

## Post-Traumatic Stress Disorder (PTSD) Biomarker and Therapeutic

### Market Need

US Department of Veterans' Affairs reports 7.8% of Americans will experience PTSD at some point in their lives, with women (10.4%) twice as likely as men (5%). At any given time in the course of a year, 3.6% of adult Americans (some 5.2 million people) have PTSD. The traumatic events most often associated with PTSD are rape, combat exposure, childhood neglect, childhood physical abuse, and being threatened with a weapon. Treatment costs of PTSD are estimated to be \$5,900 to \$10,300 for a two year mixed therapy course per victim. The market for PTSD is forecasted to reach \$1.2 billion USD by 2028, with a CAGR of 18.7% in the top 7 major markets and 31.1% in the US alone (GlobalData 2019). Given that PTSD treatments to date have poor efficacy, and the increasing diagnosis of the syndrome, a successful pharmacotherapeutic treatment option and pre-PTSD preventative therapy will have a strong chance of achieving market success.

### Technology Description

Our scientist, Dr. Fang Liu, has discovered that two proteins, the glucocorticoid receptor (GR) and FK506 binding protein 51 (FKBP51), form a complex that is elevated in peripheral blood from PTSD patients. Dr. Liu's team has also designed a peptide that can disrupt the GR-FKBP51 protein binding and results in the a priori reduction in PTSD-like symptoms in a mouse model of PTSD (Li et al, 2020). The peptide is meant to be used as a treatment post-stress. Another aspect of this technology is its use as a true diagnostic marker. Specifically, a dramatic increase in GR-FKBP51 protein complex was detected in peripheral blood of subjects exposed to a traumatic event that developed PTSD, but not in those that did not develop PTSD or those with major depressive disorder. Therefore, high levels of GR-FKBP51 complex formation is strongly indicative of PTSD, particularly in its sub-clinical, incipient stage. This finding forms the basis of a powerful prophylactic tool capable of screening post-traumatic individuals for those who are likely to develop PTSD. This will greatly increase the efficacy of treatment, and prevent escalation while avoiding the trial-and-error use of a variety of therapeutics.

### Stage of Development

- We created a peptide that disrupts the GR-FKBP51 complex. The interfering peptide also significantly reduces freezing time in fear-conditioned mice, an animal model for PTSD, when administered both immediately after the fear-conditioning training and after the extinction session.
- Next steps – develop a small molecule therapeutic for this target – collaborate on AI-based small molecule screen to identify candidates for development and optimization

### Advantages

- Unique preventative treatment of PTSD-like behaviour when administered immediately after trauma exposure. The interfering peptide can also be used in treatment of PTSD after clinical symptoms develop.
- Targets a PTSD causative mechanism, rather than being a generalized psychiatric treatment
- Novelty & safety: targeting of the GR-FKBP51 complex, rather than a ligand targeted to GR
- Preventative diagnosis of non-symptomatic, post-traumatic individuals likely to develop PTSD
- Biomarker allows for the stratification of patients for clinical trials and meaningful endpoint measurement

### Notable Publication(s)

Haiyin Li, Kerry Ressler, Fang Liu et al., "The glucocorticoid receptor–FKBP51 complex contributes to fear conditioning and posttraumatic stress disorder" [J Clin Invest. 2020; 130\(2\): 877-889](#)

### Intellectual Property

The peptide and its uses are the subject of nationalized PCT applications in US and CA.

#### FOR MORE INFORMATION CONTACT

Dr. Klara Vichnevetski  
Director, Industry Partnerships & Technology Transfer  
[klara.vichnevetski@camh.ca](mailto:klara.vichnevetski@camh.ca) Tel: 416-595-6056

Centre for Addiction and Mental Health  
33 Ursula Franklin Street, Suite 4039  
Toronto, Ontario, Canada M5A 2S1  
[www.camh.ca](http://www.camh.ca)