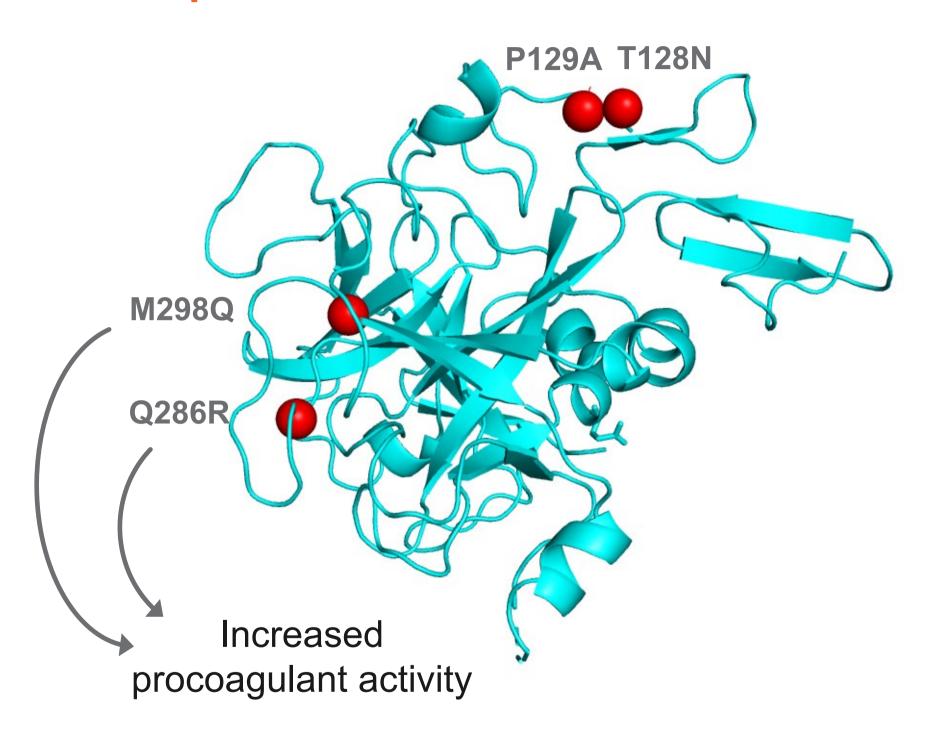
OC 11.4: Phase 2/3 Trial of Subcutaneous Engineered FVIIa Marzeptacog Alfa (Activated) in Hemophilia A or B with Inhibitors: Efficacy, Safety and Pharmacokinetics

Johnny Mahlangu, Howard Levy, Heghine Khacchatryan, Marina V. Kosinova, Levani Makhaldiani, Bartosz Korczowski, Genadi Iosava, Frank Del Greco, Frank V. M. Booth, MAA-201 Marzeptacog alfa (activated) study group

Marzeptacog alfa (activated): MarzAA

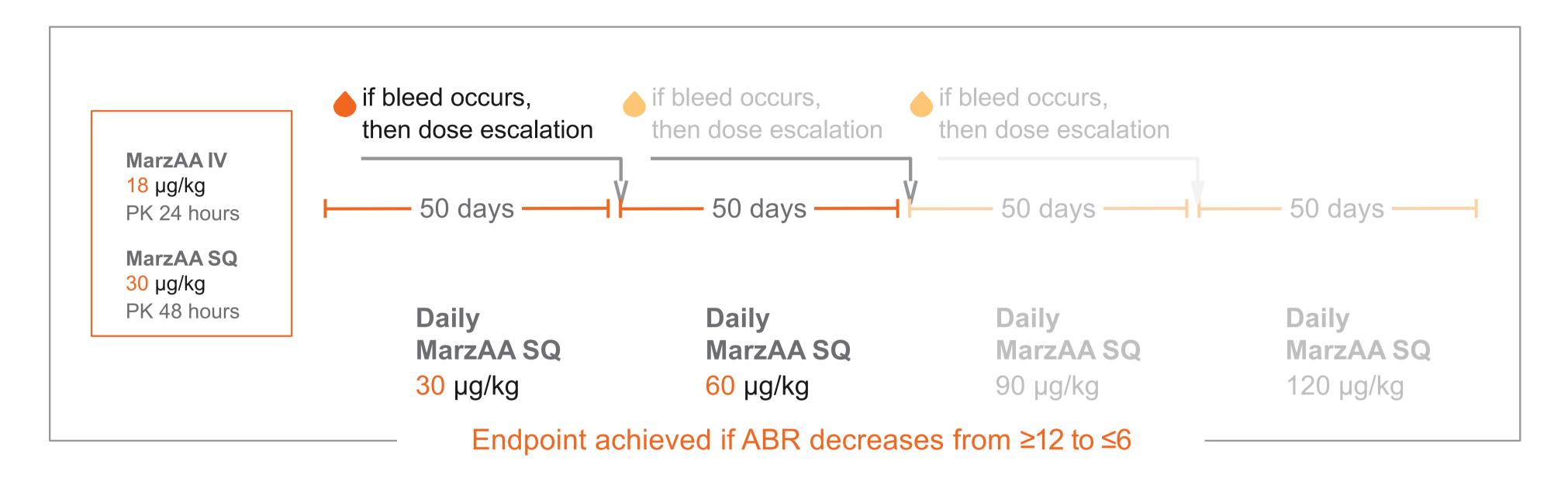
Prophylaxis is not available for patients with hemophilia B with inhibitors or hemophilia A with inhibitors who fail emicizumab



- + Four engineered amino acid substitutions within the FVIIa protein
- 9-fold more potent catalytic activity than NovoSeven RT
- + Allows subcutaneous dosing
- Half-life prolonged when using subcutaneous dosing

Granted Orphan Drug Designation in the US and EU

MarzAA phase 2/3 SQ clinical trial MAA-201 design



- + Patients with documented annual bleeding rate (ABR) >12
- Open label SQ study with individual dose escalation if needed in Hemophilia A or B with inhibitors

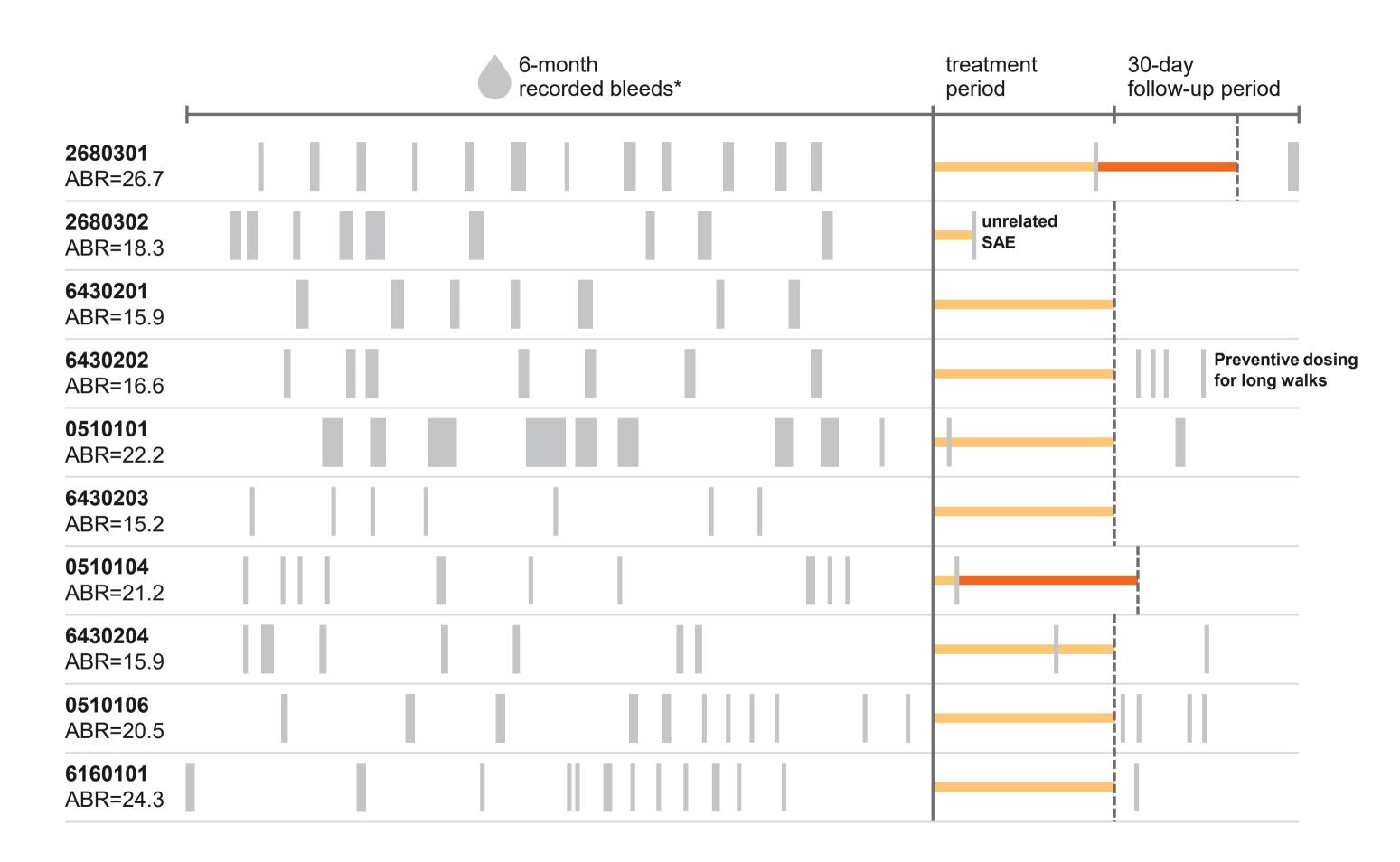
- + Primary endpoint: reduction in annualized bleed rate at final dose level
- Secondary endpoints: safety and tolerability, inhibitor formation

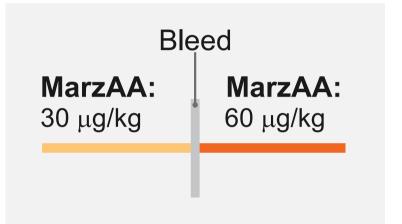
Phase 2 study patient disposition and efficacy

Clinical efficacy and tolerability demonstrated with SQ MarzAA

- + 17 subjects were consented; 11 enrolled; 1 revoked consent before starting Part 2; 1 fatal SAE unrelated to MarzAA; 9 subjects completed the study
- + Pre-treatment ABR: Mean 19.8; Range 12.2-26.7
- + Pre-treatment Proportion of Days with Bleeding (PDB): Mean 12.3%; Range 4-22%
- Excellent compliance
 - Total of 517 subcutaneous injections
 - Exposure of 97 days of SQ dosing in one subject
 - 7 subjects remained at 30 μg/kg while 2 subjects dose escalated to 60 μg/kg per protocol due to spontaneous bleeds
- + At the final dose level for all subjects:
 - 7/9 subjects had zero bleeds (traumatic or spontaneous)
 - Clinically and statistically significant reduction in ABR
 - Clinically and statistically significant reduction in proportion of days with bleeding

MarzAA demonstrated robust reduction in annualized bleed rate (ABR)

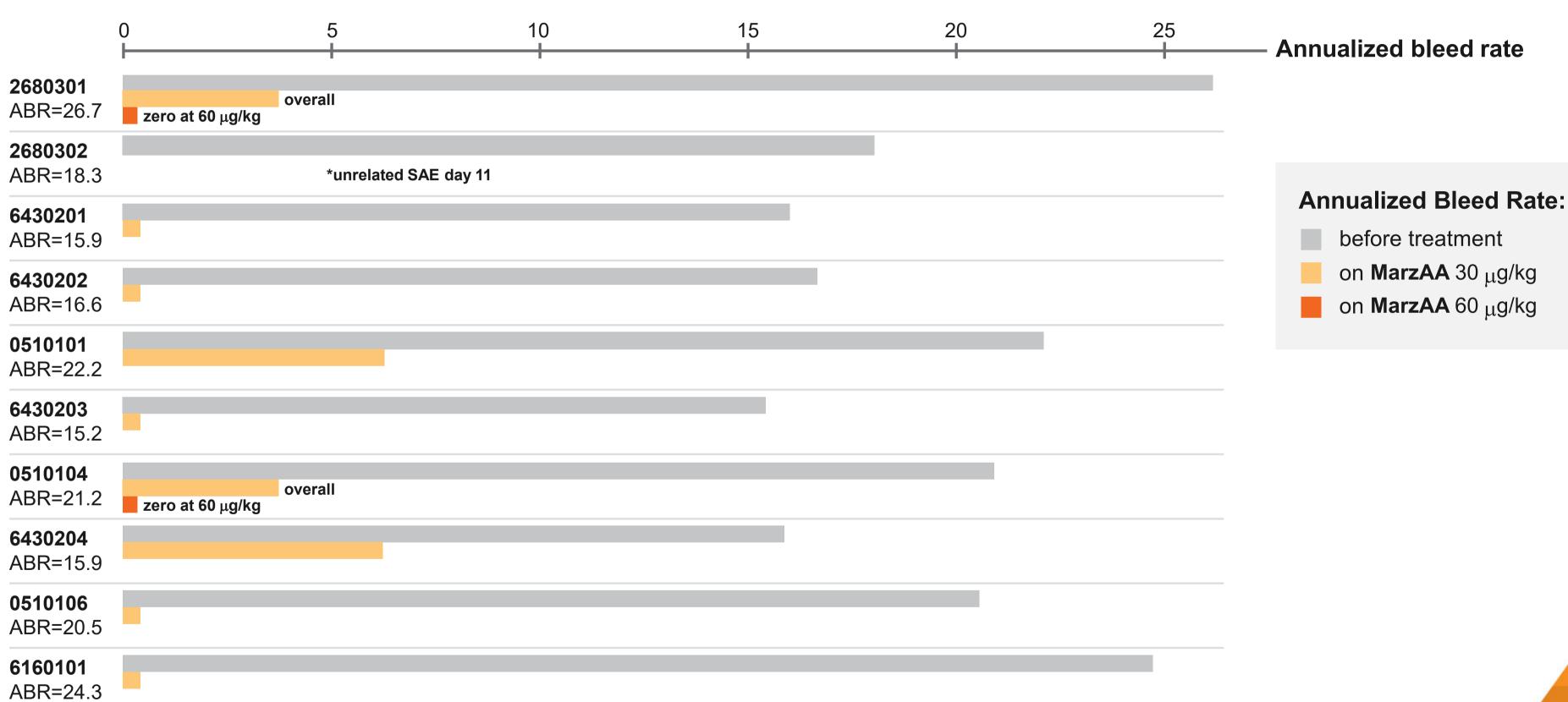




^{*}The width of each grey bar represents bleed duration: 1 to 9 days

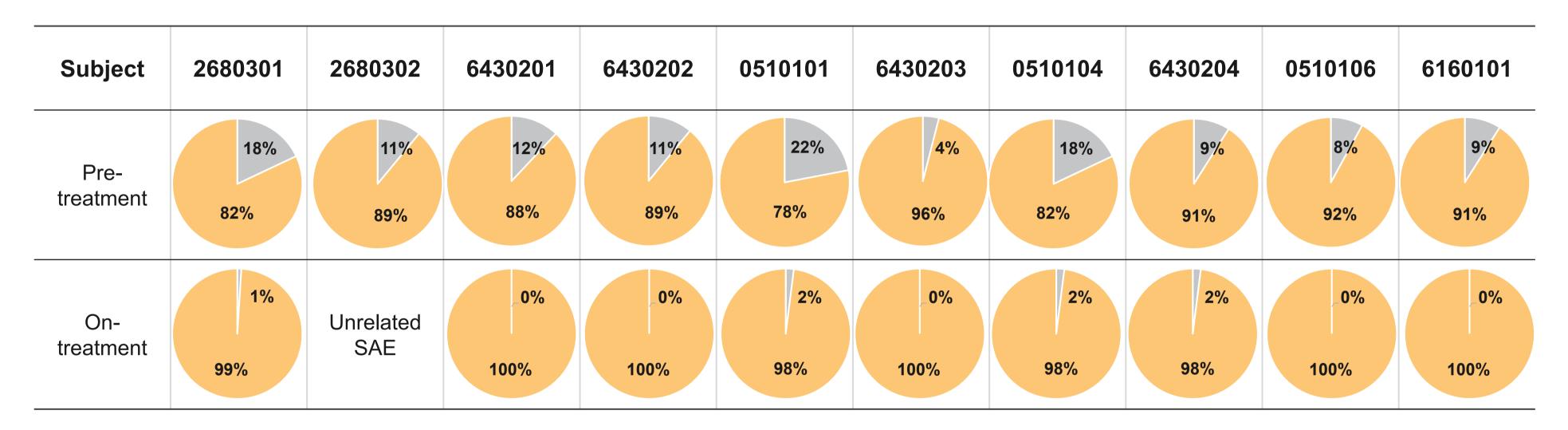
Significant reduction in ABR with treatment compared with baseline

Median ABR reduced to zero



Significant reduction in Proportion of Days with Bleeding (PDB)

Median Proportion of Days with Bleeding reduced to zero



Grey denotes the Proportion of Days with Bleeding during period of observation

- + Average pre-treatment percentage of days of bleeding was 12.3% (SD 5.8%) [median = 11.0%]
- + Average on-treatment percentage were reduced to 0.8% (SD 0.9%) [median 0%]
- + Analysis of these pairwise differences by Wilcoxon signed-rank test has p=0.009 for 93.8% reduction

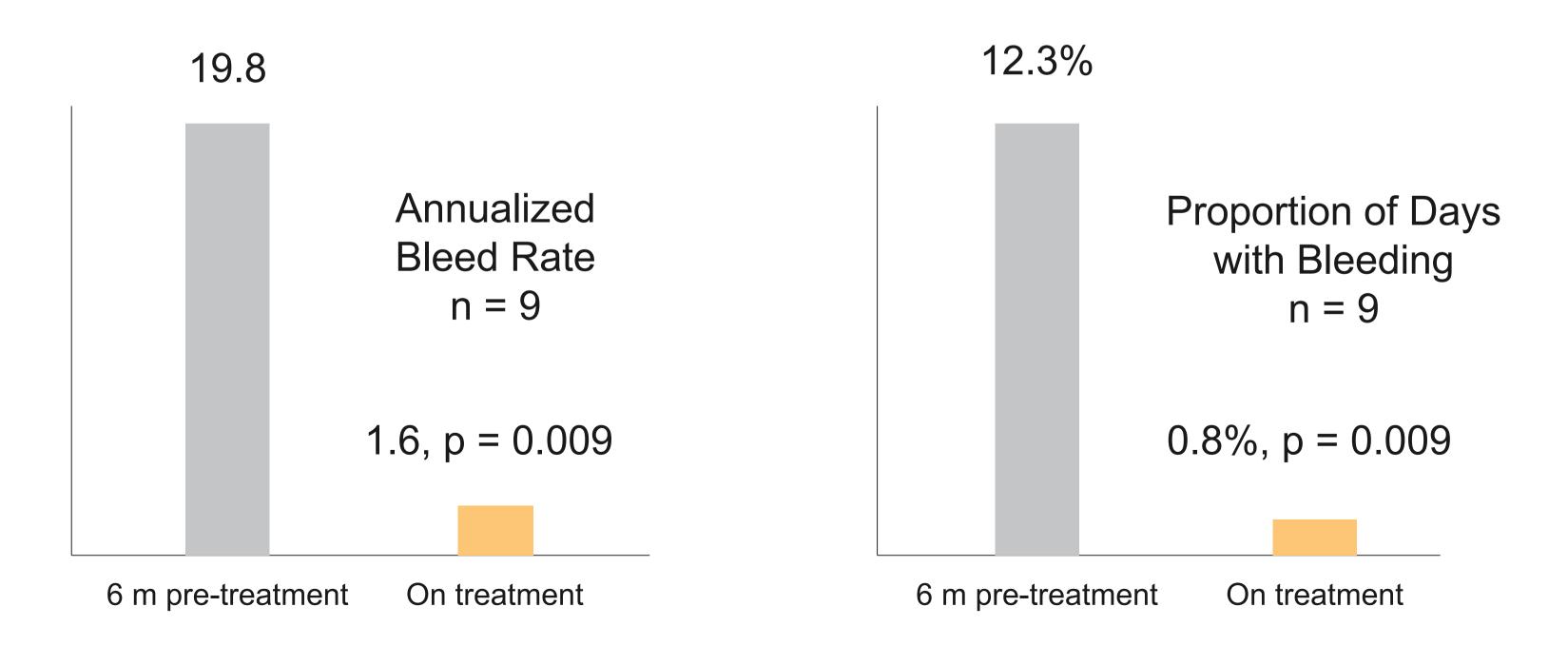
Marzeptacog alfa (activated) Phase 2 demonstrates clinical efficacy

Greater than 90% reduction in all bleeding; Median ABR zero; Median bleeding days zero

Mean Annualized Bleeding Rates (ABR) significantly reduced from 19.8 to 1.6

Mean Proportion of Days with Bleeding (PDB) significantly reduced from 12.3% to 0.8%

Safe & well tolerated, ~1% ISRs (517 SQ doses) and no ADAs

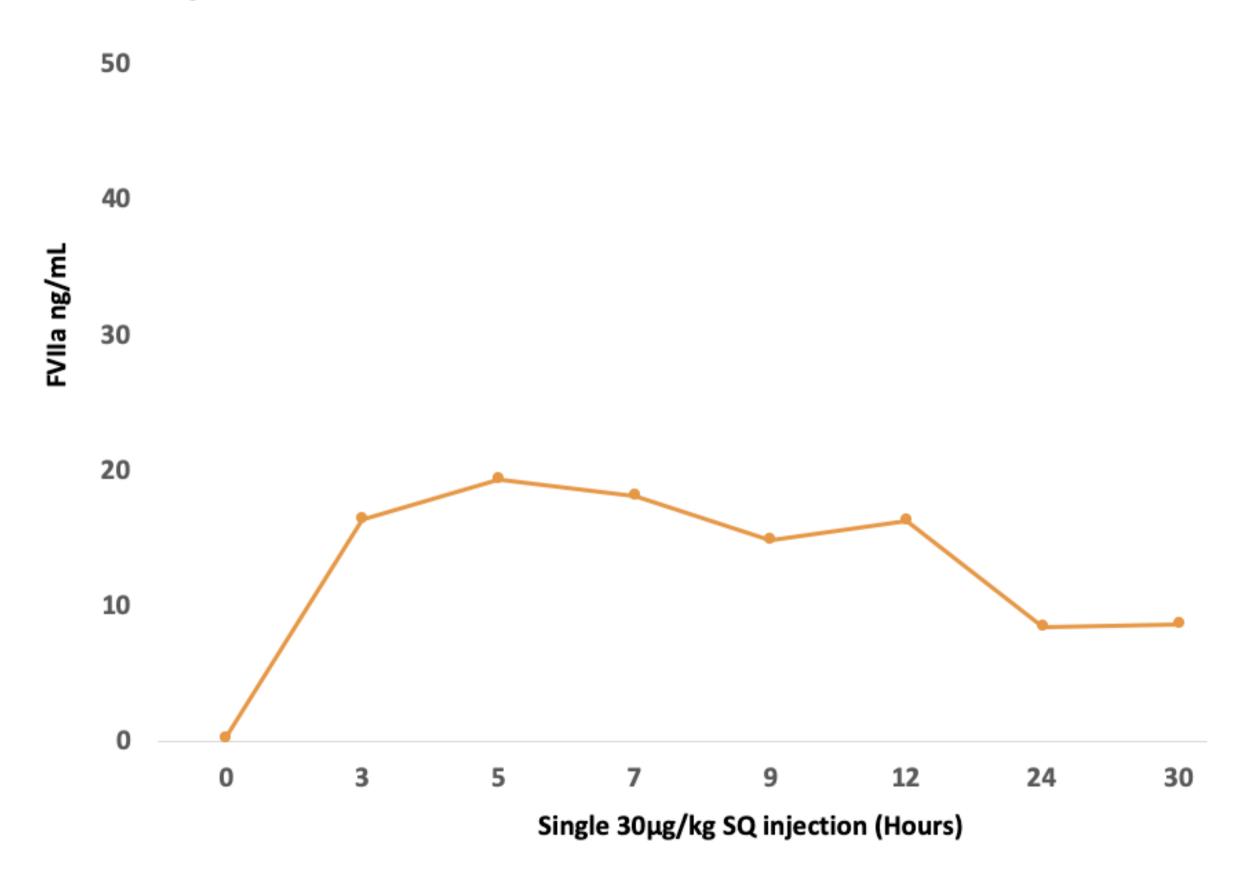


MAA-201 safety

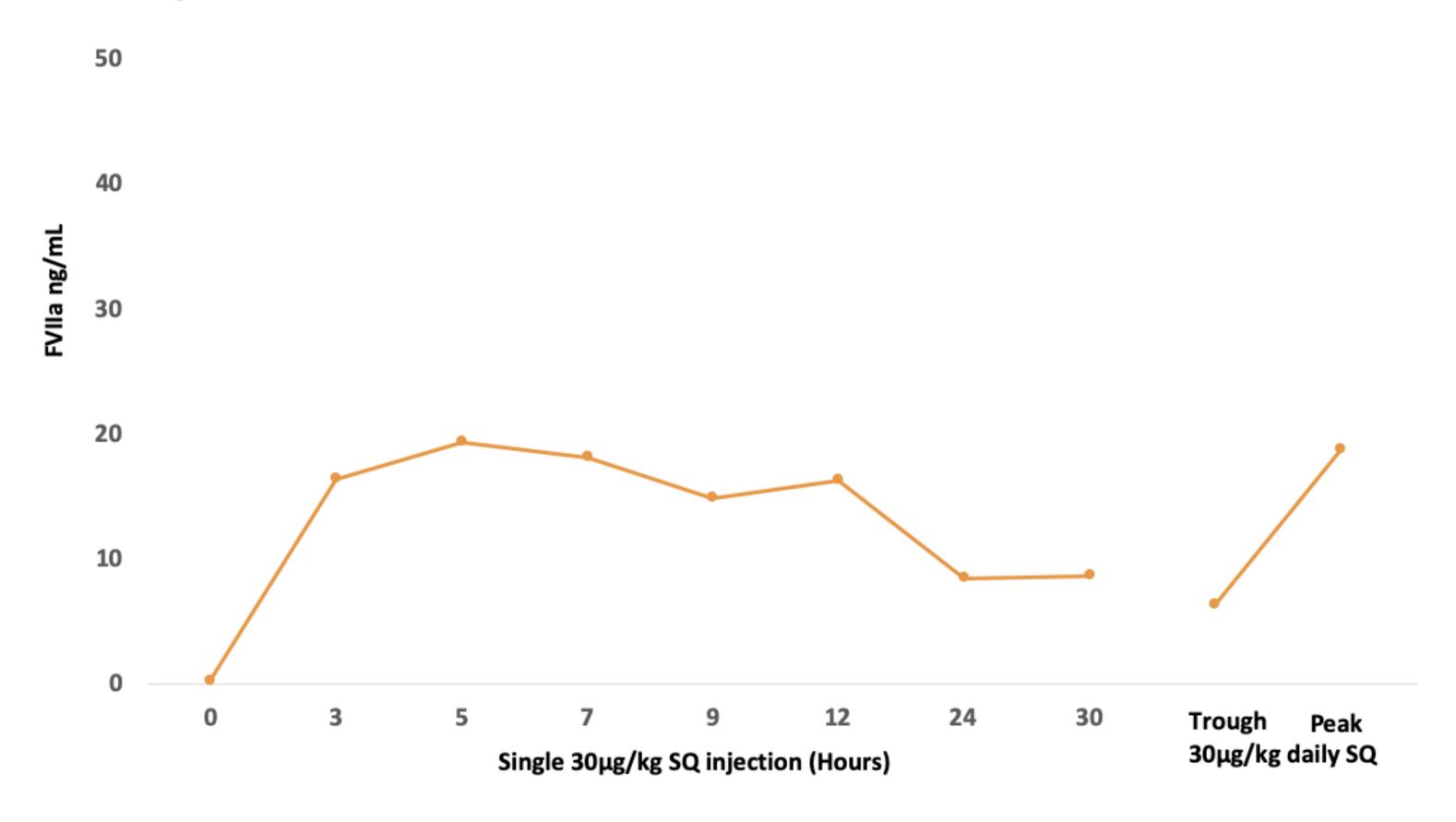
Safe & well tolerated

- + No anti-drug antibodies were detected
- + One fatal unrelated SAE: intracerebral hemorrhage due to untreated hypertension
- + 517 SQ injections were administered
 - 6 injection site reactions in 2 subjects
 - 1 moderate swelling that resolved without sequelae in one subject
 - 2 mild and 3 moderate redness that resolved without sequelae in the other subject and did not occur with subsequent SQ injections

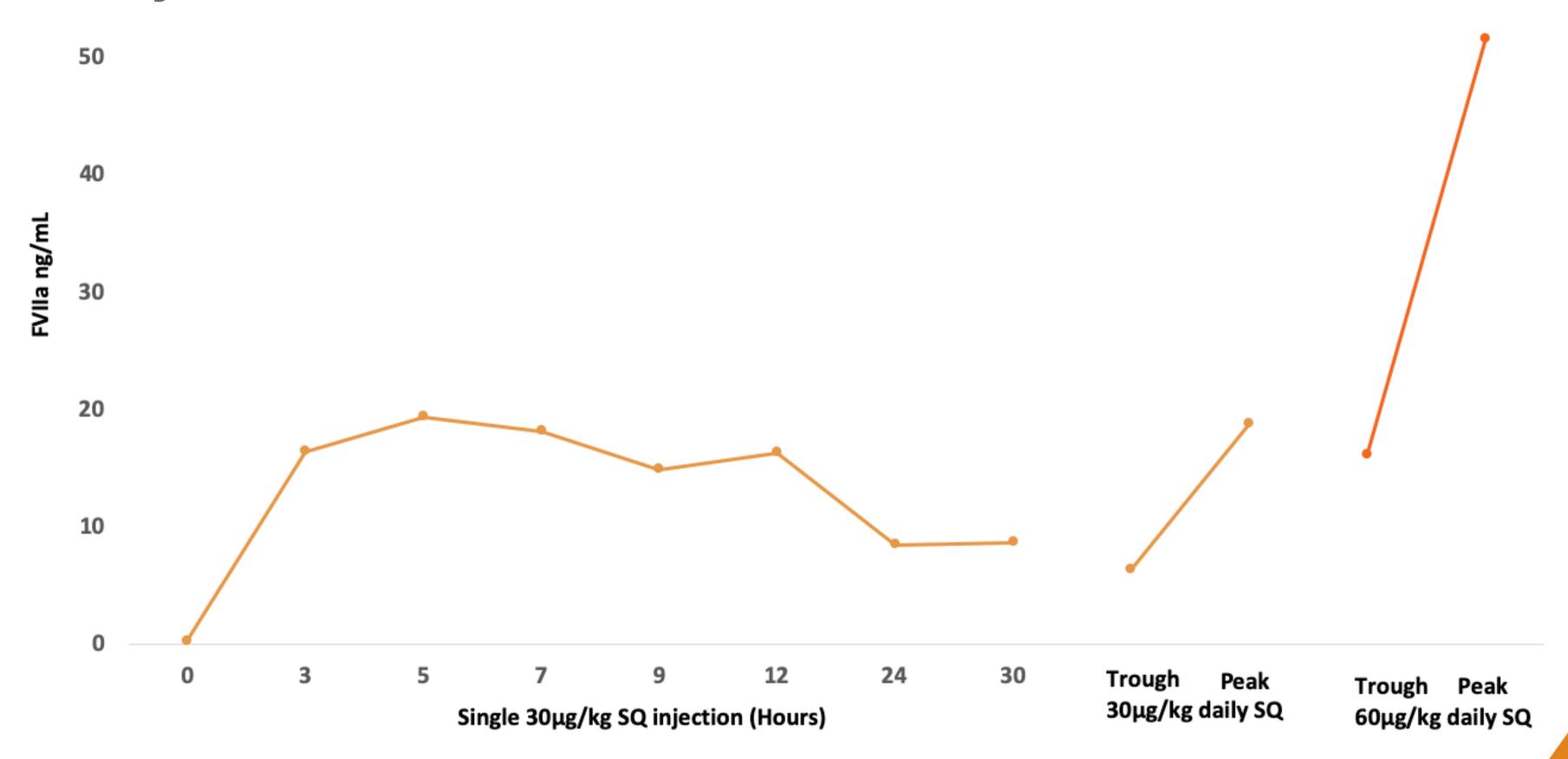
Mean First SQ dose PK; Mean Trough & Mean 7h post-dose FVIIa level by dose



Mean First SQ dose PK; Mean Trough & Mean 7h post-dose FVIIa level by dose



Mean First SQ dose PK; Mean Trough & Mean 7h post-dose FVIIa level by dose



Conclusions on the marzeptacog alfa (activated) program

Moving forward in clinical development



Clinical efficacy demonstrated



No anti-drug antibodies detected



Safe and well tolerated



Exploring the use of MarzAA in additional indications



Moving forward with Phase 3 study planning