

University of Nevada, Reno School of Medicine



Department of Pharmacology

Emerging Treatment Strategies for FSHD

LA patient meeting Oct 21, 2017

Peter L. Jones, Ph.D. and Takako I. Jones, Ph.D. Co-Principal Investigators











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Disclosures:

Peter Jones, Takako Jones, and Charis Himeda are listed as inventors on US patent applications for epigenetic diagnosis of FSHD (PJ, TJ), epigenetic therapeutic targets for FSHD (PJ) and CRISPR therapy for FSHD (PJ, TJ, CH).

Peter Jones is on the SAB for Fulcrum Therapeutics









Rare Diseases as a group are not so rare >90 Neuromuscular Diseases

~30 muscular dystrophies: progressive weakness and degeneration of the skeletal muscles that control movement.

Muscular dystrophy: 9 classes of disease

BMD (Becker) CMD (Congenital)

DMD (Duchenne) DDM (Distal)

EDMD (Emery-Dreifuss) FSHD (Facioscapulohumeral)

LGMD (Limb-Girdle) MMD (Myotonic)

OPMD (Oculopharyngeal)

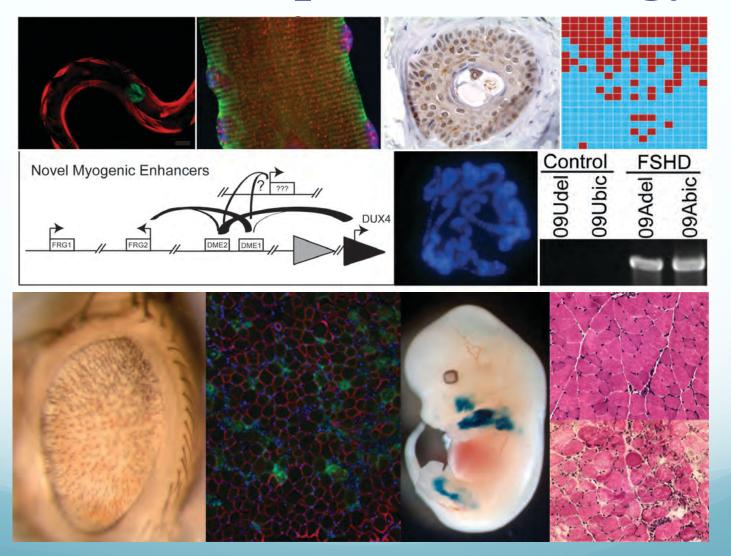
Aging can be considered a muscle disease

Big Picture Perspective

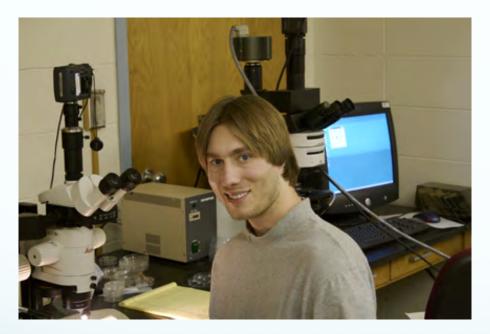


Research across the full spectrum of neuromuscular diseases leads to scientific and medical breakthroughs that accelerate treatments and cures. The power in this approach is that we can often apply learnings from one disease to progress in others to bring urgently-needed answers to affected patients and families.

Jones Lab expertise is epigenetics and developmental biology



Jones Lab expertise is epigenetics and developmental biology



Ryan Wuebbles, PhD

2002 Patient meeting: FSHD is caused by a loss of epigenetic regulation

Introduced us to facioscapulohumeral muscular dystrophy

Epigenetics

"Treasure your exceptions."

Thomas Hunt Morgan



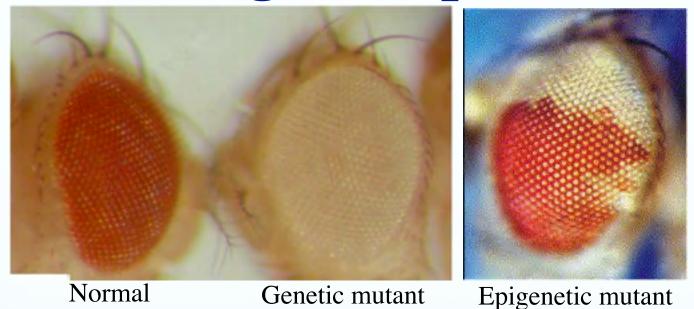




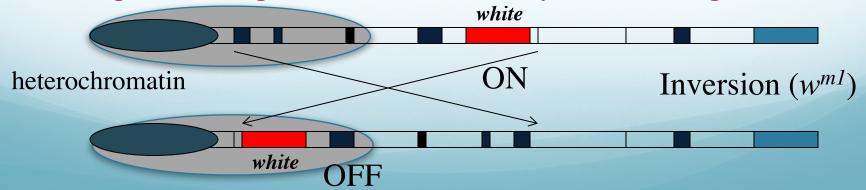
Randy Jirtle/Duke University

- > Non-Mendelian pattern of heritability
- > Context-dependent sequence independent gene expression
- > Can be influenced by the environment (diet, aging, etc...)

The gene "environment" affects gene expression



Translocation of a gene from a euchromatic region to a heterochromatic region resulting in inactivation of nearby euchromatic genes



Epigenetic differences can have profound long-term health consequences

Epialleles



 A^{IAP} allele, methylated



Brown, normal

 A^{IAP} allele, unmethylated



Yellow, obese, spontaneous tumors

Genetically identical Epigenetically different

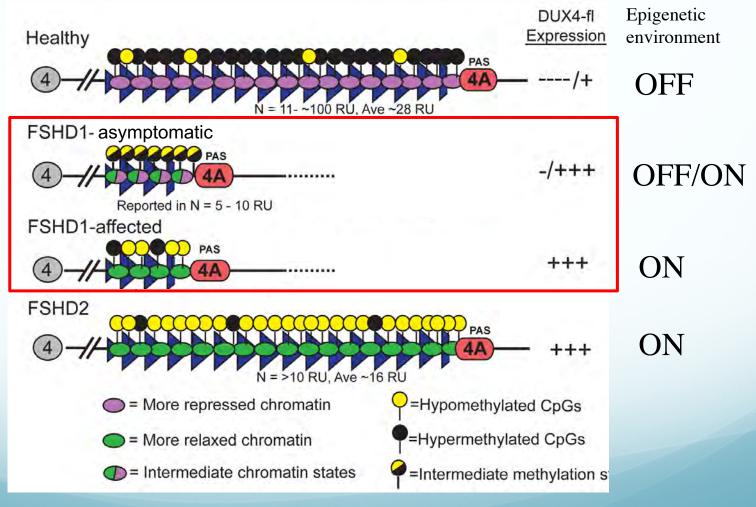


Affects <u>long-term health</u>

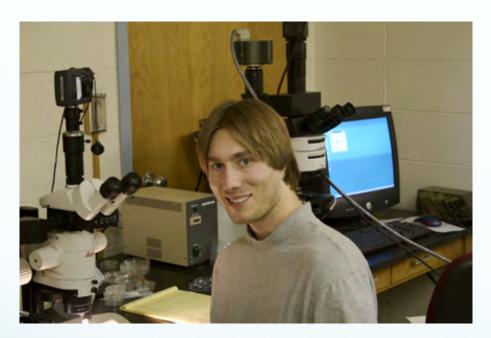
→ heritable?

FSHD is an epigenetic disease

The FSHD gene, *DUX4*, is under epigenetic regulation The "genetic environment" is changed in FSHD



Jones Lab expertise is epigenetics and developmental biology of FSHD



FSHD is caused by a loss of epigenetic regulation

Ryan Wuebbles, PhD

Since 2003, our focus has been on FSHD pathogenic mechanisms, therapeutic targets, and animal models

FSHD Therapeutic Development in 2003

FSHD gene? Unknown

Pathogenic mechanism? Unknown

Cellular models? Not significant

Animal models? Non existent

Treatments: Steroids, myostatin inhibition

Rationale: ~work for DMD, so why not

FSHD Therapeutic Development in 2017

FSHD gene? DUX4

Pathogenic mechanism? Epigenetic dysregulation

Still many possibilities

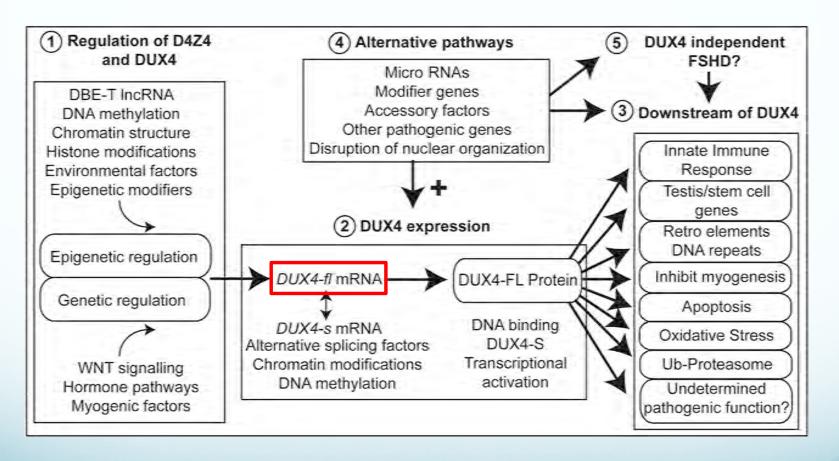
Cellular models? Many

Animal models? Mice, Fly, Zebrafish

Treatments: Myostatin inhibition, immune suppression

Rationale: FDA approved, biology-based

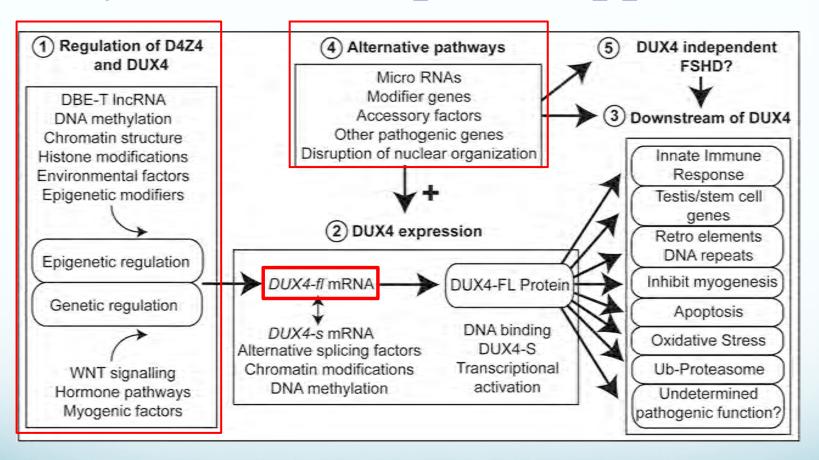
FSHD in 2017 Many viable therapeutic approaches!



Anti-sense, morpholinos, PMOs, microRNAs

→ inactivate or destroy the DUX4-fl mRNA

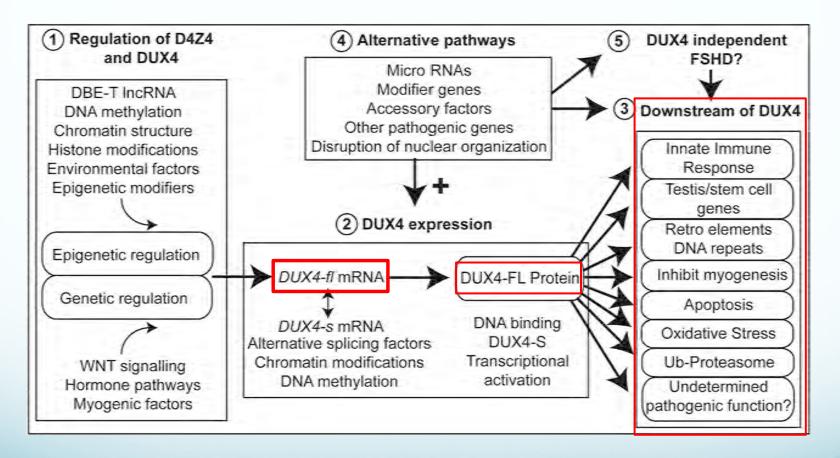
Many viable therapeutic approaches!



Small molecule inhibitors; CRISPR technology

→ prevent expression of *DUX4*

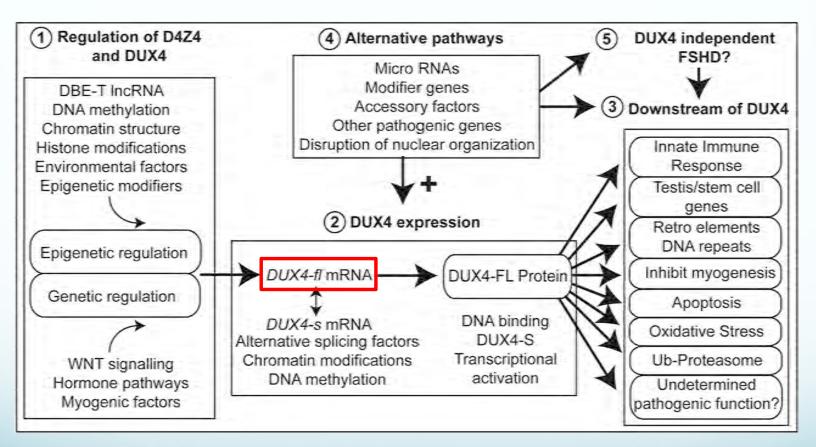
Many viable therapeutic approaches!



Small molecule inhibitors

→ block downstream pathogenic effects of DUX4-FL protein

Many viable therapeutic approaches!

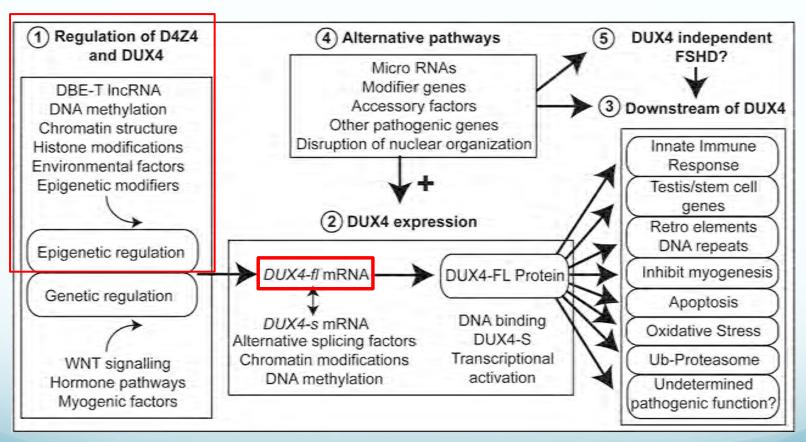


DUX4-independent approaches

→ Myostatin inhibition (Acceleron ACE-083 trial)

Many viable therapeutic approaches!

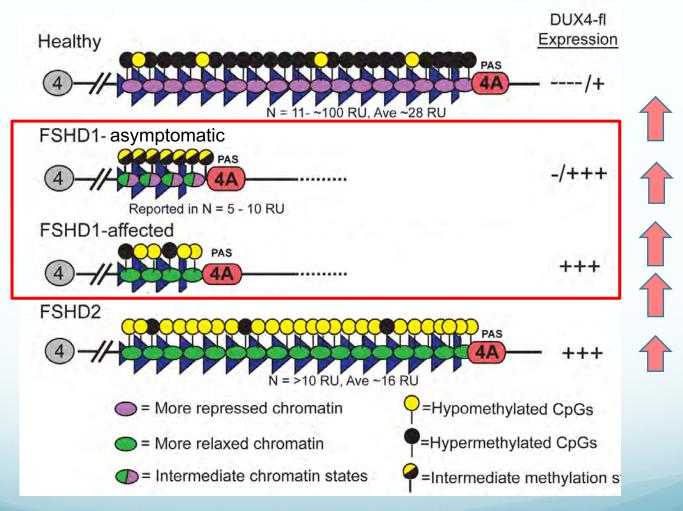
Jones Lab at UNRSOM



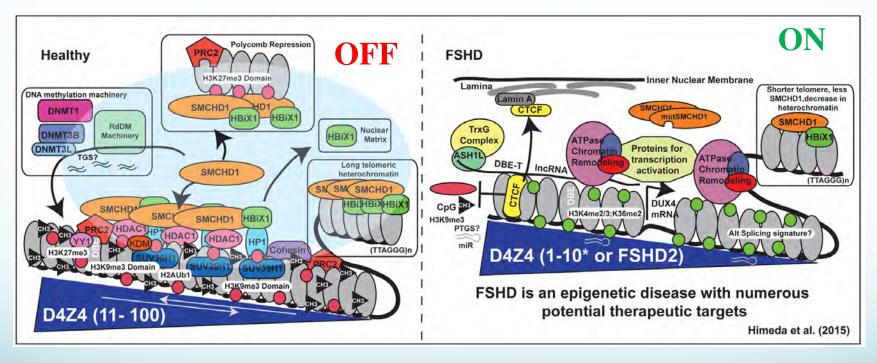
- > Small molecule epigenetic effectors
- CRISPR/dCas9 silencing

FSHD is an epigenetic disease

Can we therapeutically return to an FSHD non-affected epigenetic state?



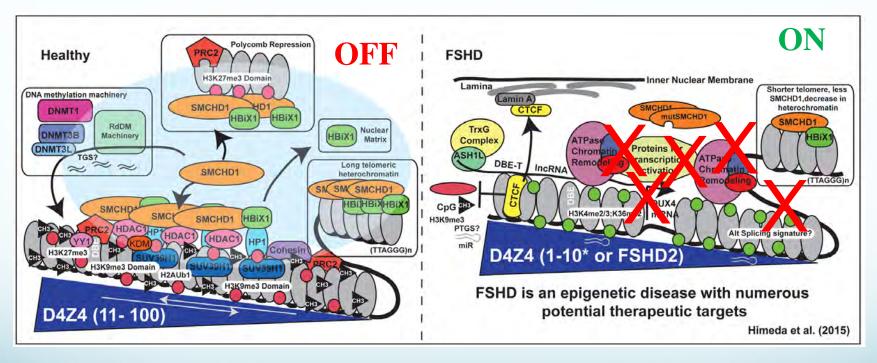
The FSHD genetic region normally is bound by negative regulators, in FSHD it is bound by positive regulators



Healthy and Asymptomatic

FSHD

The FSHD genetic region normally is bound by negative regulators, in FSHD it is bound by positive regulators



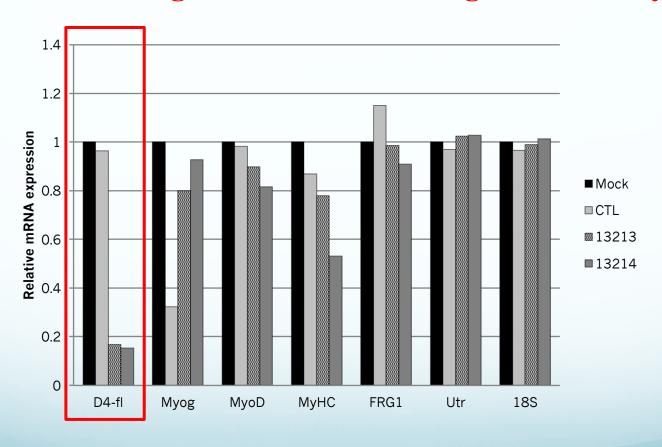
Healthy and Asymptomatic

FSHD

Epigenetic drugs are a viable therapeutic approach to FSHD

We have identified strong candidates for targeted FSHD therapy

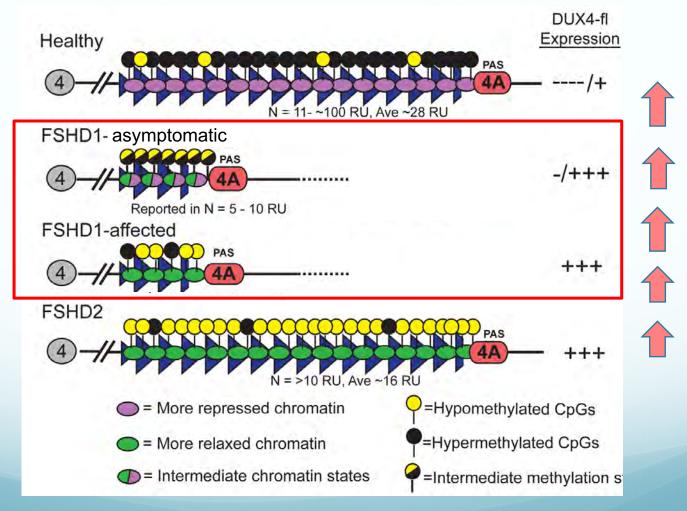
Knockdown this regulator returns the region to healthy state



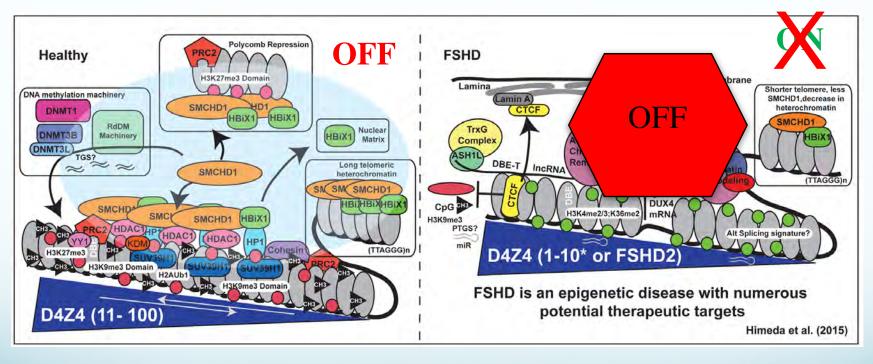
Example: Epigenetic Regulator PT-2

Targeting FSHD epigenetics

Can we therapeutically return to a non-affected epigenetic state by recruiting OFF machinery?



The FSHD gene normally is bound by negative regulators, in FSHD it is bound by positive regulators



Healthy and Asymptomatic

FSHD

CRISPR technology as a therapeutic approach to FSHD

CRISPR-mediated "genome editing" Powerful, controversial, scary?



Not the whole story

CRISPR is much more than genome "editing"

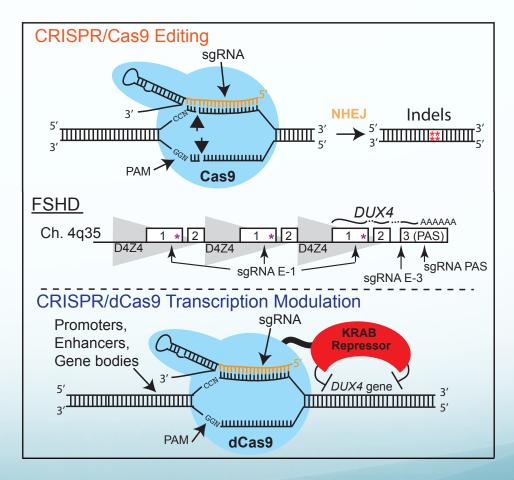
CRISPR/Cas technology is essentially a simple and more efficient way to specifically target ~any sequence of the genome of any organism

Sequence-specific genome targeting
Cut the DNA → editing
Target an activator → turn a gene "ON"
Target a repressor → turn a gene "OFF"
Target a tag → "see" a gene, capture a gene

Can we use CRISPR technology as a therapy for FSHD?



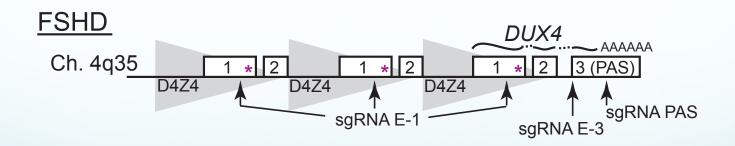
Charis Himeda, PhD



Himeda et al. (2015) Mol. Therapy Himeda et al. (2016) Trends Pharmacol.

CRISPR is much more than genome "editing"

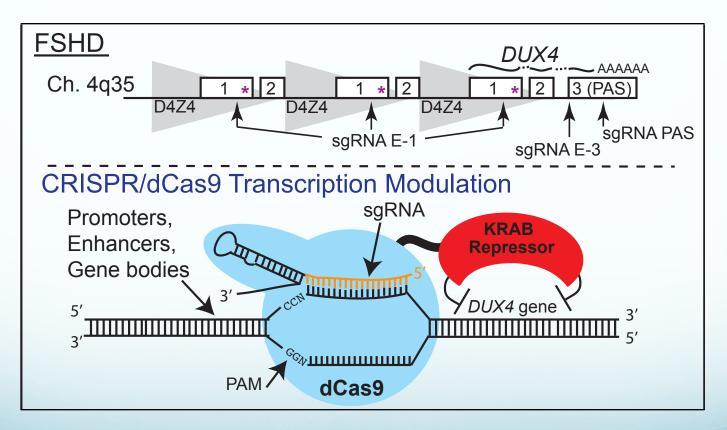
CRISPR/Cas technology is essentially a simple and more efficient way to specifically target the genome of any organism



Sequence-specific genome targeting

CRISPR/dCas9 in FSHD therapeutic development

Efficient genome targeting of a transcriptional repressor



Himeda et al. (2015) Mol. Therapy Himeda et al. (2016) Trends Pharmacol. © The American Society of Gene & Cell Therapy

original article

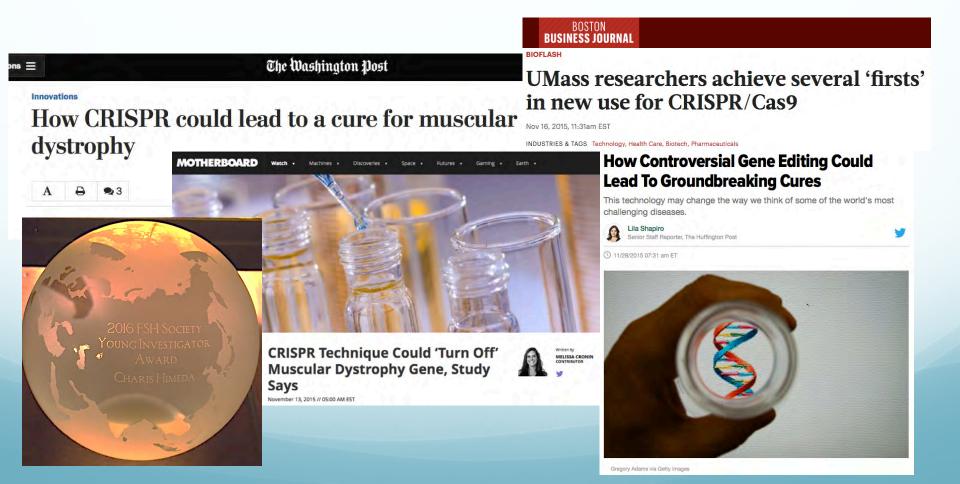
Mol Ther. 2016 Mar;24(3):527-35. doi: 10.1038/mt.2015.200. Epub 2015 Nov 3.

CRISPR/dCas9-mediated Transcriptional Inhibition Ameliorates the Epigenetic Dysregulation at D4Z4 and Represses *DUX4-fl* in FSH Muscular Dystrophy

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Proof-of-principle CRISPR "cure" for FSHD



Could CRISPR really become an FSHD therapeutic?





First CRISPR clinical trial gets green light from US panel

The technique's first test in people could begin as early as the end of the year.

Sara Reardon

NATURE | NEWS

22 June 2016



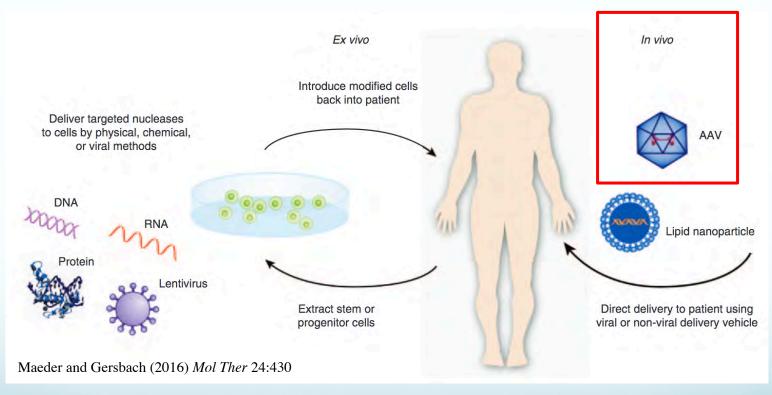


Projected market of \$5.5 billion by 2021

New CRISPR and CRISPR-like systems being discovered

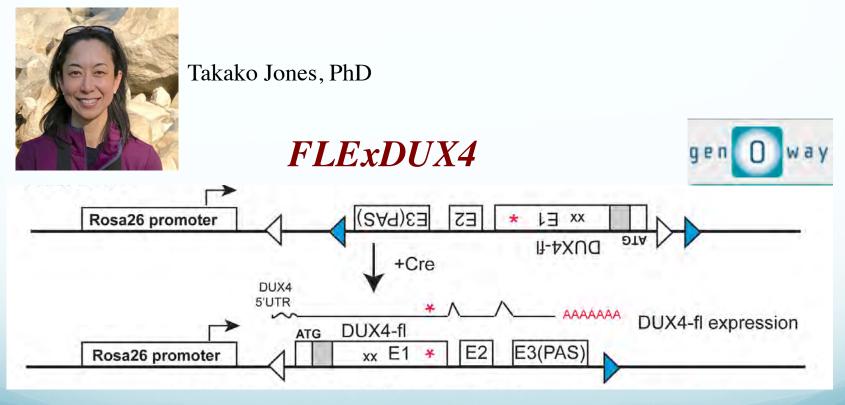
Therapeutic delivery of CRISPR/Cas in vivo is challenging

FSHD is a skeletal muscle disease



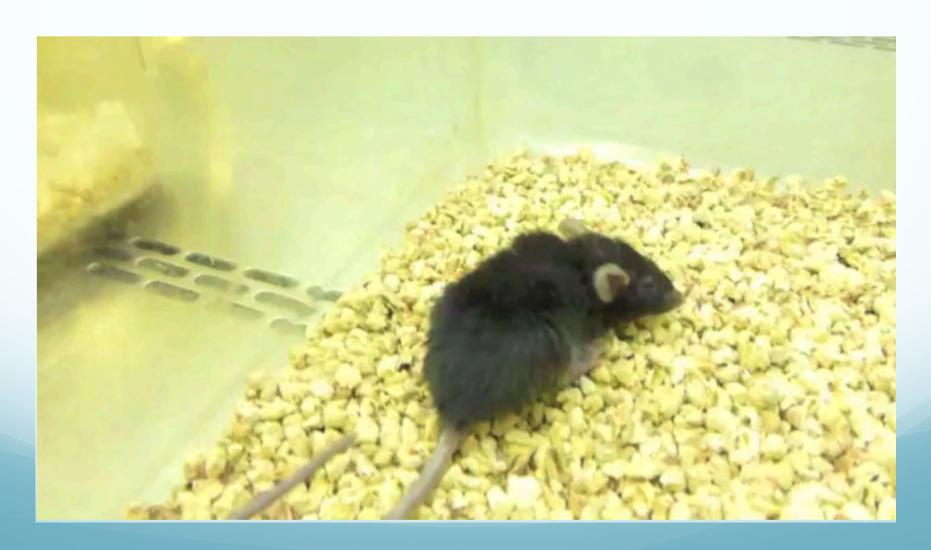
Need an animal model → pathogenic gene is primate-specific

Generation of a viable, phenotypic FSHD-like mouse based on DUX4-fl expression

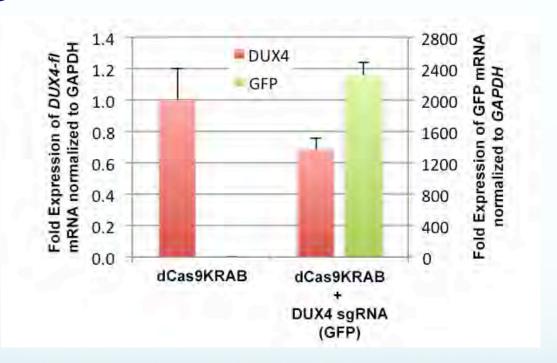


The Rosa26 promoter ensures robust DUX4-fl expression in all cells that underwent cre-mediated inversion

FLExDUX4 model mice show rapid decline in mobility and a severe FSHD-like myopathy



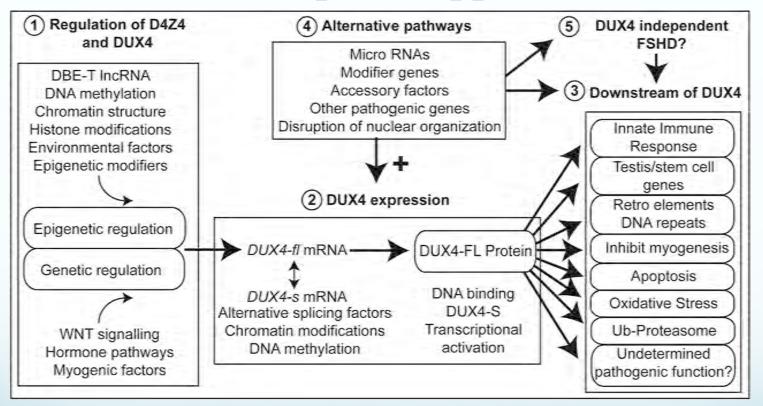
In vivo delivery of AAV9-dCas9-KRAB + AAV9-sgRNA leads to significant DUX4 knockdown



AAV9 delivery results in 30% decrease in TA muscle Enough to be therapeutic?

Only need to dial back expression from affected to asymptomatic

Our recent increased understanding of FSHD pathogenic mechanisms has led to the development of numerous therapeutic approaches and tools



CRISPRi/dCas9-KRAB; CRISPR/Cas9; Myostatin inhibition Morpholinos/PMOs/shRNAs; miRNAs; Anti-inflammatory Small molecules targeting epigenetic regulators; more...

The FSHD field will be translating discoveries to the clinic and the future is bright



Steven Blier: Musician, Professor at Julliard, FSHD patient, and friend Kelli O'Hara: Tony award winning actress and advocate for FSHD



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School of Medicine

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Mick Hitchcock, PhD, Endowed Chair in Medical Biochemistry







