

Diabetes - Neurodegenerative Diseases - Cell Encapsulation

#### Microencapsulated Neonatal Porcine Islet Implants without Immune Suppression Alleviate Unaware Hypoglycaemia

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#### Insulin Treatment

The Golden Goals of insulin treatment of diabetes are:

- Avoidance of episodes of hyper or hypoglycaemia (and as a corollary maximising time spent with normoglycaemia)
- 2) Reducing long term complications
- 3) Normalizing lifestyle

Allo-transplantation with immune suppression can sometimes attain goal 1) and perhaps 2) but <u>never</u> 3)





#### **Type 1 Diabetes Treatment**

"Best Yet" non-transplant long term results

- Insulin pumps +
- Continuous blood glucose monitoring

Recent Data (averages after 6 months)HbA1c- 0.2%Hours / day with hypoglycaemia- 0.9hrHours / day with hyperglycaemia- NS



### **DIABECELL Phase 2 NZ Clinical Trial**

- Results of NZ Phase 2 clinical trial of microencapsulated neonatal porcine islets implanted into the peritoneal cavity via laparoscope
- Dose escalation (5,000-20,000 islets /Kg) as one dose
- Trial subjects: 14 Type 1 diabetics with severe unaware hypoglycaemia



#### **DIABECELL Encapsulated Islets**







### **Specifications of DIABECELL**

Product Specification	Acceptance Criteria
DIABECELL <sup>®</sup> (encapsulated islets)	
% Viability	<u>&gt;</u> 85%
Maximal Insulin Release	<u>&gt;</u> 39μU/100 IEQ/h
Insulin Stimulation Index 1	<u>&gt;</u> 3
Insulin Stimulation Index 2	<u>&gt;</u> 3
	600-900 um
Capsule Size	diameter
	<u>&gt;</u> 90% are <u>+</u> 100 mm
Capsule Uniformity	of mean diameter
Capsule Integrity	<u>&gt;</u> 90%
% Capsules with Islets	<u>&gt;</u> 70%
	No growth after 14
In-process Sterility	days
Final DIABECELL <sup>®</sup> Product Sterility	
	No growth after 14
Bacteriology and Mycology	days
Mycoplasma	Negative
Endotoxin level	<1 EU/mL



#### **Current NZ Trial**

#### Patient #1: Asymptomatic Hypos



#### **Current NZ Trial**

Parameter		Post-Tx		
		Up to Week 12	Up to Week 12-52	
Insulin Dose (Weekly Average)	41	36	30	
Hypo Score (Weekly Average - Severity Indicator)	20	12	8	
Number of Unaware Hypos (Weekly Average)	3.2	1.5	0.8	
HbA1c (%)	7.5	7.5	7.6	



### CGMS



### Lack of dose effect on amelioration of hypoglycaemic events

Parameter		10,000/kg	15,000/kg	20,000/kg
Hypo Score: Weekly Average – Severity Indicator (Percentage Change from Baseline)	Pre-Tx	20	14	30
	Week 0-12	12 (40%)	11 (21%)	19 (37%)
	Week 13-52	7 (65%)		
Number of Unaware Hypos : Weekly Average (Percentage Change from Baseline)	Pre-Tx	3.7	2.3	5
	Week 0-12	1.6 (57%)	1.5 (35%)	3 (40%)
	Week 13-52	0.8 (78%)		



#### Effects of dose escalation of encapsulated islets on diabetic status

Dose	Group Size	% non-diabetic 100 days post tx			
Alloxan diabetic rabbits					
10,000 IEQ/kg	N=17	53%			
50,000 IEQ kg	N=17	6%			
0	N=8	0%			
Diabetic NOD mice					
10,000 IEQ/kg	N=36	28%			
50,000 IEQ kg	N=12	0%			
0	N=5	0%			



# Responses to hypoglycaemia of adrenalin and glucagon compared to pre-transplantation



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Week 24 Post-Tx

#### Summary

Transplantation of encapsulated porcine islets markedly improves adrenalin (and glucagon) response to hypoglycaemia, which may account for the improvement in both hypoglycaemia severity and unaware hypoglycaemia.

#### Speculation...

This may in part be due to islet neutrophin secretion.

![](_page_13_Picture_4.jpeg)

#### **HPLC Elution of Insulin Standards**

![](_page_14_Figure_1.jpeg)

![](_page_14_Picture_2.jpeg)

#### **Insulin in post HPLC Eluates**

![](_page_15_Figure_1.jpeg)

![](_page_15_Picture_2.jpeg)

#### Conclusion

Despite minimal insulin dose reduction and improvement in HbA1c, severe and unaware hypoglycaemia was much reduced by a single dose of encapsulated islets with no dose response seen.

![](_page_16_Picture_2.jpeg)

![](_page_16_Picture_3.jpeg)

## This study was supported in part by the Juvenile Diabetes Research Foundation International.

![](_page_17_Picture_1.jpeg)

![](_page_18_Picture_0.jpeg)