CONNECT1-EDO51: A 12-week Open-Label Phase 2 Study to Evaluate PGN-EDO51 Safety and Efficacy in People with Duchenne Amenable to Exon 51 Skipping



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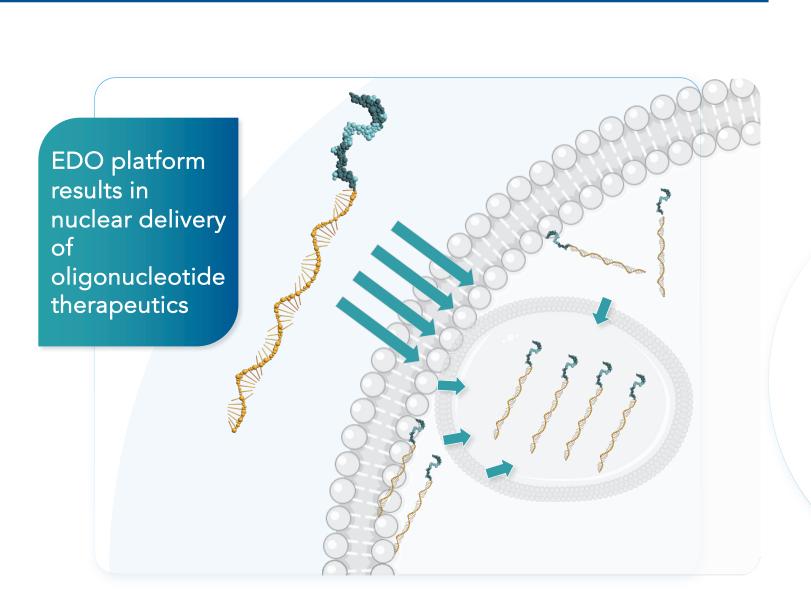
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PGN-EDO51

INTRODUCTION

PEPGEN'S ENHANCED DELIVERY OLIGONUCLEOTIDES (EDO)



EDO cell-penetrating peptide technology is engineered to optimize tissue delivery and nuclear uptake of therapeutic oligonucleotides

PGN-EDO51 is PepGen's investigational clinical candidate for the treatment of Duchenne muscular dystrophy (DMD) amenable to exon 51 skipping

PHASE 2 CLINICAL STUDIES (CONNECT)

weeks1

weeks

CONNECT1 and CONNECT2 OVERVIEW

ONGOING Phase 2: Open-label MAD trial in patients

Open in Canada: ongoing dosing and data collection in 10 mg/kg and 5 mg/kg LTE cohorts

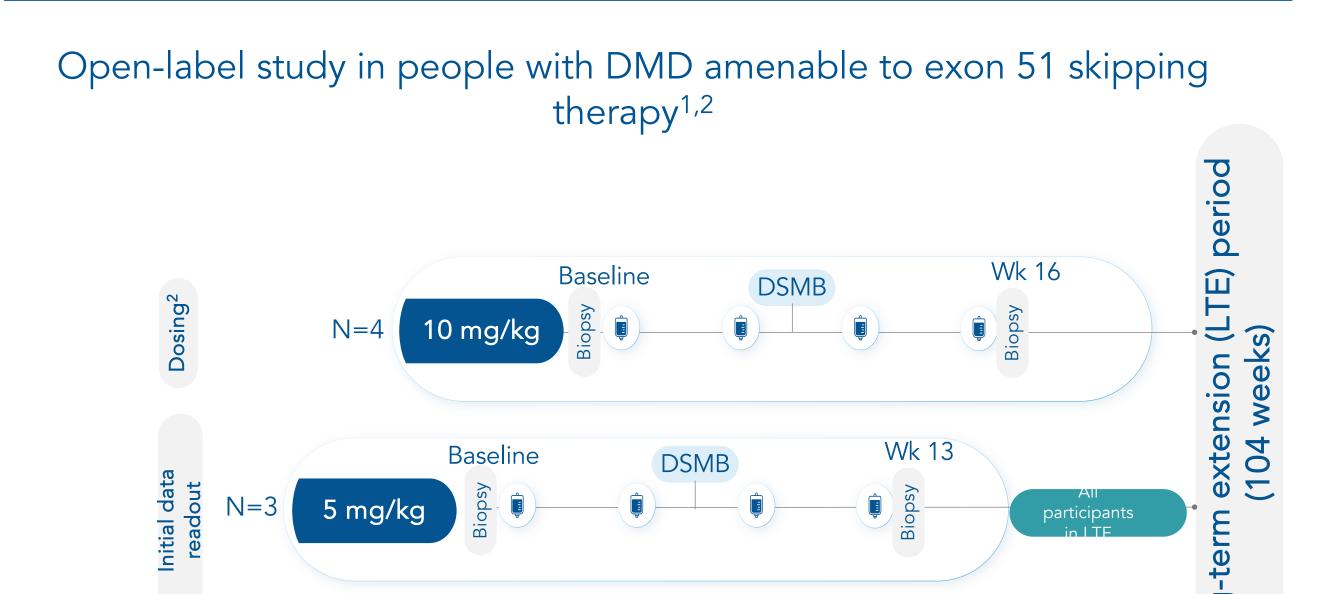
Fast path to proofof-concept: dystrophin

expression at 13-16

Temporarily Paused

- Phase 2: Randomized, double-blind, placebocontrolled MAD trial in patients
- Temporarily paused in the UK²
- Clinical Hold in the US
- Potential to support accelerated approval³: dystrophin expression at 28
- Dystrophin expression measured at 13 weeks in Cohort 1 and at 16 weeks in Cohort
 Decision to pause enrollment was made voluntarily by PepGen
 Subject to acceptable benefit/risk profile and regulatory authority feedback

CONNECT1-EDO51 STUDY DESIGN



DSMB: data safety and monitoring board

PGN-EDO51 is administered as IV infusion every 4 weeks
 Dosing remains ongoing in the 5 mg/kg and 10 mg/kg LTE groups without further escalation at this time; data collection remains ongoing.

CONNECT1-EDO51 Study, Eligibility, Objectives and Baseline Characteristics

KEY ELIGIBILITY CRITERIA

INCLUSION

- Males by birth, age ≥ 6 & ≤ 16 years of age at the time of consent/assent
- Body weight ≥18 kg; Body Mass Index (BMI) ≤32 kg/m2 at screening
- Diagnosis of DMD with exon 51 skippable mutation
- Performance of Upper Limb (PUL) 2.0 entry score of ≥ 4 at Screening

EXCLUSION

- Initiation or change in doses of concomitant medications or herbal supplements (except for modifications to accommodate changes in weight)
- Left ventricle ejection fraction <45% as measured within
 12 months of study start
- Forced vital capacity <40% predicted value

OBJECTIVES

PRIMARY

Connect 1

Connect 2

 To evaluate the safety and tolerability of PGN-EDO51 following multiple doses in male participants with DMD amenable to exon 51 skipping

SECONDARY & EXPLORATORY

- To evaluate the levels of dystrophin in skeletal muscle following multiple doses of PGN-EDO51
- To evaluate the concentration of PGN-EDO51 in skeletal muscle following multiple doses of PGN-EDO51
- To evaluate the pharmacokinetics (PK) of PGN-EDO51in plasma following multiple doses of PGN-EDO51
- To evaluate DMD exon 51 skipping in skeletal muscle following multiple doses of PGN-EDO51

CONNECT1, COHORT 1 (5 mg/kg): BASELINE CHARACTERISTICS OF PARTICIPANTS (n=3)

	Mean (SD)
Age (years)	11.7 (1.5)
BMI (kg/m²)	19.8 (2.7)
Height (cm)	132.0 (9.9)
Weight (kg)	34.4 (3.9)
Age of DMD genetic diagnosis (years)	6.3 (1.5)
Number of patients on daily corticosteroid dosing regimen	3
Number of ambulatory patients	3
Number of patients previously on DMD therapy	0

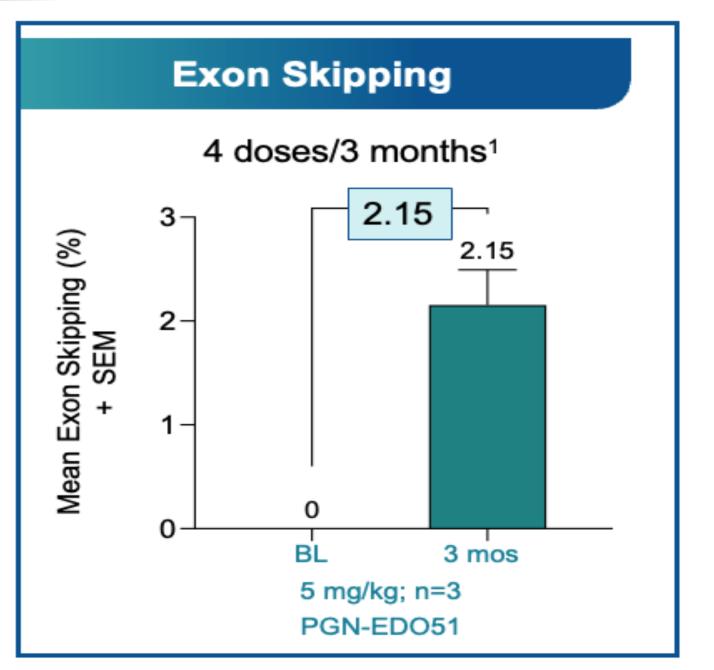
CONNECT1-EDO51 Study Results of First Cohort (5 mg/kg)

CONNECT1 5 MG/KG: PGN-EDO51 WAS WELL TOLERATED¹

	n(%)
Any TEAEs, n(%)	3 (100)
Related to study drug	2 (66.7)
MildModerateSevere	2 (66.7) 0 0
Any TEAEs of Special Interest (AESI)	1 (33.3)
Serious Adverse Events (AEs)	0
AEs leading to dose modification/discontinuation/interruption	0
AEs leading to death	0

n= number of participants

PGN-EDO51 SHOWED HIGH MEAN LEVELS OF EXON SKIPPING



1. PGN-EDO51 muscle biopsy taken approximately 7 days after last dose BL: Baseline, SEM: Standard Error of the Mean

All treatment emergent adverse events (TEAEs) were mild and resolved

Treatment related TEAEs were mild (abdominal pain, flatulence, creatinine increased)
AESI was increased creatinine that resolved

 AESI was increased creatinine that resolved without intervention
 No discontinuations, dose modifications or

dose interruptions

-All participants rolled over to the long-term extension study

No sustained elevation in kidney biomarkers

No changes in electrolytes

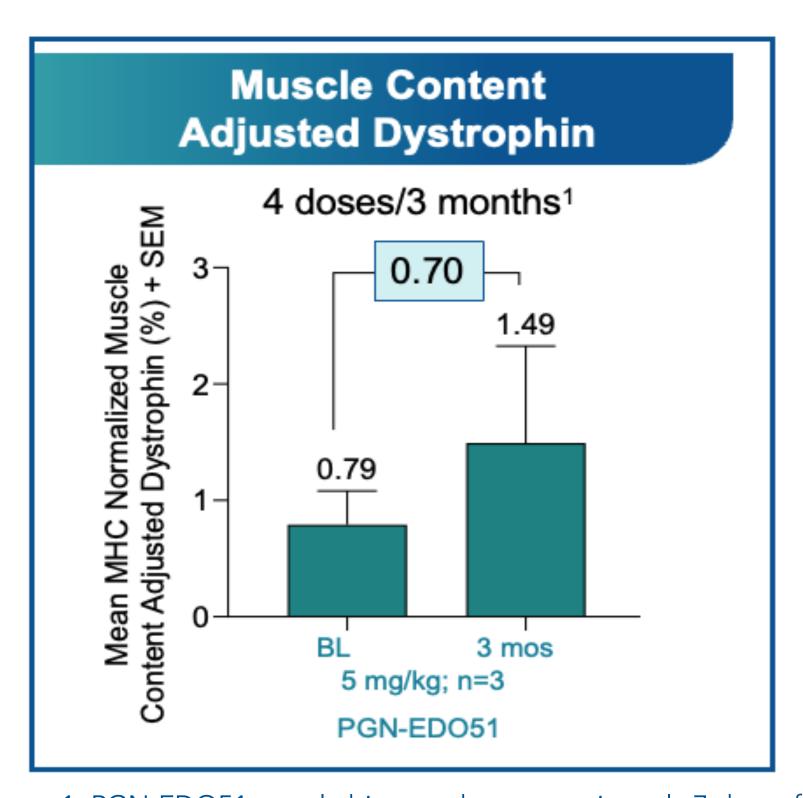
-No hypomagnesemia or hypokalemia

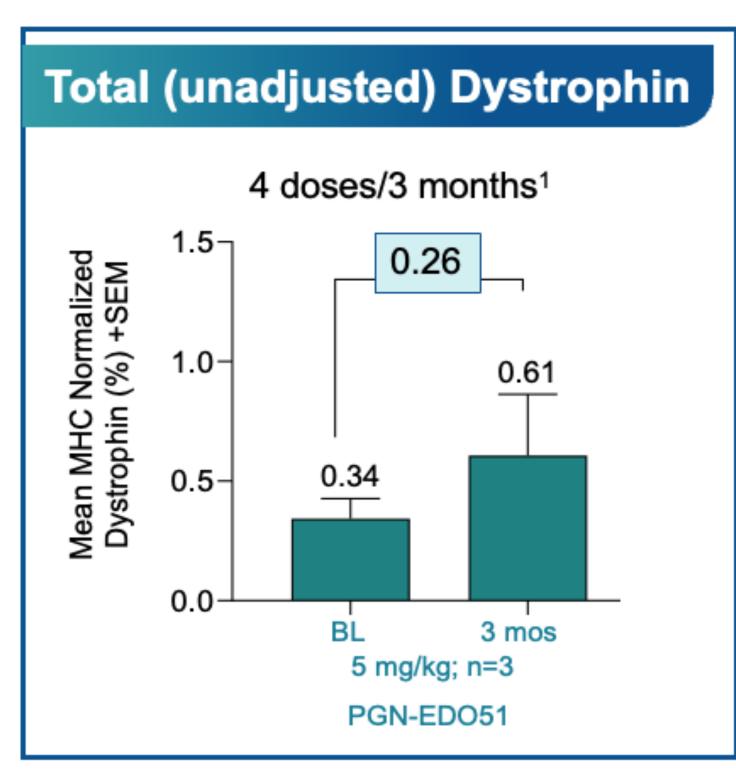
No changes in hepatic functionNo anemia or thrombocytopenia

At 5 mg/kg, a total of 40 doses have been administered (12 doses in the MAD period+28 doses in the LTE period)¹

1. Data as of Jan. 23, 2025

PGN-EDO51 PRODUCED DYSTROPHIN INCREASES OVER SHORT TREATMENT DURATION





1. PGN-EDO51 muscle biopsy taken approximately 7 days after last dose MHC: Myosin Heavy Chain, BL: Baseline, SEM: Standard Error of the Mean

CONCLUSIONS

- CONNECT1-EDO51 study has fully enrolled two cohorts at dose levels of 5 mg/kg and 10 mg/kg
- PGN-EDO51 emerging safety profile is favorable¹
- All treatment-related adverse events are mild^{1,2}
 No treatment-related serious adverse events¹
- PGN-EDO51 was well tolerated at 5 mg/kg, currently dosing at 10 mg/kg
- PGN-EDO51 generated high mean levels of exon 51 skipping (2.15%)
- Dystrophin production is encouraging at just 3 months and 4 doses of 5 mg/kg
- Initial results support that EDO technology delivers high levels of oligonucleotides to the nucleus
- All patients dosed at 5 mg/kg demonstrated increased exon skipping and dystrophin production and have continued into the long-term extension study
- Potentially higher levels of dystrophin production are expected with higher doses of PGN-EDO51 over longer treatment periods, which will be assessed in the CONNECT2-EDO51 study
 - Data as of Jan. 23, 2025
 Cohort 2 (10 mg/kg)
 - Mild hypomagnesemia occurred in 2 participants. The serum magnesium returned to normal levels after they received low-dose oral magnesium supplementation
 Mild renal impairment (Glomerular Filtration Rate decreased) occurred in 1 participant, and the treatment was paused to investigate potential causes. The participant's lab value steadily improved toward their baseline value

during this pause.

ACKNOWLEDGEMENTS

For details on PGN-EDO51 nonclinical data, you can visit poster P49