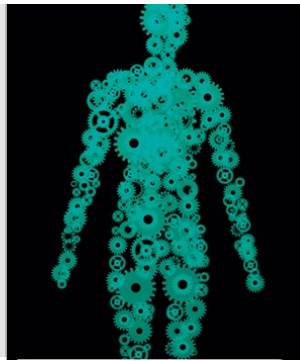


3rd International Danube Symposium

Enabling Whole Person Research: The
Transformative Impact of Total Body PET,
Complexity Science and Network Medicine



21st – 22nd September 2023

Park Hyatt Vienna

Am Hof 2, 1010 Vienna

The signaling function of bile acids

Michael Trauner

Div. of Gastroenterology & Hepatology

Dept. of Internal Medicine III



MEDICAL UNIVERSITY
OF VIENNA

Disclosures

I herewith declare the following paid or unpaid consultancies, business interests or sources of honoraria payments, and anything else which could potentially be viewed as a conflict of interest:

Advisor

Abbvie, Albireo, BiomX, Boehringer Ingelheim, Falk, Gilead, Genfit, Hightide, Intercept, Janssen, MSD, Novartis, Phenex, Pliant, Regulus, Siemens, Shire

Grants / research support

Albireo, Alynlam, Cymabay, Falk Pharma, Gilead, Intercept, MSD, Takeda, UltraGenyx

Speakers bureau

BMS, Falk Foundation, Gilead, Intercept, Madrigal, MSD, Roche

Travel grants

AbbVie, Falk Foundation, Gilead, Intercept, Janssen, Roche

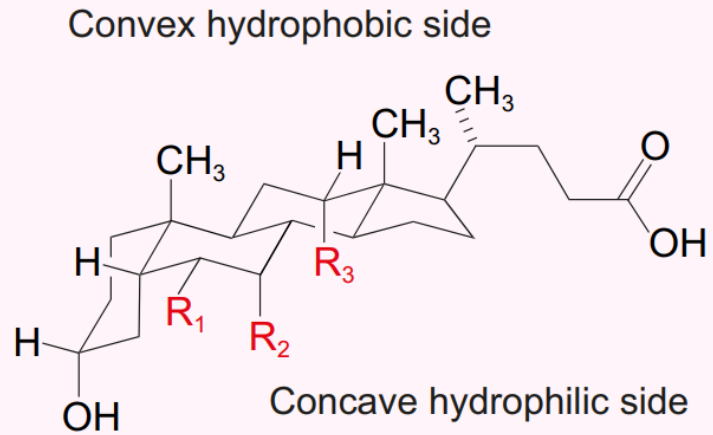
Property rights

The Medical Universities of Graz and Vienna have filed patents on medical use of *norUDCA* and I am listed as co-inventor

With the exception of UDCA, OCA (PBC), maralixibat (ALGS) and odevixibat (PFIC) all discussed therapeutic approaches are still investigational and not yet approved

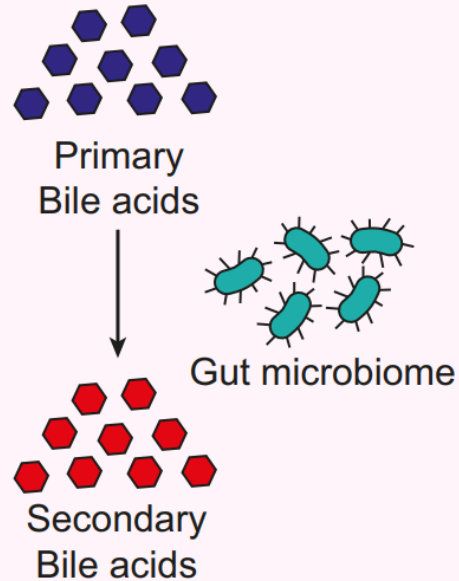
Triple action of bile acids

PHYSICOCHEMICAL PROPERTIES



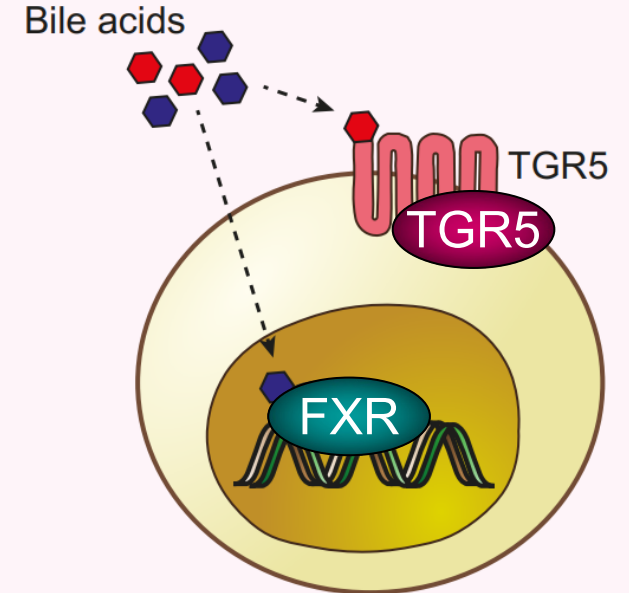
Intestinal
lipid absorption

SUBSTRATES



Shaping of
microbiome

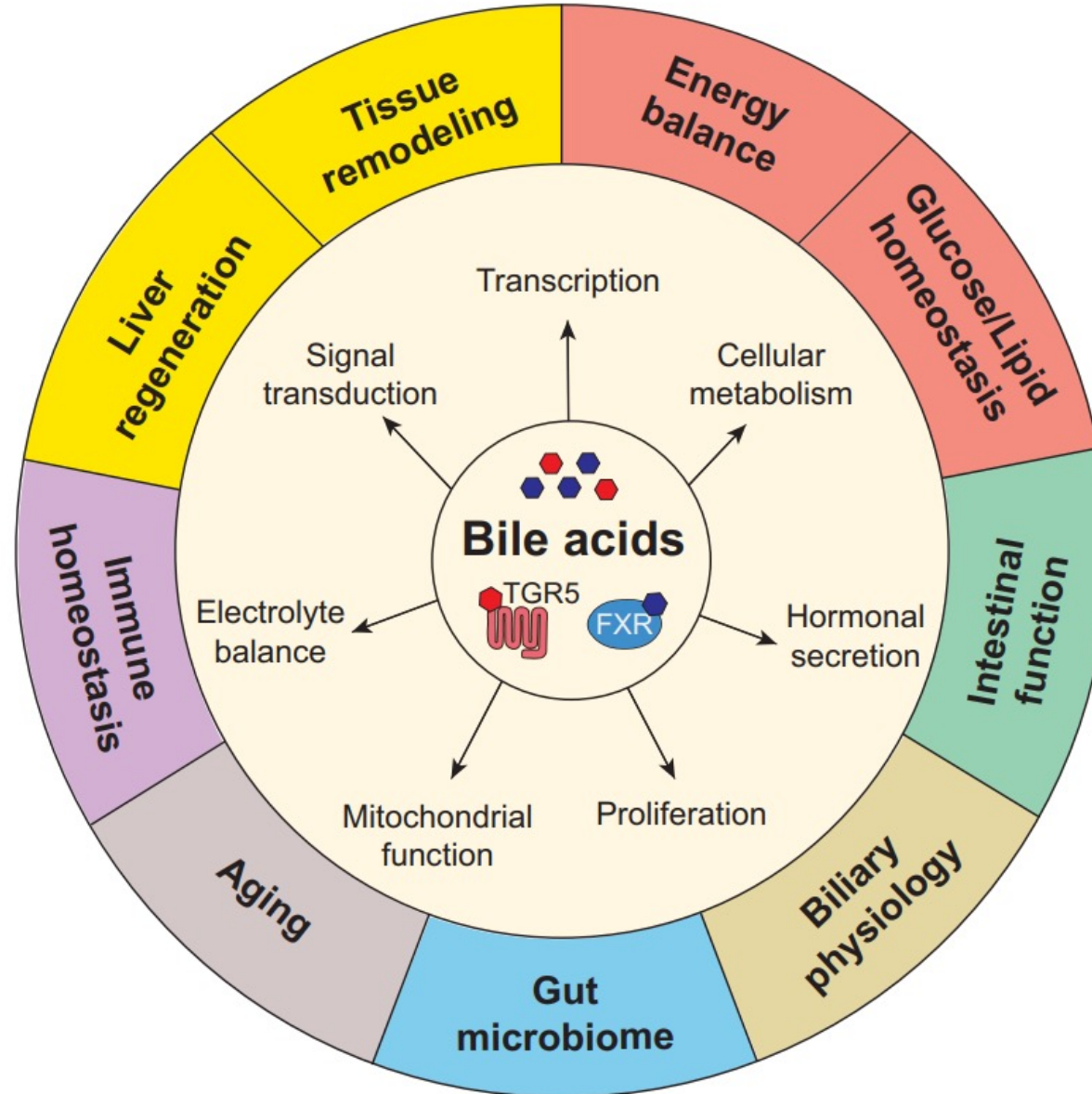
SIGNALING FACTORS



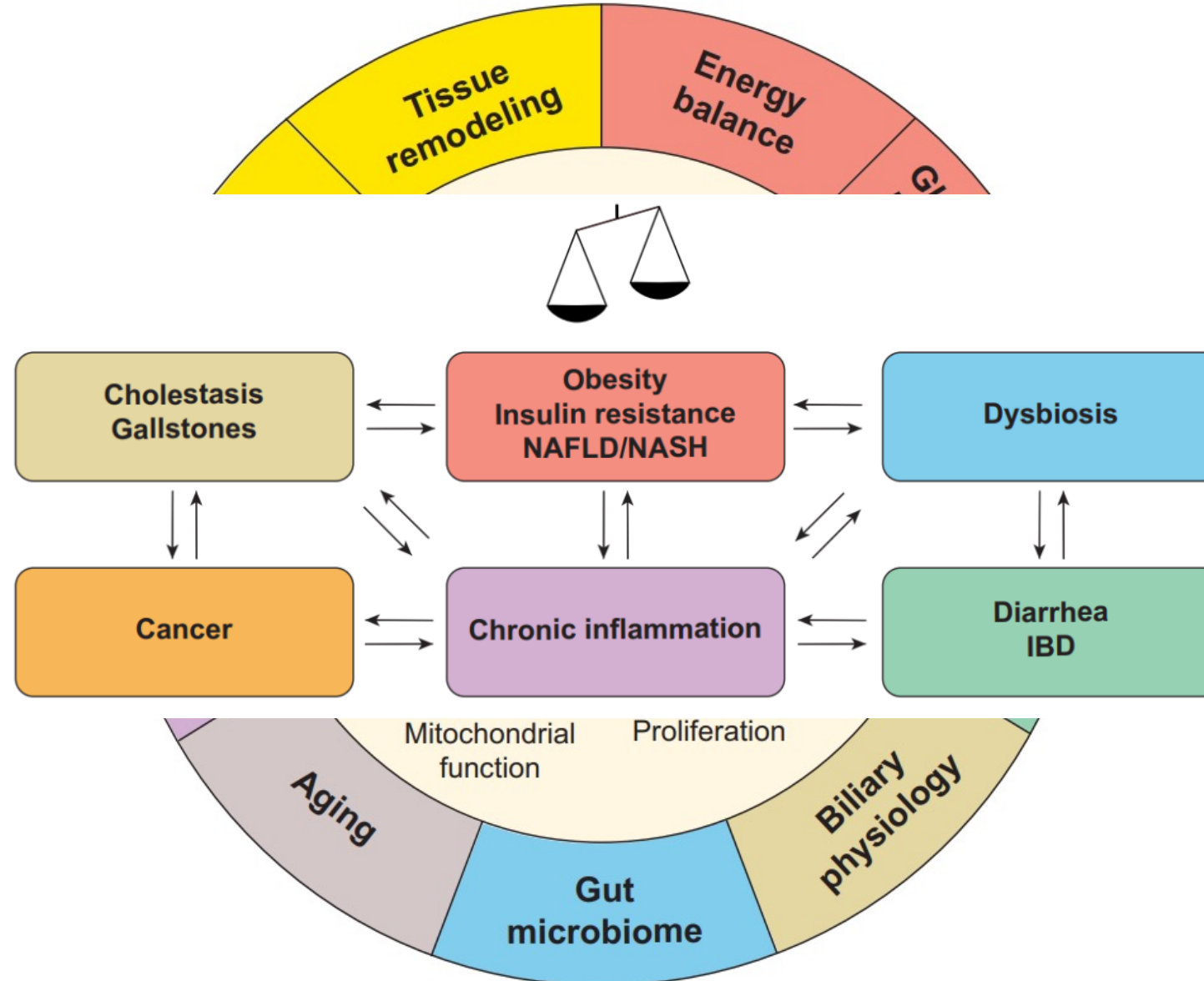
Regulation of
cellular processes



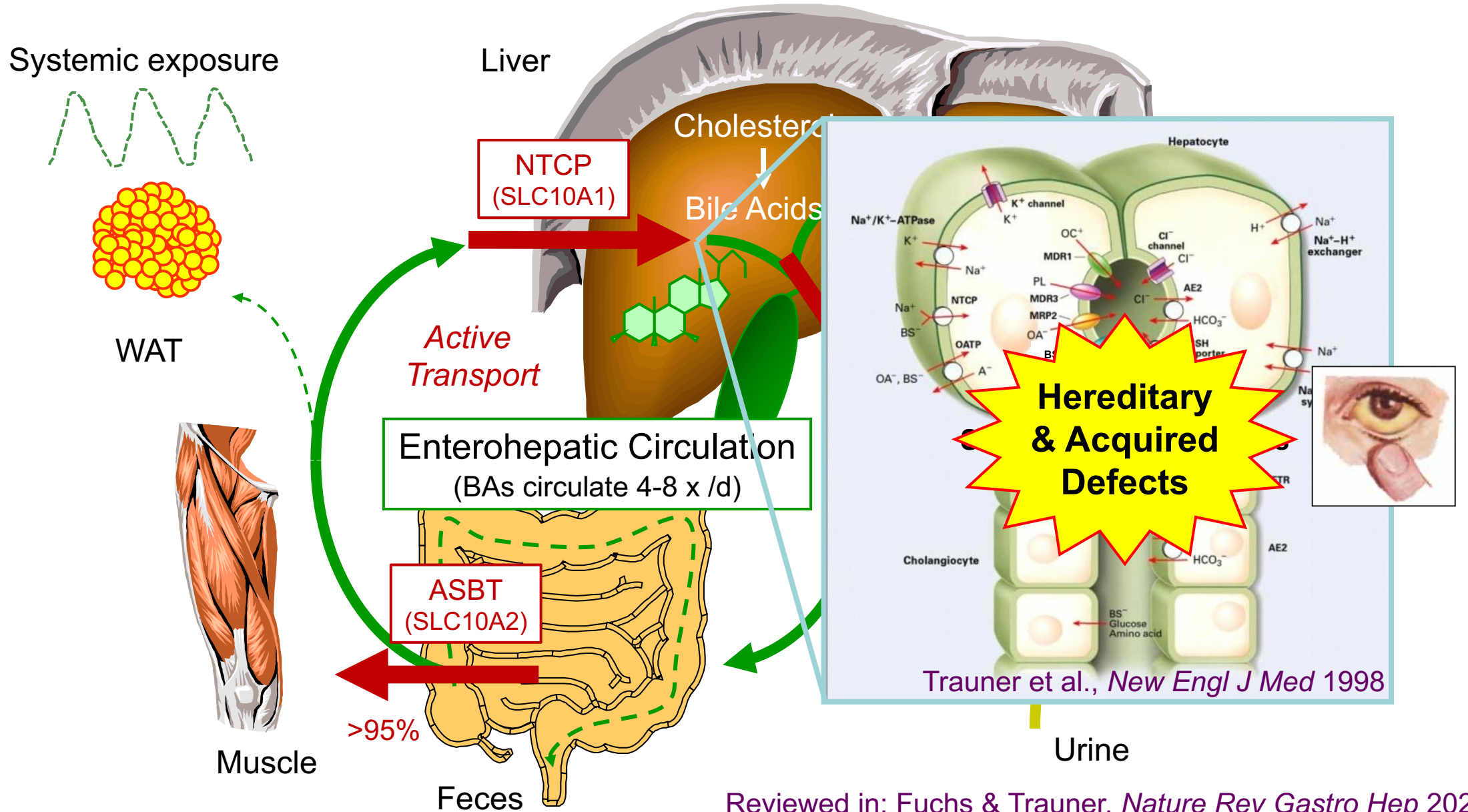
Molecular physiology of BA signaling in health & disease



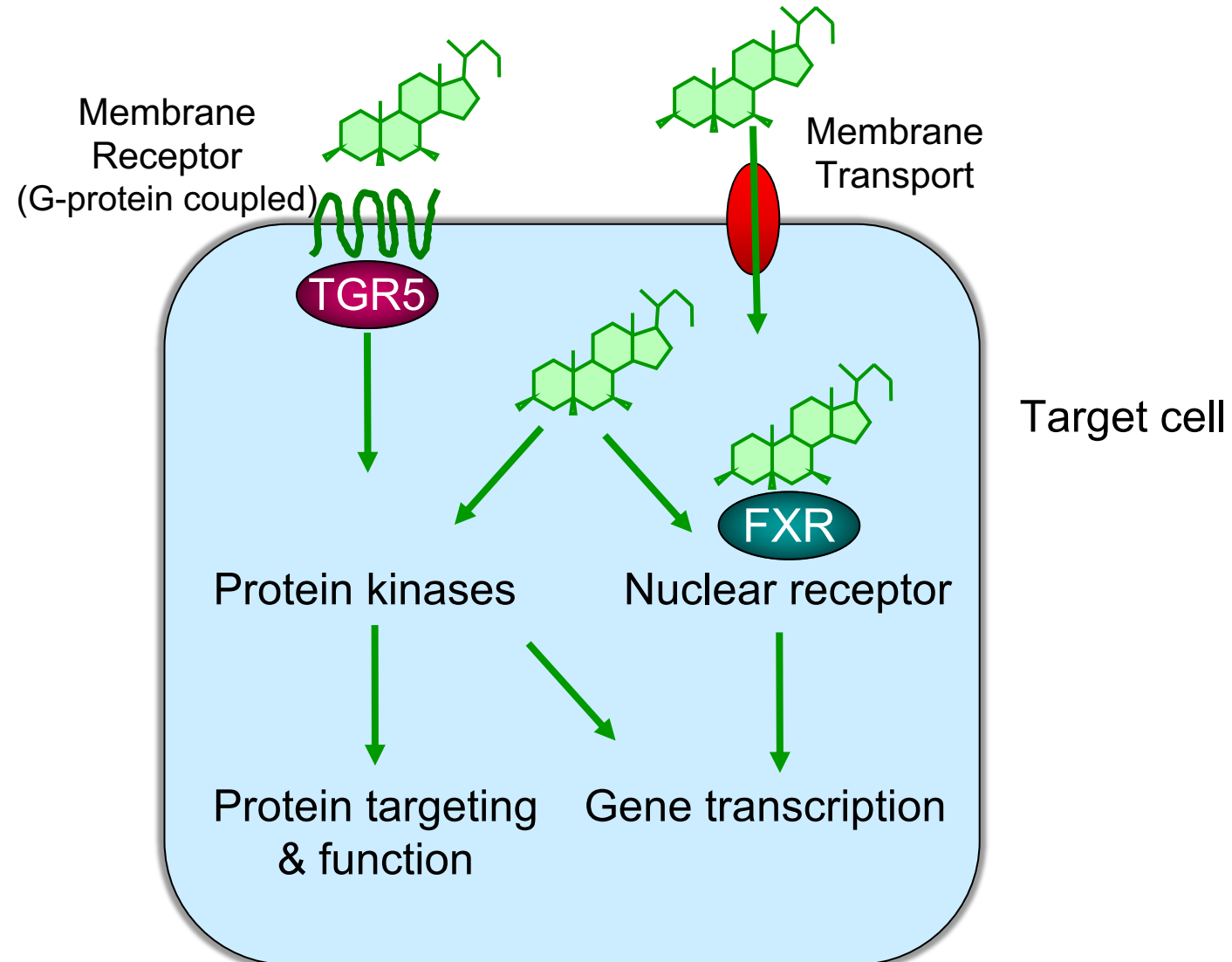
Molecular physiology of BA signaling in health & disease



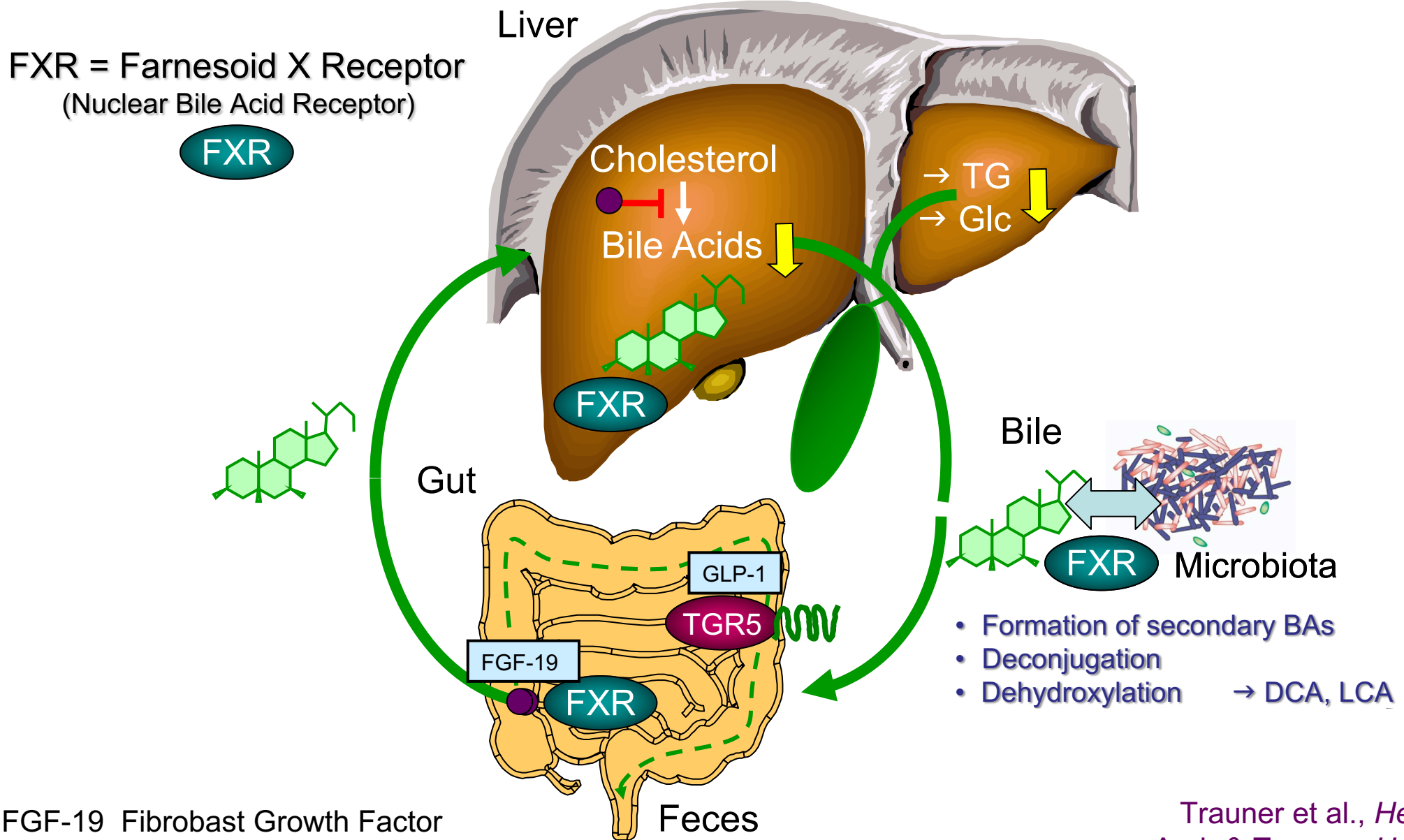
Bile formation as central liver function



Bile acids signal via dedicated receptors



Bile acids as enterohepatic hormones



FGF-19 Fibroblast Growth Factor
GLP-1 Glucagon-like Peptide-1

Trauner et al., *Hepatology* 2017
Arab & Trauner, *Hepatology* 2017



Colonic formation of unconventional 2° BAs by microbiota induces gut ROR γ ⁺ Tregs \rightarrow \downarrow inflammation

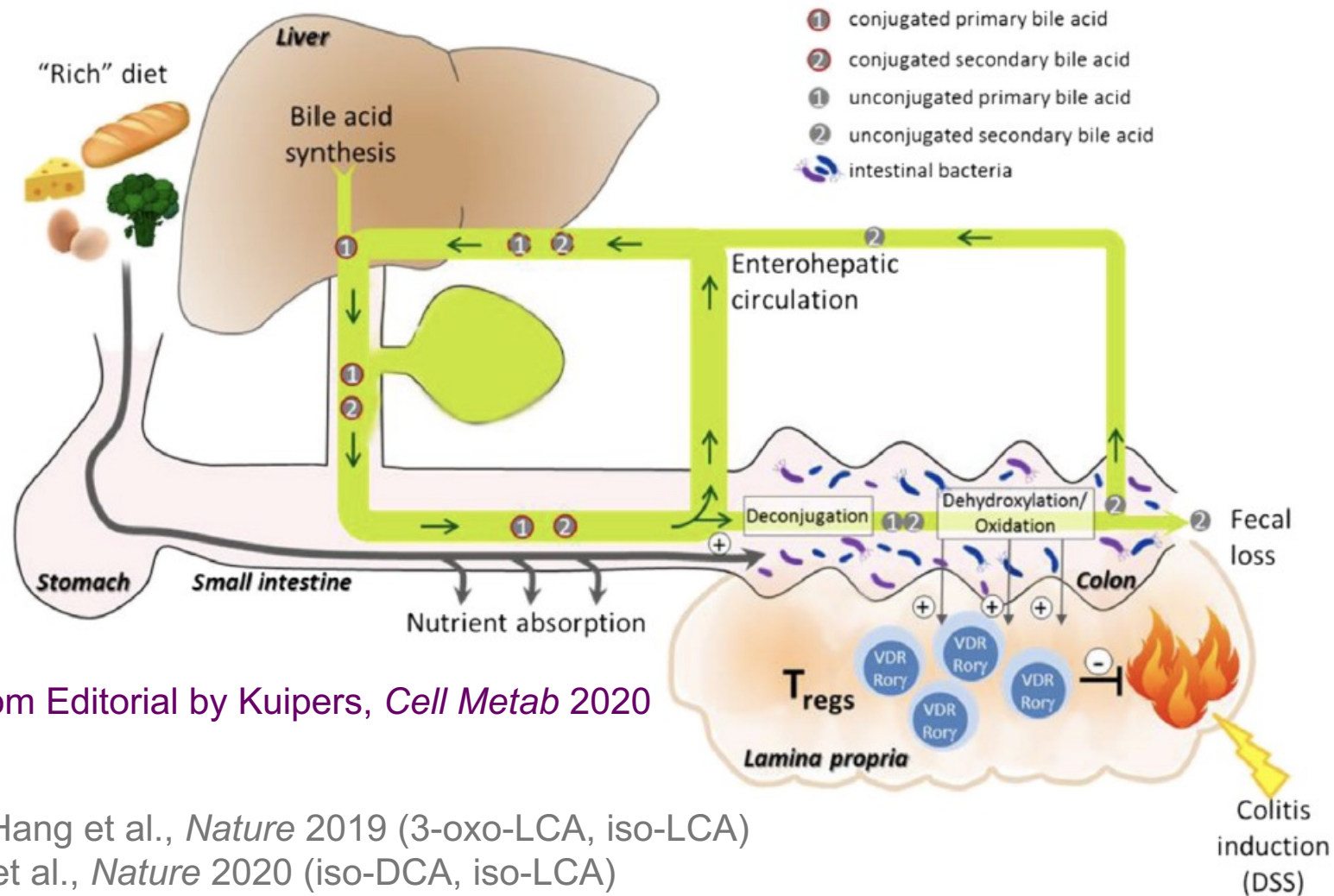
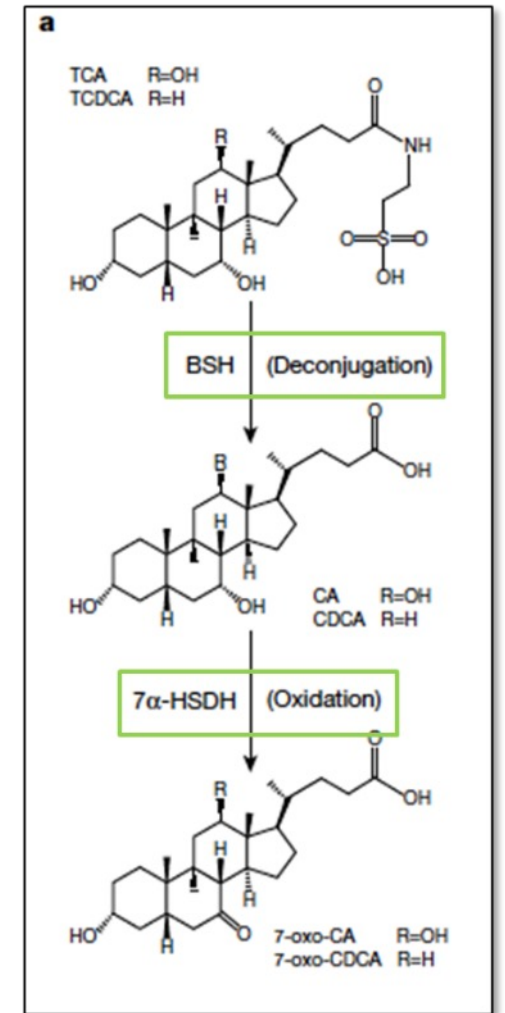


Fig. from Editorial by Kuipers, *Cell Metab* 2020

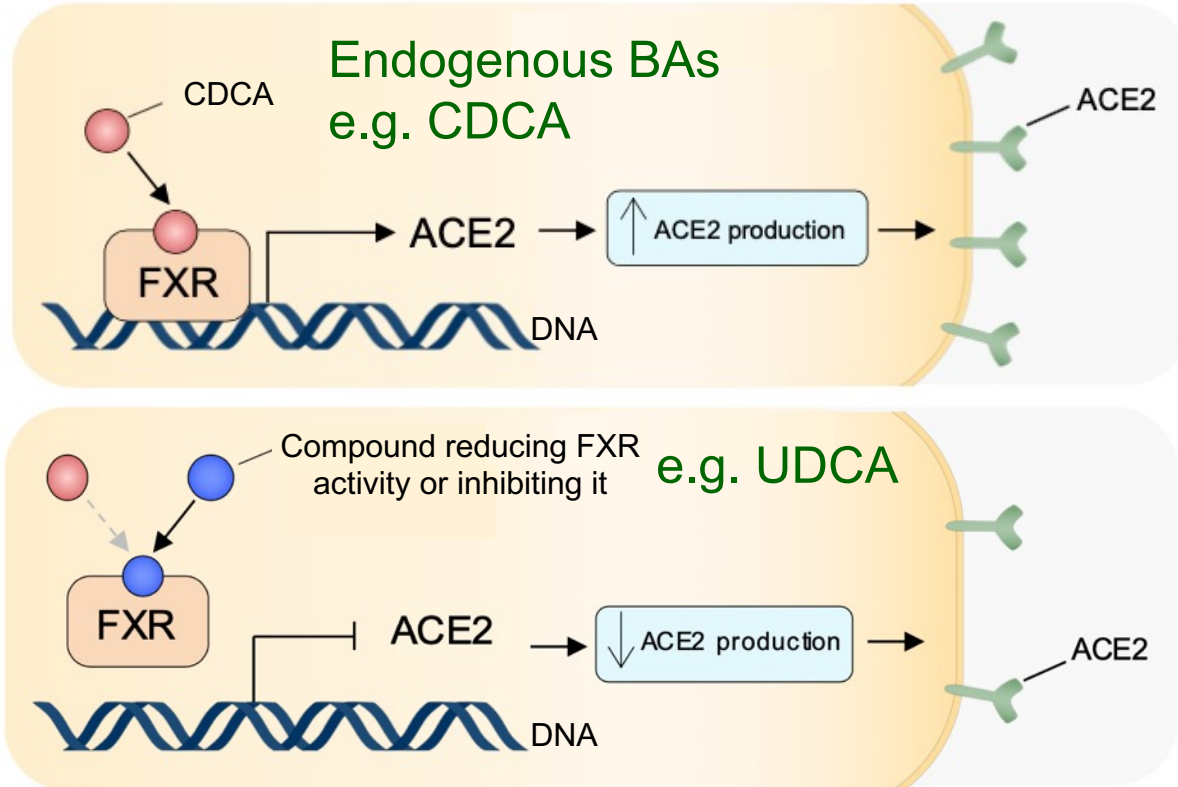
Also see: Hang et al., *Nature* 2019 (3-oxo-LCA, iso-LCA)
 Campbell et al., *Nature* 2020 (iso-DCA, iso-LCA)
 Paik et al., *Nature* 2022 (3-oxoLCA & isoLCA: \downarrow IBD)



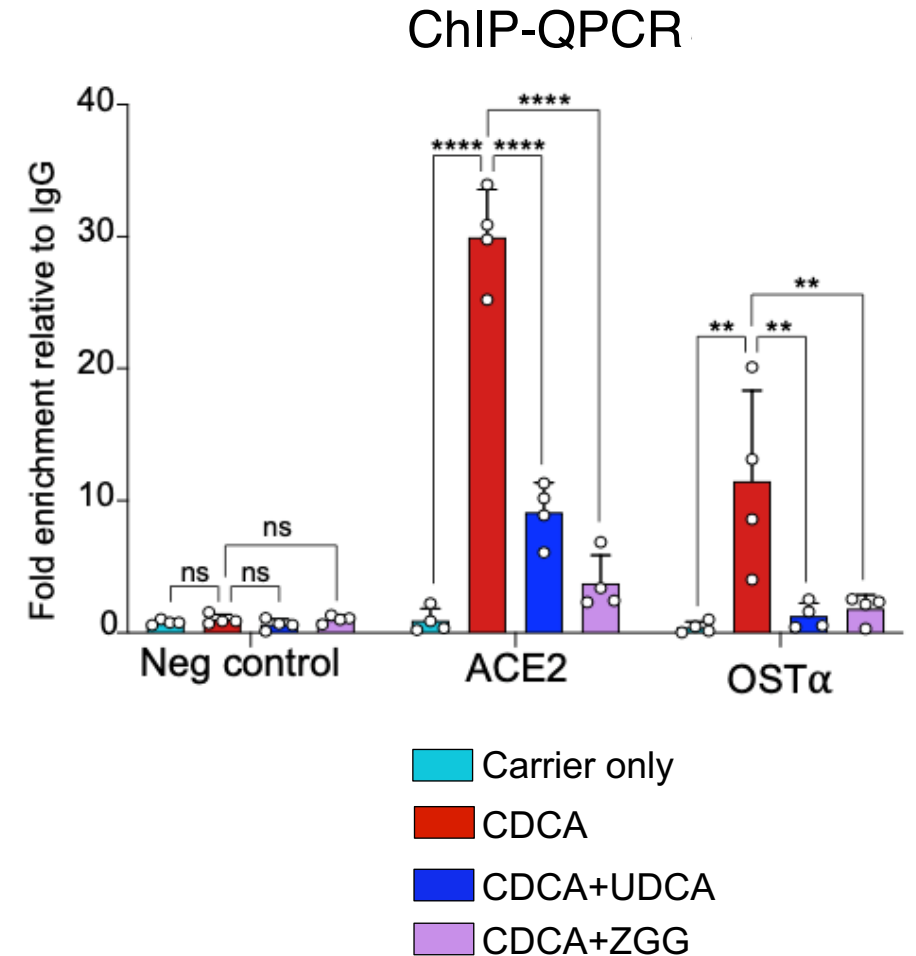
Song et al., *Nature* 2020



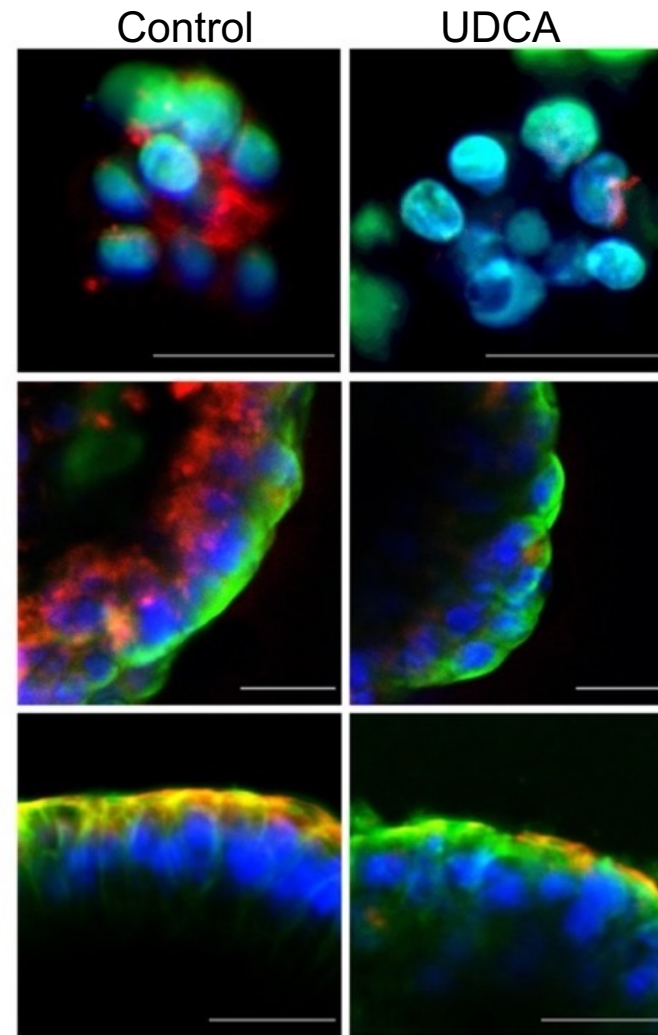
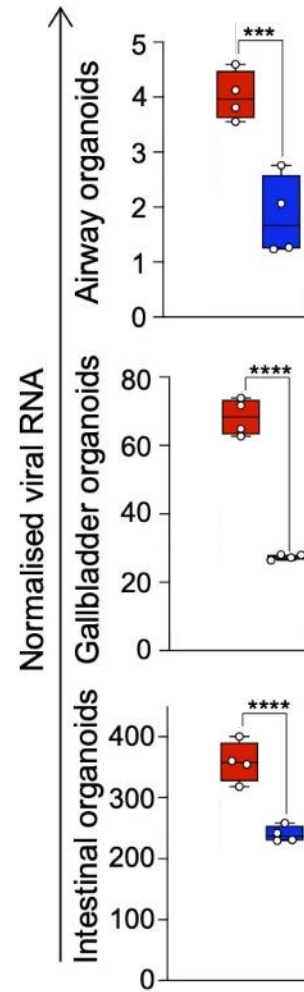
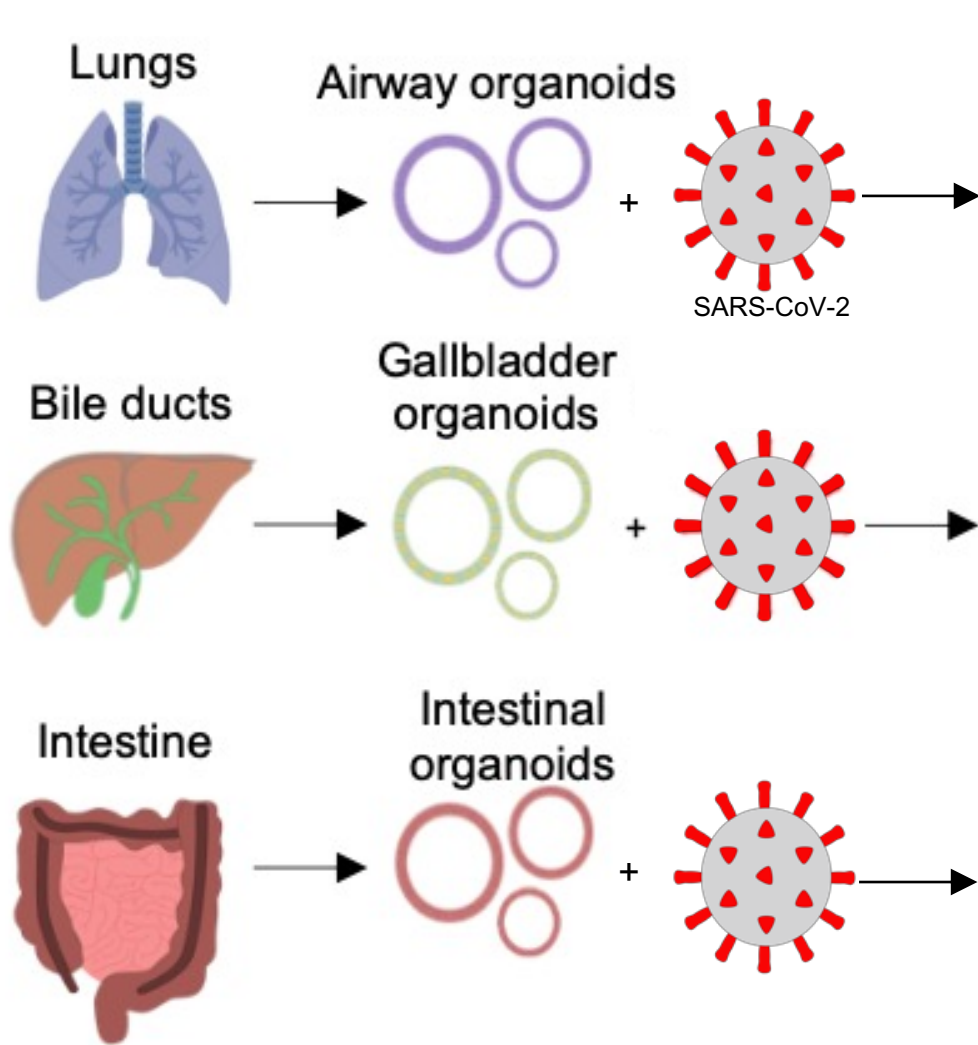
Bile acid receptor FXR directly controls ACE2 transcription & SARS-CoV-2 infection



FXR = nuclear bile acid receptor



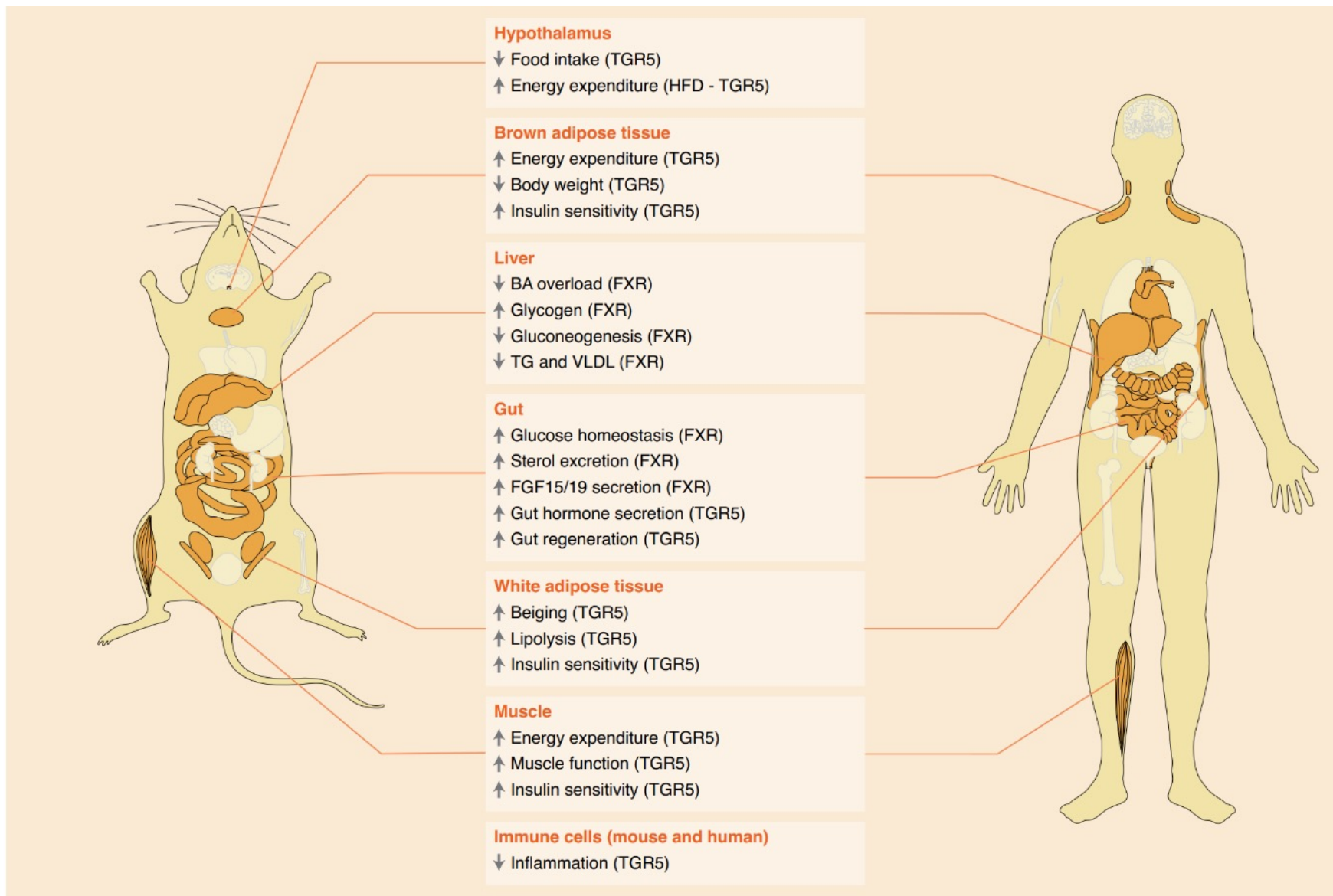
UDCA reduces ACE2 & SARS-CoV-2 infection



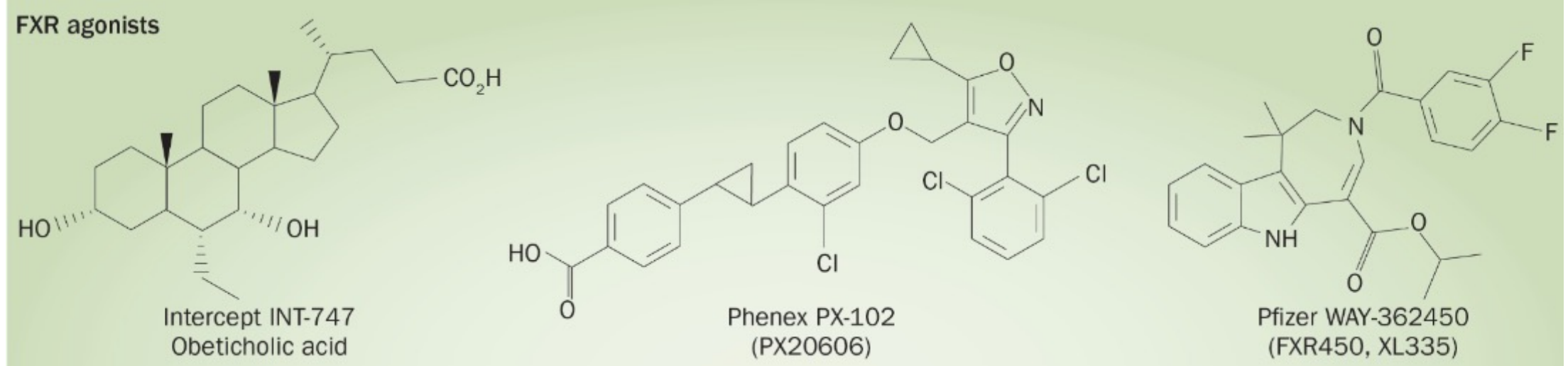
SARS-CoV-2/DAPI/Epithelial cells

■ CDCA
■ CDCA+UDCA

Broad metabolic activities of BAs in the body



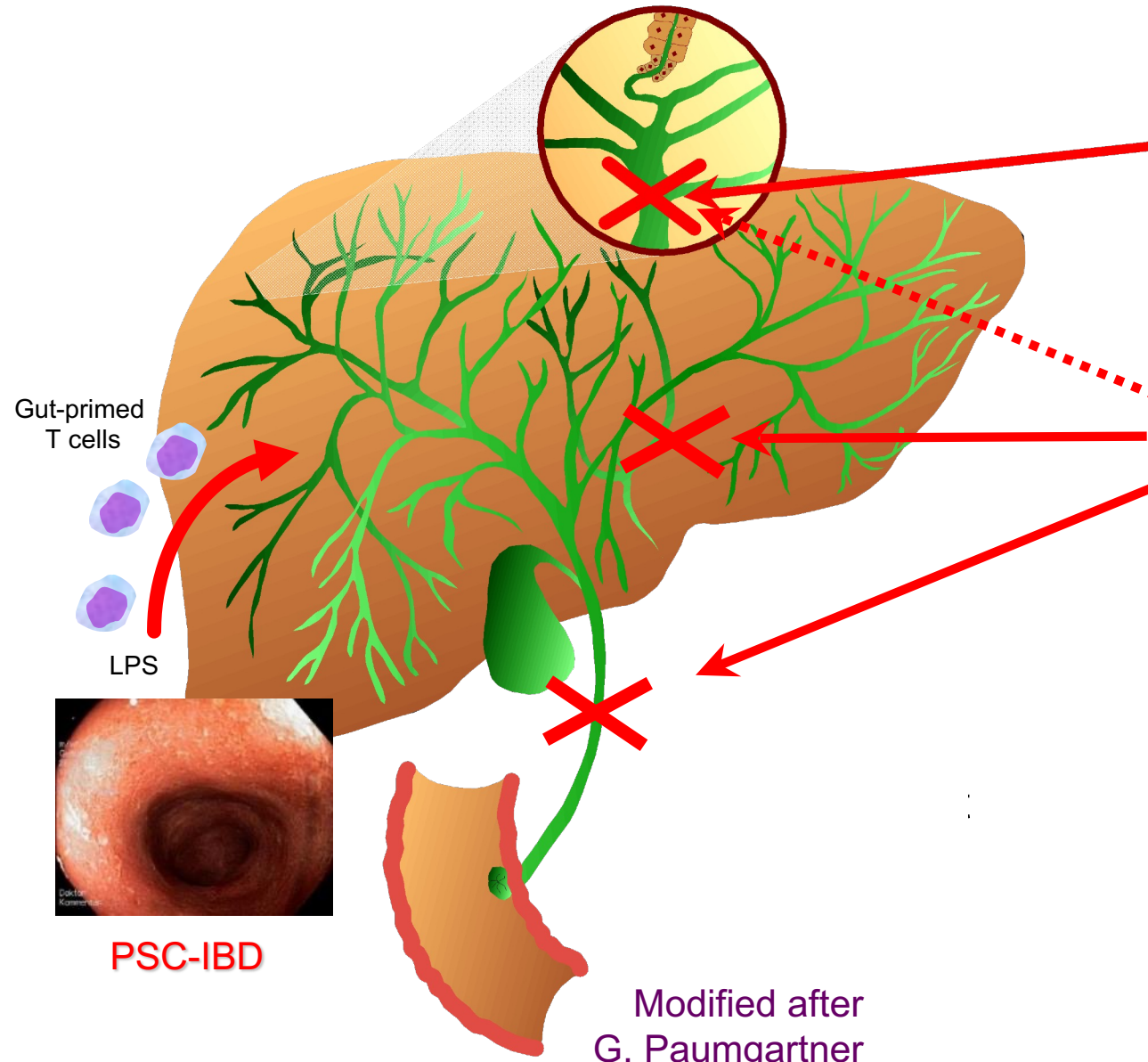
Steroidal and non-steroidal FXR agonists



- **Obeticholic Acid (OCA) - first-in-class steroidal FXR ligand**
 - Approved in PBC; studies in PSC & NASH
- **Non-steroidal FXR ligands - no BA structure**
 - Different pharmacokinetics, efficacy & safety profiles?
 - Cilofexor (PSC, PBC, NASH)
 - Tropifexor (PBC, NASH), LMB763 (NASH)
 - EDP-305 (NASH, PBC), EYP001 (NASH), MET409 (NASH)



Biliary Diseases / Cholangiopathies: Clinical Challenges & Unmet Therapeutic Needs



Primary Biliary
Cholangitis (PBC)

- Effective Rx: UDCA
- 1/3 NR - 2nd line: FXR, PPARs

Primary Sclerosing
Cholangitis (PSC)

- No established medical therapy
 - UDCA controversial
- IBD ~ 70%
 - worse prognosis
- Malignancy risk (CCA, CRC, ...)
 - 45% of deaths

PSC-IBD

Modified after
G. Paumgartner

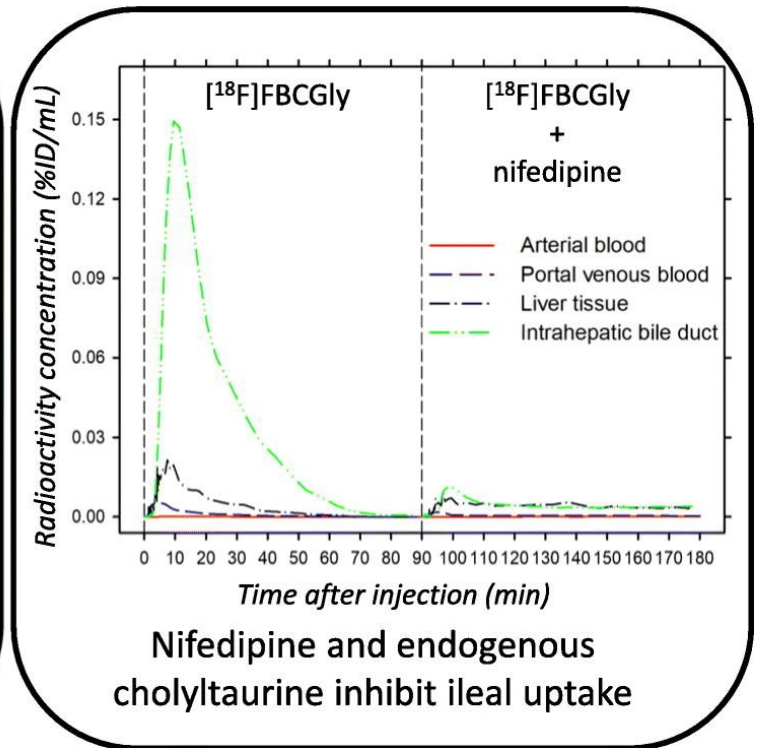
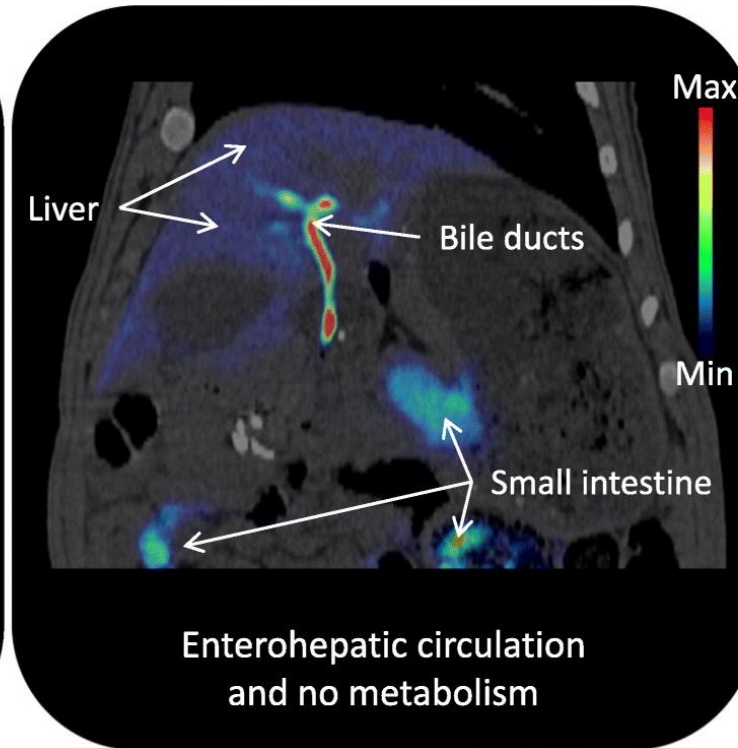
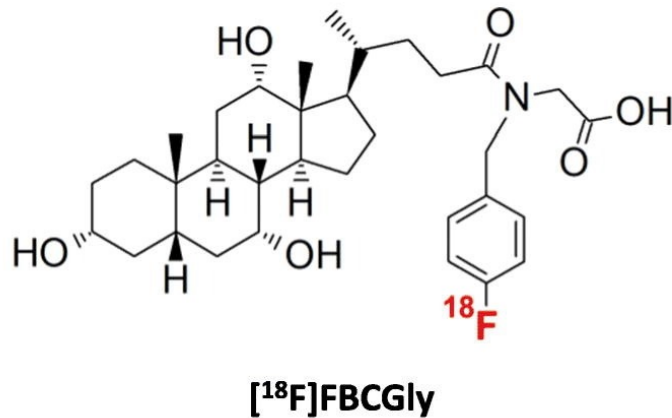
Reviews: Hirschfield et al., *Lancet* 2013
Karlsen et al., *J Hepatol* 2017



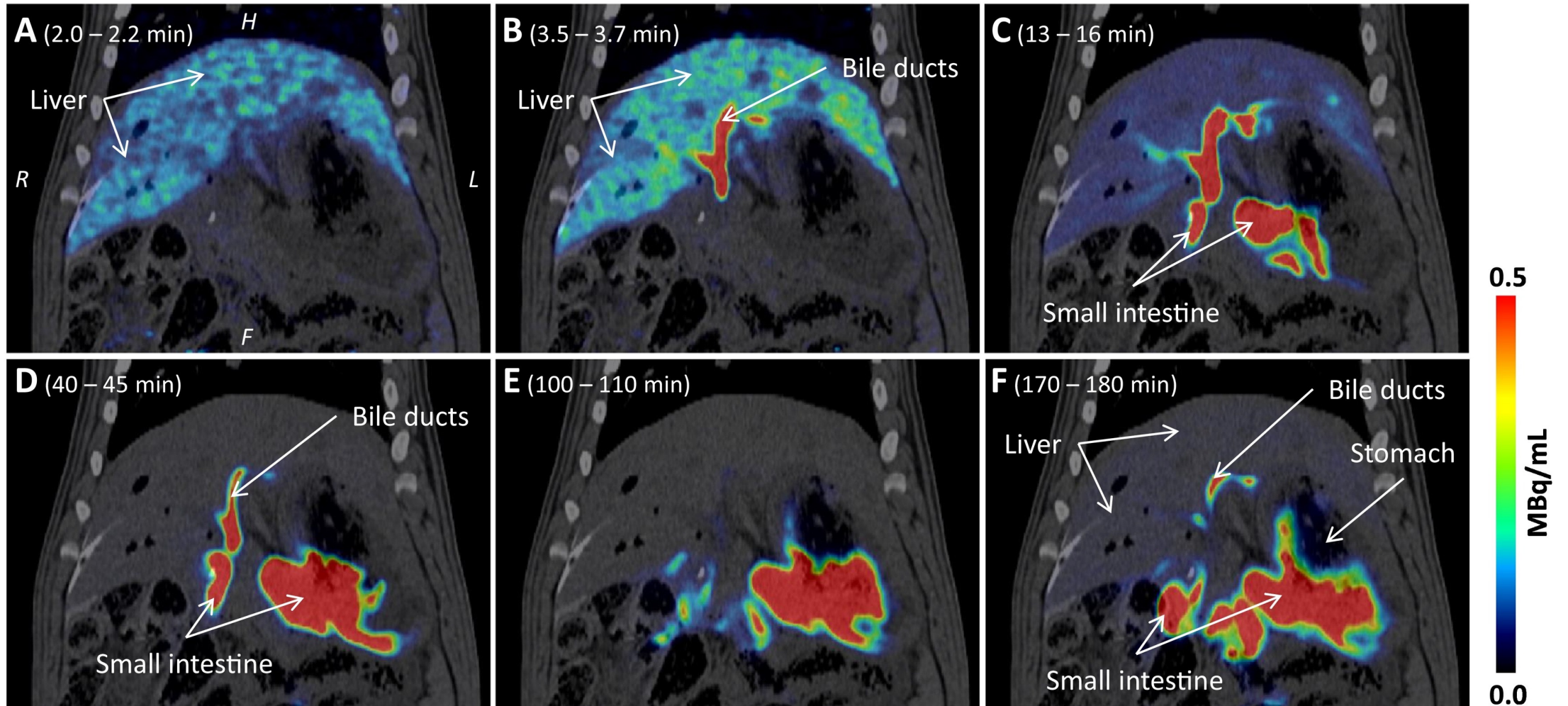
N-(4-[¹⁸F]fluorobenzyl)cholyglycine as potential PET tracer for enterohepatic circulation: proof-of-concept study in pigs

N-(4-[¹⁸F]fluorobenzyl)cholyglycine ([¹⁸F]FBCGly), a tracer for PET of enterohepatic circulation of conjugated bile acids

The biodistribution, metabolism, dosimetry and hepatic kinetics of [¹⁸F]FBCGly was investigated in pigs



N-(4-[¹⁸F]fluorobenzyl)cholyglycine as potential PET tracer for enterohepatic circulation: proof-of-concept study in pigs



Evaluating Hepatobiliary Transport with ^{18}F -Labeled Bile Acids: The Effect of Radiolabel Position

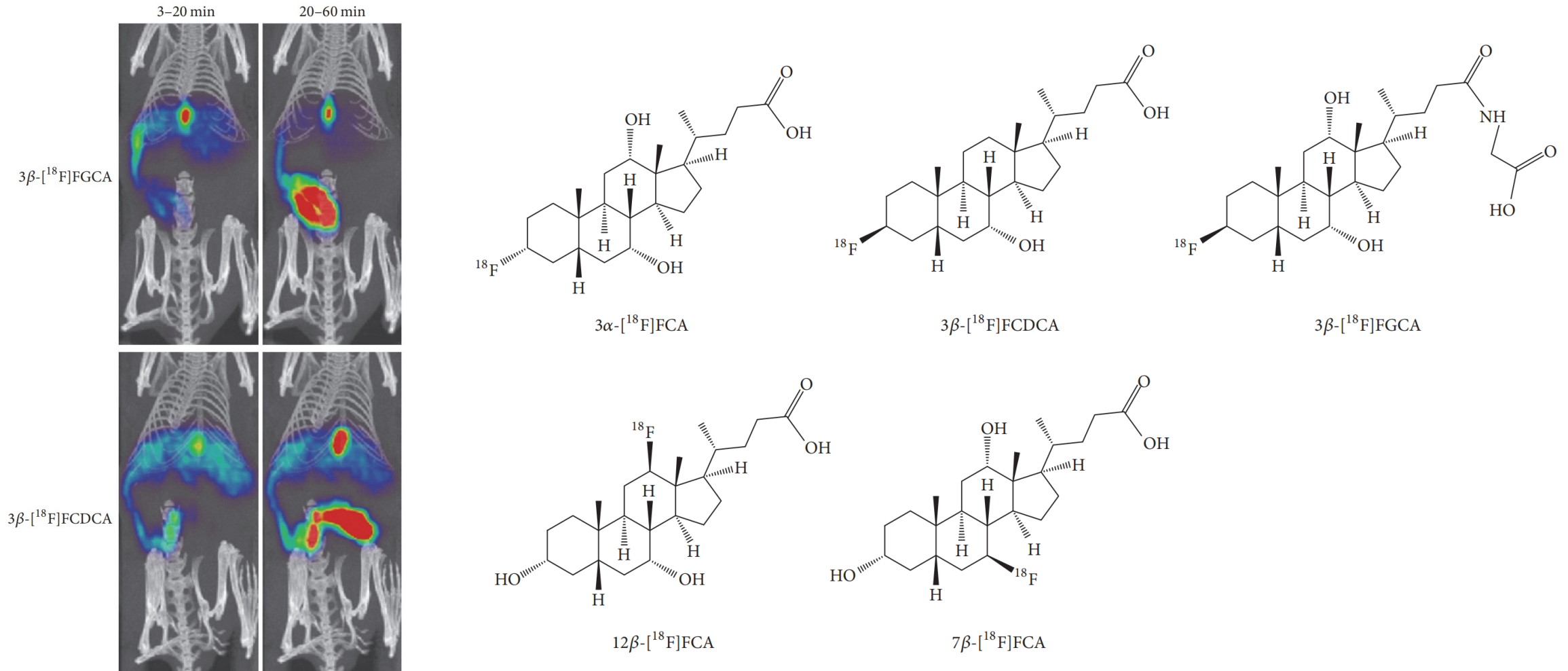
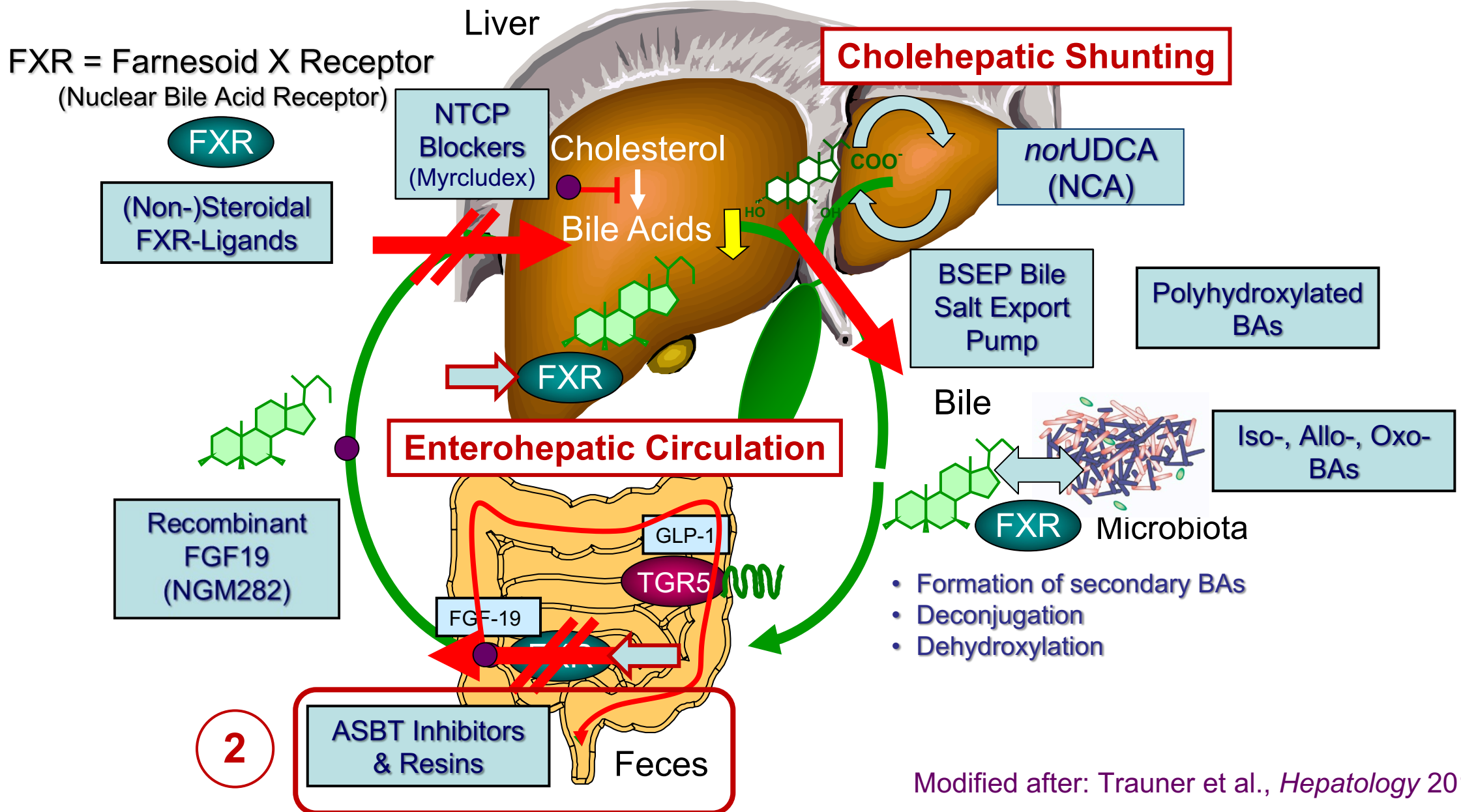


FIGURE 5: Representative Maximum Intensity Projection PET/CT of 9 MBq 3β -[^{18}F]FGCA and 3β -[^{18}F]FCDCA in a wild-type mouse

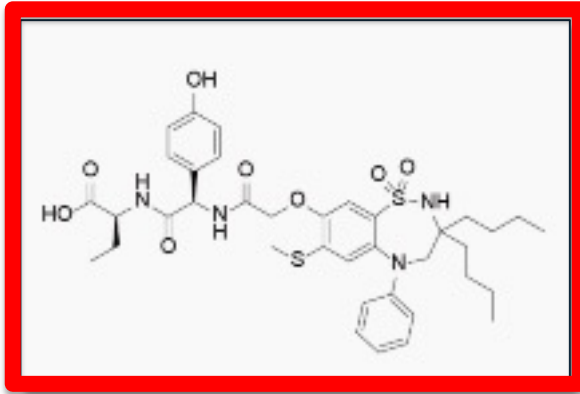
Leveraging bile acid signaling for therapeutic purposes



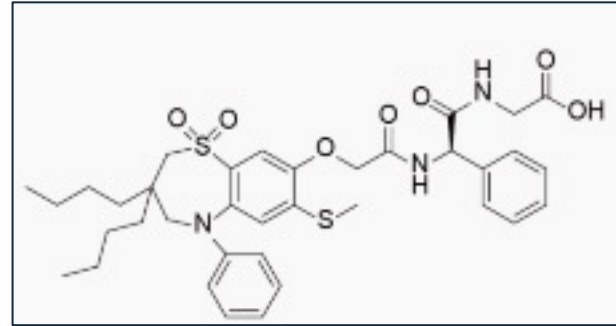
Modified after: Trauner et al., *Hepatology* 2017



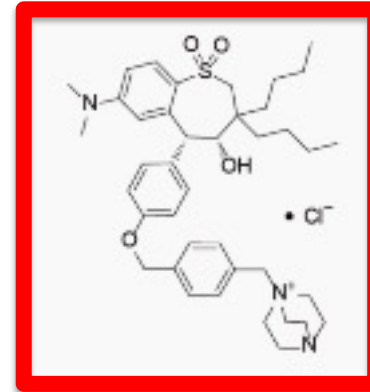
ASBT (IBAT) inhibitors in clinical trials



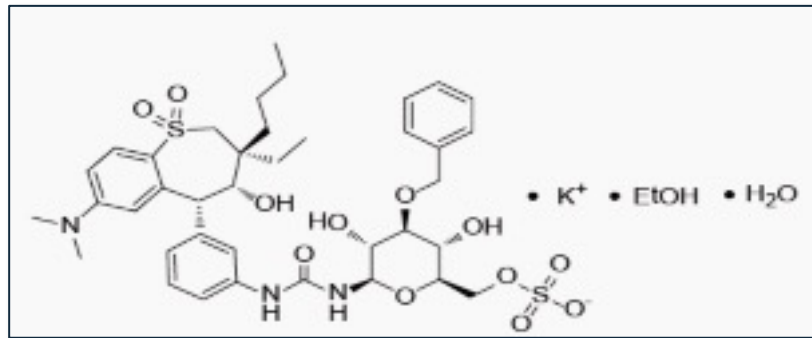
Odevixibat; A4250



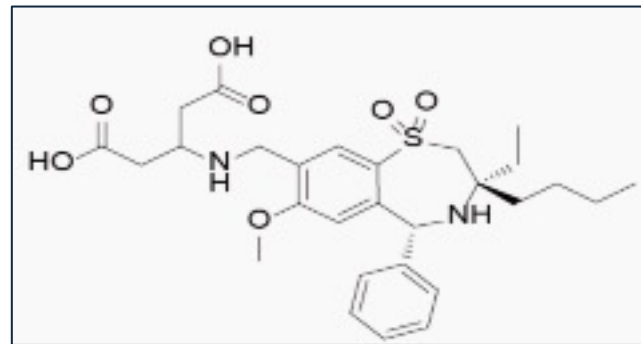
Elobixibat; A3309



Maralixibat;
Lum001; SHP625



Volixibat; Lum002; SHP626



Linerixibat;
GSK2330672

Diseases:

Alagille Syndrome

PFIC1

PFIC2

Biliary Atresia

PBC

PSC

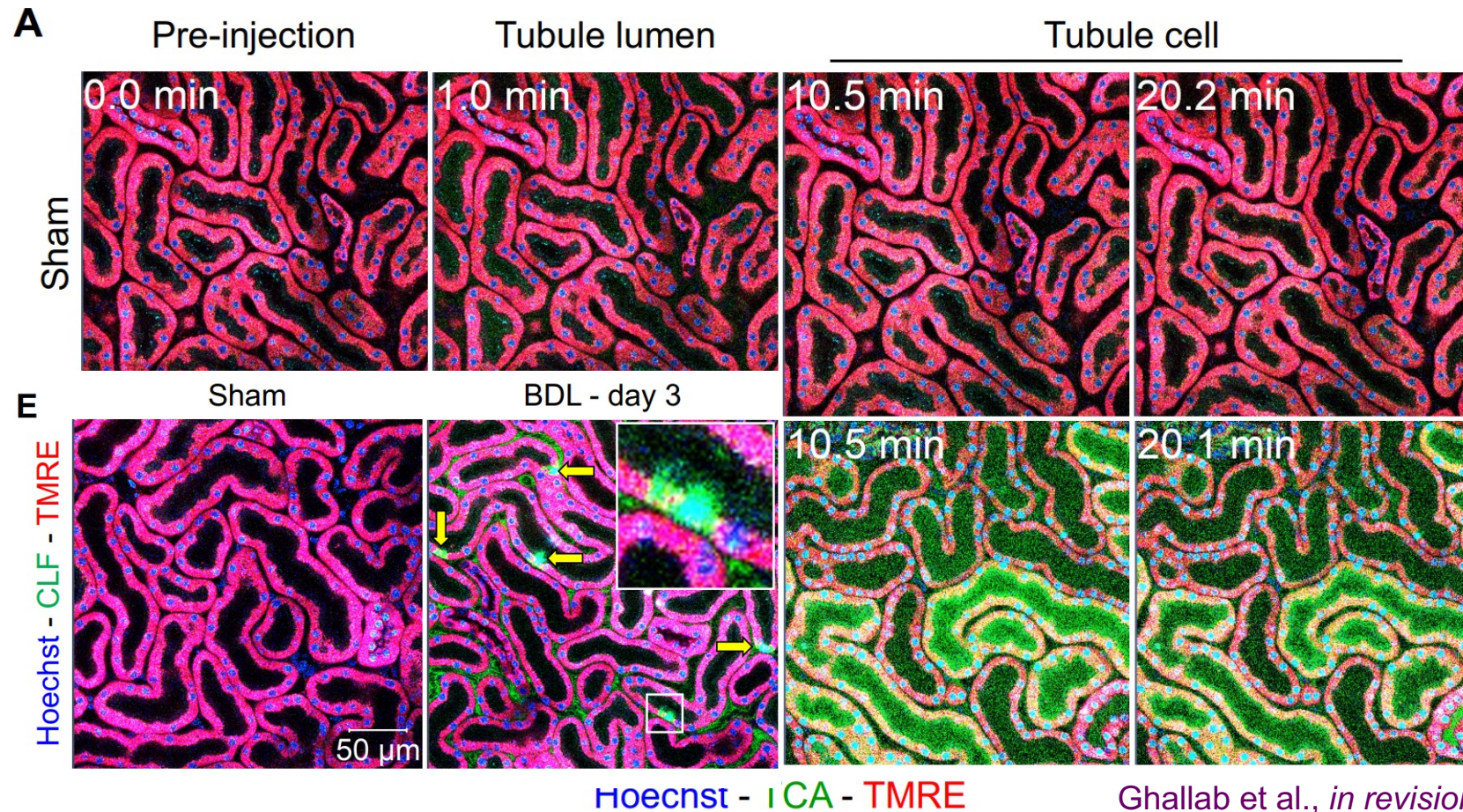
NASH

Constipation



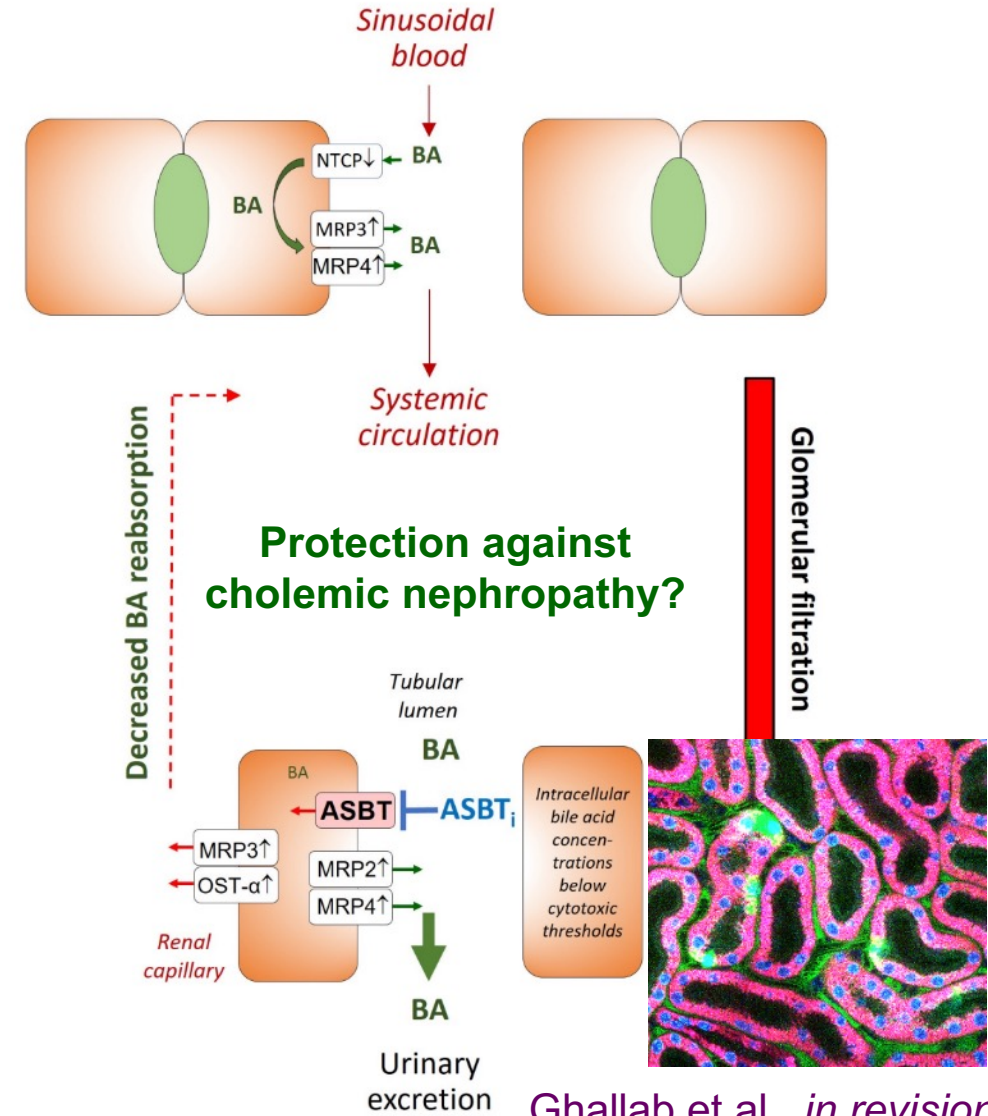
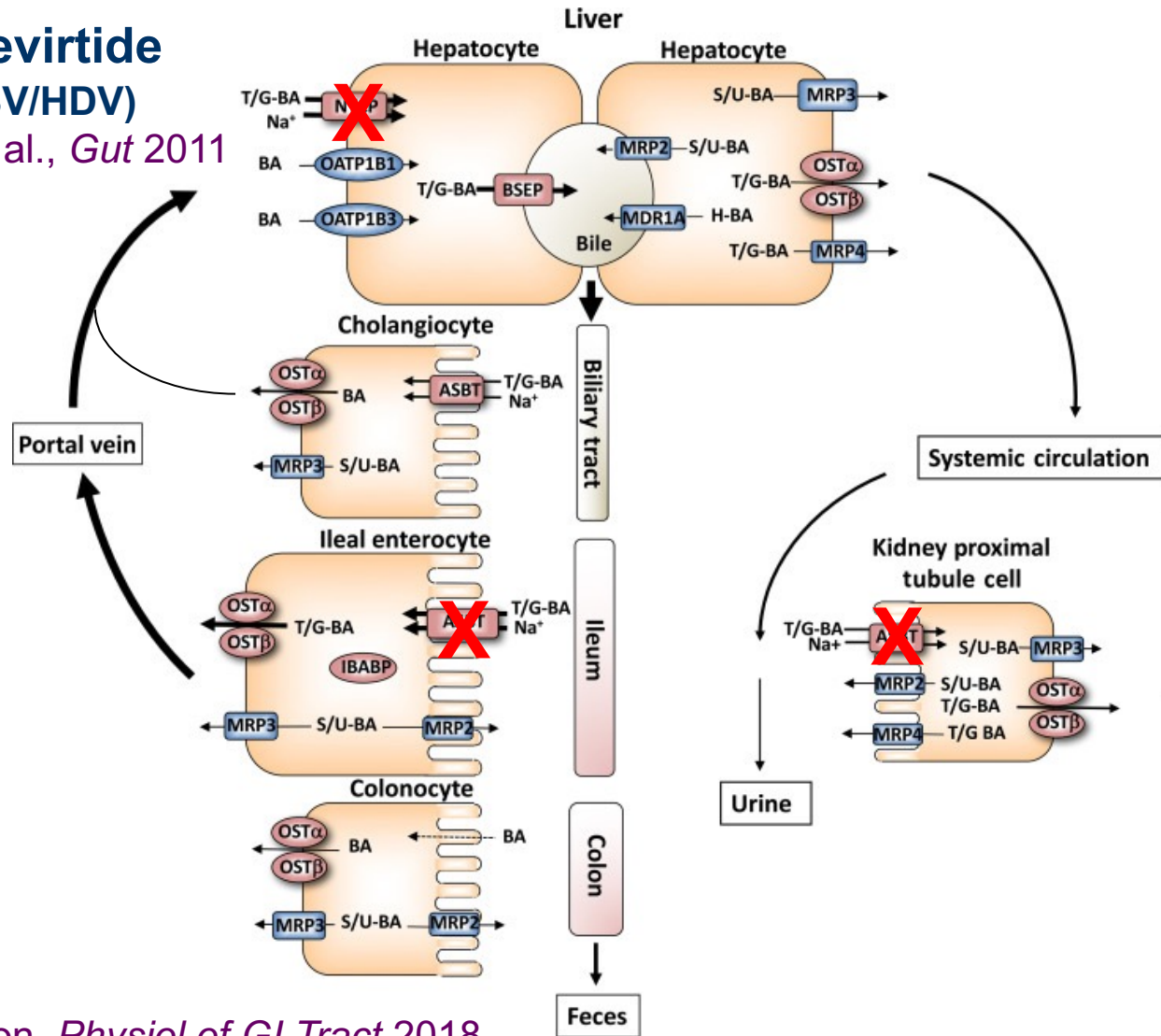
Adaptive hepatic changes result in increased bile acid load to the kidney in cholestasis

Bile acid accumulation in cholemic nephropathy

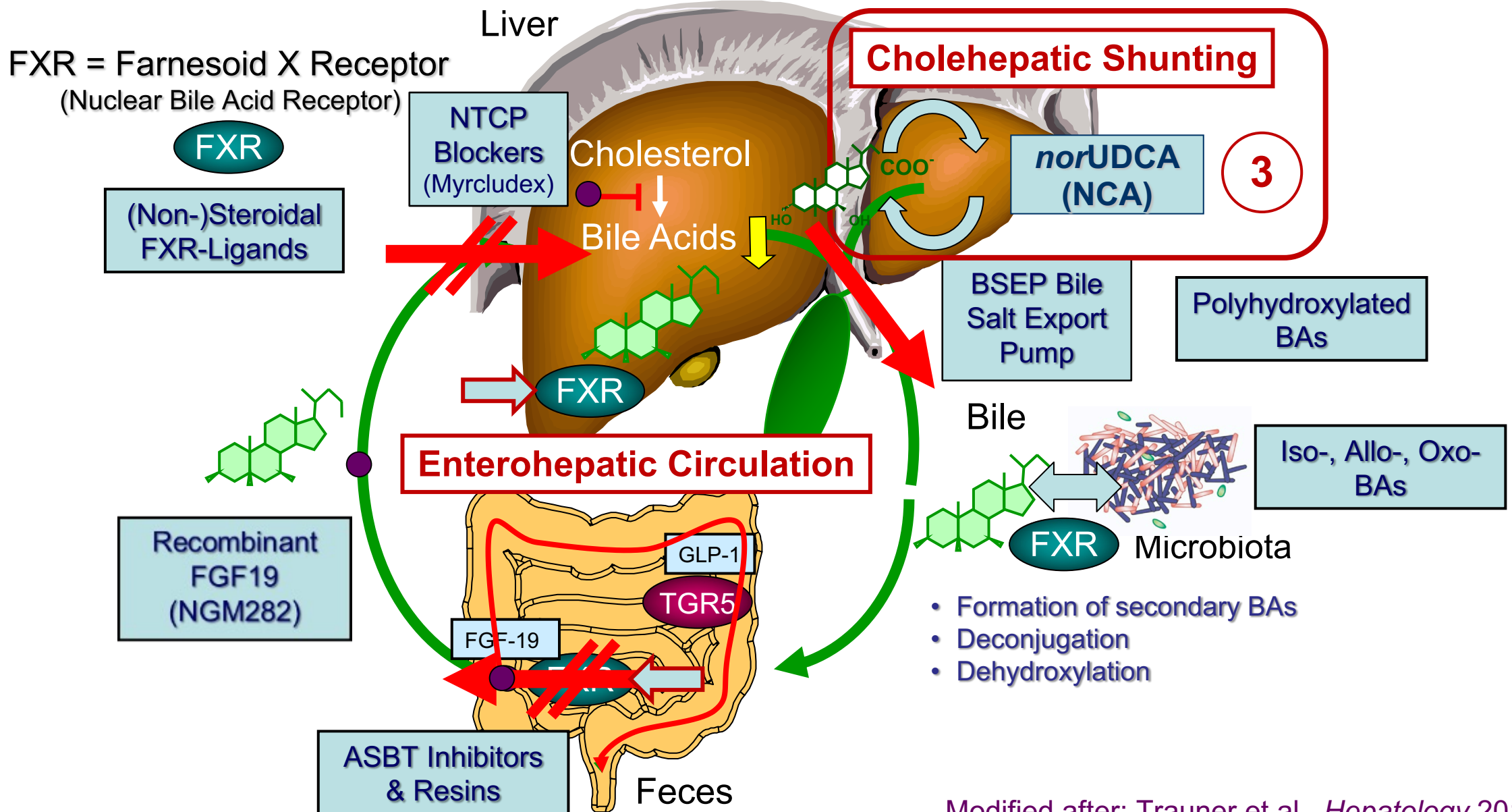


Therapeutic opportunities for ileal IBAT and systemic ASBT inhibitors (and beyond – NTCP?)

Bulevirtide
(HBV/HDV)
Urban et al., *Gut* 2011



Leveraging bile acid signaling for therapeutic purposes



Modified after: Trauner et al., *Hepatology* 2017

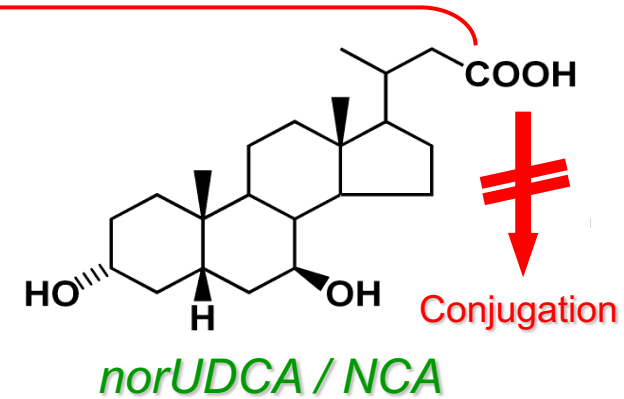
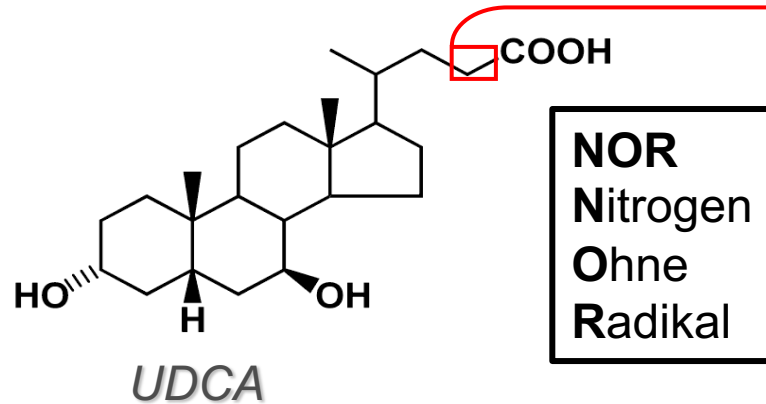


Differential pharmacological profiles of UDCA versus *nor*UDCA / noruchoic acid (NCA)

UDCA → *nor*UDCA / NCA: side-chain-shortening alters pharmacological profile



UDCA



Pharmacokinetics

- Conjugation with taurin/glycin
- Entero-hepatic circulation:
Liver ↔ **Gut**

- Resistant to taurin/glycin conjugation ⇒ glucuronidation
- Cholehepatic shunting:
Hepatocyte ↔ **Bile Duct**

Biliary Physiology

- **Bile-acid rich**
Choleresis

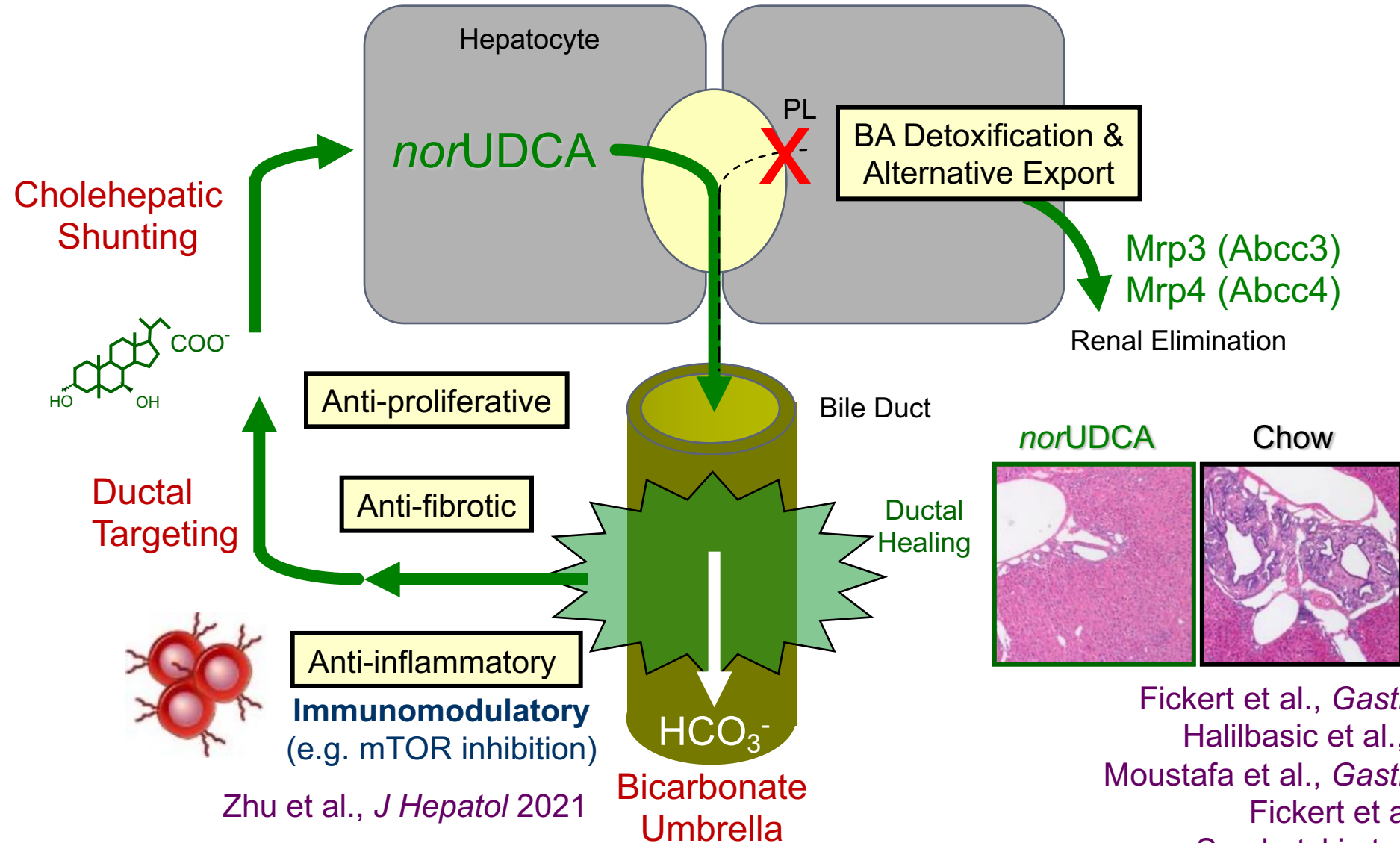
- **Bi-carbonate rich**
Hypercholeresis

***nor*UDCA / NCA is NOT a ligand for FXR or TGR5**

Yoon et al., *Gastro* 1986
Hofmann et al., *Hepatology* 2005
Trauner et al., *Dig Dis* 2015



*nor*UDCA / noruchoic acid (NCA): Mechanisms of Action in *Mdr2 (Abcb4)*^{-/-} Model of Sclerosing Cholangitis

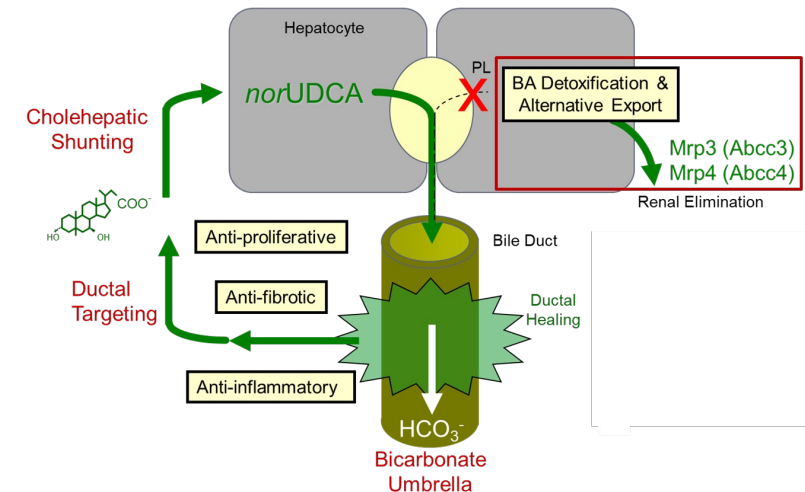
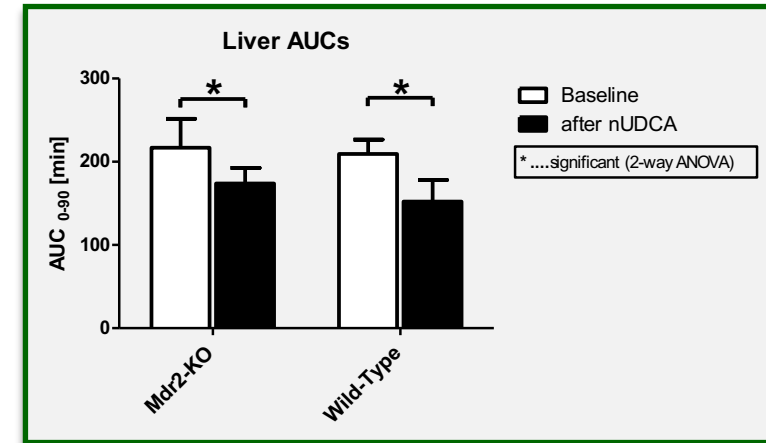
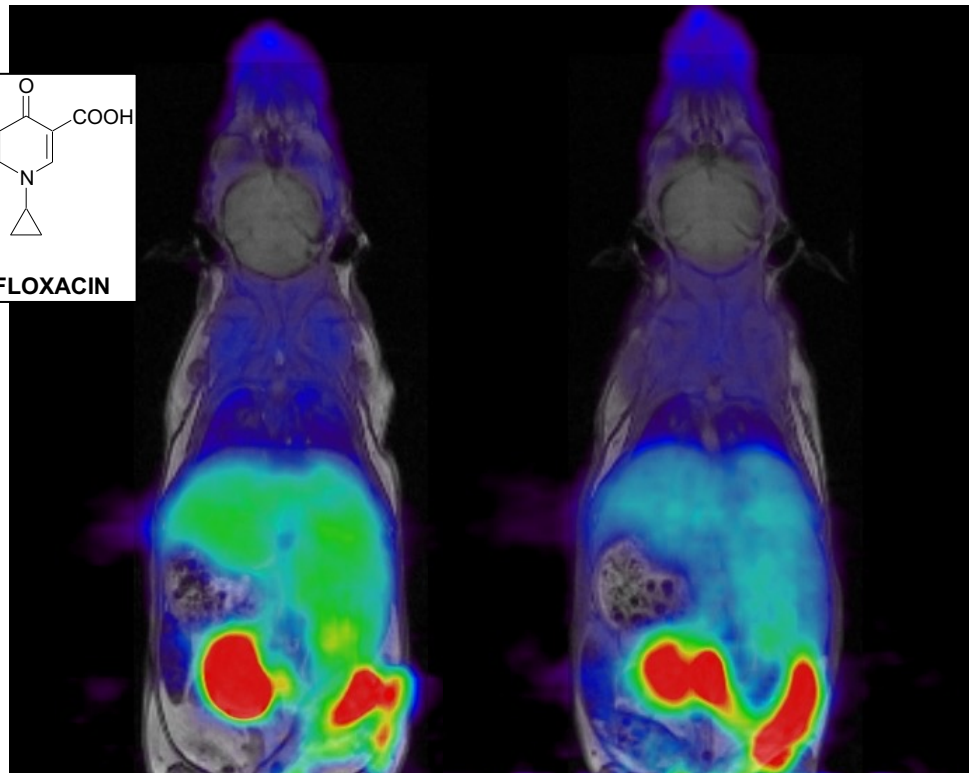
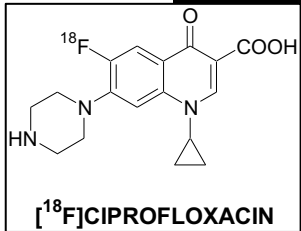


*nor*UDCA and hepatic disposition of [¹⁸F] Ciprofloxacin in *Mdr2 (Abcb4)*^{-/-} model of sclerosing cholangitis

Mdr2-KO (M501)

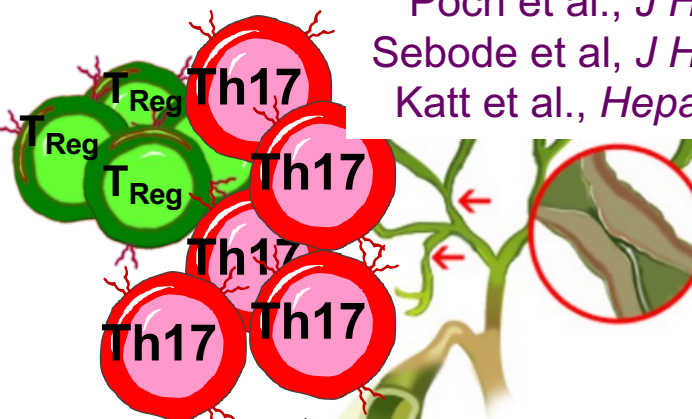
Baseline

after nUDCA

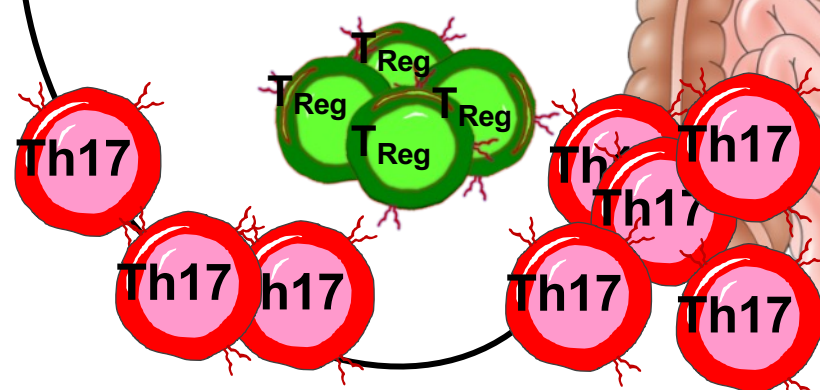


T_H17/Treg imbalance: Key immunopathological factor driving PSC-IBD

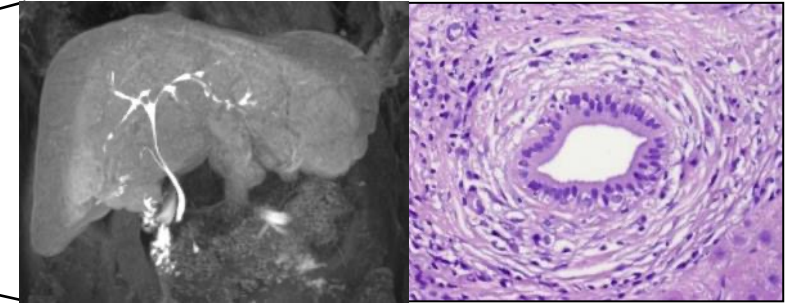
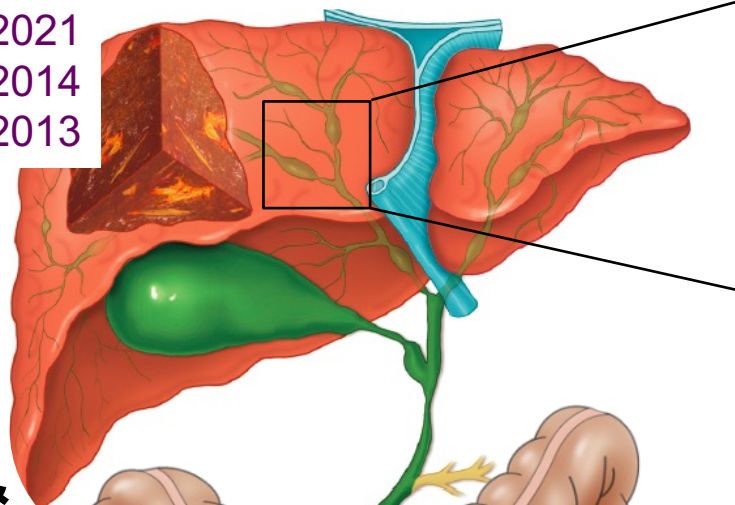
Poch et al., *J Hepatol* 2021
Sebode et al., *J Hepatol* 2014
Katt et al., *Hepatology* 2013



**Inflammation &
fibrosis of the
bile ducts**



Ueno et al., *J Autoimmun* 2018
Fujino et al., *Gut* 2003



**No established medical therapy
of PSC**



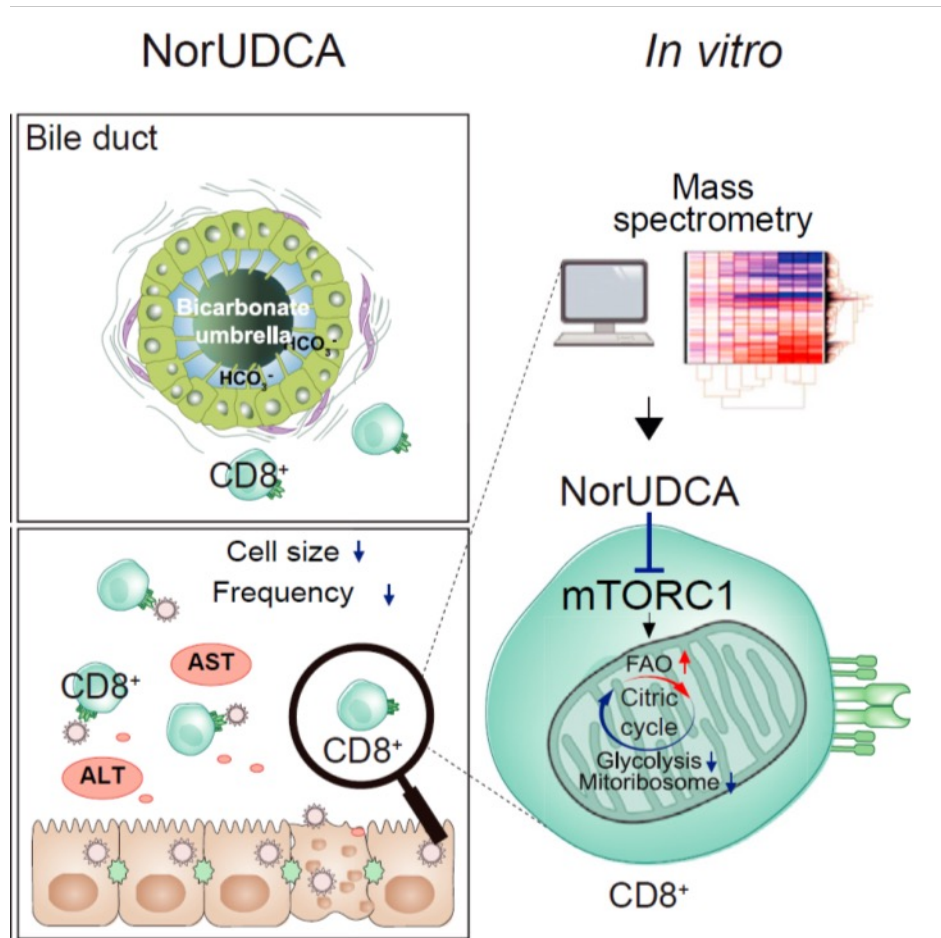
PSC-IBD~70%

Reviewed in Hirschfield et al., *Lancet* 2013
Karlsen et al., *J Hepatol* 2017



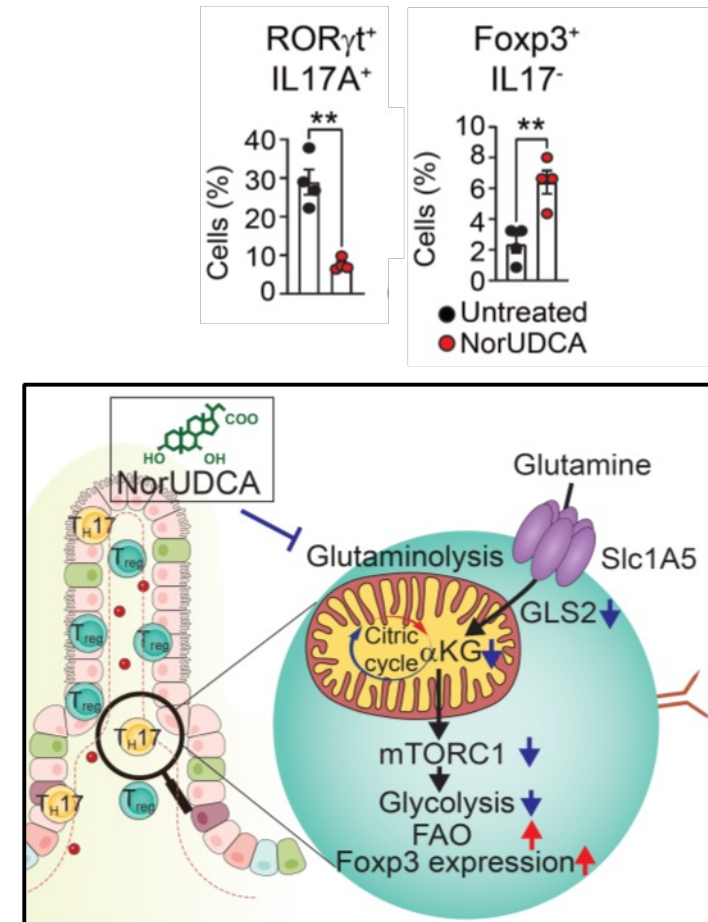
*nor*UDCA ameliorates hepatic & intestinal inflammation by shaping mTOR proteome & metabolism in CD8⁺ & CD4⁺ T cells

CD8⁺ T cells



Zhu et al., *J Hepatol* 2021

CD4⁺ T cells



Zhu et al., *in preparation*
EASL ILC 2020 AS060



*nor*UDCA protects mucosal goblet cells and barrier integrity against colon inflammation in mice

No colitis

Colitis

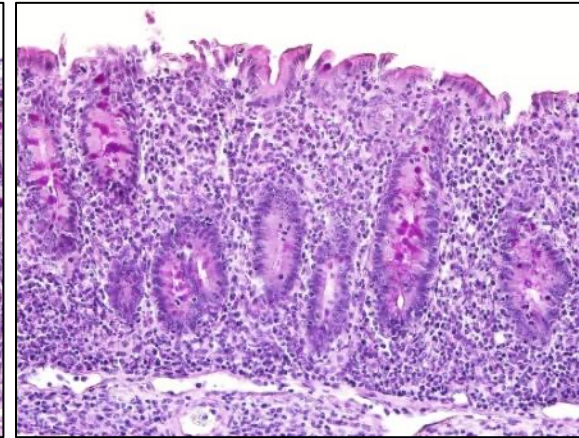
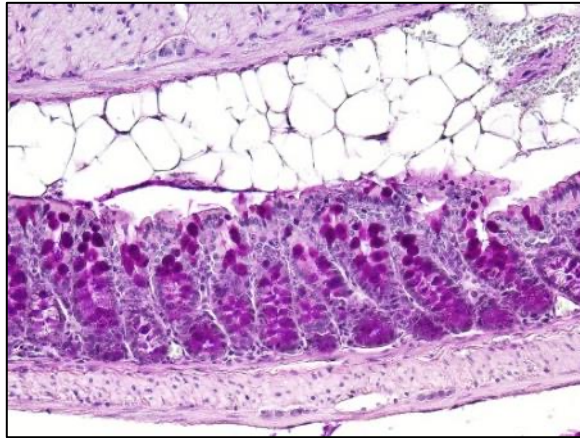
No treatment

NorUDCA

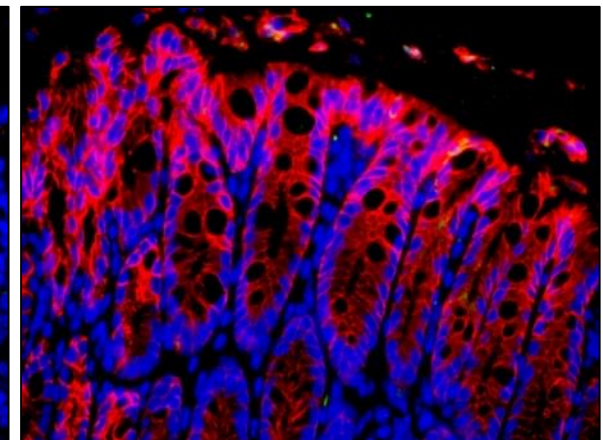
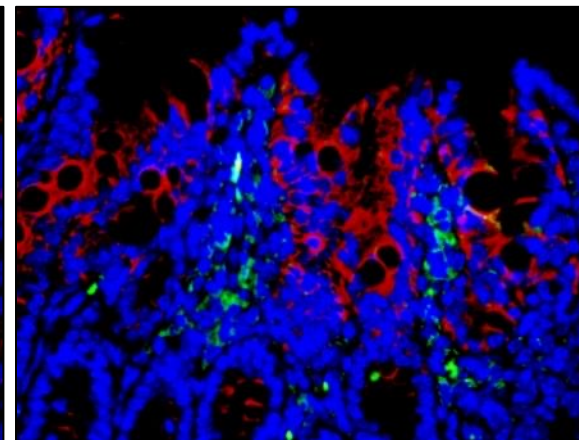
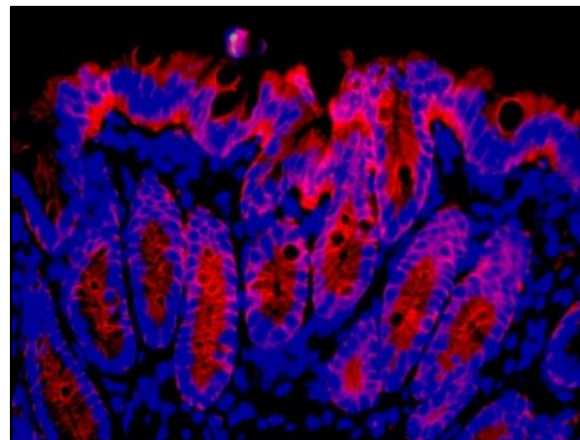
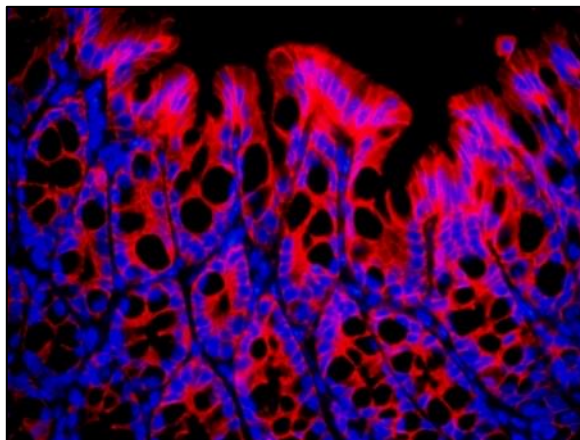
No treatment

NorUDCA

PAS



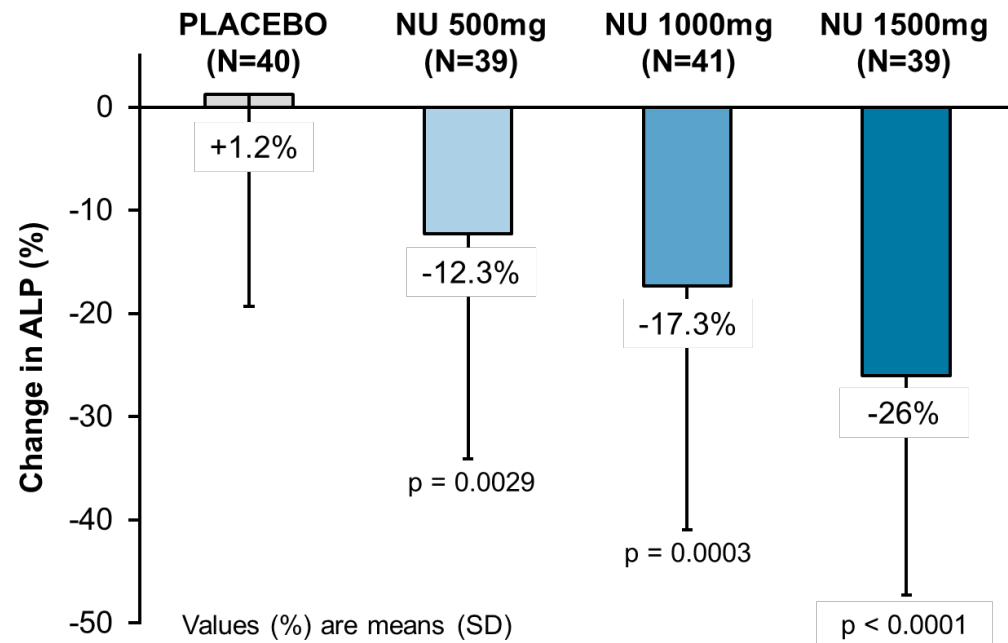
MPO/Ecadherin
/Dapi



Clinical efficacy of *nor*UDCA / norucholic acid (NCA) in PSC and NAFLD Phase 2 trials

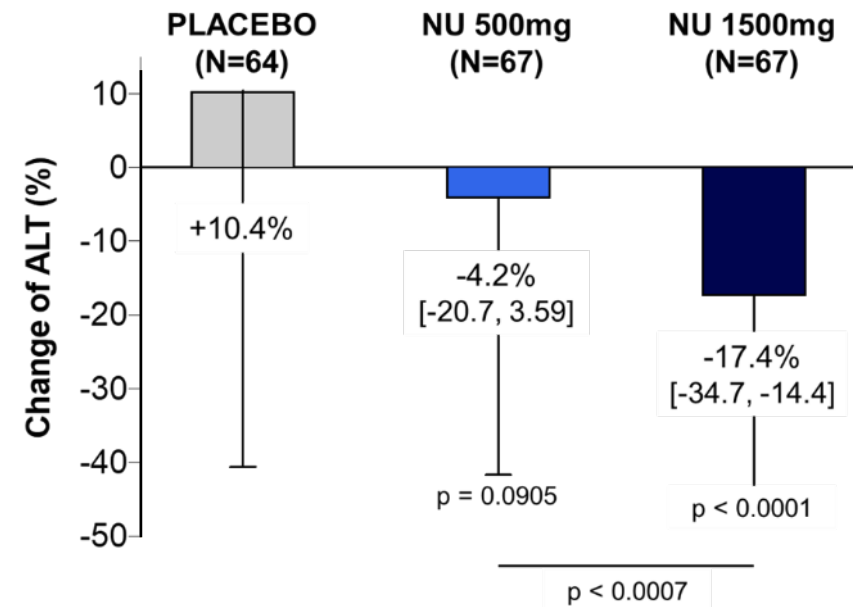
PSC Phase 2 (NUC-3)

Fickert et al. ... Trauner, *J Hepatol* 2017



NAFLD Phase 2a (NUC-4)

Traussnigg et al. ... Trauner, *Lancet Gastro Hep* 2019



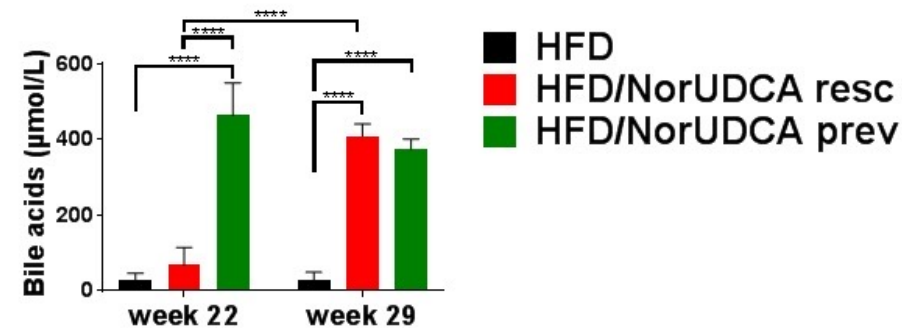
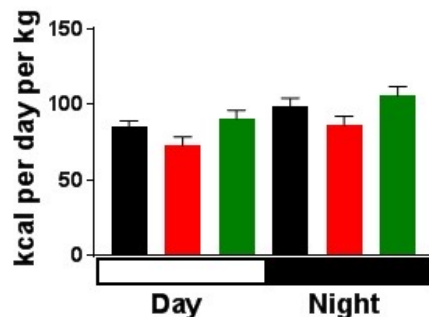
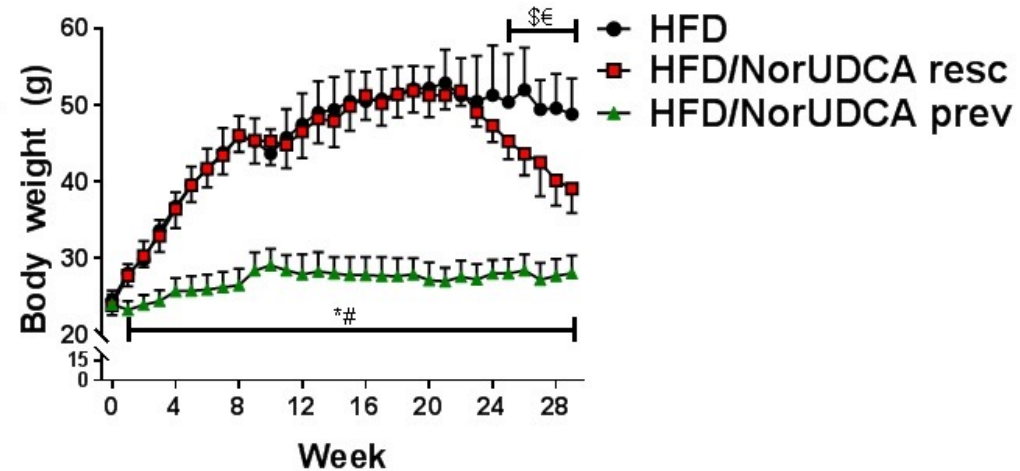
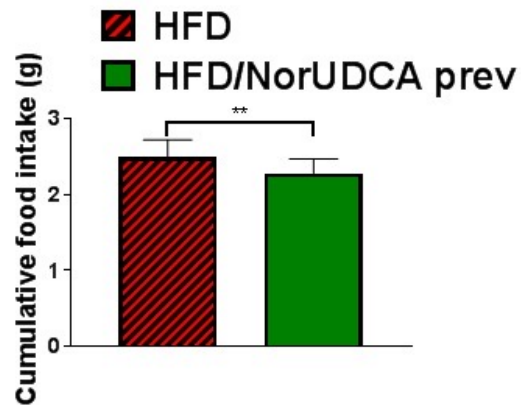
➤ PSC Phase 3 (NUC-5) fully recruited

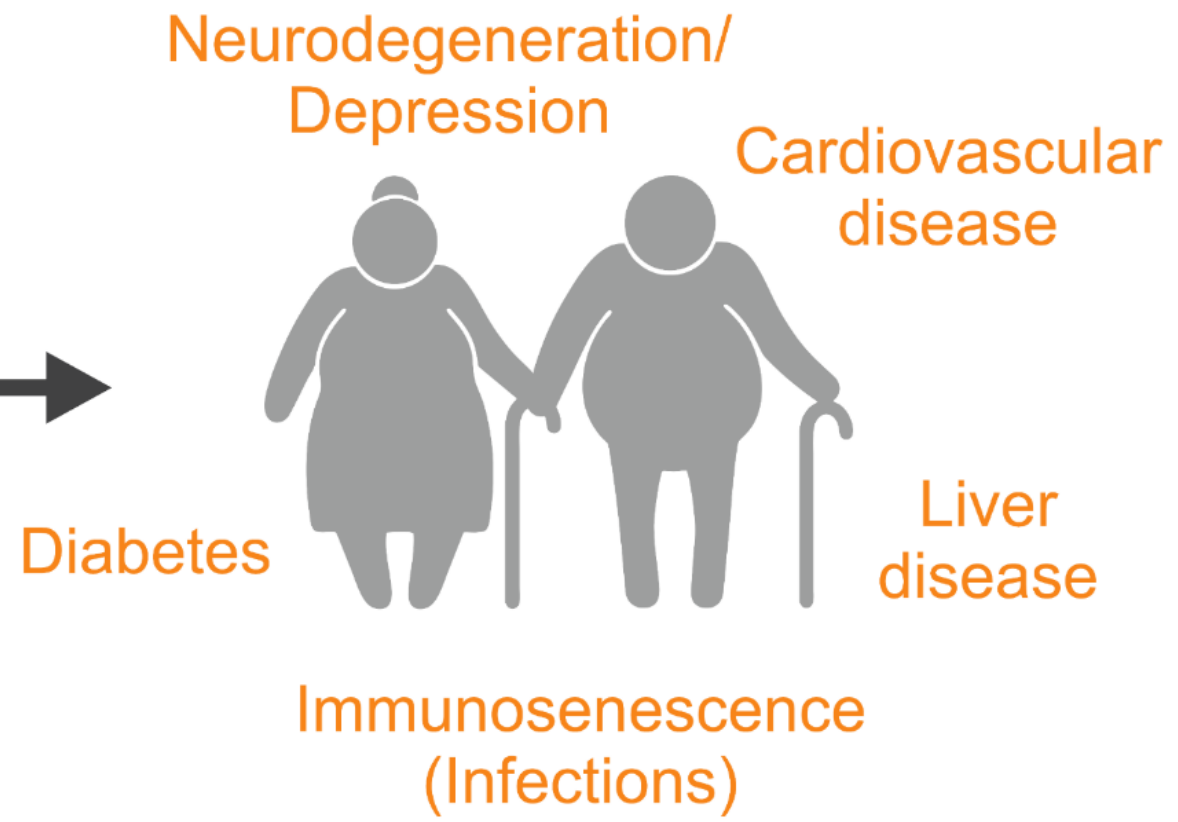
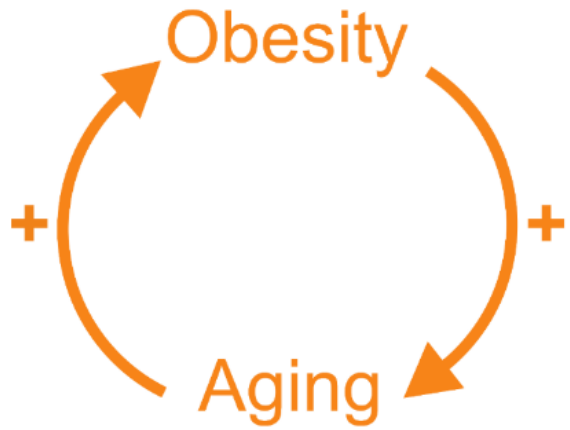
➤ NAFLD Phase 2b (NUT-3 / OASIS) ongoing



*nor*UDCA improves liver injury and metabolic state in mouse models of obesity & hepatic steatosis

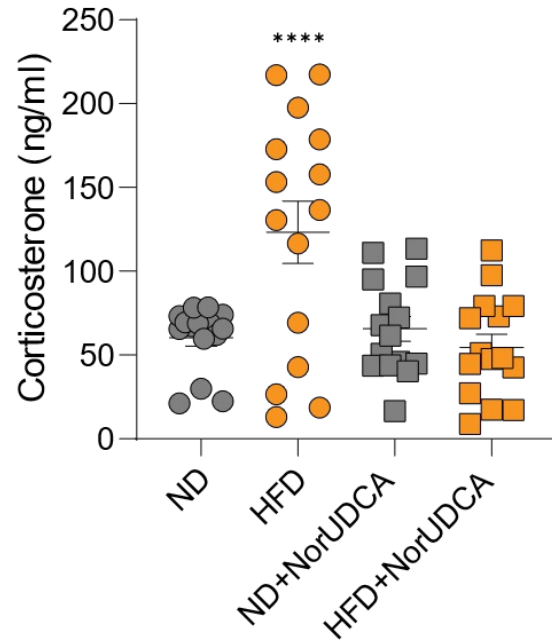
- HFD : HFD for 29 weeks, since week 22 pair fed to HFD/NorUDCA resc
- HFD/NorUDCA resc : HFD for 22 weeks, than HFD + 0.5 % NorUDCA
- HFD/NorUDCA prev : HFD + 0.5 % NorUDCA for 29 weeks



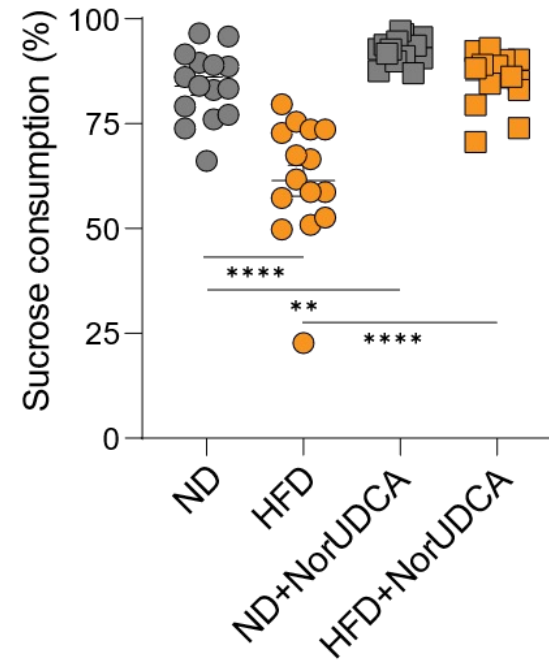


*nor*UDCA improves HFD-induced anhedonia and anxiety

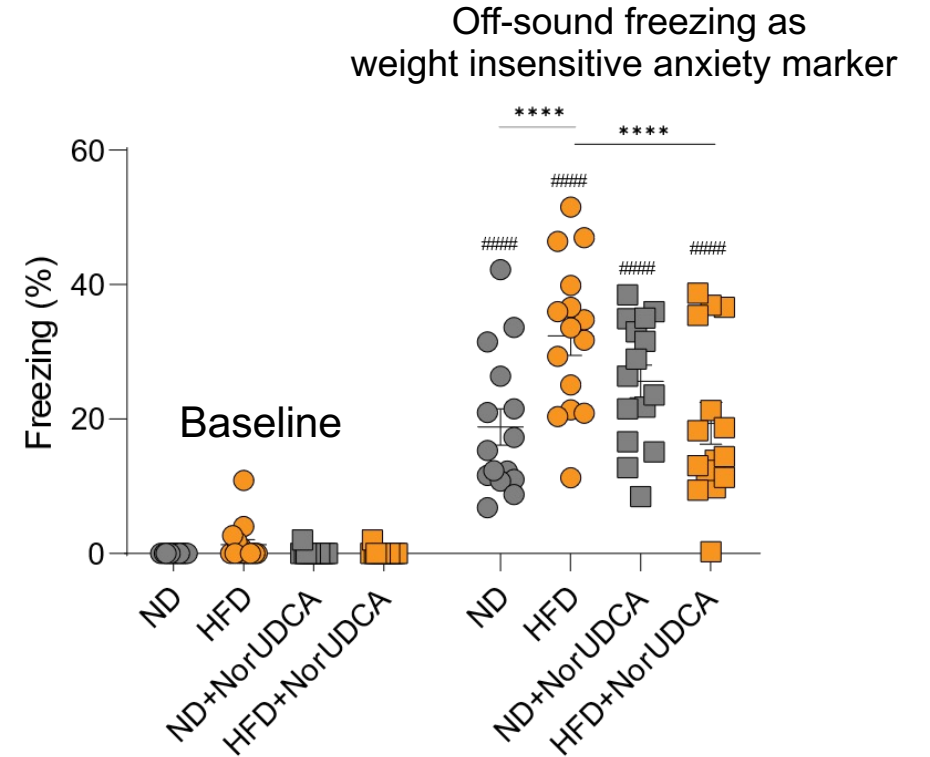
Cort Levels



Anhedonia



Anxiety



Unconjugated BA link gut metabolic states to mood and behavior

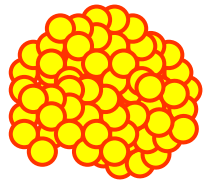


Leveraging bile acid signaling for therapeutic purposes

FXR = Farnesoid X Receptor
(Nuclear Bile Acid Receptor)

FXR

(Non-)Steroidal
FXR-Ligands



WAT



Muscle

Liver

NTCP
Blockers
(Myrcludex)

Cholesterol
↓
Bile Acids

FXR

Gut

Recombinant
FGF19
(NGM282)

GLP-1

TGR5

FGF-19

ASBT Inhibitors
& Resins

Feces

norUDCA
(NCA)

Brain



BSEP Bile
Salt Export
Pump

Polyhydroxylated
BAs

Bile

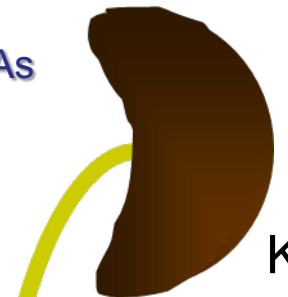
Iso-, Allo-, Oxo-
BAs

FXR

Microbiota

- Formation of secondary BAs
- Deconjugation
- Dehydroxylation

Kidney

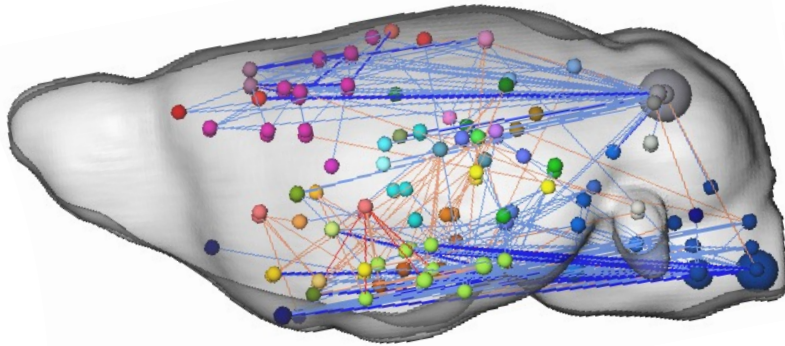


Modified after: Trauner et al., *Hepatology* 2017

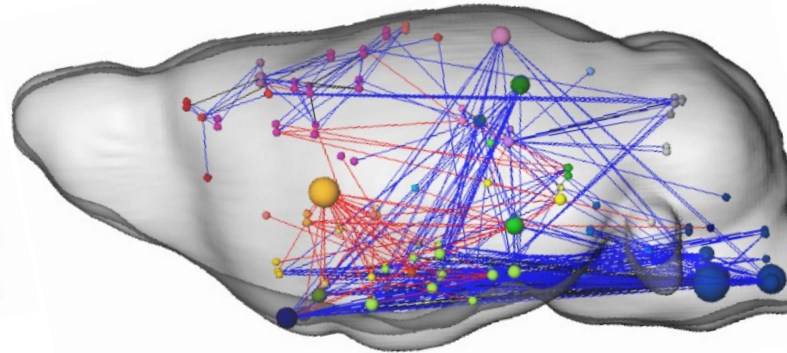


HFD and *nor*UDCA modulate affective brain dynamics

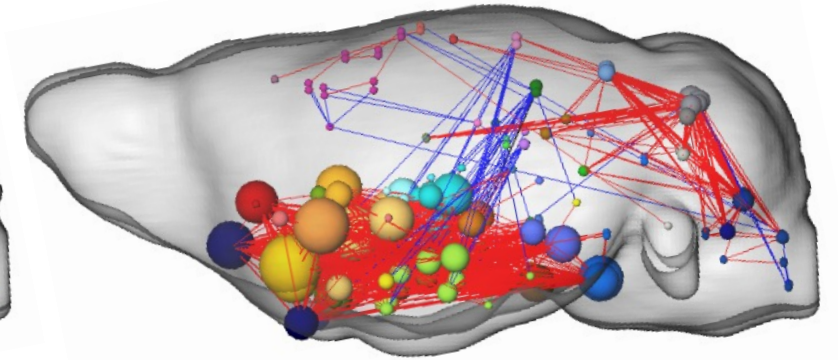
HFD vs. ND



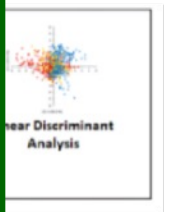
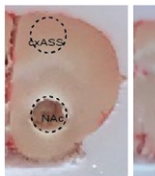
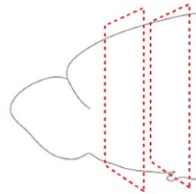
ND+Nor UDCA vs. ND



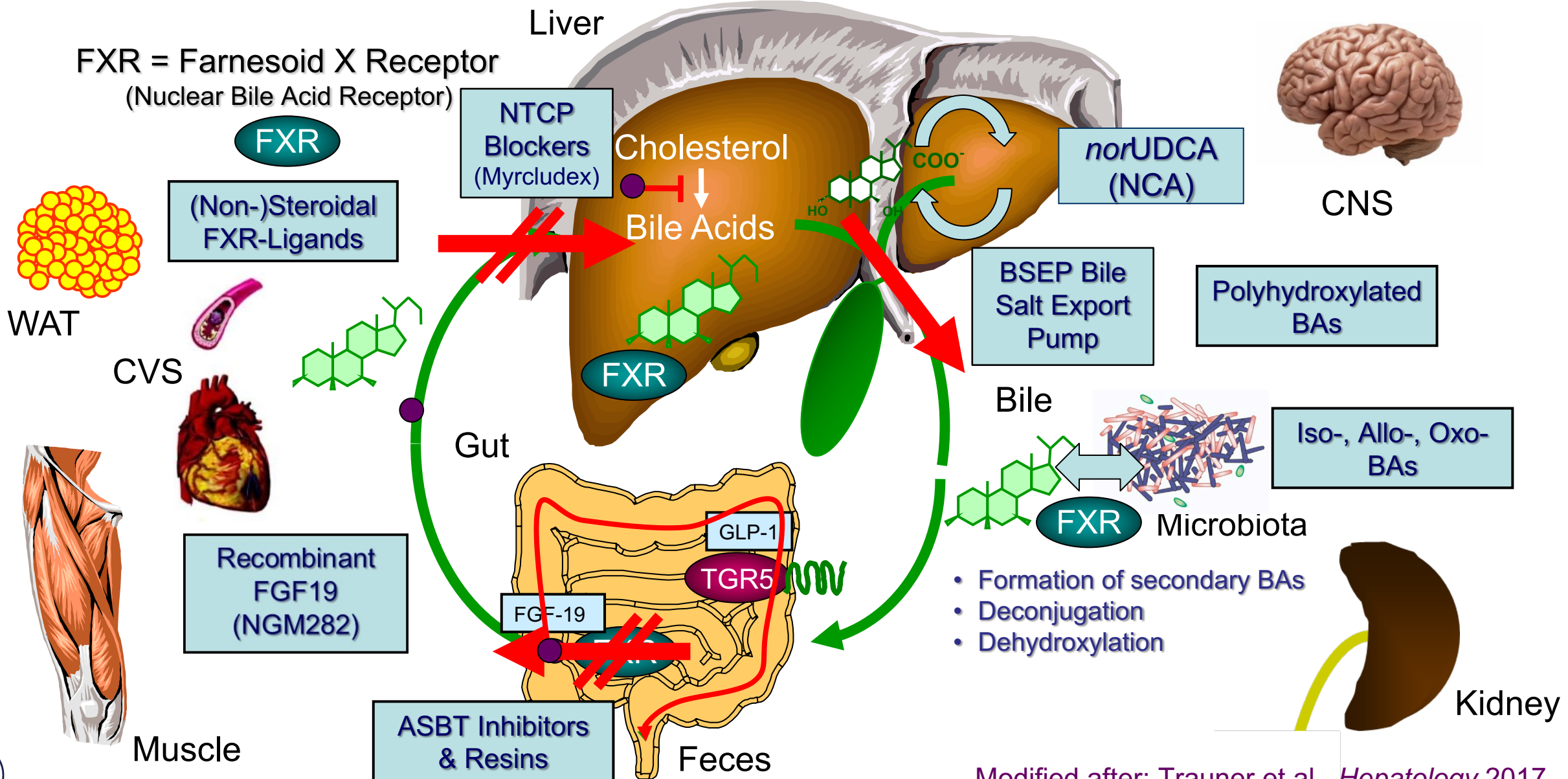
HFD+Nor UDCA vs. HFD



- Focus on sub-network of regions known to be involved in the processing of both **appetitive** and **aversive emotions**
- ND+NorUDCA vs ND suggest positive effects on mood (**reduced Hippocampus amygdala interaction**)
- HFD+NorUDCA vs HFD ameliorate negative effects of HFD on mood by reducing Hippocampus amygdala coupling and **increasing Amygdala-Tegmental-basal ganglia** interaction



Leveraging bile acid signaling for therapeutic purposes



Modified after: Trauner et al., *Hepatology* 2017



PET imaging of inter-organ communication and networks

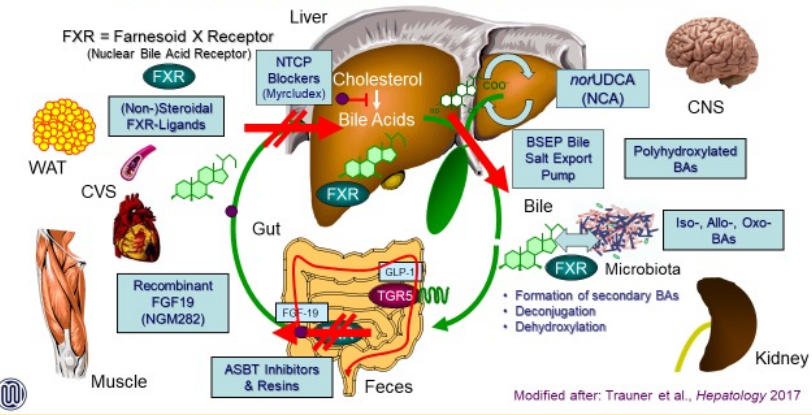
Systems signaling

Reductionism

Enablers

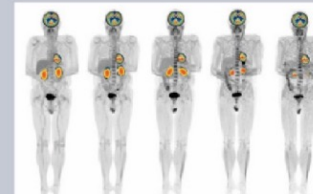
Systems Medicine

Bile acid signaling across organ boundaries



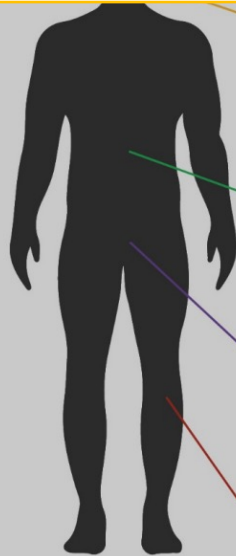
Interpretation of molecular mechanisms at cellular level for cause-effect relationship, including genomics, epigenetics, metabolomics and proteomics.

Interrogation of interplay of signaling pathways through dynamic, whole-body PET (DWB-PET).



Multi-dimensional integration of systemic signaling pathways enables phenotyping, drug development and advanced patient management = Systems Medicine

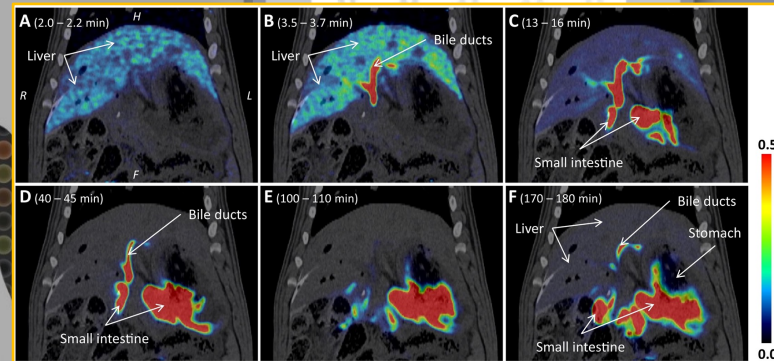
Innervation



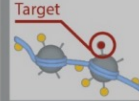
Metabolites

Hormones

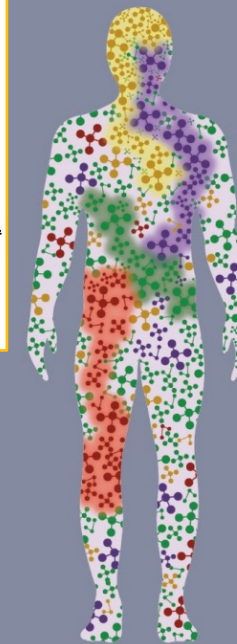
Inflammation



Epigenomics



Metabolomics



Div. of Gastroenterology & Hepatology



Hans Popper Laboratory of Molecular Hepatology

*Claudia Fuchs
Thierry Claudel
Emmanuel Dixon
Jelena Remetic
Daniel Steinacher
Ci 'Ashley' Zhu*

Christian Doppler Lab for PH & Liver Fibrosis

Sasha Petrenko, Philipp Schwabl, Thomas Reiberger

*Emina Halilbasic
Petra Munda
Rafel Paternostro
Georg Semmler
Albert Stättermayer
Daniel Steinacher*
Clinical Team



MEDICAL UNIVERSITY
OF VIENNA



Die menschliche Größe



Division of
Gastroenterology and Hepatology
Department of Internal Medicine III

Cooperation Partners

GE & Hepatology, MUG, Graz

Tarek Moustafa
Martin Wagner
Peter Fickert

Molecular Biology, KFU, Graz

Günter Hämmerle
Robert Zimmermann

CIMCL, MUG, Graz

Tatjana Stojakovic
Hubert Scharnagl

Univ. Magdeburg

Verena Keitel

IfADo, Dortmund

Ahmed Ghallab
Jan Hengstler

Institute of Immunology, MUW

Nicole Boucheron
Ci 'Ashley' Zhu
Wilfried Ellmeier

University of Groningen

Onne A. H. O. Ronda
Henkjan Verkade

University of Cambridge

Teresa Brevini
Fotios Sampaziotis

Emory Univ. School of Medicine, Atlanta

Paul Dawson
Saul Karpen

Sahlgrenska Academy, Gothenburg

Annika Wahlström
Hanns-Ulrich Marschall

CeMM, Vienna

Andreas Bergthaler

Intercept, New York

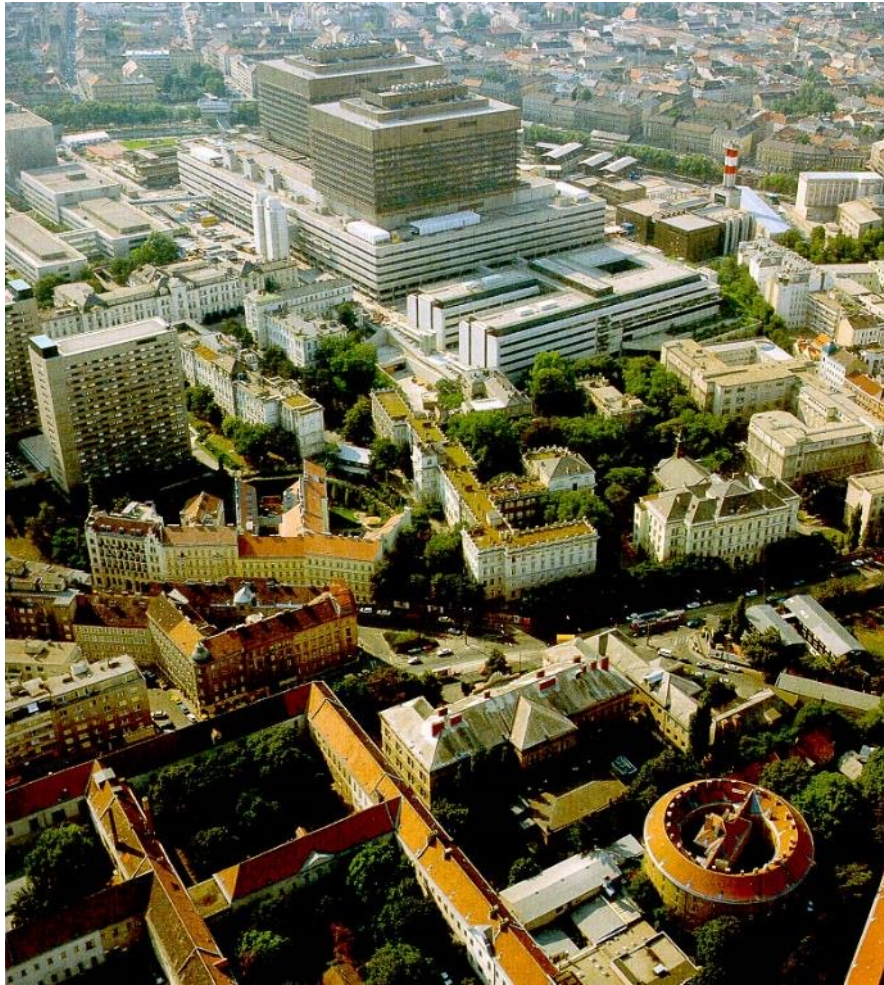
Luciano Adorini

Gilead, Foster City

Chuhan Chung
Rob Myers
William Barchuk

Dr. Falk Pharma, Freiburg

Markus Proels
Michael Stieß
Roland Greinwald



Thank you for
your attention!
michael.trauner@meduniwien.ac.at

Funding:

FWF

Der Wissenschaftsfonds.



LIPOTOX



VIENNA SCIENCE
AND TECHNOLOGY FUND

