Association of Ellipsoid Zone Integrity and Treatment Response in Non-Neovascular AMD Treated With Subcutaneous Elamipretide

Post Hoc Analysis of the Phase 1 ReCLAIM Study

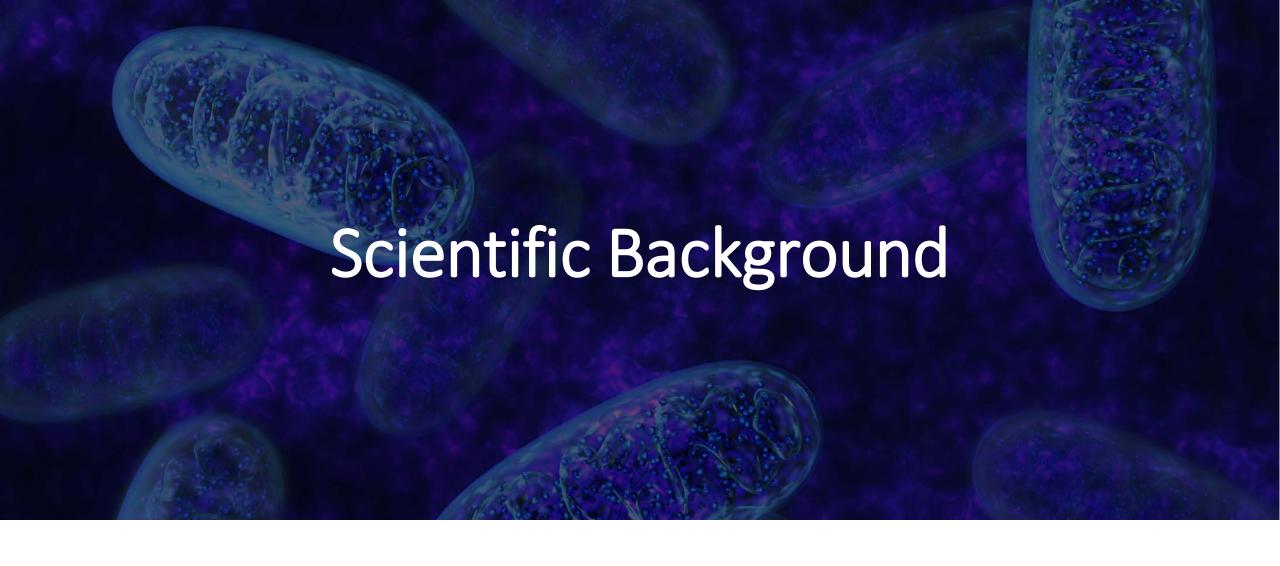
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Disclosures

- Justis P. Ehlers: Stealth (Consultant); Aerpio (Financial Support, Consultant); Alcon (Financial Support, Consultant); Thrombogenics/Oxurion (Financial Support, Consultant); Regeneron (Financial Support, Consultant); Genentech (Financial Support); Boehringer Ingelheim (Financial Support); Genentech/Roche (Consultant); Novartis (Financial Support, Consultant); Zeiss (Consultant); Adverum (Consultant); Leica (Patent, Consultant); Allergan (Financial Support, Consultant); Allegro (Consultant); Santen (Consultant).
- Peter K. Kaiser: Stealth (Consultant), Regeneron (Consultant), Allegro (Consultant), Novartis (Consultant).
- Sunil Srivastava: Regeneron (Financial Support); Santen (Financial Support); Eyevensys (Financial Support, Consultant); Novartis (Consultant); Allergan (Financial Support, Consultant); Regeneron (Consultant); AbbVie (Consultant); Gilead (Consultant); Leica (Patent); EyePoint (Financial Support, Consultant); Zeiss (Consultant).
- All other authors have no financial disclosures
- This analysis was supported by Stealth BioTherapeutics (Auburndale, MA, USA). Medical writing support was provided by i2Vision (San Diego, CA, USA) and funded by Stealth BioTherapeutics.

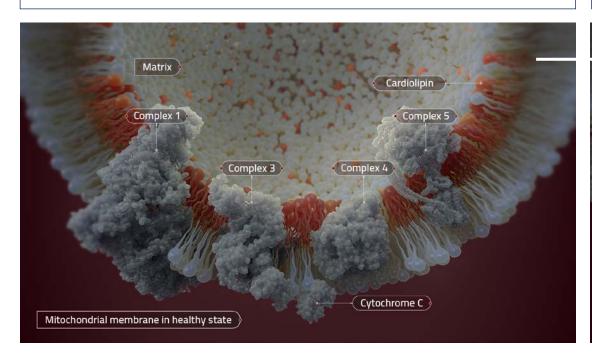


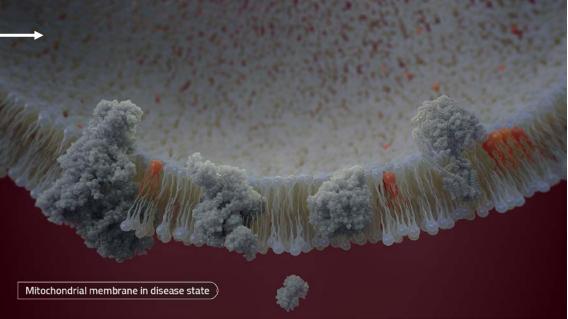
Mitochondrial Inner Membrane is Disrupted in Disease

Mechanism of disease

In healthy states, cardiolipin promotes inner mitochondrial membrane curvature to organize respiratory complexes

ROS-mediated damage of cardiolipin disrupts cristae curvature and organization of respiratory complexes



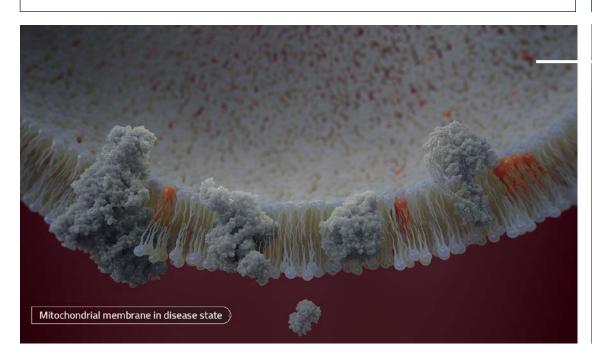


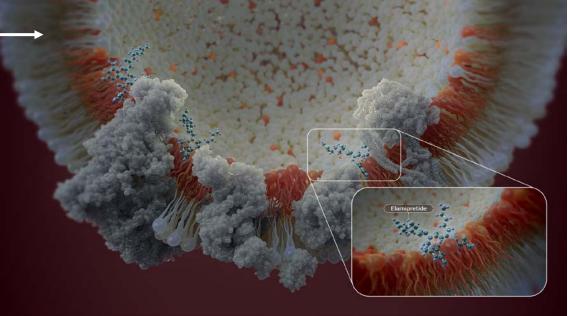
Elamipretide Binding to Cardiolipin Stabilizes the Inner Mitochondrial Membrane Structure

Mechanism of action

ROS-mediated damage of cardiolipin disrupts cristae curvature and organization of respiratory complexes

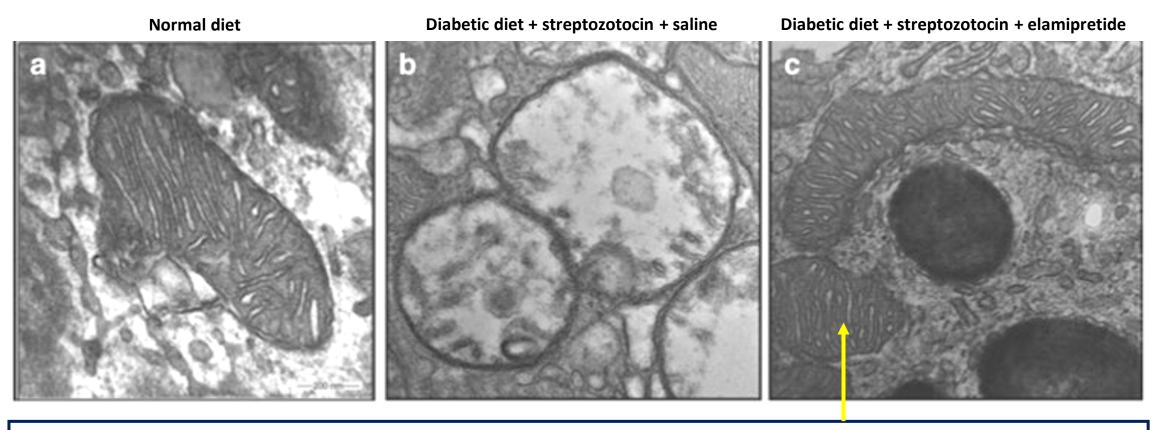
Elamipretide binds to cardiolipin and restores mitochondrial structure and function





Elamipretide Protects RPE Mitochondria in a Diabetic Mouse Model

Transmission electron micrographs of mouse RPE mitochondria

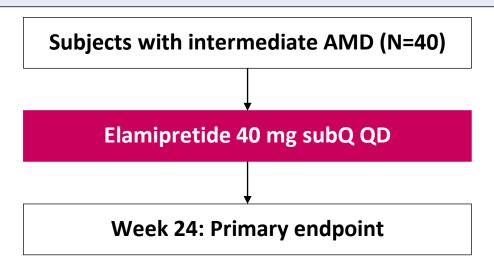


In diabetic mice treated with elamipretide, mitochondria retain normal architecture and cristae structure



ReCLAIM Study Design and Enrollment Criteria

An open-label, phase 1 trial of subcutaneous elamipretide for treatment of intermediate AMD



Noncentral GA subgroup

- Noncentral GA
 - Cumulative lesion area ≥1.27 mm² (~0.5 disc areas)
- No choroidal neovascularization
- BCVA ≥55 letters
- Low-luminance deficit >5 letters

Endpoints

Primary endpoint: Safety Efficacy Primary endpoint:

 Change in low-luminance visual acuity (LLVA)

Efficacy exploratory endpoints, included:

 Change in best-corrected visual acuity (BCVA)

High-risk drusen subgroup

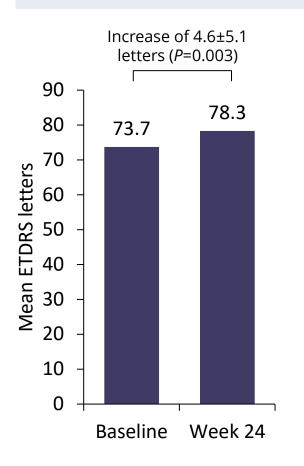
- High-risk drusen
 - ≥1 large (≥125 µm) druse or multiple medium-size (63-124 µm) drusen
- No choroidal neovascularization
- BCVA ≥55 letters
- Low-luminance deficit >5 letters

ReCLAIM Baseline Subject Demographics

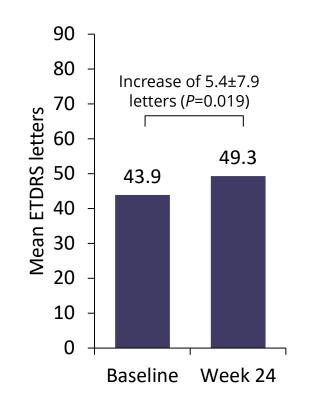
	Noncentral GA (N=19)	High-risk drusen (N=21)	Total (N=40)
Age, years			
Mean (SD)	76.0 (8.22)	70.9 (8.54)	73.3 (8.67)
Median	74.7	69.3	72.8
Min, max	64, 96	59, 87	59, 96
Sex, n (%)			
Male	8 (42.1%)	8 (38.1%)	16 (40.0%)
Female	11 (57.9%)	13 (61.9%)	24 (60.0%)
Ethnicity, n (%)			
 Hispanic or Latino 	1 (5.3%)	1 (4.8%)	2 (5.0%)
 Not Hispanic or Latino 	18 (94.7%)	20 (95.2%)	38 (95.0%)
White, n (%)	19 (100.0%)	21 (100.0%)	40 (100.0%)
Smoking status, n (%)			
 Never smoker 	8 (42.1%)	13 (61.9%)	21 (52.5%)
 Former smoker 	11 (57.9%)	8 (38.1%)	19 (47.5%)
 Current smoker 	0	0	0

ReCLAIM Visual Acuity Outcomes in the Noncentral GA Subgroup (N=19)

Best-corrected visual acuity (BCVA)

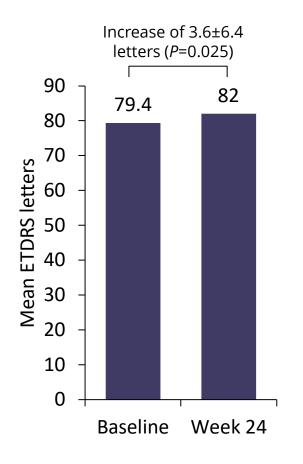


Low-luminance visual acuity (LLVA)

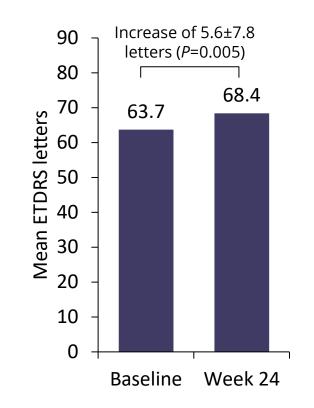


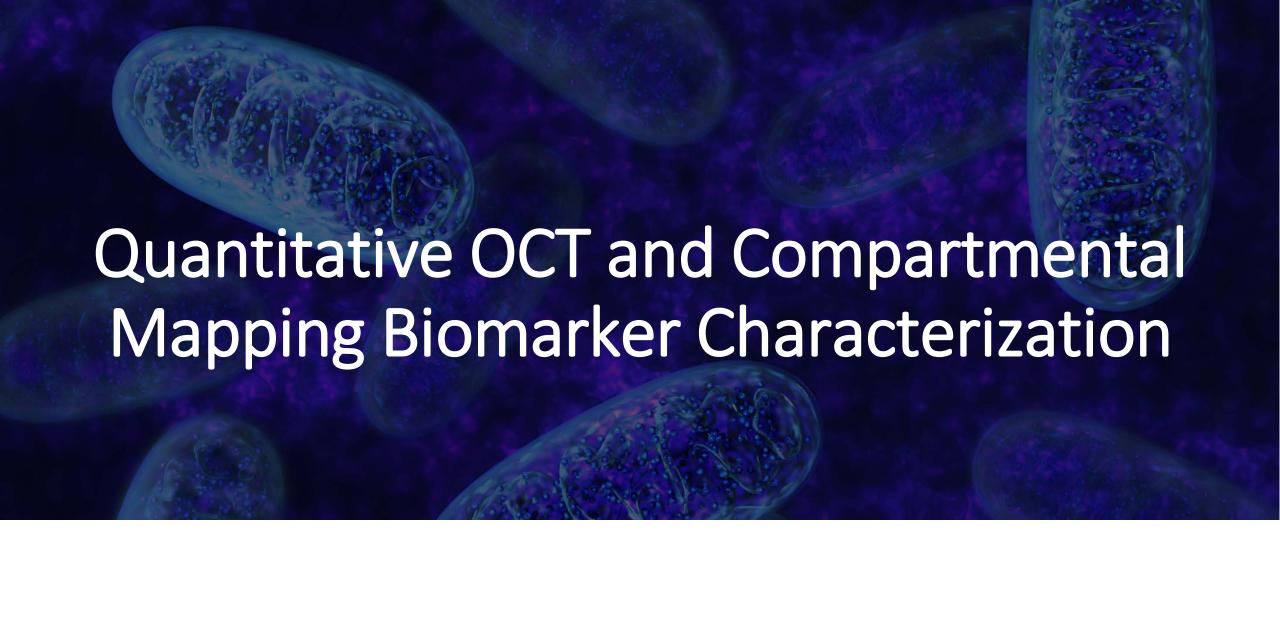
ReCLAIM Visual Acuity Outcomes in the High-Risk Drusen Subgroup (N=21)

Best-corrected visual acuity (BCVA)



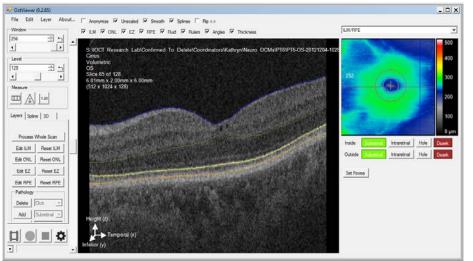
Low-luminance visual acuity (LLVA)

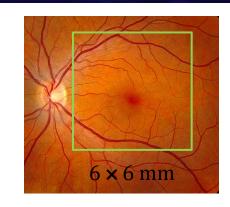


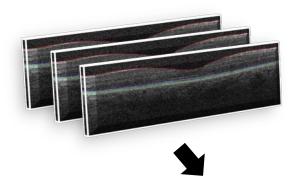


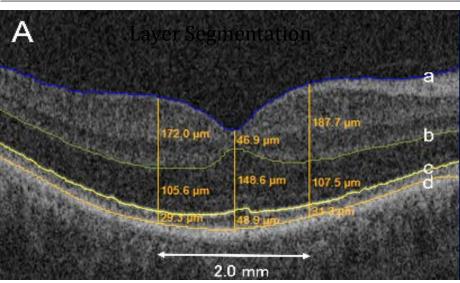
ML-Enhanced Multi-Layer Segmentation and Compartmental Mapping

Loading macular cube into OCT Mapping software



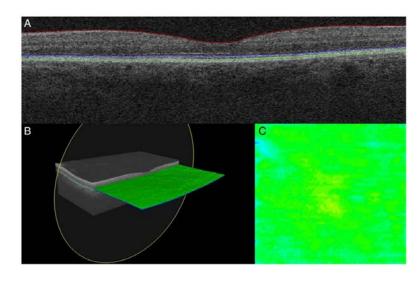






- a) ILM
- b) Between OPL/ONL
- c) EZ
- d) RPE

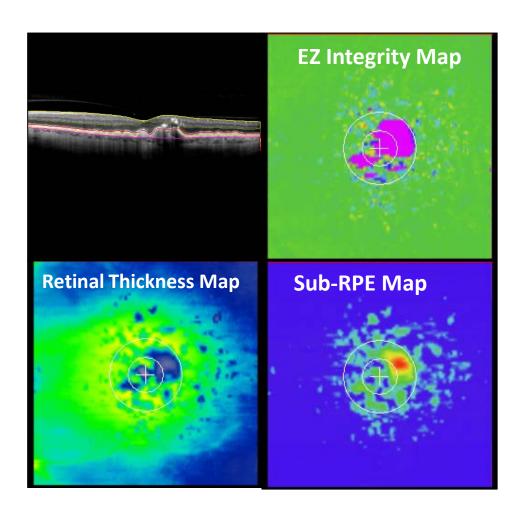
ONL/HFL-EZ EZ-RPE



3D reconstruction of macular cube

En face view of normative EZ mapping

Outer Retinal and Sub-RPE Mapping Outputs

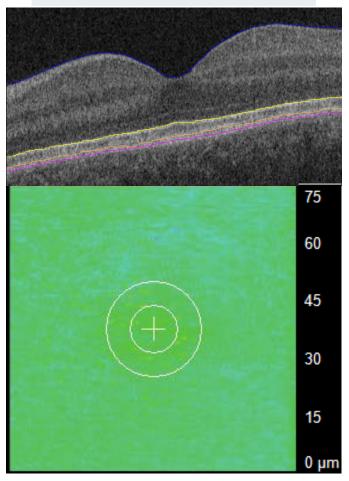


Quantitative retinal parameters include:

- EZ-RPE CST
- EZ-RPE volume
- Percentage of EZ-RPE total attenuation (i.e., thickness of 0 μm) and partial attenuation (i.e., < 20 μm) on en face map)
- RPE total attenuation (i.e., GA)
- Sub-RPE Volume
- ONL/HFL-EZ thickness
- ONL/HFL-EZ volume

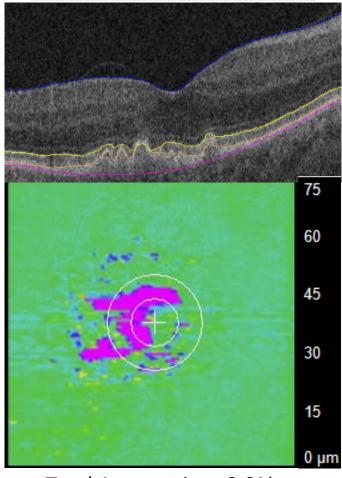
EZ Integrity Maps

Normal



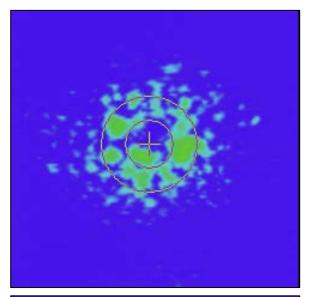
Total Attenuation: 0.0% EZ-RPE Volume: 1.27 mm³

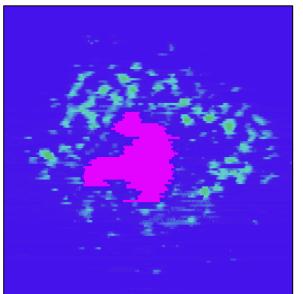
Abnormal



Total Attenuation: 3.3% EZ-RPE Volume: 1.23 mm³

Sub-RPE Compartment Maps





RPE-Bruch's membrane maps

- In normal eyes, these maps would be completely blue, representing the close apposition of the RPE and Bruch's membrane.
- Green represents elevation of the RPE (i.e., drusen).
- Pink represents RPE atrophy (i.e., GA)



ReCLAIM- Quantitative Compartmental OCT Analysis Methods

Higher-order OCT features evaluated via automated machine-learning augmented multilayer retinal segmentation with expert reader manual verification to quantify:

- ➤ Outer retinal integrity [e.g., EZ-RPE thickness, percent EZ attenuation, outer retinal parameters (i.e., ONL to RPE thickness)].
- ➤ Sub-RPE compartment metrics.

Post hoc analysis assessed correlation between baseline higher order OCT features and change in LLVA from baseline to Week 24

ReCLAIM- Quantitative Compartmental OCT Analysis Results in Non-Central GA Patients

In the non-central GA subgroup (n = 19), changes from baseline to week 24 in LLVA were significantly correlated to:

- \triangleright Baseline macular percentage of total EZ attenuation (r = -0.72; P = 0.002)
- \triangleright Baseline pan-macular EZ-RPE volume (r = 0.62; P = 0.01)

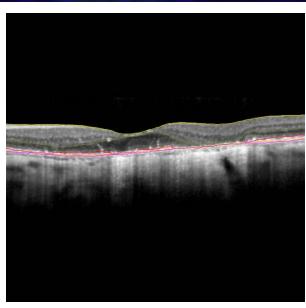
Eyes gaining 2 lines or more had:

- \triangleright Significantly less macular total EZ attenuation at baseline (9.0% vs 27%; P = 0.03)
- \triangleright Significantly less percentage area of macular GA (4.7% vs 15.6%; P = 0.004)

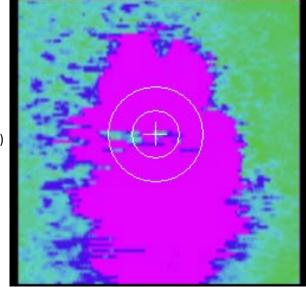
ReCLAIM- Quantitative Compartmental OCT Analysis Non-central GA Patient Case Example (2 letters gain)

NIR Fundus Image

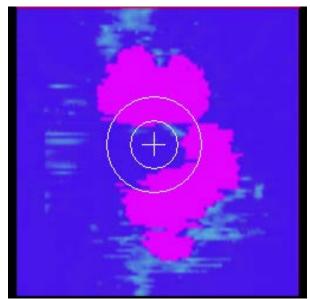
B-Scan at Fovea



EZ-RPE Map (Pink – Total EZ Attenuation)

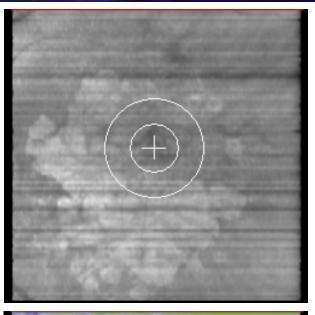


RPE-BM Map (Pink = GA)

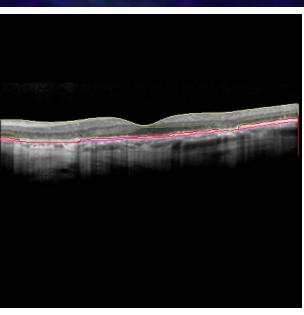


ReCLAIM- Quantitative Compartmental OCT Analysis Non-central GA Patient Case Example (4 letters gain)

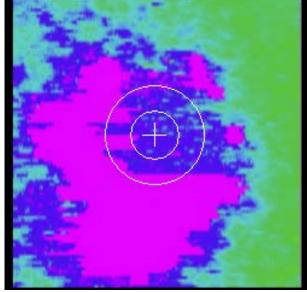
NIR Fundus Image



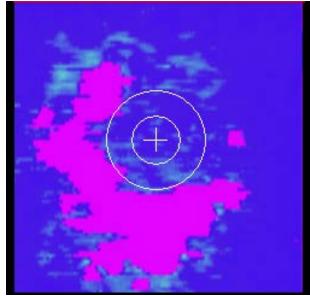
B-Scan at Fovea



EZ-RPE Map (Pink – Total EZ Attenuation)

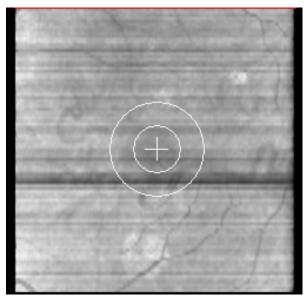


RPE-BM Map (Pink = GA)

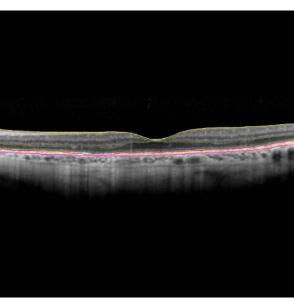


ReCLAIM- Quantitative Compartmental OCT Analysis Non-central GA Patient Case Example (18 letters gain)

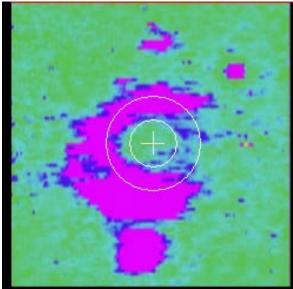
NIR Fundus Image



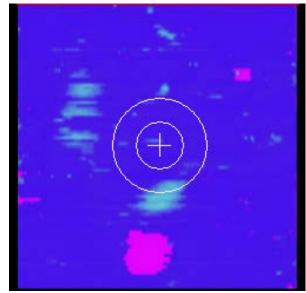
B-Scan at Fovea



EZ-RPE Map (Pink – Total EZ Attenuation)



RPE-BM Map (Pink = GA)



ReCLAIM- Quantitative Compartmental OCT Analysis Results (High Risk Drusen)

In high risk drusen subgroup (n = 21), changes from baseline to week 24 in LLVA correlated to:

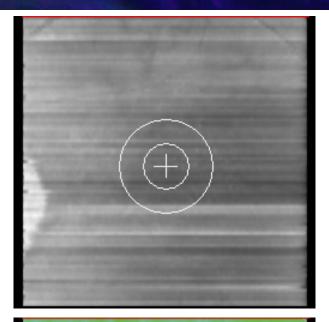
 \triangleright Mean central macular (e.g., central 2 mm) retinal thickness (r = 0.58; P = 0.009)

Eyes gaining 2 lines or more had:

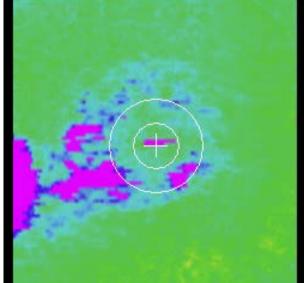
- \triangleright Significantly greater baseline preservation of the central macular outer retina (ONL-RPE thickness, 137 µm vs 117 µm; P = 0.006)
- \triangleright Trend towards less baseline macular partial EZ attenuation (1.1% vs 5.0%; P = 0.06)

ReCLAIM- Quantitative Compartmental OCT Analysis High Risk Drusen Patient Case Example (2 letters loss)

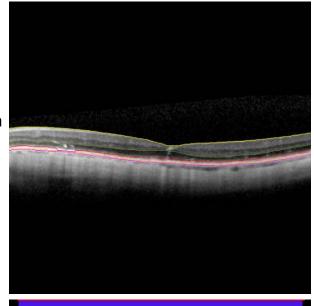
NIR Fundus Image



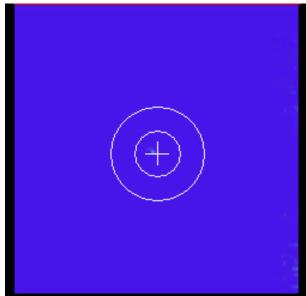
EZ-RPE Map (Pink – Total EZ Attenuation)



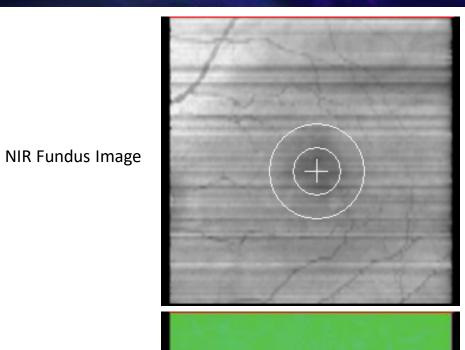
B-Scan at Fovea

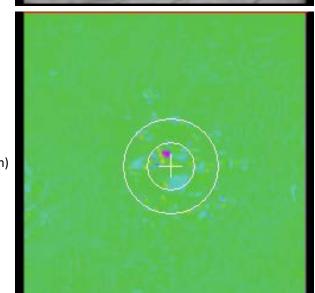


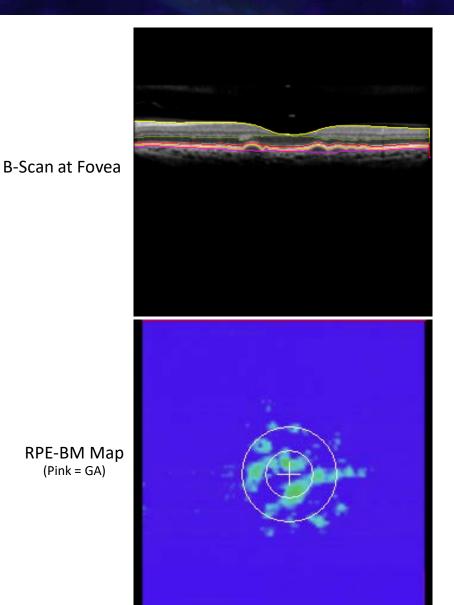
RPE-BM Map (Pink = GA)



ReCLAIM- Quantitative Compartmental OCT Analysis High Risk Drusen Patient Case Example (10 letters gain)







EZ-RPE Map (Pink – Total EZ Attenuation)



ReCLAIM — Quantitative Compartmental OCT Analysis Limitations

Small sample size

No placebo control group for comparison

Post-hoc assessment for hypothesis generation and exploratory evaluation

Assessments performed without multiple comparison correction due to exploratory nature of analysis



ReCLAIM – Quantitative Compartmental OCT Analysis Conclusions

Exploratory assessment of baseline higher order OCT parameters, such as EZ integrity and the sub-RPE compartment, demonstrated correlation of select parameters with functional response to elamipretide treatment

Disruption of outer retinal features may be an important biomarker for potential treatment response to elamipretide

Further research is needed to better characterize these potential imaging biomarkers and evaluate their potential role for clinical trial enrichment and prediction of treatment response



Acknowledgements



The Tony and Leona Campane Image-Guided Surgery and Advanced Imaging Lab

- Sunil K. Srivastava, MD
- Ming Hu, PhD
- Amy Babiuch, MD
- Jon Whitney, PhD
- Gagan Kalra, MD
- Leina Lunasco
- Sari Yordi, MD
- Maggie O'Connell
- Anu Hanumanthu

- Jamie L. Reese, BSN
- Joseph Abraham, MD
- Katherine Talcott, MD
- Kubra Sarici, MD
- Sudeshna Sil Kar, PhD
- Jenna Hach
- Jordan Bell
- Nicole Cardwell
- Sydney Sterben
- CJ Bell

- Katherine Talcott, MD
- D. Damla Sevgi, MD
- Hasan Cetin, MD
- Carmen Calabrise
- Alison Martin
- Christopher Mugnaini
- Alex Halasi
- Natalie Coughlin
- Katherine Wise

