

Global Genes™

Allies in Rare Disease

Understanding Gene Therapy

April 26, 2016



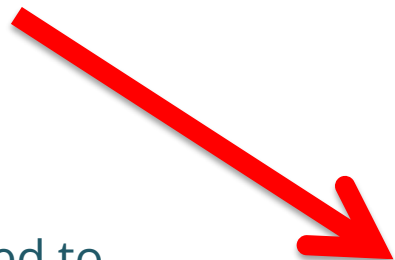
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Meet Today's Panelists:

Panelists:



Karen Kozarsky, Ph.D

President, Vector
BioPartners



Michelle Berg

Vice President, Patient Advocacy,
Abeona Therapeutics



Alison Rockett Frase

President and Founder
Joshua Frase Foundation

Moderator:



Daniel Levine

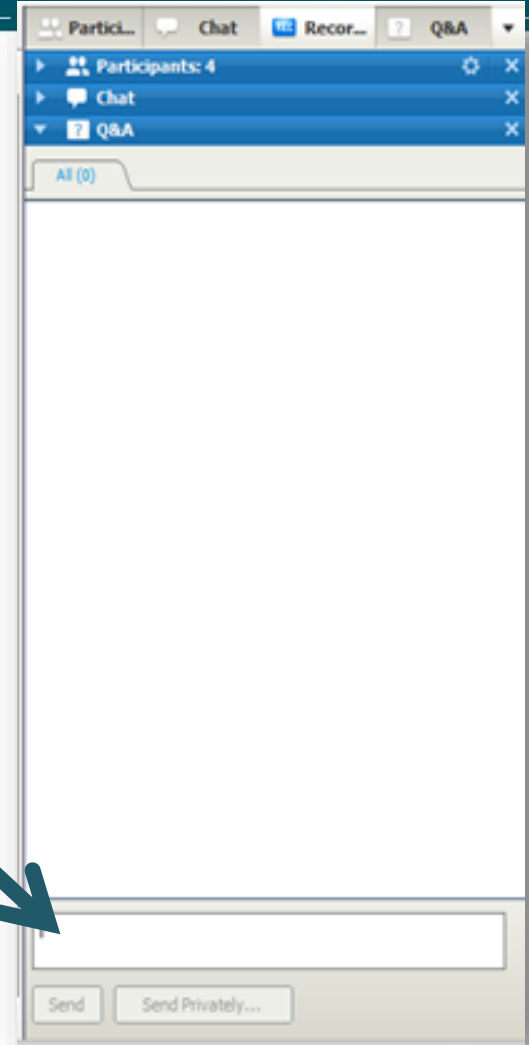
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Karen Kozarsky, Ph.D

President, Vector BioPartners

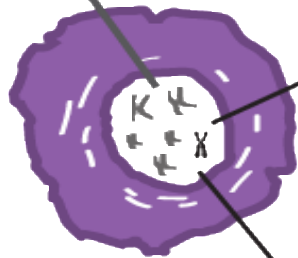
Definitions

- Gene:
 - A segment of DNA found on a chromosome that codes for a particular protein
 - Humans have approximately 100,000 genes that act as a blueprint for making specific enzymes or other proteins for virtually every biomedical reaction and structure in the body

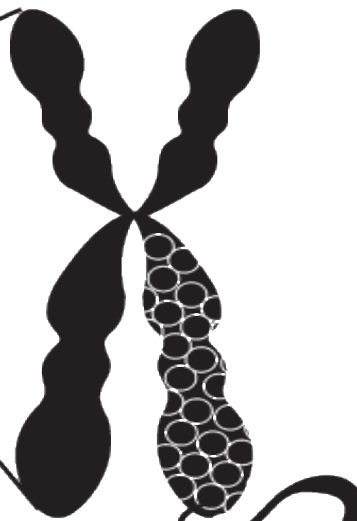


Nucleus

Chromosome



Cell

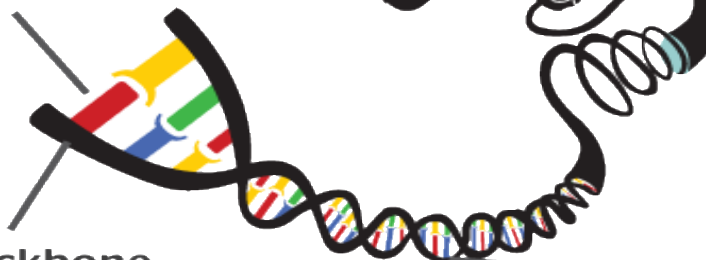


Nucleotides

Coiled DNA molecule

DNA backbone

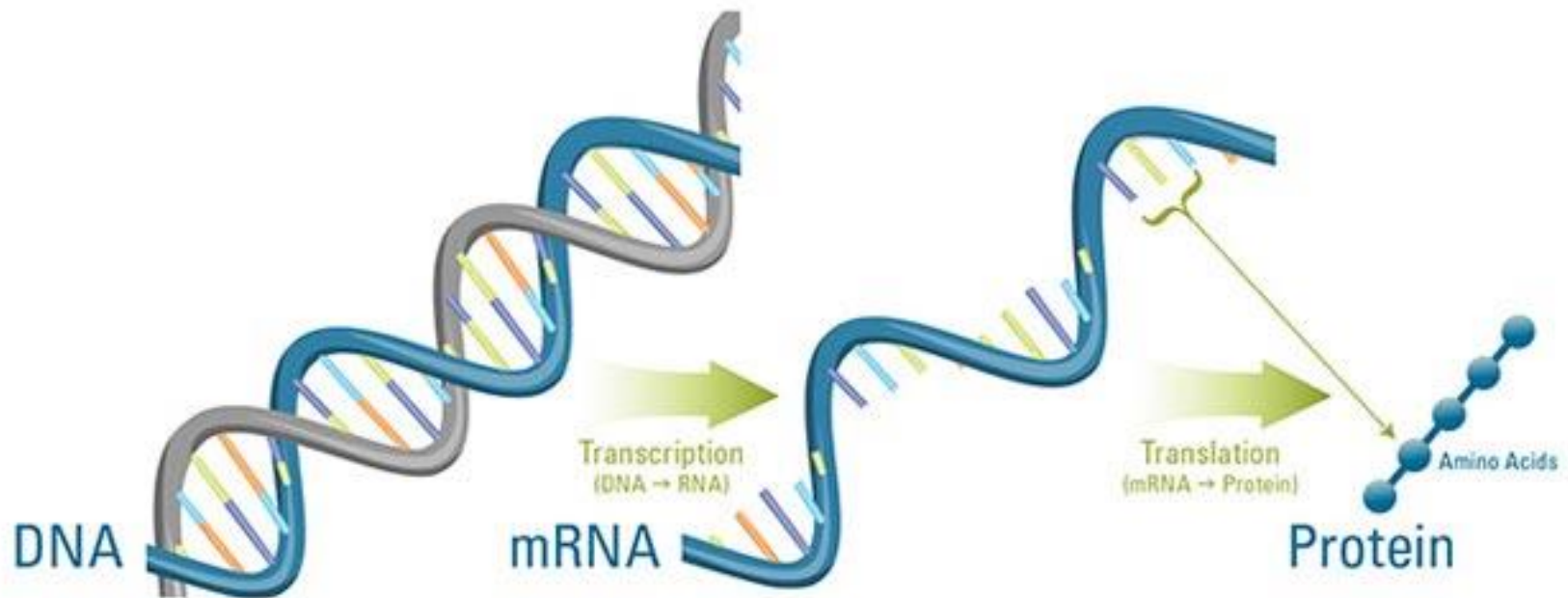
DNA double helix



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Definitions

- Gene Therapy:
 - The treatment of disease by either replacing damaged or abnormal genes with normal ones, or by providing new genetic instructions to help fight disease.
 - Therapeutic genes are transferred into the patient either through a weakened virus, a non-viral vector, or through direct delivery of so-called "naked" DNA



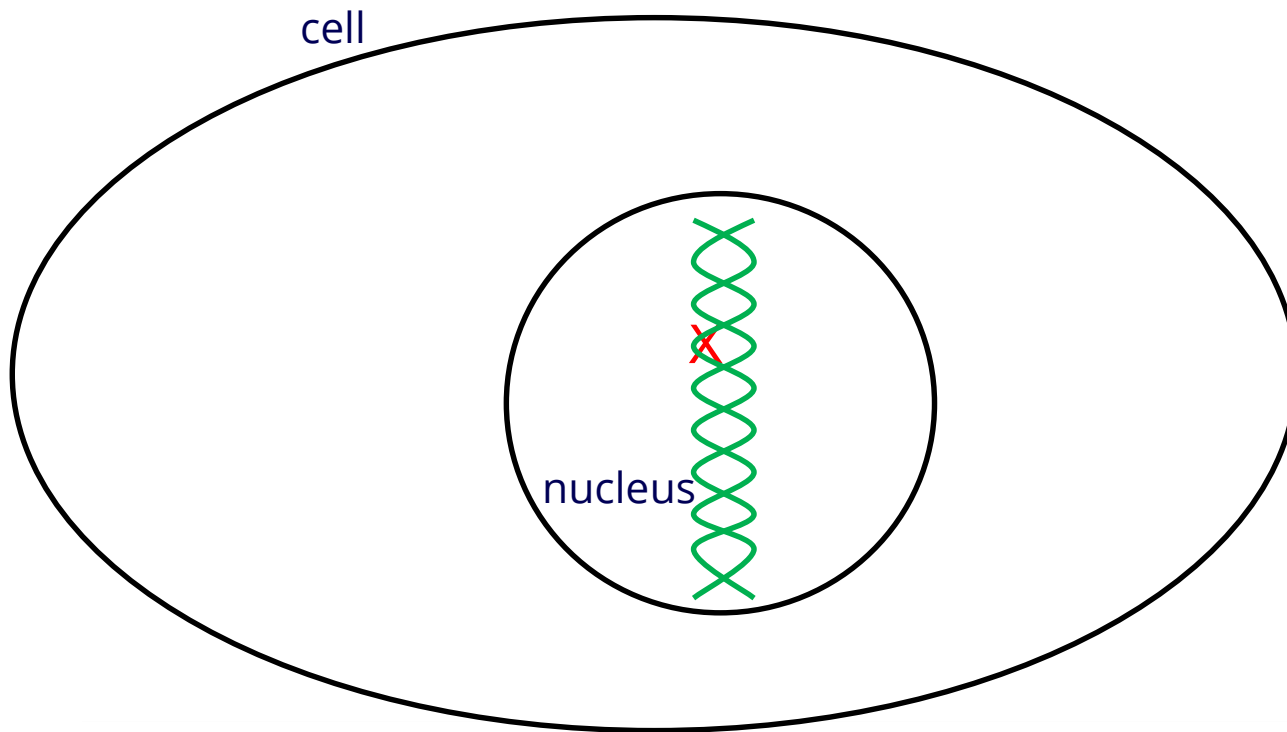
Types of Gene Therapy

- Gene replacement:
 - Replacement/addition of a normal gene, where a gene is defective or missing
 - Example: Hemophilia B – Replace clotting Factor IX
- Gene addition:
 - Expressing a therapeutic gene at the site needed
 - Most used in more complex disorders
 - Example: Wet age-related macular degeneration (wet AMD)
- Modulation of gene expression: reducing effects of a deleterious gene product
 - Silencing gene expression (RNAi)
 - Example: autosomal dominant retinitis pigmentosa



Gene Therapy

Problem: How to deliver correct copy of gene to cell?
DNA is large, highly charged



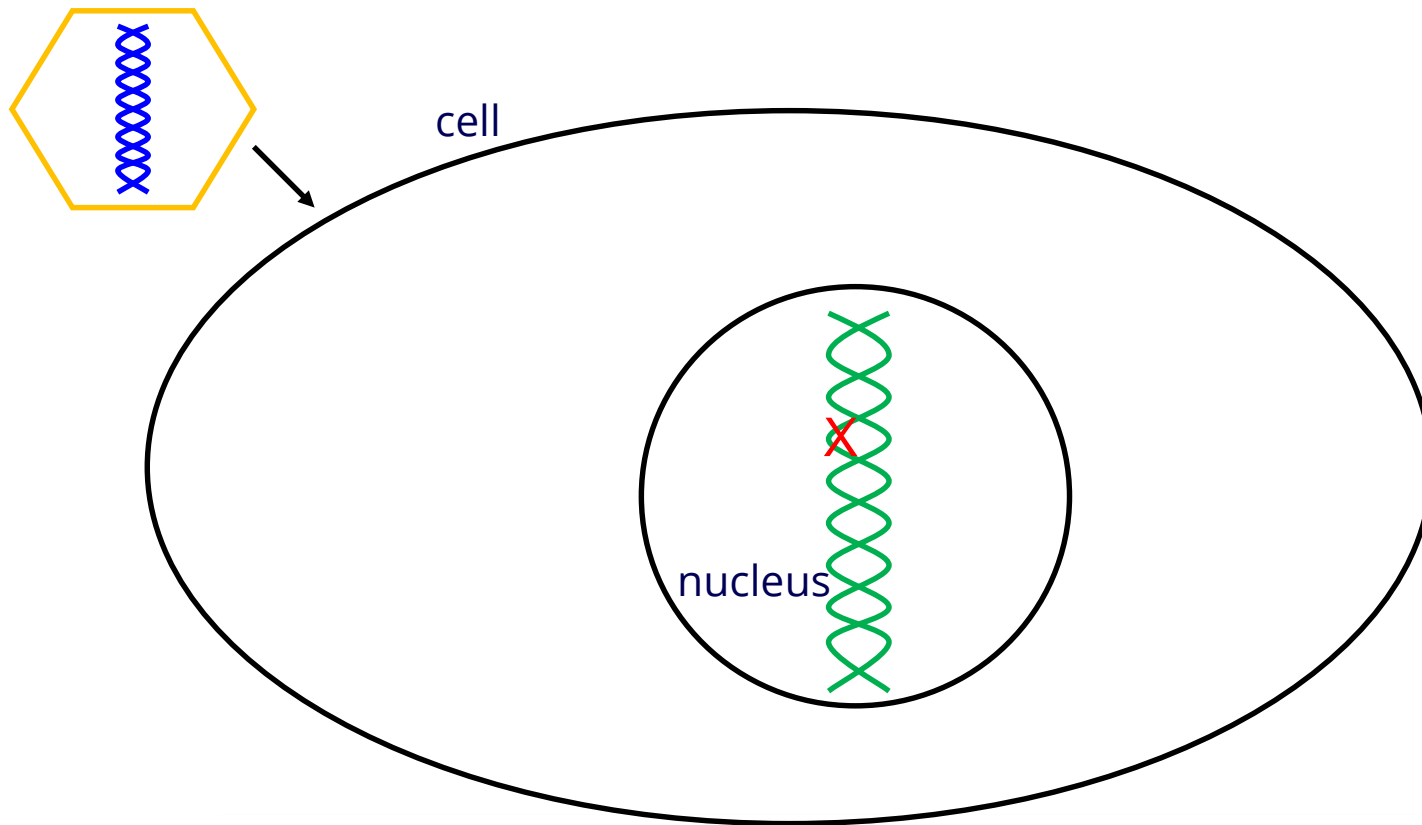
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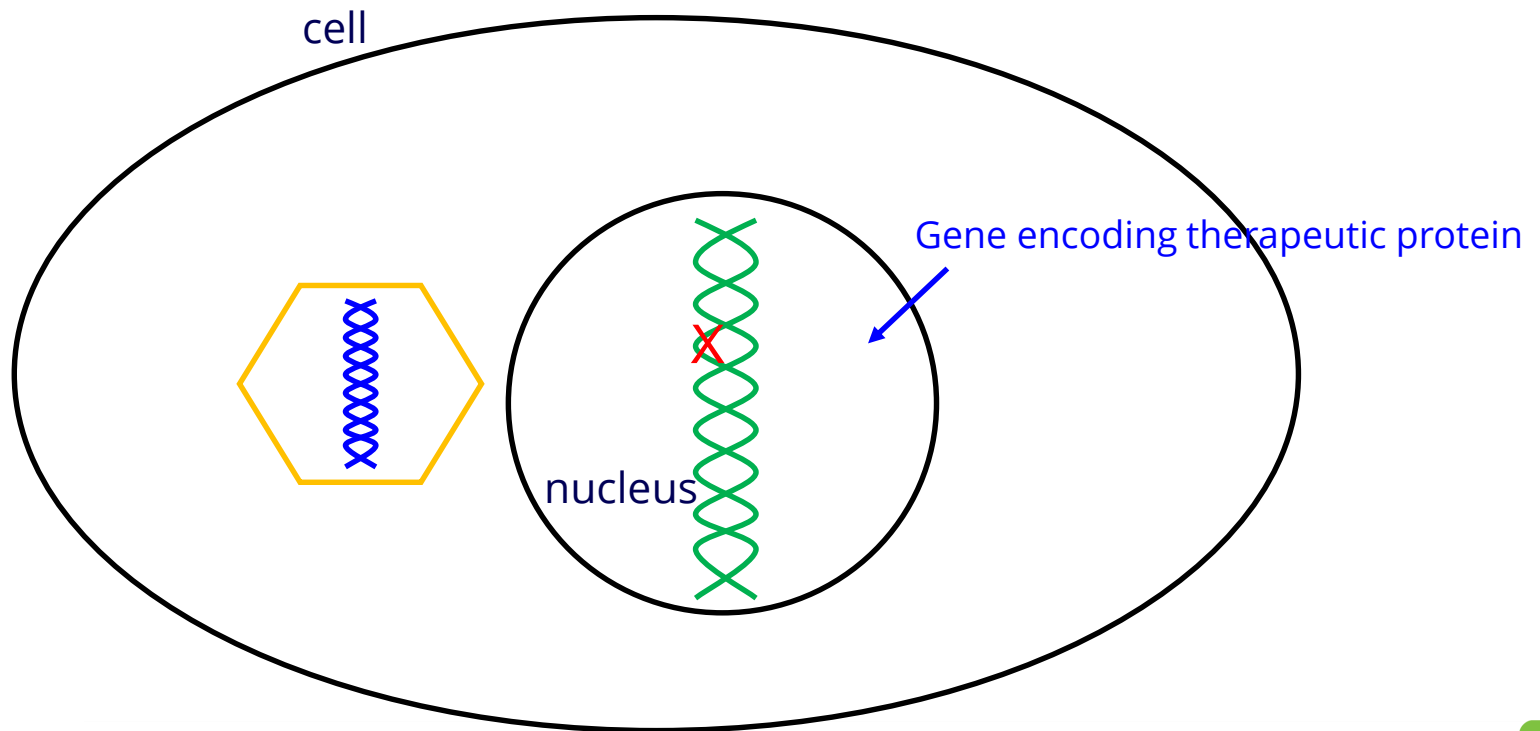
Gene Therapy

Solution: Use a virus, which evolved to deliver its genes efficiently to cells
Disable virus so it delivers genes but does not replicate



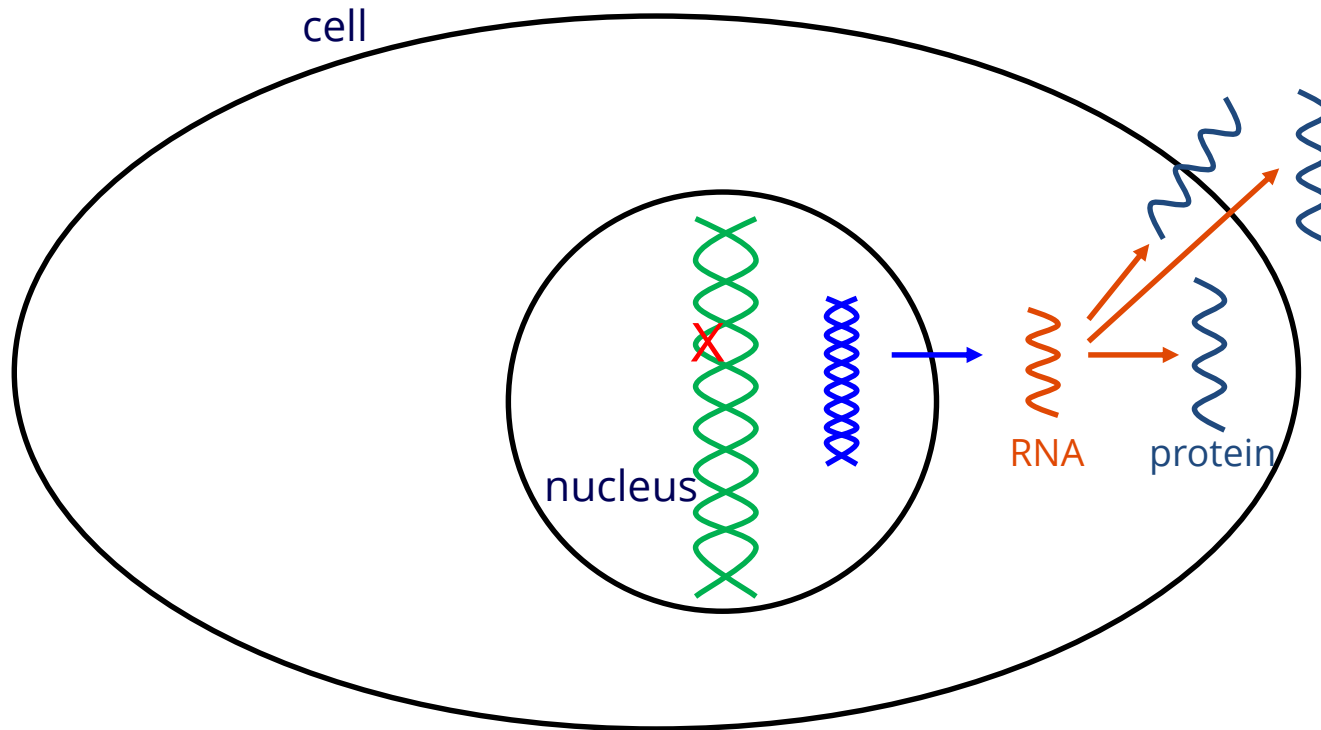
Gene Therapy

Virus uncoats, genetic material enters nucleus



Gene Therapy

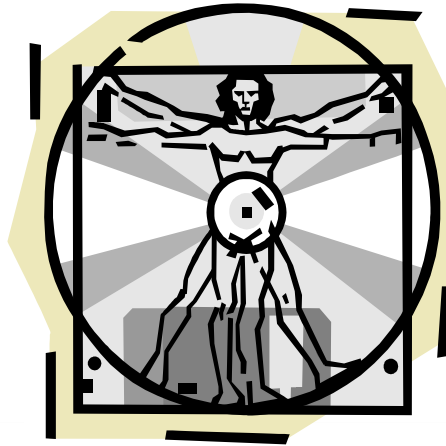
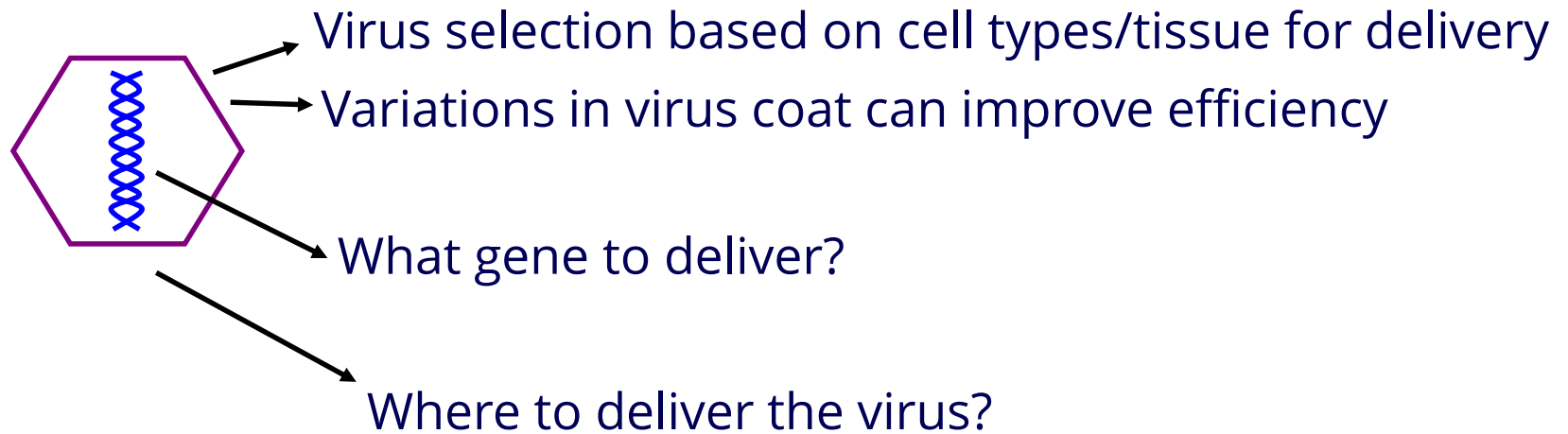
The DNA delivered contains instructions to make therapeutic protein



Need to select appropriate recombinant virus and appropriate transgene for each disease

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Vector Design



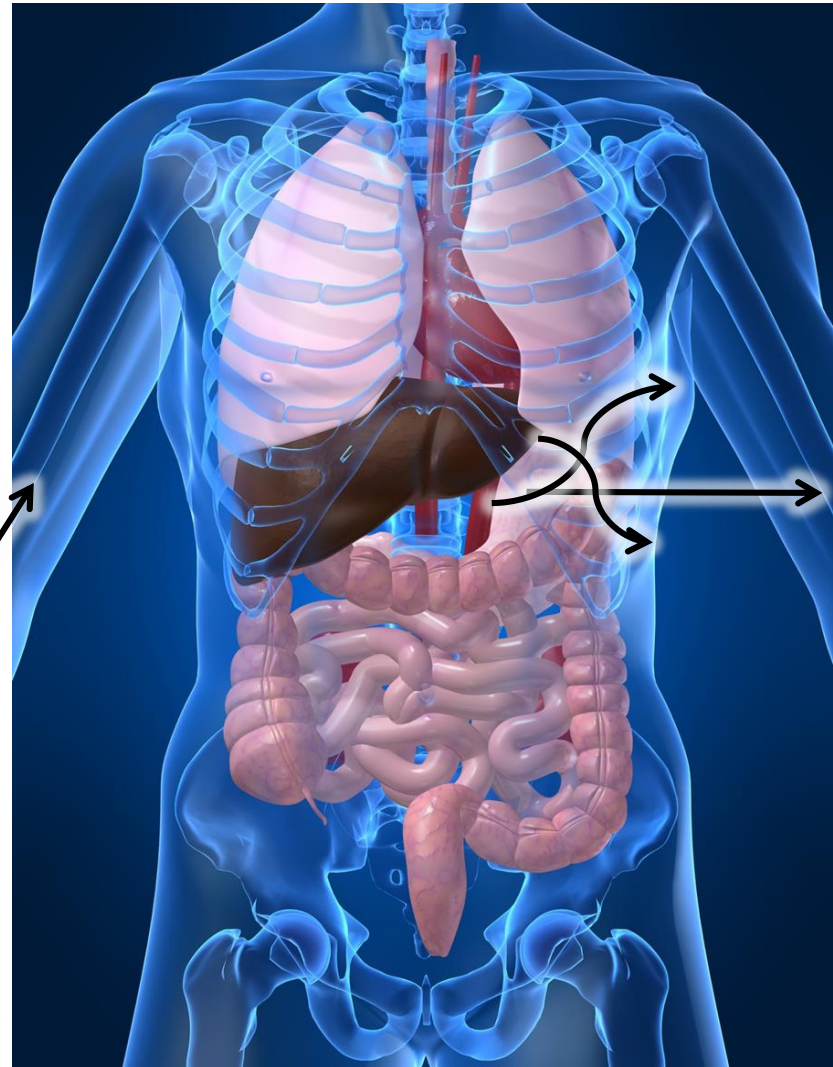
Understanding Gene Therapy

Example: Hemophilia B

- Factor IX protein is part of the clotting cascade
- Patients with hemophilia B have mutations in the Factor IX gene
 - Results in lowered ability of blood to clot
 - Bleed heavily after injury
 - Severely affected patients prone to spontaneous bleeds

Treatment being tested in the clinic:

- Intravenous injection of an AAV vector carrying a normal copy of the Factor IX gene
- Liver synthesizes, secretes FIX



Factor IX



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Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Clinical Progress:

Setbacks:

2015

First clinical trial:
retrovirus was used
to introduce a
marker gene to
human tumor
lymphocytes



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Gene Therapy Milestones in Rare

Clinical Trials Begin:

Improved Vectors:

Clinical Progress:

1989

Setbacks:

2015

1990 - First gene therapy trial to treat disease. Retrovirus was used to introduce therapeutic gene in T cells of patients with ADA-SCID



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Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Clinical Progress:

2015

Setbacks:

1999 – Gene therapy clinical trial for OTC (ornithine transcarbamylase) deficiency using an adenovirus vector resulted in a severe immune response that caused multiorgan system failure, death of a patient.

Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

2002 – Gene therapy clinical trial for X-linked SCID using retrovirus resulted in leukemia in several patients. Note that most patients were successfully treated.

Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

Adeno-associated virus (AAV) vectors developed with enhanced levels of gene transfer

Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

2003 – China: Approval of Gendicine, an adenovirus for tumors with mutations in p53 gene



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Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

Lentivirus vectors have replaced retroviruses. Clinically no leukemias to date

Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

2012 – Europe: Approval of Glybera, an AAV for LPL (lipoprotein lipase) deficiency

Gene Therapy Milestones in Rare

Clinical Trials Begin:

1989

Improved Vectors:

Setbacks:

Clinical Progress:

2015

Over 2200 gene therapy clinical trials have been initiated WW
Includes ~100 late-phase/registrational trials



Michelle Berg

Vice President, Patient Advocacy, Abeona
Therapeutics



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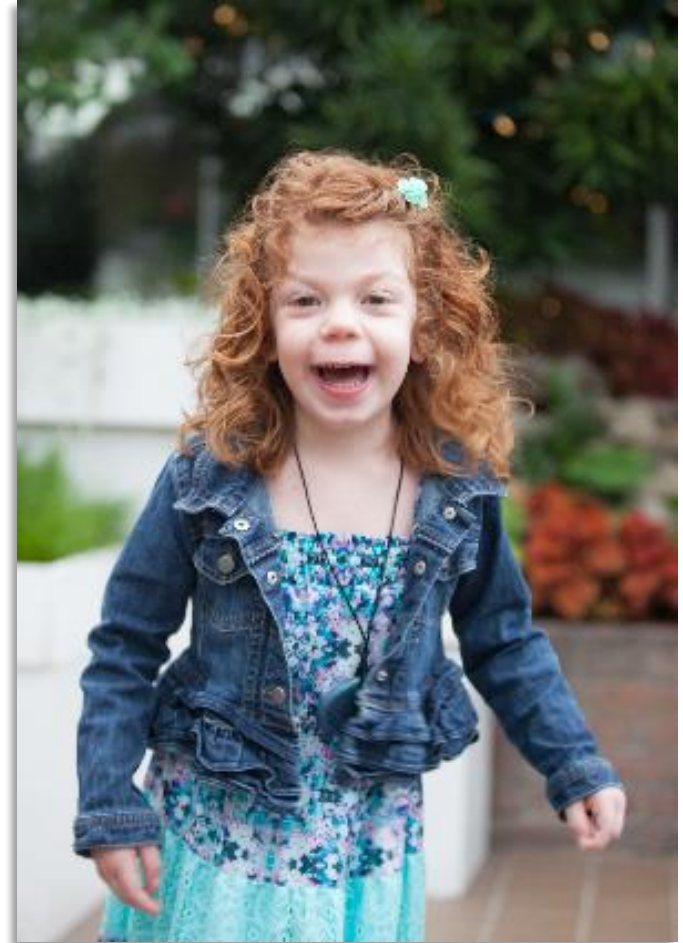
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The Name

- **Pronunciation:** *ā-bē-ō-nuh*
- **Origin:** Roman Goddess said to be the protector of children as they start out on their journey.
- **Mission:** Abeona Therapeutics develops and delivers gene therapy and plasma-based products for severe and life-threatening rare diseases.



Abeona Therapeutics History

- Founded in March 2013 out of Cleveland, OH
- Licensed technology from Nationwide Children's Hospital
- Lead products – gene therapy for MPS IIIA and IIIB
- Received the FDA Orphan Drug Designations for MPS IIIA and IIIB clinical programs
- Received Pediatric Rare Disease Designations
- Raised \$6M from over dozen international foundations



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Our Pillars of Support



Spain



Spain



USA



Switzerland



USA



USA



USA



Canada



USA



USA



Mexico



Australia

From Private to Public



June 22nd, 2015: My first day!

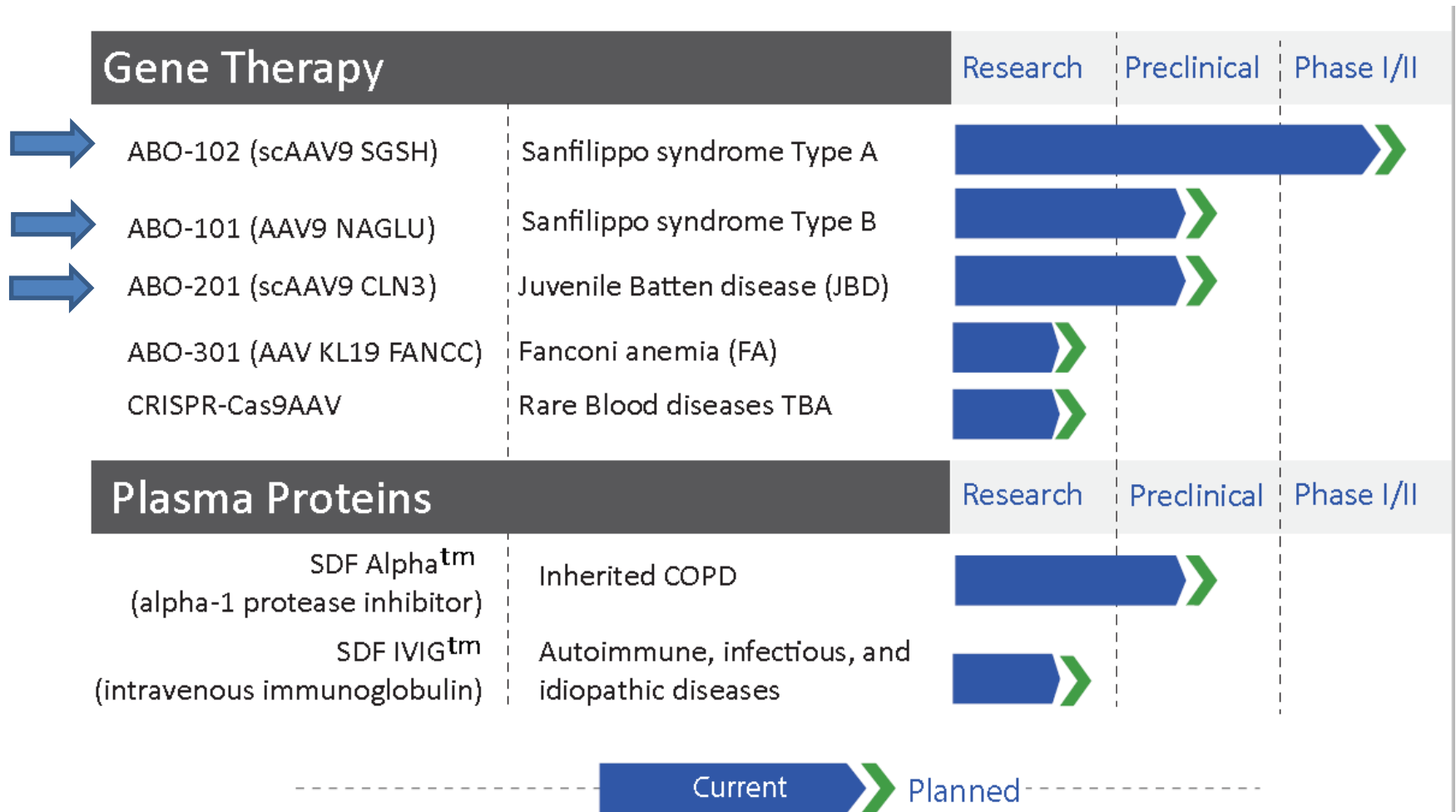


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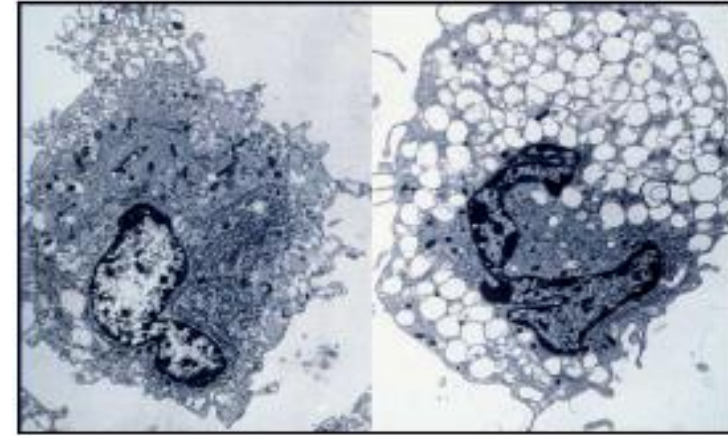
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Our Potential Therapies



Developing Gene Therapy for Lysosomal Storage Diseases (LSD)

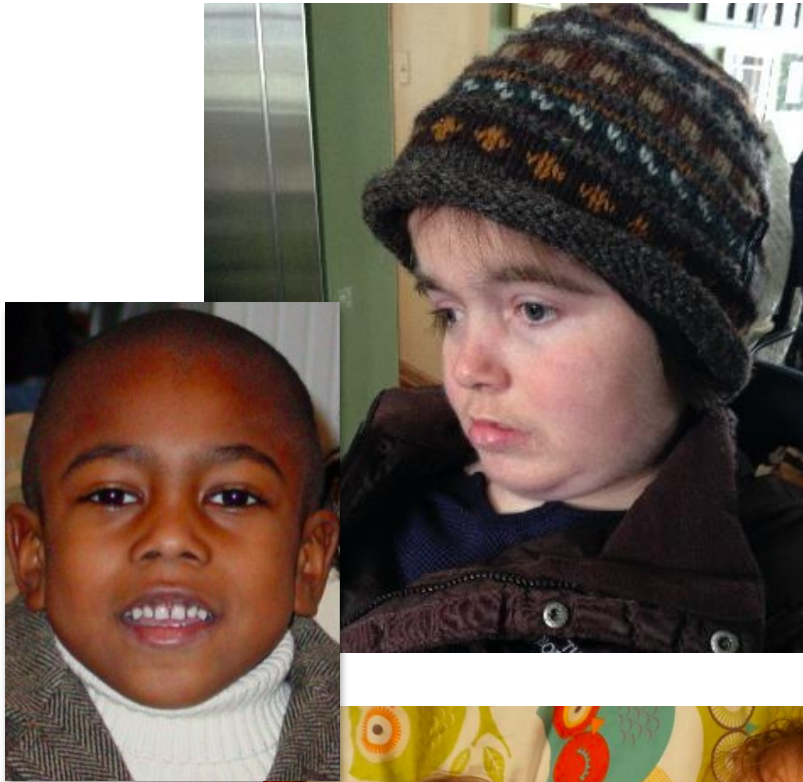
- Over 60 types
- Caused by an inherited deficiency in enzyme
- Buildup of materials in cells
- Progressive, severe neurological and muscular disorders
- Few current treatments approved or in development



Normal Cell

Cell with LSD

About Sanfilippo Syndrome



- Mucopolysaccharidosis (MPS) Type III
- Estimated incidence is 1 in 70,000
- MPS IIIA (SGSH) and IIIB(NAGLU)
- Accumulation of glycosaminoglycans (GAGs) or Sugars
- Age of onset, 2-6 years old



- Behavioral and sleep disturbances, progressive, severe deterioration in CNS and body, fatal



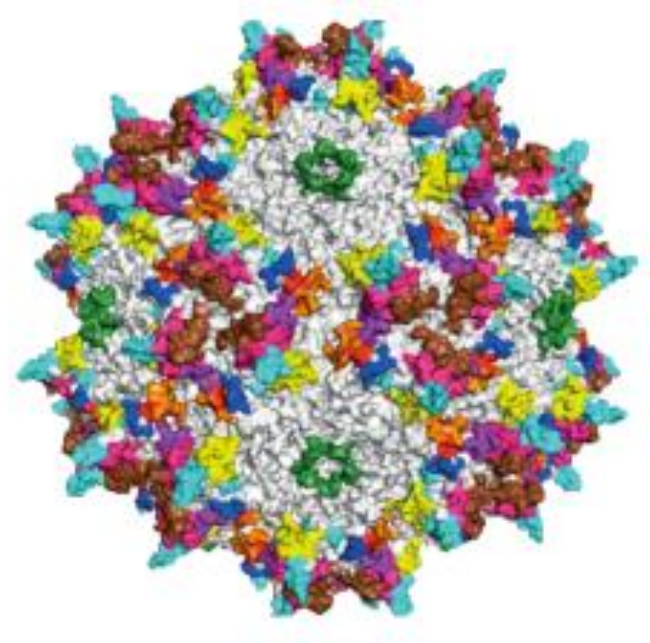
About Juvenile Batten Disease

- Juvenile Neronal Ceroid Lipofuscinosis (JNCL), CLN3 gene
- Estimated incidence is 1:100,000
- Accumulation of lipopigments and proteins
- Age of onset is between 5-10
- Blindness, seizures, behavioral and sleep issues, progressive loss of motor and cognitive abilities, fatal

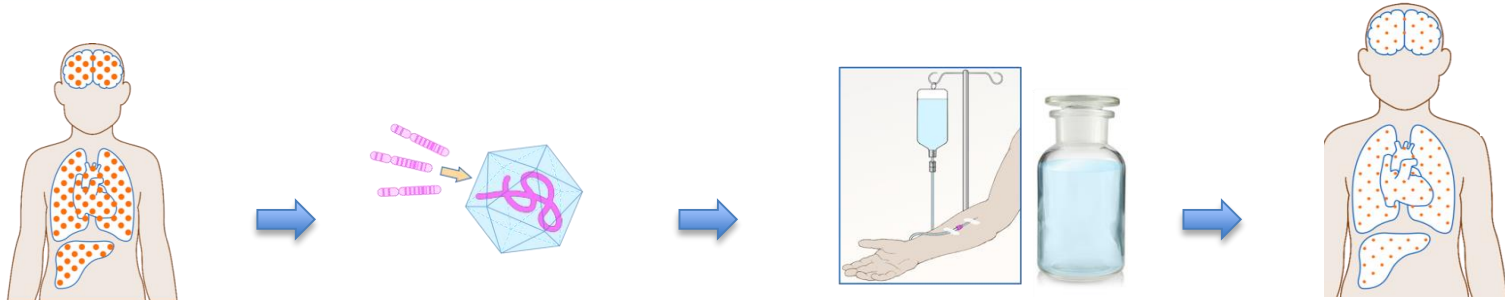


Selecting a Delivery Vehicle

- Adeno-Associated Virus (AAV)
- Unable to replicate on its own
- Non-pathogenic
- Long-term expression
- Able to target specific tissues
- Safety demonstrated in clinical trial
- Commercial use: Glybera



Delivering to the Whole Body



LSD affect all organs

AAV9 virus

Intravenous injection

Whole-body correction

- Delivery and expression throughout the body, including CNS
- Clearance from cells in under 2 weeks
- Correction of neuromuscular and cognitive functions
- 100% improved survival

Demonstrated in mouse models of clinically relevant age



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Important next steps

AAV (Adeno-Associated Virus) Gene Therapy

Research

Preclinical

Phase I/II

Marketed

ABO-102 (SC AAV9 SGSH): SANFILIPPO SYNDROME TYPE A (MUCOPOLYSACCHARIDOSIS (MPS) IIIA)



ABO-101 (SC AAV9 NAGLU): SANFILIPPO SYNDROME TYPE B (MUCOPOLYSACCHARIDOSIS (MPS) IIIB)



ABO-201 (SC AAV9 CLN3): JUVENILE BATTEN DISEASE (JBD)



Academic Partners of Excellence

ABO-101 (AAV9 NAGLU) and **ABO-102** (scAAV9 SGSH), adeno-associated virus (AAV)-based gene therapies for Sanfilippo syndrome (MPS IIIA and IIIB)



ABO-201 (scAAV9 CLN3) adeno-associated virus (AAV)-based gene therapy for juvenile Batten disease (JBD)



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Medical Center

ABO-301 (AAV FANCC) for Fanconi anemia (FA) disorder using a novel CRISPR/Cas9-based gene editing approach to gene therapy program for rare blood diseases.



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Alison Rockett Frase

President and Founder, Joshua Frase Foundation



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Questions and Answers

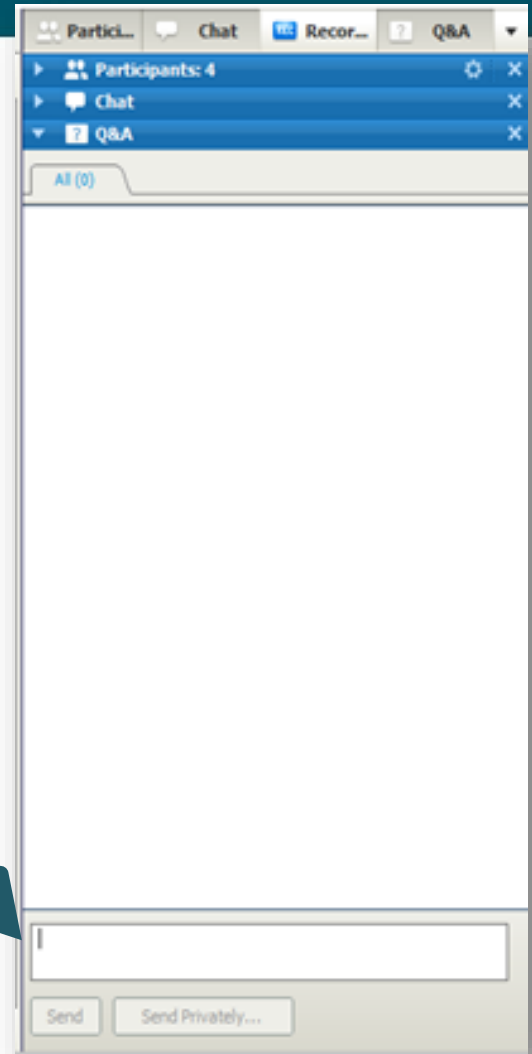
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Alison Rockett Frase

President and Founder
Joshua Frase Foundation

Moderator:



Daniel Levine

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Be sure to join us for our next webinar

Strategies for Effective Fundraising

On June 21, 2016

Registration opening soon

Look out for our toolkit



Understanding Gene Therapy

Coming at the end of May



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Rare Patient Advocate Summit 2016 is coming



**GLOBAL GENES®
RARE PATIENT
ADVOCACY
SUMMIT**

Registration opens
June 1st, 2016.

SEPTEMBER 22-23, 2016
Hyatt Regency
Huntington Beach Resort & Spa
Huntington Beach, California

**Connect. Educate.
Engage. Achieve.**

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The banner includes a collage of six photographs: a woman speaking at a podium, a sunset view of Huntington Beach, a group of people at an outdoor event, a woman speaking at a podium, a group of people at a panel discussion, and a woman interacting with a child.

Registration opening soon