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7-11 September | Vienna, Austria

Bexotegrast reduces type 1 collagen deposition in participants with idiopathic pulmonary fibrosis (IPF) after 12 weeks of therapy

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Conflict of Interest Disclosure

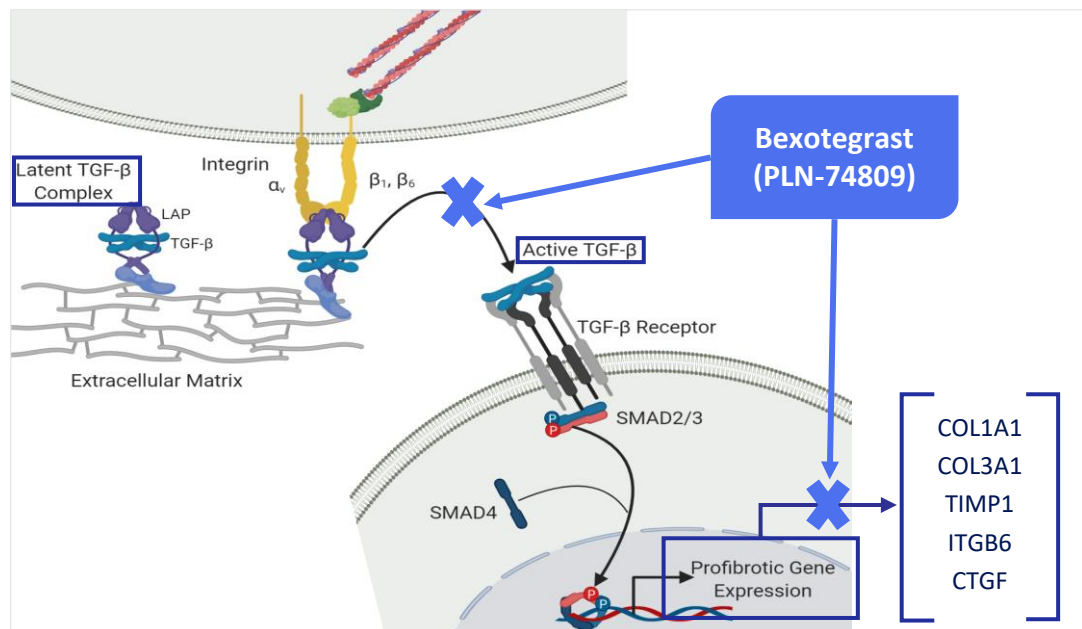
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| Grants/research support: | Boehringer Ingelheim, Merck, National Scleroderma Foundation, NIH/NHLBI, Pliant Therapeutics, Inc, Three Lakes Foundation, United Therapeutics |
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| Participation in a company sponsored bureau: | APIE Therapeutics, Pliant Therapeutics, Inc |
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| Other support / potential conflict of interest: | Served in leadership role for Massachusetts Pulmonary Society, served as speaker for Cowen, received royalties from UpToDate, and received travel support from DevPro. This study was sponsored by Pliant Therapeutics, Inc. Support for third-party writing assistance for this presentation, furnished by Samantha O’Dwyer, PhD, of Nucleus Global, was provided by Pliant Therapeutics, Inc. This presentation was developed in accordance with Good Publication Practice (GPP 2022) guidelines. Authors had full control of the content and made the final decision on all aspects of this publication. Bexotegrast is an investigational drug in which safety and efficacy are still being evaluated and is not approved by any health authority. |

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$\alpha_v\beta_6$ and $\alpha_v\beta_1$ Integrins Promote Fibrosis Through Activation of TGF- β^1



- IPF is primarily a basilar, subpleural disease characterized by excessive deposition of type 1 collagen²
- In patients with IPF, $\alpha_v\beta_6$ and $\alpha_v\beta_1$ integrins are overexpressed in the lungs, which activates TGF- β and drives collagen synthesis¹
- Bexotegrast is an oral, once-daily, selective, dual inhibitor of $\alpha_v\beta_6$ and $\alpha_v\beta_1$ integrins that is under development for IPF
- ⁶⁸Ga-CBP8, a PET probe, measures type 1 collagen and showed increased uptake in the lungs of patients with IPF³

We report results from the first interventional Phase 2, single-centre, randomised, double-blind, placebo-controlled study (NCT05621252) evaluating type 1 collagen deposition by PET and architectural changes by DCE-MRI in the lungs of participants with IPF following 12 weeks of treatment with bexotegrast

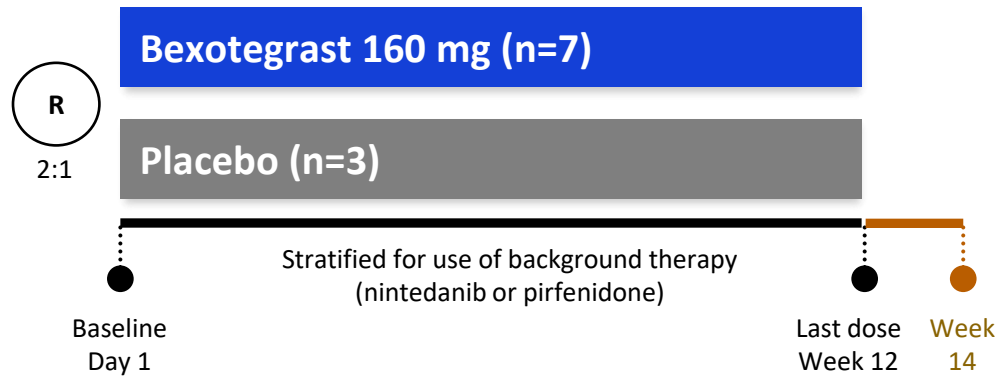
COL1A1, collagen type I alpha 1; COL3A1, collagen type III alpha 1; CTGF, connective tissue growth factor; DCE-MRI, dynamic contrast-enhanced magnetic resonance imaging; IPF, idiopathic pulmonary fibrosis; ITGB6, integrin beta-6; LAP, latency-associated peptide; PET, positron emission tomography; SMAD, family of proteins similar to the gene products of the *Drosophila* gene "mothers against decapentaplegic homolog 1" (MAD) and the *C. elegans* gene SMA; TGF- β , transforming growth factor-beta; TIMP1, tissue inhibitor matrix metalloproteinase 1.

1. Decaris ML, et al. *Respir Res.* 2021;22(1):265; 2. Désogère P, et al. *Sci Trans Med.* 2017;9(384):eaaf4696; 3. Montesi S, et al. *Am J Respir Crit Care Med.* 2019;200(2):258-261.

Study Design and Participant Demographics

Inclusion Criteria

- IPF diagnosis ≤ 8 years
- FVC_{pp} $\geq 45\%$
- DL_{CO} $\geq 30\%$
- eGFR ≥ 50 mL/min



Primary Endpoint

Quantification of type 1 collagen in the lung as assessed by changes from baseline in ⁶⁸Ga-CBP8 PET SUV using top quartile summary metric

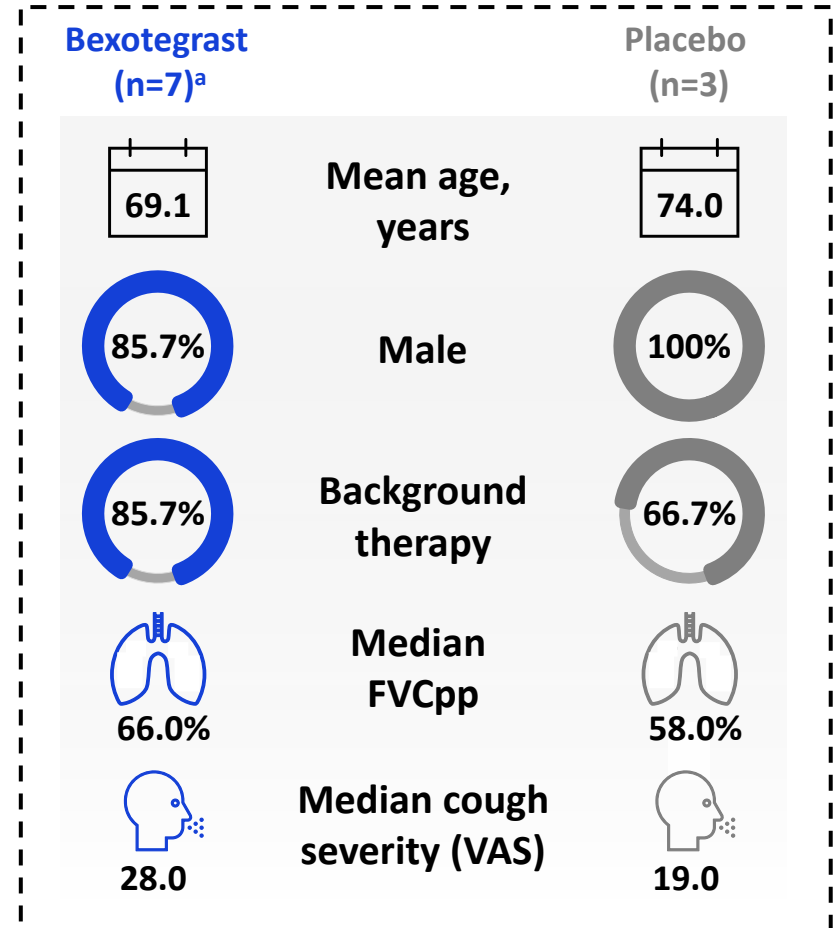
Secondary Endpoint

Safety and tolerability of bexotegrast

Key Exploratory Endpoints

Change from baseline in DCE-MRI contrast peak enhancement and washout rates, absolute and FVC_{pp}, cough severity, and biomarkers

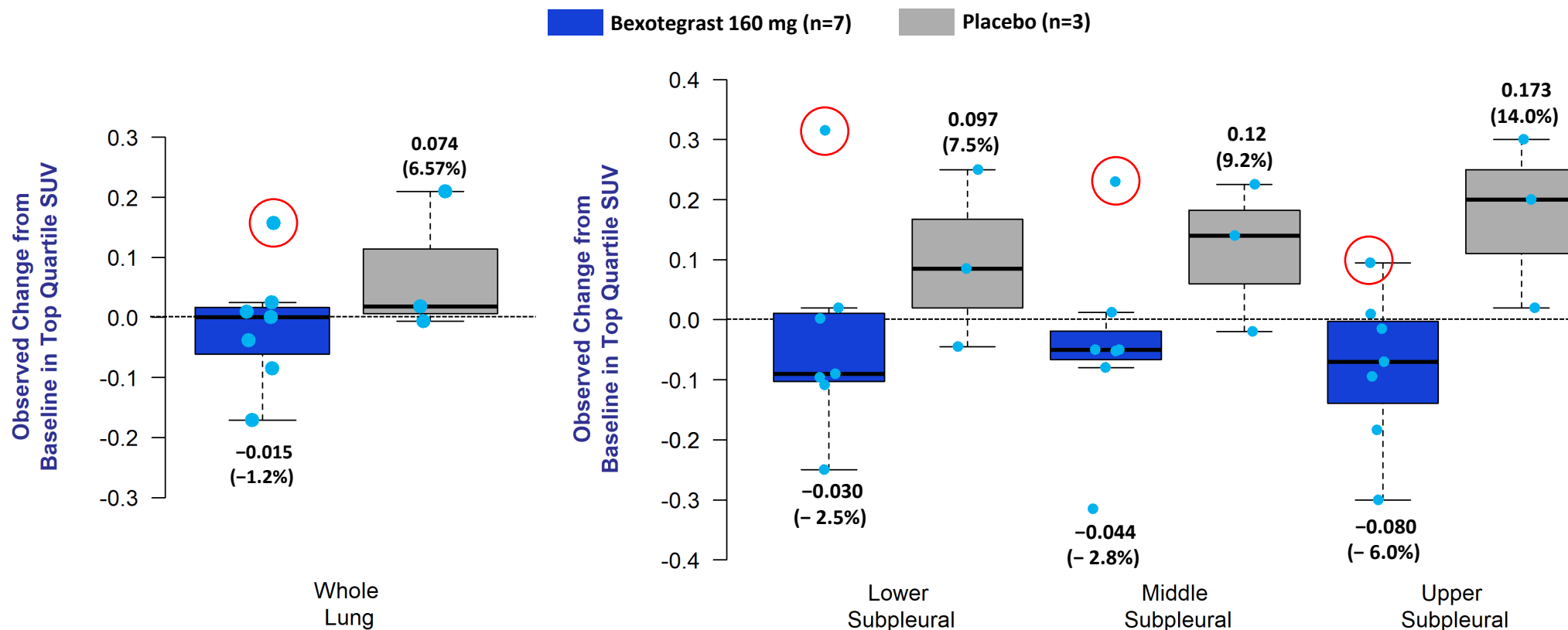
Baseline Demographics



DCE-MRI, dynamic contrast-enhanced magnetic resonance imaging; DL_{CO}, diffusing capacity for carbon monoxide; eGFR, estimated glomerular filtration rate; FVC_{pp}, forced vital capacity percent predicted; IPF, idiopathic pulmonary fibrosis; MRI, magnetic resonance imaging; PET, positron emission tomography; R, randomisation; SUV, standardized uptake value; VAS, visual analog scale.

^a One participant in the bexotegrast group was nonadherent to the study drug (65%) and contracted COVID-19 during the first month on study.

Bexotegrast Reduced Type I Collagen in the Lung Using PET Imaging After 12 Weeks

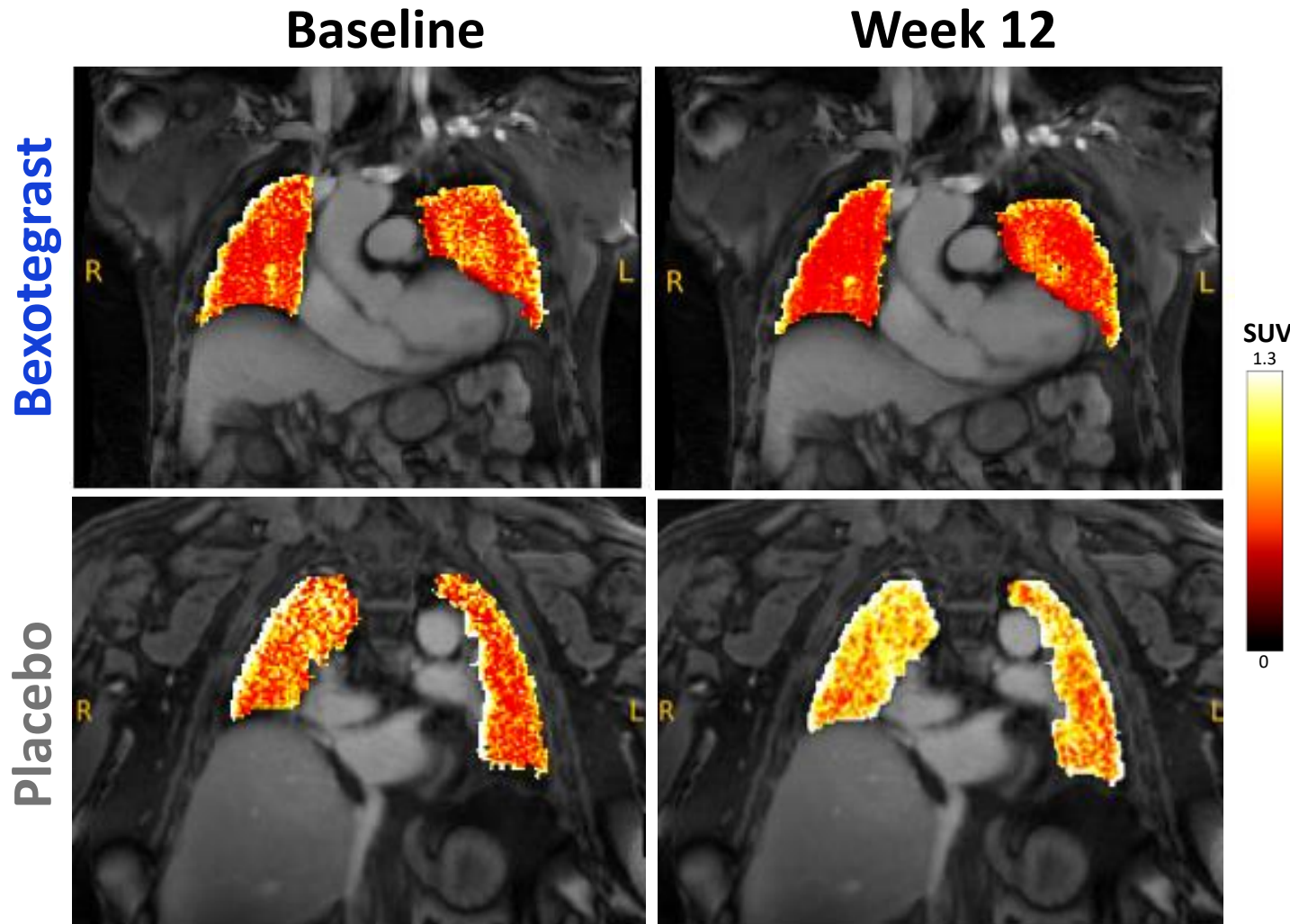


Bexotegrast 160 mg reduced the ⁶⁸Ga-CBP8 PET SUVs from baseline, indicating a reduction in total lung collagen

The SUV changes with bexotegrast at Week 12 were largest in the subpleural lung regions

Individual, mean, and percentage change in top quartile SUV shown. The length of the box represents the interquartile range, and the vertical lines represent the maximum, median, and minimum. Change in central region was of smaller magnitude than changes in subpleural regions. The nonadherent/COVID-19 participant in the bexotegrast group is indicated by red circles. PET, positron emission tomography; SUV, standardized uptake value.

Bexotegrast Reduced Type 1 Collagen in the Lung After 12 Weeks



Participant A: bexotegrast 160 mg

- Decrease from baseline to Week 12 in top quartile ^{68}Ga -CBP8 SUV of **-0.17**
- Change in top quartile SUV of **-15.5%**

Participant B: placebo

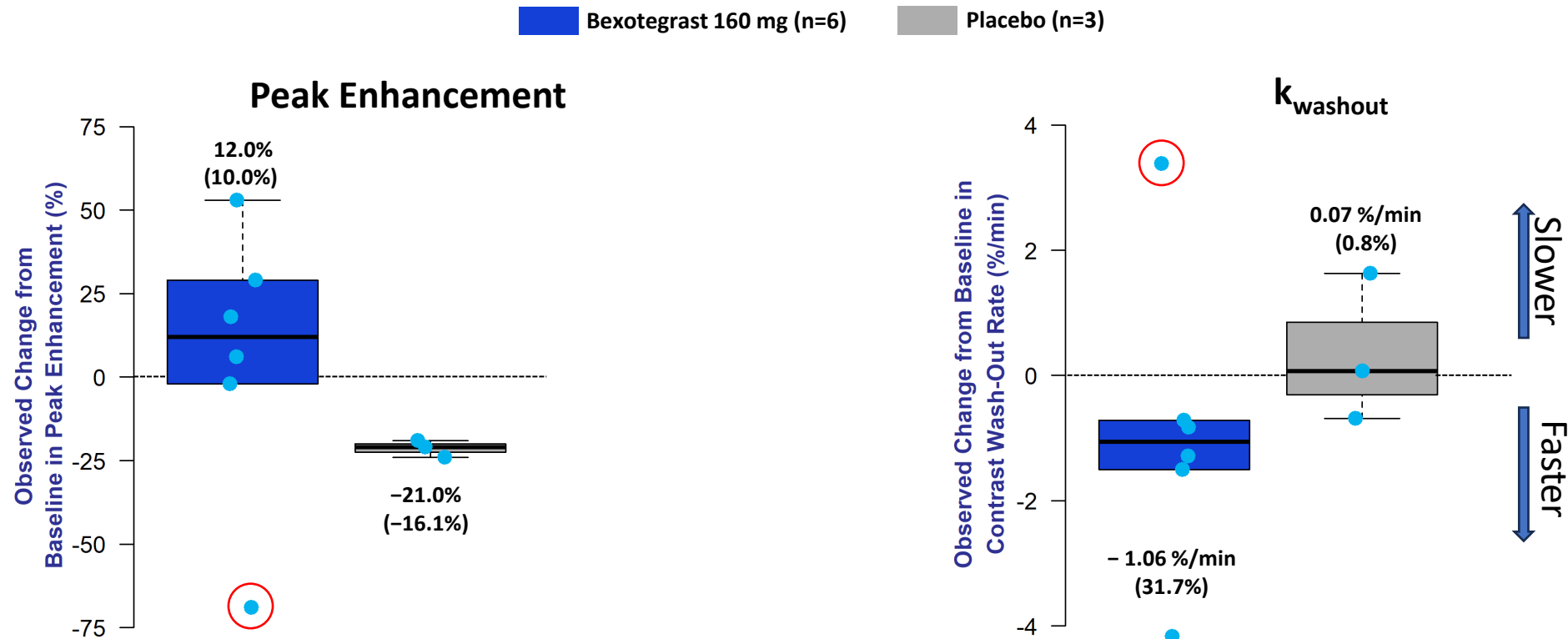
- Increase from baseline to Week 12 in top quartile ^{68}Ga -CBP8 SUV of **+0.21**
- Change in top quartile SUV of **+18.4%**

Dynamic Changes in Extracellular Volume Based on DCE-MRI Parameters Observed With Bexotegrast



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➤ Reduced peak enhancement has been associated with increased vascular permeability and/or decreased perfusion^{4,5}

➤ Slower $k_{washout}$ rates may be due to expanded extracellular volume as a result of replacement of cellular components with collagen^{3,6}

Contrast agent was gadoterate meglumine. Individual, median, and percentage change shown. The length of the box represents the interquartile range, and the vertical lines represent the maximum, median, and minimum.

The nonadherent/COVID-19 participant in the bexotegrast group is noted using red circles.

DCE-MRI, dynamic contrast-enhanced magnetic resonance imaging; $K_{washout}$, washout rate of contrast from the lung.

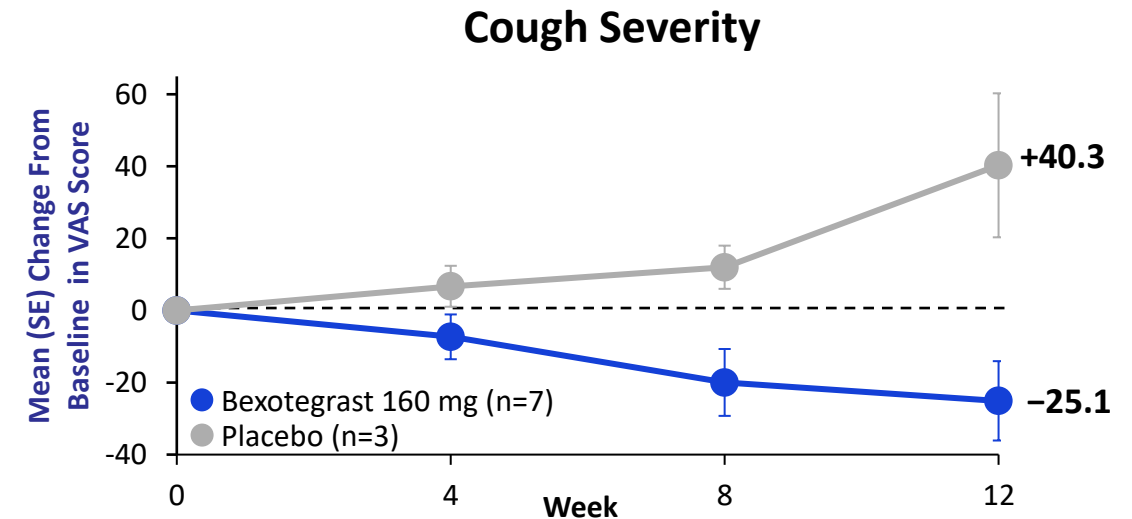
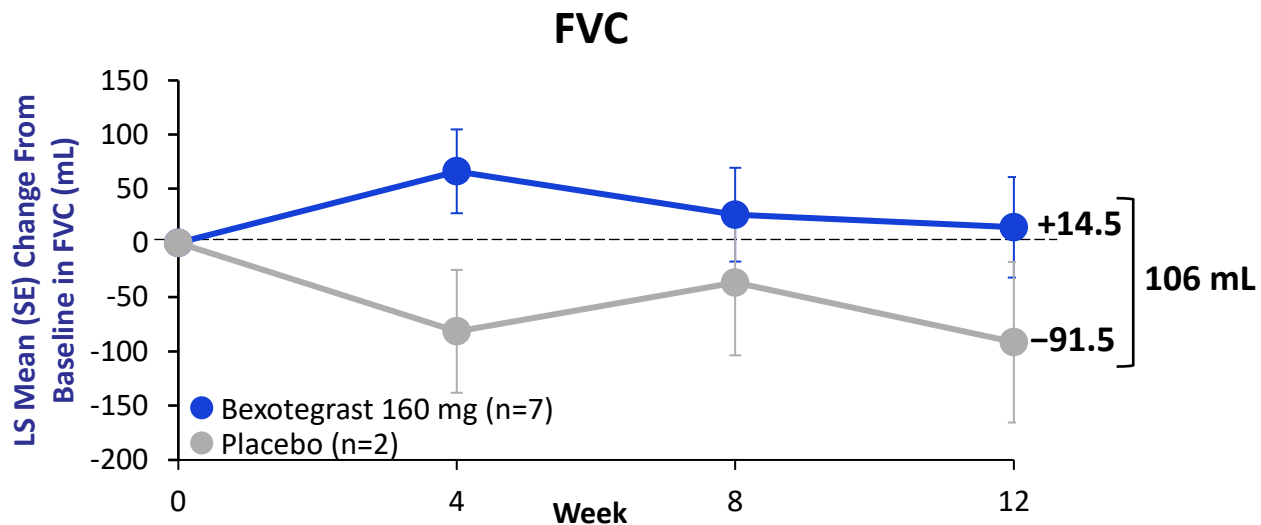
3. Montesi S, et al. *Am J Respir Crit Care Med*. 2019;200(2):258-261; 4. Zhang W-J, et al. *Radiology*. 2016;278(3):906-916; 5. Amundsen T, et al. *J Magn Reson Imaging*. 2000;12(2):224-231; 6. Kehr E, et al. *Int J Cardiovasc Imaging*. 2008;24(1):61-68.

Changes in ^{68}Ga -CBP8 SUV Correlated With Changes in Lung Function and Improved Cough Severity



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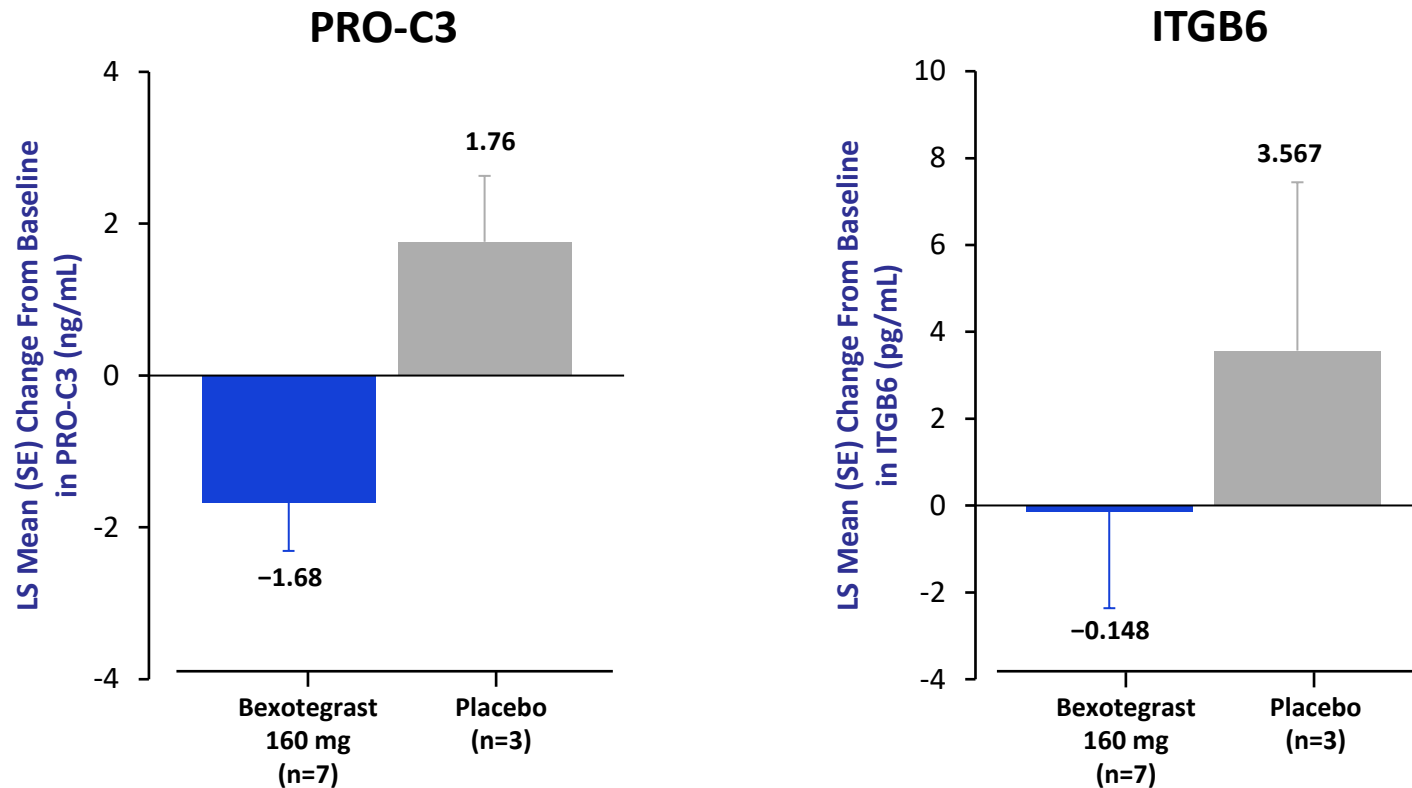
Treatment with bexotegrast numerically improved FVC over 12 weeks, with the bexotegrast group maintaining a clear separation from placebo at all time points

Correlation between change in ^{68}Ga -CBP8 PET SUV and change in FVC ($\rho=-0.57$)

Participants in the bexotegrast group reported decreased cough severity across all on-treatment time points compared with placebo

Change in cough severity is predicted by change in FVC ($R^2=0.77$)

Bexotegrast Reduced Prognostic IPF Biomarkers



Circulating biomarker analysis showed decreases in biomarkers of collagen synthesis (PRO-C3) and interstitial lung disease progression (ITGB6)⁷ in the bexotegrast vs placebo groups after 12 weeks of treatment

Bexotegrast Was Well Tolerated Over 12 Weeks

| TEAE, n (%) | Bexotegrast (n=7) | Placebo (n=3) |
|--|-----------------------|---------------|
| TEAE | 6 (85.7) | 1 (33.3) |
| TEAE related to study drug | 5 (71.4) | 1 (33.3) |
| Serious TEAE | 0 | 0 |
| TEAE leading to interruption of study drug | 1 (14.3) ^a | 0 |
| TEAE leading to withdrawal from study | 0 | 0 |
| TEAE leading to early termination from study | 0 | 0 |
| TEAE leading to death | 0 | 0 |
| Most frequent TEAEs (n>1) | | |
| Cough | 4 (57.1) ^b | 0 |
| Diarrhea | 3 (42.9) ^c | 1 (33.3) |



Overall, bexotegrast demonstrated a favourable safety and tolerability profile over 12 weeks

TEAE, treatment-emergent adverse event.

^a Participant with COVID-19.

^b All cough events occurred post Week 12 (end of treatment) during the 14-day follow-up period.

^c All events of diarrhea were considered mild. The 3 participants were taking nintedanib, which was listed as an alternative cause.

Changes in type 1 collagen PET imaging with ^{68}Ga -CBP8 and DCE-MRI support antifibrotic effects of bexotegrast, suggesting favourable lung remodelling

Treatment with bexotegrast numerically improved FVC, cough severity, and prognostic biomarkers, suggesting its potential for disease modification in IPF

Changes in lung uptake of the PET probe ^{68}Ga -CBP8 directionally correlated with changes in pulmonary function

Limitations include the small sample size and short duration of treatment

Late-stage evaluation of bexotegrast will further explore the efficacy and safety in participants with IPF (BEACON-IPF; NCT06097260)



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Reference List

- 1 Decaris ML, et al. *Respir Res*. 2021;22(1):265.
- 2 Désogere P, et al. *Sci Trans Med*. 2017;9(384):eaaf4696.
- 3 Montesi S, et al. *Am J Respir Crit Care Med*. 2019;200(2):258-261.
- 4 Zhang W-J, et al. *Radiology*. 2016;278(3):906-916.
- 5 Amundsen T, et al. *J Magn Reson Imaging*. 2000;12(2):224-231.
- 6 Kehr E, et al. *Int J Cardiovasc Imaging*. 2008;24(1):61-68.
- 7 Bowman et al. *Lancet Respir Med*. 2022;10(6): 593–602.