

# PRF By The Numbers



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# PRF By The Numbers: A Data Sharing Tool

- PRF By The Numbers is a **data sharing tool** originating from The Progeria Research Foundation's programs and services.
- We translate information collected within our programs and services, and develop charts and graphs which track our progress from year to year.
- This allows you to assess where we've been, and the improvements we've made for children with Progeria.

# Why Sharing Data Is Essential

- According to the National Institutes of Health:  
“data sharing is essential for expedited translation of research results into knowledge, products, and procedures to improve human health.”  
<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-03-032.html>
- In other words, everyone benefits by knowing and learning as much as possible about Progeria - the scientific and medical communities, the public, and the children.



# PRF By The Numbers...Here's How It Works

- We take raw data collected through our programs and services, remove any personal information to protect the participant, and present it to you in a format that is engaging and informative.
- PRF programs and services include:



- The PRF International Registry
- The PRF Diagnostics Program
- The PRF Cell & Tissue Bank
- The PRF Medical & Research Database
- PRF Research Grants
- Scientific Workshops
- Clinical Trial Funding and Participation

# Our Target Audience

- PRF By The Numbers is intended for a broad array of users



Families and children with Progeria



The general public and nonscientists of all ages



Scientists



Physicians



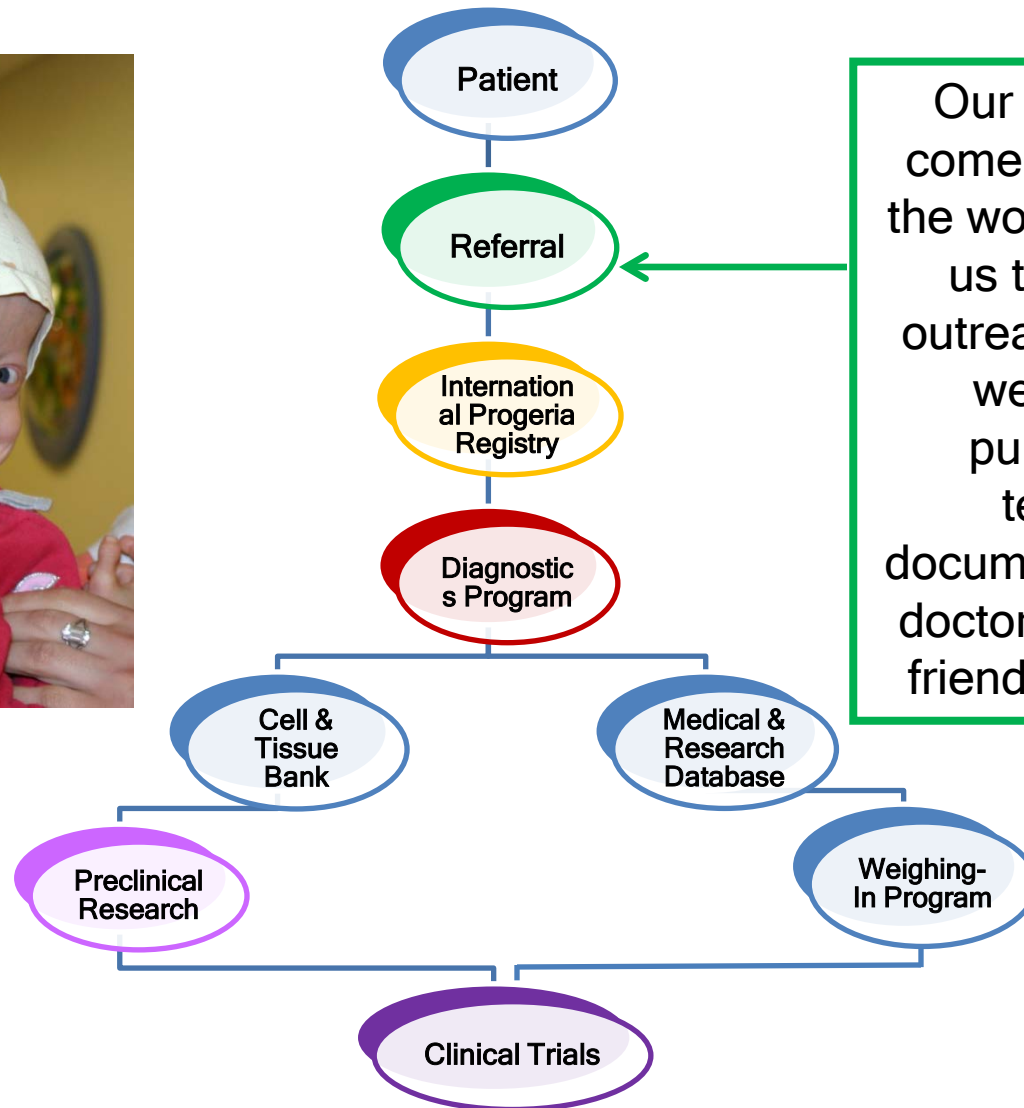
The media

- This means that different types of slides will be of interest depending on who is looking at the information. We have designed this slide set so that you can pull out what is most important to you.
- We love suggestions - if you don't see some facts and figures here that you think would be informative, please let us know at

[info@progeriaresearch.org](mailto:info@progeriaresearch.org)

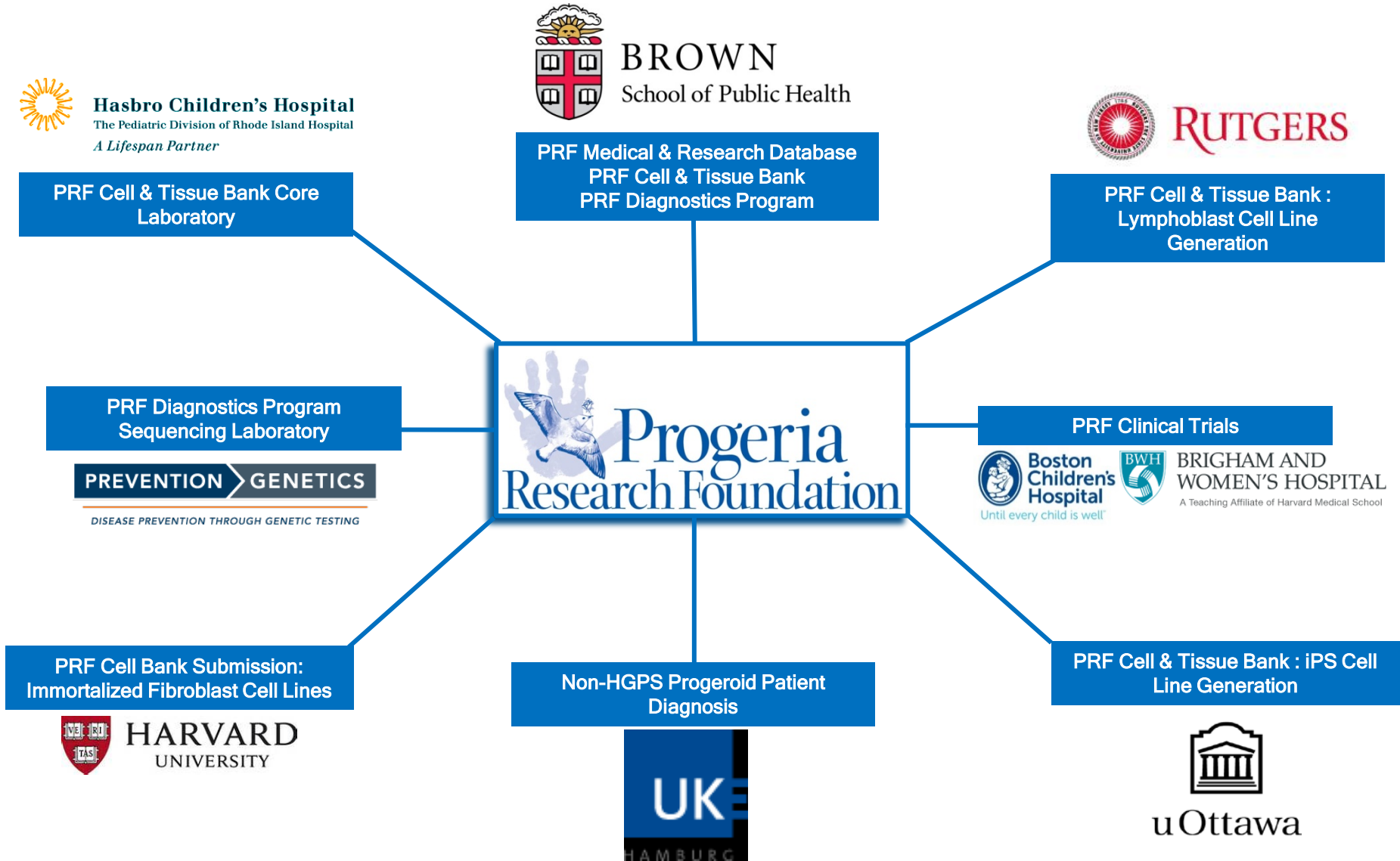


# PRF Programs: It All Starts With The Children



Our participants come from all over the world. They find us through our outreach - the PRF website, our publications, television documentaries, their doctors, neighbors, friends and family.

# Program Collaborations For Success





# Our Program Collaborators

Our collaborating institutions are crucial to our ability to help children with Progeria. We are extremely grateful for these ongoing partnerships:



**Brown University**

Location of The PRF Medical & Research Database  
Program IRB approval



**BROWN**  
Alpert Medical School



**BROWN**  
School of Public Health



**Hasbro Children's Hospital**

Location of The PRF Cell & Tissue Bank  
Program IRB approval



**Hasbro Children's Hospital**  
The Pediatric Division of Rhode Island Hospital  
*A Lifespan Partner*



**PreventionGenetics**

CLIA\*-approved genetic sequence testing



**Rutgers University Cell and DNA Repository**

CLIA\*-approved lymphoblast generation and distribution



**RUTGERS**



**University of Ottawa**

Induced Pluripotent Stem Cell (iPSC)  
CLIA\*-approved generation and distribution



uOttawa

\*<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/IVDRegulatoryAssistance/ucm124105.html>

# Our Clinical Trial Collaborators

Our collaborating institutions are crucial to our ability to help children with Progeria



Harvard University - Associated Hospitals:  
Boston Children's Hospital  
Brigham and Women's Hospital  
Dana Farber Cancer Institute

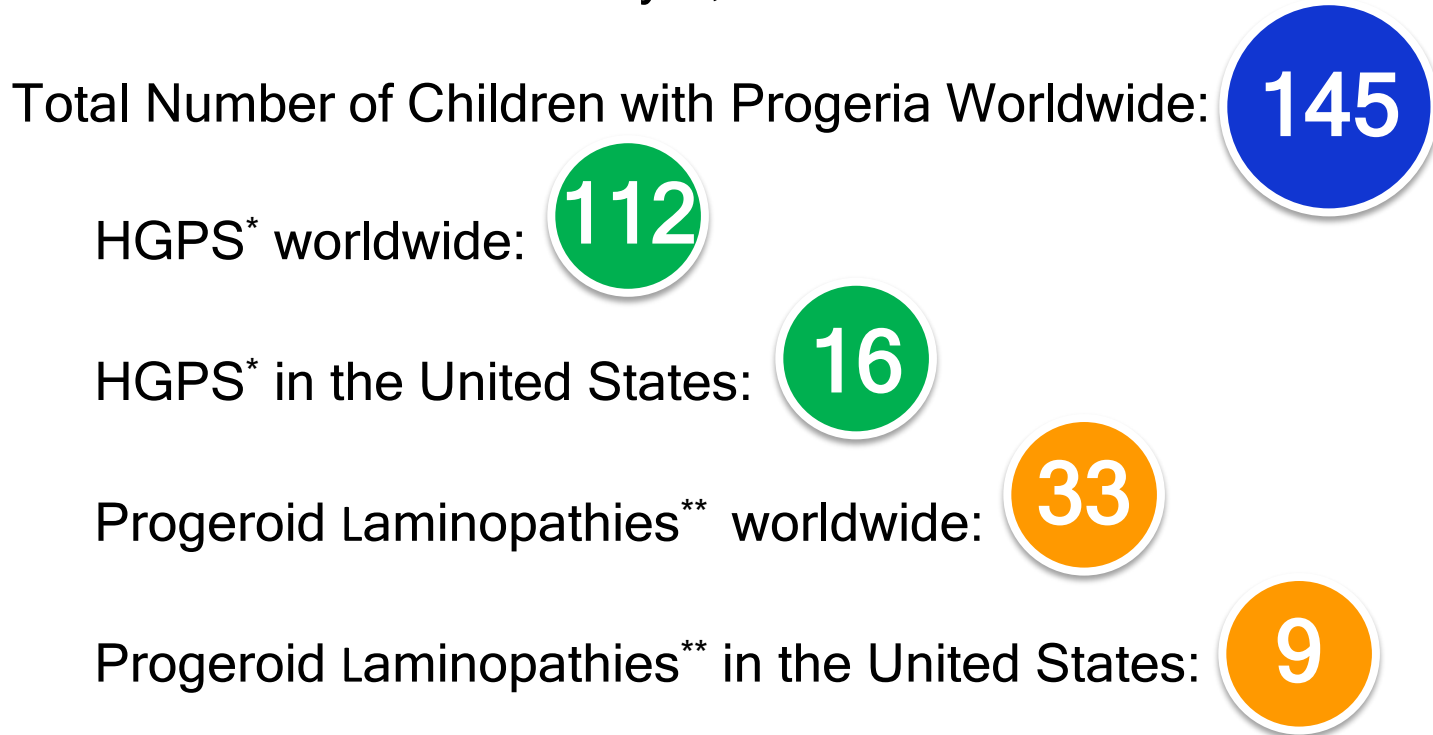


NIH - funded Clinical and Translational Study Unit at Boston Children's Hospital



# Number of Living PRF-Identified Cases

As of July 1, 2017:

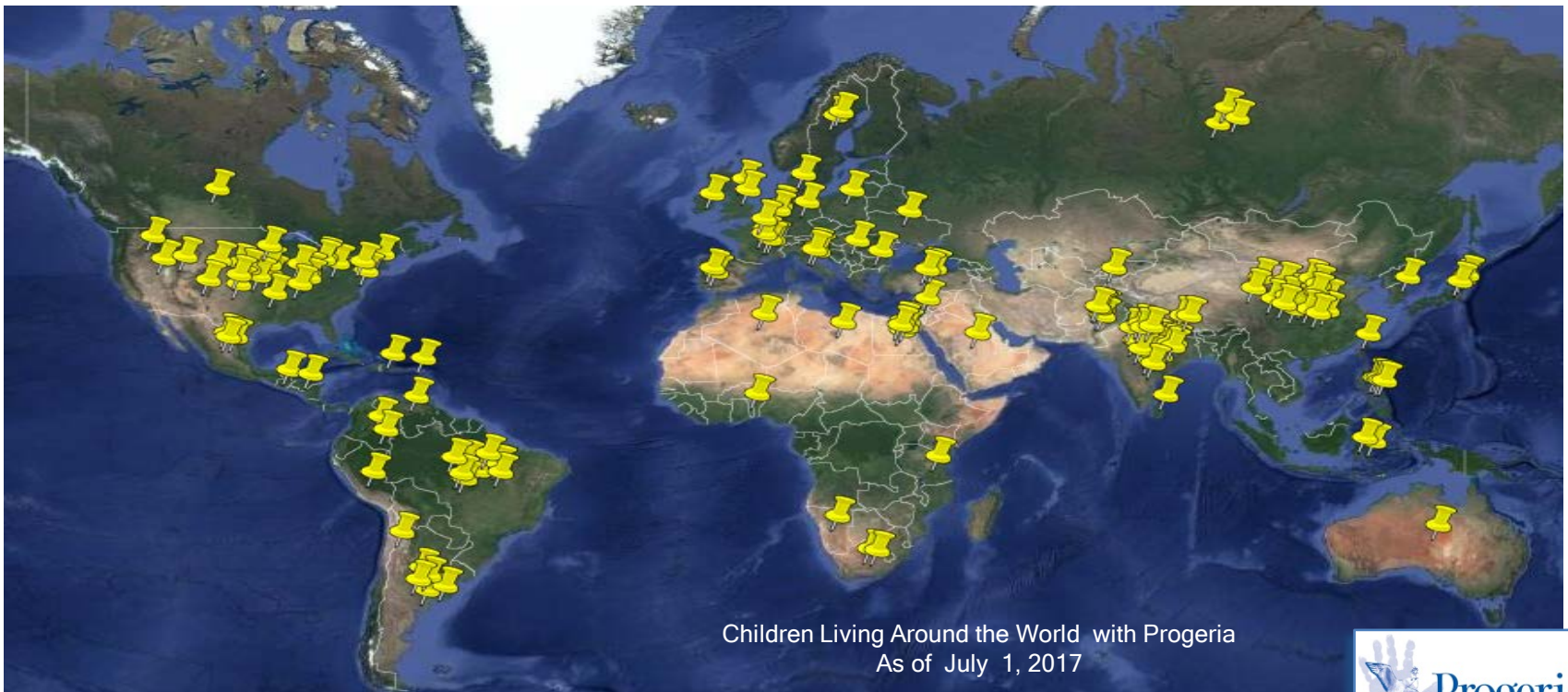


\*Children in the HGPS category have a progerin-producing mutation in the LMNA gene

\*\* Those in the Progeroid Laminopathy category have a mutation in the lamin pathway but don't produce progerin

# PRF-Identified Cases Reside In 46 Countries

Algeria	Canada	Dominican Republic	Guatemala	Israel	Namibia	Poland	South Africa	Tanzania
Argentina	Chile	Egypt	Honduras	Italy	Nepal	Portugal	South Korea	Togo
Australia	China	England	India	Japan	Pakistan	Russia	Sri Lanka	Turkey
Belgium	Colombia	France	Indonesia	Libya	Peru	Saudi Arabia	Sweden	Ukraine
Brazil	Denmark	Germany	Ireland	Mexico	Philippines	Serbia	Tajikistan	USA
							Taiwan	Venezuela



# ...and Speak 30 Languages

Arabic	French	Italian	Pashto	Spanish	Tamil
Chinese	German	Japanese	Polish	Swahili	Telugu
Danish	Hebrew	Kannada	Portuguese	Swedish	Turkish
Dutch	Hindi	Korean	Russian	Tagalog	Urdu
English	Indonesian	Marathi	Serbian	Tajik	Uzbek

прогерии исследовательский фонд

مؤسسة أبحاث الشيخا

早衰症研究基金會

Progeria रिसरच फाउंडेशन



조로증 연구 재단

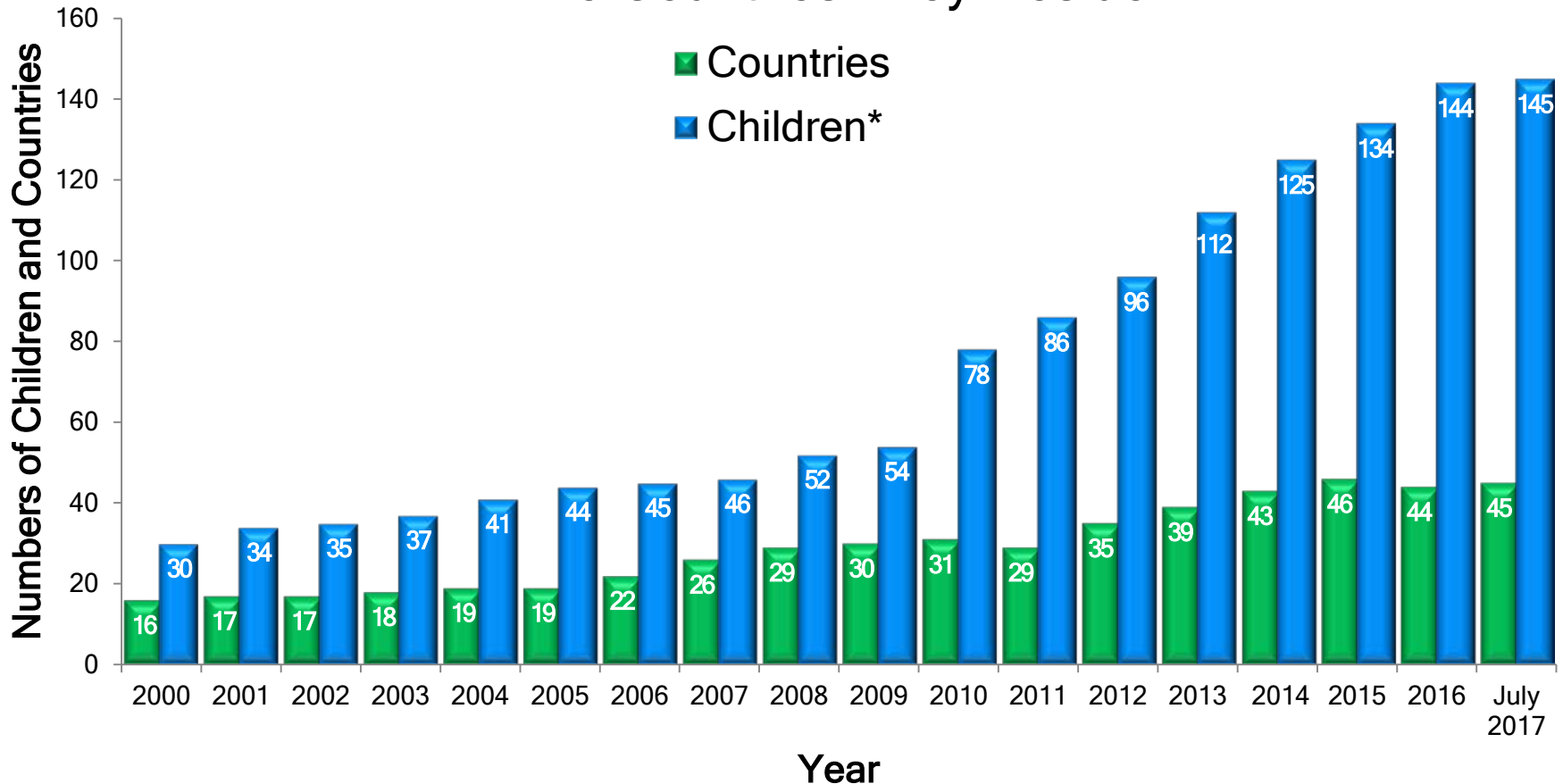
Progeria Araştırma Vakfı

早老症研究財団

బాలుడ బాలిక వయస్సు ముదరుకండానే వృద్ధాప్యరూపంలోనికి వచ్చుట రీసెర్చ్ ఫౌండేషన్

# Every Year Our Numbers Grow

Living Children PRF Has Identified with Progeria and The Countries They Reside In\*



\*When a child passes away, numbers are decreased.

Numbers include those with HGPS and genetically confirmed Progeroid Laminopathies

# Tracking Children with Progeria Through Prevalence

- How does PRF estimate how many children we are searching for, and in what countries? We use *population prevalence*.
- Prevalence is the proportion of children with Progeria per total population.

# How Prevalence Is Estimated

- At PRF, we use a formula based on the number of children we've identified in the US. We then expand that out to the world population.
- We do this because we have the most complete reporting for the US and since Progeria has no gender, ethnic, or other biases, we assume that the prevalence in the US is the same prevalence in other countries.
- PRF estimates prevalence for years when the official US census provides a reliable population number.



# USA Prevalence of Progeria

January 2017 population statistics:



The US population was:

**324,309,805** people



Number of PRF-identified children with Progeria in the US:

**16**



Prevalence of HGPS in the US:  
16 in 324 million is about

**1 in 20** million people



# Prevalence and World Population of Progeria

Given the world population as of January 2017

there are between **350** and **400** children living with Progeria worldwide.



**PRF strives to find every child with Progeria because in order to help every child, we must find every child**

# Using Prevalence To Find Children In A Certain Country

We can now use the total population estimates for any given country, in order to understand whether we have found most or all children in a particular country.

➤ For example, as of January 2017:

👤 Brazil's population was estimated as

**210,867,000** people

👤 Number of children living with Progeria in Brazil is

$210,867,000 / 20,000,000 =$

**10**



Source Brazil population: [http://en.wikipedia.org/wiki/List\\_of\\_countries\\_by\\_population](http://en.wikipedia.org/wiki/List_of_countries_by_population)

# International Progeria Registry\*

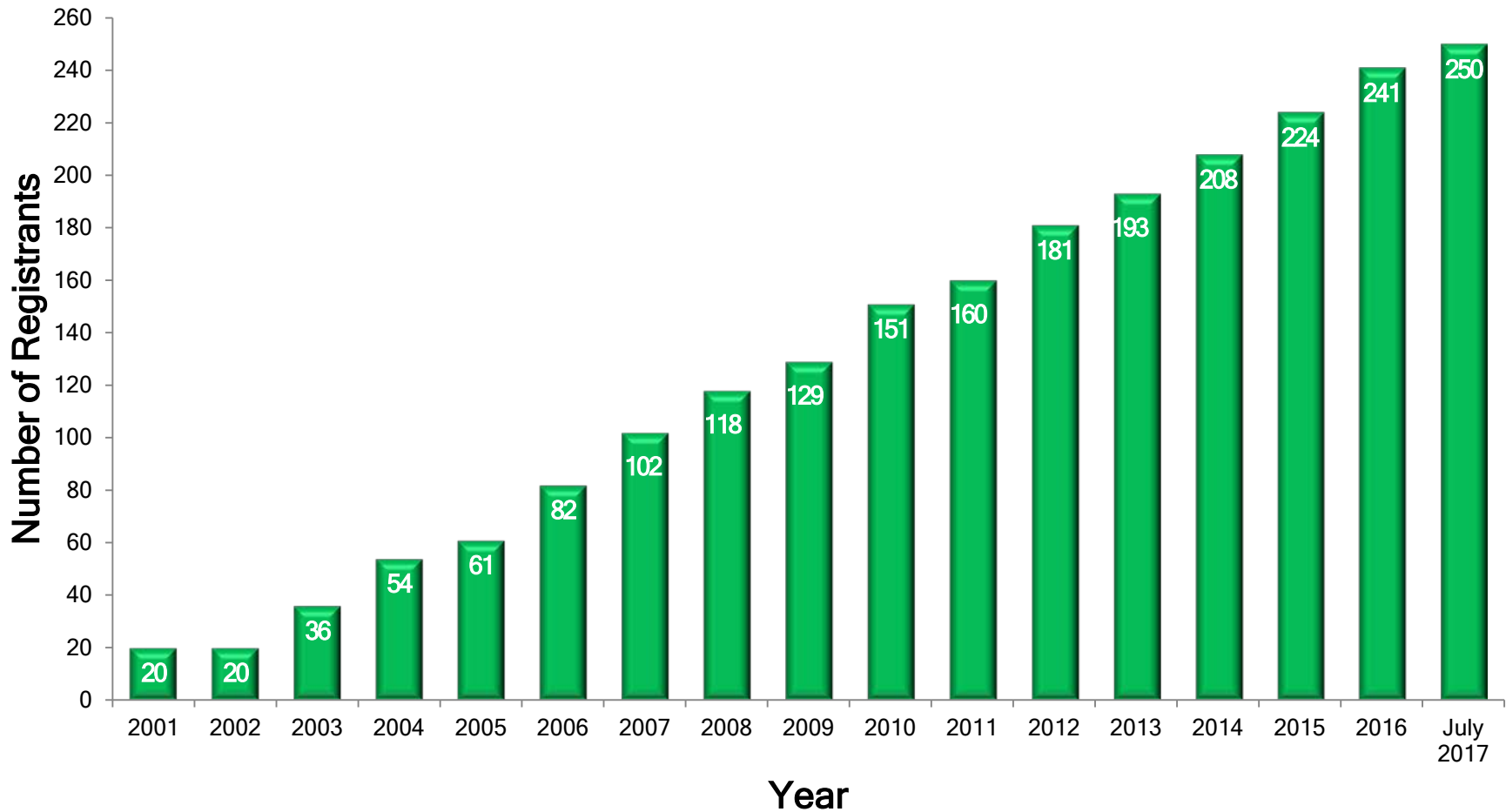
## Program Goals:

- Patient identification
- Outreach to patient families and their physicians
- A springboard for program enrollment

Registry forms available at [www.progeriaresearch.org/patient\\_registry](http://www.progeriaresearch.org/patient_registry)

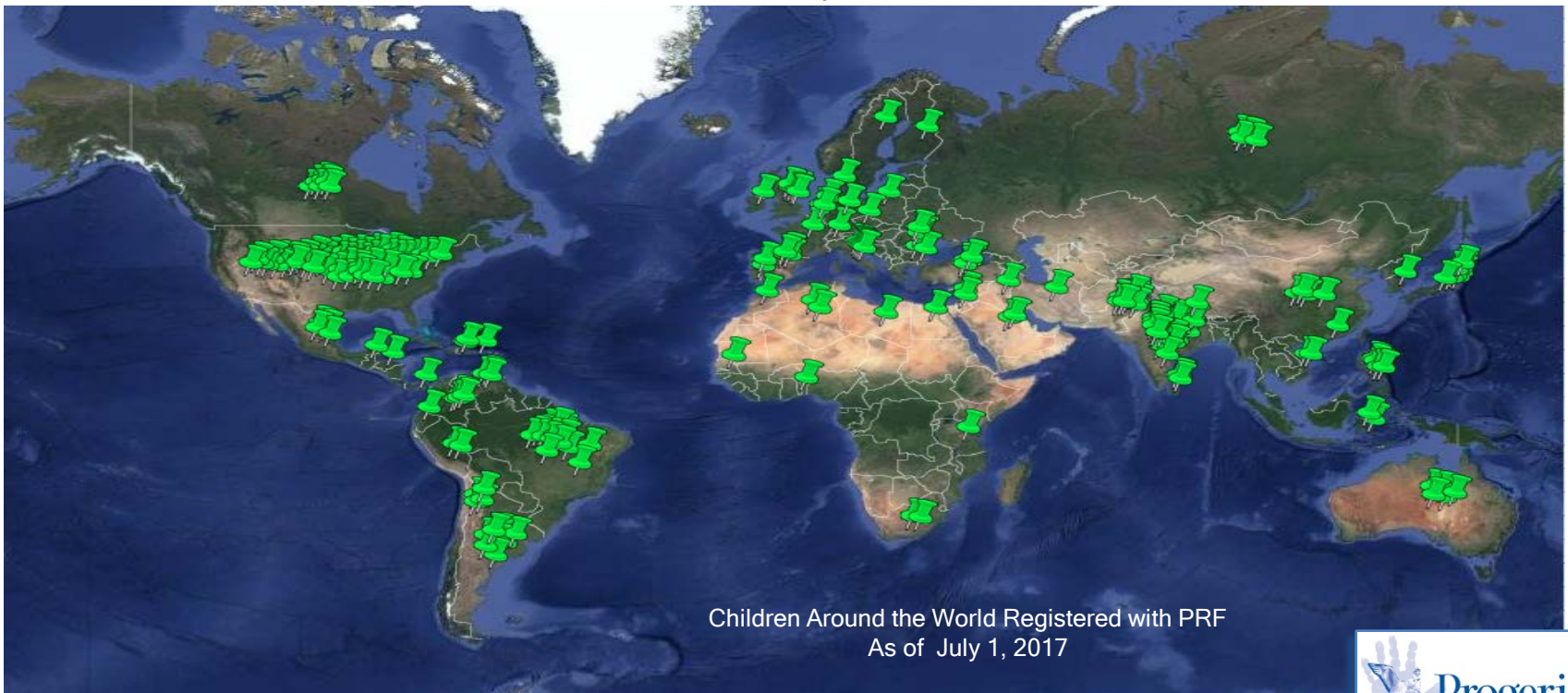
\*PRF International Registry includes those with genetically confirmed or clinically suspected Progeria, as well as those with other possible progeroid syndromes

# 250 Children Have Registered With PRF



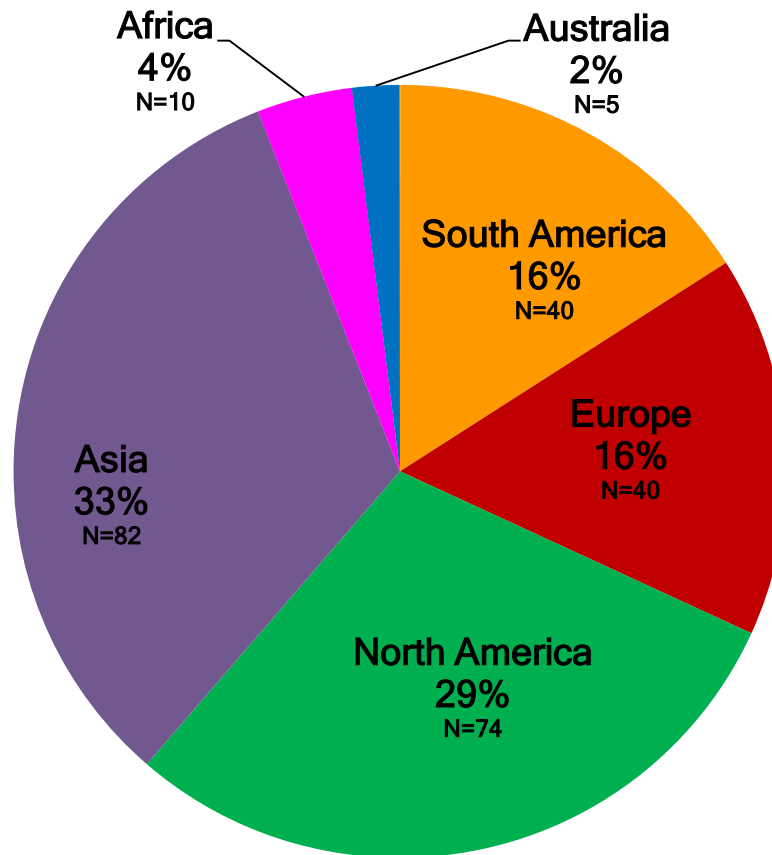
# ...From 59 Countries

Algeria	Canada	Dominican Republic	Germany	Iran	Mexico	Philippines	Senegal	Tanzania
Argentina	Chile	Ecuador	Guatemala	Iraq	Morocco	Poland	South Africa	Togo
Australia	China	Egypt	Honduras	Ireland	Nepal	Portugal	South Korea	Turkey
Belgium	Colombia	England	Hong Kong	Israel	Netherlands	Puerto Rico	Spain	Ukraine
Brazil	Czech Republic	Finland	India	Italy	Pakistan	Romania	Sri Lanka	USA
Bulgaria	Denmark	France	Indonesia	Japan	Panama	Russia	Sweden	Venezuela
				Libya	Peru	Saudi Arabia	Switzerland	Vietnam



# ...And All Continents

Participation (%) By Continent






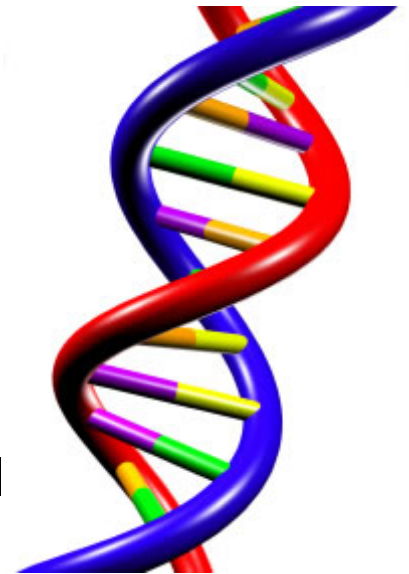
# PRF Diagnostics Program

## Program Goal:

- Genetic Sequence Testing for Progeria-causing mutations

## Pre-requisites for Testing:

- Registration with PRF International Registry
- One or more of the following
  -  Family history - proband, prenatal
  -  Phenotypic presentation - proband, postnatal
  -  Relative of positive proband



Testing information available at

[www.progeriaresearch.org/diagnostic\\_testing](http://www.progeriaresearch.org/diagnostic_testing)



# Diagnostics Testing Summary

As of July 1, 2017:

Total Number of Proband Tests Performed:

133

Exon 11 (HGPS) Mutations:

91

Other Progeroid Laminopathies (Exons 1 - 12):

10

Zmpste24 Mutations :

2

Average Number of Patients Tested Per Year :

9

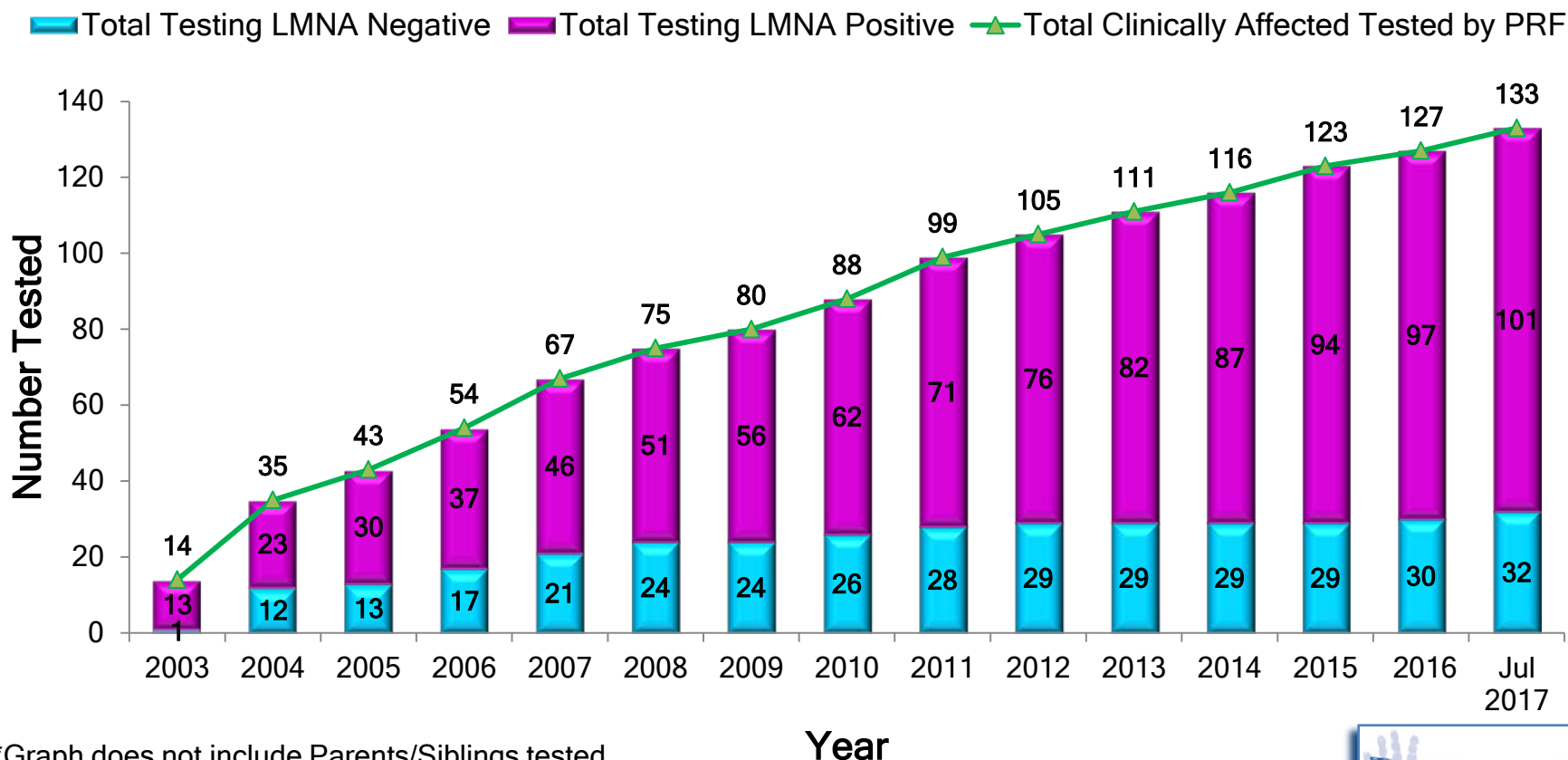
All tests are performed in a Clinical Laboratory Improvement Amendments (CLIA) certified facility.

# Mutations Identified Through PRF Diagnostics Program

DNA Mutation	Amino Acid Effect	Zygoty	Progerin Producing?	Number Diagnosed
<b>Classic HGPS - LMNA Mutation</b>				
1824 C>T, exon 11	G608G	heterozygous	Yes	78
<b>Non Classic HGPS- LMNA Mutation</b>				
1822 G>A, exon 11	G608S	heterozygous	Yes	4
1821 G>A, exon 11	V607V	heterozygous	Yes	2
1868 C>G, exon 11	T623S	heterozygous	Yes	1
1968+5 G>C, intron 11	-----	heterozygous	Yes	2
1968+1 G>C, intron 11	-----	heterozygous	Yes	2
1968+2 T>A, intron 11		heterozygous	Yes	1
1968+1 G>A, intron 11		heterozygous	Yes	1
<b>Progeroid Laminopathy- LMNA Mutation</b>				
1579 C>T, exon 9	A527C	heterozygous	No	1
1579 C>T, exon 9	A527C	homozygous	No	6
1580G>T, exon9	A527L	Homozygous	No	1
1619 T>C, exon 10	M540T	homozygous	No	1
331 G>A, exon 1	G111L	heterozygous	No	1
<b>Progeroid Laminopathy- Zmpste24 Mutation</b>				
1274T>C, exon 10	L425P	homozygous	No	2

# Longitudinal Testing Data for PRF Diagnostics Program

## Number of Affected Children/Adults Tested and the Number Testing Positive for *LMNA* Gene Mutation\*



\*Graph does not include Parents/Siblings tested

# PRF Cell & Tissue Bank

## Program Goals:

- Provide a resource for researchers worldwide
- Ensure the sufficient availability of genetic and biological materials essential for research aimed at understanding the pathophysiology of disease and the links between Progeria, aging and heart disease
- Obtain long-term clinical data



Resource information available at: [www.progeriaresearch.org/cell tissue bank](http://www.progeriaresearch.org/cell_tissue_bank)

# PRF Cell & Tissue Bank Holdings

As of July 1, 2017:

Total Number of Cell Lines: **205** From **230** Donors

**65**

Dermal Fibroblast Lines from **44** affected, **21** parents and **0** siblings

**6**

Immortalized Fibroblast Cell Lines from **2** affected and **5** parents

**124**

Lymphoblast Lines from **71** affected, **45** parents and **8** siblings

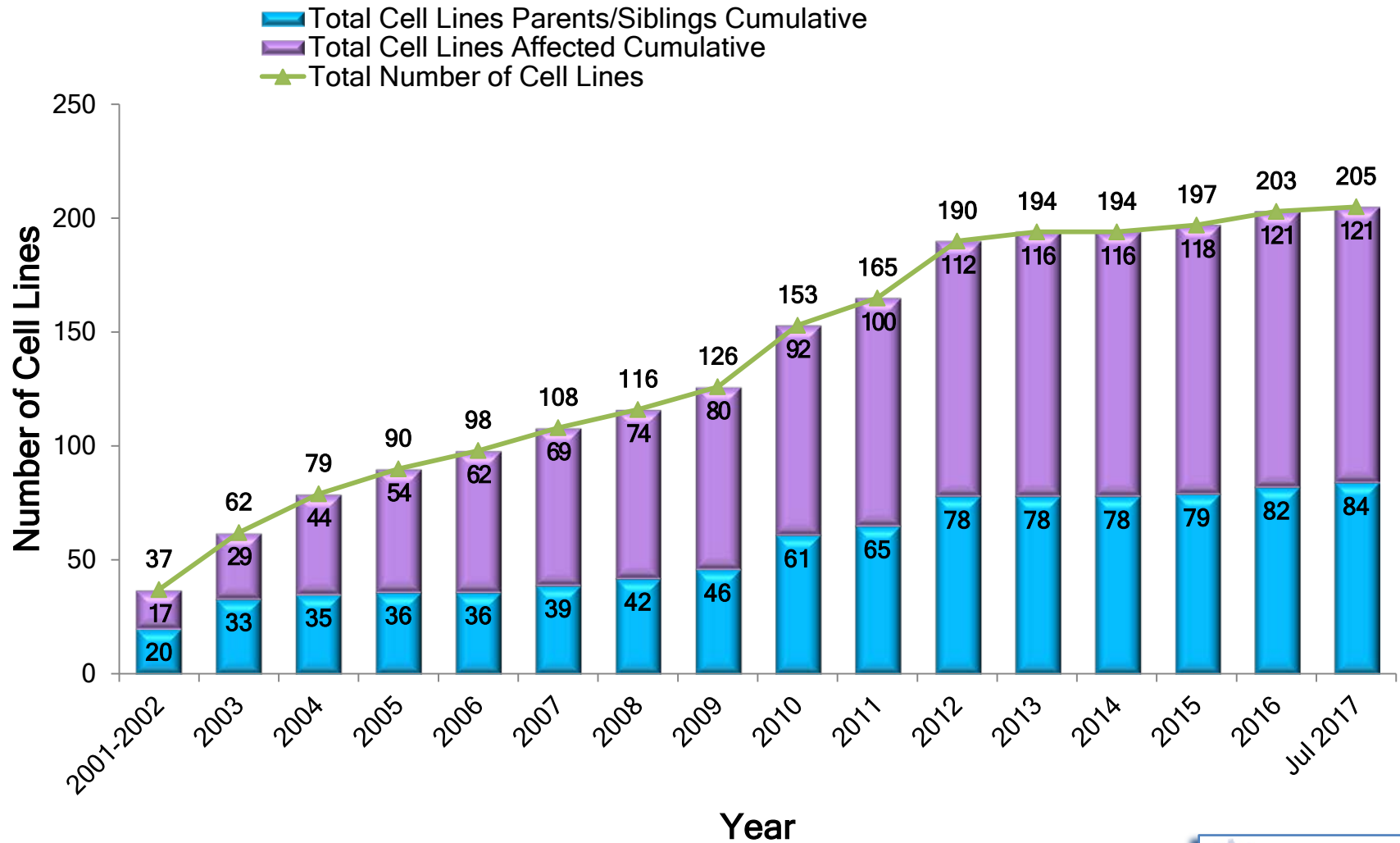
**10**

Induced Pluripotent Stem Cell Lines from **2** affected and **2** parents

# Mutations Available in PRF Cell & Tissue Bank

DNA Mutation	Amino Acid Effect	Zygoty	Progerin Producing?	Cell Type DFN=Dermal Fibroblast LBV= Lymphoblast
<b>Classic HGPS - LMNA Mutation</b>				
c.1824 C>T, exon 11	p.G608G	heterozygous	Yes	DFN, LBV, iPSC
<b>Non Classic HGPS- LMNA Mutation</b>				
c.1822 G>A, exon 11	p.G608S	heterozygous	Yes	DFN, LBV
c.1821 G>A, exon 11	p.V607V	heterozygous	Yes	DFN
c.1868 C>G, exon 11	p.T623S	heterozygous	Yes	LBV
c.1762 T>C, exon 11	p.C588R	heterozygous	No	DFN
c.1968+5 G>C, intron 11	-----	heterozygous	Yes	DFN
c.1968+1 G>A, intron 11	-----	heterozygous	Yes	LBV
c.1968+2 T>C	-----	heterozygous	Yes	DFN
c.973 G>A, exon 6	p.A325A	heterozygous	No	DFN
<b>Progeroid Laminopathy- LMNA Mutation</b>				
c.1579 C>T, exon 9	p.A527C	heterozygous	No	LBV
c.1579 C>T, exon 9	p.A527C	homozygous	No	LBV
c.1580 C>T, exon 9	p.A527L	Homozygous	No	LBV
c.1619 T>C, exon 10	p.M540T	homozygous	No	DFN
c.331 G>A, exon 1	p.G111L	heterozygous	No	DFN, LBV
<b>Progeroid Laminopathy- Zmpste24 Mutation</b>				
c.1274 T>C, exon 10	p.L425P	homozygous	No	DFN, LBV
c.743 C>T, exon 6 & c.1349 G>A, exon 10	p.P248L p.T450S	heterozygous	No	DFN

# Number Of Cell Lines By Year



# PRF Cell & Tissue Bank Distribution

As of July 1, 2017:

135

Research Teams From

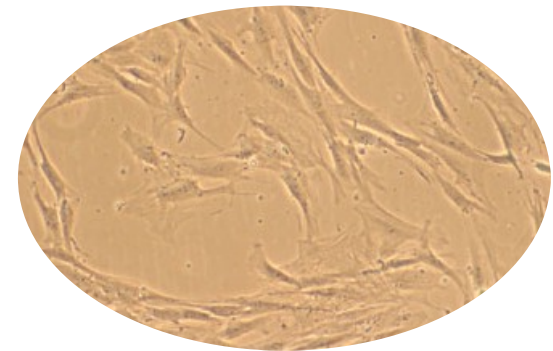
20

Countries Have Received

807 Cell Lines

122 DNA Samples

353 Tissue, plasma, serum  
and other biological samples



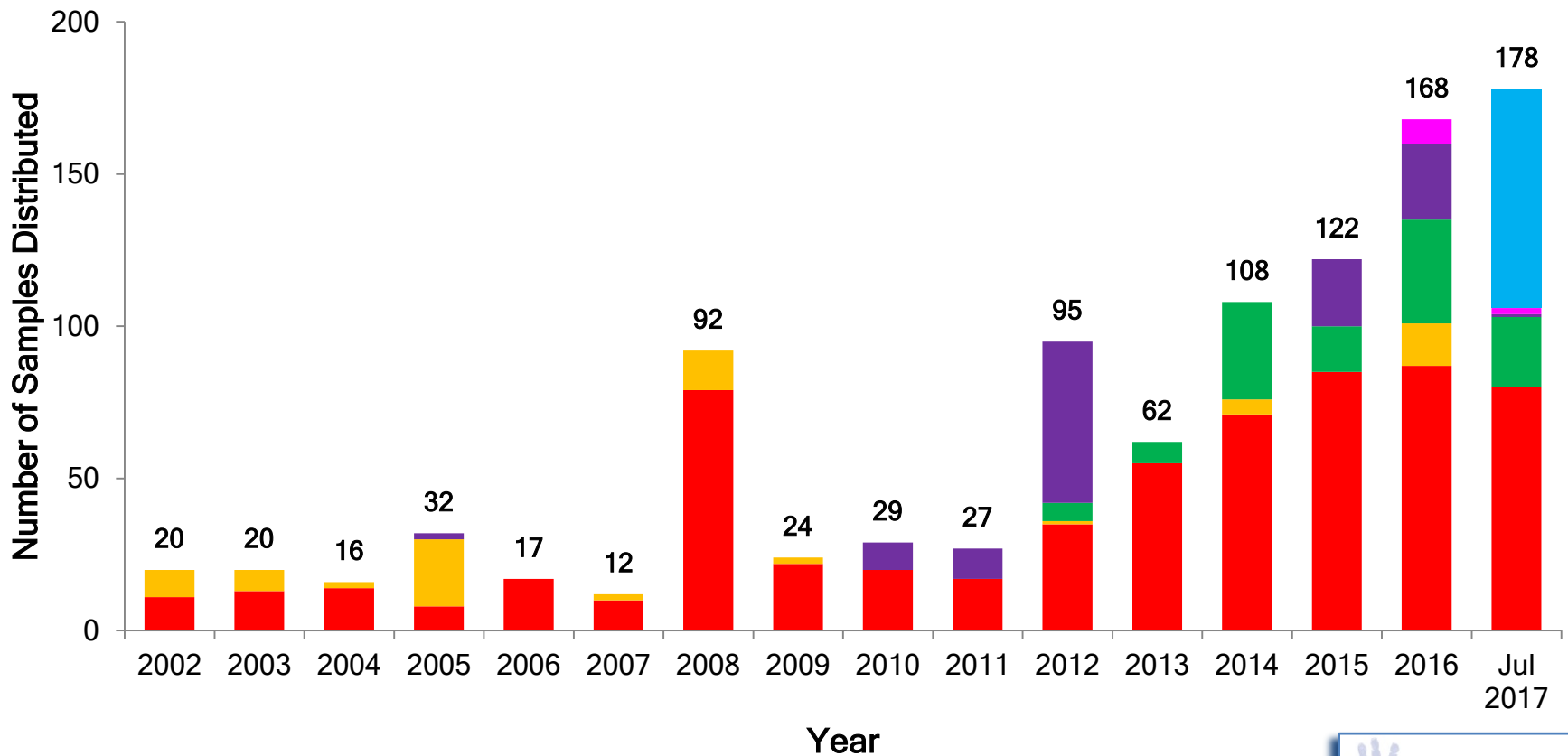
Senescent Progeria  
Fibroblasts in Culture



# Biological Sample Distribution Over Time

- Fibroblast Lines
- Lymphoblast Lines
- iPSC Lines
- DNA
- Immortalized Cell Lines
- Projected

# = Total Distributed



# USA Cell & Tissue Bank Recipients



Recipient	Institution	Recipient	Institution
Angelika Amon	Massachusetts Institute of Technology	Dennis Discher	U. of Pennsylvania
Stelios Andreadis	U. of Buffalo	Martin Dorf	Harvard Medical School
Shelley Berger	U of Pennsylvania	Stephen Doxsey	U. of Massachusetts Medical School
Bruce Blazer	U. of Minnesota	Jack Elias	Brown University School of Medicine
Demetrios Braddock	Yale University	Mike Erdos	National Institutes of Health
Jonathan Brown	Vanderbilt University	Jed Fahey	Johns Hopkins University
Ted Brown	Institute for Basic Research (IBR)	Toren Finkel	NIH
Mark Burkhard	University of Wisconsin-Madison	Shridar Ganesan	Cancer Institute of New Jersey
Judy Campisi	Buck Institute	Abhimanyu Garg	U. of Texas Southwestern Medical Center
Kan Cao	U. of Maryland	Glenn Gerhard	Temple University
Francis Collins	National Genome Research Institute	Thomas Glover	U. of Michigan Medical School
Lucio Comai	U. of Southern California	David Gilbert	Florida State University
John Cooke	Houston Methodist Research Institute	Robert Goldman	Northwestern University
Mauro Costa-Mattioli	Baylor College of Medicine	Susana Gonzalo	St. Louis School of Medicine
Adrienne Cox	U. of North Carolina at Chapel Hill	Lilian Grigorian	Cedars Sinai Medical Center
Greg Crawford	Duke University Medical Center	Curtis Harris	National Institutes of Health
Antonei Csoka	Howard University	Martin Hetzer	Salk Institute
Kris Dahl	Carnegie Mellon University	Steve Horvath	UCLA
George Daley	Boston Children's Hospital	Vishwanath Iyer	U. of Texas Austin
Channing Der	U. of North Carolina at Chapel Hill	Jose Jalife	University of Michigan
Mohanish Deshmukh	U. of North Carolina at Chapel Hill	David Kaplan	Tufts University

# USA Cell & Tissue Bank Recipients



Recipient	Institution	Recipient	Institution
Karen Katula	UNC - Greensboro	Mary Patti	Joslin Diabetes Center
Timothy Kowalik	U. of Massachusetts Medical School	Taihao Quan	University of Michigan
Dmitri Krainc	Massachusetts General Hospital	Joseph Rabinowitz	Temple University
Jan Lammerding	Harvard University	Ana Robles	National Cancer Institute
Dudley Lamming	U of Wisconsin-Madison	David Sabatini	Whitehead Institute
Jeanne Lawrence	U. of Massachusetts Medical School	John Sedivy	Brown University
Joan Lemire	Tufts University School of Medicine	Christian Sell	Drexel University College of Medicine
Kam Leong	Columbia University	Andrew Sonis	Boston Children's Hospital
Jason Lieb	U. of North Carolina at Chapel Hill	Earl Stadtman	National Heart, Lung & Blood Institute
David Liu	Harvard University	Dylan Taatjes	U. of Colorado
Shigemi Matsuyama	Case Western Reserve University	Marc Tatar	Brown University
Rachel Patton McCord	University of Tennessee	George Truskey	Duke University
Andrew Mendelsohn	Regenerative Sciences Institute	Alan Waldman	University of South Carolina
Jeffrey Miner	Washington University	Steve Warren	Emory University School of Medicine
Tom Misteli	National Cancer Institute	Howard Worman	Columbia University
Marsha Moses	Boston Children's Hospital	Tom Wight	Hope Heart Institute
Elizabeth Nabel	National Heart, Lung & Blood Institute	Joseph Wu	Stanford University
Timothy Osborne	Sanford Burnham Medical Research Institute	Alessandra Zonari	OneSkin Technologies
Junko Oshima	U. of Washington		
Bryce Paschal	U. of Virginia		
Hamel Patel	U. Of California, San Diego		

# International Cell & Tissue Bank Recipients



Recipient	Institution	Country	Recipient	Institution	Country
Andrea Ablasser	Global Health Institute	Switzerland	Gerardo Ferbeyre	Université de Montréal	Canada
Vicente Andrés García	Centro Nacional de Investigaciones Cardiovasculares	Spain	Lino Ferreira	Center for Neuroscience and Cell Biology (CNC)	Portugal
Samuel Benchimol	York University	Canada	Marco Foiani	Istituto FIRC di Oncologia Molecolare	Italy
Enrico Bertini	Ospedale Pediatrico Bambino Gesù	Italy	Alain Garnier	Université Laval	Canada
Michael Blank	Bar Ilan University	Israel	Yosef Gruenbaum	The Hebrew University of Jerusalem	Israel
Antonio Campos de Carvalho	Federal University of Rio de Janeiro	Brazil	Robert Hegele	University of Western Ontario	Canada
Ana Carrera	Centro Nacional de Biotecnología	Spain	Corinne Hoesli	McGill University	Canada
Gordon Chan	University of Alberta	Canada	Anthony Hyman	Max-Planck-Institute of Molecular Cell Biology and Genetics	Germany
Lynne Cox	University of Oxford	England	Christian Kubisch	Institute of Human Genetics	Germany
Thomas Dechat	Medical University of Vienna	Austria	Kirsztian Kvell	University of Pecs	Hungary
Annachiara DeSandre-Giovannoli	Laboratoire de Génétique Moléculaire	France	Taejoon Kwon	Ulsan National Institute of Science & Technology	Korea
Karima Djabali	TU-Munich	Germany	Chiara Lanzuolo	CNR Institute of Cellular Biology & Neurobiology	Italy
Ma Dongrui	Singapore General Hospital	Singapore	Caterina La Porta	University of Milan	Italy
J. El Molto	Molecular World, Inc	Canada	Delphine Larrieu	University of Cambridge	England
Maria Eriksson	Medicinsk Naringslára	Sweden	Lucia Latella	National Research Council (CNR)	Italy

# International Cell & Tissue Bank Recipients



Recipient	Institution	Country	Recipient	Institution	Country
Giovanna Lattanzi	ITOI-CNR Unit of Bologna	Italy	Neale Ridgway	University of Halifax	Canada
Jean-Marc Lemaitre	Institute of Functional Genomics	France	Kanda Sangthongpitag	Experimental Therapeutics Centre	Singapore
Nicolas Levy	Génétique Médicale et Développement	France	Ok Sarah Shin	Korea University Guro Hospital	Korea
Elsa Logarinho	Instituto de Biologia Molecular e Celular	Portugal	Michael Speicher	Medical University of Graz	Austria
Frank Lyko	German Cancer Research Institute	Germany	William Stanford	University of Toronto	Canada
Thorston Marquart	University of Münster	Germany	Michael Walter	University of Münster	Germany
Scott Maynard	Danish Cancer Society Research Institute	Denmark	Herbert Waldman	Max Planck Institute	Germany
Ohad Medalia	University of Zurich	Switzerland	Miguel Weil	Tel Aviv university	Israel
Denis Mottet	University of Liège	Belgium	Jesús Vazquez Cobos	Centro Nacional de Investigaciones Cardiovasculares	Spain
Silvia Ortega-Gutiérrez	Universidad de Complutense de Madrid	Spain	Alex Zhavoronkov	Federal Clinical Research Centre	Russia
Luis Pereira de Almeida	Center for Neuroscience and Cell Biology (CNC)	Portugal	Zhongjun Zhou	University of Hong Kong	China
Fiorella Piemonte	Ospedale Pediatrico Bambino Gesù	Italy			

# PRF Medical & Research Database

## Program Goals:

- Collect the patient health records for living and deceased children with Progeria
- Obtain long-term clinical data
- Abstract data for longitudinal and cross-sectional analyses
- Better understand the clinical disease process in Progeria and aging related diseases
- Develop treatment strategies and recommendations for health care professionals and families



# How The PRF Medical & Research Database Works

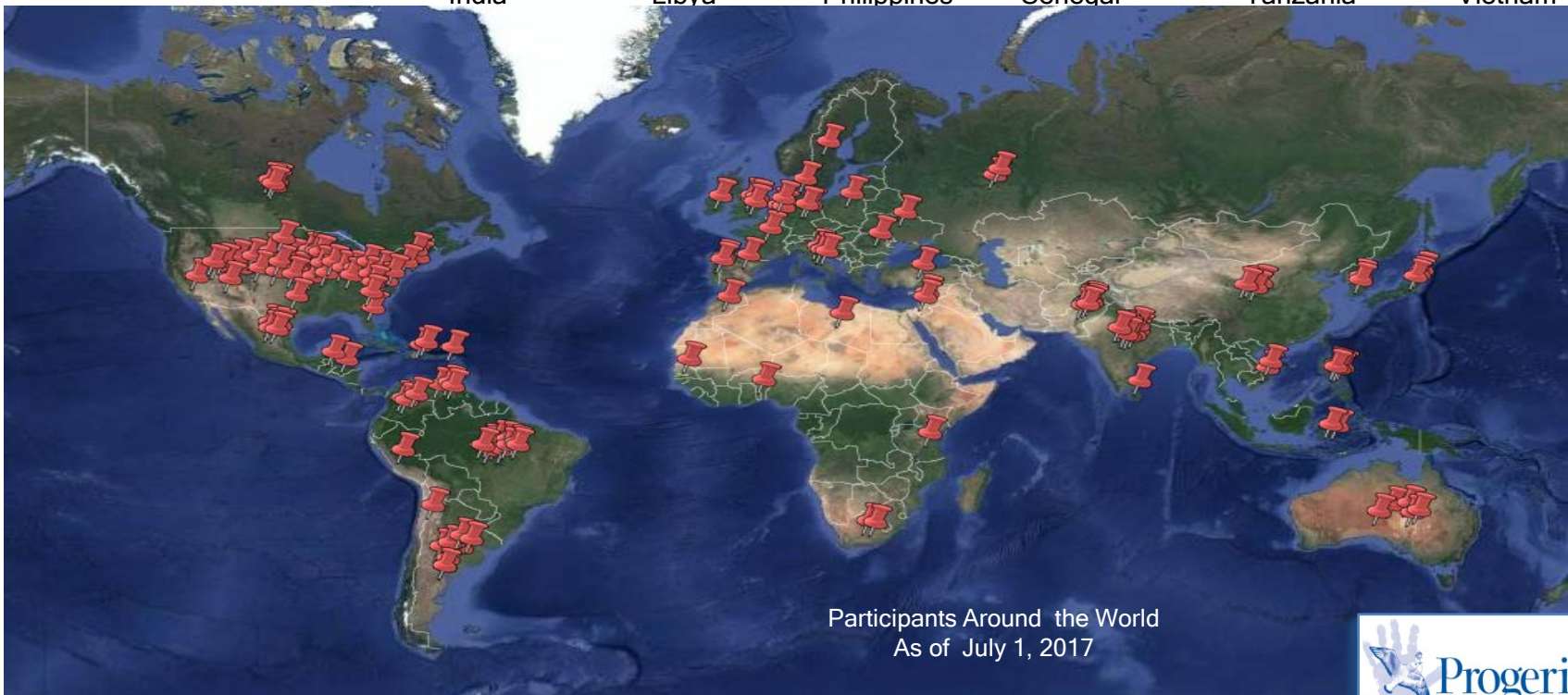
- Project staff obtain the patient's medical records and film studies from birth throughout the participant's lifespan.
- Medical records include visits to: primary care physicians, specialty physicians, hospital emergency rooms, hospital admissions, dentists, physical therapy, occupational therapy and school health records.
- Retrospective data abstraction protocol allows for specifically targeted or broad spectrum of data.

Enrollment information available at: [www.progeriaresearch.org/medical\\_database](http://www.progeriaresearch.org/medical_database)

# Medical & Research Database Participation

**156** Participants are enrolled from **45** countries and **1** US territory

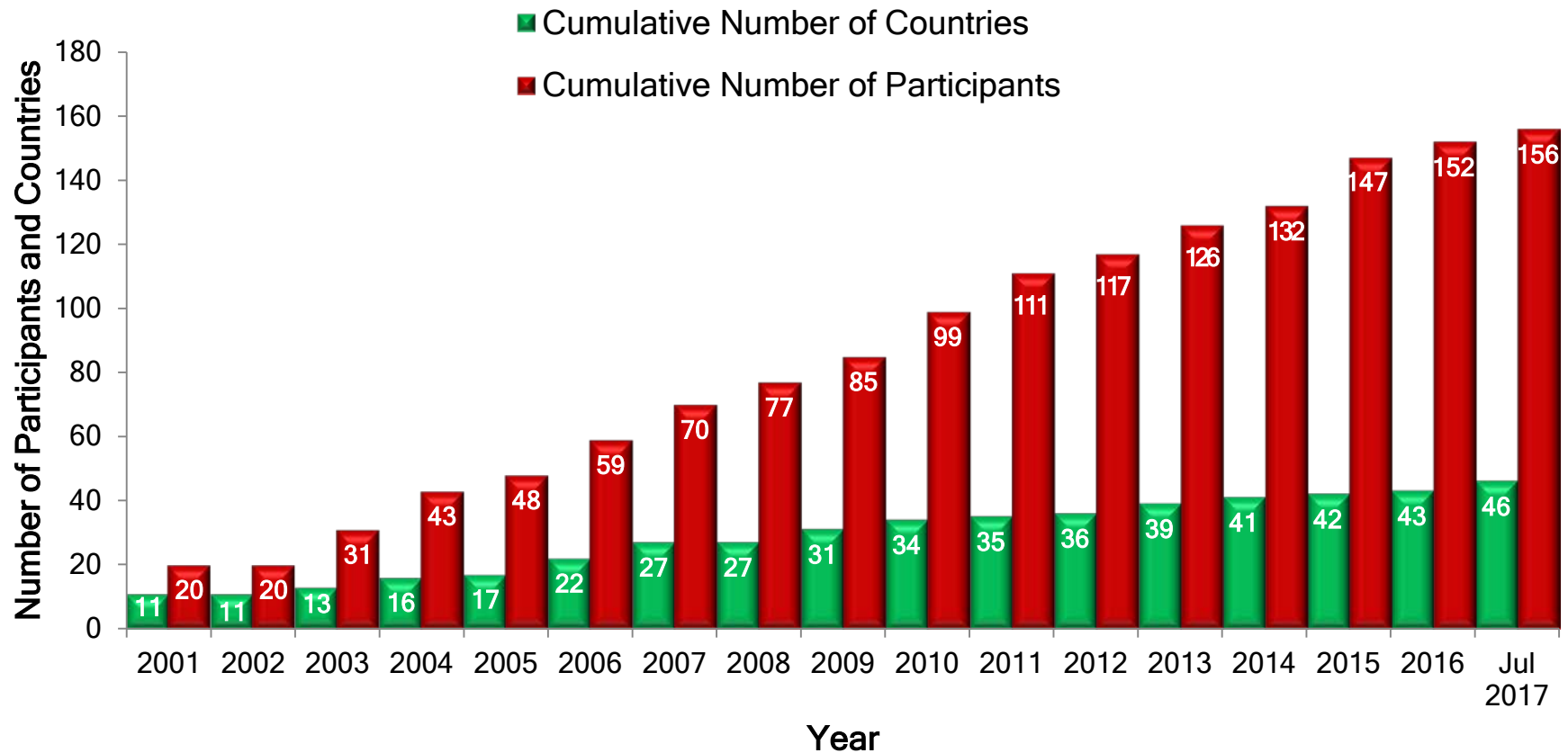
Argentina	Chile	England	Indonesia	Mexico	Poland	Sri Lanka	Togo
Australia	China	France	Ireland	Morocco	Portugal	South Africa	Turkey
Belgium	Colombia	Guatemala	Israel	Netherlands	Puerto Rico	South Korea	Ukraine
Brazil	Denmark	Germany	Italy	Pakistan	Romania	Spain	USA
Canada	Dominican Republic	Honduras	Japan	Peru	Russia	Sweden	Venezuela
	India	Libya	Philippines	Senegal	Tanzania	Vietnam	





# Database Longitudinal Enrollment

## Children Enrolled in The PRF Medical & Research Database and the Countries of Residence



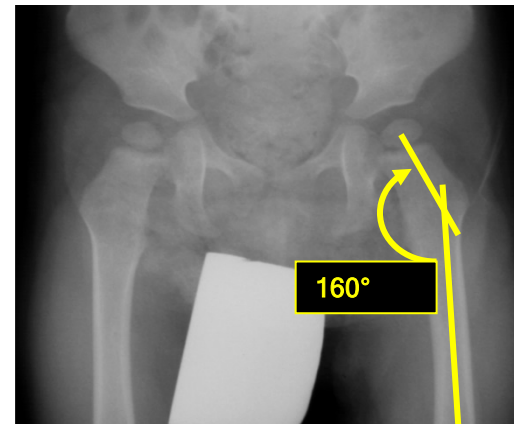
# Types Of Data Collected

- Participants with Medical Records Reports:

121

- Participants with Radiology Studies:

59



# PRF Weighing-In Program

- A sub-program of The PRF Medical & Research Database
- Collects weight-for-age data prospectively:
  - 👤 Home scale provided by PRF
  - 👤 Parents weigh child weekly or monthly
  - 👤 Report weights electronically

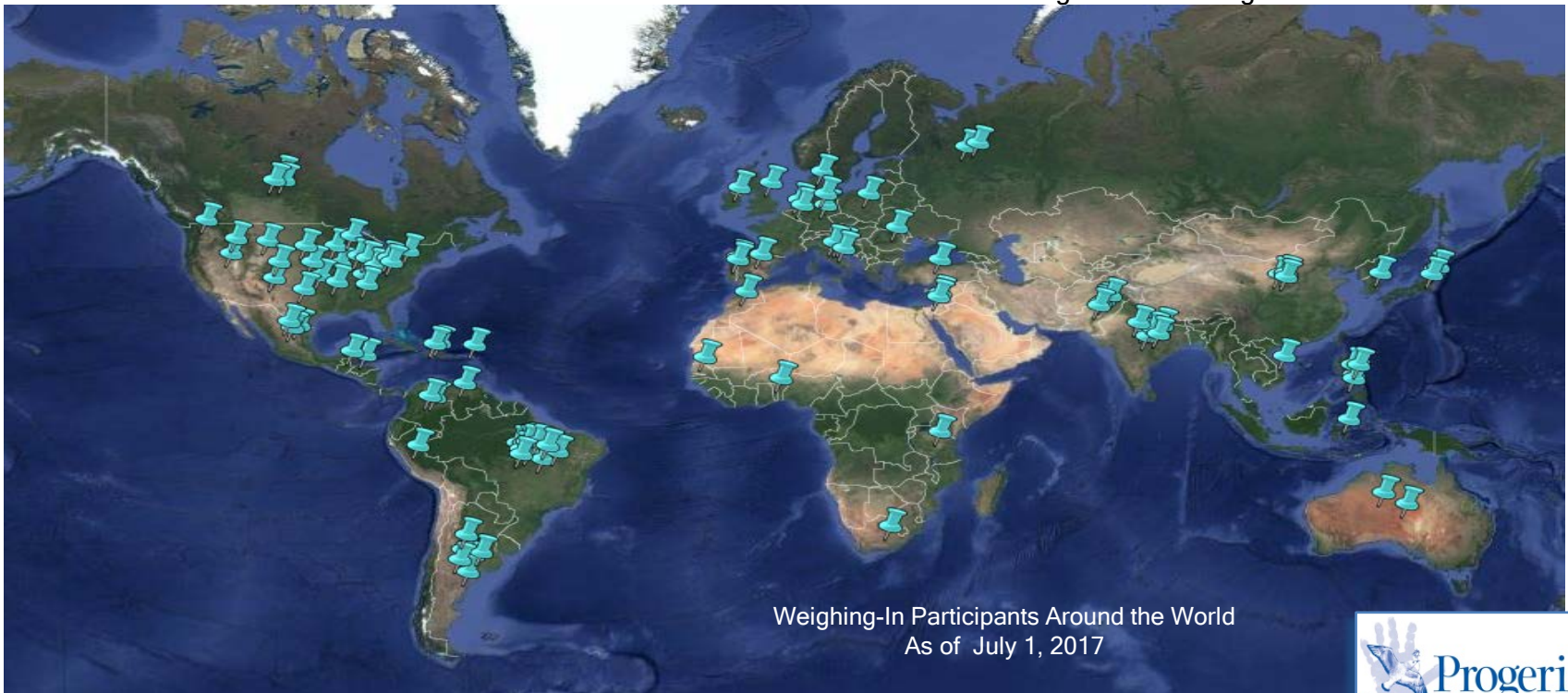


# Weighing-In Program Participation

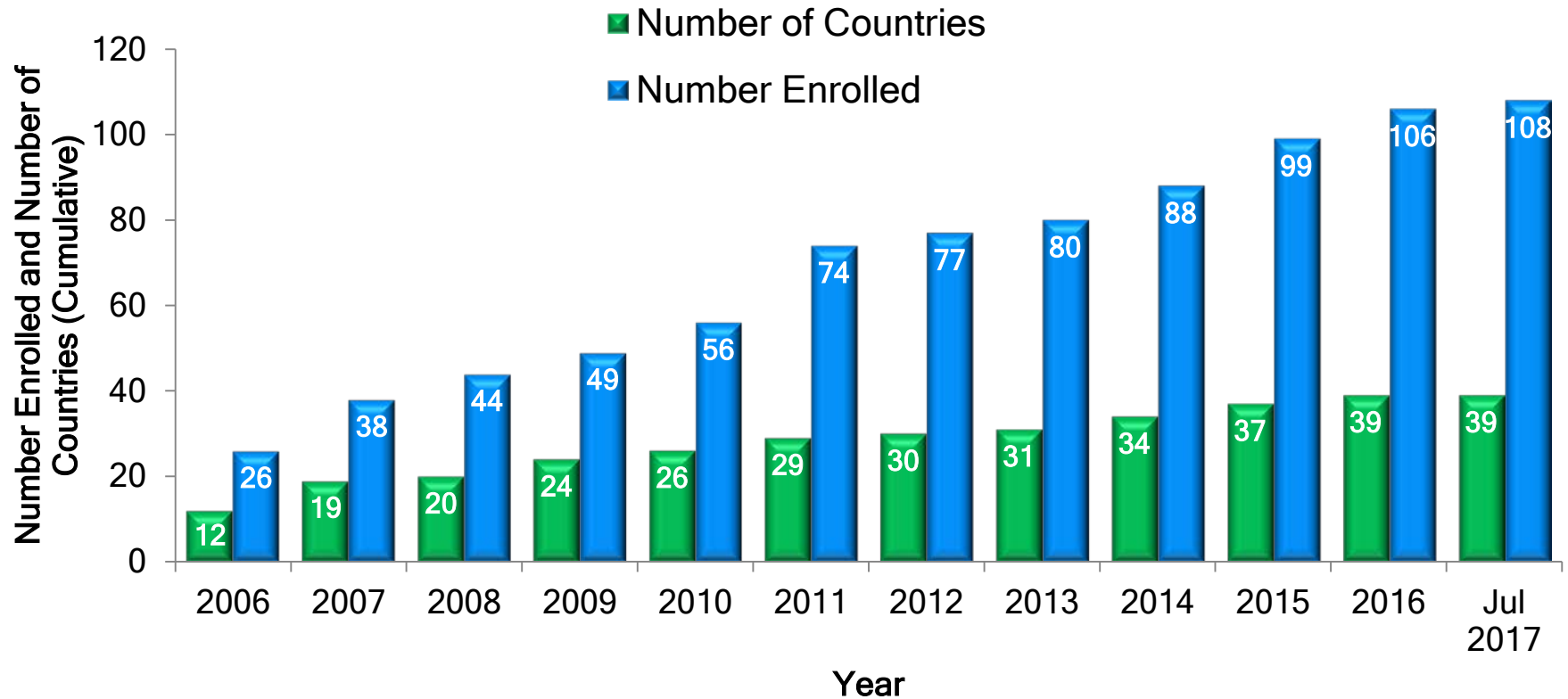
108

Participants are enrolled from **38** countries and **1** US territory

Argentina	China	England	Ireland	Morocco	Portugal	South Africa	Turkey
Australia	Colombia	Germany	Israel	Pakistan	Puerto Rico	South Korea	USA
Belgium	Denmark	Honduras	Italy	Peru	Romania	Spain	Venezuela
Brazil	Dominion Republic	India	Japan	Philippines	Russia	Tanzania	Vietnam
Canada	Indonesia	Mexico	Poland	Senegal	Togo		

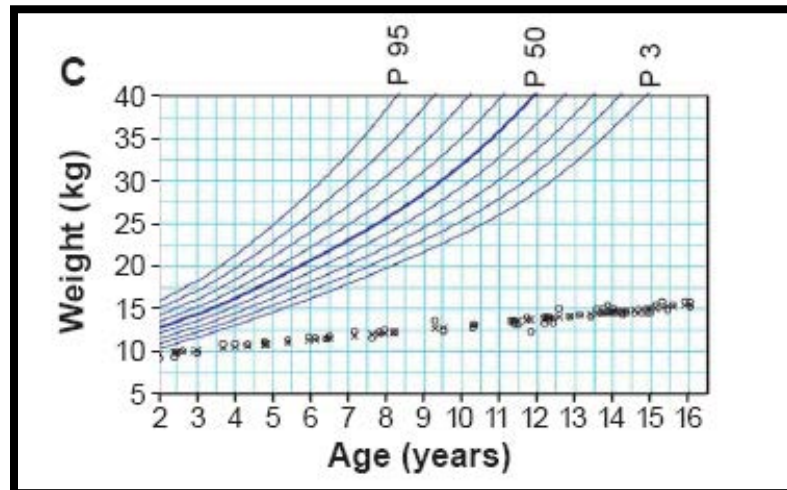


# Participants Enrolled In The PRF Weighing-In Program and Countries of Residence



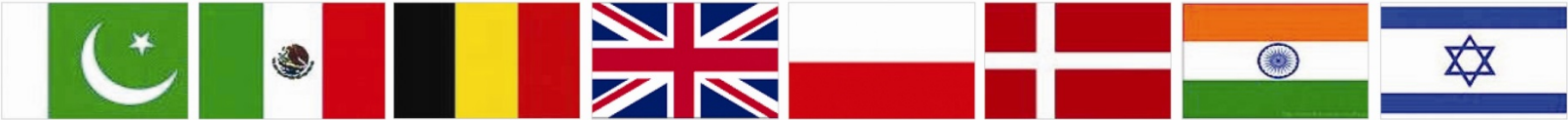
# Clinical Trials And The Weighing-In Program

- Data from this program were key in the development of primary outcome measure for the first drug treatment trial for Progeria.
- As of July 1, 2017, **78** children from The PRF Weighing-In Program have entered clinical treatment trials using this data.



Failure to Thrive Starts Towards End of Year One

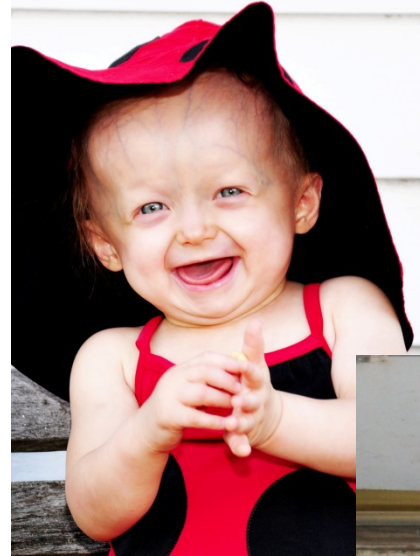
# PRF-Funded Clinical Treatment Trials



# Clinical Drug Treatment Trials

## Goals:

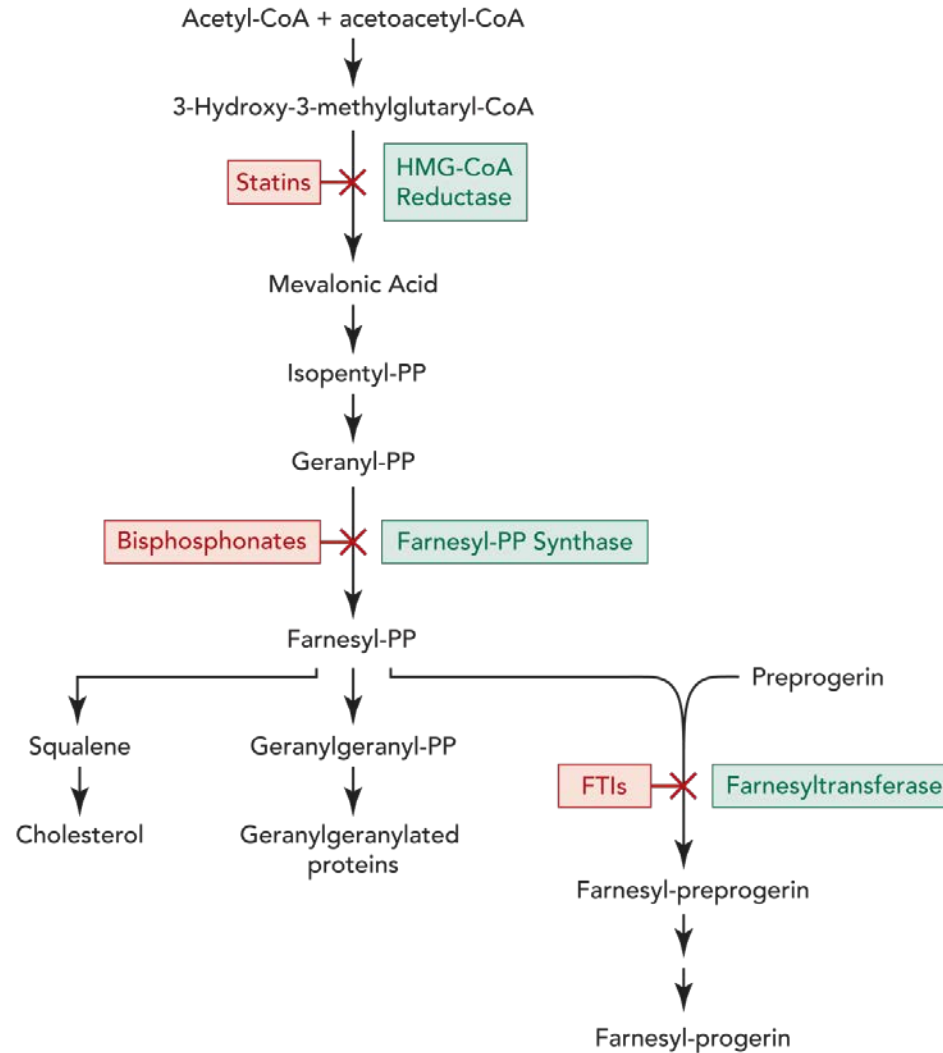
- To define the natural history of HGPS in quantifiable terms that will expand our ability to measure treatment outcome
- To assess the safety of new treatments for HGPS
- To measure effects of treatments for children with HGPS on disease status, changes in health, and survival





# Current Therapeutic Intervention Strategies

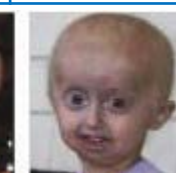
## Medications That Inhibit Farnesylation of Progerin



# PRF Funds Clinical Treatment Trials



Year	Drug(s)	Phase	Location	#	Countries
2007-2010	Lonafarnib	2	Boston	28	17
2009	Lonafarnib Pravastatin Zoledronate	Feasibility	Boston	5	1
2009-2013	Lonafarnib Pravastatin Zoledronate	2	Boston	45	24
2014-present	Lonafarnib	2	Boston	71 from 34 countries enrolled to date	
2016 - present	Lonafarnib Everolimus	1/2	Boston	17 from 6 countries enrolled to date	

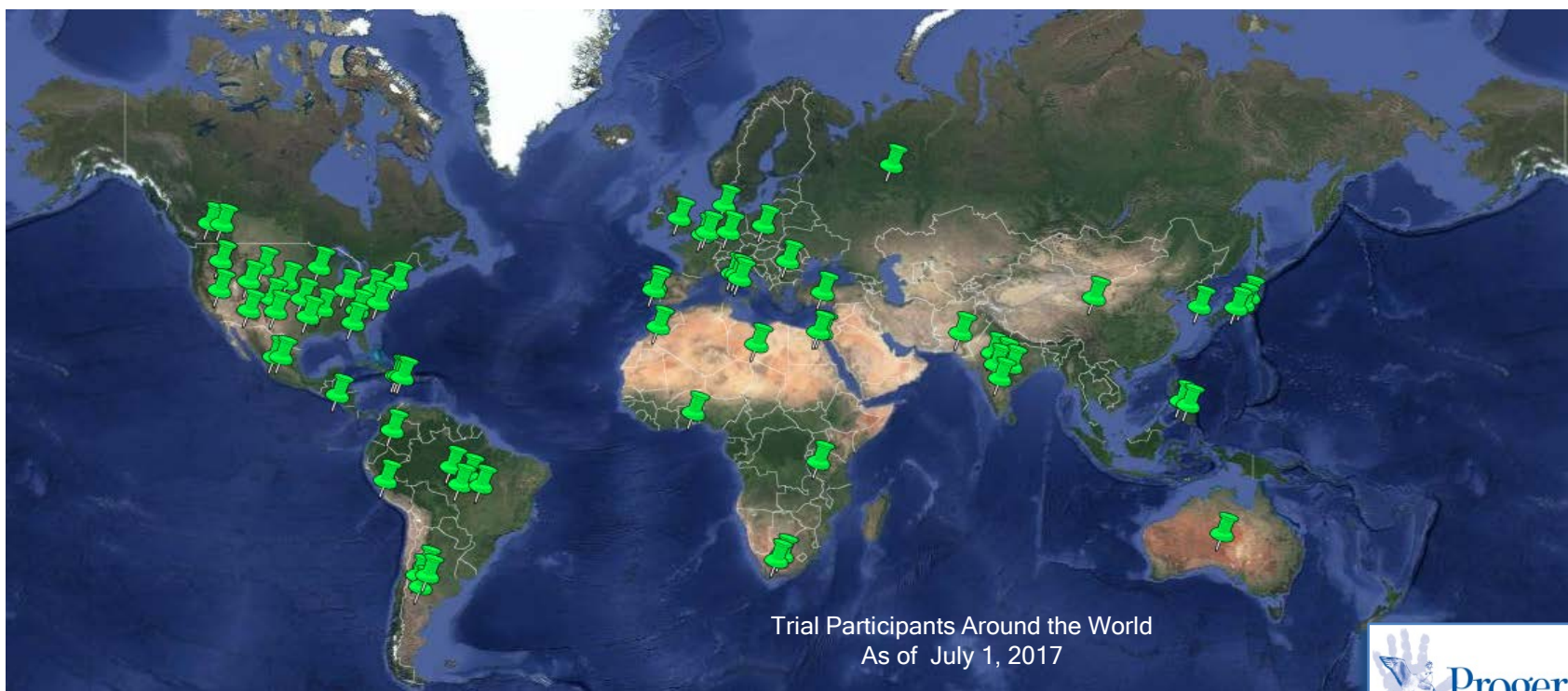


# Participation in PRF Clinical Trials

84

Children have participated in PRF Clinical Trials from **34** countries:

Argentina	Canada	Dominican Republic	India	Libya	Peru	Romania	Sweden	USA
Australia	China	England	Israel	Mexico	Philippines	Russia	Tanzania	Venezuela
Belgium	Colombia	Germany	Italy	Morocco	Poland	South Africa	Togo	
Brazil	Denmark	Honduras	Japan	Pakistan	Portugal	South Korea	Turkey	



# Treatment Trial Collaborations For Success

## ➤ The children are seen by physicians from:

 Boston Children's Hospital




 Dana-Farber Cancer Institute



 Brigham and Women's Hospital



## ➤ Data were also generated by scientists from:

 Alpert Medical School at Brown University



 Brown University School of Public Health



 University of California Los Angeles

**UCLA**

 National Human Genome Research Institute



 Schering-Plough Research Institute



➤ **Lonafarnib** generously provided by Eiger



➤ **Everolimus** generously provided by Novartis



# Clinical Treatment Trial Efficacy Results

Lonafarnib, a type of farnesyltransferase inhibitor (FTI) is our first treatment for Progeria.

➤ Results showed improvement in:



Rate of weight gain



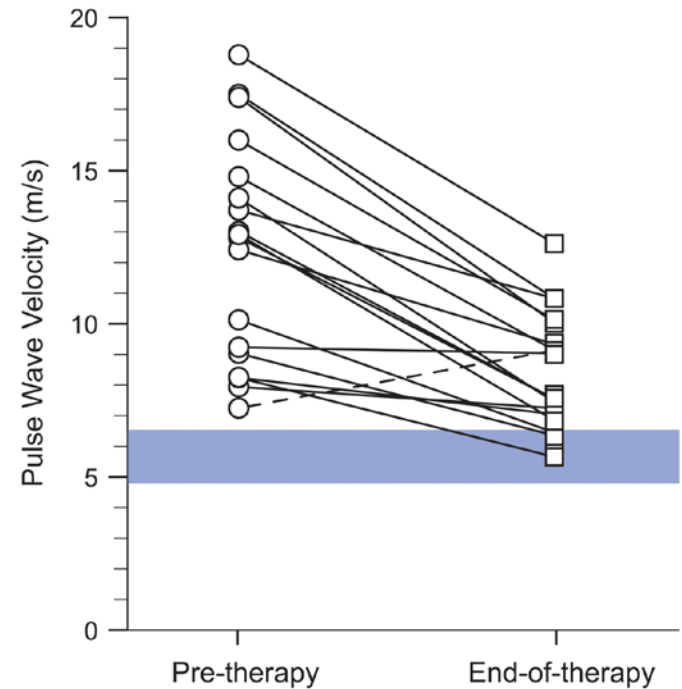
Increased vascular distensibility



Improved bone structure










Better neurosensory hearing



Gordon et al, PNAS, 2011

# Clinical Treatment Trial Publications




## Drug Effect:

-  [Temsirolimus Partially Rescues the Hutchinson-Gilford Progeria Cellular Phenotype.](#) Gabriel et al, *Plos One*, 2016, 11(12):1-25.
-  [Clinical Trial of the Protein Farnesylation Inhibitors Lonafarnib, Pravastatin, and Zoledronic Acid in Children With Hutchinson-Gilford Progeria Syndrome.](#) Gordon et al, *Circulation*, 2016 Jul 12;134(2):114-25.
-  [Seeking a Cure for One of the Rarest Diseases: Progeria.](#) Collins FS. *Circulation*, 2016 Jul 12;134(2):126-9.
-  [Impact of Farnesylation Inhibitors on Survival in Hutchinson-Gilford Progeria Syndrome.](#) Gordon et al, *Circulation*, 2014 Jul 1;130(1):27-34.
-  [Moving from Gene Discovery to Clinical Trials in Hutchinson-Gilford Progeria Syndrome.](#) King et al, *Neurology*, 2013 Jul 30;81(5):408-9.
-  [Clinical Trial of a Farnesyltransferase Inhibitor in Children with Hutchinson-Gilford Progeria Syndrome.](#) Gordon et al, *Proceedings of the National Academy of Sciences*, 2012 Sep 24.
-  [Neurologic Features of Hutchinson-Gilford Progeria Syndrome after Lonafarnib Treatment.](#) *Neurology*, 2013, 81:427-430.


## Dermatology:

-  [Initial Cutaneous Manifestations of Hutchinson-Gilford Progeria Syndrome.](#) *Pediatric Dermatology*, 2014,1-7.


## Imaging:

-  [Imaging Characteristics of Cerebrovascular Arteriopathy and Stroke in Hutchinson-Gilford Progeria Syndrome.](#) Silvera et al, *American Journal of Neuroradiology*, 2013 May;34(5):1091-7.
-  [A Prospective Study of Radiographic Manifestations in Hutchinson-Gilford Progeria Syndrome.](#) Cleveland et al, *Pediatric Radiology*, 2012 Sep;42(9):1089-98. Epub 2012 Jul 1.
-  [Craniofacial Abnormalities in Hutchinson-Gilford Progeria Syndrome.](#) Ullrich et al, *American Journal of Neuroradiology*. 2012 Sep;33(8):1512-8.

## Cardiology:

-  [Mechanisms of Premature Vascular Aging in Children with Hutchinson-Gilford Progeria Syndrome.](#) Gerhard-Herman M, et al., *Hypertension*. 2012 Jan;59(1):92-97; Epub 2011 Nov 14.

## Skeleton:

-  [Hutchinson-Gilford progeria is a skeletal dysplasia.](#) Gordon, et al., *Journal of Bone and Mineral Research*. 2011 Jul;26(7):1670-9.

# PRF Grants Program

## Program Goals:

- Attract high level researchers to the field of Progeria
- Foster high quality publications
- Stimulate novel research that will lead to larger grants from other resources such as NIH, Ellison Foundation, and others
- Provide ability for researcher to thrive in the field
- Foster researchers of interest to PRF's mission

Grants program information available at  
[www.progeriaresearch.org/research\\_funding\\_opportunities](http://www.progeriaresearch.org/research_funding_opportunities)

# PRF Medical Research Committee

Volunteer MRC Reviews Grant Applications Semi-annually



Back Row (L to R): Tom Glover PhD, Vicente Andrés Garcia PhD, Tom Mistelli PhD, Maria Eriksson PhD, W Ted Brown MD, PhD, Frank Rothman PhD (emeritus), Bryan Toole PhD(chair)

Front Row (L to R): Monica Kleinman MD, Christine Harling-Berg PhD, Judy Campisi PhD, Leslie Gordon MD, PhD, Marsha Moses PhD



# PRF Granting Structure

## ➤ Innovator Awards:



2 years, up to \$75,000 per year



Allows an investigator to embark on new areas and produce enough preliminary data to compete for longer-term funding by NIH and/or other agencies.

## ➤ Established Investigator Awards:



Up to 3 years, up to \$100,000 per year.



For senior investigators established either in the field of Progeria or a field that can be directly applied to Progeria

## ➤ Specialty Awards:



Funding amounts and lengths flexible



For smaller, technology-driven projects, e.g., sequencing, drug screening, obtaining cell lines, antibody preparation, animal models, other

# Grant Funding Rates And Topics

As of January 1, 2017, The PRF funding rate is **32%**

- Since inception, **210** grant applications received and **68** funded
- PRF has funded **59** principal investigators from **48** institutions in **14** countries

-  Lamina A, progerin, Lamin B in HGPS and aging

-  Genetics and nuclear function

-  Preclinical Drug Therapy

-  Molecular Abnormalities and Therapies

-  Vascular Pathology

-  Mouse Models

-  Stem Cell Investigations and Therapy

-  Clinical Trials

# USA PRF Grantees



GRANTEE NAME	INSTITUTION	GRANTEE NAME	INSTITUTION
Jemima Barrowman	Johns Hopkins University	Jason Lieb	University of North Carolina
Juan Carlos Belmonte	Salk Institute for Biological Studies	Monica Mallampalli	The Johns Hopkins School of Medicine
Ted Brown	The Institute for Basic Research in Developmental Disabilities	Susan Michaelis	The Johns Hopkins School of Medicine
Kan Cao	NIH; University of Maryland	Thomas Misteli	National Cancer Institute
Christopher Carroll	Yale University	Marsha Moses	Harvard Medical School; Boston Children's Hospital
Francis Collins	National Institute of Health	Junko Oshima	University of Washington
Lucio Comai	University of Southern California	Bryce Paschal	University of Virginia
John P. Cooke	Houston Methodist Research Institute	Joseph Rabinowitz	Temple Medical School
Kris Dahl	Carnegie Mellon University	John M. Sedivy	Brown University
Jed W. Fahey	Johns Hopkins School of Medicine	Dale Shumaker	Northwestern University
Loren Fong	UCLA	Michael Sinensky	East Tennessee State University
Michael Gimbrone	Brigham & Women's Hospital	Brian Snyder	Beth Israel Hospital
Thomas W. Glover	University of Michigan	Dylan Taatjes	University of Colorado
Robert Goldman	Northwestern University	Jakub Tolar	University of Minnesota
Leslie B. Gordon	Tufts University School of Medicine; Brown U.	Katherine Ullman	University of Utah
John Graziotto	Massachusetts General Hospital	Thomas Wight	Benaroya Research Institute
Brian Kennedy	Buck Institute for Research on Aging	Katherine Wilson	Johns Hopkins University
Jan Lammerding	Cornell University	Stephen Young	UCLA
Dudley Lamming	University of Wisconsin Madison	Yue Zou	East Tennessee State University
Joan Lemire	Tufts University of Medicine		

# International PRF Grantees



GRANTEE NAME	INSTITUTION	COUNTRY
Vicente Andrés Garcia	Centro Nacional de Investigaciones Cardiovasculares	Spain
Samuel Benchimol	York University, Toronto	Canada
Bum-Joon Park	Pusan National University	Korea
Claudia Cavadas	University of Coimbra	Portugal
Jesús Vázquez Cobos	Centro Nacional de Investigaciones Cardiovasculares	Spain
Thomas Dechat	Medical University of Vienna	Austria
Karima Djabali	Technical University of Munich	Germany
Maria Eriksson	Karolinska Institute	Sweden
Alicia Folgueras	Universidad de Oviedo	Spain
Gerardo Ferbeyre	Université de Montreal	Canada
Célia Ferreira de Oliveira Aveleira	University of Coimbra	Portugal
Roland Foisner	Medical University of Vienna	Austria
Evgeny Makarov	Brunel University	England
Carlos López-Otín	Universidad de Oviedo	Spain
Silvia Ortega-Gutiérrez	Universidad Complutense de Madrid	Spain
Isabella Saggio	Sapienza University of Rome	Italy
Charlotte Sorenson	Aarhus University	Denmark
William Stanford	University of Toronto	Canada
Colin Stewart	Institute of Medical Biology	Singapore
Ricardo Villa-Bellosta	Instituto de Investigación Sanitaria - Fundación Jiménez Díaz	Spain
Anthony Weiss	University of Sydney	Australia
Zhongjun Zhou	University of Hong Kong	China



# PRF Scientific Meetings

## Meeting Goals:

- To promote collaboration between basic and clinical scientists toward progress in Progeria, cardiovascular, and aging research

PRF has held **11** international scientific meetings



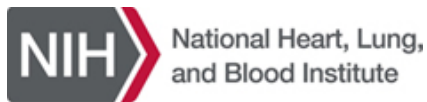
2016 PRF Workshop

# International Workshops Promoting Global Interest In Progeria, Cardiovascular Disease And Aging

These are large multi-day workshops open to all scientists. Clinical and basic researchers spend intense days sharing data and planning new collaborations for progress towards treatments and cure.

Various NIH Institutes have funded all international workshops through R13 and other granting mechanisms

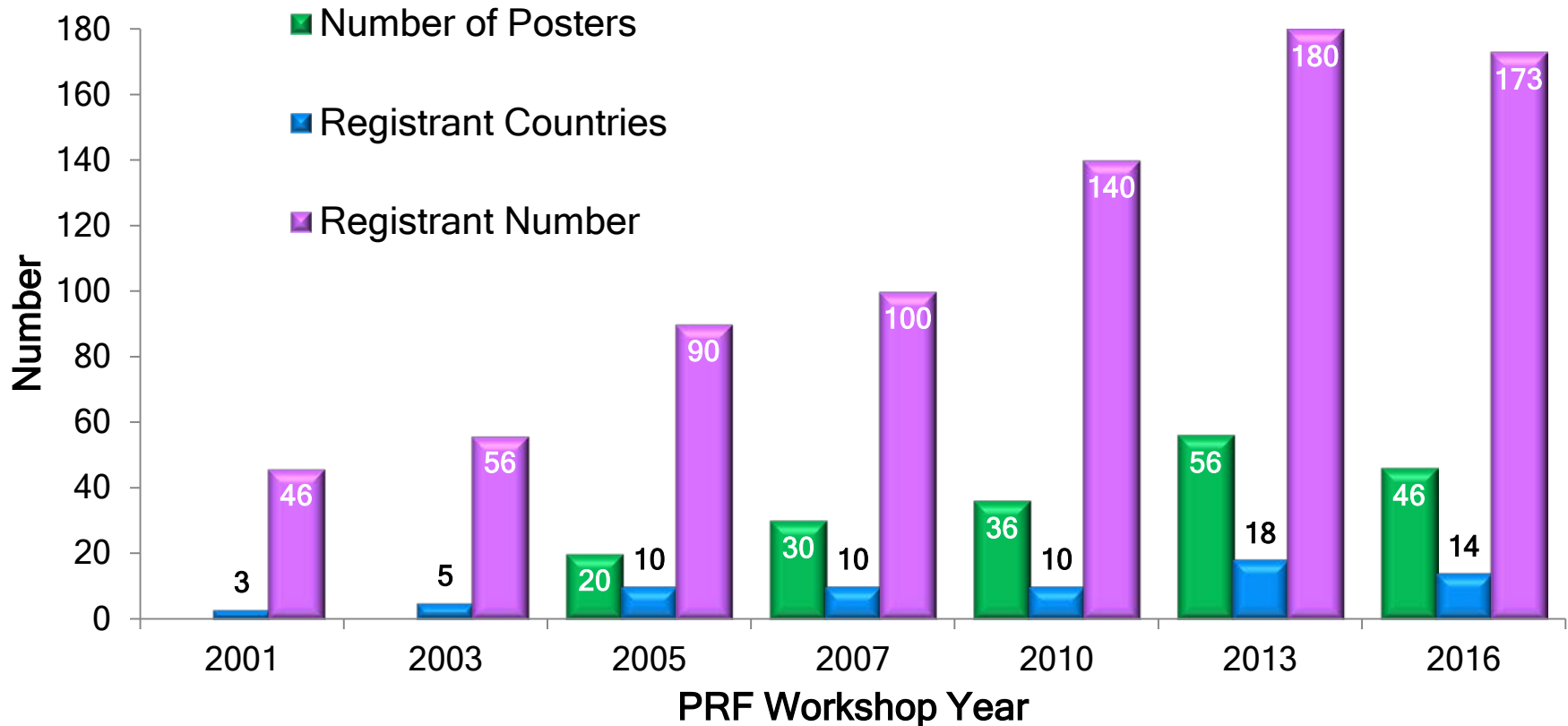
Other organizations have also generously sponsored workshops



The Max and Victoria Dreyfus Foundation, Inc.







# Growth of Global Interest In PRF Workshops



# Subspecialty Scientific Meetings

Small, focused meetings designed to promote and support work in areas of high interest for Progeria

-  First Genetics Consortium Meeting - “Searching for the Progeria Gene”, August 23, 2002 , Brown University, Providence, RI
-  Second Genetics Consortium Meeting - “Post-gene Discovery”, July 30, 2003, Bethesda, MD
-  Bone Marrow Transplant Meeting - “Forging Ahead by Exploring Potential Treatments”, April 25-26, 2004, National Institutes of Health , Bethesda, MD
-  New Frontiers in Progeria Research (2012), Boston, MA





# Scientific Publications

As of July 1, 2017:

59

Scientific articles have been published citing PRF Cell & Tissue Bank resources:



Publication list at [www.progeriaresearch.org/prf-cell-and-tissue-bank-publications/](http://www.progeriaresearch.org/prf-cell-and-tissue-bank-publications/)

28

Scientific articles have been published citing The PRF Medical & Research Database:



Publication list at [www.progeriaresearch.org/medical-database/](http://www.progeriaresearch.org/medical-database/)

13

Scientific articles have been published from clinical trial data



See slide #54

# Progeria Clinical Care Handbook

The Progeria Handbook. A Guide for Families & Health Care Providers of Children with Progeria. *The Progeria Research Foundation*. Leslie B. Gordon (editor) 2010.



Provided in English, Spanish and Portuguese

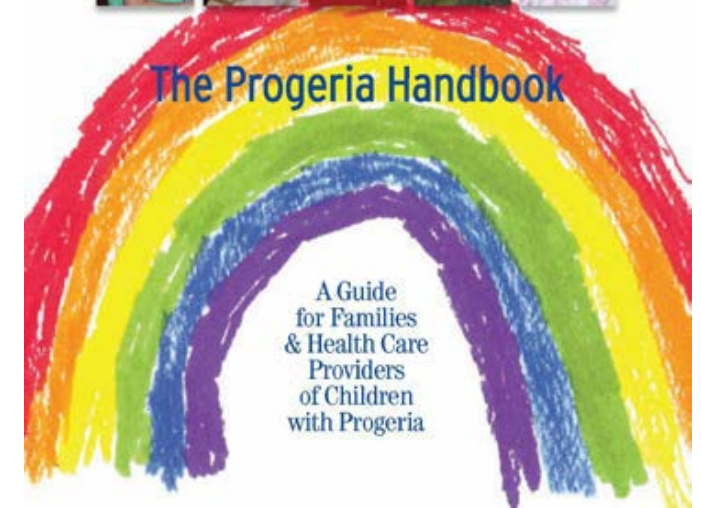


Expert contributors from Boston Children's Hospital



Number of Progeria Care Handbooks distributed to families of those with Progeria and their care givers:

501



# NIH Natural History Study

- From 2005-2006, PRF participated in an NIH/NHGRI sponsored natural history study that included **15** children with Progeria conducted at the NIH Clinical Research Center.

**Goal:** to understand the disease processes that drive Progeria.



The NEW ENGLAND  
JOURNAL of MEDICINE

*Phenotype and Course of Hutchinson-Gilford Progeria Syndrome*  
*Merideth et al, NEJM, 2008, vol 358, 592-604*



National Human Genome  
Research Institute



# The Progeria Research Foundation

Finding...  
Diagnosing...  
Studying...  
Treating...  
**CURING**



Together We *WILL* Find The Cure!

[www.progeriaresearch.org](http://www.progeriaresearch.org)