Novel Therapies in CLI: Stem Cells & Growth Factors

Are They Clinically Beneficial or Horizon Therapies?

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A Horizon Therapy?

"So many of our dreams at first seem impossible, then they seem improbable, and then, when we summon the will, they soon become inevitable..."

> Christopher Reeve (aka Superman)

The Goal of 'Therapeutic Angiogenesis':

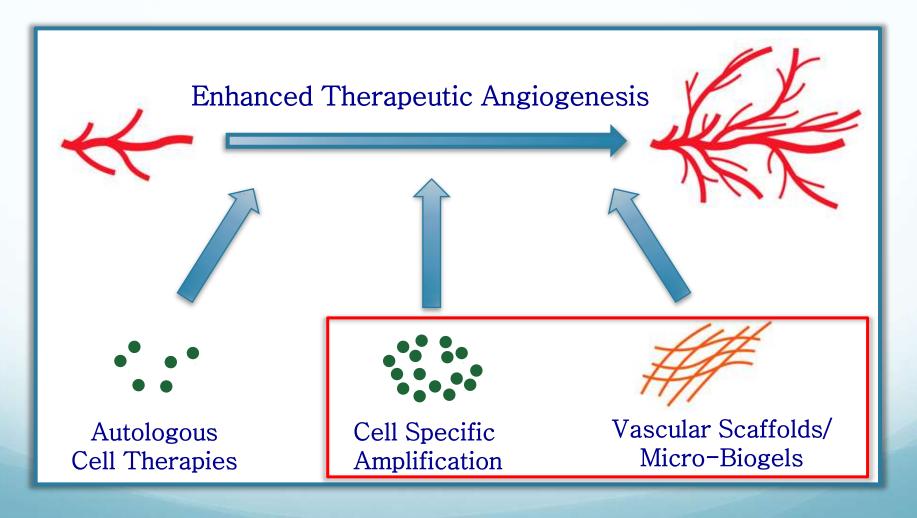
The application of *regulatory genes*, *proteins* and/or *progenitor cells* to patients with vascular disease to *enhance tissue perfusion* through the development of new blood vessels.

In other words: Enhance the body's natural process of regeneration.

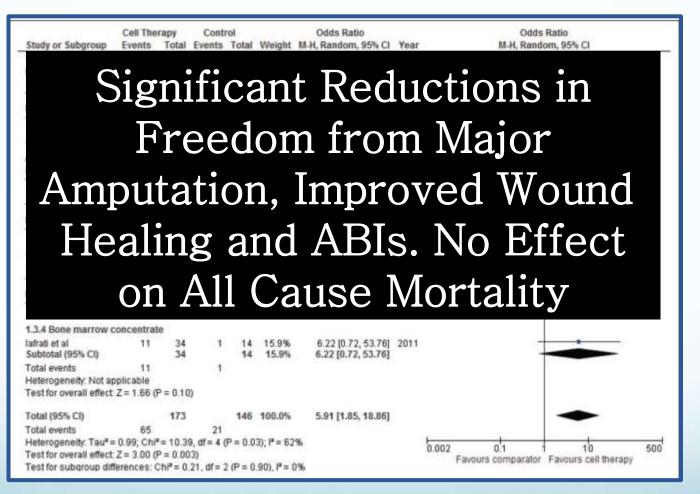
What are the Potential Challenges Faced by these Early Phase Trials?

- What is the ideal mode of administration, cell number for optimal effect, pattern/method/location of administration?
- Time to peak effect, interval dosing? Is a single administration sufficient for optimal effect?
- Is the "no option/poor option" CLI patient too far advanced to salvage and how should that be assessed?
- How do we translate cellular signals of angiogenesis into clinically relevant 'patient-centric' endpoints in assessment of effectiveness and safety?

Emerging Paradigms in Cellular Regenerative Medicine



Meta-Analysis of 16 RCTs of Various Cell Therapies Show a Favorable Trend



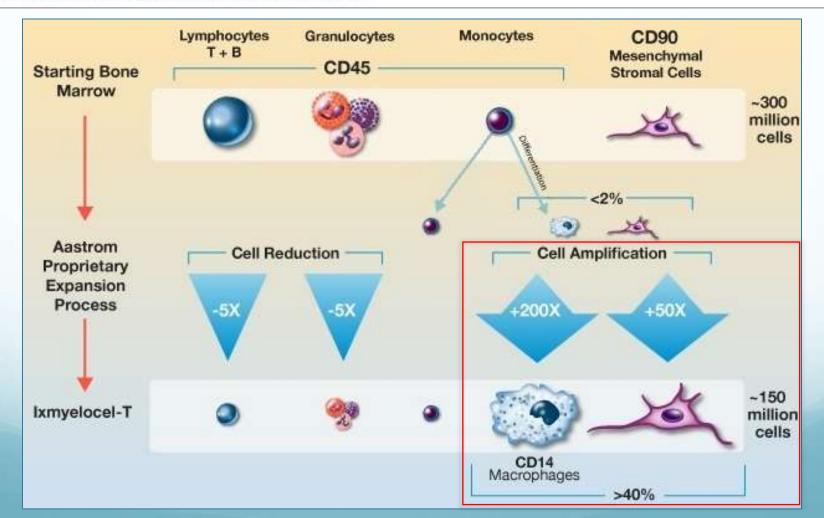
Odds ratio of improvement in ABI (>0.1 or >15%) in patients with CLI treated with cell therapy versus no cell therapy (random effects model).

Liew et al., Angiology 2015

Ixmyelocel-T for patients with ischaemic heart failure: a prospective randomised double-blind trial



Amit N Patel*, Timothy D Henry*, Arshed A Quyyumi, Gary L Schaer, R David Anderson, Catalin Toma, Cara East, Ann E Remmers, James Goodrich, Akshay S Desai, David Recker, Anthony DeMaria, for the ixCELL-DCM Investigators



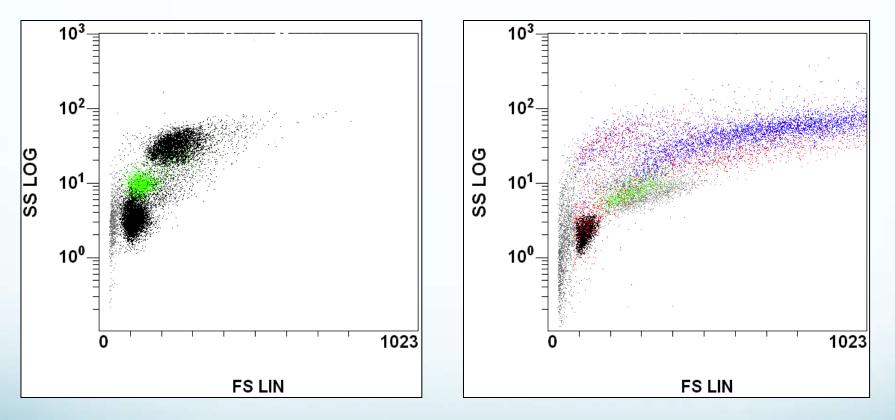
Bone Marrow Harvest – Cells Undergo Expansion in Bioreactor



- ~50cc bone marrow aspirate
 - Processed using a proprietary, automated, closed culture system (~12 day process).
- 35-295 x 10⁶ viable cells: mesenchymal stromal and CD45+ hematopoietic stem cells
- Re-administered IM

Powell SVS 2010

Amplification of Early Stage Cells Found in Bone Marrow

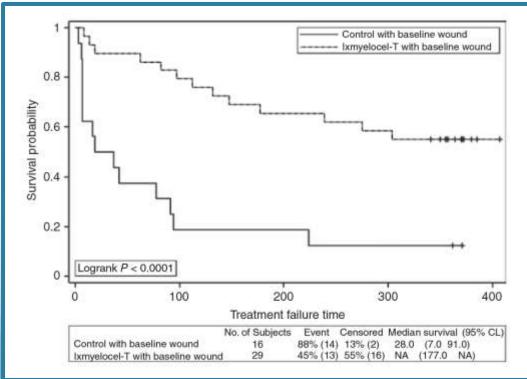


Frequency Distribution of Cell Types Shifts Towards Stem and Progenitor Cells

Powell SVS 2010

Cellular Therapy With Ixmyelocel-T to Treat Critical Limb Ischemia: The Randomized, Double-blind, Placebo-controlled RESTORE-CLI Trial

Richard J Powell¹, William A Marston², Scott A Berceli³, Raul Guzman⁴, Timothy D Henry⁵, Amy T Longcore⁶, Theresa P Stern⁶, Sharon Watling⁶ and Ronnda L Bartel⁶



Powell et al., Moll Ther 2012

- Phase II RTC trial of "no option" CLI patients
- No difference in AFS b/t two groups; treatment w/ Ixmyelocel-T resulted prolongation of TTF
- Post hoc: those w/ baseline wounds had reduction in treatment failure

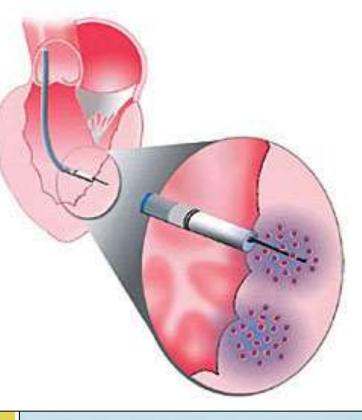
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NOGA MyoStar[™] Catheter (BioSense Webster, Inc)



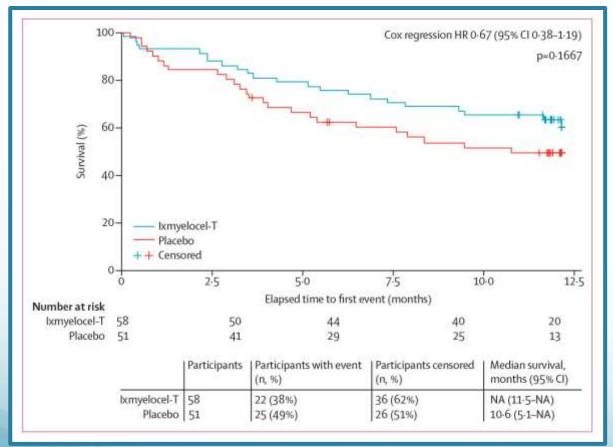


Powell et al., Moll Ther 2012

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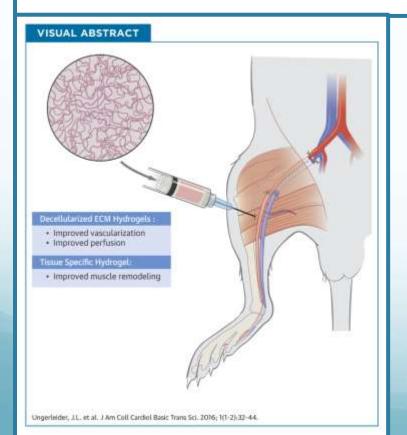
Kaplan-Meier analysis of time to first occurrence of primary endpoint event for ixmyelocel-T versus placebo (n=109) NA=not applicable. Patel, et. Al. Lancet April 2016

- Same amplification process used in RCT Phase IIB trial of nooption I-DCM patients: Reduction in all cause CV mortality, re-admissions for acute CHF at 12 mos. No change in NYHA class, EF, 6MWT.
- FDA Orphan drug status.
- Ixmyelocel-T may be re-considered to treat CLI patients (Vericel, Inc)

Extracellular Matrix Hydrogel Promotes Tissue Remodeling, Arteriogenesis, and Perfusion in a Rat Hindlimb Ischemia Model



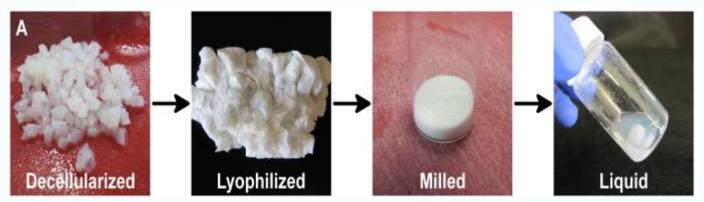
Jessica L. Ungerleider, BS,^{a,*} Todd D. Johnson, PHD,^{a,*} Melissa J. Hernandez, BS,^a Dean I. Elhag, BS,^a Rebecca L. Braden, MS,^a Monika Dzieciatkowska, PHD,^b Kent G. Osborn, DVM, PHD,^c Kirk C. Hansen, PHD,^b Ehtisham Mahmud, MD,^d Karen L. Christman, PHD^a



- Biologic hydrogels: Acellular extracellular matrix (ECM) based materials
- Tissue-specific (skeletal muscle) biocompatible, injectable
- Injected alone: SKM progenitor
 + cell recruitment & arteriogenesis
- Improved functional perfusion in an ischemic hindlimb model

Ungerleider et al. JACC Basic Trans Sci, 2016

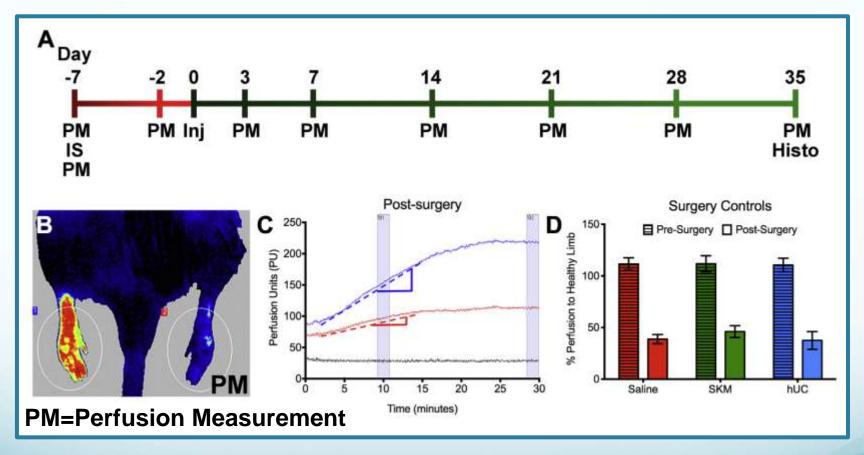
SKM Hydrogel Production



- Porcine skeletal muscle harvested, minced, repeated rinsings, exposure to buffered alcohols & proteases
 → lyophilized and milled.
- SKM ECM re-suspended in buffered saline and injected SQ into rat hindlimb to induce gelation.
- Skeletal muscle perfusion and migration of skeletal cell precursors assessed.

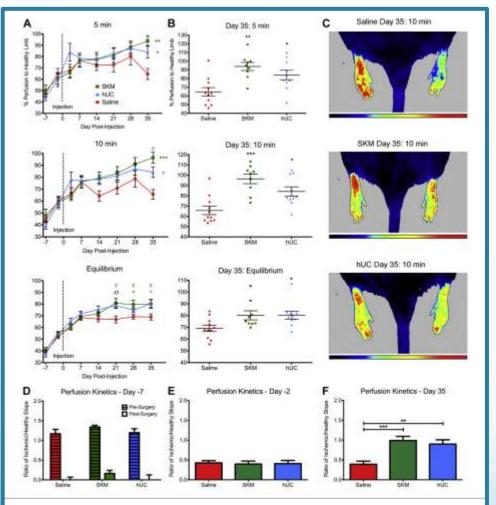
Ungerleider et al. JACC Basic Trans Sci, 2016

Functional Perfusion Study Post-SKM ECM Hydrogel Injection into Rat Ischemic Hindlimb



Ungerleider et al. JACC Basic Trans Sci, 2016

Hindlimb Tissue Perfusion and Perfusion Kinetics



(A) Hindlimb perfusion measurements over the 42-day period for animals treated with either the skeletal muscle matrix (SiOM) (n = 9), human untibilial cord matrix (huC) (n = 10) hydrogels, or saline (n = 11). Readings are shown after the animal had been under anesthesia for 5 min, 10 min, and after reaching perfusion equilibrium. Vertical dotted line indicates time of treatment injection of av 0. (B) individual animal perfusion readings on day 35. (C) Example representative perfusion images for soch treatment group after the animal was under anesthesia for 10 min. Healthy limbs are on the left and ischemic/treated limbs are on the **right**. Note: Because the units for perfusion are arbitrary, color comparisons cannot be performed between 2 different animals. (D) Perfusion limits for perfusion limits for perfusion limits for perfusion limits. A 2-way analysis of variance was conducted to compare within and between treatment groups. cp < 0.05 for 5MM compared to salline using a Tukey post hoc test.

- SKM hydrogel injection improved perfusion over control.
- Moreover, SKM hydogel improved skeletal muscle remodeling by recruitment of skeletal muscle progenitors and increasing density of arterioles through 35 days
- SKM hydrogels improved the local cellular microenvironment (inflammation, down-regulation of cell death, up-regulation of cell-adhesion

(Ventrix, Inc)



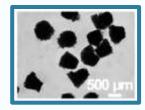
Primed 3D injectable microniches enabling low-dosage cell therapy for critical limb ischemia

Yaqian Li^{a,b,1}, Wei Liu^{a,1}, Fei Liu^{a,c,1}, Yang Zeng^a, Simin Zuo^a, Siyu Feng^d, Chunxiao Qi^a, Bingjie Wang^a, Xiaojun Yan^a, Ali Khademhosseini^{e,f,g,h,i}, Jing Bai^a, and Yanan Du^{a,b,2}

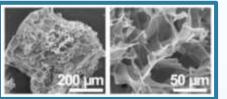
number of SCs

Α

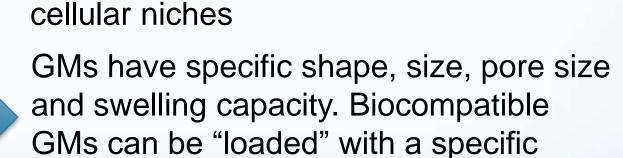
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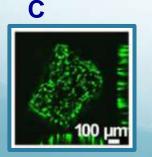






Cryo-gelation fabrication of biogradable

gelatin micro-cryogels (GM) that create



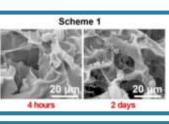
Yaqian, et al. PNAS 2014

Uniform size, number, viability and attachment is achieved. The GM elasticity protects the SC from the mechanical forces of IM injection

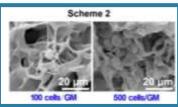


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D





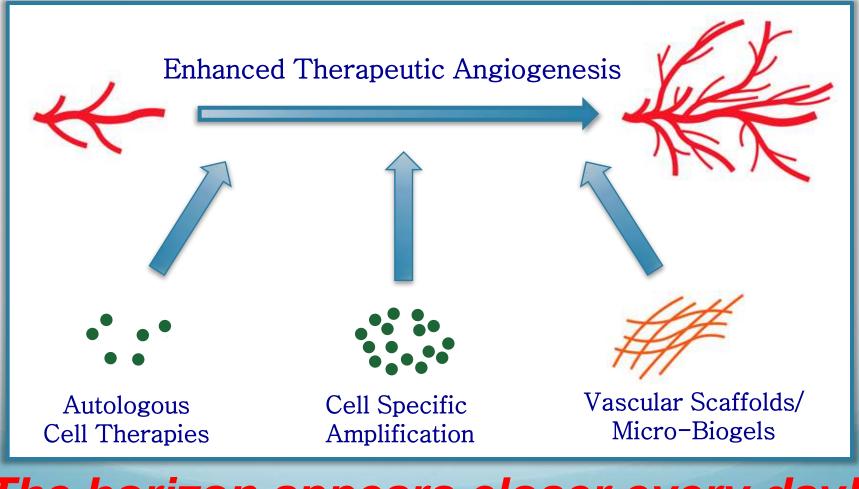
Amount of extracellular matrix formation is modulated by incubation of GM/SCs for specific durations and cell densities

Ε



Injected "primed" GM+SCs resulted in a higher density of microvessels v. "free" SCs at a lower number of SCs. Greater tissue perfusion and limb salvage scores were observed.

Emerging Paradigms in Cellular Regenerative Medicine



The horizon appears closer every day!

The Promise of Cellular Regenerative Therapies

I don't know where we are going from here, but I promise it won't be boring....

David Bowie