Seladelpar Treatment Resulted in Correlated Decreases in Serum IL-31 and Pruritus in Patients With Primary Biliary Cholangitis (PBC): TOP-063 Post-hoc Results From the Phase 3 Randomized, Placebo-Controlled ENHANCE Study

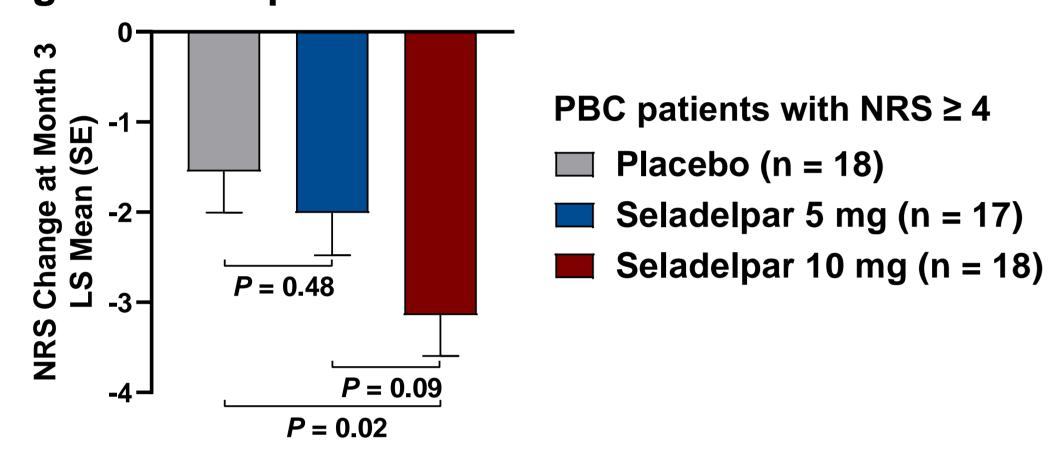
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BACKGROUND AND AIMS

- Pruritus is a debilitating symptom impacting the quality of life for many people living with PBC and remains a high unmet need
- The underlying mechanisms responsible for pruritus in PBC are not well understood
- Interleukin-31 (IL-31) is a cytokine reported to be mechanistically relevant to pruritus and its treatment, including in individuals with cholestasis
- Treatment with seladelpar, a selective PPAR-delta agonist, is associated with significant improvement in patients with moderate to severe pruritus (NRS ≥ 4)^{1,2}

Significant Improvement in Pruritus in PBC Patients¹



Our aim was to evaluate the effect of seladelpar on serum IL-31 and its association with pruritus in patients with PBC

METHODS

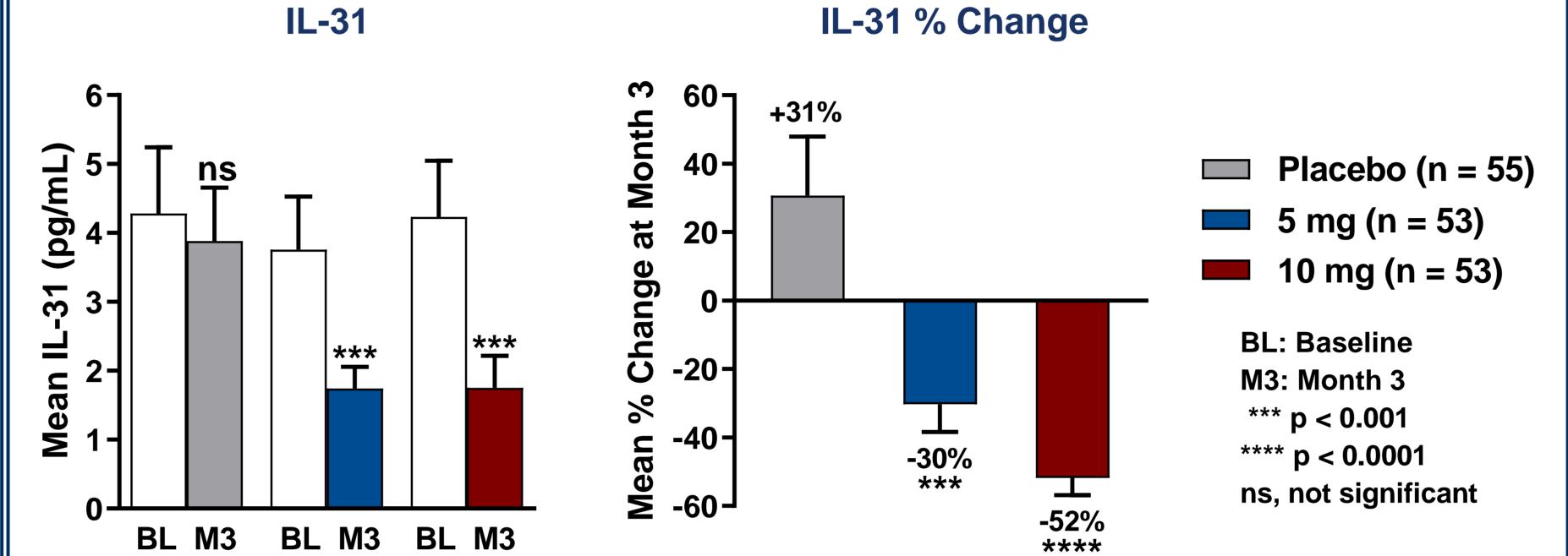
- IL-31 levels were quantified in serum samples from the ENHANCE study of seladelpar¹ (EudraCT 2018-001171-20) in PBC patients who received daily oral doses of placebo (n = 55), seladelpar 5 mg (n = 53) or 10 mg (n = 53) for 3 months
- Serum IL-31, bile acids and their correlation with patient-reported pruritus numerical rating scale (NRS, 0-10) were assessed

RESULTS

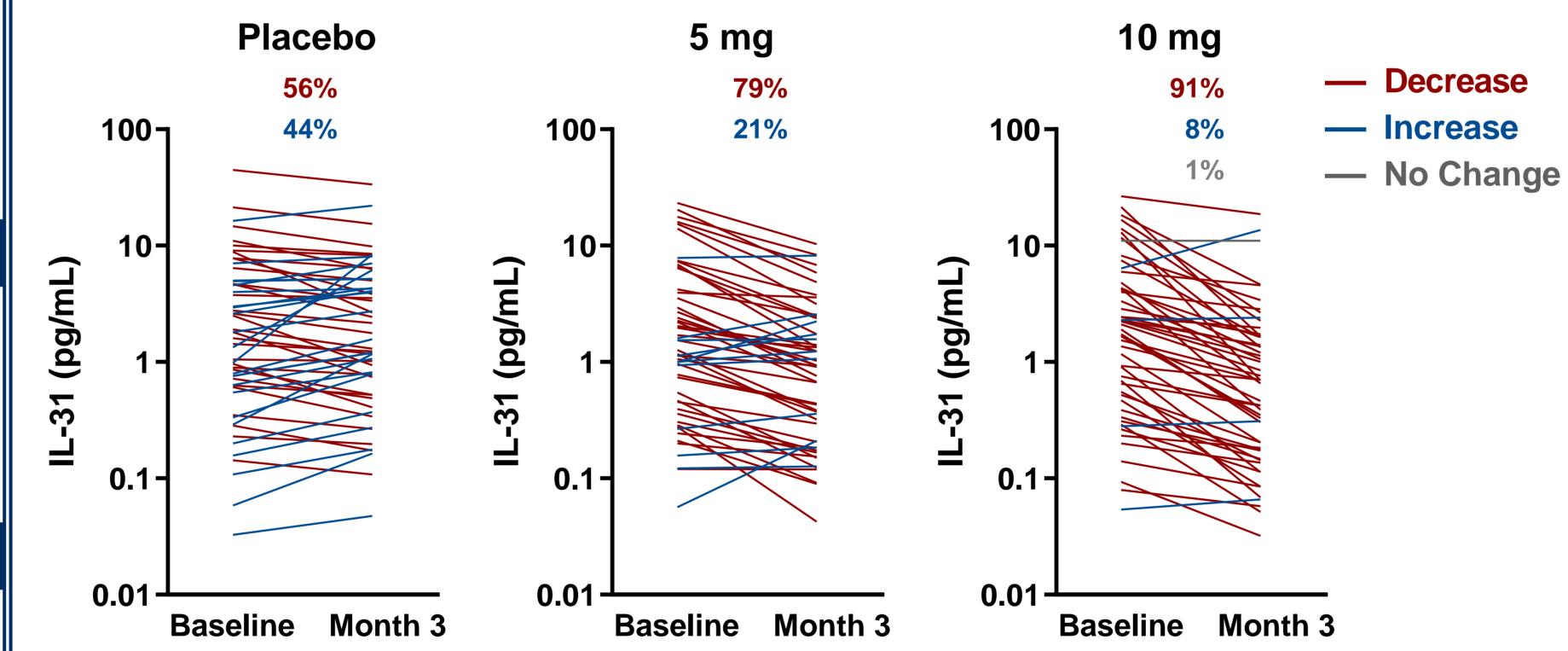
Demographic and Baseline Characteristics

| Mean (SD) | Placebo n = 55 | Seladelpar 5 mg n = 53 | Seladelpar 10 mg n = 53 | Total N = 161 |
|-------------------------------------|-------------------|------------------------------|-------------------------------|------------------|
| Female, n (%) | 54 (98%) | 48 (91%) | 50 (94%) | 152 (94%) |
| Age, years | 56 (7) | 56 (9) | 57 (10) | 56 (9) |
| Duration of PBC, years | 8.9 (6.2) | 9.3 (6.2) | 8.9 (7.1) | 9.0 (6.5) |
| AMA Positive, n (%) | 49 (89%) | 49 (92%) | 47 (89%) | 145 (90%) |
| Concomitant UDCA, n (%) | 54 (98%) | 50 (94%) | 49 (92%) | 153 (95%) |
| UDCA Dose, mg/kg/day | 15 (2) | 15 (4) | 14 (3) | 15 (3) |
| Pruritus, NRS (0-10) | 2.7 (2.5) | 2.8 (2.6) | 2.5 (2.5) | 2.7 (2.5) |
| Moderate to severe (NRS ≥ 4) | 6.1 (1.3) | 6.3 (1.5) | 6.0 (1.4) | 6.1 (1.4) |
| Moderate to severe (NRS ≥ 4), n (%) | 15 (28%) | 15 (29%) | 14 (26%) | 44 (28%) |
| ALP (37-116 U/L)* | 282 (105) | 281 (126) | 263 (96) | 275 (109) |
| ALT (6-41 U/L) | 41 (20) | 46 (24) | 42 (20) | 43 (21) |
| AST (9-34 U/L) | 35 (14) | 38 (18) | 38 (14) | 37 (15) |
| GGT (7-38 U/L) | 200 (153) | 202 (162) | 208 (154) | 203 (155) |
| Total Bilirubin (0.1 - 1.1 mg/dL) | 0.67 (0.27) | 0.70 (0.31) | 0.65 (0.28) | 0.67 (0.29) |
| Direct Bilirubin (0-0.2 mg/dL) | 0.19 (0.12) | 0.20 (0.15) | 0.18 (0.12) | 0.19 (0.13) |
| * Normal range | | 1 | I | I |

Seladelpar Reduces Serum IL-31 Levels

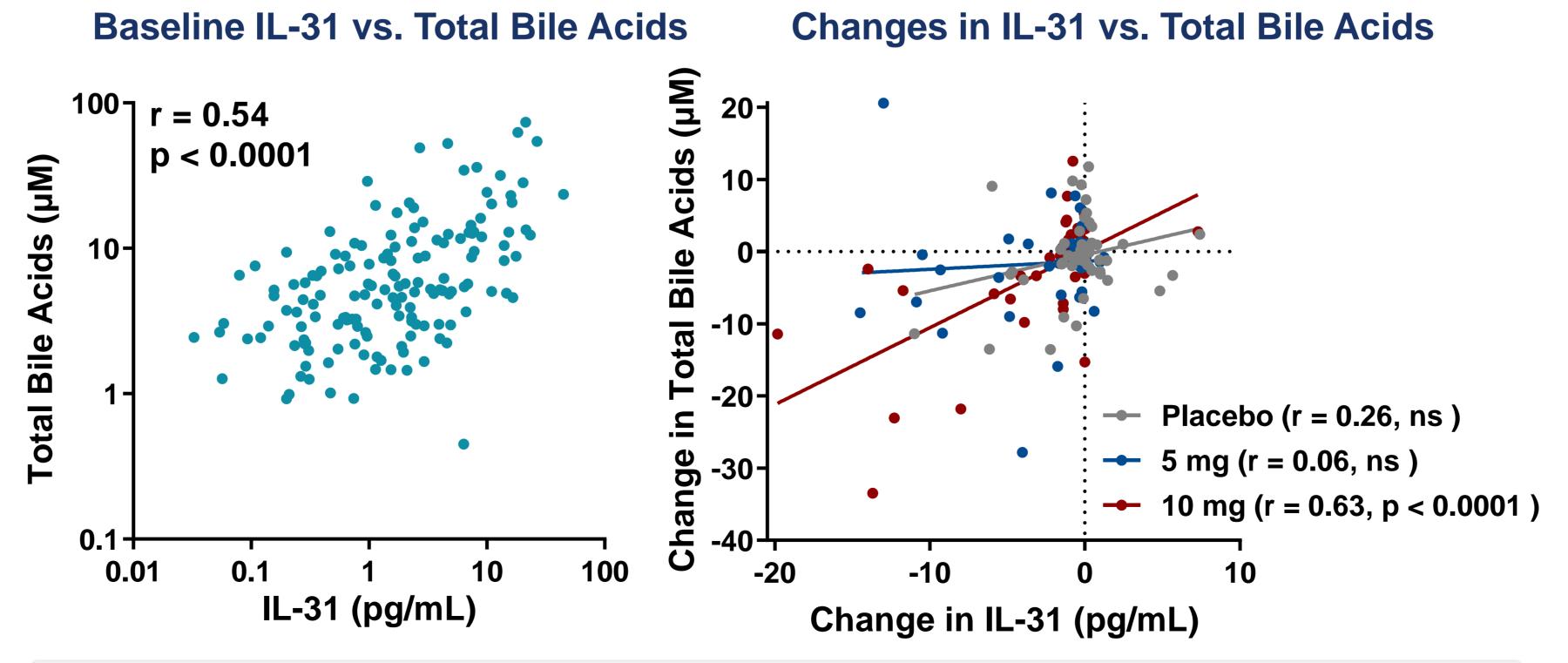


Change in IL-31 per Patient



Seladelpar treatment substantially decreased IL-31 levels in patients with PBC

Serum IL-31 Correlates with Bile Acids

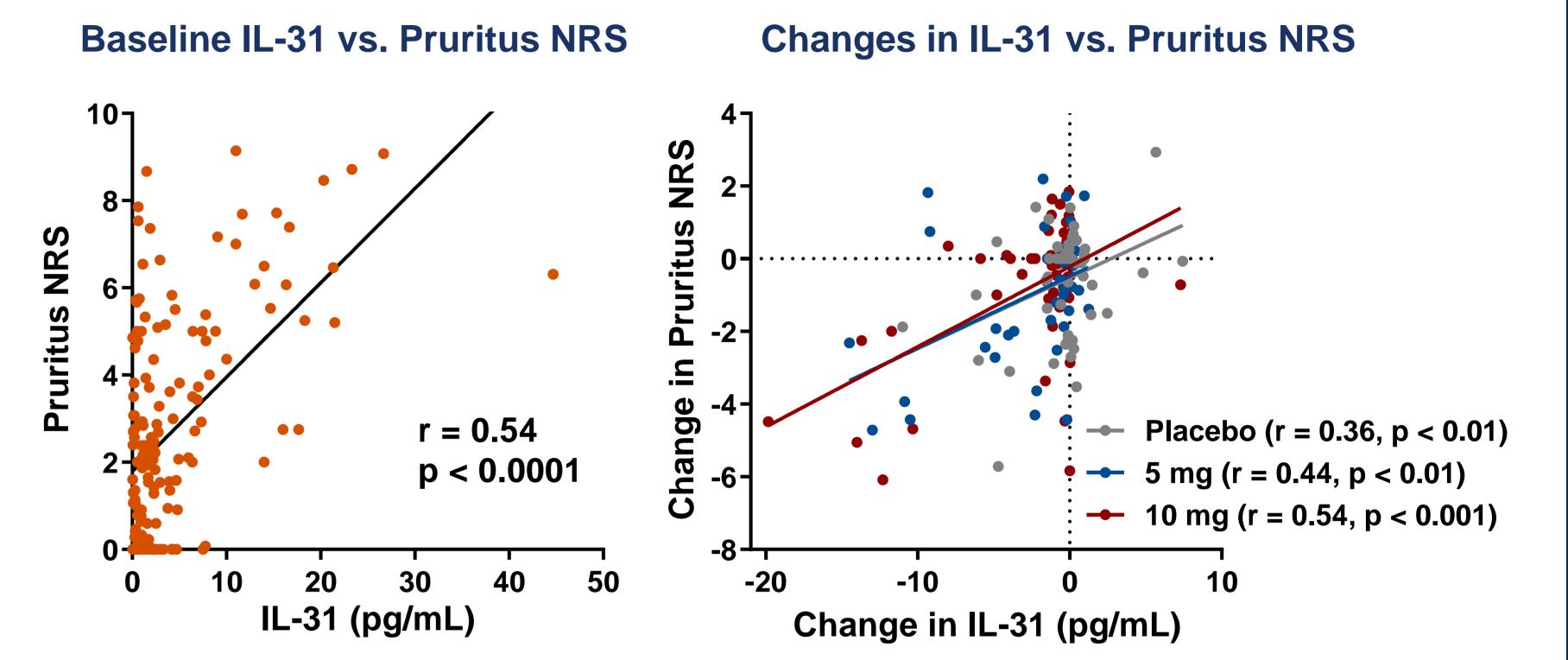


Baseline IL-31 correlated with total bile acids

 A strong and significant correlation between changes in serum IL-31 and total bile acids was observed with seladelpar 10 mg treatment

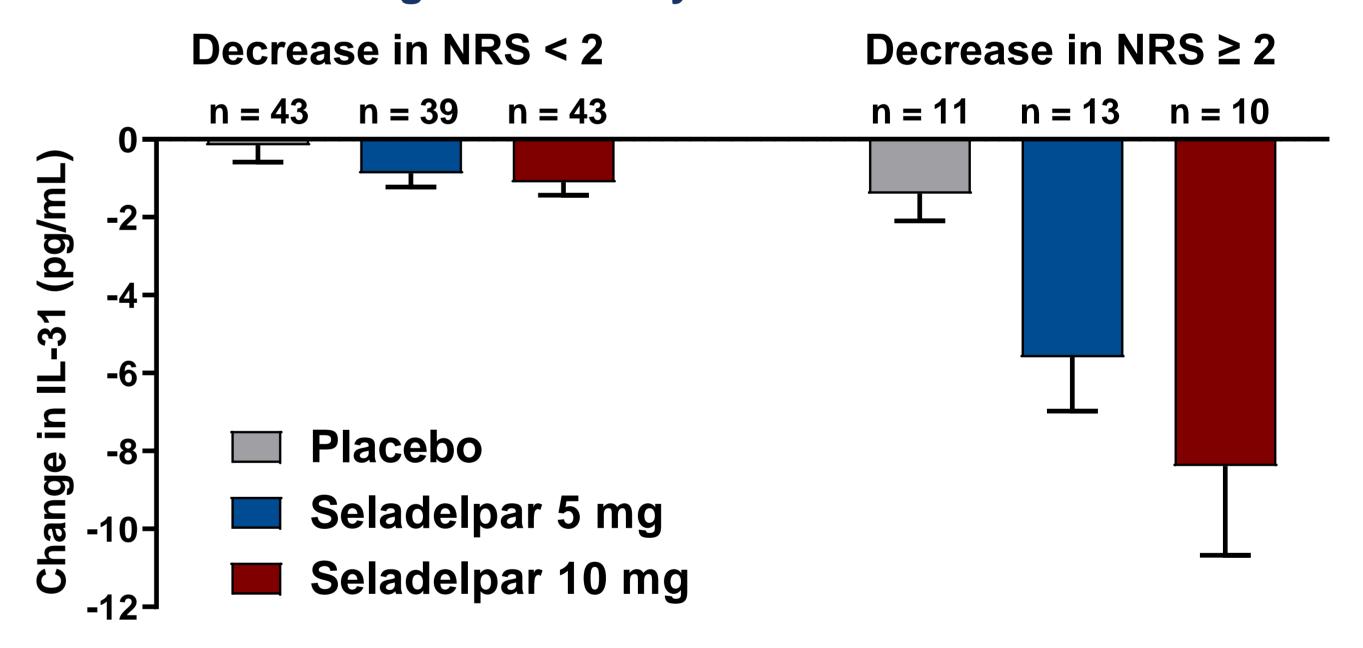
RESULTS

Serum IL-31 Correlates with Pruritus NRS



- Baseline IL-31 levels positively correlated with pruritus NRS
- A significant and strong correlation was maintained between changes in IL-31 and pruritus NRS

Changes in IL-31 by Decrease in Pruritus NRS



 Patients with a clinically meaningful improvement in pruritus NRS (≥ 2 decrease) demonstrated greater dose-dependent reduction in IL-31 compared to those without pruritus improvement

CONCLUSIONS

- Seladelpar dose-dependently decreased IL-31 levels in patients with PBC
- Reduction in serum IL-31 correlated with pruritus improvement
- Serum IL-31 correlated with total bile acids and changes in total bile acids with seladelpar 10 mg treatment
- These results suggest that IL-31 may have a role in pruritus in patients with PBC
- IL-31 should be considered as a biomarker for anti-pruritic effects of seladelpar
- IL-31 may also be a component of the multifactorial causes of pruritus in PBC

REFERENCES

- 1. Hirschfield GM, Shiffman ML, Gulamhusein A, Kowdley KV, Vierling JM, Levy C, Kremer AE, et al. Seladelpar efficacy and safety at 3 months in patients with primary biliary cholangitis: ENHANCE, a phase 3, randomized, placebo-controlled study. *Hepatology* 2023, doi:10.1097/HEP.0000000000039.
- 2. Kremer AE, Mayo MJ, Hirschfield G, Levy C, Bowlus CL, Jones DE, Steinberg A, McWherter CA, Choi Y-J. Seladelpar improved measures of pruritus, sleep, and fatigue and decreased serum bile acids in patients with primary biliary cholangitis. *Liver Int. 2022*; 42: 112–23.