

A black and white electron micrograph of a cell. The nucleus is visible on the right side, containing a prominent nucleolus. The cytoplasm is filled with various organelles and granules. The text is overlaid on the image.

# **New Interferons and Immunomodulators**

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A black and white electron micrograph of a cell, showing various organelles and structures. The image is grainy and has a high-contrast appearance. The text is overlaid on the central part of the image.

# **Interferons**

**What are they?**

**Who cares?**

# The Interferon family

- **Type 1: 3 subtypes, all cell types, IFNAR1 and 2**
  - **IFN- $\alpha$ , 14 species**
  - **IFN- $\beta$ , 1 species**
  - **IFN- $\omega$ , 1 species**
- **Type II: IFN- $\gamma$ , one species, activated T and NK cells, IFNGR1 and 2**
- **Type III: IFN- $\lambda$ , 3 species ( $\lambda$ 1, 2 and 3; IL29, IL28A, IL28B), possibly one more ( $\lambda$ 4), all cell types; IFNLR1 and IL10RB (limited tissue distribution)**

# Interferon- $\lambda$ : Antiviral Response & Hepatitis C

doi:10.1038/nature08309

nature

LETTERS

## Genetic variation in *IL28B* predicts hepatitis C treatment-induced viral clearance

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## Genome-wide association of *IL28B* with response to pegylated interferon- $\alpha$ and ribavirin therapy for chronic hepatitis C

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## *IL28B* is associated with response to chronic hepatitis C interferon- $\alpha$ and ribavirin therapy

Vijayaprakash Suppiah<sup>1,2</sup>, Max Moldovan<sup>3</sup>, Golo Ahlenstiel<sup>4</sup>, Thomas Berg<sup>5</sup>, Martin Weltman<sup>6</sup>, Maria Lorena Abate<sup>7</sup>, Margaret Bassendine<sup>8</sup>, Ulrich Spengler<sup>4</sup>, Gregory J Dore<sup>9,10</sup>, Elizabeth Powell<sup>11,12</sup>, Stephen Riordan<sup>13</sup>, David Sheridan<sup>8</sup>, Antonina Smedile<sup>7</sup>, Vincenzo Fragomeli<sup>6</sup>, Tobias Mtiller<sup>5</sup>, Melanie Bahlo<sup>3</sup>, Graeme J Stewart<sup>2</sup>, David R Booth<sup>2</sup> & Jacob George<sup>4</sup>, for the Hepatitis C Study<sup>14</sup>

doi:10.1038/nature08463

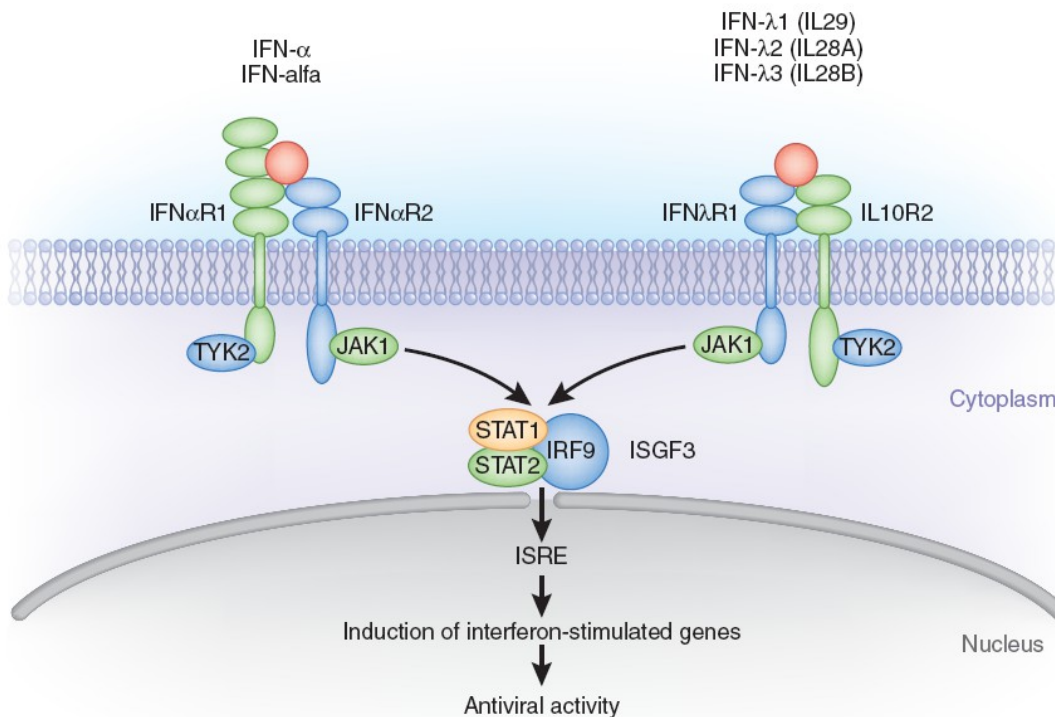
nature

LETTERS

## Genetic variation in *IL28B* and spontaneous clearance of hepatitis C virus

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# IFN- $\alpha$ vs IFN- $\lambda$



- Different receptors
- IFN- $\lambda$  receptor with limited tissue distribution (not in hematopoietic cells)
- Same signaling pathway
- Different kinetics and profiles of gene inductions

# IFN- $\lambda$ 3/IL28B Polymorphisms and HBV Infection

- **IL28B SNPs (favorable in HCV) are associated with serologic response (HBeAg loss) to PEG-IFN in HBeAg-positive chronic hepatitis B**
- **IL28B SNPs are associated with post-IFN HBsAg loss in HBeAg-negative patients (genotype D)**
- **IL28B SNPs are associated with HBV chronicity?**

*Sonneveld et al, Gastroenterol 2012; Lampertico et al, Hepatol 2013*

*Tseng et al, Antivir Ther; de Niet et al, Scan J Gastroenterol 2012; Zhang et al, J Viral Hepatitis 2013*

*Kim et al, PLoS One 2013;*

# Interferons in Hepatitis B and C Therapy

- **IFN- $\alpha$** : mainstay of therapy for HBV and HCV
- **IFN- $\beta$** : similar effect as IFN- $\alpha$  for HBV; used as induction therapy in HCV
- **IFN- $\gamma$** : never tested in HBV, though potent antiviral role in animal models; not effective in HCV
- **IFN- $\lambda$  (Peg-IFN- $\lambda$ 1)**
  - **HCV**: similar efficacy as Peg-IFN- $\alpha$  but better side effect profile
  - **HBV ?**

*Munoz et al, J Hepatol 2002; Enomoto et al, J Interferon Cytokine Res 2007; Okushin et al, World J Gastroenterol 2008  
Ishikawa et al, Hepatol Res 2012; Morikawa et al, Hepatol Res 2013  
Guidotti et al, Annu Rev Pathol 2006; Soza et al, Hepatol 2005  
Muir et al, Hepatol 2010; Muir et al, AASLD 2012*

# Peg-Interferon- $\lambda$ in Hepatitis B Therapy

- Randomized-controlled study in HBeAg+ patients
- Comparing Peg-IFN- $\alpha$  with Peg-IFN- $\lambda$
- 48-wk treatment and 24 wk follow-up
- Endpoint: HBeAg loss and anti-HBe seroconversion
- **Peg-IFN- $\lambda$  less effective than Peg-IFN- $\alpha$**



# New Interferons for Hepatitis Therapy

- **Albuferon:** albumin-conjugated IFN- $\alpha$ 2b; halted development
- **Locteron:** controlled release interferon- $\alpha$ 2b, microsphere-based, every 2 weeks, comparable effect as Peg-IFN in hepatitis C
- **Omega Duros Interferon:** extended release depot for 3-12 months
- **Interferon- $\alpha$  XL:** controlled release, Medusa hydrogel, weekly dosing
- **Oral interferon (Beloferon):** single amino acid substitution of IFN- $\alpha$ , oral administration



*Dzyublyk et al, J Viral Hepat 2011; Jansen et al EASL 2011*

*Buckwold et al, Antiviral Res 2007; [www.Intarcia.com](http://www.Intarcia.com)*

*Trepo et al, AASLD 2011; [www.Flamel.com](http://www.Flamel.com)*

*[www.Armarbio.com](http://www.Armarbio.com)*

# **New Interferons for Viral Hepatitis Therapy**

- **Improved pharmacokinetics**
- **Stronger antiviral activities**
- **Fewer side effects**
- **Better compliance**
- **Reduced cost?**
- **Interferon-intolerant patients and limited access to DAAs in HCV patients**

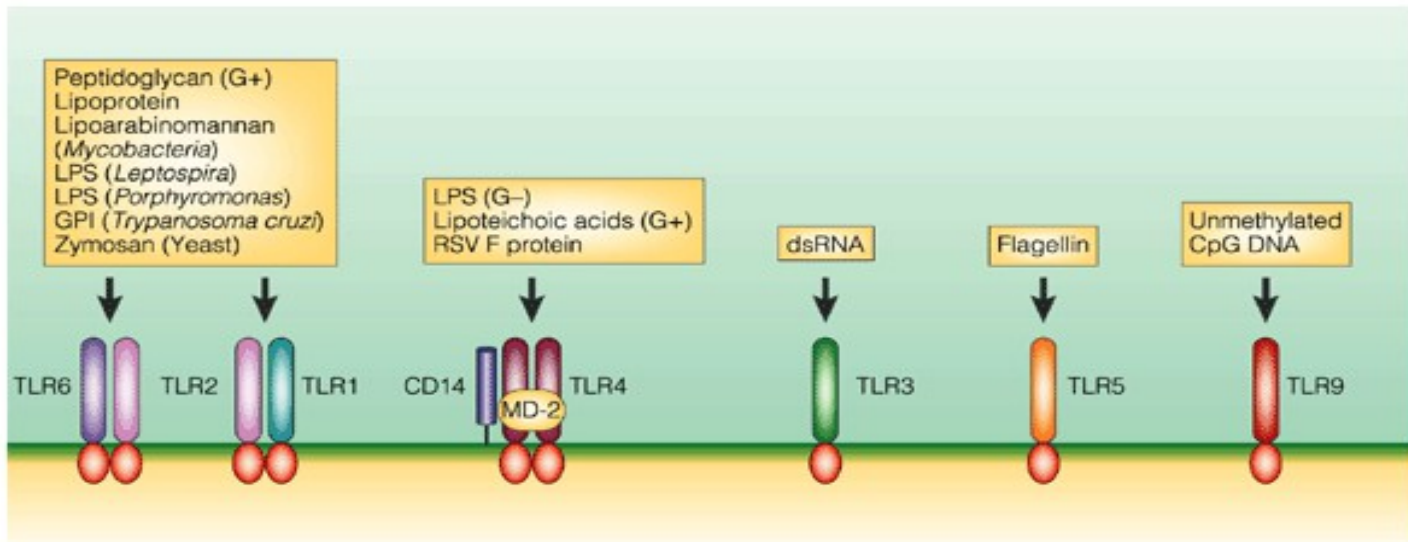
A grayscale electron micrograph of a cell, showing various organelles such as mitochondria, endoplasmic reticulum, and a nucleus. The image is used as a background for the text.

**Immunomodulators**

**Interferon-inducers**

**Toll-like Receptor Agonists**

# Toll-like Receptors



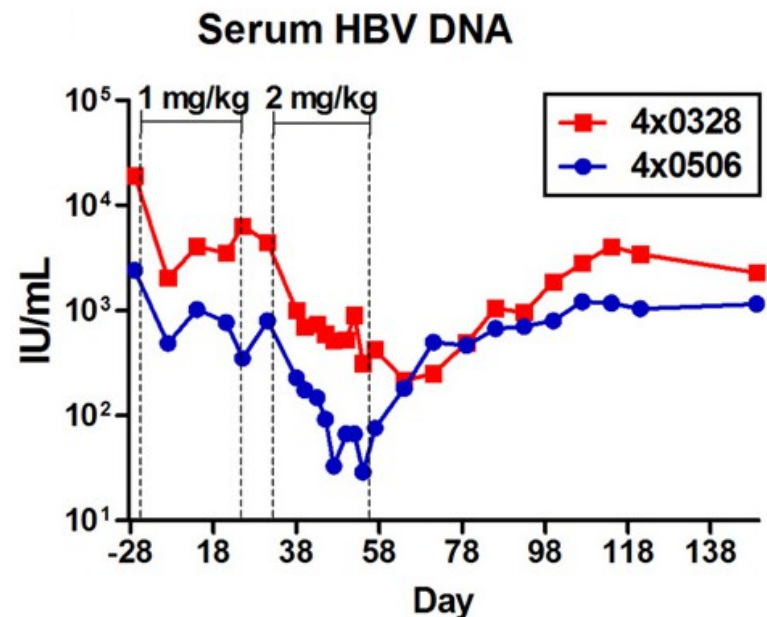
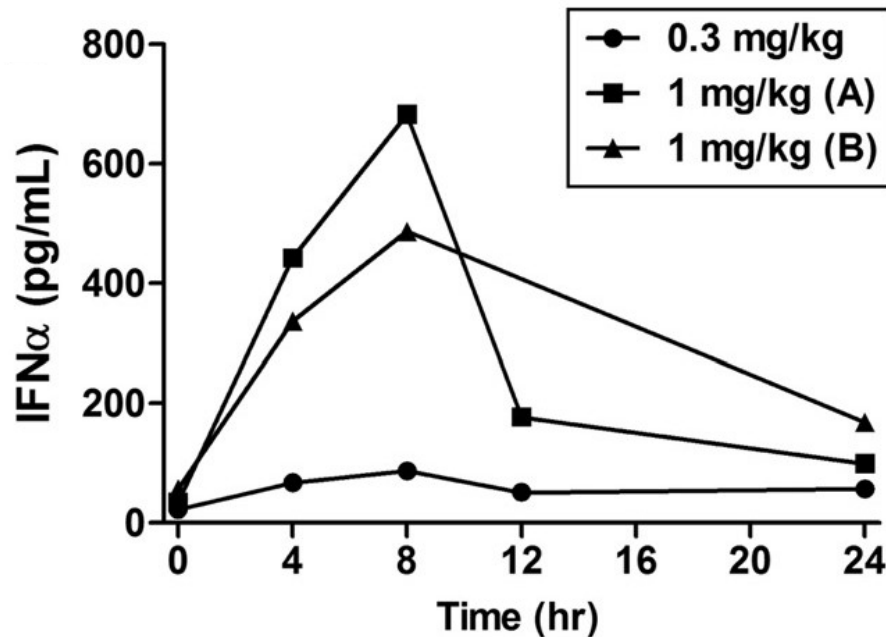
- Play a key role in innate and adaptive immunity
- Recognize structurally conserved molecules from microbes as pattern recognition receptors (PRR)
- Induction of type I interferons and other cytokines
- More than 13 different TLRs
- TLR3: viral dsRNA; TLR7/8: viral ssRNA; TLR9: CpG DNA sequences

# TLR Agonists in Clinical Development for Viral Hepatitis

- **TLR3 agonist**
  - Poly ICLC (Hiltonol), anti-cancer drug, preclinical development as antiviral, good safety profile (**Oncovir**)
- **TLR7 agonist: preferred for antiviral therapy**
  - Imidazoquinoline: Imiquimo (Aldara), Resiquimod, PF-4878691 (**3M/Coley/Pfizer**)
  - Nucleoside analog: ANA245 (Isatoribine), 975, 773 (**Anadys/Roche**); SM-276001 (**Sumitomo**), GS-9620 (**Gilead**)
  - Weak antiviral effects (HCV) in clinical trials and substantial side effects
- **TLR8 agonist: proinflammatory, cancer therapy**
  - VTX-2337 and 1463 (**VentiRx**)
- **TLR9 agonist: weaker interferon inducer**
  - CPG10101 (**Coley/Pfizer**), IMO-2125 (**Idera**)
  - Weak antiviral (HCV) effects in clinical trials; vaccine adjuvant

# Effect of GS-9620 in HBV-Infected Chimpanzees

- Potent interferon-inducer and high selectivity, high hepatic extraction and less systemic exposure
- Three HBV-infected chimpanzees
- GS-9620 at 1-2 mg/kg, oral administration, 3 times weekly for 4 weeks
- Follow viral titers, and levels of IFN- $\alpha$  and interferon-stimulated genes in both serum and liver



# **TLR Agonists for Viral Hepatitis Therapy**

- **Oral formulation**
- **Less systemic exposure**
- **Side effects the major concern**
- **Better compliance**
- **Combination therapy with NA in HBV patients**
- **Interferon-intolerant patients and limited access to DAAs in HCV patients**

# **New Interferons and Immunomodulators: Take Home Messages**

- **Probably no advantage in HCV therapy**
- **Potentially of value in HBV therapy**
- **Newer forms of IFNs need to be tested against standard Peg-IFN for various parameters**
- **TLR agonists in development and have promise**
- **Need to be used in combination with other anti-HBV drugs**
- **Potentially curative in HBV**