

Blood biomarkers for the early diagnosis of dementia with Lewy bodies



Fundació Institut d'Investigació en Ciències
de la Salut Germans Trias i Pujol

Barcelona, 20 de octubre de 2015

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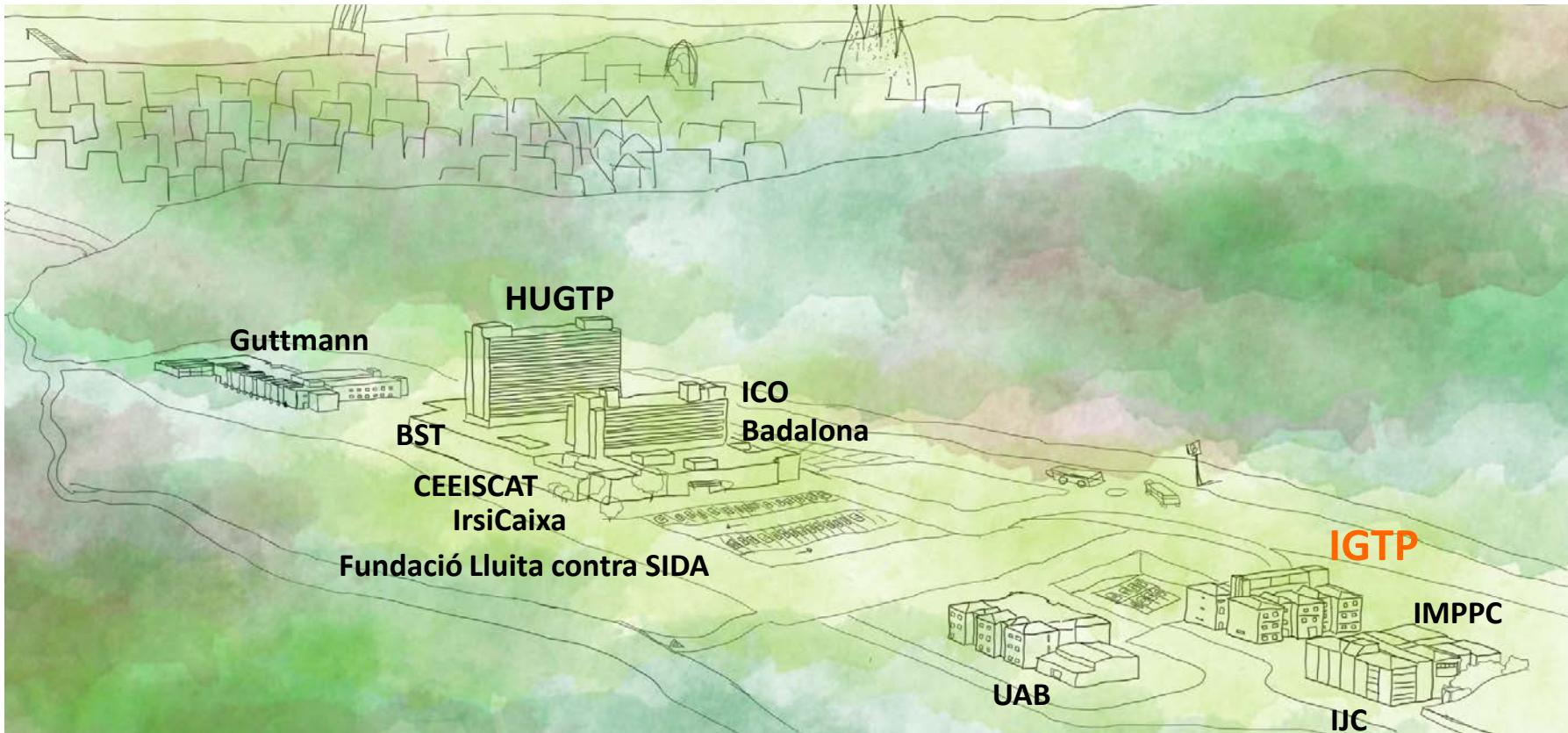
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XIII Encuentro de Cooperación Farma-Biotech

1. The Institution



The Health Sciences Research Institute Germans Trias i Pujol (IGTP) is a CERCA biomedical research centre on the Can Ruti Campus, around the Germans Trias i Pujol Hospital in Badalona just outside Barcelona. As accredited centre of excellence for Medical Research accredited by the "Instituto Carlos III", the IGTP coordinates research and innovation activities on the campus as well as providing technical platforms and know-how to the scientific and medical community. The Can Ruti Campus is home to diverse research centres, including several which are outstanding in their fields, a teaching unit of the Autonomous University of Barcelona and various spin-offs.

The Research Group

Patología estructural y molecular; Director: Prof A Ariza

Área de cáncer

Tumores
cutáneos

Linfomas

Tumores
gastro-
intestinales

Área de neurociencias

Neuro-
oncología

**Neuro-
degeneración**

Neuro-
infección

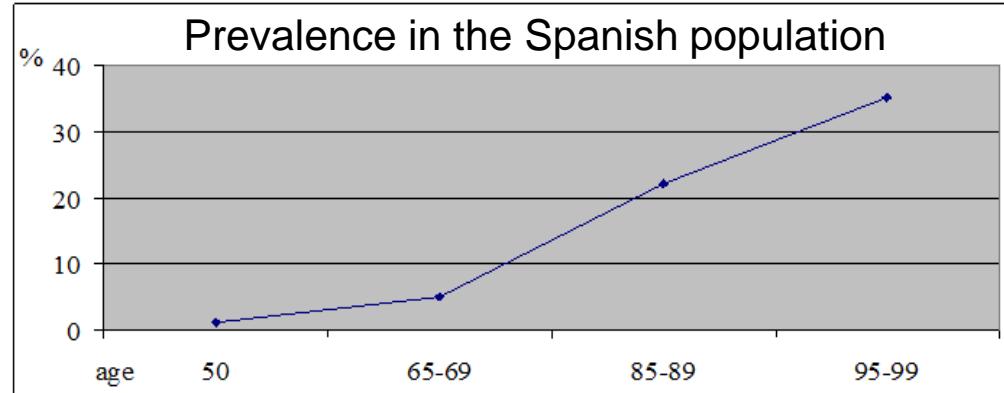
K Beyer, PhD
A Gámez, MSc
L Pérez, MSc
J Canet, MSc

Transcriptómica y genómica de las
sinucleinopatías

Identificación de biomarcadores diagnósticos

2. The Product: a) Target Indications

DEMENTIAS



Alzheimer's
disease (AD)

Dementia with
Lewy bodies
(DLB)

other
dementias

45-50%

25-30%

- polygenic / multi-factorial, heterogeneous disease

2. The Product: a) Target Indications

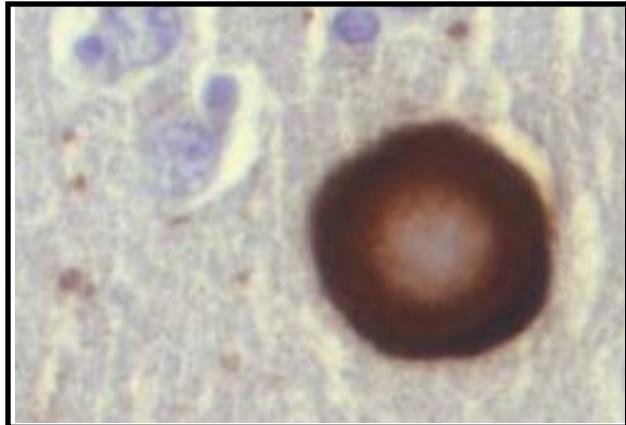
SYNUCLEINOPATHIES

= group of three diseases:

1. Parkinson's disease (PD)
2. DLB
3. Multisystem atrophy (MSA)

**Primary pathological mechanism
→ oligomerization y aggregation
of alpha-synuclein**

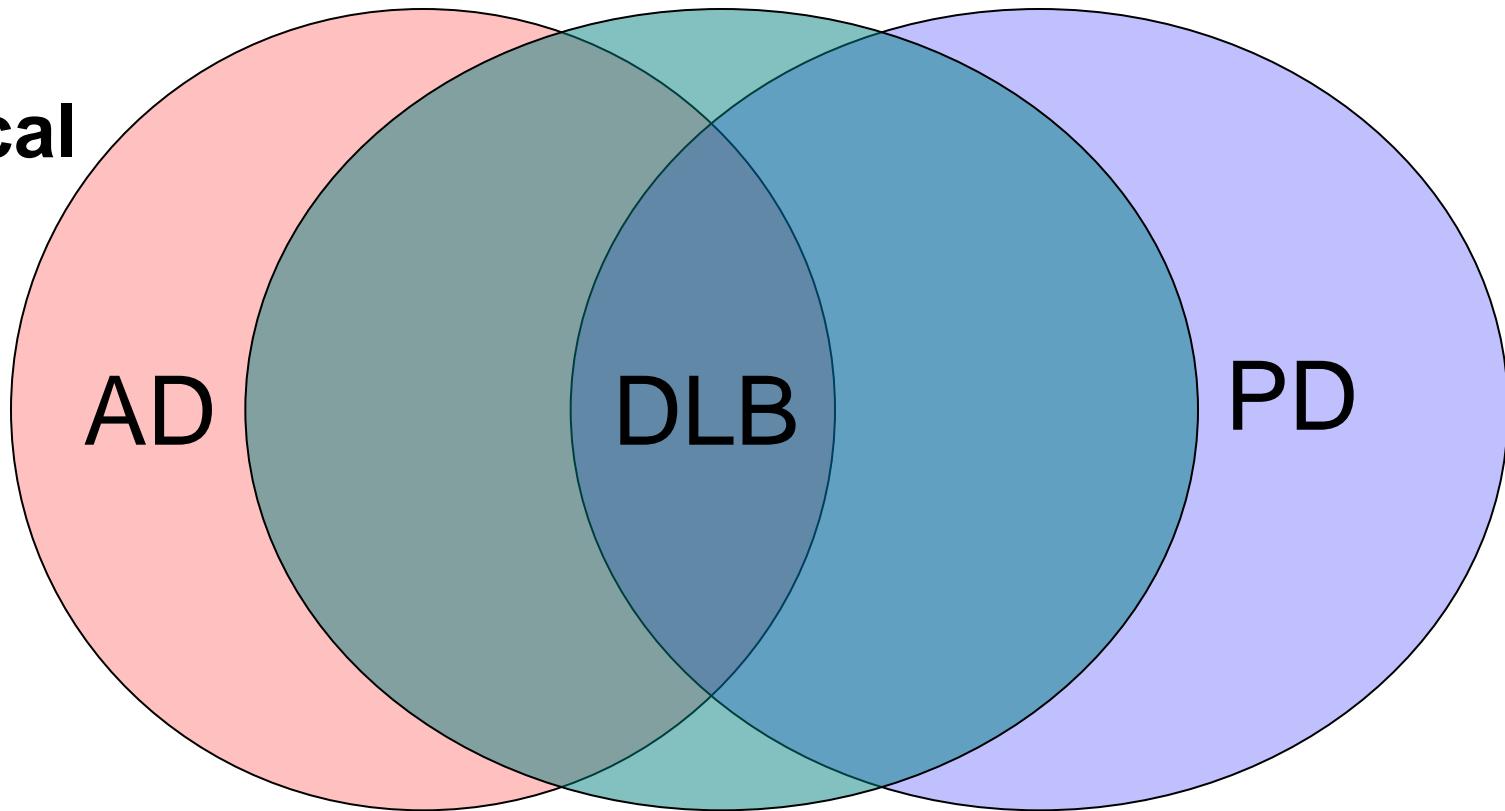
**Alpha-synuclein → formation of
intra-neuronal inclusion bodies**



2. The Product: a) Target Indications

AD / DLB / PD

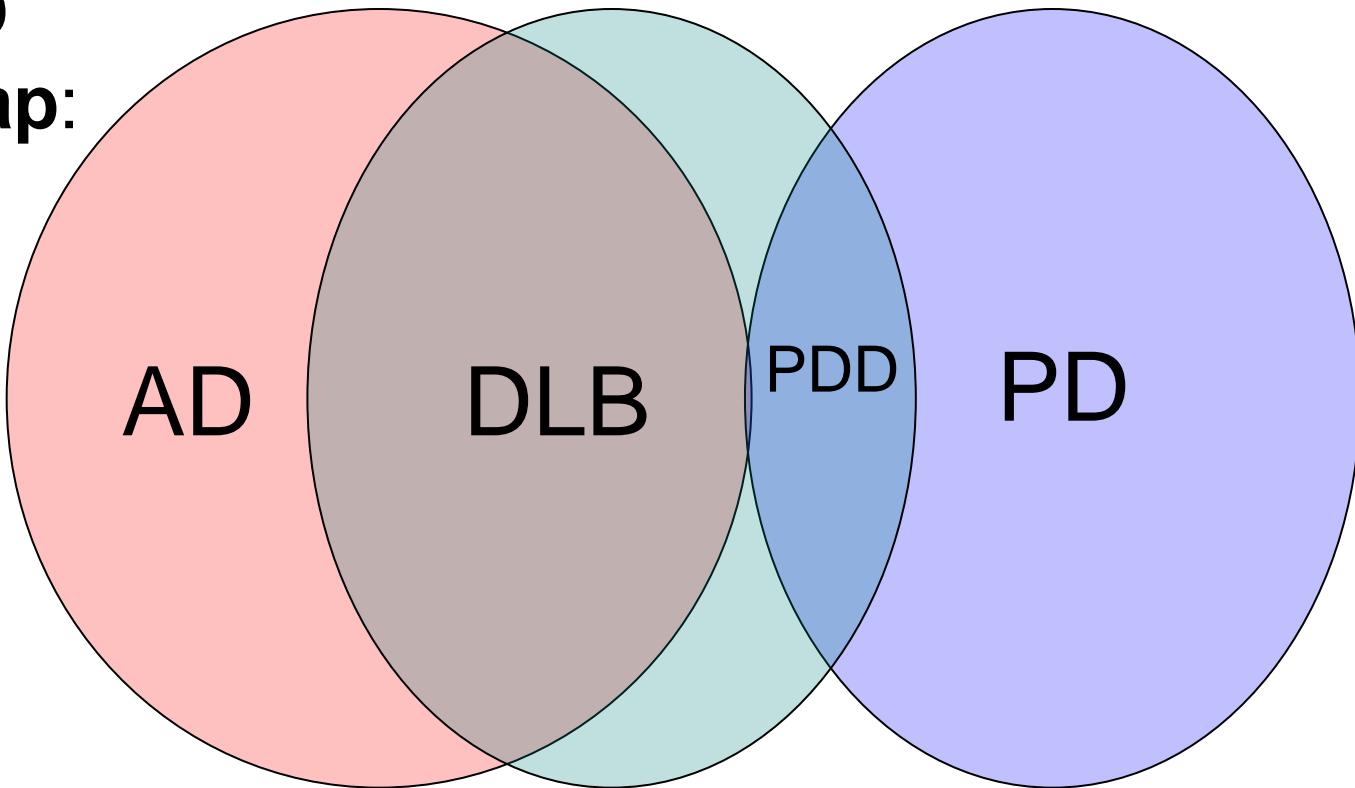
→ neuro-pathological overlap:



2. The Product: a) Target Indications

**AD / DLB / PD
clinical overlap:**

- DLB misdiagnosis
- wrong treatment
- adverse reaction

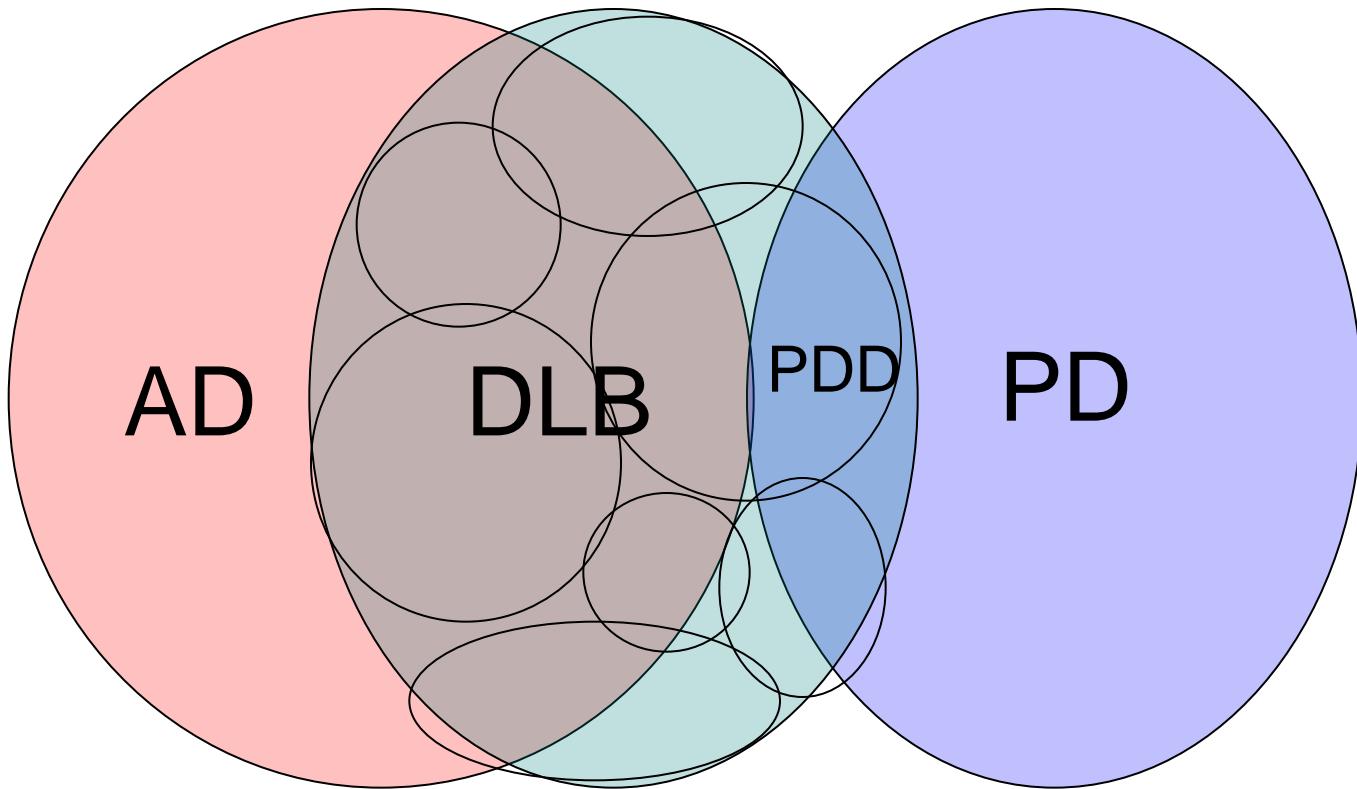


2. The Product: a) Target Indications

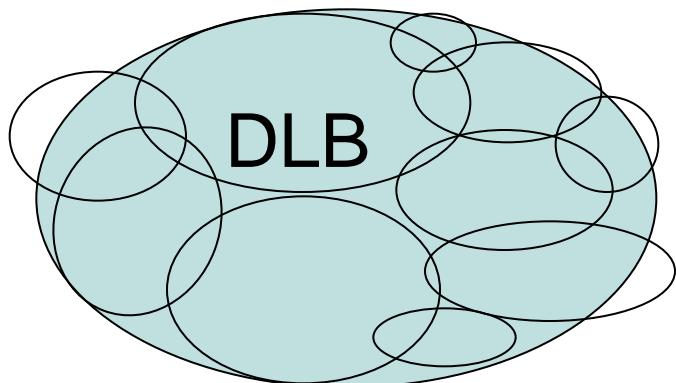
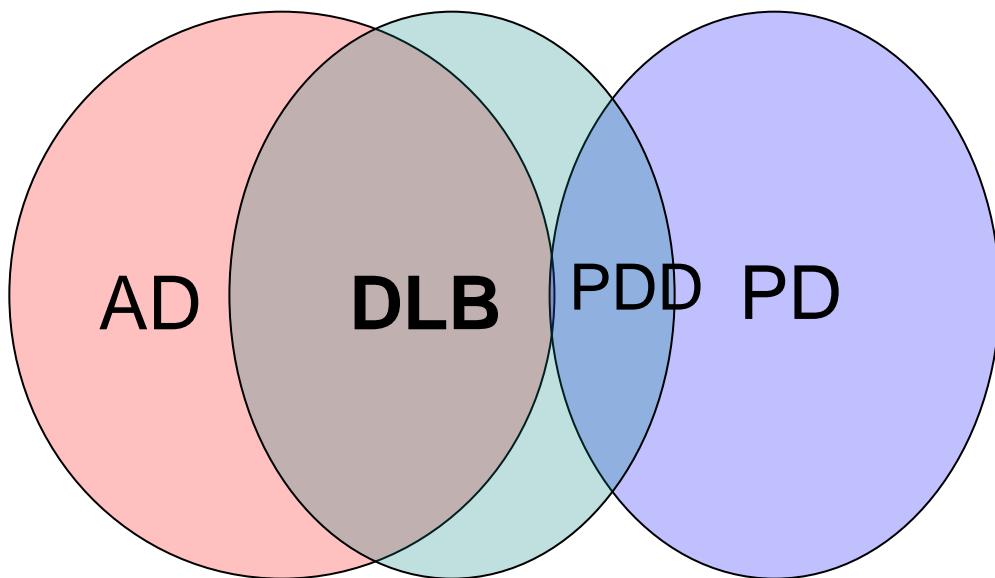
Genetic heterogeneity:

- Subgroups
- different molecular mechanisms

→
one pathology



2. The Product: a) Target Indications



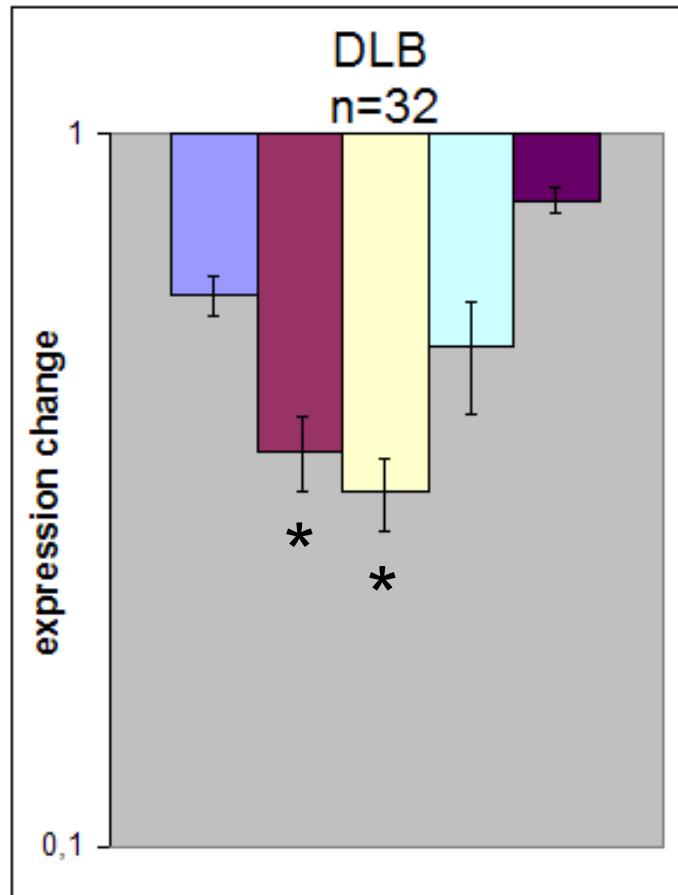
Main question:

HOW TO DIAGNOSE
DLB CORRECTLY?

DLB = heterogeneous
disease → How to
diagnose the different
subgroups?

2. The Product: b) The biomarkers

Genetic biomarkers for the early diagnosis of DLB



Biomarker 1

Analysis of relative expression of 5 Lewy body disease-related transcripts in blood of DLB patients in comparison with healthy controls.

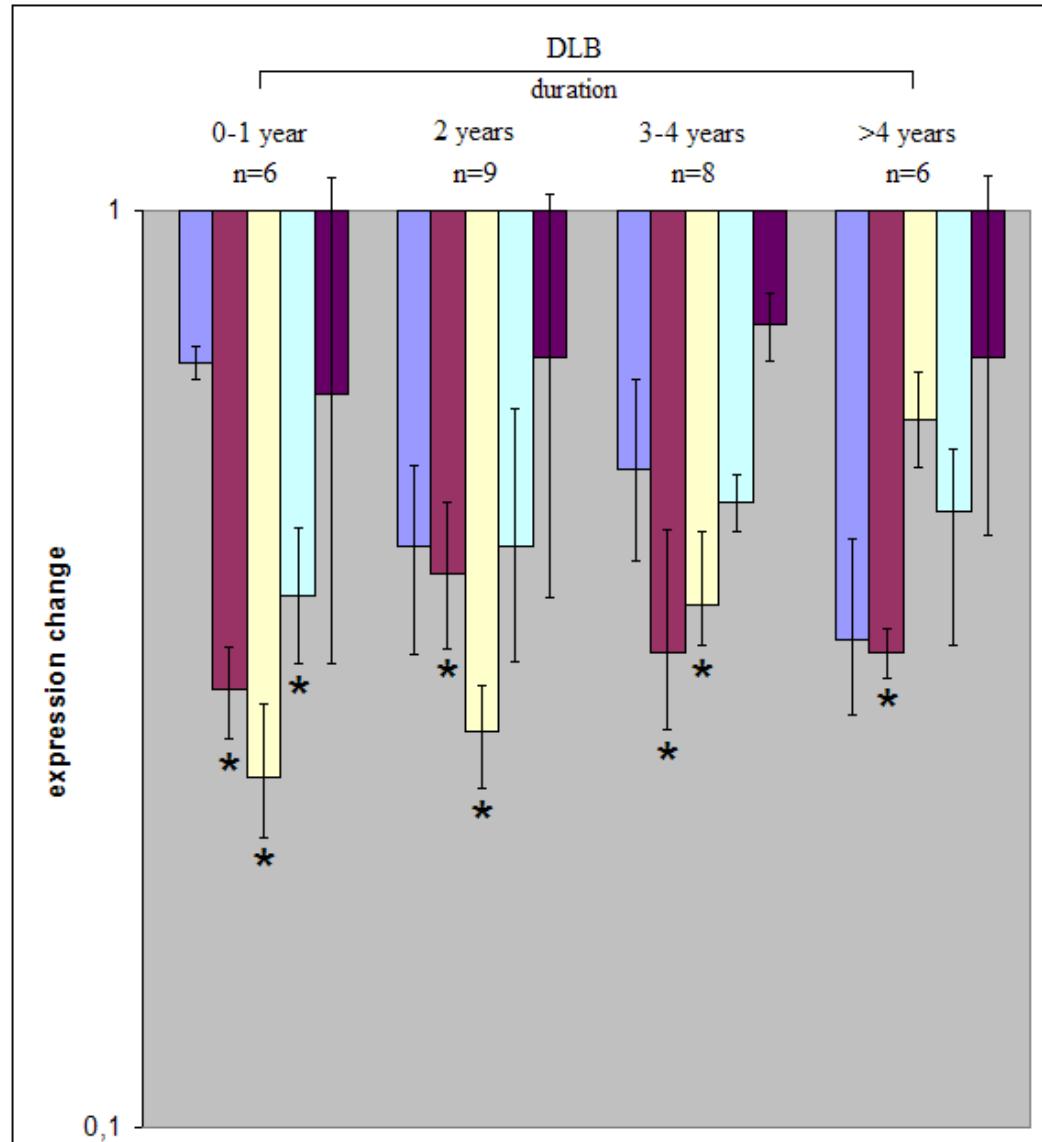
- PAX-blood RNA tubes
- RNA extraction with QIAcube
- real-time PCR with SybrGreen
- beta-actin (ACTB) and porphobilinogen deaminase (PBGD)
- $\Delta\Delta Ct$ method

2. The Product: b) The biomarkers

Genetic biomarkers
for the early
diagnosis of DLB

Biomarker 1

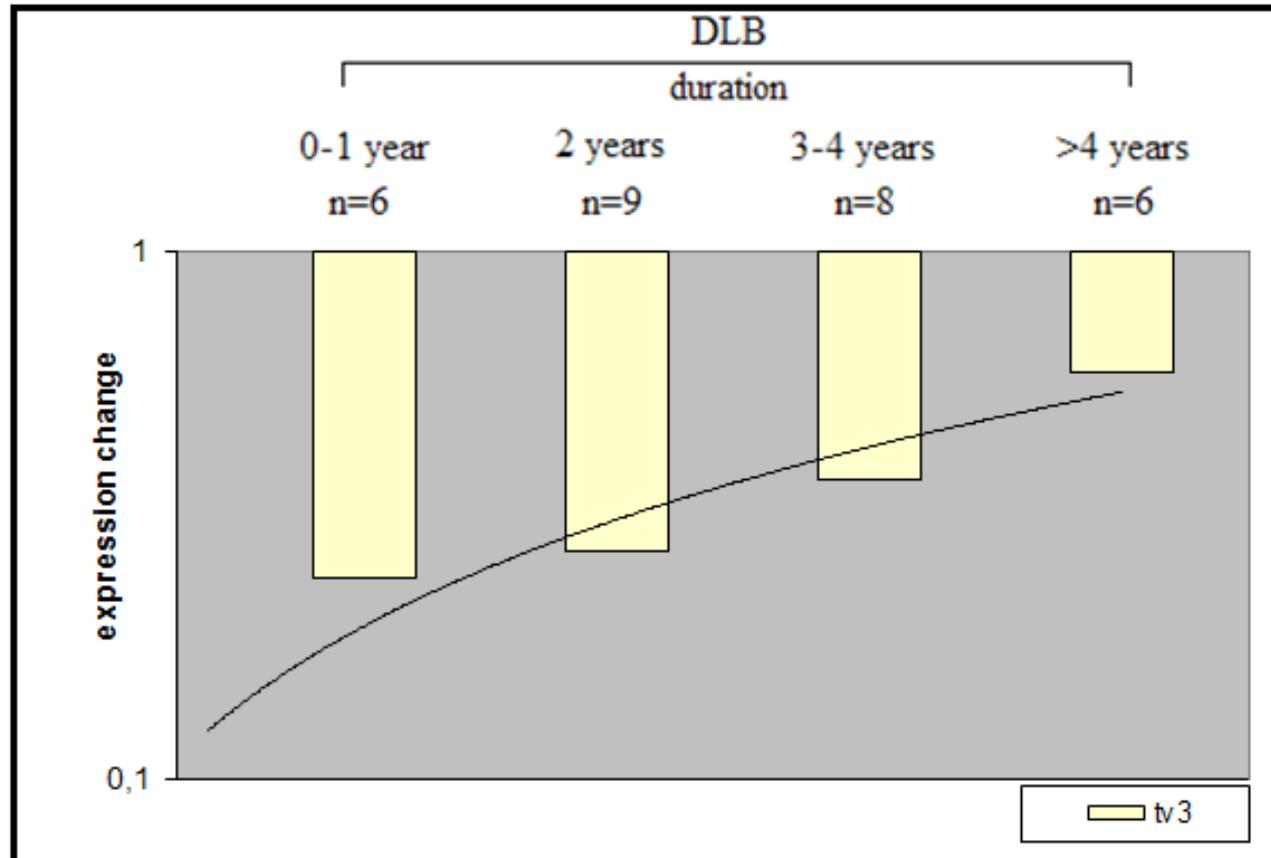
DLB patients divided
by disease duration
from onset



2. The Product: b) The biomarkers

Genetic biomarker to monitor the progression of Lewy body disease

Biomarker 1



2. The Product: b) The biomarkers

Genetic biomarkers for the early diagnosis of DLB

Biomarker 2

Analysis of 5 polymorphisms within the regulatory region of a Lewy body disease-related gene.

- DNA extraction from blood (QIAcube)
- Fragment analysis
- Sequencing
- Obtaining of the genotype combination

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2. The Product: b) The biomarkers

2010: Drastic beta-synuclein diminution in the cerebral cortex defines a molecular subgroup of DLB

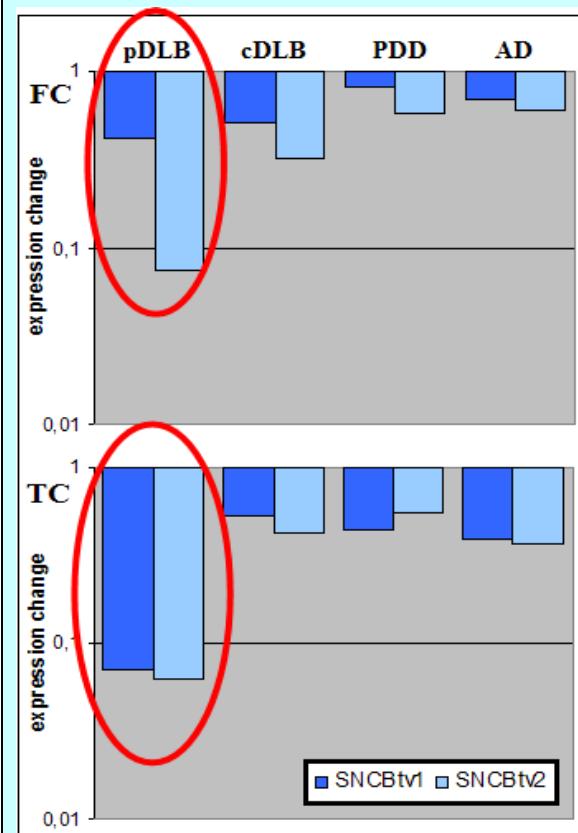
Characteristics:

- fast progression and short duration of DLB
- clinical presentation as DLB but not as PDD
- pure Lewy pathology in the brain

Identification: of the molecular mechanism as a possible therapeutic target

NO determination: the associated peripheral marker to this mechanism for the pre-mortem and early identification of affected patients

Expression of two beta-synuclein transcripts in the cortex of brains with:

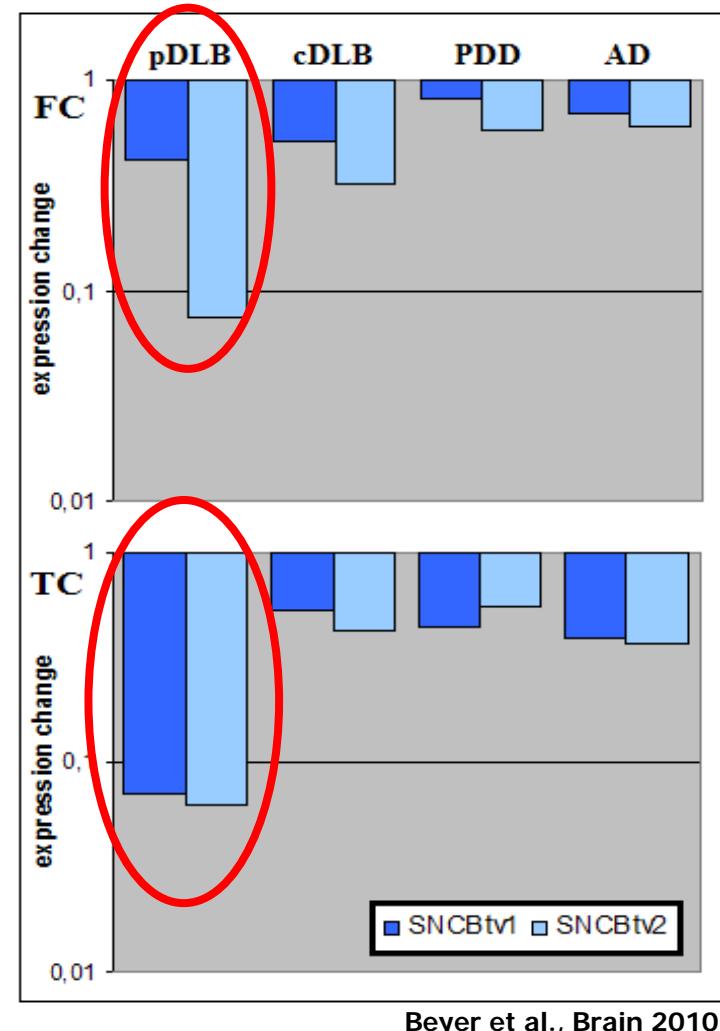
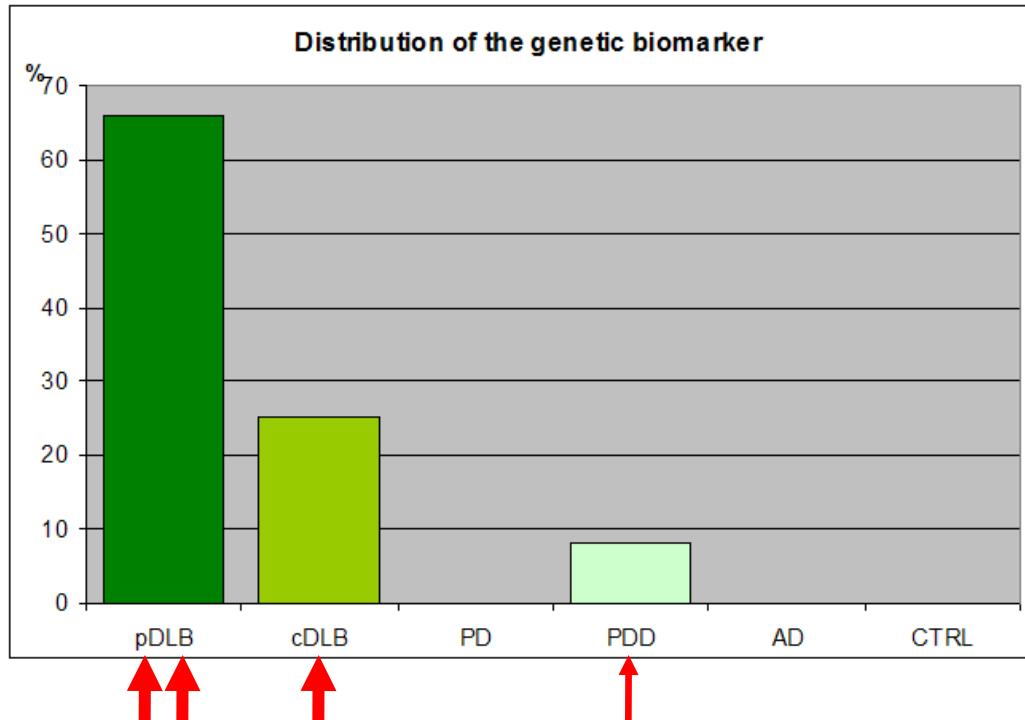


Beyer et al., Brain 2010

2. The Product: b) The biomarkers

Genetic biomarkers for the early diagnosis of DLB

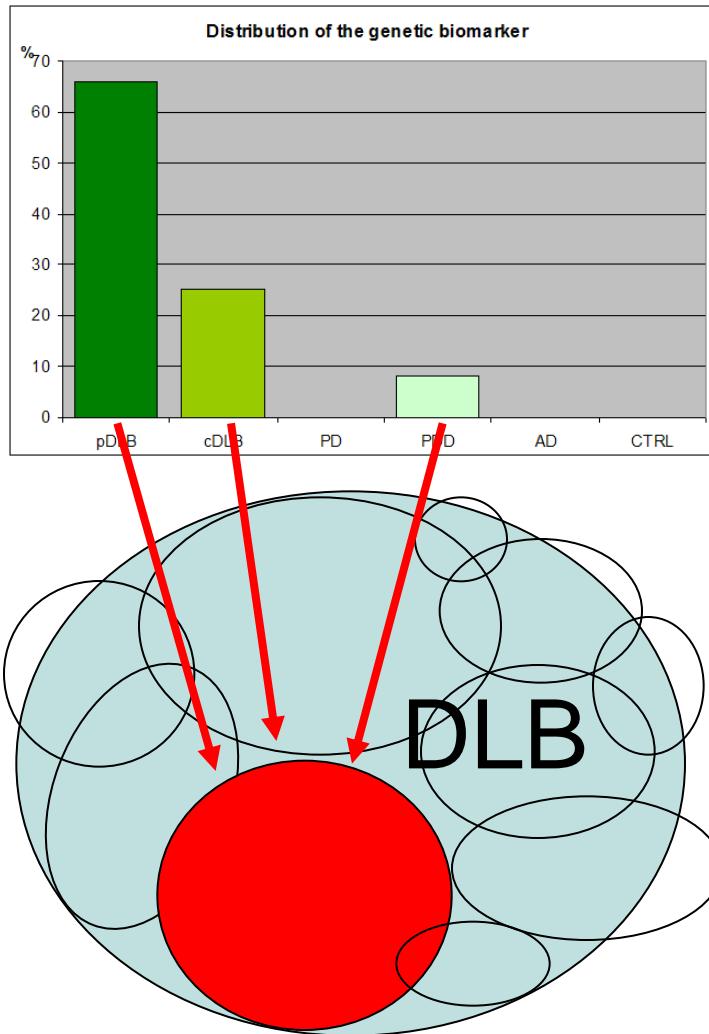
Biomarker 2



Beyer et al., Brain 2010

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2. The Product: b) The biomarkers



ADVANTAGES

- The use of this **genetic biomarker** will permit to identify those patients with DLB that belong to a subgroup with known molecular changes in the brain.
- The potential to **personalize** the diagnosis and possibly also treatment is becoming a promising strategy for clinical use.
- The facility of **standardization** and relative **low-cost of analysis** are key characteristics for the use of the biomarker in clinics.

2. The Product:

c) Differential features facing the market

- **urgent need of diagnostic biomarkers for DLB**
 - to achieve a correct diagnosis
 - facing the ageing of the population
- **current diagnostic tools:**
 - purely clinical
 - radiodiagnostic tools (DATscan = expensive and invasive)
- **no genetic markers have been identified so far**

2. The Product:

d) Current status of development

1st phase*

Post mortem brain samples (n=120)

2nd phase*

Blood samples from clinically diagnosed patients (n=550 DNA; n=120 RNA)

3rd phase*

Multicenter clinical study in blood samples (n=1200 DNA, n=300 RNA)

Biomarker 2

Sensitivity: >> 85%
Specificity: >> 93%

Biomarker 1

Sensitivity: >> 83%
Specificity: >> 90%

* phase refers to stage of biomarker development

2. The Product: e) IPR protection

Two Priority European patents applications filed

2. The Product: f) Pitfalls & Risks to be considered

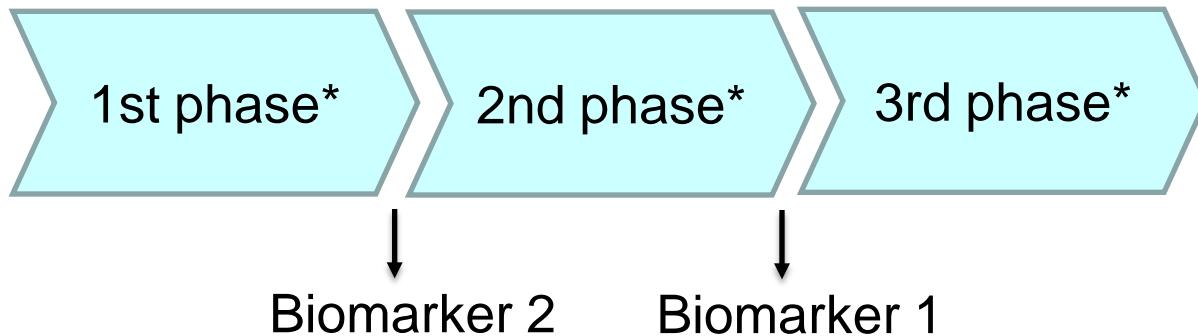
Biomarker 1

- to be validated vs AD
- to be validated in other populations

Biomarker 2

- to check the biomarker in a cohort with clinical diagnosis:
 - vs control subjects
 - vs AD patients
- to check the biomarker in a multicenter/international study

3. Partnering Opportunities



We are open to any kind of partnership with pharmaceutical and biotech industry that lead us to achieve final development including validation in step 3 for “Biomarker 1”, and validation in steps 2 and 3 for “Biomarker 2” and/or for licensing out the biomarkers.

** phase refers to stage of biomarker development*