

Lipidology Trials - What's New and What's in the Pipeline?

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European Society of Cardiology**

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Declaration of Conflict Of Interest

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research support:	AstraZeneca, Bayer Healthcare, MSD, Resverlogix, KOWA, Pfizer
Receipt of honoraria or consultation fees:	Bayer Healthcare, MSD, Pfizer, Novo Nordisk
Participation in a company sponsored speaker's bureau:	Pfizer, Novo Nordisk

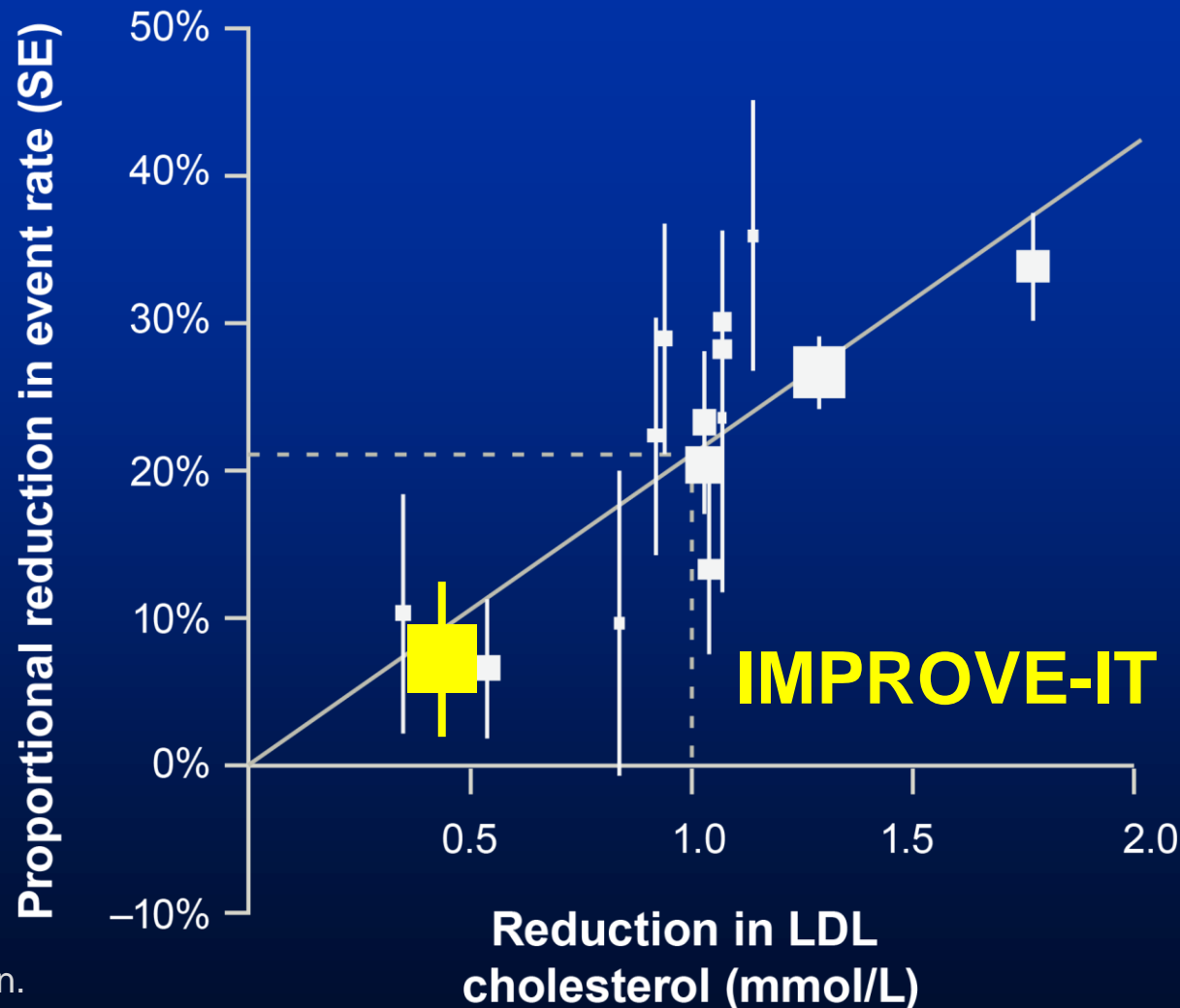
Challenges in Lipidology Trials

- **What is the pathophysiology?**
 - What are the targets?
 - LDL? HDL? TG? LP(a)?
 - Relation between lipidology, atherosclerosis and CV events?
 - Time discrepancies?
- **What are the end-points?**
 - Surrogate endpoints? Plasma lipids? Plaque volume? Extent of disease?
 - Can these guide in early/late phases of drug development?
 - Outcome events – This is what matters!
- **What is the comparator?**
 - Keeping pace with a rapidly evolving field

Targets

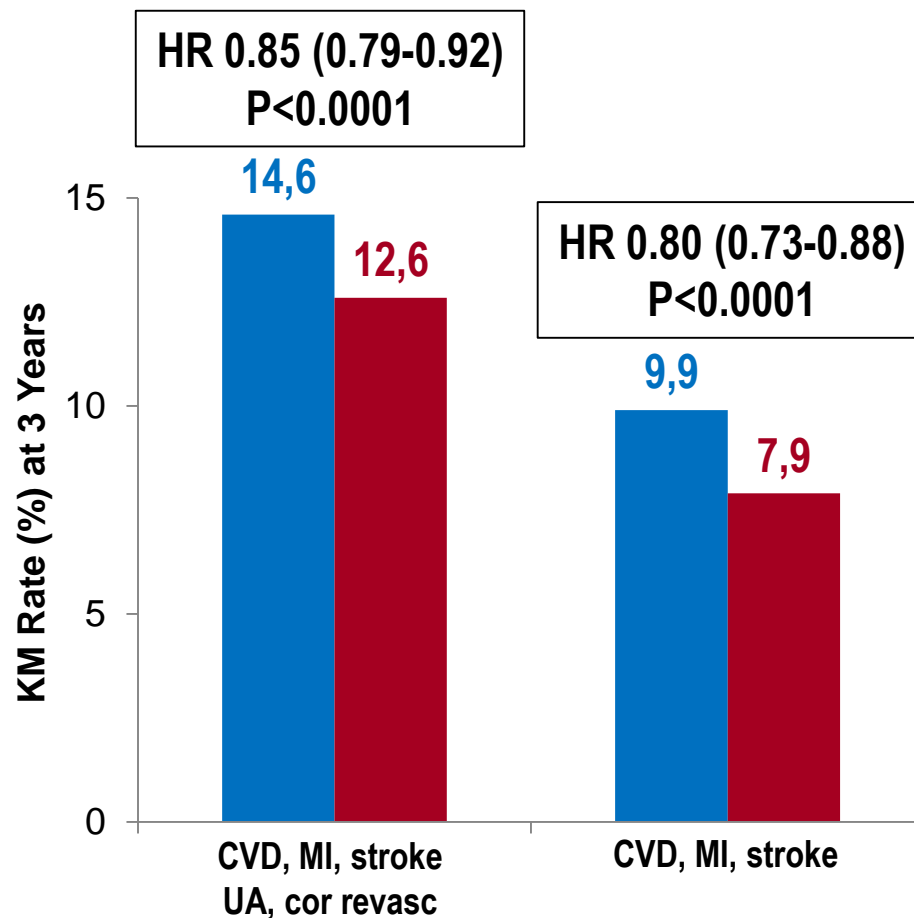
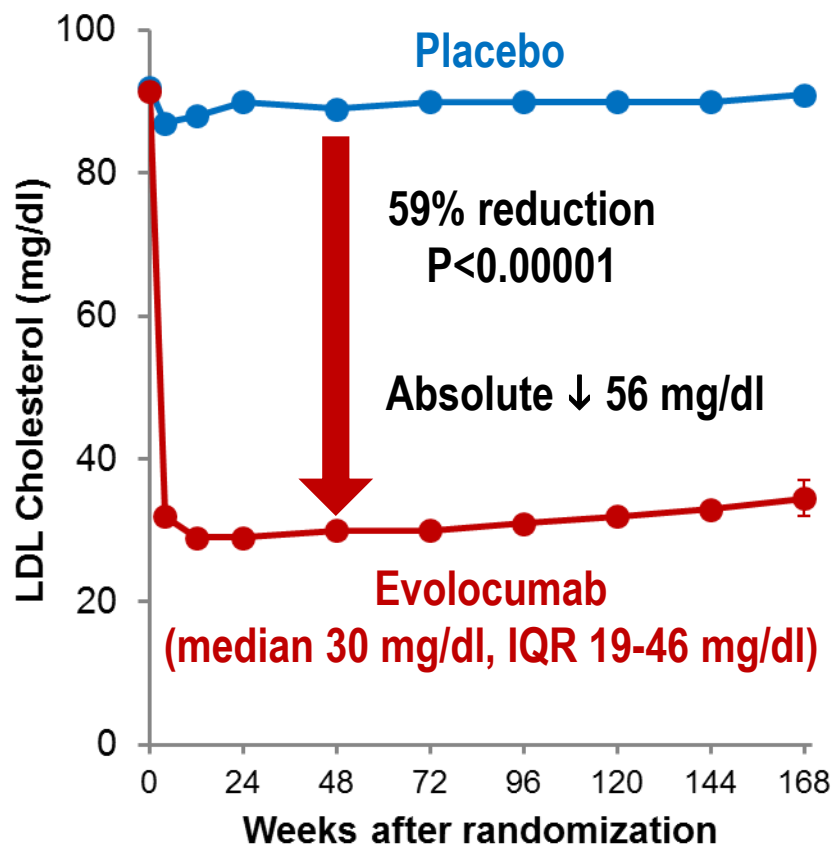
- **Targeting LDL**
 - PCSK9 Inhibitors (FOURIER, SPIRE, ODYSSEY)
 - RNA interference (RNAi) to reduce PCSK9 (ORION)
 - Decreasing LDL synthesis - Bempedoic acid
- **Targeting HDL**
 - CETP inhibitors
 - Epigenetics - BET on MACE program
 - Apo-A1 infusion – AEGIS program
- **Targeting triglycerides**
 - REDUCE-IT
 - PROMINENT
- **New - Targeting ANGPTL3 (inh of lipoprotein lipase)**

IMPROVE-IT - Proves again the LDL Hypothesis



CTT Collaboration.
Lancet 2005; 366:1267-78;
Lancet 2010;376:1670-81.

- ↓ LDL-C by 59% to a median of 30 mg/dL
- ↓ CV outcomes in patients on statin
- Safe and well-tolerated

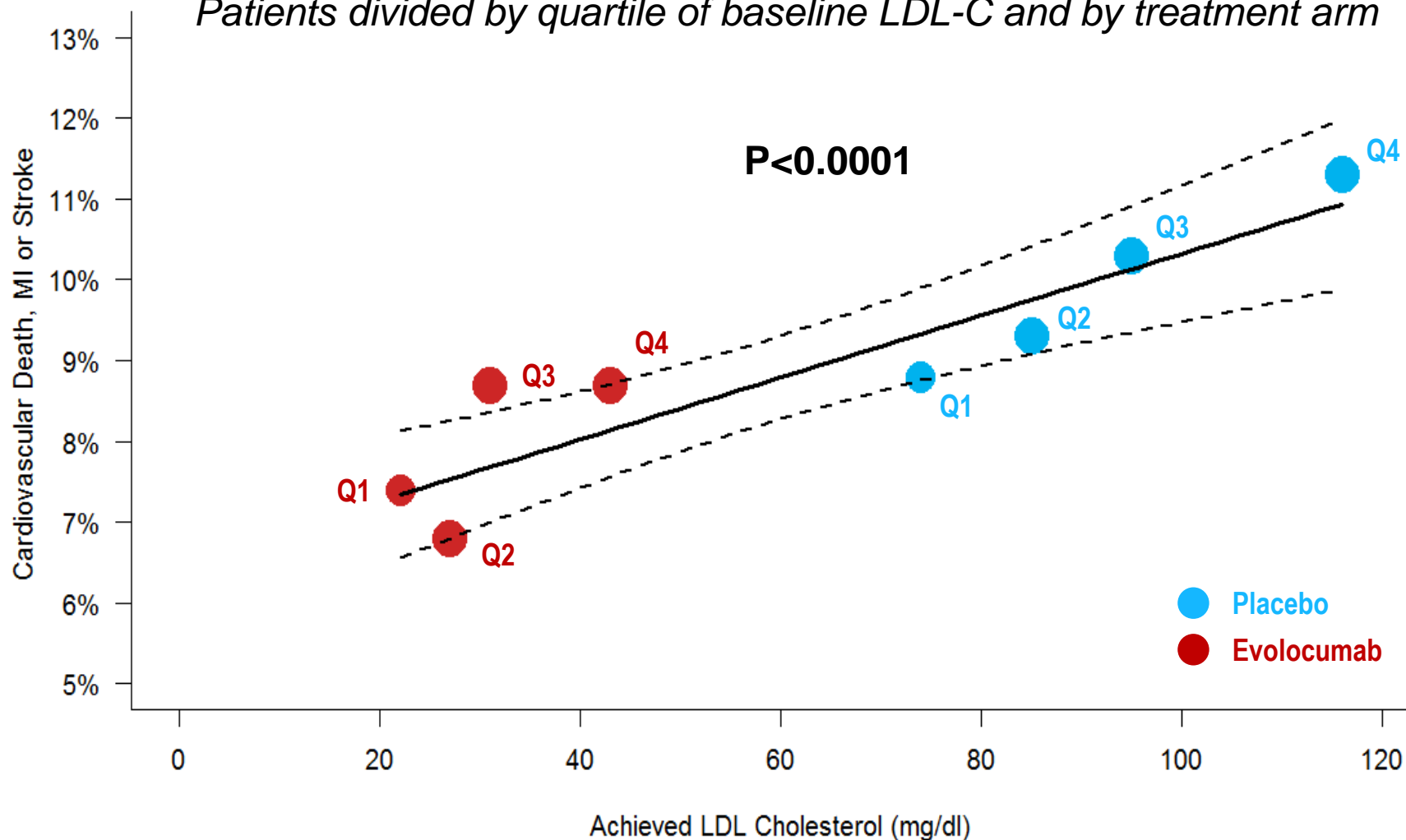




Lower LDL-C Is Better



Patients divided by quartile of baseline LDL-C and by treatment arm



From: **Effect of the PCSK9 Inhibitor Evolocumab on Total Cardiovascular Events: A Prespecified Analysis From the FOURIER Trial**

JAMA Cardiol. Published online May 22, 2019. doi:10.1001/jamacardio.2019.0886

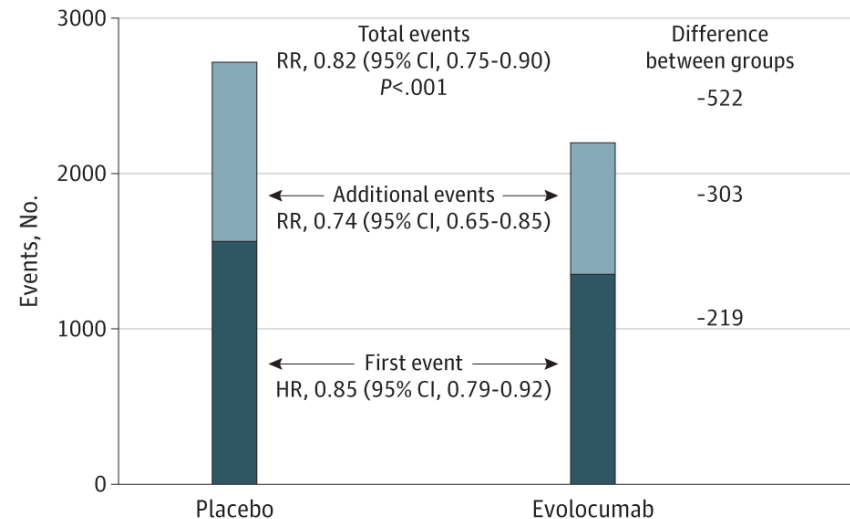


Figure Legend:

First, Additional, and Total Primary End Point Events During Follow-up by Randomization Group The first occurrence of the primary end point was significantly reduced in the evolocumab group compared with the placebo group (hazard ratio [HR], 0.85; 95% CI, 0.79-0.92; $P < .001$), as were additional events (incidence rate ratio [RR], 0.74; 95% CI, 0.65-0.85) and total events (RR, 0.82; 95% CI, 0.75-0.90; $P < .001$).

From: **Effect of the PCSK9 Inhibitor Evolocumab on Total Cardiovascular Events in Patients With Cardiovascular Disease: A Prespecified Analysis From the FOURIER Trial**

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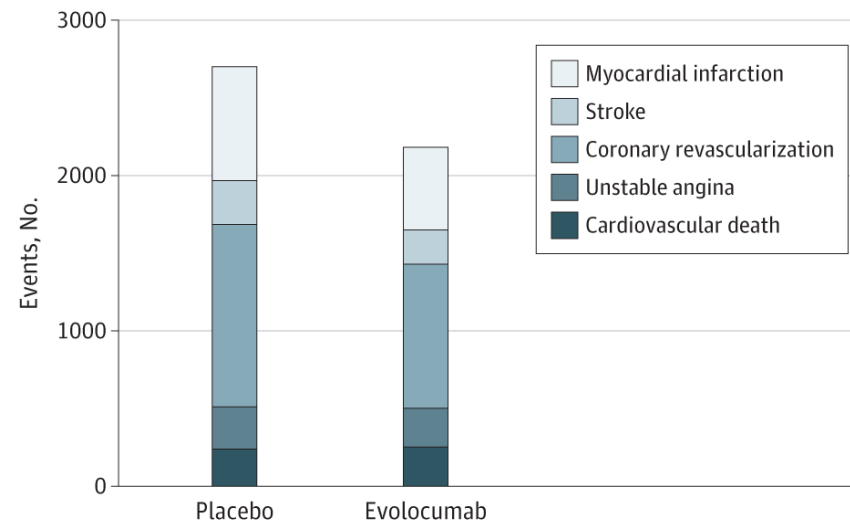


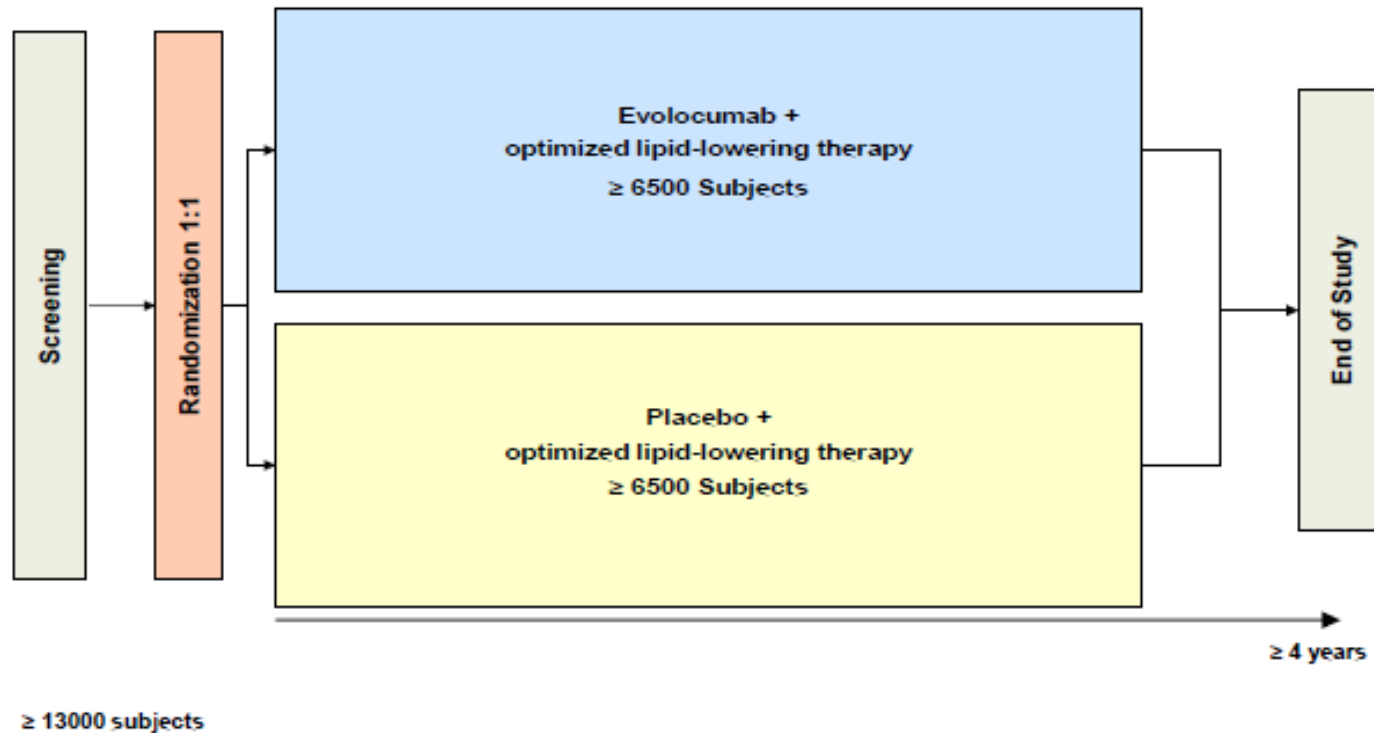
Figure Legend:

Total Events During Follow-up by Randomization Group for Components of the Primary End Point Total events were significantly reduced with evolocumab vs placebo for the component of myocardial infarction (incidence rate ratio [RR], 0.74; 95% CI, 0.65-0.84; $P < .001$) and stroke (RR, 0.77; 95% CI, 0.64-0.93; $P = .007$) and coronary revascularizations (RR, 0.78; 95% CI, 0.71-0.87; $P < .001$). There was no difference between treatment groups in total hospitalization for unstable angina events or in cardiovascular deaths.

Date of download: 5/23/2019

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VESALIUS: Effect of Evolocumab in Pts without Previous MI or Stroke



ORION-1

Inclisiran inhibits PCSK9 synthesis by RNA interference

Planned interim analysis of a multi-center randomized controlled dose-finding trial

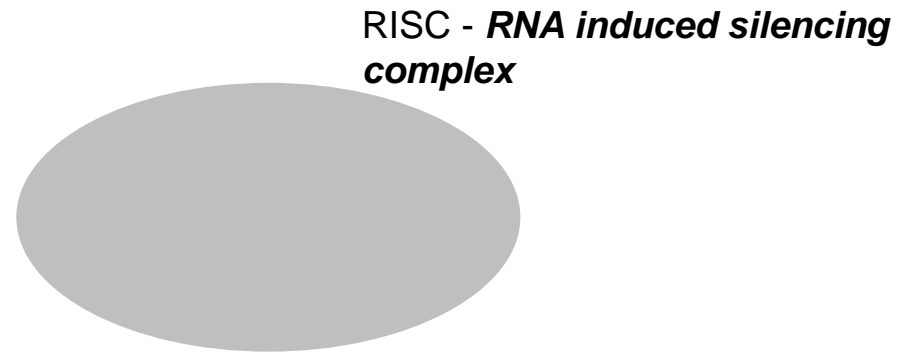
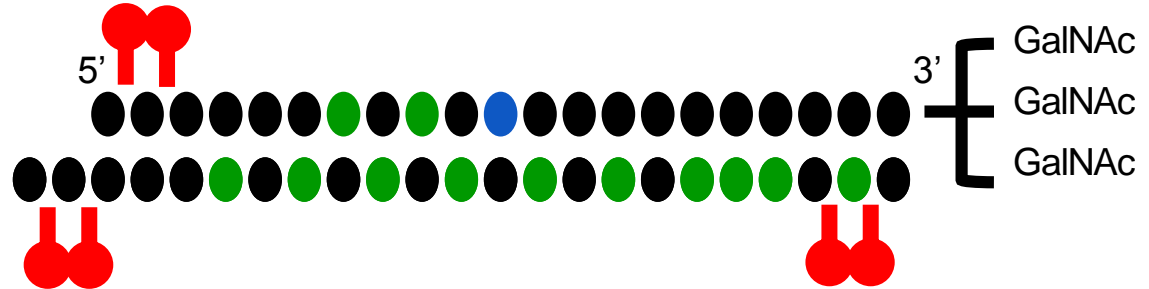
Kausik K Ray, Ulf Landmesser, Lawrence A Leiter, David Kallend, Peter Wijngaard
Robert Dufour, Timothy Hall, Mahir Karakas, Traci Turner, Frank LJ Visseren,
R Scott Wright, and John JP Kastelein

On behalf of the ORION-1 investigators

PCSK9 synthesis inhibition via RNA interference

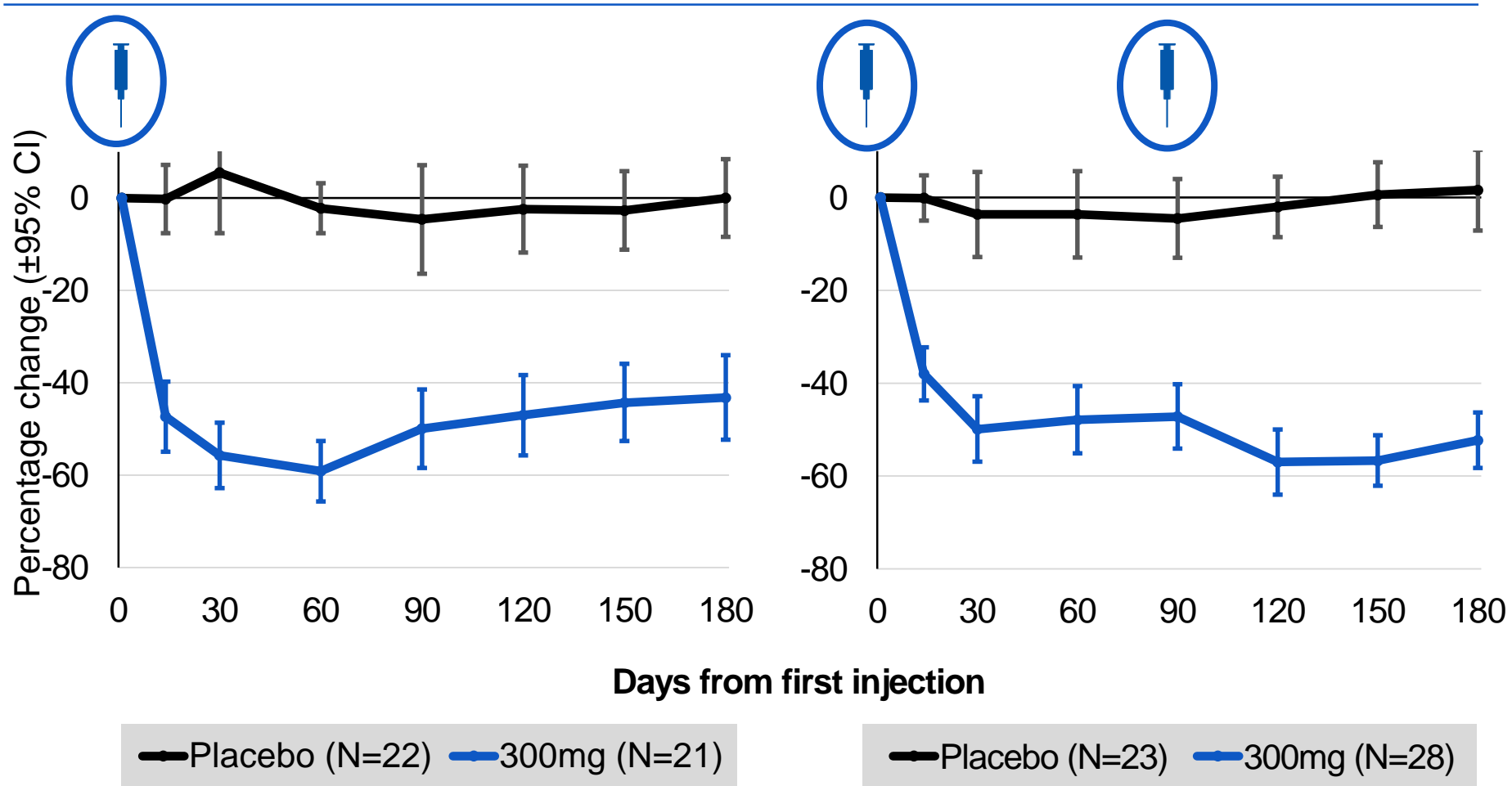
Inclisiran harnesses a natural catalytic process

- Synthetic double strand 21-23mer **oligonucleotide**
- 3x GalNAc at sense 3' end enables **hepatic-specific uptake** via ASGP receptor
- Chemically modified to prevent RNase degradation
- Dicer separates antisense strand – and incorporates it into RISC
- **RISC degrades PCSK9 mRNA catalytically to halt PCSK9 protein synthesis in the liver**



One dose and two doses of inclisiran up to day 180

Efficacy of 300 mg versus placebo on LDL-C



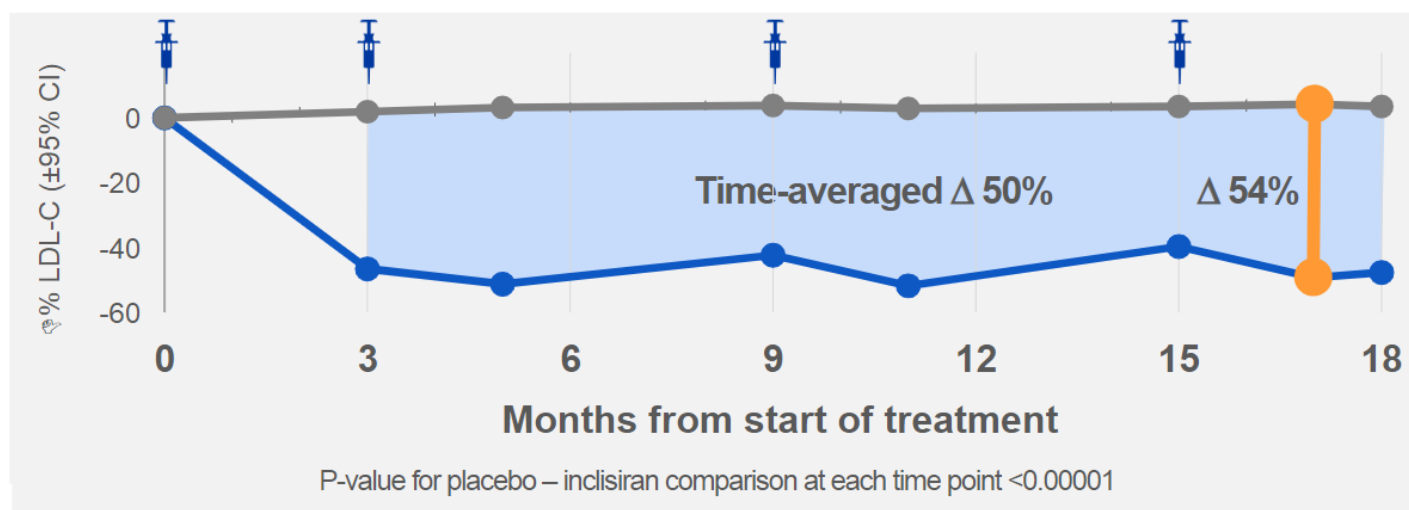
Available data as of 25 Oct 2016

ORION-11: Efficacy of Inclisiran for Lowering LDL in pts with ASCVD/Risk

ORION-11: Efficacy Durable, potent and consistent effect over 18 months



Percent change in LDL-C over time – observed values ITT patients



1. All 95% confidence intervals are less than $\pm 2\%$ and therefore are not visible outside data points

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ORION-11 ESC 2019 (Late Breaking Clinical Trial presentation) September 2nd 2019

Ray, ESC, Paris, Aug 2019

Silencing Novel Target Genes: A New Strategy for Lipid Lowering

Advantages of siRNAs

- same molecule can destroy multiple copies of the RNA in a way that provides substantial longevity in terms of duration of effect
- can be targeted directly to the liver

New gene targets – proteins that inhibit the lipoprotein lipase pathway and triglyceride metabolism

apolipoprotein C-III (APOC3)

angiopoietin-like 3 (ANGPTL3)

The siRNA molecules targeting these genes are both in development by Arrowhead Pharmaceuticals. ARO-APOC3 is being developed as a potential treatment for patients with severe hypertriglyceridemia and familial chylomicronemia syndrome, and ARO-ANG3 is being developed for the treatment of dyslipidemias such as familial hypercholesterolemia and other metabolic diseases.

Anti-PCSK9 Fusion Protein

[News](#) > [Medscape Medical News](#) > [Conference News](#) > [EAS 2019](#)

Novel Anti-PCSK9 Fusion Protein Slashes LDL-C Levels

Liam Davenport

June 03, 2019



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MAASTRICHT, The Netherlands — A novel antiprotein convertase subtilisin/kexin type 9 (PCSK9) recombinant fusion protein that offers a more convenient dosing regimen than anti-PCSK9 monoclonal antibodies substantially decreases low-density-lipoprotein (LDL)-cholesterol levels on patients already taking maximally tolerated statins, results of a phase 2 trial show.

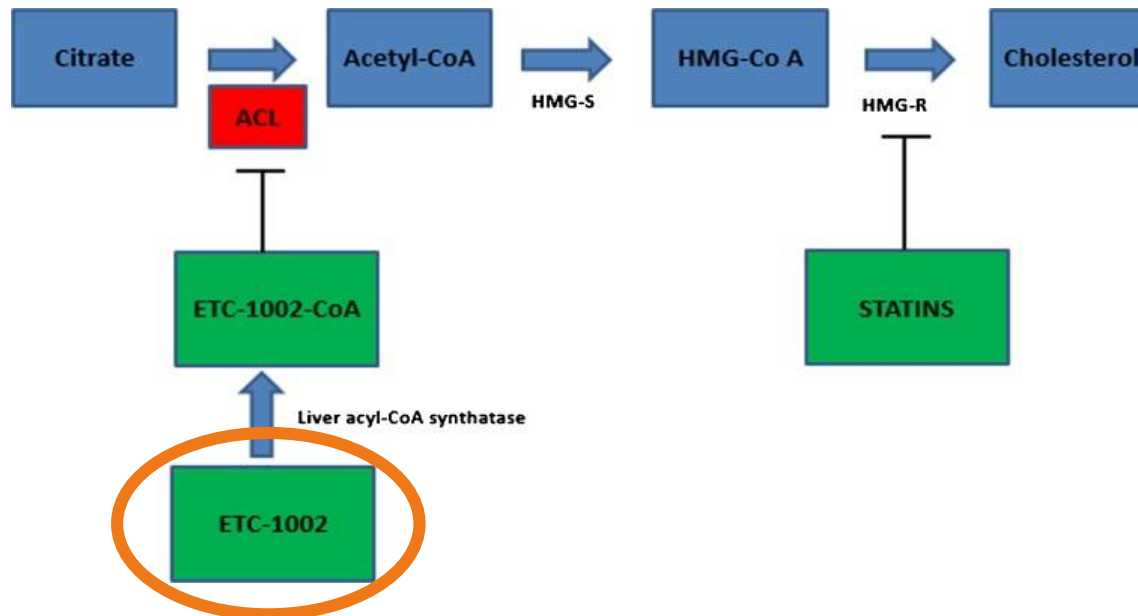
LIB003 combines a PCSK9-binding domain with human serum [albumin](#) in a recombinant fusion therapeutic agent derived from a mammalian cell line.

The binding domain blocks the interaction between PCSK9 and the LDL-cholesterol receptor, and the albumin linkage increases the half-life to 12 to 15 days, allowing low-volume injections to be given every 4 weeks.

Following on from promising phase 1 data, the team conducted a [phase 2 study](#) in which 81 patients were randomized to 150 mg, 300 mg, or 350 mg of LIB003 or placebo for 12 weeks.

Evan Stein, MD, founder, LIB Therapeutics, and Metabolic & [Atherosclerosis](#) Research Center, Cincinnati, presented the results here at the [European Atherosclerosis Society 2019 Congress](#). LIB Therapeutics funded the study.

Targeting LDL: Novel Suppression of Cholesterol Synthesis - Bempedoic acid

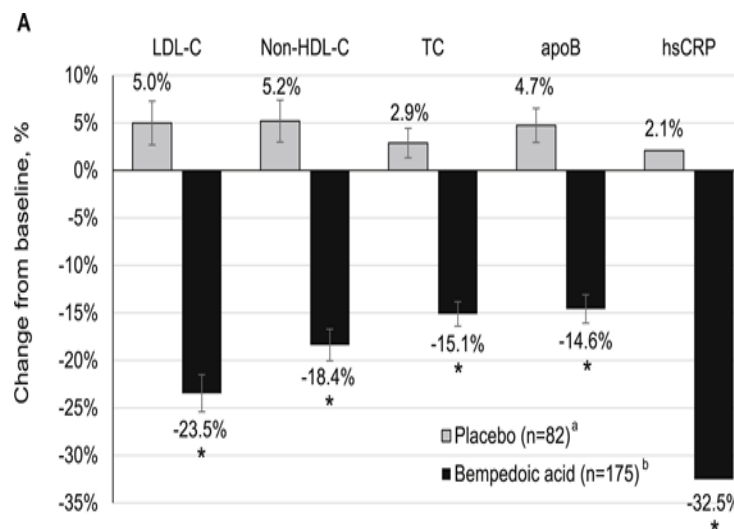
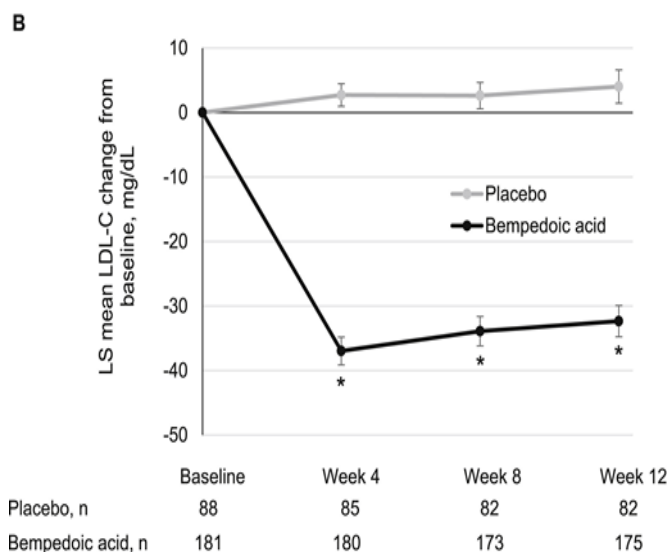


- **Bempedoic acid** - directly inhibits ATP citrate lyase (ACL), a key enzyme that supplies substrate for cholesterol and fatty acid synthesis; upregulates LDL receptors
- **Esperion therapeutics** - 12,604 patients, 1000 sites, approximately 30 countries

Efficacy and safety of bempedoic acid added to ezetimibe in statin-intolerant patients with hypercholesterolemia: A randomized, placebo-controlled study



Christie M. Ballantyne ^{a, *}, Maciej Banach ^b, G.B. John Mancini ^c, Norman E. Lepor ^{d, e}, Jeffrey C. Hanselman ^f, Xin Zhao ^f, Lawrence A. Leiter ^g



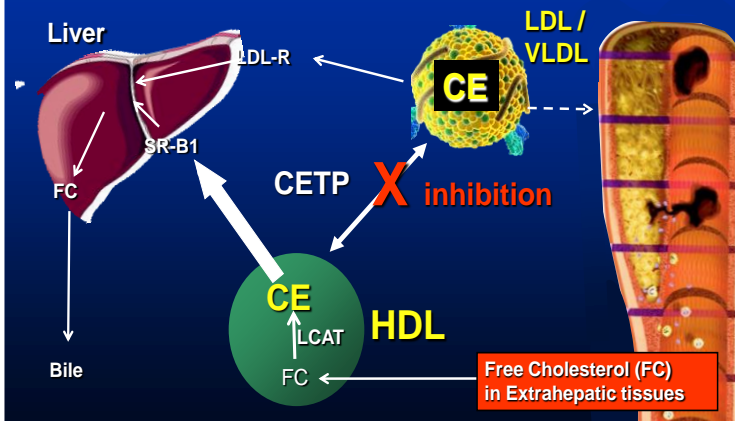
Targets

- **Targeting LDL**
 - Role of PCSK9 Inhibitors (FOURIER, SPIRE, ODYSSEY)
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- **Targeting HDL**
 - CETP inhibitors
 - Epigenetics - BET on MACE program
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- **Targeting triglycerides**
 - REDUCE-IT
 - PROMINENT
- **Other - Targeting ANGPTL3 (inh of lipoprotein lipase)**

Cholesteryl Ester Transfer Protein (CETP) Inhibition

CETP inhibition

Cholesteryl ester transfer protein (CETP) is a plasma protein that catalyzes transfer of cholesteryl ester (CE) from HDL to apoB-containing lipoproteins (VLDL and LDL-C) in exchange for triglycerides.



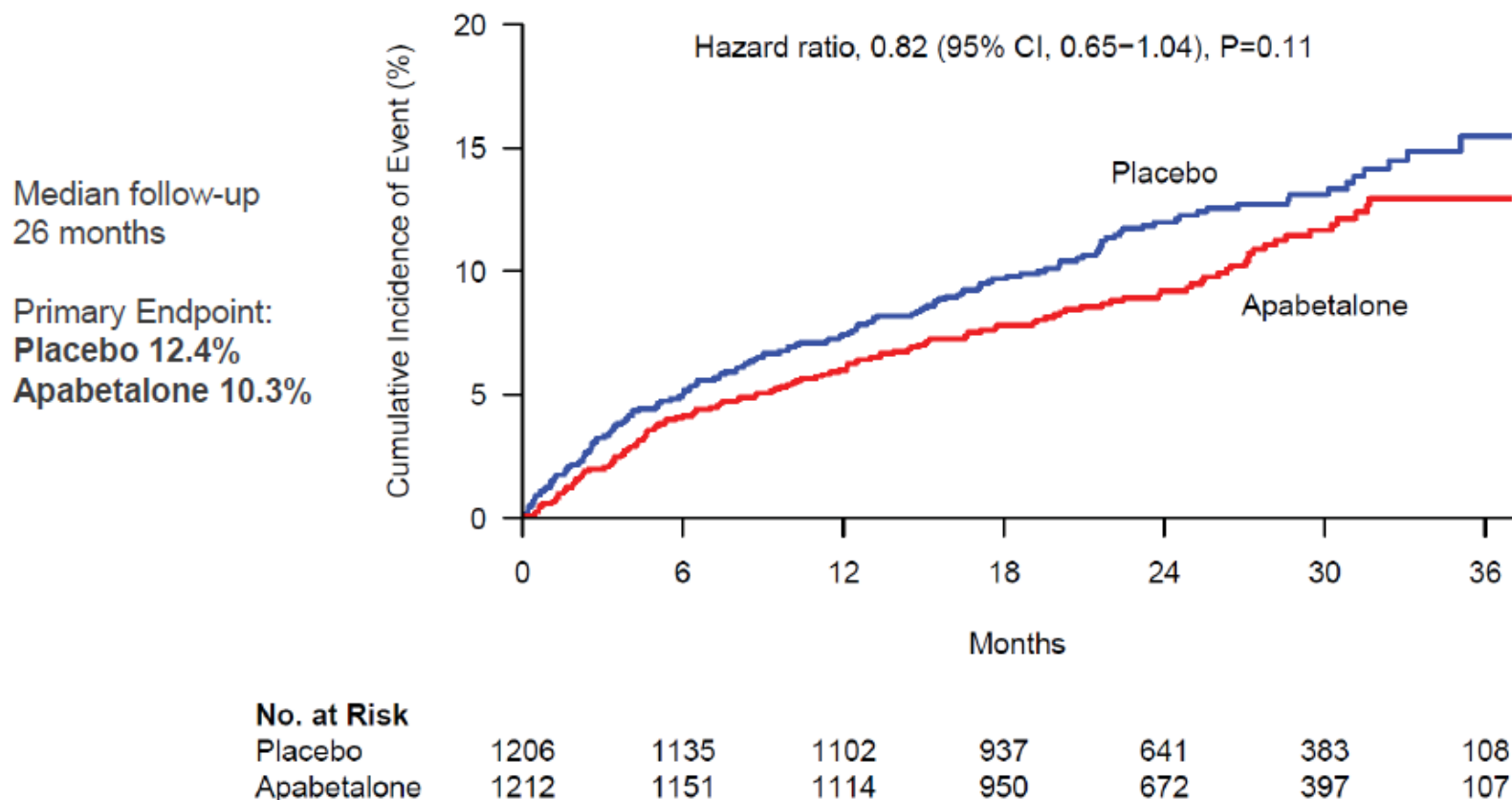
Drug	HDL	LDL	Clinical Outcomes
Torcetrapib (60 mg/d)	+61%	-24%	↑ Mortality
Dalcetrapib (600 mg/d)	+25%	-4%	∅ Benefit
Anacetrapib (100 mg/d)	+140%	~ -30%	REVEAL +
Evacetrapib (130 mg/d)	? +130%	? -30%	Abandoned

BET on MACE Trial - Epigenetics

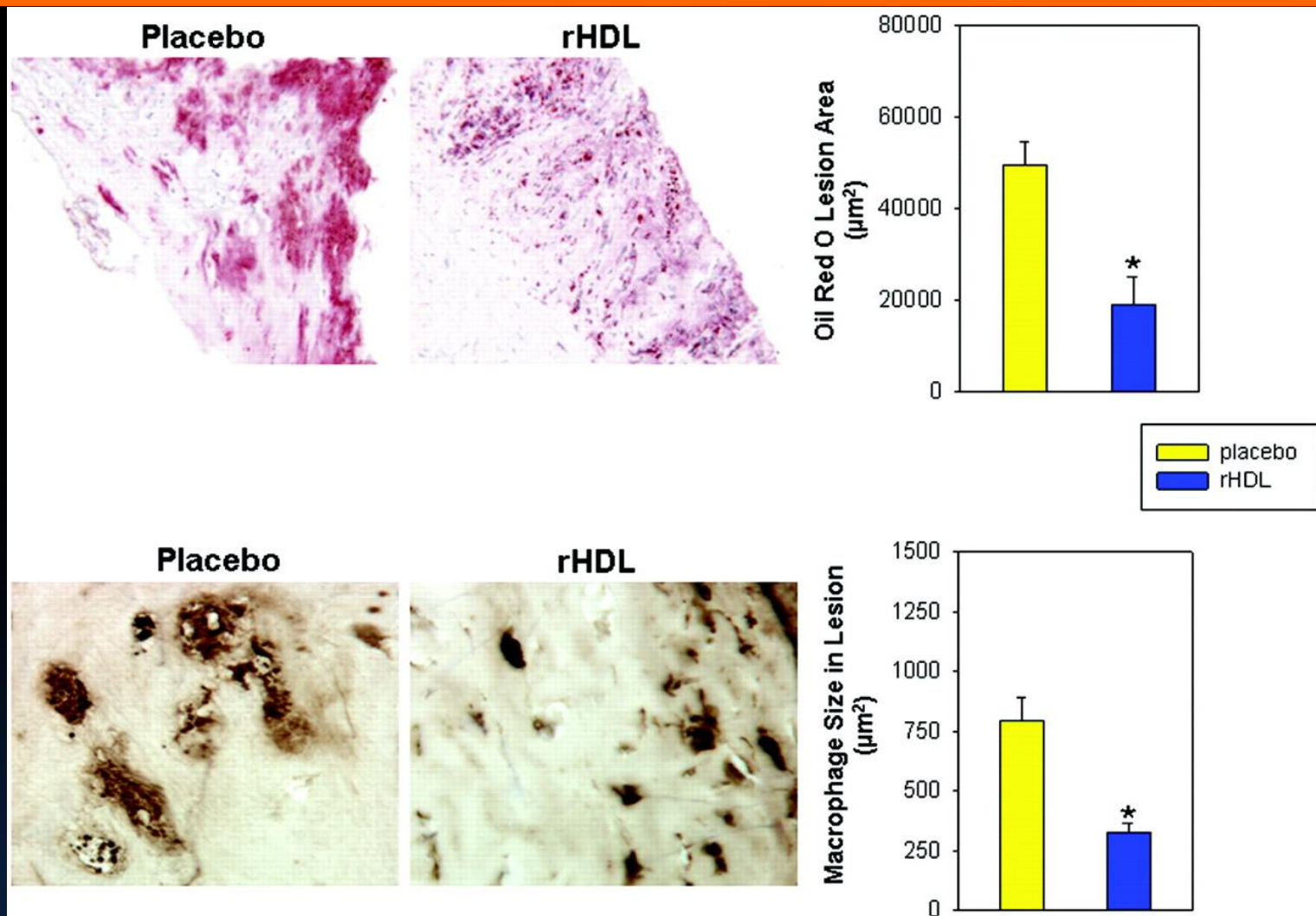
- ▶ **RVX-208 (Apabetalone)** is a first-in-class, orally active, small-molecule stimulator of apolipoprotein (APO)A1 gene expression
- ▶ Bromodomain and Extra-Terminal (BET) Inhibitor
- ▶ RVX-208 increases total HDL as well as the alpha- and pre-beta HDL fractions

BET on MACE – Phase 3 Outcome Study

Primary Efficacy End Point: CV Death, Non-Fatal MI and Stroke (N=274)



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AEGIS-II: Study Design

A Phase 3, Multicenter, Double-blind, Randomized, Placebo-controlled, Parallel-group Study



Interim analysis for efficacy at 70% of the targeted MACE

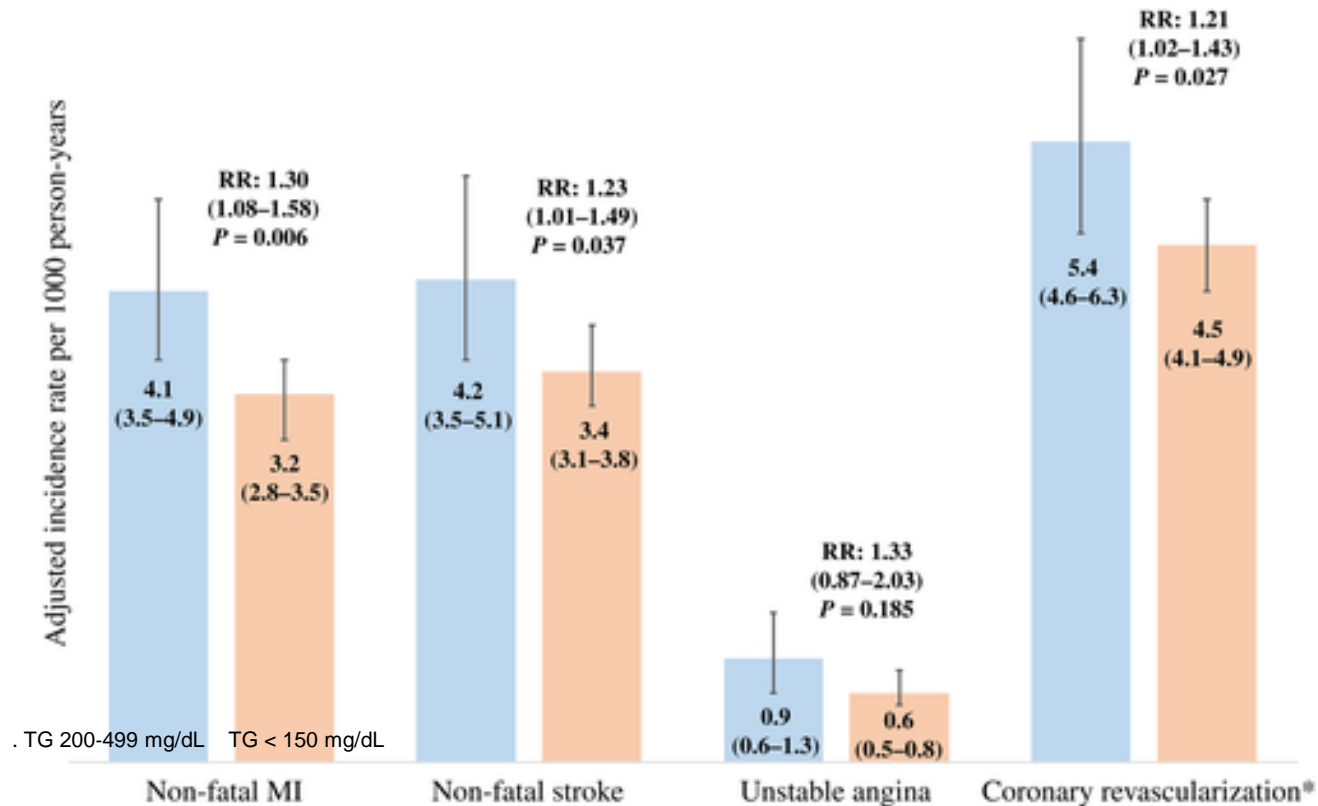
Interim analyses for futility will be conducted at 30 & 50% of targeted MACE

- **Enriched Study Population:** Multi-vessel disease and one of the following: ≥65 years of age, previous MI, peripheral artery disease, or diabetes mellitus
- **Primary endpoint:** Time-to-first occurrence of CVD, MI or stroke through day 90
- **Follow up:** All subjects followed for at least 365 days

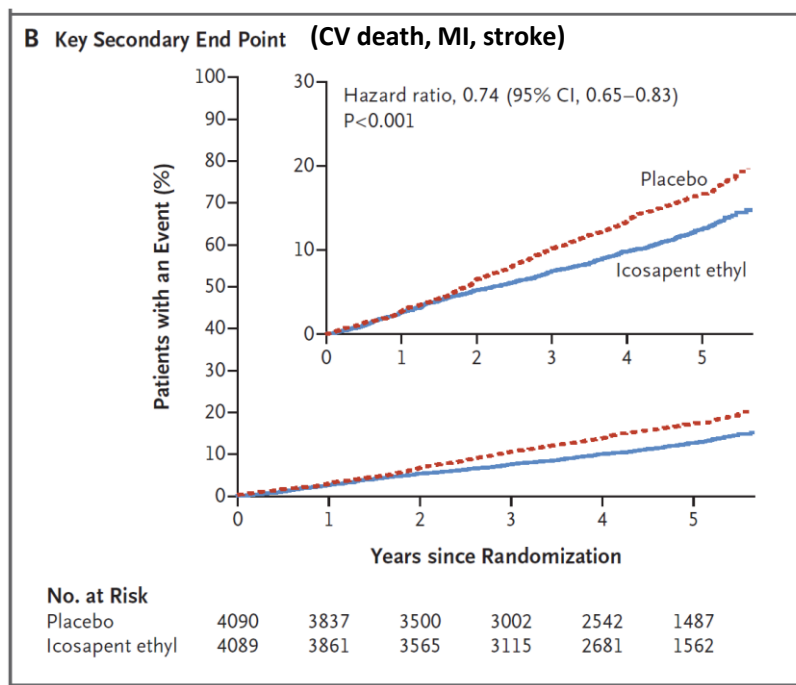
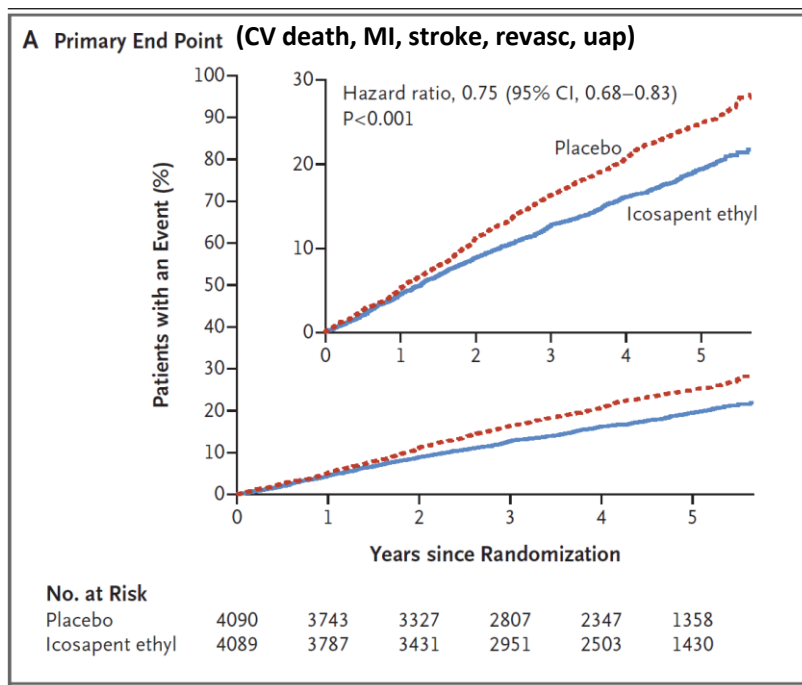
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- **Targeting triglycerides**
 - REDUCE-IT
 - STRENGTH
 - PROMINENT
- **Other - Targeting ANGPTL3 (inh of lipoprotein lipase)**

Increased residual CV risk in patients with Diabetes and High (200-499mg%) vs Normal (<150mg%) TG despite statin-controlled LDL cholesterol



REDUCE IT: CV Risk Reduction with Icosapent Ethyl (Vascepa) For Hypertriglyceridemia (N=8179)



Bhatt et al, NEJM 2018

- Targeted pts with high TG (mean 216; range 150-499mg%)
- High dose (2G bid) purified product
- 71% sec prevention, 40% DM, Baseline LDL-C 75 mg%

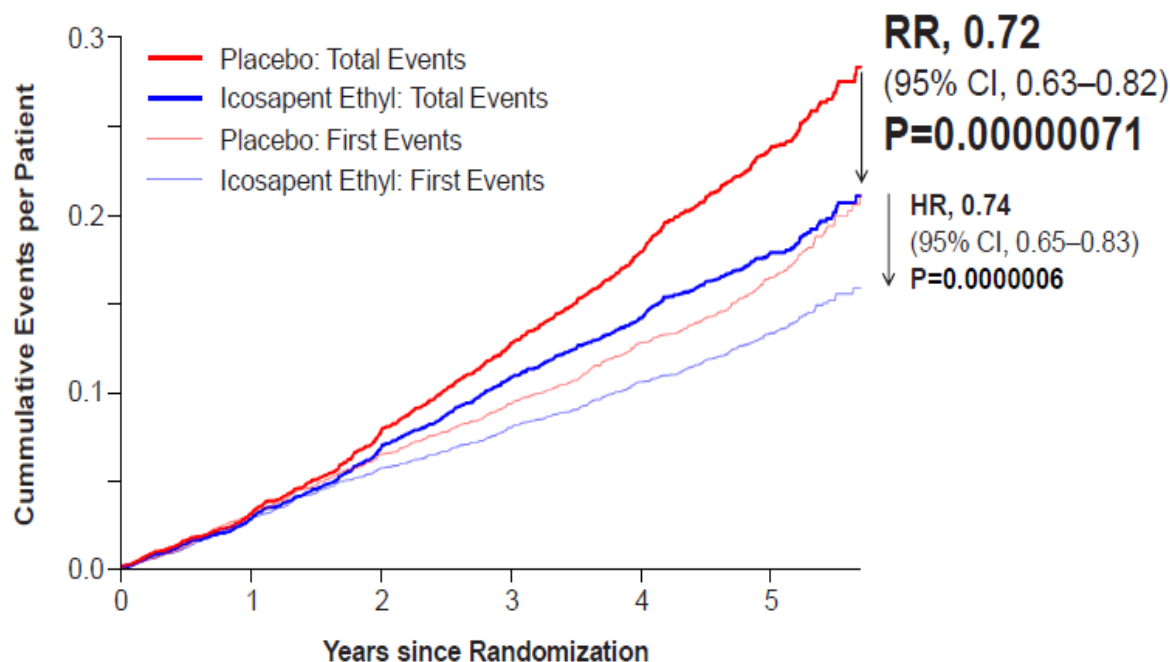
REDUCE-IT

Total (First and Subsequent) Events

Key Secondary: CV Death, MI, Stroke



Key Secondary Composite Endpoint



ACC 2019

STRENGTH (Statin Residual Risk Reduction With Epanova in High CV Risk Patients with Hypertriglyceridemia)

- Double-blind, placebo-controlled (corn oil), parallel group design using Epanova (AZ; n-3 fatty acid)
- 13,000 patients with hypertriglyceridemia, low HDL and high risk for CVD
- Randomized 1:1 to corn oil + statin or Epanova + statin, once daily
- Approximately 3-5 years follow up - MACE outcomes driven trial

Results expected – 2020

PROMINENT

- Test Product: K-877 (pemafibrate) 0.2 mg
- Dose: One tablet twice daily
- Mode of Administration: Oral
- Mechanism of action: new generation selective PPAR- α modulator (SPPARM- α)
- Storage: Room temperature

Benefit-Risk Profile

*greater potency and **PPAR- α** selectivity than fenofibrate*

greater TG-lowering efficacy

improved safety and tolerability

minimal inhibitory effects on major drug-metabolizing enzymes and transporters

no impact of renal function on maximum total exposure

no evidence of QTc prolongation

less frequent elevation of liver enzymes than fenofibrate

Triglycerides: PROMINENT Study (N=10,000)

Patient population

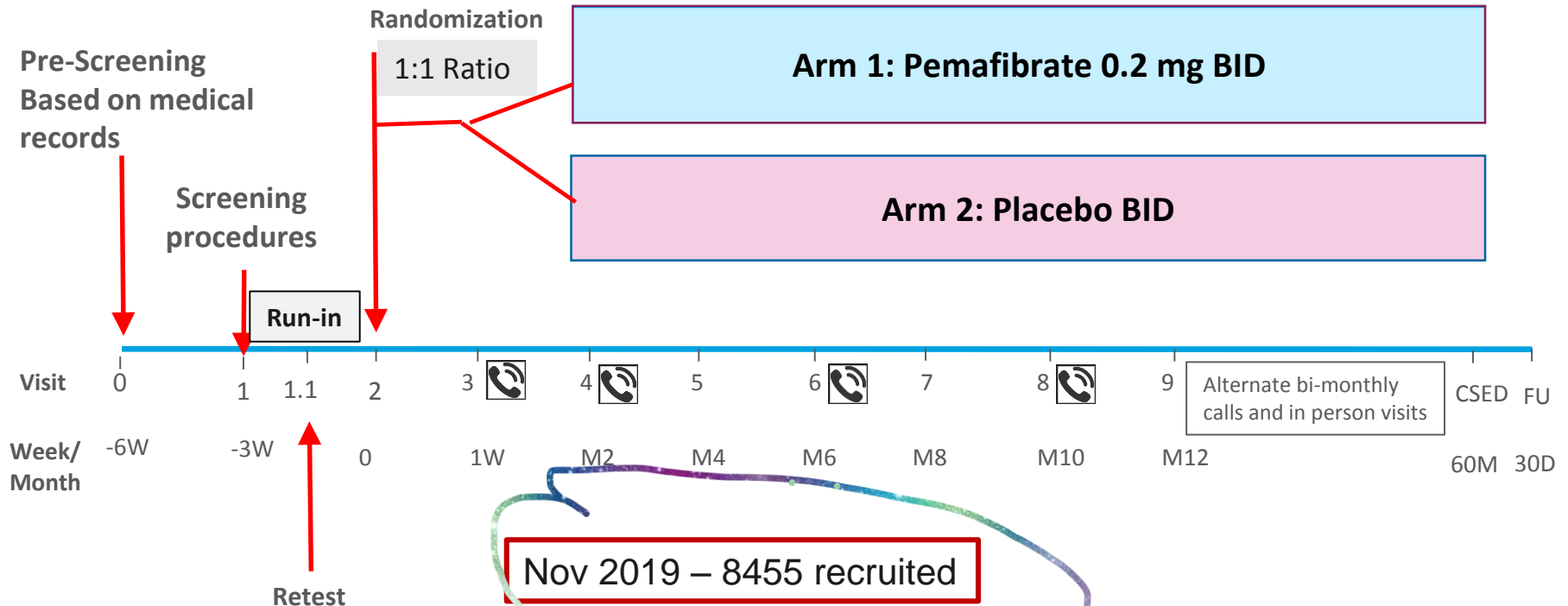
- **Adults with T2D with moderate hypertriglyceridemia and low HDL**
- Stable background therapy with statins (or statin intolerant within LDL targets)
2/3 subjects: with documented CVD
1/3 subjects: primary prevention (M \geq 50y or F \geq 55y)

Key randomization criteria

- A1c \leq 9.5%
- Fasting TG \geq 200<500 mg/dL
- HDL \leq 40 mg/dL

Primary endpoint: MACE+

- MI
- Ischemic Stroke
- CVD death
- Unstable angina requiring unplanned revascularization



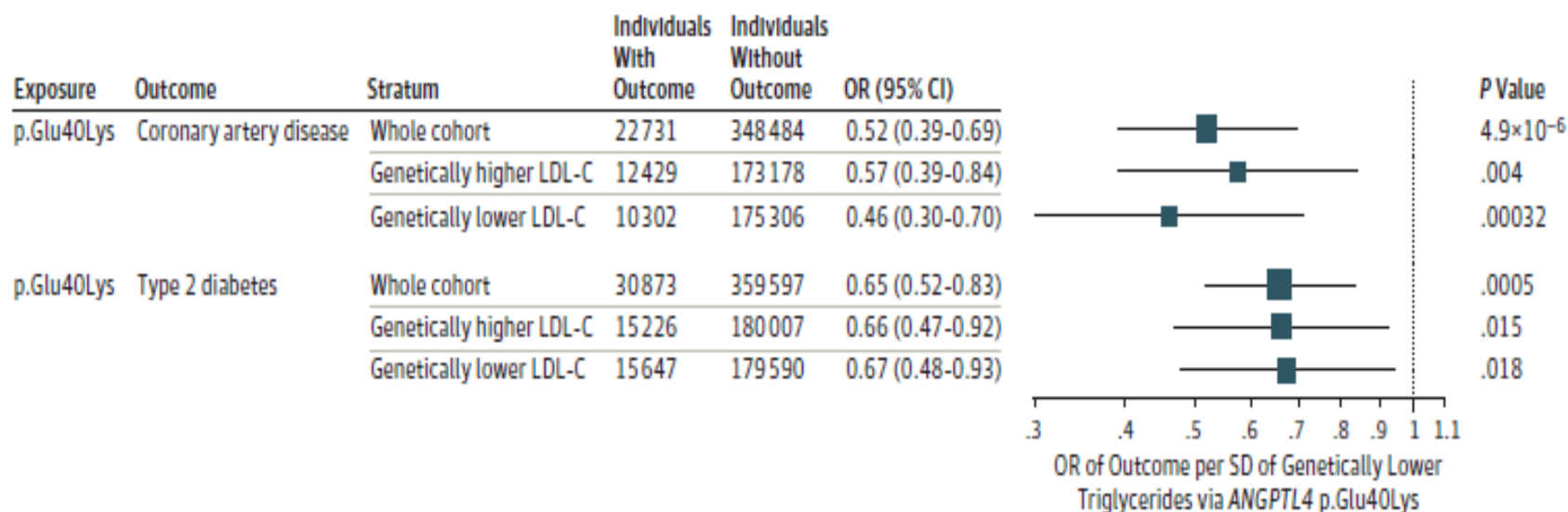
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Association of Genetically Enhanced Lipoprotein Lipase–Mediated Lipolysis and LDL Cholesterol–Lowering Alleles With Risk of CAD and Type 2 Diabetes

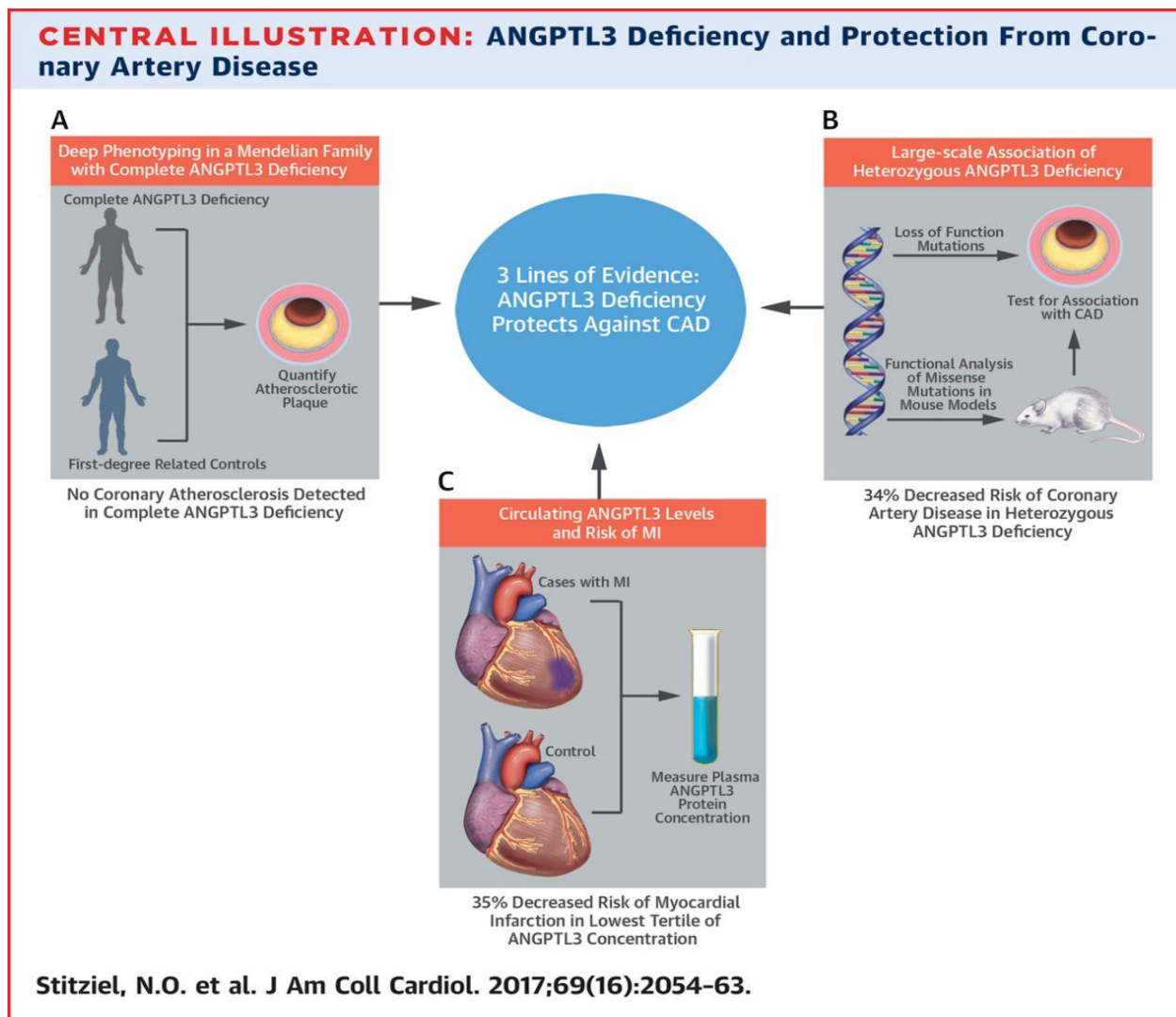
Figure 4. Associations of Loss-of-Function Alleles With Cardiometabolic Disease Outcomes in *ANGPTL4* and *ANGPTL3*

A Associations of *ANGPTL4* p.Glu40Lys loss-of-function allele with cardiometabolic disease outcomes



Lotta et al, JAMA Cardiology 2018;3(10):957-966

ANGPTL3 and Protection from CAD



Nathan O. Stitzel et al. JACC 2017;69:2054-2063

Evinacumab – “FDA Grants Breakthrough Designation”

- Evinacumab is a *monoclonal antibody to angiopoietin-like protein 3 (ANGPTL3)* - an **inhibitor of lipoprotein lipase (LPL)** (which is responsible for breakdown of triglycerides and other lipids)
- In Phase I, *evinacumab reduced TG levels by 64-73%*, far outperforming current treatments such as fish oils or fibrates which typically reduce TG by 20% to 50%
- In *Homozygous familial hypercholesterolemia (HoFH)* -
 - adding the drug to standard cholesterol treatment such as statins improved LDL-cholesterol reduction

Evinacumab – ELIPSE HoFH Trial

ANGPTL3 antibody halves LDL-c levels in HoFH patients in phase 3 trial

NEWS - AUG. 15, 2019

Positive phase 3 results of the ELIPSE HoFH trial have been announced for evinacumab, an investigational angiopoietin-like 3 (ANGPTL3) antibody, in patients with homozygous familial hypercholesterolemia (HoFH). ANGPTL3 acts as an inhibitor of lipoprotein lipase (LPL) and endothelial lipase, and appears to play a central role in lipoprotein metabolism.

On average, patients entered the trial with LDL-c levels of 255 mg/dL, despite treatment with other lipid-lowering therapies, including maximally-tolerated statins, PCSK9 inhibitors, ezetimibe, LDL apheresis and lomitapide. The trial met its primary endpoint, showing that adding evinacumab to other lipid-lowering therapies decreased LDL-c by 49% on average, compared to lipid-lowering therapies alone.

ELIPSE HoFH is an ongoing phase 3 randomized, double-blind, placebo-controlled, parallel-group trial evaluating the efficacy and safety of evinacumab 15 mg/kg administered intravenously every four weeks in 65 patients aged 12 years or older with HoFH (43 evinacumab, 22 placebo). In the evinacumab treatment group, 98% of patients were on statins, 81% were on PCSK9 inhibitors, 75% were on ezetimibe, 33% were on LDL apheresis and 26% were on lomitapide. In addition, 35% of evinacumab patients had the most severe, "null/null" form of HoFH.

The phase 3 trial was designed to assess the effect of evinacumab on LDL-c and other lipid-related endpoints. Results from the evinacumab group at week 24 included:

- 49% reduction in LDL-c from baseline, compared to placebo (47% reduction for evinacumab vs. 2% increase for placebo, $P < 0.0001$), the primary endpoint. LDL-c reductions were observed from the first assessment at week 2, and were maintained throughout the 24-week double-blind treatment period.
- 132 mg/dL absolute change in LDL-c from baseline, compared to placebo (135 mg/dL reduction