



15º CONGRESSO BRASILEIRO DE
**Gastroenterologia
Pediátrica**

19º CONGRESSO LATINO AMERICANO E
10º CONGRESSO IBERO AMERICANO DE
GASTROENTEROLOGIA, HEPATOLOGIA E NUTRIÇÃO

Centro de Convenções de Natal . RN . Brasil

26 a 29 de março de 2014

Trabalhos Científicos

Título: Effect Of Sebelipase Alfa After 90 Weeks In Patients With Lysosomal Acid Lipase Deficiency

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Resumo: Patients with Lysosomal Acid Lipase (LAL) Deficiency present with dyslipidemia, elevated transaminases and hepatomegaly due to the abnormal accumulation of cholesteryl esters and triglycerides. Subjects who completed LAL-CL01, the first-in-human study of sebelipase alfa, were eligible to enroll in LAL-CL04, the extension study. These 8 subjects received 4 once-weekly infusions of sebelipase alfa (0.35, 1 or 3 mg/kg) before transitioning to every-other-week infusions (1 or 3 mg/kg). For the n=6 patients with data available at week 90 of the extension study, sebelipase alfa produced rapid, sustained reductions from the initial pretreatment baseline with mean percent decreases for ALT and AST of 46% (p=0.063) and 36% (p=0.031), respectively. In addition, sebelipase alfa resulted in mean percent decreases from the pretreatment baseline to week 90 of the extension study for LDL-C of 50% (p=0.031), total cholesterol of 33% (p=0.031), triglycerides of 46% (p=0.031), as well as a mean increase in HDL of 40% (p=0.031). More than 300 infusions have been administered and no new significant safety findings have emerged over time with long term dosing. The majority of AEs to date across all patients were mild/moderate and unrelated to sebelipase alfa. Infusion-related reactions were uncommon and the majority were GI related and of mild severity. One patient with a moderate (Grade 2) allergic type infusion-related reaction underwent further testing, but has now resumed treatment in trial. No sebelipase alfa reported SAEs have been reported. No anti-drug antibodies were detected in LAL-CL01 or those tested to date in LAL-CL04. These results suggest that long term every-other-week dosing with sebelipase alfa improves the abnormal serum lipid profile, normalizes serum transaminases in LAL deficient patients. A phase 3 clinical trial is underway to further study the safety and efficacy of sebelipase in children and adults (ARISE study; NCT017571).