

LIVRQNaC (AXA1125) Increases Fatty Acid Oxidation in a Primary Human Hepatocyte Model of Nonalcoholic Steatohepatitis



Matthew Russell¹, Christopher B. Newgard^{2,3}, Guo-Fang Zhang², Arianna Nitzel¹, Michael Hamill⁴, and Karim Azer¹

¹Axcella Therapeutics, Cambridge, MA, United States; ²Duke Molecular Physiology Institute and Department of Medicine, Durham, NC, United States; ³Department of Pharmacology and Cancer Biology, Duke University Medical Center, Durham, NC, United States; ⁴Flagship Pioneering, Cambridge, MA, United States

Introduction

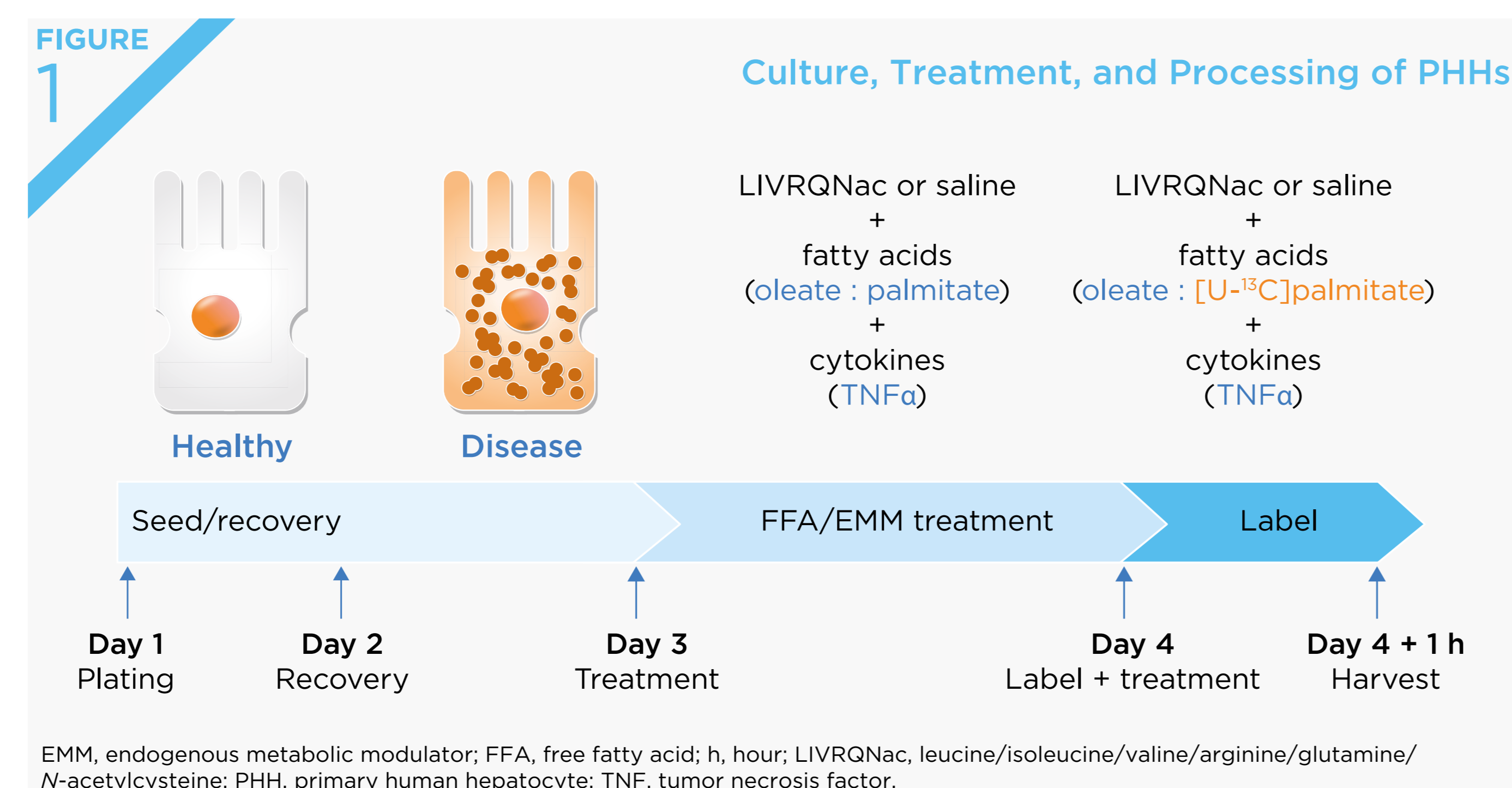
- Complex diseases involve dysregulation of multiple biological pathways, limiting the effectiveness of single-targeted therapies¹
- Endogenous metabolic modulators (EMMs) are naturally occurring compounds with signaling and regulatory properties that, when selectively combined, may elicit multifactorial effects in complex diseases
- In a 16-week clinical study, administration of AXA1125, a novel EMM composition of 5 specific amino acids (AAs; leucine [L], isoleucine [I], valine [V], arginine [R], glutamine [Q]) and an AA derivative, *N*-acetylcysteine (Nac), resulted in a greater reduction of hepatic fat than placebo as one of its multifactorial effects in patients with nonalcoholic fatty liver disease^{2,3}
- An analogous decrease in triglyceride accumulation has been observed in primary human hepatocytes (PHHs) treated with LIVRQNaC,⁴ the nonclinical form of AXA1125 containing the same constituents; a mechanism explaining this effect might be promotion of fatty acid oxidation (FAO) in PHHs by LIVRQNaC

Aim

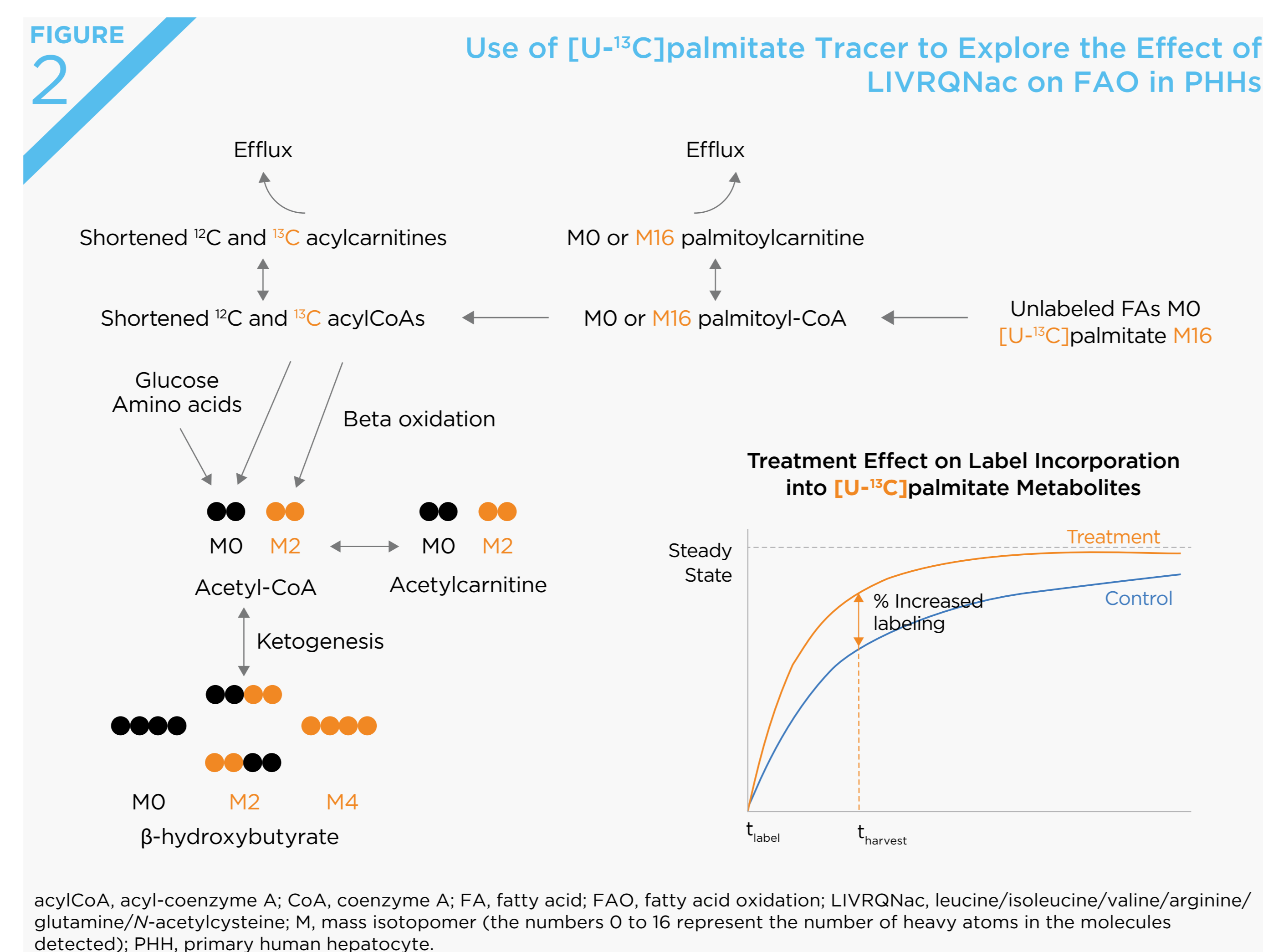
- To determine the *in vitro* effects of LIVRQNaC on FAO in a PHH model of nonalcoholic steatohepatitis (NASH) using a stable isotope-labeled tracer with chromatography and mass spectrometry

Methods

- PHHs were seeded in collagen-coated 12-well plates on Day 1; 48 hours later, PHHs were switched to a custom medium containing physiological concentrations of AAs, 500 μM carnitine, 10 μg/mL insulin, 10 ng/mL epidermal growth factor, 1 μM dexamethasone, and LIVRQNaC (10x or 30x) or control saline. Cells were then treated with free fatty acids (FFAs, 250 μM, 2:1 oleate:palmitate) and tumor necrosis factor alpha (1 ng/mL). Following a 24-hour exposure to disease stimulus and LIVRQNaC, PHHs were retreated using a stable isotope-labeled [¹³C]palmitate tracer for 1 hour (Figure 1)
- Following the 1-hour incubation with [¹³C]palmitate, PHHs were lysed and analyzed for [¹³C]palmitate and unlabeled palmitate metabolites using gas chromatography-mass spectrometry and liquid chromatography with tandem mass spectrometry (Figure 2)



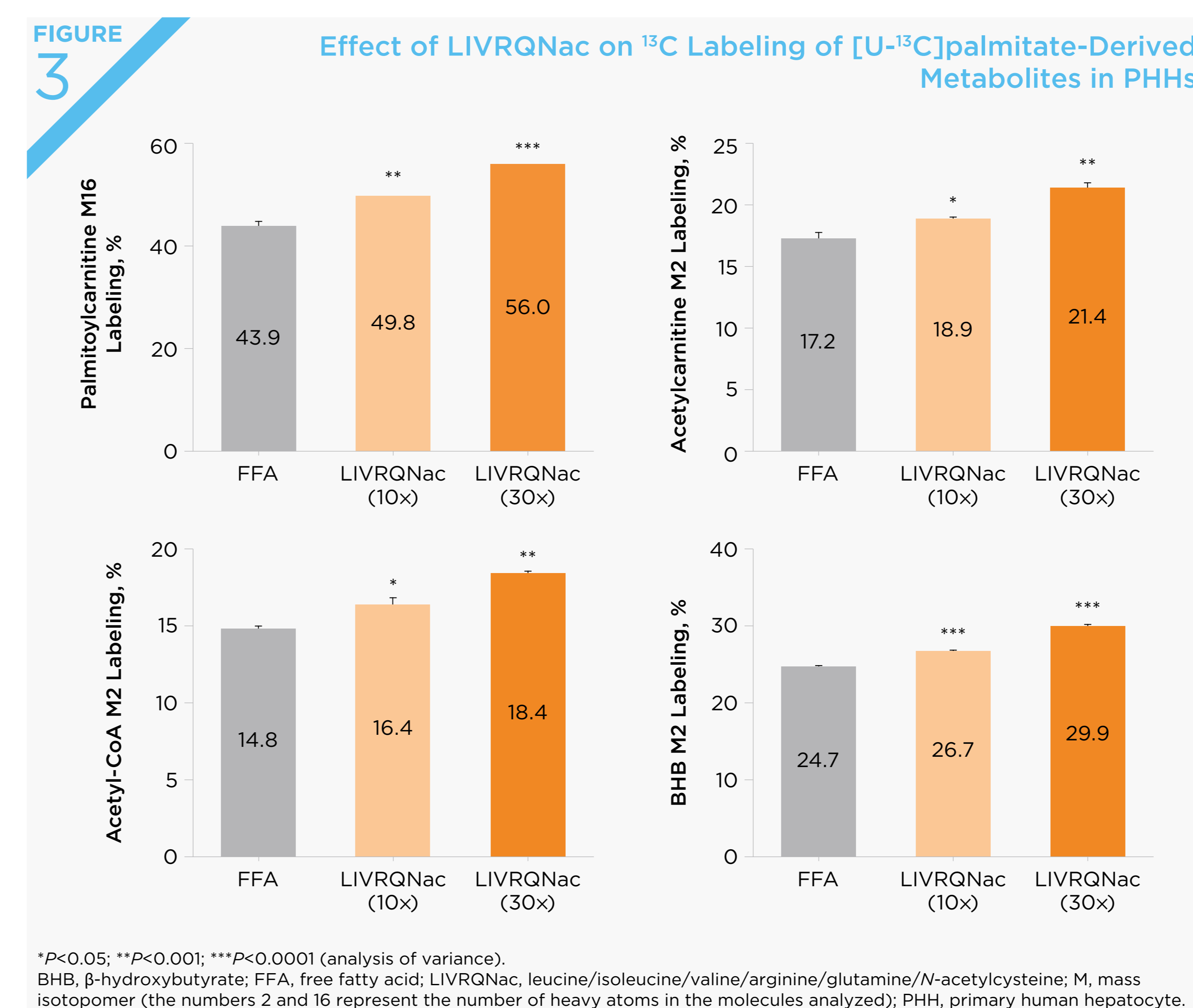
EMM, endogenous metabolic modulator; FFA, free fatty acid; h, hour; LIVRQNaC, leucine/isoleucine/valine/arginine/glutamine/*N*-acetylcysteine; PHH, primary human hepatocyte; TNF, tumor necrosis factor.



acylCoA, acyl-coenzyme A; CoA, coenzyme A; FA, fatty acid; FAO, fatty acid oxidation; LIVRQNaC, leucine/isoleucine/valine/arginine/glutamine/*N*-acetylcysteine; M, mass isotopomer (the numbers 0 to 16 represent the number of heavy atoms in the molecules detected); PHH, primary human hepatocyte.

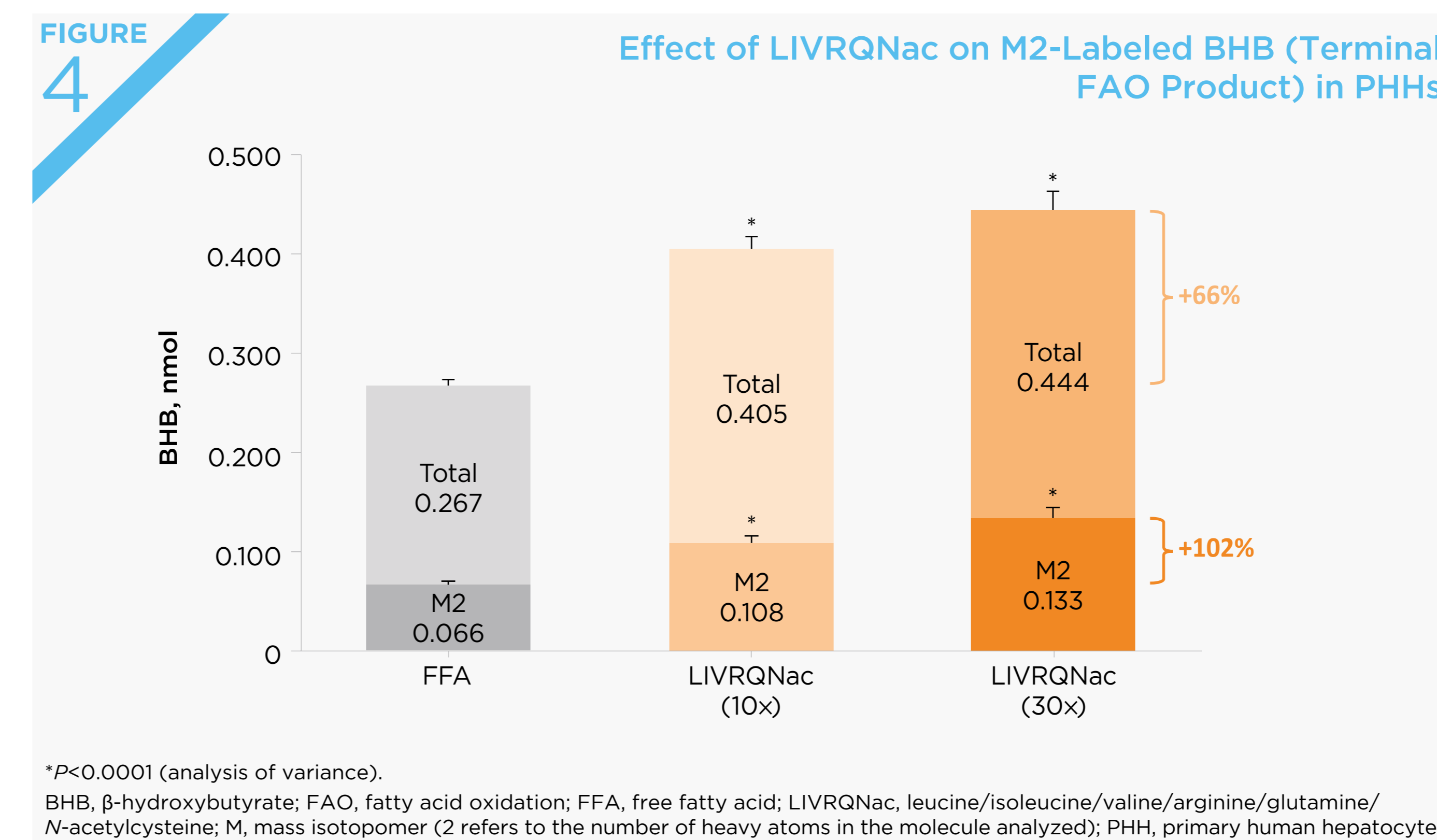
Results

- LIVRQNaC treatment significantly and dose-dependently increased ¹³C labeling of palmitate metabolites (palmitoylcarnitine, acetylcarnitine, acetyl-coenzyme A [acetyl-CoA], and β-hydroxybutyrate [BHB]), compared with the saline control (Figure 3)
 - The increased palmitoylcarnitine labeling likely represents LIVRQNaC facilitation of FAO initiation allowing acylcarnitine transition into mitochondria
 - The increased acetylcarnitine and acetyl-CoA labeling indicates an increase in β-oxidation, during which successive 2-carbon units are cleaved from acyl-coenzyme A chains as FAO product acetyl-CoA, in equilibrium with acetylcarnitine
 - BHB labeling and concentration are good indexes of FAO as both tend to increase with increased FAO



P*<0.05; *P*<0.001; ****P*<0.0001 (analysis of variance). BHB, β-hydroxybutyrate; FFA, free fatty acid; LIVRQNaC, leucine/isoleucine/valine/arginine/glutamine/*N*-acetylcysteine; M, mass isotopomer (the numbers 2 and 16 represent the number of heavy atoms in the molecules analyzed); PHH, primary human hepatocyte.

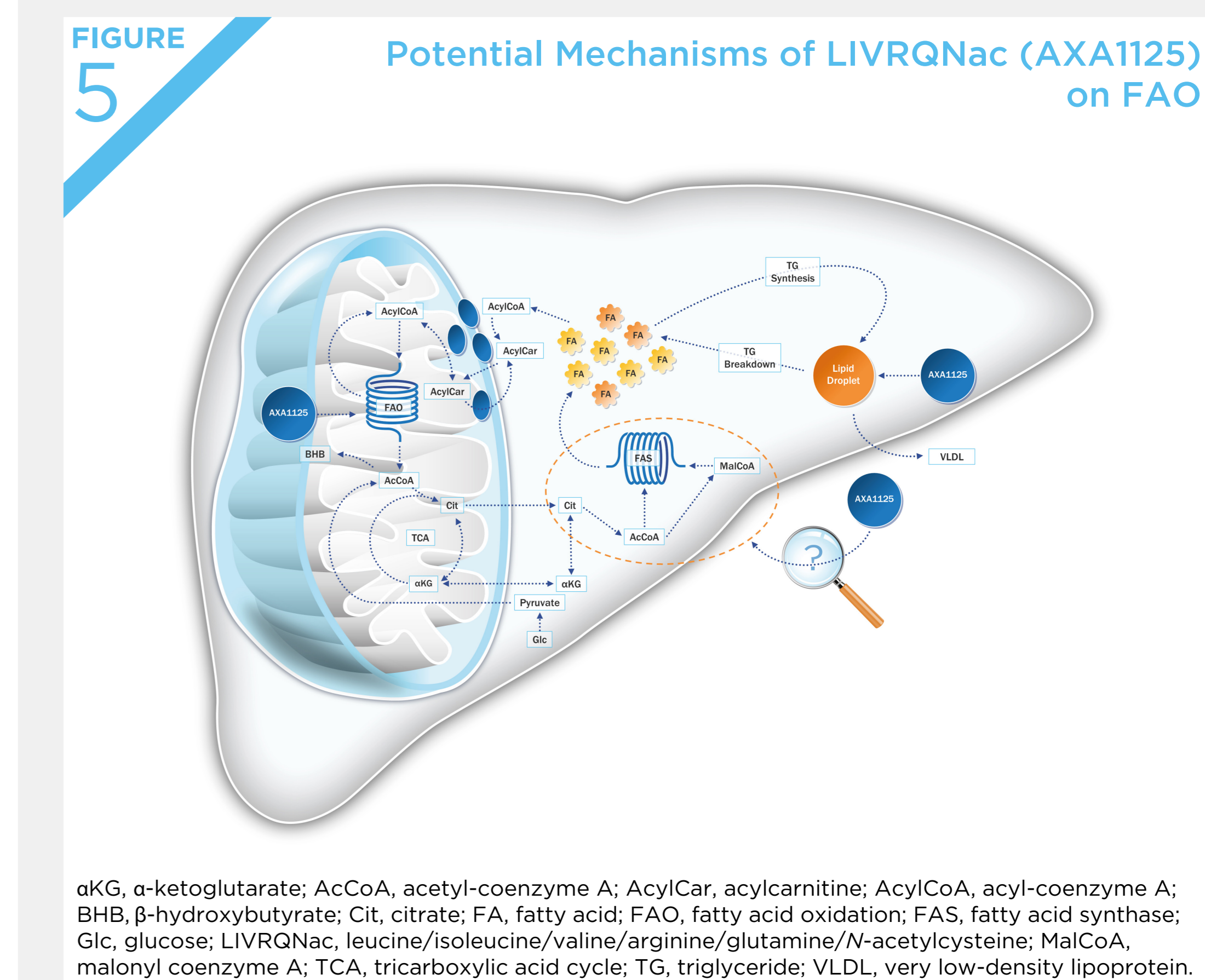
- The total amount of BHB increased dose dependently by 52% and 66% following treatment with LIVRQNaC 10x and LIVRQNaC 30x, respectively, compared with the saline control (Figure 4)
 - These increases demonstrate upregulation of the FAO pathway with LIVRQNaC in PHHs, since BHB is a terminal end product of FAO
- Notably, the amount of mass isotopomer 2 (M2)-labeled BHB increased dose-dependently by 64% and 102% in PHHs treated with LIVRQNaC 10x and LIVRQNaC 30x, respectively, compared with the saline control (Figure 4)
 - M2-labeled BHB is derived from the [¹³C]palmitate tracer and thus confirms it is derived from LIVRQNaC-dependent FAO, as opposed to other sources, like ketogenic AA



**P*<0.0001 (analysis of variance). BHB, β-hydroxybutyrate; FAO, fatty acid oxidation; FFA, free fatty acid; LIVRQNaC, leucine/isoleucine/valine/arginine/glutamine/*N*-acetylcysteine; M, mass isotopomer (2 refers to the number of heavy atoms in the molecule analyzed); PHH, primary human hepatocyte.

Conclusions

- Statistically significant increases in labeled palmitoylcarnitine, acetylcarnitine, acetyl-CoA, and BHB in comparison with control reflected an increase in FAO in PHHs treated with LIVRQNaC
- Consistently, there was a statistically significant increase in total intracellular BHB and percentage of label incorporation in LIVRQNaC-treated cells, indicating an increase in ketogenesis, with ketone body terminal end products derived from oxidized fatty acids
- Taken together, these data support a mechanism for the clinical effect of AXA1125 of decreasing liver fat by increasing FAO and increasing ketogenesis from fatty acids
- We are also investigating the role of LIVRQNaC in modulating additional lipid biology (Figure 5)
 - Mitochondrial fatty acid metabolism contributes to cellular energy production with implications in NASH and beyond
- The multifactorial effects of LIVRQNaC, previously reported in PHHs and other NASH-relevant cell types,⁴ include additional anti-inflammatory and antifibrotic benefits that complement its effects on lipid metabolism, improving biological mechanisms driving NASH disease progression
- AXA1125 is currently being studied in a phase 2b study in individuals with NASH (NCT04880187)



αKG, α-ketoglutarate; AcCoA, acetyl-coenzyme A; AcylCar, acylcarnitine; AcylCoA, acyl-coenzyme A; BHB, β-hydroxybutyrate; Cit, citrate; FA, fatty acid; FAO, fatty acid oxidation; FAS, fatty acid synthase; Glc, glucose; LIVRQNaC, leucine/isoleucine/valine/arginine/glutamine/*N*-acetylcysteine; MalCoA, malonyl coenzyme A; TCA, tricarboxylic acid cycle; TG, triglyceride; VLDL, very low-density lipoprotein.

References

- Friedman SL, et al. *Nat Med*. 2018;24:908-922.
- Harrison SA, et al. *J Hepatol*. 2020;73:S123.
- Harrison SA, et al. *Am J Gastroenterol*. 2021;116:2399-2409.
- Daou N, et al. *Nat Sci Rep*. 2021;11:11861.

Acknowledgments

This study was supported by Axcella Therapeutics, Cambridge, MA, USA. Medical writing support and editorial assistance were provided by Evidence Scientific Solutions, Inc (Philadelphia, PA, USA) and funded by Axcella Therapeutics.

Disclosures

CBN: Served as a paid consultant for Axcella Therapeutics; part of his compensation included grant of stock options, which are currently unexercised. **GFZ:** Conducted the labeling studies at the Duke Molecular Physiology Institute, supported by a sponsored research agreement with GFZ and **CBN**. **MH:** Employed by Axcella Therapeutics when the studies were conducted and holds stock options in Axcella. **HR, AN, KA:** Employed by Axcella Therapeutics and hold stock options in Axcella. All authors met the ICMJE authorship criteria. Neither honoraria nor payments were made for authorship. **Corresponding author:** Matthew Russell, PhD (mrussell@axcellatx.com)