

SCYX-7158 (AN5568)

NEW TREATMENTS FOR SLEEPING SICKNESS

DNDi

Drugs for Neglected Diseases *initiative*
Iniciativa “Medicamentos para Doenças Negligenciadas”

ASTMH NOV 2012

Antoine Tarral, MD, Head of HAT Clinical program

NECT: The Urgent solution

- Previous treatment for 2nd stage HAT
 - Too toxic. Melarsoprol, 5% mortality
 - Cumbersome. Eflornithine 56 IV infusions 14 days
- NECT, since September 2009
 - By adding oral Nifurtimox 3 times per day,
 - Eflornithine infusion reduced to 7 days, 14 infusions
- Still heavy logistics and high cost
 - Kits: 4 treatments, weight 38 kg and costs €1152
- Adverse events
 - 93% of patients, average of 4 per patient
- Not yet fulfilling TPP

DNDi HAT disease Strategy

Objectives Update

- To deliver two new treatments for HAT by 2018
 - ▣ Fexinidazole: Registration for treatment of stage 2 and stage 1 HAT by end 2016
 - ▣ SCYX-7158: Registration for stage 2 and stage 1 HAT by 2018
- Characteristics of such a treatment: (TPP)
 - ▣ Short-course oral treatment of no more than 10 days
 - ▣ Could be used to manage stage 1 and 2 of the disease
 - ▣ Safe enough to be used after a very simple RD test at a local level
 - ▣ Offering the possibility of horizontal program for the management of the disease
 - ▣ Much simpler and much cheaper than existing therapies: less than 50US\$ per patient versus 440 US\$ for the stage 2 of the disease

Fexinidazole

- Discovery : 1970 HOE 239, discontinued 1980

Resuscitated in 2003

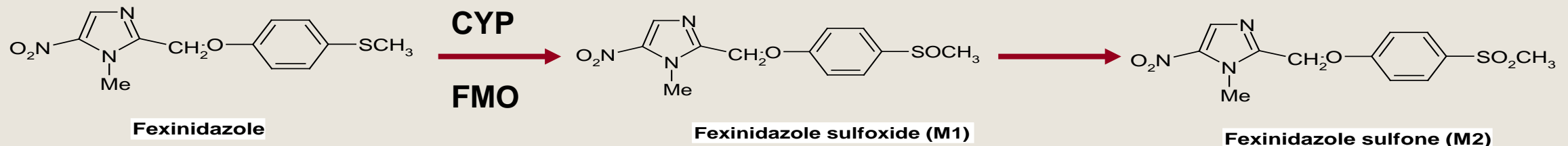
- 5-nitro-imidazole family

- Characteristics

- MOL.Wt FEXI = 279 g/mol
- MOL.Wt M1 = 295 g/mol
- MOL.Wt M2 = 311 g/mol

- pKa-value = very weak base
- $\log D_{\text{pH } 7.4} = 2.8$

- Metabolism

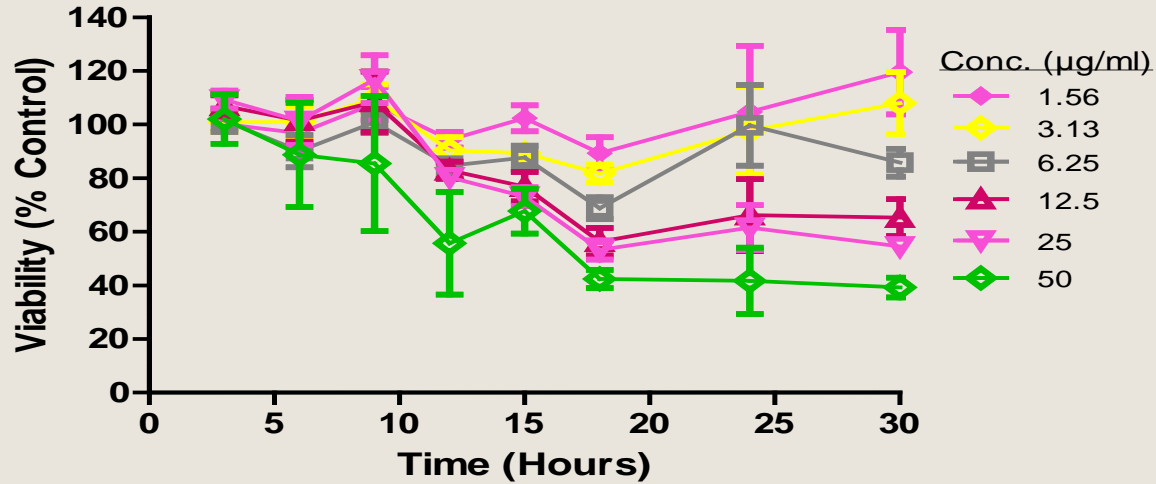


ASTMH NOV.2014

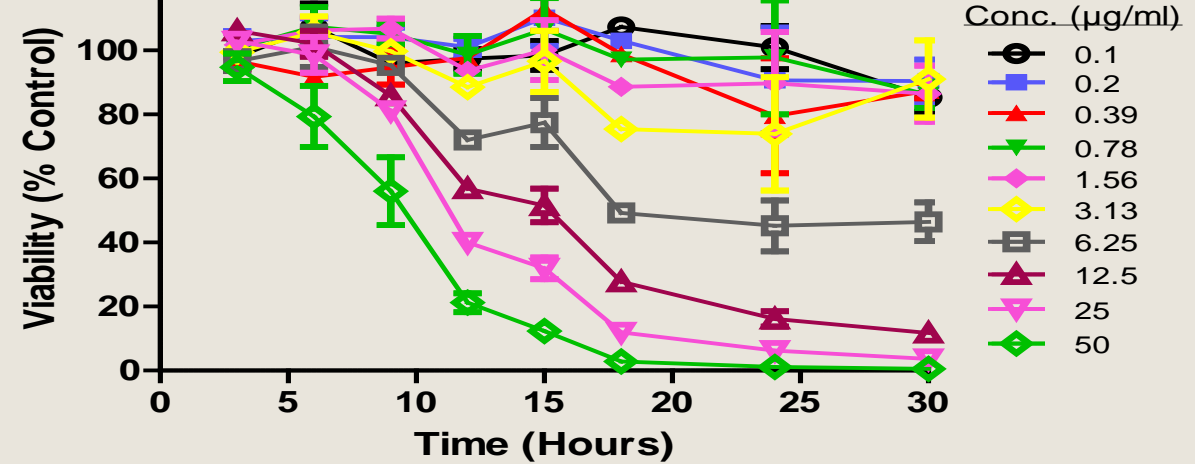
Time to Kill Assays

Fexinidazole and Metabolites

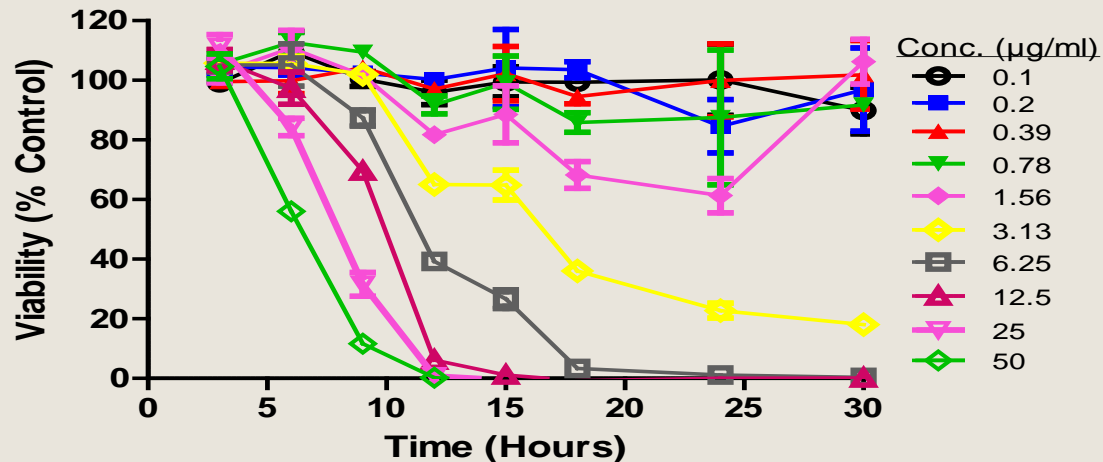
Fexinidazole ($IC_{90} = 5.00 \mu\text{g/ml}$)



Fexinidazole-Sulfoxide ($IC_{90} = 4.74 \mu\text{g/ml}$)



Fexinidazole sulfone ($IC_{90} = 2.20 \mu\text{g/ml}$)



Activity is concentration-dependent till MIC
But time-dependent for parasite cidal effect

Key preclinical data

- The most active metabolite is M2: Fexinidazole sulfone
- IC₉₀ of M2 is 2.200 ng/mL T1/2 > 24H
- No drug interaction expected as several CYP P450 involved

- ADME Rat brain concentration:

Met ID	Collection time	
	8 h	24 h
fexinidazole	3.3 %	nd
M1	36.1 %	12.3 %
M2	56.1 %	76.2 %

No genotoxicity, no phototoxicity

NOAEL = 200 mg/kg Safety margin= 800mg/kg

Efficacy concentration in mice : 8-10 µg/mL of M2

Fexinidazole Clinical Studies

ASTMH NOV.2014

Phase I studies (1)

118 /154 subjects have been exposed to Fexinidazole

□ Tolerability study

- *Part 1 :Single ascending dose study 100mg – 3600mg*
- *Part 2 :Cross-over bioequivalence and food effect study (high fat rich meal / placebo)*
 - 1200mg single dose
- *Part 3 (Multiple ascending dose study for 14 days 3 cohorts of 8 subjects)*
 - Three cohorts of 8 subjects (6 active, 2 placebo) 1200mg, 2400mg & 3600mg

□ Field food interaction study (3way cross-over study ,12 subjects)

- Plumpy nuts, rice and beans / placebo 1200mg single dose

Phase I studies (2)

□ POP PK analysis to evaluated the best therapeutic dose

- Multiple scenarios were explored
- 1 dose/day for 10 days with food
 - loading dose for 4 days of 1800mg /day
 - + treatment dose for 6 days of 1200mg /day

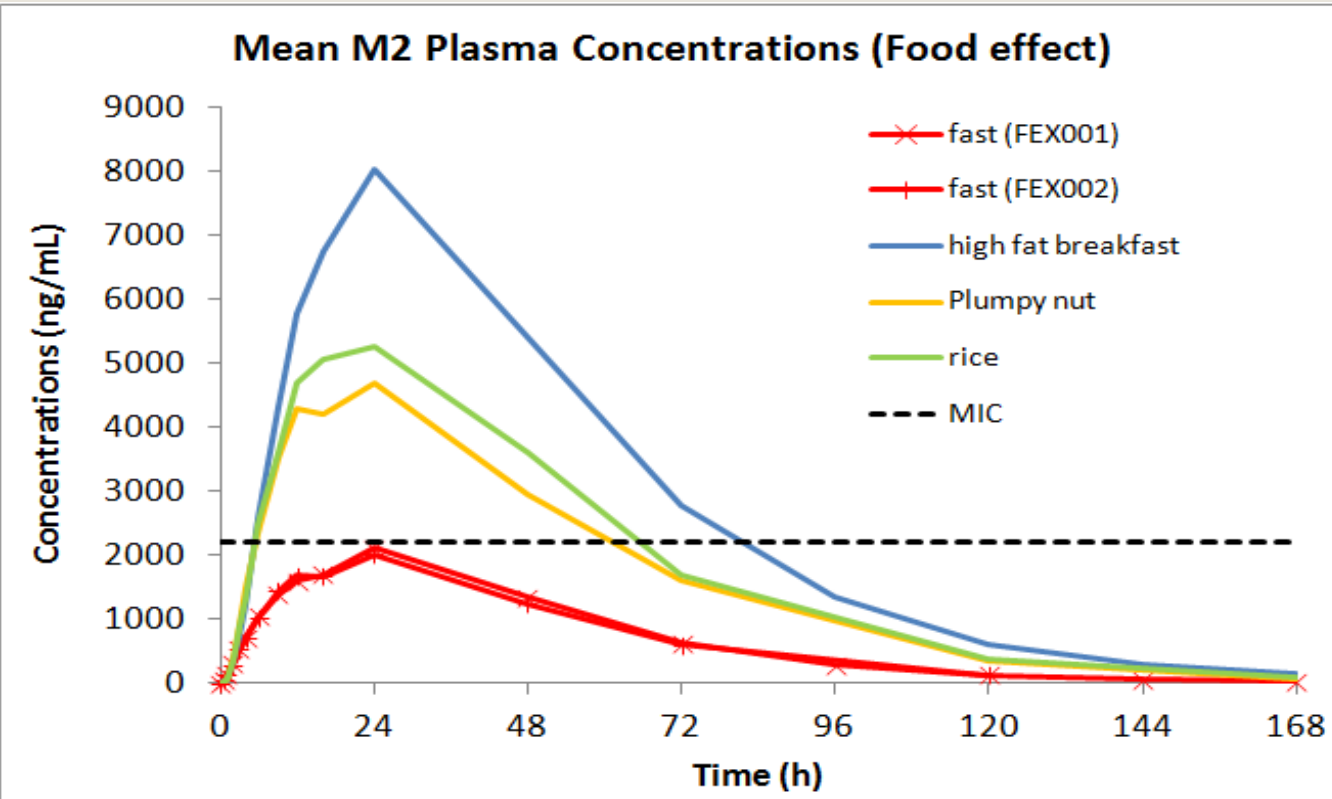
□ Multiple dose in fed condition with the therapeutic dose

- Randomized, double-blind versus placebo
- Two cohorts of 18 subjects (12 active, 6 placebo/cohort)
 - loading dose of 1800mg for 4 days + 1200mg for 4 days
 - loading dose of 2400mg for 4 days + 1200mg for 4 days

PK Results

- Absolute Bioavailability \approx 41% in mice; 30% in rats
 - Fexinidazole: median T_{mx}: 3-4 H; mean T_{1/2}: 9-15H
 - M1 sulphoxide: median T_{mx}: 2-5 H; mean T_{1/2}: 18-20H
 - M2 sulphone: median T_{mx}: 18-24 H; mean T_{1/2}: 18-25H
- Exposure increased linearly, but not proportional to dose administered
- No saturation of the metabolism
- Steady state in fasted conditions: D4 for fexi and M1, D9 for M2
- Food effect: 2-3 fold increase in plasma concentration / fasting
- High plasma free fraction of the metabolites M1:59% and M2: 43%

M2 fed : Mean Plasma levels



✓ high fat breakfast:

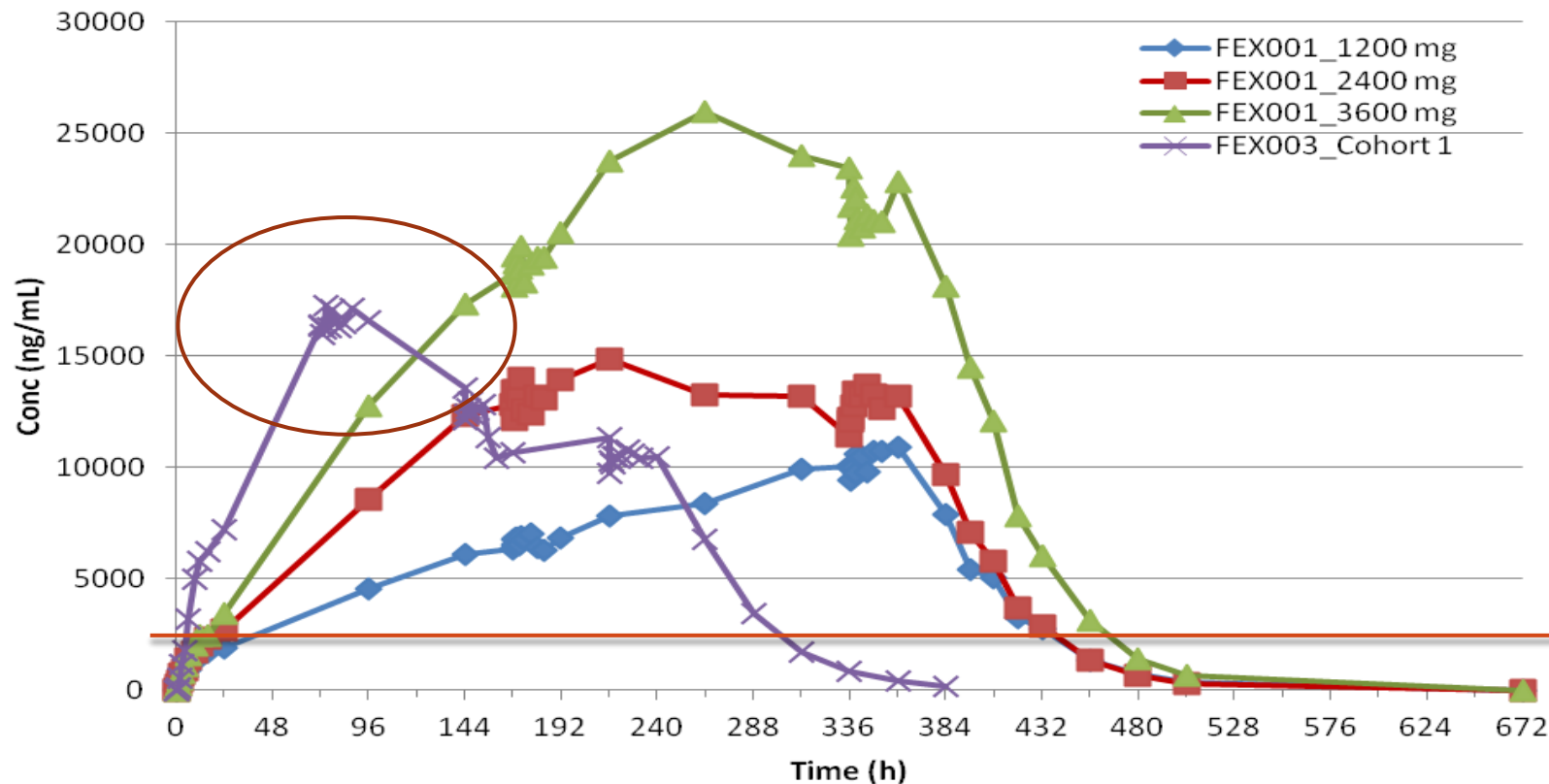
- AUC FEXI x 5
- AUC M2 x 4

✓ rice & beans or Plumpy nuts:

- AUC FEXI and M2 x 2.5-3

PK results : 1800/1200mg

M2 Mean Plasma Concentrations



M2 plasma levels

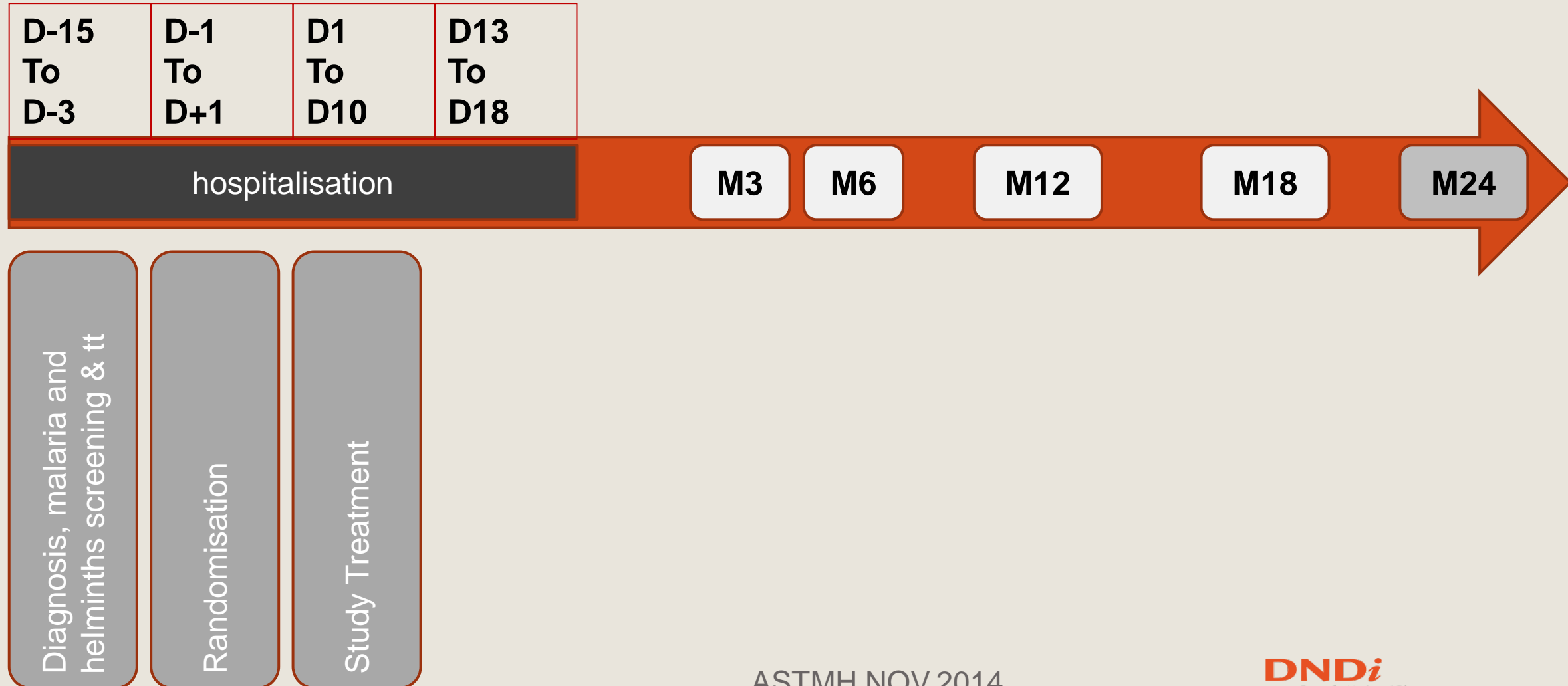
- reached earlier
- maintained for 3 to 4 days above 10 mg/L.
- In more than 80% of the subjects

IC₉₀ 2200ng /ml

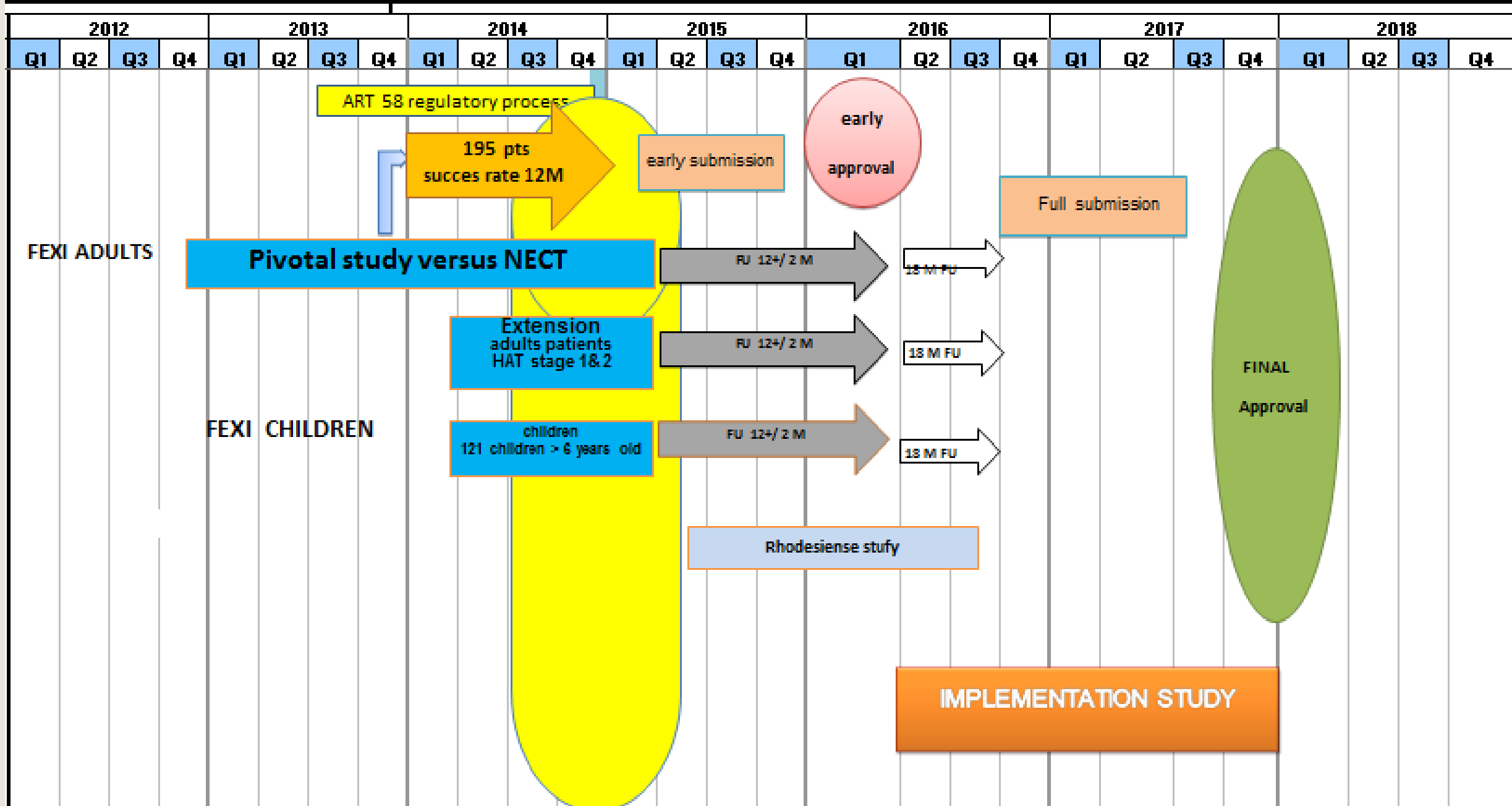
Fexinidazole phase II/III

ASTMH NOV.2014

Schedule of visits phase II/III study



Strategic Development Plan for HAT disease



SCYX-7158 (AN5568)

In collaboration with:

Anacor Pharmaceuticals, Inc.



Pace University



SCYNEXIS, Inc.



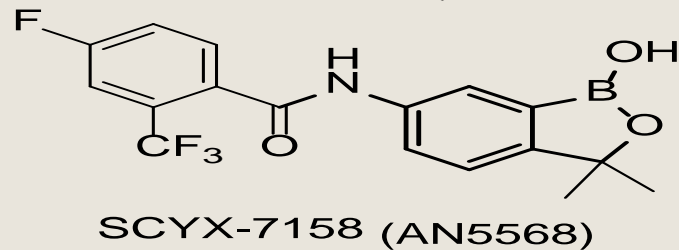
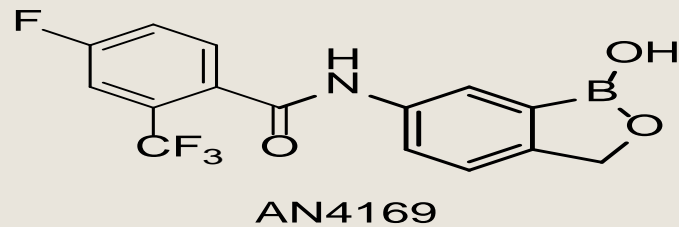
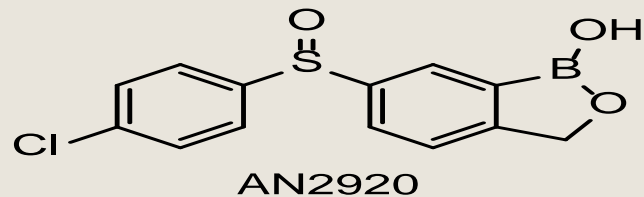
ASTMH NOV.2014

DNDi

Drugs for Neglected Diseases *initiative*
Iniciativa "Medicamentos para Doenças Negligenciadas"

SCYX- 7158 (AN5568)

First DNDi Preclinical Candidate for HAT From Lead Optimization Program^{1,2}



- Initial screening hit identified at UCSF Sandler Center (J. McKerrow)
- Initial “lead” identified from further screening and early SAR development at SCYNEXIS
- Optimized lead which was progressed to pre-clinical and clinical evaluation³
- Phase 1 clinical trials started in 2012

¹Jacobs, RT, et al, Future Med Chem **2011**, 3, 1259

²Nare, B, et al, Antimicrobial Agents Chemotherapy **2010**, 54, 4379

³Jacobs, RT, et al, PLoS Negl Trop Dis **2011**, 5, e1151

SCYX-7158 PROPERTIES¹

ASTMH NOV.2014

□ Mol. Wt. = 367.11 g/mol

□ Pka= 9.61

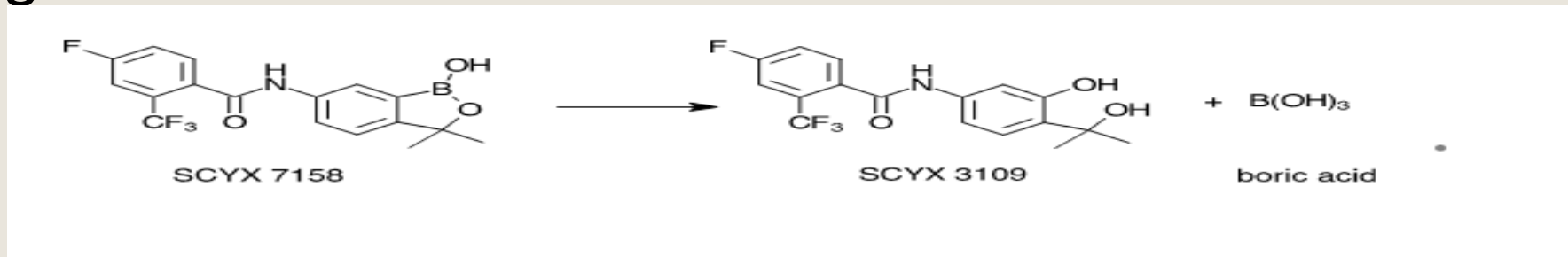
□ logD=3.51

□ MDCK-MDR1 $P_{app}(A-B) > 350$ nm/s

□ $V_d > 0.6$ L/Kg = distribution into the whole body water

□ Half-life of around 16 days **single dose administration**²

□ Oxidative deboronation to SCYX 3109 is primary metabolism³

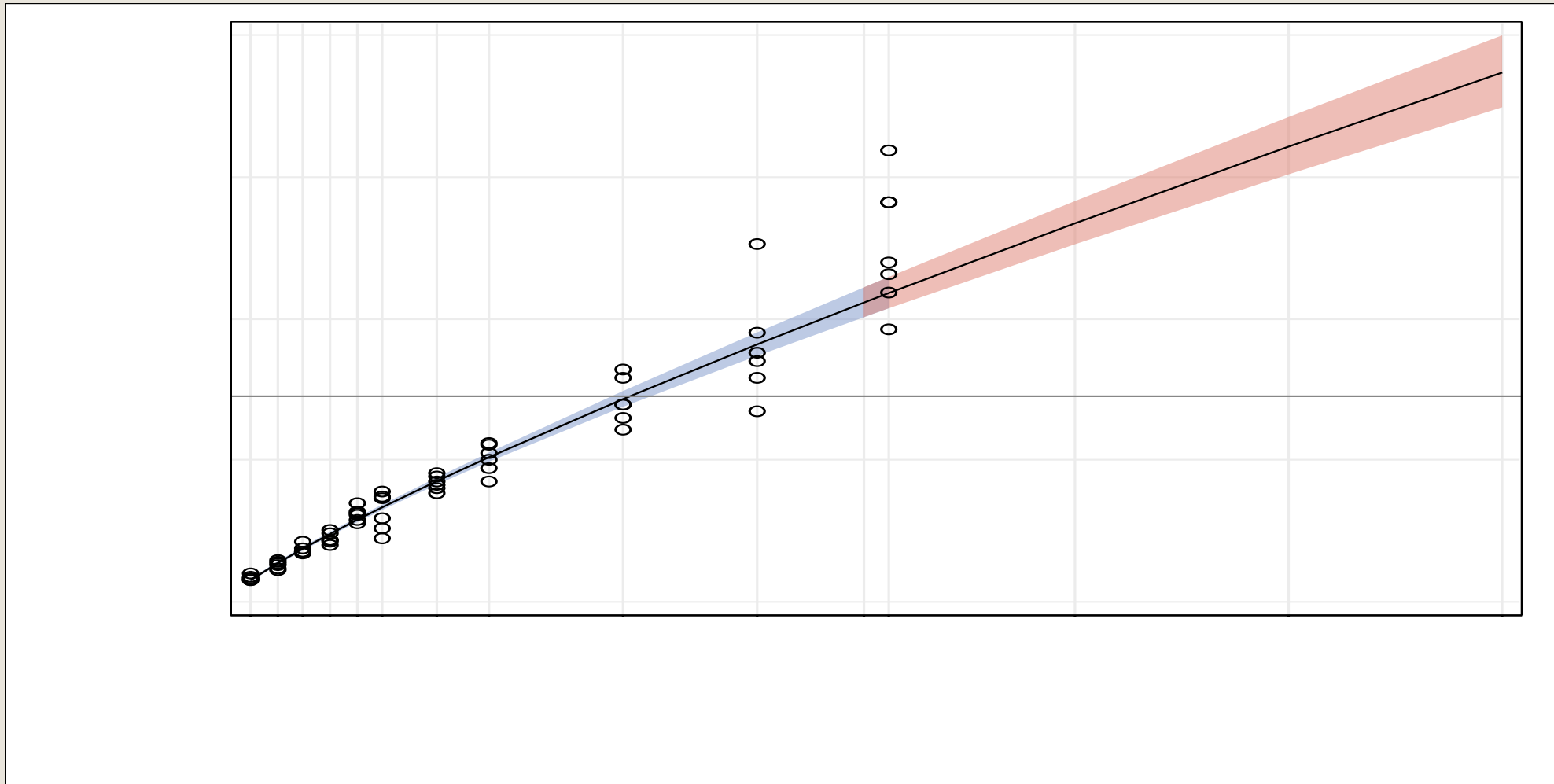


¹SCYX-7158 Investigational Medicinal Product Dossier, DNDi, 2012.

² Study report PH11015/DNDiOXA001, PhinC/DNDi, April 2014.

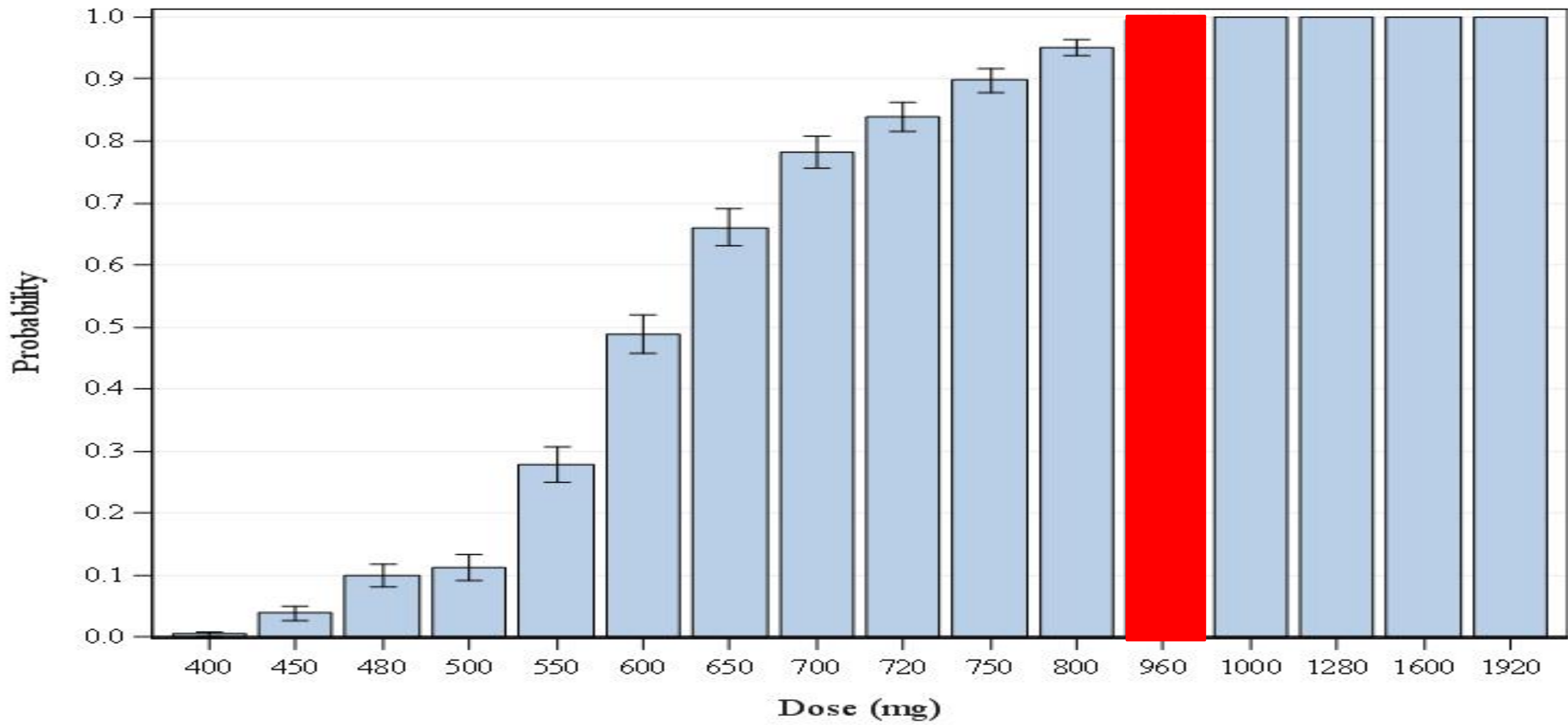
³ SCYX-7158 Investigator's Brochure, DNDi, 2012.

Observed individual AUC_{72-96} superimposed with estimated GM (and 90% CI)¹



¹ Study report PH11015/DNDiOXA001, PhinC/DNDi, April 2014.

Probability of reaching AUC_{72-96} of 290000 ng*h/mL in plasma (corresponding to 5800 ng*h/mL in CSF) according to dose



Conclusions

- Two new oral compounds to treat sleeping sickness
 - Fexinidazole once a day for 10 days
 - SCYX- 7158 (AN5568): Potential for single oral dose
- Both active against *T. brucei gambiense* and *rhodesiense*
- Along with a simplified field adapted diagnostic test
- On the way to changing the paradigm of treatments for sleeping sickness

Publications

□ Fexinidazole

- **Kaiser M &all** (2011). Anti-trypanosomal activity of Fexinidazole – A New Oral Nitroimidazole Drug Candidate for the Treatment of Sleeping Sickness. *Antimicrobial Agents Chemotherapy*. doi: 10.1128/AAC.00246-11.
- **Torrele E &all** (2010). Fexinidazole – A New Oral Nitroimidazole Drug Candidate Entering Clinical Development for the Treatment of Sleeping Sickness. *PLoS Negl Trop Dis* 4:e923. doi:10.1371/journal.pntd.0000923
- **Tarral A & all** (2014) ; Determination of an optimal dosing regimen for fexinidazole, a novel oral drug for the treatment of human african trypanosomiasis: first in human studies clinical pharmacokinetics 2014, 5, pp 565-580

□ SCYX-7158 (AN5568)

- **Jacobs RT & all(2010)** Benzoxaboroles: a new class of potential drugs for human african trypanosomiasis *Future Med. Chem.* 3(10) 1259-1278
- **Jacobs RT &all(2011)** SCYX- 7158, An orally active benzoxaborole for the treatment of stage 2 human African trypanosimiasis . *PLoS Negl Trop Dis* 5(6), e1151.
- **Wring S & all (2013)** SCYX-7158 (AN5568) : CNS Exposure Predicted from First-in-Human Clinical Studies Indicates a Single Oral Dose Treatment is Possible for Sterile Cures of Stage 2 Human African Trypanosomiasis *ASTMH 62nd Annual Meeting Washington D.C., 13-17th November 2013*

THANK YOU

DNDi

Drugs for Neglected Diseases *initiative*
Iniciativa “Medicamentos para Doenças Negligenciadas”