



# Eye complications in cystinosis & Status of eye treatment

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# Disclosures

- Dr LIANG Hong has received honoraria and/or consulting fees from:
  - Recordati Rare Diseases
  - AVROBIO
  - CHIESI SAS

# PLAN

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## **Eye complications in cystinosis**

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Physiopathology of ocular cystinosis

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Cornea complications by Slit lamp/OCT/IVCM

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Glaucoma, Retinopathy

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## **Status of eye treatment**

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Chart for eye cystinosis: Cysteamine + other local treatments

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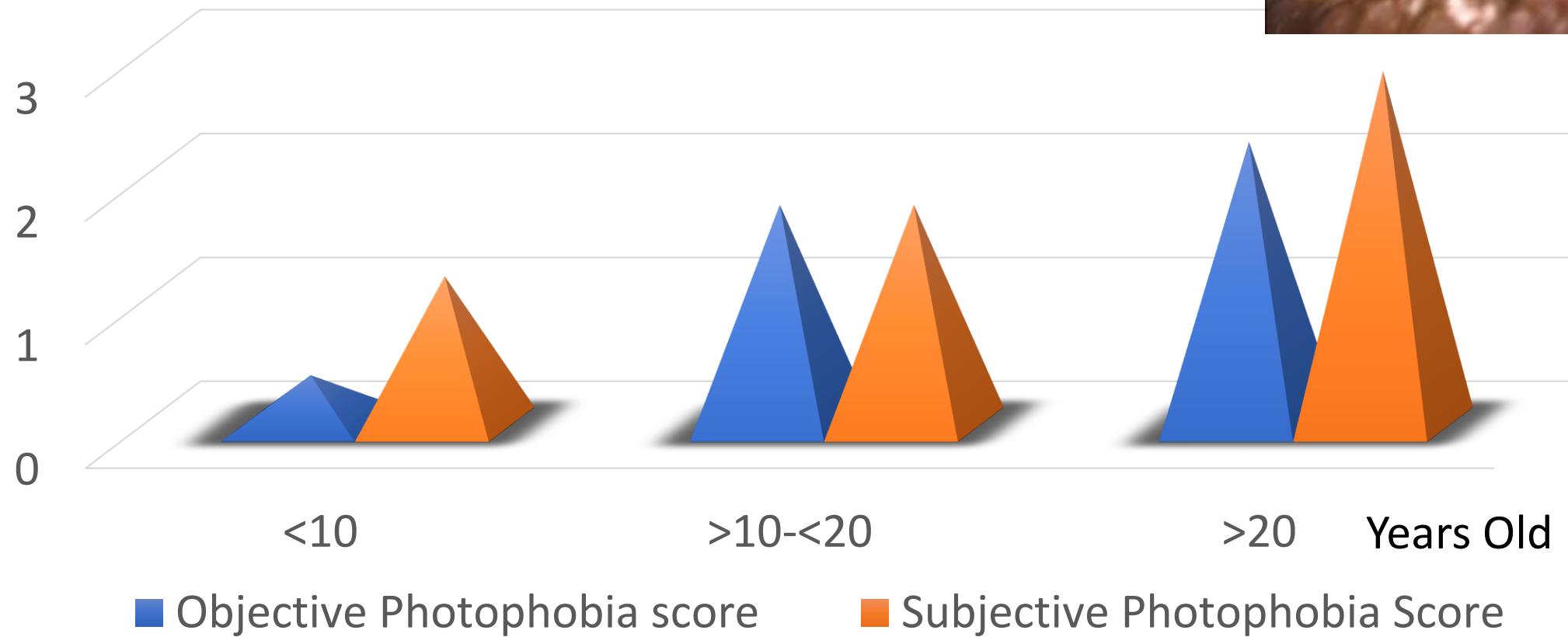
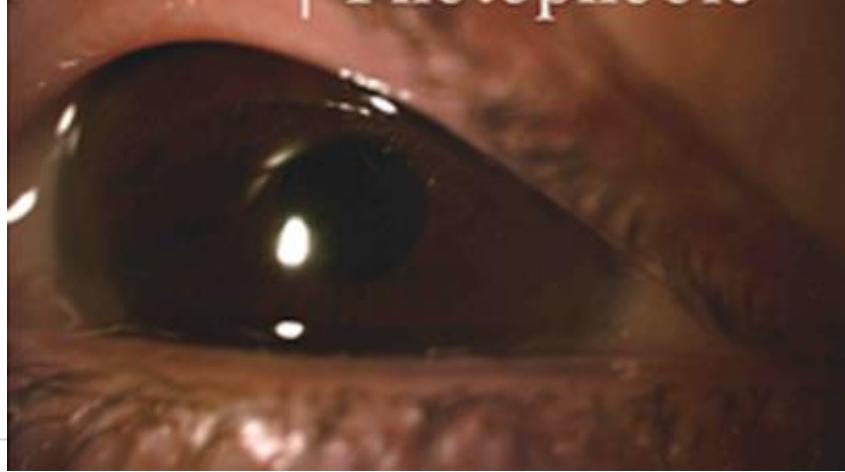
Real life of cystadrops in treatment

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Clinical practice experiences

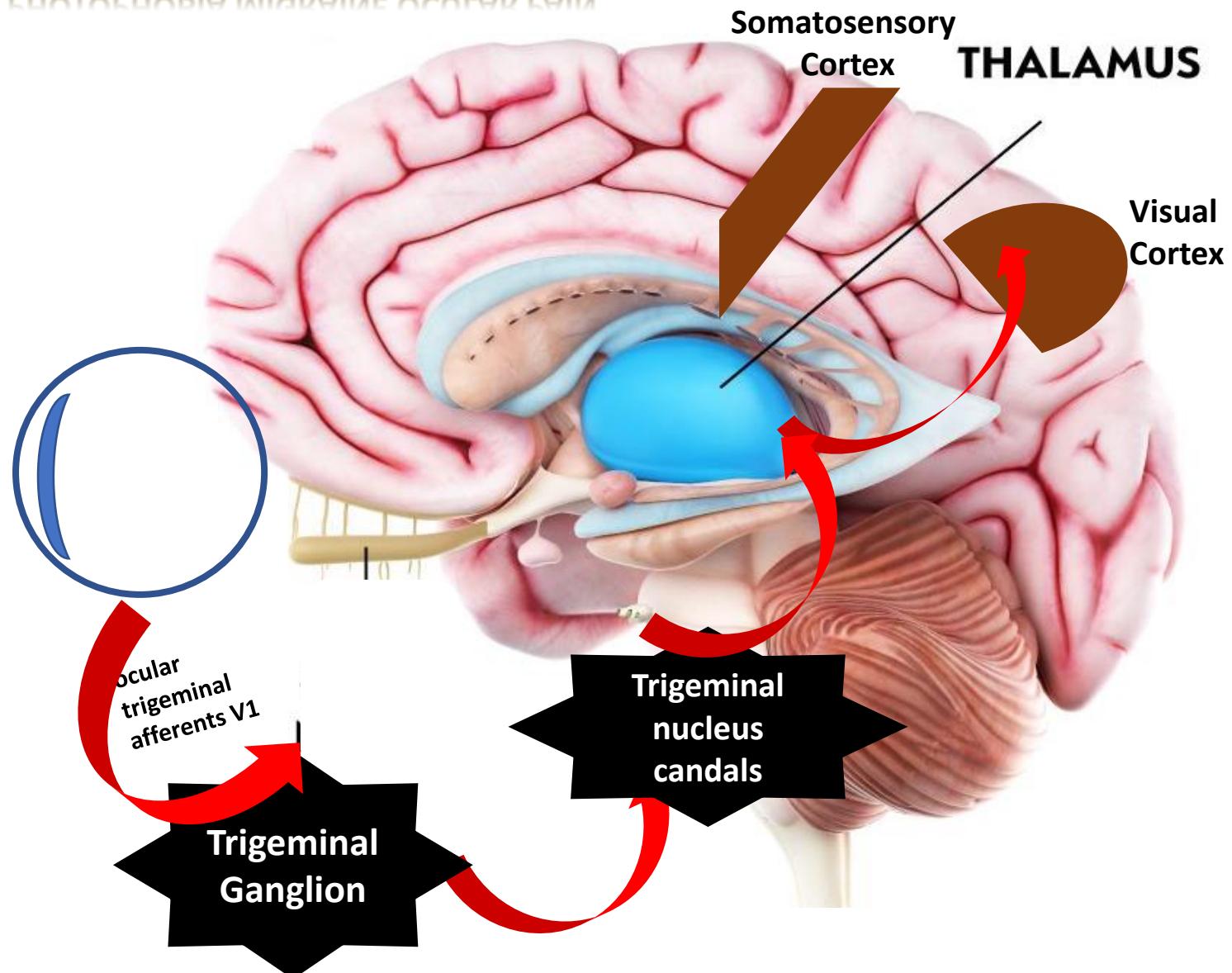
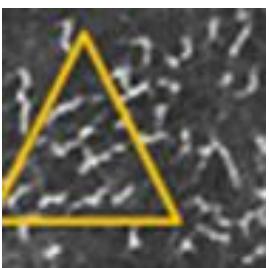
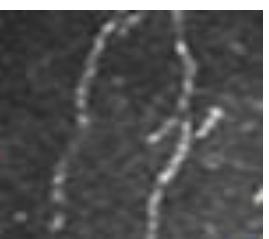
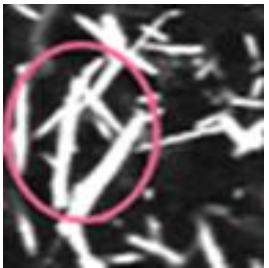
# Physiopathology of ocular cystinosis

# Symptoms: Photophobia



## PHOTOPHOBIA MIGRAINE OCULAR PAIN

Light



# Ocular Manifestations and Complications



## Anterior segment

### Conjunctiva

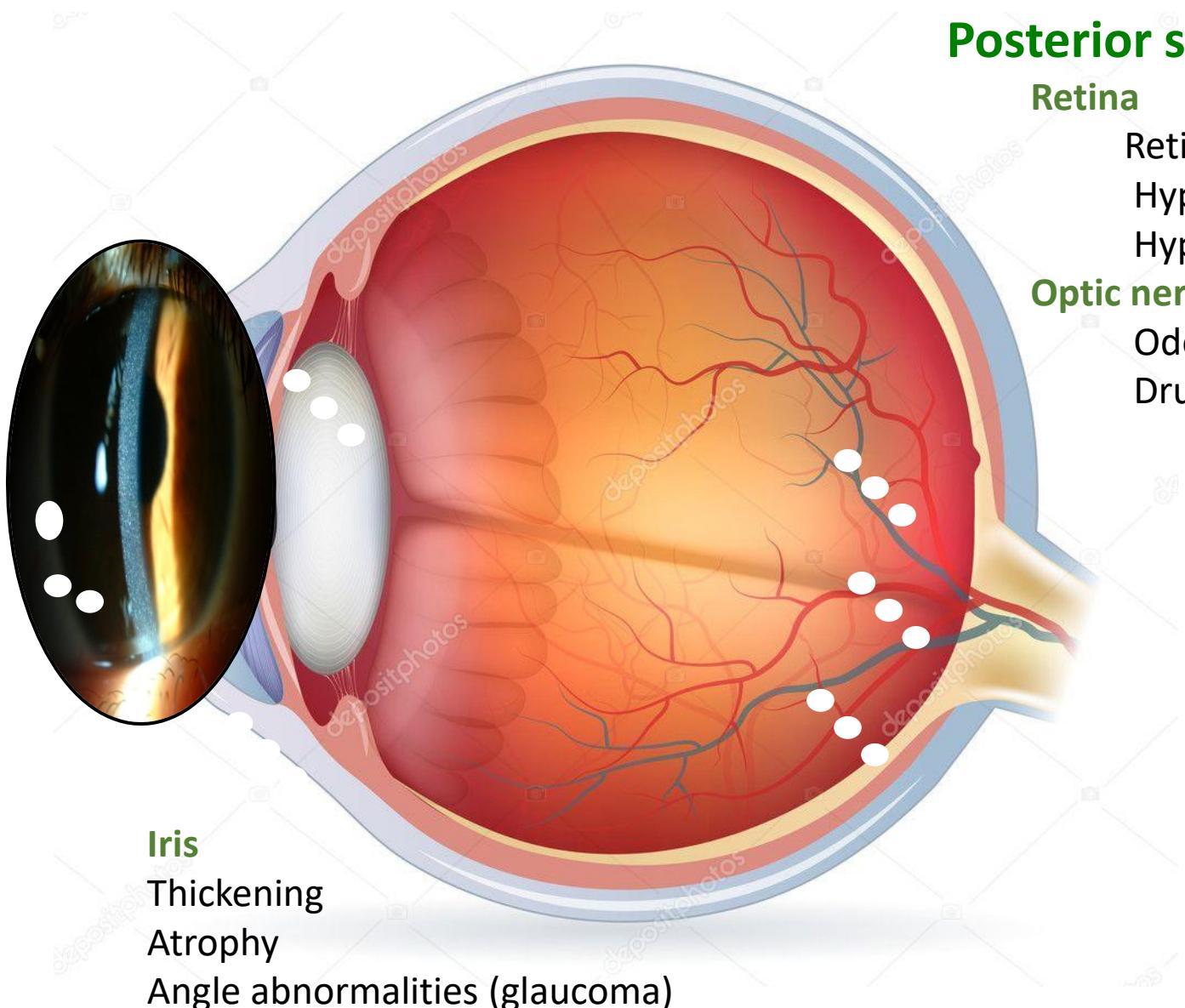
Meibomian gland dysfunction

### Limbus

Limbal stem cell deficiency  
(LSCD)

### Cornea

blepharospasm  
Superficial punctate keratopathy  
Band keratopathy  
Peripheral neovascularization  
Cornea ulcer  
Opacification



## Posterior segment

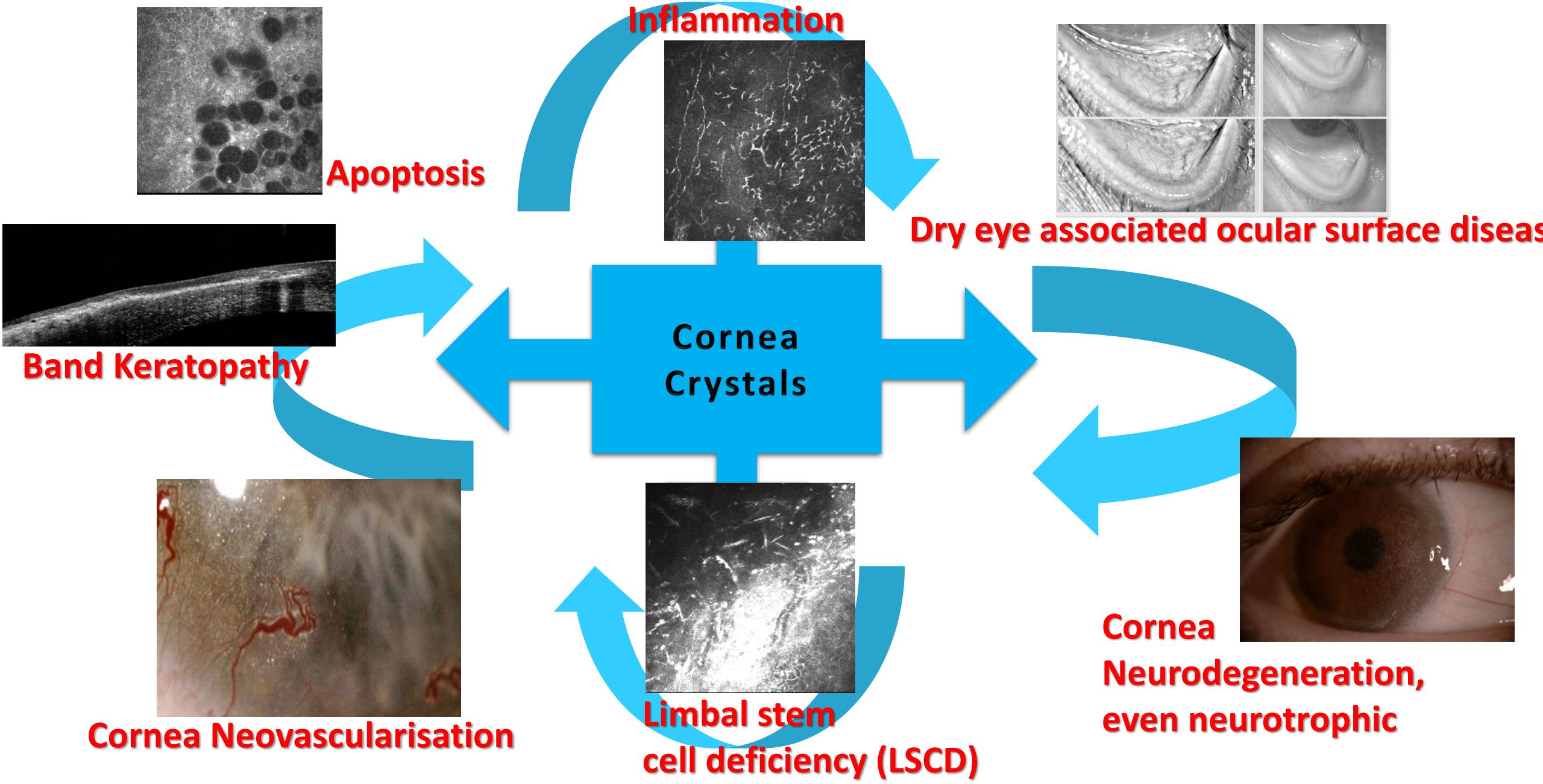
### Retina

Retinal degeneration  
Hyper/  
Hypopigmentation

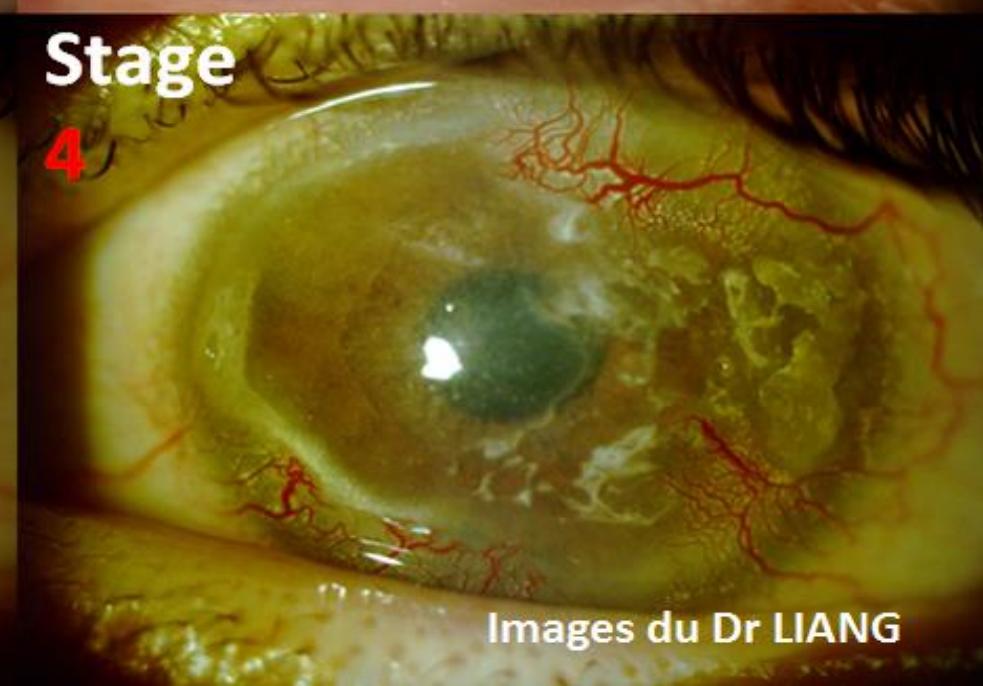
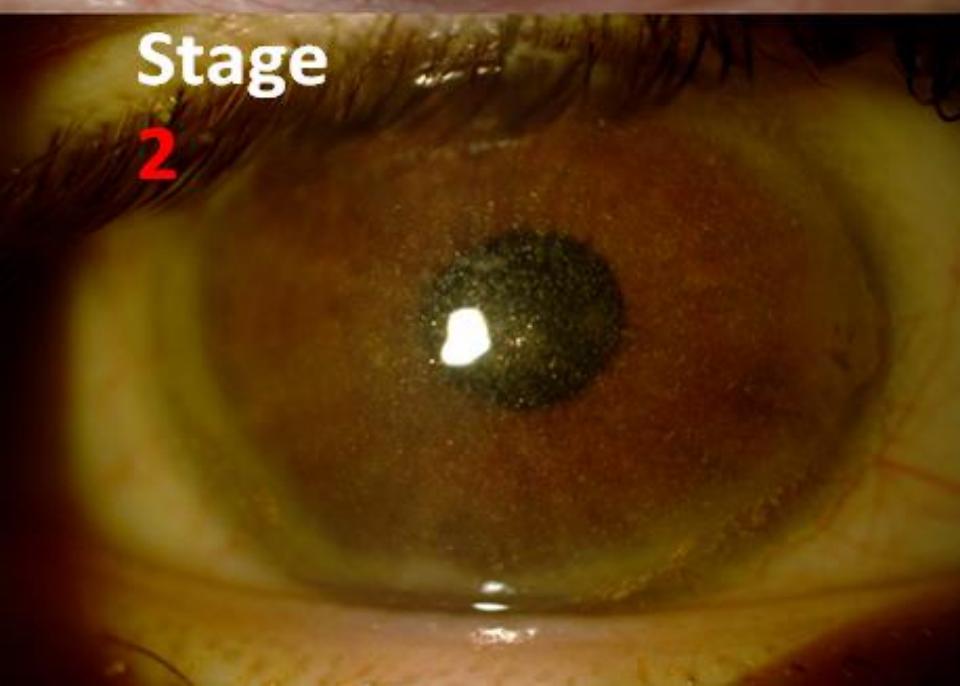
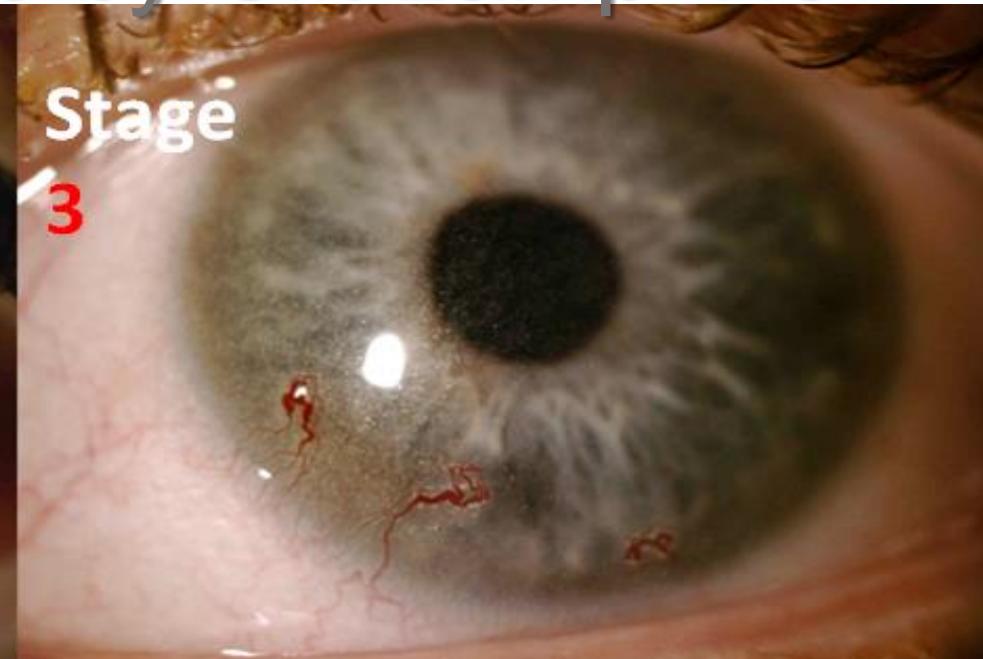
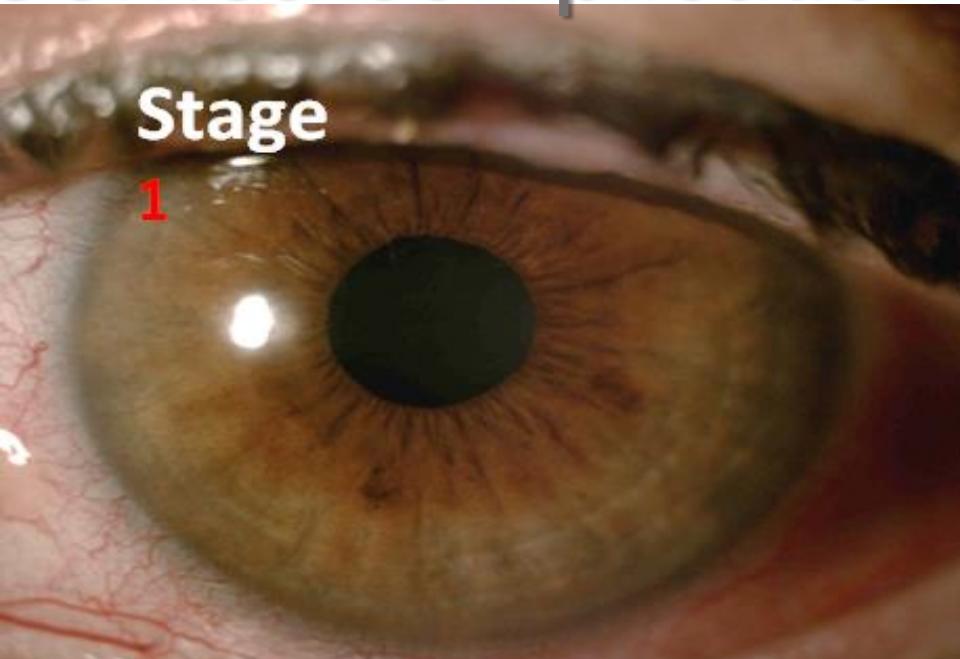
### Optic nerve

Odema  
Drusen

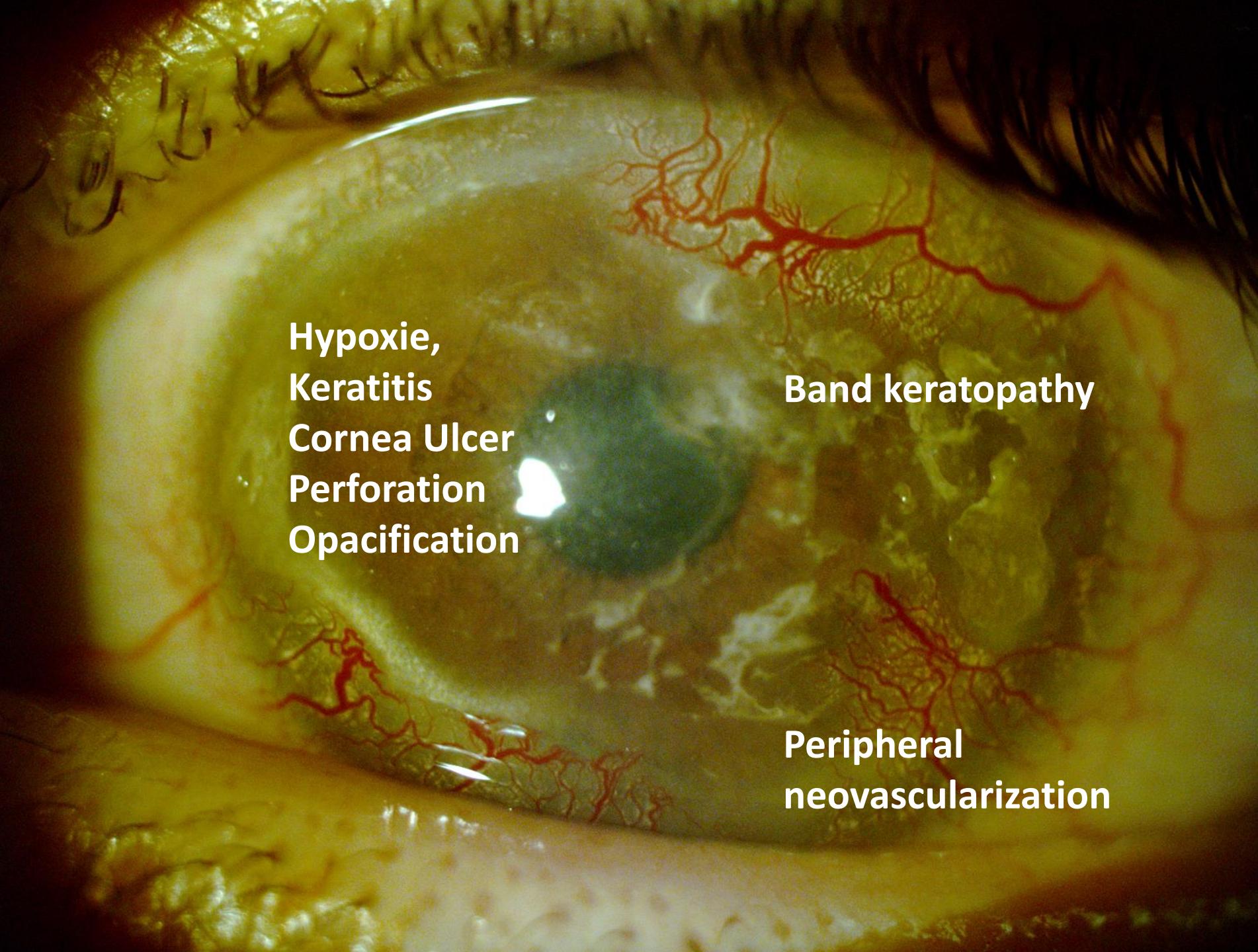
# Vicious cycle of ocular cystinosis



# Cornea complications by Slit Lamp View



Images du Dr LIANG

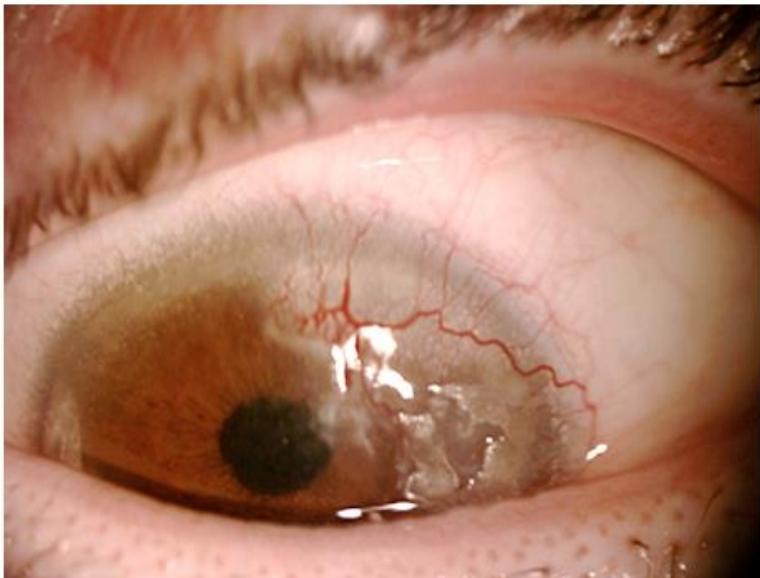


A close-up photograph of a severely damaged eye. The cornea is heavily opacified and shows signs of perforation. The conjunctival surface is red and vascularized. A bright light source is visible near the center of the eye. The text labels are overlaid on the left side of the image.

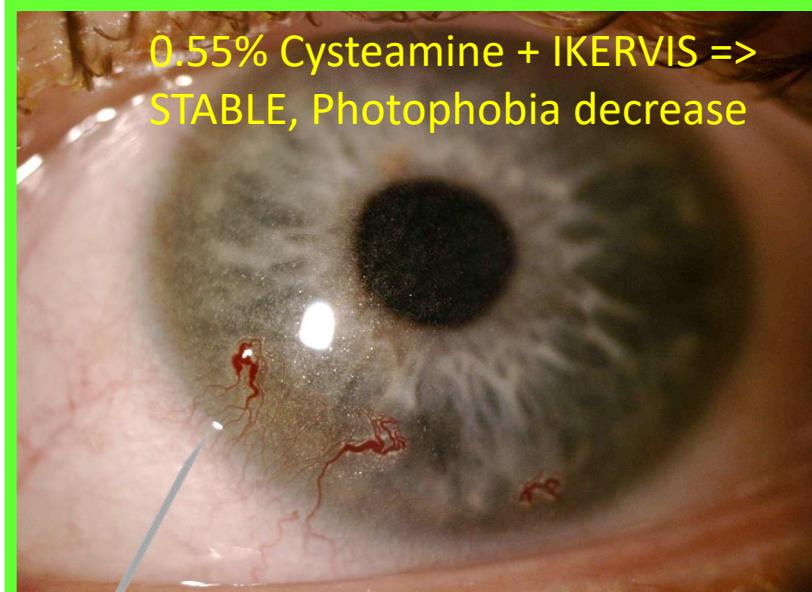
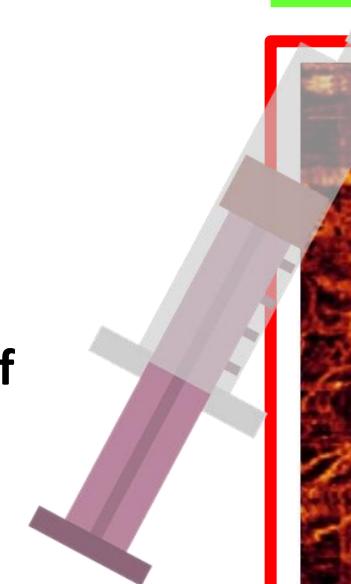
**Hypoxie,  
Keratitis  
Cornea Ulcer  
Perforation  
Opacification**

**Band keratopathy**

**Peripheral  
neovascularization**



The Failure of  
anti VEGF  
injection

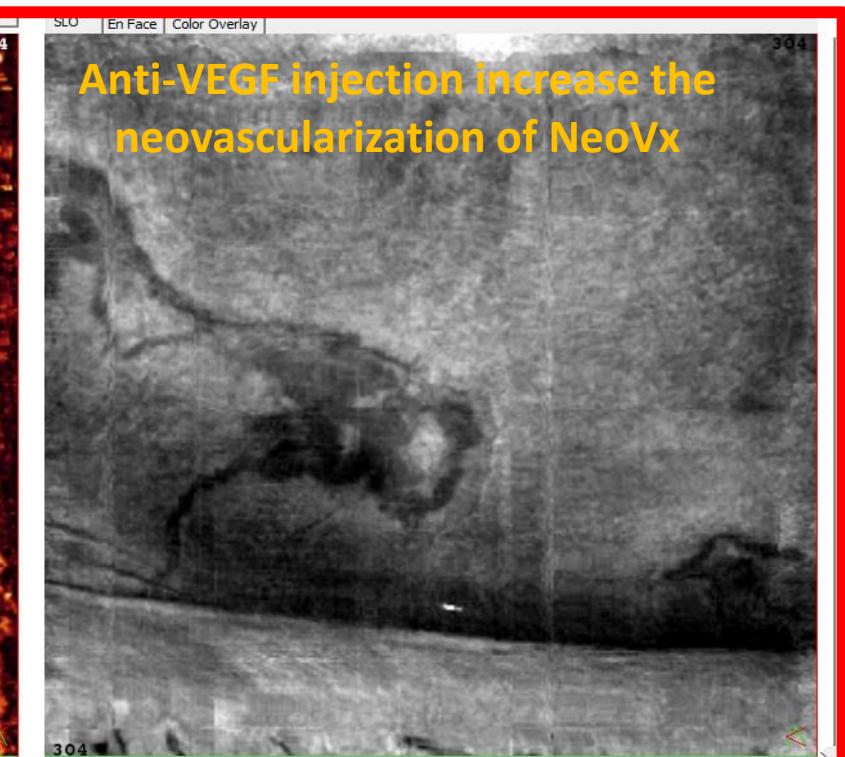
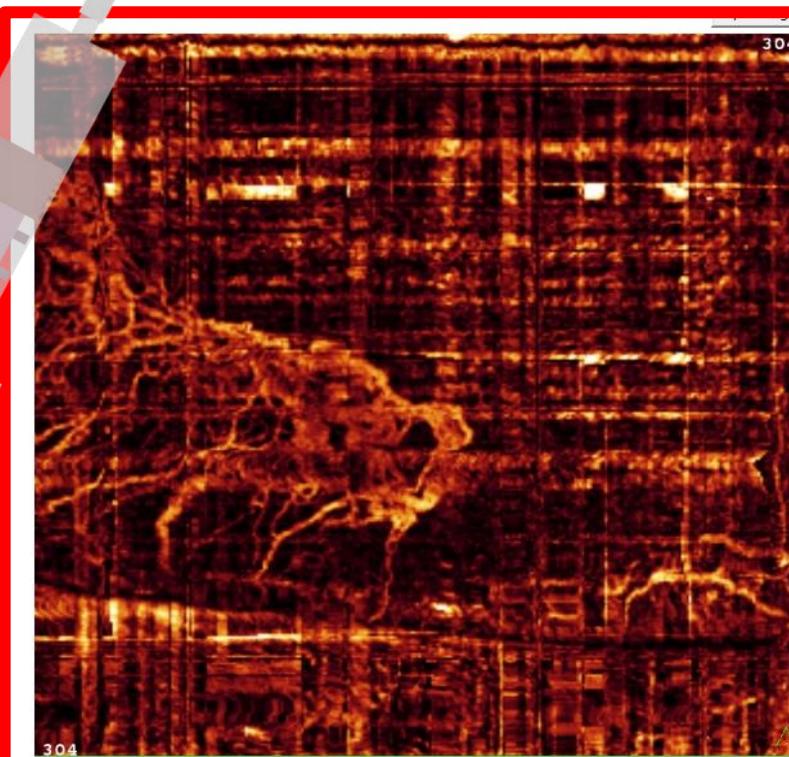


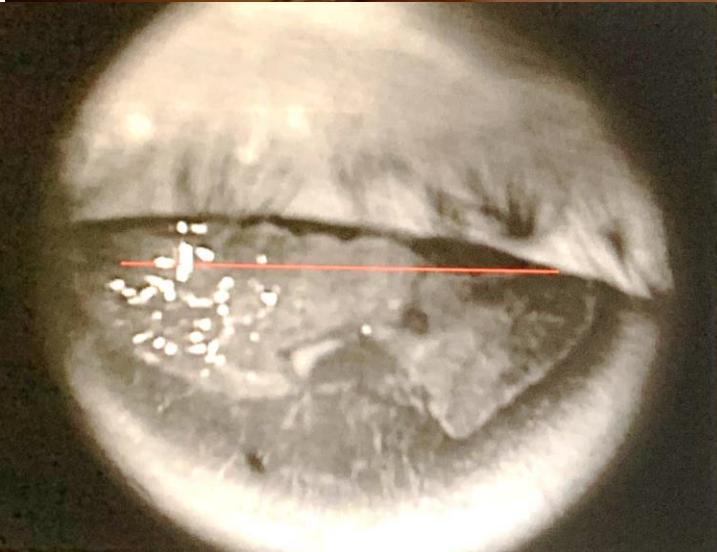
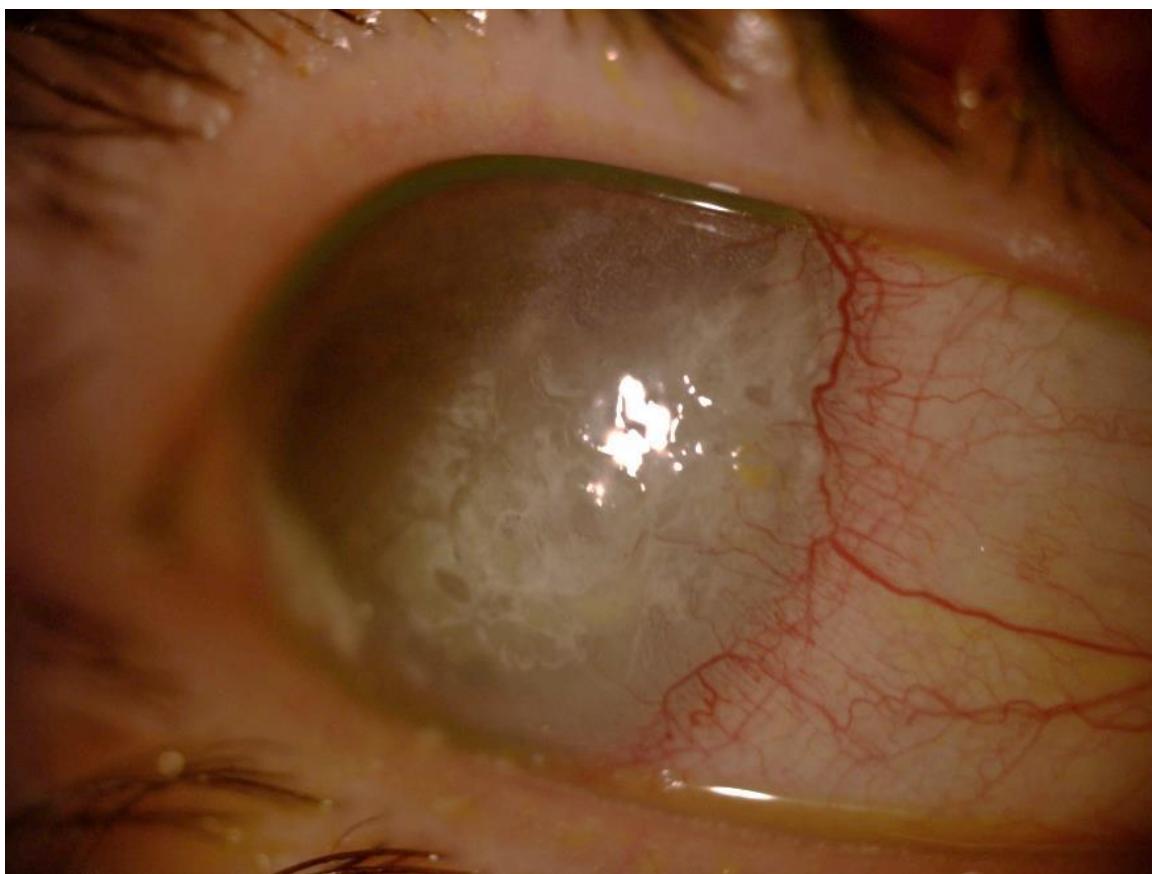
0.55% Cysteamine + IKERVIS =>  
STABLE, Photophobia decrease



SLO | En Face | Color Overlay |

Anti-VEGF injection increase the  
neovascularization of NeoVx



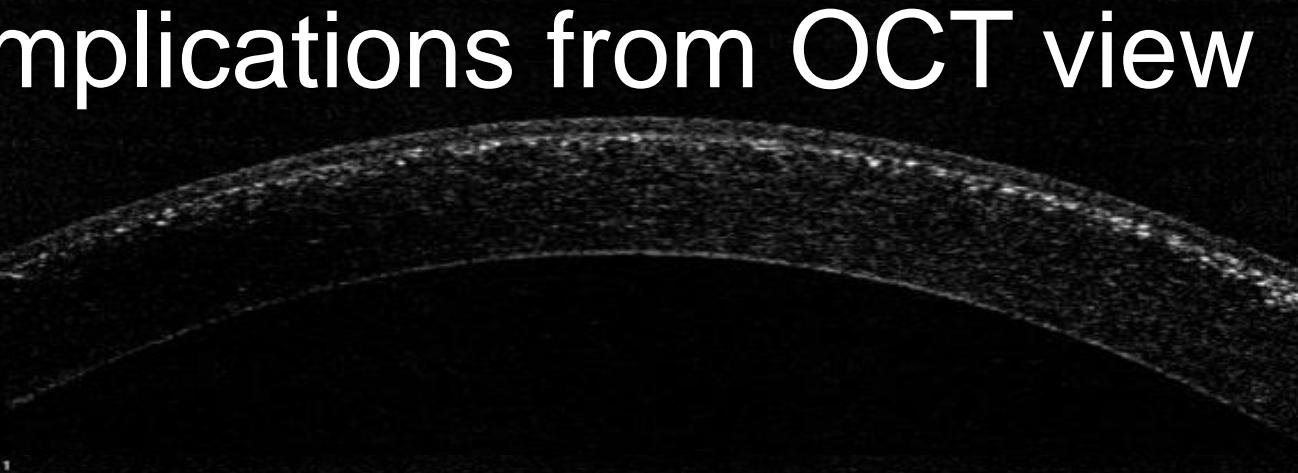


Images du Dr LIANG

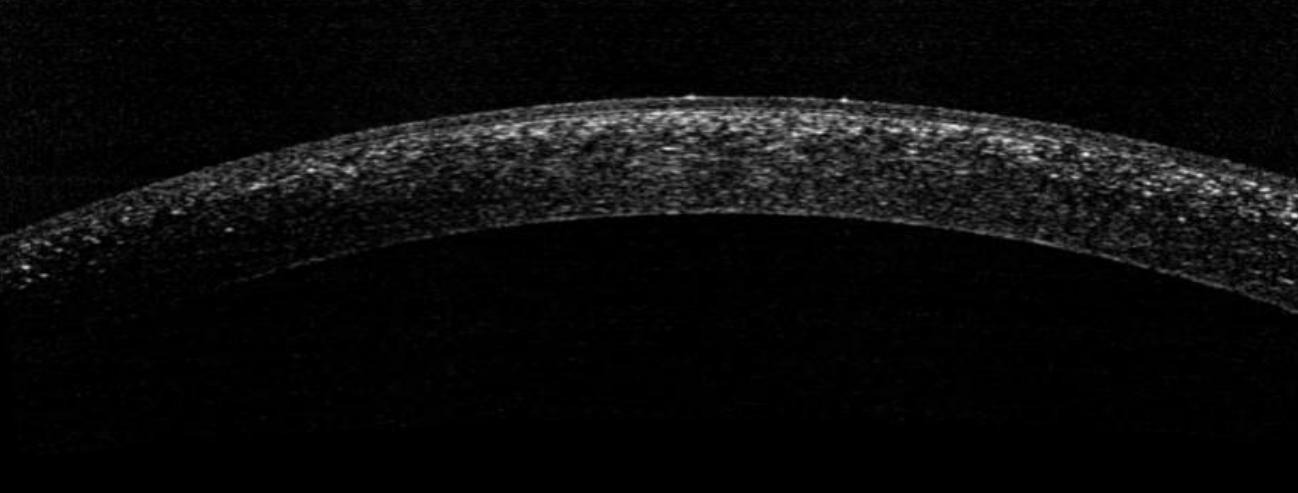
# Cornea complications from OCT view

years old

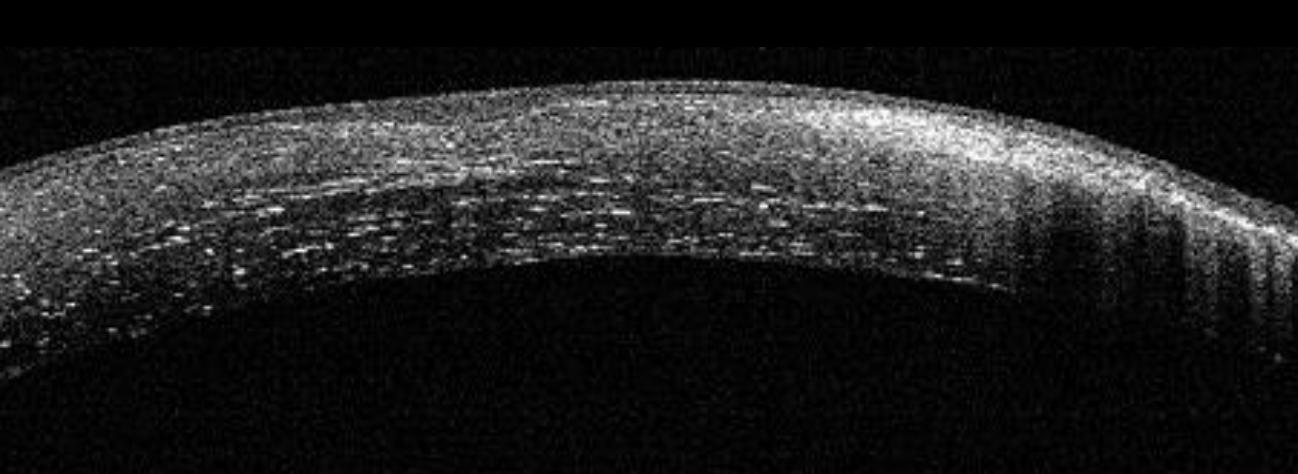
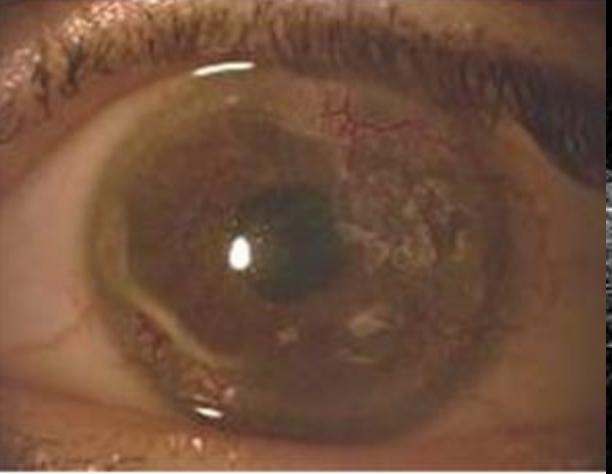
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10-20



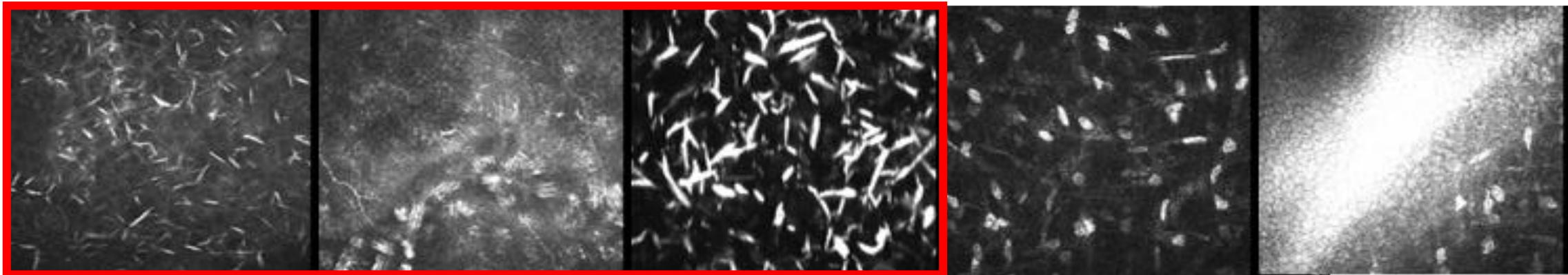
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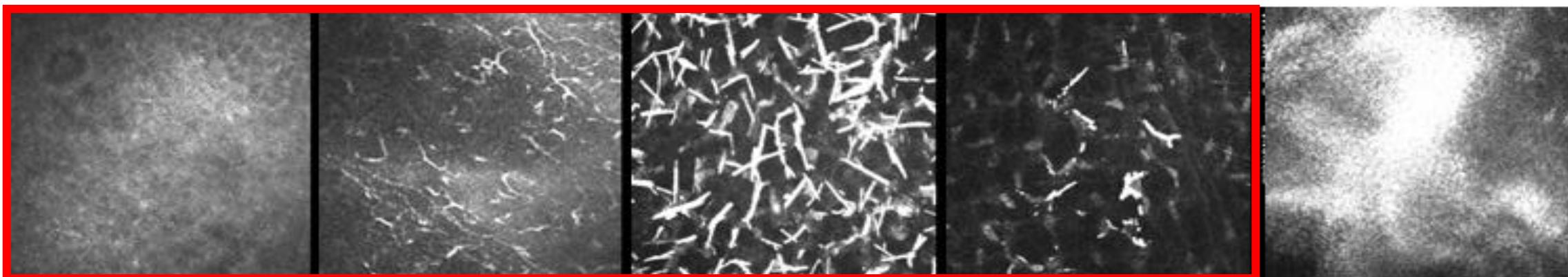
# Complications from IN VIVO CONFOCAL MICROSCOPY (IVCM) view

years old

<10



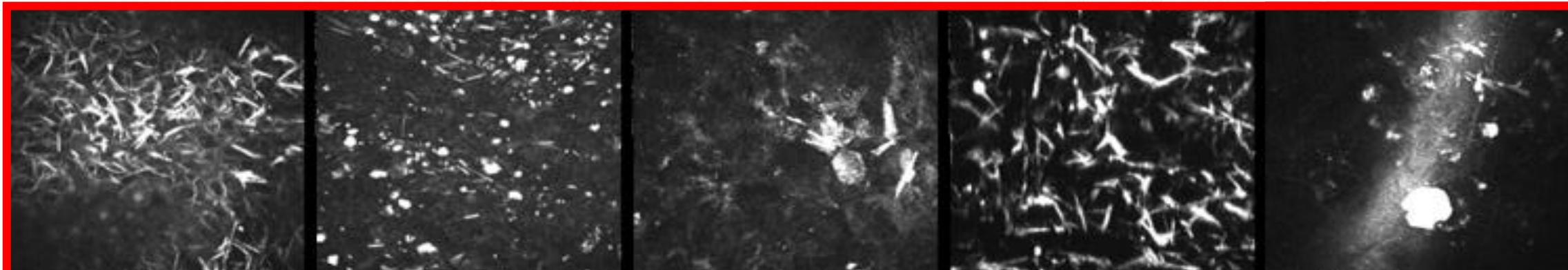
10-20



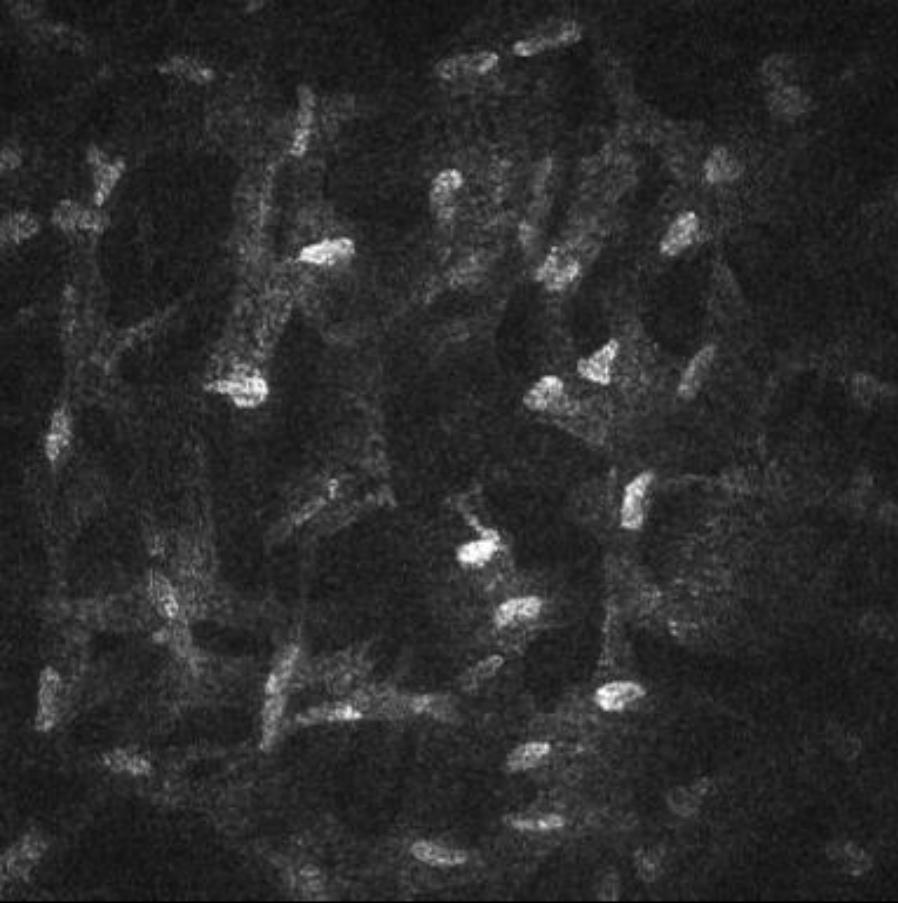
0μm

550μm

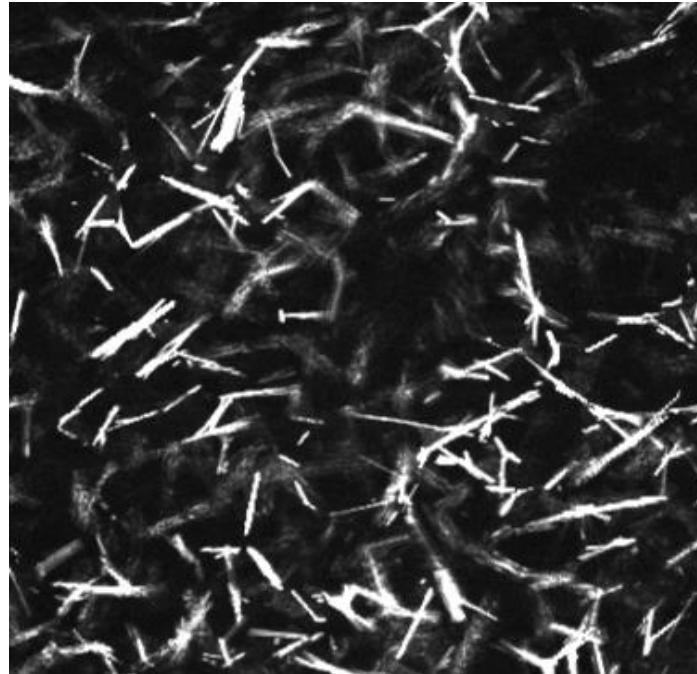
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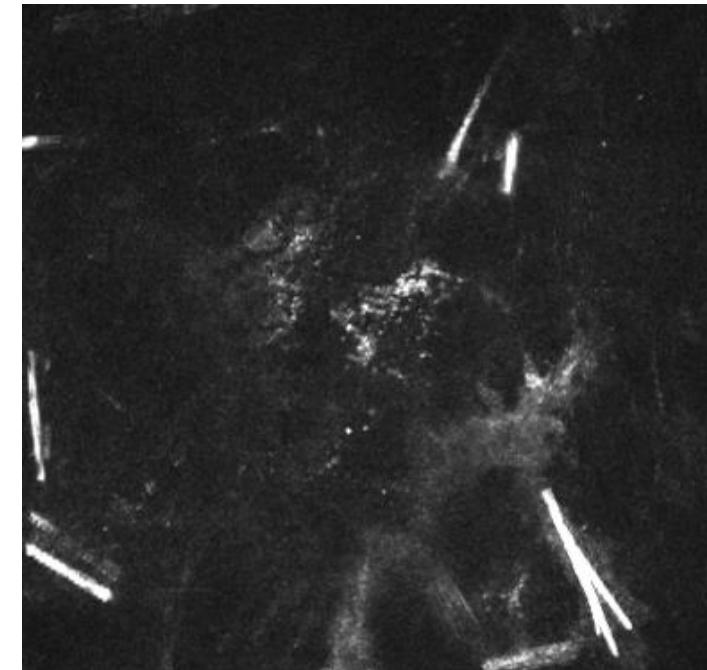
**Normal cells**



**Infiltration  
of crystals+++**

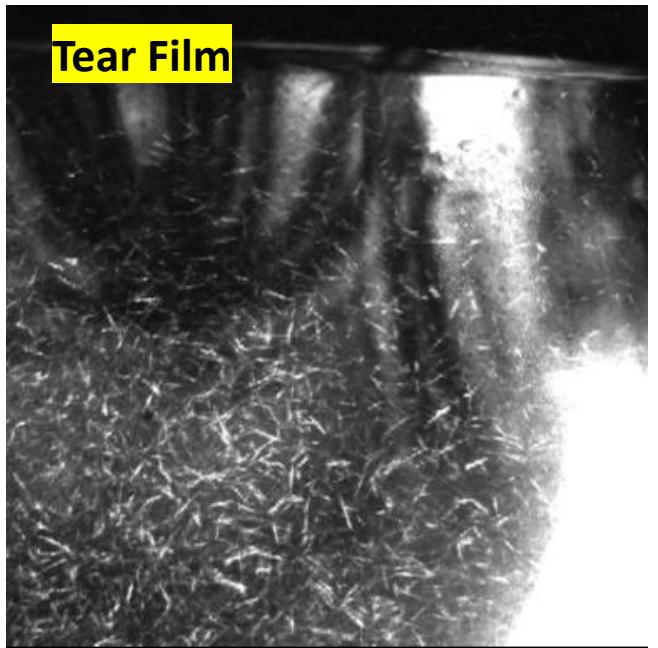


**Disappearance of normal  
cells and crystals**

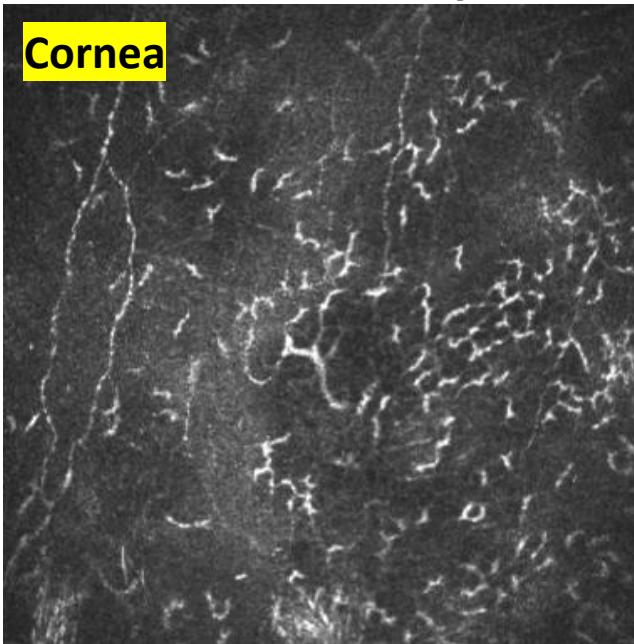


# **Crystals + Inflammatory Cells at all ocular surface**

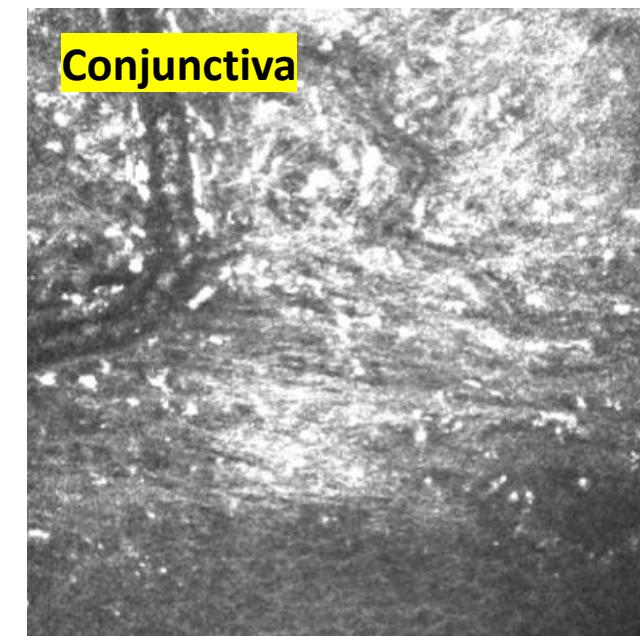
**Tear Film**



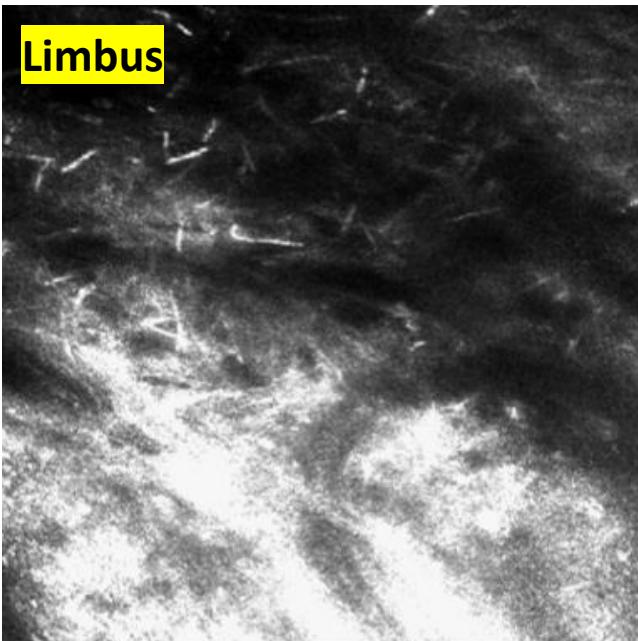
**Cornea**



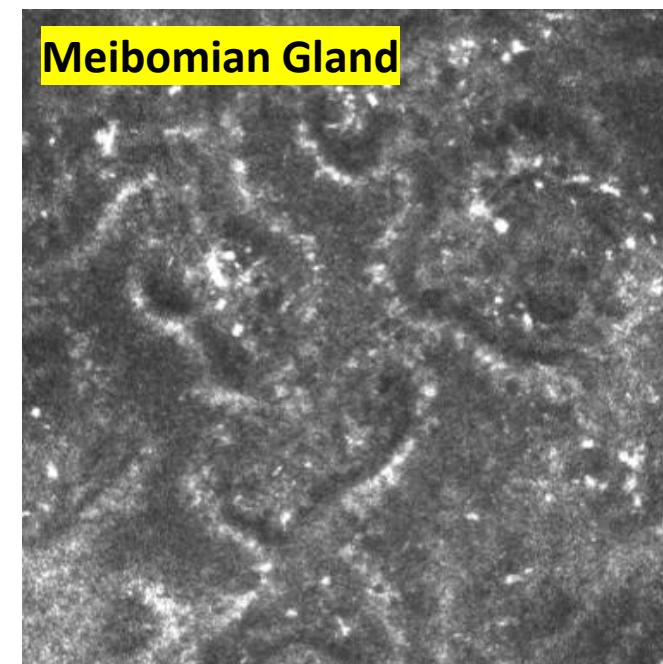
**Conjunctiva**



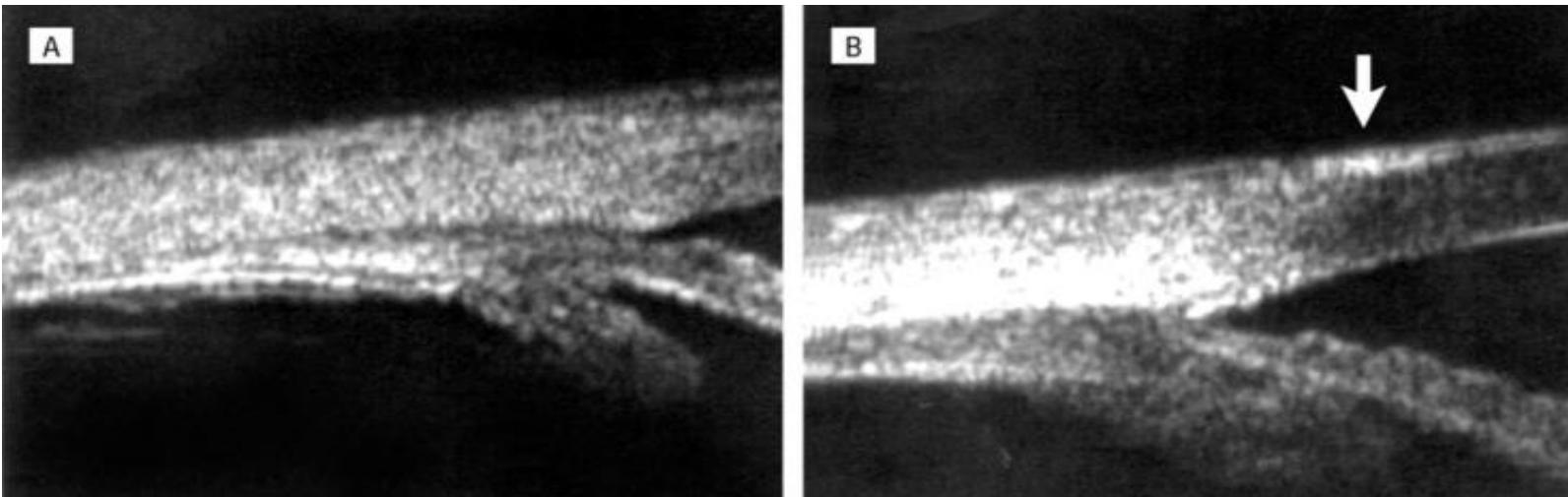
**Limbus**



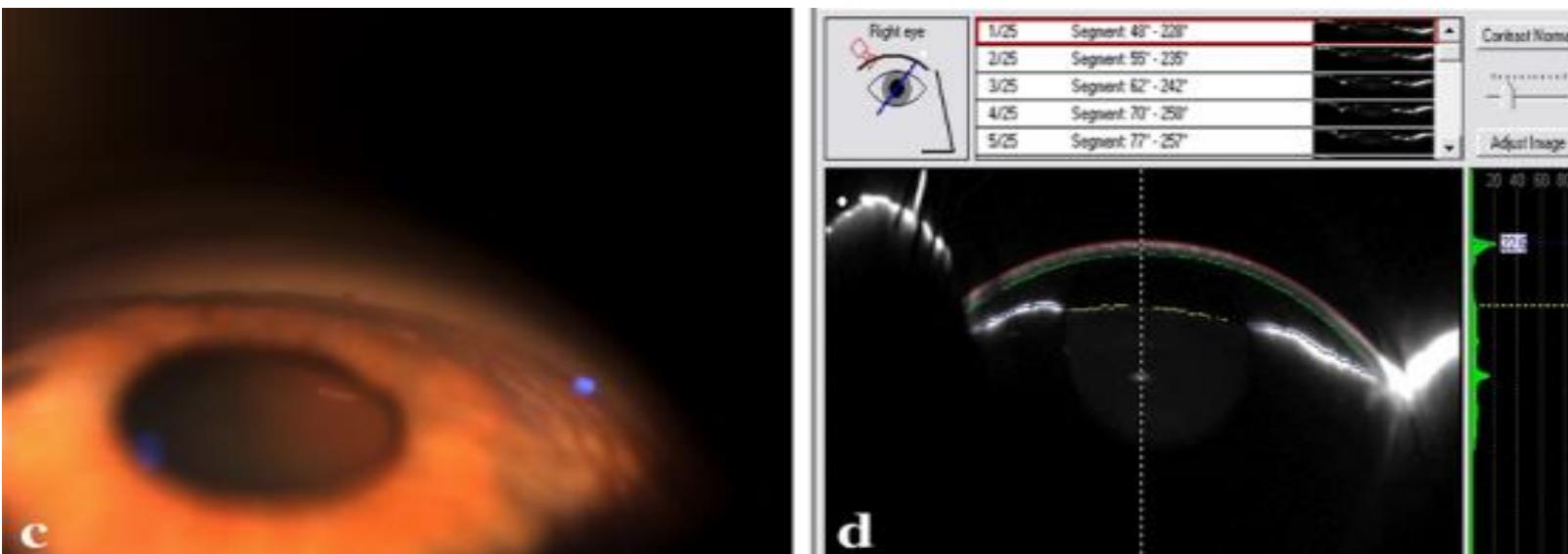
**Meibomian Gland**

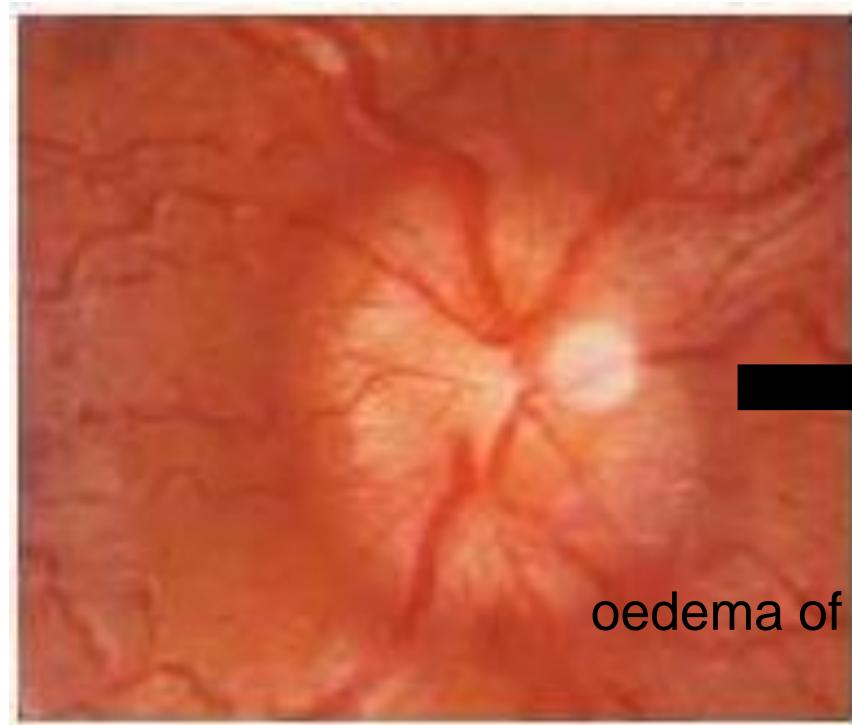


# Gonioscopy/UBM/OCT visante (iridocorneal angle)→ glaucoma

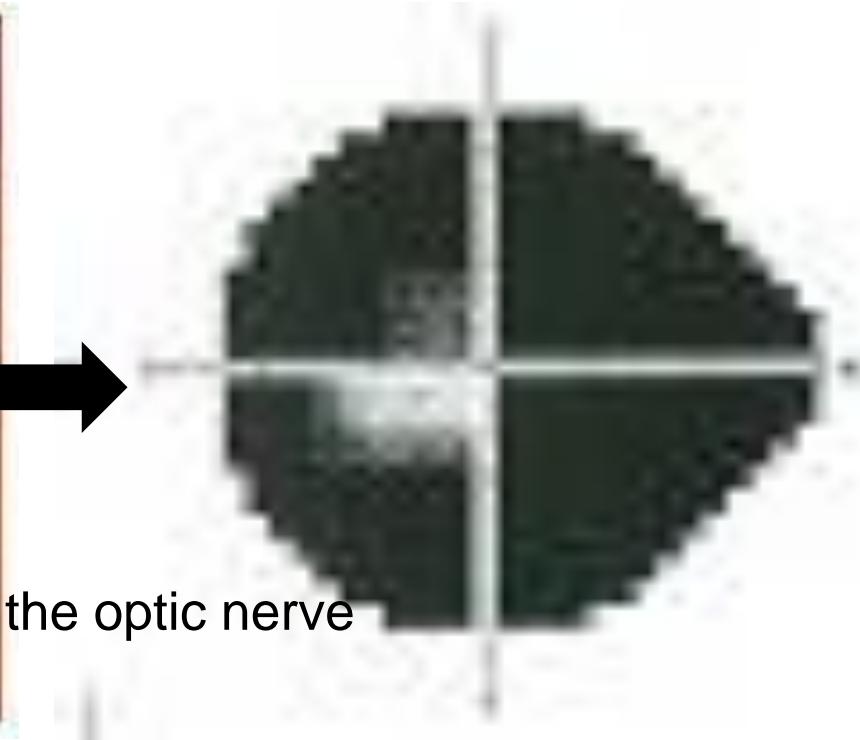


Mungan N\_2000 Arch Ophthalmol.;118(10):1329-1333.





oedema of the optic nerve



Pigmentary changes resembling  
Retinitis pigmentosa

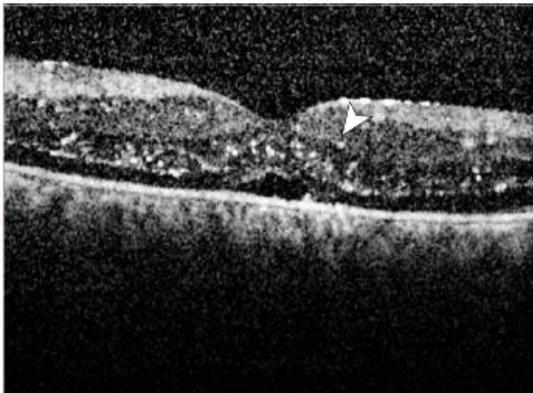
# Intraretinal Crystals in Nephropathic Cystinosis and Fanconi Syndrome

Igor Kozak, MD, PhD; J. Fernando Arevalo, MD; Samir S. Shoughy, MD, FRCS

A Slitlamp photograph



B Spectral-domain optical coherence tomography

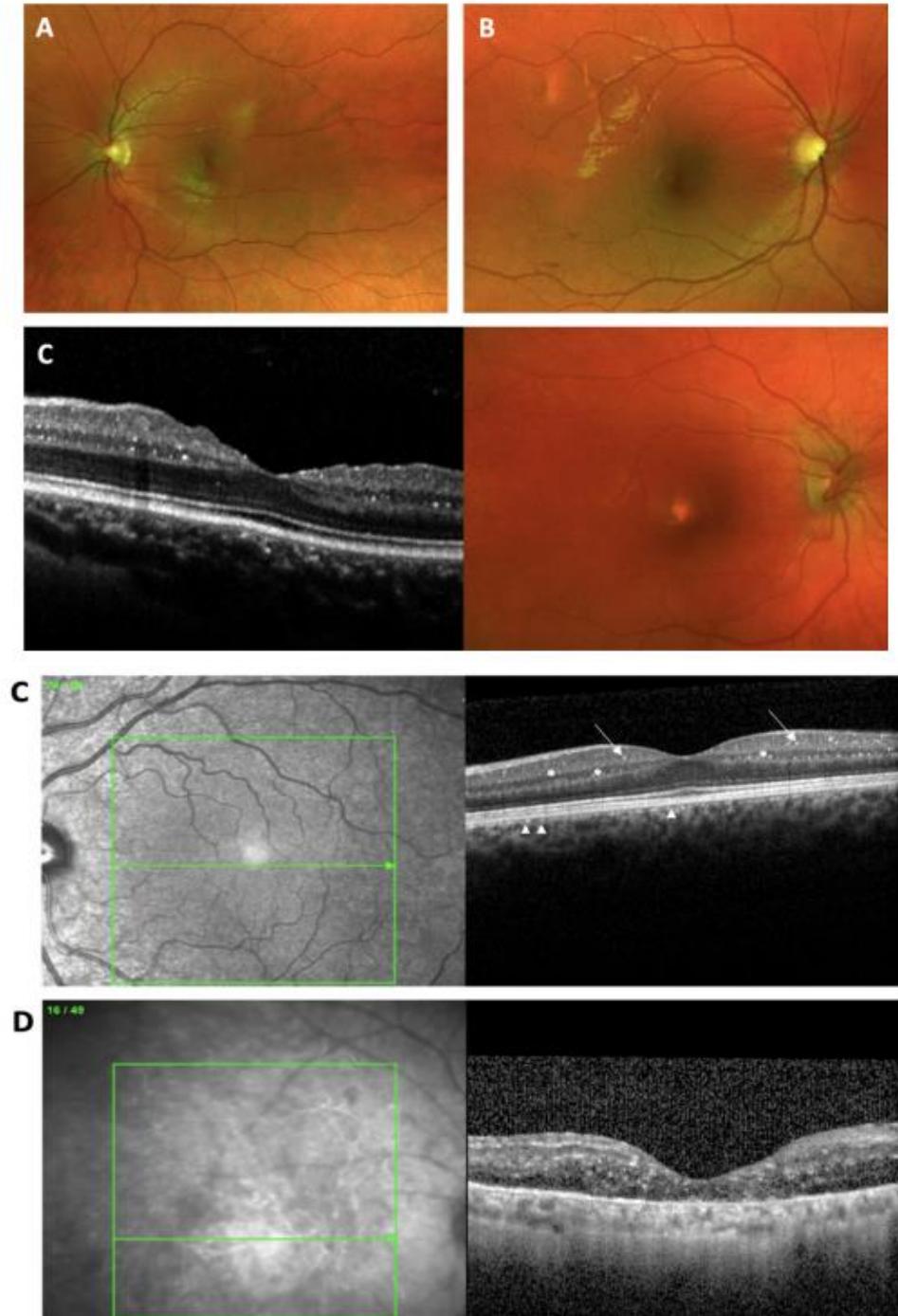


**Figure.** A, Slitlamp photograph shows corneal deposition of cystine crystals. B, Spectral-domain optical coherence tomography shows intraretinal deposition of cystine crystals (arrowhead).

## Clinical science

### Spectral domain optical coherence tomography-based retinochoroidal cystine crystal score: a window into infantile nephropathic cystinosis

Leonie Keidel <sup>1</sup>, Katharina Hohenfellner, <sup>2</sup> Benedikt Schworm, <sup>1</sup> Siegfried Priglinger, <sup>1</sup> Nikolaus Luft, <sup>1</sup> Claudia Priglinger <sup>1</sup>



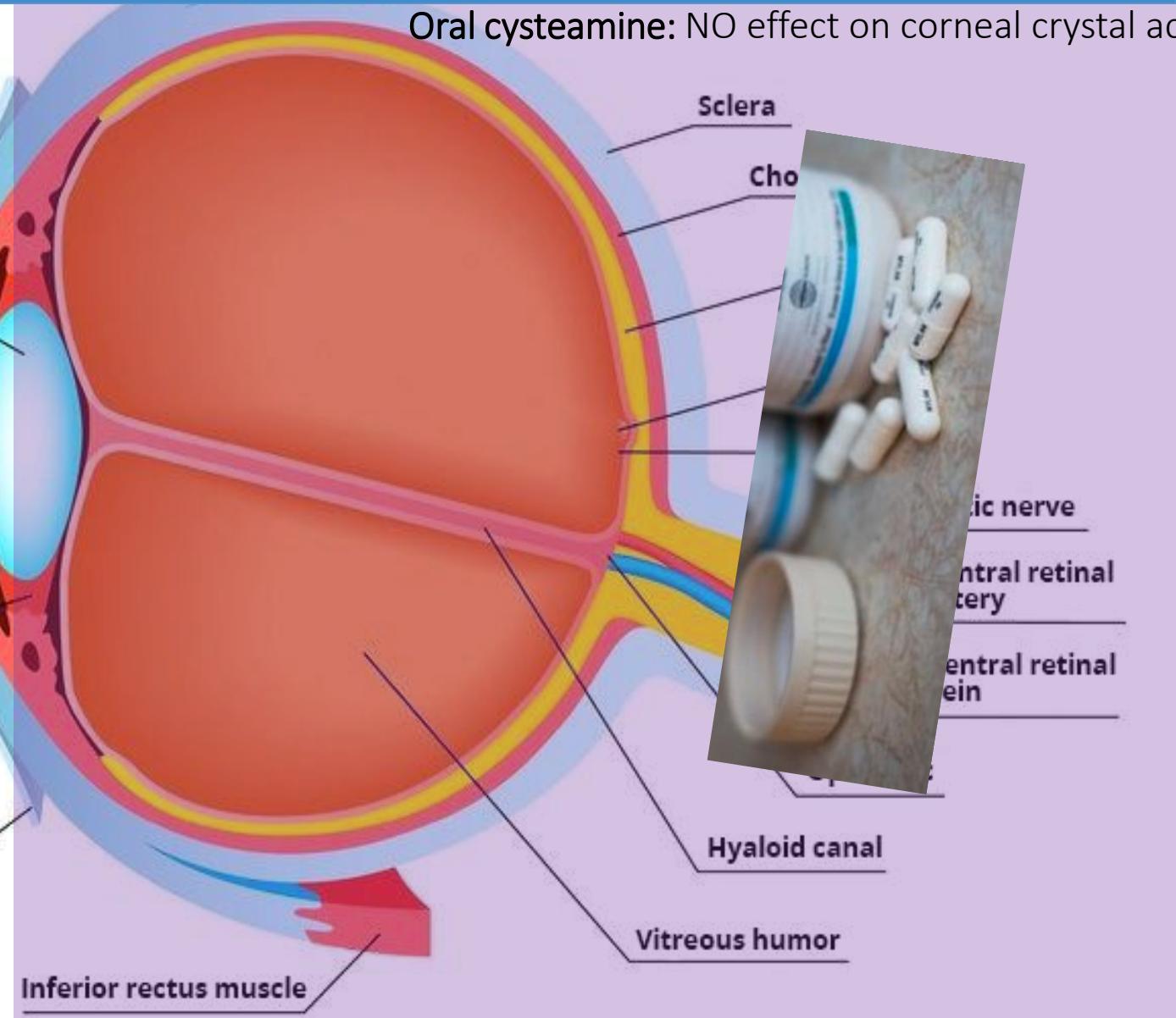
# Status of Eye Treatment

## Anterior Part



## Posterior Part

Oral cysteamine: NO effect on corneal crystal accumulation



# Recommendations for treatment of ocular cystosis

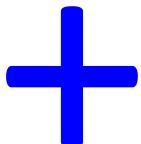
## 'Cystadrops®' (vCH 0.55%)

viscous solution (0.55% cysteamine hydrochloride):

Route of Administration	Dosage Form / Strength/Composition	Non-medicinal Ingredients
Ophthalmic	Eye drops viscous solution containing 3.8 mg / mL of cysteamine (0.37% w/w) equivalent to 0.55% (w/w) cysteamine hydrochloride*	Benzalkonium chloride (as preservative) Carmellose sodium Citric acid monohydrate Disodium edetate Hydrochloric acid (for pH adjustment) Sodium hydroxide (for pH adjustment) Water for injection

\*also known as mercaptamine hydrochloride

CYSTADROPS is supplied as a 5 mL sterile solution in a 10 mL amber glass vial closed by a bromobutyl stopper and sealed with an aluminium tear-off cap. A PVC dropper applicator with HDPE closure is packed separately and included in each carton box.



the only stable topical cysteamine treatment licensed in Europe

From 1 to 4 times per day

< 1 week DON'T keep longer

=> Instability

Ineffective

Infection

Anti-inflammatory agents  
Artificial tear  
Cyclosporine  
Anti-odema: ODM5

Surgery

EDTA + epithelium scrapping  
Cornea graft

# Clinical development in XV-XX Hospital for ‘Cystadrops®’

	OCT-1	CHOC	Post ATU	PASS
Study design	Phase I/II trial	Open-label, randomised, comparative parallel group Phase III trial	Long-term effects of ocular treatments ATU	Post Authorisation Study
Number	8	32	130	>70
Duration	4 years	3 months	4 years	5 years
Objective	Safety	Superiority of viscous CH formulation (vCH) 0.55% <i>versus</i> CH 0.10%	Cystadrops Safety	Safety Study

Clinical Trials

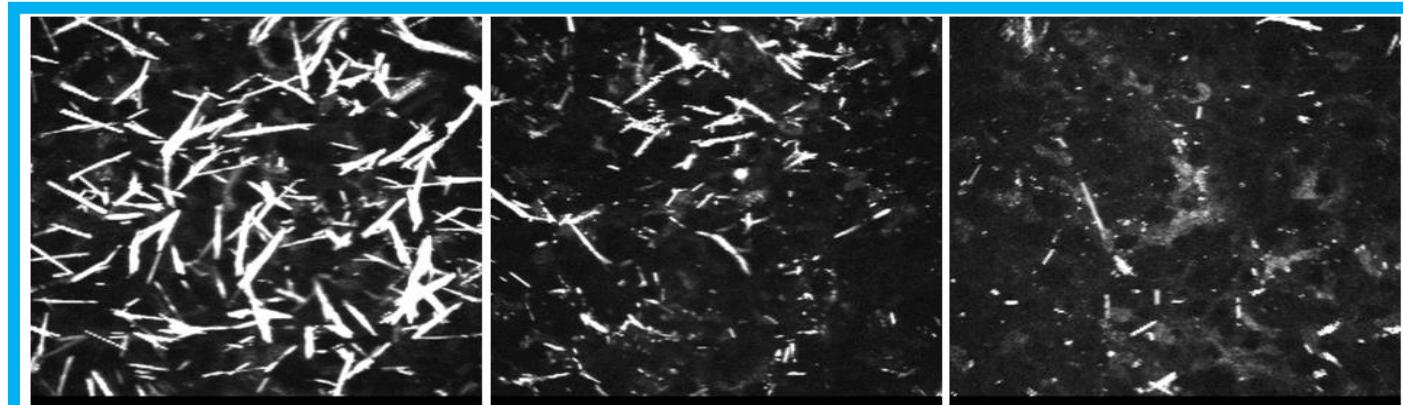
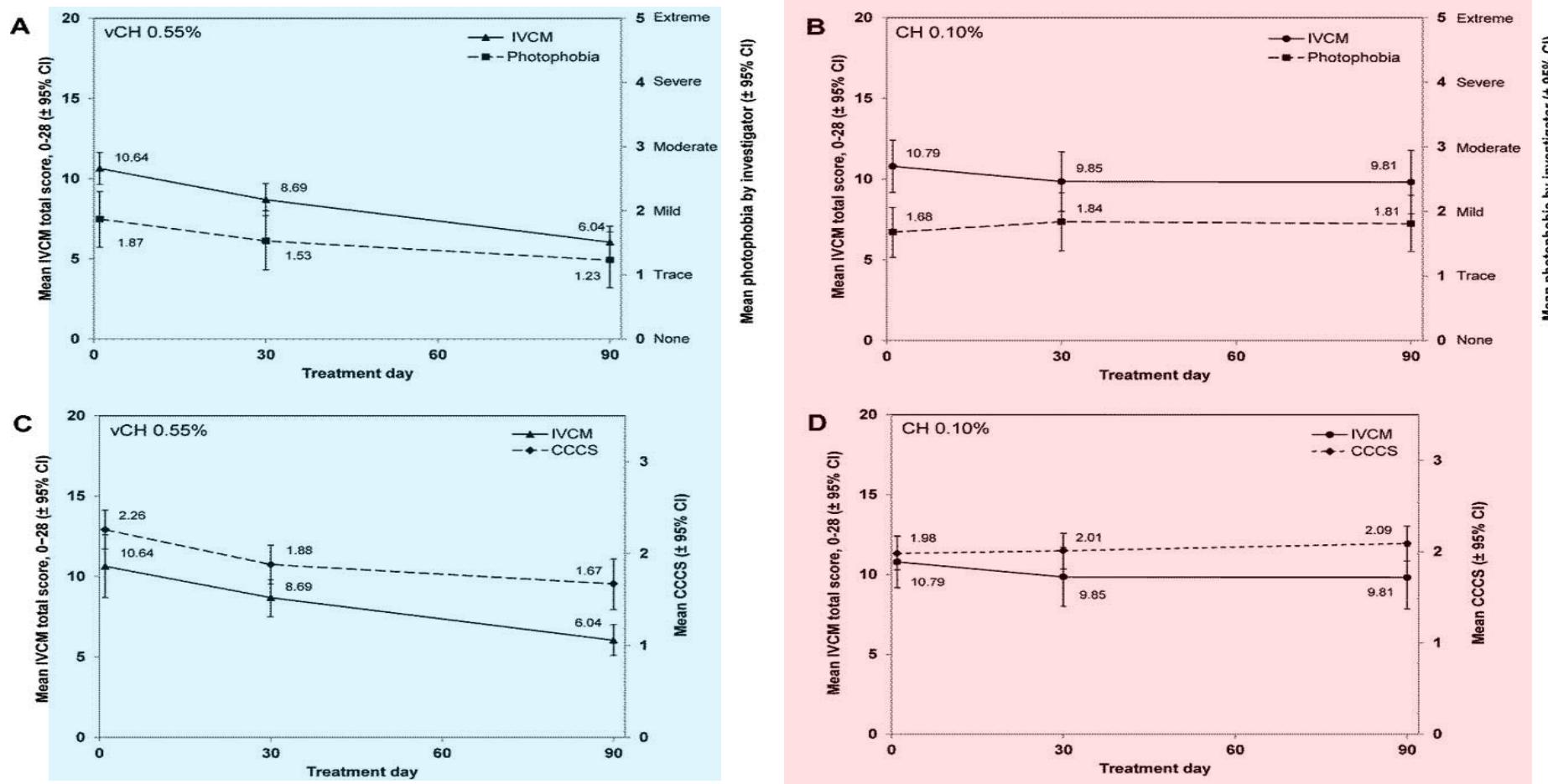
**A New Viscous Cysteamine Eye Drops Treatment for Ophthalmic Cystinosis: An Open-Label Randomized Comparative Phase III Pivotal Study**

Hong Liang,<sup>1</sup> Antoine Labb  ,<sup>1,2</sup> Jeannie Le Mouha  ,<sup>3</sup> C  line Plisson,<sup>3</sup> and Christophe Baudouin<sup>1,2</sup>

Clinical science

Long-term follow-up of cystinosis patients treated with 0.55% cysteamine hydrochloride

Hong Liang ,<sup>1</sup> Antoine Labb  ,<sup>1,2,3</sup> Christophe Baudouin,<sup>1,2,3</sup> C  line Plisson,<sup>4</sup> Vincenzo Giordano<sup>4</sup>



# Long-term effects of ocular treatments ATU More real life

Clinical science



## Long-term follow-up of cystinosis patients treated with 0.55% cysteamine hydrochloride

Hong Liang ,<sup>1</sup> Antoine Labbé,<sup>1,2,3</sup> Christophe Baudouin,<sup>1,2,3</sup> Celine Plisson,<sup>4</sup>  
Vincenzo Giordano<sup>4</sup>

2020 Jun 27;bjophthalmol-2020-316450.

⇒ ATU cohort included **130 cystinosis patients** in France

⇒ Treated by **0.55% Cysteamine in viscous solution**

⇒ From 24/09/2013 to 16/06/2017

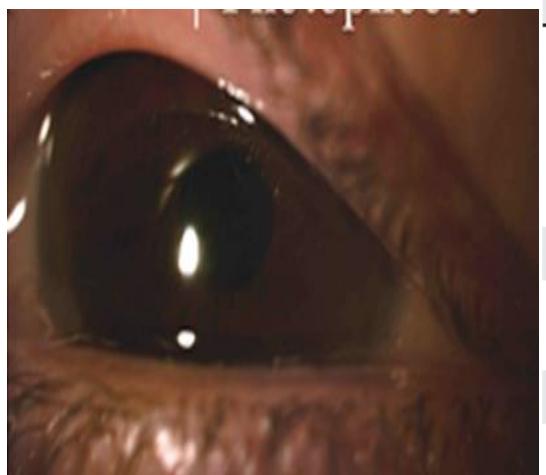
## Visual Acuity

**Table 3** Results of ophthalmic evaluations over the duration of treatment for patients with at least one follow-up visit (N=eyes)



	Duration of treatment								
	Start N=164	0–3 months N=30	3–9 months N=102	9–15 months N=64	15–21 months N=78	21–27 months N=58	27–33 months N=50	33–39 months N=34	39–45 months N=8
<b>Visual acuity: Log scale</b>									
N (missing)	148 (16)	26 (4)	94 (8)	64 (0)	78 (0)	58 (0)	50 (0)	34 (0)	8 (0)
Mean ( $\pm$ SD)	0.14 ( $\pm$ 0.31)	0.01 ( $\pm$ 0.19)	0.09 ( $\pm$ 0.28)	0.11 ( $\pm$ 0.34)	0.04 ( $\pm$ 0.16)	0.05 ( $\pm$ 0.19)	0.07 ( $\pm$ 0.16)	0.06 ( $\pm$ 0.14)	0.00 ( $\pm$ 0.00)
Median (range)	0.00 (−0.15–2.00)	0.00 (−0.25–0.50)	0.00 (−0.25–1.00)	0.00 (−0.25–1.30)	0.00 (−0.20–0.70)	0.00 (−0.10–1.30)	0.00 (0.00–1.00)	0.00 (0.00–0.70)	0.00 (0.00–0.00)

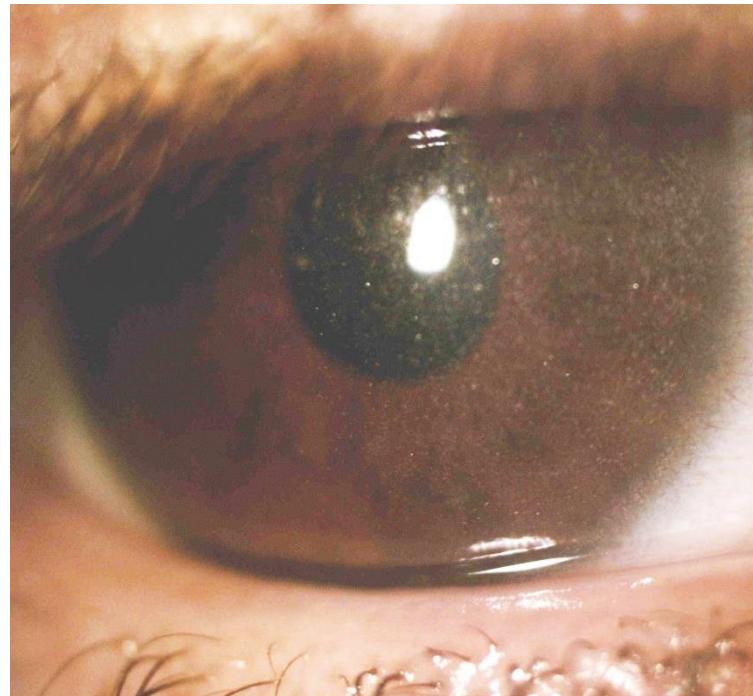
**Table 3** Results of ophthalmic evaluations over the duration of treatment for patients with at least one follow-up visit (N=eyes)



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<b>Photophobia</b>									
N (missing)	160 (4)	28 (2)	96 (6)	61 (3)	74 (4)	51 (7)	48 (2)	34 (0)	8 (0)
Mean (SD)	2.19 ( $\pm$ 1.34)	1.46 ( $\pm$ 0.92)	1.77 ( $\pm$ 1.22)	1.64 ( $\pm$ 1.24)	1.70 ( $\pm$ 1.33)	1.51 ( $\pm$ 1.04)	2.17 ( $\pm$ 1.33)	1.53 ( $\pm$ 1.05)	1.75 ( $\pm$ 0.89)
Median	2.00	1.00	2.00	2.00	2.00	1.00	2.00	1.00	1.50
Range	0–5	0–4	−0–5	0–4	0–5	0–5	0–5	0–3	1–3

**Table 3** Results of ophthalmic evaluations over the duration of treatment for patients with at least one follow-up visit (N=eyes)

Duration of treatment								
Start N=164	0–3 months N=30	3–9 months N=102	9–15 months N=64	15–21 months N=78	21–27 months N=58	27–33 months N=50	33–39 months N=34	39–45 months N=8
<b>Cystinosis Corneal Crystal Score (CCCS)</b>								
N (missing)	120 (44)	29 (1)	88 (14)	55 (9)	70 (8)	51 (7)	48 (2)	34 (0)
Mean (SD)	2.19 ( $\pm 0.64$ )	2.19 ( $\pm 0.75$ )	1.99 ( $\pm 0.77$ )	1.91 ( $\pm 0.77$ )	1.84 ( $\pm 0.89$ )	2.01 ( $\pm 0.82$ )	1.87 ( $\pm 0.76$ )	1.84 ( $\pm 0.79$ )
Median	2.00	2.25	2.00	2.00	2.00	2.00	2.00	1.13
Range	0.5–3.0	0.5–3.0	0.00–3.0	0.25–3.0	0.00–3.0	0.50–3.0	0.25–3.0	0.50–2.25

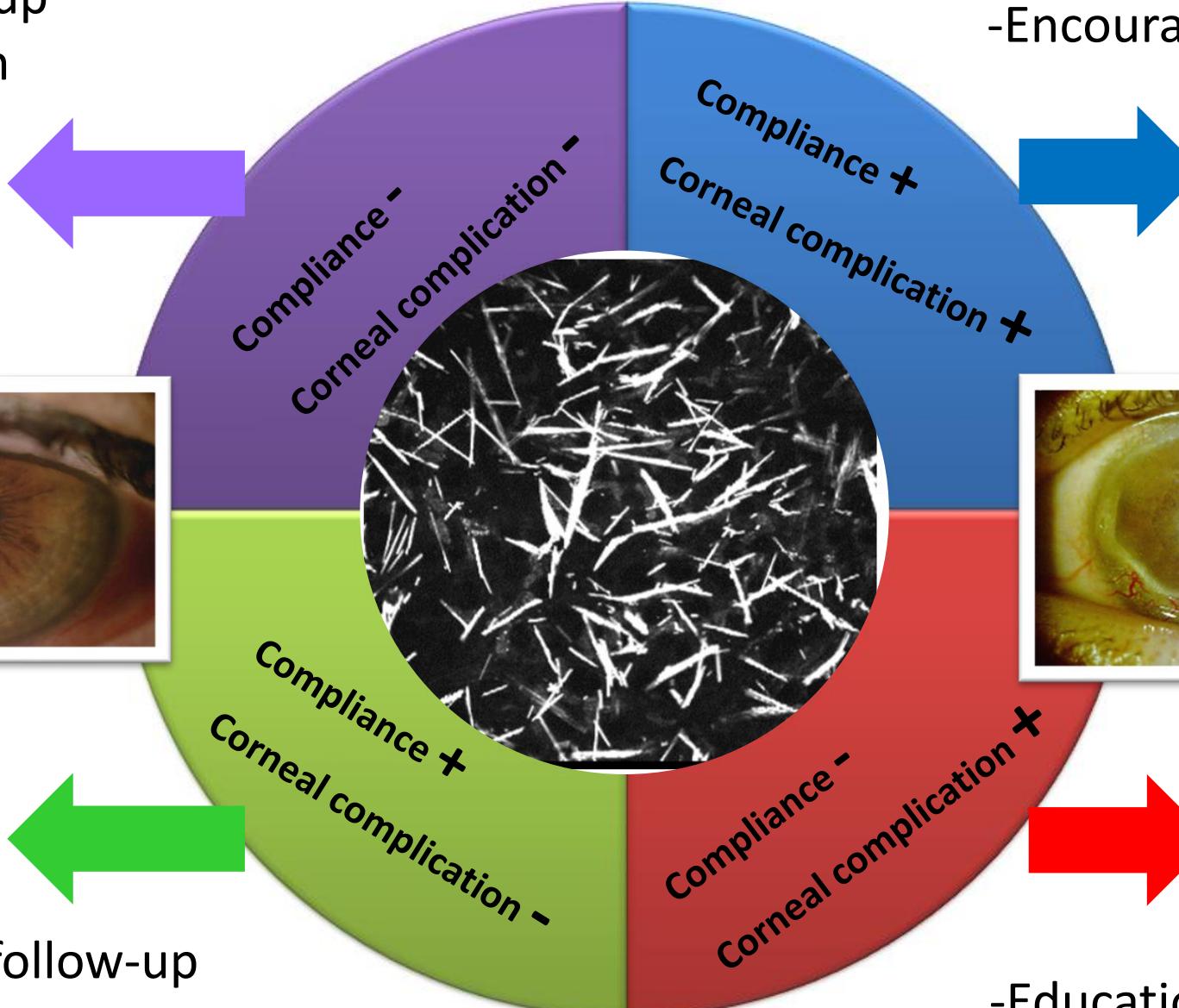


# Side effects among 130 patients

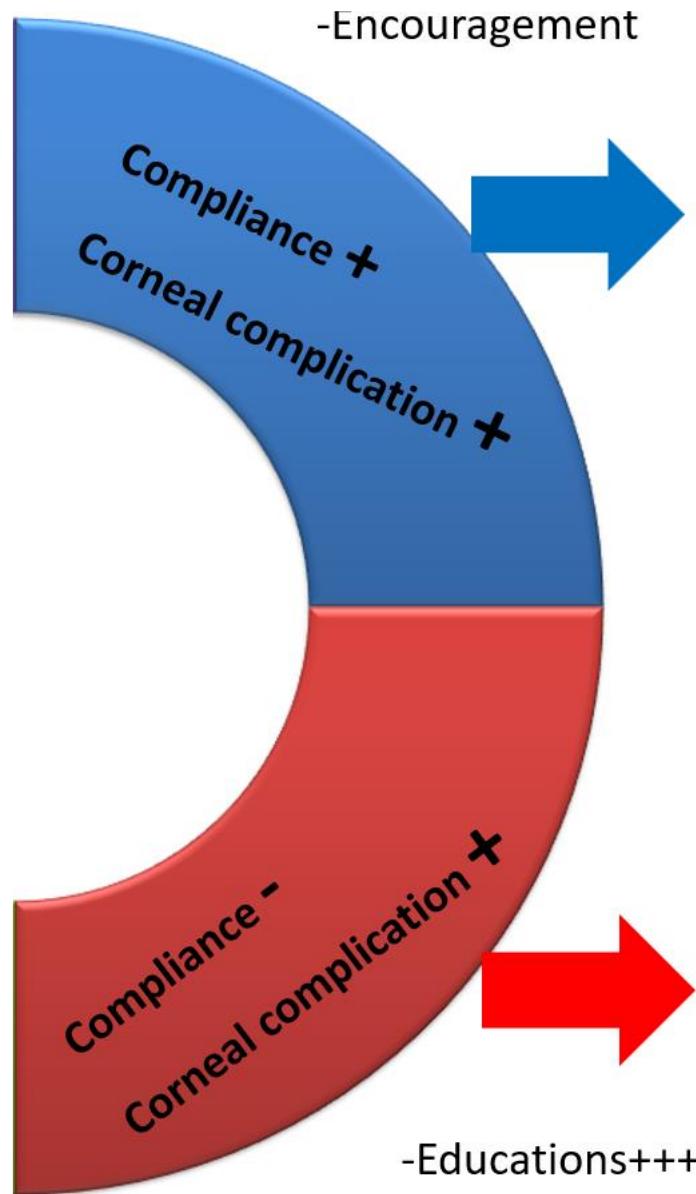
Preferred term	Patients (%)	Corneal crystal	Inflammation	Cornea Nerves damages	Preservative (Benzalkonium)
Eye irritation (burning)	13 (10)	→	++	++	++
Eye pain (tingling, itchy)	7 (5.4)		+++	++	+
Blurry vision	4 (3.1)	→	++	+	
Ocular hyperaemia	3 (2.3)		++	++	+
Keratitis	1 (0.8)	→	+++	++	++
Ulcerative keratitis	1 (0.8)	+	+++	++	++
Eye deposit	2 (1.5)	→	++	++	
Increased lacrimation	1 (0.8)		++	++	
Itching of the eye	1 (0.8)	→	++	+++	+++
Dry eye	1 (0.8)		+++	++	+++
Glare	1 (0.8)	→	++	++	++
Ocular discomfort (cornea)	1 (0.8)		+++	+	++
Ocular discomfort	1 (0.8)	→	++	++	++
Discomfort at instillation site	3 (2.3)		+++	++	+++

# Clinical practice experiences

Close follow-up  
Visit/6 month  
Education



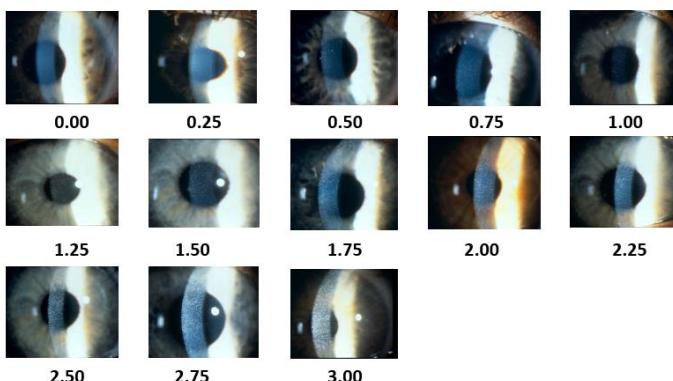
-Visit frequency++  
-Complementary examinations (OCT, Visual Fields, etc)



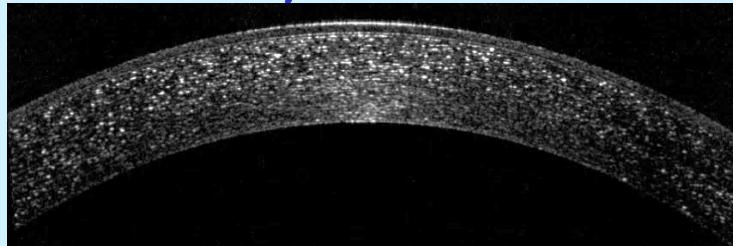
# Difficulties and Challenges

- Prescription of eyeglasses,  
Astigmatism++
- Contact lens?
- Difficult to support eyedrops (cystadrops)  
+ other eyedrops, too many eyedrops
- Severe cornea complications  
=>psychological problems and depression

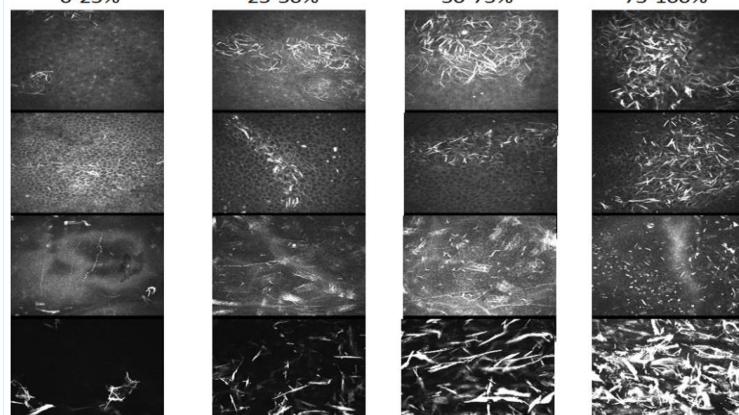
## 1. Gahl Score 0-3



## 2. OCT cystinosis 0-100%



## 3. IVCM score 0-28



# Multimodal imaging system

## Ant Segment

1.Gahl Score

2.OCT  
(+/-Angio-OCT)

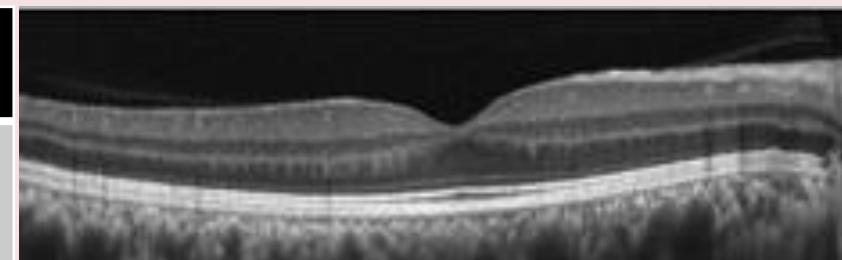
3.IVCM

## Post Segment

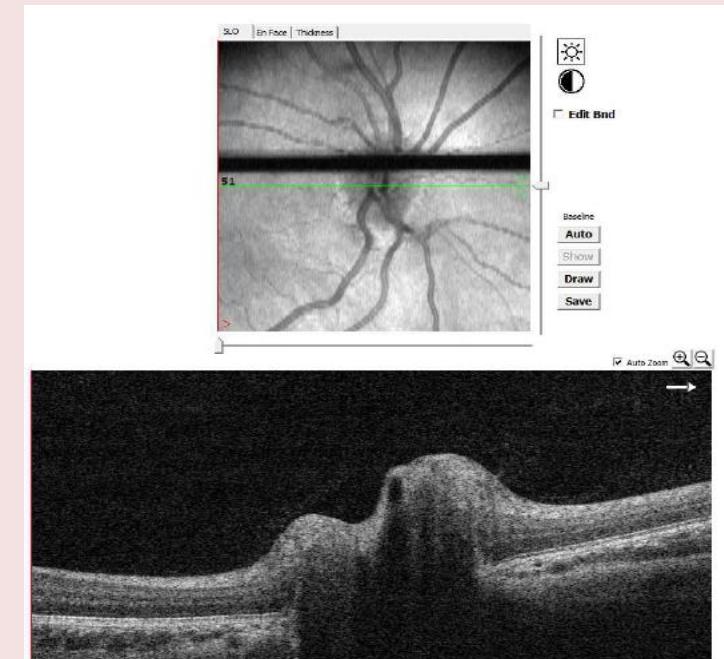
4.Macula

5.Optic nerve

## 4. OCT Macula



## 5. OCT optic nerve

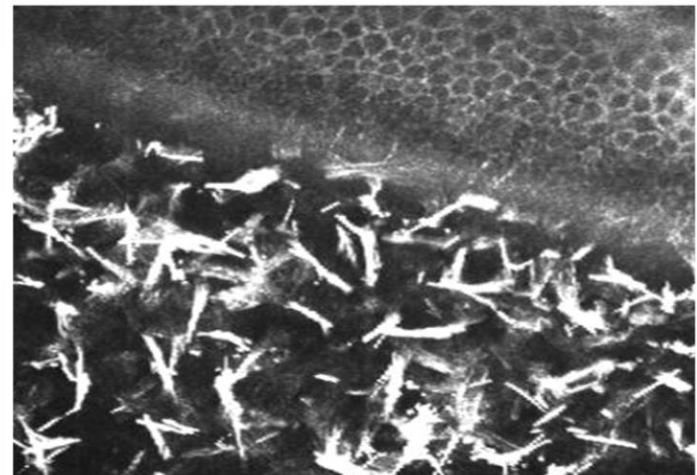
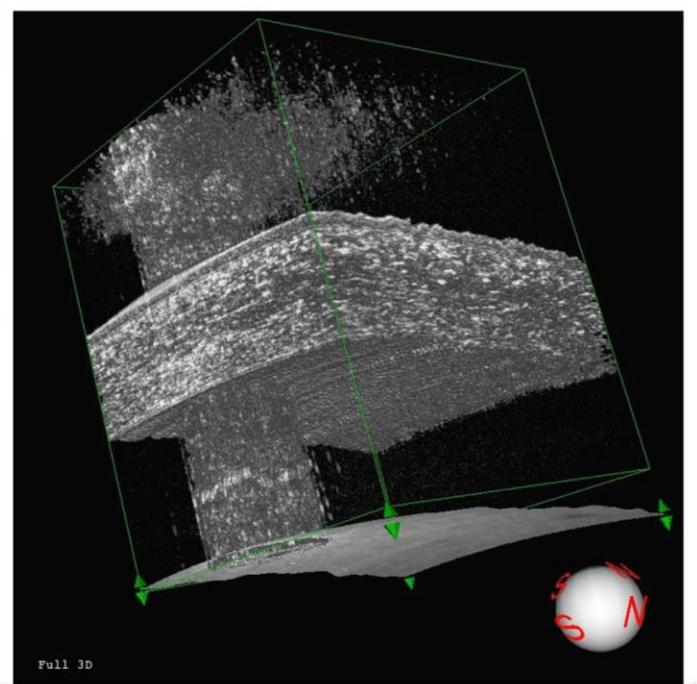


1. Gahl Score 0-3  
1.75 without cornea complications

2. OCT cystinosis 0-100%  
38%

3. IVCM score 0-28  
8/28

## Multimodal imaging system



4. OCT Macula  
No Edema

5. OCT optic nerve  
No Edema  
No drusen

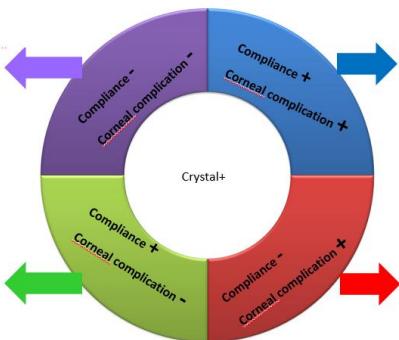
# Conclusions

## Eye complications in cystinosis



- Physiopathology: vicious cycle
- Cornea complications: don't forget inflammation and nerve damage
- Take in charge of all ocular structures including glaucoma and retina complications

John	23/06/2017
MORNING	AFTERNOON
EVENING	NIGHT



## Status of eye treatment

- Cysteamine + anti-inflammatory/Cyclosporine/anti-edema treatments
- Real life: the balances of efficacy and tolerance
- Despite of the clinical challenges, need new therapeutic strategies=>



**Already existed**

**-Cysteamine containing contact lens**

**=> Bad compliance patients**

**-Genetic therapy**

**=> No eye drops**



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*Research paper*

**Feasibility of corneal drug delivery of cysteamine using vitamin E modified silicone hydrogel contact lenses**

Kuan-Hui Hsu <sup>a</sup>✉, Richard C. Fentzke <sup>b</sup>✉, Anuj Chauhan <sup>a</sup>✉



*Review*

**Hematopoietic Stem Cell Gene Therapy for Cystinosis: From Bench-to-Bedside**

Stephanie Cherqui



*Thank you!*