

Profluent, GEMMABio, and ARPA-H's 160 Million Base Editor Moonshot: Why the AI-Designed Editor Was Never the Bottleneck and the FDA's Plausible Mechanism Pathway Is the Real Bet

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Thoughts on Healthcare Markets & Technology



Profluent, GEMMABio, and ARPA-H 's 160 Million Base Editor Moonshot: Why the AI-Designed Editor Was Never the Bottleneck and the FDA's Plausible Mechanism Pathway Is the Real Bet

ARPA-H just put \$160M behind seven teams to advance personalized genetic medicines. The GEMMABio/Profluent team grabbed the headlines. But the AI-designed editor is almost certainly not the most important part of this story. A thread...

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Abstract

ARPA-H's THRIVE program (Treating Hereditary Rare diseases with In Vivo precision genetic medicines) has put up to \$160 million behind seven teams with a mandate to advance personalized precision genetic medicines over five years, and ARPA-H's program is designed to support scalable, affordable, and sustainable cures for disease patients. The GEMMABio/Profluent team is the flashiest of the group, and its announcement got a founder victory lap on X. The actual story is underneath the tweet.

The quick version:

- Profluent (OpenCRISPR-1, April 2024, protein language models trained on more than 115 billion protein sequences) supplies AI-designed base editors. GEMMABio (Jim Wilson) supplies delivery and translation. Targets: HoFH (LDLR) and MSUD (BCKDHB), both monogenic liver diseases, delivered as encapsulated mRNA to hepatocytes.
- The pitch word is scalable: a library that can correct any transition mutation versus bespoke, artisanal, hand-built editors.
- But the editor was never the expensive part. Delivery, per-indication CMC, 100% design for n-of-few, and reimbursement are. A cheap infinite editor library touches any of the four.
- The genuinely radical piece is regulatory. FDA's February 2026 draft guidance on individualized therapies and plausible mechanism, inspired directly by Baby's Breath, opens the door to master protocols and label extension to mutations never clinically tested.
- The counterweight nobody is putting on the slide: Sarepta's Elevidys remains a cautionary tale after multiple safety controversies and a June 2025 FDA request to suspend U.S. shipments of the therapy for non-ambulatory Duchenne patients; the company later discontinued sales in that subgroup.

Longer take below, with the parts that separate a real platform thesis from a prelude.

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What actually landed this week

Strip the moonshot language out and here is the transaction. ARPA-H, the health version of DARPA that likes to promise breakthroughs in years not decades, announced seven performer teams for a program called THRIVE, with up to \$16 million total over five years, including teams from CHOP, St. Jude, the Broad, M General, Stanford, and a biotech called GEMMABio. Each team takes a slice of a rare genetic disease map, and each is supposed to advance toward a first-in-human

milestone under the program's aggressive schedule. The whole thing is built on the premise that in vivo precision genetic medicine has stopped being a science project and started being a manufacturing question.

The GEMMABio slice is the one that got the airtime, because that is the team who went to Profluent, and Profluent is the shop that keeps showing up in the AI-designs-gene-editor headlines. Their piece of THRIVE, dressed up with the acronym RA goes after four founder mutations across two diseases: homozygous familial hypercholesterolemia, where a broken LDLR gene sends cholesterol into orbit from birth, and maple syrup urine disease, a BCKDHB defect that is exactly as unpleasant as the name is charming. The plan is lipid nanoparticles carrying mRNA that code for a Profluent-designed base editor, aimed at the liver, correcting the specific letter that broke. No virus, no permanent cargo, just a transient set of molecular scissors that show up, fix a base pair, and leave. That last part matters more than the AI part, getting that ordering right is the whole point of this piece.



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