Considering a new paradigm for



Alzheimer's disease research

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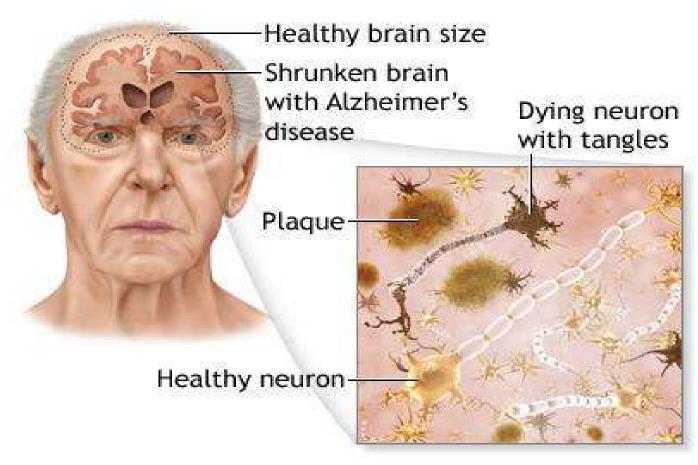
Langley, G.R. Considering a new paradigm for Alzheimer's disease research. Drug Discov. Today (2014) 19(8): 1114-1124.

Langley, G.R. et al. Lessons from toxicology: Developing a 21st-century paradigm for medical research. Env. Health Perspect. (2015). http://dx.doi.org/10.1289/ehp.1510345.



Characteristics of Alzheimer's disease





www.premedhq.com/alzheimers-disease



Alzheimer's disease: A failing research paradigm [1]

- ➤ 100s of compounds have failed in clinical trials despite encouraging results in animal models: no new drugs for ten years
- Existing drugs only stabilise symptoms temporarily, in some patients, but do not slow progression
- Current research paradigms are too dependent on transgenic mice



Alzheimer's disease: A failing research paradigm [2]

Species and strain differences tend to be overlooked or underplayed

> Patients are being failed by research

Learning from the transition in toxicology

For similar reasons, toxicology is transitioning towards a new paradigm:

- ➤ Strategically implementing 21st-century scientific tools including systems biology
- Applied to advanced human-specific molecular & in vitro models
- Based on the 'adverse outcome pathways' (AOP) concept
- ➤ Moving away from animal use

B D M E D 21

Alzheimer's research and drug discovery – a new paradigm

- Research into Alzheimer's disease may benefit from a similar transition
- The new paradigm would implement next-generation tools
- Applied to advanced **human** *in vitro, ex vivo* and *in vivo* models, with the aid of systems biology



Pathways-based research

- Multiscale human disease pathways would be the core of the new paradigm, based on the AOP concept in toxicology
- Linking environmental and genetic/epigenetic causes with whole-person outcomes

disease causation



- Genetic effects (genome)
- > Epigenetic effects (epigenome)
- > External influences (exposome)

Lead to

> Adverse outcomes via disease pathways ("disease AOPs") at the molecular, cellular, organ & individual levels

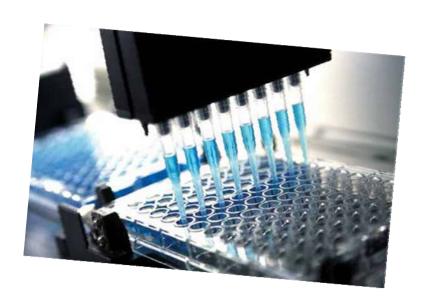


In Alzheimer's research

Can we get from this...







AOPs are multiscale pathways



Adapted from presentation by OECD's Environment Directorate

Adverse Outcomes (AO) * Population 挨 Key Event (KE) Individual Organ Tissue Cellular Organelle Molecular

Molecular Initiating Event (MIE)

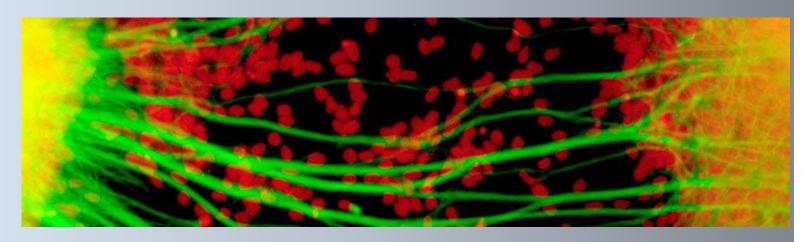
pathogenesis/time

Adapted from presentation by OECD's Environment Directorate

Adverse Outcomes (AO) Population In vivo (clinical, epidemiological) Individual In vivo (human) Organ *In vitro & in vivo (human)* Tissue In vitro Cellular In vitro Organelle In vitro Molecular In silico and in chemico

21st-century humanspecific models & techniques

1. Brain cells derived from human induced pluripotent stem cells (normal & patient-specific)

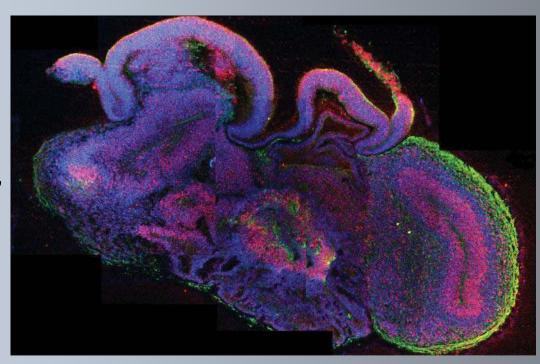


Alysson Muotri, Univ. California, San Diego

21st-century human- BMED²¹ specific models & techniques

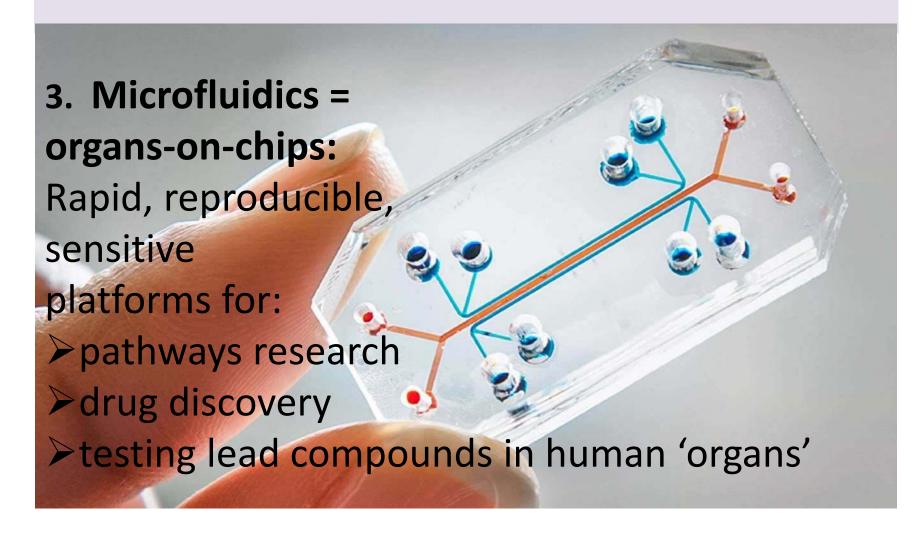
2. 3D human cell models:

Robust, controllable, improved viability, retain cellular/tissue properties in vitro.



Human pluripotent stem cells developed into cerebral organoids M.A. Lancaster et al. Nature (2013). doi:10.1038/nature12517

21st-century humanspecific models & techniques

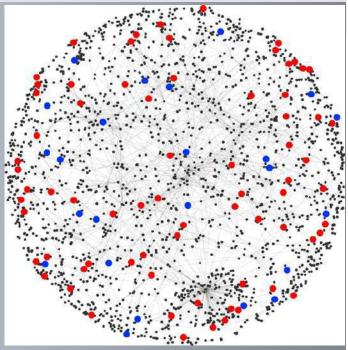


21st-century human- B ■ MED² specific models & techniques

4. Human ex vivo tissues

Next-generation sequencing (all the 'omics, multiplexed fluorescent *in situ* visualisation of DNA, RNA, proteins)

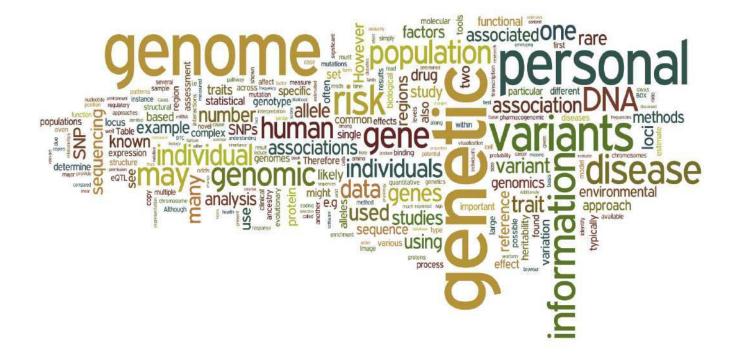
- disease pathways research
- > status & dynamics of regulatory gene networks
- > drug targets, efficacy & toxicity



The 'omics

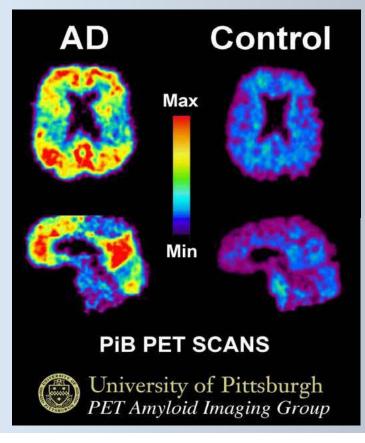


Not just genomics, also transcriptomics, proteomics, metabolomics, epigenomics, exposomics, connectomics...



21st-century humanspecific models & techniques

5. Advanced clinical studies e.g. neuroimaging





www.effluviamagazine.com

21st-century human- B ■ MED²¹ specific models & techniques

6. Computational modelling & systems biology/systems pharmacology

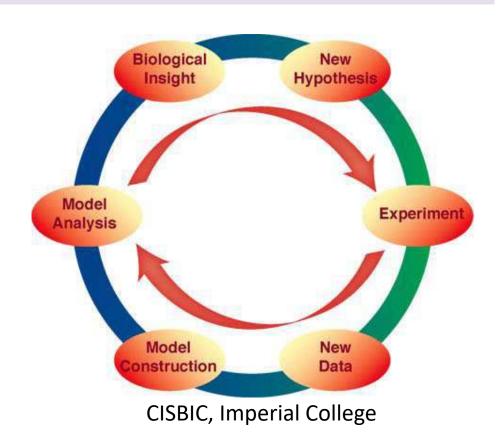


21st-century humanspecific models & techniques

- 6. Computational modelling & systems biology/systems pharmacology:
- Multi-scale modelling e.g. protein signalling pathways suggest new therapeutic concepts or clinical trial simulations
- ➤ Multiple source data integration
- Integrate & interpret big data from 'omics e.g. with patients' memory scores, for new drug targets
- Elucidate disease pathways & progression

21st-century human- B ■ MED²⁴ specific models & techniques

6. Computational modelling & systems biology/systems pharmacology



Advantages of a new research paradigm

- B D M E D²¹
- Offers a systems-based understanding of Alzheimer's disease
- May yield more cost-effective and predictive data
- Should help discover novel and multiple drug targets
- > Could enable personalised and/or stratified data
- Would provide human-relevant information earlier in drug development
- Is likely to reduce late-stage drug attrition



Some challenges...

Technical & scientific challenges include

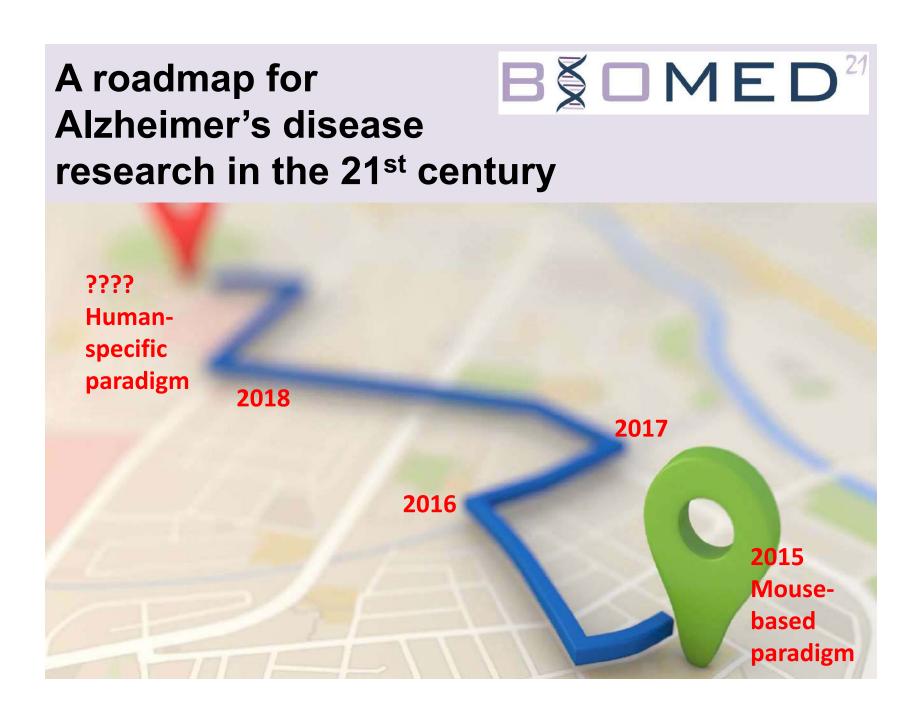
- Improved selection, characterisation & validation of new cell models (incl. hiPSC)
- Optimisation of novel platforms for cell models
- > Better quality post-mortem human tissue
- Further development of imaging technologies
- Synthesis of data to develop & validate computational models
- > Improved in vitro/in vivo extrapolation

Some challenges...



Knowledge and cultural challenges include:

- Moving out of the 'comfort zone' of animal studies
- ➤ Interpretation & analysis of Big Data from 'omics
- Developing tools for open knowledge growth and collaboration, for describing & assessing 'AD AOPs'
- Constructing a detailed roadmap for AD research in the 21st century
- Changing science would require a new regulatory approach
- Persuading industry, funders, regulators and health scientists of the need for change
- Developing infrastructure to translate 21st-century tools into real-world use





A Human Pathways Approach to Alzheimer's Disease Research

Thank you!