Suprachoroidal CLS-TA Maintains Efficacy Outcomes Through 48-weeks in Uveitic Macular Edema subjects: Results of the MAGNOLIA Phase 3 Extension Study

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Retina Society• London, UK • September 11-15 , 2019

MAGNOLIA

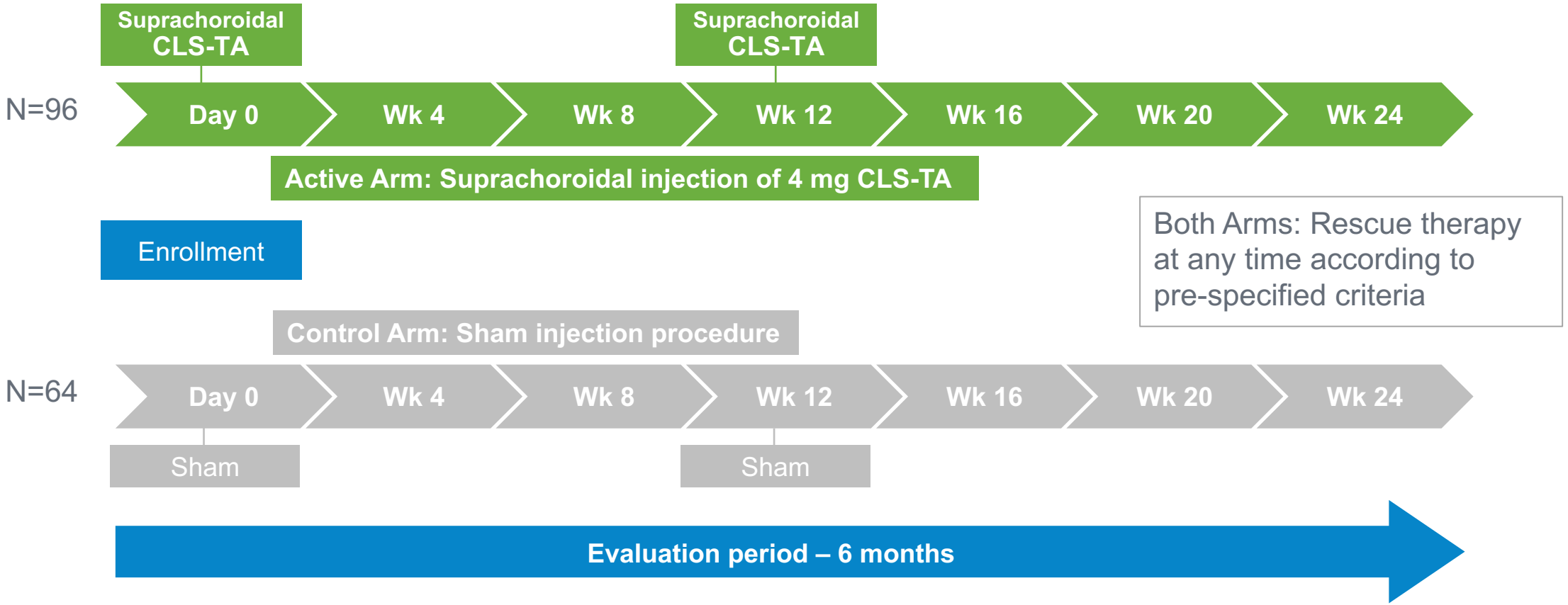
Financial Disclosures

Consultant: Eyepoint, Regeneron, Allergan, Genentech, Clearside, Alimera, Bausch and Lomb

Research Support: EyePoint, Genentech, TLC, Roche, Gilead, Allergan, Santen

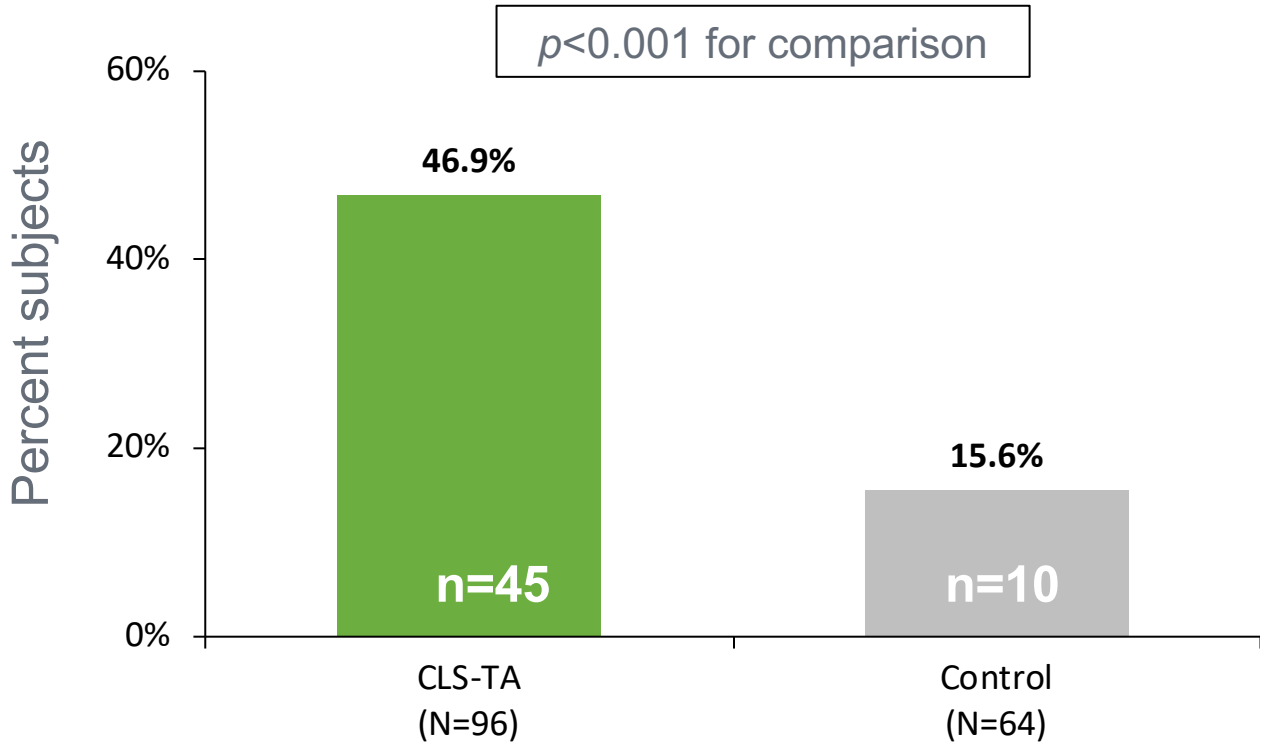
PEACHTREE: Phase 3, Randomized, Controlled, Double-Masked, Multicenter Trial

Visual acuity primary endpoint



PEACHTREE Met Its Primary Efficacy Endpoint

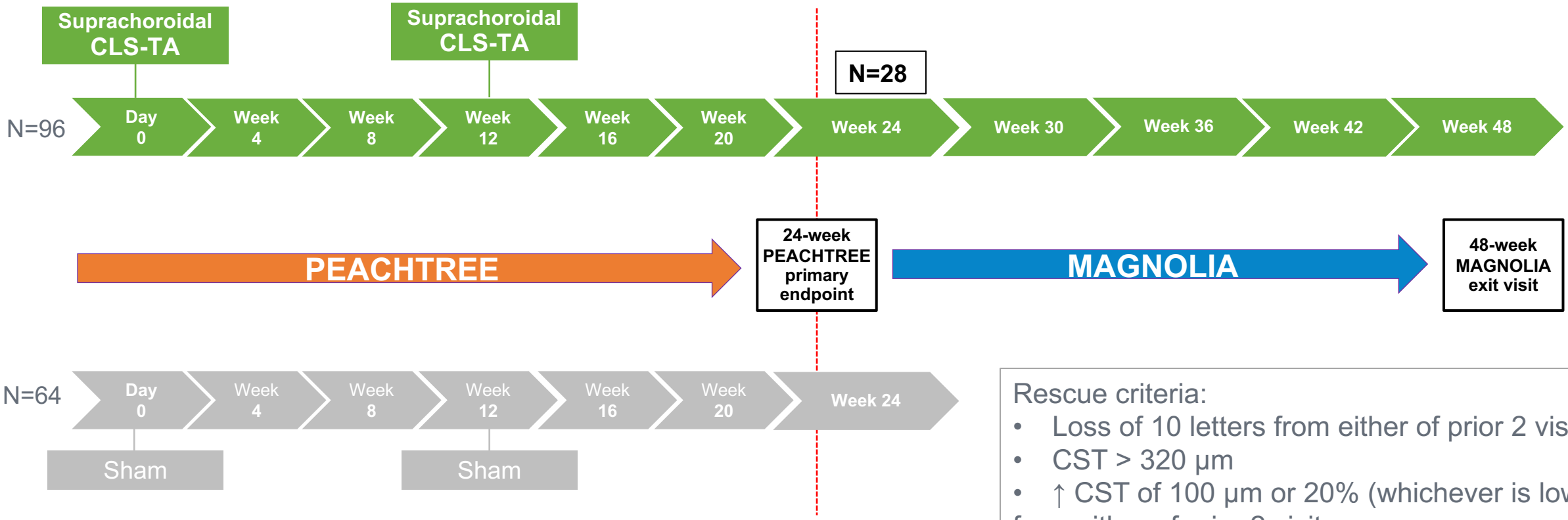
Subjects gaining ≥15 ETDRS letters from baseline, %



Yeh, S. Presented July 25, 2018, ASRS Annual Meeting, Vancouver, BC.
Intention-to-treat population; LOCF imputation.
The p-value is based on a Cochran-Mantel-Haenszel test for general association between treatment and response with stratification by country.
ETDRS, Early treatment diabetic retinopathy study; LOCF, last observation carried forward.

MAGNOLIA: Prospective, Non-interventional, Masked, Observational 24-week Extension Trial

- To be eligible for MAGNOLIA, subjects must have completed PEACHTREE and **NOT** have received rescue medication
- Primary Endpoint: Time to rescue therapy relative to Day 0 of PEACHTREE



Rescue criteria:
- Loss of 10 letters from either of prior 2 visits
- CST > 320 µm
- ↑ CST of 100 µm or 20% (whichever is lower) from either of prior 2 visits
- Investigator discretion

Baseline Characteristics

Baseline characteristics of PEACHTREE (Week 0)

Baseline characteristics of MAGNOLIA (Week 24)

Characteristic	PEACHTREE CLS-TA N=96	PEACHTREE CLS-TA N=28	MAGNOLIA CLS-TA N=28
Gender, % (n)			
Male	43.8 (42)	50.0 (14)	50.0 (14)
Female	56.3 (54)	50.0 (14)	50.0 (14)
Age (years), mean (SD)	50.40 (14.2)	48.1 (15.0)	48.6 (15.0)
BCVA, study eye (ETDRS letters)			
Mean (SD)	54.7 (13.9)	55.1 (12.6)	71.9 (13.2)
Median (range)	57 (9 – 89)	57 (9-70)	72 (39-93)
CST, study eye (µm)			
Mean (SD)	480.9 (153.2)	470.6 (137.7)	292.5 (15.4)
Median (range)	453.0 (256-857)	472 (296-756)	259.5 (203-498)

CST: central subfield thickness; ETDRS: Early Treatment Diabetic Retinopathy Study

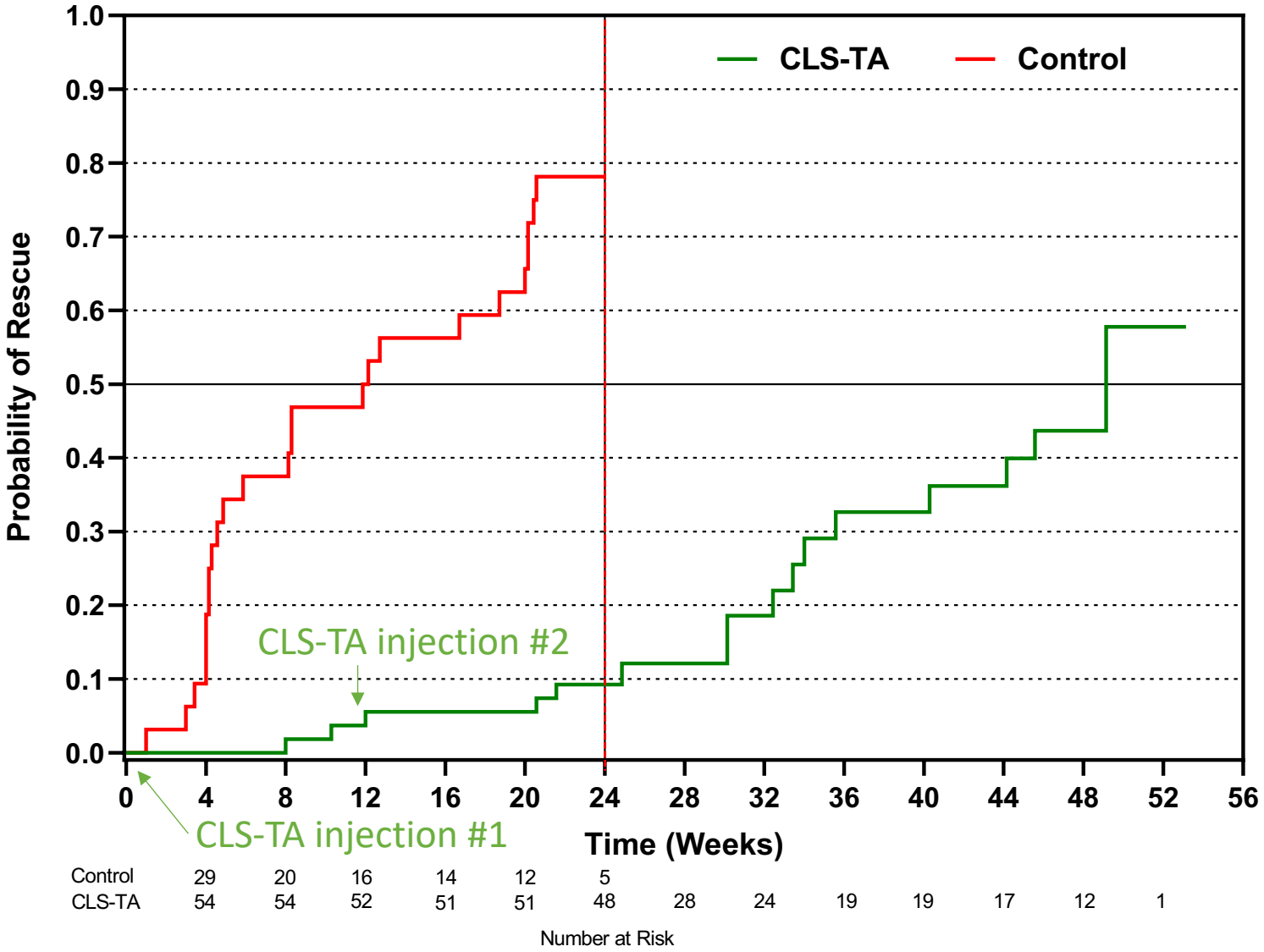
Distribution of Uveitis Etiologies

Characteristic	PEACHTREE CLS-TA (N=96) n (%)	MAGNOLIA CLS-TA (N=28) n (%)
Idiopathic	69 (71.9)	25 (89.3)
Pars planitis	7 (7.3)	1 (3.6)
Sarcoidosis	4 (4.2)	1 (3.6)
HLA-B27 related	4 (4.2)	0
Birdshot Retinochoroidopathy	2 (2.1)	1 (3.6)
Juvenile Idiopathic Arthritis	2 (2.1)	1 (3.6)
Reactive Arthritis	2 (2.1)	0
Vogt-Koyanagi-Harada Syndrome	1 (1.0)	0
Behcet's Syndrome	1 (1.0)	0
Other	3 (3.1)	0

Distribution of uveitis etiologies was similar across treatment arms, with most cases being idiopathic

Kaplan-Meier Plot of Time to First Rescue Primary Endpoint

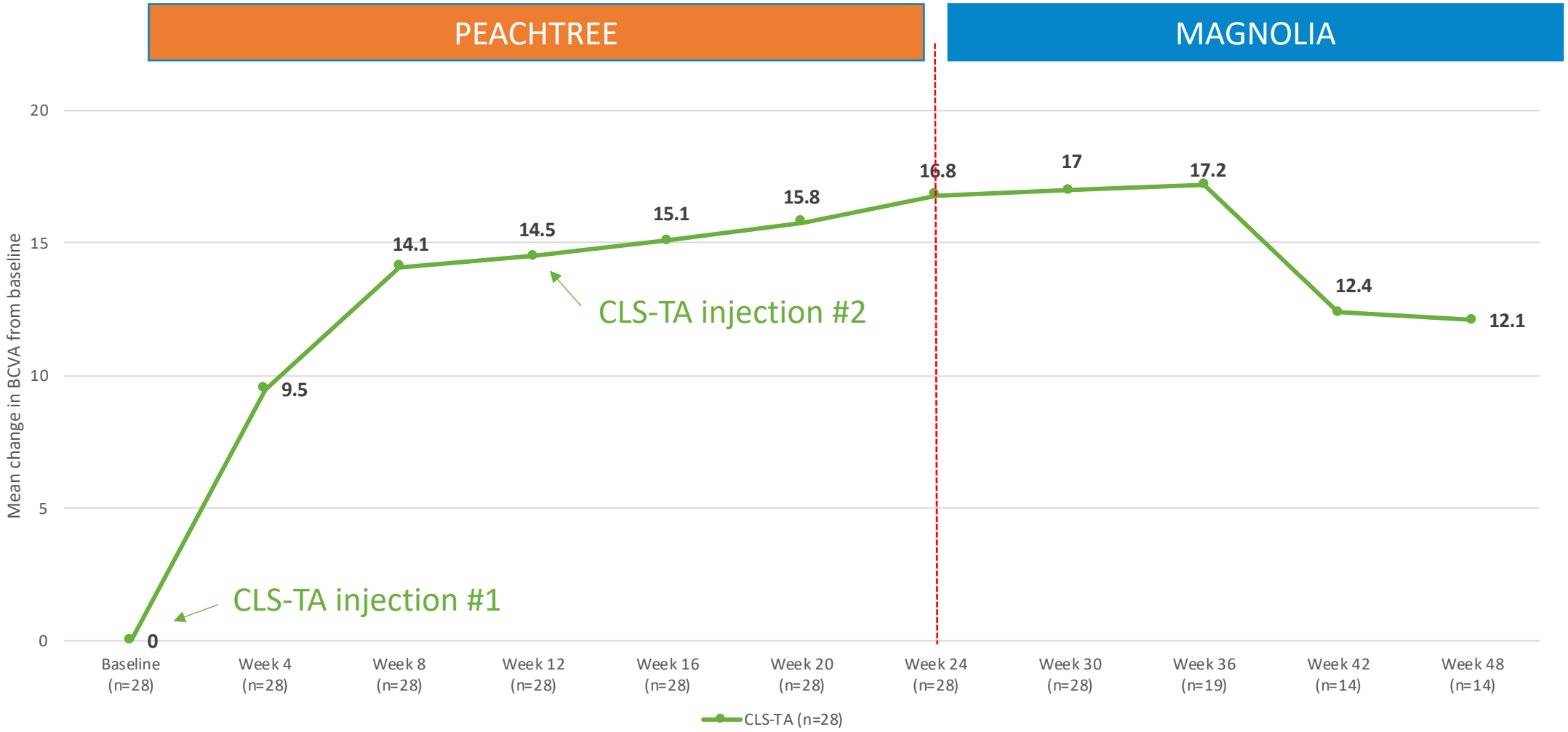
PEACHTREE | MAGNOLIA



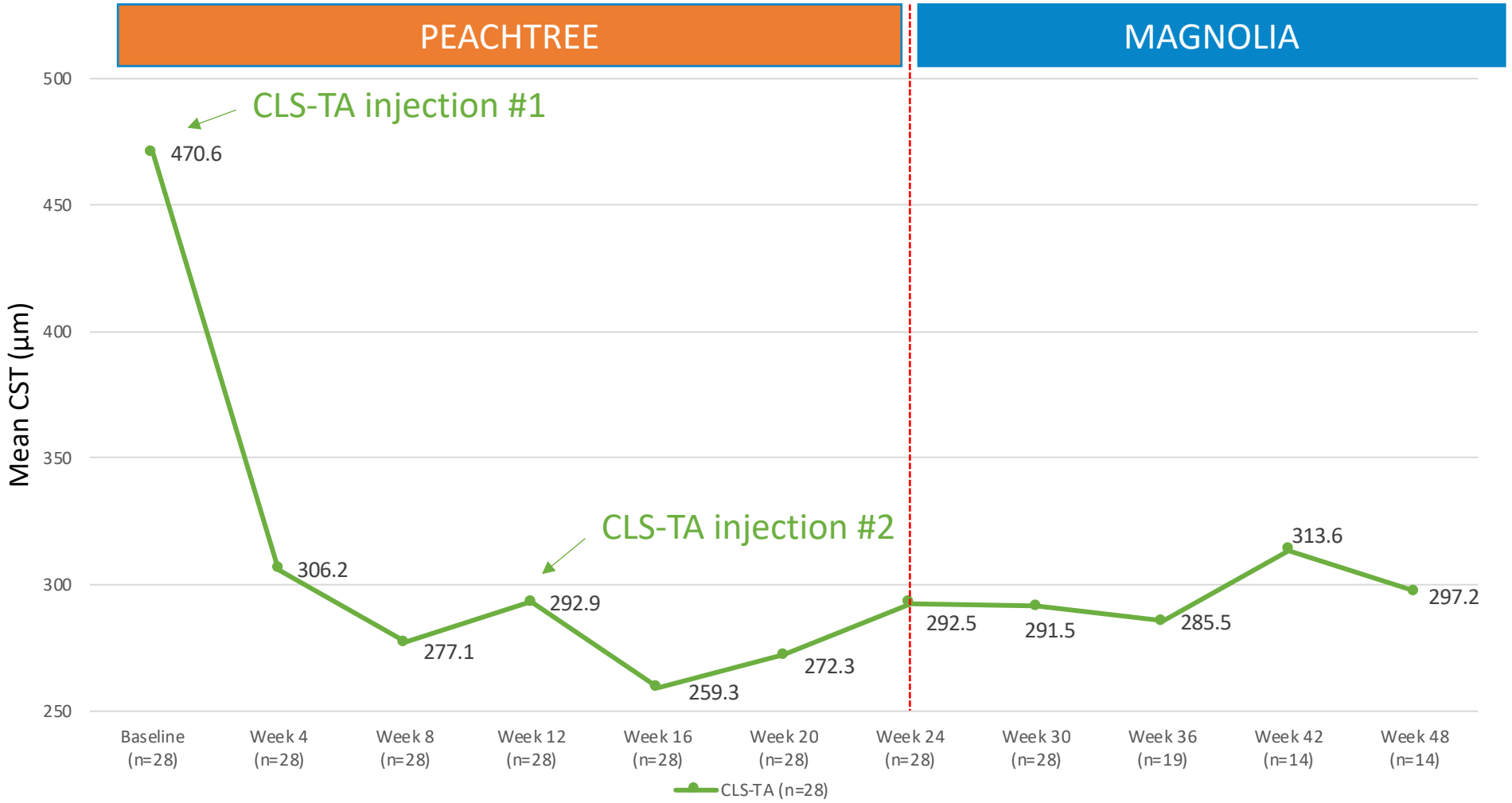
- **50% of CLS-TA subjects did not receive any additional medication through Week 48**
- **9 months from last CLS-TA dose**

No significant differences in baseline characteristics were seen between patients who enrolled in MAGNOLIA vs patients who were eligible to enroll in MAGNOLIA but didn't.

Mean Change in BCVA from Baseline through Week 48



Mean Central Subfield Thickness (CST) through Week 48



Ocular Adverse Events for Study Eye

Event	PEACHTREE CLS-TA (N=28) n (%)	MAGNOLIA CLS-TA (N=28) n (%)
Anterior capsule contraction	1 (3.6)	0 (0)
Cataract	0 (0)	1 (3.6)
Cataract nuclear	0 (0)	1 (3.6)
Cataract subcapsular	3 (10.7)	2 (7.1)
Conjunctival hemorrhage	1 (3.6)	0 (0)
Dry Eye	1 (3.6)	0 (0)
Eye Pain	1 (3.6)	0 (0)
Injection Site Pain	1 (3.6)	0 (0)
Vitreous hemorrhage	0 (0)	1 (3.6)
Retinoschisis	0 (0)	1 (3.6)
Uveitis	0 (0)	3 (10.7)
Macular edema	0 (0)	1 (3.6)
Cystoid macular edema	0 (0)	2 (7.1)
Post procedural inflammation	0 (0)	1 (3.6)
Tumor hemorrhage	0 (0)	1 (3.6)

Summary of Adverse Reactions of Elevated IOP

IOP-related Outcome, % (n)	PEACHTREE CLS-TA (N=28) n (%) *Onset: Week 0 – Crossover*	MAGNOLIA CLS-TA (N=28) n (%) *Onset: Crossover – Week 48*
IOP elevation ≥10 mmHg above baseline at any visit	3 (10.7)	1 (3.6)
Given additional IOP lowering meds for ≥10 mmHg	1 (3.6)	1 (3.6)
IOP elevation ≥30 mmHg at any visit	1 (3.6)	1 (3.6)
Given additional IOP lowering meds for ≥ 30 mmHg	1 (3.6)	1 (3.6)
Given any additional IOP lowering meds	2 (7.1)	1 (3.6)
Any surgical intervention for an elevated IOP AE	0 (0)	0 (0)

Events counted based on first onset in either PEACTHREE or MAGNOLIA
Events are based on a per patient basis
Post Hoc Analysis

Non-ocular adverse events

Event	PEACHTREE CLS-TA (N=28) % (n)	MAGNOLIA CLS-TA (N=28) % (n)
Nausea	1 (3.6)	0 (0)
Periodontal disease	1 (3.6)	0 (0)
Oesophageal achalasia	0 (0)	1 (3.6)
Nasopharyngitis	1 (3.6)	0 (0)
Oophoritis	1 (3.6)	0 (0)
Respiratory tract infection	1 (3.6)	0 (0)
Sinusitis	1 (3.6)	0 (0)
Nail bed infection	0 (0)	1 (3.6)
Pneumonia	0(0)	1 (3.6)
Septic shock	0(0)	1 (3.6)
Headache	1 (3.6)	0 (0)
Acute kidney injury	0 (0)	1 (3.6)
Acute respiratory failure	0 (0)	1 (3.6)
Pneumonia aspiration	0 (0)	1 (3.6)

There were no SAEs related to study medication

MAGNOLIA: Take Home Points

Efficacy

- 50% of subjects did not receive additional medication through week 48
  - 36 weeks after their last injection of CLS-TA
- Suprachoroidally injected CLS-TA significantly improved vision (~12 letters)
- Suprachoroidally injected CLS-TA significantly improved macular edema (~170 microns)

Safety

- There were no SAEs related to study medication
- Elevations in IOP were consistent with those seen in the PEACHTREE trial and were low

Thank you