Suprachoroidal CLS-TA Plus Aflibercept Compared with Aflibercept Monotherapy for DME: Selected Secondary Results of the Randomized Phase 2 TYBEE Trial

Michael S. Ip, MD, Muneeswar Gupta Nittala and Swetha Velaga on behalf of the TYBEE Study Group

> The Doheny Image Reading Center Doheny Eye Institute University of California - Los Angeles



Disclosures

- Financial Disclosures
 - Consultant: Boehringer Ingelheim, ThromboGenics, Genentech, Astellas, Allergan, Novartis, Alimera, Allegro
- Study Disclosures
 - This study includes research conducted on human subjects. Institutional Review Board approval was obtained prior to study initiation



Undertreatment may be one reason for worse outcomes in the "real-world"

14.00 14.00 Number of Injections 12.00 12.00 10.00 10.00 Change in VA 8.00 8.00 6.00 6.00 4.00 4.00 2.00 2.00 0.00 0.00 "Real DRCR Vista Vivid Rise Ride "Real DRCR Vivid Rise Vista Ride World" World" Bevacizumab Ranibizumab ■ Aflibercept

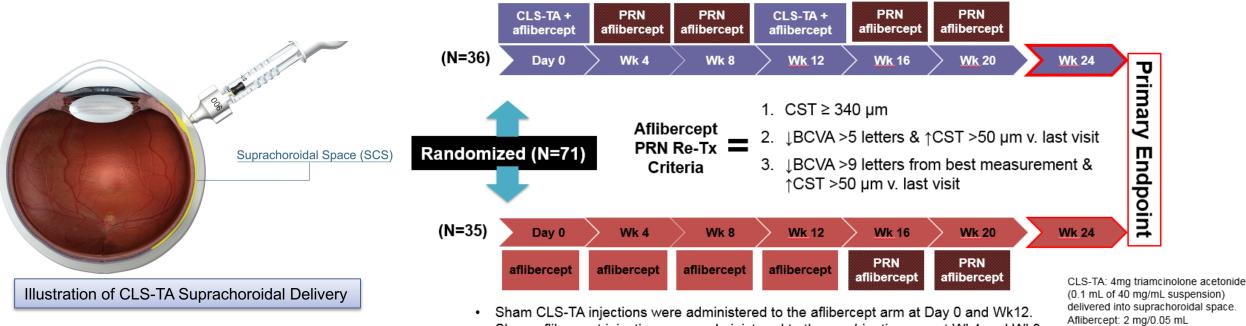
Ciulla, et al. Ophthalmology Retina 2018;2:1179-1187; Retina Society 2019



12 Month analysis: number of injections

12 Month analysis: number of letters

TYBEE: Phase 2, Double-Masked, 6-Month DME Trial

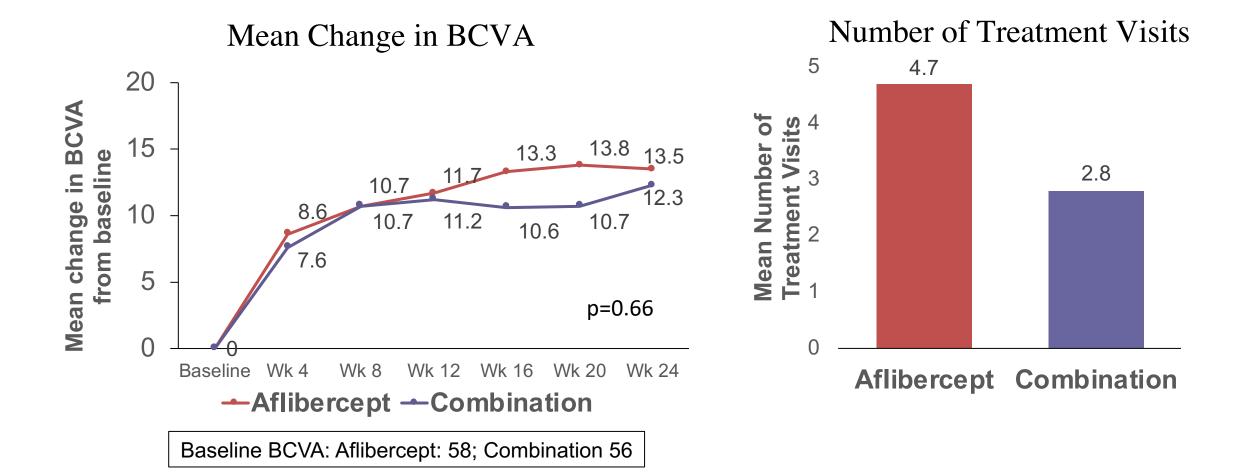


Sham aflibercept injections were administered to the combination arm at Wk4 and Wk8 ٠

(0.1 mL of 40 mg/mL suspension) delivered into suprachoroidal space.



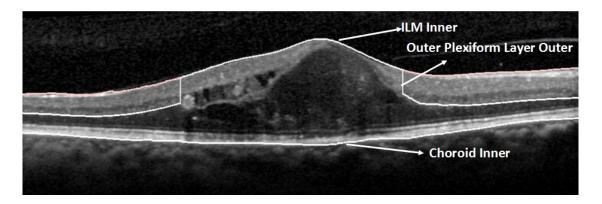
TYBEE Endpoints

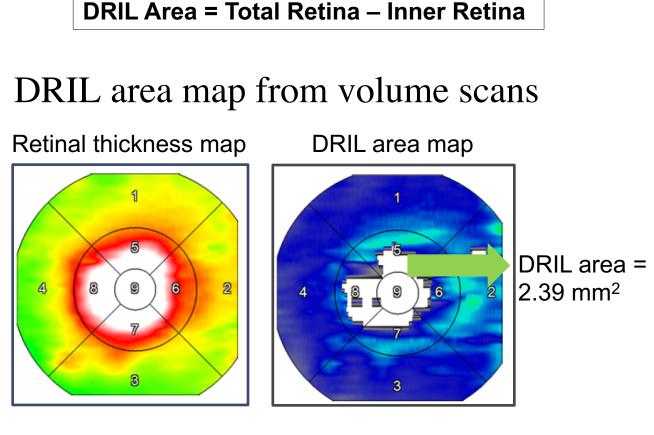




Analysis: Disorganization of the Inner Retinal layers (DRIL)

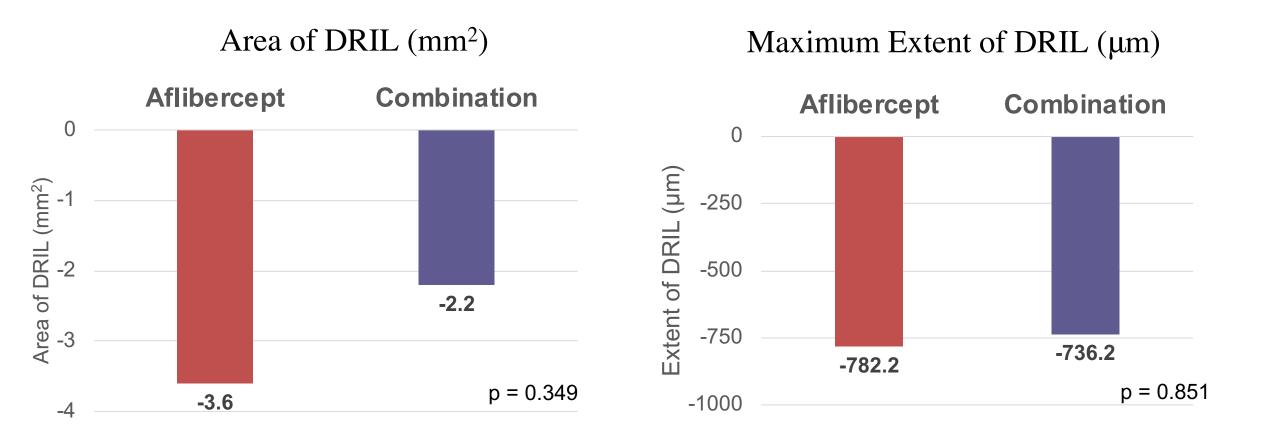
- Disorganization of the inner retinal layers was defined where 1 or more boundaries between the following layers are not separately identifiable:
 - ganglion cell layer and inner plexiform layer complex
 - inner plexiform layer complex and inner nuclear layer
 - inner nuclear layer and outer plexiform layer
- · Performed area and maximum extent measurement







Sun, et al. JAMA Ophthalmol. 2014;132(11):1309-1316. Radwan, et al. JAMA Ophthalmol. 2015;133(7):820-825. Babiuch, et al. JAMA Ophthalmol. 2019;137(1):38-46. Similar Improvement in Area and Maximum Extent of DRIL





Conclusion

- Combination aflibercept & suprachoroidal CLS-TA vs aflibercept monotherapy at Wk24:
 - Similar BCVA change
 - Improved OCT CST change in the combination group
 - Similar DRSS change
 - Similar DRIL change (maximum extent and area)
 - Fewer treatment visits in combination group (2.8 vs 4.7 mean treatment visits)
- DRIL is a biomarker that should be evaluated in future DME clinical trials

