Approaches to Alzheimer's and Related Dementias Therapeutics

Richard Hodes, Brad Hyman, and Allan Levey presenting for the Research subcommittee





Alois Alzheimer time.com



Alzheimer's drawings of tangles In 1906



Alzheimer's drawings of plaques In 1906

Biochemistry



- Neurofibrillary tangles made primarily of tau protein
- Gene that makes tau (MAPT)
- Tau found in other neurodegenerative diseases like frontotemporal dementia and PSP
- MAPT mutations can lead to autosomal dominant frontotemporal dementia and PSP



- · Senile plagues made of amyloid
- Gene that makes amyloid precursor protein (APP) cloned
- Mutations in APP found to cause early onset autosomal dominant AD
- Down syndrome and other causes of genetic amplification of APP associated with early onset AD

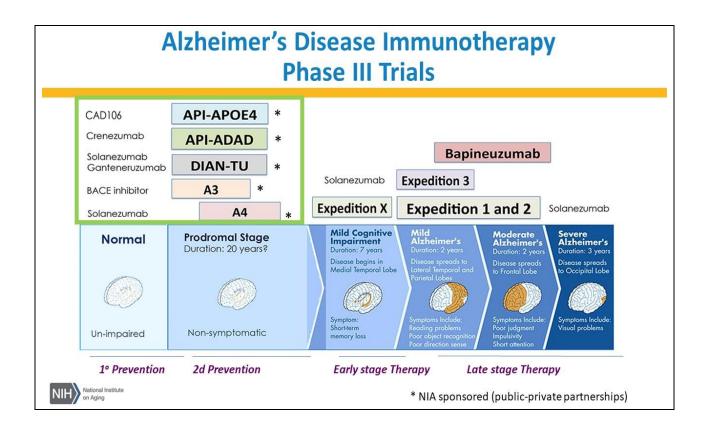
Therapeutics follow biochemical and genetic observations



 Early in phase III trials to study tau



- Multiple shots on goal for amyloid
- Recent highlights: inhibit the enzymes that make amyloid (e.g., BACE inhibitors)
- Clear the plaques away from the brain (e.g., immunotherapy)
- So far, no success in preventing further decline



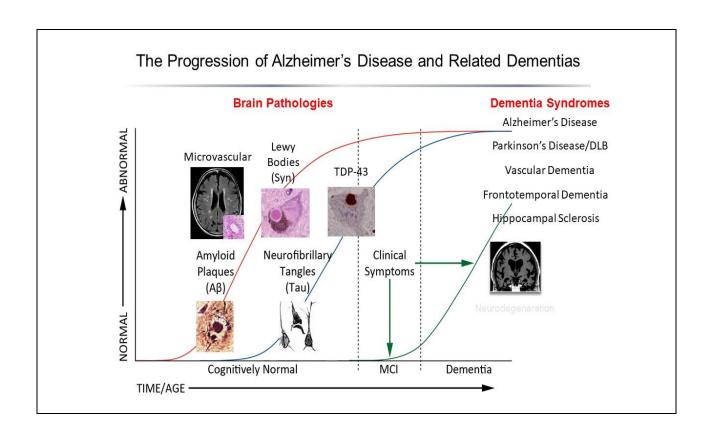
Immunotherapy Clinical Trial for Individuals with Down Syndrome

Active Immunotherapy for Cognitive Decline in Adults with Down Syndrome

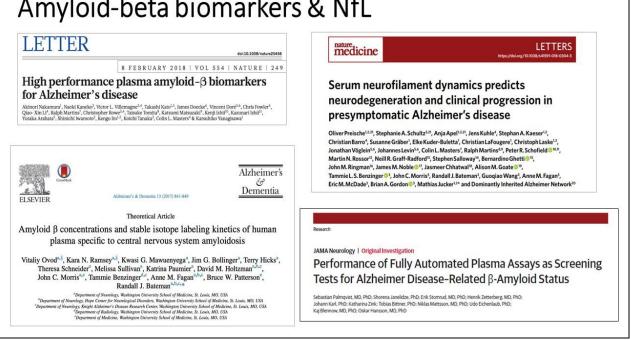
- Rationale: Trisomy 21 leads to increased levels of APP
- Goal: This study will investigate the safety, tolerability, as well as immunogenicity of an anti-amyloid vaccine in a Phase I clinical trial
 – in adults with DS aged 35-55.
- Outcomes: Effects on cognitive function and AD biomarkers will be secondary endpoints (Completion: 2021)











NAPA playbook

- Discover new genes that contribute to AD and dementia
- Develop new information about the brain changes that occur before and during the disease process

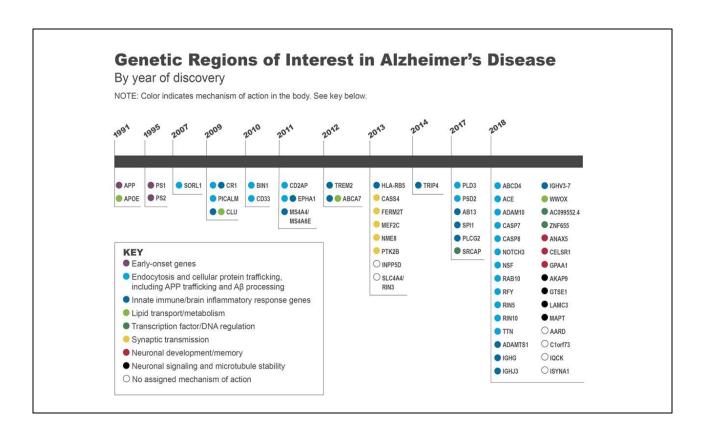


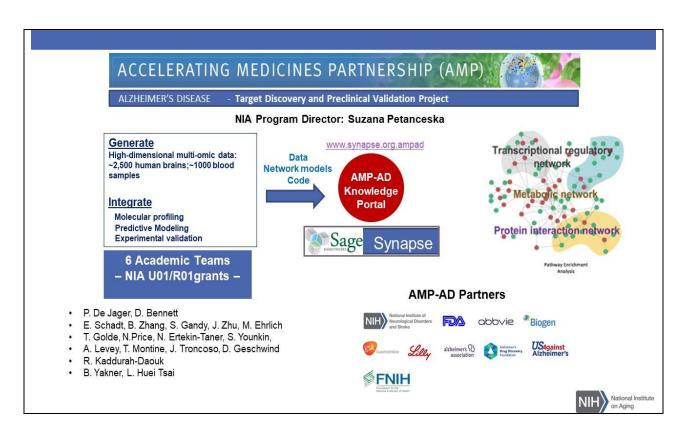
Clipart.com

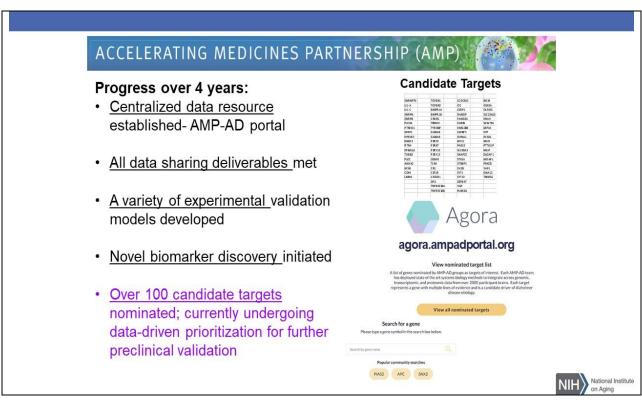


Smithsonianmag.com

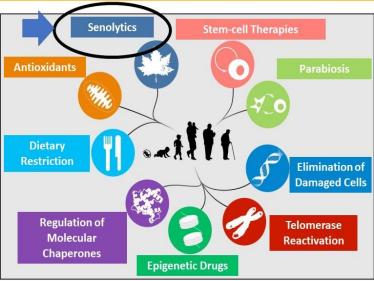
- Tackle the disease at early stages and late stages, perhaps using different strategies at different stages
- Develop new targets and new approaches
- Find better ways of understanding person to person differences



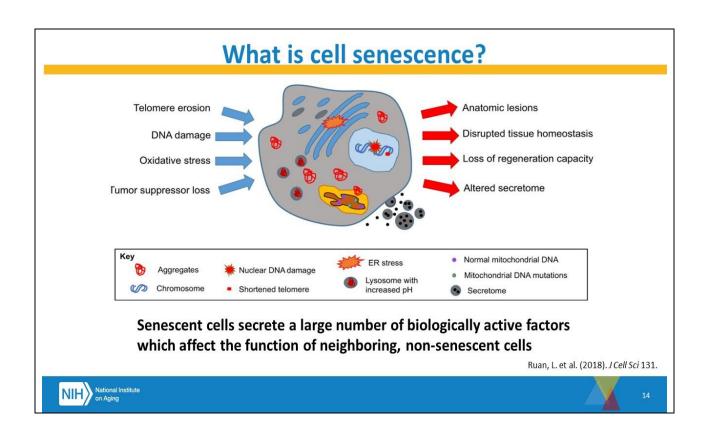


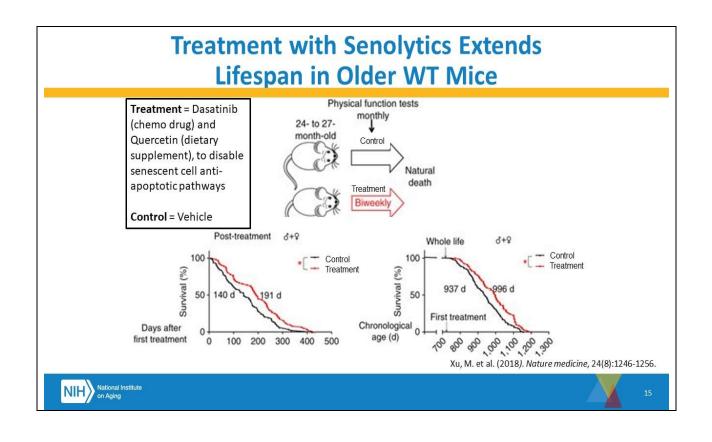




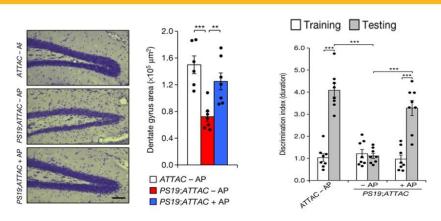


Adapted from: López-Otín, C et al. (2013). Cell 153: 1194-1217.



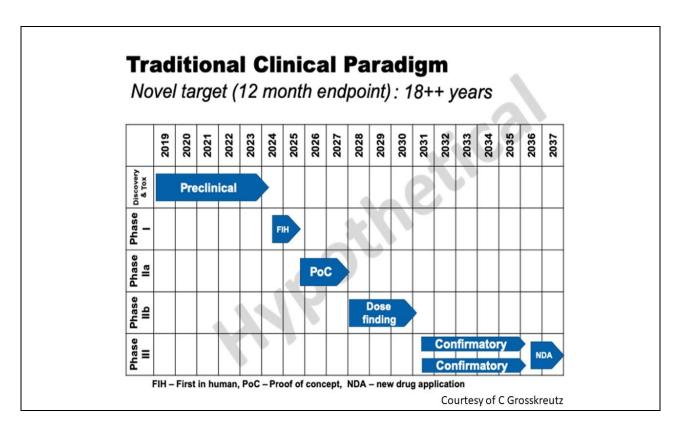


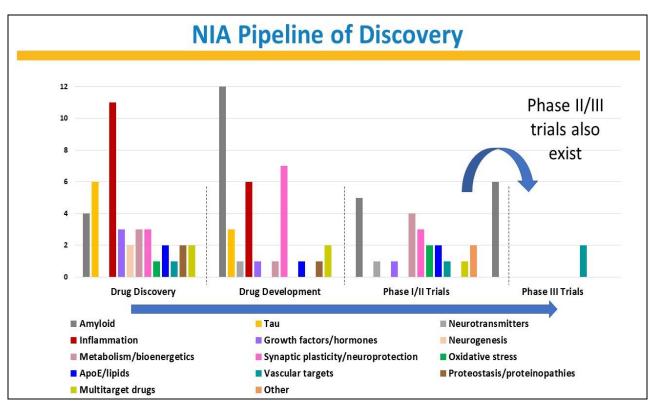


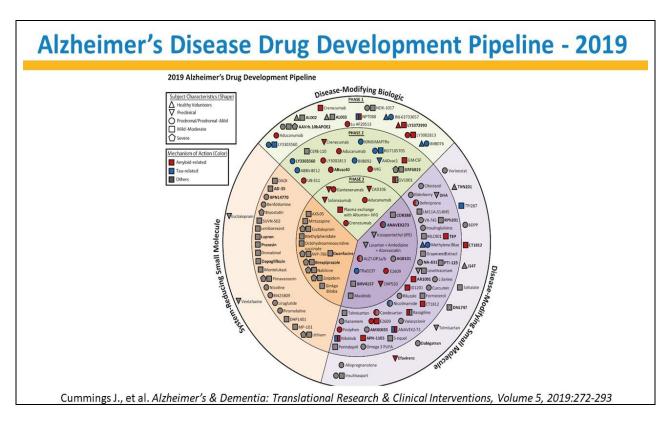


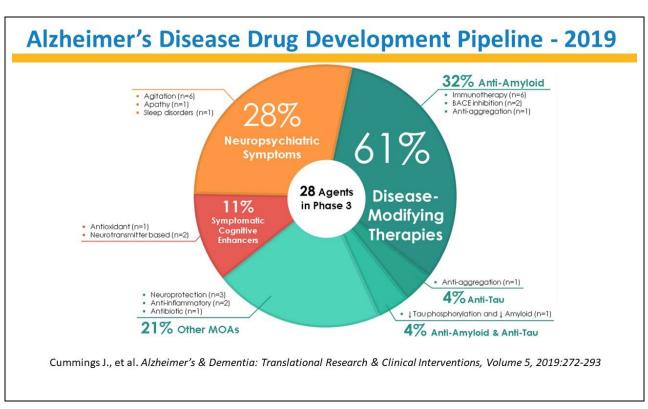
- Senescent cells drive neurodegenerative disease
- Clearance of senescent cells through genetic manipulation or drug treatment decreases tau pathology and cognitive decline

Bussian, T. et al. (2018). Nature, 562(7728): 578-582.









Ongoing NIA AD/ADRD and Related Intervention and Prevention Trials (~200)

35 Earlystage Clinical Drug Development (Phase I and Phase II Clinical Trials)

8 Late-stage Clinical Drug Development (Phase II/III and Phase III Clinical Trials)

Amyloid (6)

Vasculature (2)

86 Non-Pharmacological Interventions Therapy
Development
for the
Neuropsychiatric
Symptoms of

8 Clinical

61 Care and Caregiver Interventions Post-Operative Cognitive Decline Trials

Amyloid (10)
Receptors (4)
Neuroprotection (4)
Metabolism and
Bioenergetics (2)
Vasculature (2)
Growth Factors and
Hormones (2)
Multi-target (2)
Inflammation (2)
Oxidative Stress (2)
Other (5)

Exercise (19)
Diet (6)
Cognitive
Training (21)
Assistive Tech. (8)
Sleep (5)
Combination
Therapy (10)
Other (17)

Pharmacological (5) Non-Pharmacological (3) Improving Care for PWD (25) Improving care provided by family or informal caregiver (36) Anesthesia (1)
Sleep (1)
Device (1)
Combination (1)
Cognitive training (1)

21

Physical Activity Clinical Trial for AD

Exercise in Adults With Mild Memory Problems (EXERT)

 Goal: Test effects of physical exercise on cognition, functional status, brain atrophy and blood flow, and cerebrospinal fluid biomarkers of Alzheimer's disease, in adults ages 65 to 89 year with MCI (Completion: 2022)



Diet-Based Clinical Trial for AD

MIND Diet Intervention to Prevent Alzheimer Disease

 Goal: Test the effects of a 3-year intervention of the MIND diet (Mediterranean-DASH Intervention for Neurodegenerative Delay) on cognitive decline and brain neurodegeneration among individuals 65+ years without cognitive impairment, who are overweight and have suboptimal diets (Completion: 2022)



Cognitive Training Clinical Trial for AD

Processing Speed Training to Preserve Driving and Functional Competencies in MCI



 Goal: Test the capacity of an enriched version of processing speed training (PST) to preserve functional abilities in a clinical MCI population with quantified genetic and neuroimaging AD and comorbid cardiovascular disease biomarkers (Completion: 2020)

World Wide FINGERS & POINTER

The FINGER trial is the first large, long-term RCT indicating that a multi-domain intervention with exercise, diet, cognitive and social stimulation and management of vascular/metabolic risk factors may benefit cognition in subjects at risk of dementia.



U.S. POINTER:

The Alzheimer's Association has initiated a study designed to replicate the results of the Finnish trial in the U.S. (to test the generalizability of the FINGER findings in American older adults).

U.S. POINTER is a two-year clinical trial to evaluate whether lifestyle interventions that simultaneously target many risk factors protect cognitive function in older adults who are at increased risk for cognitive decline.

SPRINT-MIND Research Question

SPRINT Memory and Cognition in Decreased Hypertension

Does intensive blood pressure control compared with standard control reduce the occurrence of dementia?

Randomized Controlled Trial Target Systolic Blood Pressure

Intensive Treatment Goal SBP < 120 mmHg (n= 4,278) Standard Treatment Goal SBP < 140 mmHg (n= 4,285)



The SPRINT MIND Investigators for the SPRINT Research Group (2019). *JAMA*, 321(6):553–561.

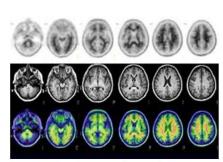
SPRINT-MIND: Secondary Cognitive Outcome

- The Intensive Treatment Group experienced a statistically significant reduction in the rate of developing MCI (19% reduction) as compared to the Standard Treatment Group
- The Intensive Treatment Group experienced a statistically significant reduction in the rate of composite MCI and probable dementia (15% reduction) as compared to the Standard Treatment Group
- Participants assigned to the intensive treatment had a nonstatistically significant reduction in all-cause probable dementia.

The SPRINT MIND Investigators for the SPRINT Research Group (2019). *JAMA*, 321(6):553–561.

Important considerations in the next years

- Continued improvements in neuroimaging for AD related molecular changes
- Further understanding from genetics and other –omics research
- New drug trials and personalized medicine approaches; using our understanding of the heterogeneity of disease to enrich trials with more homogeneous groups of participants
 - Those with genetic risk factors, e.g., individuals with Down syndrome
 - > Those with related dementias
 - Biomarker advances will inform these efforts
- Exploring diversity across all facets of disease research – including recruitment challenges, genetic variability, other factors influencing risk, differential treatment effects, and more



Ideasstudy.com



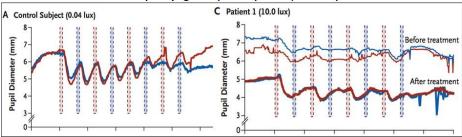
Nih.gov

Gene Therapy: a reality in treating devastating human diseases

N Engl J Med 2008;358:2240-8 Safety and Efficacy of Gene Transfer for Leber's Congenital Amaurosis

Albert M. Maguire, M.D., Francesca Simonelli, M.D., Eric A. Pierce, M.D., Ph.D., Edward N. Pugh, Jr., Ph.D., Federico Mingozzi, Ph.D., Jeannette Bennicelli, Ph.D., Sandro Banfi, M.D., Kathleen A. Marshall, C.O.T., Francesco Testa, M.D., Enrico M. Surace, D.V.M., Settimio Rossi, M.D., Arkady Lyubarsky, Ph.D., Valder R. Arruda, M.D., Barbara Konkle, M.D., Edwin Stone, M.D., Ph.D., Junwei Sun, M.S., Jonathan Jacobs, Ph.D., Lou Dell'Osso, Ph.D., Richard Hertle, M.D., Jian-xing Ma, M.D., Ph.D., T. Michael Redmond, Ph.D., Xiaosong Zhu, M.D., Bernd Hauck, Ph.D., Olga Zelenaia, Ph.D., Kenneth S. Shindler, M.D., Ph.D., Maureen G. Maguire, Ph.D., J. Fraser Wright, Ph.D., Nicholas J. Volpe, M.D., Jennifer Wellman McDonnell, M.S., Alberto Auricchio, M.D., Katherine A. High, M.D., and Jean Bennett, M.D., Ph.D.





Gene therapy success in infantile spinal muscular atrophy

WWW.CURESMA.ORG > NEWS > AVEXIS RECEIVES FDA APPROVAL OF ZOLGENSMA, A GENE THERAPY, FOR SPINAL MI YEARS OF AGE

AveXis Receives FDA Approval of Zolgensma, a Gene Therapy, for Spinal Muscular Atrophy for Patients Under Two Years of Age

BY CURE SMA | PUBLISHED ON MAY 24, 2019





New therapeutic approaches already leading to a sense of optimism despite recent disappointments

- Already here:
 - Earlier diagnosis and interventions
- On the way:
 - Gene therapy
 - · Brain neuromodulation
 - Nonpharmacological interventions
 - New targets from genetic studies
 - New targets from AMP AD
 - New approaches to improve clinical trial design and hasten results
 - Numerous shots on goal.....