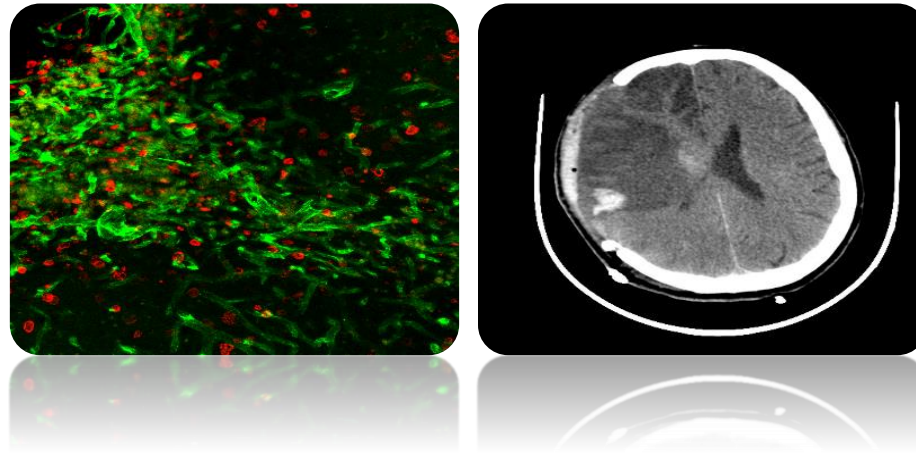


II Congreso Anual de Ictus **RICORS-ICTUS**



**Una historia de investigación traslacional en cerebroprotección:
de los estudios preclínicos a los ensayos clínicos**



What do we need to develop a pharmacological treatment?

1. **Identify the problem: STROKE**
2. Study the problem in depth
3. Generate new ideas – hypothesis and results
4. Contrast my hypothesis - safety and efficacy studies
 - 4.1 Non-regulatory animal studies
 - 4.2 Funding and intellectual property
 - 4.3 Regulatory animal studies
 - 4.4 Clinical trials

2. Study the problem in depth

ISCHEMIC STROKE TREATMENT *Cerebral Perfusion*

Therapeutic window

Limitations

Thrombolysis
(t-PA)

0 - 4.5 hours

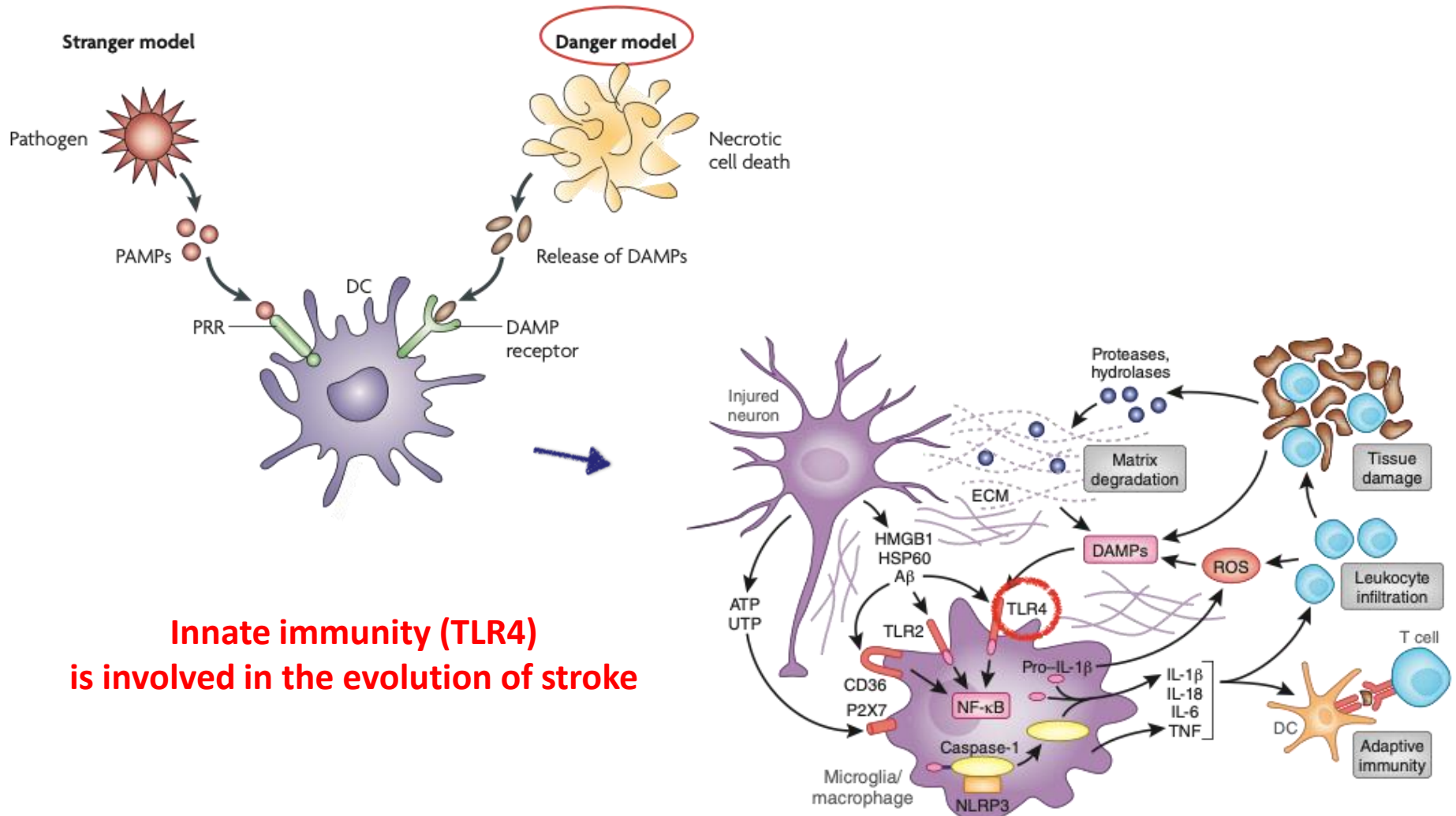
- Hemorrhagic Transformation (HT)
- Low recanalization rates (<50%)

Endovascular thrombectomy

0 – 24 hours

- Large vessel occlusion
- Qualif interventional neuroradiologist
- High cost infrastructure

3. Generate new ideas – **HYPOTHESIS**

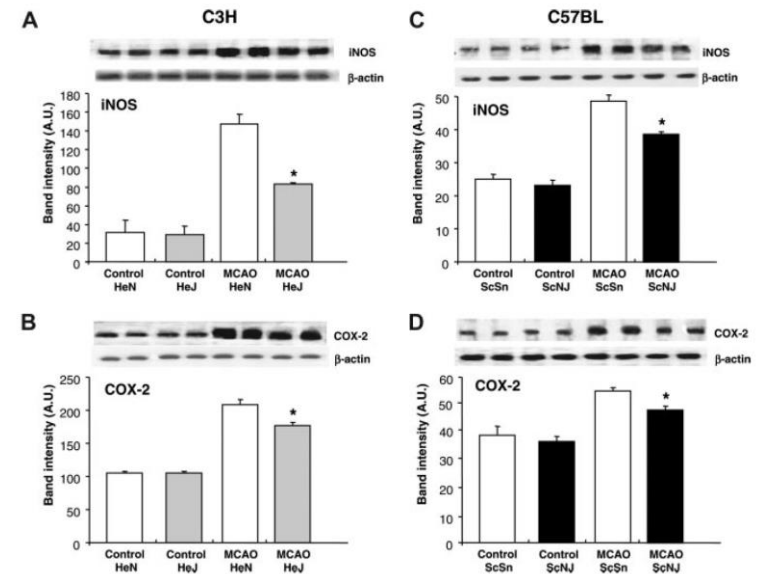
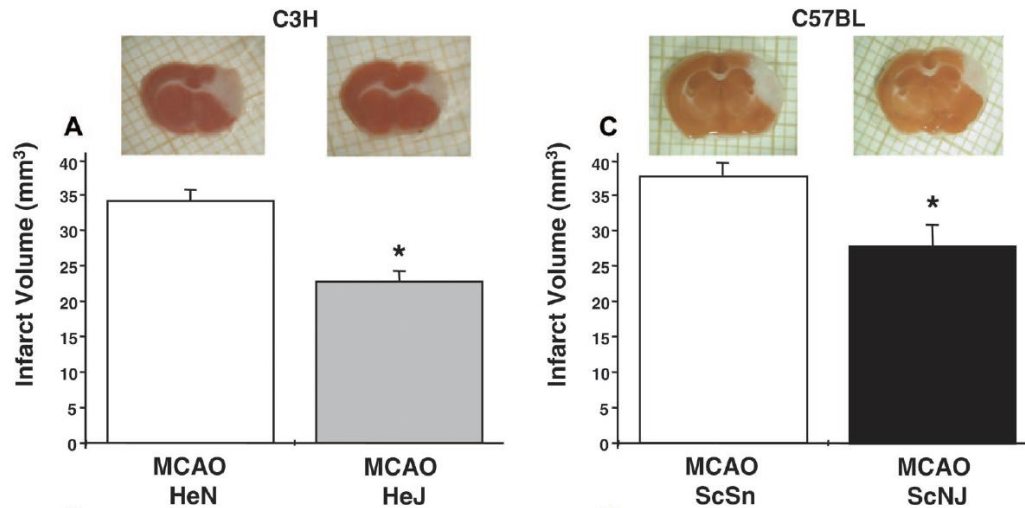


3. Generate new ideas – RESULTS

Toll-Like Receptor 4 Is Involved in Brain Damage and Inflammation After Experimental Stroke

Javier R. Caso, Jesús M. Pradillo, Olivia Hurtado, Pedro Lorenzo, María A. Moro and Ignacio Lizasoain

Circulation. 2007;115:1599-1608.

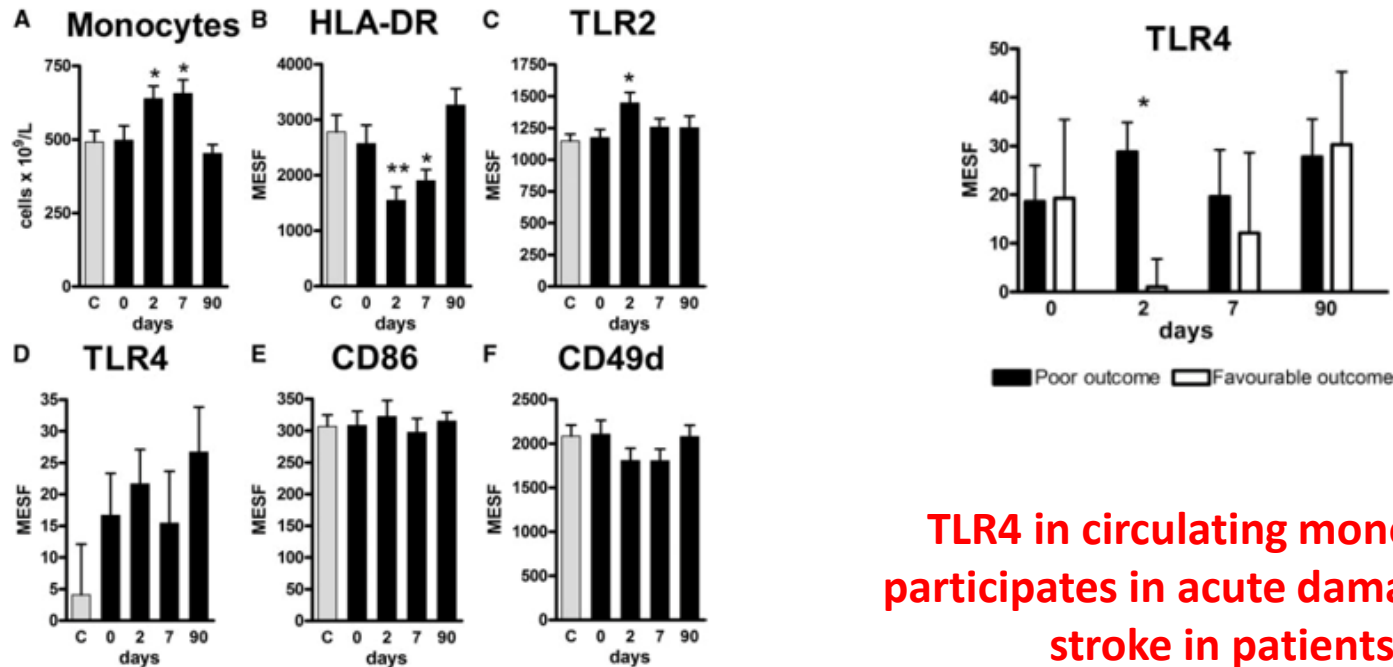


3. Generate new ideas – RESULTS

Monocytes Are Major Players in the Prognosis and Risk of Infection After Acute Stroke

Xabier Urra, Álvaro Cervera, Víctor Obach, Núria Climent, Anna M. Planas and Ángel Chamorro

Stroke 2009;40;1262-1268; originally published online Jan 22, 2009;



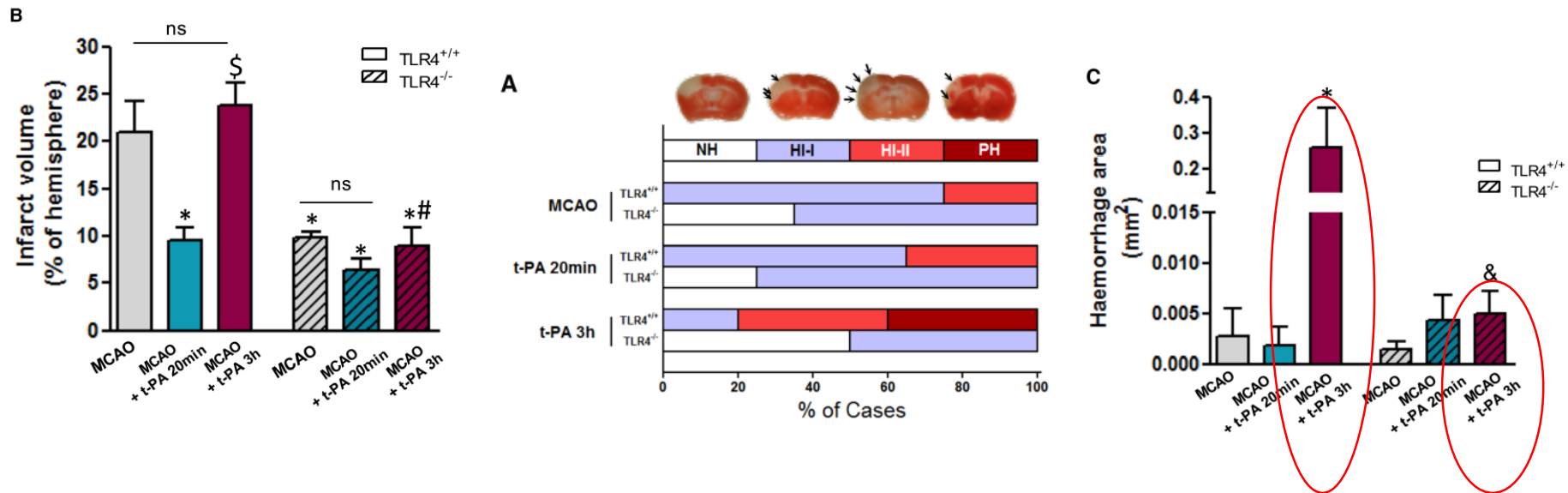
**TLR4 in circulating monocytes
participates in acute damage after
stroke in patients**

3. Generate new ideas – RESULTS

Toll-Like Receptor 4 Mediates Hemorrhagic Transformation After Delayed Tissue Plasminogen Activator Administration in In Situ Thromboembolic Stroke

Stroke. 2017;48:1695-1699.

Alicia García-Culebras, MSc*; Sara Palma-Tortosa, MSc*; Ana Moraga, PhD; Isaac García-Yébenes, PhD; Violeta Durán-Laforet, MSc; María I. Cuartero, PhD; Juan de la Parra, MSc; Ana L. Barrios-Muñoz, MSc; Jaime Díaz-Guzmán, MD, PhD; Jesús M. Pradillo, PhD; María A. Moro, PhD†; Ignacio Lizasoain, MD, PhD†



HI: hemorrhagic infarction
 PH: parenchymal hemorrhage

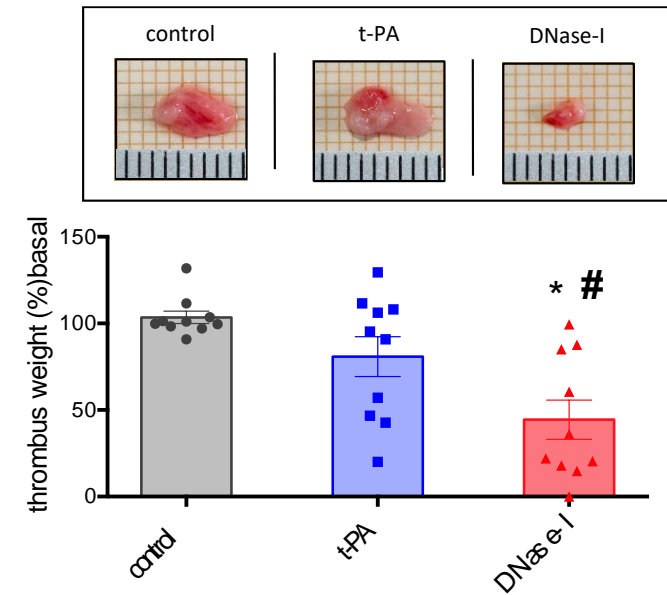
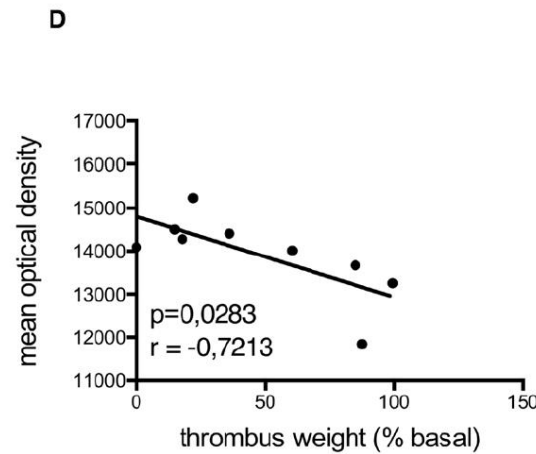
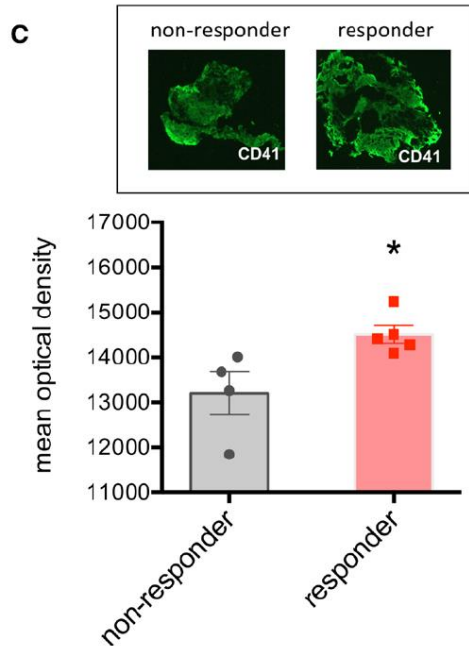
**HAEMORRHAGIC
 TRANSFORMATION**

Pharmacological Modulation of Neutrophil Extracellular Traps Reverses Thrombotic Stroke tPA (Tissue-Type Plasminogen Activator) Resistance

Carolina Peña-Martínez, MSc*; Violeta Durán-Laforet, MSc*; Alicia García-Culebras, PhD*;
Fernando Ostos, MD; Macarena Hernández-Jiménez, PhD; Isabel Bravo-Ferrer, PhD;
Alberto Pérez-Ruiz, MSc; Federico Ballenilla, MD; Jaime Díaz-Guzmán, MD, PhD;
Jesús M. Pradillo, PhD; Ignacio Lizasoain, MD, PhD; María A. Moro, PhD

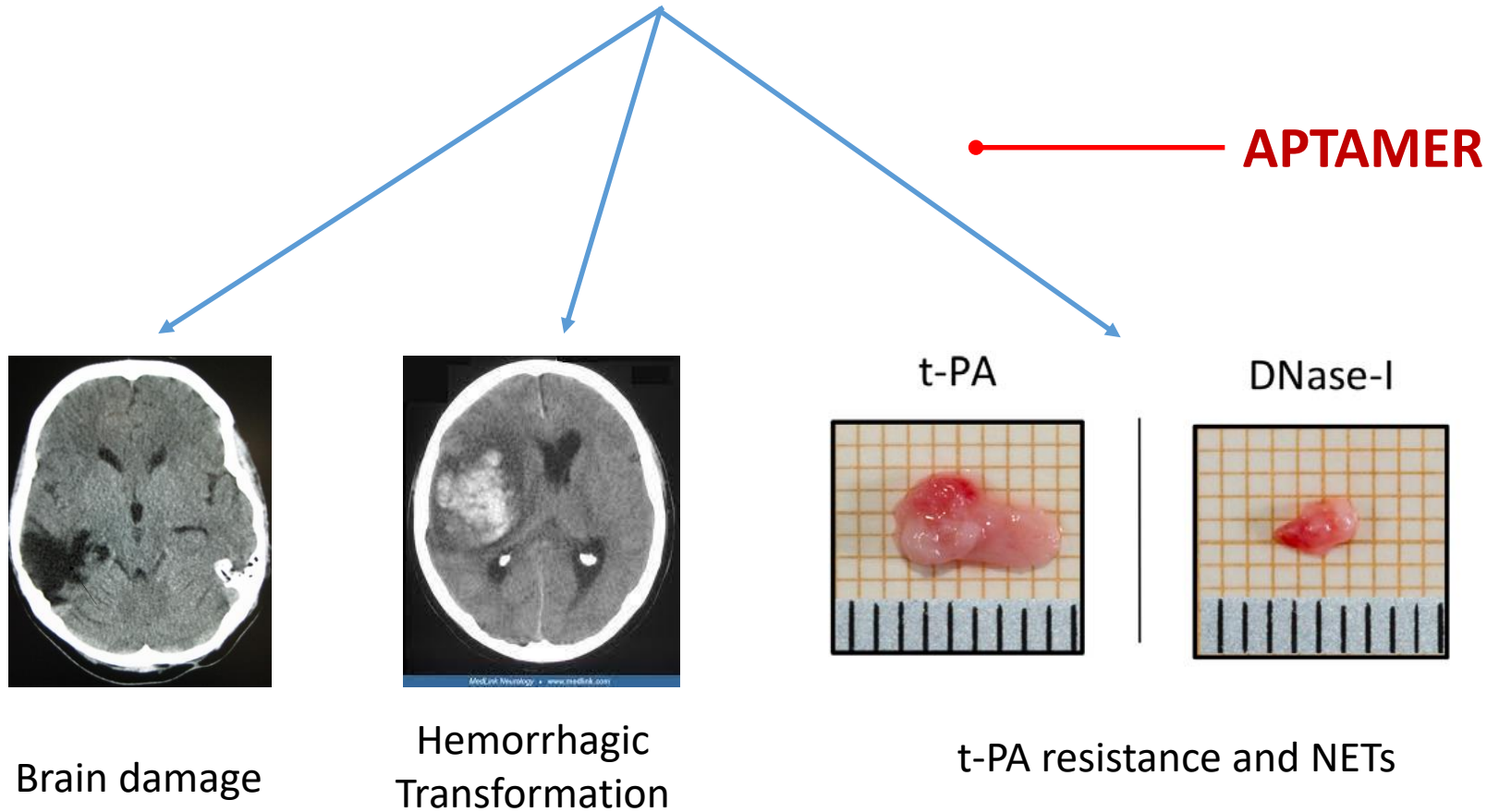
Stroke. 2019;50:3228-3237.

NETs are involved in thrombus formation in human stroke and may account for t-PA resistance



Response to DNase depends on platelet (CD41) content

TLR4





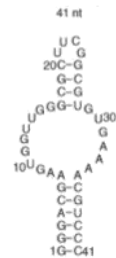
Biopharmaceutical Focused on the development of therapeutic aptamers

Drugs targeting TLR4 based on aptamers



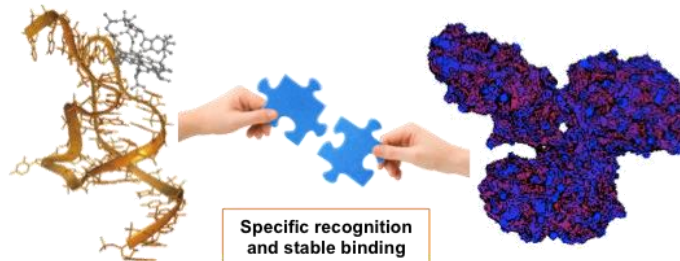
- **Nucleic acids** of single chain (ssDNA and RNA)
- Stable 3D structure in physiological conditions according to their nucleotide sequence
- Due to this 3D structure, they can specifically bind a particular target molecule (protein, small molecule, chemical, etc.) in a stable manner

**Aptamer
(sequence)**



**Aptamer
(secondary
structure)**

RNA — UGAUCC — AUUCGGAUCAAGCUAGC —



**Aptamer
(tertiary, 3D
structure)**

**Target of therapeutic
interest**

4.1 Non-regulatory animal studies

Identification of aptamers with highest hTLR4 binding affinity.

A

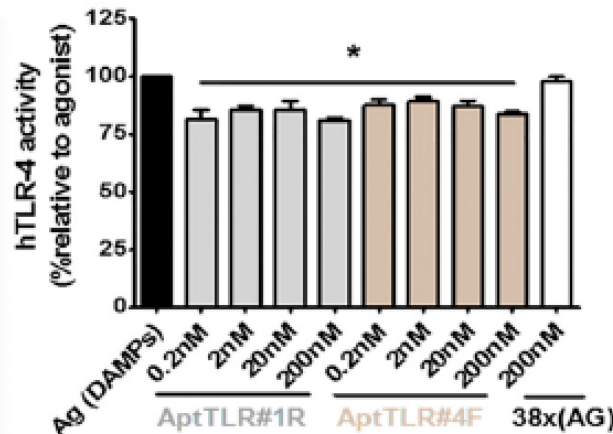
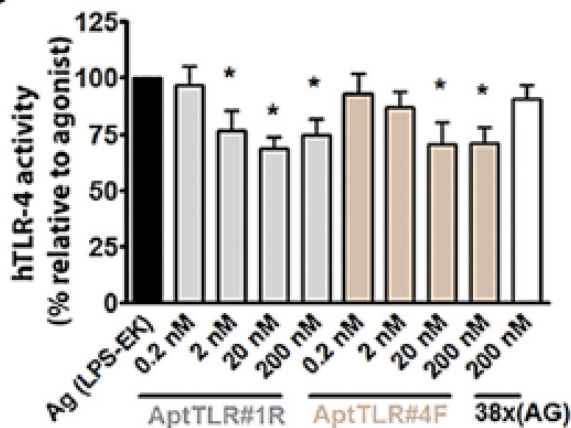
Aptamer	Sequence	nt	%A	%T	%G	%C
ApTLR#1R	gttgctcgtatttagggccaccggcaccgggacaaggcggcgacggcgtagatcaggctgcacaccagtcttcatccgc	78	19	18	33	29
ApTLR#1F	goggatgaagactgggtgcacctgatctacgcgctcccgccctgtcccgctgcggccttaataacgagcaac	78	17	19	30	34
ApTLR#2R	gttgctcgtatttagggcacacacgcacgaagacctgggtgccctgtgtacaccagtcttcatccgc	68	19	25	24	32
ApTLR#2F	goggatgaagactgggtgacaacggcgccaaggtctctcgtgctgtgtgccctaaatacaggaac	68	25	19	32	24
ApTLR#3R	gttgctcgtatttagggcaccgggctaccgaaactgtgtgtcacagtgttggcgcgacaccagtcttcatccgc	76	17	26	29	28
ApTLR#3F	goggatgaagactgggtgcgccaacaactgtgcacaccaagtoggtagctcgggtgccctaaatacaggaac	76	26	17	28	29
ApTLR#4R	gttgctcgtatttagggccaaccaggtacatgtaacgcggcgatagtttattggcacaccagtcttcatccgc	76	21	28	25	26
ApTLR#4F	goggatgaagactgggtgccaataaacatatacgcgcgcttagcatgtactcgggtggccctaaatacaggaac	76	27	21	26	25
ApTLR#5R	gttgctcgtatttagggccacatatagtgcacatcacaatccgcagagctgcacctacgacaccagtcttcatccgc	76	23	24	20	33
ApTLR#5F	goggatgaagactgggtgctgtaggtgcagctctcgggattgtgatgtgcacatatagtggccctaaatacaggaac	76	23	24	33	20
ApTLR#6R	gttgctcgtatttagggccaagaaaaccctcgtcactggtactaactccgatccgtacaccagtcttcatccgc	76	22	25	21	32
ApTLR#6F	goggatgaagactgggtgacggatcggatttagtaccagtgaccagggggttttcttggccctaaatacaggaac	76	24	22	32	21
ApTLR#7R	gttgctcgtatttagggcgggtcaccacggaagagtgtagatacatagatagctccgacaccagtcttcatccgc	76	24	24	26	25
ApTLR#7F	goggatgaagactgggtcggactgtatctatgtatctacactcttccgtggtagcccgccctaaatacaggaac	76	23	25	25	26

TLR4-Binding DNA Aptamers Show a Protective Effect against Acute Stroke in Animal Models

Gerónimo Fernández,^{1,7} Ana Moraga,^{2,3,7} María I. Cuartero,^{2,3,7} Alicia García-Culebras,^{2,3} Carolina Peña-Martínez,^{2,3} Jesús M. Pradillo,^{2,3} Macarena Hernández-Jiménez,⁴ Silvia Sacristán,⁵ M. Irene Ayuso,⁶ Rafael Gonzalo-Gobernado,⁶ David Fernández-López,^{2,3} M. Elena Martín,⁵ María A. Moro,^{2,3} Victor M. González,⁵ and Ignacio Lizasoain^{2,3}

Molecular Therapy Vol. 26 No 8 August 2018

D

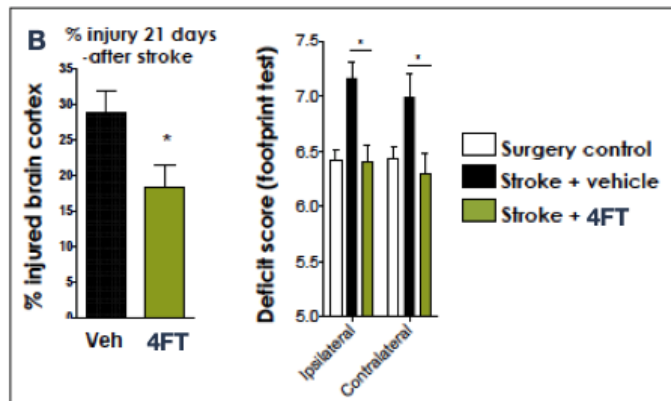
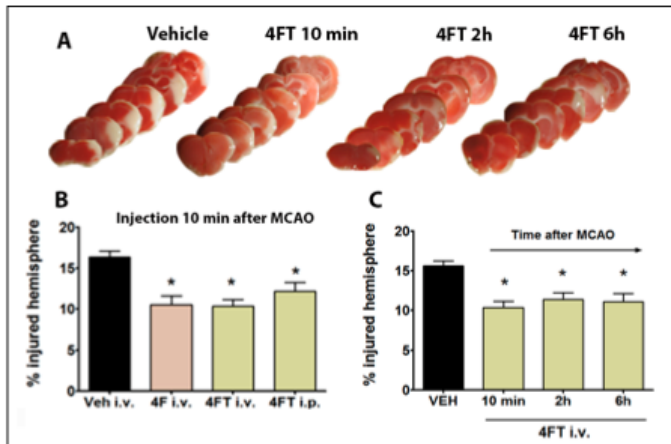


TLR4-Binding DNA Aptamers Show a Protective Effect against Acute Stroke in Animal Models

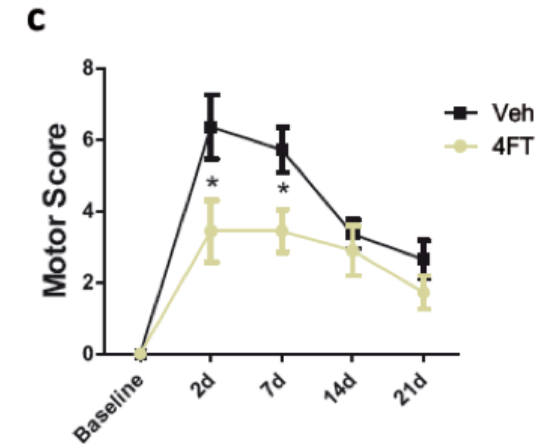
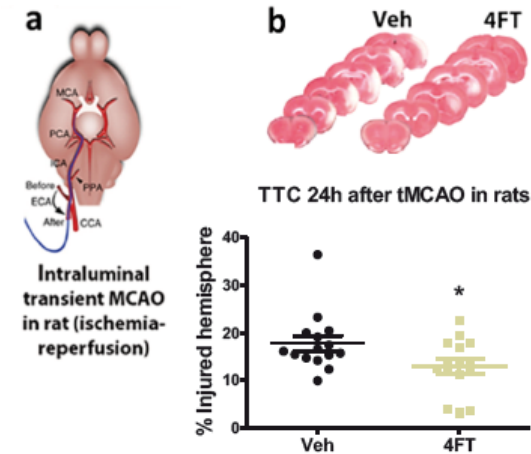
Molecular Therapy Vol. 26 No 8 August 2018

Gerónimo Fernández,^{1,7} Ana Moraga,^{2,3,7} María I. Cuartero,^{2,3,7} Alicia García-Culebras,^{2,3} Carolina Peña-Martínez,^{2,3} Jesús M. Pradillo,^{2,3} Macarena Hernández-Jiménez,⁴ Sílvia Sacristán,⁵ M. Irene Ayuso,⁶ Rafael Gonzalo-Gobernado,⁶ David Fernández-López,^{2,3} M. Elena Martín,⁵ María A. Moro,^{2,3} Víctor M. González,⁵ and Ignacio Lizasoain^{2,3}

Permanent MCAO model (mice)



Transient MCAO model (rat)





EFFECT OF EARLY ADMINISTRATION OF THE APTAMER APTOLL IN A MODEL OF HEMORRHAGIC STROKE IN RATS

**D. Quinto-Aleman¹, J.M. Pradillo¹, M. Hernández-Jiménez²,
D. Piñeiro², M.E. Fernández-Valle¹, D. Castejón¹, M. Moro³ and
I. Lizasoain^{4,5}**

European Stroke Conference 2021

Supporting central nervous system neuroprotection and remyelination by specific TLR4 antagonism

Beatriz Fernández-Gómez, Miguel A. Marchena, David Piñeiro, Yolanda Laó, Gloria Valencia, Sonia Nocera,
Rocío Benítez-Fernández, Paula Gómez-Martín, Ana M. Castaño-León, Alfonso Lagares,
Macarena Hernández-Jiménez, Fernando de Castro

doi: <https://doi.org/10.1101/2023.01.22.524916>

Article

Targeting TLR4 with ApTOLL Improves Heart Function in Response to Coronary Ischemia Reperfusion in Pigs Undergoing Acute Myocardial Infarction

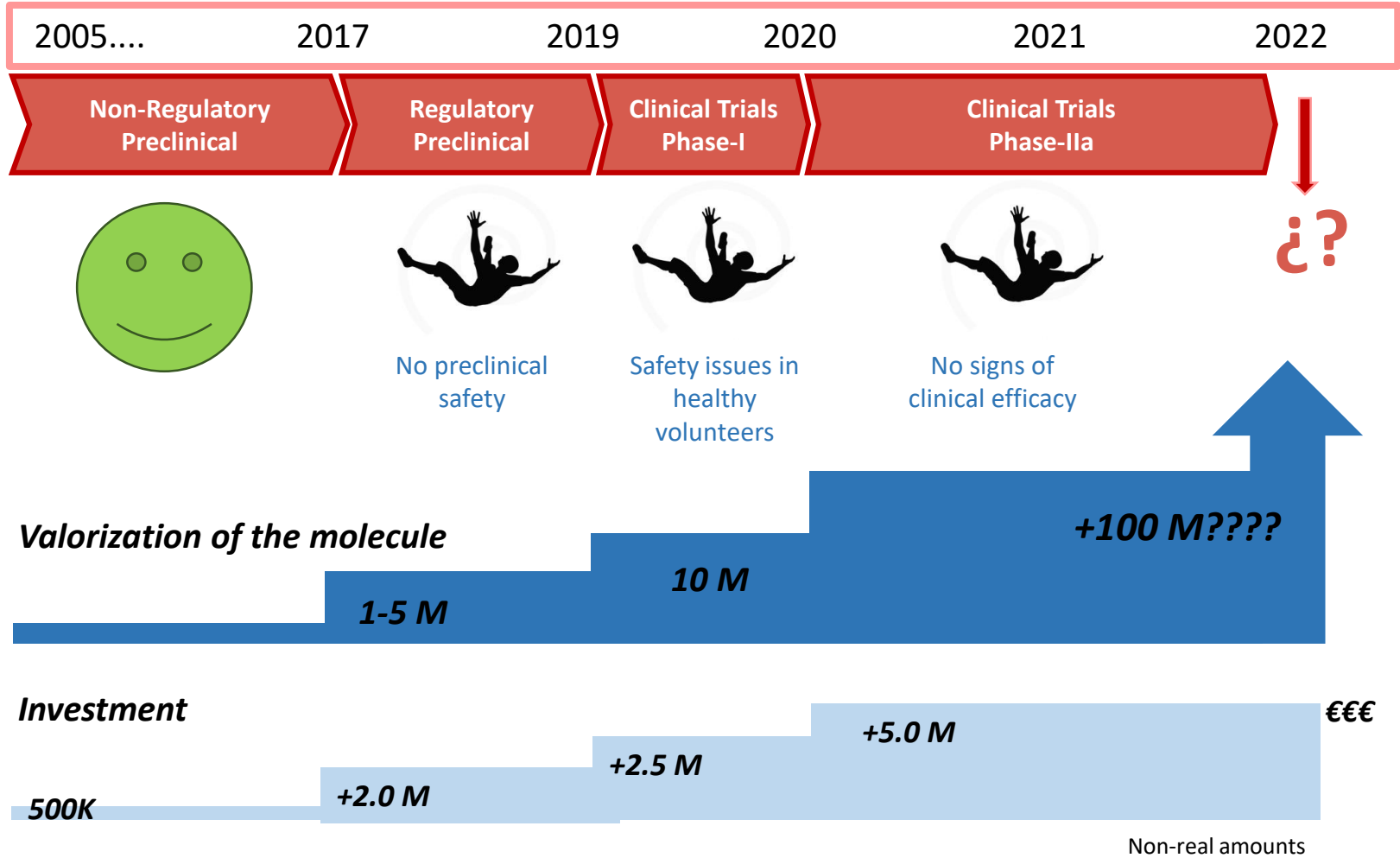
Rafael Ramirez-Carracedo^{1,†}, Laura Tesoro^{1,†}, Ignacio Hernandez¹, Javier Diez-Mata¹,
David Piñeiro², Macarena Hernandez-Jimenez², Jose Luis Zamorano³ and Carlos Zaragoza^{1,*}

Biomolecules **2020**, *10*, 1167; doi:10.3390/biom10081167

Beneficial effect of TLR4 blockade by a specific aptamer antagonist after
acute myocardial infarction

Marta Paz-García^a, Adrián Povo-Retana^a, Rafael I. Jaén^a, Patricia Prieto^b, Diego A. Peraza^a,
Carlos Zaragoza^{c,d}, Macarena Hernandez-Jimenez^e, David Pineiro^e, Javier Regadera^f,
María L. García-Bermejo^g, E. Macarena Rodríguez-Serrano^g, Sergio Sánchez-García^a,
María A. Moro^h, Ignacio Lizasoainⁱ, Carmen Delgado^{a,d}, Carmen Valenzuela^{a,d},
Lisardo Bosca^{a,d,i,*}

Biomedicine & Pharmacotherapy **158** (2023) 114214



4.2 FUNDING and intellectual property

*Public and Private
funding*



aptaTargets



Local

International



- Venture capital
BioPharma
General
- Business angels
- FF

One-to-one partnering meetings (30-min):
funds, venture capital, pharma industry,
providers, CROs, consultants, recruiters,
vendors, **universities**... everyone is there.

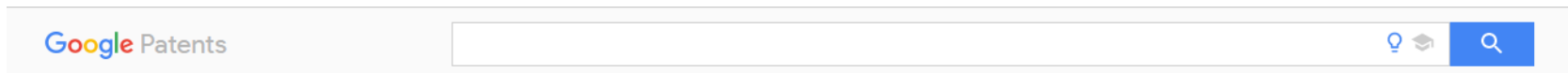
CROs: Contract Research Organization
CMOs: Contract Manufacturing Organization



***Investor's roadshow takes
time (>1-2 yrs!!!!)***



4.2 Funding and intellectual property



← Back to results Inventor: Macarena HERNÁNDEZ JIMÉNEZ;

Treatment of TLR-4 mediated diseases and conditions with aptamers targeting TLR-4

Abstract

The present disclosure related to methods to treat, prevent (e.g., suppress, inhibit or delay), or ameliorate the symptoms of a TLR-4 mediated disease or condition comprising administering an aptamer of the present disclosure to a subject in need thereof, alone or combination with other pharmacological and/or surgical interventions. In a particular aspect, the aptamers of the present disclosure are administered before, during, or after pharmacological and/or surgical interventions (e.g., thrombolysis such as thrombectomy) or any combination thereof, for the treatment of ischemic (e.g., myocardial infarction or ischemic stroke), hemorrhagic (e.g., hemorrhagic stroke or hemorrhagic transformation), or neurodegenerative (e.g., multiple sclerosis) diseases or conditions. The disclosure also provides specific doses and dosage regimes.

Classifications

● **A61P21/00** Drugs for disorders of the muscular or neuromuscular system

[View 3 more classifications](#)

AU2020276703A1

Australia

Download PDF Find Prior Art Similar

Inventor: Lisardo BOSCA GOMAR, Fernando De Castro Soubriet, Beatriz FERNANDEZ GÓMEZ, Macarena HERNÁNDEZ JIMÉNEZ, Ignacio LIZASOAIN HERNÁNDEZ, María Ángeles MORO SÁNCHEZ, David PIÑEIRO DEL RIO, Diego Pérez Rodríguez, David SEGARRA DE LA PEÑA, María Eugenia ZARABOZO LEAL, Carlos ZARAGOZA

Current Assignee : Aptatargets SL

Worldwide applications

2020 • [WO](#) [CA](#) [AU](#) [CN](#) [WO](#)

Application AU2020276703A events

2019-05-16 • Priority to US201962849072P

2020-05-16 • Application filed by Aptatargets SL

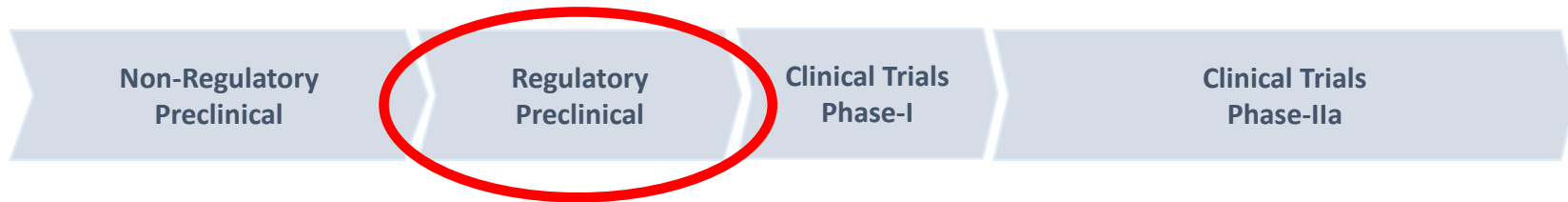
2021-12-09 • Publication of AU2020276703A1

Show all events ▾

Info: [Patent citations \(6\)](#), [Similar documents](#), [Priority and Related Applications](#)

External links: [Espacenet](#), [Global Dossier](#), [Discuss](#)

4.3 Regulatory animal studies



Regulatory preclinical studies

- Pharmacokinetics
- Safety/toxicology: identification of safe starting dose and dose-escalation in humans
- Rodent and gyrencephalic species



Pharmacodynamics

In vitro pharmacodynamics: receptor binding, affinity, antagonistic activity, etc...

In vivo pharmacodynamics: efficacy in stroke animal models, dose-response, administration regimen, therapeutic window, long-term efficacy, etc...

Pharmacokinetics

In vitro approaches: half-life in presence of nucleases, half-life in plasma ex-vivo, etc...

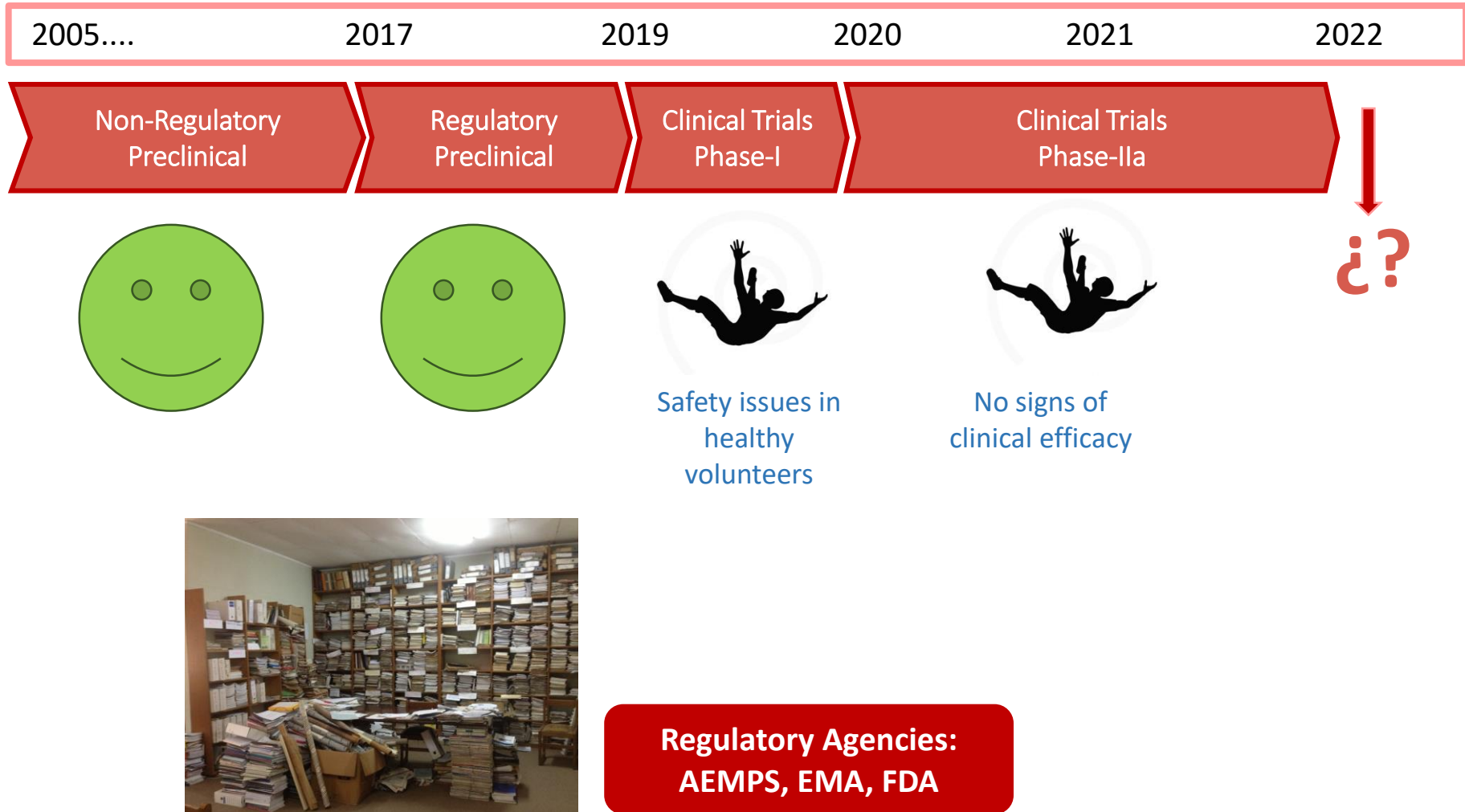
In vivo pharmacokinetics: distribution of drug in target organs (brain), half-life in plasma, tissue distribution, PK parameters, etc...

Toxicity

In vitro toxicology: cell toxicity assays

In vivo toxicology: toxicokinetics, histopathology, immunotoxicity, CNS respiratory and cardiovascular toxicity, genotoxicity, etc...

4.4 Clinical trials



First-in-human phase I clinical trial of a TLR4-binding DNA aptamer, ApTOLL: Safety and pharmacokinetics in healthy volunteers

Macarena Hernández-Jiménez,^{1,10} Samuel Martín-Vilchez,^{2,10} Dolores Ochoa,² Gina Mejía-Abril,² Manuel Romá Paola Camargo-Mamani,² Sergio Luquero-Bueno,² Bernd Jilma,³ María A. Moro,^{4,7,8} Gerónimo Fernández,⁵ David Piñeiro,¹ Marc Ribó,¹ Víctor M. González,^{5,6} Ignacio Lizasoain,^{7,8} and Francisco Abad-Santos^{2,9}

Molecular Therapy: Nucleic Acids Vol. 28 June 2022

1. C_{max} increases with dose in the first levels but remains stable thereafter

2. Half-life = 9.3h

3. No accumulation after multiple doses

PHARMACOKINETICS

SAFETY

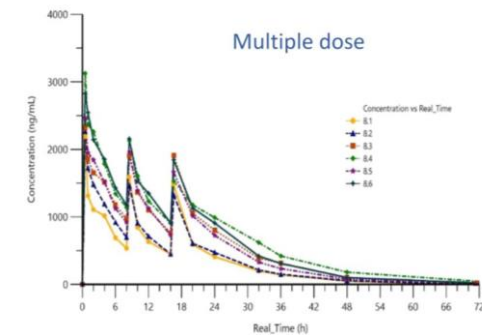
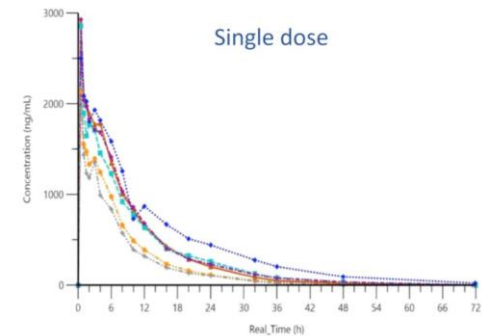
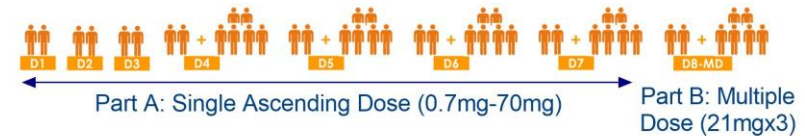
1. No AEs or SAEs attributable to ApTOLL administration
2. No clinically significant laboratory, vital signs or ECGs findings related to ApTOLL injection
3. Safety profile confirmed both in part A and in part B

Population

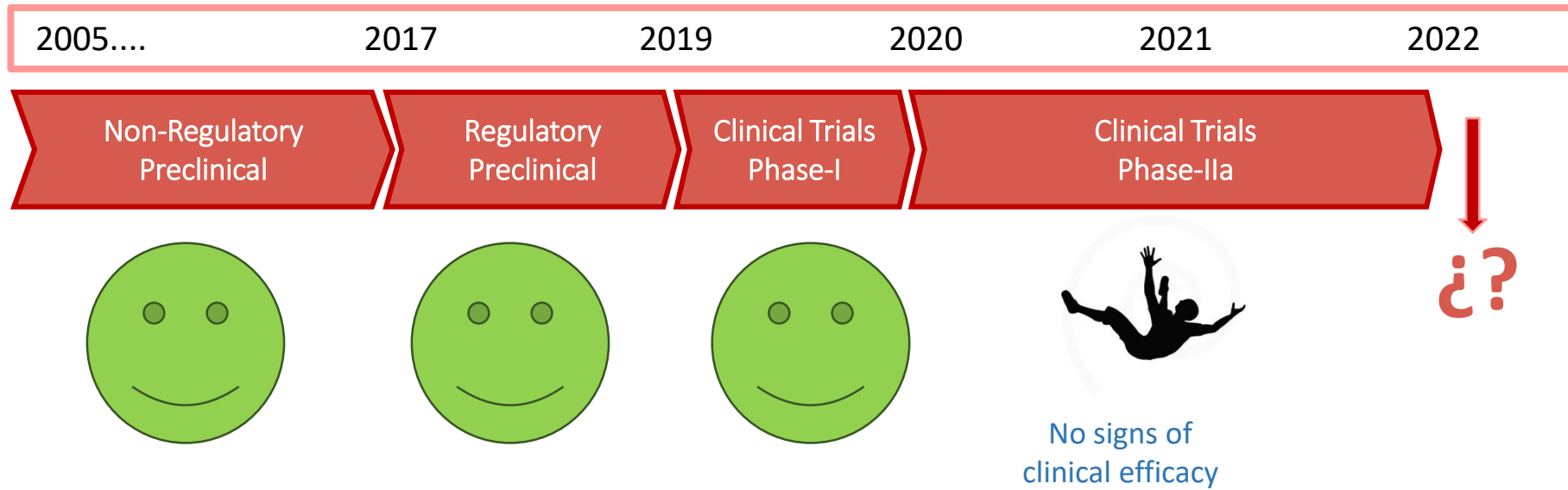


SPAIN

46 Male healthy volunteers (18-55 years old)



4.4 Clinical trials



Number of
doses

tPA or not tPA?
Thrombectomy?

Biomarkers?

Time
window?

Age?

Male?
Female?

Hospitals?

Endpoints?

Staff

National or
international?



APRIL TRIAL design

CLINICAL AND POPULATION SCIENCES

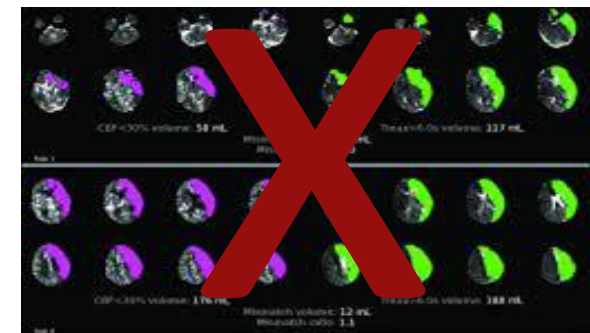
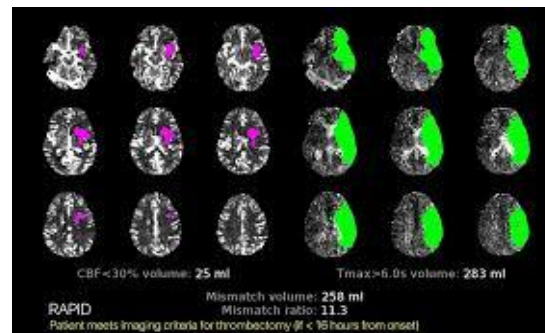
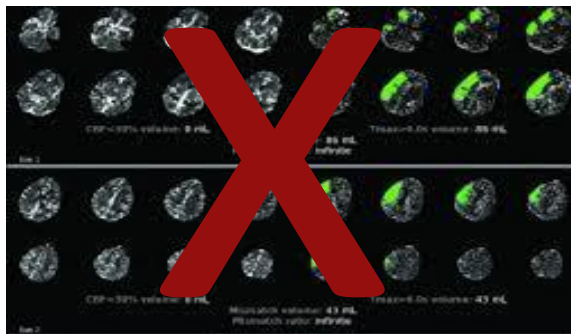
Defining a Target Population to Effectively Test a Neuroprotective Drug

Marta Olivé-Gadea, MD; Manuel Requena, MD, PhD; Daniel Campos, MD; Alvaro Garcia-Tornel, MD;
Matías Deck, MD; Marian Muchada, MD, PhD; Sandra Boned, MD, PhD; Noelia Rodríguez, MD, PhD; Jesús Juega, MD;
David Rodríguez-Luna, MD, PhD; Jorge Pagola, MD, PhD; Marta Rubiera, MD, PhD; Macarena Hernández-Jiménez, PhD;
Carlos A. Molina, MD, PhD; Marc Ribo, MD, PhD

Stroke. 2021;52:505–510.

Imaging selection criteria

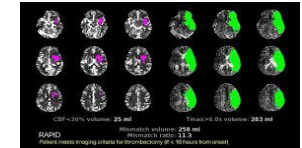
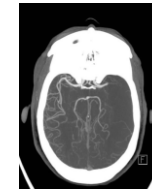
Predicted final infarct according to admission CBF<30% 5-70 ml



APRIL trial

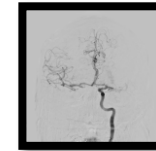
LVO (TICA, M1, M2)
within 6h of onset
Baseline mRS 0-2
Presentation NIHSS ≥ 8 and ≤ 25

Receive CT/CTA/CTP or MRI
CT (ASPECTS 6 – 10)
Perfusion Imaging (Infarct core volume 5-70cc (CBF<30% or DWI))



Excluded:
ASPECTS < 6 or Infarct core
volume ≤ 5 and ≥ 70 cc

Candidate to thrombectomy



Randomized to

Endovascular
Thrombectomy + ApTOLL

Endovascular
Thrombectomy + Placebo

Study drug administered as 30 min iv. infusion, initiated before groin puncture.

Enrollment period:
July 2020 to April 2022

Study conducted in 14 centers
11 centers in Spain
3 centers in France

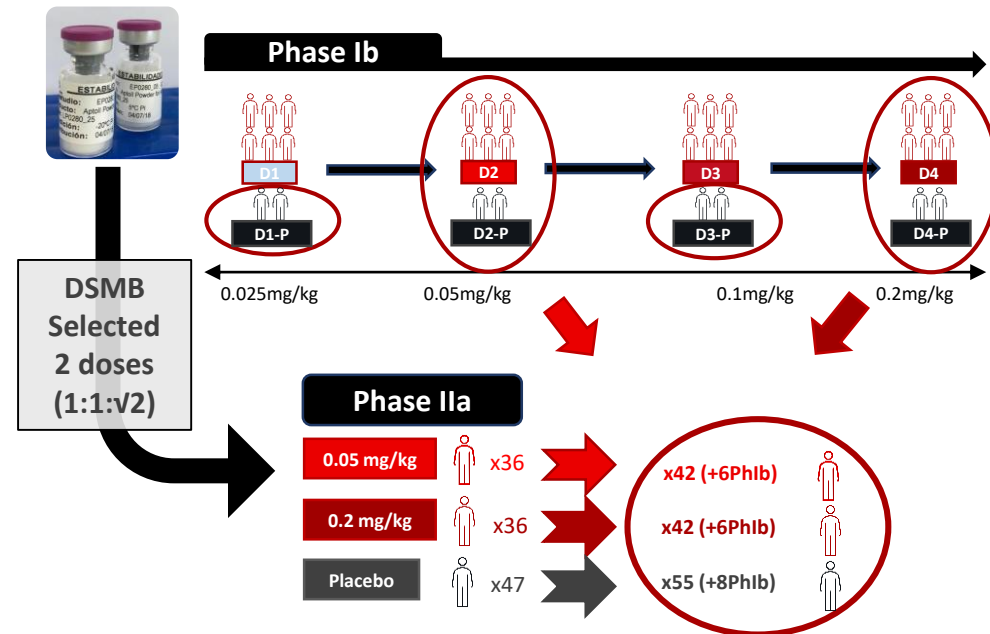
A Double Blind, Placebo-Controlled, Randomized, Phase Ib/IIa Clinical Study of ApTOLL for the Treatment of Acute Ischemic Stroke (NCT04734548)

Primary objective: evaluate **safety** and pharmacokinetics of ApTOLL based on:

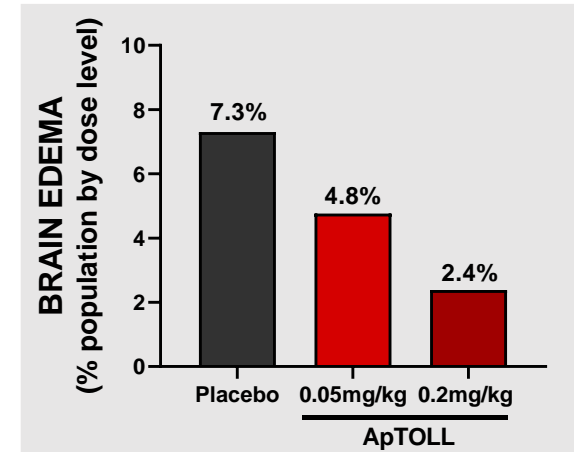
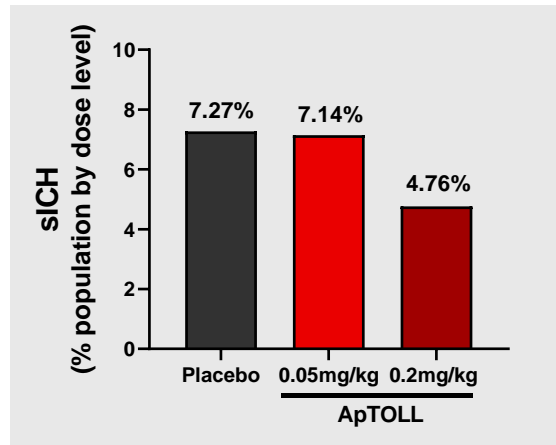
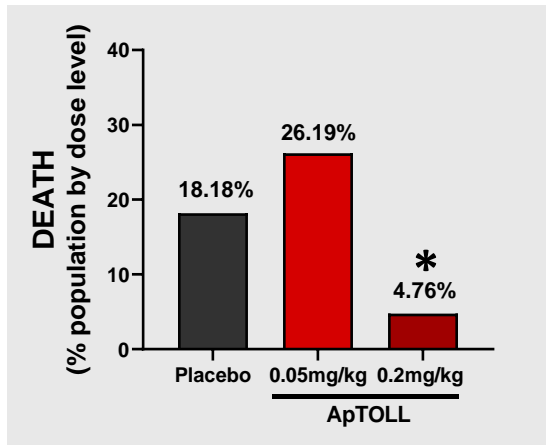
- Death
- Symptomatic intracranial hemorrhage
- Malignant stroke
- Recurrent stroke

Secondary efficacy objectives:

- Final infarct volume (MRI at 72 hours)
- National Institutes of Health Stroke Scale Score (NIHSS) at 72 hours
- Disability at 90 days (modified Rankin Score [mRS])

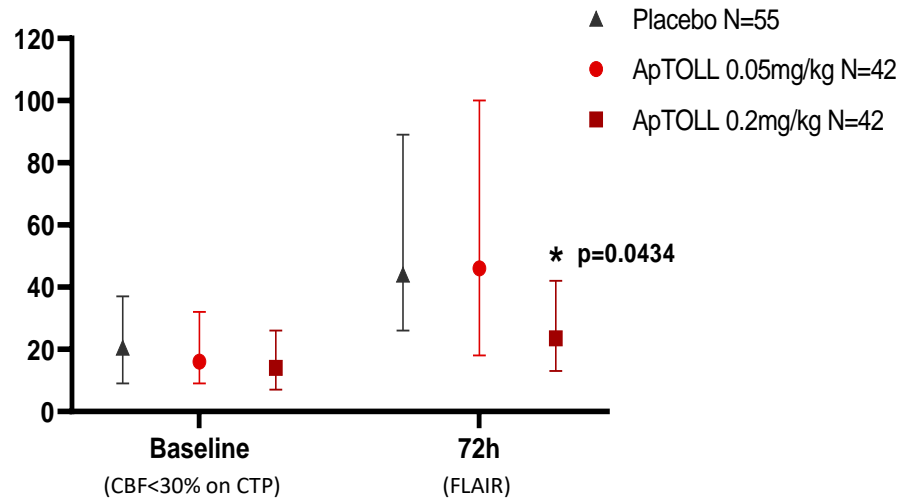


Primary endpoints: safety and pharmacokinetics

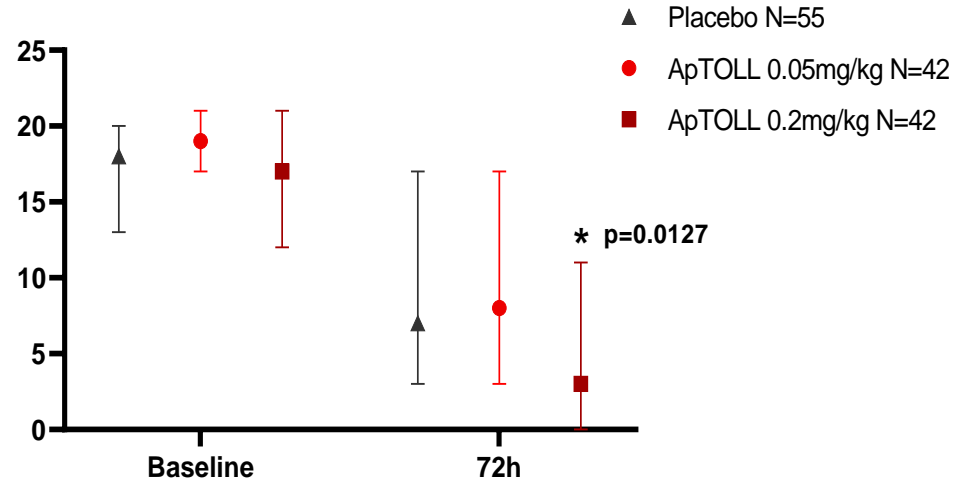


Secondary endpoints

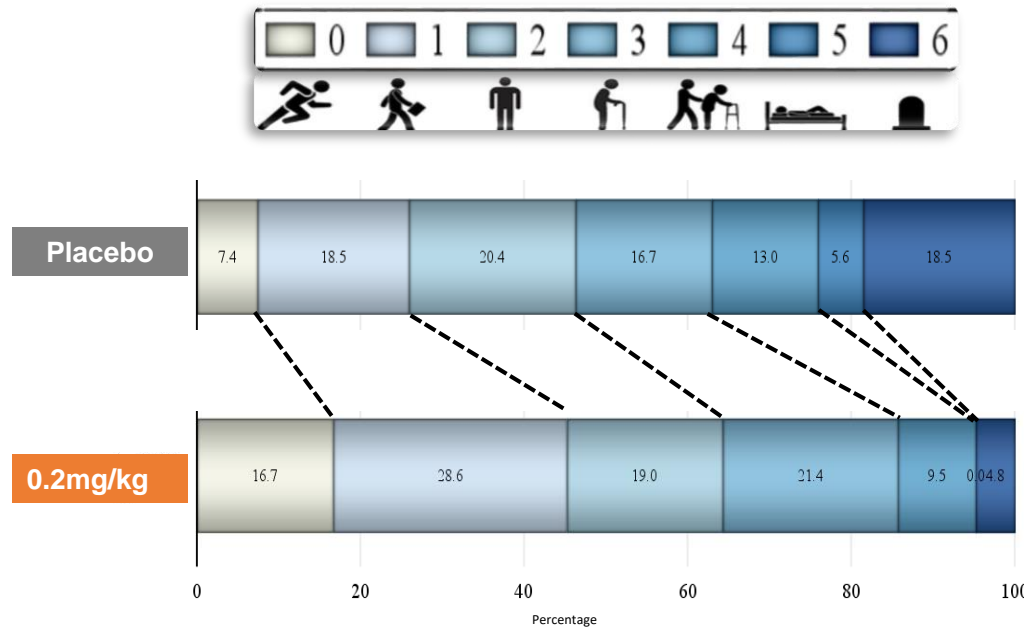
Infarct volume (ml)



NIHSS at 72 hours



Secondary endpoints



**mRS shift analysis:
Common OR: 2.5**



CONCLUSION

In acute ischemic stroke, **0.2mg/kg of ApTOLL** administered within 6h of onset, in combination with EVT, was safe and associated with a potential meaningful clinical effect **reducing mortality and disability** at 90 days as compared to placebo

These preliminary findings await confirmation from a larger pivotal trial



THANK YOU FOR YOUR ATTENTION

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