

U.S. Phase 1 Study of Intravitreal Axitinib Implant (OTX-TKI) for Neovascular Age-related Macular Degeneration

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Disclosures

Financial Disclosures (Andrew A. Moshfeghi):

- Consultant: Ocular Therapeutix, Alimera, Allergan, Regeneron, Regenxbio, Genentech/Roche, Novartis, Pr3vent, Placid0, Valitor, SciNeuro, OcuTerra, Waldo
- Individual Stocks and stock options: Ocular Therapeutix, Valitor, Pr3vent, Placid0 (ended), Waldo
- Ownership Interest: Pr3vent, Placid0 (ended), Waldo, OptiSTENT (ended)
- Researcher: Regeneron, Genentech/Roche, Novartis

Study and Product Disclosures:

- The following presentation discusses an investigational drug, OTX-TKI, in development. OTX-TKI's efficacy and safety profiles have not been established, and it has not been approved for marketing by the U.S. Food and Drug Administration (FDA) or any other health agency
- Funding was provided by Ocular Therapeutix for the study

OTX-TKI Implant: Hydrogel Delivery of Axitinib

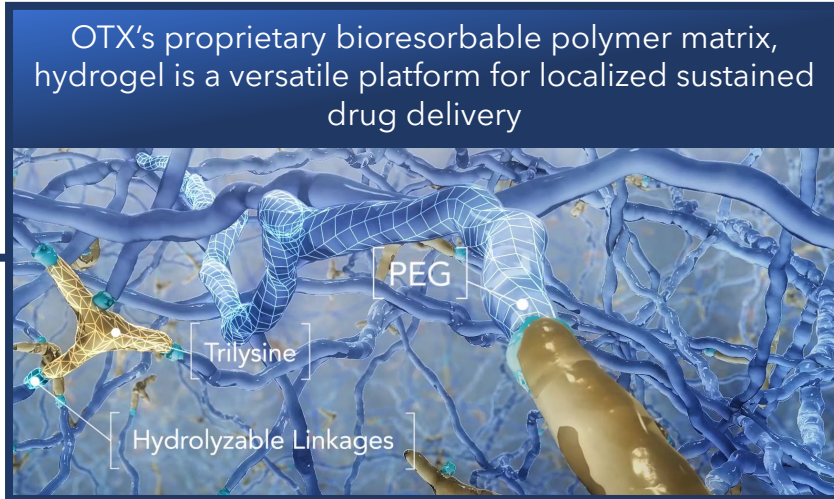
HYDROGEL DELIVERY PLATFORM

BIO RESORBABLE,
TARGETED,
SUSTAINED DRUG
DELIVERY



AXITINIB

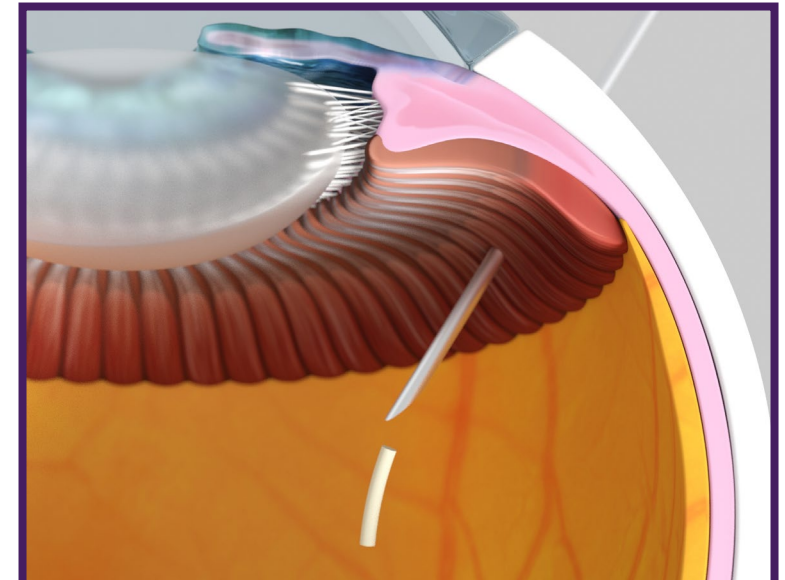
MULTI-TARGET
TYROSINE KINASE
INHIBITOR FOR
RETINAL VASCULAR
DISEASES



Axitinib is a highly selective inhibitor of all VEGF and PDGF receptors with high affinity and low solubility compared to other ocular TKIs¹

Drug	Inhibitory Concentrations for VEGFR2/KDR (IC ₅₀ in nM) (lower values indicate higher affinity)
Axitinib²	0.2
Sunitinib ³	43
Vorolanib ³	52

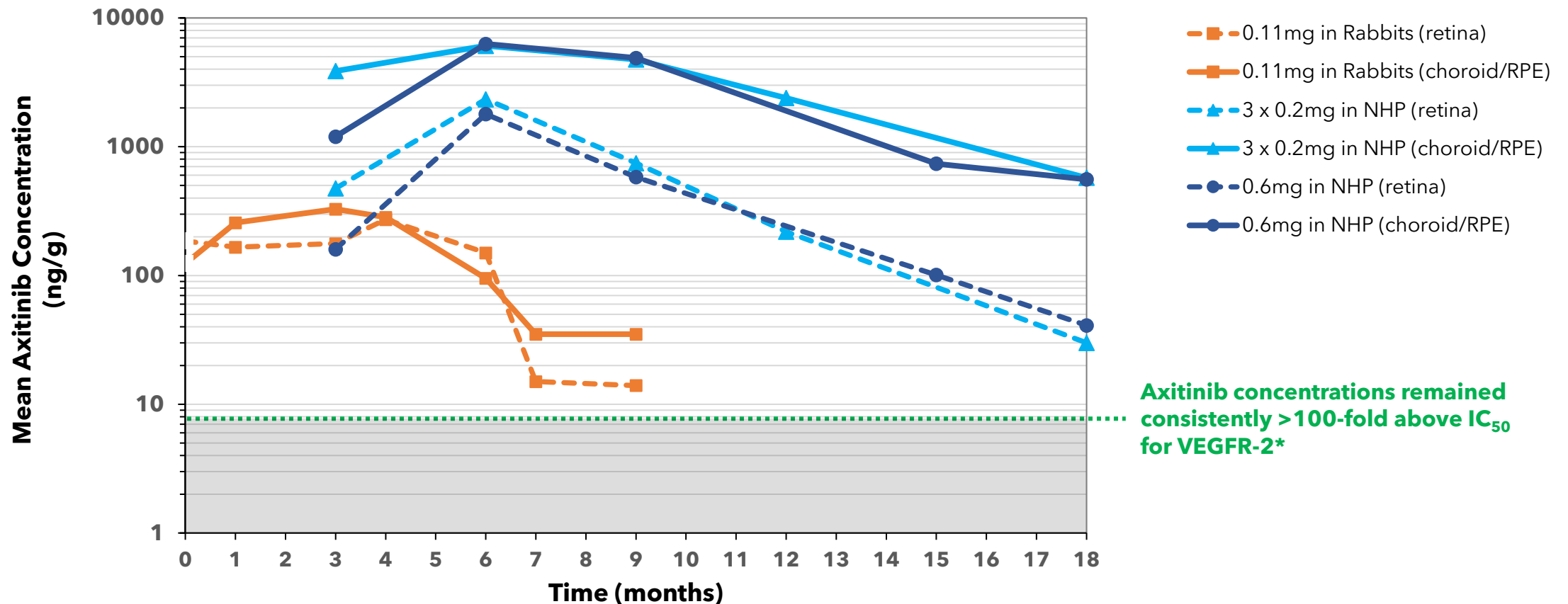
OTX-TKI INTRAVITREAL IMPLANT: AXITINIB IN HYDROGEL



- Single implant
- Completely bioresorbable
- Target release for 6-12 months
- Administered by a 25G or smaller needle

Preclinical Pharmacokinetic Studies Demonstrate OTX-TKI Provides Rapid and Sustained Release of Axitinib at Levels 100-Fold Above VEGFR-2 IC₅₀ in Targeted Tissues

Pharmacokinetic Concentrations of Axitinib Demonstrate Excellent Drug Exposure in the Retina and Choroid in Preclinical Studies



Axitinib concentrations remained consistently >100-fold above IC₅₀ for VEGFR-2*

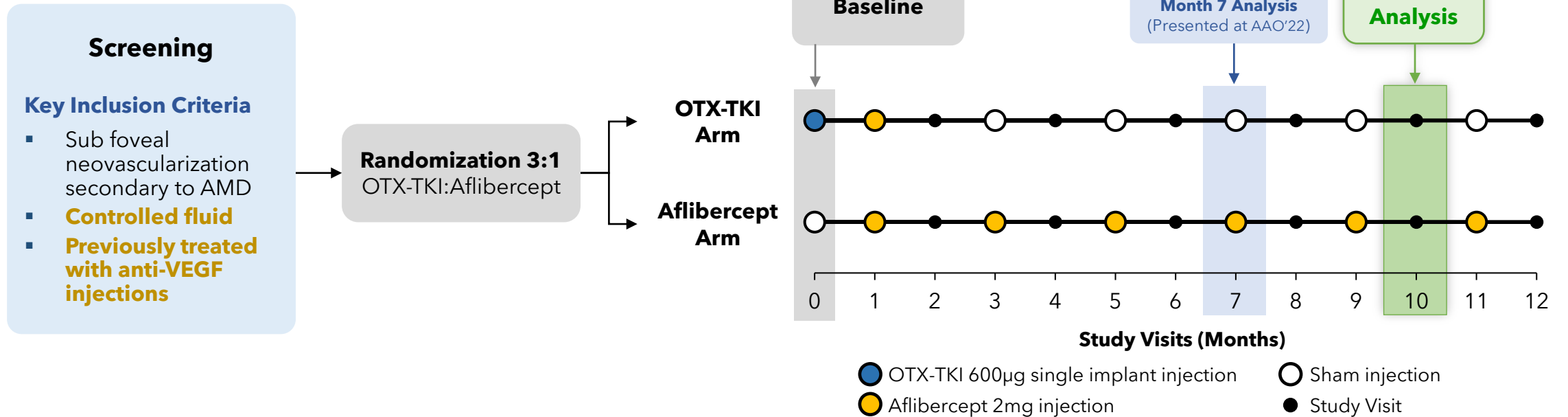
First data point in rabbit study is at Day 1. Data points in the NHP studies were at Months 3, 6, 9, 12, 15 and 18.

* IC₅₀ = 0.2nM = 0.07ng/mL.¹ Assumes tissue density of 1 g/mL.

Reference: 1. Huang WC, et al. *Transl Vis Sci Technol.* 2021;10(14):23.

U.S. Wet AMD Phase 1 Study Design

Multicenter, Randomized, Double-masked Trial



Rescue Anti-VEGF Injection Criteria:

- Loss of ≥ 10 letters from best previous BCVA with current BCVA worse than baseline, or
- Evidence of $\geq 75\mu\text{m}$ CSFT increase from previous best value and ≥ 5 letters loss from best previous BCVA, or
- New macular hemorrhage

Baseline Characteristics

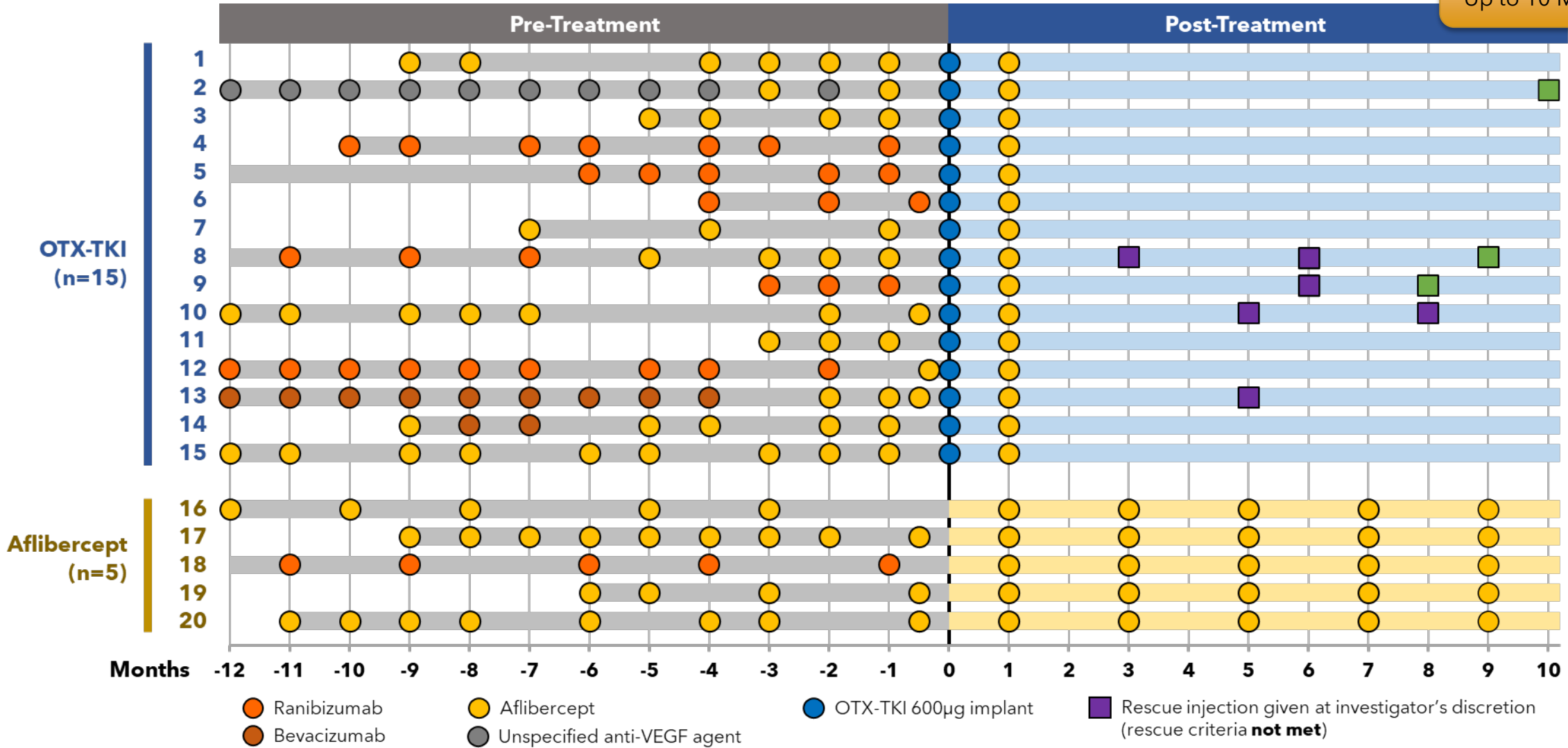
Baseline Characteristic	OTX-TKI (N=16) [†]	Aflibercept (N=5)
Mean (SD) Age, Years	76 (8)	84 (8)
Male, n (%) Female, n (%)	8 (50) 8 (50)	3 (60) 2 (40)
Mean (SD) Months since wet AMD diagnosis	18 (12)	18 (12)
Mean (SD) Number of anti-VEGF Injections within 12 Months Prior to baseline*	8 (3)	8 (4)
Mean (SD) BCVA in ETDRS Letters	70.9 (17.7)	73.8 (9.0)
Mean (SD) CSFT, μm	273.8 (43.0)	240.6 (29.6)

*Annualized data

[†] Includes one subject not treated per protocol who has been removed from efficacy analysis as subject incorrectly received aflibercept instead of sham injection at Month 3 and 5 visits

Reduction in Anti-VEGF Injections Following OTX-TKI Up to Month 10

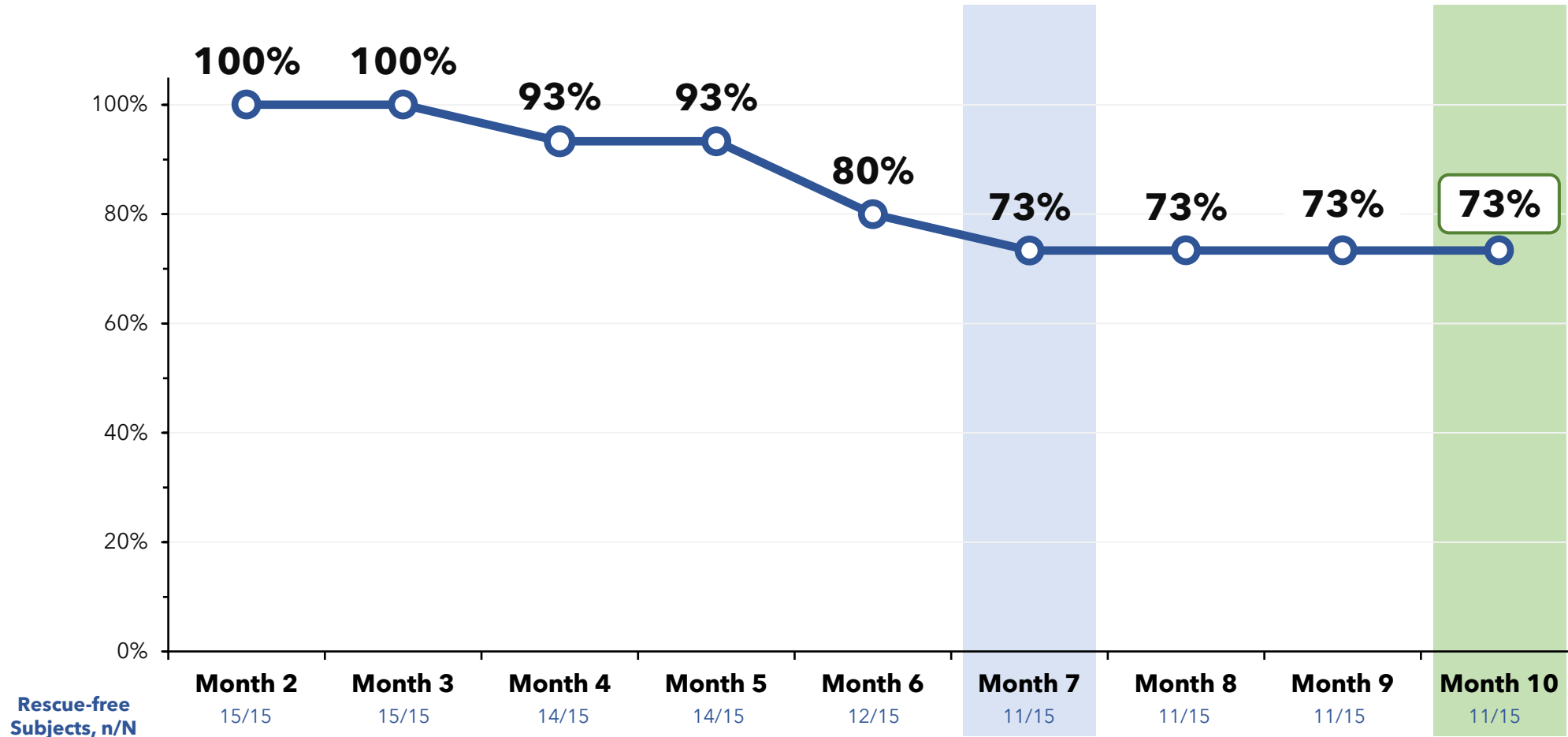
Treatment Reduction
Up to 10 Months: 92%



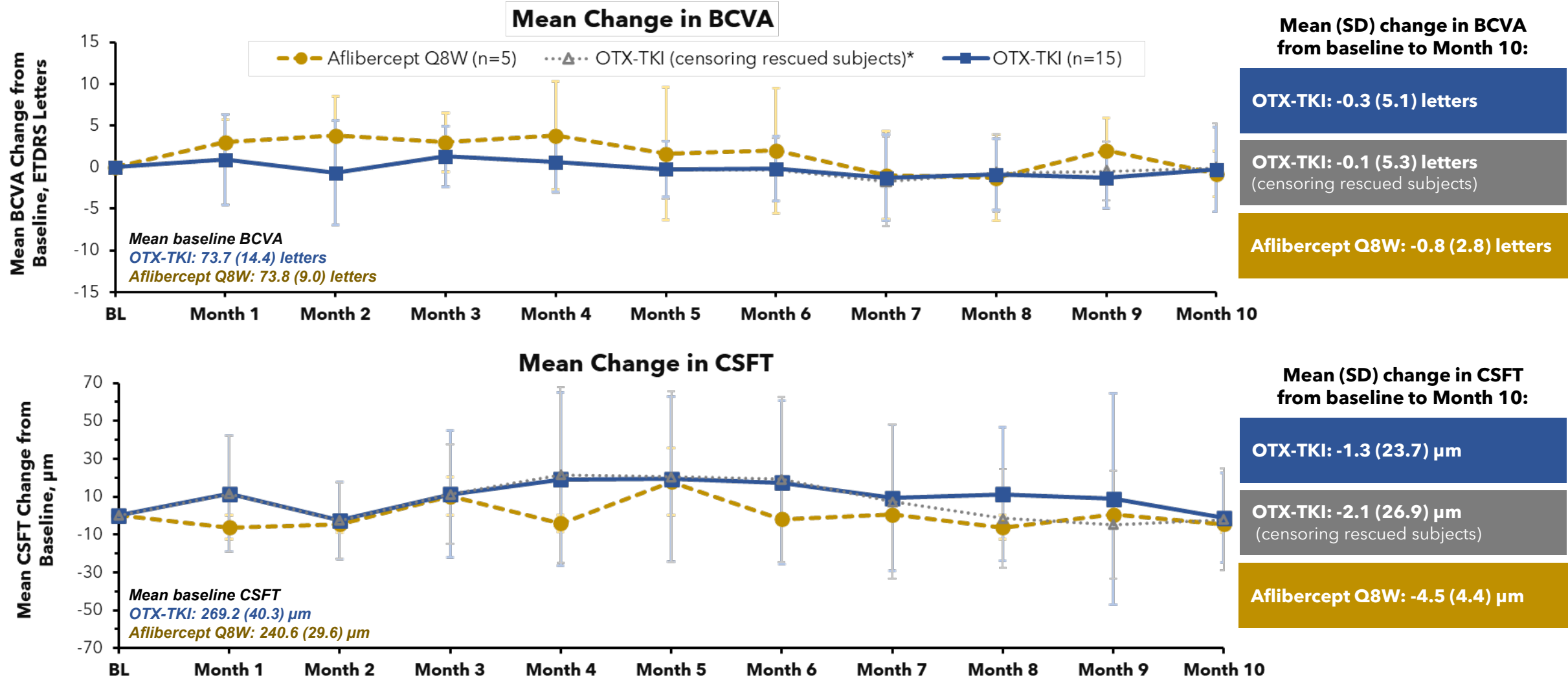
Interim review: data cut off December 12, 2022; per protocol analysis
Reduction in treatment burden calculation includes all rescue injections up to Month 10
Sham injection was given at Month 0 in the Aflibercept Arm and at Month 3, 5, 7 and 9 in the OTX-TKI Arm (not shown).

OTX-TKI Demonstrated Extended Duration of Action with 73% of Subjects Rescue-Free Up to 10 months

Percentage of OTX-TKI Subjects Rescue-Free Up to Each Visit (n=15)



Vision and CSFT with OTX-TKI were Comparable to Aflibercept Q8W Up to Month 10



Interim review: data cut off December 12, 2022

Error bars represent standard deviation; n=14 in OTX-TKI arm at Months 2 and 7 due to missed visits

*Sample size for OTX-TKI (censoring rescued subjects): n=15 at Baseline and Months 1 and 3; n=14 at Month 2 (missed visit) and Months 4 and 5; n=12 at Month 6 and n=11 at Month 7, 8, 9, and 10

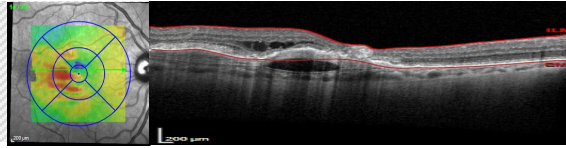
BCVA=best corrected visual acuity; BL=baseline; CSFT=central subfield thickness; ETDRS=Early Treatment Diabetic Retinopathy Study

OTX-TKI Case Study 1: Patient 12

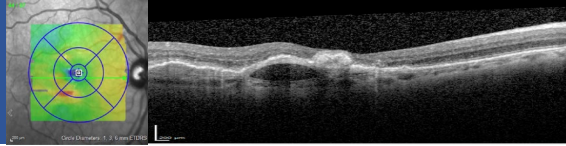
60-year-old male with anti-VEGF Q4-8W prior to study and rescue-free through Month 10

Patient received SOC wet AMD therapy prior to study

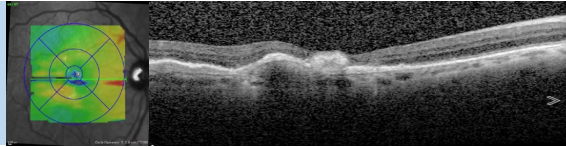
Historical OCT
(~1 month prior to baseline)
CSFT: 277 μm



Baseline
CSFT: 278 μm
BCVA: 54 letters



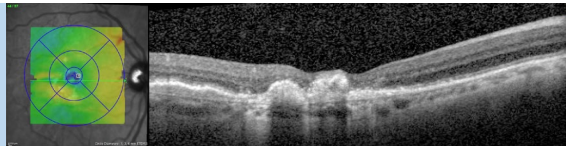
Month 1
CSFT change: -47 μm
BCVA change: +2 letters



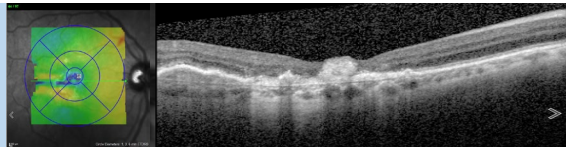
Month 2

Missed visit

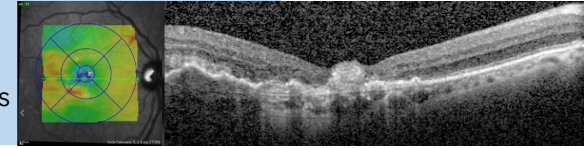
Month 3
CSFT change: -72 μm
BCVA change: +4 letters



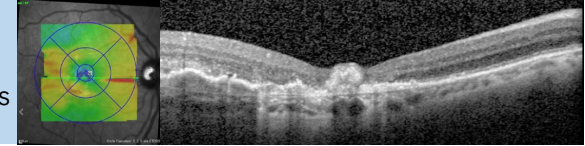
Month 4
CSFT change: -68 μm
BCVA change: +5 letters



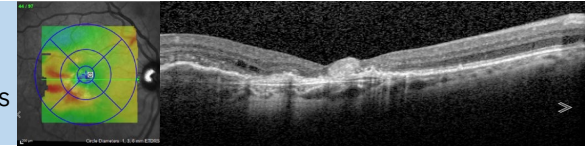
Month 5
CSFT change: -66 μm
BCVA change: +5 letters



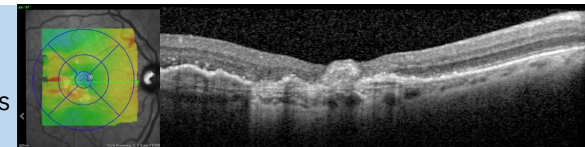
Month 6
CSFT change: -55 μm
BCVA change: +3 letters



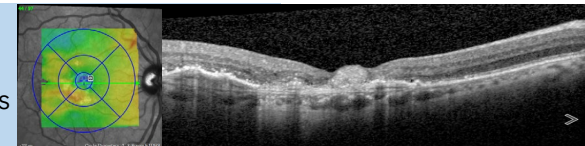
Month 7
CSFT change: -54 μm
BCVA change: +4 letters



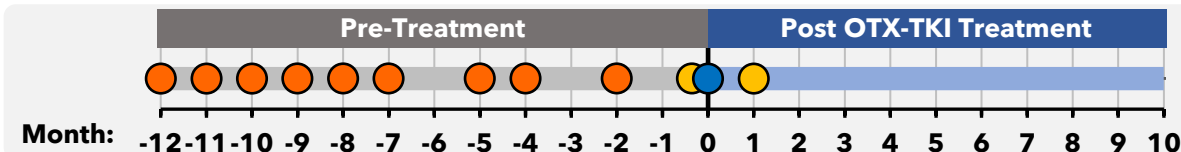
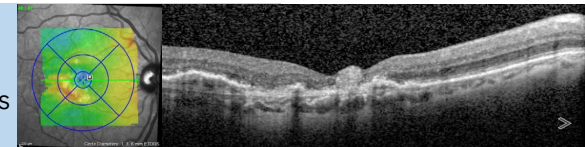
Month 8
CSFT change: -51 μm
BCVA change: +4 letters



Month 9
CSFT change: -61 μm
BCVA change: +5 letters



Month 10
CSFT change: -51 μm
BCVA change: +8 letters



- Ranibizumab
- Aflibercept
- OTX-TKI 600 μg implant
- Rescue injection given at investigator's discretion (criteria not met)
- Rescue injection given per rescue criteria

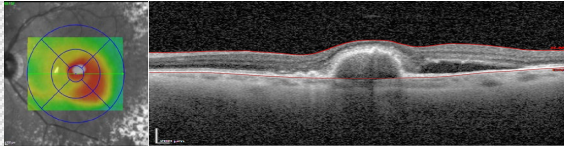
Patient received study-mandated aflibercept injection at Month 1; All changes in CSFT and BCVA are relative to baseline visit

OTX-TKI Case Study 2: Patient 15

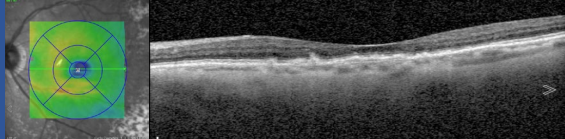
80-year-old female with aflibercept Q4-8W prior to study and rescue-free through Month 10

Patient received SOC wet AMD therapy prior to study

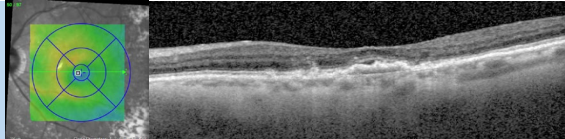
Historical OCT
(~21 months prior to baseline)
CSFT: 456 μm



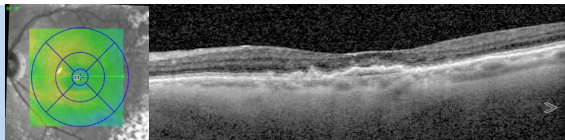
Baseline
CSFT: 183 μm
BCVA: 59 letters



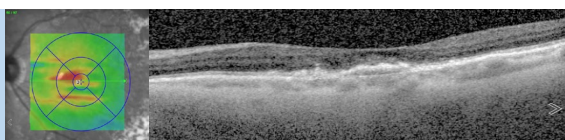
Month 1
CSFT change: +46 μm
BCVA change: 0 letters



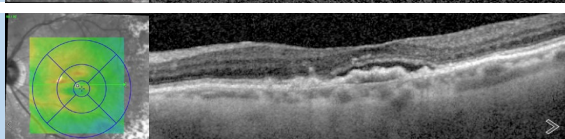
Month 2
CSFT change: +54 μm
BCVA change: +1 letter



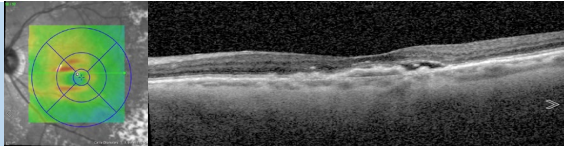
Month 3
CSFT change: +47 μm
BCVA change: -4 letters



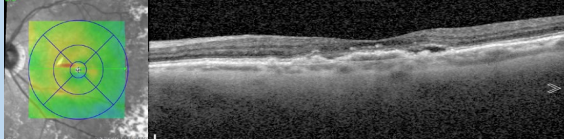
Month 4
CSFT change: +82 μm
BCVA change: +2 letters



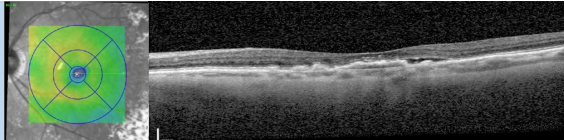
Month 5
CSFT change: +62 μm
BCVA change: -3 letters



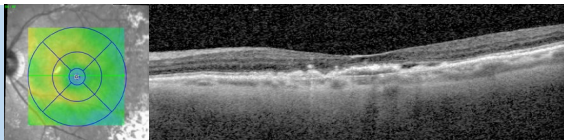
Month 6
CSFT change: +60 μm
BCVA change: -1 letter



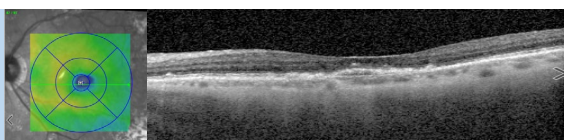
Month 7
CSFT change: +9 μm
BCVA change: -2 letters



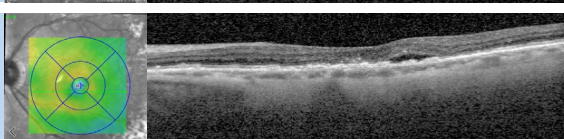
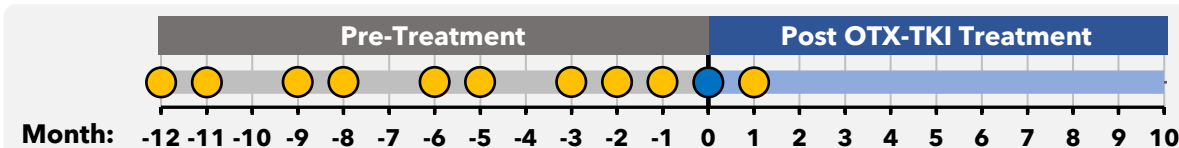
Month 8
CSFT change: +32 μm
BCVA change: +1 letter



Month 9
CSFT change: -6 μm
BCVA change: 0 letters



Month 10
CSFT change: +53 μm
BCVA change: -1 letter

● Aflibercept

● OTX-TKI 600 μg implant

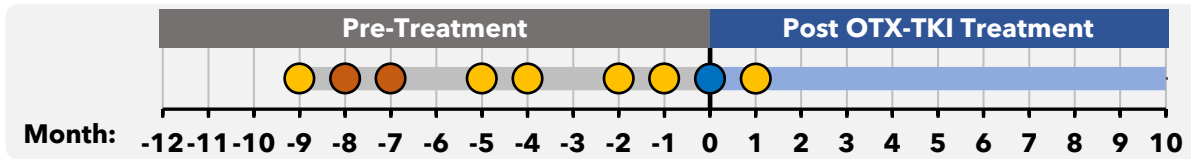
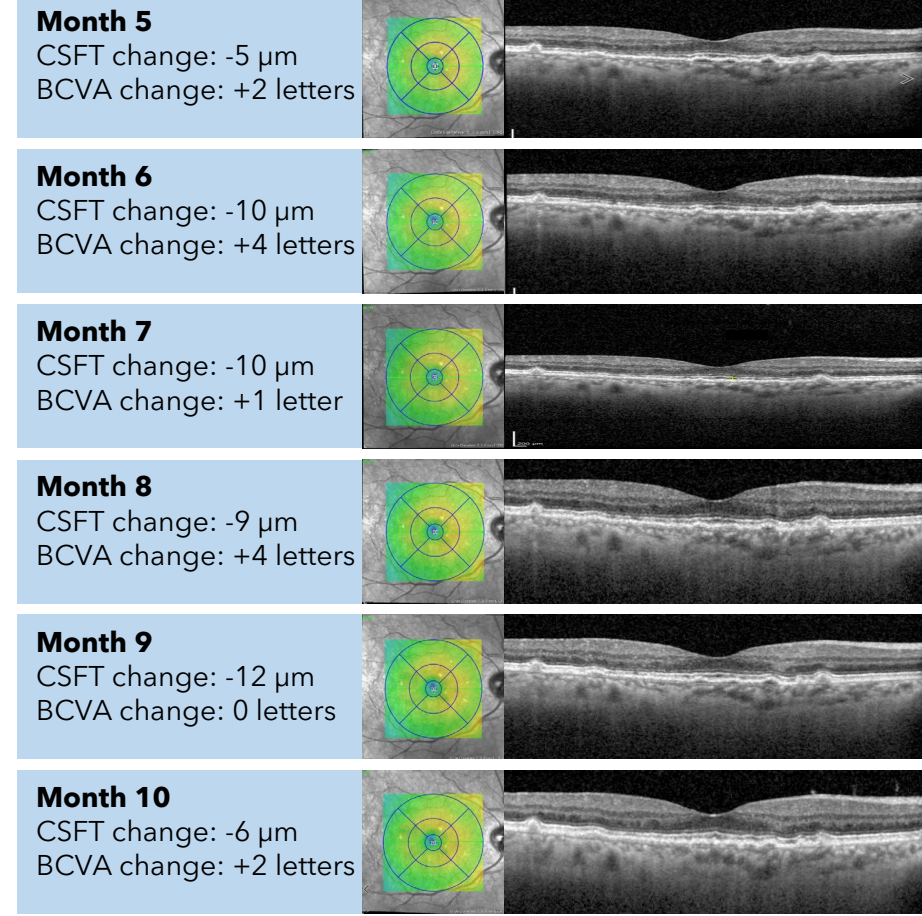
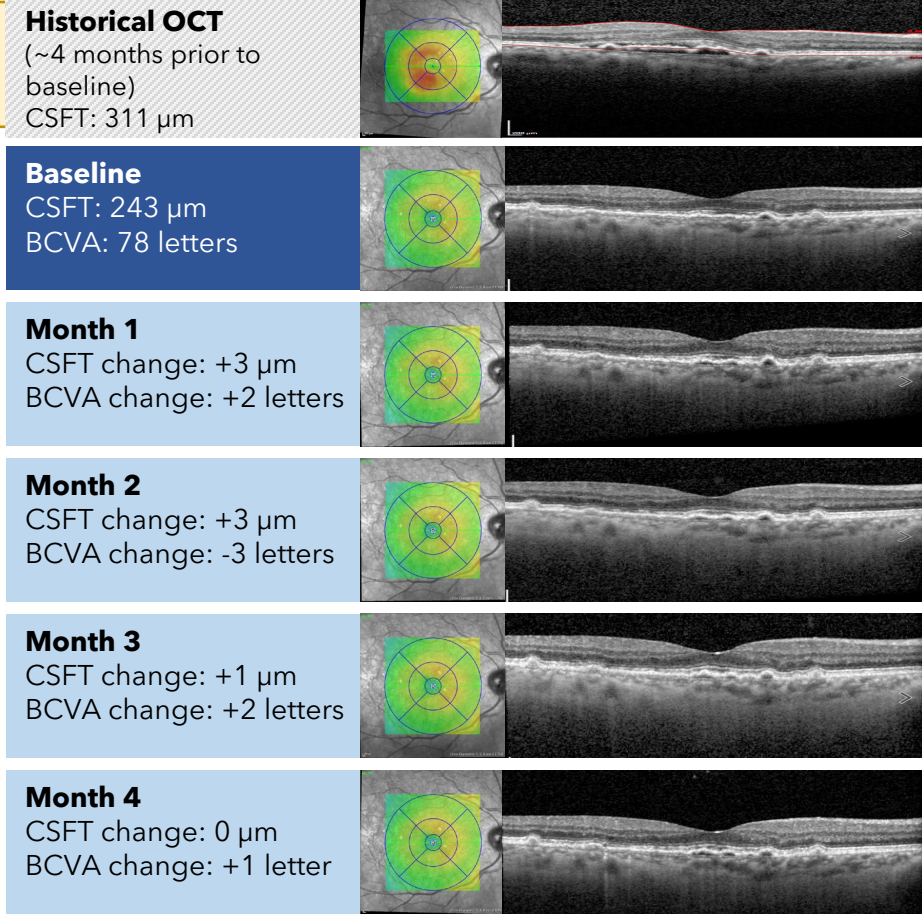
■ Rescue injection given at investigator's discretion (criteria not met)

■ Rescue injection given per rescue criteria

OTX-TKI Case Study 3: Patient 14

65-year-old female with anti-VEGF Q4-8W prior to study and rescue-free through Month 10

Received aflibercept



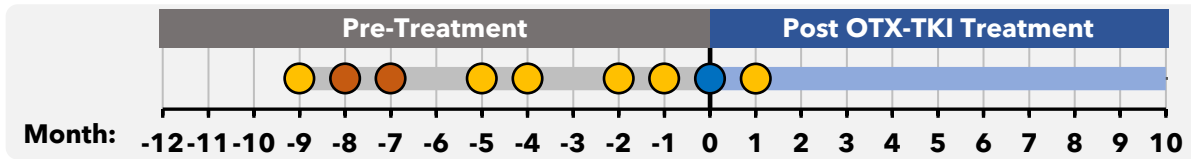
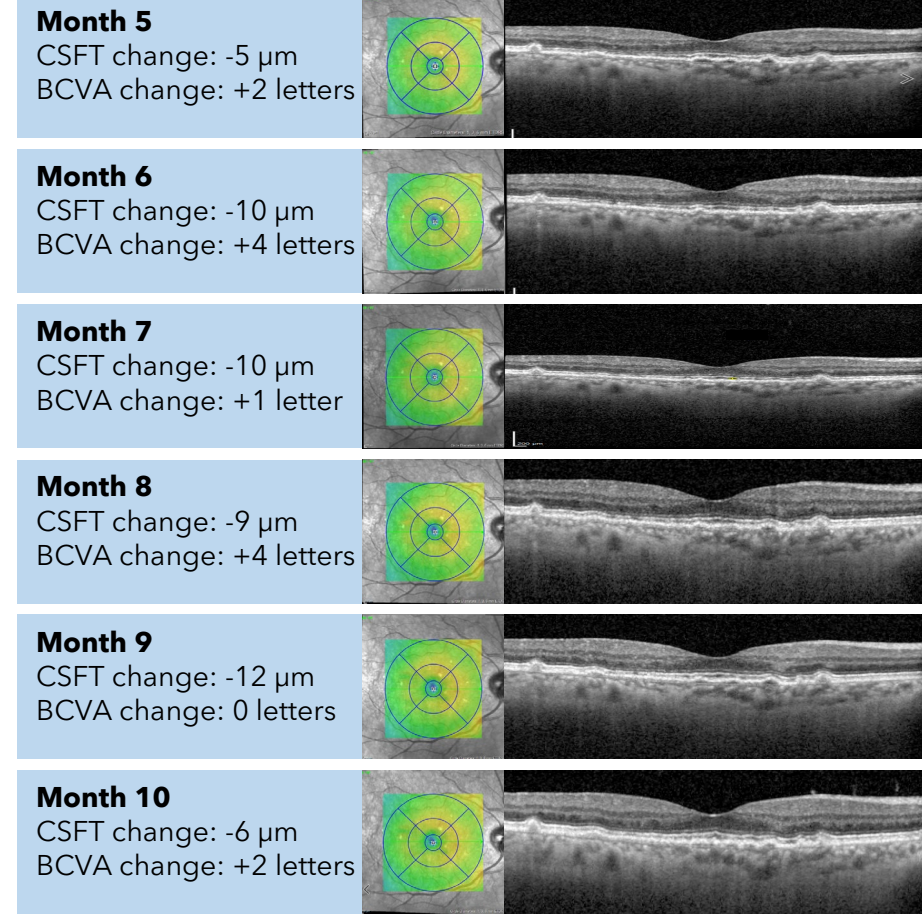
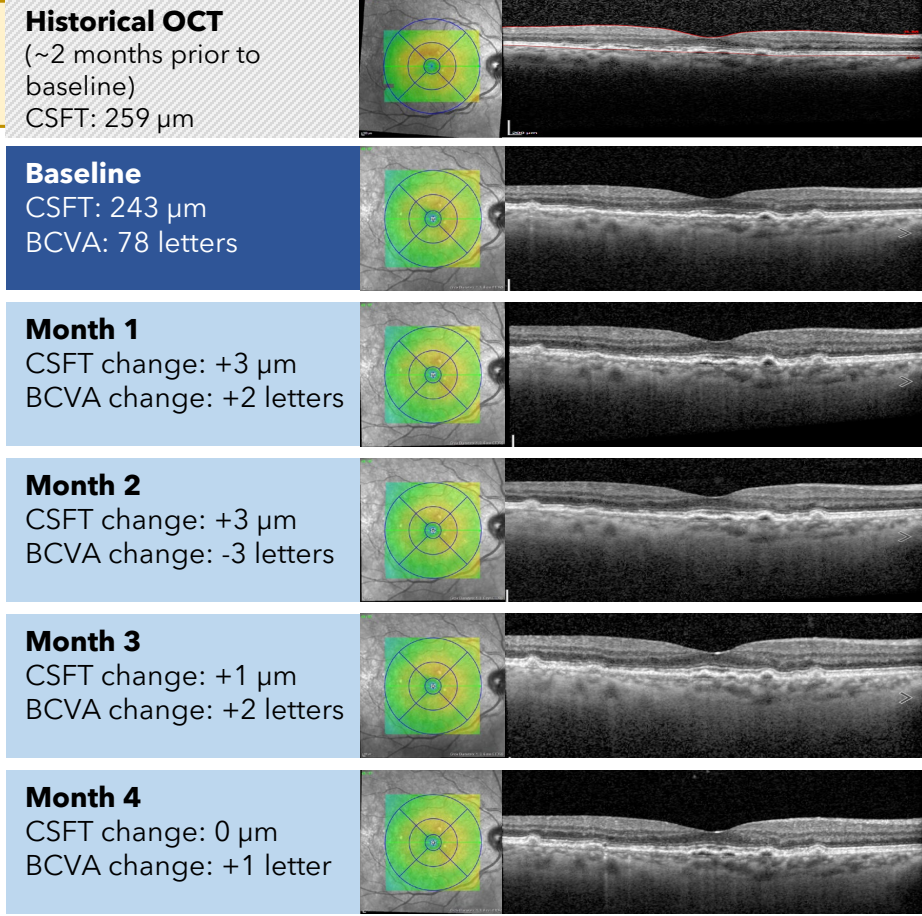
- Bevacizumab
- Aflibercept
- OTX-TKI 600 μg implant
- Rescue injection given at investigator's discretion (criteria not met)
- Rescue injection given per rescue criteria

Patient received study-mandated aflibercept injection at Month 1; All changes in CSFT and BCVA are relative to baseline visit

OTX-TKI Case Study 3: Patient 14

65-year-old female with anti-VEGF Q4-8W prior to study and rescue-free through Month 10

Received aflibercept

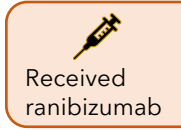


- Bevacizumab
- Aflibercept
- OTX-TKI 600 μg implant
- Rescue injection given at investigator's discretion (criteria not met)
- Rescue injection given per rescue criteria

Patient received study-mandated aflibercept injection at Month 1; All changes in CSFT and BCVA are relative to baseline visit

OTX-TKI Case Study 4: Patient 5

68-year-old female with ranibizumab Q4-8W prior to study and rescue-free through Month 10



Historical OCT
 (~6 months prior to baseline)
 CSFT: 332 μm

Baseline
 CSFT: 331 μm
 BCVA: 81 letters

Month 1
 CSFT change: -15 μm
 BCVA change: -4 letters

Month 2
 CSFT change: -31 μm
 BCVA change: +3 letters

Month 3
 CSFT change: -6 μm
 BCVA change: +1 letter

Month 4
 CSFT change: -2 μm
 BCVA change: +2 letters

Month 5
 CSFT change: -19 μm
 BCVA change: -1 letter

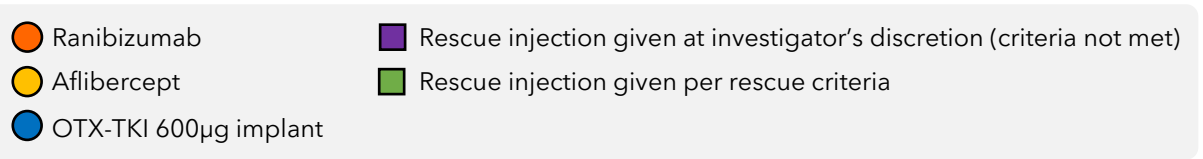
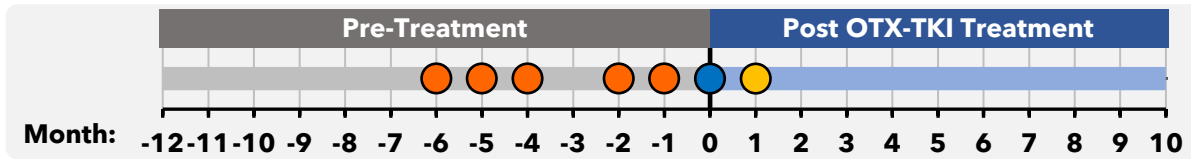
Month 6
 CSFT change: -17 μm
 BCVA change: 0 letters

Month 7
 CSFT change: -20 μm
 BCVA change: 0 letters

Month 8
 CSFT change: -33 μm
 BCVA change: -1 letter

Month 9
 CSFT change: -30 μm
 BCVA change: -1 letter

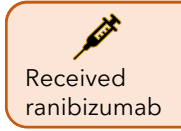
Month 10
 CSFT change: -26 μm
 BCVA change: +2 letters



Patient received study-mandated aflibercept injection at Month 1; All changes in CSFT and BCVA are relative to baseline visit

OTX-TKI Case Study 4: Patient 5

68-year-old female with ranibizumab Q4-8W prior to study and rescue-free through Month 10



Historical OCT
 (~2 months prior to baseline)
 CSFT: 302 μm

Baseline
 CSFT: 331 μm
 BCVA: 81 letters

Month 1
 CSFT change: -15 μm
 BCVA change: -4 letters

Month 2
 CSFT change: -31 μm
 BCVA change: +3 letters

Month 3
 CSFT change: -6 μm
 BCVA change: +1 letter

Month 4
 CSFT change: -2 μm
 BCVA change: +2 letters

Month 5
 CSFT change: -19 μm
 BCVA change: -1 letter

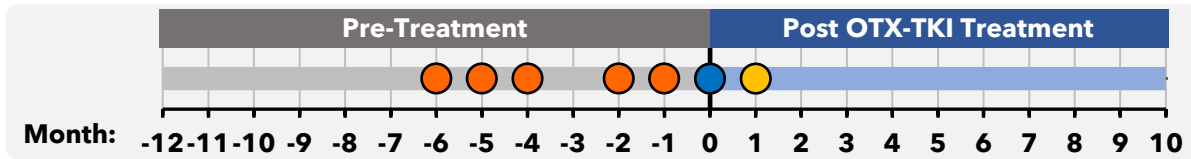
Month 6
 CSFT change: -17 μm
 BCVA change: 0 letters

Month 7
 CSFT change: -20 μm
 BCVA change: 0 letters

Month 8
 CSFT change: -33 μm
 BCVA change: -1 letter

Month 9
 CSFT change: -30 μm
 BCVA change: -1 letter

Month 10
 CSFT change: -26 μm
 BCVA change: +2 letters



- Ranibizumab
- Aflibercept
- OTX-TKI 600 μg implant
- Rescue injection given at investigator's discretion (criteria not met)
- Rescue injection given per rescue criteria

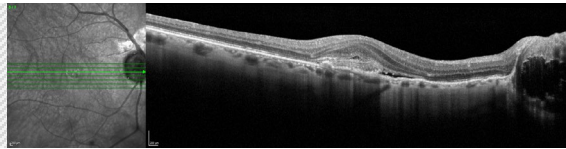
Patient received study-mandated aflibercept injection at Month 1; All changes in CSFT and BCVA are relative to baseline visit

OTX-TKI Case Study 5: Patient 7

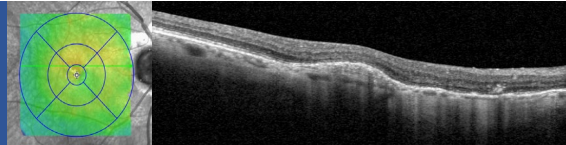
75-year-old female with aflibercept Q12W prior to study and rescue-free through Month 10

Patient received SOC nAMD therapy prior to study

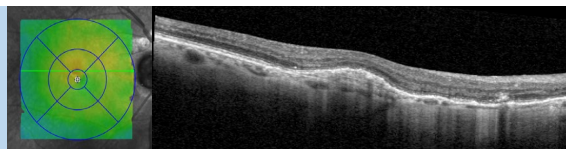
Historical OCT
(~2 years prior to baseline)
CSFT unavailable



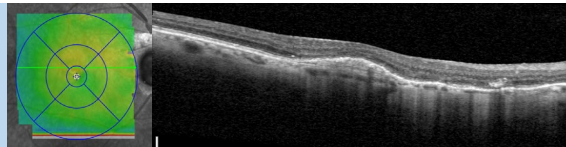
Baseline
CSFT: 292 μm
BCVA: 80 letters



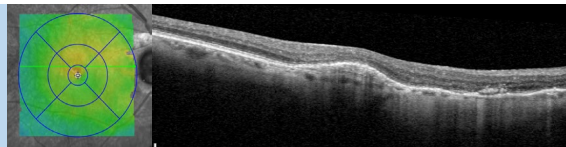
Month 1
CSFT change: -2 μm
BCVA change: +2 letters



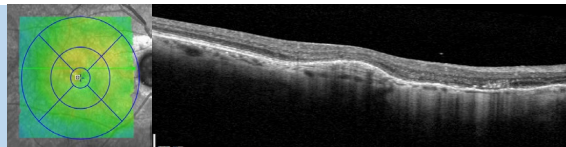
Month 2
CSFT change: -8 μm
BCVA change: +1 letter



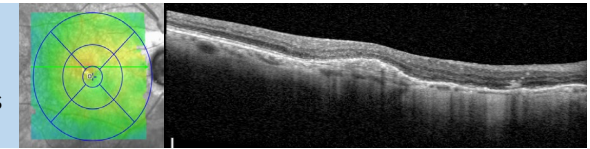
Month 3
CSFT change: +5 μm
BCVA change: +1 letter



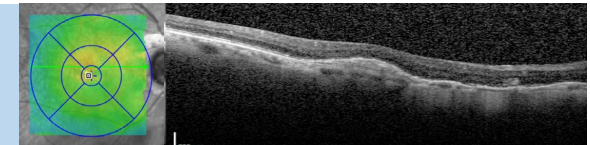
Month 4
CSFT change: -6 μm
BCVA change: +3 letters



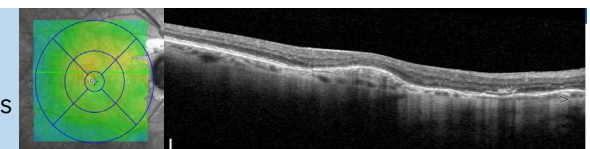
Month 5
CSFT change: -6 μm
BCVA change: -2 letters



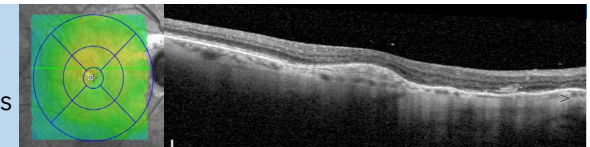
Month 6
CSFT change: +9 μm
BCVA change: +1 letter



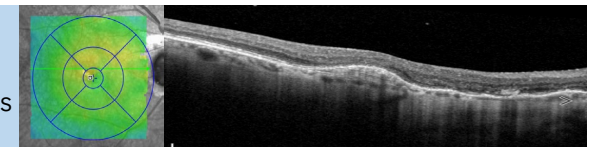
Month 7
CSFT change: -3 μm
BCVA change: +3 letters



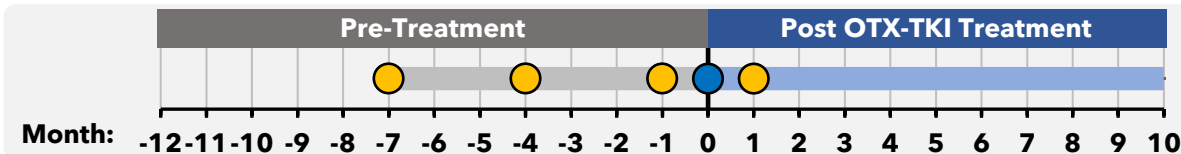
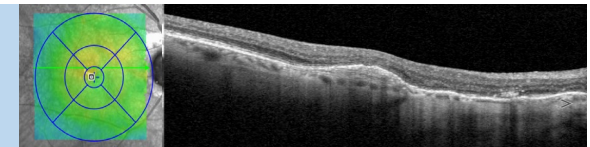
Month 8
CSFT change: +4 μm
BCVA change: +2 letters



Month 9
CSFT change: -5 μm
BCVA change: +3 letters



Month 10
CSFT change: -4 μm
BCVA change: -1 letter



● Aflibercept

● OTX-TKI 600 μg implant

■ Rescue injection given at investigator's discretion (criteria not met)

■ Rescue injection given per rescue criteria

Safety Summary¹: OTX-TKI was generally well tolerated

- No reports of drug-related ocular or systemic SAEs in either arm
- One event of acute endophthalmitis in OTX-TKI arm which occurred following mandated aflibercept injection at Month 1
 - Reported as moderate
 - Injection procedure related
 - Unrelated to the study drug
 - Resolved after intravitreal antibiotic injection, with vision returning to baseline
- All events were mild except
 - Acute endophthalmitis SAE (moderate and resolved) and worsening of cataract (moderate) in OTX-TKI arm
 - Elevated IOP in aflibercept arm (moderate and resolved)

	OTX-TKI	Aflibercept
Subjects with Adverse Events in the Study Eye	n=16	n=5
Elevated IOP	0	1**
Retinal detachment	0	0
Retinal vasculitis	0	0
Implant migration into the anterior chamber	0	NA
Acute Endophthalmitis	1*	0
Subjects with Ocular Adverse Events Reported by Severity		
Ocular AEs	16	3
Mild	14	2
Moderate	2*	1**
Severe	0	0
Serious AEs	1*	0

*Moderate and serious ocular AE in OTX-TKI arm was Acute Endophthalmitis 6 days after mandated aflibercept injection at Month 1

**Moderate AE in Aflibercept arm was Elevated Intraocular pressure

Interim Results Up to Month 10 Demonstrated OTX-TKI Had Extended Durability in Patients with wet AMD in U.S. Phase 1 Trial

- Preclinical pharmacokinetic studies demonstrate OTX-TKI provides rapid and sustained-release of axitinib at levels 100-fold above IC_{50} in targeted tissues, providing excellent drug exposure in the retina and choroid

Phase 1 randomized, controlled US clinical trial in previously treated wet AMD patients with a single OTX-TKI implant showed safety, tolerability, and biological activity comparable to aflibercept administered every 2 months in this 10-month interim analysis

Safety

- OTX-TKI was generally well tolerated
- No reports of drug-related ocular or systemic SAEs in either arm
- No reported adverse events such as elevated IOP, retinal detachment, retinal vasculitis, or implant migration into the anterior chamber in the OTX-TKI arm
- No subject drop-outs in either arm

Efficacy

- 80% of subjects were rescue-free up to 6 months & 73% of subjects were rescue-free up to 10 months following a single OTX-TKI implant injection
- At 10 months, vision (-0.3 letters) and CSFT (-1.3 μm) were stable with OTX-TKI and comparable to aflibercept Q8W (-0.8 letter; -4.5 μm)
- Clinically meaningful reduction in treatment burden observed up to 10 months post-treatment with OTX-TKI

Implant Resorption

- Interim data suggests OTX-TKI 0.6mg hydrogel implant bioresorbs at an average of ~9 months

Next Steps:

- Study is ongoing and follow-up will continue through Month 12 per protocol
- Preparing for wet AMD pivotal trial initiation