

# Antisense oligonucleotide mediated increase of OPA1 expression using TANGO technology for the treatment of autosomal dominant optic atrophy

Association for Research in Vision & Ophthalmology Meeting 2020

Aditya Venkatesh, Ph.D.  
Senior Scientist



## Authors and disclosures

---

### **Authors:**

Aditya Venkatesh, Zhiyu Li, Syed Ali, Anne Christiansen, Kian Huat Lim, Jacob Kach, Robert Hufnagel, Jeffrey Hoger, Isabel Aznarez, Gene Liao

1. Stoke Therapeutics, Bedford, MA, United States.
2. Medical Genetics and Ophthalmic Genomics Unit, National Eye Institute, National Institutes of Health, Bethesda, MD, United States.

### **Commercial Relationships Disclosure:**

Aditya Venkatesh: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Zhiyu Li: Stoke Therapeutics (Financial Support)

Syed Ali: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Anne Christiansen: Stoke Therapeutics (Employment, Personal Financial Interest)

Kian Huat Lim: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Jacob Kach: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Robert Hufnagel: Stoke Therapeutics (Financial Support)

Jeffrey Hoger: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Isabel Aznarez: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

Gene Liao: Stoke Therapeutics (Employment, Personal Financial Interest, Patent)

# Disclaimer

---

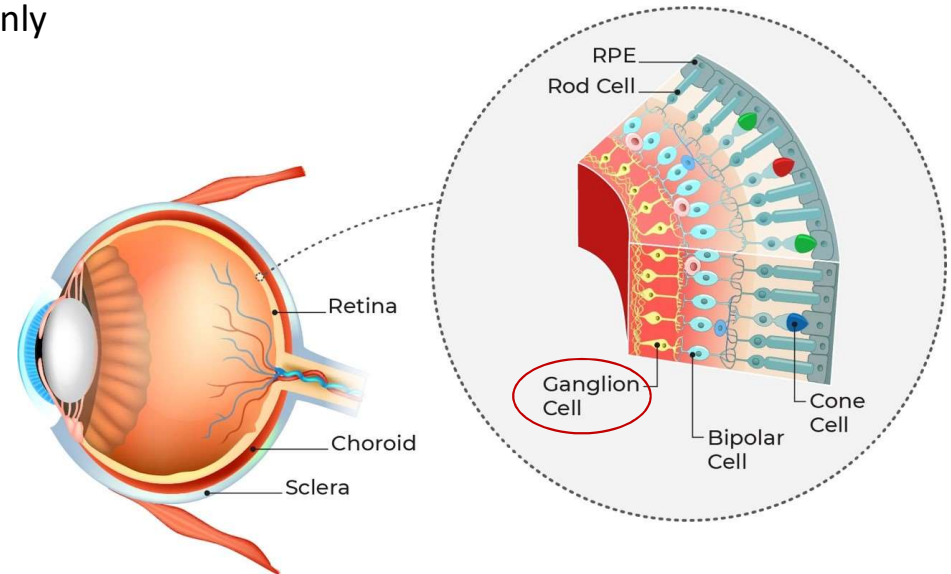
This presentation has been prepared by Stoke Therapeutics, Inc. ("Stoke") for informational purposes only and not for any other purpose. Nothing contained in this presentation is, or should be construed as, a recommendation, promise or representation by the presenter or Stoke or any officer, director, employee, agent or advisor of Stoke. This presentation does not purport to be all-inclusive or to contain all of the information you may desire. Information provided in this presentation speaks only as of the date hereof. Stoke assumes no obligation to publicly update any information or forward-looking statement, whether written or oral, that may be made from time to time, whether as a result of new information, future developments, subsequent events, or circumstances after the date hereof, or to reflect the occurrence of unanticipated events.

This presentation includes express and implied "forward-looking statements." In some cases, you can identify forward-looking statements by terms such as "anticipate," "believe," "estimate," "expect," "intend," "may," "might," "plan," "project," "target," "will," "would," "should," "could," "can," "predict," "potential," "continue," or the negative of these terms, and similar expressions intended to identify forward-looking statements. However, not all forward-looking statements contain these identifying words. These statements may relate to our strategic plans or objectives, the timing, progress, and results of preclinical studies, or business development plans and opportunities. By their nature, these statements are subject to numerous uncertainties, including factors beyond our control, that could cause actual results, performance or achievement to differ materially and adversely from those anticipated or implied in the statements. You should not rely upon forward-looking statements as predictions of future events. Although our management believes that the expectations reflected in our statements are reasonable, we cannot guarantee that the future results, levels of activity, performance or events and circumstances described in the forward-looking statements will be achieved or occur. Further information on potential risk factors that could affect our business and its financial results are detailed in our most recent Quarterly Report on Form 10-Q for the quarter ended March 31, 2020 filed with the Securities and Exchange Commission (SEC), and other reports as filed with the SEC. Although we believe that the expectations reflected in the forward-looking statements are reasonable, we cannot guarantee future results, levels of activity, performance, achievements or events and circumstances reflected in the forward-looking statements will occur.

By attending or receiving this presentation you acknowledge that you are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date such statements are made; you will be solely responsible for your own assessment of the market and our market position; and that you will conduct your own analysis and be solely responsible for forming your own view of the potential future performance of Stoke.

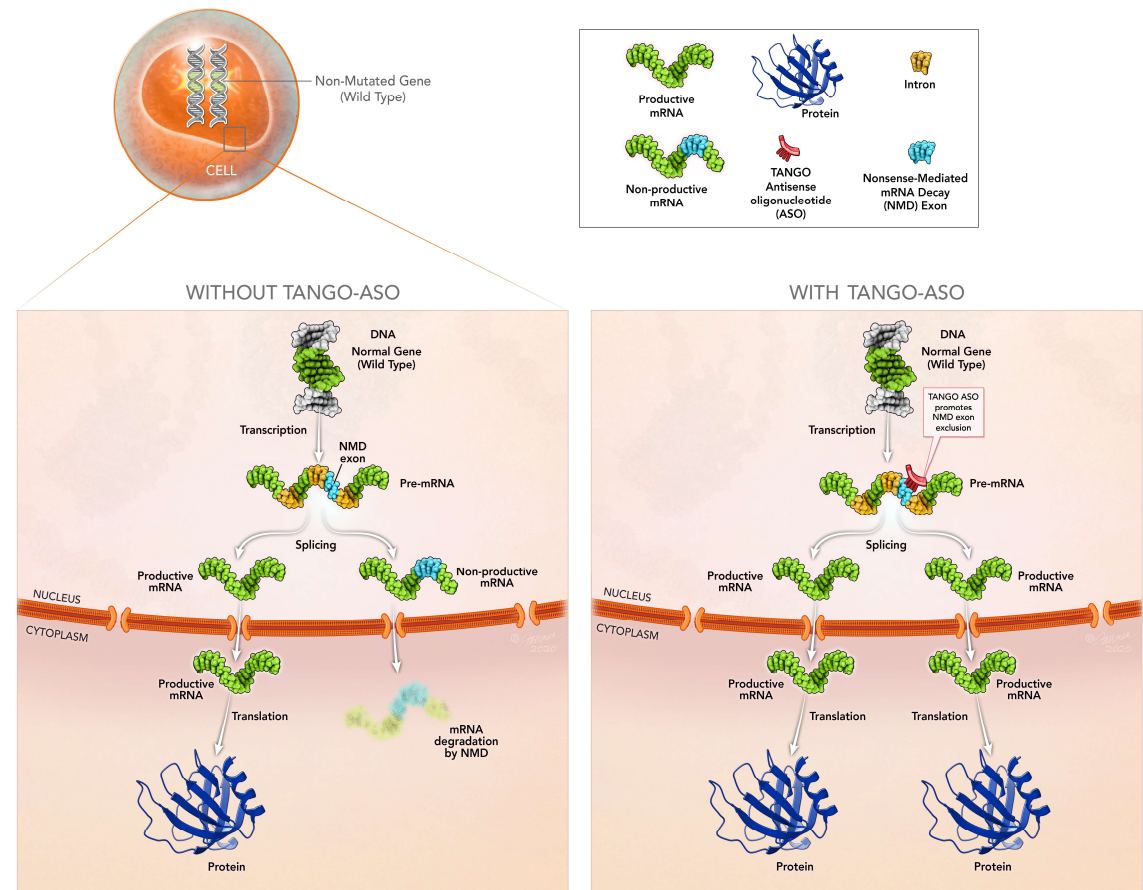
# Autosomal dominant optic atrophy and *OPA1*

- Autosomal dominant optic atrophy (ADOA) is the most commonly diagnosed optic nerve disorder and is characterized by retinal ganglion cell loss
- Disease affects approximately 1 in 30,000 people and causes progressive and irreversible vision loss
- ADOA typically presents within the first decade of life
  - 80% of patients are symptomatic before 10 years of age
  - Mean age of onset is 7 years
- No therapeutic options available to ADOA patients
- 65-90% of cases are caused by mutations in the *OPA1* gene, which is a mitochondrial GTPase with a critical role in the maintenance of mitochondria structure and function
- Most *OPA1* mutations lead to haploinsufficiency resulting in a decrease to about 50% of the normal amount of *OPA1* protein



# Applying TANGO for the treatment of autosomal dominant haploinsufficiency diseases

- Targeted augmentation of nuclear gene output (TANGO) uses antisense oligonucleotides (ASOs) to modulate splicing to precisely upregulate protein expression
- TANGO ASOs reduce or prevent the generation of naturally occurring non-productive mRNA and increase productive mRNA, resulting in increased production of functional protein
- Leverages the wild-type allele to increase protein expression
- Provides a mutation-independent approach to treat autosomal dominant haploinsufficiency diseases



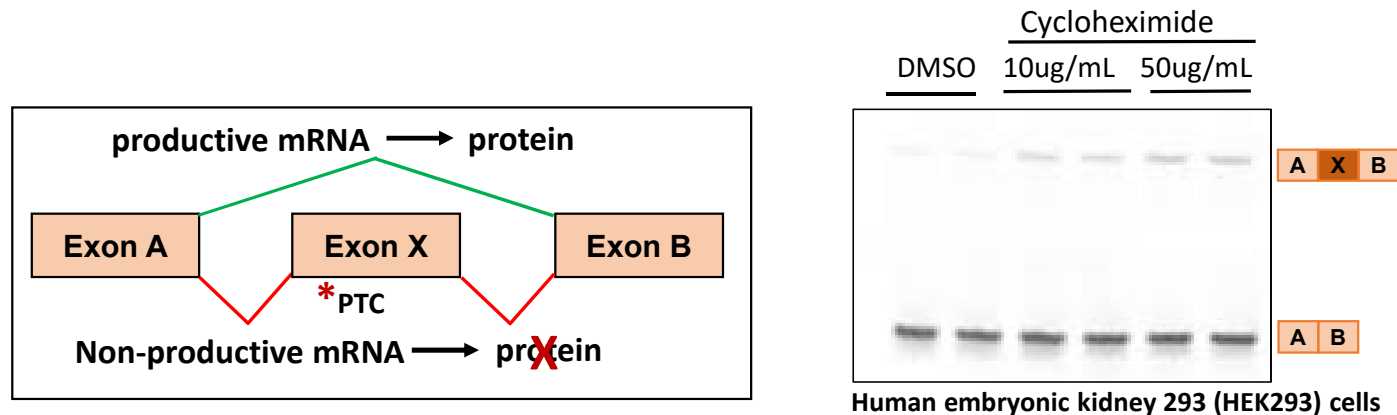
## Advantages of TANGO for the treatment of ocular diseases

---

- Intravitreal injection of ASOs permits diffusion throughout the eye and the ability to transduce retinal neurons
- Potential for long-term efficacy (up to 1 year in mouse retina) after a single intravitreal injection (Kach et al, ARVO Poster Presentation May 2019)
- No specialized formulation or encapsulation required for ASO therapy in the eye
- Potential to target genes with large coding domains that are not amenable to AAV-based gene therapy

## OPA1 non-productive splicing event identification and validation

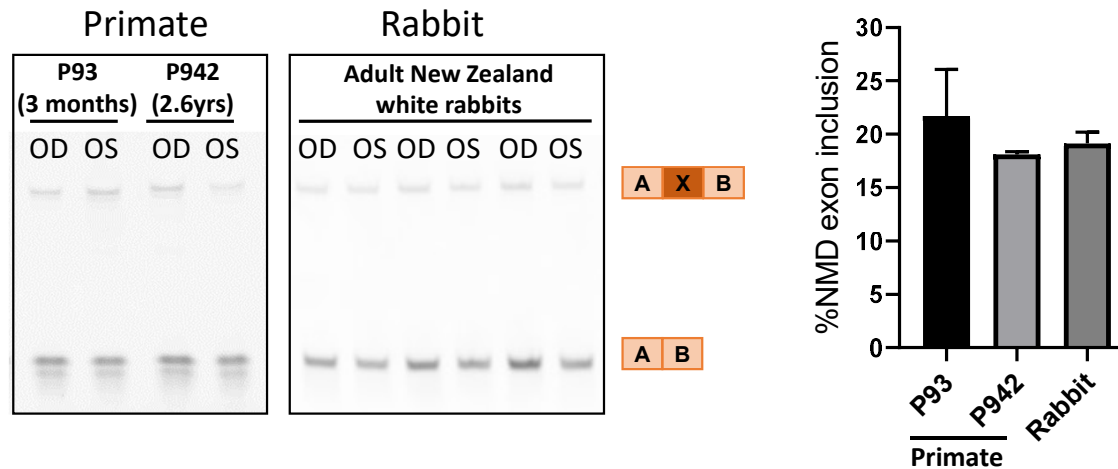
- Novel exon inclusion event (Exon X) identified in the *OPA1* gene which leads to introduction of a premature termination codon (PTC)
- This produces a non-productive mRNA transcript that is degraded by non-sense mediated decay (NMD), producing no protein
- Inhibition of NMD with cycloheximide allows for evaluation of the true abundance of this event *in vitro*



**OPA1 non-productive splicing event was detected *in vitro* in various cell lines**

## OPA1 non-productive splicing event conservation

- OPA1 non-productive splicing event is conserved in non-human primates and rabbits
- Abundance of event was detected to be approximately 20% *in vivo* in primate and rabbit ocular tissue



**Abundance of the event is likely to be higher *in vivo*, given that NMD is presumed active in the tissue**

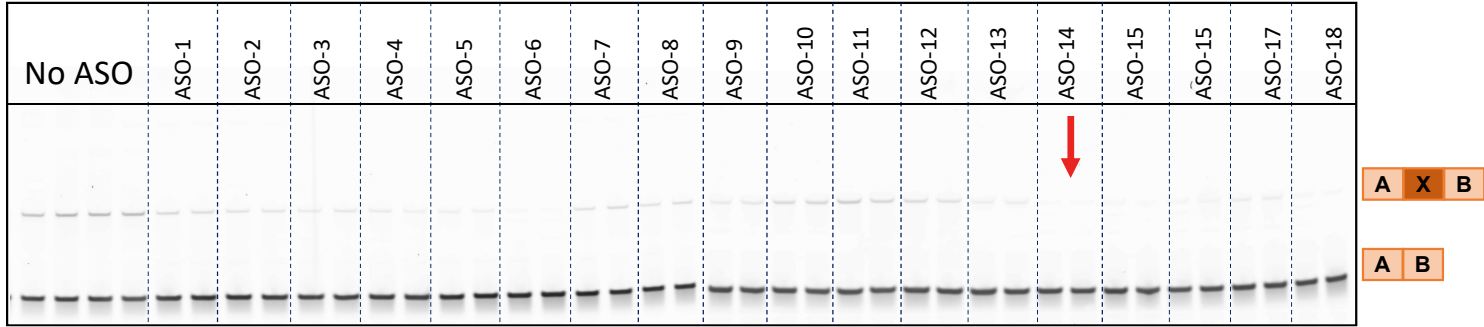
- Primate tissue: Posterior segment of eye from two stages of *Chlorocebus sabaeus* (green monkey) at 3 months and 2.6 years of age; N=1 animal/age. Graphed data represents average of OD and OS values for each animal
- Rabbit tissue: Retinae from adult female New Zealand white rabbits; N=3 animals. Graphed data represents average of OD and OS values for the three animals
- OD: oculus dexter (right eye); OS: oculus sinister (left eye); P: post-natal day



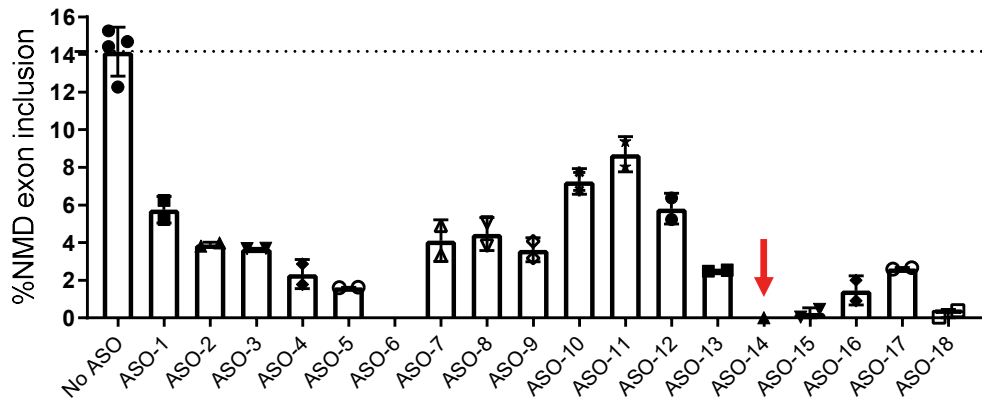
# Selected *OPA1*-targeting ASOs reduce non-productive mRNA and increase productive mRNA *in vitro*

- Cells: HEK293 cells
- ASO conc.: 80nM
- Delivery method: Transfection (Lipofectamine RNAiMax)
- Time course: 24 hours
- Cells treated with cycloheximide (50ug/mL, 3hrs) for non-productive mRNA evaluation

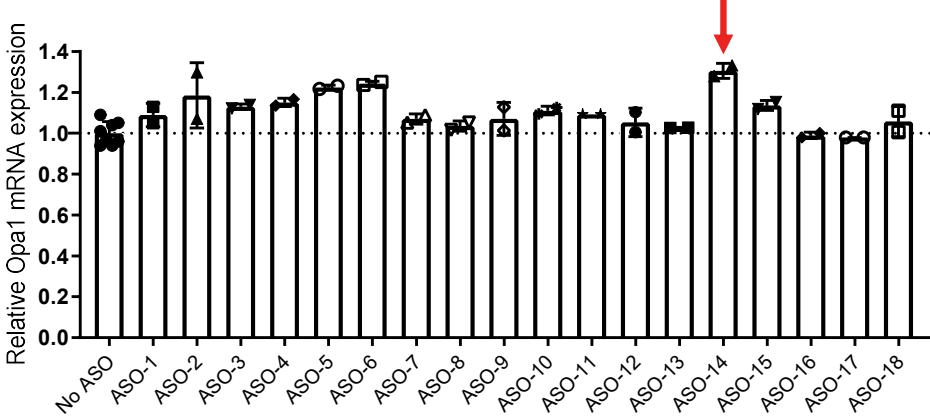
RT-PCR for non-productive *OPA1* mRNA



Non-productive *OPA1* mRNA Quantification

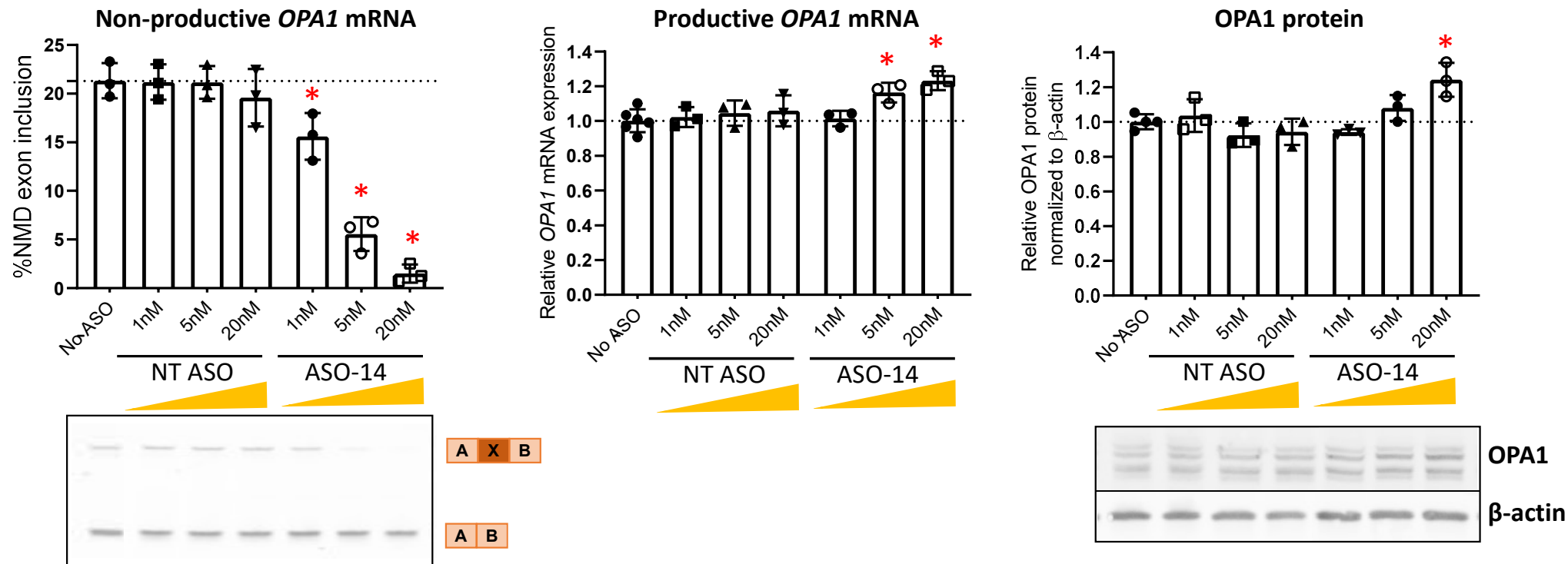


Productive *OPA1* mRNA – Taqman qPCR



ASO-14 (red arrow) reduces non-productive splicing and produces the most increase in *OPA1* mRNA levels (30% )

# ASO-14 decreases non-productive *OPA1* mRNA and increases *OPA1* expression in a dose-dependent manner *in vitro*

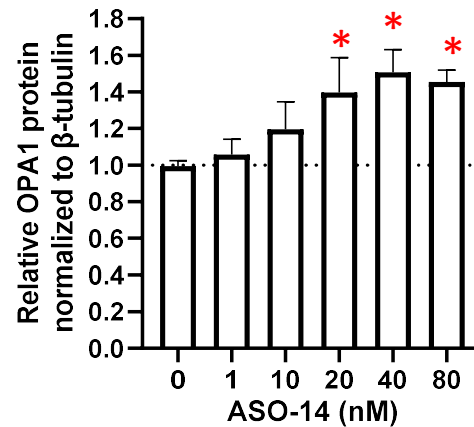
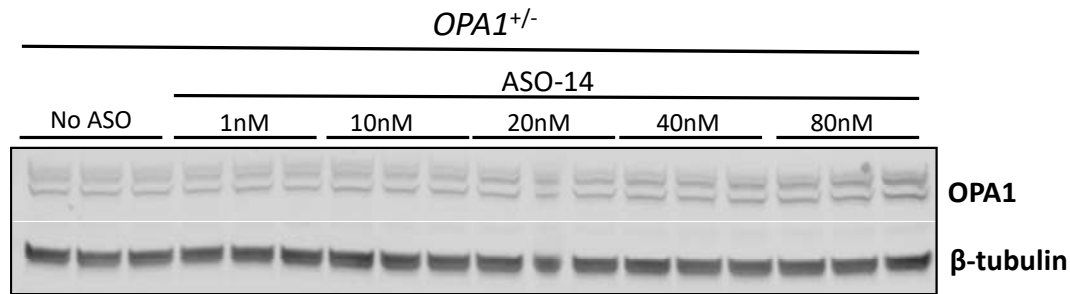


## ASO-14 produces a dose-dependent increase in *OPA1* mRNA and protein levels *in vitro*

- Cells: HEK293 cells
- Delivery method: Transfection (Lipofectamine RNAiMax)
- Time course: 24 hours for RNA, 48 hours for protein
- Cells treated with cycloheximide (50ug/mL, 3hrs) for non-productive mRNA evaluation
- NT: non-targeting ASO; \* $P < 0.05$  by one-way ANOVA compared to "No ASO" group

## ASO-14 increases OPA1 protein expression in an *OPA1* haploinsufficient (*OPA1*<sup>+/-</sup>) cell line

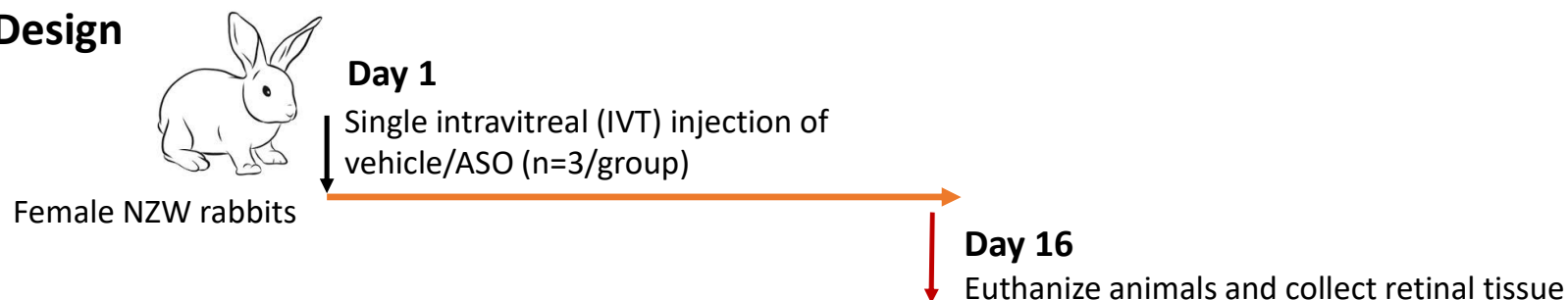
ASO-14 increases OPA1 protein levels in *OPA1*<sup>+/-</sup> HEK293 cells by ~50%, which translates to 75% of wild-type levels



- Cells: *OPA1*<sup>+/-</sup> HEK293 cells
- ASO conc.: 1, 10, 20, 40 and 80nM
- Delivery method: Transfection (Lipofectamine RNAiMax)
- Time course: 72 hours
- \**P*<0.05 by one-way ANOVA compared to “No ASO” group

## *In vivo* proof of concept study in wild-type rabbits

### Study Design



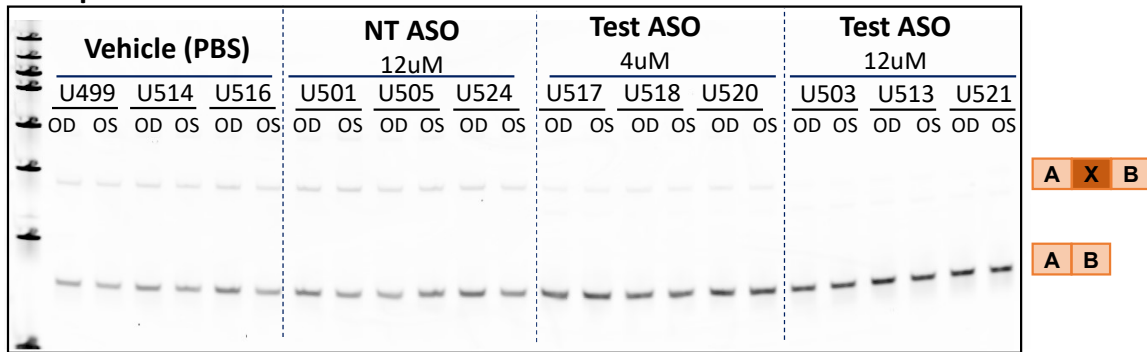
Group	N	Treatment	Dose (ug/eye)	Dose volume (uL/eye)	Final conc. expected in vitreous* (uM)	Matrices collected (OU)
1	3	Vehicle (PBS)	N/A	30	N/A	Retinae split along the nasal-temporal axes, temporal half used for RNA, nasal for protein
2	3	NT ASO	110		12	
3	3	Test ASO – Low Dose	39		4	
4	3	Test ASO – High Dose	116		12	

\*Final ASO conc. assumes vitreal volume of 1.5mL in rabbits  
NT: non-targeting, OU: oculus utereque (both eyes)

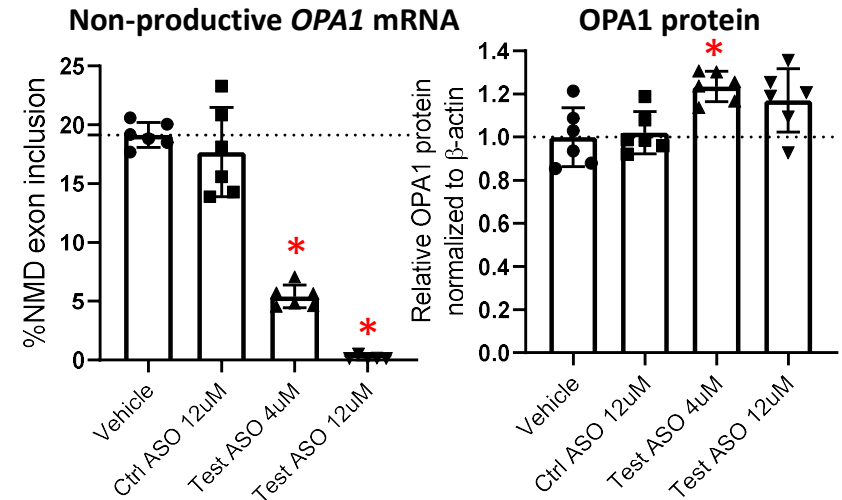
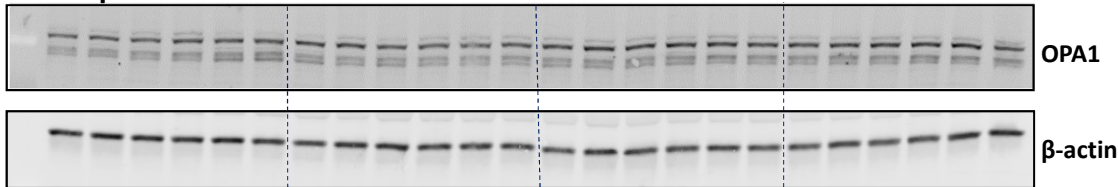
# ASO increases OPA1 protein expression *in vivo* in wild-type rabbit retinae

**Rabbit surrogate ASO decreases non-productive splicing and increases OPA1 protein expression in wild-type rabbit retinae following intravitreal injection. The test ASO was well tolerated for up to 15 days after injection**

## Non-productive *OPA1* mRNA



## OPA1 protein



NT: non-targeting; OD: oculus dexter (right eye), OS: oculus sinister (left eye)

\* $P < 0.05$  by one-way ANOVA compared to "No ASO" group

# Conclusions

---

## Preclinical data support the potential use of Stoke's TANGO technology in ADOA

- ✓ ASO-mediated specific reduction in non-productive *OPA1* mRNA, increase in productive *OPA1* mRNA and increase in *OPA1* protein in a dose-dependent manner *in vitro*
- ✓ 50% increase in *OPA1* protein levels in *OPA1*<sup>+/-</sup> cells, which translates to 75% of wild-type levels
- ✓ Reduction in non-productive mRNA and increase in protein *in vivo* in rabbit retinae
- ✓ Well-tolerated in wild-type rabbit for up to 15 days after intravitreal injection
- ✓ Approach allows leverage of the wild-type allele and can be used to potentially treat ADOA in a mutation-independent manner

## Questions?

---

Aditya Venkatesh, Ph.D.

Senior Scientist

[avenkatesh@stoketherapeutics.com](mailto:avenkatesh@stoketherapeutics.com)

Dawn Kalmar

Corporate Communications and Investor Relations Contact

[dkalmar@stoketherapeutics.com](mailto:dkalmar@stoketherapeutics.com)