Plecanatide, a Novel Uroguanylin Analog: a 12-week, randomized, double-blind, placebo-controlled, dose-ranging trial to evaluate efficacy and safety in patients with irritable bowel syndrome with constipation (IBS-C)

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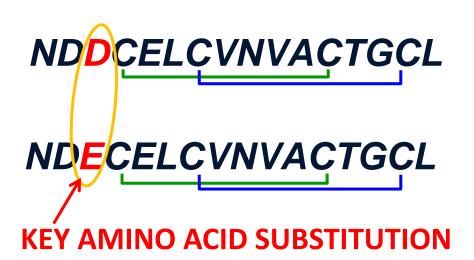
### Plecanatide: a Novel Uroguanylin Analog

**Uroguanylin:** 

Natural GC-C Ligand

Plecanatide:

**Uroguanylin Analog** 



**ST Peptide:** 

E. coli Bacteria

NSSNYCCELCCNPACTGCY

**Linaclotide:** 

**Bacterial Enterotoxin** 

CCEYCCNPACTGCY

# Plecanatide Phase 2b IBS-C Trial: Study Overview

### Design:

 Randomized, 12-week, double blind, placebocontrolled, dose-ranging study



### **Population:**

Rome III Criteria for IBS-C

### **Treatment Groups:**

0.3, 1.0, 3.0 and 9.0 mg plecanatide or placebo

#### **Drug Administration:**

Once-daily oral tablet

# Plecanatide Phase 2b IBS-C Trial: Patient Characteristics

#### mITT Population (N= 423)

	Placebo	0.3 mg	1.0 mg	3.0 mg	9.0 mg
	(n=85)	(n=84)	(n=83)	(n=86)	(n=85)
Gender [n, (%)]					
Male	16 (18.8%)	16 (19.0%)	16 (19.3%)	16 (18.6%)	15 (17.6%)
Female	69 (81.2%)	68 (81.0%)	67 (80.7%)	70 (81.4%)	70 (82.4%)
Race [n, (%)]					
White	56 (65.9%)	57 (67.9%)	60 (72.3%)	63 (73.3%)	65 (76.5%)
Other	29 ( 34.1%)	27 ( 32.1%)	23 (27.7%)	23 ( 26.7%)	20 ( 23.5%)
Ethnicity [n, (%)]					
Hispanic or Latino	33 (38.8%)	25 (29.8%)	30 (36.1%)	37 (43.0%)	31 (36.5%)
Other	52 (61.2%)	59 (70.2%)	53 (63.9%)	49 (57.0%)	54 (63.5%)
<b>Baseline Stool Frequency</b>					
SBM per week	1.66	1.76	1.79	1.78	1.42
CSBM per week	0.25	0.23	0.22	0.27	0.25

## Plecanatide Phase 2b IBS-C Trial: Statistical Approach to Missing Diary Data

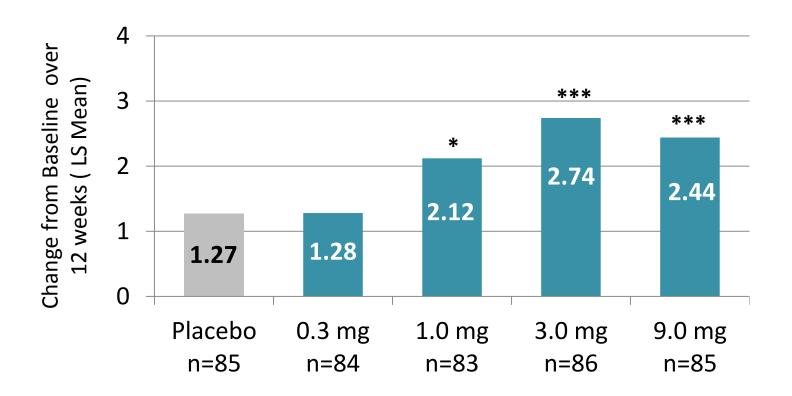
#### 1. Primary Analysis of the Primary Endpoint:

- Observed Case Methodology
  - Any missing diary entry in a week with partial data was assigned as 'no CSBM'
  - If < 4 diary entries/week, entire week was set to zero</li>
     ('no CSBM'), assumption weekly data 'missing at random'

#### 2. Sensitivity Analyses of the Primary Endpoint:

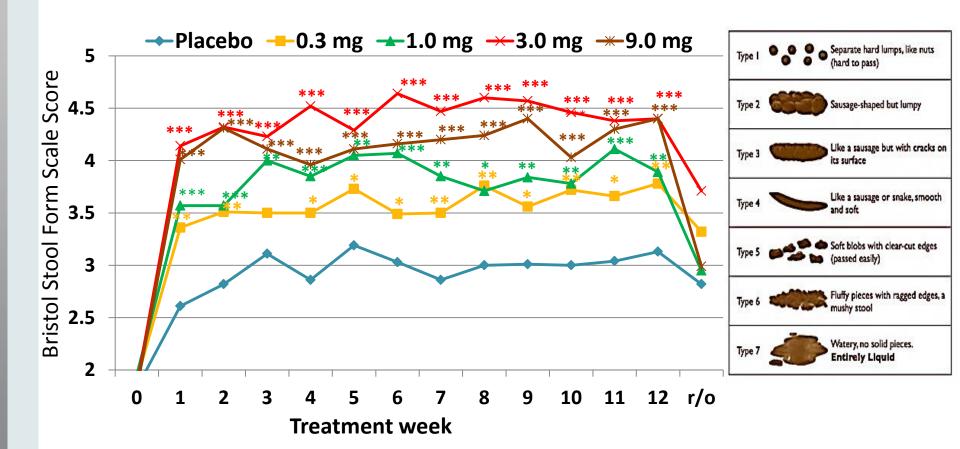
- Alternative missing data conventions (independent of Observed Case methodology)
  - Mean Replacement Approach (MRA)
  - Last Observation Carried Forward (LOCF)

### Primary Endpoint: Mean Change from Baseline in CSBM Frequency



\*= p < 0.05; \*\*\*= p < 0.001

### Secondary Endpoint: Stool Consistency (BSFS)



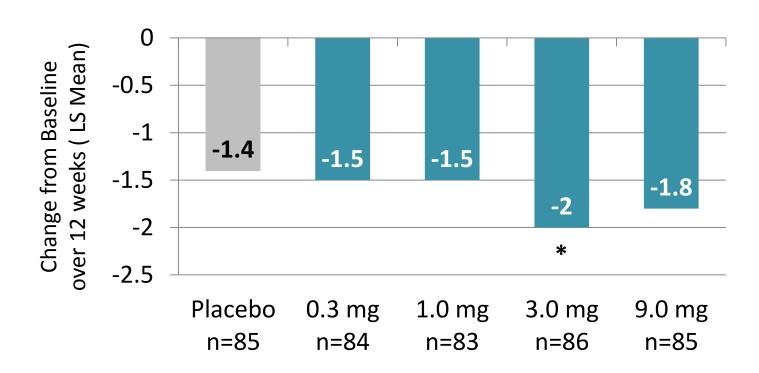
Note: mITT population

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<sup>\* =</sup> p < 0.05; \*\* = p < 0.01; \*\*\* = p < 0.001

## Secondary Endpoint: Abdominal Pain Intensity

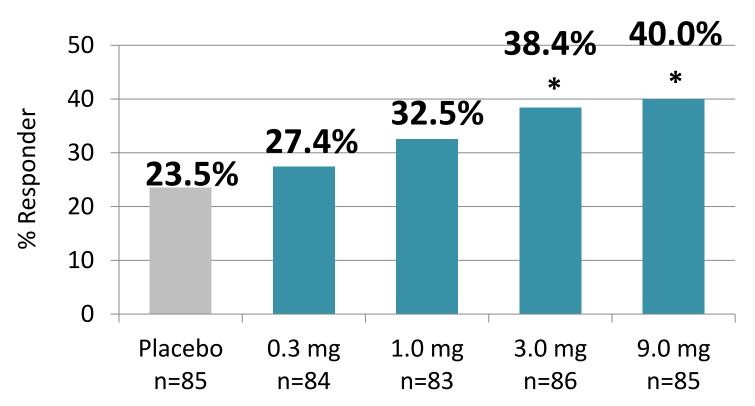
## "For today, rate your abdominal pain at its worst on a scale of 0 to 10"



<sup>\* =</sup> p < 0.05

### Secondary Endpoint: Abdominal Pain Responder

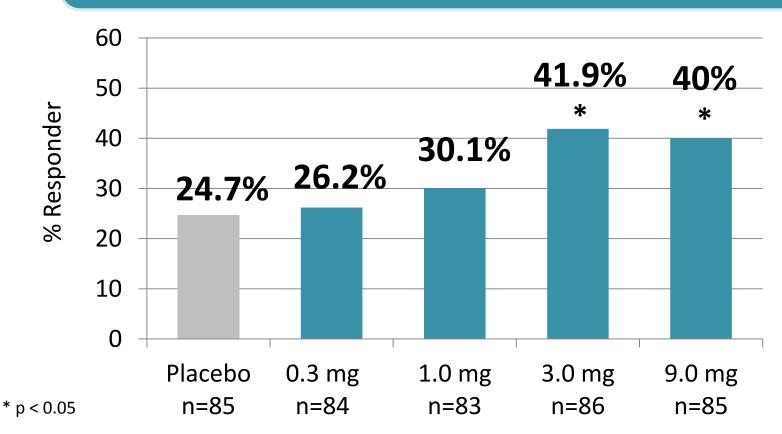
Abdominal Pain Responder= ≥ 30% reduction in pain in 9 out of 12 treatment weeks (75%)



<sup>\*</sup>p < 0.05

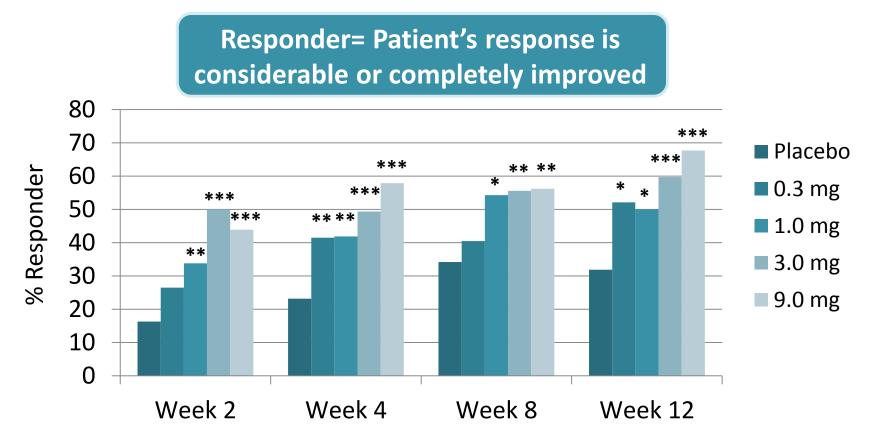
## Secondary Endpoint: Overall Responder (FDA Endpoint)

Overall Responder= fulfills both ≥ 30% reduction in worst abdominal pain *and* Increase of ≥ 1 CSBMs from baseline in the same week for at least 50% of the weeks (6/12 weeks)



## Secondary Endpoint: Ability to Relieve IBS-C Symptoms

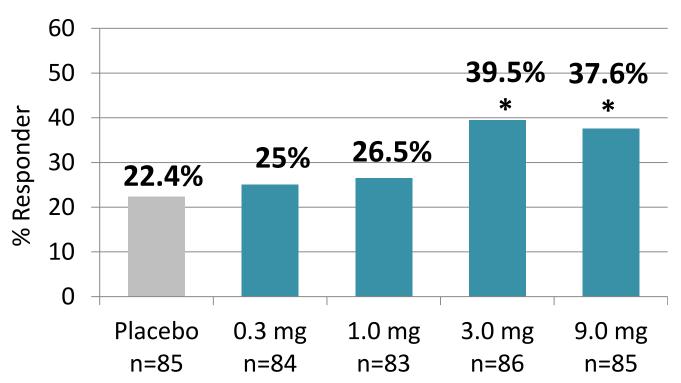
"How would you rate the ability of your study drug treatment to provide relief from your IBS-C symptoms?"



\* p< 0.05 \*\* p≤0.01 \*\*\* p≤ 0.001

### Post Hoc Analysis: Sustained Responder Rate

Sustained Responder= ≥ 30% decrease in worst abdominal pain + an increase = 1 CSBM/wk for at least 50% of the weeks (6/12) + at least two weeks of response in month 3



\*p < 0.05

### Plecanatide Phase 2b IBS-C Trial: Summary of Adverse Events (AEs)

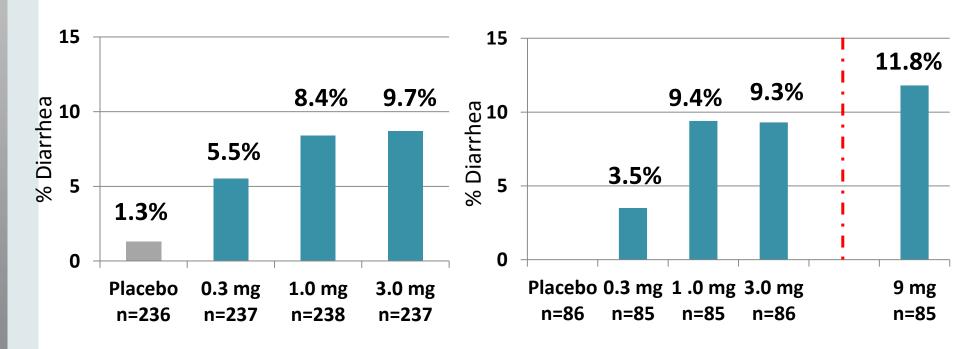
	Placebo n= 86	0.3 mg n= 85	1.0 mg n= 85	3.0 mg n= 86	9.0 mg n= 85
Treatment-emergent adverse events (TEAEs)	30 (34.9%)	37 (43.5%)	41 (48.2%)	37 (43.0%)	40 (47.1%)
Serious AEs	0	1 (1.2%)	0	1 (1.2%)	2 (2.4%)
Mild Diarrhea	0	0	5 (5.9%)	3 (3.5%)	2 (2.4%)
Moderate Diarrhea	0	1 (1.2%)	2 (2.4%)	5 (5.8%)	5 (5.9%)
Severe Diarrhea	0	2 (2.4%)	1(1.2%)	0	3 (3.5%)
All Diarrhea TEAEs	0	3 (3.5%)	8 (9.4%)	8 (9.3%)	10 (11.8%)
Discontinued due to any TEAE	1 (1.2%)	1 (1.2%)	5 (5.9%)	7 (8.1%)	6(7.1%)
Discontinued due to Diarrhea	0	0	1 (1.2%)	5 (5.8%)	3 (3.5%)

No signals in vital signs, hematology, serum chemistries, urinalysis or ECG

## Plecanatide: Consistent Tolerability Profile for CIC & IBS-C

#### **CIC Phase 2b Trial**

#### **IBS-C Phase 2b Trial**



Note: This is a cross trial comparison.

Plecanatide phase 2b CIC trial did not include 9.0 mg dose.

## Plecanatide Phase 2b IBS-C Trial: Data Confirm Efficacy, Safety & Unique Profile

- Plecanatide was safe, well tolerated and efficacious for treatment of IBS-C patients
- Trial confirms dose-response pharmacology
- Predictable treatment response: efficacy and safety observed in same dose range as CIC trials
- 3.0 and 6.0 mg doses selected for phase 3 IBS-C development (consistent with CIC)