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Enpatoran reverses established kidney disease in the IFN-α accelerated NZB/W model of lupus

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We have the following relevant financial relationships to disclose:

Amy Kao and I are employees of EMD Serono, Billerica, MA, USA

Julia Bruttger, Sonja Reissig and Philipp Haselmayer are employees of the healthcare business of Merck KGaA, Darmstadt, Germany

All of the relevant financial relationships listed have been mitigated





TLR7 and TLR8 are ssRNA-sensing receptors that can drive inflammation and have the potential to contribute to autoimmunity and inflammatory disorders



Discovery of TLR7/8 inhibitors Enpatoran (M5049) is a selective and potent dual TLR7/8 inhibitor

• Enpatoran, a clinical stage molecule, and CMPD2, a tool molecule, are both reversible and competitive inhibitors of TLR7 and TLR8



Highly selective and potent activity

				Enpatoran	CMPD2
TLR	Stimulus	Cells	Endpoint	IC ₅₀ (nM)	IC₅₀ (nM)
TLR7	R848	HEK	NF-kB Luc	11.1 ± 9.94	26 ± 10.6
TLR8	R848	HEK	NF-kB Luc	24.1 ± 9.16	3.6 ± 1.06
TLR7	TLR7 ligand	PBMC	IL-6	68.3 ± 59.8	80 ± 28
TLR8	TLR8 ligand	PBMC	IL-6	620 ± 628	8.9 ± 6.2
TLR7	TLR7 ligand	WB	IL-6	2.2 ± 2.6	0.58 ± 0.27
TLR8	TLR8 ligand	WB	IL-6	120 ± 34	0.81 ± 0.31

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 We investigated the ability of TLR7/8 inhibition to reverse established kidney disease in mouse models, as an indicator for effects in **lupus nephritis** patients

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⁴ CMPD2, compound 2; IC₅₀, half maximal inhibitory concentration; IL-6, interleukin-6; HEK, human embryonic kidney; LPS, lipopolysaccharide; NF-KB Luc, nuclear factor-kappa B luciferase; PBMC, peripheral blood mononuclear cell; TLR, toll-like receptor; WB, white blood cell

Prophylactic treatment Study design of the IFN-α-accelerated NZB/W F1 Iupus mouse model



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- NZB/W F1 mice spontaneously develop SLE-like symptoms
- Application of IFN-α at 10 weeks of age accelerates and synchronizes disease development
- IFN-α expression was transient and no increase in systemic IFN-α levels was detectable 14 days post-application

Prophylactic treatment Enpatoran treatment is efficacious when dosed early before proteinuria onset

Decrease in autoreactive B cells Reduction in proteinuria and autoantibodies * p<0.05, **p<0.01, ***p<0.001 Autoantibody producing cells were 80 reduced by 3 and 10 mg/kg doses Vehicle 60 Enpatoran **p<0.01 0.3 mg/kg UPCR (g/g) Enpatoran 1000 1 mg/kg Anti-Ro/SSA 40F Enpatoran (%titer) Start 3 mg/kg treatment Enpatoran 100 20 10 mg/kg MMF 300 mg/kg 10 Veh 0.3 10 MMF 3 10 Enpatoran (mg/kg) Weeks Anti-dsDNA and anti-SmRNP were also suppressed

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Enpatoran prevented proteinuria, reduced B cell numbers, and lowered autoantibody titers

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6 Anti-dsDNA, anti-double-stranded RNA; Anti-Ro/SSA, anti-Sjögren's-syndrome-related antigen; anti-SmRNP, anti-Smith ribonucleoprotein; MMF, mycophenolate mofetil; UPCR, urine protein-creatinine ratio; Veh, vehicle

Therapeutic intervention Randomization and treatment initiation after proteinuria onset



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Therapeutic intervention TLR7/8 inhibition was efficacious when dosed even after proteinuria onset

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TLR7/8 inhibitor treatment rescued mice from established proteinuria

8 Anti-IFNAR, anti-type I interferon receptor antibody; CMPD2, compound 2; IgG, immunoglobulin G; MMF, mycophenolate mofetil; TLR7/8, toll-like receptor 7/8; UPCR, urine protein-creatinine ratio



G, glomerulus; **T**, renal tubules; *, proteinaceous luminal casts.

TLR7/8 inhibition reduced glomerulonephritis including tubule dilatation/casts and tubule basophilia

Therapeutic intervention TLR7/8 inhibition reduced pathogenic cell types

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Therapeutic intervention Enpatoran reduced proteinuria and improved survival







TLR7/8 inhibition is efficacious when dosed before or after proteinuria onset in mouse lupus models

- In the NZB/W IFN-α-accelerated model, established kidney disease was reversed by TLR7/8 inhibition
- Both the clinical stage molecule, enpatoran, and the tool molecule, CMPD2, **significantly reduced proteinuria** even after proteinuria onset
- TLR7/8 inhibition reduced the levels of autoantibodies, plasma cells and effector T cells, suggesting multiple modes of action
- Our preclinical results suggest that enpatoran may be beneficial for patients with **lupus nephritis**

The ongoing Phase Ib (NCT04647708) and Phase II (WILLOW, NCT05162586)¹ studies will evaluate the safety and efficacy of enpatoran in patients with SLE and/or CLE

GET ADDITIONAL CONTENT

The WILLOW study design and further preclinical results are available using the QR code



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1. Morand E, et al. Ann Rheum Dis 2022;Suppl:AB04441

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