# Therapeutic effect of gevokizumab, an anti-IL1ß mAb, in a mouse model of anti-GBM glomerulonephritis

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#### **OBJECTIVES**

- Glomerulonephritis (GN) is one of the main causes of end-stage renal disease.
- Experimental GN induced by serum against glomerular basal membrane (GBM) is a well-recognized experimental model to induce rapidly progressive GN in rodents.
- It results in an immediate inflammatory response characterized by an early infiltration of the innate immune system into the kidney and the involvement of several cytokines.
- Among these, IL-1β plays an important role in the clinical development of renal injury.
- Gevokizumab is a recombinant humanized monoclonal antibody targeting human IL-1 $\beta$ , which was shown to prevent renal inflammation in this model in mice. (1)
- This study assesses whether gevokizumab can limit the progression of renal inflammation in more severe conditions i.e. when mice present with overt albuminuria.

## Anti-GBM+anti-KLH (IgG2 control) Anti-GBM+S78989 (Gevokizumab) Anti-GBM+prednisolone Results expressed as mean ± SEM \*p<0.05, \*\*p<0.01, \*\*\*p<0.005 NS: not significant S78989 (mg/kg) 20000 ₫ 25001 15000-15000-O 10000-**=** 1500 5000-S78989 (mg/kg) Glomerular and tubulointerstitial injuries Myeloid cell Infiltration (CD11b+) Anti-GBM+anti-KLH 10 mg/kg Sirius Red Masson trichrome Control Anti-GBM+ S78989 1 mg/kg Anti-GBM+prednisolone Collagen type I deposition Anti-GBM 10 mg/kg prednisolone

#### **METHODS**

- Induction of GN: C57BL/6J mice (8/group) pre-immunized with normal goat IgG in complete Freund's adjuvant 4 days before an intravenous administration of anti-GBM serum.
- Treatments: started 3 days after administration of anti-GBM serum when mice had significant albuminuria (ACR >2 mg/mmol), up to day 14. Mice received gevokizumab (S78989) i.p. (1 and 10 mg/Kg) or a control IgG2 (anti-KLH) every 3 days (4 injections) or oral prednisolone (1 mg/kg) daily as a positive control.
- **Kidney damage**: assessed at **day 14** by measuring albuminuria, proteinuria, serum and urinary NGAL and BUN. Inflammatory cytokines IL-1β, TNF-α, IL-6, CCL2 and CRP were measured in serum. Data were analyzed by an ANOVA followed by a post-hoc Dunett test.
- Glomerular and tubular injuries: evaluated on kidney sections after Masson Trichrome and Sirius Red stainings.
- Myeloid cell infiltration: verified by immunohistochemical staining with CD11b antibodies.
- Renal fibrosis: assessed by collagen type I Western blot.

### RESULTS

At day 14, mice treated with gevokizumab at 10 mg/kg showed:

- significantly lower ACR than mice treated with a control IgG2 (10.3±1.2 mg/mmol vs 18.9±3.0 mg/mmol, p<0.01).
- decreased proteinuria, BUN and urinary NGAL compared to control IgG2 group (non significant effect)
- significantly reduced serum NGAL (667±84 ng/ml vs 1131±126 ng/ml in control IgG2, p<0.01).
- significantly decreased serum levels of:

CRP (10.8  $\pm$  1.4 vs. 15.8  $\pm$  1.1 µg/ml in control IgG2 group, p<0.05),

CCL2 (8.6 $\pm$ 0.9 vs. 14.5 $\pm$ 1.7 ng/ml in control IgG2 group, p<0.01),

TNF $\alpha$  (1.4±0.2 vs. 2.4±0.3 ng/ml in control IgG2 group, p<0.05).

decreased IL-1b and IL-6 (non significant)

Histological analysis confirmed that gevokizumab at 10 mg/kg decreased glomerular and tubulointerstitial injuries, and attenuated the infiltration of CD11b+ cells and collagen type I deposition when compared to control IgG2.

#### CONCLUSIONS

Overall, results obtained showed that gevokizumab improved markers of renal damage and inflammation through the limitation of the inflammatory processes in a severe model of renal injury, validated with prednisolone (effective in all parameters).

This study confirmed that gevokizumab might have a therapeutic role in the limitation of renal injury and fibrosis, by decreasing the inflammation induced in a mouse model of anti-GBM disease even after the onset of renal inflammation. Gevokizumab might be useful as a potential therapy for GN and renal pathologies involving inflammation.

(1) T Maciel T, et al. Nephrology Dialysis Transplantation 29 (Supplement 3): iii25–iii26, 2014

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ePosters supported by F. Hoffmann- La Roche Ltd.





