GIVOSIRAN IN ACUTE INTERMITTENT PORPHYRIA

ASSEMBLÉE GÉNÉRALE G2M 31/03/2023



Antoine Poli









CONFLICT OF INTEREST

None

ACUTE INTERMITTENT PORPHYRIA (AIP)

- PBGD deficiency, third enzyme of heme biosynthesis pathway
- Autosomal dominant, low penetrance
- Accumulation of heme precursors, ALA and PBG, triggered by precipitatings factors (alcohol, fasting, infections, medications, menstrual cycle...)
- Attack: severe and long lasting abdominal pain + other digestive symptoms + possible neurological involvement
- Recurring attacks in less than 5% of patients

GIVOSIRAN





- Reduced ALASI activity
- Decrease in ALA and PBG levels



MEDIAN LEVELS OF URINARY DELTA-AMINOLEVULINIC ACID



Median percent reduction in ALA level = 89.9%

Median levels of urinary delta-aminolevulinic acid (ALA). Bars indicate the interquartile range. Green area indicates ALA normal range (0 to 3 µmol/mmol of creatinine)

CLINICAL EFFECTIVENESS

- Major clinical effectiveness: 96% of the patients were attack-free at the time of the study
- Patients with a profound and stable decrease in ALA level (and no acute symptoms) : 10/24 (42%)
- Patients with moderate and/or unstable decrease in ALA level (and no acute symptoms) : 14/24 (58%)
- Mean time since disease onset between patients on follow-up and patients treated every three months or more frequently 6.7 years vs. 19.6 years, p=0.0009



Givosiran was more effective if given early in the disease course

ADVERSE EVENTS

	no. of patients	%
Any adverse event	25/25	100
Serious adverse event	6/25	24
Any adverse event leading to treatment discontinuation	1/25	4
Acute pancreatitis	1/25	4
Pulmonary embolism	1/25	4
Nausea	10/25	40
Fatigue	17/25	68
Myoclonus/tremors	3/25	12
Injection site reaction/rash	6/25	24
Increased hair loss and/or spontaneous nail loss	6/25	24
Hyperhomocysteinemia	23/23	100
Increased ALT	8/25	32
Increased lipase level	5/25	20
Decreased eGFR	2/22	9
Transient increase in serum creatinine	20/22	91

ALT: alanine aminotransferase; eGFR: estimated glomerular filtration rate.

HYPERHOMOCYSTEINEMIA



Petrides et al., 2021

B6 TREATMENT & HOMOCYSTEINE



Hcy (µmol/L, blue squares) and B6 (nmol/L, orange dots) levels in patients 9, 17, 23 and 25, treated with vitamine B6 250 mg each day. Arrows indicate vitamin B6 treatment initiation.

PATIENTS' TREATMENT AND MONITORING ALGORITHM: TOWARDS A PERSONALIZED MEDICINE APPROACH



LONG-TERM OUTCOME



Month

French center for porphyrias

Medical staff

- Laurent Gouya
- Hervé Puy
- Caroline Schmitt
- Thibaud Lefebvre
- Neila Talbi
- Boualem Moulouel
- Jean-Charles Deybach
- Antoine Poli

Genetic counselor

Arienne Mirmiran

Laboratory technicians

- Andrea Araujo
- Corinne Culerier
- Lorena Chappuis
- Nathalie Dessendier
- **Catherine Guesdon**

Secretaries

- Laurence Champroux Beaufils
- Valérie Monie-Joyes

Research team

- Valeria Fiorentino
- Hana Manceau
- Gaël Nicolas
- Katell Peoc'h

Molecular biology laboratory

- Jérôme Lamoril
- Dimitri Tchernitchko

