

## Session 4 - Current research landscape in onchocerciasis Clinical research in onchocerciasis

Onchocerciasis Research Network and DND/stakeholder event October 3 - 4, 2018 Kampala, Uganda

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## Current treatment of onchocerciasis











#### ISRCTN50035143

Death to Onchocerciasis and Lymphatic Filariasis: Comparison of Ivermectin alone with Albendazole (ALB) plus Ivermectin (IVM) in their efficacy against Onchocerciasis

In total 272 Mf-positive participants, with at least one palpable onchocercoma were treated with either:

#### Annual treatment (0, 12, 24 months):

- 1) IVM 200µg/kg annually
- 2) IVM 200µg/kg plus ALB 800mg annually

#### Semi-annual treatment (0, 6, 12, 18, 24 months):

- 3) IVM 200µg/kg semi-annually
- 4) IVM 200µg/kg plus ALB 800mg semi-annually.







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## Palpable onchocercomata







## Surgical extirpation of onchocercomata (Nodulectomies)











Institute for Med. Microbiology, Immunology and Parasitology (IMMIP)



## Surgical extirpation of onchocercomata (Nodulectomies)

















## Hematoxylin and eosin (HE) staining





Normal embryogenesis



Degenerated embryogenesis

### **Evaluations**

- Nodules: nodule size; number & position of worms
- <u>Worms:</u> size, sex, age, morphology (hypodermis, cuticle), live / dead, sperms
  - <u>Female worms:</u> embryogenesis, microfilaria, uterus (embryonic stages)







Young worm (weak FE III)

Old worm (strong FE III)

#### **Evaluations**

• <u>Worms:</u> age







Live worm (APR positive, left)

Dead worm (APR negative, right)

#### **Evaluations**

- <u>Worms:</u> live / dead
  - <u>Dead worms</u>: calcification, resorption
  - <u>Live worms:</u> morphology, sperms, uterus possible (embryonic stages)



With a range of 55 - 59% the proportion of dead worms did not differ between the 4 groups.







Number of live and dead female worms per treatment group. 4group comparison p = 0.9198 (Proc Genmod, SAS<sup>®</sup>)



female worm fertility







Semiannual drug administration resulted in a sustained increase of MF negative individuals compared to annual treatment

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Semiannual drug administration resulted in a sustained increase of MF negative individuals compared to annual treatment

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Number of Mf-positive/ Mf-negative participants grouped for annual or semiannual treatment without taking the addition of ALB into acount

p = 0.024 (Fisher's exact test)







**Alternative treatment strategies** (ATS) are needed where community directed treatment with ivermectin (CDTI) is not sufficient because of:

- low treatment coverage
- areas co-endemic for loiasis
- suboptimal response

(WHO ATS-report 2015)







**Alternative treatment strategies** (ATS) are needed where community directed treatment with ivermectin (CDTI) is not sufficient because of:

- low treatment coverage
- areas co-endemic for loiasis
- suboptimal response
- $\rightarrow$  drugs with adulticidal activity

- Re-purposing of registered drugs

- Optimization of drug candidates
- Identification of novel
   drugs that target
   Wolbachia or have another
   mode of action







*O. volvulus* female from an untreated patient

*O. volvulus* female after 6 weeks of 100 mg/kg doxycycline

From: Hoerauf et al., Lancet 2000

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- Wolbachia depletion
- female worm sterility after 6-12 months
- growth retardation of the worms
- macrofilaricidal effects





#### Endosymbiotic bacteria in worms as targets for a novel chemotherapy in filariasis

Achim Hoerauf, Lars Volkmann, Christoph Hamelmann, Ohene Adjei, Ingo B Autenrieth, Bernhard Fleischer, Dietrich W Büttner

THE LANCET + Vol 355 + April 8, 2000

Newly acquired *Onchocerca volvulus* filariae after doxycycline treatment

Sabine Specht · Achim Hoerauf · Ohene Adjei · Alexander Debrah · Dietrich W. Büttner

> Parasitol Res (2009) 106:23–31 DOI 10.1007/s00436-009-1624-5

#### Depletion of wolbachia endobacteria in Onchocerca volvulus by doxycycline and microfilaridermia after ivermectin treatment

Achim Hoerauf, Sabine Mand, Ohene Adjei, Bernhard Fleischer, Dietrich W Büttner THE LANCET • Vol 357 • May 5, 2001

Doxycycline in the treatment of human onchocerciasis: kinetics of *Wolbachia* endobacteria reduction and of inhibition of embryogenesis in female *Onchocerca* worms



2003

Achim Hoerauf <sup>a,\*</sup>, Sabine Mand <sup>a</sup>, Lars Volkmann <sup>a</sup>, Marcelle Büttner <sup>a</sup>, Yeboah Marfo-Debrekyei <sup>b</sup>, Mark Taylor <sup>c</sup>, Ohene Adjei <sup>b,d</sup>, Dietrich W. Büttner <sup>a</sup>

> *Wolbachia* endobacteria depletion by doxycycline as antifilarial therapy has macrofilaricidal activity in onchocerciasis: a randomized placebo-controlled study

> Achim Hoerauf · Sabine Specht · Marcelle Büttner · Kenneth Pfarr · Sabine Mand · Rolf Fimmers · Yeboah Marfo-Debrekyei · Peter Konadu · Alexander Yaw Debrah · Claudio Bandi · Norbert Brattig · Anna Albers · John Larbi · Linda Batsa · Mark J. Taylor · Ohene Adjei · Dietrich W. Büttner

> > Med Microbiol Immunol (2008) 197:295–311 DOI 10.1007/s00430-007-0062-1

#### Efficacy of 5-week doxycycline treatment on adult *Onchocerca volvulus*

Achim Hoerauf • Sabine Specht • Yeboah Marfo-Debrekyei • Marcelle Büttner • Alexander Yaw Debrah • Sabine Mand • Linda Batsa • Norbert Brattig • Peter Konadu • Claudio Bandi • Rolf Fimmers • Ohene Adjei • Dietrich W. Büttner

> Parasitol Res (2009) 104:437–447 DOI 10.1007/s00436-008-1217-8

Doxycycline Leads to Sterility and Enhanced Killing of Female *Onchocerca volvulus* Worms in an Area With Persistent Microfilaridermia After Repeated Ivermectin Treatment: A Randomized, Placebo-Controlled, Double-Blind Trial

Alexander Yaw Debrah,<sup>1,2,a</sup> Sabine Specht,<sup>3,a</sup> Ute Klarmann-Schulz,<sup>3,4,a</sup> Linda Batsa,<sup>2</sup> Sabine Mand,<sup>3</sup> Yeboah Marfo-Debrekyei,<sup>2</sup> Rolf Fimmers,<sup>4</sup> Bettina Dubben,<sup>3</sup> Alexander Kwarteng,<sup>2</sup> Mike Osei-Atweneboana,<sup>5</sup> Daniel Boakye,<sup>6</sup> Arcangelo Ricchiuto,<sup>3,4</sup> Marcelle Büttner,<sup>7</sup> Ohene Adjei,<sup>8</sup> Charles D. Mackenzie,<sup>9</sup> and Achim Hoerauf<sup>3</sup>

CID 2015:61 (15 August)

Comparison of Doxycycline, Minocycline, Doxycycline plus Albendazole and Albendazole Alone in Their Efficacy against Onchocerciasis in a Randomized, Open-Label, Pilot Trial

Ute Klarmann-Schulz<sup>1,2,3</sup><sup>e</sup>, Sabine Specht<sup>1,4e</sup> \*, Alexander Yaw Debrah<sup>5,5e</sup>, Linda Batsa<sup>5</sup>, Nana Kwame Ayisi-Boateng<sup>7</sup>, Jubin Osei-Mensah<sup>5</sup>, Yusif Mubarik<sup>5</sup>, Peter Konadu<sup>8</sup>, Arcangelo Ricchiuto<sup>1</sup>, Rolf Fimmers<sup>2</sup>, Sandra Arriens<sup>1</sup>, Bettina Dubben<sup>1</sup>, Louise Ford<sup>9</sup>, Mark Taylor<sup>9</sup>, Achim Hoerauf<sup>1,3</sup>







#### Lymphatic filariasis

- DOX 200 mg/d for 6 weeks if benefit to disease is wanted in addition to macrofilaricidal effect
- DOX 200 mg/d for 4 weeks if focus is on the macrofilaricidal effect

Onchocerciasis

- DOX 200 mg/d for 6 weeks if macrofilaricidal effect is wanted
- DOX 200 mg/d for 4 weeks or 100 mg/d for 5 weeks if only worm sterility is wanted

Hoerauf, Curr Opin Infect Dis 2008, Taylor-Hoerauf-Bockarie Lancet 2010













ISRCTN68861628 DOI 10.1186/ISRCTN68861628

Comparison of doxycycline alone vs doxycycline plus rifampicin in their efficacy against

onchocerciasis

Randomised, placebo-controlled, double-blind trial 508 patients 5 treatment arms (Doxycycline 200mg/d and 100mg/d for 6 weeks) Nodulectomies after 6 and 20 months











Doxycycline 100mg for 6 weeks is as good as doxycycline 200mg for 6 weeks to achieve sterility of live female worms.



- Nodules without normal embryogenesis
- Nodules with normal embryogenesis

#### DOX 200 and DOX 100 for 6 weeks:

- Superiority to DOX + RIF for 3 weeks,
- Superiority RIF for 6 weeks
- Superiority to Placebo\*

#### DOX + RIF for 3 weeks:

- Superiority to RIF for 6 weeks
- Superiority to Placebo\*

\*alternating logistic regression taking the dependency of several nodules in one patient into account (Proc Genmod,SAS®) at an alphalevel of 0.0083 one-sided



## Wolbachia Surface Protein (WSP) staining

Many Wolbachia Many Wolbachia Few Wolbachia No Wolbachia

#### **Evaluations**

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> <u>Worms:</u> number of *Wolbachia* in worm and uterus, uterus possible (embryonic stages)







Both doxycycline regimens showed complete absence of *Wolbachia* by immunohistology in > 96% of the live female worms, corresponding to the antiparasitic effect.



#### DOX 200 and DOX 100 for 6 weeks:

Superiority to DOX + RIF for 3 weeks Superiority to RIF for 6 weeks Superiority to Placebo.\*

#### DOX + RIF for 3 weeks:

#### Superiority to RIF for 6 weeks\*

\*alternating logistic regression taking the dependency of several worms in one patient into account (Proc Genmod, SAS®) at an alpha-level of 0.0083 one-sided



### A-WOL ON





#### Histological analysis of *Wolbachia* was confirmed by nodule PCR









Doxycycline 100mg for 6 weeks is as good as doxycycline 200mg for 6 weeks to achieve sustained absence of microfilariae.



#### DOX 200 and DOX 100 for 6 weeks:

- Superiority to DOX + RIF for 3 weeks,
- Superiority to RIF for 6 weeks
- Superiority to Placebo.\*

#### DOX + RIF for 3 weeks

- Superiority to RIF for 6 weeks\*

\*Fisher's exact test



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PLOS NEGLECTED TROPICAL DISEASES 2017

RESEARCH ARTICLE

Comparison of Doxycycline, Minocycline, Doxycycline plus Albendazole and Albendazole Alone in Their Efficacy against Onchocerciasis in a Randomized, Open-Label, Pilot Trial

Ute Klarmann-Schulz<sup>1,2,3e</sup>, Sabine Specht<sup>1,4e</sup>\*, Alexander Yaw Debrah<sup>5,6e</sup>, Linda Batsa<sup>5</sup>, Nana Kwame Ayisi-Boateng<sup>7</sup>, Jubin Osei-Mensah<sup>5</sup>, Yusif Mubarik<sup>5</sup>, Peter Konadu<sup>8</sup>, Arcangelo Ricchiuto<sup>1</sup>, Rolf Fimmers<sup>2</sup>, Sandra Arriens<sup>1</sup>, Bettina Dubben<sup>1</sup>, Louise Ford<sup>9</sup>, Mark Taylor<sup>9</sup>, Achim Hoeraut<sup>1,3</sup>

# 156 patients5 treatment arms (Doxycycline 200mg/d for 4 weeks)Nodulectomies after 6 months







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#### PLOS | NEGLECTED | TROPICAL DISEASES 2017

#### RESEARCH ARTICLE

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These results confirm earlier studies that DOX 4w is sufficient for *Wolbachia* depletion and the desired parasitological effects.

The data further suggest that there is an additive/synergistic effect of ALB 3d on top of that of DOX 3w alone, and that MIN 3w has a stronger potency than DOX 3w. These latter two results are preliminary and need confirmation in a full randomized controlled phase 2 trial.



#### No difference between the 3 experimental regimens

All analyses were done using alternating logistic regression to correct for the possible dependency of the observation on several worms from one patient



## MF PCR (mouse model)





weeks post treatment [wpt]

Compound	Reduction % (median)
Experimental	-99.91 vs. VEH
DOX	-97.86 vs. VEH



## MF PCR (mouse model)







## MF PCR (human samples)



-validated method to detect Wolbachia FtsZ/ MF

-reproducible on different days by using the same or a different master-mix -currently limited to MF-counts > 5MF/sample





- After 1 course, ~70% (model-based) of treated individuals achieve death or permanent sterilization of all adult onchocerciasis worms
- All adults and children age ≥5 who are infected, excluding pregnant women
- Oral dose, once daily, up to 7 days (DNDi: 14 days) or single, intramuscular injection.
- One dosage for adults, and height-based dosing for children









## *L. sigmodontis* adult worm BALB/c WT mouse model:









"The efficacy of Rifapentine 900mg/d plus Moxifloxacin 400mg/d given for 14 or 7 days against Onchocerciasis – a randomized, controlled, parallel-group, open-label, phase II pilot trial."

In collaboration with:



#### Interventions\*:

Treatment A (experimental): Rifapentine + Moxifloxacin for 14 days Treatment B (experimental): Rifapentine + Moxifloxacin for 7 days

Treatment C (control): Doxycycline 200mg for 4 weeks

Treatment D (control): Nodulectomy only

\*All participants will be treated with ivermectin (IVM) at the standard MDA dosage of 150 µg/kg following the nodulectomies 6 months after study onset.

## Skin snipping (for Mf-counts/ Mf-PCR): pre-treatment, 3.5 months and 6 months after treatment onset

Nodulectomies: 6 months after treatment onset

**Primary outcome:** Absence of *Wolbachia* endobacteria in adult female worms assessed by immunohistology 6 months after treatment onset.





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### → Recruitment of patients for this trial starts this week



## Acknowledgements



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*External Collaborators:* Peter Konadu Mike Osei-Atweneboana



D.O.L.F DEATH TO OXCHOCERCIASIS AND LYNPHATIC FILAHIASIS

*CWRU:* Christopher L. King James Kazura

> *WUSTL:* Gary Weil Kerstin Fischer



Mark Taylor Steve Ward



Samuel Wanji





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Sabine Specht Ivan Scandale Rob Don Frederic Monnot



Dale Kempf Tom von Geldern Kennan Marsh Bob Carr Howard Morton









## Acknowledgements





# Thanks to all study participants and thanks for your attention!















#### Main outcome parameter:

	Onchocerciasis	Lymphatic Filariasis
<i>Wolbachia</i> depletion	<ul> <li>Histology of onchocercomata</li> <li>6 months after treatment onset</li> <li>Nodule PCR</li> <li>Mf PCR</li> </ul>	• Mf PCR
Fertility of adult female worms	<ul> <li>Histology of onchocercomata</li> <li>20 months after treatment</li> <li>onset</li> </ul>	
Macrofilaricidal activity	<ul> <li>Histology of onchocercomata</li> <li>20 months after treatment</li> <li>onset</li> </ul>	<ul> <li>Filarial Dance Sign (FDS assessed by ultrasonography)</li> <li>Circulating Filarial Antigen (Filarial test strip (FTS), ICT, Og4C3-Elisa)</li> </ul>
Microfilariae (Mf)	Skin snips	Night blood



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Microfilariae (Mf)	Skin snips	Night blood

## $\rightarrow$ Onchocerciasis