RGLS4326 confers efficacy and modulate aberrant signaling and metabolic pathways in PKD mouse models



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Abstract

Background:

Autosomal dominant polycystic kidney disease (ADPKD) is caused by mutations in either PKD1 or PKD2 genes, where expansion of fluid-filled cysts and renal fibrosis often leads to end-stage renal disease. MicroRNAs are short non-coding RNAs that modulate several biological processes. We have previously shown that aberrant expression of miR-17 family of microRNAs is involved in human ADPKD pathogenesis. RGLS4326 is a chemically-modified oligonucleotide designed to sterically inhibit miR-17 functions and has been shown to reduce cyst growth in vitro and in vivo. The goal of this study was to determine the signaling pathways modulated by RGLS4326 treatment in PKD mouse models

Methods:

RGLS4326 is efficacious in the Pkd2KO and Pcy/CD-1 mouse models of PKD. We performed RNA sequencing and metabolite profiling using kidney samples from both mouse models following RGLS4326 treatment. Ingenuity Pathway Analysis was used to provide novel insights into signaling pathways modulated by RGLS4326 treatment

Results:

Through RNA sequencing, we identified >1000 differentially expressed genes in the PKD kidney samples compared to their age- and strain-matched normal controls. Comparative pathway analysis identified several dysregulated signaling pathways in the two PKD mouse models, including the Pparα, WNT/ βcatenin and PCP signaling, that were in turn modulated following RGLS4326 treatment. Next, we performed kidney global metabolite profiling comparing Pkd2KO and normal kidneys, and identified several biochemical alterations in the *Pkd2KO* model, including substantial changes in lipid metabolism. In particular, decrease in β-fatty acid oxidation pathway was observed in the *Pkd2KO* kidneys, which corroborates with previously observed Pparα-dysregulation in PKD mouse models

Conclusion: Our results indicate that RGLS4326 confers efficacy and modulates aberrant PKD signaling and metabolic pathways. These results support the clinical development of RGLS4326 for the treatment of ADPKD



(A) Decrease in Kidney-Weight-to-Body-Weight (KW/BW) in the Pkd2KO efficacy model by subcutaneous administration of RGLS4326 at 20 mg/kg on days P11, P12 and P13 and P19; Kidneys were collected at P28. (B) Reduction in proliferation after RGLS4326 treatment as shown by phosphohistone3 staining in the Pkd2KO model. (C) Decrease in KW/BW in the Pcy/CD-1 efficacy model following Q4W dose of RGLS4326 at 25 mg/kg from 5 to 30 weeks of age. (D) Reduction of cyst index after RGLS4326 treatment in the Pcy/CD-1 efficacy model





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