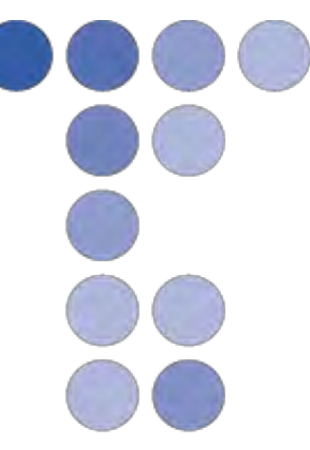


COMPARABLE EFFICACY OF IBALIZUMAB IN COMBINATION WITH ONE OR TWO FULLY ACTIVE AGENTS



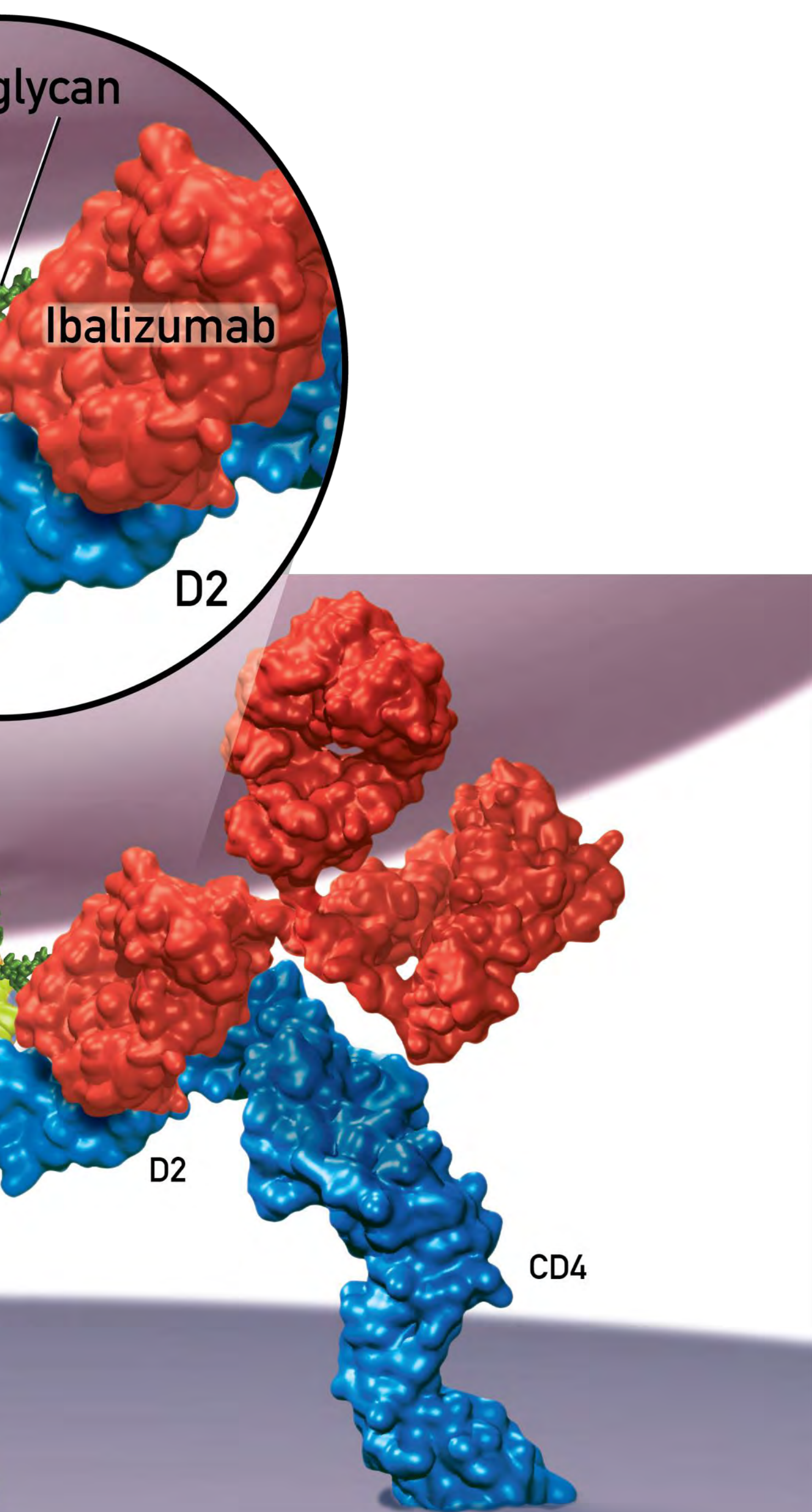
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Introduction

Acting humanized monoclonal antibody that blocks CD4 cells. Unlike other antiretroviral agents, it targets an informational epitope on the 2nd extracellular domain of the CD4 receptor, away from the gp120 binding site, preventing HIV from infecting CD4 cells while preserving normal function.

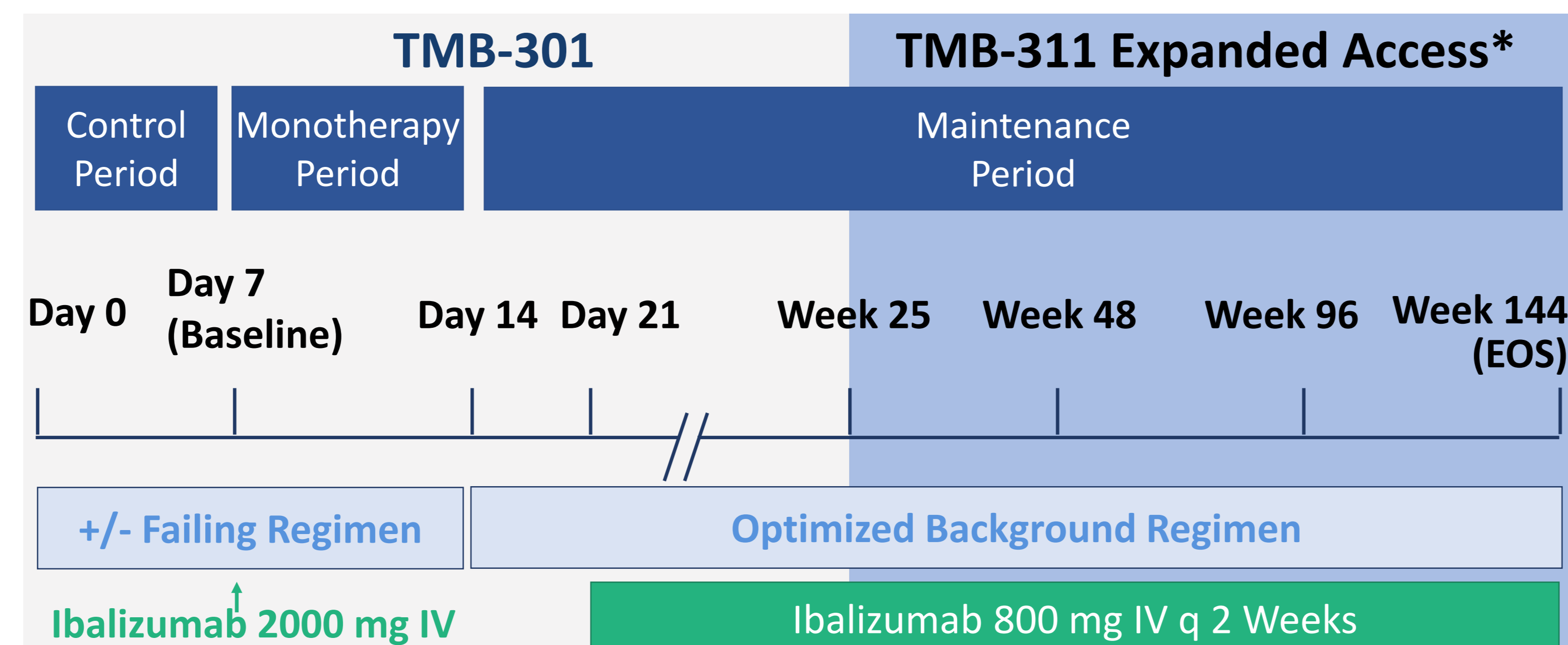
Approved by FDA in March 2018 for the treatment of heavily treatment-experienced multidrug resistant (MDR) HIV-1 on a current antiretroviral (ARV) regimen. It is a long-acting (non-daily) ARV and acts on the CD4 cell rather than the virus.



Methods

- TMB-301 was a single arm, 25-week study of IBA plus OBR in treatment-experienced subjects infected with MDR HIV-1.
- Subjects receiving their current failing ARV therapy, or no therapy, were monitored during a 7-day control period. Thereafter, a loading dose of 2,000 mg of intravenous (IV) IBA was the only ARV agent added to their regimen for 7 days. An OBR with at least one additional sensitive agent was started 7 days after loading dose. IBA was continued at doses of 800 mg IV every 2 weeks through 25 weeks on study treatment.
- Eligible subjects (i.e. completed the 25-week TMB-301 study in the US and Puerto Rico) continued to receive IBA at 800 mg Q2W in study TMB-311 (Expanded Access) for up to 96 weeks.

STUDY DESIGN



*Patients transitioned to commercial drug when ibalizumab was approved

Results

BASELINE CHARACTERISTICS

Characteristic	OSS*=1	OSS=2
Number of patients	12	18
Median viral load (IOR)	64,550 copies/mL	20,350 copies/mL

Results (cont'd)

EFFICACY OUTCOMES

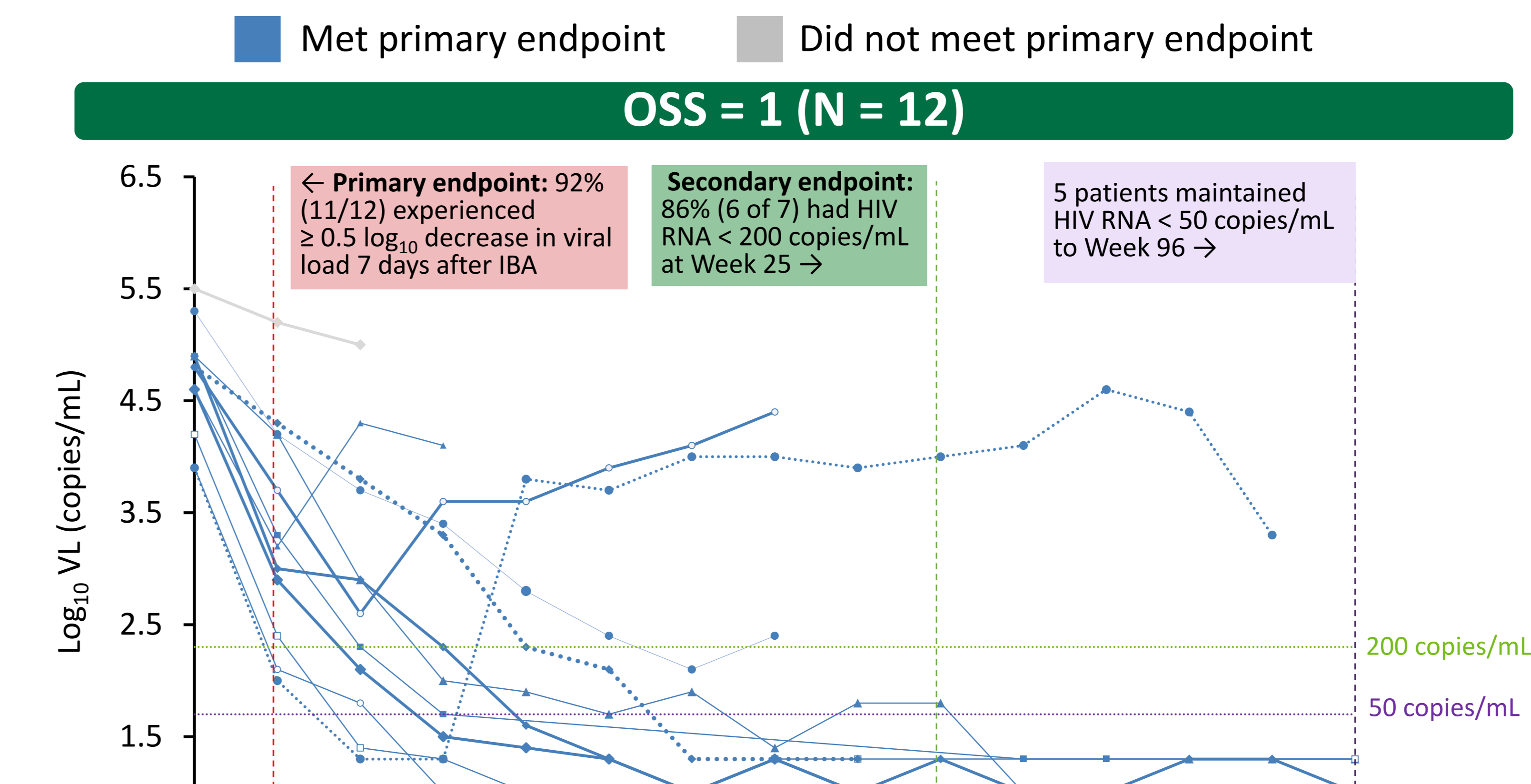
- A potent viral load reduction was observed with IBA functional monotherapy in patients with both one and two fully active agents.
- Patients receiving IBA in combination with both one and two fully active agents similarly maintained virologic suppression between Week 25 and 96.

	OSS = 1	OSS = 2
Primary endpoint (at Day 14)	n = 12	n = 18
≥ 0.5 log ₁₀ decrease in VL from BL	92%	72%
Secondary endpoints (at Week 25)	n = 7*	n = 16*
Mean change in VL (log ₁₀ copies/mL) from BL	-3.3	-2.3
VL < 50 copies/mL	71%	56%
VL < 200 copies/mL	86%	69%
≥ 0.5 log ₁₀ decrease in VL from BL	86%	100%
Outcomes (at Week 48)	n = 6*	n = 13*
Mean change in VL (log ₁₀ copies/mL) from BL	-2.8	-2.5
VL < 50 copies/mL	83%	69%
Outcomes (at Week 96)	n = 5*	n = 12*
Mean change in VL (log ₁₀ copies/mL) from BL	-3.3	-2.4
VL < 50 copies/mL	100%	75%

BL, baseline; VL, viral load.

*Values reflect percentages from patients who completed endpoint of interest.

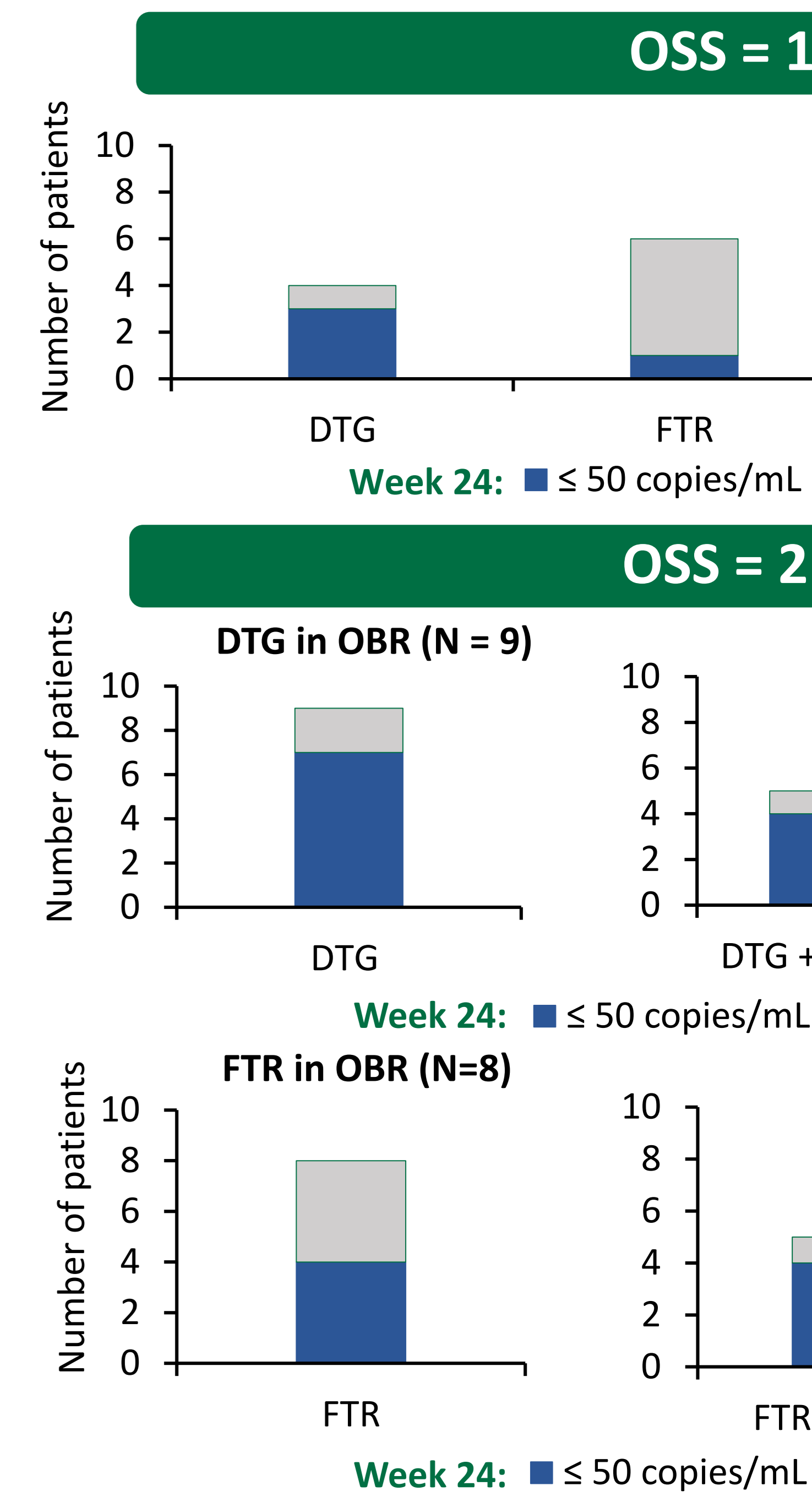
VIRAL LOAD – BASELINE TO WEEK 96



Results

FULLY ACTIVE

- Among patients receiving IBA plus OBR, 3 out of 4 patients with DTG and 1 out of 1 patient with FTR with OSS = 2 achieved VL < 50 copies/mL at Week 24.



- The majority of patients receiving IBA plus one or two fully active agents achieved virologic suppression on their first fully active agent.

First Fully Active Agent	Second Fully Active Agent
DTG	DTG
DTG	DTG
DTG	DTG
DTG	TFV
TFV	TFV
TFV	ENF
ENF	RPV
RPV	MVC