#### Pemvidutide (ALT-801), a novel GLP-1/glucagon dual receptor agonist, achieves rapid and potent reductions in body weight and liver fat: Results of a placebo-controlled, double-blind, first-in-human (FIH) clinical trial

Stephen A. Harrison<sup>1</sup>, John Nestor<sup>2</sup>, Sarah K. Browne<sup>3</sup>, Jacques D. Payne<sup>3</sup>, Staci M. Steele<sup>3</sup>, Robert Casper<sup>3</sup>, Anvar Suyundikov<sup>3</sup>, Vyjayanthi Krishnan<sup>3</sup>, M. Scot Roberts<sup>3</sup>, M. Scott Harris<sup>3</sup>

<sup>1</sup> Pinnacle Research, San Antonio, TX, USA; <sup>2</sup> Spitfire Pharma, South San Francisco, CA, USA; <sup>3</sup> Altimmune, Inc., Gaithersburg, MD, USA

### **Presenter Disclosures**

**Stephen Harrison** 

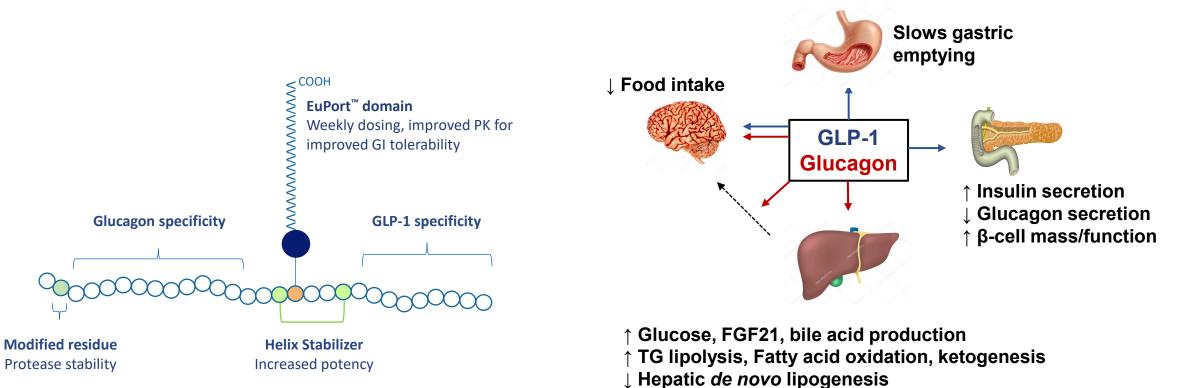
- Scientific advisor or consultant to: Akero, Alentis, Altimmune, Arrowhead, Axcella, BMS, Echosens, Galectin, Gilead, Hepion, Hepagene, HistoIndex, Intercept, Madrigal, Medpace, Metacrine, NGM Bio, Northsea, Novartis, Novo Nordisk, PathAI, Perspectum, Poxel, Sagimet, Terns, Viking
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John J. Nestor is a consultant to Altimmune, Inc.

Sarah K. Browne, Jacques D. Payne, Staci M. Steele, Robert Casper, Anvar Suyundikov, Vyjayanthi Krishnan, M. Scot Roberts, and M. Scott Harris are employees of Altimmune, Inc.

### **Pemvidutide (ALT-801)**

Balanced (1:1) GLP-1: glucagon dual receptor agonist



- ↓ LDL receptor activity (↓plasma LDL-C)
- ↑ Energy expenditure (hepatic, brain: SNS, FGF21, BA-FXR)

### **Pemvidutide Phase 1 SAD/MAD Trial Design**

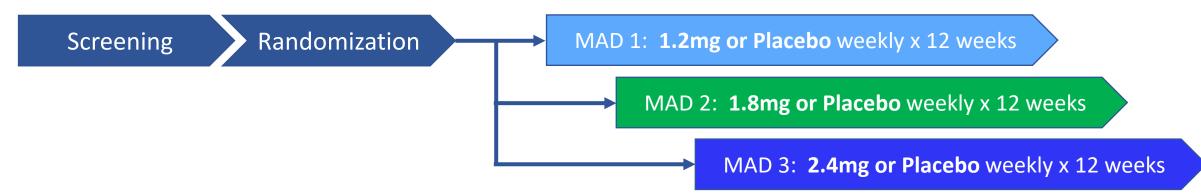
#### SAD/MAD Design

Randomized, double-blind placebo-controlled study 70 subjects with overweight/obesity (BMI 25 - 40 kg/m<sup>2</sup>)

#### Multiple ascending dose (MAD) phase (n = 34)

4:1 randomization (pemvidutide: placebo), with placebos pooledNo caloric restriction or lifestyle interventionNo dose titration

Endpoints included pharmacokinetics, biologic activity and safety



# **Characteristics of Study Participants (MAD Phase)**

Baseline Characteristics		Treatment				
		1.2 mg (n=7)	1.8 mg (n=9)	2.4 mg (n=11)	Pooled placebo (n=7)	
Age, years	mean (SD)	27.7 (11)	32.0 (11)	31.4 (12)	35.3 (12)	
<b>BMI</b> , kg/m <sup>2</sup>	mean (SD)	30.0 (4)	30.1 (4)	31.8 (3)	31.0 (4)	
Sex	female, n (%)	1 (14%)	4 (44%)	7 (64%)	4 (57%)	
HbA1c, %	mean (SD)	5.3 (0.1)	5.5 (0.2)	5.3 (0.2)	5.3 (0.2)	
Total cholesterol, mg/dL	mean (SD)	207.7 (46)	216.1 (33)	190.2 (42)	187.3 (42)	
LDL cholesterol, mg/dL	mean (SD)	134.2 (33)	146.1 (28)	123.0 (33)	109.9 (34)	
Triglycerides, mg/dL	mean (SD)	159.3 (81)	114.1 (57)	112.6 (54)	117.6 (24)	
HDL cholesterol, mg/dL	mean (SD)	42.5 (5.1)	46.8 (7.1)	44.3 (10.0)	44.7 (8.1)	

# **Study Disposition (MAD Phase)**

No withdrawals for adverse events

Characteristic			Treatment					
		1.2 mg	1.8 mg	2.4 mg	Pooled placebo			
Safety population <sup>1</sup>	n (%)	7 (100%)	9 (100%)	11 (91.7%)	7 (100%)			
Completed study	n (%)	6 (86%)	9 (100%)	9 (82%)	5 (71%)			
Early withdrawal	n (%)	1 (14%)	0 (0%)	2 (18%)	2 (29%)			
Lost to follow-up	n (%)	0 (0%)	0 (0%)	0 (0%)	1 (14%)			
Withdrawal of consent	n (%)	1 (14%)	0 (0%)	2 (18%)	1 (14%)			
Due to adverse event	n (%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			

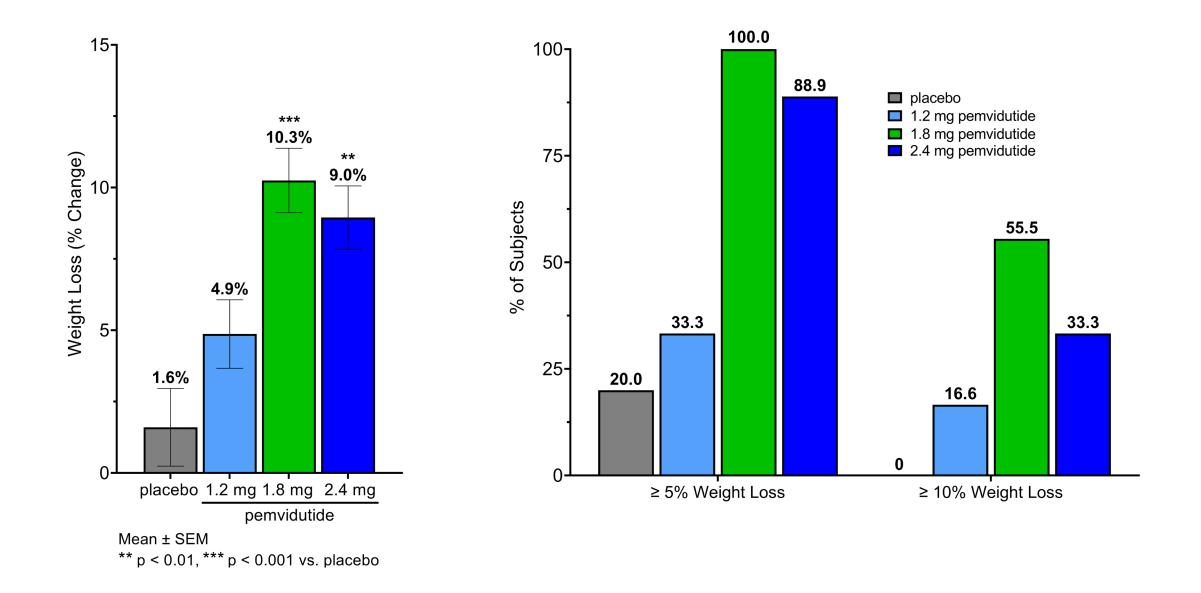
<sup>1</sup> Subjects who were randomized, dosed and had one or more post-dose assessments

### **Pemvidutide PK Profile**

Long half-life supports weekly dosing Lower  $C_{max}$  and delayed  $T_{max}$  may enhance tolerability

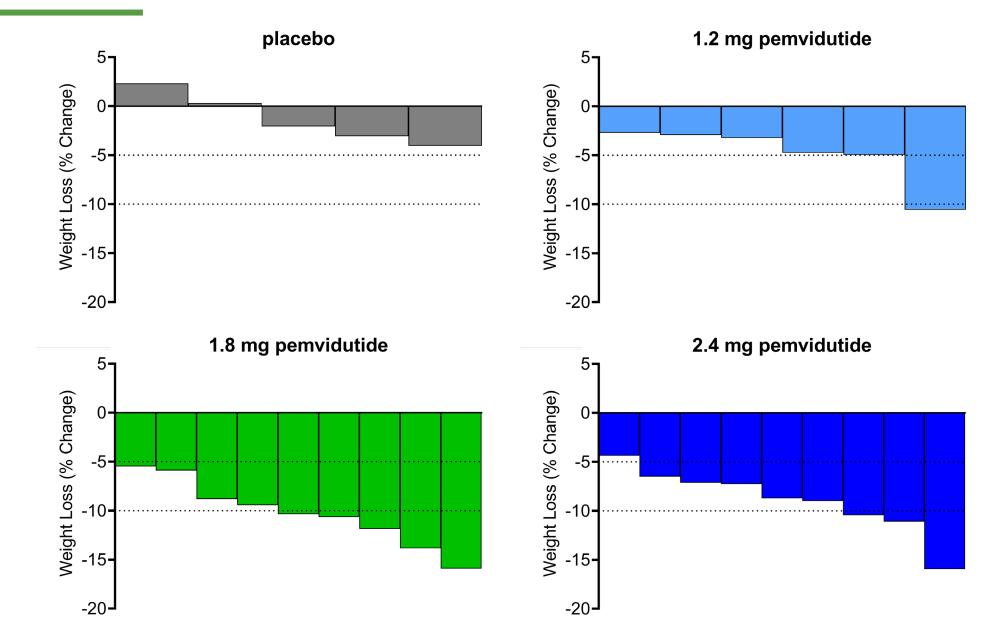
PK PARAMETER	ALT-801 1.8 mg SC		
Peak concentration (C <sub>max</sub> )	27.1 nmol/L		
Area under curve (AUC) 0-168	3400 nmol∙hr		
Half-life (t <sub>1/2</sub> )	110 hrs		
Time to peak concentration (T <sub>max</sub> )	70 hrs		

#### Weight Loss at Week 12 – Group Responses



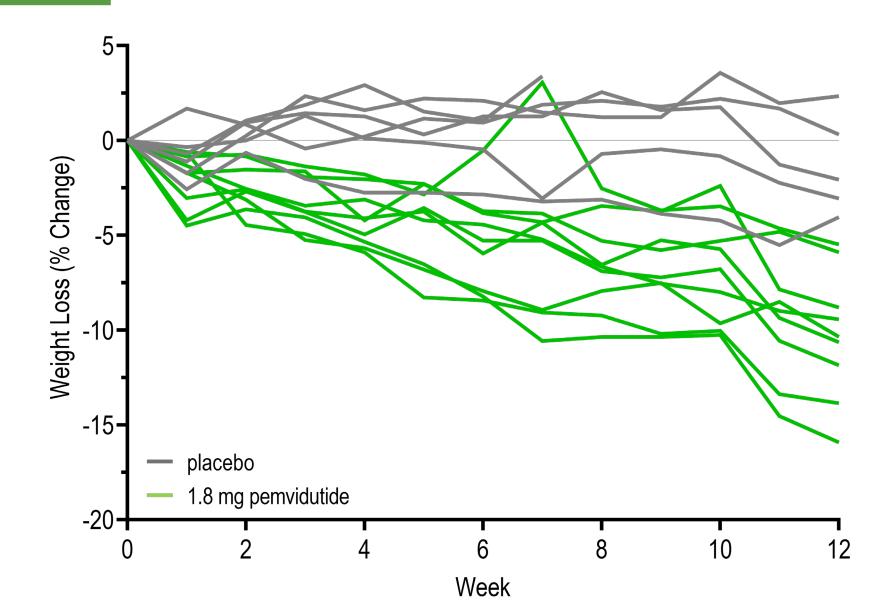
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### Weight Loss at Week 12 – Individual Responses

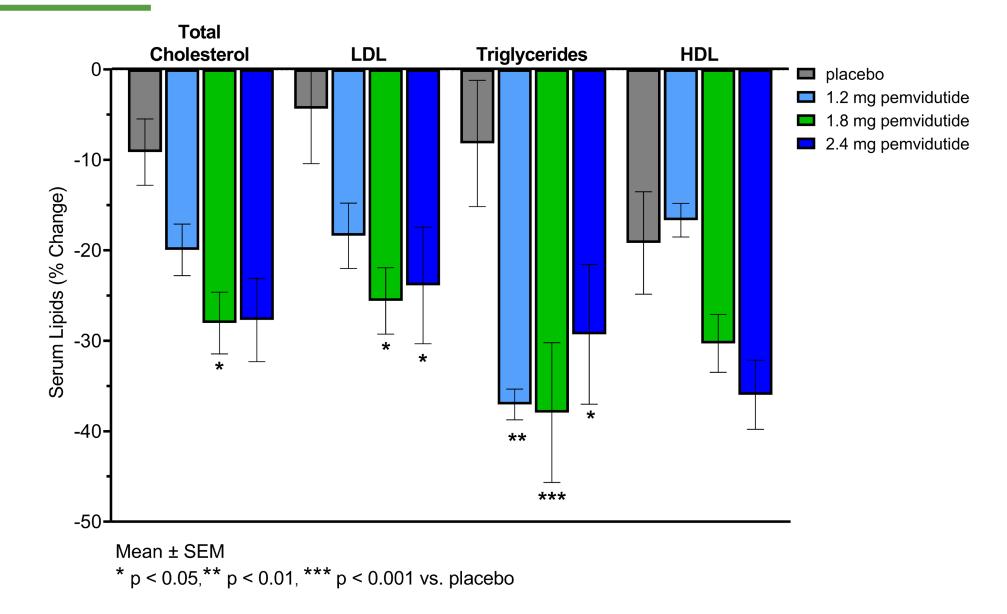


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### No Decline in Rate of Weight Loss at 12 weeks

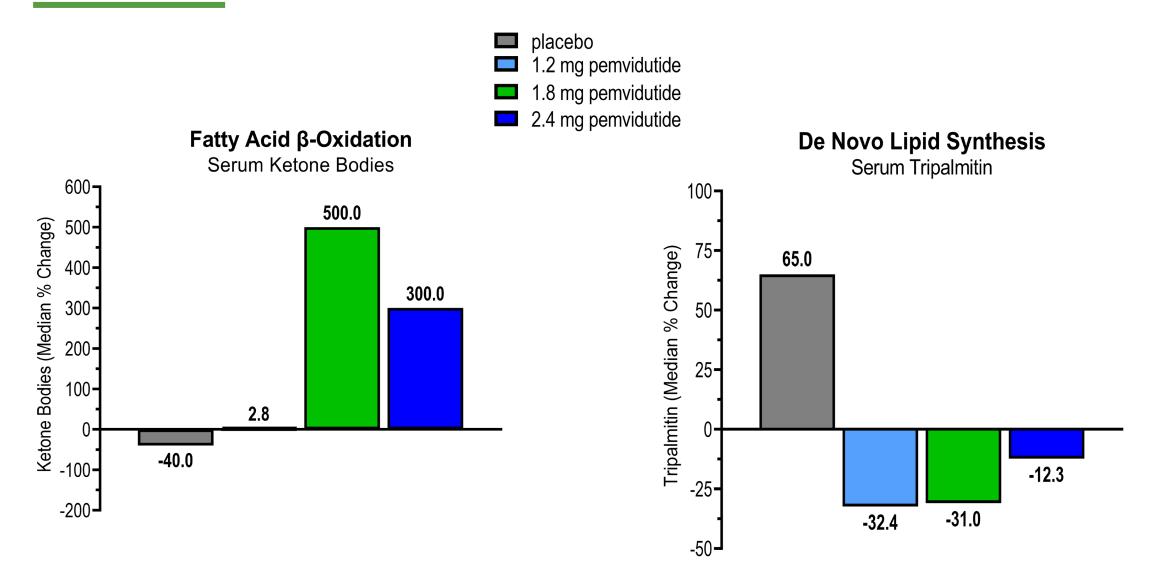


### **Changes in Serum Lipids at Week 12**

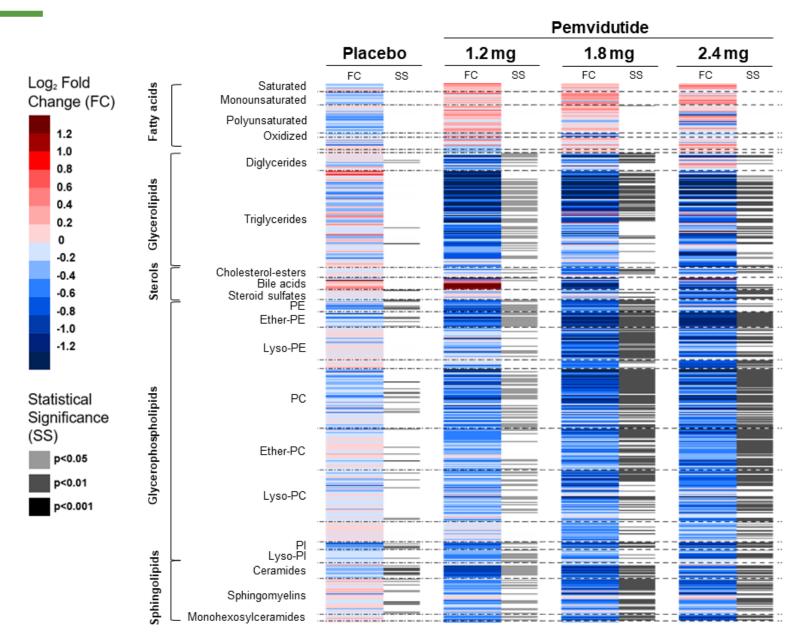


# **Effects on Lipid Metabolism**

Increased lipid oxidation and decreased lipid synthesis



#### **Robust Decreases in Lipids Implicated in NASH Inflammation**



# Reduction of Liver Fat to Below Limit of Detection (LOD) by Week 6

Greater than 90% reduction at 1.8 mg and 2.4 mg

#### Individual Subjects with MRI-PDFF ≥ 5% at Baseline

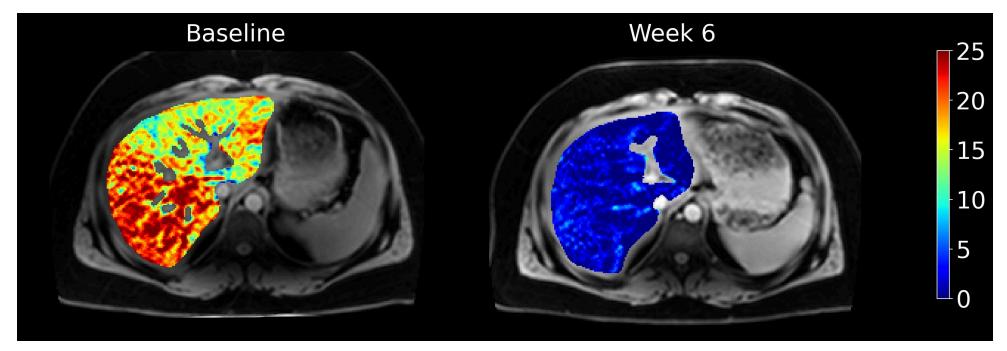
	MRI-PDFF (%)				
Treatment Group	Baseline	Week 6	Relative Δ at Week 6		
		Week 0	Individual	Mean	
Placebo	5.2	3.7	28.8	28.8	
Pemvidutide 1.2 mg	19.1	14.0	26.7	10.2	
Pennvidutide 1.2 mg	11.2	3.4	69.6	48.2	
Pemvidutide 1.8 mg	12.4	< LOD	94.0	94.0	
	17.0	< LOD	95.6		
Pemvidutide 2.4 mg	5.5	< LOD	86.4	91.9	
	7.0	< LOD	89.3	91.9	
	19.5	< LOD	96.2		

For calculation of absolute and relative  $\Delta$ , values < LOD is set at 0.75%

# **Robust Reduction of Liver Fat Content by MRI-PDFF**

From 19.5% to below limit of detection (LOD) by Week 6

Subject at 2.4 mg dose





**Below LOD** 



# Safety Overview (MAD Phase)

No serious AEs, severe AEs or AEs leading to treatment discontinuation

		Treatment					
Characteristic		1.2 mg (n = 7)	1.8 mg (n = 9)	2.4 mg (n = 12)	Pooled placebo (n = 7)		
Serious or severe AEs	n (%)	0 (%)	0 (%)	0 (%)	0 (%)		
AEs leading to treatment discontinuation	n (%)	0 (%)	0 (%)	0 (%)	0 (%)		
Nausea							
Mild	n (%)	1 (14.3%)	5 (55.6%)	5 (45.5%)	1 (14.3%)		
Moderate	n (%)	1 (14.3%)	1 (11.1%)	5 (45.5%)	0 (0.0%)		
Vomiting							
Mild	n (%)	1 (14.3%)	1 (11.1%)	5 (45.5%)	1 (14.3%)		
Moderate	n (%)	0 (0.0%)	1 (11.1%)	3 (27.3%)	0 (0.0%)		
Diarrhea							
Mild	n (%)	0 (0.0%)	0 (0.0%)	2 (18.2%)	0 (0.0%)		
Moderate	n (%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)		
Constipation							
Mild	n (%)	0 (0.0%)	1 (11.1%)	2 (18.2%)	0 (0.0%)		
Moderate	n (%)	0 (0.0%)	1 (11.1%)	1 (9.1%)	0 (0.0%)		
Hyperglycemia	n (%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)		

One subject receiving pemvidutide 1.8 mg and one receiving placebo experienced 3-5x ALT elevations with subsequent resolution



#### Weight loss

- 10.3% mean weight loss achieved at 1.8 mg dose at 12 weeks
- The trajectory suggests that the rate of weight loss will continue beyond 12 weeks

#### Lipids

- Reduction of liver fat content to below LOD, equivalent to a greater than 90% decrease
- Robust improvements in lipids species associated with NASH and CV disease

#### Safety and tolerability

- No dose titration
- No serious or severe AEs and no AE-related study discontinuations



# **Conclusions and Next Steps**

- Pemvidutide represents a promising new agent for the treatment of obesity and NASH
- Upcoming data:
  - NAFLD and obesity trial
    - 72 subjects with obesity or overweight plus baseline MRI-PDFF ≥ 10%, with endpoints of liver fat reduction and weight loss
    - Data readouts expected Q3 2022 (after 12 weeks of treatment) and Q4 2022 (after 24 weeks of treatment)
  - Phase 2 MOMENTUM obesity trial
    - 320 subjects with obesity or overweight with at least one obesity complication
    - Interim analysis at 24 weeks of treatment expected at end of 2022

