

Parkinson's Disease

"What's new in Studies and Treatment"

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- Parkinson's disease (PD) is the second most common age-related neurodegenerative disorder worldwide, with an average onset of 60 years old.
- The clinical features historically associated with PD are tremor, rigidity, bradykinesia, gait, and postural impairment.







While the etiology of PD is not well understood, several factors, including gene dysfunctions, mutations, and environment, appear to play a role.



• Stem cells are cells with the potential to develop into many different types of cells in the body, including the heart, brain, spinal cord, and more.

Muscle

cells

Liver cells

5

Cardiac

cells

- Stem cells serve as the body's repair ٠ system. There are two main types of stem cells: embryonic stem cells and adult stem cells. Stem cells Embryonic stem cells Transform Replicate early stage embryo Nerve cells Adult blood stem cells bone Blood cells marrow Intestinal cells Different types of blood cells
- In the lab, by studying patients' stem cells, we can see how those cells become damaged at the molecular and cellular level and cause diseases like Parkinson's.







iPSCs





- In the brain, glia accounts for over 50% of the cells and can be divided into various subtypes, of which astrocytes are the most populous.
- While dopaminergic neurodegeneration in the basal ganglia is the main feature of PD, other neural cell types, including astrocytes, have been shown to play a role in PD development.
- Among their many functions, astrocytes mediate the brain's immune response.

- Several studies have determined that gene mutations (LRRK2, GBA, and SNCA) associated with the development of Parkinson's play important roles in astrocyte function.
- Our research has shown that changes in astrocytes are associated with neuron degeneration.
- Thus, studying the functional role of astrocytes is important for understanding the full spectrum of PD pathogenesis and developing novel therapeutic strategies to treat PD.





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• Levodopa treatment does not ameliorate <u>all</u> motor symptoms associated with PD (Sethi, K.,2008)

Personalized Stem Cell Therapy for Parkinson's Disease

- While it isn't yet widely available or part of the standard of care, Stem cell treatment is a promising experimental therapy strategy for persons with PD.
- Stem cell therapy aims to replace damaged or dying neurons, thus stopping the progression of the disease. However, these benefits remain theoretical as the therapy is in the early stages of research and clinical trials.



List of clinical trials using fetal tissue or pluripotent stem cell-derived mDA cells

| Cell source | Title | Country | Sponsor | Cell numbers | Immune matching | Phase | Status (number of participants) | Trial start | Clinical trial ID | Reference |
|--------------------------------------|--|---------|---|--|---|------------------------------|---|---------------------------------|---|---|
| hiPSCs or autologous NSCs | \$ | | | | | | | | | |
| Autologous hiPSC-derived mDAPs | Transplantation of autologous midbrain dopaminergic neuron precursors derived from a Parkinson's disease patient's induced pluripotent stem cells | USA | Harvard University | 4 M per side | Autologous | N/A | Completed (1) | 2017 | IND17145 | Schweitzer et al. [85], 2020 |
| Allogeneic hiPSC-derived mDAPs | Kyoto trial to evaluate the safety and efficacy of iPSC-derived dopaminergic progenitors in the treatment of Parkinson's disease | Japan | Kyoto University Hospital | 2.4–5.4 M per side | Allogeneic, HLA-matched and non-matched | Phase I/II | No longer recruiting (7) | 2018 | UMIN000033564 | Takahashi [<u>94</u>], 2020 |
| Allogeneic hiPSC-derived mDAPs | Kyoto trial to evaluate the safety and efficacy of | Japan | Kyoto University Hospital | 2.4–5.4 M cells per side | Allogeneic, HLA-matched and non-matched | Phase III | No longer recruiting (7) | 2018 | UMIN000033565 | Takahashi [<u>94</u>], 2020 |
| Allogeneic hiPSC-derived mDAPs | Kyoto trial to evaluate the safety and efficacy of Tacrolimus in the iPSC-based therapy for Parkinson's disease | Japan | Kyoto University Hospital Cha Y, Park T Moy Disord 2 | 2.4–5.4 M cells per side Y, Lebland | Allogeneic, HLA-matched and non-matched c P, Kim KS. 6(1):22-41 | Phase III ed Curren | No longer recruiting (nt Status and 14802/imd | 2018 7) d Future 22141 | UMIN0000335 Perspectives of Epub 2023 Jan | 165 Takahashi [94 2020 on Stem Cell-1 12 PMID: 3 |

CONCLUSION

- Parkinson's disease is the second most common age-related neurodegenerative disorder worldwide.
- Symptoms' onset can be primarily attributed to the death of DA-producing neurons in the substantia nigra compacta.
- Cells, like astrocytes, have been shown to play a role in PD etiology.
- Although it is the standard of care, Levodopa treatment does not alleviate <u>all</u> motor symptoms associated with PD.
- Stem cell treatment is a promising experimental therapy strategy for persons with PD.
- Like Levadopa/Carbadopa, stem cell treatment will not have any disease-modifying effect, but it aims to improve most if not all, PD-specific motor impairment.

