

# **A single combination gene therapy treats multiple age-related diseases**

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May 25, 2020

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# Table of contents

1. Context
2. Personal motivation
3. Introductory concepts
4. Actual contribution
5. Conclusion

# Context

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This paper **focuses** on the following medical conditions:

- obesity,
- type II diabetes,
- heart and renal failure.

**Draws attention** about:

- the importance of extending one's health span,
- the increased risk of developing multiple medical conditions when the health span is over.

It **develops AAV-based gene therapy** with the following genes:

- fibroblast growth factor 21 (FGF21),
- $\alpha$ Klotho,
- soluble form of mouse transforming growth factor- $\beta$  receptor 2 (sTGF $\beta$ 1).

Explores each therapy **individually** and in **combinations**.

Comes up with a formulation for treating **all four diseases**.

# Personal motivation

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The addressed problem is **impactful**:

- People nowadays suffer from multiple diseases by the end of their life,
- Prescribed treatments ignore the interconnectedness of the involved diseases,
- There are multiple unanalyzed side-effects.

# Introductory concepts

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Gene therapy - an **experimental approach**:

- may replace in the future the traditional treatments,
- to either alter a gene, overexpress, replace or introduce.

**Adeno-associated virus** is a:

- small, replication-defective, nonenveloped type of virus,
- virus not known to cause any disease,
- virus used in more than 100 medical trials.

- AAV is **not able to act on its own**.  
⇒ It needs a co-infecter (**helper adenovirus**).
- AAV has **serotype** associated depending on the targeting region (in this study AAV8).

- People with BMI  $\geq 30$ ,
- Affects more than a third of the American adults,
- Obesity and overweight were associated with almost 20% of the deaths in the US,
- Leads to complications such as: cardiovascular diseases, type 2 diabetes, stroke.

## Type II diabetes, Kidney failure

- According to the WHO: more than **1.5 million deaths** directly associated with **diabetes**,
- Kidney(renal) failure widely spread in the US with **more than 600000 people annually** on dialysis or in need of a kidney transplant.

**Heart failure** – not solely represented by having a heart attack, but it is mostly represented by patients whose hearts can no longer pump at 100% capacity.

**More than 400000 deaths annually** directly associated with it.

## Actual contribution

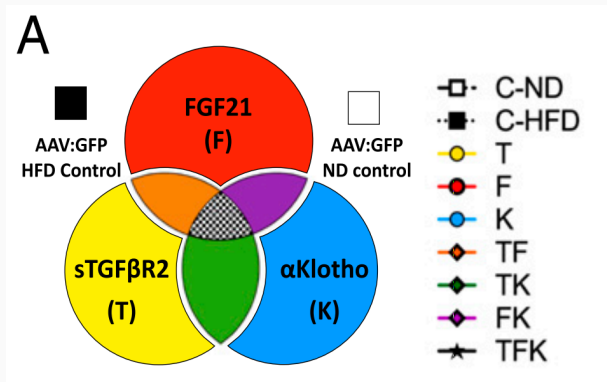
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Composed of 4 disease models:

- The first one targets obesity
- The second one targets type II diabetes
- The third one targets kidney failure and renal fibrosis
- The fourth one targets heart failure

- They've used **adult non-transgenic mice**,
- Some mice were fed a normal diet, while other were fed a high-fat diet 3 months before the experiment,
- HFD mice were infected with each individual AAV or in some combination.



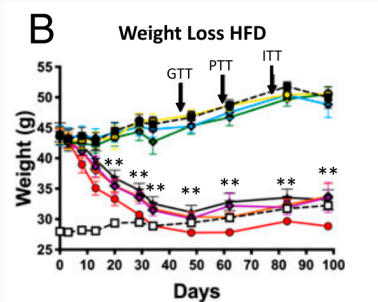


**Figure 1:** Venn diagram of the combinations of gene therapies explored as well as the color coding for all subsequent graphs.

Results showed that:

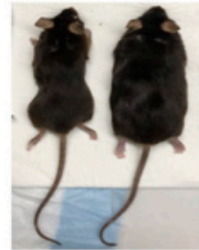
- AAV:FGF21 recipients experienced a **complete reversal** of the obese phenotype within 40 days post injection,
- this phenotype **was maintained** throughout the study despite the continued HFD

# First disease model



**Figure 2:** Weight of injected mice over time.

## C Mouse Phenotype



AAV:FGF21 HFD      AAV:GFP HFD

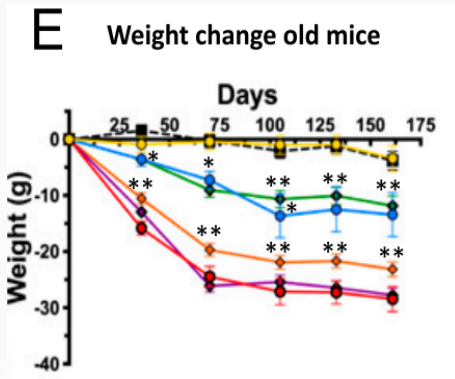
**Figure 3:** Phenotype exhibited by mice on an HFD control vs. injected.

To evaluate if the same therapy could mitigate age-related obesity:

- there were used 18-months old mice,
- all of them on a normal diet (since these mice tend to naturally experience increased adiposity).

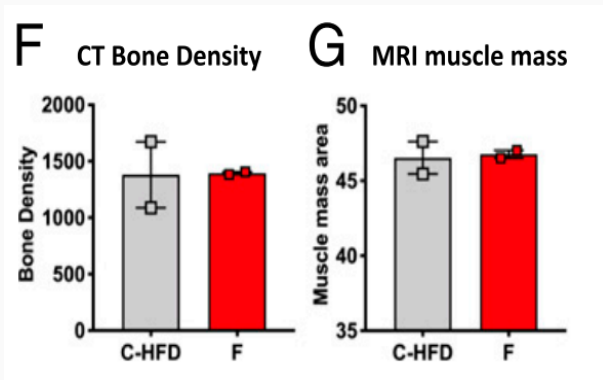
Results showed that:

- AAV:FGF21, but also AAV: $\alpha$ Klotho recipients experienced a **decrease in weight**,
- this decrease was maintained until at least the 150 days mark.



**Figure 4:** Percentage weight change of 18-mo-old mice on an ND with starting weight 40 g.

## Extra tests – metabolic chamber

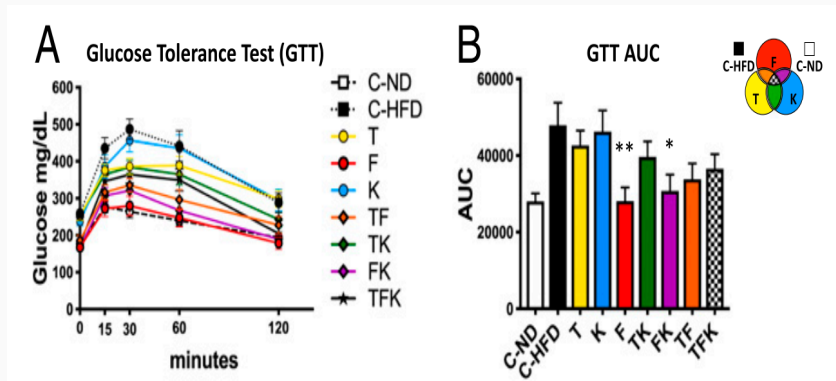


**Figure 5:** CT scan of mice observing bone density after administration of AAV:FGF21. Quantified muscle mass of MRI of whole mouse

The second disease model investigated the effect of these therapies using:

- a glucose tolerance test(GTT),
- an insulin tolerance test(ITT),
- a pyruvate tolerance test (PTT),
- fasting blood glucose measurements.

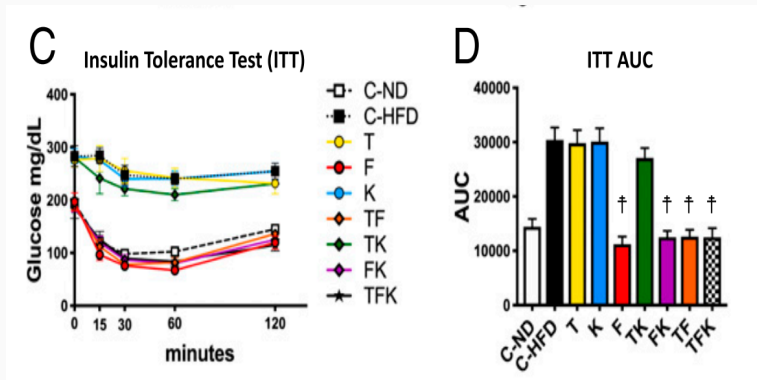
## Second disease model



**Figure 6:** GTT of mice fasted overnight for 8 h. Blood glucose measured at 0, 15, 30, 60, and 120 min after oral gavage of 50 mg of glucose



## Second disease model



**Figure 7:** ITT of mice fasted for 6 h. Blood glucose measured at 0, 15, 30, 60, and 120 min after subcutaneous injection of 0.5 IU/kg insulin.

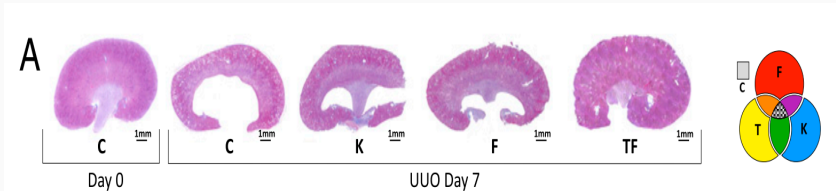
## Third disease model

The third disease model used unilateral ureteral obstruction(UUO).

Mice were:

- injected with gene therapies 1 week prior to UUO induction,
- analyzed for fibrosis and remodeling 1 week after UUO.

## Third disease model



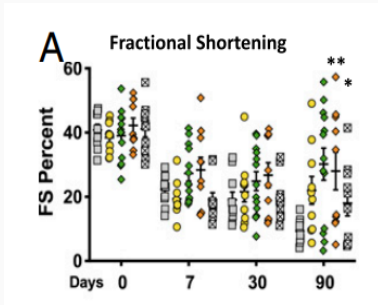
**Figure 8:** Overexpression of  $\alpha$ Klotho and FGF21 were able to prevent deterioration of the renal medulla and thinning of the renal cortex compared with controls.

**Ascending aortic constriction(AAC)** was selected as the fourth disease model.

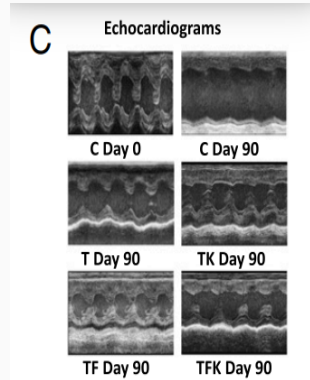
Six-month old mice were **injected with gene therapies 1 week prior** to ECHOSs and AAC surgeries.

- ECHOs didn't reveal any influence of these therapies on normal heart function,
- the surgical survival rates varied: 77% for AAV:sTGFbR2, 87% for AAV:sTGFbR2 + AAV: $\alpha$ Klotho vs. 50% for control mice.

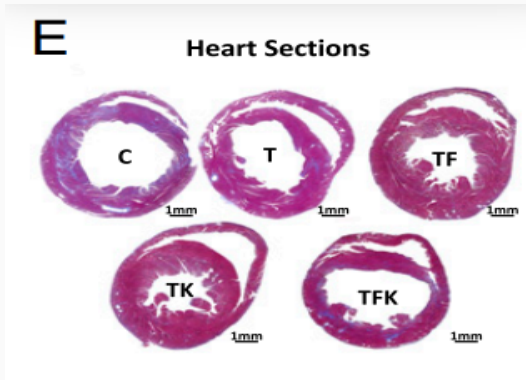
## Fourth disease model



**Figure 9:** FS quantification of ECHOs at baseline and 7, 30, and 90 d postsurgery.



**Figure 10:** Quantification of EF from ECHO.



**Figure 11:** Representative image of MTS hearts taken at 10 and stitched together.

MTS sections revealed up to a 61% decrease in interstitial fibrosis.

## Conclusion

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After these 4 disease models, here are the best results:

- The obesity model: AAV:FGF21 either individually or in combination for both HFD middle-age mice and ND old-mice
- The type II diabetes model: all 3 therapies provided a substantial and lasting effect following a single administration and treated the HFD mice



- The UUO model: all therapies elicited a positive effect on medullary deterioration vs. control mice
- The AAC heart failure model: best results for the combinations of AAV:sTGF $\beta$ R2 with either AAV:FGF21 or AAV: $\alpha$ Klotho.

⇒ **AAV:sTGF $\beta$ R2 and AAV:FGF21 can successfully treat all 4 age-related diseases at once**

**Questions?**