



Dr. Jesus Rocca nacion  
Endocrinólogo  
2015



# ENFERMEDAD HEPÁTICA GRASA ENFOQUE ACTUAL

Obesidad

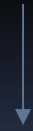


Resistencia a la Insulina

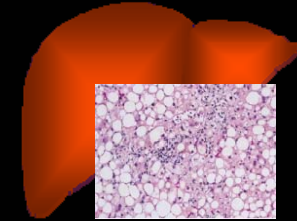


**Sd. de Resistencia a la Insulina  
(Sd. Metabólico)**

Prediabetes



DM 2



Enfermedad Hepática Grasa

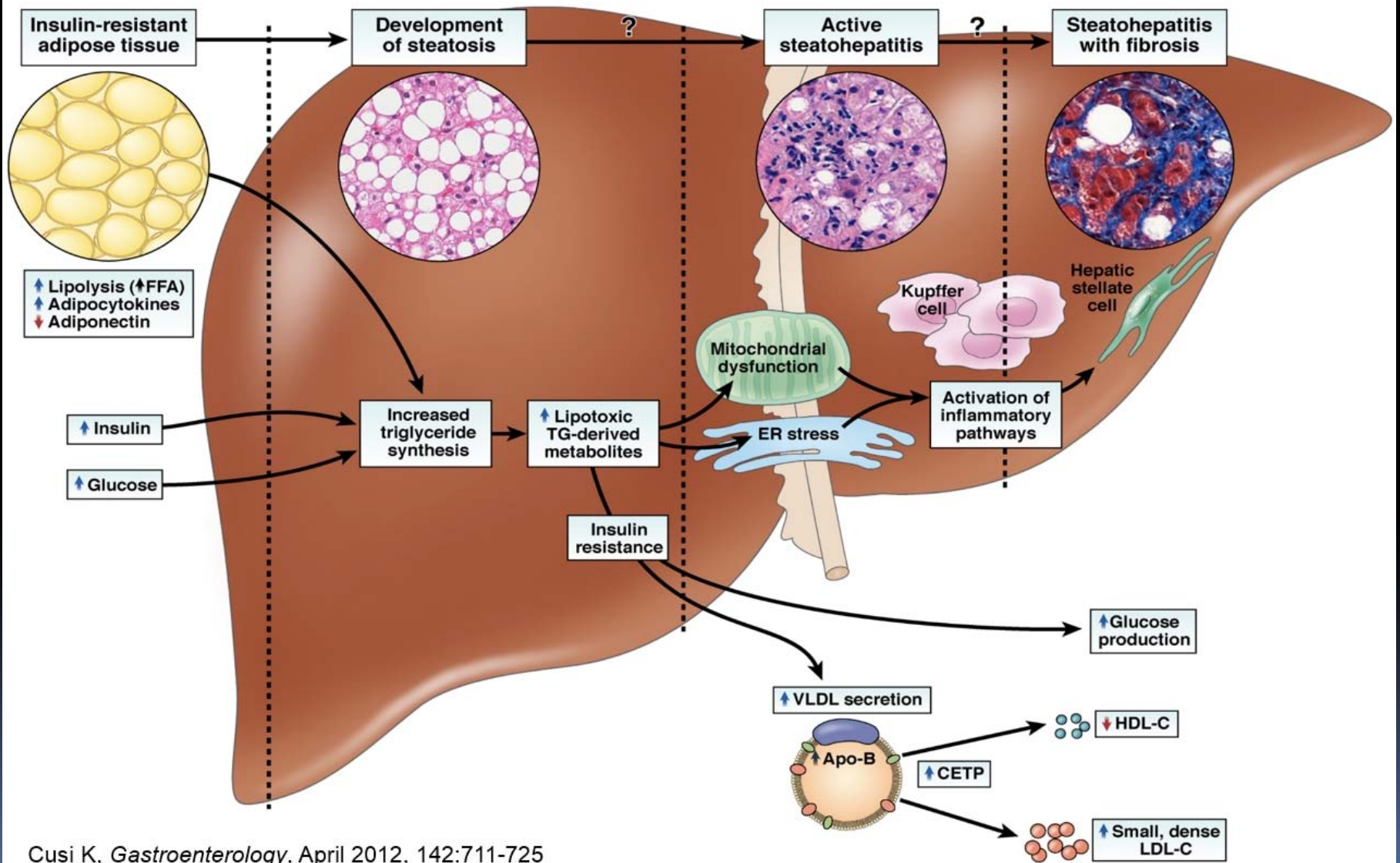


SOP



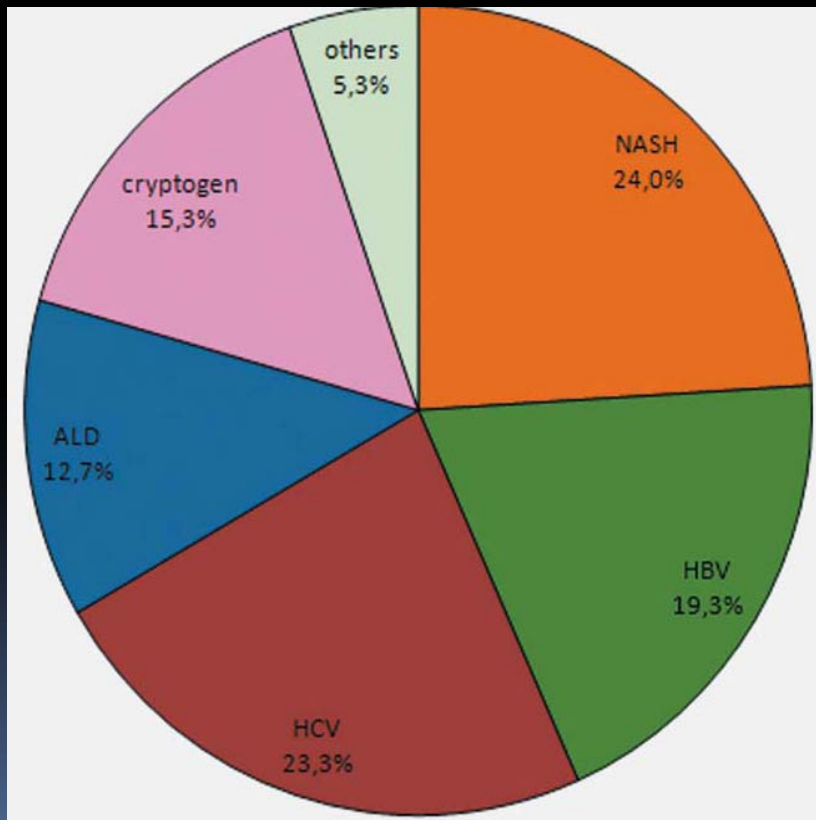
Aterosclerosis

# From Obesity/Lipotoxicity to NASH and Cirrhosis

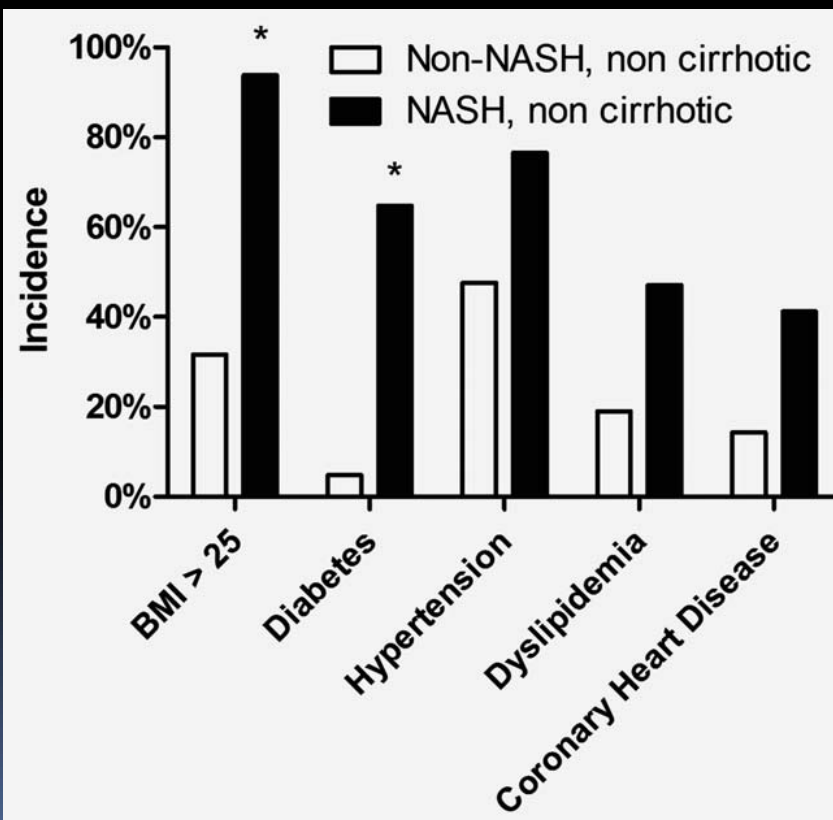


# Cáncer Hepático y Enfermedad Hepática Grasa

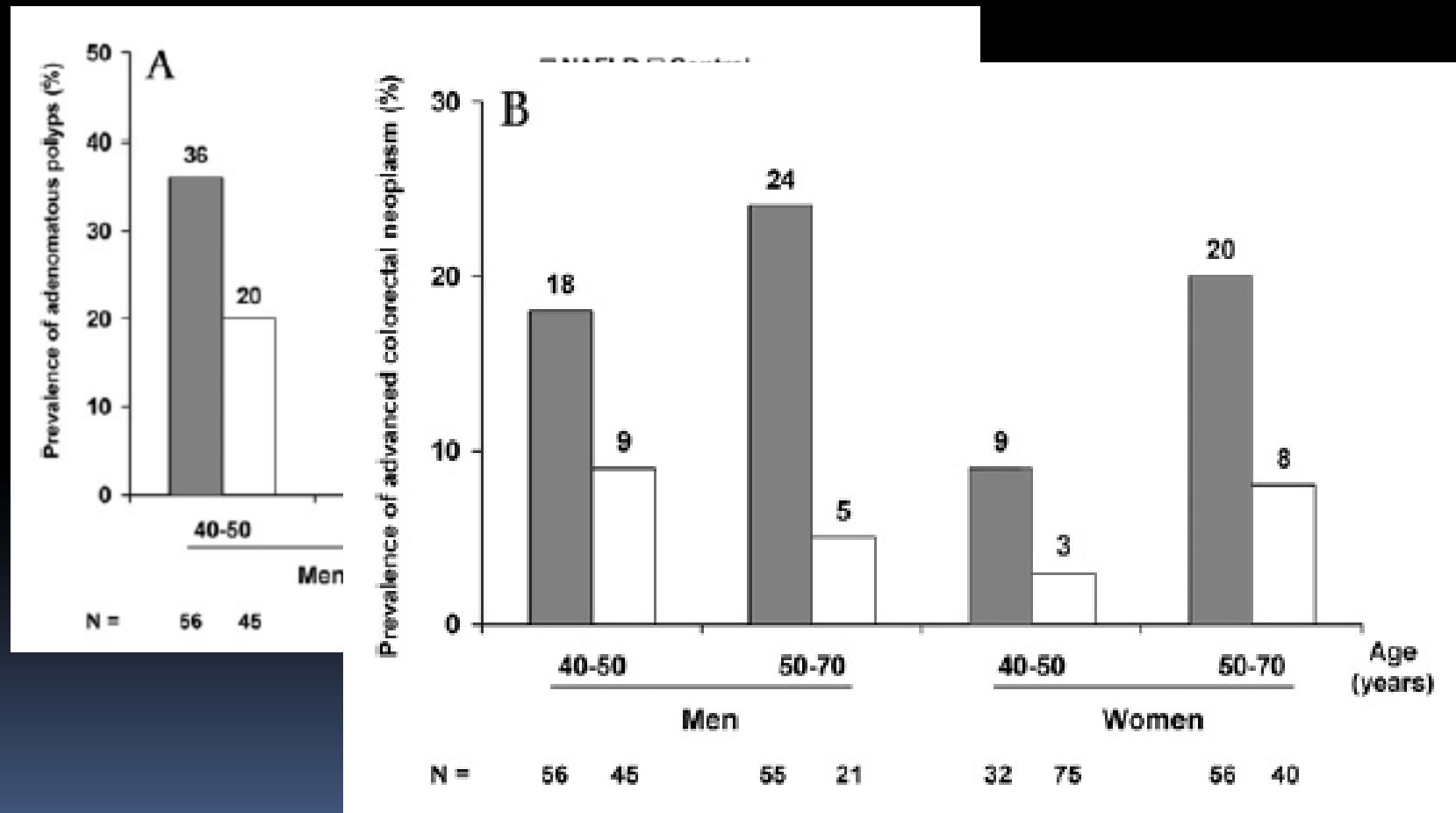
## Etiología del Carcinoma Hepatocelular



## Incidencia de Sd. Metabólico con Carcinoma Hepatocelular No Cirrótico

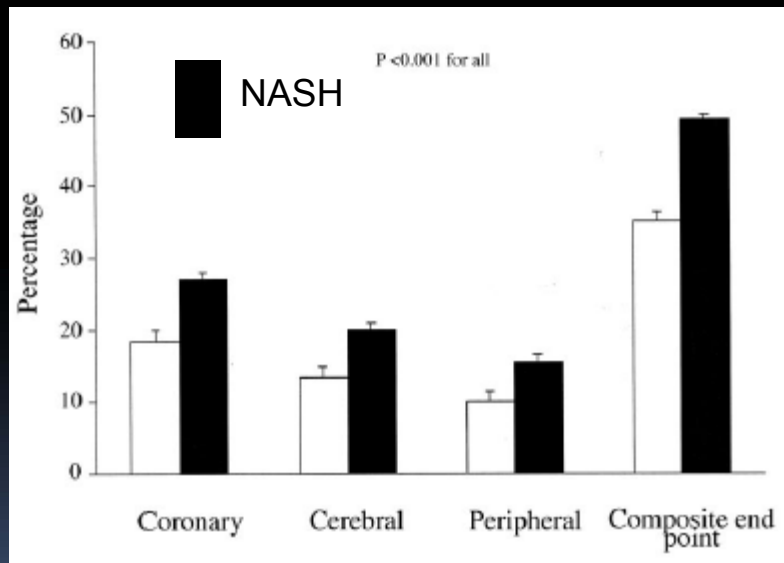


# Alta Incidencia de Neoplasias Colorrectales en Pacientes con EHGNA

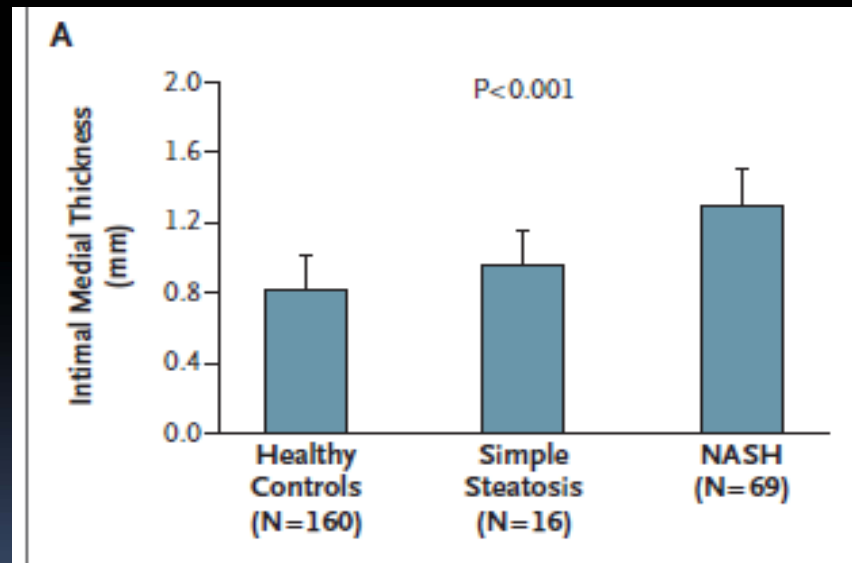


# Incremento del Riesgo CV en Pacientes con NASH

## ECV en DM2 con o sin NASH

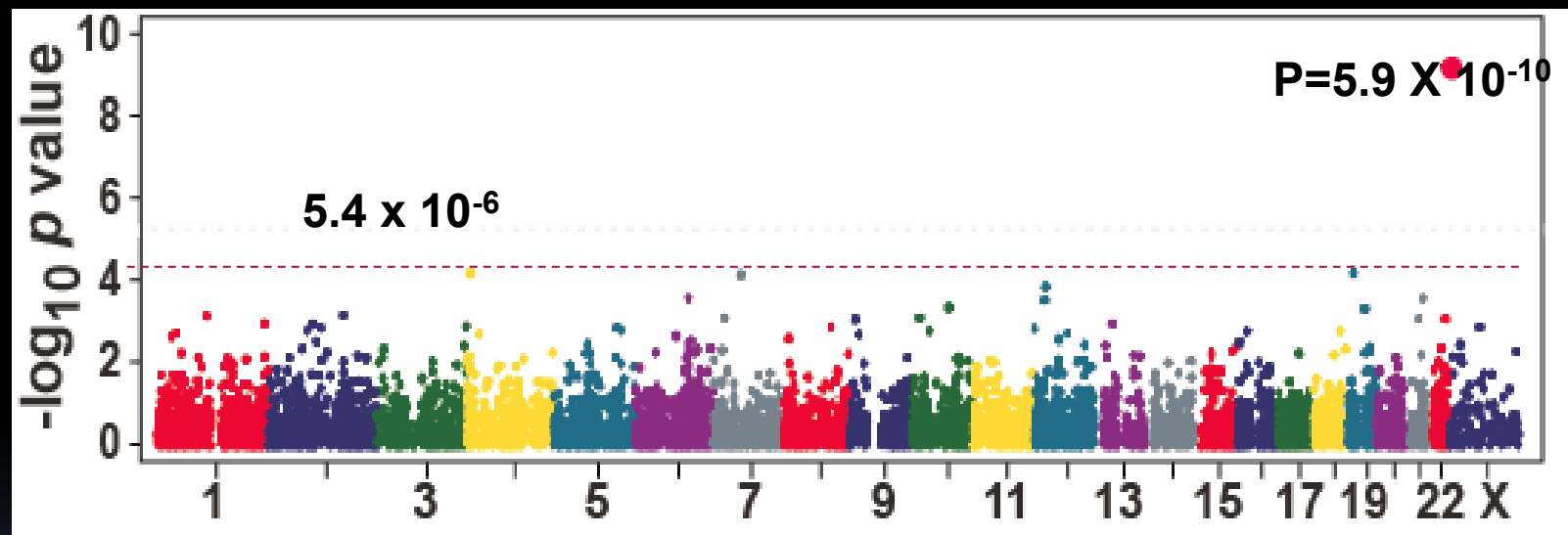


## Engrosamiento de la Intima Media Carotídea en NASH



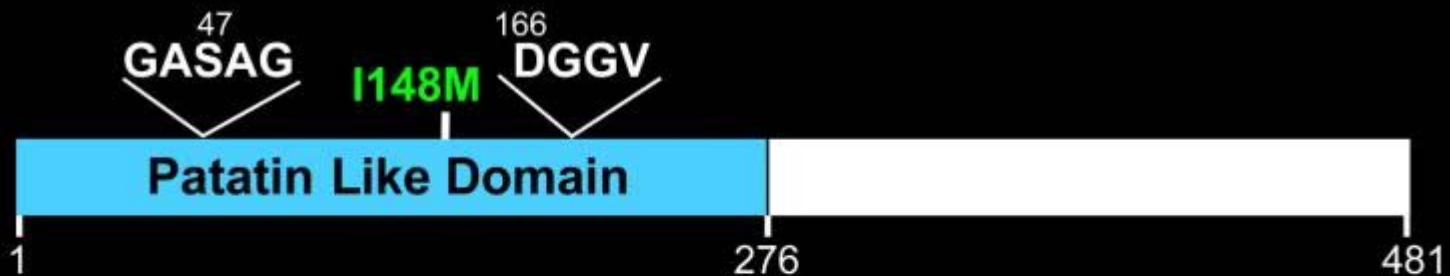
# Genome-wide Association Study of Fatty Liver in Dallas Heart Study Cohort

(2,111 patients and 9,299 Non-synonymous SNPs)



**Chromosome**

# PNPLA3: A Member of the Patatin-like Phospholipase Family



- Resembles patatin: major potato protein
- Nonspecific lipase activity (breaks down fat)
- Expressed high level in fat & liver
- Increased with feeding

Baulande *et al.* *JBC* 276:33336, 2001

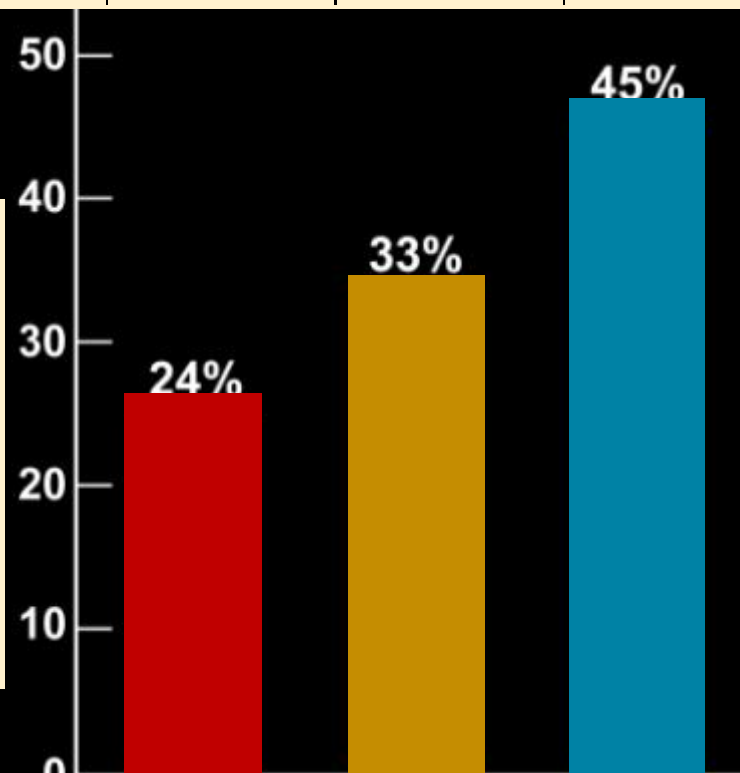
Jenkins *et al.* *JBC* 279:48968, 2004

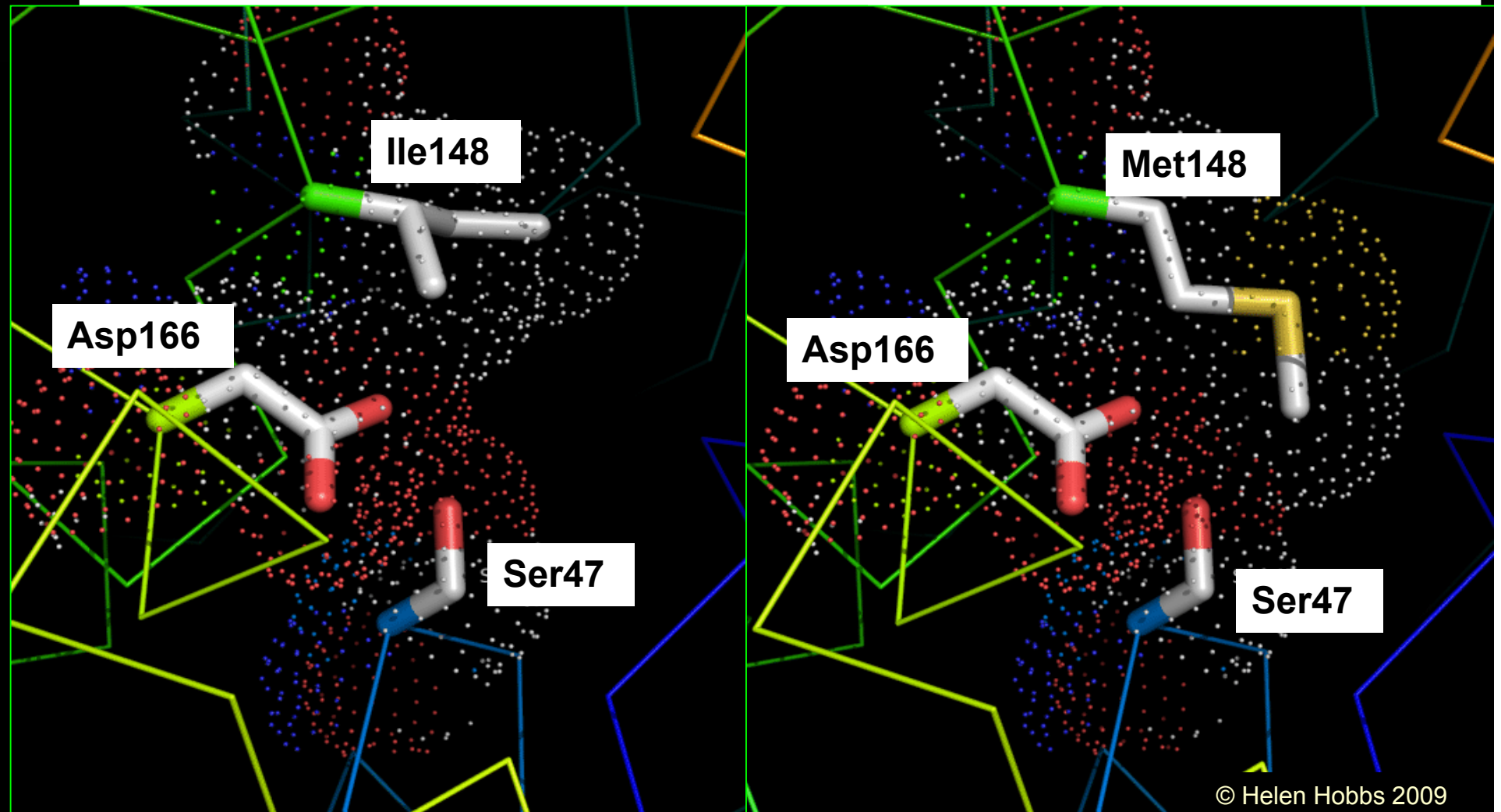


# Genetic Contribution to Ethnic Differences in Hepatic Steatosis

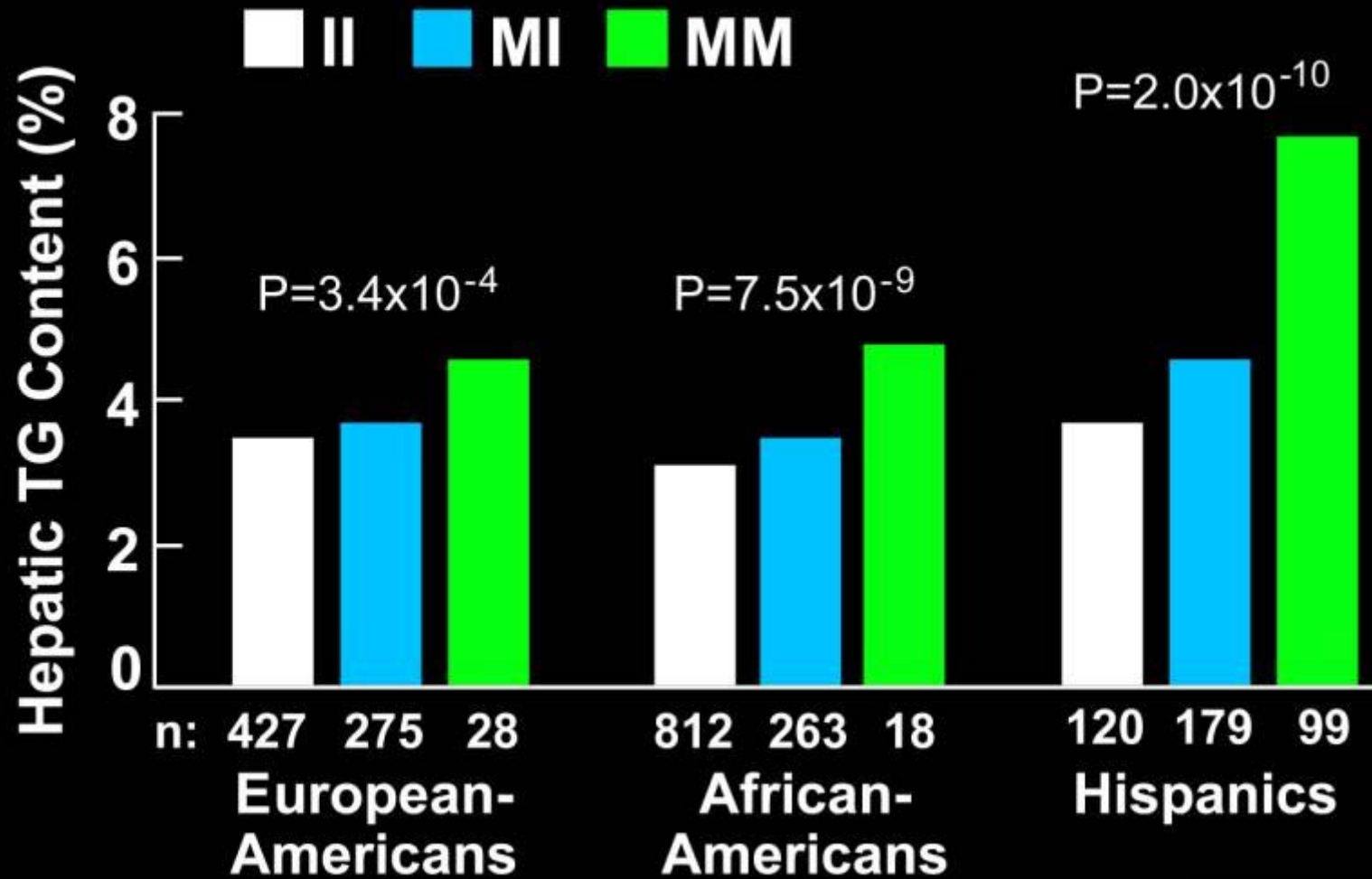
	African-Americans	European-Americans	Hispanics
Minor Allele Frequency	0.17	0.23	0.49

Prevalence of  
Hepatic Steatosis  
(%)





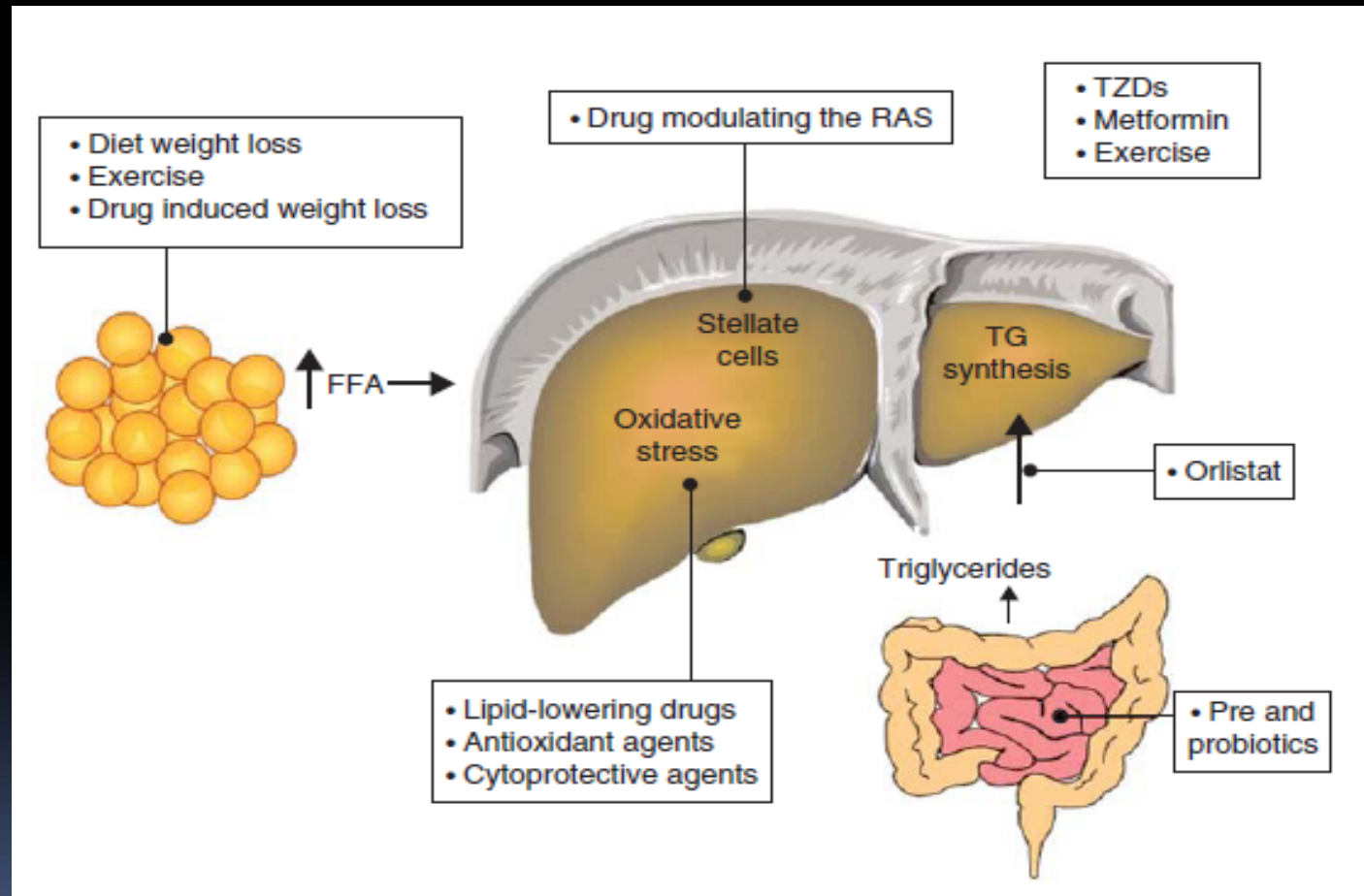
# PNPLA3: I148M Genotype and Hepatic Triglyceride Content



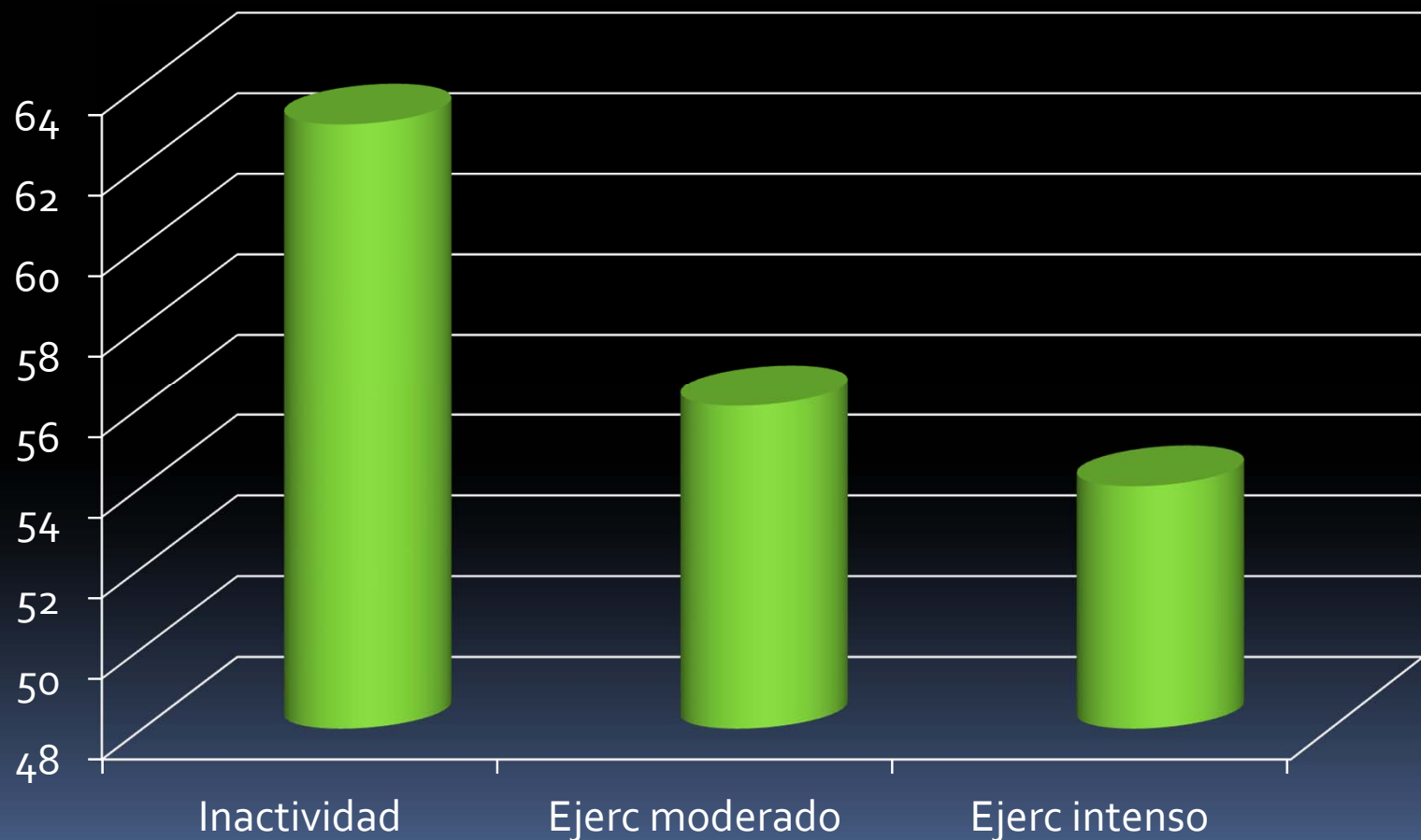
# ENFERMEDAD HEPÁTICA GRASA



# Intervenciones Terapéuticas en la Enfermedad Hepática Grasa



# Relación Entre Intensidad del Ejercicio y NASH



Kistler. Am J of Gastroenterology, 106, 2011



# New Drugs under Development (I)

Company	Drug	MoA	RoA	Phase
PharmaKing	Oltipraz	Fatty acid inhibitor	Oral	Phase 2
Novartis	Pradigastat	DGAT1 inhibitor	Oral	Phase 2
Therapix	TRX 318	CD3 antigen	Oral	Phase 2
Takeda	Roflumilast	PDE-4	Oral	Phase 2
Antipodean	Mitoquinone	Antioxidant	Oral	Phase 2
KT&G Life Sciences	MB 11055	AMPK stimulant	Undefined	Phase 2
Naia	NC 101	Undefined mechanism	Undefined	Phase 2
Galectin	GR MD 02	Galectin-3	IV and SubQ	Phase 1
Kadmon	KD 025	ROCK2 inhibitor	Oral	Phase 1
Phenex	PX 102	FXR agonist	Oral	Phase 1
Shire	SHP 626	ASBT inhibitor	Oral	Phase 1
Direct	DUR-928	Undefined small molecule	Oral	Phase 1
Daewoong	DWP-10292	Undefined small molecule	Oral	Phase 1
Gilead	GS-4997	ASK1 inhibitor	Oral	Phase 1
TaiwanJ	JKB-121	TLR-4 antagonist	Oral	Phase 1
Madrigal	MGL-3196	THR beta agonist	Oral	Phase 1
Virobay	VBY-376	Cathepsin B inhibitor	Oral	Phase 1
La Jolla	LGPC-1010	Galectin-3	Oral	Preclinical

## New Drugs under Development (II)

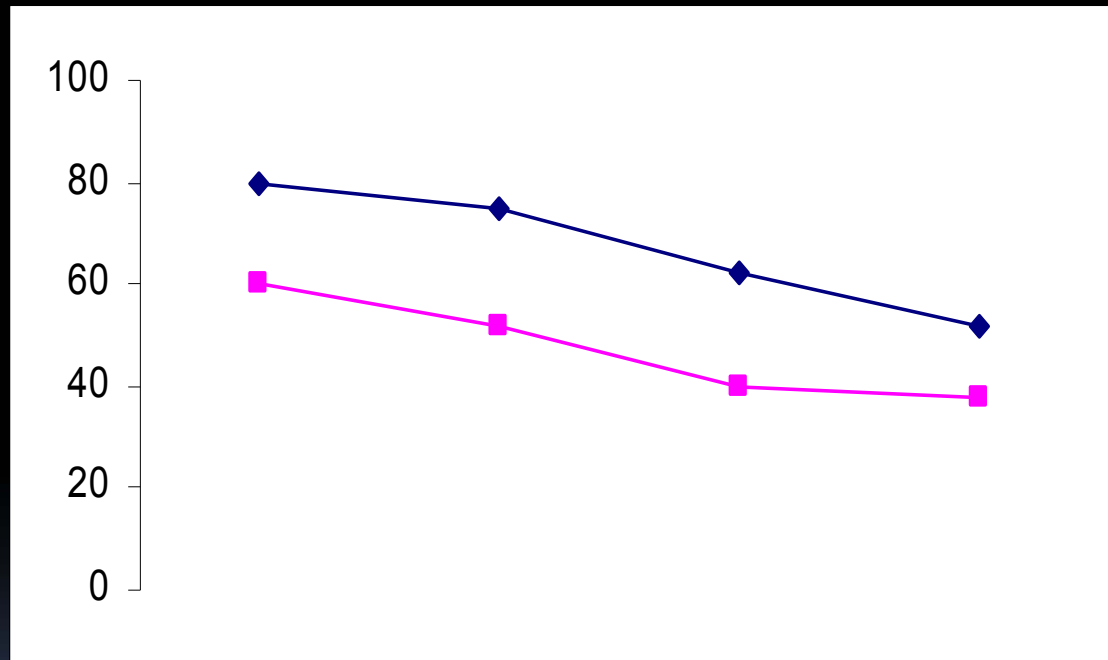
Company	Drug	MoA	RoA	Phase
Raptor	RP103	Antioxidant - cysteine depleting agent	Oral	Phase 3
Zydus-Cadila	Saroglitazar	PPAR agonist	Oral	Phase 3
Novo Nordisk	liraglutide	GLP-1	SubQ	Phase 2
Takeda	Pioglitazone	PPAR agonist	Oral	Phase 2
Islet Sciences	remogliflozin etabonate	SGLT-2 inhibitor	Oral	Phase 2
Aptalis Pharma	Ursodeoxycholic acid	Bile acid	Undefined	Phase 2
Gilead	Simtuzumab	LOXL2 antibody	IV and SubQ	Phase 2
Conatus	Emricasan	Caspase protease inhibitor	Oral	Phase 2
Galmed	Aramchol	Synthetic fatty acid/ bile acid conj	Oral	Phase 2
Tobira	Cenicriviroc	Dual CCR2/CC5 antagonist	Oral	Phase 2
Genfit	GFT 505	PPAR alpha/delta agonist	Oral	Phase 2
Intercept	OCA	FXR agonist	Oral	Phase 2
Phenex	PX 104	FXR agonist (non bile acid)	Oral	Phase 2
Mochida	icosapent ethyl ester	Caspase protease inhibitor	Oral	Phase 2
Immuron	IMM 124E	Immunomodulators	Oral	Phase 2
KT&G Life Sciences	MB 12066	Sirtuin stimulants	Oral	Phase 2



# Nuevos Agentes Potenciales para el Tratamiento de la EHGNA

Benefit	Agent	Comment
Potential benefit	Pioglitazone Vitamin E	Improves components of the NAS score [12]. Increased risk of bladder cancer and MI [13,14]. Significant improvement in histological lesions [12]. However, may increase all-cause mortality [15].
No clear benefit	Metformin Statins Atorvastatin Simvastatin UDCA PUFAs	No effect on histology [16,17]. No histological data, but improves liver enzymes and radiological steatosis [18,19]. No effect on histology or liver enzymes [20]. Histological data lacking, four RCTs showed no effect on liver enzymes [21]. No histological improvement in activity [22], but reduction in steatosis radiologically [23].
Unclear benefit	Angiotensin receptor blockers Pentoxifylline	Improvements in histology (necroinflammation and fibrosis) but study limited to seven patients [24]. Improvement in NASH activity score, but not in fibrosis stage. Study limited to 55 patients [25].

# Metformina y Enzimas Hepática en pacientes con NASH



Metformina (850 mg bid) en pacientes con NASH.  
Seguimiento por 6 meses.

	Pacientes	Duración	N	Dosis Metformina	Hallazgos
1	NAFLD confirmado histologicamente	1 año	15	mg/kg	Pruebas de función hepáticas.
2	NASH Confirmado Histologicamente	6 m	7	1500 mg/d	Normalización de TGP
3	NASH	4 m	20	1500 mg/d	Normalización de Pruebas De función hepática. Disminucion del volumen Hepático.
4	NASH Confirmado Histologicamente	48 s	10	2000 mg/d	Mejora de los parámetros De función hepática.
5	NASH Confirmado Histologicamente < 18 años	24 s	10	1000 mg/d	Mejora de Pruebas de Función hepatica en 40-50 %, sensibilidad a la Insulina y calidad de vida.

1 Alimentary Pharmacol and Therap 2004,20,23-29

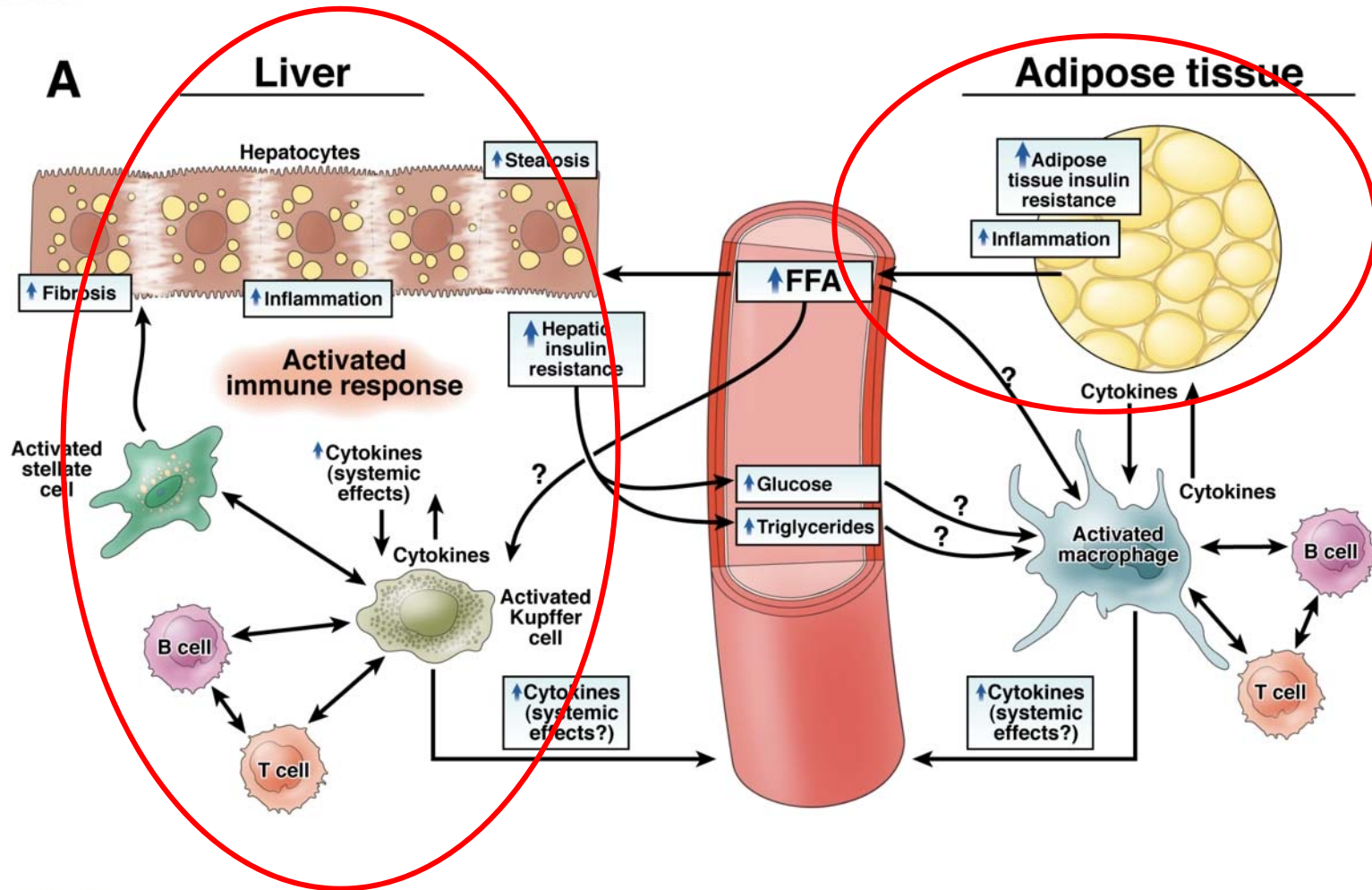
2 Indian Journal of Gastroenterol 2004, 23,12-15

3 Lancet 2001, 358,893-894

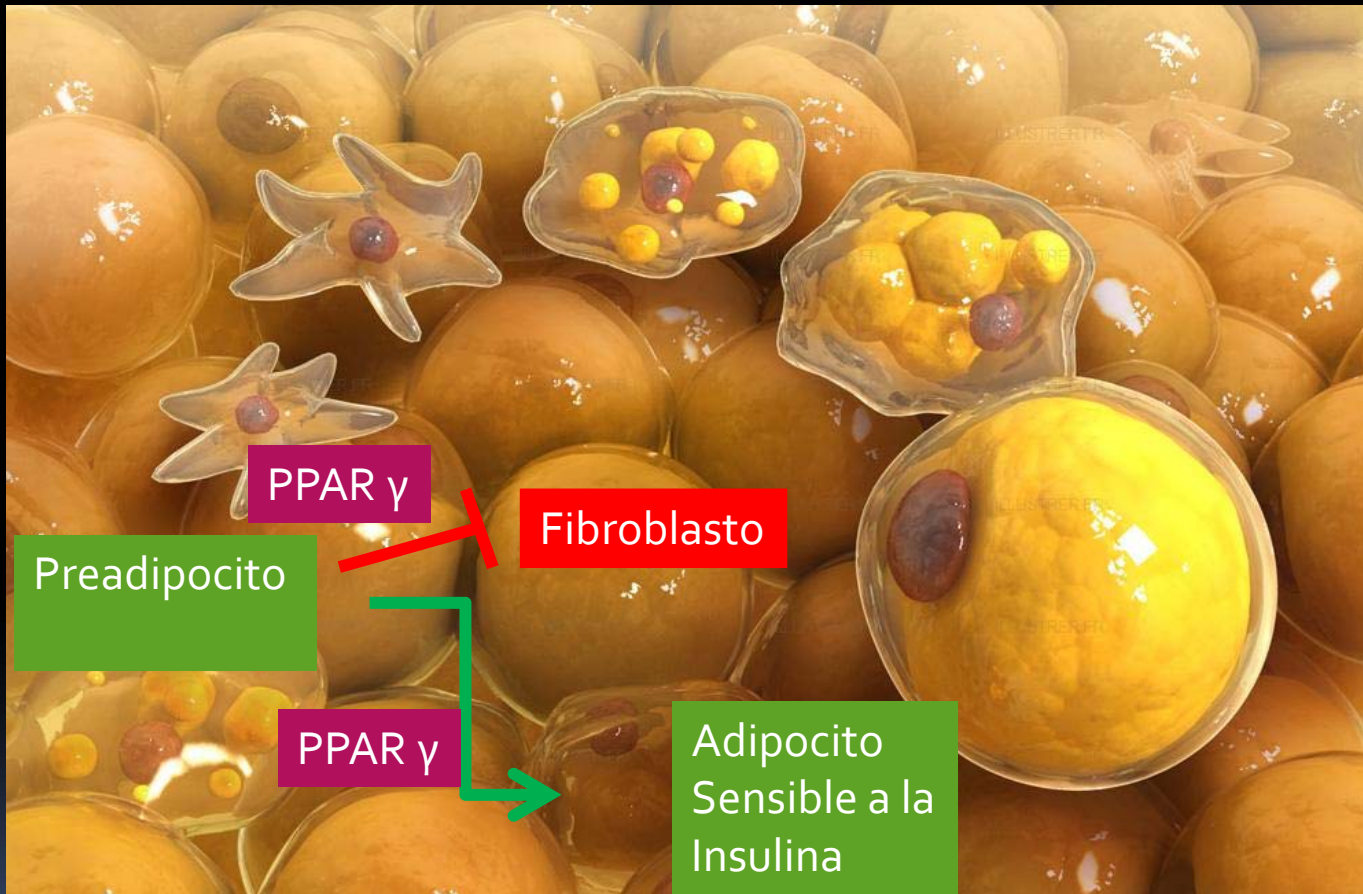
4 Gastroenterology 2005,128:A-769

5 Therapeutics 2005,21:871-879

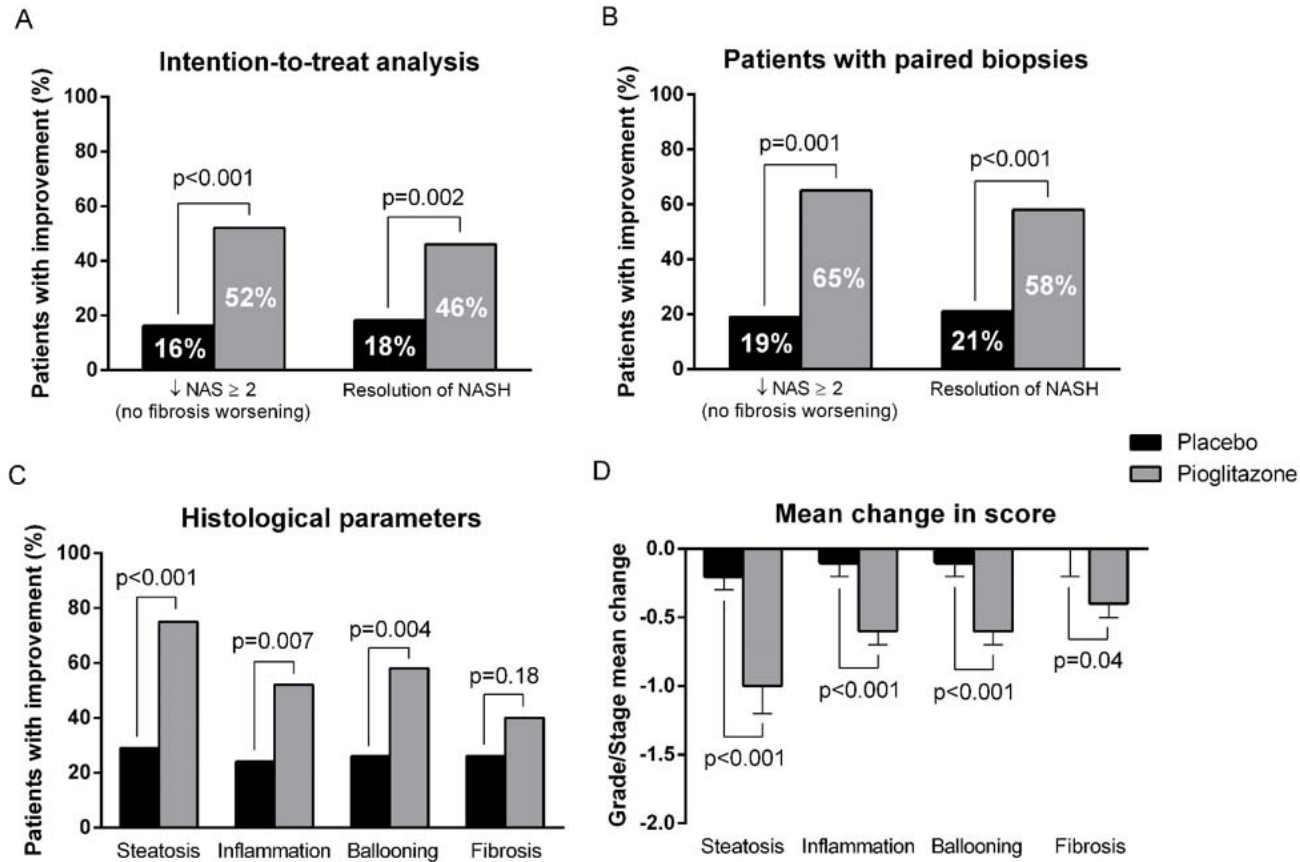
# Rationale for Pioglitazone in NASH



# Transdiferenciación del Adipocito



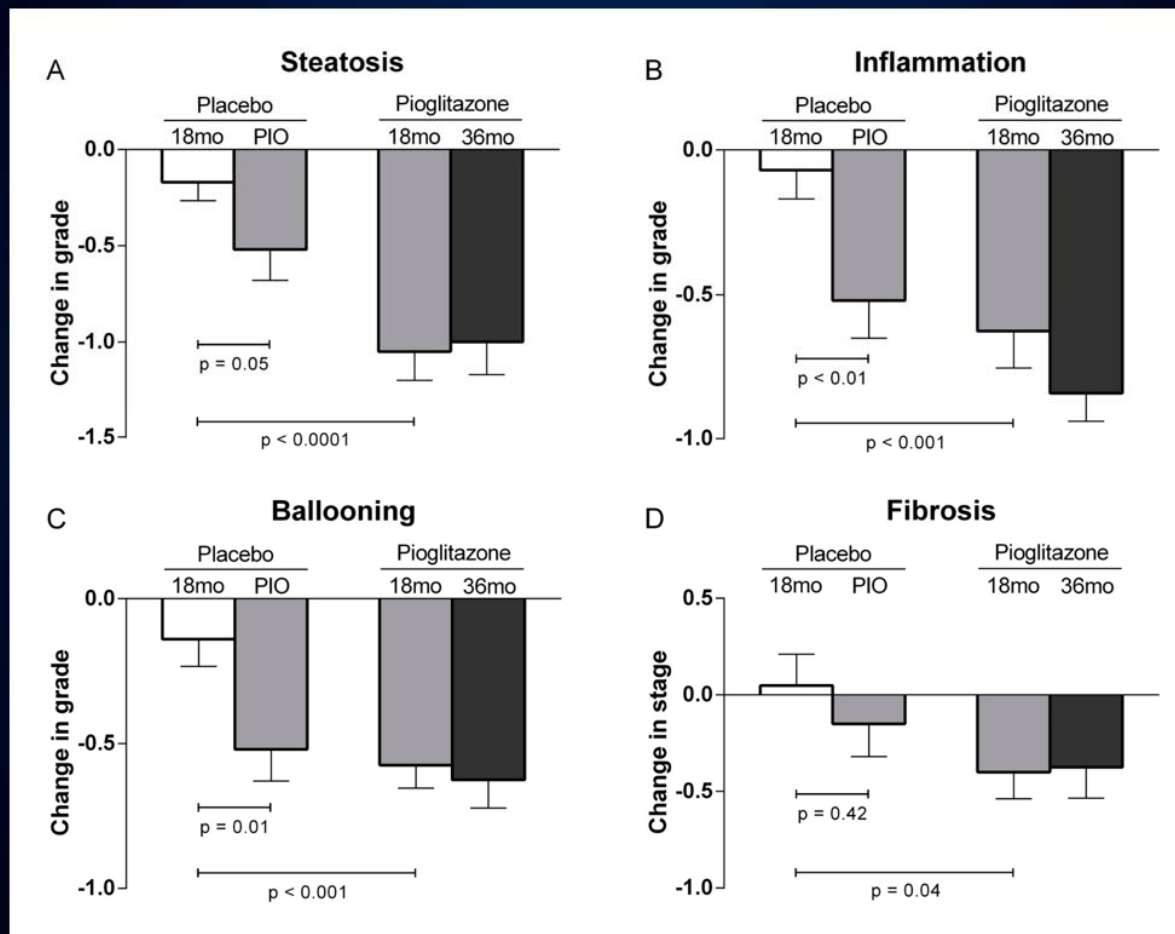
# Effect of Pioglitazone on Primary Outcome\*



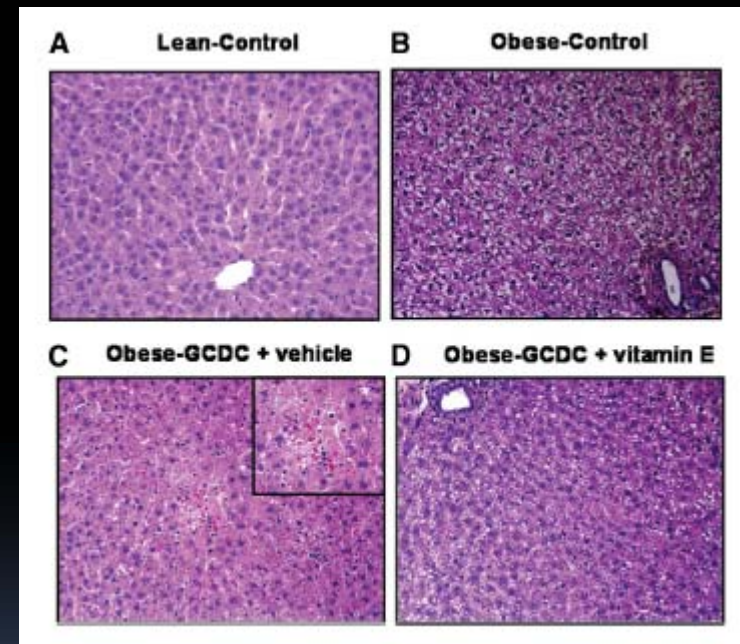
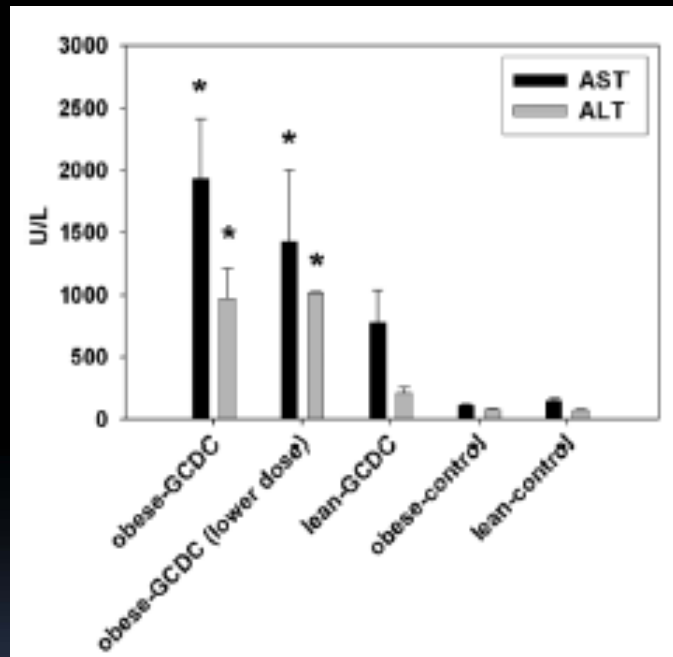
\* Defined as patients with a  $\geq 2$ -grade reduction in NAS (in at least 2 different categories), and without worsening of fibrosis (%). Intention-to-treat analysis considers non-completers as non-responders.



## Effect of Pioglitazone on Primary Outcome\*



# Alfa Tocoferol y EHGNA en Ratas



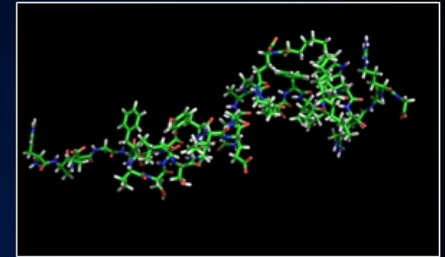


# Pioglitazona vs Vitamina E

**Table 2.** Primary Outcome and Changes in Histologic Features of the Liver after 96 Weeks of Treatment.

Variable	Placebo	Vitamin E	Pioglitazone	P Value*	
				Vitamin E vs. Placebo	Pioglitazone vs. Placebo
<b>Primary outcome†</b>					
No. of subjects randomly assigned	83	84	80		
Subjects with improvement (%)	19	43	34	0.001	0.04
<b>Changes from baseline in histologic features</b>					
No. of subjects with biopsy specimens at baseline and 96 wk	72	80	70		
<b>Steatosis</b>					
Subjects with improvement (%)	31	54	69	0.005	<0.001
Mean change in score	-0.1	-0.7	-0.8	<0.001	<0.001
<b>Lobular inflammation</b>					
Subjects with improvement (%)	35	54	60	0.02	0.004
Mean change in score	-0.2	-0.6	-0.7	0.008	<0.001
<b>Hepatocellular ballooning</b>					
Subjects with improvement (%)	29	50	44	0.01	0.08
Mean change in score	-0.2	-0.5	-0.4	0.03	0.01
Total NAFLD activity score (mean change)	-0.5	-1.9	-1.9	<0.001	<0.001
<b>Fibrosis‡</b>					
Subjects with improvement (%)	31	41	44	0.24	0.12
Mean change in score	-0.1	-0.3	-0.4	0.19	0.10
Resolution of definite nonalcoholic steatohepatitis (% of subjects)	21	36	47	0.05	0.001

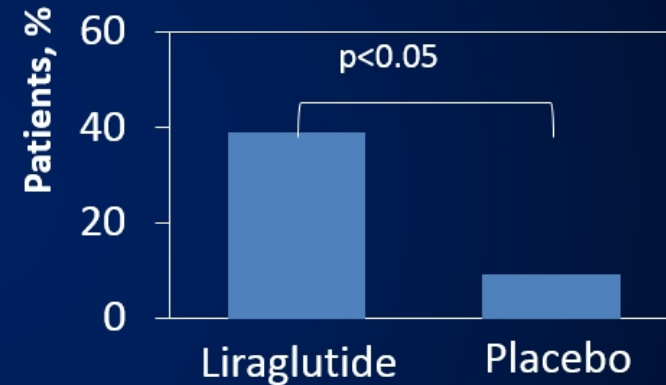
# Liraglutide (Victoza®) in NASH



## Baseline characteristics

Characteristics	Liraglutide (n=23)	PBO (n=22)
Mean (SD) NAS	4.9 (0.9)	4.8 (0.9)
Mean (SD) Kleiner fibrosis	2.3 (0.9)	2.3 (1.3)
F0-2, n (%)	14 (54%)	11 (42%)
F3-4, n (%)	12 (46%)	15 (58%)

## Primary endpoint: NASH resolution with no worsening of fibrosis



## Secondary endpoints

Endpoint	Liraglutide (n=23)	PBO (n=22)
Mean (SD) change, Kleiner fibrosis	-0.2 (0.8)	0.2 (1.0)
Improvement, n (%)	6 (26.1)	3 (13.6)
Worsening, n (%)	2 (8.7)*	8 (36.4)

\*p<0.05 vs placebo

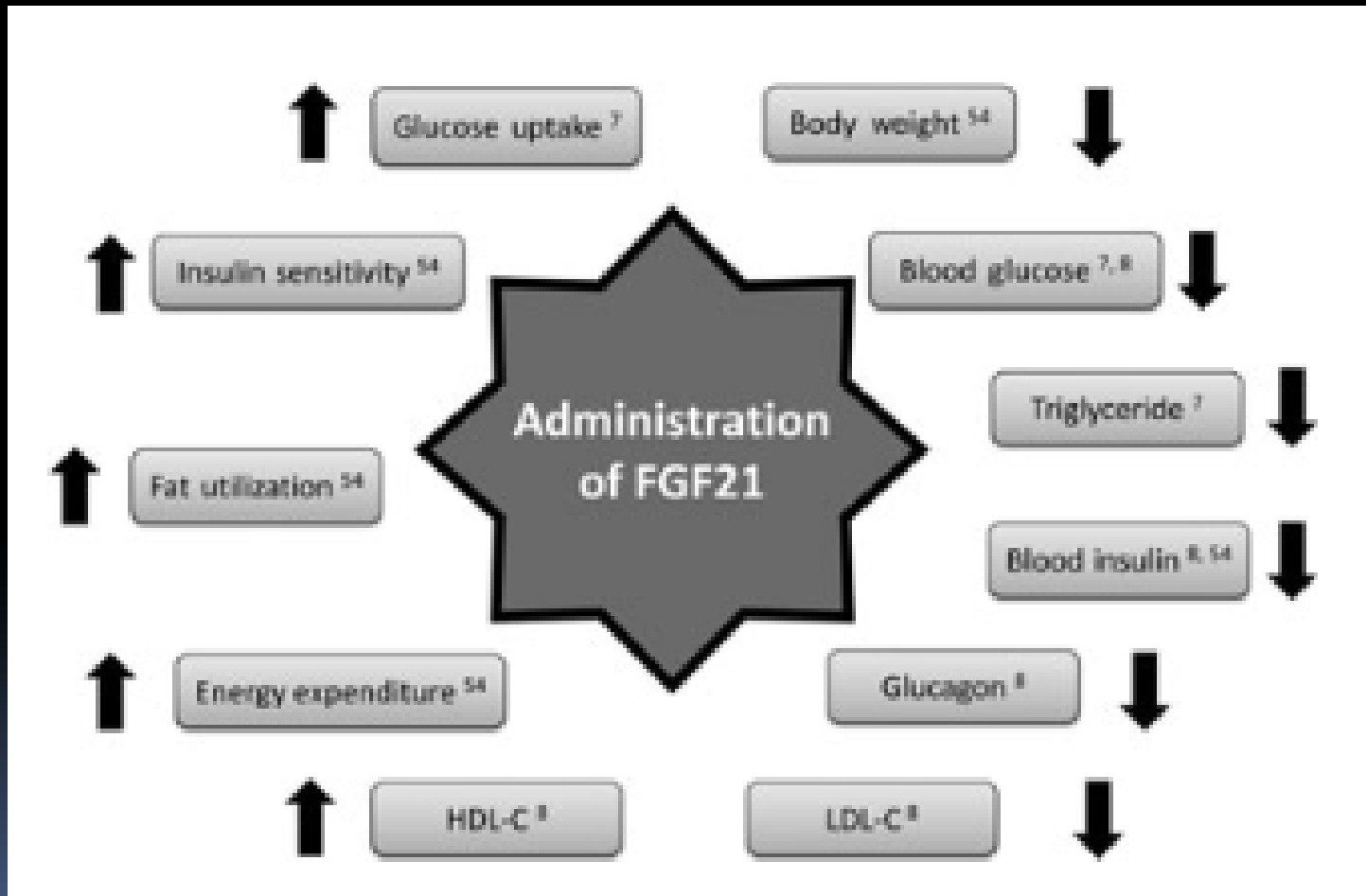


¿Qué  
Tratamientos  
Futuros  
Se esperan para  
la EHGNA?

# Nuevos Agentes en Investigación para el Tratamiento de la EHGNA

Agent	Action	Effect on NASH pathogenesis	ClinicalTrials.gov identifier
GS-9450	Caspase inhibition	Prevents apoptosis	NCT00740610 [59]
GFT-505	Dual PPAR $\alpha$ / $\delta$ agonist	Hepatic glucose utilization, lipoprotein metabolism and anti-inflammatory effects	NCT01694849 [60]
Obeticholic acid	FXR agonist	Promotes insulin sensitivity, decreases hepatic gluconeogenesis and circulating triglycerides	NCT01265498 [61]
Cenicriviroc	CCR2/CCR5 antagonist	Interferes with recruitment of monocytes, macrophages and HSCs upon liver injury	NCT02217475 [62]
Liraglutide	GLP-1 agonist	Induces insulin secretion, reduces glucagon secretion	NCT01237119 [63]
Sitagliptin	DPP-IV inhibitors	Prevents degradation of GLP-1	NCT01963845 [64]
GS-6624 (simtuzumab)	Anti-LOXL-2 antibodies	Inhibits formation and repair of extracellular matrix	NCT01672879 [65]/ NCT01672866 [66]

# Factor de Crecimiento Fibroblástico 21

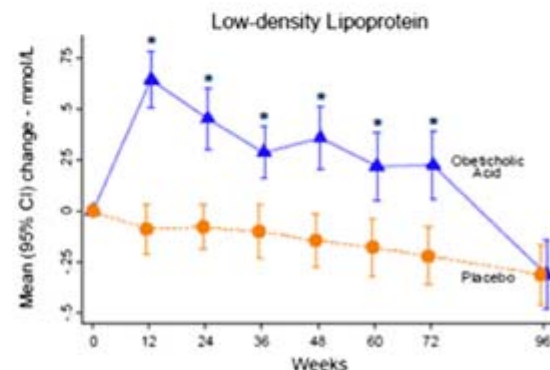
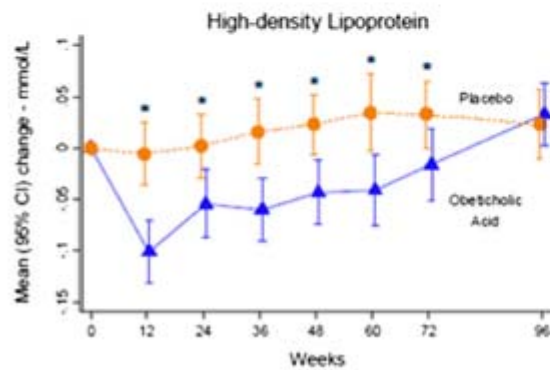
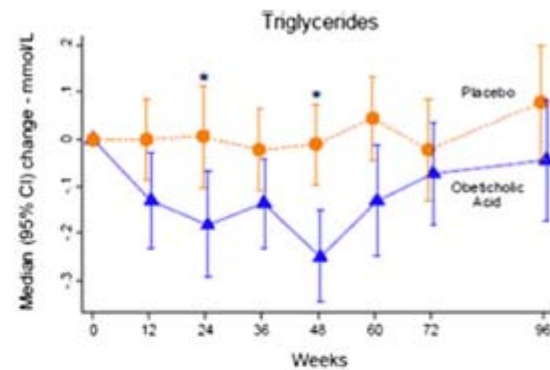
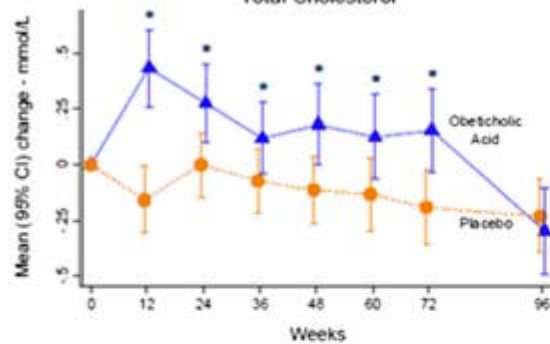


# Agonistas del Receptor Farnesoide X

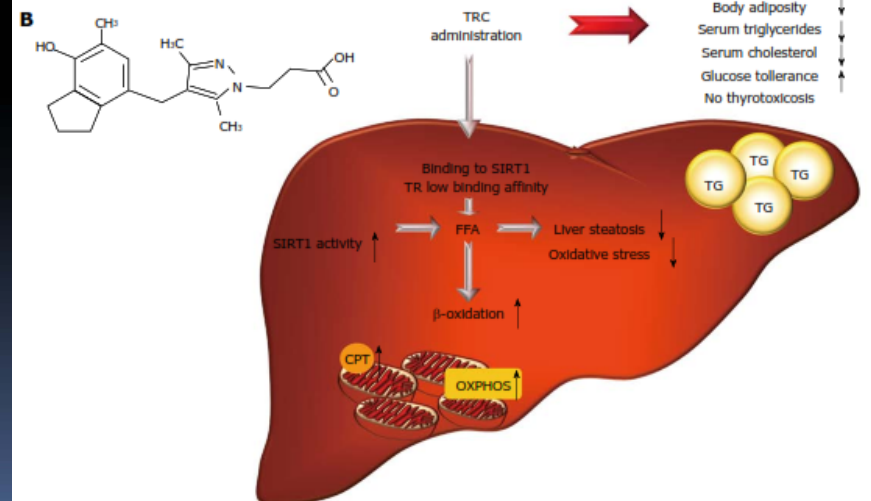
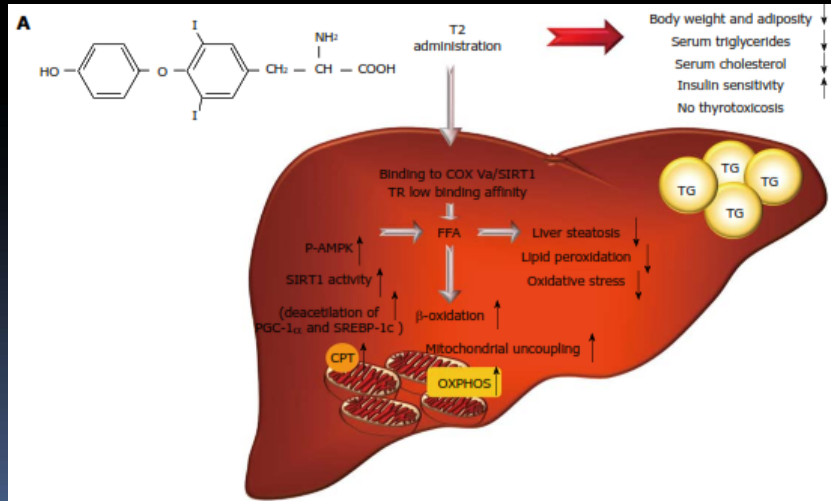
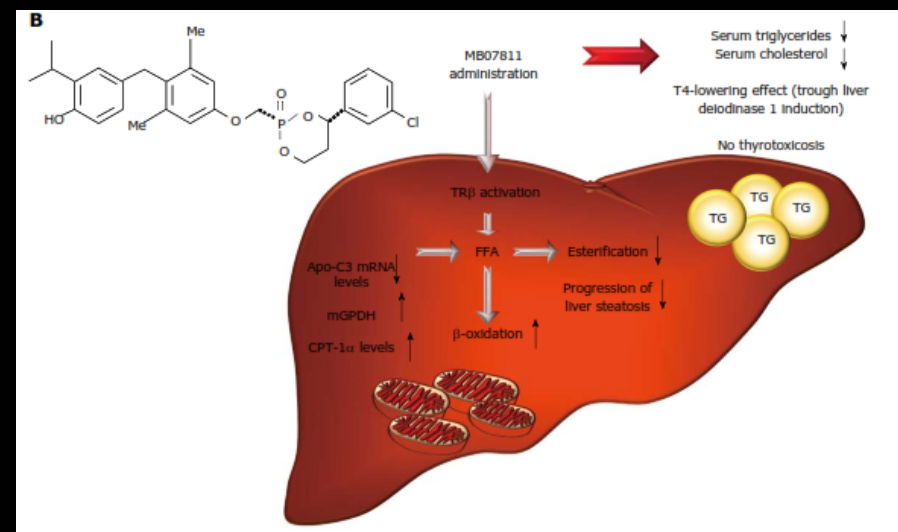
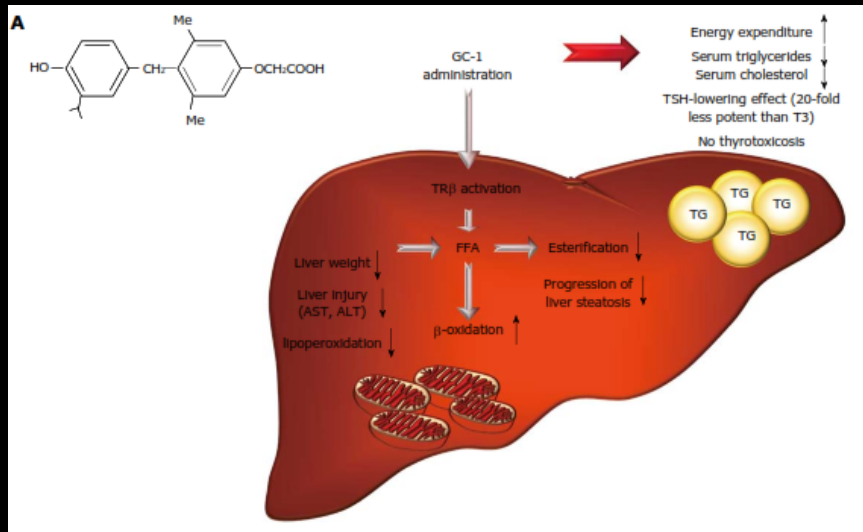
## FXR Agonists

Diet, weight loss  
TZDs

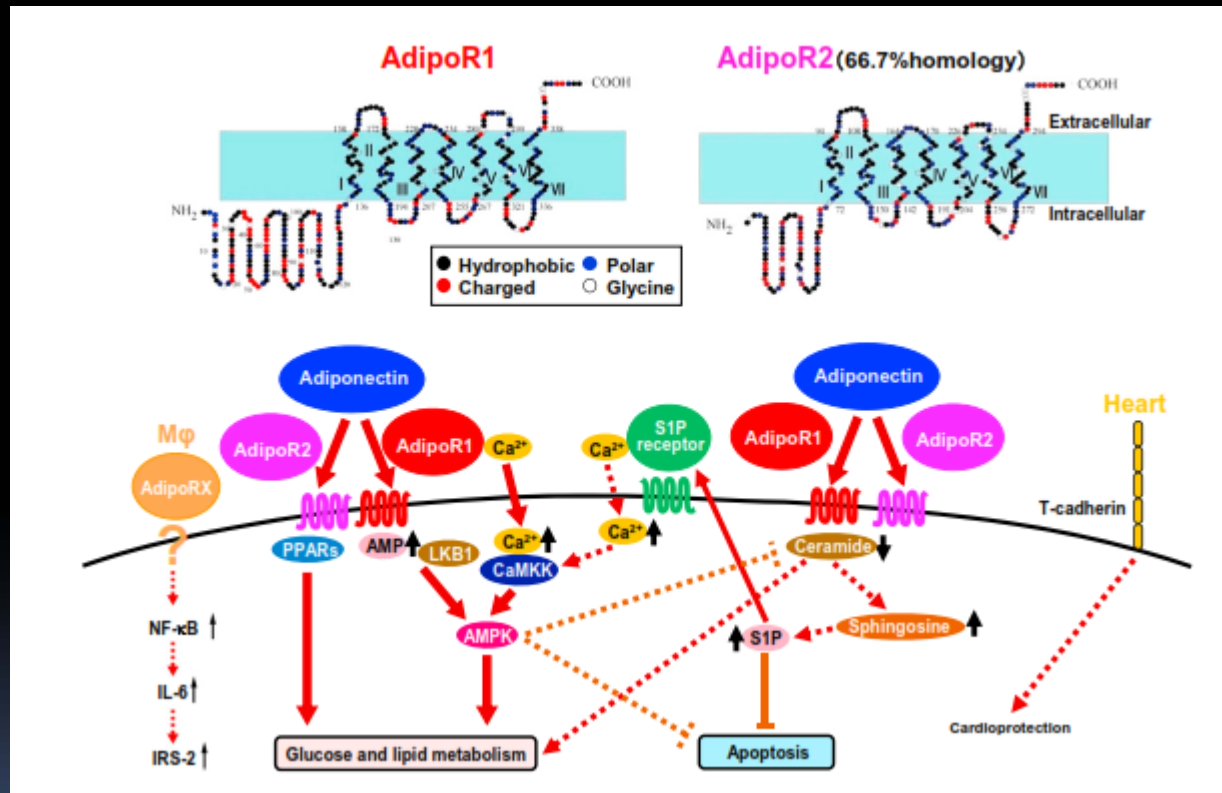
Impair  
signal



# Análogos de HT en Esteatosis Hepática

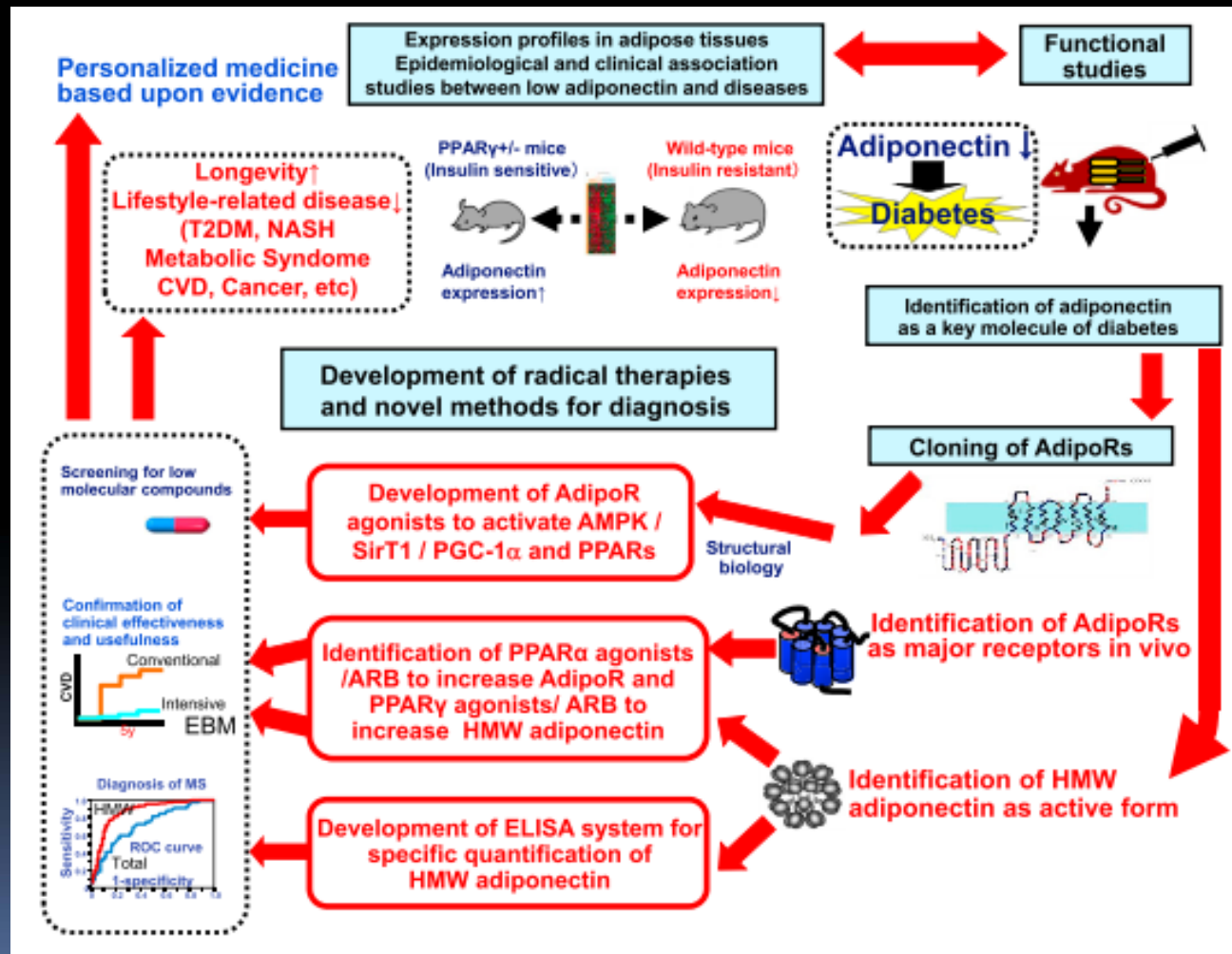


# Efectos Benéficos de la Adiponectina

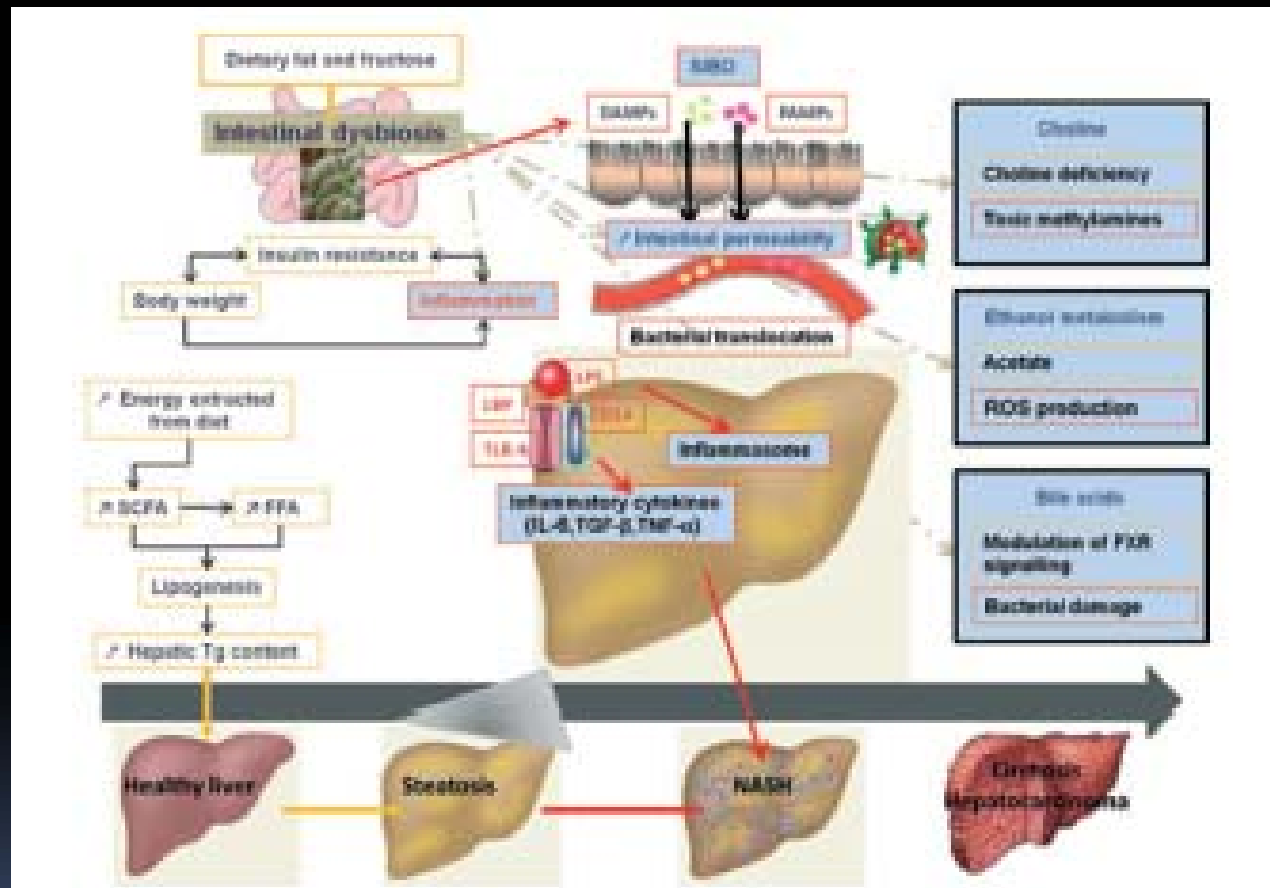




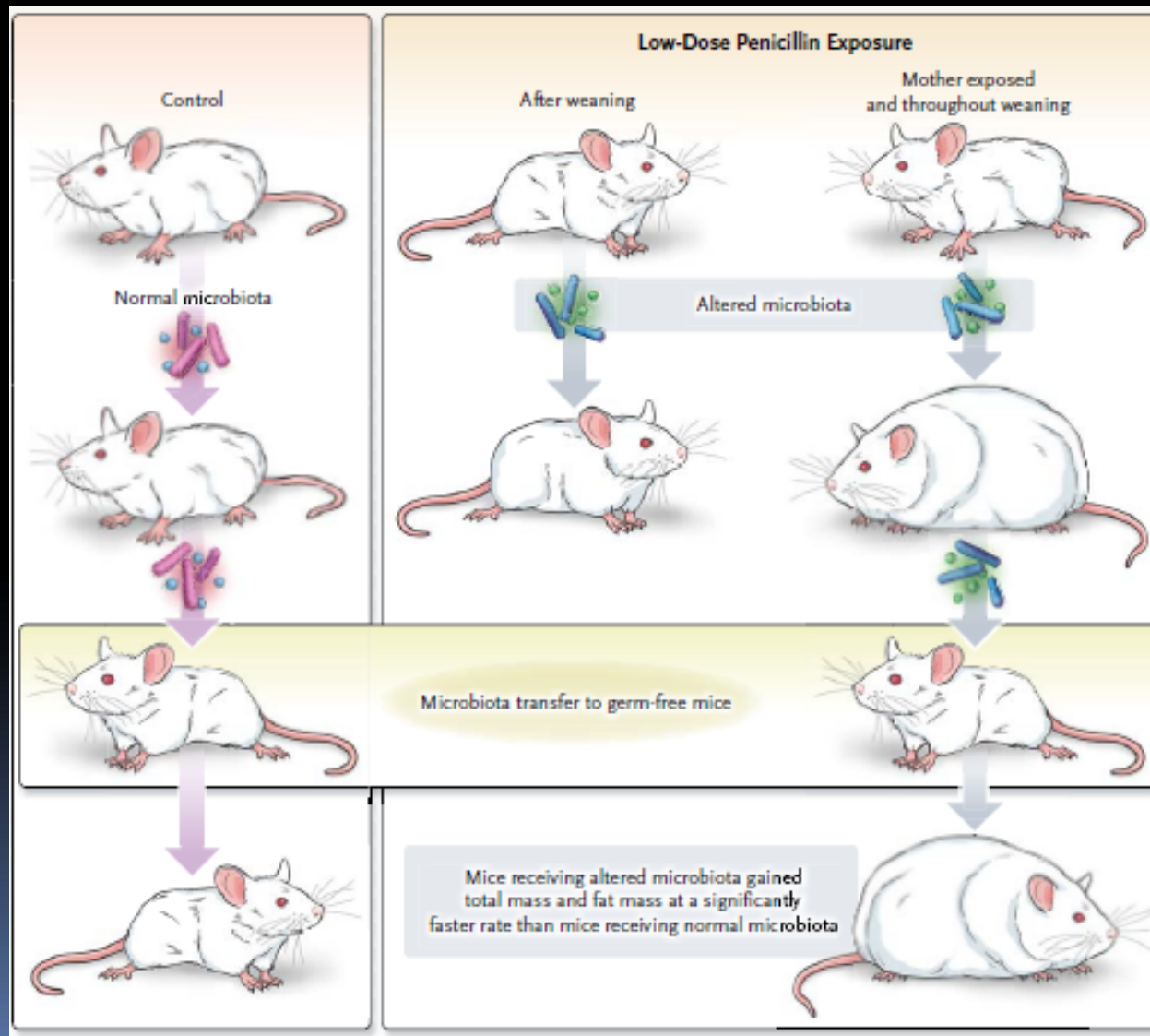
# Efectos Benéficos Potenciales de la Adiponectina

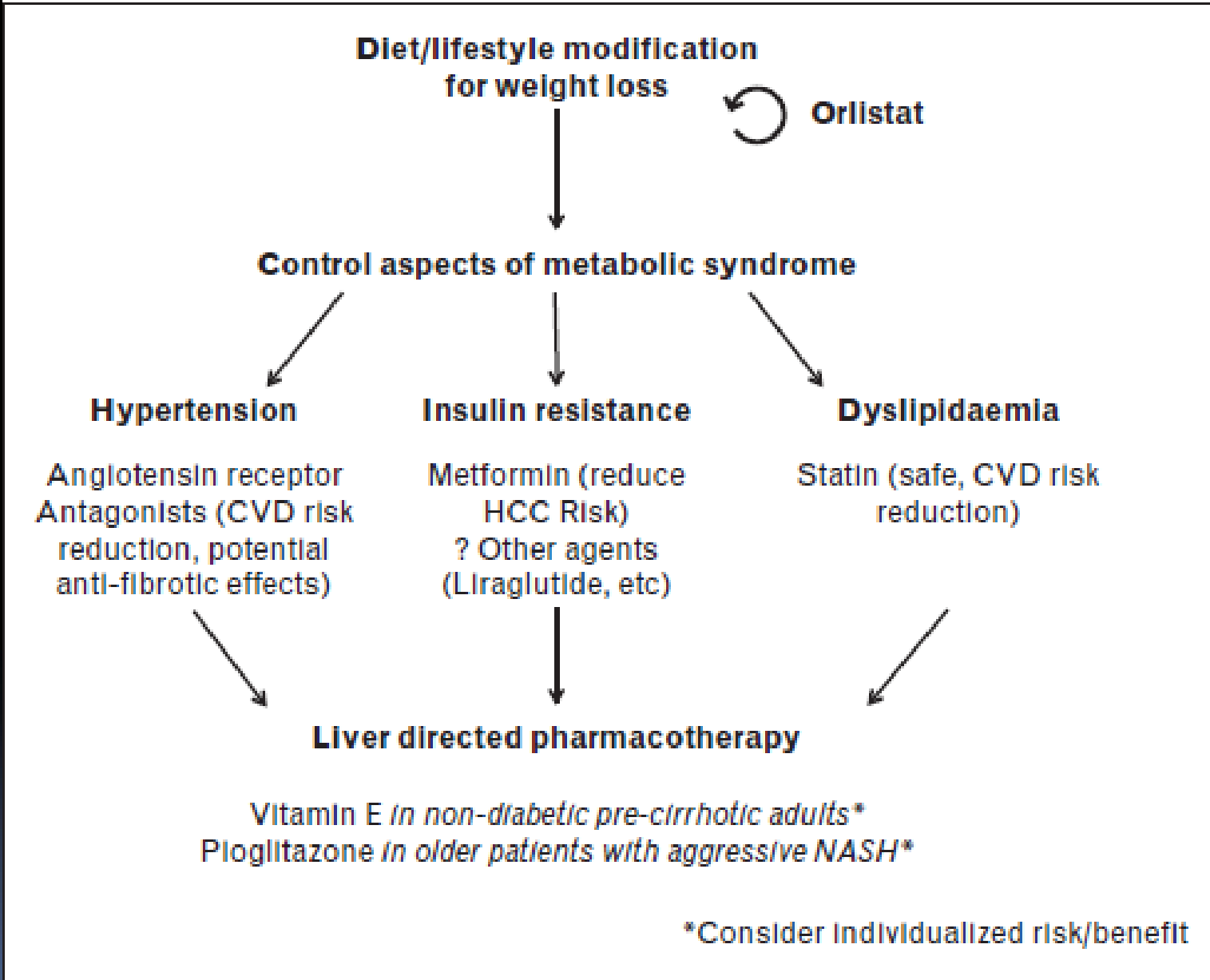


# Microbiota Intestinal y NASH



# Efecto de la administracion de Penicilina sobre la microbiota intestinal antes y despues del destete. Efectos Potenciales sobre el Peso Corporal

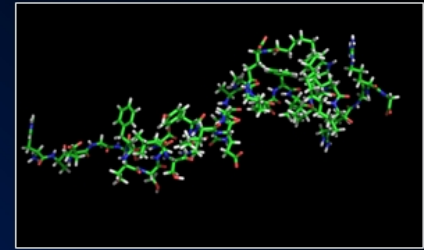




**Muchas Gracias**

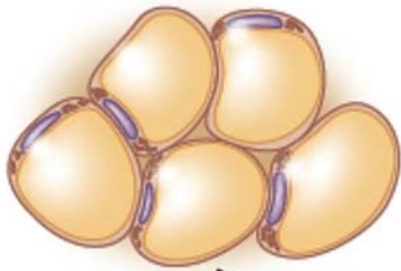
## Liraglutide (Victoza®) in NASH

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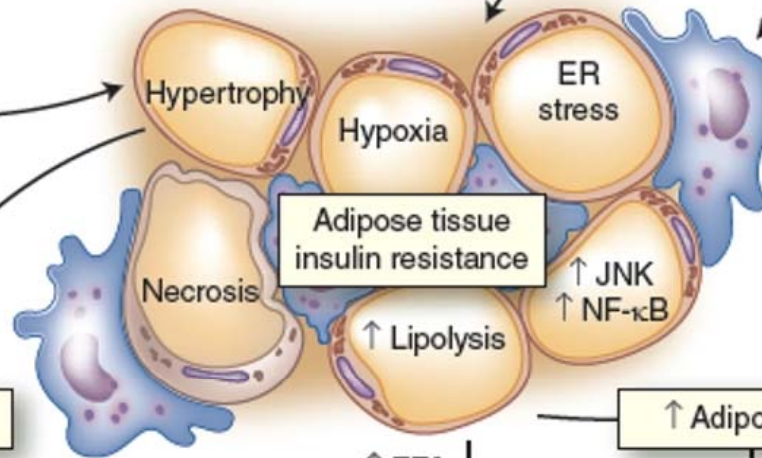
- GLP-1 RA that lowers plasma glucose by ↑ insulin secretion, and ↓ appetite and stomach emptying.
- Controversial GLP-1 signaling in hepatocytes (Gupta et al, Hepatology 2010; Svegliati-Baroni et al, Liver Intern 2011).
- A 48-week Phase 2 RCT in 52 patients with biopsy-proven NASH, A1c <9%; patient characteristics well matched.
- Intervention: liraglutide or placebo (for up to 1.8 mg QD) for 48 weeks (follow-up at 72 weeks).

### Healthy adipose tissue

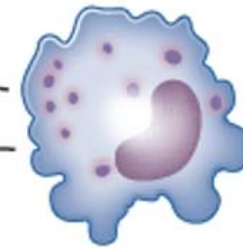


- Genetic
- Early life nutritional insults
- Chronic overfeeding

### Hypertrophic dysfunctional adipose tissue



### Macrophage "activation"



↑ Macrophage cytokines (TNF- $\alpha$ , IL-6, CRP, others)

Adipose tissue infiltration

↑ Adipocyte-macrophage crosstalk

↓ Adiponectin

↑ Adipokines

↑ FFA  
Lipotoxicity

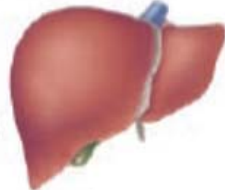
Systemic effects

Systemic effects

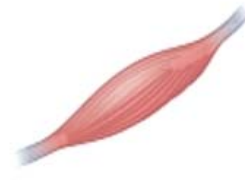
Atherosclerosis

#### Molecular mechanisms of lipotoxicity

- ER stress
- Inflammatory response (↑ JNK, ↑ NF- $\kappa$ B)
- ↓ Mitochondrial function
- Insulin resistance



↑ HGP  
NAFLD  
NASH



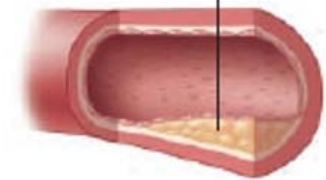
↓ Insulin-mediated glucose uptake



↑  $\beta$ -cell apoptosis  
↓ Insulin secretion  
T2DM



↓ Cardiac function (CHF?)  
↑ Risk of ischemia (?)



↓ Endothelial dysfunction  
Proatherogenic damage