

CURE SRD5A3

RESEARCH DECK

Vijay Sappani
Founder

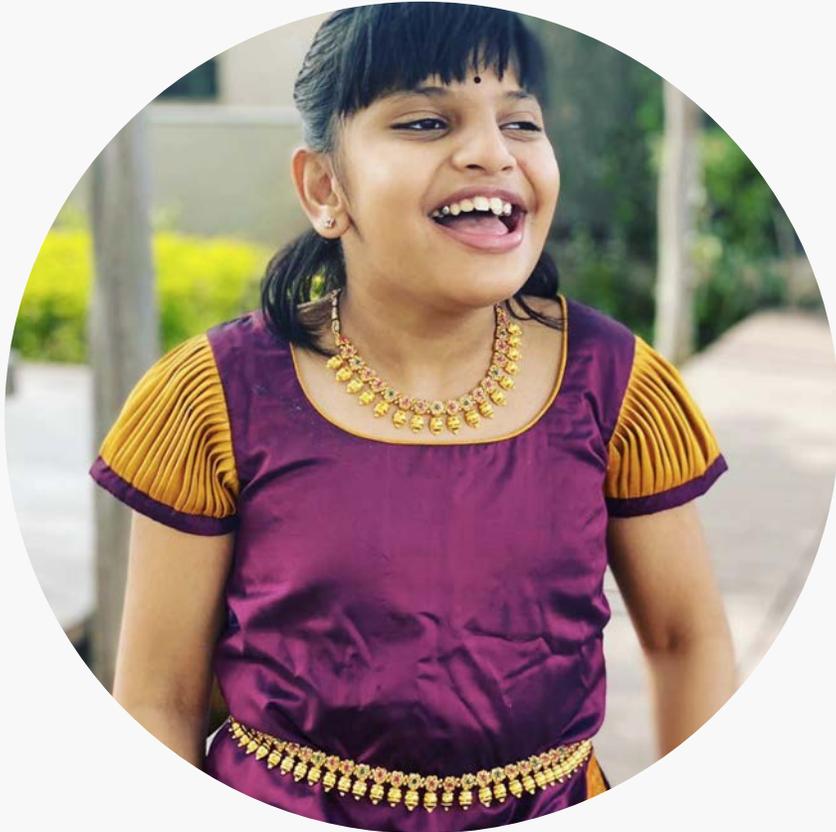


ELA CAPITAL



SAPPANI
FOUNDATION

OUR STORY



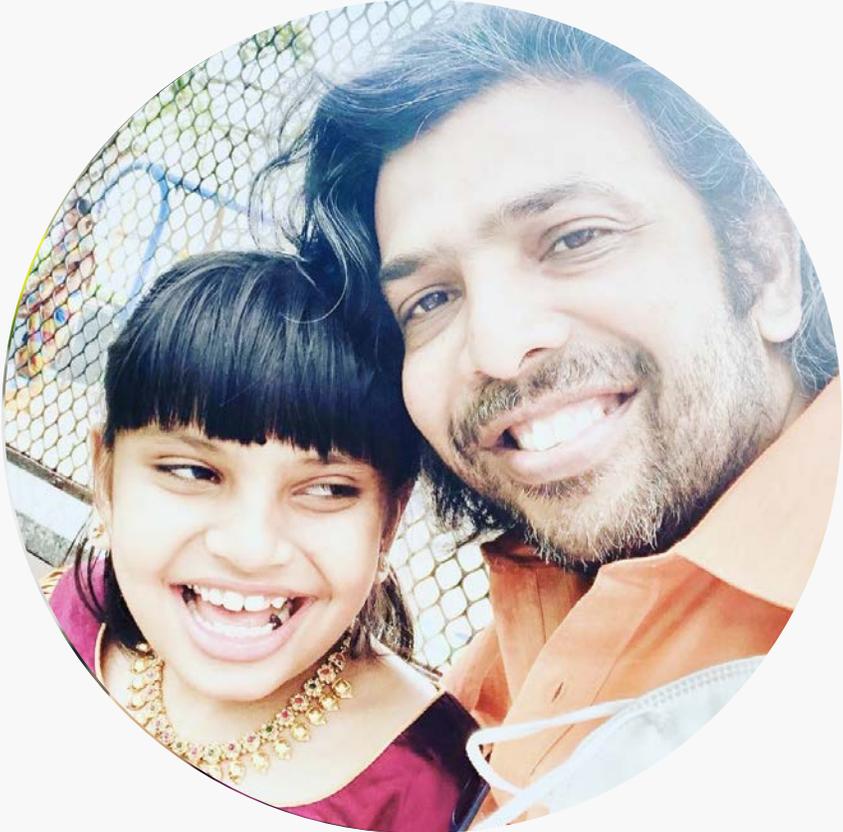
ELA SAPPANI

Cure SRD5A3 began in 2019 as a personal journey for Vijay Sappani when his daughter Ela was diagnosed with SRD5A3-CDG, an **ultra-rare congenital disorder of glycosylation** for which there are **no available treatments**.

Ela's journey has been difficult for her and her family, taking **7 specialists** and **3 years just to reach a diagnosis**. She continues to work with over **8 therapists regularly** as this disorder **affects every aspect of her daily life**.

Cure SRD5A3 is committed to improving the quality of life for this underserved patient population by **advancing research on and developing therapies for SRD5A3-CDG**.

OUR STORY



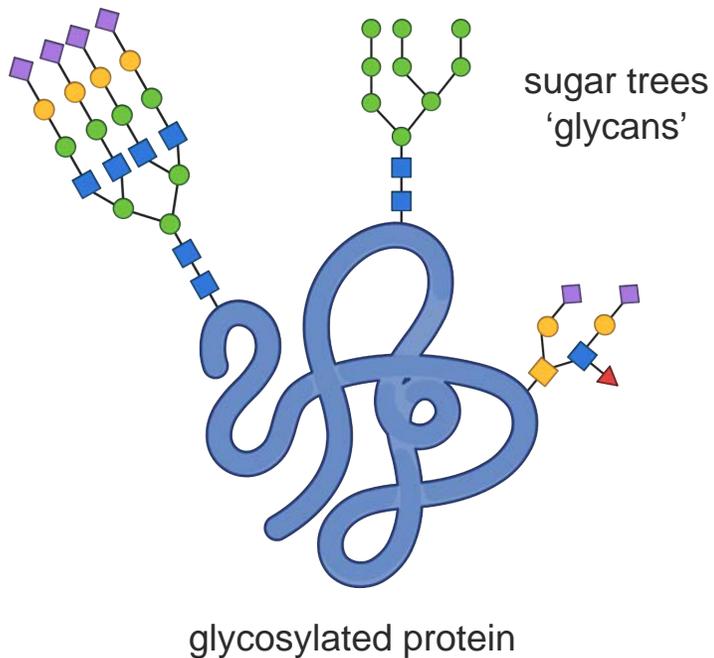
VIJAY & ELA

As a parent of a child with a rare disease and the founder of Cure SRD5A3, Vijay is a leading advocate in the rare disease and CDG communities globally.

Vijay does philanthropic work through the [Sappani Foundation](#) with a key focus on rare diseases and CDG. He also sits on the board of directors for the [Canadian Organization for Rare Disorders \(CORD\)](#) and [CDG Canada](#).

CONGENITAL DISORDERS OF **GLYCOSYLATION (CDG)**

SRD5A3-CDG is one of **over 170 rare CDG** which are single-gene metabolic disorders caused by **defects in glycosylation**.



- Glycosylation is the complex process by which **sugars are added to proteins and lipids**.
- Most CDGs have a significant impact on quality of life and **affect multiple organ systems**, highlighting the **critical importance of glycosylation**.
- Common symptoms include **developmental delays, intellectual disability, neurological abnormalities, clotting and endocrine problems**.

STEROID 5A-REDUCTASE TYPE 3 (SRD5A3-CDG)

- SRD5A3-CDG is an ultra-rare (60+ patients) **autosomal recessive** disease caused by mutations in the *SRD5A3* gene.
- The homozygous nonsense mutation **c.57G>A, p. (W19X)** is the most common mutation, reported in ~50% of patients.
- W19X is associated with **early-onset retinal dystrophy**.

CLINICAL PRESENTATION

SRD5A3-CDG is a **multisystemic disorder** present at birth. Symptoms include:

Neurological: intellectual disability, developmental delay, ataxia, poor muscle tone

Ophthalmological: visual loss, early-onset retinal dystrophy, retinitis pigmentosa, nystagmus

Skin: dry skin, ichthyosis, skin rash

Skeletal: scoliosis, kyphosis

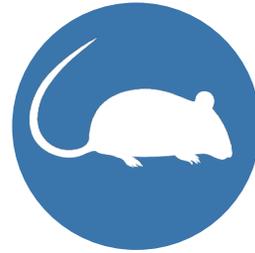
STEROID 5A-REDUCTASE TYPE 3 (SRD5A3-CDG)



DIAGNOSIS & BIOMARKERS

Diagnosis is achieved through analysis of serum transferrin glycans and genetic testing.

There are **no established therapeutic biomarkers** for SRD5A3-CDG.



DISEASE MODELS

Existing disease models include patient fibroblast lines, patient-specific mutation KO worms, cerebellum-specific conditional KO and conditional ready floxed mouse models.



TREATMENTS

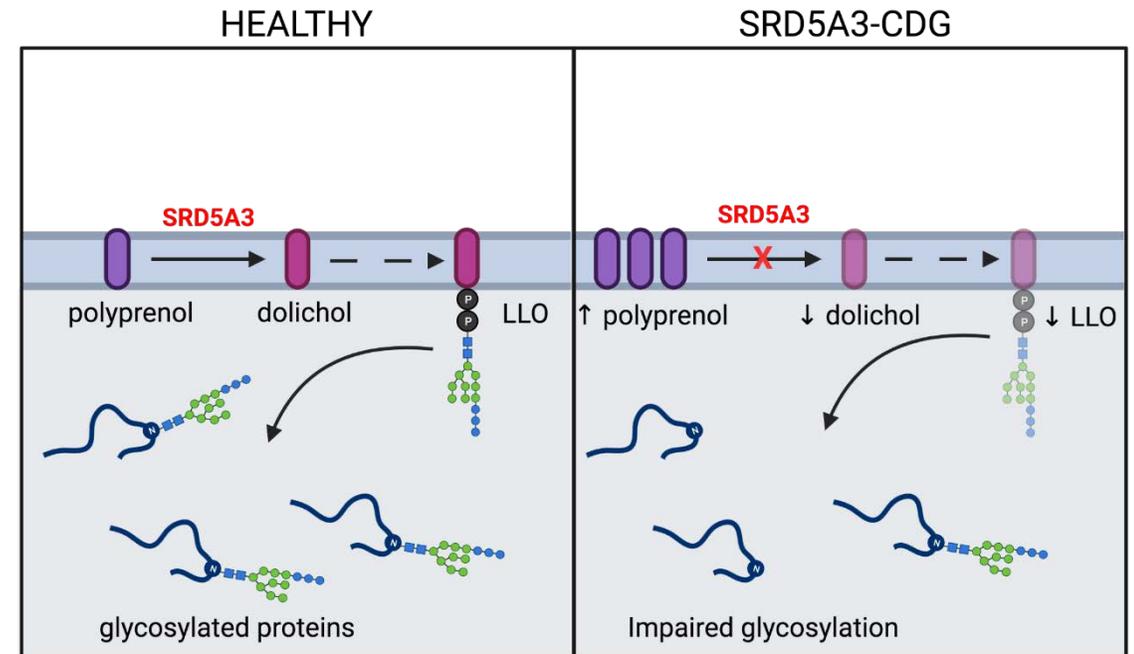
There are **no available therapies** for SRD5A3-CDG.

24 variants have been reported, most of which likely result in a **null protein**. SRD5A3-CDG is a good candidate for **gene therapy**.

SRD5A3 IS A CRITICAL ENZYME IN **DOLICHOL PRODUCTION**

- SRD5A3, also known as the enzyme polyprenol reductase, **catalyzes the conversion of polyprenol to dolichol** in the ER membrane.
- The synthesis of the lipid dolichol is one of the **first steps in glycosylation**.
- Dolichol acts as a **lipid carrier for glycans (LLO)** that are transferred onto proteins and as a sugar donor in multiple glycosylation pathways.
- Losing SRD5A3 function **impairs glycosylation**, resulting in **insufficient glycosylation of proteins**.

It is unknown whether SRD5A3-CDG pathology is driven by polyprenol accumulation, dolichol deficiency and/or insufficient glycosylation of proteins.



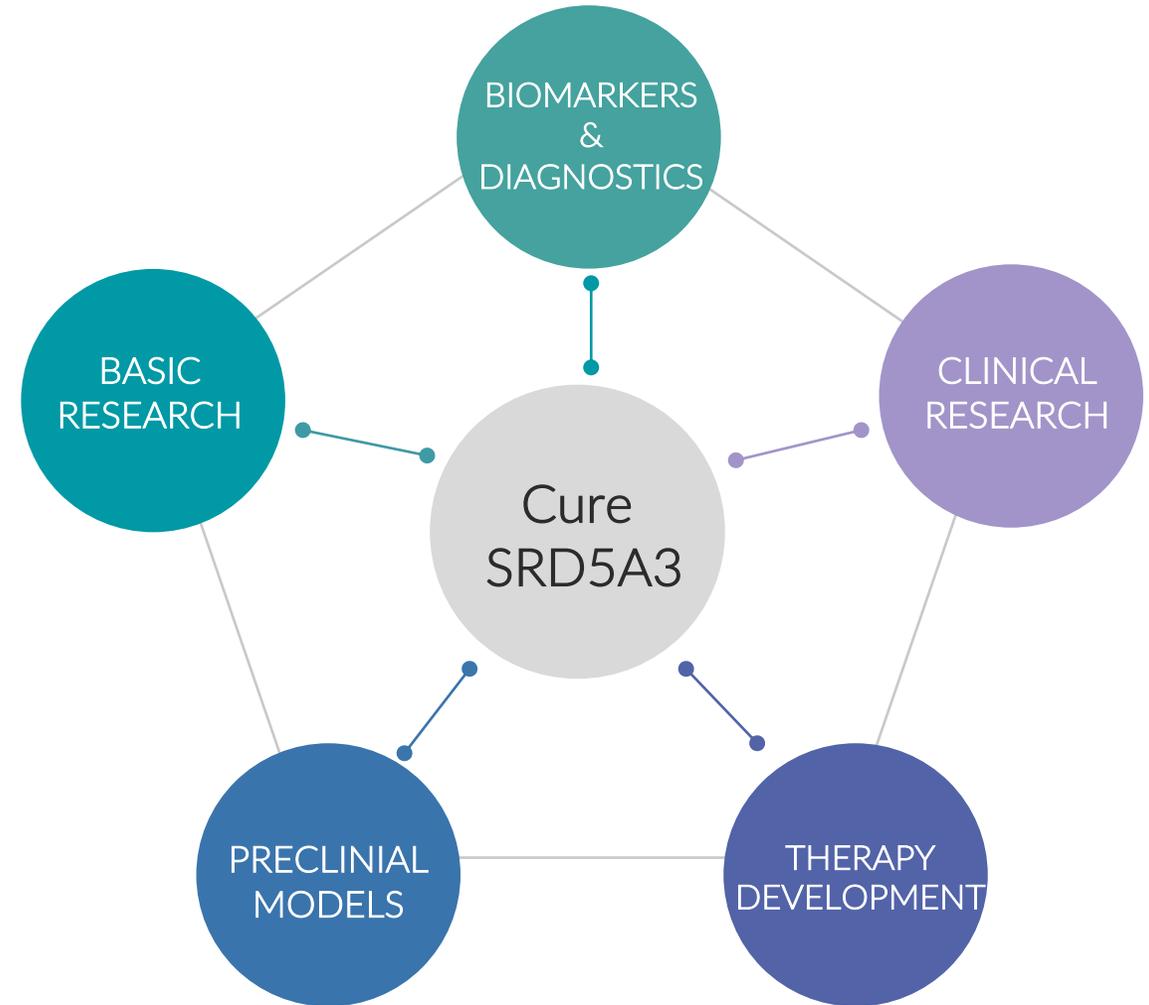
LLO: lipid-linked oligosaccharide

OUR STRATEGIC APPROACH

At Cure SRD5A3, we are focused on **SPEED TO A CURE**. With speed in mind, we are taking a strategic approach to our R&D program:

- **Hub and spoke model:** Design R&D projects executed by CRO/academic partners
- **Parallel pursuit** of basic/clinical research and therapeutic development
- Maintain **ownership over IP** developed
- Growing **engagement of the patient community and expert advisors** through our research activities

Wherever possible, we seek to harness scientific discoveries on SRD5A3-CDG to advance research on other CDGs.



THE CURE SRD5A3 LEADERSHIP TEAM



Vijay Sappani
FOUNDER

Vijay is an angel investor and diversified entrepreneur with a focus on life sciences and emerging technology start-ups. He is the founder and CEO of Ela Capital Inc. and the Chairman of the Sappani Foundation.



Dr. Kristin Kantautas
RESEARCH DIRECTOR

Kristin has worked in the life sciences industry as a consultant specializing in rare diseases. She holds a PhD in Molecular Genetics from the University of Toronto and is an expert on congenital disorders of glycosylation.



Dr. Abhi Pushparaj
SCIENTIFIC ADVISOR

Abhi obtained his PhD in Neuropharmacology from the University of Toronto and has extensive experience in designing clinical trials to obtain global regulatory approvals for medical devices and biopharmaceuticals.

OUR **SCIENTIFIC ADVISORS**



Dr. Hudson Freeze
**Sanford Burnham
Prebys**



Dr. Eva Morava-Kozicz
Mayo Clinic



Dr. Christina Lam
**Seattle Children's
Hospital**



Dr. Ethan Perlstein
Perlara

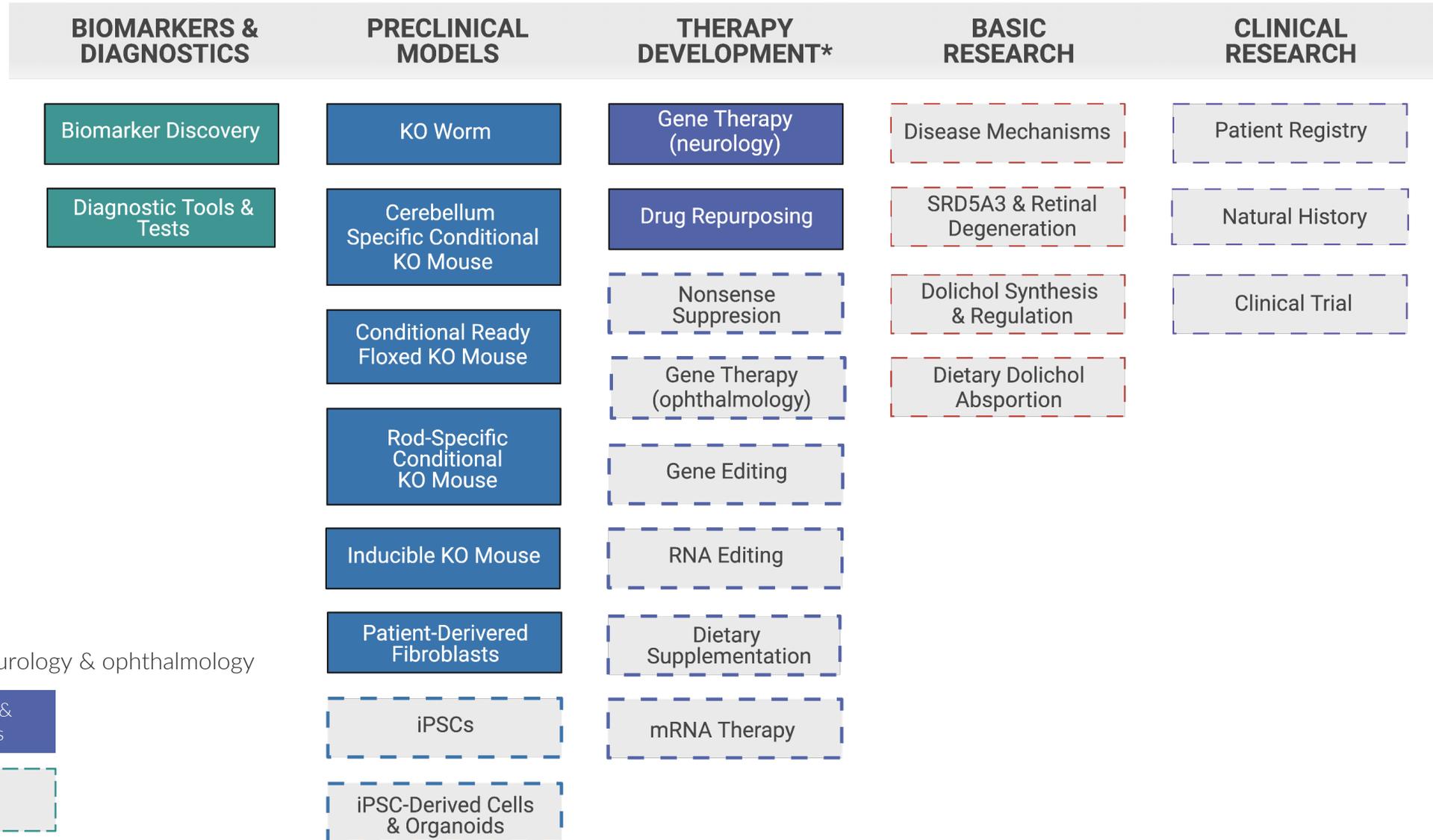


Dr. Andrew Edmondson
**Children's Hospital
of Philadelphia**



Dr. Yin Dong
University of Oxford

OUR RESEARCH PROGRAM



* Focus on neurology & ophthalmology

active research & available models

Future research projects

OUR 2-YR PRIORITY AREAS

BIOMARKERS & DIAGNOSTICS	PRECLINICAL MODELS	THERAPY DEVELOPMENT*	BASIC RESEARCH	CLINICAL RESEARCH
Biomarker Discovery	KO Worm	Gene Therapy (neurology)	Disease Mechanisms	Patient Registry
Diagnostic Tools & Tests	Cerebellum Specific Conditional KO Mouse	Drug Repurposing	SRD5A3 & Retinal Degeneration	Natural History
	Conditional Ready Floxed KO Mouse	Nonsense Suppression	Dolichol Synthesis & Regulation	Clinical Trial
	Rod-Specific Conditional KO Mouse	Gene Therapy (ophthalmology)	Dietary Dolichol Absorption	
	Inducible KO Mouse	Gene Editing		
	Patient-Derived Fibroblasts	RNA Editing		
	iPSCs	Dietary Supplementation		
	iPSC-Derived Cells & Organoids	mRNA Therapy		

* Focus on neurology & ophthalmology

active research & available models

Future research projects

OUR RESEARCH PARTNERS

BIOMARKERS & DIAGNOSTICS



Dr. Eva Morava-Kozicz
Mayo Clinic



Dr. Akhilesh Pandey
Mayo Clinic



Dr. Dirk Lefeber
Radboud UMC



PRECLINICAL MODELS



Dr. Steven Fliesler
University at Buffalo



THERAPY DEVELOPMENT



Dr. Steven Grey
UT Southwestern



Dr. Eva Morava-Kozicz
Mayo Clinic



Dr. James Doyle
Modelis

BASIC RESEARCH

CLINICAL RESEARCH



Dr. Kimberly Goodspeed
UT Southwestern Medical Center

KEY ACCOMPLISHMENTS

- 01 Natural History:** Conducted a natural history study in a new patient cohort.
- 02 Model Generation:** Generated *SRD5A3* KO worms, zebrafish and a conditional-ready mouse model. Generating a rod-specific KO mouse to support ocular gene therapy development.
- 03 CNS Gene Therapy:** Ongoing evaluation of gene therapy in a cerebellum-specific *Srd5a3* KO mouse model.
- 04 Drug Repurposing:** Ongoing evaluation of drug repurposing hits in patient-derived cellular models.
- 05 AI Diagnostic Platforms:** Collaborations with digital health companies, Khure Health and FDNA, to improve diagnosis for *SRD5A3*-CDG and all CDG types.

PARTNER WITH US

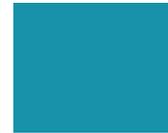
Cure SRD5A3 is seeking industry and academic partners to accelerate our path to a cure.



Industry Partners

Cure SRD5A3 is interested licensing and sharing in the benefits of an FDA approval, specifically a **Rare Pediatric Disease Priority Review Voucher** with industry partners

Academic Partners



Cure SRD5A3 will provide labs conducting research on SRD5A3-CDG in one of our priority areas with **funding and access to biological assets**

CONTACT US



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