NCS1- A New Target for Mood Disorders

Barbara E. Ehrlich, Professor Department of Pharmacology Yale University

Primary Focus - Bipolar Disorder

Bipolar Disorder = severe mood swings

• ~6 million adults in US have bipolar disorder

1 in 5 commits suicide

Lithium works but there are serious safety issues

Baxter and Phelps, UCLA



Manic state



Depressed state



Orphan Indication - Wolfram Syndrome*

Homozygous mutation – Death in early 30's

Heterozygous patients –

*DIDMOAD syndrome *Diabetes insipidus-diabetes mellitus-optic atrophy-deafness syndrome

- Wolfram syndrome = fatal genetic disorder
 - Incidence 1:100,000 in North America Blindness, deafness, mood disorders
 - 1% of US, 8-fold higher mood disorders
 - No available treatment palliative care only









Neuronal Calcium Sensor 1 (NCS1) Is a Target for New Drugs NCS1 is disregulated in disease

The Goal is to develop drugs that maintain the balance



NCS1 is <u>high in the brain of bipolar disorder patients</u>

NCS1 is low in Wolfram Syndrome patients

stable NCS1 levels normal cell signaling normal cognition





NCS1 is a Target for Drugs by Candidate Approach

Crystal stru NCS1 bind Candidate Paclitaxe Lithium n

Crystal structure is known

- NCS1 binds proteins at defined sites and influence function
- Candidate drugs bind and influence function
 - Paclitaxel degrades NCS1 function
 - Lithium maintains NCS1 function

NCS1 is Druggable

and influence function ce function



NCS1 crystal structure with paclitaxel docked in binding pocket



NCS1 is a Target for Structure Based Drug Design

NCS1 functionally binds drugs at defined sites



Immediate Starting Point for Medicinal Chemistry

Paclitaxel





NCS1 is a Target for **High Throughput Screening (HTS)** NCS1 functionally binds proteins at defined sites

Critical binding residues identified



Green = NCS-1, pink residue = AA_1 Yellow/orange = InsP3R1 (1-225), red residues = $AA_2 \& AA_3$

Nguyen and Ehrlich, in preparation 2018 Boehmerle et al, PNAS 2006

Proteins that bind: InsP3 receptor, dopamine receptor, wolframin

Protein-protein Interaction split renilla luminescence assay



17.6 kDa

SmBiT 11 aa

A:B interaction



Structural complementation gives a bright, luminescent enzyme



Target Product Profile (TPP) and in vivo Validation

Drug Properties

- Oral use

- Membrane permeable

Drug Validation

Path to optimized lead is established NCS1 and WFS1 knock out mice are available for validation

Maintains NCS1 levels and function

Non-toxic and safe for long term use Crosses blood brain barrier



NCS1 crystal structure with paclitaxel docked in binding pocket



Functional assays in cells and mice



Drug resets response

Schutze and Ehrlich, in preparation 2018

- Depression forced-swimming test





Candidate drugs

Structure Based Design

HTS & Virtual Screens

Objective 1 Lead compounds

Use of Blavatnik Resources

Award Funding

Lead Identification

Objective 2 Cell assays





Seed Funding

Lead Qualification

18-24 months

Objective 3 Mouse assays





Use of Blavatnik Resources Charles River Proposal

Screen for Lead Compound: \$180K, 6 months

Phase 0: Expression and purification of InsP3R (1-225) protein

Phase 1: Development and validation of TR-FRET

Go/No-go decision point

Phase 2: Pilot screen of 5,000 Lead-like library compounds and 2,200 compound validation set

Go/No-go decision point

Phase 3: Primary screen of remaining compounds from the Lead-like library selected form screening (150,000)

Hit Compound Selection - I

Phase 4: Hit Confirmation

Hit Compound Selection - II

Phase 5: Potency determination as 10-point curves, using TR-FRET assay from Phase 1 LC-MS purity analysis on all compounds tested

Quotes obtained from 3 CROs

Hepatic microsomal stability: half-life/intrinsic clearance format (2 species; human and mouse/rat)

Lead testing: \$100K, 4 months

Secondary Assay Testing: NanoBiT and FLIPR assays

Kinetic solubility

MDR1-MDCK: effective efflux ratio

Post Blavatnik path

Cellular assay (primary neurons) Ca²⁺ signaling

In Vivo PK / PD

(brain and plasma)

In Vivo Efficacy

Non GLP Tox. Study

Selection Point

- project is tenable - choices available

Primary goal is clinically feasible A new and safer compound to treat bipolar disorder Global bipolar market valued at \$5 Billion in 2016

Orphan disease application

Competitive Landscape

- Current drugs available: toxic, poor efficacy, or both
- Current trials lack novel compounds, mainly drug combinations
- First in class drug for Wolfram Syndrome Potential market - \$500 million



https://www.grandviewresearch.com





Series A/Partner Funding Award/Seed Funding

Complete Lead Qualification

- Acute in vivo Activity
- Solubility/Permeability
- Pharmacokinetics
- Tissue distribution

Expression of interest from: Janssen Pharmaceuticals, CMIC Holdings, Bioasis, Taconic, Osmol Therapeutics

NCS1 Discovery Process Post Blavatnik Funding Objectives



- Indication Specific
- Optimize Drug Properties
- Fit to Product Target
- Possible Orphan

IND Enabling

- GLP/GMP **Synthesis/Studies**
- Pre-IND Agency Interaction - Regulatory Docs





Barbara E Ehrlich Professor Yale University

Co-Founder



Prevention of chemotherapy induced peripheral neuropathy

Venture Backed with Series A: IND Planned for Q4'18

A better treatment for mood disorders



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Extra slides



Examples where both loss of function (LOF) and gain of function (GOF) lead to disease

Both LOF and GOF lead to disease for: K channels (<u>epilepsy</u> or *long* Q-T arrhythmia) RyR channels (<u>muscular dystrophy</u> or *heart arrhythmias, malignant hyperthermia*) SERCA pump (<u>Darier's Disease</u>, <u>Hailey–Hailey disease</u> or cancer)

Many examples where target can utilize both antagonists and agonists to treat disease Estrogen receptor antagonists used to treat cancer Estrogen receptor agonists used to treat menopause

Lithium prevents swings into either mania or depression





Screening Cascade: Charles River

Critical path: Available at CRL

To be outsourced

Blavatnik Round 1 Funding

Broad Selectivity Screening Panel

Mini AMES, MNT*

CiPA/hERG*

Pharmaceutics/PRD*



Tier 1 ADME: kin. sol, R & H Cl_{int}, **MDCK-MDR1**

Tier 2 ADME: R & H PPB, R BTB

Extended ADME Screening* Higher species metabolic stability and PPB, CYP inhibition, cross-species Met ID

In Vivo Higher Species PK*



Yale Professor and Co-Founder of Osmol Therapeutics

Education & Training

- Brown University, Providence, RI. (1974) Sc.B. lodide transport in choroid plexus epithelium
- Ph.D. University of California at Los Angeles (1979) Lithium transport across membranes and the relationship to bipolar disease
- Post-Doctoral Fellow Albert Einstein College of Medicine, Bronx, NY (1980-86) Properties of cardiac and Paramecium calcium channels
- University of Connecticut, Farmington, CT (1986-1997) Assistant Professor Regulation of intracellular calcium signaling
- Professor Yale University, New Haven, CT (1997-present) Calcium signaling in polycystic kidney disease and peripheral neuropathy
- Osmol Therapeutics (2017-present) Co-Founder Develop pharmaceutical agents to prevent chemotherapy induced peripheral neuropathy Worked with two VC firms and several Angel Investors **Proven ability to move ideas from the lab to the commercial space**

Barbara E. Ehrlich, Ph.D Professor of Pharmacology Yale University









Inositol depletion hypothesis & Bipolar Disorder

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NCS-1 functionally interacts with several signaling pathways



Mechanisms



The InsP3R binds to NCS1

NCS1 binds to the InsP3R (ITPR). Residues required for binding are known and calcium responsive

We identified critical residues using in silico docking and tested using biochemical methods



Green = NCS-1, pink residue = AA_1 Yellow/orange = InsP3R1 (1-225), red residues = $AA_2 \& AA_3$

Nguyen and Ehrlich, in preparation 2018 Boehmerle et al, PNAS 2006

We identified critical functions using biochemical methods and cell signaling properties NCS1 Binding to the InsP3R is increased by calcium

InsP3R1 (1-225)

NCS1

NCS-1

Input

(1-225)

Input









