

# **MASTERCLASS: CNS quantitative systems biology in the research of new drugs**

Presenters:

**Robert Carr, In Silico Biosciences, Inc.**

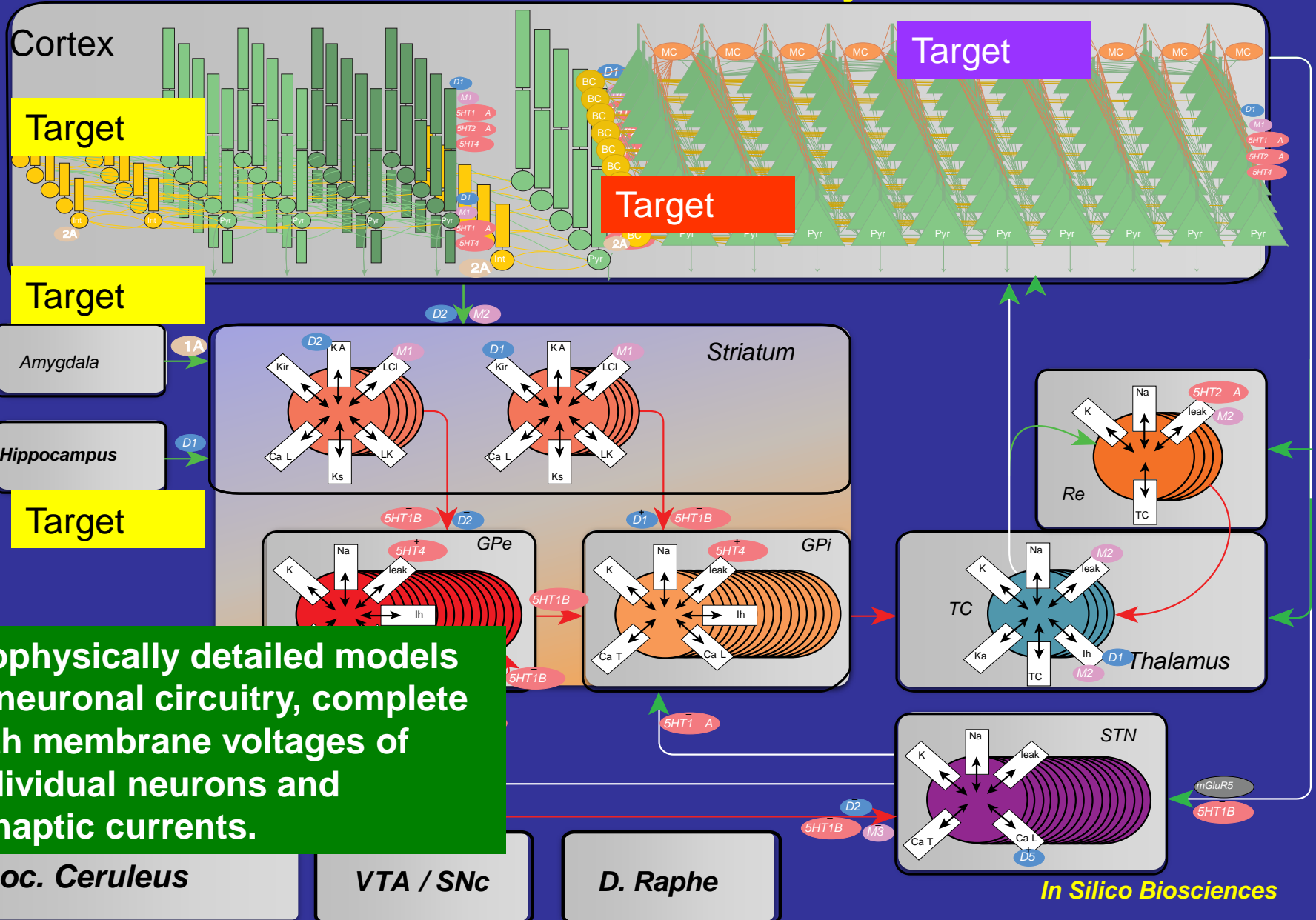
**Athan Spiros, In Silico Biosciences, Inc.**

3<sup>rd</sup> General Assembly, via ZOOM, 13<sup>th</sup> – 15<sup>th</sup> December 2021

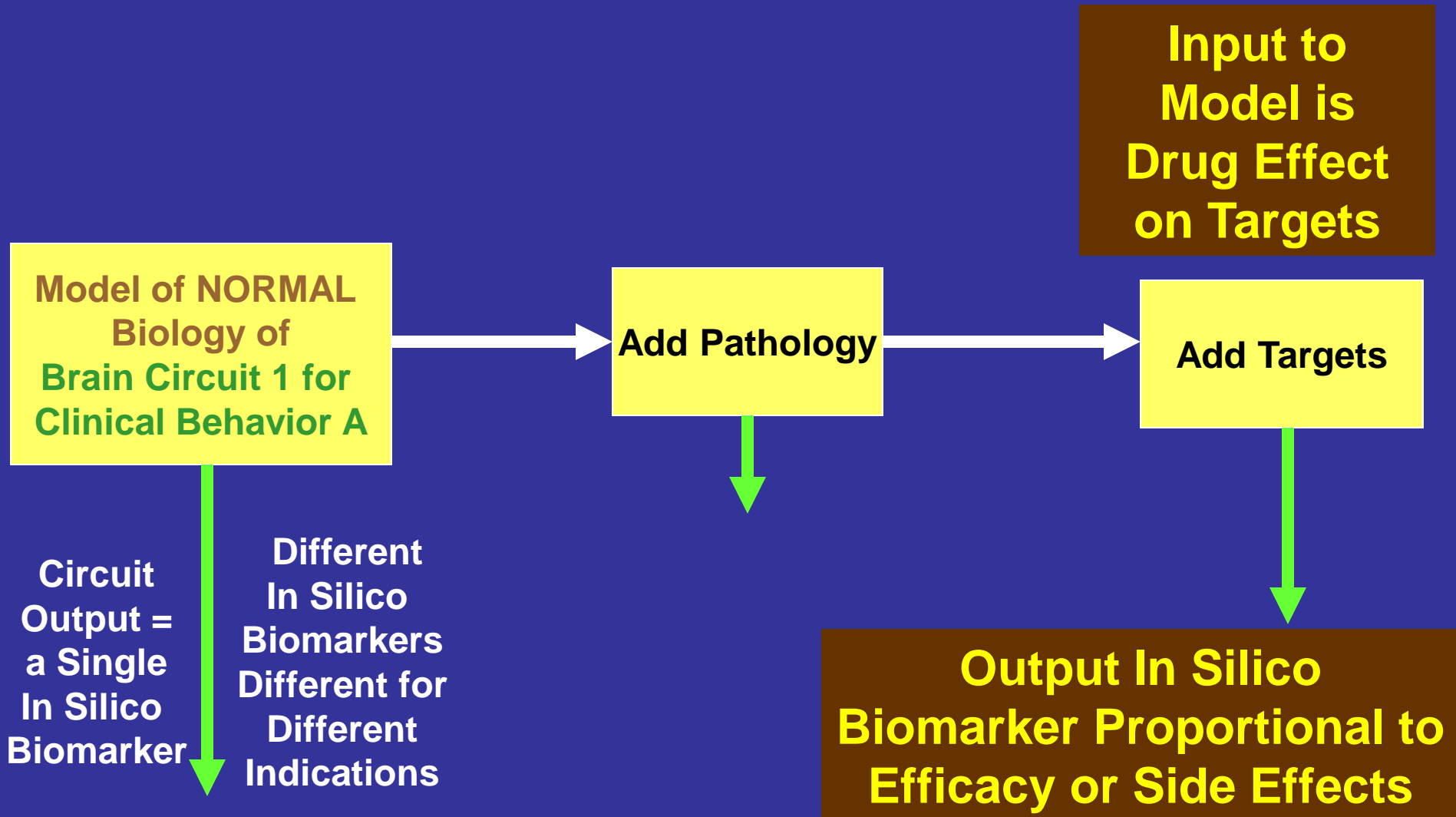
## **CNS quantitative systems biology in the research of new drugs**

- ☐ **Platform Architecture - Robert**
- ☐ **Reaction of Pharma towards QSP and Opportunities - Robert**
- ☐ **Case Study to Elaborate Technology - Athan**

# In Silico Biosciences – Modeling Emergent Dynamics of CNS Disease Circuitry



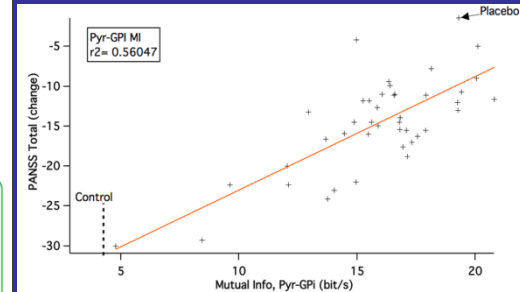
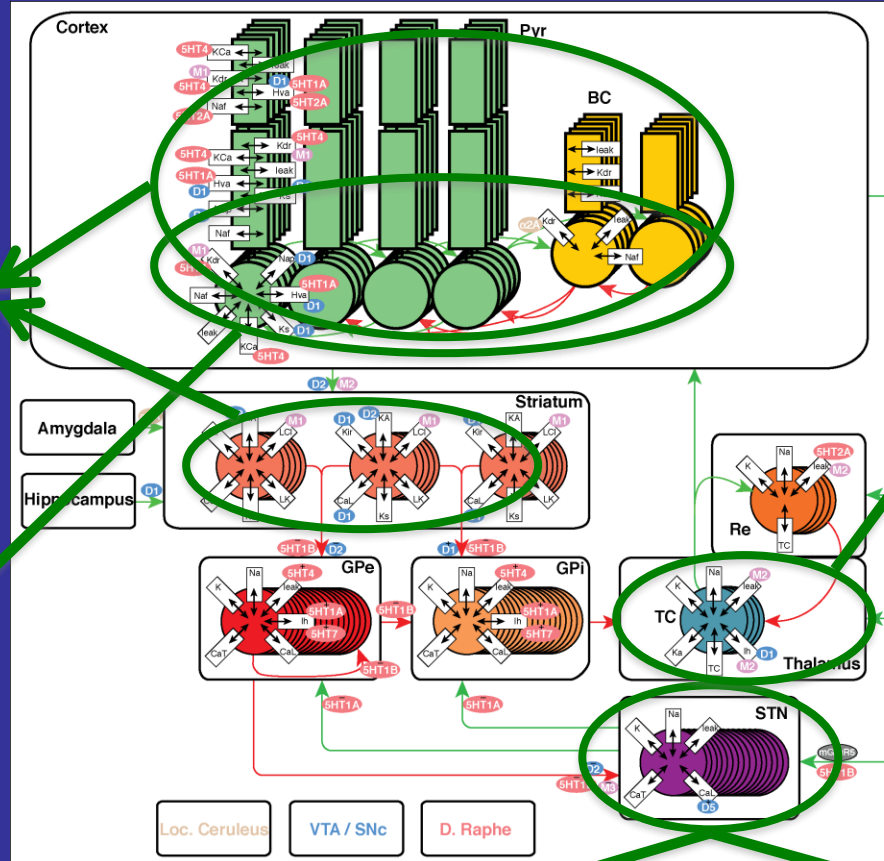
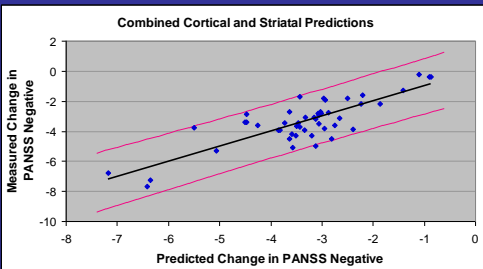
**Modeling Sequence** = Normal >  
Pathological >  
Drug Pharmacology (Targets)



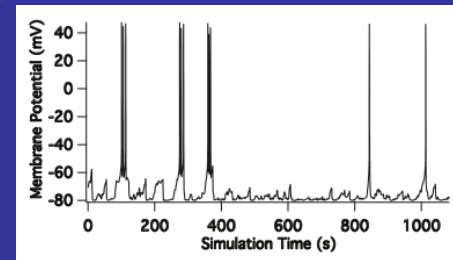
# Different In Silico Biomarkers for Different Indications and Clinical Scales

PANSS Total as mutual information transfer cortex-GPI

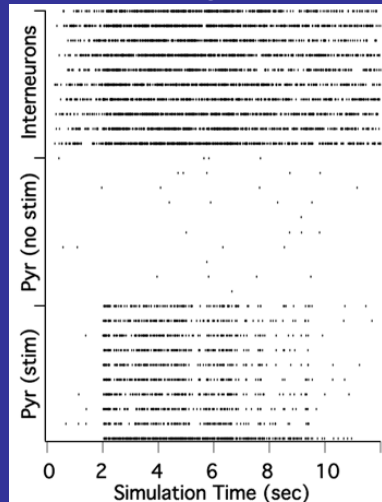
Negative PANSS are correlated with striatum and cortical excitability.



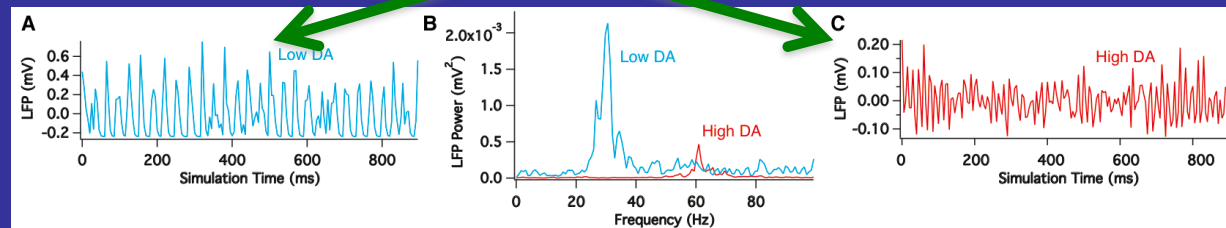
Huntington's disease symptoms are correlated with TC excitability.



Cognitive symptoms of schizophrenia are correlated dynamics of cortical firing patterns.

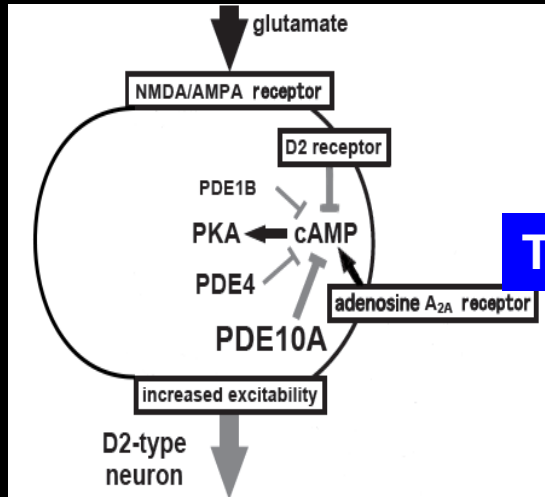


Parkinson's disease symptoms are correlated with STN rhythms.

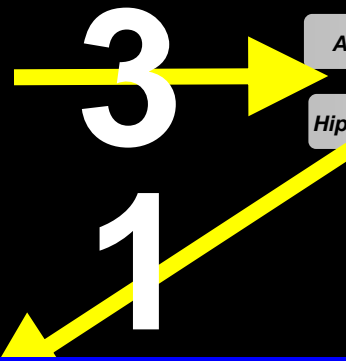
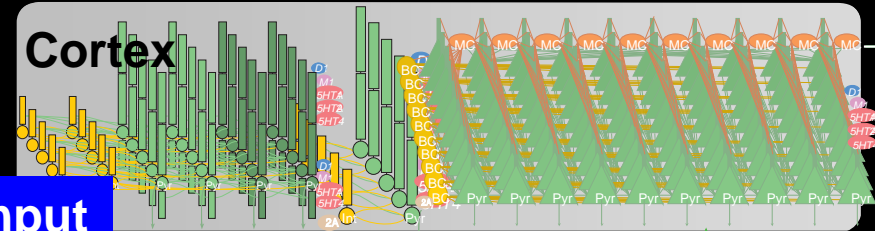


# Target; to Circuit; to Clinical Estimate

## The ISB Patented Platform Architecture



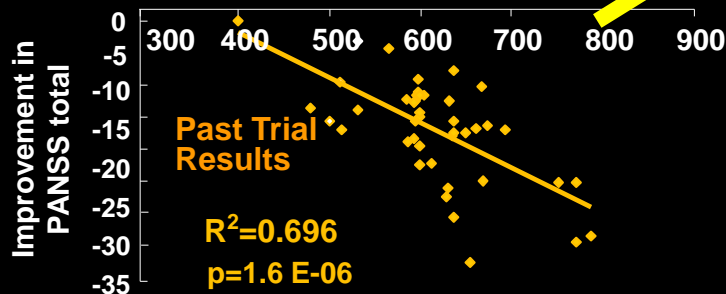
**Target Activation Input**



**Calibration of Parameters Coupling Targets to Circuits**

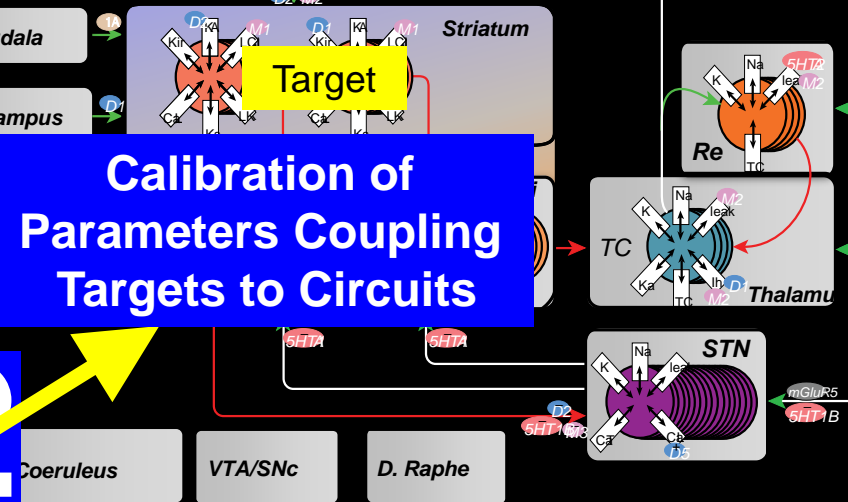
**Neuronal Circuit Output In Silico Biomarker (Different for Different Indications)**

**CIRCUIT MODEL OUTPUT**



**Systemic model explains more of variance**

- Helps Develop Internally Consistent Systemic Physiological Hypotheses
- Regression Equation Enables Low Res Estimate of Clinical Effects
- Clinical Correlation Is a Competitive Validation **Relative to Comparator**



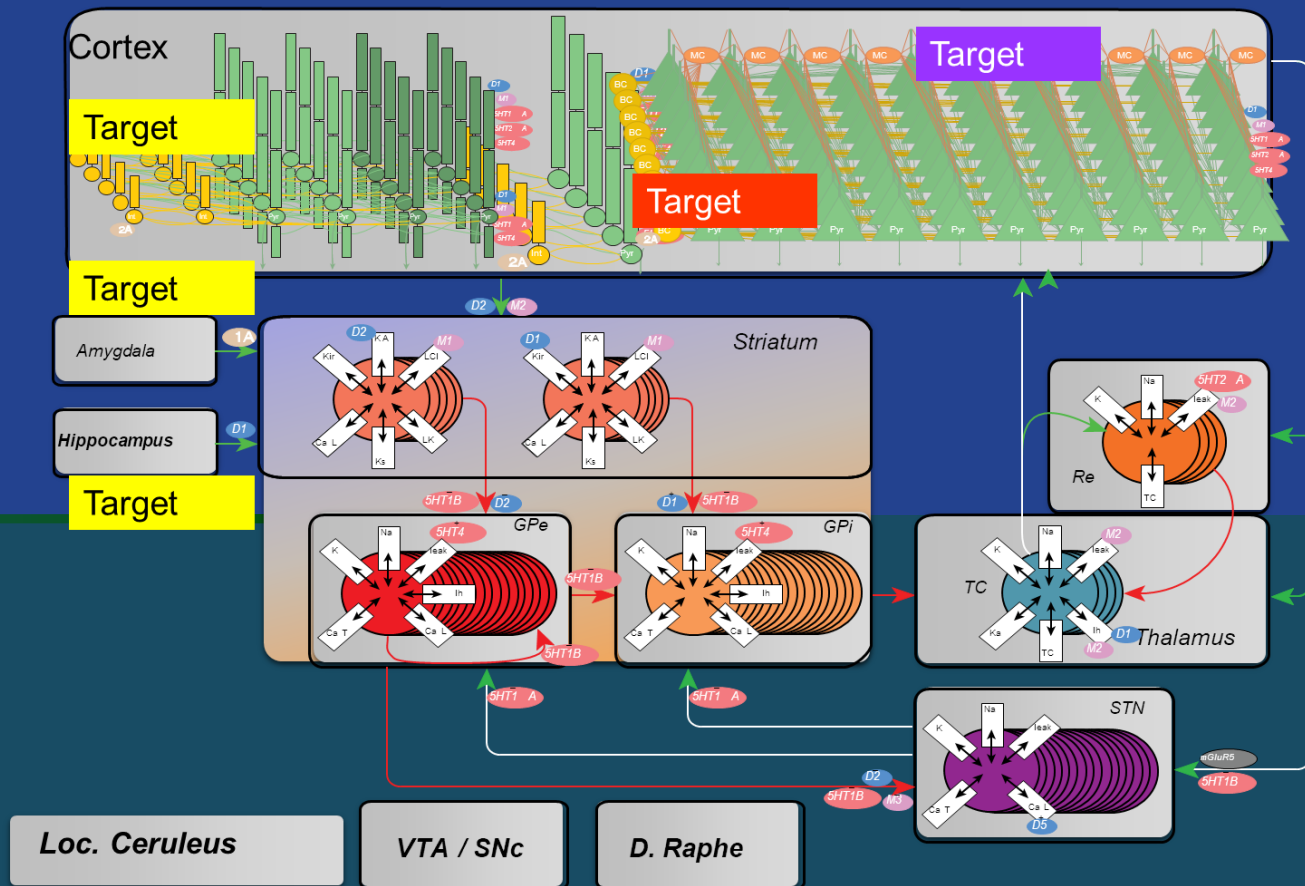
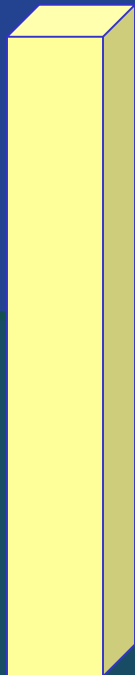
## **CNS quantitative systems biology in the research of new drugs**

- ☐ **Platform Architecture - Robert**
- ☐ **Reaction of Pharma to QSP and Opportunities - Robert**

# Pharma Reactions to QSP

Will a Blind Man Take One Eye or Hold Out for Two?

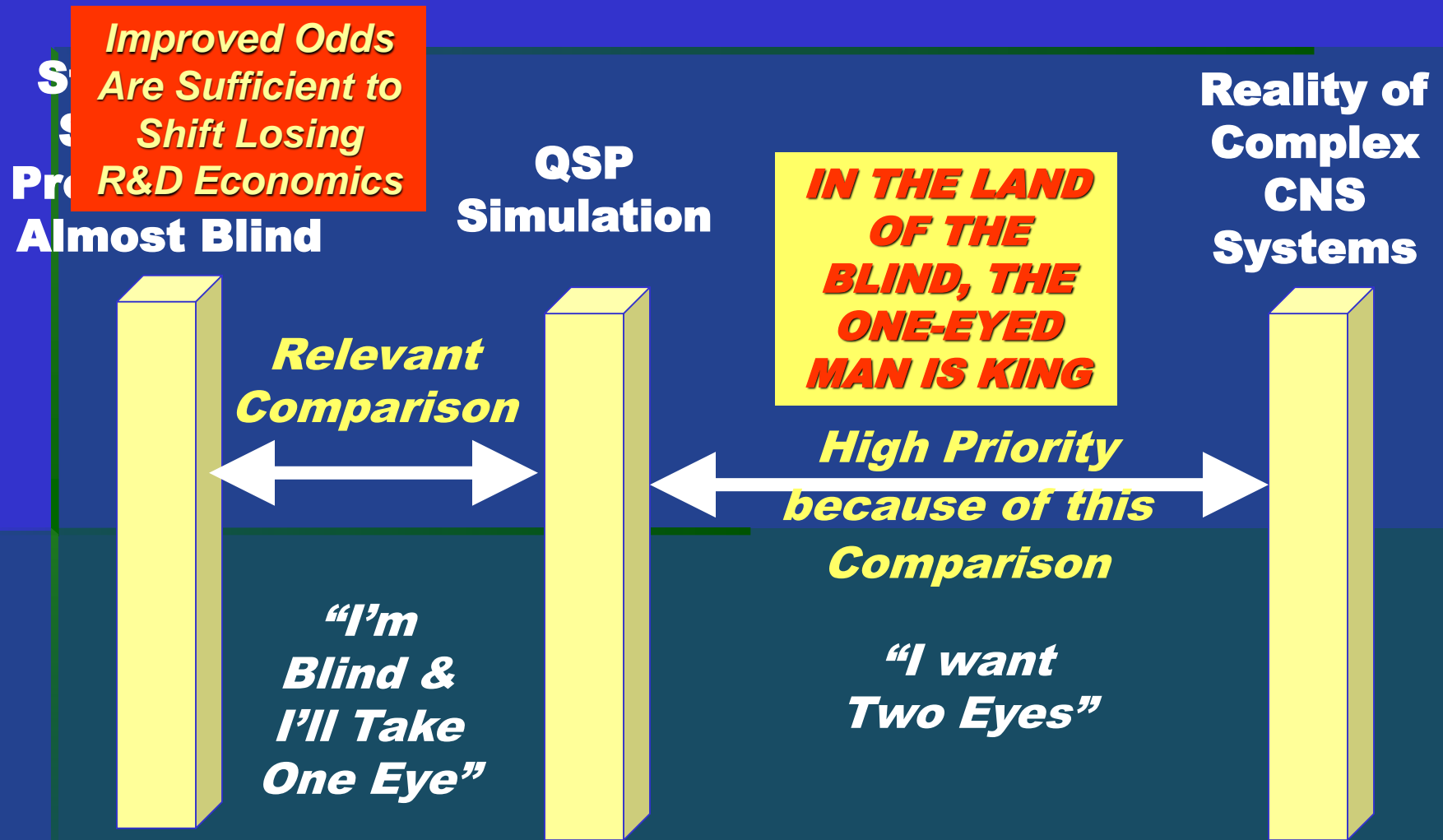
Status Quo  
Systemic  
Predictions =  
Almost Blind





# Pharma Reactions to QSP

Will a Blind Man Take One Eye or Hold Out for Two?

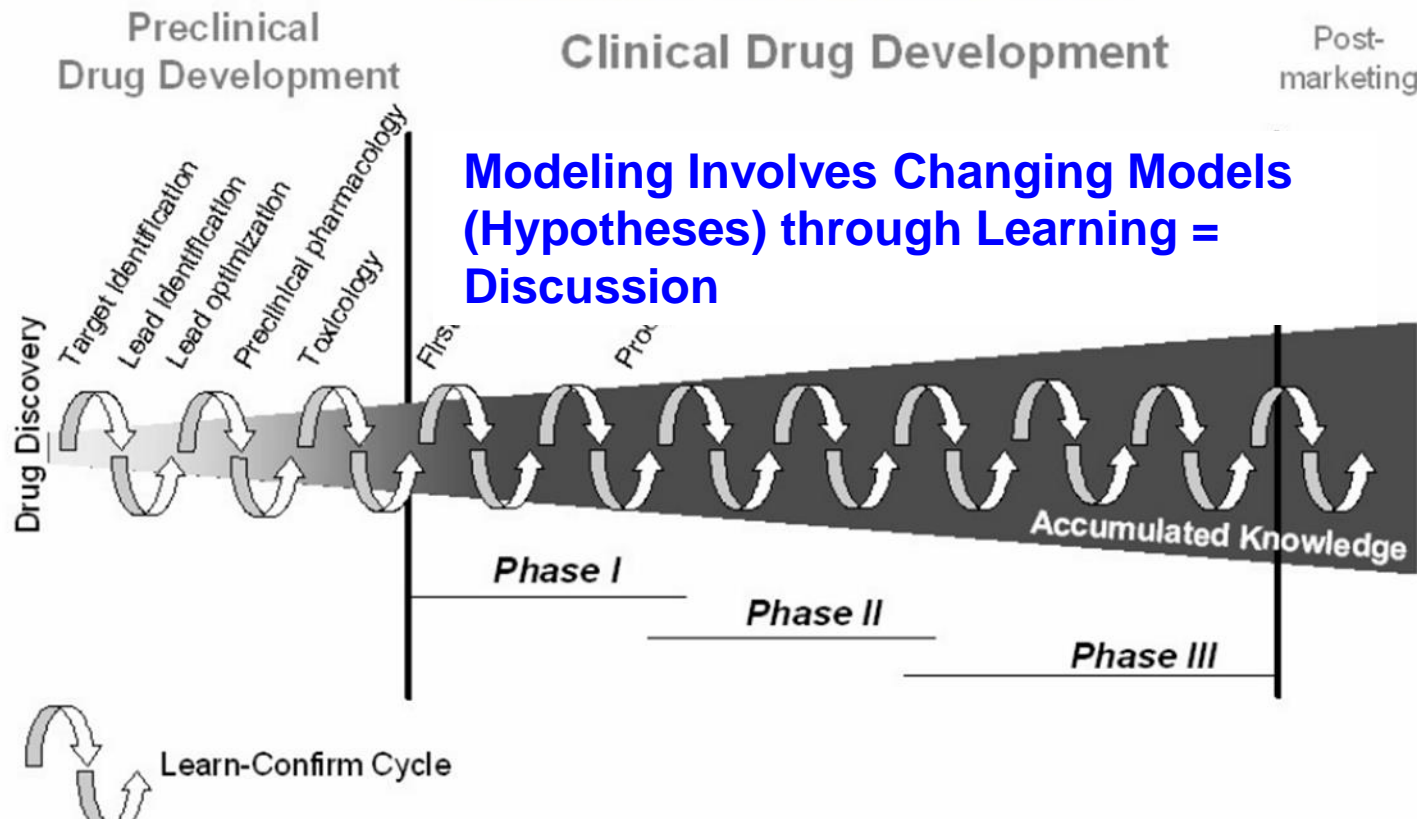


# The Opportunity

*Improved Odds  
Are Sufficient to  
Shift Losing  
R&D Economics*

***Game  
Changer***

## Model-Based Drug Development: Apply Learn-Confirm Data Integration to Knowledge Paradigm Throughout R&D



## Computational Systems Modeling (QSP) Facilitates Hypothesis Development and Refinement

"Science is built up of facts, as a house is built of stones;  
but an accumulation of facts is no more a science  
than a heap of stones is a house."

— Henri Poincare (Science and Hypothesis)

Simulate Your Predictive Systemic  
Hypotheses (Model Based Drug  
Development) and Get One Eye in the  
Land of the Blind

***IN THE LAND  
OF THE BLIND,  
THE ONE-EYED  
MAN IS KING***

***QSPainRelief***

## **CNS quantitative systems biology in the research of new drugs**

- ☐ **Platform Architecture**
- ☐ **View of Pharma towards QSP and Opportunities**
- ☐ **Case Study to Elaborate Technology**

# Quantitative systems biology in the research of new drugs in CNS

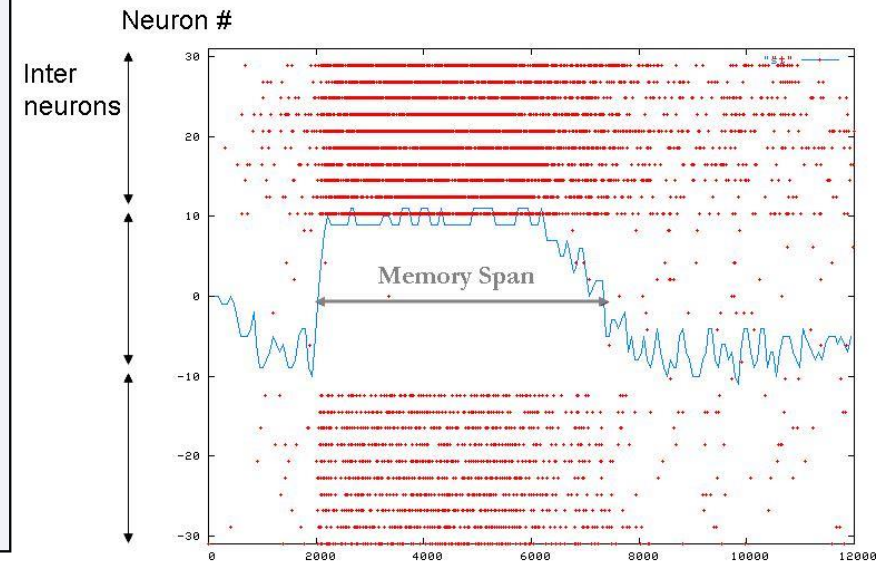
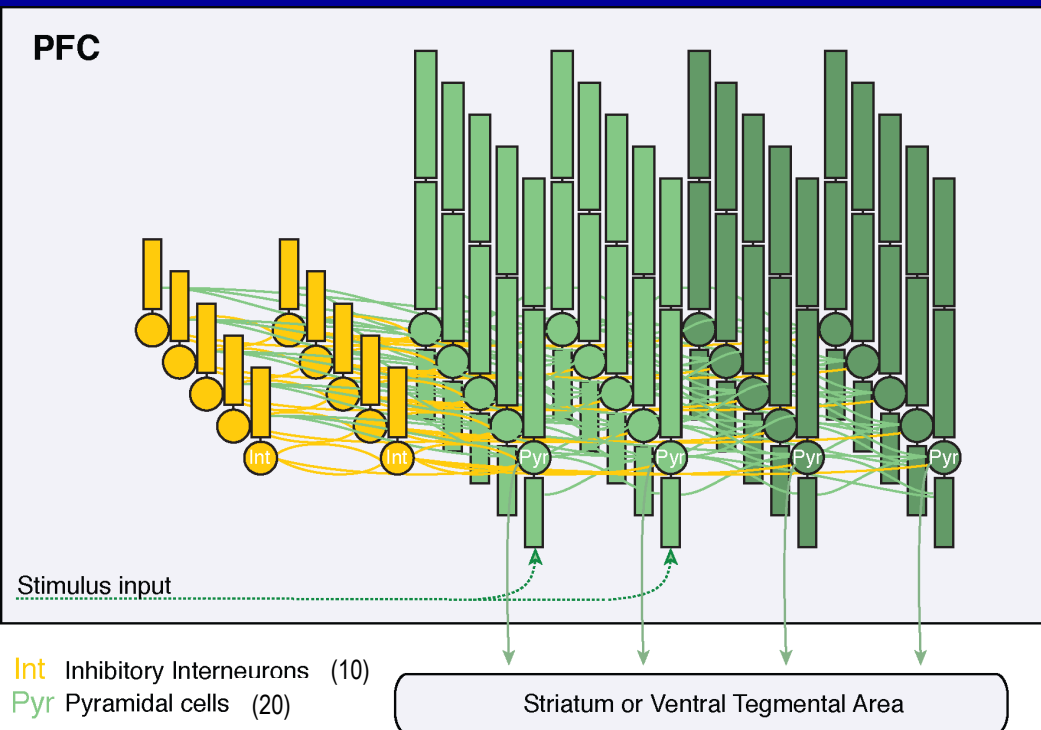
1. Example: Cortical Model of Working Memory
2. Example: Addition of New Receptor
3. New Drug Development

# (1a) Determine The Problem

- What is the problem?
  - For what indication?
    - Working memory
  - For what kind of targets/drugs?
    - Dopamine and serotonin receptors
- What data is available?
  - % Correct in 2-back WM test
  - For COMT genotype (affects dopamine)
  - For antipsychotics in patients with schizophrenia

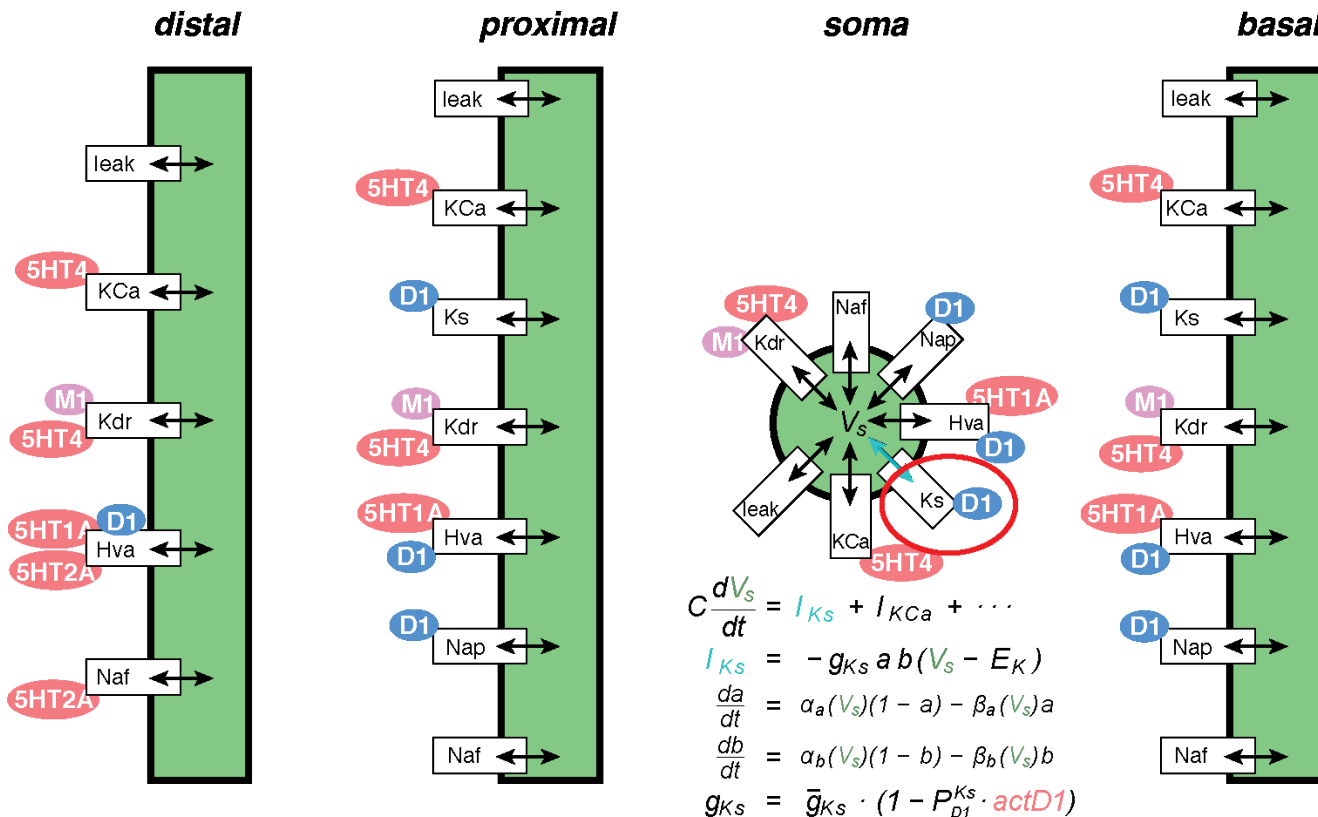
# (1b) Determine an Appropriate Neuronal Model

- A model may already exist

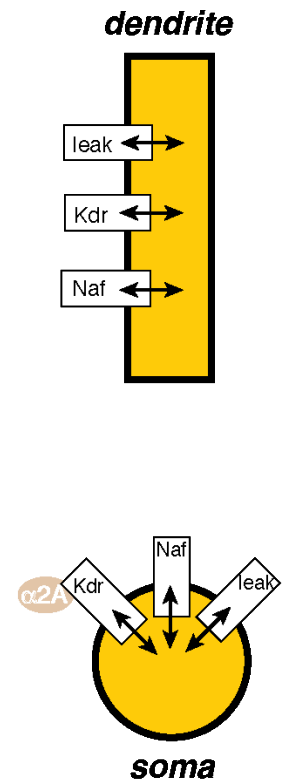


# (1c) Determine the Target Effects on Neurons

## Pyramidal cell compartments

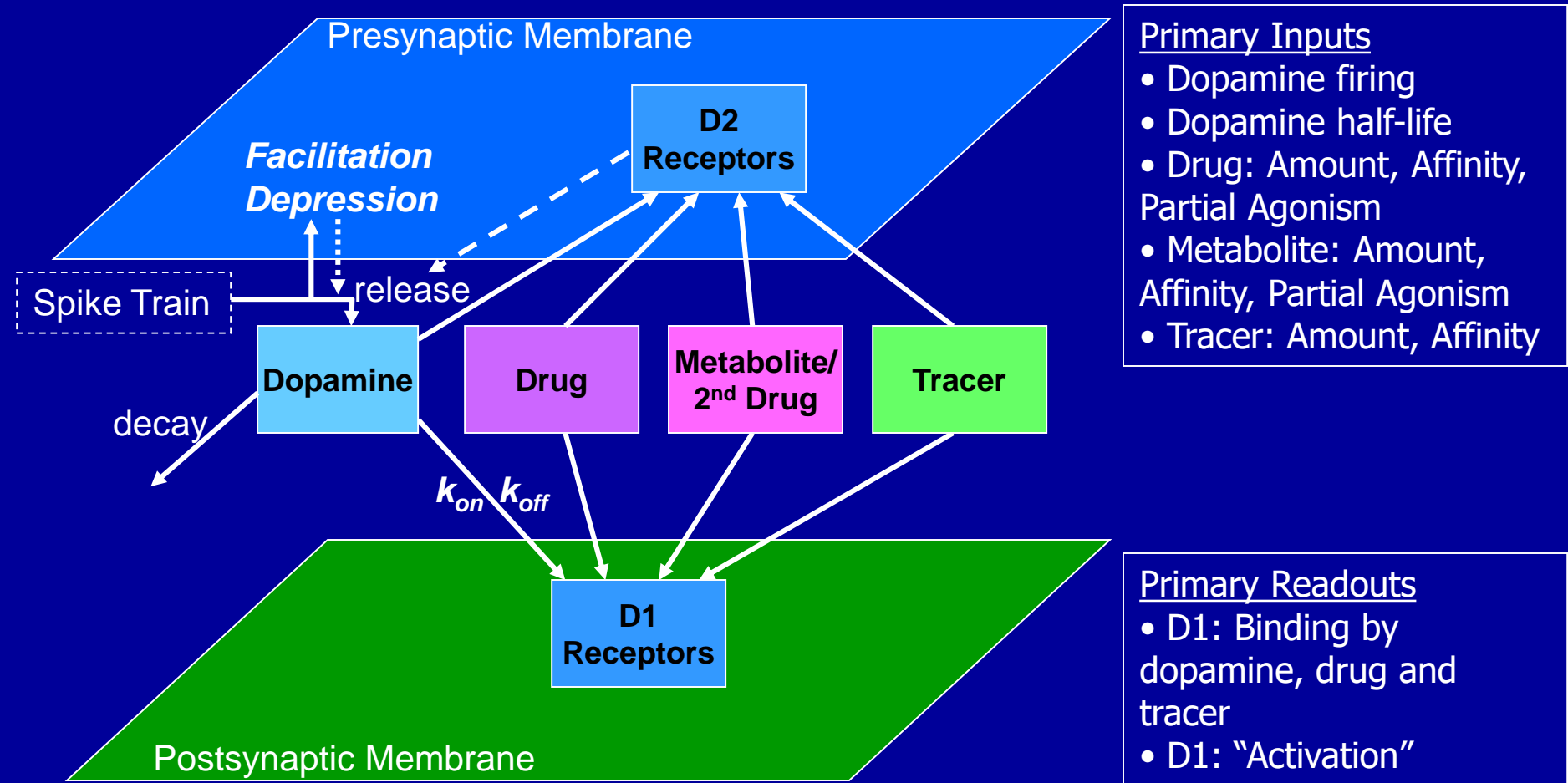


## Inhibitory interneuron compartments





# (1d) Determine Drug Effects (Synaptic Cleft Simulation)



## (2a) Example of Calibrating D1 Receptor Effect on Ks

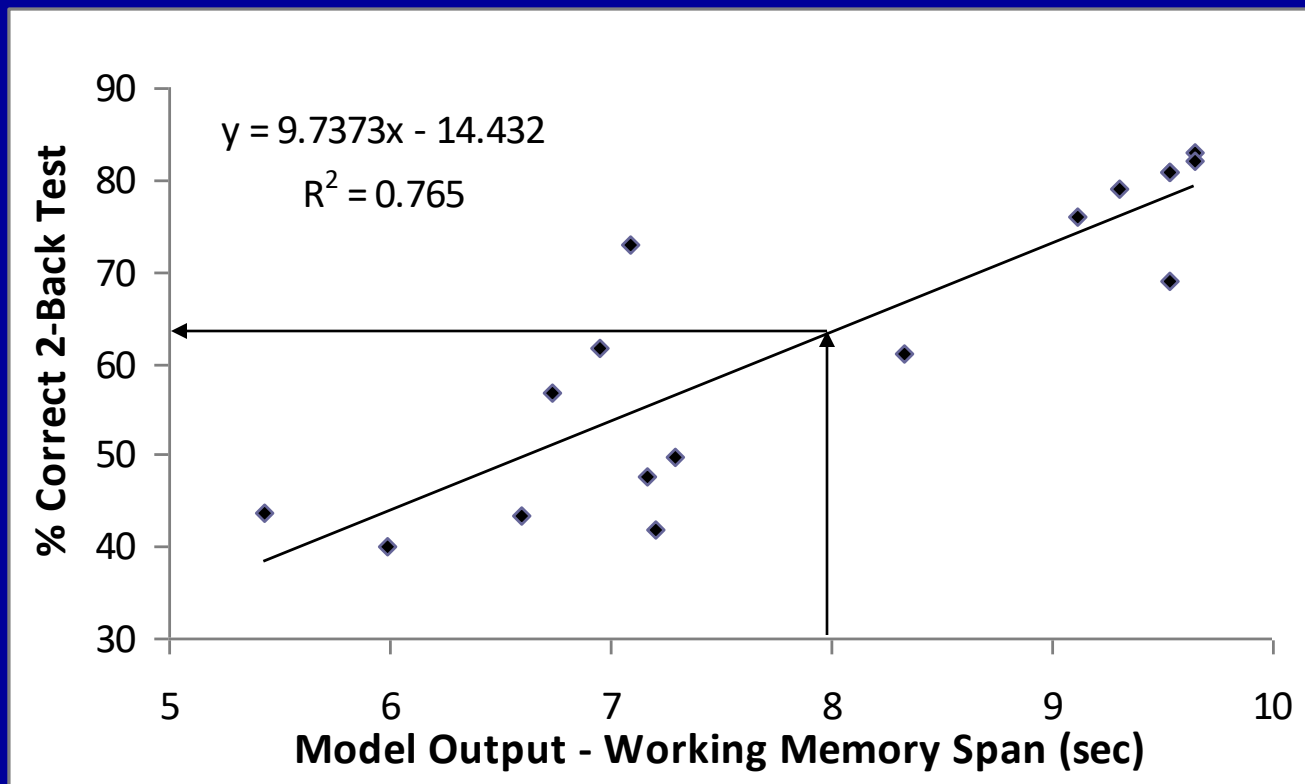
$$g_{Ks} = \bar{g}_{Ks} \cdot \left(1 - P_{D1}^{Ks} \cdot actD1\right)$$

Coupling Parameter

Receptor Activation

- *actD1 is the D1 activation relative to control*
  - Allows one to attain different values for all drug-doses
- Coupling parameter,  $P$ , is altered to get best fit
  - The parameter is initialized to the pre-clinical value: 0.3 (Dong & White, 2003)
  - The calibrated value is 0.367

## (2b) Calibrate the Model



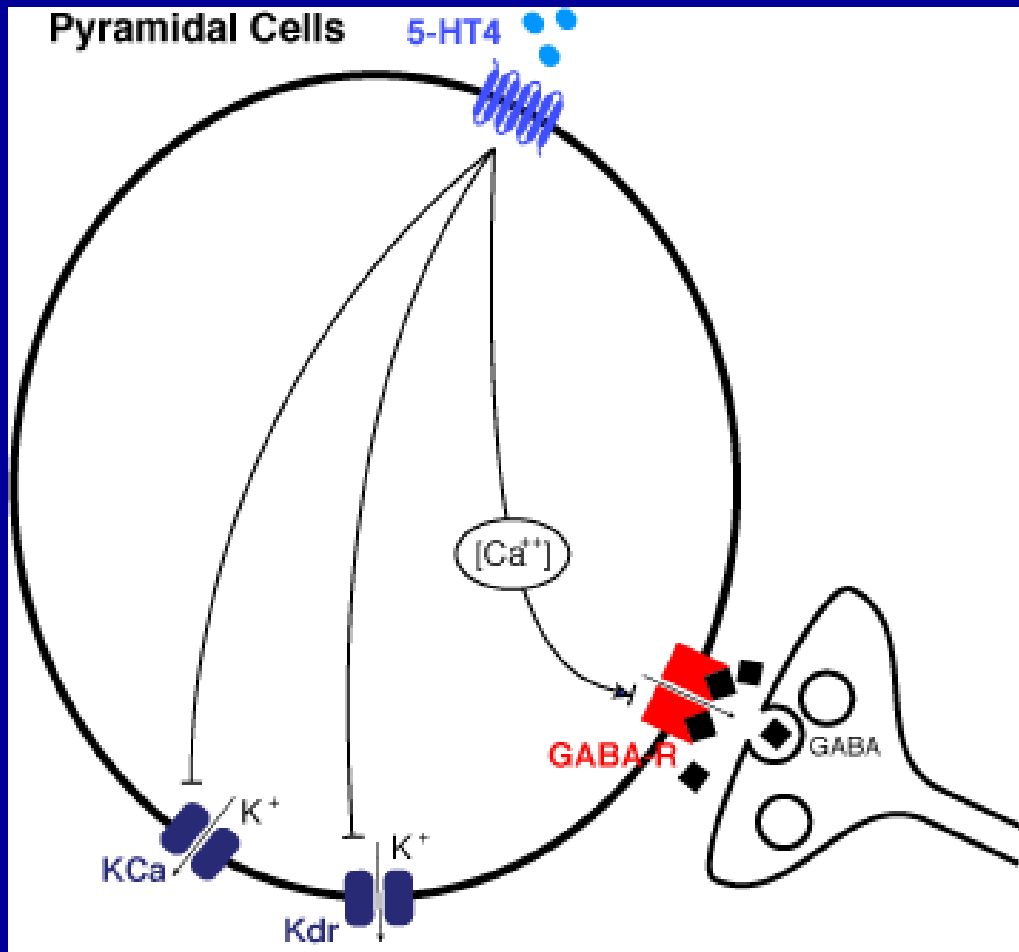
- Each point represents a drug/dose model output (x) and clinical outcome (y).
- Different sets of coupling parameters will shift points left or right (and need to be biologically constrained).
- The relationship established determines the clinical prediction of model outcomes.

## (2c) Get Confidence with the Model

- Can it be validated?
  - New results might have become available.
  - Maybe some results were held back from the calibration process.
- Do model predictions make sense?
  - E.g. Is the dose response curve for a drug qualitatively correct?

(3) Introduce New Receptor  
Effect(s)

# (3a) Research New Receptor Effects



## Example: 5-HT4 Receptor

Has an effect on

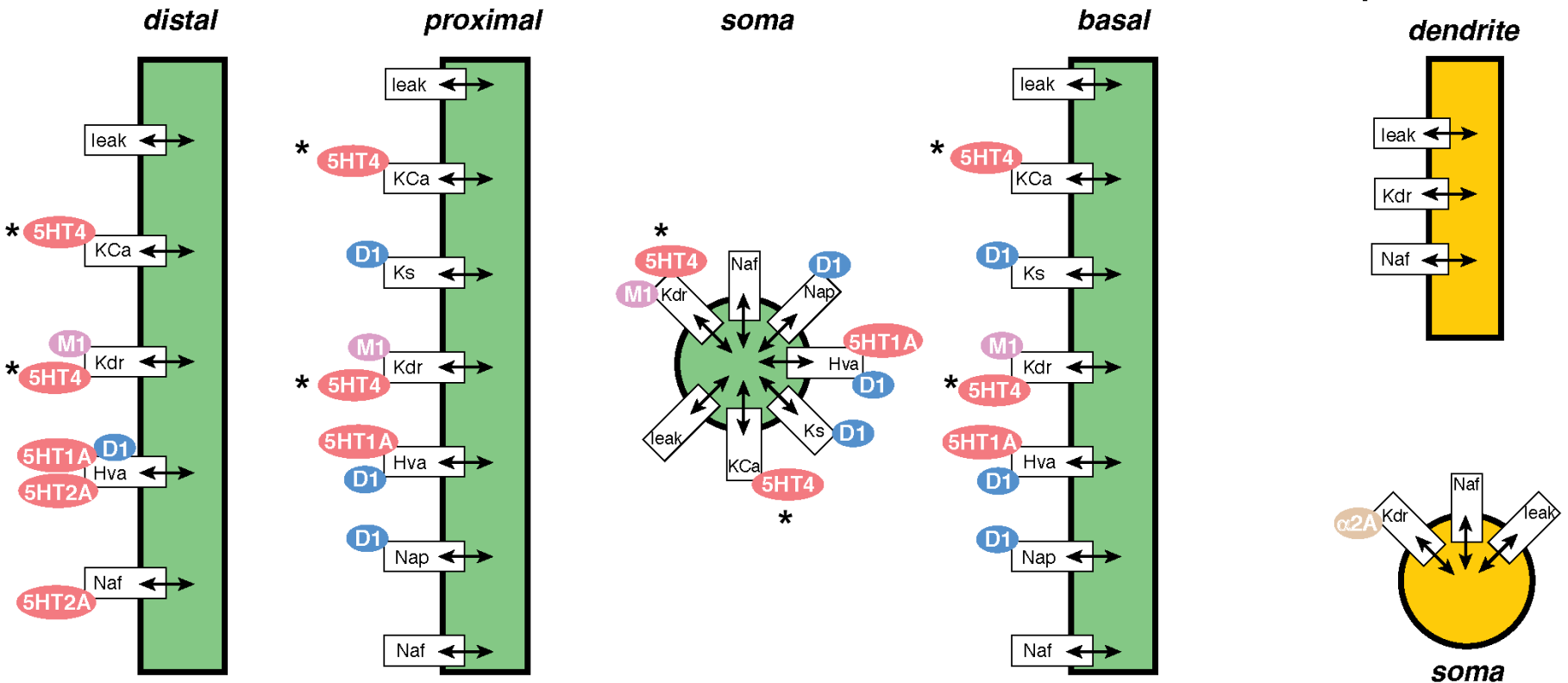
- Kdr channel – max 5-HT4 activation reduces gKdr by 50%.
- KCa channel – this 5-HT4 effect is half as strong as Kdr.
- GABA-R conductance affected with a range of  $\pm 20\%$ .

# (3b) Incorporate New Effects in the Model

5-HT4 receptors are co-localized with 5-HT1A receptors

Pyramidal cell compartments

Inhibitory interneuron compartments



## (3c) Result of New Receptor Incorporation

- When effects were incorporated, the model showed as 5-HT<sub>4</sub> activation increased cognition improved.
- Unfortunately for the project that we were involved with, they had created a compound that was a functional antagonist.
  - As shown in the synaptic cleft simulation.
- When the compound was tested in healthy volunteers at a cognitive deficit due to scopolamine, the compound worsened the working memory outcome at a low dose.



## (4a) New Drugs: What Insights are Gained with the Modelling?

- A **sensitivity analysis** is very useful
- Determines
  - most important modes of action (MoA)
  - areas in need of further model refinement
  - possible leads for drug development

## (4b) What Does the Model Predict for Existing Drugs?

- Use the model to **predict outcomes** of a battery of known drugs
  - Ex1: If a pharmaceutical company has a library of compounds, the ones that are applicable to the model can be simulated
  - Ex2: Can look at publicly available data for compounds that affect Receptors X, Y and Z and determine their predicted outcomes
- One can explore **combination of treatments**, a more straight-forward process in silico

# Conclusions

- A good model is **reusable** and **refinable**
- By modelling **biological processes**, one can explore more interventions than originally imagined
  - This goes beyond “black box” calculations and relational associations
  - New modes of action can be considered at different levels of the model
    - Effects at synapses such as receptors and transporters
    - Effects at channels such as channel blockers
    - Effects at neurons such as deep brain stimulation
- All of these considerations allow one to explore new drug development and make predictions to be tested further