

AN ONGOING PHASE 1B/2 OPEN-LABEL CLINICAL TRIAL TO EVALUATE THE SAFETY AND EFFICACY OF AU-011 FOR THE TREATMENT OF CHOROIDAL MELANOMA – STUDY UPDATE

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DISCLOSURES

- Consultant:
 - Castle Biosciences
 - Aura Biosciences, Arix Biosciences



National Eye Institute



Research to
Prevent Blindness



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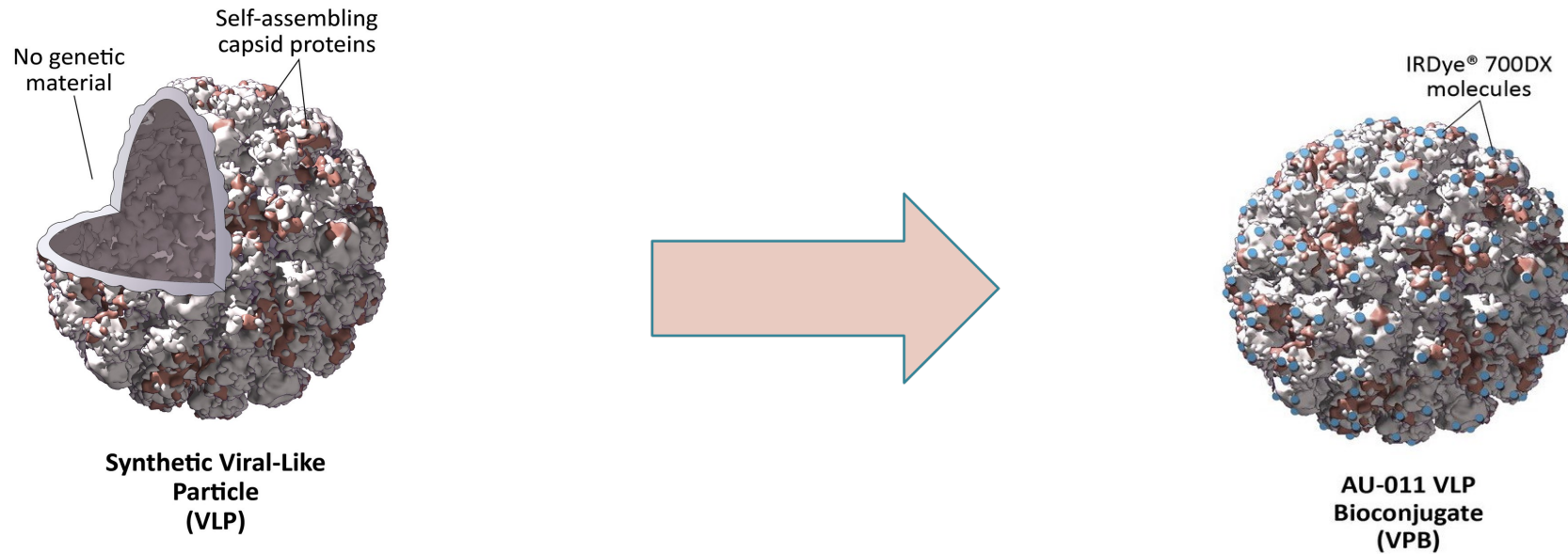


Research to
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AURA TECHNOLOGY: VIRAL-LIKE PARTICLE BIOCONJUGATES



Tumor Targeted Platform

- Technology discovered at National Cancer Institute (NIH) by Dr. J.T. Schiller¹
- Synthetic viral-like particles (VLP): recombinantly derived and then spontaneously reassemble into a viral-like capsid structure (like the original virus)
- Tumor targeting²: binds to specifically modified heparan sulphate proteoglycans (HSPGs) expressed on the tumor cell membrane

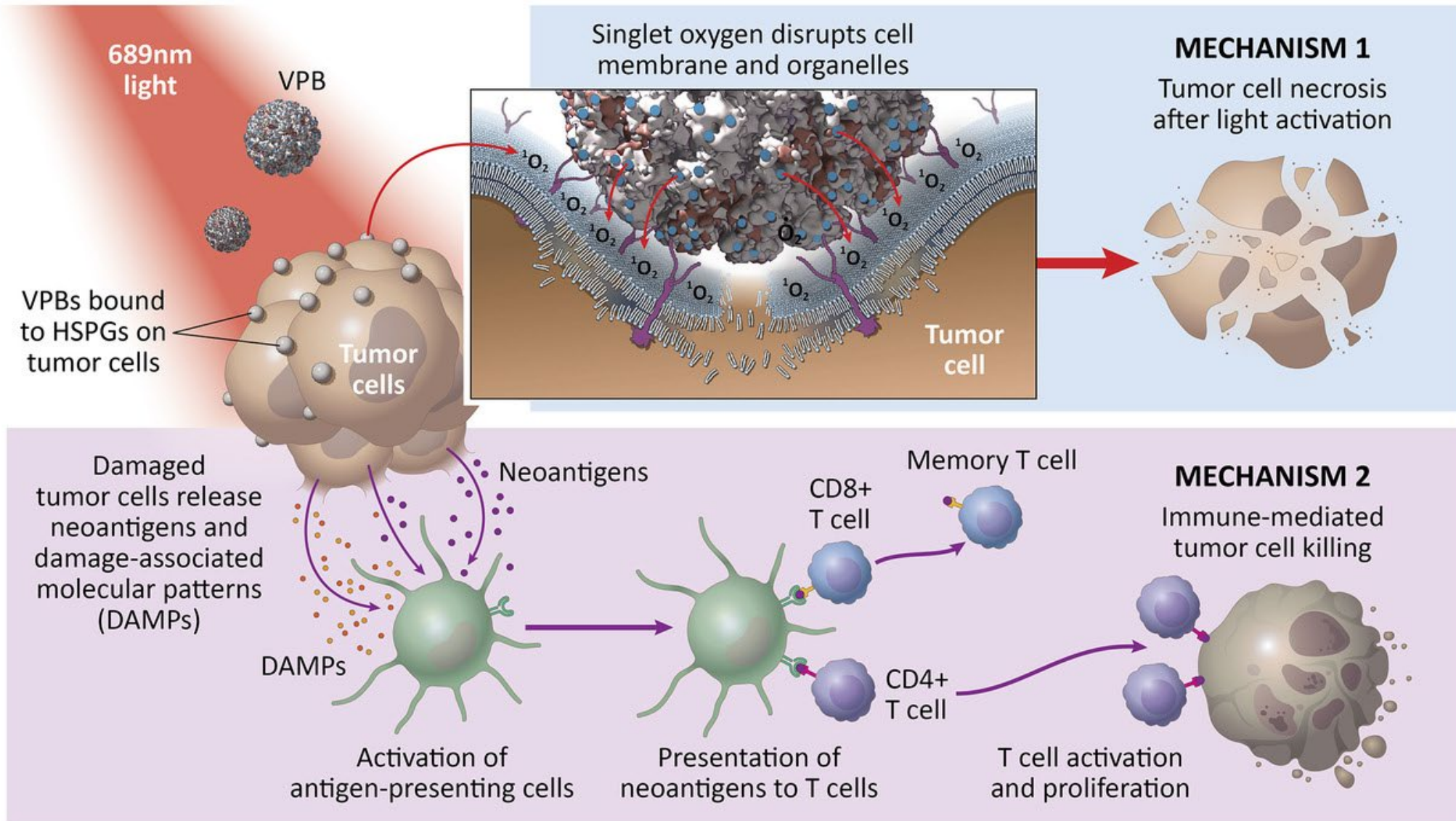
AU-011: VLP bioconjugate (VPB)

- ~200 IRDye® 700DX molecules covalently conjugated to synthetic capsid without interfering with tumor targeting
- Novel MoA: Laser activation causes acute cellular necrosis and subsequent immune activation
- **Dual targeting potential to improve safety: Bioconjugates preferentially bind tumor cells and laser focused on the tumor**

1. Lasker Award 2017.

2. Human papillomavirus capsids preferentially bind and infect tumor cells; Kines et al; *International Journal of Cancer* ,138;901–911, February 2016.

AU-011: NOVEL DUAL MECHANISM OF ACTION



STUDY DESIGN

Single Dose Cohorts

3 subjects per cohort (12 total)

20 µg
x 1 Laser

Cohort 1

40 µg
x 1 Laser

Cohort 2

80 µg
x 1 Laser

Cohort 3

80 µg
x 2 Lasers

Cohort 6

Multiple Dose Cohorts

3 subjects per cohort (12 total)

40 µg
x 1 Laser
(QW2)

Cohort 4

40 µg
x 1 Laser
(QW3)

Cohort 5

80 µg
x 1 Laser
(QW3)

Cohort 7

80 µg
x 2 Lasers
(QW3)

Cohort 8

1st Expansion Cohort 9

12 subjects

Dose Expansion
1 cycle of 80 µg x 2
Lasers QW3 with
Potential for Retreatment

2nd Expansion Cohorts 10 – 12

21 subjects

Dose Expansion
2 cycles of 80 µg x 2
Lasers QW3

56 Subjects Treated[#] – Enrollment Completed in January 2020

All enrolled subjects with clinical diagnosis of choroidal melanoma

8 sites completed 1st Expansion; 6 more sites added for 2nd Expansion – 14 sites total

[#] 56/57 enrolled subjects have been treated with AU-011; 1 subject being observed for growth, not treated yet



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STUDY OBJECTIVES, KEY TRIAL VISITS & PATIENT POPULATIONS

Primary Objective → Safety

- Drug or treatment related adverse events/SAEs

Secondary Objective → Efficacy

- Local tumor control
- Visual acuity preservation
- Tumor growth rate
- Preliminary efficacy at 3 months

Key Populations & Subpopulations

All Enrolled* Subjects with Clinical Diagnosis** of CM	N=57
Subjects with Documented Growth (DG) <ul style="list-style-type: none"> • Any level of documented growth in tumor thickness 	n=31
Phase 3 Eligible*** <ul style="list-style-type: none"> • Documented growth ≥ 0.3mm within 2 years • Thickness 0.5-3.0mm, LBD ≤ 13.0mm, Tumor Volume ≤ 50 mm³ 	n=21
Phase 3 Eligible – Therapeutic Regimen (2 cycles) <ul style="list-style-type: none"> • Phase 3 Eligible as above • 2 cycles of (80μg x 2 lasers x 3 weekly treatments) 	n=15
Phase 3 Eligible – High-Risk for Vision Loss <ul style="list-style-type: none"> • Phase 3 Eligible with tumors ≤ 3.0mm from the fovea and/or optic nerve 	n=18

*57 total enrolled in trial, 56 treated as of Mar 2, 2020 data cutoff

**Clinical diagnosis criteria discussed with FDA and original criteria discussed in EU scientific advice

***Subjects with eligibility criteria similar to those for a planned Phase 3 study

- Key trial visits and long-term follow-up for safety



Note: LBD = largest basal diameter

PRELIMINARY SAFETY FINDINGS: TREATMENT RELATED ADVERSE EVENTS

All Treated Subjects (n=56) Key Treatment Related Adverse Events	Mild	Moderate	Severe	Total*
Anterior Chamber Inflammation	46.4%	21.4%	0	67.9%
Vitreous Inflammation	37.5%	41.1%	3.6%	82.1%
Increase in Intraocular Pressure	17.9%	23.2%	0	41.1%
Keratic Precipitates	12.5%	1.8%	0	14.3%
Peritumoral RPE/ Pigmentary Changes**	10.7%	1.8%	0	12.5%
Floater/ Vitreous Opacity	10.7%	0	1.8%	12.5%
All Treated Subjects (n=56) Related Serious Adverse Events	Mild	Moderate	Severe	Total
Vision Loss (juxtafoveal tumor)	0	0	3.6%	3.6%

Managed with steroids and topical ocular anti-hypertensives; and majority resolved without clinical sequelae

Data cutoff Mar 2, 2020; average follow up period of 12 months

*Table presents percentage of subjects with AEs by severity and overall; subjects with more than 1 AE is counted in the highest severity group

**Similar changes reported as exam findings in other subjects, not considered clinically significant

Favorable Preliminary Safety Profile



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PRELIMINARY EFFICACY FINDINGS: VISUAL ACUITY PRESERVATION WITH AU-011

Follow-up for Up to 24 Months

Vision Preservation Rate

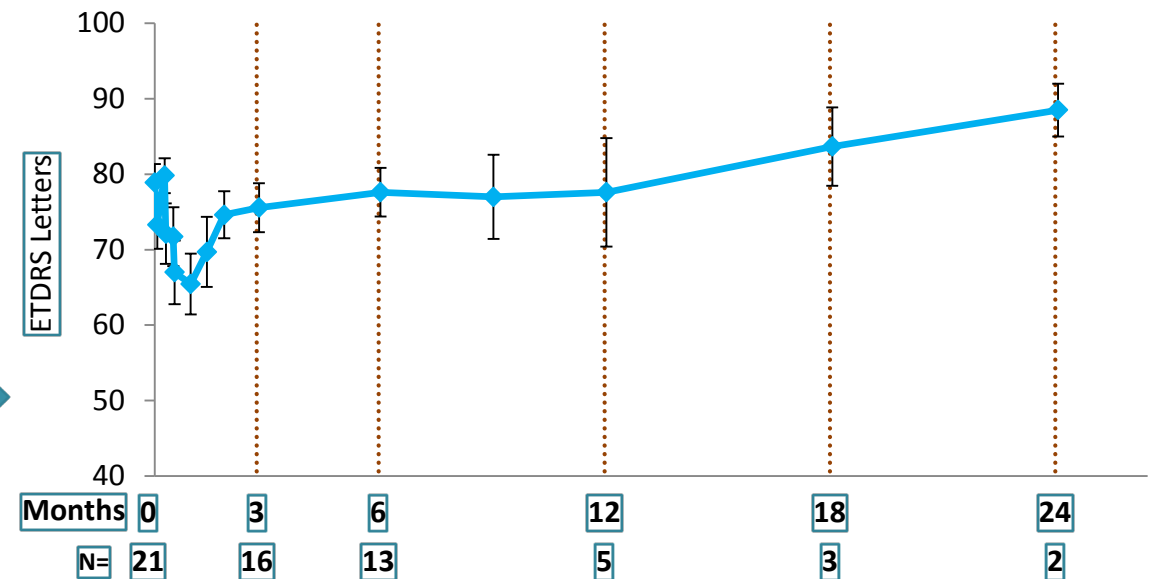
	Total Subjects (n)	Mean/Median Follow up (months)	Vision Failure*	Vision Preservation Rate
All Dose Cohorts				
All Subjects	56	12/ 12	4*	93%
Subjects with Documented Growth	31	10/ 6	2	94%
Ph3-Eligible Subjects	21	8/ 6	1	95%
Ph3-Eligible High-Risk for Vision Loss Subjects	18	6/ 3	1	94%
Therapeutic Regimen (2 cycles)				
Ph3-Eligible Subjects	15	3/ 3	1	93%

*Vision Failure: long term decrease in vision >15 letters (>3 lines)

*1 subject not included as loss of vision was due to tumor progression and plaque treatment, not related to AU-011

Mean Best Corrected Visual Acuity

Phase 3 Eligible Subjects, n=21



Graph shows mean (\pm SEM) BCVA by study visit in Phase 3 eligible subjects (n=21), post-standard of care/radioactive treatment data not included.
Data cut-off Mar 2, 2020

Favorable Preliminary Vision Results



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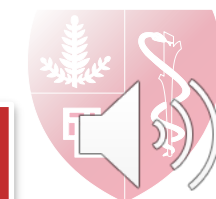
PRELIMINARY EFFICACY FINDINGS: TUMOR CONTROL WITH AU-011

Follow-up for Up to 24 Months

Populations	Subjects (n)	Mean/ Median Follow-up (months)	Tumor Control Failure*	Tumor Control Rate
All Dose Cohorts				
All Subjects	56	12/ 12	19	66%
Documented Growth Subjects	31	10/ 6	5	84%
Ph3-Eligible Subjects	21	8/ 6	3	86%
Ph3-Eligible High-Risk for Vision Loss Subjects	18	6/ 3	2	89%
Therapeutic Regimen (2 cycles)				
Ph3-Eligible Subjects	15	3/ 3	0	100%

*Tumor control Failure includes subjects that met definition of Tumor Progression (Growth in Tumor Height >0.5mm; LBD >1mm due to Definitive Tumor Growth) or patients treated with radioactive standard of care by investigator criteria before they met the definition of progression

Planned Ph3 Study Design has >90% Power Assuming 70% Tumor Control Rate at 12 mos



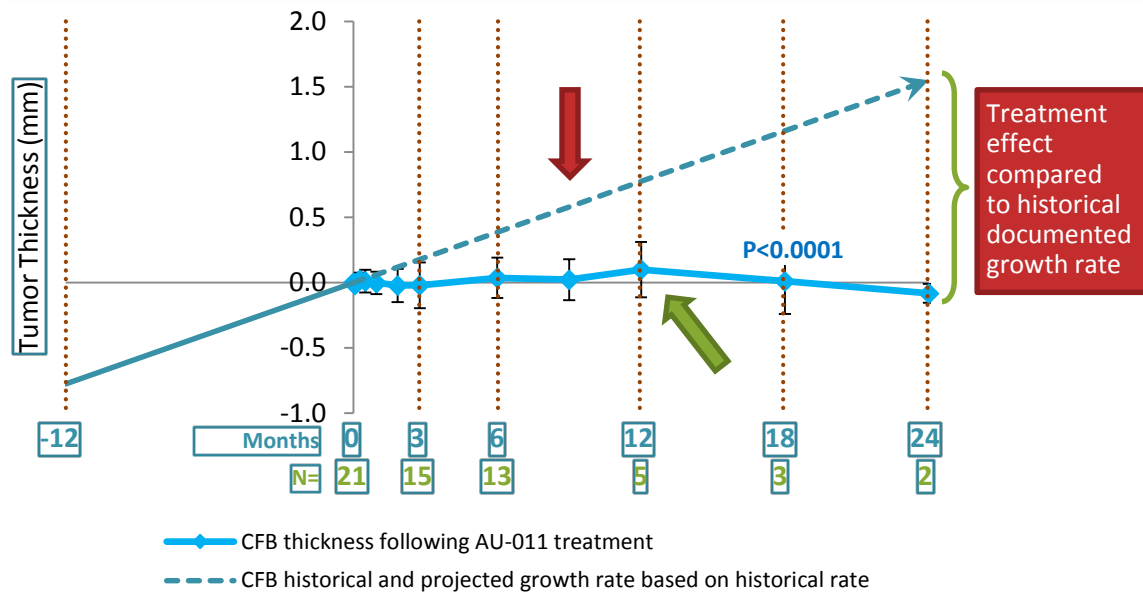
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PRELIMINARY EFFICACY FINDINGS: TUMOR GROWTH CONTROL AFTER TREATMENT WITH AU-011

Within Subject Comparison Analysis in Ph3 Eligible Subjects

Mean Change from Baseline in Tumor Thickness

Phase 3 Eligible Subjects, n=21



- A projected growth rate of 0.78 ± 0.11 mm/year (Mean \pm SEM) in tumor thickness based on a mean of documented growth rates in the same 21 subjects prior to treatment is shown with dashed orange line extending linearly from the solid (historical) orange line
- Data cutoff Mar 2, 2020

Change in Tumor Growth in DG Subjects

	n	Mean/ Median Follow-up (months)	Growth Rate Reduction (mm/yr)	p-value
Subjects with Documented Growth	31	10/ 6	-0.582	<.0001
Ph3 Eligible Subjects	21	8/ 6	-0.773	<.0001
Ph3 Eligible High-Risk for Vision Loss Subjects	18	6/ 3	-0.605	<.0001
Ph3 Eligible Subjects @Therapeutic Regimen (2 cycles)	15	3/ 3	-0.682	<.0001

Note: Tumor thickness growth rates/ slopes estimated using MMRM

Statistically Significant Impact on Tumor Growth – Used to Support Planned Ph3 Study Design



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SUMMARY OF PRELIMINARY RESULTS OF PHASE 1B/2 STUDY



Safety

- One and 2 cycles of AU-011 were generally well-tolerated to date
- Inflammation has been manageable, starts around the tumor and supports MOA
- Steroids can be started after inflammation is observed to allow potential immune response
- Re-treatment after 12 months was generally well tolerated



Efficacy Endpoints

Tumor control to date

- Statistically significant reduction of tumor growth rate in subjects with documented growth
- Durability of tumor response observed at 24 months even at subtherapeutic doses in SAD
- >65% of all treated subjects demonstrated tumor control (TC) with up to 24 months follow up (average 12 months).
- TC rate is >85% in Ph3-Eligible subjects with 8 months average follow up

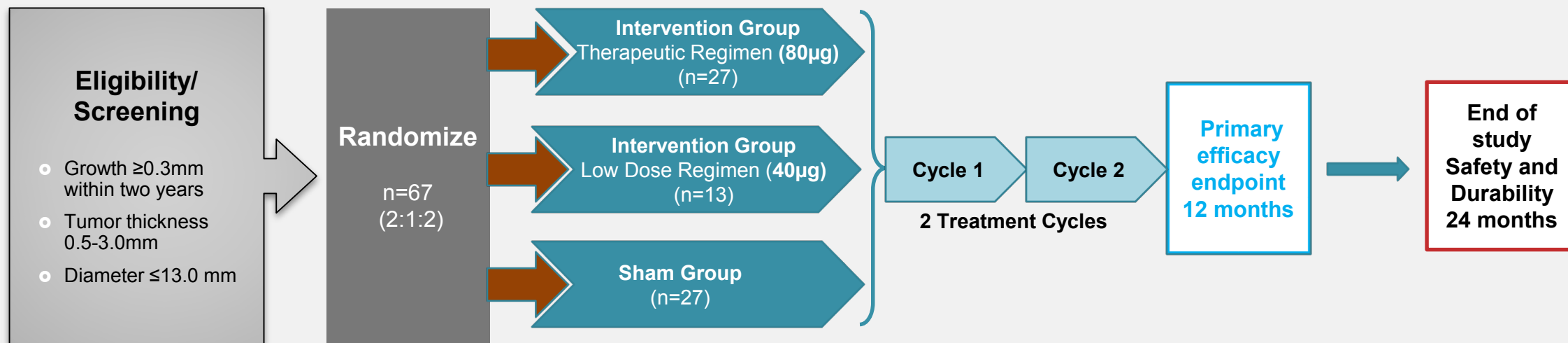
Vision preservation to date

- Vision preservation demonstrated in >90% of all subpopulations, including those with high risk lesions (within 3.0mm of fovea or optic nerve)
- The majority of subjects have stable vision (vision within 5 letters of baseline)



PH3 TRIAL DESIGN DISCUSSED WITH FDA

91% POWER WITH 67 SUBJECTS



Trial Endpoints

Primary Endpoint

- Composite-time to event endpoint at 12 months:
 - Disease progression, or
 - Visual acuity failure

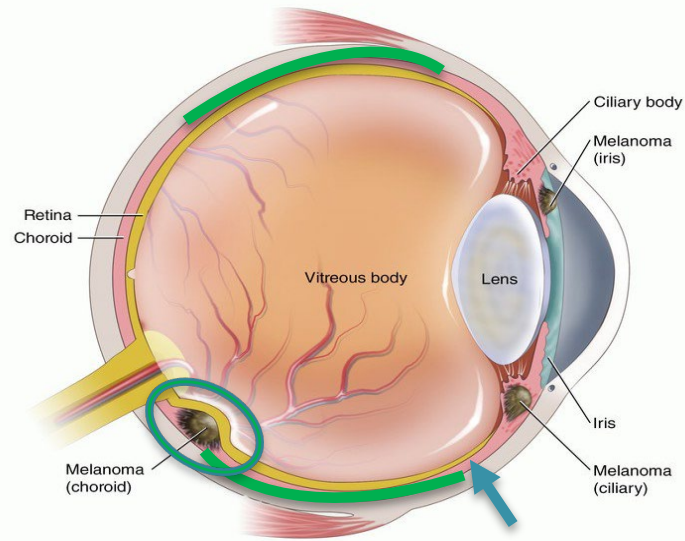
Key Secondary Endpoints

- Disease progression at 12 months
- Change from baseline in tumor thickness at 12 months
- Within subject comparison of 80µg and 40µg AU-011 dose arms

Study to be performed at ~30 sites in US, EU, Australia/NZ, Israel and Canada

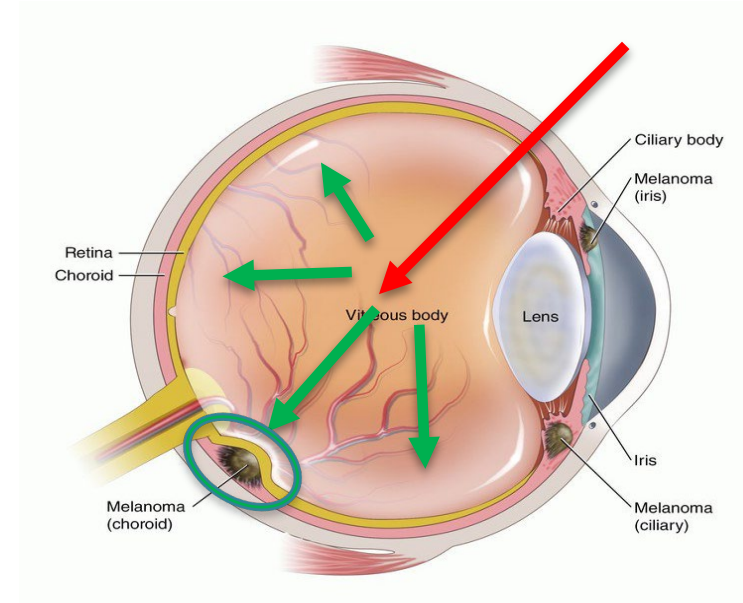
AU-011 IS BEING DEVELOPED TO TREAT SMALL AND MEDIUM TUMORS

FURTHER STUDIES PLANNED WITH SUPRACHOROIDAL AND IVT ADMINISTRATION



Suprachoroidal

- Potential to treat small and medium tumors
- Maximize bioavailability at the site of the tumor
- Preclinical studies ongoing
- Ph 2 planned Q3 2020



Intravitreal

- Treatment of small tumors
- Ph1b/2 enrollment complete
- Ph3 planned 2H 2021

**Currently targeting treatment of small tumors via intravitreal administration
Planning treatment of small and medium tumors via suprachoroidal administration**



PARTICIPATING CENTERS FOR PHASE 1B/2 TRIAL



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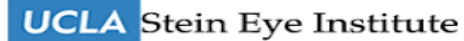


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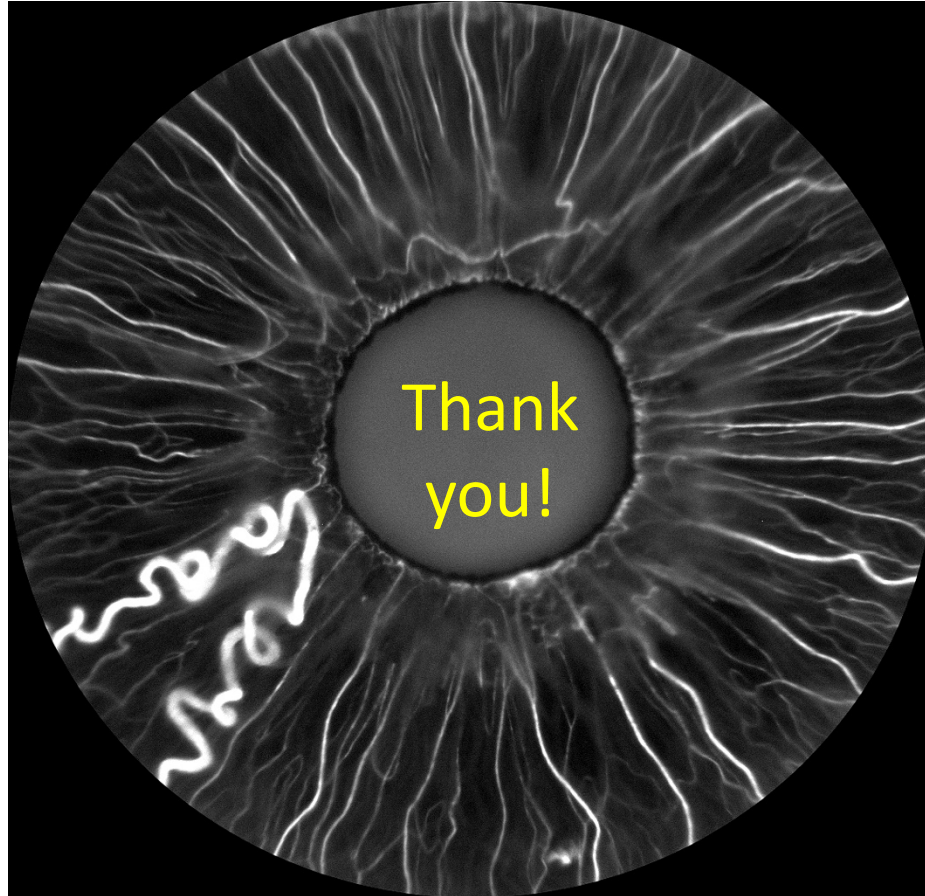


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