





Systematic Processing of Full Genomic Analysis of ANAVEX[®]2-73 Phase 2a Alzheimer's Disease Study Identifies Biomarkers Enabling a Precision Medicine Approach

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<u>Harald Hampel, MD, PhD¹</u>, Mohammad Afshar, MD, PhD², Frédéric Parmentier, PhD², Coralie Williams, MSc², Adrien Etcheto, MSc², Federico Goodsaid, PhD³, Emmanuel O Fadiran, PhD⁴, Christopher U Missling, PhD⁴

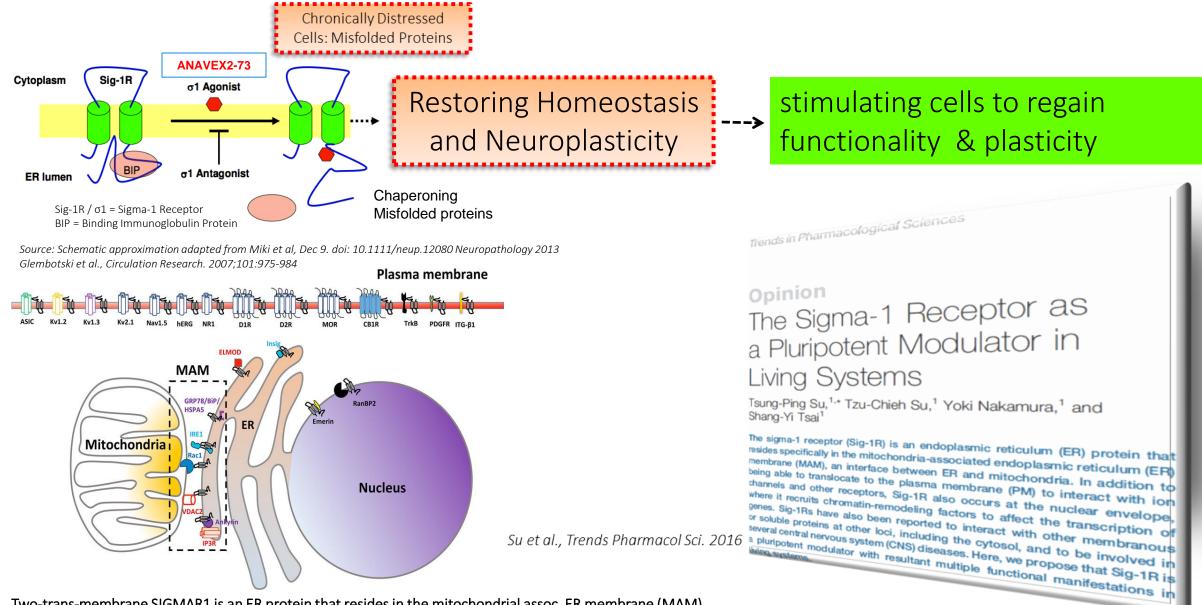
¹Department of Neurology, Sorbonne University, Paris, France; ²Ariana Pharma, Paris, France, ³Regulatory Pathfinders LLC, San Francisco, CA, ⁴Anavex Life Sciences Corp., New York, NY



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- ANAVEX®2-73 is a novel compound relevant to AD and neurodegenerative, neurological diseases
- Targeting the Sigma-1 receptor (SIGMAR1)
- Selective under pathological conditions while sparing normal physiological activity, thus limiting adverse side effects[#]
- ANAVEX®2-73 is an orally available small molecule that serves as an intracellular chaperone and functional modulator of calcium homeostasis and synaptic plasticity through targeting protein-misfolding, oxidative stress, mitochondrial dysfunction, inflammation, cellular stress

ANAVEX[®]2-73 activates the Sigma-1 receptor restoring cellular homeostasis



Two-trans-membrane SIGMAR1 is an ER protein that resides in the mitochondrial assoc. ER membrane (MAM)

Tanslocates to the cytosol/plasma membrane and interacts with numerous receptors, ion channels and proteins as determined via experimental means

Evidence that activation of SIGMAR1 impacts relevant pathophysiological pathways

- Sigma-1 receptor ligands have been shown to modulate multiple aspects of neurodegenerative processes, affecting both neurons and glia
- i.e. resulting in reduction of beta amyloid, hyperphosphorylated tau, oxidative stress, neuroinflammation - leading to synaptic dysfunction and neuronal loss

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Critical review

Role of sigma-1 receptors in neurodegenerative diseases

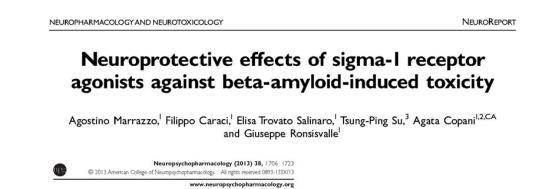
Linda Nguyen ^{a, b, c}, Brandon P. Lucke-Wold ^d, Shona A. Mookerjee ^e, John Z. Cavendish ^d, Matthew J. Robson ^f, Anna L. Scandinaro ^{a, b, c}, Rae R. Matsumoto ^{a, b, c, e, *}

^a Department of Basic Pharmaceutical Sciences, West Virginia University, School of Pharmacy, One Medical Center Drive, Morgantown, WV 26506, United States

^b Department of Behavioral Medicine and Psychiatry, West Virginia University, School of Medicine, One Medical Center Drive, Morgantown, WV 26506, United States

^c Department of Physiology and Pharmacology, West Virginia University, School of Medicine, One Medical Center Drive, Morgantown, WV 26506, United States

^d Graduate Program in Neuroscience, West Virginia University, School of Medicine, One Medical Center Drive, Morgantown, WV 26506, United States ^e Department of Biological and Pharmaceutical Sciences, Touro University California, College of Pharmacy, 1310 Club Drive, Vallejo, CA 94592, United States ^f Department of Pharmacology, Vanderbilt University School of Medicine, 465 21st Ave, Nashville, TN 37232, United States



Blockade of Tau Hyperphosphorylation and $A\beta_{1-42}$ Generation by the Aminotetrahydrofuran Derivative ANAVEX2-73, a Mixed Muscarinic and σ_1 Receptor Agonist, in a Nontransgenic Mouse Model of Alzheimer's Disease

Valentine Lahmy^{1,2,3,4}, Johann Meunier⁴, Susanna Malmström⁴, Gaelle Naert^{1,2,3}, Laurent Givalois^{1,2,3}, Seung Hyun Kim⁵, Vanessa Villard⁴, Alexandre Vamvakides⁶ and Tangui Maurice^{6,1,2,3}

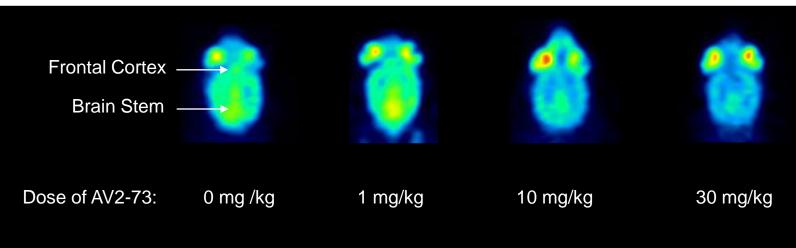
¹INSERM U710, Montpellier, France; ²University of Montpellier 2, Montpellier, France; ³Ecole Pratique des Hautes Etudes, Paris, France; ⁶Amylgen, Gapiers, France; ⁵Department of Neurology, Institute of Biomedical Science, College of Medicine, Hanyang University, Seongdong-gu, Seoul, Korea; ⁶Anavex Life Science, Pallini, Greece

ANAVEX®2-73 phase 2a Alzheimer study

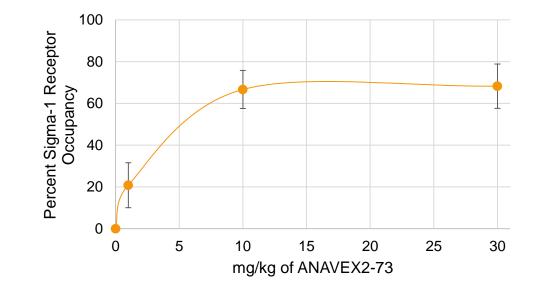
- 57-week proof-of-concept randomized open-label phase 2a study of ANAVEX[®]2-73 in 32 mild-moderate AD dementia patients (MMSE 16-28)[#]
- Results showed favorable safety profile
- Dose-dependent target engagement
- Favorable dose-response using cognitive and functional endpoints

Confirmation with quantitative PET Scan:

Dose-dependent ANAVEX[®]2-73 target engagement with the Sigma-1 receptor

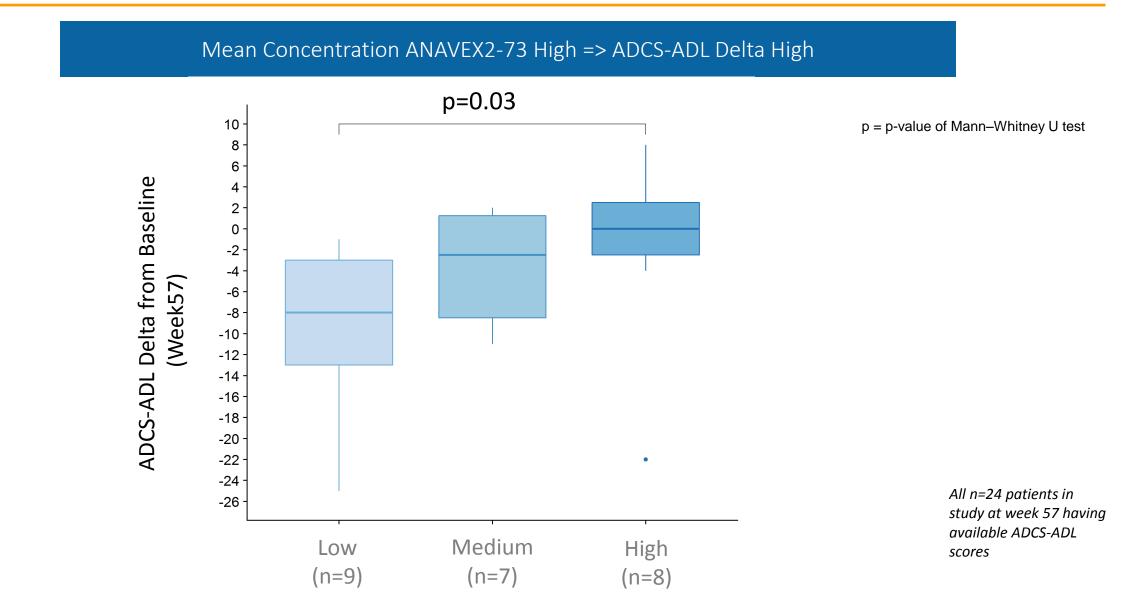






Sigma-1 receptor target occupancy study with quantitative PET analysis of ANAVEX®2-73 (*Presented at AAIC 2018 - P4-262*)

Significant relation between mean ANAVEX[®]2-73 concentration and response Alzheimer's Disease Cooperative Study Activities of Daily Living 23-item scale (ADCS-ADL)



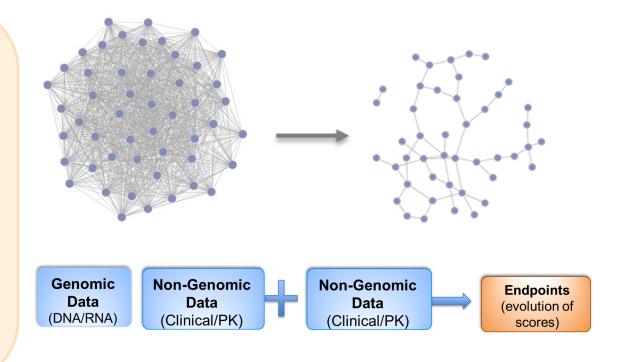
Mean Concentration AV2-73 (ng/mL), Part B

- +104/+104-week extension study in 21 patients[#]
- With full NGS exome (DNA) and transcriptome (RNA) sequencing

RNA/DNA sequences/study data analyzed using neuroinformatics platform KEM®

Systematic unbiased generation of all possible causal associations in a multiparametric dataset

- >20 million relations extracted and characterized from study data
- Identification & ranking of biomarkers relating to outcome derived from a small n of samples, avoiding overfitting



Advanced Machine Learning - Artificial Intelligence Platform Supporting Clinical Trial Design KEM[®] using Formal Concept Analysis (FCA)

Comprehensively analyzes complex datasets by measuring all logical relations within a dataset, exploring all combinations of parameters and endpoints Identifies most relevant and powerful causal relations, revealing hidden relationships Successfully utilized in oncology and other disease areas DNA variant analysis shows patient selection gene (variant) biomarkers related to SIGMAR1 gene

The presence of specific variants results in worse outcomes, and that of others in improved outcomes for MMSE¹ and ADCS-ADL²

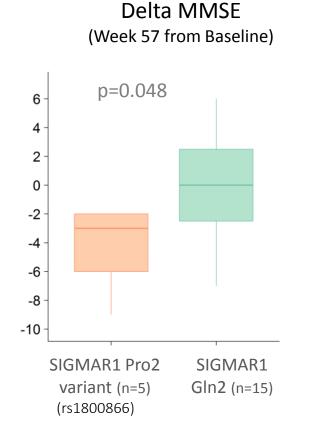
RNA expression analyses can confirm the information derived from DNA (gene) variants as patient selection biomarkers

RNA expression analyses show concordance with results for the SIGMAR1 variant markers

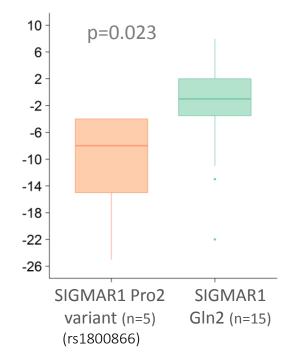
ANAVEX[®]2-73 Alzheimer Phase 2a extension study

- AD patients with wild-type SIGMAR1 gene were found to have improved benefit from ANAVEX[®]2-73
- AD patients with a variant of the SIGMAR1 gene (rs1800866), were found to have a limited benefit from ANAVEX[®]2-73
- Majority of AD population, about 80% has no variant SIGMAR1 gene, hence the majority of patients is expected to benefit from ANAVEX[®]2-73

SIGMAR1 Gene Variant associated with decreased response



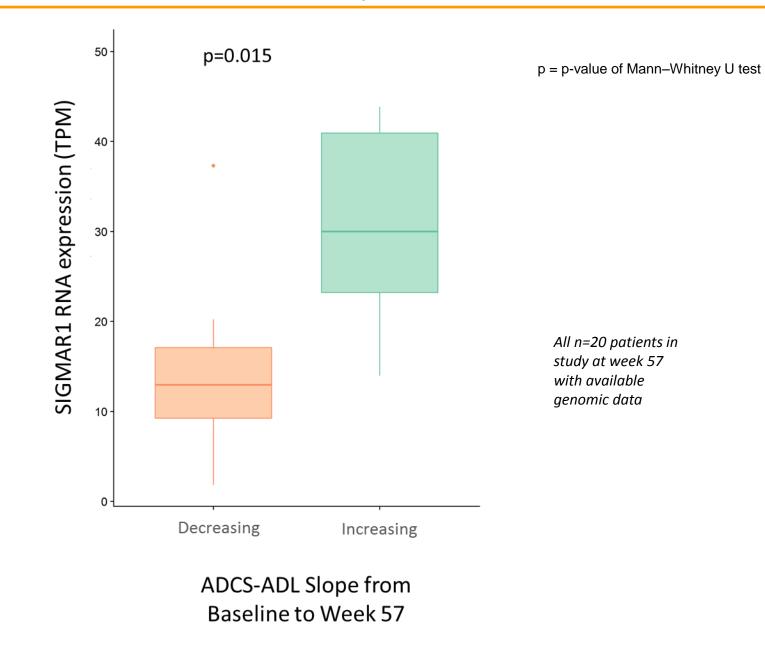




p = p-value of Mann–Whitney U test

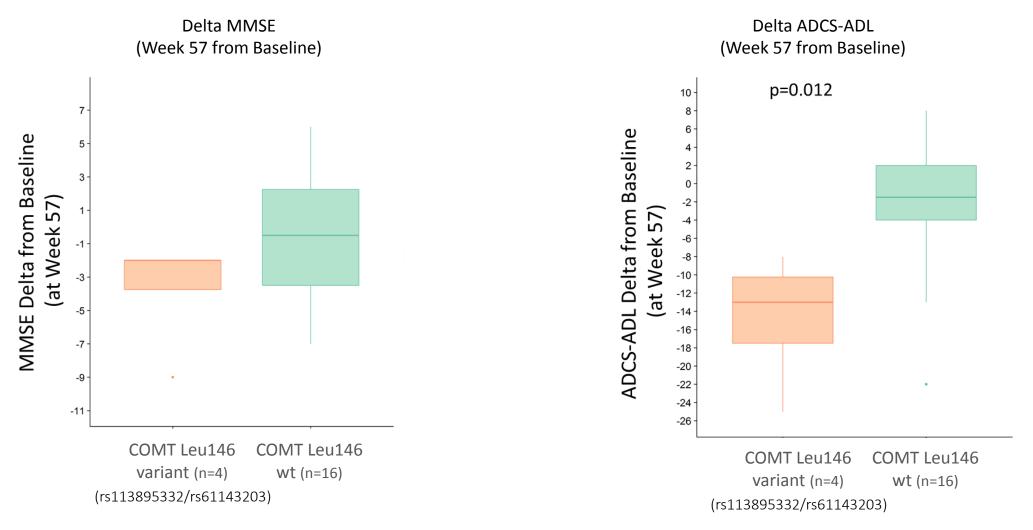
All n=20 patients in study at week 57 with available genomic data

Confirmation: Significant correlation of ADCS-ADL response and SIGMAR1 RNA expression levels



Other associated gene variant identifed: COMT Leu146 Truncation

Catechol-O-methyltransferase is one of several enzymes that degrade catecholamines



p = p-value of Mann–Whitney U test

All n=20 patients in study at week 57 with available genomic data

Gene markers improve effect size (Cohen's d) with ANAVEX®2-73

Improvement of scores in week 57 from baseline



Higher Cohen's d implies less patients are needed to show a significant difference between placebo arm and ANAVEX[®]2-73 arm in the Phase2b/3 study

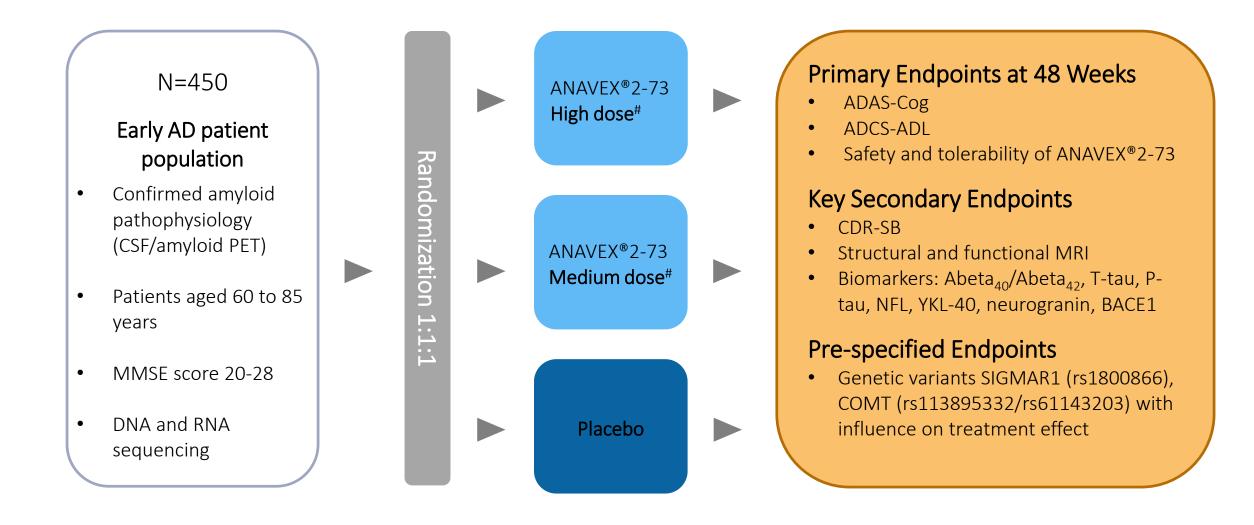
Summary ANAVEX®2-73 study

- Confirmed safety & dose-dependent target engagement with SIGMAR1 using PET
- Exome sequencing showed response-linked gene variants using formal concept analyses (FCA)
- Identified SIGMAR1/COMT variants shown to be linked to limited clinical response
- Targeted therapy benefit on WT variants is expected for about 80% of patient population
- Confirmation through high SIGMAR1 RNA expression levels linked to clinical response
- **Results consistent** across cognition (MMSE) and activities of daily living (ADCS-ADL)
- Identified actionable genetic variants support enrichment with genetic biomarkers in the clinical development of ANAVEX[®]2-73

Targeted therapy studies approved to initiate:

- ✓ Alzheimer's Disease Phase 2b/3
- ✓ Parkinson's Disease Dementia Phase 2

ANAVEX[®]2-73 phase 2b/3 early Alzheimer's Disease study design



Acknowledgments

Developing biomarker-guided targeted therapies for neurodegenerative diseases

Thanks to:

- Principal Investigators & clinical sites' study staff
- Data safety review committee
- Anavex SAB
- Most of all, grateful acknowledgement of the contribution of the participating AD patients and their caregivers

