

**Summary:**

ASDERA is proposing an exclusive / non-exclusive license or collaboration on new treatments for Alzheimer's/Parkinson's/Huntington's disease (AD/PD/HD), MS and ALS, with first trials ready for NDA within 2.5 years.

**Field:**

A pharmaceutical intervention comprising novel derivatives ASD-005 of Hydroxypropyl- $\alpha$ -cyclodextrin (HP $\alpha$ CD) for the treatment of neurodegenerative diseases (ND).

**US Market** (at \$20,000/yr/pp)

10% of 5.5M  $\nearrow$  AD = US\$11.0B/yr  
 10% of 1.0M  $\nearrow$  PD = US\$ 2.0B/yr  
 10% of 0.5M  $\nearrow$  MS = US\$ 1.0B/yr  
 HD/ALS: orphan diseases

**Patent status**

Internat. composition-of-matter (CoM) patent applications  
 PCT/US2018/051604  
 Priority date: March 20, 2016.  
 Inventor: Knut M. Wittkowski,  
 Assignee: ASDERA LLC

**Development status**

505(b)(2): IND/ODD-ready at \$500K each for preparation for 2b/3 trials. The first clinical studies are planned in HD, ALS, GBA-PD, and PP-MS.

**Relevant Publication**

Wittkowski KM, Dadurian C, Kim HS, Hoshino A, Lyden D. (2018). (Wittkowski 2018) <http://www.doi.org/10.1371/journal.pone.0199012>

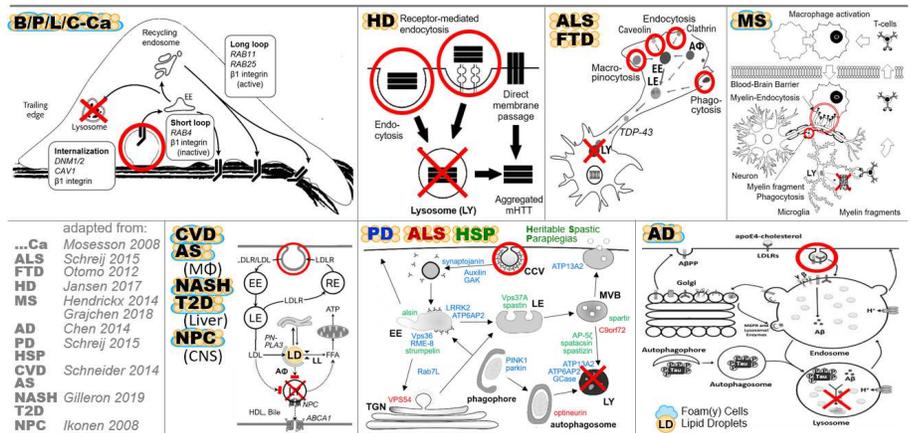
**A Lipid-Carrier Nano-Device Against  
Progression in Neurodegenerative Diseases (ND)**

**Background / Unmet Need**

ND affect >7M US people, yet no disease-modifying treatments are available. Many of the PD patients develop dyskinesias and the effects of symptomatic treatments "wear off". GBA-associated PD often manifests at younger age and causes more significant cognitive impairment. Primary progressive (PP) MS also affects younger people.

**Description of the Invention**

A common component in the etiology of NDs (and cancers)<sup>(Devine 2011)</sup> is "deranged" (AD), "defective" (PD), "derailed" (cancer), "dysregulated (ALS)"<sup>(Mosesson 2008; Otomo 2012; De Franceschi 2015)</sup> endocytosis, one of the few biologic processes that do not decline with age. The invention aims to down-regulate serum phospholipids (PL) by HP $\alpha$ CDs to prevent aging cells from being overloaded and accumulating A $\beta$ /tau (AD),  $\alpha$ -syn (PD), and myelin (MS), mHTT (HD), and SOD1 (ALS).



**Proof of Concept**

$\beta$ CDs have been effective *in vivo* against cancers,<sup>(Grosse 1998; Zhang 2006)</sup> AD,<sup>(Yao 2012)</sup> and PD.<sup>(Bar-On 2006; Li 2015)</sup> HP $\alpha$ CD is more effective against breast cancer than HP $\beta$ CD <sup>(Wittkowski 2018)</sup> (see below for *in vivo* results).

**Applications**

Oral (or intrathecal) ASD-005 is effective against neurodegenerative diseases, including AD, (GBA-)PD, HD, ALS, and MS.

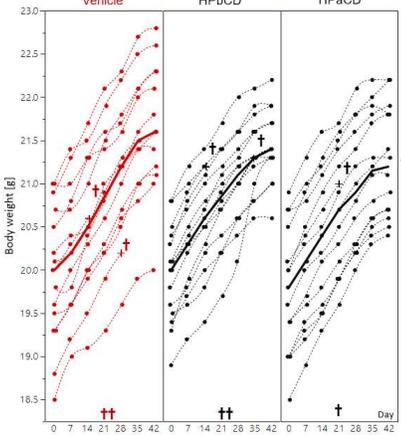
**Competitive advantages**

- Many PD patients inevitably become refractory to L-dopa.
- Treatment options for AD, HD, MS, and ALS are limited.
- HP $\beta$ CD is in Ph 2 against NPC disease, but was abandoned in ND due to the risk of permanent hearing loss (not applicable to  $\alpha$ CDs).
- $\alpha$ CD (in the US) and  $\alpha$ CDs (in the EU), are recognized as safe for oral (US: GRAS) and parenteral use (EU, US: Caverject<sup>®</sup>).

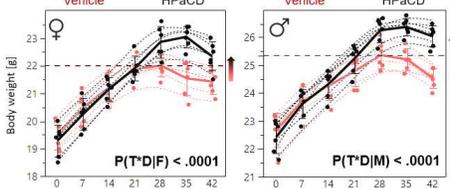
# EEC and LY Function Across Diseases and Conditions

## In vivo studies in mouse models of monogenic forms of HD and ALS

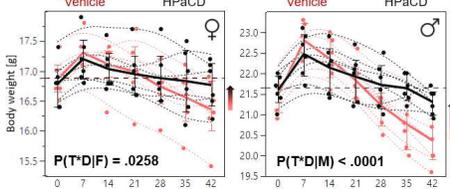
Control: HPaCD reduces **weight gain** in NGS mice



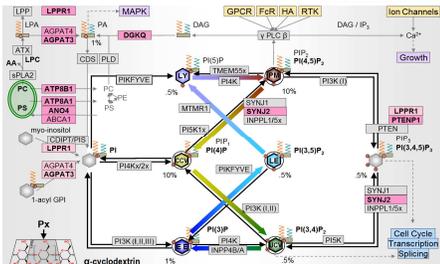
HPaCD reduces **weight loss** in SOD1 (ALS) mice



HPaCD reduces **weight loss** in HTT (HD) mice



**GWAS:** Influx of PC into the PI-cycle drives endocytosis (**GWAS**).



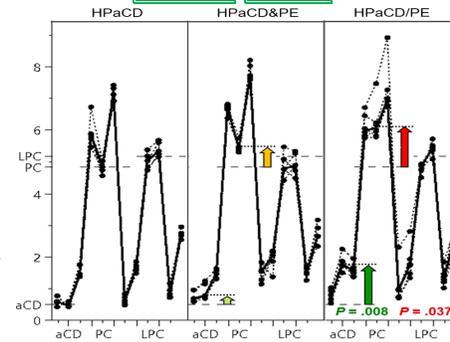
Pink: Genes significant in BCa GWAS.

**In vitro:** HPaCD is 2x as effective as the ototoxic HPβCD against migration of HR+ and TN BCa cells. (Wittkowski 2018)

**In vivo:** αCD was effective in a NPC model. (Davidson 2016) HPaCD is more effective than was HPβCD (Grosse 1998) against tumor growth, metastases, and inflammation in a BCa model (**NGS**), (see PCT)

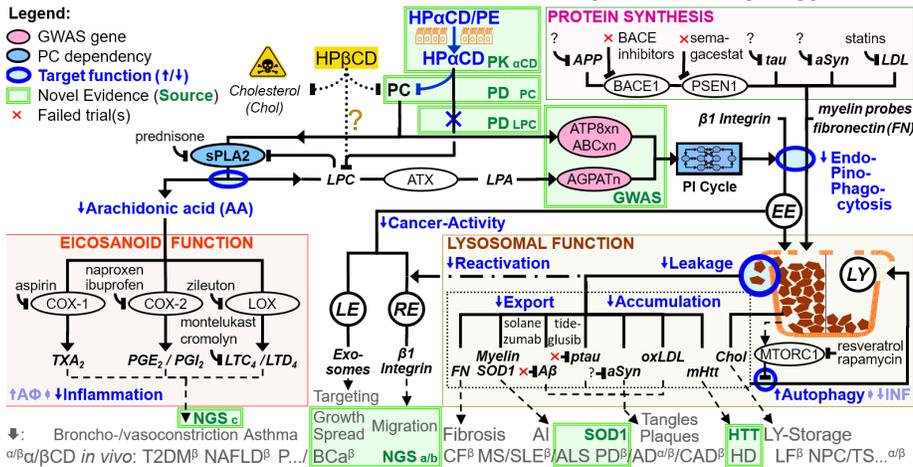
HPaCD also reduces disease-specific weight loss in models of HD (**HTT**) and ALS (**SOD1**). (above)

## Human PK aCD / PD PC



**FPLC of morning urine.** HPaCD is not absorbed; ASD-005, the HPaCD<sup>+</sup>PE (penetration enhancer) compound is absorbed better (↑) than the mixture ("&", ↑). PC is excreted proportionately (↑/↓), but lyso-PC (LPC) is not, avoiding compensatory activation of (**SPLA2**), resulting in ↓Inflammation via ↓AA in addition to ↑AF via ↓Endo-/Pino-/Phagocytosis (**PI cycle**).

## ASD-005 Reduces Inflammation and Improves Autophagy



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