

# Gene Therapy – Access to Innovative Therapies for Rare and Ultrarare Disorders

Women in Government  
Leadership & Innovation Summit

November 15, 2024



ultragenyx

# Introductions

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Rep. Donna White  
State of North Carolina  
NC Life Sciences Caucus  
Co-Chair

**Moderator**



Steven Gray, PhD  
University of Texas  
Southwestern Medical  
Center  
Director, Gene Therapy Program  
Professor, Dept. of Pediatrics

**Gene Therapy 101**



Josh Argall  
Devin's Father  
WI Rare Board Member  
Patient Advocacy Strategies  
VP, Engagement & Operations

**Patient and Family  
Perspectives**

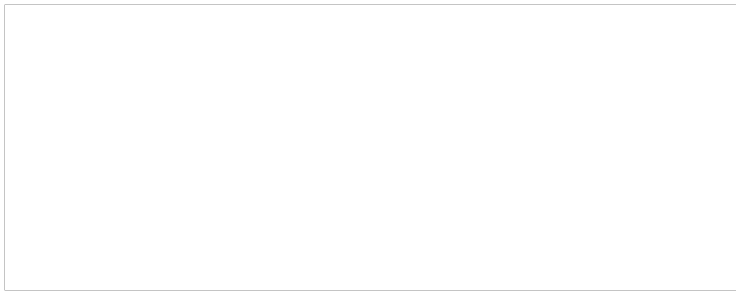


Erin Frey  
Ultragenyx  
Senior Director  
State Government Affairs

**State Policy Considerations**

A female scientist with dark hair, wearing safety glasses and a white lab coat, is focused on her work. She is wearing purple nitrile gloves and is carefully handling a multi-well plate. The background shows a laboratory setting with various pieces of equipment and shelves. The image is overlaid with a semi-transparent white box containing text and decorative green and purple shapes.

# What is Gene Therapy? Gene Therapy 101



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# Gene Therapy: Emerging Transformative Paradigms for Treatment of Human Disease

Steven Gray, Ph.D.

Professor of Pediatrics, Molecular Biology, and Neurology

Eugene McDermott Center for Human Growth & Development

Director, UT Southwestern Viral Vector Facility

Director, UT Southwestern Gene Therapy Program

*Any stated opinions are Dr. Gray's own, and not necessarily representing UTSW.*




The **HUMAN GENOME** has approximately



**20,000** genes

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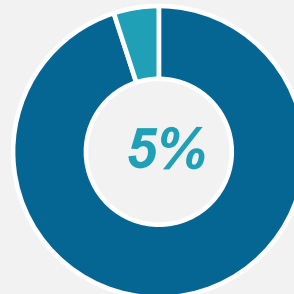
More than **6,000** diseases are caused by genetic mutations 



Many are **RARE** diseases affecting 30 million Americans (*1 of 10*)



ONLY 5 percent of these diseases have **APPROVED** therapies



**CBS NEWS**

NEWS

SHOWS

VIDEO

CBSN

MORE

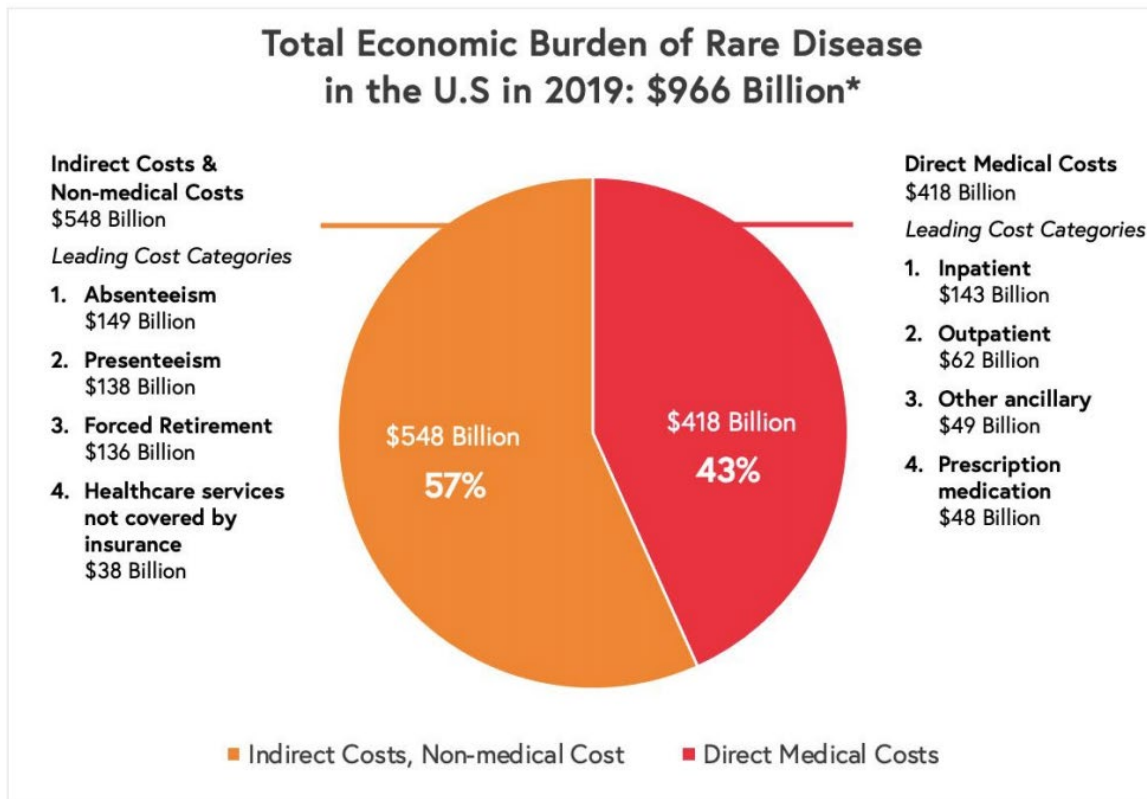


**FDA approves gene therapy for rare form of blindness**

**FORTUNE**

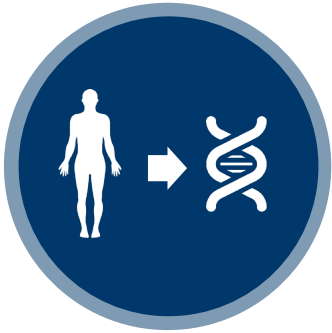
**The Way We Treat Cancer Will Be Revolutionized as Gene Therapy Comes to the U.S.**

# “Rare” Genetic Disease – a large but hidden problem



# Broken Genes Lead to Broken Proteins

Humans are made of cells that contain our **genes**



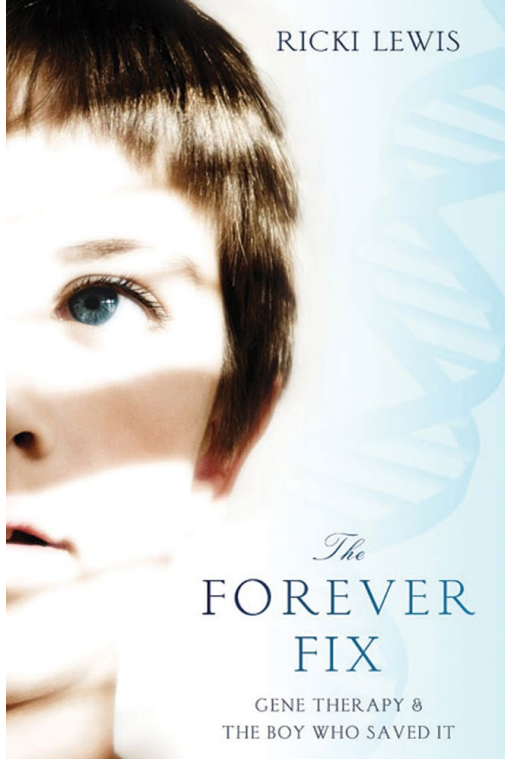
**Genes** are instructions for **proteins**



**Proteins** help **cells** function in a healthy manner



Abnormalities in genes can result in proteins that do not function properly

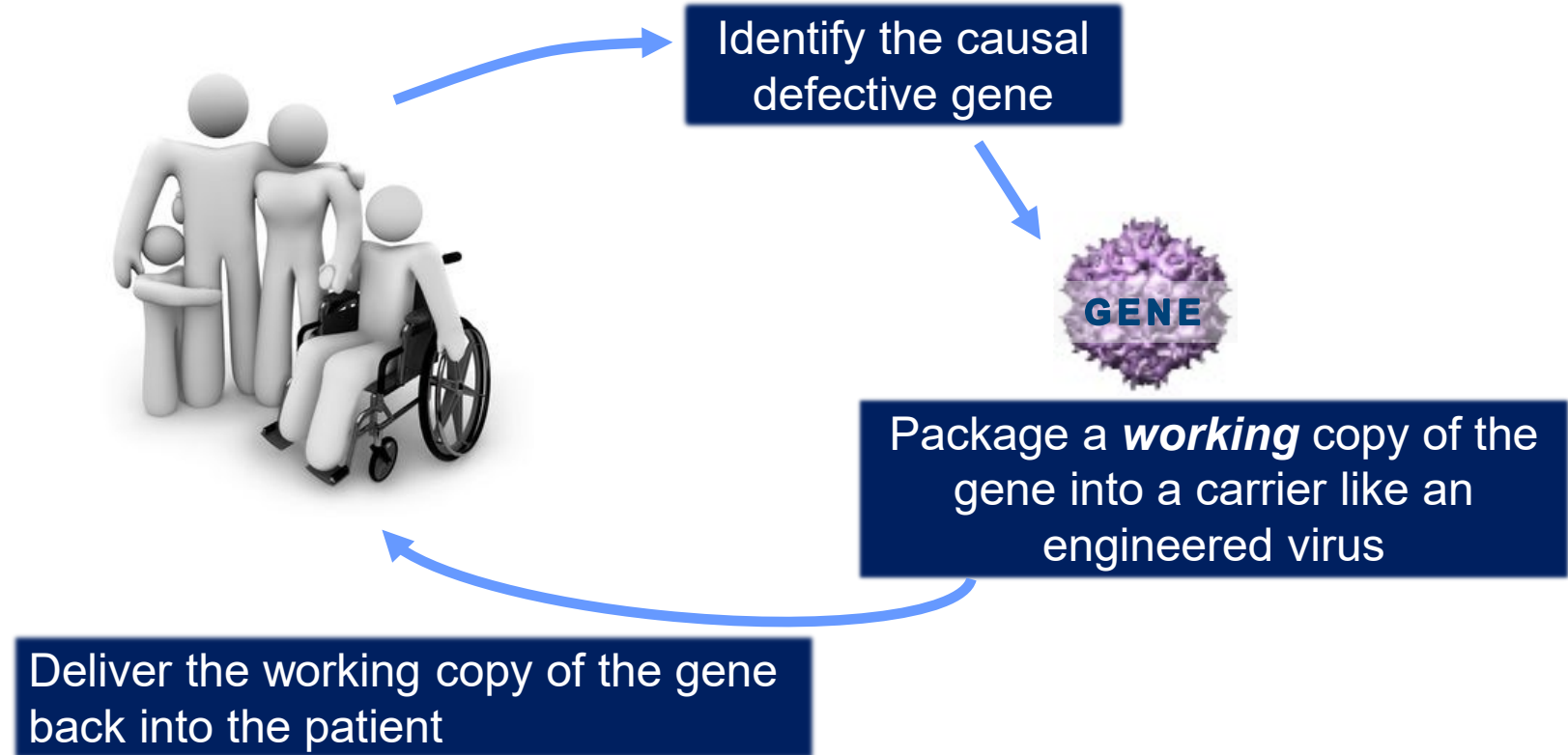


The promise of gene therapy is to fix a genetic disease at the source.

If you fix the DNA, you've solved the problem permanently.



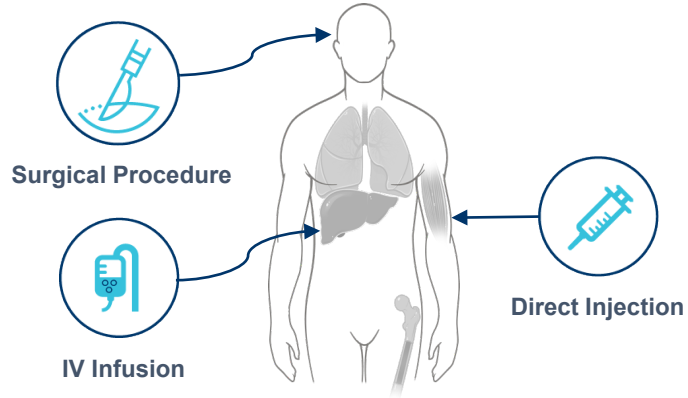
# How Does Gene Therapy Work?



# Gene Therapy: Treating Patients

## *In Vivo* Approaches

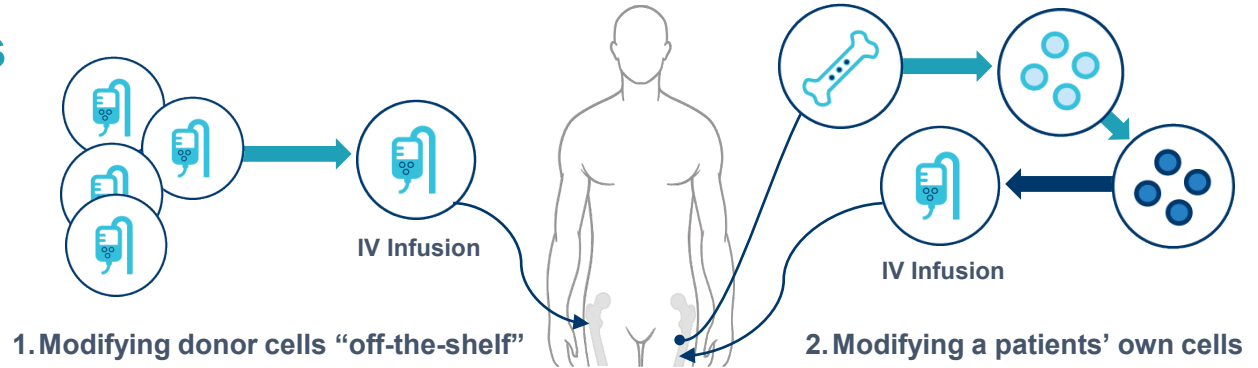
- Intervene inside the body
- Genome modifications within target cells after individuals receive a genomic medicine
- e.g., surgery, injection



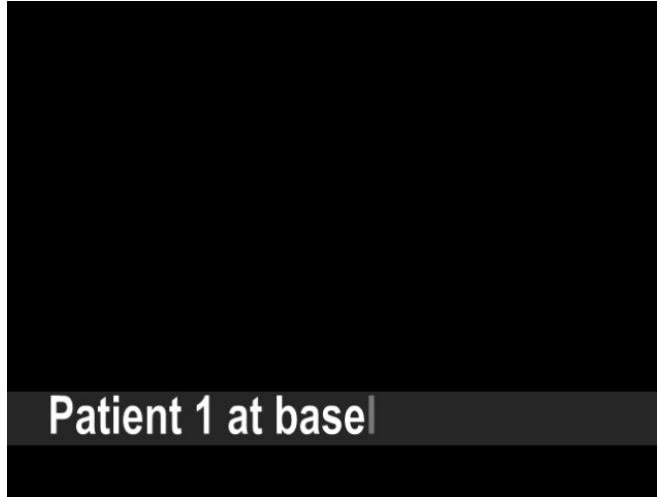
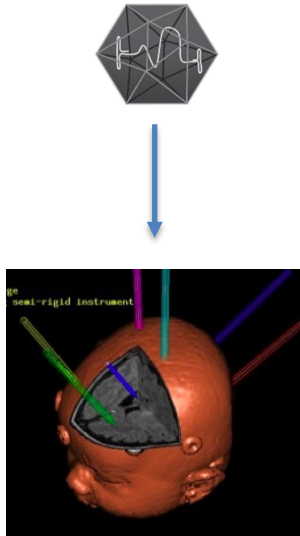
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## *Ex Vivo* Approaches

Outside the body,  
create cell medicines by:



# AAV Gene Therapy for AADC Deficiency



[Sci Transl Med.](#) 2012 May 16;4(134):134ra61.

## **Gene therapy for aromatic L-amino acid decarboxylase deficiency.**

[Hwu WL](#), [Muramatsu S](#), [Tseng SH](#), [Tzen KY](#), [Lee NC](#), [Chien YH](#), [Snyder RO](#), [Byrne BJ](#), [Tai CH](#), [Wu RM](#).

# Krabbe Disease

Affects ~1:100,000 children

Symptoms start at ~6 months

Typically fatal by 1-3 years old.



Jim and Jill Kelly with their son Hunter in 2004. Hunter, who had Krabbe disease, died in 2005 at age 8.

*Don Heupel/AP*

<https://www.npr.org/sections/health-shots/2013/12/18/255226663/screening-newborns-for-disease-can-leave-families-in-limbo>

# Treatment of Dogs With Krabbe Disease

“Placebo” – 10 weeks old

Treated – 70 weeks old

*Bradbury et al, Journal of Clin Inv, 2020*

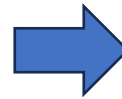


*Patients that deserve a better future*



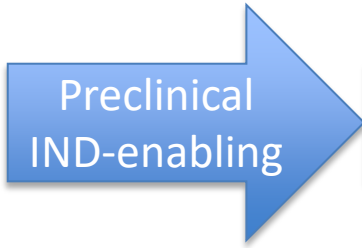
*Exciting gene therapy technologies*

Why aren't these two things coming together more?



Not enough patients for pharma involvement





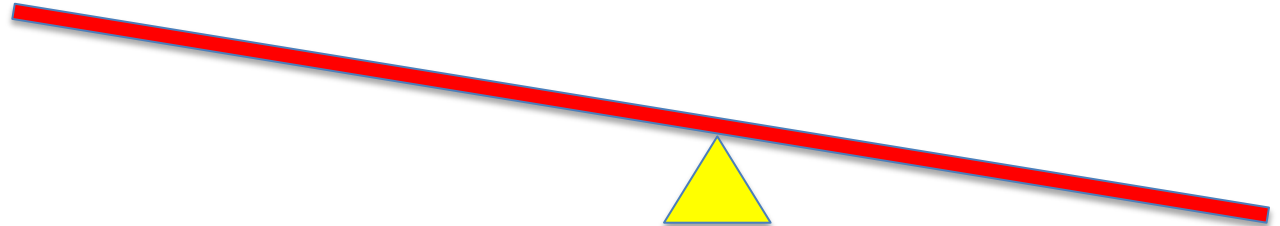
Private Foundations / Government / Philanthropy

~~Commercial Partners~~



**COST / RISK**

**REIMBURSEMENT**



# Regulating Genomic Medicine

Center for Biologics  
Evaluation and Research



Food & Drug  
Administration



National Institutes of Health

- Regulation of gene & cell therapies are governed by the U.S. Department of Health & Human Services HHS (FDA & NIH)
- FDA treats all genome edited cells as medical products
- Federal law prohibits the FDA from reviewing INDs using human germline cells and prohibits the NIH from funding research in germline cells
- FDA prohibits the conduct of clinical trials using germline editing

# Regulating Gene & Cell Therapy Products

Center for Biologics  
Evaluation and Research



Food & Drug  
Administration

- FDA has an established regulatory framework to regulate cell and gene therapy products
- FDA has recently developed new regulatory programs to help expedite review of cell and gene therapy products:
  - INTERACT
  - RMAT
- Cell and gene therapy products must fulfill the same evidentiary standards to prove safety and efficacy as any other FDA-approved drug

**Sources:**

FDA. *Human Gene Therapy for Rare Diseases: Draft Guidance for Industry*. July 2018.

FDA. *Testing of Retroviral Vector-Based Human Gene Therapy Products for Replication Competent Retrovirus During Product Manufacture and Patient Follow-up; Draft Guidance for Industry*. July 2018

FDA. *Long Term Follow-up After Administration of Human Gene Therapy Products; Draft Guidance for Industry*. July 2018.

# Thank You



Josh's kids:  
Benny  
Devin  
Genevieve



# State Policy Considerations



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# A Few Words on Pricing: Cost Conscious, Patient-Centered, Worldwide Access

## Elements that impact gene therapy pricing

- Clinical
  - Clinical trial designs and endpoints
  - Small populations
  - Probability of success
- Manufacturing practices
  - In-house or outsource
  - Cost of goods
- Improved science/processes over time.
- Pricing for majority access vs. other approaches.
- Value to patients and their caregivers/families.

## Ultragenyx Gene Therapy Manufacturing Facility



# State Policy that impacts the Rare Disease Community



## Economic Development

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- Focus on inviting life science, biotech and medical innovation companies into your state.
- Incentivize innovation with R&D tax credits



## Earlier Diagnosis

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- Newborn screening parity with the Recommended Uniform Screening Panel
- Rapid Whole Genome Sequencing Coverage
- Biomarker Testing Coverage

## Access to Treatments

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- Copay Accumulator Ban
- Prior Authorization reform
- Ensure any legislation appropriately recognizes rare disease
- Ensure Medicaid adds utilization criteria for new treatments swiftly

## Hear the Rare Voice

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- Rare Disease Advisory Council
- Form a Rare Disease Caucus
- Ensure Medicaid includes rare experts and patient advocates in the Drug Utilization Review and Prescriptions & Therapeutics boards

# Questions?

Panelists' Contact Information:

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