

Interneuron Diversity series

Multiple facets of GABAergic neurons and synapses: multiple fates of GABA signalling in epilepsies

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Because blocking GABAergic neurotransmission in control tissue generates seizures and because GABA boosters control epilepsy in many patients, studies on epilepsies have been dominated by the axiom that seizures are generated by a failure of GABA-mediated inhibition. However, GABAergic interneurons and synapses are heterogeneous and have many roles that go beyond the straightforward concept of ‘inhibition of the target’. Operation of such a diversified system cannot be ascribed to a single mechanism. In epileptic tissue, GABAergic networks undergo complex rewiring at the anatomical, physiological and functional levels; GABAergic synapses are still operative but show unique features, including excitatory effects. Therefore, inhibition is not a uniform notion and the concept of ‘failure’ of inhibition in epilepsies must be reassessed. Seizures are not generated in a normal circuit in which GABA-mediated inhibition is simply impaired, but in a profoundly rewired network in which several properties of GABA function are altered. This review is part of the *TINS Interneuron Diversity series*.

Introduction

The starting point for conventional understanding of epileptic seizures is a simple model whereby inhibition and excitation have roles somewhat similar to those of the brakes and accelerator in an engine, respectively. Consequently, agents and conditions that reduce the former or augment the latter will inevitably favour the generation of seizures. In keeping with this, blockers of GABA-mediated transmission generate seizures in a wide range of preparations and in humans, suggesting that GABAergic inputs prevent this generation. Conversely, strong activation of glutamatergic synapses generates seizures. The consequence of this simplistic scheme is that agents that augment inhibition will have antiepileptic properties.

It is now clear that this message is oversimplified. First, the concept of GABA-mediated ‘inhibition’ must be re-evaluated. Recent data suggest that GABA neurotransmission can be excitatory in basal conditions, not only in

immature but also in adult tissue. GABAergic synapses are indeed endowed with a unique and fundamental feature – resulting from their Cl^- permeability – that enables them to shift from an inhibitory mode of operation to one that mainly excites. This feature is not shared by the cationic glutamate receptors, which do not shift to inhibition in pathological conditions. Second, the simple static view of ‘inhibition of the target’ is ‘the tree that hides the forest’. One major function of GABA-mediated neurotransmission is to synchronize neuronal networks. In such dynamic perspective, the role of GABA extends well beyond mere ‘excitation’ and ‘inhibition’. Third, studies on interneurons have unraveled an unsuspected heterogeneity of neuronal types that have very different roles. Such heterogeneity is an important parameter to consider when looking at the roles of GABAergic neurotransmission. Clearly, study of the fate of GABA-mediated functions in an epileptic neuronal network must take into account such complexity. The modifications that take place at various levels within GABAergic networks will be discussed in this review. But before addressing these issues, it is necessary to recall the *modus operandi* of GABA-mediated neurotransmission and interneuron heterogeneity in control tissue.

Multiple actions of GABAergic synapses

Once opened, GABA_A receptors allow Cl^- and bicarbonate ions to flow through the membrane with a 4:1 ratio [1]. What are the physiological consequences of this flux of negative charges, assuming an average resting membrane potential (RMP) of -70 mV for the cell (Figure 1)? The estimated reversal potential for bicarbonate ions is much more depolarized than RMP ($E_{\text{bicarbonate}} = -10$ mV), which means that these ions always flow out of the cell, thus depolarizing the membrane. By contrast, the reversal potential for Cl^- (E_{Cl}) is closer to RMP, which results in an age-, brain-structure- and context-dependent flow of ions. At early stages of development, E_{Cl} is more depolarized than RMP and Cl^- flows out of the cell, thus depolarizing the membrane [2] (Figure 1). In the adult, the situation is more complex as E_{Cl} is close to RMP. Thus, in mature layer 5 pyramidal cells or cerebellar interneurons, E_{Cl} is more depolarized than RMP and the resulting depolarizing GABA response increases the probability of action

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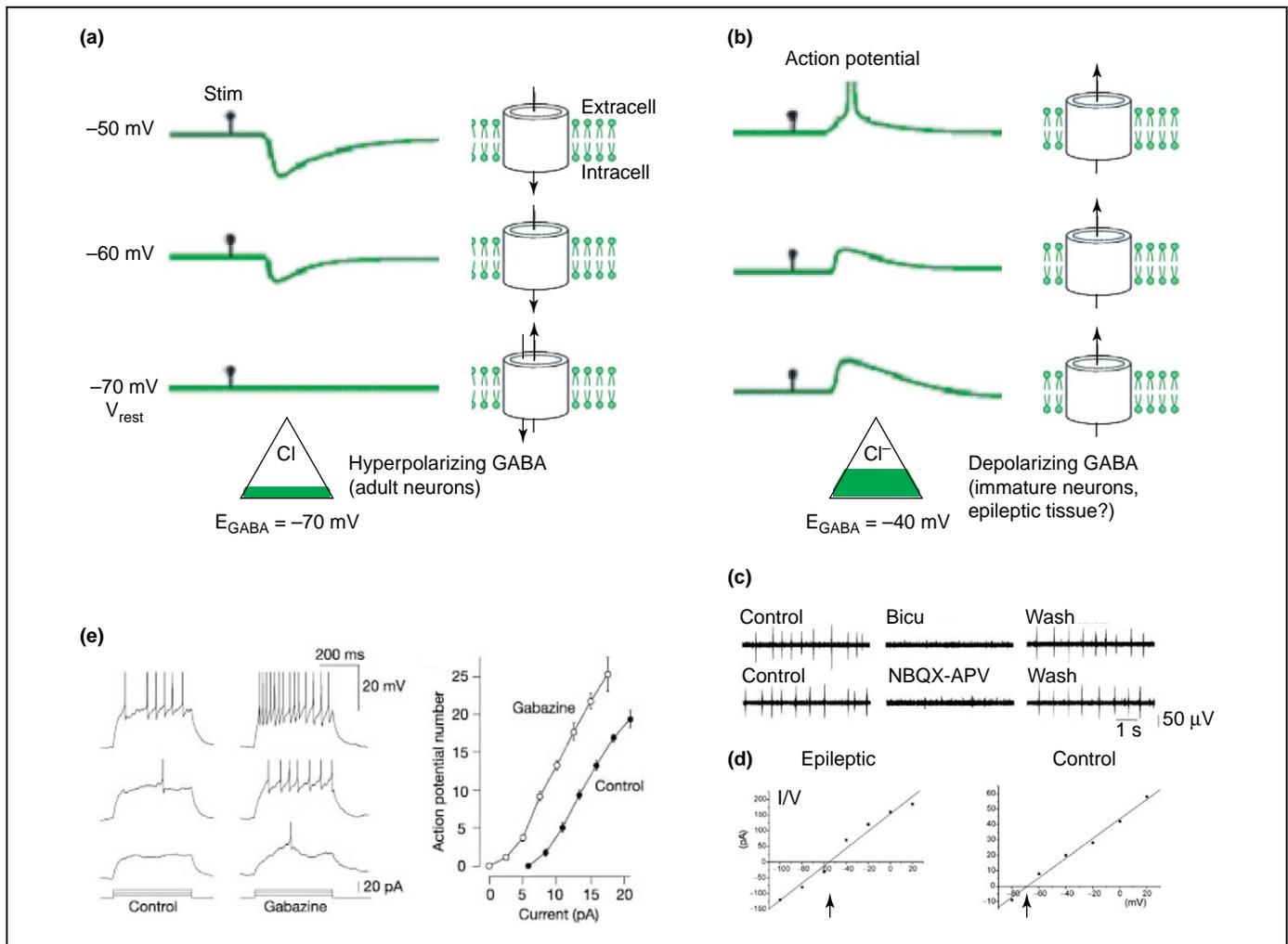


Figure 1. Multiple actions of GABAergic synapses. (a) The consequence of GABA_A receptor activation ('stim'), according to the reversal potential of GABA currents. For a low concentration of Cl⁻ in the cell, the reversal potential (E_{GABA}) is -70 mV (as in adult neurons). If the membrane potential is also -70 mV (V_{rest}) when GABA_A channels open, the net flux of Cl⁻ is null (because as many Cl⁻ ions flow into the cell as out of it). If the membrane potential is -60 mV or -50 mV, Cl⁻ flow into the cell, thus hyperpolarizing the membrane. (b) If Cl⁻ accumulates in the cell with a reversal potential close to -40 mV (a situation encountered in immature tissue), Cl⁻ flows out of the cell, thus depolarizing the membrane, eventually leading to action potential firing. This might be the case in epilepsy. Adapted from Ref. [75]. (c) In human epileptic tissue, spontaneous interictal activity is blocked in the presence of the GABA_A receptor antagonist bicuculline, or in the presence of ionotropic glutamate receptor antagonists [6-nitro-7-sulfamoyl-benz(f)quinoxaline-2,3-dione (NBQX) and DL-2-amino-5-phosphonovaleric acid (APV)]. This suggests that interictal activity results from the synergistic actions of glutamate and GABA. Adapted from Ref. [5]. (d) A mirror focus develops *in vitro* in the contralateral hippocampus when the ipsilateral hippocampus receives repeated doses of the convulsive agent kainate. In the contralateral hippocampus, GABA has a depolarizing action because of a shift of E_{GABA} (arrows) towards a more depolarized value. Adapted from Ref. [6]. (e) Blocking GABA_A receptors with gabazine reduces the tonic GABAergic current, hence the shunt of the membrane, resulting in an increased firing probability in response to depolarizing current pulses of increasing amplitude. Adapted from Ref. [76].

potential firing [3,4]. Finally, E_{Cl} can be dynamically regulated, with GABA switching from a hyperpolarizing to a depolarizing action, for example in pathological conditions, as will be discussed in this review [5–7].

Opening of GABA_A receptors also shunts the membrane by decreasing its resistance, R (Figure 1). Following Ohm's law, AMPA receptors that are activated simultaneously with GABA_A receptors will result in a lesser depolarization because of the drop in R . This shunt effect, which is efficient during the first half of the conductance change that occurs when GABA_A receptors are synaptically activated [4,8], has a very strong impact on information processing [8–11].

Finally, GABA_A receptor activation also affects active membrane properties. Neurons express a large variety of voltage-gated channels (VGCs). If E_{Cl} is more depolarized than RMP, the resulting depolarizing postsynaptic potential may open low-threshold VGCs. Conversely, if E_{Cl} is less depolarized than RMP, the resulting hyperpolarizing

postsynaptic potential can open I_h (a non-specific cationic channel activated by hyperpolarization) [12], decrease the probability of activation of low threshold VGCs, or deactivate previously inactivated low threshold VGCs. Thus, the consequences of GABA_A receptor activation on active membrane properties is clearly context-specific, depending on the history of the membrane (the ratio of activated to inactivated to closed VGCs at the time of GABA_A receptor activation) and the spatial location of GABA_A receptors and the distribution of VGCs along the somatodendritic axis [13]. There are therefore multiple facets to GABA-mediated neurotransmission and all of these – ionic flux, shunt and interaction with VGCs – have to be encompassed in a dynamic perspective.

Multiple types of interneurons

The diversity of interneurons needs to be taken into account to achieve a reliable picture of the reorganized

epileptic network. It is now commonly accepted that the GABAergic interneuron population cannot be studied in the same way as its glutamatergic counterpart because the biophysical, electrophysiological and neurochemical properties measured might be selective for a specific morphological type of interneuron, if not for the recorded cell only. Several studies suggest that these parameters might even not give a constant description of a given cell, as they can vary dynamically according to the brain state [14]. Besides, the variability in physiological and morphological parameters inside a given cell class might alone carry a specific function, because theoretical studies have shown that this variability can influence the inhibitory control of pyramidal cells and be altered in hyperexcitable tissues [15].

A comprehensive review of different types of interneurons will not be included here as there is not even an agreed taxonomy for these cells [16,17]. This heterogeneity probably reflects a division of labor inside a population serving multiple functions, ranging from the basic prevention of action potential firing to coincidence detection and signal integration [18,19], synaptic plasticity [17,20–23], network oscillations and epileptic synchronization [24–26]. Probably the most meaningful description of the functional variety of hippocampal interneurons, regarding their role in the generation of synchronous network activities and their fate in remodeled epileptic circuits, is based on their axonal wiring [27,28]. Four major GABAergic interneuron families can be distinguished in the hippocampus (Figure 2):

(i) Interneurons with a dense local axonal arbor that targets the perisomatic domain of principal cells; they control action potential generation in principal cells [23], provide temporal fidelity and show correlated activity during gamma oscillations and high-frequency ripples [25,29,30].

(ii) Interneurons with a dense local axonal arbor that targets the distal dendrites of principal cells; they control the synaptic inputs from the entorhinal cortex and are thus designed to pace the rhythmic theta excitation of hippocampal distal dendrites [31]. They show anti-phase activity with principal cells during theta waves [25].

(iii) Interneurons with an extended bistratified axonal arborization that targets the dendritic tree of principal cells. They control signal integration and Ca^{2+} spike

initiation at the dendrite [23,32], show correlated activity in phase with principal cells during theta oscillations and are major contributors to the sharp wave-associated ripple episodes [33].

(iv) Long-range interneurons with a dispersed axonal arborization extending to the medial septum. These interneurons are likely to coordinate interneuron assemblies and seem to be spared in animal models of temporal lobe epilepsy (TLE) [27,34,35].

There are therefore multiple types of GABAergic cells in the hippocampus. Given the fact that these cells are differentially affected during epileptogenesis, it is very likely that the rewired epileptic GABAergic circuit will produce aberrant network activities that should lead to ictogenesis [36].

Multiple fates of GABAergic components in epilepsy

Modifications within the GABAergic system can occur at all levels of integration, from GABA_A receptors to interneuron networks.

When GABA receptors change subunits after seizures

GABA_A receptors can be assembled from a large number of different subunits. Different subunit compositions allow receptors to have different properties in terms of affinity for GABA, allosteric modulation, interaction with intracellular proteins, probability of channel opening, kinetics and conductance. This issue is particularly worth considering as the function of the neuronal network can be modified following a change in subunit composition [37,38]. There is now a large body of evidence indicating that GABA_A receptor function is altered in TLE in humans [39,40]. These alterations include modifications in subunit composition, for example the upregulation of $\alpha 1$ and $\alpha 2$ subunits [41], which could be responsible for changes in allosteric modulations by compounds such as benzodiazepine [42]. Animal models enable more detailed analysis of the dynamics with which GABA_A receptor numbers and subunit composition are modified. Animal models of epilepsy usually involve three main phases: the induction phase (drug-induced or electrically induced status epilepticus), the latent period (during which the animal does not display spontaneous seizures) and the chronic phase. The GABA_A receptor subunit composition is differentially modified in dentate gyrus granule cells

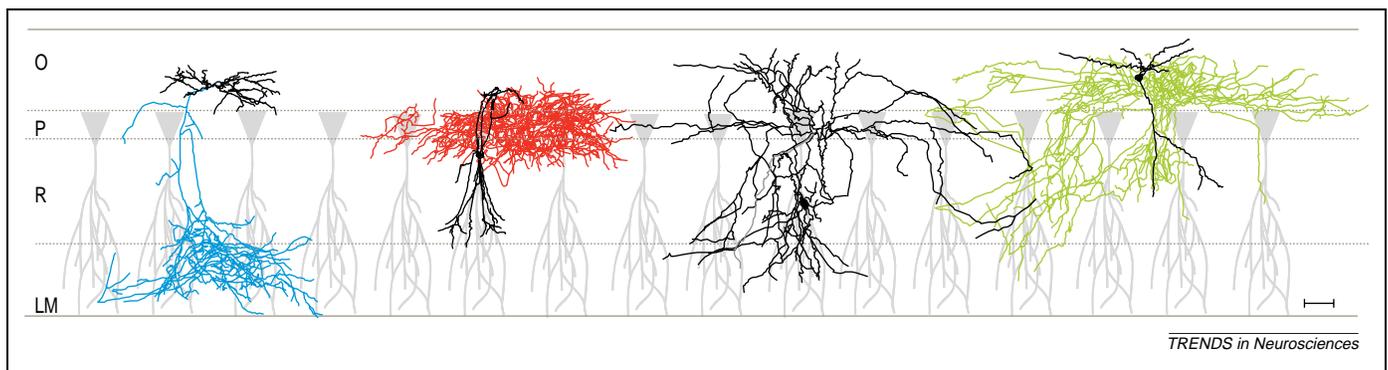


Figure 2. Different types of interneurons. Four major types of rat CA1 hippocampal interneurons, characterized by their laminar axonal distribution. NeuroLucida drawings of biocytin-filled neurons; axon are in color, dendrites are in black and pyramidal neurons are represented in gray. (R. Cossart, M. Esclapez *et al.* unpublished.) Scale bar, 100 μm . Abbreviations: LM, stratum lacunosum moleculare; O, stratum oriens; P, stratum pyramidale; R, stratum radiatum.

according to the phase, indicating that the process is dynamic [43–46]. The number of receptors is modified [47], and the change in subunit composition results in increased sensitivity to GABA and Zn^{2+} and in decreased sensitivity to the benzodiazepine-type site-1 modulator, zolpidem [45,48,49]. By contrast, the sensitivity to GABA is decreased in pyramidal cells of the CA1 hippocampus, indicating that the modifications are region-specific. These modifications most likely involve synaptic receptors. Downregulation of the $\alpha 5$ subunit, a constituent of extrasynaptic receptors in CA1 pyramidal cells [50], could have a profound impact on information processing in the cell [51]. The functional consequences of all these modifications remain to be established, although a change in subunit composition appears to be linked to seizure susceptibility [52,53]. Finally, modifications other than a change in subunit composition might alter GABA_A-receptor-mediated responses. Intracellular factors, such as phosphorylation processes [54] or anchoring of the receptors by gephyrin, GABA-receptor-associated protein (GABARAP) and other proteins, can change GABA_A receptor function.

When Cl⁻ accumulates and GABA depolarizes neurons

It has long been suspected that regulation of intracellular Cl⁻ concentration ($[Cl^-]_i$), in particular following intense activity of GABAergic synapses, is time-, activity- and context-specific [7,55]. It is also age-dependent, as there is now a general agreement that $[Cl^-]_i$ is higher in the immature brain than in adults in all species and brain structures studied [2]. Removal of Cl⁻ is regulated by the K⁺-Cl⁻ cotransporter KCC2, which is expressed later in development [56]. Interestingly, there is a significant shift of the reversal potential of GABA-mediated currents in slices obtained from epileptic patients [5] (Figure 1). Application of a GABA receptor antagonist blocked ongoing activity, instead of generating epileptic activity as is observed in control conditions. This inhibitory-to-excitatory shift of GABA actions suggests that this modification recapitulates ontogenesis. GABA-mediated depolarization could be a major contributor to ictogenesis, although this issue remains to be addressed. Do the alterations described here take place rapidly following a few seizures? Is there a continuum of changes that occur at various delays after the initial insult? How do GABAergic synapses alter their mode of operation after brief seizures that are not associated with cell loss or new synapse formation? These questions have been addressed by a recent study in which seizures were generated by application of kainate to an intact hippocampus *in vitro* and the contralateral hippocampus, which had not been submitted to the drug, was analyzed [6] (Figure 1). After repeated application of kainate, a powerful mirror focus was generated in the naïve hippocampus via an LTP-like NMDA-dependent process [57]. Most interestingly, GABA action switched permanently from inhibitory to excitatory in the mirror focus, and GABA antagonists blocked seizures [6] (Figure 1). These observations indicate that alterations occur rapidly, become long-lasting (most likely after a few seizures) and do not involve neuronal damage.

When some neurons die fast and others survive well

The fate of the hippocampal GABAergic neurons after the epileptogenic insult in animal models, as well as in human patients, is characterized by the restricted vulnerability of select cellular subgroups (Figure 3). Several studies pointed out the somatostatin-containing subpopulation as one of the most vulnerable in different brain regions, in different models of TLE and in human patients [34,58–62]. Hence, the degeneration of somatostatin-containing interneurons accounts for 83% of the total GABAergic cell loss in the hilus [58] and ~50% in the stratum oriens of CA1 [60]. Furthermore, ultrastructural and electrophysiological studies indicate that these cells correspond to interneurons that innervate the distal region of pyramidal cell dendrites [34,61,63]. Another vulnerable population shared by different brain regions and models is that of the parvalbumin-containing interneurons that project to the axon initial segment of pyramidal cells [34,61,64–66]. Decreased expression of other markers, such as neuropeptide Y, calretinin or cholecystokinin, has been reported in a few studies but has not been associated with loss of a specific type of GABA-mediated innervation [66,67]. Finally, a few isolated studies suggested a possible sprouting of GABAergic fibers [68] (Figure 3). In animal models, the death of selective interneuron populations occurs relatively quickly (a few hours after the insult), before the animal presents spontaneous seizures [60]. This indicates that interneuron death participates in network reorganization but is not sufficient for seizure generation.

The differential fate of interneurons in epileptic tissue is likely to be the immediate consequence of their biophysical and neurochemical heterogeneity rather than their network embedment. For example, somatostatin-containing oriens neurons projecting to the stratum lacunosum moleculare (O-LM cells) and septum-projecting interneurons receive similar glutamatergic inputs [69], yet only O-LM cells degenerate in the epileptic tissue [34]. The selective loss of O-LM cells might result from their specific expression of postsynaptic receptors such as kainate [70], their neurochemical content, or the dynamic properties of their synaptic inputs. All these parameters might contribute to a different Ca²⁺ economy for distinct interneuron cell types [71]. However, the content of Ca²⁺-binding proteins cannot explain the differential vulnerability of interneurons [43]. It will be essential to determine the cause of this selective vulnerability. An additional major factor to consider is the reactive plasticity that takes place after an episode of status epilepticus or recurrent seizures.

When cell bodies and dendrites of neurons speak different languages

Functional consequence of the rearrangement of interneuron networks can be directly measured at the level of the different postsynaptic domains targeted by GABAergic axons. Schematically, interneurons that contact the soma of principal cells control their output (i.e. action potential generation), whereas distally, interneurons that contact the dendrites control the input of principal cells and the propagation of Ca²⁺ currents from the dendrite to the

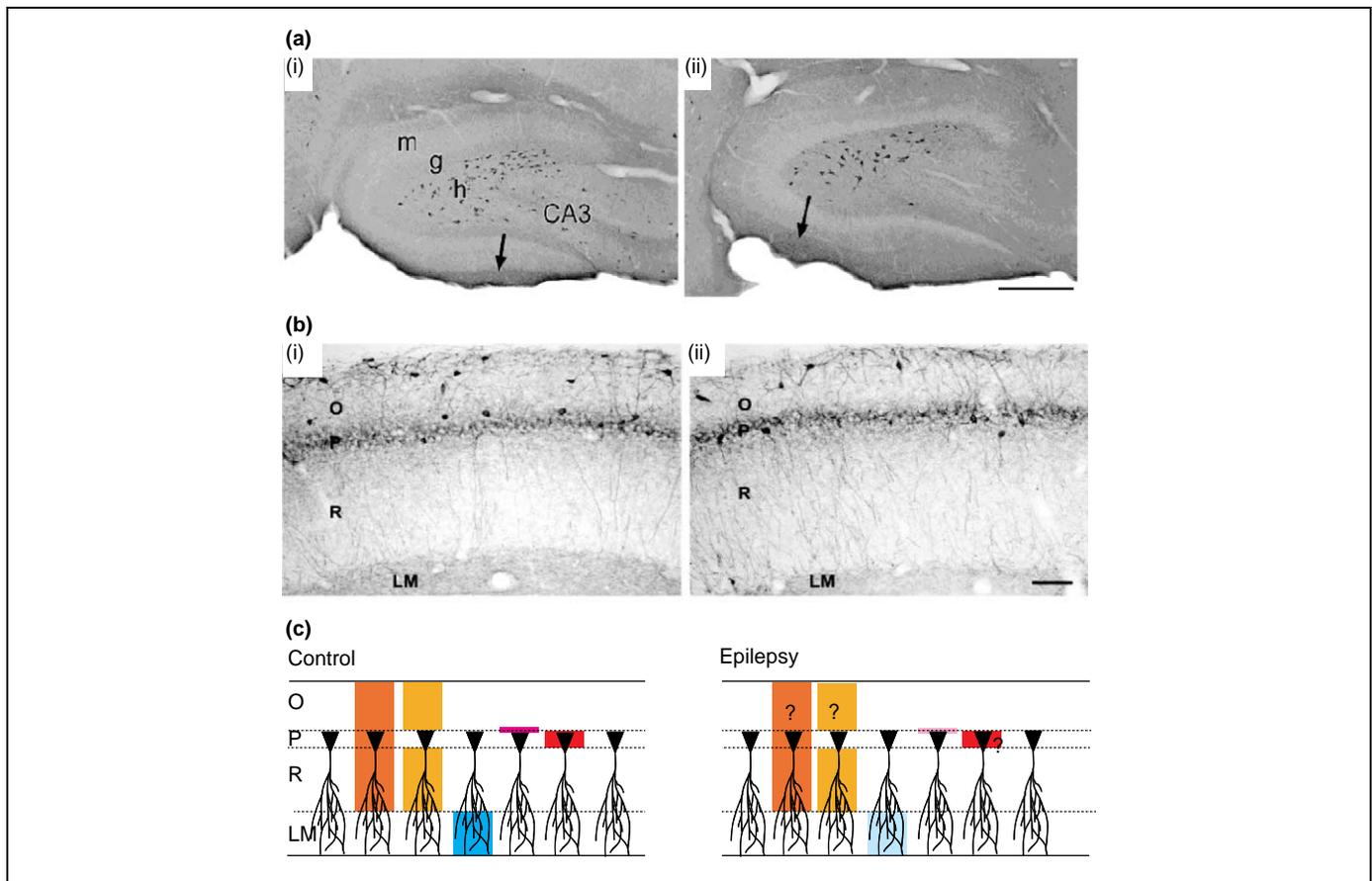


Figure 3. Loss of interneurons from epileptic tissue. **(a)** Loss of hilar somatostatin-immunoreactive interneurons in the kainic acid model (ii) as compared with a control rat (i). The number of cells is decreased but the immunoreactivity of the surviving ones is increased. Arrows indicate the somatostatin-immunoreactive fiber plexus in the outer molecular layer. Scale bar, 500 μm . Adapted from Ref. [77]. **(b)** Loss of parvalbumin-containing interneurons in the stratum oriens of the CA1 region in the pilocarpine model (i) as compared with a control rat (ii). Scale bar, 100 μm . Adapted from Ref. [60]. **(c)** Reorganization of the different interneuron networks distinguished according to the projection zone of their axons on their pyramidal cell targets. Until now, only axo-axonic GABAergic synapses (pink) and GABAergic synapses located in the stratum lacunosum moleculare (blue) have been clearly established as affected in the epileptic tissue (lighter shading). Question marks indicate that sprouting and/or loss of GABAergic fibers remains to be assessed for GABAergic synapses contacting the soma (red) or the proximal dendrites (orange and yellow) of principal cells. Abbreviations: g, granule cell layer; h, hilus; LM, stratum lacunosum moleculare; m, molecular layer; O, stratum oriens; P, stratum pyramidale; R, stratum radiatum.

soma [23]. Hence, in principal cells, although the somatic innervation is relatively preserved and even increased owing to maintenance and hyperactivity of interneurons that contact the cell body area [34,72], there is a selective decrease of distal dendritic GABA-mediated transmission resulting from the loss of O–LM interneurons. The physiological consequence of this alteration in the dendrites is measured experimentally as a permissiveness of the CA1 hippocampal network to the excitatory input of the entorhinal cortex [34]. Theoretical studies predict that this impairment of dendritic inhibition might directly drive ictogenesis [36]. Furthermore, the loss of O–LM cells should have direct implications in the generation of theta-frequency oscillations in the hippocampus [31]. Finally, an additional feature to consider is the loss of tetrodotoxin-independent miniature GABA currents in epileptic hippocampus [72], suggesting a deficiency in GABA release mechanisms in epilepsies.

When the GABA-mediated transmission is enhanced

Several studies report that epilepsy can be associated with a paradoxical increase in GABA-mediated transmission. In different models of epilepsy, potentiation of the

GABAergic synapses onto dentate granule cells has been reported [45,47,73] and linked to upregulation in the number of synaptic GABA_A receptors in the kindling model [47,73]. Likewise, as mentioned in the previous paragraph, CA1 perisomatic GABAergic interneurons discharge at a higher frequency in the pilocarpine model of TLE than do their dendritic equivalents [34]. This results in enhancement of the GABAergic input to CA1 principal cell somata. Such changes in GABAergic function can be viewed either as possible compensatory changes or, if associated with an excitation shift of the postsynaptic effect of GABA_A-receptor activation (see the section ‘When Cl⁻ accumulates and GABA depolarizes neurons’), as direct sources for network hyperexcitability [12,74].

Discussion

The take-home message is the inadequacy of ‘inhibition’ to describe GABA-mediated neurotransmission in general. The concept is too volatile to base epilepsy research on the hypothesis that GABA-mediated inhibition is decreased. The multiple facets of GABA mechanisms that act on neuronal excitability, network-driven activity, generation of patterns and oscillations, and inhibition of excitatory

Box 1. GABAergic inhibition is neither dormant nor hyperactive!

Several unifying hypotheses on the fate of inhibition have been proposed. Perhaps the most influential was that seizures are generated because basket cells, which exert a major role on principal cells excitability [23], are dormant [78,79]. This hypothesis was proposed to account for the *in vivo* observations that after intense perforant path stimulation, paired pulse inhibition (PPI) appeared decreased in the CA1 region upon activation of fibers ipsilateral to the stimulated side, but that PPI was present upon activation of fibers contralateral to the stimulated side. The central idea is that 'despite malfunction, inhibitory systems remain intact in "epileptic" tissue and are capable of functioning if appropriately activated' [79]. However, the mechanisms underlying PPI are unknown and the causal relationship between the loss of PPI in epileptic tissue and a decrease in inhibitory function has not been established [78]. Furthermore, if dentate gyrus basket cells are partially de-afferented following the loss of mossy cells (reactive synaptogenesis was not tested) [62], their loss results in a decrease of dentate granule cell excitability [80], not in an increase as implied by the hypothesis. Perhaps most importantly, GABAergic synapses are operative in epilepsies [81] and their activation is even needed for the generation of epileptic activity [5,6] (Khalilov *et al.*, personal communication).

In a more recent development, Sloviter proposed an opposite hypothesis: inhibition in the epileptic network is now suggested to be so efficient that seizures do not propagate to the hippocampus – a sort of hyperactive inhibition [82]. Surprisingly, this suggestion is in complete disagreement with the large list of studies showing that the hippocampus is the trigger zone for major epileptic attacks in patients as well as in animal models. Clearly, more subtle changes occur in inhibition than a complete loss, or massive gain, of function of GABA-mediated transmission.

Modern research on interneurons points to a set of behaviours that are brain-state-dependent and context-dependent [23,25], rather than to a single specific behavior. The behavior of basket cells is indeed modified in epileptic tissue as they become hyperexcitable [81,83] and receive an increased excitatory drive *in vitro* [34]. Finally, it must be recalled that, because GABA-mediated neurotransmission can be excitatory in control [3,4] and in epileptic tissue [5,6], 'hypofunctionality' of a GABAergic pathway could in reality decrease the global excitability of the network.

inputs, but that also contribute to generation of action potentials in certain conditions, cannot follow a single decremental curve during seizures (Box 1). In fact, presently available observations already suggest that some of these features are increased or even reversed and that this step is instrumental in the generation of seizures. Present interest has moved towards gaining a better understanding of the mechanisms that underlie the inhibitory-to-excitatory shift of GABA actions and, in a more general perspective, the function of this device that enables GABA to change the direction of Cl⁻ fluxes. What are the dynamics of Cl⁻ movements? Do these dynamics signal the recent history of the neuron in terms of its activity? And how does that alter the generation of network events? Why does the post-epileptic network seem to return to an immature one, and how is that related to the well-established unique susceptibility of developing networks to generate seizures? Undoubtedly, combined studies, on the multiple facets of GABAergic synapses and interneurons during development and during episodes of hyperactivity, are warranted. They will considerably improve our understanding of the relationship between activity and brain operation in health and disease.

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