

FSHD: Clinical trials today

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What are clinical trials?

How to look for clinical trials to join

Ongoing Clinical trials

Future perspectives



CLINICAL TRIALS 101

 A clinical trial is any research study that prospectively assigns human participants or groups of humans to one or more healthrelated interventions to evaluate the effects on health outcomes (World health organization definition)





- Design (strategy)
 - Randomization
 - Blinding
- Inclusion/exclusion criteria
- Intervention
- Outcome measures



How to look for clinical trials to join

ASK YOUR DOCTOR!

ASK YOUR FOUNDATION!

CLINICALTRIALS.GOV





conducted around the world.

Explore 297,984 research studies in all 50 states and in 208 countries.

ClinicalTrials.gov is a resource provided by the U.S. National Library of Medicine.

IMPORTANT: Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our disclaimer for details.

Before participating in a study, talk to your health care provider and learn about the risks and potential benefits.

Status 6			
	ng and not yet recruiting studies		
Condition or d	lisease (For example: breast cancer)		
		x	
Other terms €	(For example: NCT number, drug name, investigator n	ame)	
		x	
Country 6			
United States		‡ x	
	City ⊕	‡ ∫ X	Distance 😌
State Search	City ⊕	ŢX	

Patients and Families

Search for actively recruiting studies that you may be able to participate in or learn about new interventions/treatments that are being considered.

Researchers

Search the database to stay up to date on developments
Learn about registering studies and about submitting in your field, find collaborators, and identify unmet needs. their results after study completion.

Study Record Managers

Learn more

Learn more

Learn more

TERMS AND CONDITIONS

CUSTOMER SUPPORT



Ongoing Clinical Trials for FSHD

Row	Saved	Status	Study Title	Conditions	Interventions	Locations
1		Recruiting	Study of Testosterone and rHGH in FSHD	Facioscapulohumeral Muscular Dystrophy	Drug: Testosterone Enanthate Drug: Somatropin	University of Rochester Rochester, New York, United States
2		Recruiting	Magnetic Resonance Imaging and Spectroscopy Biomarkers for Facioscapulohumeral Muscular Dystrophy	 Facioscapulohumeral Muscular Dystrophy 		Doris Leung Baltimore, Maryland, United States
3		Unknown †	Bone Health in Facioscapulohumeral Muscular Dystrophy	Facioscapulohumeral Muscular Dystrophy		Kennedy Krieger Institute, Johns Hopkins School of Medicine Baltimore, Maryland, United States Concord Hospital Neurology Department, Hospital Road, Concord NSW 2139 Sydney, Australia
4		Recruiting	Myotonic Dystrophy and Facioscapulohumeral Muscular Dystrophy Registry	Myotonic Dystrophy Facioscapulohumeral Muscular Dystrophy Muscular Dystrophy (and 6 more)		University of Rochester Medical Center, Department of Neurology Rochester, New York, United States
5		Recruiting	Clinical Trial Readiness to Solve Barriers to Drug Development in FSHD	Facioscapulohumeral Muscular Dystrophy	Diagnostic Test: FSHD-specific functional rating scale Device: Electrical Impedance Myography	University of California Los Angeles Los Angeles, California, United States University of Kansas Medical Center Kansas City, Kansas, United States Kennedy Krieger Institute Baltimore, Maryland, United States (and 5 more)
6		Active, not recruiting	Study of ACE-083 in Patients With Facioscapulohumeral Muscular Dystrophy (FSHD)	Facioscapulohumeral Muscular Dystrophy	Drug: ACE-083 Drug: ACE-083 or placebo	University of California Los Angeles Medical Center Los Angeles, California, United States University of California Davis Medical Center Sacramento, California, United States University of Colorado Auror, Colorado, United States (and 20 more)





Study Type 1 : Interventional (Clinical Trial)

Actual Enrollment 1 : 55 participants

Allocation: Randomized

Intervention Model: Parallel Assignment

Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor)

Primary Purpose: Treatment

Official Title: A Phase 2 Randomized, Double-Blind, Placebo-Controlled Study of ACE-083 in Patients With Facioscapulohumeral Muscular Dystrophy

Study Start Date 1 : November 2016

Estimated Primary Completion Date **1**: March 2020 Estimated Study Completion Date **1**: June 2020





Go to

Ages Eligible for Study: 18 Years and older (Adult, Older Adult)

Sexes Eligible for Study: A
Accepts Healthy Volunteers: N

Criteria

Key Inclusion Criteria:

- 1. Age ≥ 18 years
- 2. Genetically-confirmed FSHD1 or FSHD2 (or a first-degree relative with genetically confirmed FSHD1 or FSHD2) and clinical findings meeting FSHD criteria
- 3. Part 1 TA cohorts:
 - 1. 6-minute walk distance (6MWD) ≥ 150 meters (without a brace)
 - 2. Mild to moderate weakness in left and/or right ankle dorsiflexion

Part 1 BB cohorts:

a. Mild to moderate weakness in left and/or right elbow flexion

Part 2 TA cohorts:

- 1. $6MWD \ge 150$ and ≤ 500 meters (without a brace)
- 2. Mild to moderate weakness in left and right ankle dorsiflexion

Part 2 BB cohorts:

- a. Mild to moderate weakness in left and/or right elbow flexion
- 4. Females of childbearing potential must have negative urine pregnancy test prior to enrollment and use highly effective birth control methods during study participation. Hormonal birth control use must be stable for at least 14 days prior to Day 1. Males must agree to use a condom during any sexual contact with females of childbearing potential while participating in the study even if he has undergone a successful vasectomy.

Key Exclusion Criteria:

- 1. Current/ active malignancy (e.g., remission less than 5 years duration), with the exception of fully excised or treated basal cell carcinoma, cervical carcinoma in-situ, or ≤ 2 squamous cell carcinomas of the skin
- 2. Symptomatic cardiopulmonary disease, significant functional impairment, or other co morbidities that in the opinion of the investigator would limit a patient's ability to complete strength and/or functional assessments on study
- 3. Renal impairment (serum creatinine ≥ 2 times the upper limit of normal [ULN])
- 4. Aspartate transaminase (AST) and/or alanine transaminase (ALT) ≥ 3 times ULN
- 5. Increased risk of bleeding (i.e., due to hemophilia, platelet disorders, or use of any anticoagulation/platelet modifying therapies up to 2 weeks prior to Study Day 1; low dose aspirin [≤ 100 mg daily] is permitted)
- 6. Major surgery within 4 weeks prior to Study Day 1
- 7. Chronic systemic corticosteroids (≥ 2 weeks) within 4 weeks before Study Day 1 and for duration of study; intra-articular/topical/inhaled therapeutic or physiologic doses of corticosteroids are permitted
- 8. Androgens or growth hormone within 6 months before Study Day 1 and for duration of study; topical physiologic androgen replacement is permitted
- 9. Any condition that would prevent MRI scanning or compromise the ability to obtain a clear and interpretable scan of the TA or BB muscles, as applicable (e.g., pacemaker, knee/hip replacement, or metallic implants)



Experimental: ACE-083 (Part 2, DB-PC, IM tibialis anterior muscle)	Drug: ACE-083 or placebo	
Double-Blind, Placebo-Controlled ACE-083 up to 250 mg IM (tibialis anterior muscle) or placebo, once every 3 weeks for up to 9 doses.	Recombinant fusion protein or normal saline.	

Experimental: ACE-083 (Part 2, PL, IM tibialis anterior muscle)	Drug: ACE-083
Open-Label ACE-083 up to 250 mg IM (tibialis anterior muscle) once every 3 weeks for up to 8 doses.	Recombinant fusion protein.

Experimental: ACE-083, (Part 2, DB-PC, IM biceps brachii muscle) Double-Blind, Placebo-Controlled ACE-083 up to 250 mg IM (biceps brachii muscle) or placebo, once every 3 weeks for up to 9 doses.	Drug: ACE-083 or placebo Recombinant fusion protein or normal saline.
Double-billid, Flacebo-Controlled ACE-065 up to 250 mg livi (biceps bracilli muscle) or placebo, office every 5 weeks for up to 9 doses.	necombinant fusion protein or normal sainle.

Experimental: ACE-063, (Part 2, DB-PC, INI Diceps brachii muscle)	Drug: ACE-083 or placebo
Double-Blind, Placebo-Controlled ACE-083 up to 250 mg IM (biceps brachii muscle) or placebo, once every 3 weeks for up to 9 doses.	Recombinant fusion protein or normal saline.
Experimental: ACE-083 (Part 2, OP, biceps brachii muscle)	Drug: ACE-083
Open-Label ACE-083 up to 250 mg IM (biceps brachii muscle), once every 3 weeks for up to 8 doses.	Recombinant fusion protein.



Outcome Measures Go to





1. Safety and Tolerability (data collection on the incidence, nature and severity of adverse events), [Time Frame: From initiation of treatment (Study Day 1) to end-of-study visit (Study Day 141),] Adverse events will be recorded and coded in accordance with MedDRA v.20.0

Secondary Outcome Measures 1:

- 1. Estimation of systemic exposure to ACE-083 following local intramuscular administration. [Time Frame: From initiation of treatment (Study Day 1) to end-of-study visit (Study Day 141).] Bioanlaytical assay for the quantitative of ACE-083 in serum
- 2. Percent change from baseline in strength of injected muscle [Time Frame: From initiation of treatment (Study Day 1) to end of treatment visit.] Strength measurements by hand-held or fixed-system dynamometry (quantitative muscle testing).
- 3. Percent change from baseline in function of injected muscle [Time Frame: From initiation of treatment (Study Day 1) to end-of-study visit (Study Day 141).] Function assessed by a battery of motor function tests; 4-stair climb, 6-minute walk test, gait analysis and performance of the upper limb (PUL) test
- 4. Change from baseline in patient-reported outcome (PRO) measures [Time Frame: From initiation of treatment (Study Day 1) to end-of-study visit (Study Day 141).] PRO assessed by health-related quality of life and disease burden, as measured by the FSHD Health Index questionnaire (FSHD-HI).

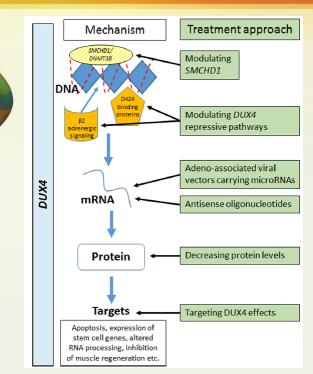
Treatment strategies for FSHD

Therapeutic	Mechanism(s) of action	Tested in patients?	References
Anti-inflammatory	Immunosuppression Inhibit pathologic processes downstream of DUX4	Yes	(101,102)
Antioxidant	Prevent oxidative stress	Yes	(103–106)
Antisense RNA	Inhibit pathologic processes downstream of DUX4 Enhance D4Z4 repression	No	(19,39,76,77,94–96,107,108)
	Inhibit DUX4 expression Inhibit pathologic processes downstream of DUX4		
BET bromodomain inhibitor	Enhance D4Z4 repression Inhibit DUX4 expression	No	(97)
Beta-2 adrenergic agonist	Increase muscle strength/mass Enhance D424 repression	Yes	(97,109–111)
Calcium channel blocker	Inhibit DUX4 expression Restore calcium dysregulation Inhibit pathologic processes downstream of DUX4	Yes	(112,113)
Exercise	Increase muscle strength/mass	Yes	(114–116)
GSK3β inhibitor	Enhance D4Z4 repression Inhibit DUX4 expression	No	(40)
Myostatin inhibitor	Increase muscle strength/mass	Yes	(117,118)
Steroid	Increase muscle strength/mass	Yes	(119)
Tissue transplantation	Enhance muscle regeneration Block DUX4 spreading	Yes	(120,121)
Tyrosine kinase inhibitor	Enhance muscle regeneration Inhibit pathologic processes downstream of DUX4	No	(98)
Unknown	Enhance D4Z4 repression Inhibit DUX4 expression Block DUX4 activity Block DUX4 spreading Inhibit pathologic processes downstream of DUX4	No	(77,99)

Campbell et al, 2018



Treatment strategies





QUESTIONS?

