




Challenges for gene therapies: delivery, durability and complications

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Disclosures

Founder, equity holder, member of the Board and scientific advisor of Forcefield Therapeutics Inc, London

Co-founder, equity holder, member of the Board and scientific advisor of Purespring Therapeutics Inc, London

Founder, equity holder, member of the Board and scientific advisor of Heqet Therapeutics, Italy

Member of the Scientific Advisory Boards of Trizell Holding SA, Lausanne and DINAQR AG, Zurich-London



Prevention and therapy of **heart failure**



REMARKABLE !!!!!

**Protection from
cardiomyocyte loss**

No drug or
treatment

**Improvement of residual
cardiac function**

Digitalis
Diuretics
Aldosterone antagonists
ACE inhibitors
Beta blockers
Angiotensin receptor neprilysin inhibitors (ARNIs)
Angiotensin receptor blockers (ARBs)
I_f channel blockers (ivabradine)
SGLT2 inhibitors
Myosin activators (omecamtiv mecarbil)

**Generation of new
cardiomyocytes**

No drug or
treatment

Next generation cardiac therapies will be biologics

Biologics

- Recombinant proteins (e.g. cytokines, hormones, enzymes)

- Peptides

- Vaccines

- Monoclonal antibodies

- Nucleic acids (antisense, ncRNAs, mRNAs)

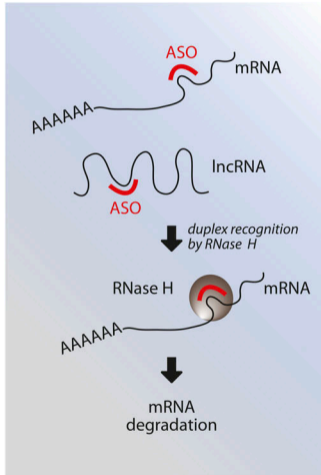
Advanced Therapies

- Viral vectors for gene therapy and gene editing

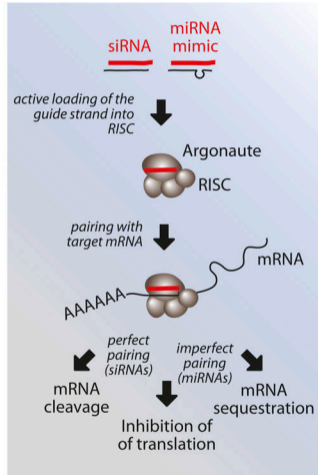
- Cells and 3D tissue

Small, non coding RNA (ncRNA) therapeutics

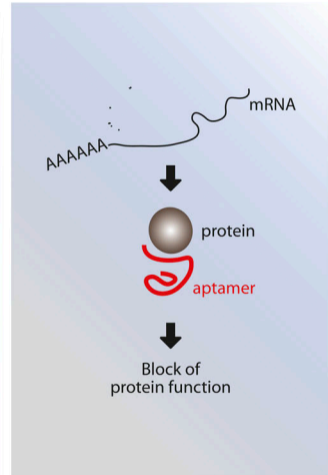
Antisense oligonucleotides (ASOs)



siRNAs, miRNAs



Aptamers



FDA/EMA approved small ncRNAs (2022)

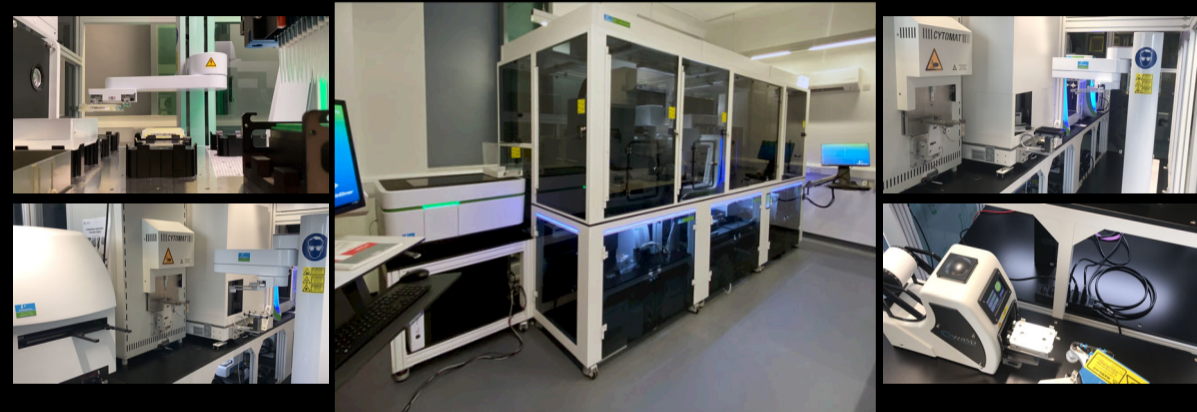
ASOs
4 siRNAs

Product (Commercial name; Developer/Manufacturer)	Length	Modifications	Vehicle	Route of administration	Indication	Target organ	Target gene and mechanism	Year of approval
Antisense oligonucleotides (ASOs)								
Fomivirsen (Vitravene; Isis Pharmaceuticals, Novartis)	21-mer	PS	None	Intravitreal	CMV retinitis	Eye	CMV IE-2 mRNA	1998 (FDA), 1999 (EMA); 2002 withdrawn
Mipomersen (Kynamro; Ionis Pharmaceuticals, Kastle Therapeutics)	20-mer	PS, 2'-MOE, GapmeR	None	Subcutaneous	Familial hypercholesterolaemia (FH)	Liver	Apolipoprotein B (ApoB) mRNA	2013 (FDA); 2019 withdrawn
Nusinersen (Spinraza; Ionis Pharmaceuticals, Biogen)	18-mer	PS, 2'-MOE	None	Intrathecal	Spinal muscular atrophy (SMA)		SMN2 pre-mRNA splicing (exon 7 inclusion)	2017 (EMA), 2016 (FDA)
Eteplirsen (Exondys 51, Sarepta Therapeutics)	30-mer	PMO	None	Intravenous	Duchenne muscular dystrophy (DMD)	Skeletal muscle	Dystrophin pre-mRNA splicing (exon 51 skipping)	2016 (FDA)
Inotersen (Tesgedi; Ionis Pharmaceuticals, Akcea Therapeutics)	20-mer	PS, 2'-MOE, GapmeR	None	Subcutaneous	Hereditary transthyretin amyloidosis	Liver	Transthyretin (TTR) mRNA	2018 (EMA), 2018 (FDA)
Golodirsen (Vyondys 53; Sarepta Therapeutics)	25-mer	PMO	None	Intravenous	Duchenne muscular dystrophy (DMD)	Muscle	Dystrophin pre-mRNA splicing (exon 53 skipping)	2019 (FDA)
Viltolarsen (Viltepso, NS Pharma)	21-mer	PMO	None	Intravenous	Duchenne muscular dystrophy (DMD)	Muscle	Dystrophin pre-mRNA splicing (exon 53 skipping)	2020 (FDA) 2020 (EMA)
Volanesorsen (Waylivra; Ionis Pharmaceuticals, Akcea Therapeutics)	20-mer	PS, 2'-MOE, GapmeR	None	Subcutaneous	Familial chylomicronaemia syndrome (FCS)	Liver	Apolipoprotein C3 (ApoC3) mRNA	2019 (EMA)
Casimersen (Amondys 45; Sarepta Therapeutics)	22-mer	PMO	None	Intravenous	Duchenne muscular dystrophy (DMD)	Muscle	Dystrophin pre-mRNA splicing (exon 45 skipping)	2021 (FDA)
Small interfering RNAs (siRNAs)								
Patisiran (Onpattro; Anylam Pharmaceuticals)	21-nt ds	2'-O-Me	SNALP LNP	Intravenous	Hereditary transthyretin amyloidosis	Liver	Transthyretin mRNA	2018 (EMA), 2019 (FDA)
Givosiran (Givlaari; Anylam Pharmaceuticals)	21-nt ds	PS, 2'-O-Me, 2'-F, GalNAc-conjugated	None	Subcutaneous	Acute hepatic porphyria (AHP)	Liver	Delta aminolevulinic acid synthase 1 (ALAS1) mRNA	2020 (EMA), 2019 (FDA)
Inclisiran (Leqvio; Novartis Pharmaceuticals)	22-nt ds	PS, 2'-O-Me, 2'-F, GalNAc-conjugated	None	Subcutaneous	Primary hypercholesterolaemia or mixed dyslipidaemia	Liver	Proprotein convertase subtilisin/kexin type 9 (PCSK9) mRNA	2020 (EMA) 2021 (FDA)
Lumasiran (Oxlumo; Anylam Pharmaceuticals)	21-nt ds	PS, 2'-O-Me, 2'-F, GalNAc-conjugated	None	Subcutaneous	Primary hyperoxaluria type 1 (PH1)	Liver	Hydroxyacid oxidase-1 (HAO1) mRNA	2020 (EMA), 2020 (FDA)

The search for new therapeutic leads

The approach we like:

- Based on **selection** or **screening**
(not on educated guesses)
- **Systematic** (exhaustive)
- **Functional** (not phenotypic)
- **In vivo** (if possible)



Human/Mouse whole Genome siRNAs (~18,000 siRNAs)
Human/Mouse synthetic microRNA mimics (2042 mature sequences, miRBase v. 19.0)
Human miRCURY LNA inhibitors (1972 molecules)
2 FDA/EMA-approved small molecule libraries (>3000 molecules)
Mouse secreted factors (1198 cDNAs)

ncRNAs for cardiac regeneration

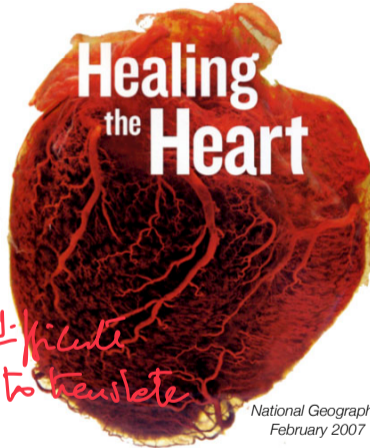
The holy grail of **cardiac regeneration**

~~Cardiac
regeneration by
stem cells~~

~~Bone marrow stem cells
Mesenchymal stromal cells
Cardiospheres
Adult cardiac stem cells
Cardiac Progenitor Cells (CPCs)~~

Cardiac
regeneration by
cardiomyocytes

ES-derived cardiomyocytes
iPS-derived cardiomyocytes
Engineered Heart Tissue



*difficult
to translate*

Cardiac regeneration by
transdifferentiation of fibroblasts to
cardiomyocytes

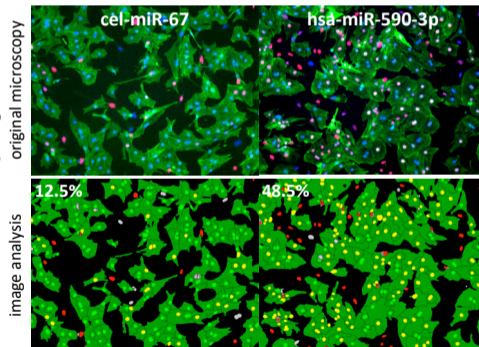
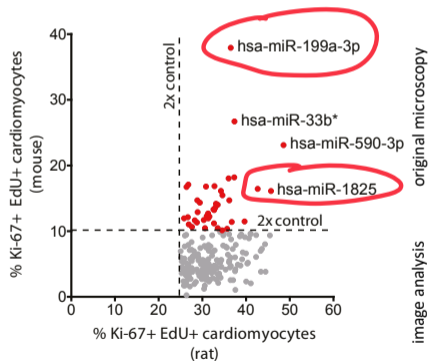
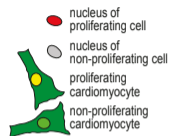
Cardiac
regeneration by
stimulation of the
endogenous
capacity of
cardiomyocytes to
proliferate

*interesting
for research*



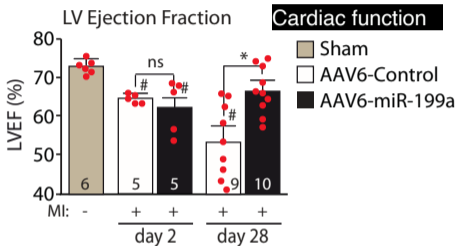
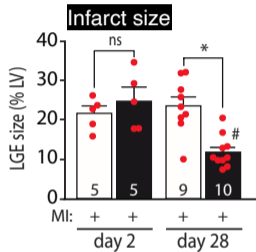
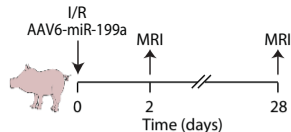
Human miRNAs increasing human and rodent cardiomyocyte proliferation

Hoechst
a-actinin
EdU

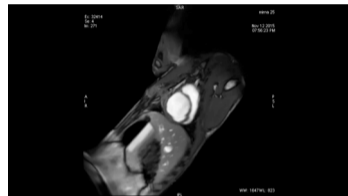




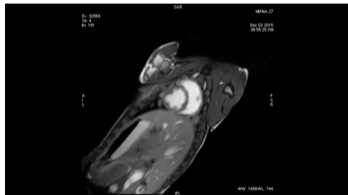
AAV6-miR-199a reduces infarct size and fibrosis and improves cardiac function in pigs



MI + AAV6-Control

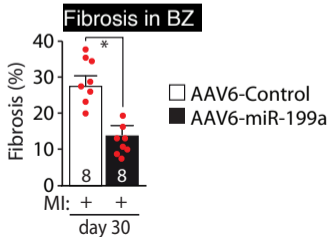
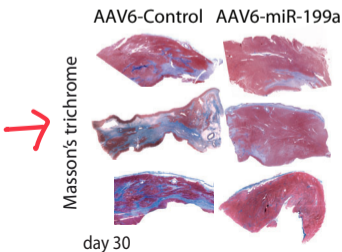


MI + AAV6-miR-199a

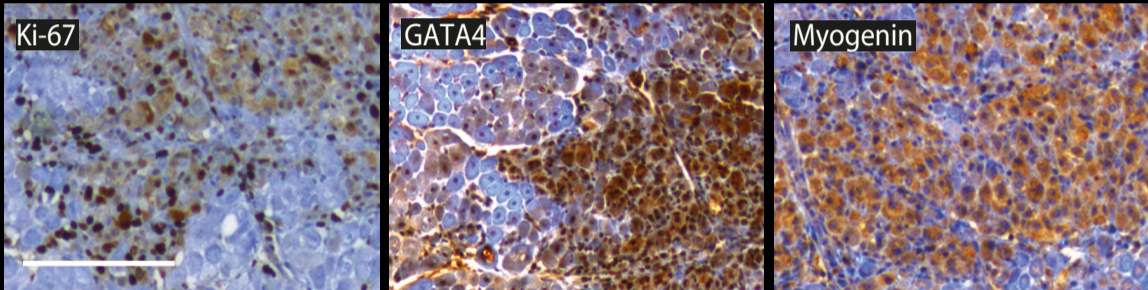


30 days after MI and treatment

REMODELIZATION



Small cell clusters in hearts injected with AAV6-miR-199a



Highly proliferating, GATA4+, myogenin+
Early myoblast progenitors?

ncRNAs that increase AAV
permissivity

FDA/EMA approved gene therapy products (18)

Product	Company	Year	Therapeutic gene	Disease	Vector	Prevalence / Incidence	Price (USD)
Glybera	UniQure	2012	Lipoprotein lipase	Lipoprotein lipase deficiency (LPLD)	AAV1	1:1,000,000	1M
Strimvelis	GlaxoSmithKline	2016	Adenosine deaminase	ADA-SCID	RV	1:100,000	665K
Luxturna	Spark Therapeutics	2017	RPE65	Leber's congenital amaurosis (LCA)	AAV2	<1:100,000	435K/eye
Zynteglo	Bluebird Bio	2022	Beta globin	Beta thalassaemia	LV	1:100,000	2.8M
Zolgensma	Novartis/Avexis	2019	SMN1	Spinal muscular atrophy (SMA)	AAV9	1-2:100,000	2.1M
Hemgenix	Behring	2022	Factor IX	Haemophilia B	AAV5	3.7:100,000	3.5M
Skysona	Bluebird Bio	2022	ABCD1	X-linked adrenoleukodystrophy	LV	5:100,000	3M
Libmeldy	Orchard Therapeutics	2020E	Arylsulfatase A (ARSA)	Metachromatic leukodystrophy (MLD)	LV	2.5-10:100,000	3.9M
Upstaza	PTC Therapeutics	2022E	AADC	Aromatic L-amino acid decarboxylase deficiency	AAV2	1.1:100,000	
Roctavian	BioMarin	2022E	Factor VIII-SQ	Haemophilia A	AAV5	12:100,000	2.5M
Yescarta	Kite Pharma/Gilead	2017	CAR-T (CD-19)	Diffuse Large B-cell NHL	LV	4:100,000 per year	373K
Kymriah	Novartis	2017	CAR-T (CD-19)	B-cell lymphoma	LV	1.7:100,000	475K
Breyanzi	Bristol Myers Squibb	2022	CAR-T (CD19)	B-cell lymphoma	LV	1,7:100,000/year	471K
Abecma	Bristol Myers Squibb	2021	CAR-T (BCMA)	Multiple myeloma	LV	1-2:100,000/year	480K
Carvykti	Janssen	2023	CAR-T (BCMA)	Multiple myeloma	LV	1-2:100,000/year	490K
Tecartus	Kite Pharma	2020	CAR-T (CD-19)	Mantle cell lymphoma	LV	4-8/1M/year	373K
Adstiladrin	Ferring	2023	Interferon alfa-2b	Bladder cancer	Ad	32:100,000/year	~200K
Imlygic	Amgen/BioVex	2023	Oncolytic herpesvirus	Melanoma	Herpesvirus	25:100,000/year	65K

<https://www.fda.gov/vaccines-blood-biologics/cellular-gene-therapy-products/approved-cellular-and-gene-therapy-products>

<https://www.genetherapy.net/gene-therapy-products-on-the-market.html>

<https://www.pei.de/EN/medicinal-products/atmp/gene-therapy-medicinal-products/gene-therapy-node.html>

AAV vectors for cardiomyocyte gene transfer



Edoardo
Schneider

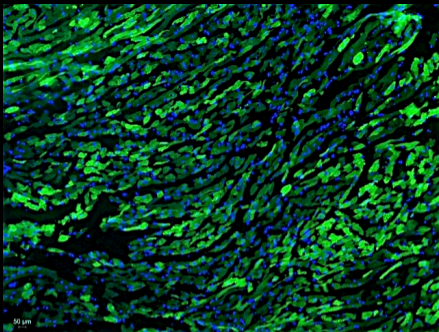
GFP α -actinin

RIGHT
VENTRICLE
LEFT
VENTRICLE

Intracardiac
 6.6×10^{10} v.g. in 30 μ l

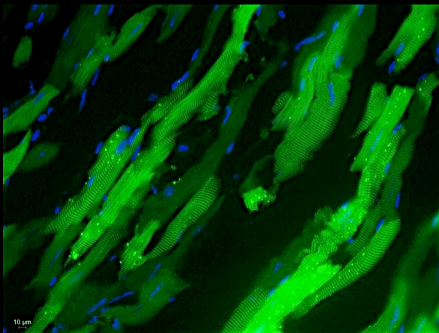
AAV9-GFP (CMV promoter)
Adult (1 month old) C57BL/6 mice
15 days after administration

Intravenous (retro-orbital)
 2.2×10^{11} v.g. in 100 μ l



Mouse heart transduction using AAV9 vectors

i.p., i.v. or intramyocardial injection



AAV9-ZsGGreen (Zsanthus green fluorescent protein)

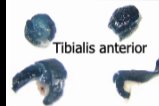
IP injection @day 7
 5×10^{11} vg/mouse

3 months post-injection
 1×10^8 - 1×10^9 vg/heart

AAV9-LacZ



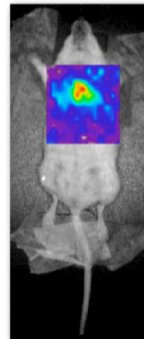
Heart





Tibialis anterior

Diaphragm

AAV9-Luc



Addressing high dose AAV toxicity – ‘one and done’ or ‘slower and lower’?

Takashi Kei Kishimoto ^a and Richard Jude Samulski ^b

EXPERT OPINION ON BIOLOGICAL THERAPY
2022, VOL. 22, NO. 9, 1067–1071

^aSelecta Biosciences, Watertown, MA, USA; ^bGene Therapy Center and Department of Pharmacology, University of North Carolina at Chapel Hill, Chapel Hill, NC, USA

- **Vector doses of $1E14$ vg/kg or higher required for efficacy in neuromuscular diseases**
- One third of 1400 patients administered systemically with Zolgensma (AAV9 for SMA) have experienced at least one adverse event of **hepatotoxicity**
- Four patients with X-linked myotubular myopathy (XLMTM) **died** after receiving a vector dose of $3.5E14$ vg/kg with signs of severe hepatotoxicity (Audientes)
- High vector doses associated with **thrombotic microangiopathy** (TMA) in clinical trials for Danon disease (Rocket Pharma) and SMA (9 cases, one death), and with atypical **haemolytic uremic syndrome** (aHUS) associated with complement activation in two clinical trials for DMD.
- Two cases of **myocarditis** in DMD Phase 3 clinical trial (Pfizer)
- Risk of **hepatocellular carcinoma** (HCC) and **dorsal root ganglia** (DRG) **toxicity** in animal models of AAV gene therapy

Can we lower AAV doses by rendering cells more permissive?

Total number of cells in the body
~37 trillion 3.7×10^{13}

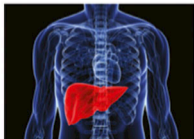
1×10^9

Neurons
~100 billion



2.4×10^{11}

Hepatocytes
~240 billion



1×10^{14} vg/kg AAV dose
in a 70 kg person
7 quadrillion viral particles

7×10^{15}

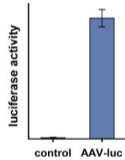
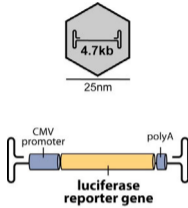


Skeletal muscle fibers
~250 million

2.5×10^8

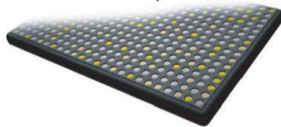
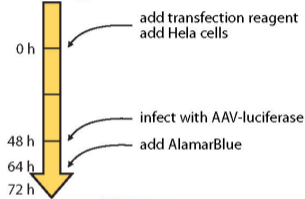


High-throughput screening of a whole genome siRNA and miRNA libraries for AAV transduction



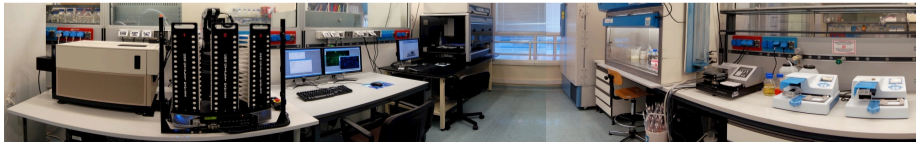
siRNAs targeting the human genome
arrayed on 384-well microplates
(18175 genes; 4 siRNAs per gene)

*siRNAs AGAINST
ALL HUMAN
GENES*



Measure AlamarBlue (cell viability)

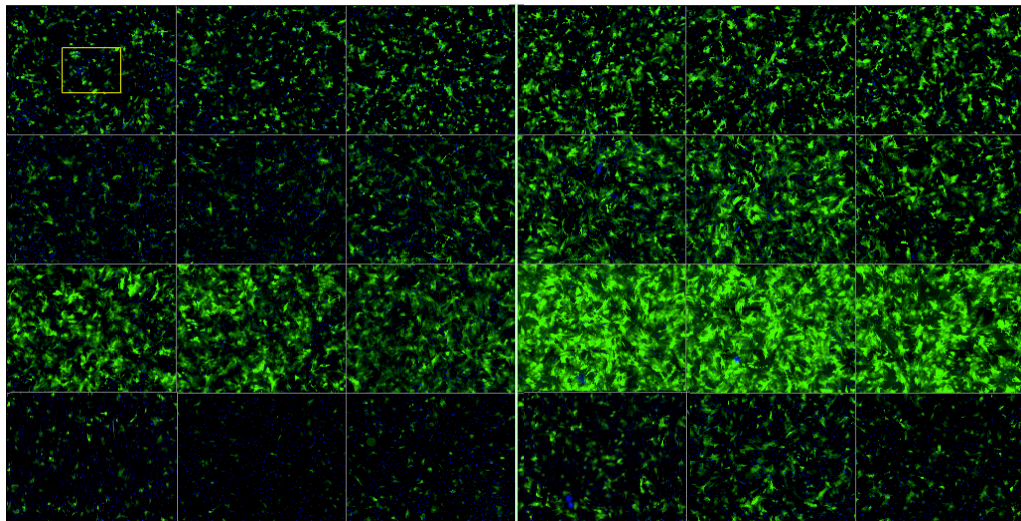
Measure Firefly Luciferase activity
to assess AAV infectivity



Screenings for AAV transduction

5×10^4 vg

5×10^5 vg



siRNA against an
endocytosis protein

siRNA against an
E3 ligase

siRNA against
an endocytosis
protein

Control

DAPI EGFP

AAV6-GFP in neonatal mouse cardiomyocytes

ncRNAs that increase precise
gene editing

Cardiomyopathies with Mendelian inheritance

- Most common cause of heart failure in young individuals
- Current medical approaches do not differ significantly from generic treatment for heart failure
- Most frequent mode of inheritance is autosomal dominant, because of either loss-of-function (e.g. truncating variants) or gain-of-function (missense variants)
- Autosomal dominance and large size of the cDNA coding for the affected genes are severe obstacles to cDNA gene therapy

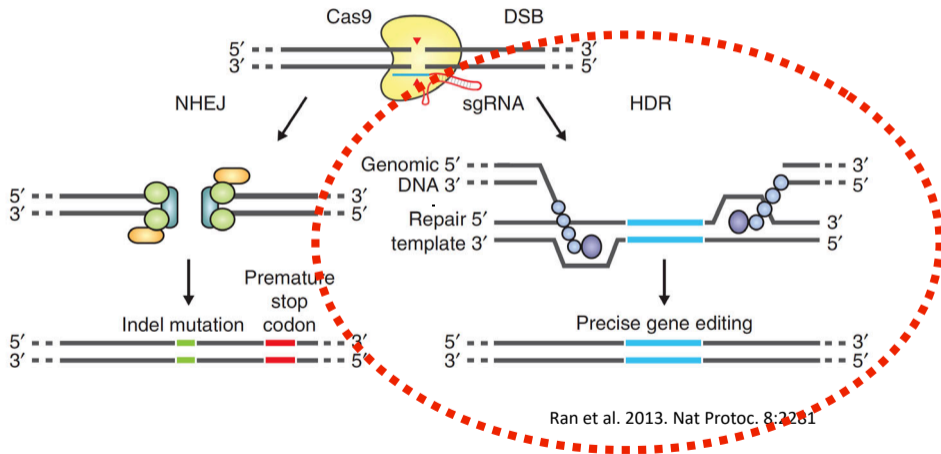
The diagram illustrates a cardiomyocyte with various cellular components labeled: Extracellular matrix, Dystrophin, Sarcomere, T-Tubule, Z-disc, Mitochondrion, and TAZ, CTR, and CTR2. It also shows a sarcomere with labels for Myosin, Actin, and Titin. A box labeled 'EMC' is positioned near the sarcomere. The text describes three types of cardiomyopathies: HCM, DCM, and ACM/ARVC, each with its prevalence and associated genetic mutations.

HCM
Most frequent form (1:500). Most common cause of sudden cardiac death below age 35. Mutations can be identified in 60% HCM patients. Over 70% of all HCM mutant can be found in 1 of 8 sarcoma genes (most frequent: MYBPC3 and MYH7)

DCM
Prevalence 1:2500. 20-35% patients have identifiable pathogenic variants. Genes coding for proteins in sarcomere, nuclear membrane, desmosome and cytoskeleton. Titin truncation mutations in 25% DCM familial cases. Other frequently involved genes: MYH7, TNNT2, LMNA.

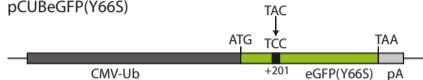
ACM/ARVC
Prevalence 1:2000–1:5000. Main involvement of the right ventricle and common life-threatening arrhythmias. 50% cases have mutations in genes coding for desmosomal proteins (PKP2, JUP, DSG2, and DSC2)

Genome Editing with CRISPR/Cas9

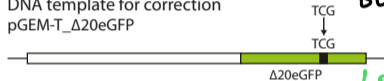


An assay to detect homology-directed repair

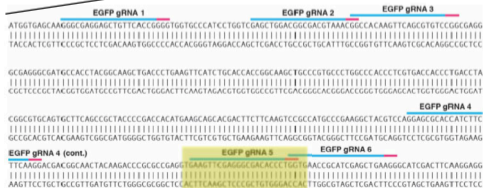
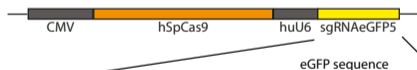
Reporter for Homologous Recombination
pCUBeGFP(Y66S)



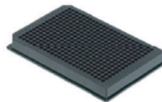
DNA template for correction
pGEM-T_Δ20eGFP



Humanized *S. pyogenes* Cas9 (SpCas9)
px330-SpCas9



Library of 2,042 human
microRNAs (Dharmacon)
arrayed in 384-well plates



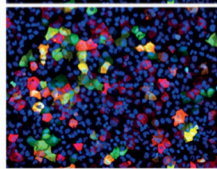
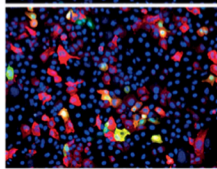
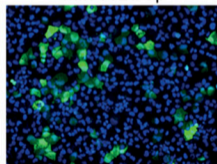
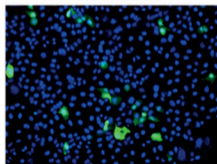
day 0 miRNA reverse transfection
day 1 HR reporter plasmid transfection
day 4 Cell fixation, DAPI staining
Immunostaining for total EGFP
Analysis of EGFP fluorescence

No miRNA

miR-302d-3p

DAPI EGFP

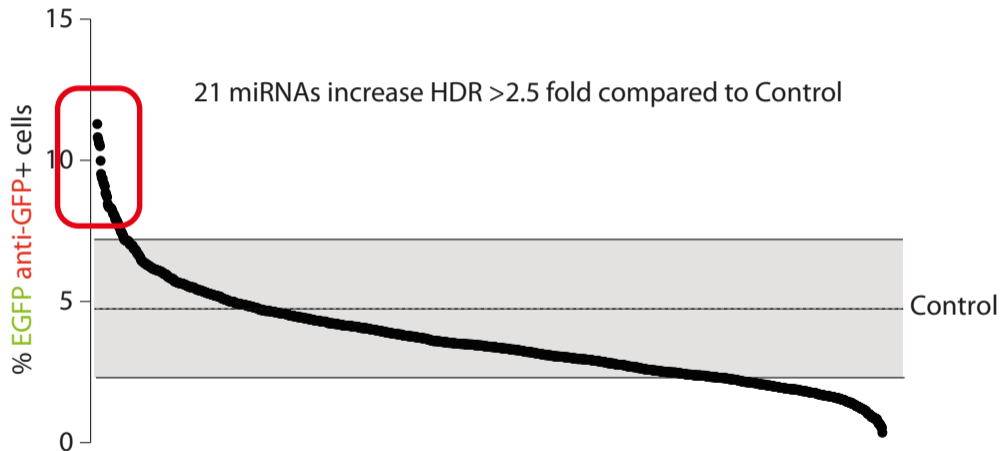
DAPI EGFP anti-GFP



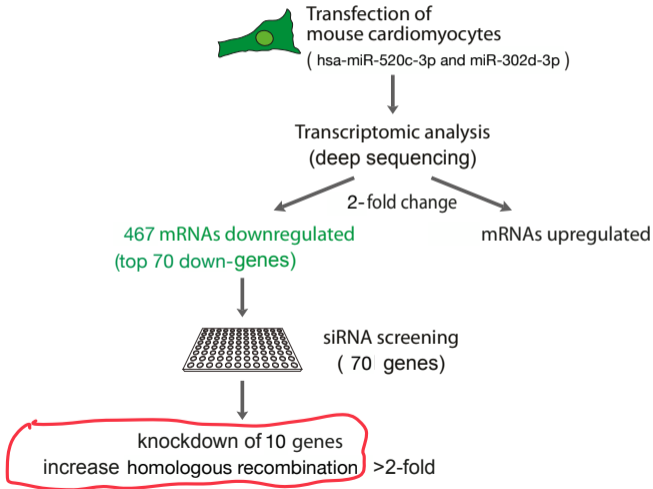
U2OS cells

RED: ALL TRANSFECTED CELLS
GREEN: RECOMBINED GFP

HTS for miRNAs enhancing HDR



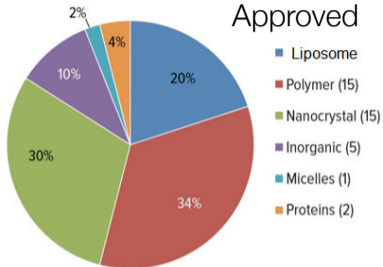
Effect of the top miR-302d-3p and miR-520c-3p common downregulated genes on HDR in cardiomyocytes



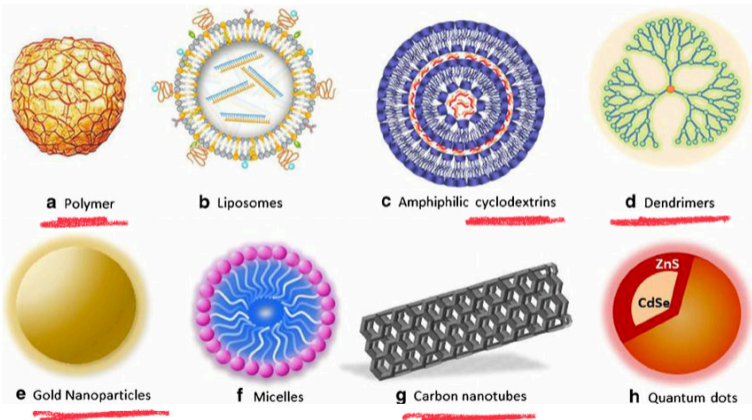
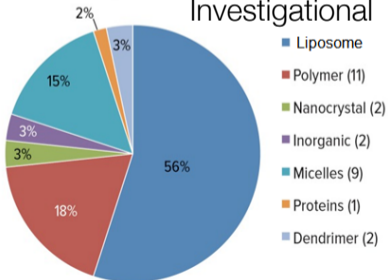
Cardiac delivery of RNA therapeutics

Nanocarriers for therapeutic ncRNA delivery

Approved

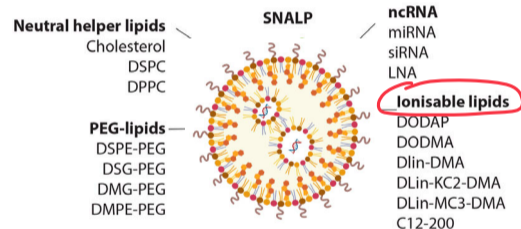


Investigational

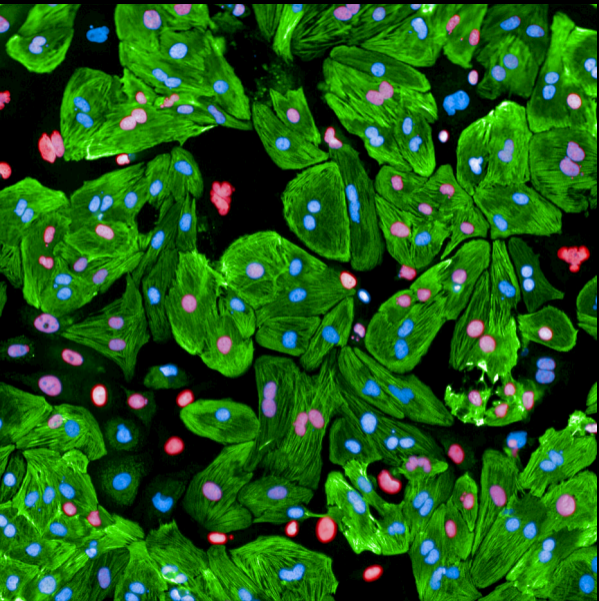


Stable Nucleic Acid-Lipid nanoParticles (SNALPs)

Product	Patisiran	BNT162b2 (Pfizer-BioNTech COVID-19 vaccine)	mRNA-1273 (Moderna COVID-19 vaccine)
LNP technology	SNALP	SNALP	SNALP
Therapeutic RNA	Anti-TTR siRNA	SARS-CoV-2 Spike modified mRNA	SARS-CoV-2 Spike modified mRNA
Ionizable lipids	DLin-MC3-DMA	ALC-0315	SM-102
Neutral lipids	DSPC	DSPC	DSPC
	Cholesterol	Cholesterol	Cholesterol
PEG lipids	PEG ₂₀₀₀ -C-DMG	PEG ₂₀₀₀	PEG ₂₀₀₀ -C-DMG
Reference	[46]	[35]	[34]

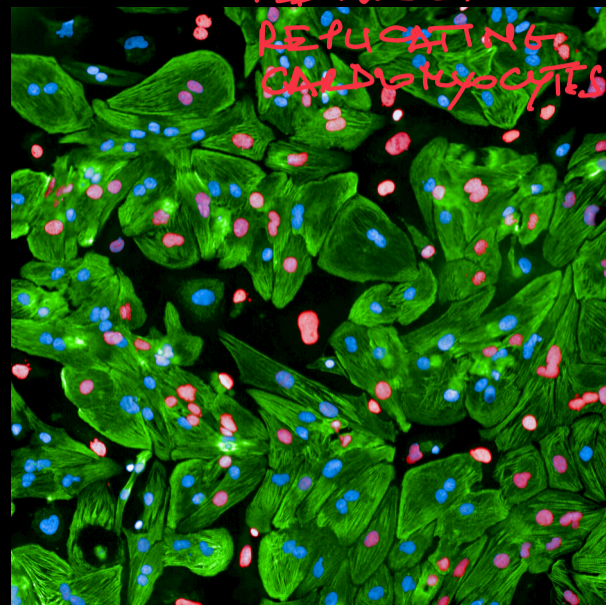


MC3-SNALP1 2.5:1



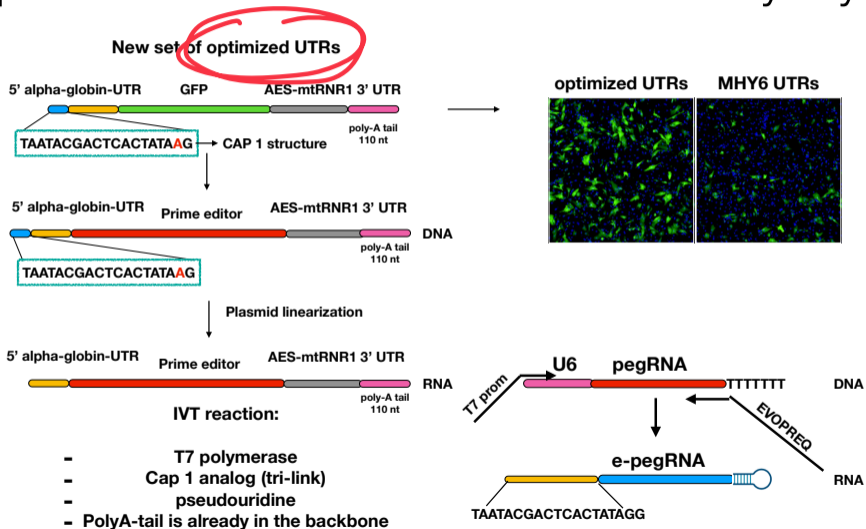
cTnT EdU DAPI

JSNALP2 2.5:1



RED NUCLEI =
REPLICATING
CARDIOMYOCYTES

Optimisation of in vitro transcription (IVT) for optimal mRNA translation in cardiomyocytes



Transfection of GFP mRNA in mouse cardiomyocytes by SNALPs

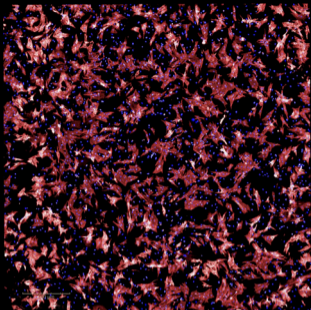
SNALP3

MC3	40%
DOPE	22%
Cholesterol	35%
C16 Ceramide PEG	3%

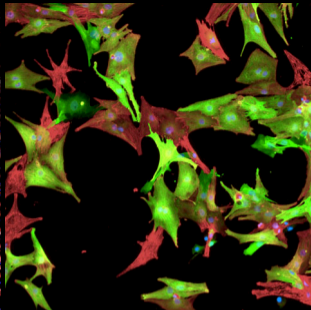
> 95%
efficiency !!

Josef Huntington

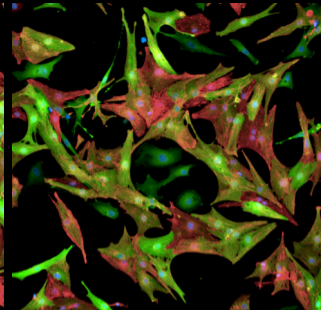
4 hr



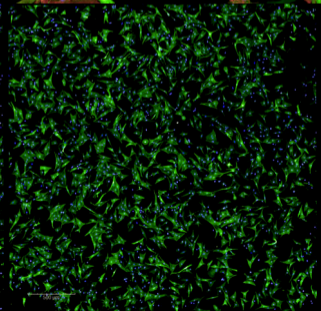
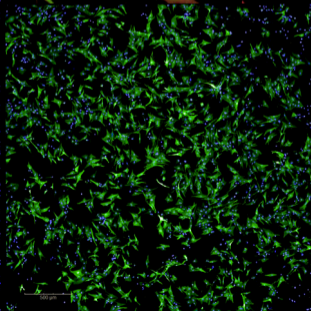
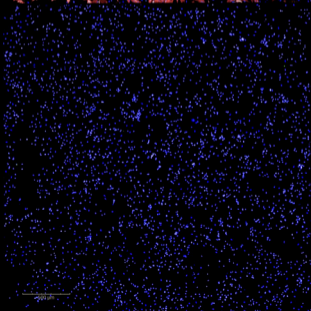
24 hr



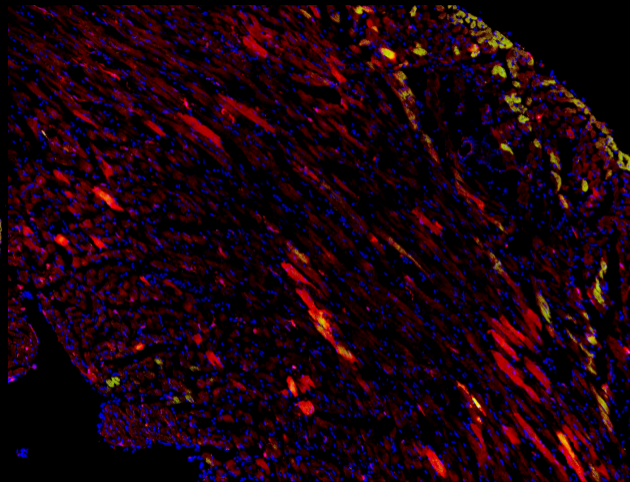
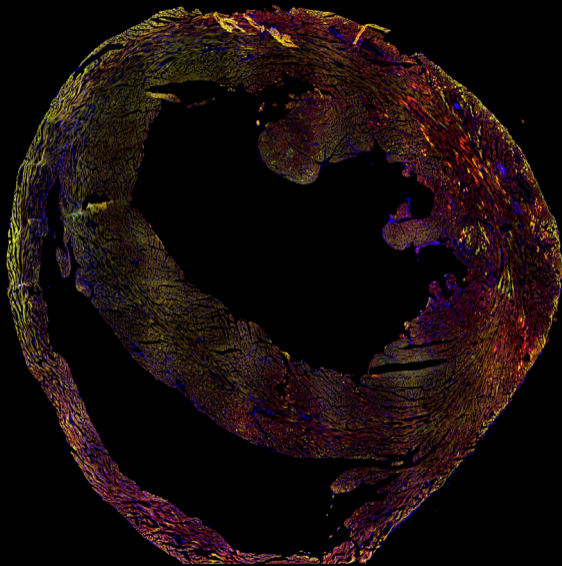
48 hr



α -Actinin GFP DAPI



JSNALP9-GFP mRNA

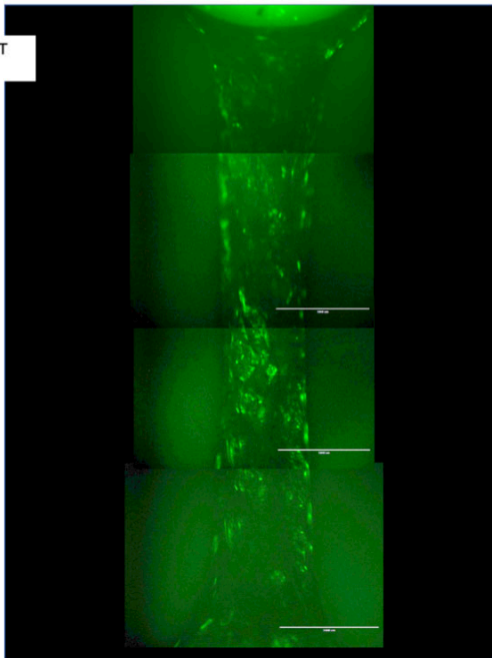


Native GFP GFP DAPI

Pre-clinical human models

2nd experiment

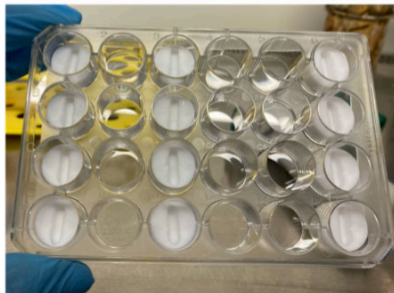
Outer layer of the EHT
Live microscopy



Giorgia Rizzari
Florian Weinberger
Thomas Eschenhagen

LNP - mGFP

- Lipid nanoparticles on EHT before macroscopic contraction (5days)
- Transduction chamber overnight
 - EHT fixed after 24h
 - 8ug/mL in 200uL Volume
 - White posts



Transduction chamber

Preparation of viable adult ventricular myocardial slices from large and small mammals

Samuel A Watson¹, Martina Scigliano¹, Ifigeneia Bardi¹, Raimondo Ascione², Cesare M Terracciano¹ & Filippo Perbellini¹

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Published online 30 November 2017; doi:10.1038/nprot.2017.139

Biomimetic electromechanical stimulation to maintain adult myocardial slices in vitro

Samuel A. Watson¹, James Duff¹, Ifigeneia Bardi¹, Magdalena Zabielska², Santosh S. Atanur³, Richard J. Jabbe⁴, André Simon⁴, Alejandra Tomas⁵, Ryszard T. Smolenski², Sian E. Harding¹, Filippo Perbellini¹ & Cesare M. Terracciano¹

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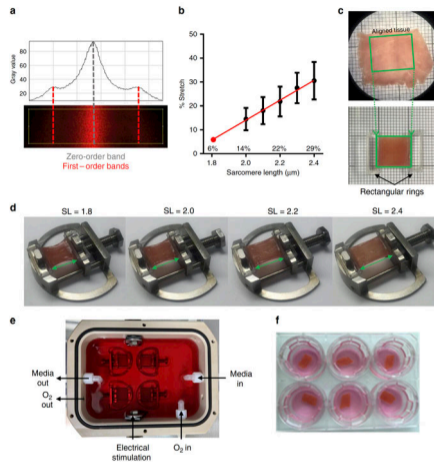
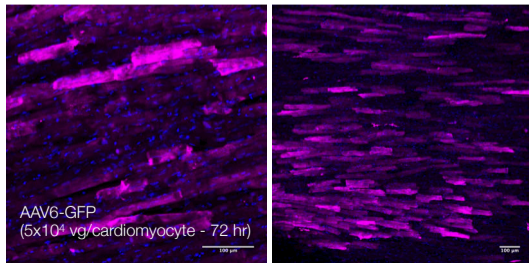
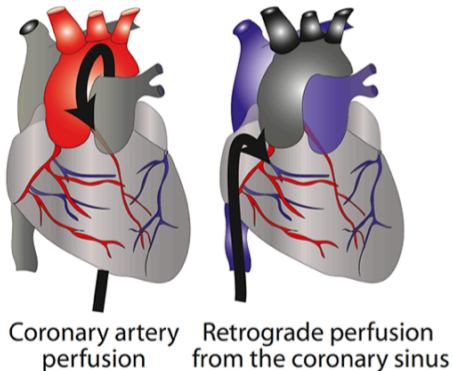


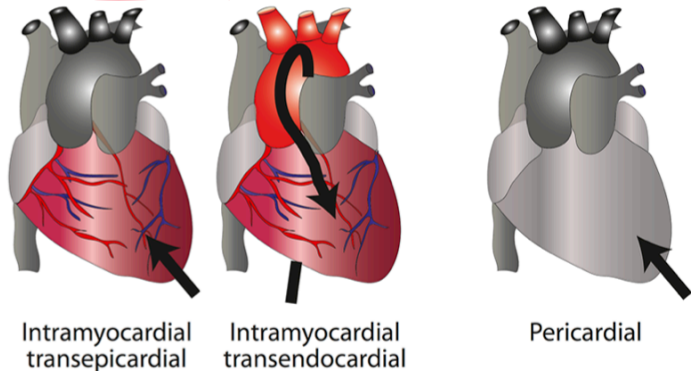
Fig. 1 Application of electromechanical stimulation to rat myocardial slices. **a** Assessment of laser diffraction pattern. Peaks correspond to diffraction bands – the bright, central band corresponds to a zero-order band (grey), while the smaller bands on the left and right correspond to the less intense first-order bands (red). The distance between the zero-order and first-order band can be measured and used to calculate sarcomere length. **b** Percentage stretch required to set the average diastolic rat myocardial slice sarcomere length. Rat myocardial slices were progressively stretched until a diffraction pattern equivalent to SL = 2.0 μ m was achieved. The % stretch was then measured using calipers. This was repeated at 0.1- μ m intervals until SL = 2.4 μ m. A linear regression was used to estimate SL ($r^2 = 0.4776$, $y = 41.67x - 69.26$) (SL = 2.0 $N = 11$, SL = 2.1 $N = 16$, SL = 2.2 $N = 14$, SL = 2.3 $N = 15$ and SL = 2.4 $N = 2$). **c** Top—rat myocardial slice visualised using a microscope. The slice is placed on a mm grid and the green rectangle highlights the aligned portion of the myocardial slice using surgical glue. Rings are attached perpendicular to myofibril orientation. **d** Myocardial slice attached to the posts of a custom-made stretcher using rings. Images show the different stretches required to achieve SL = 1.8–2.4 μ m in rat myocardial slices. **e** Custom-made culture chamber. Myocardial slices are superfused with culture media. Media was oxygenated directly in the culture chamber. Field stimulation was provided via carbon electrodes. **f** Six-well plate with Transwell inserts. Unloaded myocardial slices placed on a porous membrane and each well filled with 1 mL of culture media. $N =$ number of myocardial slices. Mean \pm standard error is shown on graphs. Source data are provided as a Source Data file

Routes for myocardial delivery

Vascular perfusion



Intramyocardial injection



Pericardial

Take home messages

- Advanced therapies based on mRNAs and small ncRNAs
- Lead nucleic acid search through in vivo and in vitro systematic screenings
- Transient modification of cell properties using ncRNAs for proliferation, vector permissivity and precise gene editing
- Cardiac RNA delivery using lipid nanoparticles

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TRIESTE





Thank you
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