Suprachoroidal Delivery of RGX-314 for Neovascular AMD: Initial Results from the Phase II AAVIATE® Study

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RGX–314 for Treatment of Neovascular Age-related Macular Degeneration (nAMD)

RGX–314 PRODUCT CANDIDATE

Vector: AAV8

Gene: anti-VEGF fab



Suprachoroidal (nAMD/DR)



Mechanism of action:

Reducing leaky blood vessel formation by giving ocular cells the ability to produce an anti-VEGF fab



More efficient gene delivery to the RPE¹

+

Leveraging current standard of care in transgene

- FDA-approved mAbs and mAb fragments that inhibit VEGF are the current standard of care for treatment of nAMD
- RGX–314 gene encodes an anti-VEGF mAb fragment (fab)

RGX–314: AAV8 encoding anti–VEGF fab

Potential for long-term therapeutic anti-VEGF expression



AAVIATE®: RGX-314 Phase II Clinical Trial in nAMD

Primary Objective

 To evaluate the mean change in BCVA for RGX-314 compared with ranibizumab monthly injection at Month 9

Secondary Objectives

- Safety and tolerability of RGX-314
- Change in central retinal thickness (CRT) as measured by Spectral Domain Optical Coherence Tomography (SD-OCT)
- Additional anti-VEGF injections post-RGX-314 ("Rescue")

Retreatment Criteria

Based on worsening vision and/or fluid

Subjects: Up to 95 total

15 study sites across the United States

Route of Administration

In-office SCS Microinjector[™] delivers RGX-314 to the suprachoroidal space

Key Inclusion Criteria

- Male or female ≥ 50 to 89 years of age
- Previously treated nAMD subjects with fluid on OCT at trial entry
- Documented response to anti–VEGF at trial entry (assessed by Reading Center)
- BCVA between ≤ 20/25 and ≥ 20/125 (≤ 83 and ≥ 44 Early Treatment Diabetic Retinopathy Study [ETDRS] letters) in the study eye
- Phakic or Pseudophakic



RGX-314 AAVIATE® Study Design



No prophylactic steroids given throughout the study





AAVIATE Baseline Characteristics (Cohort 1 – Cohort 3)

Variable		Control Ranibizumab (N=10)	Cohort 1 (N=15)	Cohort 2 (N=15)	Cohort 3 (N=20)	Total (N=60)
BASELINE	Mean Age (Years)	75.9	74.0	77.9	72.6	74.8
	Screening BCVA (Letters)	72.7	75.1	70.7	72.8	72.9
	Screening OCT (Microns)	240.3	269.2	275.7	265.8	264.9
	Phakic n (%)	3 (30.0%)	6 (40.0%)	7 (46.7%)	10 (50.0%)	26 (43.3%)
PRIOR THERAPY	Months Since nAMD Diagnosis (Mean)	26.7	30.4	19.9	18.6	23.2
	# Injections Since nAMD Diagnosis (Mean)	13.4	20.6	11.1	9.7	13.4
	# Injections in the Past Year (includes Day 1)	6.8	7.2	6.0	6.2	6.5
	Average Annualized Injections in the Past Year (includes Day 1)	8.8	9.7	8.7	8.9	9.0

Ocular variables refer to study eye only. Average annualized injections in the past year is: (Total # of prior injections)/(minimum(366 days, Duration between first injection and Day 1)/365.25).



AAVIATE Safety Summary

- RGX–314 was well–tolerated in Cohorts 1–3 (n=50) with follow-up ranging from 1 month 12 months
 - 4 SAEs: None were considered drug-related:
 - One death resulting from a complete atrioventricular block (Cohort 1)
 - One hospitalization due to intestinal obstruction (Cohort 1)
 - One CVA (Cohort 2)
 - One gastric ulcer (Cohort 3)
- RGX-314: Cohort 1 (n=15)
 - Common ocular TEAEs¹ in the study eye were generally mild with none severe:
 - Conjunctival Hemorrhage (5/15, 33%)
 - Mild Intraocular Inflammation² (4/15, 27%) observed on slit-lamp examination
 - All cases resolved within days to weeks on topical corticosteroids which have been discontinued
 - Worsening of nAMD³ (3/15, 20%)
 - Conjunctival Hyperemia (2/15, 13%)
 - Dry Eye (2/15, 13%)
 - No cases of chorioretinal vasculitis or occlusion, or hypotony were observed

Data cut Sep 13, 2021

3. All reported from one investigator at one site



^{1.} Common ocular TEAEs defined as \geq 10% of RGX-314 treated study eyes

^{2. 3} patients presented with anterior cell (+0.5, +2, +2) and 1 patient presented with vitreous cell (trace); onset range was 2-6 weeks post-dosing

CVA: Cerebrovascular accident; SAE: Serious Adverse Event; TEAE: Treatment Emergent Adverse Event

Cohort 1: Mean CRT from Day 1 (Screening) Through Month 6



Data cut Sep 13, 2021

1. Values are mean change from Day 1.

2. One patient discontinued the study after Week 12, and only data up to week 12 is included for the subject. For one patient who has missing Weeks 8 and 28 visits, the missing data has been interpolated using the average of before and after the missing visit.



Cohort 1: Mean Change in CRT from Day 1 (Screening) Through Month 6



Data cut Sep 13, 2021

*One patient discontinued the study after Week 12, and only data up to week 12 is included for the subject. For one patient who has missing Weeks 8 and 28 visits, the missing data has been interpolated using the average of before and after the missing visit.



Cohort 1: Mean BCVA from Day 1 (Screening) Through Month 6



Best Corrected Visual Acuity (BCVA) 95% CI

Data cut Sep 13, 2021

1. Values are mean change from Day 1.

2. One patient discontinued the study after Week 12, and only data up to week 12 is included for the subject. For one patient who has missing Weeks 8 and 28 visits, the missing data has been interpolated using the average of before and after the missing visit.



Cohort 1: Mean Change in BCVA from Week 1 (Randomization) Through Month 6



Data cut Sep 13, 2021

*One patient discontinued the study after Week 12, and only data up to week 12 is included for the subject. For one patient who has missing Weeks 8 and 28 visits, the missing data has been interpolated using the average of before and after the missing visit.





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Change in annualized injection rate is the difference between historical annualized injection rate and on-study annualized injection rate up to 6 months post-RGX-314. Historical annualized injection rate is (Total # of prior injections)/(minimum(366 days, Duration between first injection and Day 1)/365.25). On-study annualized injection rate is (Total # of injections on Study)/(Duration on Study/365.25) where on-study is defined from post-D1 to a specified cut-off date.

Cohort 1 Injections: Pre and Post RGX-314 (n=15)

Change in annualized injection rate -75.9%

E AAVIATE

Summary of Initial Results from the Phase II AAVIATE® Study

RGX-314 Cohorts 1-3 (n=50): Safety

Suprachoroidal RGX-314 has been well-tolerated

RGX-314 Cohort 1 (n=15): 6 Month Results

- Stable visual acuity and central retinal thickness
- Meaningful reduction in injection burden in RGX-314 treated subjects (75.9%)
- 4 patients with mild intraocular inflammation resolved within days to weeks with topical corticosteroids



Video: N. London

AAVIATE study has been expanded to Cohorts 4 and 5 (Dose level 3: 1x10¹² GC/eye, NAb- and NAb+ patients)



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