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On the role of Nav1.7 sodium channels in chronic pain: an experimental and computational study

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Short title:
Chronic pain and Nav1.7 gating in human nociceptive neurons
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Abstract

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Chronic pain is a global healthcare problem with a huge societal impact. Its management remains generally unsatisfactory, with no single treatment clinically approved in most cases. In this study we use an in vitro model of erythromelalgia consisting of dorsal root ganglion neurons derived from human induced pluripotent stem cells obtained from a patient (carrying the mutation F1449V) and a control subject. We combine neurophysiology and computational modelling to focus on the Nav1.7 voltage gated sodium channel, which acts as an amplifier of the receptor potential in nociceptive neurons and plays a critical role in erythromelalgia due to gain of function mutations causing the channel to open with smaller depolarisations. Using extracellular recordings, we found that the scorpion toxin OD1 (a Nav1.7 channel opener) increases dorsal root ganglion cell excitability in cultures obtained from the control donor, evidenced by an increase in spontaneous discharges, firing rate and spike amplitude. In addition, we confirmed previous reports of voltage clamp experiments concerning an increase in spontaneous discharge in the patient cell cultures and the analgesic effects of the Nav1.7 blocker PF-05089771. Our findings are explained with a conductance-based model of the dorsal root ganglion neuron, exploring its behaviour for different values of half activation voltage and inactivation removal rate of the Nav1.7 current. Erythromelalgia was simulated through a decrease of the Nav1.7 half activation voltage, turning previously subthreshold stimuli to pain-inducing, and successfully counteracted with the channel blocker. The painful effects of OD1 were simulated through a quicker removal of Nav1.7 inactivation that reproduced the effects of the toxin not only on the spike frequency but also on its amplitude.

New & Noteworthy

We investigate Nav1.7 channel gating mechanisms in human iPSC-derived dorsal root ganglion cell cultures using multielectrode array recordings. The scorpion toxin OD1 increases firing frequency and spike amplitudes whilst the analgesic PF-05089771 decreases or even abolishes spontaneous

activity. The antagonistic effect of these compounds is explained with a computational model to reach deeper understanding of changes in channel kinetics in erythromelalgia, a chronic pain disorder.

Introduction

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Chronic pain is a global healthcare problem, particularly affecting elderly people, women and persons with lower socio-economic status (Van Hecke et al., 2013). It is one of the most common reasons for physician consultation in developed countries, interfering with quality of life and causing large socio-economic impacts that include significant loss of working hours and the need of clinical care. Current therapies have limitations in their effectiveness and side effects, creating an urgent need to develop more precise and effective treatments for pain management (Khouzam, 2000). In this study we focus on the voltage dependent properties of the sodium channel Nav1.7 that is implicated in inherited erythromelalgia, a vascular peripheral pathology causing attacks of severe chronic pain (McDonnell et al., 2016). Pain evoked spiking activity starts in peripheral terminals of dorsal root ganglion (DRG) neurons. The central extensions of these neurons form the Aδ and C fibres which establish glutamatergic synapses onto second order neurons within the spinal cord. They can be stimulated by mechanical, thermal or chemical stimuli as well as by inflammatory mediators. Distributed throughout the body (skin, viscera, muscles, joints, meninges), they carry noxious sensory information into the central nervous system (Serpell, 2006). The recent discovery of nociceptive Schwann cells has changed the notion of bare nerve terminals being the starting point of pain sensation, and introduced the concept of a glioneural end organ in the skin that transmits nociceptive information to the nerve, resembling the specialized receptor cells found in other sensory systems (Abdo et al., 2019). DRG neurons express several types of voltage gated sodium channels with different properties (Lera Ruiz and Kraus, 2015). The opening of Nav1.7 channels requires smaller depolarisations than other types of sodium channels, being more easily activated by the graded generator potentials. For this reason it is considered to be a threshold channel that acts as an amplifier of the receptor potential, increasing the probability of triggering a spike via the activation of other, higher threshold sodium channels such as Nav1.8. This amplification property makes Nav1.7 a major contributor to pain signalling in humans (Dib-Hajj et al., 2013). Erythromelalgia is caused by gain of of of of one the gene SCN9A, which encodes for the Nav1.7 channels pain (McDonnell et al., 2016). Different types of mutations have in common the need for less depolarization to open the channel than in the wild type, resulting in a decrease of the rheobase (i.e., minimal amplitude of an infinite depolarizing current to evoke a spike) (Cao et al., 2016). DRG neurons fire spontaneously in erythromelelgia patients, although normally these cells are silent unless receiving strong peripheral pain stimulus. In this study, we have used extracellular recordings of spontaneous activity in DRG neuron cultures derived from human induced pluripotent stem cells (hiPSCs) obtained from an erythromelalgia patient and a control subject to study the voltage dependent gating properties of Nav1.7 channels. To start, the effects on the neuronal firing of two different pharmacological compounds -a pain eliciting scorpion toxin (OD1, Motin et al., 2016) and an analgesic drug (PF-05089771, Cao et al., 2016)- were assessed in these cultures using multi electrode array (MEA) recordings. We then present a simple conductance-based computational model of the DRG neuron to explain our findings in terms of the Nav1.7 gating process, focusing on the channel activation (opening) and repriming (i.e., recovery from inactivation).

Materials and Methods

Cells and MEA recordings

For this study we used hiPSCs from a control subject (cell line AD3) and an erythromelalgia patient (cell line RCi002-A, carrying the mutation F1449V) made available at the European Bank for induced pluripotent stem cells (EBiSC). The cells were differentiated into sensory neurons using a small

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molecule based protocol described previously (Cao et al., 2016, and references therein). Once they reached the stage of DRG neurons, the cells were re-plated in 24 wells MEA plates (MEA700, Multichannel Systems, Reutlingen, Germany) where the spontaneous activity was recorded after 10 weeks of maturation. Each well contains 12 circular electrodes (100 μm diameter, 700 μm electrode pitch), making a total of 288 electrodes per plate. The large distance between electrodes makes it very unlikely that the activity originating from an individual neuron will be detected by adjacent electrodes. On the other hand, due to the relatively large cell density in these cultures, which organize in structures called neural rosettes (e.g., Wilson and Stice, 2006), it is quite likely that one electrode can detect the activity of more than one neuron (up to four in our data sets, although most channels had only one or two). We compared the spontaneous activity of DRG neurons obtained from a control subject (plated in 18 wells, making a total of 216 electrodes in MEA 1) with an erythromelalgia patient (plated in 24 wells, making a total of 288 electrodes in MEA 2). In addition we used a third MEA plated with diseased cells stimulated with higher concentration of potassium (from 4.16 mM in the growing medium to 6 mM) to enhance spontaneous activity (plated in 24 wells, making a total of 288 electrodes in MEA 3). This allowed us to find more active neurons following the addition of PF-05089771 to make paired comparisons before and after this treatment that tends to suppress the firing in many channels. Each well constitutes an independent cell culture. The cultures were treated with OD1 (100 nM) in the control subject (MEA 1) and with PF-05089771 (100 nM) in the patient (MEAs 2 and 3). The activity was recorded for 5 minutes immediately before the application of each substance and compared with a recording of the same duration performed 5 minutes after the onset of drug exposure. Wells contained 200 μl of growing medium and 5 μl drops were added to apply the treatments. The experimental doses were selected to be in a near saturation range to ensure a strong effect, based on dose response curves published previously (Cao

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et al., 2016 for PF-05089771; Motin et al., 2016 for OD1). Both compounds were purchased from Tocris (Bio-Techne, Abingdon, UK).

Spike sorting and pairing of units

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Recordings were performed with the Multiwell-MEA-System and the software Multi Channel Experimenter (Multi Channel Systems, Reutlingen, Germany). Each channel was band-pass filtered (100 to 3500 Hz) and acquired with a sampling rate of 20 kHz. The raw voltage traces were first plotted and inspected using a zoom tool to discard artefacts and confirm the existence of spikes. The voltage time series were then fed into the Matlab toolbox Waveclus (Quian Quiroga et al., 2004) to perform spike sorting in all active channels. In the toolbox, the continuous data were filtered again with a non-causal band pass filter between 300 and 3000 Hz and the firing times were detected with an amplitude threshold. We used a dual threshold (i.e., picking deflections in both up and down directions) set to 5 median absolute deviations of the filtered voltage signal with a refractory period of 2 ms to avoid double annotations due to fast voltage oscillations in the vicinity of the threshold. Spikes were aligned to their maximum, after interpolating the waveforms to locate the peak time more accurately. The toolbox uses a wavelet based method for feature extraction, and the grouping of spikes into clusters is done with superparamagnetic clustering (Blatt et al., 1996), a stochastic algorithm that does not assume any particular distribution of the data. In few cases the dual threshold created mistakes in the detection, so we decided to use a single threshold, kept for the units that corresponded to the same neuron before and after a given treatment. We consider this spike sorting strategy as supervised, always following the criterion of the biologist as ground true. The firing times and voltage cut outs of all units were stored to document the parameters and quality of the spike sorting in each channel. Units that were active both before and after each pharmacological treatment were identified. The only set-in-stone criterion for deciding if they are the same cell is the coordinates of the current

sources, using high density MEAs (Hilgen et al., 2017). As our data were recorded with low density

MEAs, we cannot provide this level of certainty, but assumed that they corresponded to the same neuron if the wave shape remained similar across recordings performed within few minutes of each other. Possible ambiguities were minimized by the fact that most channels yielded only one or two active neurons. These pairs were used to investigate the changes in spike frequency and amplitude caused by the pharmacological treatments (Figs 1 and 2). If we were reasonably convinced that a given unit corresponded to the same neuron before and after treatment, we designated the two recordings as a pair. In the case of the control cultures, few neurons had spontaneous discharges and most cells started to fire only after the OD1 treatment. Conversely, in the case of the patient cultures, several neurons were active before, but few remained active after the application of PF-05089771. In that case, we made an additional recording after increasing the spontaneous activity with potassium, as mentioned above. This manipulation allowed to get more active neurons in control conditions, and then more neurons remained active after the treatment to configure pairs, although we did not pool the data recorded with and without higher potassium concentration. For statistical comparisons between two conditions we used the Wilcoxon signed rank test (for paired values) or the Mann-Whitney U test (for unpaired values). We also used cross correlation histograms of the spike times recorded from the same channel to assess whether neurons tend to

Numerical simulations

fire at fixed delay from another.

We performed numerical simulations of the membrane potential and sodium channels gate parameters of a single DRG neuron using the software NEURON (www.neuron.yale.edu), e.g., Choi et al., 2011). The integration method was the IDA algorithm (e.g., Carnevale, 2007) with a fixed time step of 0.025 ms (i.e., 40 time steps per ms). Our purpose is to explain the changes in frequency and amplitude induced by the drug treatments covered in the previous section. In this context we adopted a parsimonious approach to keep the model as simple as possible, using Hodgkin and Huxley (HH) type of Na⁺ and K⁺ currents (Ermentrout and Terman, 2010) with parameters (Table 1)

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adapted to be plausible for mammal cells (Krouchev et al., 2015) plus a single Nav1.7 type current added using the Channel Builder GUI (McDougal et al., 2017). The two different types of sodium channels that we included differed only in their parameters (Table 1), the form of the equations was the same (S1 Appendix). The first, with larger conductance (0.3 S/cm^2) and a more depolarized value of half activation voltage (d = -40 mV) resembles a HH type high threshold Na⁺ channel (like Nav1.8 in mammals). The second type of Na⁺ channel, with a half activation voltage shifted in the hyperpolarizing direction (d = -55 to -60 mV) and a smaller value of maximum conductance (0.1 S/cm²), represented a Nav1.7. It had faster opening/closing and activating/inactivating rates and a more depolarized value of half inactivation voltage removal than the HH type channel (Table 1). These changes allowed to create a rapidly activating but slowly repriming (slow recovery from inactivation) current, resembling Nav1.7. To simulate erythromelalgia we varied the half activation voltage of Nav1.7 from -55 to -60 mV. To simulate PF-05089771 effect, we varied the maximum conductance of Nav1.7 from 0.1 to 0.07 S/cm² (Figs 3 and 4) and to simulate OD1 effects (Figs 5, 6 and 7) we increased 10 times the parameter A_h that multiplies the inactivation removal rate a_h . Model parameters are provided in Table 1, the equations that are most relevant for our results appear in section Results and all model equations are listed in S1 Appendix. Step depolarisations of 0.04 nA lasting 60 ms were used to evaluate the effect of the half activation voltage (d_h) and the inactivation removal rate (a_h) on the firing frequency of the spike (Figs 3 and 5). To estimate more reliably the spike frequency and amplitude by averaging over many spikes we used depolarization steps lasting 5 s (Figs 4 and 6). In order to assess for bifurcations in the dynamical system, we performed simulations of the maximum and minimum values of the voltage oscillation as a function of the amount of external current injected (i.e., a one dimensional bifurcation diagram, e.g., Fig 3 in Doi et al., 2001, for $d_m = -$

58 mV and $g_{max} = 0.1 \text{ S/cm}^2$.

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All figures of the article were created with Matlab (R2018b, The MathWorks, Inc., Natick, Massachusetts, United States) and finalized with Adobe illustrator (Adobe Inc.).

Results

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Experimental recordings

We compared the spontaneous activity of DRG neurons obtained from a control subject (cell line AD3, n = 18 cultures) with an erythromelalgia patient (cell line RCi002-A, n = 24 cultures). The percentage of electrodes showing activity was 1.85 % in the control and 5.9 % in the disease cultures. After spike sorting we found 30 spontaneously active units in the patient and only 7 in the control. The firing frequency and amplitude of these units were not significantly larger in the disease cultures, implying that although much more units are active, they do not necessarily fire faster or have spikes of larger amplitude. It is worth mentioning that the fastest neurons and the tallest spikes were found in the disease cultures, but the distributions were not significantly different because slow units with small amplitude were present in both groups. The larger number of spontaneously active neurons found in the disease cultures is consistent with the results of a previous study (Cao et al., 2016). The cultures from the control subject were treated with OD1 (100 nM), resulting in the percentage of active channels increasing from 1.85 to 6.02 % and a concomitant increase in the number of active units, from 7 to 24. An example of the voltage data before and after treatment is presented in Fig 1-A, note the large increase in spontaneous activity. The same picture was observed in an erythromelalgia culture conducted just as a verification (not shown). Pairing all the units that were active before and after OD1 application in the control cells (n = 7), we found that both the spike frequency and amplitude increased significantly (Fig 1-B). Although the increase in amplitude was not dramatic (20 % in average), it was consistently found in every pair of units. The extent of the increase in firing frequency was more pronounced (70 %). The unpaired units

that were initially silent and started to fire after the OD1 were not significantly different in rate and amplitude from those already active before the treatment. The cells from the patient were treated with PF05089771 (100 nM). The percentage of channels with spiking activity fell from 5.9 to 2.08 %. An example of the raw voltage trace before and after treatment is presented in Fig 2-A, note that the spiking activity is decreased, although this particular recording was done in the presence of higher K⁺ concentration. Pairing the units that were active before and after the treatment (n=6), we found that the spike frequency decreased significantly but the amplitude did not change (Fig 2-B). This result was confirmed with a larger number of paired units (n=16) in a MEA plate previously exposed to high potassium concentration (Fig 2-C). In both cases the unpaired units that stopped firing as a result of the PF05089771 application were not significantly different in rate and amplitude to the ones that remained active after treatment. In order to assess for possible functional connectivity, we calculated cross correlation histograms between the firing times of the neurons that were recorded from the same electrode. No histogram peaks at fixed latency were found, which is compatible with the established notion that DRG neurons do not form synaptic contacts between them. **Numerical simulations** In this subsection we present the results obtained with the computational model of the single DRG neuron explained in section Methods, including the equations directly related with the quantities plotted in the figures. The equations of all currents are provided in S1 Appendix. Our DRG neuron was simulated as a cylindrical soma of 30 µm diameter and height. The ionic conductances are based on a HH model with mammalian-plausible parameters plus an additional Na^{\dagger} current with the features of a Nav1.7 (Table 1). The disease and health conditions were simulated through changes in the Nav1.7 half-activation voltage parameter (d_m in equation 1). In

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erythromelalgia patients, this parameter is shifted up to 15 mV in hyperpolarizing direction (Cao et

al., 2016), causing a decrease in the level of depolarization needed to activate the Nav1.7 current.

General parameter set	
L (µm)	30
d (µm)	30
cm (μF/cm²)	1
gNa_hh (S/cm²)	0.3
gNav1.7_hh (S/cm²)	0.1
gK_hh (S/cm²)	0.15
	3.00E-
gL_hh (S/cm²)	05
eL_hh (mV)	-65
eK (mV)	-90
eNa (mV)	60
Initial V (mV)	-75
dt (ms)	0.025
Temp (Celsius)	37

K HH parameters	
Opening (a _m)	
A (ms ⁻¹)	0.1
k (ms ⁻¹)	0.1
d (mV)	-55
Closing (b _m)	
A (ms ⁻¹)	0.125
k (ms ⁻¹)	-0.0125
d (mV)	-65

Na HH parameters	
Opening (a _m)	
A (ms ⁻¹)	1
k (ms ⁻¹)	0.1
d (mV)	-40
Closing (b _m)	
A (ms ⁻¹)	4
k(ms ⁻¹)	-0.055
d (mV)	-65
Inactivation removal (a _h)	
A (ms ⁻¹)	0.07
k (ms ⁻¹)	-0.05
d (mV)	-65
Inactivation establishment (b _h)	
A (ms ⁻¹)	1
k (ms ⁻¹)	-0.1
d (mV_	-35

Nav1.7 parameters	
Opening (a _m)	
A (ms ⁻¹)	13.78
k (ms ⁻¹)	0.1
d (mV)	-58
Closing (b _m)	
A (ms ⁻¹)	55.11
k (ms ⁻¹)	-0.055
d (mV)	-65
Inactivation removal (a _h)	
A (ms ⁻¹)	0.92
k (ms ⁻¹)	-0.05
d (mV)	-40
Inactivation establishment (b _h)	
A (ms ⁻¹)	8.76
k (ms ⁻¹)	-0.1
d (mV)	-35

- 226 Table 1. Default parameter values used for the simulations. Particular cases are indicated in the
- 227 corresponding figures.
- The rate of Nav1.7 channel opening a_m is given by

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$$a_m = \frac{A_m (k_m (v - d_m))}{1 - e^{-k_m (v - d_m)}}$$
 (1)

- where v is the membrane potential, d_m is the half-activation voltage, and k_m and A_m are constants
- 231 (Table 1). The opening and closing dynamics of the current is given by the differential equation

232
$$\frac{dm}{dt} = a_m(1-m) - b_m m$$
 (2)

- where m is the opened state of the channel, 1-m the closed state and b_m the closing rate.
- The conductance is a cubic function of m,

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$$g_{Nav1.7} = g_{max} m^3 h$$
 (3)

where h is the inactivation process and g_{max} the maximum conductance.

In Fig 3 we show the effects of varying d_m (Equation 1) in the model neuron by displaying the response to a depolarizing current step of 0.04 nA lasting 60 ms. This level of current is slightly above the firing threshold at $d_m = -58$ mV and $g_{max} = 0.1$ S/cm², which is 0.037 nA. At this threshold the one dimensional bifurcation diagram (not shown) presents a discontinuity that corresponds to a Hopf bifurcation (see section Discussion). The upper blue trace represents a normal subject ($d_m = -55$ mV) where the stimulus does no elicit pain (i.e., no spiking). The pink traces of the middle row represent mild erythromelalgia ($d_m = -58$ mV) where the same stimulus is painful (spiking in the left panel) and can be successfully treated by blocking 20% of the Nav1.7 channels, i.e., decreasing the maximum conductance (g_{max} in Equation 3) from 0.1 to 0.08 S/cm² (no spiking in the right panel). In the red traces of the lower row we simulate severe erythromelalgia ($d_m = -60$ mV), showing faster spiking rate (left) and spontaneous spikes occurring before and after the stimulus. In this case, blocking 20% of the Nav1.7 channels decreases the firing but is not able to stop it (middle panel). The pain eliciting

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- firing can be stopped by blocking a larger percentage of Nav1.7 channels (30% with $g_{max} = 0.07$
- 250 S/cm², right panel).

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- In Fig 4 we provide a qualitative frame to understand the situations described in the previous figure.
- 252 Using a heat map, the spike rate of the neuron model (stimulated with 0.04 nA depolarizing current)
- 253 is represented with a color bar for different values of maximum conductance g_{max} (Equation 3,
- abscissas) and half activation voltage parameter d_m (Equation 1, ordinates) of the Nav1.7 current.
- The white circles with numbers on the heat map indicate the coordinates $(g_{max}$ and $d_m)$ used for the
- simulations depicted in Fig 3. The numbers inside the circles of Fig 4 correspond to the numbers in
- 257 the panels of Fig 3. Erythromelalgia mutations cause pain through a downward shift toward the red
- values of the heat map (e.g., trajectories 1 to 2 and 2 to 4). Conversely, the treatment with Nav1.7
- blockers (e.g., PF05089771) alleviates pain through a shift to the right, towards the blue values (e.g.,
- 260 trajectories 2 to 3 and 4 to 5 and 6).
- 261 In a second series of simulations we explored the inactivation properties of Nav1.7 channels
- 262 (parameter sets displayed in Table 1). The scorpion toxin OD1 has been reported to increase the rate
- at which Nav1.7 inactivation is removed after being established (Motin et al., 2016). In order to
- 264 emulate this effect in the model, we increased 10 times the removal rate of Nav1.7 inactivation (a_h
- in Equation 4).
- 266 The inactivation removal rate is given by

$$267 a_h = A_h e^{k_h(v-d_h)} (4)$$

- where v is the membrane potential, k_h and A_h are constants (Table 1) and d_h is the half-inactivation
- removal parameter. The inactivation process dynamic is given by the temporal derivative of h

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$$\frac{dh}{dt} = a_h(1-h) - b_h h$$
 (5)

where 1-h is the inactivated state and h is the non-inactivated state that allows ionic conduction.

To increase a_h we increased the multiplicative constant A_h by 10 times (Equation 4). This change caused the model neuron to fire in response to a depolarizing pulse of 0.04 nA that was not effective before (upper panels in Fig 5) and elicited a faster firing rate if the neuron was already active in the control condition (lower panels in Fig 5).

The faster removal of Nav1.7 inactivation (A_h varied from 0.92 to 9.2) also increased the model spike amplitude to a moderate amount in the simulation after OD1 (red plot in Fig 6), as observed in the extracellular recordings (Fig 1-B). In Fig 7-A, we show plots of m (thin full lines) and h (dashed lines) during a spike, in a simulation before (blue plots of left panel) and after OD1 (red plots of right panel). Both panels display the Nav1.7 current with full thick lines. Note that in the simulation after OD1, Nav1.7 has larger amplitude, and the values of h are higher, with a faster return to 1 after the negative peak. These large changes of h were not observed in the HH type high threshold sodium current, although the current amplitude was slightly increased (Fig 7-B).

Discussion

In this study, we performed to our knowledge the first test of the scorpion toxin OD1 in hiPSC-derived DRG neurons. This toxin enhances the recovery from fast inactivation of the threshold current Nav1.7 (Motin et al., 2016). Our extracellular recordings also confirmed previous findings of Cao et al. (2016) with patch clamp regarding the increased spontaneous firing of erythromelalgia DRG cells and the analgesic effects of PF-05089771. This drug was shown to be clinically effective to control heat induced pain attacks by stabilizing the voltage sensor domain of the Nav1.7 channel in a non-conducting conformation. The effects of both compounds were explained using a conductance-based computational model, comparable with Choi et al. (2011) but simpler and particularly focalized on the issue of pain signalling. In this section we first discuss our main findings and emphasize the usefulness of extracellular recordings to observe changes in ionic currents. To close the discussion, we provide a short remark about the importance of the interaction between different sodium currents in erythromelalgia.

Effects of erythromelalgia, PF-05089771 and OD1

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Cao et al. (2016) performed voltage clamp experiments in whole-cell configuration in DRG cells derived from erythromelalgia patients and control subjects. Despite the heterogeneity of the samples, they found a significantly higher proportion of spontaneously firing cells in patients compared to those from control donors. Moreover, the patient's cells showed a lower rheobase and reached higher firing rates in response to stimulation with current steps of increasing amplitudes. These findings point to the existence of elevated excitability in erythromelalgia cells, a fact that we confirmed in the present study by showing higher prevalence of spontaneous activity in extracellular MEA recordings (section Results). Spontaneous firing in our cultures is due only to intrinsic cell excitability, as there are no reports about the formation of synapses between DRG cells in vitro. Accordingly, we did not find evidence of functional connections in cross correlation histograms between neuronal firing times. Furthermore, in dissociated cell cultures the development of a synaptic network is usually accompanied by the emergence of population bursts (Maeda et al., 1995) which we did not observe here. DRG glia cells are not present in the cultures, so their reported contribution to abnormal neuronal activity in in vitro studies done on intact DRG (Belzer and Hanani, 2019) can also be ruled out. Regarding the effects of Nav1.7 channel blockers, Cao et al. (2016) reported a dose dependent reduction in spontaneous firing and an increase in the action potential rheobase. We were able to reproduce the first finding on spontaneous firing with PF-05089771 (Fig 2), supporting the fact that the excitability of the cells plummets after the treatment, in accordance with the reported clinical efficacy of the drug (Cao et al., 2016). We did not, however, observe significant changes in spike amplitudes before and after drug treatment. The effect of OD1 (and other synthetic toxin analogs) on the gating properties of the Nav1.7 sodium channels was studied by Motin et al. (2016) using voltage clamp whole cell and single channel recordings in Chinese hamster ovary (CHO) cells expressing human Nav1.7 channels. They found that

the decay phase of the Nav1.7 channel opening slows down in a concentration-dependent manner in the presence of these toxins. Using a paired-pulse protocol in the voltage clamp configuration, the authors demonstrated an enhancement of Nav1.7 recovery from fast inactivation. Single channel recordings showed that the mean open time of the channels was not substantially changed by the toxin, but the channels exhibited a prolonged flickering behavior between open and closed states, which enabled a more efficient inactivation removal. These experiments pointed to a voltage-sensor trapping interpretation, in which the toxin prevents a conformational change in the domain IV voltage sensor, as the main cause for the observed prolongation in the current duration. Motin et al. (2016) also found that the current-voltage relationships of Nav1.7 are shifted to more negative potentials in the presence of OD1, but this effect has a small magnitude (-3 mV), in accordance with earlier observations in Xenopus laevis oocytes with Nav1.7 channels expression (Maertens et al., 2006). Our findings corroborate those of Motin et al. (2016). Indeed, we observed an increase in the proportion of electrodes showing spontaneous firing in the presence of OD1, as well as an increase in firing rate in cells that did fire before adding the toxin. In addition to the firing frequency rise, we found a consistent increase in the spike amplitude after OD1, in contrast with the PF-05089771 treatment which affected only the firing rate. These larger extracellular spikes are in accordance with the increase in peak current observed in the presence of OD1 in voltage clamp experiments (Maertens et al., 2006; Motin et al., 2016). Since the amplitude of the current generated by the opening of a single channel was not modified by OD1 (Motin et al., 2016), the size increase of the extracellular spikes must be due to the dynamics of the gating process. In the next section, we address the numerical simulations to offer an explanation for the changes in spike rate and amplitude described above.

Numerical simulations

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The computational model that we present here is able to provide satisfactory explanations at a qualitative level for the main experimental findings of our study and for previous studies on erythromelalgia and the effects of pharmacological manipulations on Nav1.7 channels. We did not attempt to perform a complete exploration of the parameter space but all values are biologically plausible. In the absence of stimulation the membrane potential tends to its fixed point which is the resting potential. By injecting an amount of current also plausible for a patch clamp experiment (0.037 nA for $d_m = -58$ mV and $g_{max} = 0.1$ S/cm²), the system reaches a Hopf bifurcation (e.g., Ermentrout and Terman, 2010), the critical point corresponding to the spike threshold. At a critical point, the stability of the system switches and a periodic solution of repetitive spiking arises, eliciting pain. In the dark blue area of no firing of Fig 4 the membrane potential is at a fixed point (resting potential). The periodic solution occurs in the areas having other colors (including lighter tones of blue). The Hopf bifurcation happens at the limit between the dark blue and the other colors, roughly resembling a diagonal trajectory in the heat map. The descending transition from 1 to 2 and 4 exemplifies the trajectory towards pain in erythromelalgia and the horizontal transitions from 2 to 3 and from 4 to 5 and 6 depict the analgesic path triggered by PF-05089771. While the decrease of Nav1.7 maximum conductance accounted for the analgesic effects of PF-05089771, OD1 effects on the firing rate were reproduced by enhancing the constant governing the removal rate of the inactivation a_h (Fig 5). The interpretation of these results is quite straight forward, having fewer available Nav1.7 receptors reduces the firing by interfering with the amplification of subthreshold potentials performed by the channel, while the faster inactivation removal increases the current size and duration (Fig 7), leading to increased spiking and excitability. This is in line with the proved analgesic effects of Nav1.7 blockers (Cao et al., 2016) and with the intense pain known to be experienced after a scorpion sting (e.g., Garfunkel et al., 2007). In the case of spike amplitude, the explanation of the results requires a deeper elaboration. Starting from the fact that spike depolarization is sustained by sodium currents, we can see that the

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maximum amplitude that a spike can potentially reach in the absence of inactivation is given by the sodium equilibrium potential. The inactivation process will also limit the maximum value reached by the current and the peak intracellular voltage, because the current starts to inactivate before the opening process is completed. If this reasoning is correct, an increase of the inactivation removal rate of Nav1.7 will create a larger spike, because more channels will be free from inactivation during the critical period of the spike rising phase. This last interpretation is exemplified in the numerical simulations of Figs 6 and 7. The consequences of the faster inactivation removal rate of Nav1.7 after OD1 are noticeable in the higher values of the process h, as well as in its faster return to 1 following the negative peak. The closer to 0 h reaches, the more channels are inactivated, so a larger h value implies more open channels potentially available, which is reflected in a larger Nav1.7 current (Fig 7-A). The high threshold Na⁺ current also grows slightly following enhancement of Nav1.7, without large changes of h. This increase is less pronounced than for Nav1.7, but still contributes to increase the spike size because the total HH type current is bigger. We must keep in mind that the extracellular spike is a filtered version of the intracellular spike and we cannot necessarily compare the amplitude differences linearly. In addition, Nav1.7 and Nav1.8 interact in a complex manner to regulate DRG neuronal excitability, as has been shown in a previous modelling study of the rat HRV neurons (Choi and Waxman, 2011). Despite these caveats, we can assume that in the situation depicted in our simulation both currents are

Model limitations

recordings (Fig 1).

We are interested in understanding the reason for the observed changes in spike rate and amplitude created by the two compounds tested using a model simulation with biologically plausible parameters. In this context, we validated our interpretation of biological facts with a numerical simulation. In order to keep the model simple and with a clear biological meaning and physical unit

adding up to enhance the intracellular spike (Fig 6). This effect was captured in our extracellular

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for all variables, we opted for a modified HH scheme, which also has the virtue of being familiar to neurobiologists. We included only one potassium current (non-inactivating, HH type), to avoid unnecessary complexity. The only added current to the original HH scheme is the Nav1.7, because it is strictly needed to implement the biological mechanisms under consideration. A detailed quantitative modelling would require Ca²⁺ currents and several types of Na⁺ and K⁺ currents that have been found in mammalian DRG cells (e.g., Rush et al., 2007; Scroggs and Fox, 1992; Choi and Waxman, 2011; Newberry et al., 2016; Mandge and Manchanda, 2018; Zemel et al., 2018), and is beyond the scope of this study. Although more refined kinetic models of the Nav1.7 sodium and other channels have been proposed (e.g., Sigg, 2014), we think that we are adopting here a level of simplification in the modelling process that is fitted for our purpose.

Extracellular recordings and ionic currents

Although extracellular recordings are typically used to detect firing times, they also have the theoretical ability to report about what are considered to be intracellular features of the action potential (Gold et al., 2006). We want to highlight this possibility of using extracellular recordings to detect changes in ionic currents. If researchers first evaluate them together with voltage clamp data for validation purposes, they can then benefit from the opportunity to observe more neurons simultaneously. A small amplitude change of the DRG neuron spike might not play an important physiological role in pain signalling, which is mainly conveyed by the spike rate, but we provided here a proof of principle regarding the footprint of a current in the extracellular spike.

The fact that the extracellular spike did not show large changes in waveform shape with the treatments (only scaling up moderately with OD1) facilitated our analysis, allowing reasonable assumptions regarding neuron identities before and after the treatments, but this might not be the case for other drugs or experimental systems (Hilgen, personal communication). It has been reported that an intracellular spike broadening caused by K⁺ current modulators can increase Ca⁺⁺ influx at the synaptic level in mouse hippocampal cultures (Vivekananda et al., 2017). In this context

it makes sense to speculate about the possibility that, if a larger spike could elicit more neurotransmitter release, then the spike amplitude would also contribute to pain signalling by eliciting a discharge of higher frequency in the ascending spinal neurons.

Importance of the interaction between sodium currents

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The interaction between sodium currents can have profound functional consequences, and the clinical signs of erythromelalgia provide a striking example (Rush et al., 2006). As explained above, in pain pathways Nav1.7 increases neuronal excitability mainly by amplifying the depolarization caused by peripheral stimuli, allowing to trigger Nav1.8. This facilitates firing and pain, an effect that is exaggerated in erythromelalgia patients. A key property for this firing to occur (as implemented in our model) is that Nav1.8 does not inactivate until the voltage is quite high (e.g., around -35 mV). In the sympathetic nervous system the situation is different because there are no Nav1.8 channels and spikes are sustained by other sodium currents that inactivate at lower voltage (Rush et al., 2006). Then, the excessive depolarization created by a mutated Nav1.7 in erythromelalgia can be sufficient to trigger inactivation, terminating the firing. The excessively active mutated Nav1.7 increases firing in HRV nociceptive neurons but blocks firing in the sympathetic nerves that mediate the contraction of peripheral blood vessels. This results in excessive vasodilatation, creating the typical sign of red extremities that originated part of the name to the disease (erythromelalgia could be translated as "red neuralgia of the extremities"). The importance of the interaction between sodium currents is highlighted by this example, because the same mutation produces opposite effects in the firing of pain afferents and autonomic motor neurons.

Figure captions

Fig 1. Effects of OD1 in nociceptive neurons. (A) Voltage data of the most active channel in MEA 1 before (upper panel) and after (lower panel) OD1 (100 nM) application. Note the increase in rate and amplitude of the spontaneous activity. (B) Rate and amplitude of paired neurons before and after OD1 (100 nM) application. Corresponding pairs in both plots are color coded. Wilcoxon signed

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rank test p values are printed in each panel. The normalized changes of both indexes are highly correlated (r = 0.78). Fig 2. Effects of PF05089771 in nociceptive neurons. (A) Example of voltage data before and after PF05089771 (100 nM). K⁺ concentration was 6 mM. (B) Rate and amplitude of the neurons paired before and after treatment. K^{\dagger} concentration was 4.16 mM. (C) Same as in B with a K^{\dagger} concentration of 6 mM. Wilcoxon signed rank test p values are printed in panels B and C, corresponding pairs are colour coded. The normalized changes in both indexes are poorly correlated (r = 0.21 in B and 0.53 in C). Fig 3. Erythromelalgia and PF05089771 effects: simulation of membrane voltage. Response of the model neuron to a 60 ms depolarizing pulse of 0.04 nA for three different values of half activation voltage d_m (in mV) and maximum conductance g_{max} (in S/cm²). The numbers with circles in the panels correspond to the numbers inside the white circles of Fig 4. Fig 4. Erythromelalgia and PF05089771 effects: heat map of the spiking activity. The neuron model spike rate is represented (color bar) for different values of maximum conductance g_{max} (abscissas) and half activation voltage parameter d_m (ordinates) of the Nav1.7 current. The numbers in the white circles correspond to the numbers in the panels of Fig 3. The dashed line on top indicates an axis break. Fig 5. Simulation of OD1 effects on the spike rate. Response to a 60 ms depolarizing pulse of 0.04 nA before (blue plots in left panels) and after (red plots in right panels) a 10 fold increase in the inactivation removal rate a_h to simulate OD1 treatment. The value of d_m was varied from 57.8 mV (upper panels) to 58 mV (lower panels), while A_h was varied from 0.92 (left panels) to 9.2 (right panels). Fig 6. Simulation of OD1 effects on the spike amplitude. Spikes with different removal rates of Nav1.7 inactivation (parameter $A_h = 0.92$ in blue plot and 9.2 in red plot, with $d_m = -58$ mV). The red spikes are slightly taller than the blue spikes (7 % average amplitude increase in a 5 s simulation).

Fig 7. Simulation of OD1 effects on Na † currents and their gating variables. Values of m (thin full lines), h (dashed lines) and Na⁺ currents (thick full lines) during a spike. The currents were plotted in 10 x S/cm² and sign inverted for scale display purposes, as m and h always range from 0 to 1. A_h (in Nav1.7 only) was set to 0.92 in the blue plots (simulation before OD1) and to 9.2 in the red plots (simulation after OD1). (A) Nav1.7, note the higher h values after OD1. (B) High threshold Na $^+$ current, note that h is similar before and after OD1. References Abdo H, Calvo-Enrique L, Martinez Lopez J, Song J, Zhang MD, Usoskin D, El Manira A, Adameyko I, Hjerling-Leffler J, Ernfors P. Specialized cutaneous Schwann cells initiate pain sense. Science 365: 695-699, 2019. Belzer V, Hanani M. Nitric oxide as a messenger between neurons and satellite glial cells in dorsal root ganglia. *Glia* 67(7):1296-1307, 2019. Blatt M, Wiseman S, Domany E. Superparamagnetic Clustering of Data. Phys Rev Lett. 76:3251-3254, 1996. Cao L, McDonnell A, Nitzsche A, Alexandrou A, Saintot PP, Loucif AJC, Brown AR, Young G, Mis M, Randall A, Waxman SG, Stanley P, Kirby S, Tarabar S, Gutteridge A, Butt R, McKernan RM, Whiting P, Ali Z, Bilsland J and Stevens EB. Pharmacological reversal of a pain phenotype in iPSC-derived sensory neurons and patients with inherited erythromelalgia. Sci Transl Med 8, 335ra56335ra56, 2016. Carnevale T. Neuron simulation environment. Scholarpedia 2(6):1378, 2007. Choi JS, Waxman SG. Physiological interactions between Nav1.7 and Nav1.8 sodium channels: a computer simulation study. J Neurophysiol. 106: 3173-3184, 2011. Dib-Hajj SD, Yang Y, Black JA, Waxman SG. The Na(V)1.7 sodium channel: from molecule to man. Nat Rev Neurosci. 14 (1): 49-62, 2013.

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Supporting information

S1 Appendix. Equations Appendix. Equations are from the HH model formulation provided by the NEURON software and the Channel Builder GUI (https://www.neuron.yale.edu/neuron/static/docs/chanlbild/main.html). Parameter values are listed in Table 1 and provided with the corresponding figures.

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