



Promises & Practicalities of Neurophysiology in Clinical Trials in Rare Diseases

Chairs:

Kemi Olugemo, MD, FAAN

Uma Vaidyanathan, PhD

Speakers:

Allyson: Insights from patient journey in drug development, mouse-human models of disease, and consortium for biomarkers

fast



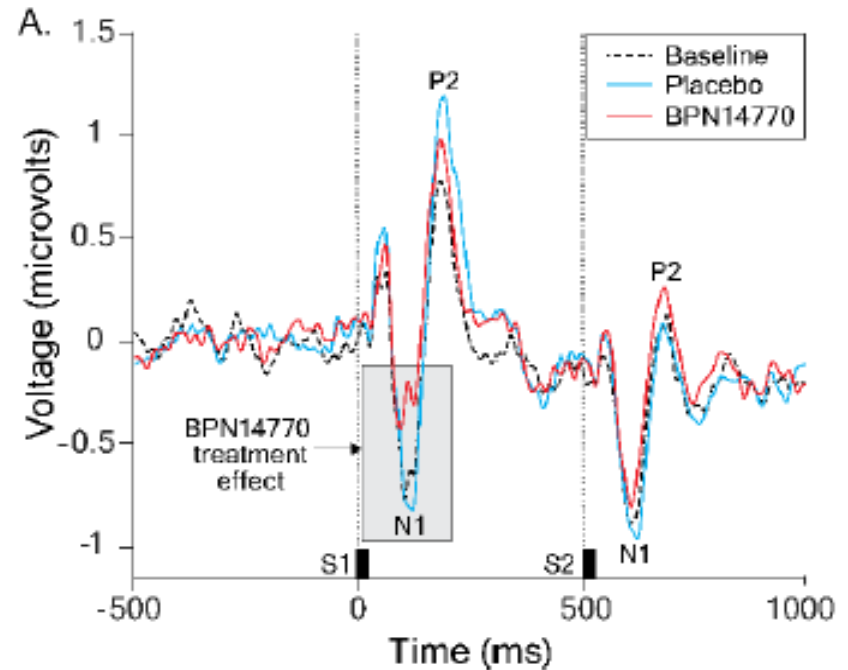
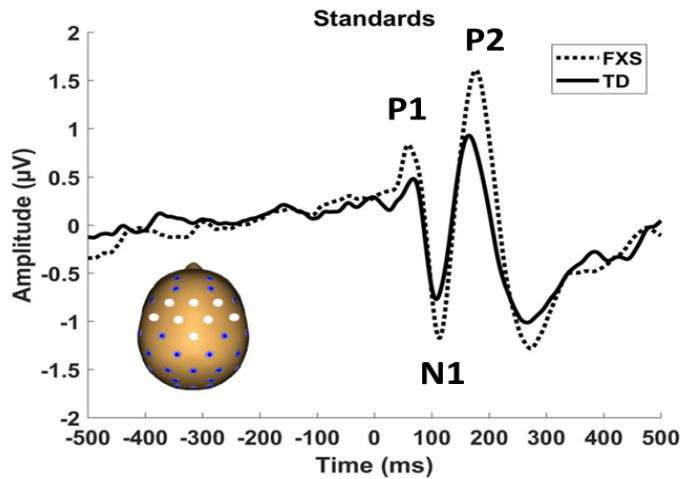
Focus Domain	Measures to consider	Measures specifically assessed for AS
Communication	<ul style="list-style-type: none"> • ORCA • BSID-3, BSID-4 • VABS-2, VABS-3 • Communication Matrix • ASVA • CGI-AS 	<ul style="list-style-type: none"> • ORCA • BSID-3, BSID-4 • VABS-2, VABS-3 • Communication Matrix • CGI-AS
Fine Motor	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • ASVA • CGI-AS 	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • CGI-AS
Gross Motor	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • Actimyo • GMFM • ASVA • CGI-AS 	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • Actimyo • CGI-AS
Global	<ul style="list-style-type: none"> • CGI-S-AS, CGI-I-AS • Caregiver CGI-AS 	<ul style="list-style-type: none"> • CGI-S-AS, CGI-I-AS
ADL	<ul style="list-style-type: none"> • VABS-2, VABS-3 • ASVA 	<ul style="list-style-type: none"> • VABS-2, VABS-3
QOL	<ul style="list-style-type: none"> • QOL Inventory • Caregiver Burden Inventory • Parent Adjustment Questionnaire • EQ-5D-Y • Quality of Life Disability Measure 	
Cognition	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • EEG 	<ul style="list-style-type: none"> • BSID-3, BSID-4 • VABS-2, VABS-3 • EEG
Sleep	<ul style="list-style-type: none"> • Sleep Diary • Wearables • EEG • Sleep Mats • CGI-AS 	<ul style="list-style-type: none"> • EEG • Sleep Diary • CGI-AS
Seizure	<ul style="list-style-type: none"> • Seizure Diary • EEG • CGI-AS 	<ul style="list-style-type: none"> • Seizure Diary • EEG • CGI-AS
Behavior	<ul style="list-style-type: none"> • VABS-2, VABS-3 • ABC-C • BIAPAS 	<ul style="list-style-type: none"> • ABC-C
Biomarkers	<ul style="list-style-type: none"> • EEG • AERP • APP (plasma) • CSF: UBE3A others 	<ul style="list-style-type: none"> • EEG

a-bom



ANGELMAN SYNDROME
BIOMARKER & OUTCOME
CONSORTIUM

Liz: EEG biomarkers to bridge mouse-human models of neurodevelopmental disorders



Justin: Considerations in assessing sleep via PSG, EEG

Consideration 1 – Signal Averaging

- In signal processing, it is mathematically guaranteed that averaging two signals in the time domain that have uncorrelated sources of noise will lead to a better underlying estimate
- In terms of sleep we can think about the human and device as two ‘sensors’ of sleep
- By combining them we can have a better estimate of the underlying ‘true’ value

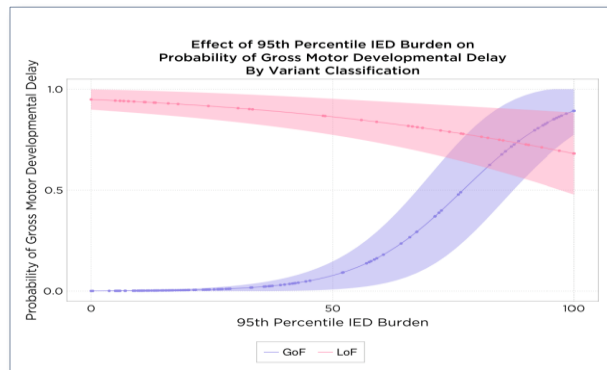
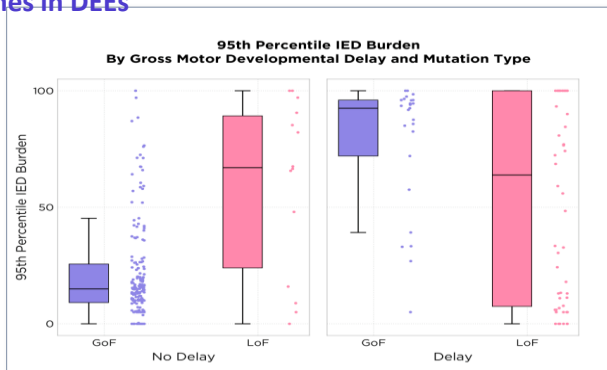
$$\sigma_{n,avg}^2 = \frac{1}{M^2} \sum_{j=1}^M \sum_{p=1}^M E(n_j(p)n_j(p)) = \frac{1}{M^2} M\sigma_n^2 = \frac{\sigma_n^2}{M}$$



Conklin et al 2024

Dave: Computational approaches to EEG & PSG biomarkers

Machine learning-based analysis of EEG data can be used to identify novel biomarkers predicting developmental outcomes in DEEs



Methods

- A machine learning model trained and evaluated on EEG segments labeled by 8 epileptologists was used to identify 1 second windows containing IEDs, and IED burden; or percent time containing IEDs, was computed using a 20 second rolling window.
- 197 recordings collected from 7 GoF subjects
- 70 recordings collected from 11 LoF subjects
- Subject age range: 1 day – 16 years

Conclusions

- Recurrent epileptiform activity appears to precede developmental delay in SCN2A subjects with GoF variants.
- These findings demonstrate that EEG contains critical biomarkers of DEE- especially for SCN2A GoF subjects, and IED burden could aid in patient selection when therapy carries significant risk.
- Treatments aimed at controlling epileptic activity may be particularly effective in improving developmental outcomes in subjects with GoF mutations.

Why neurophysiology?

- Time scale of phenomena down to ms
- Cost-effective (e.g., vs MRI, DTI, etc.)
- Scalable (wearables, at home EEG)
- Can be real-time
- Large and growing body of research

Next Steps/Further Considerations:

(1) Plethora of endpoints: Need larger datasets and standardization. Note Society for Psychophysiological Research Guidelines

Picton, T. w., Bentin, S., Berg, P., Donchin, E., Hillyard, S. a., Johnson, R., ... Taylor, M. j. (2000). **Guidelines for using human event-related potentials to study cognition: Recording standards and publication criteria.** *Psychophysiology*, 37(2), 127-152. <https://doi.org/10.1111/1469-8986.3720127>

(2) Reliability of signal: how to define? What is alignment?

(3) FDA's 2019 Enrichment for Clinical Trials strategies:

- (a) Enrichment via decreasing variability
- (b) Prognostic enrichment
- (c) Predictive enrichment

PANEL DISCUSSION