

Challenges in Neuromodulation Therapy

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Neuromodulation offers multiple indication therapy

FDA APPROVED

Deep Brain Stim:

Parkinson's Disease, Dystonia, Essential Tremor, Obsessive Compulsive Disorder

Vagus Nerve Stimulation:

Depression, Epilepsy

Spinal Cord:

Pain

Sacral Nerve Stim:

Urinary Incontinence, Fecal Incontinence

Percutaneous Tibial Nerve Stim:

Urinary Incontinence

EMERGING

Deep Brain Stim: Obesity, Stroke Recovery, Depression

Cortical Stim: Epilepsy

Peripheral Nerve Stim: Migraines, Extremity Pain

Carotid Artery, Sinus Stim: Hypertension

Hypoglossal & Phrenic Nerve Stim: Sleep Apnea

Spinal Cord Stim: Angina

Gastric Stim: Obesity

Sacral & Pudendal Nerve Stim: Interstitial Cystitis, Sexual Function, Pelvic Pain

FUTURE

Deep Brain Stim:

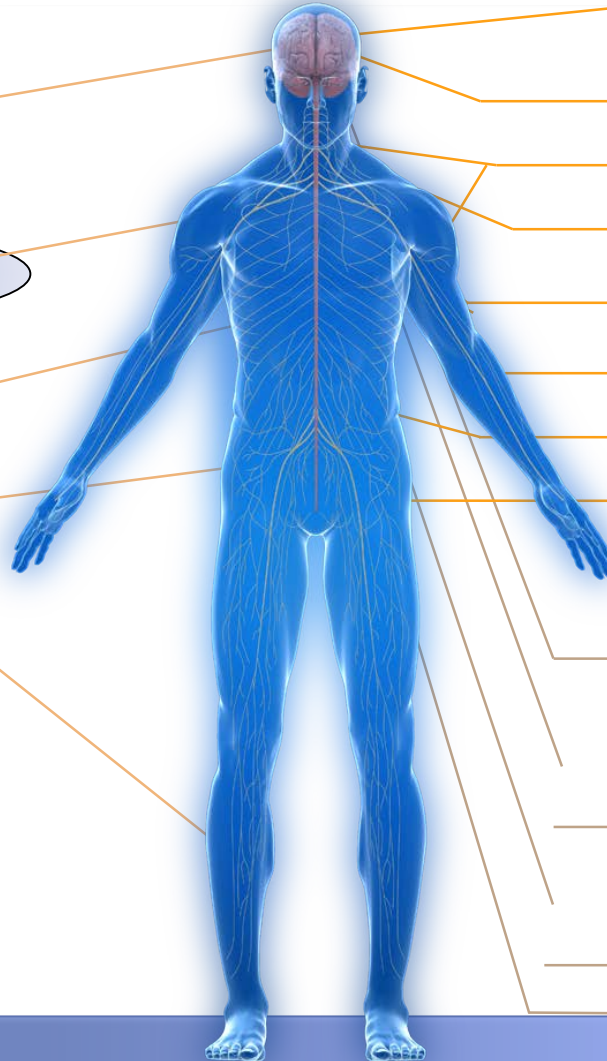
Alzheimer's, Anxiety, Bulimia, Tinnitus, Traumatic Brain Injury, Tourette's, Sleep Disorders, Autism, Bipolar

Vagus Nerve Stim:

Alzheimer's, Anxiety, Obesity, Bulimia, Tinnitus, Obsessive Compulsive Disorder, Heart Failure

Spinal Cord Stim: Asthma

Gastric Stim: Bulimia, Interstitial Cystitis



Epilepsy by the numbers

Status of Neuromodulation Therapy(ies)

- FDA: Approved
- CMS: Favorable Coverage Recommendation

Epilepsy

4th most common neurological disease after migraine, stroke and Alzheimer's disease

9
MILLION

People living with epilepsy in United States, Europe, and Japan

<3% chance of seizure freedom after 2 AED failures

400,000

People indicated for VNS Therapy[®] in US

Direct and indirect costs of

\$13.5B

per year in US alone

25-40X

Mortality rate vs. general population

Source: CDC, WHO, IOC report on Epilepsy

Depression by the numbers

Status of Neuromodulation Therapy(ies)

- FDA: Approved (VNS)
- CMS: Non-Favorable Coverage Recommendation

Depression

Major depressive disorder (MDD) is the second leading cause of disability worldwide*

**18
MILLION**

People affected at any one time in United States

**350
Million**

People worldwide affected by depressive illness

**4
Million**

approx. 25% of depressed individuals (U.S.) are treatment resistant

Direct and indirect costs of
> \$43B
related to lost productivity in the workplace per year

>39,000

Suicide deaths per year in the U.S.

Source: CDC, WHO, NAMI

*(Ferrari et al, 2013)

Heart Failure by the numbers

Status of Neuromodulation Therapy(ies)

- FDA: Human Clinical Trials (Pivotal & Pilots)
- CMS: NA

Heart Failure

is a serious and progressive condition; incidence increases dramatically with age

10-12 Million

people living with heart failure in the US and Europe

5-Year Mortality

for 50% of patients

700,000

newly diagnosed cases annually

Direct and indirect costs of

\$40B

per year in US alone

Most Common Reason

for hospitalization in Medicare patients

Industry Challenges in the Neuromodulation Field

Limitations in Funding Driven by Inconsistent Performance/Results:

- Recent history of study failures has limited investment and innovation
 - CVRx, NorthStar, Apnex, Transneuronix, Cyberonics (depression), Boston Scientific (heart failure), many others
 - What are key learning's to improve success, or to fail fast?
- Lengthy clinical studies and long regulatory processes
 - Can dampen enthusiasm for investment and innovation
- Reimbursement challenges
 - FDA approval does not guarantee national reimbursement coverage

Industry Challenges in the Neuromodulation Field

Limitations of Clinical Past/Current Clinical Studies:

- Implantable neuromodulation therapies are typically indicated for drug refractory, treatment-resistant patients
 - Difficult to treat patient population (different etiologies, phenotypes, patient's physiology and comorbidities, etc.)
- Difficult to do a blinded study, control group can perceive low levels of stimulation
- The clinical effect is not always obvious and treatment effect may take extended time (months)
- For many therapeutic approaches, no quantitative endpoints are known/available, only qualitative end points
- Animal models may not translate well to human

Industry Challenges in the Neuromodulation Field

Limitations in Known Technology, Science, & Physiology:

- Technical limitations such as imprecise targeting
 - Which cortical pathways & are they stimulation dependent?
 - How to best modulate neuronal activity (inhibit/excite)?
 - Methods to identify optimal stimulation parameters.
- Clinical therapeutic response may not be immediate or obvious
 - e.g., Depression (1 to 6 months), Parkinson's (immediate)
- Limited sensing capability
 - Biomarkers of response are not readily identifiable in today's approved treatments.
- Response Prediction: Identify patients that will respond to therapy prior to implantation.
- Incomplete knowledge of mechanisms of therapeutic action

Human Cervical Vagus Nerve

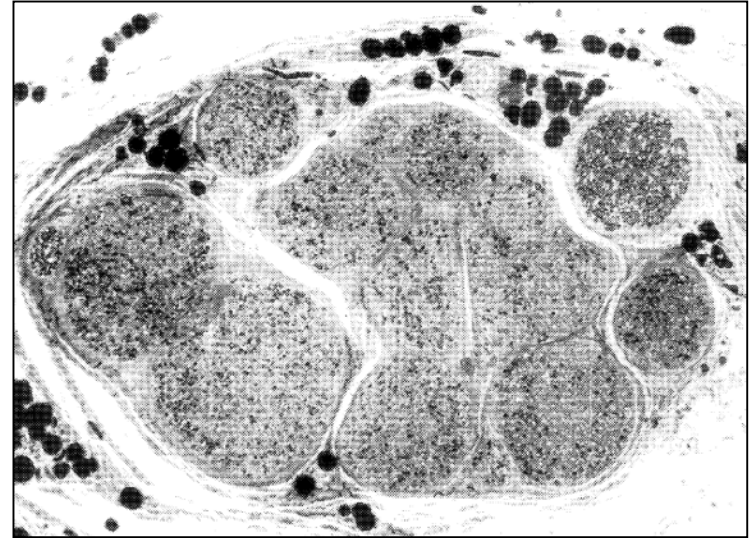
The human vagus nerve

- ~ 100,000 axons
- 80% afferent, 20 % efferent
- 80% are C-fibers, 20% are A, B fibers

- Which fibers are responsible for therapeutic effect?

- Where do these fibers project into the CNS and peripherally?

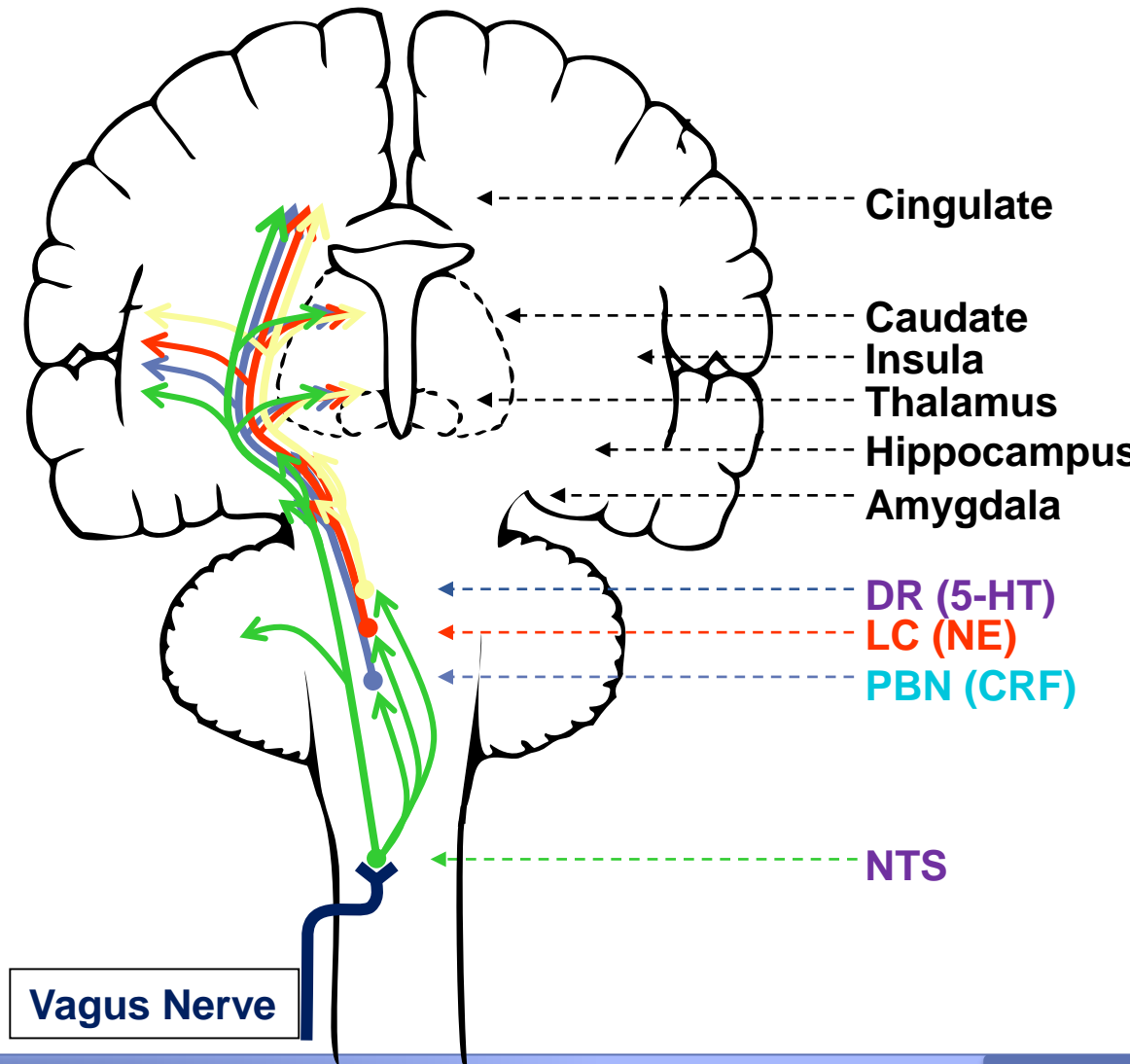
- What neuromodulatory systems are excited/inhibited?



Nemeroff CB. *Neuropsychopharmacology*. 2006;31):1345-55.

The Cranial Nerve Highway & Vagus Nerve Stimulation

- **Bilateral** projections on nucleus tractus solitarius (NTS)
- Locus coeruleus supplies norepinephrine
- Raphe magnus nuclei supply serotonin
- Parabrachial nucleus of pons has widespread cerebral projections

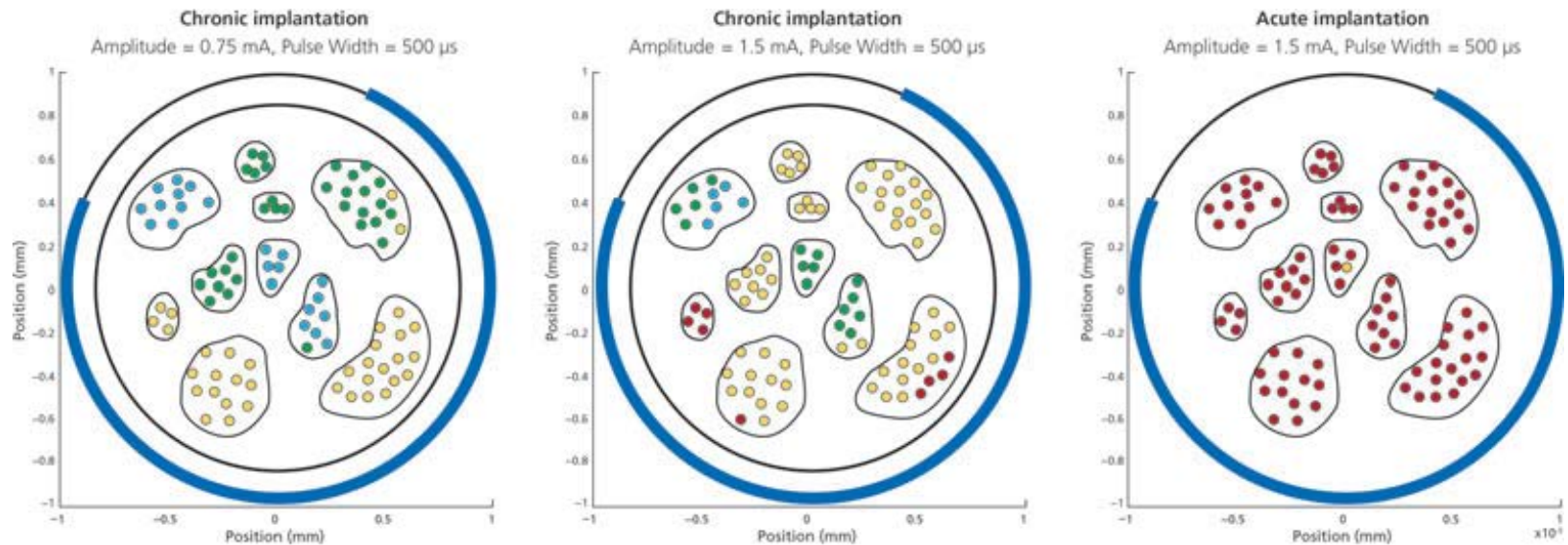


Henry TR. *Neurology*. 2002;59(suppl 4):S3-S14.

Nerve Fiber Stimulus Activation

Vagus nerve cross section, dispersed fiber (axon) types

- Electric fields modeled using finite element (ANSYS)
- Comparison of fiber activation in chronic vs. acute implant
- % fiber activation function of: charge/density, dist. from electrode, acute vs chronic condition
- Challenge: How can we best activate the right fiber groups but minimize adverse events?
 - Incorporate nerve action potential sensing?



Summary Challenges (& Opportunities)

for advancing the field of neuromodulation

Challenges: Understanding the “neural code”

- What are the mechanisms of action that lead to positive reproducible outcomes?
- How can stimulation parameters be optimized for specific patients?
- How can we make relevant biomarkers available in real-time?
 - Closed-Loop stimulation
- Can plasticity effects of neuromodulation be predicted?
 - Improved clinical trial Designs

Opportunities: Novel Technologies and Tools

- Advanced brain imaging technologies
- Optogenetics
- Big Data
- Nanotechnologies
- Signal processing methods, Adaptive algorithms

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Thank You

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