

RESEARCH PAPER

Flavan-3-ol esters: new agents for exploring modulatory sites on GABAA **receptors**

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BACKGROUND AND PURPOSE

Enhancement of GABAergic function is the primary mechanism of important therapeutic agents such as benzodiazepines, barbiturates, neurosteroids, general anaesthetics and some anticonvulsants. Despite their chemical diversity, many studies have postulated that these agents may bind at a common or overlapping binding site, or share an activation domain. Similarly, we found that flavan-3-ol esters act as positive modulators of GABAA receptors, and noted that this action resembled the *in vitro* profile of general anaesthetics. In this study we further investigated the interactions between these agents.

EXPERIMENTAL APPROACH

Using two-electrode voltage clamp electrophysiological recordings on receptors of known subunit composition expressed in *Xenopus* oocytes, we evaluated positive modulation by etomidate, loreclezole, diazepam, thiopentone, 5a-pregnan-3a-ol-20 one (THP) and the flavan-3-ol ester 2S,3R-*trans* 3-acetoxy-4′-methoxyflavan (Fa131) on wild-type and mutated GABAA receptors.

KEY RESULTS

The newly identified flavan, 2*S*,3*S*-*cis* 3-acetoxy-3′,4′-dimethoxyflavan (Fa173), antagonized the potentiating actions of Fa131, etomidate and loreclezole at α 1 β 2 and α 1 β 2 γ 2L GABA_A receptors. Furthermore, Fa173 blocked the potentiation of GABA responses by high, but not low, concentrations of diazepam, but did not block the potentiation induced by propofol, the neurosteroid THP or the barbiturate thiopental. Mutational studies on 'anaesthetic-influencing' residues showed that, compared with wild-type GABA_A receptors, α 1M236WB2y2L and α 1B2N265Sy2L receptors are resistant to potentiation by etomidate, loreclezole and Fa131.

CONCLUSIONS AND IMPLICATIONS

Fa173 is a selective antagonist that can be used for allosteric modulation of GABAA receptors. Flavan-3-ol derivatives are potential ligands for etomidate/loreclezole-related binding sites at GABAA receptors and the low-affinity effects of diazepam are mediated via the same site.

Abbreviations

DMSO, dimethyl sulphoxide; Fa131, 2S,3R-*trans* 3-acetoxy-4′-methoxyflavan; Fa173, 2*S*,3*S*-*cis* 3-acetoxy-3′,4′ dimethoxyflavan; LGIC, ligand-gated ion channel; THP, 5a-pregnan-3a-ol-20-one; TM, transmembrane

Introduction

GABA type A $(GABA_A)$ receptors are ligand-gated chloride channels consisting of a heteropentameric assembly of proteins derived from a family of 19 genes, namely α 1–6, β 1–3, g1–3, d, p, e, q and r1–3 (Simon *et al*., 2004). Common topography of these subunits is a large extracellular amino-terminal domain, four transmembrane segments (TM1–TM4) and a long intracellular domain between TM3 and TM4. The chloride channel is delimited by the second transmembrane domain of each of the five subunits, with the large extracellular domain constituting the agonist/antagonist orthosteric binding sites (McKernan and Whiting, 1996; Miller and Smart, 2010). In addition, the receptor contains a variety of allosteric sites that can modulate its function by altering the energy barrier required for conformational changes in the chloride channel (Johnston, 2005). Many important therapeutic agents such as benzodiazepines, barbiturates, loreclezole, and general anaesthetics like etomidate and propofol bind to these allosteric sites to produce an enhancement of GABAA receptor function.

Functional GABAA channels require the presence of α and β subunits, but the vast majority of naturally expressed receptors also contain a γ subunit (McKernan and Whiting, 1996). Interestingly, agents such as barbiturates, neurosteroids, loreclezole and etomidate can positively modulate $\alpha\beta$ type receptors, suggesting that their corresponding binding sites lie within one of these subunits, or their interface (Malherbe *et al*., 1990; Thompson *et al*., 1996; Rudolph and Antkowiak, 2004; Belelli and Lambert, 2005). Furthermore, while the presence of a γ subunit is necessary for high-affinity modulation by benzodiazepine ligands, later studies proved that these drugs can also exert low-affinity (μ M) modulation of $\alpha\beta$ GABAA receptors (Stevenson *et al*., 1995; Walters *et al*., 2000). Although much evidence suggests the presence of discrete binding sites for these agents, many reports also suggested a common mechanism or overlapping sites. For example, mutational studies have identified a glycine at position 219 on the second transmembrane domain of the β 2 subunit as fundamental for anaesthetic modulation of GABA currents (Chang *et al*., 2003). These authors found a linear correlation between the volume of the amino acid at this position and the loss of modulation by etomidate, propofol, pentobarbital and alphaxalone. Similarly, modulation by etomidate, propofol and loreclezole can be greatly reduced when the N265 residue at β -TM2 is replaced by serine, indicating a common mechanism. This position, however, seems to have little influence on the modulation by barbiturates and neurosteriods (Wingrove *et al*., 1994; Belelli *et al*., 1997; 1999; Siegwart *et al*., 2003; Desai *et al*., 2009). Also, several mutational studies at M286 on b-TM3 demonstrated its relevance for both propofol and etomidate modulatory activity, although modulation by loreclezole, neurosteroids and barbiturates remained unaffected (Krasowski *et al*., 1998; Siegwart *et al*., 2003).

Similarly, the contribution of the α subunit to anaesthetic action has been examined by site-directed mutagenesis. For example, Drafts and Fisher (2006) found that the mutation T69K in a6 subunit reduced both pentobarbital and etomidate agonist action, and mutations in α -TM1 alter sensitivity to neurosteroids (Hosie *et al*., 2006; Akk *et al*., 2008). Li and

colleagues (2006) utilized a radiolabelled photoreactive etomidate analogue to identify residues involved in the binding of etomidate. Their results pointed not only at the previously mentioned M286 in β 2-TM3, but also at M236 in α 1-TM1 (and the homologous methionines in α 2,3,5), an amino acid not previously implicated in the binding of this anaesthetic. Later functional studies revealed that substitution of this residue by a bulky amino acid such as tryptophan significantly reduces the modulation elicited by etomidate, but not by alphaxalone or pentobarbital (Stewart *et al*., 2008).

Studies involving site-directed mutagenesis intrinsically carry the paradox of whether the mutated residue being studied is directly involved in ligand–protein interactions, or is involved in the allosteric changes taking place as a consequence of the binding process, making the results difficult to interpret. Whereas the use of techniques such as photoaffinity labelling, radioligand binding competition or the simple use of specific antagonists may provide a deeper insight into unravelling the mysteries of these potentially overlapping binding sites. We have previously described a series of flavan-3-ol derivatives as positive modulators of GABAA receptors (Fernandez *et al*., 2008; Mewett *et al*., 2009). The derivative 2S,3R-*trans* 3-acetoxy-4′-methoxyflavan (Fa131) demonstrated positive allosteric properties over a range of GABA_A subunit combinations, and in particular had a higher efficacy at α 2-containing GABA_A receptors. We noted at the time that the mode of action of Fa131 resembled that of other GABAA modulators such as neurosteroids, barbiturates and anaesthetics such as etomidate. In this present study, we carried out mutational studies on 'anaesthetic-influencing' residues to test their role in flavan-elicited modulation of GABAA receptors. Furthermore, we discovered a new flavan derivative, namely 2*S*,3*S*-*cis* 3-acetoxy-3′,4′-dimethoxyflavan (Fa173), featuring antagonist properties. Fa173 is the first reported ligand to inhibit the modulation of GABA by etomidate, loreclezole, diazepam and flavans, but not thiopentone or 5α -pregnan-3 α -ol-20-one (THP), indicating that these drugs may share a common binding pocket or activation domain.

Methods

DNA constructs and ligands

cDNA for human α 1, β 2 and γ 2L GABA_A receptor subunits subcloned into pCDM8 were provided by Dr Paul Whiting (Merck, Sharpe and Dohme Research Labs, Harlow, UK). The protocol for *in vitro* transcription of cRNA has been described previously (Hall *et al*., 2005). Briefly, cDNA vectors were linearized with the appropriate restriction endonucleases and capped transcripts were produced from linearized plasmids using the mMessage mMachine T7 transcription kit (Ambion, Austin, TX, USA). cRNA was diluted and stored in diethylpyrocarbonate-treated water at -80°C until use. Sitespecific mutations were introduced into the cDNAs of the GABAA receptor subunits using QuikChange site-directed mutagenesis kit (Stratagene, La Jolla, CA, USA). Mutagenic oligonucleotides used were $(5'$ to 3 $')$: β 2N265S, ACAATCAG CACCCACCTCAGGGAAAC; a1M236A, CCTGCCGTGCATA GCGACAGTTATTCTC; a1M236W, CCTGCCGTGCATATGG ACAGTTATTCTC. Mutant clones were submitted to complete

Molecular structure of the compounds utilized in the study.

sequencing to corroborate the successful incorporation of the point mutation and absence of spurious mutations.

Fa131 and Fa173 >99% purity (Figure 1) were synthesized in our laboratories as previously described (Mewett *et al*., 2009). Diazepam was purchased from Apin Chemicals Ltd. (Oxon, UK), sodium thiopental was from Jurox (Rutherford, NSW, Australia), loreclezole and etomidate [(*R*)-1-(1 phenylethyl)-1H-imidazole-5-carboxylic acid ethyl ester] were from Tocris (Ellisville, MO, USA). Propofol was purchased from Sigma-Aldrich (St Louis, MO, USA). THP $((3\alpha,5\beta)-3$ -hydroxy-pregnan-20-one) was kindly provided by Dr Peter Burden, Department of Pharmacology, University of Sydney.

Two-electrode voltage-clamp recordings from Xenopus *oocytes*

Recombinant receptors were expressed in *Xenopus laevis* oocytes; the nomenclature used to identify these receptor types conform to the *British Journal of Pharmacology's Guide to Receptors and Channels* (Alexander *et al*., 2011). The procedure for the harvesting and enzymatic separation of *Xenopus laevis* oocytes was identical to that described previously (Hall *et al*., 2005; Fernandez *et al*., 2008) and was approved by the Animal Ethics Committee of the University of Sydney. Briefly, female *X. laevis* were anaesthetized by immersion in 0.17% 3-aminobenzoic acid ethyl ester with 0.02% NaCl for 10–15 min, and a lobe of the ovaries was surgically removed. The lobe was rinsed with oocyte releasing buffer 2 (OR2; 82.5 mM NaCl, 2 mM KCl, 1 mM MgCl₂.6H₂O, 5 mM HEPES, pH 7.5) and treated with collagenase A $(2 \text{ mg} \cdot \text{mL}^{-1} \text{ in OR2})$ Boehringer Manheim, Germany) for 2 h to separate oocytes

from connective tissue and follicular cells. Released oocytes were rinsed in ND96 wash solution (96 mM NaCl, 2 mM KCl, $1 \text{ mM } MgCl_2.6H_2O$, $1.8 \text{ mM } CaCl_2$, $5 \text{ mM } HEPES$, pH 7.5). Stage V–VI oocytes were injected (Nanoject, Drummond Scientific Co., Broomall, PA, USA) with a total of 3–5 ng of cRNA. When expressing receptors containing a γ subunit, a 1:1:2 ratio of α : β : γ subunits was used. After the injection, oocytes were incubated at 16°C in ND96 storage solution (96 mM NaCl, 2 mM KCl, 1 mM $MgCl₂$, 1.8 mM $CaCl₂$, 5 mM HEPES, pH 7.5, supplemented with 2.5 mM pyruvate, 0.5 mM theophylline and 50 μ g·mL⁻¹ gentamycin) for 2 days before use in electrophysiological studies.

Currents were recorded using the two-electrode voltage clamp technique as previously described (Walters *et al*., 2000; Hall *et al*., 2005). Oocytes were individually placed in a 100 µL chamber connected to a reservoir bottle containing ND96 solution (96 mM NaCl, 2 mM KCl, 1 mM MgCl₂, 1.8 mM CaCl₂, 5 mM HEPES, pH 7.5). Glass microelectrodes were made using a micropipette puller (Narishige Scientific Instrument Laboratory, Tokyo, Japan) and filled with 3 M KCl (0.5–2 M Ω). The oocytes were impaled and the membrane potential was clamped at -60 mV while continuously superfused with ND96 solution (10 mL-min^{-1}) . Stock solutions of the drugs were prepared in dimethyl sulphoxide (DMSO), except for GABA and sodium thiopental where distilled water was used, and applied into the perfusate until a peak response was reached. DMSO concentration in the perfusate was 0.6% and did not produce any alteration in the recording. Voltage clamp experiments were conducted using a Geneclamp 500 amplifier (Axon Instruments Inc., Foster City, CA, USA). Current amplitudes were calculated off-line using Chart software v3.6 (ADInstruments, NSW, Australia).

Responses to GABA applications were normalized as *I*% = (I/I_{max}) , where *I* is the peak amplitude of current response and *I*max is the maximal current produced by GABA measured in each individual cell. Modulation of GABA-elicited currents was tested by co-applying increasing concentrations of the drugs with a concentration of GABA that produced 3% of maximal activation (EC₃, determined for each cell). Current responses were recorded and normalized as: fractional potentiation = $(I_{\text{drug}} - I_{\text{GABA}}) / I_{\text{GABA}}$, where I_{drug} is the current in the presence of a given concentration of drug, and *I*_{GABA} is the amplitude of the control GABA current. Finally, experiments involving the antagonist Fa173 were conducted by co-applying GABA EC₃, the positive modulator at a concentration that produced 50% its maximal effect ($EC₅₀$, determined for each cell), and increasing concentrations of Fa173. Data were normalized according to the equation: % inhibition: $100 \times (I_{\text{mod}} - I_{\text{anta}}) / (I_{\text{mod}} - I_{\text{GABA}})$, where I_{anta} is the response in the presence of Fa173, *I*_{GABA} is the response to GABA alone and *I*_{mod} is the response to GABA plus positive modulator. In all cases, a 3–5 min washout period was allowed between drug applications to avoid receptor desensitization. Normalized responses were pooled and graphed as mean \pm SEM from at least two different batches of injected oocytes. Responses were fitted to the four-parameter logistic equation: *I* = *I*max / $(1 + (EC₅₀ / [A])^{nH})$, where I is the peak amplitude of the current elicited by a given concentration of agonist [A], Imax is the maximum amplitude of the current, EC_{50} is the concentration required for half-maximal response, and n_H is the Hill coefficient (Prism v5 GraphPad Software, San Diego, CA,

Table 1

Estimated parameters from best-fit to four-parameter logistic equation for GABA activation and positive modulation by Fa131, etomidate, loreclezole, thiopental to wild-type and mutated GABAA receptors

P* < 0.05; *P* < 0.01; ****P* < 0.001; significantly different compared to value at corresponding wild-type receptor.

a Note that the normalization method differs between GABA-alone dose-response curves and potentiation by positive modulators.

USA). Best-fit parameters were first compared by extra-sumof-squares *F*-test to detect whether an estimated parameter differs among data sets. Individual differences between bestfit values were detected by non-overlapping confidence intervals. All data analyses were conducted using Prism v5 and a *P* value lower than 0.05 was considered of statistical significance.

Results

Mutational analysis of β2-N265 and a*1-M236*

The co-injection of mRNA encoding point-mutated subunits of the GABA receptor type A resulted in functional GABAactivated channels. The potency of GABA to activate α 1 β 2N265S γ 2L receptors was slightly lower compared with wild-type, but this change was not statistically significant (Table 1). Conversely, receptors containing a tryptophan point mutation on methionine 236 (α 1M236Wβ2γ2L) were more sensitive to GABA activation as revealed by a significantly lower EC_{50} (Table 1). Interestingly, when the same residue was substituted by an alanine, which is much smaller in size, no significant changes in GABA activation were observed (Table 1). To test for spontaneous channel opening, we applied picrotoxin alone at 1 mM concentration to all receptor types. Interestingly, only α 1M236W β 2 γ 2L receptors showed an upward change in baseline, representing about 3–6% of maximal GABA-induced activation (data not shown).

The flavan-3-ol derivative Fa131 potentiated GABAelicited currents at both α 1 β 2 γ 2L and α 1 β 2 wild-type GABA_A receptors expressed in *Xenopus* oocytes. Similarly, the anaesthetic etomidate and the anticonvulsant loreclezole elicited a positive modulatory action on these receptor types in a way resembling the effect of Fa131. Corresponding EC_{50} values for the modulation of GABA currents at both receptor subtypes were in the low micromolar range for all three drugs, and corresponding concentration-response curves presented high Hill coefficient values.

Potentiation of GABA current responses by Fa131 (A) and etomidate (B) and loreclezole (C) at α 1 β 2 γ 2L, α 1 β 2N265S γ 2L, α 1M236W β 2 γ 2L and a1M236Ab2g2L GABAA receptors expressed in *Xenopus* oocytes. Left panels show currents traces (nA vs. min) illustrating the enhancing effects of these drugs at different receptor types. Horizontal bars represent drug application. GABA alone corresponds to EC₃, determined for each oocyte expressing each subunit combination, and was approximately 5 μ M (α 1 β 2 γ 2L), 7 μ M (α 1 β 2N265S γ 2L), 0.2 μ M (α 1M236W β 2 γ 2L) and 3 μ M $(\alpha1M236A\beta2\gamma2L)$. Current traces shown correspond to 10 μ M Fa131, 3 μ M etomidate and 10 μ M loreclezole application. Right panels are full concentration-response curves for the potentiating effects of these drugs on GABA-elicited currents, at each receptor subtype. Data points represent mean \pm SEM (n \geq 4) of peak current response normalized as described in Methods. Data were fitted using four-parameter logistic equation and the best-estimated values for each parameter are detailed in Table 1.

Point mutation of the 265 serine residue on β 2-TM2 proved to form functional channels that exhibited a substantial resistance to the modulatory action of Fa131. Representative current traces depicting this effect are shown in Figure 2A, where the potentiating action of Fa131 (10 μ M) is shown at different receptor subunit combinations. Fa131 can potentiate the GABA EC₃ 10 times at this concentration at α 1 β 2 γ 2L wild-type GABA_A receptors; however, this enhancement was reduced to three times at α 1 β 2N265S γ 2L. Full

concentration-response curves are shown in Figure 2A right panel. The Fa131 EC₅₀ was shifted from 9.7 to 18.1 μ M, while the maximal potentiation was reduced to half, compared with wild-type, both effects reaching statistical significance (Table 1). Similarly, the methionine-to-tryptophan substitution at position 236 in α 1-TM1 had drastic, but unequal effects on the potentiation induced by this drug. A concentration of $10 \mu M$ Fa131 only potentiated GABA currents five times in this case (Figure 2A), and while the EC_{50} was slightly

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shifted to the left $(4.6 \mu M)$, the maximal enhancement was significantly lowered from 14.7 to 7 times the GABA $EC₃$ (Figure 2A and Table 1). Finally, replacing this same residue by an alanine induced no significant changes in the modulatory action of Fa131 over GABA-elicited currents (Table 1).

In oocytes expressing wild-type α 1 β 2 γ 2L GABA_A receptors, etomidate induced a significant potentiating effect, enhancing GABA EC₃ more than 20 times at 3μ M (Figure 2B). Both N265S in β 2-TM2 and M236W in α 1-TM1 mutations substantially impaired the etomidate modulatory action, with $3 \mu M$ etomidate having virtually no effect on α 1 β 2N265S γ 2L receptors, and only enhancing GABA currents two times at α 1M236Wβ2 γ 2L (Figure 2B). Concentration-response curves for etomidate at both mutated receptors were significantly shifted to the right (Figure 2B right panel). Changes in potency were characterized by a significant increase in etomidate EC_{50} from 3.2 µM at wild-type receptors to 22.0 and 14.2 μM at α1β2N265S $γ$ 2L and α1M236Wβ2γ2L receptors, respectively (Table 1). Similarly, maximal potentiation induced by this drug was significantly lowered from 28.9 times the GABA $EC₃$ response at wild-type receptors, to approximately 18 times at each of the mutated receptors (Table 1). However, mutation M236A at α 1-TM1 presented no significant changes on etomidate-induced potentiation (Figure 2B, Table 1).

The anticonvulsant loreclezole also potentiates the GABA response at wild-type α 1 β 2 γ 2L GABA_A receptors expressed in Xenopus oocytes; 10 µM loreclezole induced a clear enhancement of GABA currents (six times the GABA $EC₃$) as depicted in current traces shown in Figure 2C. The point-mutation N265S at β 2 completely abolished the potentiation by 10 µM loreclezole (Figure 2C), and produced a significant shift-tothe-right in its concentration-response curve (Figure 2C right panel). Consequently, the EC_{50} for this drug increased from 9.8 μ M at wild-type receptors to 24.0 μ M at α 1 β 2N265S γ 2L receptors, while the maximal effect achieved decreased from 9.5- to 3-fold potentiation (Table 1). In contrast, the mutation M236W at α 1-TM1 had less pronounced effects on loreclezole potentiation; $10 \mu M$ loreclezole potentiated the corresponding GABA EC₃ by three times at α 1M236Wβ2γ2L receptors, compared with the sixfold potentiation in wildtype receptors (Figure 2C). The concentration-response curves for loreclezole presented a similar EC_{50} value at both receptor subtypes, while the maximal potentiation significantly decreased from 9.5 times to 6.1 times at α 1M236W β 2 γ 2L receptors (Table 1). As seen with Fa131 and etomidate, mutation of the methionine 236 at α 1-TM1 to an alanine did not affect the modulatory action of loreclezole (Figure 2C, Table 1).

Fa173 is a neutral modulator and antagonizes the modulatory action of flavans

The flavan analogue Fa173 (100 μ M) was inactive when applied in the absence of GABA and showed no significant modulatory effects on GABA-elicited (EC_{3-5} and EC_{max}) currents at a1b2 or a1b2g2L receptors expressed in *Xenopus* oocytes. Current traces shown in Figure 3A illustrate the lack of significant effects of Fa173 (1-300 μ M) over corresponding GABA $EC₃$ concentrations at these two receptor subunit combinations. Only at very high concentrations, 100 and

Figure 3

Co-application of GABA and the flavan derivative Fa173 at both α 1 β 2 and α1β2γ2L GABA_A receptors expressed in *Xenopus* oocytes. (A) Current traces illustrating the effect that Fa173 exerts over GABAelicited currents. Only at very high concentrations Fa173 weakly potentiated GABA responses at both receptor subtypes. GABA applications were 1 μ M and 5 μ M, at α 1 β 2 and at α 1 β 2 γ 2L, respectively, equivalent to their corresponding EC₃. Horizontal bars represent drug application. (B) Histograms depict the percentage of current potentiation over the current response elicited by GABA alone. Columns represent mean \pm SEM peak current response ($n = 6$).

300 μ M, some weak potentiation of GABA EC₃ was evident. This effect reached approximately 20% enhancement over the corresponding GABA-elicited current response (Figure 3B).

In turn, Fa173 was able to dose-dependently reduce the potentiation of GABA currents induced by Fa131 at both α 1 β 2 γ 2L and α 1 β 2 GABA_A receptors (Figure 4A,B respectively). For these experiments, we selected a low concentration of GABA (EC_3) , and combined it with a concentration of Fa131 that produces half its maximal potentiation response $(EC₅₀)$. We then co-applied these two drugs with increasing concentrations of Fa173 and recorded the final current peak amplitude. Representative current traces of these experiments are depicted in Figure 4A,B. Concentration-response curves for Fa173 inhibitory action over Fa131 potentiation at both receptor subtypes are shown in Figure 4C. Fa173 was equipotent at both receptor subunit combinations (IC₅₀ = 11.4 \pm 0.9 μ M at α 1 β 2 γ 2L and 7.8 \pm 1.2 μ M at α 1 β 2), and similarly, its neutralizing efficacy was comparable (maximal inhibition $= 100 \pm 5\%$ and 93 $\pm 5\%$, respectively, Figure 4C).

The flavan Fa173 acts as an antagonist of the $GABA_A$ positive modulator Fa131 at both α 1 β 2 γ 2L and α 1 β 2 recombinant receptors expressed in *Xenopus* oocytes. Current traces (nA vs. min) illustrating the concentration-dependent blockade that Fa173 exerts over the potentiating action of Fa131 at (A) α 1 β 2 γ 2L and (B) α 1 β 2 receptors. Drug concentrations were 5 μ M GABA and 15 μ M Fa131 at α 1 β 2 γ 2L and 1 μ M GABA and 10 μ M Fa131 at α 1 β 2, equivalent to their corresponding $EC₃$ and $EC₅₀$, respectively. Horizontal bars represent drug application. (C) Concentration-response curve for Fa173 antagonistic action over Fa131-induced potentiation of GABA currents at both receptor subtypes. Data points represent mean \pm SEM peak current response normalized as described in Methods. Data were fitted using four-parameter logistic equation and the bestestimated values for each parameter are: IC₅₀ = 11.4 \pm 0.9 μ M, maximal inhibition = 100 \pm 5%, *n* = 7 at α 1 β 2 γ 2L; IC₅₀ = 7.8 \pm 1.2 μM, maximal inhibition = 93 \pm 5%, *n* = 6 at α1β2. Hill coefficient values were not different from unity and are not reported.

Flavans as novel GABAA modulatory agents

Fa173 antagonizes the potentiation induced by etomidate and loreclezole, but not by propofol, THP or thiopental

Considering the ability of Fa173 to antagonize the potentiating effects of Fa131, we tested its antagonistic profile over a series of well-known GABAA positive modulators. Thus, etomidate, propofol, loreclezole, the neurosteroid THP and the barbiturate thiopental were selected to conduct antagonism experiments. Assays were carried out by co-applying GABA $(EC₃)$ plus modulator $(EC₅₀)$ and Fa173 (increasing concentrations), in order to estimate an inhibitory potency for the antagonist.

Fa173 similarly neutralized the potentiating effects of etomidate at α 1 β 2 and α 1 β 2 γ 2L GABA_A receptors (Figure 5A,B). Representative current traces shown in Figure 5A,B depict the potentiation induced by etomidate of the GABA $EC₃$ response, and its subsequent blockade by increasing concentrations of Fa173. The potency of Fa173 to antagonize etomidate was comparable at both receptor subunit combinations $(IC_{50} = 12.0 \pm 1.1 \mu M$ and $6.1 \pm 1.3 \mu M$, at α 1 β 2 γ 2L and α 1 β 2 receptors, respectively), as was its maximal inhibitory effect (maximal inhibition = $86 \pm 8\%$ and $81 \pm 5\%$, respectively) (Figure 5C).

Loreclezole can also induce large potentiation of GABAelicited currents at both at α 1 β 2 and α 1 β 2 γ 2L GABA_A receptors (Figure 6). This enhancement was antagonized by co-applying increasing concentrations of the antagonist Fa173, as depicted in the current traces shown in Figure 6A,B. At α 1 β 2 γ 2L receptors, the IC₅₀ was $6.6 \pm 0.2 \mu$ M with a maximal inhibition of 99 \pm 11%, while at α 1 β 2 the IC₅₀ was 3.8 \pm 0.9 μ M with a maximal inhibition of 94 \pm 4% (Figure 6C).

The antagonizing properties of Fa173 were tested against the positive modulatory action of THP, thiopental and propofol at α 1 β 2 and α 1 β 2 γ 2L GABA_A receptors (*n* = 4) (Figure 7). Fa173 (1-100 μ M) failed to alter the enhancement of the GABA response induced by THP (Figure 7A) or by thiopental (Figure 7B), at both receptor subtypes. Finally, Fa173 (60 μ M) also failed to alter the enhancement of the GABA response induced by propofol (10 μ M) at α 1 β 2 and α 1 β 2 γ 2L receptors (*n* = 3) (Figure 7C).

Fa173 blocks the GABA-potentiating effects induced by large, but not low, concentrations of diazepam

It has been well documented that diazepam can enhance GABA-induced currents in a biphasic mode when acting on a1b2g2L GABAA receptors (Walters *et al*., 2000), an observation that has been reproduced in our laboratories (Hall *et al*., 2005). We selected two concentrations of diazepam to study the high-affinity (100 nM) and low-affinity (100 μ M) effects of this drug at α 1 β 2 γ 2L receptors (Figure 8A,B). At a concentration of 100 nM, diazepam induced a twofold potentiation of the GABA response, and this enhancement was completely blocked by the co-application of flumazenil 10 μ M (93% inhibition), but not by Fa173 100 μ M (2% inhibition, *n* = 3) (Figure 8A). However, when diazepam was applied at a high concentration (100 μ M), flumazenil produced a mild neutralizing effect (about 10%), while the flavan Fa173 (100 μ M) almost completely abolished the potentiation (87% inhibition, $n = 3$) (Figure 8B).

The flavan Fa173 acts as an antagonist of the etomidate-induced enhancement of GABA currents. (A) Current traces (nA vs. min) illustrating the blockade that increasing concentrations of Fa173 exert over the potentiating action of etomidate at α 1 β 2 γ 2L receptors. (B) Current traces (nA vs. min) illustrating the blockade that increasing concentrations of Fa173 exert over the potentiating action of etomidate at α 1 β 2 receptors. Drug concentrations were 3 μ M GABA and 10 μ M etomidate at α 1 β 2 γ 2L and 1 μ M GABA and 10 μ M etomidate at α 1 β 2, equivalent to their corresponding EC₃ and EC₅₀, respectively. Horizontal bars represent drug application. (C) Concentration-response curves for Fa173 blockade of etomidateinduced potentiation (IC₅₀ = 12.0 \pm 1.1 μ M and 6.1 \pm 1.3 μ M, maximal inhibition = 86 \pm 8% and 81 \pm 5%, at α1β2γ2L and α1β2 receptors, $n = 6$ and 5, respectively).

Figure 6

The flavan Fa173 acts as an antagonist of the loreclezole-induced enhancement of GABA currents. (A) Current traces (nA vs. min) illustrating the blockade that increasing concentrations of Fa173 exert over the potentiating action of loreclezole at α 1 β 2 γ 2L receptors. (B) Current traces (nA vs. min) illustrating the blockade that increasing concentrations of Fa173 exert over the potentiating action of loreclezole at α 1 β 2 receptors. Drug concentrations were 3 μ M GABA and 10 μ M loreclezole at α 1 β 2 γ 2L and 1 μ M GABA and 10 μ M loreclezole at α 1 β 2, equivalent to their corresponding EC₃ and EC₅₀, respectively. Horizontal bars represent drug application. (C) Concentration-response curves for Fa173 blockade of loreclezoleinduced potentiation (IC₅₀ = 6.6 \pm 0.2 μ M and 3.8 \pm 0.9 μ M, maximal inhibition = $99 \pm 11\%$ and $94 \pm 4\%$, $n = 7$ and 5, at α 1 β 2 γ 2L and α 1 β 2 receptors, respectively).

The flavan Fa173 failed to antagonize the potentiating effects induced by the neurosteroid THP and the barbiturate thiopental at recombinant a1b2 and a1b2g2L GABAA expressed in *Xenopus* oocytes. (A) THP (1 mM) induced a potentiation of GABA-elicited currents, which could not be blocked by co-applying the flavan Fa73 at 1, 10 and 100 μ M ($n = 4$). (B) The potentiation induced by thiopental (15 μ M) was not affected by the co-application of the agent Fa173 (1–100 μ M), at both receptor subtypes ($n = 4$). (C) Similarly, propofol (10 μ M) induced a potentiation of GABA-elicited currents, that could not be blocked by co-applying the flavan Fa73 at 1, 10 and 100 μ M ($n = 3$).

Conversely, at GABA_A receptors composed of α 1 β 2 subunits, diazepam potentiates GABA-induced currents in a monophasic manner, consistent with a single 'low-affinity' site. Diazepam (50 μ M) induced a fivefold increase in GABAelicited currents at this subunit combination, and this effect was unaffected by flumazenil $(10 \mu M)$. However, when this dose of diazepam was co-applied with increasing concentrations of Fa173, the potentiation was completely abolished. Fa173 antagonized diazepam with an IC $_{50}$ of 2.7 \pm 0.8 $\upmu \mathrm{M}$ and maximal inhibition of $94 \pm 5\%$ ($n = 4$) (Figure 8C).

Discussion

GABA_A receptors expressing β2-N265 subunit

Etomidate and loreclezole present enhanced modulatory action at GABA_A receptors that contain a β 2/3 subunit, and their activity is comparatively weaker at b1 (Wafford *et al*., 1994; Hill-Venning *et al*., 1997). Later studies found that this selectivity was conferred by a single asparagine residue located at position 265 on the second transmembrane domain of the β 2 subunit (and equivalent position at β 3). When this asparagine is mutated to a serine (homologous amino acid in the β 1 subunit), the ability of etomidate and loreclezole to potentiate GABA currents is diminished (Wafford *et al*., 1994; Wingrove *et al*., 1994; Belelli *et al*., 1997), and, accordingly, knock-in mice carrying either b3N265M or b2N265S present impaired sensitivity to the *in vivo* actions of these drugs (Jurd *et al*., 2003; Reynolds *et al*., 2003; Rudolph and Antkowiak, 2004; Groves *et al*., 2006). Notably, mutations at this point do not interfere with the potentiation induced by the neurosteroid alphaxalone and the barbiturate pentobarbitone (Belelli *et al*., 1999; Siegwart *et al.*, 2003). In this study, the β2N265S mutant was

The flavan 173 selectively antagonizes the current enhancement induced by diazepam acting on its low-affinity site. (A) Representative current traces showing that Fa173 does not antagonize the potentiating effects of a low concentration of diazepam acting on α 1 β 2 γ 2L receptors, while this effect is completely blocked by flumazenil (left panel). The quantification of the inhibitory effect of both drugs is shown on the right panel (*n* = 3). (B) Conversely, the response elicited by diazepam at a high concentration is blocked up to 87% by the flavan Fa173, while the co-application of flumazenil only inhibited about 10% of this response ($n = 3$). (C) At α 1 β 2 receptors, diazepam induces a potentiation of GABA-elicited currents that can be almost completely blocked by the co-application of Fa173, but not flumazenil (left panel) (*n* = 4). The panel on the right shows the concentration-response curve for this effect (IC₅₀ = 2.7 \pm 0.8 µM, maximal inhibition = 94 \pm 5%).

co-expressed with α 1 and γ 2L subunits. As expected, etomidate and loreclezole were less capable of enhancing currents at this mutant receptor, but more interestingly, the modulatory action of Fa131 was also affected by this mutation, suggesting that these agents share a common binding site domain or signal transduction mechanism. Some studies utilizing computational modelling have suggested that this residue could contribute to the binding pocket for etomidate (Campagna-Slater and Weaver, 2007). However, more recent studies have suggested that N265 is not involved in the binding of etomidate (Li *et al*., 2006). As there is no high resolution crystal structure available for the GABAA receptor

complex, the exact role of N265 remains unclear, dampening further speculations on our hypothesis.

GABAA receptors expressing a*1-M236 subunit*

In 2006, Li and collaborators, utilizing a radiolabelled photoreactive etomidate analogue, identified M236 at a-TM1 and M286 at β -TM3, to be directly involved in the binding of this anaesthetic (Li *et al*., 2006). In later work, Stewart *et al*. (2008) conducted a tryptophan mutation on M236 and characterized the properties of α 1M236W β 2 γ 2L receptors, showing that these channels present increased sensitivity to GABA transduction, and reduced etomidate modulation. Our α 1M236W β 2 γ 2L GABA_A mutant receptors presented very similar characteristics to those described by Stewart *et al*., including augmented GABA gating, mild spontaneous activity and reduced potentiation by etomidate. Importantly, we found that this mutant was also less sensitive to allosteric modulation by loreclezole, and the flavan-3-ol Fa131, further reinforcing the idea that these three modulators share their binding pocket or activation domain. Interestingly, the mutation M236A did not affect the modulatory properties of etomidate, loreclezole or Fa131. Methionine, the original amino acid, tryptophan and alanine, the chosen mutations, all share the characteristics of non-polar hydrophobic amino acids; however, they differ largely in their molecular size. Thus, it is tempting to speculate that tryptophan impairs drug activity by sterically impeding the accommodation of large aromatic rings, or alternatively by offering nearby residues an intramolecular aromatic interaction, thus weakening the binding of a drug with similar needs. In this line, Stewart *et al*. (2008) proposed that a α 1-M236W mutation mimicked the effects of etomidate on wild-type GABAA receptors. Conversely, alanine has a much smaller side chain that would allow the binding process to remain unaltered.

Fa173 is an antagonist of positive modulators such as Fa131, etomidate and loreclezole

Despite the worldwide use of GABAA receptor positive modulators in human therapy, the development of site-specific antagonists, best defined as neutral modulators, has been scarce. This may be due to the large number of sites for allosteric regulation present in these channels (Johnston, 2005). For example, positive or negative modulation by benzodiazepine ligands at the high-affinity site can be blocked by the antagonist flumazenil. Similarly, bemegride and $3\alpha, 5\alpha$ -17-phenylandrost-16-en-3-ol have been proposed to be antagonists of the barbiturate and neurosteroid sites, respectively, but these drugs seem to present intrinsic limitations (Schechter, 1984; Mennerick *et al*., 2004). In our study, the flavan derivative Fa173 showed characteristics of a specific flavan-site modulator with extremely low efficacy to potentiate GABA-induced currents. Importantly, the main structural requirement for this change in intrinsic activity seems to be a *cis* conformation at C2 and C3. At recombinant α 1 β 2 and α 1 β 2 γ 2L receptors, Fa173 antagonized the potentiation induced by the positive modulator Fa131. Importantly, Fa173 also antagonized the enhancing effects of etomidate and loreclezole at α 1 β 2 and α 1 β 2 γ 2L receptors, suggesting that these drugs bind to a single binding site. However, it failed to

neutralize the potentiating action of the neurosteroid THP, the barbiturate thiopental and the anaesthetic propofol.

As Fa173 had little direct effect on GABA-elicited currents, it is unlikely that this compound acts via binding to the GABA site. Rather, the antagonistic properties of Fa173 are highly selective, and may occur through competition for the etomidate/flavan site; however, further experimentation is needed to clarify the specific mechanism. Despite these reservations, this is, to our knowledge, the first report of a specific neutral modulator for the etomidate/loreclezole site and Fa173 represents a lead compound in the development of novel antagonists.

Diazepam binds to the 'etomidate' site with m*M affinity*

Both benzodiazepines and β -carbolines have been shown to possess two distinct components when interacting with GABAA receptors. The first component, via the classical benzodiazepine site, possesses high-affinity (nM), is flumazenilsensitive and requires the presence of α 1,2,3,5 and γ subunits. The second site presents low ligand affinity (μM) , is insensitive to blockade by flumazenil and is not dependent on the presence of a g subunit (Malherbe *et al*., 1990). It has been hypothesized that this second binding component could respond to an interaction with the etomidate/loreclezole site, as it could be eliminated by mutations at N265 in β 2-TM2 (Stevenson *et al*., 1995; Walters *et al*., 2000). Our results corroborate this hypothesis; the flavan Fa173 blocked the effects of etomidate, loreclezole and high concentrations of diazepam at α 1 β 2 and α 1 β 2 γ 2L receptors. Importantly, we demonstrated that the two binding sites to which diazepam interacts with can be selectively blocked by the addition of flumazenil (high-affinity site) and Fa173 (low-affinity site).

Implications for anaesthetic action

Several mutational studies at M286 on β-TM3 led to the proposal that propofol may bind in the M3 domain near b2M286 (Krasowski *et al*., 1998; Siegwart *et al*., 2003). However, the finding that propofol only partially inhibits the affinity labelling of both α 1M236 and β 2M286 by [3 H]-azietomidate suggests that the effect of propofol on the reaction of [3 H]-azietomidate with these residues is allosteric rather than direct (Li *et al*., 2010). Importantly, the finding that Fa173 blocks potentiation by etomidate but not propofol supports the notion that propofol does not have a direct interaction with the etomidate binding site α 1 β 2 γ 2L in GABAA receptors. Recently, the crystal structure of the bacterial LGIC with propofol bound was published, showing the location to be an inter-subunit cavity between the TM3 and TM4 domains (Nury *et al*., 2011). However, it is not yet known whether propofol binds in a similar location at GABAA receptors.

We previously observed that while the intrinsic activity of the flavan Fa131 on GABAA receptors resembled general anaesthetics, its *in vivo* profile was quite distinct. Unlike drugs such as etomidate, loreclezole and diazepam, Fa131 failed to induce strong sedative and hypnotic effects in mice. Rather, it exerted a robust anxiolytic action, as measured by the elevated plus maze and the light/dark paradigm. This discrepancy can be explained by the higher efficacy of Fa131 to

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activate GABA_A receptors containing an α 2 subunit (Fernandez *et al.*, 2008), as this GABA_A receptor subtype is believed to mediate the anxiolytic activity of benzodiazepines and barbiturates (Möhler *et al*., 2002; Dixon *et al*., 2008). In contrast, etomidate and loreclezole present limited α -subunit selectivity and their ability to induce sedation, anaesthesia and seizure protection is markedly subjugated by the activation of all β 2/3-containing GABA_A receptors, which represent more than 90% of all receptors expressed in the mammalian brain (Rudolph and Antkowiak, 2004; Groves *et al*., 2006). Benzodiazepines, such as diazepam, are much used as therapy for anxiety, but this group of substances has also proved useful as anticonvulsants, hypnotics and muscle relaxants. However, this spectrum of pharmacological activities does not all occur in the same dose range, and extensive studies have suggested that the incremental CNS effects of benzodiazepines may be the consequence of gradual nM receptor occupancy (Gardner, 1988; Ito *et al*., 1993; 1997). The identification of a second μ M potentiation component, present in any α X β 2/3 subunit combination, thus less specific, indicates the possibility that the deep CNS-depressant actions of benzodiazepines could be the result of their effect, at µM concentrations, on GABAA receptor channels (Walters *et al*., 2000). Whether flumazenil does (Hoffman and Warren, 1993), or does not (Little and Bichard, 1984), antagonize the anaesthetic effects of benzodiazepines, might reveal whether a double $nM/\mu M$ potentiation is an essential requirement. However, despite these speculations, the physiological and pharmacological relevance of the low-affinity benzodiazepine site is currently unknown, and, consequently, the development of a sitespecific antagonist such as Fa173 may assist in addressing this question.

Conclusions

In summary, our studies have demonstrated that Fa173 is a selective antagonist that can be used for allosteric modulation of GABAA receptors. Using a combination of mutational studies and this novel ligand, we showed that flavan-3-ol derivatives are potential ligands for etomidate/loreclezolerelated binding sites at GABAA receptors. Furthermore, the low-affinity potentiation induced by benzodiazepines, perhaps related to their high-dose anaesthetic-like effects, can also be explained by a second binding component to this same site.

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Conflict of interest

The authors state no conflict of interest.

References

Akk G, Li P, Bracamontes J, Reichert DE, Covey DF, Steinbach JH (2008). Mutations of the GABAA receptor α 1 subunit M1 domain reveal unexpected complexity for modulation by neuroactive steroids. Mol Pharmacol 74: 614–627.

Alexander SPH, Mathie A, Peters JA (2011). Guide to receptors and channels (GRAC), 5th edition. Br J Pharmacol 164 (Suppl. 1): S1–S324.

Belelli D, Lambert JJ (2005). Neurosteroids: endogenous regulators of the GABAA receptor. Nat Rev Neurosci 6: 565–575.

Belelli D, Lambert JJ, Peters JA, Wafford K, Whiting PJ (1997). The interaction of the general anesthetic etomidate with the g-aminobutyric acid type A receptor is influenced by a single amino acid. Proc Natl Acad Sci USA 94: 11031–11036.

Belelli D, Pistis M, Peters JA, Lambert JJ (1999). The interaction of general anaesthetics and neurosteroids with GABAA and glycine receptors. Neurochem Int 34: 447–452.

Campagna-Slater V, Weaver DF (2007). Anaesthetic binding sites for etomidate and propofol on a GABAA receptor model. Neurosci Lett 418: 28–33.

Chang CS, Olcese R, Olsen RW (2003). A single M1 residue in the β 2 subunit alters channel gating of GABA_A receptor in anesthetic modulation and direct activation. J Biol Chem 278: 42821–44288.

Desai R, Ruesch D, Forman SA (2009). γ-Amino butyric acid type A receptor mutations at β 2N265 alter etomidate efficacy while preserving basal and agonist-dependent activity. Anesthesiology 111: 774–784.

Dixon CI, Rosahl TW, Stephens DN (2008). Targeted deletion of the GABRA2 gene encoding α 2-subunits of GABA_A receptors facilitates performance of a conditioned emotional response, and abolishes anxiolytic effects of benzodiazepines and barbiturates. Pharmacol Biochem Behav 90: 1–8.

Drafts BC, Fisher JL (2006). Identification of structures within GABAA receptor alpha subunits that regulate the agonist action of pentobarbital. J Pharmacol Exp Ther 318: 1094–1101.

Fernandez SP, Mewett KN, Hanrahan JR, Chebib M, Johnston GA (2008). Flavan-3-ol derivatives are positive modulators of GABAA receptors with higher efficacy for the alpha(2) subtype and anxiolytic action in mice. Neuropharmacology 55: 900–907.

Gardner CR (1988). Functional in vivo correlates of the benzodiazepine agonist-inverse agonist continuum. Prog Neurobiol 31: 425–476.

Groves JO, Guscott MR, Hallett DJ, Rosahl TW, Pike A, Davies A *et al.* (2006). The role of GABA β2 subunit-containing receptors in mediating the anticonvulsant and sedative effects of loreclezole. Eur J Neurosci 24: 167–174.

Hall BJ, Chebib M, Hanrahan JR, Johnston GAR (2005). 6-Methylflavanone, a more efficacious positive allosteric modulator of g-aminobutyric acid (GABA) action at human recombinant α 2 β 2 γ 2L than at α 1 β 2 γ 2L and α 1 β 2 GABA_A receptors expressed in Xenopus oocytes. Eur J Pharmacol 512: 97–104.

Hill-Venning C, Belelli D, Peters JA, Lambert JJ (1997). Subunit-dependent interaction of the general anaesthetic etomidate with the gamma-aminobutyric acid type A receptor. Br J Pharmacol 120: 749–756.

Hoffman EJ, Warren EW (1993). Flumazenil: a benzodiazepine antagonist. Clin Pharm 12: 641–656.

Hosie AM, Wilkins ME, da Silva HM, Smart TG (2006). Endogenous neurosteroids regulate GABAA receptors through two discrete transmembrane sites. Nature 444: 486–489.

Ito K, Yamada Y, Nakamura K, Sawada Y, Iga T (1993). Classification of benzodiazepine hypnotics in humans based on receptor occupancy theory. J Pharmacokinet Biopharm 21: 31–41.

Ito K, Asakura A, Yamada Y, Nakamura K, Sawada Y, Iga T (1997). Prediction of the therapeutic dose for benzodiazepine anxiolytics based on receptor occupancy theory. Biopharm Drug Dispos 18: 293–303.

Johnston GAR (2005). GABAA receptor channel pharmacology. Curr Pharm Des 11: 1867–1885.

Jurd R, Arras M, Lambert S, Drexler B, Siegwart R, Crestani F *et al*. (2003). General anesthetic actions in vivo strongly attenuated by a point mutation in the GABAA receptor beta3 subunit. FASEB J 17: 250–252.

Krasowski MD, Koltchine VV, Rick CE, Ye Q, Finn SE, Harrison NL (1998). Propofol and other intravenous anesthetics have sites of action on the γ -aminobutyric acid type A receptor distinct from that for isoflurane. Mol Pharmacol 53: 530–538.

Li GD, Chiara DC, Sawyer GW, Husain SS, Olsen RW, Cohen JB (2006). Identification of a GABAA receptor anesthetic binding site at subunit interfaces by photolabeling with an etomidate analog. J Neurosci 26: 11599–11605.

Li GD, Chiara DC, Cohen JB, Olsen RW (2010). Numerous classes of general anesthetics inhibit etomidate binding to γ -aminobutyric acid type A (GABAA) receptors. J Biol Chem 285: 8615–8620.

Little HJ, Bichard AR (1984). Differential effects of the benzodiazepine antagonist Ro 15-1788 after 'general anaesthetic' concentrations of benzodiazepines in mice. Br J Anaesth 56: 1153–1160.

Malherbe P, Draguhn A, Multhaup G, Beyreuther K, Möhler H (1990). GABA_A-receptor expressed from rat brain α - and β -subunit cDNAs displays potentiation by benzodiazepine receptor ligands. Brain Res Mol Brain Res 8: 199–208.

McKernan RM, Whiting PJ (1996). Which GABA_A-receptor subtypes really occur in the brain? Trends Neurosci 19: 139–143.

Mennerick S, He Y, Jiang X, Manion BD, Wang M, Shute A *et al*. (2004). Selective antagonism of 5a-reduced neurosteroid effects at GABAA receptors. Mol Pharmacol 65: 1191–1197.

Mewett KN, Fernandez SP, Pasricha AP, Pong A, Devenish SO, Hibbs DE *et al*. (2009). Synthesis and biological evaluation of flavan-3-ol derivatives as positive modulators of GABAA receptors. Bioorg Med Chem 17: 7156–7173.

Miller PS, Smart TG (2010). Binding, activation and modulation of Cys-loop receptors. Trends Pharmacol Sci 31: 161–174.

Möhler H, Fritschy JM, Rudolph U (2002). A new benzodiazepine pharmacology. J Pharmacol Exp Ther 300: 2–8.

Nury H, Van Renterghem C, Weng Y, Tran A, Baaden M, Dufresne V *et al*. (2011). X-ray structures of general anaesthetics bound to a pentameric ligand-gated ion channel. Nature 469: 428–431.

Reynolds DS, Rosahl TW, Cirone J, O'Meara GF, Haythornthwaite A, Newman RJ et al. (2003). Sedation and anesthesia mediated by distinct GABAA receptor isoforms. J Neurosci 23: 8608–8617.

Rudolph U, Antkowiak B (2004). Molecular and neuronal substrates for general anaesthetics. Nat Rev Neurosci 5: 709–720.

Schechter MD (1984). Specific antagonism of the behavioral effects of chlordiazepoxide and pentobarbital in the rat. Prog Neuropsychopharmacol Biol Psychiatry 8: 359–364.

Siegwart R, Krähenbühl K, Lambert S, Rudolph U (2003). Mutational analysis of molecular requirements for the actions of general anaesthetics at the γ -aminobutyric acid_A receptor subtype, α1β2γ2. BMC Pharmacol 3: 13.

Simon J, Wakimoto H, Fujita N, Lalande M, Barnard EA (2004). Analysis of the set of GABAA receptor genes in the human genome. J Biol Chem 279: 41422–41435.

Stevenson A, Wingrove PB, Whiting PJ, Wafford KA (1995). b-carboline g-aminobutyric acid A receptor inverse agonists modulate γ -aminobutyric acid via the loreclezole binding site as well as the benzodiazepine site. Mol Pharmacol 48: 965–969.

Stewart D, Desai R, Cheng Q, Liu A, Forman SA (2008). Tryptophan mutations at azi-etomidate photo-incorporation sites on α 1 or β 2 subunits enhance GABAA receptor gating and reduce etomidate modulation. Mol Pharmacol 74: 1687–1695.

Thompson SA, Whiting PJ, Wafford KA (1996). Barbiturate interactions at the human GABAA receptor: dependence on receptor subunit combination. Br J Pharmacol 117: 521–527.

Wafford KA, Bain CJ, Quirk K, McKernan RM, Wingrove PB, Whiting PJ *et al*. (1994). A novel allosteric modulatory site on the GABAA receptor beta subunit. Neuron 12: 775–782.

Walters RJ, Hadley SH, Morris KD, Amin J (2000). Benzodiazepines act on GABAA receptors via two distinct and separable mechanisms. Nat Neurosci 3: 1274–1281.

Wingrove PB, Wafford KA, Bain C, Whiting PJ (1994). The modulatory action of loreclezole at the y-aminobutyric acid type A receptor is determined by a single amino acid in the β 2 and β 3 subunit. Proc Natl Acad Sci USA 91: 4569–4573.