

# **12<sup>th</sup> Annual Lupus Education Day Agenda**

**8:30 – 9:00 am    Sign-in / Refreshments**

**9:00 – 9:05 am    Introduction / Logistics**

**9:05 – 9:30 am    Dr. Jennifer Anolik: What's New in the World of Lupus**

**9:30 – 10:00 am    Dr. Christopher Richardson: How Lupus Affects the Skin**

**10:00 – 10:15      Refreshment Break**

**10:15 – 11:15      Patient Panel**

**11:15 – 12:00      Break-out Sessions: Yoga, Nutrition, Mindfulness &  
Complementary Therapies**

**12:00 – 12:30      Questions and Wrap-up**

# **12<sup>th</sup> Annual Lupus Education Day Agenda**

## **Faculty:**

**Jennifer Anolik, MD, PhD**

**Christopher Richardson, MD, PhD**

**Ummara Shah, MD**

**Rev. Imani Dodley: Yoga break-out session**

**Aubree Guiffre, PhD: Mindfulness break-out session**

**Margaret-Mary Holyst, MD: Complementary therapies break-out session**

**Lynn Moll, registered dietitian: Nutrition break-out session**

# **What's New in the World of Lupus**

**Jennifer H. Anolik, MD, PhD**

**Associate Professor of Medicine, Pathology, and  
Microbiology/Immunology**

**Division of Allergy, Immunology & Rheumatology**

**University of Rochester Medical Center**

**Oct 2018 12<sup>th</sup> Annual Lupus Education Day**

# Research in Lupus

- The more that is known about clinical outcomes and immune abnormalities associated with lupus, the better equipped we are to fight the disease!



# What we're doing at the U of R:

- NIH funded networks and other basic research to understand mechanisms of disease
  - Accelerating Medicines Partnership
- Clinical Cohorts/Consortiums
  - LuCIN (Lupus Clinical Investigators Network- LRI/ALR collaboration, repurposing drugs)
- Clinical Trials
- Outcomes research and new patient centered care delivery models

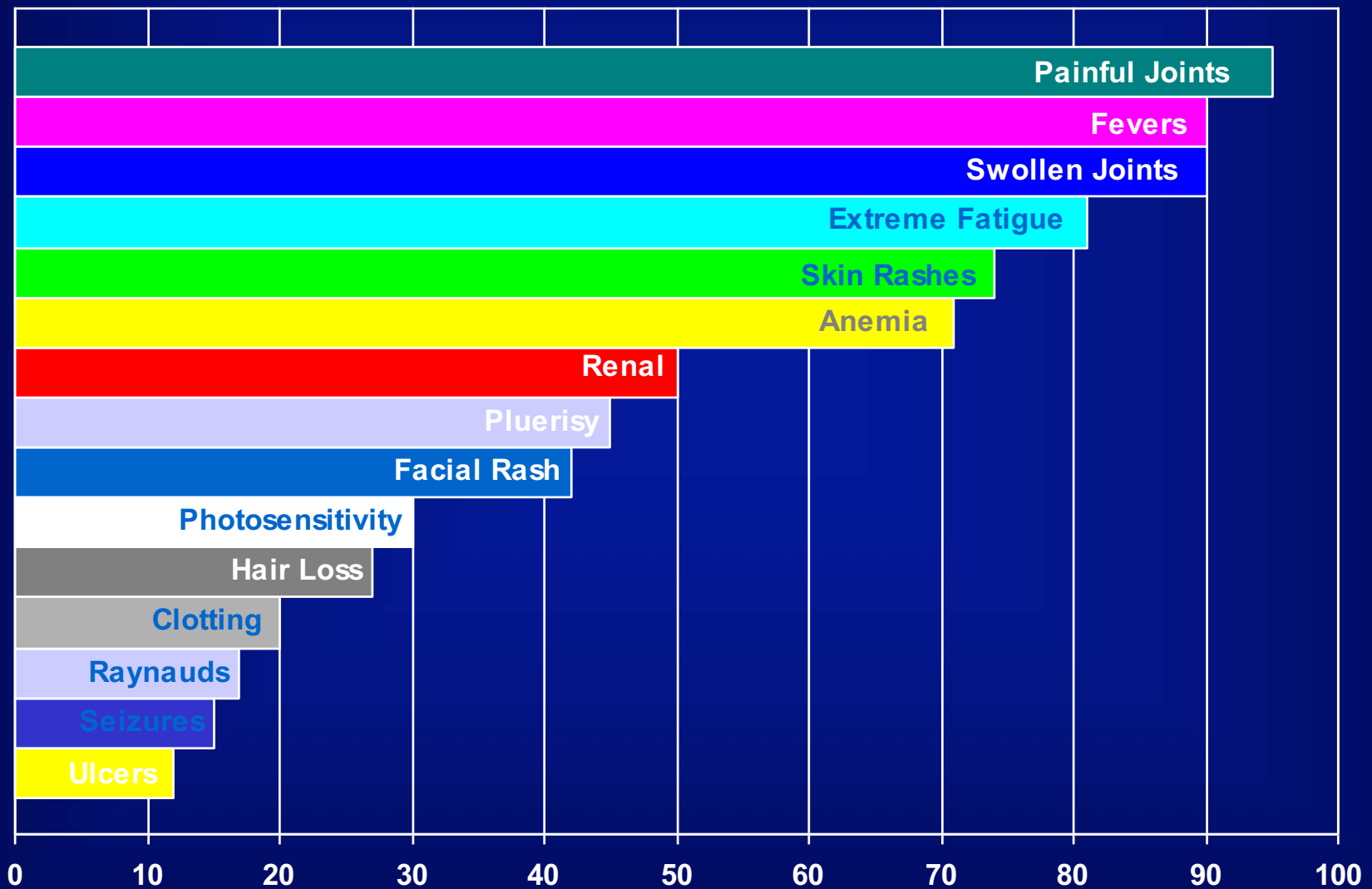
## Let's start with the basics

- Lupus is a systemic inflammatory disease of autoimmune etiology and unknown cause.
- Chronic disease characterized by unpredictable exacerbations and remissions.
- It can affect virtually any organ, singly or in combinations that change from patient to patient.
- Its severity ranges from mild in some cases to life-threatening in others.

# Who develops lupus?

- African-Americans > Caucasians (3x)
  - Caucasian women (15-64 years of age): 1/700
  - African-American women (15-64): 1/245
- Age at diagnosis:
  - 16-55 years of age: 65% of cases
  - < 16: 20%;
  - > 65: 15%
- Female/male ratio:
  - Age 14-65: 6-10 / 1
  - Age <14 or >65: 2-3 / 1

# Lupus presenting symptoms





# How do we diagnose lupus?:

## American College of Rheumatology (ACR) criteria

### Skin criteria

1. Malar rash
2. Discoid Rash
3. Photosensitivity
4. Oral Ulcers

### Systemic criteria

5. Arthritis
6. Serositis
7. Kidney
8. Neurologic

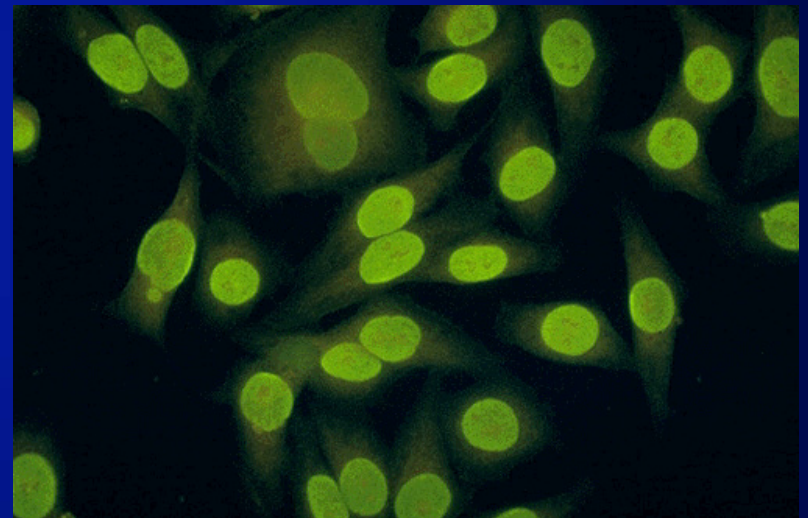
### Lab criteria

9. Anti-nuclear antibody
10. Immunologic
11. Hematologic

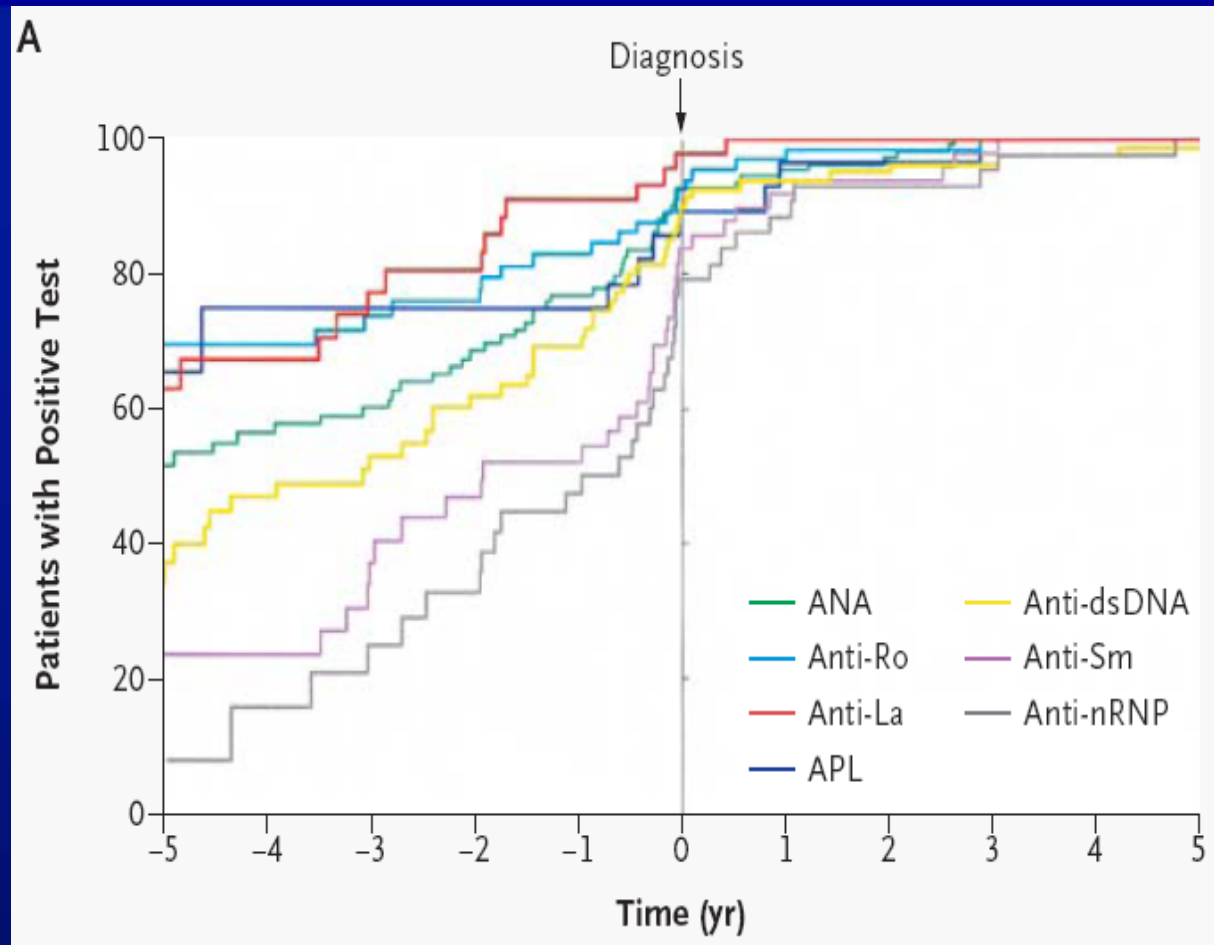
For the purpose of identifying patients in clinical studies, a person shall be said to have SLE if any **4 or more of the 11 criteria** are present, serially or simultaneously, during any interval of observation.

# SLE Diagnosis: Autoantibodies

- **ANA**
  - Seen in 99% of SLE
  - Not specific for SLE
  - Seen in many inflammatory, infectious, and neoplastic diseases
  - Seen in 5% to 15% of normal persons
- Other more specific autoantibodies- antiDNA, antiSmith



# Autoantibodies precede diagnosis



- Recent research focus on identifying ‘at risk’ individuals and trying to prevent disease

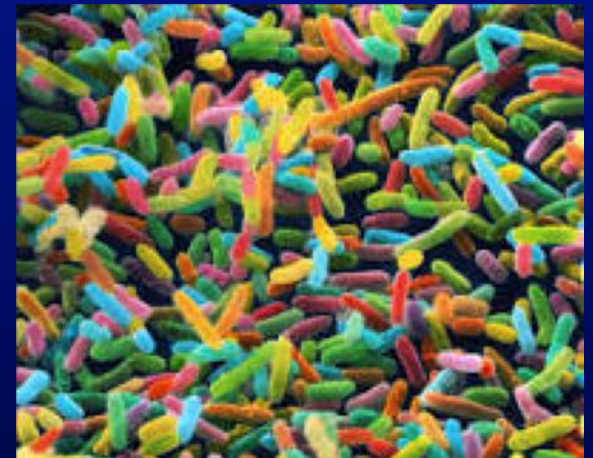
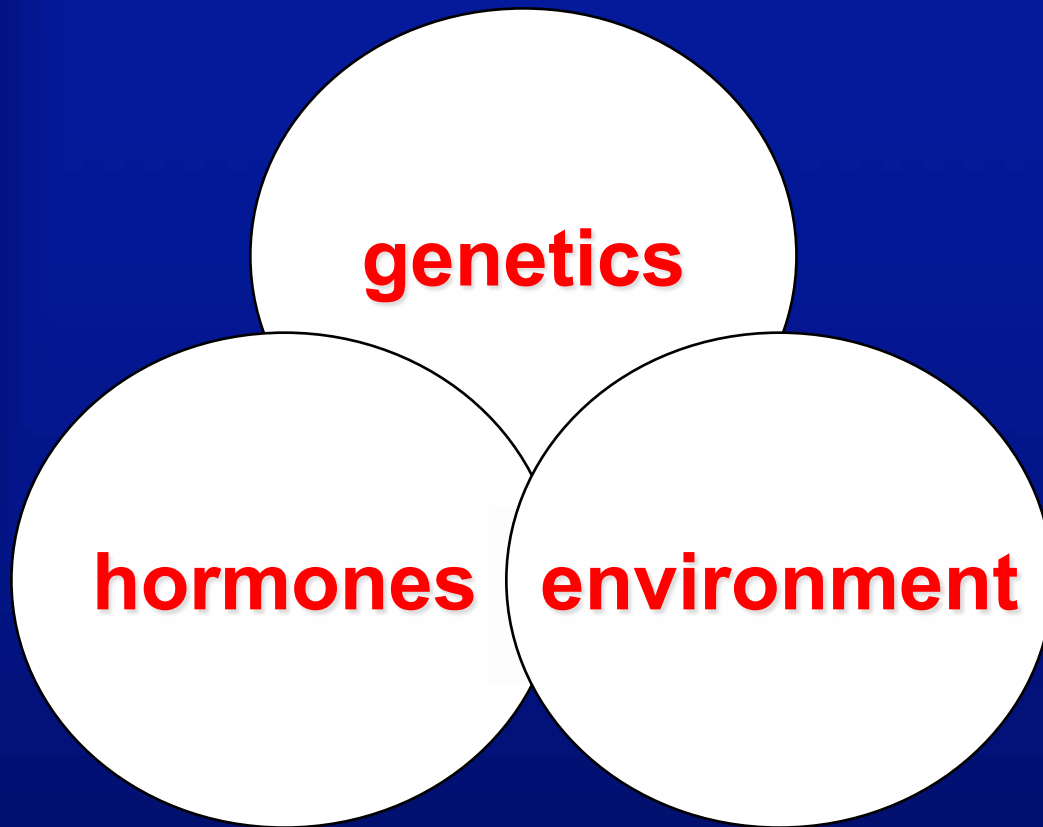
*Arbuckle...Harley. NEJM 349: 1526, 2003*

*Judith James and colleagues: Ann Rheum Dis 2011, Ann Rheum Dis 2016, A and R 2017*

# The Future of Diagnosis

- Identify and detect more lupus specific autoantibodies
- Combine autoantibodies with other measurements of immune abnormalities: e.g. detection of interferon or complement activation

# Cause/Pathogenesis

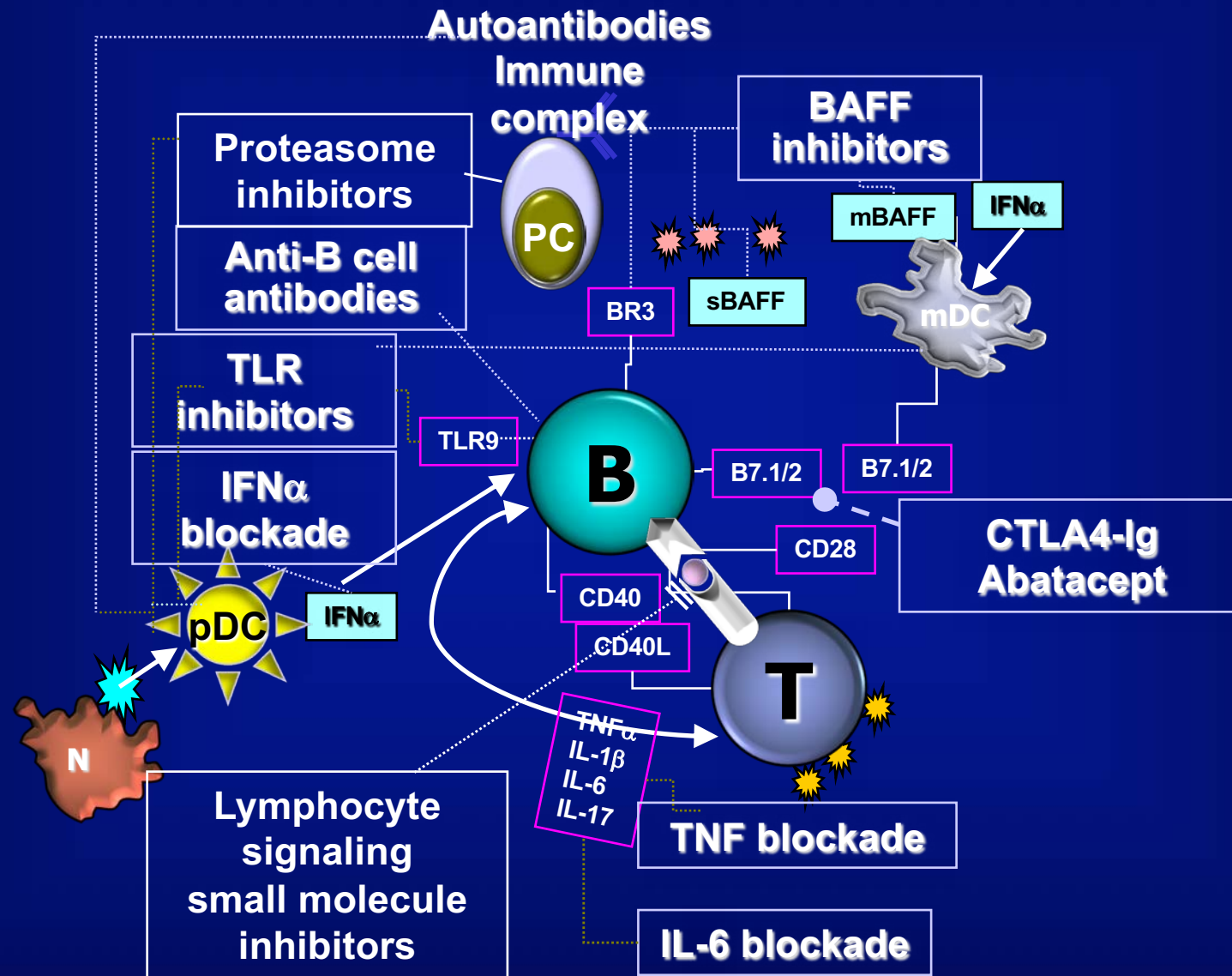


The 'exposome'

# Updates from ACR 2018

- Association of diet and risk of SLE in the Nurse's Health Study
  - >230,000 female nurses followed for 29 years
  - Various definitions of a healthy or anti-inflammatory diet (vegetables- dark yellow and leafy greens, whole grains, nuts/legumes, omega-3-fats/fish)
  - No association between long-term adherence to four different dietary quality scores/indices and incident SLE within this large prospective cohort of women
  - Though diet may have an impact on SLE, a large effect on developing SLE may be unlikely
- Stress and lupus
  - Prior studies: probable PTSD and trauma associated with nearly 3-fold increased risk of incident SLE among women exposed to any traumatic event compared to unexposed
  - Black women's health study: 59,000 black women, ages 21-69 years (median 38 years) enrolled in 1995 and followed through 2015
    - Childhood physical and sexual abuse associated with an increased risk of developing lupus among adult black women

# The immune system and lupus





# **Why do we need new treatments?**

- **The more that is known about clinical outcomes and immune abnormalities associated with lupus, the better equipped we are to fight the disease!**
- **Current treatments do not always work**
- **Current treatments can have toxicity**
- **We have no cure for lupus**



# Identifying new treatment targets and biomarkers

## Accelerating Medicines Partnership (AMP) Initiative

First-of-its-kind partnership and study

*Goal:* To evaluate the molecular pathways and relevant drug targets of autoimmune diseases to help develop new therapies

Learn more: [fnih.org/AMP-RA-Lupus](https://fnih.org/AMP-RA-Lupus)



# Boosting Success by Improving Efficacy: Phase II Clinical Trials

## Current targets

- Animal models
- Cell lines



## AMP targets

- Emerging Technologies
  - DNA sequencing
  - Proteomics
  - Single-cell analysis
  - Bioengineered cells
  - Imaging
- Extensive Human Data
  - Tissue/blood samples
  - Clinical information
  - Demographics
- Big Data Tools



# Focus on target tissue

## Getting towards precision medicine

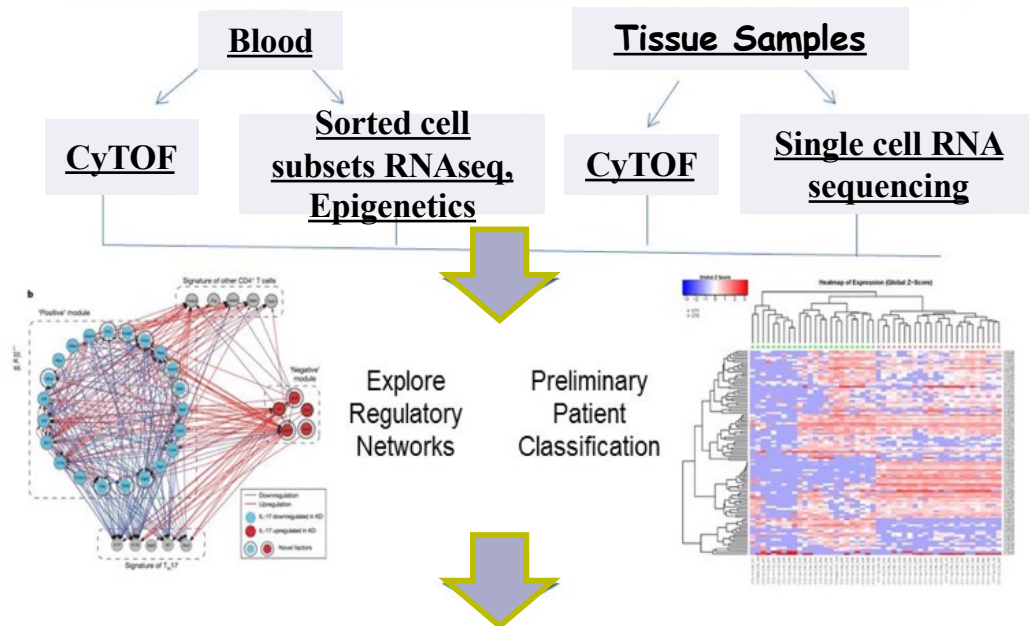
- Clinical/transcriptional profiling of 72 lupus patients
- Molecular and cellular stratification may improve outcomes in SLE and help identify new treatment targets

### Phase 0: Data-Driven Method Development and Harmonization

Blood cells

Synovial, Kidney and Skin cells

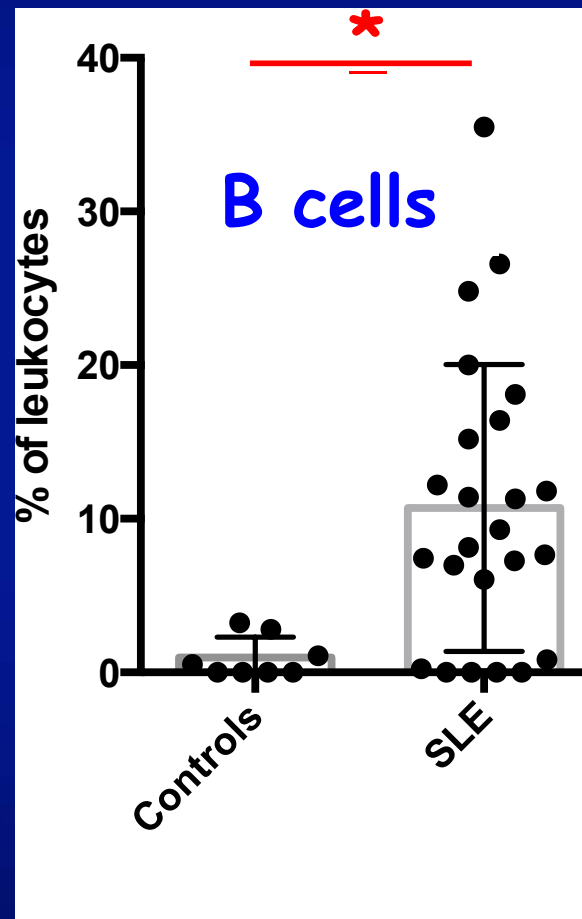
### Phase 1: Systems Biology – RNAseq, CyTOF, Epigenetics, Pilot Studies



### Phase 2: Patient Stratification: Longitudinal Cohorts

# What have we found so far?

## More B cells in lupus kidney



Including  
activated  
B cells

# Trigger for lupus identified

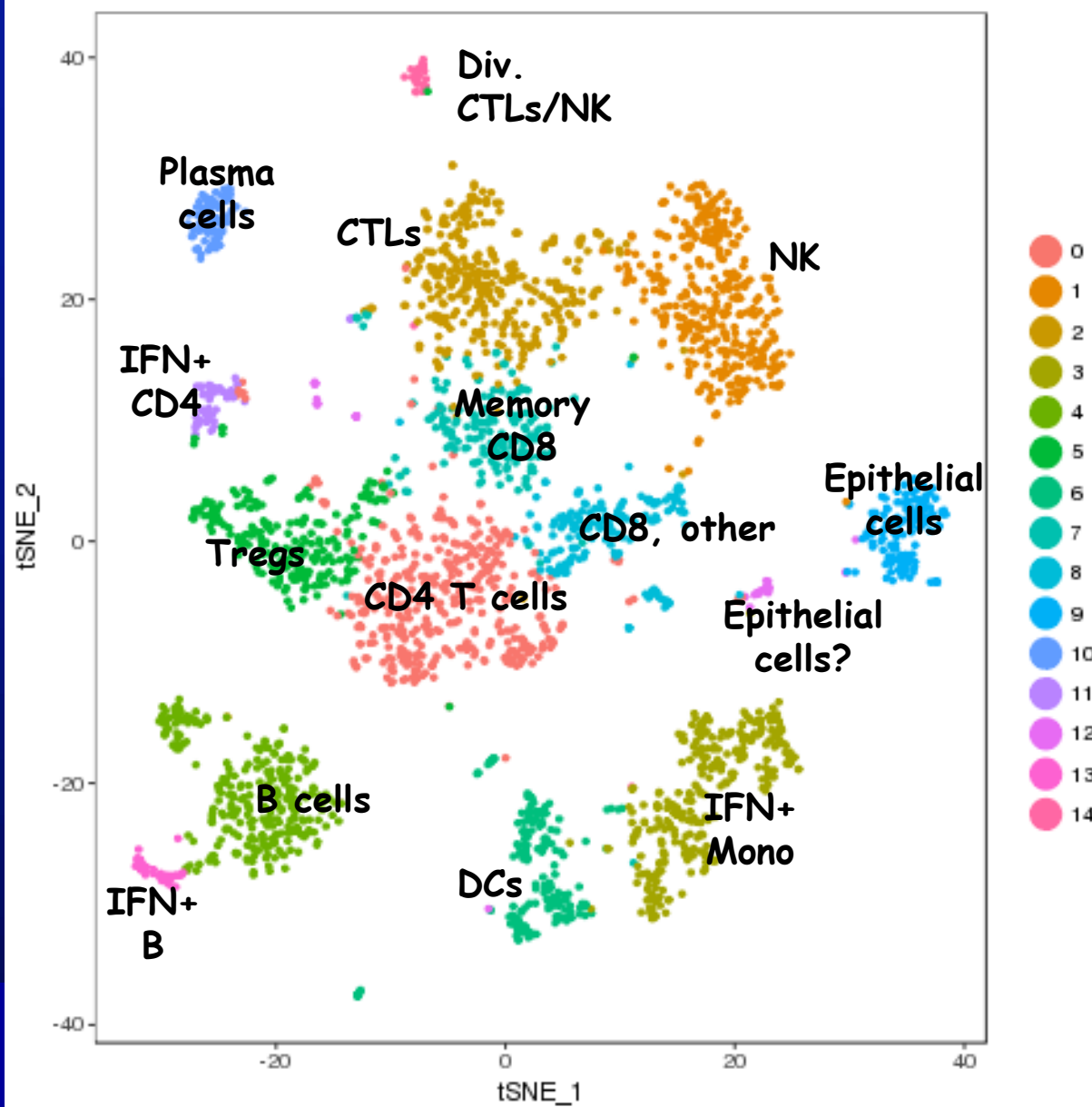
- **A subset of B cells called 'Age-associated B cells' (ABCs) may drive lupus**
- **A transcription factor called T-bet drives the development of these B cells**
- **Deletion of T-bet inside B cells in mice prone to develop autoimmune disease remain healthy**
- **Recent studies enumerating these cells in human lupus**

Rubtsova..Marrack, JCI 2017

Ettinger and colleagues Nat Comm 2018

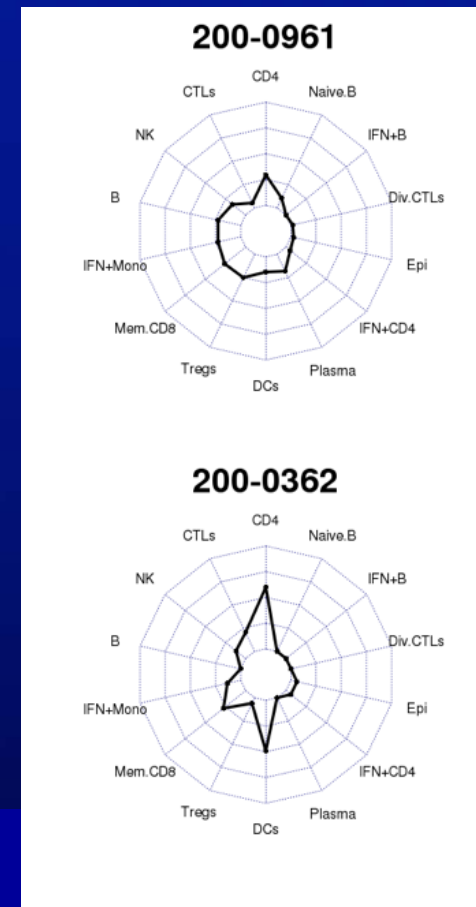
Sanz and colleagues Immunity 2018

# Many different kinds of cells in the lupus kidney



Patients vary:

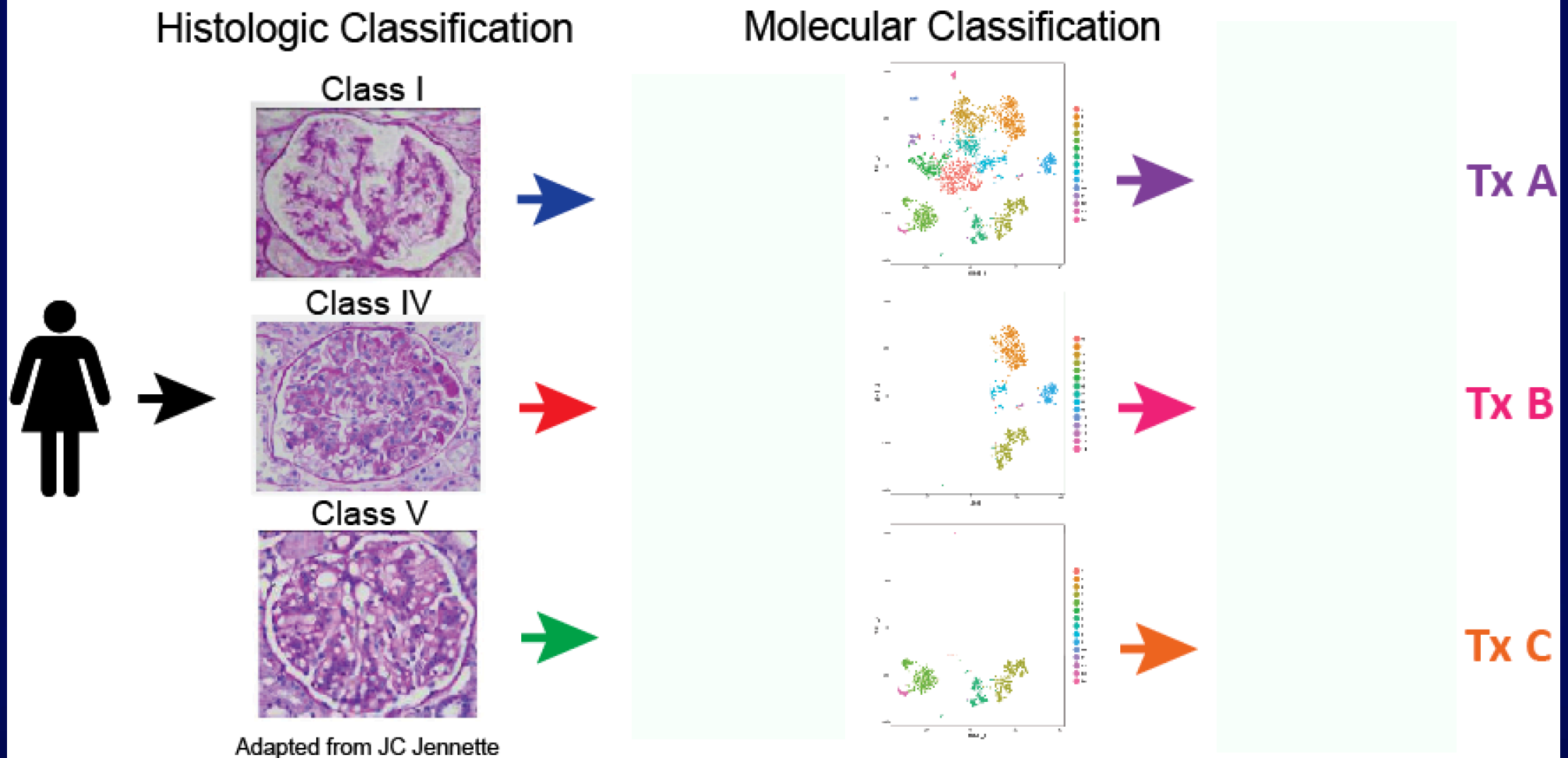
- types of infiltrating cells
- gene expression across corresponding clusters





# Aims for Phase 2

Identify molecular + cellular features that define pathologically distinct subsets of nephritis



# What's new in clinical trials?

- Two Phase 2 clinical trials reported success at ACR 2018
- Baricitinib- an oral JAK inhibitor approved to treat RA
  - Once-daily baricitinib 4-mg was associated with significant clinical improvements compared to placebo
- Ustekinumab (IL12/23 inhibitor) approved for psoriasis, PsA, Crohn's

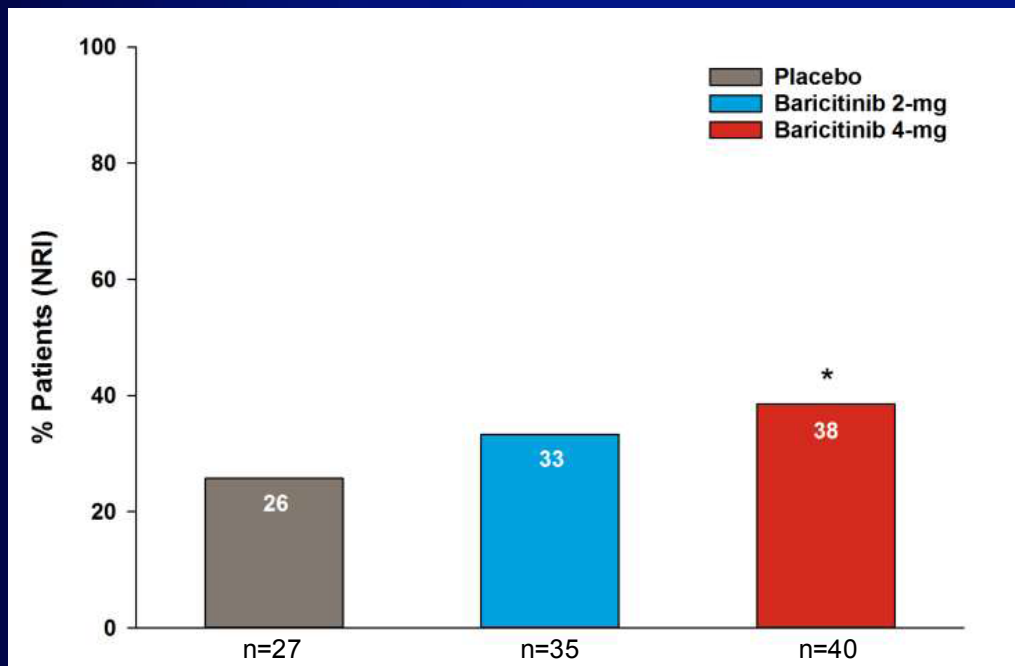
*Wallace ACR 2018*

*Van Vollenhoven ACR 2018*

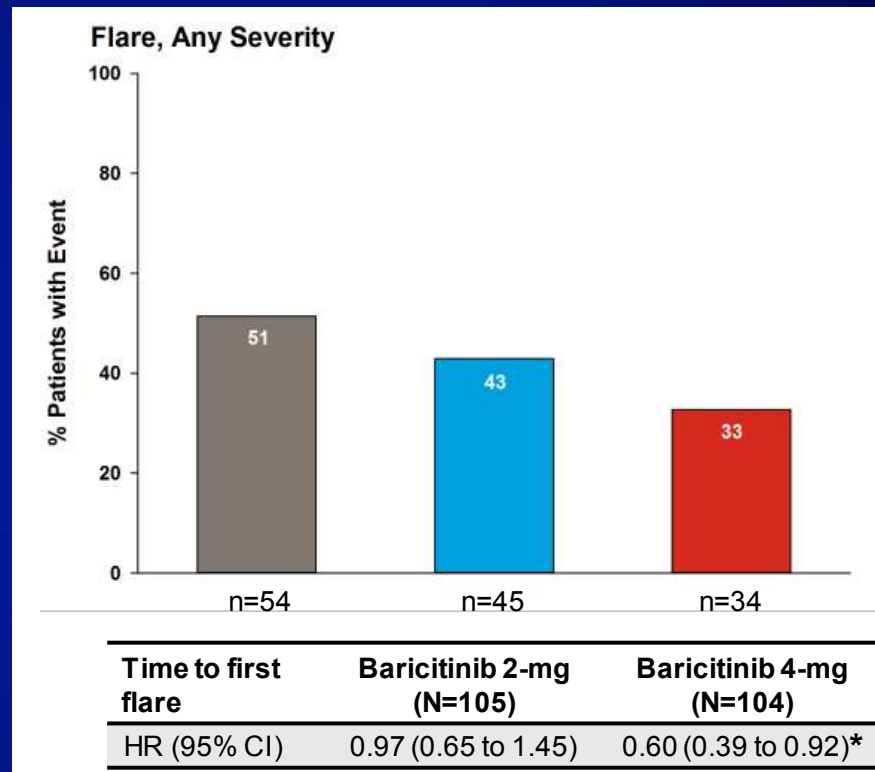


# Baricitinib

## Lupus low disease activity at 24 wk

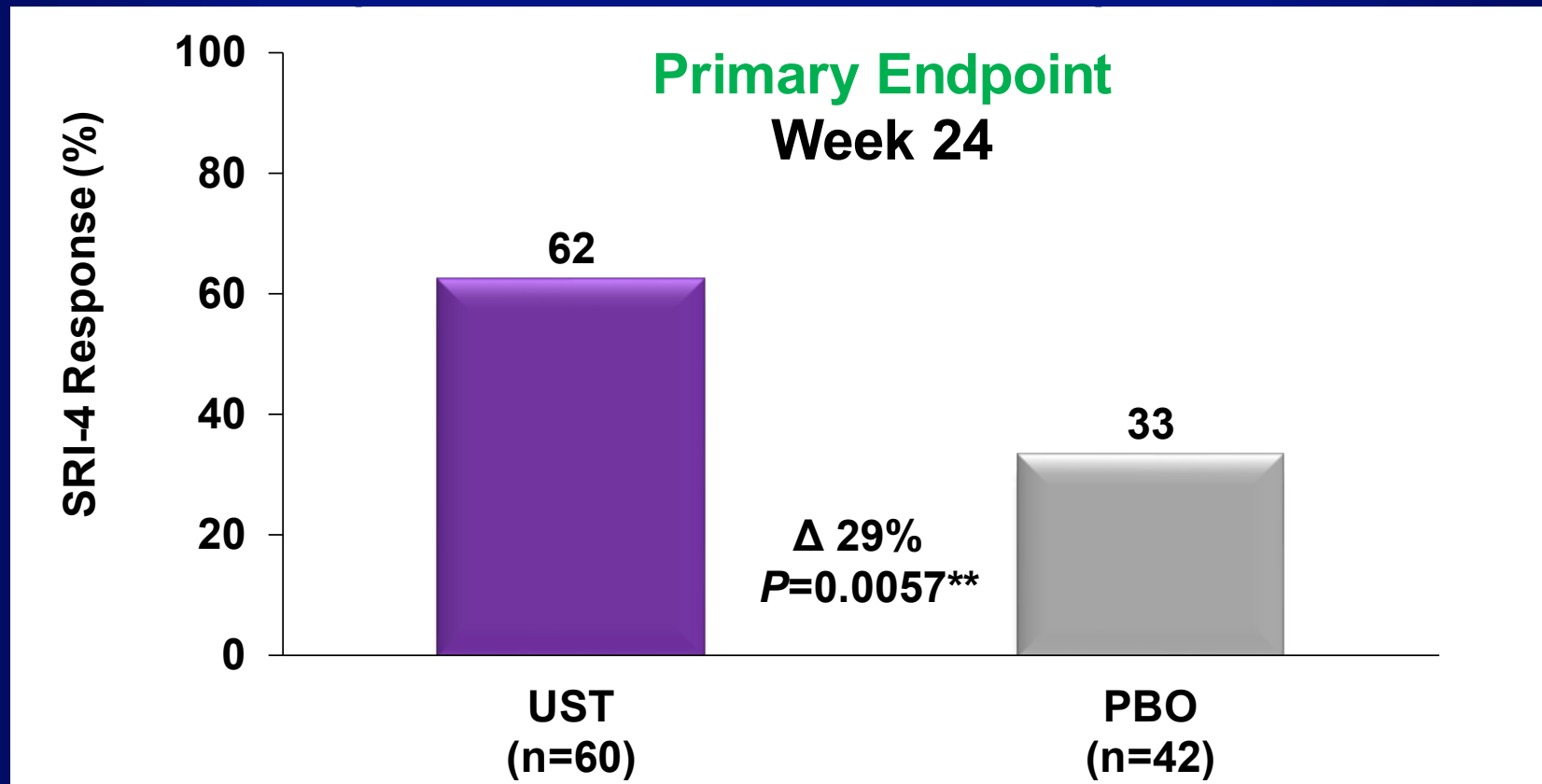


## Flares



Wallace ACR 2018

# Ustekinumab



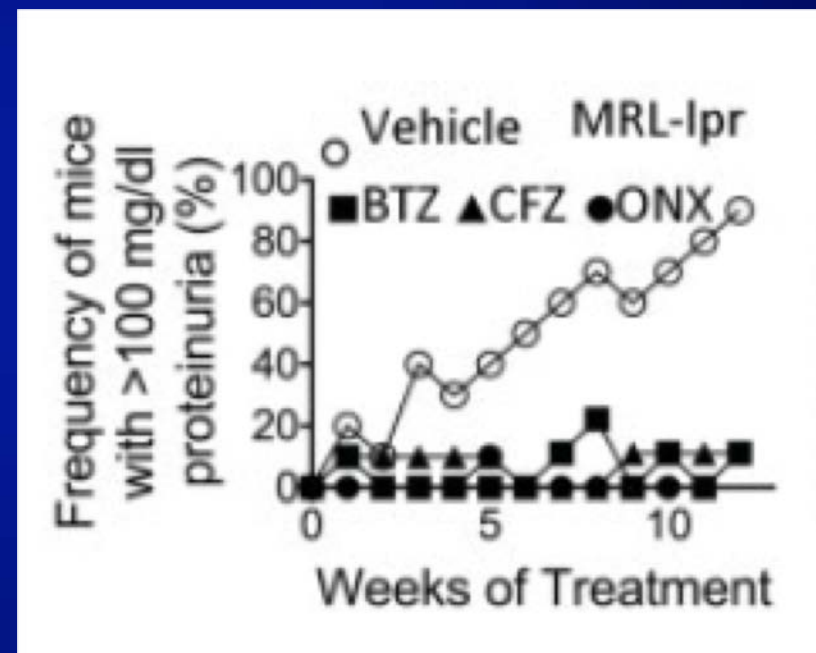
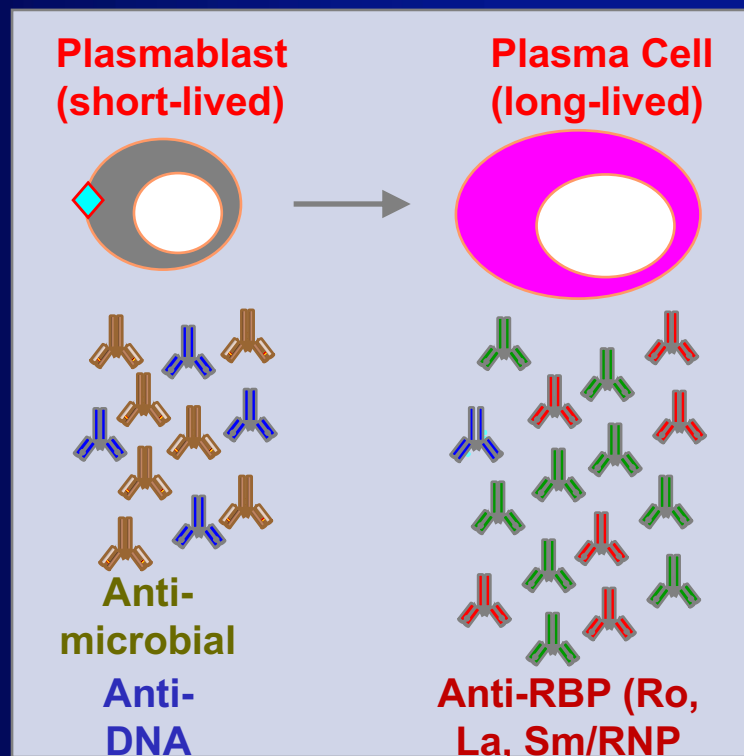
*Van Vollenhoven ACR 2018*

# Currently (or soon) enrolling trials at UR

- Cell based therapies
  - Mesenchymal stem cell transfer
- Krill oil (omega-3-fatty acids) (through LUCIN)
- Proteasome inhibitors (approved for myeloma) (Kezar)
- Daratumumab (approved for myeloma) (Janssen)

# Is it important to eliminate autoantibodies?

- Most current therapies do not effectively target autoantibodies/plasma cells

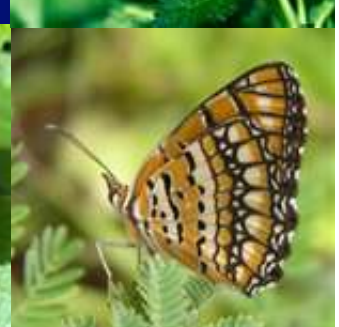


## Concluding points

- Therapy will attempt to target specific pathways in the body
- Personalized medicine
- Despite barriers, novel mechanism-based therapies are in development for SLE
- Eventual treatments may involve combination therapies, i.e., “cocktails” of targeted and semi-targeted therapies



**Thank You!**



## Learn More

- [www.lupusresearch.org/research/research\\_update.html](http://www.lupusresearch.org/research/research_update.html)
- [LupusTrials.org](http://LupusTrials.org)
- [www.clinicaltrials.gov](http://www.clinicaltrials.gov)
- The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) and the Office on Women's Health have developed a strategic plan for reducing health disparities. Lupus is included as an area of research focus. Recent first-ever National Public Health Agenda for Lupus in collaboration with the National Association of Chronic Disease Directors (NACDD). Further information on disparities in lupus and educational material at:
  - <http://thelupusinitiative.org>
  - [www.couldihavelupus.gov](http://www.couldihavelupus.gov)
  - <https://fnih.org/what-we-do/current-research-programs/amp-ra-sle>