

Where Are the Opportunities, Challenges in Airway Disease

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Respiratory Innovation Summit
ATS International Conference

May 17, 2019

Disclosures: licensed patents – Propeller Health

Equity – Nocion Therapeutics, Entrinsic Health

Consulting – AstraZeneca, Bayer, Corbus Pharmaceuticals, Gossamer Bio, Entrinsic Health, MedImmune, Merck, Metera Pharmaceuticals, Nocion Therapeutics, Novartis, Pieris Pharmaceuticals, Sanofi, Teva Pharmaceuticals

Collaborative research – Merck, Meso Scale, SRA, Sanofi



Market Overview: Airway Disease

Opportunities and Challenges

Major Airway Diseases:

Asthma

COPD

Cough

Opportunities:

Precision Medicine

Mitigating Symptoms (Exacerbations)

Disease Modification (Loss of Lung Function/Cure)

Leveraging Technology (New sensors/drug delivery/ AI)

Challenges:

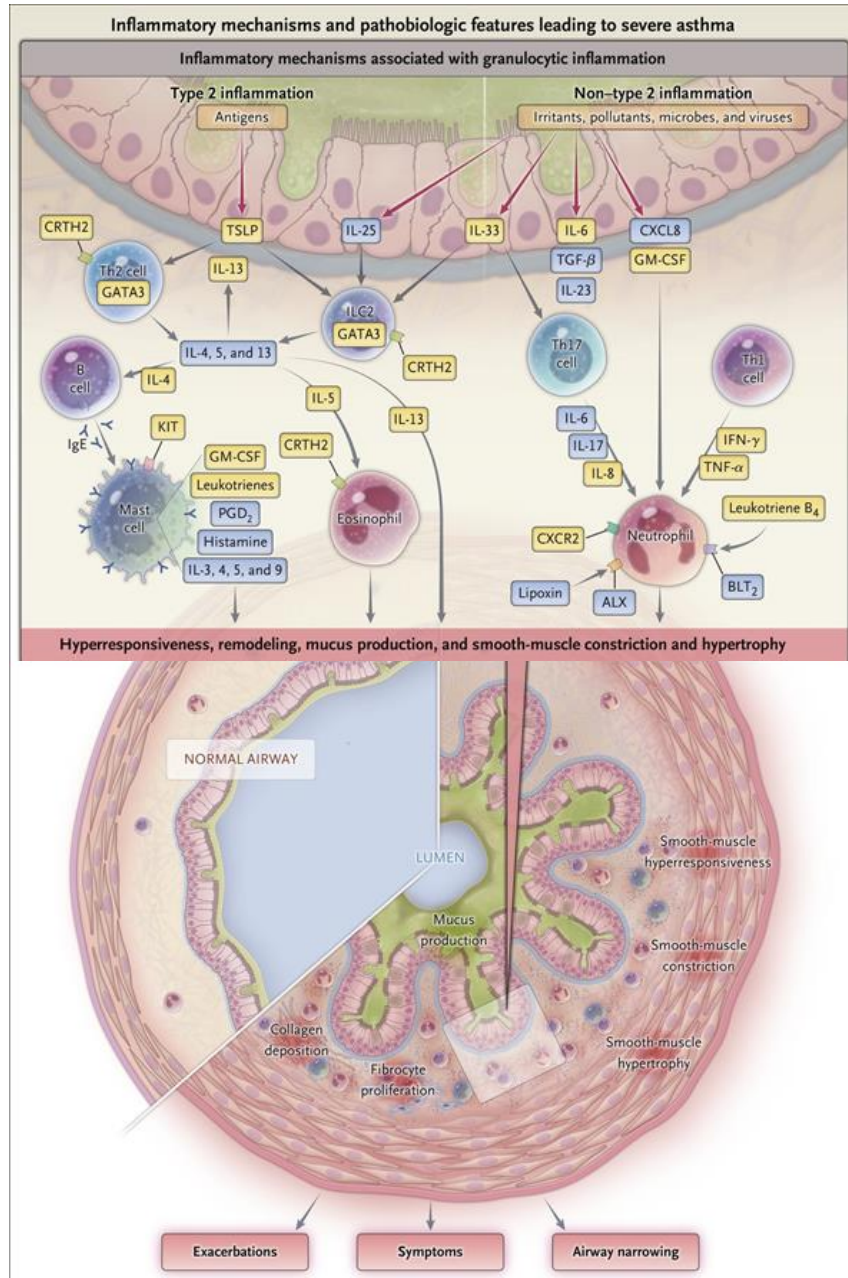
Moving from Phenotype to Endotype

Disrupting Paradigms/Rethinking Pathobiology

Learning from both Academia and Industry

Implementation

Opportunities and Challenges For Asthma



Asthma –

Phenotype to Endotype (Clinical Criteria to molecular mechanisms)

T2 – Treatment is now addressed with several molecules

Non-T2 mechanisms – Where's the tractable biology?

Neutrophils – IL-6^{High}/Infections/NETosis

Revisiting the asthma paradigm for increased pro-inflammatory factors

Non-inflammatory mechanisms/AHR

Defective Resolution mechanisms/SPMs

Disease modification - Next frontier is primary prevention

Preserving lung function, reducing exacerbations, inducing remissions

⇒ All 3 require early intervention

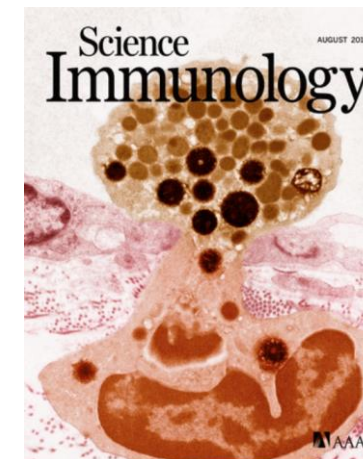
Implementation - Impact of the new 2019 GINA recommendations –

No SABA alone ⇒ SABA with ICS prn or ICS-LABA combination

Israel E, Reddel HK. NEJM 2017;377:965

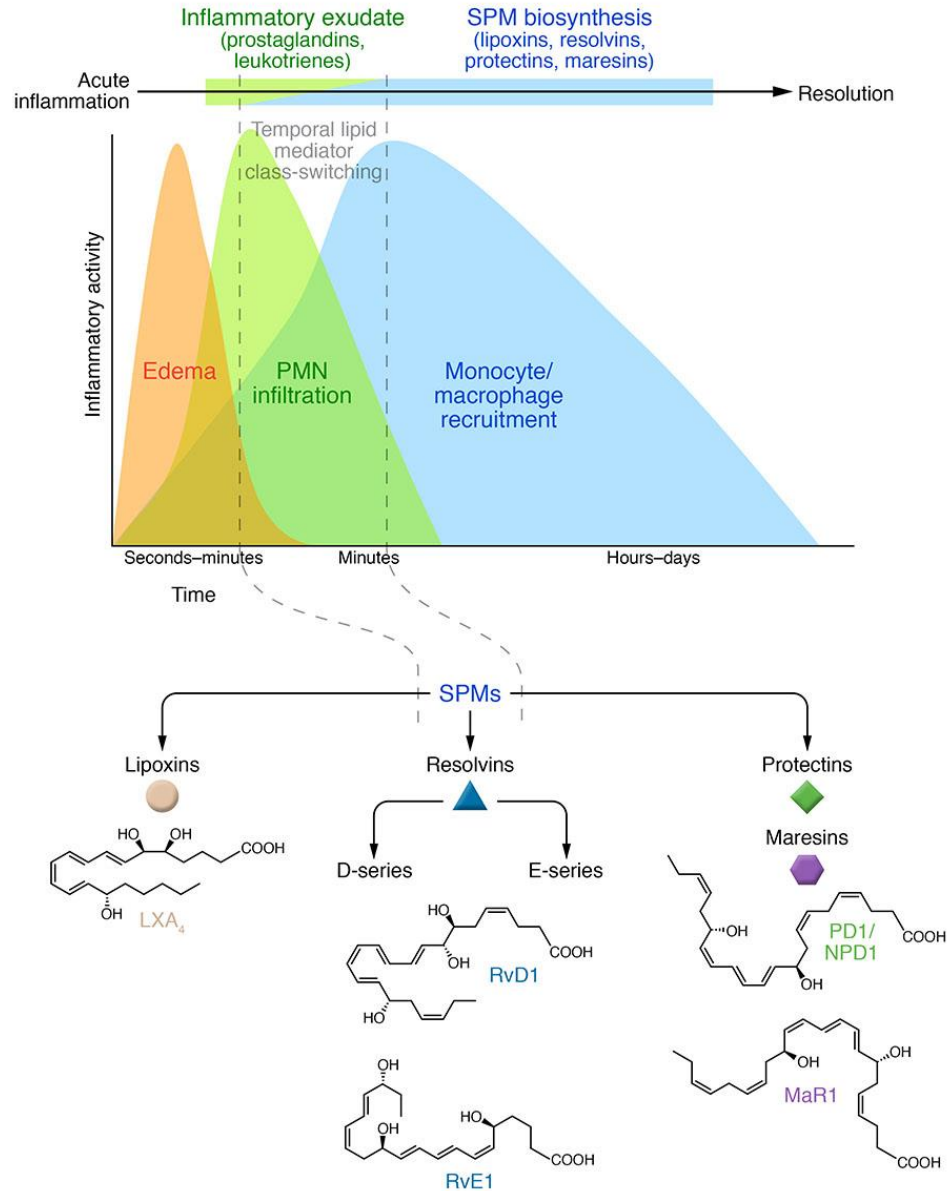


The NEW ENGLAND
JOURNAL of MEDICINE

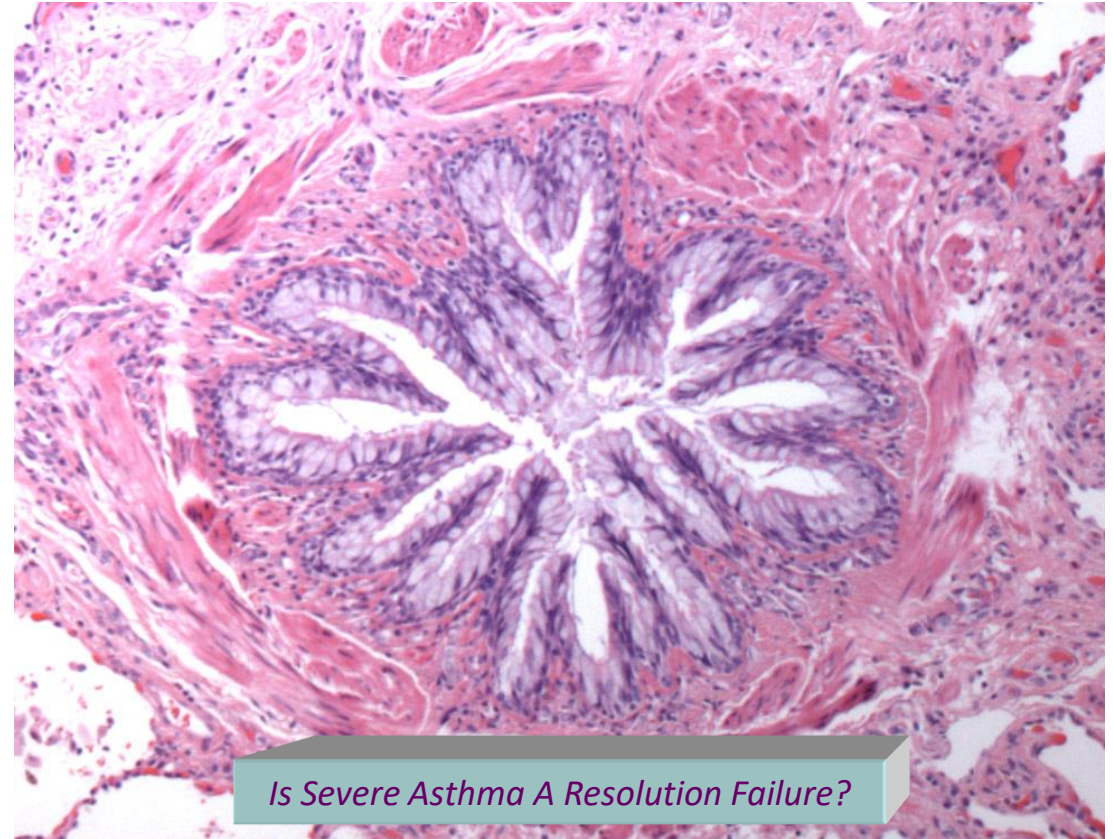


Neutrophil cytoplasmic induce TH17 differentiation and skew inflammation toward neutrophilia in severe asthma

Ideal Outcome of Acute Inflammation Is Complete Resolution

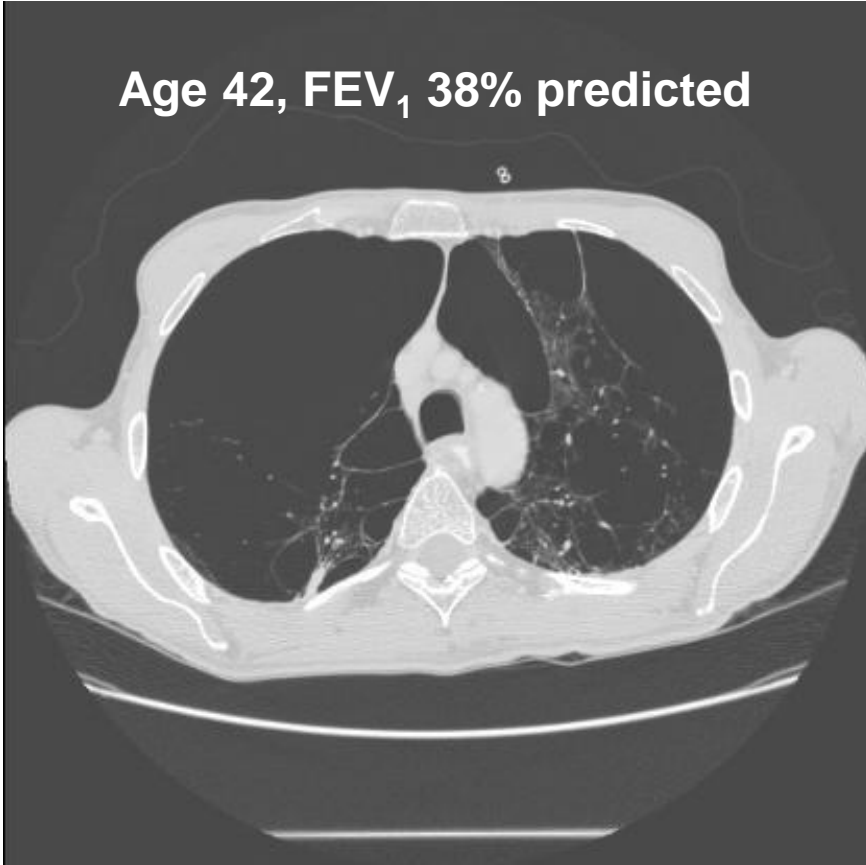


Revisiting Asthma Pathobiology

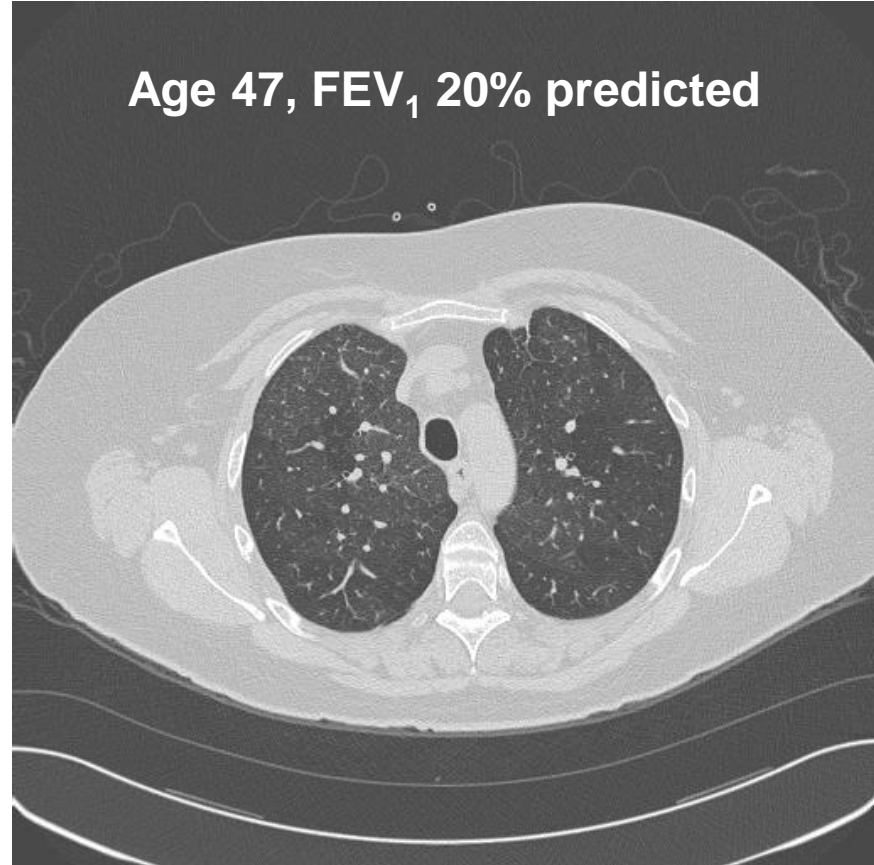


COPD or COPS

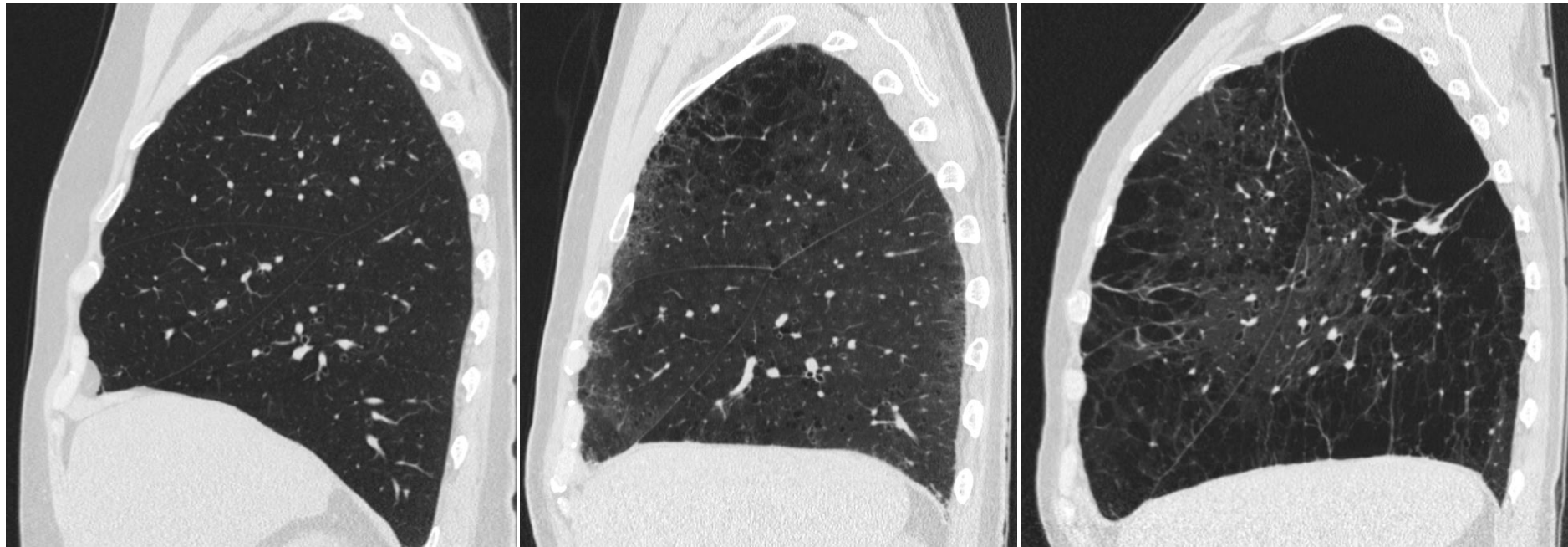
Age 42, FEV₁ 38% predicted



Age 47, FEV₁ 20% predicted



Parenchymal Heterogeneity: GOLD Stage 1 COPD



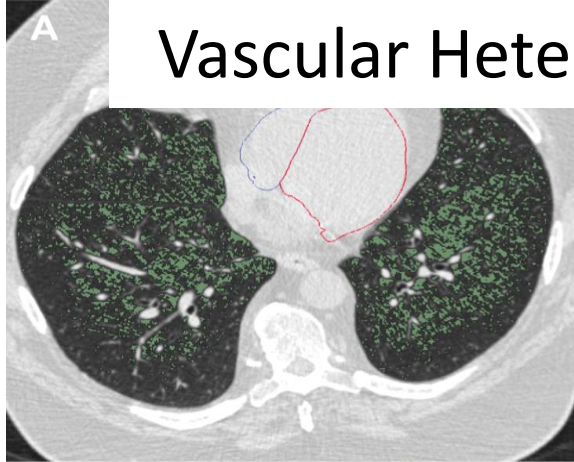
FEV1: 85%

FEV1: 82%

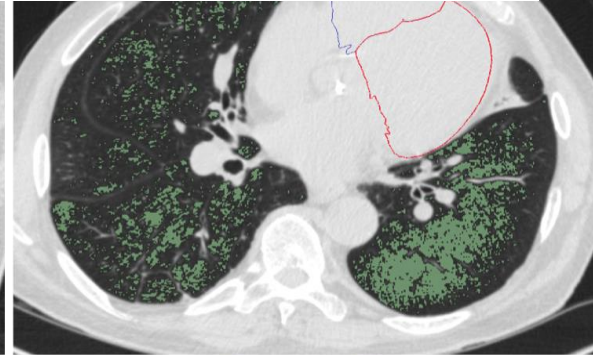
FEV1: 88%

Vascular Heterogeneity: COPD

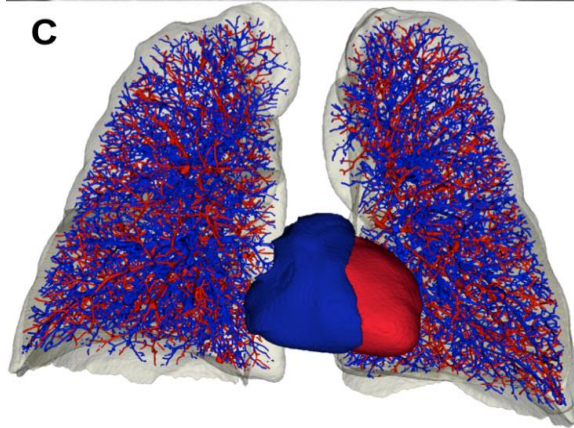
19%
emphysema



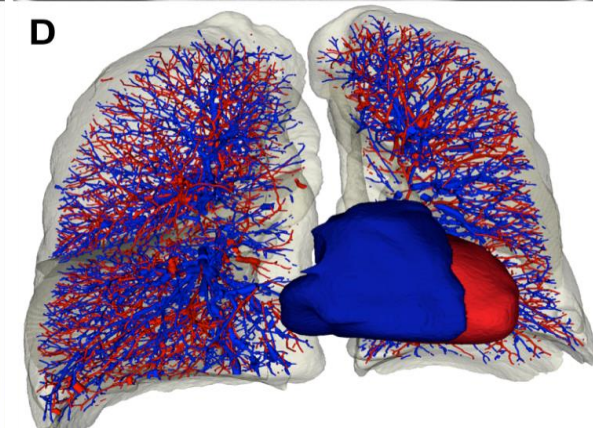
18%
emphysema



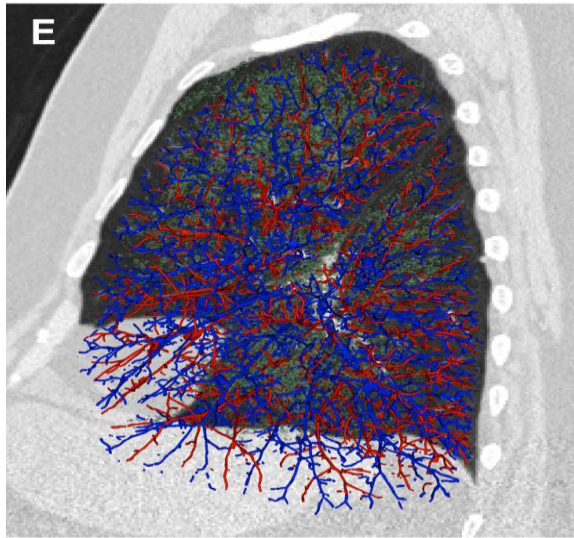
RV_{EV} : 58.9mL



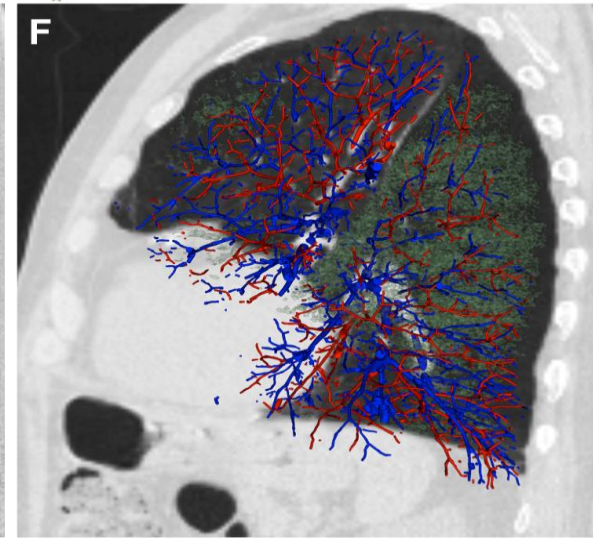
RV_{EV} : 140mL



Arterial BV5:
131mL

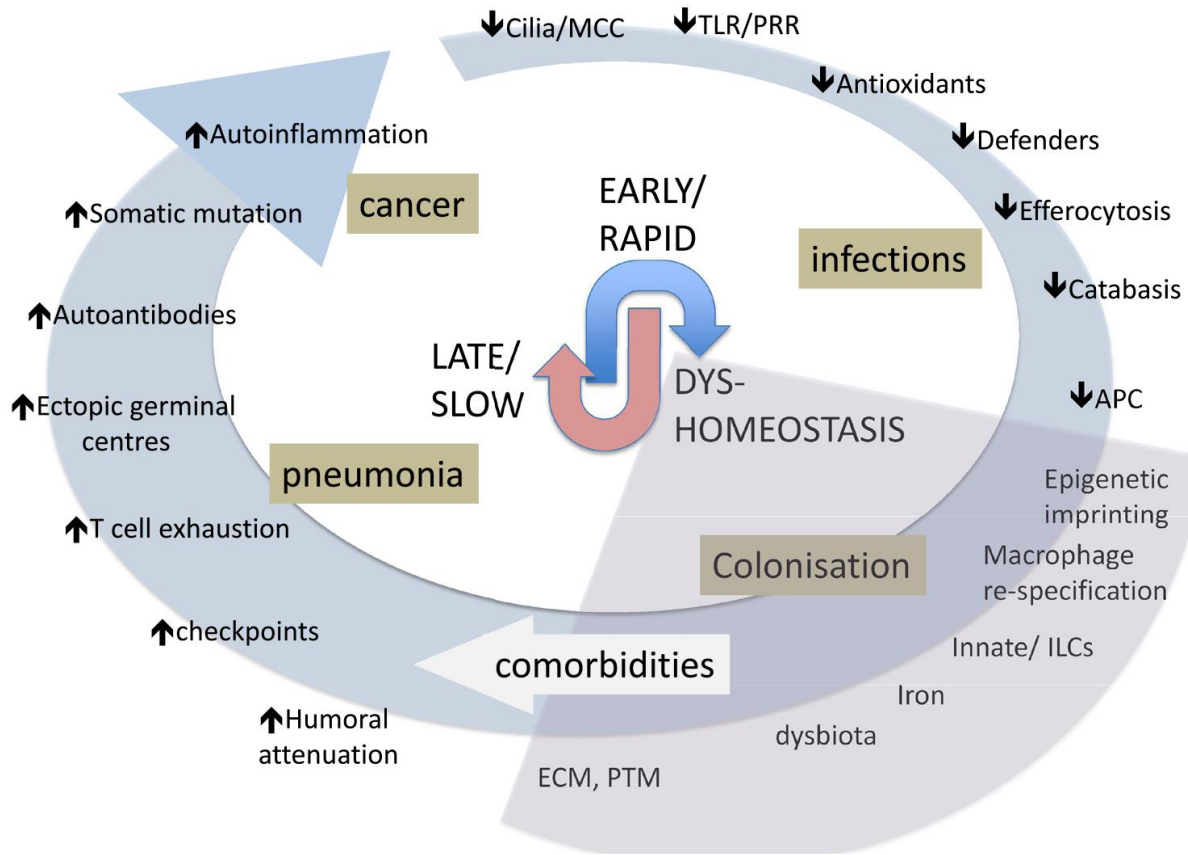


Arterial BV5:
70.8mL



Opportunities and Challenges For COPD

Smoke Damages Immunity From Almost the First Exposure



2016, 5(F1000 Faculty Rev):2392 (doi:10.12688/f1000research.7018.1)

COPD –

Phenotype to Endotype (Clinical Criteria to molecular mechanisms)

COPD or COPS – Evident clinical heterogeneity

COPD gene

Dysregulated innate immune responses

Revisiting the COPD paradigm

Need more than bronchodilators

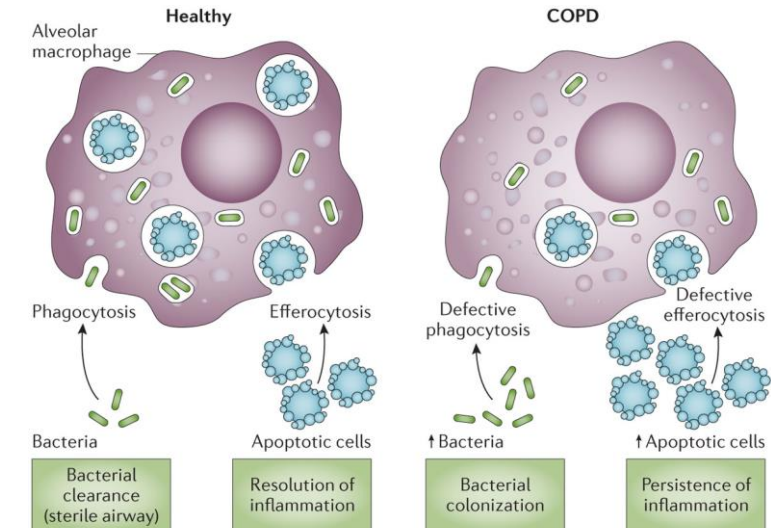
Links between inflammation matrix destruction and microbiome

Defective Catabasis

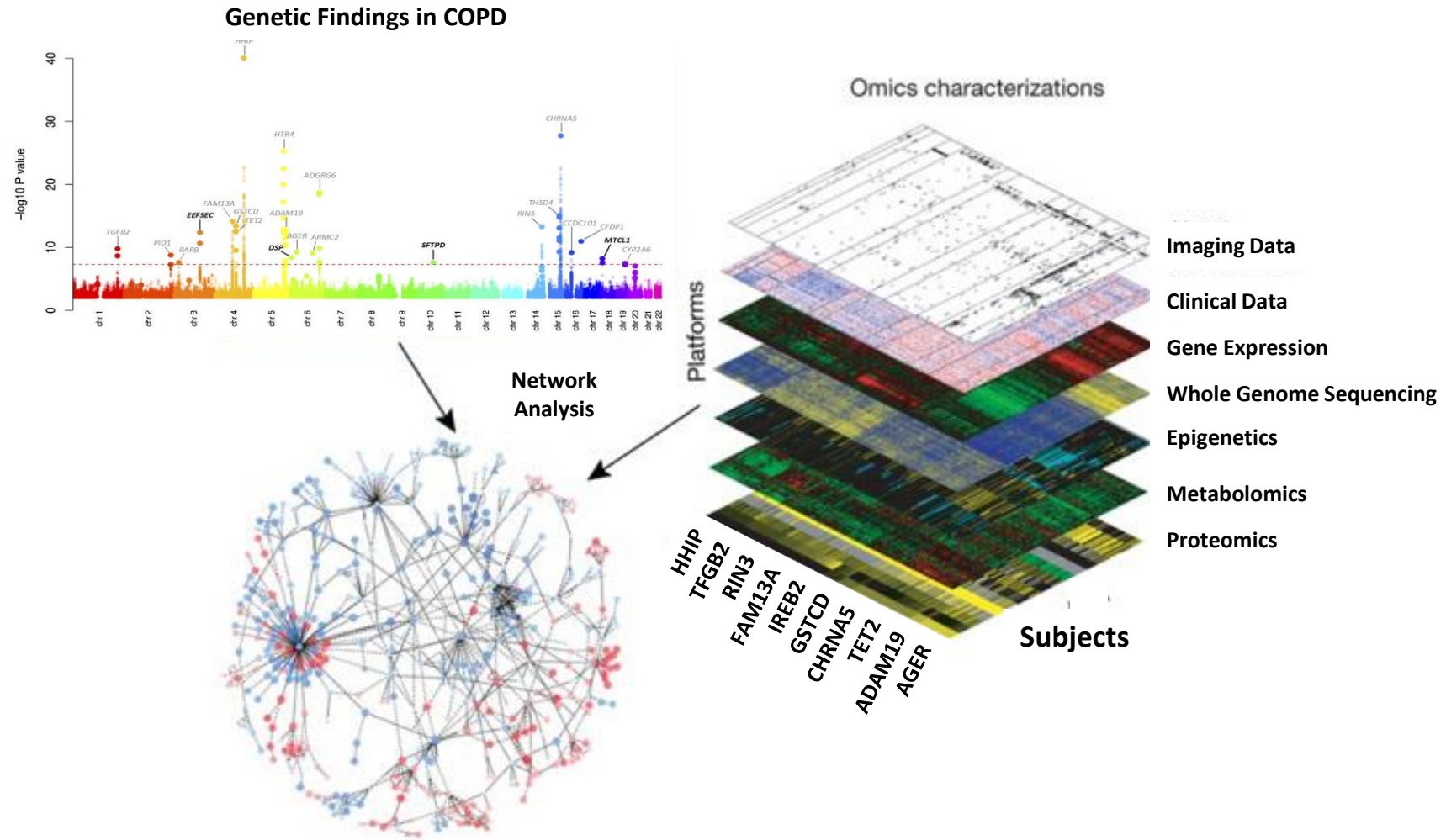
Disease modification -

Preserving lung function, reducing exacerbations, inducing remissions

⇒ All 3 require early detection (biomarkers) and intervention



COPDGene Phase 3



Opportunities in Airway Disease: Conceptual Framework of Endotypes Provides Stratification

Reduces large heterogenous syndromes into smaller cohorts
with aligned molecular mechanisms

Advances the field

Create smaller, potentially more tractable (?) opportunities for industry

Opportunities and Challenges For Cough:

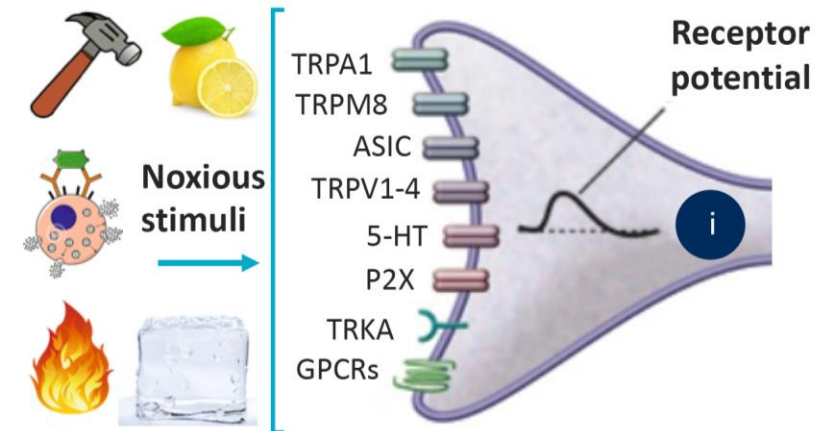
“Itch of the airway” - mediated by nociceptors

- Prevalence of cough ranges from 5-40% of population
 - Single most common symptom prompting outpatient medical visits in US
- Labeled products show marginal benefit over placebo
- Pain medications and sodium channel blockers used to treat cough
 - Nebulized lidocaine is used for procedures, in severe chronic cough patients as well as in the military



Nociceptor Activation in Cough: Large Pore Channels

PERIPHERAL TERMINAL



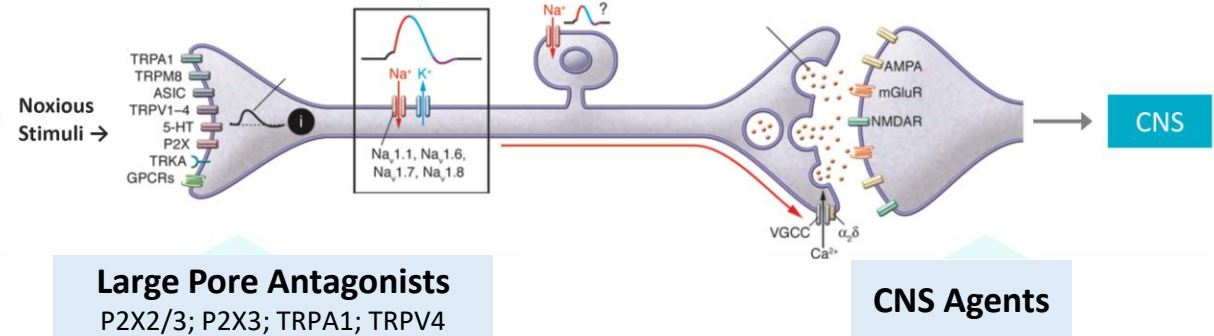
Nociceptor Activation in Cough: Multiple Approaches

Anti-inflammatory

NaV Inhibition

Lidocaine, tetracaine, benzocaine

Noxious Stimuli →



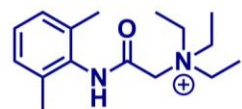
Large Pore Antagonists

P2X2/3; P2X3; TRPA1; TRPV4

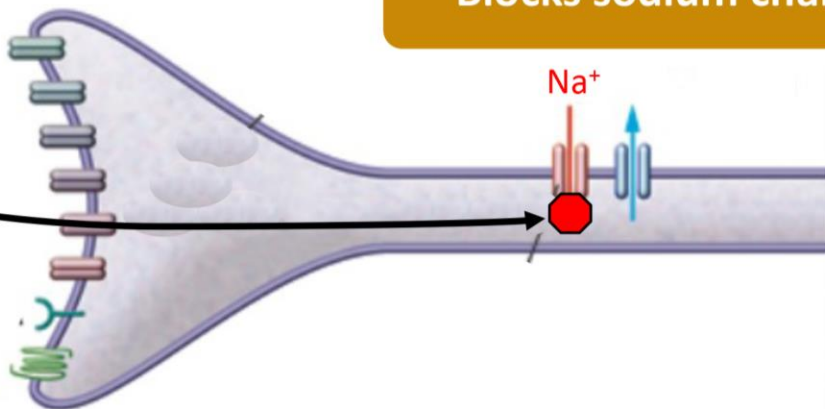
CNS Agents

Nociceptor Silencing – Charged Sodium Channel Blockers

CSCB or “Nocion”



Blocks sodium channel



Gains internal access to activated nociceptor through any open large-pore channel

Nocions

- ✓ **Longer-acting**, potential for QD/BID dosing
- ✓ **Locally selective**, not passively cell permeable
- ✓ Topical; **minimal systemic redistribution**
- ✓ Broad and **potent** Na_v inhibition
- ✓ **No TRPA1 / TRPV1 agonism**
- ✓ *In vivo* data in cough, itch, surgical pain, atopic dermatitis
- ✓ Novel composition of matter

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