

# 12-Month Results of a Tyrosine Kinase Inhibitor (Vorolanib) in a Bioerodible Durasert<sup>®</sup> Insert for Previously Treated Neovascular AMD: The DAVIO Trial

Rishi P. Singh, MD | Staff Physician, Cleveland Clinic Florida | President – Cleveland Clinic Martin Hospitals  
ASRS Annual Meeting – nAMD 2 Symposium

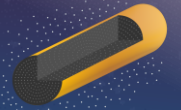
July 15, 2022

# Disclosures

- Financial Disclosures:
  - Consultant: Regeneron, Novartis, Genentech, Bausch and Lomb, EyePoint, Asclepix, Gyroscope, Apellis
- This presentation includes preliminary data from IRB-approved research of an investigational product

# EYP-1901: A Novel Approach to Neovascular AMD Therapy

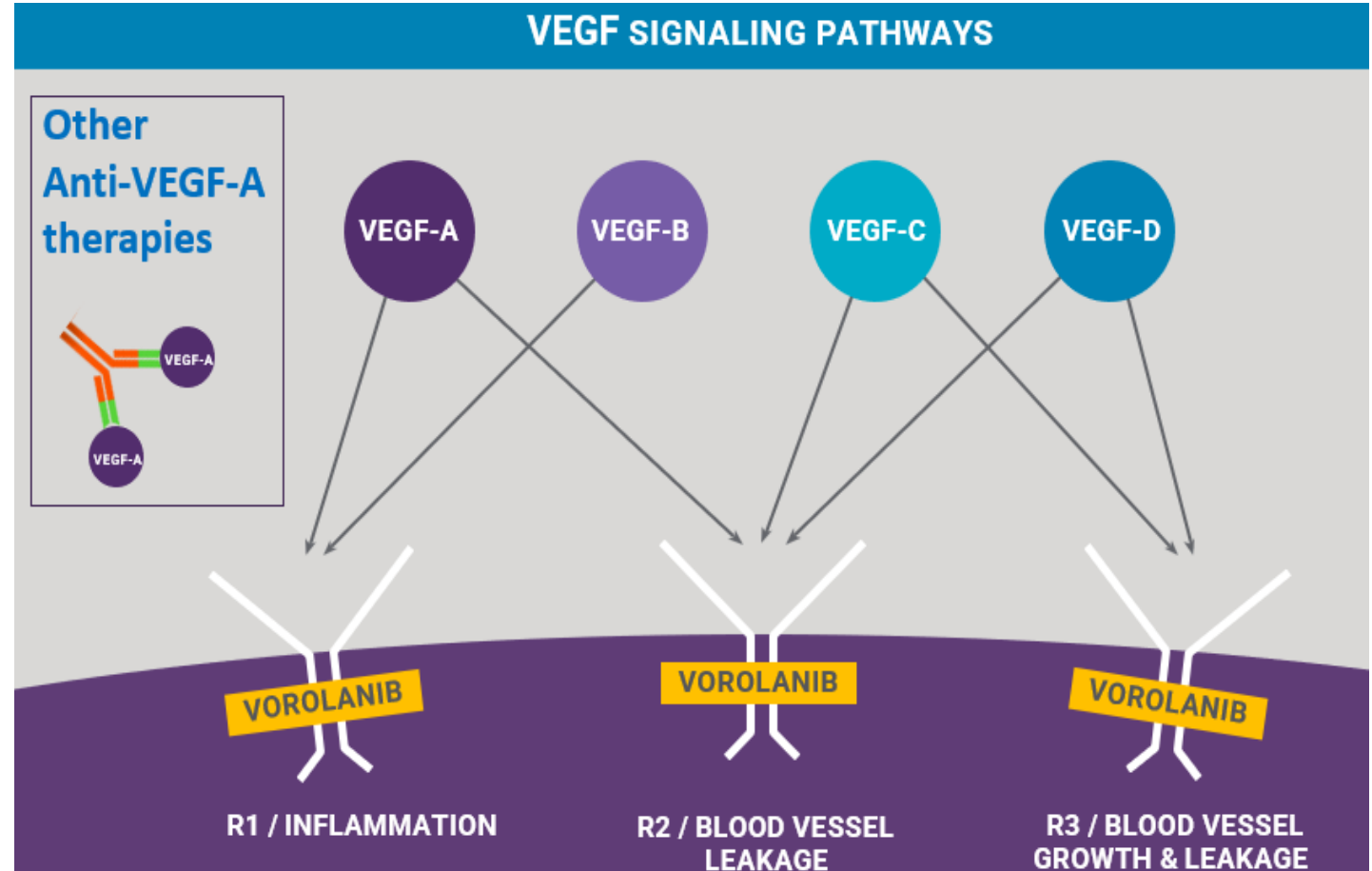
## Mechanism of Action



### Vorolanib

Receptor-binding, small molecule tyrosine kinase inhibitor

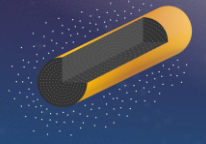
Activity against all isoforms of VEGF





# EYP-1901: A Novel Approach to Neovascular AMD Therapy

Vorolanib in Bioerodible Durasert®



## Injectable, sustained-delivery technology

Intravitreal insert like fluocinolone 0.18 mg (Durasert)

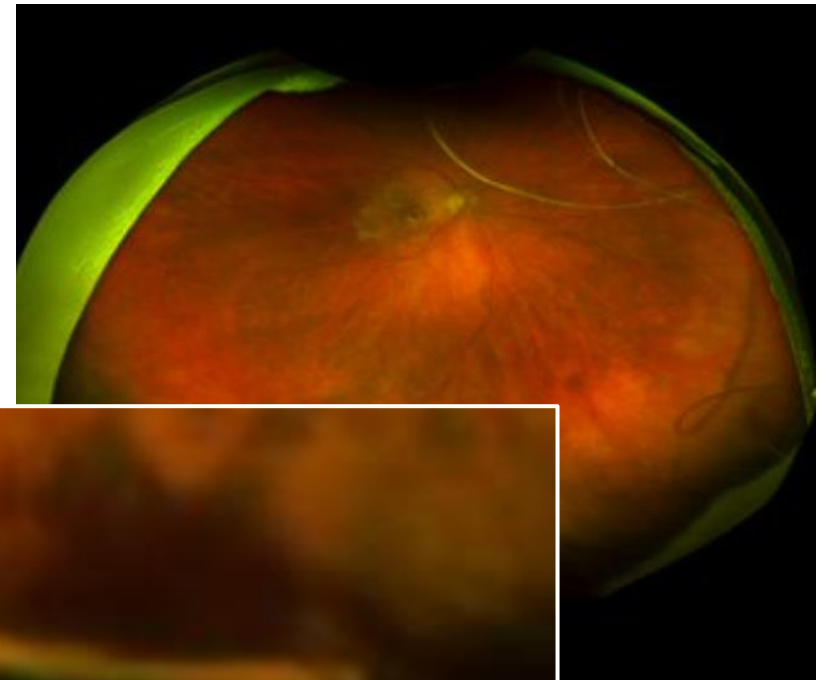
One difference: No polyimide shell → Bioerodible

## Drug release dynamics

Initial burst from surface of insert

Constant, zero-order kinetic release rate for months

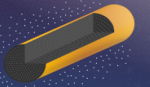
Designed for approximately six months or longer efficacy



EYP-1901 insert at month 5 post-injection

# DAVIO Study: Durasert<sup>®</sup> and Vorolanib In Ophthalmology

Phase 1 Trial: A 12-month, Multicenter, Open-label, Dose escalation, No control arm study of EYP-1901 in subjects with nAMD



## Methodology:

- Minimum 3 anti-VEGF injections in past 6-months
- No strict criteria of fluid status
- No EYP-1901 redosing

## Criteria for supplemental anti-VEGF therapy:

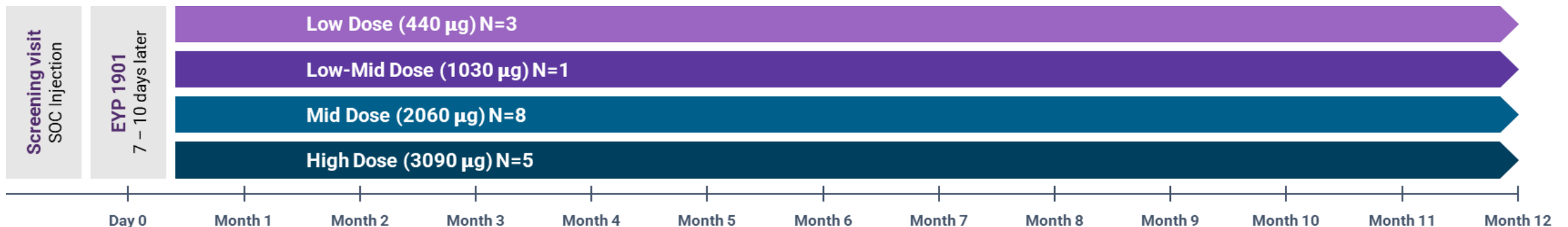
- New or worsening vision-threatening hemorrhage
- Increase in CST of >75  $\mu\text{m}$  from baseline
- Loss of  $\geq 10$  ETDRS letters from baseline

## Primary Endpoint: safety

- Ocular and non-ocular TEAEs through month-12

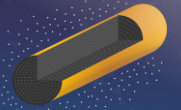
## Secondary Endpoints: preliminary efficacy

- Change in BCVA and CST
- Supplemental anti-VEGF therapy



Note: All doses delivered in a single intravitreal injection.

# Phase 1 Participants

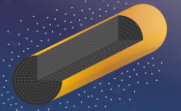


## Screening Characteristics (N=17)

Mean age, range (years)	77.4 (67-94)
Female (n, %)	13/17 (76%)
Mean BCVA, range (ETDRS letters)	69, (38-85)
Mean CST, range (microns)	299, (204-441)
Median length of time for nAMD diagnosis prior to enrollment, range (months)	17, (4-74)
Mean # of injections 12 months prior to enrollment, range (# of injections)*	<b>8.0, (3-11)</b>

\*normalized

# Primary Endpoint: 12 Month Safety Overall Favorable Safety Profile



## Key Findings:

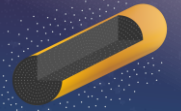
- ✓ No ocular SAEs
- ✓ No drug-related systemic SAEs
- ✓ No evidence of vorolanib-related ocular or systemic toxicity
- ✓ No Durasert-related toxicity or tolerance issues
- ✓ No dose limiting toxicity

## Ocular AEs of Particular Interest:

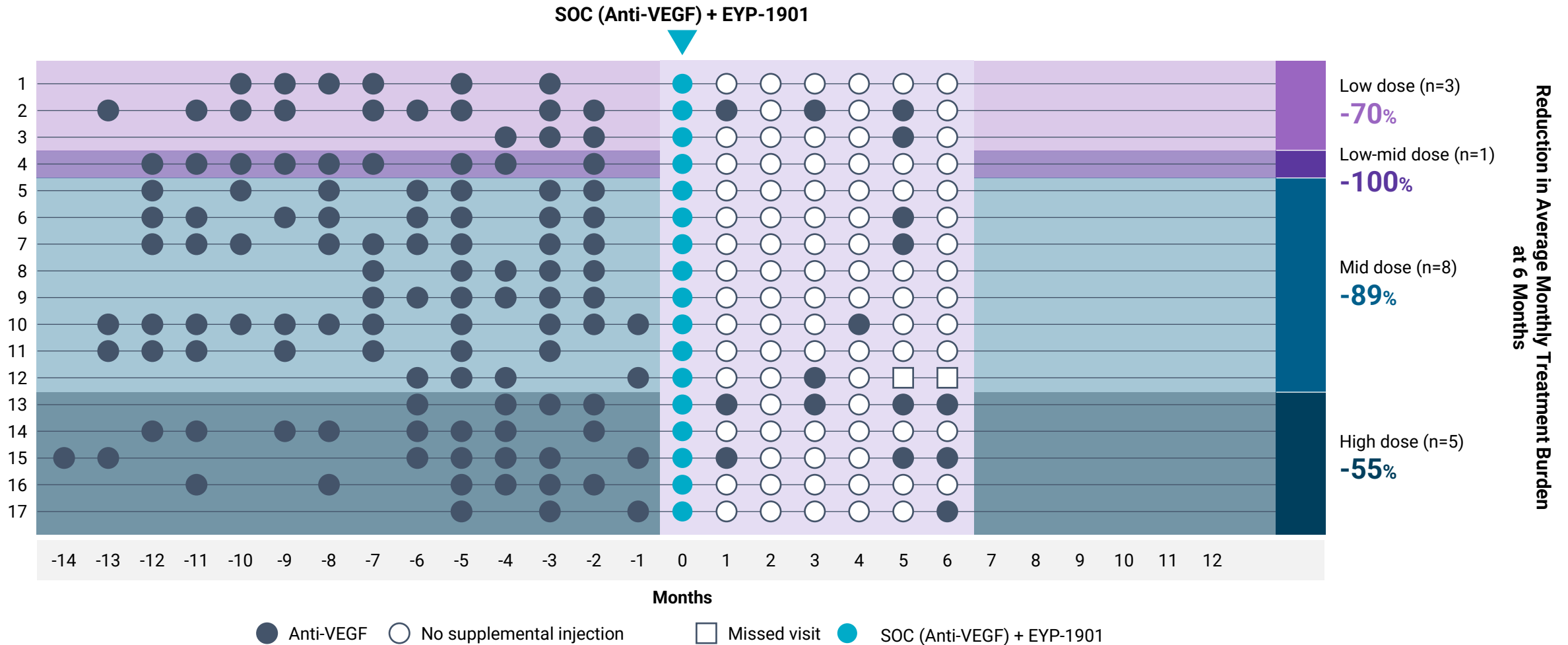
- ✓ No vitreous floaters
- ✓ No endophthalmitis
- ✓ No retinal detachment
- ✓ No insert migration in the anterior chamber
- ✓ No retinal vasculitis
- ✓ No posterior segment inflammation
- ✓ No occlusive events



# Reduction in Treatment Burden - 79% at 6 Months

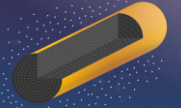


SOC Anti-VEGF Injections Before and After Treatment



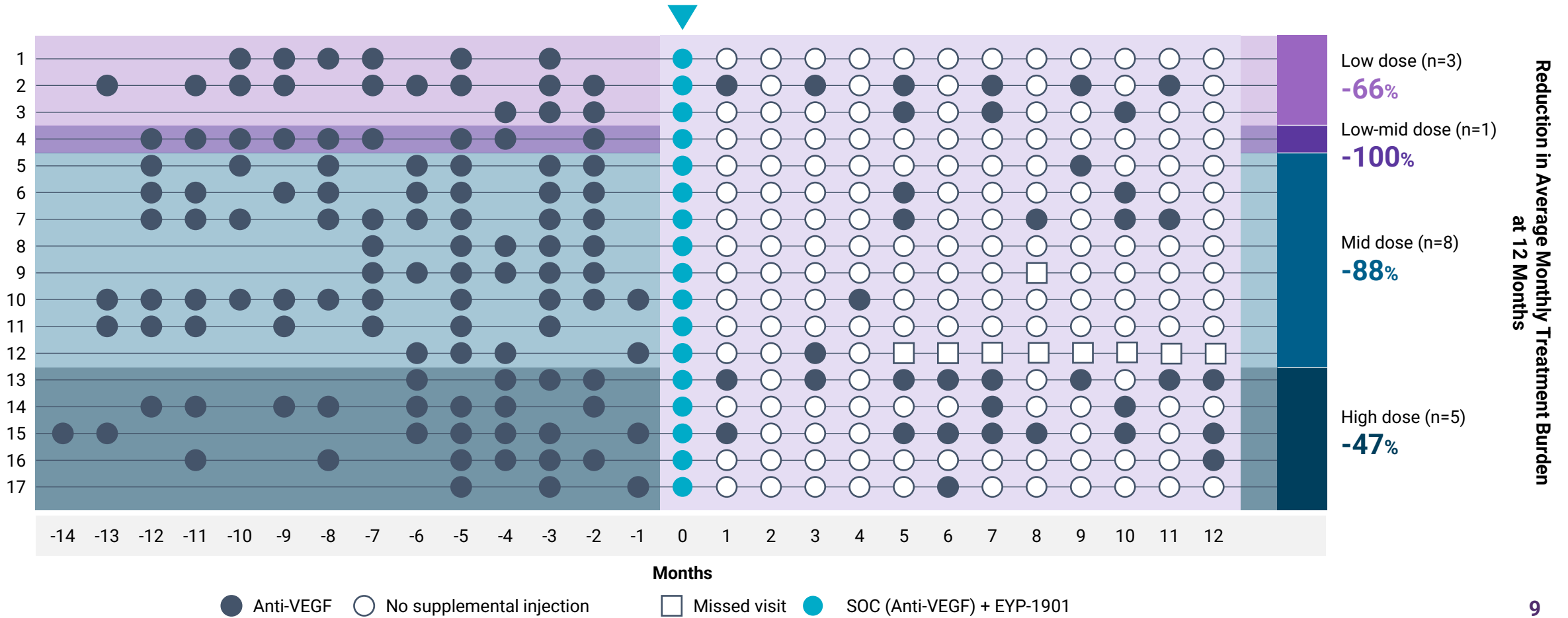


# Reduction in Treatment Burden - 74% at 12 Months

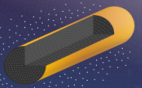


## SOC Anti-VEGF Injections Before and After Treatment

SOC (Anti-VEGF) + EYP-1901



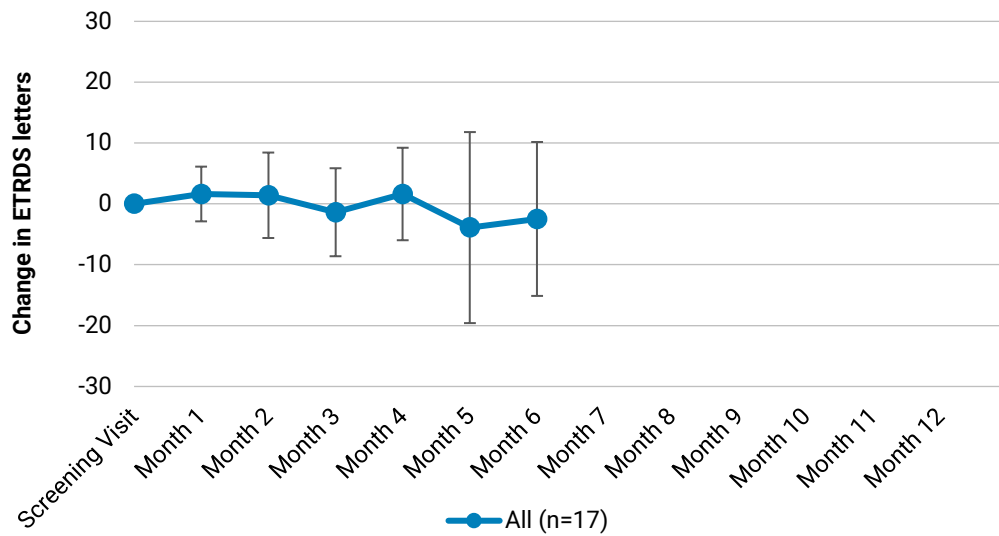
# Results at 6 Months: Mean BCVA and CST Stable After Single EYP-1901 Treatment



For all 17 eyes at 6 months

BCVA = -2.5 letters

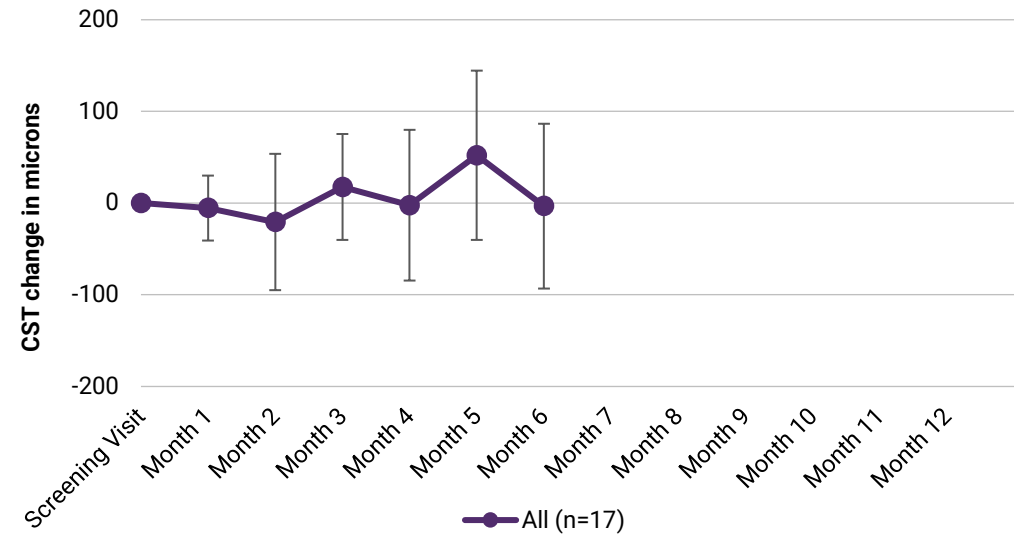
## Mean change in BCVA from screening visit



For all 17 eyes at 6 months

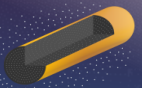
CST on OCT = -3.4 microns

## Mean change in CST from screening visit



Error bars represent the standard deviation.

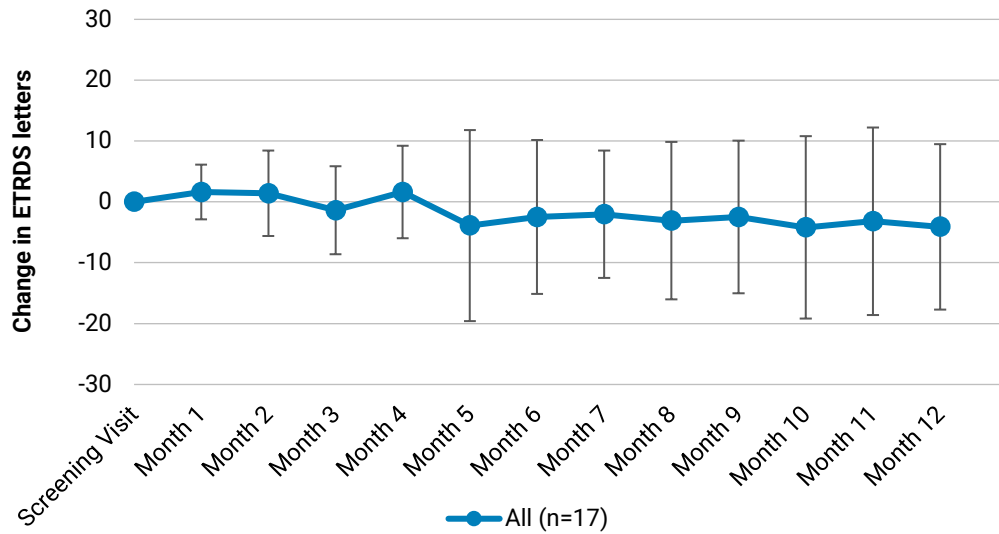
# Results at 12 Months: Mean BCVA and CST Stable After Single EYP-1901 Treatment



For all 17 eyes at 12 months

BCVA = -4.1 letters

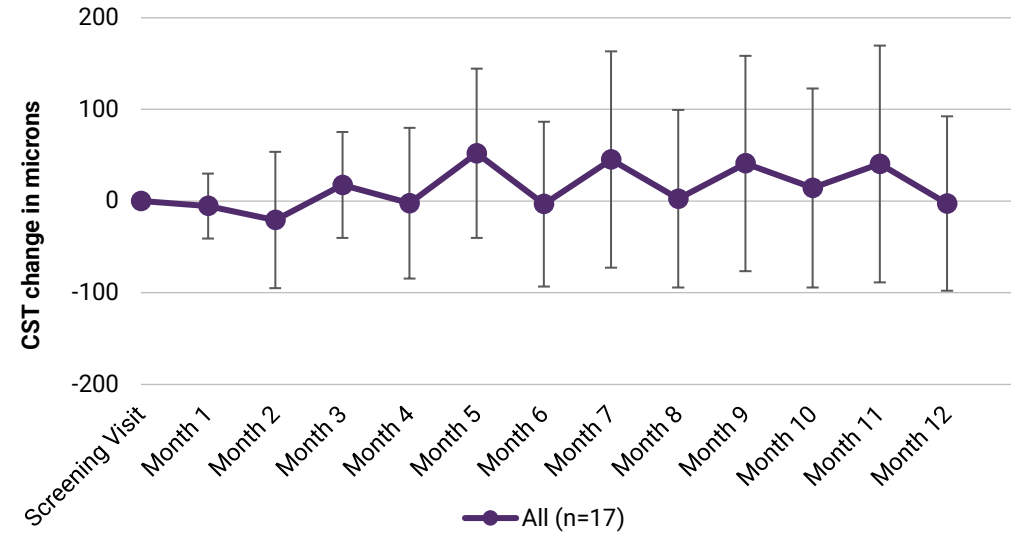
## Mean change in BCVA from screening visit



For all 17 eyes at 12 months

CST on OCT = -2.8 microns

## Mean change in CST from screening visit



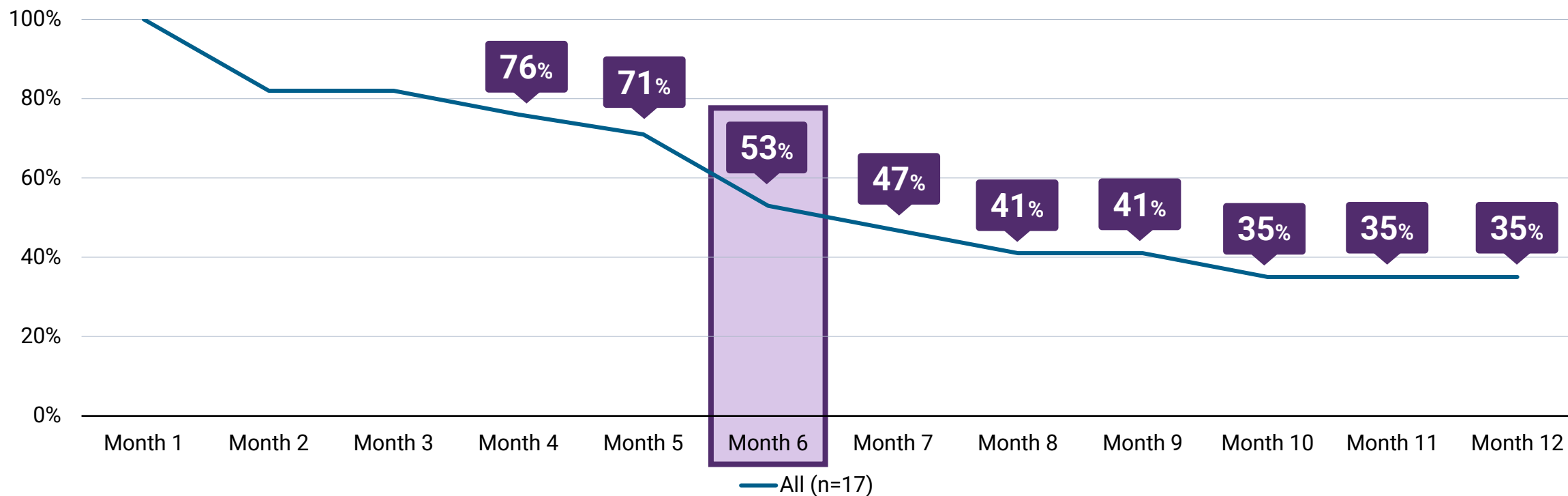
Error bars represent the standard deviation.



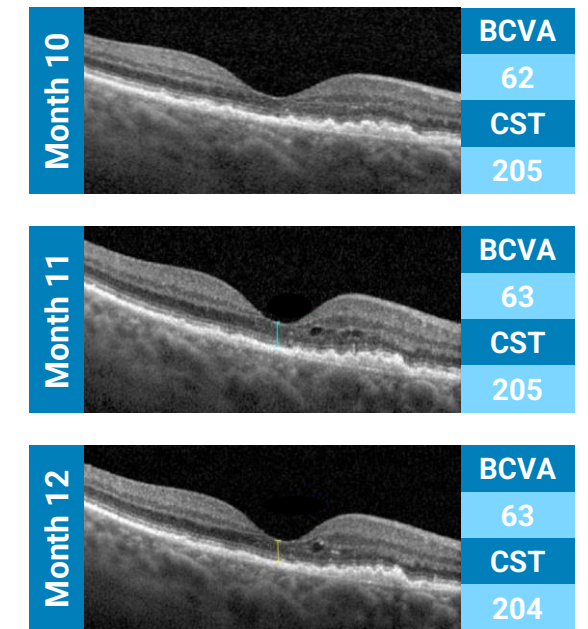
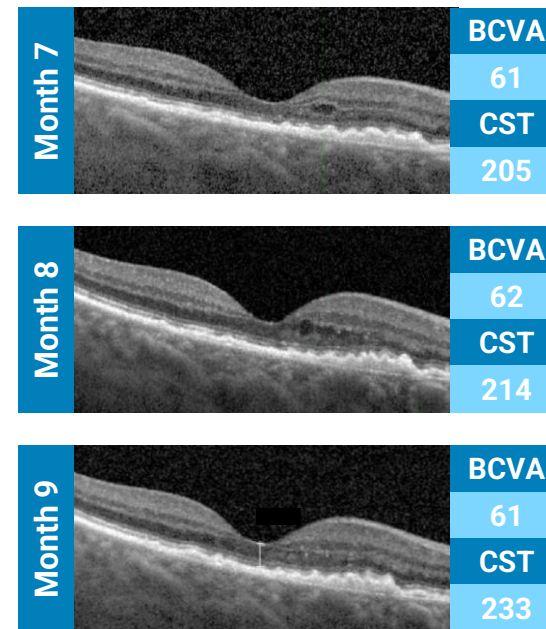
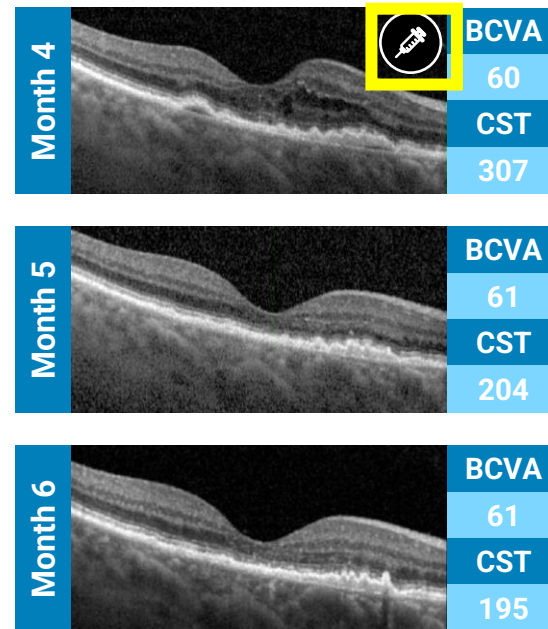
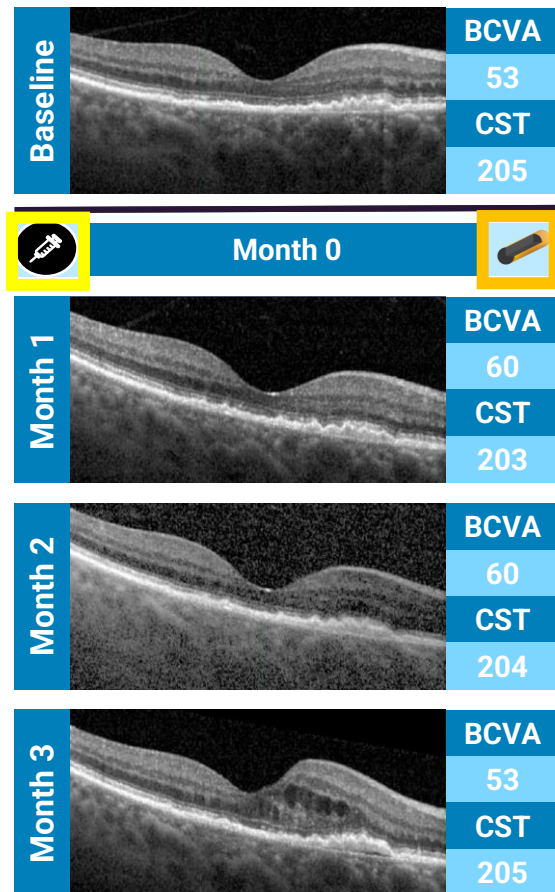
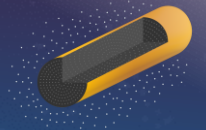
# Supplemental Injection-Free Rates Up to Each Visit: All Cohorts (N=17)



*Median Time to Supplemental Anti-VEGF = 6 Months*

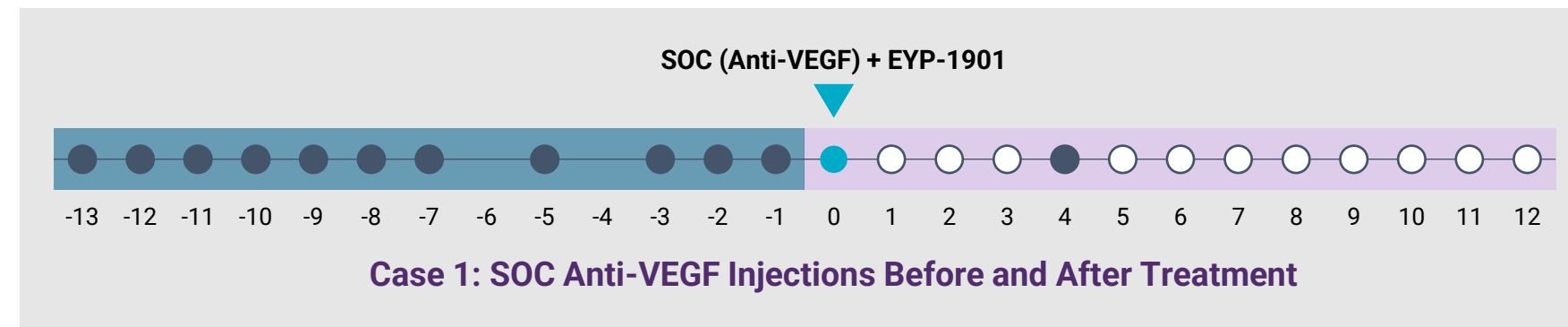


# Case 1: Mid Dose Cohort Remained Dry After One Supplemental Injection

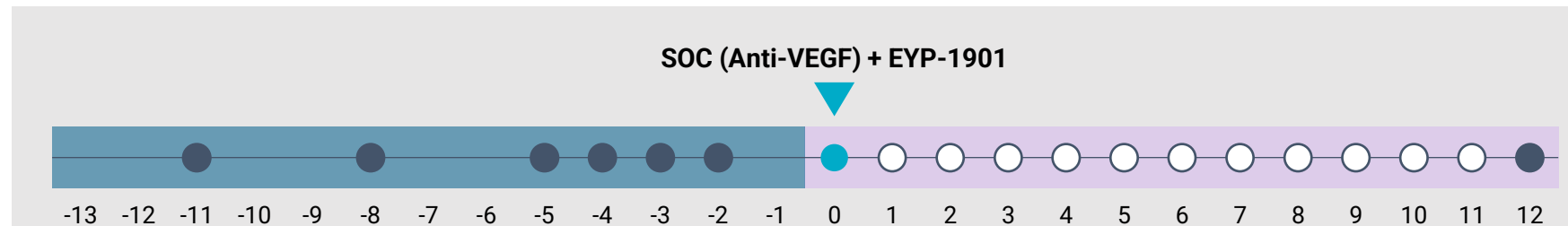
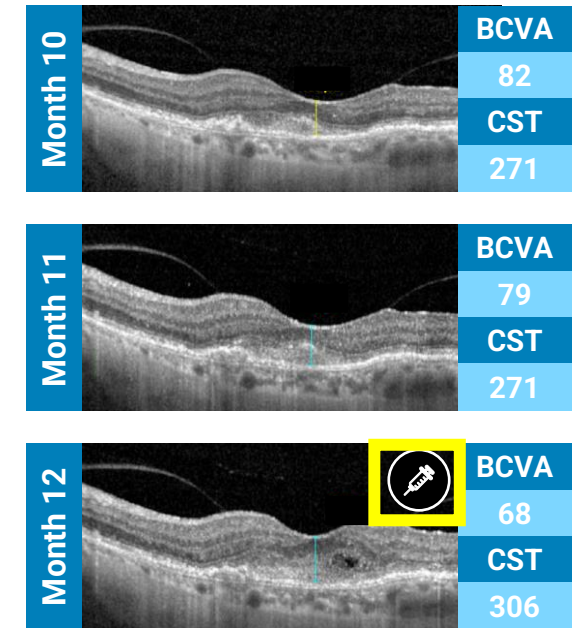
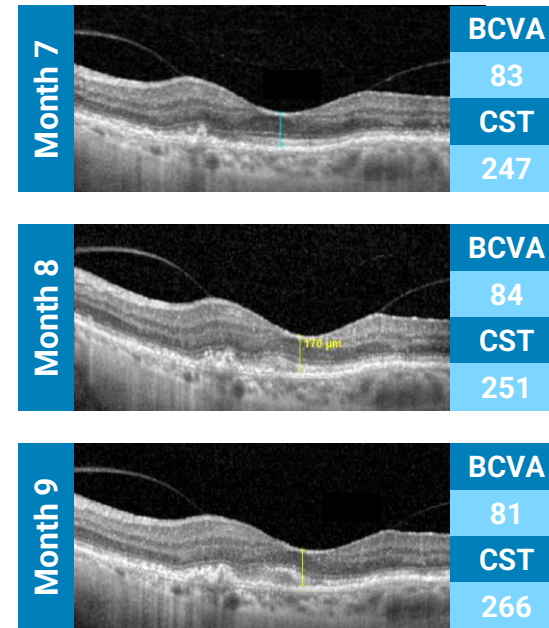
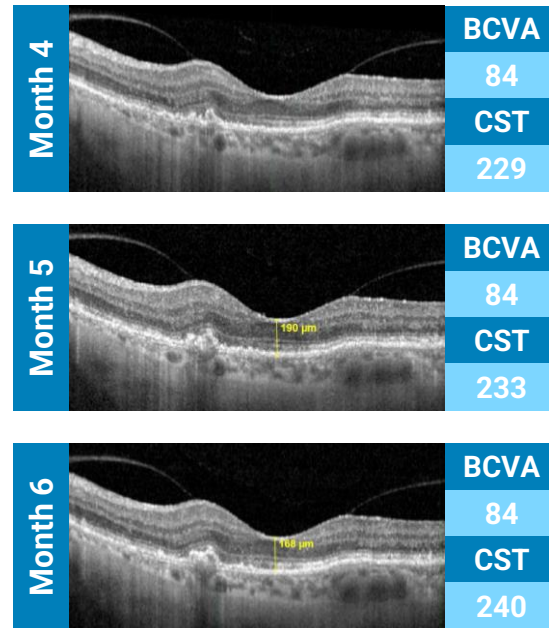
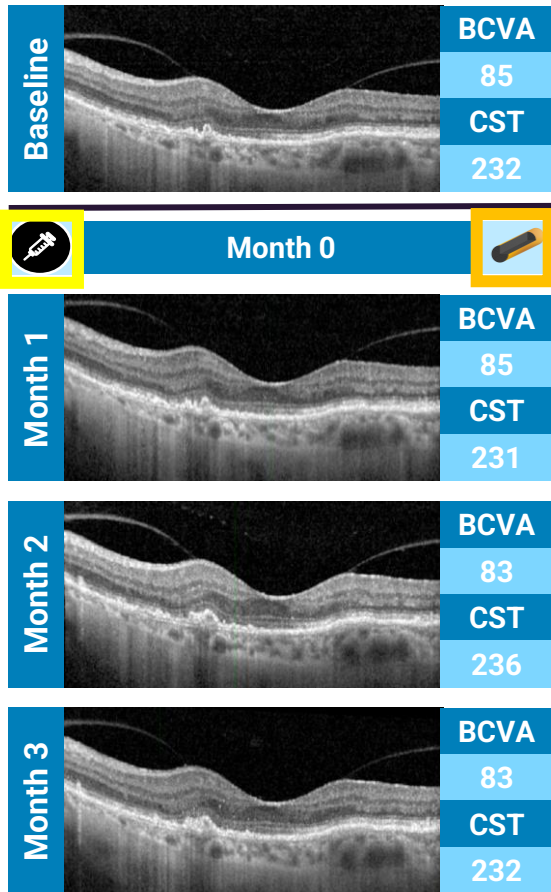
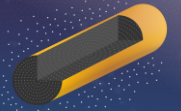


\*Screening also serves as baseline image

- = administration of Anti-VEGF
- = administration of EYP-1901



# Case 2: High Dose Cohort Remained Dry For 12 Months After Single EYP-1901 Treatment



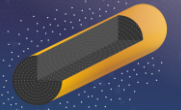
Case 2: SOC Anti-VEGF Injections Before and After Treatment

\*Screening also serves as baseline image

- = administration of Anti-VEGF
- = administration of EYP-1901



# EYP-1901 DAVIO Phase 1 Clinical Trial 12-Month Results – All Objectives Met



## PROOF OF CONCEPT FOR INTRAVITREAL VOROLANIB IN nAMD

### SAFETY | Favorable Safety Profile



No ocular  
SAEs reported



No drug-related systemic  
SAEs reported



Ocular AEs – majority mild  
and expected

### EFFICACY AND DURABILITY | Positive Efficacy Trends After Single EYP-1901 Injection

**6 months**

median time to  
supplemental  
anti-VEGF

**35%**

supplemental  
injection-free up  
to 12 months

**74%**

reduction in  
treatment burden at  
12 months

# DAVIO Phase 1 Study Results Support Advancing EYP-1901 to Phase 2 in Multiple Indications



## Three Phase 2 Trials Planned



nAMD initiation  
expected in **3Q  
2022**



Diabetic  
retinopathy  
initiation expected  
in **2H 2022**



Diabetic macular  
edema initiation  
expected by  
**H1 2023**

# Special Thanks to all the DAVIO Investigators, Study Coordinators, and Patients!

## Investigators:

Dr. Nika Bagheri

Dr. Mark Barakat

Dr. David Boyer

Dr. W. Z. Bridges, Jr.

Dr. Michael Cohen

Dr. David Eichenbaum

Dr. Vrinda Hershberger

Dr. Rahul Khurana

Dr. David Lally

Dr. Sunil S. Patel

Dr. Philip Storey