

# Clinical Development of Inhaled GB002 for the Treatment of Pulmonary Arterial Hypertension

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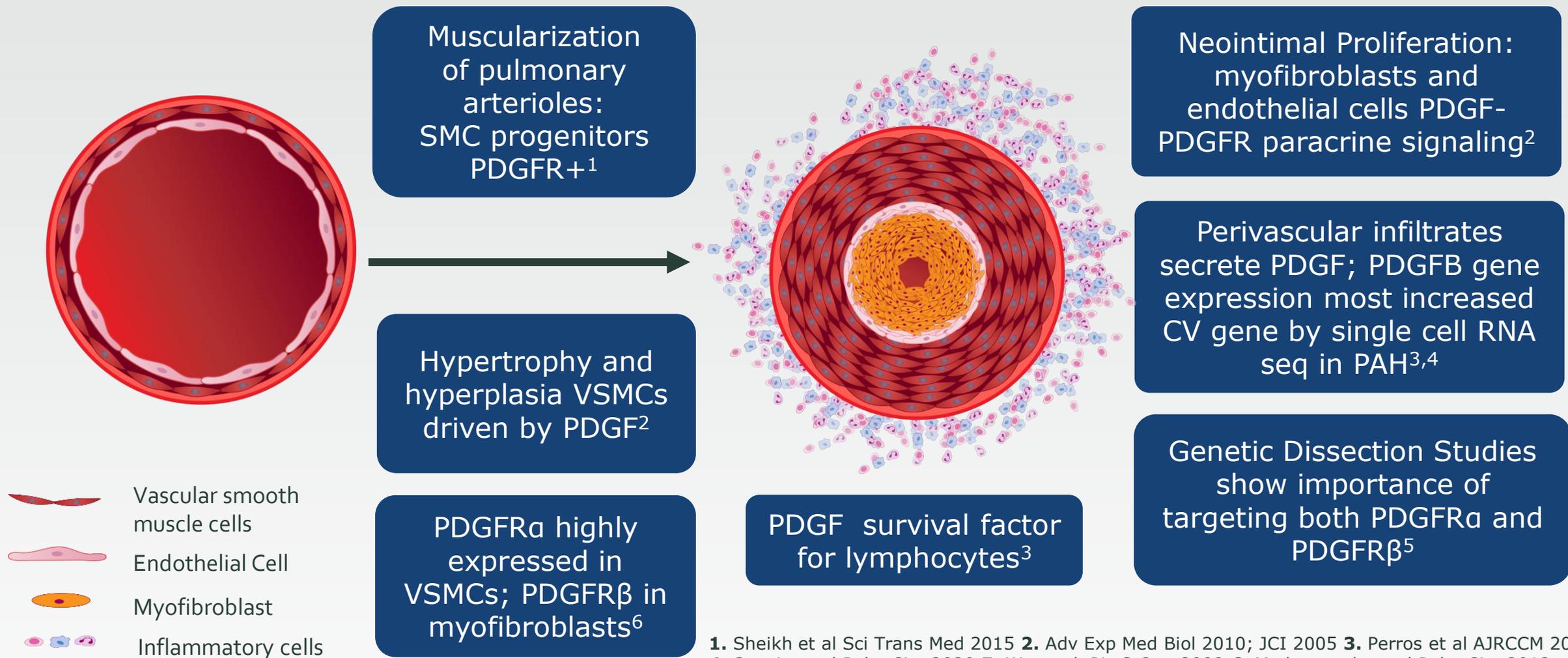
# Disclosures: Dr. Ghofrani

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# Introduction and Overview

- PDGF signaling plays a key role in pulmonary vascular remodeling associated with PAH
- Imatinib provided POC but had limitations due to systemic administration
- GB002 is a unique small molecule PDGFR inhibitor with an improved kinase inhibition profile and is formulated to be administered via dry powder inhaler (DPI)
- GB002 has been evaluated in pre-clinical models of PAH and has demonstrated improvements in hemodynamic parameters, increases in lung BMPR2, reductions in circulating NT-proBNP, and reversal of pulmonary vascular remodeling
- In phase 1 studies, inhaled GB002 has shown a favorable pharmacokinetic profile and was well tolerated
- A phase 2 trial in patients with WHO Group I PAH is being initiated

# Components of Vascular Remodeling in PAH: Critical Role of PDGF signaling



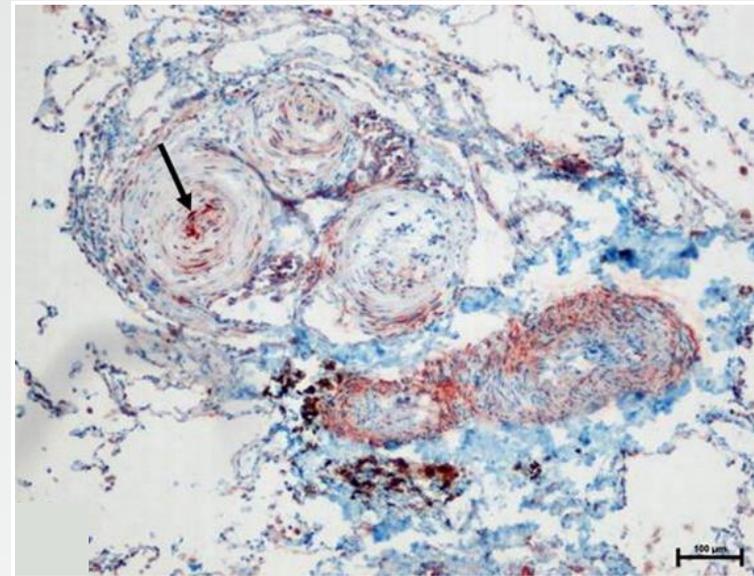
1. Sheikh et al Sci Trans Med 2015 2. Adv Exp Med Biol 2010; JCI 2005 3. Perros et al AJRCCM 2012  
4. Saygin et al Pulm Circ 2020 5. Wu et al. PLoS One 2008 6. Medarametla et al Pulm Circ 2013

# Targeting the PDGF Pathway in PAH is Supported by Strong Scientific and Clinical Rationale

- PDGF pathway is upregulated in PAH<sup>1</sup>

- Ablation of PDGFR $\beta$  signaling prevented hypoxia induced PAH<sup>3</sup>

- PDGFR inhibition is effective in animal models of PAH<sup>2</sup>



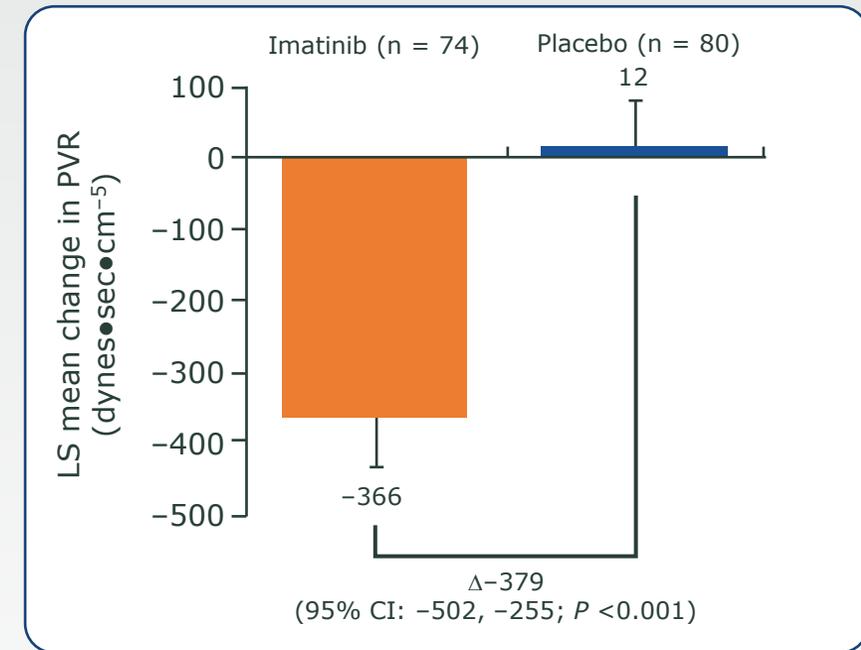
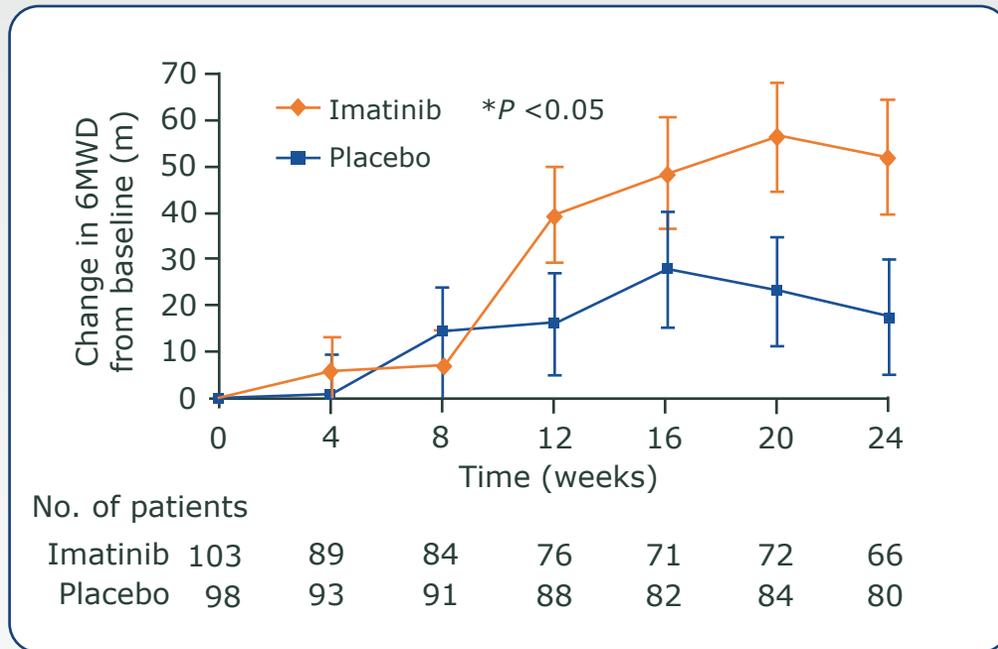
Photomicrograph shows increased phosphorylated PDGFR $\beta$  in PAH lesions<sup>1</sup>

- Clinical studies of imatinib in PAH demonstrate efficacy<sup>4-7</sup>

1. Perros et al. AJRCCM 2008; 2. Schermuly JCI 2005; 3. Freyhaus et al. ATVB 2015; 4. Ghofrani NEJM 2005; 5. Ghofrani et al. AJRCCM 2010; 6. Grimminger et al. Nat Rev Drug Disc 2010; 7. Hoepfer et al. Circ 2013

# Phase 3 IMPRES Trial Provides Clinical Proof of Principle for Targeting the PDGF Pathway in PAH with Imatinib

- Improvements in 6MWD and PVR were demonstrated at 24 weeks
- Systemic side effects of imatinib were observed
- GB002 developed as a novel molecule with improved kinase specificity and inhaled route of administration to optimize the therapeutic index of a PDGF inhibitor for PAH



Hoeper M, et al. Circulation 2013.

# GB002 Overview

	<b>GB002</b>	<b>Imatinib</b>
PDGFR $\alpha$ IC <sub>50</sub> (nM)	7	12
PDGFR $\beta$ IC <sub>50</sub> (nM)	6	74
Lung Exposure	++++	+++
Systemic Exposure	+	++

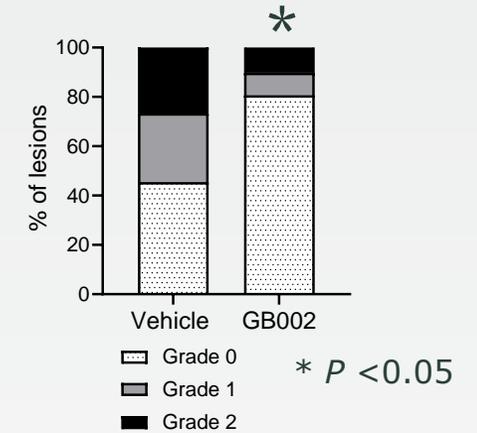
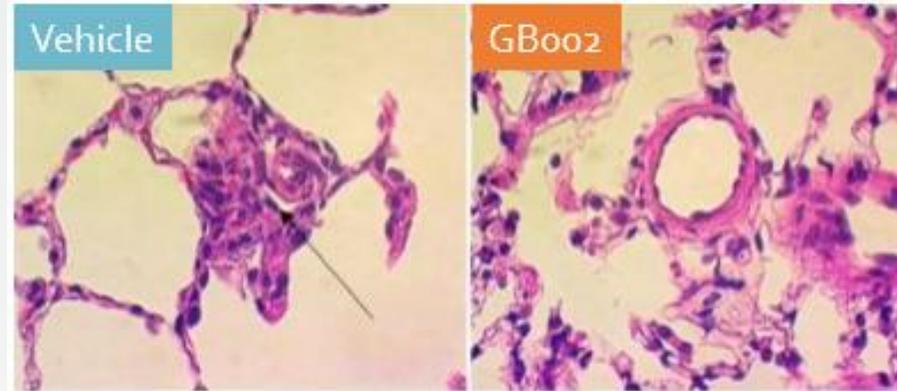
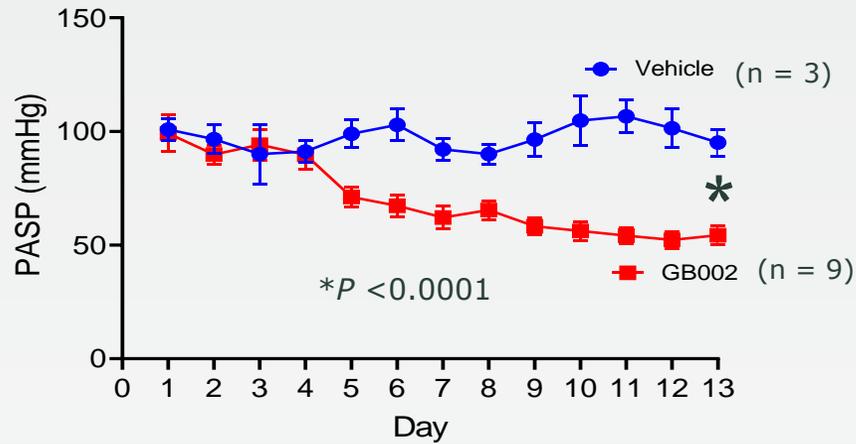
## Dry Powder Inhaler From Plastiapipe



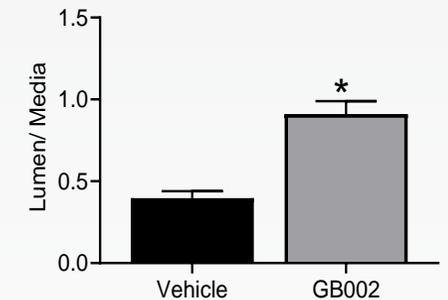
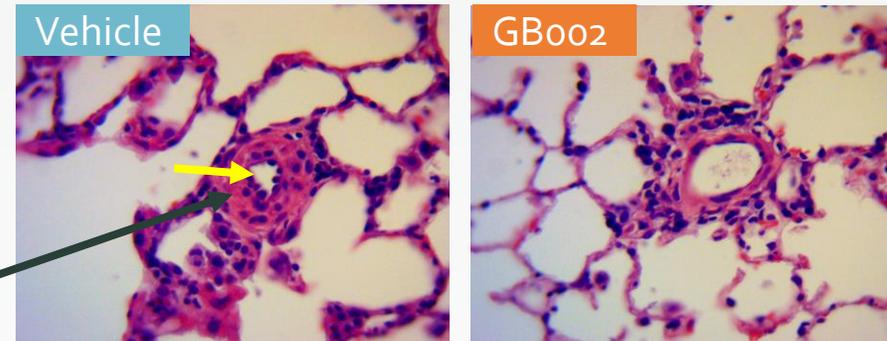
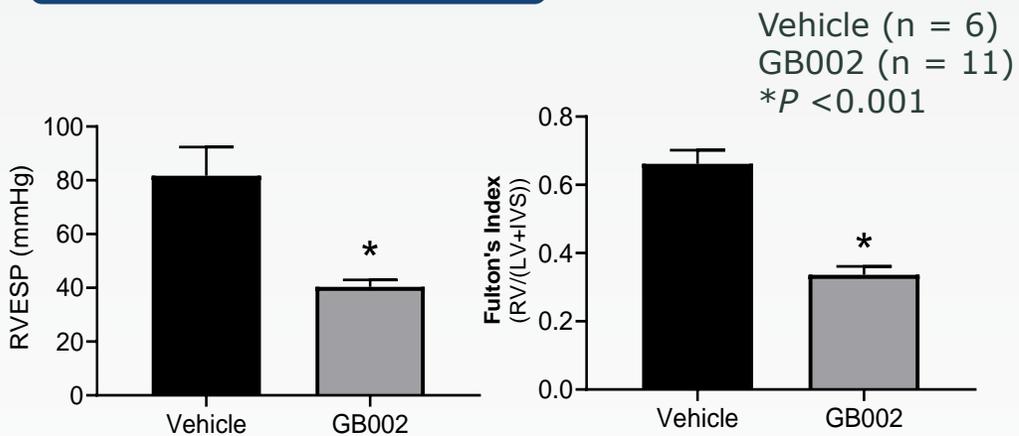
- GB002 is a novel chemical entity; small molecule platelet-derived growth factor receptor (PDGFR) kinase inhibitor
- Equipotent against PDGFR $\alpha$  and  $\beta$ ; 10-fold more potent than imatinib against PDGFR $\beta$  in vitro; GB002 more potent in fibroblast assay
- In preclinical models, inhaled administration results in greater lung to systemic exposure
- GB002 formulation and administration via dry powder inhaler (DPI) designed to reach areas of the deep lung

# GB002 Treatment Demonstrates Efficacy in SU5416/Hypoxia and MCT/PN models

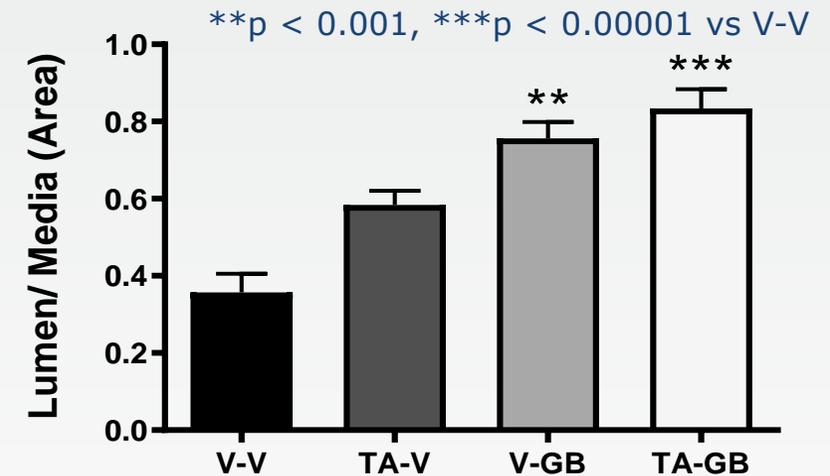
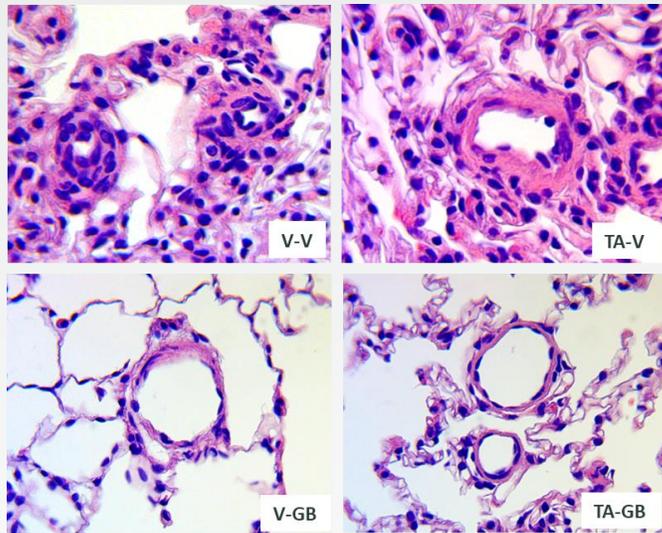
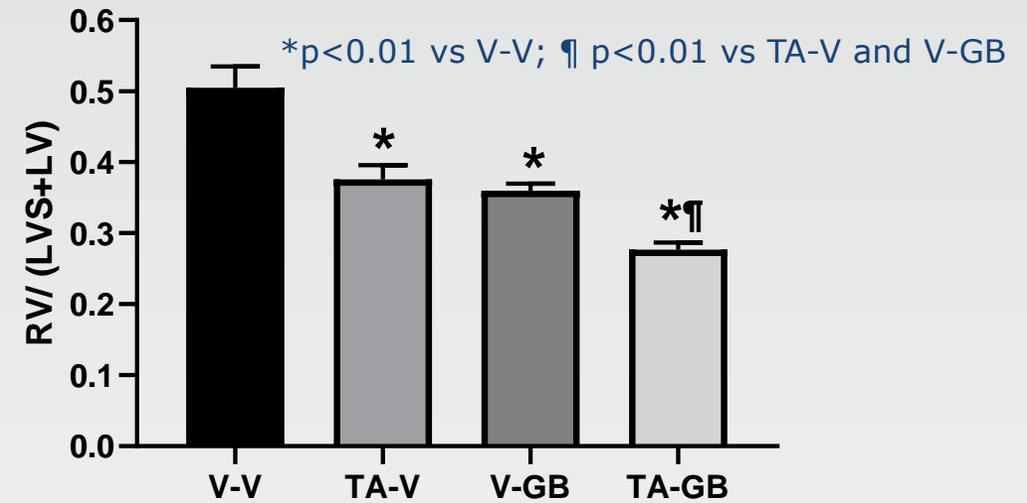
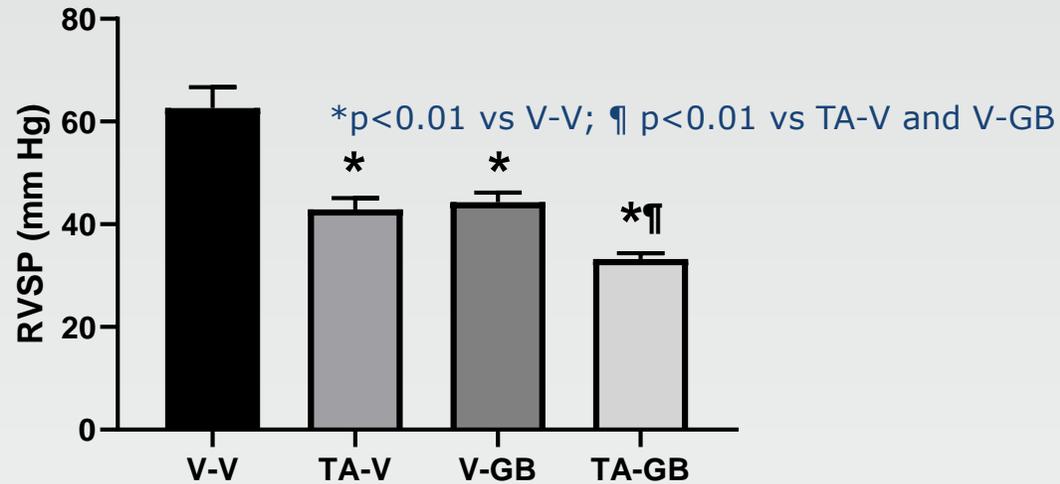
## SU5416/H telemetry study<sup>1</sup>



## MCT/PN study<sup>2</sup>



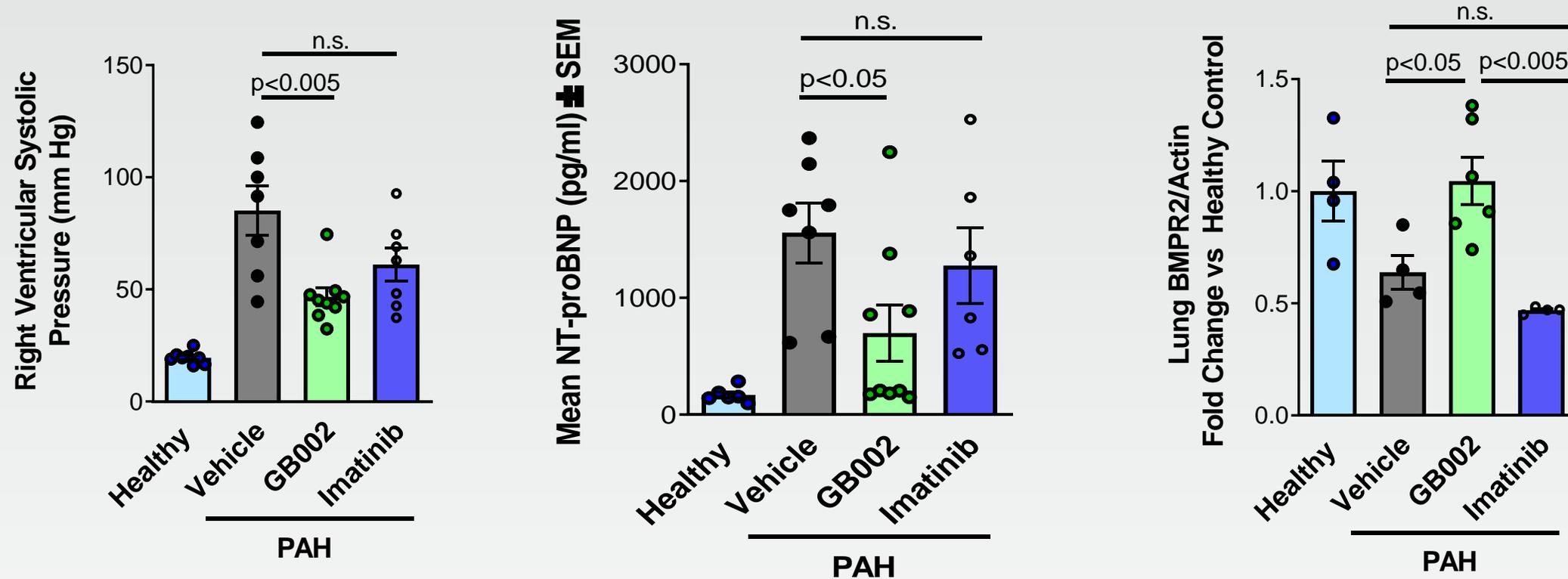
# Rat AAV-PDGF SU5416/Hypoxia Model: GB002 Provides Additive Benefit Combined with Tadalafil and Ambrisentan



V-V, vehicle gavage + vehicle inhalation; TA-V, tadalafil + ambrisentan gavage + vehicle inhalation; V-GB, vehicle gavage + GB inhalation; TA-GB, tadalafil + ambrisentan gavage + GB inhalation

Sitapara R, et al. AJRCCM 2017; 195: A6897.

# Inhaled GB002 Outperformed Gavage Imatinib in Head-to-Head Preclinical SuHx PAH Study

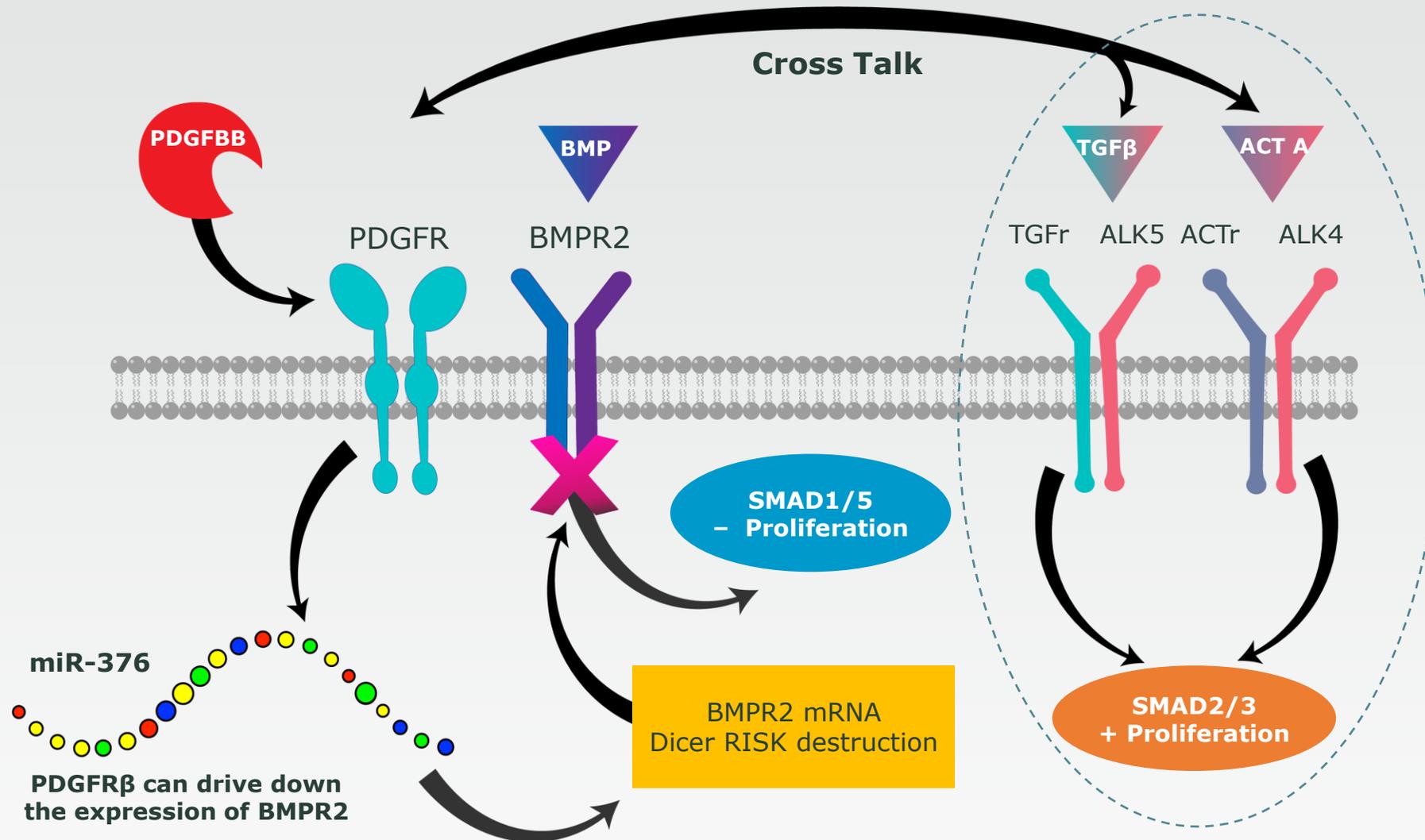


Data presented as mean  $\pm$  SEM. Statistical analysis was performed using one-way ANOVA with Dunnett's multiple comparisons test. (Healthy n = 8, Vehicle n = 7, GB002 n = 9, Imatinib n = 7)

- GB002 treatment led to a significant improvement in RVSP
- GB002 reduced circulating levels of NT-proBNP and increased lung BMPR2 protein expression

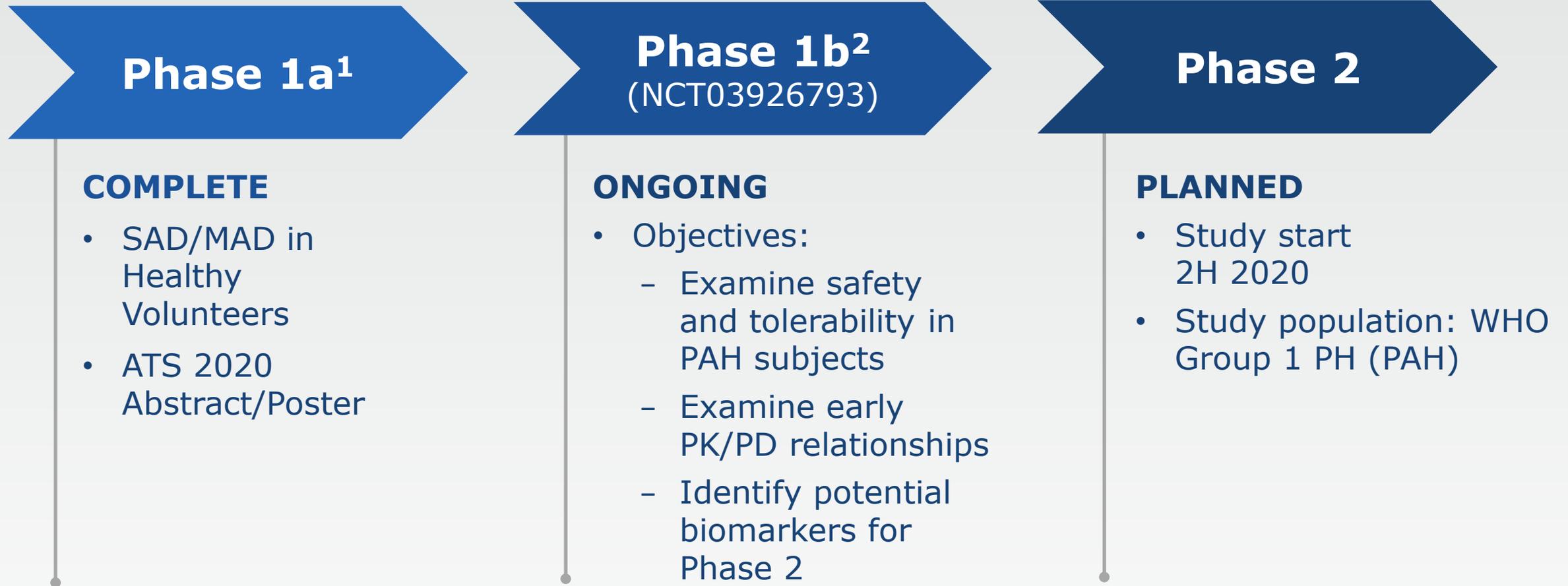
Galkin A, et al. Circulation 2019;140: A11102.

# GB002 Increases BMPR2: Potential for Crosstalk Between PDGF, BMPR2, and Activin Pathways



Adapted from: Chen, et al. BMC Genomics 2016

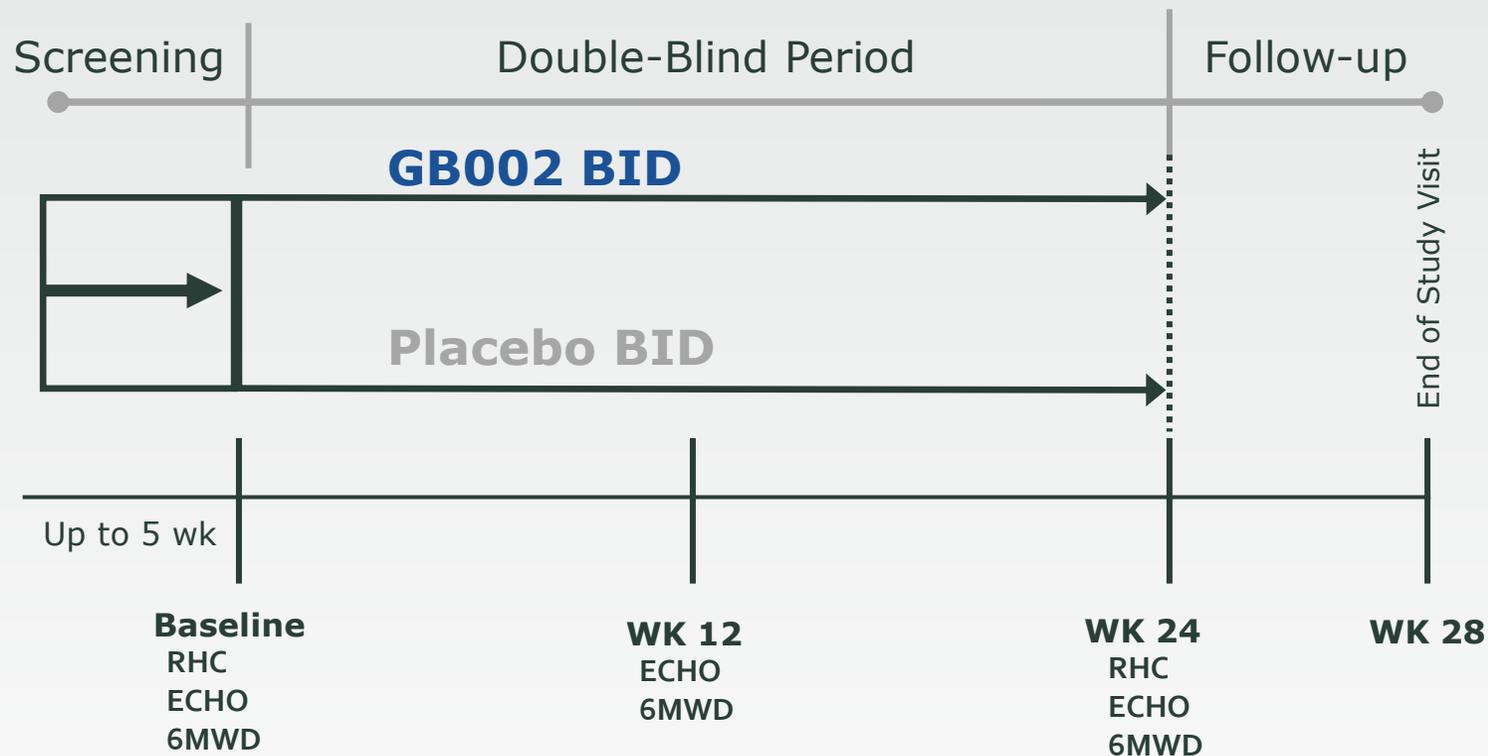
# GB002 Clinical Development Program Overview



1. Li J, et al. AJRCCM 2020;201:A2907. 2. <https://clinicaltrials.gov/ct2/results?cond=&term=NCT03926793&cntry=&state=&city=&dist=>

# GB002-2101 Study Design

A Phase 2, Randomized, Double-Blind, Placebo-Controlled, Multi-Center Clinical Study to Evaluate the Efficacy and Safety of Oral Inhalation of GB002 for the Treatment of WHO Group 1 Pulmonary Arterial Hypertension (PAH)<sup>1</sup>



## Primary Endpoint

- PVR at week 24

## Secondary Endpoint

- 6MWD at week 24

1. Data on file; Trials in Progress abstract submitted to AHA 2020.

# Summary and Conclusions

- GB002 is a unique small molecule PDGFR kinase inhibitor delivered by DPI
- Efficacy has been demonstrated in preclinical animal models of severe PAH including reversing pulmonary arteriolar remodeling and decreasing NT-proBNP
- GB002 increased lung BMPR2 levels highlighting the intersection of the PDGF, BMPR2 and activin pathways
- Phase 1 studies support the favorable pharmacokinetics and safety profiles of GB002
- A phase 2 trial in patients with WHO Group I pulmonary arterial hypertension (PAH) is being initiated



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