

Oligonucleotides: important therapeutic agents

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Conflict of Interest

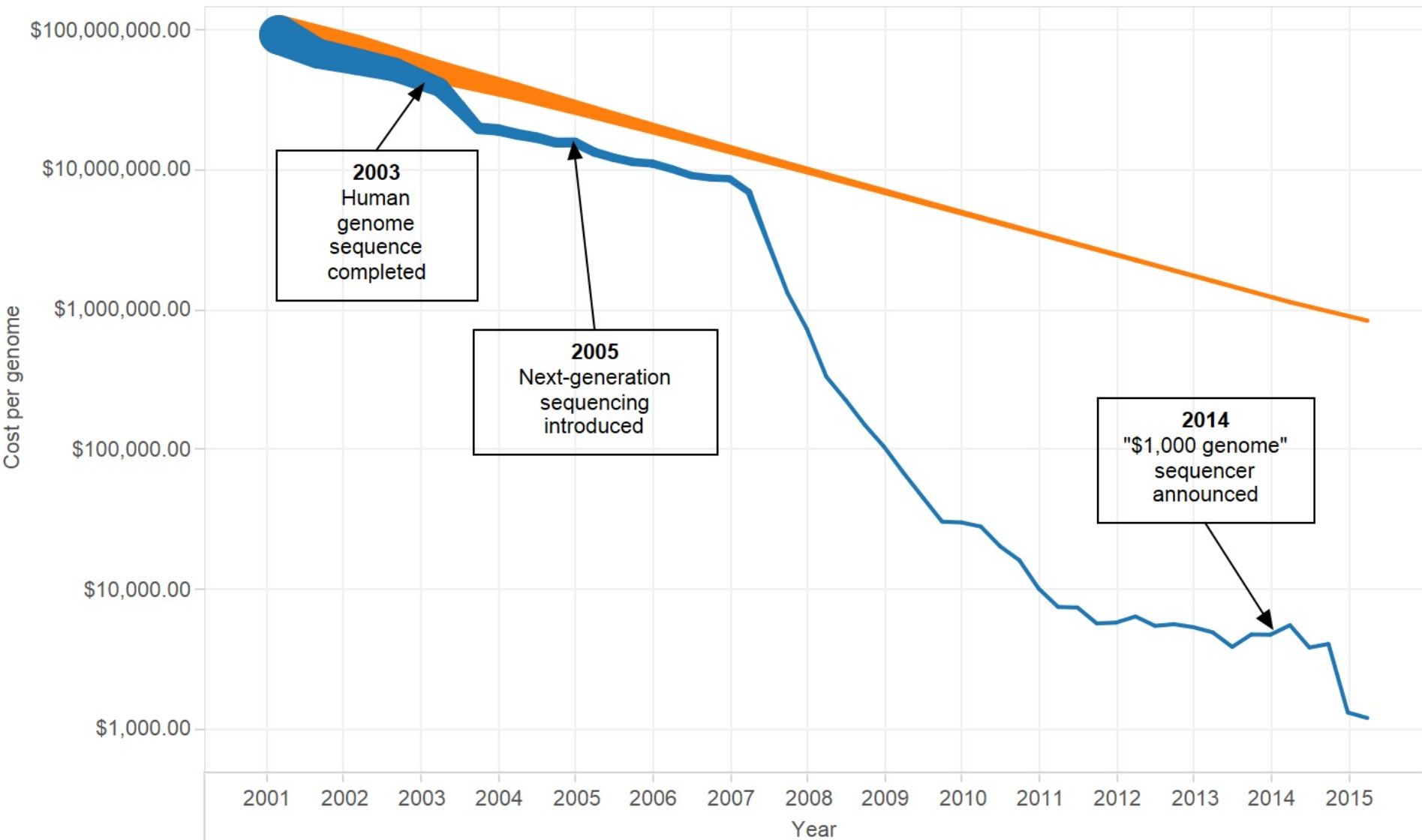
Alnylam Pharmaceuticals—co-Founder,
Stock holder, Member of Board of
Directors, and Chair of Scientific
Advisory Board

Biotechnology—new therapeutic modalities

| | |
|-----------|-------------------------------|
| 1980-1990 | Interferons, protein hormones |
| 1990-2000 | Monoclonal antibodies |
| 2000-2010 | Oligonucleotides, siRNA |
| 2010-2020 | CRISPR, cell therapy |

Gene Therapy (1980–2020)

DNA sequencing costs over time



Information science for medical care- Kendall Square



Human genetic- disease genes

1. ~3,000 Mendelian disease genes known
2. ~8% of live births- genetic disorder by early adulthood
3. Estimated- each child with genetic disorder ~costs \$5,000,000
4. Diagnostic rate of genetic disorders:
children ~11%, adults ~34%

Recent advances in Spinal Muscular Atrophy (SMA)

Emma
walks!

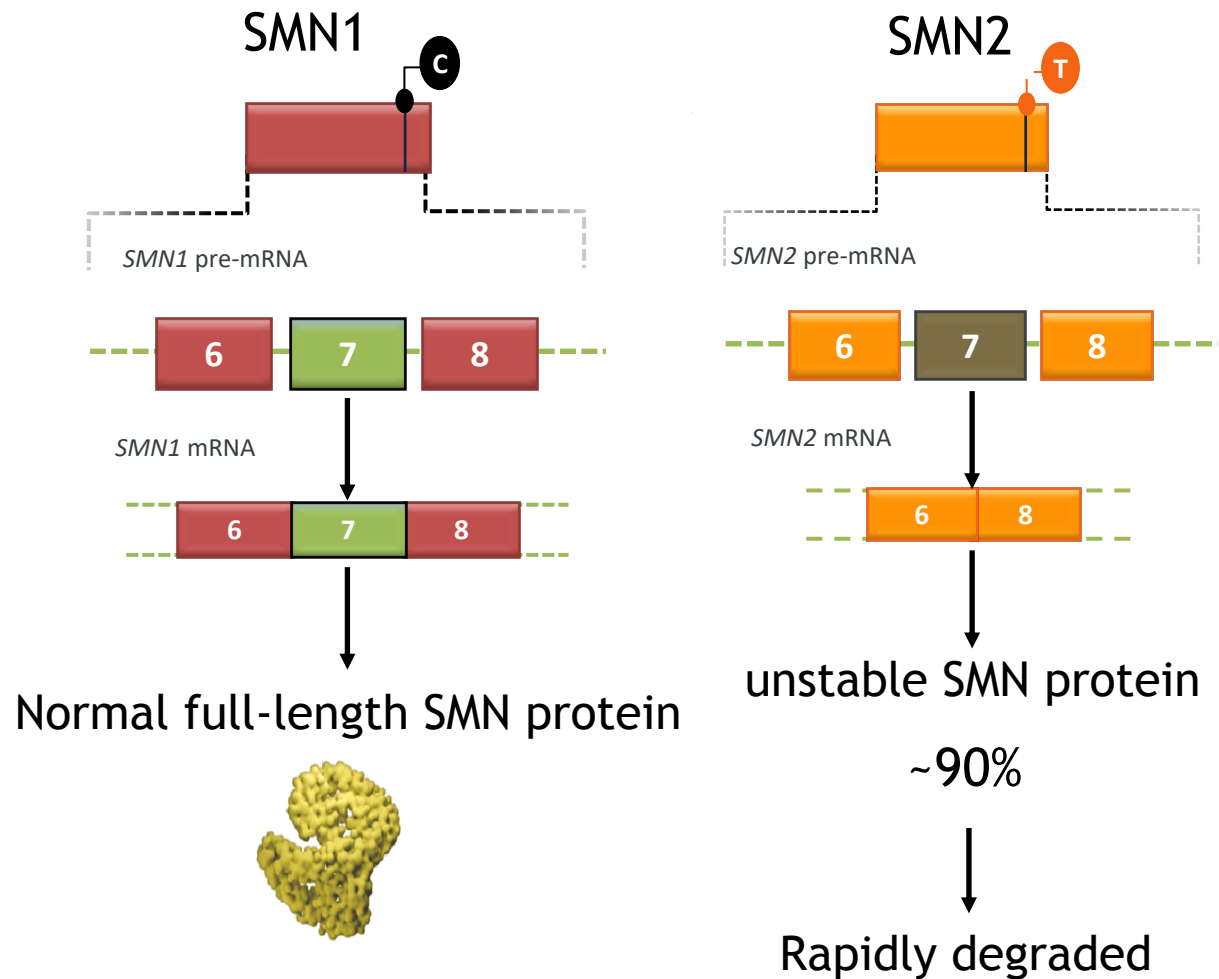


Harbor Transcript
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Kathy Kmonicek/CSHL

Summary of the genetics of SMA

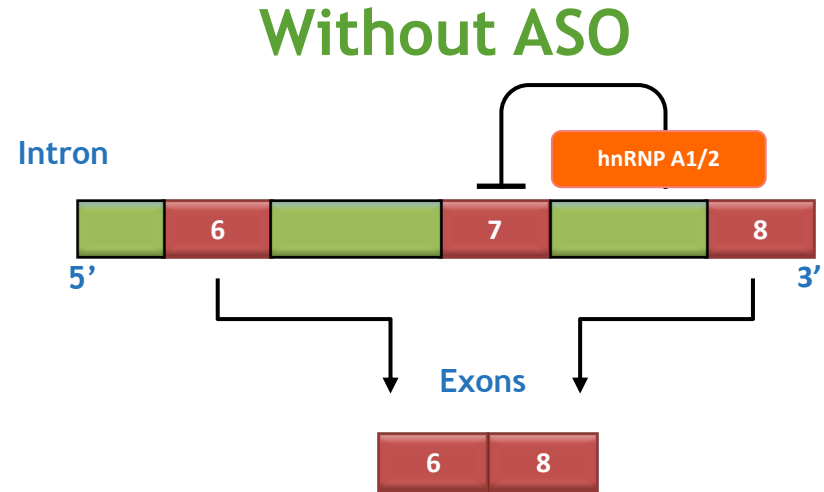
- SMN1 gene-survival motor neuron
- SMA patients-mutation in SMN1 gene
- SMN2 gene or genes- poorly expressed
 - Defect in RNA splicing



C, centromeric; gDNA, genomic deoxyribonucleic acid; mRNA, messenger RNA; pre-mRNA, precursor messenger RNA; SMA, spinal muscular atrophy; SMN, survival motor neuron; T, telomeric. 1. d'Ydewalle C & Sumner CJ. Neurotherapeutics. 2015;12:303-316; 2. Prior TW & Russman BS. GeneReviews®. <http://www.ncbi.nlm.nih.gov/books/NBK1352/>. Accessed Mar 2016; 3. Lunn MR & Wang CH. Lancet. 2008;371:2120-2133

ASOs can modify splicing of SMN2

- Antisense Oligonucleotide (ASO) to intron 7- inclusion of exon 7
- Inclusion of exon 7- functional SMN protein

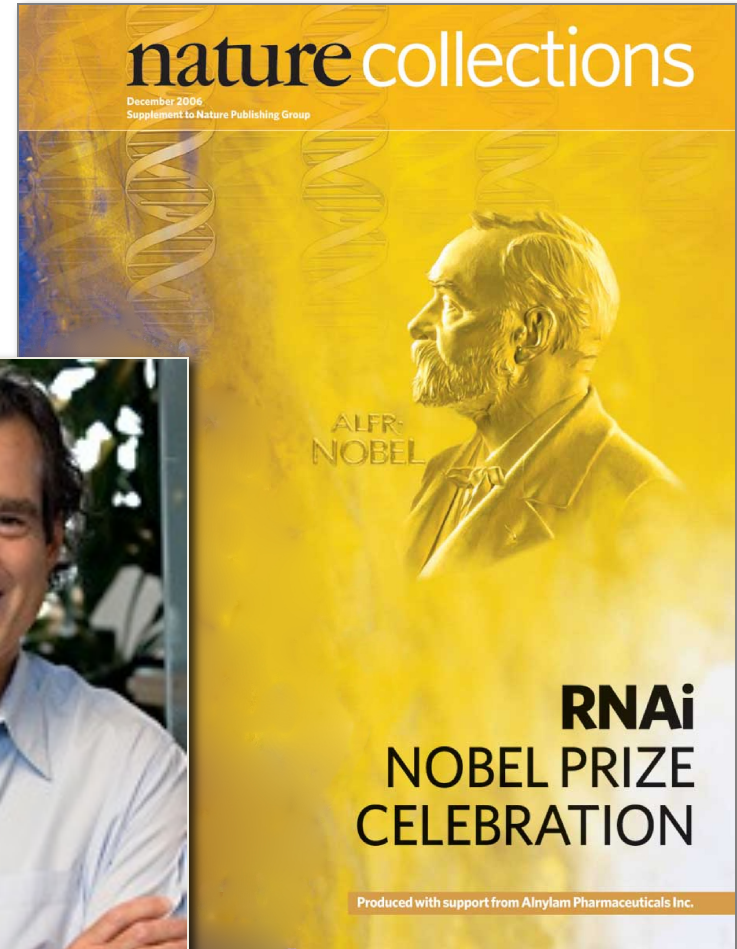


Development of (the anti-sense oligonucleotide) Spinraza for treatment of SMA

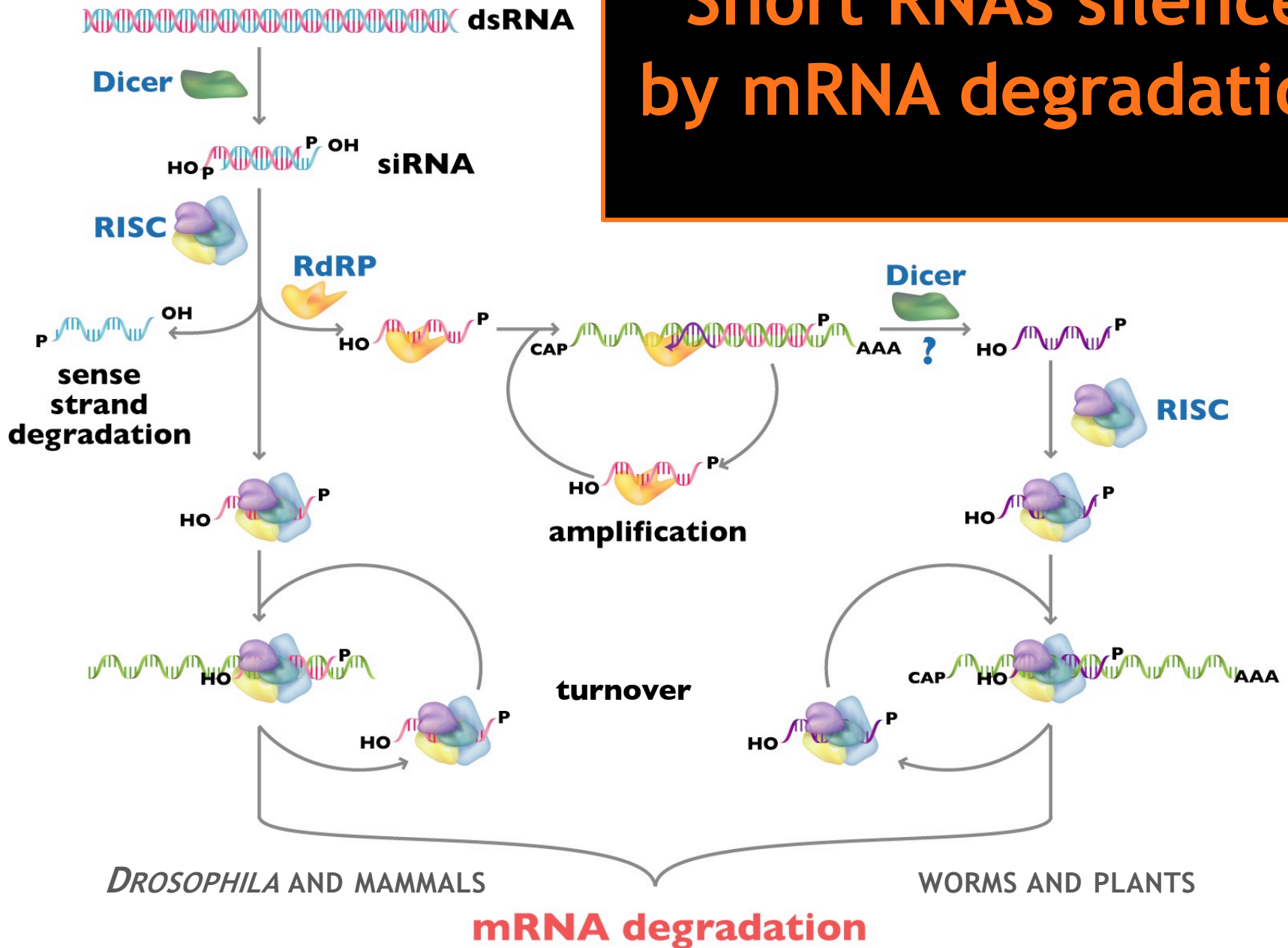
1. Adrian Krainer (CSHL) collaborated with Frank Bennett of Ionis (2008)
2. Ionis Pharmaceutical developed the anti-sense oligonucleotide, founded by Stanley Crooke in 1989
3. Biogen licensed technology (2012) clinical trials (FDA approved 2016)

Celebrating the Nobel Prize for RNAi

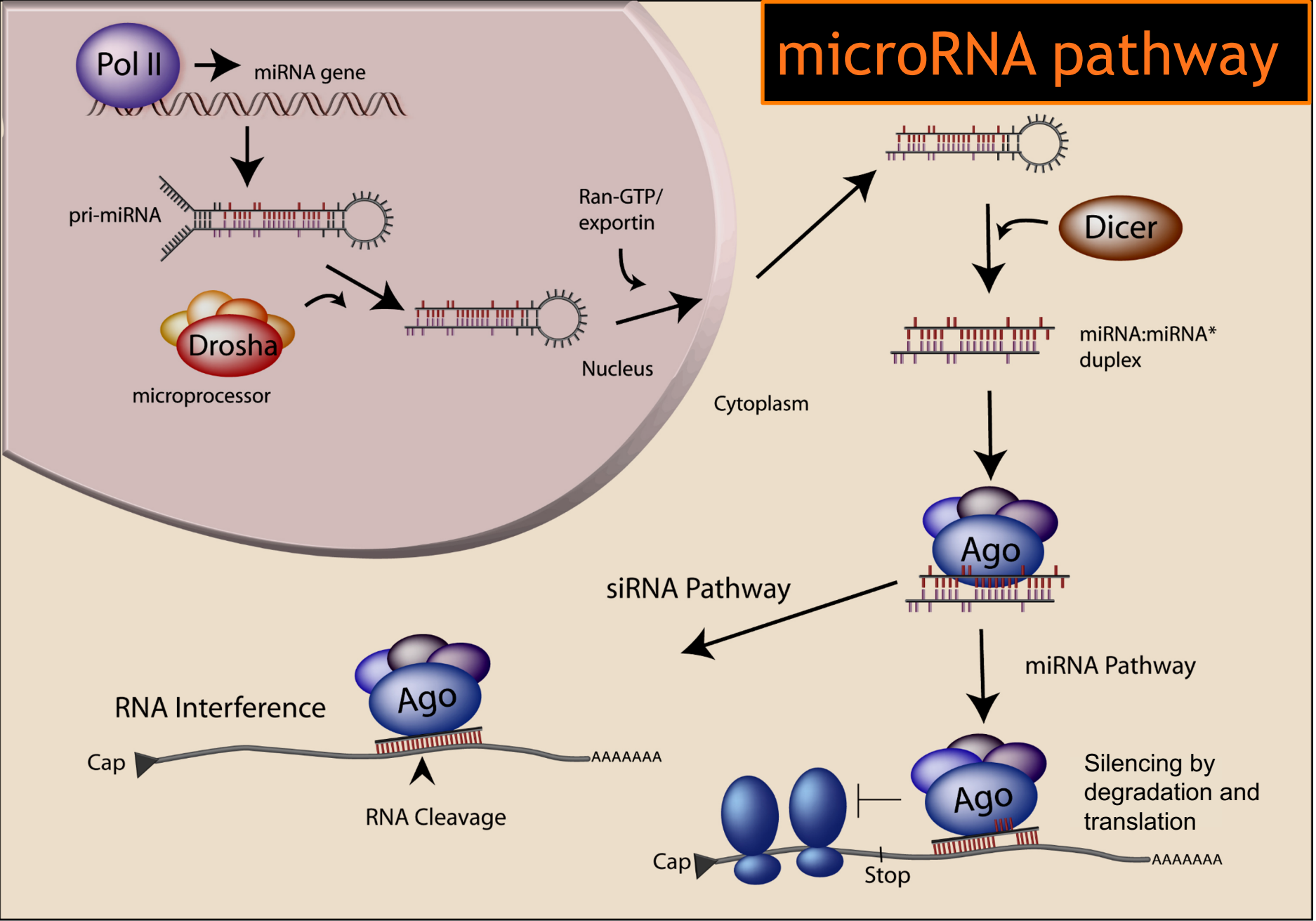
Drs. Andrew Fire and Craig Mello



Short RNAs silence by mRNA degradation



microRNA pathway



Investigational RNAi Therapeutics

A New Class of Innovative Medicines

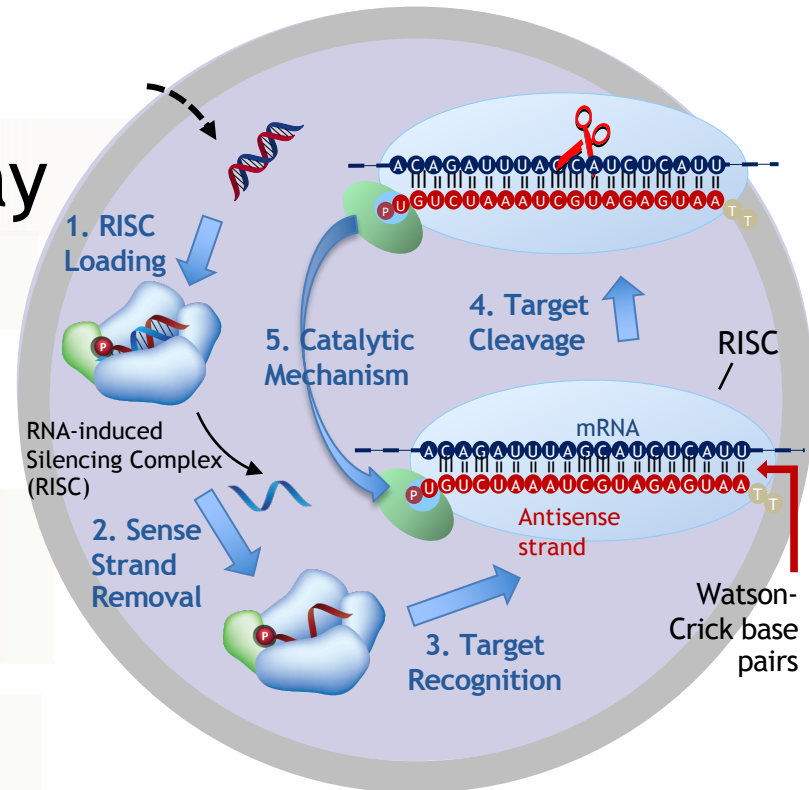
Harness natural pathway

Catalytic mechanism

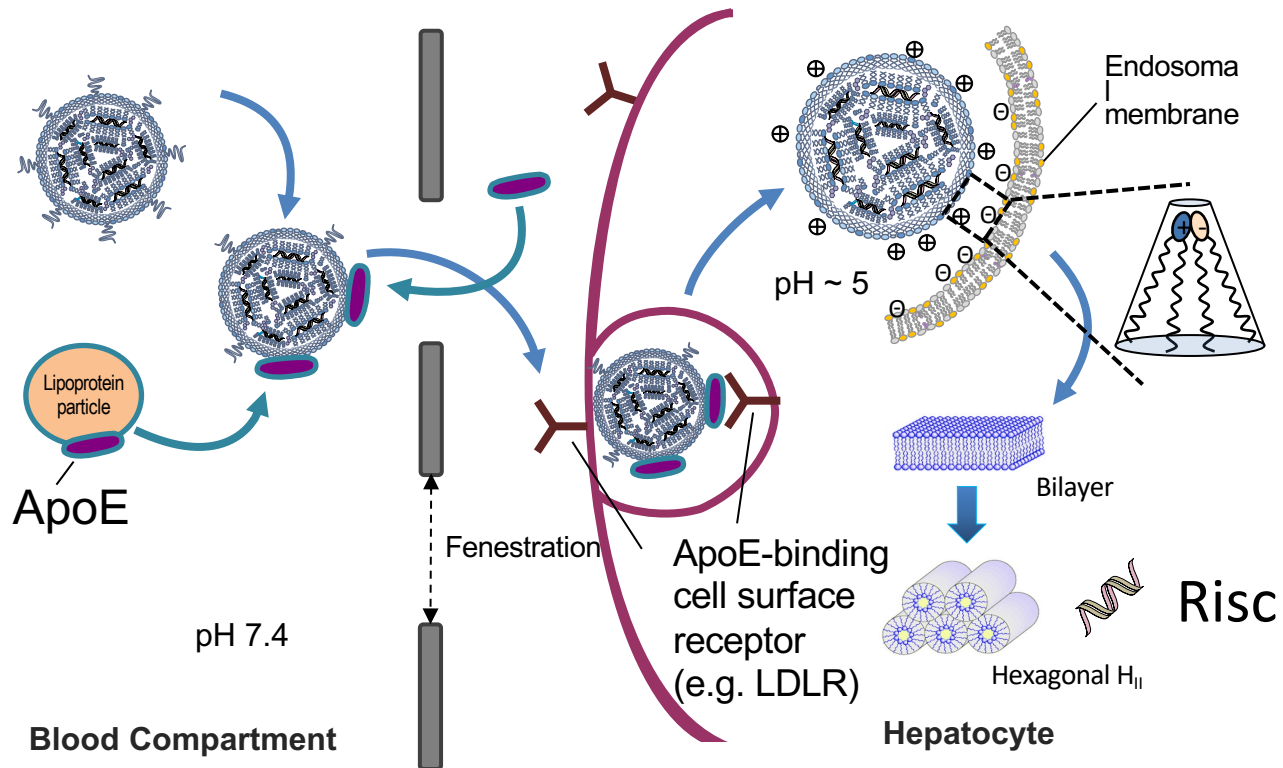
Silence any gene in genome

Upstream of today's medicines

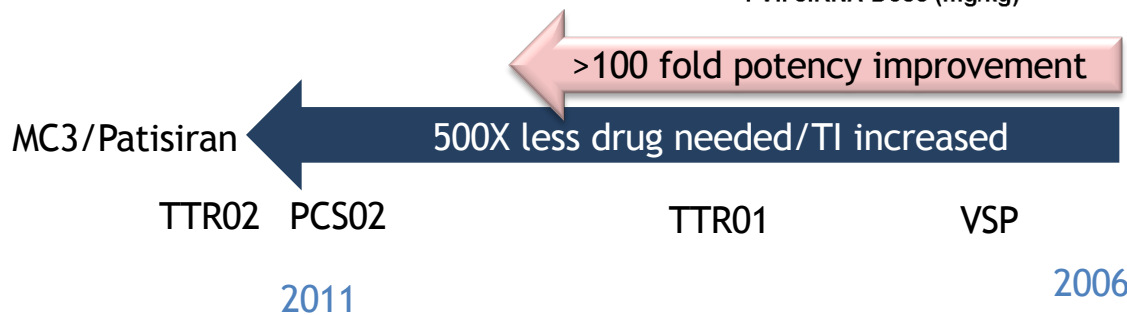
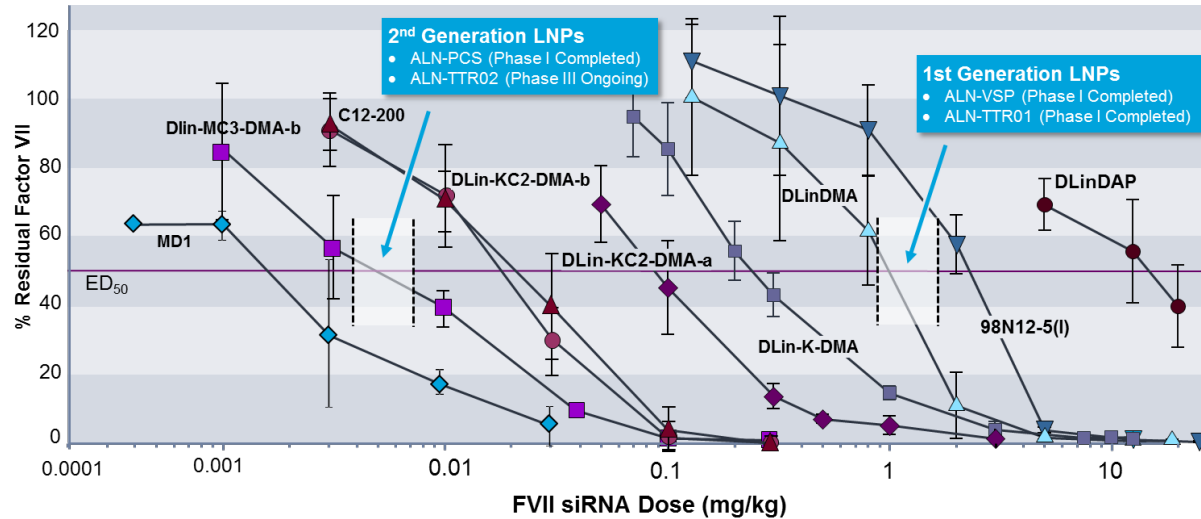
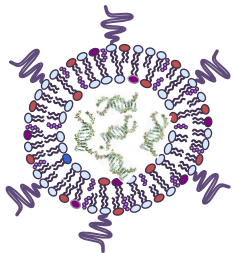
Clinically proven approach



Proposed mechanism of iLNP-mediated siRNA delivery



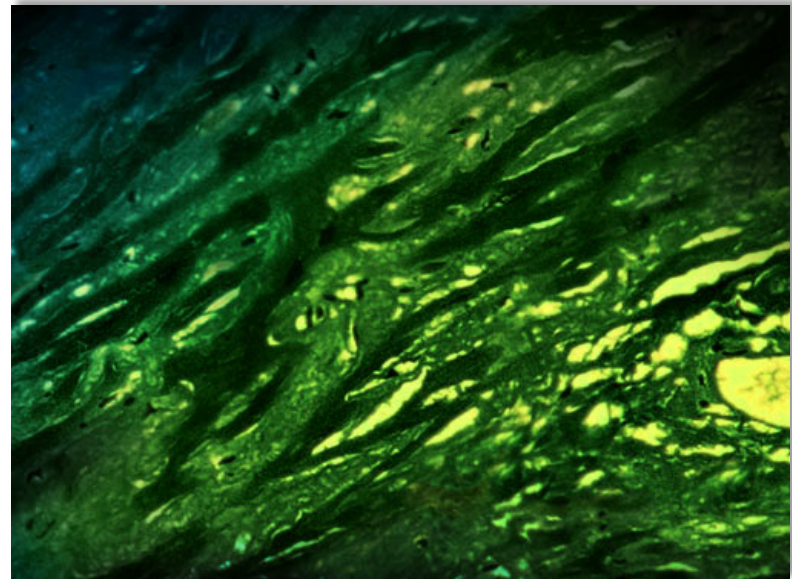
Innovating LNP Delivery: Highlights 2006-2013



Transthyretin (TTR)-mediated amyloidosis (ATTR) program

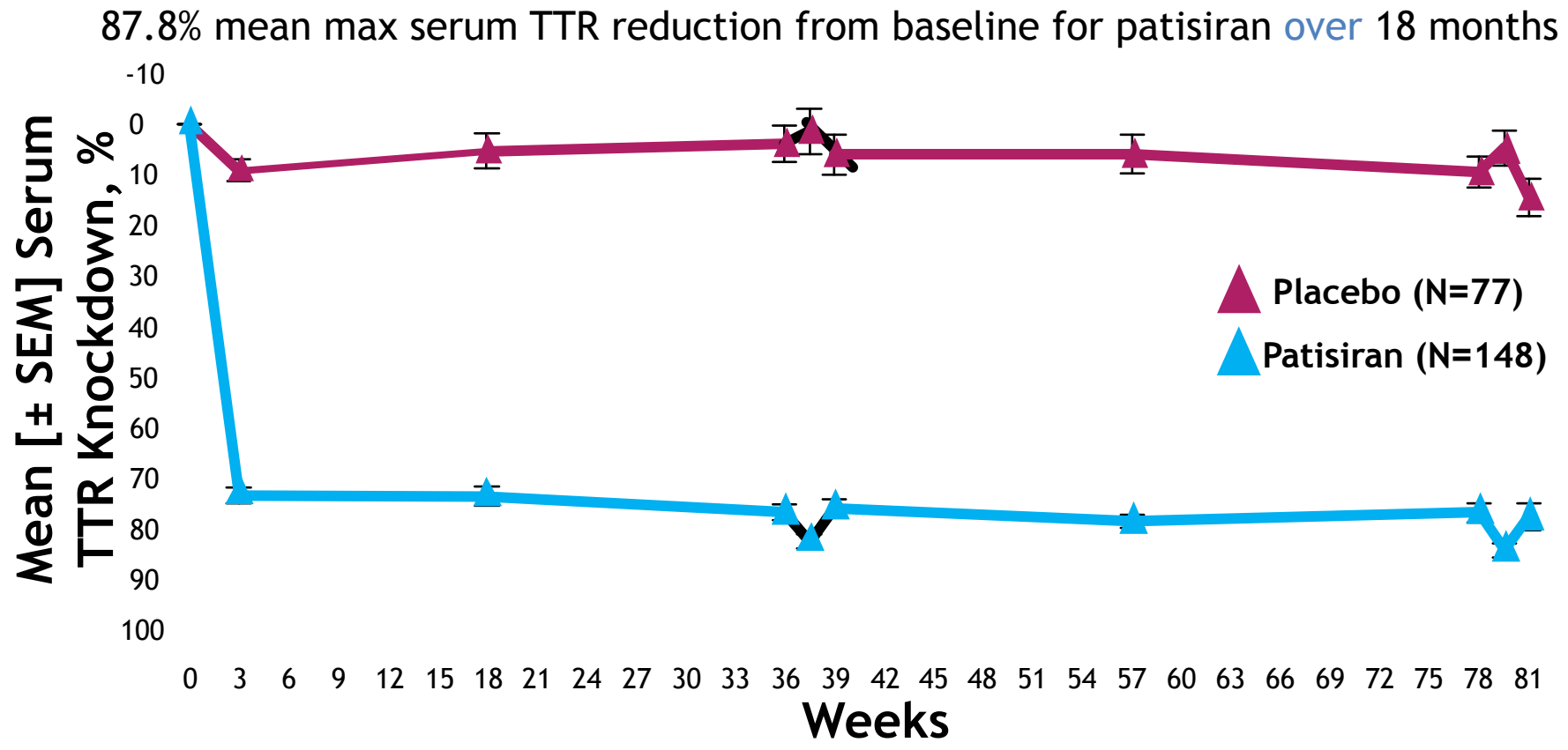
Unmet Need and Product Opportunity

- ATTR is significant orphan disease
 - ~50,000 Patients worldwide
- Clinical pathology
 - Onset ~40 to >60 yr
 - Peripheral sensorimotor neuropathy, autonomic neuropathy, and/or cardiomyopathy
 - Fatal within 5-15 years

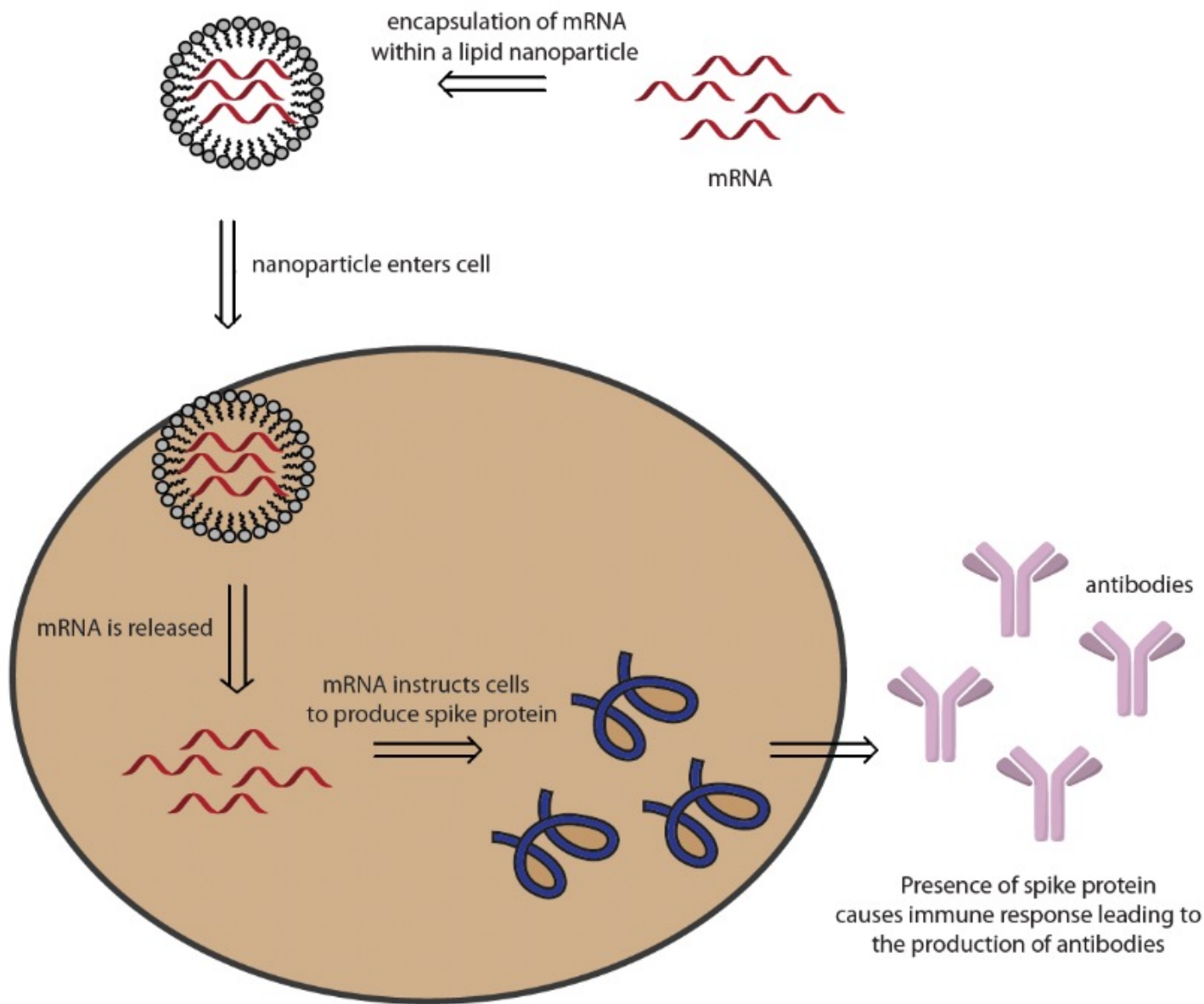


Patisiran Phase 3 APOLLO Study Results

Serum TTR Reduction



Lipid nanoparticle delivery of mRNA

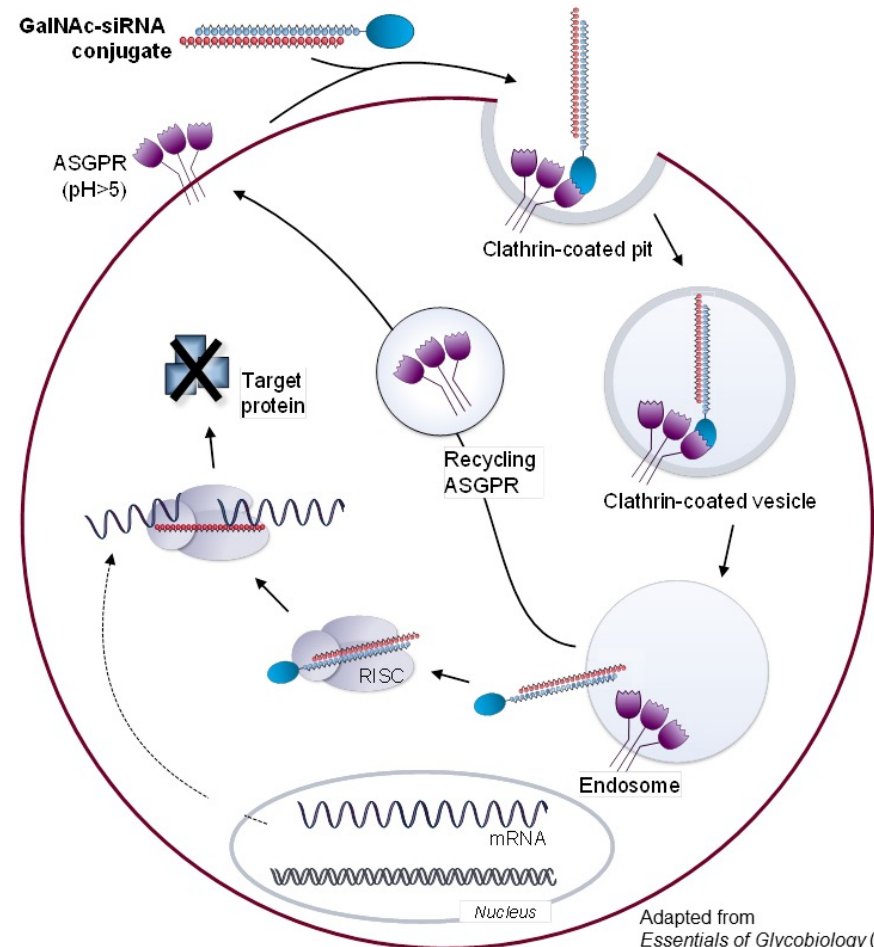
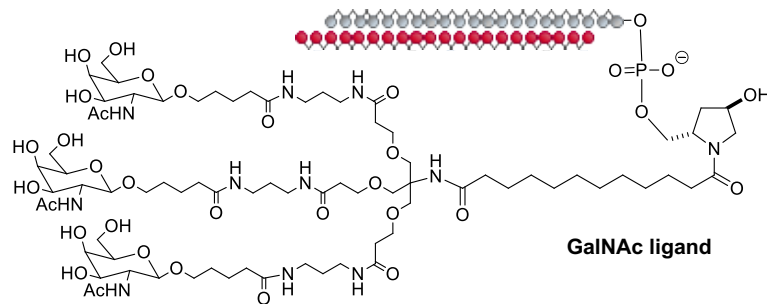


Tissue and Cellular Uptake

Targeting the liver: ASGPR and GalNAc

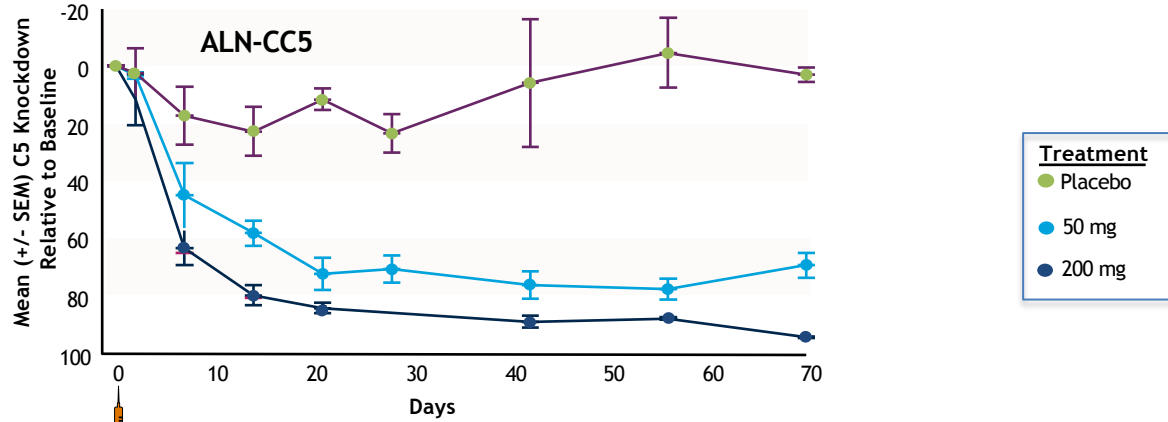
- GalNAc-siRNA Conjugate

- GalNAc ligand conjugated to chemically modified siRNA to mediate targeted delivery
- Trivalent GalNAc carbohydrate cluster has nM affinity for ASGPR
- Administered subcutaneously (SC)

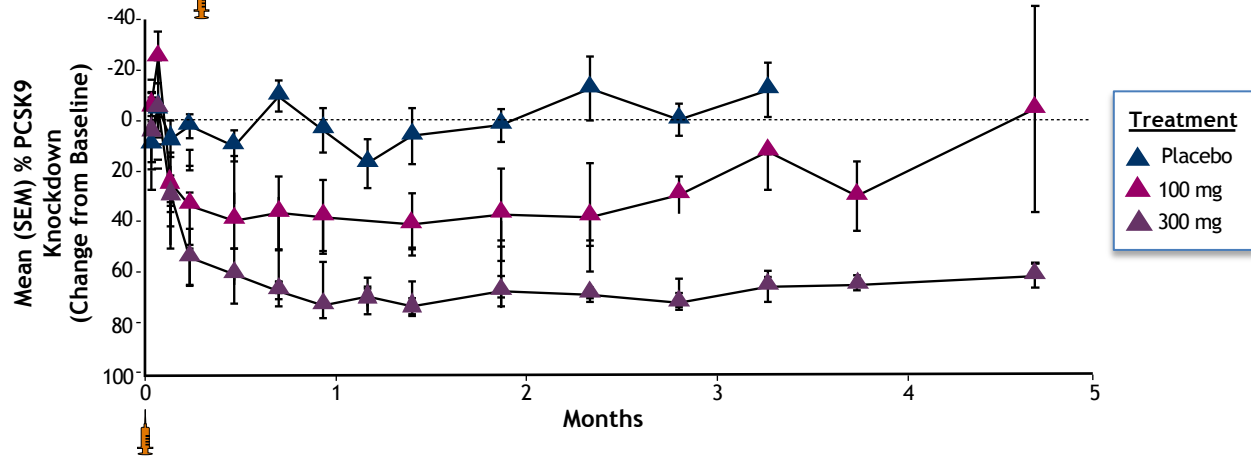


Potent and Durable Silencing Supports Quarterly Dosing in Humans

ALN-CC5



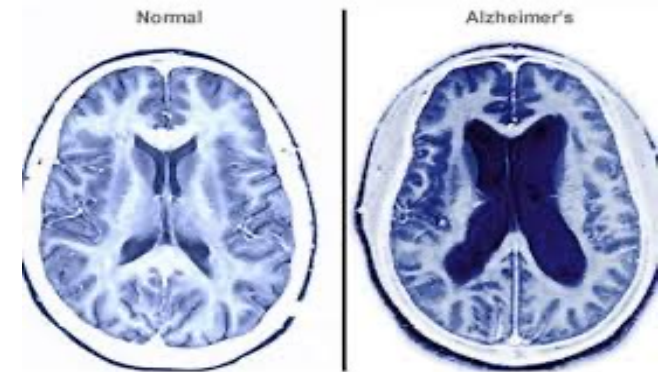
ALN-PCS



RNAi Therapeutics for CNS Diseases

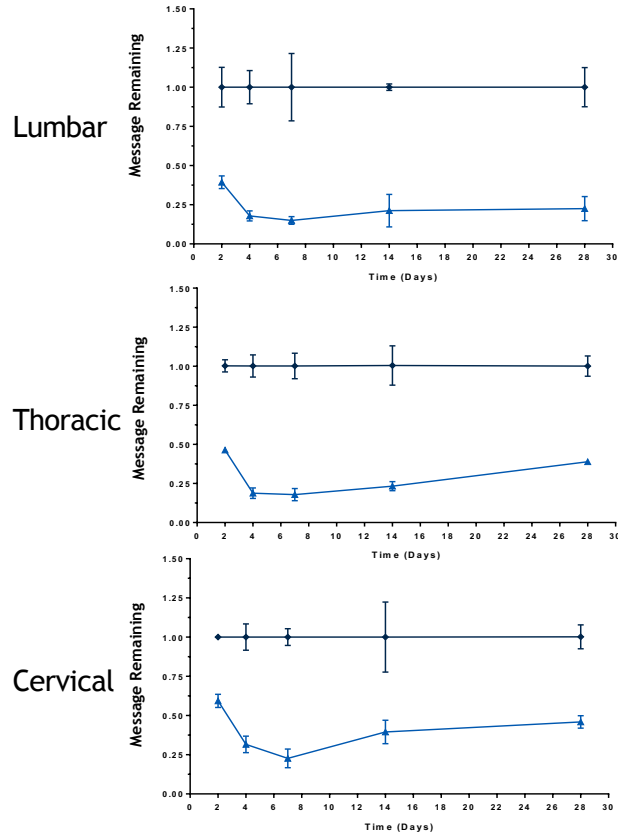
No current therapies to prevent or reverse neurodegenerative disease

- Dominantly inherited neurodegeneration
 - Alzheimer's disease
 - Parkinson's disease
 - Frontotemporal dementia
 - Huntington's disease
 - Amyotrophic lateral sclerosis (ALS)
 - Spinocerebellar ataxia
 - Many others

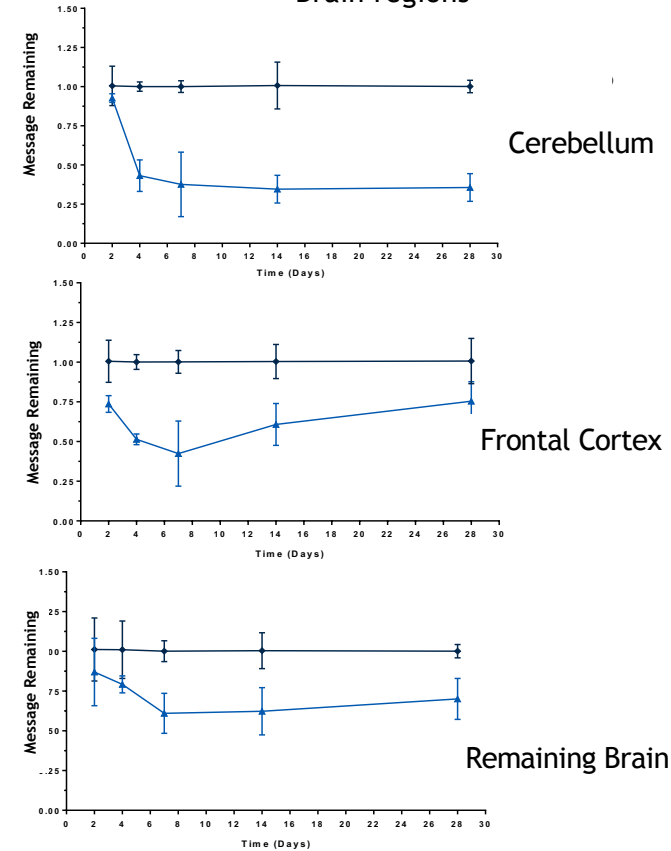
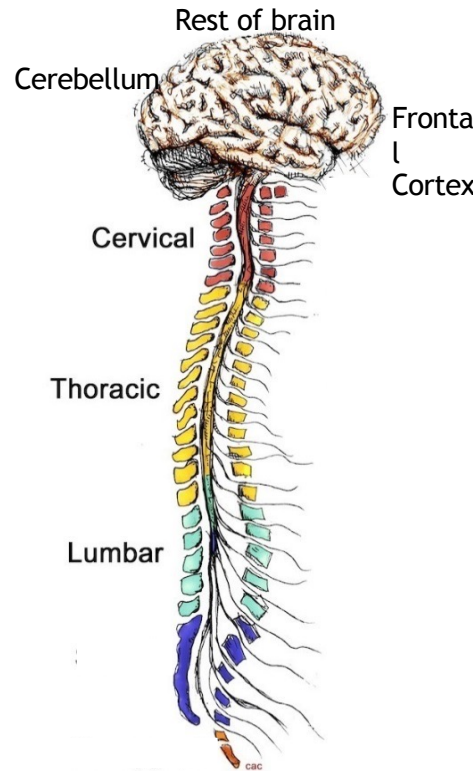


IT Dosing of SOD1 siRNA Conjugate to Evaluate CNS RNAi activity

Spinal cord regions

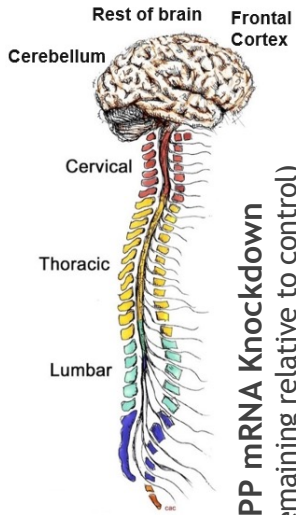


Brain regions

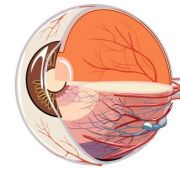
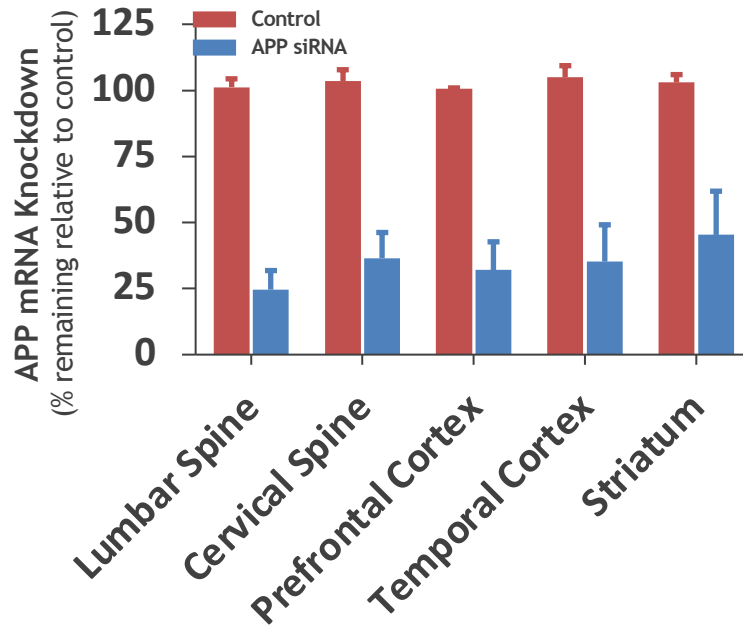


Durable SOD1 mRNA silencing is seen in all regions of the brain and spinal card tested

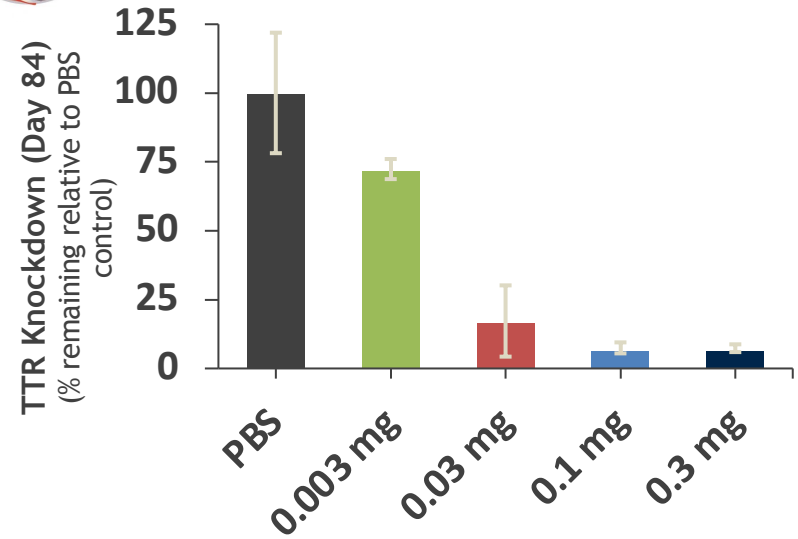
Robust Silencing of CNS and Ocular Targets



CNS APP mRNA Knockdown (Single Intrathecal Dose in NHP)



Ocular TTR Protein Knockdown (Single Intravitreal Dose in NHP)



Thank you for the
opportunity to
present this lecture.

- Phil Sharp