

Tytgat Institute for Intestinal and Liver Research

Patient participation in rare liver disease research

Stan van de Graaf | Sept 5th 2022





Patient participation in my research

- Example of 2 events I co-organized; rationale and lessons
- Joint publication (opinion)
- Influence on current research focus
- Remarkable difference between pediatric/adult primary endpoints in trials with cholestatic liver diseases



Tytgat Institute for Liver and Intestinal Research

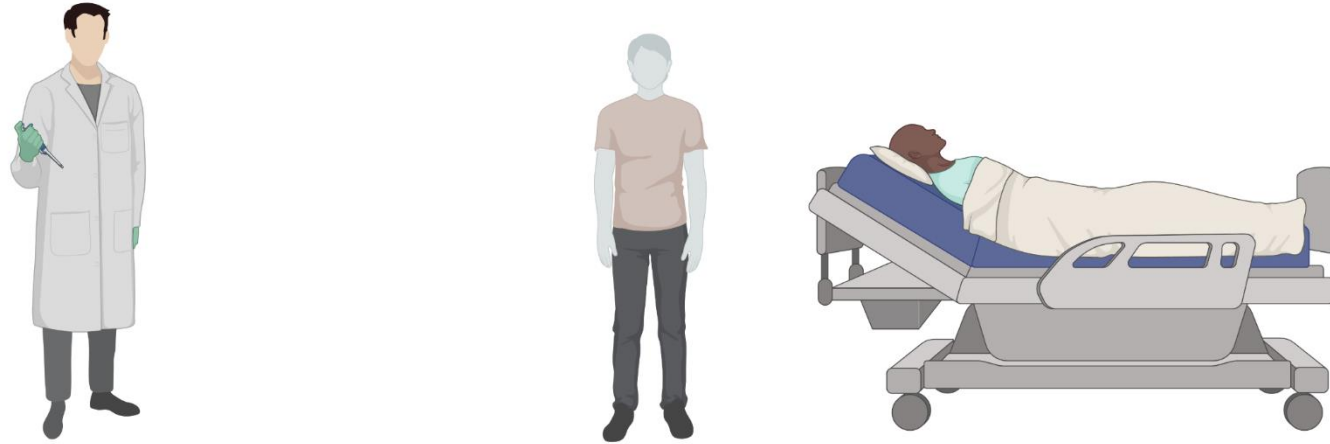
~70 researchers. Pre-clinical/translational research:

Liver: common metabolic diseases + genetic/auto-immune

- What underlies (rare) liver diseases where bile flow is disturbed?
- How is bile flow regulated in health?
- Which molecular targets for therapy?
- Mechanisms underlying drug-side effects?



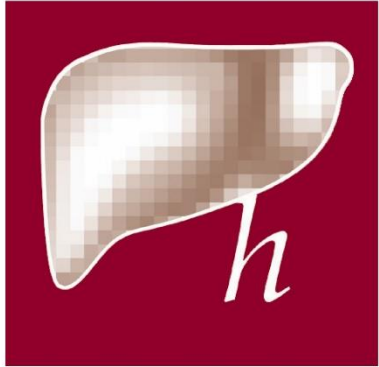
Patient participation in pre-clinical research



- *2016: Marleen Katee (PSCPE), Anneke Mels (MLDS), Jose Willemssen (NLV), and me sat together AND...*
- *The MLDS (Dutch Digestive Disease Foundation) planned to celebrate their 35th anniversary*
- **> Let's organize an event where patients with a rare liver disease and researchers (lab/clinic) meet.**



Joint effort



**Nederlandse
Vereniging voor
Hepato**logie





Aims



1. To introduce researchers to patients and to develop a greater understanding of the patient's needs
2. Introduce patients to researchers in order to understand more about what research entails and what role the patient can play in the design, conduct and implementation of research
3. Creating a group feeling: the patient is not alone, all kinds of parties are involved in the patient's well-being



Program ZLD

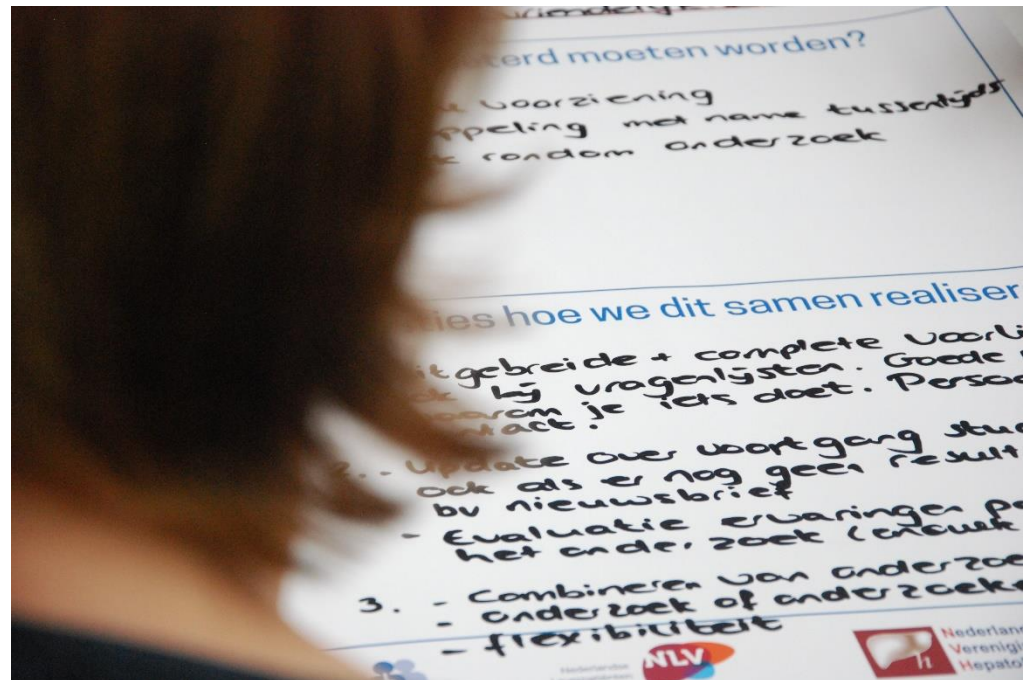
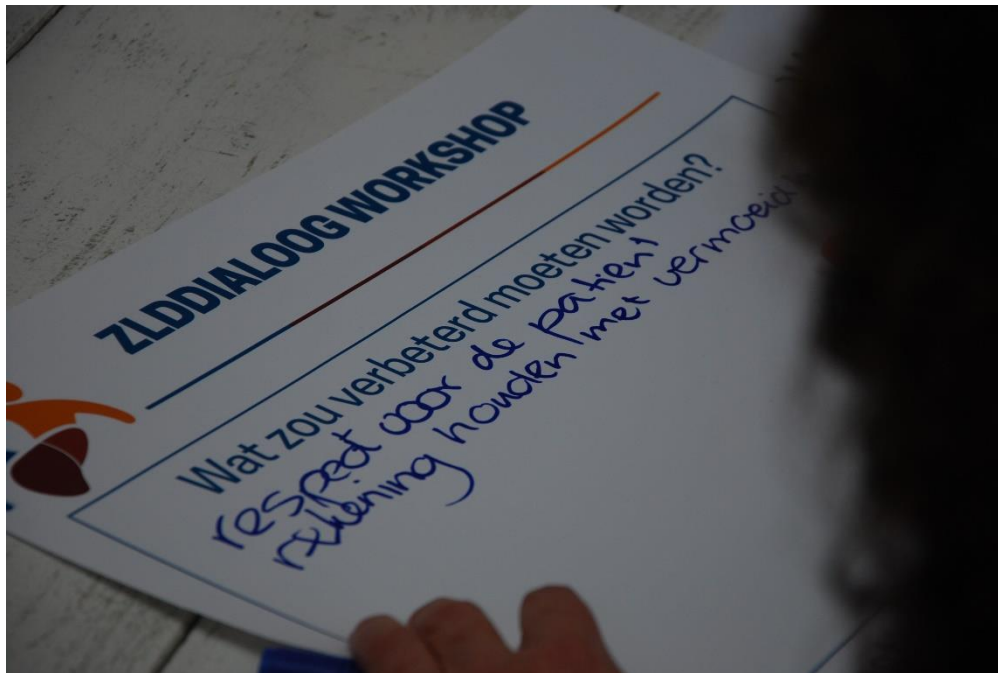
1. Patient in the driver's seat:

- how patients can engage in research
- (participate in trials; advocate specific research focus; role in trial-design; grant proposal jury)
- Tools/training for this
- Best decision making in trial participation

2. Researcher of the 21st century: patient involvement

3. Workshops

4. Posters from young scientists





The next year

Short movies of patient/researcher/clinician





Challenges in organizing patient-research events

1. Funding
2. Reaching the right audience
3. Transport/parking/walking distance
4. Planning/fatigue
5. Receiving/Sending information
6. False hope vs Inspiring future possibilities
7. Privacy (foto's/badges)
8. Follow-up



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Towards joint publication

THE LANCET Gastroenterology & Hepatology

Volume 5 - Issue 11 - November 2020

www.thelancet.com/gastrohep



Articles

NI4: a blood-based biomarker panel for non-invasive diagnosis of NASH and liver fibrosis

See page 970

Articles

Antibiotic use and the development of inflammatory bowel disease

See page 985

Articles

Outcomes following SARS-CoV-2 infection in liver transplant recipients

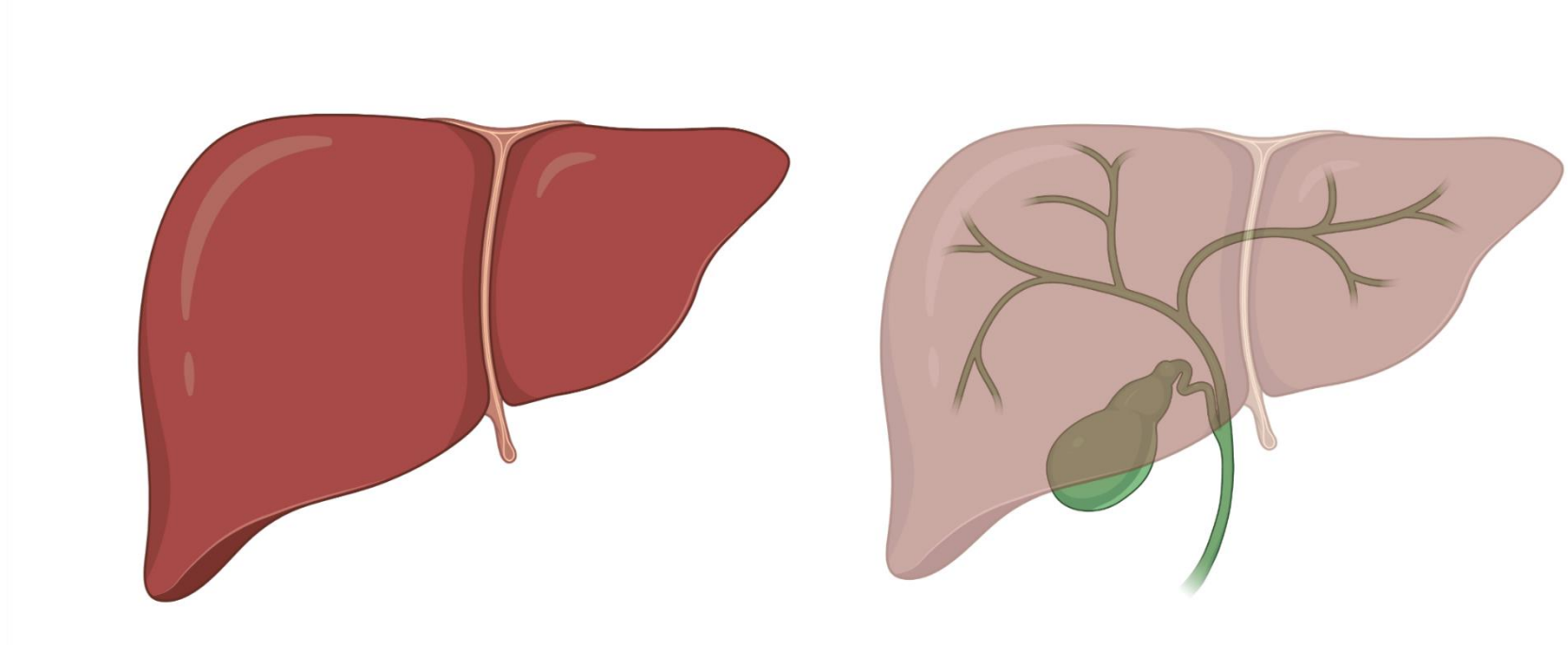
See page 1008

Lancet Gastroenterology & Hepatology 2018
The case for combining treatments for primary sclerosing cholangitis

Reinout L P Roscam Abbing, Larissa M de Lannoy, Stan F J van de Graaf



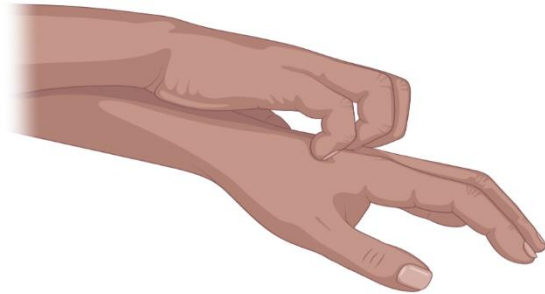
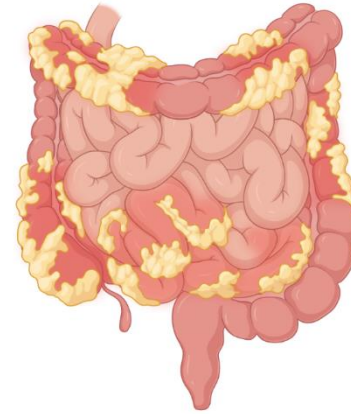
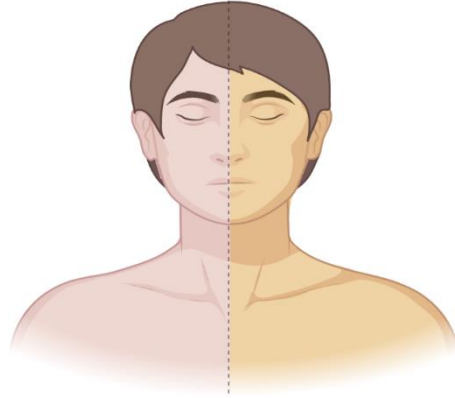
Primary Sclerosing Cholangitis



Blockade > accumulation of toxic bile salts > more damage/fibrosis > blockade



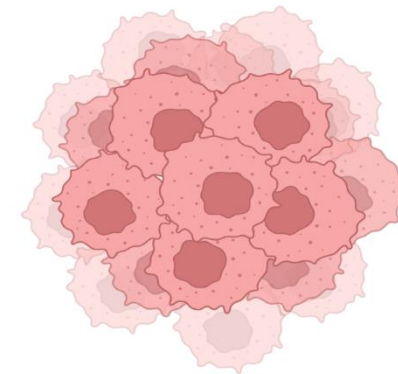
Disease characteristics



Itch



fatigue



Fear: high cancer risk



Two drug classes approved for other cholestatic disorders

A: Drugs that lower bile salt synthesis

B: Drugs that increase excretion of bile salts via feces.
(body responds by increased bile salt synthesis)

Both give improvement in “liver enzymes”

A: increase itch (mechanism unknown)

B: induce diarrhea (bile salts in colon) (but reduced itch)



Accepted joint publication

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The case for **combining treatments**
for primary sclerosing cholangitis

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Lannoy, Stan F J van de Graaf

We now have have experimental evidence supporting this hypothesis

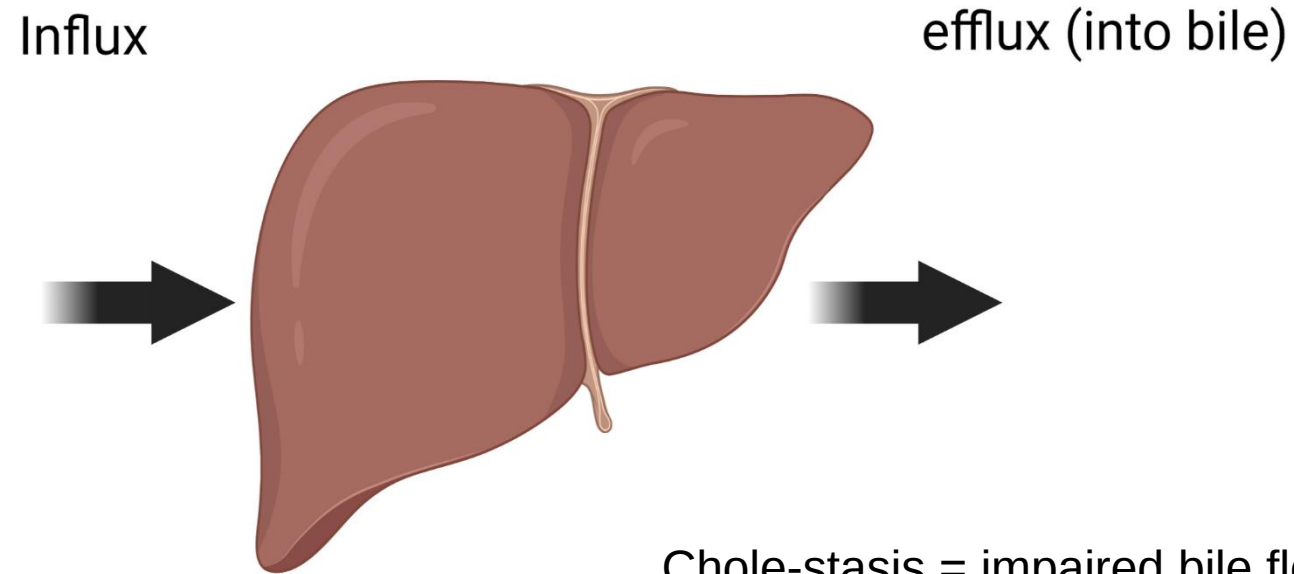


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Second example

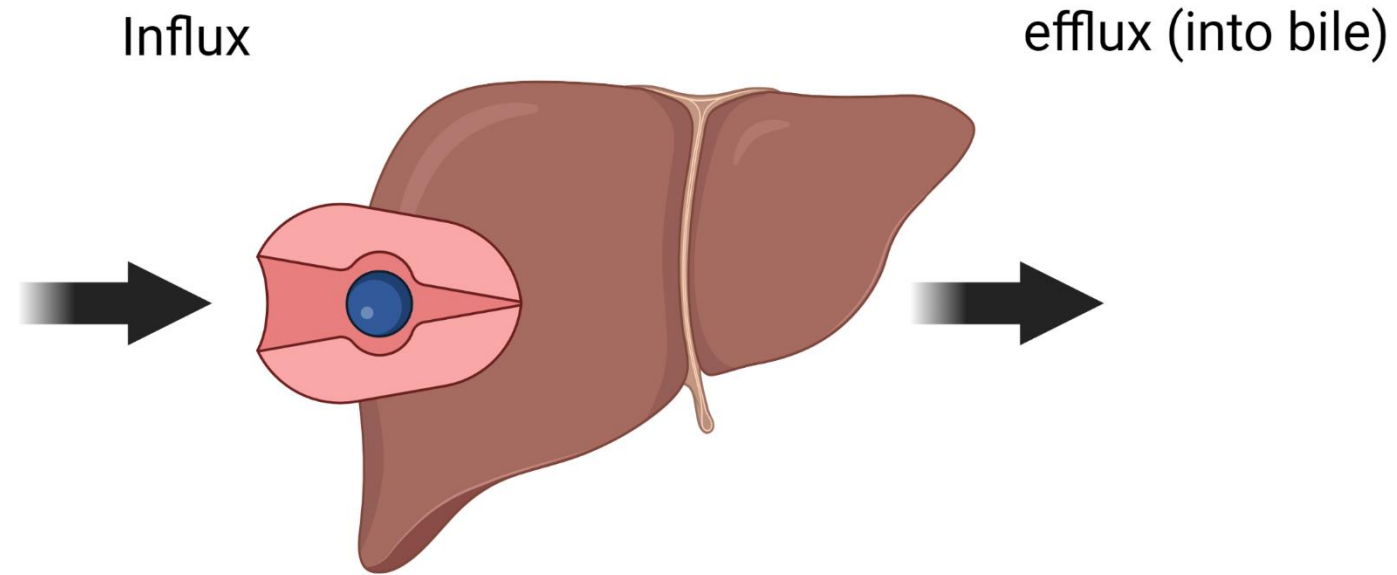


Proposed therapy:
Reduce influx of toxic bile acids

Chole-stasis = impaired bile flow = impaired efflux



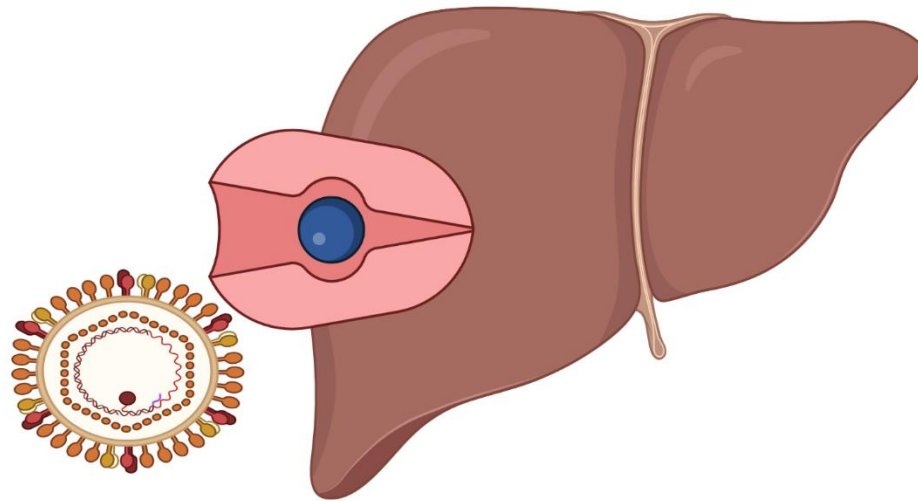
Impaired secretion > try reducing influx



NTCP: Na⁺ Taurocholate Cotransporting polypeptide



NTCP is also the docking receptor for the hepatitis B virus



Bulevirtide: anti- HBV/HDV drug EMA conditional market approval in 2020
Inhibits also hepatic bile acid uptake via NTCP
Requires daily injection....



NTCP inhibitor for PSC?

1: Pre-clinical support for efficacy / safety in cholestatic models

HEPATOLOGY



HEPATOLOGY, VOL. 68, NO. 3, 2018

Na⁺-Taurocholate Cotransporting Polypeptide Inhibition Has Hepatoprotective Effects in Cholestasis in Mice

Davor Slijepcevic,^{1*} Reinout L.P. Roscam Abbing,^{1*} Claudia D. Fuchs,² Lizette C.M. Haazen,¹ Ulrich Beuers,¹ Michael Trauner,²
Ronald P.J. Oude Elferink,¹ and Stan F.J. van de Graaf¹

2: Orally available small molecule NTCP inhibitor (in collab)



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Patient reported outcomes in trials

Pediatric cholestasis

Odevixibat (Bylvay; by Albireo) or Maralixibat (Livmarli by Mirium); : inhibits intestinal bile acid uptake:

Primary endpoint:

the proportion of patients with at least a 70% reduction in fasting serum bile acid levels or who achieved a level ≤ 70 $\mu\text{mol/L}$ at week XX.

Secondary endpoints:

- Alanine aminotransferase (ALT) and bilirubin (total and direct) change from Baseline
- [Pruritus](#) as measured by ItchRO (Observer ItchRO/patient ItchRO) change from Baseline



Acknowledgements

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Reinout Roscam Abbing



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Disclaimers:
Pending Consultancy agreement with Albireo
Collab with CD3 aims to license our lead compound