

# The Future of *SCN1A* Gene-targeting Research for the Treatment of Dravet Syndrome

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Dr Rajvinder Karda is a lecturer in gene therapy at the Institute for Women's Health, University College London. She completed her PhD in gene transfer and neuroscience at Imperial College London in 2016. Her research team mainly focuses on developing preclinical gene therapy and RNA editing treatments for childhood epilepsy. She also collaborates on preclinical gene therapy projects for rare childhood metabolic disorders. She is currently a board member of the British Gene and Cell Therapy Society and chairs the Public and Patient Engagement series. She is also a member of the Scientific Advisory Committee for the Dravet Syndrome Foundation Charity in Spain.

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Dravet syndrome is a rare genetic disorder that affects approximately 1 in 15,700 individuals. It is one of the most severe epilepsy syndromes of early childhood, with high morbidity and mortality rates.<sup>1,2</sup> It is characterized by seizures that begin in infancy and can lead to intellectual disability, developmental delays and a range of other neurological problems.<sup>3</sup> The *SCN1A* gene has been identified as the primary genetic cause of Dravet syndrome, with 80% caused by mutations in the *SCN1A* gene. Research has focused on developing treatments to target this gene.<sup>4</sup> In this expert interview, Rajvinder Karda addresses the current status of *SCN1A* gene-targeting research for the treatment of Dravet syndrome, discusses the potential for future developments in this field and some of the challenges that researchers face in developing effective treatments. She also highlights her current research project to develop a gene therapy for Dravet syndrome, co-funded by Dravet syndrome UK in partnership with Great Ormond Street Hospital Children's Charity, UK.

## Q. Could you give us a brief overview of the *SCN1A* gene-targeting research project you are running at Great Ormond Street Hospital?

Approximately 80% of people with Dravet syndrome have a loss of function mutation in the *SCN1A* gene, which encodes a voltage-gated sodium ion channel, Nav1.1.<sup>5</sup> This channel is present in brain cells and allows typical firing patterns between these cells. Affected brain cells containing the mutated Nav1.1 channel result in abnormal firing.

Our research project aims to develop a gene therapy treatment for Dravet syndrome. Our approach involves delivering a novel sequence in an adeno-associated virus to increase the healthy *SCN1A* gene expression and, therefore, restore the Nav1.1 function. The aim is to deliver this treatment to a clinically relevant mouse model for Dravet syndrome, to ameliorate the disease symptoms.

## Q. What are some of the key challenges associated with the use of gene-targeting therapies in treating Dravet syndrome?

The key challenges associated with gene-targeting therapies is off-target effects. In our gene therapy treatments, we have overcome this challenge by designing the viral therapy to target the specific cells that express the *SCN1A* gene.

## Q. If successful, how might this gene-targeting therapy impact clinical practice and the lives of people living with Dravet syndrome, and their families?

If our treatment is successful in our preclinical study, this will provide a one-off long-term treatment option for people living with Dravet syndrome and hopefully reduce or completely remove the

disease symptoms. Though still at an early stage in the project, the next step following a successful preclinical study would be for clinical studies to be conducted. In addition to the *SCN1A* gene-targeting research project at Great Ormond Street Hospital, other organizations have treatments for Dravet syndrome that have either started a clinical trial or are due to start one in 2026.<sup>6,7</sup>

### Q. What do you consider the future directions in the development of treatments for Dravet syndrome?

As the field of gene therapy is continuing to develop, this has provided many different forms of long-term effective genetic therapies for Dravet syndrome. This provides the possibility of significantly ameliorating the disease symptoms long term.<sup>8-14</sup> □

1. Dravet Syndrome Foundation. What is Dravet syndrome. 2023. Available at: <https://dravetfoundation.org/what-is-dravet-syndrome/#:~:text=Dravet%20syndrome%20is%20a%20clinical,a%20mutation%20exclude%20the%20diagnosis> (Date last accessed: 29 March 2023)
2. Connolly MB. Dravet syndrome: Diagnosis and long-term course. *Can J Neurol Sci.* 2016;43(Suppl. 3):S3-8. DOI: 10.1017/cjn.2016.243.
3. National Organization for Rare Disorders. Dravet syndrome – symptoms, causes, treatment. 2023. Available at: <https://rarediseases.org/rare-diseases/dravet-syndrome-spectrum/> (Date last accessed: 29 March 2023)
4. Ding J, Li X, Tian H, et al. *SCN1A* mutation-beyond dravet syndrome: A systematic review and narrative synthesis. *Front Neurol.* 2021;12:743726. DOI: 10.3389/fneur.2021.743726.
6. ClinicalTrials.gov. A clinical study to evaluate the safety and efficacy of ETX101 in infants and children with *SCN1A*-positive Dravet syndrome (endeavor). ClinicalTrials.gov identifier: NCT05419492. Available at: <https://clinicaltrials.gov/ct2/show/NCT05419492> (Date last accessed: 4 May 2023)
7. ClinicalTrials.gov. An open-label extension study of STK-001 for patients with Dravet syndrome. ClinicalTrials.gov identifier: NCT04740476. Available at: <https://clinicaltrials.gov/ct2/show/NCT04740476> (Date last accessed: 4 May 2023)
8. Han Z, Chen C, Christiansen A, et al. Antisense oligonucleotides increase *SCN1A* expression and reduce seizures and SUDEP incidence in a mouse model of Dravet syndrome. *Sci Transl Med.* 2020;12:eaaz6100. DOI: 10.1126/scitranslmed.aaz6100
9. Hsiao J, Yuan TY, Tsai MS, et al. Upregulation of haploinsufficient gene expression in the brain by targeting a long non-coding RNA improves seizure phenotype in a model of Dravet syndrome. *EBioMedicine.* 2016;9:257-77. DOI: 10.1016/j.ebiom.2016.05.011
10. Tanenhaus A, Stowe T, Young A, et al. Cell-selective adeno-associated virus-mediated *SCN1A* gene regulation therapy rescues mortality and seizure phenotypes in a Dravet syndrome mouse model and is well tolerated in nonhuman primates. *Hum Gene Ther.* 2022;33:579-97. DOI: 10.1089/hum.2022.037
11. Mora-Jimenez L, Valencia M, Sanchez-Carpintero R, et al. Transfer of *SCN1A* to the brain of adolescent mouse model of Dravet syndrome improves epileptic, motor, and behavioral manifestations. *Mol Ther Nucleic Acids.* 2021;25:585-602. DOI: 10.1016/j.omtn.2021.08.003
12. Niibori Y, Lee SJ, Minassian BA, Hampson DR. Sexually divergent mortality and partial phenotypic rescue after gene therapy in a mouse model of Dravet syndrome. *Hum Gene Ther.* 2020;31:339-51. DOI: 10.1089/hum.2019.225
13. Tevard Biosciences. Our science. Available at: <https://tevard.com/#science> (Date last accessed: 4 May 2023)
14. Colasante G, Lignani G, Brusco S, et al. DCas9-based *SCN1A* gene activation restores inhibitory interneuron excitability and attenuates seizures in Dravet syndrome mice. *Mol Ther.* 2020;28:235-53. DOI: 10.1016/j.ymthe.2019.08.018