



UNIVERSITY OF TORONTO
FACULTY OF MEDICINE

CRND program: from basic research to clinical translation

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Toronto Dementia Research Alliance

CRND is an interdisciplinary research institute (directed by Dr. P. St George-Hyslop)

Main mandate:

Research on Alzheimer's disease and related disorders

Structure:

**10 laboratories that bring together expertise in
Genetics**

Protein Chemistry

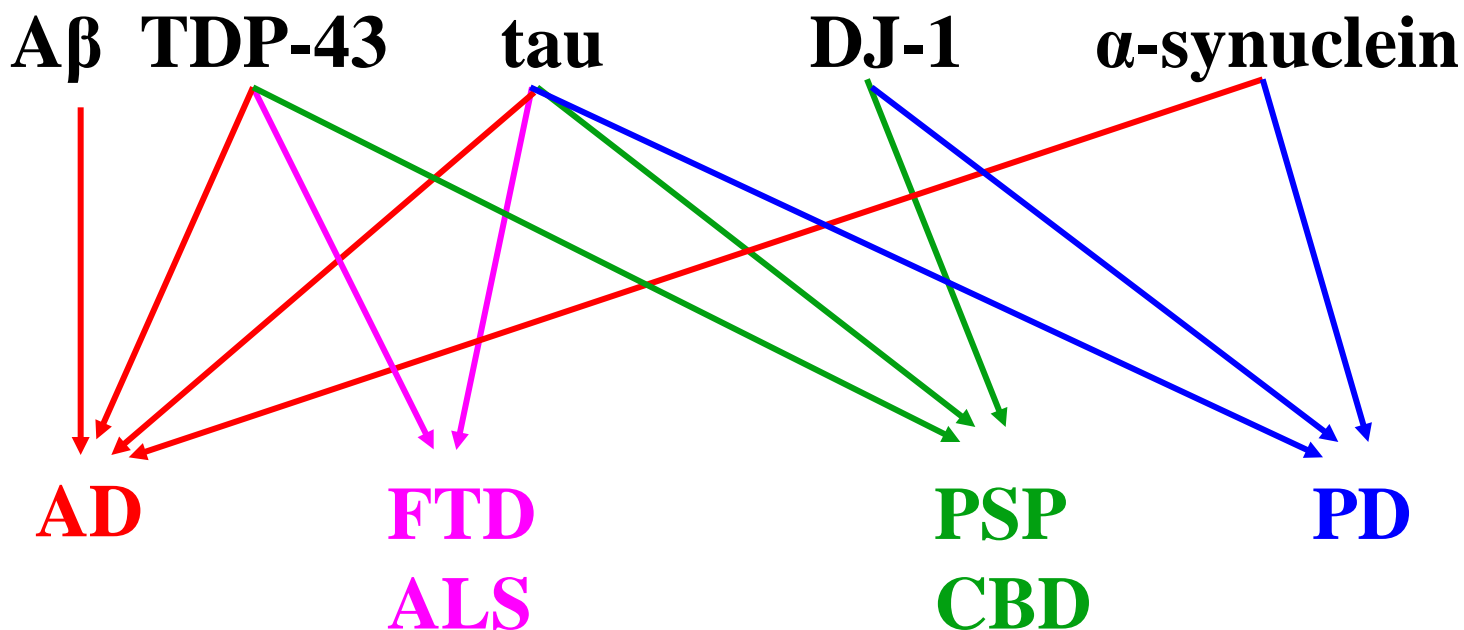
Neuropathology

Neuroimmunology

Molecular and Cell Biology

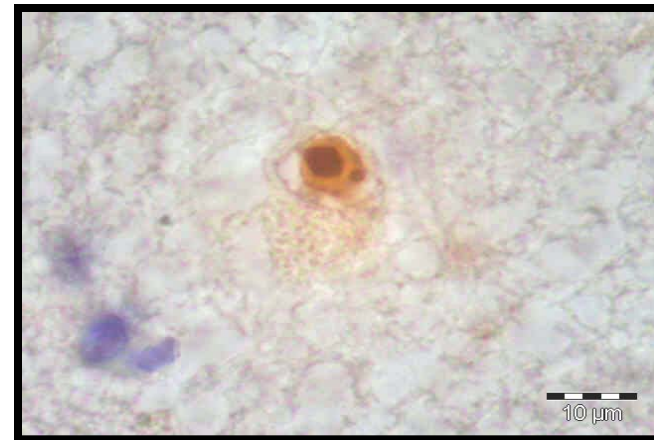
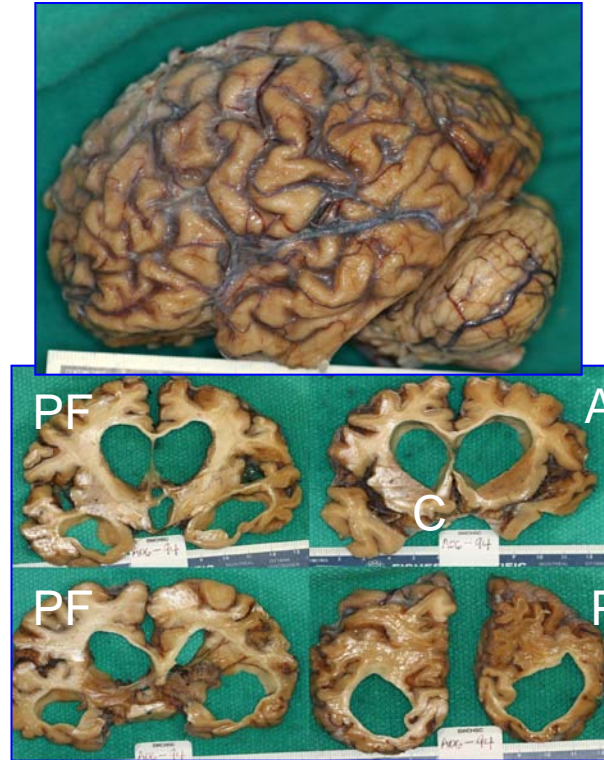
Transgenic Animal Modeling (mouse & worm models)

Clinical and neuropathological overlap between Neurodegenerative diseases



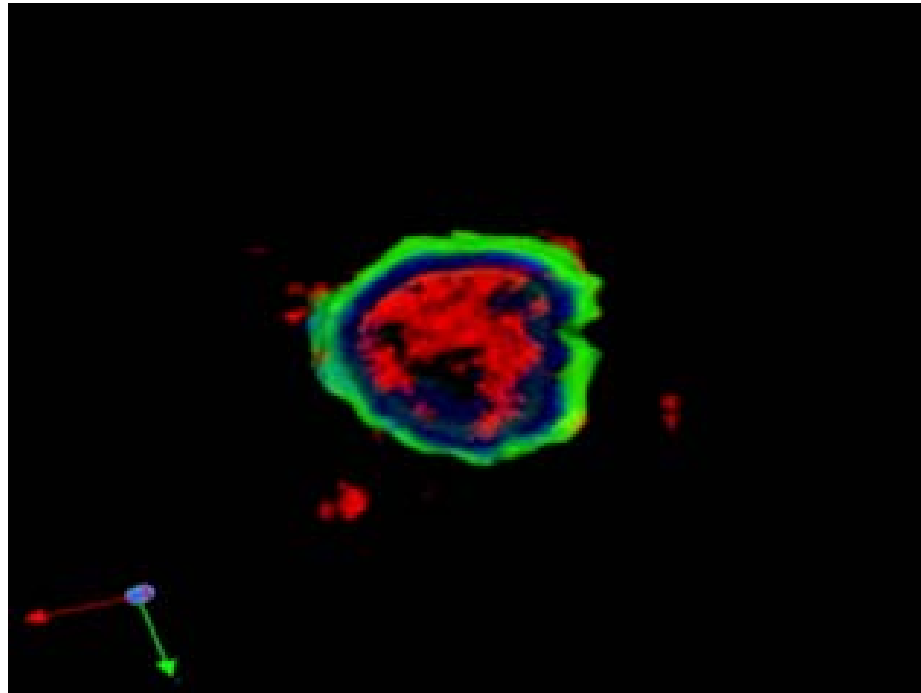
CRND is using a comprehensive approach to study these disorders

Brain pathology of FTD patient: neuronal inclusions containing TDP43 protein



- TDP43 inclusions are also present in ~20% of AD patients
- Knowledge about the mechanism of TDP43 accumulation will help to understand what kills brain cells in AD cases

3-D imaging of the inclusion: ubiquitinated core is surrounded by TDP-43



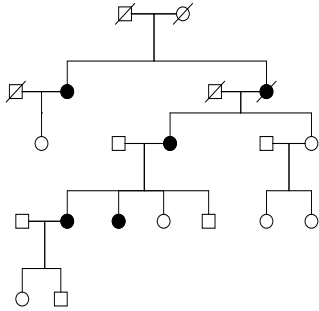
TAR DNA/RNA binding protein (TDP-43)

Nuclear factor that regulates transcription and alternative splicing

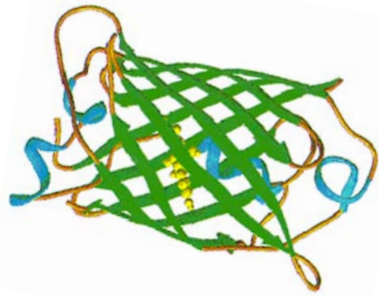
Sanelli, et al J of Neuropath and Exp Neurology, 2008

(Dr. Robertson's team at CRND)

Clinic
Identification and care of affected or at-risk individuals

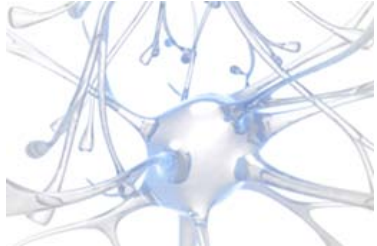


Genetics
Identification of novel genetic causes of AD



Protein Structure & Biochemistry
Evaluate structure and binding partners that regulate disease progression

Cell & Molecular Biology



Understand the role of new disease proteins



Novel Therapeutics

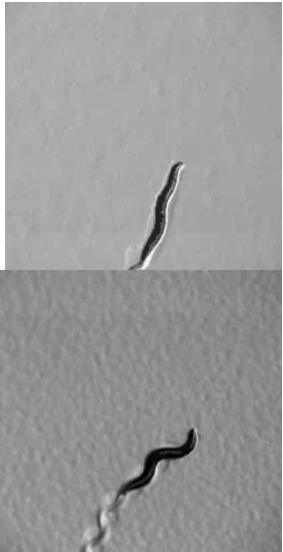


Drug Discovery

Rational drug design based on structure and function

Animal Models

Mimic AD behavior and pathology, and provide a reproducible platform for testing new drugs





What has been accomplished?

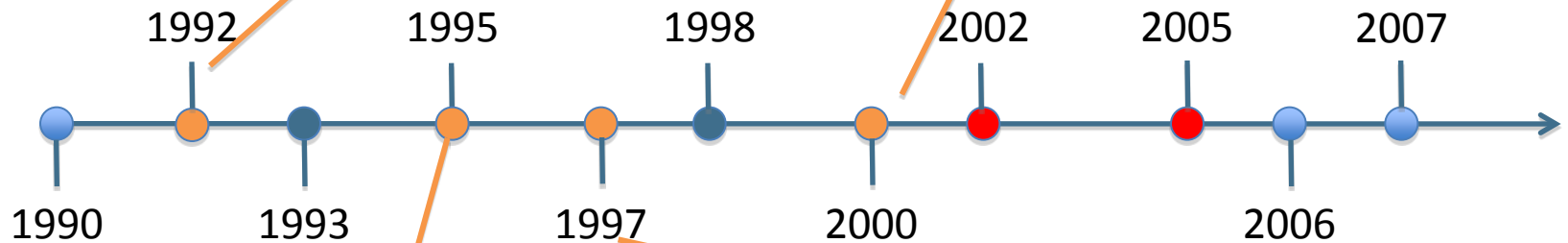


- **Peer reviewed research papers: >100 per annum**
- **International collaborations: >50 scientists in 11 countries**
- **Established collaboration with AD-related Toronto Hospitals**
- **Tractable, but still incomplete concept of mechanisms of AD**

Gene Discovery at the CRND

Identification of chromosome 14 as
“hot spot” for early-onset AD
[St George-Hyslop et al, Nat Genet]

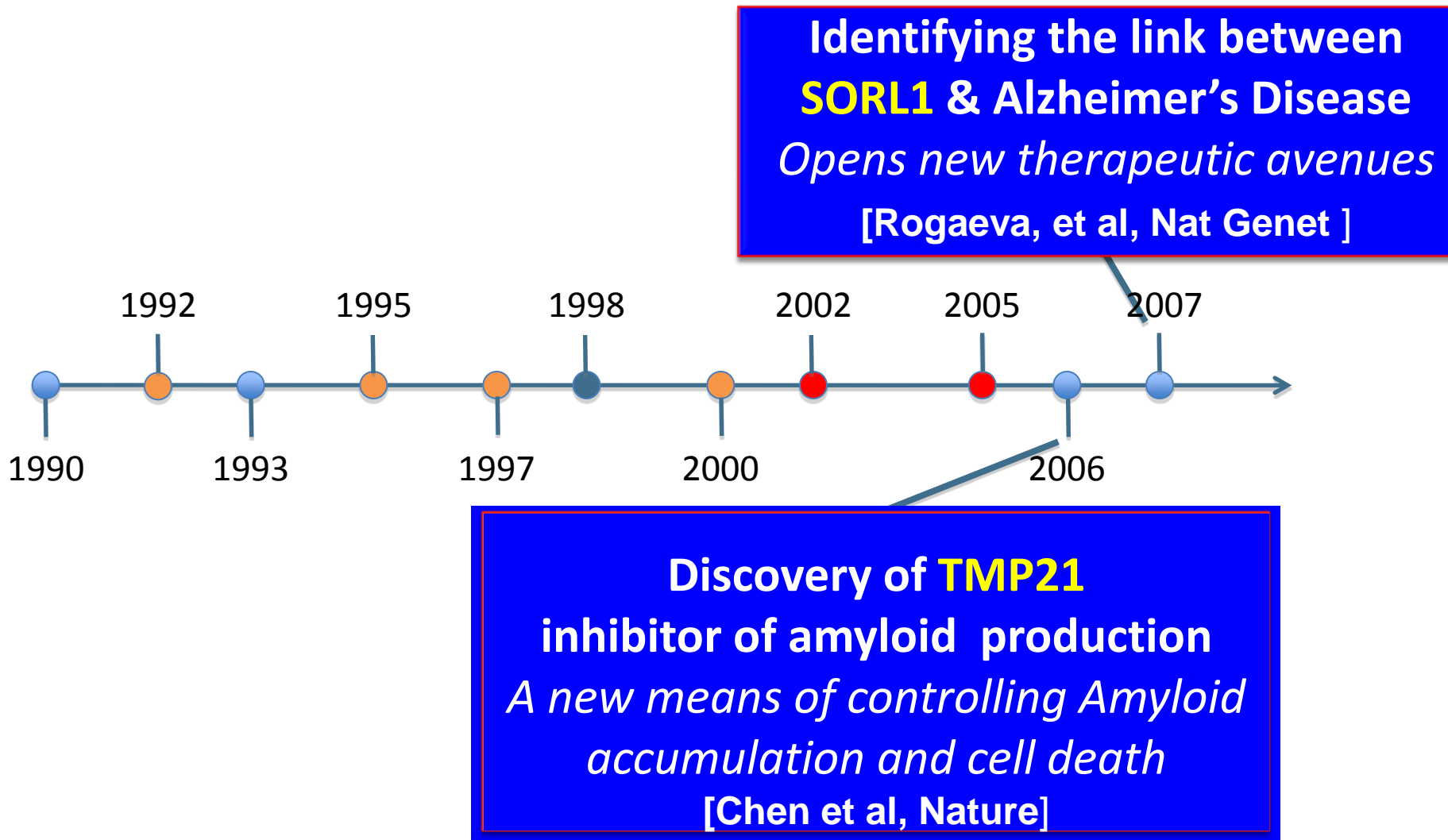
Discovery of the new gene
Nicastrin – regulator of
Presenilin and amyloid biology
[Yu, et al, Nature]



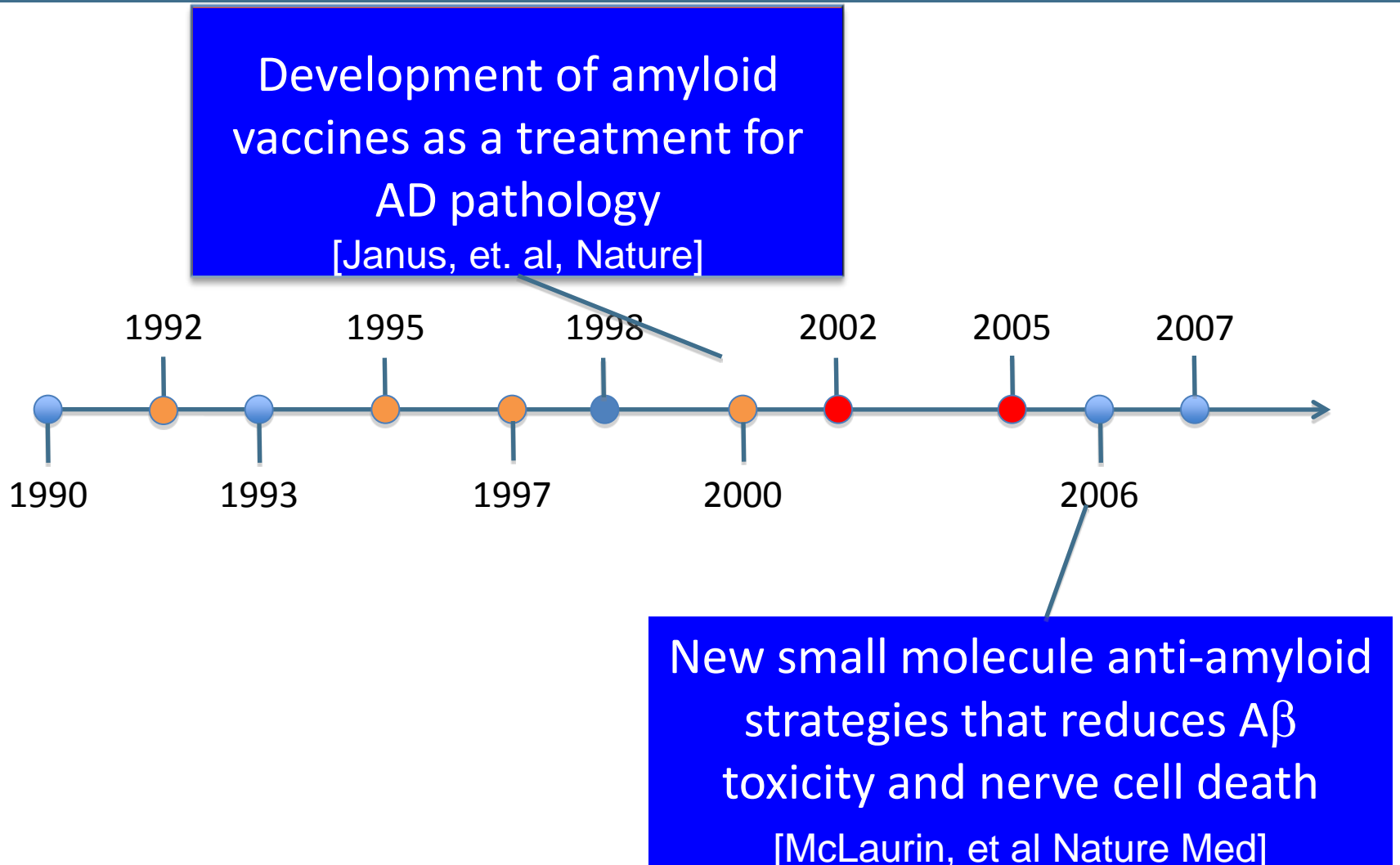
Discovery of **Presenilins 1 & 2** as
major causes of familial
Alzheimer's disease
[Sherrington et al, Nature]
[Rogaev, et al, Nature]

Establishing the link between
Presenilins and Amyloid:
mutations **increase** levels of Ab
[Citron, et al, Nat Med]

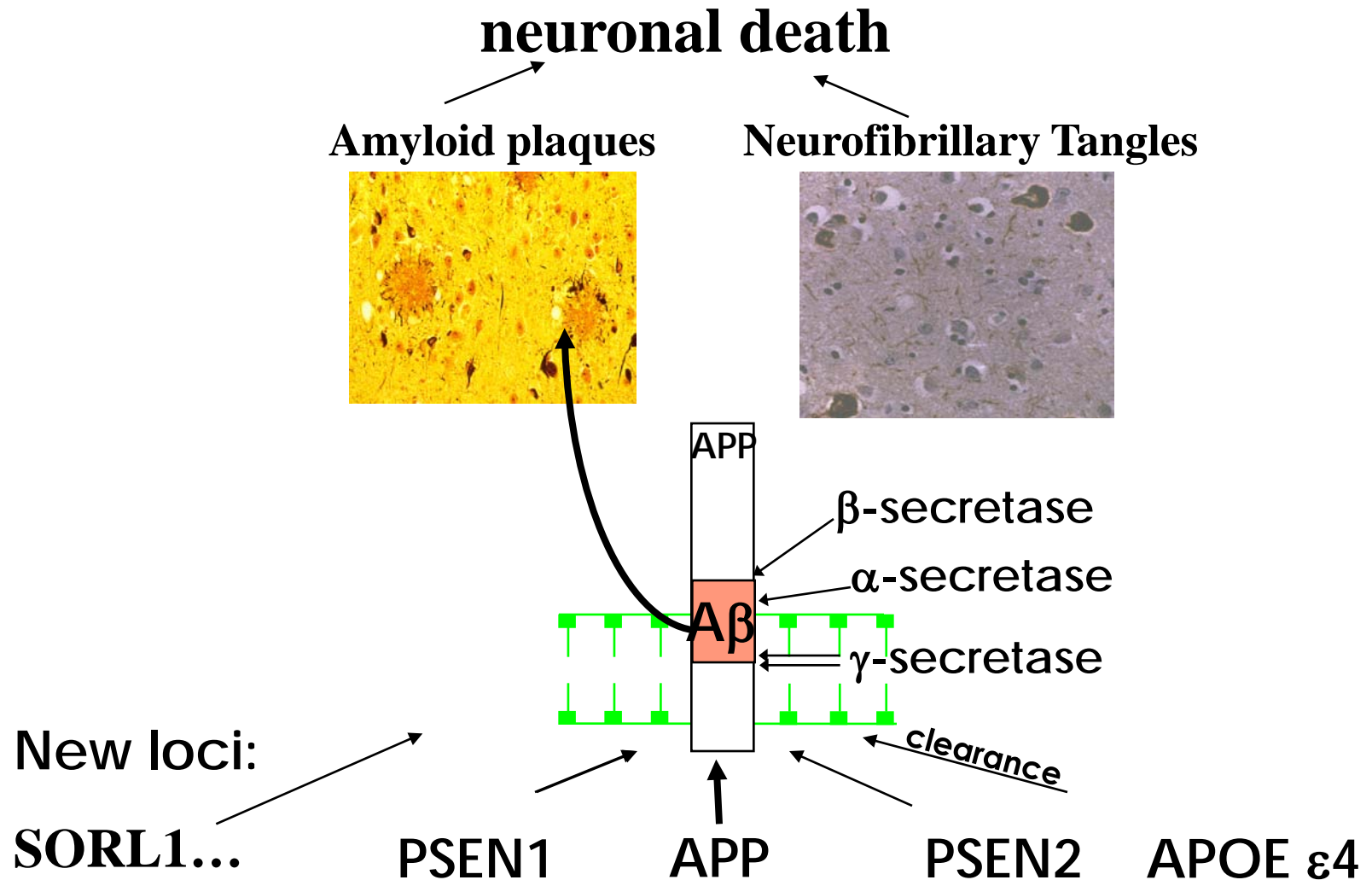
Gene Discovery at the CRND



Treatment Strategies at the CRND

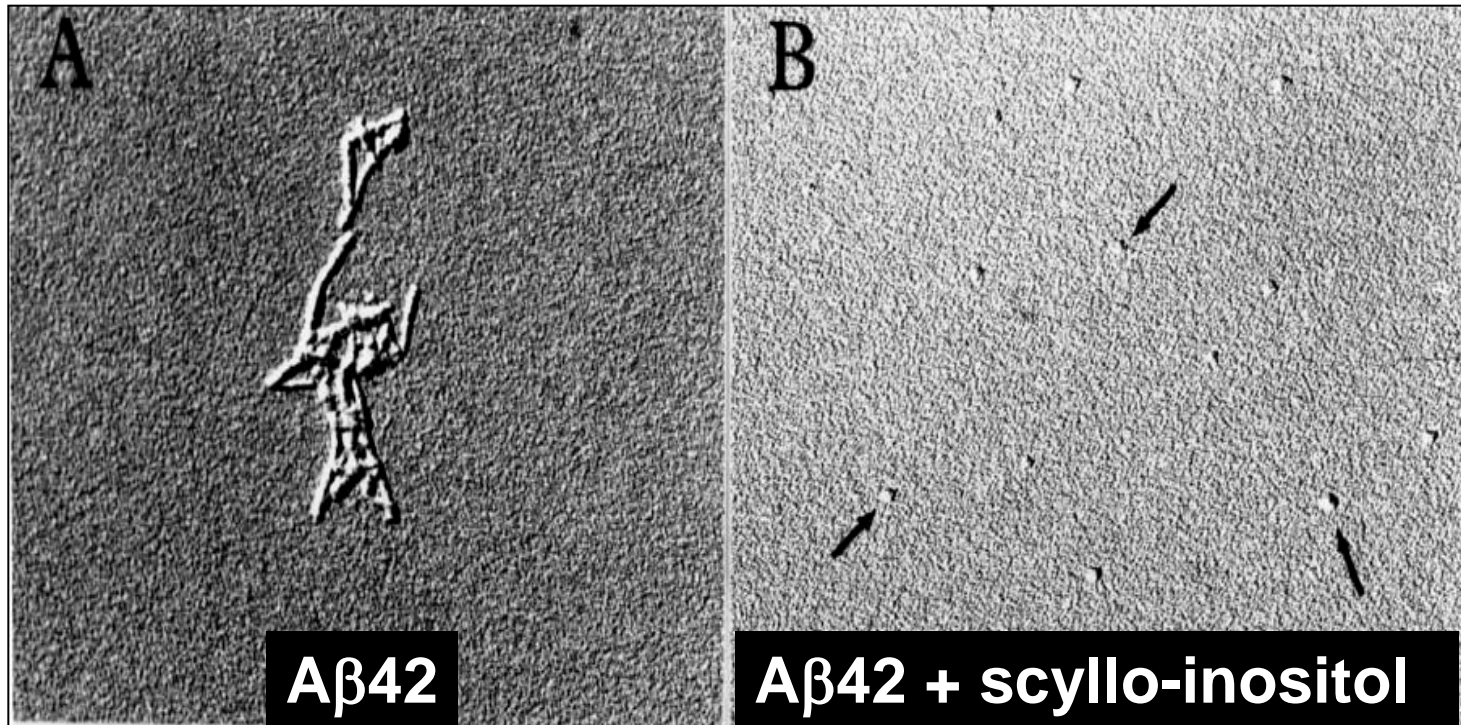


Known AD genes involved in A β metabolism



Multiple avenues being followed for anti-amyloid therapies

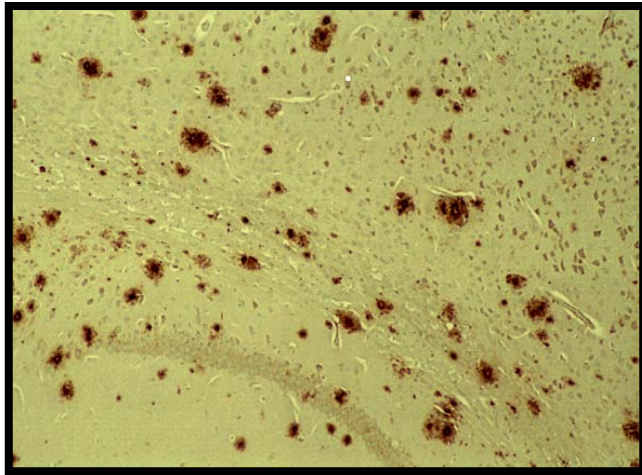
Scyllo-inositol inhibits A β fibril assembly & Toxicity (now in clinical trial)



McLaurin, Fraser, Westaway, St George-Hyslop, et al *Nature Med.* 12:801-808, 2006

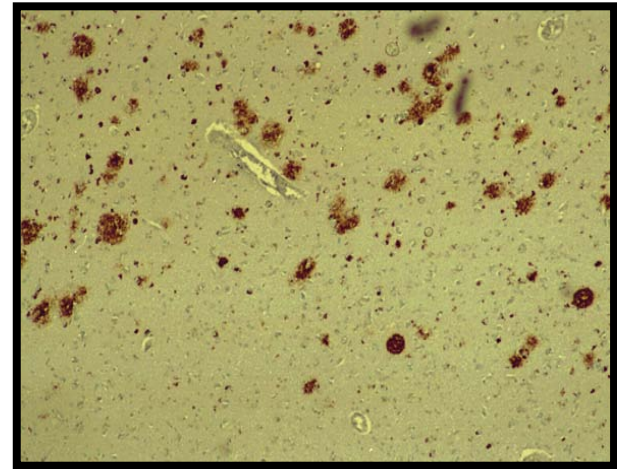
However, correct use of anti-amyloid therapies could be prophylactic (in people at risk)

Why do mice expressing mutant APP show a good response to anti-amyloid therapies?



MOUSE

**Amyloid deposition in
Tg CRND8 MOUSE brain
at 26 weeks**



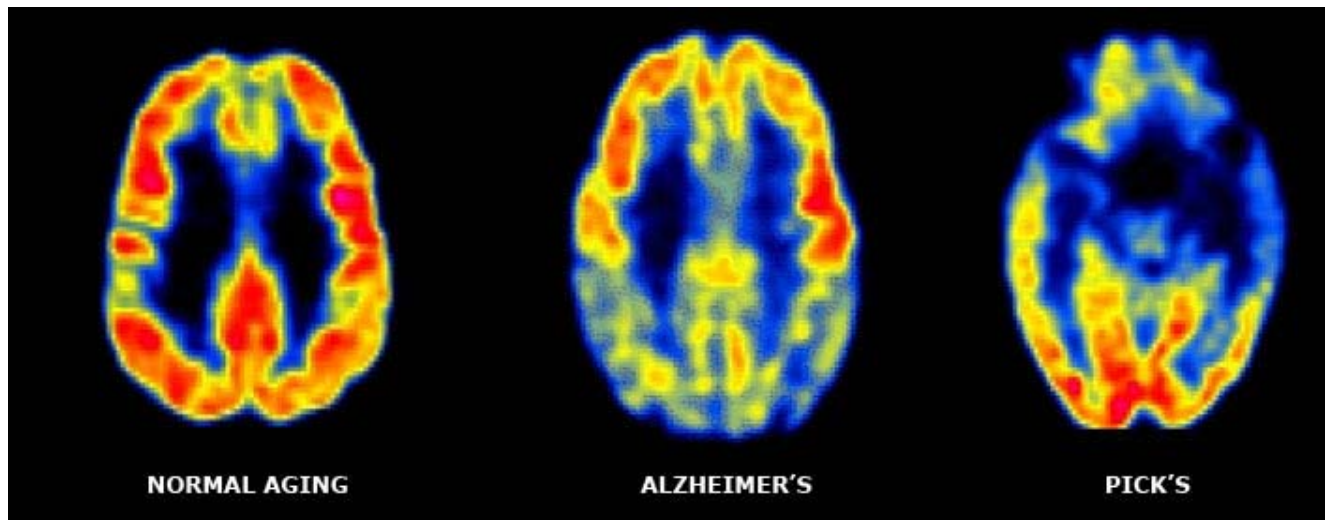
HUMAN

**Amyloid deposition in
HUMAN AD brain
at 70 years**

**But no tau-pathology & neuronal loss
Preclinical model....**

Novel Diagnostics for Alzheimer's Disease

- Development of radiolabelled compounds with specific binding to aggregated A β peptide.
- Testing in CRND transgenic model of amyloid pathology.
- Collaboration with University Health Network imaging specialists (Dr. David Jaffray).

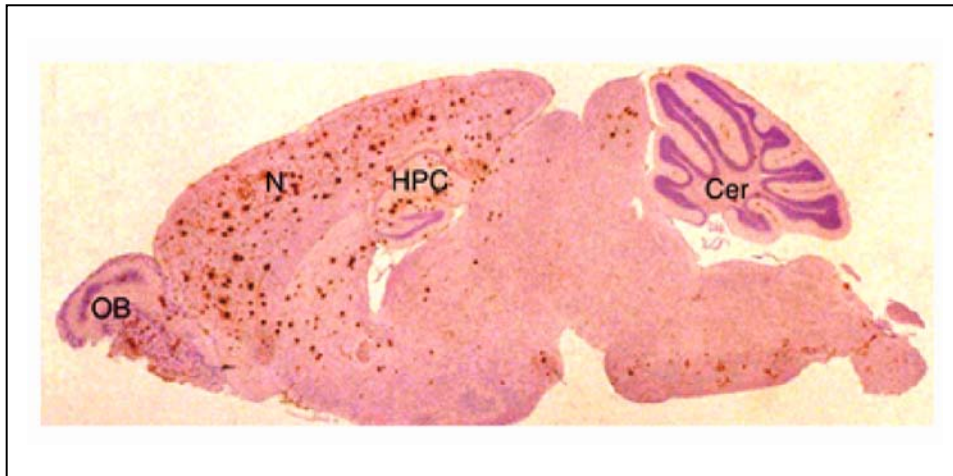


Positron Emission Tomography (PET) – Functional Metabolism

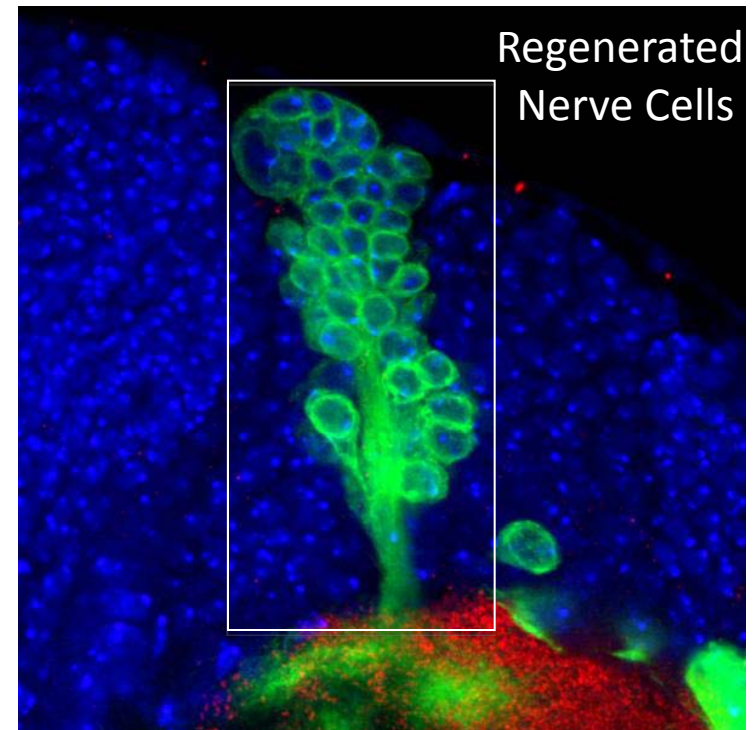
Neuronal Neogenesis in Alzheimer's Disease

“Birth of new nerve cells”

- Is it possible to generate new nerve cells to repair damaged brain tissue?
- What role does the plaque and tangle pathology play in preventing this process?
- Can this process be enhanced or accelerated to treat AD patients?



Testing in TgCRND8 Model
of AD Amyloid Pathology



Where to go next?

- **Need more details on molecular mechanisms of AD to detect new therapeutic targets.**
- **Developing approaches for prophylactic AD therapies;**
- **Need new diagnostics to detect disease before symptoms (e.g. novel imaging techniques, genetics);**

Conclusion: we do need an expansion of interdisciplinary collaboration...