

# PEMVIDUTIDE PRESERVES LEAN BODY MASS DURING WEIGHT LOSS IN PATIENTS WITH OVERWEIGHT AND OBESITY: RESULTS OF A PHASE 2 MRI-BASED BODY COMPOSITION SUB-STUDY

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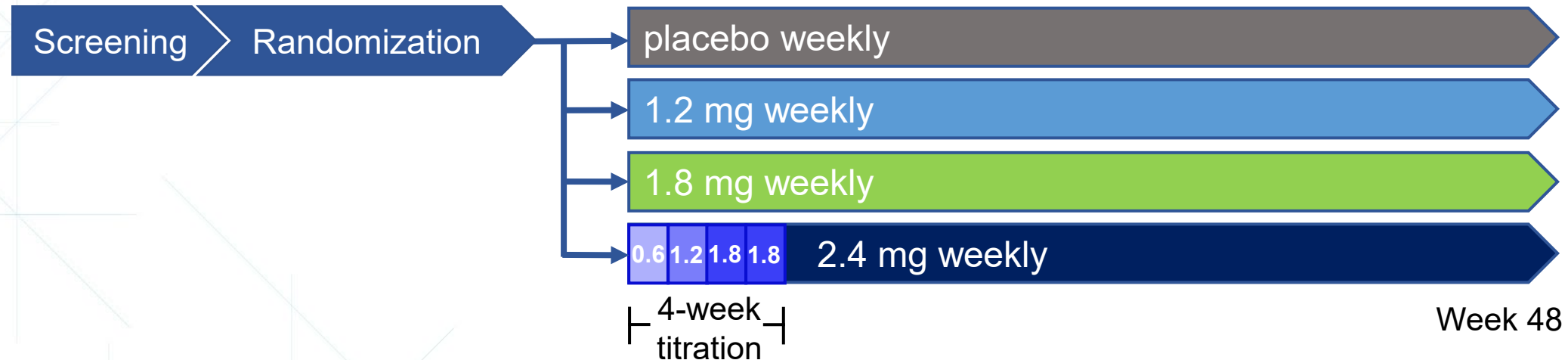
# BACKGROUND AND OBJECTIVE

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- Pemvidutide is a potency-balanced GLP-1/glucagon dual receptor agonist that has been shown to significantly reduce body weight in obese and overweight subjects.
- Reductions in lean mass with weight loss may lead to unwanted effects (fractures, loss of physical function), particularly in susceptible individuals such as the elderly
- Weight loss and lean mass were assessed in MOMENTUM, a Phase 2 trial of pemvidutide in the treatment of subjects with overweight and obesity

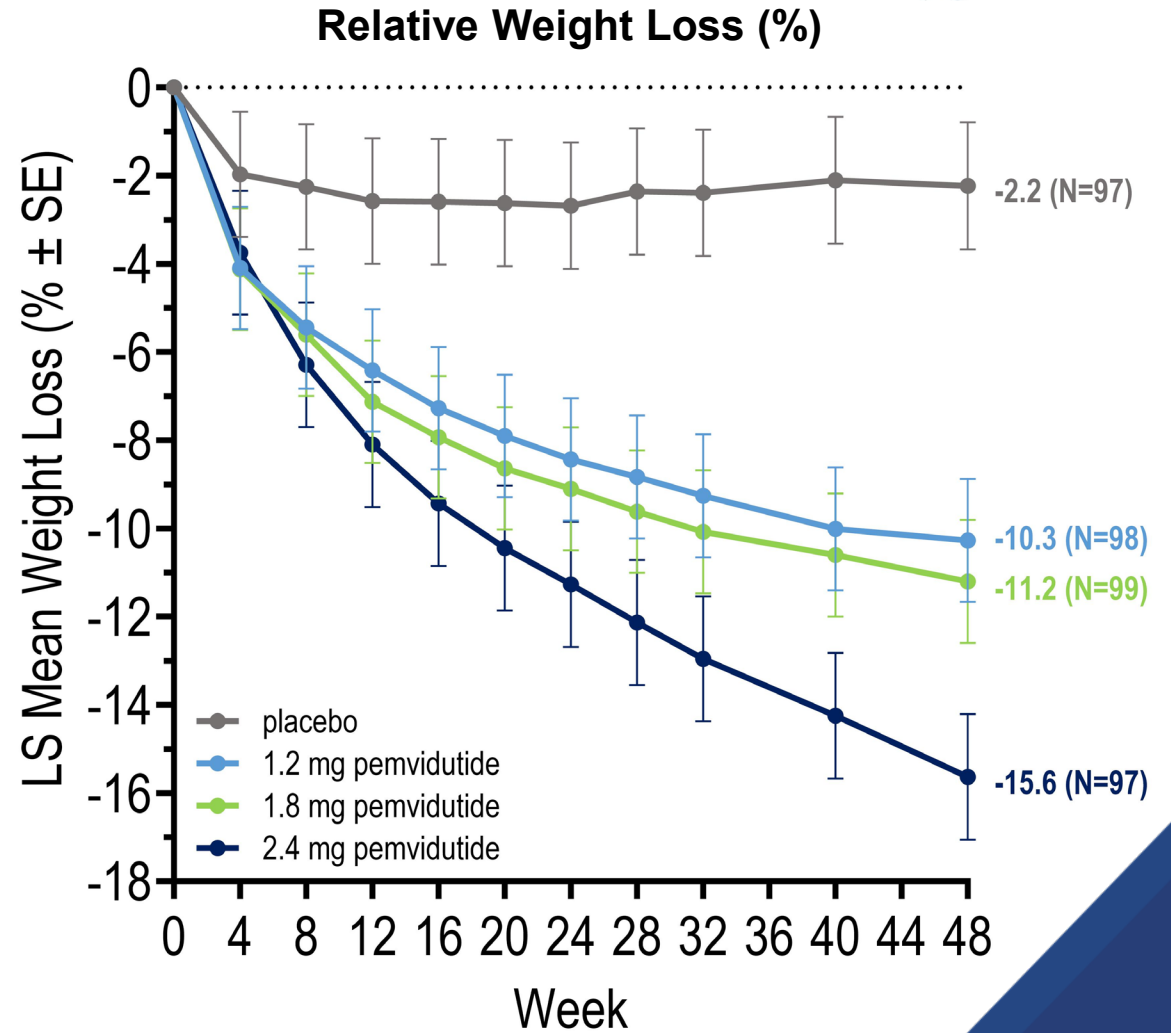
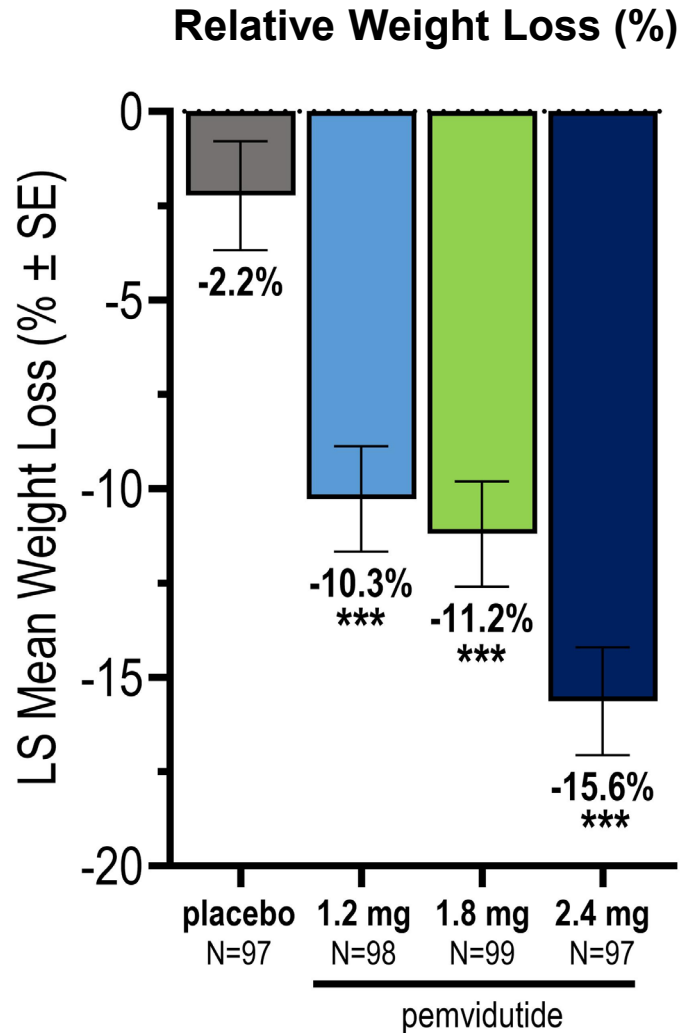
# MOMENTUM OBESITY TRIAL DESIGN

- Phase 2, 48-week trial of pemvidutide in 391 subjects with overweight or obesity
- Randomized 1:1:1:1 to 4 treatment arms, stratified by gender and baseline BMI, with standard lifestyle interventions
- MRIs were performed in a body composition substudy of 67 subjects, 50 receiving pemvidutide, at baseline and Week 48



# WEIGHT LOSS OF 15.6% ACHIEVED AT WEEK 48 ON 2.4 MG

MEAN WEIGHT LOSS OF 32.2 LBS AND MAXIMAL WEIGHT LOSS OF 87.1 LBS



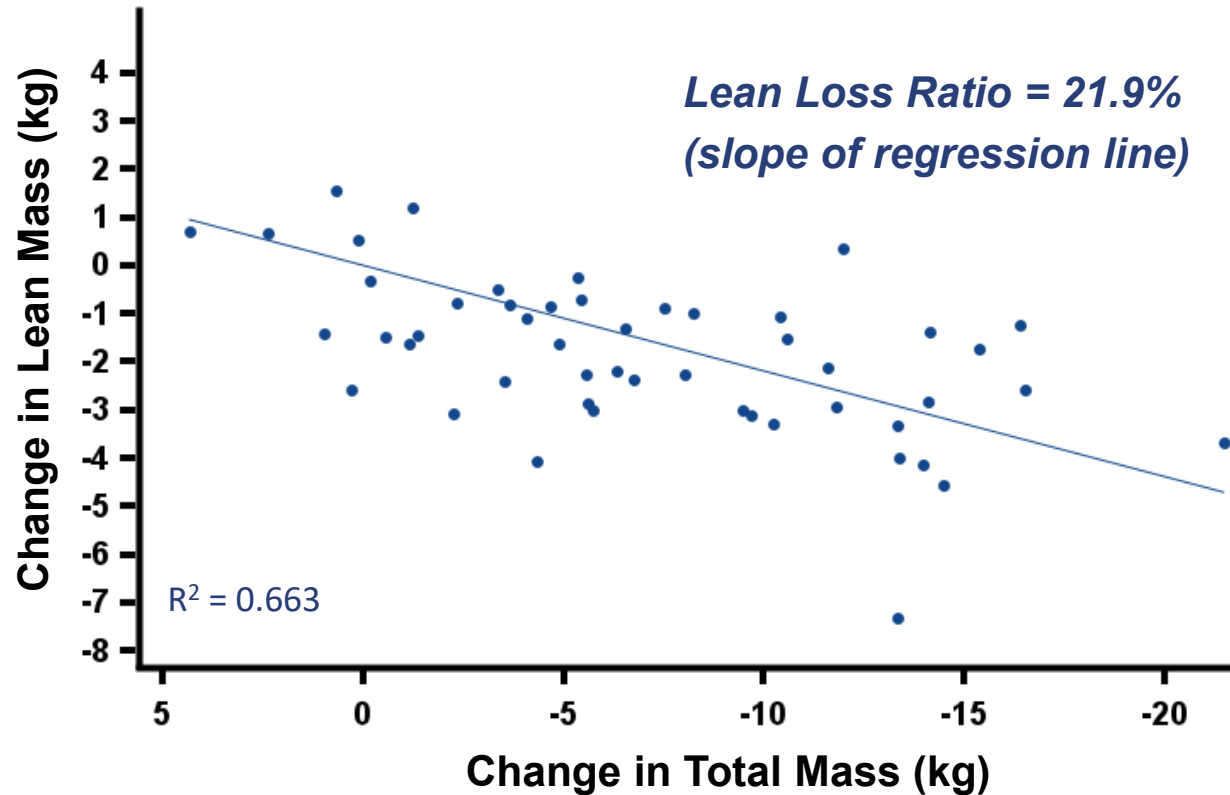
# LEAN LOSS RATIO LOWER THAN REPORTED WITH DIET AND EXERCISE

MRI-BASED BODY COMPOSITION ANALYSIS CONFIRMS PREFERENTIAL LOSS OF ADIPOSE TISSUE OVER LEAN TISSUE

## LEAN LOSS RATIO

Change in Lean Mass / Change in Total Mass\*

Pemvidutide-treated Subjects (n = 50 across all dose groups)

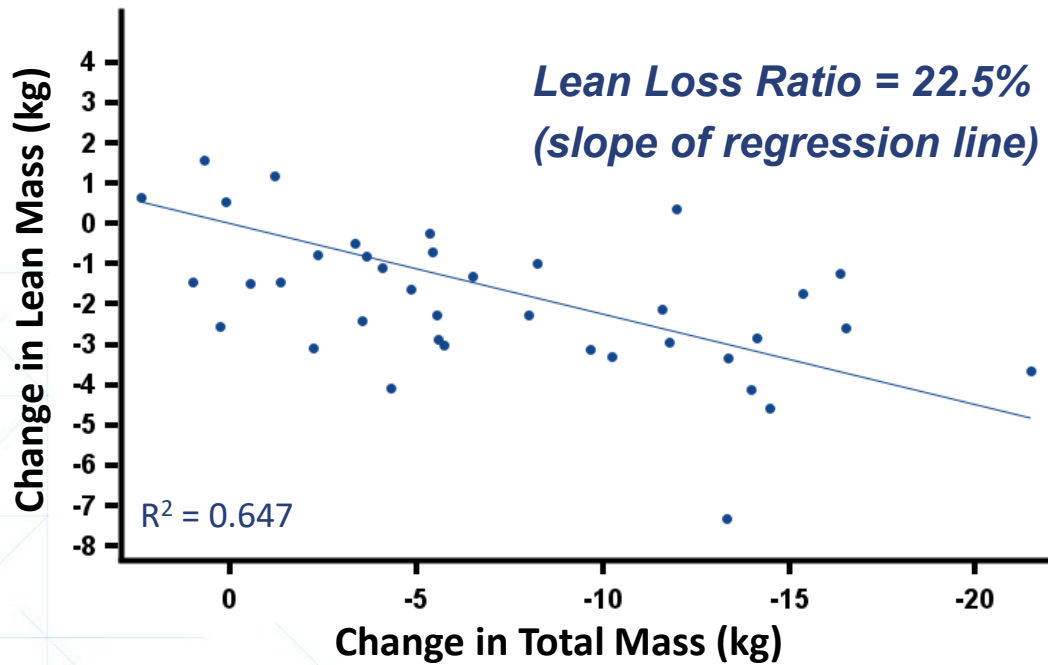


\*Change in Total Mass = Lean Mass Loss + Adipose Mass Loss

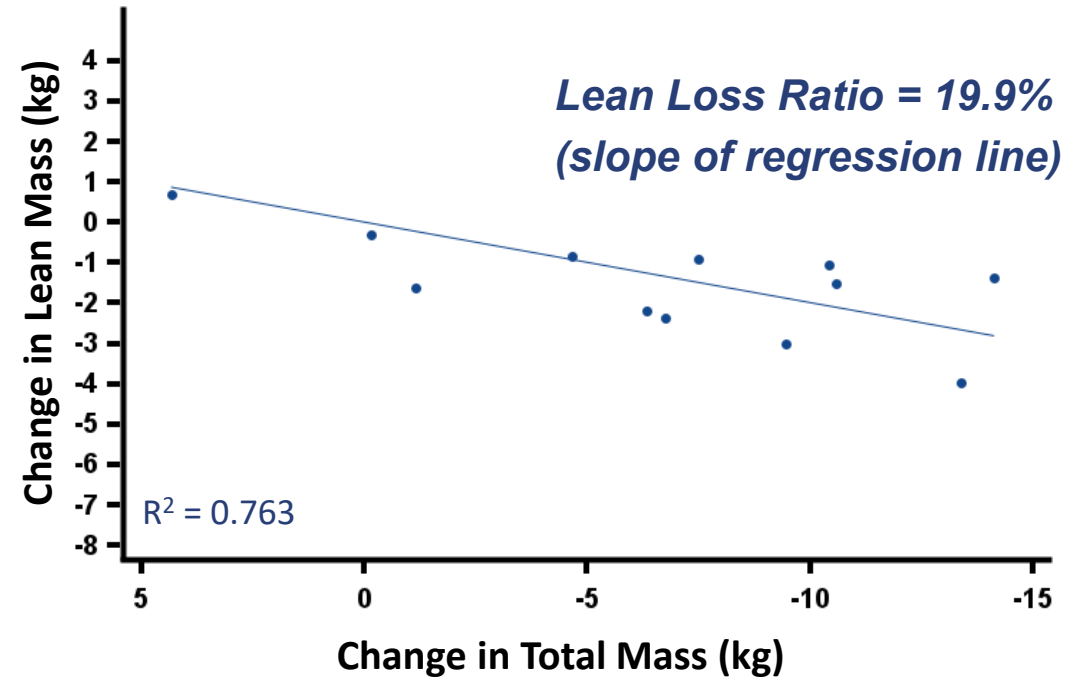
# LEAN MASS PRESERVATION MAINTAINED IN OLDER SUBJECTS

PREVENTING LEAN MASS LOSS IN THE ELDERLY MAY REDUCE RISK OF FALLS AND FRACTURES

## SUBJECTS < 60 YEARS OLD (N=38)



## SUBJECTS ≥ 60 YEARS OLD (N=12)



\*Change in Total Mass = Lean Mass Loss + Adipose Mass Loss

# PEMVIDUTIDE PRESERVES LEAN MASS DURING WEIGHT LOSS

- Robust mean weight loss of 15.6% with pemvidutide 2.4 mg at Week 48
- Lean Loss Ratio of 21.9%, class-leading among incretin therapies and better than the lean loss historically associated with diet and exercise
- This effect was maintained in older individuals, potentially mitigating the unwanted effects of lean loss in this population