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Background

- Persistent sodium current (I_{Na}) is a subthreshold depolarizing current that contributes to the amplification of synaptic activity and enhancement of repetitive firing in neurons. 1,2
- Gain of function (GOF) pathogenic mutations in voltage-gated sodium (Na_V) channel genes can
- increase persistent I_{Na}, leading to neuronal hyperexcitability and severe epilepsies.³⁻⁸
- PRAX-628 is a next generation functionally selective small molecule targeting the hyperexcitable state of sodium channels in the brain, currently in development as a best-in-class treatment for adult focal epilepsy. S
- We have previously shown PRAX-628 potently inhibits persistent I_{Na} with greater activity/use dependent block compared to standard of care anti-seizure medications (ASMs), carbamazepine and lamotrigine.

Objective

To define the in vivo efficacy profile of PRAX-628 in mice, relative to standard of care ASMs.

Methods

Acute seizure models

- Wildtype male CD-1 mice were used for maximal electroshock seizure (MES), 6-Hz and subcutaneous pentylenetetrazole (scPTZ) acute seizure experiments.
- Mice were administered either vehicle or PRAX-628 by oral gavage 30 min prior to the electrical stimulus or
- Electroshocks (50 Hz, 0.8 s, 10 ms square pulse width, 50 mA or 6 Hz, 3 s, 0.2 ms rectangular pulse width, 32 mA) were delivered for MES and 6-Hz experiments, respectively.
- Mice were observed for the presence or absence of full tonic hindlimb extension (MES), or psychomotor seizures defined as stun/immobility, forelimb clonus, Straub tail and lateral head movement (6-Hz).
- PTZ (85 mg/kg) was administered as a subcutaneous injection and mice were observed for the presence or absence of generalized clonic seizure.
- PRAX-628 concentration in terminal plasma and brain samples was measured using mass spectrometry.
- For ASM comparator experiments, vehicle or test article were administered prior to electrical stimulus.
- Pre-treatment times: carbamazepine (30 min), cenobamate (4 h), lamotrigine (60 min), XEN1101 (60 min).

In Vitro Pharmacology Profile

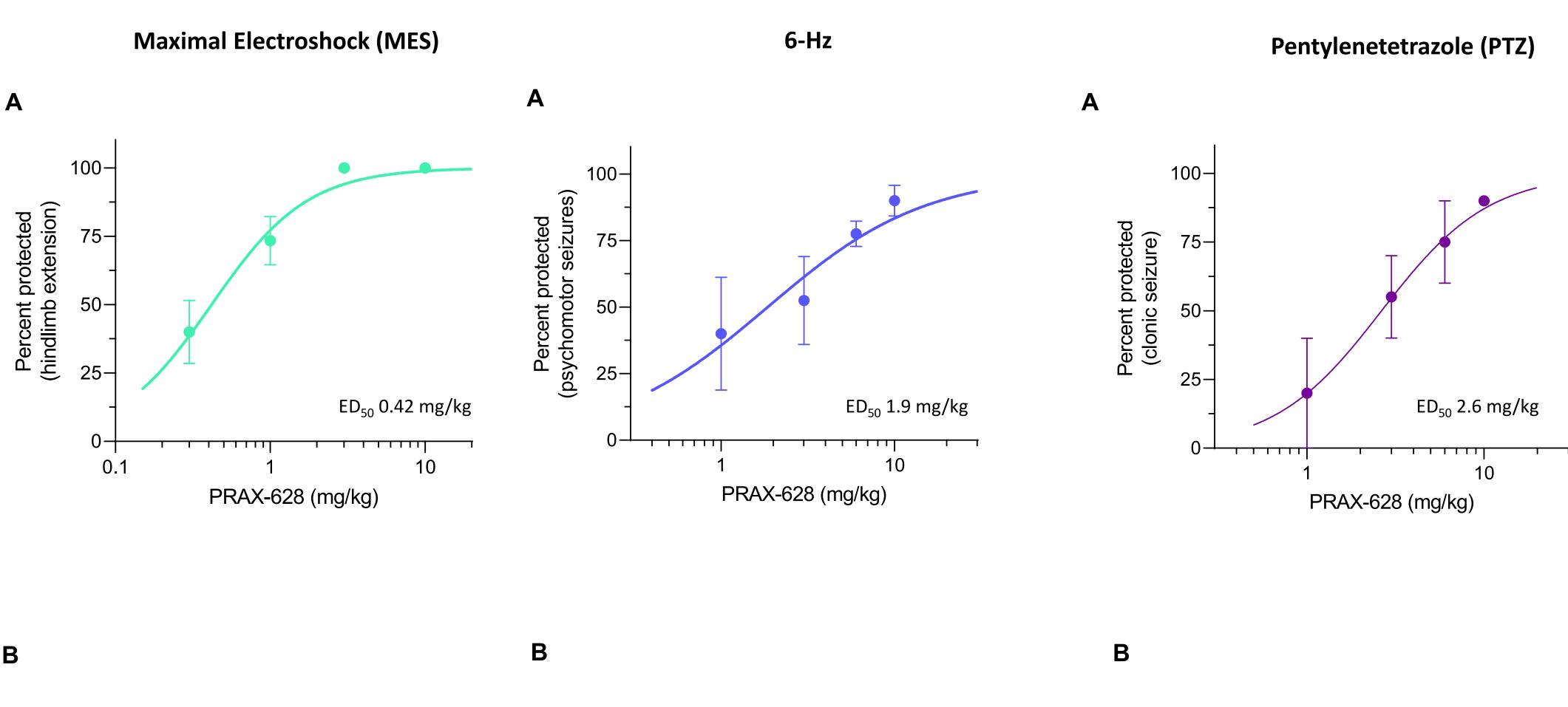
Table 1. PRAX-628 demonstrates greater potency and activity dependance for peak I_{Na} compared with a panel of standard-of-care Na_V-targeting ASMs

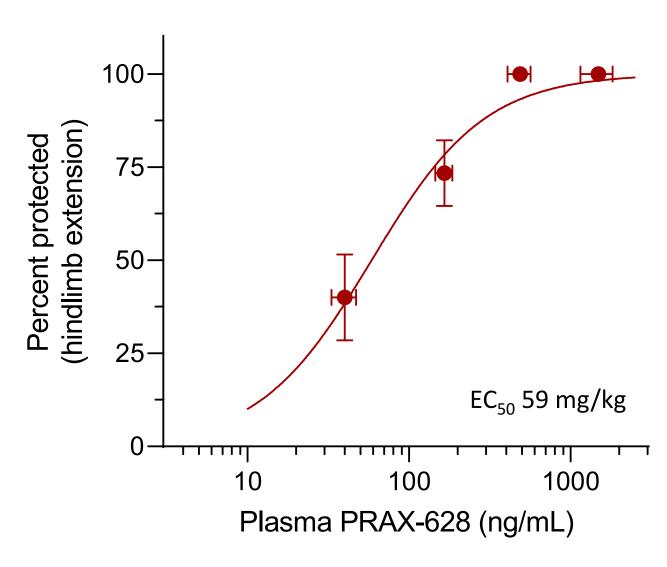
IC _{so} , nM (Slope)	Persistent I _{Na}	Peak I _{Na} TB	Ratio to Pers. I _{Na}	Peak I _№ UDB-10Hz	Ratio to Pers. I _№	Peak I _{Na} VDB	Ratio to Pers. I _№
PRAX-628	128 (1.4)	8,707 (1.0)	68	200 (0.7) Max 100%	1.6	72 (1.0)	0.56
Cenobamate	71,690 (1.1)	1,719,000 (1.1)	24	749,300 (0.7)	11	66,710 (0.9)	0.9
Phenytoin	59,820 (0.8)	n/a**		876,600 (0.6)	15	47,780 (1.0)	0.8
Carbamazepine	77,490 (1.1)	2,307,000 (1.0)	30	1,418,000 (0.9)	18	44,370 (0.9)	0.6
Oxcarbazepine	123,700 (1.0)	1,035,000 (1.7)	8	n.d.		42,000 (1.1)	0.3
Lamotrigine	78,480 (1.0)	1,249,000 (0.8)	16	515,800 (1.0)	6.6	39,090 (0.9)	0.5
Lacosamide	832,700 (0.9)	n/a**		682,200 (1.3)	0.8	269,300 (1.2)	0.3
Valproic acid	2% @ 1 mM	11% @ 1 mM		8% @ 1 mM		18% @ 1 mM	

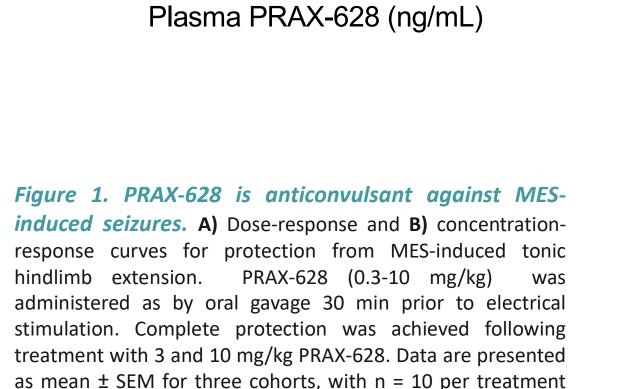
Data are IC_{50} (nM) with the hill slope in parenthesis. **could not be determined due to compound solubility limit n.d.=not determined: Pers.=persistent; TB=tonic block; UDB=use-dependent block; VDB=voltage-dependent block

PRAX-628 has Potent Anticonvulsant Activity Across Multiple Acute Seizure Models

- PRAX-628 (3 and 10 mg/kg) completely protected wildtype mice from tonic hindlimb extension induced by MES.
- PRAX-628 significantly reduced incidence of psychomotor seizures induced by 6-Hz.
- PRAX-628 significantly reduced incidence of clonic seizures induced by PTZ.



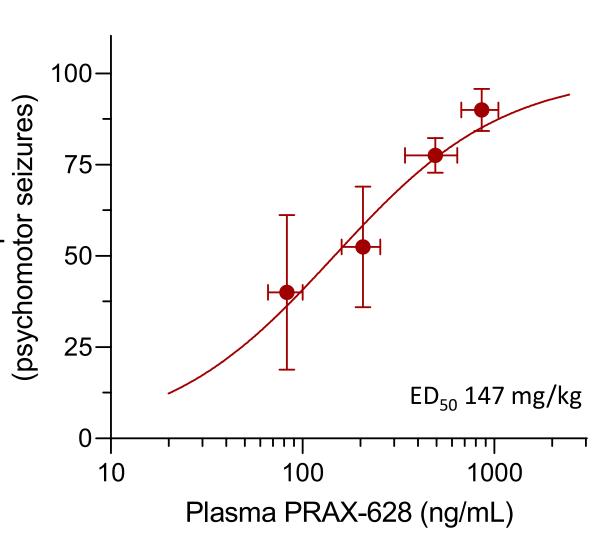


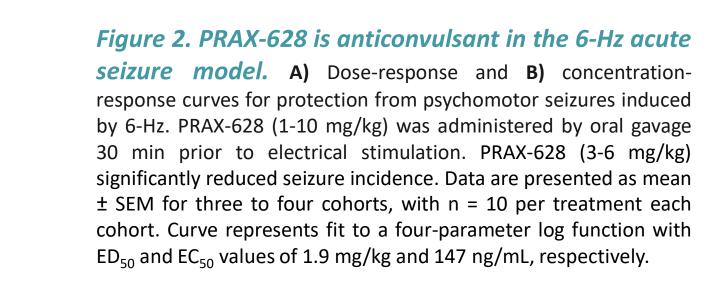


each cohort. Curve represents fit to a four-parameter log

function with ED₅₀ and EC₅₀ values of 0.42 mg/kg and 59

ng/mL, respectively.





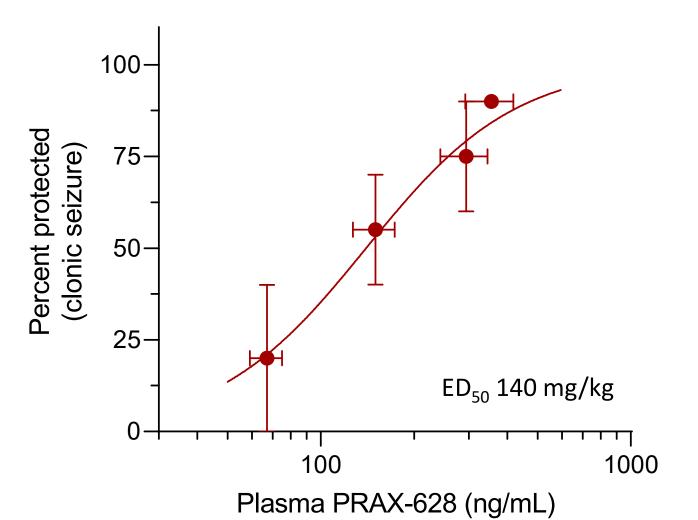
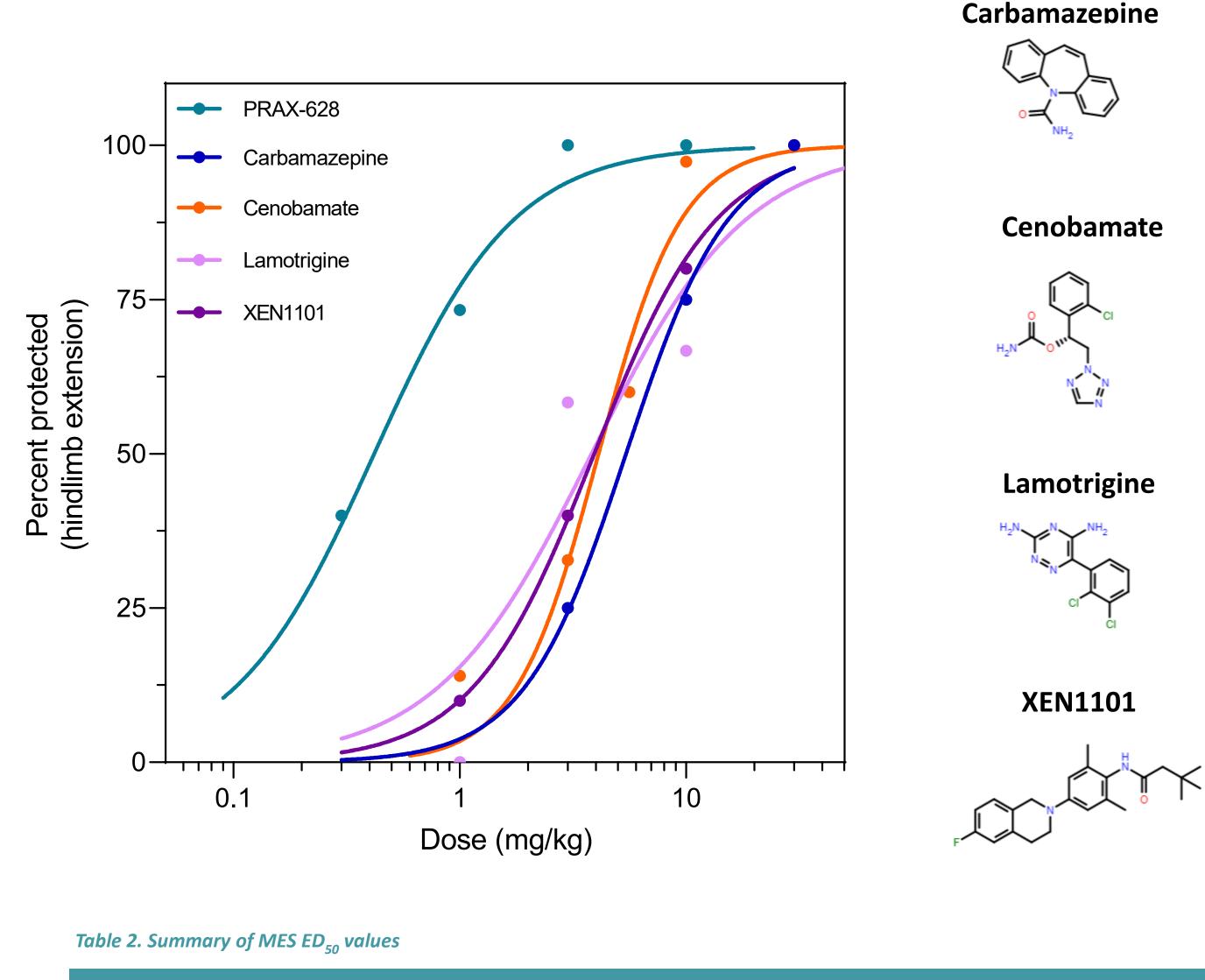


Figure 3. PRAX-628 is anticonvulsant in the scPTZ acute seizure model. A) Dose-response and B) concentrationresponse curves for protection from clonic seizures induced by PTZ (85 mg/kg, s.c.). PRAX-628 (1-10 mg/kg) was administered by oral gavage 30 min prior to PTZ administration. PRAX-628 (3-10 mg/kg) significantly reduced seizure incidence. Data are presented as mean \pm SEM for two cohorts, with n = 10 per treatment each cohort. Curve represents fit to a four-parameter log function with ED₅₀ and EC₅₀ values of 2.6 mg/kg and 140 ng/mL, respectively.

PRAX-628 is Active at Lower Doses Compared to Standard **ASMs in MES Acute Seizure Model**

• The ED₅₀ value for PRAX-628 (0.42 mg/kg) is approximately ten times lower than that of carbamazepine, cenobamate, lamotrigine and XEN1101 (range 3.8-5.4 mg/kg).



	PRAX-628	Carbamazepine	Cenobamate	Lamotrigine	XEN1101
ED ₅₀ values (mg/kg)	0.42	5.4	4.1	3.8	3.9

Figure 4. PRAX-628 is anticonvulsant at lower doses than standard ASMs in the MES acute seizure model. Dose-response curves for protection from MES-induced tonic hindlimb extension for PRAX-628, carbamazepine, cenobamate, lamotrigine and XEN1101. Curves represent fits to a fourparameter log function and ED_{50} values are presented in **Table 2**. Error bars removed for clarity.

Conclusions

- PRAX-628 exhibited potent anticonvulsant activity in multiple acute seizure models
- PRAX-628 exhibited anticonvulsant activity at lower doses compared to standard of care ASMs in the MES acute seizure model
- Notably, first-in-human findings (poster P292) demonstrate PRAX-628 is well-tolerated at concentrations >15x the mouse MES EC_{50} ; with dose levels resulting in markedly higher multiples of MES EC_{50} than cenobamate and XEN1101 shown to be well tolerated.

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- **Disclosures** All authors are current or former employees/consultants of Praxis Precision Medicines and may be Praxis stockholders.

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