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## **A Novel Class of CNS Drugs Administered Hours Post-Injury Alters Pathology Progression and Improves Neurologic Outcomes in Diffuse Axonal Injury Models**

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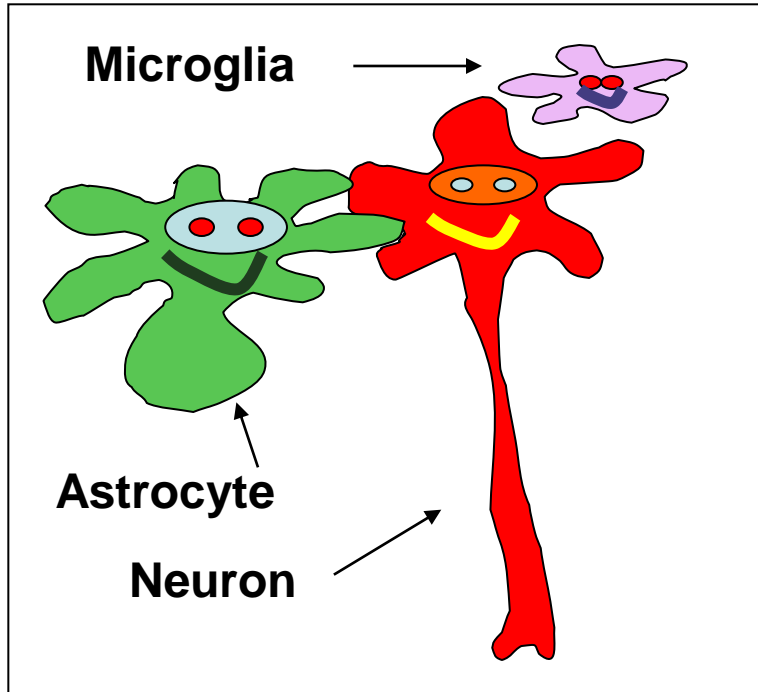
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Professor, Dept Anatomy & Neurobiology, University of KY, Lexington**

**Financial Disclosures:** P.I. on funded research in drug discovery for CNS disorders. Northwestern University has filed intellectual property protection and licensed to industry therapeutic candidates

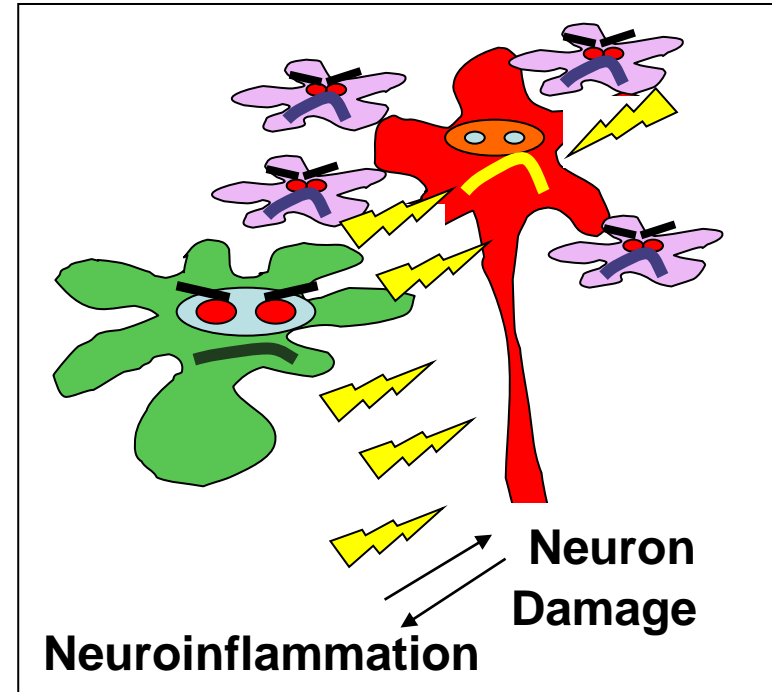


# The Janus Face of Glial Activation

## Healthy Brain



## Neurodegenerative

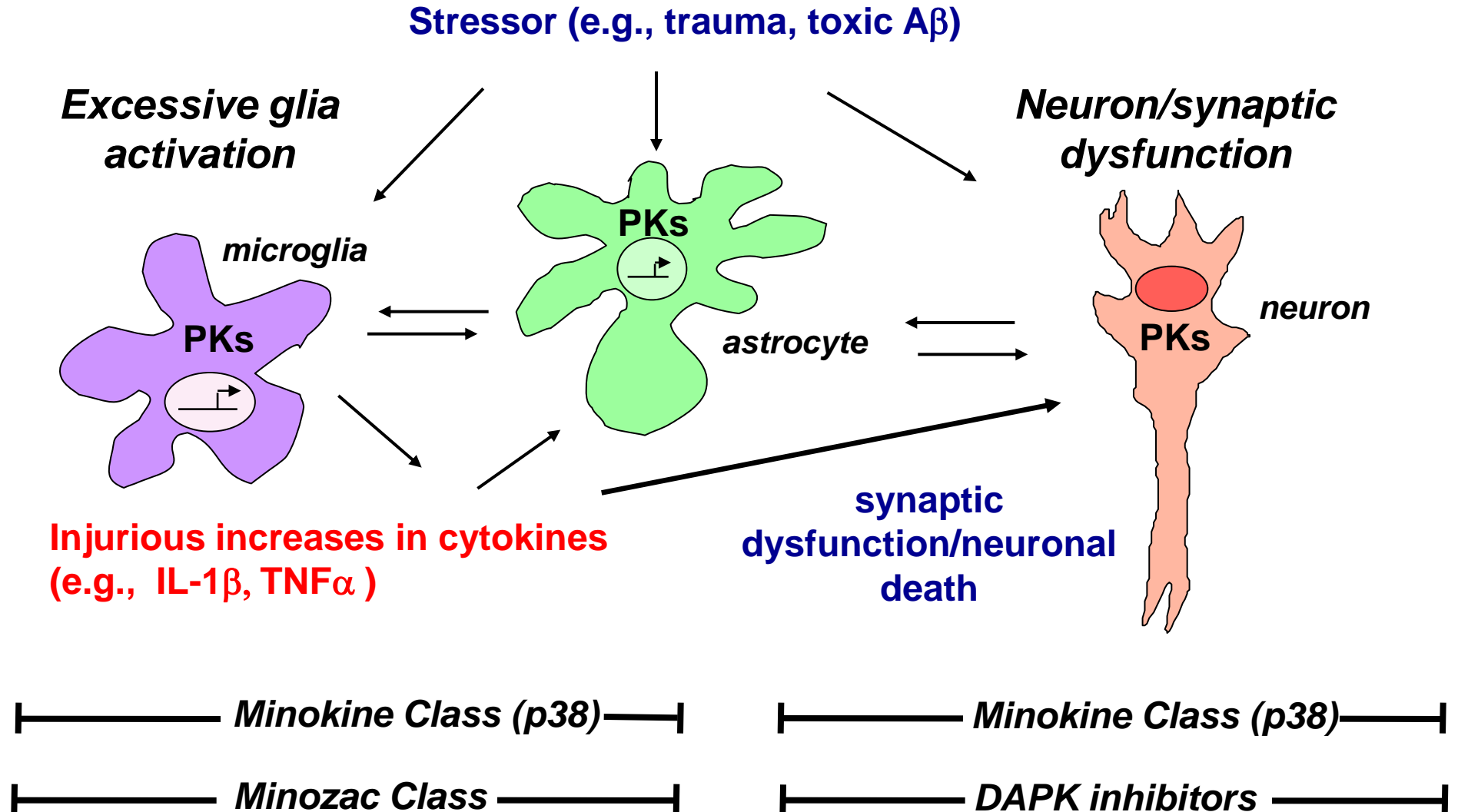


Glia respond to stimuli by undergoing activation  $\Rightarrow$  Normally beneficial

Chronic, unregulated glia activation  $\Rightarrow$  Detrimental neuroinflammation

# Targeting the Up-Regulated Cytokine - Synaptic Dysfunction Cycle

**Therapeutic Goal: attenuate pathology progression by appropriate dosing with intracellular signal transduction targeted small molecules**



# A Staged, Recursive Discovery Engine for Novel, Bioavailable, CNS-penetrant, Stable, Candidate Drugs

## I. Campaign/Molecule Design stage

Design and chemical diversification of fragment or core scaffold  
*Includes pharmacoinformatics*

## II. In Vitro Activity Stage

Single Molecular Target-Based Approach

Phenotypic or Pathway-Based Approach

Concentration dependent, selective Inhibition of activity

Enzyme Assays

Cell-Based Assays

**“GO”**

Medicinal Chemistry Refinement

**“NO GO”**

## III. Pharmacology Assessment Stage

e.g., In vitro metabolic stability  
CYP 2D6 status  
Potential for Oral/CNS bioavailability  
NOEL

**“GO”**

## IV. In Vivo Efficacy Stage

In vivo efficacy in animal models with targeted MOA

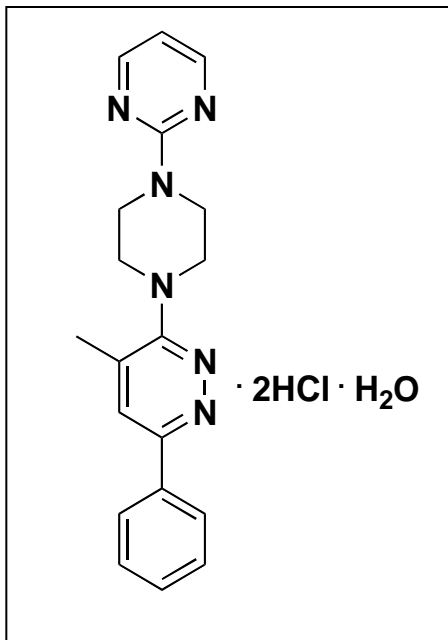
**“GO”**

GMP scheme, Preclinical GLP, IND, FIH

## Example Novel Candidate with Desired Properties: MW151

Compound is within multi-property range characteristic of successful drugs with high potential for BBB penetration and low potential for key ADMET liabilities

*Chico et al., 2009, Nature Rev Drug Discovery 8: 892; Hu et al., 2007, Bioorg Med Chem Lett 17: 414*



- MW = 423.34
- Aqueous solubility >332 mg/ml
- pKa (potentiometric titration): 3.75 ± 0.06
- Experimental lipophilicity (octanol/water), LogP = 2.3
- Melting point >215°C
- Oxidative chemical stability:
  - 92% remaining-aqueous
  - 100% remaining-acidic
  - 74% remaining-basic

# Potential Indications for MW151

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## Observation:

- Extensive animal studies and clinical observations suggest that up-regulated proinflammatory cytokine production contributes to neuropathological sequelae.

## Question:

- Is MW151 effective in animal models of CNS disorders where proinflammatory cytokine up-regulation is a characteristic of disease progression?

## Approach:

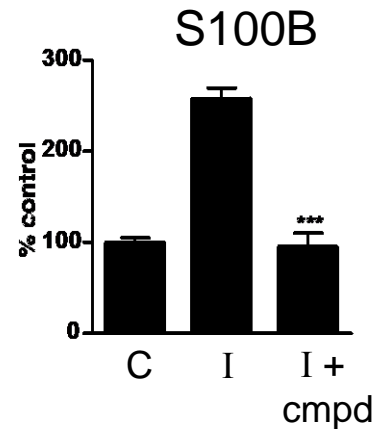
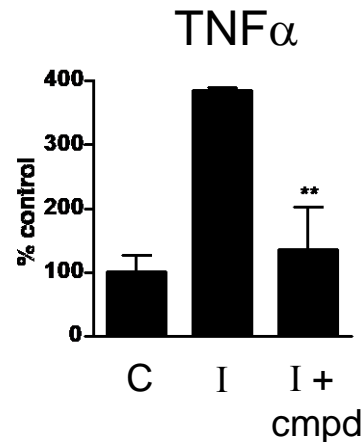
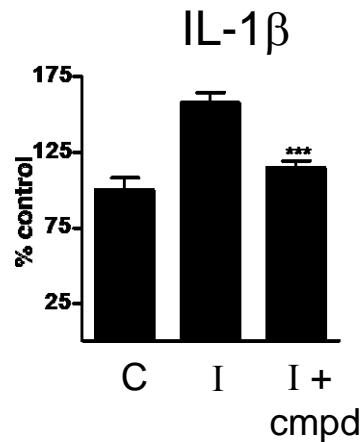
- Test efficacy in animal models using consideration of therapeutic time windows.

# *In vivo* Efficacy Screen in AD Mouse Model

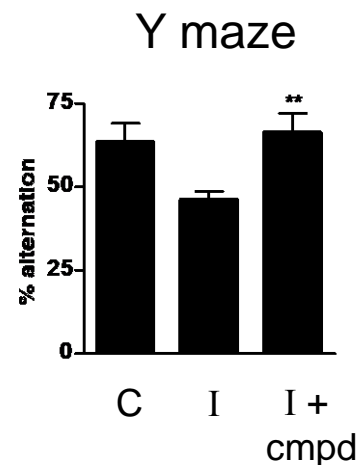
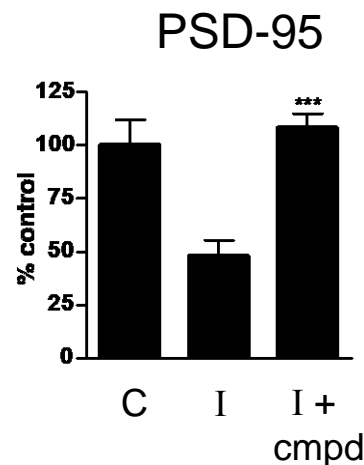
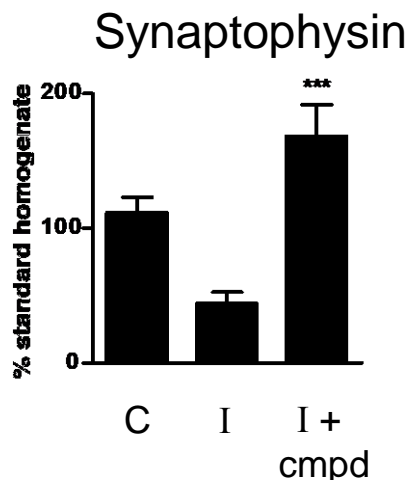
oral administration of MW151 attenuates human A $\beta$ -induced brain injury



**Compound is efficacious *in vivo* at low doses**



*Attenuation of excessive proinflammatory cytokine production towards basal, and reduction of synaptic dysfunction and hippocampus-dependent behavior deficits*



MW151 (2.5 mg/kg/day) or saline vehicle administered by oral gavage once daily for 2 weeks, once daily Y-maze for 10 days prior to sacrifice at day 60; cytokines and synaptic proteins measured in hippocampal extracts.

# Potential Indications for MW151

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## Observation:

- MW151 is efficacious in models of AD-relevant pathophysiology, when administered at a low dose (2.5 mg/kg/day) in a therapeutically relevant time window, after the start of injury.

## Question:

- Is MW151 effective in an animal model of an **acute** CNS injury where proinflammatory cytokine up-regulation is a characteristic of pathology progression and later neurologic outcomes?

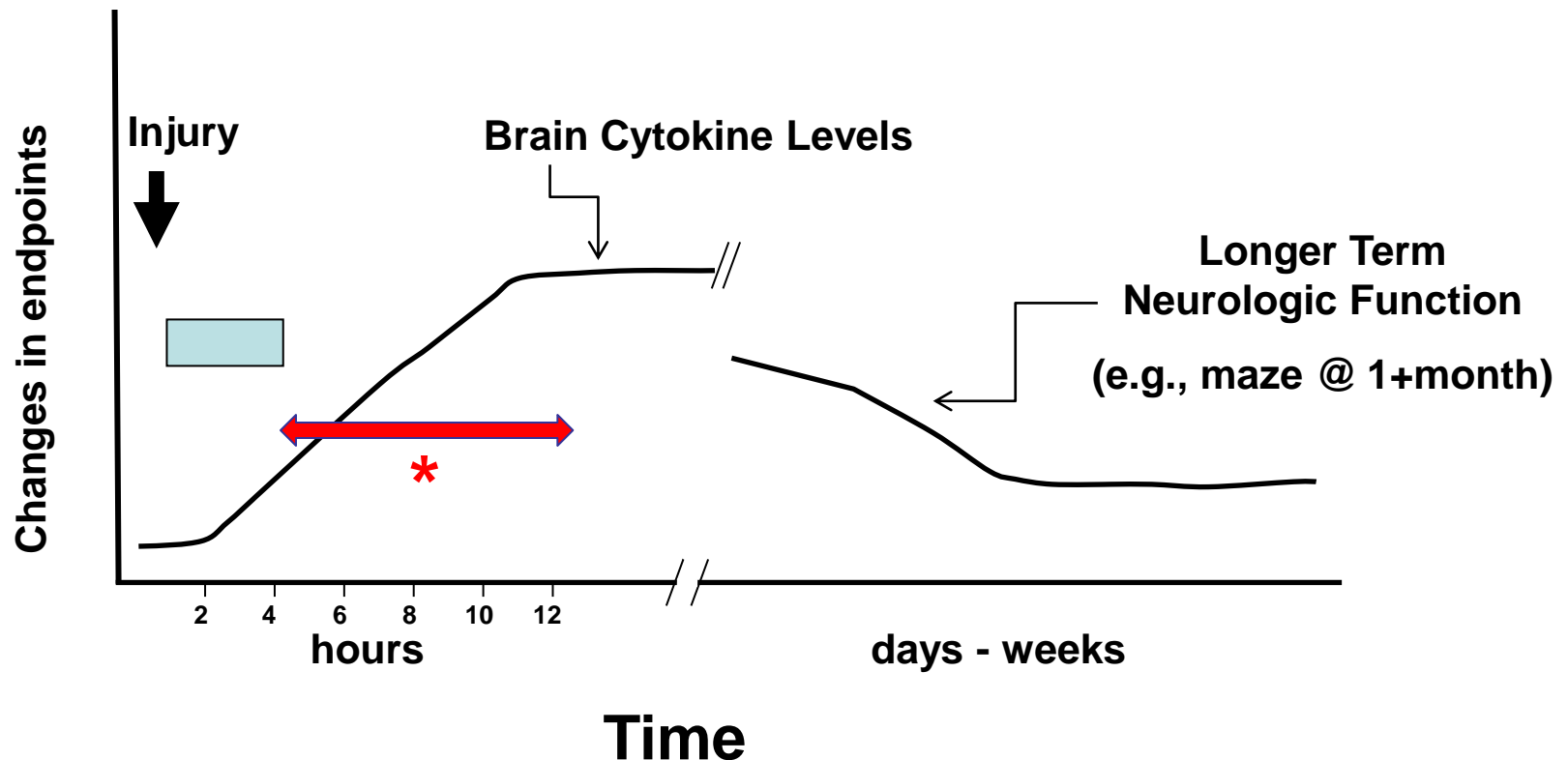
## Approach:

- Test efficacy in a model of TBI using consideration of therapeutic time windows.



# *In vivo* Efficacy Screen: rationale in closed head TBI model screening

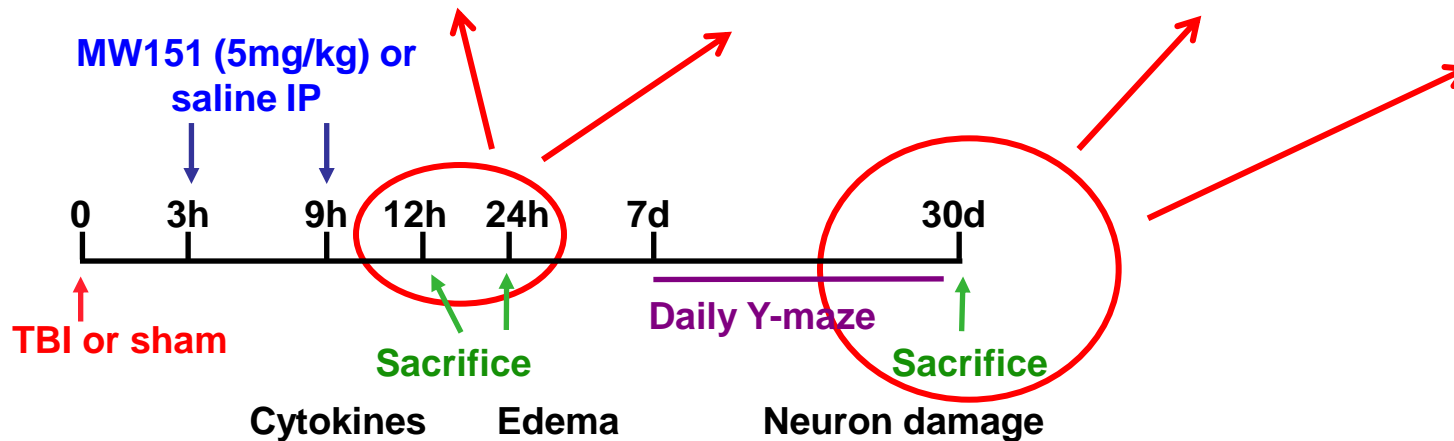
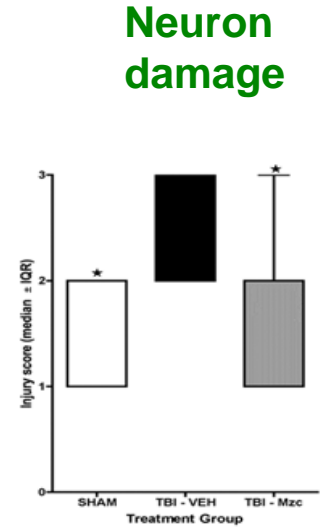
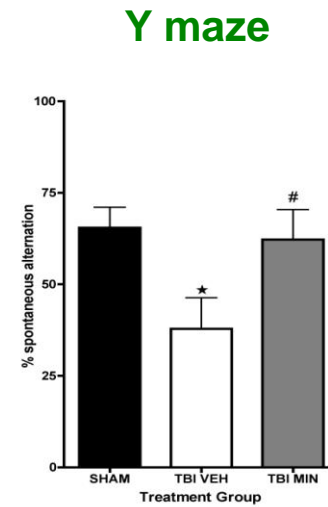
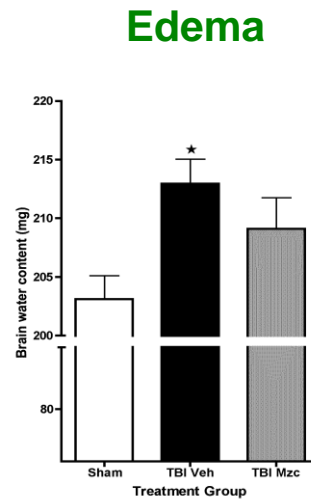
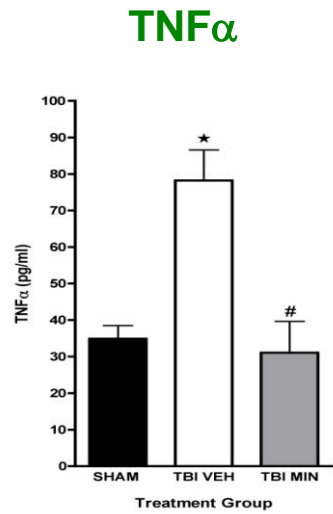
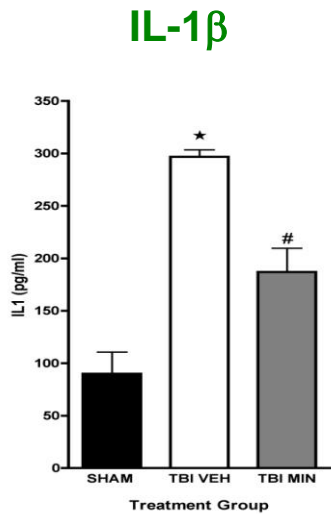
\* Does post-injury compound treatment within **delayed window** yield modulation of the targeted process and the desired morbidity outcomes?



☐ = time gap of injury-to-trauma center

# MW151 Post-Injury Treatment in Cortical Impact TBI Model of Diffuse Axonal Injury is Efficacious

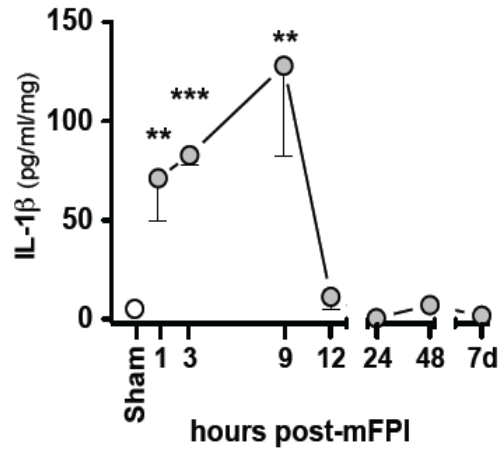
addresses time window and yields pathology progression modification



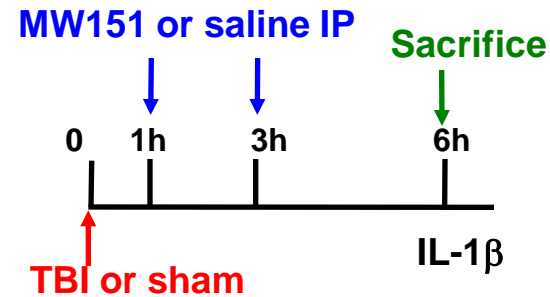
Lloyd et al., 2008, J Neuroinflammation 5:28

# Post-Injury Treatment in a Midline Fluid Percussion TBI Model of Diffuse Axonal Injury is also Effective

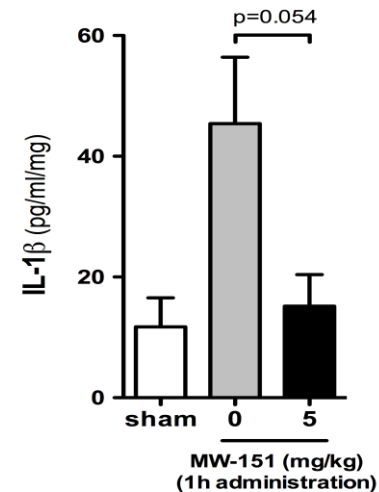
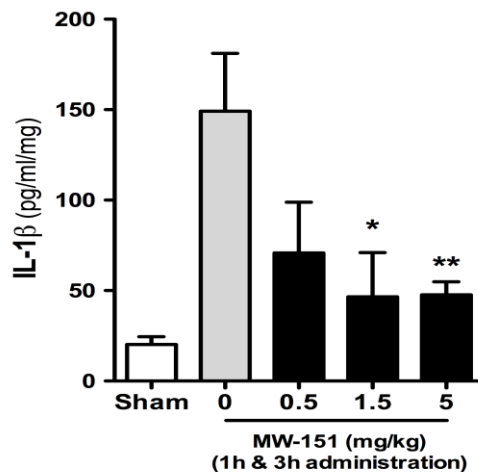
## A. Cytokine surge after TBI



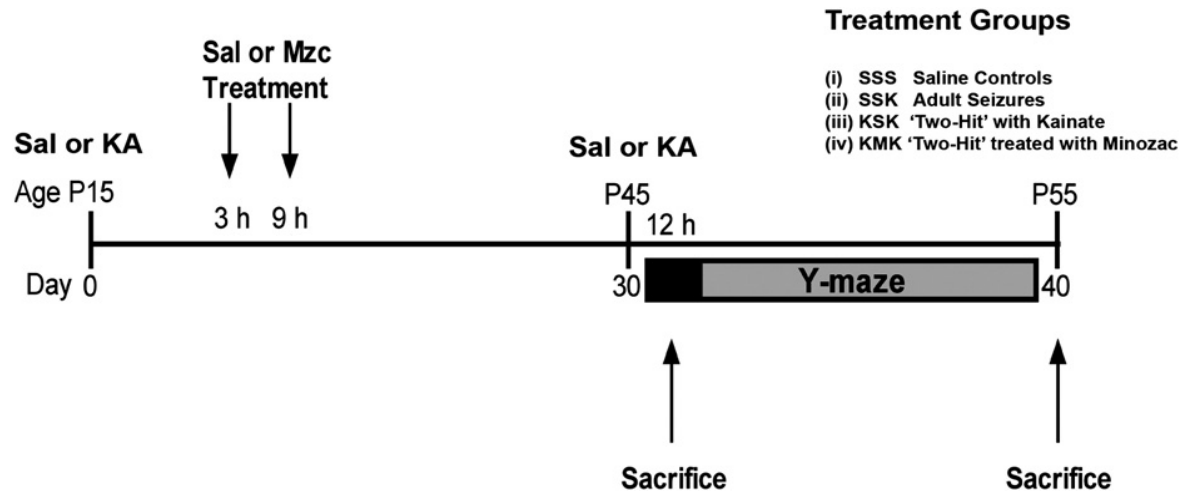
## B. Therapeutic paradigm



## C. MW151 suppresses injury-induced brain IL-1 $\beta$ levels

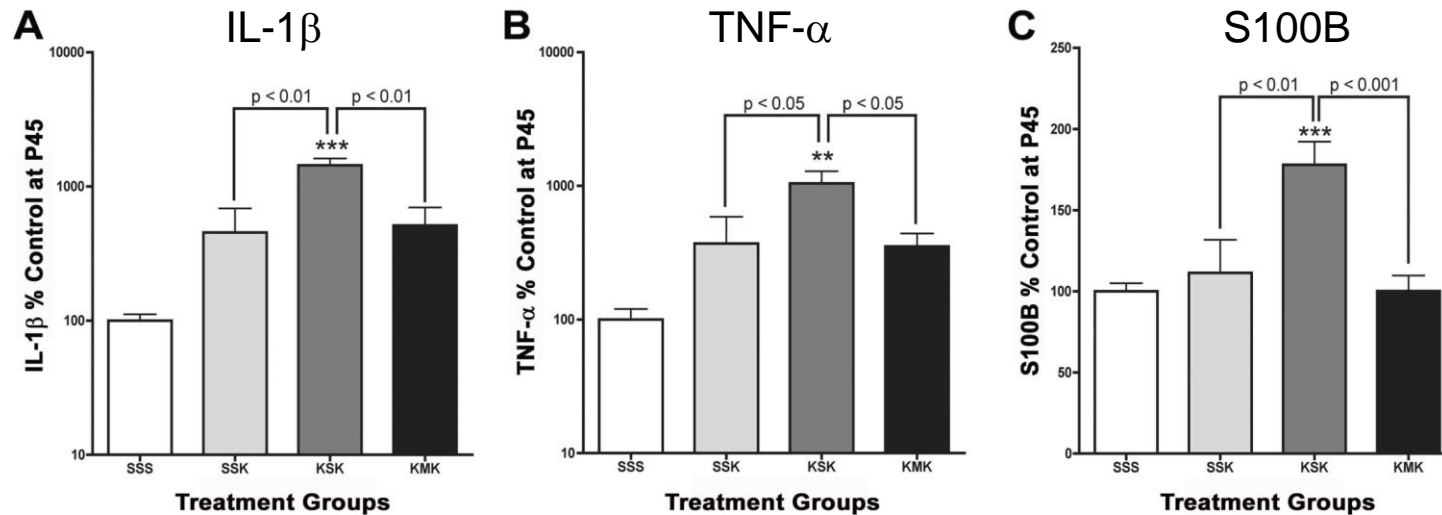


# MW-151 is efficacious in “two-hit” seizure model



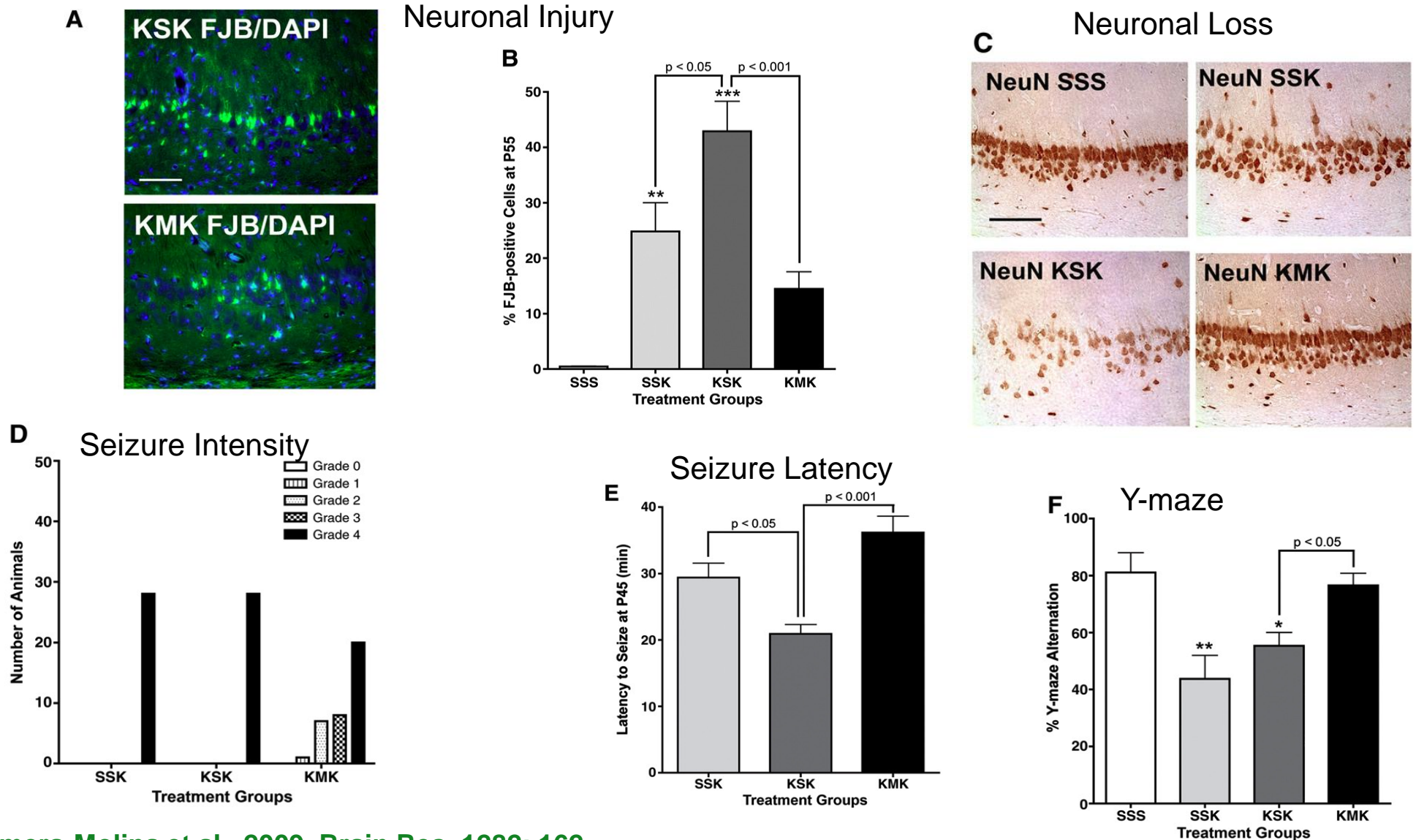
**MW-151 treatment after the 1st hit prevented the enhanced increase in cytokine levels at P45.**

Treatment with saline or Mzc following early-life seizures (5 mg/kg i.p. at 3h & 9h after injury). Animals allowed to recover for 30d, then administered 2nd hit of KA or saline.



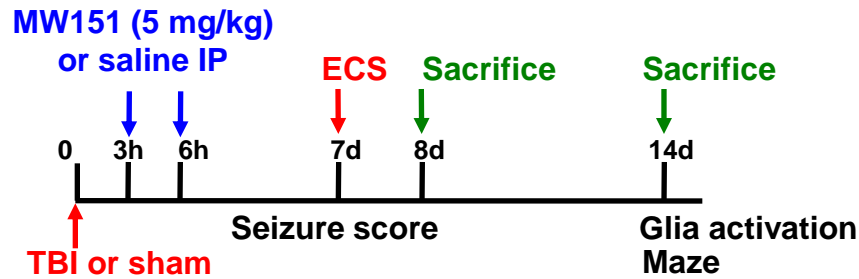
# MW-151 is efficacious in “two-hit” seizure model

MW-151 treatment after early-life seizures prevents the increased neuronal injury, susceptibility to seizures, and neurobehavioral impairment induced by a second hit in adulthood.

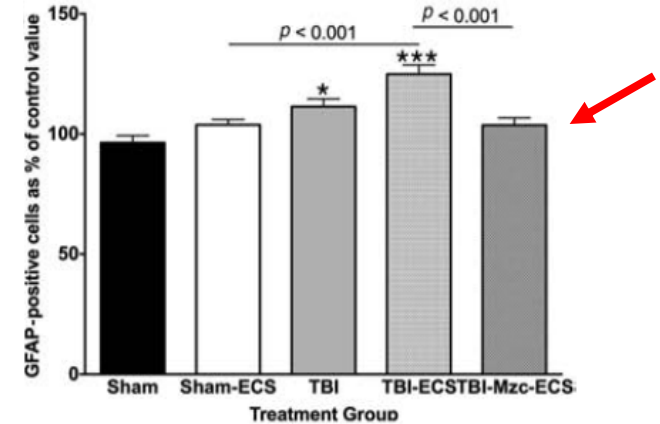


# MW151 is Efficacious in “Two-Hit” TBI-induced Epilepsy Susceptibility Model (Electroconvulsive Shock)

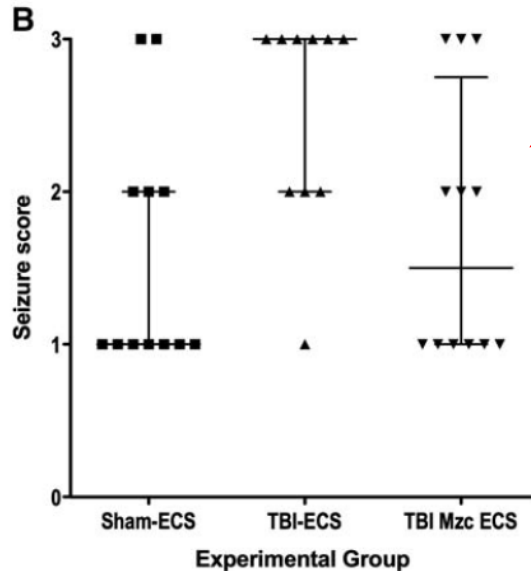
MW151 treatment after 1st hit (TBI) prevents increased seizure susceptibility after 2nd hit (ECS).



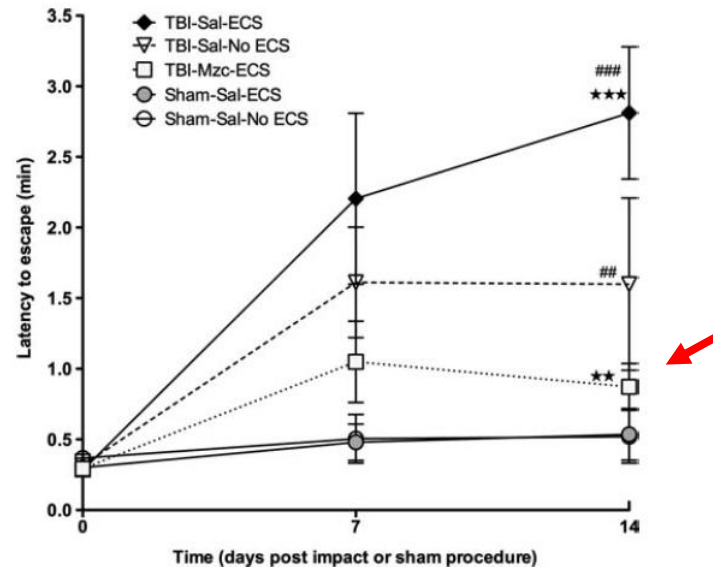
GFAP- 14d



Seizure score



Barnes maze



Chrzaszcz et al.  
(2010) J Neurotrauma  
27: 1283-1295

# MW151 Effective in Animal Models of Multiple CNS Disorders where Glia Activation/Inflammatory Cytokines Contribute to Pathophysiology

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- **AD-relevant pathology models:**

Hu et al., 2007, Bioorg Med Chem Lett 17:414  
AD Tg (APP/PS1 KI) unpublished

- **TBI models of diffuse axonal injury:**

Lloyd et al., 2008, J Neuroinflammation 5:28  
mFPI unpublished

- **EAE model:**

Karpus et al., 2008, J Neuroimmunology 203:73

- **Seizure-induced neurologic sequelae:**

Somera-Molina et al., 2007, Epilepsia 48:1785

- **Two-hit models:**

Somera-Molina et al., 2009, Brain Res. 1282:162 (KA, KA)  
Chrzaszcz et al., 2010 J. Neurotrauma 27:1283 (TBI, ECS)

# Summary and Conclusions

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- **Therapeutic intervention with MW151 in clinically relevant time windows attenuates the inflammatory cytokine up-regulation associated with synaptic dysfunction, with resultant improvement in neurologic and cognitive outcomes in diverse animal models of brain injury.**
- **Two-hit model data raise the possibility that intervention in with this new class of selective attenuators of glia activation might attenuate later in life susceptibility to other brain disorders.**
- **Novel, orally active, brain-penetrant drug candidates are available for clinical development into potential disease-modifying therapies for multiple CNS disorders.**



# Acknowledgements

## Current group members:

Aaron Bachstetter

Edgardo Dimayuga

Danielle Goulding

Bob Sompol

Bin Xing

Rachel Rowe

## Former:

MaryAnn Chrzaszcz

Jeffrey Craft

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Charu Venkatesan

## Collaborators:

D. Martin Watterson, NU

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William Karpus, NU

Jonathan Lifshitz, UK

Sally Frautschy, UCLA

## Funding:

NIH (NIA and NINDS), AHAF, ADDF,  
Alzheimer's Association Zenith Award,  
Lyndsey Whittingham Foundation



National Institute  
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