The search for novel treatment targets for Obsessive Compulsive Disorder

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Abnormal repetitive thoughts and behaviors are central to neuropsychiatric disorders including OCD



Simple, "Automatic"

Complex, "Volitional"

What OCD isn't



3:10 PM - 25 Feb 2018

What OCD is

DSM-V criteria

- A. Either obsessions
 - A. Recurrent, persistent intrusive thoughts, impulses, or images
 - B. Not simply excessive worries about real-life problems
 - C. Attempts at neutralization via thought or action
 - D. Recognition of obsessions as a product of own mind
- B. or compulsions
 - A. Repetitive behaviors or mental acts
 - B. Behaviors/ acts reduce distress or prevent dread

What OCD is



LILYWILLIAMSART.COM

What OCD is



OCD is common and severe

Prevalence

- 1-3% lifetime prevalence
- OCD does not discriminate across cultures and countries
- 2 onset peaks

Severity

- Patients can spend many hours/ day consumed by symptoms
- Can interfere with education, work, and independent living
- Can be difficult to treat



OCD symptoms are heterogeneous







In addition, other proposed subdivisions

symmetry

-obsessive slowness, tic-related OCD, pure obsessional, etc

• Need neurobiological studies to identify shared vs distinct elements

Pharmacotherapy for OCD

The serotonin system



- SRIs only proven monotherapy
- Full remission
 10-15%
- Partial responders
 20- 40% symptom reduction
- Only 20% remission at >10 year follow-up (Bloch et al, 2003)
- Multiple augmentation strategies
 - glutamatergic agents (Rodriguez et al, 201, Bloch et al, 2012, Pittenger, 2015)

- ketamine, riluzole, N-Ac

- dopaminergic blockade
 - "antipsychotics" (Simpson et al, 2013)

Exposure therapy with response prevention

0% SUDS

100% SUDS

- Can be highly effective (Foa et al, 2005)
- But can be difficult for patients to complete
- Hard to find skilled treatment providers

~30% SUDS



Exposure Hierarchy

Rate your anxiety from 0-10 and rank your symptoms from easiest to most challenging to face or change.

Subjective Unites of Distress (SUDS) Symptom Week 0 2 4 6 8 10 12 10 10 9 8 8 1. Inhaling someone else's breath who I don't like 2. Eating off of plates, table, or silverware cleaned by unknown products 3. Conversation with someone I don't like without washing my face hands 9 8 8 5 4. Shower for less than 30 minutes in the evening. 4 2 5. Not washing my face hands after a conversation with someone I like. 6 5 4 3 2 6. Cleaning with non-organic cleaning products. -4-1 7. Not washing my hands and feet after cleaning the shower 5 5 4 2 2 1 8. Not rinsing off the shower before getting into it 5 4 2 0 0 9. Eating at a new restaurant 5 5 4 3 2 2 10. Eating food in someone else's home 11. Shower for less than 30 minutes in the morning 0 12. Not wiping my workbag, laptop and phone at the end of the day



Is there an App for that?

n App For That? Iobile Apps for Obessive-Compulsive Disorder							
	GGOC	•	DOD				
	GGOC: OCD Relief	nOCD	OCD Understood	iCounselor: OCD			
Out of 5.00	4.28	3.21	1.43	1.43			
User Experience Out of 5.00	3.42	4.74	Not Available	Not Available			
Data Transparency	Questionable	Acceptable	Unacceptable	Unacceptable			
Platforms Available	Ś.	Ś	Ś	Ś			
Cost	Free	Free	Free	\$0.99			

To learn more about these scores, visit PsyberGuide.org





Neurosurgical treatments

Ablative neurosurgery

- Precise lesions of connections between cortex and striatum
- ~50-70% treatment response
- Non-reversible



Deep Brain Stimulation

- Can be obtained through Humantarian Device Exemption
- High frequency stimulation
- Targets:
 - VC/VS: ~50-60% efficacy (reviewed Greenberg et al, 2010; Alonso et al, 2015)
 - Limbic STN (Tyagi et al, 2019)



Repetitive transcranial magnetic stimulation

- Still investigational
- Non-invasive treatment
- Electromagnetic field changes electrical currents in underlying cortex
- Brain activity can be stimulated or inhibited depending on protocol used
- Investigational targets
 - Pre-supplementary motor area (pre-SMA) (Montavani et al, 2006)
 - mPFC and anterior cingulate (20Hz) (Carmi et al, 2019, *AJP*)
 - OFC + habit override: Dr. Rebecca Price, University of Pittsburgh



Translational strategies to develop new treatments



People with OCD have dysfunction in behavior transitions



Adapted from Pauls, (2014) Nat Rev Neuro



Translational strategies in OCD research

- Translating imaging findings from OCD patients into mice
- Identifying OCD-related molecular changes using human post-mortem brain
- Probing mechanisms underlying OCD-relevant behaviors in relevant transgenic model systems



Evidence for cortical-basal ganglia circuit abnormalities in OCD



Can't test cause and effect in humans

Using optogenetics in mice to simulate hyperactivity in OFC and striatum in OCD



Using optogenetics in mice to simulate hyperactivity in OFC and striatum in OCD



Using optogenetics in mice to simulate hyperactivity in OFC and striatum in OCD



Challenge: Assessing OCD-relevant behaviors in mice



Challenge: Assessing OCD-relevant behaviors in mice



Repeated cortico-striatal stimulation leads to abnormal behavior and pathologic plasticity



Repeated cortico-striatal stimulation leads to abnormal behavior and pathologic plasticity



Repeated cortico-striatal stimulation leads to abnormal behavior and pathologic plasticity



Can circuit hubs be leveraged for non-invasive treatment?



Using new tools to examine brain activity while mice are performing repetitive behaviors



In vivo microscopy allows examination of local network activity in freely moving mice



Pengcheng Zhou Rob Kass., Ph.D.

In vivo microscopy allows tracking of brain networks over time



Outline: Translational strategies in OCD research

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Genetics of OCD

- Twin and family studies have revealed a significant genetic component to the etiology of OCD
- Heritability of OCD ~ 40-60%
 - Higher in children than adults



- Genome-wide association studies are used to identify common genetic risk factors
 - IOCDF Genetics Collaborative (Mol Psych, 2018)
 - 2688 cases and 7037 controls
 - Zero statistically significant risk genes
 - Schizophrenia (Nature 2014)
 - 36,989 cases and 113,075 controls
 - 108 significant risk genes
- Ongoing studies are attempting to find rare OCD genes

Parallel approach: post-mortem OCD studies



Identification of pathological findings

Post-synaptic density may be a vulnerable molecular compartment in OCD



Sean Piantadosi



Brittany Chamberlain



Identification of donated brains from people with OCD and matched unaffected comparison subjects

	COMPARISON	OCD	
	SUBJECTS	SUBJECTS	P-VALUE
Number of subjects (<i>n</i>)	8	8	
Mean age (±SD)	45.1 (14.6)	46.6 (14.5)	0.176
Range	25-65	20-69	
Sex (F/M)	4/4	4/4	
PMI (±SD)	16.0 (4.8)	18.0 (7.3)	0.31
Brain pH (±SD)	6.6 (0.2)	6.7 (0.2)	0.236
RNA ratio	1.6 (0.25)	1.6 (0.22)	0.783
RNA integrity number	7.7 (0.65)	7.8 (0.44)	0.630
Suicide, <i>n</i> (%)	0 (0%)	3 (38%)	
Antidepressants ATOD, n (%)	0 (0%)	5 (63%)	

8 people with OCD; 8 comparison subjects

Pair	OCPD	MDD	BPD	GAD	PD	PTSD
1	Yes	Yes	-	-	-	-
2	Yes	-	-	-	-	-
3	-	-	-	-	-	-
4	-	-	-	-	Yes	Yes
5	-	-	Yes	-	-	-
6	Yes	-	-	-	Yes	Yes
7	-	Yes	-	-	-	-
8	-	Yes	-	Yes	-	-

Identifying molecular changes in OCD

8 people with OCD; 8 comparison subjects

Brain regions

- medial OFC
- lateral OFC
- Caudate
- Nucleus accumbens





Step 2: Extract RNA from sample





Step 3:

Downregulation of transcripts that make up the structure of excitatory synapses



Downregulation of transcripts encoding excitatory synapse transporters



Little change in inhibitory synapse transcripts



Most robust decrease in excitatory gene expression in OFC, not striatum



OCD post-mortem studies suggest altered regulation of excitatory synapse genes in OFC

- OFC is possible 'molecular hub'
- May also suggest upstream thalamic pathology CONTROL







OCD

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Investigating striatal mechanisms underlying compulsive behavior using *Sapap3*-knockout mice



Welch et al. 2007, Burguiere et al., 2013

Striatum receives strong projections from OFC and M2



Strengthened M2 projections might be causing striatal hyperactivity in knowing



Corbit et al., *J. Neuroscience*, 2019

Investigating heterogeneity of compulsive behavior using Sapap3-knockout mice

Reversal learning

Learning the rule



Early reversal 1 (perseverative)







Lizzie Manning

Reversal learning is impaired in SAPAP3 KOs



~40% of SAPAP3-KOs fail reversal

Manning et al., 2018, *Neuropsychopharmacology*

Reversal is not predicted by grooming severity or task acquisition



- Striking but variable deficit in reversal learning
- Underlying circuit mechanisms are unclear

Manning et al., 2018, Neuropsychopharmacology

Longitudinal imaging allows tracking of neurons during different OCD-relevant behaviors





Translational strategies to develop new treatments



Overall goal: develop improved, neuroscience-based treatments for OCD



The benefits of including people with lived experience in research



THE MAN WHO COULDN'TSTOP THE MAN WHO COULDN'I STOP THE MAN WHO COULDN'TSTOP THE MAN WHO COULDN'T STOP THE MAN WHO COULDN'TSTOP THE MAN WHO COULDN'T STOP THE MAN WHO CONLON'T STOP THE MAN WHO CONLOW'T STOP OCD, AND THE TRUE STORY OF A LIFE LOST IN THOUGHT DAVID ADAM

or water the sea

Consider participating in studies



https://pittplusme.org/studyarms/publicdetails? Guid=7d12d093-8987-43ff-acb5-48b34f9f82c3





https://iocdf.org/research/research-participants-sought/

Please consider brain donation!!!



www.braindonorproject.org

Ahmari lab



THE

M^cKNIGHT

FOUNDATION

NIMH BRAINS

AWARD

- Lizzie Manning, Ph.D
- Jesse Wood, Ph.D.
- James Hyde, Ph.D.
- Jamie Pierson, Ph.D.
- Britny Hildebrandt, Ph.D.
- Victoria Corbit
- Sean Piantadosi
- Jared Kopelman
- Zoe LaPalombara
- Jay Wang
- Ruth Snyder
- Brittany Chamberlain

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mental health

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ONE MIND

RISING STAR



