

# **Biotechnological approaches to diagnosis and treatment of rare genetic disorders**

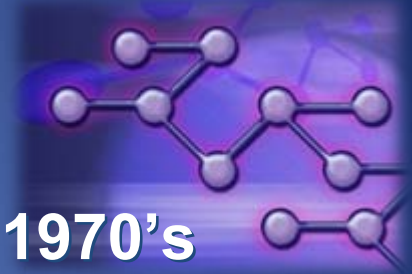
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Conference on Biotechnology, Istanbul, Turkey  
November 8, 2007

## Biotechnological approaches to diagnosis and treatment of rare genetic disorders

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- **Biotechnology Industry originated in the 1970's**
- **More than 200 new therapies and vaccines**
- **Over 400 potential drugs currently in Clinical Trials**
- **Hundreds of medical diagnostic tests**

## From concept to realization

- Around 30.000 known diseases worldwide
- Worldwide Investment in R & D steady rise over past 10 years
- Number of innovative medicinal products on the global market was only 40 per annum.
- On average development of new drug takes 8 -12years and 895 mio Euros
- From the decision to develop a drug to finished product requires around 800 steps
- Only ONE out of the 5.000 to 10.000 substances tested gets as far as Market Authorization
- Todays challenge : development of Orphan Drugs



# *Biotechnological approaches to diagnosis and treatment of rare genetic disorders*

## ❖ Biotechnology – today:

- Isolation
- Insertion into a vector
- Transformation
- Test to isolate genetically modified organism

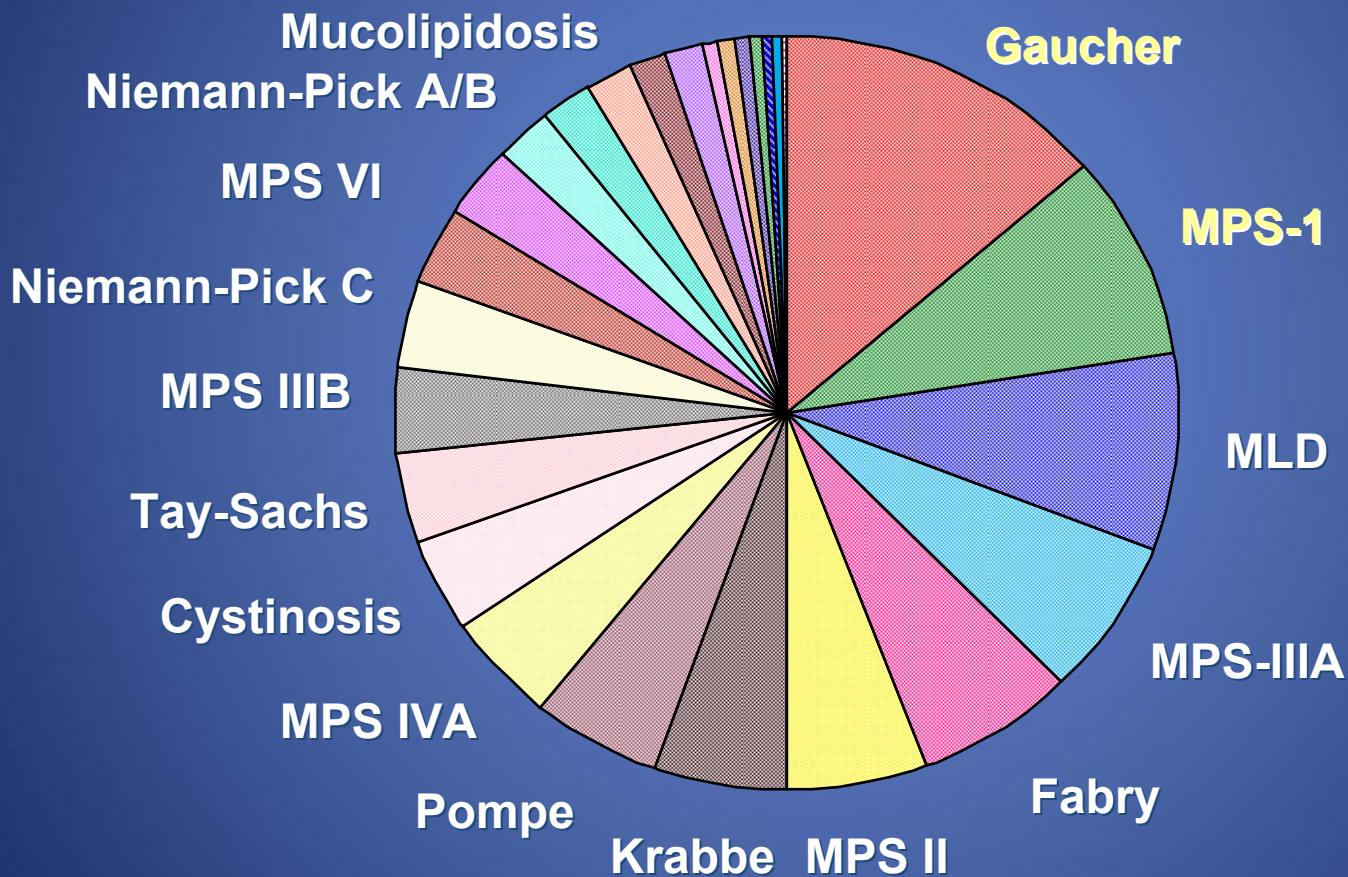


## ❖ Further sophistication:

- Recombinant DNA technology in Human cells
- Gene activation techniques



## Propensity of Lysosomal Storage Disorders



## Biotechnological approaches to diagnosis and treatment of rare genetic disorders

Disease	Product	Source	Company	Missing Enzyme
Gaucher Disease	Cerezyme®	CHO cells/carbohydrate remodelling	Genzyme	glucocerebrosidase
Gaucher Disease	GA-GCB	Human cell line: gene activation / mannosidase inhibition	Shire	glucocerebrosidase
Fabry Disease	Fabrazyme™	CHO cells	Genzyme	$\alpha$ galactosidase A
Fabry Disease	Replagal™	Human cell line: gene activation	Shire	$\alpha$ galactosidase A
Hurler Syndrome	Aldurazyme™	CHO cells	Biomarin	$\alpha$ -L-iduronidase
Hunter Syndrome	Elaprase	Human cell line	Shire	iduronate sulfatase
MPS VI	Naglazyme	CHO cells	Biomarin	arylsulfatase B
Pompe	Myozyme	CHO cells	Genzyme	acid $\alpha$ -glucosidase

### ❖ What is Hunter Syndrome (Mucopolysaccharidosis type II /MPS II)?

A rare X-linked genetic disorder which predominantly affects males deficiency of lysosomal enzyme iduronate-2-sulfatase (I2S) results in tissue accumulation of glycosaminoglycans (GAG), Multi-systemic, heterogeneous disease, results in severe morbidity and early mortality Symptoms include heart, airway, bone and liver abnormalities and CNS involvement in severe cases








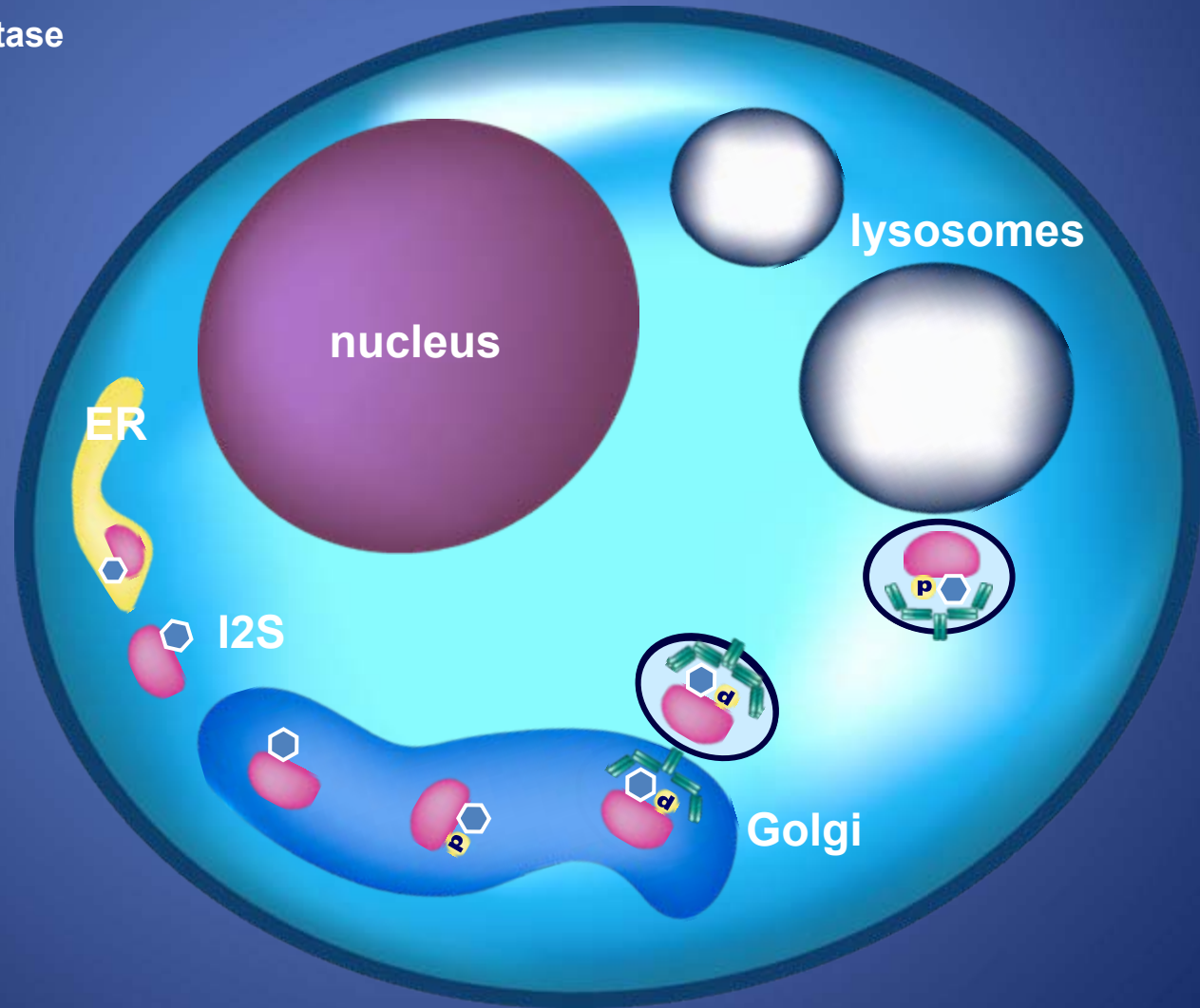
### What is Elaprase?

Human iduronate-2-sulfatase produced by genetic engineering technology an ERT which in clinical studies has been shown to either stop or ameliorate the clinical manifestations of the disease

# Normal I2S Cellular Processing

I2S = iduronate-2-sulfatase

-  I2S enzyme
-  mannose
-  phosphate
-  M6P receptor
-  transport vesicle





# GAG Accumulation

I2S = iduronate-2-sulfatase



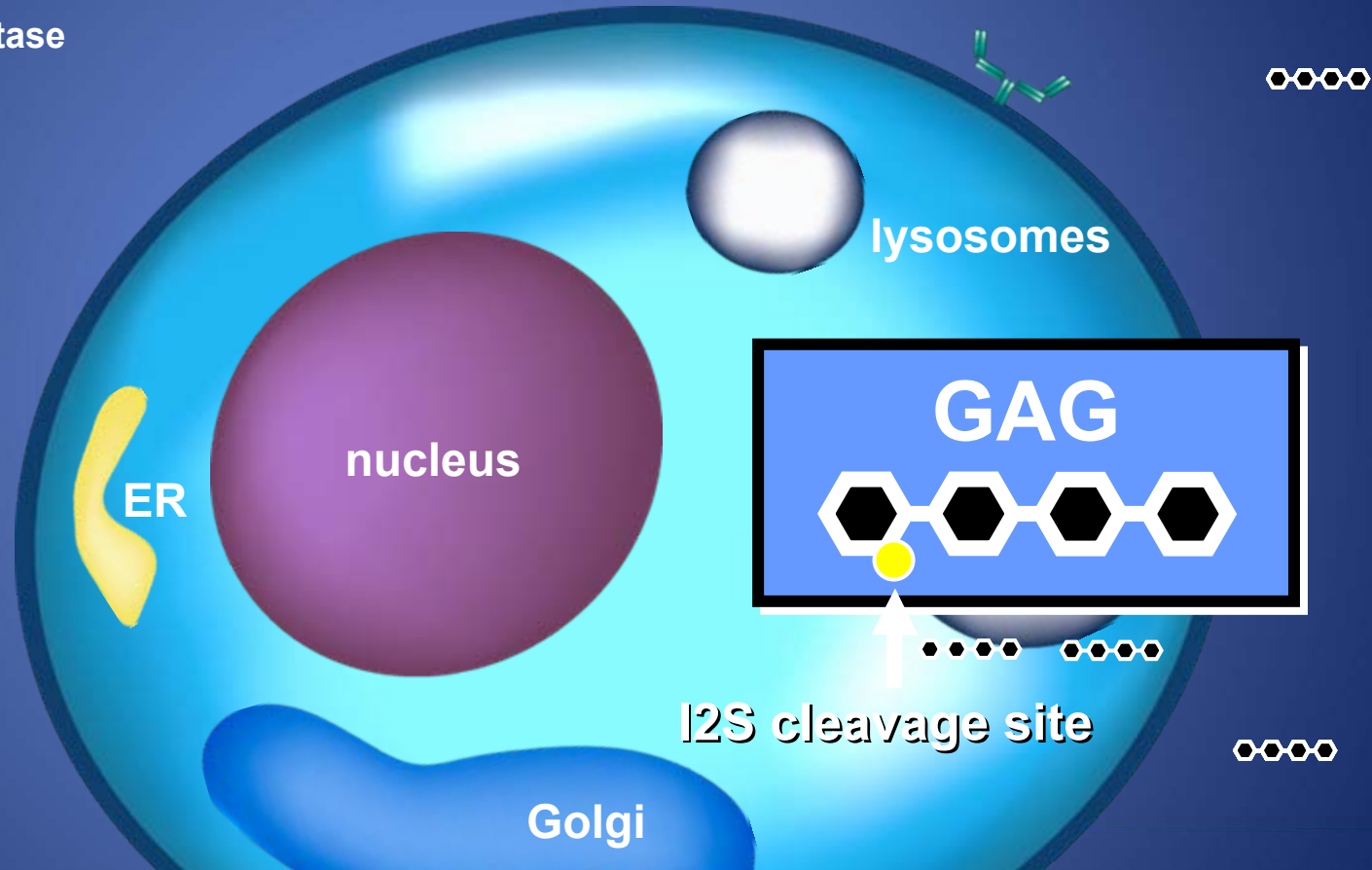
M6P receptor



transport vesicle

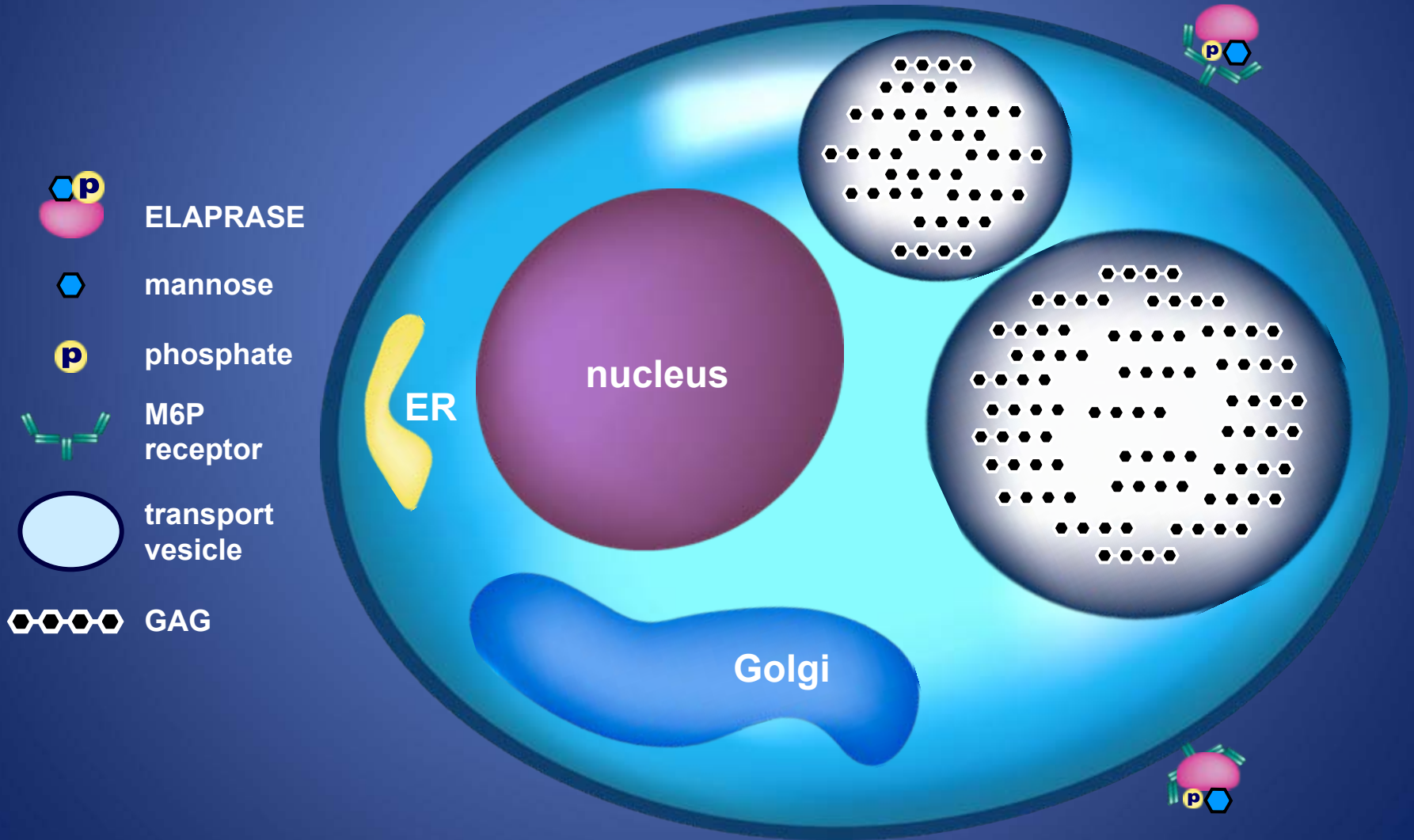


GAG








In the absence of I2S, the GAG degradation pathway is blocked and lysosomes fill up with GAG.

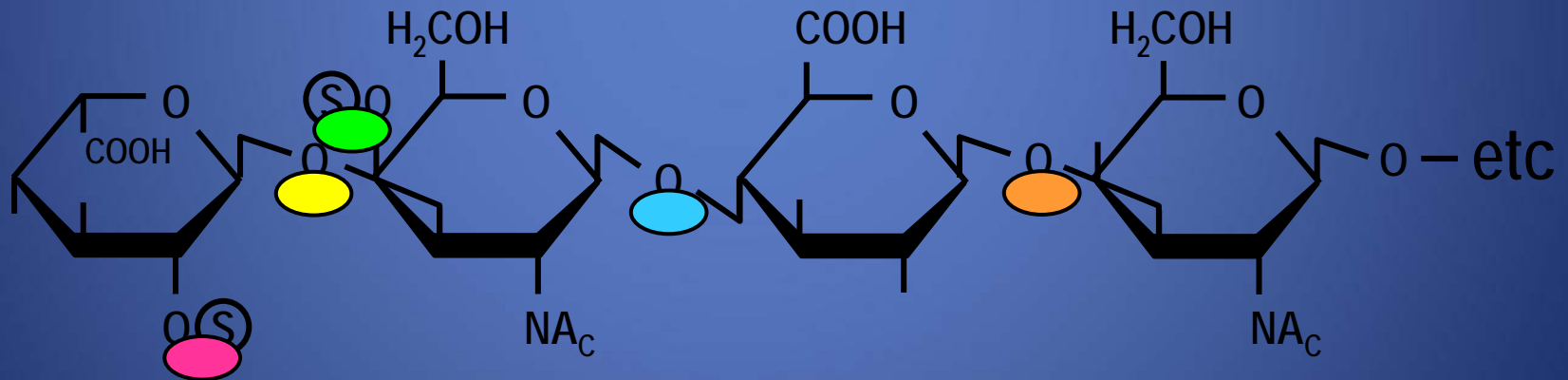
# Mechanism of Action of ELAPRASE™ (idursulfase)



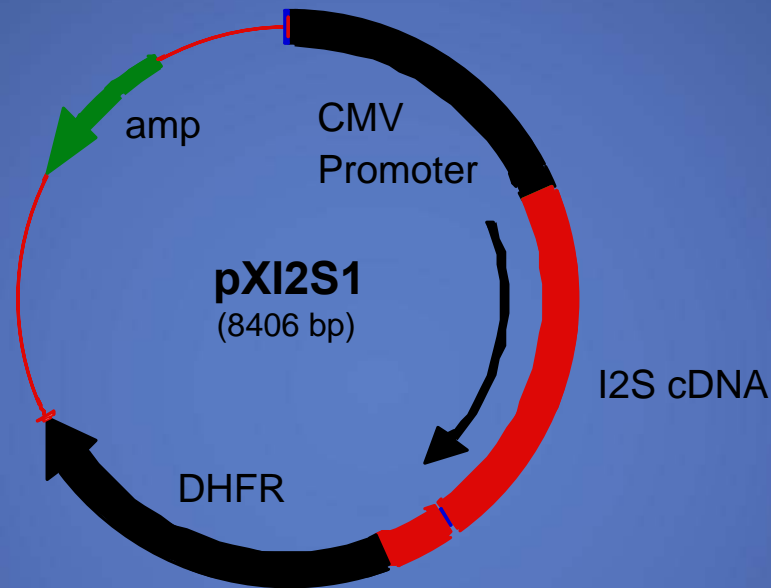
# Degradation of dermatan sulfate<sup>1</sup>

-  I2S enzyme
-   $\alpha$ -L-iduronidase
-  N-acetylgalactosamine 4-sulfatase
-   $\beta$ -hexosaminidase A, B, S
-   $\beta$ -glucuronidase

I2S = iduronate-2-sulfatase  
NAc = N-acetylgalactosamine



## Engineering a Human Cell Line for Manufacturing Recombinant Human Iduronate-2-Sulfatase (I2S)



- ❖ An I2S production cell line was created by transfection of human HT-1080 cells with the pXI2S1 plasmid using an electroporation technique.
- ❖ Cell lines expressing I2S were isolated by stepwise methotrexate (MTX) selection (DHFR gene) and cloning.
- ❖ From this process a clonal cell line was isolated, expanded in culture and further passaged to create cell banks suitable for manufacturing I2S

## Manufacturing: From concept to realization

- Cell line development
- Cell fermentation
- Down stream processing
- Product release and documentation



A bioprocess in a cell development room



# Protein Production Technology

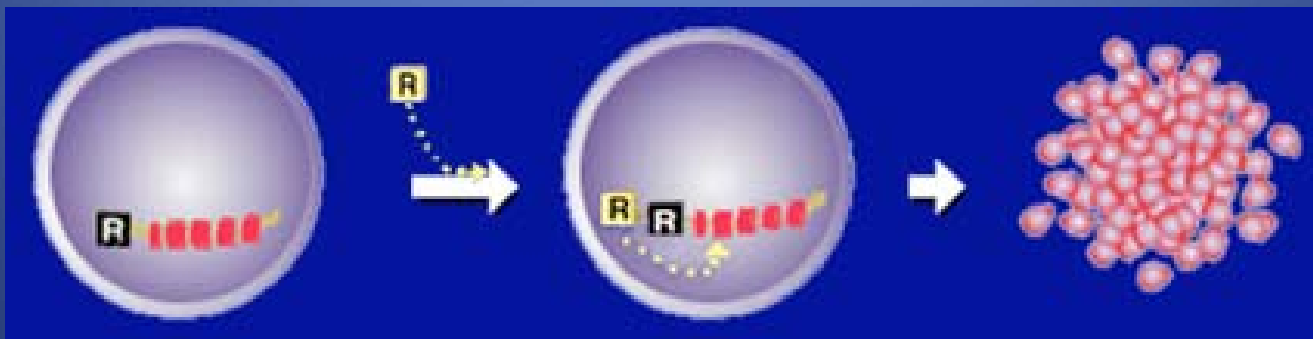
## Traditional Approach



Human Cell

Hamster cell

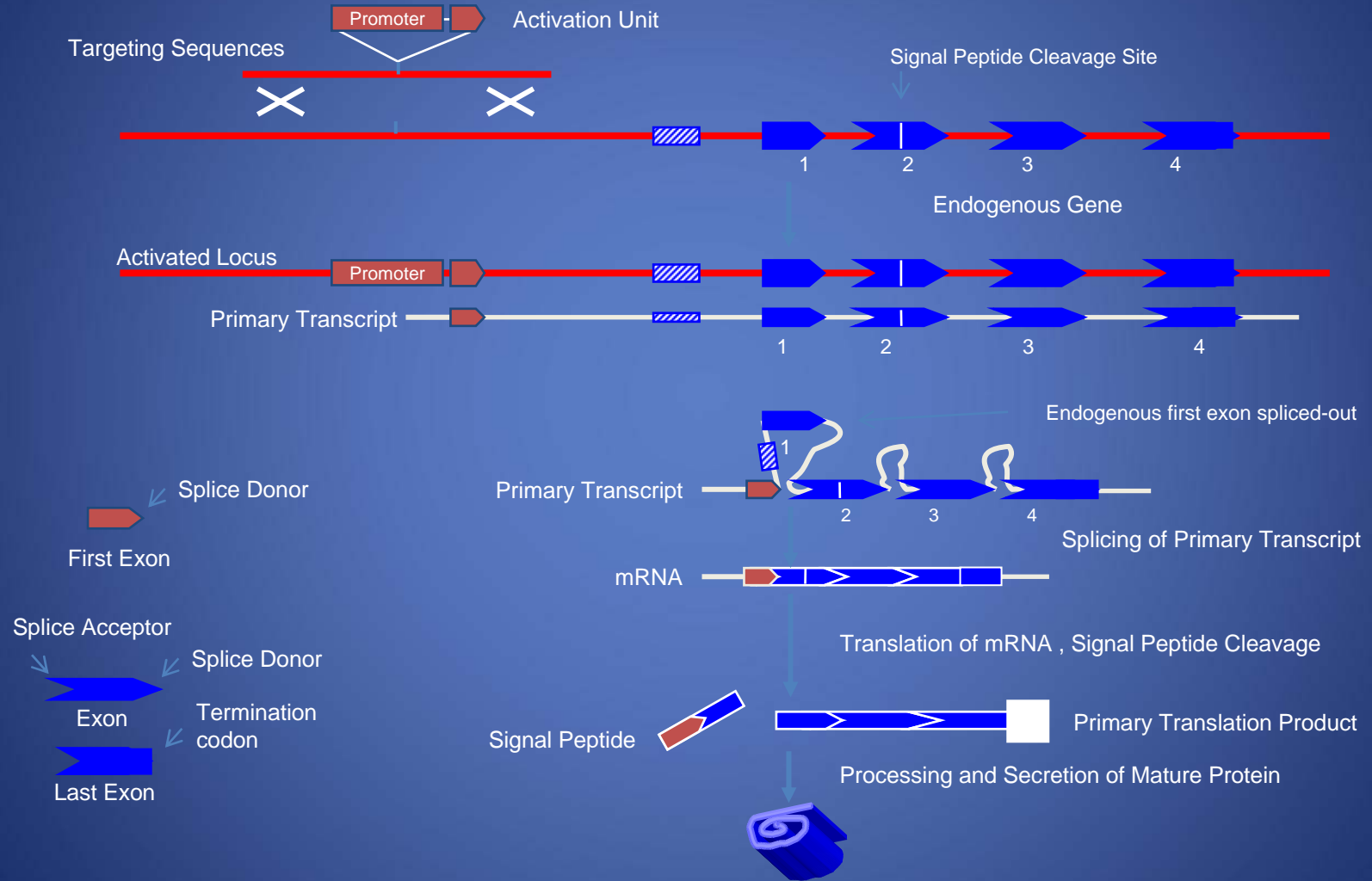
## Shire novel method



Human Cell

Human Cell

# Gene Activation : Detailed View



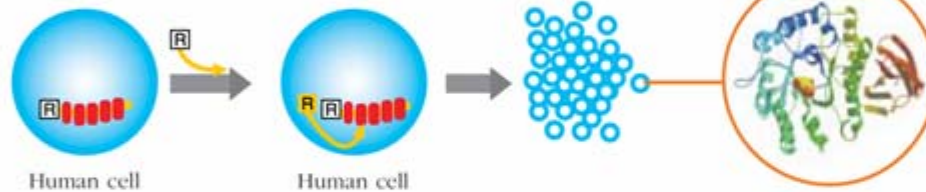
# Agalsidase alfa:

## Human cell-derived Enzyme Replacement Therapy

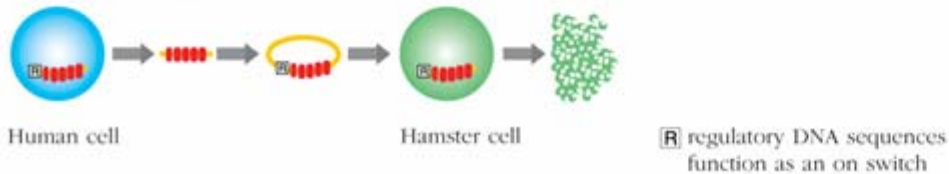
Produced by unique gene activation technology

The only human cell-derived agalsidase

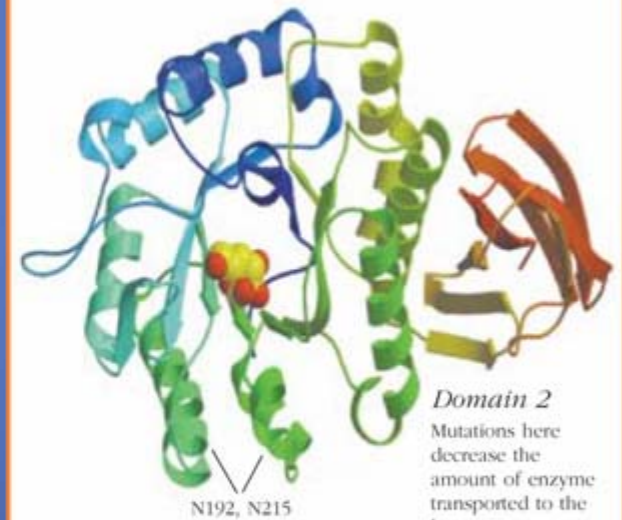
*Gene activation: Shire HGT*



*Classical approach*



*Structure of human alpha-galactosidase<sup>1</sup>*



*Domain 2*  
Mutations here decrease the amount of enzyme transported to the lysosome

*Domain 1*

Most frequent mutations here are at N192 and N215; such mutations disrupt the targeting of the glycoprotein to the lysosome



# Human cell line vs. CHO production

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Only human cells can provide truly human glycosylation - which is important for

- **Proper biodistribution and cellular targeting**
- **High specific activity of the protein**
- **Low immunogenicity. Non-human cells add on sugar moieties which act as antigenic epitopes.**

## Importance of Glycosylation in ERT

- ❖ **Sialic acid residues**  
are essential for minimising hepatic uptake (via asialoglycoprotein receptors), resulting in enhanced distribution to target organs (kidney, heart)
- ❖ **Mannose-6-phosphate (M6P) residues**  
are essential for M6P-receptor mediated internalisation and lysosomal targeting
- ❖ **Human cells**  
produce an appropriate ratio of sialic acid to M6P residues

# Importance of Fully Human Glycosylation for Safety

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- Unlike non-human cell lines, human cells do not form antigenic sugar epitopes, thus minimising risk of immune mediated reactions
- Clinical safety profile is consistent with human glycosylation
  - low level IgG Ab titres which decreases with time
  - mild infusion reactions which decrease with time
  - no evidence of immune complex deposition
  - allows rapid infusion time
  - safe for home infusion therapy

# Diagnosis

## Enzyme determinations/molecular genetic diagnosis

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- **Hunter (MPS II)**

I2S activity in white blood cells or skin fibroblasts.

- **Fabry**

*Males:* Alfa-galactosidase A in plasma, leukocytes or fibroblasts

*Females:* Very low levels confirm diagnosis. Often molecular genetic diagnosis is required



# Diagnosis

## Enzyme determinations/molecular genetic diagnosis

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- **Mb. Gaucher**

Glucocerebrosidase in white blood cells  
or skin fibroblasts

Molecular genetic diagnosis provides  
diagnostic verification

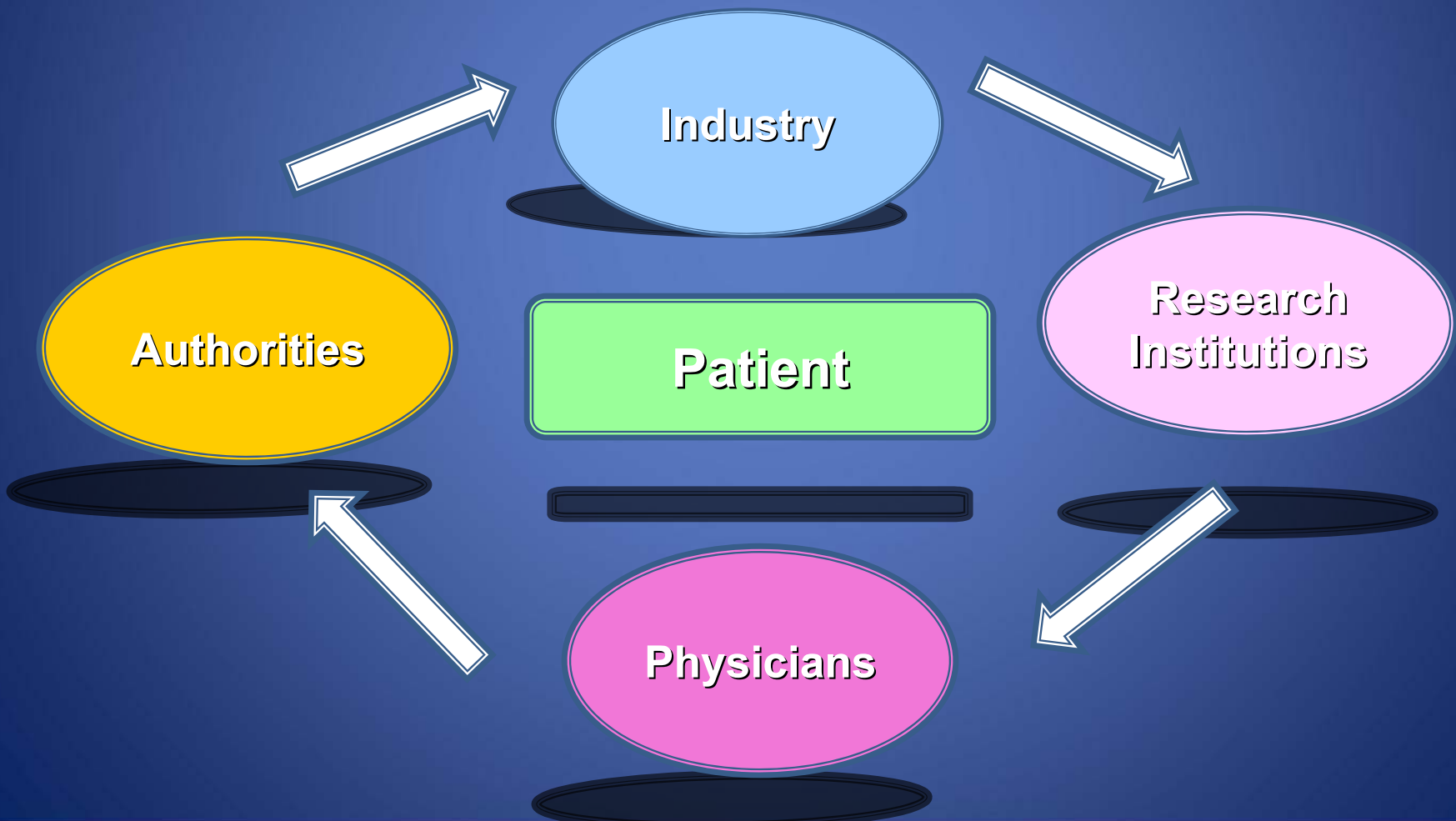


- **MPS I**

Alfa-L-iduronidase in cell extracts of peripheral  
blood leukocytes or cultured skin fibroblasts

# Biotechnological approaches to diagnosis and treatment of rare genetic disorders

- Diagnosis for rare, debilitating, life-threatening diseases require the cooperation of all involved parties



## In summary:

- Development of new methods for 2nd and 3rd generation of Biotechnology products
- Society drives and regulates technologies
- Invest in technologies tailored to help countries building capacity in communities, through education, training etc.
- Envision a future in which Biotechnology harnessed responsibility to help all nations and all people

