

Osteoporosis therapy using AAV-mediated gene transfer

Jae-Hyuck Shim, PhD

Division of Rheumatology/Medicine

University of Massachusetts Medical School

2019 AAV Gene Therapy Seminar (12/03/2019)

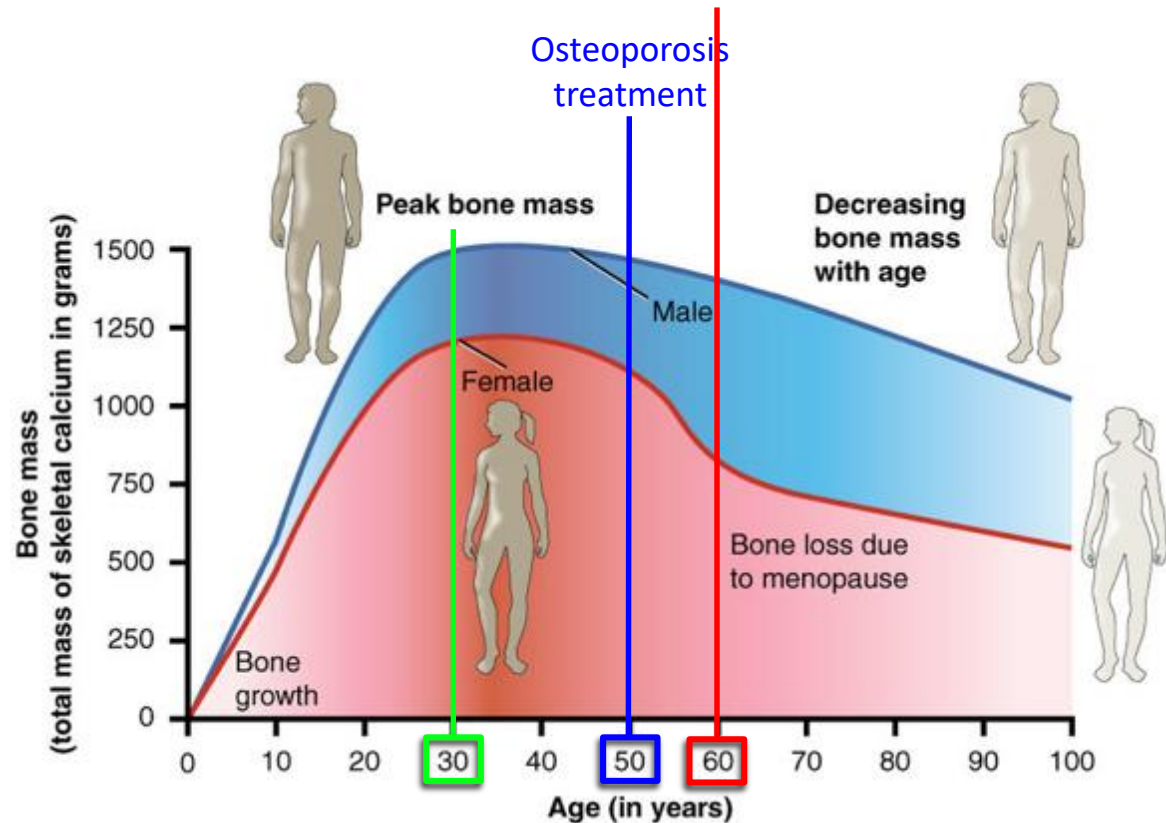
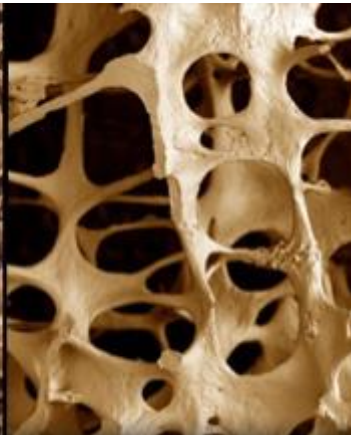
Osteoporosis causes severe bone loss and deterioration of bone microstructure

Life span extended

Normal



Osteoporosis

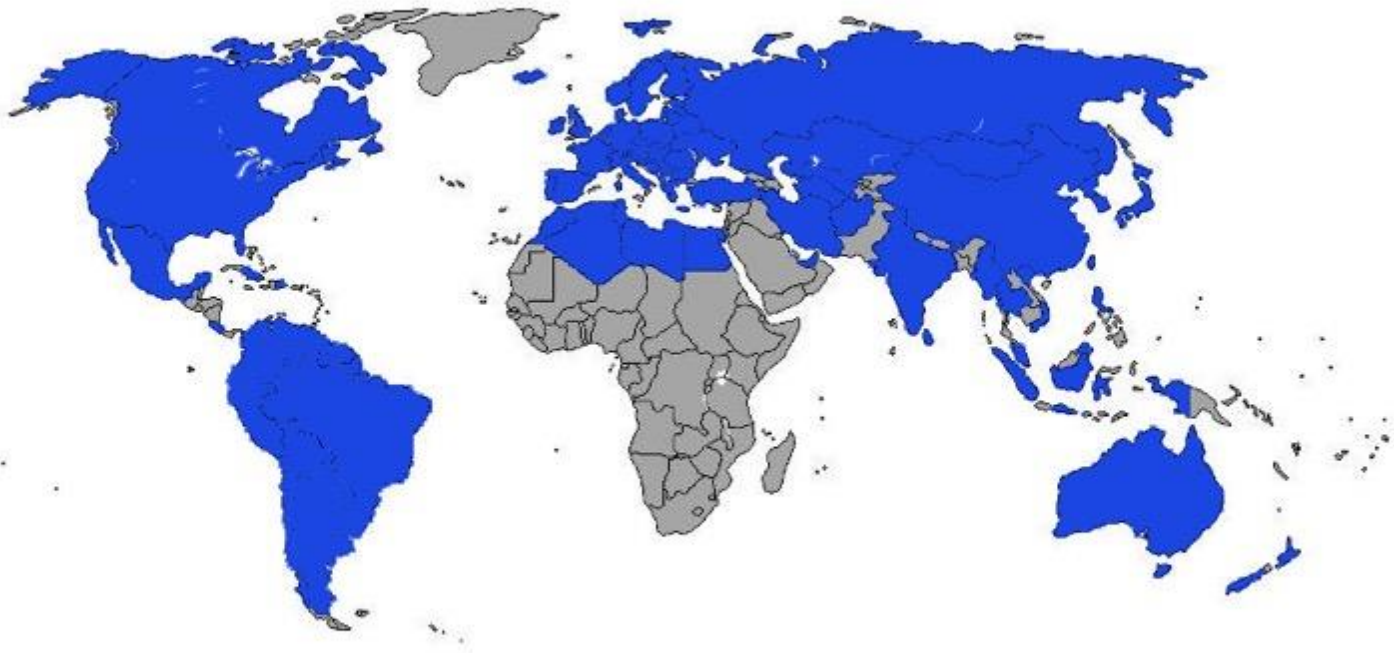


Osteoporosis is a major health issue

1. 200 million people worldwide, >40 million people in the US suffer osteoporosis.
 - 1 in 3 women and 1 in 5 men will suffer an osteoporosis-related fracture during their lifetime.
 - Afflicts 55% of Americans over the age of 50.
2. 24% of hip/spinal fracture patients over the age of 50 die in the year following their fracture due to clinical complications.
3. Limited therapeutic options to treat osteoporosis-related fracture.

Osteoporosis increases as the world population ages

2050



> 20% over age 65

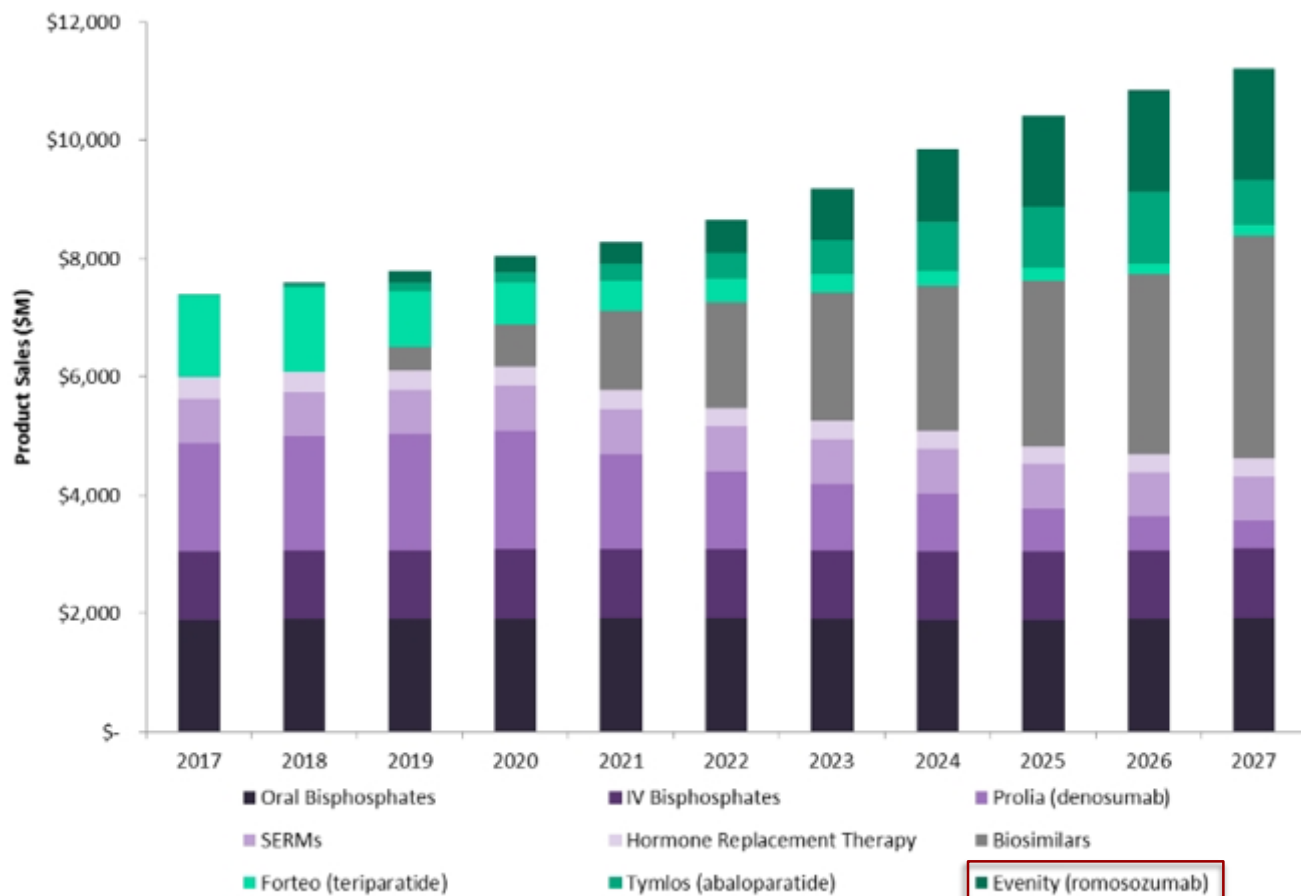
Global osteoporosis drug market

U.S. market share of prescription osteoporosis treatments

Drug (Company)	2009 U.S. market share
Actonel (Sanofi Aventis and Warner Chilcott)	20.7%
Zometa (Novartis)	16.8
Boniva (Roche)	16.6
Evista (Eli Lilly)	15.5
Forteo (Eli Lilly)	12.0
Reclast (Novartis)	7.4
Others	11.0

Total U.S. sales: \$4.4 billion

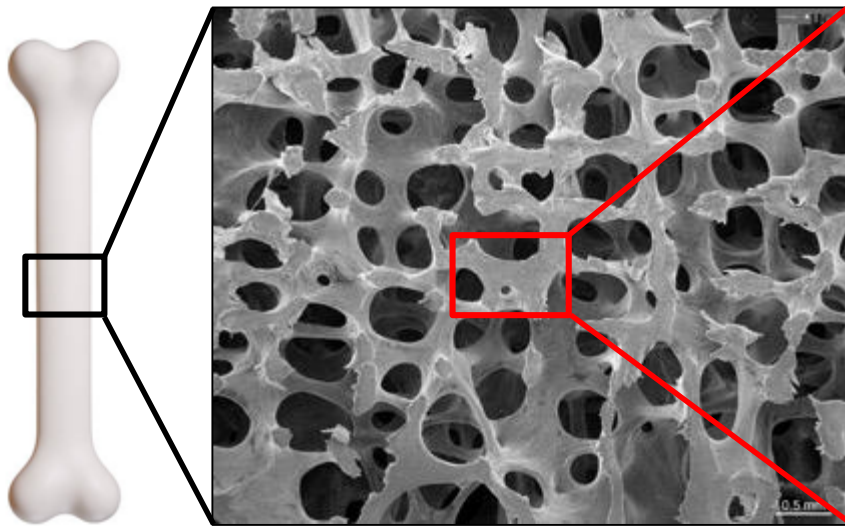
Source: IMS Health



Bone is a dynamic tissue

Osteoclast
(Bone destruction)

Osteoblast
(Bone formation)

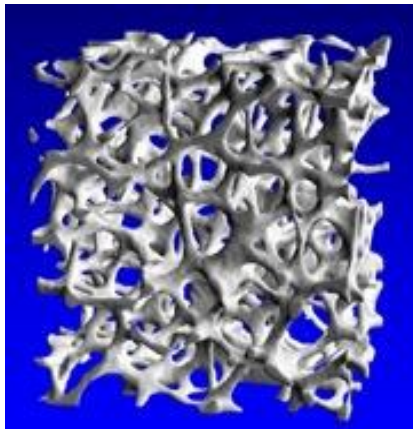
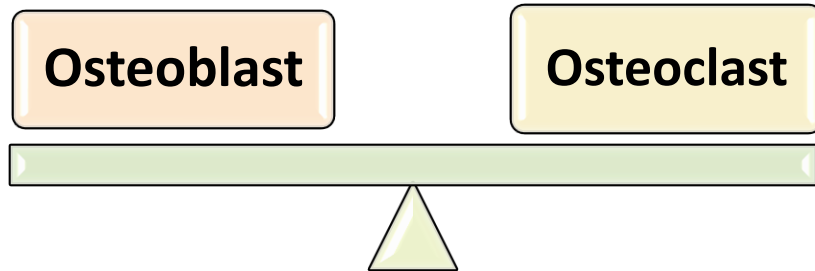


3 months/cycle

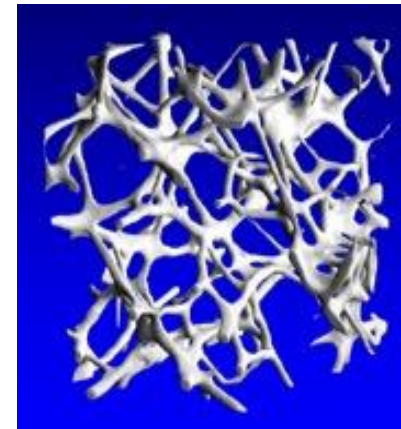
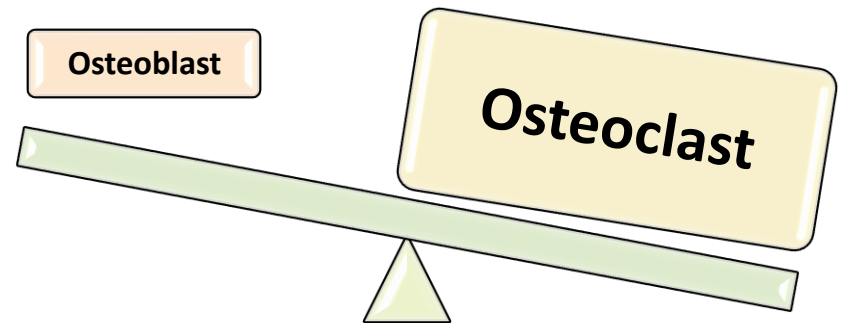
Whole body regeneration/10 years

Pathogenesis of osteoporosis

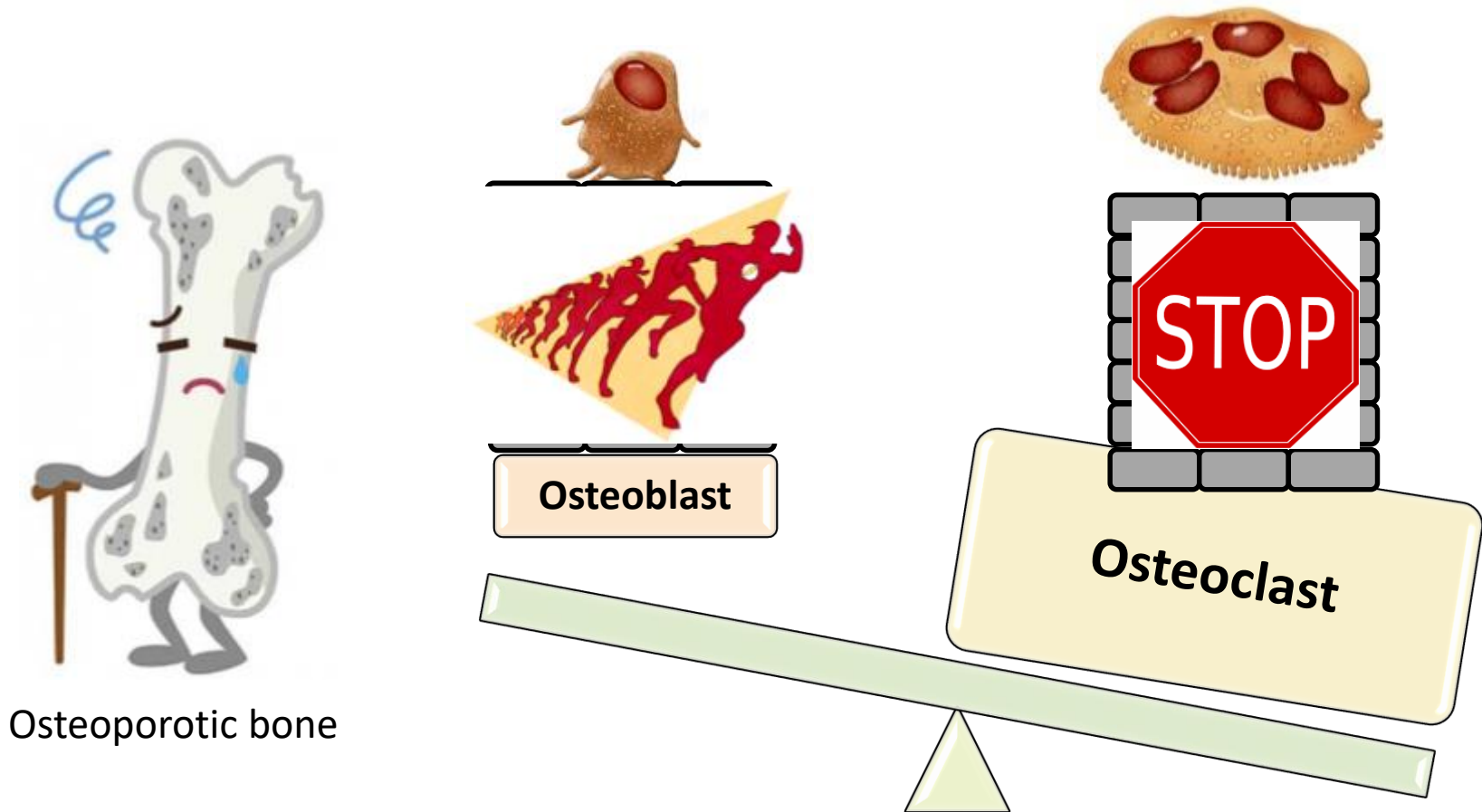
Normal



Bone loss



How to treat bone loss in human?





Osteonecrosis of jaws

Development of new osteoporosis therapeutics with limiting adverse effects is unmet need.



Bone remodeling is required for microfracture repair

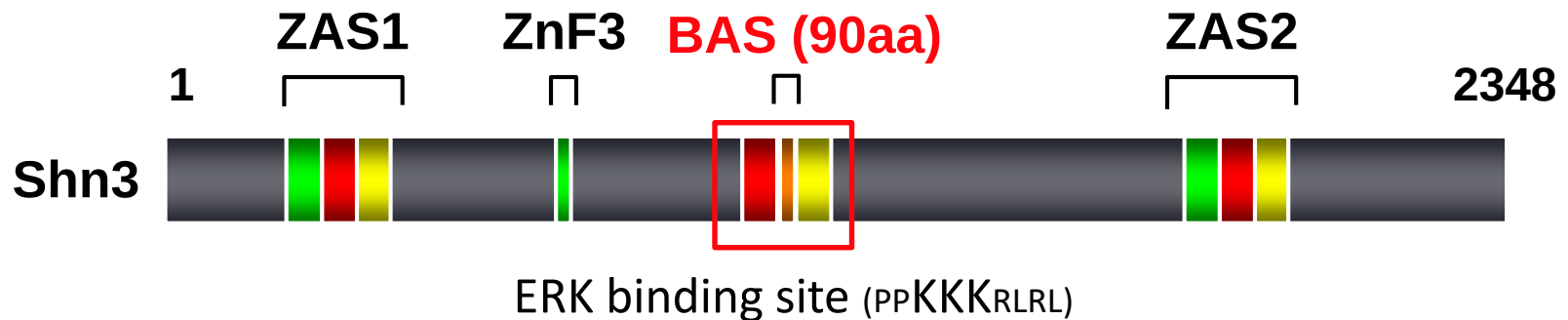


Promoting osteoblast activity is considered as a better approach to treat osteoporosis than blocking osteoclast activity



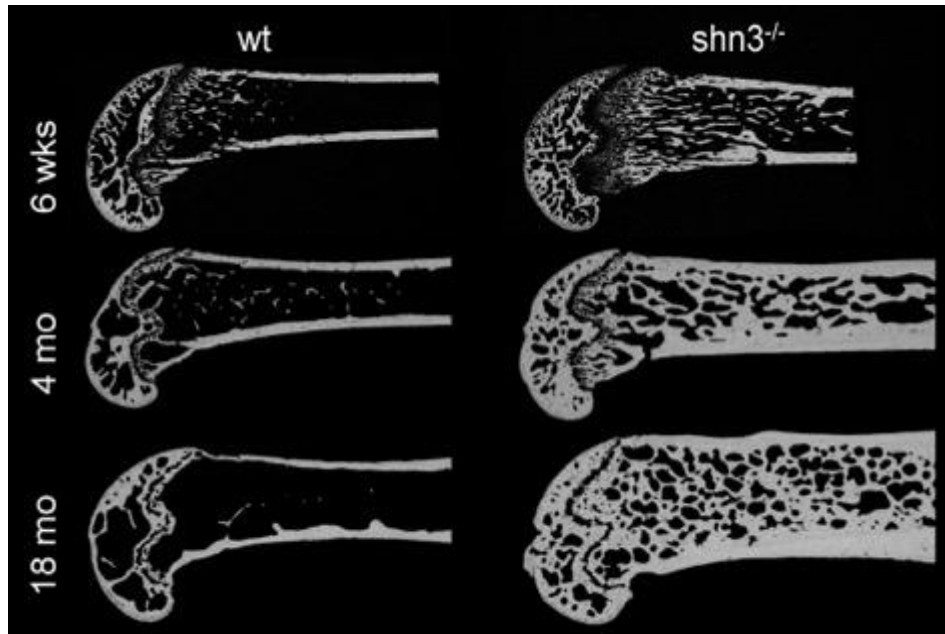
Loss of function mutations in the *Cathepsin K* gene causes Pycnodysostosis in human

Schnurri-3 (KRC, ZAS₃, HIVEP₃)



1. Shn3 was originally identified Th2-specific transcription factor by Laurie's group (Yeast one-hybrid screening for GATA3-binding)
2. Shn3 inhibits TRAF2-mediated NF- κ B activation in TNF signaling pathway (*Oukka et al., Mol Cell, 2002*)
3. Shn3 plays a role in regulation of IL-2 induction in T cells by interacting with c-Jun (*Oukka et al., J Exp Med, 2004*)

Loss of SHN3 increases bone mass in mice



<Jones and Wein et al., Science, 2006>

Lamellar bone

No ectopic mineralization

No osteosarcomas

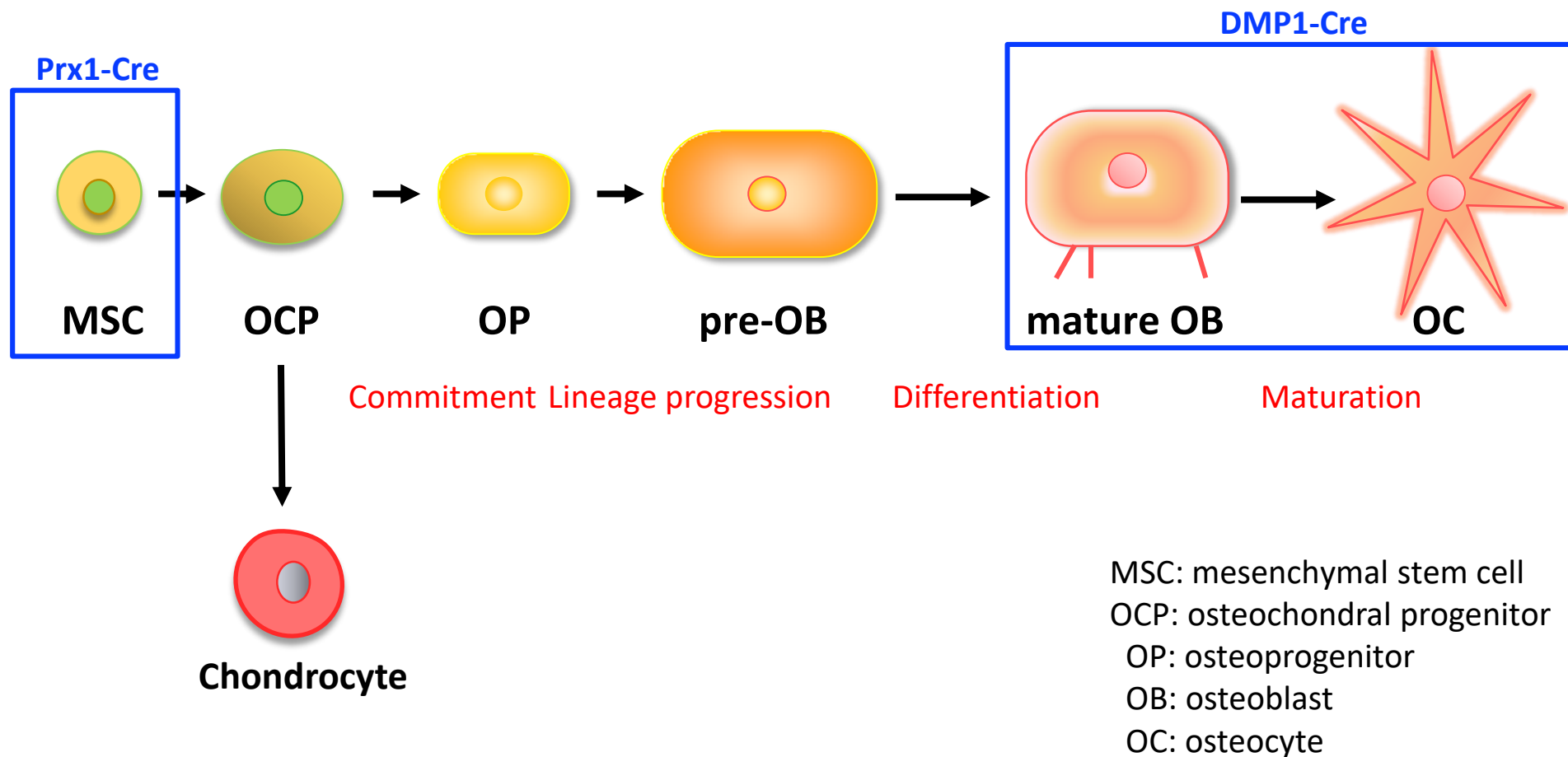
Normal joints

No metabolic abnormalities

Increased bone formation rate

Normal bone mineral density distribution (increased with age)

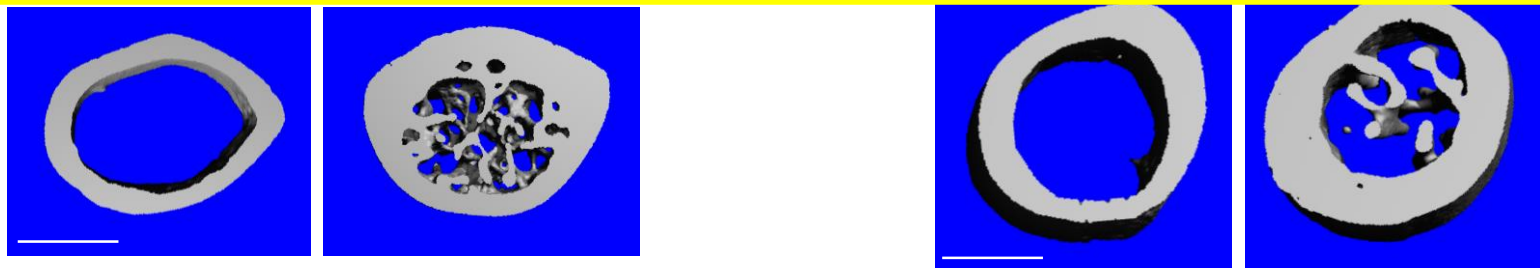
Cre-transgenic mice targeting different stages of osteoblast differentiation



Deletion of SHN3 in MSCs or in mature OB/osteocytes increases bone mass in mice



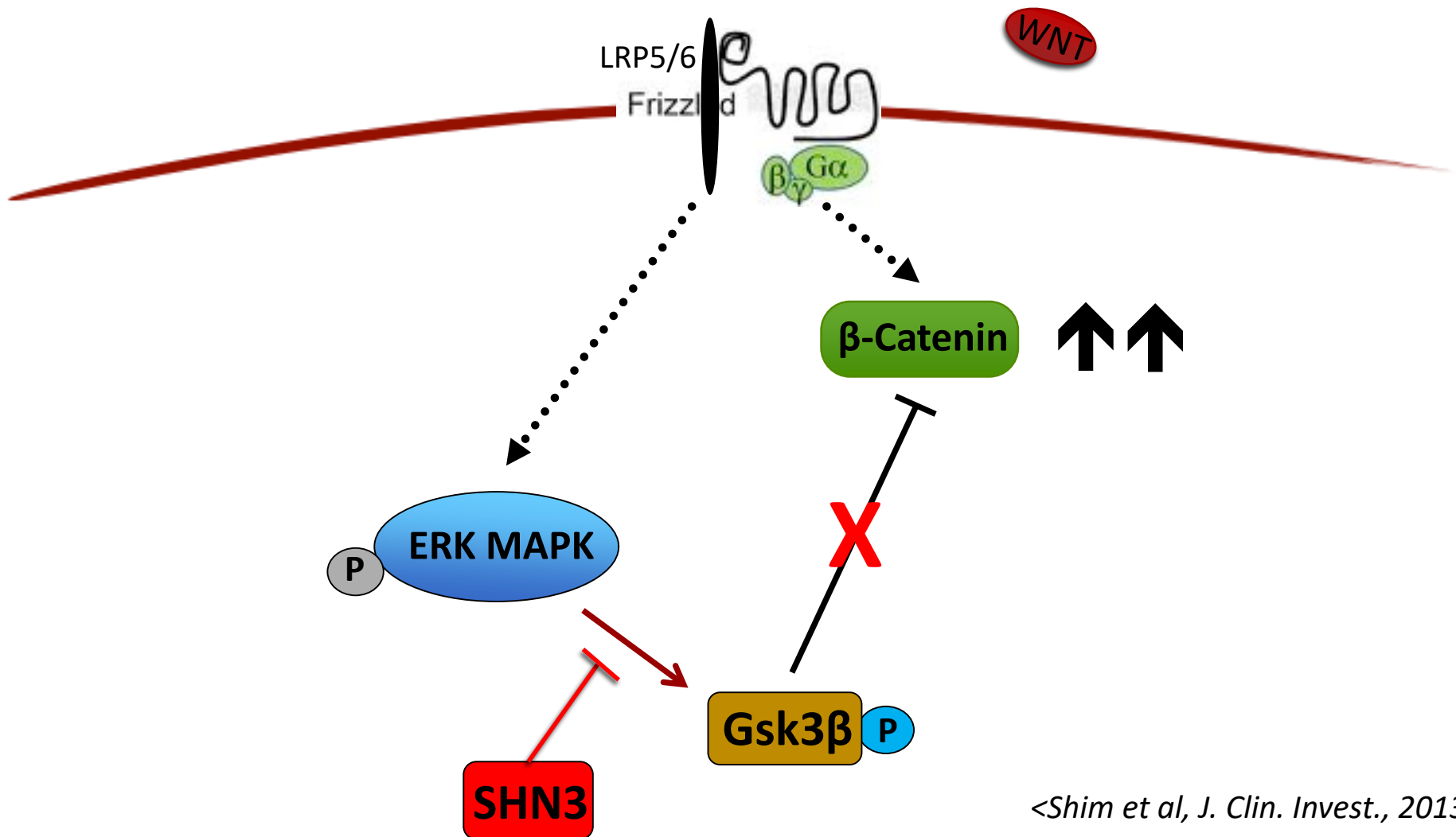
SHN3 function is intrinsic to osteoblasts



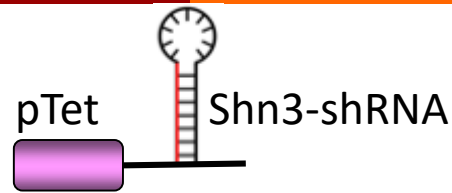
<Wein et al., PNAS, 2012>

<Xu et al., Nat. Med, 2018>

SHN3 controls WNT signaling in osteoblasts

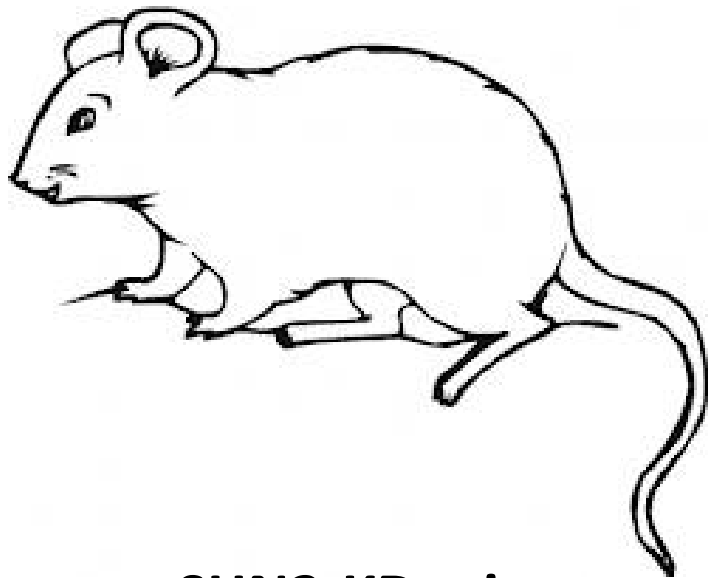
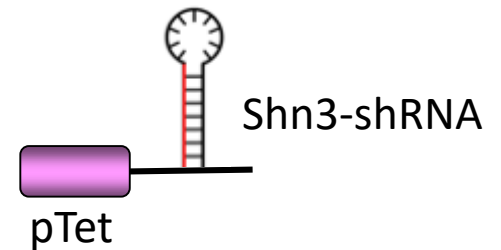


Transgenic mice with inducible knockdown of SHN3

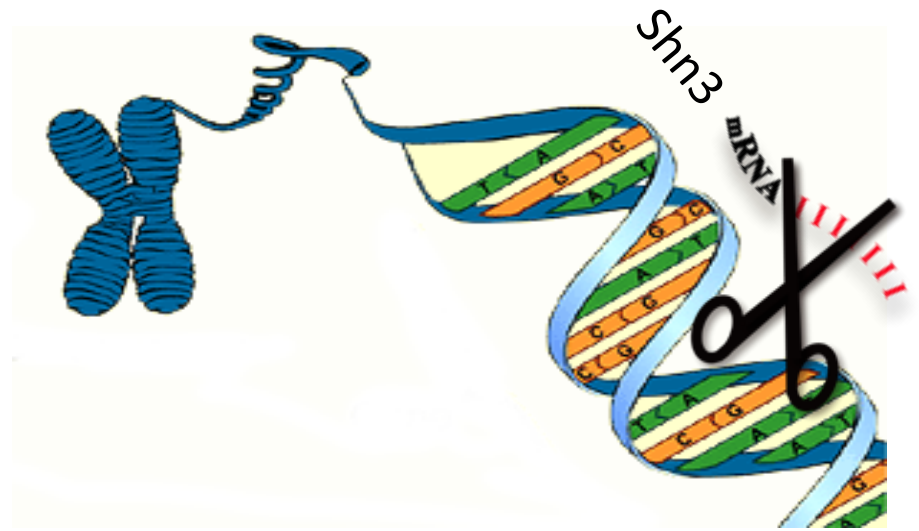


Doxycycline-containing food (6 week treatment)

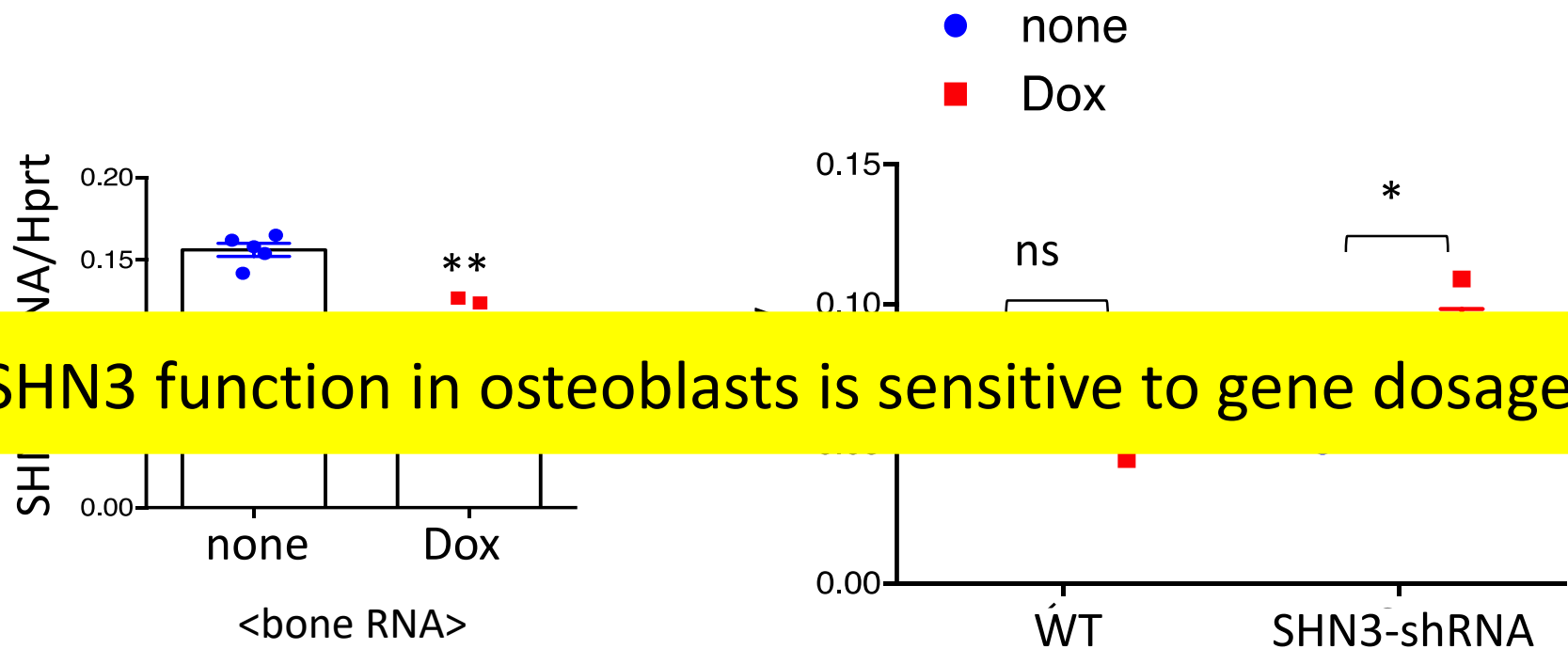
Dox



**SHN3-KD mice
(8 week old)**

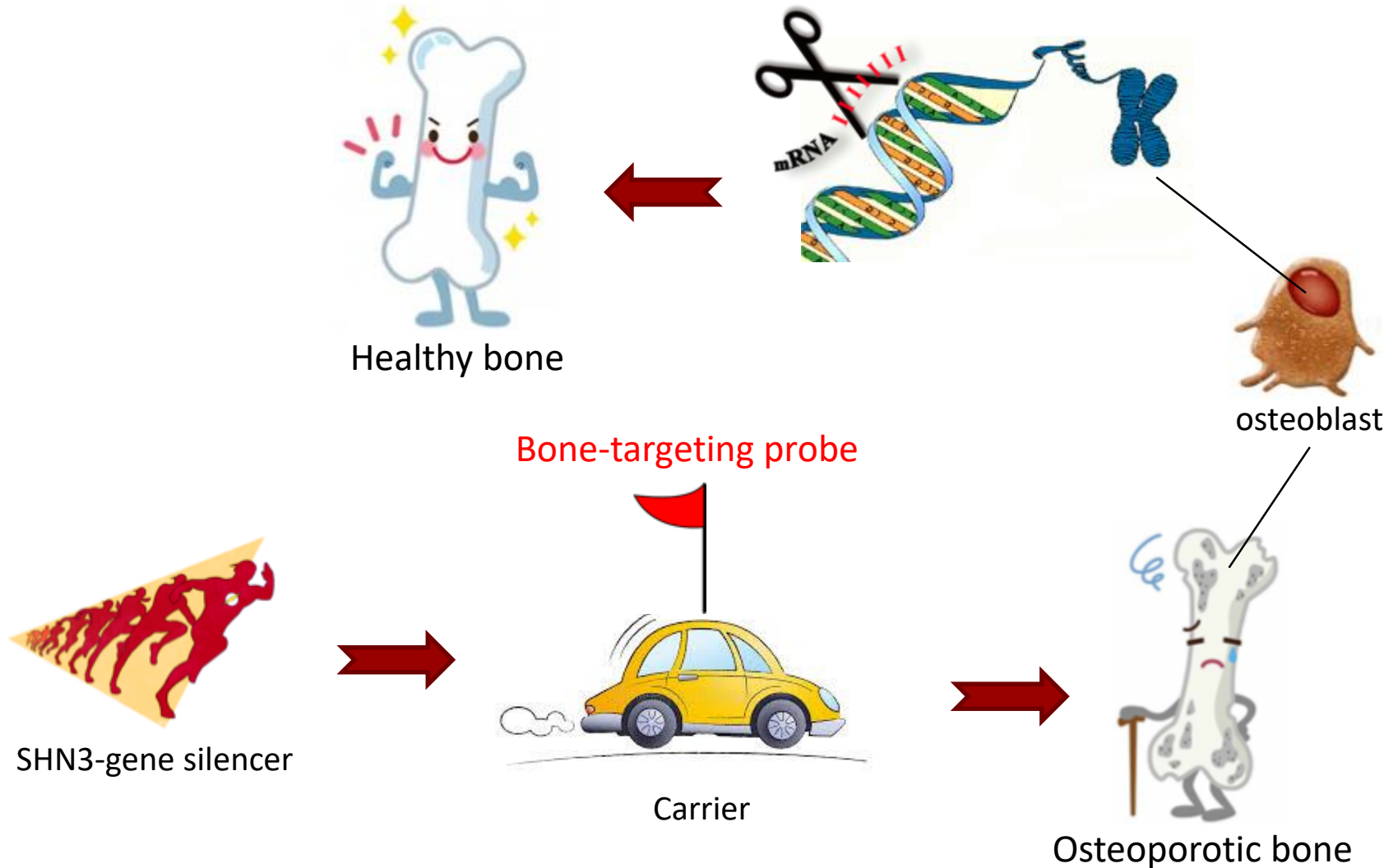


Short-term silencing of SHN3 in adult mice increases bone mass

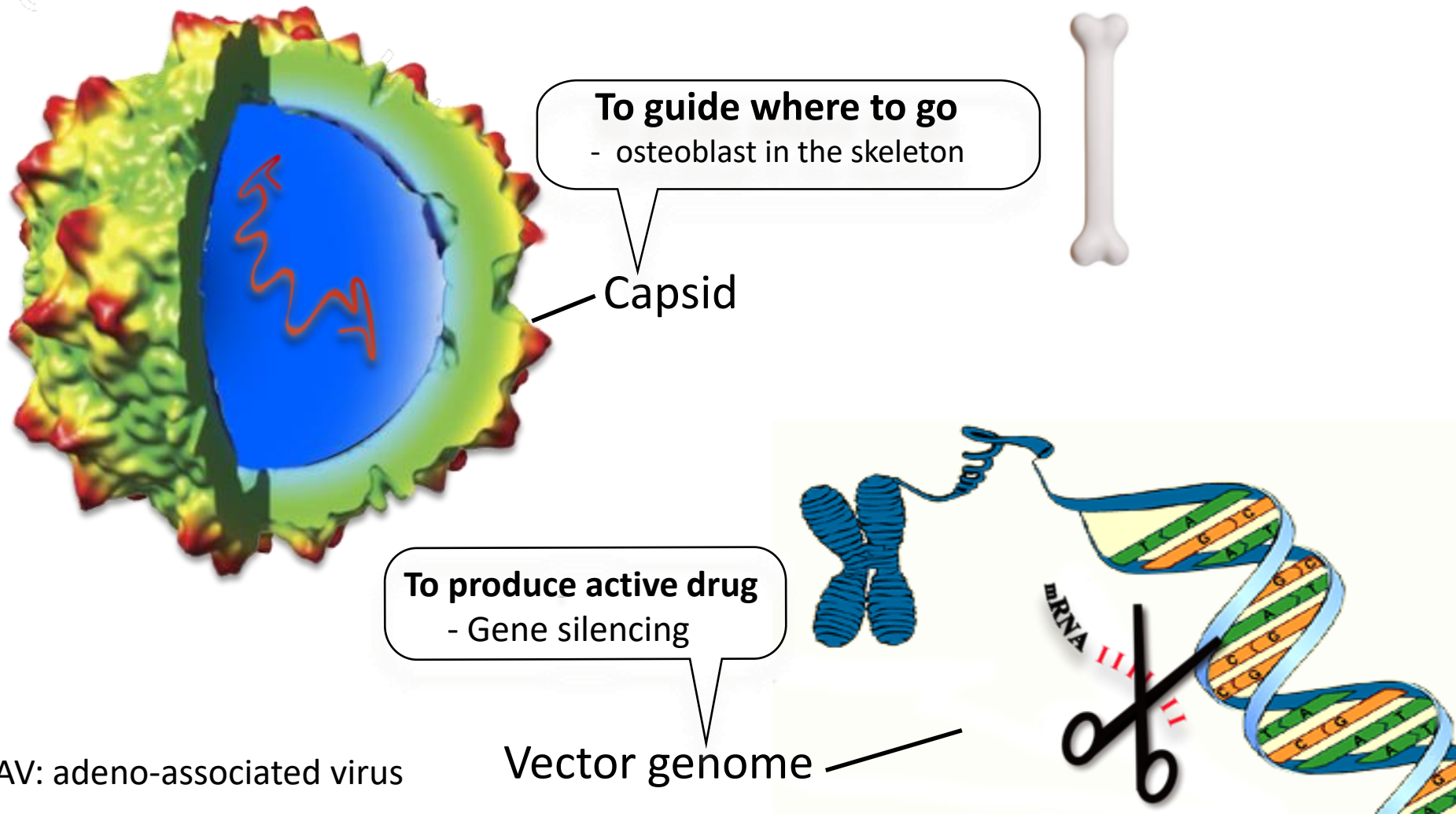


SHN3 function in osteoblasts is sensitive to gene dosage

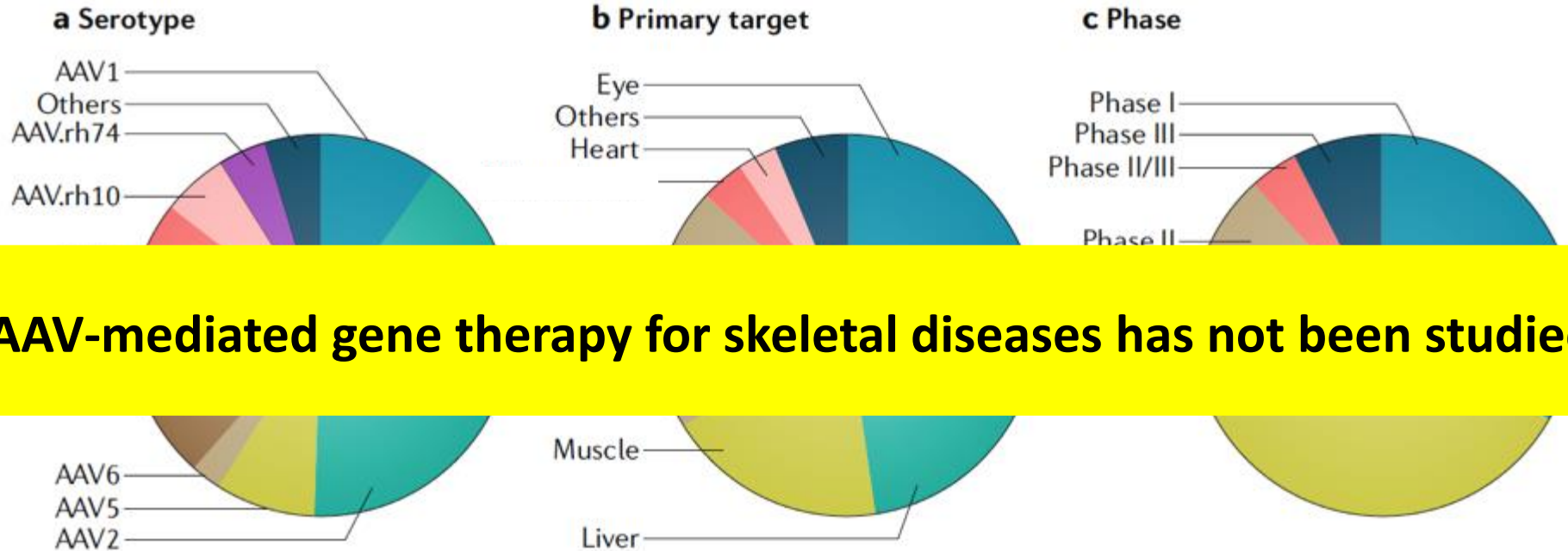
Strategy to develop gene therapy for skeletal diseases



AAV-mediated delivery of gene silencer to bone

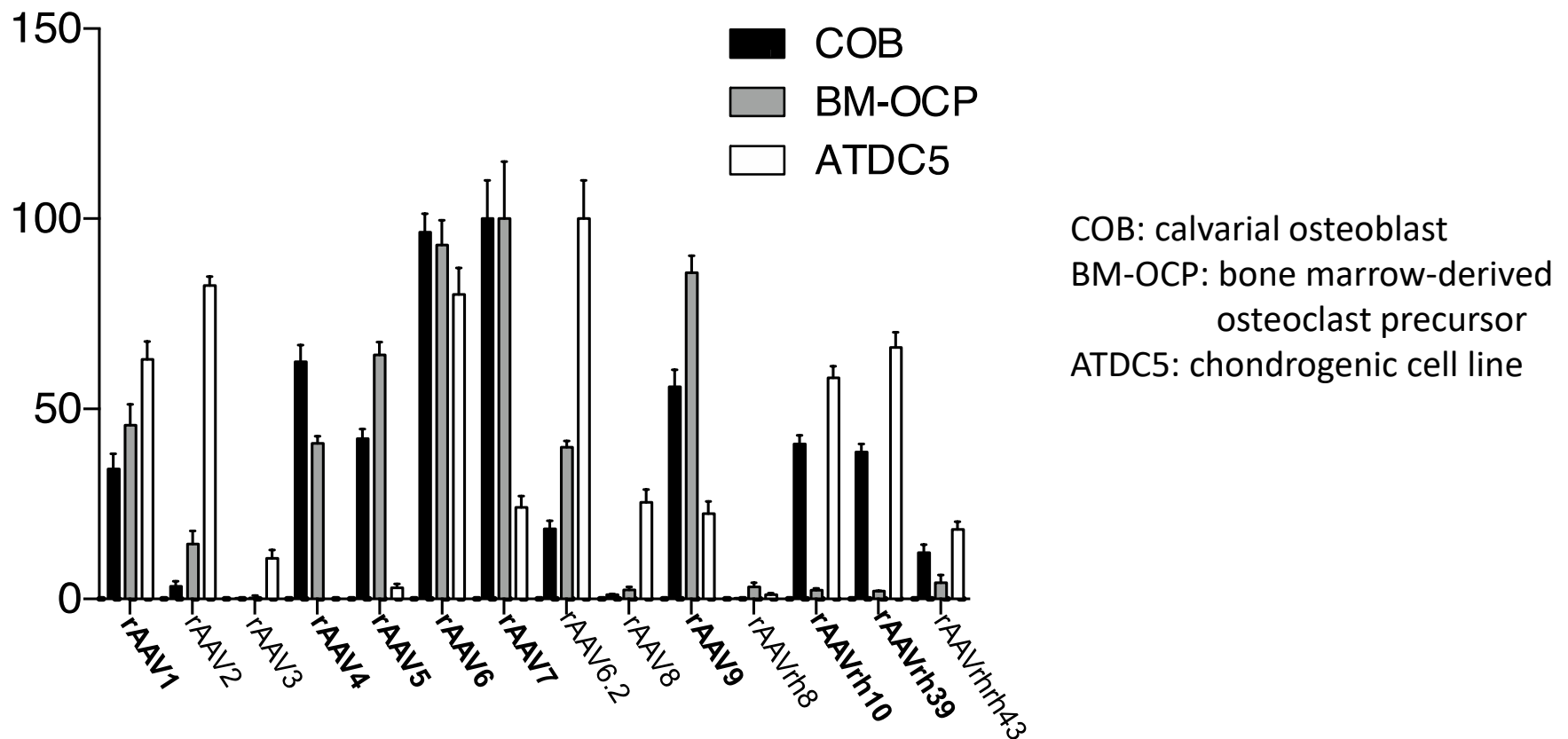


Current Gene Therapy Clinical Trials



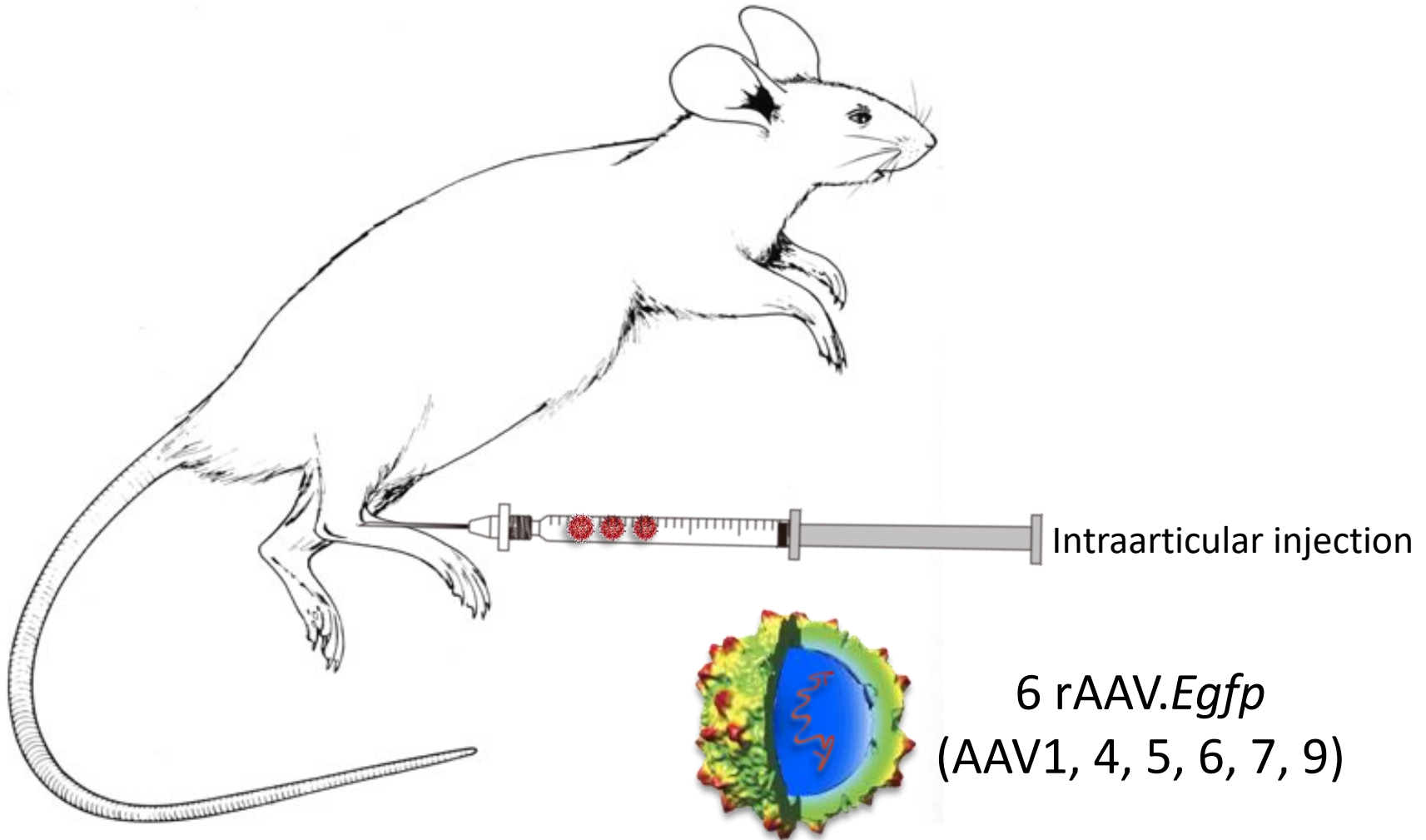
Currently, 145 clinical trials have been registered at [ClinicalTrials.gov](https://clinicaltrials.gov)

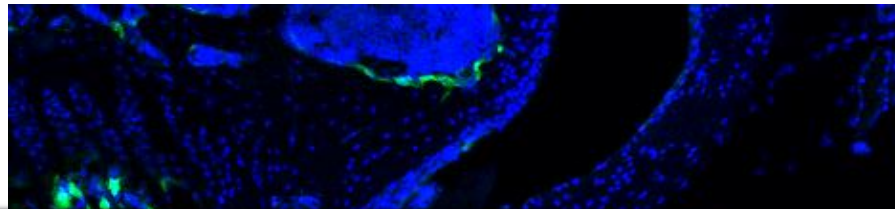
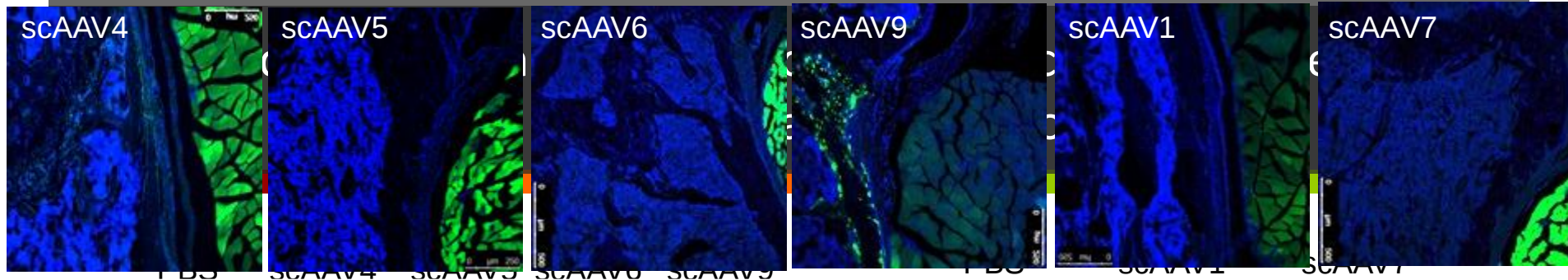
Identification of AAV serotypes that transduce bone cells (*in vitro*)



6 rAAV serotypes (AAV1, 4, 5, 6, 7, and 9) can transduce osteoblasts and osteoclasts

Identification of rAAV serotypes that can transduce osteoblasts and osteoclasts in the bone (*in vivo*)

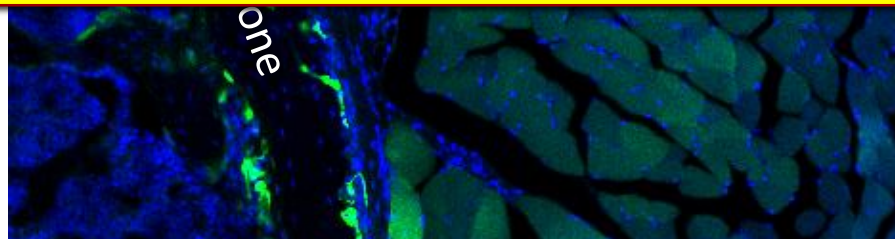




AAV9 is currently used in multiple human clinical trials

rAAV9-mediated gene transfer is safe in human (clinical phase 1)

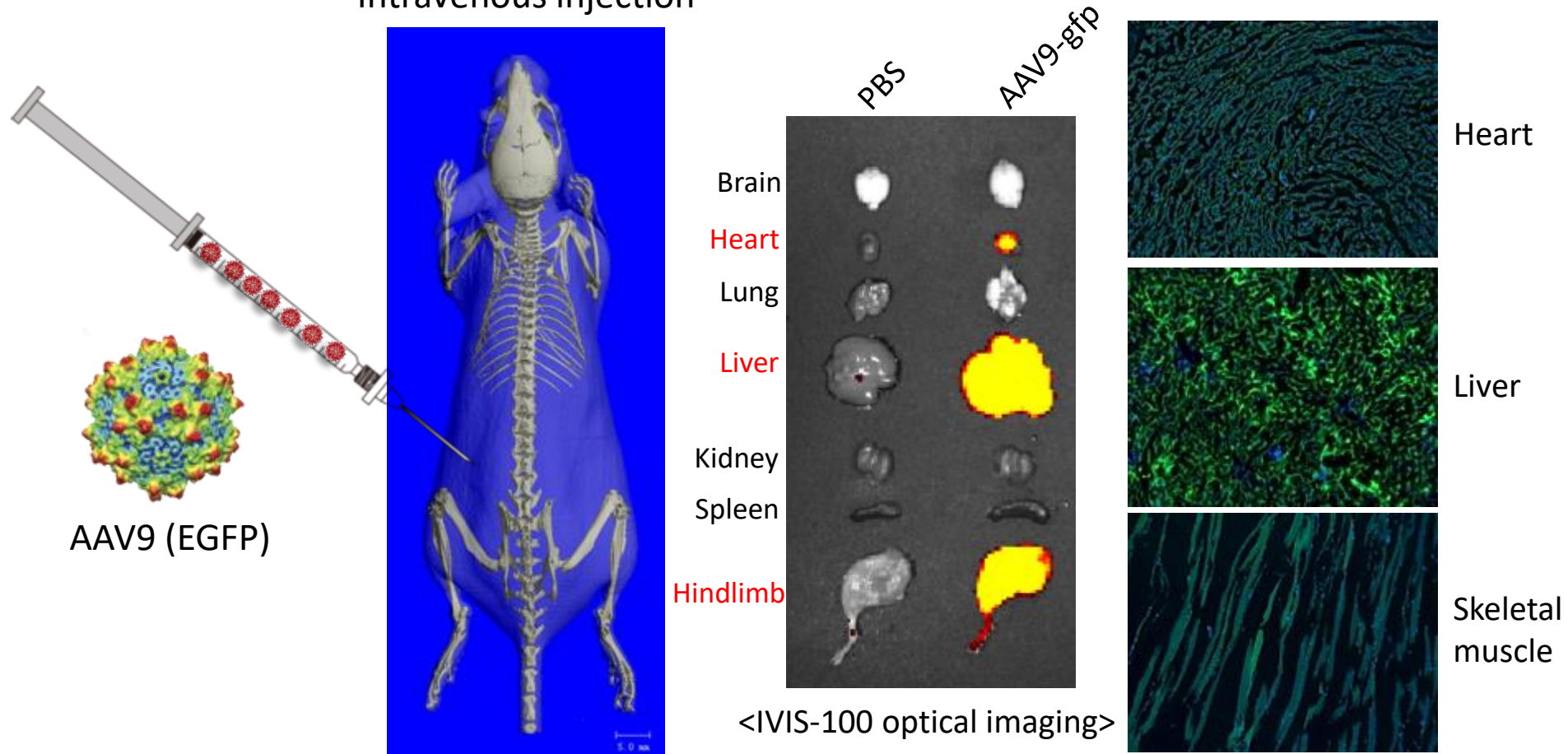
4. Sanfilippo syndrome type A (MPS IIIA) : Clinical phase 2/3, Sarepta Therapeutics
5. Mucopolysaccharidosis IIIB: Clinical phase 1/2, Abeona Therapeutics



AC: articular cartilage

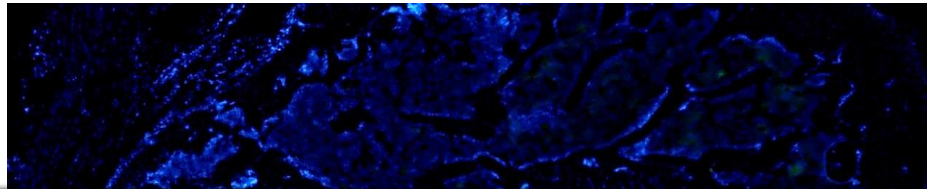
Systemically delivered rAAV9 transduces liver, heart, and skeletal muscle

Intravenous injection

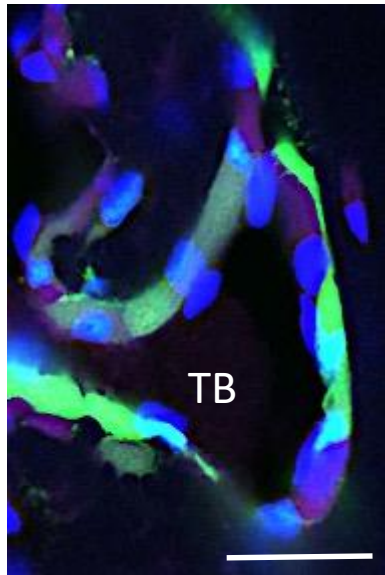


<3 month old female mice 2 week post-injection>

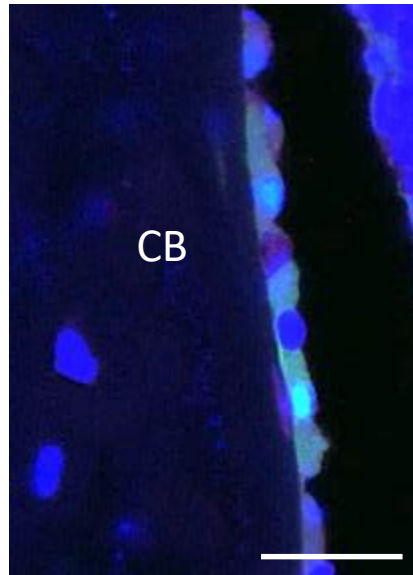
Systemic delivery of rAAV9 to skeleton in mice



osteoblast

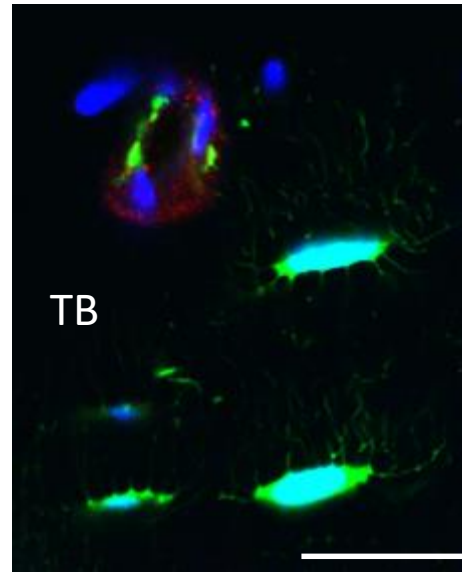


IF-Runx2



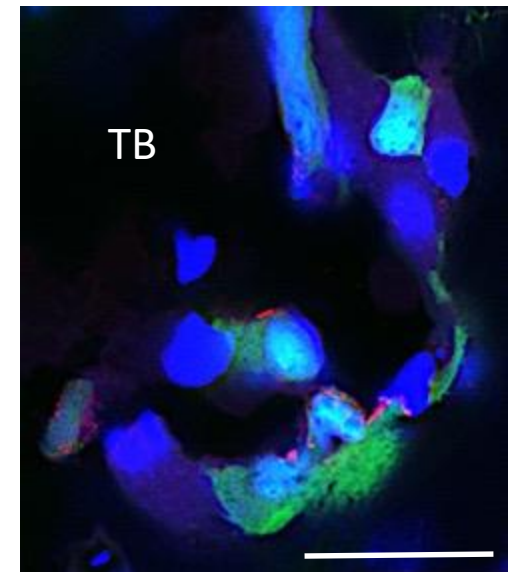
IF-Bglap

osteocyte



IF-Sost

osteoclast



IF-Ctsk

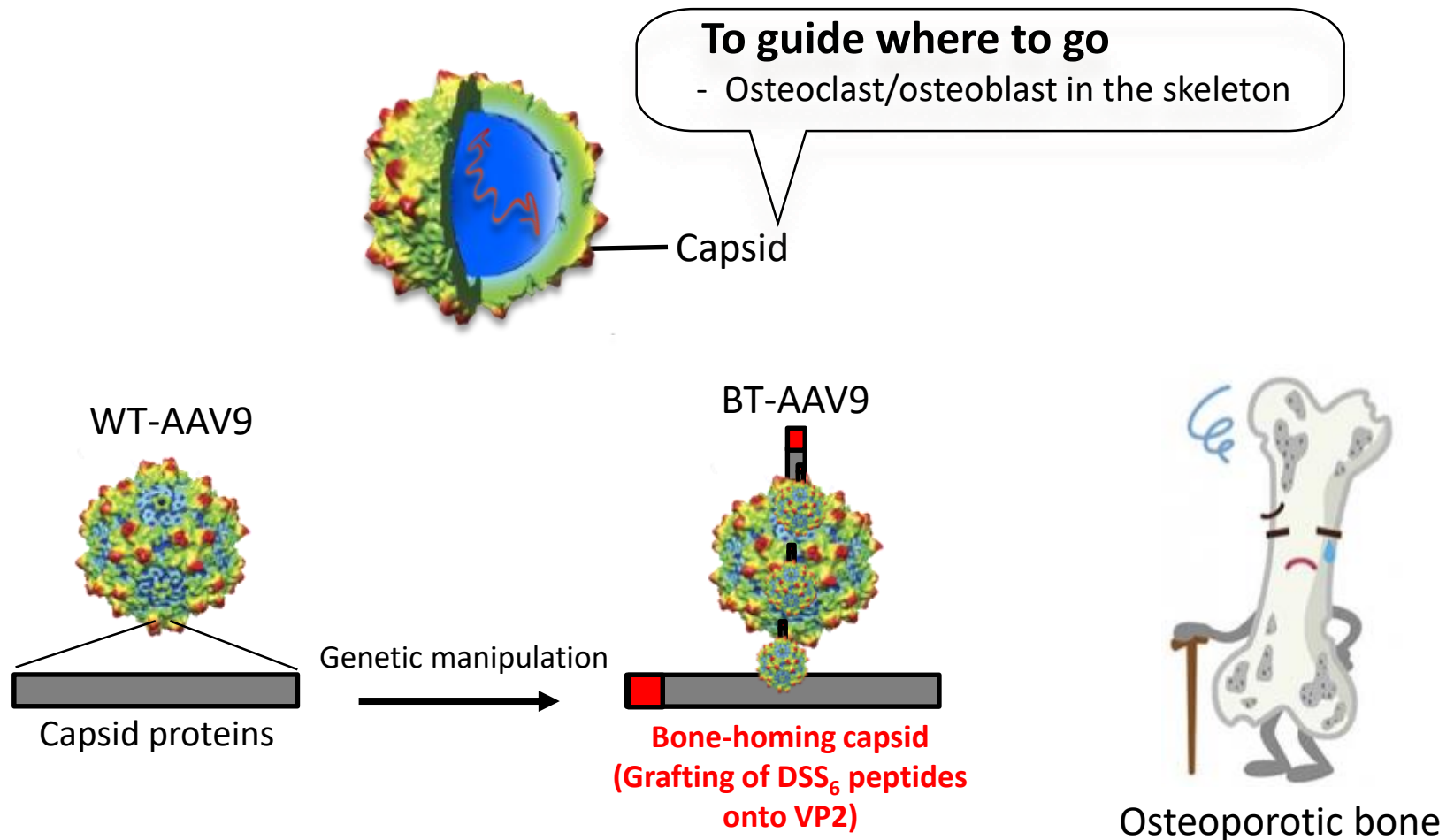
Femur



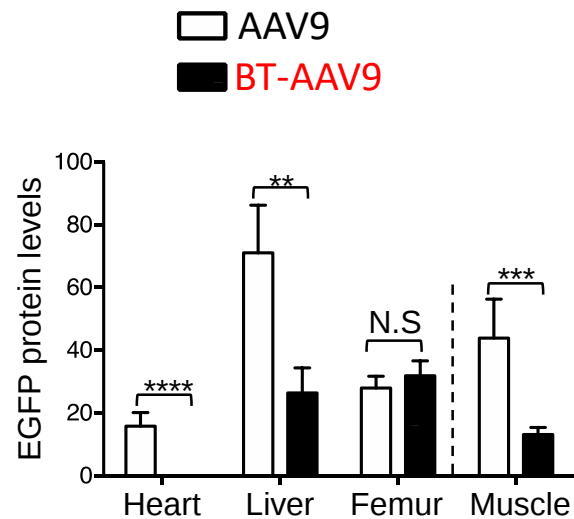
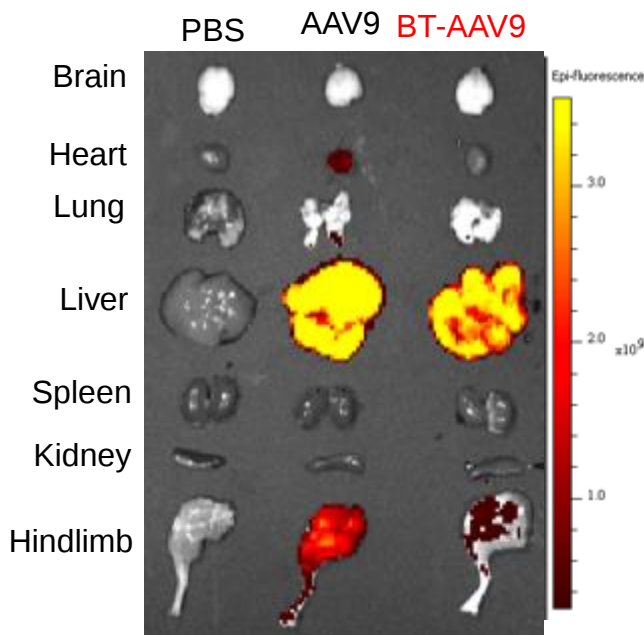
Vertebrae (L4)



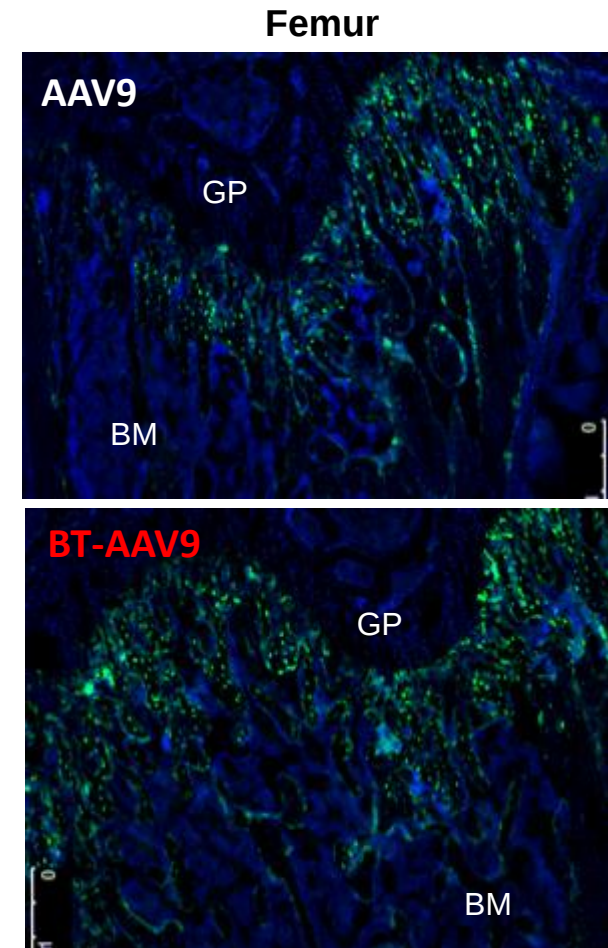
Development of bone-targeting AAV9



Bone-homing specificity is enhanced in BT-AAV9



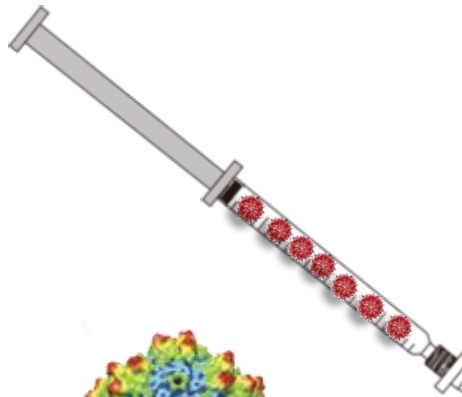
WB: GFP



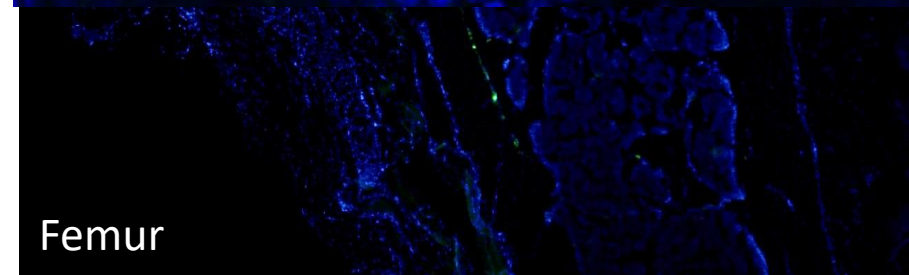
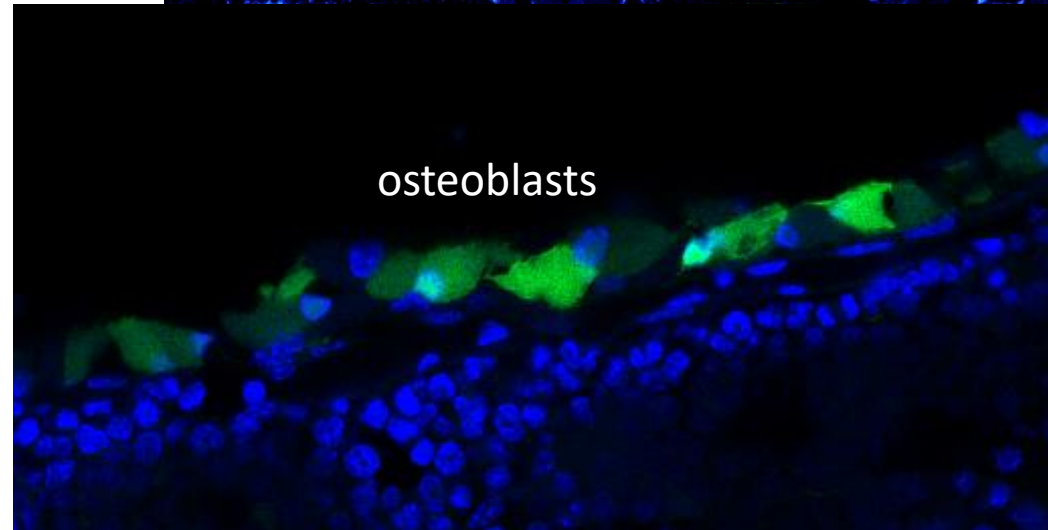
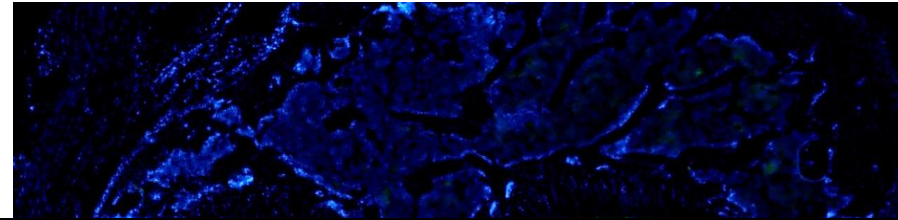
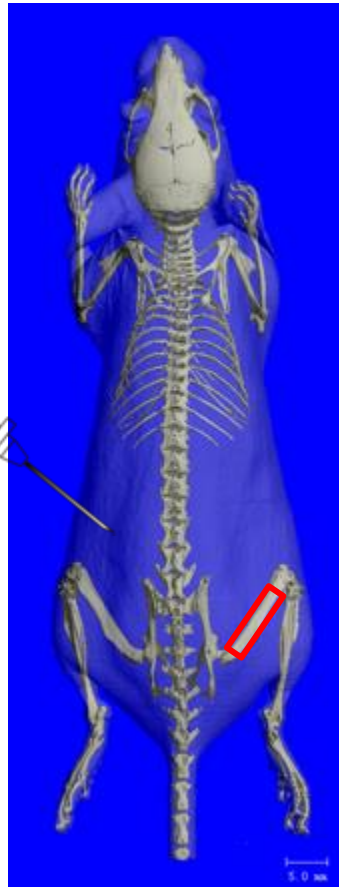
GP: growth plate
BM: bone marrow

BT-AAV9 carrying SHN3 silencer targets osteoblast lineage cells following systemic delivery

Intravenous injection



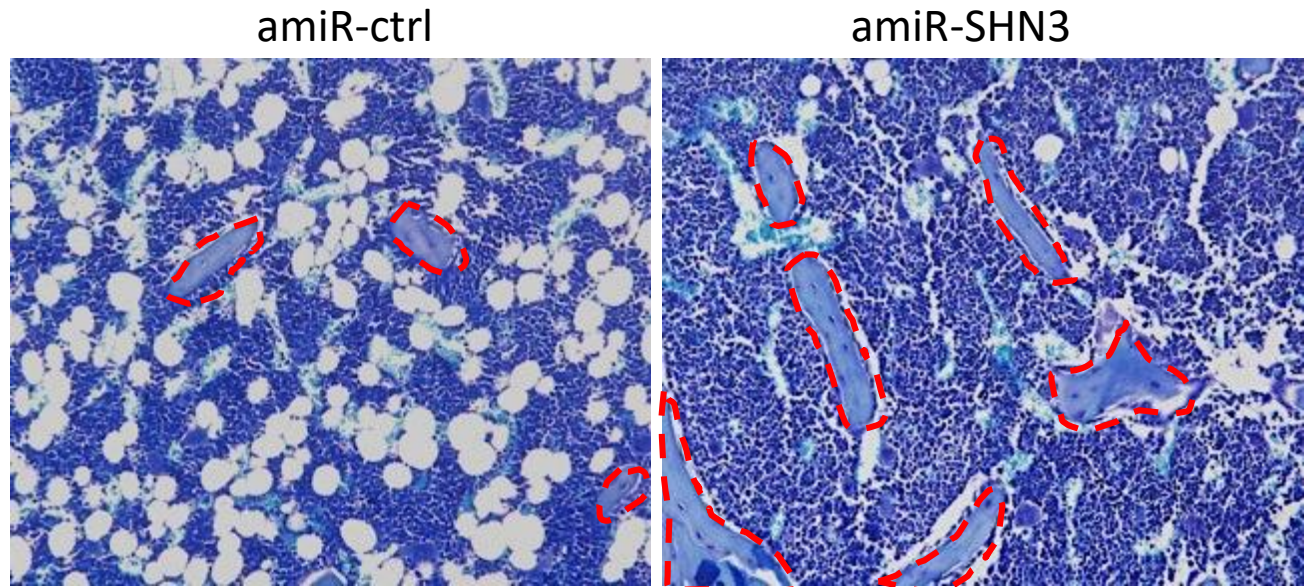
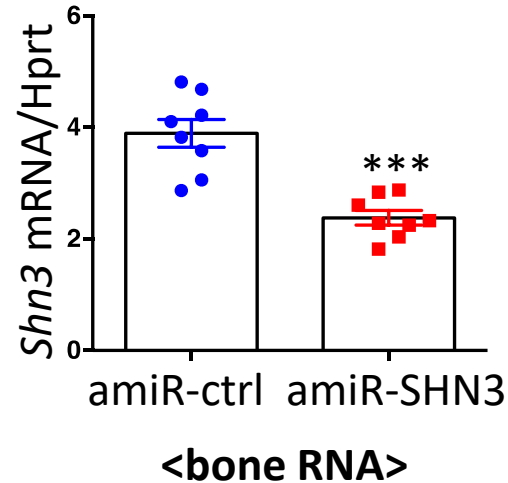
BT-AAV9
(amiR-SHN3)



Femur

amiR: artificial miRNA

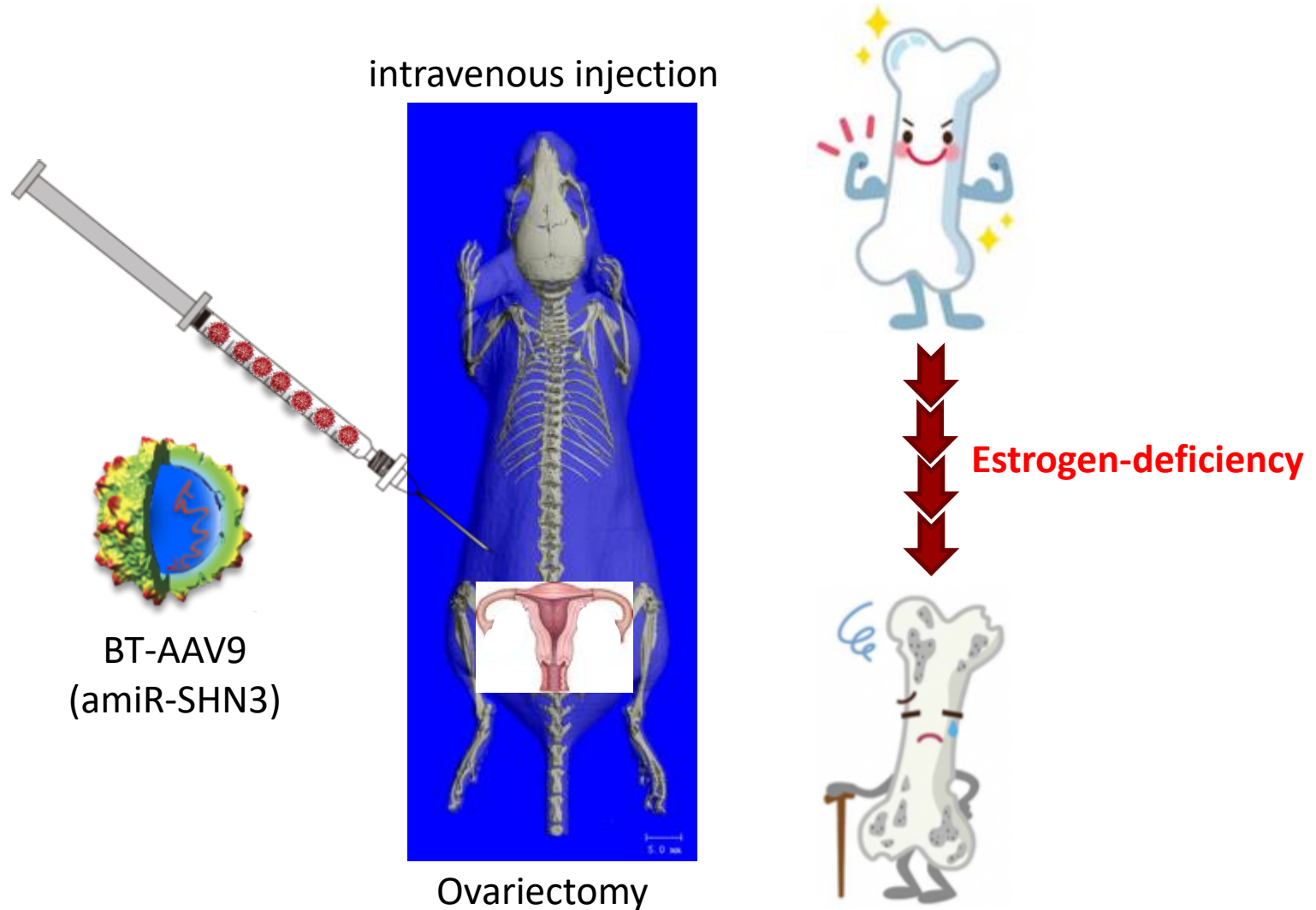
AAV-mediated silencing of SHN3 increases bone mass in mice



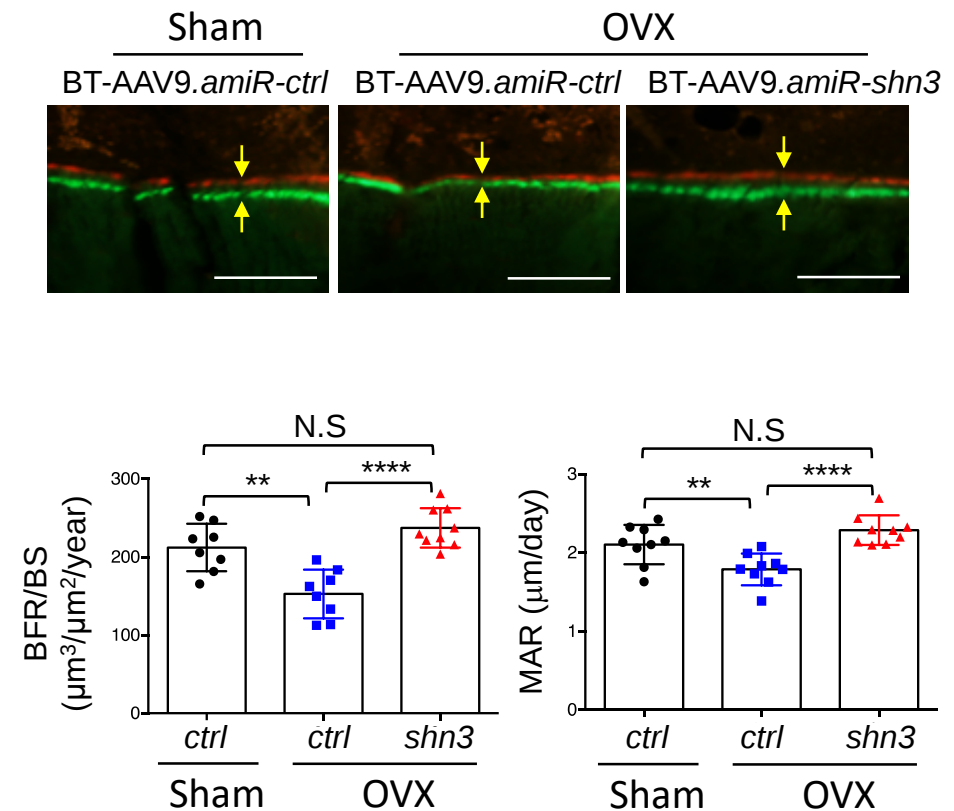
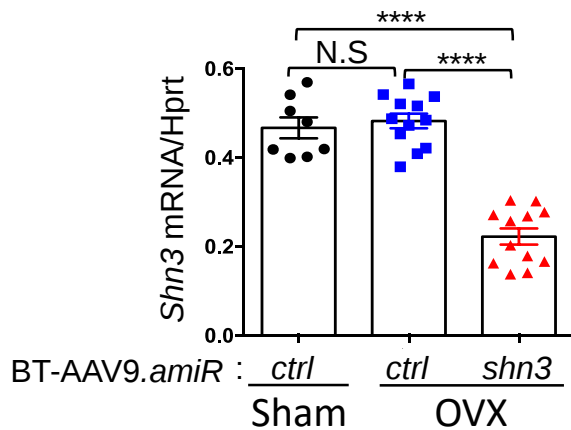
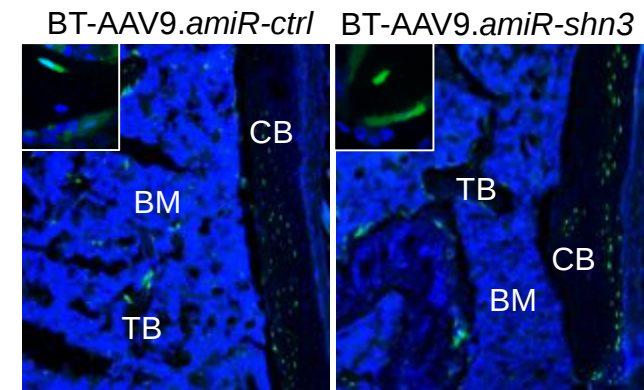
-  Trabecular bone (increase)
-  Bone-marrow fat (decrease)

Mouse model of postmenopausal osteoporosis

(estrogen deficiency-induced osteoporosis in postmenopausal women)

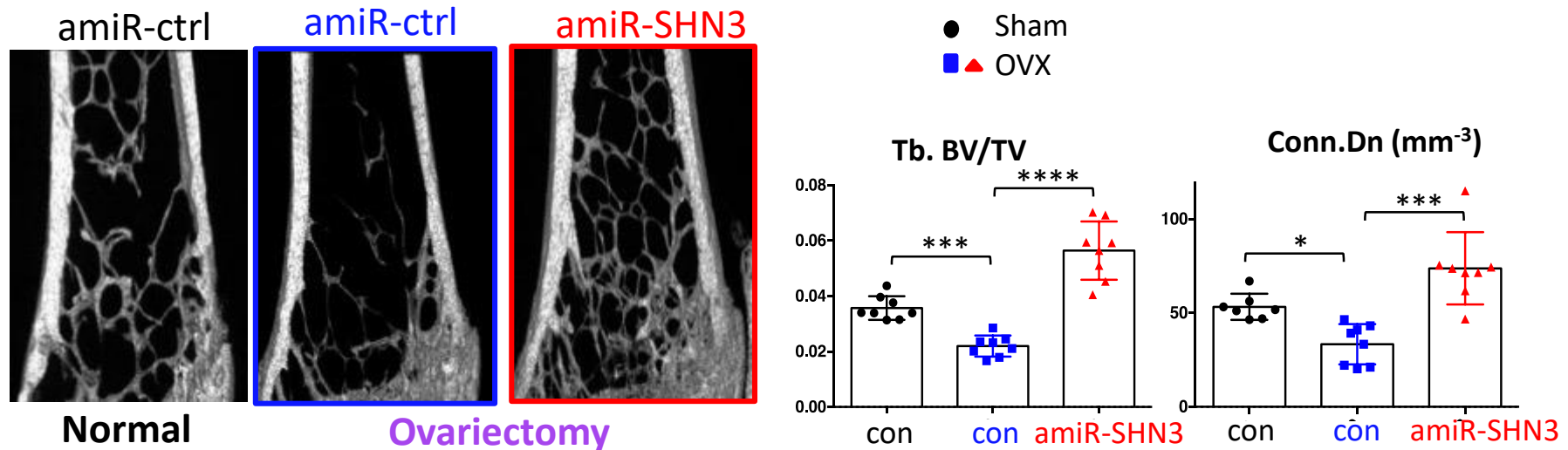


BT-AAV9-mediated silencing of SHN3 promotes bone formation in postmenopausal osteoporosis

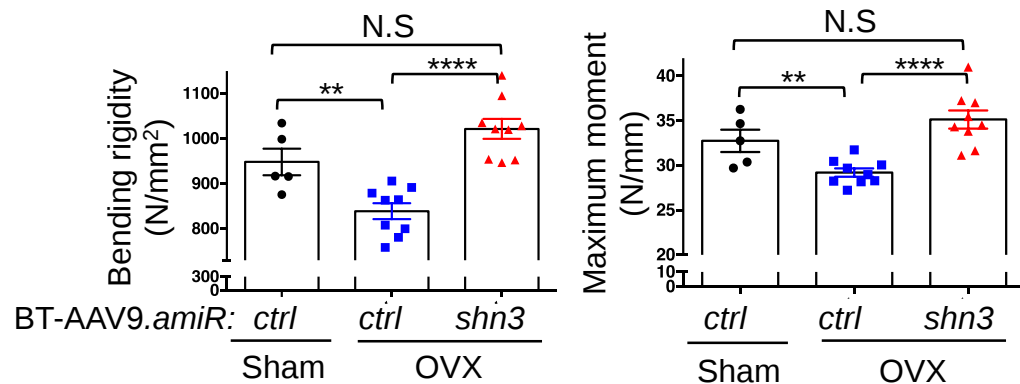


<Dynamic histomorphometric analysis on the femoral metaphysis>

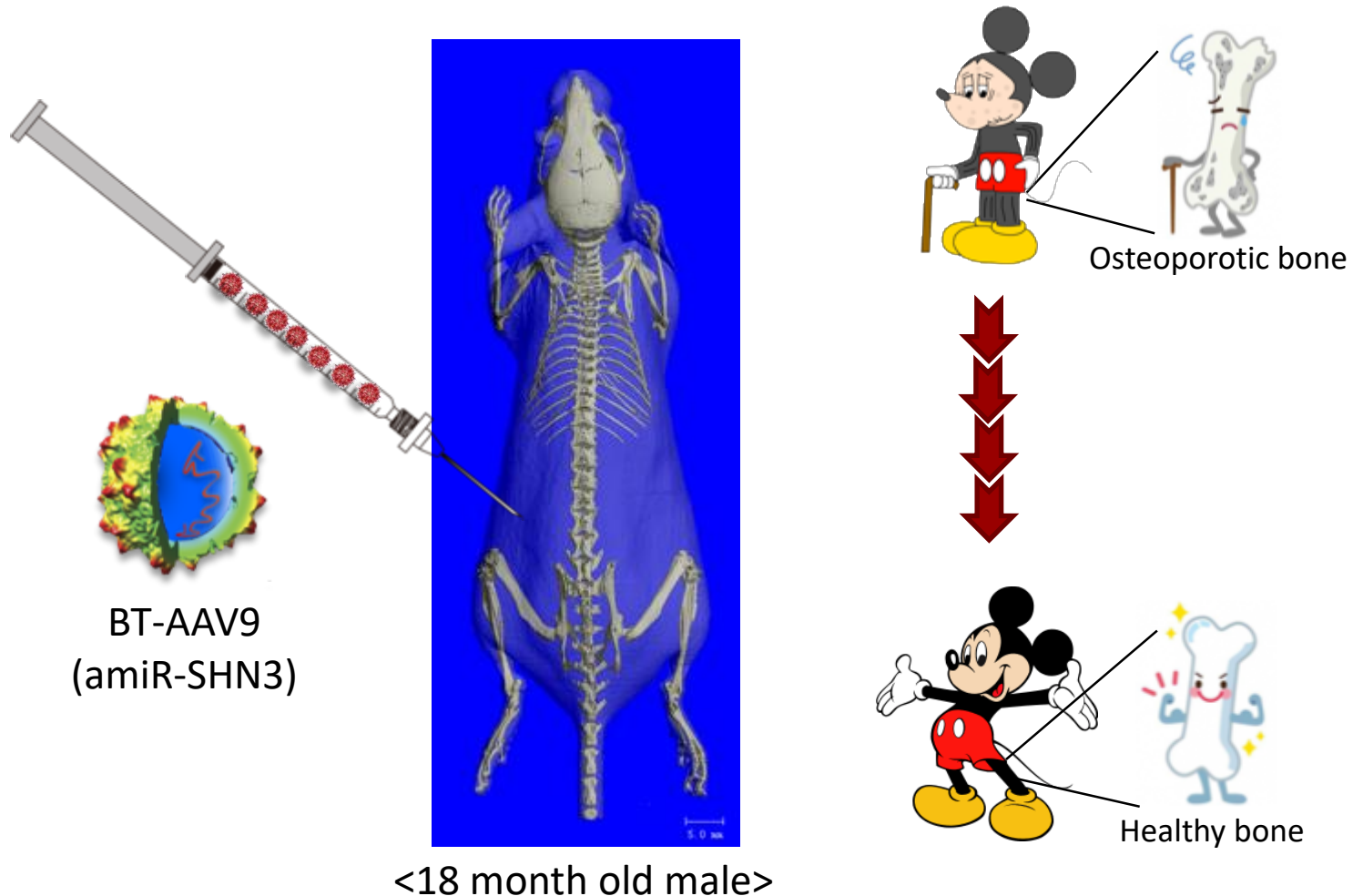
BT-AAV9-mediated silencing of SHN3 reverses bone loss in postmenopausal osteoporosis



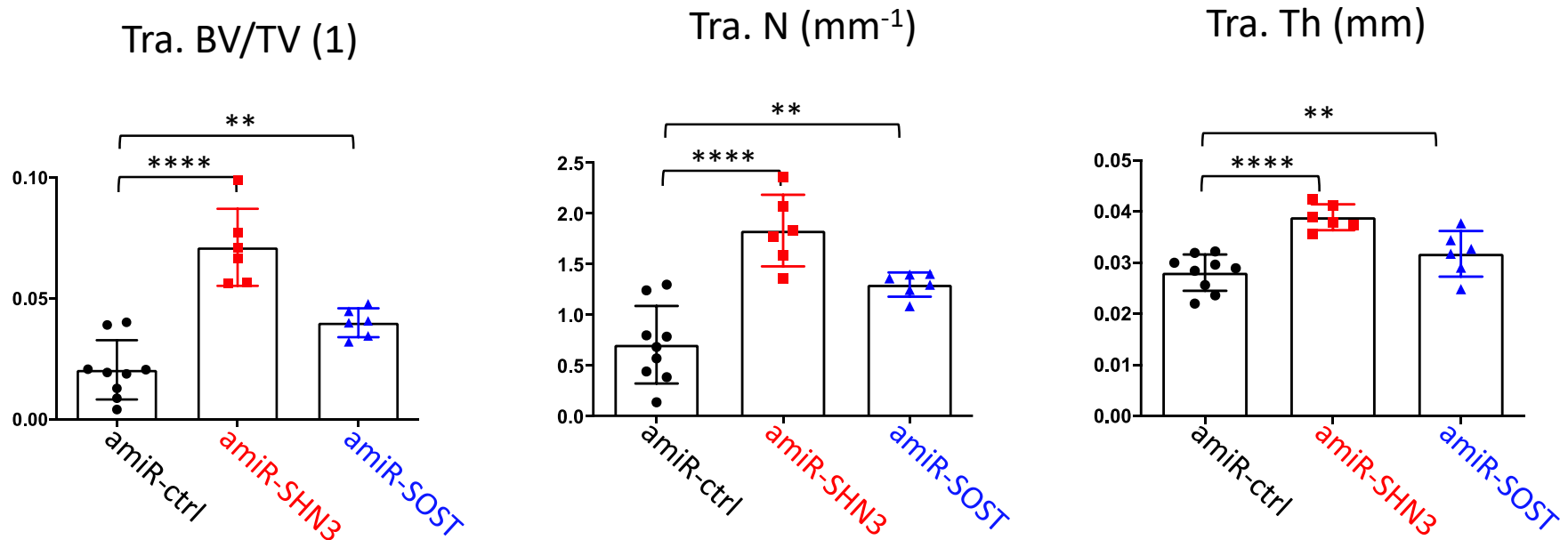
<Three-point bending test>



Mouse model of aging-associated osteoporosis

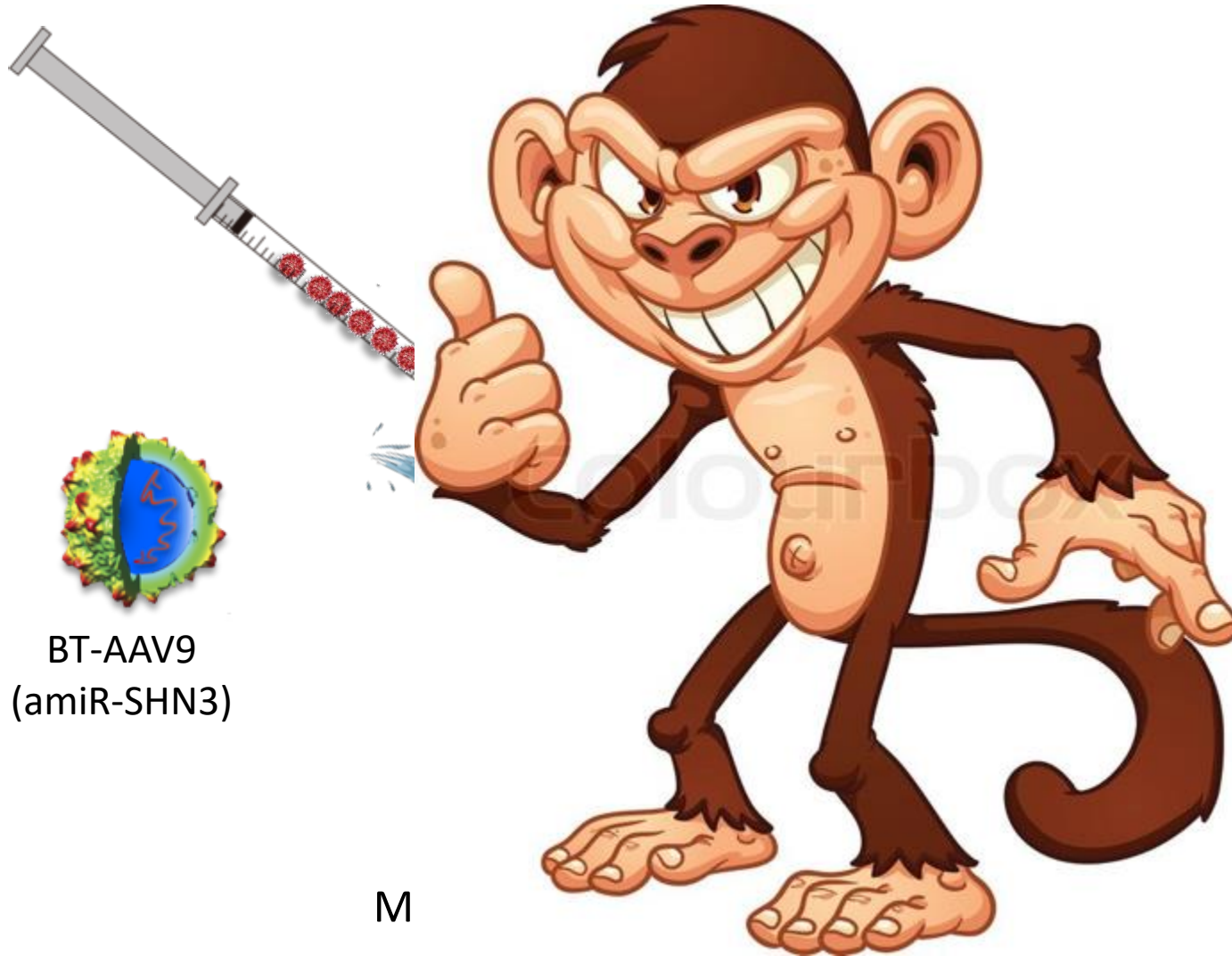


AAV-mediated gene therapy prevents aging-associated osteoporosis



Romosozumab (Evenity): humanized anti-sclerostin antibody (FDA-approval, 2018)

Therapeutic effects of BT-rAAV9.amiR-SHN3 on large animals with osteoporosis



BT-AAV9
(amiR-SHN3)

acture
ne mass

Acknowledgement

Shim lab

Yeon-Suk Yang

Jungmin Kim

Zheni Stavre

Chujiao Lin

Sachin Ramdas

Aijaz Bhat

Wontaek Oh

Oksun Lee

William Song

Moulika Bandaru

Gao lab

Jun Xie

Phillip Tai

Dan Wang

Bone Analysis Core

Viral Vector Core

AAVAA Therapeutics

JiHea Kim

Yeon-Suk Yang

Wontaek Oh

Brigham Women's Hospital

Dr. Ellen Gravalles

Weill Cornell Medicine

Dr. Ching Tung

Dr. Seung-Koo Lee

Yonsei Severance Hospital

Dr. Kwanhwan Park

Dr. Suk-Kyo Seo

KAIST

Dr. Hyonho Chun

NIH-R01 AR068983, R21 AR072836, R21 AR073331

SRAs: Glory Harvest Group and AAVAA Therapeutics