



QR-010

Study PQ-010-001
Multiple Ascending Dose

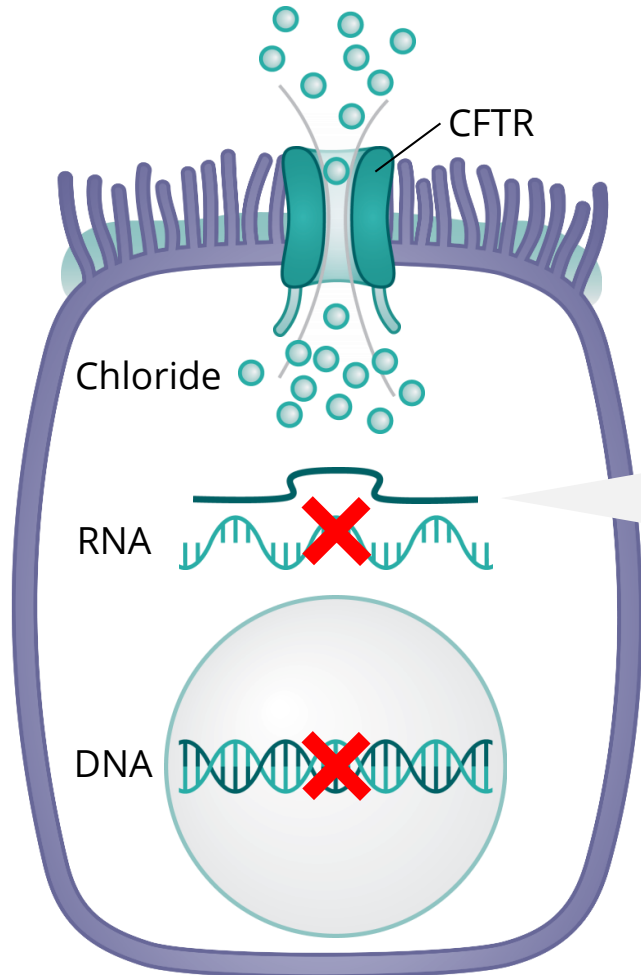
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Disclosures

- Consultant/Advisor: Gilead Sciences, Novartis Pharmaceuticals Corporation; Vertex Pharmaceuticals; Gilead; Aptalis; Celtaxsys, ProAxis
- Speakers Bureau: Novartis Pharmaceuticals Corporation; Vertex Pharmaceuticals
- Research Grants: Gilead Sciences, Novartis Pharmaceuticals Corporation

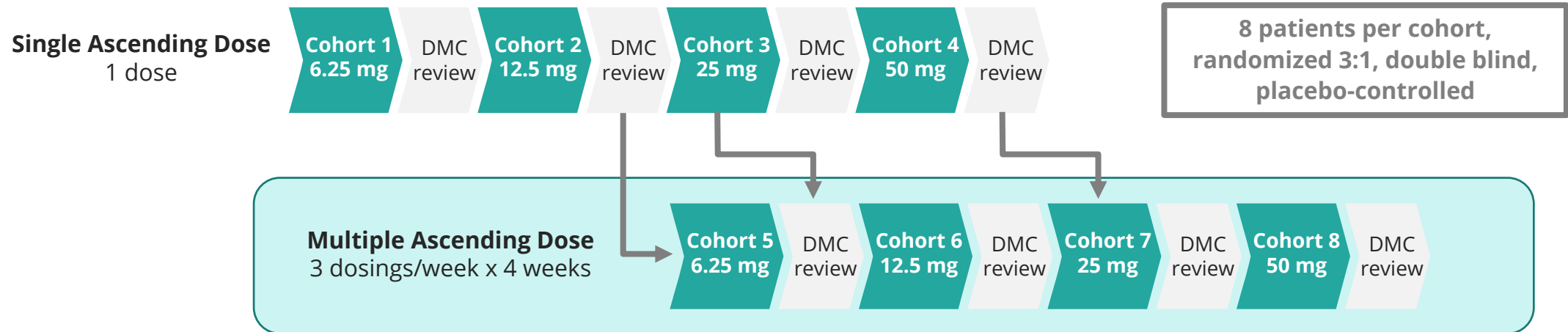
QR-010: A Novel Antisense RNA oligonucleotide



QR-010

- Single stranded 33-mer RNA oligonucleotide
- P=S and 2'Ome chemically modified for stability and uptake
- Designed to be complementary to mRNA region around F508-encoding deletion and to restore CFTR function
- Inhaled delivery by PARI eFlow nebulizer
- Improved CFTR activity has been demonstrated in F508del preclinical and animal models
- QR-010 improved CFTR chloride transport in F508del homozygous patients by nasal potential difference following local administration to the nasal epithelium

PQ-010-001 Study Design



Key Eligibility Criteria

- Male & female homozygous for F508del mutation
- >18 years old
- ppFEV1 > 70%
- CFTR modulators excluded

Study Objectives

- To evaluate the safety & tolerability of QR-010 via inhalation
- Characterise PK of QR-010 administered via inhalation
- Explore pharmacodynamic effects of QR-010 for efficacy signals

Baseline Demographics

Characteristic		Placebo n=9	6.25 mg n=6	12.5 mg n=6	25 mg n=7	50 mg n=6	Total n=34
Age (years)	Mean	26.3	22.7	27.7	32.3	23.3	26.6
	Min, Max	[18, 38]	[19, 26]	[19, 41]	[21, 46]	[19, 30]	[18, 46]
Sex, n (%)	Male	3 (33.3)	3 (50.0)	3 (50.0)	2 (28.6)	4 (66.7)	15 (44.1)
	Female	6 (66.7)	3 (50.0)	3 (50.0)	5 (71.4)	2 (33.3)	19 (55.9)
Race, n (%)	White	9 (100.0)	6 (100.0)	6 (100.0)	7 (100.0)	6 (100.0)	34 (100.0)
pp FEV₁ (%)	Mean	86.7	90.7	89.0	79.9	84.7	86.0
	Min, Max	[70.7, 99.7]	[75.3, 115.6]	[74.4, 108.2]	[69.2, 94.9]	[73.7, 110.7]	[69.2, 115.6]
Sweat Chloride (mmol/L)	Mean	105.3	101.1	91.0	99.7	98.4	99.7
	Min, Max	[93.0, 123.0]	[84.0, 126.0]	[61.0, 110.0]	[83.0, 109.0]	[91.0, 107.5]	[61.0, 126.0]
BMI (kg/m²)	Mean	20.9	23.5	22.8	23.6	21.3	22.3
	Min, Max	[19.2, 24.2]	[19.7, 26.7]	[19.1, 26.4]	[21.2, 25.6]	[18.1, 25.3]	[18.1, 26.7]
CFQ-R RSS (points)	Mean	77.8	74.1	72.2	72.2	78.7	75.2
	Min, Max	[66.7, 88.9]	[61.1, 88.9]	[55.6, 94.4]	[61.1, 83.3]	[55.6, 88.9]	[55.6, 94.4]

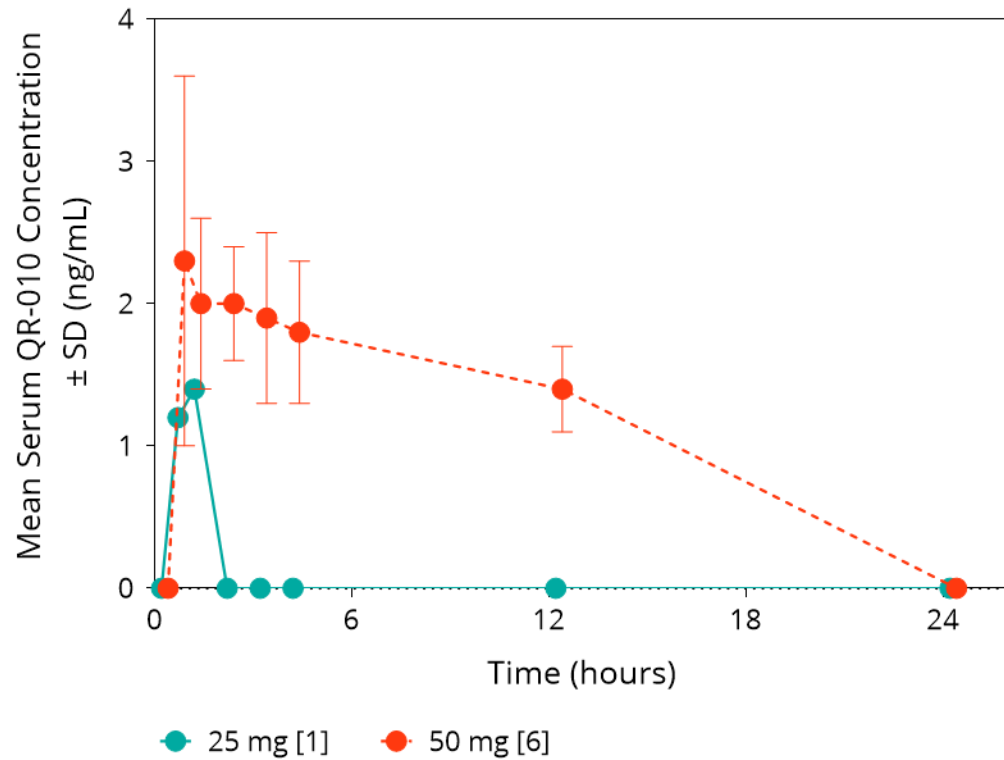
QR-010 is Safe and Well-tolerated

Most Frequent Treatment-Emergent Adverse Events

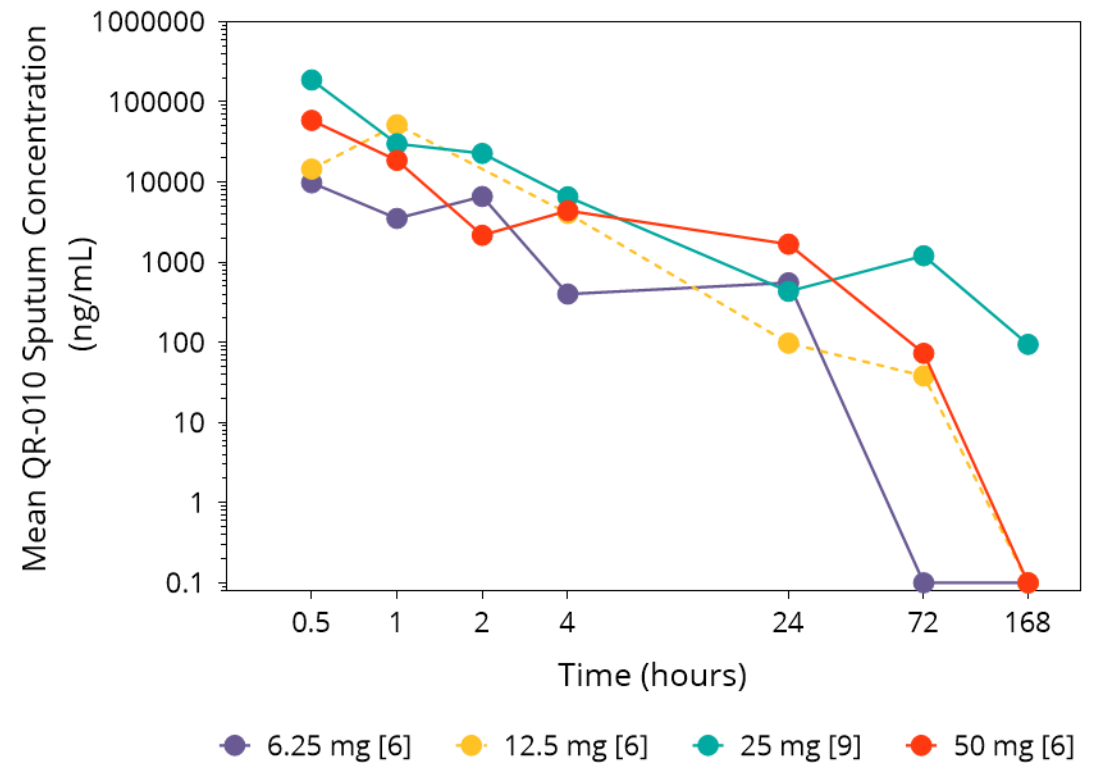
Preferred term	Placebo n=9 n (%)	6.25 mg n=6 n (%)	12.5 mg n=6 n (%)	25 mg n=7 n (%)	50 mg n=6 n (%)	QR-010 total n=25 n (%)
Cough	2 (22.2)	3 (50.0)	1 (16.7)	0	2 (33.3)	6 (24.0)
Sputum Increased	3 (33.3)	2 (33.3)	1 (16.7)	1 (14.3)	0	4 (16.0)
Fatigue	0	2 (33.3)	1 (16.7)	1 (14.3)	0	4 (16.0)
Nasal Congestion	1 (11.1)	2 (33.3)	0	0	1 (16.7)	3 (12.0)
Wheezing	0	3 (50.0)	0	0	0	3 (12.0)
Pyrexia	1 (11.1)	0	1 (16.7)	2 (28.6)	0	3 (12.0)

Serum and Sputum Concentrations after Single Dose Administration

Serum QR-010 concentrations following a single dose



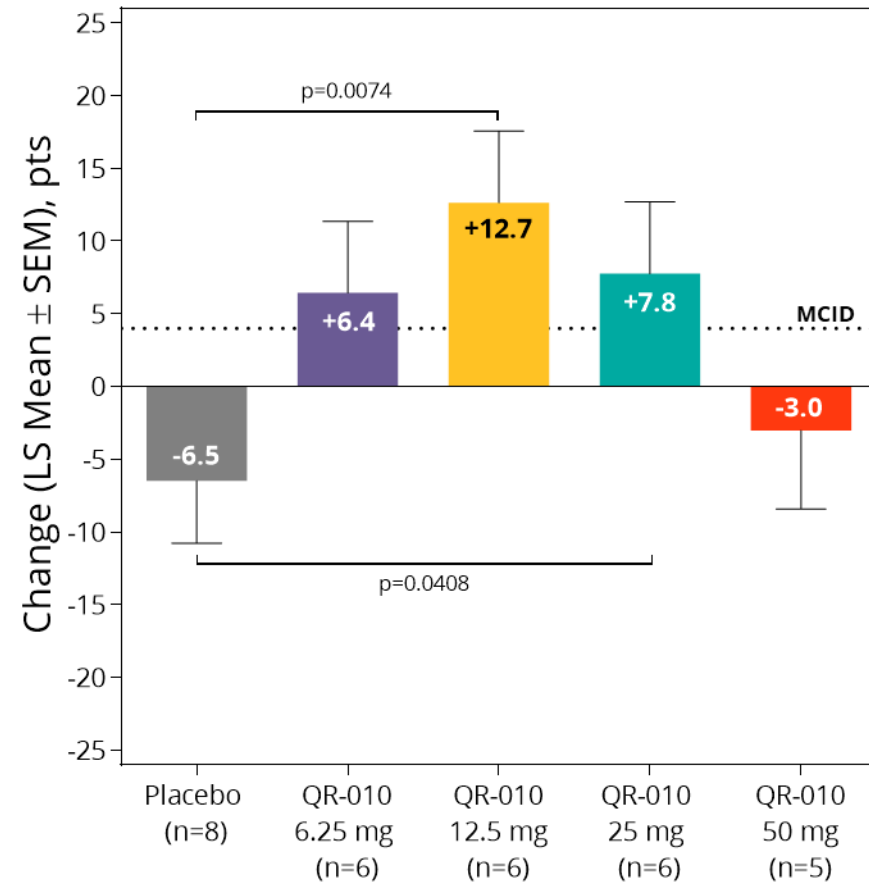
QR-010 sputum concentration following a single dose



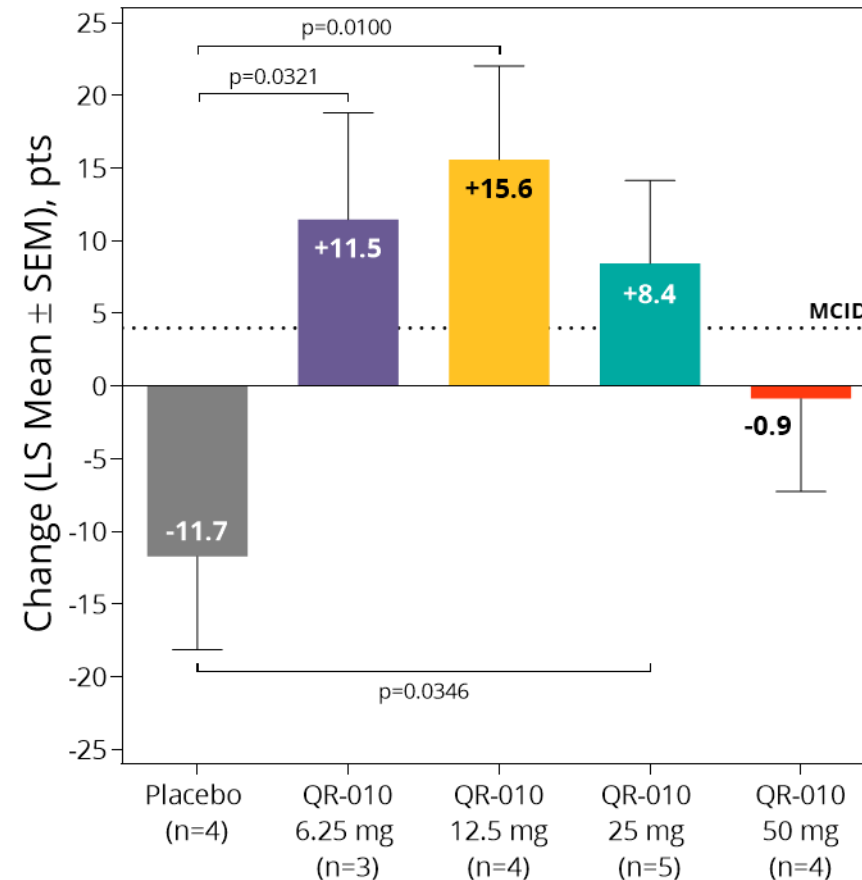
Exploratory Efficacy Endpoints

Improvement of CFQ-R RSS at EoT

Per protocol population
baseline 69-116 ppFEV₁ (n=31)

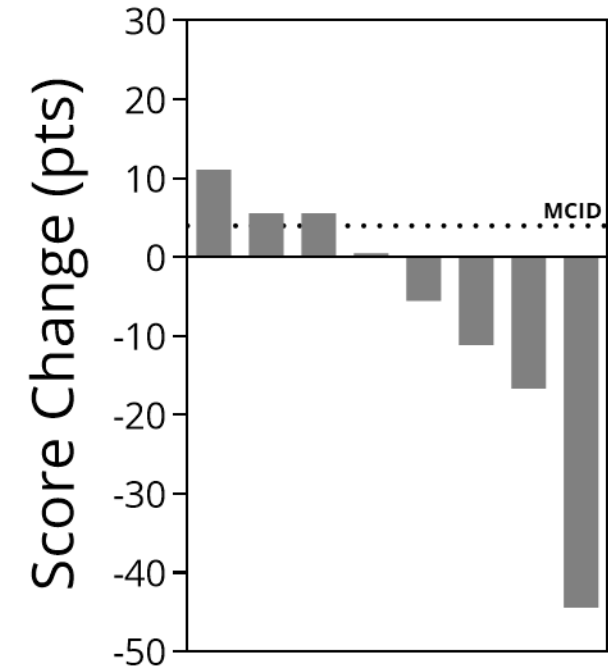
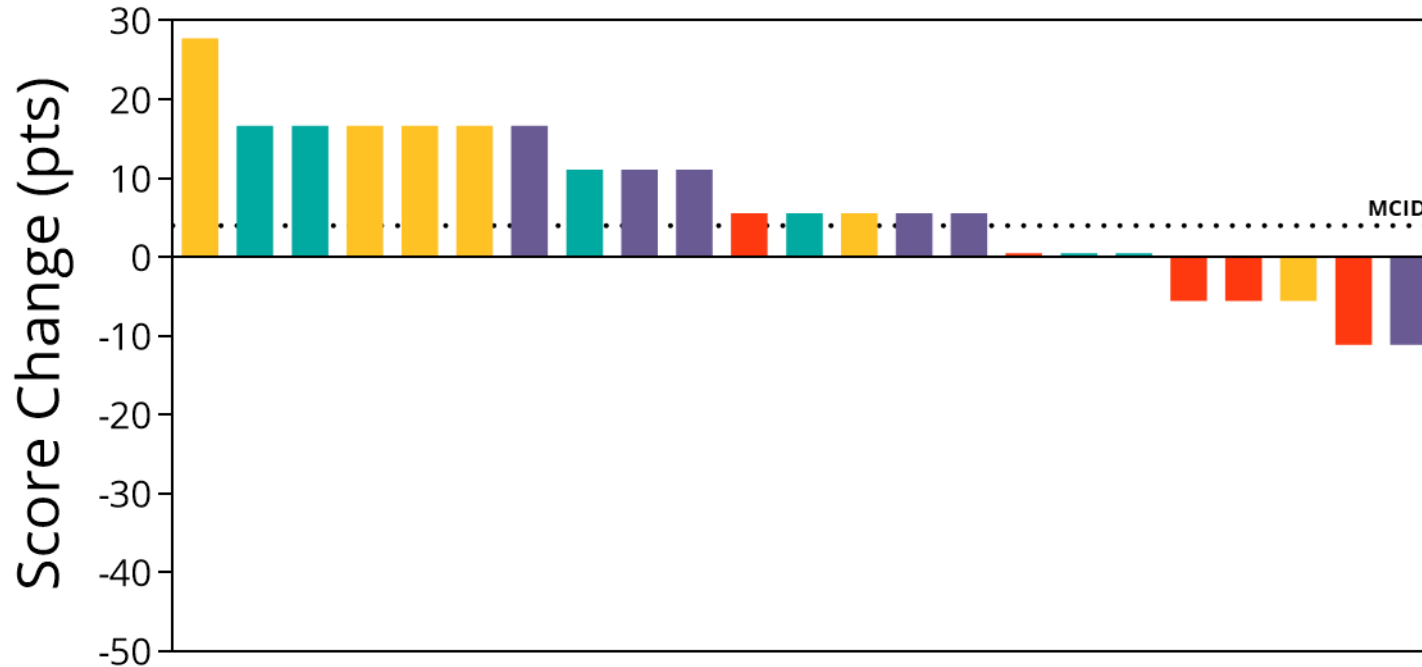


Baseline ppFEV₁ 70-90
predefined subgroup (n=20)



Improvement of CFQ-R RSS at EoT

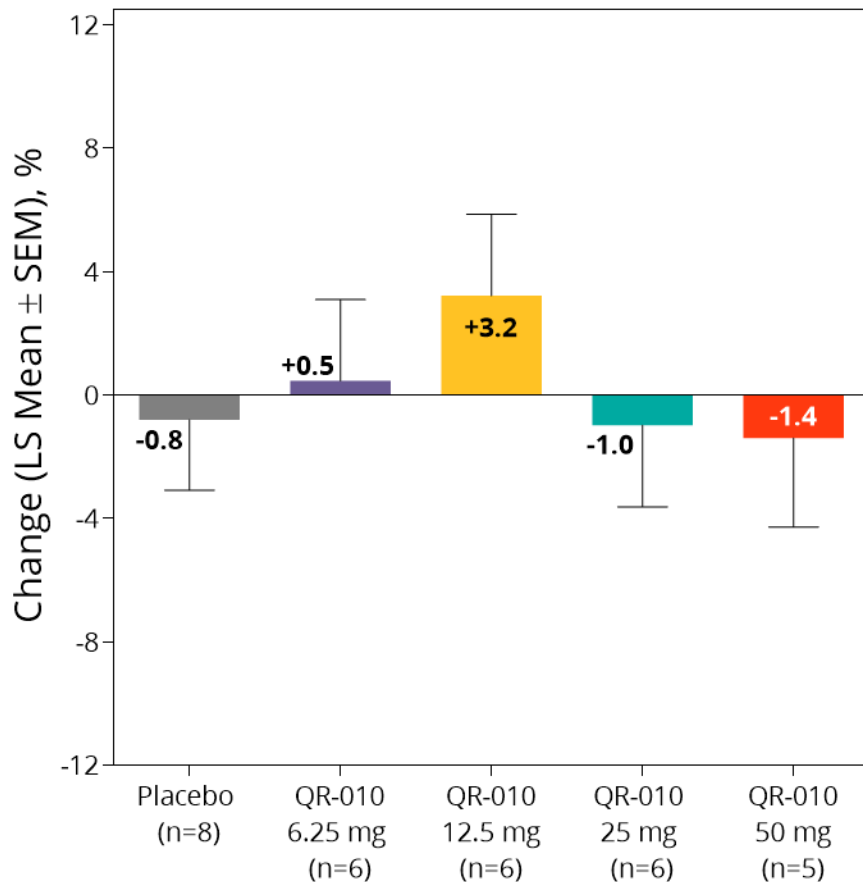
65% of patients improved above MCID (4 pts)



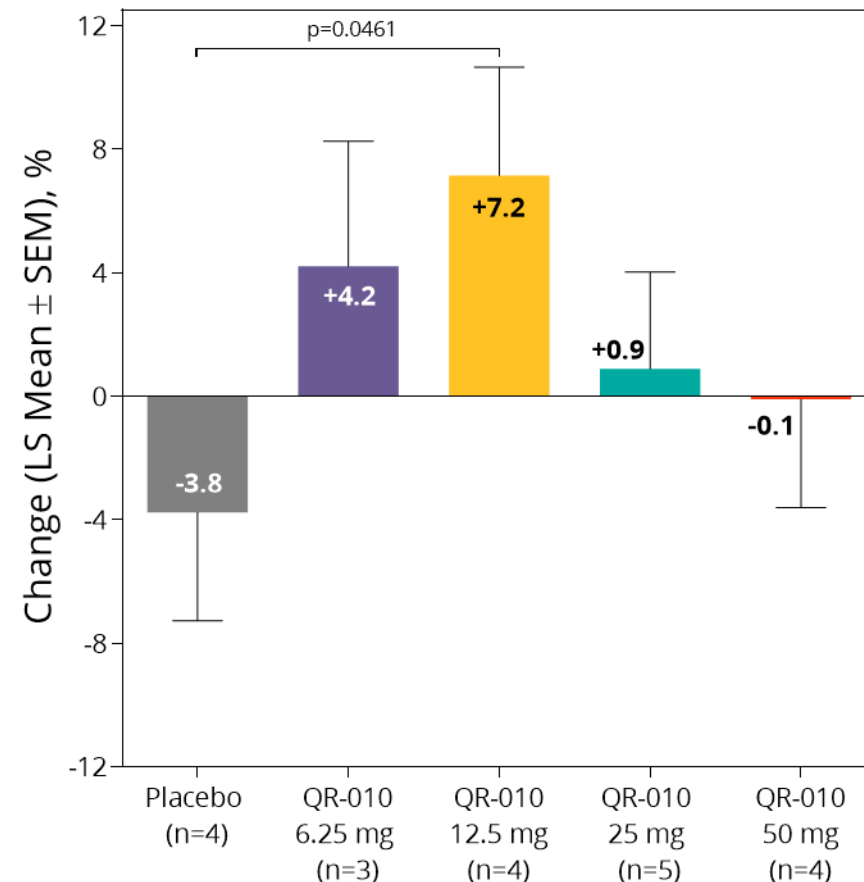
ppFEV₁ Absolute Change at EoT

Dose-response similar to CFQ-R RSS

Per protocol population
baseline 69-116 ppFEV₁ (n=31)



Baseline ppFEV₁ 70-90
predefined subgroup (n=20)



Conclusions

- QR-010 is safe and well-tolerated over 4 weeks of treatment
- There were no safety signals on lab parameters, vitals signs, markers of inflammation, or other assessments
- QR-010 demonstrated a convincing signal of clinical benefit in CF patients, as measured by CFQ-R RSS
- This trial validates the therapeutic potential of inhaled oligonucleotides targeting the basic defect of CF

Acknowledgements

- Thank you to the PQ-010-001 Investigators and researchers and especially to the CF community for their participation, resulting in the successful completion and analysis of this multiple ascending dose study
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