# Safety and Tolerability of a Single Subcutaneous Dose of Anti-Angiogenesis Drug to Treat Neovascular Age-related Macular Degeneration (wet AMD) and Diabetic Macular Edema (DME)

# Disclosures

- Rishi Sharma, PhD, Santiago Appiani, and Jeffrey Cleland, PhD are employees of Ashvattha Therapeutics which funded the research
- Jerome Moore and Brian Rogers are employees of Pacific BioDevelopment, a consulting firm, which was contracted by Ashvattha for the design and analysis of the animal studies

# Background

- Hydroxyl dendrimers (HDs) are a new class of compounds to enable disease cell targeted precision medicine with superior targeting compared to antibodies
- HDs are metabolically stable in animals and humans, smaller than antibodies, and renally excreted intact (no liver uptake).
- Chemical conjugation of small molecule drugs to HDs create HD therapeutics (HDTs) that are new chemical entities having the distribution, clearance and safety profile of the core HD.
- HDTs reduce or eliminate off target toxicity and increase efficacy in preclinical models when compared to small molecule therapeutics.
- Hydroxyl dendrimers (HDs) selectively target choroidal neovascular (CNV) lesions after a single systemic dose.<sup>1-4</sup>
- HDs are taken up by macrophages, microglia and hypertropic retinal pigment epithelial (RPE) cells only in areas of neovascularization or inflammation in the choroid and retina.<sup>1,4</sup>
- HDs are retained in these cells in CNV lesion for at least 1 month after a single systemic dose.<sup>1</sup>
- Previous studies demonstrated a sustained (14 days) inhibition of CNV formation after a single systemic dose of D-4517.2 comparable to an intravitreal (IVT) dose of aflibercept<sup>3</sup>
- A study in Oxygen-Induced Retinopathy (OIR) mouse model demonstrated comparable efficacy between subcutaneously dosed D-4517.2 and aflibercept (data not shown).

# D-4517.2: Systemic Therapy for Macular Disease



#### EXTRACELLULAR Antibodies block **outside** th cell (by attaching to ligand, receptors) Cell Membrane INTRACELLULAR D-4517.2 knocks out targets inside the ce And stays in cell f weeks/month

#### **Nanomolar binding to RTKs**:

10/14 nM (VEGFR1/2), 11/7.5 nM (PDGFRA/PDGFRB), 41 nM (CSF1R), 3 nM (cKIT); Each D-4517.2 has 7-8 drug arms



## **Restores VEGF Expression to Normal**

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# **GLP** Toxicology

- Toxicology studies were conducted by Charles River Laboratories in accordance with ICH M3 (R2) and per FDA requirements to support an IND.
- In vitro data demonstrated that D-4517.2 was stable in human, rat and dog plasma with no detectable metabolism.
- Single dose and multiple dose (28 day) GLP toxicology studies were conducted in rats and dogs with comprehensive clinical evaluations and anatomical pathology evaluations that included the examination of a full list of tissues.
- Single Dose & Repeat Dose (28 day) Spague-Dawley Rat Studies (subcutaneous) • Clinical and anatomical pathology alterations attributable to changes in the kidney (clearance organ).
- No-observed-adverse-effect level (NOAEL) of 40 mg/kg.
- Single Dose & Repeat Dose (28 day) Beagle Dog Studies (subcutaneous) • Minimal tubular degeneration in the kidney associated with the pigment accumulation; NOAEL of 50 mg/kg. Genetic Toxicology
- No evidence of genotoxicity was observed in in vitro bacterial (Ames) and mammalian (micronucleus) assays or the in vivo micronucleus test in rats.
- Local Tolerance
- Reversible dose-responsive gross and microscopic changes at the site of injection were noted in rats and dogs.

## **Comparison of Animal NOAEL Doses and Highest Anticipated Clinical Dose**

Species	NOAEL Following Weekly Administration 4-Week Study (mg/kg)	HED <sup>a</sup> (mg/kg)	Multiple of Highest Anticipated Bi-Weekly Clinical Dose <sup>b</sup>
Rat	40	6.5	3.25
Dog	50	28	14

a. HEDs are calculated using a factor of 6.2 for Sprague Dawley rats and 1.8 for Beagle dogs. b. When compared to the 2 mg/kg human dose.

# Pharmacokinetics - Allometric Scaling

- Pharmacokinetics of D-4517.2 was evaluated in mice, rats, and dogs at Charles River Laboratories
- Plasma concentrations were determined by LC/MS/MS
- Allometric plot of Log CL/F (Clearance, h-μg/mL/Bioavailability) vs
- Log BW (Body Weight, kg) indicates a linear relationship

### **Translation to Human Clinical Trials**

- Efficacy in CNV mouse model at 0.5 and 2 mg/kg<sup>4</sup> yield exposures of 1.2 to 4.7 h- $\mu$ g/mL
- Proposed human doses of 0.25 to 1 mg/kg projected to yield comparable exposure

# Phase 1 Healthy Volunteer Study Design

• Single Ascending Subcutaneous Dose Phase 1 in Healthy Volunteers

#### • **Objectives**:

- Primary: Evaluate safety and tolerability of D-4517.2 after single subcutaneous (SC) doses in healthy subjects
- Secondary: Determine the pharmacokinetic (PK) profile of D-4517.2 after single SC doses in healthy subjects

#### Summary Design

- Sentinel (1) subject at each dose level evaluated for safety and tolerability at Day 3 by Safety Review Committee (SRC)
- Additional 3 subjects enrolled at same dose level
- After all subjects at a dose level achieve Day 3, SRC evaluates safety and tolerability to escalate to next dose level
- Dose Levels: 0.25 mg/kg (Cohort 1), 0.50 mg/kg (Cohort 2), 1.0 mg/kg (Cohort 3), 2.0 mg/kg (Cohort 4)
- For additional details see <u>https://www.clinicaltrials.gov/ct2/show/NCT05105607</u>









Conducted at Nucleus Networks, Brisbane, Australia

# Phase 1 Demographics

Parameter	Statistics	D-4517.2 (0.25 mg/kg) (N=4)	D-4517.2 (0.50 mg/kg) (N=4)	D-4517.2 (1.0 mg/kg) (N=4)	Overall (N=12)	
Age (years)	Mean	27.1	44.2	41.0	37.5	
	Std Dev	5.0	16.6	23.9	31.1	
	Median	26.4	46.4	39.7	17.2	
	Min, Max	22.5, 33.2	24.4,59.5	22.4, 65.9	22.4, 65.9	
Male	n (%)	0 (0)	1(25)	1(25)	2 (16.7)	
Female	n (%)	4 (100)	3 (75)	3 (75)	10 (83.3)	
Asian	n	1 <sup>a</sup>	0	0	1	
White	n	<b>1</b> <sup>a</sup>	4	4	9	
Other	n	2	0	0	2	
Unknown	n	1	0	0	1	
Hispanic or Latino	n	2	0	0	2	
Not Hispanic or Latino	n	2	4	4	10	
a. One subject identified as part White and part Asian						
Phase 1 Safety & Pharmacokinetics						

## **OVERALL S**

#### Intent-to-Trea Subjects Discontinue Adverse Event Subjects with

Drug-related

Serious TE Drug-related Ser

### **Pharmacokinetics**

Dose (mg/kg)	C <sub>max</sub> (μg/mL)	C <sub>max</sub> /D (kg*µg/mL/mg)	T <sub>max</sub> (h)	AUC <sub>last</sub> (h*µg/mL)	AUC <sub>last</sub> /D (h*kg*µg/mL/mg)	CL/F (mL/hr/kg)	T <sub>1/2</sub> (h)
0.50	0.171	0.342	11.333	1.679	3.359	114.960	14.755
1.00	0.320	0.320	11.500	5.430	5.430	124.578	11.298
$C_{max}$ = Maximum plasma concentration; D = Dose; $T_{max}$ = time to maximum plasma concentration; AUC <sub>last</sub> = Area under the curve to last time point measured; CL = Clearance; F = bioavailability; $T_{1/2}$ = plasma half-life Note: Plasma levels after 0.25 mg/kg dose were below the level of quantitation (BLO < 0.1 µg/mL) with excention of 1 su							



• Safe and well tolerated at all doses tested to date (Cohort 4 currently recruiting) • Mild transient injection site reactions to be addressed with injection method changes • Exposures consistent with allometric scaling indicating 0.50 to 1.0 mg/kg in humans may provide comparable effect to that observed in CNV mouse model

- aflibercept (n = 270)

### References

- Sharma et al, 2020, ARVO Poster: 4927 B0132

- Cleland et al, 2021, ARVO Poster: 3540583

AFETY	D-4517.2 (0.25 mg/kg) (N=4) n (%)	D-4517.2 (0.50 mg/kg) (N=4) n (%)	D-4517.2 (1.0 mg/kg) (N=4) n (%)	Overall (N=12) n (%)
t Set	4 (100 )	4 (100)	4 (100)	12 (100)
from Study	0	0	0	0
(Total)	0	5	2	7
	0	0	0	0
TEAE	0	2 (50)	1 (25)	3 (25)
ΓΕΑΕ	0	4	1	5
λE	0	0	0	0
ous TEAE	0	0	0	0

0.50 mg/kg: 1 subject with two mild transient injection site reactions (ISR) & 1 subject with mild transient ISR and mild transient fatigue; 1.0 mg/kg: 1 subject with mild transient ISR; No abnormalities on Safety Labs (N=12)

## **Conclusions & Next Steps**

## Single subcutaneous doses of D-4517.2 were safe and well tolerated in healthy subjects

• **D-4517.2 exposure** in healthy subjects translates to efficacious doses in CNV mouse model<sup>4</sup>

### • Phase 2 study initiating in wet AMD and DME patients

• Stage 1: Crossover design to evaluate IVT aflibercept vs SC D-4517.2 in same patient (n = 30)

• Stage 2: Randomized, double masked, sham/placebo non-inferiority study compared to

Kambhampati et al, 2021, J. Controlled Release 335: 527-540 Cleland et al, 2020, ARVO Presentation 3974, Session 429

