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# Evaluating pharmacology and efficacy of delandistrogene moxeparvovec in DMD<sup>mdx</sup> rats

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## Objective

To evaluate the efficacy and myocardial safety of delandistrogene moxeparvovec (SRP-9001) in DMD<sup>mdx</sup> rats.

## What does this study mean for the DMD community?

These findings confirmed the expected SRP-9001 dystrophin protein expression in cardiac muscle, and demonstrated the efficacy and myocardial safety of delandistrogene moxeparvovec.



## CONCLUSIONS

- Data from 12 and 24 weeks following systemic administration of delandistrogene moxeparvovec demonstrated no evidence of cardiac toxicity, and there were no deaths attributed to treatment.
- DMD<sup>mdx</sup> rats treated with delandistrogene moxeparvovec exhibited improved histopathology and reduced fibrosis.
- This study demonstrated the efficacy and myocardial safety of delandistrogene moxeparvovec in an animal model of DMD that exhibits cardiac dysfunction.



## BACKGROUND

- Gene transfer therapy is a promising treatment strategy in development for patients with DMD.
- Delandistrogene moxeparvovec is an investigational rAAV-based gene therapy, designed to compensate for missing dystrophin in DMD by delivering a transgene encoding SRP-9001 dystrophin, an engineered dystrophin protein that retains key functional domains of the wild-type protein.
- Systemic delivery of delandistrogene moxeparvovec in the DMD<sup>mdx</sup> mouse model led to improvements in dystrophic histopathology and function of skeletal muscle, with no toxicity observed.<sup>1</sup>
- DMD<sup>mdx</sup> mice do not develop early dilated cardiomyopathy, as seen in patients.<sup>2</sup> To evaluate the efficacy and safety of delandistrogene moxeparvovec in the heart, DMD<sup>mdx</sup> rats present a valuable alternative animal model of DMD, as they demonstrate cardiac dysfunction that recapitulates cardiac dysfunction in patients with DMD.



## METHODS

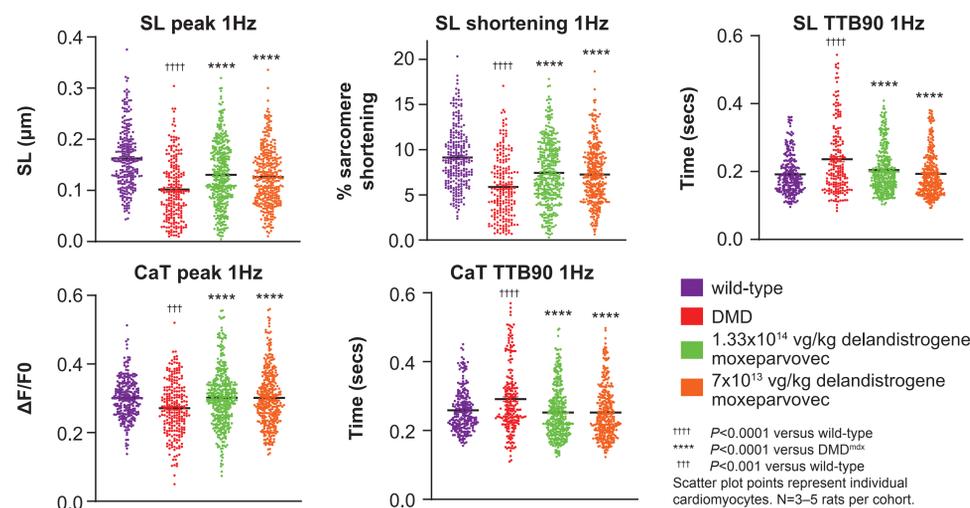
- We performed systemic, intravenous delivery of delandistrogene moxeparvovec in 21- to 35-day-old Sprague-Dawley DMD-mutated, dystrophin-null (DMD<sup>mdx</sup>) rats.<sup>3,4</sup>
- Rats received a dose (1.33x10<sup>14</sup> or 7.00x10<sup>13</sup> vg/kg) of delandistrogene moxeparvovec or 0.9% sterile saline, unless otherwise specified.
- Analyses of expression, biodistribution, physiology, and activity were conducted.
- Ambulation and vertical activity were recorded via the Photobeam Activity System – Open Field.<sup>5</sup>

- Echocardiograms, serum troponin I analysis, and histologic analyses of fibrosis were used to evaluate cardiac disease.
- Individual cardiomyocyte function was assessed using sarcomere shortening and Ca<sup>2+</sup> transient analyses. Cardiomyocytes were enzymatically isolated using Liberase TH; Ca<sup>2+</sup> was reintroduced step-wise to 1.8mM. Myocytes were incubated in a low- Ca<sup>2+</sup> Tyrode solution containing 5μM Fura-2AM for 30–35 minutes at room temperature. Intracellular Ca<sup>2+</sup> transient and sarcomere shortening measurements were induced by electrical field stimulation between 0.2Hz and 4Hz. Cardiomyocyte and Ca<sup>2+</sup> release were measured in 12-week-old (±1 week) rats.
- Endpoints were measured at 12 and 24 weeks.
- Twelve-week sample sizes were n=10 (delandistrogene moxeparvovec) and n=8 (saline), and 24-week sample sizes were n=6 (delandistrogene moxeparvovec) and n=5 (saline), unless otherwise specified.

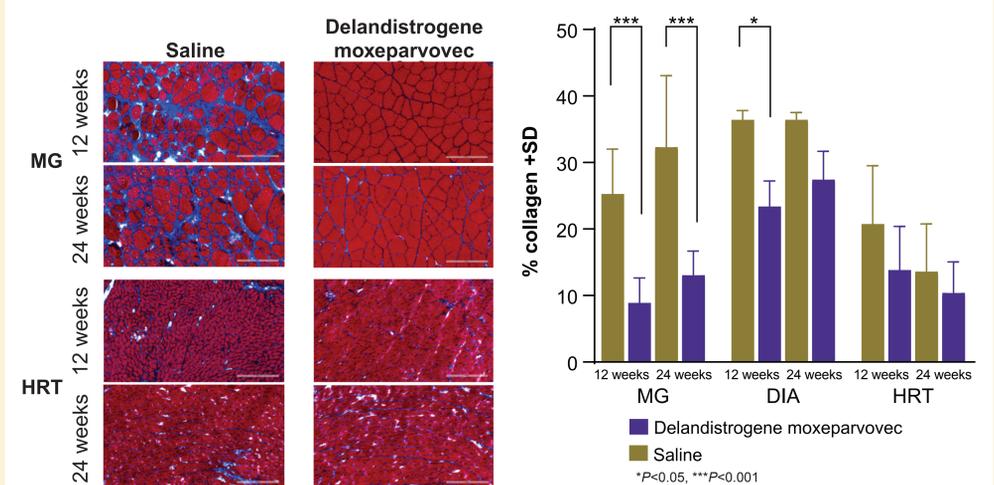


## RESULTS

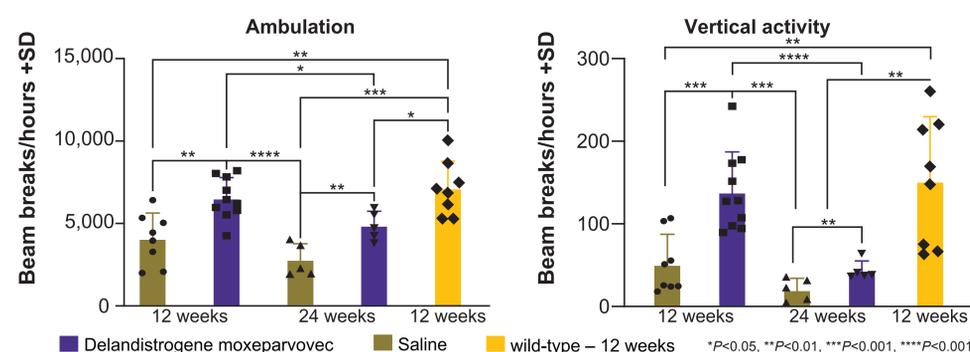
### Delandistrogene moxeparvovec restores cardiomyocyte contractile function and Ca<sup>2+</sup> kinetics in DMD<sup>mdx</sup> rats



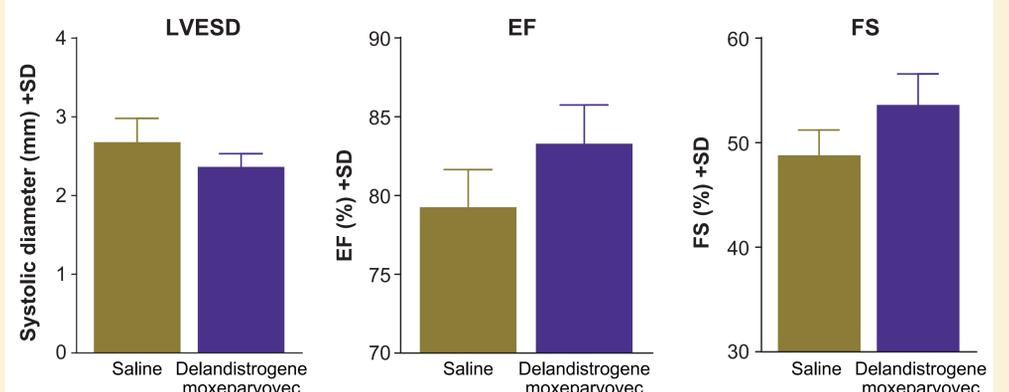
### Reduced fibrosis in skeletal and cardiac muscle in DMD<sup>mdx</sup> rats following treatment with delandistrogene moxeparvovec



### Improvements in ambulation and vertical activity were maintained at 24 weeks following treatment with delandistrogene moxeparvovec



### Cardiac function at 24 weeks following treatment with delandistrogene moxeparvovec



- Troponin I levels in blood did not change significantly following expression of SRP-9001 dystrophin (see Supplementary Materials).

- H&E, quantification of SRP-9001 dystrophin-positive fibers, SRP-9001 dystrophin transgene distribution, and troponin I data are presented in the Supplementary Materials.

## REFERENCES

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- Wasala NB, et al. *Hum Mol Genet*. 2013; 22:2634–2641;
- Kobayashi YM, et al. *Nature*. 2008; 456:511–515;
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- Photobeam Activity System – Open Field. San Diego Instruments, San Diego, CA, USA.

## ABBREVIATIONS

ΔF/F<sub>0</sub>, peak heights of the Ca<sup>2+</sup> transients; CaT, Ca<sup>2+</sup> transients; DIA, diaphragm; DMD, Duchenne muscular dystrophy; EF, ejection fraction; FS, fractional shortening; H&E, hematoxylin and eosin; HRT, heart; LVESD, left ventricular end systolic diameter; mdx, muscular dystrophy X-linked; MG, medial gastrocnemius; rAAV, recombinant adeno-associated virus; SD, standard deviation; SL, sarcomere length; TH, ThermoLysin High; TTB90, time to baseline 90%; vg, vector genome.

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consideration from Sarepta Therapeutics and Myonex Therapeutics (now acquired by Sarepta Therapeutics). In addition, she is a co-inventor of AAVrh74.MHCK7.micro-dys technology. This research used DMD<sup>mdx</sup> rats, which were generated and characterized in the following publication: Larcker T, et al. Characterization of dystrophin deficient rats: a new model for Duchenne muscular dystrophy. *PLoS One*. 2014; 9:e110371. These data are an encore of data first presented by RA Potter at the 27th International Annual Congress of the World Muscle Society (WMS) 2022.