

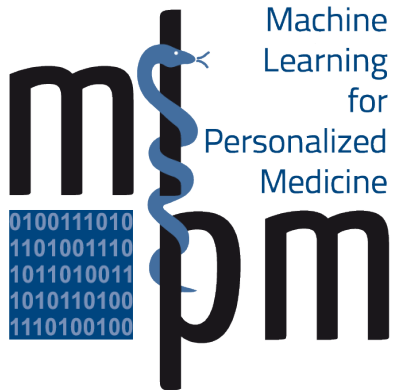


The  
University  
Of  
Sheffield.

# 'Mouse models of motor neuron disease; scientific and ethical aspects'

**Dr Richard Mead**  
**Kenneth A Snowman - MND**  
**Association Lecturer**  
Dept. Neuroscience, University of Sheffield

**MLPM Summer School**  
**21-25 September 2015**  
**Museum of Science and Industry**  
**Manchester, UK**





The  
University  
Of  
Sheffield.



# Overview

- Ethics of animal research
- UK law and regulations
- Background on MND
- Mouse models of MND



# Why do we need animals in biomedical research?

- Currently impossible to model intact physiological systems *in vitro* or *in silico*
  - e.g. Immune system, nervous system
- Even if it were possible – we would still need to confirm a model prediction at some point *in vivo*

# Three main types of research involving animals

- Advancing scientific knowledge
  - How animals behave, develop or function
- As models of human disease and to develop interventions
- In toxicity testing of pharmaceuticals and chemicals (including environmental toxicity testing)
- (Teaching)

# Ethical aspects

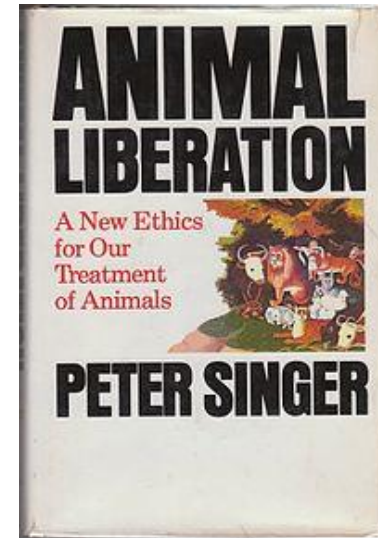
- Animal research causes harm to animals
  - Pain, suffering, death
- Is it justifiable for one species to cause harm to another, primarily for the benefit of the first species?
  - Speciesism
- (Does research in animals produce useful results?)

# Are Human interests special?

- Humans are morally distinctive (clear-line view)
- Hierarchy of moral importance (sliding scale view)
- No categorical distinction (moral equality view)

# Speciesism

- Popularised by Peter Singer in 'Animal Liberation' (1975)
  - Utilitarian approach
    - The greatest good of the greatest number
  - The boundary between humans and other animals is arbitrary
  - Animals share the capacity to suffer with humans
  - Speciesism violates the principle of equal consideration of interests (as does racism, sexism)



# The Law (UK)

- Animals (Scientific Procedure) Act 1986
- Revised 1 January 2013 to transpose European Directive 2010/63/EU
- Criminal Act -can be enforced by prosecution through the courts
- Implemented by the Home Office in the UK
  - Grant licenses (Project, Personal, Establishment)
  - Inspection regime



# Animals (Scientific Procedure) Act 1986

- Utilitarian approach (sliding scale view) to ethical justification of animal research
  - Benefits (to animals and humans) must outweigh the costs (harm) to animals
  - Ethical review of licenses required

# Animals (Scientific Procedure) Act 1986

5)The Secretary of State shall not grant a project licence unless he is satisfied—

(a)that the purpose of the programme to be specified in the licence cannot be achieved satisfactorily by any other reasonably practicable method not entailing the use of protected animals; and

(b)that the regulated procedures to be used are those which use the minimum number of animals, involve animals with the lowest degree of neurophysiological sensitivity, cause the least pain, suffering, distress or lasting harm, and are most likely to produce satisfactory results

**The 3 'R's**



# The 3Rs

- **Replacement** – methods which avoid or replace animals (protected under the UK ASPA) in areas where they otherwise would have been used
- **Reduction** – methods which minimise the number of animals used, or maximise the information gained from a given number of animals
- **Refinement** – improvements to husbandry and procedures which minimise actual or potential pain, suffering, distress or lasting harm and/or improve animal welfare



Russel and Burch 1959



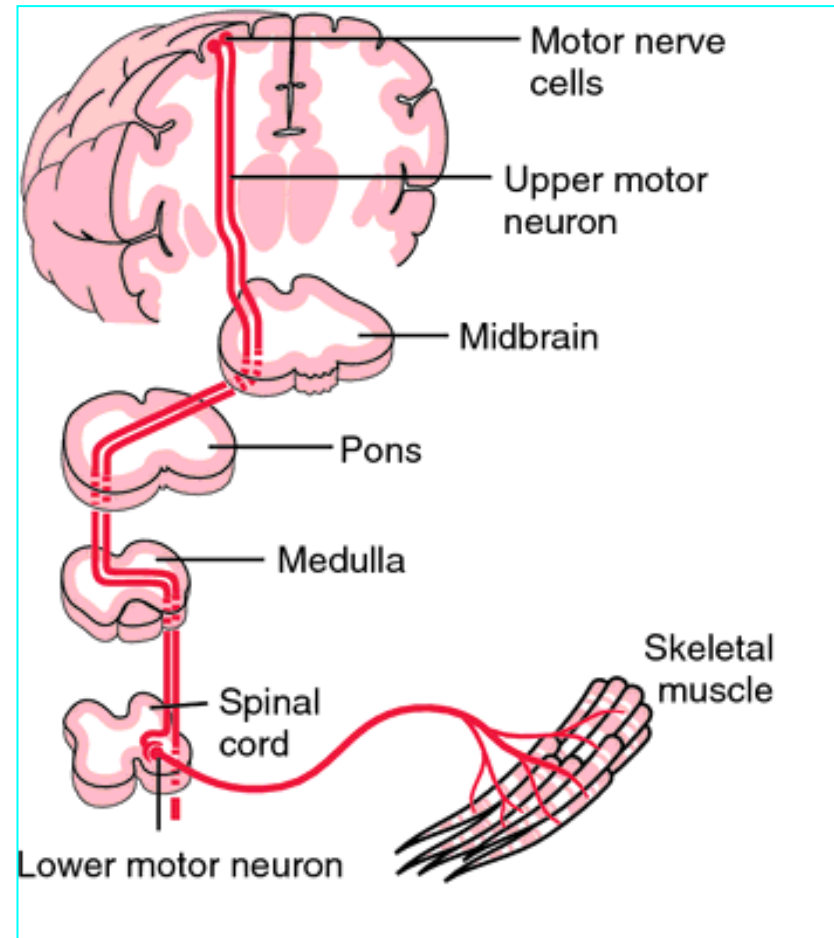
The  
University  
Of  
Sheffield.

# **BACKGROUND ON MOTOR NEURON DISEASE/AMYOTROPHIC LATERAL SCLEROSIS**



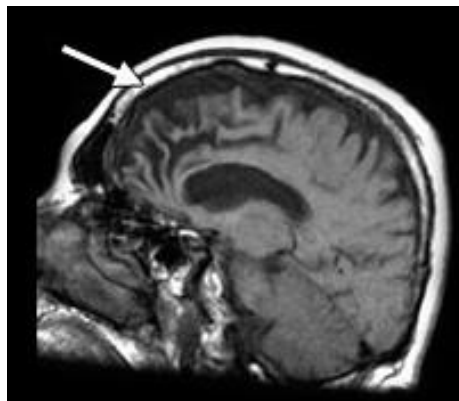
# Motor neurone disease: Overview

- Most common form of MND
- Adult onset neurodegenerative disease
- Upper and lower motor neuron degeneration.
- Life expectancy following diagnosis is around 2.5 years.
- Riluzole prolongs life by up to 3 months.
- 5000 people with the disease at any one time in the UK
- Lifetime risk is  $<1/100000$



# Motor neurone disease: Clinical consequences

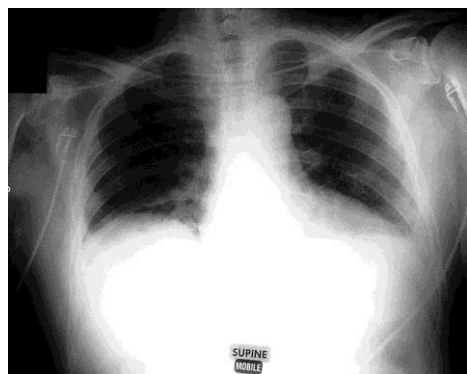
## Cognitive changes



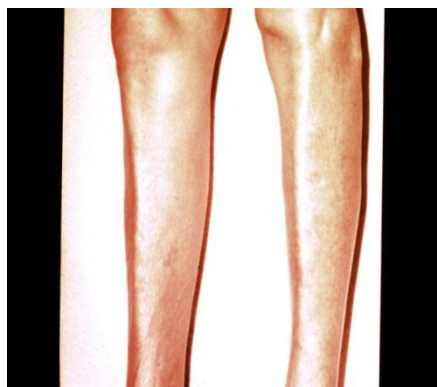
## Upper limb



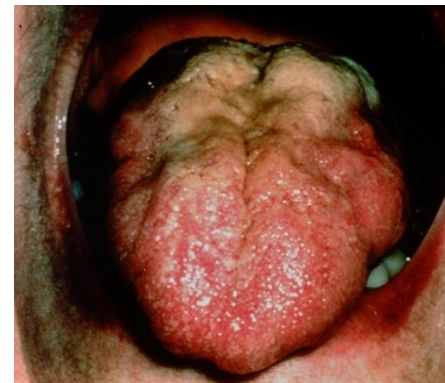
## Respiratory



## Lower limb



## Bulbar





# Genetics of MND

ALS Locus	Onset	Pattern	Locus	Gene	Protein
ALS1	J	AD/AR	21q22.1	SOD1	Cu/Zn Superoxide Dismutase
ALS2	A	AR	2q33.35	ALS2	Alsin
ALS3	A	AD	18q21	Unknown	Unknown
ALS4	J	AD	9q34	SETX	Senataxin
ALS5	J	AD	15q15-21	SPG11	Spatacsin
ALS6	A	AD	16p11.2	FUS	Fused in Sarcoma Protein
ALS7	A	AD	20p13	Unknown	Unknown
ALS8	A	AD	20q13.33	VAPB	VAMP-associated Protein B

But... Only 5-10% of MND has a genetic cause (familial), the rest is apparently sporadic

					Protein
ALS15			Xp11.21	UBQLN2	Ubiquilin 2
ALS16			9p13.3	SIGMARI	Sigma non-opioid Intracellular Receptor
ALS18			17p13.3	PFN1	Profilin 1
ALS/FTD1	A	AD	9q21-22	C9ORF72	C9ORF72
ALS/FTD2	J	AD	9p13.2-21.3	Unknown	Unknown

# Risk factors

- Age
- Sex
- Physical activity
  - Being an Italian footballer (!)
- Trauma (fractures, head injury)

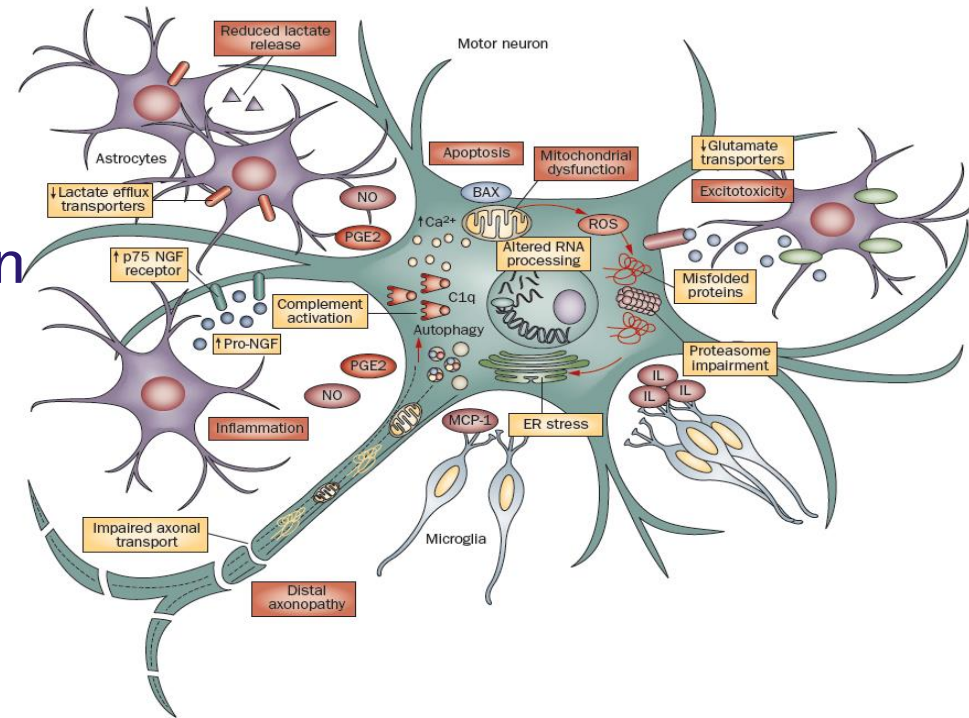






# Disease mechanisms

- Excitotoxicity
- Oxidative stress
- Mitochondrial dysfunction
- Protein aggregation
- ER stress
- Axonal transport defects
- Glial toxicity
- Inflammation
- RNA processing

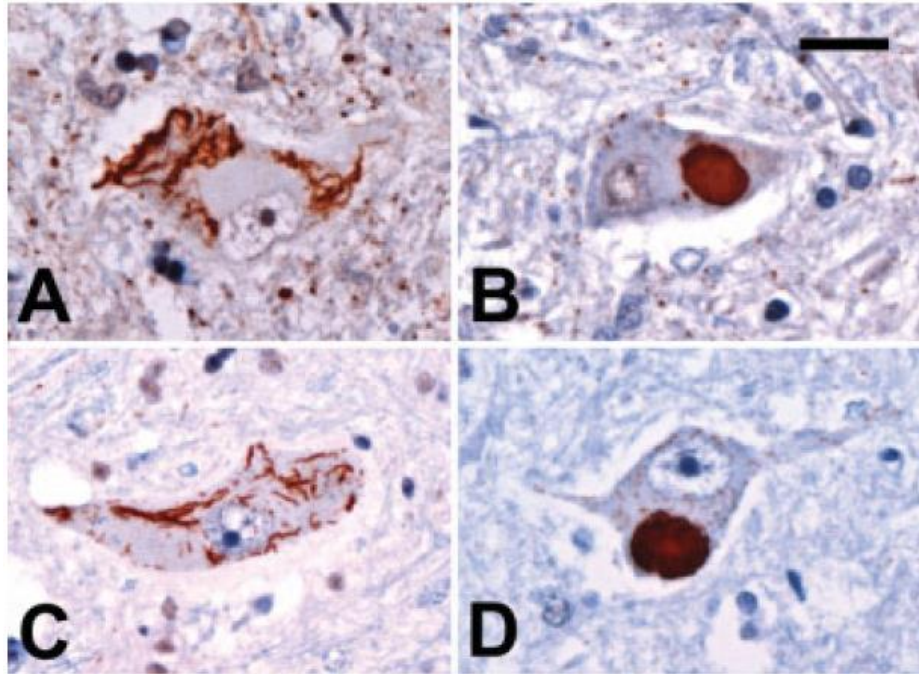


Ferraiuolo et al Nature Reviews Neurology 2011



# Pathology

Sporadic



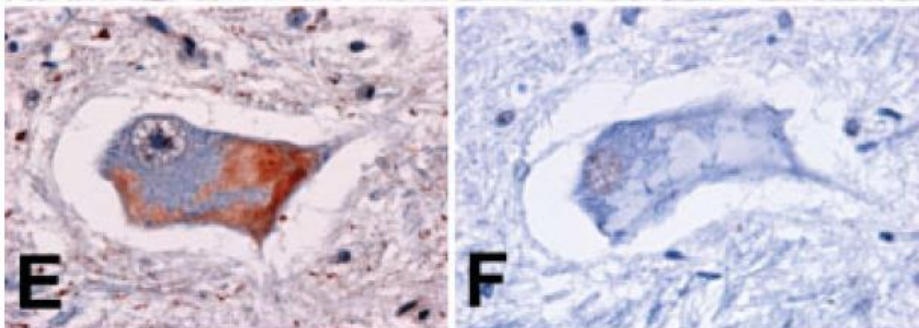
Ubiquitin

TDP-43

Ubiquitin

TDP-43

SOD1



Mackenzie, I.R., et al.,  
Ann Neurol, 2007. **61**(5):  
p. 427-34.

# Ideal preclinical MND model

- Replicate genetics of MND
- Replicate selective vulnerability of motor neurones
- Show progressive motor neuron degeneration and death with associated motor deficits (+/- cognitive deficits)
- Same pathology at end-stage (ubiquitinated inclusions, TDP43+ inclusions, loss of nuclear TDP-43)
- Robust and reproducible
- Respond to treatment with Riluzole



# Transgenic models

	<b>SOD1</b>	<b>TDP43</b>	<b>C9ORF72</b>
<b>Genetics</b>	5-10% familial 0.5-1% overall	5% familial 0.5% overall	40% familial 8-10% sporadic ~13% Overall?
<b>Selective vulnerability</b>	+++	++	Models being developed
<b>MN degeneration</b>	+++	++ (model dependent)	?
<b>Pathology</b>	+/-	++	?
<b>Robust and reproducible</b>	Yes (on right background)	?	?
<b>Riluzole works?</b>	+/-	?	?
<b>Broadly representative of MND?</b>	+	+++	++

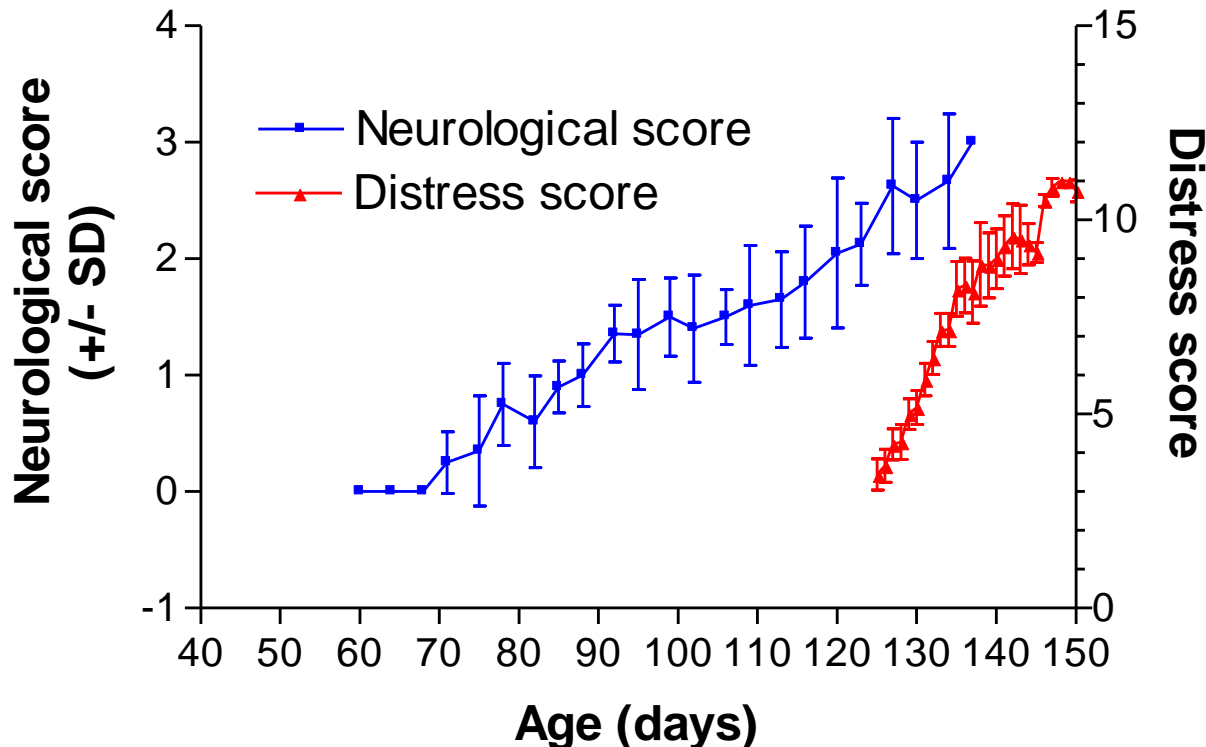


The  
University  
Of  
Sheffield.

# **SOD1<sup>G93A</sup> TRANSGENIC MOUSE MODEL OF MND**



# Disease progression in SOD1<sup>G93A</sup> transgenic mice



## Neurological Score (NS)

- 0.5 Onset (tremor, splay defect)
- 1 Abnormal gait
- 2 Dragging Hind-limb
- 3 Hind-limb paralysis
- 4 Humane end-point (loss of righting reflex >10s)

**Distress Score** (based on weight loss, provoked behaviour, appearance and NS)

- 0-5 Normal/mild
- 6-10 Moderate
- 11-15 Severe

# The problem

- “Results in the SOD1G93A transgenic mouse model do not translate to the clinic”
- Compounds taken forward from positive mouse studies to the clinic have failed e.g.
  - Minocycline (worsened progression), Ceftriaxone, Celecoxib, Gabapentin
- Mechanistic Issues?
  - Not a TDP43 ‘proteinopathy’
- Technical issues
  - Poor study design, variable model, publication bias
  - Translation pathway

# The SOD1<sup>G93A</sup> model

- ALSTDI tested >70 compounds in 221 studies, 18000 mice
- Identified confounding factors in mixed background (SJLBL6) SOD1<sup>G93A</sup> transgenic mouse model of ALS
  - Censor non-ALS deaths
  - Litter match control and treatment
- Unable to replicate any published studies
- ‘Scott guidelines’ (S. Scott, et al. Amyotroph Lateral Scler, 2008. 9(1): p. 4-15.)
- Generic guidelines (A. C. Ludolph, et al. Amyotroph Lateral Scler, 2010. 11(1-2): p. 38-45. )



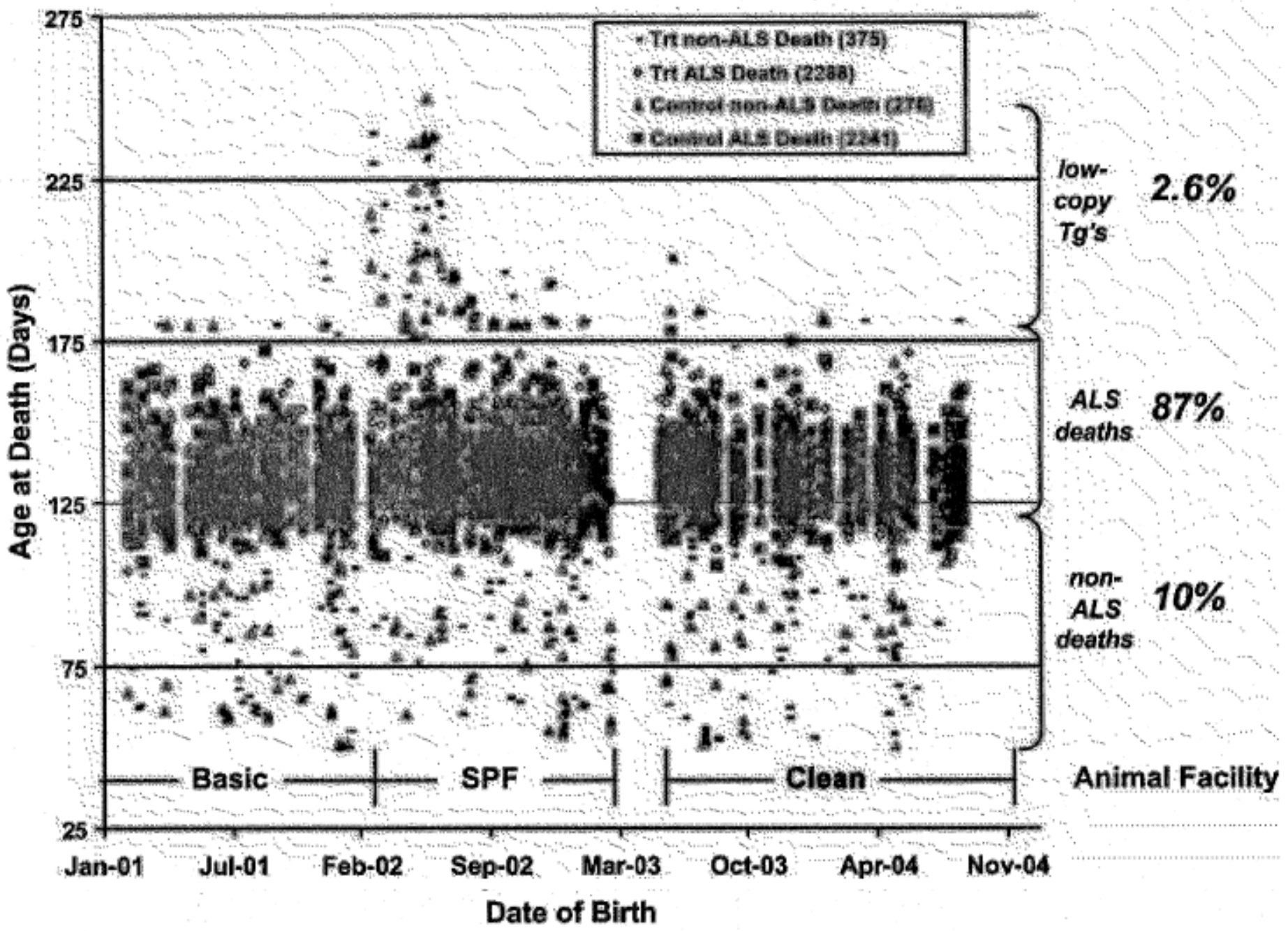


# ALSTDI replication studies

Drug(s)	Published studies					Retest with ALSTDI study design <sup>1</sup>					
	<i>n</i>		Survival (days)			Lifespan extension	<i>n</i>		Survival (days)		Lifespan extension
	Control	Treated	Control	Treated	Censored <sup>2</sup>		Control	Treated	Control	Treated	
					per group at start	Control	Treated	Control	Treated		
WHI-P131 (27)	24	28	134	200	49.00%	40	34	30	133.9	136.4	1.86%
Celebrex 0.012% (28)	12	12	126	150.2	19.00%	90 <sup>3</sup>	88	64	129.8	130.5	0.52%
Celebrex 1500 ppm in chow (21)	27	28	NA	NA	25.00%						
Creatine 2% (28)	12	12	126.1	151.4	19.80%	40	38	39	126	126.9	0.67%
Creatine 2% (29) <sup>4</sup>	6	7	143.7	169.3	17.80%						
Minocycline 50 mpk (33) <sup>5</sup>	7	7	130.3	150.9	15.80%	48*	47	44	135.7	134.9	-0.60%
Ceftriaxone, 200 mpk (36) <sup>6</sup>	20	20	122	135	10.70%	63	59	62	128	129.3	1.02%
Riluzole 0.1 mg/ml in water (~22mpk) (19)	8	8	134	148	10.4%	40	34	35	132.3	134.9	1.96%
Riluzole 24 mpk in chow (20)	11	10	127	140	10.2%						
Riluzole 44 mpk in chow (20)	11	11	127	139	9.4%						
PBA (Sodium phenylbutyrate) at 400 mpk (37)	20	20	125.7	153.2	21.9%	24	24	22	132.6	132.4	-1.75%
Thalidomide, 50 mpk (38) <sup>7</sup>	10	10	130	145	12%						
Thalidomide, 100 mpk (38)	10	12	130	151	16%	24	22	22	134.5	131.9	-1.93%
Thalidomide, 200 mpk						76	73	73	130.2	133	2.20%

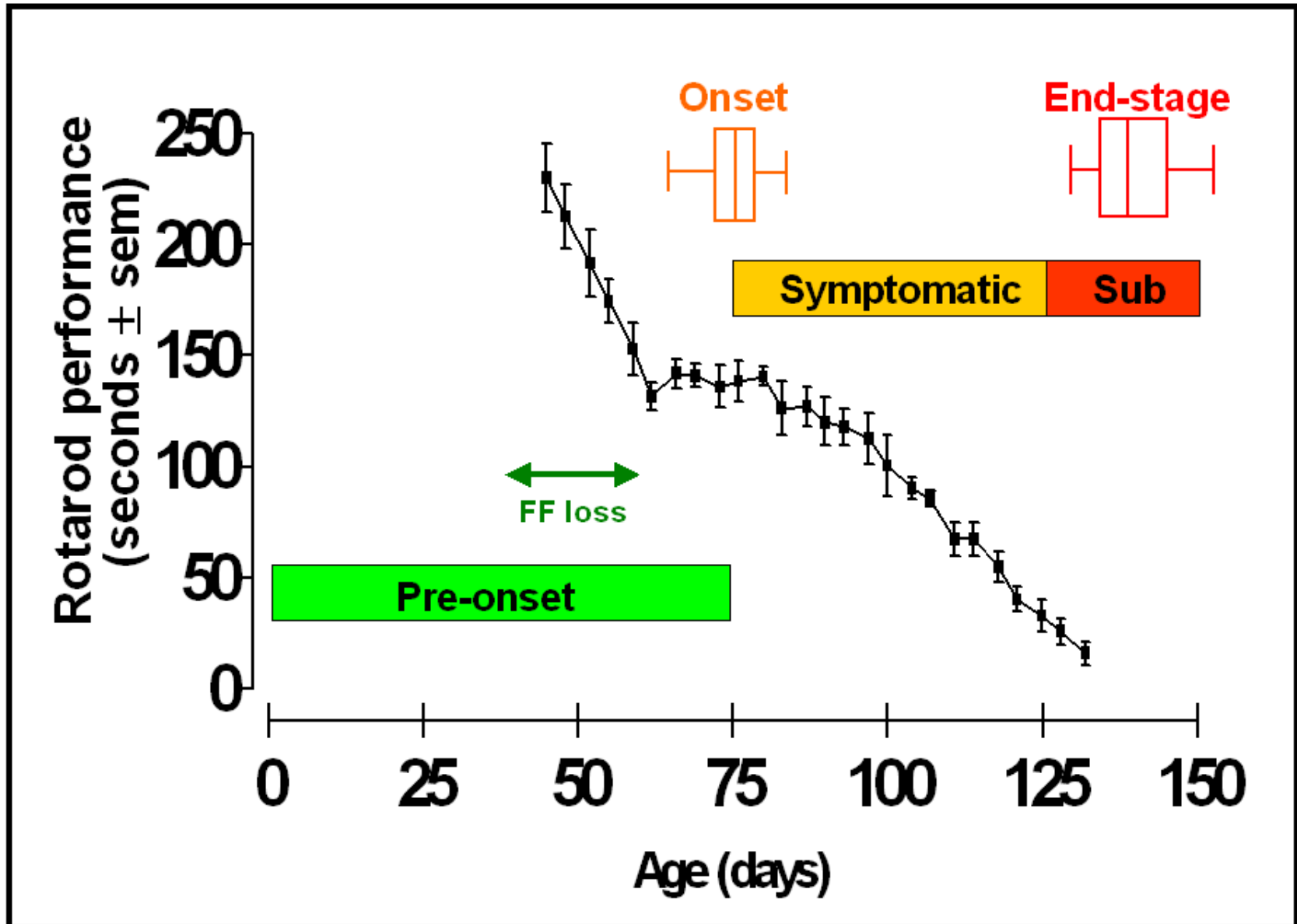
# Our approach to the ALS mouse model

- B6SJL-Tg (SOD1-G93A)1Gur/J (stock number 002726)
  - Transgenic for human SOD1<sup>G93A</sup> gene (~23 copies) driven by endogenous promoter
- Backcrossed onto the C57Bl/6 background (Harlan UK, C57Bl/6 J OlaHsd) for >20 generations
- Inbred line, homogenous genetic background.
- Approximately half the variation of the commonly used mixed genetic background
- Developed a battery of objective robust measures of disease progression
- Protocol designed to avoid common pitfalls found in the majority of published studies
- Mead et al. (2011). "Optimised and Rapid Pre-clinical Screening in the SOD1 Transgenic Mouse Model of Amyotrophic Lateral Sclerosis (ALS)." PLoS One **6(8): e23244.**





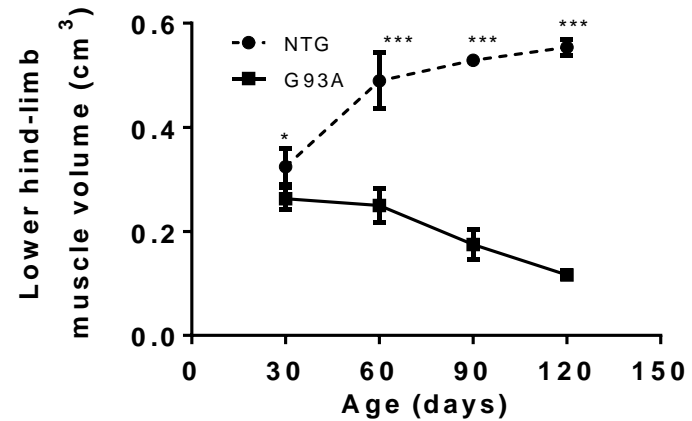
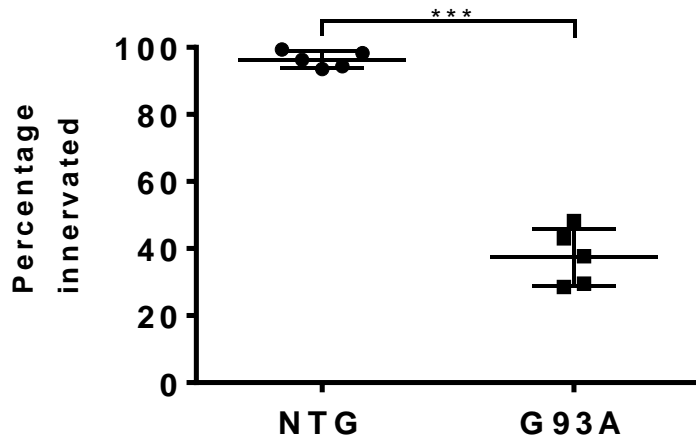
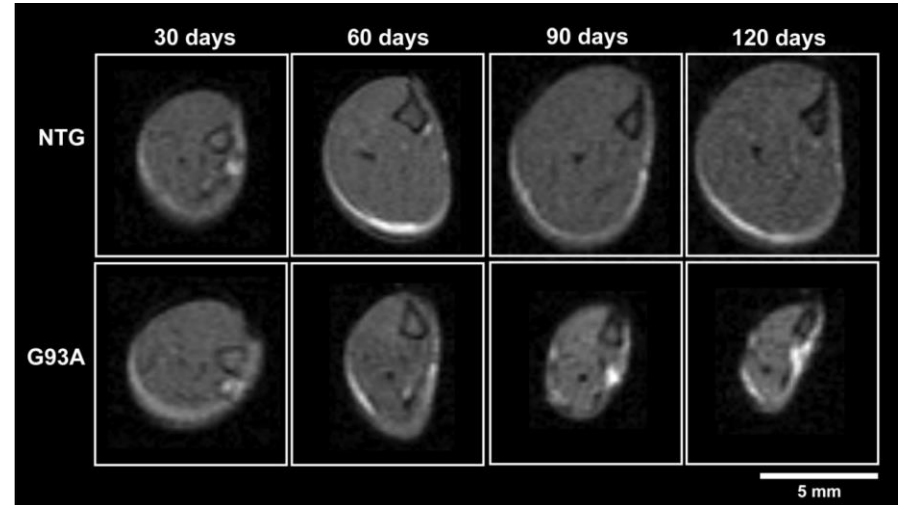
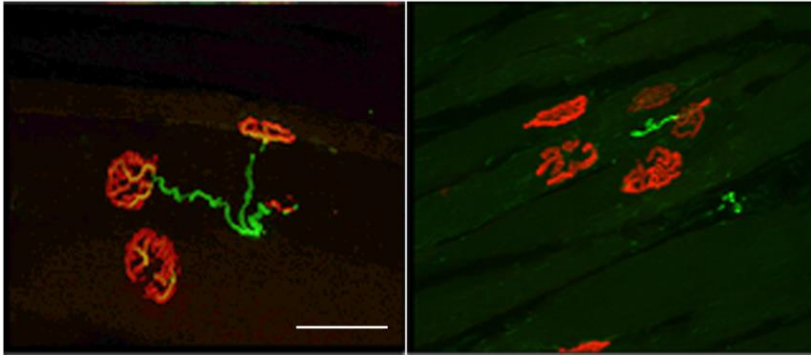
# Early rotarod defect





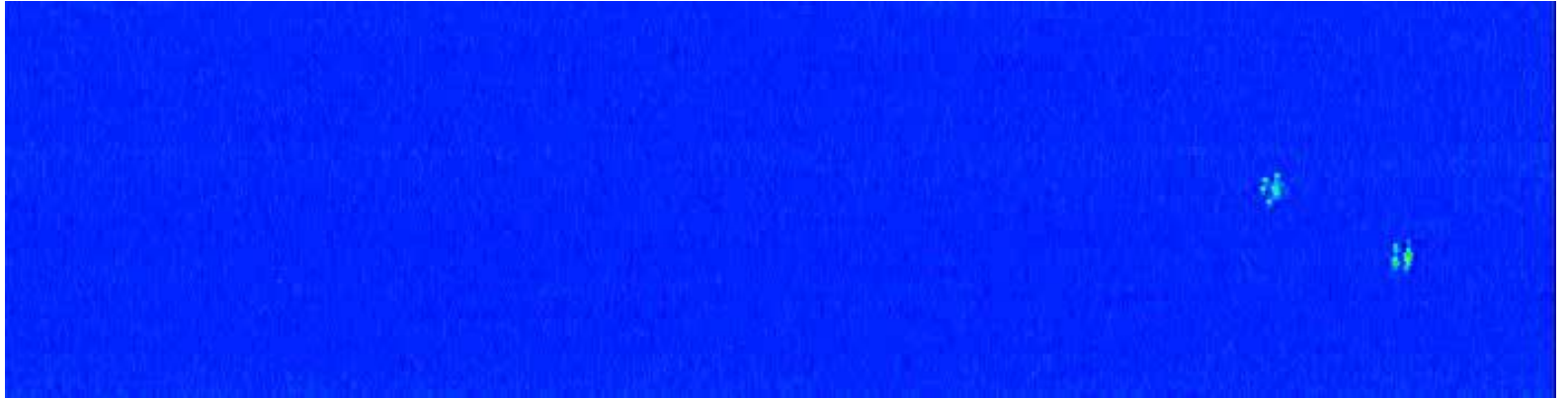
Non-transgenic

SOD1<sup>G93A</sup> transgenic

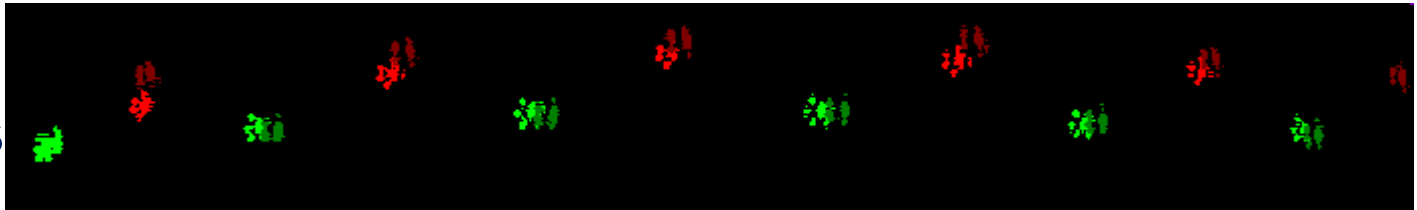




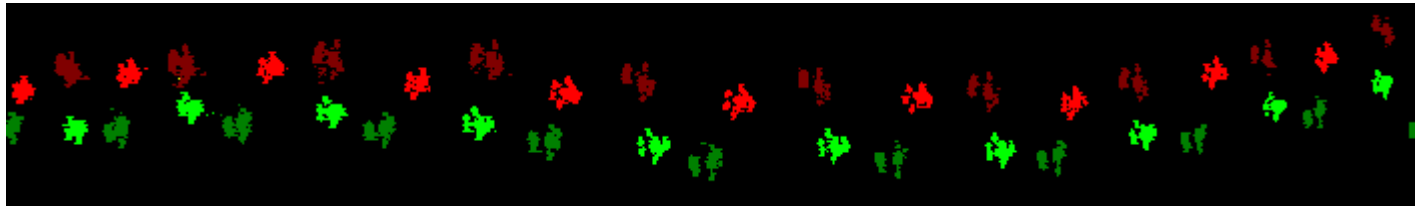
The  
University  
Of  
Sheffield.



NTG  
105 days

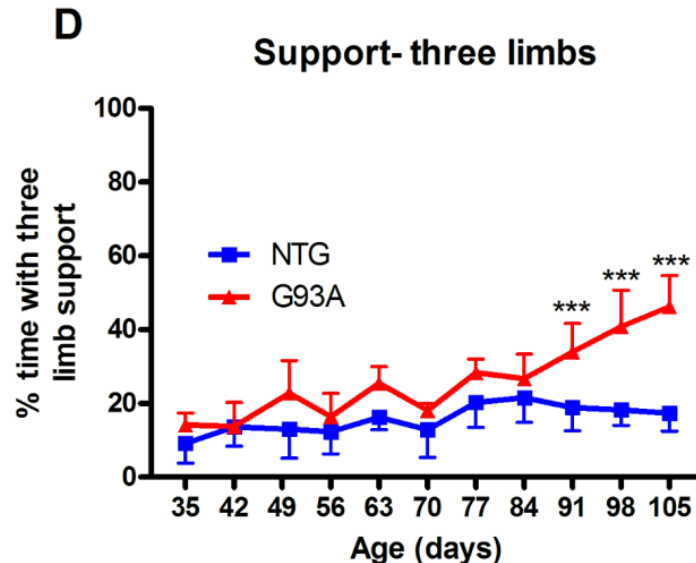
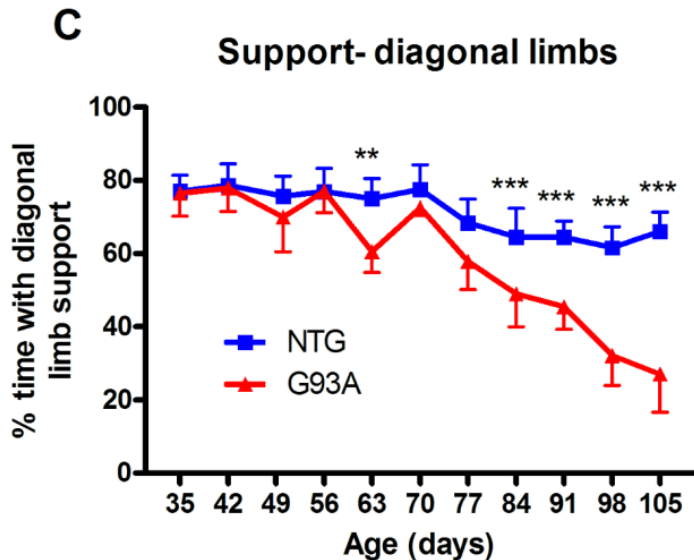
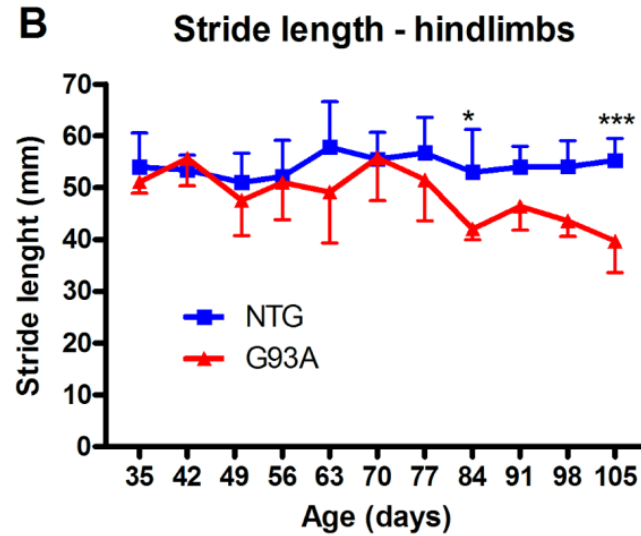
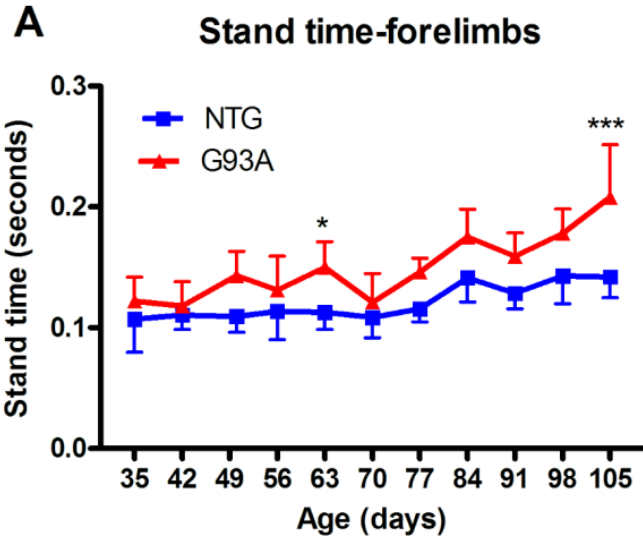


G93A  
105 days

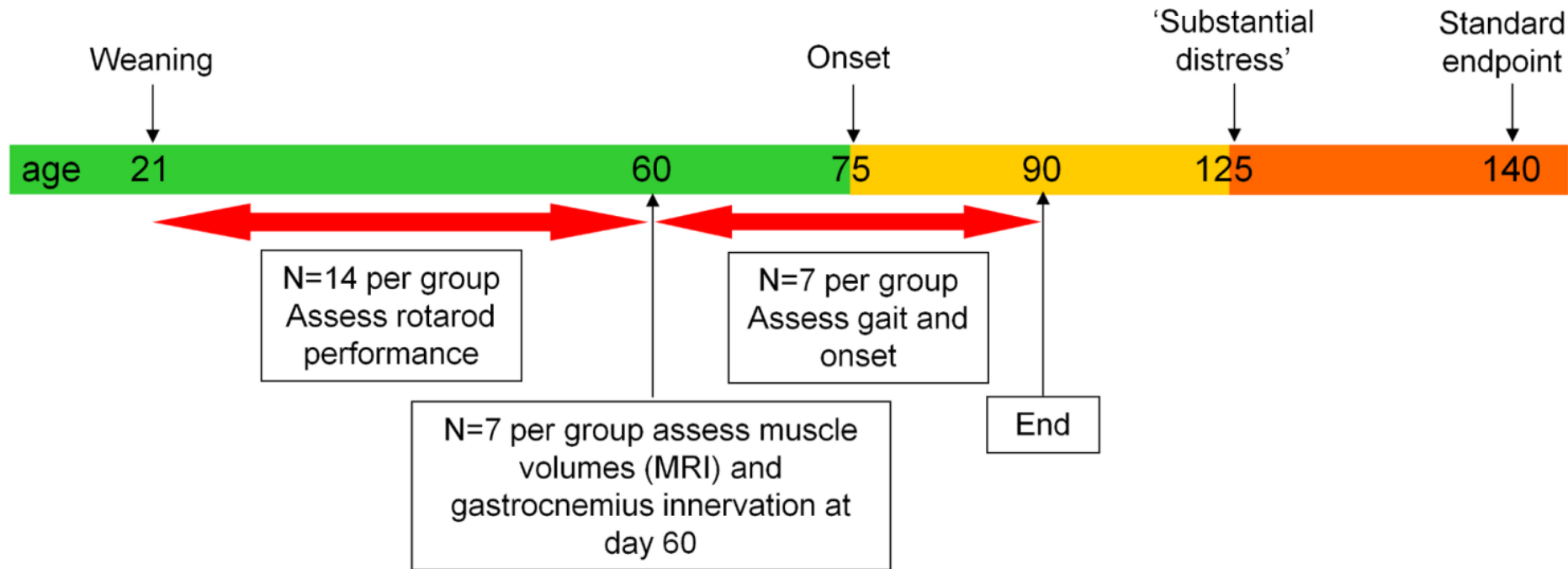




# Catwalk gait analysis



## 'Rapid' screening in G93A model





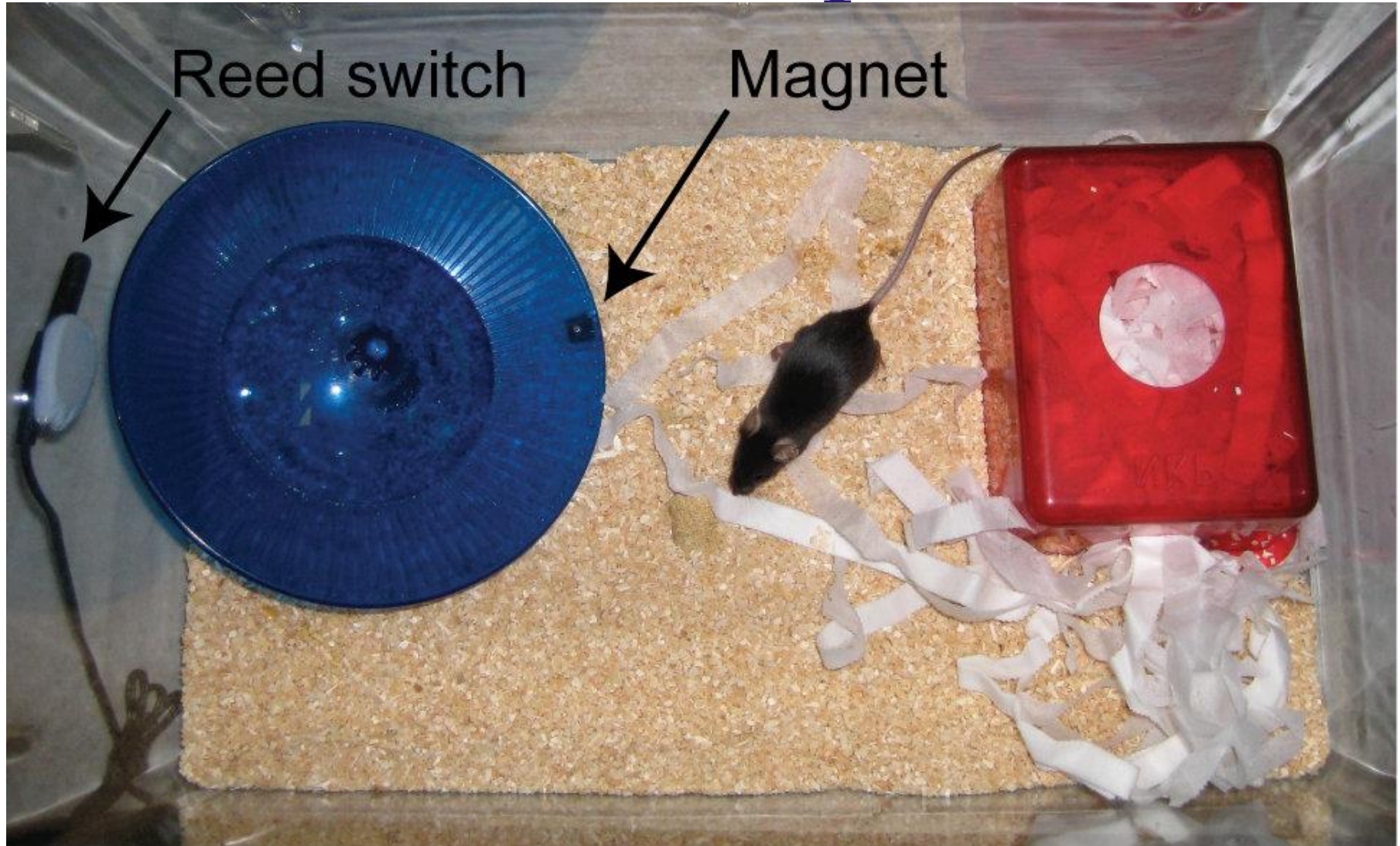


The  
University  
Of  
Sheffield.

**COULD WE IMPROVE ON  
THE ROTAROD TEST?**



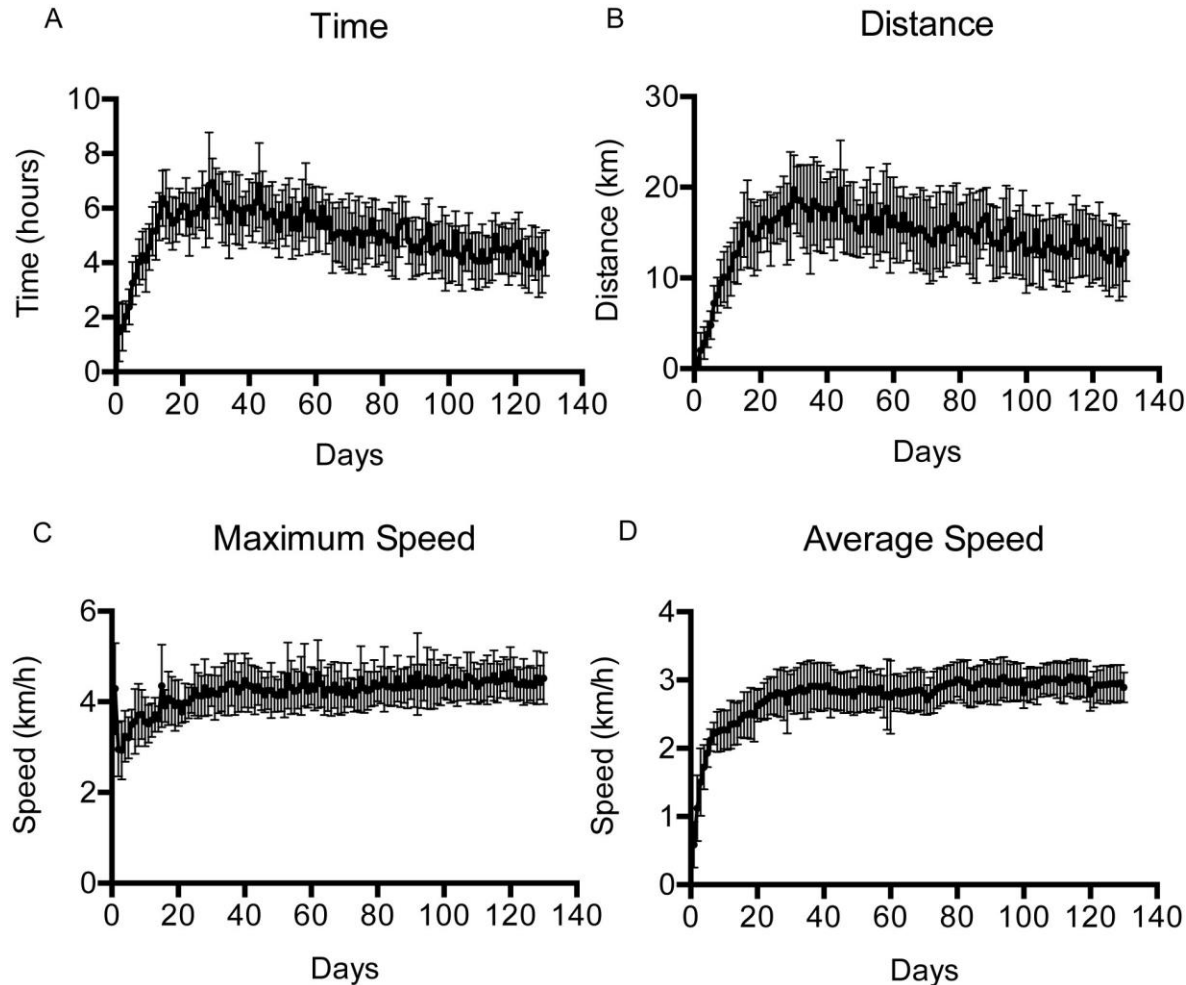
# Fast trac running wheel setup







# Wild-type mouse data

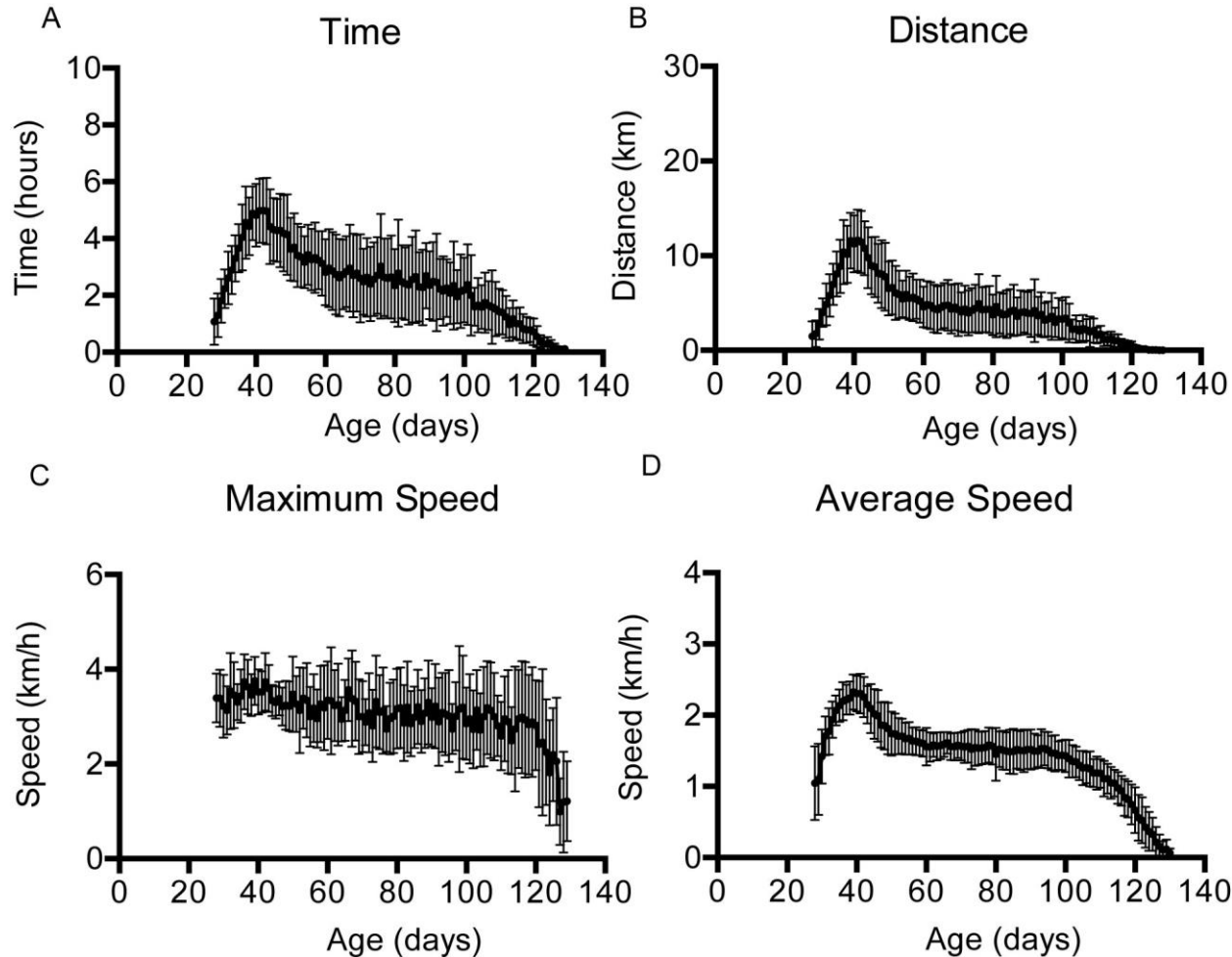


At peak ~

- 6 hours running time (mean during plateau phase  $5.06 \pm 0.70$  hours/day)
- Average distances of 15-20 km (mean during plateau phase  $15.07 \pm 1.78$  km/day.)



# SOD1<sup>G93A</sup> data

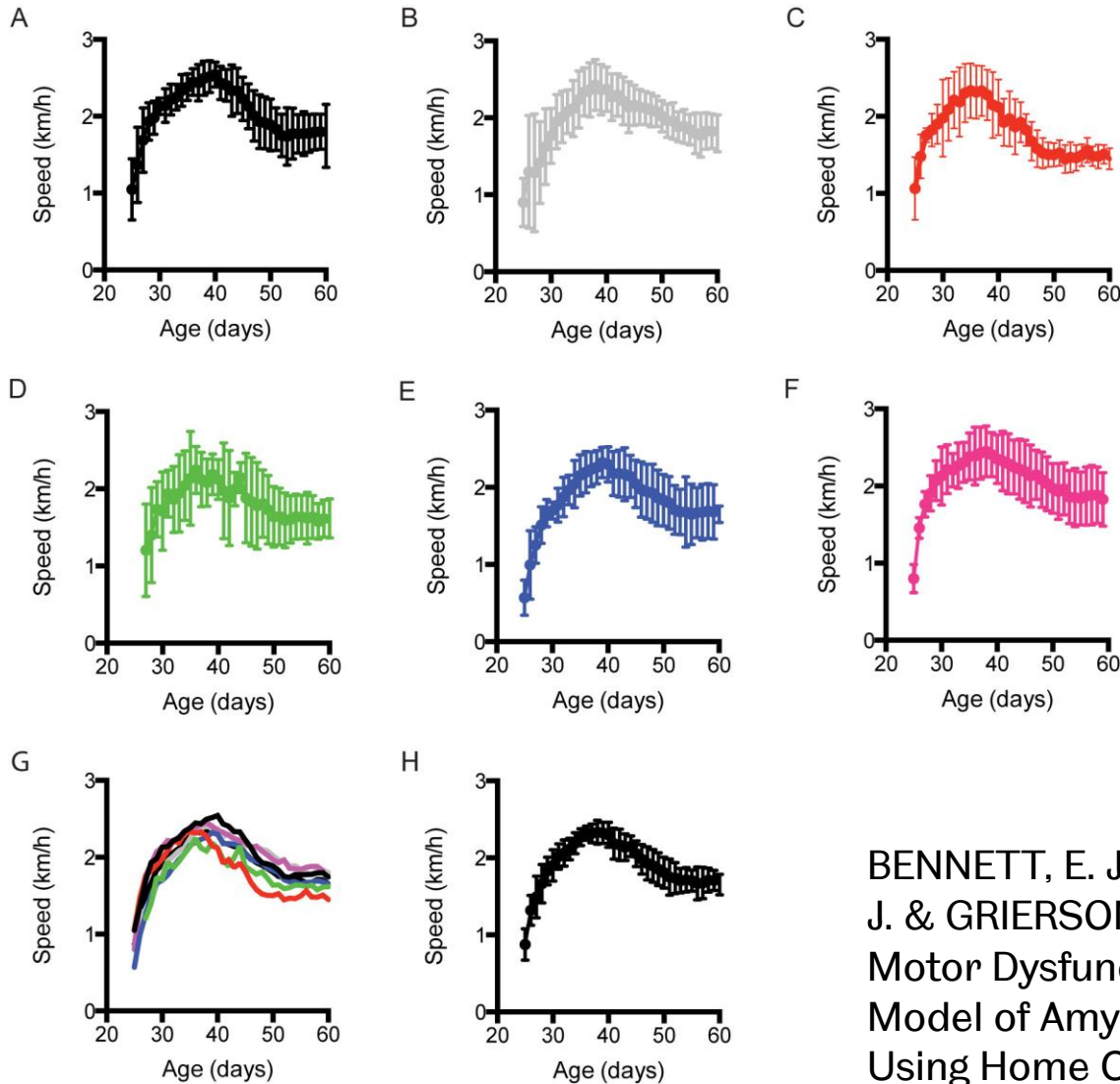


Statistical power analysis for a 10 day extension in time to reach a 20% decline in average speed:

- **Rotarod** test would require **14** mice per group.
- **Fast Trac** methodology would require **5** mice per group.



# Reproducibility

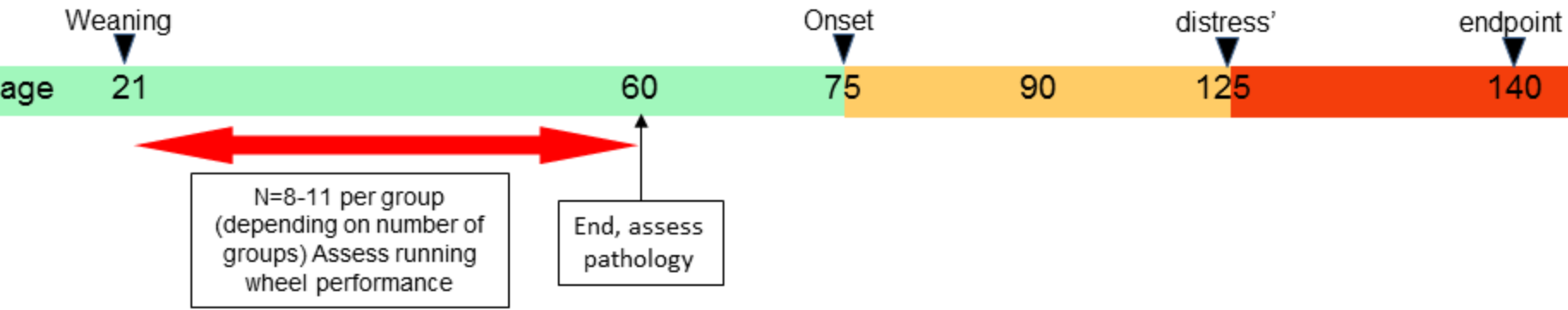


- Control groups from 6 therapeutic studies
- Between study CV for time to reach a 20% decline in average speed is **3.9%**.

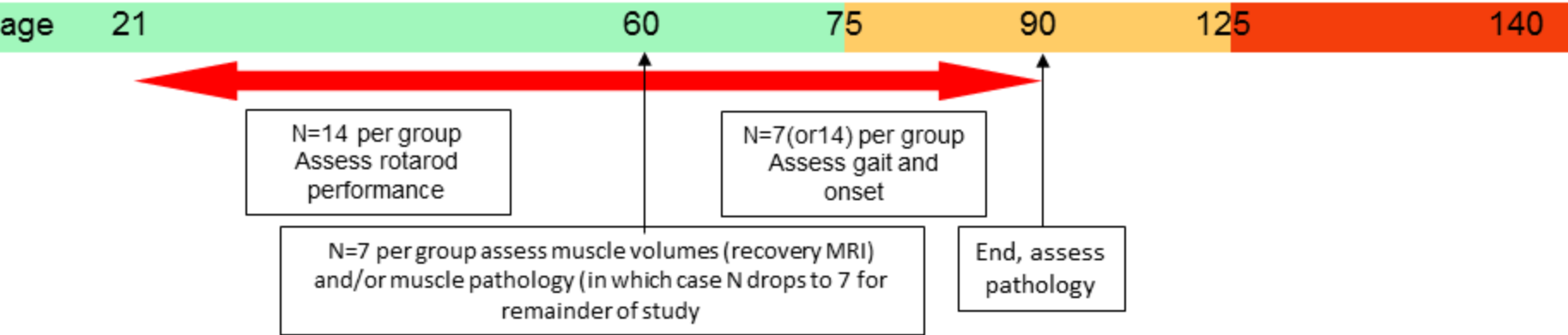
BENNETT, E. J., MEAD, R. J., AZZOUZ, M., SHAW, P. J. & GRIERSON, A. J. 2014. Early Detection of Motor Dysfunction in the SOD1G93A Mouse Model of Amyotrophic Lateral Sclerosis (ALS) Using Home Cage Running Wheels. *PLoS One*, 9, e107918.

# Screening paradigms in the SOD1<sup>G93A</sup> mouse model of MND available at SITraN

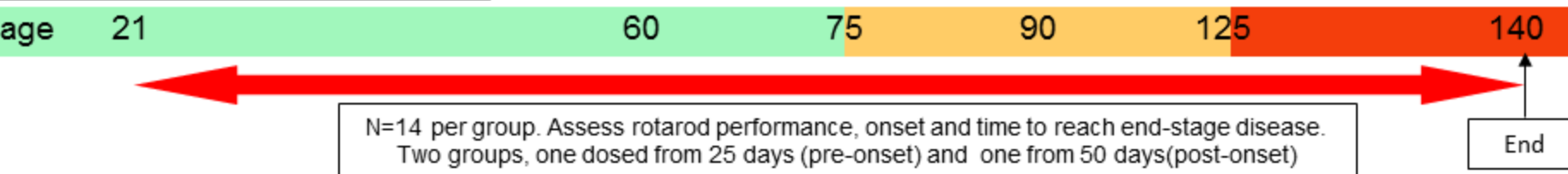
## 1/ Fastrac running wheel study



## 2/ Confirmatory study



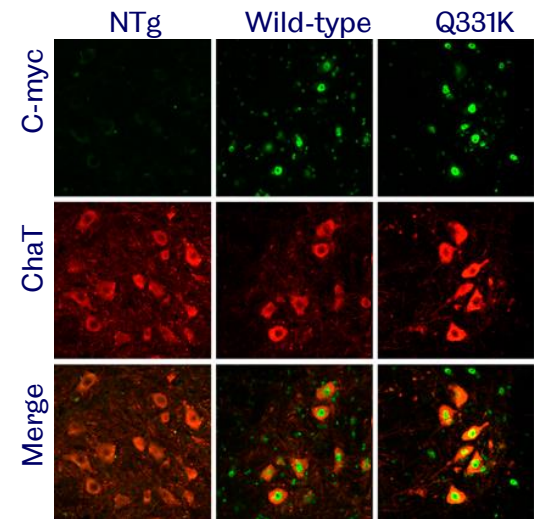
## 3/ Survival study



- C-myc tagged human TDP43 (TDP43<sup>Q331K</sup> and TDP43<sup>WT</sup>) expressed using a murine prion-promoter, previously reported to drive transgene expression abundantly in the CNS
- Relatively low level of transgene expression, originally designed to match the expression level of the endogenous mouse gene and matching expression in the mutant to that in the wild-type mice

TDP-43<sup>Q331K</sup> mice show:

- Widespread alterations in gene splicing
- Reduced rotarod, performance
- Reduced grip strength,
- Motor neuron and motor axon loss
- TDP43 shows no signs of mislocalisation
- Disease progression plateaus at 10 months



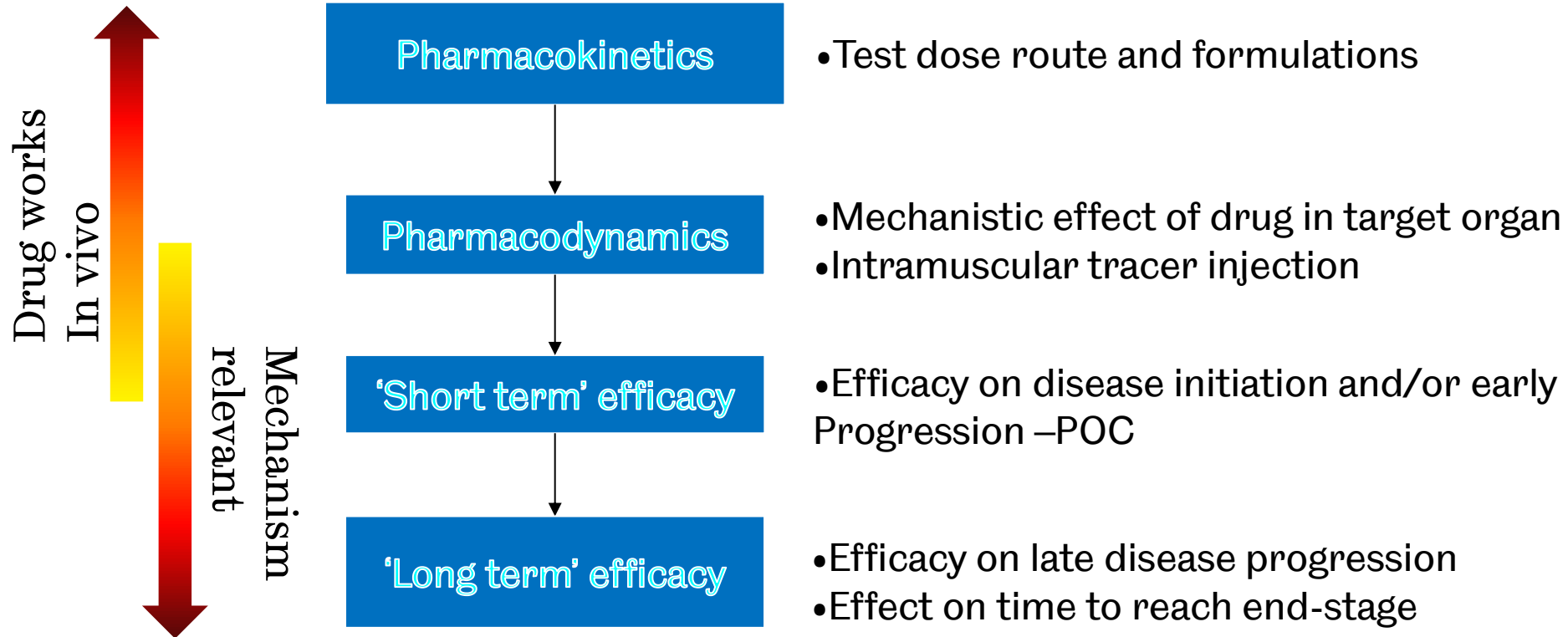
ARNOLD, E. S., LING, S.-C., HUELGA, S. C., LAGIER-TOURENNE, C., POLYMENIDOU, M., DITSWORTH, D., KORDASIEWICZ, H. B., MCALONIS-DOWNES, M., PLATOSHYN, O., PARONE, P. A., DA CRUZ, S., CLUTARIO, K. M., SWING, D., TESSAROLLO, L., MARSALA, M., SHAW, C. E., YEO, G. W. & CLEVELAND, D. W. 2013. ALS-linked TDP-43 mutations produce aberrant RNA splicing and adult-onset motor neuron disease without aggregation or loss of nuclear TDP-43. *Proceedings of the National Academy of Sciences of the United States of America*, 110, E736-E745.







# Preclinical pathway



**As much a test of the drug as the model**

**Lack of efficacy data meaningless without exposure data**

# Many Thanks



## Funding

Family of A. Kenneth Snowman and the MND Association, NC3Rs, Wellcome trust, MRC

## SITraN

Prof Dame Pamela Shaw  
Prof Mimoun Azzouz  
Dr Andy Grierson  
Dr Adrian Higginbottom

## Preclinical MRI facility (Sheffield)

Aneurin Kennerley  
Jason Berwick (Psychology)  
Paul Sharp (Psychology)

## Staff/Students

Dr Ellen Bennett, SOD1 mouse models  
Jodie Stephenson, TDP-43 mouse  
Stephanie Gentles, BG12 project  
Dr Nazia Maroof, AZD1080 project  
Matthew Sellwood, KEAP1 project  
Heledd Brown-Wright, GPCR project

## Aix Marseille Universite', France

Claire Sunyach  
Brigitte Pettmann

