

# *Challenges in Neuroscience Discovery and Development*

## *What has Changed and Where are We Headed?*

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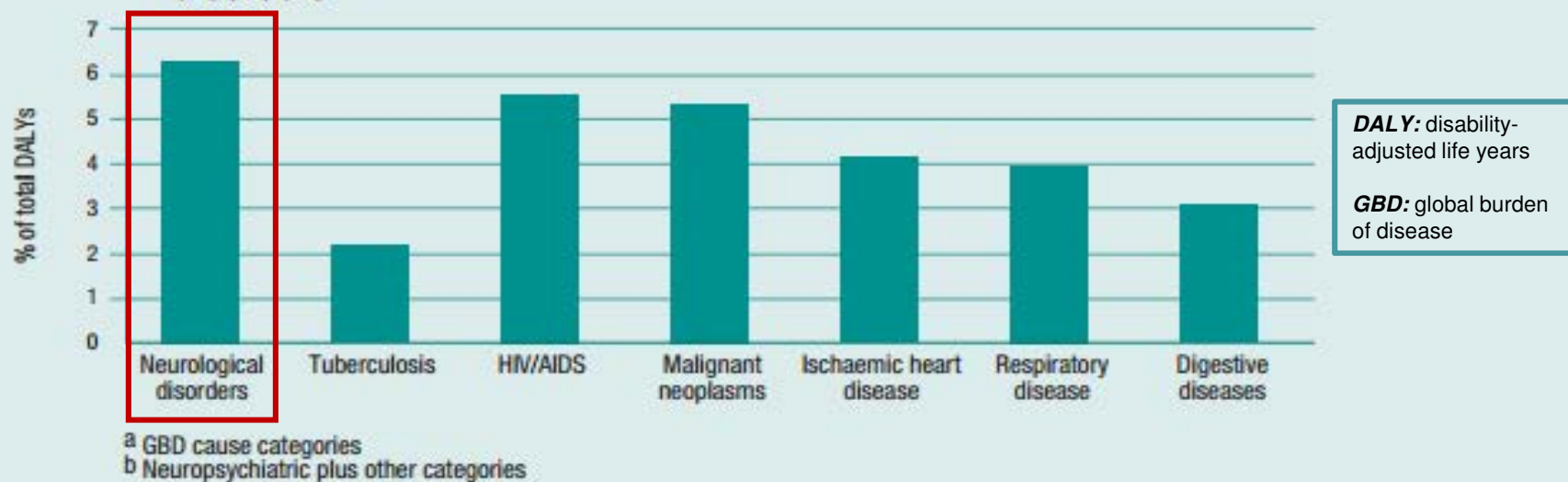


# Summary of Talk

- Historically how successful have we been in Neuroscience Therapeutics?
- What has led to / defined past success?
- What is different now?
- What does future success look like?
- What we now need to do?
- Recent example: Belsomra (Suvorexant)  
“*Trifecta* of Target Validation”

# Global burden of neurologic and psychiatric disorders

Figure 2.1 Percentage of total DALYs for selected diseases<sup>a</sup> and neurological disorders<sup>b</sup>

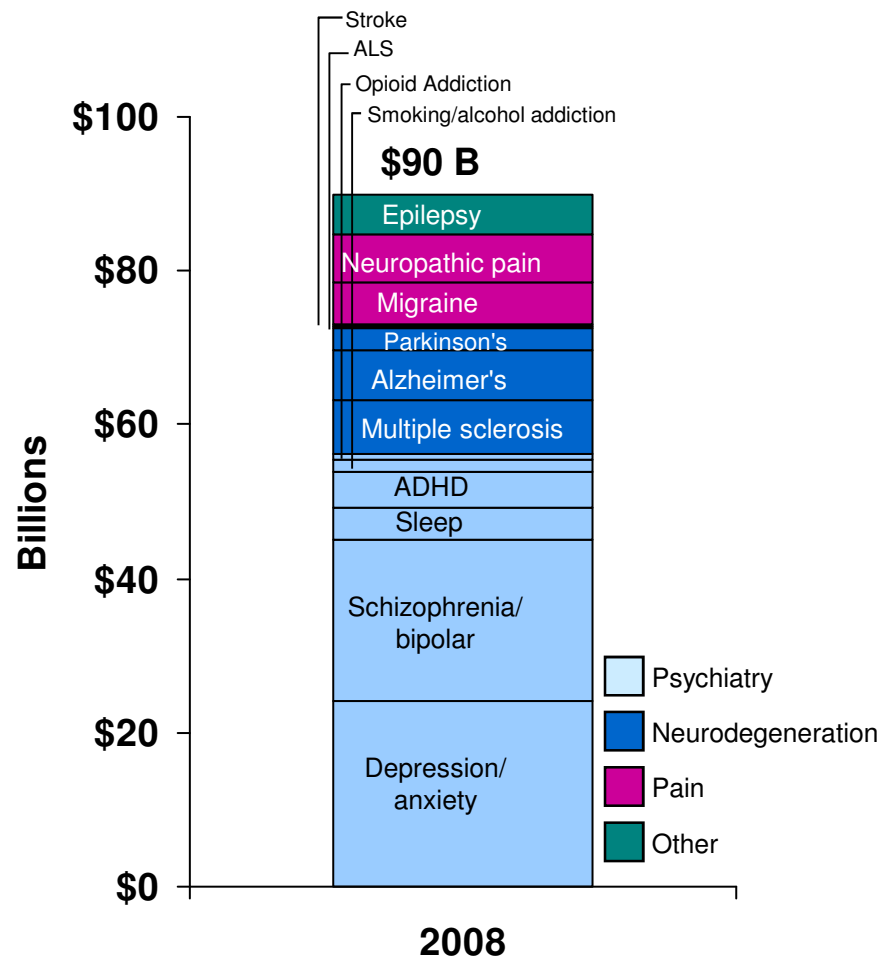


- The **disability-adjusted life year (DALY)** is a measure of overall disease burden
- Each DALY represents 1 year lost due to ill-health, disability or early death
- WHO estimates that in the United States between 2000 and 2012, disorders of the nervous system accounted for 7 of the 20 highest causes of DALYs <sup>1</sup>

<sup>1</sup> WHO global health estimates 2014

[http://www.who.int/healthinfo/global\\_burden\\_disease/en/](http://www.who.int/healthinfo/global_burden_disease/en/)

# 2008 Neuroscience Overview



## • Psychiatry

- Largest value accounting for ~ 48% of all CNS sales
- Significant unmet need especially in schizophrenia and depression / bipolar where opportunity still exists for novel drugs

## • Neurology

- Growing sector of CNS need as aging population drives prevalence in neurodegenerative disorders

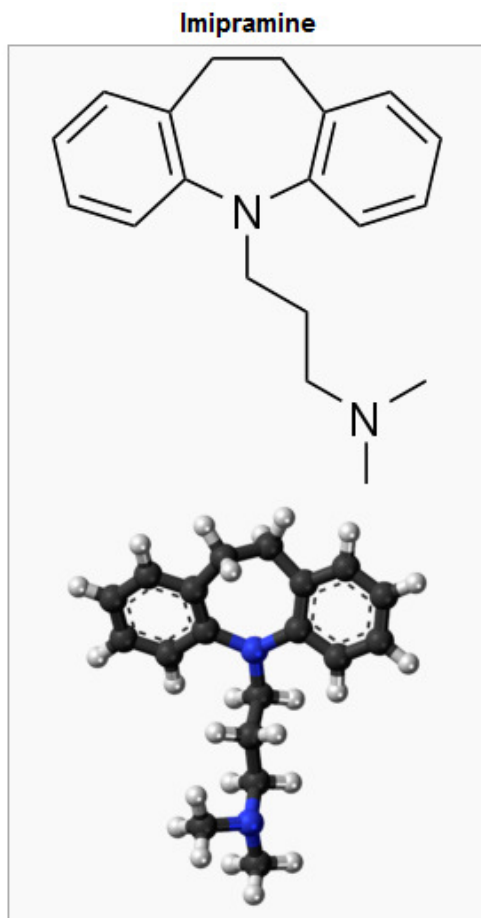
**What can we say about these classes of drugs?**

# Neuroscience Therapeutic Mechanisms in 2010

Neurotransmitter Class	System / Function	Drugs Approved	# of Top 60 Drugs
<u><b>Amino Acids</b></u> <ul style="list-style-type: none"> <li>• GABA</li> <li>• Glutamate</li> </ul>	<ul style="list-style-type: none"> <li>• Fast onset</li> <li>• Excitability/plasticity</li> <li>• Widespread</li> <li>• Multiple targets</li> </ul>	<ul style="list-style-type: none"> <li>▪ Sedative hypnotics</li> <li>▪ Benzodiazapenes</li> <li>▪ Anticonvulsants</li> <li>▪ Memantine</li> <li>▪ Ketamine</li> </ul>	6 / 60
<u><b>Biogenic amines</b></u> <ul style="list-style-type: none"> <li>• Dopamine</li> <li>• Norepinephrine</li> <li>• 5-HT</li> <li>• Histamine</li> </ul>	<ul style="list-style-type: none"> <li>• Modulatory</li> <li>• Widespread</li> <li>• Multiple targets</li> </ul>	<ul style="list-style-type: none"> <li>▪ L-DOPA, dopaminergics</li> <li>▪ <b>Antipsychotics</b></li> <li>▪ <b>Tricyclics, SSRIs, SNRIs</b></li> <li>▪ Stimulants</li> <li>▪ Triptans</li> </ul>	14 / 60
<u><b>Cholinergic / purinergic</b></u> <ul style="list-style-type: none"> <li>• Acetylcholine</li> <li>• Adenosine / ATP</li> </ul>	<ul style="list-style-type: none"> <li>• Modulatory</li> <li>• Widespread</li> <li>• Multiple targets</li> </ul>	<ul style="list-style-type: none"> <li>▪ Acetylcholine esterase inhibitors</li> <li>▪ Nicotine Patch</li> <li>▪ Chantix</li> </ul>	2 / 60
<u><b>Neuropeptides</b></u> <ul style="list-style-type: none"> <li>• Substance P</li> <li>• CGRP</li> <li>• Orexins</li> <li>• Enkephalins</li> </ul>	<ul style="list-style-type: none"> <li>• Perturbed homeostasis</li> <li>• Dynamic regulation</li> <li>• Selective distribution</li> <li>• Targeted function</li> </ul>	<ul style="list-style-type: none"> <li>▪ Substance P / EMEND</li> <li>▪ Opiates</li> </ul>	1 / 60

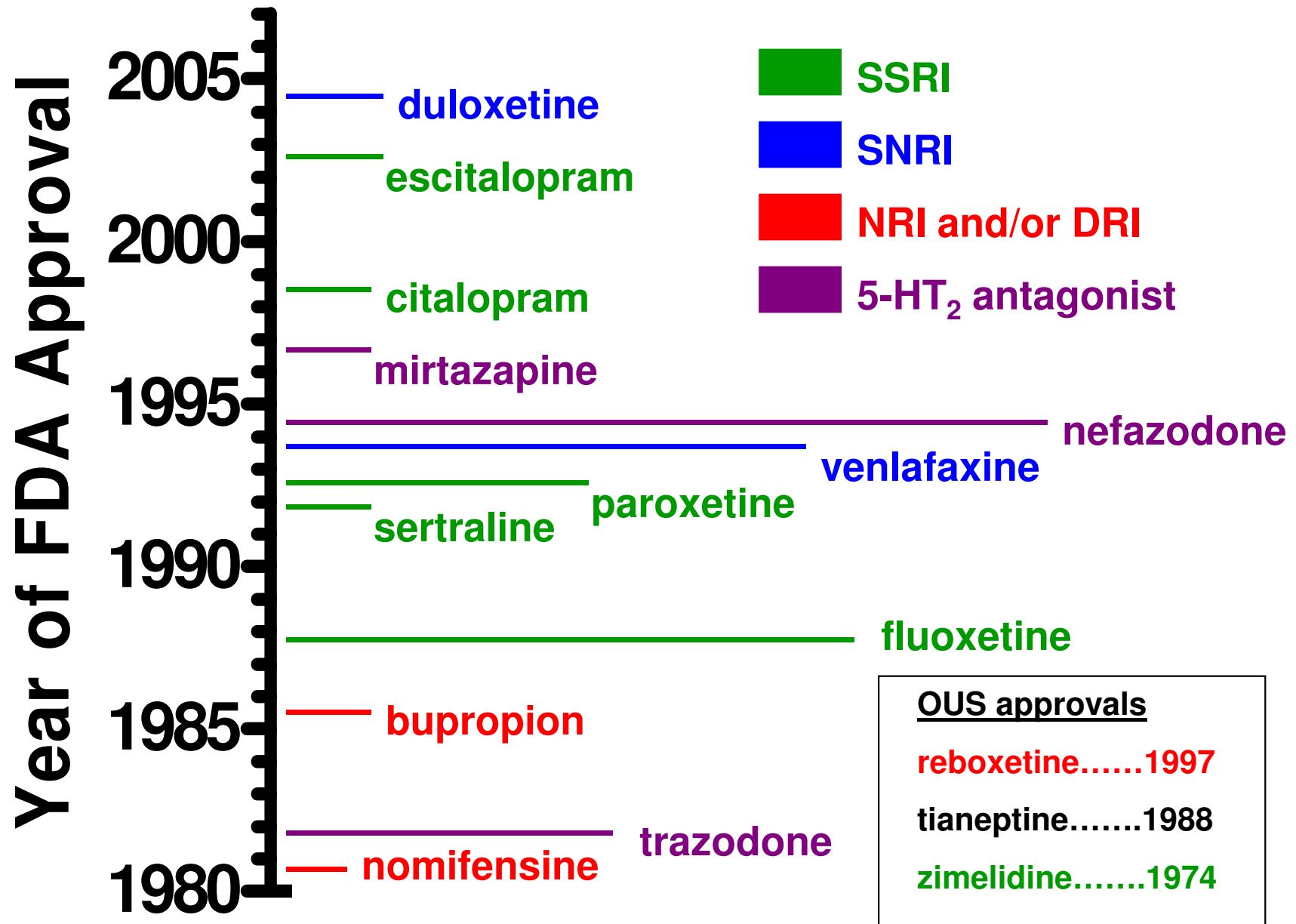
Source: Verispan, VONA, Drugs.com

# First the Molecule , then the Mechanism...



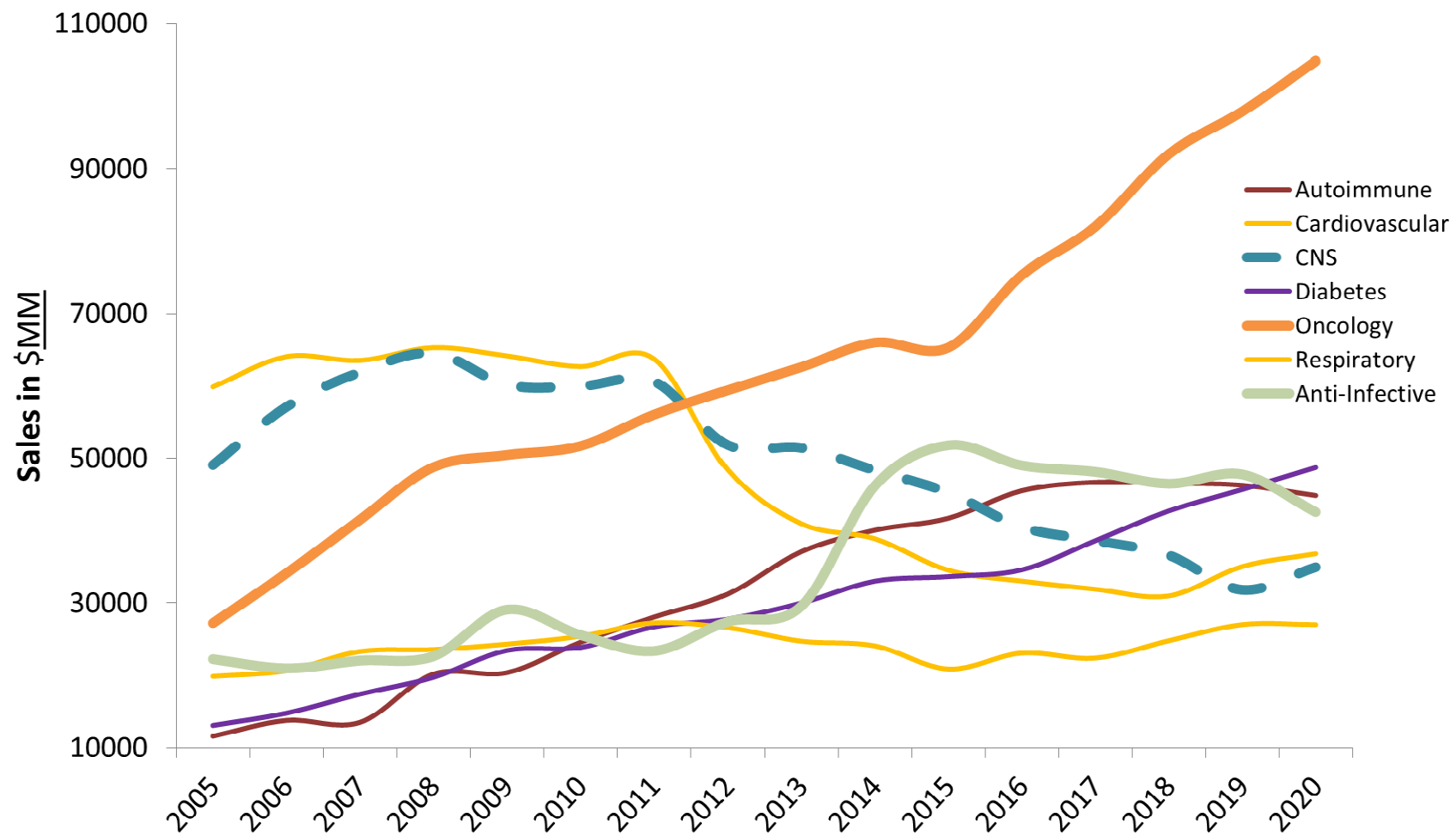
- Imipramine was first tried against psychotic disorders such as schizophrenia, but proved insufficient.
- At the first international congress of neuro-pharmacology in Rome, September 1958 Dr Freyhan from the University of Pennsylvania discussed as one of the first clinicians the effects of imipramine in a group of 46 patients, most of them diagnosed as "depressive psychosis".
- The patients were selected for this study based on symptoms such as depressive apathy, kinetic retardation and feelings of hopelessness and despair.
- In 30% of all patients, he reported optimal results, and in around 20%, failure.

# Antidepressant New Drug Approvals –Iteration of Serendipity



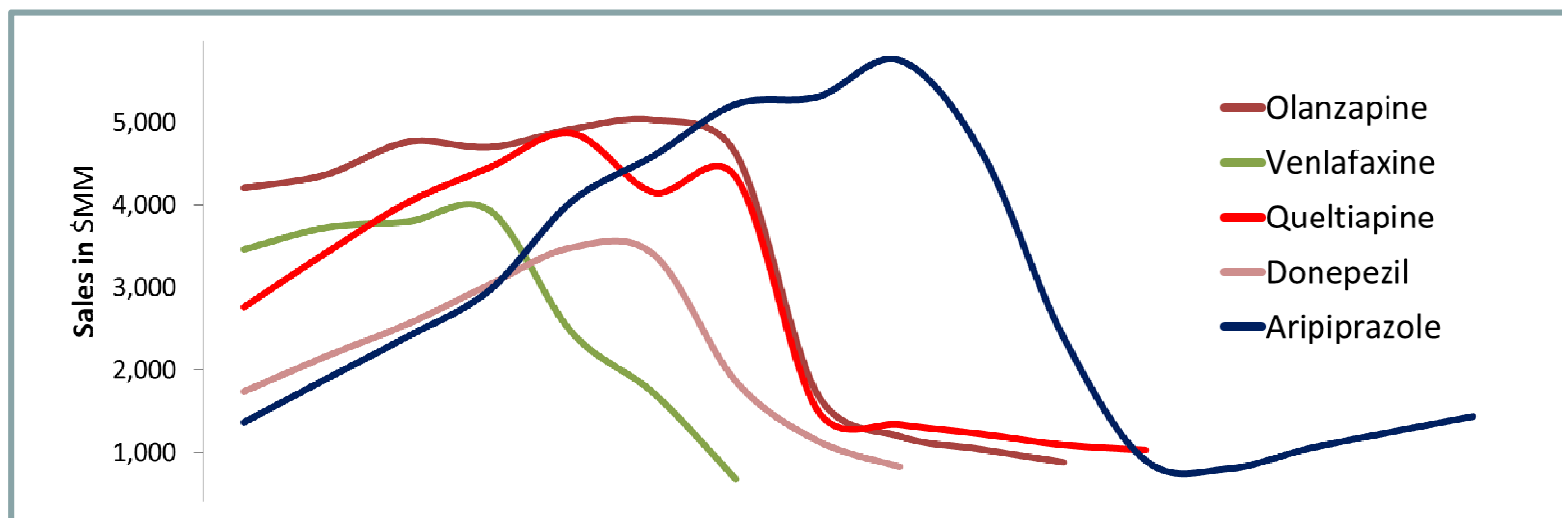
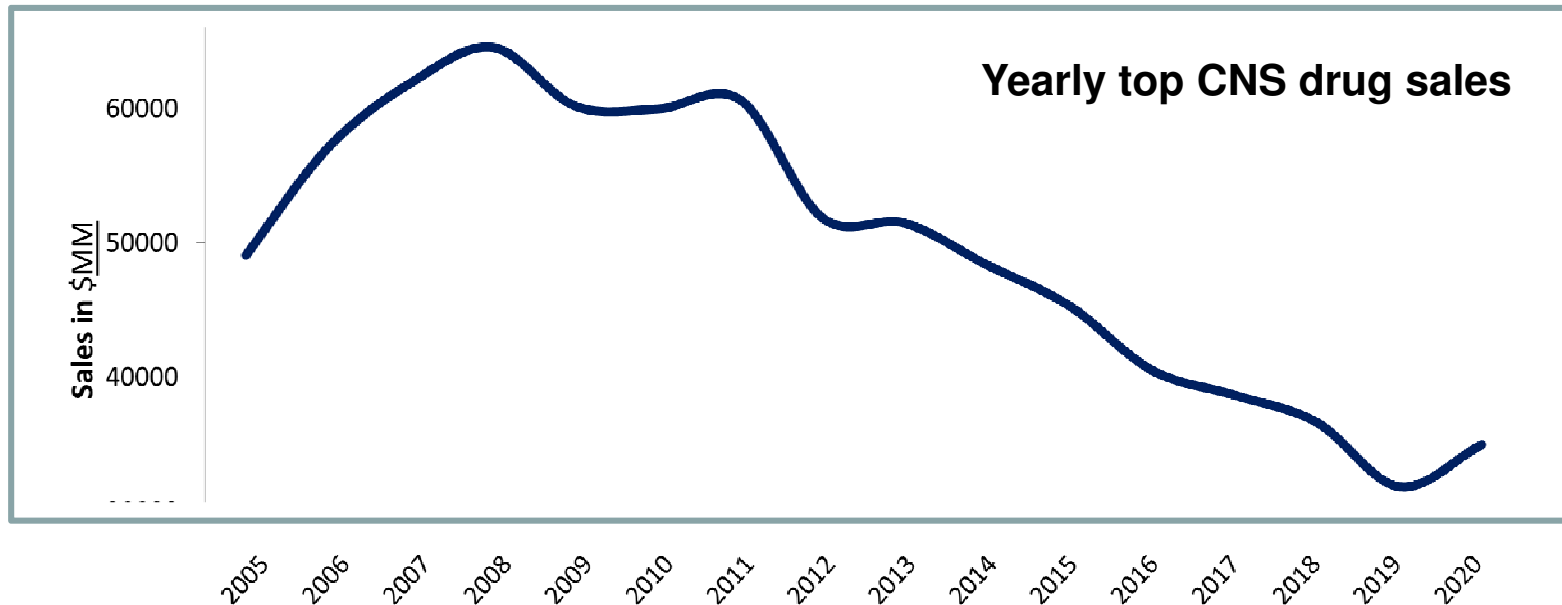
# Drug Sales for Major Therapeutic Areas – 2005-2020

## Top 200 Drugs





# Neuroscience Drugs Patent Cliff - Top Contributing Drugs



# Challenges in Neuroscience Discovery and Development

- ✓ Historically how successful have we been in Neuroscience Therapeutics?
- ✓ What has led to / defined past success?
- **What is different now?**
- **What does future success look like?**
- **What we now need to do?**
- Recent example: Belsomra (Suvorexant)  
“*Trifecta* of Target Validation”

## WELCOME TO THE FDA CENTER FOR DRUG EVALUATION AND RESEARCH'S (CDER) FOURTH ANNUAL NOVEL NEW DRUGS SUMMARY.

- Each year, CDER approves hundreds of new medications, most of which are variations of previously existing products.....These new products contribute to quality of care, greater access to medication, more consumer choice, and a competitive marketplace that enhances affordability and public health.
- However, products in a small subset of these new approvals, which we refer to as novel new drugs, are among the more truly innovative products that often help advance clinical care to another level.
- At the end of each calendar year, CDER summarizes these new products.



U.S. Food and Drug Administration  
Center for Drug Evaluation and Research  
[www.fda.gov/drugs](http://www.fda.gov/drugs)

IMPACT · INNOVATION

# NOVEL NEW DRUGS 2014 SUMMARY

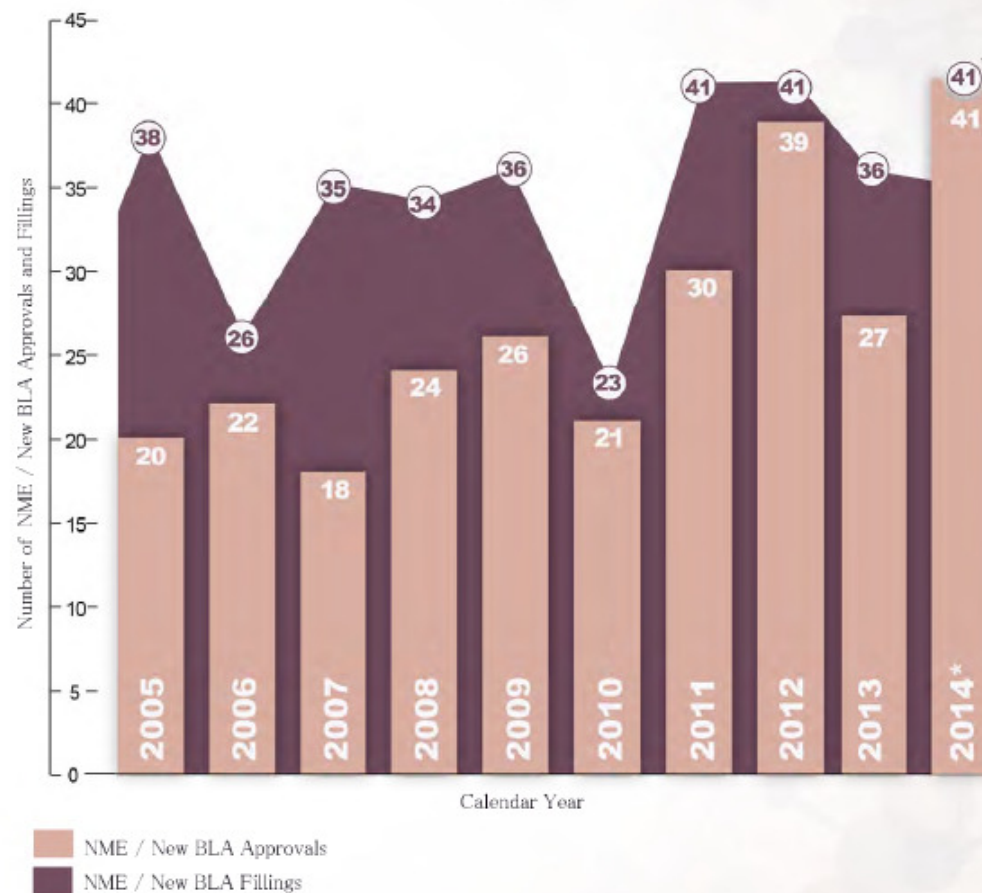
JANUARY 2015

41 NOVEL NEW DRUG  
APPROVALS IN CY 2014 IS MORE  
THAN THE AVERAGE NUMBER  
APPROVED ANNUALLY DURING  
THE PAST DECADE

FROM 2005 THROUGH 2013  
CDER HAS AVERAGED

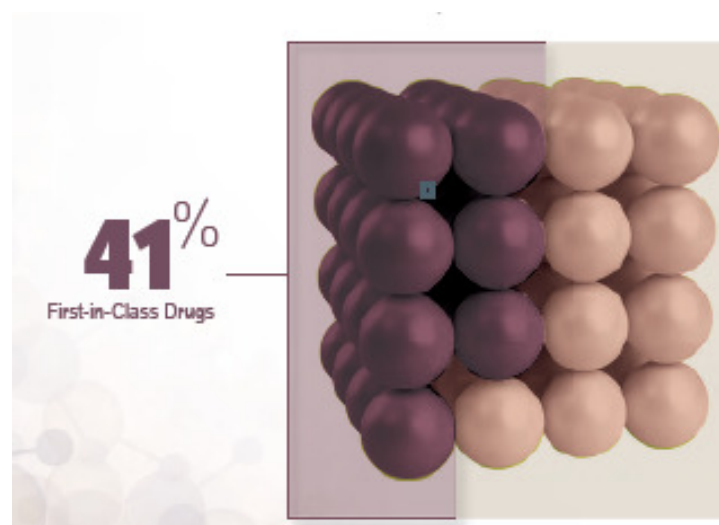
# 25

NOVEL NEW DRUG  
APPROVALS PER YEAR



# Class of 2014: 41 Novel New Drug US Approvals Innovation in Neuroscience is “Still” Rare

NOVEL NEW DRUGS
2014
AKYNZEO
BELEODAQ
BELSOMRA
BLINCYTO
CERDELGA
CYRAMZA
DAIVANCE
ENTYVIO
ESBRIET
FARXIGA
HARVONI
HETLIOZ
IMPAVIDO
JARDIANCE
JUBLIA
KERYDIN
KEYTRUDA
LUMASON
LYNPARZA
MOVANTIK
MYALEPT
NEURACEQ
NORTHERA
OFEV
OPDIVO
ORBACTIV
OTEZLA
FLEGRIIDY
RAPIVAB
SIVEXTRO
STRIVERDI RESPIMAT
SYLVANT
TANZEUM
TRULICITY
VIEKIRA PAK
VIMIZIM
XTORO
ZERBAXA
ZONTIVITY
ZYDELIG
ZYKADIA



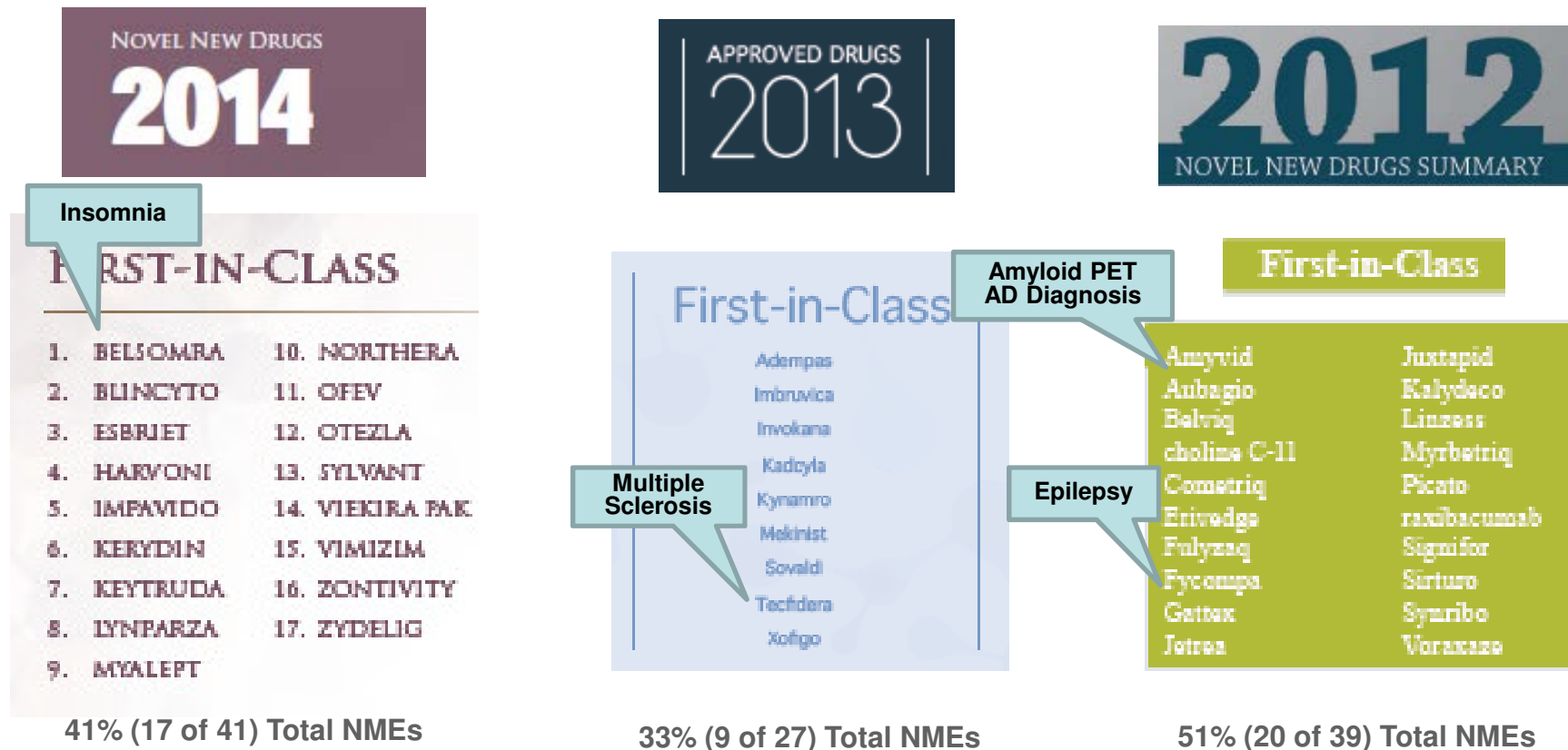
## FIRST-IN-CLASS

- |             |                 |
|-------------|-----------------|
| 1. BELSOMRA | 10. NORTHERA    |
| 2. BLINCYTO | 11. OFEV        |
| 3. ESBRIET  | 12. OTEZLA      |
| 4. HARVONI  | 13. SYLVANT     |
| 5. IMPAVIDO | 14. VIEKIRA PAK |
| 6. KERYDIN  | 15. VIMIZIM     |
| 7. KEYTRUDA | 16. ZONTIVITY   |
| 8. LYNPARZA | 17. ZYDELIG     |
| 9. MYALEPT  |                 |

- Only ONE Neuroscience compound on first-in-class list
- Two on entire list of 41 but one was a PET diagnostic (Neuraceq / <sup>18</sup>F-florbetaben)

# Novel New Drug US Approvals by Year

## Innovation in Neuroscience is “Still” Rare



How many Neuroscience compounds on first-in-class lists?

# Rationally Designed Fundamentally New Neuroscience Mechanisms are Rare Events

## Neurotransmitter Class

### Amino Acids

- GABA
- Glutamate

### Biogenic amines

- Dopamine
- Norepinephrine
- 5-HT
- Histamine

### Cholinergic / purinergic

- Acetylcholine
- Adenosine / ATP

### Neuropeptides

- Orexins
- CGRP
- Enkephalins

## System / Function

- Fast onset
- Excitability/plasticity
- Widespread
- Multiple targets

- Modulatory
- Widespread
- Multiple targets

- Modulatory
- Widespread
- Multiple targets

- Perturbed homeostasis
- Dynamic regulation
- Targeted function
- Selective distribution

## Drugs Approved

- Sedative hypnotics
- Benzodiazapenes
- Anticonvulsants
- Memantine
- Ketamine

- **L-DOPA, dopaminergics**
- Antipsychotics
- Tricyclics, SSRIs, SNRIs
- Stimulants
- **Triptans**

- **Acetylcholine esterase inhibitors**
- Nicotine Patch
- Chantix

- **Suvorexant (Belsomra)**
- Opiates



# Parkinson's Disease: History of Innovation

## ***L-DOPA: First Rationally Designed CNS Drug?***

**1910: Dopamine synthesized**

**1913 : L-DOPA isolated from Fava beans**

**1938: L-Dopa Decarboxylase Discovered**

**1957: Brain dopamine is involved in motor function**

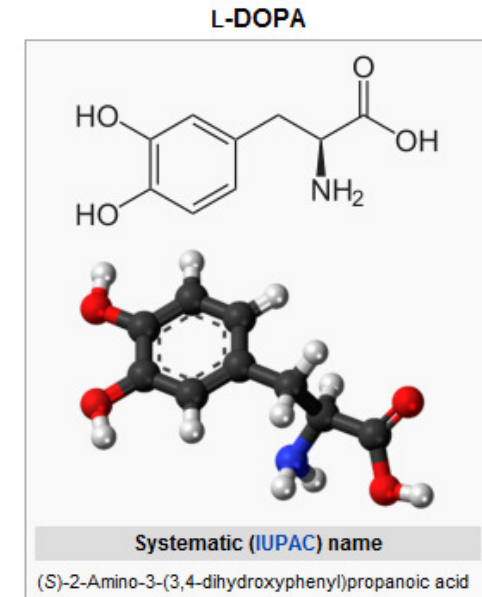
**1959: Dopamine enriched in striatal / motor brain regions**

**1960: Severe dopamine depletion in Parkinson's brain**

**1961: L-DOPA clinical trial for dopamine replacement**

**1967: High dose chronic L-DOPA therapy introduced**

**1969: L-DOPA plus DOPA decarboxylase inhibitor therapies introduced**



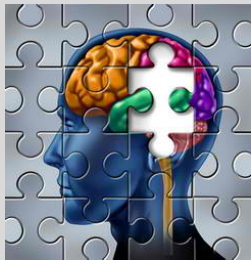


# Using Human Biology to Shape Therapeutic Approaches and Select the Best Drug Targets

What's in our toolbox?



Genetics



Pathophysiology

Pharmacology



Understanding of human disease



New ideas for drug targets

## 1. Modify/prevent disease

Target Pathophysiology

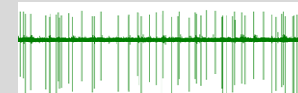


Alpha Synuclein

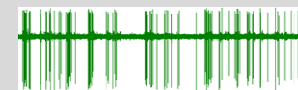
## 2. Restore function

Subthalamic Nucleus Neuronal Firing Rate Increases with Parkinson's Disease Progression

STN activity: Naïve Rat



STN activity: 6-OHDA Lesioned Rat

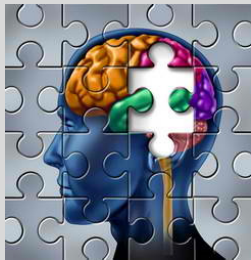


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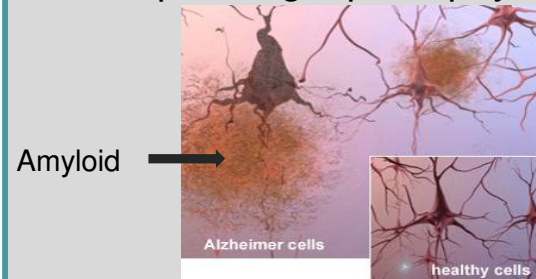
Understanding of human disease



New ideas for drug targets

## 1. Modify/prevent disease

Example: target pathophysiology



BACE INHIBITION – MK8931

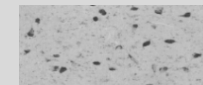
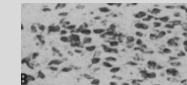
## 2. Restore function

Example: Restoring acetylcholine signaling

Normal Brain

Alzheimer's Brain

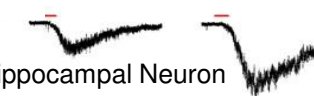
Cholinergic Neurons



Vehicle

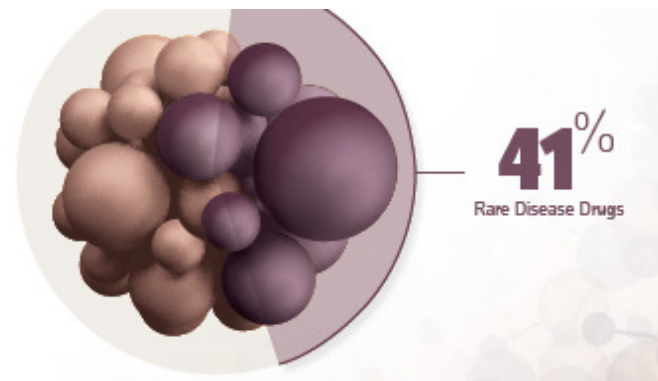
Compound

Hippocampal Neuron



Receptor PAMs  
Nicotinic  
Muscarinic

# Class of 2014: Many New Drugs for Orphan Diseases



RARE DISEASES	
1. BELEODAQ	10. MYALEPT
2. BLINCYTO	11. NORTHERA
3. CERDELGA	12. OFEV
4. CYRAMZA	13. OPDIVO
5. ESBRIET	14. SYLVANT
6. HETLIOZ	15. VIMIZIM
7. IMPAVIDO	16. ZYDELIG
8. KEYTRUDA	17. ZYKADIA
9. LYNPARZA	

About 41% of the novel new drugs approved in 2014 (17 of 41) were approved to treat rare or “orphan” diseases that affect 200,000 or fewer Americans. This is significant because patients with rare diseases often have few or no drugs available to treat their conditions.

**What does this mean for the Neuroscience area?**

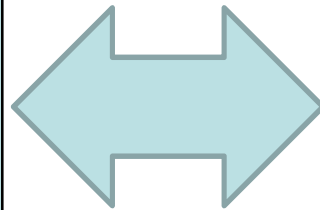
# Neuroscience Diseases– What to Chose?

## Major Diseases

**Alzheimer's Disease**  
**Parkinson's Disease**  
**Pain / Migraine**  
**Schizophrenia**  
**Depression**  
**Insomnia**

**Consider:**

- Supporting science
- Ability to translate
- Address medical needs
- Major markets



## “Rare” / Orphan Diseases

- Well defined patient populations
- Broader applications may also be possible
- Means to interrogate a novel mechanism

- Tauopathies (e.g. FTLD / PSP)
- Lewy Body Dementia
- ALS
- Gauchers Disease
- Narcolepsy
- Others.....

**Consider:**

- Very strong supporting science
- Increased POS
- Benefit versus risk more favorable
- Very high medical need
- Faster path to POC / Registration

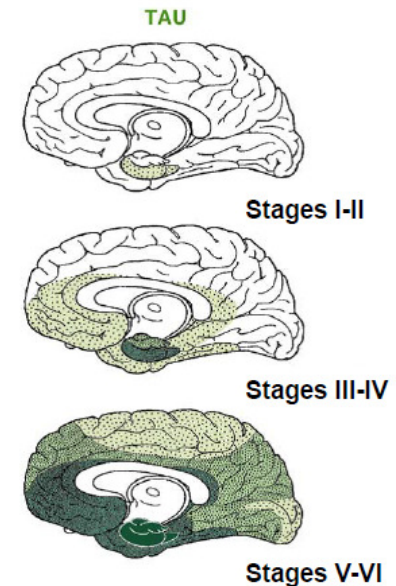
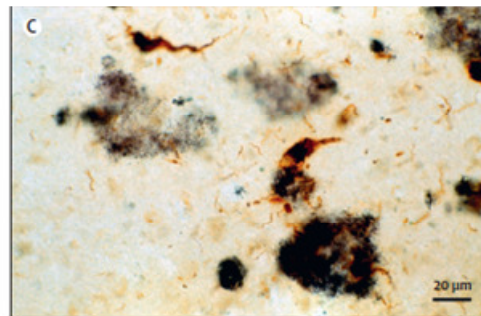


# Tau pathology and neurodegeneration

## Panel: Diseases with tau inclusions

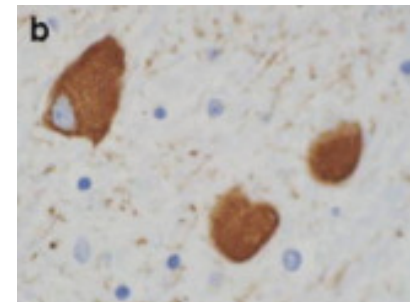
- Alzheimer's disease
- Amyotrophic lateral sclerosis and parkinsonism-dementia complex
- Argyrophilic grain disease
- Chronic traumatic encephalopathy
- Corticobasal degeneration
- Diffuse neurofibrillary tangles with calcification
- Down's syndrome
- Familial British dementia
- Familial Danish dementia
- Frontotemporal dementia and parkinsonism linked to chromosome 17 (caused by MAPT mutations)
- Frontotemporal lobar degeneration (some cases caused by C9ORF72 mutations)
- Gerstmann-Sträussler-Scheinker disease
- Guadeloupean parkinsonism
- Myotonic dystrophy
- Neurodegeneration with brain iron accumulation
- Niemann-Pick disease, type C
- Non-Guamanian motor neuron disease with neurofibrillary tangles
- Pick's disease
- Postencephalitic parkinsonism
- Prion protein cerebral amyloid angiopathy
- Progressive subcortical gliosis
- Progressive supranuclear palsy
- SLC9A6-related mental retardation
- Subacute sclerosing panencephalitis
- Tangle-only dementia
- White matter tauopathy with globular glial inclusions

## Alzheimer's Disease



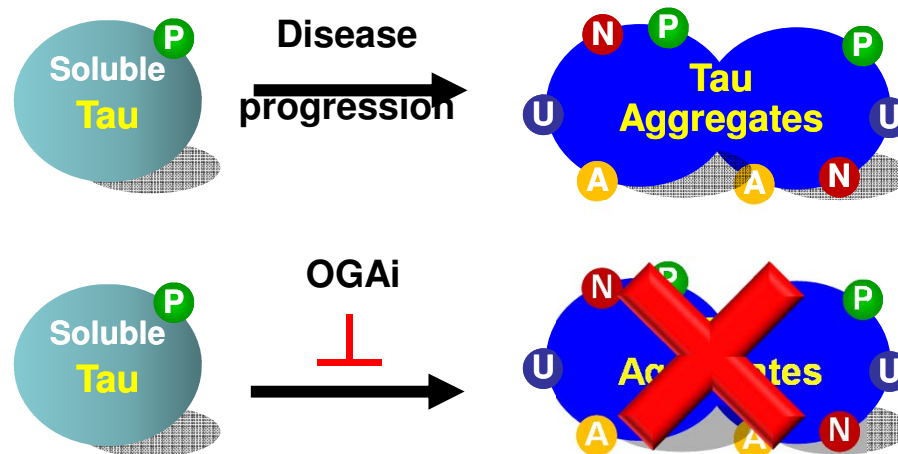
Goedert M et al., 2010

## Progressive supranuclear palsy



# OGA Inhibitors Increase Tau O-GlcNAcylation and Reduce Formation of Toxic Tau Species

- In adult brain, tau is O-GlcNAcylated at several sites
- OGA inhibitors increase tau O-GlcNAcylation

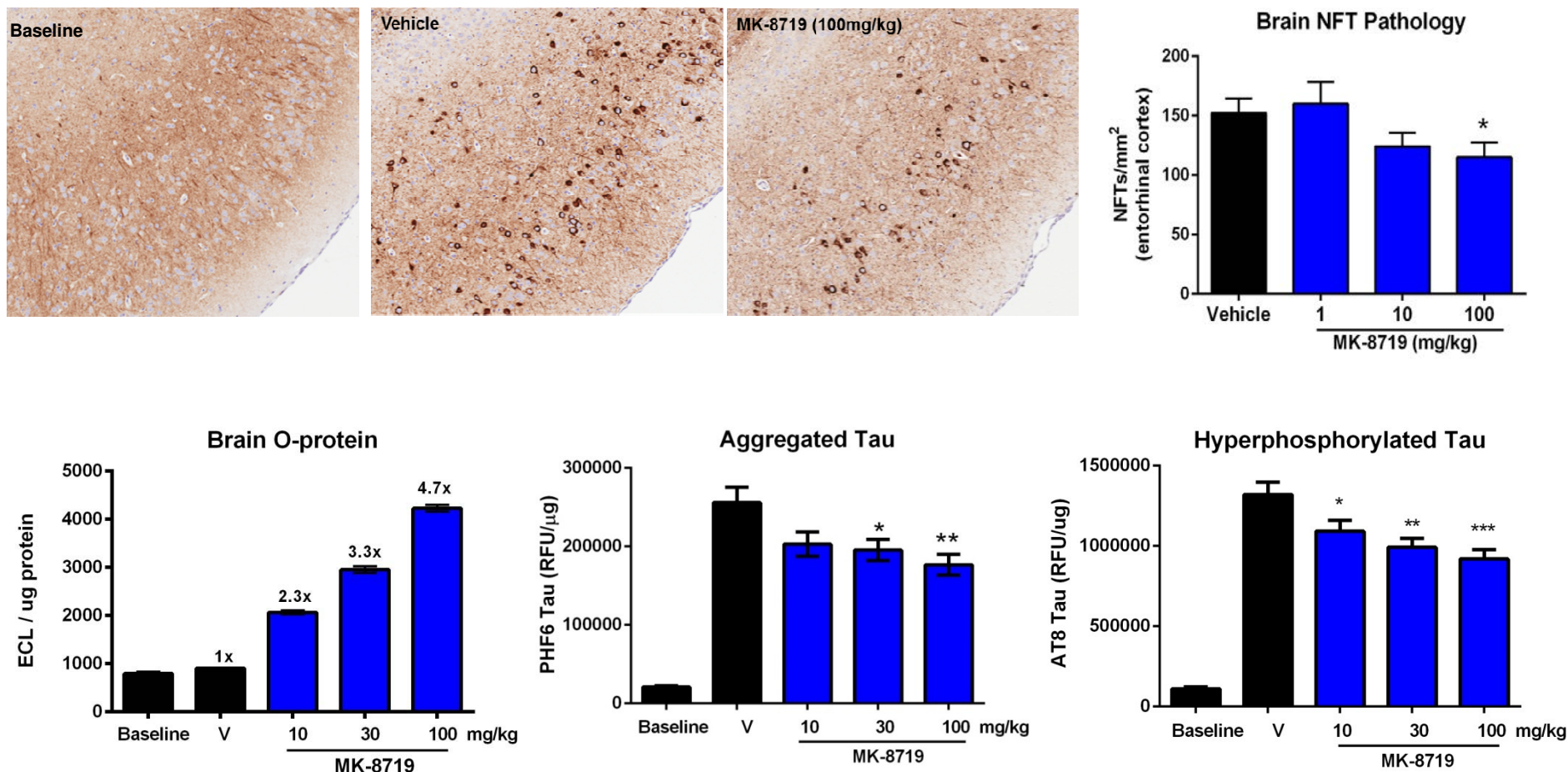


**Pathological tau aggregates**  
**Modified in various ways:**

- Hyperphosphorylated (P)
  - Acetylation (A)
  - Nitrated (N)
- Ubiquitinated (U)

- OGA inhibitors block formation of pathological tau

# The OGA Inhibitor MK-8719 Reduces NFTs and Pathological Tau in Tg4510 Mice



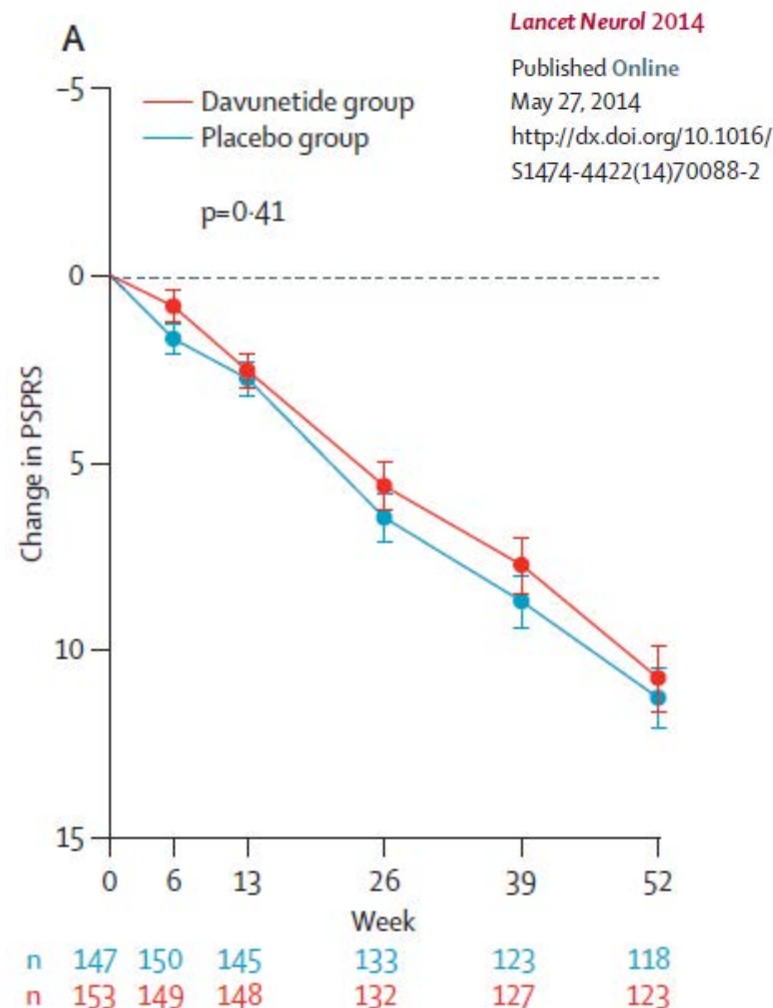
\* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$

- Preclinical data demonstrated that MK-8719 dose dependently elevated brain O-GlcNAc and reduced pathological tau in the brains of Tg4510 mice

# Contrasting Clinical Approaches for “Anti-Tau” POC

- **Merck’s First-in-Class BACE inhibitor (MK-8931) – Initiated 2012**
- ~2,000 patients with Mild to Moderate Alzheimer’s Disease
  - Primary Endpoint: Change from Baseline in AD Cognitive and Functional measures
  - 78 weeks of treatment with estimated study completion date in 2017
- ~1,500 patients with Prodromal Alzheimer’s Disease
  - Collaborations with GE Healthcare (PET-flutemetamol) and Luminex (CSF tau/A $\beta$ ) collaborations for patient selection
  - Primary Endpoint: CDR-Sum of boxes
  - 104 weeks of treatment with estimated study completion in 2018

## Clinical POC Trial in Progressive Supranuclear Palsy (PSP)





# Challenges in Neuroscience Discovery and Development

- ✓ Historically how successful have we been in Neuroscience Therapeutics?
- ✓ What has led to / defined past success?
- ✓ What is different now?
- ✓ What does future success look like?
- ✓ What we now need to do?
- **Recent success example: Belsomra (Suvorexant) “*Trifecta* of Target Validation”**

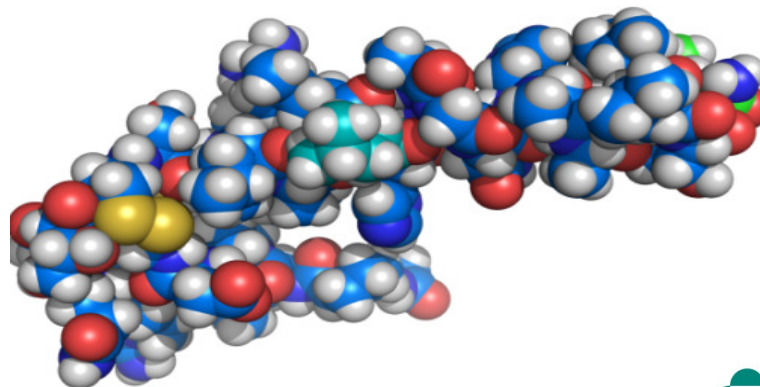
Introducing .

# A DIFFERENT APPROACH TO TREATING INSOMNIA

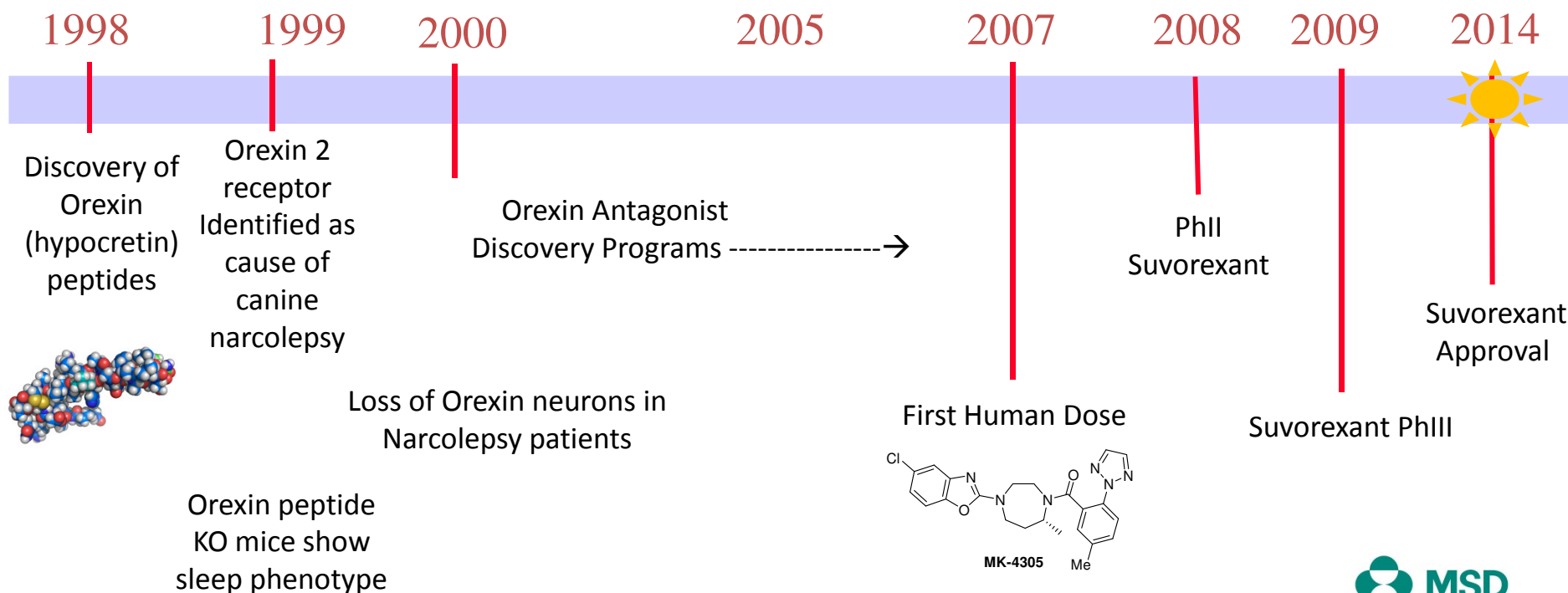
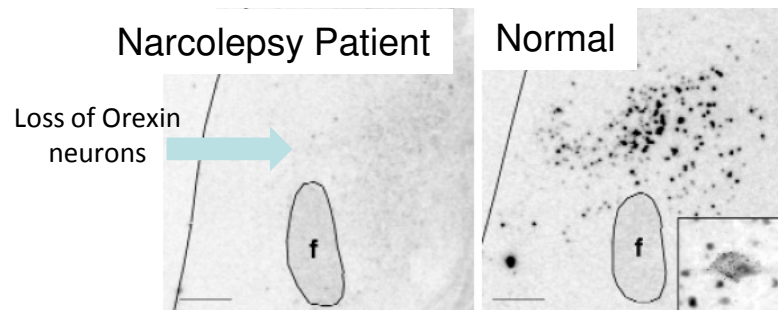
FDA  
APPROVED\*



Belsomra.<sup>®</sup>  
(suvorexant)  
5, 10, 15, 20 mg tablets



# Belsomra: genetics, pathophysiology and pharmacology





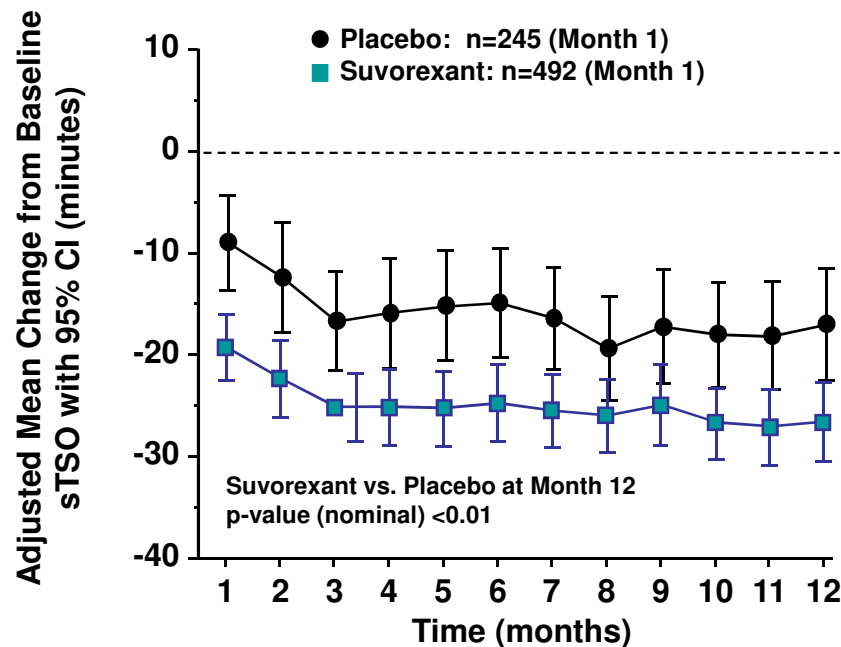
# Safety and efficacy of suvorexant during 1-year treatment of insomnia with subsequent abrupt treatment discontinuation: a phase 3 randomised, double-blind, placebo-controlled trial

*Lancet Neurol* 2014; 13: 461–71

David Michelson, Ellen Snyder, Erin Paradis, Mary Chengan-Liu, Duane B Snavely, Jill Hutzelmann, James K Walsh, Andrew D Krystal, Ruth M Benca, Martin Cohn, Christopher Lines, Thomas Roth, W Joseph Herring

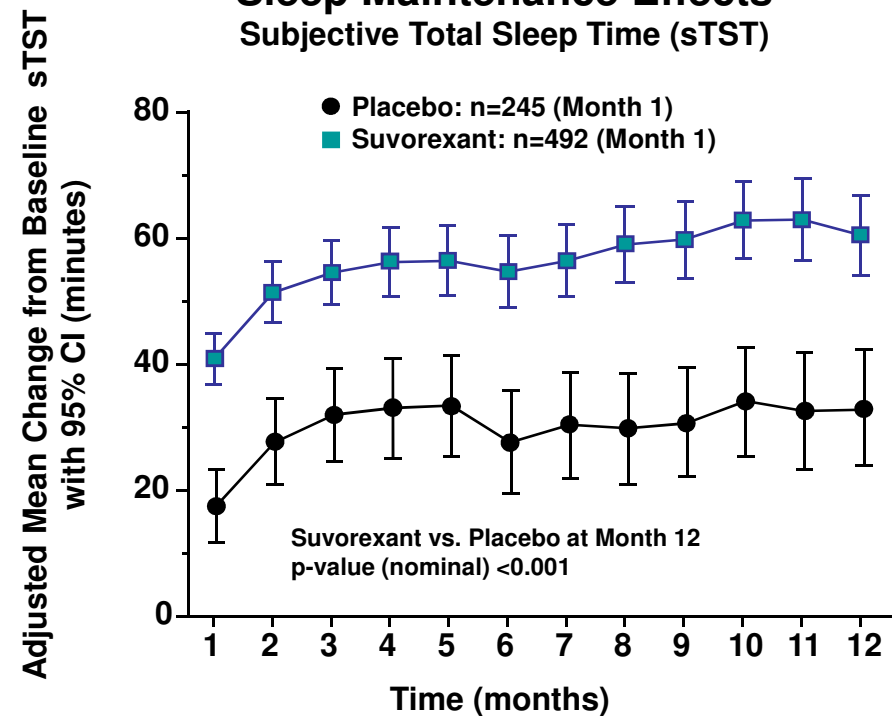
## Sleep Onset Effects

Subjective Time To Sleep Onset (sTSO)



## Sleep Maintenance Effects

Subjective Total Sleep Time (sTST)



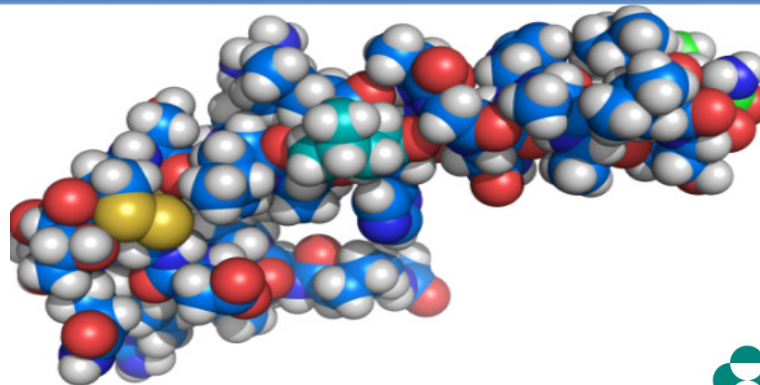
Introducing

# A DIFFERENT APPROACH TO TREATING INSOMNIA

FDA  
APPROVED\*

**Sleep architecture** (Gotter et al., 2014 BMC Neurosci; Winrow et al. 2012 Neuropharm.)  
**qEEG by sleep stage analysis** (Fox et al., 2013 Neuropsychopharm.; Ma et al., 2014 Sleep)  
**Locomotor performance** (Ramirez et al., 2013 Front Neurosci.)  
**Alcohol interaction** (Ramirez et al., 2013 Front Neurosci.)  
**Effects on cognition** (Uslaner et al., 2013 Science Transl. Med; Winrow & Renger 2014 BJP)  
**Salience gating and arousability** (Tannenbaum et al., 2014 Front Behav Neurosci)

  
**Belsomra**<sup>®</sup>  
(suvorexant)  
5, 10, 15, 20 mg tablets



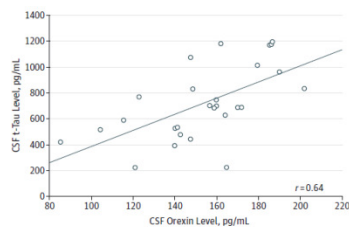
 **MSD**  
*Be well*

# Using Human Biology to Shape Therapeutic Approaches: Orexin Future Areas



## Target Orexin Hyper-activity

**Orexinergic System Dysregulation,  
Sleep Impairment, and Cognitive Decline  
in Alzheimer Disease**



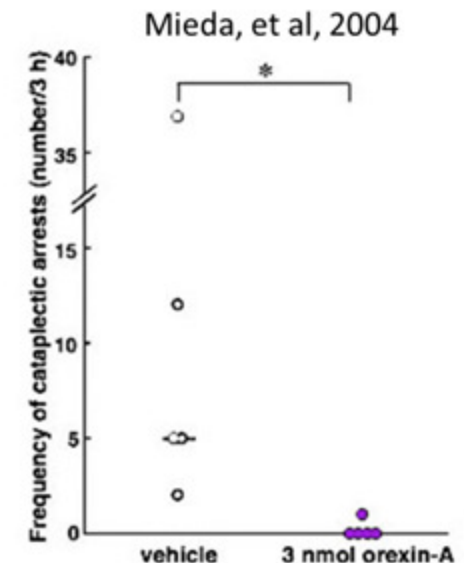
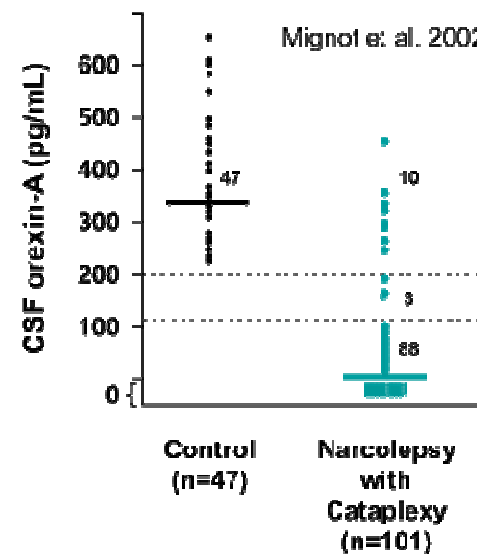
“The orexinergic system seems to be dysregulated in AD, and its output and function appear to be overexpressed along the progression of the neurodegenerative process.”

“..we hypothesize that, .....orexin receptor antagonists will be used as potential drugs targeting ....the management of sleep disturbances in AD patients

Liguori et al., 2015 *JAMA Neurol.* 2014

## Target Orexin Hypo-Activity

**Agonist Replacement Therapy  
Narcolepsy**





# Conclusions: Opportunities in Neuroscience Therapeutics

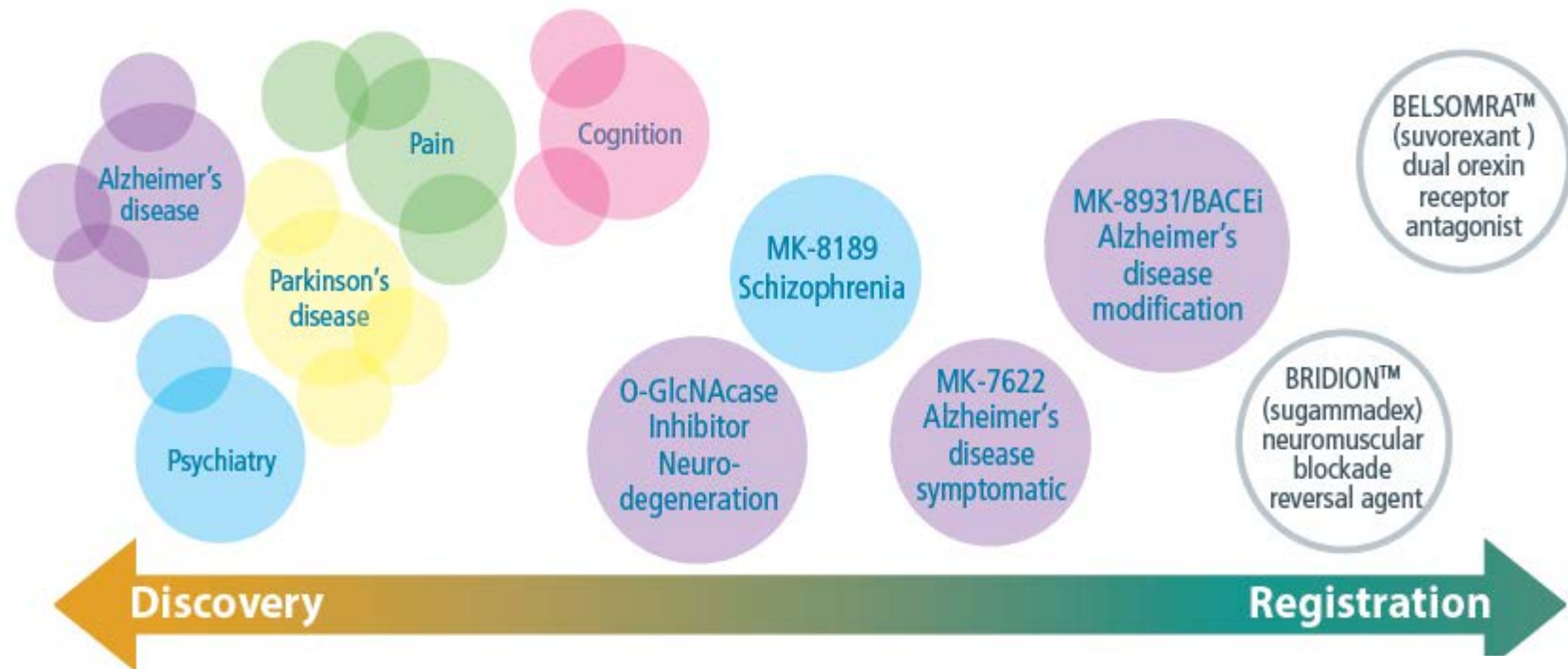
- **YES....** Neuroscience disorders are complex and there is much we do not yet know....
- **BUT.....** The need for therapies to treat nervous system disorders are now even greater and ....
- **TODAY.....** Understanding of human biology / pathophysiology of the nervous system is advancing rapidly and ....
- **LOOKING AHEAD....** promising new approaches, drug targets and biomarkers for disease will continue to advance so that ....
- **NEW THERAPIES WILL COME....** from new approaches linked to our increasing understanding of human disease biology



# Merck Neuroscience Pipeline Approach to Increase POS and Patient Value

- High quality molecules and positioning to test important disease hypotheses
- Development approaches that provide the greatest opportunities of demonstrating meaningful clinical advantages

## Industry Leading First-in-Class Development Candidates and Products





# *Thank You!*

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