

Transplantation av dopaminerga celler vid Parkinson's sjukdomen utopi?

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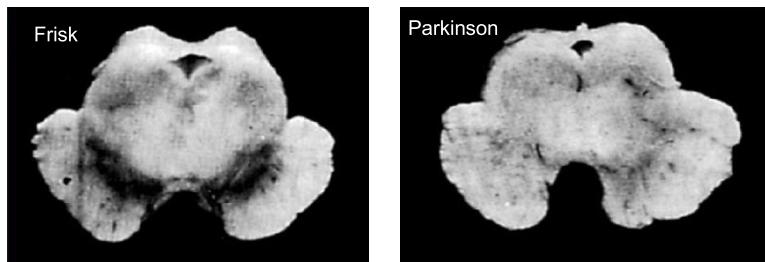
Vårdföreningen Movement Disorders
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Varför?

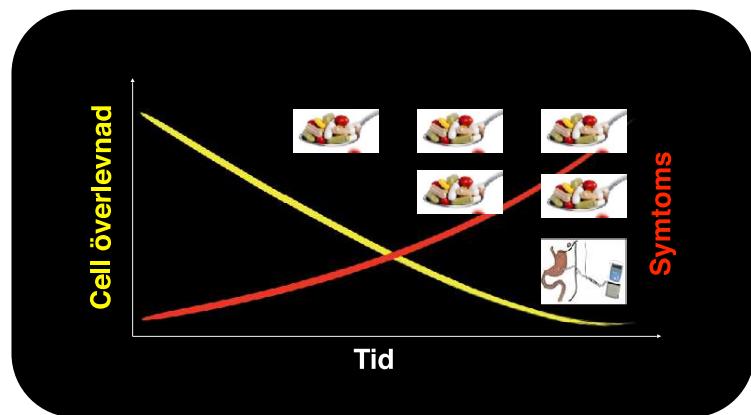


Parkinson's sjukdom

Fortsckridande förlust av dopaminerga celler



Fortsckridande förlust av dopaminerga celler



Hur då?

Cell terapi vid Parkinsons sjukdom är baserad på tre hypoteser:



Motorsymtom är orsakade av brist på en cell typ: DA neuroner i det nigrostriatala systemet



DA nervceller transplanterade i striatum (målregion) kan överleva och funktionellt ersätta dem förlorade nervceller



Kronisk frisättning av dopamin kan behandla dem aspekter av PS som svarar på dopamin

DA, dopaminergic; PD, Parkinson's disease.



Metoden utvecklades i Lund



18 patienter transplanterades i Lund mellan 1987-1999



11 patienter transplanterades i Cambridge och Lund

Transplantation av fetala dopaminerga nervceller



Foetal DA neurons

- Routine abortions
- Consent / ethical guidelines
- Donor age restrictions
- Virus serology

Cell suspension



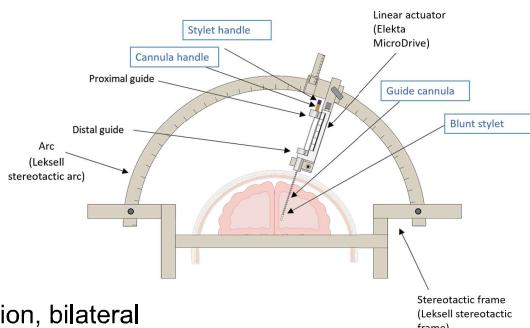
Stereotaxic injection

- Stereotactic implantation
- Immunosuppressed patients

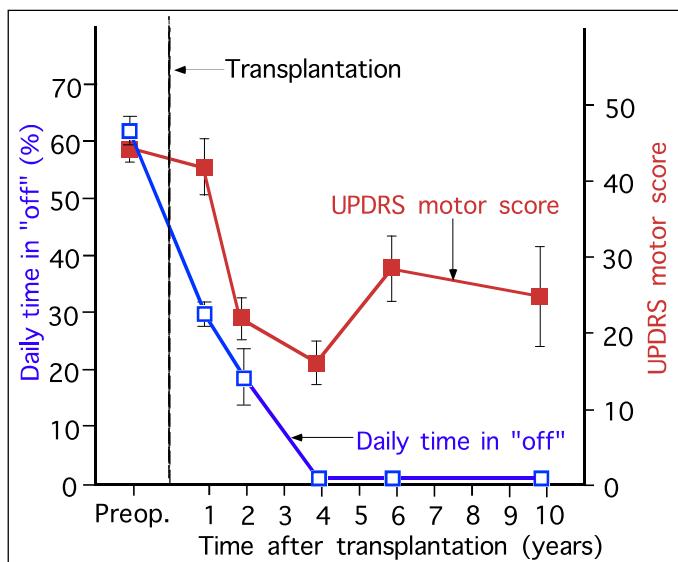
DA, dopaminergic



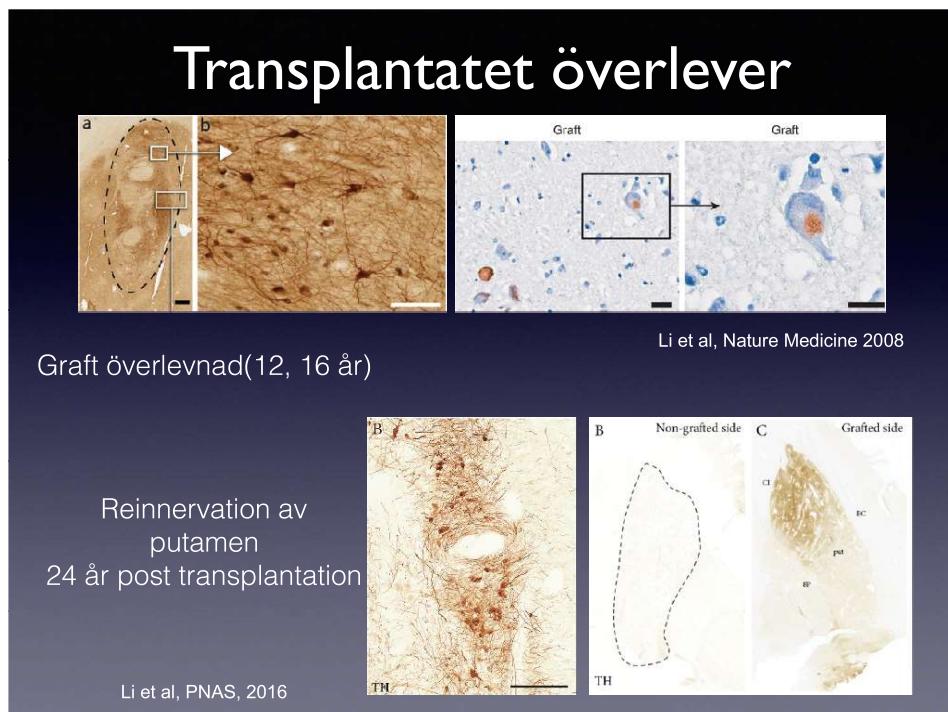
Surgical procedure at one surgical site



- one session, bilateral
- 5 tracts per putamen/deposits



Piccini et al. *Nature Neuroscience* 1999



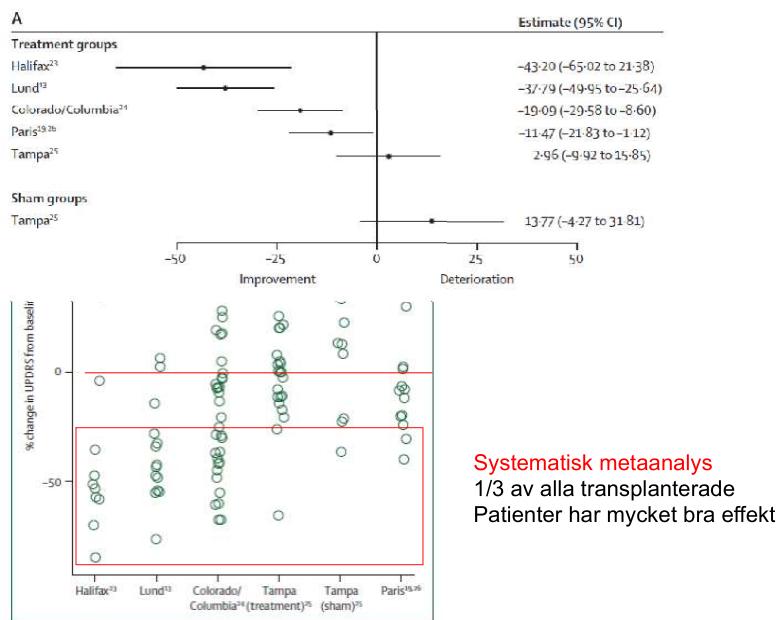


Figure 1: Change in UPDRS score for patients enrolled in ventral mesencephalic transplant trials

Systematisk metaanalys
1/3 av alla transplanterade
Patienter har mycket bra effekt

Barker et al. Lancet Neurology 2013

Varför kan man inte använda fetala celler från aborterade foster?

- ⚠ Stora skillnader mellan celler
- ⚠ Brist på material
- ⚠ Etiska överväganden som är olika i olika länder
- ⚠ Logistiska och praktiska problem



Verkligheten av en klinisk studie

Table 1 | The timetable of transplants and the reasons why planned surgeries were cancelled

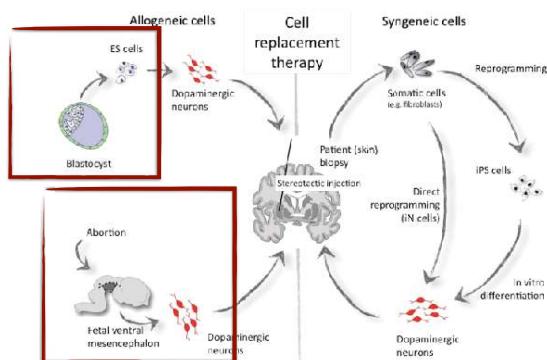
	2015	2016	2017	2018*	Total
Theater slots	30	62	31	5	128
Completed procedures	7	9	4	1	21
Cancelled (due to)	23	53	27	4	107
Tissue supply	15	44	24	4	87
Tissue viability	1				1
Scheduling issues	2	6	3		11
Instruments	3				3
GMP airflow	2				2
Localization queries		2			2
Oncology case		1			1

Twenty-one transplant surgeries were completed across the two sites. This included ten bilateral grafts that were done sequentially (that is, at two different surgical operations), and one patient elected not to have a second transplant after their unilateral surgery. *Final procedure March 2018

Barker et al., Nature Medicine 2019

En annan cell källa behövs

Cell sources for DA neurons Preclinical work by Malin Parmars and Agneta Kirkebys group



Brundin, Barker and Parmar, 2010

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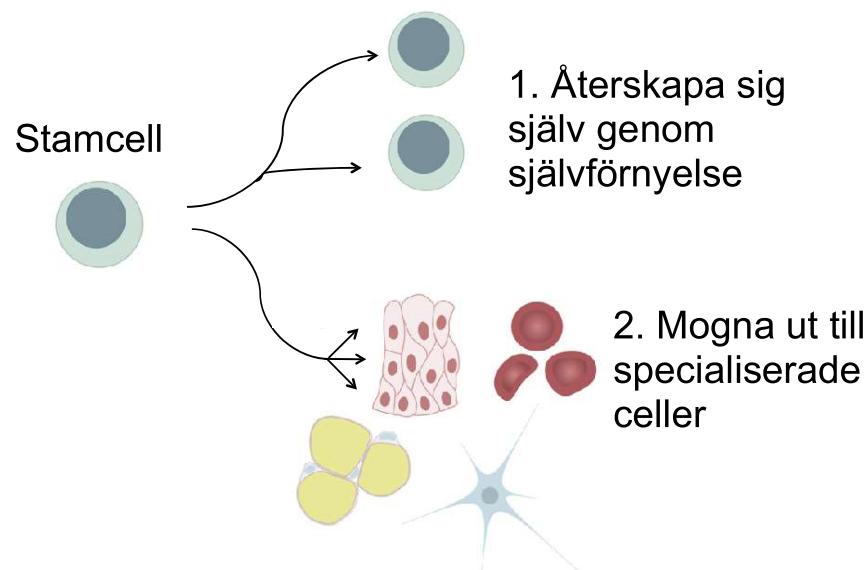
Nya celler från stamceller

- Kan framställas i stora mängder
- Standardiserad
- "Bankable"
- Skall vara minst lika bra som fetala celler

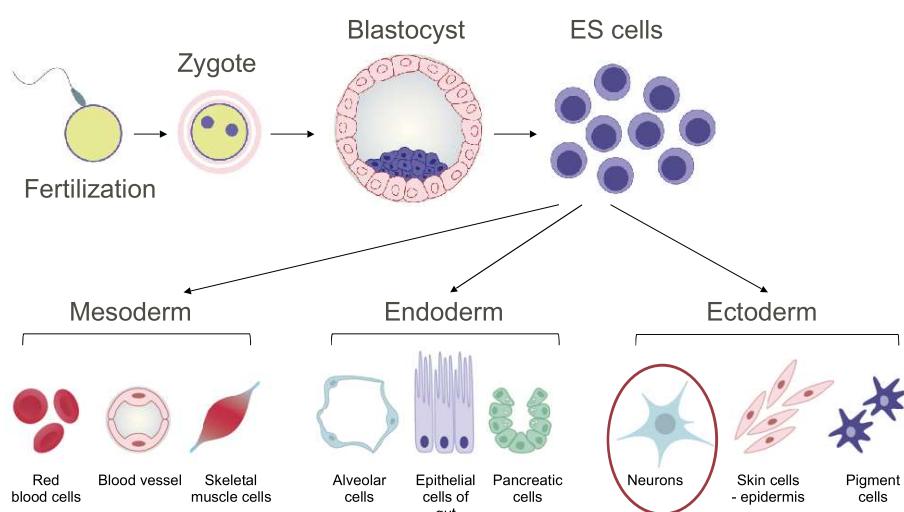


Human embryonic stem cells

Vad är en stamcell?



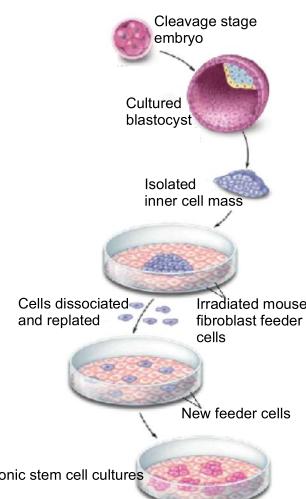
Embryonala stamceller är "pluripotenta" och kan bli alla (>200) av kroppens celltyper



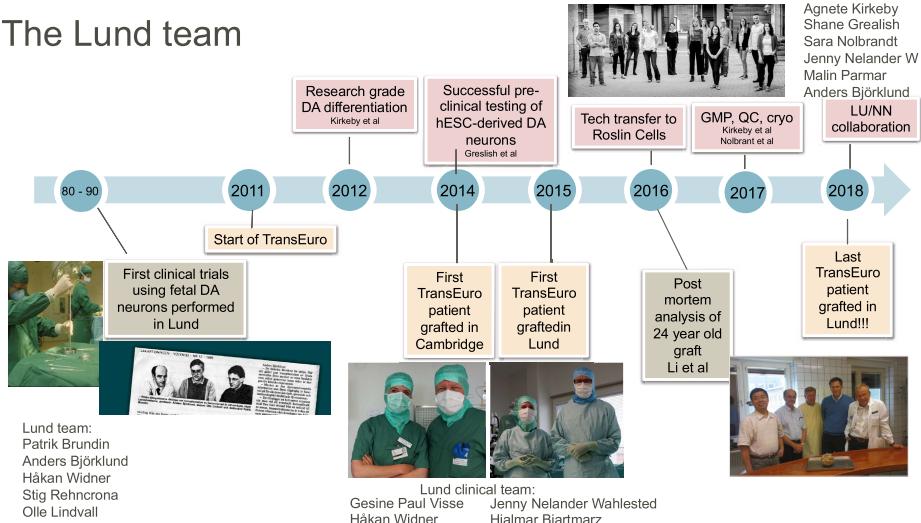
Embryonic stem cells are isolated from preimplantation blastocysts



Recept har utvecklats
Vid Lunds Universitet



The Lund team



STEM-PD study



Invented drug product name	STEM-PD
Active substance	Allogeneic embryonic stem cell-derived ventral midbrain dopaminergic progenitor cells
Pharmaco-therapeutic group	Cell therapy (ATMP)
Indication	Parkinson's Disease
Dosage form	Cell suspension
Dosing regimen	Dose-escalation dose 1 and dose 2
Route of administration	Bilateral intraputaminal delivery
Device	Rehncrona/Legradi instrument, a non-CE marked class III neurosurgical medical device.



Objectives

Primary objective

To assess the **safety**, **tolerability** and **feasibility** of intraputaminal transplantation of the STEM-PD product in patients with moderate PD

Secondary objectives: To evaluate

- the **course and efficacy on clinical features** following transplantation
- the **survival of DA cells** using **PET imaging**
- the **safety and clinical efficacy between doses** of the STEM-PD product, including a **dose response effect**



Outcome measures

Primary outcome measures

- The number and nature of Adverse events (AEs) and serious adverse events (SAEs) in the first 12 months following transplantation
- Absence of space occupying masses on cranial MRI in the first 12 months following transplantation



Secondary outcome measures

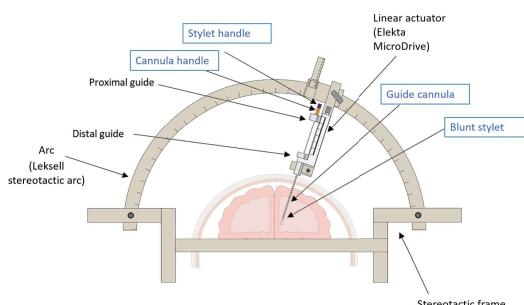
- Changes in clinical effects at **36 months** following transplantation compared to baseline
- Changes in motor features (OFF)
- Change in anti-Parkinson medication
- Changes in F-DOPA uptake and DAT binding at 36 months on PET imaging compared to pre-transplant
- The number and nature of SAEs and AEs in the 12 to 36 months period following transplantation

Studiepopulation N=8



- Patienter med måttlig Parkinson's sjukdom Hoehn-Yahr stadium 2-3 i OFF
- Sjukdomsduration >10 år
- 50-75 år
- Välkända hos oss från TransEuro studien

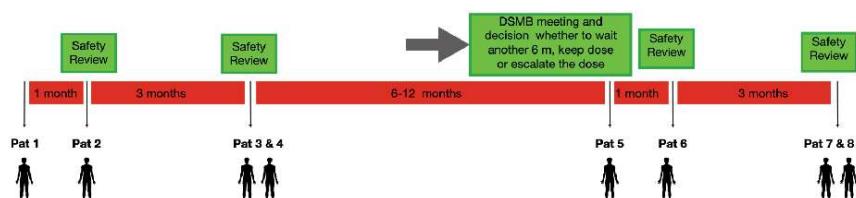
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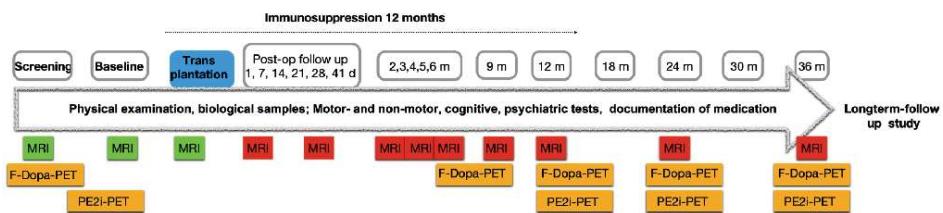


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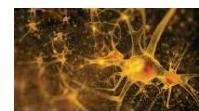
Staggered transplantation





Dose escalation

70,800 cells/ μ l
2.5 μ l deposit



Dose 1: 3.54 mill cells/hemisphere
20 deposits/hemisphere
to produce 100K mature DA neurons



Dose 2: 7.08 mill cells/hemisphere
40 deposits/hemisphere
to produce 200K mature DA neurons



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