



A subgroup analysis of subjects diagnosed with anterior uveitis from the Phase 3 PEACHTREE clinical trial

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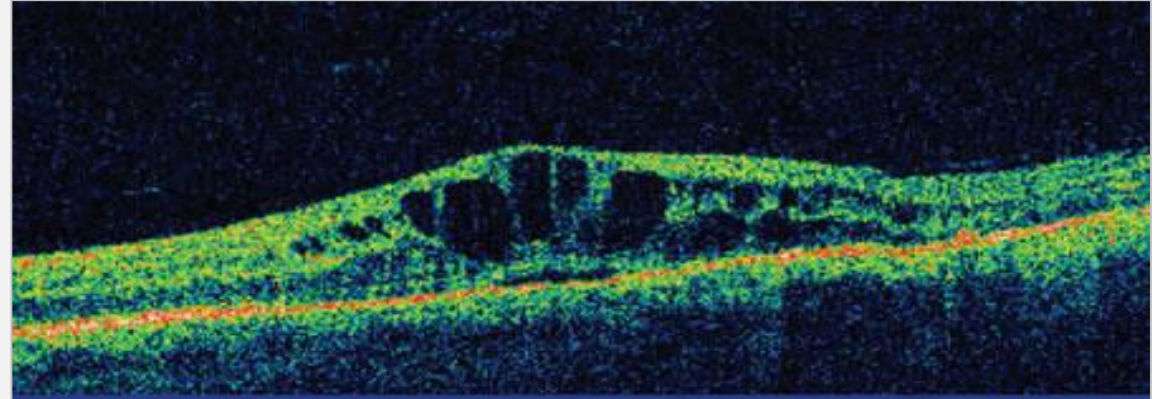
Financial Disclosures

- Abbvie (S)
- Santen (C)
- Clearside (C)



Macular Edema Due to Noninfectious Uveitis

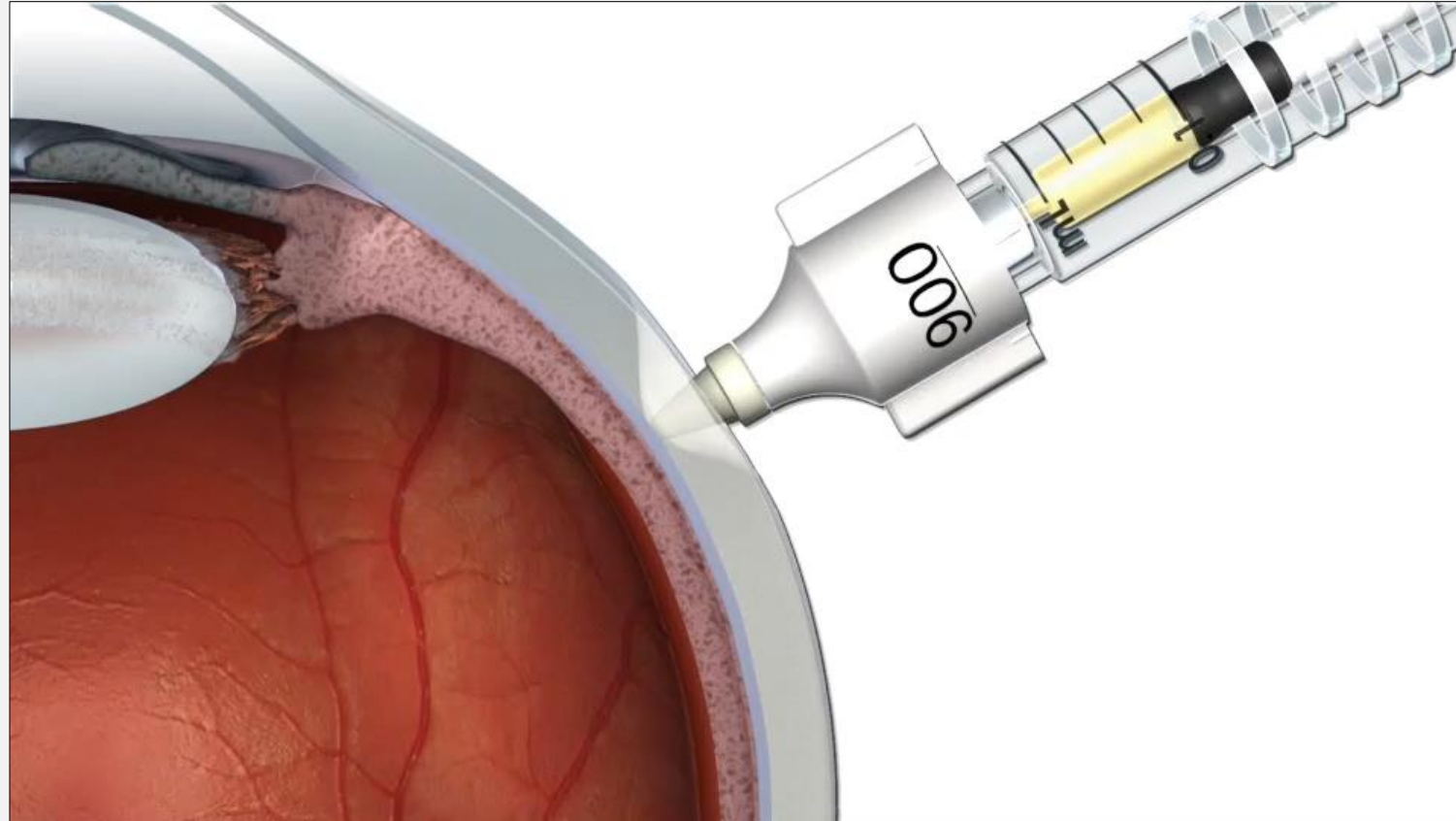
- Macular edema (ME) is the leading cause of vision impairment and vision loss in uveitis¹



- ME is common, occurring in 34-66% of intermediate, posterior, and panuveitis and 11% of anterior uveitis²
- May persist in spite of adequate control of uveitis itself³

1. Dick AD, Br J Ophthalmol. 1994;78:1-2; 2. Lardenoye CWTA et al, Ophthalmology. 2006;113:1446-1449;
3. Tomkins-Netzer et al, Ophthalmology. 2015;122:2351-2359.

Suprachoroidal Injection



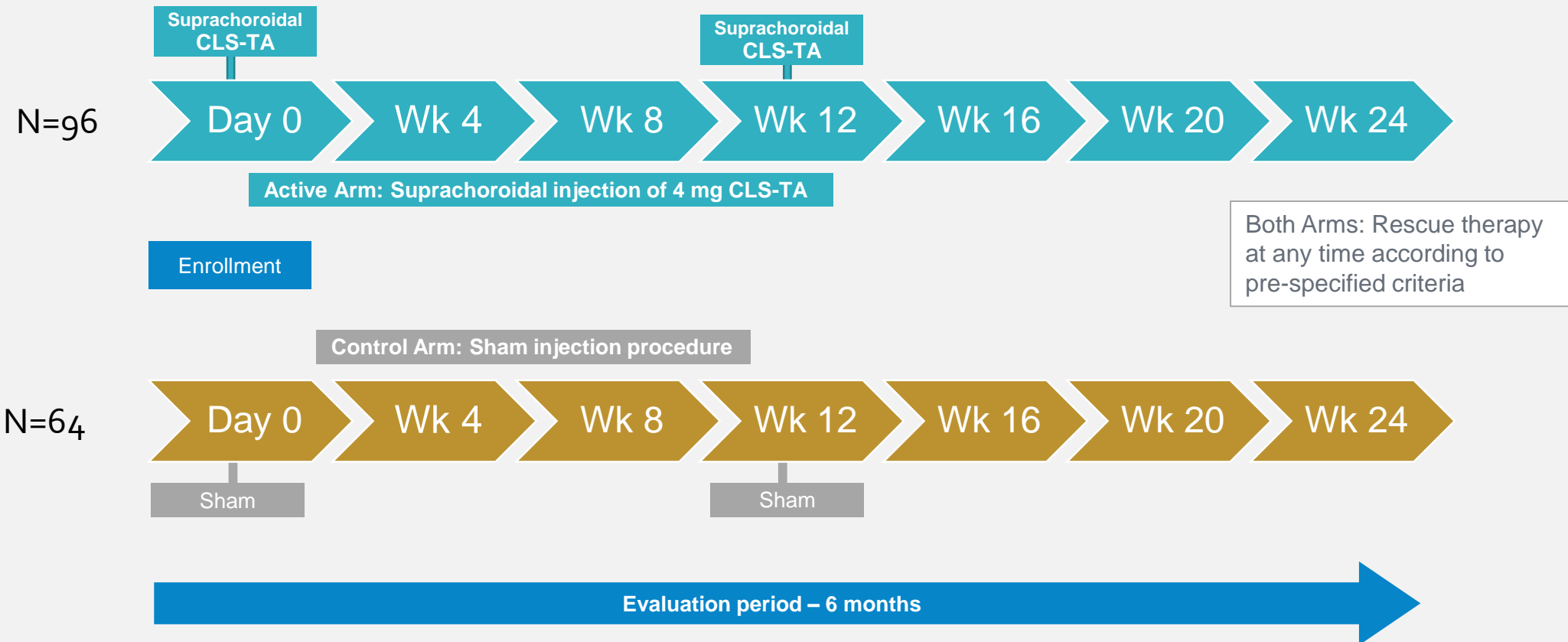
Animal model data for suprachoroidal vs. intravitreal injection of TA show:

- Higher amounts of drug in the choroid, RPE cells, and retina
- Lower exposure to the anterior segment

A potentially useful ocular distribution of drug for the treatment of uveitic macular edema

PEACHTREE: Phase 3, Randomized, Controlled, Double-Masked, Multicenter Trial

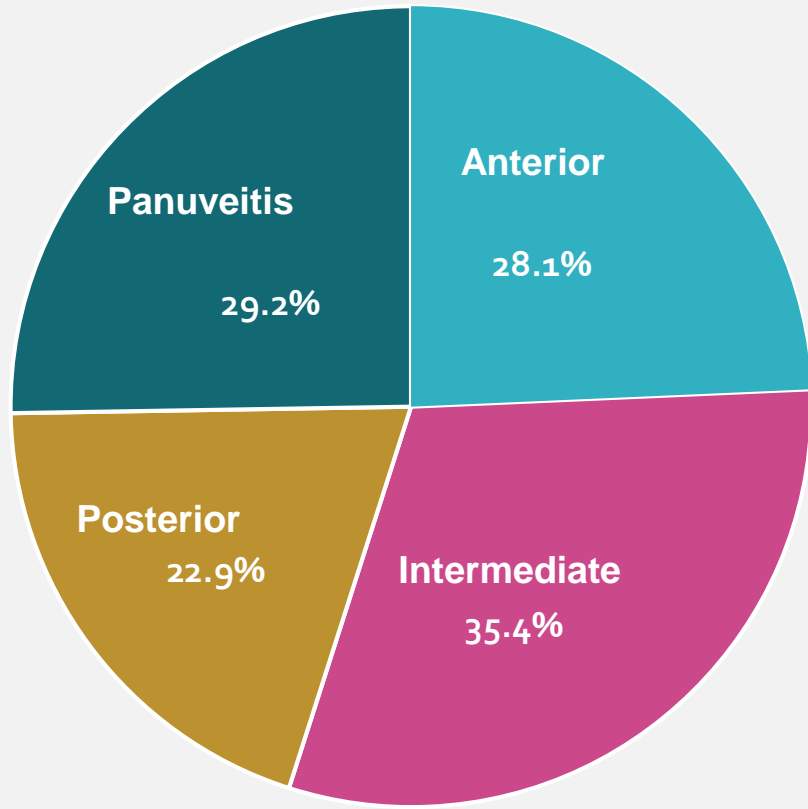
Primary Endpoint: Proportion of subjects with change from baseline ≥ 15 letters in BCVA at Week 24



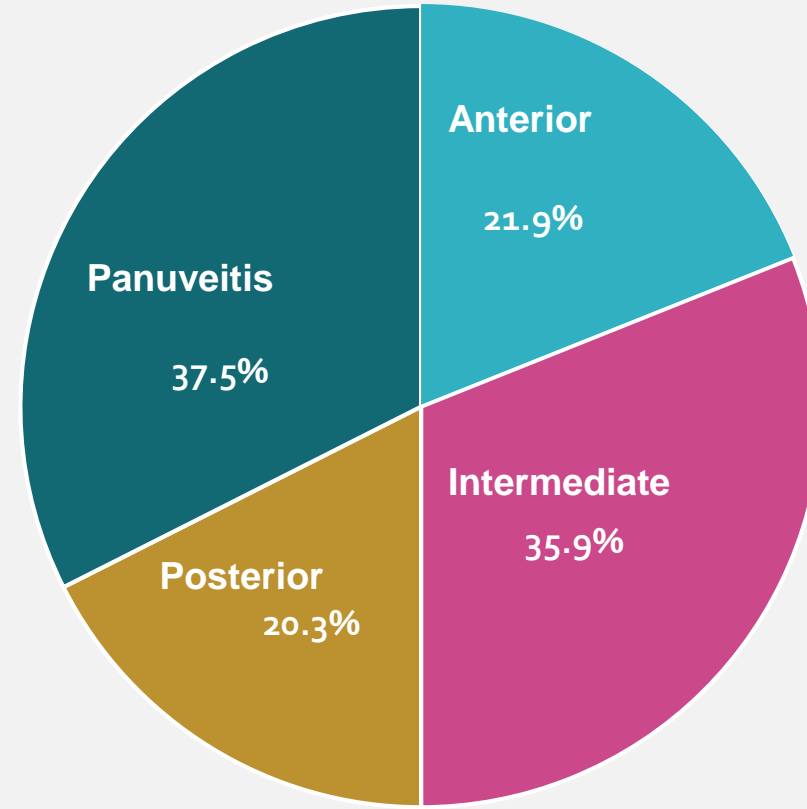
All Anatomic Subtypes Enrolled

Anterior Uveitis accounted for 28% of CLS-TA group (n=27) and 22% of the Control (n=14)

CLS-TA (N=96)



Control (N=64)



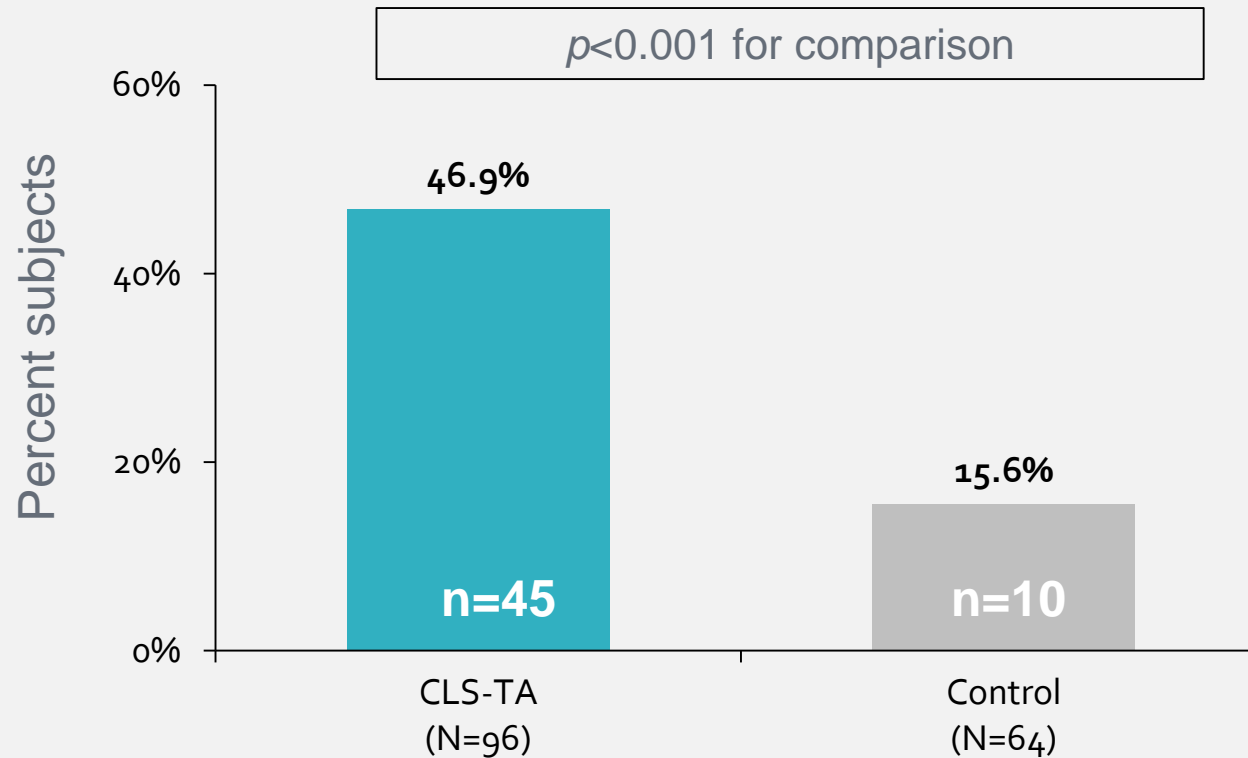
Baseline Subject Characteristics Similar Between Groups

Characteristic	CLS-TA All Uveitis N=96	Control All Uveitis N=64
Gender, n (%)		
Male	42 (43.8)	30 (46.9)
Female	54 (56.3)	34 (53.1)
Age (years), mean (SD)	50.4 (14.18)	50.0 (15.08)
BCVA, study eye (ETDRS letters)		
Mean (SD)	54.7 (13.92)	53.5 (12.91)
Median (min, max)	57 (9, 89)	54 (12, 79)
CST, study eye (µm)		
Mean (SD)	480.9 (153.24)	525.4 (158.14)
Median (min, max)	453.0 (256, 857)	518.5 (274, 971)



PEACHTREE: Met Primary Efficacy Endpoint

Primary Endpoint: Subjects gaining ≥ 15 BCVA letters from baseline, %



Intention-to-treat population; Last Observation Carried Forward imputation.

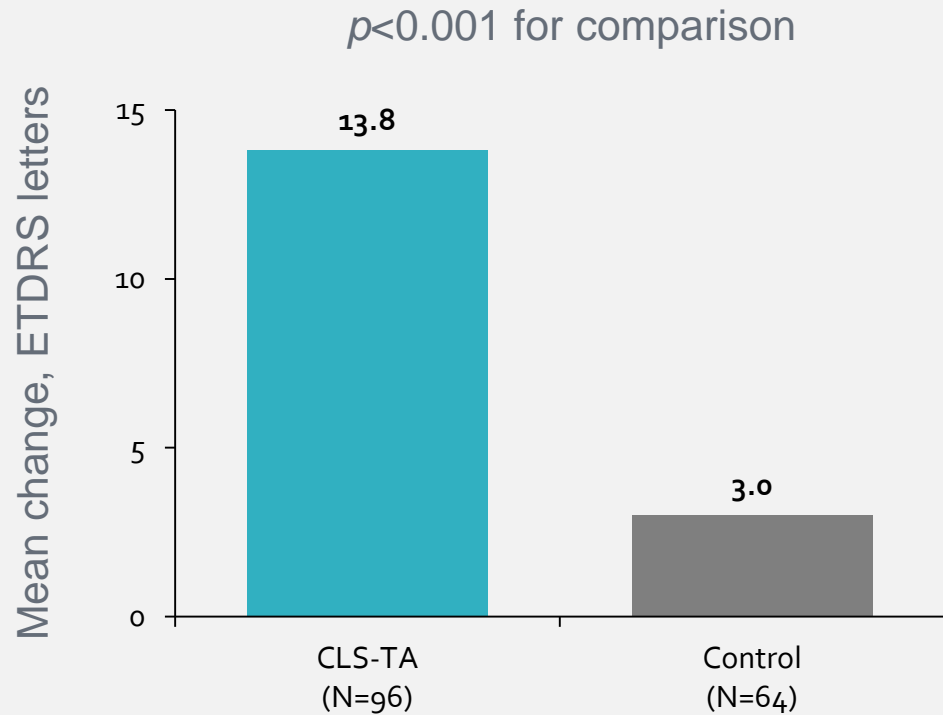
The p-value is based on a Cochran-Mantel-Haenszel test for general association between treatment and response with stratification by country.



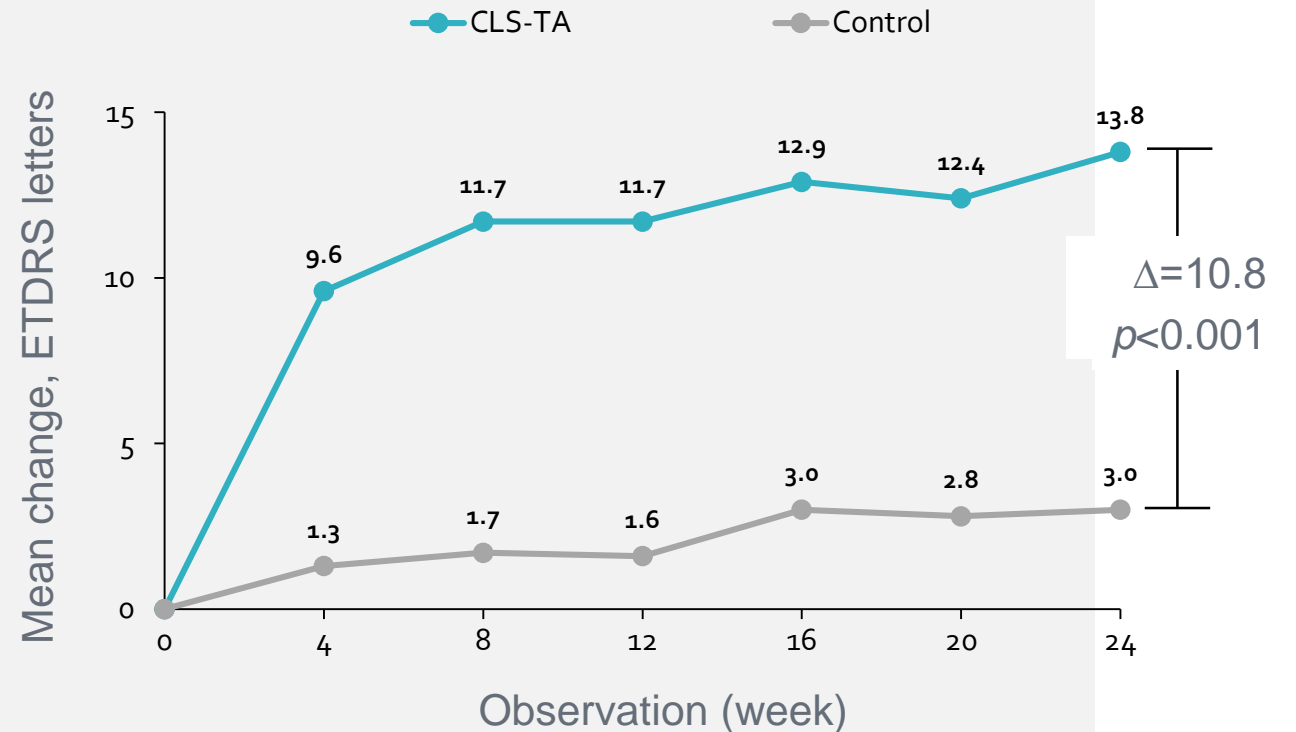
Mean Change in BCVA

Improvement Observed as Early as Week 4 Through Week 24 in the CLS-TA Arm

Mean change from baseline in BCVA at Week 24



Mean change from baseline in BCVA by visit

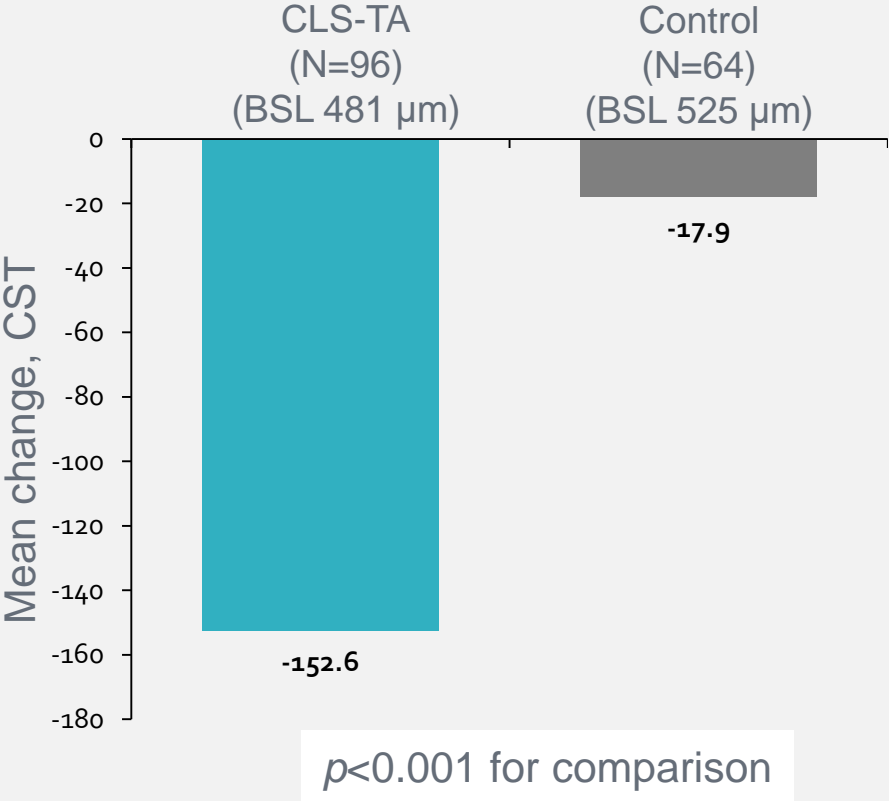


Intention-to-treat population; last observation carried forward imputation.
t-test. Differences between the CLS-TA and control arms were significant at each visit.
BCVA, best corrected visual acuity.

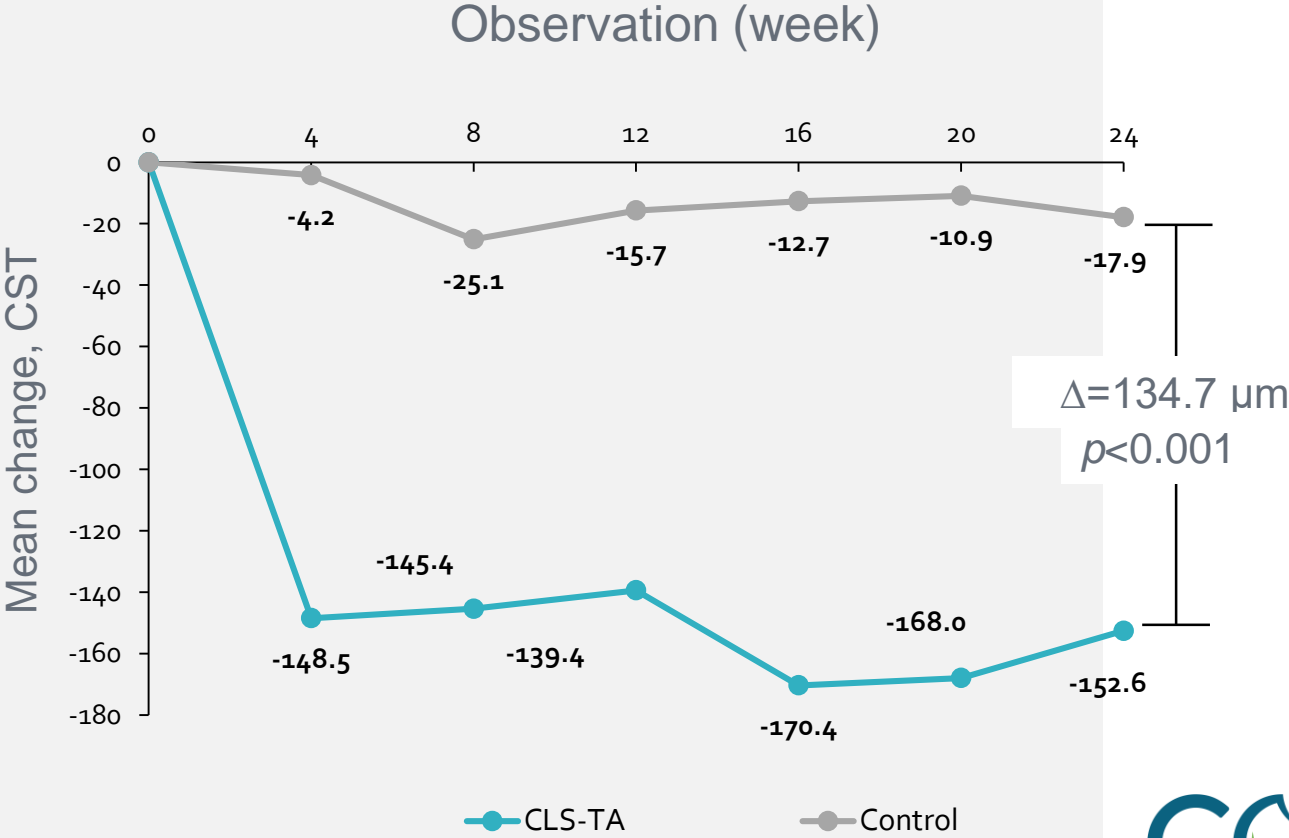
Mean Change in Central Subfield Thickness

Improvement Observed as Early as Week 4 through Week 24 in CLS-TA Arm

Mean change from baseline at week 24 in central subfield thickness (μm)



Mean change at each visit from baseline in central subfield thickness (μm)



Intention-to-treat population; last observation carried forward imputation. BSL, baseline mean value; CST, central subfield retinal thickness.



Sub Analysis: Patients with Anterior Uveitis

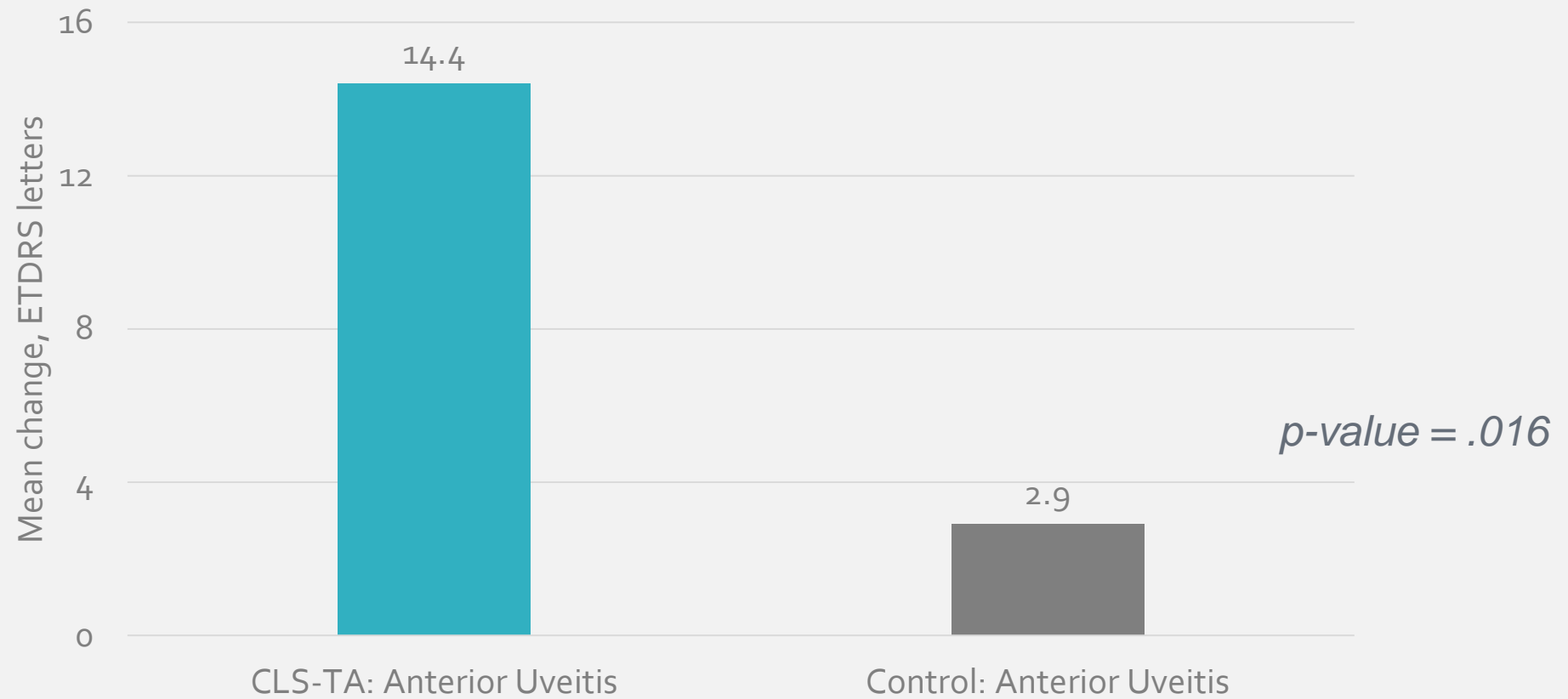


Baseline Subject Characteristics Similar Between Groups

Characteristic	CLS-TA		Control	
	All Uveitis N=96	Anterior Uveitis N=27	All Uveitis N=64	Anterior Uveitis N=14
Gender, n (%)				
Male	42 (43.8)	12 (44.4)	30 (46.9)	8 (57.1)
Female	54 (56.3)	15 (55.6)	34 (53.1)	6 (42.9)
Age (years), mean (SD)	50.4 (14.18)	52.5 (13.83)	50.0 (15.08)	50.0 (12.00)
BCVA, study eye (ETDRS letters)				
Mean (SD)	54.7 (13.92)	56.7 (12.02)	53.5 (12.91)	56.5 (10.57)
Median (min, max)	57 (9, 89)	(17, 70)	54 (12, 79)	(35, 74)
CST, study eye (µm)				
Mean (SD)	480.9 (153.24)	431.4 (142.67)	525.4 (158.14)	542.9 (157.10)
Median (min, max)	453.0 (256, 857)	(256, 845)	518.5 (274, 971)	(307, 767)

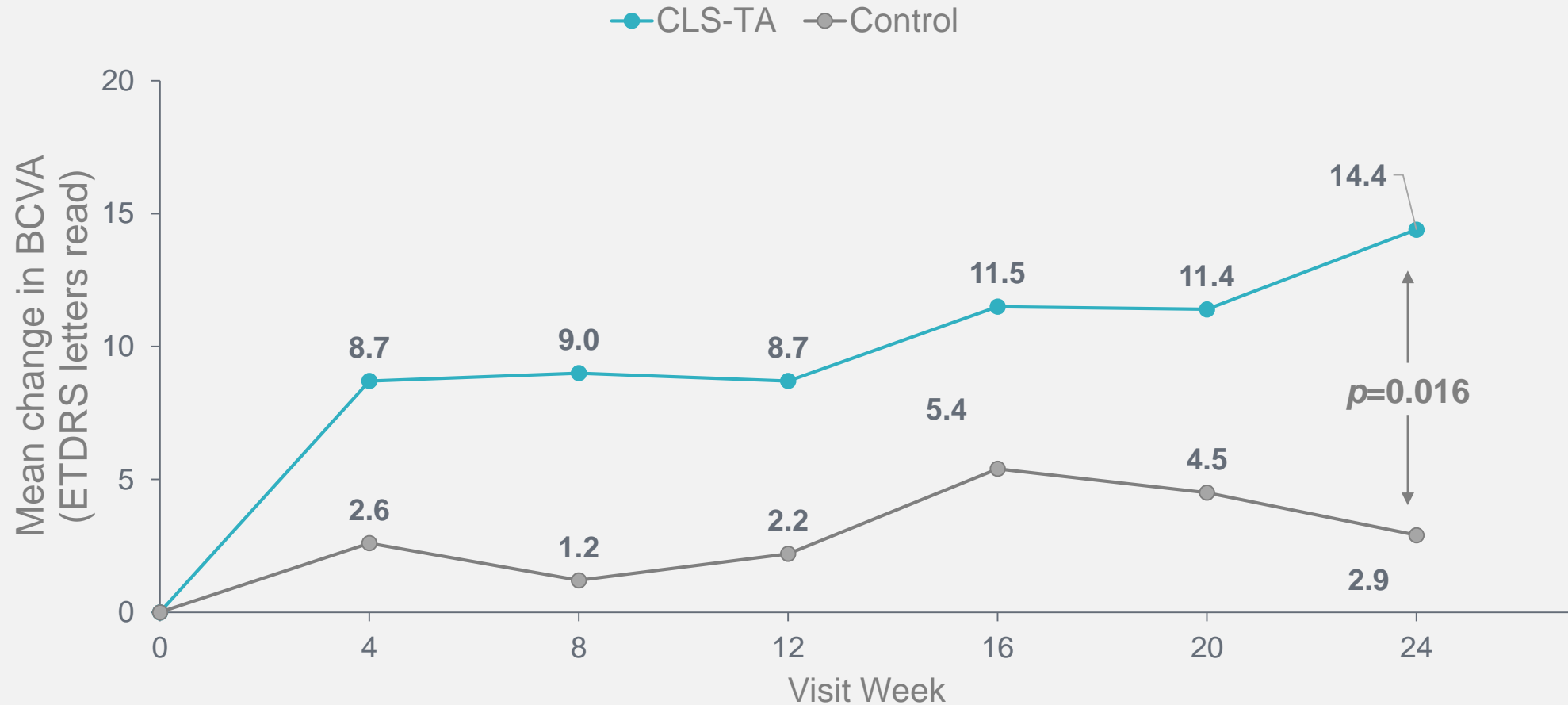


Anterior Uveitis: Mean Change in BVCA from Baseline at Week 24



Intention-to-treat population; last observation carried forward imputation.
BCVA, best corrected visual acuity.

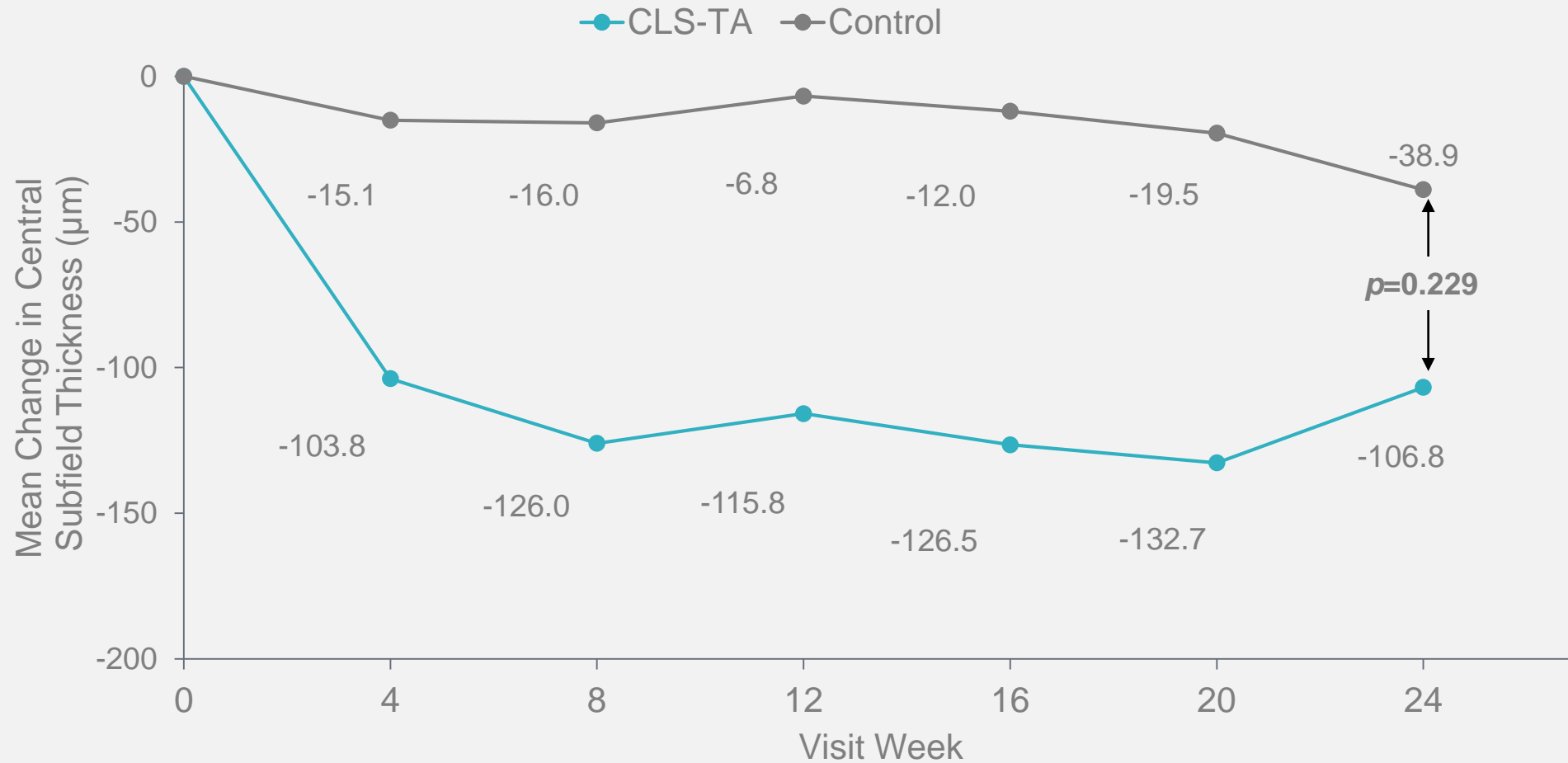
Anterior Uveitis: Mean Change From Baseline in BCVA by visit



Intention-to-treat population; last observation carried forward imputation.
BCVA, best corrected visual acuity.



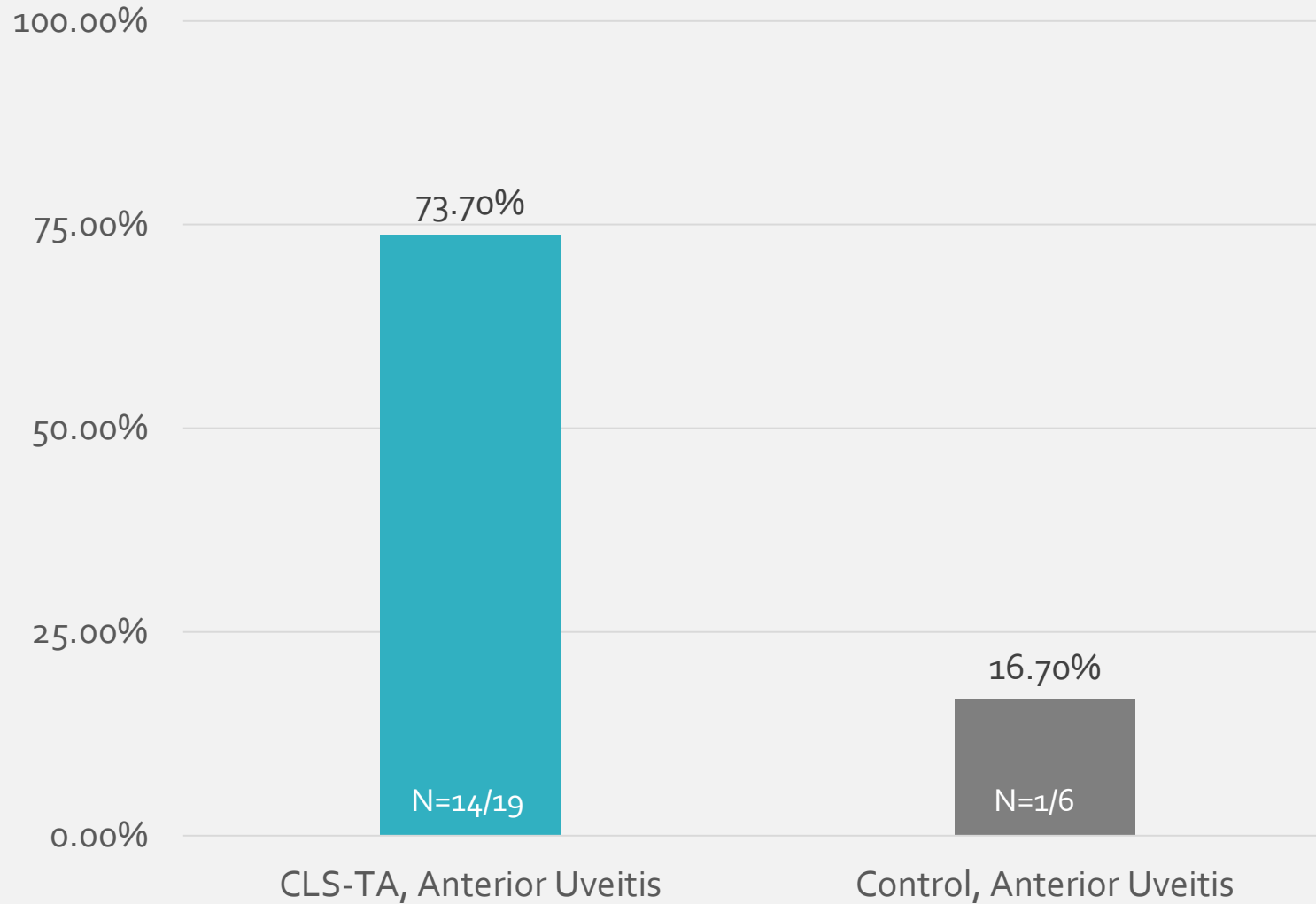
Anterior Uveitis: Mean Change From Baseline in CST by visit



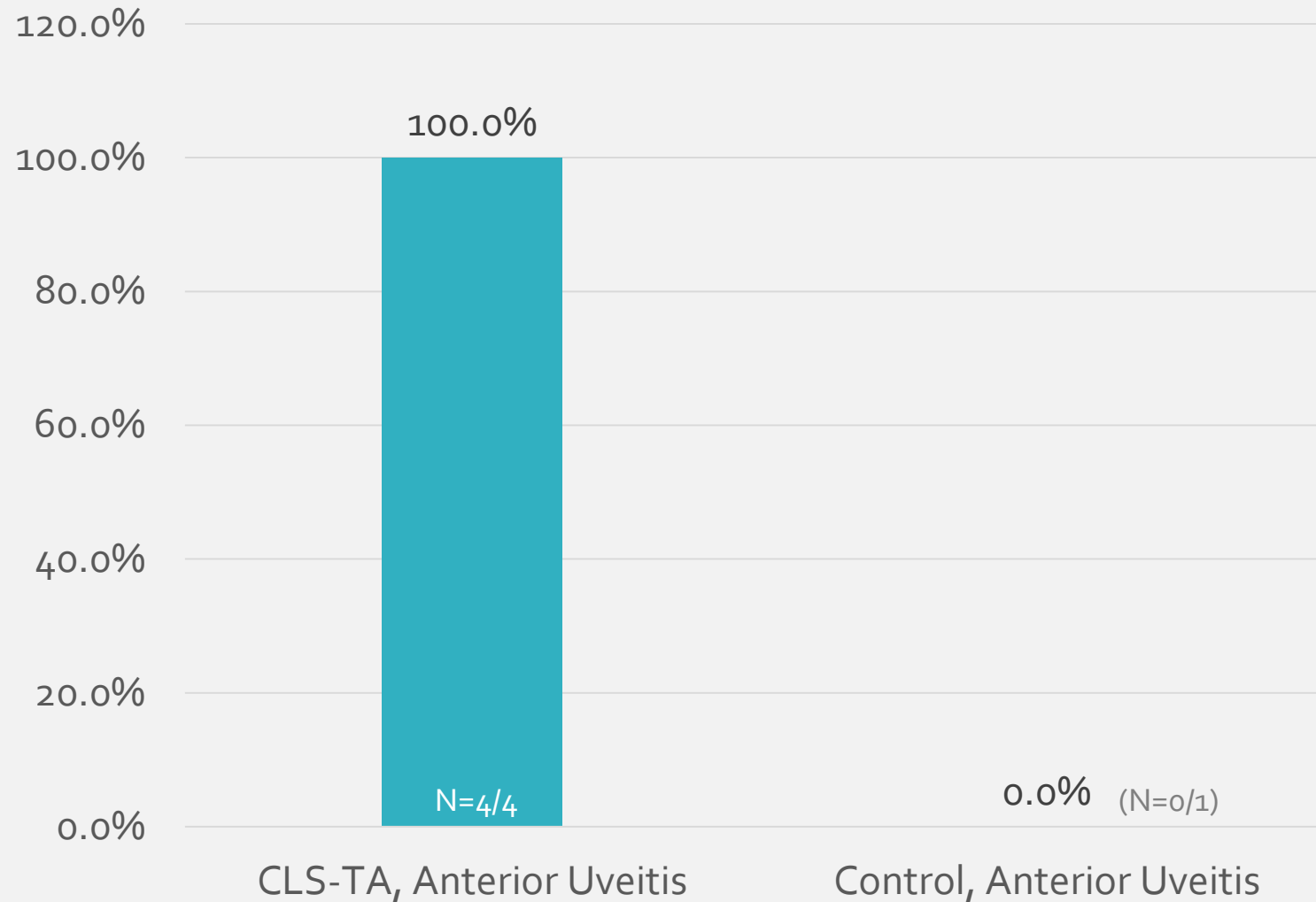
Intention-to-treat population; last observation carried forward imputation.
CST, Central Subfield thickness



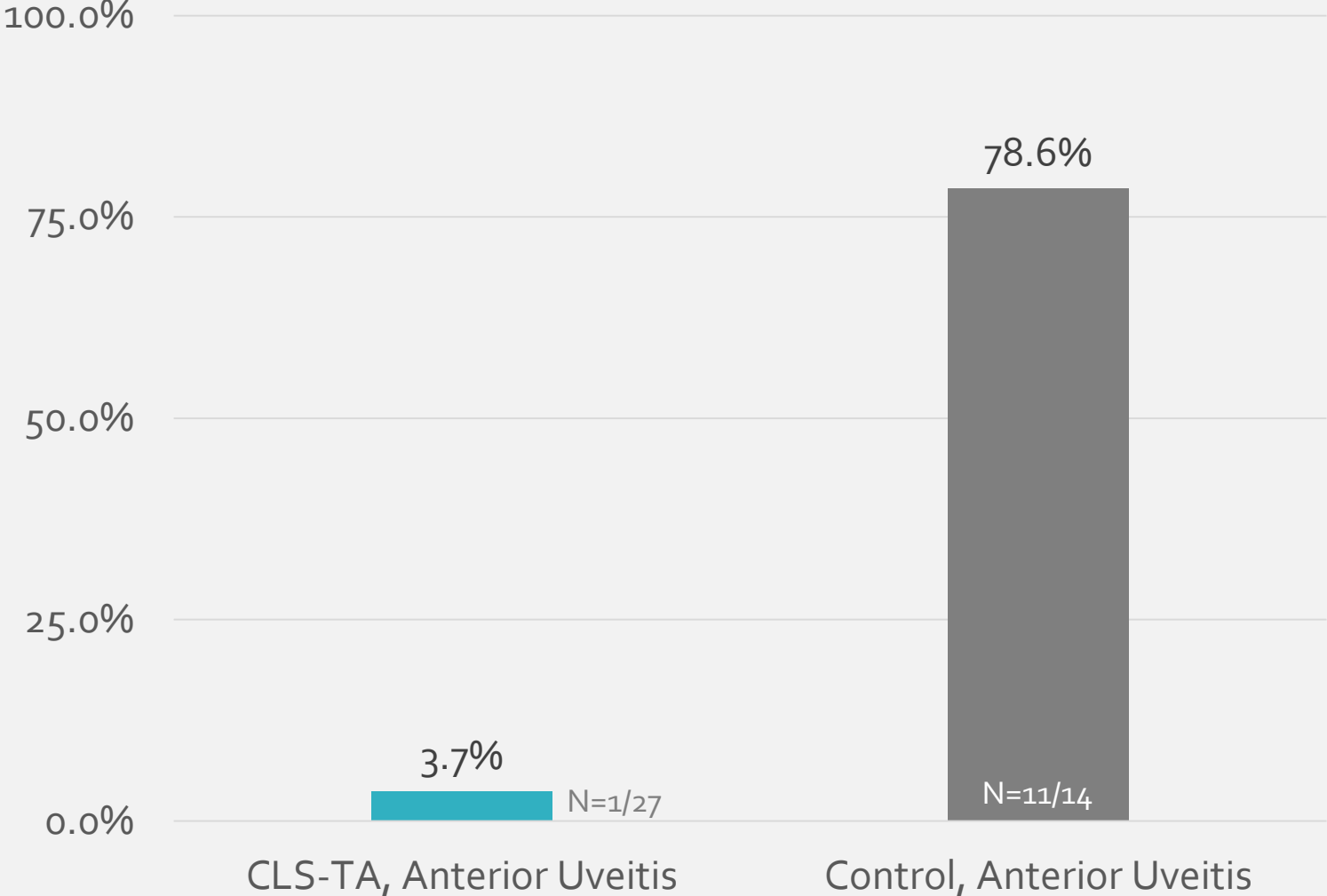
Anterior Uveitis: Anterior Chamber Cell Resolution *in patients with any signs of inflammation at baseline*



Anterior Uveitis: Resolution at Week 24 in Patients with $\geq 2+$ AC Cells at Baseline



Anterior Uveitis: Rescue Therapy through Week 24



Safety

IOP-Related Events	CLS-TA 4.0 mg N = 96	Control N = 64
Elevated IOP adverse events	11 (11.5%)	10 (15.6%)
IOP elevation ≥ 10 mmHg change from baseline at any visit*	9 (9.4%)	7 (10.9%)
IOP elevation ≥ 30 mmHg absolute reading at any post baseline visit*	5 (5.2%)	4 (6.3%)
Given any additional IOP-lowering medication	7 (7.3%)	6 (9.4%)
Any surgical intervention for an elevated IOP Adverse Event	0	0

- Cataract: 7.3% (7/96) in the CLS-TA arm vs. 6.3% (4/64) in the sham arm
- One serious ocular AE
 - Retinal detachment 8 weeks after CLS-TA
 - Determined to be unrelated to study drug by the Investigator

Safety population; includes subjects in the control group who received rescue medication

*Based on elevated intraocular pressure adverse reactions

PEACHTREE Take Home Points

EFFICACY

- Primary Endpoint was met, with ~47% of patients gaining ≥ 15 EDTRS letters
- Suprachoroidally injected CLS-TA significantly improved visual acuity in non-infectious uveitis of the anterior segment

SAFETY

- No SAEs attributable to CLS-TA
- Low rate of elevated IOP and cataract