

Role of vascular alterations in MASLD/MASH pathophysiology

Pre-clinical and human data on the effect of lanifibranor

Sven M.A. Francque, MD, PhD

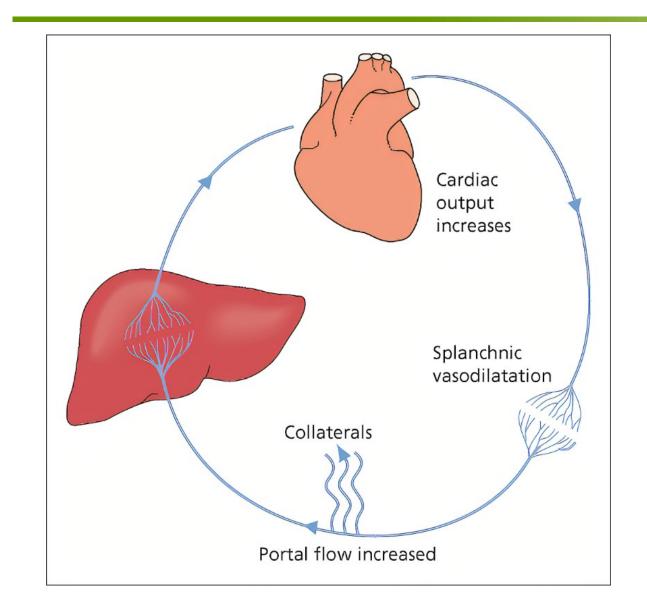
Chair, Department of Gastroenterology and Hepatology
Antwerp University Hospital, Belgium

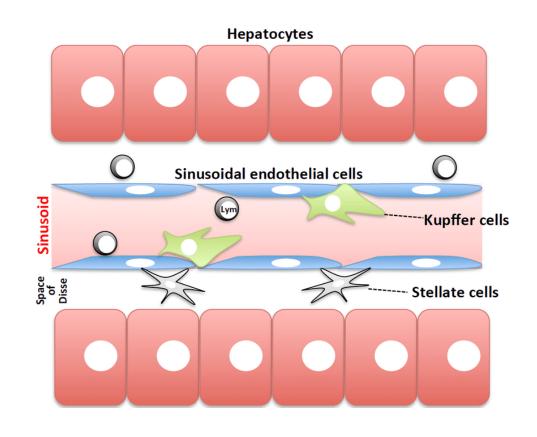
Senior Full Professor of Hepatology
Chair, Translational Sciences in Inflammation and Immunology (TWI²N)
University of Antwerp, Belgium

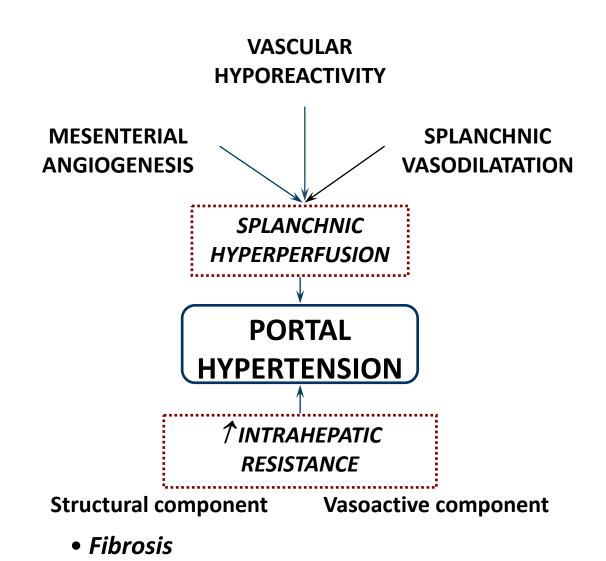




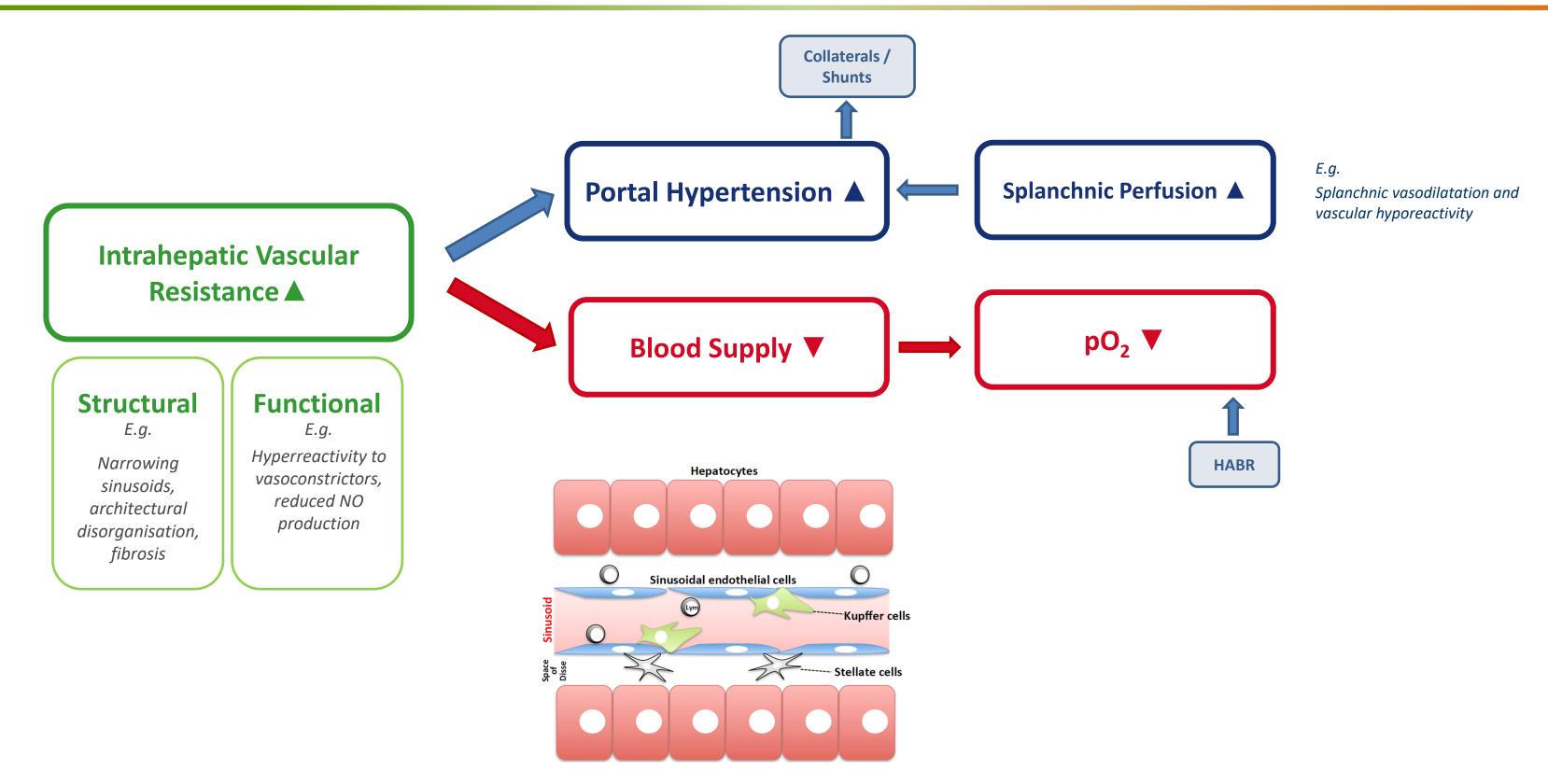
Portal Hypertension







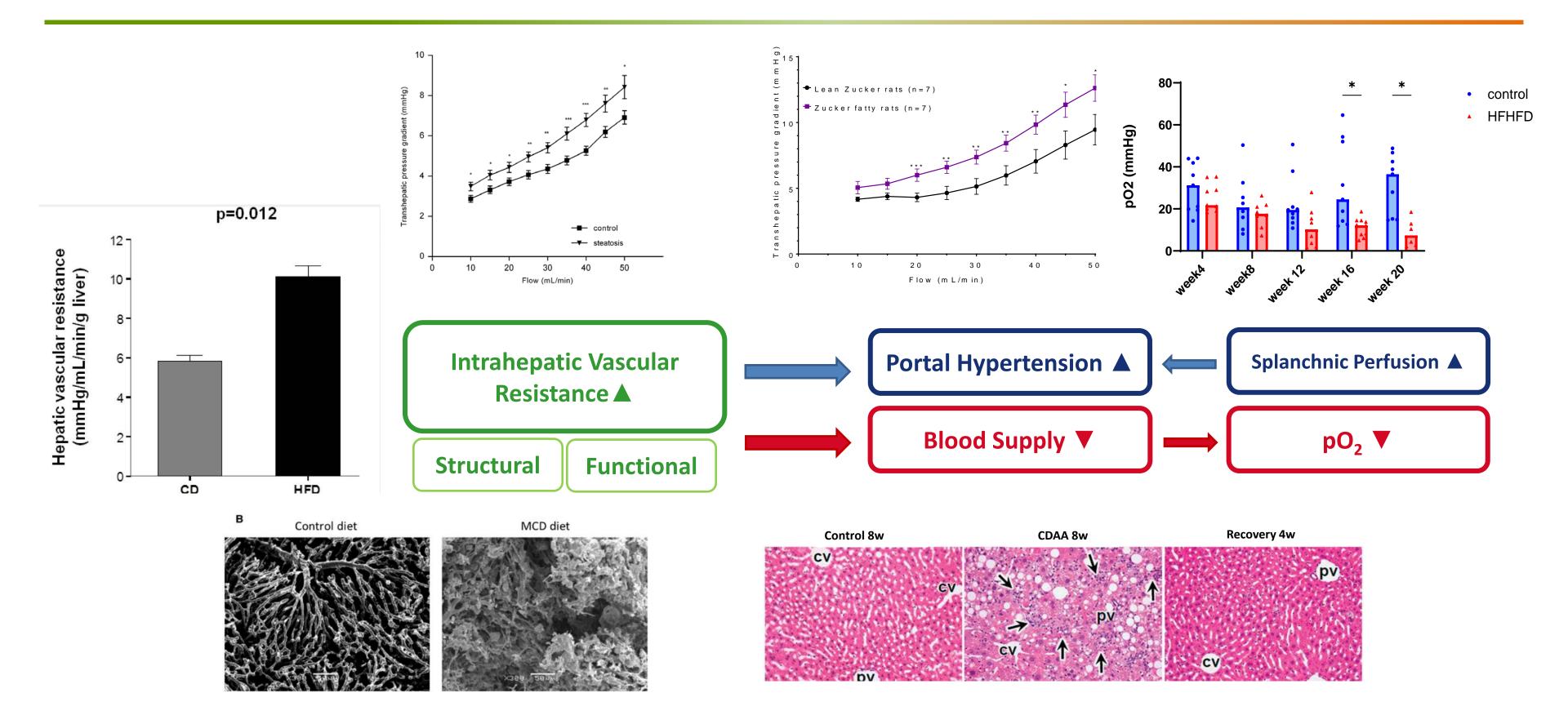
Portal Hypertension in MASLD/MASH



Francque et al. Lab Invest 2012 Van Der Graaff, Kwanten, Francque. Med Hypotheses 2019 *HABR: Hepatic arterial buffer response

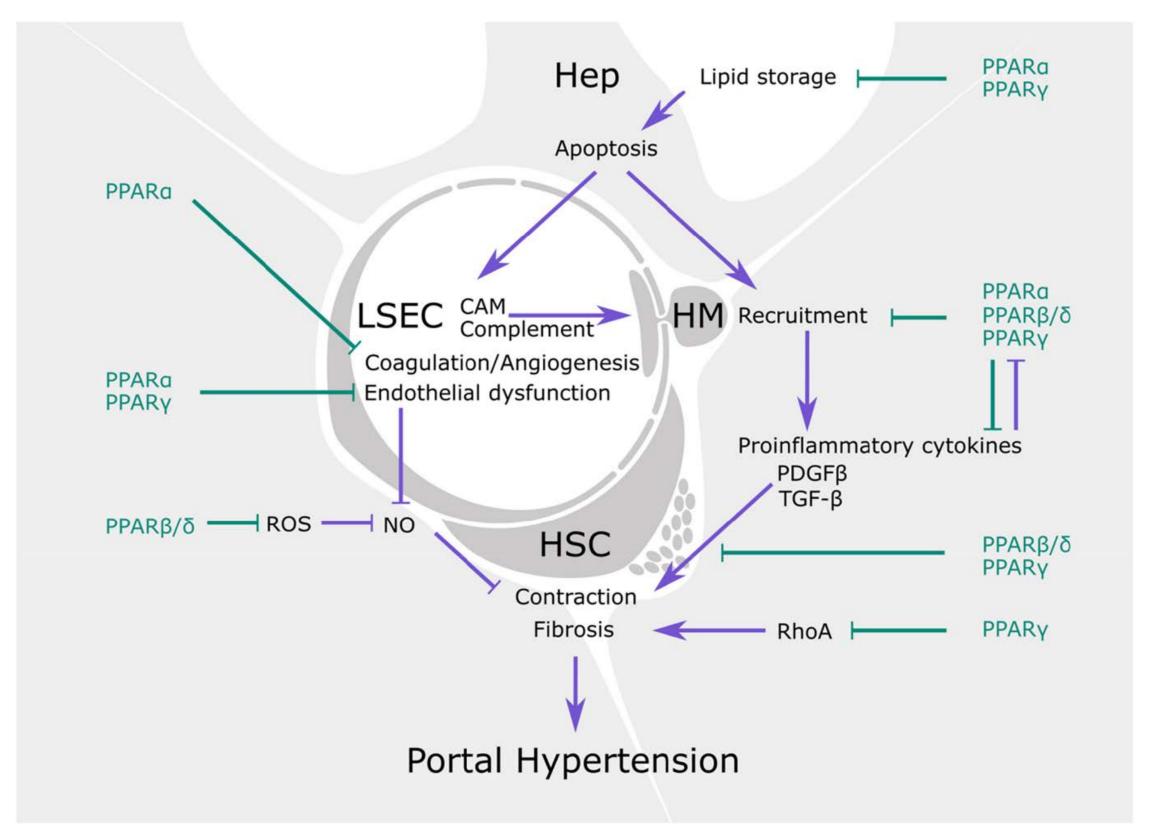


Portal Hypertension in MASLD/MASH

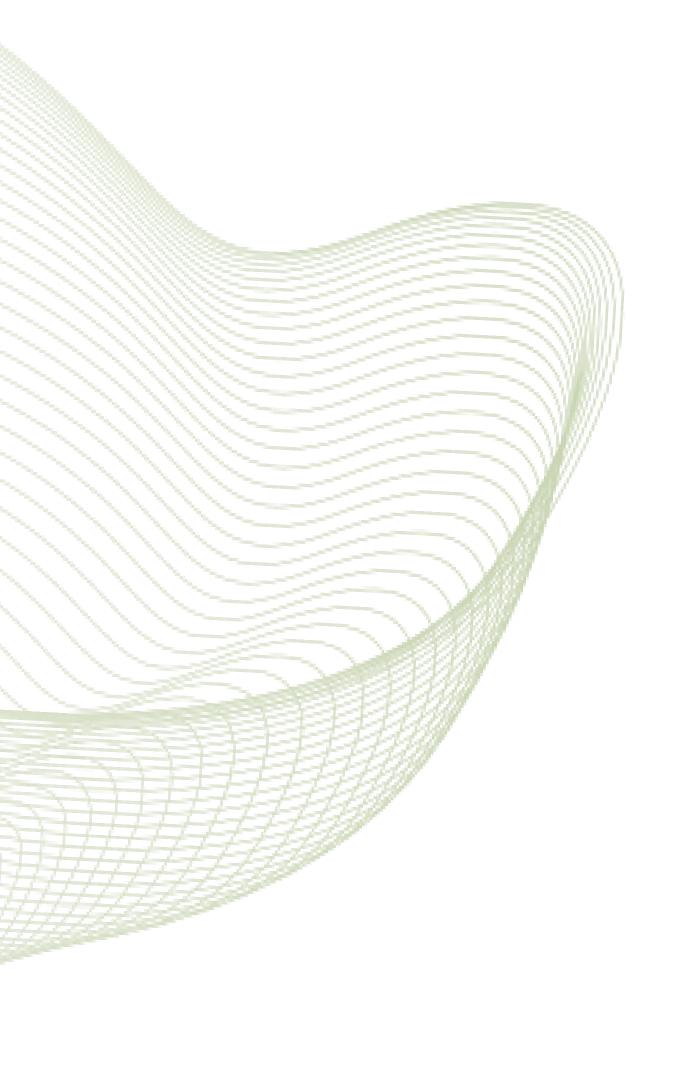


Gonzalez-Paredes et al. PLoS ONE 2016; Van Der Graaff... Francque. Lab Invest 2018; Van Der Graaff... Francque. J Hep Rep 2022; Lefere et al. Hepatology 2019; Miyao et al. Lab Invest 2015; Van Eyck... Francque... et al. Int J Obesity 2024; Van Der Graaff... Francque. Med Hypotheses 2019

Role of PPARs in liver vascular biology



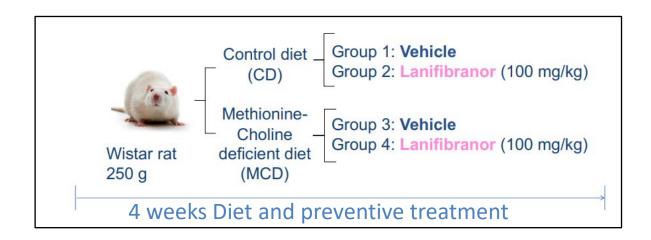
Guixé-Muntet...Francque et al. Aliment Pharmacol Ther 2022

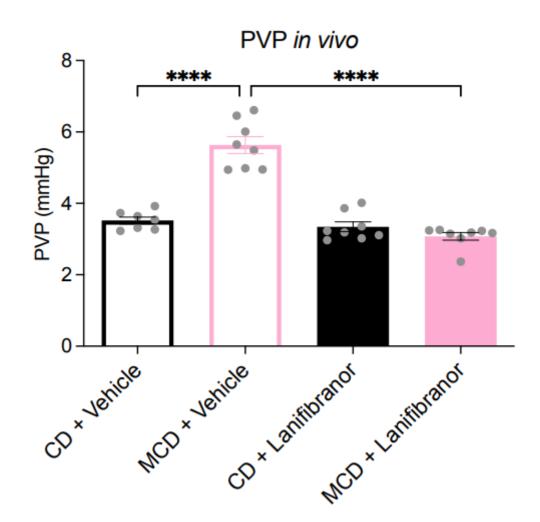


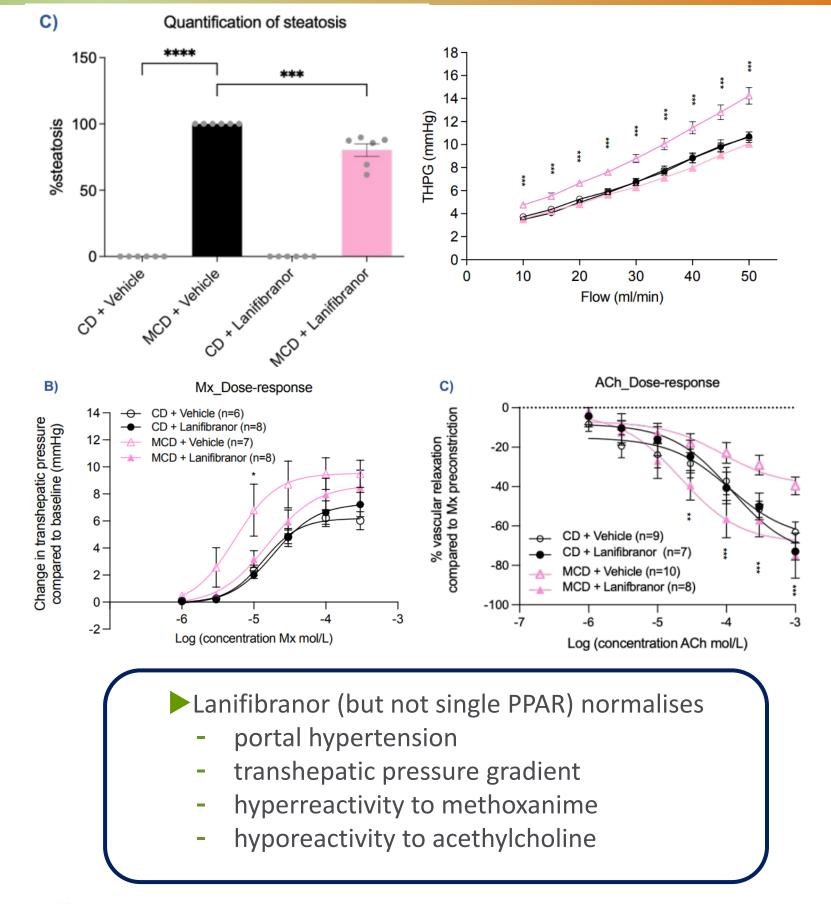
Pre-clinical data



Portal hypertension in a model of MASLD



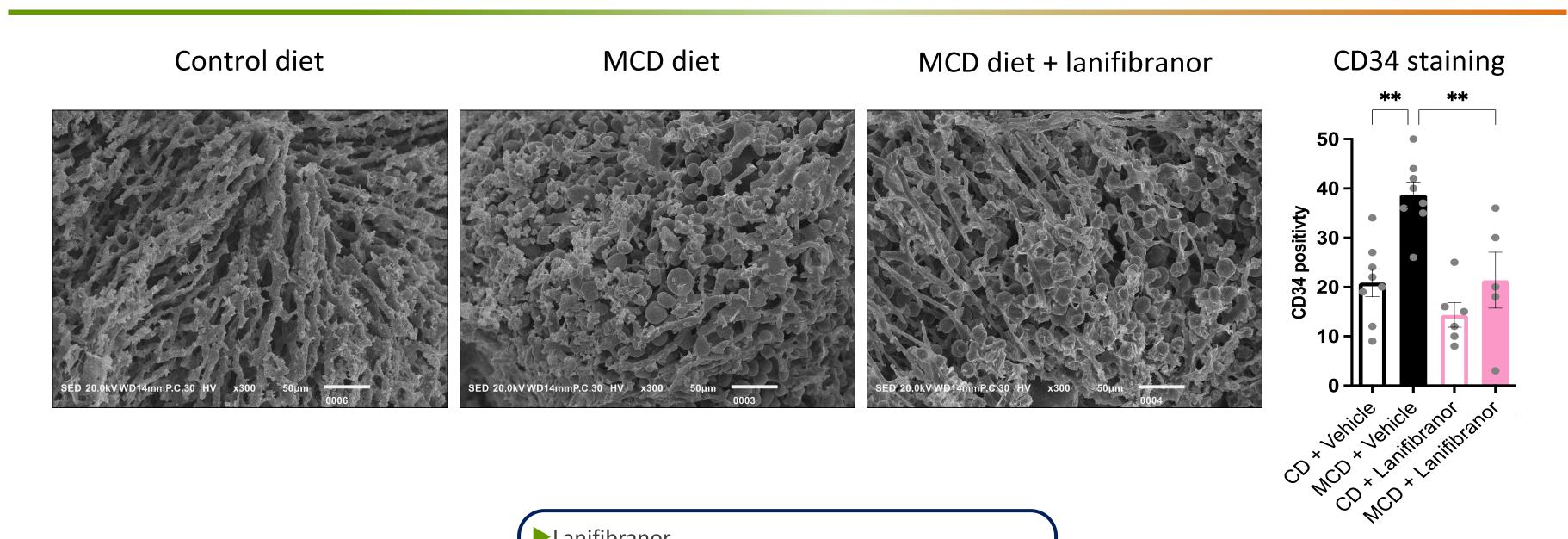




Chotkoe ...Francque. EASL 2023

LEGEND presentation | 2024

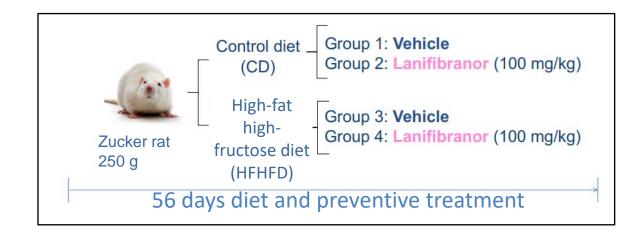
Portal hypertension in an early model of MASLD

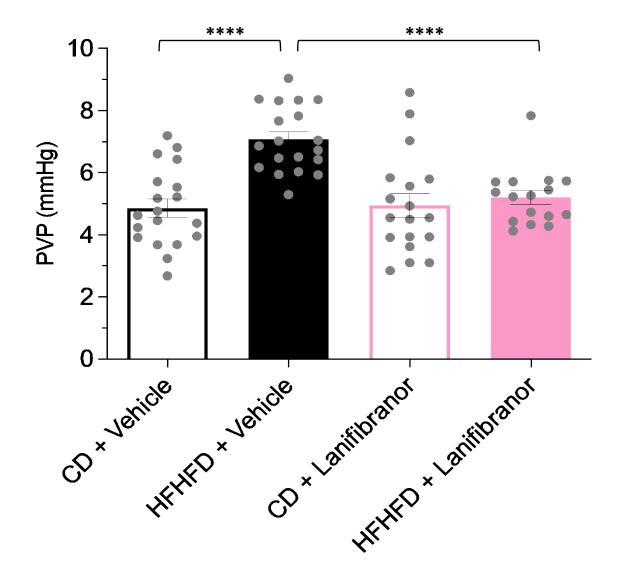


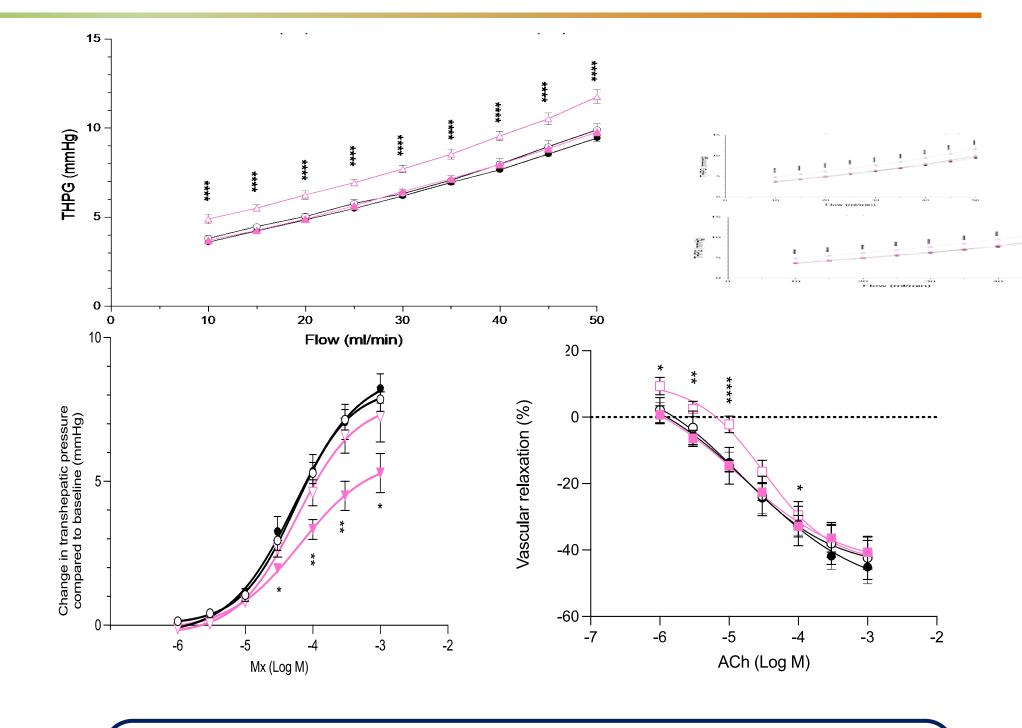
Lanifibranor

- improves the sinusoidal organisation
- decreases the number of blebs
- inhibits the capillarisation of the LSEC

Portal hypertension in an early model of MASH





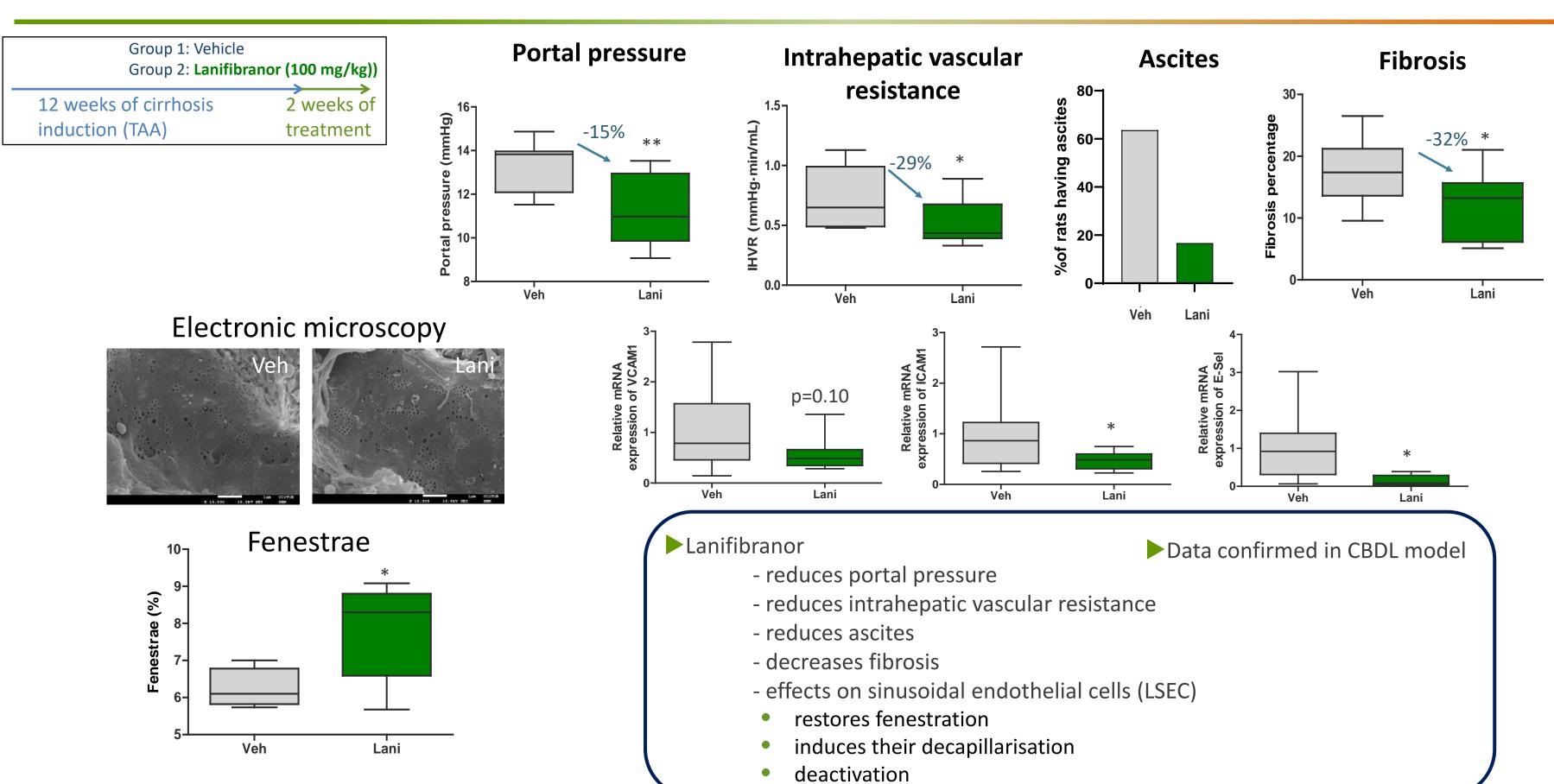


Confirmation in a second model (being a MASH model) of

- increase in portal pressure
- intrahepatic vascular modifications
- normalisation of all vascular modifications by lanifibranor



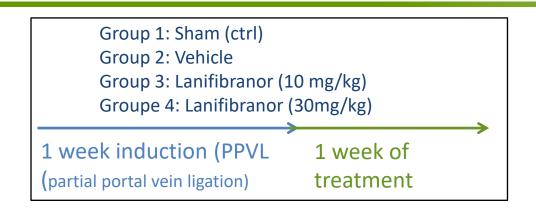
Portal hypertension in a model of cirrhosis: effect of lanifibranor on the portal pressure



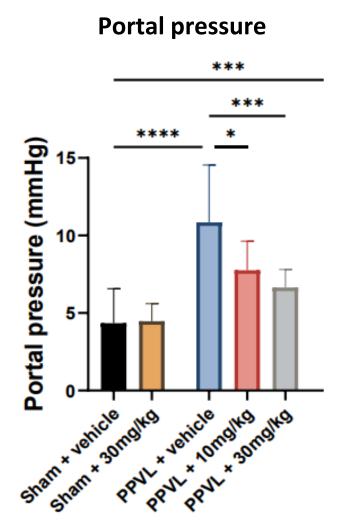
Boyer-Diaz et al. 2021 J.Hep

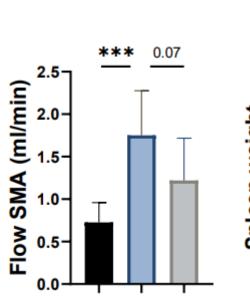
Portal hypertension in a non-cirrhotic model: effect of lanifibranor on the portal pressure and mesenteric vasculature

Spleen weight



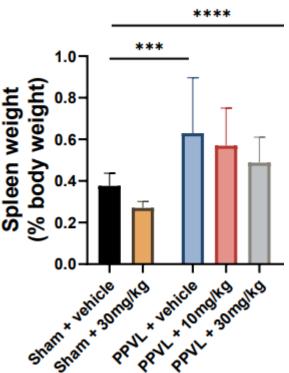
Corrosion cast of the mesentieric vasculature PPVL + lani **SHAM PPVL + Veh** (30mg/kg)

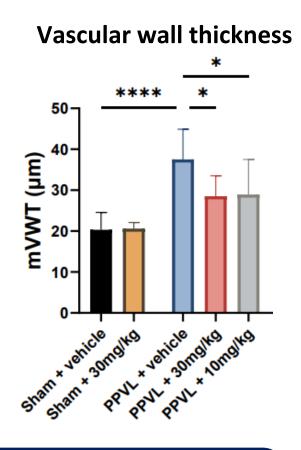


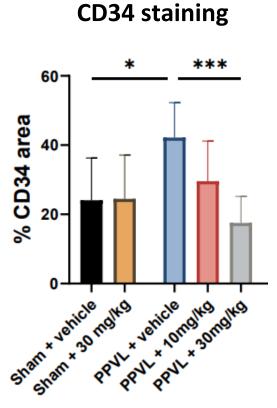


Flow superior

mesenteric artery







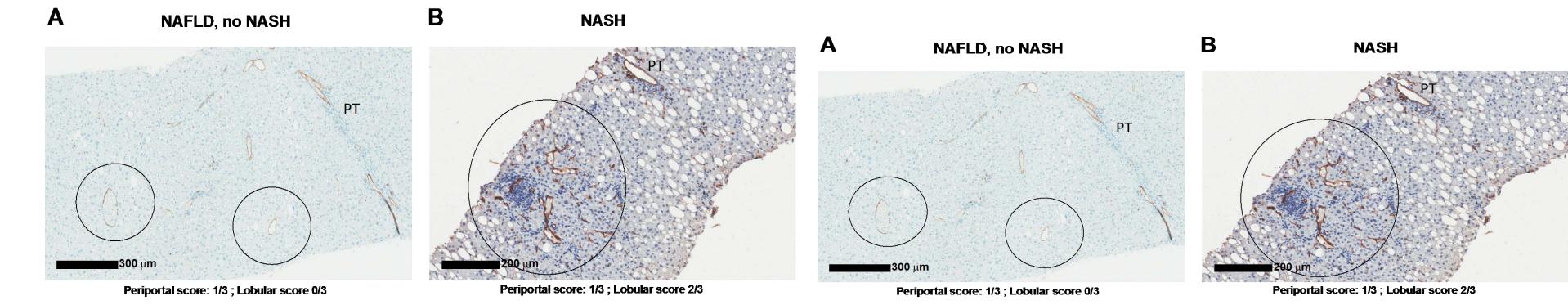
- Lanifibranor reduces portal pressure by reducing the superior mesenteric artery flow
 - Reduction of vascular wall thickness
 - Reversal of PPVL-induced vascular expansion



Clinical data from NATIVE demonstrating liver vasculature modification throughout MASH progression and effect of lanifibranor on the vascular architecture



Capillarisation of liver sinusoids in patients with MASH



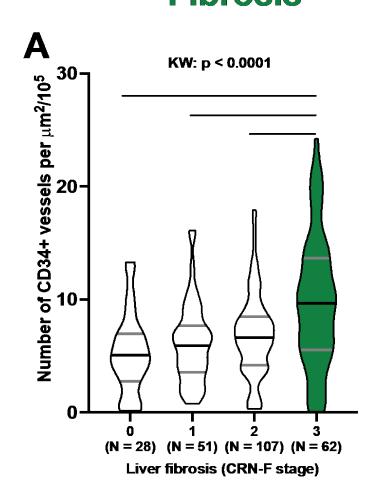
CD34 staining on slides from the NATIVE clinical trial (Phase 2b)

- CD34 positive staining is more pronounced in MASH patients than in patients without MASH
- Patients with MASH have significantly more CD34 positive staining within the lobular area
- A similar trend is observed in the periportal area

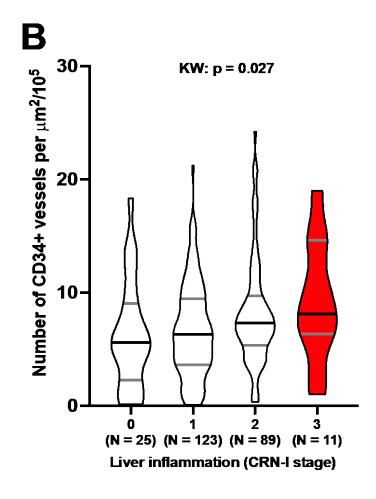
Capillarisation of liver sinusoids in patients with MASH

Density of CD34+ vessels

Fibrosis



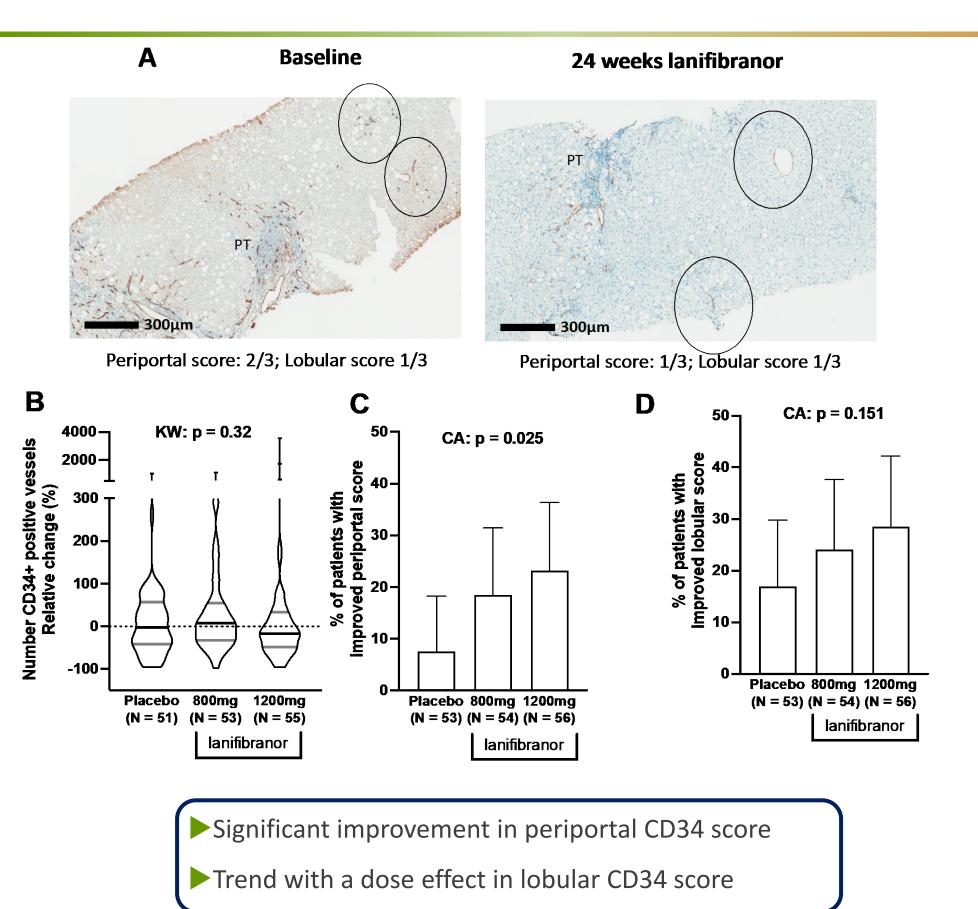
Inflammation



- CD34 positive staining is significantly linked to
 - the severity of liver fibrosis
 - the severity of liver inflammation

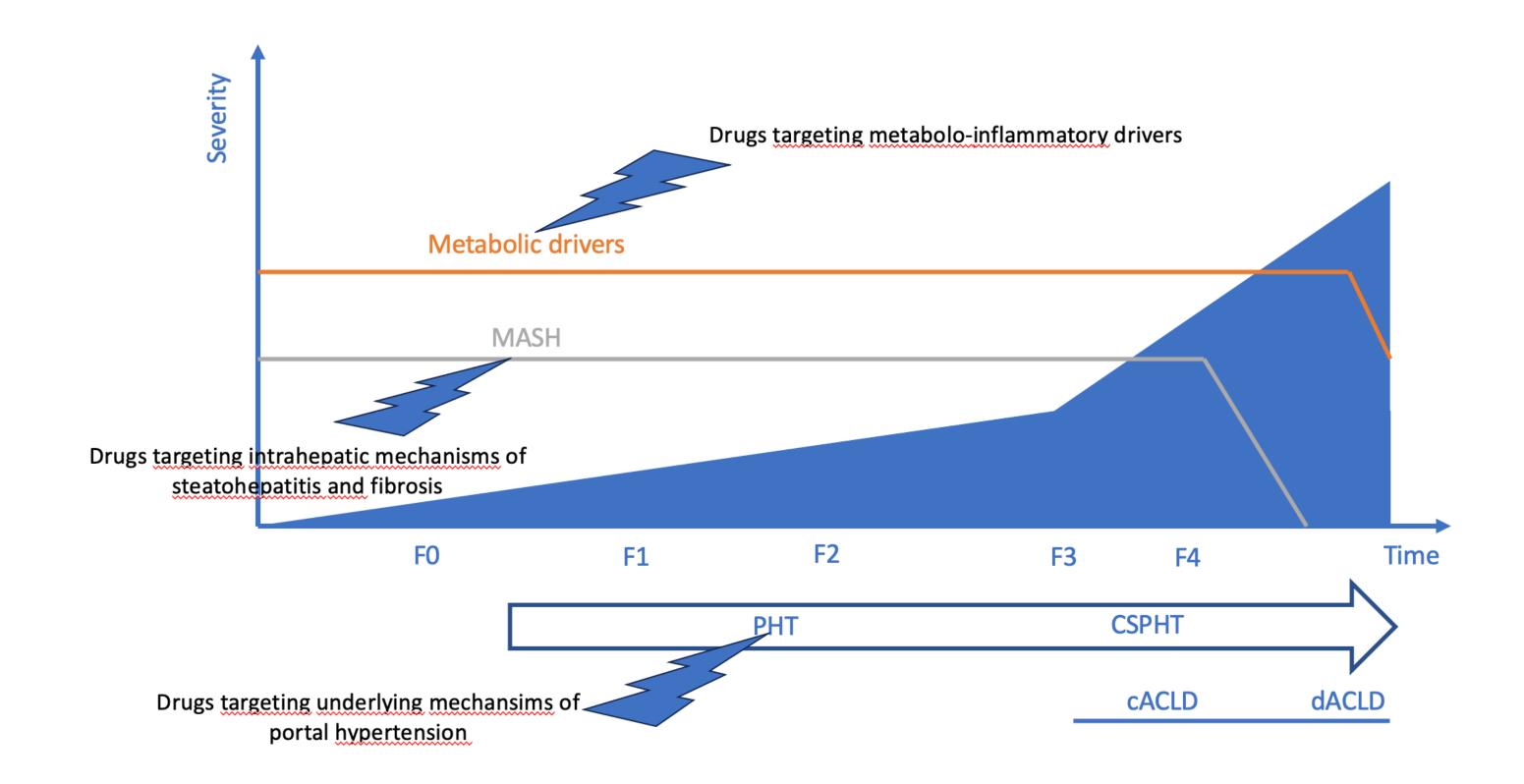


Capillarisation of liver sinusoids in patients with MASH: effects of lanifibranor

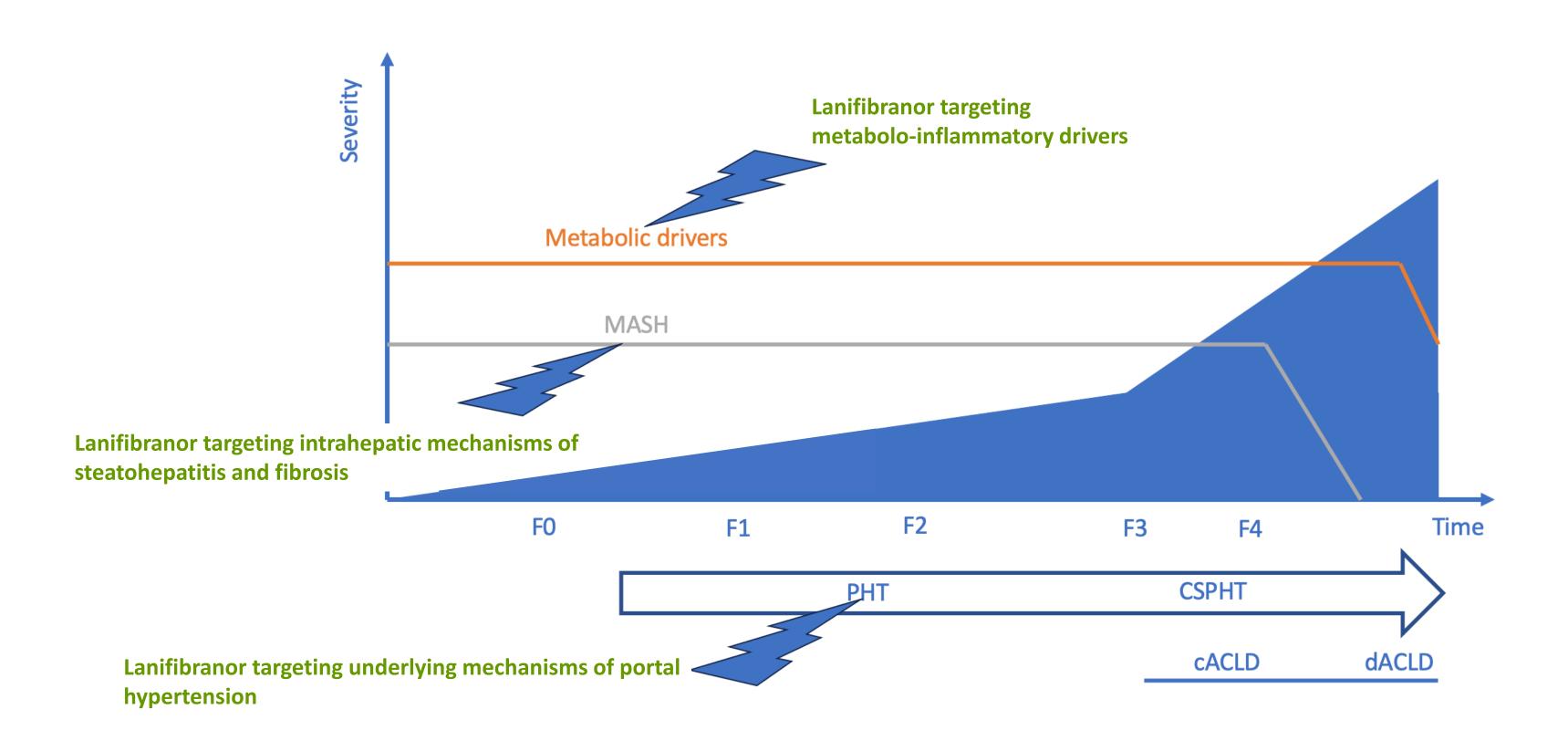


Rautou, Chotkoe ... Francque. In preparation

Mechanism to target across the disease spectrum



Mechanism to target across the disease spectrum



Conclusions

- > MASLD is associated with vascular changes at all disease stages
 - Both structural and functional mechanisms
- 3 PPAR isotypes closely involved in liver vascular biology
- Lanifibranor
 - Efficacious on restoring liver vascular biology in animal models
 - **Superior to mono-agonists**
 - Clinical data on capillarisation suggest also clinical relevance
- Mechanisms and effect of lanifibranor are relevant along the disease spectrum
 - Pre-clinical data in cirrhosis/PHT models
 - Role of vascular mechanisms in advanced disease