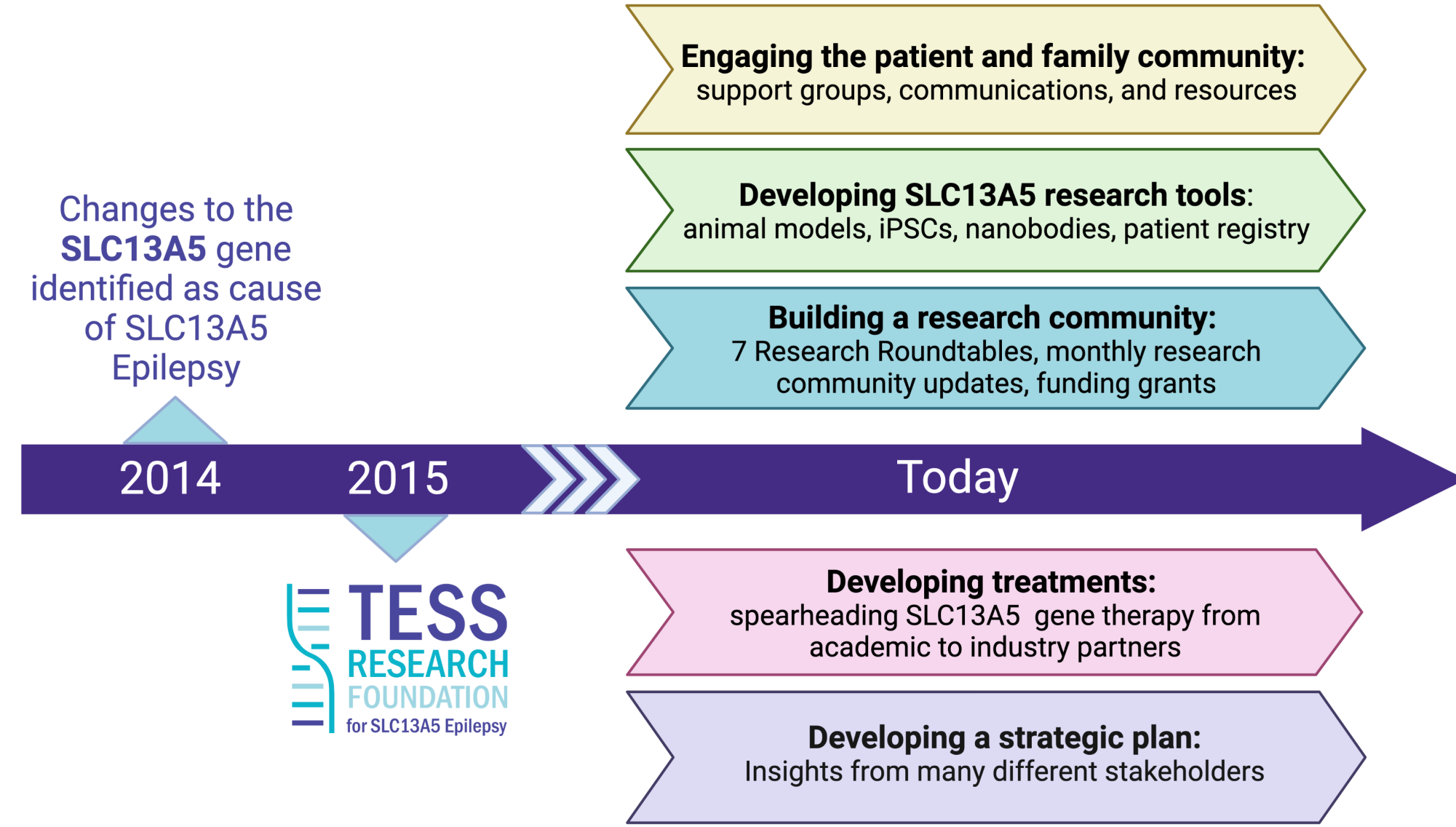


# The growing research toolbox for SLC13A5 Citrate Transporter Disorder: a rare disease with animal models, cell lines, and an ongoing Natural History Study.

Tanya L. Brown<sup>1</sup>, Rayann Solidum<sup>2</sup>, Carrie Best<sup>3</sup>, Sydney Cooper<sup>4</sup>, Lindsay Okamoto<sup>1</sup>, Emily Hsu<sup>1</sup>, Kimberly L. Nye<sup>1</sup>, Kimberly Goodspeed<sup>4</sup>, Judy Liu<sup>3</sup>, Brenda E. Porter<sup>2</sup>  
<sup>1</sup>TESS Research Foundation, <sup>2</sup>Stanford University, <sup>3</sup>UT Southwestern, <sup>4</sup>Brown University  
 tessresearch.org

## TESS Research Foundation: the only organization dedicated to SLC13A5 Citrate Transporter Disorder

- Our mission is to improve the lives of those impacted by SLC13A5 Epilepsy, a citrate transporter disorder, through research and community



## What does SLC13A5 Citrate Transporter Disorder look like?

**A. SLC13A5 Citrate Transporter Disorder affects multiple body regions**

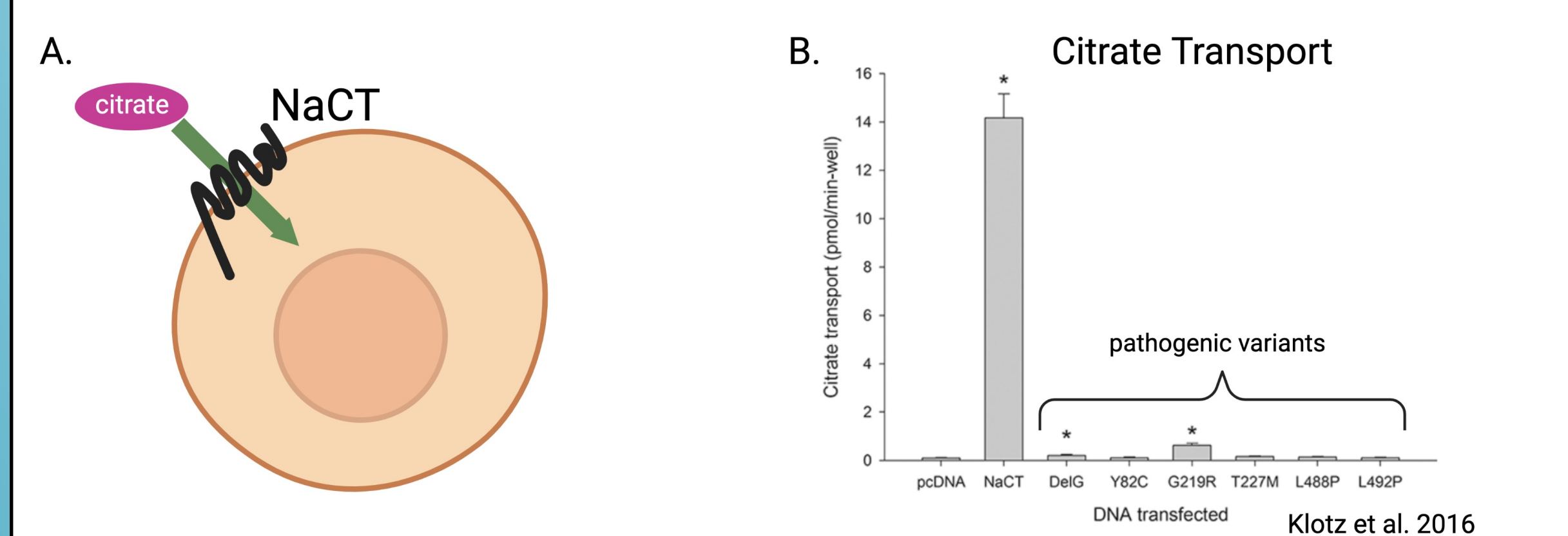
- Brain:** Seizures, Developmental delay
- Tooth abnormalities:** Weak enamel, Trouble eating
- Talking:** Limited verbal communication, Poor oral motor (drooling)
- Fine motor skills:** Trouble grasping objects
- Movement disorder:** Trouble balancing, standing & walking, Low tone
- General:** Need help toileting, dressing & daily needs, Trouble sleeping

**B. Affects boys and girls of all races and ethnicities**

**C. Monogenic with autosomal recessive inheritance**

- An ultra-rare disorder that affects many aspects of daily life
- Patients need 24-hour care
- Patients have trouble eating, walking, talking, and sleeping
- Current standards of care are anti-seizure medications; *there are no treatments that address the underlying cause*

## SLC13A5 codes for the protein NaCT: a protein that transports citrate into the cell



SLC13A5 encodes the NaCT protein, a sodium-dependent citrate transporter. NaCT moves citrate from the extracellular fluid into a cell.

All known SLC13A5 variants are loss of function and cause a loss of citrate transport. Currently, there are ~54 known SLC13A5 different variants from the TESS Research Foundation patient registry.

## Engaging the SLC13A5 patient and family community: Supporting families and staying patient-centered

**Staying patient-centered**

- Providing support and community:** Monthly support groups, Family-only Facebook groups, Letters of support for insurance, school, resources.
- Empowering with scientific literacy and resources:** A blog that breaks down scientific topics, Family newsletters, Resource sharing on social media, Sharing patient/family stories.
- Prioritizing the patient voice:** Inviting families to participate at conferences, Asking for feedback: surveys of needs and requests.

## Multiple SLC13A5 research tools exist

| Model     | General Description               | Summary  |
|-----------|-----------------------------------|--|
| Mouse     | Global KO; C57Bl/6J               | Global loss of SLC13A5 leads to protection from metabolic phenotypes, similar to animals undergoing calorie restriction. KO mice exhibit seizure activity starting at 7 weeks of age, no obvious behavioral phenotype, and elevated citrate levels in the CSF <sup>1,2</sup> |
| Mouse     | cKO; slc13a5 <sup>fl/fl</sup>     | Ongoing studies are investigating the conditional loss of SLC13A5 in various tissues <sup>3</sup>  |
| Mouse     | Humanized G219R mouse             | Human SLC13A5 with most common mutation inserted into endogenous mouse locus, uncharacterized  |
| Mouse     | SLC13A5 overexpression            | Autistic-like behaviors, poor white matter integrity <sup>4</sup>  |
| Zebrafish | slc13a5a/slc13a5b crispants (LOF) | Ongoing characterization, unpublished 4 alleles available, uncharacterized   |
| Flies     | Indy (I'm not dead yet)           | Mutations in Indy improve metabolism in a similar manner to calorie restriction and increase life span <sup>5</sup>  |

| Model      | Description  |
|------------|--|
| iPSC lines | TESS funded the development of patient- and carrier-derived iPSC lines. The iPSC line with the most common mutation (G219R) also has an isogenic control line. |
| NPCs       | Neural Precursor Cell lines were derived from patient-derived iPSC lines.  |
| Plasmids   | Gateway entry clones with codon-optimized ORF sequence for SLC13A5.  |

## Building a collaborative research community

**A. 7 Research Roundtables with researchers, clinicians, patients, and industry**

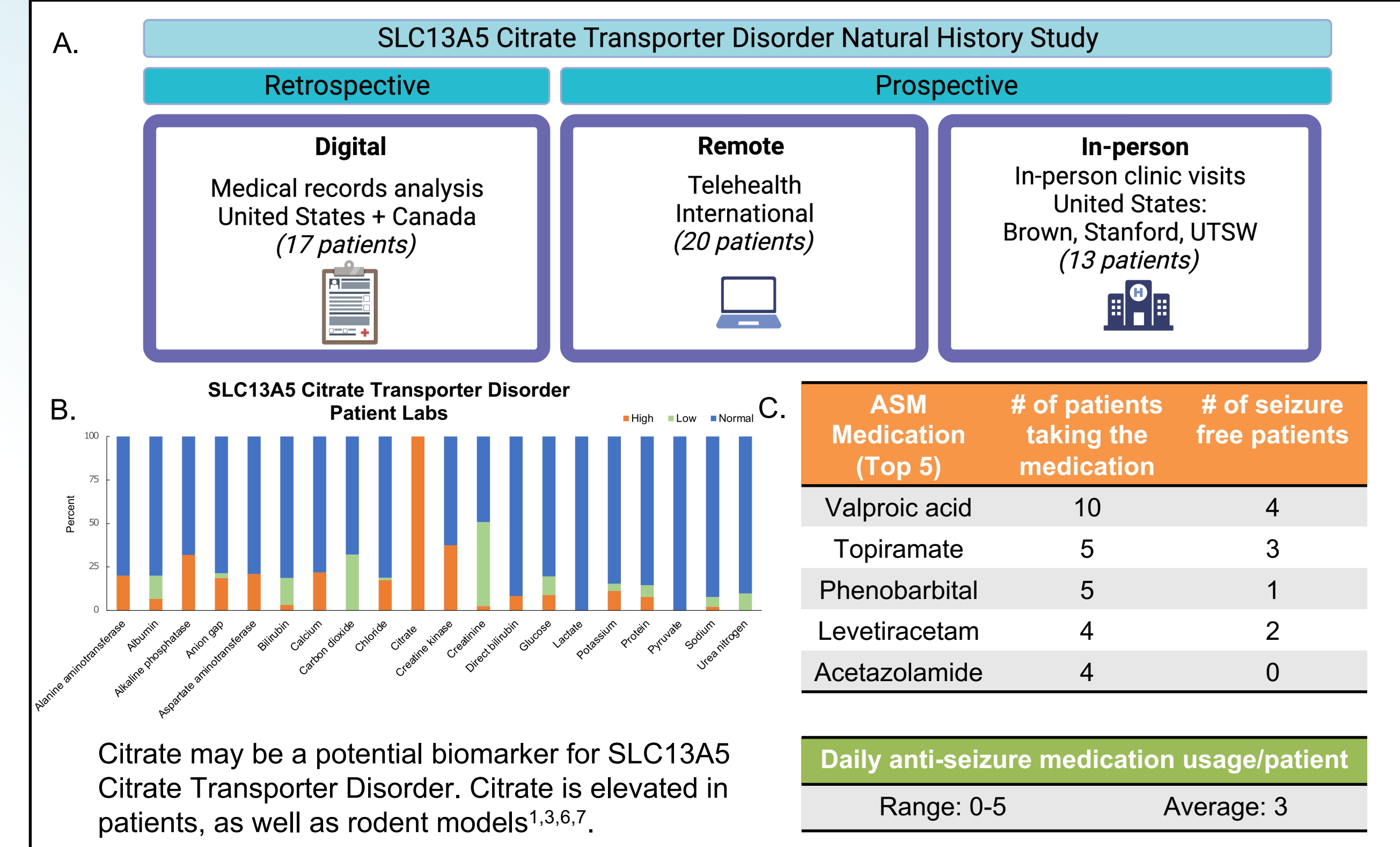
**B. Our patient-centered research network**

**C. TESS Funds Research Around the World**

**Building a patient-centered SLC13A5 research community**

- We fund early-career, mid-career, and well-established researchers through invitation and open research funding announcements
- TESS provides seed funding; we offer letters of support for NIH grants, openly share resources, and make introductions to key researchers
- TESS actively participates in research and publishes peer-reviewed publications

## Understanding the Natural History Study of SLC13A5 Citrate Transporter Disorder



## Revisiting and updating our strategic plan: staying mission-focused

- Accelerate and drive research** and professional education to find a cure, improve symptom management, and ensure quality of care for those affected by SLC13A5 Epilepsy
- Empower constituents** through information, education, and support to improve quality of life of individuals and families and to engage them in research
- Expand and strengthen development initiatives** to sustain organization programs and services

## Future Directions

We need to develop more treatments and further our understanding of this disorder. Our future plans include:

- Continue to drive basic, translation, and clinical research
- Funding high priority science and applying for grants as an organization
- Partnering to drive patient-centered research
  - Partnering in NHS
  - Developing an updated SLC13A5 research agenda
  - Publishing SLC13A5 research
- Developing treatments: seeking academic and industry partners for developing assays and drug repurposing
- Preparing clinical and family community for clinical trials
- SLC13A5 Research Roundtable at Brown University in summer 2024

## Acknowledgements + References

We are grateful to CZI Rare As One, our donors, Scientific Advisory Board, Board of Directors, research and clinical community, and our amazing TESS families. Figures were made using BioRender.com.

<sup>1</sup>Henke, C. et al. Disruption of the sodium-dependent citrate transporter SLC13A5 in mice causes alterations in brain citrate levels and neuronal network excitability in the hippocampus. *Neurobiology of Disease* 143, 105018 (2020). <sup>2</sup>Wilmes, D. M. et al. The longevity gene *Indy* (I'm Not Dead, Yet) affects blood pressure through sympathoadrenal mechanisms. *JCI Insight* 6, (2021). <sup>3</sup>Dicks, N. et al. A specialized metabolic pathway partitions citrate in hydroxyapatite to impact mineralization of bones and teeth. *Proc. Natl. Acad. Sci. U.S.A.* 119, e2212178119 (2022). <sup>4</sup>Rigby, M. J. et al. SLC13A5/sodium-citrate co-transporter overexpression causes disrupted white matter integrity and an autistic-like phenotype. *Brain Commun* 4, (2022). <sup>5</sup>Knauf, F., Rogina, B., Jiang, Z., Aronson, P. S. & Helfand, S. L. Functional characterization and immunolocalization of the transporter encoded by the life-extending gene *Indy*. *PNAS* 99, 14315-14319 (2002). <sup>6</sup>Bainbridge, M. N. et al. Analyses of SLC13A5-epilepsy patients reveal perturbations of TCA cycle. *Mol Genet Metab* 121, 314-319 (2017). <sup>7</sup>Bainbridge, M. N. et al. Analyses of SLC13A5-epilepsy patients reveal perturbations of TCA cycle. *Mol Genet Metab* 121, 314-319 (2017).