

PACAP & VIP

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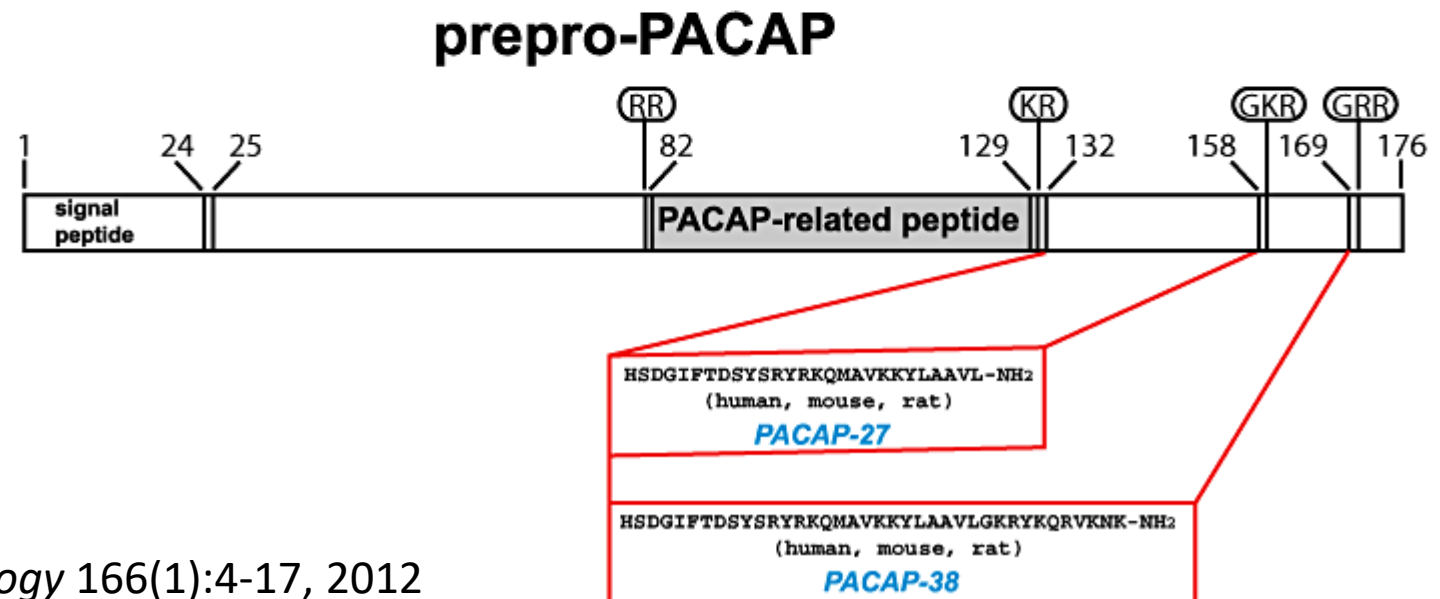
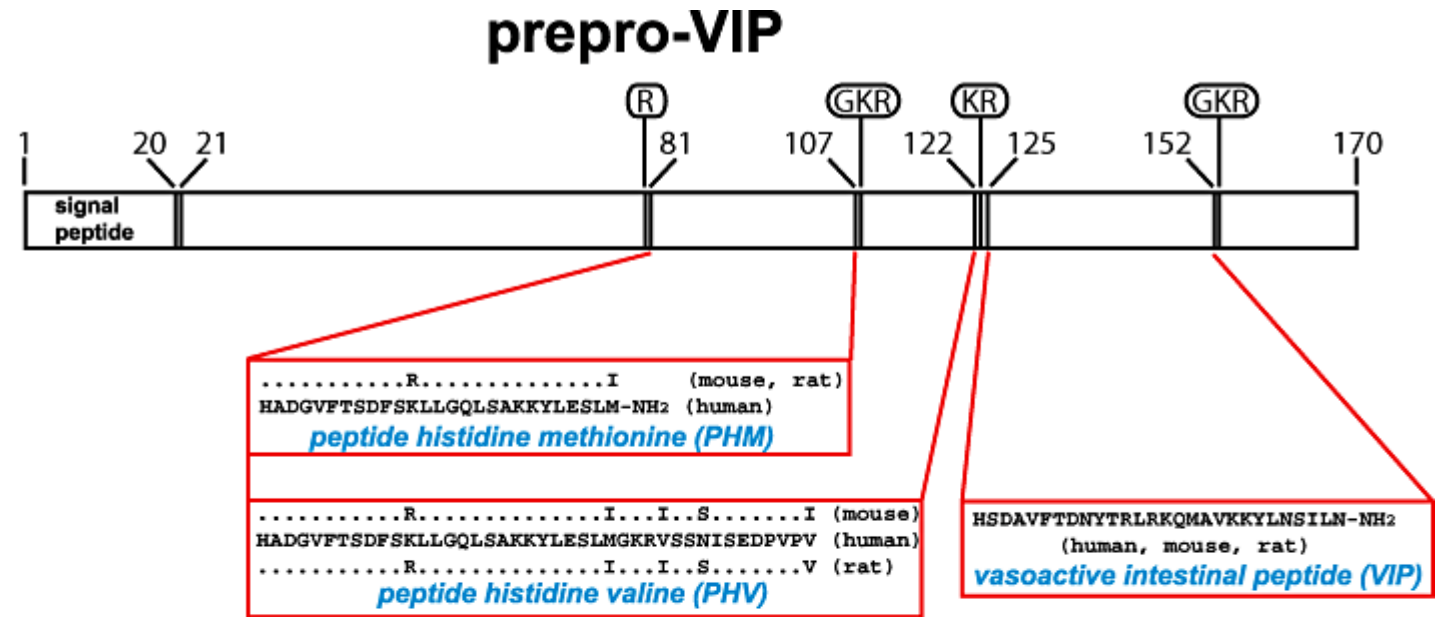


Disclosures (Current Or Past Three Years)

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PACAP & VIP Peptide Family

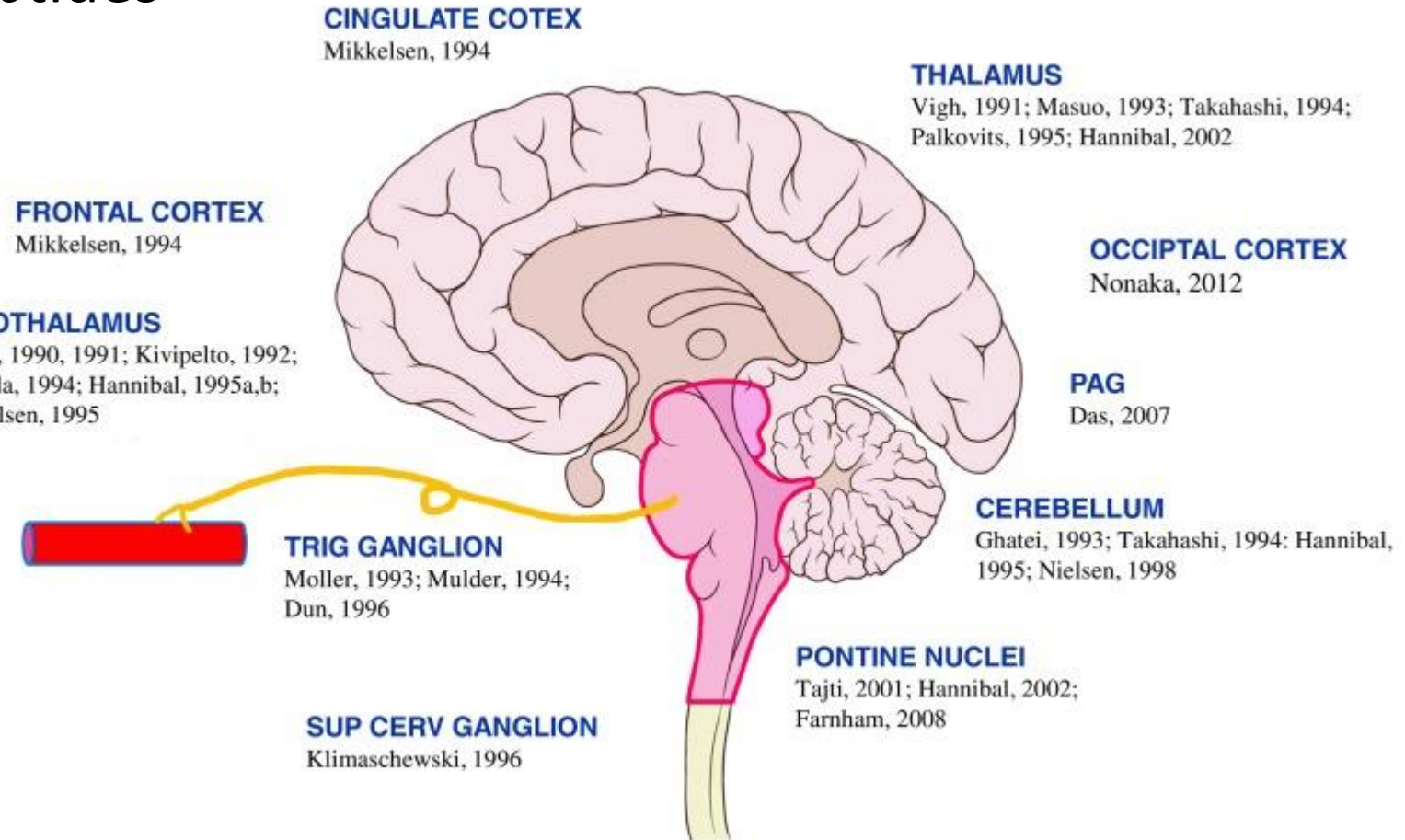
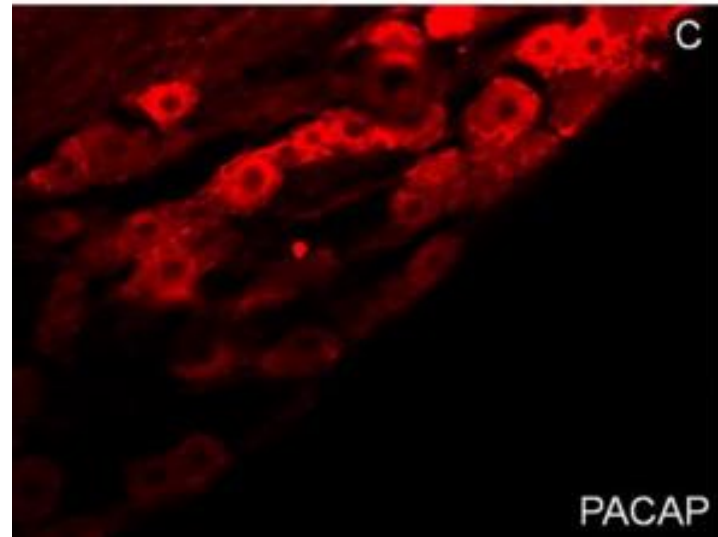
- PACAP-38
- PACAP-27
- VIP
- PHM (PHI) and PHV



PACAP & VIP Peptide Family Expression

- Widely-expressed (neuro)peptides

e.g. PACAP



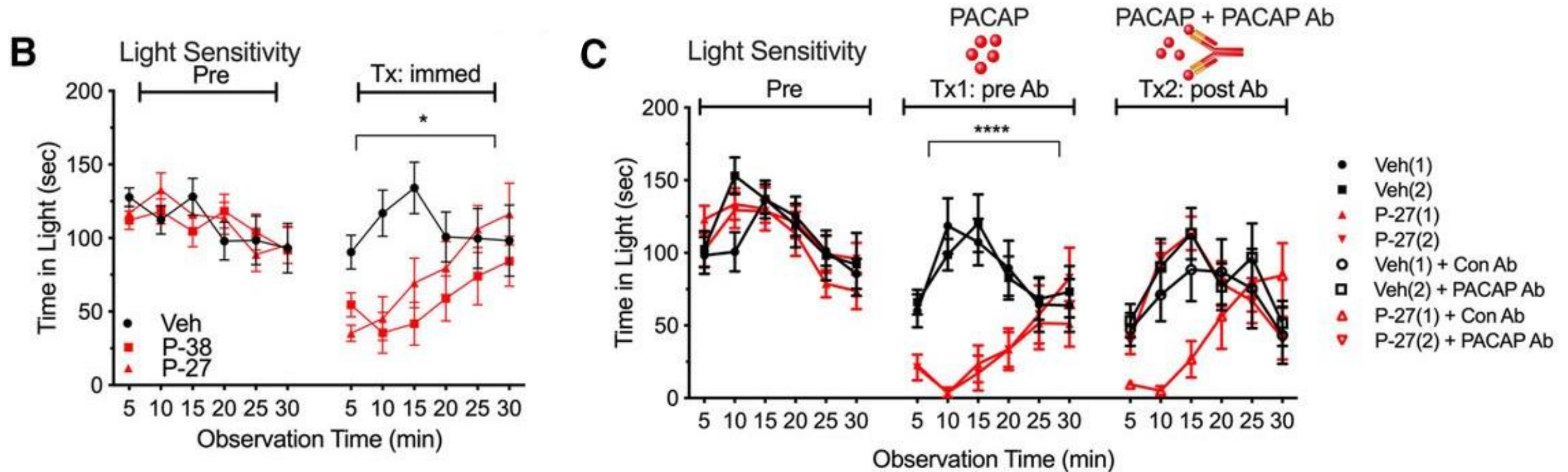
Vollesen *et al.*, *Neurotherapeutics*, 15(2): 371–376, 2018

Migraine – Clinical Evidence

- No change/increase/decrease in PACAP-like immunoreactivity reported in migraine
 - e.g. Tuka *et al.*, 2013; Zagami *et al.*, 2014; Cernuda-Morollón *et al.*, 2016
- Infusion of PACAP-27, PACAP-38 and prolonged (2 hour) VIP trigger migraine-like attacks in humans
 - e.g. Schytz *et al.*, 2009; Amin *et al.*, 2014; Guo *et al.*, 2017; Ghanizada *et al.*, 2020, Pellesi *et al.*, 2021

Migraine - Pre-clinical Evidence

- Vasodilation, neuronal sensitization, mast-cell degranulation
e.g. Ackerman *et al.*, 2015; Baun *et al.*, 2012; Bhatt *et al.*, 2014; Guo *et al.*, 2021
- PACAP-induced photophobia in mice



A Distinct Pathway From CGRP?

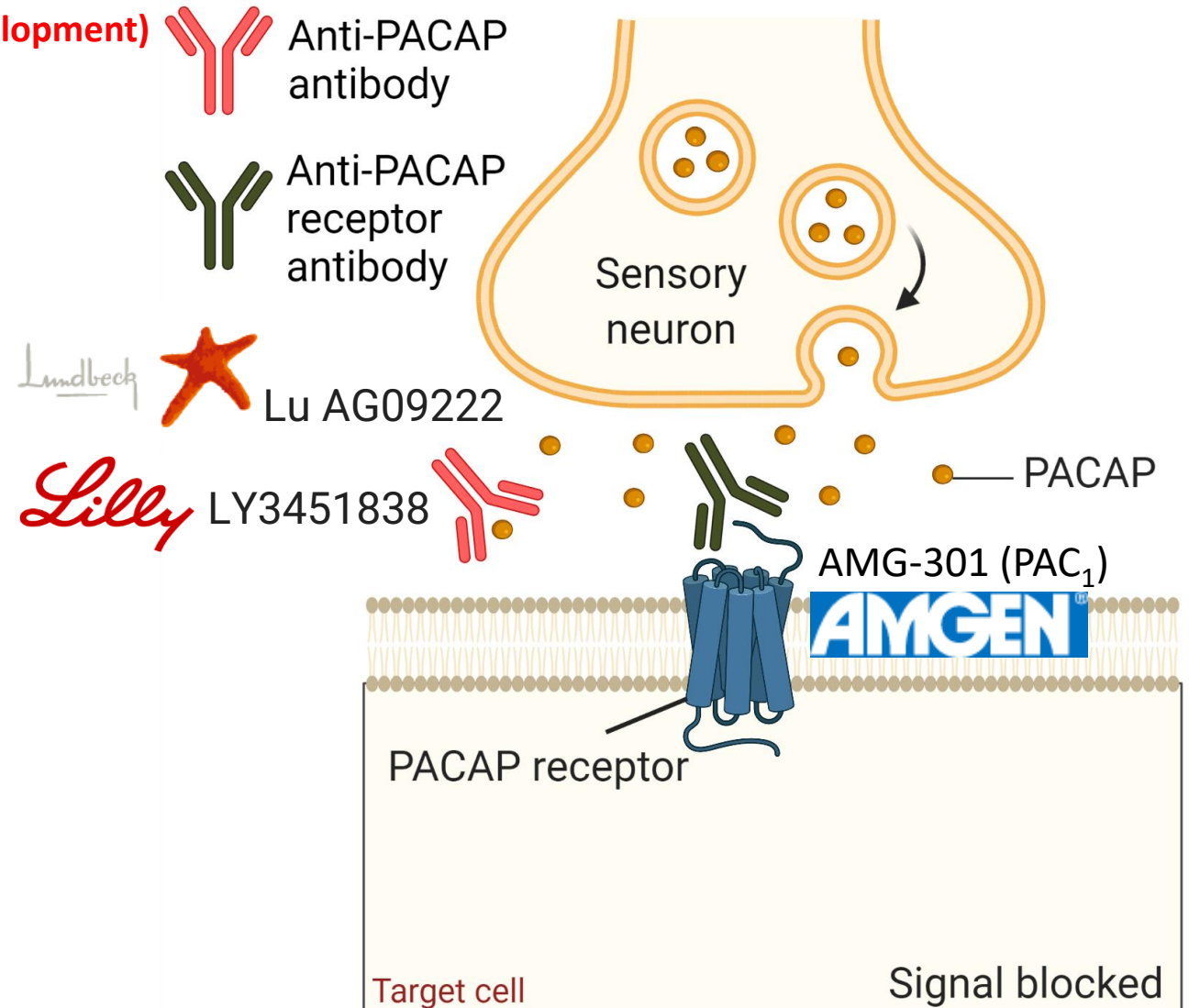
- PACAP-induced photophobia not attenuated by CGRP blockade.
- CGRP-induced photophobia not attenuated by PACAP blockade.
Kuburas et al., J. Neurosci., 2021
- PACAP and CGRP co-expressed and found in separate neurons in trigeminal ganglia
Jansen-Olesen et al., Neuropeptides, 2014; Eftekhari et al., Brain Research, 2015
- Separate populations of PACAP and CGRP-responsive neurons in trigeminal ganglia.
Guo et al., Pain, 2021
- PACAP-38 (not -27 or VIP) causes CGRP release from the trigeminal nucleus caudalis but not the trigeminal ganglia
Jansen-Olesen et al., Neuropeptides, 2014

Approaches To Targeting VIP/PACAP In Migraine

(non-approved drugs under development)

- Strategies mirror CGRP
- Target peptides with antibodies
- Target receptors with antibody antagonists
- Target receptors with small molecule or peptide antagonists
- Current efforts have been directed towards PACAP – peptide and receptor mAbs
- No benefit from AMG-301 for migraine prevention

Ashina *et al.*, *Cephalalgia*, 2021

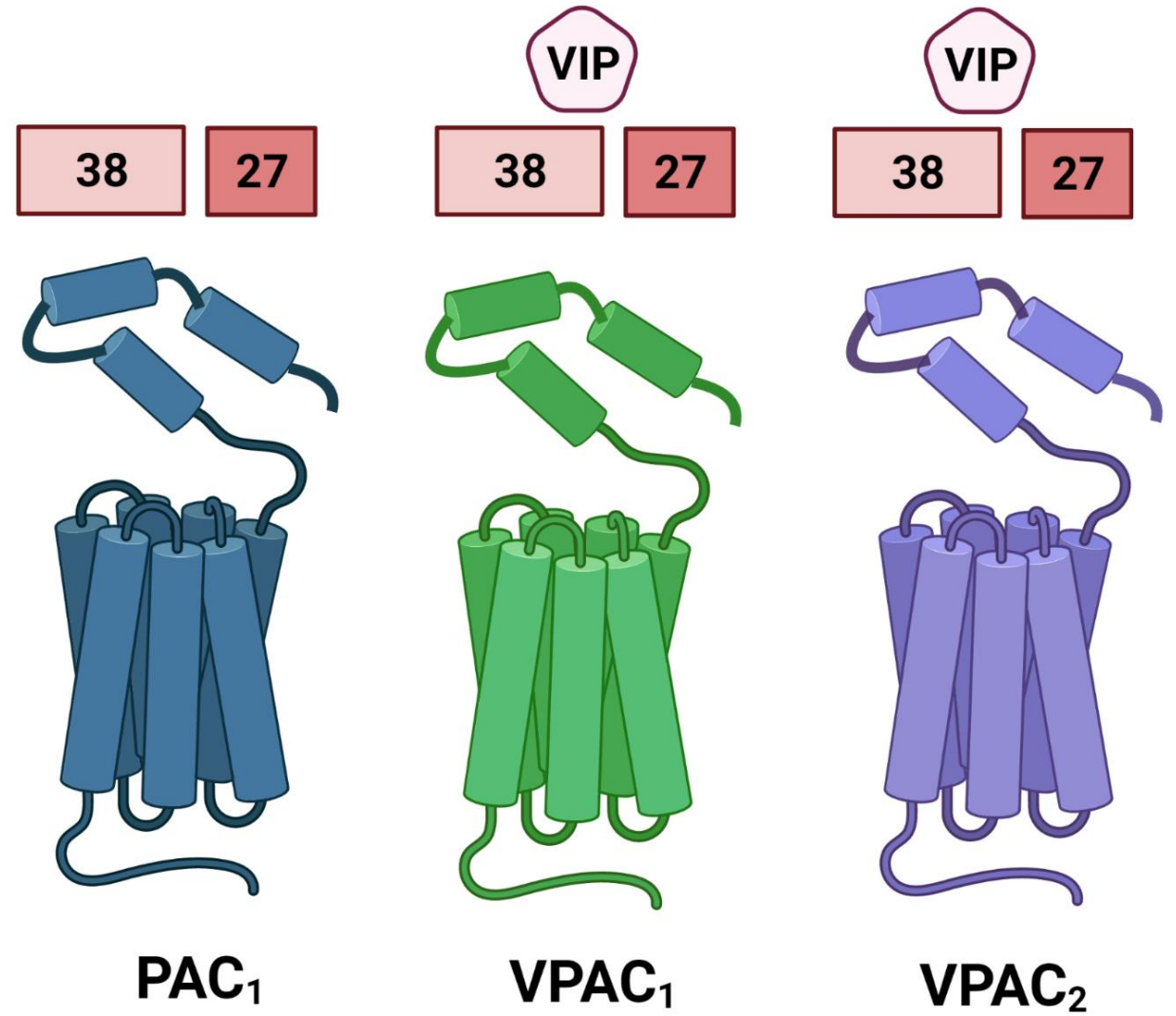


Therapeutic Strategy?

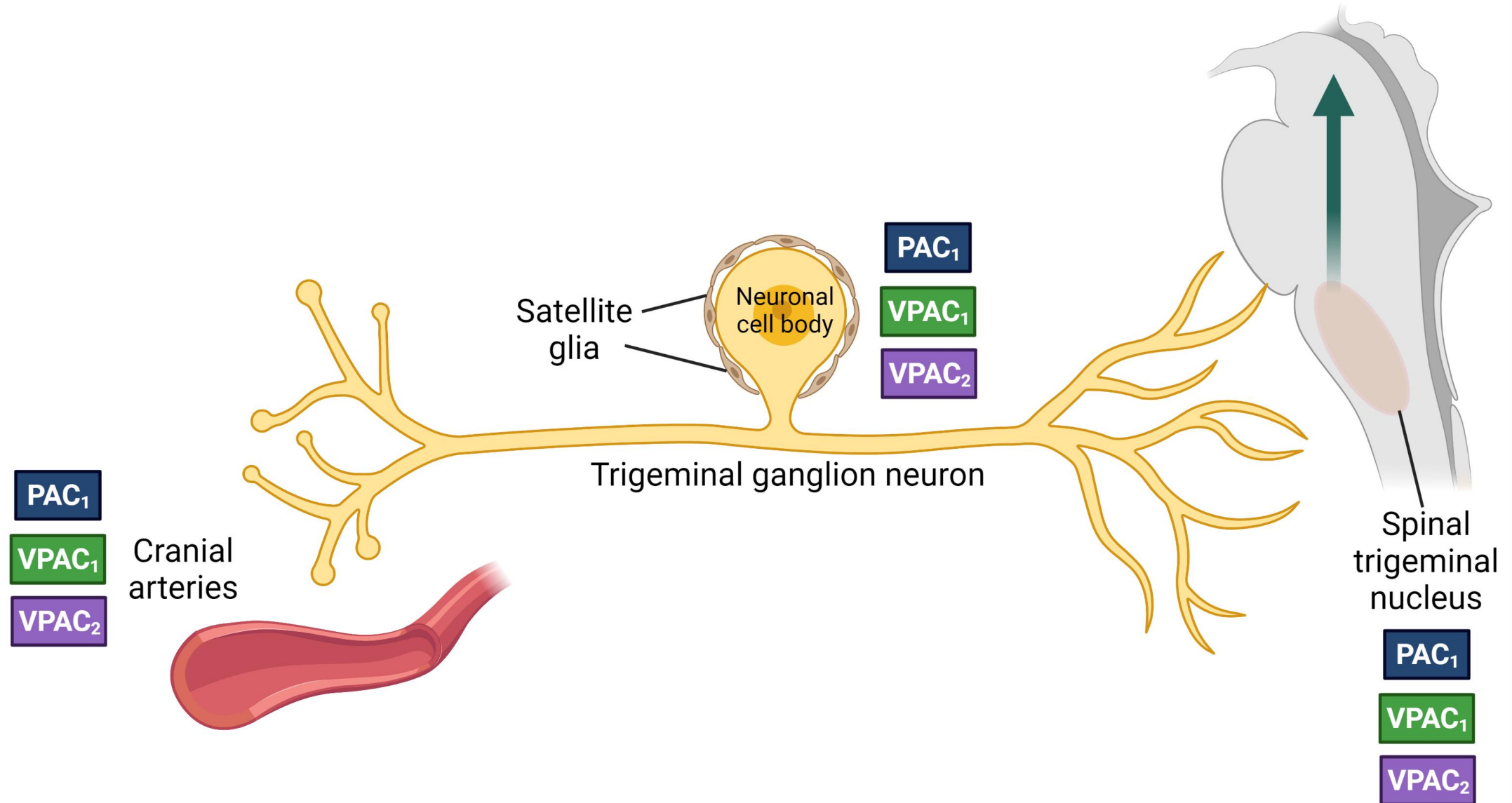
- Which peptide(s) is most important?
- Which location(s) (central vs. peripheral?)
- Which receptor(s) is most important?

VIP & PACAP Receptors

- Three G protein-coupled receptor genes – *ADCYAP1R1*, *VIPR1*, *VIPR2*, encoding PAC₁, VPAC₂ and VPAC₁ receptors, respectively
- Figure shows a simplified view of their relative affinities for VIP and PACAP
- Actual situation is much more complex



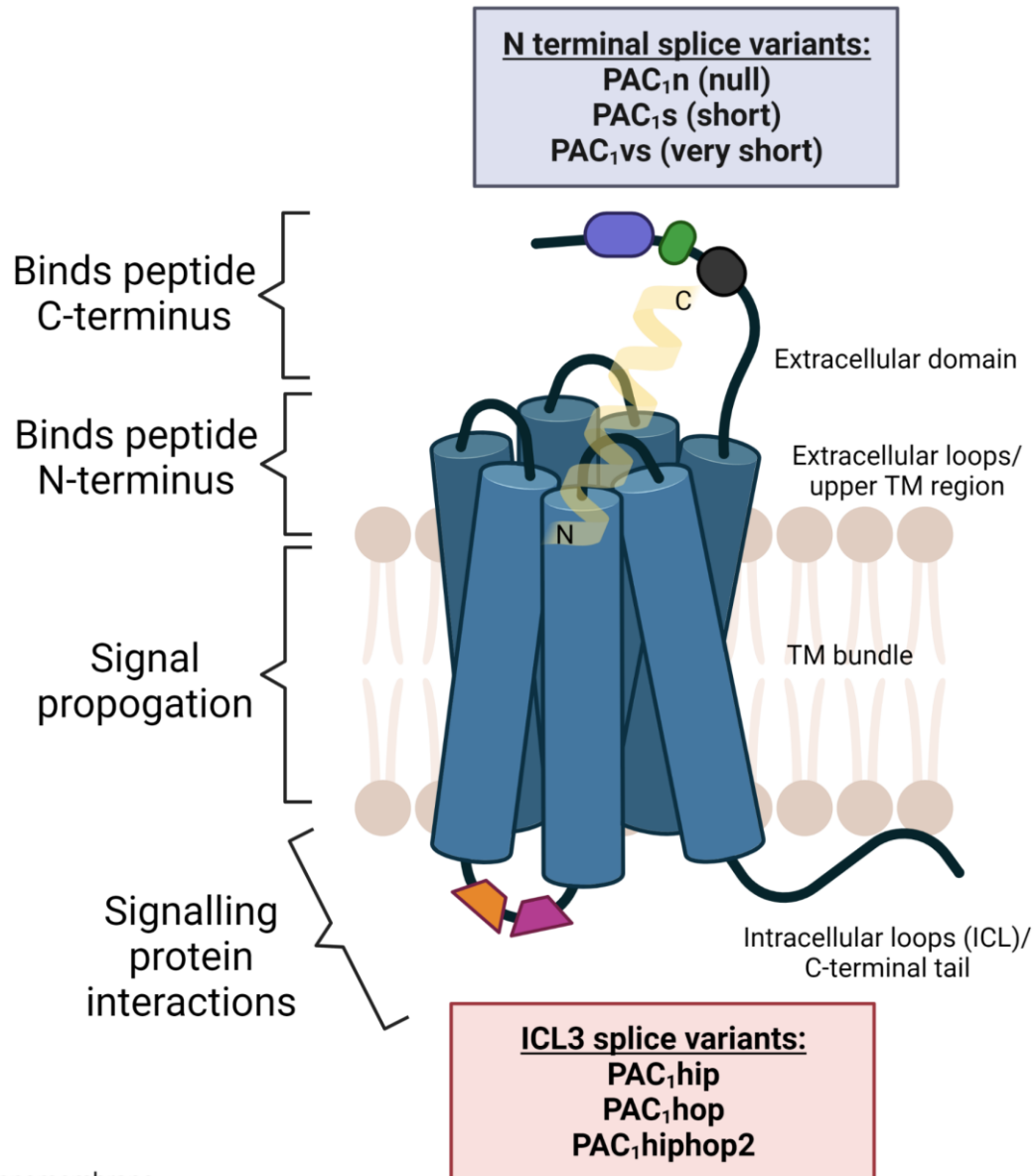
Receptor Expression



Sundrum & Walker, *British Journal of Pharmacology*, 2018; Vollesen *et al.*, *Neurotherapeutics*, 2018; Jansen-Olesen *et al.*, *Neuropeptides*, 2014

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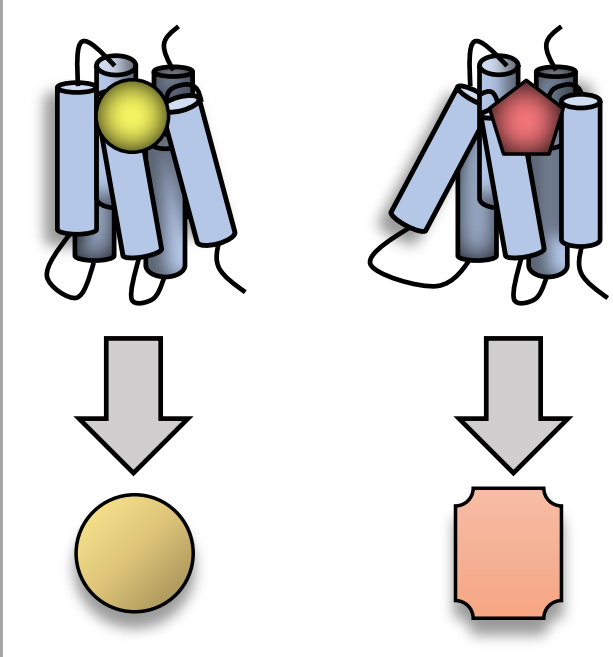
PAC₁ Receptor Splice Variants



- PAC₁ receptor has multiple exons
- Variable inclusion leads to multiple mature protein sequences
- Sites altered affect ligand binding and cell signalling
- Complexity creates challenges for understanding receptor function
- Limited information on VPAC₁ or VPAC₂ splicing – both contain multiple exons so this is possible

Other Factors

- Signalling bias



- GPCRs are flexible proteins – many possible conformations.
- Ligands of different shapes and sizes stabilize unique GPCR conformations.
- Leads to preferential coupling to different intracellular signaling proteins and different effects.

- Agonist and signalling pathway-dependent antagonism

Walker et al., Cephalalgia, 2018; Tasma et al., Pharmacol. Res. Perspect., 2020

Receptor-Focused Questions

To effectively target this system we need to know:

- which receptor subtypes are involved,
- which signalling pathways are involved,
- whether all signalling pathways are capable of being blocked,
- where each receptor is located

Goal & Approach

Establish reference framework of receptor pharmacology and signalling in transfected cell systems (human receptors, Cos7)

Agonist analysis

- Four receptors (PAC_{1n}, PAC_{1s}, VPAC₁, VPAC₂)
- Five agonists (PACAP-27, PACAP-38, VIP, PHM, maxadilan)
- Five signalling molecules (cAMP, IP₁, pAkt, pERK, pCREB)

Antagonist analysis (cAMP only)

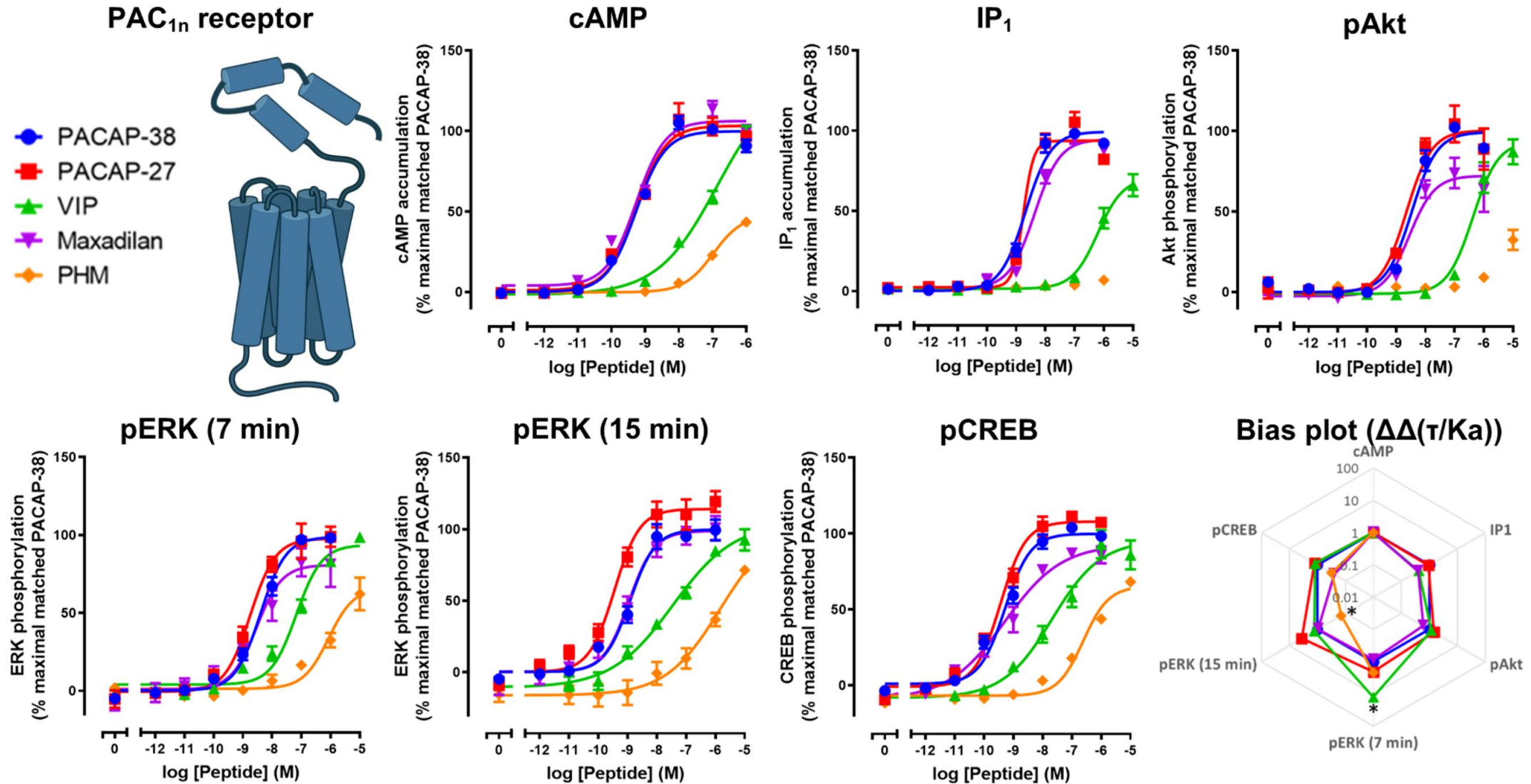
- Four receptors (PAC_{1n}, PAC_{1s}, VPAC₁, VPAC₂)
- Three agonists (PACAP-27, PACAP-38, VIP)
- Three antagonists (PACAP-38, PG 97-269, M65)

Presenting key results.

For full data see Tasma *et al.*, *British Journal of Pharmacology*, in press 2021

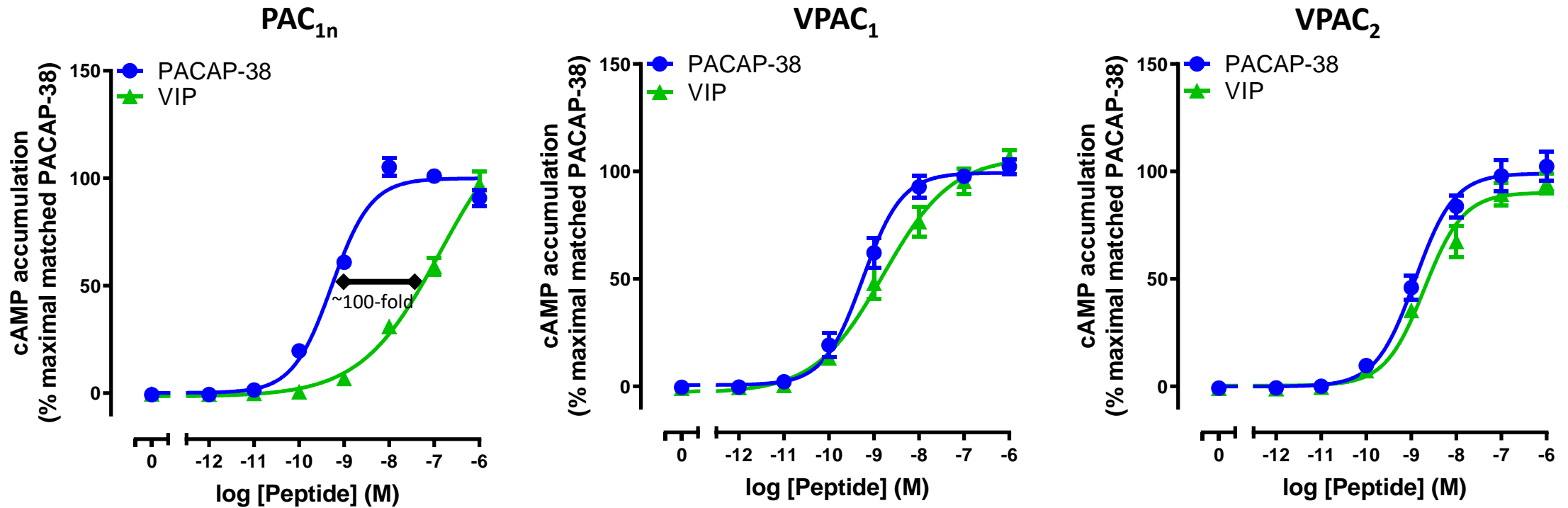
doi: 10.1111/bph.15700

Example Agonist Data:



PAC_{1n}, PAC_{1s}, VPAC₁, VPAC₂ receptors display similar patterns of signalling

PAC_{1n} vs. VPAC

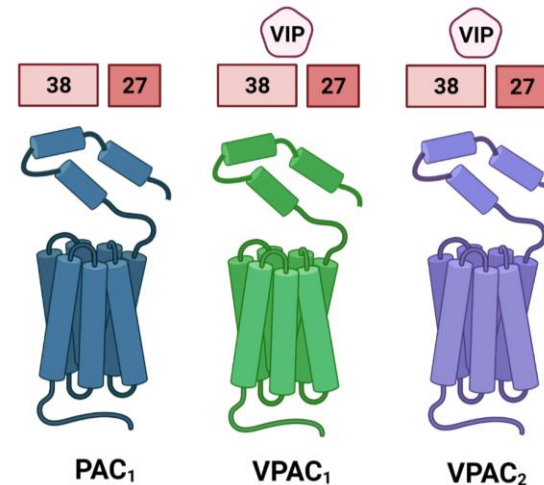


Relative potency of PACAP-38 and VIP consistent with overall view of receptor pharmacology:

PAC_{1n} PACAP-38 >> VIP

VPAC₁ VIP = PACAP-38

VPAC₂ VIP = PACAP-38

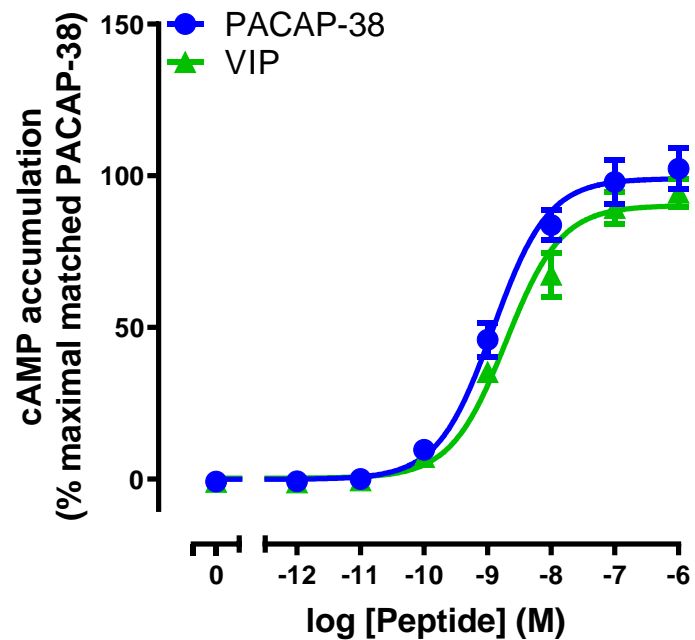
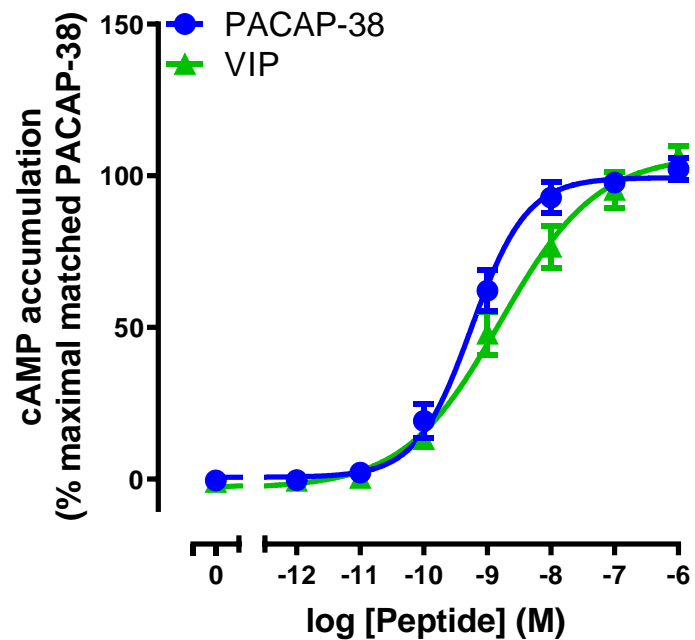
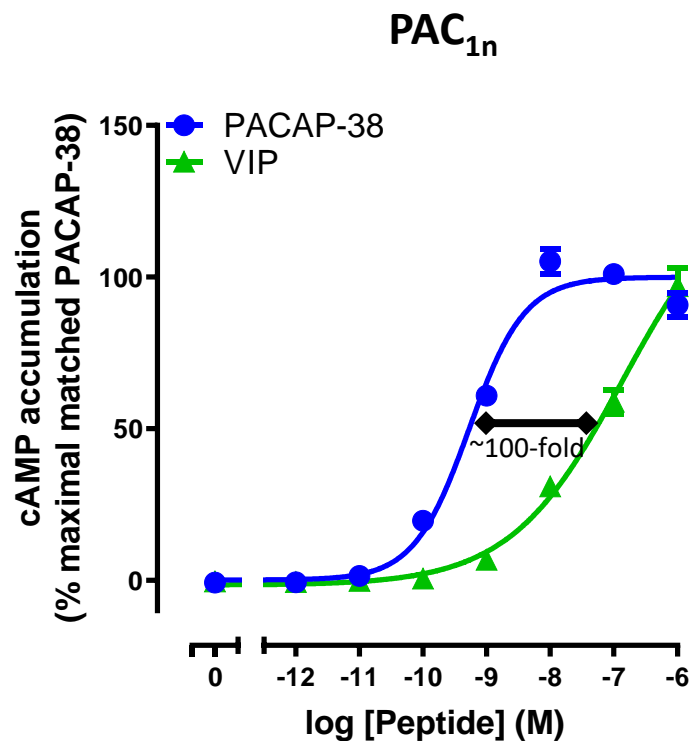
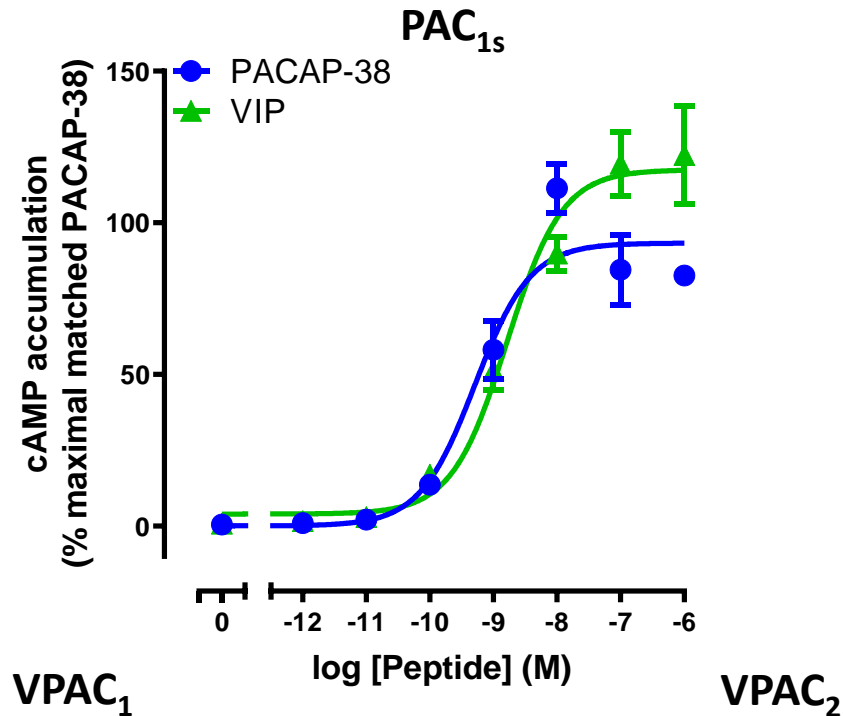


PAC_{1s} vs. VPAC

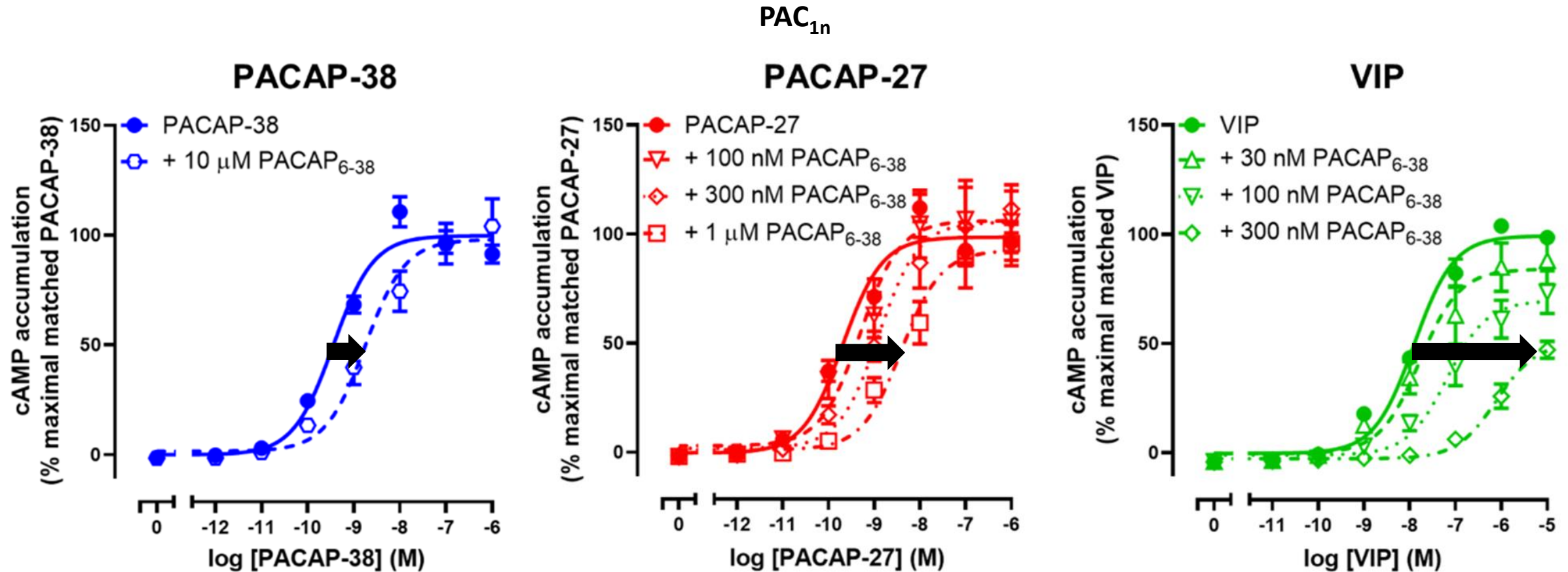
Relative potency of PACAP-38 and VIP not consistent with overall view of receptor pharmacology:

PAC_{1s} PACAP-38=VIP

(Consistent with Dautzenberg et al., J. Neuroendocrinol, 1999)



Example Antagonist Data:

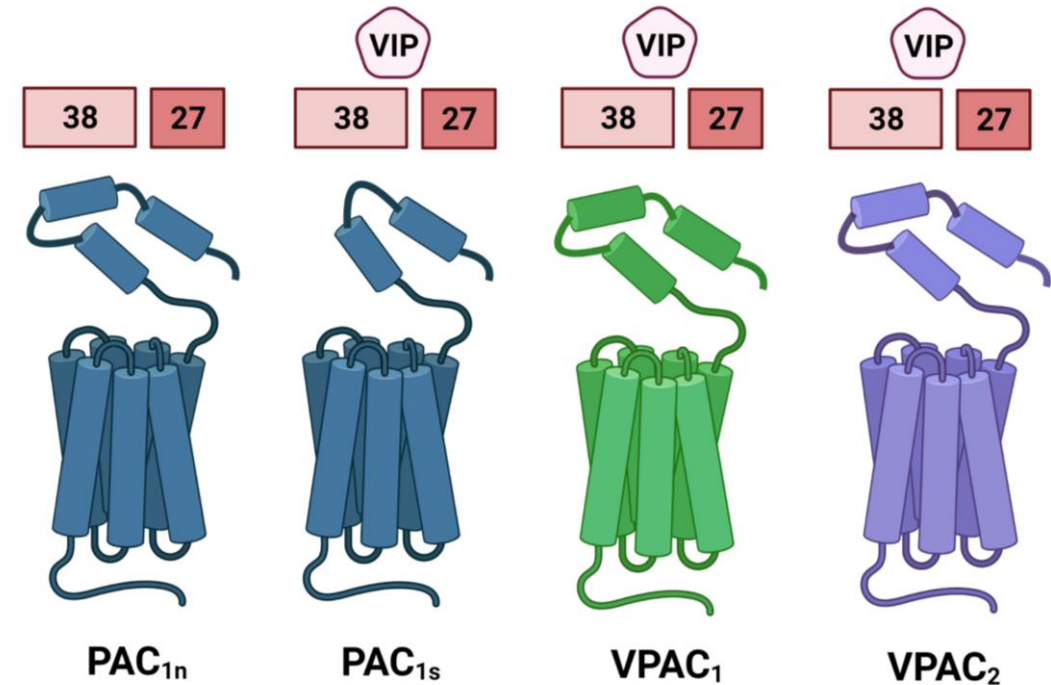


Degree of antagonism depends on the agonist used, with PACAP-38 resistant to antagonism, compared to -27 and VIP

(consistent with prior data in TG neurons Walker et al., British Journal of Pharmacology, 2014.)

Key Conclusions

- Receptors activate multiple signalling pathways
- PACAP is a potent agonist of PAC and VPAC receptors
- VIP can act at PAC₁, not only VPAC receptors
- PAC_{1s} may be a dual receptor for PACAP and VIP
- PACAP-38 is more difficult to antagonize than -27 and VIP



Which Receptor(s)?

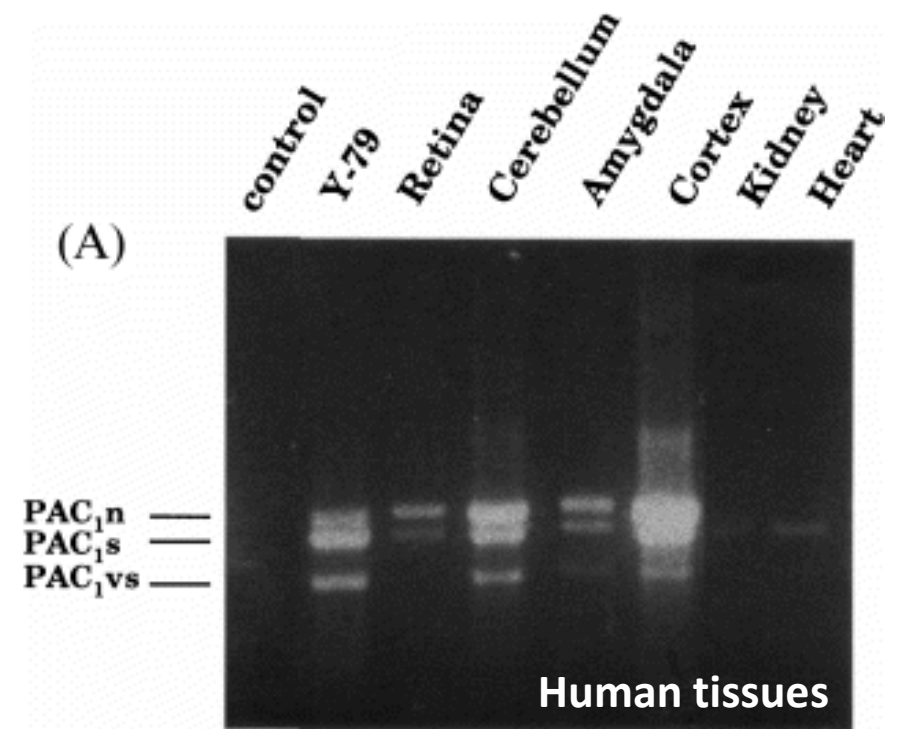
- Is PAC₁ ruled out?
- Other splice variants?
- Other receptors?

Development of anti-PACAP/VIP agents for the treatment of migraine needs to consider multiple receptors, multiple ligands & their sites of expression

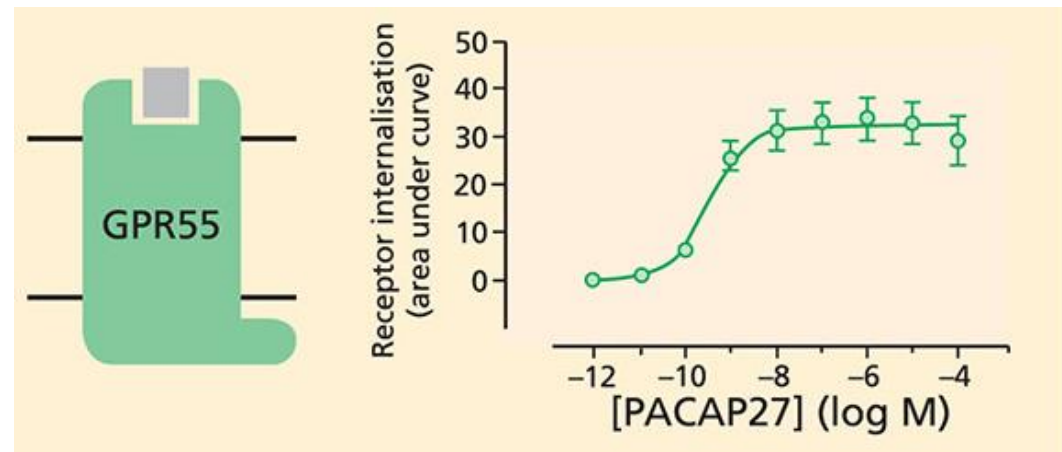
frontiers
in Cellular Neuroscience

**PACAP-38 and PACAP(6–38)
Degranulate Rat Meningeal Mast
Cells *via* the Orphan MrgB₃-Receptor**

Sara Hougaard Pedersen^{1,2}, Sanne Hage la Cour^{1,2}, Kirstine Calloe³, Frank Hauser⁴,
Jes Olesen^{1,2}, Dan Arne Klaerke³ and Inger Jansen-Olesen^{1,2*}



Dautzenberg *et al.*, *J. Neuroendocrinol.*, 1999



Hauser *et al.*, *British Journal of Pharmacology*, 2020

Foster *et al.*, *Cell*, 2019

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