Ohio's Aging Eye Summit



State of Vision Research for the Aging Eye at CWRU and University Hospitals

Jonathan H. Lass MD Charles I Thomas Professor and Vice Chair for Academic Affairs CWRU Department of Ophthalmology and Visual Sciences University Hospitals Eye Institute Study Chair, Diabetes Endothelial Keratoplasty Study (DEKS)





Ohio's Aging Eye Public Private Partnership

A statewide collaboration preparing for the growth of aging eye challenges in Ohio



Research Administration at CWRU/UH Department of Ophthalmology and Visual Sciences



Douglas Rhee MD Professor and Chair CWRU Ophthalmology Director, UH Eye Institute



Irina Pikuleva PhD Asseff Professor CWRU Ophthalmology Director, Visual Sciences Research Center



Jonathan Lass MD Charles I Thomas Professor and Vice Chair for Academic Affairs CWRU Ophthalmology Staff member, UH Eye Institute



Loretta Szczotka-Flynn OD, PhD Professor CWRU Ophthalmology Director, Vision Research Coordinating Center Director, Contact Lens Service UH Eye Institute



CWRU/UH Department of Ophthalmology and Visual Sciences and University Hospitals Eye Institute

- 19 MDs
- 1 MD, PhD
- 5 ODs
- 2 OD, PhDs
- 5 PhDs with primary appointment
- 4 PhDs with secondary appointments
- 1 CRA, MA photographer and Professor



- Cornea/External Disease/Refractive
- Electrophysiology
- Glaucoma
- Neuro-ophthalmology
- Oculoplastics
- Ophthalmic pathology
- Optometry/Contact lens/low vision
- Pediatric ophthalmology and adult strabismus
- Retina-vitreous
- Uveitis



The CWRU Visual Sciences Research Center (VSRC) 36 PIs in 13 Departments and 3 Schools







The CWRU Visual Sciences Research Center (VSRC) Thematic Areas

- Age-related macular degeneration and retinal degenerations
- Cataract
- Contact-lens-induced inflammation
- Corneal Diseases
- Diabetic retinopathy
- Eye imaging
- Genetics of eye diseases
- Glaucoma
- Ocular toxoplasmosis





Thematic research areas related to the aging eye in the CWRU Ophthalmology

- Glaucoma: Dr. Rhee
 - Understanding the trabecular meshwork, the drain of the eye, to develop new treatments studies on the SPARC protein
- Diabetic retinopathy: Patricia Taylor, PhD
 - Relation of inflammation in diabetic retinopathy. Role

of IL-17A









Thematic research areas related to the aging eye in the Department

- ARMD, Alzheimer's disease, and diabetic retinopathy: Irina Pikuleva, PhD
 - Understanding role of cholesterol homeostasis in ARMD, diabetic retinopathy, and Alzheimer's disease



Wet ARMD

Dry ARMD





Proliferative diabetic retinopathy



Research in the Pikuleva Laboratory

R01 EY018383, years 19-24 (Pikuleva): Cholesterol homeostasis in the retina

- Evaluate hamsters as a model for studies of retinal cholesterol
- Assess HPCD treatment for mitigation of retinal manifestations of AMD in Apoe^{-/-}, Cyp27a1^{-/-}Cyp46a1^{-/-} and hAPOB100-Tg mice
- Establish retinal significance of APOJ for the pathway of retinal cholesterol transport

R01 EY025383, years 5-9 (Pikuleva, multiPI): Cholesterol homeostasis in pathogenesis of diabetic retinopathy

 Determine whether type 2 diabetes induces changes in retinal cholesterol homeostasis leading to retinal cholesterol accumulation and formation in the retina of cholesterol crystals

R01 AG067552, years 19-23 (Pikuleva): Cholesterol-metabolizing P450s - structure and function

- Identify a general mechanism underlying the multiple brain effects of CYP46A1 activity modulation
- Begin to develop the next generation of CYP46A1 activators

Why Study Cholesterol in the Retina?



Chorioretinal cholesterol is linked to AMD:

- Cholesterol is a significant component of drusen (>40%
- of druse volume) and subretinal drusenoid deposits
- GWAS identified several cholesterol-related genes (*CETP, ABCA1, LIPC,* and *APOE*) as risk factors for wet AMD
- Statin treatment may retard AMD progression reducing cholesterol levels systemically and in the retina with effect on cholesterol-laden drusen with early disease

Esterified Cholesterol







Unesterified Cholesterol



Oak et al (2014) Retina; Curcio (2014) PRER



Enzyme initiating the major pathway of cholesterol removal from the brain

Expressed in specific neurons of the brain and retina; protein levels in the brain are ~6-fold higher than those in the retina

Involved in cognition:

- *Cyp46a1*^{-/-} mice show severe deficits in spatial, associative, and motor learning
- Conversely, old transgenic CYP46A1 female mice have improved spatial memory and an increased NMDAR expression
- Potential target for Alzheimer's and Huntington's diseases, Niemann-Pick disease type C, spinocerebellar ataxia, glioblastoma as well as conditions accompanied with seizures; being tested in clinical trials for inhibition (2 trials) and activation (1 trial)
- Potential target for AMD at early stages before advanced drusen and neovascularization



- Sustiva (Bristol-Myers Squibb) or from Cipla (generic)
- Approved by the FDA in the US as an anti-HIV medication to keep the viral load low
- Represents a non-nucleoside reverse-transcriptase inhibitor
- Given orally at the 600 mg/day dose or ~10 mg/kg of body weight
- Exhibits off target interaction and activation with cytochrome P450 46A1 (CYP46A1), the major enzyme, which controls cholesterol elimination from the brain

Efavirenz Effect of Retinal Abnormalities in 5XFAD mice (6 month of TX with 0.1 mg/kg of BW)



A Proof-of-Concept Clinical Research Study of Efavirenz in Patients with Alzheimer's disease



Irina A. Pikuleva, PhD, Case Western Reserve U, Cleveland, OH Site 1 PI: Alan Lerner, MD, University Hospitals, Cleveland, OH Site 2 PI: Steven Arnold, MD, Massachusetts General Hospital, Boston, MA

Endpoints:

- 1º: CYP46A1 engagement (≥30% change in plasma 24-hydroxycholesterol)
- 1º: serious adverse effects in the geriatric population



2°: the ²H₂O study preliminary work has already shown clearance of excess cholesterol from the brain

3°: the effect of the APOE, CYP46A1, and CYP2B6 genotypes; decreases in the CSF phosphotau, amyloid β protein, and total tau

Thematic research areas related to the aging eye in the Department

- Fuchs Dystrophy: Dr. Jonathan Lass
- Genetics studies: 3 new genes reported associated with Fuchs dystrophy*
 - KANK4, LAMC1, and ATP1B1
- RCT: Cornea Preservation Time Study with 95% of patients undergoing DSAEK for Fuchs dystrophy. Provides insights into best surgical practices for the disease.+&





FECD







FECD case post DSAEK

FECD guttae seen on specular microscopy

*Afshari et al Nature Communications 2017

+Lass et al Cornea 2015 & Rosenwasser et al JAMA Ophthalmology 2017

Thematic research areas related to the aging eye in the Department

- Diabetes and Fuchs Dystrophy: Dr. Jonathan Lass
 - Effect of donor and recipient diabetes on DMEK outcomes by one year



FECD

Pseudophakic cornea edema



FECD case post DMEK



Post DMEK ECD determination

Diabetes Endothelial Keratoplasty Study Support

Cooperative Agreement with the National Eye Institute UG1 EY30030 and UG1 EY30039

Additional support provided*: Eye Bank Association of America, The Cornea Society, Cleveland Eye Bank Foundation, CorneaGen, Eversight, Eye Bank for Sight Restoration, Eversight, Florida Lions Eye Bank, Iowa Lions Eye Bank, Kentucky Lions Eye Bank, Lions Eye Bank of Wisconsin, Lions Gift of Sight, Lions VisionGift, San Antonio Eye Bank, San Diego Eye Bank, Utah Lions Eye Bank,VisionFirst *As of 6/1/2021









O DEKS

Diabetes Endothelial Keratoplasty Study (DEKS) Background

- Diabetes epidemic worldwide and the United States
 - 23.1 million diagnosed in US (7.2% of the population)
 - 7.2 million adults undiagnosed
 - 30.3 million total with diabetes (9.4% of the population)
- Cornea donor pool approaching 40% with diabetes at most eye banks
 - Compared to <10 20% a decade ago
- 2014 first report diabetes increases risk of Descemet membrane endothelial keratoplasty (DMEK) prep failure*
- DMEK is fastest growing transplant procedure
 - Eye banks increasingly avoid diabetic donors for DMEK
 - Causing constraints limiting DMEK tissue allocation to non-diabetic donors with high cell counts

Diabetes prevalence, 2017 Diabetes revoluce relevit for a principal of property 20.79 whether type 1 or type 2 diameter.



In Date



Our Cornea Preservation Time Study (CPTS) Results in 2018 Support Diabetes Endothelial Keratoplasty Study Funding This Year

- Higher DSAEK graft failure rate at 1 and 3 years with donors with diabetes*
- Higher endothelial cell loss following DSAEK at 1 and 3 years with donors with diabetes+
- Higher graft detachment rate following DSAEK#



*Terry et al *Ophthalmology* 2018;125:1700-1709 +Lass et al *JAMA Ophthalmology* 2019;137:185-193 #Aldave et al *Am J Ophthalmol* 2019;203:78-88



Diabetes Endothelial Keratoplasty Study

Multicenter, randomized, masked, clinical trial examining graft success and cell loss 1 year post DMEK

- Major Participants and Eligibility Criteria
- DMEK cases; no DSAEK cases
- Exclude eyes with failed PKP, tube shunts, uncontrolled
- 30-<91 years old undergoing DMEK for FECD, PCE, or failed DSAEK or DMEK
- All glaucoma, AC IOL, or anterior synechiae >3 clock hours

Minimization

Participants could enroll both eyes – first eye in a 2:1 minimization procedure non-diabetic vs diabetic, second eye assigned alternative group

Non-diabetic Group N = 947 eyes Diabetic Group N = 473 eyes









Majority of recipients with Fuchs dystrophy

Diabetes Endothelial Keratoplasty Study Goals

 Determine definitively whether there is an association between donor and recipient diabetes with DMEK graft success and endothelial cell loss at one year

DEKS

 Determine if donor and recipient diabetes severity impact DMEK graft success and endothelial cell loss











Donor and Reciepient diabetes severity measures

- Determine definitively presence of diabetes in the donor
 - Detailed review of history
 - Post-mortem HbA1c testing—detect undiagnosed diabetes with HgbA1c > 6.5 and uncontrolled diabetes with high HgbA1c
- Hgb A1c testing on all recipients at baseline and 1 year
- Lions Vision Gift donor severity scale on both donor and recipient
 - Duration of diabetes for 10 years or more
 - Body mass index
 - Hypertension
 - Treatment of diabetes (diet, oral agent, insulin)
 - History of micro- and/or macrovascular complications: renal failure and/or dialysis; stroke; myocardial infarction; leg ulcers or amputations; diabetic retinopathy with proliferative disease including vitreous hemorrhage; history of retinal laser; history of vitrectomy; history of intravitreal anti-VEGF therapy

Each gets a point up to 5 points: Scale 0 (no diabetes) to 5 (severe diabetes)

 AGE and oxidative markers testing on donor: Measurement of postmortem advanced glycation endproducts and oxidative markers from skin biopsy on the donor as more sensitive measure of tissue damage

Diabetes Endothelial Keratoplasty Study Learn about Other Factors impacting DMEK outcomes

- Tracking not only donor and recipient diabetes but over 60 other donor, recipient, operative and postoperative factors impacting DMEK outcomes
- Will help determine best practices for DMEK success for the management of Fuchs dystrophy



DEKS



















Diabetes Endothelial Keratoplasty Study Impact

- Targeted use of corneas from well characterized diabetic donors whose tissues will be more widely utilized for keratoplasty in the US and worldwide
- Sort out other donor, recipient, operative and postoperative factors that could improve DMEK outcomes, and lower primary and early failures



Future for Aging Eye Diseases Management

- Fuchs dystrophy
 - Medical: growth factors, ROCK inhibitors
 - Surgical: EK improvements, cell-based therapy
- Glaucoma
 - New class of agents with further understanding of the trabecular meshwork and optic nerve protection
 - Longer acting delivery systems
- Macular degeneration
 - Improvement in anti-VEGF treatment—activity, frequency
 - Novel treatments—cholesterol modification, apoptosis inhibition





