Factor 12 RNAi-based therapeutic as a prophylactic anti-thrombotic therapy

Stacey Melquist, PhD, PMP Arrowhead Pharmaceuticals



Presenter Disclosure Information Elements

Stacey Melquist, PhD Factor 12 RNAi-based therapeutic as a prophylactic anti-thrombotic therapy

- FINANCIAL DISCLOSURE:
 - Presenter and all abstract authors are employees and stockholders of Arrowhead Pharmaceuticals



Forward-Looking Statements

This presentation contains forward-looking statements within the meaning of the "safe harbor" provisions of the Private Securities Litigation Reform Act of 1995. These statements are based upon our current expectations and speak only as of the date hereof. Our actual results may differ materially and adversely from those expressed in any forward-looking statements as a result of various factors and uncertainties, including, without limitation, the safety and efficacy of our product candidates, the duration and impact of regulatory delays in our clinical programs, our ability to finance operations, the timing for starting and completing clinical trials, rapid technological change in our markets, and the enforcement of our intellectual property rights. Our Annual Report on Form 10-K, recent and forthcoming Quarterly Reports on Form 10-Q, recent Current Reports on Forms 8-K, and other SEC filings discuss some of the important risk factors that may affect our ability to achieve the anticipated results, as well as our business, results of operations and financial condition. Readers are cautioned not to place undue reliance on these forward-looking statements. Additionally, Arrowhead disclaims any intent to update these forward-looking statements to reflect subsequent developments.



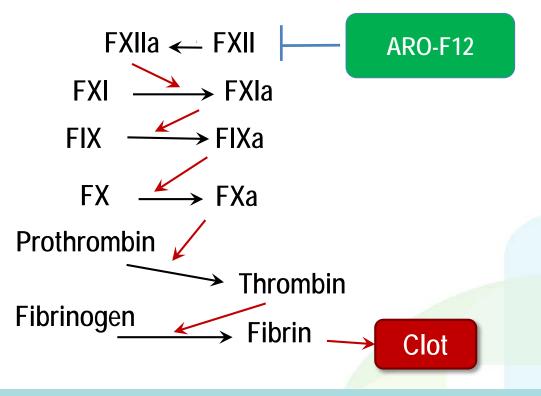
Factor XII is an attractive target for RNAi therapeutics

Factor XII (F12)

- Key component of contact activation pathway
- Predominantly expressed in the liver; circulates in plasma

F12 inhibition is genetically validated

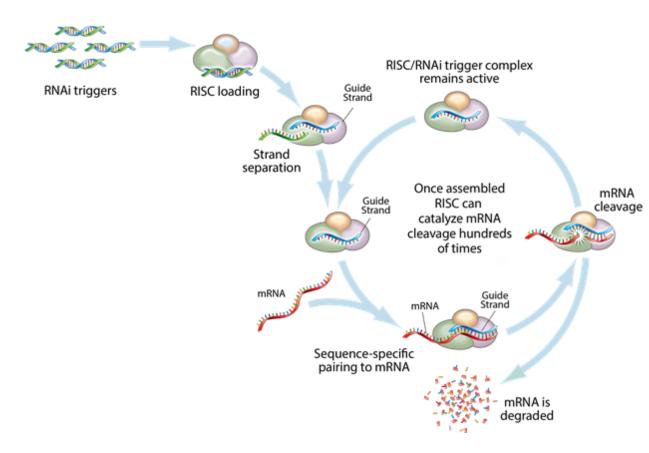
- F12-deficient mice:
 - viable and fertile⁴
 - do not show bleeding defects^{4,5}
 - protected from thromboembolic disease (stroke, pulmonary embolism)⁵
- F12 deficiency in humans is <u>not</u> associated with either bleeding or thrombotic disorders^{1,2,3}



- ¹ Girolami A. *et al.* (2004) J. Thromb. Thrombolysis 17:139–143 ² Koster A. *et al.* (1994) Br. J. Haematol. 87:422–424
- ³ Zeerleder S. *et al.* (1999) Thromb. Haemost. 82:1240–1246
- ⁴ Pauer, H. U., *et al.* (2004) *Thromb. Haemost.* 92:503
- ⁵ Renne, T. et al. (2005) J. Exp. Med. 202:271
- * Figure modified from Albert-Weissenberger, C., et al. (2014) Front. Cell Neurosci. 8:345

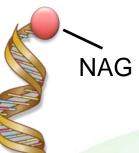


Gene silencing with RNA interference



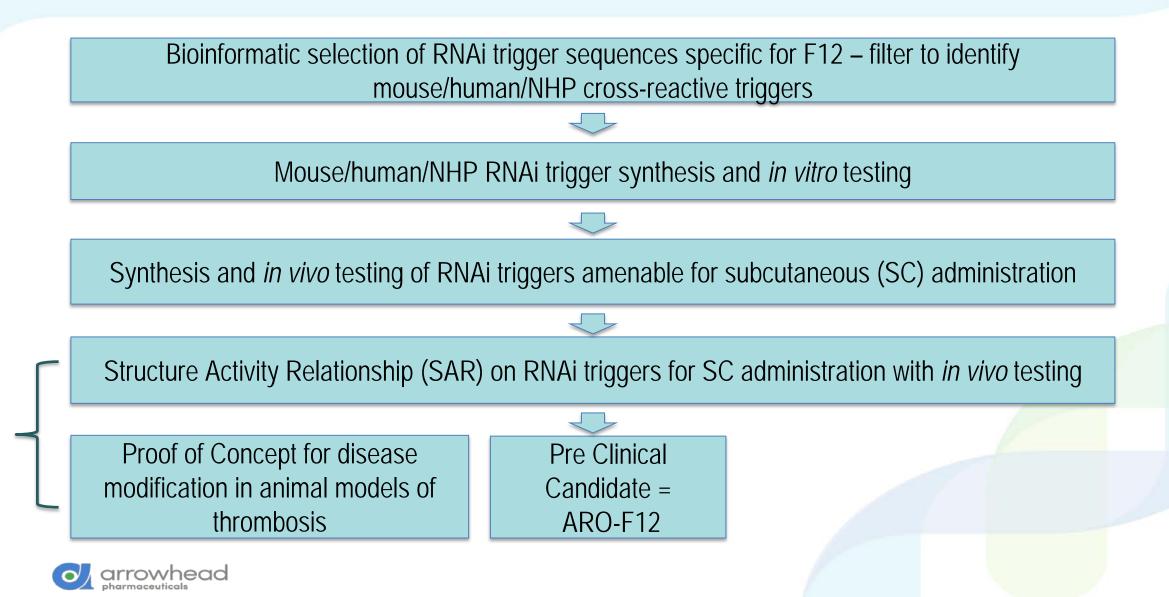
ARO-F12 RNAi trigger

- Short dsRNA targeting *F12* mRNA
- 5' NAG (Liver-tropic targeting ligand)
- Injected SC



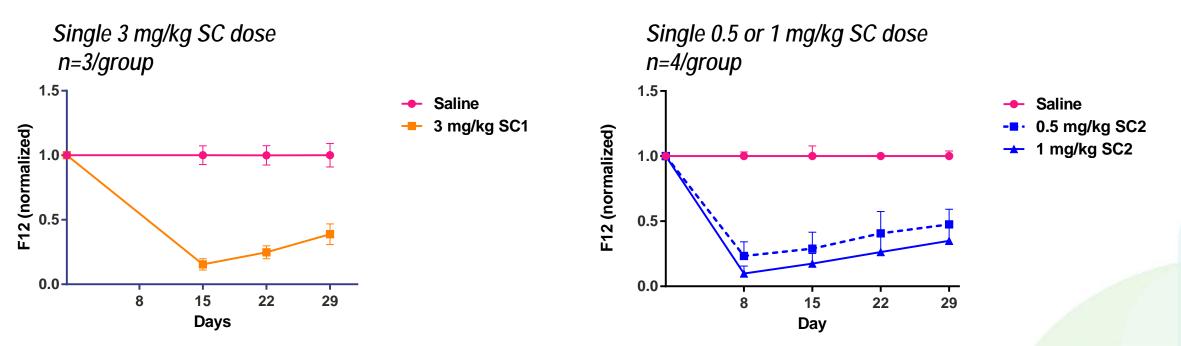


ARO-F12 screening funnel



Examination of modified RNAi triggers in mice

First Generation



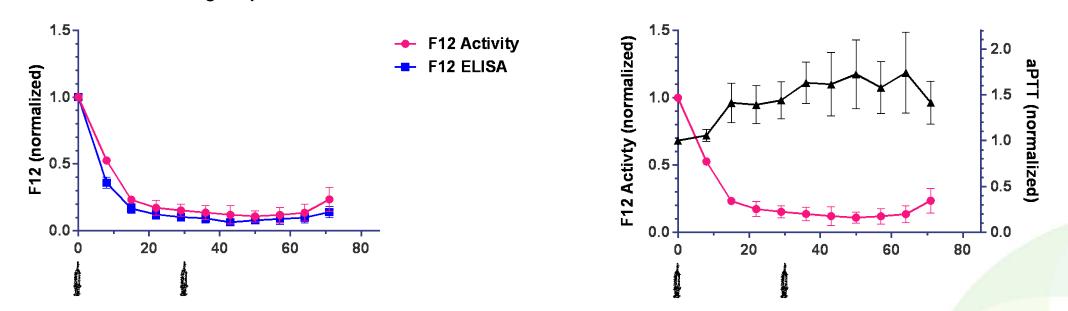
Second Generation

- Modifications to SC1 to yield SC2 improved knockdown
 - 85% at 3 mg/kg vs 91% at 1 mg/kg at nadir
- Dose response observed with SC2



Second Generation Triggers – Examination in NHP

• Initial SC dose of 3 mg/kg SC2, followed by 1.5 mg/kg dose on day 29

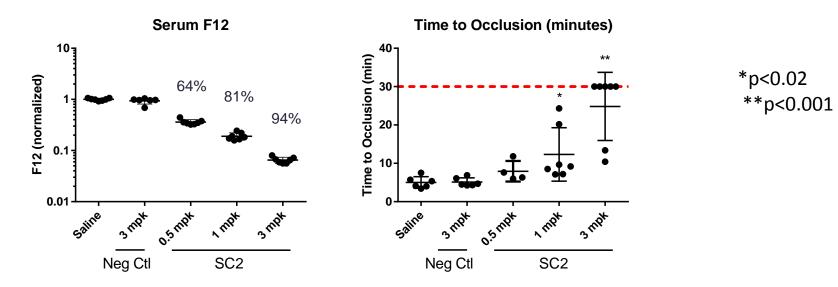


n=2/group

- Achieved ~90% knockdown of F12 in NHP after the second dose at 1.5 mg/kg with >1 month duration
- 90% knockdown of F12 activity correlates with significant increase in aPTT
- No changes in toxicity markers (clin chem, CBC) after dosing

Ferric-chloride model is dose responsive

- Thrombus induced by exposure of carotid artery to FeCl₃
- Measure time to blood flow occlusion (thrombus formation)
- Single SC injection of SC2 or negative control, 2 weeks prior to challenge with FeCl₃, n=7/group

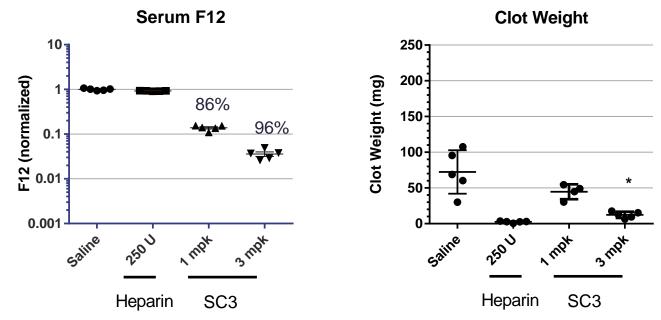


- Dose response observed for inhibition of clot formation
- Statistically significant change in occlusion times (p<0.02) observed with >80% knockdown of serum F12



Rat arterio-venous shunt model is dose responsive

- Measure thrombus weight by collection from Tygon tubing shunt
- Single dose of SC3, 14 days prior to assessment, n=5/group

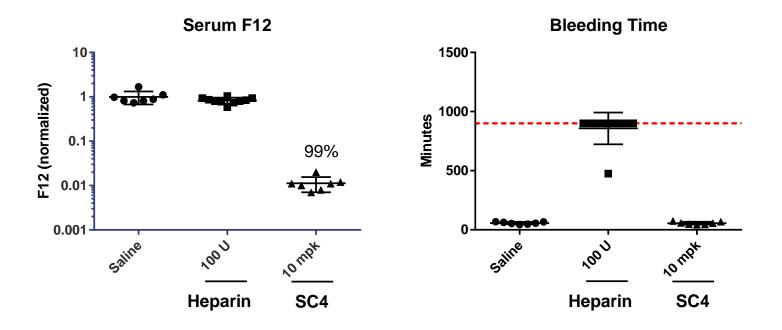


- Dose response observed for serum F12 levels and thrombus weight
- Statistically significant reduction in thrombus weight at >95% F12 knockdown (*p=0.002)



No increase in bleeding risk (mouse model)

- Transverse cut of tail vein, monitor time to clotting
- Single dose SC4, 14 days prior to assessment, n=7/group (saline and SC4), n=10/group (heparin)



- No increased bleeding observed, even with 99% knockdown of F12 levels
- Consistent with F12^(-/-) mice showing no increase in bleeding over wild type controls



Conclusions

- Arrowhead Pharmaceuticals is developing a RNAi-based approach targeting F12 as a prophylactic treatment of thromboembolism
- Human/NHP/rodent cross-reactive RNAi triggers exhibited ~90% knockdown of serum F12 levels with up to 5 weeks duration in both mice and NHPs
- Ferric chloride and arterio-venous shunt rodent models showed statistically significant reduction in thrombus formation with >95% knockdown of serum F12
- No prolonged bleeding in treated mice with >99% knockdown of serum F12



Acknowledgements

- Biology Department
 - Steve Kanner
 - Bioassays Team
 - Holly Hamilton
 - Christine Chapman
 - Aaron Andersen
 - Qili Chu
 - Laboratory Animal Resources
 - Julia Hegge
 - Tracie Milarch

- Chemistry Department
 - Tao Pei
 - Zhen Li
 - Oligo Synthesis Team
 - Megan Walters
 - Collin Hagen
 - Casi Schienebeck

