

## Metrion Biosciences: the ion channel specialists

Utility of human iPSC-derived cardiomyocytes for preclinical safety assays and disease modelling

Sarah Williams, PhD

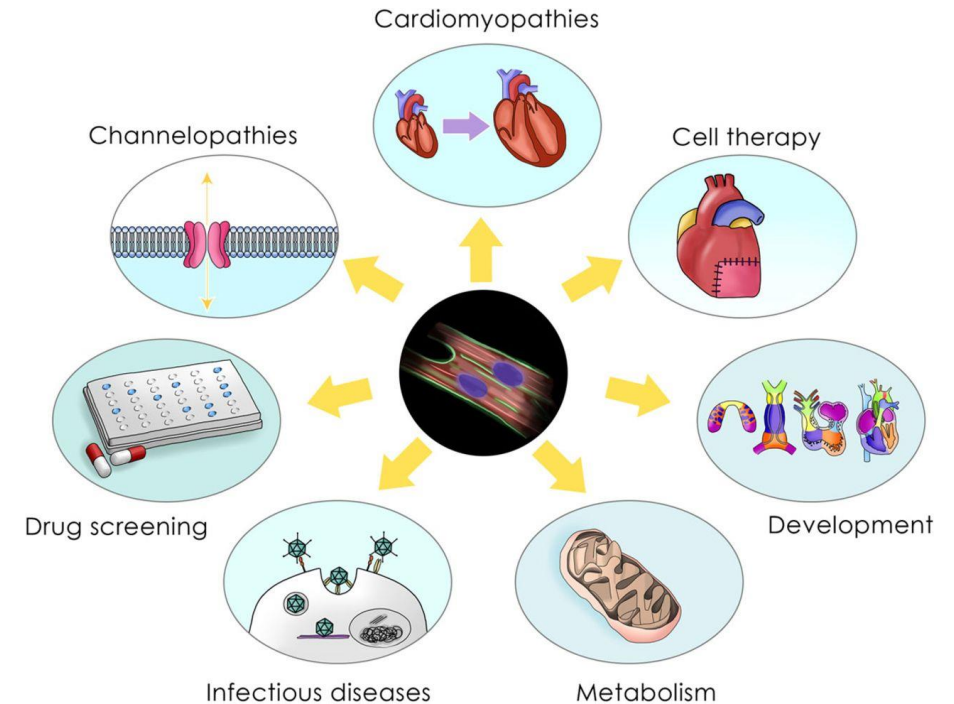
23 May 2018

[www.metrionbiosciences.com](http://www.metrionbiosciences.com)



# Applications of human iPSC-derived cardiomyocytes

- Human induced pluripotent stem cell-derived cardiomyocytes (iPSC-CM) can be differentiated from healthy or diseased donors
- Many applications of iPSC-CM including:
  - Study of channelopathies e.g. long QT syndromes
  - Development of patient-specific pharmacology
  - Stem cell therapies
  - Drug screening and preclinical safety assessment
- To successfully utilise iPSC-CM as a model system they need thorough functional characterisation

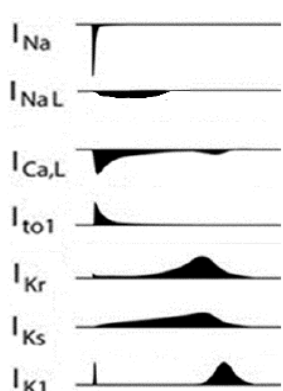


Karakikes *et al.*, *Circulation Research*. 2015;117:80-88

# Comprehensive *in vitro* Proarrhythmia Assay (CiPA) initiative

- CiPA initiative is a regulatory proposal sponsored by USA, European, and Japanese safety bodies to augment current cardiac safety testing regimes
- The scientific proposal for CiPA involves 'four pillars'

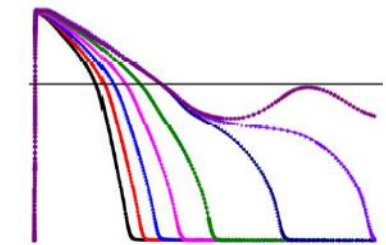
**1**



*modified from Hoekstra et al., 2012*

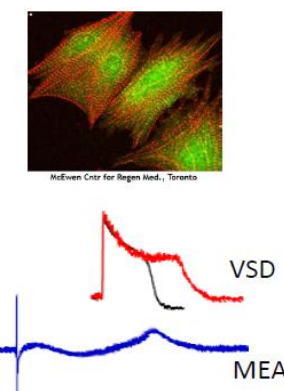
**Analysis of compound activity in a full panel of human cardiac ion channels**

**2**

$$I_{stim} = C \frac{dV_m}{dt} + I_m$$


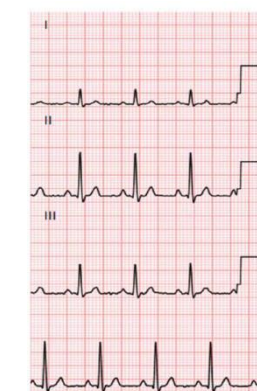
**Use *in vitro* data for *in silico* modelling to evaluate proarrhythmic risk**

**3**



**Confirm proarrhythmia signals in human iPSC-derived cardiomyocytes**

**4**



**Clinical evaluation of unanticipated effects**

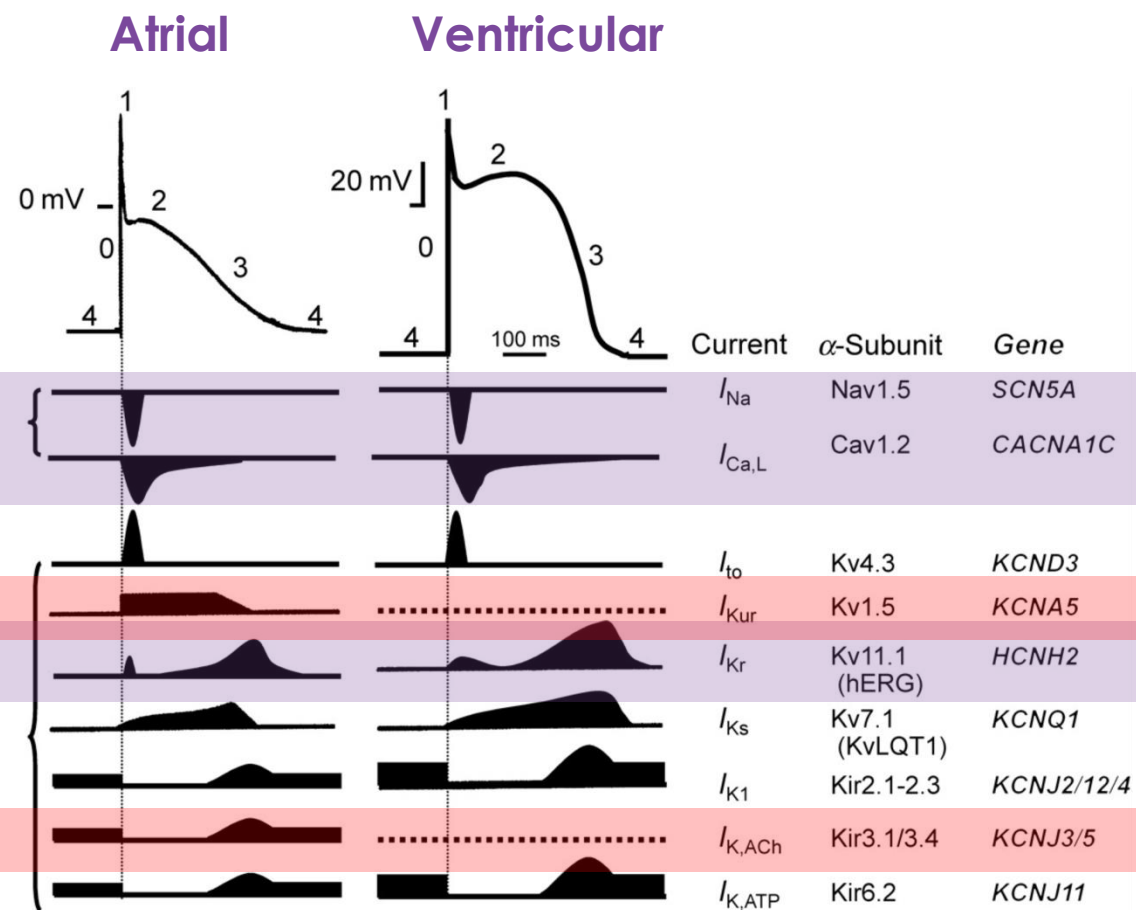
- Metrion have established assays for CiPA pillars 1 - 3

<http://cipaproject.org>

# Contents

1. Establishing Axol iPSC-CM as a model system
2. Electrophysiological validation of ventricular iPSC-CM
3. Electrophysiological validation of atrial iPSC-CM
4. Summary

# Establishing Axol's iPSC-CM as model systems



- Electrophysiological characterisation of channel expression
  - Gold-standard manual patch clamp
- Three core cardiac currents
  - $I_{Na}$  (Nav1.5)
  - $I_{Ca,L}$  (Ca<sub>v</sub>1.2)
  - $I_{Kr}$  (hERG)
  - Present in both chambers and essential for cardiomyocyte action potentials
- Two chamber specific currents
  - $I_{KACH}$  (Kir3.1/Kir3.4)
  - $I_{Kur}$  (K<sub>v</sub>1.5)
  - Functional expression only observed in human atrial cardiomyocytes

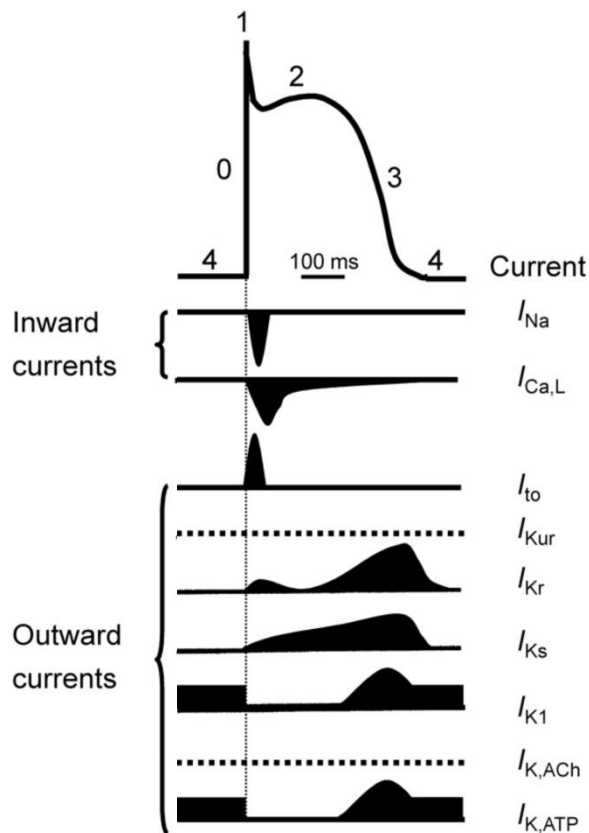
Role of potassium currents in cardiac arrhythmias. Europace. 2008;10(10):1133-1137

# Contents

1. Establishing Axol iPSC-CM as a model system
2. Electrophysiological validation of ventricular iPSC-CM
3. Electrophysiological validation of atrial iPSC-CM
4. Summary

# Ventricular cardiomyocytes

## Ventricular



Europace. 2008;10(10):1133-1137

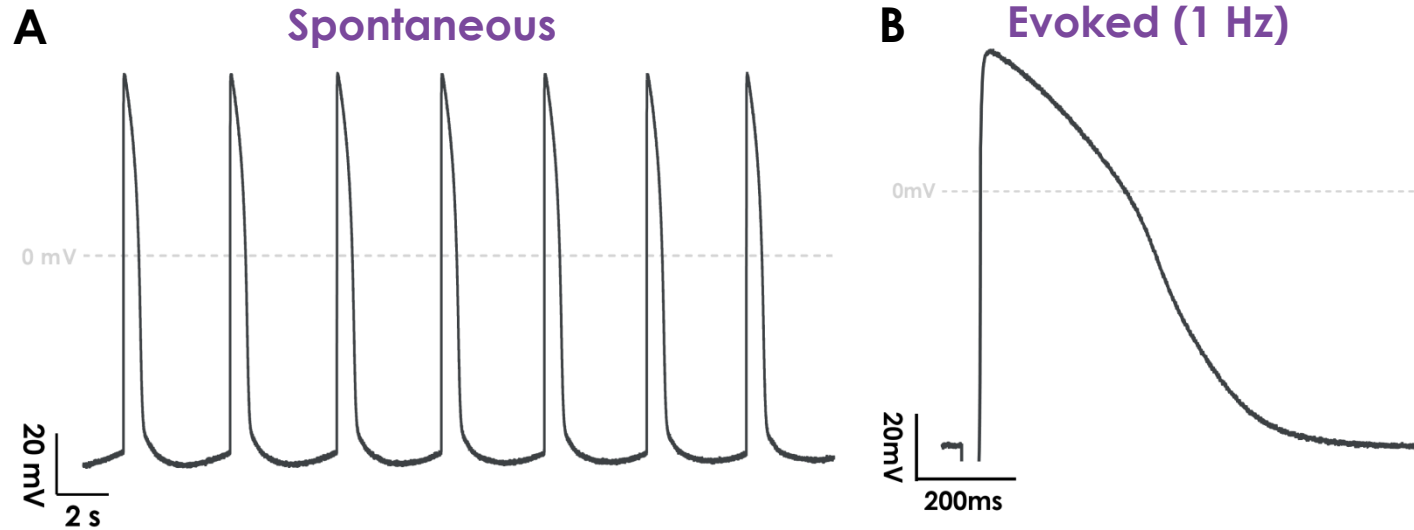
## Applications of ventricular iPSC-CM at Metrion

- Preclinical cardiac safety screening – CiPA
- Profiling compound effects in a translational human model system
- Disease modelling

## Aims of electrophysiological characterisation

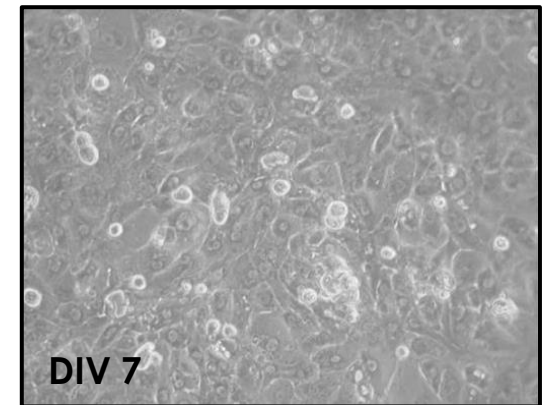
1. Determine control properties of Axol ventricular iPSC-CM
2. Confirm the functional expression of three core cardiac currents
  - $I_{Na}$  ( $Na_v1.5$ ),  $I_{Ca,L}$  ( $Ca_v1.2$ ), and  $I_{Kr}$  (hERG)
3. Confirm the absence of two chamber specific currents
  - $I_{K,ACh}$  ( $K_{ir}3.1/K_{ir}3.4$ ) and  $I_{Kur}$  ( $K_v1.5$ )

# Ventricular action potential characteristics



AP parameter	Spontaneous (N = 38)	Evoked 1 Hz (N = 31)
MDP (mV)	-66.2 ± 0.9	-71.2 ± 1.9
dV/dt <sub>max</sub> (V/s)	24.0 ± 2.8	19.5 ± 3.6
APA (mV)	115.4 ± 1.4	118.9 ± 2.3
APD20 (ms)	274.3 ± 11.1	203.4 ± 7.0
APD50 (ms)	421.6 ± 14.9	366.0 ± 10.6
APD90 (ms)	532.7 ± 14.8	547.5 ± 12.1
Frequency (Hz)	0.26 ± 0.03	1

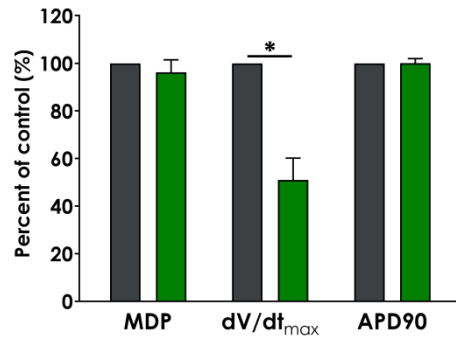
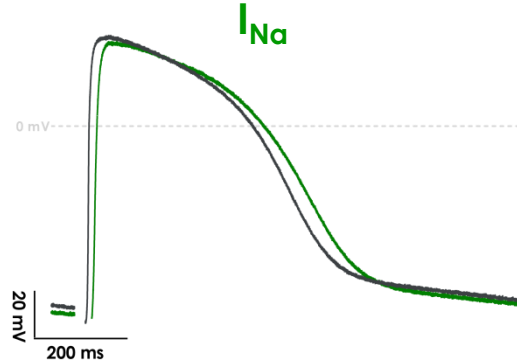
- Suitable for recording of spontaneous & evoked activity (0.2 – 1 Hz)
- Good maximum diastolic potential ~ -71 mV
- Upstroke velocity of ~ 20 V/s
- Consistent APD90 ~ 550 ms



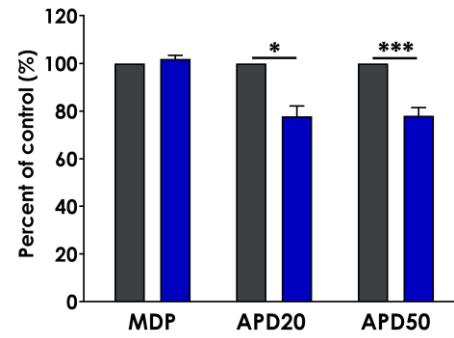
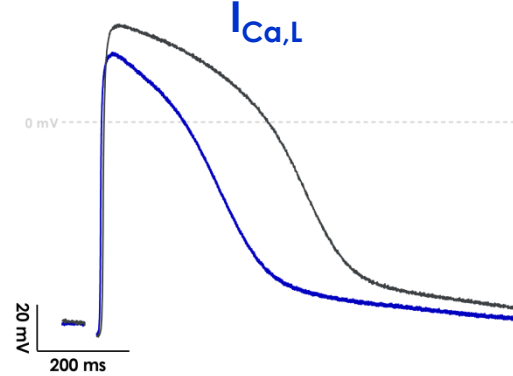


# Expression of core cardiac currents

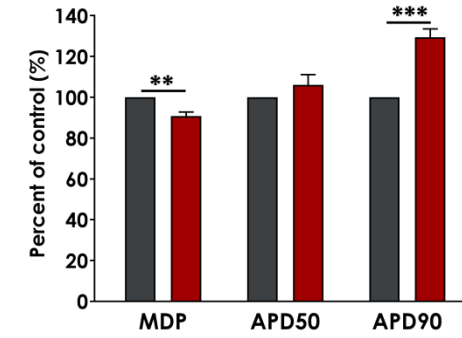
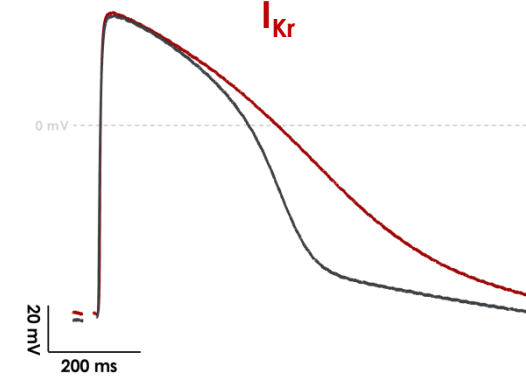
**A** 100  $\mu$ M Lidocaine



**B** 100 nM Nifedipine



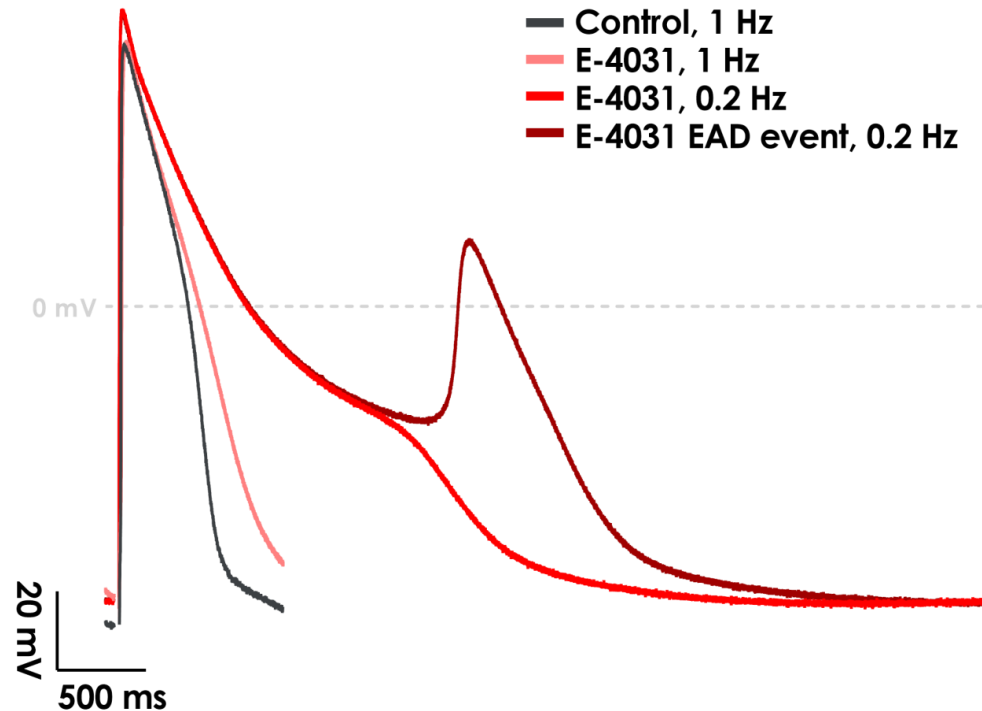
**C** 100 nM E-4031



- Confirmed functionality of core cardiac currents in Axol ventricular iPSC-CM
  - Expected effects of three reference compounds on evoked action potentials
    - (A) Lidocaine slowed the upstroke velocity by ~50 %
    - (B) Nifedipine decreased all APD values
    - (C) E-4031 prolonged APD90 by ~30 % but did not trigger EADs at 1 Hz pacing

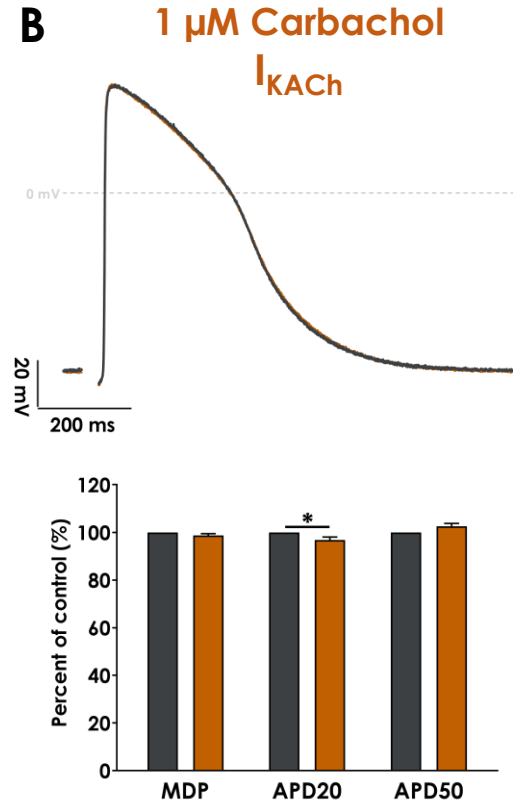
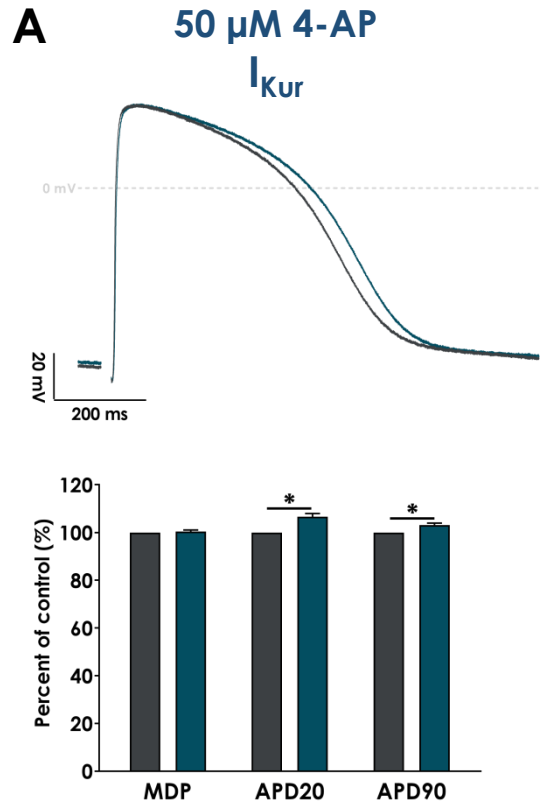
# Generation of arrhythmic events

- No early after-depolarisation (EAD) events were observed at 1 Hz pacing
- But, 100 nM E-4031 resulted in further prolongation and early after-depolarisation (EAD) events at lower pacing rates



- Confirms arrhythmic capability of Axol ventricular iPSC-CM

# Confirmation of predominantly ventricular phenotype



Pharmacological tools targeted against atrial specific currents show minimal effects

(A)  $I_{Kur}$

- Small effect (6 % prolongation) of 4-AP suggesting low level functional expression of  $K_v1.5$  channels
- $K_v1.5$  protein is expressed in the human ventricle, but no functional activity has been detected (Mays *et al.*, 1995 J Clin Invest)
- Common feature of the majority of human iPSC-CM tested at Metrion

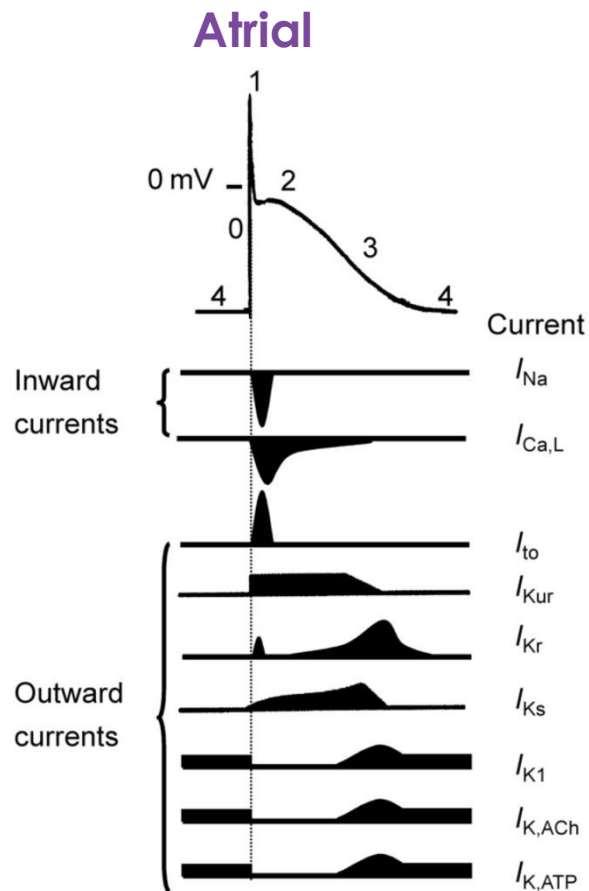
(B)  $I_{KACH}$

- Carbachol ( $I_{KACH}$  activator) is expected to shorten APD and hyperpolarise the membrane potential
- Carbachol resulted in a 3 % decrease of APD20

**Suggests majority of cells have a ventricular phenotype**

# Contents

1. Establishing Axol iPSC-CM as a model system
2. Electrophysiological validation of ventricular iPSC-CM
3. Electrophysiological validation of atrial iPSC-CM
4. Summary



## Applications of atrial iPSC-CM at Metrion

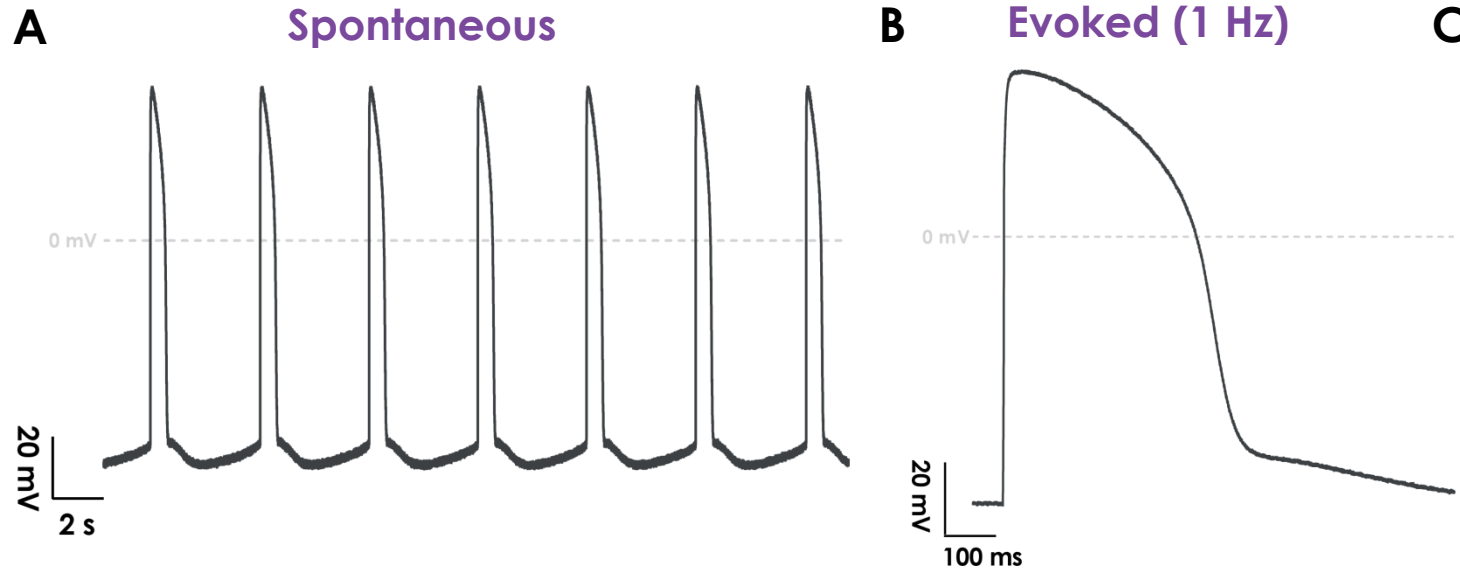
- Disease modelling – atrial fibrillation
- Profiling compound effects in a translational human model

## Aims of electrophysiological characterisation

1. Determine control properties of Axol atrial iPSC-CM
2. Confirm the functional expression of three core cardiac currents
  - $I_{Na}$  ( $Na_v1.5$ ),  $I_{Ca,L}$  ( $Ca_v1.2$ ), and  $I_{Kr}$  (hERG)
3. Confirm the presence of two chamber specific currents
  - $I_{K,ACh}$  ( $K_{ir}3.1/K_{ir}3.4$ ) and  $I_{Kur}$  ( $K_v1.5$ )

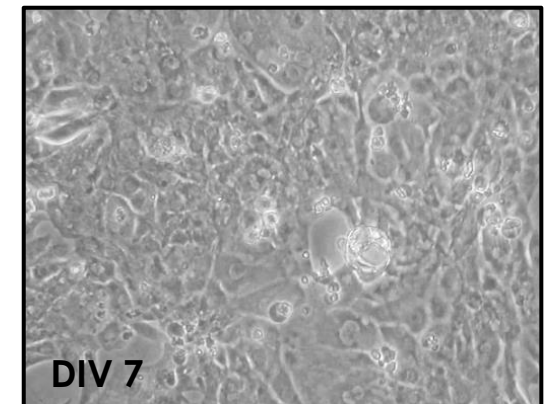
Europace. 2008;10(10):1133-1137

# Atrial action potential characteristics

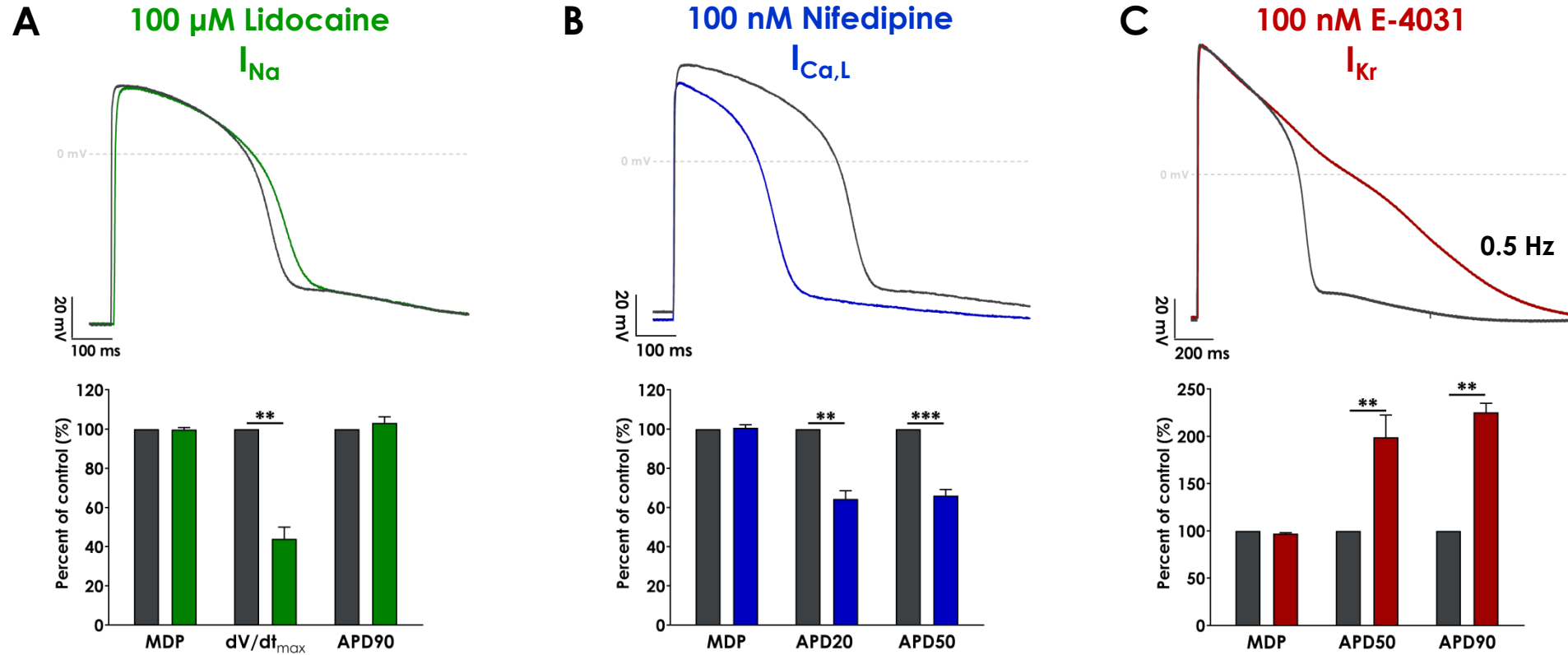


AP parameter	Spontaneous (N = 31)	Evoked 1 Hz (N = 28)
MDP (mV)	$-73.6 \pm 0.8$	$-73.0 \pm 0.9$
$dV/dt_{max}$ (V/s)	$44.6 \pm 3.4$	$30.9 \pm 3.8$
APA (mV)	$120.2 \pm 1.0$	$126.3 \pm 1.5$
APD20 (ms)	$252.4 \pm 6.3$	$235.2 \pm 5.6$
APD50 (ms)	$338.0 \pm 6.7$	$352.1 \pm 4.8$
APD90 (ms)	$419.0 \pm 7.0$	$468.7 \pm 11.4$
Frequency (Hz)	$0.28 \pm 0.01$	1

- Suitable for recording of spontaneous & evoked activity (0.5 – 2 Hz)
- Good maximum diastolic potential  $\sim -73$  mV
- Upstroke velocity of  $\sim 31$  V/s
- Consistent APD90  $\sim 470$  ms

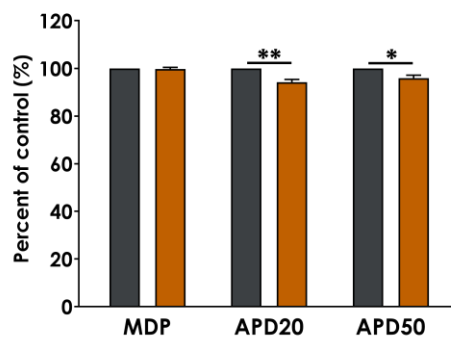
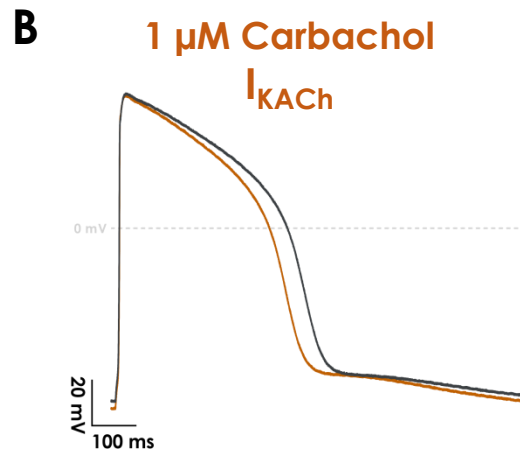
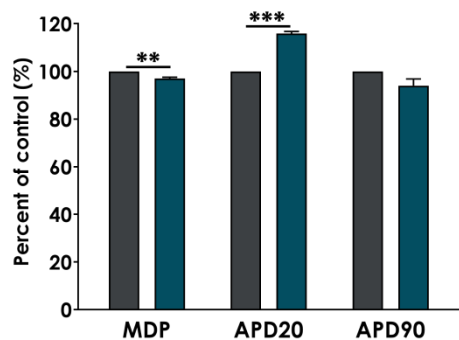
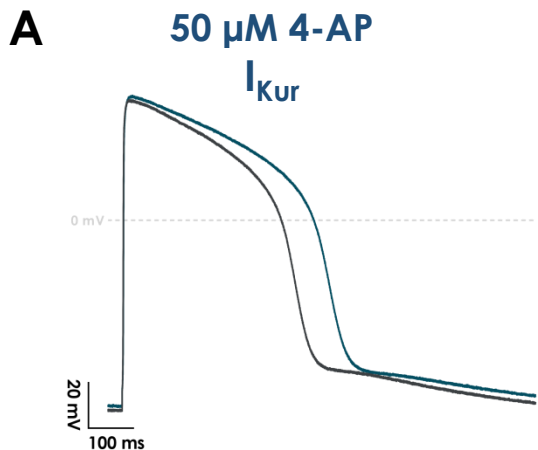


# Expression of core cardiac currents



- Confirmed functionality of core cardiac currents in Axol atrial iPSC-CM
  - Expected effects of three reference compounds on evoked action potentials
    - (A) Lidocaine slowed the upstroke velocity by ~50 %
    - (B) Nifedipine decreased all APD values
    - (C) E-4031 prolonged APD90 by ~125 % at 0.5 Hz pacing

# Confirmation of atrial phenotype



Pharmacological tools targeted against atrial specific currents showed significant effects

(A)  $I_{Kur}$

- 4-AP resulted in significant APD20 prolongation (14 %) suggesting functional expression of  $K_v1.5$  channels

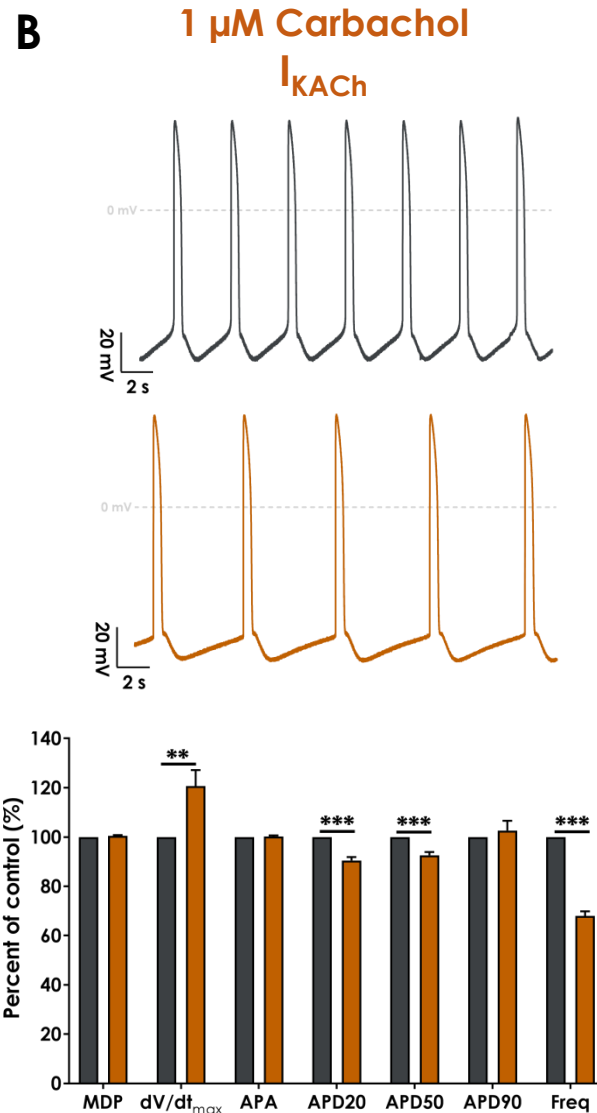
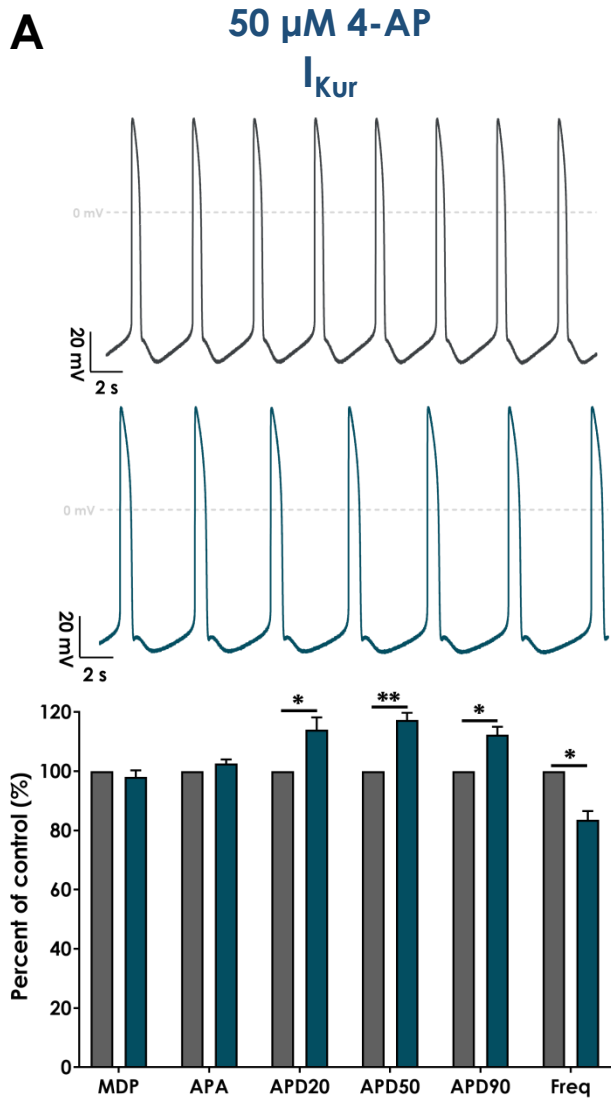
(B)  $I_{KACh}$

- Carbachol ( $I_{KACh}$  activator) is expected to shorten APD and hyperpolarise the membrane potential
- Carbachol resulted in a 6 % decrease of APD20

Suggests cells have an atrial phenotype



# Further confirmation of atrial phenotype



Further confirmation of atrial phenotype using spontaneous action potential recordings

**(A)  $I_{Kur}$**

- 4-AP resulted in characteristic prolongation of APD values
- ~15 % increase in APD20, 50 and 90
- Corresponding decrease in firing rate

**(B)  $I_{KACh}$**

- Carbachol resulted in characteristic negative chronotropic effects and shortening of APDs
- 32 % decreasing in firing rate
- ~10 % decrease in APD20 and 50

**Further suggests cells have a atrial phenotype**

# Contents

1. Establishing Axol iPSC-CM as a model system
2. Electrophysiological validation of ventricular iPSC-CM
3. Electrophysiological validation of atrial iPSC-CM
4. Summary

# Summary

- Axol iPSC-CM express functional ion channels which are key components of human cardiomyocyte action potentials
  - Both ventricular and atrial cells have functional  $I_{Na}$ ,  $I_{Ca,L}$ , and  $I_{Kr}$
- Chamber specific pharmacology was determined and this confirmed the ventricular and atrial phenotypes of each cell line
  - Atrial iPSC-CM show functional  $I_{KACH}$  and  $I_{kur}$
- Full characterisation of commercial human iPSC-CM allows Metrion to provide a range of validated assays
  - Proarrhythmic risk assessment as part of our integrated range of CiPA-ready assays
  - Profiling of compound effects in a translational human system
  - Characterisation of human iPSC-CM cell lines

# Acknowledgments

- Metrion Biosciences

- Saïd El-Haou
- John Ridley
- Louise Webdale
- Kathy Sutton
- Robert Kirby



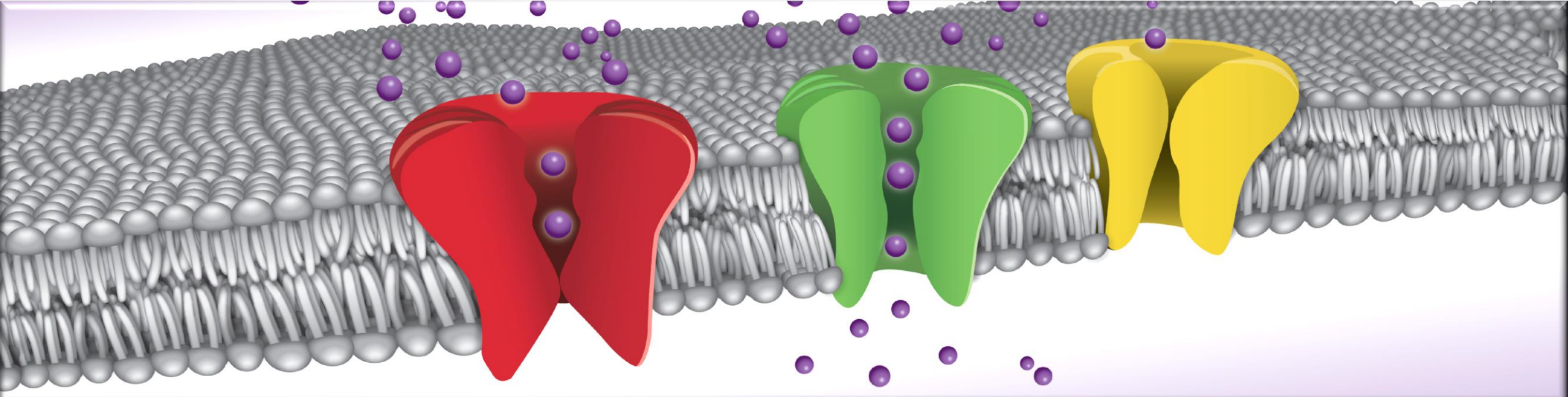
- Axol Biosciences

- Zoe Nilsson
- Yichen Shi



- This project received funding from the Eurostars-2 joint program with co-funding from the European Union Horizon 2010 research and innovation program





# Metrion Biosciences: the ion channel specialists

**For enquiries please contact:**  
[info@metrionbiosciences.com](mailto:info@metrionbiosciences.com)

