



An Orally Active Alpha 4 Integrin Antagonist AJM300 Prevents the Development of Experimental Colitis Induced by Adoptive Transfer of IL-10 Deficient CD4⁺ T cells in Mice.

T. Sugiura, K.Kuribayashi, S.Kageyama*. Ajinomoto Co., Inc.

*Correspondence address: shunsuke kageyama@ajinomoto.con

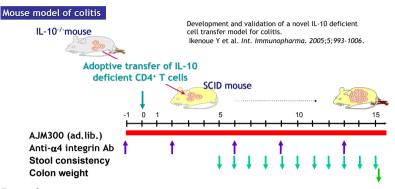
Summary

- ●AJM300, an orally active small molecule alpha 4 integrin antagonist, is currently being developed for IBD in Japan.
- AJM300 was effective in a mouse model of colitis induced by adoptive transfer of IL-10 deficient CD4⁺ T cells.
- •The efficacy of AJM300 at 1% of diet was shown to be comparable to the maximum efficacy of alpha 4 integrin blockade.
- AJM300 might become the promising oral drug for the treatment of patients with IBD.

Introduction & Purpose

- Inhibition of leukocyte trafficking with anti-alpha 4 integrin antibody has been clinically validated as a therapeutic approach for inflammatory bowel disease (IBD). However, the orally effective 'anti-alpha 4 integrin therapy' may be more attractive in clinical practice.
- AJM300, an orally active small molecule alpha 4 integrin antagonist, is currently being developed for IBD in Japan. The results of the clinical study were presented at GASTRO2009 on 23 November (OP054).
- The aim of this study was to evaluate the efficacy of AJM300 in a mouse model of colitis induced by adoptive transfer of IL-10 deficient CD4⁺ T cells. In this model, chronic intestinal inflammation invariably developed and diarrhea was exhibited within 2-3 weeks.

Methods



- CD4* T cells were isolated from spleens and mesenteric lymph nodes of diseased IL-10^{-/-} Balb/c mice, and adoptively transferred to female C.B-17/lcr-scid/scid Jcl (SCID) mice on day 0. AJM300 was orally given at the concentrations of 0.03%, 0.1%, 0.3% and 1% in the diet, and anti-mouse alpha 4 integrin monoclonal antibody (PS/2) was intraperitoneally administrated at the dose of 10 mg/kg twice a week, and the first-dosing was started on day -1. Each group consisted of 8 animals.
- The stool consistency (0:normal beaded stool, 1:soft stool, 2:diarrhea) was recorded everyday, starting from day 5. On day 15, the colons were removed and weighed.
- Both the infiltration of T cells (CD3⁺ cells) in the colonic lamina propria and the expression of MAdCAM-1 were analyzed by the immunofluorescence staining. The concentrations of proinflammatory cytokines (IFN-gamma, IL-17, TNF-alpha and MCP-1) in the homogenized colon samples were measured.

Results

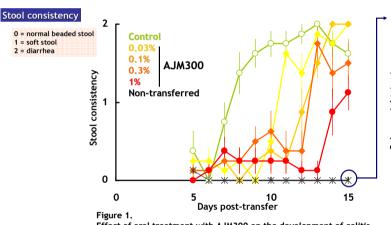
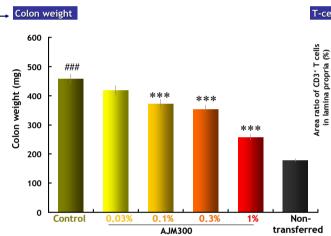


Figure 1.

Effect of oral treatment with AJM300 on the development of colitis.

Data represents mean (n=8).



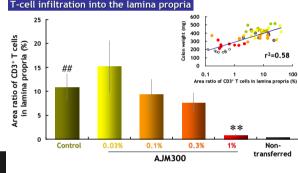
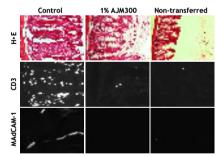


Figure 2.

Effect of oral treatment with AJM300 on the colon weight (left) and CD3+ T cell infiltration into the lamina propria (right).

Data represents mean ±SE (n=8).
Colon weight; ***f9-0.001 vs Non-transferred by Welch's t test.
****p-0.001 vs Control by Dunnett's test
T cell; **f9-0.01 vs Non-transferred by Welch's test. **p-0.01 vs Control by Steel test

Histopathological examination and Immunohistochemical staining



Histopathological examinations of the day 15 colons from mice treated with control (left), AJM300 at 1% in the diet (middle) and non-transferred (right). Hematoxylin and eosin staining (upper), and immunohistochemical stainings for CD3 positive cells (middle) and MAdCAM-1 (lower).

Pro-inflammatory cytokines in the colon tissue

Table 1. Concentrations of pro-inflammatory cytokines in the homogenized colon samples on day 15.

	IFN-gamma	IL-17	TNF-alpha	MCP-1
Control	28±4	35±2	25±2	150±10
1% AJM300	13±3 *	9.5±4.4##	13±3 *	100±20
Non-transferred	1.7±0.5	N.D.	1.5±0.6	19±11

Data represents mean±SE (n=7 or 8), *p<0.05 vs control by student's t test ###p<0.001 vs control by Welch's test N.D.; Not detected

Colonic inflammation and the increased expression of MAdCAM-1 were observed in control mice on day 15. Prophylactic oral treatment with AJM300 significantly prevented the development of colitis in mice at 1% in the diet, accompanied with 96% decrease in CD3⁺ T cell infiltration into the lamina propria. The colon weight was positively correlated with T-cell infiltration. AJM300 at 1% in the diet prevented the increase in the concentrations of pro-inflammatory cytokines in the colon.

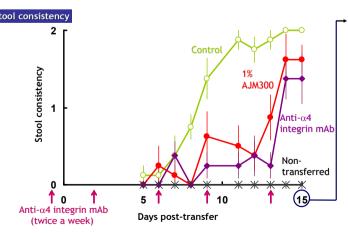
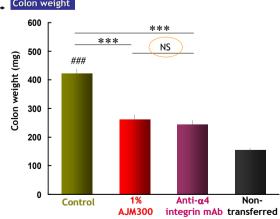


Figure 4. Effect of treatment with AJM300 or anti-alpha 4 integrin mAb (PS/2) on the development of colitis.

Data represents mean (n-8).



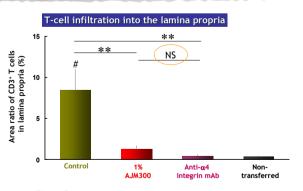


Figure 5.
Effect of oral treatment with AJM300 on the colon weight (left) and CD3⁺ T cell infiltration into the lamina propria (right).

Data represents mean \pm 5£ (n=8). Colon Weight; \pm p<0.001 vs Non-transferred by student's t test. \pm 0.01, NS: p \geq 0.05 by Tukey Kramer's test. T cell; \pm 0.05 vs Non-transferred by Welch's test. \pm 0.01, NS: p \geq 0.05, by Steel-Dwass' test.

Occupancy

120

(%)
100

100

100

11 mg/kg
113 mg/kg
113 mg/kg
113 mg/kg

Days post-injection
Figure 6. Alpha 4 integrin occupancy following i.p.
administration of anti-alpha 4 integrin mAb (PS/2) in mice.

Conclusions

• These results suggested that AJM300 prevented the development of experimental colitis induced by adoptive transfer of IL-10 deficient CD4⁺T cells in mice.

mg/kg, at which the saturation of alpha 4 integrin blockade was achieved for at least 4 days per dose.

The efficacy of 1% AJM300 was comparable to that of anti-alpha 4 integrin monoclonal antibody (PS/2) at the dose of 10

- The efficacy which was accompanied by the reduction of T-cell infiltration was observed at 1% in the diet.
- The efficacy of AJM300 at 1% of diet was shown to be comparable to the maximum efficacy of alpha 4 integrin blockade.
- AJM300 might become the promising oral drug for the treatment of patients with IBD.