# Alzheimer's: Inhibiting Plaque Formation

Immunoliposome directed drug delivery

# Alzheimer's Impact

- Alzheimer's lowers quality of life
- Importance of memory
- Longer life (Alzheimer's is ultimately fatal)
- An estimated 26.6 million people 65 years and older had Alzheimer's worldwide in 2006

### Beta Amyloid Protein

- Strong correlation between Alzheimer's and beta-amyloid plaques
- Causes neural degeneration
- Beta amyloid protein vs. beta pleated sheets

Image removed due to copyright restrictions.

#### Purpose

- To target a specific component of Alzheimer's
  - Beta-amyloid protein
- Reduce neural damage
  - By inhibiting the formation of plaques

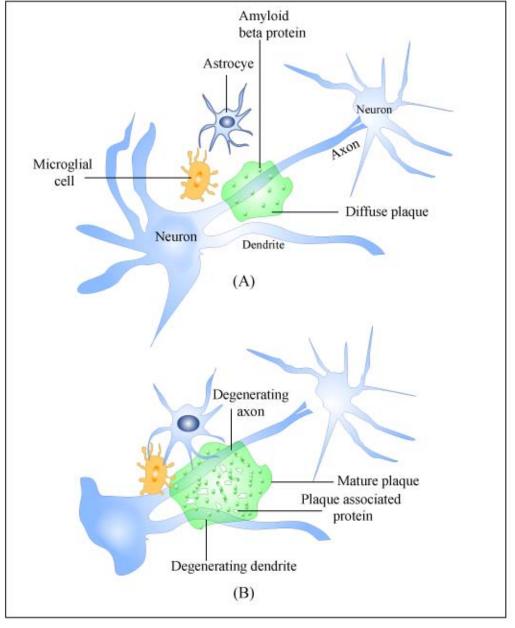


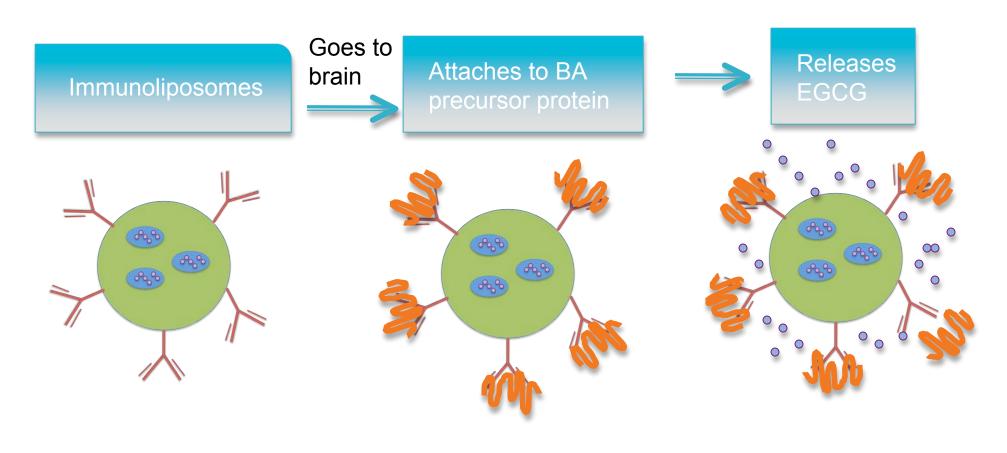
Figure by MIT OpenCourseWare.

# Epigallocatechin gallate (EGCG)

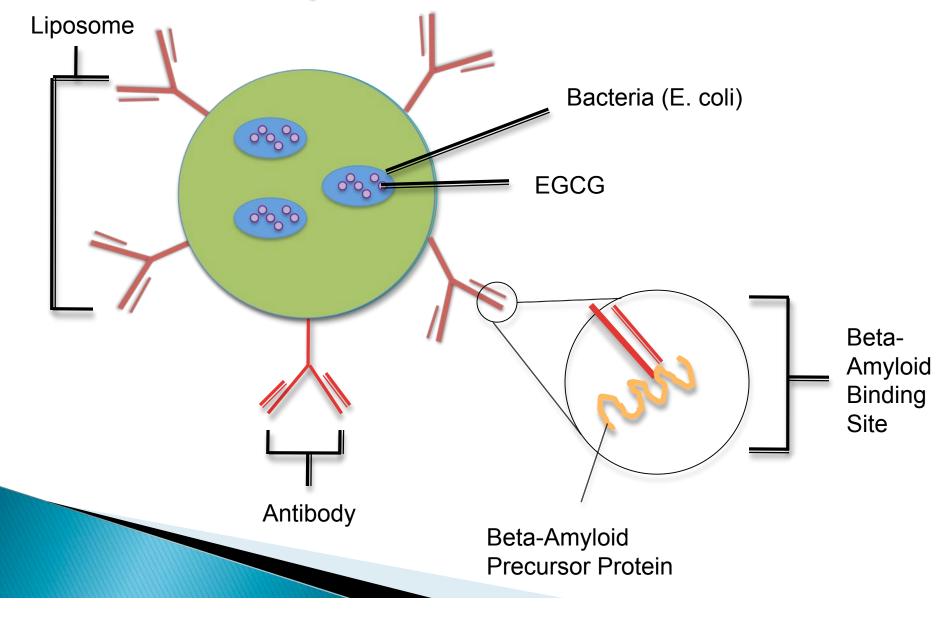
 A polyphenol with many antioxidant properties found in many plants

Binds to BA
 precursor protein,
 prevents it from taking final shape with its potent iron chelating abilities

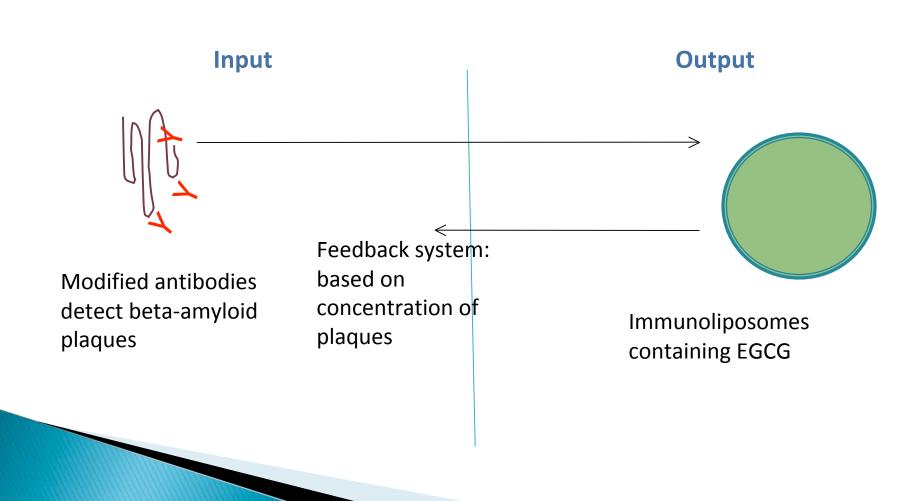
# General System Diagram



### Immunoliposome Structure



# Device Diagram



#### Devices

- → Drug Delivery Device
  - -Immunoliposome
- Beta-amyloid Detector
  - -Receptor sequence on antibody
- Trigger
  - -Release of EGCG

Input Output

B-A
Binding

Trigger

EGCG

B-A

Detector

Output

**Binding** 

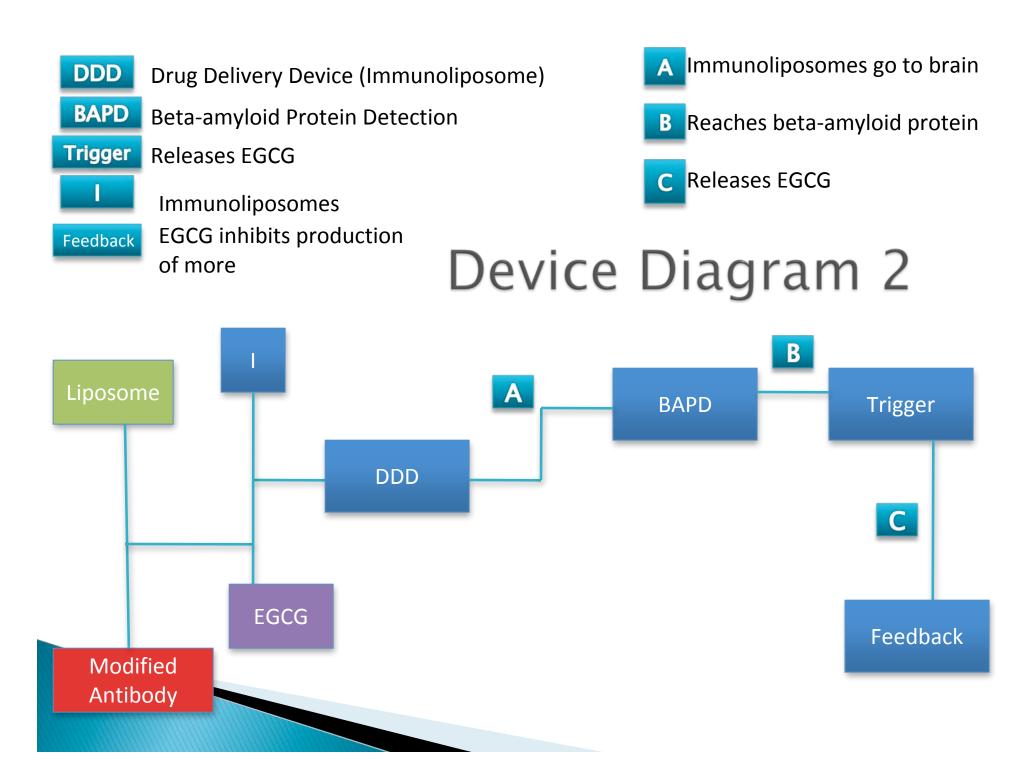
- Stop/Feedback Mechanism
  - -Large amount of EGCG inhibits production of EGCG

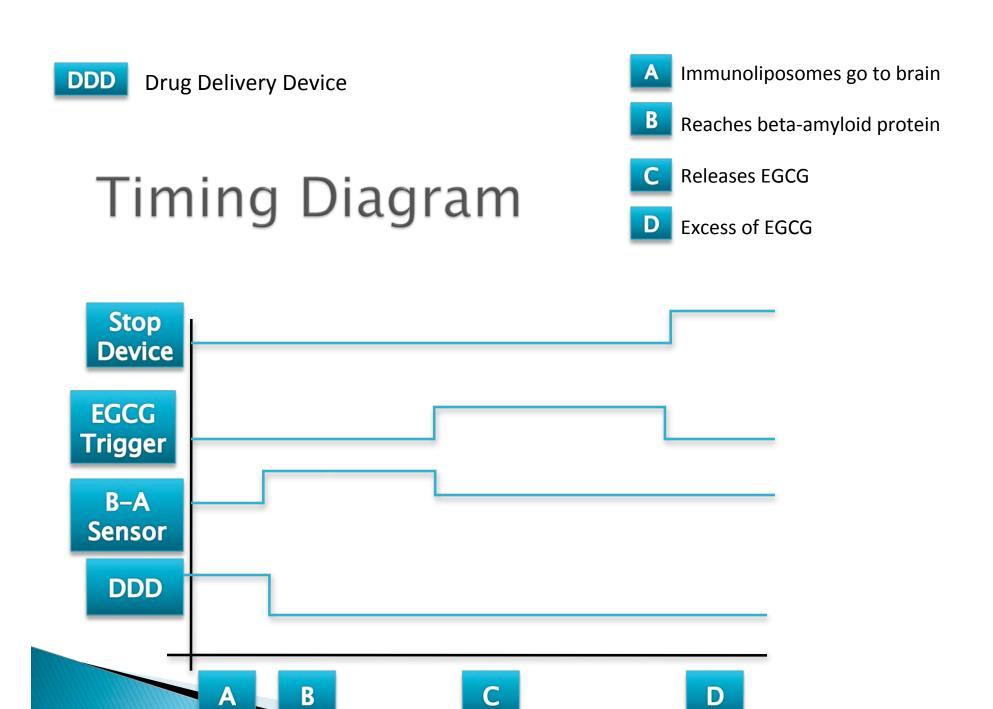


Input

B-A

**Protein** 

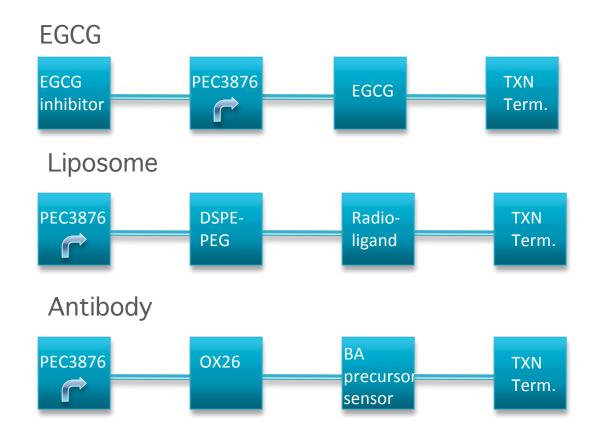




#### **Parts**

PARTS	
Liposome	DSPE-PEG
Monoclonal Antibody	OX26
Radioligands	
Beta-Amyloid Sensor	
E. Coli Promoter	PEC3876
EGCG gene	
EGCG Inhibitor Enzyme	
Transcription Terminators	

# Parts (Sequence)





#### = RBS

# Feedback System



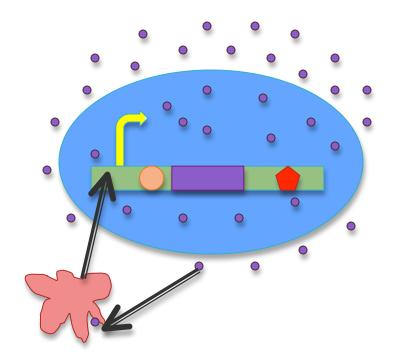
= Terminator E. Coli Cell

EGCG

Gene

EGCG

Inhibitor

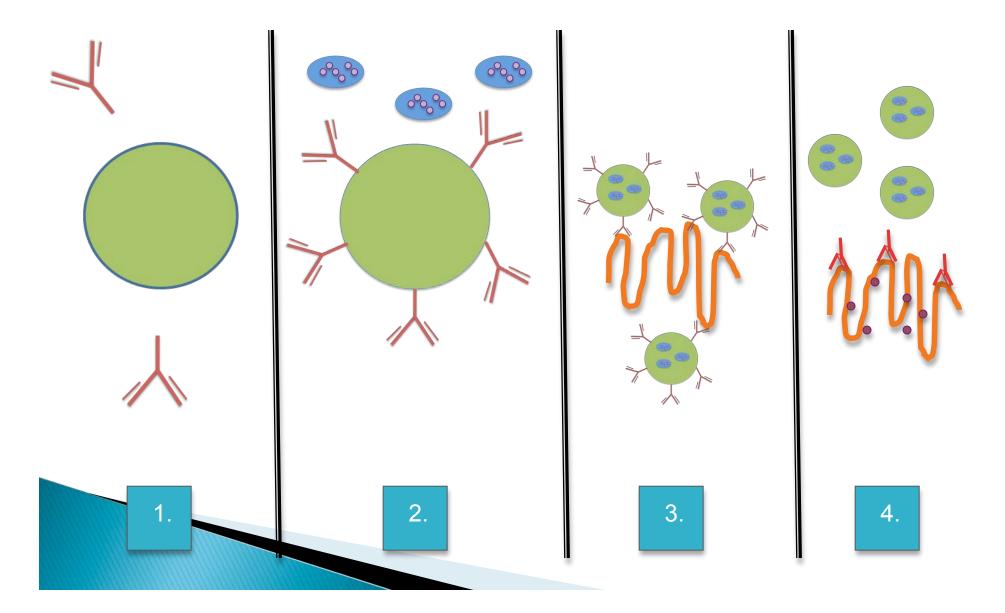


In excess concentrations of EGCG, EGCG binds to inhibitor which binds to the promoter site to prevent the production of more EGCG.

# Testing/Debugging

- Clinical trials with mice with Alzheimer's
- Need to determine:
  - 1. Amount of EGCG needed
  - 2. Side effects of excess EGCG
- Test that:
  - 1. Liposome binds to antibody
  - 2. Insertion of bacteria
  - 3.Immunoliposome attaches to BA proteins
  - 4. EGCG is released

# Debugging Steps



# Overall System

- Image brain for beta-amyloid plaques
  - o If plaques have not formed
    - Overall system has the desired effect
  - o If plaques have formed
    - Overall system is not working
    - Check individual parts of the system for problems

#### 1. Formation of Immunoliposome

- Test in vitro
  - Chromatography
    - Separates liposomes, antibodies, and bonded antibodyliposomes
    - Bonded immunoliposomes heaviest
    - Select for attached antibody-liposomes

#### 2. Insertion of Bacteria

- Test in vitro
  - Set-up: Known amount of bacteria into solution with immunoliposome
  - Chromatography:
    - Immunoliposomes with bacteria will be heavier and travel a shorter distance than immunoliposomes without bacteria

### 3. Beta-Amyloid Detection

- Isolate BA precursor protein from brain
- Introduce known amount of immunoliposomes in culture
- Determine change in immunoliposome levels
- "Radioligands" probe that can pass through blood-brain barrier and detect/label plaques, which can then be imaged

# 4. Drug Release

- Place immunoliposomes with EGCG-containing bacteria in solution with beta-amyloid precursor protein
- If all previous steps work
  - Concentration of EGCG in solution should increase when beta-amyloid protein introduced
  - If concentration of EGCG does not increase check trigger device

#### **Unknowns/ Possible Issues**

Does B-A secrete anything?

Make sure fat degrades in brain and does not build up

How does binding to B-A trigger release of EGCG? (What pathway?)

How do we put the bacteria into the immunoliposome? Polycarbonate membrane extrusion

Can we replicate the parts of immunoliposomes with E.Coli?

Do the antibodies have to be specific to each person?

Can we have the bacteria degenerate with the immunoliposome?

#### Important Pros and Cons

#### Pros

- Immunoliposome gets past the blood-brain barrier
- -Efficient/Concentrated Drug Delivery
- -Beta-amyloid Specific Targeting
- Feedback based on concentration of EGCG

May cure disease but have side effects

#### Cons

- -Bacteria in the brain
- -Does not address all causes of Alzheimer's
- -May need large quantities of EGCG to be effective
- -Hard to test in vitro

#### Costs

- DSPE-PEG 2000 in Chlorophyll Solution (C) 25mg => \$195
- E. coli promoter (PEC3876) => \$80
- Radioligands => \$150
- Antibodies (OX26) => \$3,900
- Estimated Cost: ~\$5000

#### Go?

- Main difficulty: moving substances into brain past blood-brain barrier (BBB)
- Current methods:
  - direct injection into brain
  - surgical implantation/catheters
  - All invasive, dangerous, and have limited effectiveness

#### No Go?

- Competition several current techniques in development:
  - o drugs to temporarily open BBB
  - o attachment to nanoparticles
  - Ultrasound
- Unknowns:
  - Side effects of excess EGCG
  - The base cause of Alzheimer's

#### References

- http://pt.wkhealth.com/pt/re/jneu/abstract.00005064-200604020-00020.htm;jsessionid=Jb9H6hf38zQcBBjl2qyypqWpbT0JXnPx wlWM8CpKQWL8zHLnh1ST!-1694466489!181195629!8091!-1
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