

Protocol for a UK phase-2 clinical trial of 4'-phosphopantetheine for PKAN

Robert Spaul^{1,2}, Penny Hogarth³, Susan Hayflick³, Manju A Kurian^{1,2}

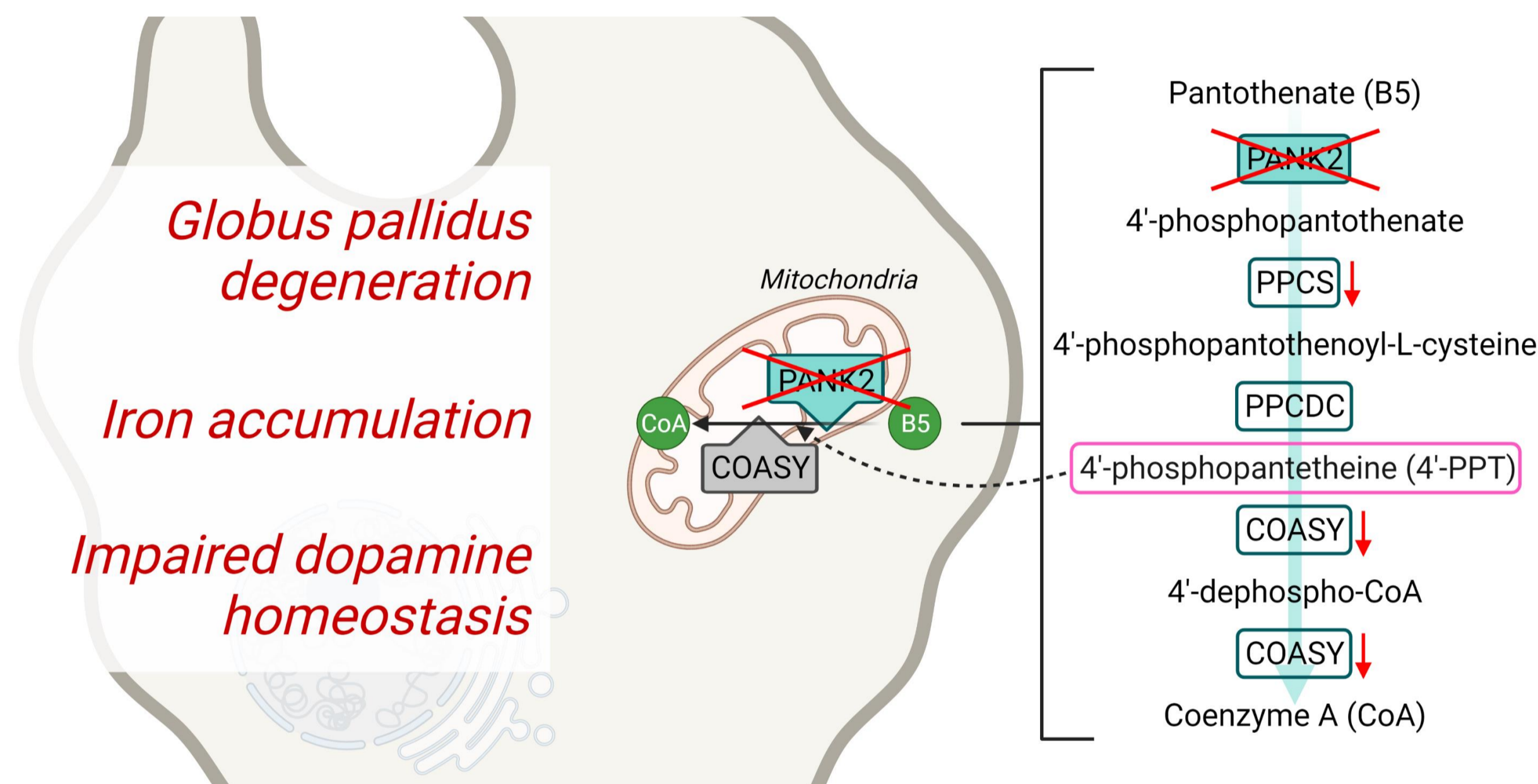
¹ UCL Great Ormond Street Institute of Child Health, Zayed Centre for Research into Rare Disease in Children, UCL, London, UK; ² Great Ormond Street Hospital for Children NHS Foundation Trust, London, UK;

³ Departments of Molecular & Medical Genetics and Neurology, Oregon Health & Science University, Portland, Oregon, USA



BACKGROUND

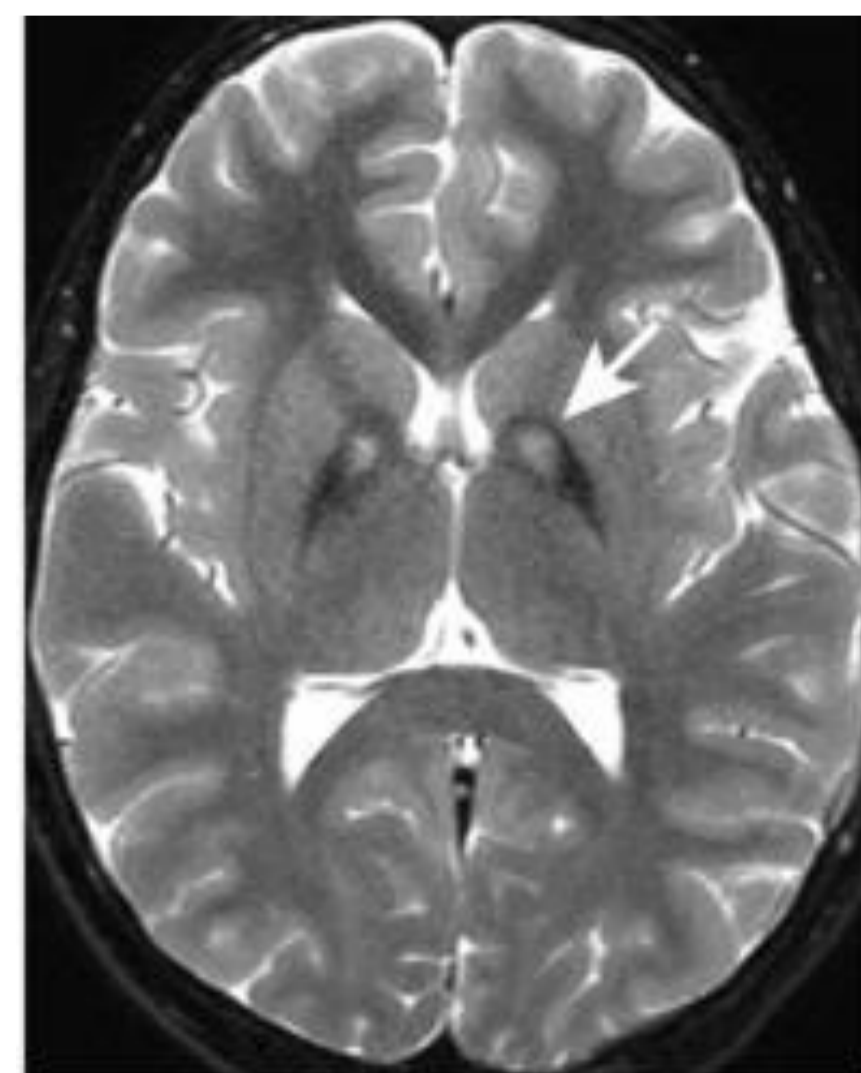
Pantothenate kinase-associated neurodegeneration (PKAN), a Neurodegeneration with Brain Iron Accumulation (NBIA) disorder, is an inborn error of vitamin B5-coenzyme A (CoA) metabolism caused by biallelic mutations in the *PANK2* gene.



Vitamin B5 – CoA pathway and biological consequences of PKAN

Children with classic PKAN present at a mean age of 3.4 years, often with gait difficulties and clumsiness; the atypical form presents later in adolescence or early adult life and progresses more slowly.

PKAN is characterized by a severe movement disorder, cognitive and neuropsychiatric involvement, pigmentary retinopathy and pathological iron accumulation in the basal ganglia; these cause profound disability and risk of premature mortality.



Eye of the tiger sign - pathognomonic of PKAN

PROPOSED THERAPY

There are no proven disease-modifying treatments for PKAN currently.

PKAN is caused by functional loss of the mitochondrially-located *PANK2* enzyme which phosphorylates vitamin B5 (pantothenate) in the first step of CoA metabolism. CoA is essential for the tri-carboxylic acid cycle, fatty acid oxidation and synthesis, amino acid metabolism and neurotransmitter synthesis, serving more than 9% of mammalian biochemical reactions.

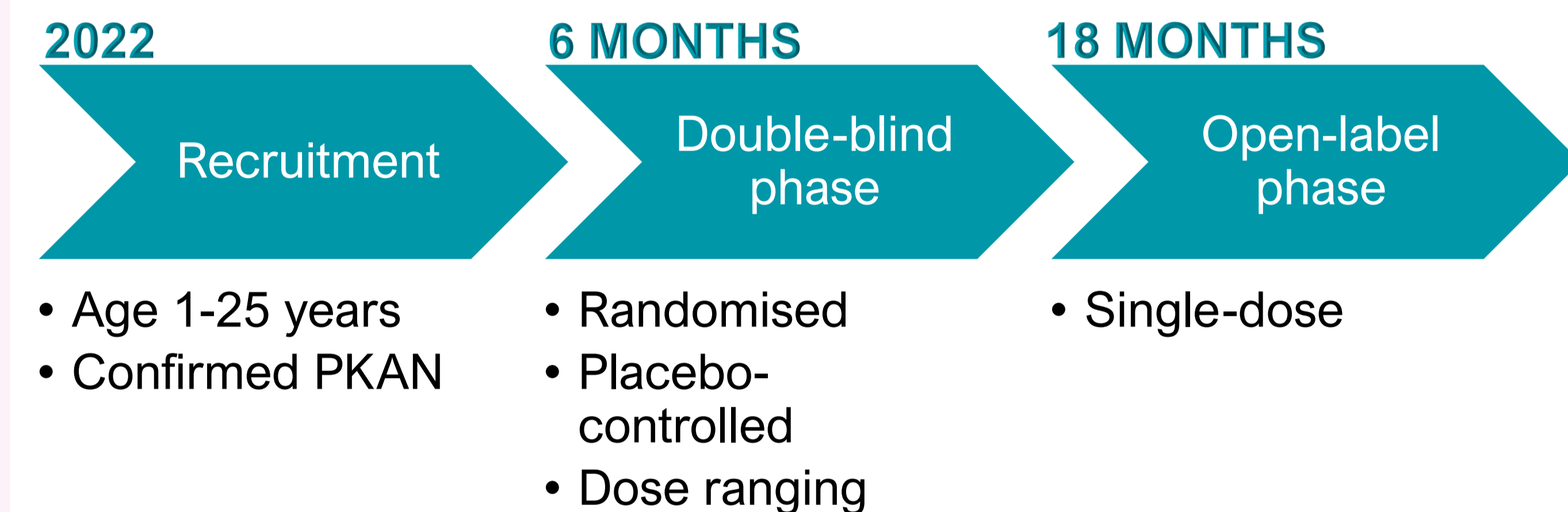
This trial will assess the safety and tolerability of 4'-phosphopantetheine (4'-PPT):

- Endogenous precursor to CoA
- Found in all cells and many foods
- Corrects disease-specific phenotypes in cultured human cells and the *Pank2*-knock out mouse model
- No toxicity at very high doses in animal models
- Suitable for development as a Food for Special Medical Purpose
- Single daily enteral dose
- Long term aim to license as a food supplement (FSMP)

**Single-centre trial based at
Great Ormond Street Hospital
Please refer patients for consideration
of suitability (contact details below)**

TRIAL DESIGN

This is a phase-2 clinical trial of enteral 4'-PPT administered once per day to 24 participants aged 1-25 years. A 6-month placebo-controlled, double-blinded, dose-ranging phase will be followed by an 18-month open-label, single-dose phase.



Outcome measures

Primary:

- Safety and tolerability (regular blood test and side effect monitoring)

Secondary:

- Biomarker – blood expression of *COASY* mRNA (last enzyme in the CoA synthesis pathway, see figure left panel)

Exploratory:

- Visual electrodiagnostic assessments
- Questionnaire and examination-based disease rating scales
- Activity of daily living scales
- Dystonia scores
- Quality of life scores

CONTACT

Dr Robert Spaul
Professor Manju Kurian

[Robert.Spaul \[at\] NHS.net](mailto:Robert.Spaul@nhs.net) (for any patient details)
[Manju.Kurian \[at\] gosh.nhs.uk](mailto:Manju.Kurian [at] gosh.nhs.uk)

REFERENCES

Jeong, S. Y. *et al.* 4'-Phosphopantetheine corrects CoA, iron, and dopamine metabolic defects in mammalian models of PKAN. *EMBO Molecular Medicine* 11, e10489 (2019)
Hogarth, P. *et al.* Consensus clinical management guideline for pantothenate kinase-associated neurodegeneration (PKAN). *Mol Genet Metab* 120, 278–287 (2017)
Spaul, R. V. V., Soo, A. K. S., Hogarth, P., Hayflick, S. J. & Kurian, M. A. Towards Precision Therapies for Inherited Disorders of Neurodegeneration with Brain Iron Accumulation. *Tremor* 11, 51 (2021)
Srinivasan, B. *et al.* Extracellular 4'-phosphopantetheine is a source for intracellular coenzyme A synthesis. *Nature Chemical Biology* 11, 784–792 (2015)

CoA-Z
PHASE II TRIAL



LifeArc