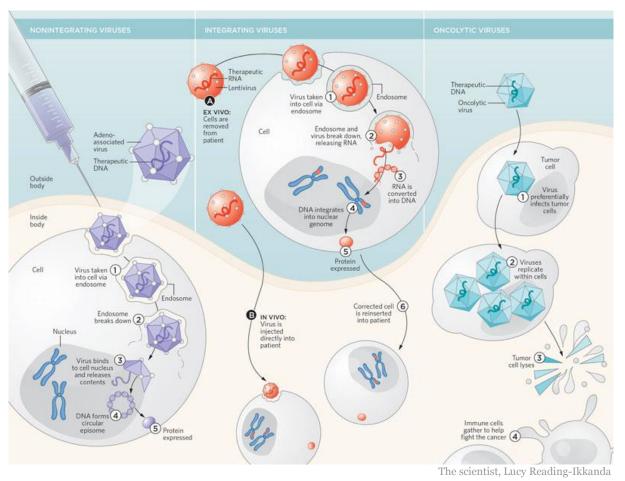
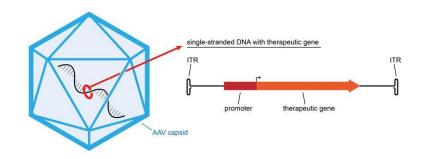


AAV mediated gene therapy







Primary Target Tissues									
Serotype	Retina	Neurons	Brain	Lung	Heart	Liver	Muscle	kidney	Pancreas
AAV-1		√			√		√		√
AAV-2	\checkmark	√	\checkmark			√	√	√	
AAV-3	\checkmark			√		√	√		
AAV-4	\checkmark	√	\checkmark				√		
AAV-5	\checkmark	√		√					
AAV-6				√	√	√	√		
AAV-7	\checkmark	√				√	√		√
AAV-8	\checkmark		√			√	√		
AAV-9			√	√	√	√	√	√	√
AAV-10		√		√	√	√	√		
AAV-DJ	Efficiently transduces a wide variety of cell types in vitro								
AAV-DJ/8	A variant of AAV-DJ that permits infection of liver as well as other tissues in vivo								

GeneCopoeia

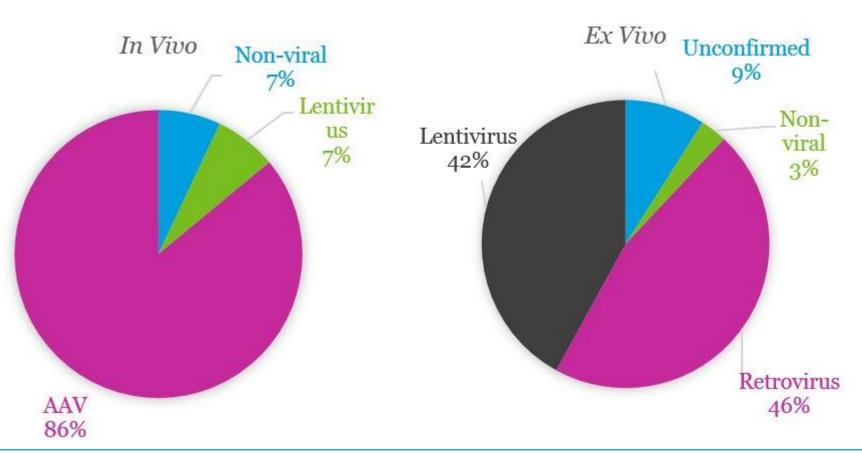
AAV mediated gene therapy



Setback for gene therapy for safety reasons in the 90s Discovery of novel, safer and more efficient AAV vectors

- Exponential growth
- Funding influx
- High profile deals

- > 100 clinical trial
- 2 launched products
 - Glybera, 2012
 - Luxturna, 2017



Challenges of AAV gene therapies

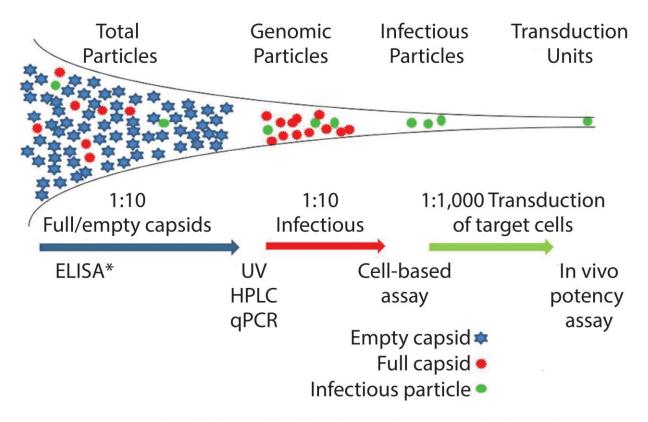


Vector Design

IP, capsid, promoter

Manufacture

Scaleup



1:100,000 particles delivered will achieve the desired clinical output

Challenges of AAV gene therapies



Vector Design

IP, capsid, promoter

Manufacture

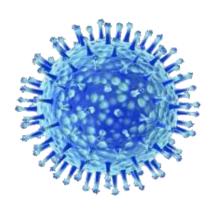
Scaleup

Standardization

International standards

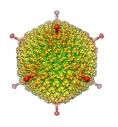
QC (IPC, Product/batch release, process validation)

Regulatory



Physical size

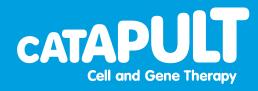
120nm Lentivirus



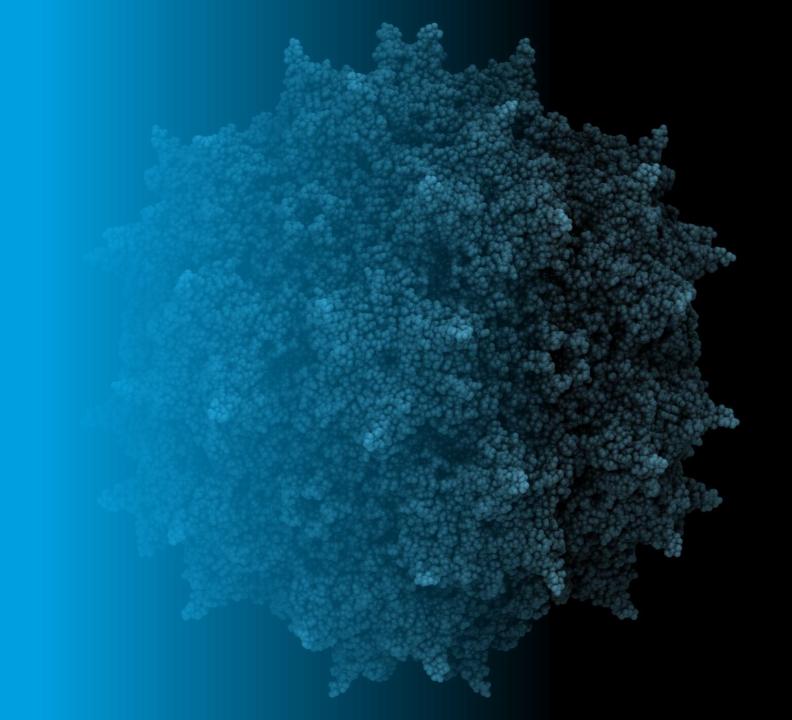






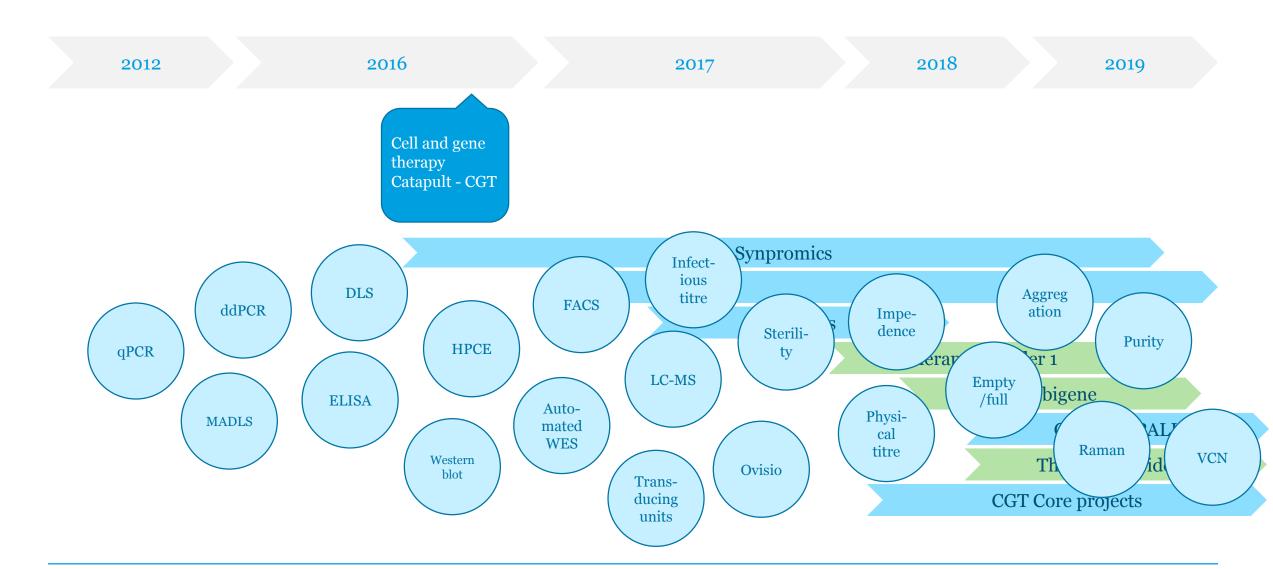


AAV mediated next generation quality control at CGT



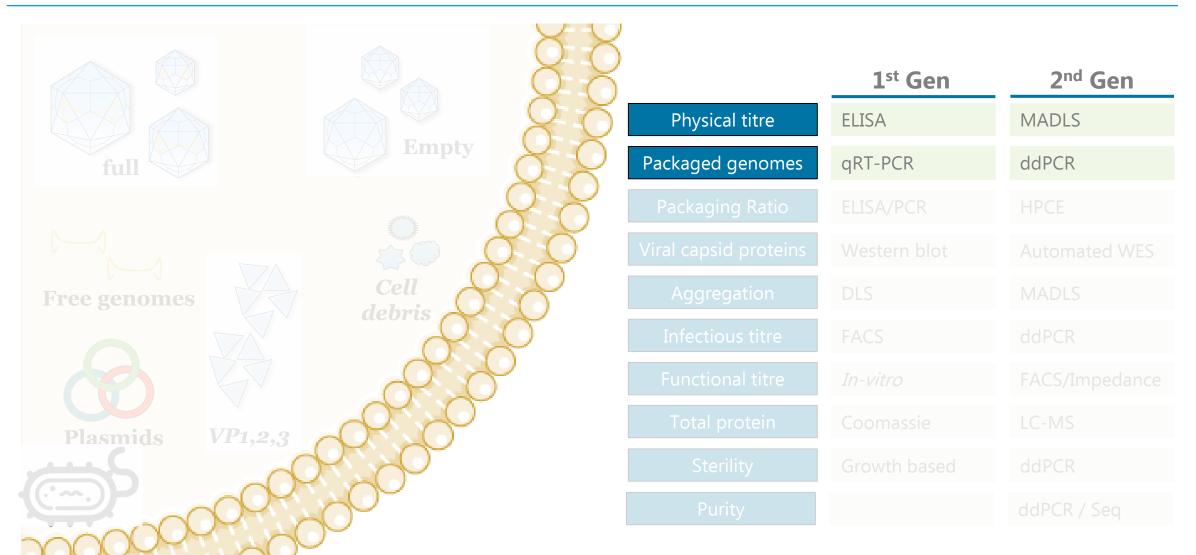
AAV projects at CGT





CGT analytical capabilities





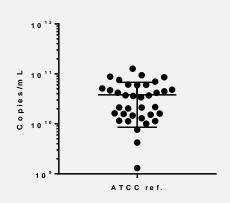
Quantity – vector genome titre



Traditional methods

Quantitative real-time PCR (qPCR)

- Primer and probes targeting gene of interest and/or ITRs
- Use of a digested plasmid as a standard curve



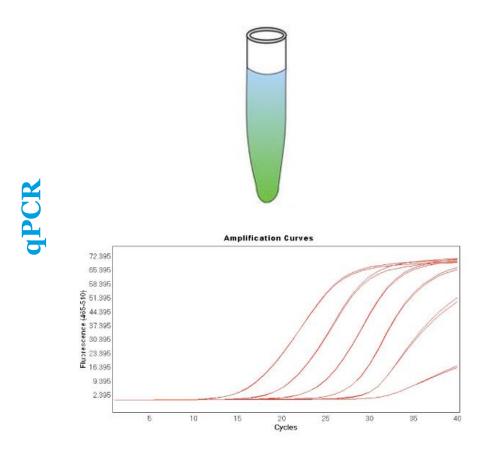
Limitations

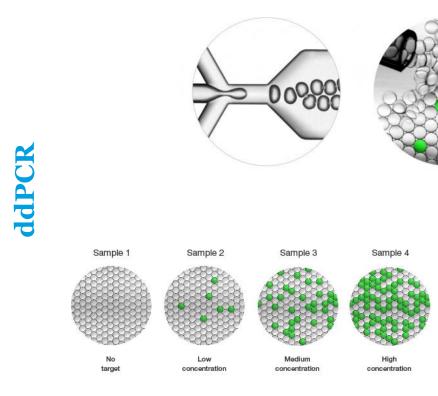
- 1. Highly sensitive to PCR inhibitors viral proteins and/or vector diluent → decrease in amplification efficiency → Under-estimation of viral titre
- 2. Bias from amplification efficiency especially if targeting ITR region \rightarrow under-estimation of viral titre
- 3. Bias introduced from the standard curve amplification of dsDNA vs ssDNA \rightarrow Over-estimation of viral titre
- 4. Steps above → High inter/intra-assay variability

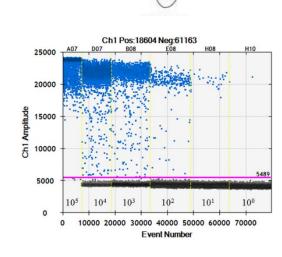
Develop a robust, accurate method for measuring AAV2 vector genomes (and AAV2 derived serotypes)

qPCR alternatives - ddPCR









Scope

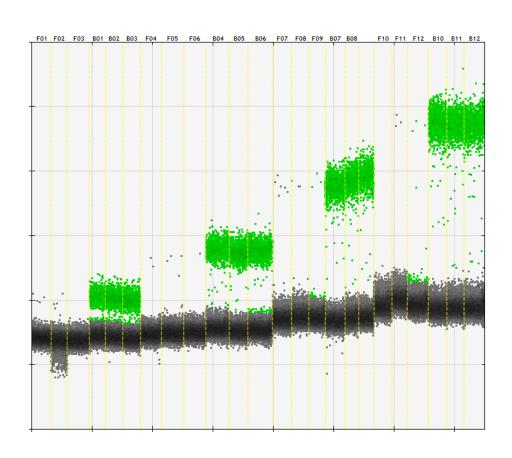


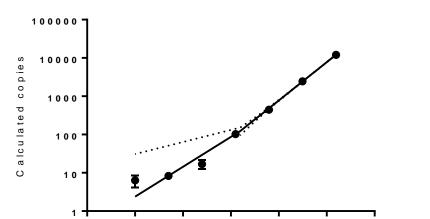
11

- 1. Highly sensitive to PCR inhibitors − viral proteins and/or vector diluent → decrease in amplification efficiency → Under-estimation of viral titre
- ✓ Less sensitive to PCR inhibitors → suitable for in process vector genome measurement
- 2. Bias from amplification efficiency especially if targeting ITR region \rightarrow under-estimation of viral titre
- ✓ End product measurement less dependent on amplification efficiency → Suitable for targeting ITRs Universal assay
- 3. Bias introduced from the standard curve amplification of dsDNA vs ssDNA → Over-estimation of viral titre
 - ✓ Absolute quantification no standard curve required → Improved precision
- 4. Steps above → High inter/intra-assay variability
- ✓ Robust and accurate method for in-process control and product characterisation

ddPCR vg titre assay







0.1

ddPCR assay linearity

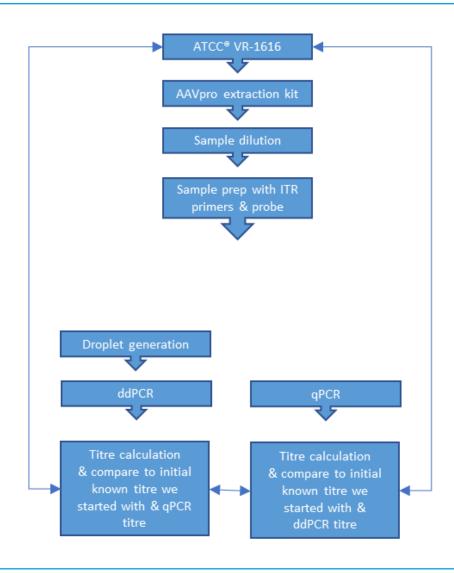
R square 0.9969
Deviation from linearity non significant
LLoD 16.16 copies
LLoQ 125 copies
Intra/inter assay CV < 20%

Expected copies

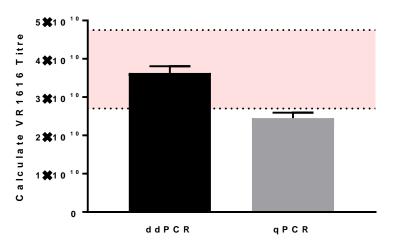
1000 10000 100000

ddPCR and Commercial qPCR method comparability





Selectivity and Comparability



ddPCR results within 95% CI

Summary



Fully functional assay offering

- 1. ITR sequence detection → Applicable to any AAV2 and AAV2 derived serotypes
- 2. Novel designed primers and extraction method
- 3. Higher sensitivity \rightarrow Suitable for in-process sample measurement
- 4. Increased precision and reproducibility over commercial and current available qPCR titration methods

Quantity/purity – total particle measure/ Empty to full ratio



ELISA

Evaluation of 5 commercial kits

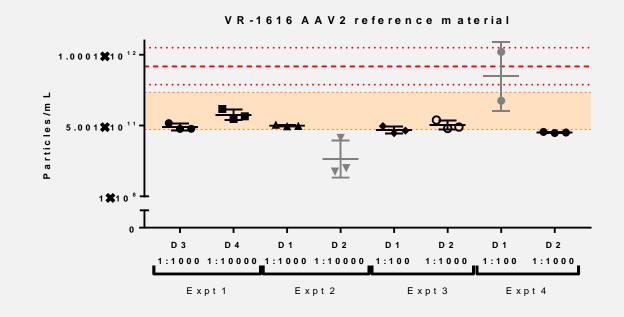
Inter assay CV <8%

Intra assay CV < 5%

	qPCR	ddPCR	
% full particles	13.6	59%	6.72%

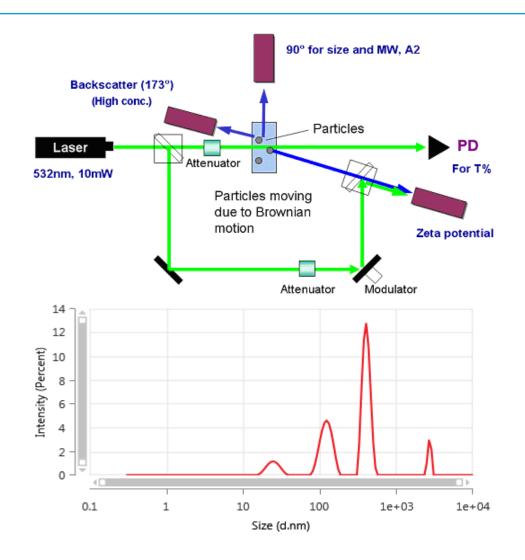
Limitations

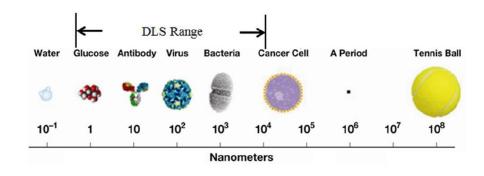
- 1. Expensive
- 2. Labour intensive
- 3. Time consuming
- 4. Antibody specific/serotype dependent

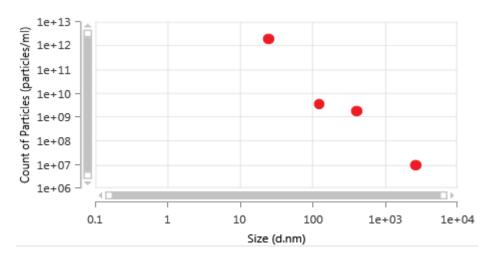


Dynamic Light Scattering technology







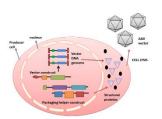




Case study

Overview of downstream developmental scope









Nuclease treatment DNA removal development and optimisation



Clarification Harvest filtration development



AKTA[™] Avant Chromatography purification development and optimisation



TFF KrosFlo UF/DF Concentration & buffer exchange development and optimisation



Final filtration filtration development

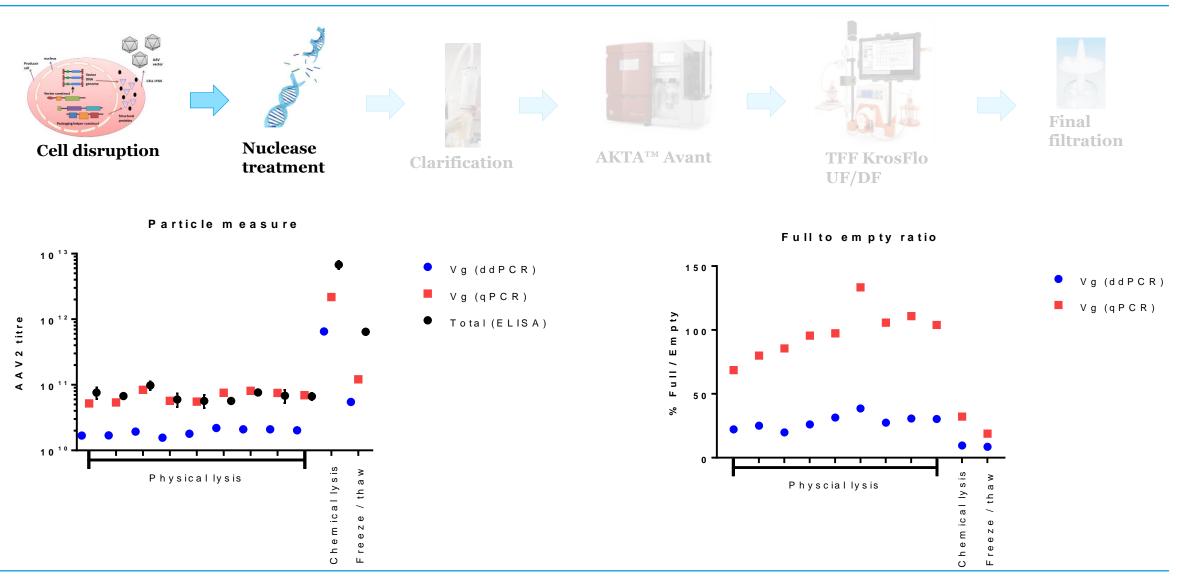
Physical lysis

Freeze/thaw lysis

Chemical lysis

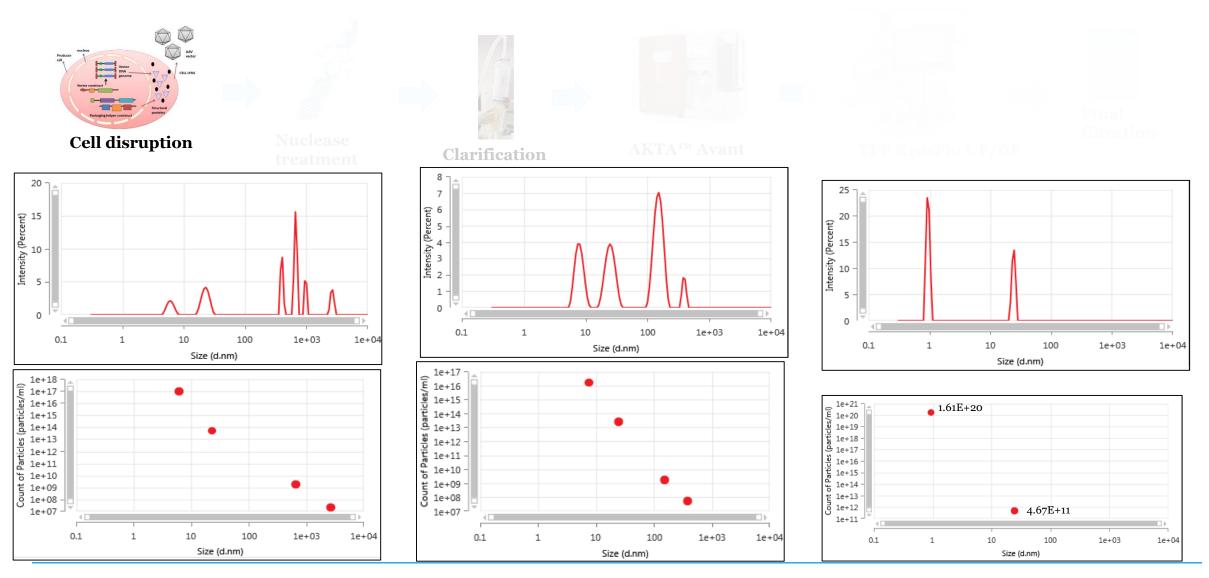
AAV titre and purity check

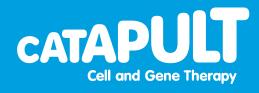




Sample purity - MADLS







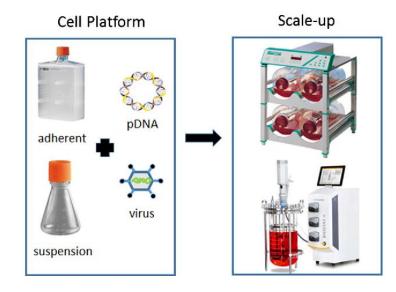
Gene therapy – Overcoming challenges



Overcoming AAV therapy challenges

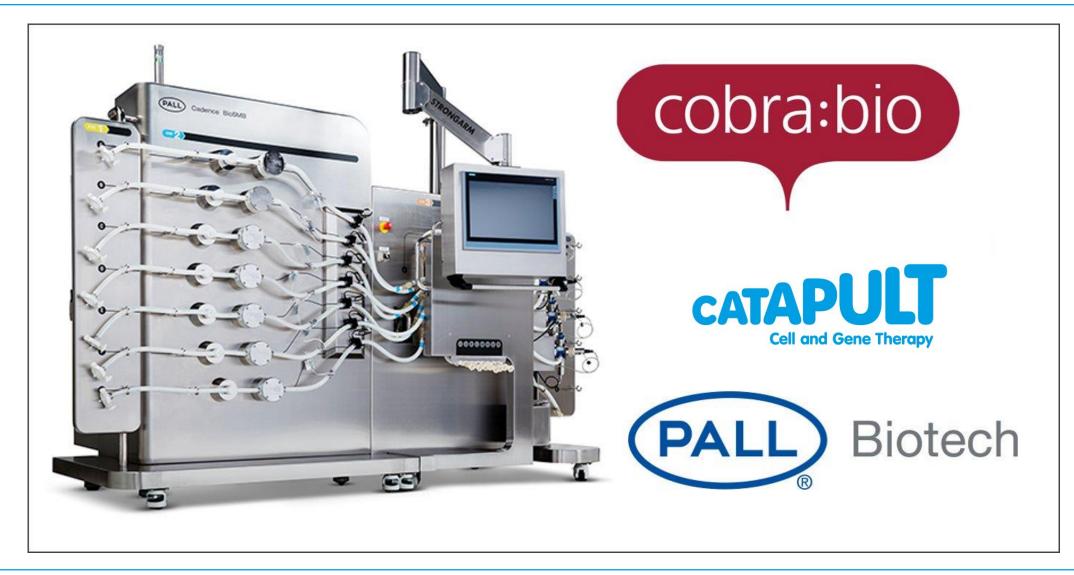


Disease	vg/patient	Estimated patient number (EU/US)	Potential uptake	Estimated Equivalent culture volume (L)
DMD	1.00E+15	1000000	50%	250,000,000
SMA1	6.00E+14	2000	50%	6,000,000
Haemophilia A	4.20E+15	25000	25%	28,000,000
Haemophilia B	7.00E+14	100000	25%	7,000,000
Wet AMD	1.00E+11	1000000	10%	10,000
Chloroidermia	6.00E+09	25000	50%	750



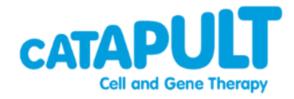
Continuous processing - consortium





Acknowledgements





- Julie Kerby
- Damian Marshall
- Mike Delahaye
- Gregory Berger
- Nicole Nicolas
- Anusha Seneviratne
- Nishanthi Weeratunge
- Florian Leseigneur
- Quentin Bazot
- Elena Sokolskaja
- Hadi Mirmalek-Sani

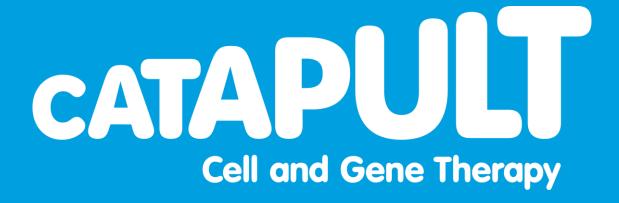




We work with Innovate UK







Cell and Gene Therapy Catapult is committed to ensuring high standards of research integrity and research best practice in the activities we carry out. We subscribe to the principles described in the UK concordat to support research integrity.

Cell and Gene Therapy Catapult is a trading name of Cell Therapy Catapult Limited, registered in England and Wales under company number 07964711, with registered office at 12th Floor Tower Wing, Guy's Hospital, Great Maze Pond, London, SE1 9RT. VAT number 154 4214 33.

12th Floor Tower Wing Guy's Hospital Great Maze Pond London SE1 9RT

info@ct.catapult.org.uk ct.catapult.org.uk Twitter: @CGTCatapult

We work with Innovate UK