Treatment with Oral Administered Bradykinin B2 Receptor Antagonist Deucrictibant Immediate-Release Capsule (PHVS416) Improves Hereditary Angioedema Attack Symptoms

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Introduction

- Approved therapies for hereditary angioedema (HAE) attacks are administered parenterally with substantial treatment burden due to administration time and risk of pain or other injection site reactions¹⁻⁴, with treatment of many attacks being delayed or forgone.⁵⁻⁶
- An unmet need exists for on-demand oral therapies that are effective and well-tolerated and may reduce the treatment burden enabling prompt administration as recommended by international clinical guidelines.⁷⁻⁹
- Deucrictibant immediate-release (IR) capsule (PHVS416) is an investigational formulation containing deucrictibant (PHA121), a highly potent, specific, and orally bioavailable competitive antagonist of the bradykinin B2 receptor.¹⁰⁻¹¹
- In the Phase 2 RAPIDe-1 trial (NCT0461821112) deucrictibant IR capsule reduced time to onset of symptom relief and to attack resolution measured through the visual analogue scale-3 (VAS-3) and substantially reduced use of rescue medication.¹³⁻¹⁴

Methods

- RAPIDe-1 was a Phase 2, double-blind, placebo-controlled, randomized, crossover, dose-ranging trial of deucrictibant IR capsule for the acute treatment of angioedema attacks in patients with type 1 and 2 HAE.
- A primary analysis was performed including 147 qualifying HAE attacks treated by 62 patients
 with double-blinded placebo or deucrictibant IR capsule 10, 20, or 30 mg (modified intent-to-treat
 analysis, mITT = all randomized patients with ≥1 treated HAE attack and VAS results at both pretreatment and ≥1 post-treatment time point).

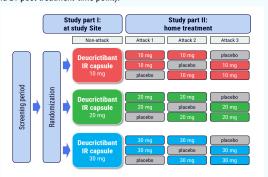


Figure 1. RAPIDe-1 trial design schematic

Mean Symptom Complex Severity (MSCS) score and Treatment Outcome Score (TOS) are
validated composite scores based on patient-reported symptoms of attacks at the affected body
sites, included in ecallantide clinical trials¹⁵⁻¹⁷. Changes in MSCS score and in TOS from pretreatment to 4 hours post-treatment were secondary endpoints of RAPIDe-1.

- MSCS is a point-in-time measure of symptom severity of each affected symptom:
- (0 = normal, 1 = mild, 2 = moderate, 3 = severe);
- · Calculated as average score from all affected body sites involved (symptom complexes);
- · Decrease in score reflects improvement in symptom severity.
- TOS is a measure of response to treatment for each affected body site on categorical scale:
- Significant improvement [100], improvement [50], same [0], worsening [-50], significant worsening [-100]:
- Calculated as pre-treatment severity-weighted average of the response at all body sites;
- Increase in score reflects improvement in symptom from pre-treatment;
- Complex Assessment questions evaluate patient-reported change in attack symptoms:
- A lot better or resolved a little better same a little worse a lot worse.

Results

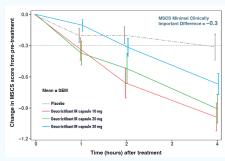


Figure 2. Deucrictibant IR capsule significantly reduced MSCS score at 4h

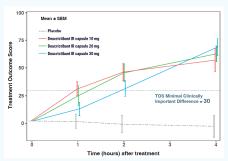


Figure 3. Deucrictibant IR capsule significantly improved TOS at 4h

| | Placebo | Deucrictibant IR capsule 10 mg | Deucrictibant IR capsule 20 mg | Deucrictibant IR capsule 30 mg |
|---|-------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Number of patients with post-treatment TOS PRO | 49 | 21 | 16 | 19 |
| Number of attacks with post-treatment TOS PRO | 49 | 36 | 28 | 29 |
| Attacks with onset of all symptom complexes "a little better" within 48 hours – n (%) | 18 (36.7%) | 32 (88.9%) | 25 (89.3%) | 27 (93.1%) |
| Median (95% CI) time (hours) to onset of symptom relief by KM estimate | 7.62 (3.95, -) | 1.89 (0.97, 3.97) | 2.15 (1.75, 4.00) | 1.98 (1.80, 3.87) |

Onset of symptom relief = The time point when TOS PRO first reaches at least "A little better" for all symptom complexes affected at baseline, and no new symptom in any other symptom complex is reported. Relief is confirmed if the improvement is sustained at 2 consecutive time points.

Table 1. Deucrictibant IR capsule reduced time to onset of symptom relief

| | Placebo | Deucrictibant IR capsule 10 mg | Deucrictibant IR capsule 20 mg | Deucrictibant IR capsule 30 mg |
|---|------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Number of patients with post-treatment TOS PRO | 49 | 21 | 16 | 19 |
| Number of attacks with post-treatment TOS PRO | 49 | 36 | 28 | 29 |
| Attacks with onset of all symptom complexes "a lot better or resolved" within 48 hours – n (%) | 13 (26.5%) | 30 (83.3%) | 23 (82.1%) | 25 (86.2%) |
| Median (95% CI) time (hours) to almost complete or complete symptom relief by KM estimate | 23.28 (5.78, 47.17) | 4.02 (3.93, 5.77) | 5.93 (3.90, 8.58) | 4.12 (3.92, 7.22) |

Almost complete or complete symptom relief = The time point when TOS PRO first reaches "A lot better or resolved" for all symptom complexes affected at baseline, at no new symptom in any other symptom complex is penorted

Table 2. Deucrictibant IR capsule reduced time to almost complete or complete symptom relief

Conclusions

- In the Phase 2 RAPIDe-1 trial deucrictibant IR capsule improved symptoms and reduced time to symptom relief and to resolution of HAE attacks
- Clinical meaningful improvement of symptoms was observed during the first hours after treatment with deucrictibant IR capsule

References

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