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ΕΤΑΙΡΕΙΑ  
HELLENIC  
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ΠΑΝΕΛΛΗΝΙΟ

Πνευμονολογικό

ΣΥΝΕΔΡΙΟ

12-15 ΔΕΚΕΜΒΡΙΟΥ 2019 | ATHENS HILTON

# IPF pathogenesis

## *New Hypotheses*

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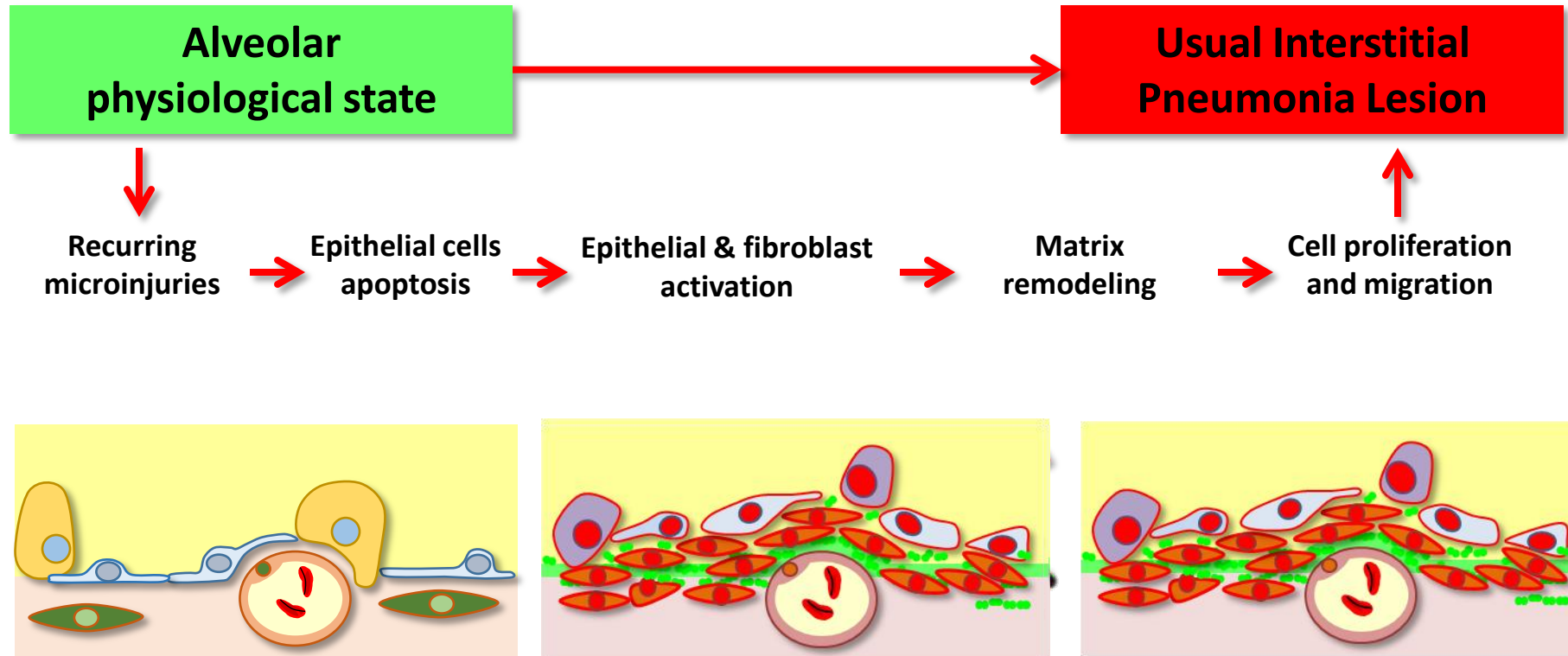
Πνευμονολογικό

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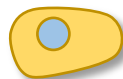
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# “Old” concepts



Pneumocyte type I



Pneumocyte type II



Endothelial cell



Fibroblast



# New Concepts



Modified from Ley et al, *AJPLung*. 2014





## **“New” concepts**

- **Role of immune deregulation**
- **Role of aging – senescence**
- **Role of cellular bioenergetics**
- **Role of Microbiome/Gut-Lung axis**
- **The theory of basal epithelial stem cells**



# Aged polymorphonuclear leukocytes cause fibrotic interstitial lung disease in the absence of regulation by B cells

© 2018 Nature America Inc., part of Springer Nature.

Jung Hwan Kim<sup>1,2</sup>, John Podstawka<sup>1,2</sup>, Yuefei Lou<sup>1,2</sup>, Lu Li<sup>1,2</sup>, Esther K. S. Lee<sup>1,2</sup>, Maziar Divangahi<sup>3</sup>, Björn Petri<sup>4,5</sup>, Frank R. Jirik<sup>6</sup>, Margaret M. Kelly<sup>1,7</sup> and Bryan G. Yipp<sup>1,2\*</sup>

DEPLETED B CELLS

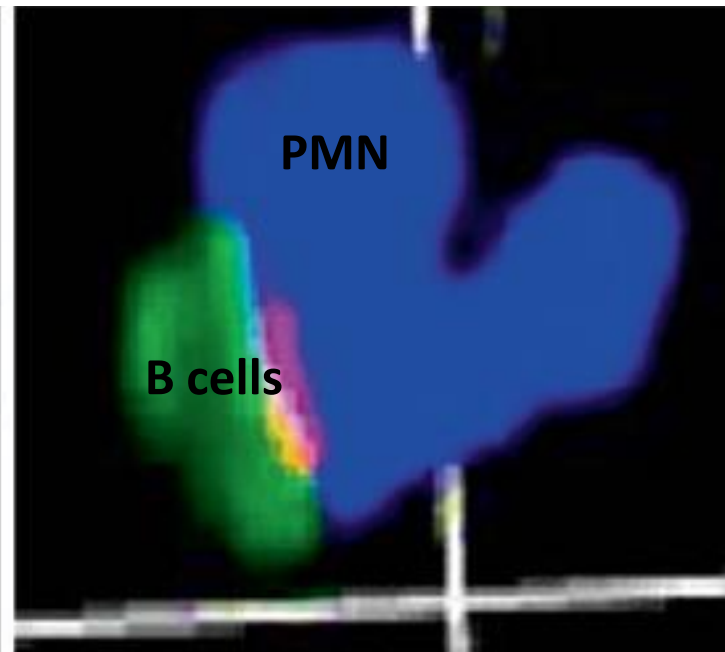
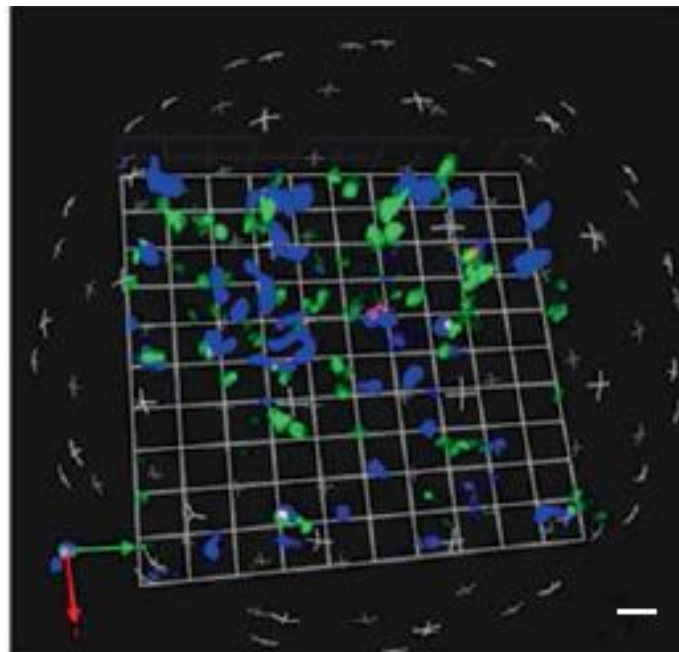
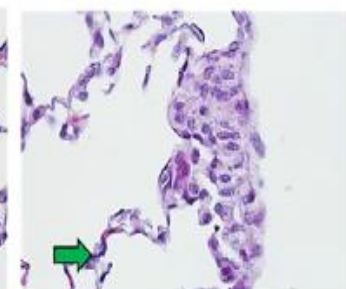
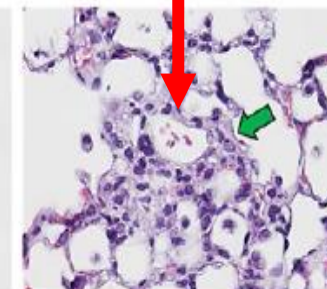
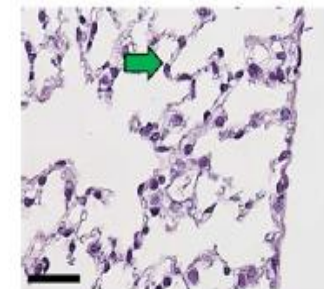
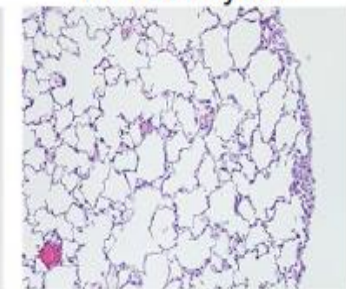
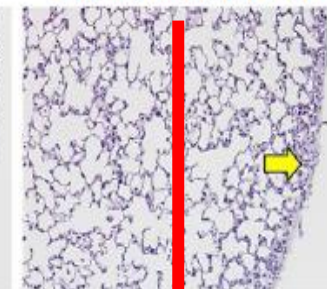
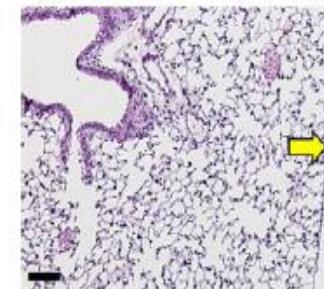
FIBROSIS

CD19-DTR + DT +  
mAb to Ly6G

a

Rosa26-DTR + DT

CD19-DTR + DT



PMN B cell interaction



# Validation of a 52-gene risk profile for outcome prediction in patients with idiopathic pulmonary fibrosis: an international, multicentre, cohort study



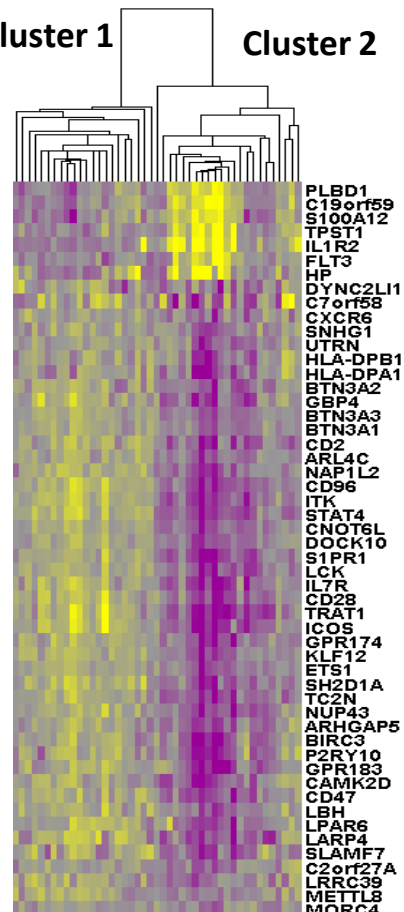
*Lancet Respir Med* 2017

Published **Online**

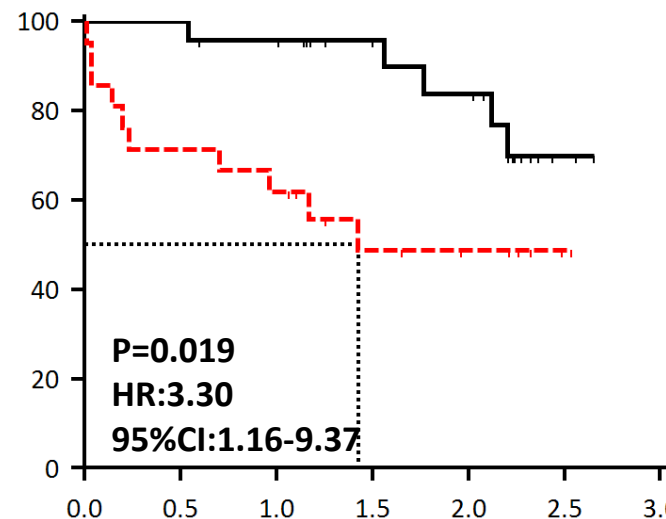
September 20, 2017

Jose D Herazo-Maya\*, Jiehuan Sun\*, Philip L Molyneaux, Qin Li, Julian A Villalba, Argyrios Tzouvelekis, Heather Lynn, Brenda M Juan-Guardela, Cristobal Risquez, Juan C Osorio, Xiting Yan, George Michel, Nachele Aurelien, Kathleen O Lindell, Melinda J Klesen, Miriam F Moffatt, William O Cookson, Yingze Zhang, Joe G N Garcia, Imre Noth, Antje Prasse, Ziv Bar-Joseph, Kevin F Gibson, Hongyu Zhao, Erica L Herzog, Ivan O Rosas, Toby M Maher, Naftali Kaminski

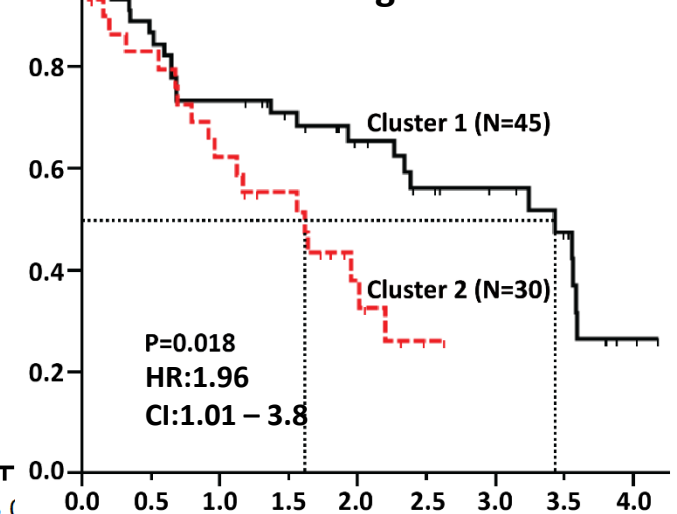
Cluster 1 Cluster 2



TFS – Chicago IPF cohort



TFS – Pittsburgh IPF cohort





# Monocyte count – the ideal prognosticator?



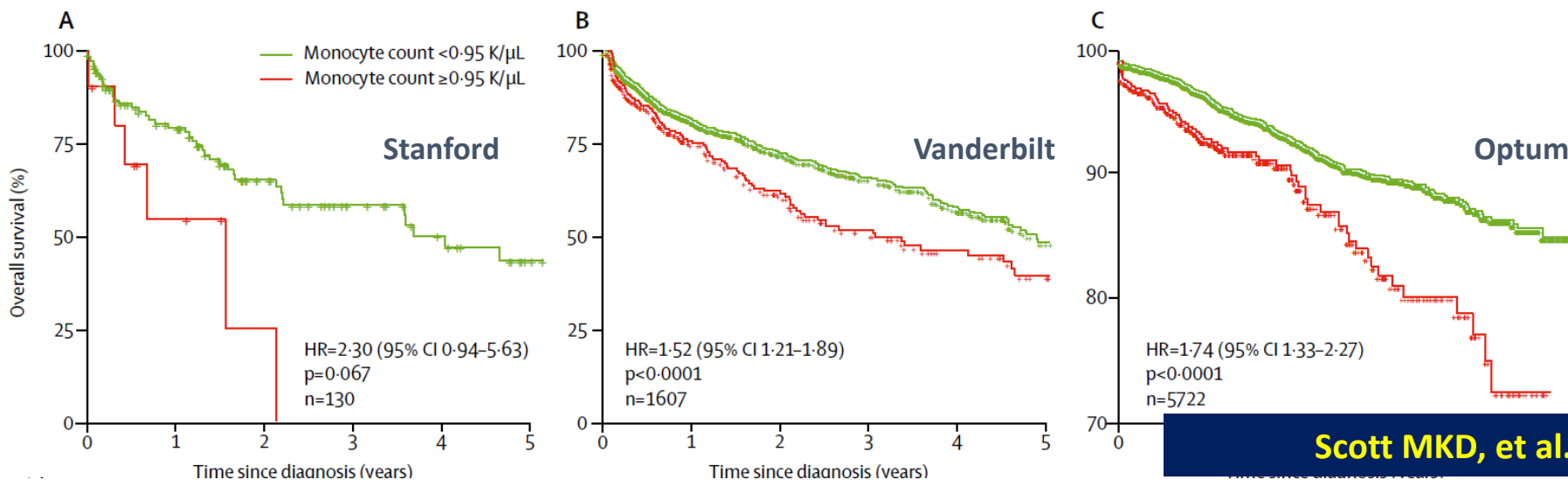
## Increased monocyte count as a cellular biomarker for poor outcomes in fibrotic diseases: a retrospective, multicentre cohort study

Madeleine K D Scott, Katie Quinn, Qin Li, Robert Carroll, Hayley Warsinske, Francesco Vallania, Shirley Chen, Mary A Carns, Kathleen Aren, Jiehuan Sun, Kimberly Koloms, Jungwha Lee, Jessika Baral, Jonathan Kropski, Hongyu Zhao, Erica Herzog, Fernando J Martinez, Bethany B Moore, Monique Hinchcliff, Joshua Denny, Naftali Kaminski, Jose D Herazo-Maya, Nigam H Shah\*, Purvesh Khatri\*



Finally we have a clinician-friendly, cheap biomarker  
3 agents were approved in asthma based on Eos count

95% CI 1.22–3.47;  $p=0.0068$ ) across the COMET, Stanford, and Northwestern datasets). Analysis of medical records of 7459 patients with idiopathic pulmonary fibrosis showed that patients with monocyte counts of  $0.95 \text{ K}/\mu\text{L}$  or greater were at increased risk of mortality with lung transplantation as a censoring event, after adjusting for age at diagnosis and



Scott MKD, et al. Lancet Respir Med 2019;7:497–508





# Aging governs wound-healing response



- **Aging**-time-dependent functional decline of organs and tissues
- **Senescence**-irreversible cease of cell division
- Leading cause of death in Western civilization
- 100/150 K people across the globe die every day of age-related causes
- IPF incidence – 10/100.000
- IPF incidence >65 yrs – 90/100.000



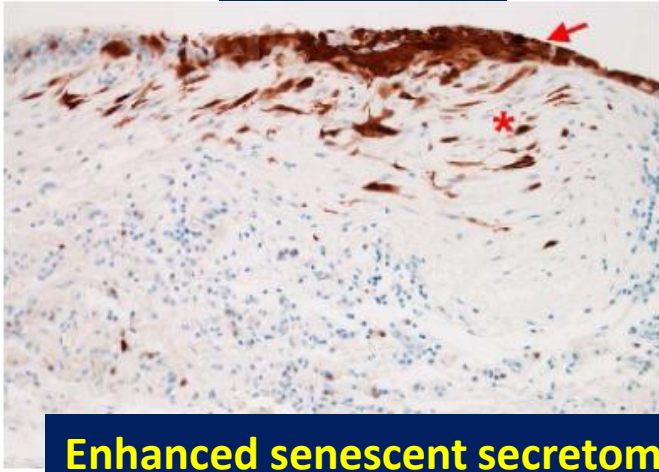




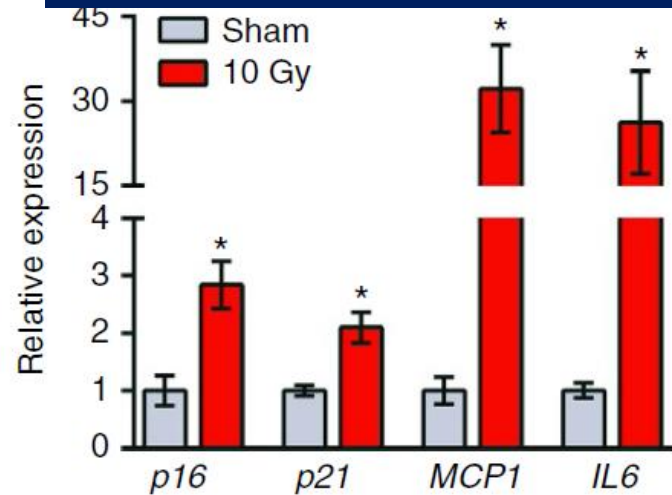
# Cellular senescence mediates fibrotic pulmonary disease



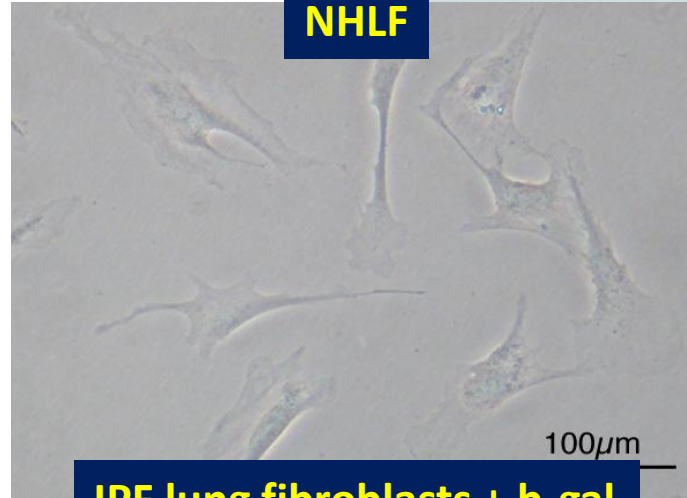
**p16-IPF lung**



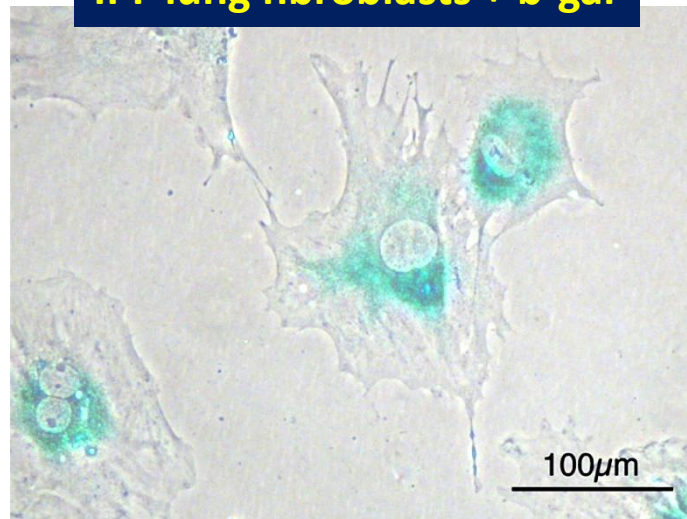
**Enhanced senescent secretome**



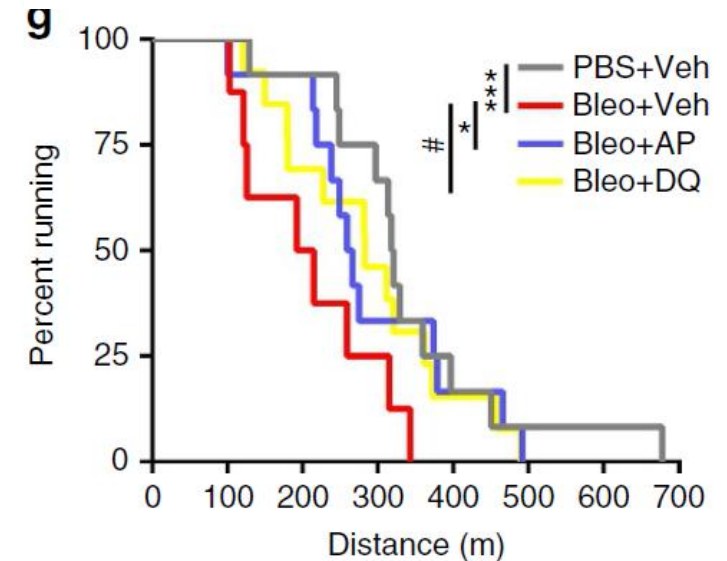
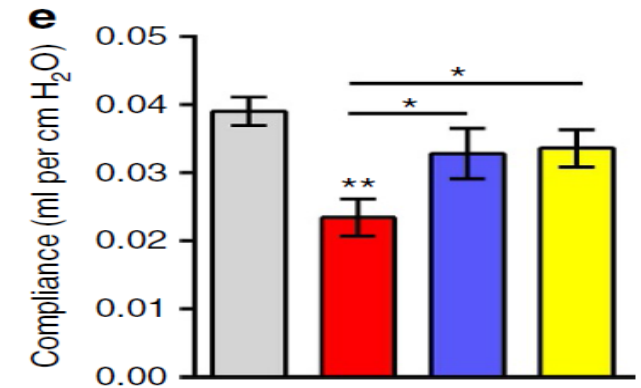
**NHLF**



**IPF lung fibroblasts + b-gal**



**In-vivo anti-fibrotic effects of senolytics**



# Senolytics in idiopathic pulmonary fibrosis: Results from a first-in-human, open-label, pilot study

Jamie N. Justice <sup>a,\*,1</sup>, Anoop M. Nambiar <sup>b,1</sup>, Tamar Tchkonja <sup>c</sup>, Nathan K. LeBrasseur <sup>~</sup>, Rodolfo Pascual <sup>~</sup>, Shahrukh K. Hashmi <sup>c</sup>, Larissa Prata <sup>c</sup>, Michal M. Masternak <sup>e</sup>, Stephen B. Kritchevsky <sup>a</sup>, Nicolas Musi <sup>f,g</sup>, James L. Kirkland <sup>c</sup>

*Findings:* Fourteen patients with stable IPF were recruited. The retention rate was 100% with no DQ discontinuation; planned clinical assessments were complete in 13/14 participants. One serious adverse event was reported. Non-serious events were primarily mild-moderate, with respiratory symptoms ( $n = 16$  total events), skin irritation/bruising ( $n = 14$ ), and gastrointestinal discomfort ( $n = 12$ ) being most frequent. Physical function evaluated as 6-min walk distance, 4-m gait speed, and chair-stands time was significantly and clinically-meaningfully improved ( $p < .05$ ). Pulmonary function, clinical chemistries, frailty index (FI-LAB), and reported health were unchanged. DQ effects on circulating SASP factors were inconclusive, but correlations were observed between change in function and change in SASP-related matrix-remodeling proteins, microRNAs, and pro-inflammatory cytokines (23/48 markers  $r \geq 0.50$ ).





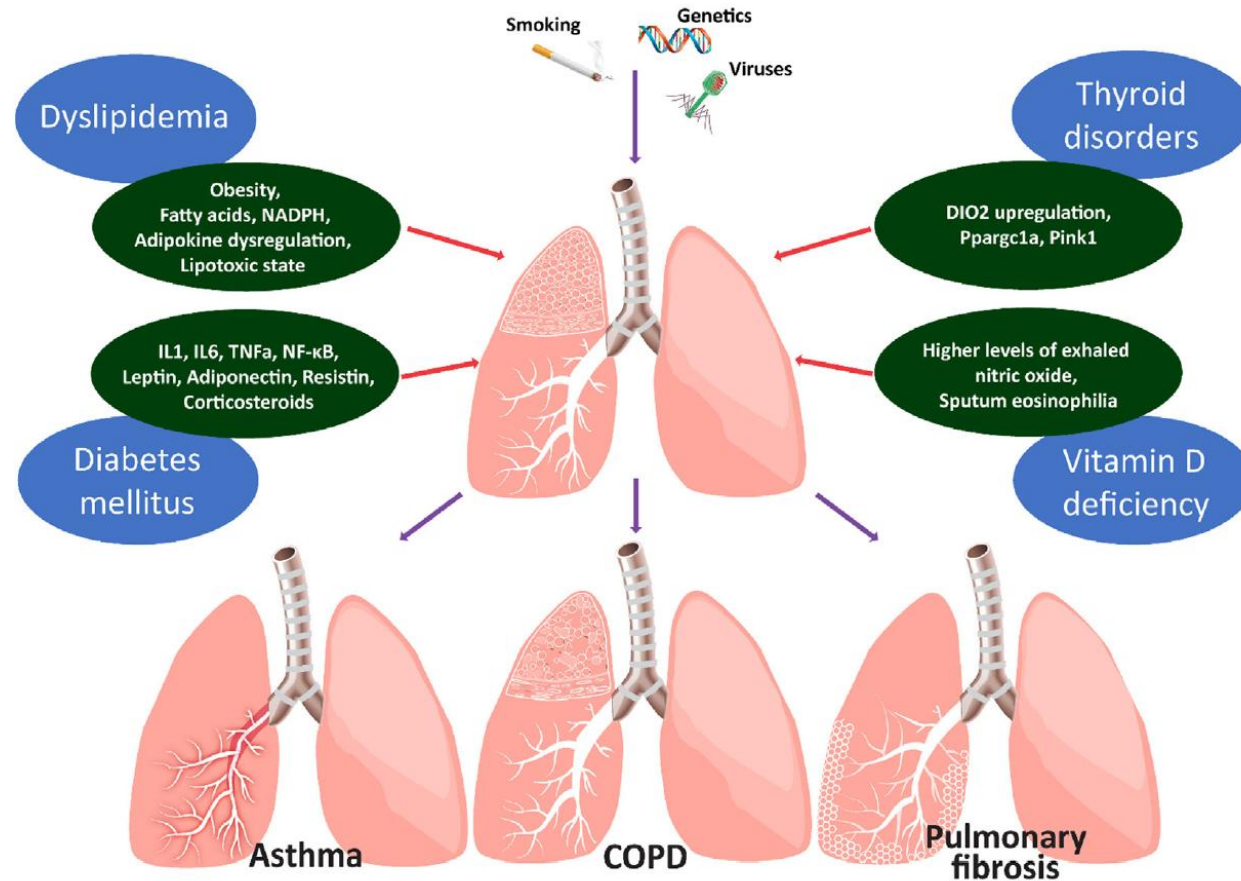
# Metabolic Disorders in Chronic Lung Diseases



*Ourania Papaioannou<sup>1</sup>, Theodoros Karampitsakos<sup>2</sup>, Ilianna Barbayianni<sup>3</sup>, Serafeim Chrysikos<sup>2</sup>, Nikos Xylourgidis<sup>3</sup>, Vasilis Tzilas<sup>1</sup>, Demosthenes Bouros<sup>1</sup>, Vasilis Aidinis<sup>4</sup> and Argyrios Tzouvelekis<sup>1,4\*</sup>*

REVIEW

published: 18 January 2018  
doi: 10.3389/fmed.2017.00246







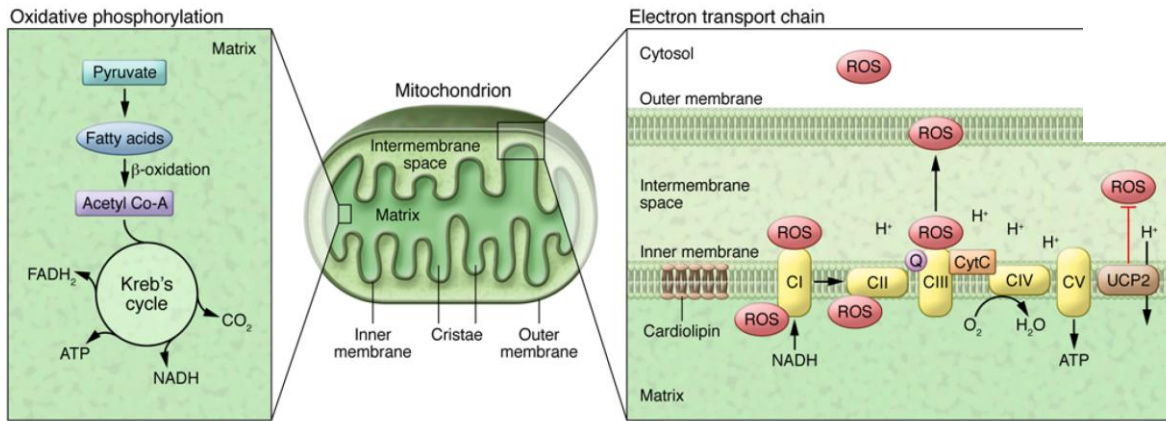
# IPF, aging and cellular bioenergetics

The Journal of Clinical Investigation

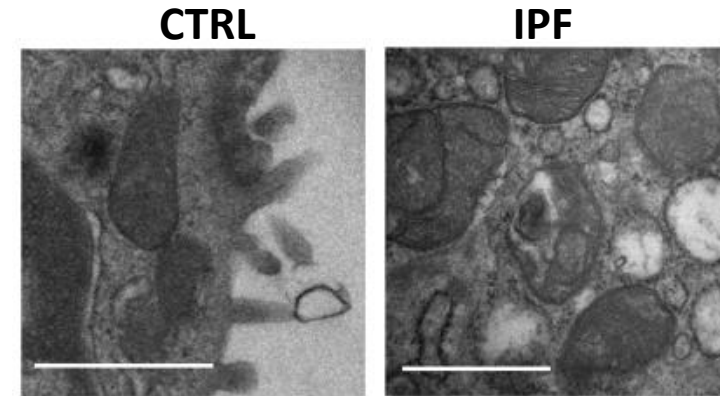
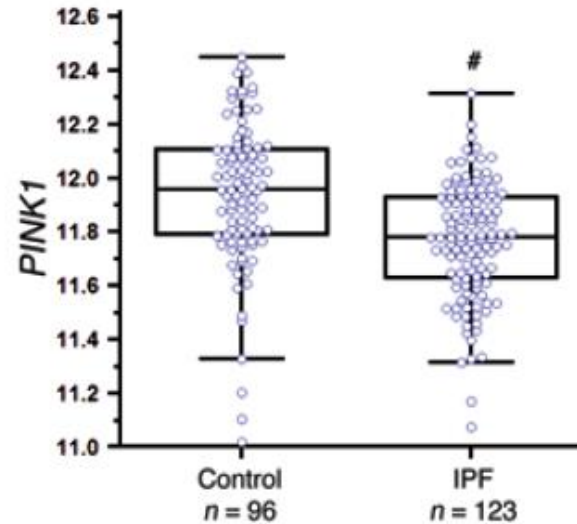
## Mitochondria in lung disease

Suzanne M. Cloonan and Augustine M.K. Choi

jci.org Volume 126 Number 3 March 2016



IPF aged lungs exhibit reduced PINK1 levels and damaged mitochondria

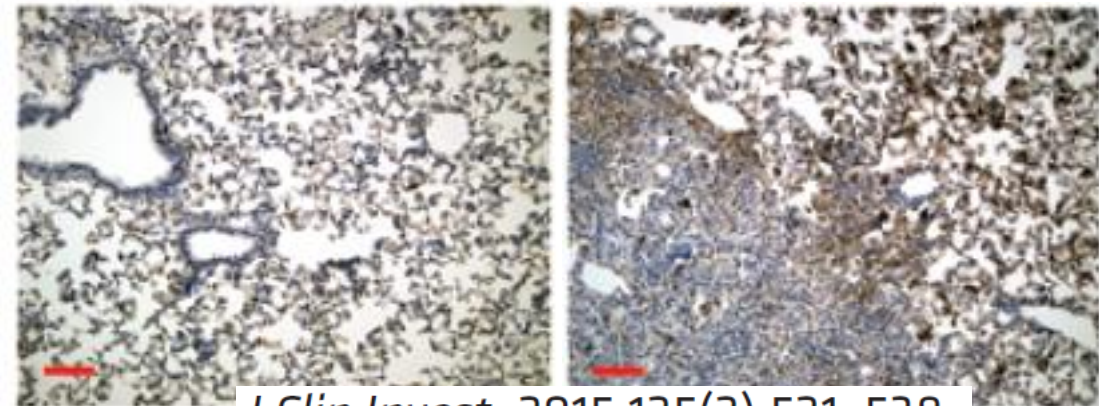


**PINK1 <sup>-/-</sup> old mice exhibit enhanced lung fibrosis**

*Defective mitophagy and AEC apoptosis*

**PINK1 <sup>+/+</sup>**

**PINK1 <sup>-/-</sup>**

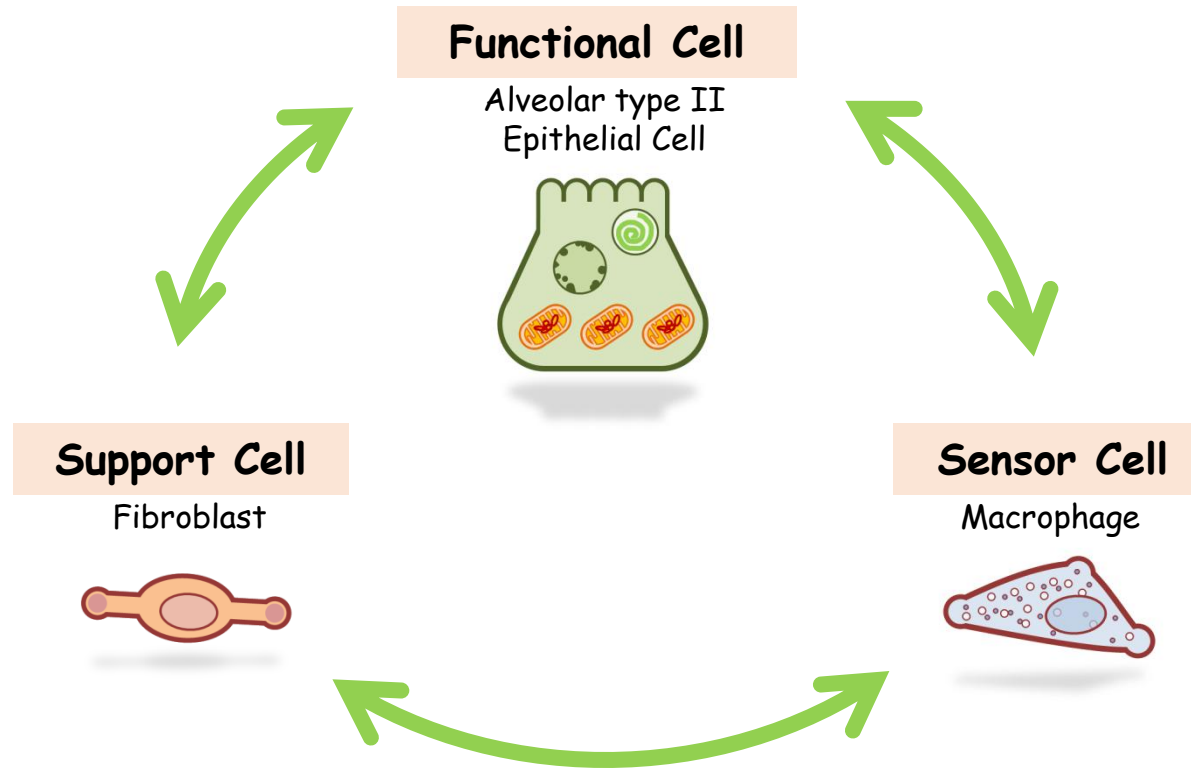


Mitochondria regulate cellular bioenergetics  
Mitochondria regulate immune responses  
Mitochondria regulate cell differentiation

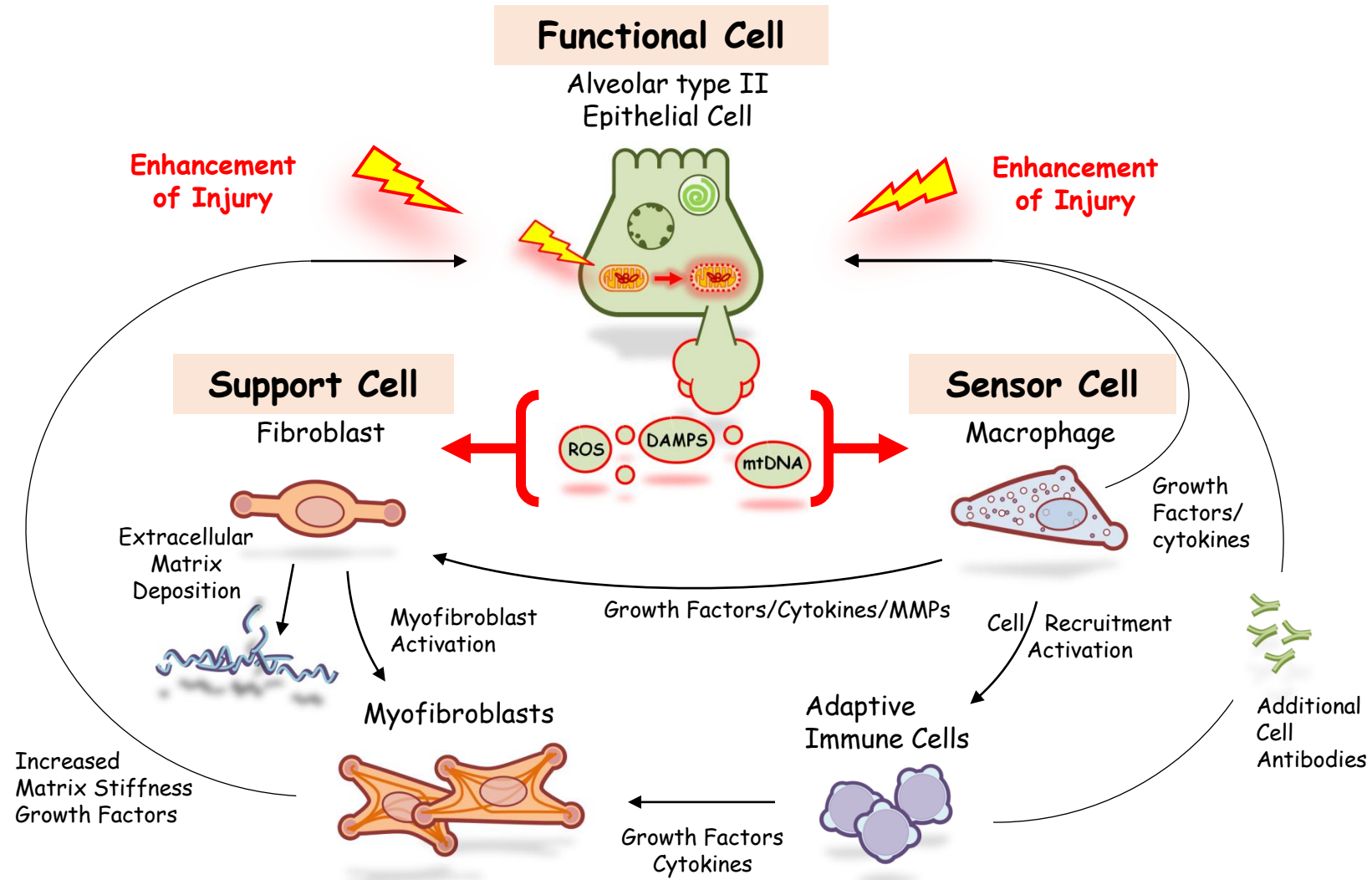
AECIIs have >50% of total lung mitochondria

*J Clin Invest.* 2015;125(2):521-538.

# The theory of functional cell protection



# AECIIs drive disease pathogenesis





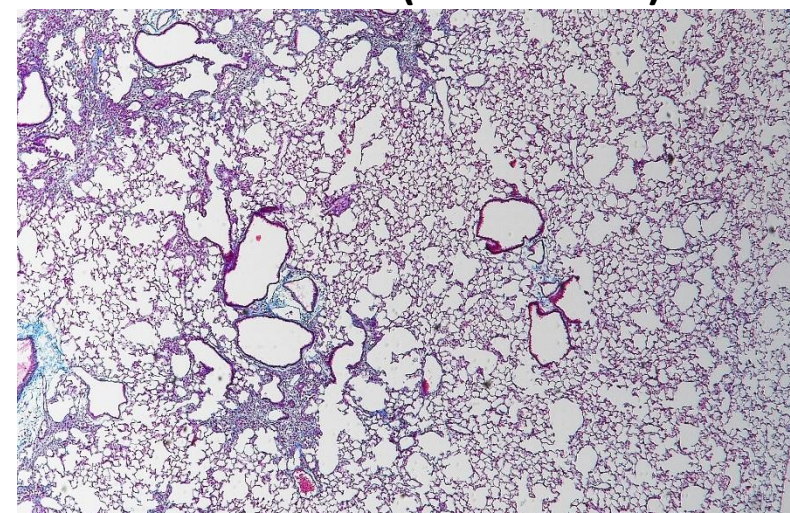
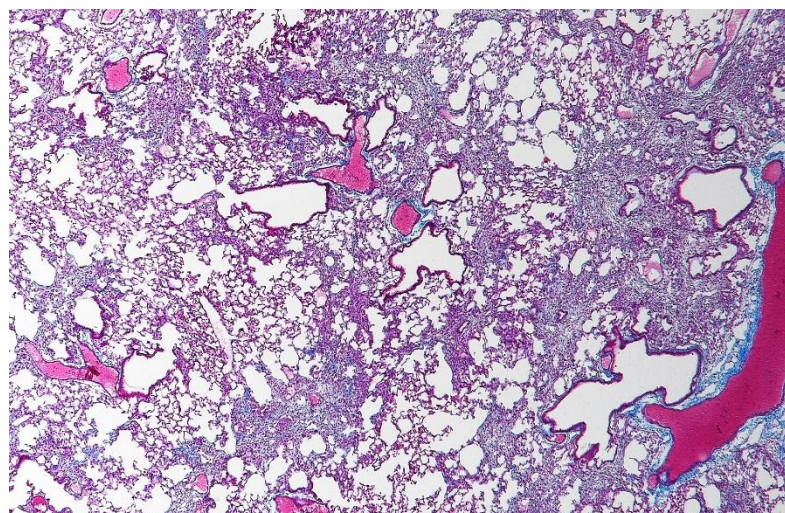
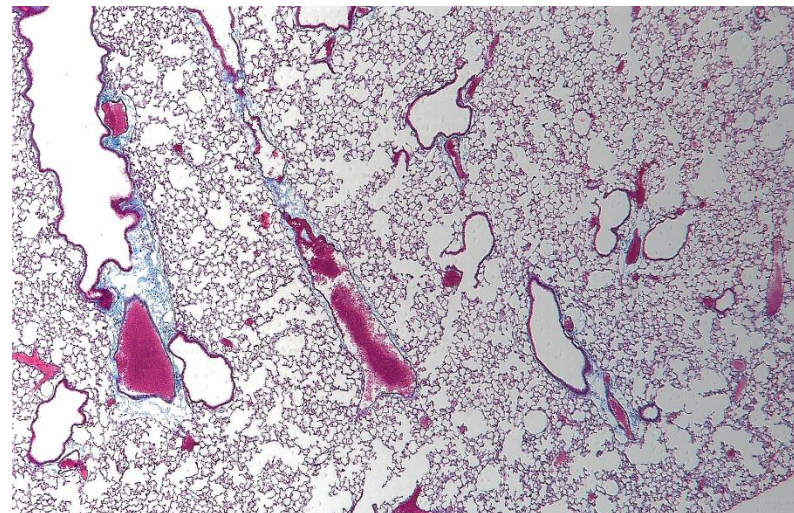
# Aerosolized T3 attenuates bleomycin-induced established lung fibrosis



**Saline**

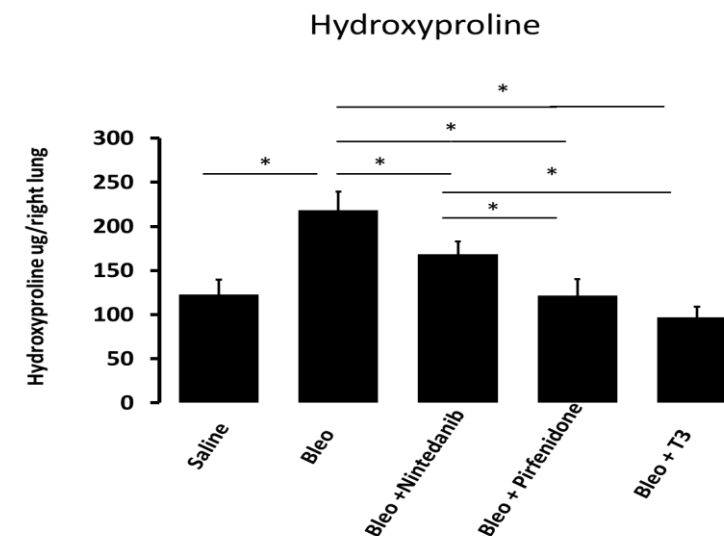
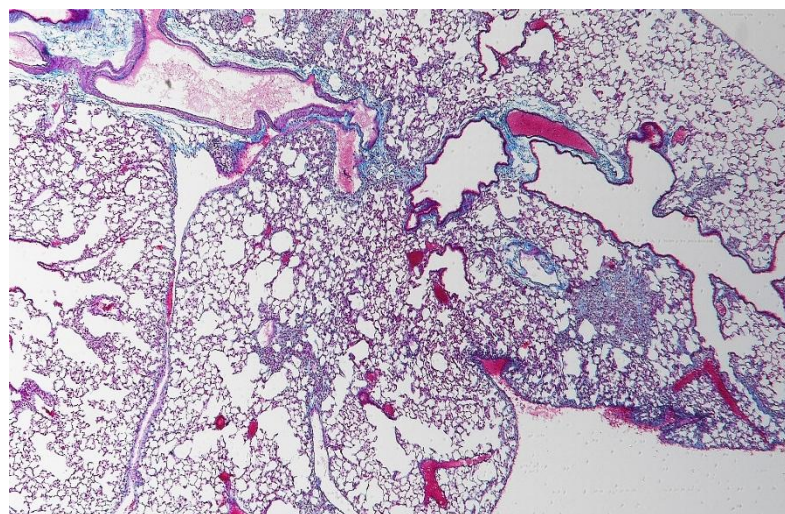
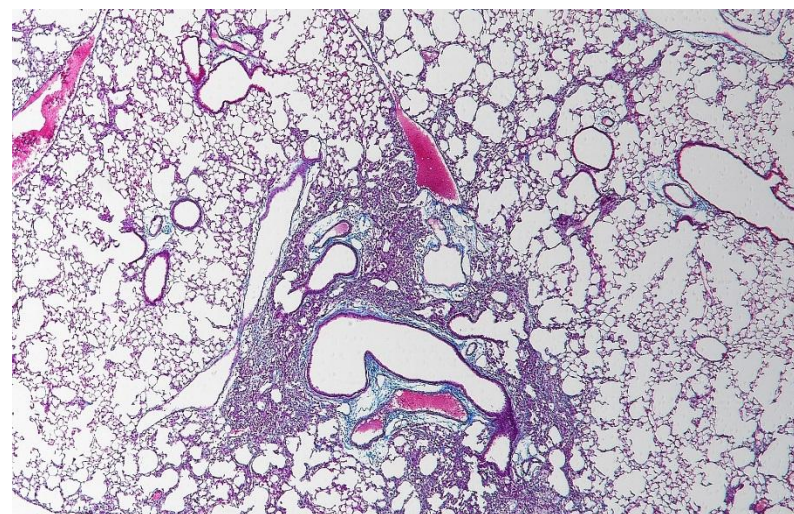
**Bleo**

**Bleo+T3 (Aerosolized)**



**Bleo+Nintedanib**

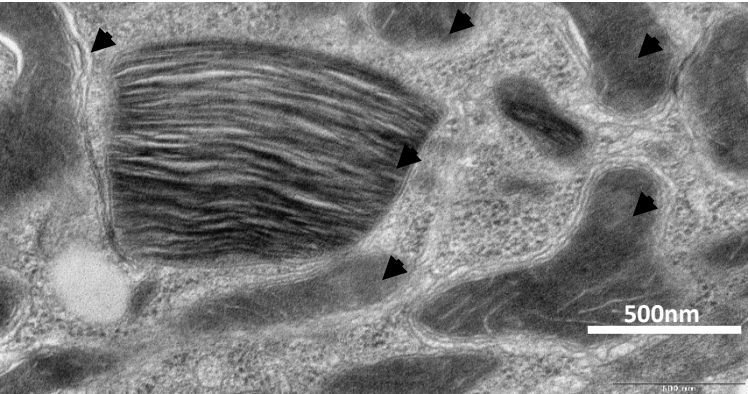
**Bleo+Pirfenidone**



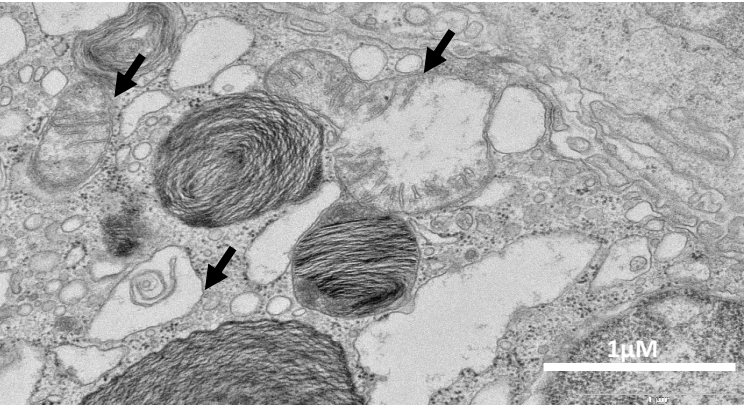


# Aerosolized T3 improves BLM-induced mitochondrial abnormalities in AECIIs

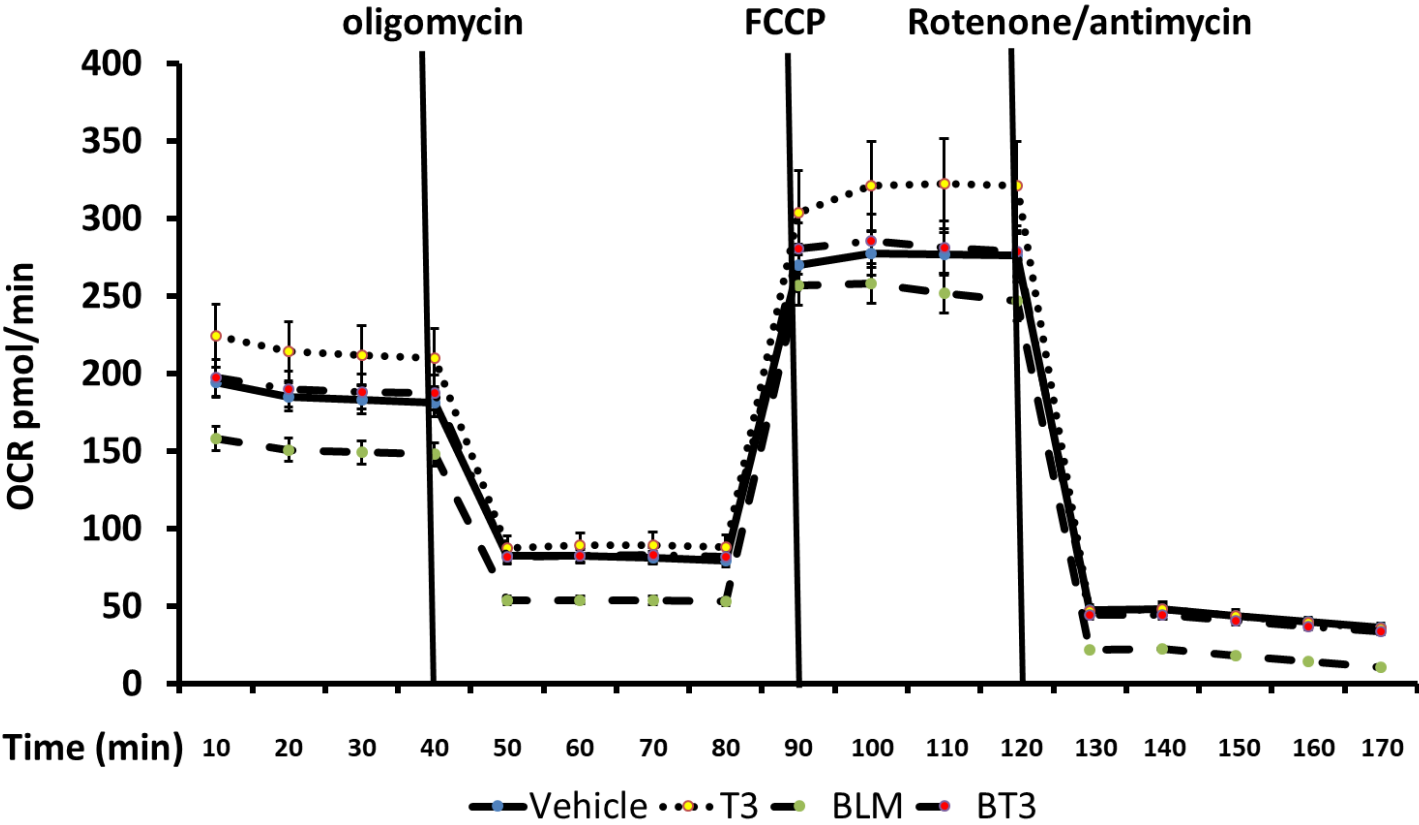
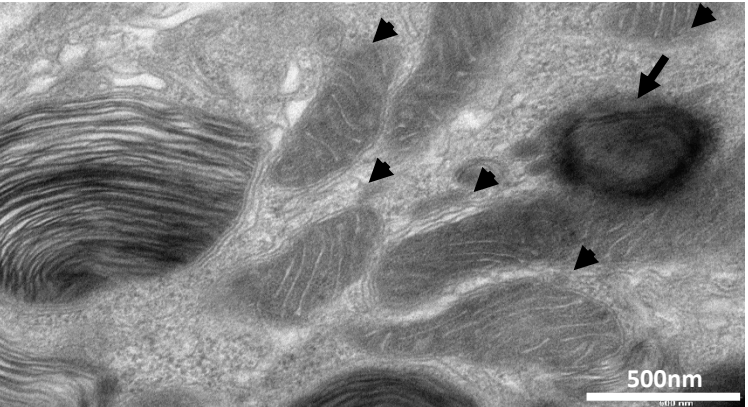
**SALINE**



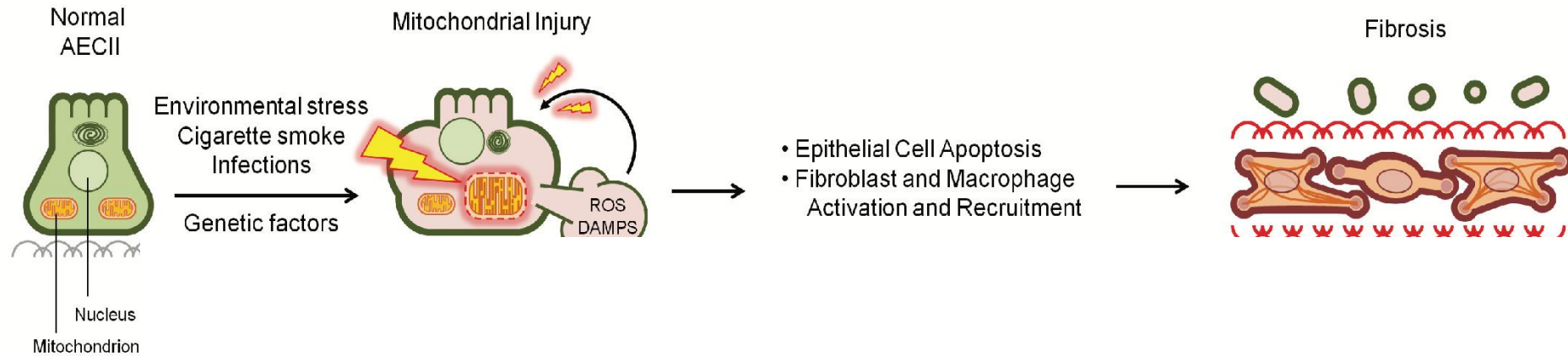
**BLEOMYCIN**



**BLEOMYCIN + T3**

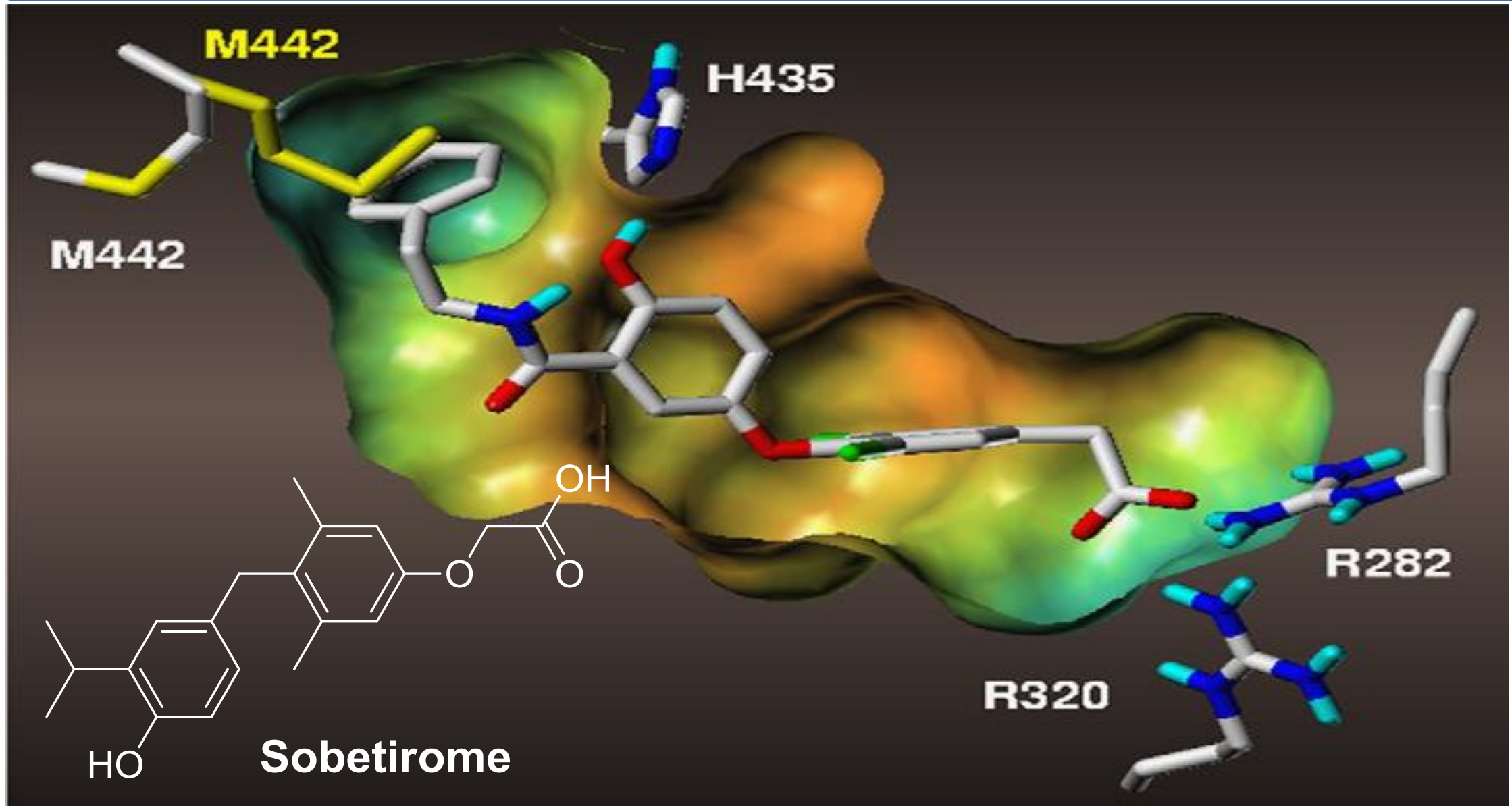


# Thyroid Hormone agonists Reverse Pulmonary Fibrosis by Repairing Epithelial Cells

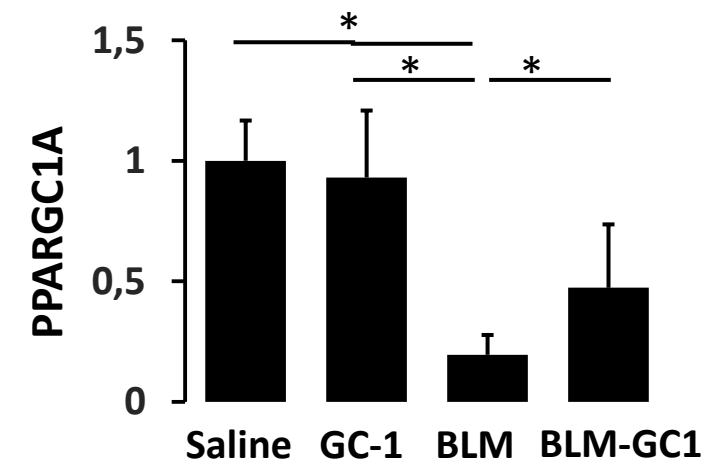
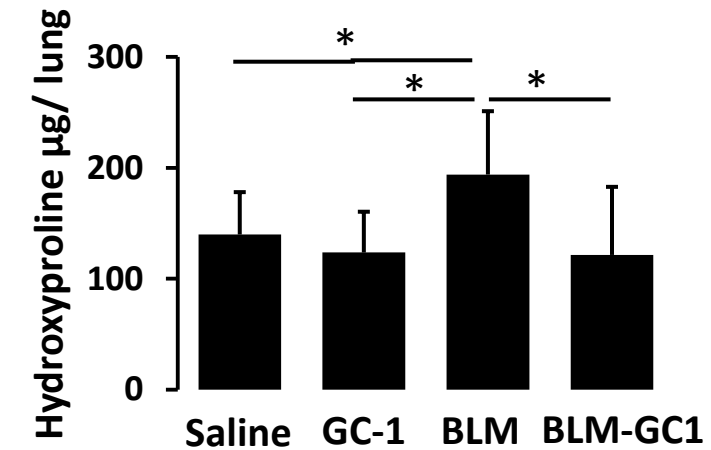
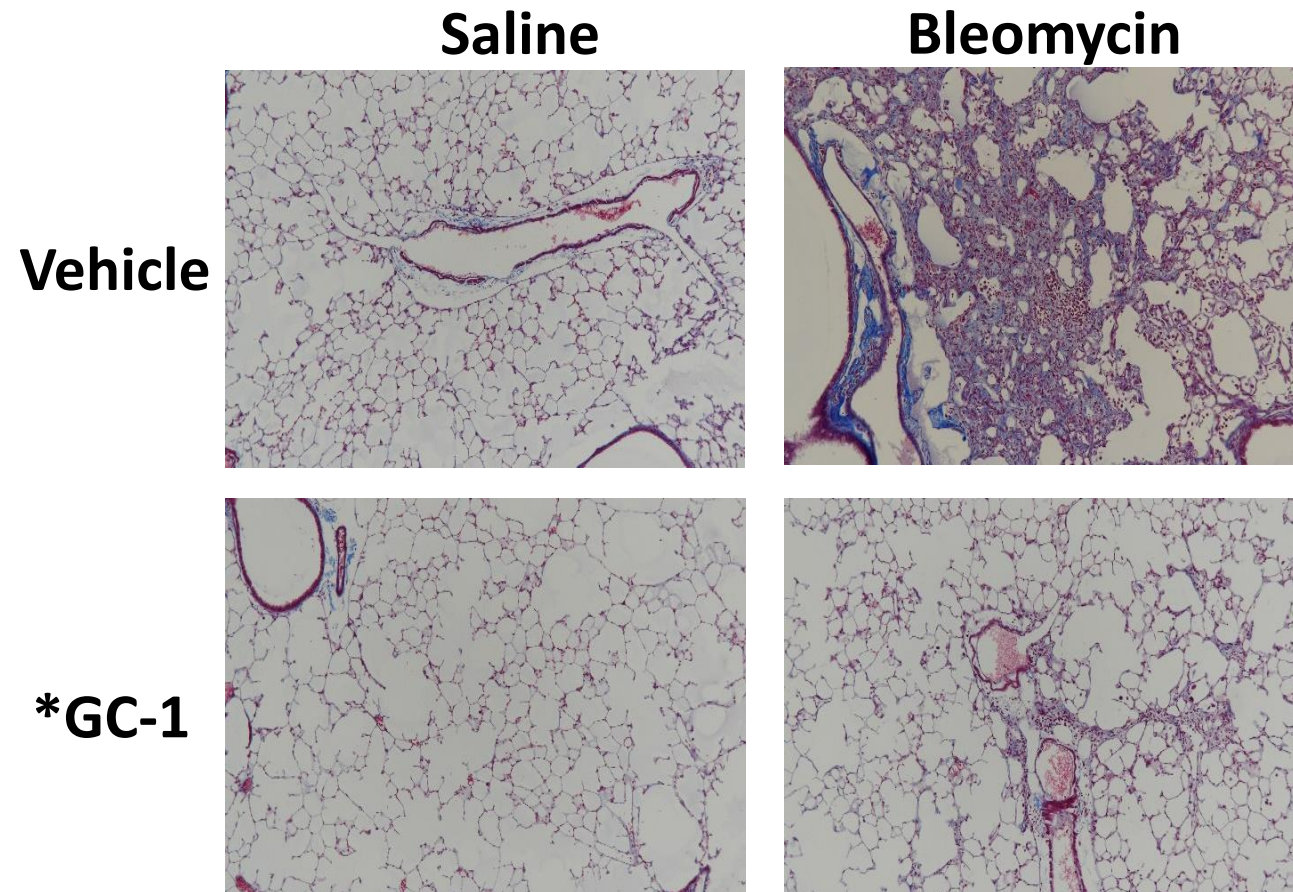




# Thyroid Hormone receptor –TR $\beta$ –unique structural properties



# Sobetirome – GC1-attenuates BLM-induced lung fibrosis



\*GC1-40 $\mu\text{g/kg}$  was administered orally at days 10,12,14,16,18. Mice were sacrificed at day 21 post bleomycin



# ORIGINAL ARTICLE

## Extracellular Mitochondrial DNA Is Generated by Fibroblasts and Predicts Death in Idiopathic Pulmonary Fibrosis

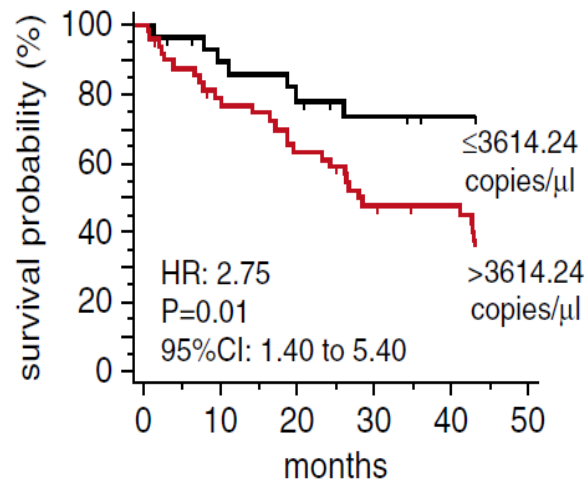
Changwan Ryu<sup>1\*</sup>, Huanxing Sun<sup>1\*</sup>, Mridu Gulati<sup>1\*</sup>, Jose D. Herazo-Maya<sup>1</sup>, Yonglin Chen<sup>2</sup>, Awo Osafo-Addo<sup>1</sup>, Caitlin Brandsdorfer<sup>1</sup>, Julia Winkler<sup>1</sup>, Christina Blaul<sup>1</sup>, Jaden Faunce<sup>1</sup>, Hongyi Pan<sup>1</sup>, Tony Woolard<sup>1</sup>, Argyrios Tzouvelekis<sup>1</sup>, Danielle E. Antin-Ozerkis<sup>1</sup>, Jonathan T. Puchalski<sup>1</sup>, Martin Slade<sup>1</sup>, Anjelica L. Gonzalez<sup>2</sup>, Daniel F. Bogenhagen<sup>3</sup>, Varvara Kirillov<sup>4</sup>, Carol Feghali-Bostwick<sup>5</sup>, Kevin Gibson<sup>6</sup>, Kathleen Lindell<sup>6</sup>, Raimund I. Herzog<sup>7</sup>, Charles S. Dela Cruz<sup>1</sup>, Wajahat Mehal<sup>8</sup>, Naftali Kaminski<sup>1</sup>, Erica L. Herzog<sup>1†</sup>, and Glenda Trujillo<sup>4†</sup>

Am J Respir Crit Care Med Vol 196, Iss 12, pp 1571–1581, Dec 15, 2017

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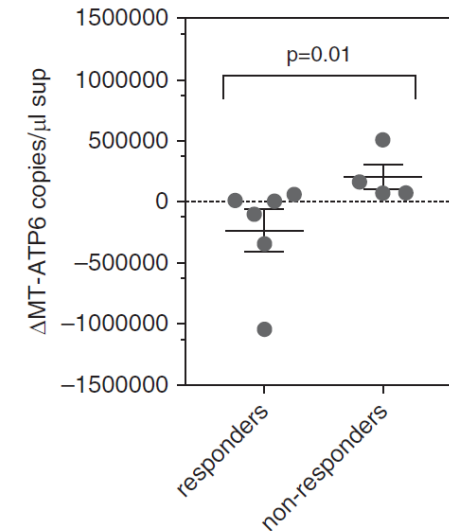
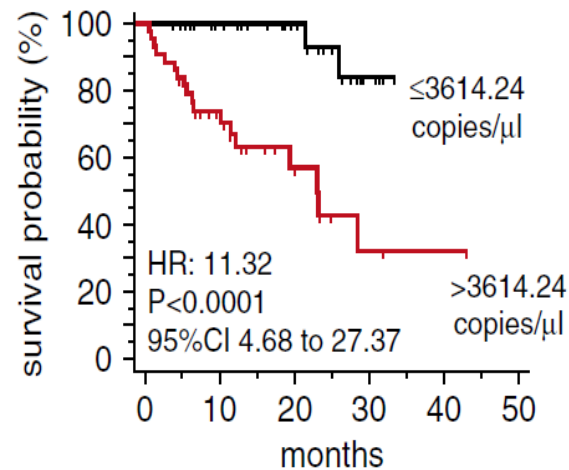
**Increased mtDNA correlates with poor survival**

**A**



**mtDNA correlates with pirfenidone response**

**B**

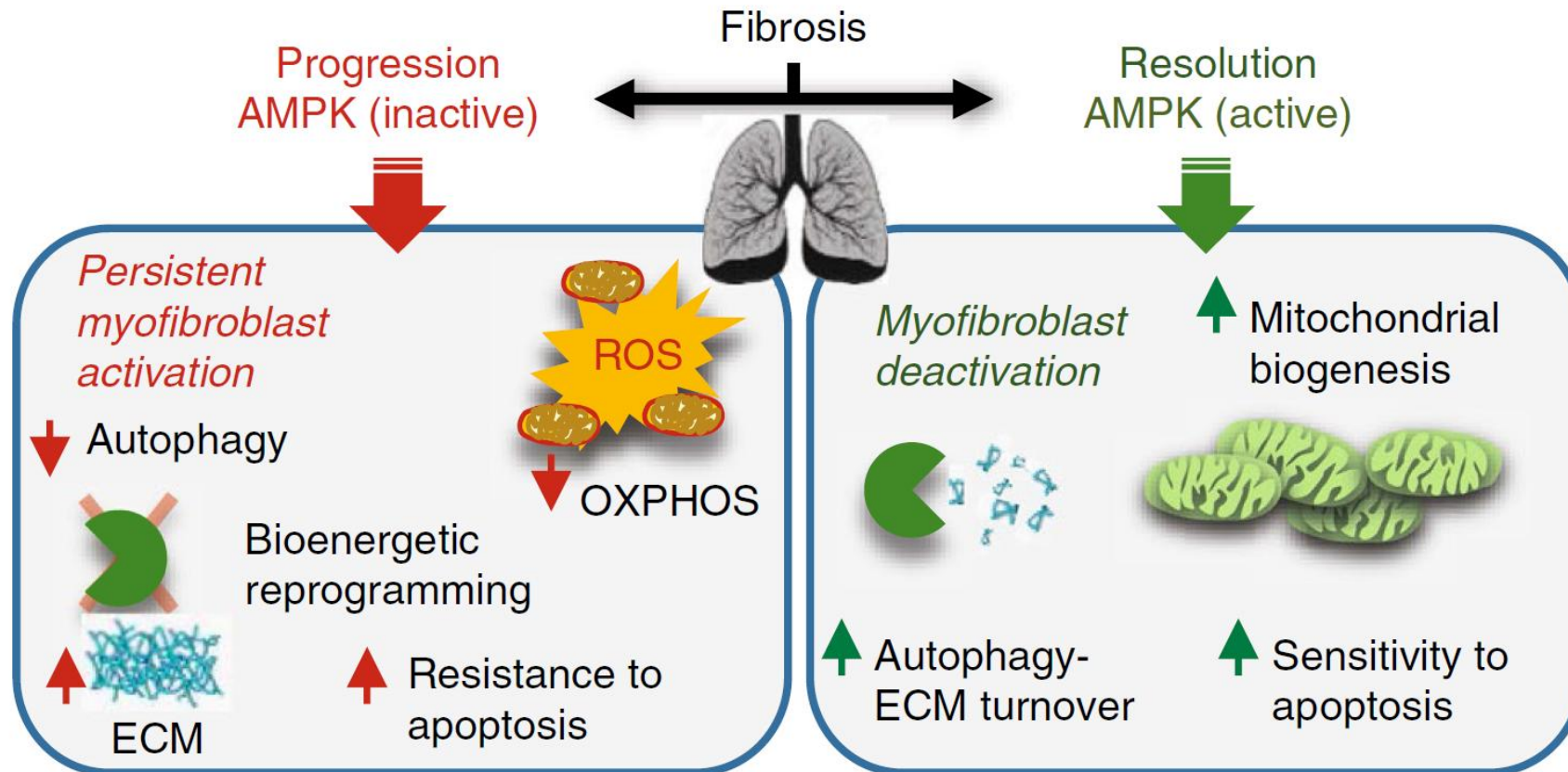






# Metformin reverses established lung fibrosis in a bleomycin model

Received: 9 August 2016; Accepted: 14 May 2018;  
Published online: 02 July 2018





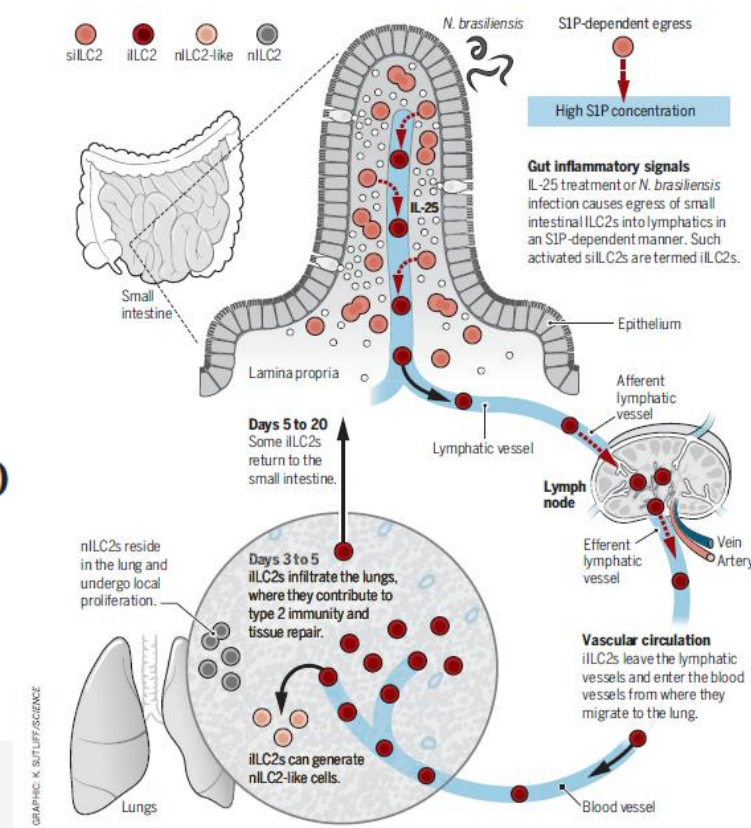
## IMMUNOLOGY

# Lung inflammation originating in the gut

Parasite infection in the intestine can lead to inflammatory immune cells in the lung

Huang *et al.*, *Science* **359**, 114–119 (2018) 5 January 2018

## ORIGINAL ARTICLE



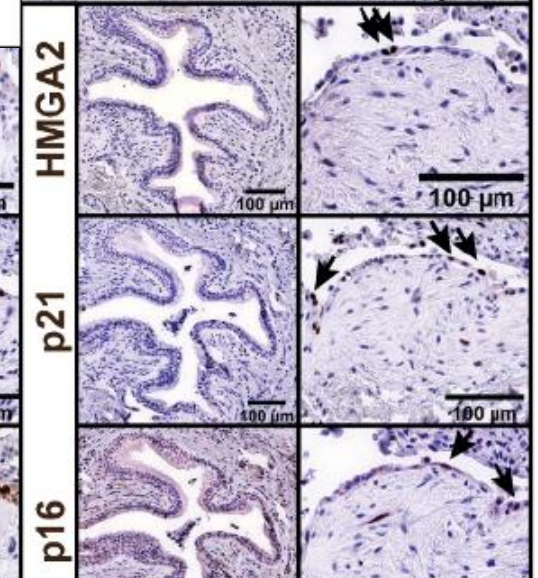
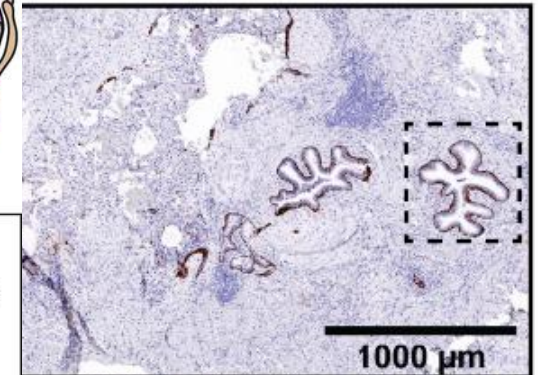
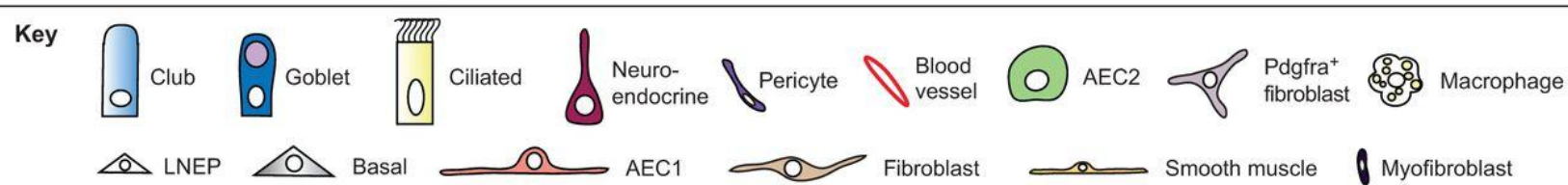
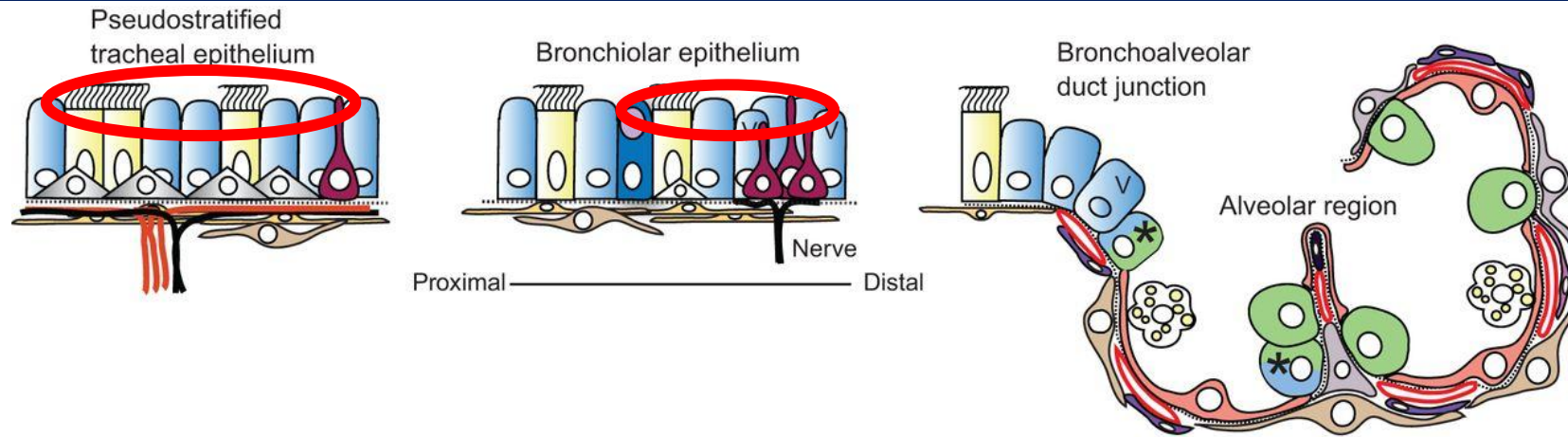
## Host–Microbial Interactions in Idiopathic Pulmonary Fibrosis

Philip L. Molyneaux<sup>1,2</sup>, Saffron A. G. Willis-Owen<sup>1</sup>, Michael J. Cox<sup>1</sup>, Phillip James<sup>1</sup>, Steven Cowman<sup>1,2</sup>, Michael Loebinger<sup>1,2</sup>, Andrew Blanchard<sup>3</sup>, Lindsay M. Edwards<sup>3</sup>, Carmel Stock<sup>1,2</sup>, Cécile Daccord<sup>1,2</sup>, Elisabetta A. Renzoni<sup>1,2</sup>, Athol U. Wells<sup>2</sup>, Miriam F. Moffatt<sup>1\*</sup>, William O. C. Cookson<sup>1,2\*</sup>, and Toby M. Maher<sup>1,2\*</sup>

<sup>1</sup>National Heart and Lung Institute, Imperial College London, London, United Kingdom; <sup>2</sup>Royal Brompton Hospital, London, United Kingdom; and <sup>3</sup>Fibrosis Discovery Performance Unit, GlaxoSmithKline R&D, GlaxoSmithKline Medicines Research Centre, Stevenage, United Kingdom



# Aberrant migration of basal stem cells to alveolar walls with potential pro-fibrotic role







# Conclusions



## Clearance of senescent cells

- Apoptosis inhibitor (navitoclax)
- Tyrosine kinase inhibitor (dasatinib)
- PI3K inhibitor (quercetin)
- p53 inhibitors
- Rupatadine
- NOX4 inhibitors

## Mitochondria-targeted therapies

- Antioxidant scavengers
- SIRT3 agonist
- mtDNA repair enzymes
- Activators of mitophagy
- CD38 inhibitors

## Activation of autophagy

- PI3K and mTOR inhibitors

## Activation of proteostasis

- Pharmacological chaperone
- Inhibitors of  $\text{Ca}^{2+}$  mobilization

## SASP inhibition

- mTOR inhibitor (rapamycin)
- JAK or STAT inhibitors
- NF- $\kappa$ B inhibitors

## Stem cell therapies

- Heterologous young donors

## Targeting the epigenome

- 5'-azacytidine
- Antagomir miR-21
- HDAC inhibitor (vorinostat)

## Telomerase reactivation?

