

Histone Deacetylase Inhibitors: Assessing Their Potential for Clinical Use in Neurodegenerative Disorders

Elizabeth A. Thomas, Ph.D.

Associate Professor

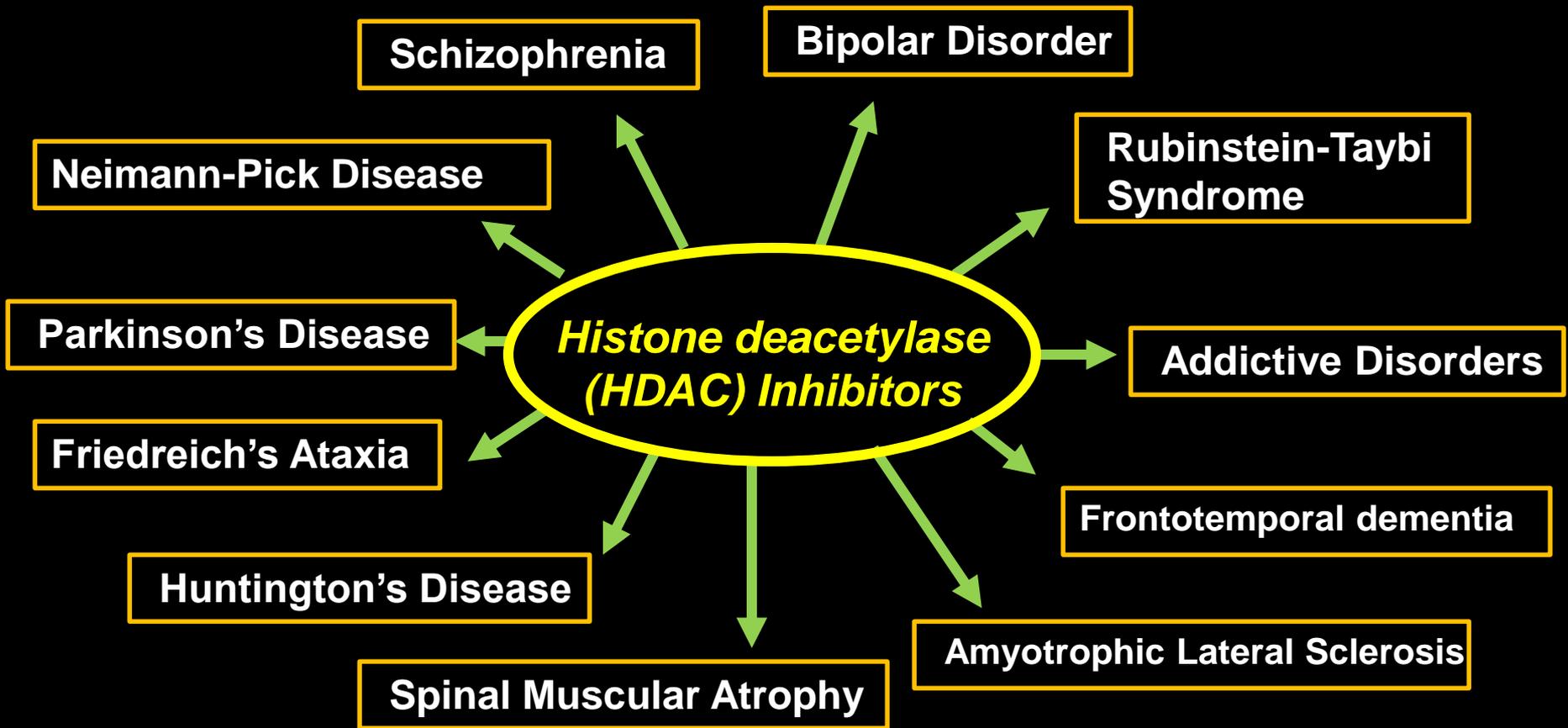
Department of Molecular and Cellular Neuroscience

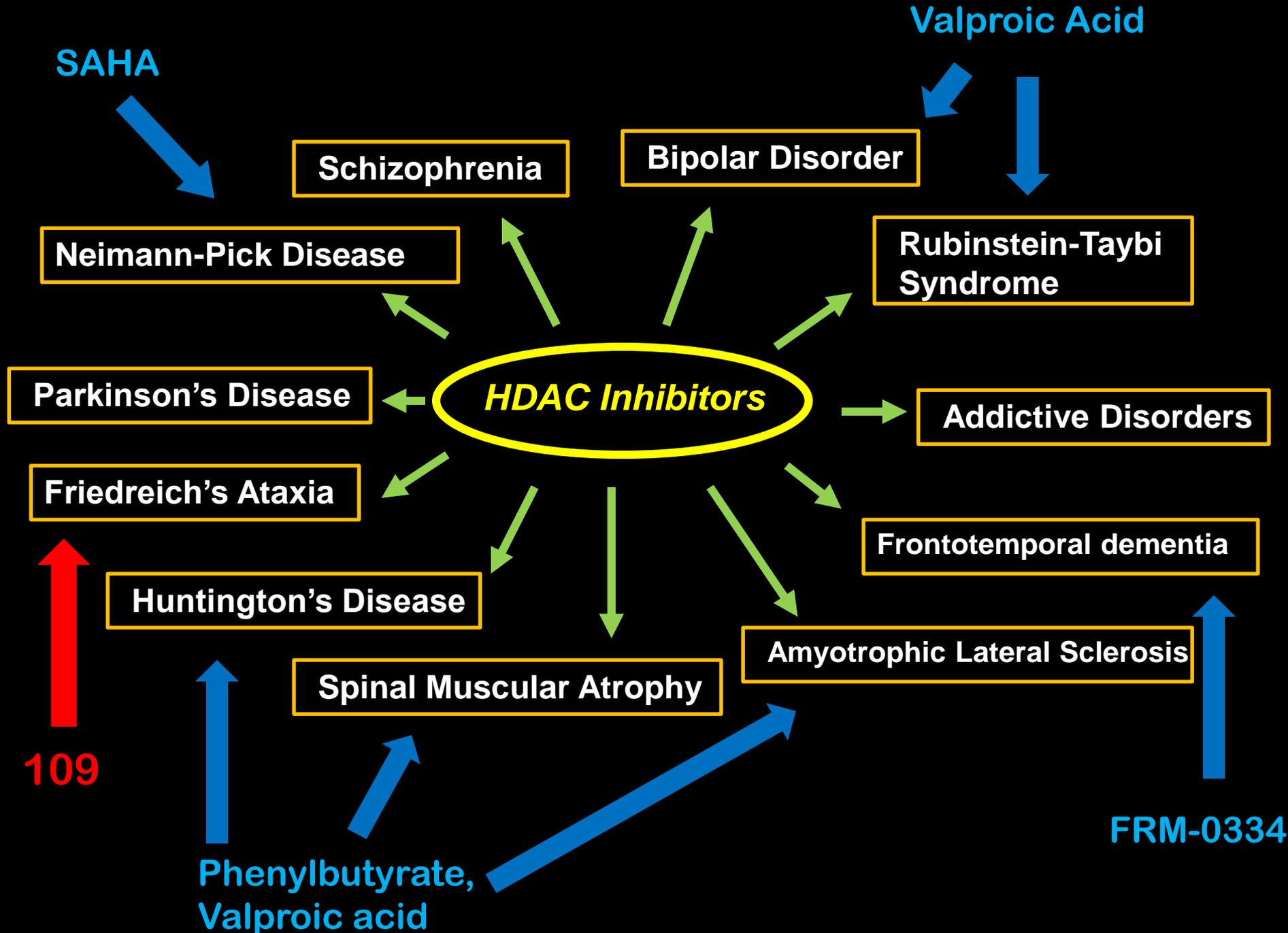
The Scripps Research Institute

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SAHA

Valproic Acid

Schizophrenia

Bipolar Disorder

Neimann-Pick Disease

Rubinstein-Taybi Syndrome

Parkinson's Disease

Addictive Disorders

Friedreich's Ataxia

Frontotemporal dementia

Huntington's Disease

Amyotrophic Lateral Sclerosis

Spinal Muscular Atrophy

109

FRM-0334

Phenylbutyrate,
Valproic acid

HDAC Inhibitors

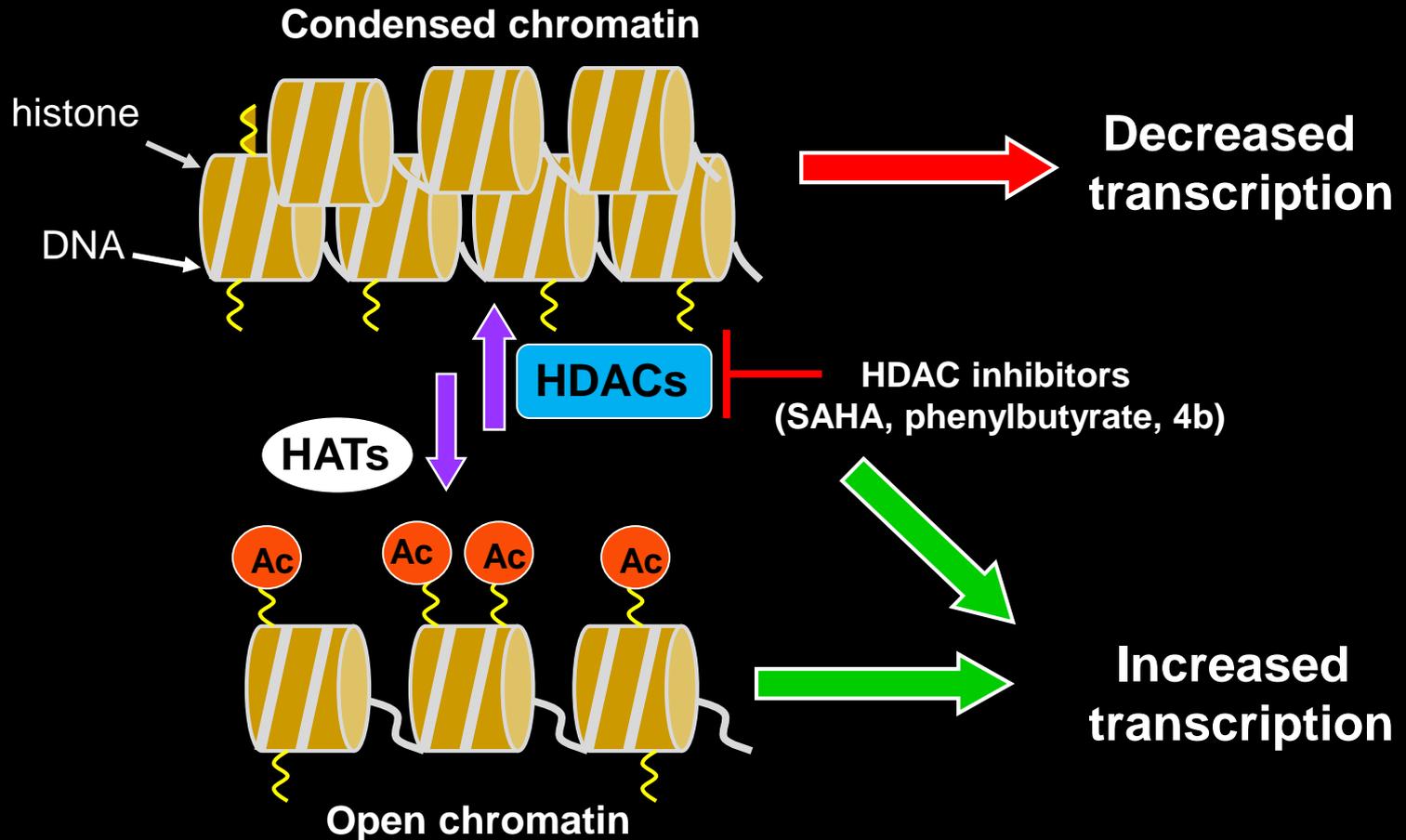
Clinical trials with HDAC inhibitors (non-cancer)

- Phase I – Phenylbutyrate in Huntington’s disease. 60 patients; 20 weeks.
- Phase I –Phenylbutyrate in Amyotrophic Lateral Sclerosis (ALS). 26 patients; 20 weeks.
- Phase I – Valproate in Spinal Muscular Atrophy (SMA). 33 patients; 6 months.
- Phase I/IIa – Valproate and Phenylbutyrate in Spinal Muscular Atrophy (SMA). 10 patients; 14 weeks.
- Phase I/II – Vorinostat (SAHA) in Niemann-Pick Disease. 15 patients; 3 months.
- Phase IIa - FRM-0334 in Frontotemporal Dementia. 30 patients; 28 days.
- Phase II – Valproate in Rubinstein-Taybi Syndrome. 60 children; 1 year.
- Phase I – 109 in Friedreich’s ataxia. 20 patients; 29 days.

Goals

- Understanding the role(s) of epigenetic modifications in disease mechanisms and response to therapies.
 - HDAC inhibitors in Huntington's disease; preclinical studies from mouse models.
- Discover how epigenetic analysis can be applied in clinical trials to identify markers of response.
 - HDAC inhibitors in Friedreich's ataxia; clinical data from patients.

HDAC inhibitors activate gene expression by changing chromatin structure

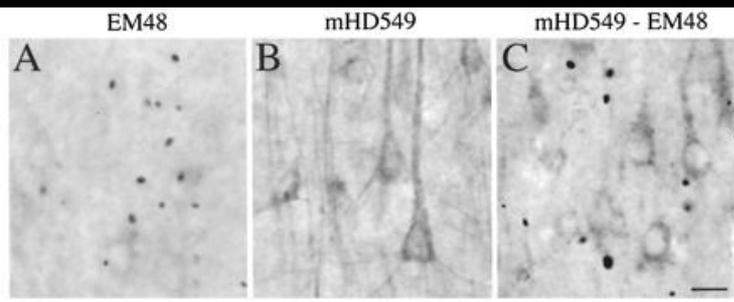


* Several neurodegenerative disorders are associated with histone hypoacetylation and altered gene expression, including Huntington's disease

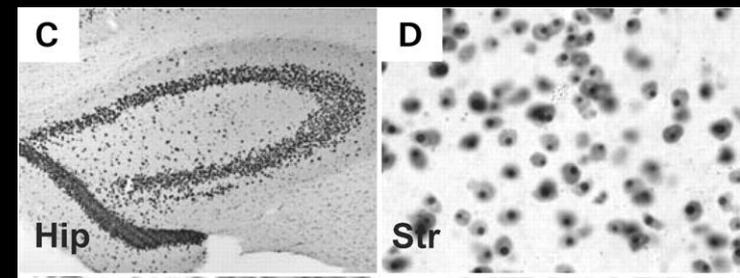
Huntington's disease (HD)

- Caused by CAG repeat expansion in exon 1 of the HD gene, resulting in a translated huntingtin protein with an expanded polyQ tract.
- Autosomal dominant; afflicts ~1 in 10,000 people.
- Obvious symptoms are random, uncontrollable movements called *chorea*, lack of coordination, unsteady gait. Other cognitive and psychiatric symptoms are often present.
- Hallmark feature of disease is the formation of huntingtin aggregates in the brain.
- Largely adult-onset. Typically, patients live 15 years after diagnosis.
- No cure; no good therapies.

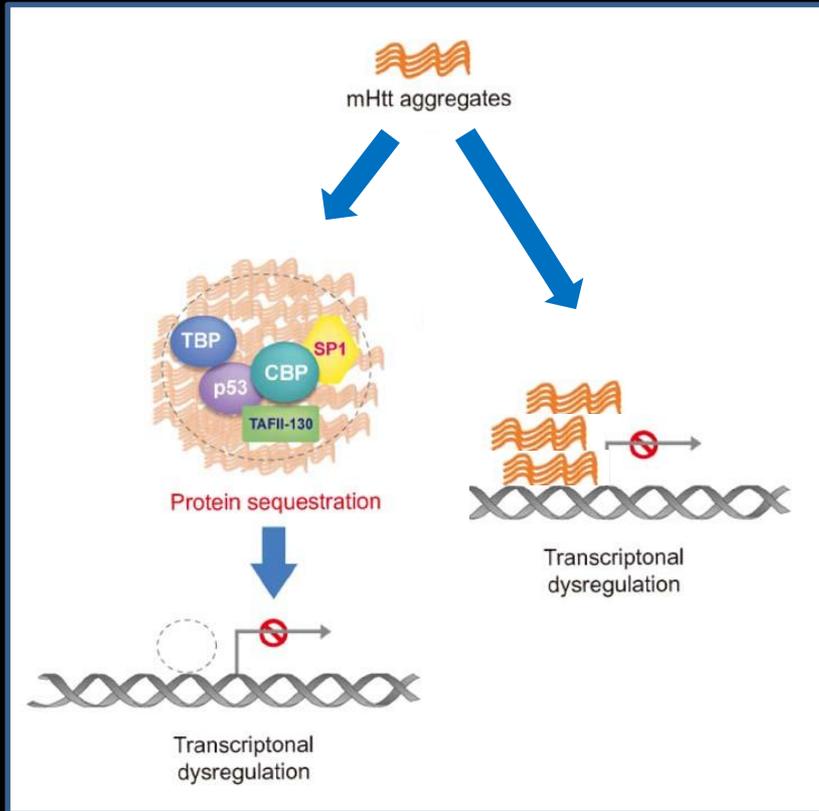
Human brain



Mouse brain



Chromatin and gene expression abnormalities in HD



Abnormal gene regulation

(Steffan et al., 2001; McCampbell et al., 2001; Cong et al., 2005; Ferrante et al., 2003; Stack et al. 2007; Sadri-Vakili et al., 2007; McFarland et al., 2012)



		Log2 ratios:			
R6/1-24 wks	R6/2-6 wks	CHL2-15 mos	Q92-18 mos	Human	Gene symbol
-0.55	-0.28	-0.31	-0.89	-1.71	CNR1
-0.71	-1.42	-1.06	-0.84	-1.68	ARRP-19
-0.83	-0.79	-0.63	-0.80	-1.68	COCH
-0.68	-0.53	-0.32	-0.64	-1.60	KCNAB1
-1.17	-0.25	-1.35	-0.81	-1.56	RGS4
-0.75	-0.54	-0.31	-0.74	-1.52	PTPN5
-0.51	-0.83	-1.03	-0.51	-1.47	MYT1L
-0.81	-1.41	-0.24	-1.26	-1.38	PENK
-0.39	-0.35	-0.32	-0.58	-1.36	PPP3CA
-0.56	-0.79	-0.44	-0.49	-1.34	HPCA
-0.41	-0.91	-0.24	-0.38	-1.28	NGEF
-0.70	-1.12	-0.78	-1.08	-1.23	ADORA2A
-0.26	-0.30	-0.20	-0.28	-1.15	PPP1R1A
-0.38	-0.69	-0.26	-0.70	-1.13	RBP4
-0.64	-0.61	-1.02	-0.43	-1.11	PRKCB1
-0.24	-0.42	-0.37	-0.36	-1.10	KCNQ2
-0.71	-0.33	-0.37	-0.83	-1.09	CA12
-0.69	-0.87	-0.77	-0.44	-1.08	ITPR1
-0.25	-0.54	-0.76	-0.96	-1.07	RGS14
-0.57	-0.63	-0.40	-0.54	-1.04	CACNA2D3
-0.47	-0.41	-0.24	-0.54	-1.03	RAP1GAP
-0.38	-0.23	-0.44	-0.49	-1.00	PLCB1
-0.21	-0.34	-0.46	-0.33	-0.92	GNAO1
-0.62	-1.00	-0.26	-0.75	-0.91	PDE1B
-0.50	-0.51	-0.74	-0.93	-0.83	ST8SIA3
-0.83	-0.93	-0.94	-0.99	-0.80	RASGRP2
-0.33	-0.35	-0.34	-0.40	-0.80	MANIA1
-0.34	-0.50	-0.34	-0.39	-0.80	GNB5
-0.57	-0.42	-0.47	-0.35	-0.79	ATP2A2
-0.69	-0.83	-0.40	-0.69	-0.77	GABRD
-0.44	-0.81	-0.20	-0.44	-0.75	BAlAP2
-0.61	-0.73	-0.55	-0.40	-0.75	CX3CL1
-0.54	-0.74	-0.55	-0.48	-0.72	HOMER1
-0.25	-0.39	-0.19	-0.27	-0.70	APT1S1
-0.39	-0.46	-0.25	-0.36	-0.66	CAMK2B
-0.38	-0.65	-0.53	-0.54	-0.64	MAST3
-0.34	-0.55	-0.49	-0.32	-0.62	CYFIP2
-0.48	-0.33	-0.46	-0.63	-0.60	B3GNT2
-0.64	-0.55	-0.61	-0.40	-0.58	ATP2B2
-0.35	-0.43	-0.23	-0.25	-0.57	DIO2
-0.53	-0.72	-0.51	-0.81	-0.56	DRD2
-0.50	-0.65	-0.37	-0.57	-0.55	SEZ6
-0.16	-0.41	-0.17	-0.49	-0.52	ARHGEF7
-0.32	-0.55	-0.33	-0.42	-0.51	MEIS2
-0.23	-0.43	-0.13	-0.42	-0.50	HRAS
-0.47	-0.35	-0.39	-0.51	-0.47	SLMAP
-0.69	-0.55	-0.72	-0.35	-0.44	CAMK2A
-0.34	-0.33	-0.40	-0.22	-0.43	SRM
-0.40	-0.78	-0.35	-0.59	-0.42	DBP
-0.33	-0.63	-0.49	-0.72	-0.39	KCNK2
-0.37	-0.51	-0.80	-0.90	-0.37	RXRG
-0.29	-0.52	-0.30	-0.29	-0.36	CORO2B
-0.30	-0.17	-0.17	-0.29	-0.36	C16orf24
-0.20	-0.23	-0.27	-0.19	-0.35	MLF2
-0.37	-0.48	-0.32	-0.32	-0.33	KCTD17
-0.45	-0.32	-0.67	-0.36	-0.33	ZNF706
-0.18	-0.24	-0.13	-0.26	-0.30	SEPHS1
-0.33	-0.23	-0.38	-0.57	-0.29	POU3F1
-0.38	-0.15	-0.25	-0.36	-0.28	MBTPS1
-0.44	-0.49	-0.28	-0.41	-0.22	USP2

Abnormal gene expression

(Luthi-Carter, 2000; Luthi-Carter, 2002; Chan et al. 2002; Desplats et al., 2006; Hodges et al., 2006; Kuhn et al., 2007; Friedrich et al., 2012)

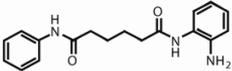
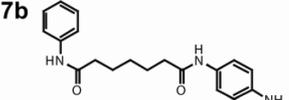
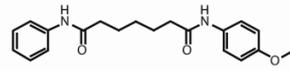
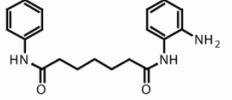
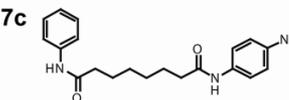
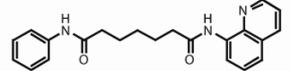
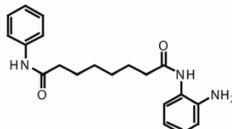
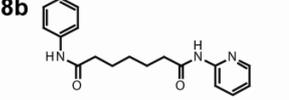
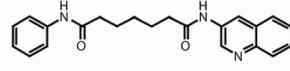
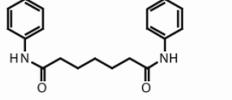
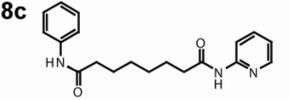
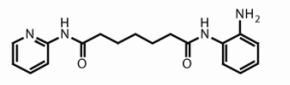
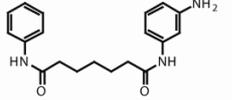
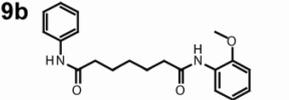
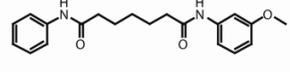
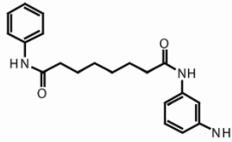
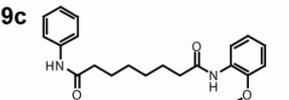
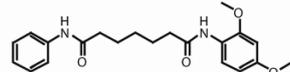
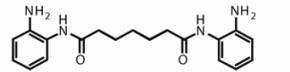
Huntington's disease is associated with a range of chromatin/gene expression abnormalities



New targets for drug treatment are aimed at correcting faulty transcription:
“histone deacetylase (HDAC) inhibitors”

Novel benzamide-type HDAC inhibitors show low toxicity

Table 1. Activities and IC₅₀ values of HDAC inhibitors. Structures for each compound (numbers in bold) are shown with corresponding transcriptional change in *frataxin* mRNA in the FRDA lymphoid cell line and IC₅₀ for inhibition of histone deacetylation activity in a HeLa extract.

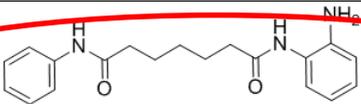
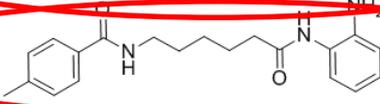
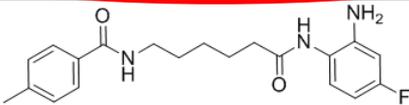
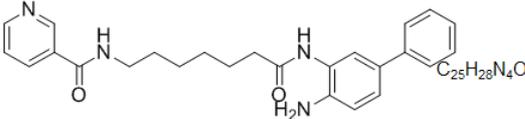
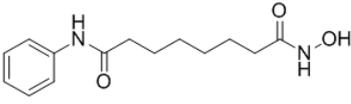
Compound	Fold-change ¹ (IC ₅₀) ²	Compound	Fold-change (IC ₅₀)	Compound	Fold-change (IC ₅₀)
4a 	1.4 ± 0.06 (238 μM)	7b 	2.6 ± 0.14 (123 μM)	10b 	2.5 ± 0.17 (438 μM)
4b 	2.5 ± 0.24 (78 μM)	7c 	2.0 ± 0.08 (186 μM)	11b 	3.0 ± 0.17 (17 μM)
4c 	1.4 ± 0.06 (87 μM)	8b 	2.6 ± 0.14 (140 μM)	12b 	2.5 ± 0.17 (84 μM)
5b 	1.4 ± 0.15 (204 μM)	8c 	2.0 ± 0.08 (99 μM)	13b 	2.4 ± 0.10 (91 μM)
6b 	1.5 ± 0.13 (500 μM)	9b 	2.3 ± 0.11 (54 μM)	14b 	1.8 ± 0.12 (>1 mM)
6c 	2.1 ± 0.15 (85 μM)	9c 	1.8 ± 0.07 (470 μM)	15b 	1.5 ± 0.06 (387 μM)
				16b 	3.1 ± 0.19 (14 μM)

¹ Fold-change of *frataxin* mRNA in affected GM15850 cells, normalized to *GAPDH* mRNA, were determined in triplicate by real-time quantitative RT-PCR after incubation with each compound at 5 μM for 96 h. Values are relative to untreated control cells.

² IC₅₀ values (in parenthesis below fold-change values) were determined by total histone deacetylation inhibition in a HeLa nuclear extract.

Benzamide-type HDAC inhibitors preferentially target HDAC1 and/or HDAC3

Table 1. HDAC subtype selectivity profiles for the HDAC inhibitors tested in qPCR analysis (plus SAHA as a reference).

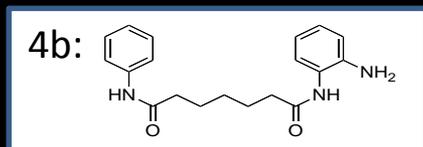
Compound	Structure	IC50 for Class I HDAC enzymes:				IC50 for Class II HDAC enzymes:			Selectivity:	Proliferation inhibition Hct116, IC50:	Proliferation inhibition IMR90, IC50:
		HDAC1	HDAC2	HDAC3	HDAC8	HDAC4	HDAC5	HDAC7			
4b	 <chem>NC(=O)CCCCCN(C=O)c1ccccc1N</chem> C ₁₉ H ₂₃ N ₃ O ₂	199 nM	1.59 μM	69 nM	5 μM	>180 μM	>180 μM	>180 μM	HDAC1/3	10 μM	ND
109	 <chem>Cc1ccc(cc1)CNC(=O)CCCCCN(C=O)c2ccccc2N</chem> C ₂₀ H ₂₅ N ₃ O ₂	300 nM	1.28 μM	63 nM	10.7 μM	>180 μM	>180 μM	>180 μM	HDAC1/3	6.5 μM	50 μM
136	 <chem>Cc1ccc(cc1)CNC(=O)CCCC(F)N(C=O)c2ccccc2N</chem> C ₂₀ H ₂₄ FN ₃ O ₂	5.2 μM	3.0 μM	400 nM	13.2 μM	>180 μM	>180 μM	>180 μM	HDAC3	40 μM	>50 μM
228	 <chem>Nc1ccc(cc1N)CNC(=O)CCCCCN(C=O)c2ccc(cc2N)c3ccccc3</chem> C ₂₅ H ₂₈ N ₄ O ₂	61 nM	314 nM	3.33 μM	>100 μM	>180 μM	>180 μM	>180 μM	HDAC1	1.8 μM	ND
SAHA*	 <chem>NC(=O)CCCCCN(C=O)N</chem> C ₁₄ H ₂₀ N ₂ O ₃	171 nM	389 nM	200 nM	306 nM	282 nM	400 nM	510 nM	NS	1.0 μM	1.0 μM

HDACs 6, 9, and 10 were not tested.

* IC₅₀ values for SAHA taken from Reaction Biology Corp (www.reactionbiology.com)

NS, non-selective. ND, not determined.

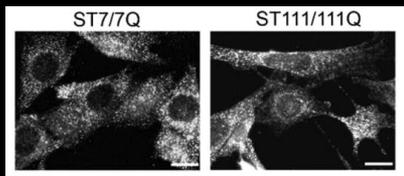
Pipeline for screening novel HDAC1/3-targeting inhibitors for Huntington's disease



Library of ~100 novel HDAC inhibitors



Compounds tested for pharmacokinetics, cell permeability, metabolic stability, receptor cross-reactivity, cytotoxic properties, etc.



Striatal ell culture model



Drosophila



Mouse models (R6/2, N171-82Q, CAG140 KI)

Investigational New Drug (IND) Application

Selective HDAC1/3 inhibitors ameliorate disease phenotypes in Huntington's disease model systems

The HDAC inhibitor 4b ameliorates the disease phenotype and transcriptional abnormalities in Huntington's disease transgenic mice

Elizabeth A. Thomas^{*†}, Giovanni Coppola[‡], Paula A. Desplats^{*}, Bin Tang^{*}, Elisabetta Soragni^{*}, Ryan Burnett^{*}, Fuying Gao[‡], Kelsey M. Fitzgerald^{*}, Jenna F. Borok^{*}, David Herman^{*}, Daniel H. Geschwind[‡], and Joel M. Gottesfeld^{*}

^{*}Department of Molecular Biology, The Scripps Research Institute, University of California, Los Angeles,

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Histone deacetylase (HDAC) inhibitors targeting HDAC3 and HDAC1 ameliorate polyglutamine-elicited phenotypes in model systems of Huntington's disease

Haiqun Jia^a, Judit Pallos^b, Vincent Jacques^c, Alice Lau^d, Bin Tang^a, Andrew Cooper^c, Adeela Syed^b, Judith Purcell^b, Yi Chen^c, Shefali Sharma^c, Gavin R. Sangrey^e, Shayna B. Darnell^e, Heather Plasterer^c, Ghazaleh Sadri-Vakili^e, Joel M. Gottesfeld^a, Leslie M. Thompson^{d,f}, James R. Rusche^c, J. Lawrence Marsh^b, Elizabeth A. Thomas^{a,*}

^a Department of Molecular Biology, The Scripps Research Institute, La Jolla, CA, USA

^b Department of Developmental and Cell Biology, University of California, Irvine, CA, USA

^c Repligen Corporation, Research and Development, Waltham, MA, USA

^d Department of Psychiatry and Human Behavior, University of California, Irvine, CA, USA

^e NeuroEpigenetics Laboratory, MassGeneral Institute for Neurodegenerative Disease, Boston

^f Department of Neurobiology and Behavior, University of California, Irvine, CA, USA

Human Molecular Genetics, 2012 1–14
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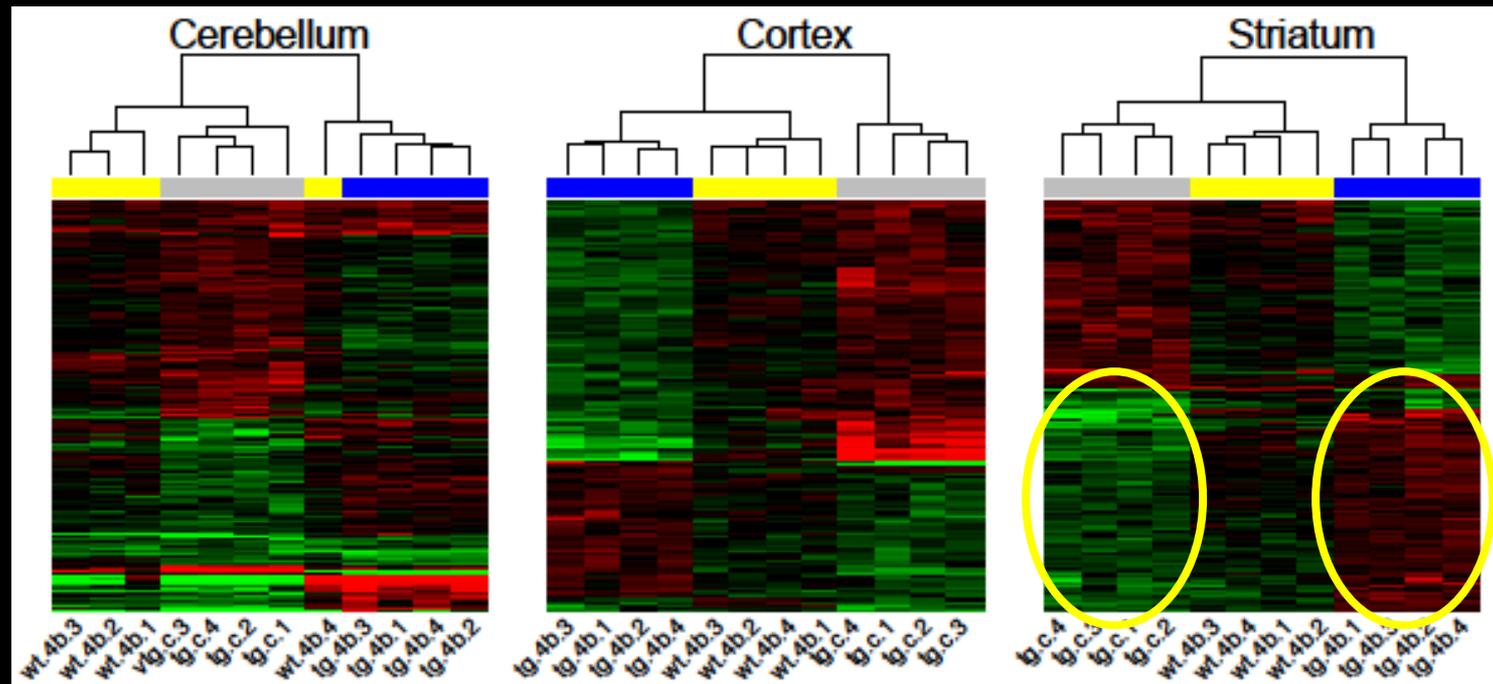
Selective histone deacetylase (HDAC) inhibition imparts beneficial effects in Huntington's disease mice: implications for the ubiquitin–proteasomal and autophagy systems

Haiqun Jia¹, Ryan J. Kast¹, Joan S. Steffan² and Elizabeth A. Thomas^{1,*}

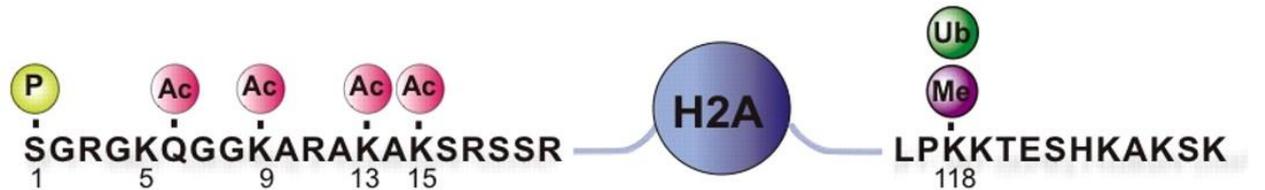
¹Department of Molecular Biology, The Scripps Research Institute, La Jolla, CA, USA and ²Department of Psychiatry and Human Behavior, University of California, Irvine, CA, USA

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Gene expression signatures associated with HDACi 4b treatment

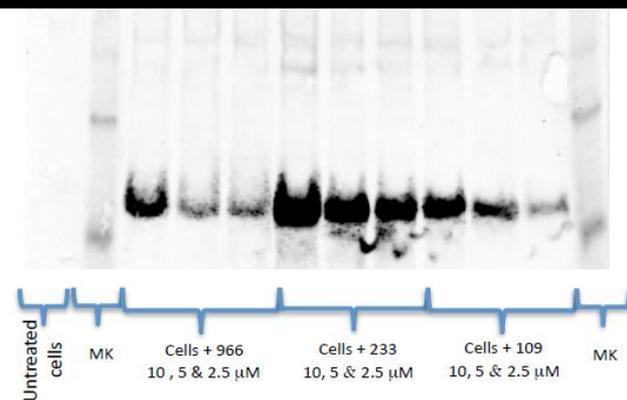
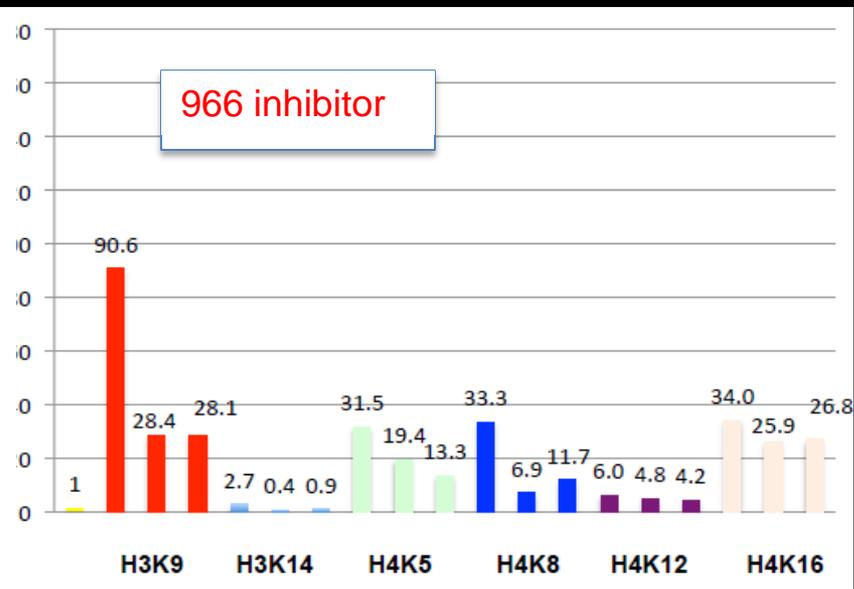
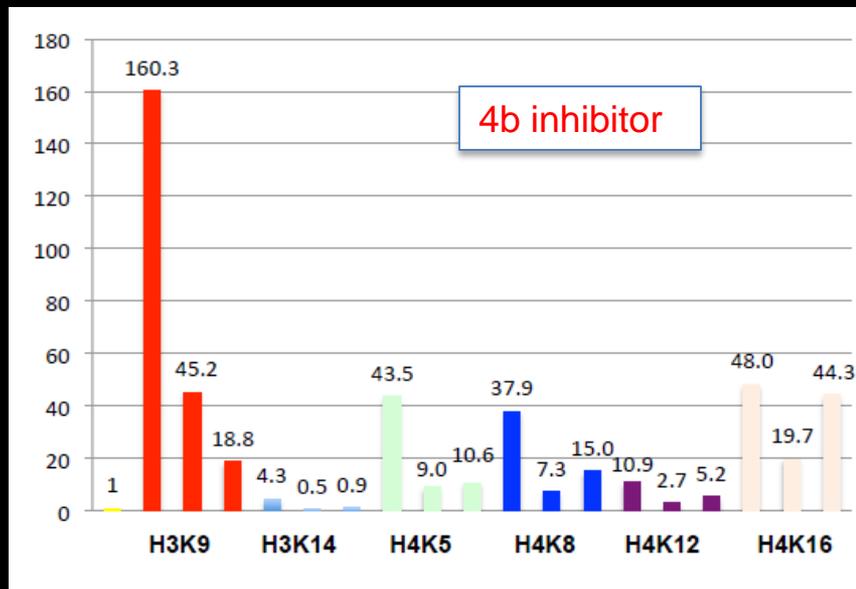


Histone modifications



Ac Acetylation Me Methylation P Phosphorylation Ub Ubiquitination

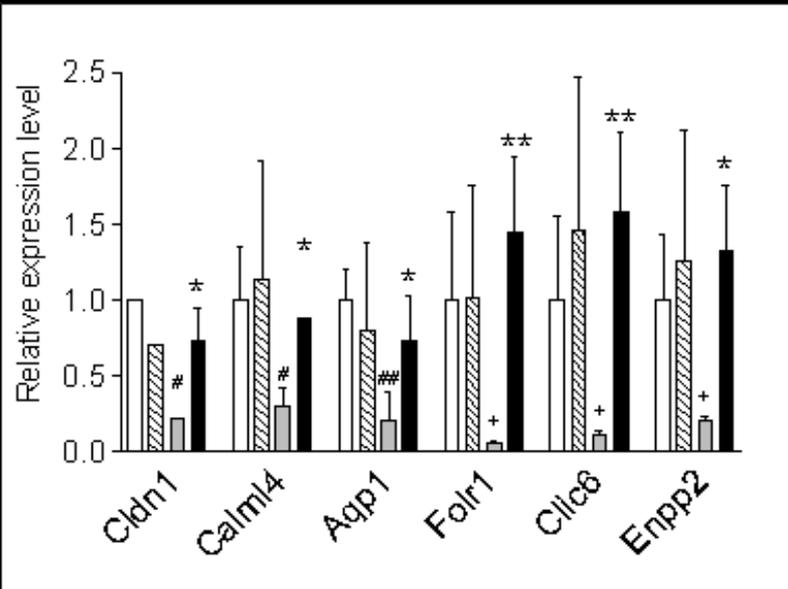
Benzamide-type HDAC inhibitors increase histone acetylation at specific sites



Western blot of SHSY5Y neuroblastoma cells treated with HDAC inhibitors

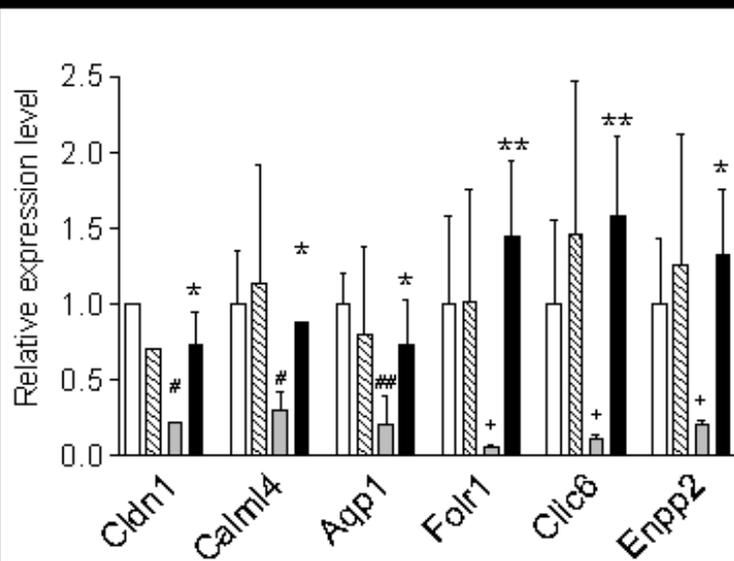
HDACi 4b treatment reverses expression downregulation coincident with increased histone H3K9 acetylation at promoters of key genes

qPCR validation:

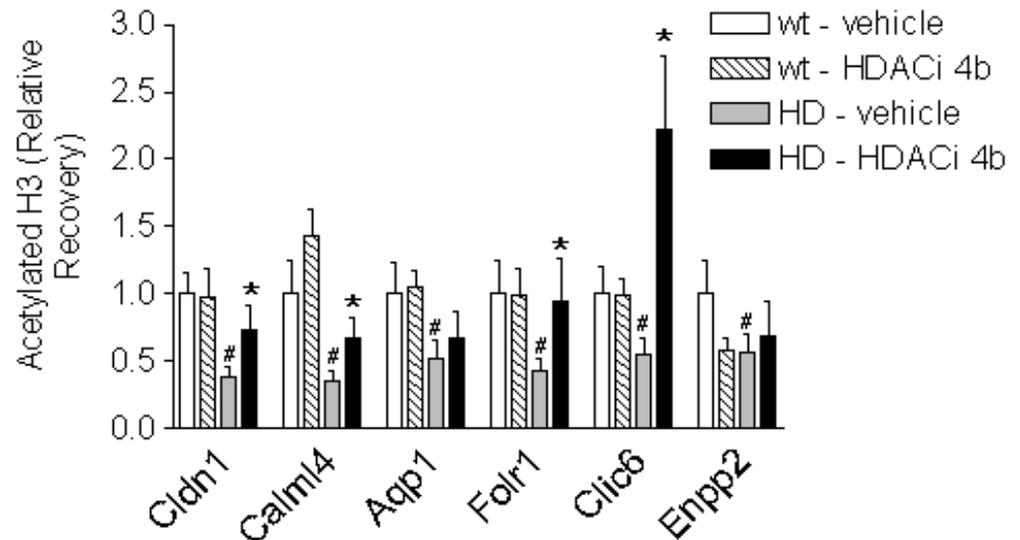


HDACi 4b treatment reverses expression downregulation coincident with increased histone H3K9 acetylation at promoters of key genes

qPCR validation:



Chromatin immunoprecipitation (ChIP) for acetylated H3 (AcH3K9):



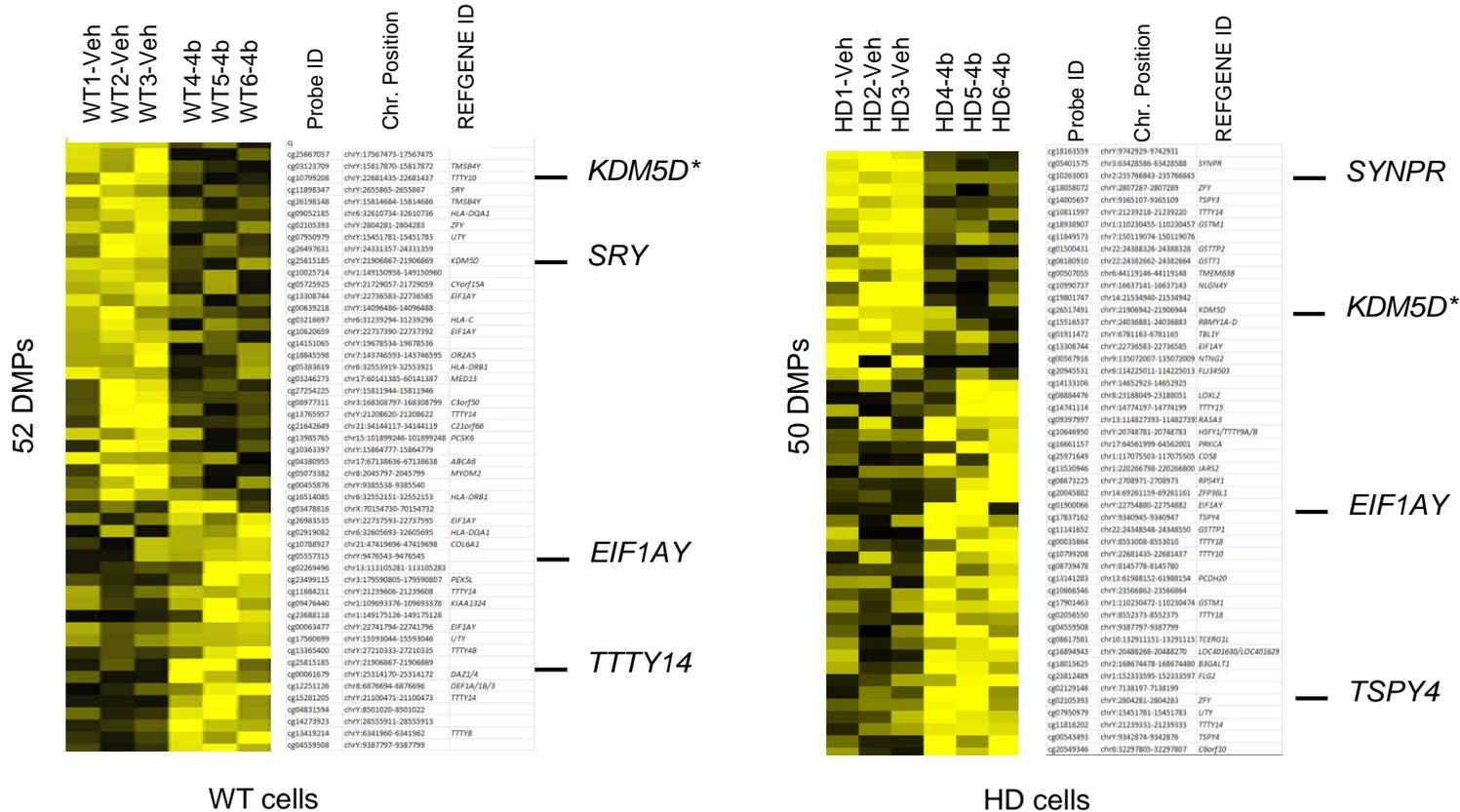
HDAC1/3 inhibition alters the expression of DNA methylation-related genes in WT and HD mouse brain

Table 1. qPCR validation of DNA methylation related genes altered by HDACi 4b treatment in cortex, striatum and muscle.

N171-82Q		Cortex		Striatum		Muscle	
Symbol:	Entrez Gene Name:	FC:	p-val:	FC:	p-val:	FC:	p-val:
<i>Dnmt1</i>	DNA (cytosine-5-)-methyltransferase 1	0.91	0.140	0.90	0.143	1.61*	0.025
<i>Dnmt3a</i>	DNA (cytosine-5-)-methyltransferase 3 alpha	0.94	0.330	1.40*	0.032	1.23*	0.011
<i>Gadd45b</i>	Growth arrest and DNA-damage-inducible 45 beta	1.44*	0.049	1.01	0.460	0.96	0.338
<i>Hdac1</i>	histone deacetylase 1	0.81*	0.040	0.57*	0.011	0.81*	0.049
<i>Hdac2</i>	histone deacetylase 2	0.80	0.210	0.97	0.441	1.11	0.160
<i>Hdac3</i>	histone deacetylase 3	0.88	0.310	0.44*	0.031	0.98	0.437
<i>Mbd3</i>	methyl-CpG binding domain protein 3	1.57**	0.006	0.90	0.135	1.11	0.110
<i>Mecp2</i>	methyl CpG binding protein 2 (Rett syndrome)	0.97	0.890	1.05	0.360	1.21*	0.047
<i>Parp1</i>	Poly (ADP-ribose) polymerase family, member 1	1.41*	0.007	1.22	0.107	0.92	0.186
<i>Rnf4</i>	RING finger protein 4	1.11*	0.030	1.24*	0.035	0.87*	0.049
WT		Cortex		Striatum		Muscle	
Symbol:	Entrez Gene Name:	FC:	p-val:	FC:	p-val:	FC:	p-val:
<i>Dnmt1</i>	DNA (cytosine-5-)-methyltransferase 1	1.00	0.48	0.98	0.43	0.79	0.13
<i>Dnmt3A</i>	DNA (cytosine-5-)-methyltransferase 3 alpha	0.78	0.16	1.37*	0.03	0.90	0.21
<i>Gadd45b</i>	Growth arrest and DNA-damage-inducible 45 beta	1.11	0.12	1.32*	0.03	0.92	0.31
<i>Hdac1</i>	histone deacetylase 1	0.90	0.29	0.97	0.40	0.98	0.45
<i>Hdac2</i>	histone deacetylase 2	0.98	0.46	1.09	0.26	1.12	0.12
<i>Hdac3</i>	histone deacetylase 3	0.90	0.31	1.26*	0.04	1.10	0.25
<i>Mbd3</i>	methyl-CpG binding domain protein 3	0.74**	0.01	0.94	0.31	0.91	0.33
<i>Mecp2</i>	methyl CpG binding protein 2 (Rett syndrome)	0.85	0.17	1.08	0.33	0.78	0.08
<i>Parp1</i>	Poly (ADP-ribose) polymerase family, member 1	1.25*	0.03	0.99	0.48	0.95	0.35
<i>Rnf4</i>	RING finger protein 4	1.07	0.20	1.11	0.28	0.86	0.13

Bold font indicates fold-change (FC) that was significantly different, as determined by Student's t test (unpaired; two-tailed).

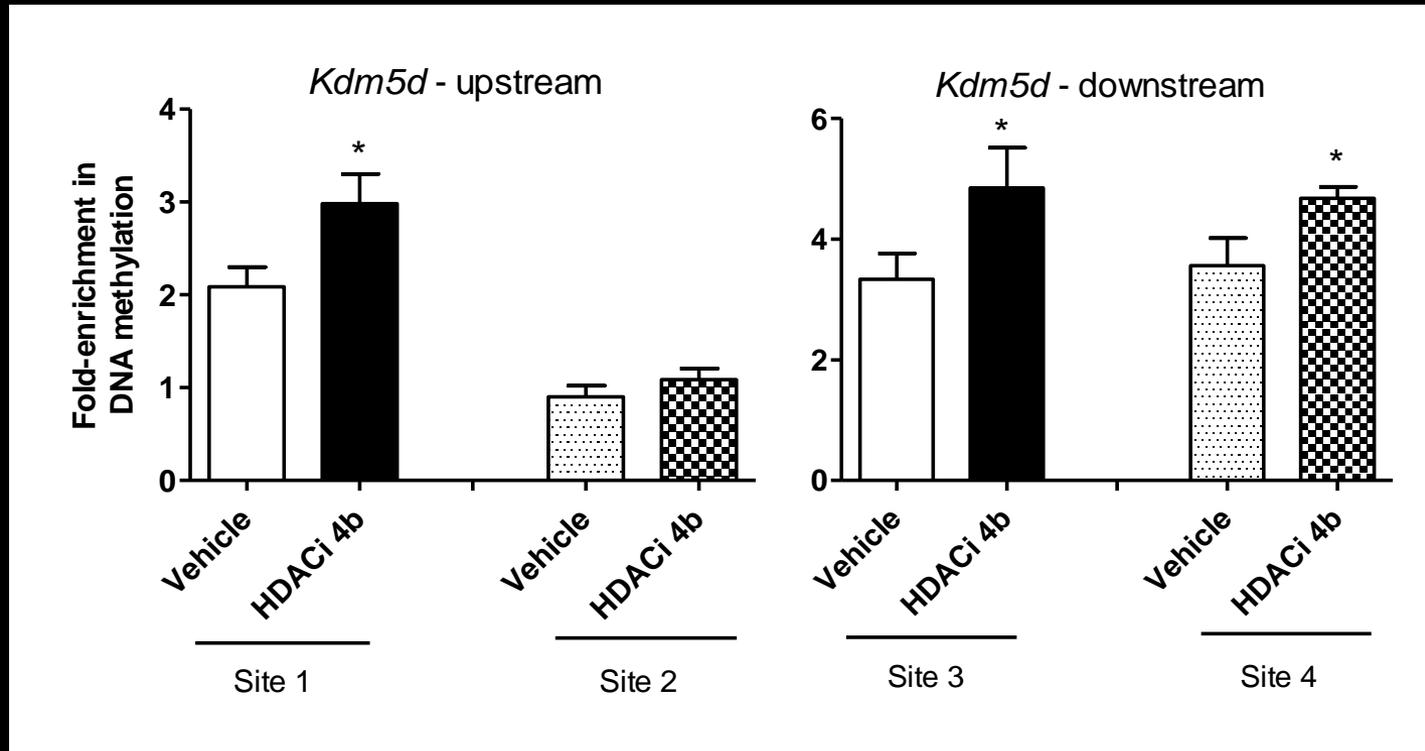
HDACi 4b elicits DNA methylation changes in human fibroblasts- (Infinium HumanMethylation450 BeadChip)



*KDM5D: Lysine (K)-specific demethylase 5D

HDACi 4b elicits increased methylation at several sites at the *Kdm5d* locus

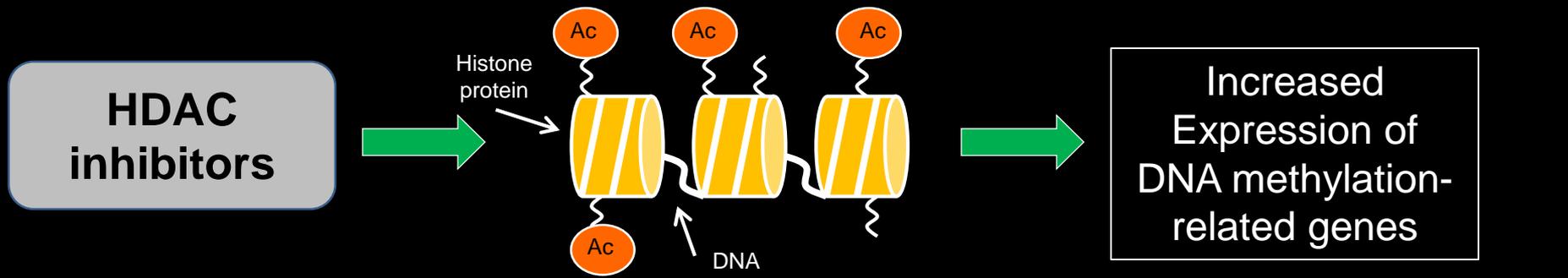
MeDIP RT-PCR analysis



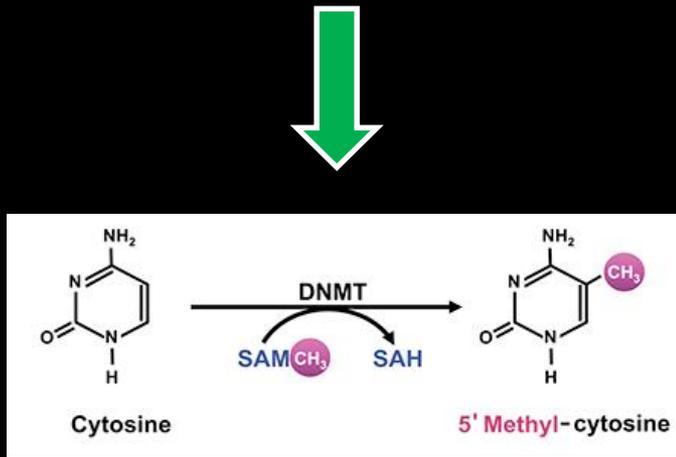
Kdm5d locus:



Epigenetic markers of HDAC inhibition



Increased histone acetylation marks – H3K9



Altered DNA methylation – KDM5D

Goals

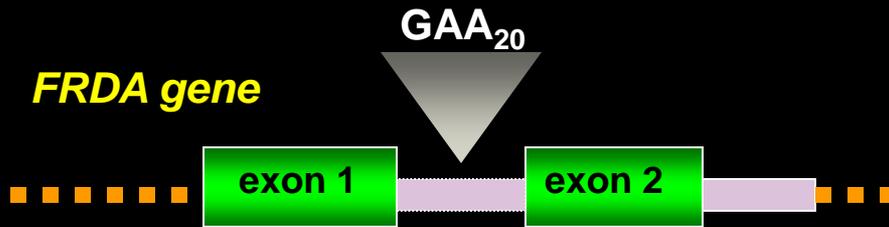
- Understanding the role(s) of epigenetic modifications in disease mechanisms and response to therapies.
 - HDAC inhibitors in Huntington's disease; preclinical studies from mouse models.
- Discover how epigenetic analysis can be applied in clinical trials to identify markers of response.
 - HDAC inhibitors in Friedreich's ataxia; clinical data from patients.

Friedreich's ataxia (FRDA)

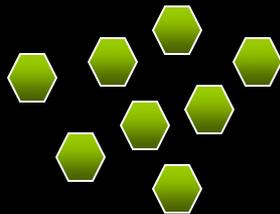
- Caused by an expansion of a GAA triplet repeat in the first intron of the FXN gene, which encodes the essential mitochondrial protein, frataxin.
- Autosomal recessive, progressive neurological disease.
- Most common form of hereditary ataxia, affecting about 1 in every 50,000 people in the United States.
- Main symptom is impaired muscle coordination (ataxia); it can also lead to scoliosis, heart disease and diabetes, but does not appreciably affect cognitive function.
- Symptoms typically begin between the ages of 5 and 15 years. Generally, within 10 to 20 years after the appearance of the first symptoms, the person is confined to a wheelchair.
- No therapies that address pathology.

Friedreich's ataxia (FRDA)

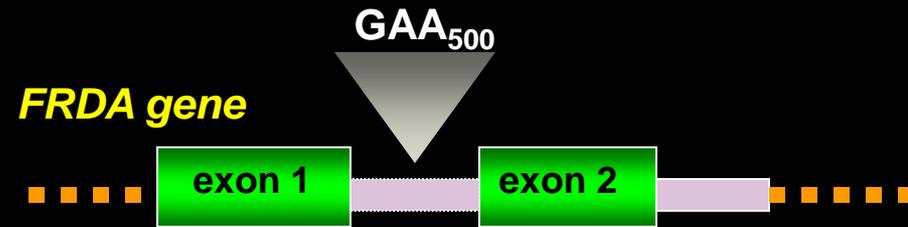
Normal



Frataxin protein



FRDA Patient

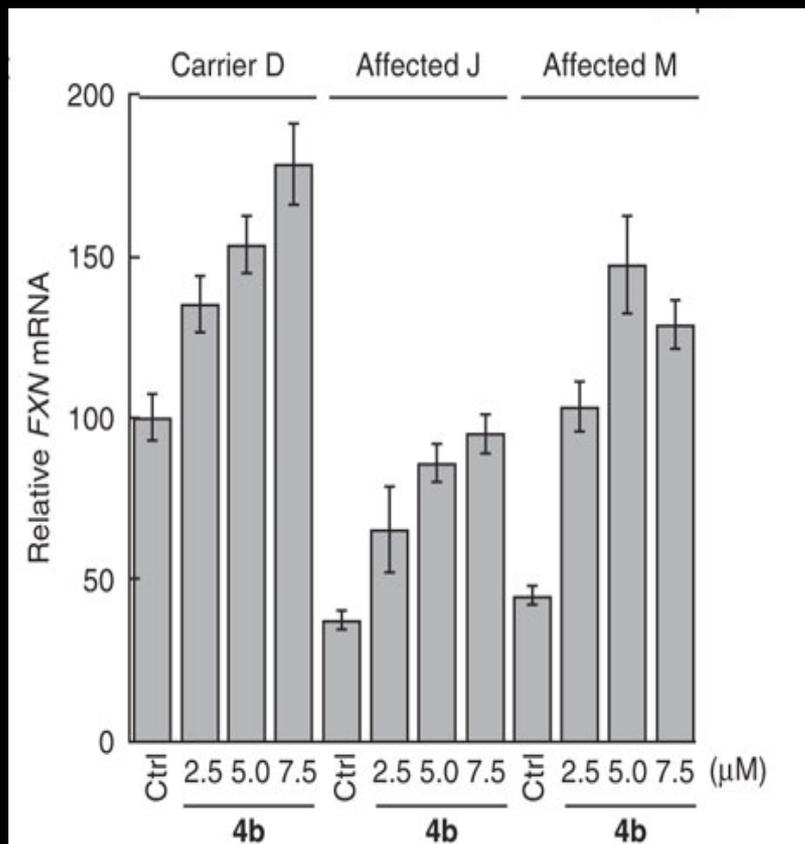


Frataxin protein



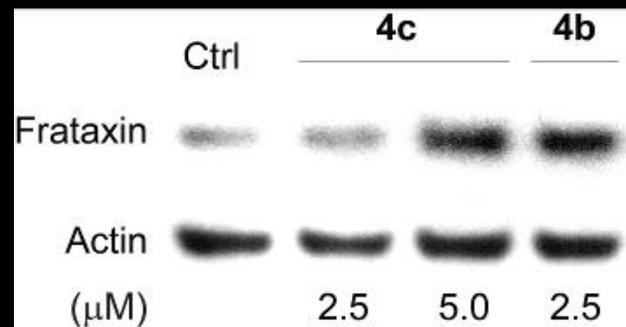
Novel HDACi 4b increases frataxin mRNA and protein in FRDA patient lymphocytes/lymphoblastoid cell lines

qPCR for frataxin mRNA

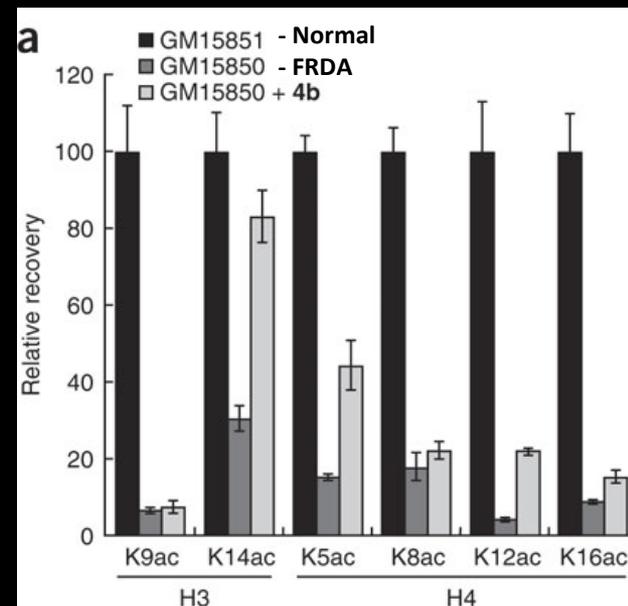


Reversal of the transcription defect to at least carrier status

Western blot for frataxin protein

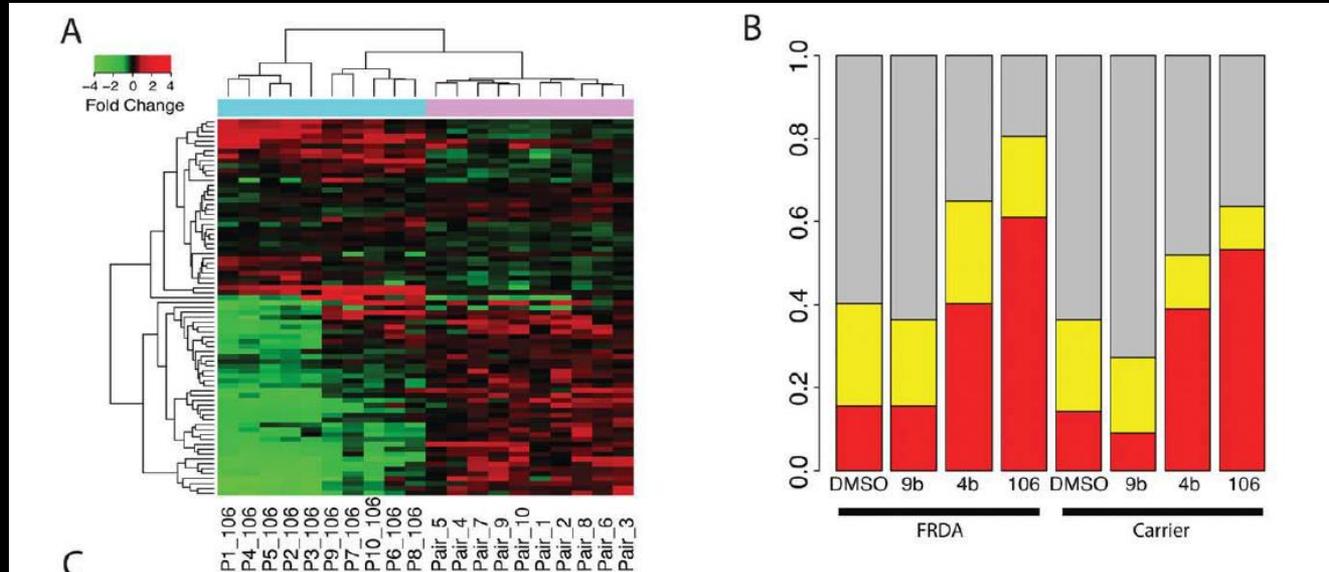


ChIP at the FXN locus

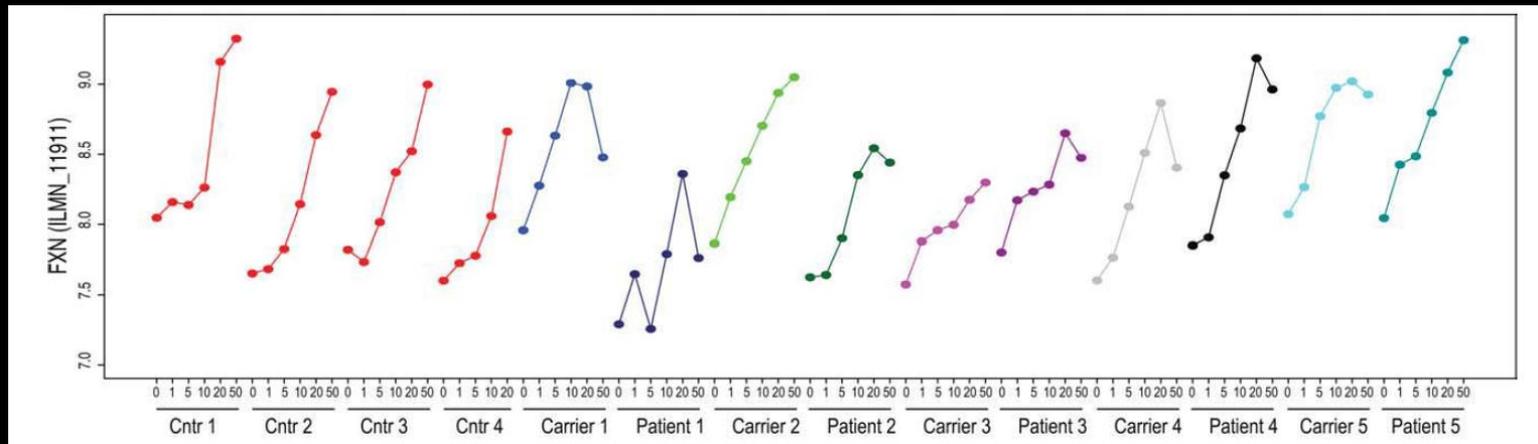


HDAC inhibitor effect on gene expression profiles in cultured peripheral blood mononuclear cells (PBMCs)

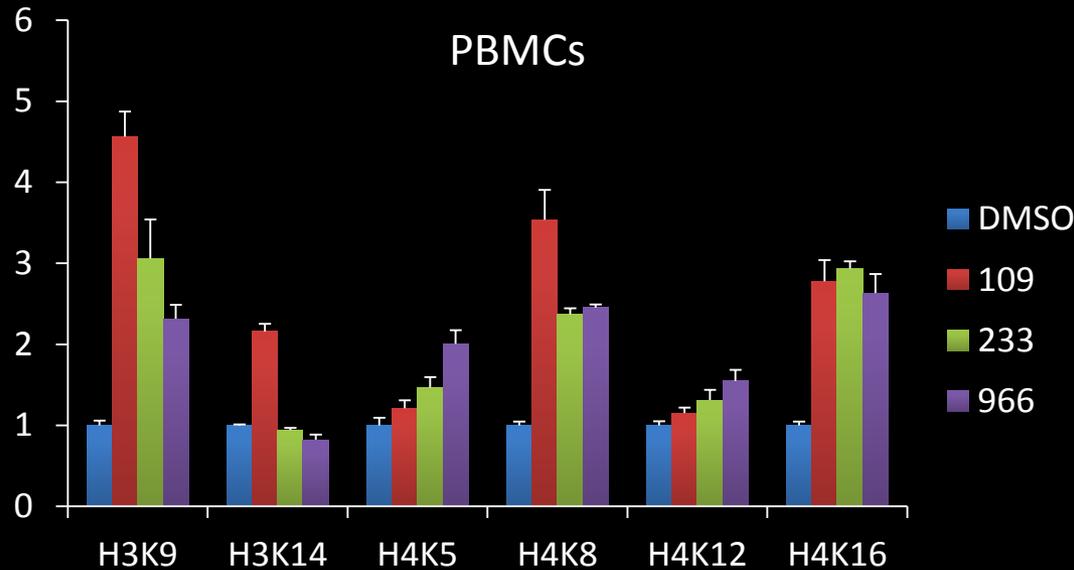
77 gene
biomarker
panel



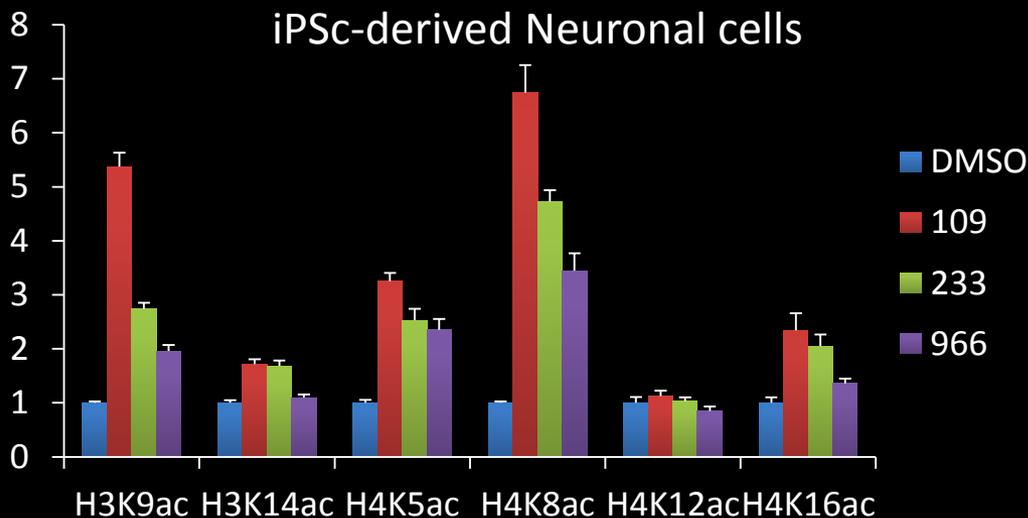
Dose-dependent increases in frataxin gene expression:



Chromatin immunoprecipitation experiments identify key residues for FXN activation



ChIP experiments demonstrate that H3K9 and H4K8 are critical residues for *FXN* gene activation. These could be used as a biomarker in FRDA patient trials.



RG2833 (109): First in patient clinical study

- San Luigi Gonzaga Hospital, University of Turin, Italy.
- 22 patients (split into 4 cohorts receiving different doses: 30-180 mg).
- Biomarker measures:
 - Frataxin mRNA and protein in blood, PBMCs and buccal cells
 - HDAC activity in PBMCs
 - ChIP for H3K9 acetylation in PBMCs

TABLE 1

Demographic and Clinical Characteristics of Study Subjects

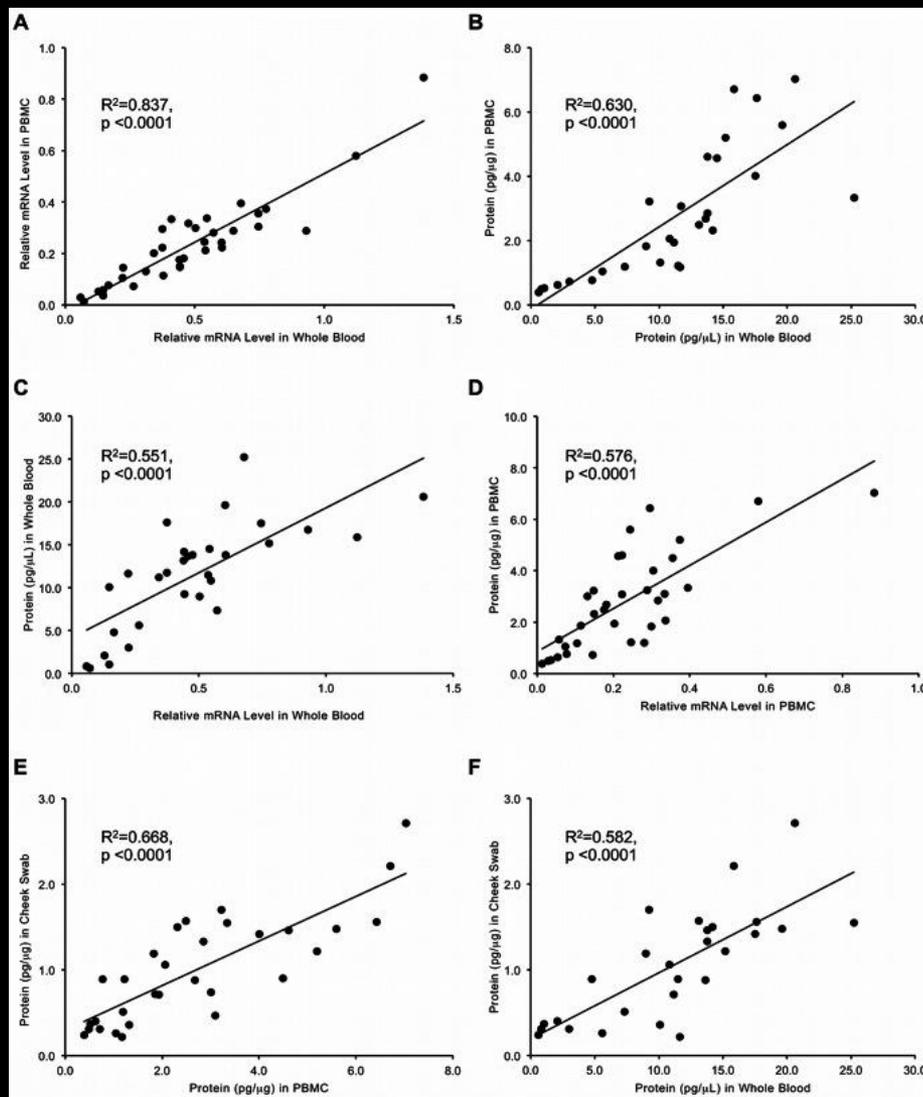
Characteristic	Value
Demographics	
Age, yr ^a	30.0±8.1
Sex, No. (%)	
M	9 (40.9)
F	13 (59.1)
Disease data	
GAA•TTC triplet expansion on shortest allele ^a	1,084.8±784.5
Age of onset, yr ^a	10.7±4.6
FARS ^b score at screening ^a	59.7±23.2
Cardiac function, ejection fraction % ^a	63.0±6.9

^aData are shown as the mean±standard deviation.

^bSee Beconi et al.⁴⁵

F=female; FARS=Friedreich Ataxia Rating Scale; M=male.

Frataxin protein and mRNA levels strongly correlated in blood, PBMCs and buccal cells

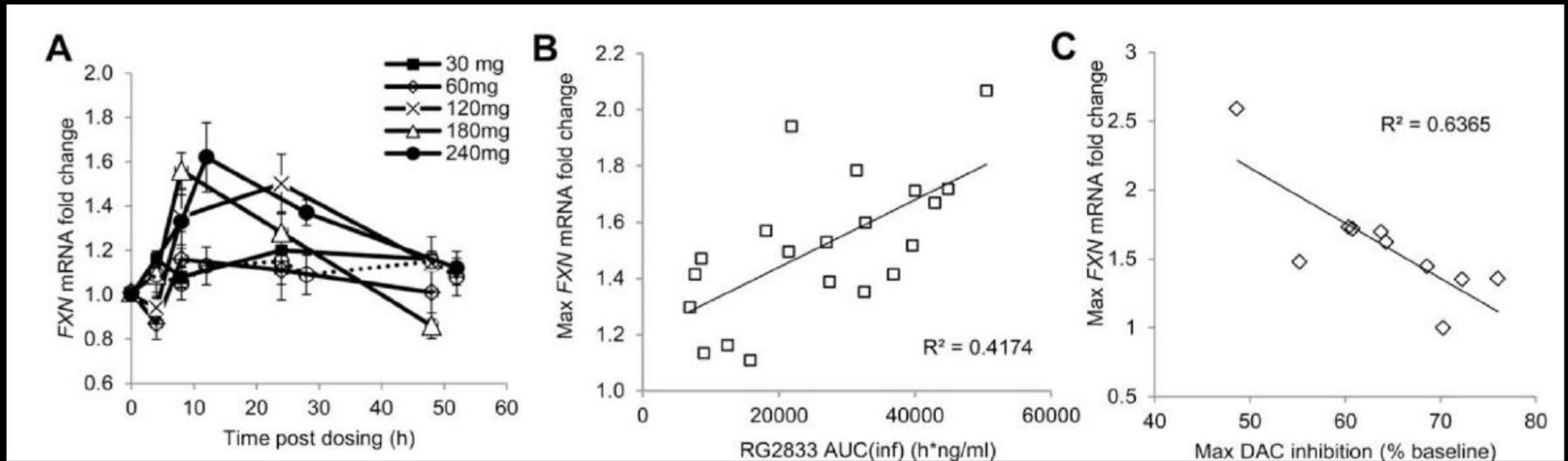


PBMCs vs. whole blood

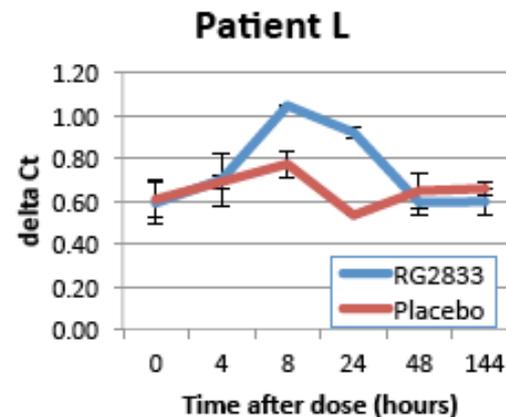
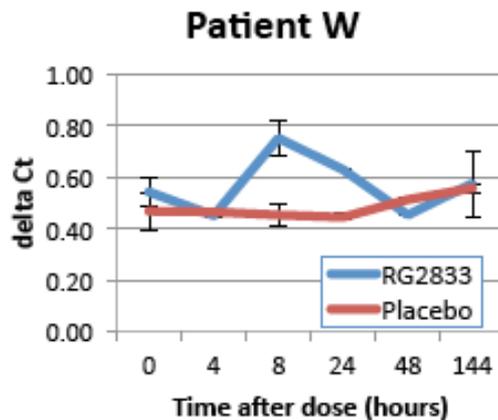
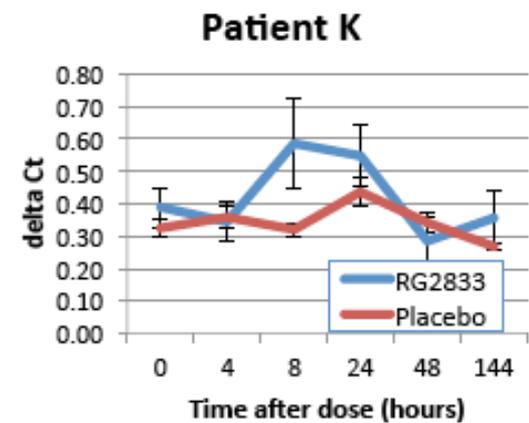
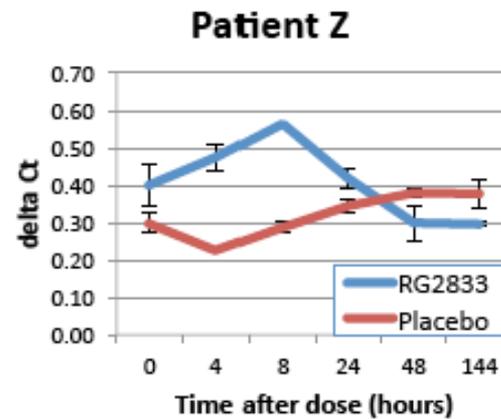
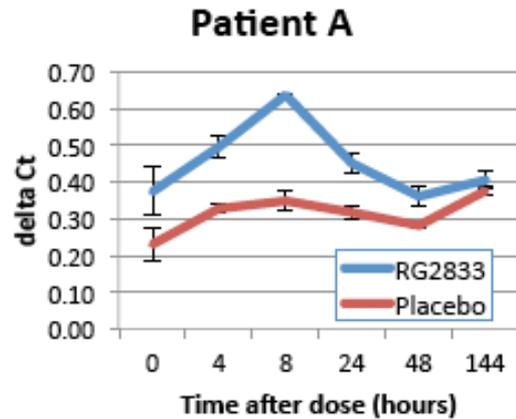
Frataxin mRNA vs. protein

PBMCs vs. buccal cells
buccal cells vs. whole blood

FXN mRNA in adult Friedreich ataxia patients after oral administration of RG2833/109



Increases in FXN mRNA in PBMCs from 5 patients after a single dose (180 mg) of RG2833

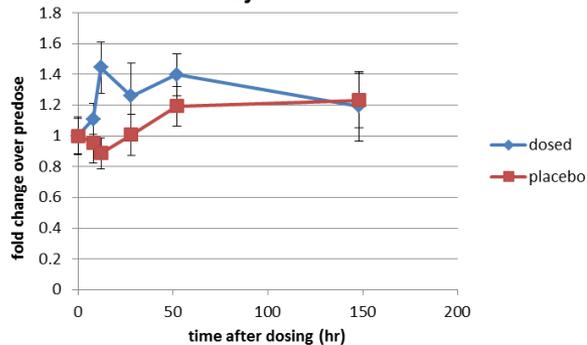


21

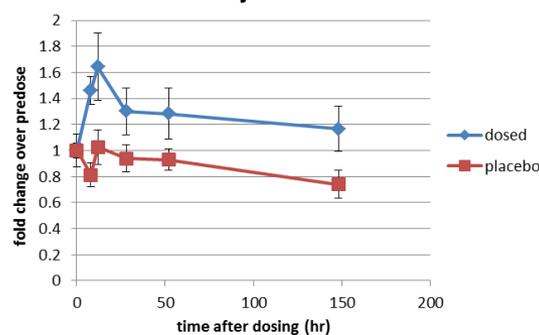
Increases in FXN mRNA observed in 9/10 patients overall

Increases in histone H3K9 acetylation in patient PBMCs after a single dose (180 mg) of RG2833

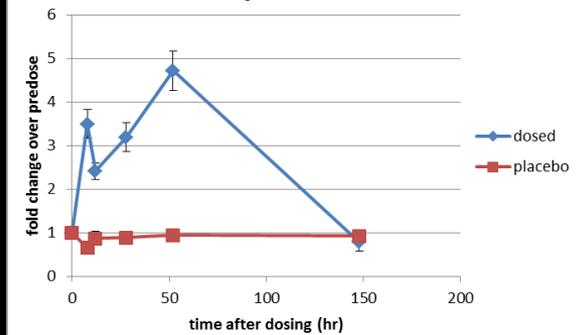
subj. 17



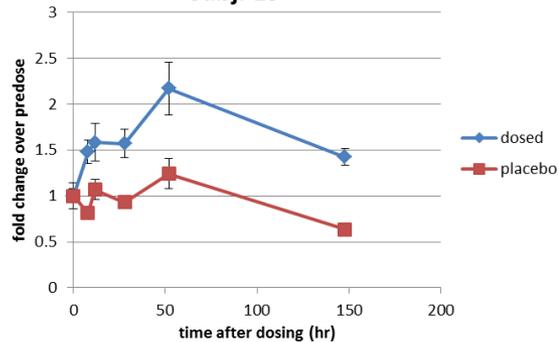
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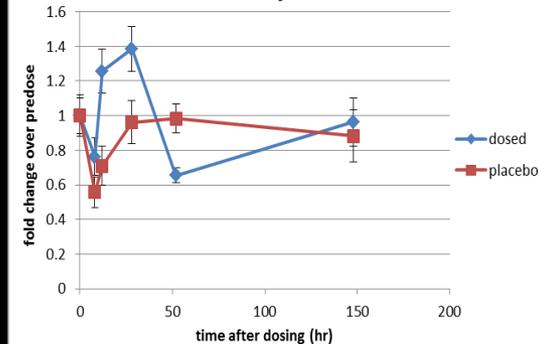
subj. 22



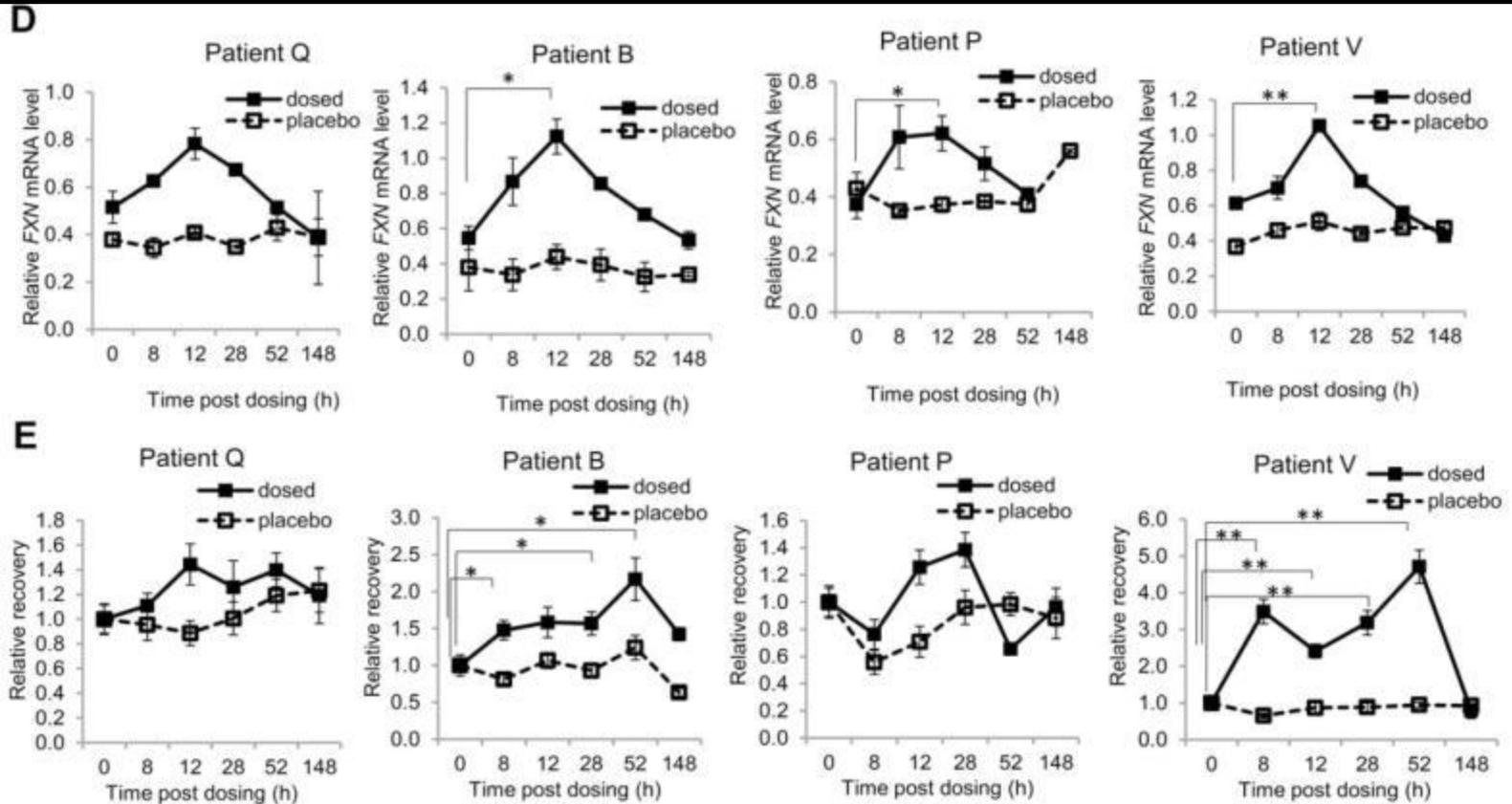
subj. 19



subj. 21



Increases in FXN mRNA and histone H3K9 acetylation in patient PBMCs after two doses (120 mg) of RG2833



Summary

Preclinical studies from mice:

- Show good efficacy of HDAC1/3-targeting inhibitors in HD mouse models.
- HDACi 4b treatment is associated with a reversal of histone hypoacetylation at H3K9 at the promoter of several candidate genes.
- DNA methylation may also prove useful as a marker of drug response.

In-patient clinical studies:

- Treatment with RG2833 was safe and well tolerated (at 180 mg or 120 mg twice a day) and no drug related adverse effects were reported.
- Frataxin mRNA was increased in 9/10 patients and expression levels in different cell types were correlated.
- ChIP promoter histone acetylation was increased in patient PBMCs after single and multiple doses. H3K9 acetylation is a useful epigenetic biomarker for drug response.

Second generation compounds with improved brain penetration and metabolic stability have been generated. A clinical candidate from the new generation of compounds will be taken forward for IND filing for a second round of clinical trials.

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Massachusetts General Hospital

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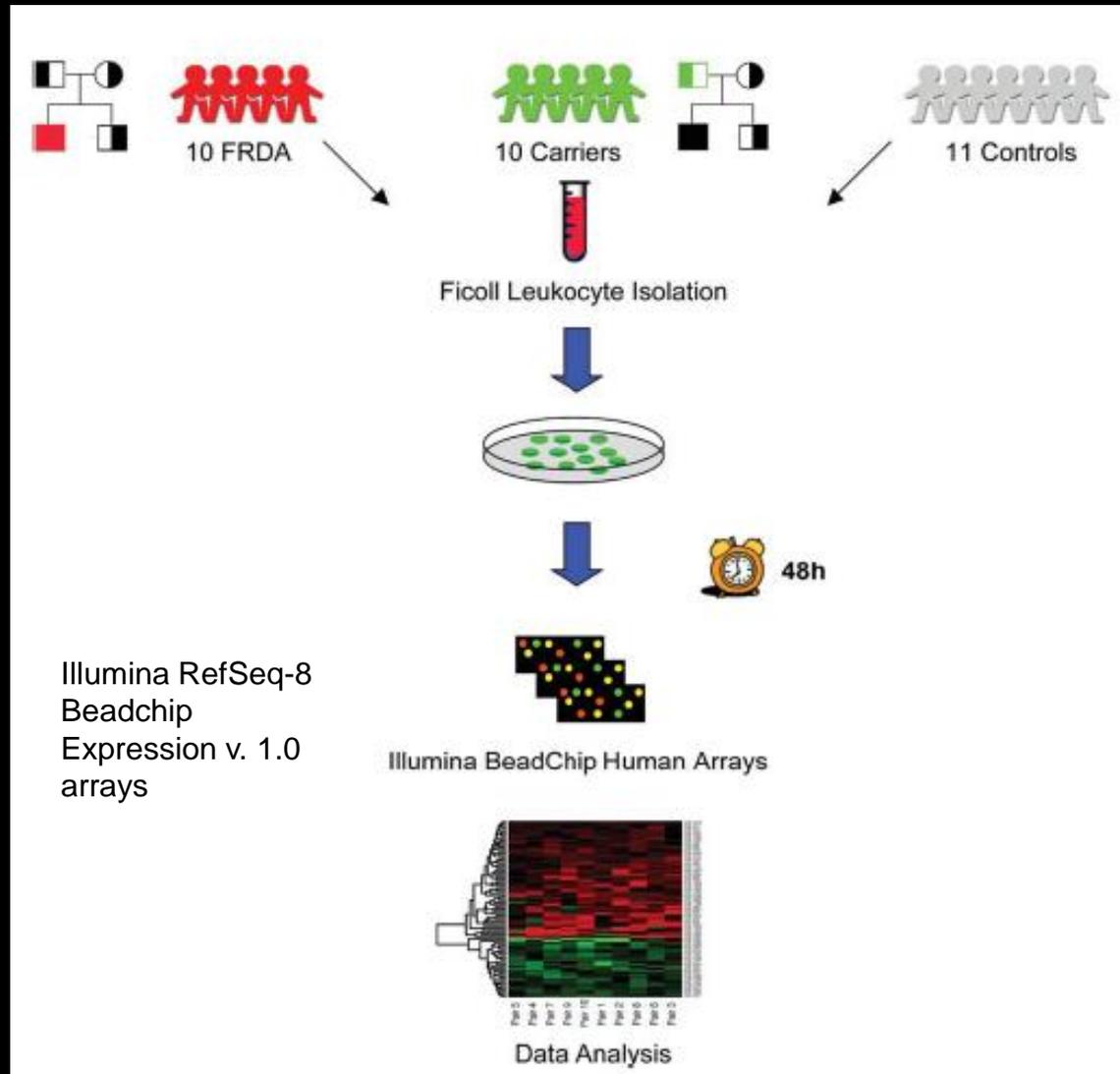
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B:OMARIN®

Microarray gene expression analysis



Using gene expression data for biomarker identification in PBMCs

