

Deficit di antitripsina e serpinopatie – polimeri patologici e terapia con piccole molecole

David Lomas

Vice Provost (Health) and Head of
University College London Medical School

Dichiarazione di interessi

Ho un brevetto per le piccole molecole descritte in questa presentazione. Sono stati concessi in licenza a una società statunitense per passare agli studi sull'uomo (spero quest'anno)

Deficit di Z α_1 -antitripsina

342 Glu to Lys

1:1700 North European Caucasians

plasma antitrypsin level 10-15% of normal

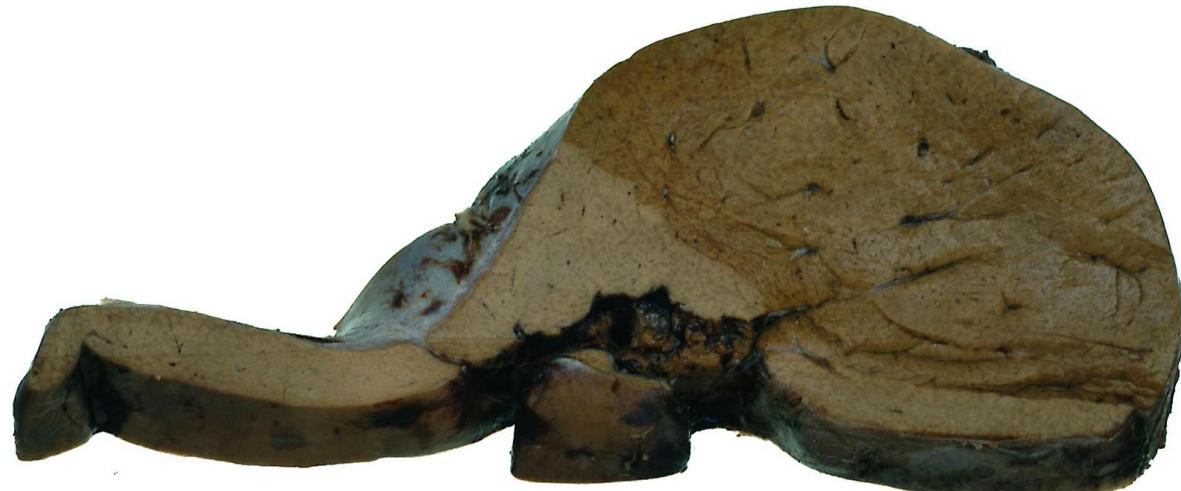
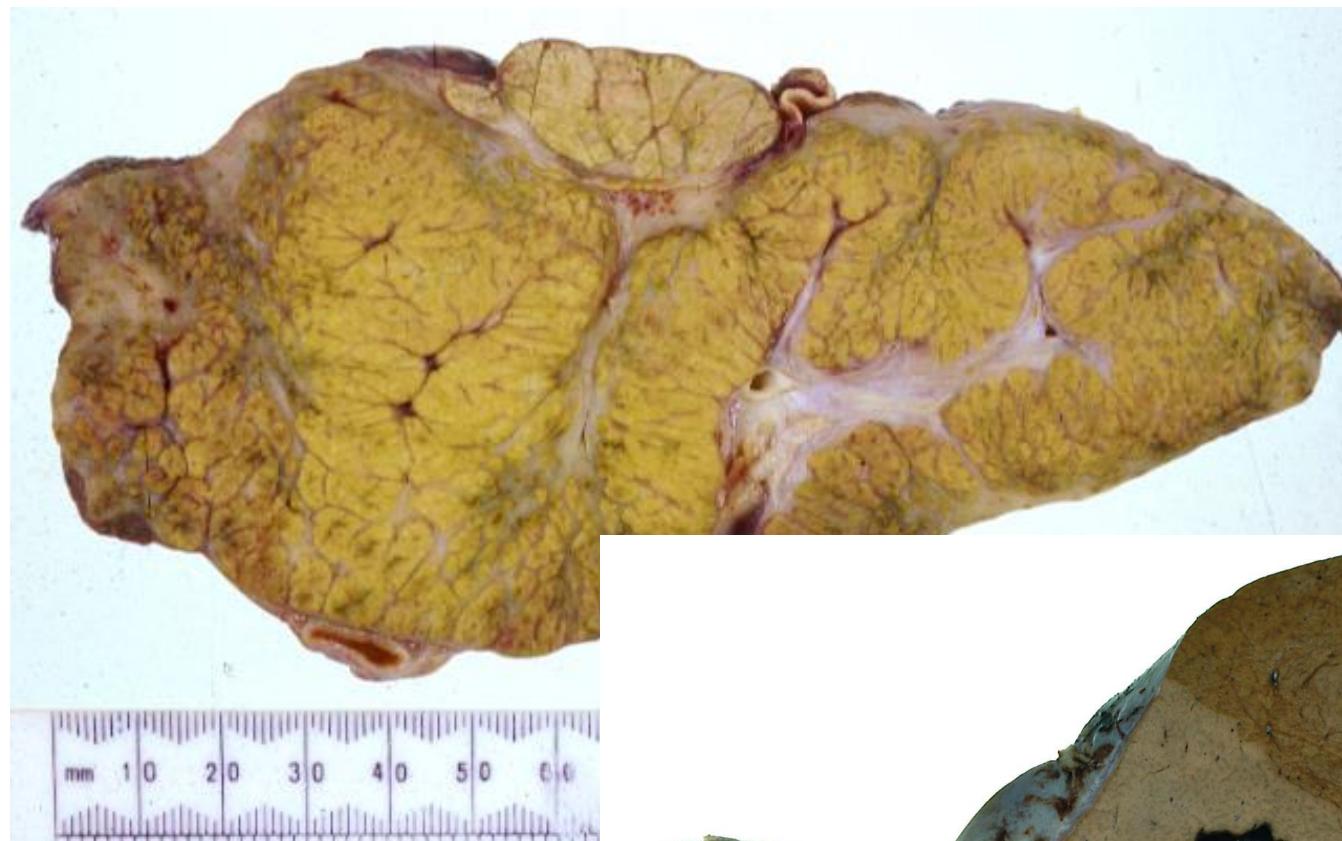
85% protein is retained in the liver

Enfisema con deficit di α_1 -antitripsina

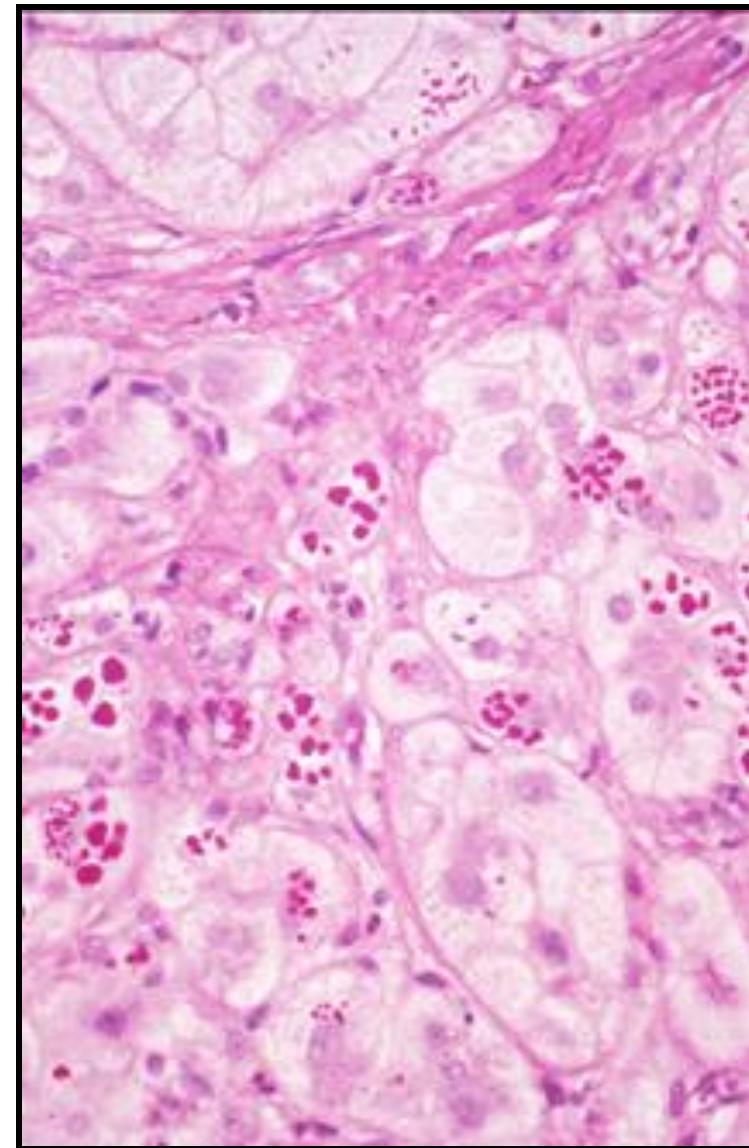
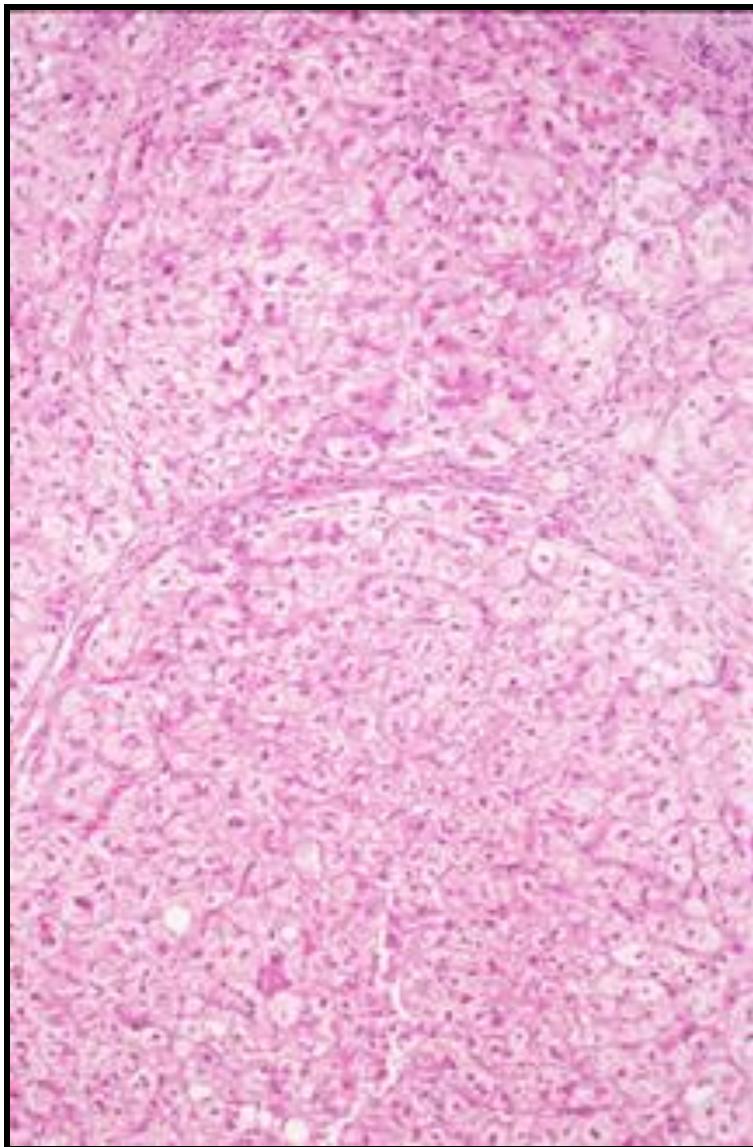


Eriksson, *Acta Med. Scand.* 1965; suppl 432: 1-85

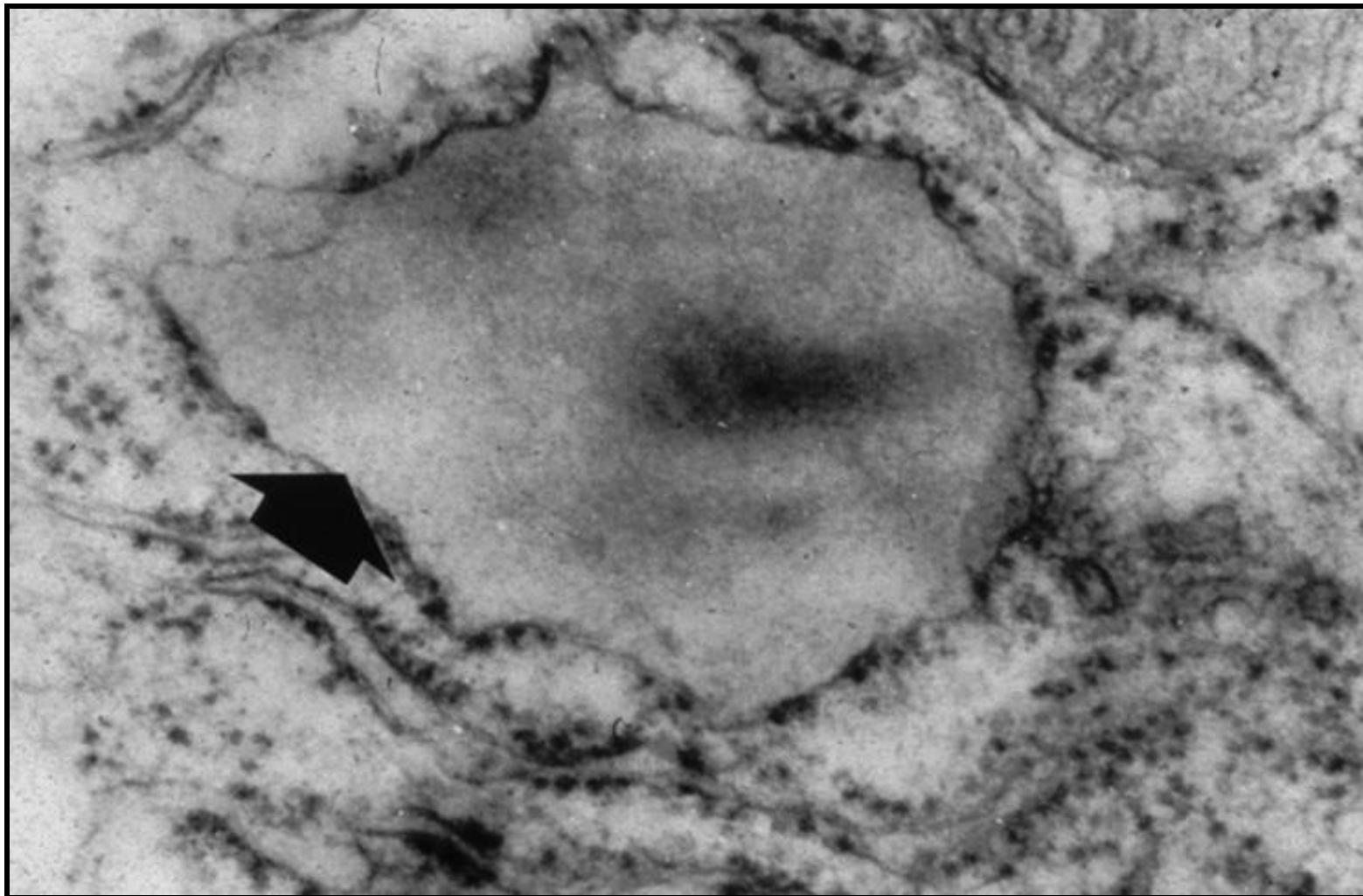
Cirrosi con deficit di α_1 -antitripsina



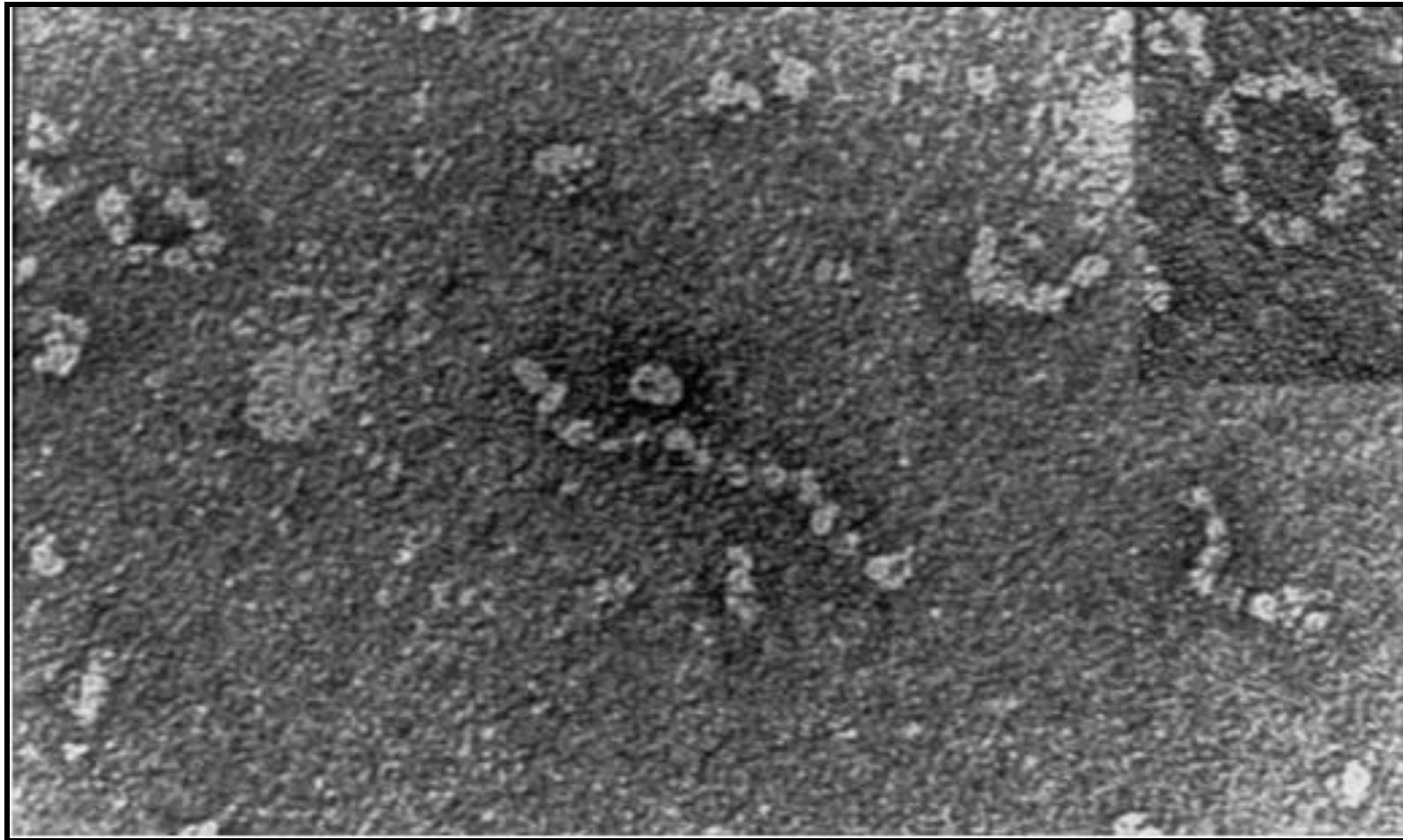
Z α_1 -antitripsina forma inclusioni PAS positive



Z α_1 -antitripsina viene trattenuta nel ER



Z α_1 -antitripsina forma polimeri *in vivo*

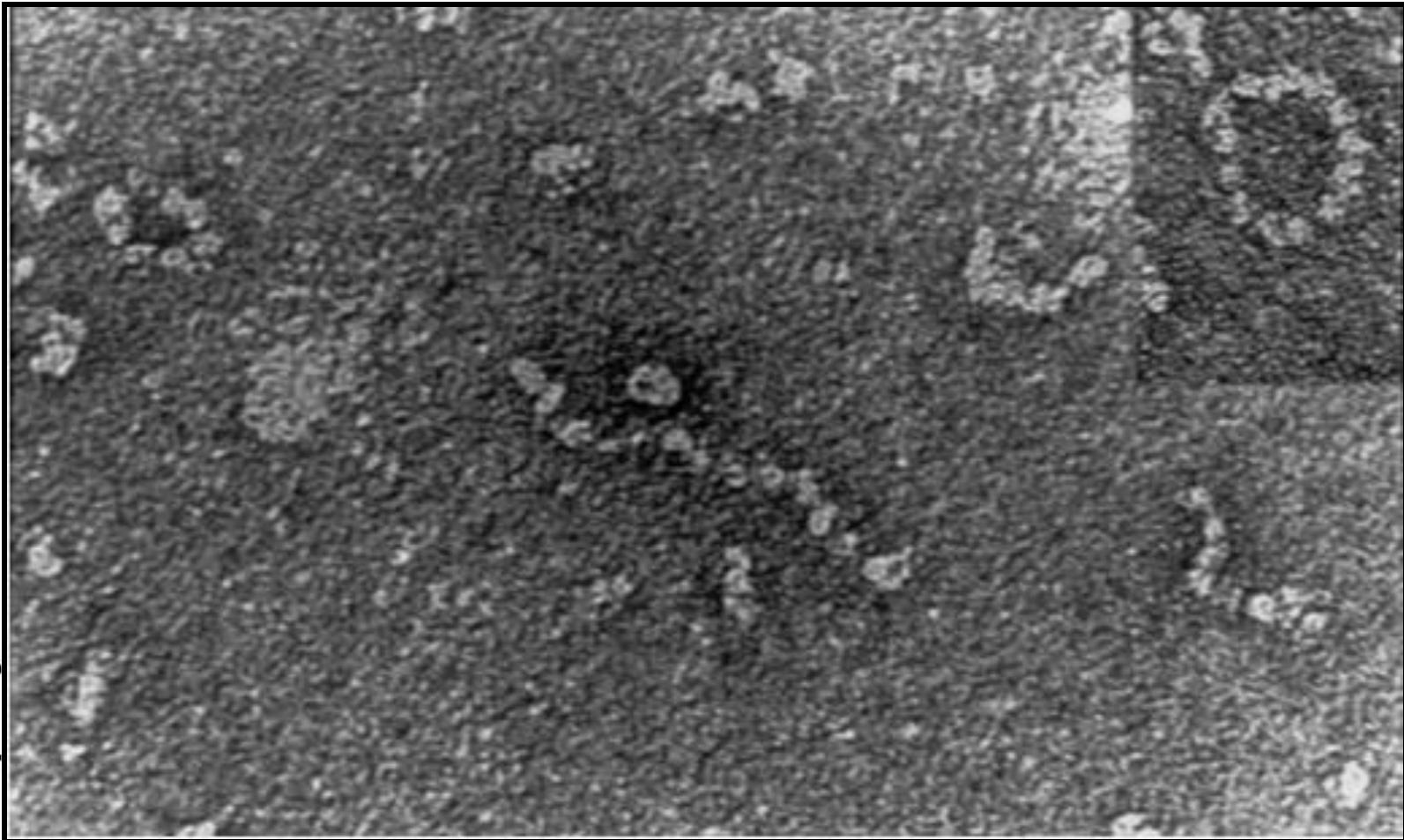


Lomas *et al*, *Nature* 1992; 357: 605-607

Lomas *et al*, *J.Biol.Chem.* 1993; 268: 15333-15335

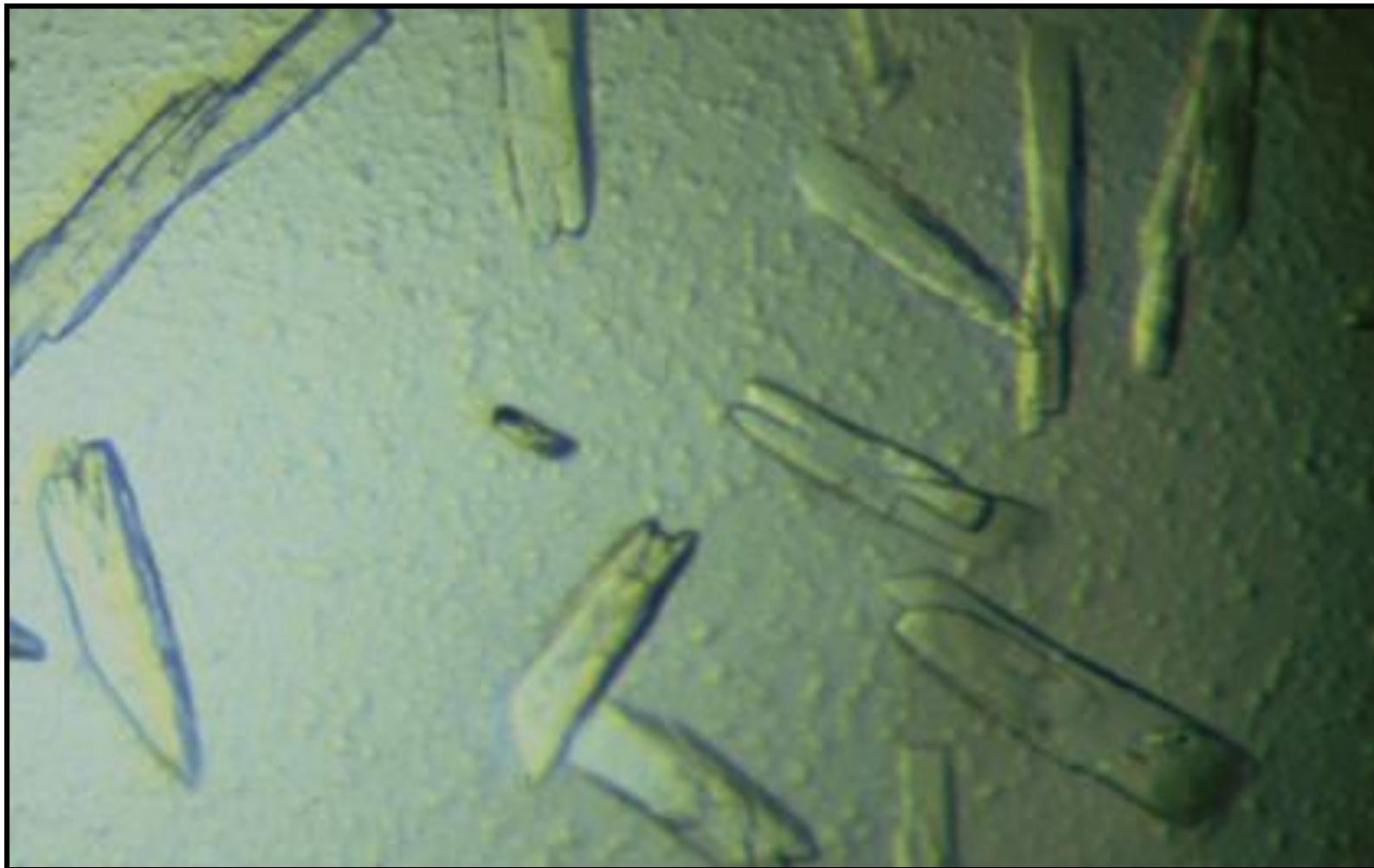
L'anticorpo monoclonale anti-polimero colora le inclusioni

mAb 2C1
polymerised $\alpha 1$ AT

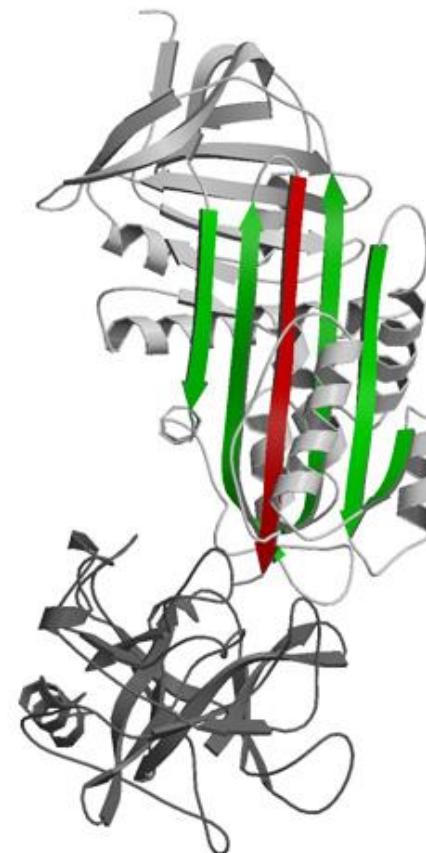
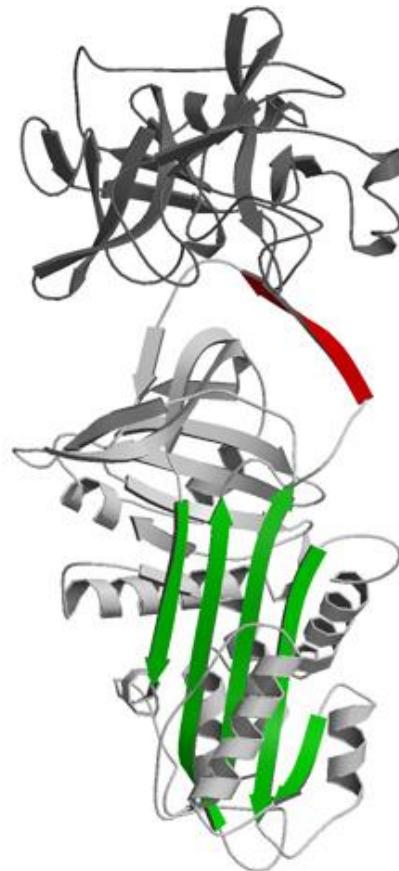


Miranda *et al*, Hepatology 2010; 52: 1078-1088

Struttura cristallina dell' α_1 - antitripsina



Inibizione di α_1 -antitripsina dell'elastasi neutrofila

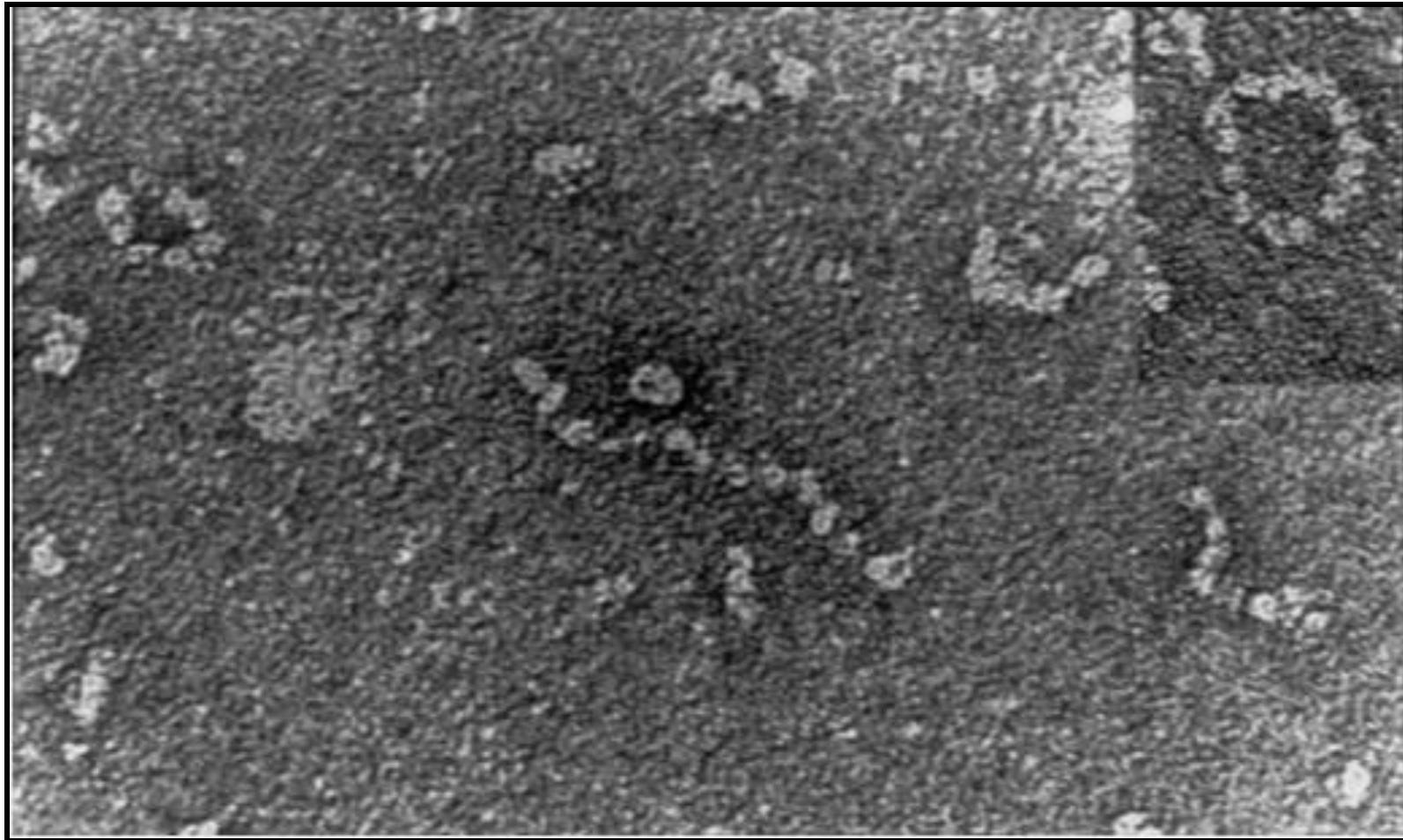


Elliott *et al*, *Nature Struct. Biol.* 1996; 3: 676-681

Huntington *et al*, *Nature* 2000; 407: 923-926



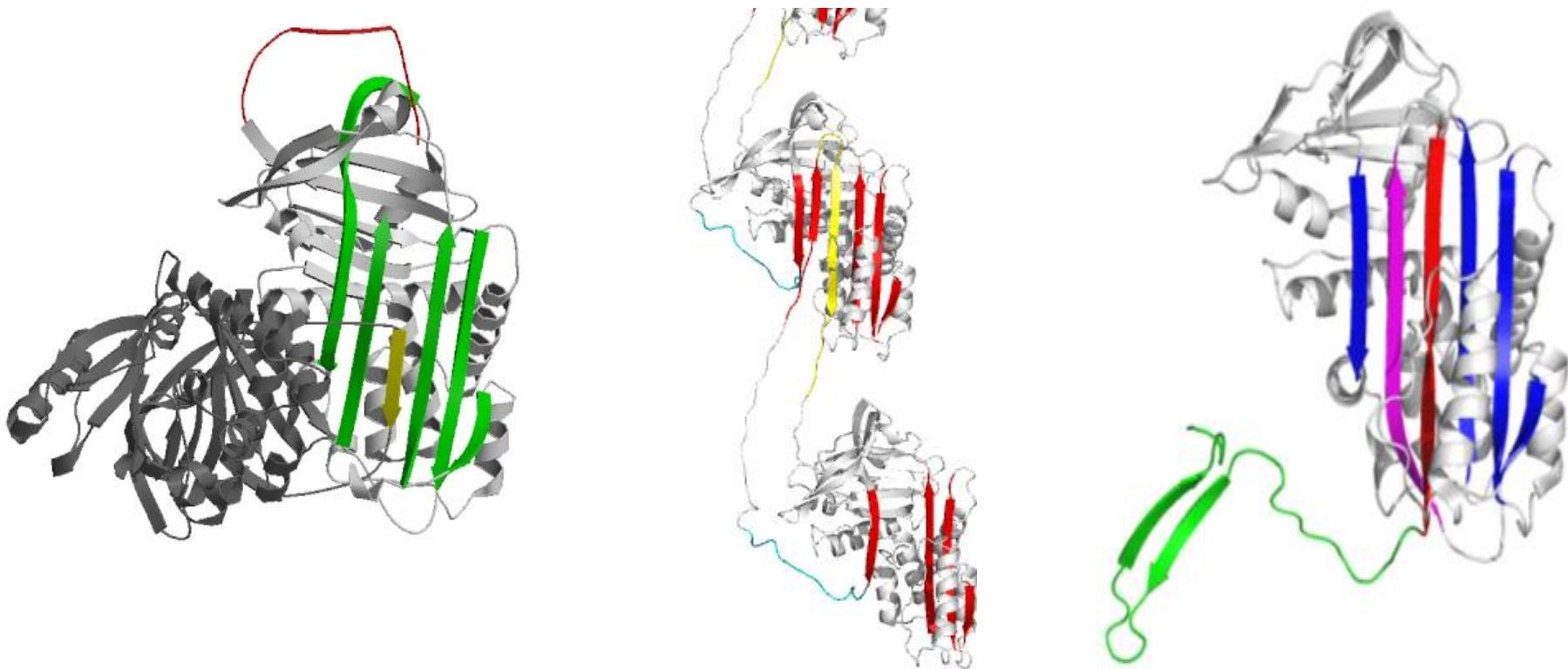
Z α_1 -antitripsina forma polimeri *in vivo*



Lomas *et al*, *Nature* 1992; 357: 605-607

Lomas *et al*, *J.Biol.Chem.* 1993; 268: 15333-15335

Il polimero patologico?

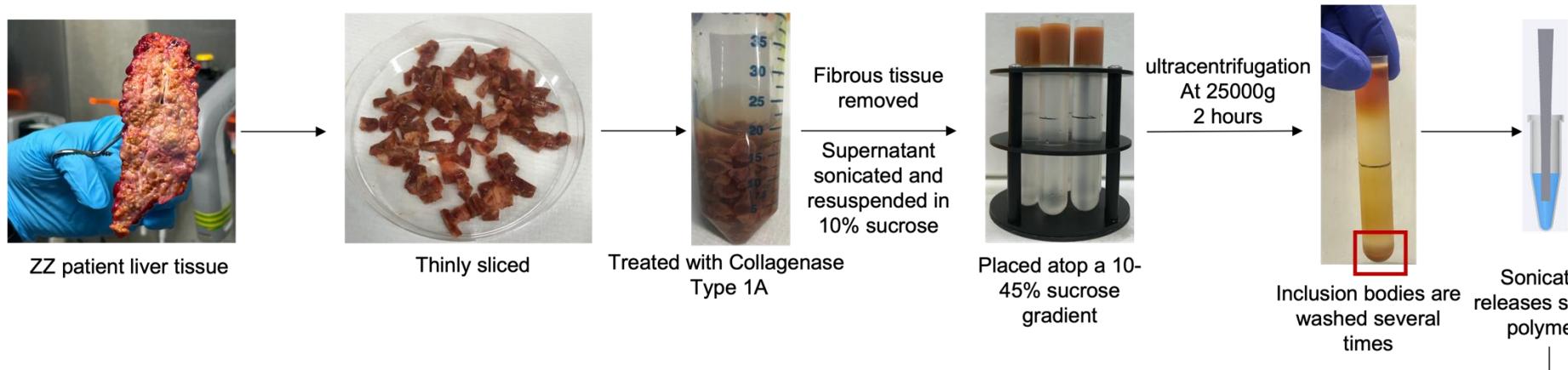


Lomas *et al*, *Nature* 1992; 357: 605-607

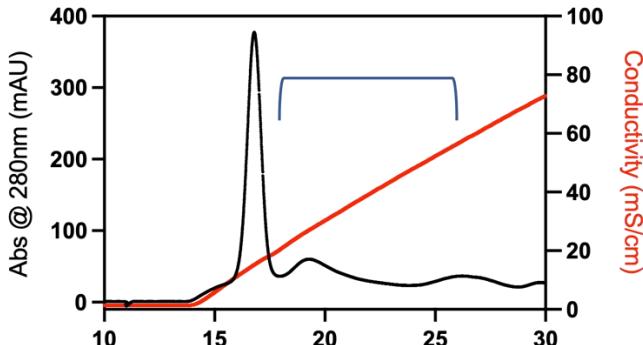
Yamasaki *et al*. *Nature* 2008; 455: 1255-1258

Yamasaki *et al*, *EMBO Rep.* 2011; 12: 1011-1017

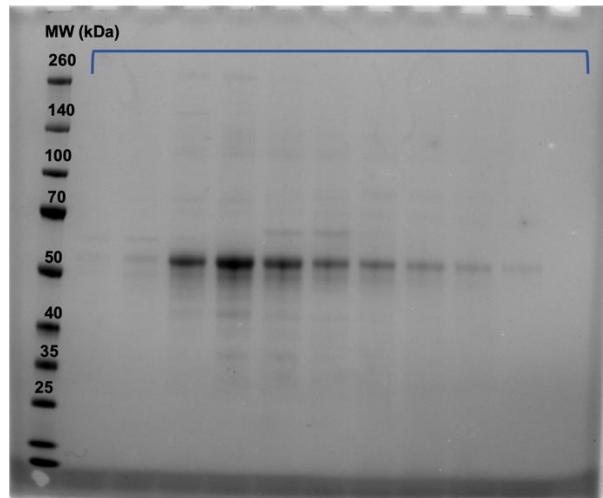
Preparazione di polimeri intraepatici Z α_1 -antitripsina



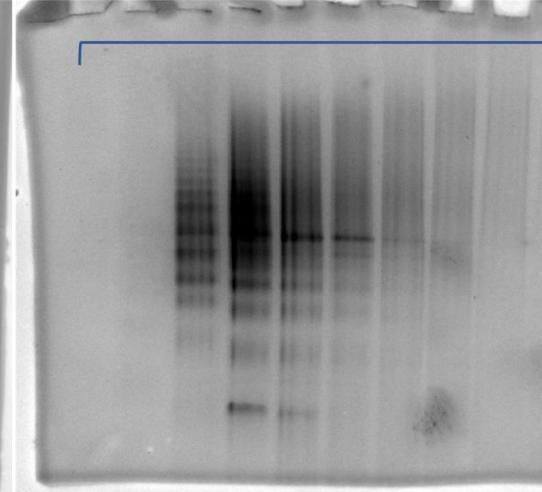
Anion-exchange chromatography



SDS-PAGE

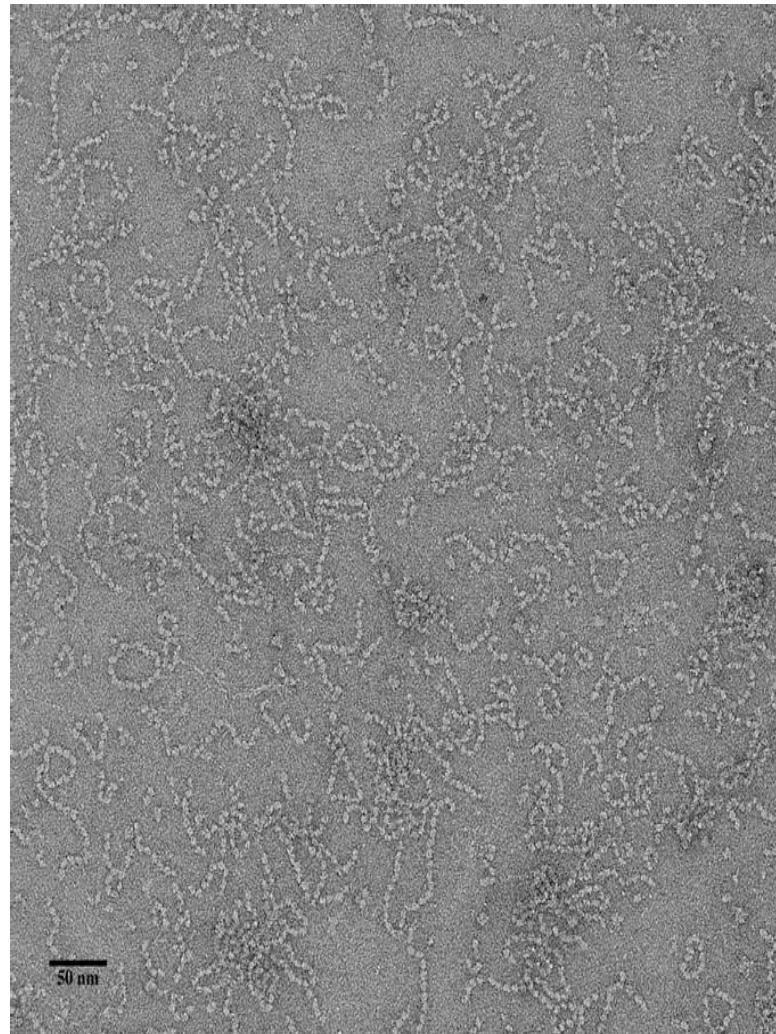


Native-PAGE used to identify fractions containing polymers



Imaging dei polimeri intraepatici Z α_1 -antitripsina mediante microscopia elettronica

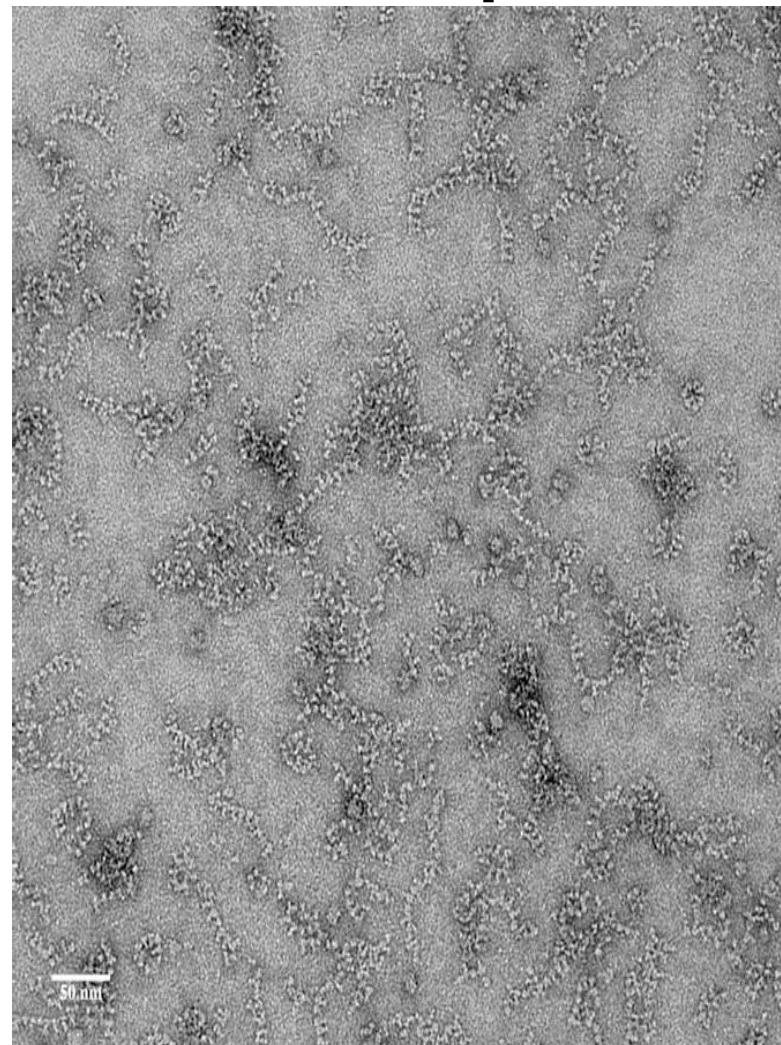
Negative stain



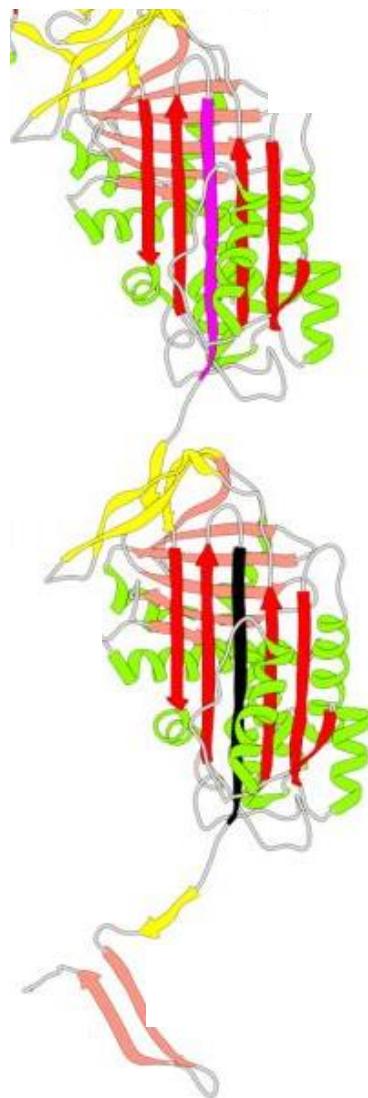
Emma Elliston

Imaging dei polimeri intraepatici Z α_1 -antitripsina mediante microscopia elettronica

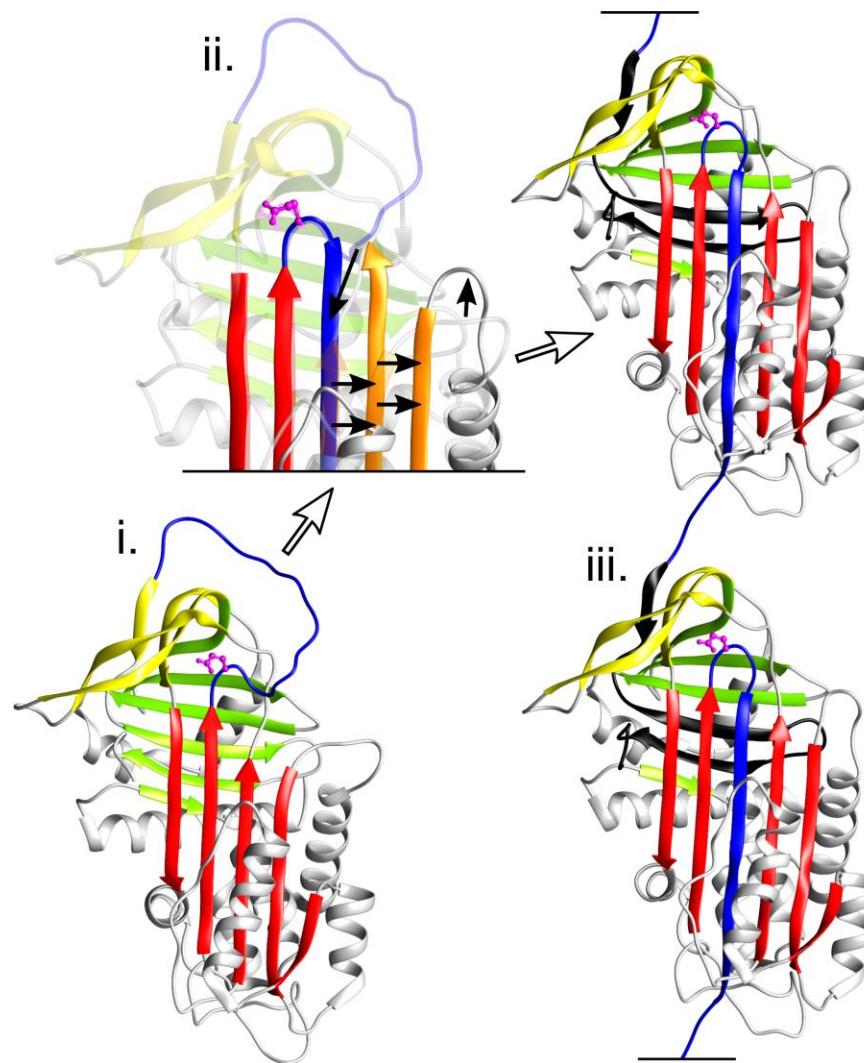
Negative stain of polymers labelled with 4B12 Fab



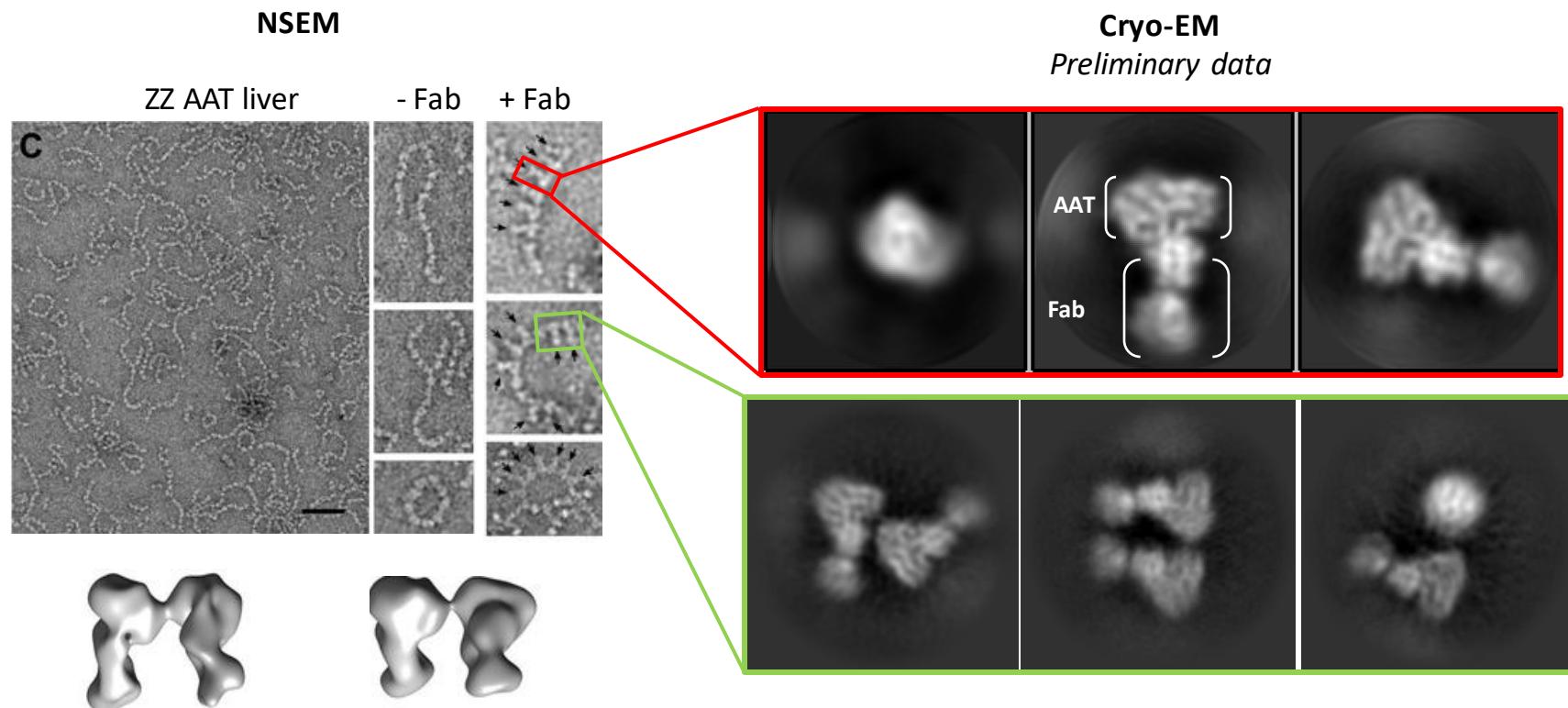
Il polimero patologico



Il polimero patologico



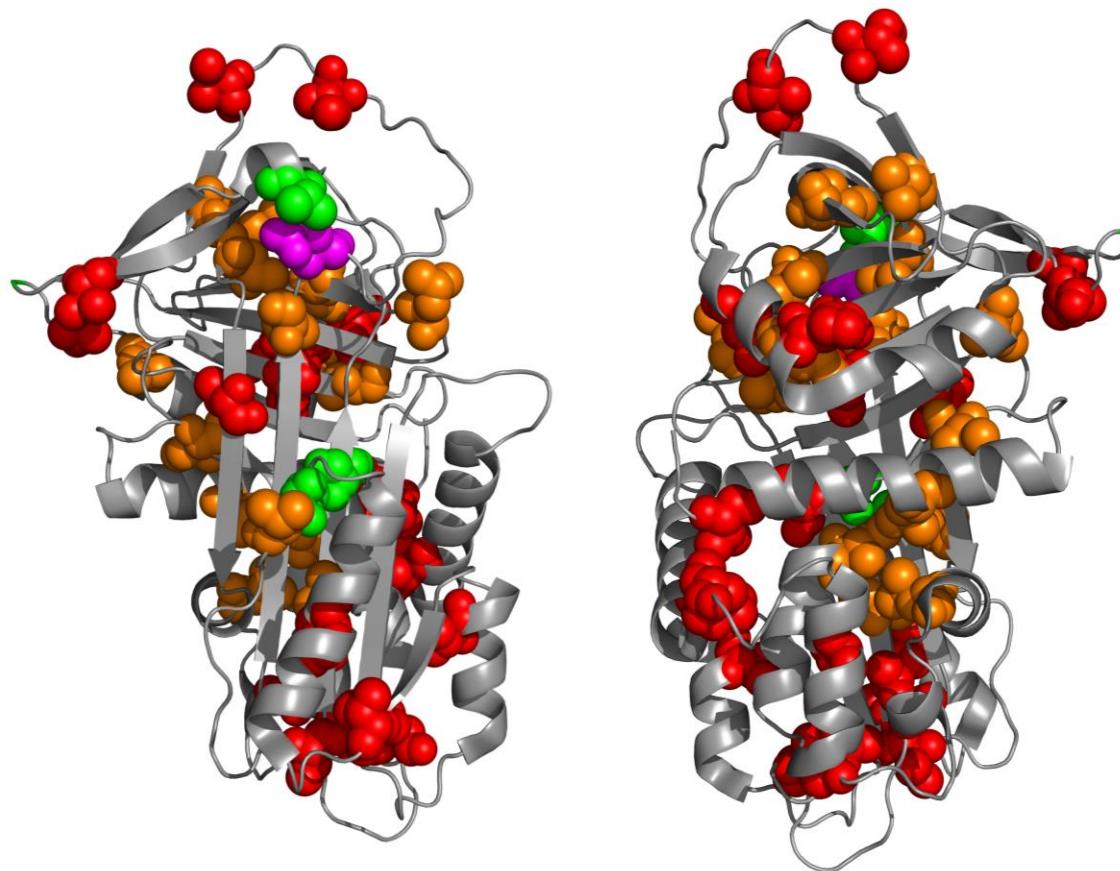
Verso una ricostruzione 3D ad alta risoluzione di polimeri AAT derivati dal paziente



Faull, SV. Science. 2020

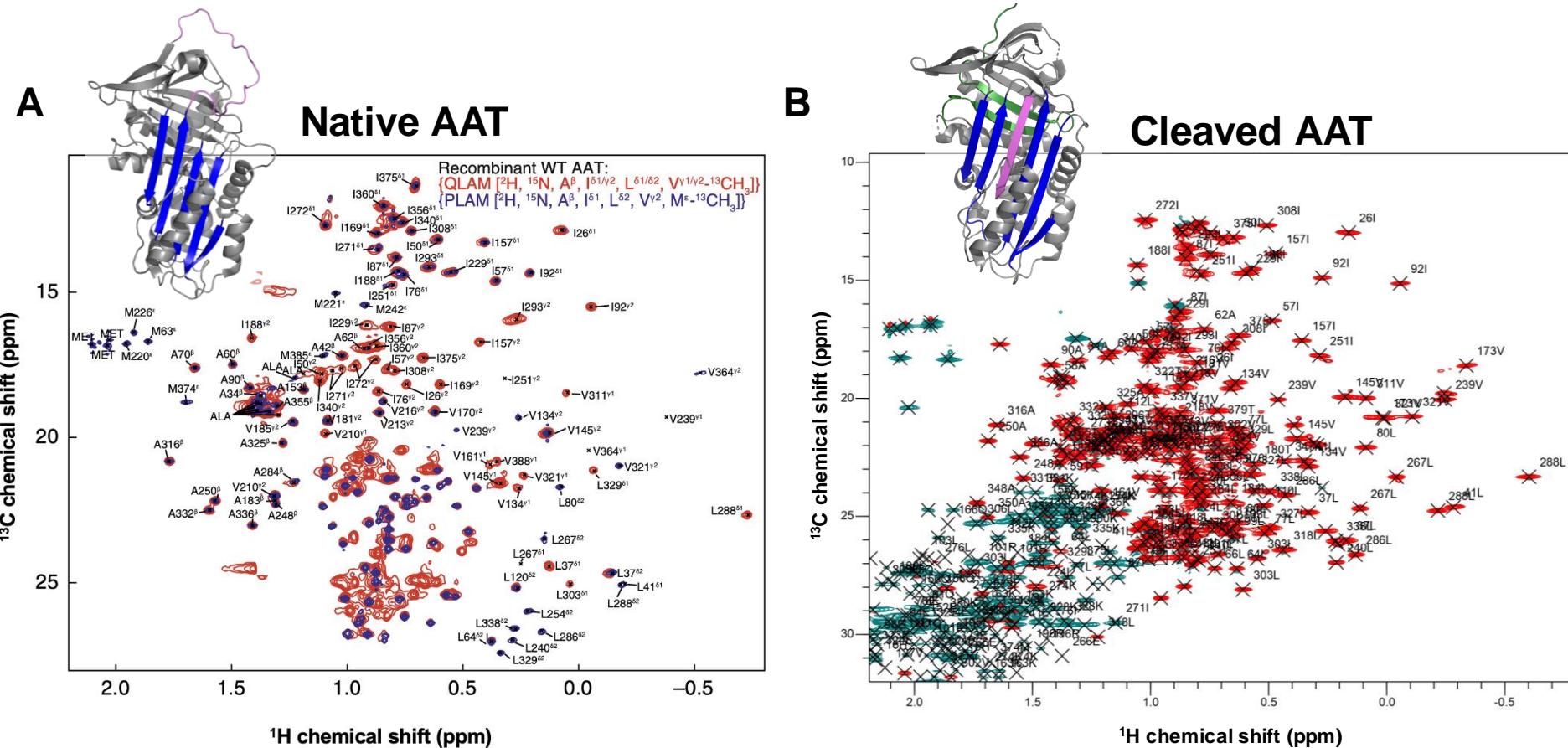
Ibrahim Aldobiyani

Abbondanza naturale NMR di M and Z α_1 -antitripsina



Magenta = Glu342Lys mutation Red = No change to WT
Orange = Chemical shift change Green = Large shifts/loss

L'assegnazione metilica di AAT può essere utilizzata come sonde

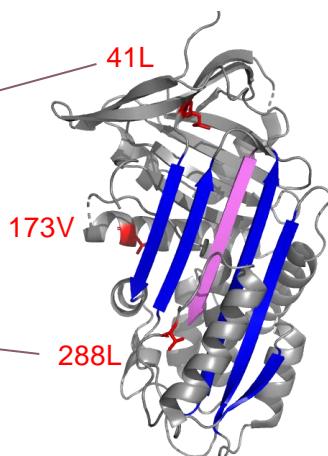
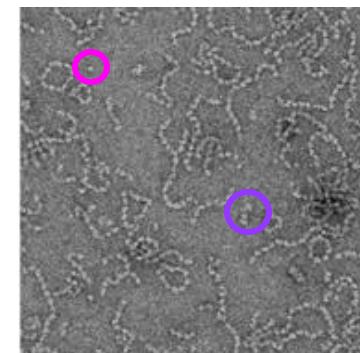
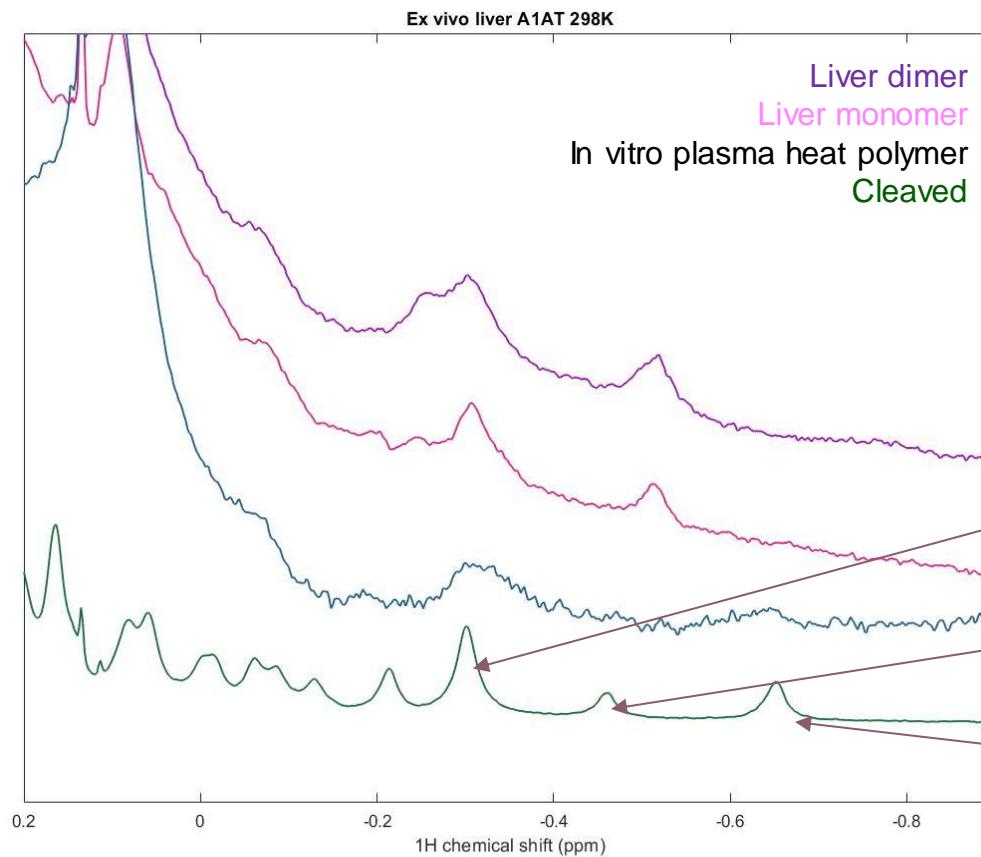


Jagger, A.M., Waudby, C.A., Irving, J.A. et al. *Nat Commun* **11**, (2020).

Sarah Lowen

NMR in stato di soluzione di AAT di fegato espiantato

^1H spectrum AAT methyl resonances



Repeat at higher temp and stronger magnet to resolve peaks
and provide structural information

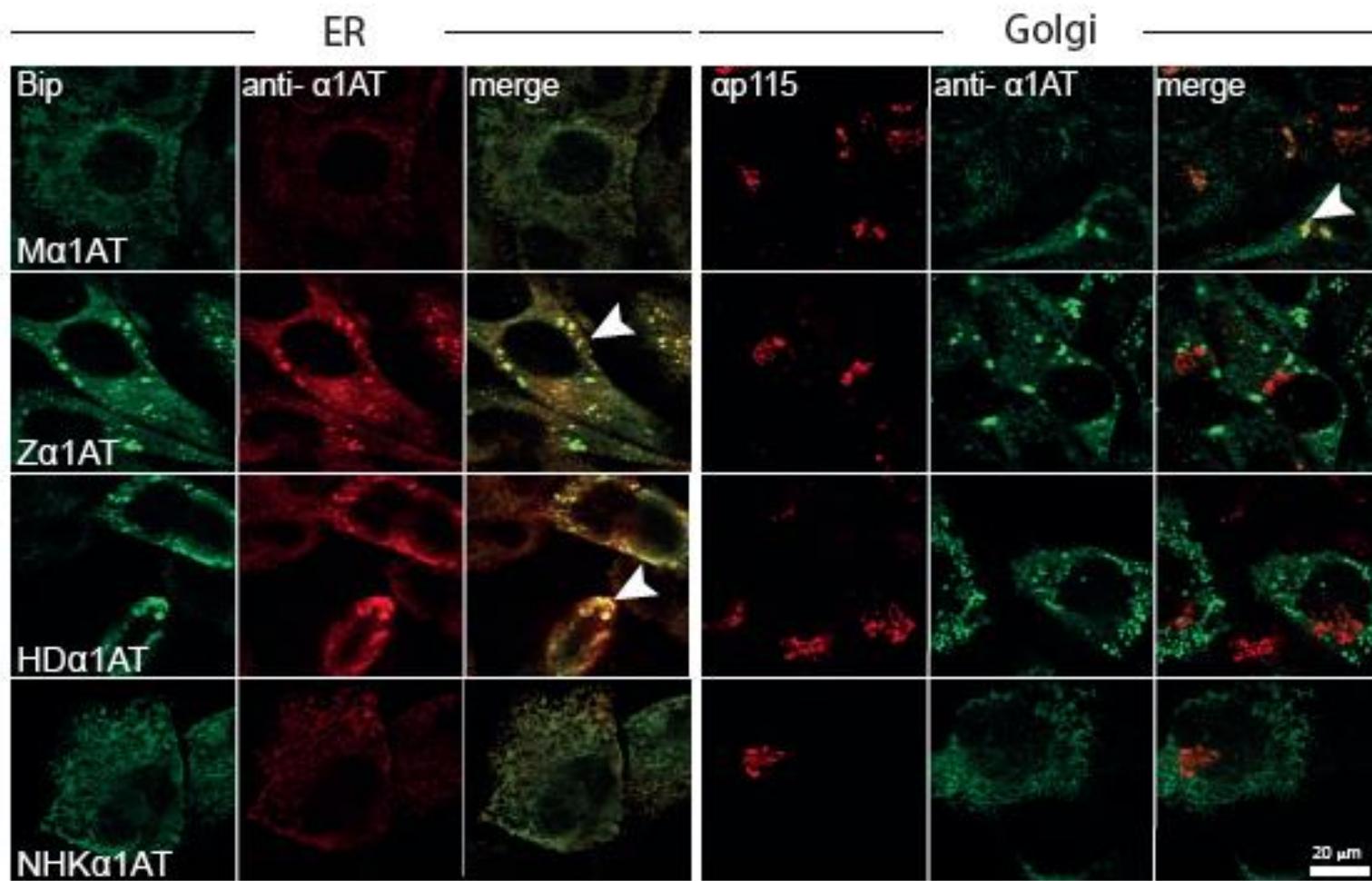
Sarah Lowen

Il deficit plasmatico di α_1 -antitripsina è proporzionale alla velocità di polimerizzazione

	Mutation	Polymerisation	Deficiency
Z	Glu342Lys	+++	+++
Siiyama	Ser53Phe	+++	+++
Mmalton	Δ 52Phe	+++	+++
King's	His334Asp	++++	+++
S	Glu264Val	+	+
I	Arg39Cys	+	+

Mahadeva *et al*, *J. Clin. Invest.* 1999; 103: 99-1006
 Miranda *et al*, *Hepatology* 2010; 52: 1078-1088

I polimeri AAT sono trattenuti all'interno dell'ER



Miranda *et al*, *Hepatology* 2010; 52: 1078-1088

Ordóñez *et al*, *Hepatology* 2013; 57: 2049-60

Conseguenze cellulari della polimerizzazione

Polymers do not induce the unfolded protein response (Bip, IRE-1, ATF-6, CHOP)

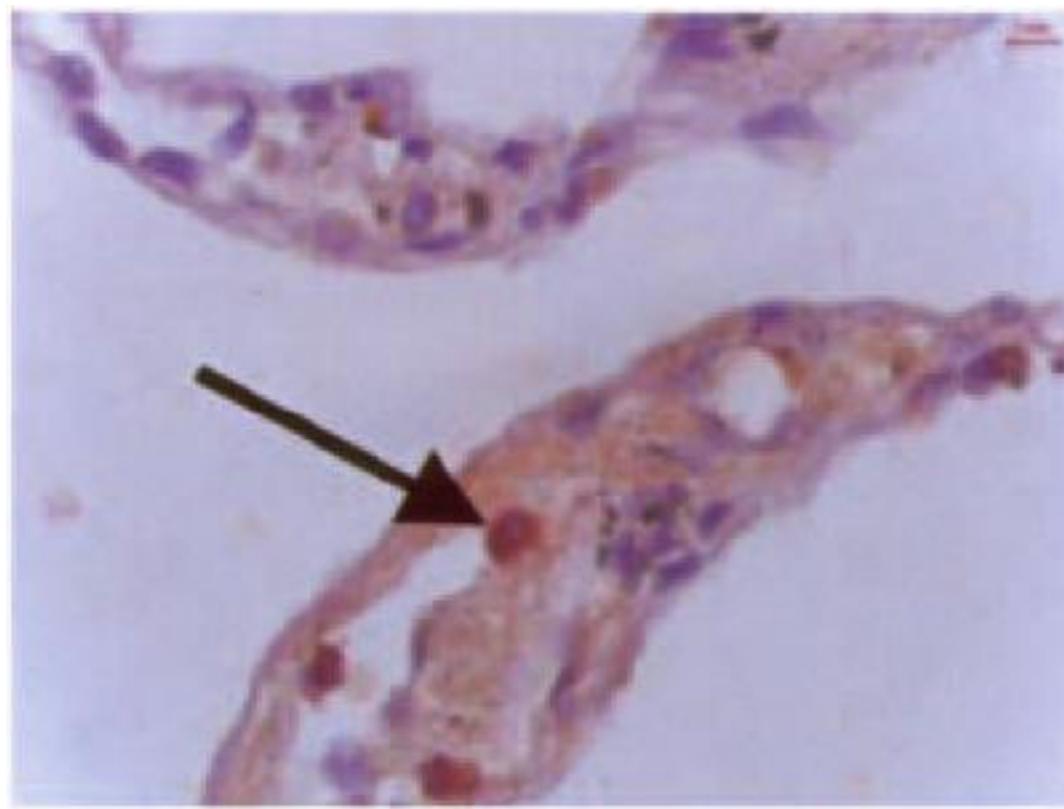
Polymers prime the cells to ER stress

Enfisema con deficit di α_1 -antitripsina



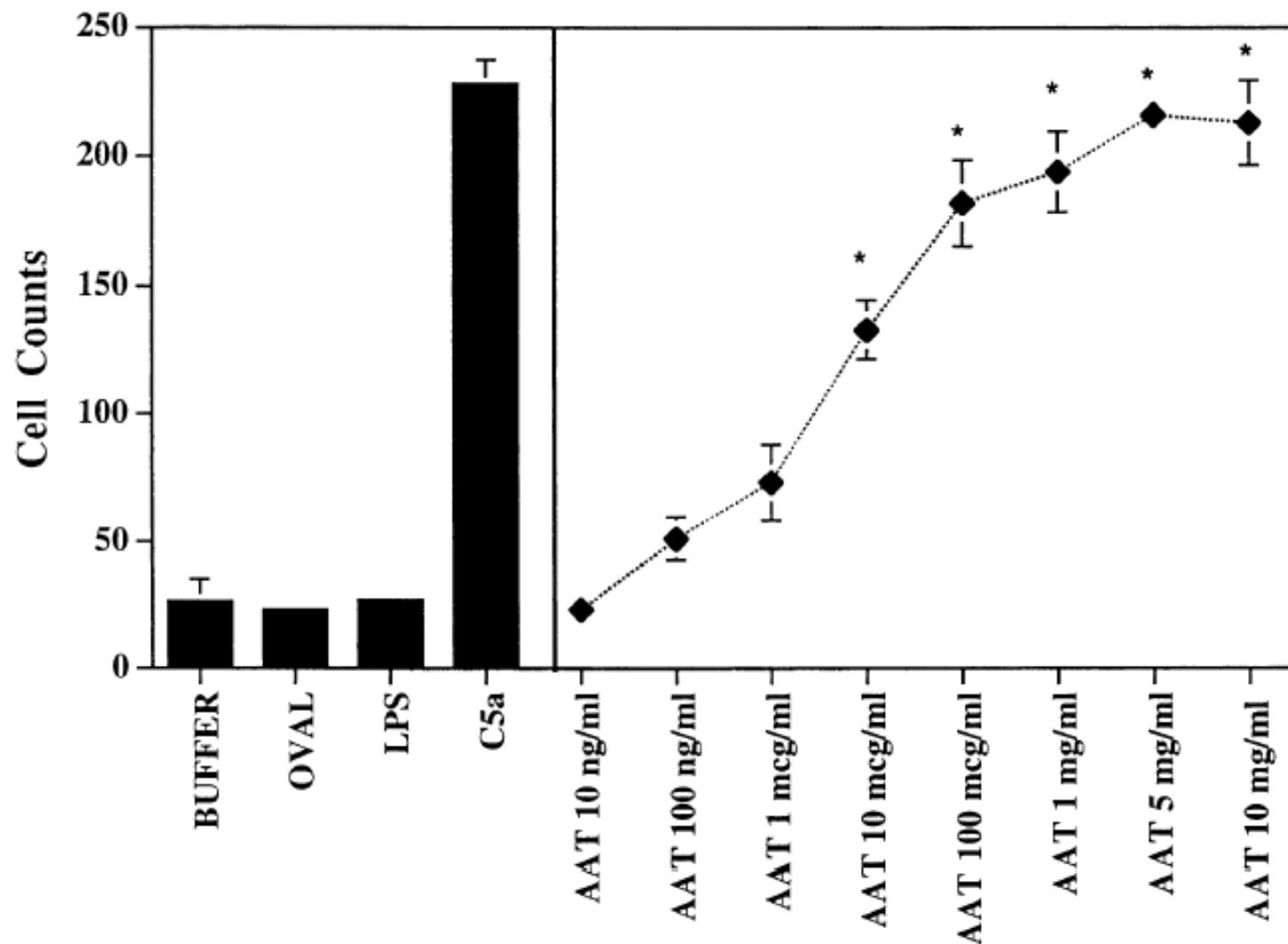
Eriksson, *Acta Med. Scand.* 1965; suppl 432: 1-85

I polimeri Z α_1 -antitripsina co-localizzano con i neutrofili *in vivo*

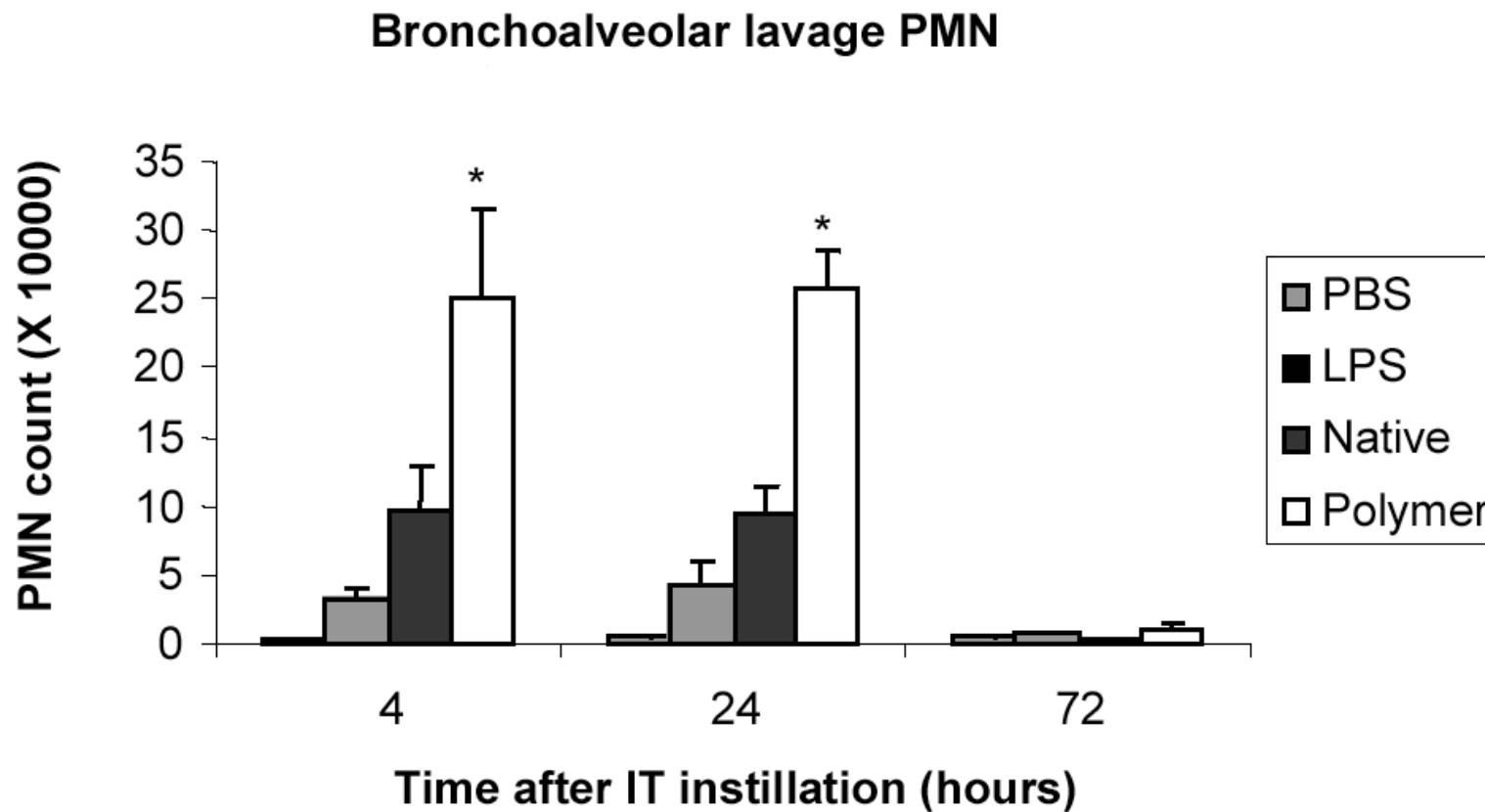


Mahadeva et al, Am. J. Pathol. 2005; 166: 377-386

I polimeri α_1 -antitripsina sono chemiotattici *in vitro*

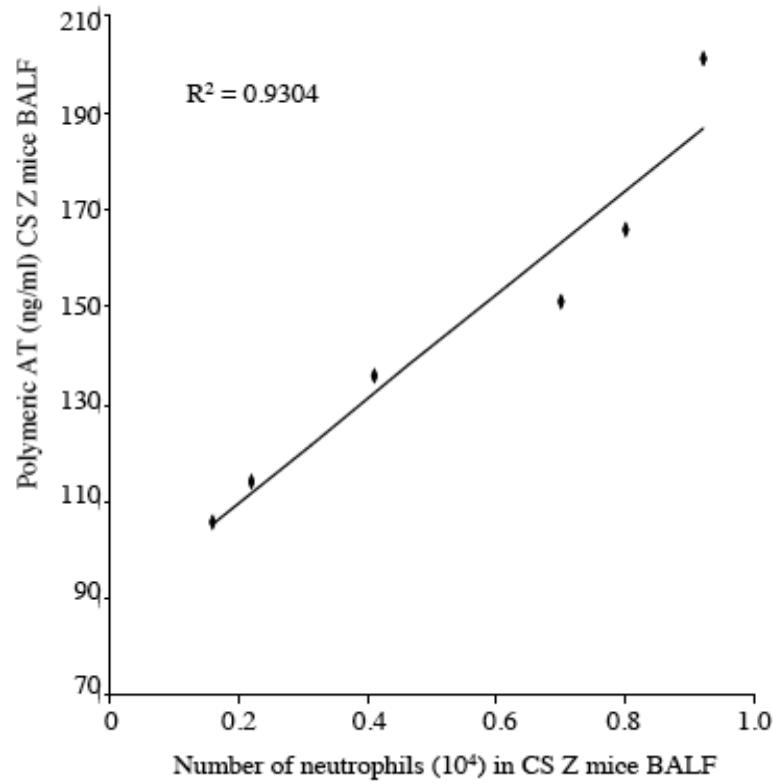
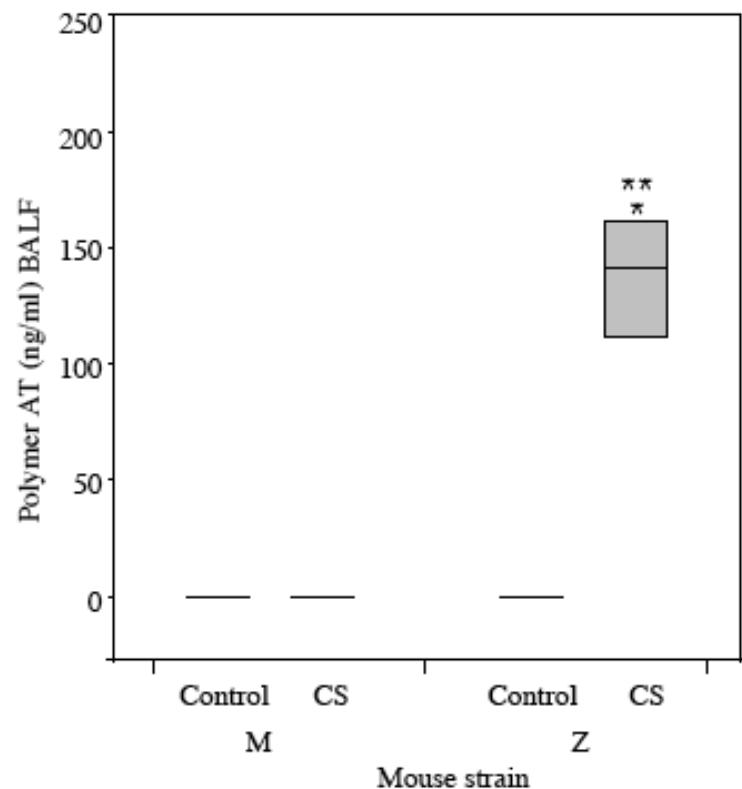


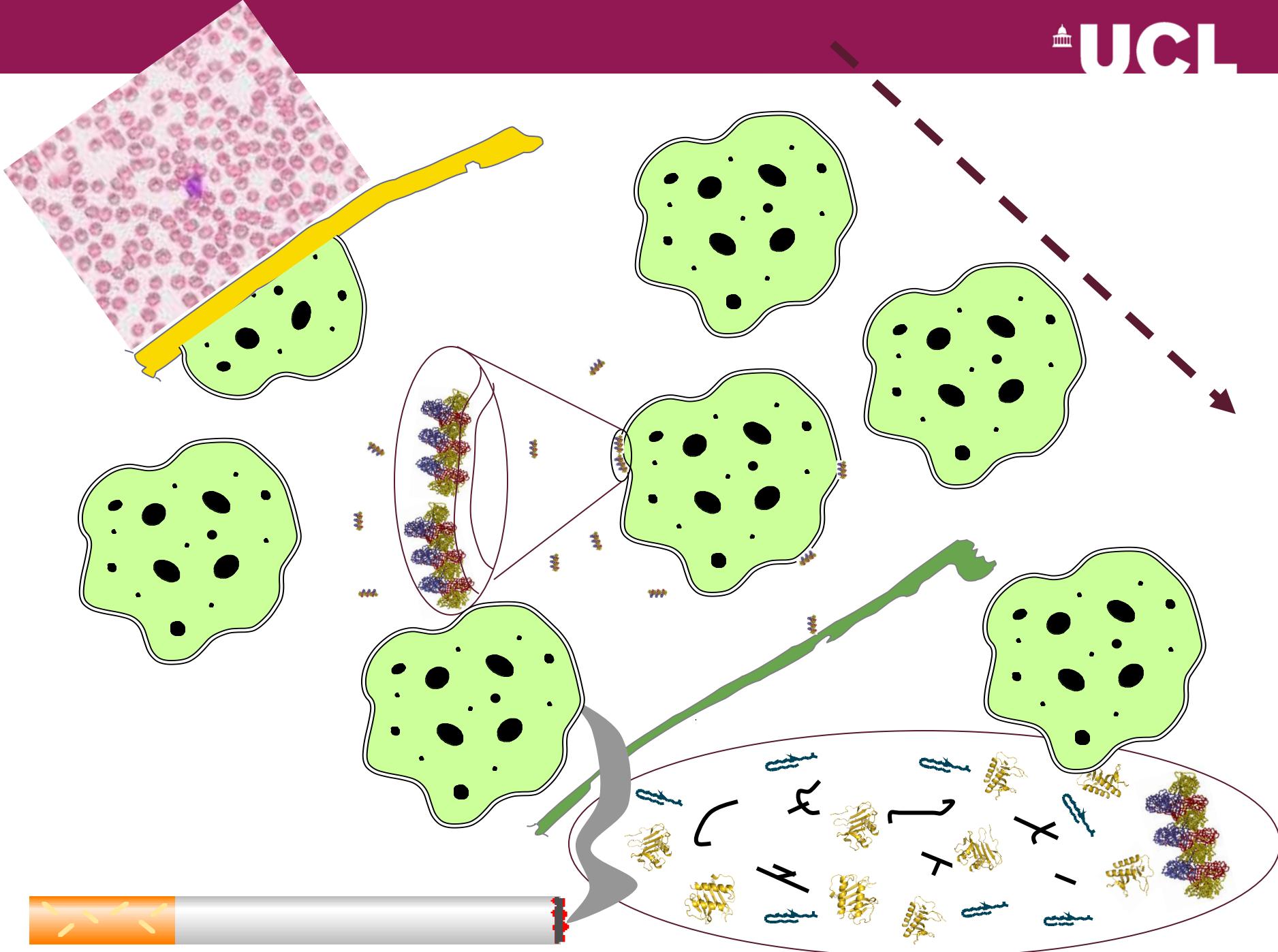
I polimeri α_1 -antitripsina sono chemiotattici *in vitro*



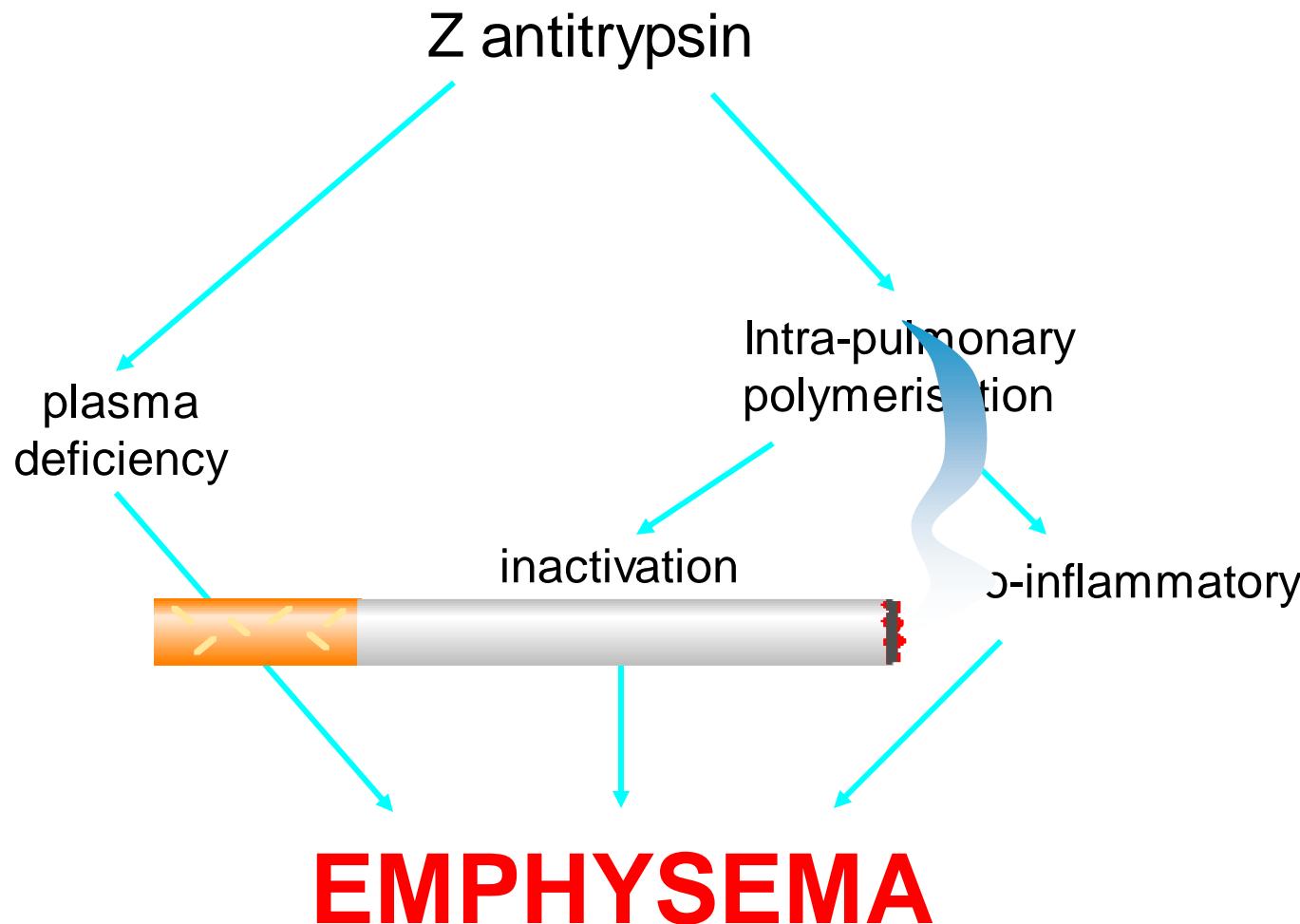
Mahadeva *et al*, Am. J. Pathol. 2005; 166: 377-386

Il fumo di sigaretta induce la polimerizzazione *in vivo*





Meccanismi per la patogenesi dell'enfisema



Lomas and Mahadeva, *J.Clin. Invest.* 2002; 110: 1585-1590

Gooptu and Lomas, *J. Exp. Med.* 2008; 205: 1529-1534

Polimeri extraepatici di α_1 -antitripsina

Polymers are present in the lung, skin and kidney of
PiZZ homozygotes

Elliott *et al*, *Am. J. Resp. Cell Mol Biol.* 1998; 18:670-674

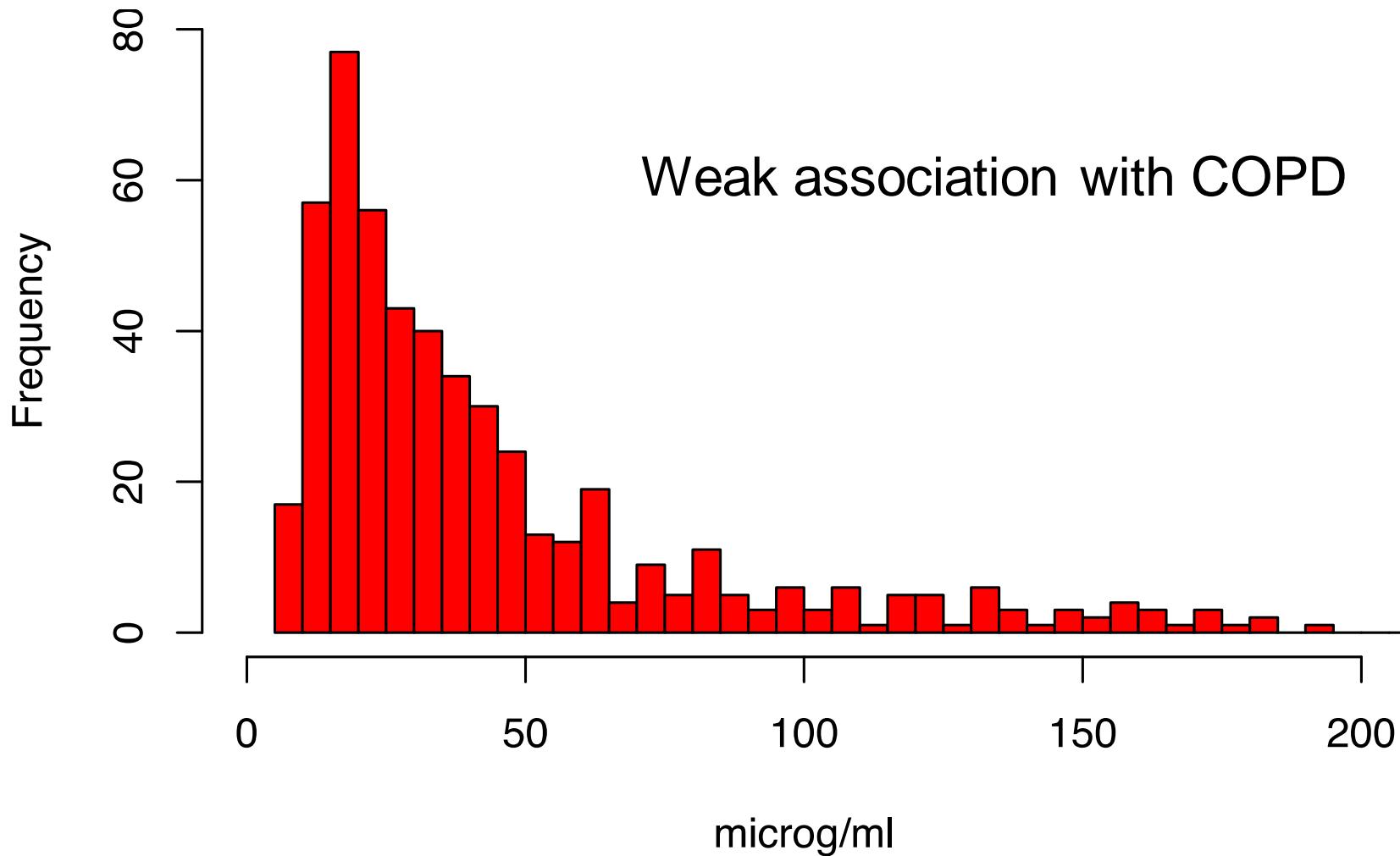
Gross *et al*, *Dermatology. J.* 2009; 218:370-375

Morris *et al*, *Ann Rhem. Dis.* 2011; 70:1851-1856

Polimeri extraepatici di α_1 -antitripsina

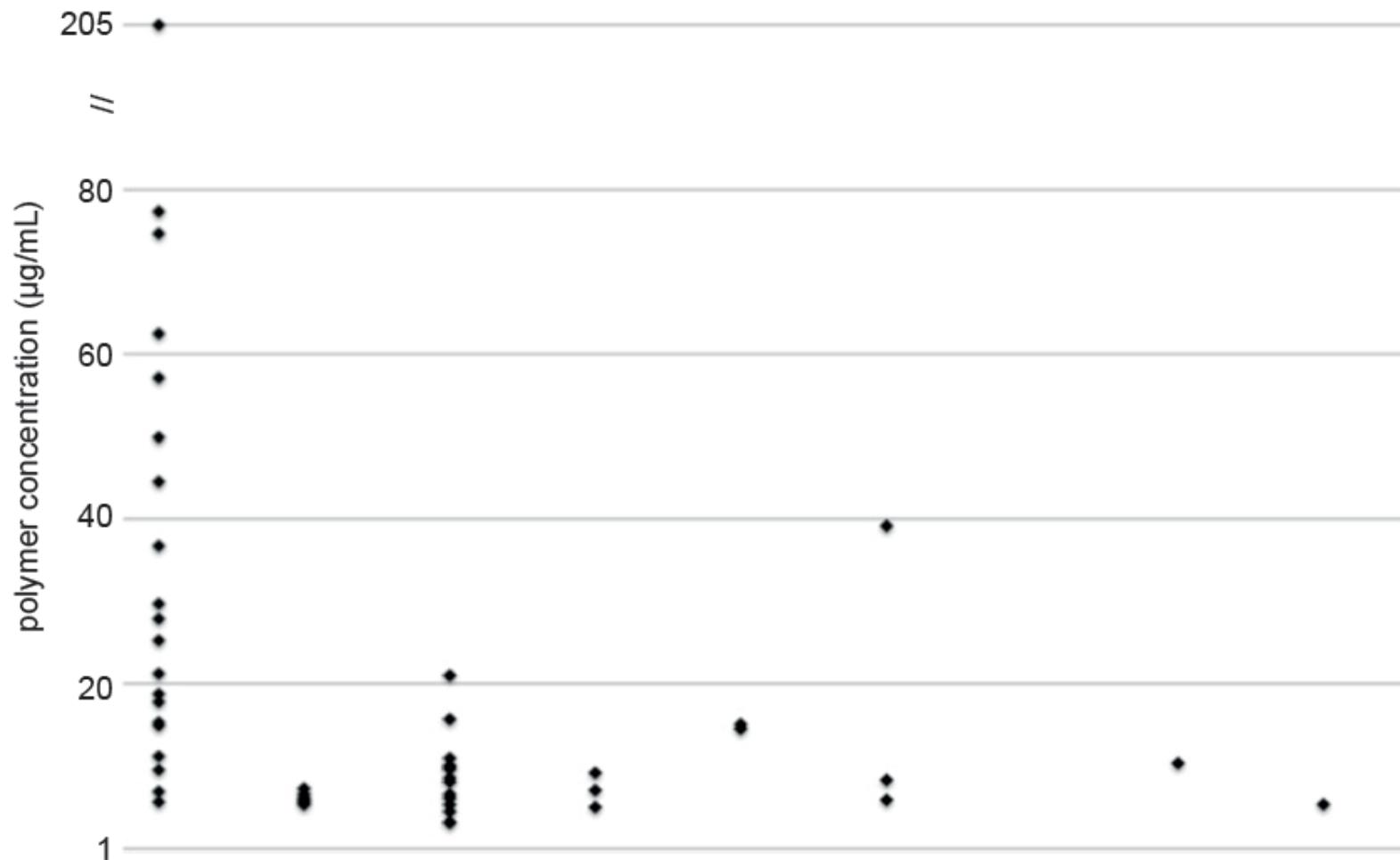
...and in the circulation of 517/517 PiZ homozygotes

Polimeri circolanti di α_1 -antitripsina



Tan *et al*, Eur. Resp. J. 2014; 45: 1501-1504

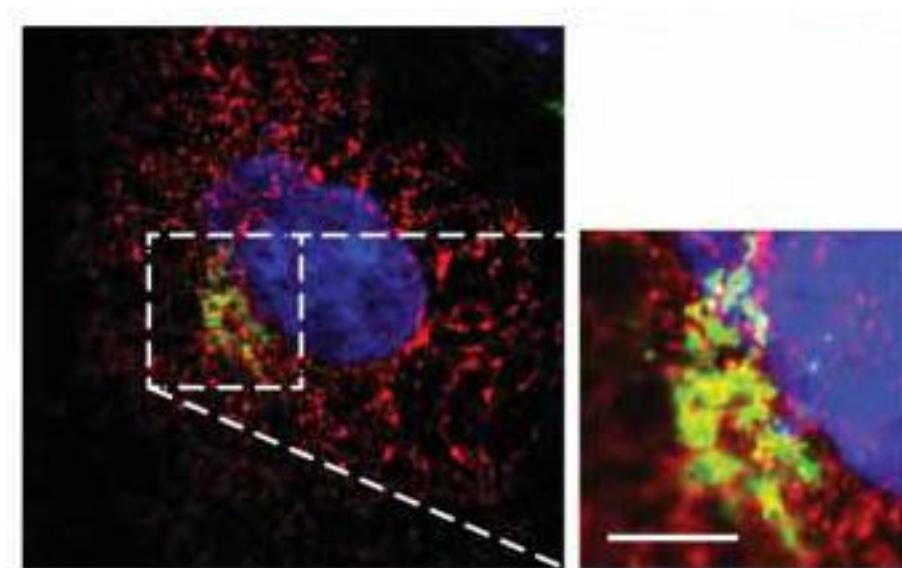
Genotipi α_1 -antitripsina e polimeri circolanti



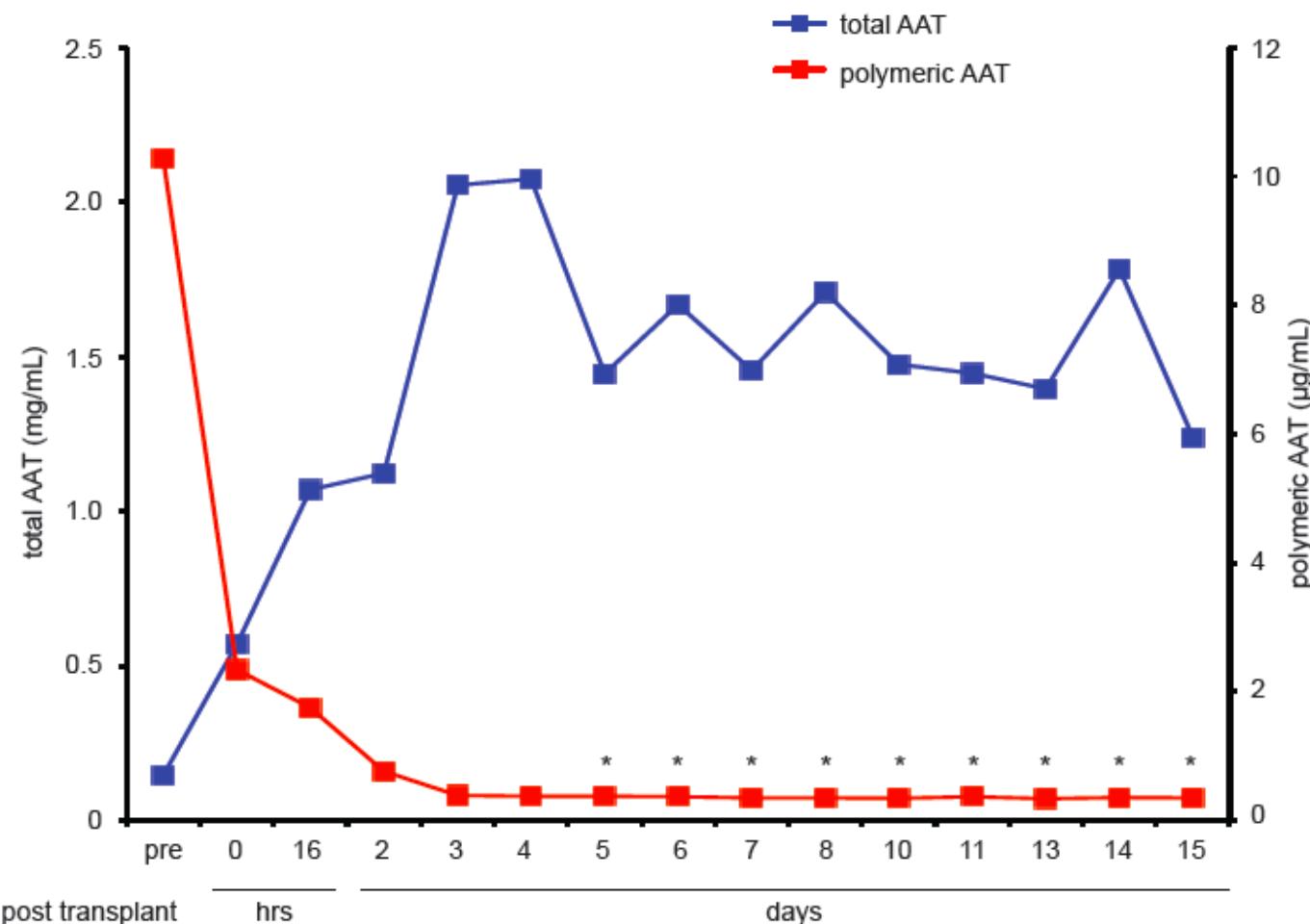
genotype	ZZ	MZ	SZ	FZ	ZMmalton	ZMheerlan	SS	MS	MM
positive samples	20/20	7/20	14/20	3/5	2/2	3/3	0/3	1/20	1/200

Vengono secreti i polimeri di Z α_1 -antitripsina modelli cellulari attraverso il Golgi

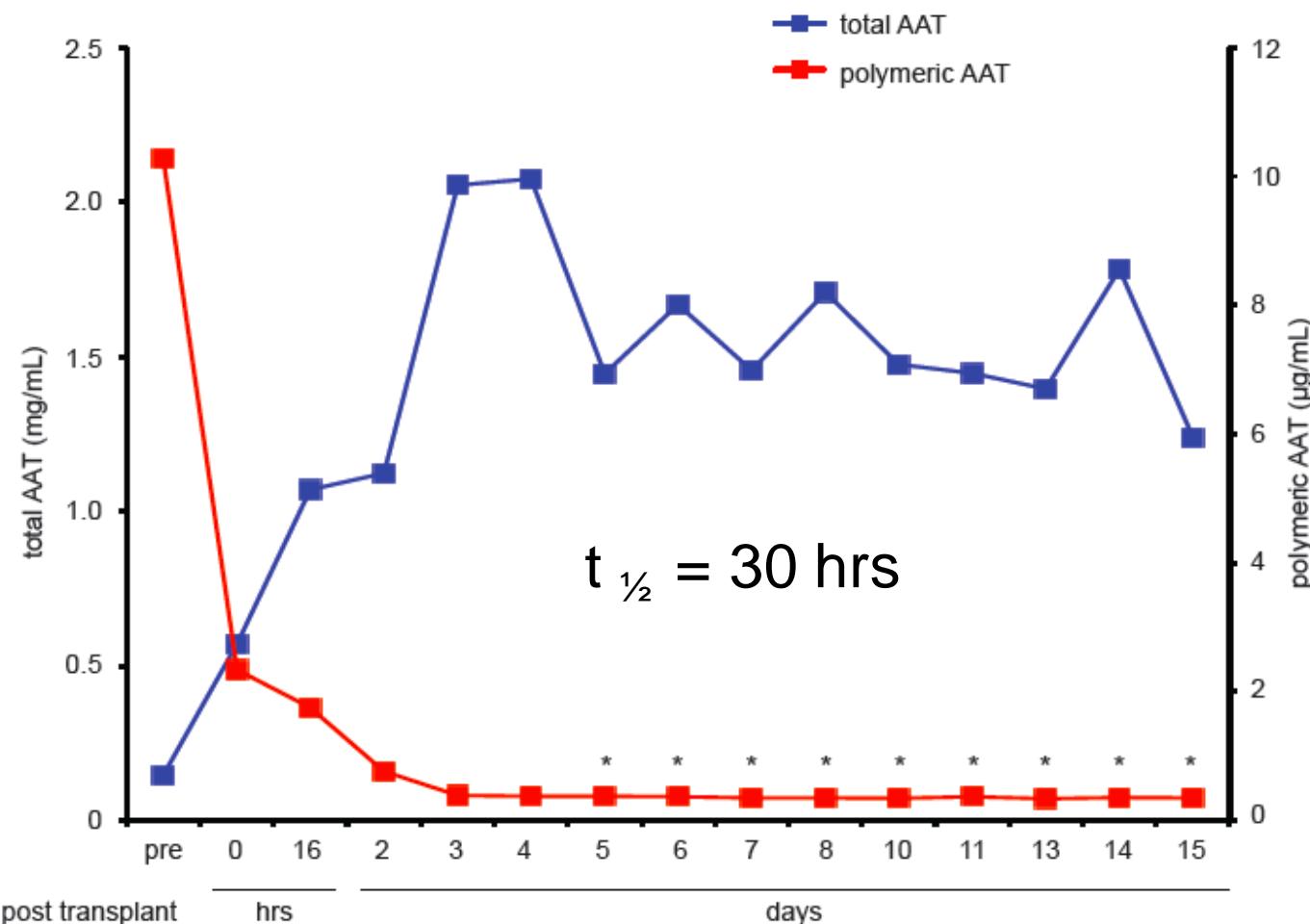
Red = polymers
Green = TGN-46
Blue = nucleus



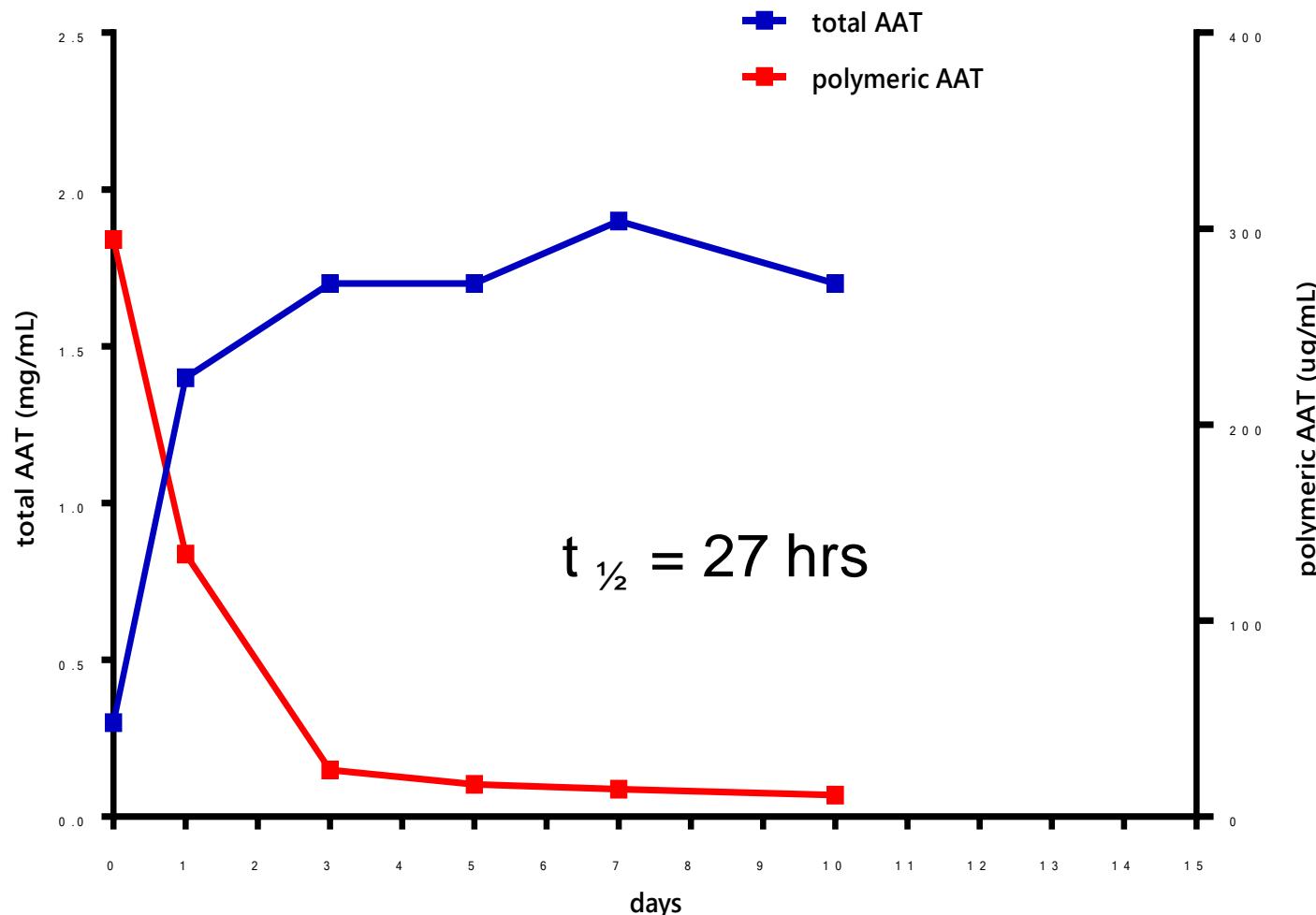
I polimeri circolanti scompaiono dopo il fegato trapianto



I polimeri circolanti scompaiono dopo il fegato trapianto



I polimeri circolanti scompaiono dopo il fegato trapianto



Polimeri come biomarker per il deficit di α_1 -antitripsina

Childhood Liver Disease Research and Education Network
(ChiLDREN).

Prospective study of 400 children with α_1 -antitrypsin deficiency

Mean circulating polymer in cohort was 8.35 (SD+/-7.34) $\mu\text{g}/\text{ml}$

Higher polymers in children with portal hypertension ($p=0.004$),

Each 1 $\mu\text{g}/\text{ml}$ increase in polymer level increased the likelihood of portal hypertension by 6.7%.

No correlation of total α_1 -antitrypsin with portal hypertension

Teckman *et al*, AASLD meeting, Boston Nov 2014

Inibitori della serina proteinasi o serpine

α_1 -antitrypsin

inhibits neutrophil elastase

Antithrombin

inhibits enzymes of coagulation cascade

C1-inhibitor

inhibits enzymes of fibrinolysis

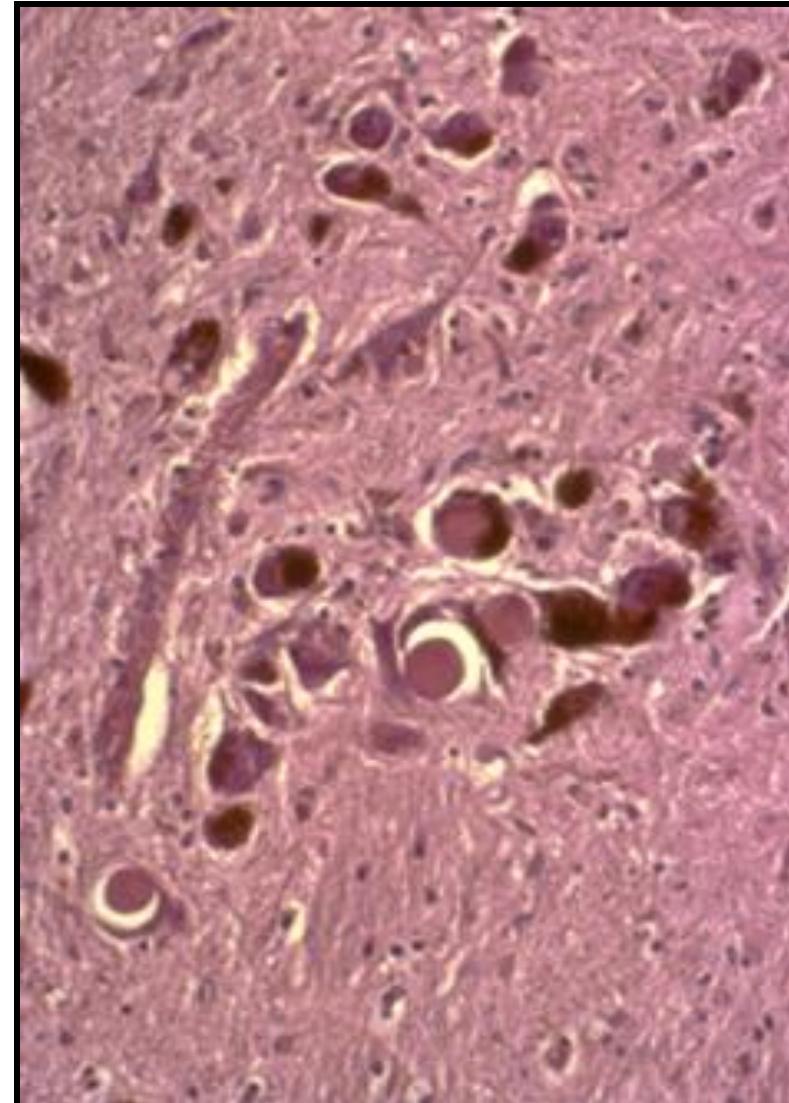
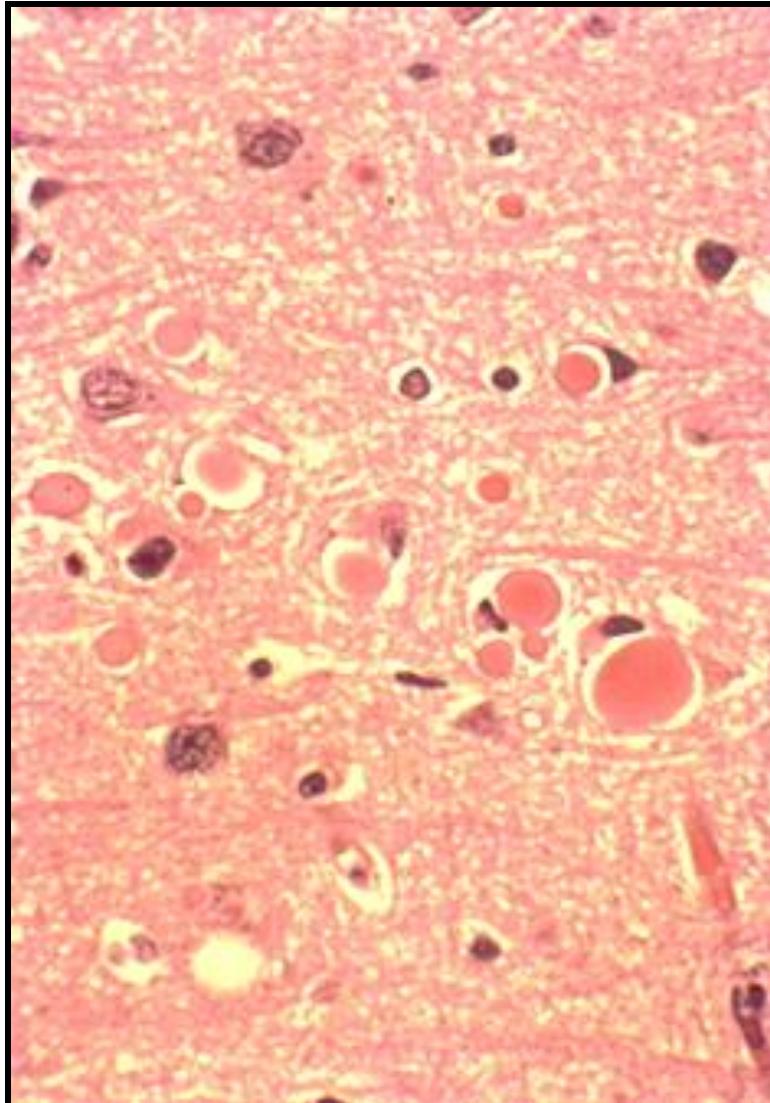
α_1 -antichymotrypsin

inhibits enzymes of inflammation

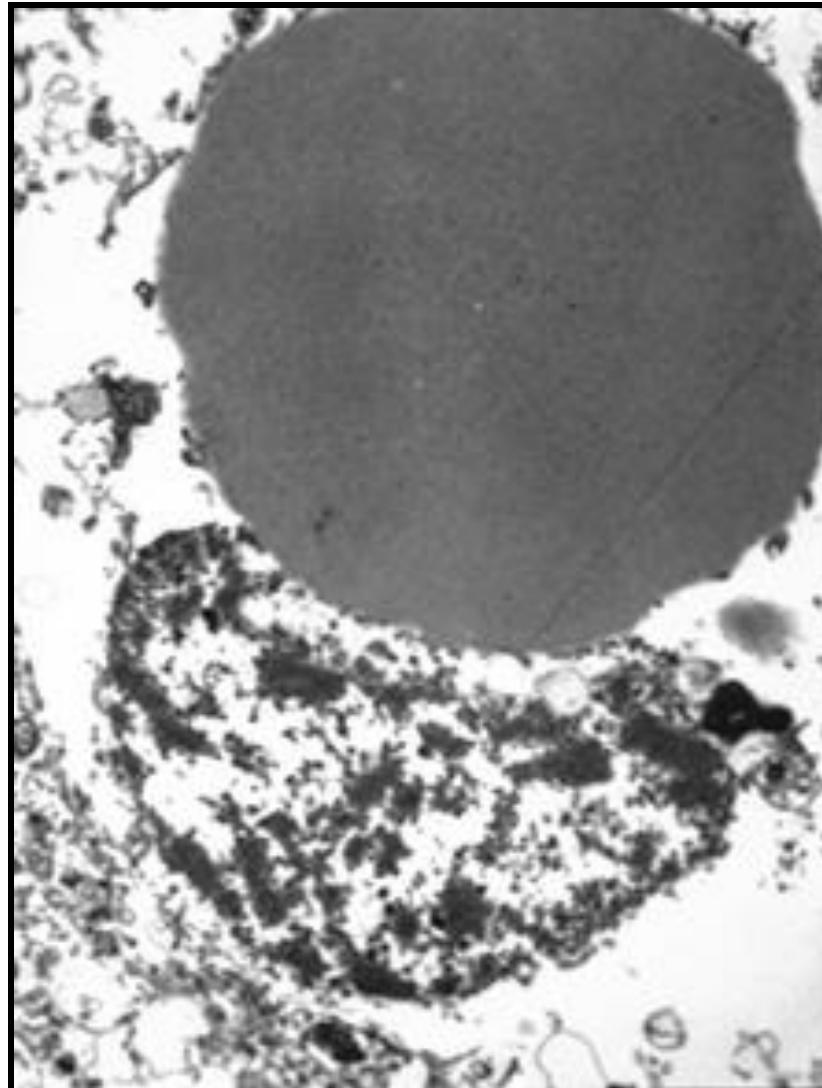
Neuroserpin

inhibits tPA in neuronal development/
memory

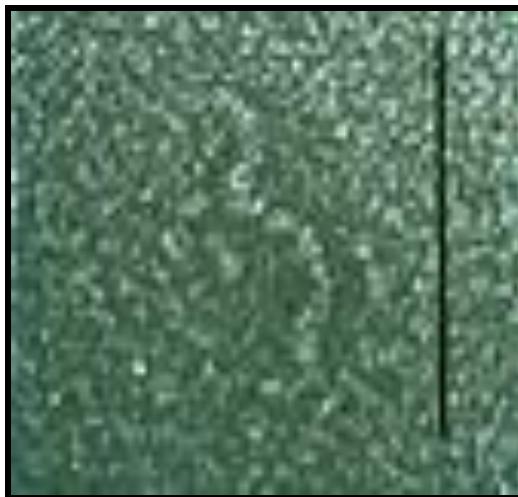
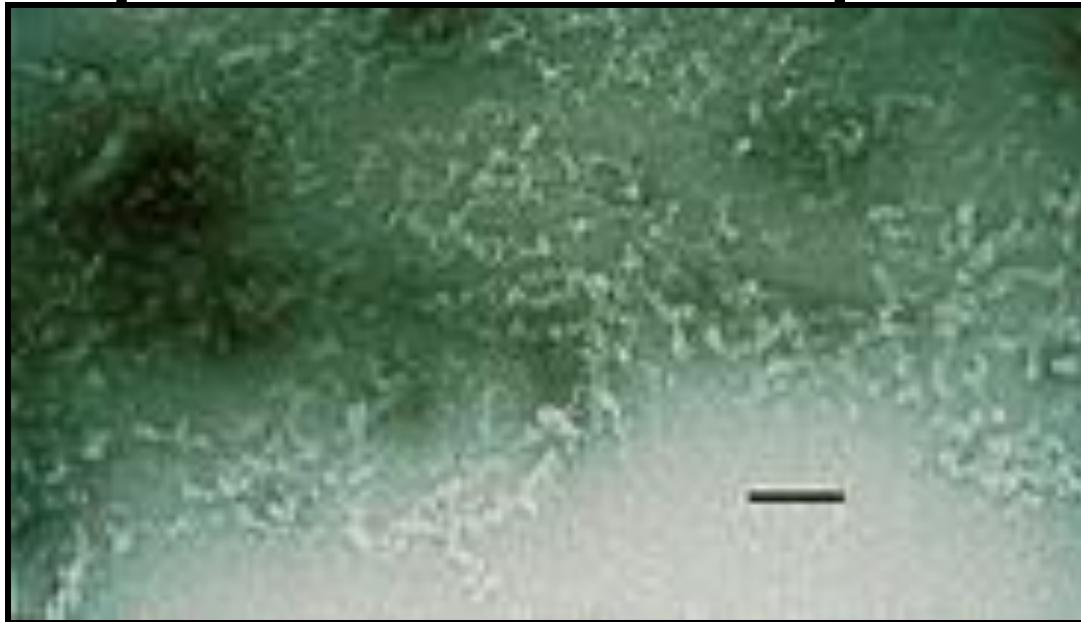
I corpi di inclusione della neuroserpina si colorano
in modo positivo con PAS



I corpi di inclusione della neuroserpina si trovano
all'interno dell'ER



Le inclusioni sono formate da polimeri di neuroserpina



Familial encephalopathy with neuroserpin inclusion bodies (FENIB)

Davis *et al*, *Nature* 1999; 40: 376-379

Onset (yrs)	Clinical findings	Inclusions	Mutation
45-63	Dementia, seizures	+	S49P
20-40	Myoclonus, dementia	++	S52R/L47P
15	Progressive myoclonus epilepsy	+++	H338R
13	Progressive myoclonus epilepsy, chorea	++++	G392E
8	Epilepsy with slow wave sleep	++++	G392R

Davis *et al*, Lancet 2003; 359: 2242-2247

Coutelier *et al*, Neurology 2008; 71: 64-66 Hagen *et al*, Brain Pathol. 2011; 21:575-582

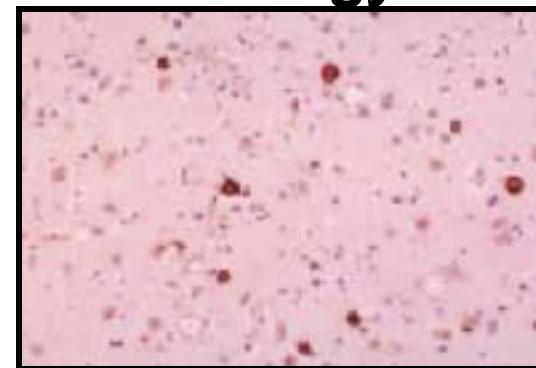
Onset (yrs) Clinical features

Histology

Mutation

48 yr

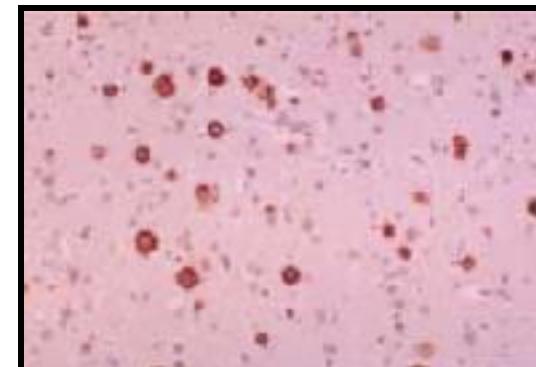
Dementia,
seizures terminally



S49P

24 yr

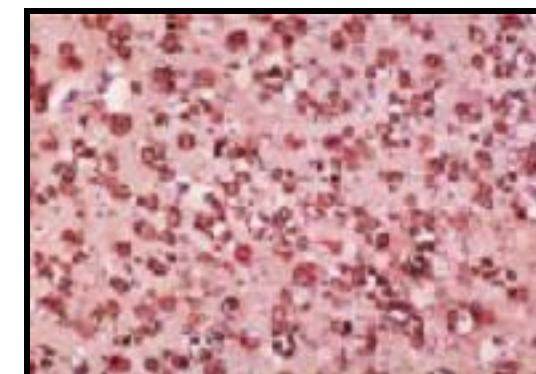
Myoclonus,
status epilepticus,
dementia



S52R

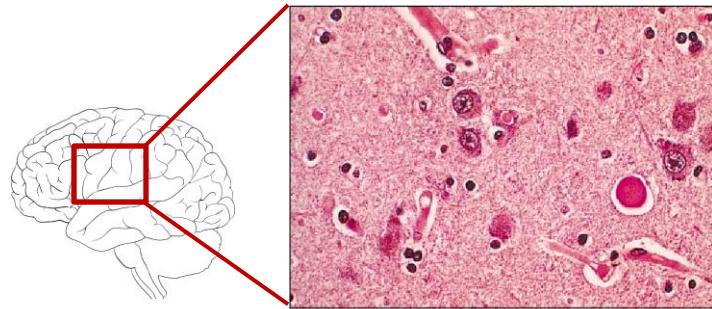
13 yr

Myoclonus,
status epilepticus,
dementia

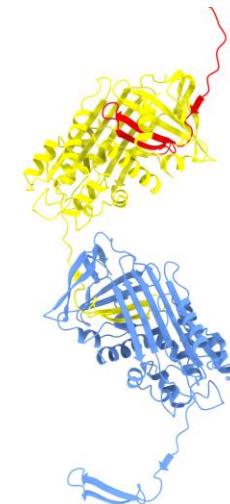
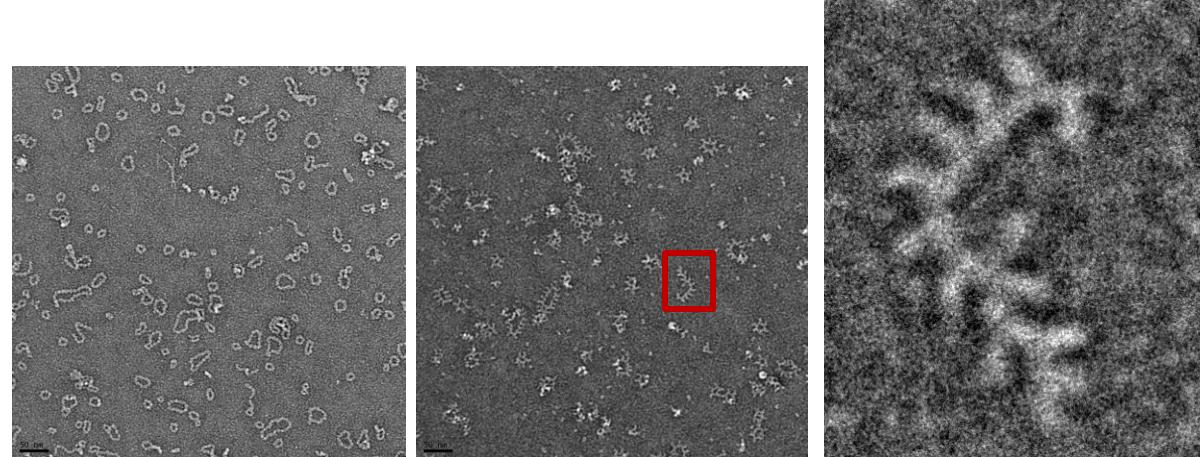


G392E

Sondaggio dell'universalità del legame nei polimeri

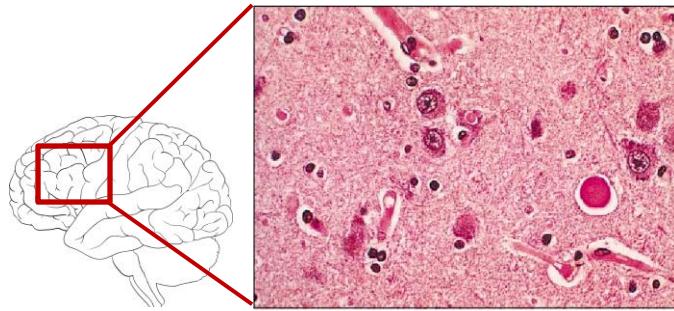


Ibrahim Aldobiyani

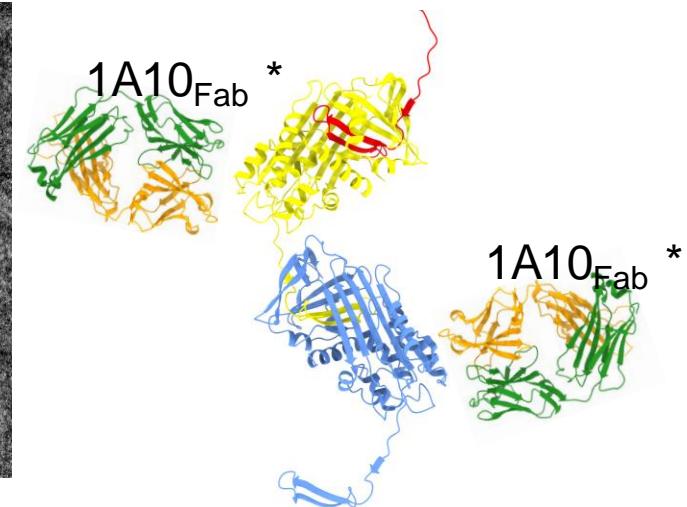
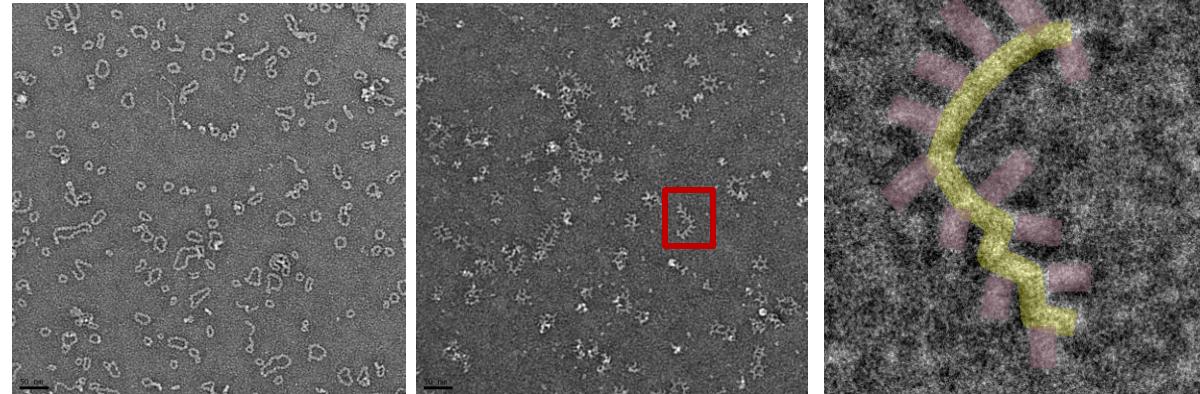


hNeuroserpin (syracuse) polymers \pm 1A10 fab
(67000x magnification)

Sondaggio dell'universalità del legame nei polimeri



Ibrahim Aldobiyani



hNeuroserpin (syracuse) polymers ± 1A10 fab
(67000x magnification)

The Serpinopathies/Le Serpinopatie

Gain of function: cirrhosis with Z antitrypsin

dementia with neuroserpin (FENIB)

Loss of function: thrombosis with antithrombin deficiency
angio-oedema with C1 inhibitor deficiency
emphysema with antichymotrypsin deficiency
heparin co-factor II deficiency ?disease

Lomas and Mahadeva, *J. Clin. Invest.* 2002; 110: 1585-1590
Gooptu and Lomas, *J. Exp. Med.* 2008; 205: 1529-1534

Terapia per il deficit di α_1 -antitripsina

Lung disease: intravenous augmentation therapy with plasma-purified AAT.

Liver disease: No therapy is currently approved for liver disease associated with AAT deficiency other than transplantation for advanced disease.

siRNA per silenziare la sintesi di Z α_1 -antitripsina all'interno degli epatociti

N=16 in
2 doses

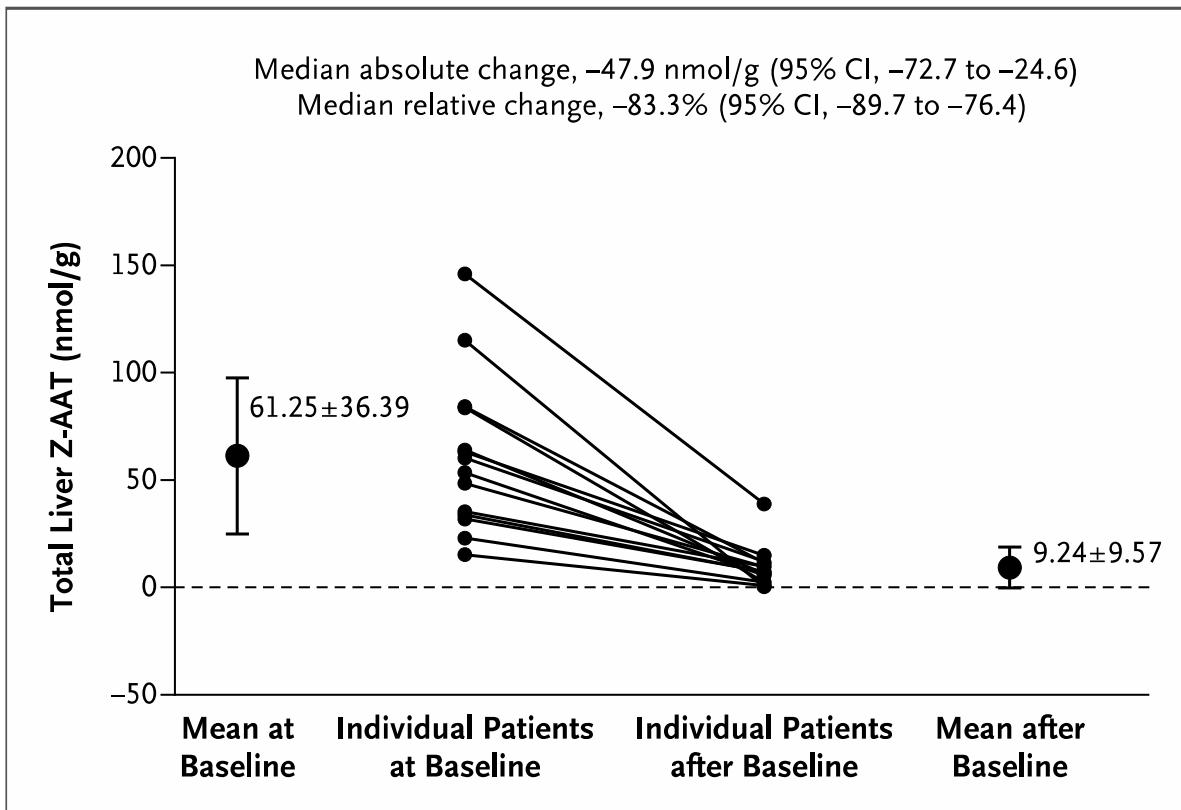
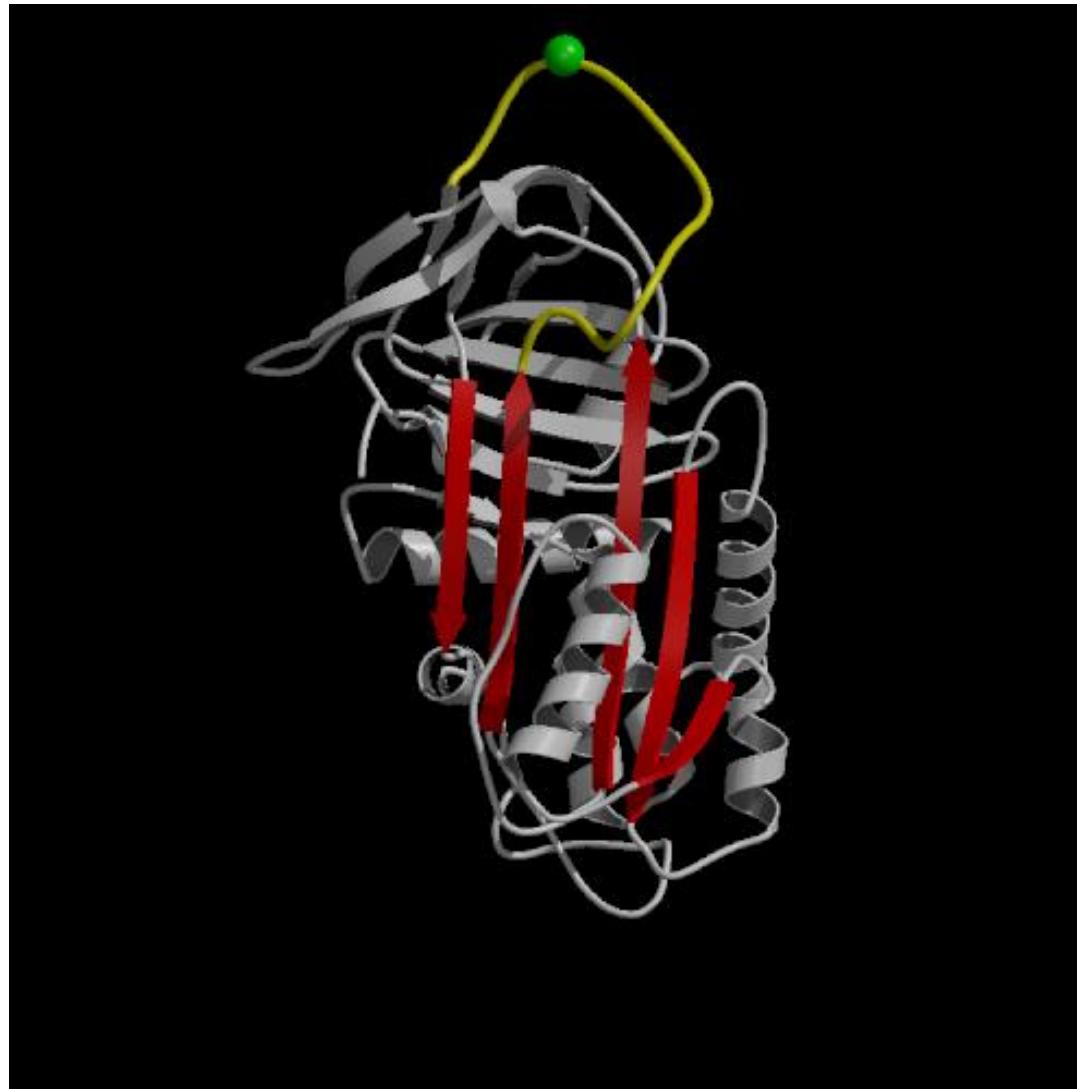


Figure 1. Effect of Fazirsiran Treatment on Liver Z-AAT Concentration at Week 24 or 48.

Prevenzione della polimerizzazione di piccole molecole



Sfide nello sviluppo di bloccanti polimerici a piccole molecole con GSK

- (i) the drug target is a highly mobile folding intermediate in the endoplasmic reticulum;
- (ii) prevention of a large protein-protein interaction;
- (iii) oral dosing greatly restricts suitable chemical space;
- (iv) as a non-classical drug target, small molecule binders may well not be well-represented in compound screening libraries;
- (v) the relatively concentration of circulating monomeric Z α_1 -antitrypsin ($\sim 5\mu M$) in PiZ homozygotes is a high affinity sink

Approccio allo sviluppo di blocanti polimerici a piccole molecole

Screen to block Z α_1 -antitrypsin polymerisation *in vitro*



Assess leads in CHO cell model that expresses Z α_1 -antitrypsin



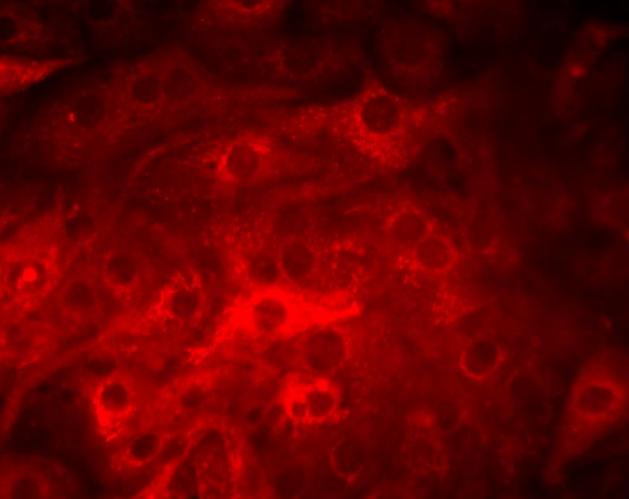
Assessment in human induced pluripotential stem cells



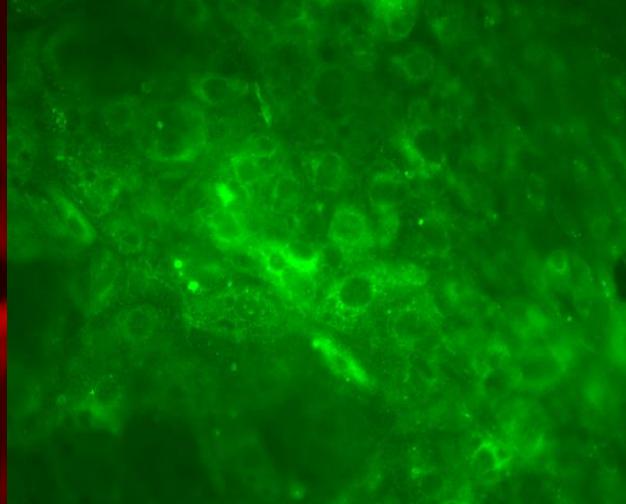
Assess in transgenic mouse model of Z α_1 -antitrypsin deficiency

Modello iPSC del deficit di α_1 -antitripsina

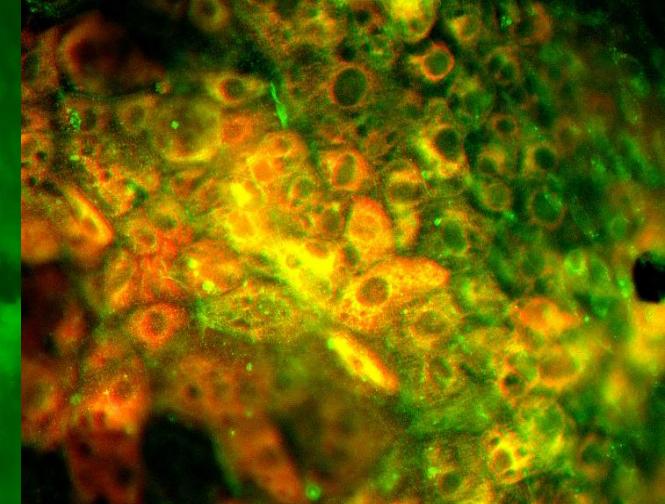
Z All AAT



Polymeric AAT



All + Polymeric



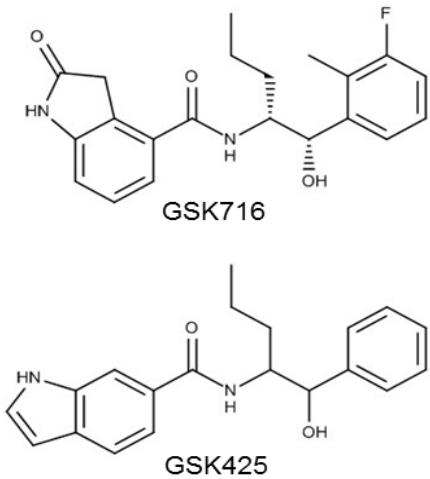
M

Rashid *et al*, *J Clin Invest* 2010; 120: 3127-3136

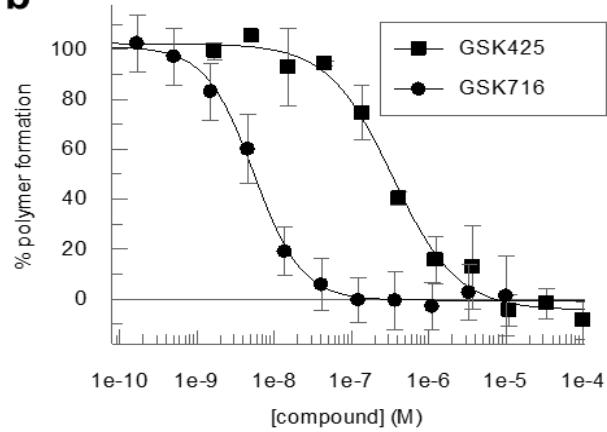
Yusa *et al*, *Nature* 2011; 478: 391-394

Composti '425 e '716

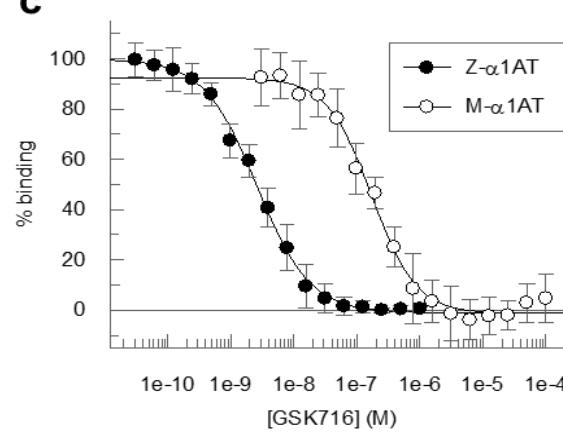
a



b

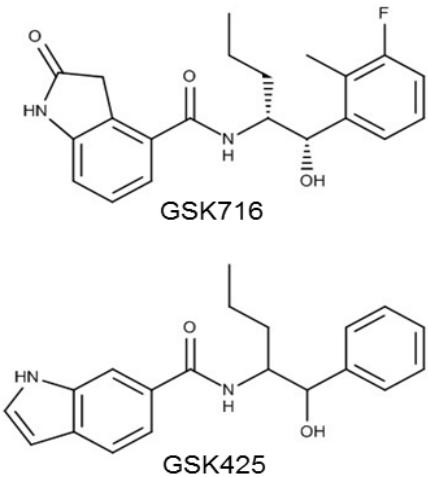


c

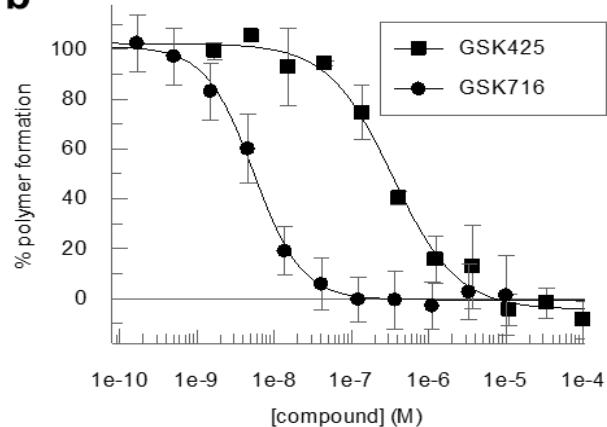


Composti '425 e '716

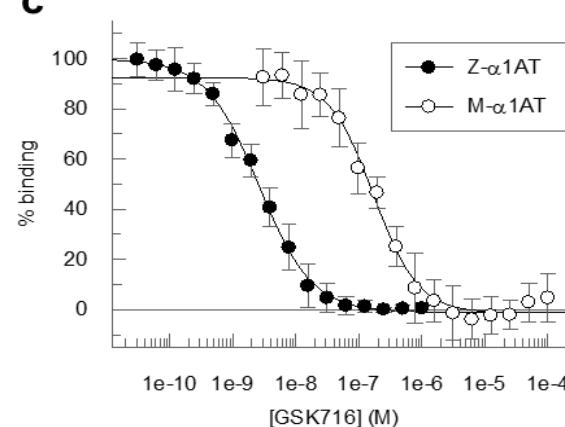
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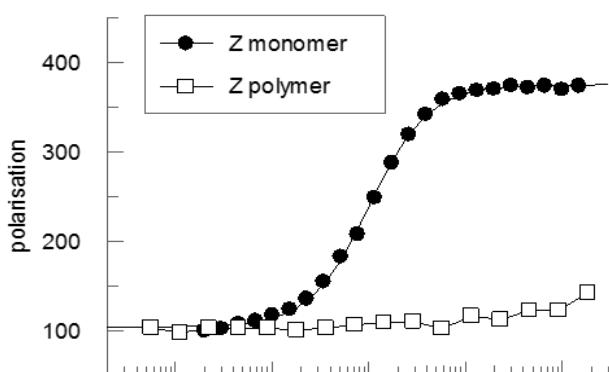
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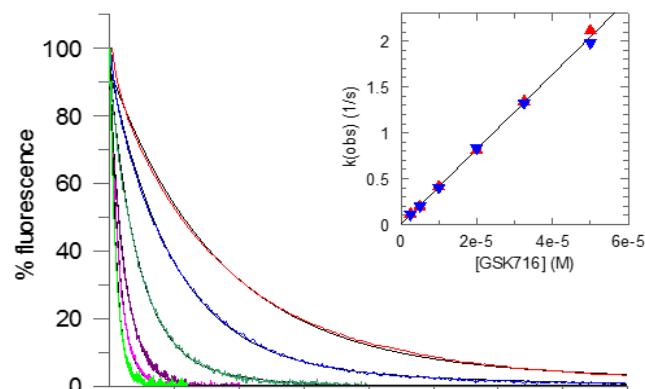
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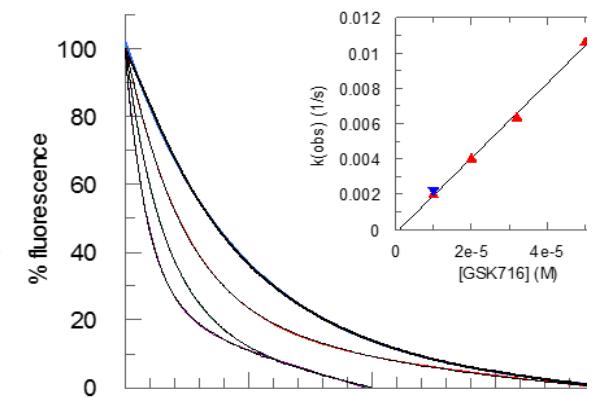
d



e



f

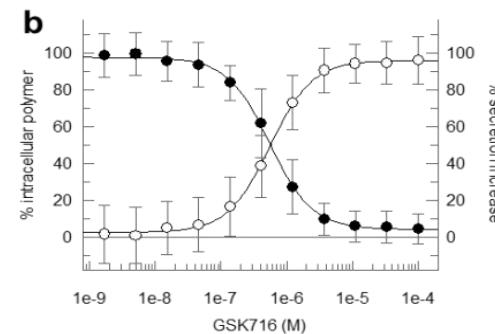
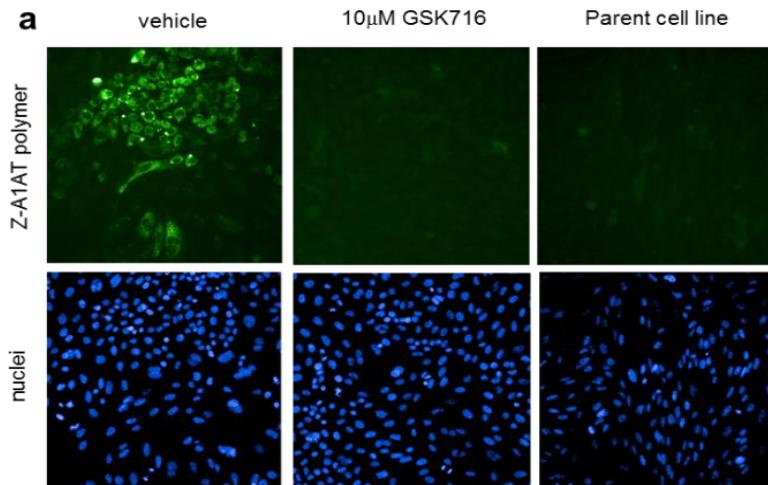


$$Z \text{ AAT } k_{ass} = 4.1 \times 10^4 \text{ M}^{-1} \text{ s}^{-1}$$

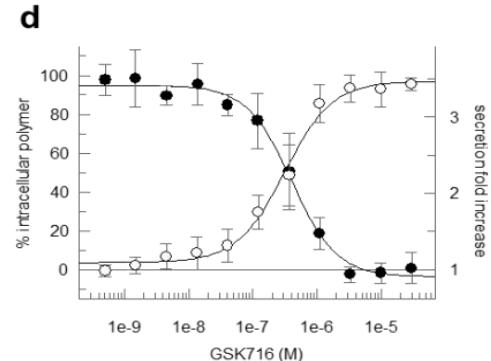
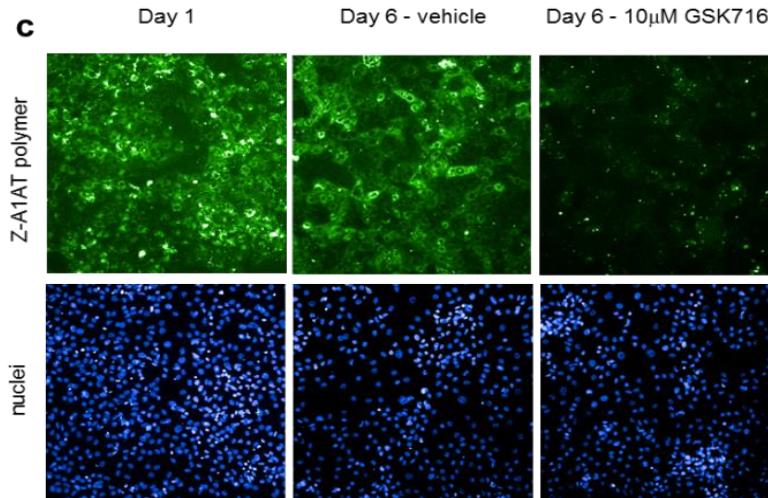
$$M \text{ AAT } k_{ass} = 2.1 \times 10^2 \text{ M}^{-1} \text{ s}^{-1}$$

GSK '716 blocca la polimerizzazione in modelli cellulari di malattia

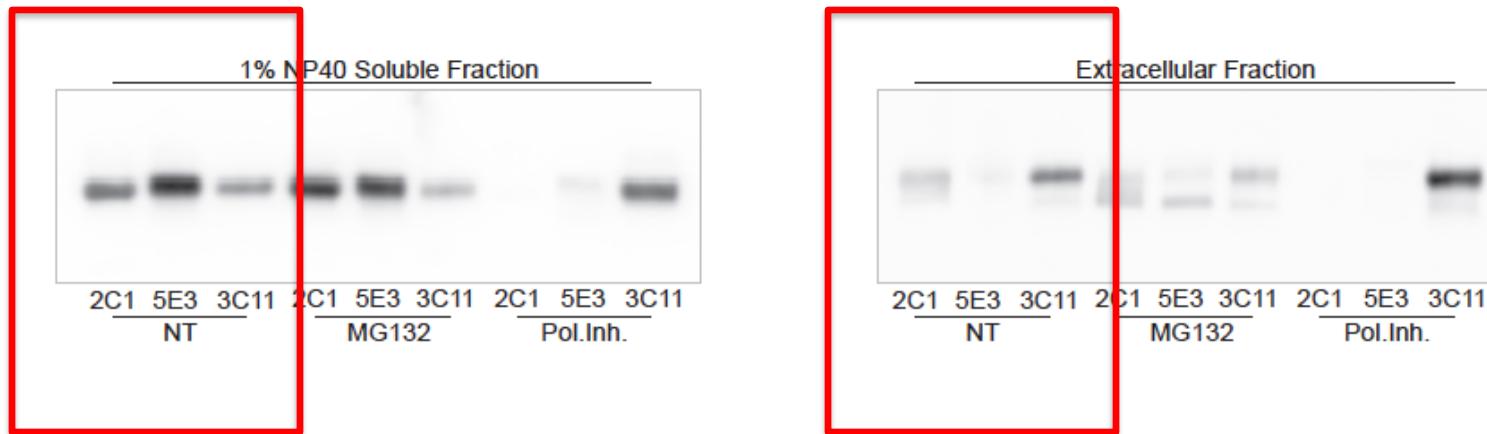
CHO cells



iPSC derived hepatocytes



GSK '716 blocca la polimerizzazione in modelli cellulari di malattia



Steady state experiments

Riccardo Ronzoni

GSK '716 blocca la polimerizzazione in modelli cellulari di malattia



Steady state experiments

GSK '716 blocca la polimerizzazione in modelli cellulari di malattia

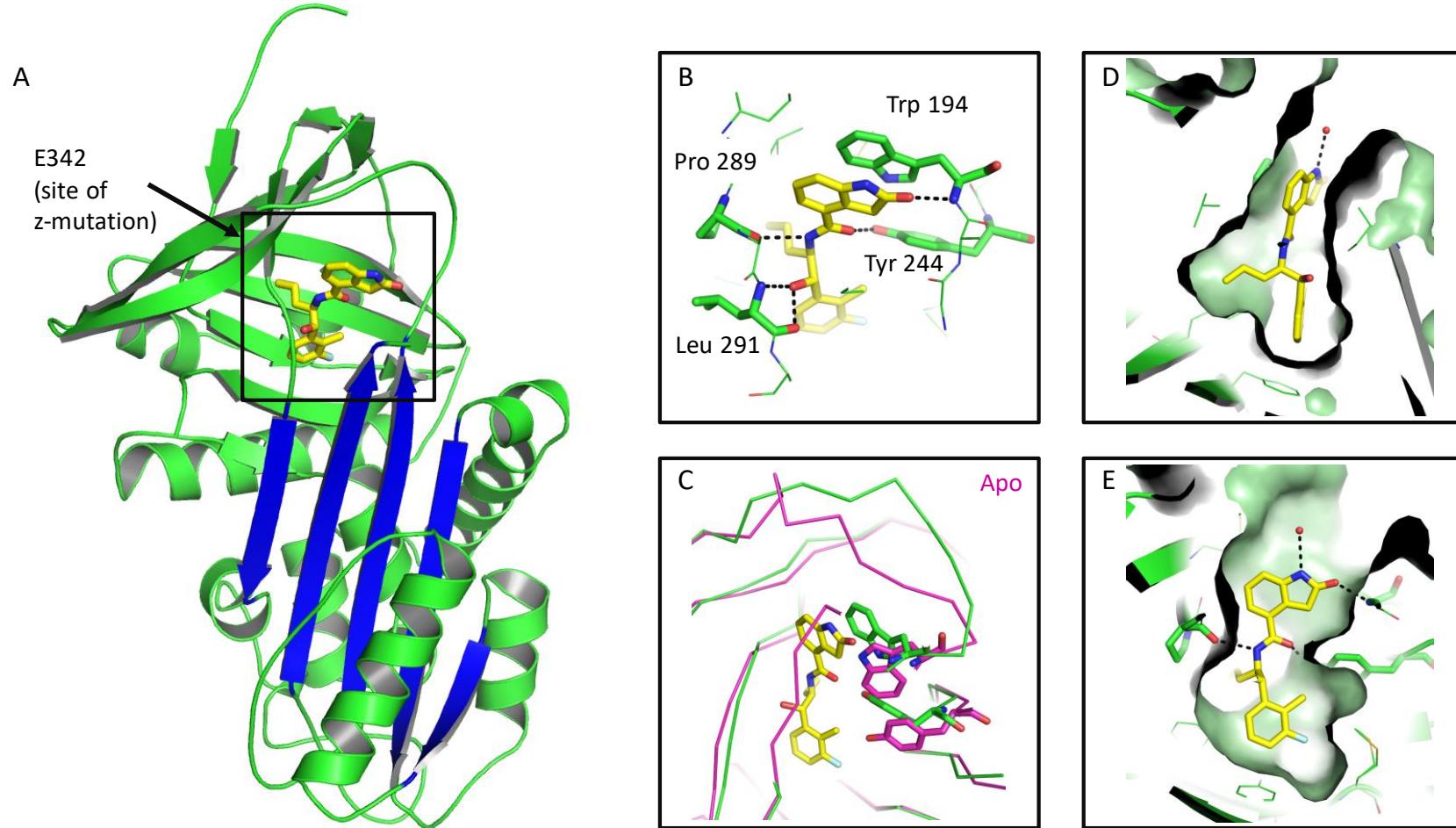


Steady state experiments

Riccardo Ronzoni

Lomas *et al*, EMBO Mol. Med. 2021; 13(3):e13167

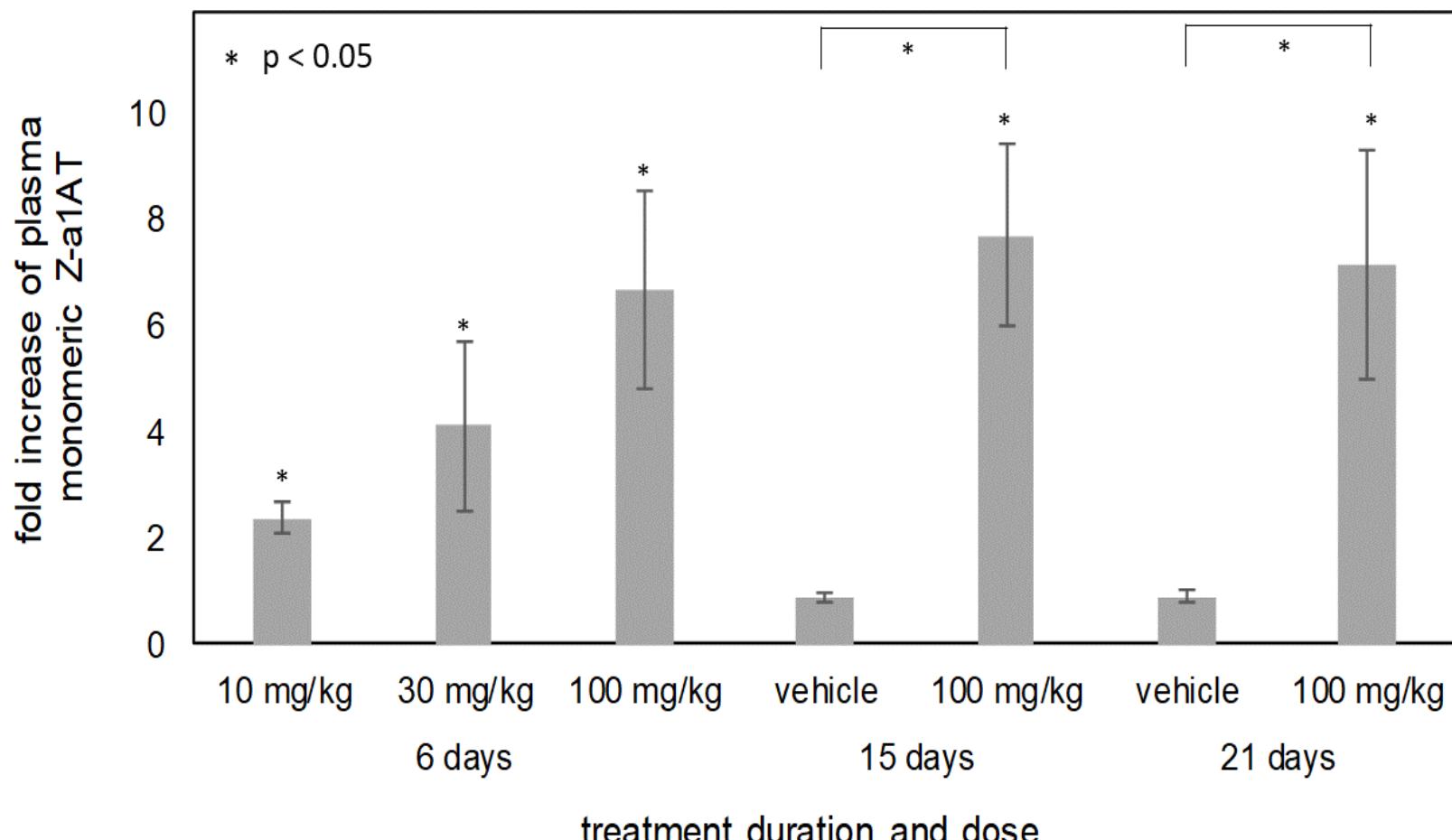
GSK '716 si lega a un nuovo sito di legame criptico



protein-ligand complement of the substituted phenyl and benzoxazolone rings

Lomas et al, *EMBO Mol. Med.* 2021; 13(3):e13167

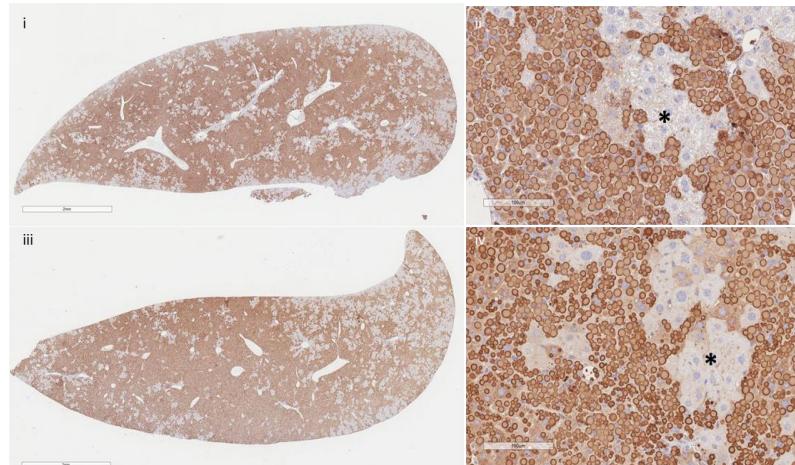
GSK '716 aumenta la secrezione in un modello murino transgenico



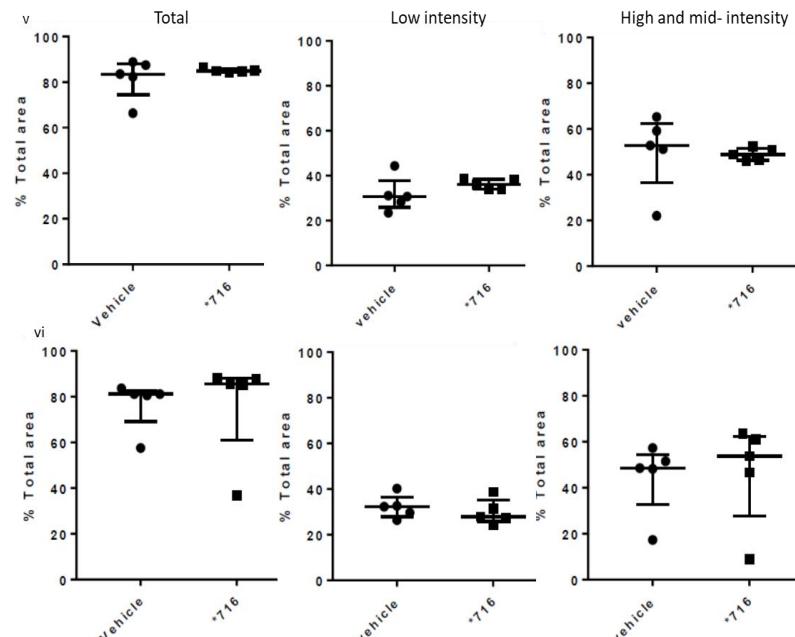
GSK '716 aumenta la secrezione in un modello murino transgenico

Increase in Z α_1 -antitrypsin in the circulation at 10 and 30mg/kg of GSK716 surprising as systemic free drug levels were below the cellular EC50 for secretion for much or all of the dosing period.

GSK716 - nessun effetto sulle inclusioni intraepatiche



Day 15



Day 21

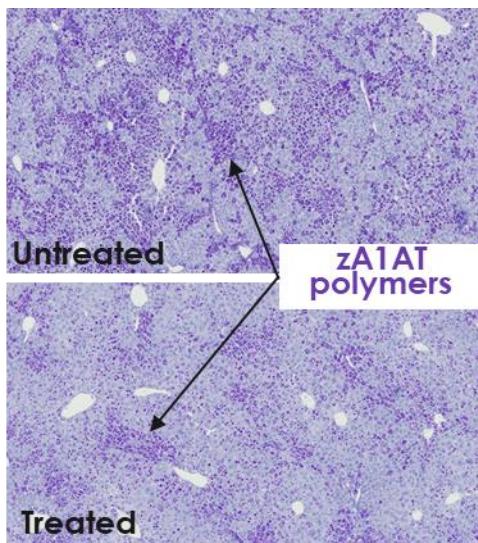
GSK '716 – effetti fuori bersaglio

No off target effects in a panel of 85 assays
considered predictive of known safety
liabilities that precluded further
development of GSK716

BMN 349 ha ridotto significativamente l'accumulo di polimeri nei modelli murini

Liver Biopsy Samples

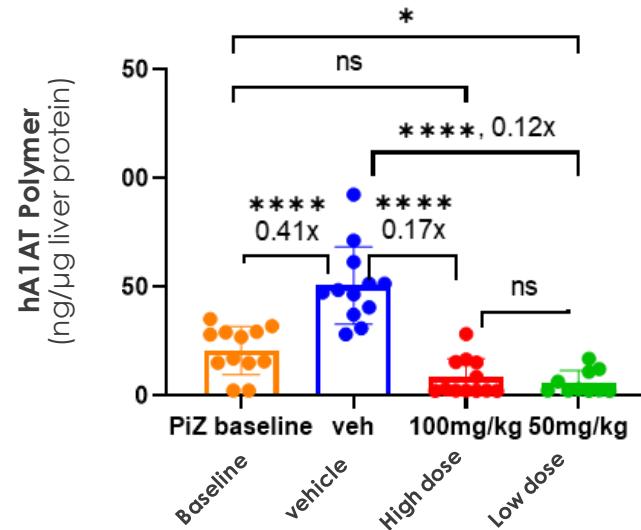
(12w-old mouse study)



Treatment for 1 month

Liver Polymer Levels

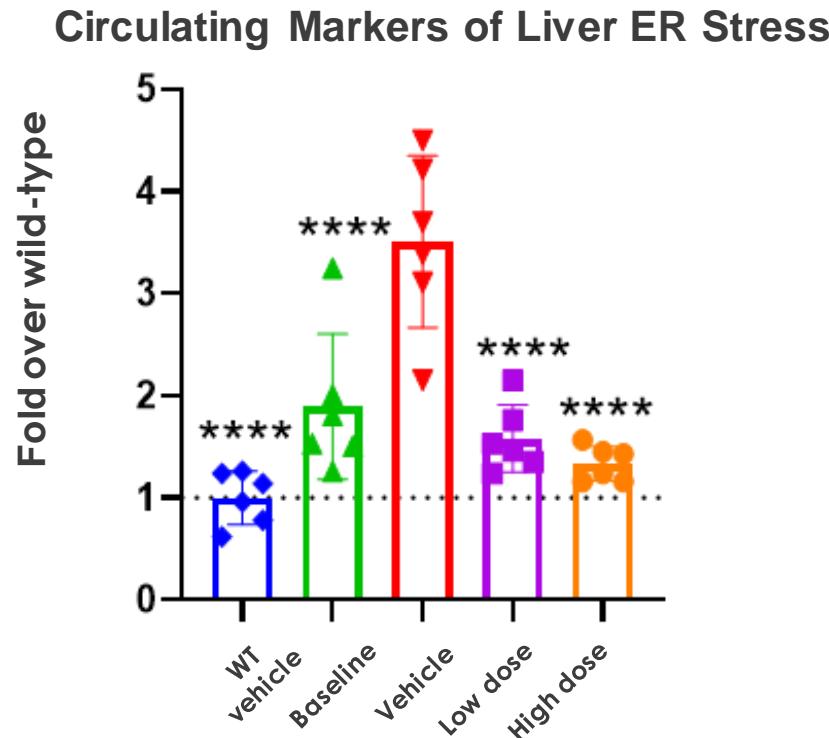
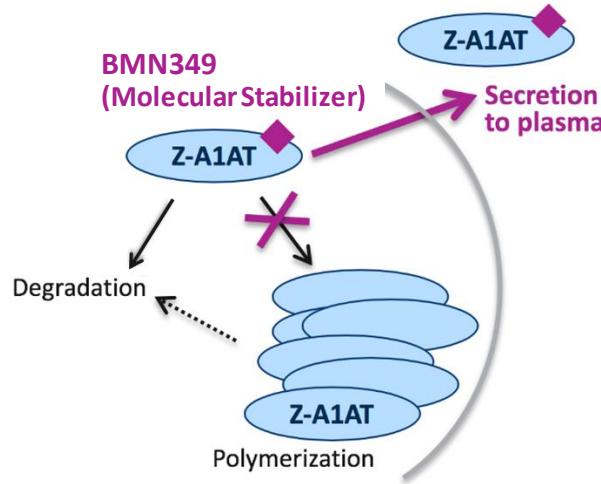
(5w-old mouse study)



Mouse model recapitulates human liver disease and shows

- Decreased aggregation in the liver
- Increased secretion of nonfunctional zA1AT monomer
- Regeneration of progressive liver disease

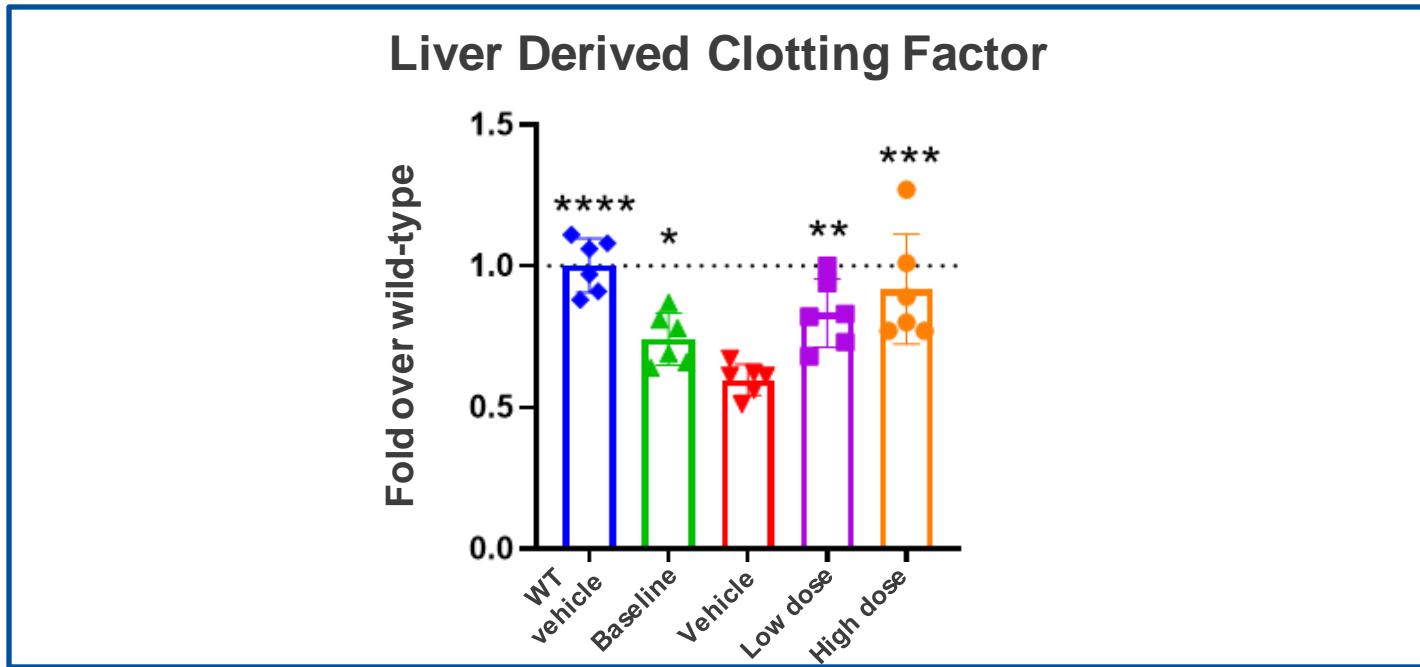
BMN 349 ha ridotto significativamente i marcatori di stress epatico nei modelli murini



Mouse model recapitulates human liver disease and shows

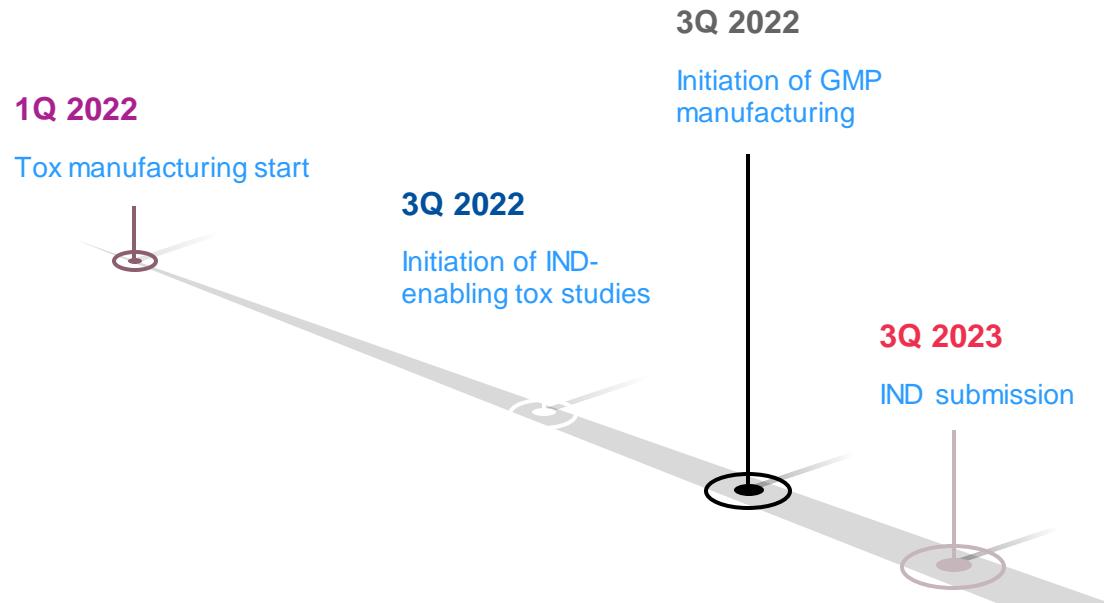
- Decreased aggregation in the liver
- Reduction in markers of endoplasmic reticulum stress, among the pathologic cell responses to polymers
- Rapid onset of cell response to therapy

BMN 349 ripristina la normale funzione sintetica nei modelli murini



- Mouse model recapitulates human liver disease and shows**
- Decreased aggregation in the liver
 - Reversal of impaired hepatocyte function
 - Rapid response of normal important hepatocyte functions to treatment

BMN 349 -piani



Piccole molecole: benefici

Titratable dosing

Effective in MZ heterozygotes

Conclusion

1. α_1 -antitrypsin deficiency results from a domain swap polymerisation
2. This is a general mechanism that affects other serine proteinase inhibitors (the serpinopathies)
3. Blocking polymerisation provides a novel strategy to prevent disease

Ringraziamenti

Medical Research Council (UK)

EPSRC

Wellcome Trust

Alpha-one foundation (US)

GlaxoSmithKline

National Institute for Health Research

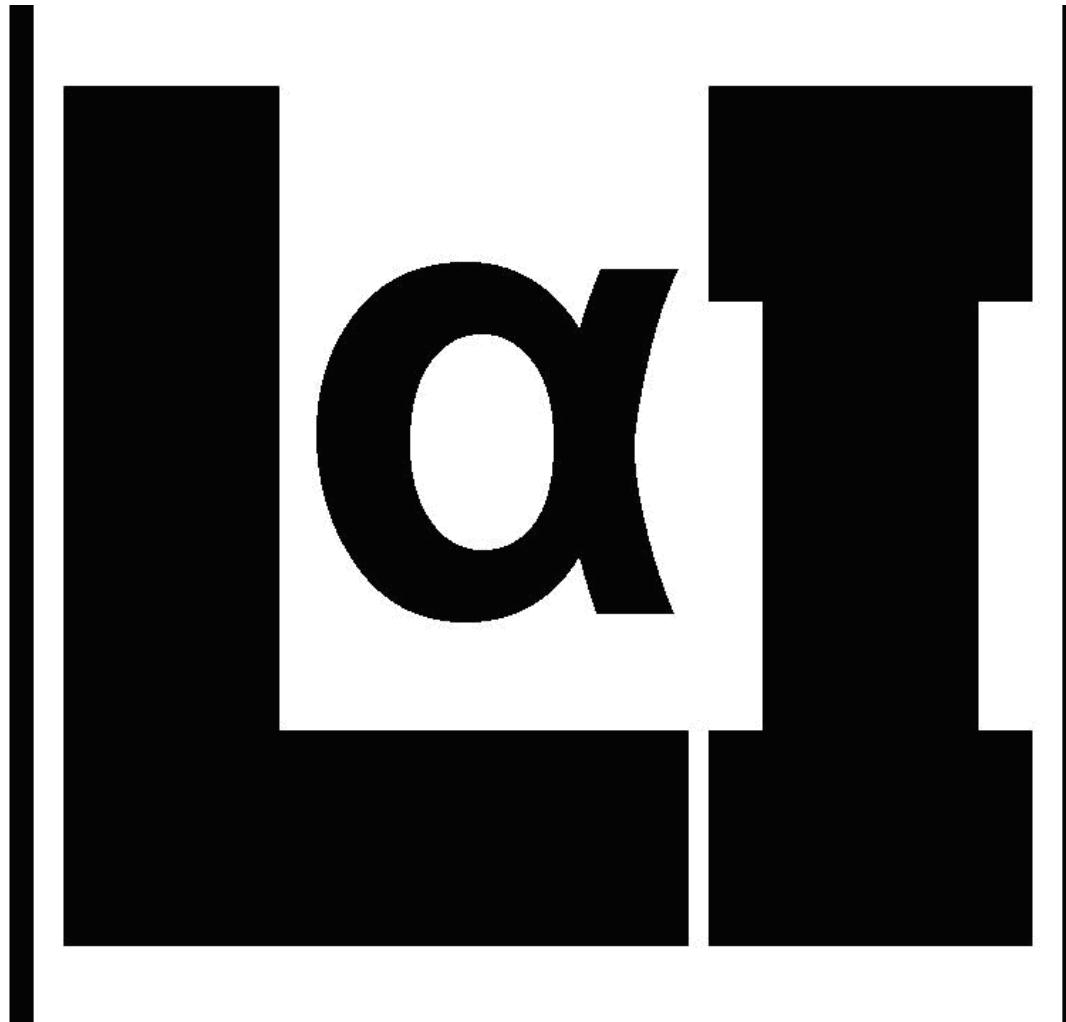
Biomarin

Ringraziamenti

Elena Miranda, James Irving, Sarah Faull, David Sattelle,
Freddie Partridge, Nina Heyer-Chauhan, Alistair Jagger,
Emma Elliston, Anwen Brown, Riccardo Ronzoni,
Annamaria Fra, Ibrahim Aldobiyan, Kamila Kamuda,
George Sophocleous, Sarah Lowen, Sarah Vickers

UCL ISMBL John Christodoulou, Chris Waudby

(Ex-)GSK: Andy Pearce, John Little



The London α_1 -antitrypsin deficiency service at the
Royal Free Hospital

Vi ringrazio immensamente per la vostra attenzione