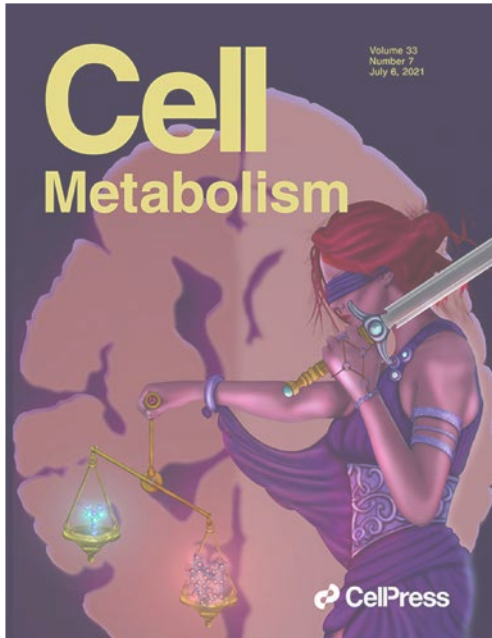


Preclinical Therapies Developed for LD: where we are and future perspectives

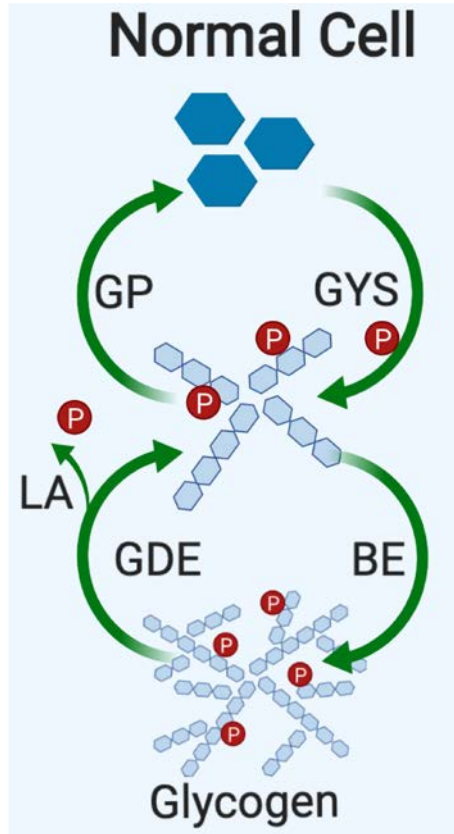


Lafora disease Science Symposium
Bologna, Italy
October 9-10, 2023

Matthew S. Gentry, Ph.D.
Professor & Chair, Biochemistry & Molecular Biology
University of Florida, College of Medicine
Director, Lafora Epilepsy Cure Initiative (LECI)



Brain Glycogen Metabolism



Glycogen synthesis:

GS - glycogen synthase

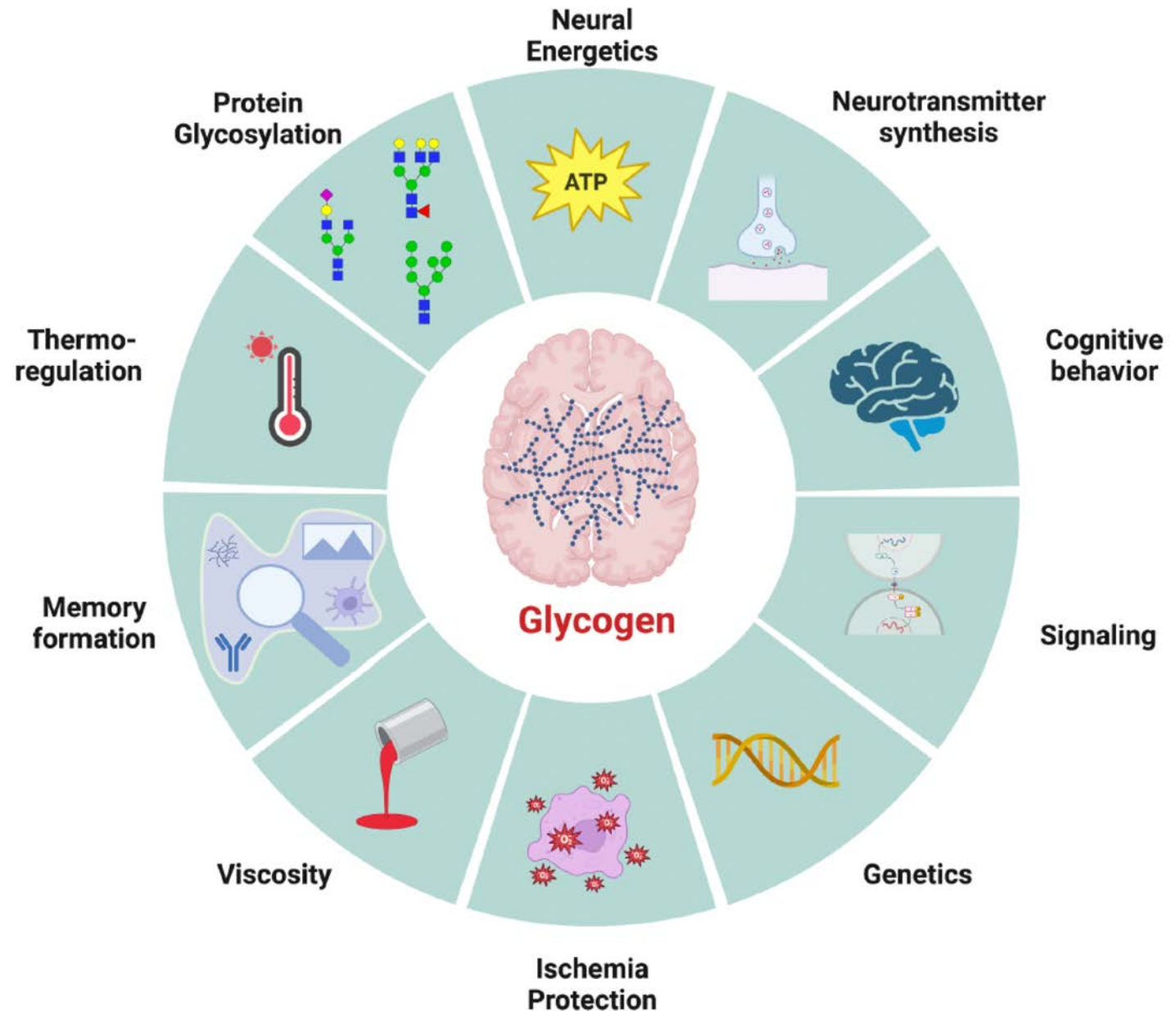
GBE - glycogen branching enzyme

Glycogen breakdown:

GP - glycogen phosphorylase

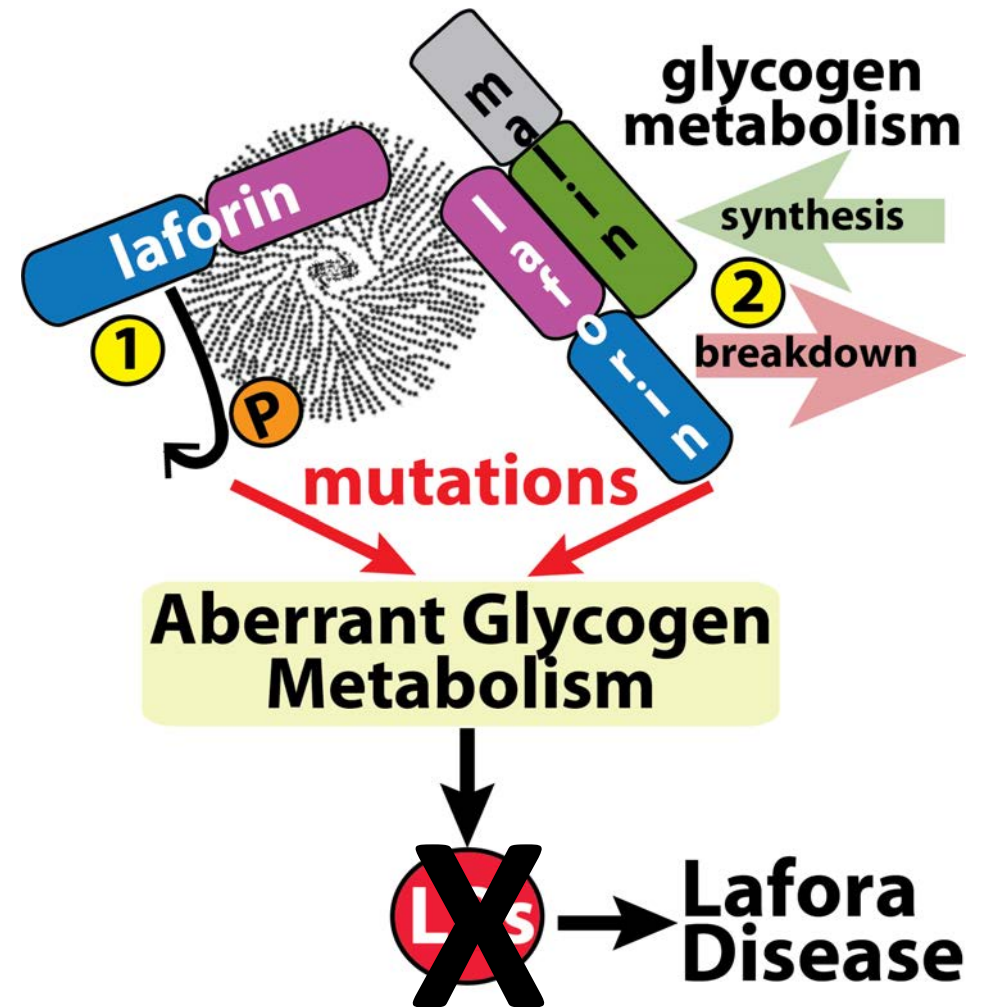
GDE - glycogen debranching enzyme

LA - laforin (glycogen phosphatase)



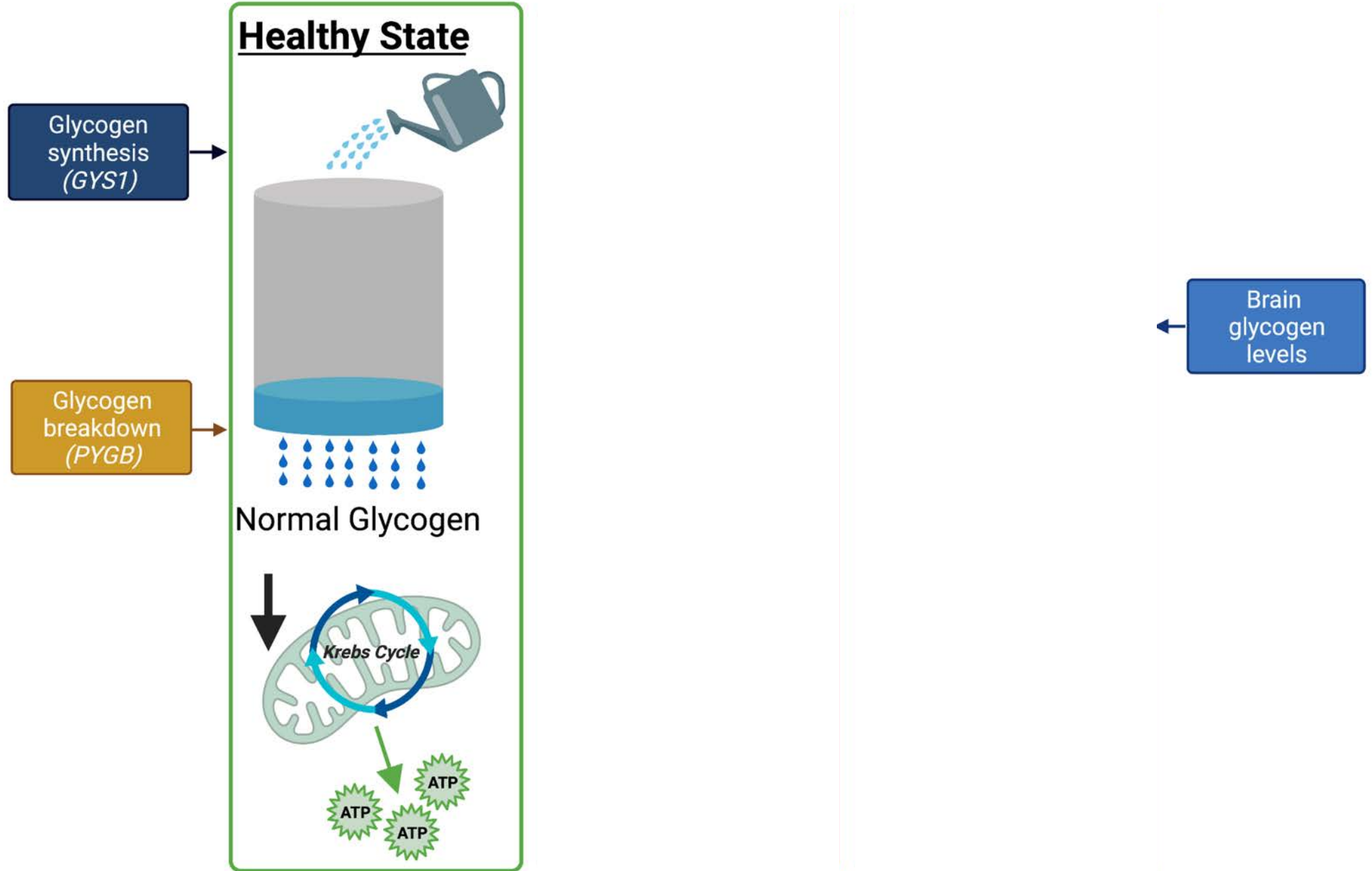
Lafora bodies (LBs/PGBs) drive Lafora disease

anti-Lafora body IHC



50% reduction in glycogen synthesis eliminates LBs & greatly reduces epilepsy threshold in LD mice

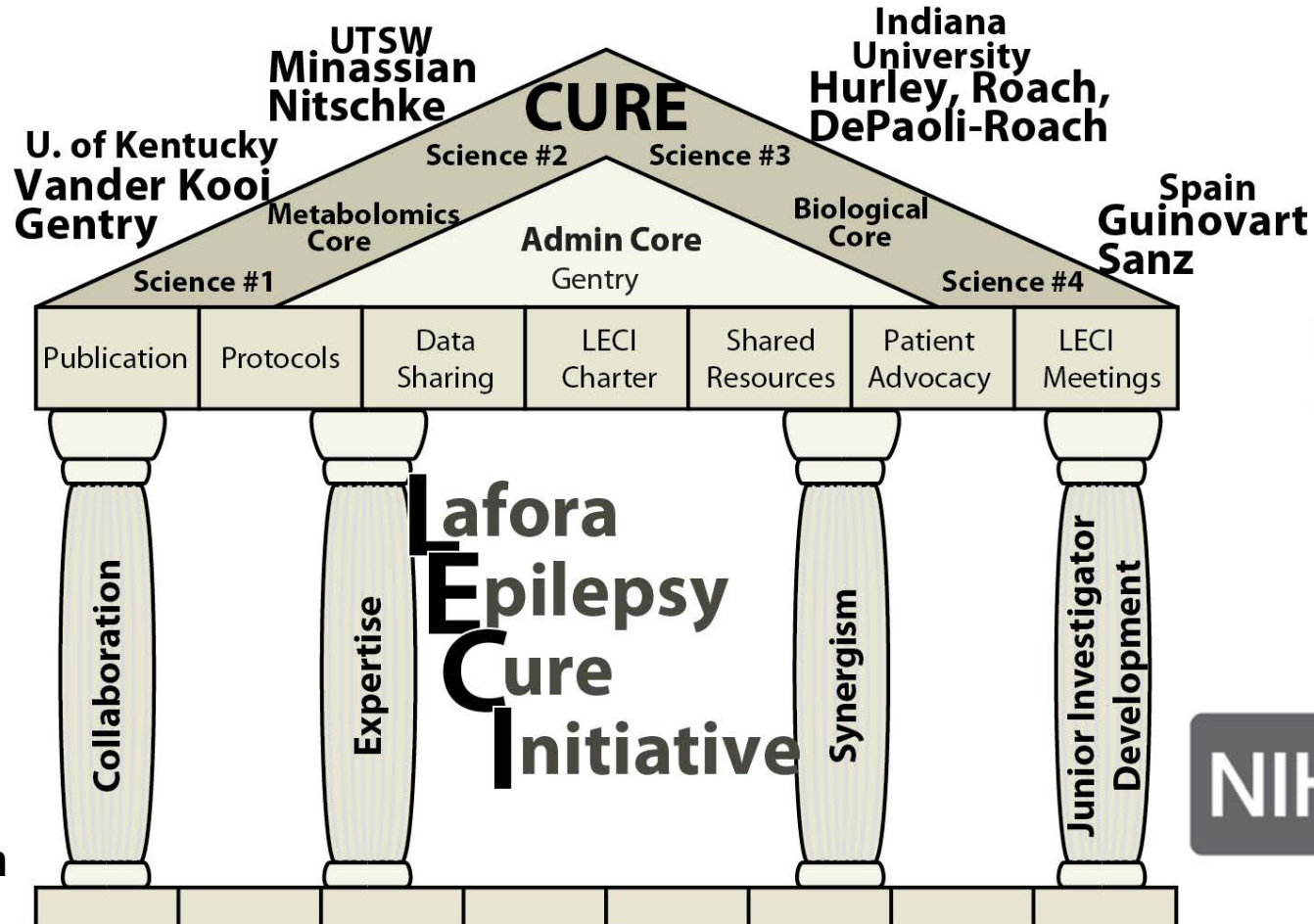
Defined Disease Mechanism = Therapeutic Opportunities



NIH P01: Lafora epilepsy – basic mechanisms to therapies



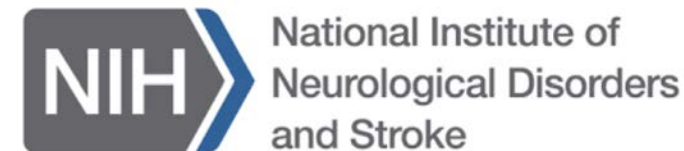
SCHOOL OF MEDICINE
INDIANA UNIVERSITY



UC San Diego

3 Cores:

- Admin – Gentry
- Medicinal Chem – Watt
- Biological – Madrid, Spain



NIH P01: Lafora Disease – Basic Mechanisms to Therapies

Science Projects:



Gentry/Vander Kooi/Sanz: Personalized medicine, antibody-enzyme therapy, & repurposing.

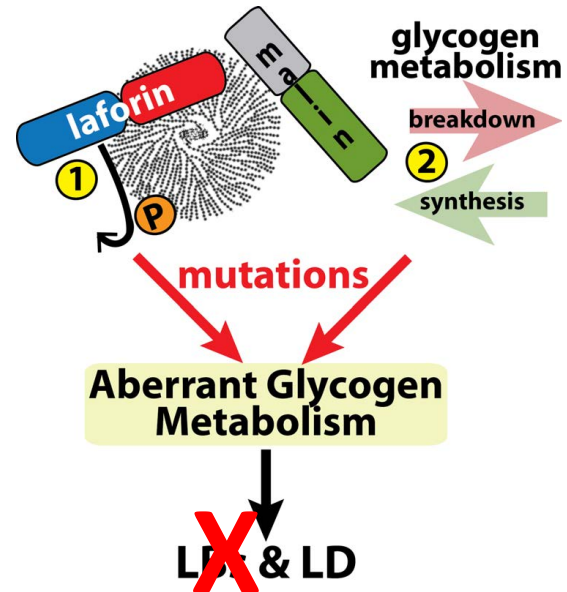


Roach/Depaoli-Roach/Hurley: Small molecule inhibition of glycogen synthesis as LD therapy.

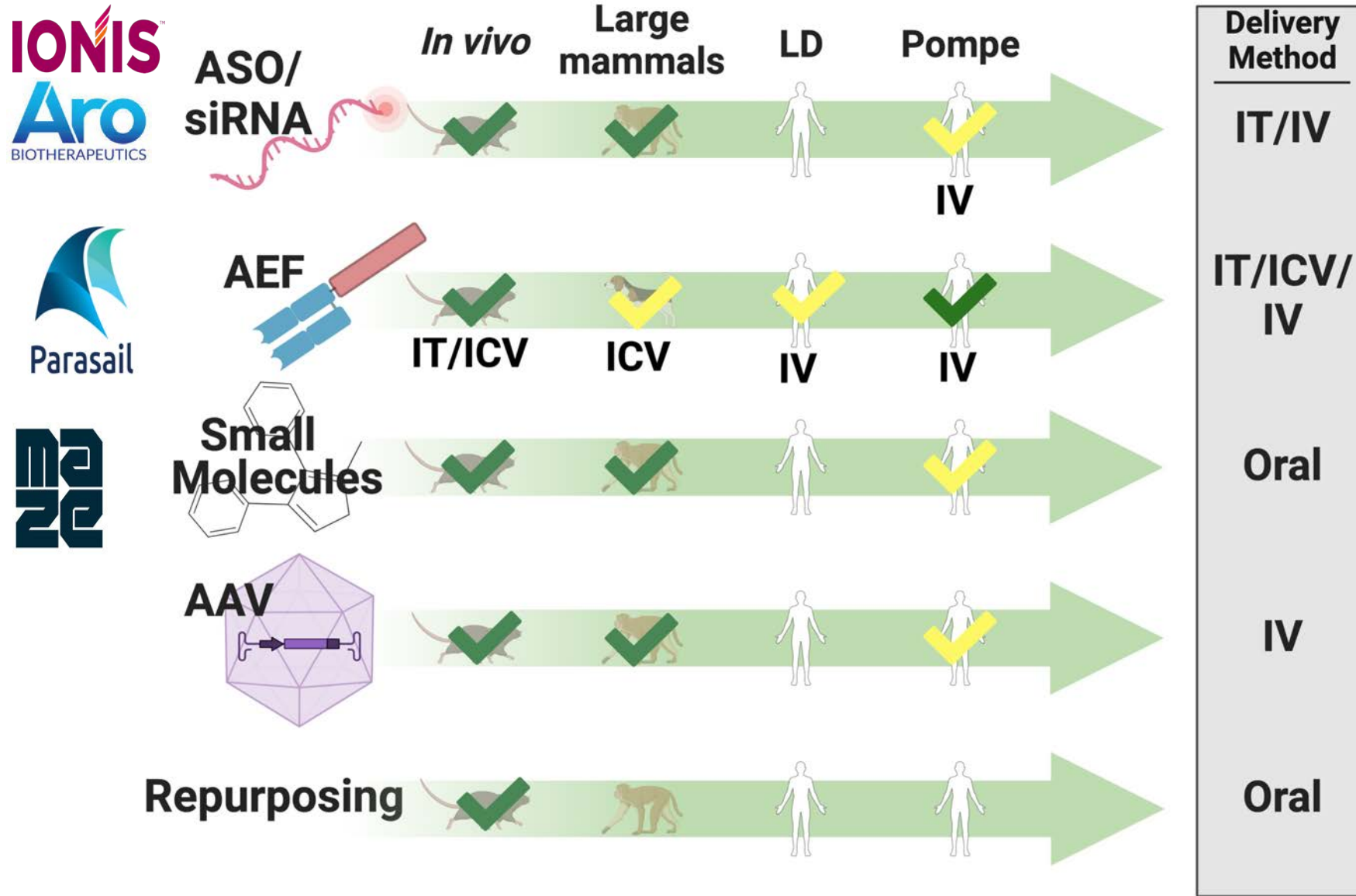


Minassian: Genome editing & ASO mRNA suppression as LD therapies.

Guniovert/Duran: Defining the therapeutic window for the treatment of LD.



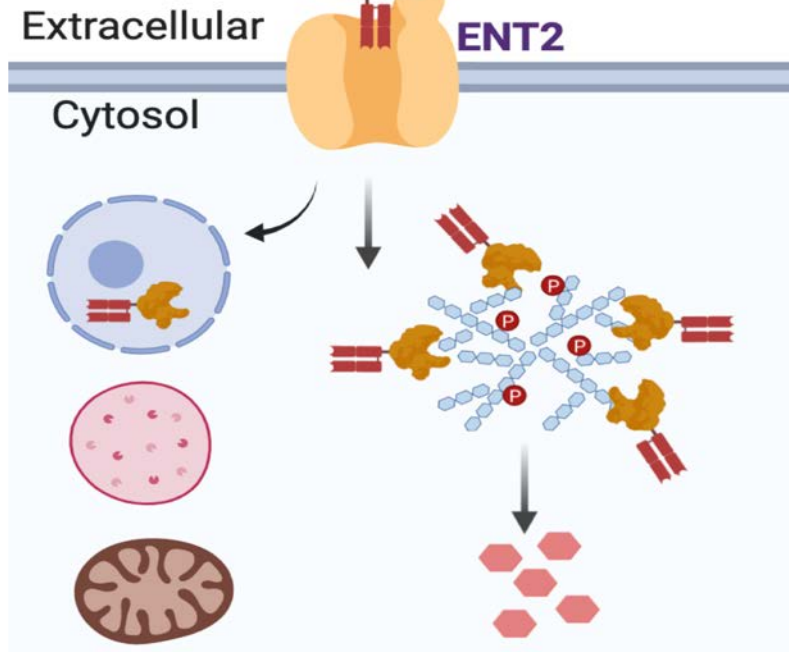
Defined Mechanism = Therapeutic Developments



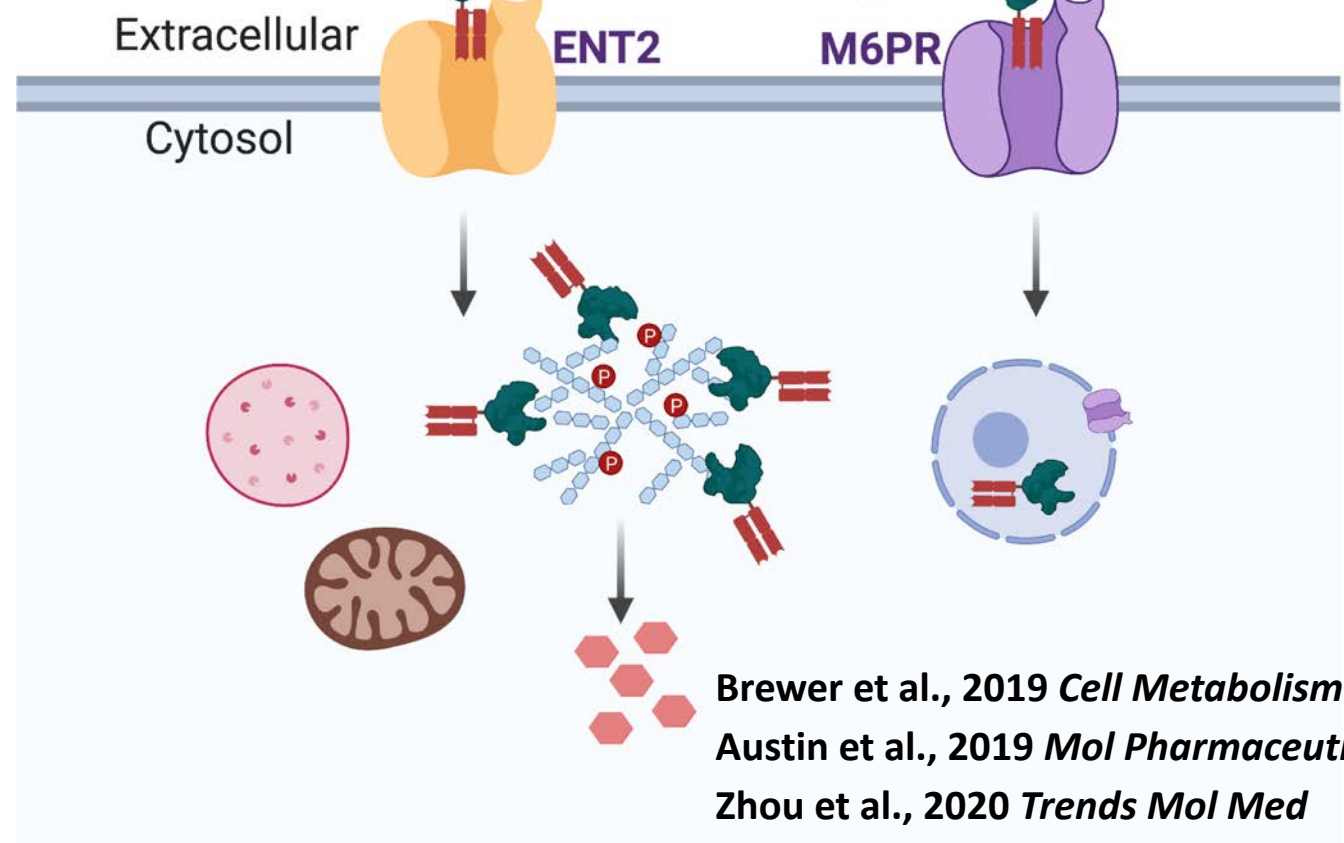
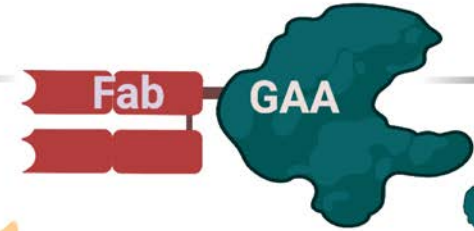
✓ = completed
 ✓ = ongoing/planned

Project 1: Antibody-Enzyme Fusions

VAL-0417



VAL-1221

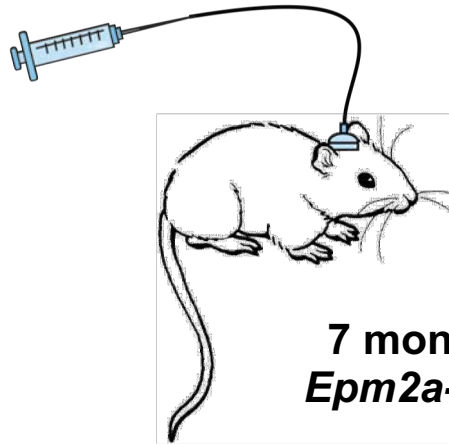


Brewer et al., 2019 *Cell Metabolism*
Austin et al., 2019 *Mol Pharmaceutics*
Zhou et al., 2020 *Trends Mol Med*
Sun et al., 2021 *Cell Metabolism*
Young et al., 2022 *EMBO Mol Med*



VAL-0417 ICV administration ablates brain LBs *in vivo*

Intracerebroventricular
(ICV) administration



Continuous infusion
of VAL-0417
(0.08mg/day) or PBS
for 7 days

Euthanized
on 8th day

PAS staining

**3-day continuous VAL-0417
infusion clears LBs**

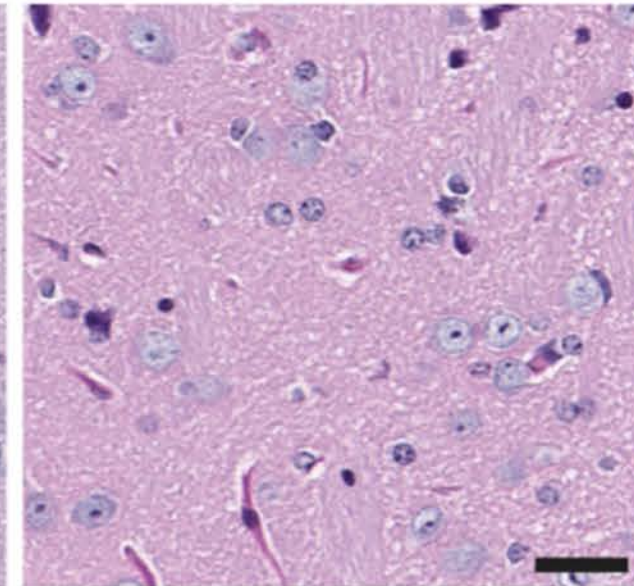
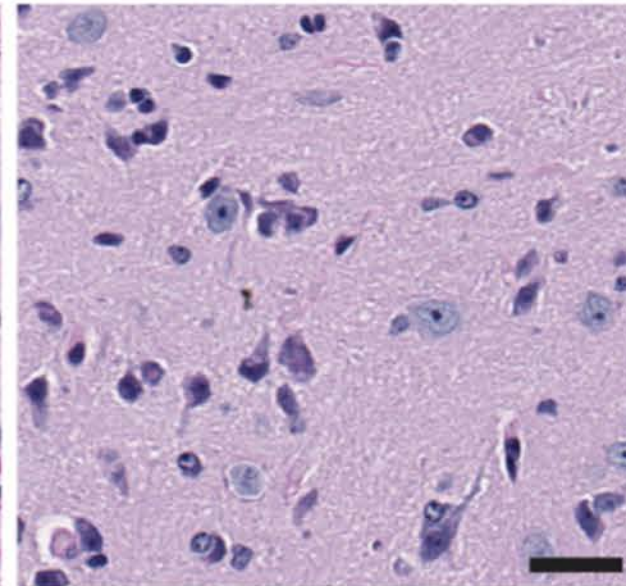
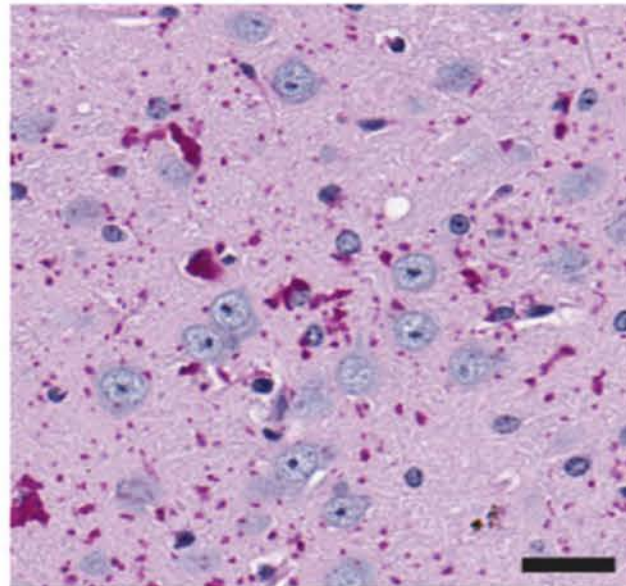
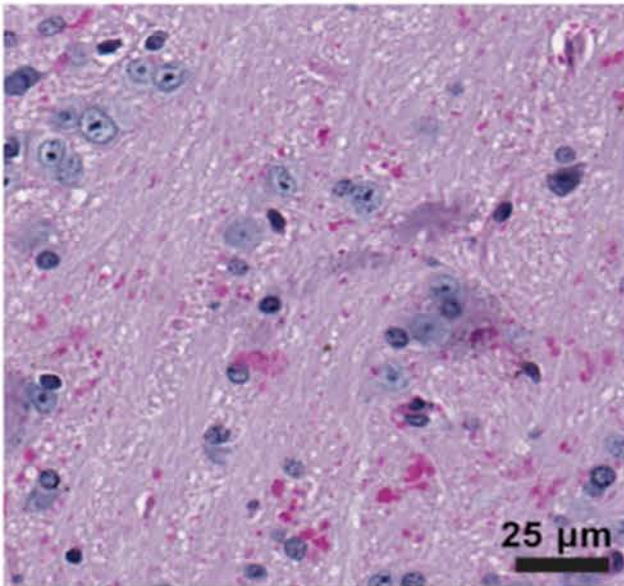
7 month old
Epm2a^{-/-} mice

Epm2a^{-/-}
Untreated

Epm2a^{-/-}
PBS

Epm2a^{-/-}
VAL-0417

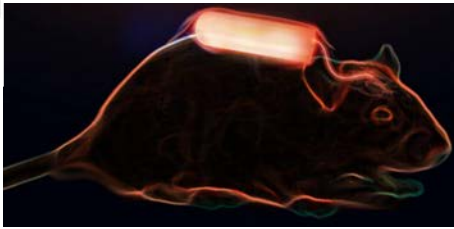
WT
Untreated



Broad brain biodistribution of VAL-1221 via i.c.v



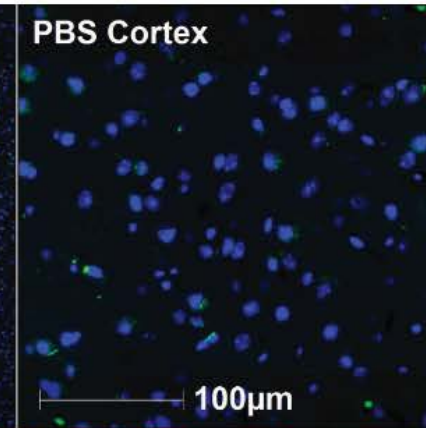
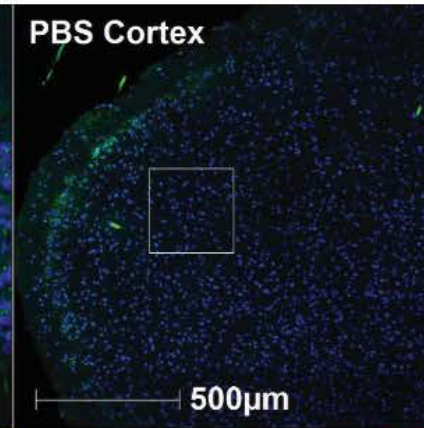
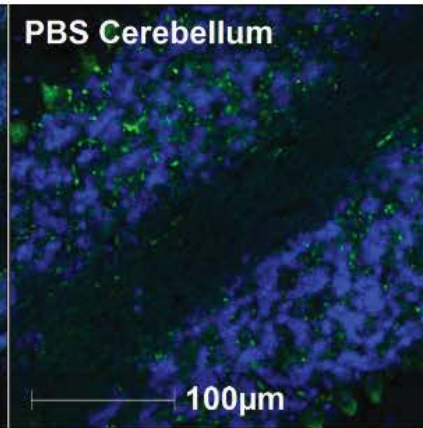
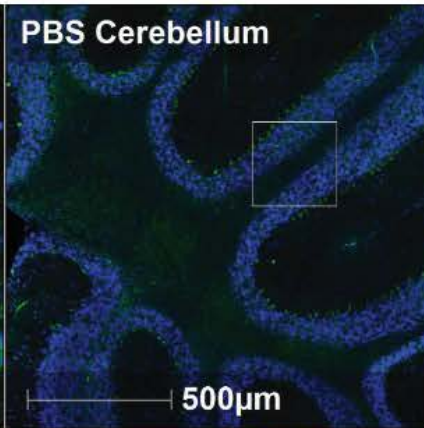
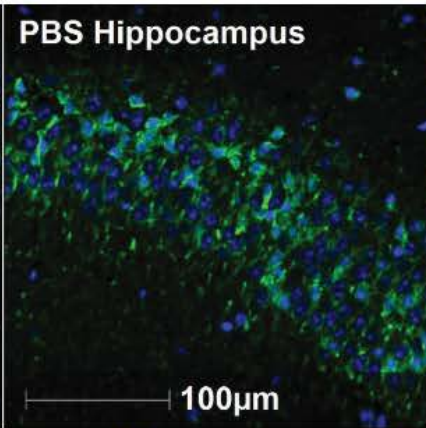
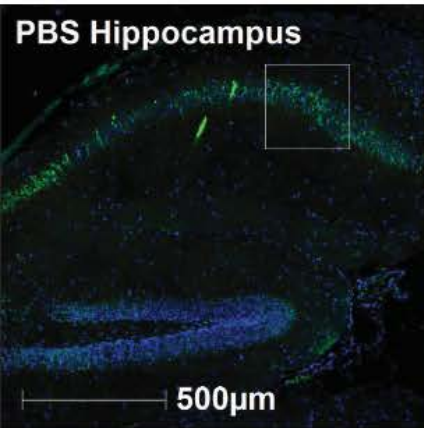
Intracerebroventricular (i.c.v.) administration via Alzet pumps



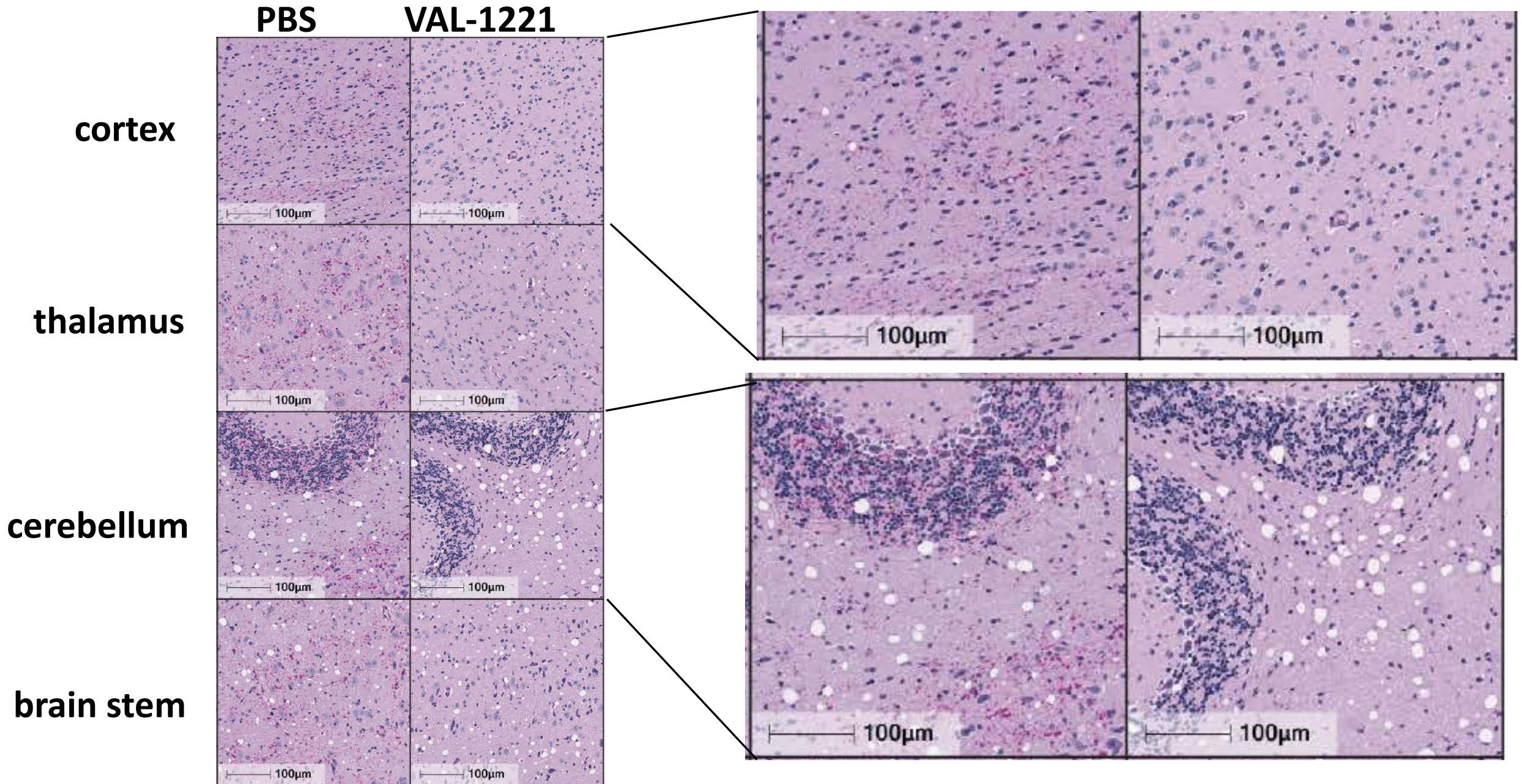
Continuous infusion of VAL-1221 (0.03mg/day) or PBS for 7 days

Euthanized on 8th day

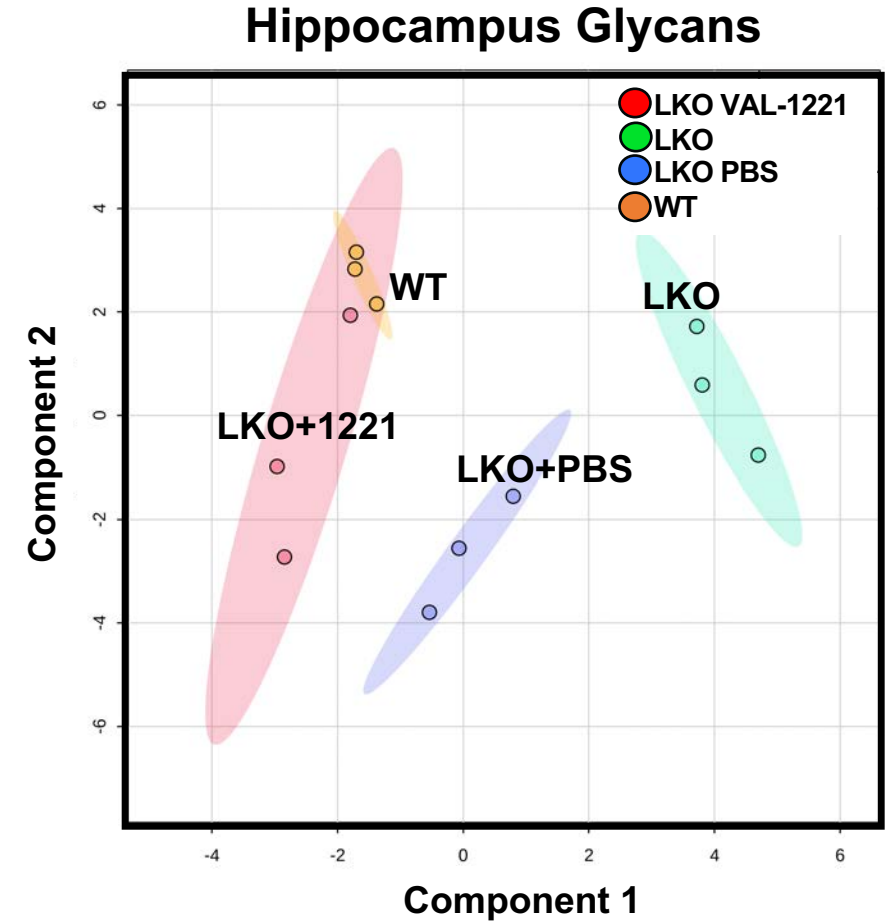
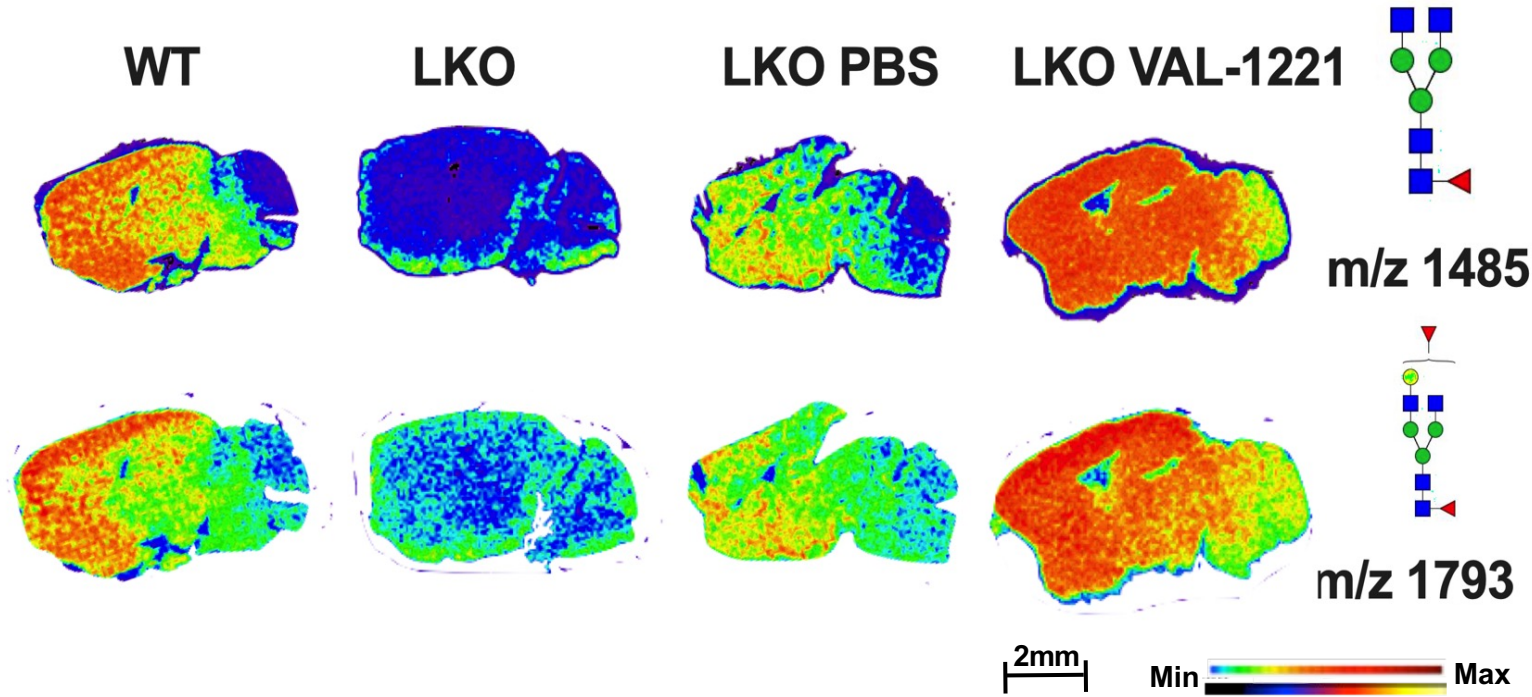
Biochemical, IHC, PAS, IF analysis of VAL-1221 delivery & LB load



VAL-1221 ablates LBs after 7-day i.c.v



VAL-1221 rescues LKO N-glycan deficiency



Canine VAL-1221 i.c.v. infusion

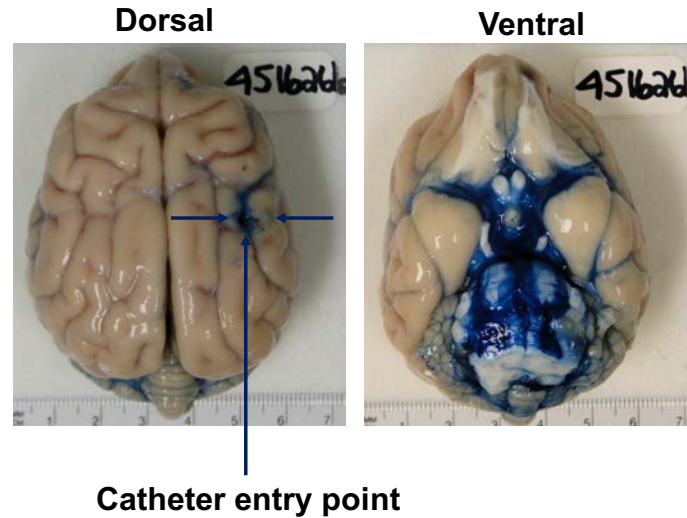


1.8 ml infusion of 10 mg/ml VAL-1221 in right lateral ventricle

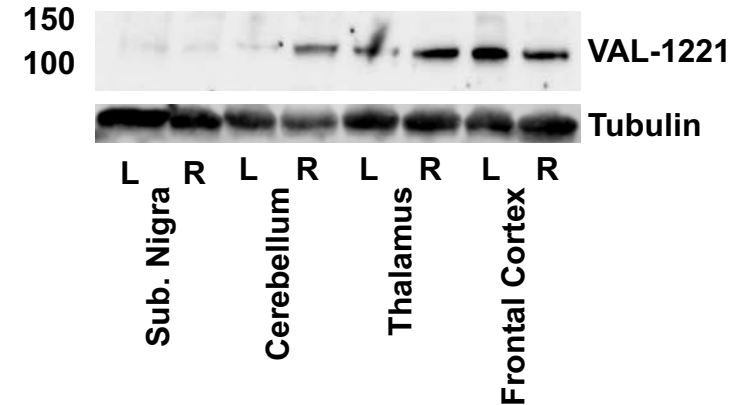
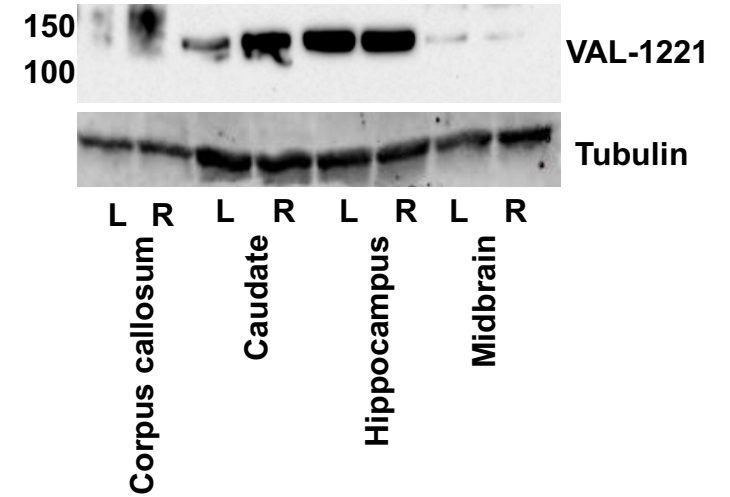
↓
Euthanized 14 days after infusion

↓
Multiple tissues collected and assessed for GAA

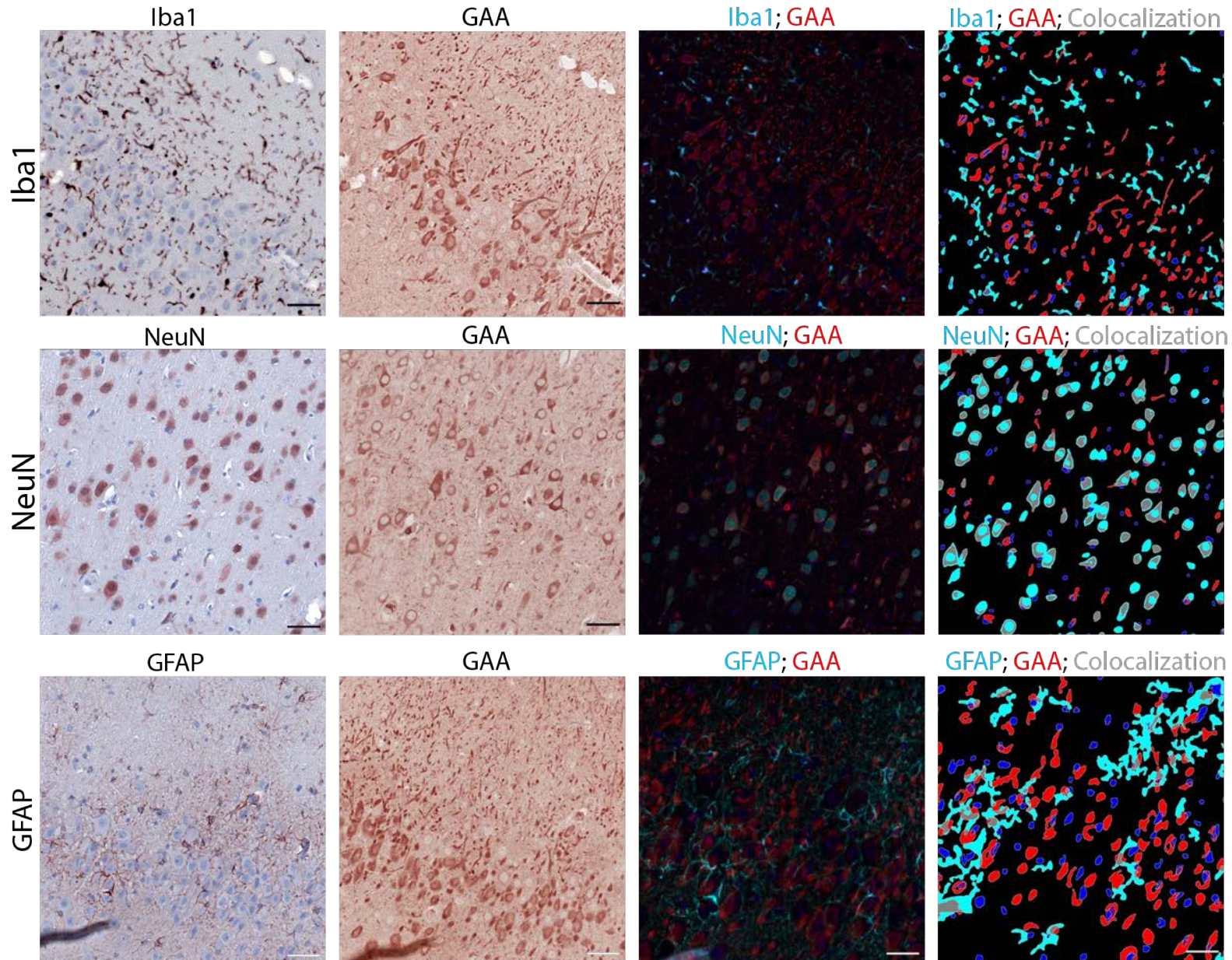
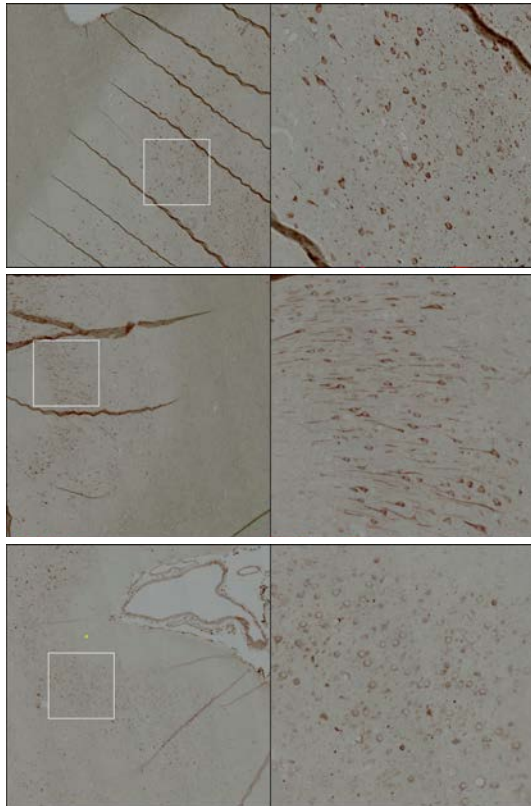
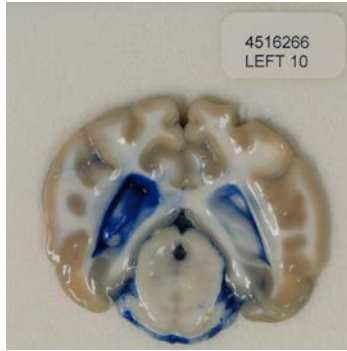
Evans blue injection at necropsy



VAL-1221 in brain homogenates



VAL-1221 is enriched in neurons in hippocampus

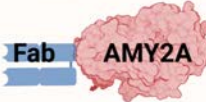













Summary of LD Antibody-Enzyme Fusion Data

We have tested >400 mice to date with VAL drugs

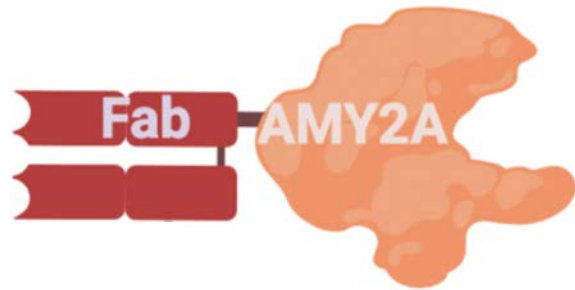


Laforin KO
Malin KO
WT

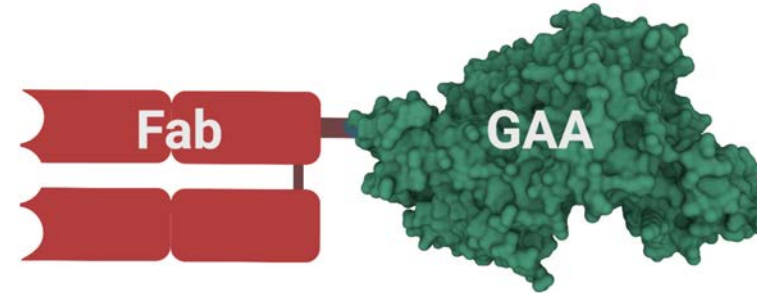
Delivery Method	VAL-0417 	VAL-1221 
I.M.		
I.V. systemic		
I.C.V.		
I.V. brain	Testing	Testing
NHP safety	-	I.V. NHP 
Canine study	-	I.C.V. Testing 
Clinical Trial		 I.V.  I.C.V.

Brewer et al., 2019 *Cell Metabolism*
 Sun et al., 2019 *Cell Metabolism*
 Austin et al., 2019 *Mol Pharmaceutics*
 Zhou et al., 2020 *Trends Mol Med*
 Sun et al., 2021 *Cell Metabolism*
 Young et al., 2022 *EMBO Mol Med*

Current VAL-0417 & VAL-1221 efforts



VAL-0417



VAL-1221

Gentry lab:

- Define minimum dose w/ maximal response
- Define LB re-accumulation rate
- Establishing human & mouse biomarkers

Project 2: Anti-Sense Oligonucleotide (ASO) Therapy

GYS1 gene

GYS1 mRNA



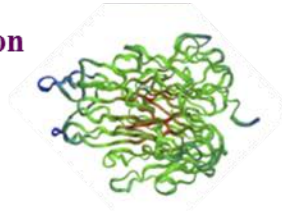
Transcription



Translation

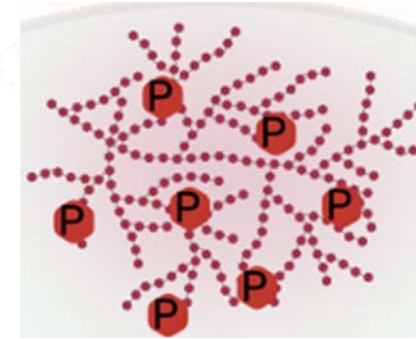


GYS1 protein



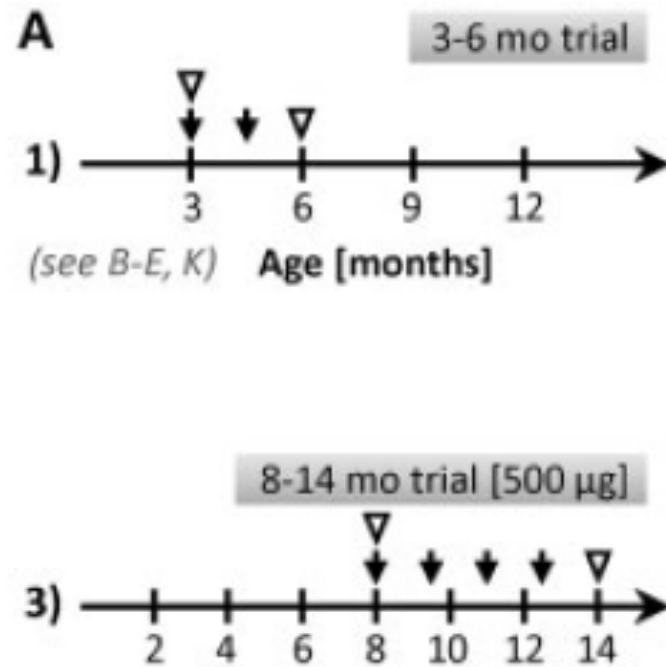
DISEASE
EPM2A
EPM2B mutations

Lafora body

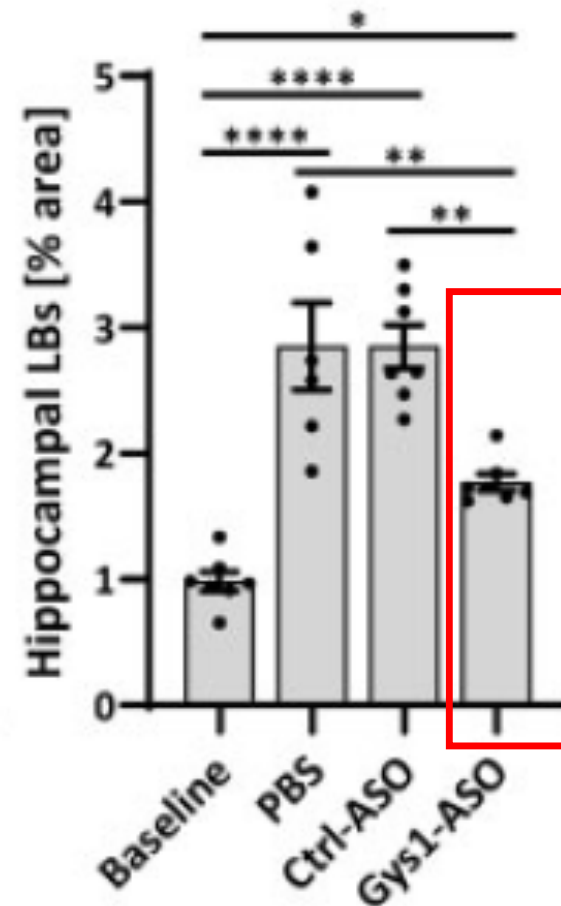


GYS1 ASO Tx slows LBs in laforin KO mice

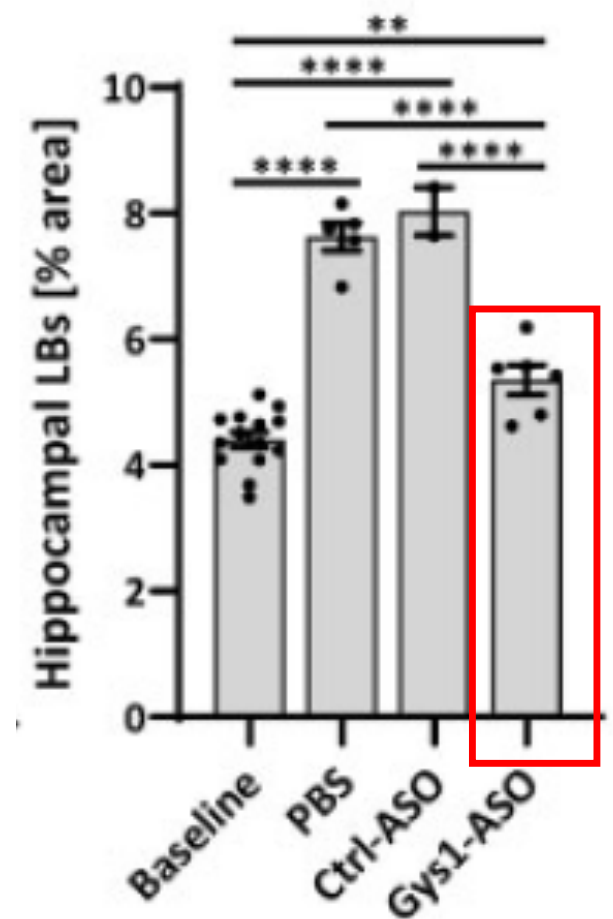
ASO i.t. delivery after disease onset



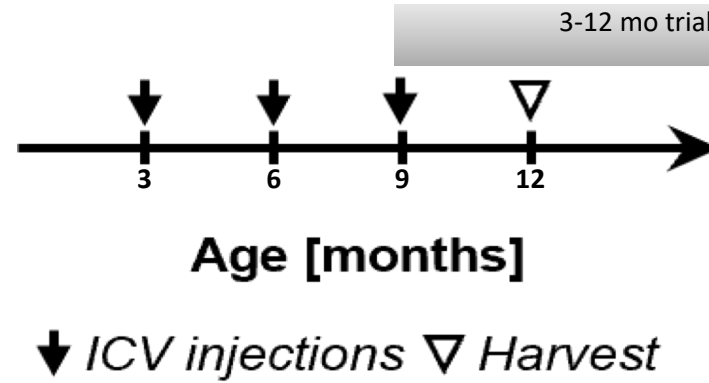
E 3-6m trial



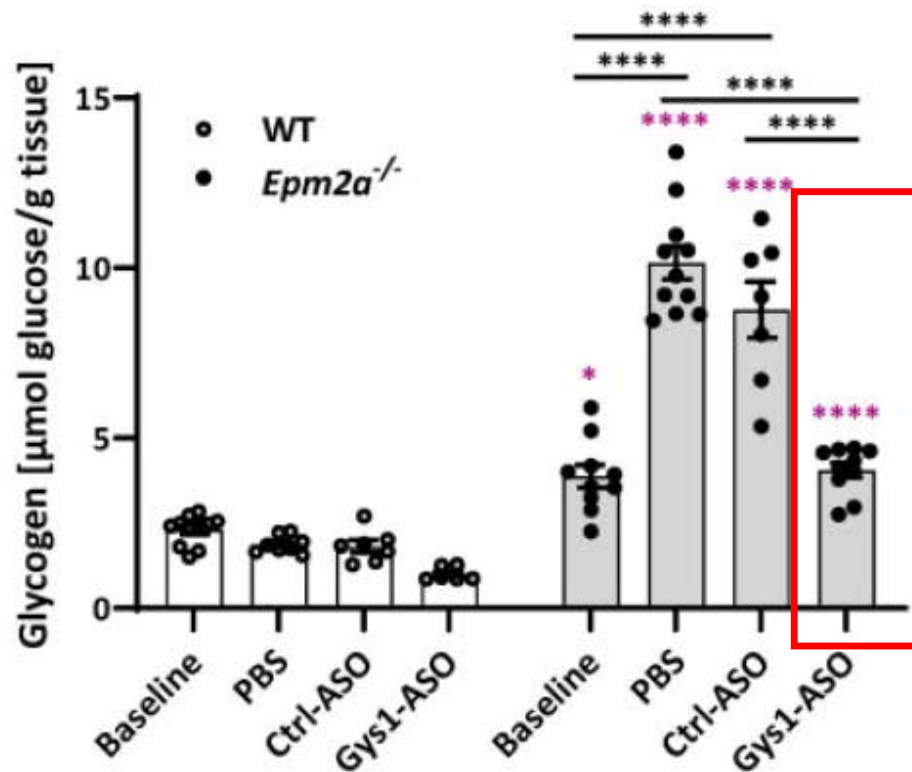
J 8-14m trial



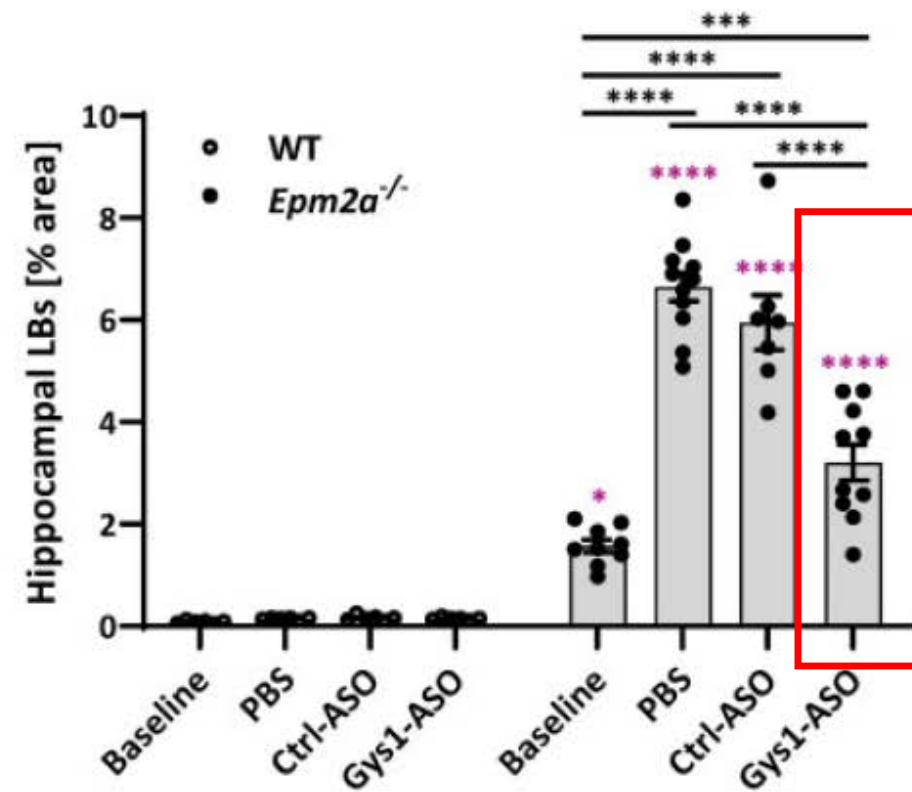
Long-term ASO Tx prevents LBs in laforin KO mice



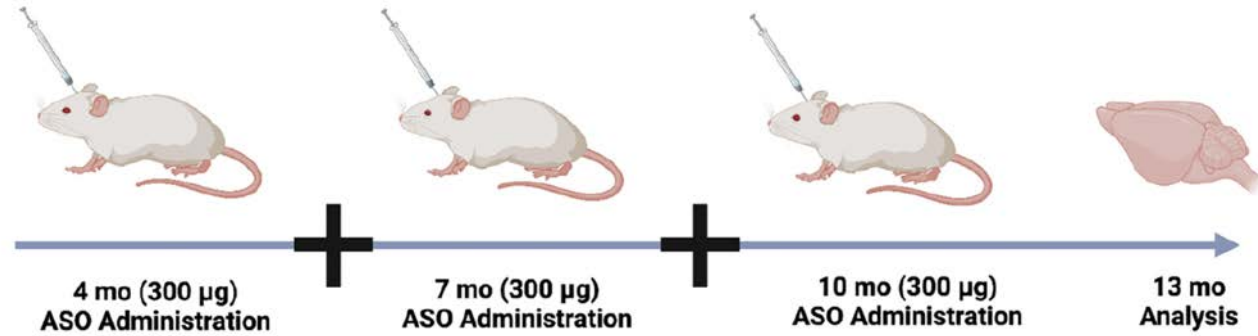
A



B



GYS1 ASO Tx slows LBs in malin KO mice

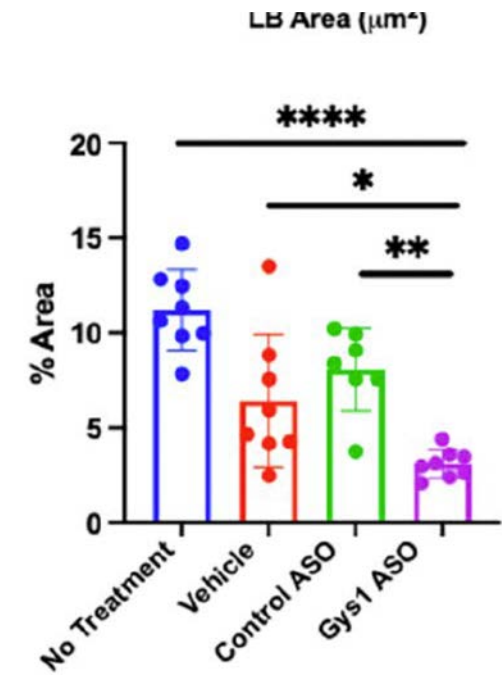
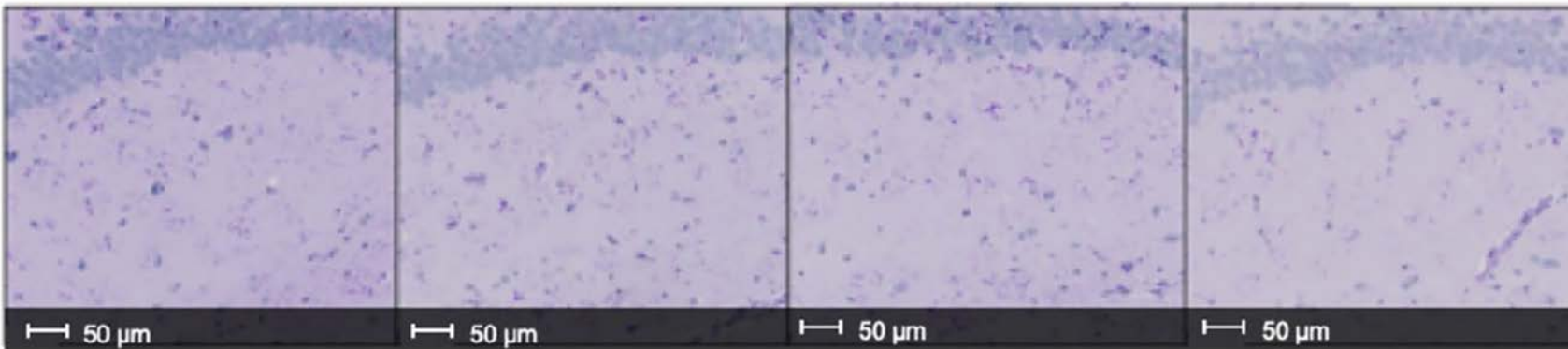


No Treatment

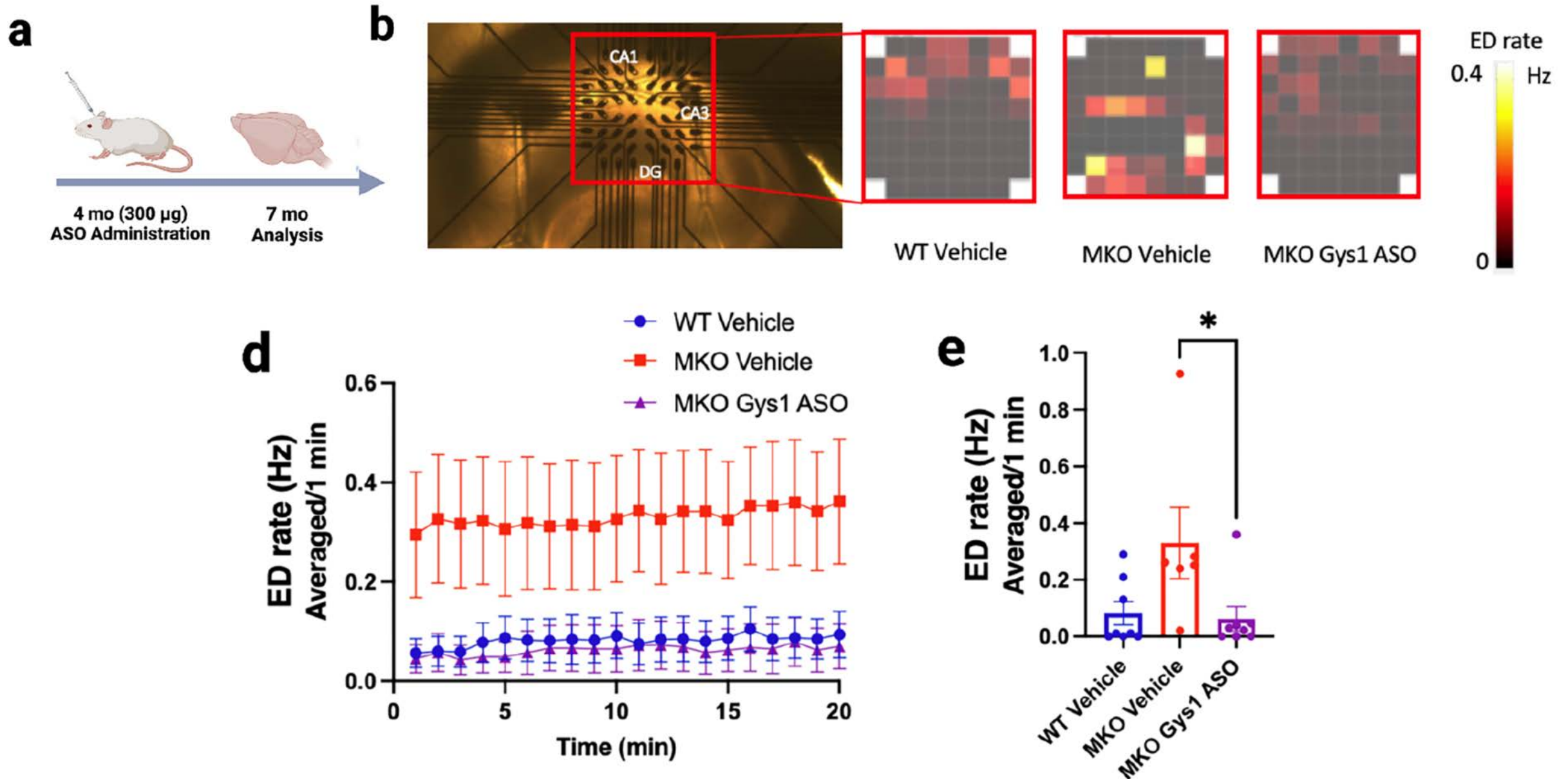
Vehicle

Control ASO

Gys1 ASO



GYS1 ASO Tx Decreases Epileptiform Discharges



Current *GYS1* ASO efforts

Minassian & Gentry labs:

- Testing the ASO in other disease models

Ionis Pharmaceuticals:

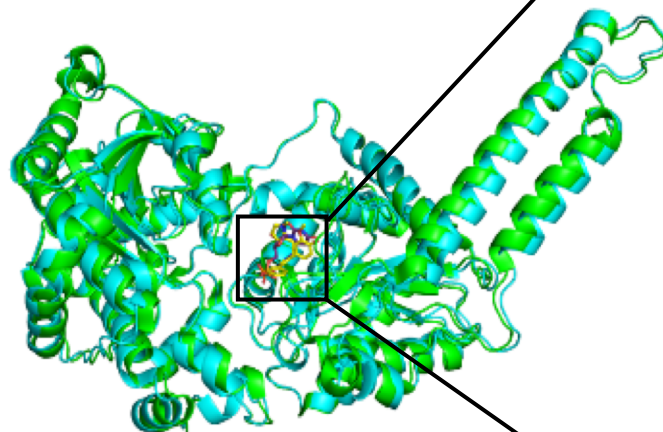
- Completing analysis of Natural History Study, NCT03876522
- Working and has worked with other companies for partnerships

Project 3: Small Molecule Therapy

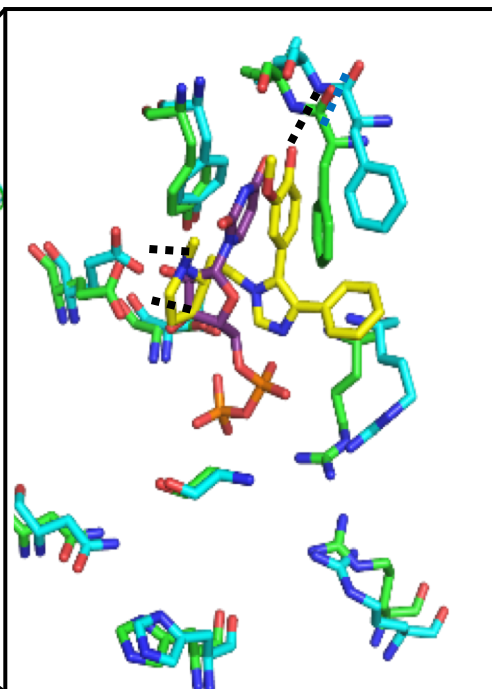


Roach
Depaoli-Roach
Hurley
Johnson

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INDIANA UNIVERSITY



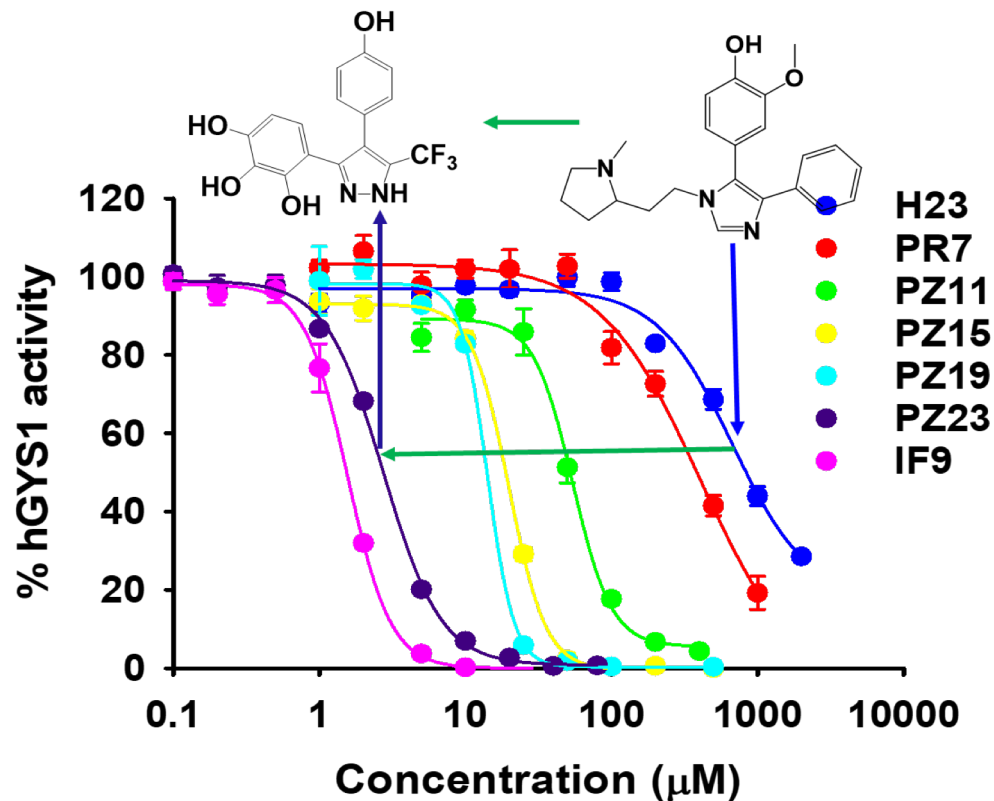
GYS1



Inhibiting GYS1

IC₅₀ = 2.8 mM

IC₅₀ = 880 mM



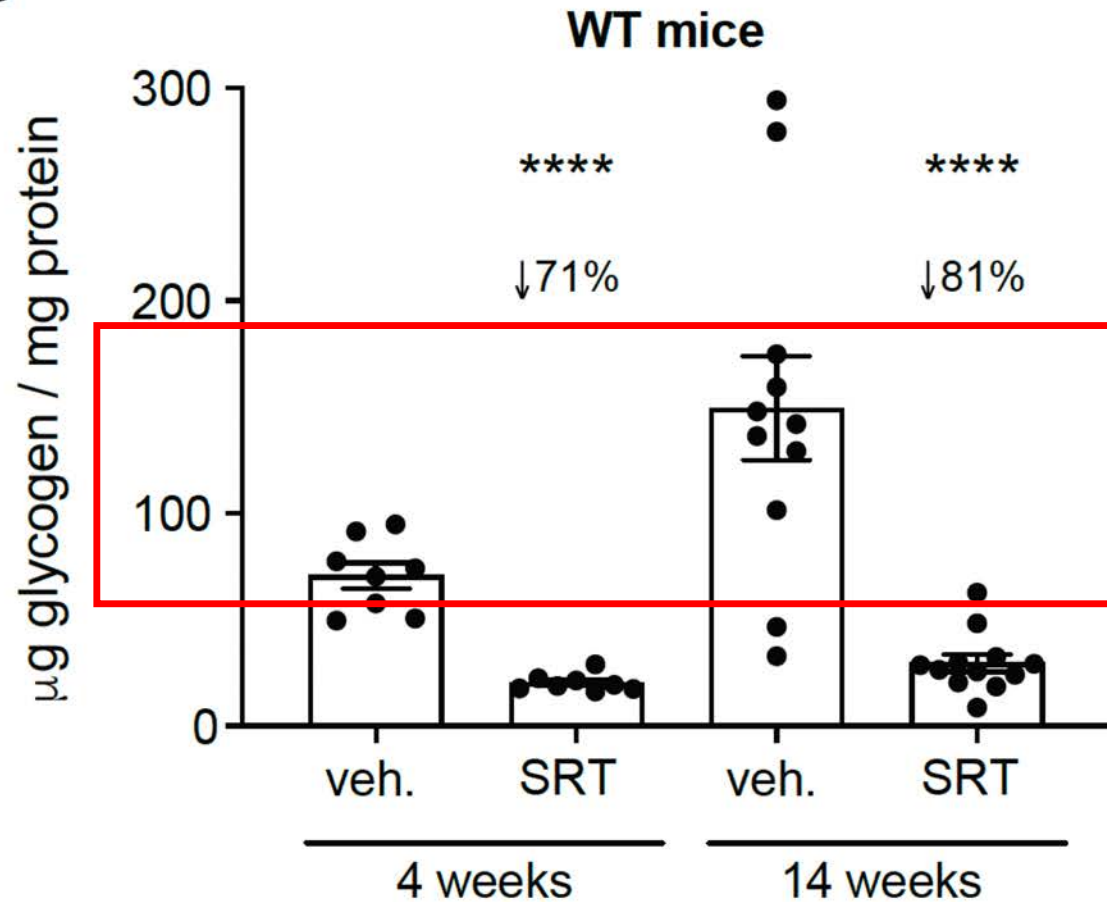
Dave Watt



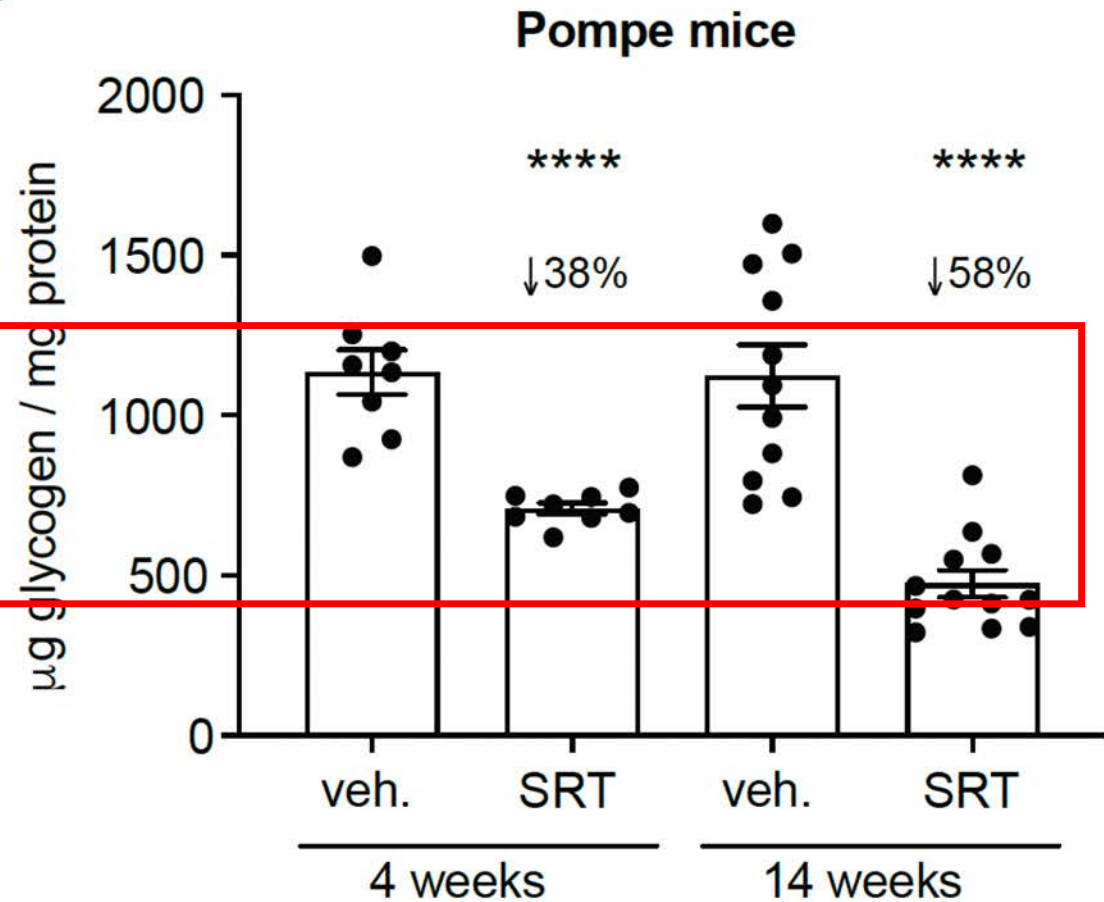
Ulman et al., *Sci Trans Med* In Press
Tang et al., 2020, *J Med Chem*
Skurat et al., 2017, *Glycobiology*
Contreras et al., 2016, *Arch Biochem Biophys*

MZE001 decreases glycogen in WT & Pompe mice

B

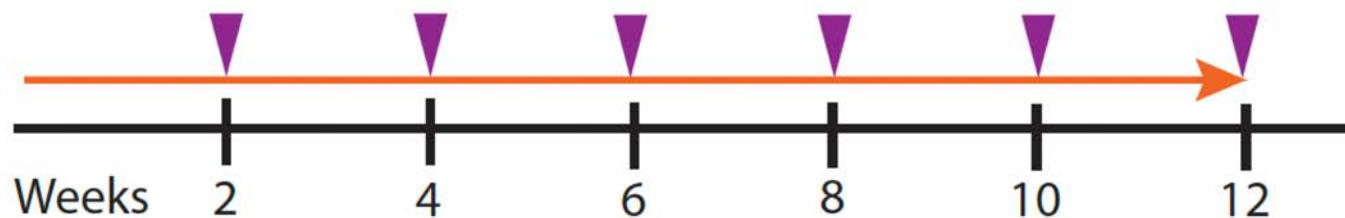
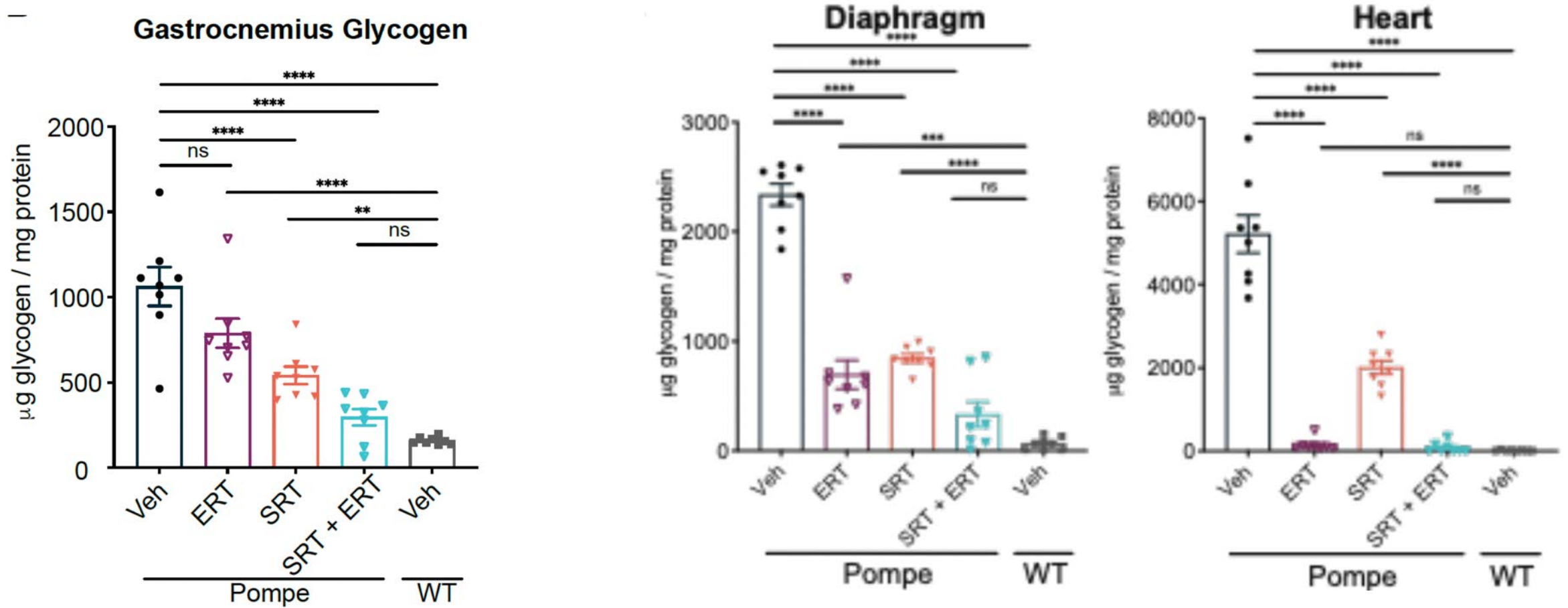


C



- Pompe mice exhibit 10-fold higher glycogen
- MZE001 reduces the levels by 50%, i.e. 5-fold

MZE001 + ERT normalizes glycogen in Pompe mice



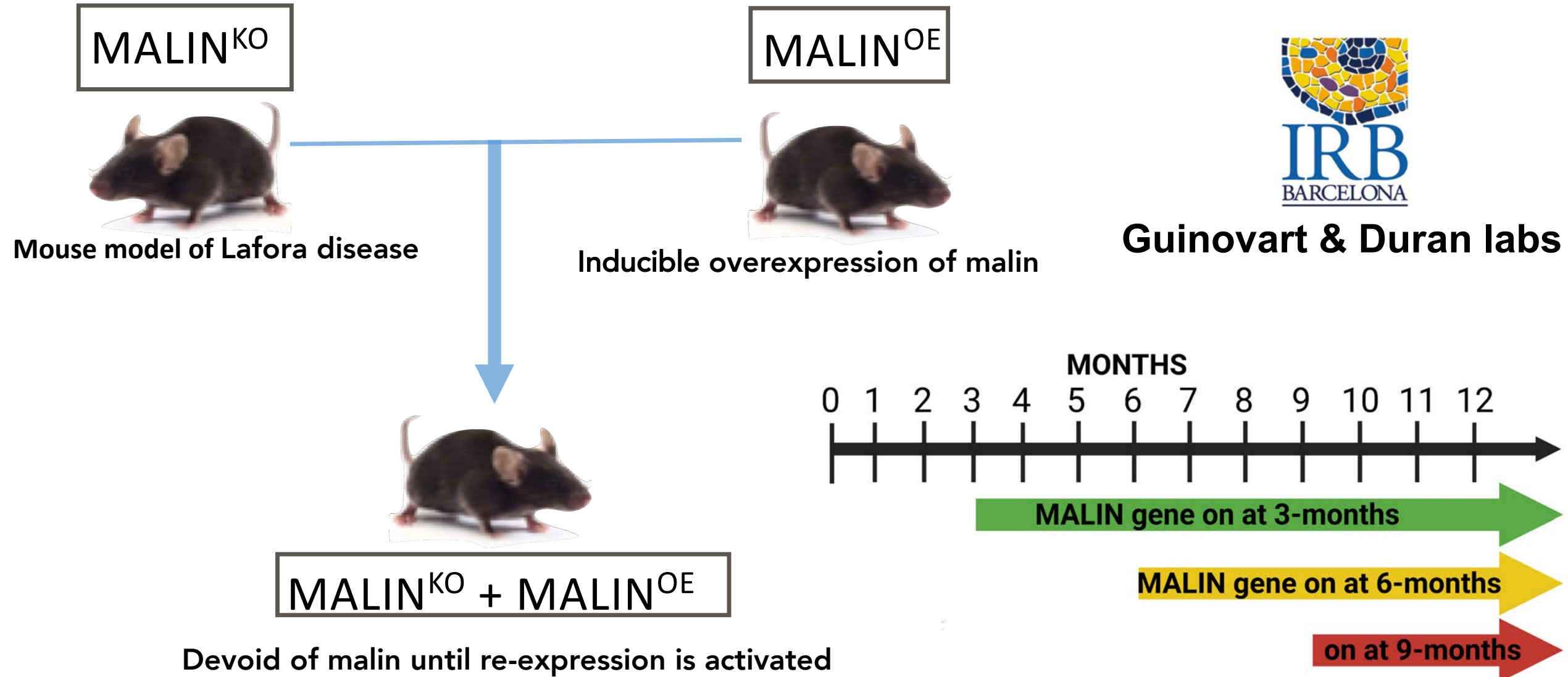
SRT (MZE001)
ERT (Myozyme)

Current MZE001 efforts

MAZE Therapeutics:

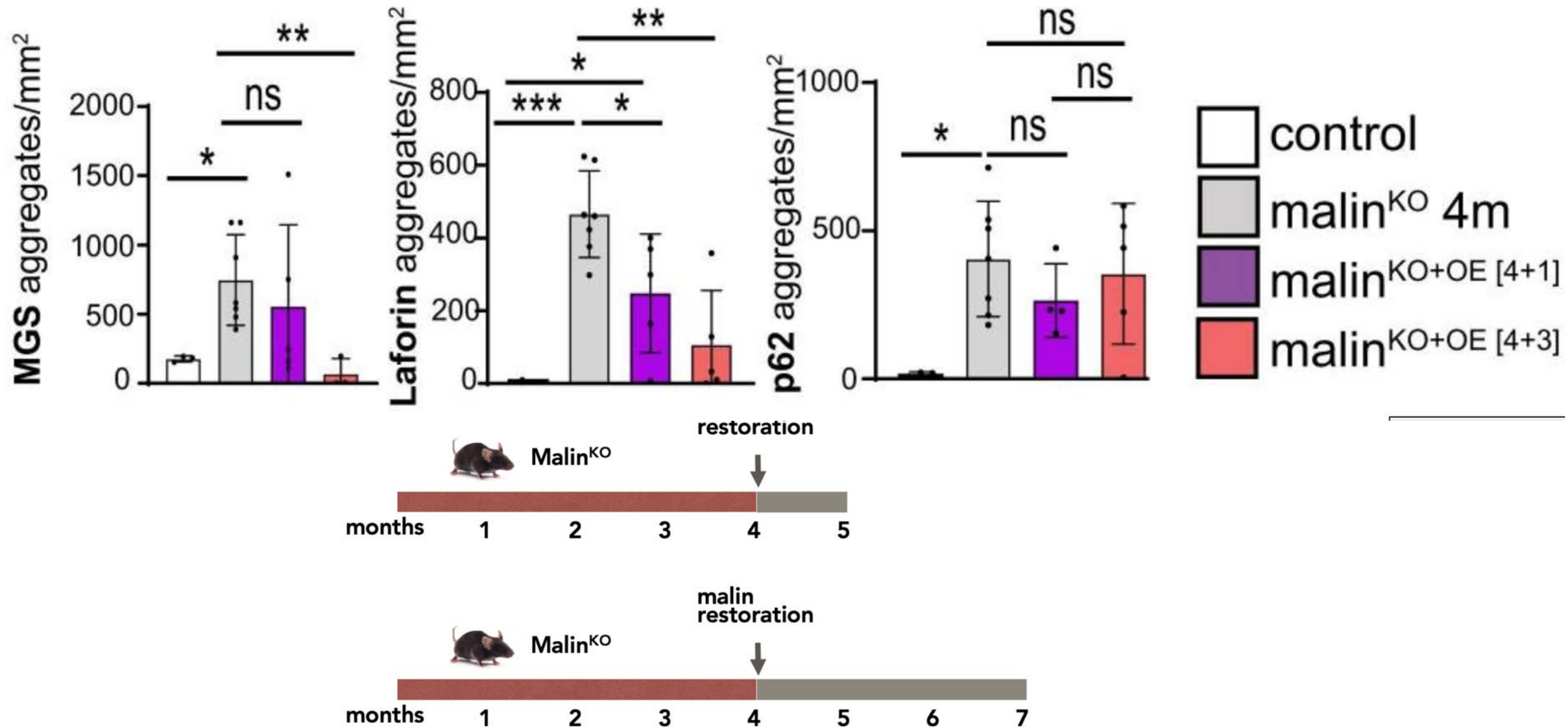
- Completed Phase I in 120 unaffected individuals
- Announced Phase II in Pompe patients for Q3 2023
- Presented data on possible use in muscular dystrophy patients
- Sold the entire program to Sanofi for \$750M
- Sanofi is onboarding the program
- No data to suggest that MZE001 crosses BBB
- *Science Translational Medicine* paper in press

Project 4: Window of Opportunity – Treatment Timing



Varea et al., 2022, *Brain Communication*
Varea et al., 2021, *Neurobiology of Disease*
Duran et al., 2020, *Mol Neurobiol*
Auge et al., 2018, *Glia*

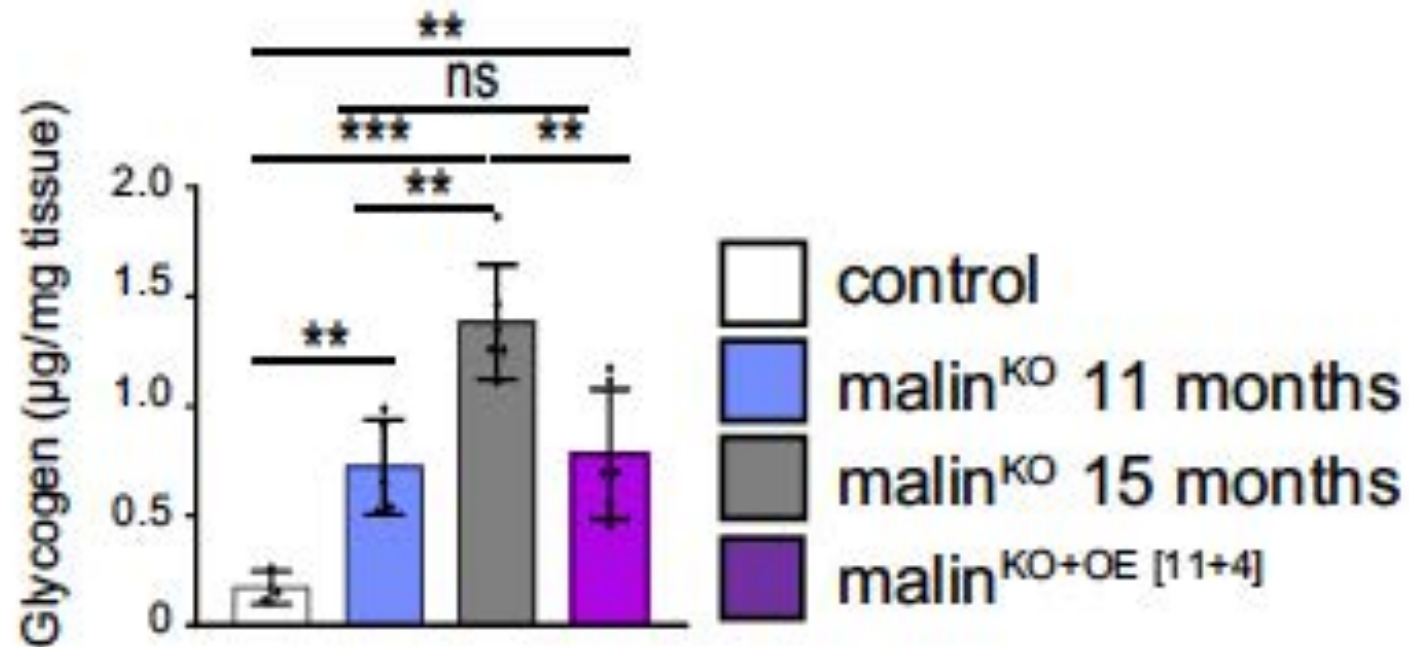
Early re-expression of malin reverses LB aggregates



Late re-expression of malin stops LB progression



B Total glycogen measurement



GSDs are ultra-rare alone, more common together

Type	Alternate names or subtype	Affected Enzyme/Pathway	Gene	OMIM [†] Phenotype no.
0	0a	Liver glycogen synthase	<i>GYS2</i>	240600
	0b	Muscle glycogen synthase	<i>GYS1</i>	611556
I	Ia; von Gierke	Glucose-6-phosphatase α	<i>G6PC</i>	232200
	Ib; von Gierke	Glucose-6-phosphate transporter	<i>SLC37A4</i>	232220
II	Pompe	Acid α -glucosidase	<i>GAA</i>	232300
III	Cori/Forbes	Glycogen debranching enzyme	<i>AGL</i>	232400
IV	Andersen	Glycogen branching enzyme	<i>GBE1</i>	232500
V	McArdle	Muscle glycogen phosphorylase	<i>PYGM</i>	232600
VI	Hers	Liver glycogen phosphorylase	<i>PYGL</i>	232700
VII	Tarui	Muscle phosphofructose kinase	<i>PFKM</i>	232800
IX	IXa	Phosphorylase kinase ($\alpha 2$ subunit)	<i>PHKA2</i>	306000
	IXb	Phosphorylase kinase (β subunit)	<i>PHKB</i>	261750
	IXc	Phosphorylase kinase (γ subunit)	<i>PHKG2</i>	613027
	IXd	Phosphorylase kinase ($\alpha 1$ subunit)	<i>PHKA1</i>	300559
X	–	Muscle phosphoglycerate mutase	<i>PGAM2</i>	261670
XI [#]	Fanconi-Bickel	Glucose transporter 2	<i>SLC2A2</i>	227810
XII	–	Aldolase A	<i>ALDOA</i>	611881
XIII	–	β -enolase	<i>ENO3</i>	612932
XV	–	Glycogenin-1	<i>GYG1</i>	603942

sanofi

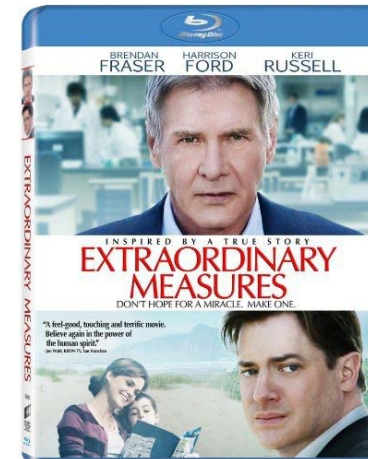
Lumizyme[®]

Myozyme[®]

2006 FDA approved

\$1.1B in 2022

GSDs impact 1:~25,000



Pompe Disease

DEALI[™]
THERAPEUTICS

 Amicus
Therapeutics[®]





 AskBio

 rocket
pharma





 SAREPTA
THERAPEUTICS





 Actus
Therapeutics

 oxyrane

 IMMUSOFT



 AVIDITY
BIOSCIENCES

 Selecta[™]
Biosciences







 valerion



 Lacerta
therapeutics

 astellas

> [J Neuropathol Exp Neurol](#). 2008 Aug;67(8):803-18. doi: 10.1097/NEN.0b013e3181815994.

Temporal neuropathologic and behavioral phenotype of 6neo/6neo Pompe disease mice

Richard L Sidman¹, Tatyana Taksir, Jonathan Fidler, Michael Zhao, James C Dodge, Marco A Passini, Nina Raben, Beth L Thurberg, Seng H Cheng, Lamy S Shihabuddin

> [Proc Natl Acad Sci U S A](#). 2009 Jun 9;106(23):9419-24. doi: 10.1073/pnas.0902534106.

Epub 2009 May 27.

Neural deficits contribute to respiratory insufficiency in Pompe disease

Lara R DeRuisseau¹, David D Fuller, Kai Qiu, Keith C DeRuisseau, William H Donnelly Jr, Cathryn Mah, Paul J Reier, Barry J Byrne

ATM

ANNALS OF
TRANSLATIONAL
MEDICINE

[Ann Transl Med](#). 2019 Jul; 7(13): 289.

doi: [10.21037/atm.2019.04.49](https://doi.org/10.21037/atm.2019.04.49)

PMCID: PMC6642933

PMID: [31392201](https://pubmed.ncbi.nlm.nih.gov/31392201/)

An emerging phenotype of central nervous system involvement in Pompe disease: from bench to bedside and beyond

Aditi Korlimarla,[#] Jeong-A Lim,[#] Priya S. Kishnani, and Baodong Sun[✉]

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August 08, 2023; 101 (6) RESEARCH ARTICLE

OPEN ACCESS

Neurofilament Light and Its Association With CNS Involvement in Patients With Classic Infantile Pompe Disease

Maarten J. Mackenbach, Eline A.J. Willems, Jan J.A. van den Dorpel, Nadine A.M.E. van der Beek, Jordi Diaz-Manera, Dimitris Rizopoulos, Charlotte Teunissen, Ans T. van der Ploeg, Johanna M.P. van den Hout

First published June 19, 2023. DOI: <https://doi.org/10.1212/WNL.000000000000207482>

> [Mol Ther](#). 2012 Jan;20(1):21-7. doi: 10.1038/mt.2011.214. Epub 2011 Oct 18.

Spinal delivery of AAV vector restores enzyme activity and increases ventilation in Pompe mice

Kai Qiu¹, Darin J Falk, Paul J Reier, Barry J Byrne, David D Fuller

Review

> [Ann Transl Med](#). 2019 Jul;7(13):290. doi: 10.21037/atm.2019.05.56.

Pompe disease gene therapy: neural manifestations require consideration of CNS directed therapy

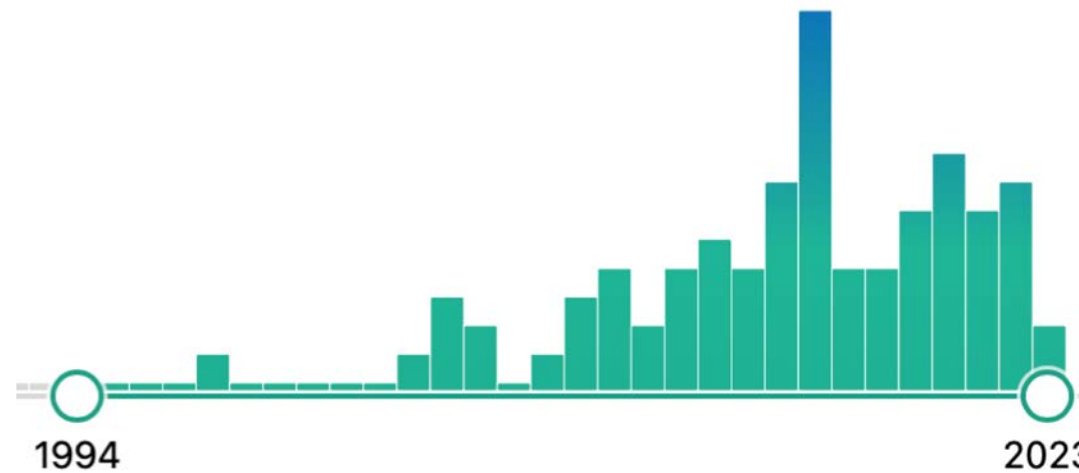
Barry J Byrne¹, David D Fuller², Barbara K Smith², Nathalie Clement¹, Kirsten Coleman¹, Brian Cleaver¹, Lauren Vaught¹, Darin J Falk³, Angela McCall⁴, Manuela Corti¹

> [J Neurophysiol](#). 2022 Nov 1;128(5):1133-1142. doi: 10.1152/jn.00026.2022. Epub 2022 Aug 17.

Chemogenetic activation of hypoglossal motoneurons in a mouse model of Pompe disease

Michele L Singer^{1 2 3 4}, Sabhya Rana^{2 3 4}, Ethan S Benevides^{1 2 3 4}, Brian E Barral^{3 4}, Barry J Byrne^{5 6}, David D Fuller^{1 2 3 4}

Pompe disease patients have CNS & diaphragm issues



75 papers

> [Front Rehabil Sci.](#) 2023 Jul 31;4:1184031. doi: 10.3389/fresc.2023.1184031. eCollection 2023.

Diaphragm pacing and independent breathing in individuals with severe Pompe disease

Cristina Liberati ¹, Barry J Byrne ², David D Fuller ^{3 4}, Chasen Croft ⁵, Teresa Pitts ^{6 7},
Jessica Ehrbar ³, Carmen Leon-Astudillo ², Barbara K Smith ^{2 3 4}

Affiliations 1, 2, 3, 4, 5, 6, 7

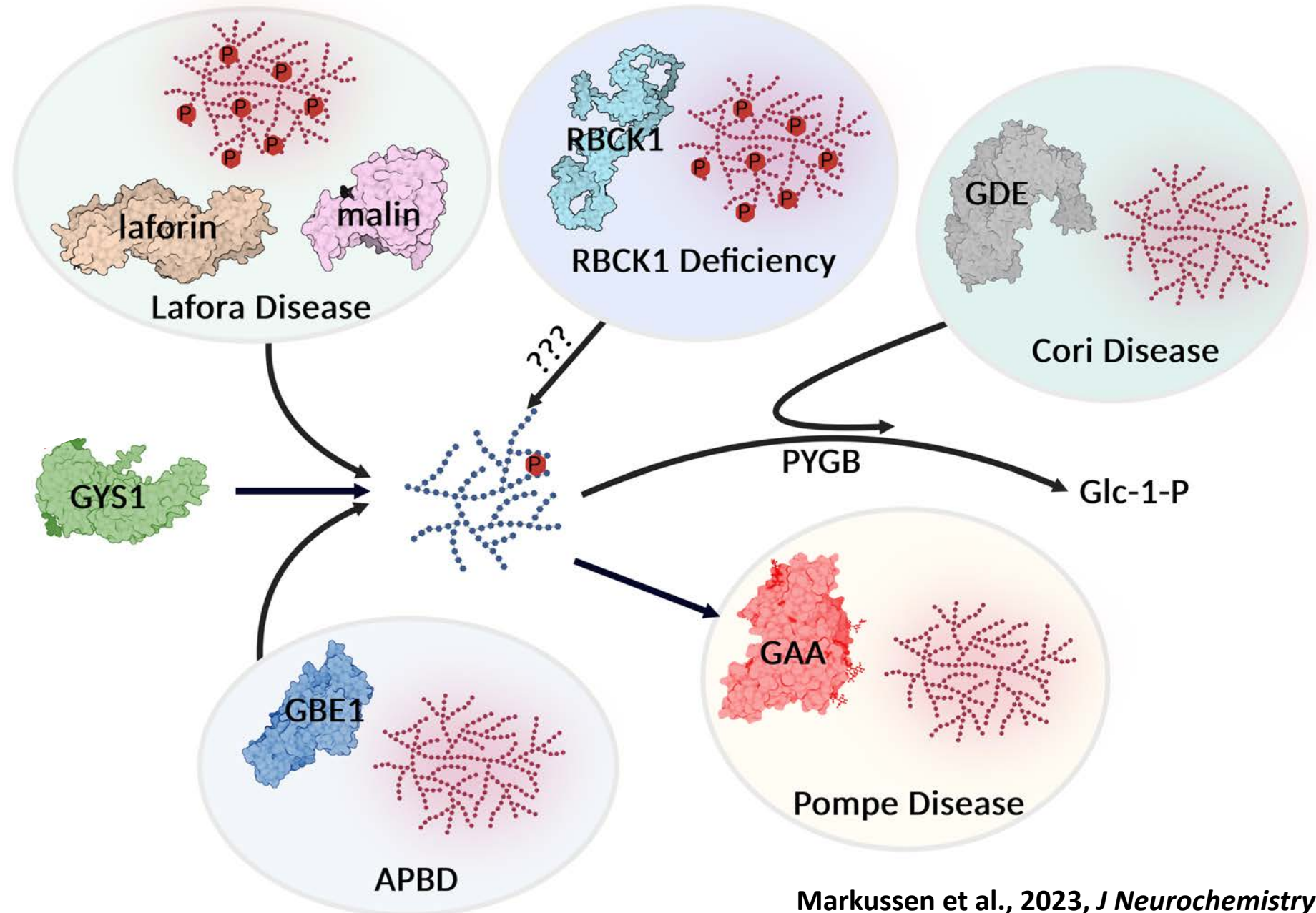
AAV-mediated delivery of secreted acid α -glucosidase with enhanced uptake corrects neuromuscular pathology in **Pompe** mice.

Meena NK, Randazzo D, Raben N, Puertollano R.

JCI Insight. 2023 Aug 22;8(16):e170199. doi: 10.1172/jci.insight.170199.

Neurological GSDs (n-GSDs): One Drug – Multiple Diseases

n-GSDs:
Lafora disease
APBD
Cori Disease
Pompe disease
RBCK1-deficiency



Ongoing & Future Pompe Disease Clinical Trials

Sanofi/Maze:

- MZE001 completed successful Phase I
 - Randomized with 120 unaffected individuals
 - NCT05249621, completed 21 Dec. 2022
- Sanofi acquired MZE001 for \$750M
- Upcoming Phase II in Pompe patients

Aro Biotherapeutics:

- ABX1100 siRNA targeting *GYS1*
- FDA granted it Orphan Drug Status
- starting Phase I in Canada Q4 2023
- Unknown if it crosses the BBB

AAV

- 3 ongoing in clinicaltrials.gov
- NCT04093349, NCT05567627, NCT05793307

Acknowledgments



Dr. Ramon Sun

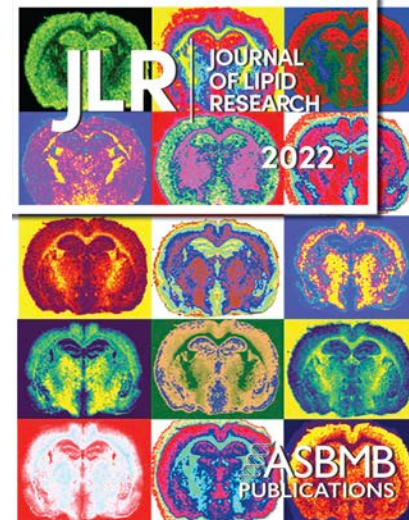
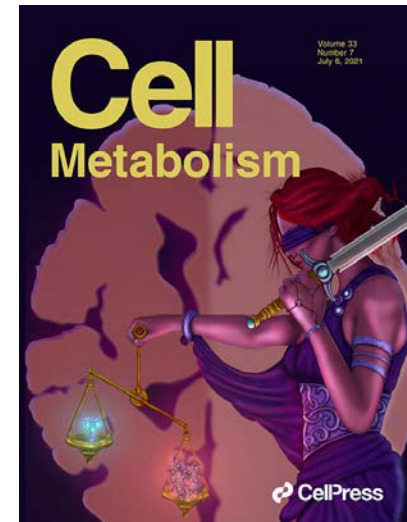


Dr. Craig Vander Kooi



NIH R35 NS116824
NIH P01 NS097197
NIH R61 NS111081
NIH R01 CA266004
NSF MCB1252345

Epilepsy Foundation
Valerion Therapeutics
Ionis Pharmaceuticals
Maze Therapeutics



Symptomatic treatment vs. Disease Modifying vs Curative

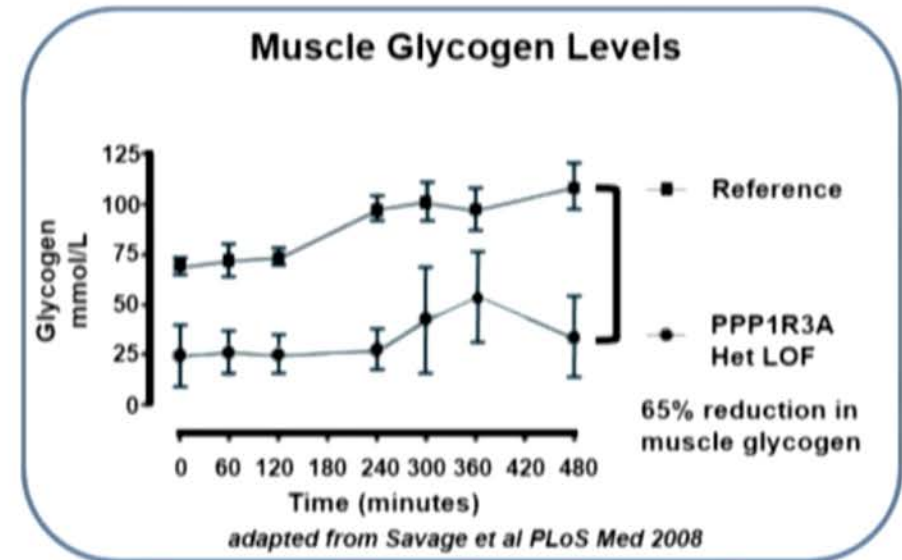
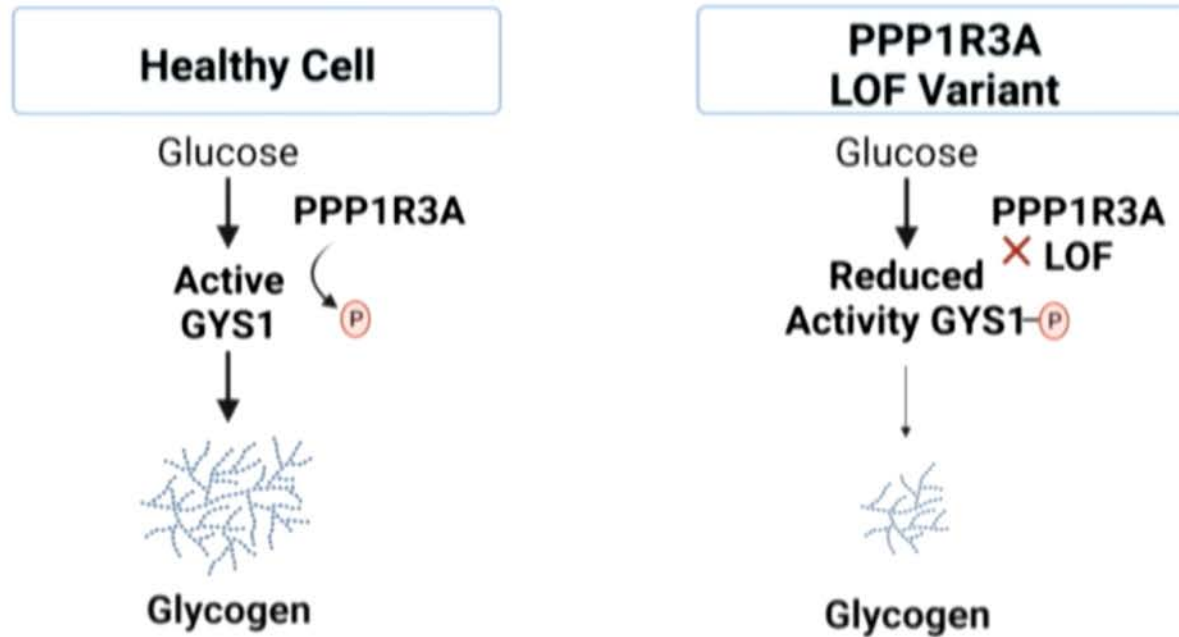
Symptomatic treatment, supportive care, or supportive therapy is any medical therapy of a disease that only affects its symptoms, not the underlying cause.

A **disease-modifying treatment, disease-modifying drug, or disease-modifying therapy** is a treatment that delays or slows the progression of a disease by targeting its underlying cause. They are distinguished from symptomatic treatments that treat the symptoms of a disease but do not address its underlying cause.

Curative treatment refers to treatment and therapies provided to a patient with the main intent of fully resolving an illness and the goal of bringing the patient – ideally - to their status of health before the illness presented itself.



Human genetics suggests ~65% reduction in muscle glycogen is safe & well tolerated



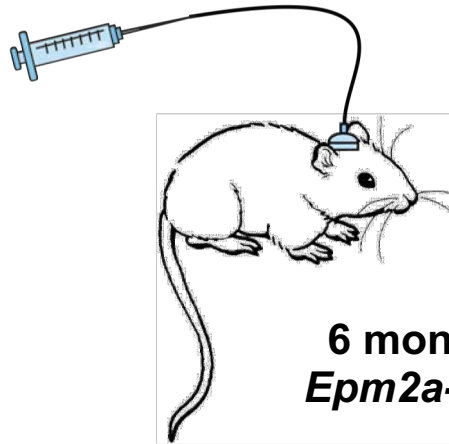
❖ Protein phosphatase 1 regulatory subunit 3A (PPP1R3A) is a key activator of GYS1. Loss of function (LOF) variant is found in ~1.1% of Caucasian individuals identified in UK Biobank

Analysis of research conducted using data from UK Biobank human subjects with 65% less muscle glycogen reveals no significant association across hundreds of phenotypes including:

- *No difference in exercise capacity (exercise output or maximum exercise heart rate)*
- *No impact on cardiac function (LVEF, LV wall thickness) nor correlation with heart failure*
- *No change in serum glucose or correlation with Type II Diabetes*

VAL-1221 ICV administration ablates brain LBs *in vivo*

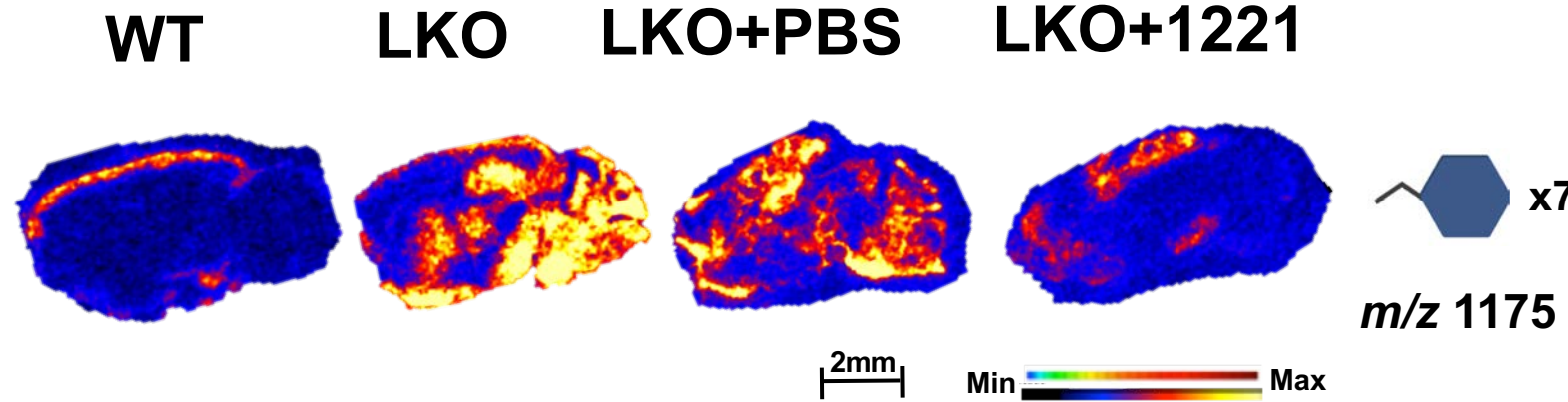
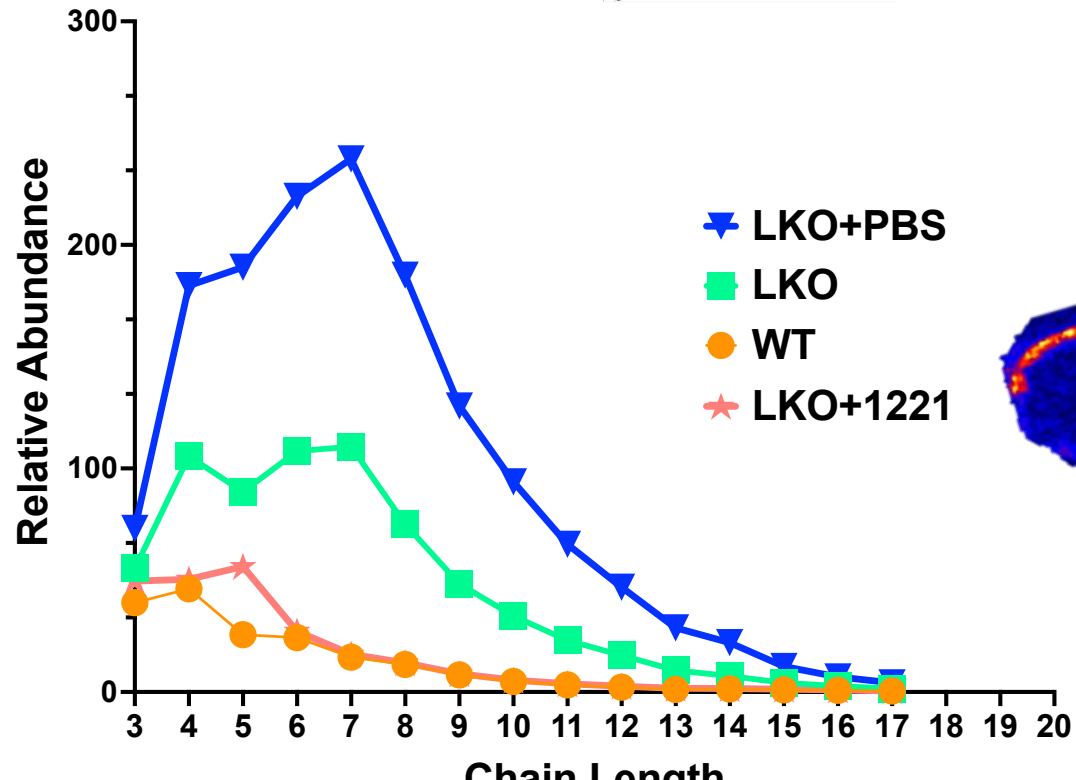
Intracerebroventricular
(ICV) administration



Continuous infusion
of VAL-1221 or PBS
for 7 days

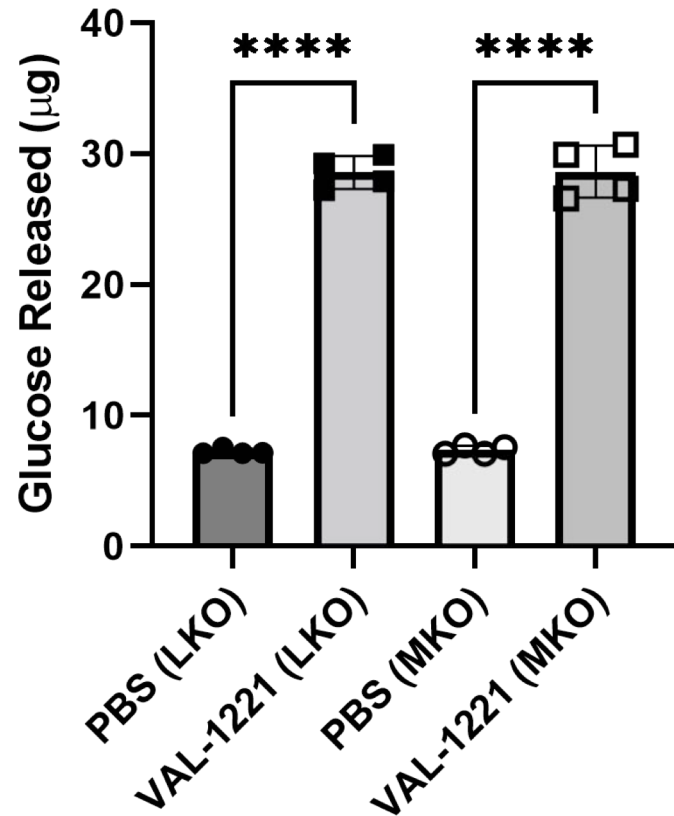
Euthanized
on 8th day

PAS staining

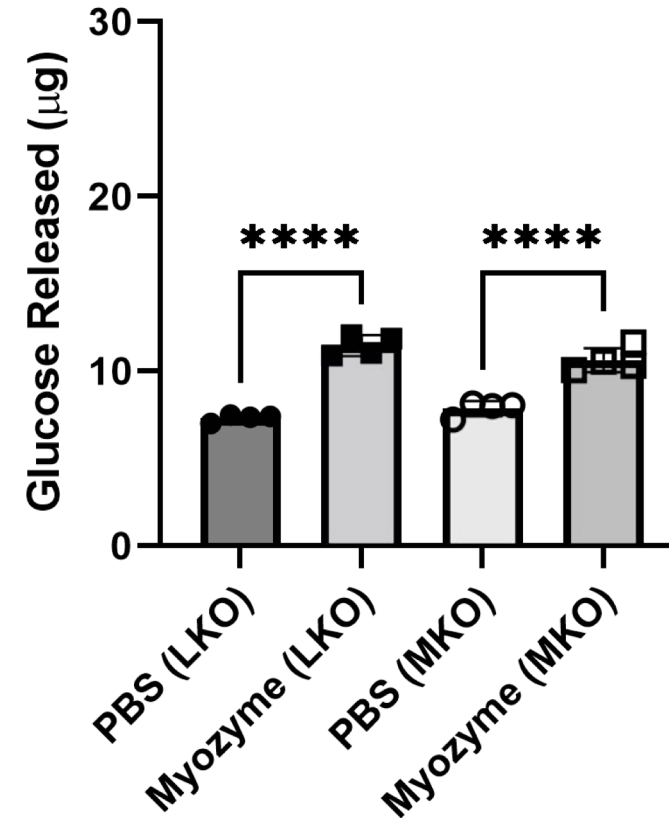


VAL-1221 and Myozyme[®] degrade LBs *in vitro*

VAL-1221 Degradation Assay

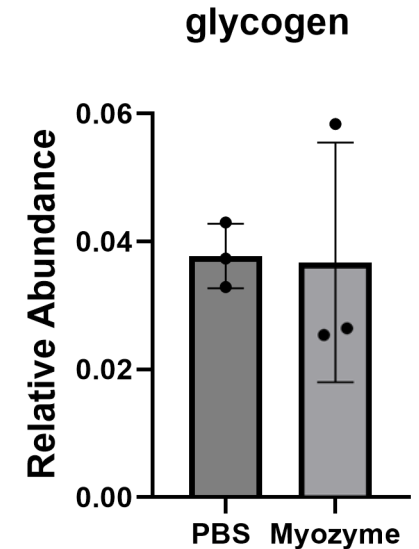
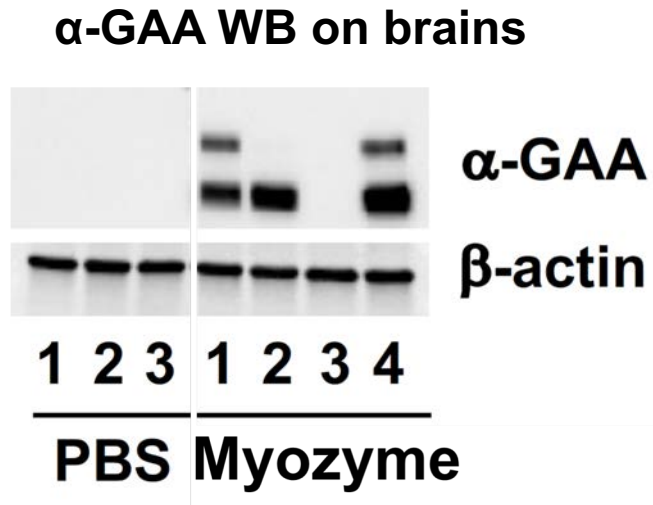
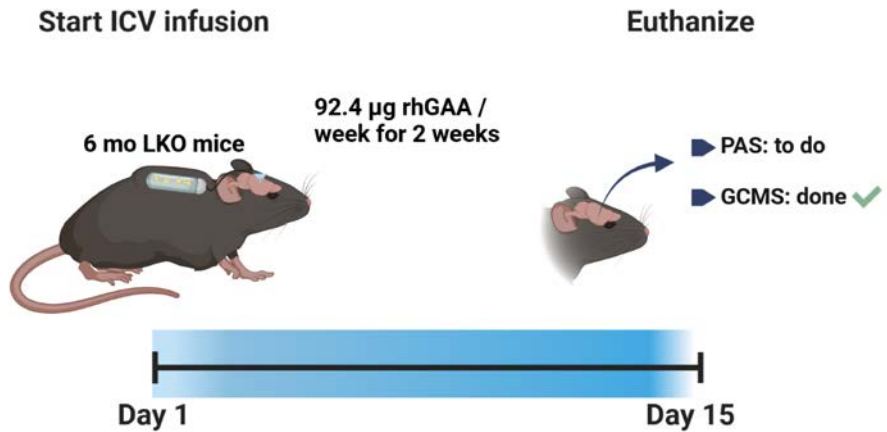


Myozyme Degradation Assay



10 µg VAL-1221 or Myozyme[®] incubated with 80 µg LBs at 37°C pH 7.5 for 3 days

Gentry lab Myozyme[®] ICV experiment

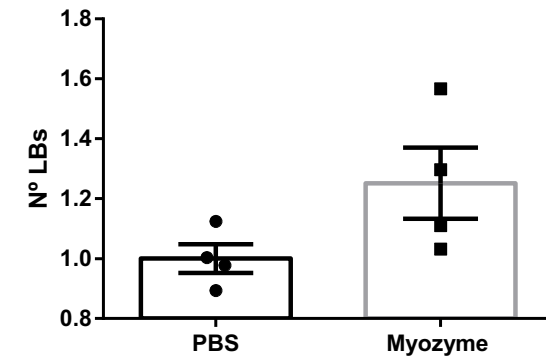
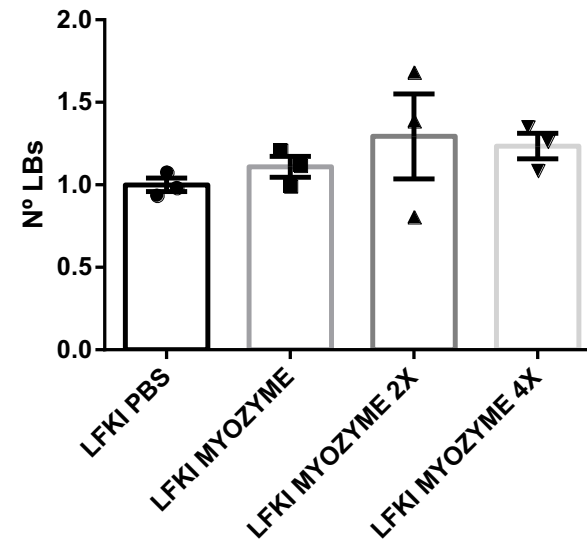
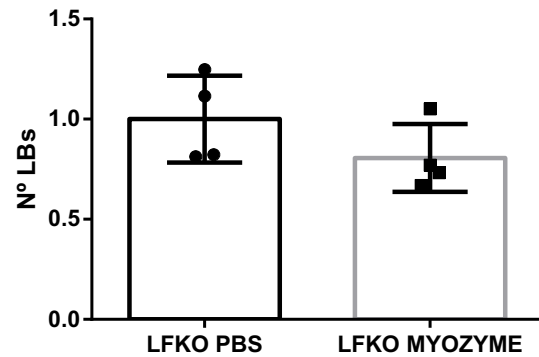
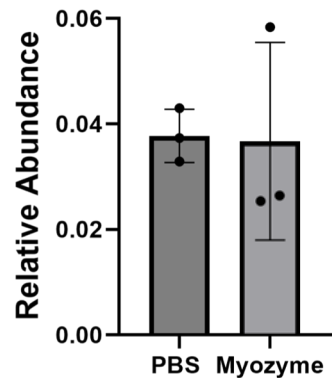


- ICV infusion for 2 weeks with PBS or rhGAA (0.185 mg total) in 6 mo LKO mice
- Distribution of Myozyme in the brains of 3 mice
- No significant change in glycogen content according to GCMS

Summary on Myozyme ICV experiments

Experiment	Genotype	Age	Number of mice treated with Myozyme®	Delivery method	Total amount of rhGAA	Duration of treatment	GAA infusion rate	Assay
Gentry	LKO	6 months	3	Alzet osmotic pump	185 µg	2 weeks	92.4 µg / week	GCMS
Serratos 1	LKO	12 months	4	Punctual ICV	120 µg	1 week	n.a.	PAS
Serratos 2	Laforin R240X	12 months	9	Punctual ICV	120, 240, 480 µg	1 week	n.a.	PAS
Serratos 3	LKO	9 months	4	Alzet osmotic pump	530 µg	1 month	120 µg / week	PAS + behavior
			total = 20					

glycogen



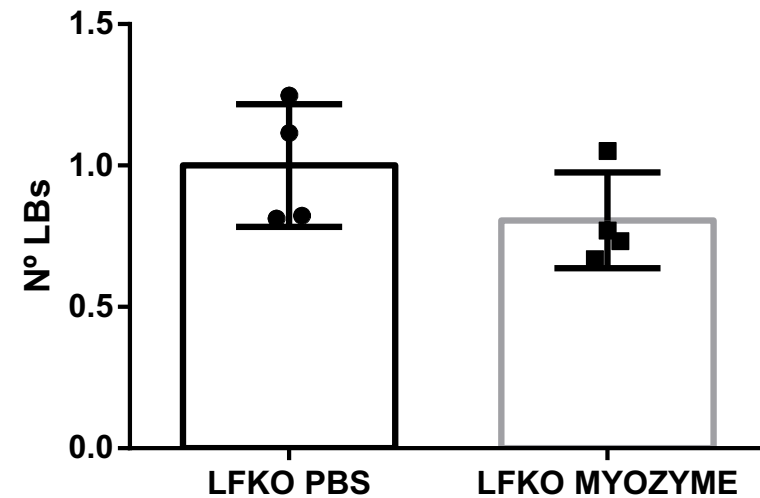
Serratosalab Myozyme[®] ICV results – Experiment 1

- **Genotype and age** : 12 mo LKO mice
- **Administration** : Punctual 0.73 mg Myozyme[®]/10 µl saline, 10ul ICV injection (coordinates: AP:-0.3; ML: 0.9; DV: -2.5)
- **Efficacy studies** : PAS-D staining at 7 days after injection

- **Animals analyzed** : 8 mice

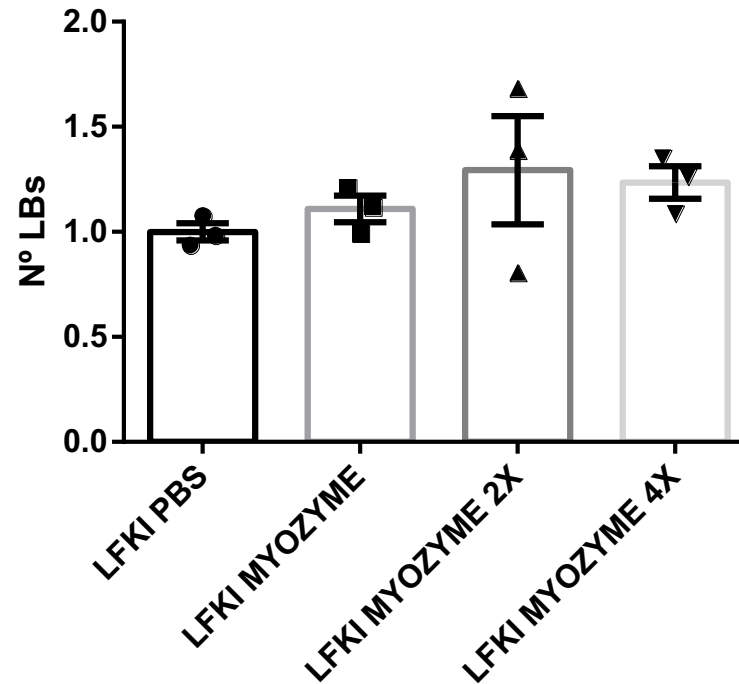
- ❖ 4 mice PBS
- ❖ 4 mice Myozyme[®]

- **Results**



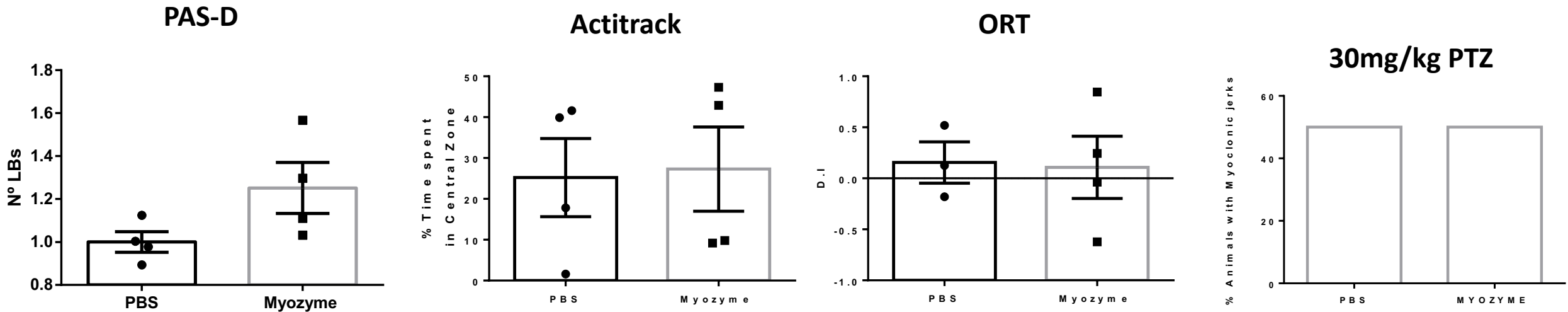
Serratosalab Myozyme[®] ICV results – Experiment 2

- **Genotype and age** : 12 mo Laforin knock-in R240X mice
- **Administration** : Punctual ICV injections (0.73 mg Myozyme[®]/10 µl saline; 1.46 mg Myozyme[®]/10 µl saline; 2.92 mg Myozyme[®]/10 µl saline) (coordinates: AP:-0.3; ML: 0.9; DV: -2.5)
- **Efficacy studies** : PAS-D staining at 7 days after injection
- **Animals** : 12 mice, 3 per group
- **Results** :



Serratosalab Myozyme[®] ICV results – Experiment 3

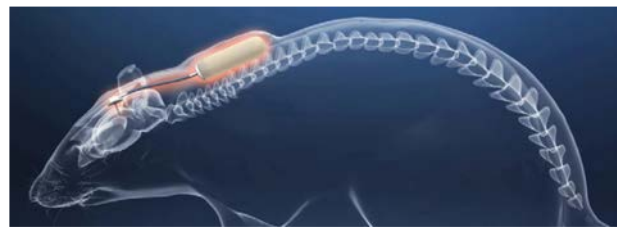
- **Genotype and age** : 9 mo LKO mice
- **Administration** : Alzet[®] Micro-Osmotic Pump Model 1004 + Cannula ICV (0.11 μ l/h) (Cannula in coordinates: AP:-0.3; ML: 0.9) (3.23 mg Myozyme[®]/100 μ l saline)
- **Efficacy studies** : Behavioral analysis and PAS-D staining at 1 month after pump implantation
- **Animals analyzed** : 8 mice



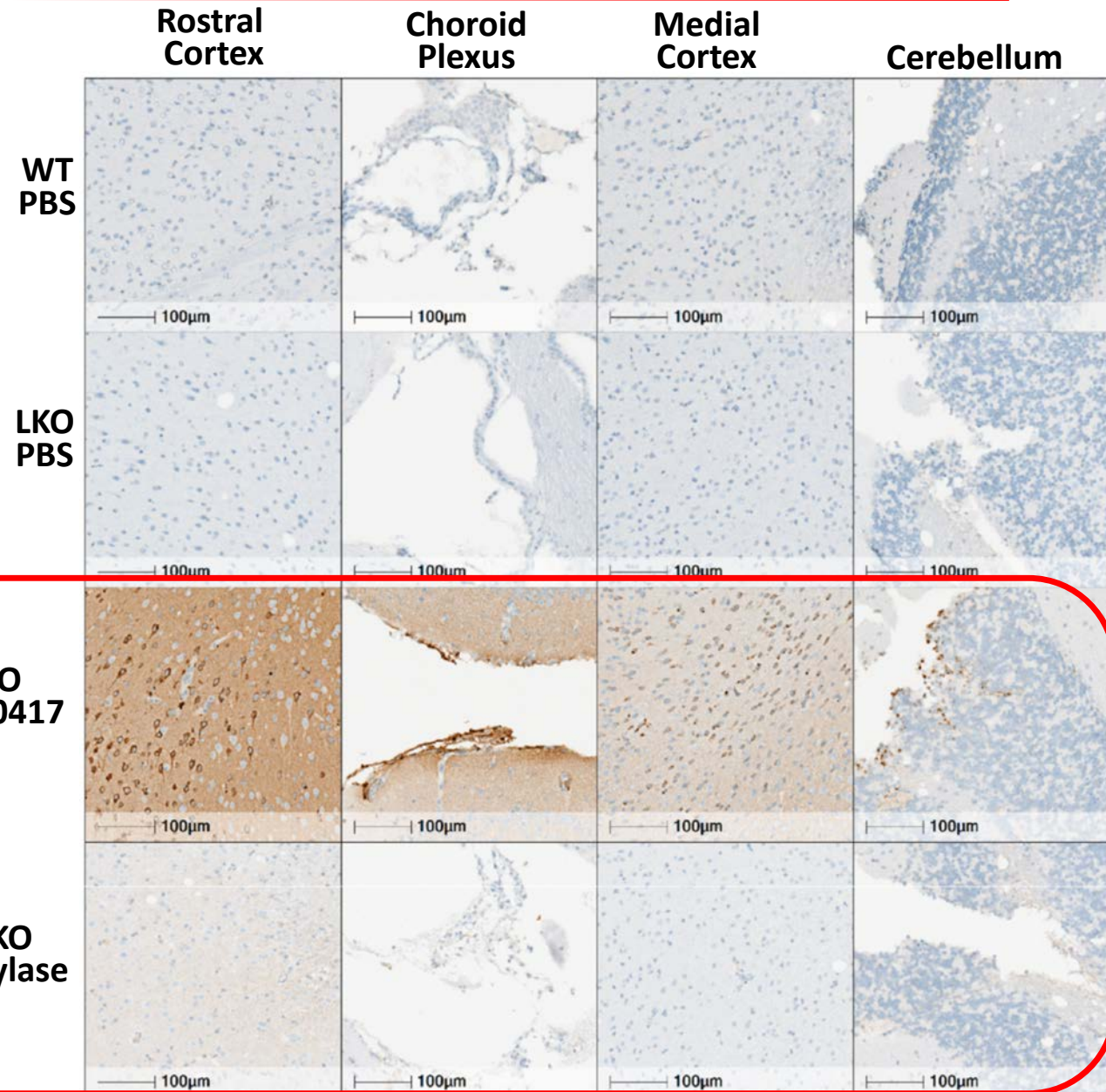
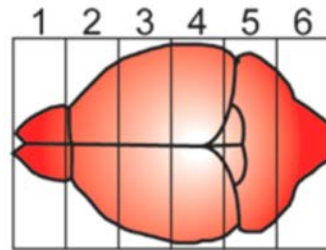
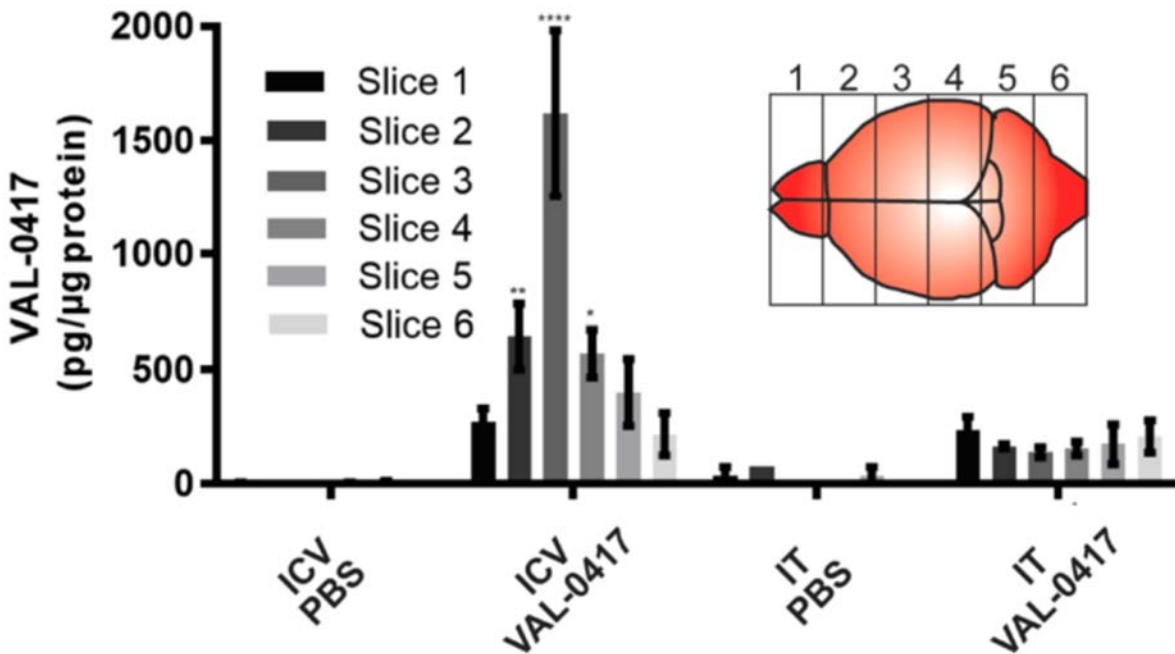
IT versus ICV administration in WT mice



Intrathecal (IT)



Intracerebroventricular (ICV)



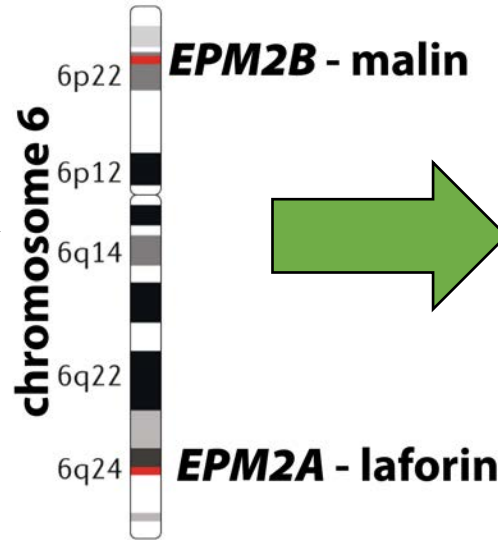
112 Year Summary of Lafora Disease (LD) Research

Syndrome Described

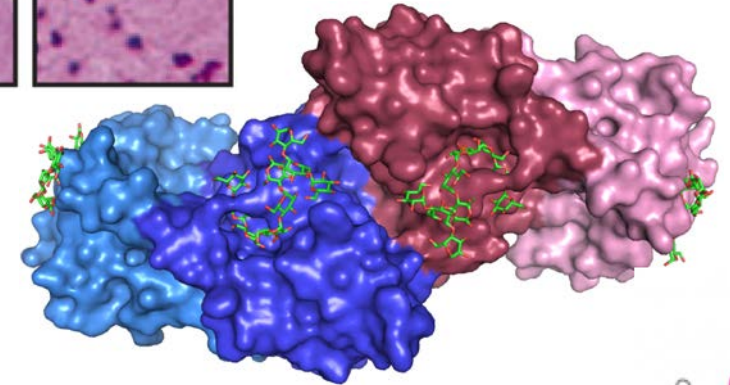
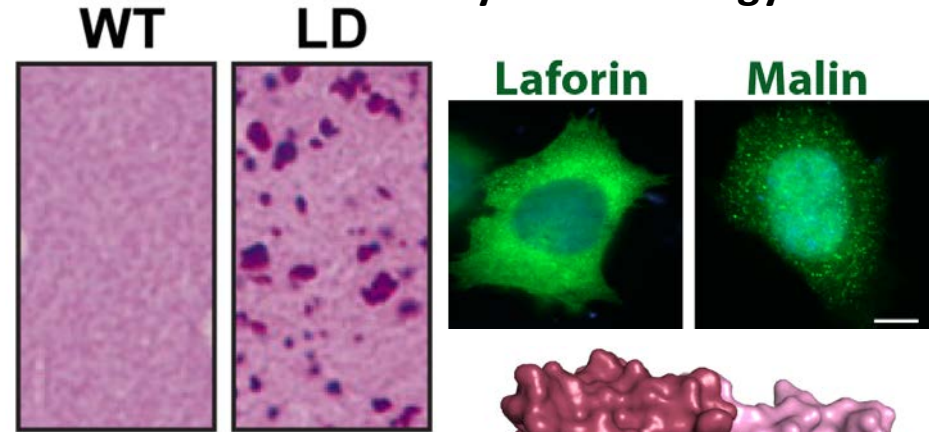


Lafora, *Virchows Arch Pathol Anat Physiol Klin Med* 1911

Gene Identification



Mouse models Biochemistry & Cell Biology



1911



Progressive myoclonus epilepsy with amyloid deposits characterized
Gonzalo Rodriguez Lafora

1968-1970

Lafora bodies are starch-like
Yokoi et al. Sakai et al.

1965

Lafora disease named
Gabriel Schwartz

1995

Gene mapped to chrom. 6q
Serratosa & Delgado-Escueta

2003

NHLRC1/EPM2B identified
Minassian, Delgado-Escueta & Scherer

2007

laforin dephosphorylates glycogen
Roach & DePaoli-Roach Minassian & Delgado-Escueta

1998

EPM2A identified
Delgado-Escueta, Minassian & Serratosa

2006

laforin characterized as a glucan phosphatase
Worby, Gentry & Dixon

2013-2015

LBs are mechanism
Guinovart Roach DePaoli-Roach Minassian

2016

NIH P01

small molecule therapy
enzyme therapy
ASOs
repurposing drugs
gene therapy

- EPM2A (laforin)
- EPM2B (malin)

2015

laforin crystal structure
Gentry

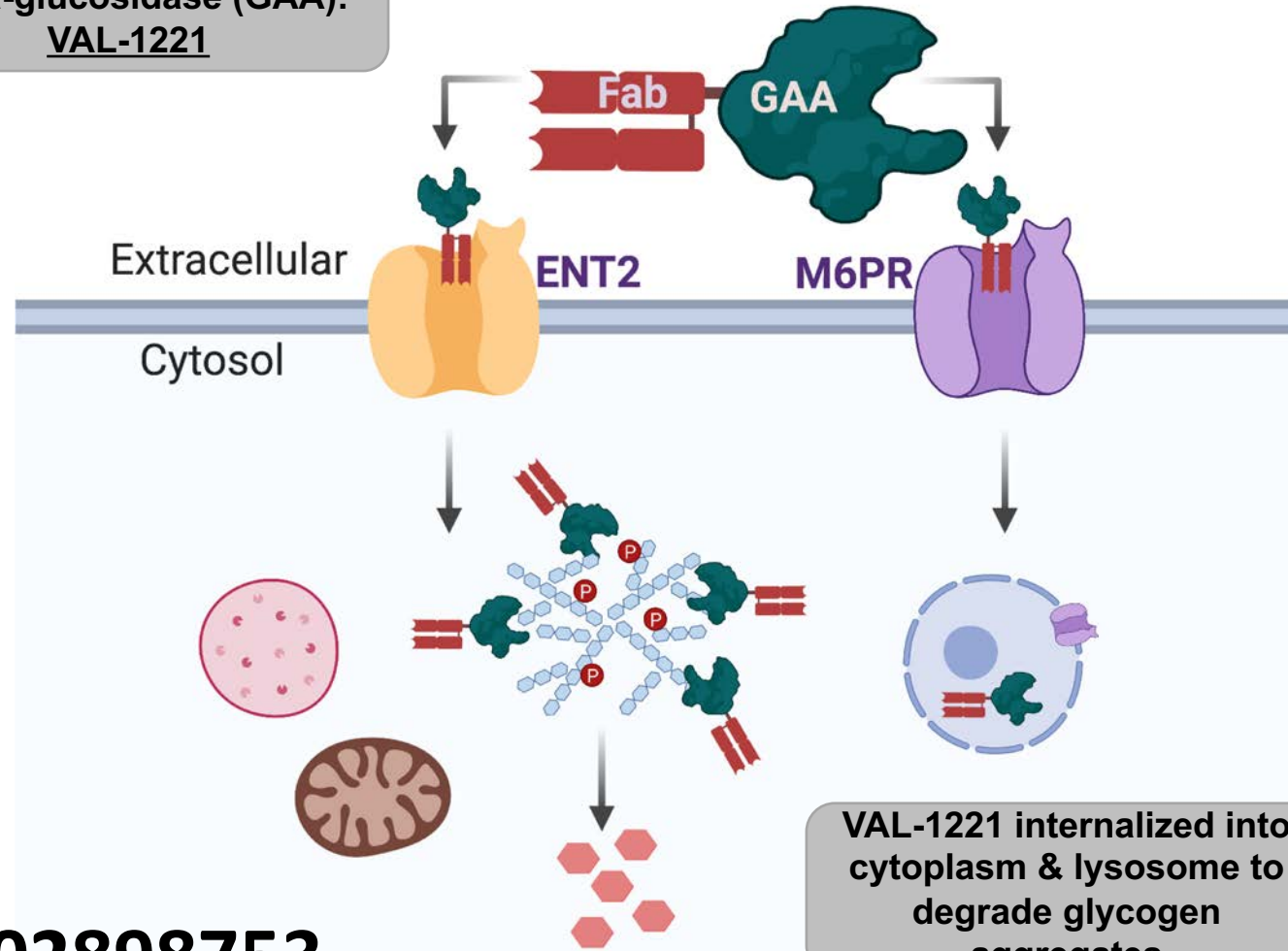
Lafora
Epilepsy
Cure
Initiative



National Institute of
Neurological Disorders
and Stroke

VAL-1221 mechanisms of cellular entry

Fab fragment linked to
alpha-glucosidase (GAA):
VAL-1221



Fab recognizes ENT2 &
GAA recognizes M6PR
receptor and is
transported across the
membrane

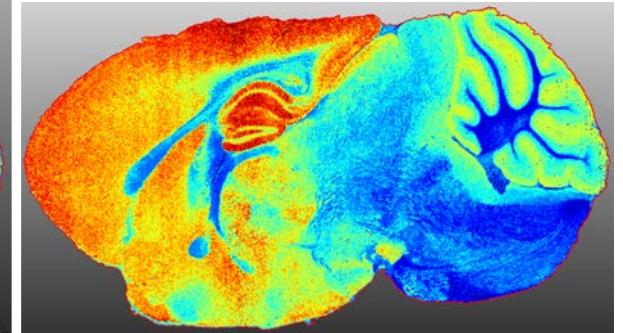
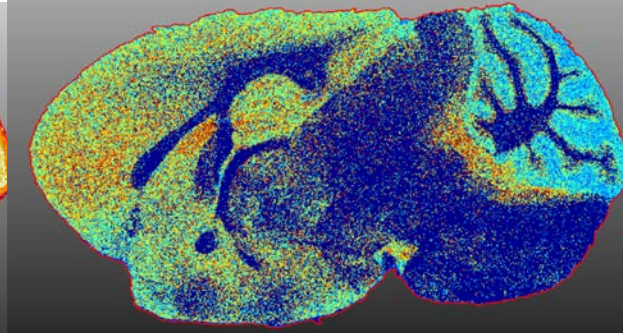
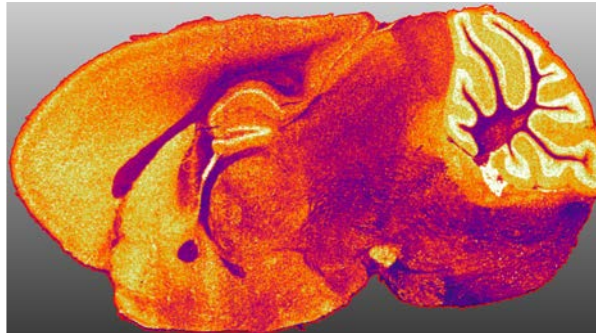
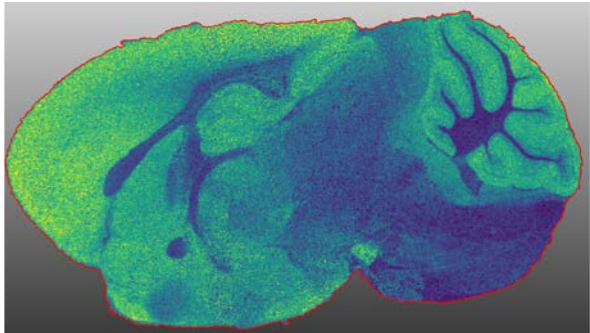
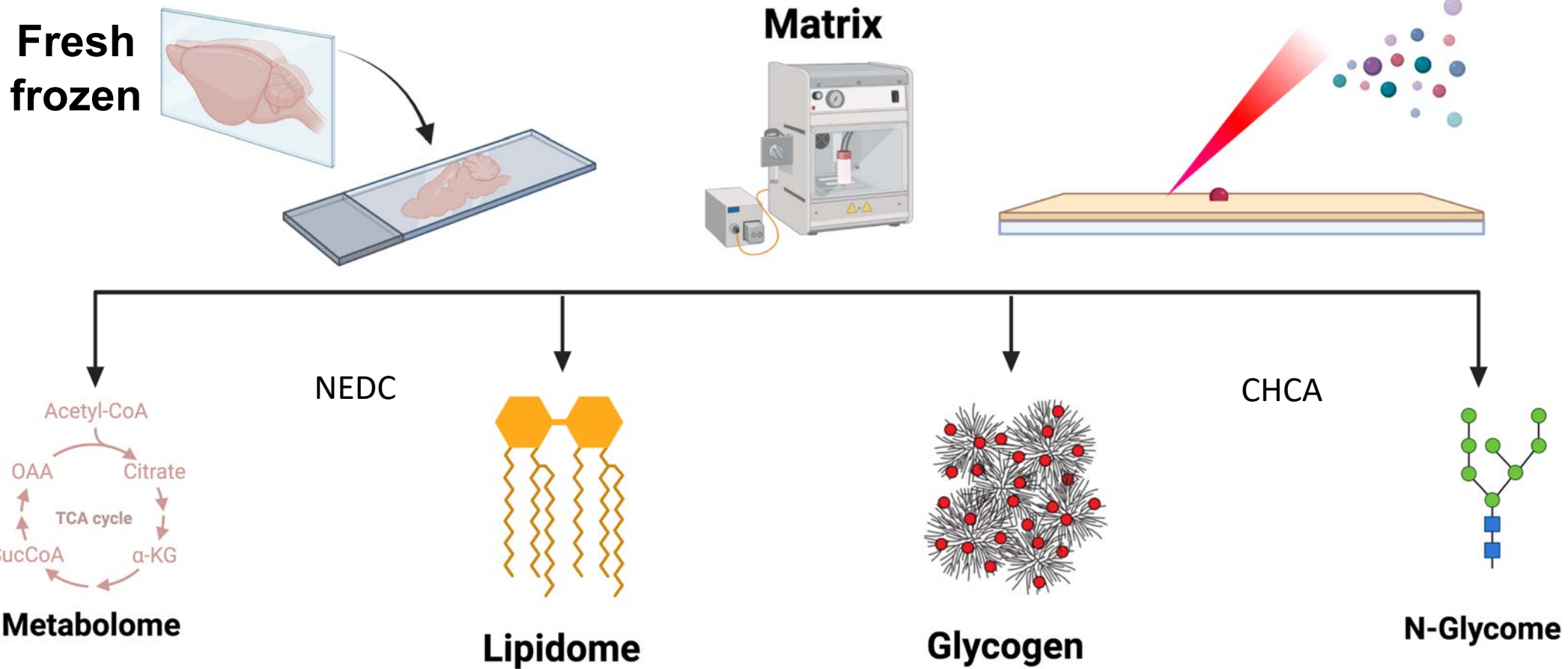
VAL-1221 internalized into
cytoplasm & lysosome to
degrade glycogen
aggregates

Clinical Trial: NCT02898753

Initiated: June 2017

Completed: June 2020

Spatial Metabolomics, Lipidomics, and Glycomics



VAL-1221 and Myozyme – tail vein injection (IV)

Tail vein (IV) injections



6 month old
WT and *Epm2a*^{-/-} mice

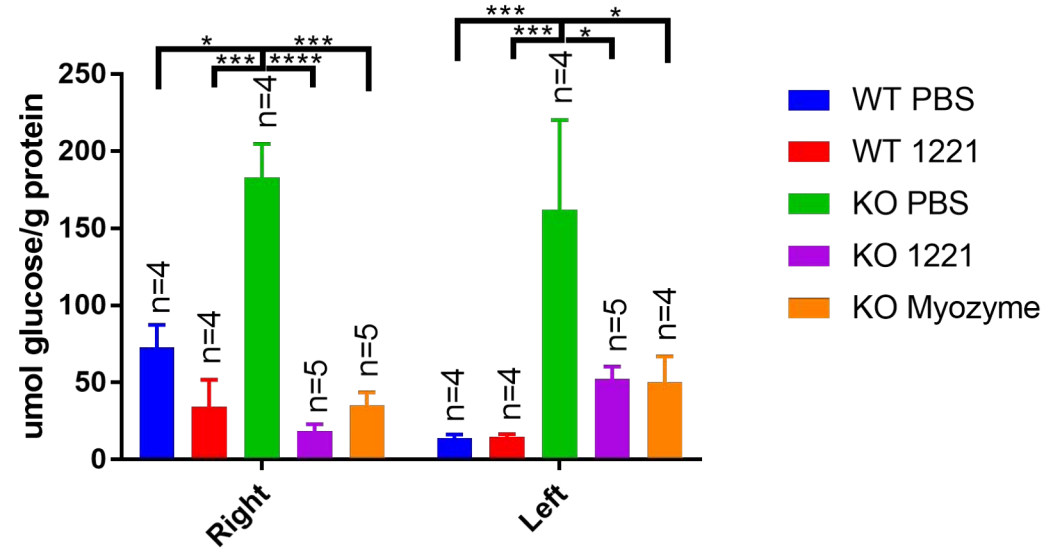
4 injections of PBS,
Myozyme, or VAL-1221
in tail vein over 14 days

Euthanized on 18th day
Multiple tissues
collected

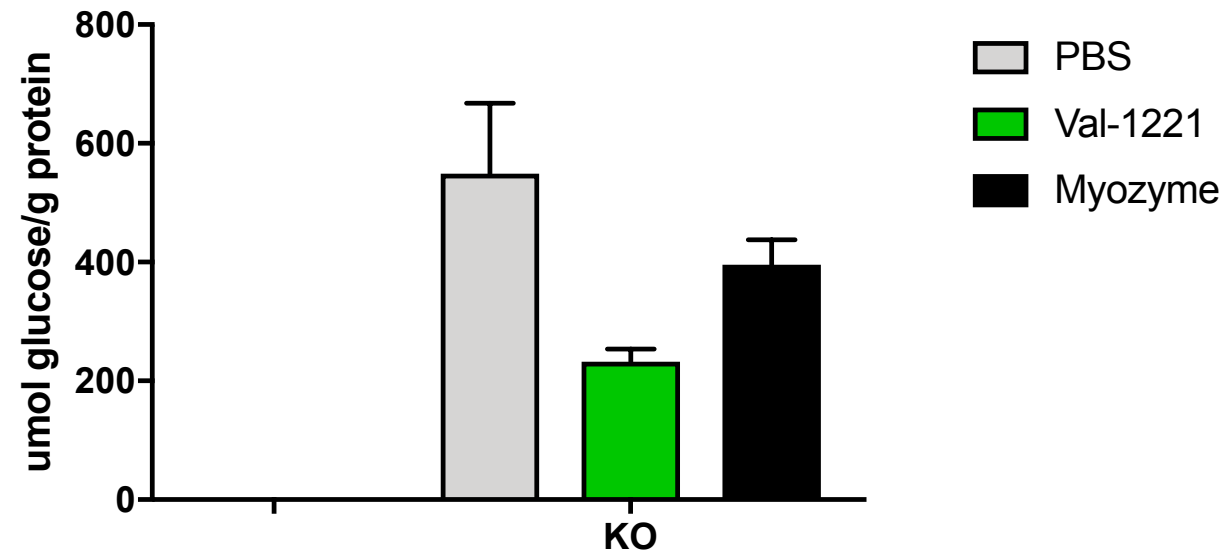
Polysaccharide
content
determined

PAS staining

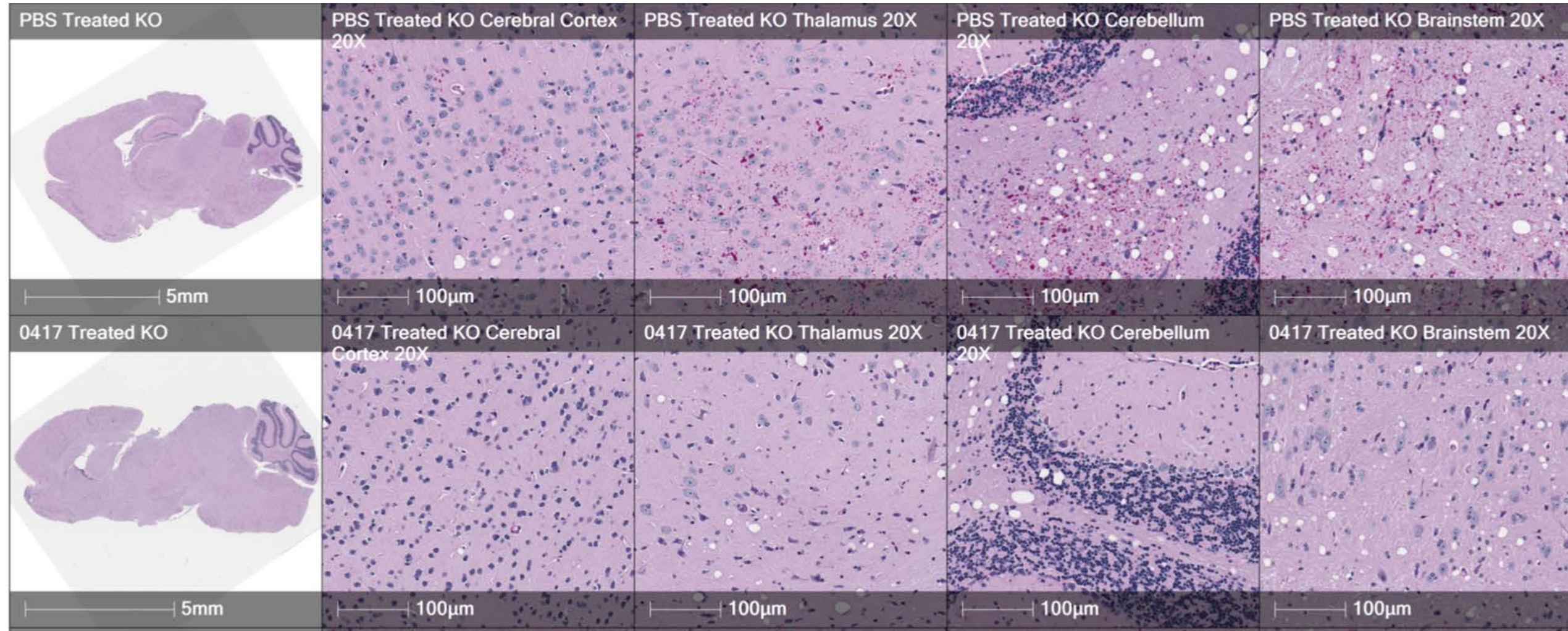
Left and Right Quad Averages



RDR13 TVI heart glucose 180514

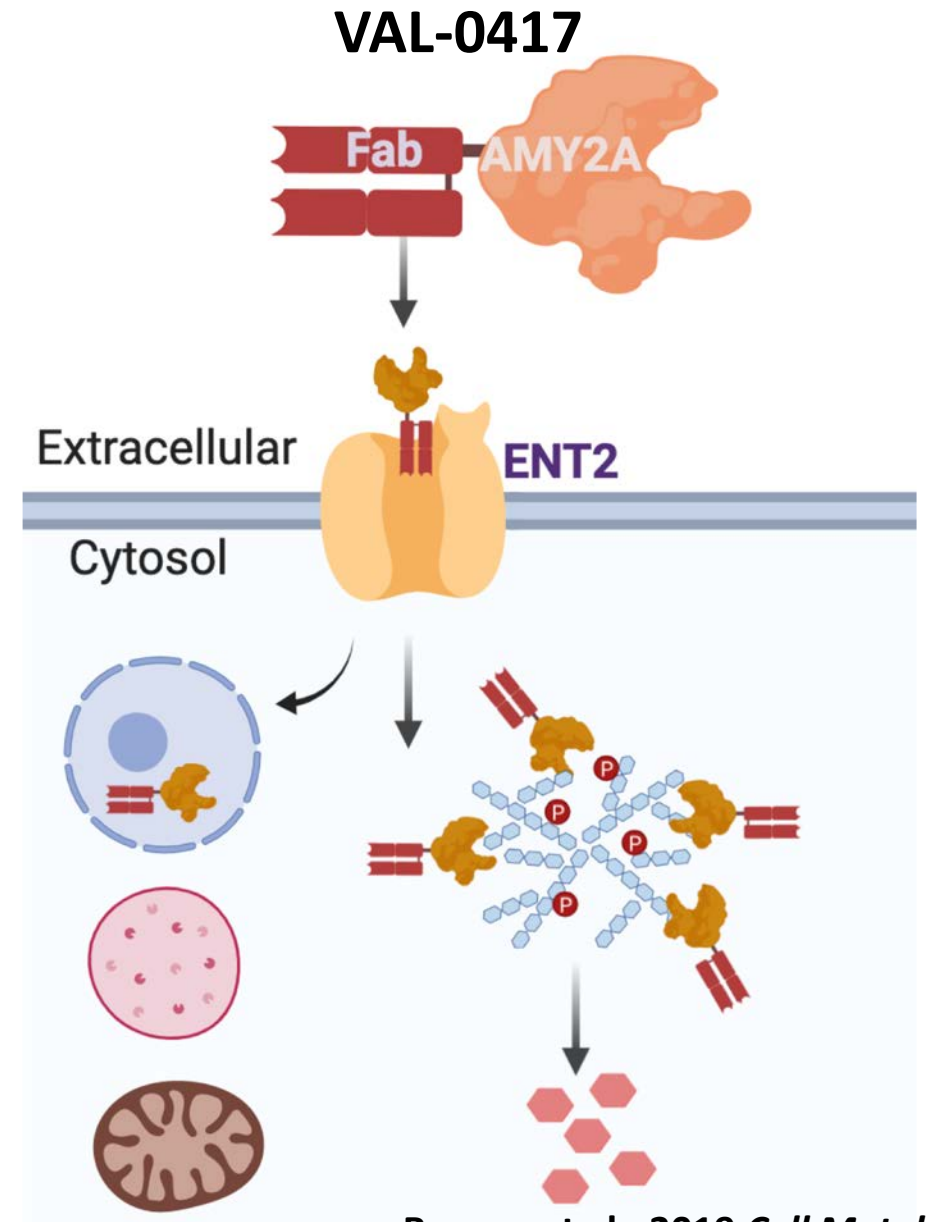
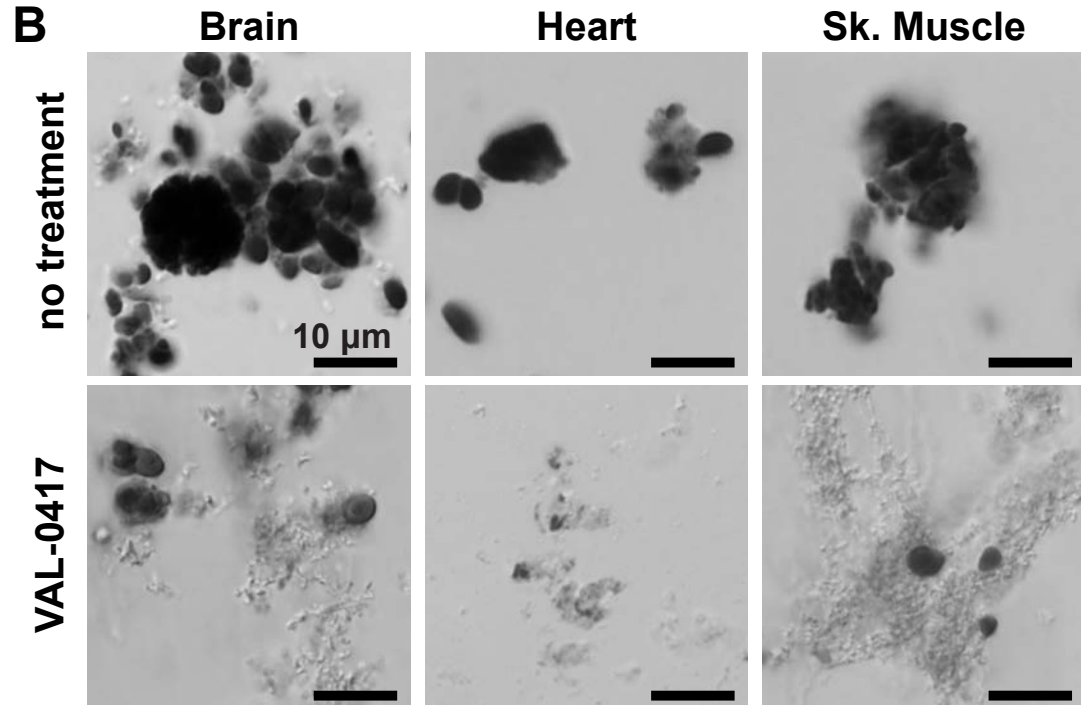
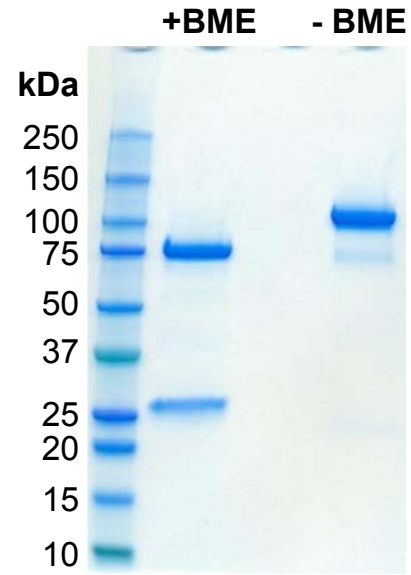
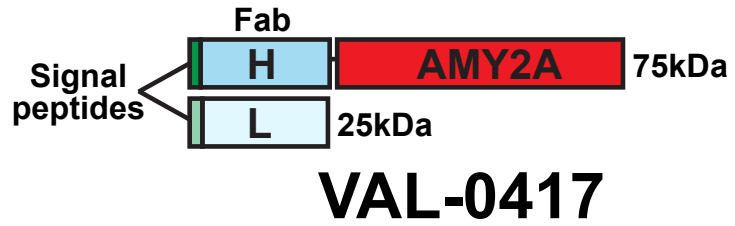


VAL-0417 ICV administration ablates brain LBs *in vivo*



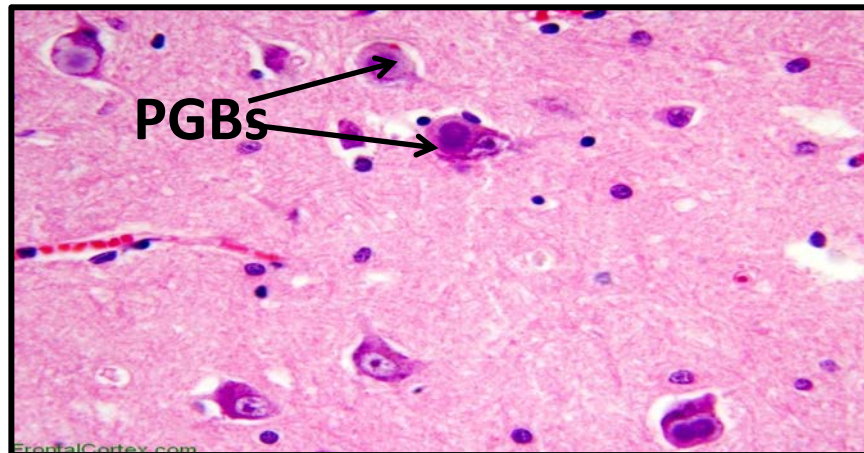
Antibody-enzyme fusion (AEF) VAL-0417 degrades LBs

hFab + pancreatic amylase (AM2A)

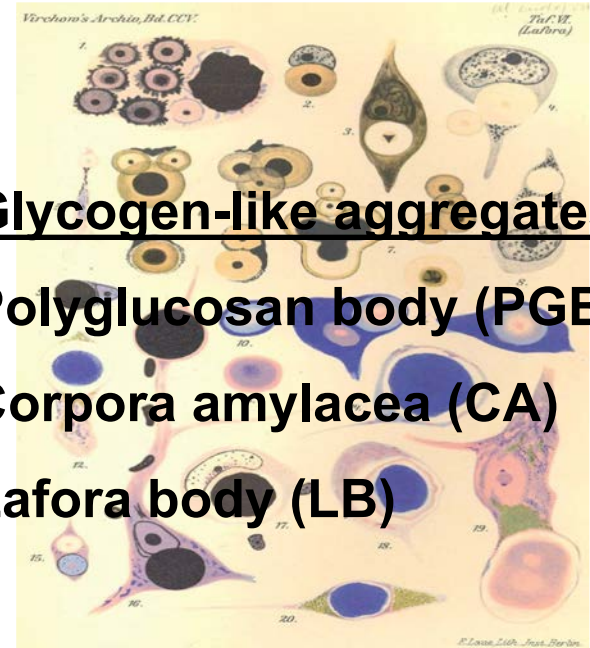


Lafora Disease (LD) – Childhood Dementia

- LD was first described >100 years ago by Gonzalo Rodríguez Lafora
- fatal, autosomal recessive disorder – childhood dementia with horrendous epileptic episodes
- glucan/carbohydrate inclusions found in cytoplasm of cells from most tissues, (polyglucosan bodies, PGBs); glycogen storage disease (GSD)



Minassian, *Pediatr. Neurol.*, 2001



Glycogen-like aggregates:

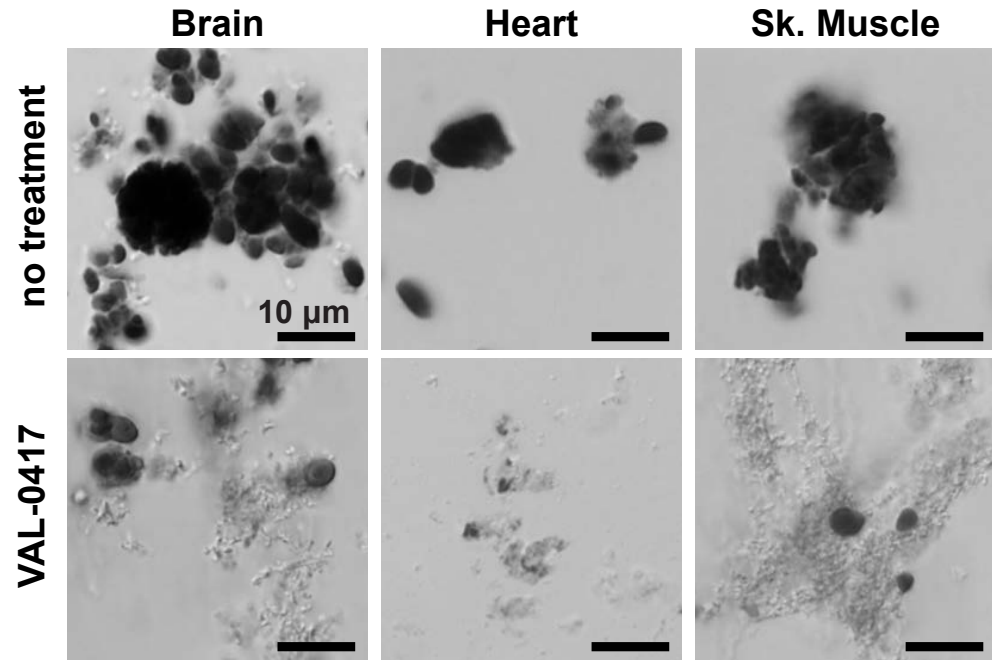
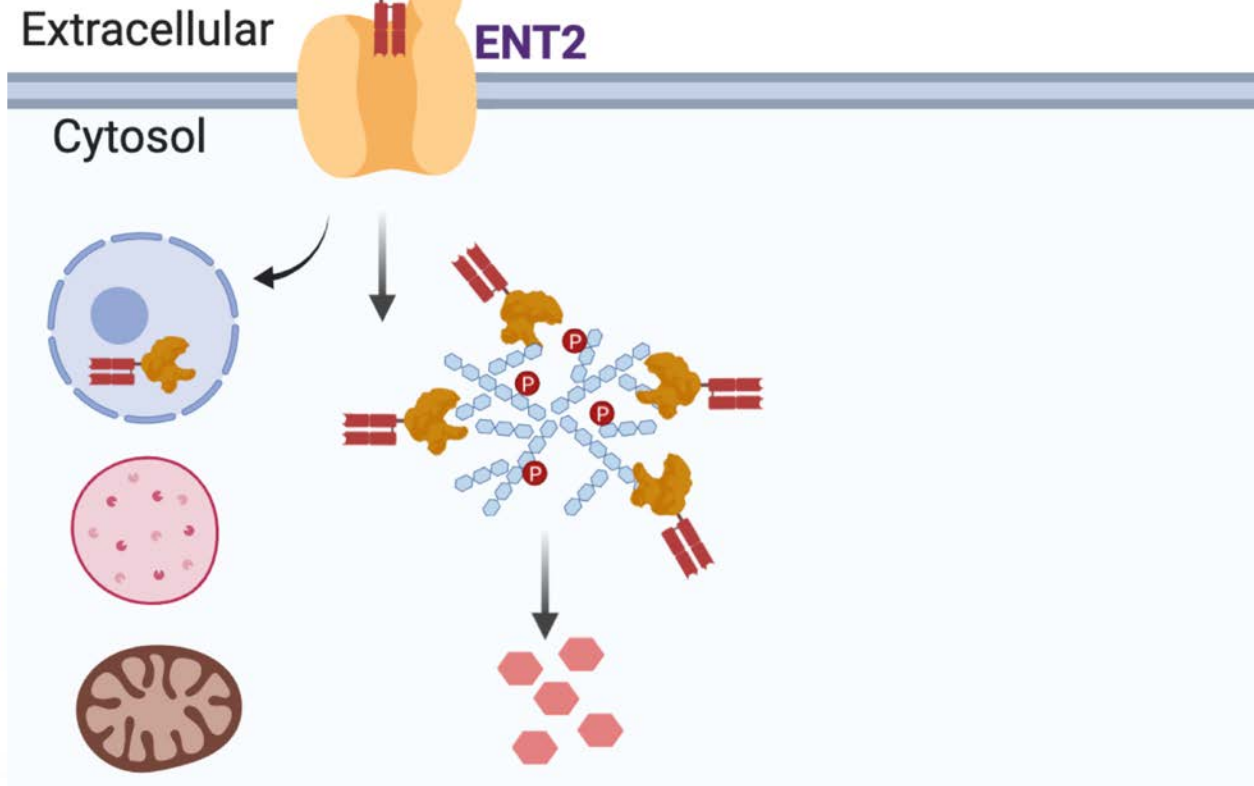
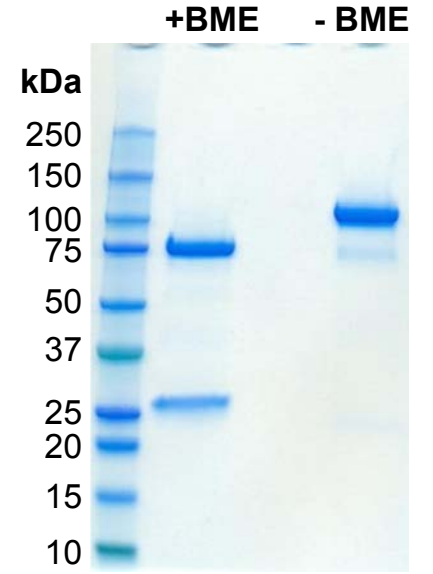
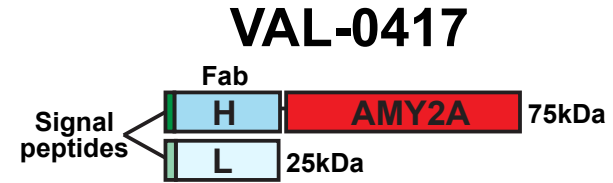
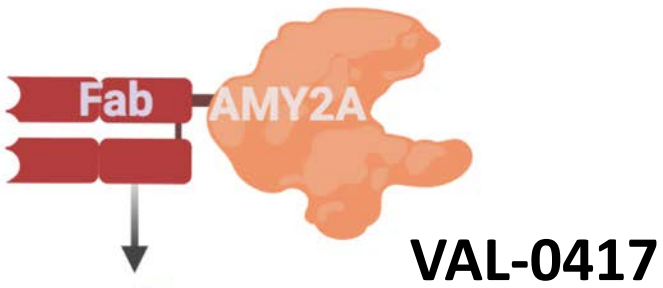
Polyglucosan body (PGB)

Corpora amylacea (CA)

Lafora body (LB)

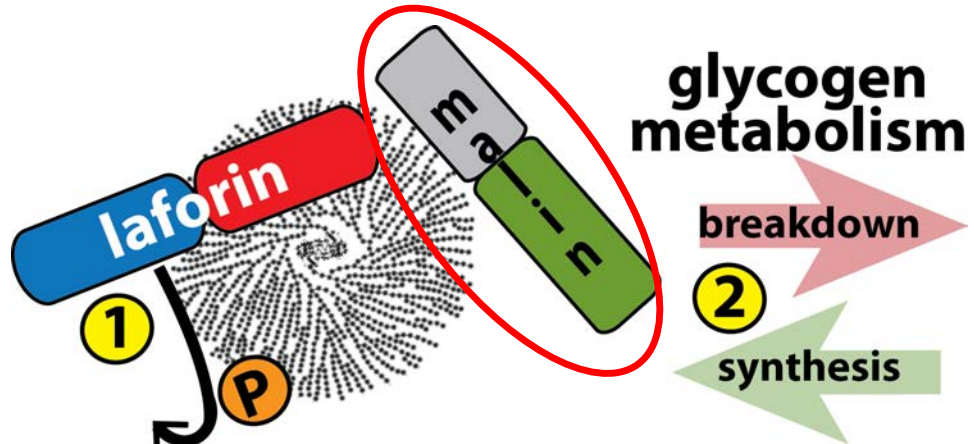
Lafora, *Virchows Arch Pathol Anat.*, 1911

Antibody-mediated drug fusion (A₁F₁) platform



Weisbart et al., 1990 *J Immunology*
 Hansen et al., 2007 *JBC*
 Hansen et al., 2012 *Sci Trans Med*
 Yi et al., 2016 *Human Mol Gen*

Glycogen Architecture – Laforin & Malin



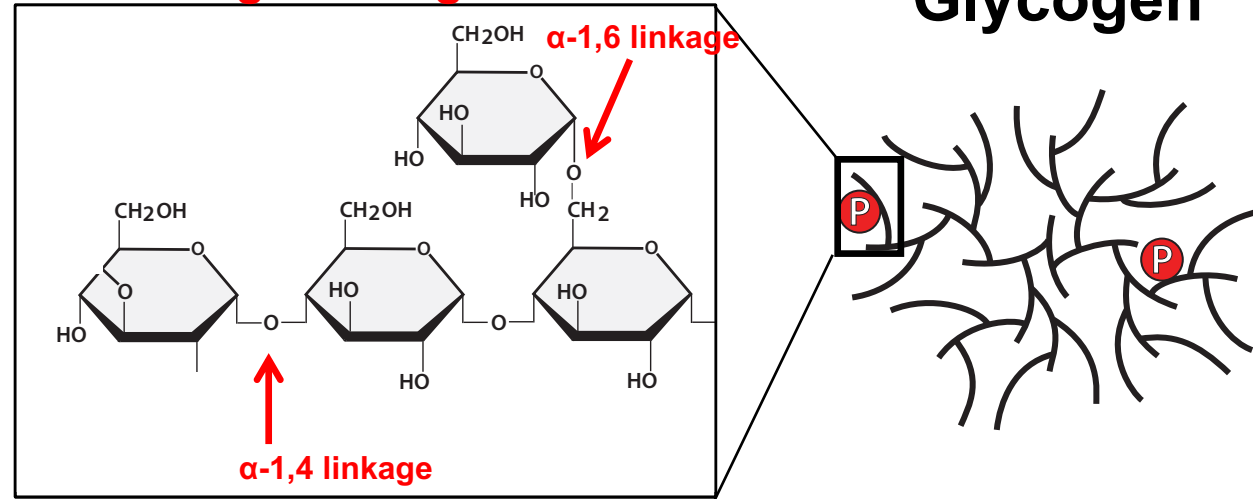
mutations

Aberrant Glycogen Metabolism

Polyglucosan body (PGB) formation

Chain length: ~13 glucose molecules

Glycogen



1. Degree of branching
2. Chain length distribution
3. Phosphate content (G2P, G3P and G6P)

Contents lists available at ScienceDirect

Carbohydrate Polymers

journal homepage: www.elsevier.com/locate/carbpol

ELSEVIER

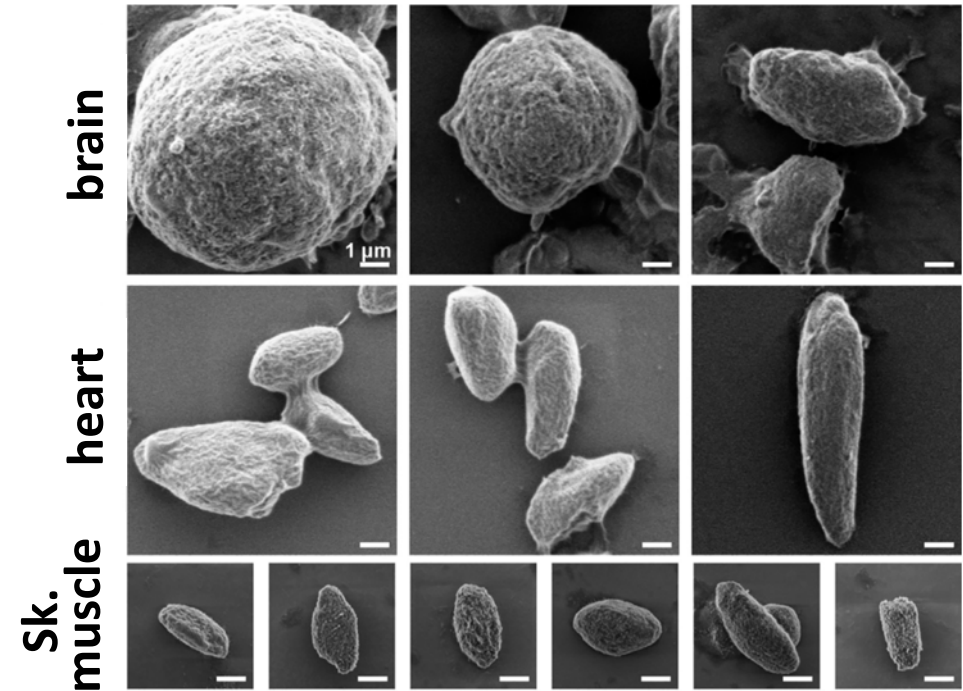
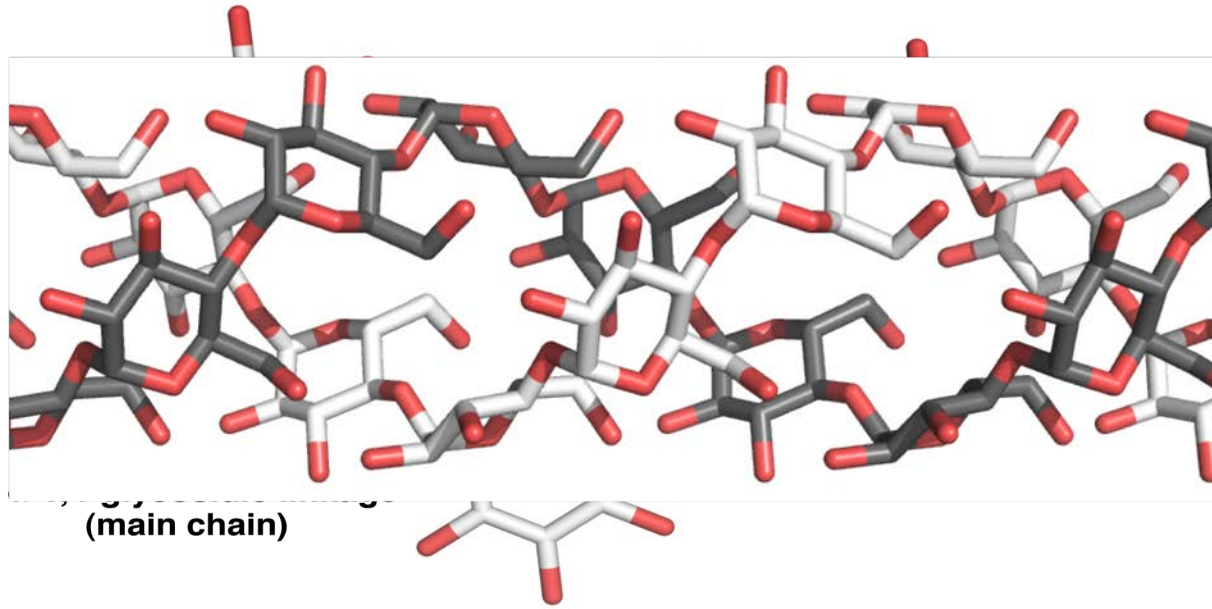
Carbohydrate Polymers

Accurate and sensitive quantitation of glucose and glucose phosphates derived from storage carbohydrates by mass spectrometry



Young et al., 2020
Carb Polymers

Purification of native Lafora bodies (LBs)



Brain

Heart

Skeletal Muscle

