

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

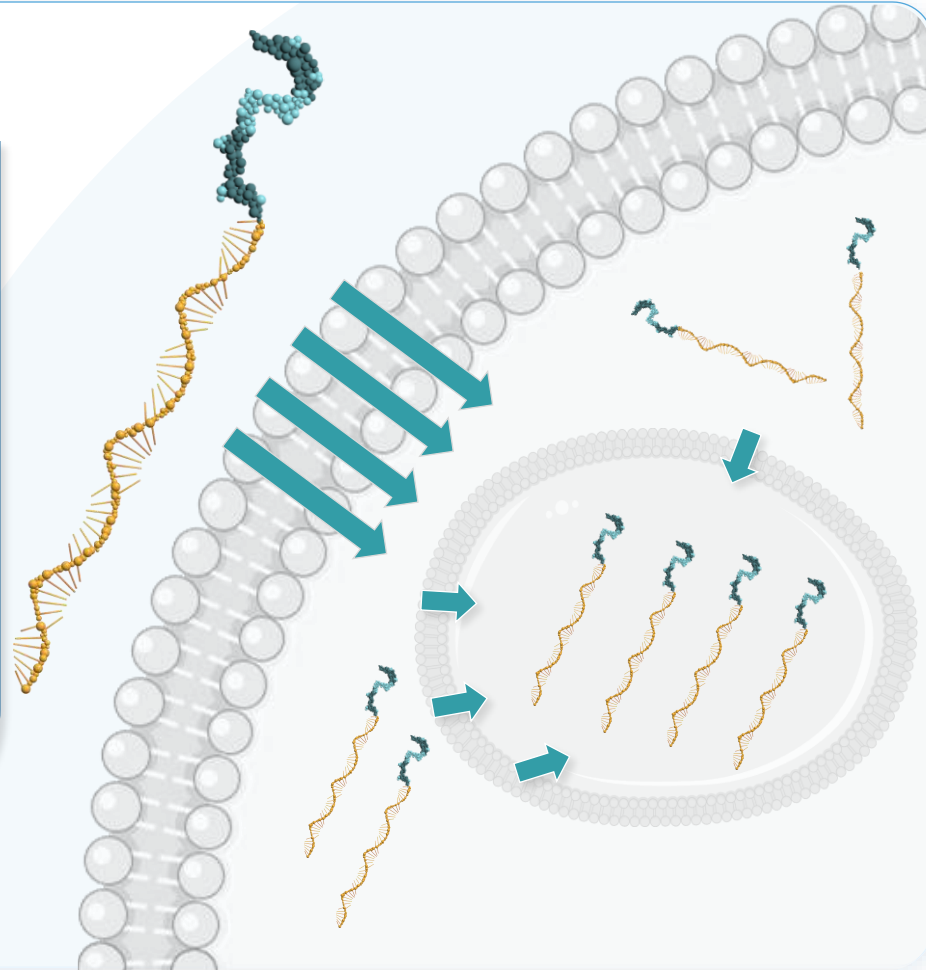
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Conflict of Interest

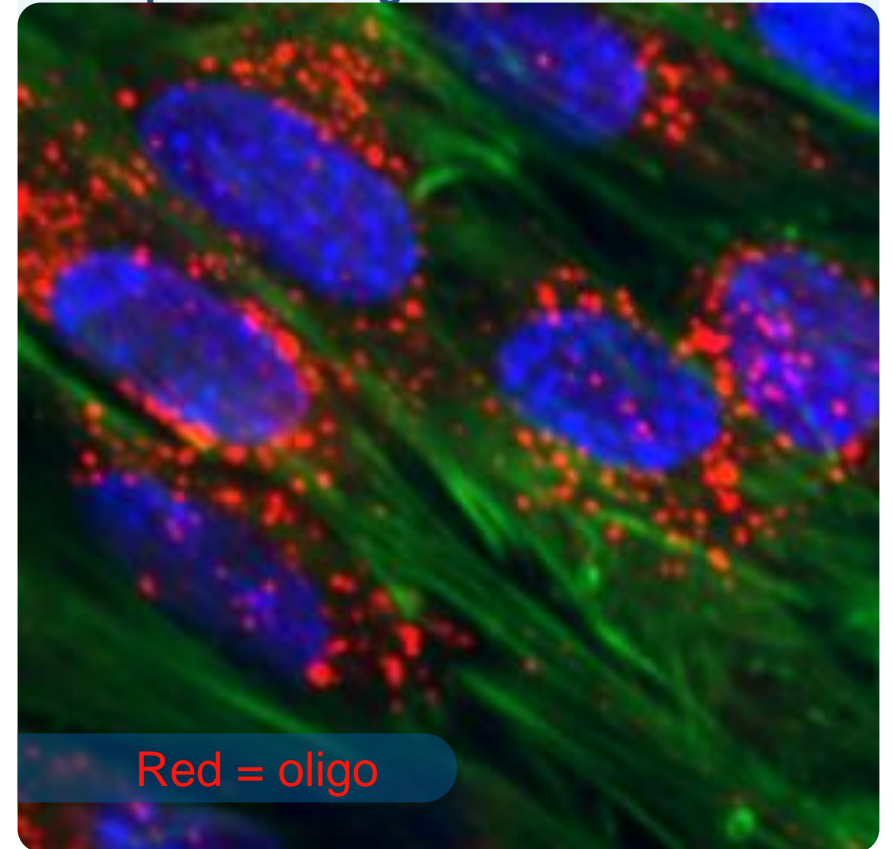
- I am a full-time employee of PepGen
- I receive compensation, stock and benefits from PepGen

PepGen's Enhanced Delivery Oligonucleotide (EDO) 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



PepGen's EDO: Up to 25X Higher Nuclear Uptake of Oligonucleotide vs PMO



In vitro staining image is shown with 10 μ M conc. of EDO23. C2C12 mouse cells were differentiated for 4 days into myotubes and treated with fluorescently tagged compounds for 24h. PMO: phosphorodiamidate morpholino oligomer

CONNECT1*: Designed to Establish Proof-of-Concept and Inform CONNECT2-EDO51 Clinical Trial

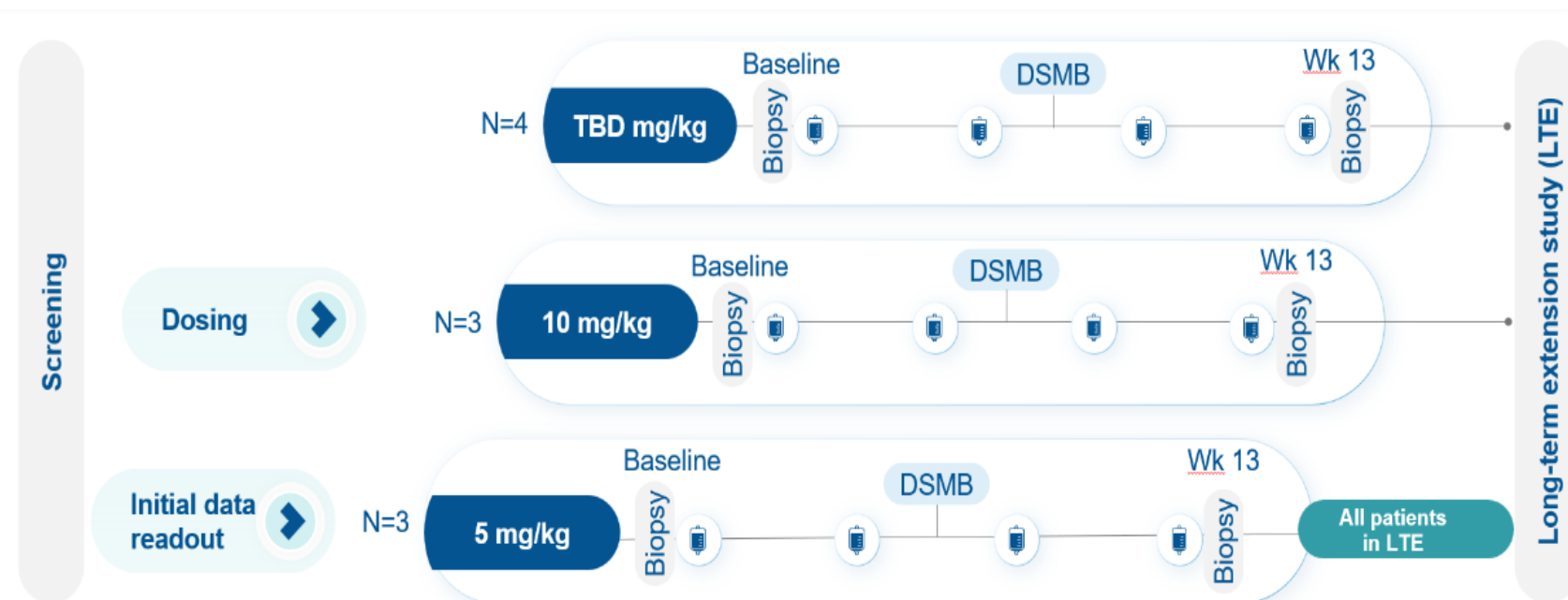


Design

- Open label clinical trial in Canada
- DMD patients (n=10) with exon 51 skippable mutation
- Ages ≥ 8 years
- Ambulatory and non-ambulatory

Endpoints

- Safety and tolerability
- Dystrophin
- Muscle tissue concentration of PGN-EDO51
- Exon skipping



IV administration every 4 weeks, DSMB: data safety and monitoring board

Baseline characteristics are detailed in poster 403P

* ClinicalTrials.gov number, NCT06079736

CONNECT1 5 mg/kg: Safety Profile¹

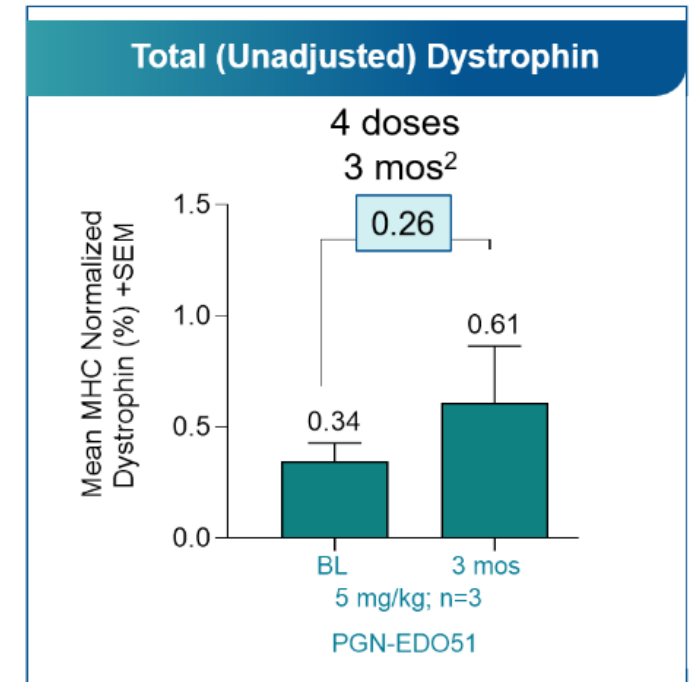
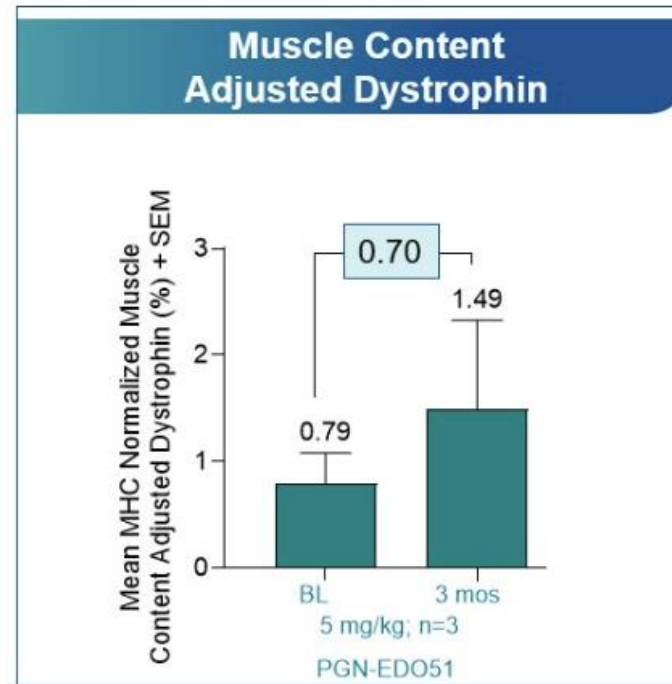
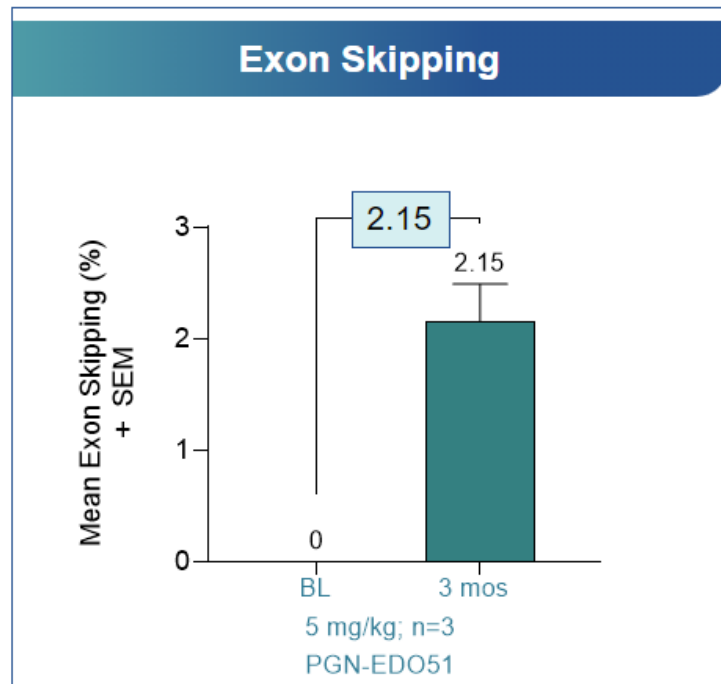
MAD Period	n (%)
Any TEAEs, n (%)	3 (100)
Related to study drug	1 (33.3)
<ul style="list-style-type: none"> Mild Moderate Severe 	1 (33.3) 0 0
Serious Adverse Events (AEs)	0
AEs leading to dose modification/ discontinuation/interruption	0
AEs leading to death	0

- All treatment emergent adverse events (TEAEs) were mild and resolved
- Related TEAE was mild (abdominal pain, flatulence)
- 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 function
- No anemia or thrombocytopenia

At 5 mg/kg, a total of 25 doses have been administered (12 doses in the MAD period+13 doses in the LTE period)²

1. As of May 31, 2024
 2. As of September 4, 2024

PGN-EDO51 Produced High Levels of Mean Exon Skipping and Promising Dystrophin Increase over Short Treatment Duration and with Few Doses



4 doses over 3 months

Dosing Continues in Cohort 2 at 10 mg/kg¹

- The emerging safety profile is favorable
- At 10 mg/kg, a total of 7 doses have been administered
- All treatment-related AEs were mild and have resolved without treatment
- Asymptomatic mild hypomagnesemia in one patient was observed and treated with oral supplementation
- No dose discontinuations, dose modifications or dose interruptions
- No SAEs
- No sustained elevation in kidney biomarkers
- No changes in hepatic function
- No hypokalemia, anemia or thrombocytopenia

CONNECT1 Key Takeaways

- PGN-EDO51 has a favorable safety profile to date¹
- All participants at 5 mg/kg demonstrated increased dystrophin production and exon skipping at just 3 months and after 4 doses
- Results support that our EDO technology delivers high levels of oligonucleotides to the nucleus

For more details, you can visit our posters

403P 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

404P CONNECT2-EDO51: A Phase 2 placebo-controlled study to evaluate PGN-EDO51 safety and efficacy in people with Duchenne amenable to exon 51 skipping

Thank you!

All the study participants and their families

The clinical investigators and their teams

- Dr. Hugh McMillan, MD, MSc, FRCPC
Children's Hospital of Eastern Ontario (CHEO)
- Dr. Hernan Gonorazky, MD, CSCN
The Hospital for Sick Children (SickKids)
- Dr. Nicolas Chrestian, MD, FRCPC, CSCN
CHU De Quebec-Universite Laval
- Dr. Colleen O'Connell, MD, FRCPC
Dalhousie University Faculty of Medicine
- Dr. Kristina Joyal
Children's Hospital Research Institute of Manitoba

The Duchenne patient communities

