Antisense oligonucleotide mediated increase in OPA1 improves mitochondrial function in fibroblasts derived from patients with autosomal dominant optic atrophy (ADOA)

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Disclosures:

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OPA1 haploinsufficiency is the primary cause of autosomal dominant optic atrophy (ADOA)

• ADOA is the most common inherited optic nerve disorder and is characterized by retinal ganglion cell loss

• 65-90% of cases are caused by mutations in one allele of the *OPA1* gene, a mitochondrial GTPase with a critical maintenance role in mitochondria structure and function

• Most *OPA1* mutations lead to a haploinsufficiency, resulting in about a 50% decrease of normal OPA1 protein levels



• Approximately 1 out of 30,000 people are affected globally with a higher incidence of ~1 out of 10,000 in Denmark due to a founder effect

• ADOA typically presents within the first decade of life. 80% of patients are symptomatic before 10 years of age

• The disease causes progressive and irreversible vision loss and up to 46% of patients are registered as legally blind. No therapeutic options are available to patients with ADOA © Copyright 2021 Stoke Therapeutics



Targeted Augmentation of Nuclear Gene

Output

Our compounds aim to restore protein levels by increasing protein production from the functional copy of a gene and:

- Selectively boost expression only in tissues where the protein is normally expressed
- Offer one drug for diseases caused by many different mutations
- Apply to genes of diverse size: can be used to address small or large gene targets





TANGO is ideally suited to the treatment of ocular diseases

- Intravitreal injection permits diffusion throughout eye to deliver ASOs to retinal cells
- Potential for long-term efficacy (up to 1 year in mouse retina) after a single intravitreal injection¹
- No specialized formulation or encapsulation required for ASO therapy
- Potential to target genes with large coding domains and/or multiple protein isoforms that are not amenable to AAV-based gene therapy



Previous preclinical data¹ support the potential use of TANGO in ADOA

- ASO-mediated specific reduction in NMD exon inclusion splicing in *OPA1* pre-RNA
- Dose-dependent increase in total *OPA1* mRNA and protein levels in vitro
- Reduction in non-productive splicing and increase in OPA1 protein levels in vivo in wild-type rabbit retinae
- Well-tolerated in wild-type rabbit for up to 28 days after intravitreal injection (unpublished data)

Is TANGO a disease modifying approach for ADOA?



Primary fibroblast cells were obtained from skin biopsies of three ADOA patients

OPA1 mutations in diagnosed ADOA patients:

- F34: c.1608+1delGTGAGG (canonical splice mutation)
- F35: c.2873_2876del (frameshift mutation)
- F36: c.635_636delAA (frameshift mutation)



Questions addressed in the presentation

- Do the ADOA patient fibroblast lines show reduced OPA1 expression consistent with haploinsufficiency?
 - > Can TANGO ASO modify OPA1 expression in ADOA patient cells?
- Is reduced OPA1 expression associated with a decrease in mitochondrial function?
 - > Can TANGO ASO alter mitochondrial function in ADOA patient cells?

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All ADOA patient fibroblast lines show reduced *OPA1* mRNA & protein levels



C Representative immunoblot of OPA1 protein expression level in *OPA1* +/- fibroblast cells





TANGO ASO reduces non-productive exon inclusion and increases OPA1 ST KE mRNA expression in all cell lines



Reduction in non-productive splicing increases total OPA1 mRNA levels in all patient cell lines

Fibroblast cells were transfected with ASO-14 (40nM). RNA was isolated 24 hrs. after transfection and analyzed. For non-productive OPA1 mRNA measurement, cells were treated with cycloheximide (50µg/mL) for 3 hrs. prior to RNA isolation.

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© Copyright 2021 Stoke Therapeutics NMD: non-sense mediated decay, WT: Wild-type; histograms show mean ± SEM of 2-3 independent experiments; one-way ANOVA vs. Mock for respective cell line (*P<.05; ***P<.001; ****P<.0001).



TANGO ASO increases OPA1 protein expression for all three mutations

Fibroblast cells were transfected with ASO-14 (40 nM). Immunoblot was performed 72 hrs. post transfection with antibodies targeting OPA1 and β-tubulin WT: Wild-type; histograms show mean ± SEM of 3 independent experiments; unpaired t-test vs. Mock for respective cell line (*P<0.05, ** P<0.01, ***< 0.001)

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Patient fibroblast cell lines show deficiencies in mitochondrial bioenergetics

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Units are pmol/min/cells. Oxygen Consumption Rates (OCR) normalized to total cell count and plotted relative to wild-type (WT); Histograms show mean ± SEM of >18 individual measurements from 2 independent experiments; one-way ANOVA vs. WT (** P<.01; **** P<.0001). © Copyright 2021 Stoke Therapeutics

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TANGO ASO increases mitochondrial bioenergetics in F35 patient cell line

**** Α В **** **** 140-**** 140-120-**ATP** linked respiration 120 100 100· **Basal OCR** 80· 80 60· 60 **40** 40 20· 20 **ASO-14** increases Ô٠ AONM Moct 20111 60nM 20nM AONM 20111 AONN 60mM 20011 AORM 60mM Moct 60nM mitochondrial bioenergetics in a dose-dependent manner ASO-14 NT ASO ASO-14 NT ASO С D * **** **** *** **** 160· Spare respiratory capacity 140-140-**Maximal respiration** 120-120· 100-100· 80 80· 60 60-40-40 20-20 MOCH 20011 AORM 60mM 20nm AONM 60mM 20111 AONM 60nM 20011 AORM Moct 60rm NT ASO NT ASO ASO-14 **ASO-14**

Units are pmol/min/cell; Oxygen Consumption Rates (OCR) normalized to total cell count and plotted relative to Mock (No ASO); NT: Non-targeting. © Copyright 2021 Stoke Therapeutics Histograms show mean ± SEM of >20 individual measurements from at least 3 independent experiments; one-way ANOVA vs. Mock (*P<.05; ***P<.001; ****P<.0001); NT ASO targets an unrelated gene.



TANGO ASO increases mitochondrial bioenergetics in F36 patient cell line

Dose-dependent increase in mitochondrial bioenergetics is mutation-independent

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Units are pmol/min/cells; Oxygen Consumption Rates (OCR) normalized to total cell count and plotted relative to Mock (No ASO); NT: Non-targeting (40 nM). Histograms show mean ± SEM of >20 individual measurements from 2-5 independent experiments; one-way ANOVA vs. Mock (*P<.05; ** P<.01; *** P<.001 **** P<.0001).

Preclinical data support TANGO as a potential disease modifying approach to treat ADOA



TANGO ASO reduced non-productive exon inclusion and increased total *OPA1* mRNA expression in three patient fibroblast cell lines with different mutations.

TANGO ASO increased expression of multiple OPA1 protein isoforms in patient fibroblast cell lines.

TANGO ASO supported a dose-dependent increase in mitochondrial respiration in patient fibroblast cell lines.

TANGO upregulation of OPA1 potentially provides a disease modifying approach to treat ADOA in a mutation-independent manner.

Questions?

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