

Protective Effects of ANX007 on Central Macular Ellipsoid Zone and RPE and Association with Visual Acuity in the Phase 2 ARCHER GA Study

Glenn Jaffe, Sina Farsiu, Kevin Choy, Eleonora Lad, Karl Csaky, Jeffrey Heier, Charles Wykoff, Scott Borland, Lori Taylor, Jamie Dananberg, Ted Yednock

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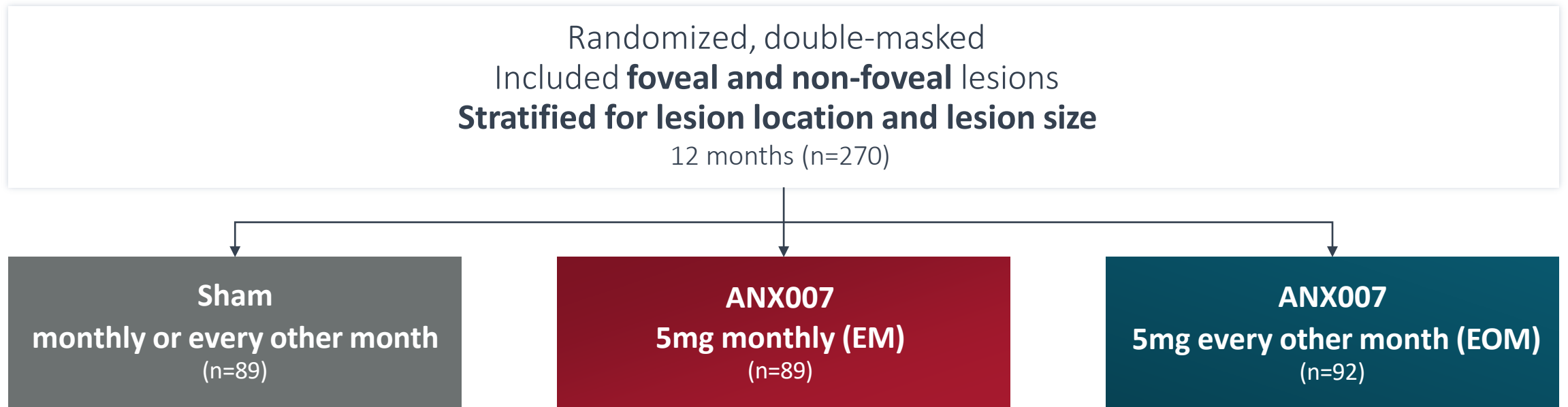
American Society of Retina Specialists

Stockholm, Sweden

Disclosures

- 4DMT Molecular Therapeutics
- Annexon
- Regeneron
- Roche/Genentech
- Boehringer Ingelheim

ARCHER: ANX007 Phase 2 Trial in GA



PRIMARY BIOMARKER ENDPOINT

Change in GA lesion area as assessed by fundus autofluorescence at Month 12

PRESPECIFIED SECONDARY FUNCTIONAL ENDPOINTS

Best Corrected Visual Acuity (BCVA)
Low Luminance Visual Acuity (LLVA) & Deficit (LLVD)

Off-treatment
(6 months)

END OF STUDY
Month 18

Key Takeaways from ARCHER Phase 2 Trial

Detailed safety and visual acuity results to be presented in Dry AMD Symposium 2 by Joel Pearlman at 1:36pm today

ANX007, an anti-C1q Fab antibody administered IVT, **protected against the loss of visual acuity** in the Phase 2 ARCHER study

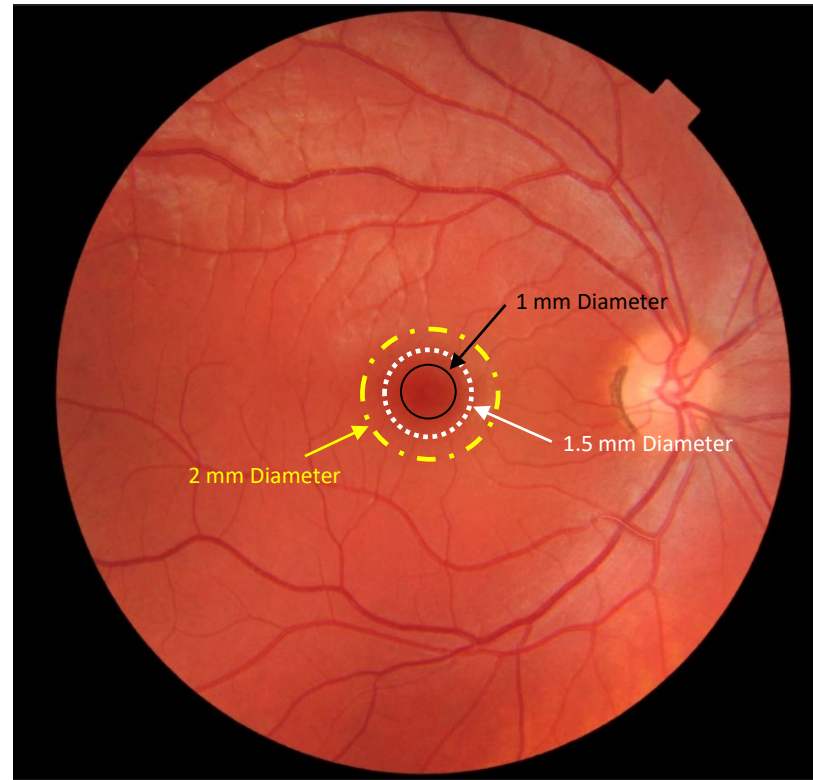
Blocking C1q for neuroprotection prevented synapse loss and protected photoreceptors from elimination; **effect most pronounced in central fovea**

ANX007 demonstrated protection from photoreceptor loss and PR/RPE foveal invasion; Findings correlate with VA loss protection, **supportive of PR synapse protection MOA**

ANX007 treatment was **generally well-tolerated**; no CNV increase; no reported cases of vasculitis

What is “Foveal Invasion”?

Encroachment by EZ or RPE (GA) loss into foveal zones



Dimensions are approximate

Methods

Study Images

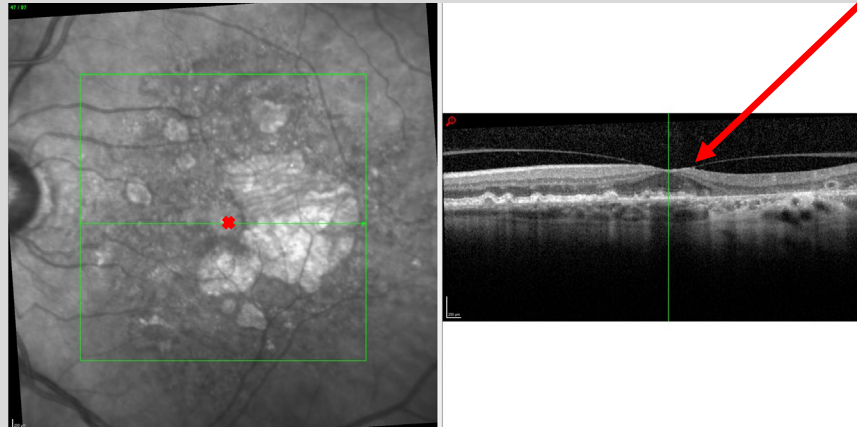
- ARCHER Heidelberg study images
 - OCT
 - 97-line HR volume scans
 - FAF/NIR images

Methods

GA (RPE) Foveal Invasion

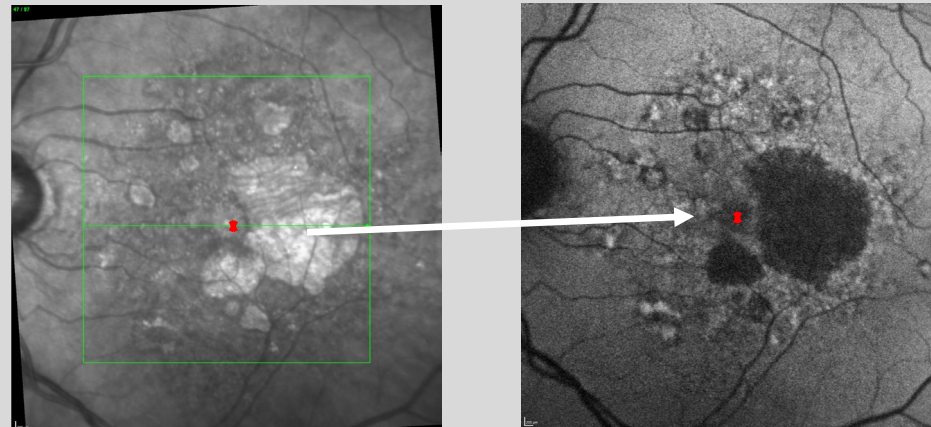
- GA (RPE loss) measured on FAF (OCT/NIR)

Centerpoint Identified on OCT and IR Image

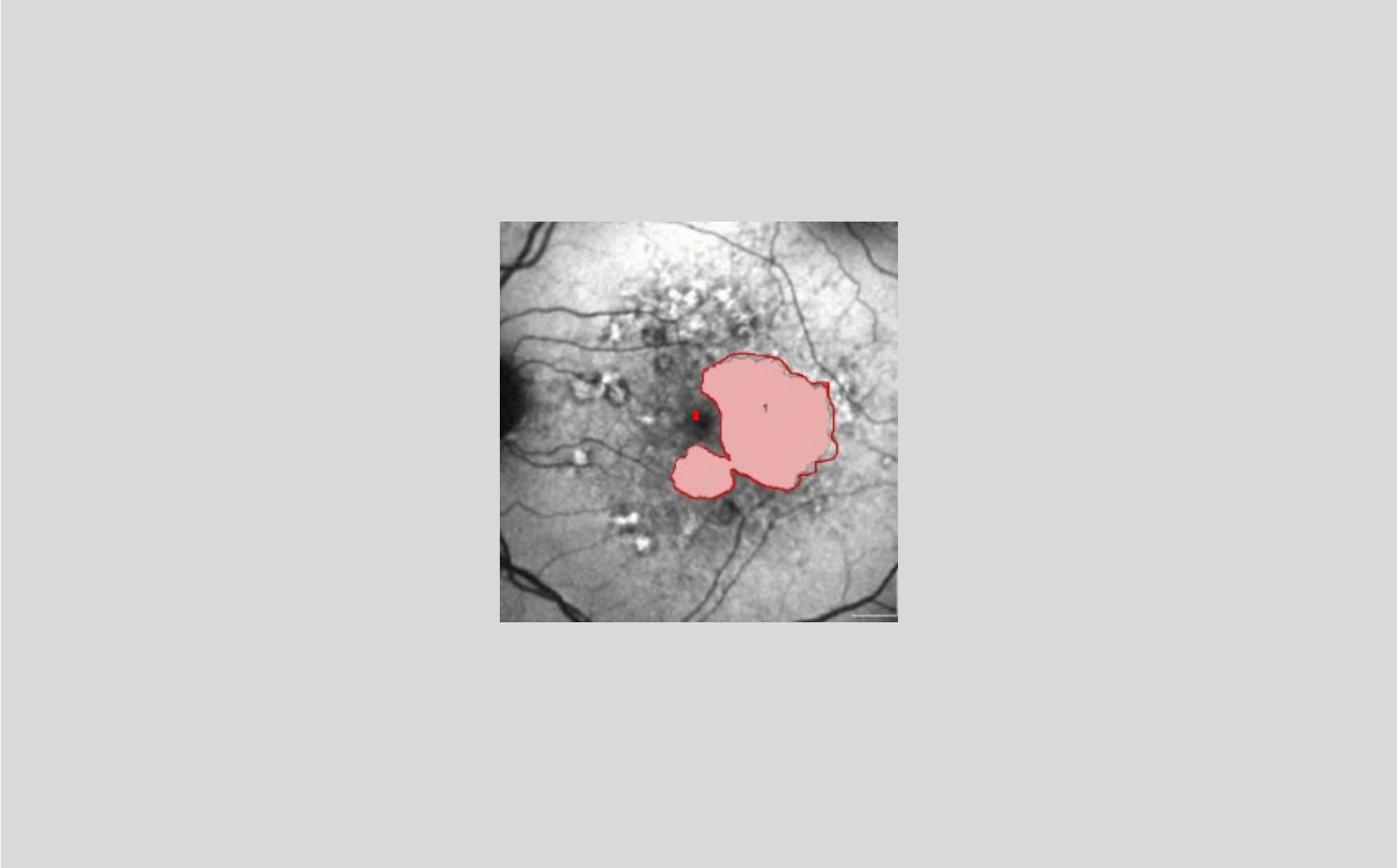


Vertical green line on OCT B-scan (right image) is seen as short hash mark on IR image (red X)

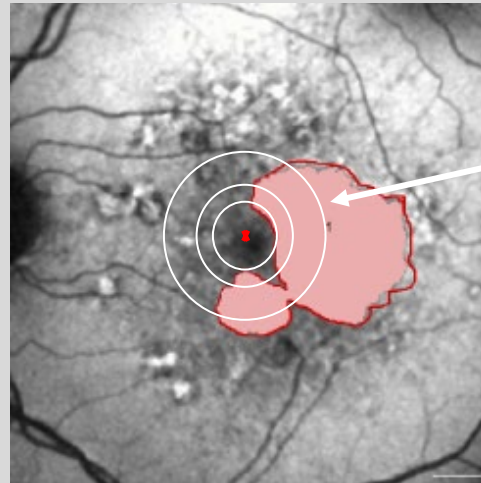
IR Image Registered to FAF Image



GA Region Overlaid on FAF Image with Marked Centerpoint



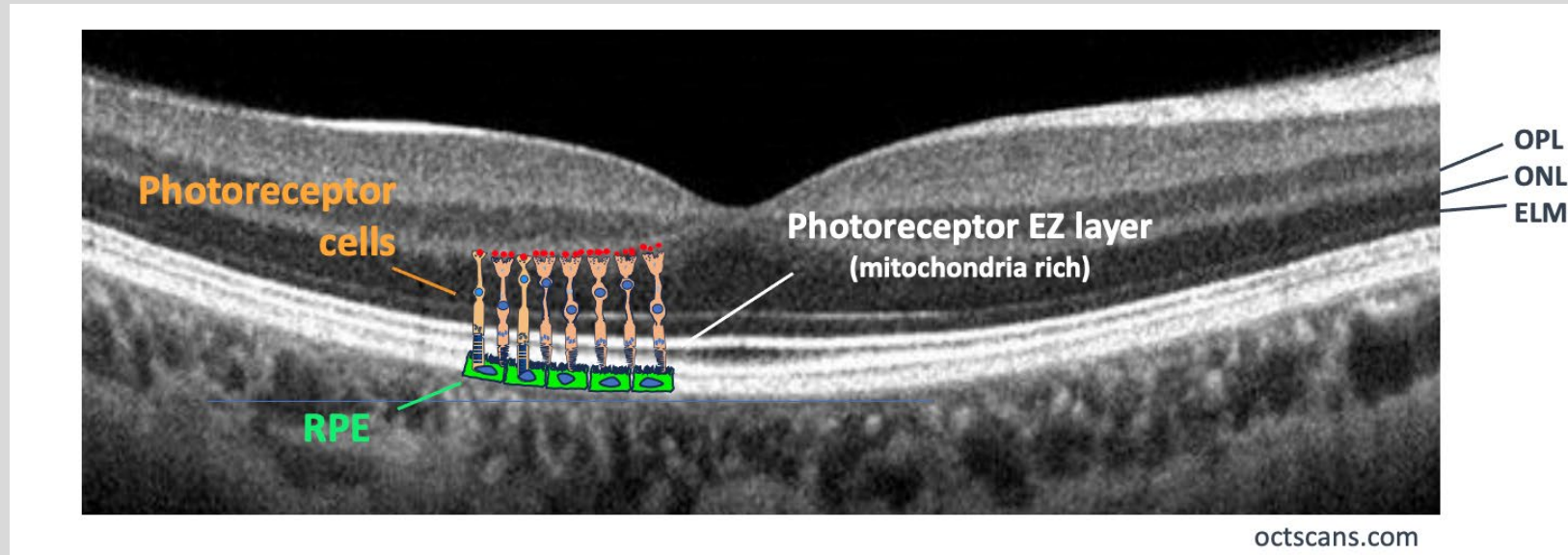
Invasion into Concentric Circles



Foveal invasion

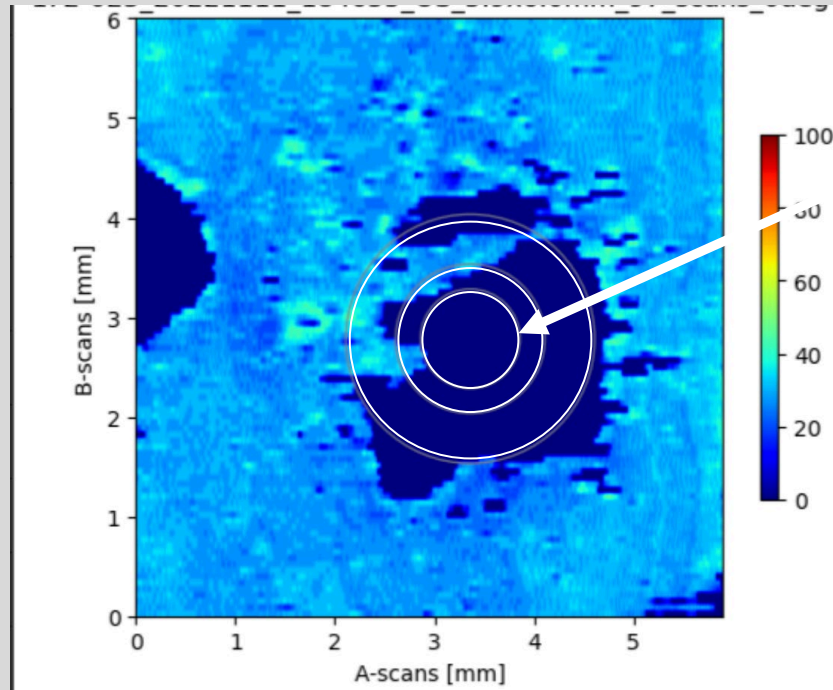
Methods

Foveal Invasion: Total EZ loss (EZ = 0 μm)



En Face Map Total EZ loss (EZ = 0 μm)

In-house AI Algorithm

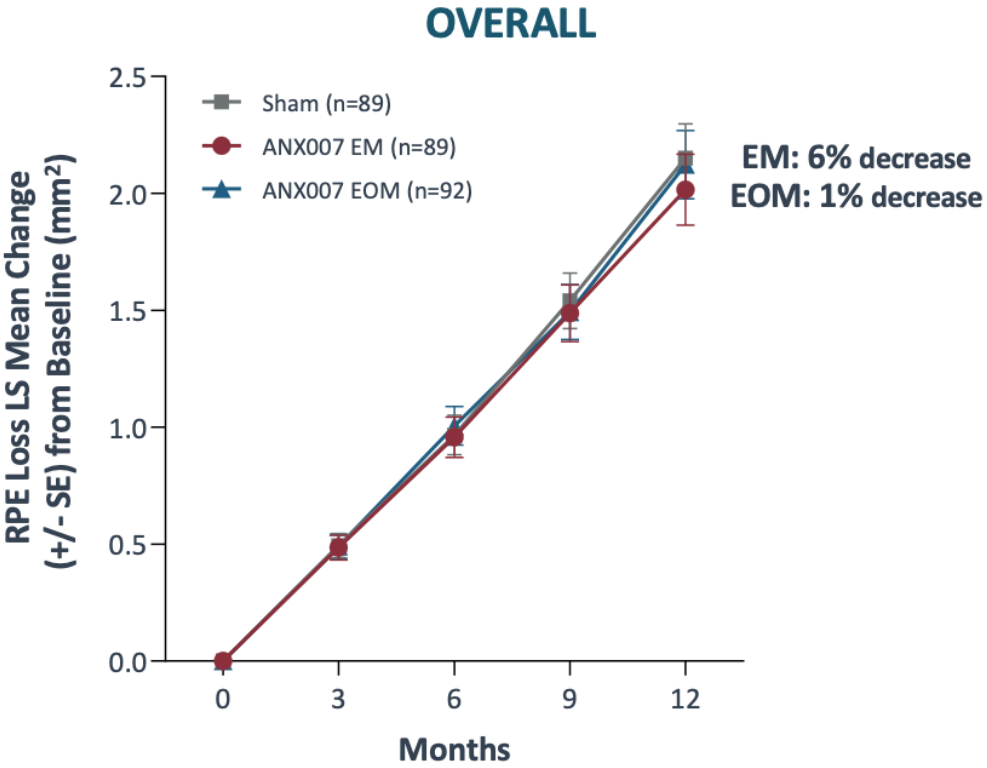


Foveal invasion

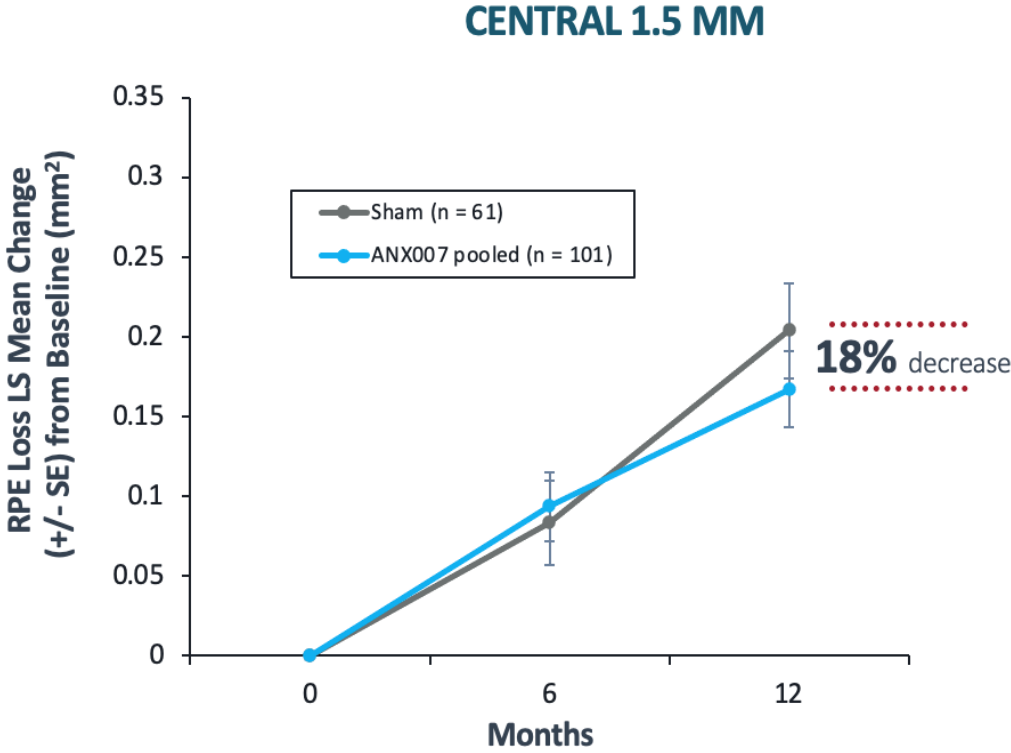
Study Results

GA (RPE) Foveal Invasion

ANX007 Reduced RPE Loss in Foveal Center (1.5 mm) Through 12 Months



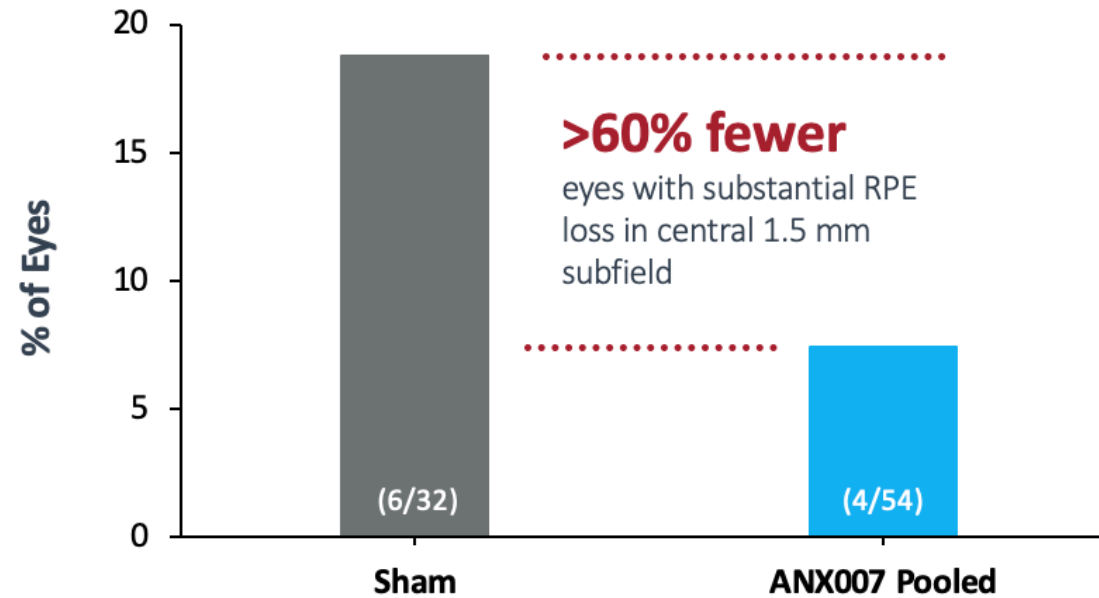
From a mixed model for repeated measures (MMRM) analysis; ITT Population



From a mixed model for repeated measures (MMRM) analysis; Heidelberg Spectralis OCT population with baseline OCT data, excludes patients with >98% atrophy at baseline

ANX007 Reduced Number of Eyes with at Least 25% RPE Invasion over 12 Months

EYES WITH SUBSTANTIAL RPE LOSS FROM BASELINE* IN CENTRAL 1.5 MM AT 12 MONTHS#



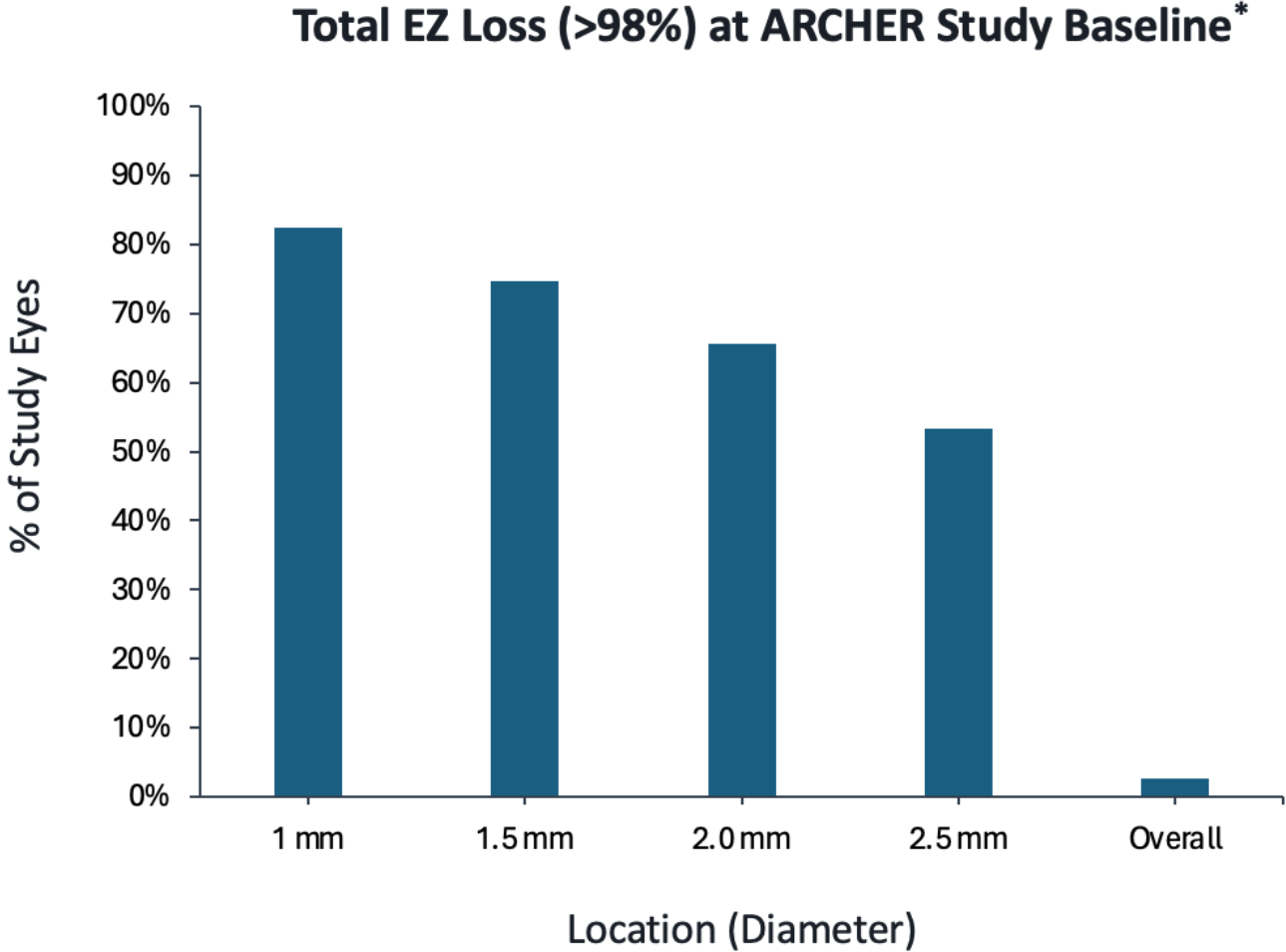
#Eyes with at least 25% of RPE intact in the central 1.5mm at baseline (n = 86) in patients with Heidelberg Spectralis OCT scans (overall total n=193)

*Substantial RPE loss defined as 25% absolute loss of RPE

Study Results

EZ Foveal Invasion

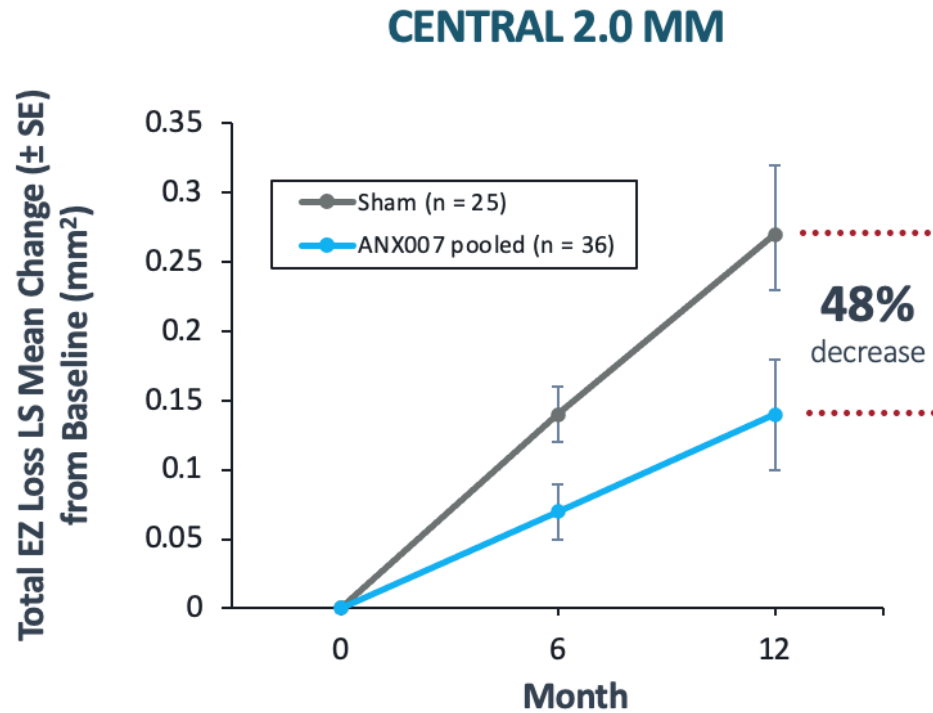
Eyes with >98% total EZ loss/invasion at baseline



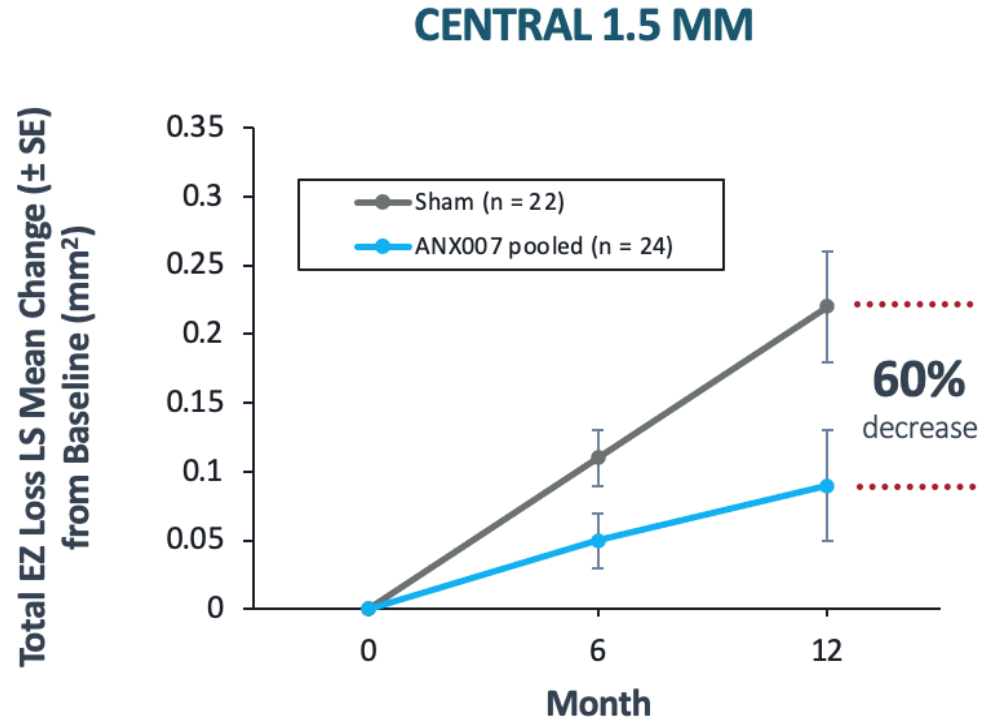
*ARCHER study Heidelberg Spectralis OCT population with baseline OCT data (n = 193)

ANX007 Protected from Photoreceptor Loss Through 12 Months

TOTAL EZ LOSS (EZ = 0 μm)



ANX007 Pooled vs. Sham 0.0218



ANX007 Pooled vs. Sham 0.0319

Total EZ loss treatment effect near foveal center (48-60%) greater than overall (24-29%)

From a linear mixed model for repeated measures model (slope) analysis;
Heidelberg Spectralis OCT population with baseline OCT data, excludes patients with >98% atrophy/attenuation at baseline

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