup>+</sup> channels and cardiac arrhythmias. Heart Rhythm. 2015; 12: 1845-1851.
11. Chang P.C. • Chen P.S. SK channels and ventricular arrhythmias in heart failure. Trends Cardiovasc Med. 2015; 25: 508-514.
12. Chua S.K. • Chang P.C. • Maruyama M. • et al. Small-conductance calcium-activated potassium channel and recurrent ventricular fibrillation in failing rabbit ventricles. Circ Res. 2011; 108: 971-979.
13. Lee Y.S. • Chang P.C. • Hsueh C.H. • et al. Apamin-sensitive calcium-activated potassium currents in rabbit ventricles with chronic myocardial infarction. J Cardiovasc Electrophysiol. 2013; 24: 1144-1153.
14. Chen M. • Yin D. • Guo S. • et al. Sex-specific activation of SK current by isoproterenol facilitates action potential triangulation and arrhythmogenesis in rabbit ventricles. J Physiol. 2018; 596: 4299-4322.
15. Koller M.L. • Riccio M.L. • Gilmour Jr., R.F. Dynamic regulation of action potential duration during electrical alternans and ventricular fibrillation. Am J Physiol. 1998; 275: H1635-H1642.
16. el-Sherif N. • Fozzard H.A. • Hanck D.A. Dose-dependent modulation of the cardiac sodium channel by sea anemone toxin ATXII. Circ Res. 1992; 70: 285-301.
17. Yin D. • Yang N. • Tian Z. • et al. Ondansetron effects on apamin-sensitive small conductance calcium-activated potassium currents in pacing induced failing rabbit hearts. Heart Rhythm. 2020; 17: 332-340.
18. Postema P.G. • Wilde A.A. The measurement of the QT interval. Curr Cardiol Rev. 2014; 10: 287-294.
19. Makkar R.R. • Fromm B.S. • Steinman R.T. • Meissner M.D. • Lehmann M.H. Female gender as a risk factor for torsades de pointes associated with cardiovascular drugs. JAMA. 1993; 270: 2590-2597.
20. Burke J.H. • Ehlerf F.A. • Kruse J.T. • Parker M.A. • Goldberger J.J. • Kadish A.H. Gender-specific differences in the QT interval and the effect of autonomic tone and menstrual cycle in healthy adults. Am J Cardiol. 1997; 79: 178-181.
21. Drici M.D. • Knollmann B.C. • Wang W.X. • Woosley R.L. Cardiac actions of erythromycin: influence of female sex. JAMA. 1998; 280: 1774-1776.
22. Yang T. • Chun Y.W. • Stroud D.M. • et al. Screening for acute IKr block is insufficient to detect torsades de pointes liability: role of late sodium current. Circulation. 2014; 130: 224-234.
23. Liu X.K. • Katchman A. • Drici M.D. • et al. Gender difference in the cycle length-dependent QT and potassium currents in rabbits. J Pharmacol Exp Ther. 1998; 285: 672-679.
24. Sims C. • Reisenweber S. • Viswanathan P.C. • Choi B.R. • Walker W.H. • Salama G. Sex, age, and regional differences in L-type calcium current are important determinants of arrhythmia phenotype in rabbit hearts with drug-induced long QT type 2. Circ Res. 2008; 102: e86-e100.
25. Tuteja D. • Xu D. • Timofeyev V. • et al. Differential expression of small-conductance Ca<sup>2+</sup>-activated K<sup>+</sup> channels SK1, SK2, and SK3 in mouse atrial and ventricular myocytes. Am J Physiol Heart Circ Physiol. 2005; 289: H2714-H2723.
26. Bonilla I.M. • Long III, V.P. • Vargas-Pinto P. • et al. Small-conductance potassium current modulates ventricular repolarization in chronic heart failure. PLoS One. 2014; 9:e108824.
27. Yu C.C. • Corr C. • Shen C. • et al. Small conductance calcium-activated potassium current is important in transmural repolarization of failing human ventricles. Circ Arrhythm Electrophysiol. 2015; 8: 667-676.
28. Nattel S. The heart on a chip: the role of realistic mathematical models of cardiac electrical activity in understanding and treating cardiac arrhythmias. Heart Rhythm. 2007; 4: 779-780.
29. Ko J.S. • Guo S. • Hassel J. • et al. Ondansetron blocks wild-type and p.F503L variant small-conductance Ca<sup>2+</sup>-activated K<sup>+</sup> channels. Am J Physiol Heart Circ Physiol. 2018; 315: H375-H388.
30. Hafermann M.J. • Namdar R. • Seibold G.E. • Page II, R.L. Effect of intravenous ondansetron on QT interval prolongation in patients with cardiovascular disease and additional risk factors for torsades: a prospective, observational study. Drug Healthc Patient Saf. 2011; 3: 53-58.
31. Weiss J.N. • Karma A. • Shiferaw Y. • Chen P.S. • Garfinkel A. • Qu Z. From pulsus to pulseless: the saw of cardiac alternans. Circ Res. 2006; 98: 1244-1253.
32. Kennedy M. • Bars D.M. • Chiamvimonvat N. • Sato D. Dynamical effects of calcium-sensitive potassium currents on voltage and calcium alternans. J Physiol. 2017; 595: 2285-2297.
33. Torrente A.G. • Zhang R. • Wang H. • et al. Contribution of small conductance K<sup>+</sup> channels to sinoatrial node pacemaker activity: insights from atrial-specific Na<sup>+</sup>/Ca<sup>2+</sup> exchange knockout mice. J Physiol. 2017; 595: 3847-3865.
34. Zhang X.D. • Coulibaly Z.A. • Chen W.C. • et al. Coupling of SK channels, L-type Ca<sup>2+</sup> channels, and ryanodine receptors in cardiomyocytes. Sci Rep. 2018; 8: 4670.
35. Yu C.C. • Ai T. • Weiss J.N. • Chen P.S. Apamin does not inhibit human cardiac Na<sup>+</sup> current, L-type Ca<sup>2+</sup> current or other major K<sup>+</sup> currents. PLoS One. 2014; 9:e96691.
36. Nerbonne J.M. Molecular basis of functional voltage-gated K<sup>+</sup> channel diversity in the mammalian myocardium. J Physiol. 2000; 525: 285-298.

## Article Info

### Publication History

Published online: July 21, 2020

### Footnotes

Funding sources: This work was supported by National Institutes of Health (grants R01HL139829, R42DA043391, TR002208-01), the American Heart Association grant (18TPA34170284 ), a Charles Fisch Research Award endowed by Dr Suzanne B. Knoebel, a Medtronic-Zipes Educational, and the Indiana University Health–Indiana University School of Medicine Strategic Research Initiative.

Disclosures: The authors have no conflicts of interest to disclose.

### Identification

DOI: <https://doi.org/10.1016/j.hrthm.2020.07.020>

### Copyright

© 2020 Heart Rhythm Society. All rights reserved.

### ScienceDirect

Access this article on ScienceDirect

## Related Articles

Table with 5 columns: Home, ARTICLES AND ISSUES, Current Issue, Articles in Press, Supplements, Meeting Abstracts, COLLECTIONS, CES Abstracts. Rows include links to Clinical Guidelines & Documents, Hands On, MULTIMEDIA, Multimedia Library, Archive, CME, FOR AUTHORS, Guide for Authors, Permission to Reuse, Researcher Academy, Submit Your Manuscript, JOURNAL INFO, About the Journal, Abstracting and Indexing, Contact Information, Editorial Board, Information for Advertisers, Pricing, Permissions, Reprints, Receive New Content Alert Email, RELATED SITES, HRSONline.org, Heart Rhythm 365, ISHRE.org, Submit Your Manuscript, HEART RHYTHM SOCIETY JOURNALS, Heart Rhythm Case Reports, Heart Rhythm O<sup>2</sup>, Cardiovascular Digital Health Journal, FOLLOW US, Facebook, Twitter, RSS Feed.

We use cookies to analyse and improve our service, to improve and personalise content, advertising and your digital experience. We also share information about your use of our site with our social media, advertising and analytics partners. Cookie Policy. Accept all cookies. Cookie Settings.