

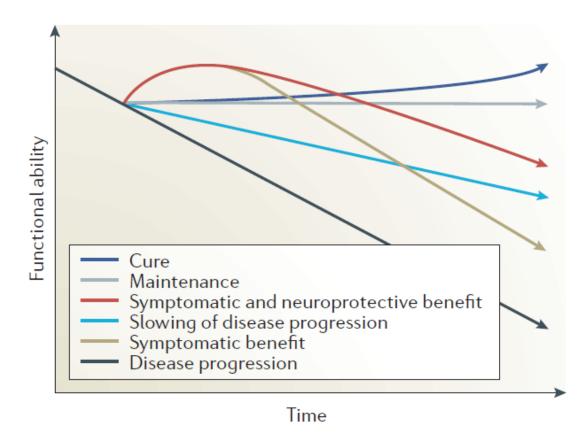
Wanneer een vaccin tegen Alzheimer?

Peter Paul De Deyn



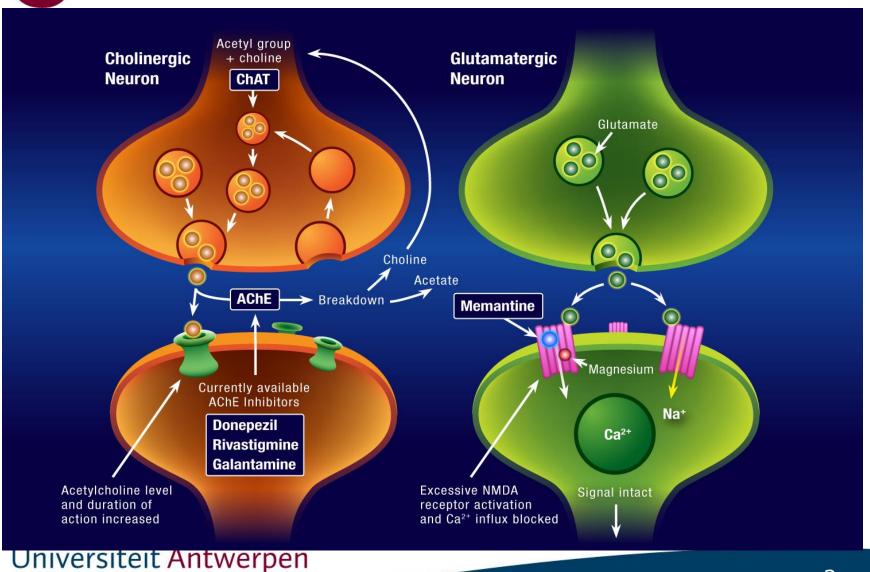


Theoretische mogelijkheden van AD behandeling





Neurotransmitter-gerichte benadering





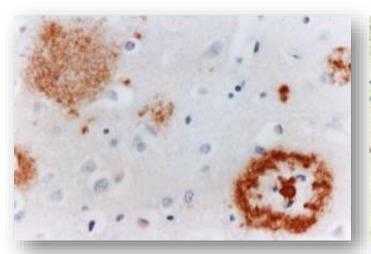
Naar een ziekteproces modificiërende aanpak

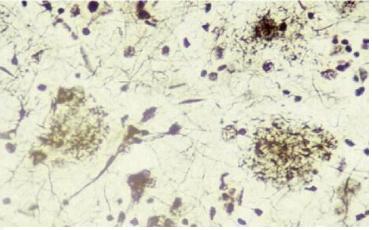




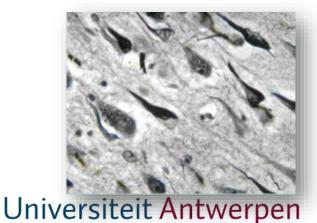
Neuropathologie dementie

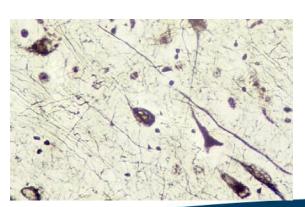
Amyloid plaques





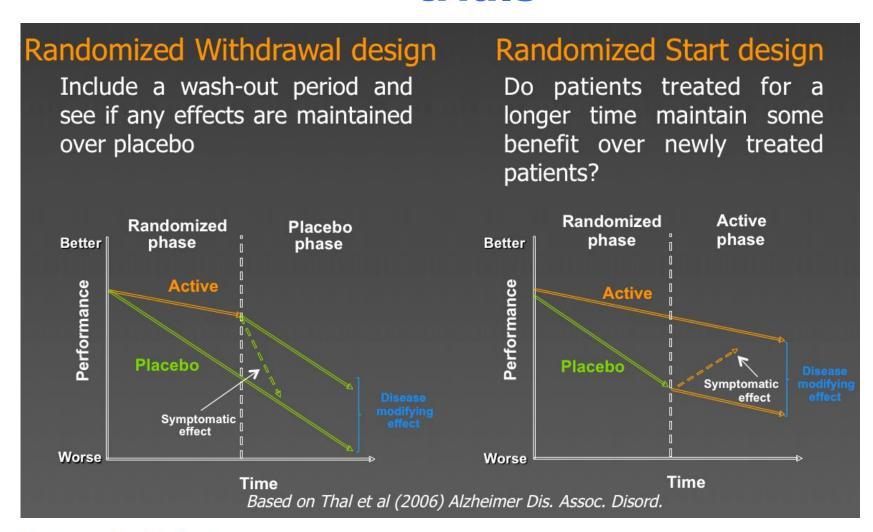
Neurofibrillaire kluwens





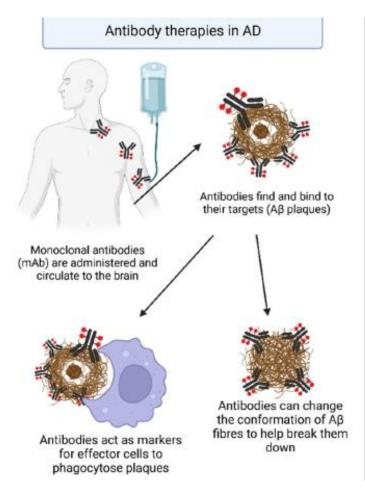


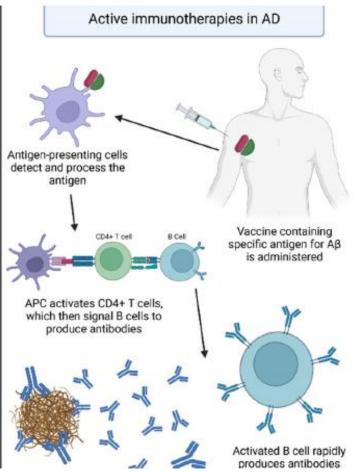
Ziekteproces beïnvloedende trials





Vaccinatie versus passive immunotherapy





6

Vaccins

Active Vaccines:

- compound AN1792 seemed to have promising effects against β amyloid and slowing down functional decline
- however too many potential side effects from the treatment (since it requires the body to produce anti-bodies)
- Monoclonal Antibodies: potentially safer since using laboratory or harvested from human blood antibodies
 - **Bapineuzumab** (Salloway et al., 2014) and **Solanezumab** (Doody et al., 2014) = good safety profiles but no significant effect seen.
 - Ongoing trials include patients in very early AD and MCI due to AD stages, while others just include individuals that are at risk to develop AD in the future.
 - **Aducanumab** (By Biogen): All phases completed- On August 2020, granted priority review by the FDA to expedite the approval of the medication

• Gantenerumab (By Roche)
Universiteit Antwerpen



Passive Immunization

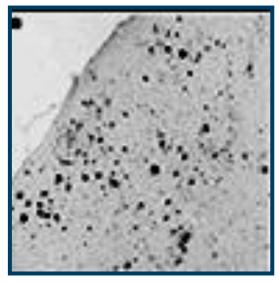
- Monoclonal antibodies in development are designed to target 1 of 3 domains of the Aβ protein: the n-terminus, the middle portion, or the c-terminus.
 - It is possible that efficacy, safety, or both may be substantially different depending on the binding domain.
- Elan/Wyeth, bapineuzumab (AAB-001) is a humanized monoclonal antibody to N-terminus of Aβ in phase III development
- Lilly, LY206430 (a humanized version of m266) targets A β and is in phase II (Bales et al. Neurobiol Aging. 2004)
- Others are in development as well

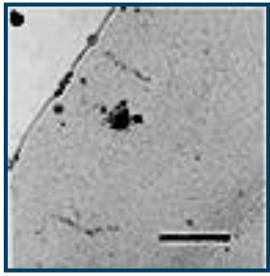
Anti-amyloid Immunotherapy: Amyloid "Vaccine" Reduces Plaque Burden and Memory Loss in Transgenic Mouse Model of AD

Amyloid Stain (Mouse Brain)

Unvaccinated

Vaccinated





Immunization with amyloid- β attenuates Alzheimer-disease-like pathology in the PDAPP mouse

Dale Schenk, Robin Barbour, Whitney Dunn, Grace Gordon, Henry Grajeda, Teresa Guido, Kang Hu, Jiping Huang, Kelly Johnson-Wood, Karen Khan, Dora Kholodenko, Mike Lee, Zhenmei Liao, Ivan Lieberburg, Ruth Motter, Linda Mutter, Ferdie Soriano, George Shopp, Nicki Vasquez, Christopher Vandevert, Shannan Walker, Mark Wogulis, Ted Yednock, Dora Games & Peter Seubert

Elan Pharmaceuticals, 800 Gateway Boulevard, South San Francisco, California 94080, USA

NATURE VOL 400 8 JULY 1999



Vaccination with AN-1792: First demonstration of reversal of AD neuropathology?

ARTICLES

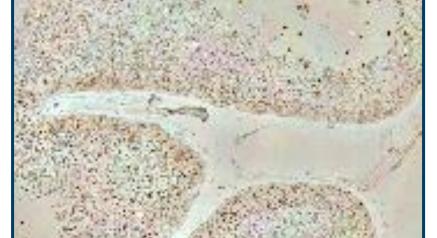
Neuropathology of human Alzheimer disease after immunization with amyloid-β peptide: a case report

> James A.R. Nicoll^{1,2}, David Wilkinson^{1,3}, Clive Holmes^{1,3}, Phil Steart², HANNAH MARKHAM^{1,2} & ROY O. WELLER^{1,2}

NATURE MEDICINE • VOLUME 9 • NUMBER 4 • APRIL 2003.

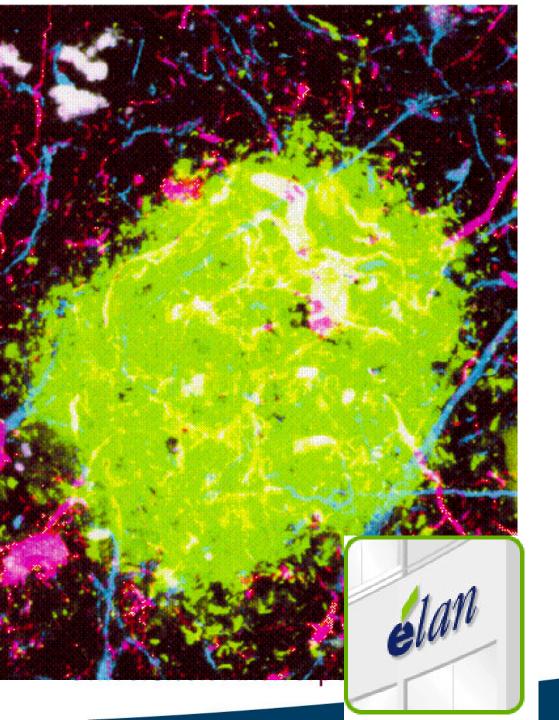
Parietal neocortex, non-immunized

patient at comparable stage of AD



Parietal neocortex, immunized AD patient in Elan AN-1792 Trial





Vaccination against Alzheimer's

Injecting people with small amounts of β-amyloid protein to raise an immunity to it.

But 6% of test patients got seriously ill.

6

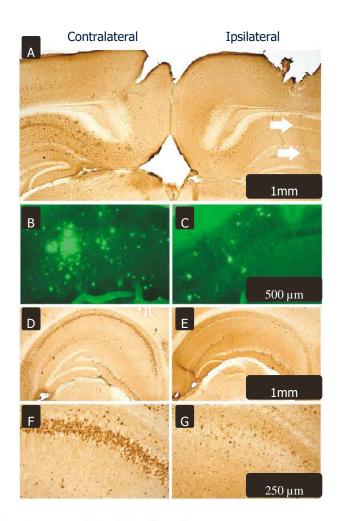
Vaccins

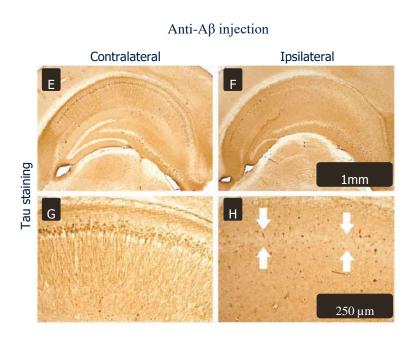
Active Vaccines:

- compound AN1792 seemed to have promising effects against β amyloid and slowing down functional decline
- however too many potential side effects from the treatment (since it requires the body to produce anti-bodies)
- Monoclonal Antibodies: potentially safer since using laboratory or harvested from human blood antibodies
 - **Bapineuzumab** (Salloway et al., 2014) and **Solanezumab** (Doody et al., 2014) = good safety profiles but no significant effect seen.
 - Ongoing trials include patients in very early AD and MCI due to AD stages, while others just include individuals that are at risk to develop AD in the future.
 - Aducanumab (By Biogen):
 - Gantenerumab (By Roche)
 - En andere



Preclinische data met AAB-001 (bapineuzumab)







Bapineuzumab

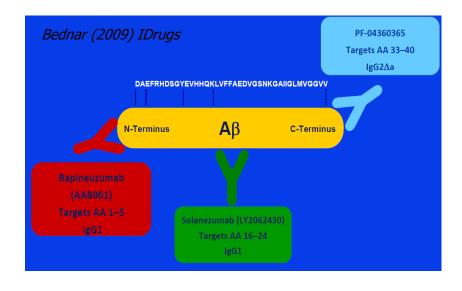
(orig. Elan & Wyeth)

- AAB-001, ELN-115727
- Passive immunization
- Bapi-neu-zu-mab

Neuro(logical)

Humanized

Monoclonal antibody



- Previous results (review: Kerchner & Boxer, 2010; Expert Opin Biol Ther)
 - Reduction CNS amyloid burden
 - Primary efficacy outcomes phase II not sginificant
 - Post-hoc: Efficacy limited to non-ApoE4 carriers?
 - Dose-dependent vasogenic edema (+ link to ApoE4?)



N Engl J Med. 2014 January 23; 370(4): 322-333. doi:10.1056/NEJMoa1304839.

Two Phase 3 Trials of Bapineuzumab in Mild-to-Moderate Alzheimer's Disease

CONCLUSIONS—Bapineuzumab did not improve clinical outcomes in patients with Alzheimer's disease, despite treatment differences in biomarkers observed in *APOE &* carriers.



tinued)

Drug	Mechanism	Sponsor	Study population	Admin	Phase	Results	Clinical Trial Identifier	Start date	Estir
Aducanumab (BIIB037)	Monoclonal anti- body	Biogen	Early AD	IV	III	Terminated	NCT02484547	2015 Sept	2019
			Early AD		III	Terminated	NCT02477800	2015 Aug	2019
			Early AD		III	Active, not recruit- ing	NCT04241068	2020 Mar	2023
Crenezumab (RG7412)	Monoclonal anti- body	Roche/AC Immune SA	Prodromal to mild AD	IV	III	Terminated	NCT02670083	2016 Mar	2019
			Prodromal to mild AD		Ш	Terminated	NCT03114657	2017 Mar	2019
			Prodromal to mild AD		III	Terminated	NCT03491150	2018 Apr	2019
Lecanemab (BAN2401)	Monoclonal anti- body	Biogen /Eisai	Early AD	IV	Ш	Recruiting	NCT03887455	2019 Mar	2024
			Preclinical AD		Ш	Recruiting	NCT04468659	2020 Jul	2027
Donanemab (LY3002813)	Monoclonal anti- body	Eli Lilly	Early symptomatic AD	IV	Ш	Recruiting	NCT04437511	2020 Jun	2023
			Preclinical AD		III	Recruiting	NCT05026866	2021 Aug	2027

isease; Admin, Route of administration; SC, subcutaneous; IM, intramuscular; IV, intravenous



Recente data en een FDA approved product

The antibody aducanumab reduces AB plaques in Alzheimer's disease

Jeff Sevigny^{1*}, Ping Chiao^{1*}, Thierry Bussière^{1*}, Paul H. Weinreb^{1*}, Leslie Williams¹, Marcel Maier², Robert Dunstan¹, Stephen Salloway³, Tianle Chen¹, Yan Ling¹, John O'Gorman¹, Fang Qian¹, Mahin Arastu¹, Mingwei Li¹, Sowmya Chollate¹, Melanie S. Brennan¹, Omar Quintero-Monzon¹, Robert H. Scannevin¹, H. Moore Arnold¹, Thomas Engber¹, Kenneth Rhodes¹, James Ferrero¹, Yaming Hang¹, Alvydas Mikulskis¹, Jan Grimm², Christoph Hock^{2,4}, Roger M. Nitsch^{2,4}§ & Alfred Sandrock¹§

Alzheimer's disease (AD) is characterized by deposition of amyloid- β (A β) plaques and neurofibrillary tangles in the brain, accompanied by synaptic dysfunction and neurodegeneration. Antibody-based immunotherapy against A β to trigger its clearance or mitigate its neurotoxicity has so far been unsuccessful. Here we report the generation of aducanumab, a human monoclonal antibody that selectively targets aggregated A β . In a transgenic mouse model of AD, aducanumab is shown to enter the brain, bind parenchymal A β , and reduce soluble and insoluble A β in a dose-dependent manner. In patients with prodromal or mild AD, one year of monthly intravenous infusions of aducanumab reduces brain A β in a dose- and time-dependent manner. This is accompanied by a slowing of clinical decline measured by Clinical Dementia Rating—Sum of Boxes and Mini Mental State Examination scores. The main safety and tolerability findings are amyloid-related imaging abnormalities. These results justify further development of aducanumab for the treatment of AD. Should the slowing of clinical decline be confirmed in ongoing phase 3 clinical trials, it would provide compelling support for the amyloid hypothesis.

50 | NATURE | VOL 537 | 1 SEPTEMBER 2016

The antibody aducanumab reduces $A\beta$ plaques in Alzheimer's disease

Jeff Sevigny^{1*}, Ping Chiao^{1*}, Thierry Bussière^{1*}, Paul H. Weinreb^{1*}, Leslie Williams¹, Marcel Maier², Robert Dunstan¹, Stephen Salloway³, Tianle Chen¹, Yan Ling¹, John O'Gorman¹, Fang Qian¹, Mahin Arastu¹, Mingwei Li¹, Sowmya Chollate¹, Melanie S. Brennan¹, Omar Quintero-Monzon¹, Robert H. Scannevin¹, H. Moore Arnold¹, Thomas Engber¹, Kenneth Rhodes¹, James Ferrero¹, Yaming Hang¹, Alvydas Mikulskis¹, Jan Grimm², Christoph Hock^{2,4}, Roger M. Nitsch^{2,4}§ & Alfred Sandrock¹§

50 | NATURE | VOL 537 | 1 SEPTEMBER 2016

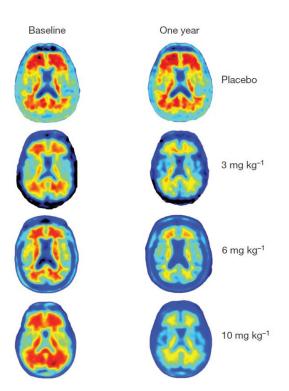
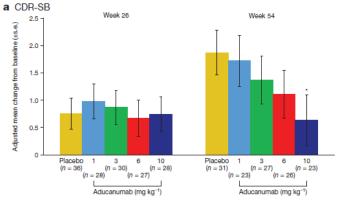


Figure 1 | Amyloid plaque reduction with aducanumab



Dose-response P < 0.05 at week 54 based on a linear contrast test

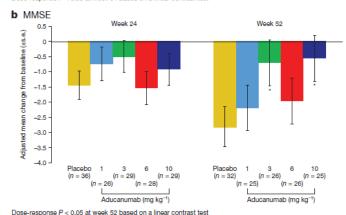


Table 2 | Summary of adverse events and most common adverse events

	Aducanumab						
Adverse event (n (%))	Placebo (n=40)	$1 \mathrm{mg}\mathrm{kg}^{-1} (n\!=\!31)$	$3 \mathrm{mg}\mathrm{kg}^{-1}(n\!=\!32)$	$6 \mathrm{mg}\mathrm{kg}^{-1}(n\!=\!30)$	$10 \mathrm{mg}\mathrm{kg}^{-1}(n\!=\!32)$		
Any adverse event	39 (98)	28 (90)	27 (84)	28 (93)	29 (91)		
Serious event	15 (38)	3 (10)	4 (13)	4 (13)	12 (38)		
Discontinuing treatment due to an adverse event	4 (10)	3 (10)	2 (6)	3 (10)	10 (31)		
Common adverse events							
ARIA	2 (5)	2 (6)	4 (13)	11 (37)	15 (47)		



pubs.acs.org/chemneuro Editorial

FDA Approval of Aducanumab Divided the Community but Also Connected and United It



Cite This: ACS Chem. Neurosci. 2021, 12, 2716–2717





Lecanemab

Swanson et al. Alzheimer's Research & Therapy https://doi.org/10.1186/s13195-021-00813-8

(2021) 13:80

Alzheimer's Research & Therapy

RESEARCH Open Access

A randomized, double-blind, phase 2b proof-of-concept clinical trial in early Alzheimer's disease with lecanemab, an anti-Aβ protofibril antibody



LECANEMAB CONFIRMATORY PHASE 3 CLARITY AD STUDY MET PRIMARY ENDPOINT, SHOWING HIGHLY STATISTICALLY SIGNIFICANT REDUCTION OF CLINICAL DECLINE IN LARGE GLOBAL CLINICAL STUDY OF 1,795 PARTICIPANTS WITH EARLY ALZHEIMER'S DISEASE

SEPTEMBER 27, 2022 • INVESTOR RELATIONS

- ALL KEY SECONDARY ENDPOINTS ALSO MET, DEMONSTRATING HIGHLY STATISTICALLY SIGNIFICANT RESULTS
- PROFILE OF AMYLOID-RELATED IMAGING ABNORMALITIES (ARIA) INCIDENCE WAS WITHIN EXPECTATIONS
- EISAI AIMS TO FILE FOR TRADITIONAL APPROVAL IN THE U.S., AND TO SUBMIT MARKETING
 AUTHORIZATION APPLICATIONS IN JAPAN AND EUROPE BY THE END OF EISAI FY2022, WHICH ENDS ON
 MARCH 31, 2023



Gantenerumab / negatief 14.11.22

SOUTH SAN FRANCISCO, Calif.--(BUSINESS WIRE)--Genentech, a member of the Roche Group (SIX: RO, ROG; OTCQX: RHHBY), today announced results from the Phase III GRADUATE I and II studies evaluating gantenerumab in people with mild cognitive impairment (MCI) due to Alzheimer's and mild Alzheimer's dementia, collectively called early Alzheimer's disease. The studies did not meet their primary endpoints of slowing clinical decline. Gantenerumab was well tolerated including the subcutaneous administration.

"So many of our families have been directly affected by Alzheimer's, so this news is very disappointing to deliver"



"So many of our families have been directly affected by Alzheimer's, so this news is very disappointing to deliver," said Levi Garraway, M.D., Ph.D., chief medical officer and head of Global Product Development. "We are profoundly grateful to the study participants, their care partners and

study sites for their contributions to this research. While the GRADUATE results are not what we hoped, we are proud to have delivered a high quality, clear and comprehensive Alzheimer's dataset



New Treatments targeting neurofibrillary tangles are needed

- Anti-Tau treatment is now considered as important as anti-β-amyloid in AD progression.
- Also, tau seems the primary cause of cell death in other related dementias as CTE, and Primary Age-Related Tauopathy (PART)- $no \beta$ -amyloid involvement in these dementia types.
- Anti-tau treatments have become a major focus in the current research to block tau aggregation and block tau spreading from cell to cell (Congdon & Sigurdsson, 2018)



Anti-Tau Treatments in progress:

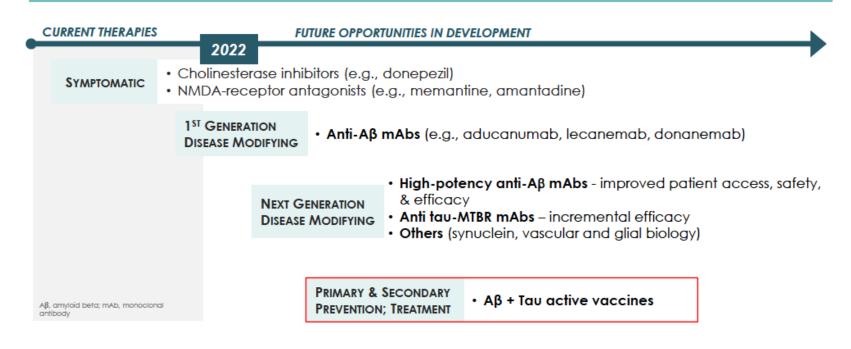
- 1. TauRX compound LMTB: Phase III tested in mild to moderate AD with negative results. Currently looking at its effect in early Alzheimer's Disease.
- 2. New Phase II trials (focus on MCI, and early AD using positive tau and β -amyloid PET scans) –initiated in 2019
 - a. Gosuranemab (by Biogen)
 - 1. Zagotenemab (by Lilly)
- Since these trials started, many other anti-tau studies initiated using both drugs and biologics (Cummings et al., 2019)



Gecombineerd anti amyloid/tau

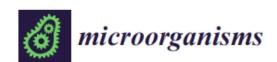
Incremental Innovation in Alzheimer's Disease Therapeutics

From Treatment to Disease Prevention











Article

Evaluation of BCG Vaccination and Plasma Amyloid: A Prospective, Pilot Study with Implications for Alzheimer's Disease

Coad Thomas Dow 1,2,*, Charles L. Greenblatt 3, Edward D. Chan 4,5,6 and Jordan F. Dow 7,8

Microorganisms 2022, 10, 424. https://doi.org/10.3390/microorganisms10020424



BRAIN COMMUNICATIONS

An amyloid beta vaccine that safely drives immunity to a key pathological species in Alzheimer's disease: pyroglutamate amyloid beta

