Progress Report - LAY SUMMARY

August 1, 2019 – July 31, 2019

Oligosaccharide Biomarkers for Disease Progression and AAV Therapeutic Efficacy in GM1 Gangliosidosis

A major challenge for developing treatments for GM1 gangliosidosis (GM1) disease is difficulty in evaluation of efficacy. This is complicated by limited patient numbers, and heterogeneity in age, severity, and stage of disease progression. Biomarkers that reflect disease status could provide a valuable surrogate endpoint for assessment of treatment effect and reasonably predict clinical benefit. We have identified an oligosaccharide (carbohydrate whose molecule is composed of a relatively small number of monosaccharides) biomarker that was referred to as H3N2b and significantly elevated in the urine, cerebrospinal fluid (CSF) and plasma from GM1 patients and brains from GM1 cat model. This biomarker in GM1 cat brains was reduced in response to gene therapy. These results suggested that H3N2b was a sensitive biomarker for disease severity and progression and for assessing treatment efficacy. The goal of this project is to evaluate this marker as a surrogate outcome measure of treatment for GM1. This project will provide a much-needed tool for assessing GM1 disease severity and therapeutic efficacy.

The H3N2b and its deuterated analog d6-H3N2b (6 hydrogen atoms in H3N2b are replaced by heavier stable isotope deuterium atoms) as internal standard are important to develop a fully-validated FDA compliant assay for accurate and precise measurement of this biomarker in clinical samples, however, they are not commercially available. We started the synthesis of them after elucidating the structure of H3N2b via mass spectrometry, chemical and enzymatic degradations. Synthesis of oligosaccharide biomarker is unfortunately a time consuming and multiple step process (total 30 synthetic steps). We have prepared 2 advanced synthetic intermediates in multiple grams (total 25 synthetic steps), and prepared H3N2b in small quantity in a pilot study. With the synthesized authentic H3N2b at hand, we confirm the structure of endogenous oligosaccharide biomarker as H3N2b. The success of the pilot study provided a foundation to synthesize H3N2b and d6-H3N2b in large quantities. We will scale up the synthesis of H3N2b and its internal standard, and then purify them with preparative high-performance liquid chromatography in the first 3 months of second year. Our goal is to obtain 100 milligrams of pure H3N2b and 50 milligrams of d6-H3N2b.

After synthesis enough H3N2b and d6-H3N2b, we will develop FDA-compliant clinical assays for the oligosaccharide biomarker, determine the relationship between oligosaccharide biomarker levels and disease severity using biospecimens and clinical data collected in the NIH natural history study, and evaluate the response of oligosaccharide biomarker to AAV gene therapy through quantification of the biomarker in urine, plasma, and CSF collected in Phase 1/2 trial.