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In Vitro Liver Models And Their Applications For NASH

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- 1 in 3 adults in the U.S. has non-alcoholic fatty liver disease
- 75% of people with NASH also have type 2 diabetes
- Fastest growing disease in China and India.
- Approximately 50 active programs with 38 distinct therapeutic targets



An ideal in vitro liver model would fulfill various unmet needs:

- Unbiased novel target discovery
- Development of noninvasive translational biomarkers for diagnosis and monitoring disease.
- Understanding/predicting efficacy differences, in stratified sub-populations (Personalized medicine).
- Safety assessment under disease-like conditions.



Underlying Mechanisms of Steatohepatitis are Complex



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Existing in vitro Models: Challenges and Opportunities

Species	Cell Type(s)	Origin
Human	Hepatocytes	Primary (Healthy/Patient)
	Huh7	Hepatoma
	HepG2	Hepatocellular Ca
	Hepatic Stellate Cells	Healthy/Patient
	LX2 Stellate Cell line	Immortalized
	Hepatocytes + Adipose Cells	
	Huh7 + LX2	
Canine	Hepatocytes	Primary
Rat	Primary Hepatocytes	
	H4IE	Immortalized
	H4IEC3	Immortalized
	PAV-1	Immortalized
Mouse	RAW 264.7 Macrophages and AML-12 Cell co- cultures	Immortalized

Challenges of existing models employing static flat-plate cell cultures:

- Dedifferentiation and loss of CYP activity.
- Non-physiological levels of glucose and insulin and loss of insulin sensitivity.
- Altered baseline inflammatory state.
- Hypoxia-reperfusion on media change.
- Non-relevant drug and metabolite concentration profiles

Opportunities for improvement:

- Organotypic approaches (3-D, heterotypic cell interactions, flow).
- Physiological media formulations and drug concentrations based on clinical pharmacokinetics
- Use of Translational biomarkers.
- Big data –omic approaches

Recreating Physiological Milieu and Parameters in a 3D Culture Configuration





- 3D cell configuration modeled on sinusoid with hepatocytes \pm non-parenchymal cells.
- Simultaneous perfusion and hemodynamics allows control of drug, nutrient and oxygen gradients
- Effluent and cells can be assessed from top and bottom separately.



Liver-like Polarized Morphology and Function Maintained Over Time



Dash et al SOT 2013, Marukian et al AASLD 2013



Drug Responses Exhibited at Clinically Relevant Concentrations



Rumack-Matthews nomogram for serum concentration thresholds for clinical treatment of Acetaminophen poisoning.

Figler et al AASLD 2015.



- Efficacy and toxicity responses seen at concentrations that match clinical therapeutic exposures.
- Over 30 drugs assessed for mechanistic differences using transcriptomics. (NIH SBIR Award R44 DK091104-02)



Insulin Sensitivity And Lipogenic Responses Maintained



 Insulin sensitivity allows culture in a close to physiologic milieu and altered disease-like steatotic phenotype under hyperglycemic, hyperinsulinemic conditions.

Deering et al AASLD, 2012, Dash et al ADA 2013, Cole et al AASLD 2015

Applications of a Physiologically Responsive Liver Model

After demonstrating that the system maintained differentiated liver phenotype as evidenced by polarized morphology, liver specific functions, drug metabolizing enzyme and transporter activity and responsiveness to insulin, we tested the model for the following applications:

- 1. Assessing on-target and off-target pharmaco-toxicology of drugs at clinically relevant concentrations.
- 2. Distinguishing transcriptomic signatures of various phenotypes of drug induced liver injury (DILI).
- 3. Studying underlying mechanisms of drug induced steatohepatitis that could help understand potential NASH targets.
- 4. Developing a lipotoxic model with milieu mimicking metabolic disease.



Assessing On-target Pharmacology of Obeticholic Acid



LOG2 Fold Change

- Strongly induced
 FGF19 in hepatocytes,
 both at a gene and
 protein level, confirming
 a direct hepatic effect in
 addition to the widely
 appreciated FGF19
 loop through the gut.
- CYP7A1 was the most down-regulated differentially expressed gene in the transcriptome, with simultaneous downregulation of the bile synthesis pathway genes.

Sanyal, Oral presentation AASLD 2015

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Pharmaco-toxicological Signature of Obeticholic Acid and Impact of CYP Activity



 Functional CYP assays revealed that obeticholic acid suppressed CYP1A2 and CYP3A4 activity.



10µM

Obeticholic Acid

0.1%

DMSO

0.5µM

Distinguishing Drug Induced Steatohepatitis Signatures From Other Forms of Drug Induced Liver Injury



- Transcriptomic analysis allowed us to characterize distinct signatures for different drugs having different DILI phenotypes.
- Assays like Nile Red (neutral lipid) and secreted protein biomarkers in effluent media were confirmatory functional endpoints that defined the steatohepatitic phenotype.





Understanding Mechanisms and Potential Targets of Steatohepatitis



 Differential analysis of transcriptomic signatures for different drugs causing steatohepatitis versus those causing NASH may offer insights into mechanisms and targets.



Liver Models to Recapitulate Metabolic Disease Spectrum



 Lipotoxic metabolic disease model has Kupffer cells and stellate cells added on opposite side of the membrane

Ongoing Validation of Drug Responses in the Advanced Lipotoxic Liver System

- In the advanced lipotoxic liver system, OCA
 - Reduced ALT levels (a clinical biomarker for NASH)
 - Promoted a robust increase in downstream targets of FXR signaling, including FGF19
 - Reduced several markers of inflammation

CLINICAL

BIOMARKERS

p=0.12

OCA

Advanced

Lipotoxic

VEH

Reduced markers of fibrosis

1

ALT (FOLD)

ON-TARGET FXR

SIGNALING

32

16

8

4

2

0,5

VEH

Advanced

Lipotoxic

FGF19 (FOLD)



0.5

VEH

Healthy

OCA

Conclusions and Future Directions

- The physiologically responsive liver model allows assessment of on-target and off-target pharmaco-toxicology of drugs at clinically relevant concentrations.
- Comparative analysis of transcriptomic responses of drug induced steatohepatitis, lipotoxic NASH-like conditions and drugs that impact NASH could help identify and understand potential NASH targets.
- **Ongoing/Future activities include:** ۲
 - Benchmarking signatures against clinical samples.
 - Analysis of non-parenchymal cell response within system.
 - Lipidomic analysis to gain a better understanding of lipid fractions under lipotoxic milieu and how they correlate with transcriptomics.
 - Characterization of translatable functional responses such as histology and extracellular matrix composition measurements.
 - Comparative analysis of drug response under healthy versus lipotoxic conditions and stratified patient derived hepatocytes versus human hepatocytes could provide additional insights about useful applications of this system. HEMOSHEAR NONCONFIDENTIAL

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