

**The following authors are employees of Protagonist Therapeutics, Newark, California**

Roopa Taranath, Brian Frederick, Ashok Bhandari, Jayanthi Vengalam, Keith Huie, Grace A Ledet, Li Zhao, James Tovera, Larry Lee, Tenny Tang, Bo Yang, Celino Dion, Lucy Yuan, Genet Zemedede, Michelle Nguyen, Mohammad Masjedizadeh, Xiaoli Cheng, Larry Mattheakis, David Liu

**The following authors are employees of Protagonist Therapeutics Pty Ltd., Brisbane, QLD, Australia**

Gregory Bourne, Jenny Zhang, Tran T Tran, Jaimee McMahon, Mark L Smythe

**All authors are shareholders of Protagonist Therapeutics, Newark, California**

PTG-300

PTG-200

PN-943

# Hepcidin Peptidomimetics - Oral Efficacy in Pre-Clinical Disease Models for Iron Overload and Erythrocytosis

**Roopa Taranath**<sup>1, \*</sup>, Gregory Bourne<sup>2</sup>, Jenny Zhang<sup>2</sup>, Brian Frederick<sup>1</sup>, Tran T Tran<sup>2</sup>, Ashok Bhandari<sup>1</sup>, Jayanthi Vengalam<sup>1</sup>, Jaimee McMahon<sup>2</sup>, Keith Huie<sup>1</sup>, Grace A Ledet<sup>1</sup>, Li Zhao<sup>1</sup>, James Tovera<sup>1</sup>, Larry Lee<sup>1</sup>, Bo Yang<sup>1</sup>, Celino Dion<sup>1</sup>, Lucy Yuan<sup>1</sup>, Genet Zemedede<sup>1</sup>, Michelle Nguyen<sup>1</sup>, Mohammad Masjedizadeh<sup>1</sup>, Xiaoli Cheng<sup>1</sup>, Larry Mattheakis<sup>1</sup>, David Liu<sup>1</sup> and Mark L Smythe<sup>2</sup>

<sup>1</sup> Protagonist Therapeutics, Newark, CA; <sup>2</sup> Protagonist Therapeutics Pty Ltd, Brisbane, QLD, Australia

# Introduction

- Hepcidin is the master regulator of iron homeostasis in the body, it regulates iron exporter protein ferroportin.
- Hepcidin mimetic therapies have been proposed to benefit in patients with:
  - aberrant iron homeostasis (e.g. hereditary hemochromatosis - HH)
  - disorders that can be influenced by modulating iron homeostasis (e.g. polycythemia vera - PV)

**PTG-300 is a subcutaneous injectable hepcidin peptidomimetic, currently in clinical Phase 2 studies in HH and PV.**

**Oral presentation: Abstract #482**

PTG-300 Eliminates the Need for Therapeutic Phlebotomy in Both Low and High-Risk Polycythemia Vera Patients

**Poster: Abstract #1689**

Hepcidin Mimetic (PTG-300) Reverses Iron Deficiency While Controlling Hematocrit in Polycythemia Vera Patients

**Poster Abstract #2998**

Real-World Treatments and Thrombotic Events in Polycythemia Vera Patients: A Retrospective Analysis between 2018-2019 in US Population

**Poster: Abstract #2594**

Mechanism of Systemic Iron Regulation and Hematocrit Control By Hepcidin Peptidomimetics in Pre-Clinical Models

# Oral Heparidin Peptidomimetics

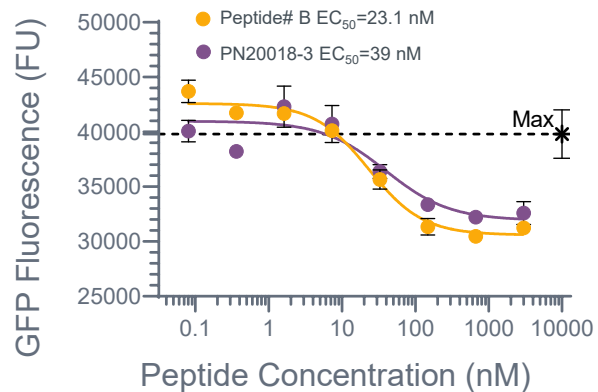
- Oral hepcidin peptidomimetics will potentially mark a paradigm change in management of hereditary hemochromatosis and polycythemia vera.
- In this presentation, we describe orally delivered hepcidin peptidomimetics that are metabolically stable in the gastrointestinal tract, systemically absorbed, and pharmacodynamically active in reducing serum iron parameters in pre-clinical models.
- Further, we demonstrate improvement in disease parameters in two pre-clinical mouse models
  - Hereditary hemochromatosis model (HFE2<sup>-/-</sup>)
  - Erythropoietin (EPO) driven model for secondary erythrocytosis (model mimicking aberrant hematological parameters of PV, where JAK2 mutation drives erythrocytosis)

# Oral Hepcidin Peptidomimetics Are Potent and Stable Peptides

## IN VITRO POTENCY:

Oral hepcidin peptidomimetics are potent in causing ferroportin internalization in HEK-FPN-GFP cells.

### Ferroportin internalization assay in HEK-FPN-GFP cells



	$EC_{50}$ (nM)
PN20018	23.8
PN20076	16.5
PN20089	1.4
Peptide# B	19.3

## STABILITY:

Oral hepcidin peptidomimetics are stable in matrices simulating gastrointestinal conditions and in mouse plasma.

### Degradation assays in biologically relevant matrices

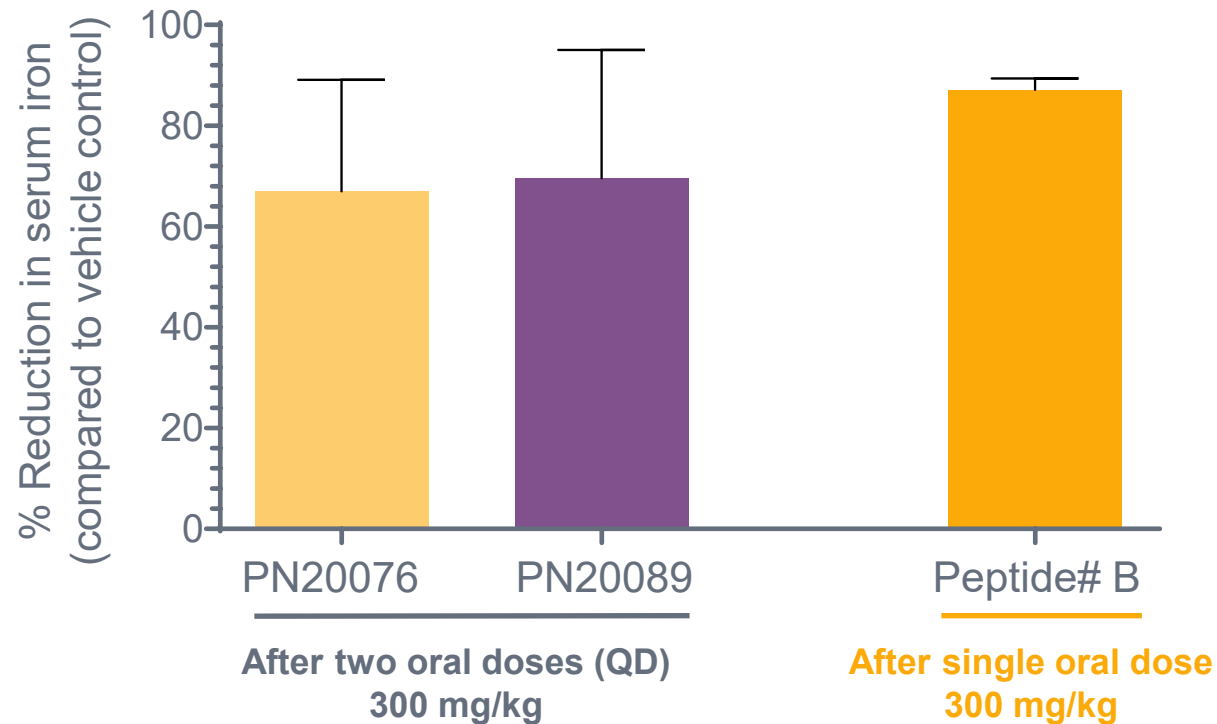
Half-Life (hr)	PN2001 8	PN2007 6	PN2008 9	Peptide# B
SGF with Pepsin	11.8	12.4	n/a	n/a
SIF with Pancreatin	12.5	>24	>24	>24
Mouse Plasma	10.6	>24	>24	>16

SGF: Simulated Gastric Fluids; SIF: Simulated Intestinal Fluids; n/a: not available

# Oral Hepcidin Peptidomimetics Are Pharmacologically Active

## Serum Iron Reductions in Healthy Mice

% Reduction in serum iron in healthy mouse at 4.5 hr after oral dosing of peptides



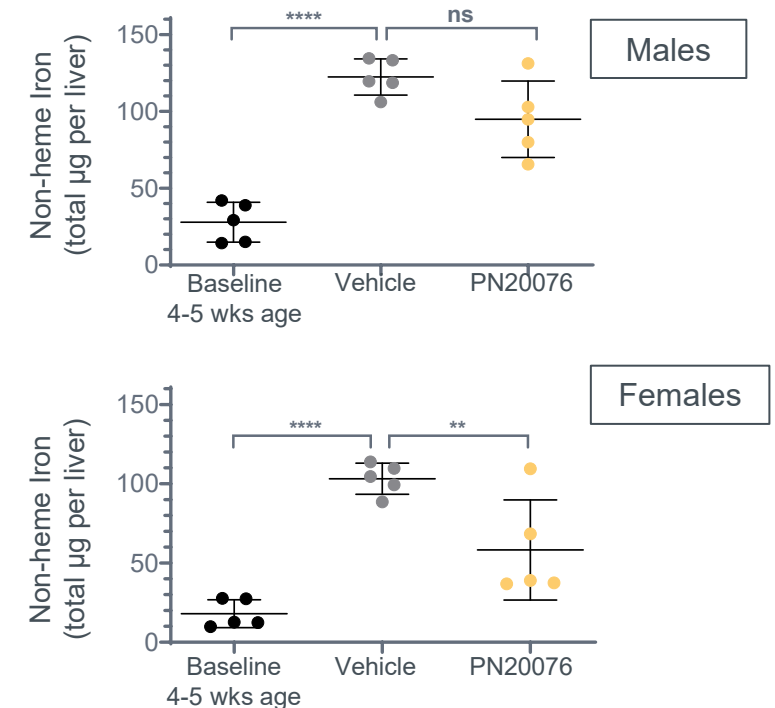
- Peptide# B was optimized from PN20076 for improved potency and permeability
  - showed robust serum iron reduction after single oral dose.

# Preclinical POC in A Mouse Model of Hereditary Hemochromatosis

## Oral Hepcidin Peptidomimetic, PN20076, Prevented Liver Iron Overload

- In HFE2<sup>-/-</sup> mice, 2 weeks of iron enriched diet (~ 300 ppm iron) resulted in:
  - Rapid increases in serum iron (2x of normal values, data not shown)
  - Greater than 5-fold increase in non-heme iron concentration in liver
- Concomitant treatment with PN20076 at ~300 mg/kg daily dose, **prevented iron deposition in the liver**
  - Statistically significant difference in female group and trend in males
  - Need longer treatment and probably BID dosing
- HH patients previously phlebotomized to reduce their body iron stores will benefit from a convenient oral therapy for iron overload prevention.

### Reduced iron loading in livers of HFE2<sup>-/-</sup> mice after daily oral dosing of PN20076 for 2 weeks



Statistical analysis: One-way ANOVA with Dunnet's Comparisons; \*\*\*\*  $p < 0.0001$ , \*\*  $p < 0.01$ , ns non-significant

# Preclinical POC in Mouse Model for Secondary Erythrocytosis

## Oral Hepcidin Peptidomimetic, Peptide# B, is Pharmacodynamically Active in Reducing Serum Iron

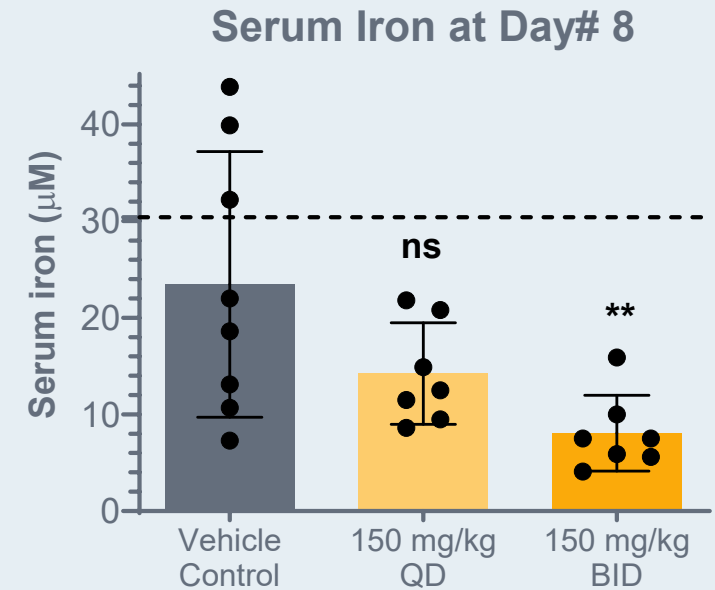


### EPO driven mouse model for secondary erythrocytosis (Ref: Wang J, Haematologica 2018)



- EPO model mimics the hematological parameters of polycythemia vera where JAK2 mutation drives the erythrocytosis.
- Serum iron had returned to baseline in the QD group on Day# 8.
- BID group showed significant serum iron suppression to  $< 10 \mu\text{M}$  on Day# 8.

### Oral dosing of Peptide# B at 150 mg/kg in EPO Model



----- Normal values in mice **not** treated with EPO

Statistical analysis: One-way ANOVA with Dunnet's Comparisons; \*\* $p < 0.01$ , \* $p < 0.05$ , ns non-significant

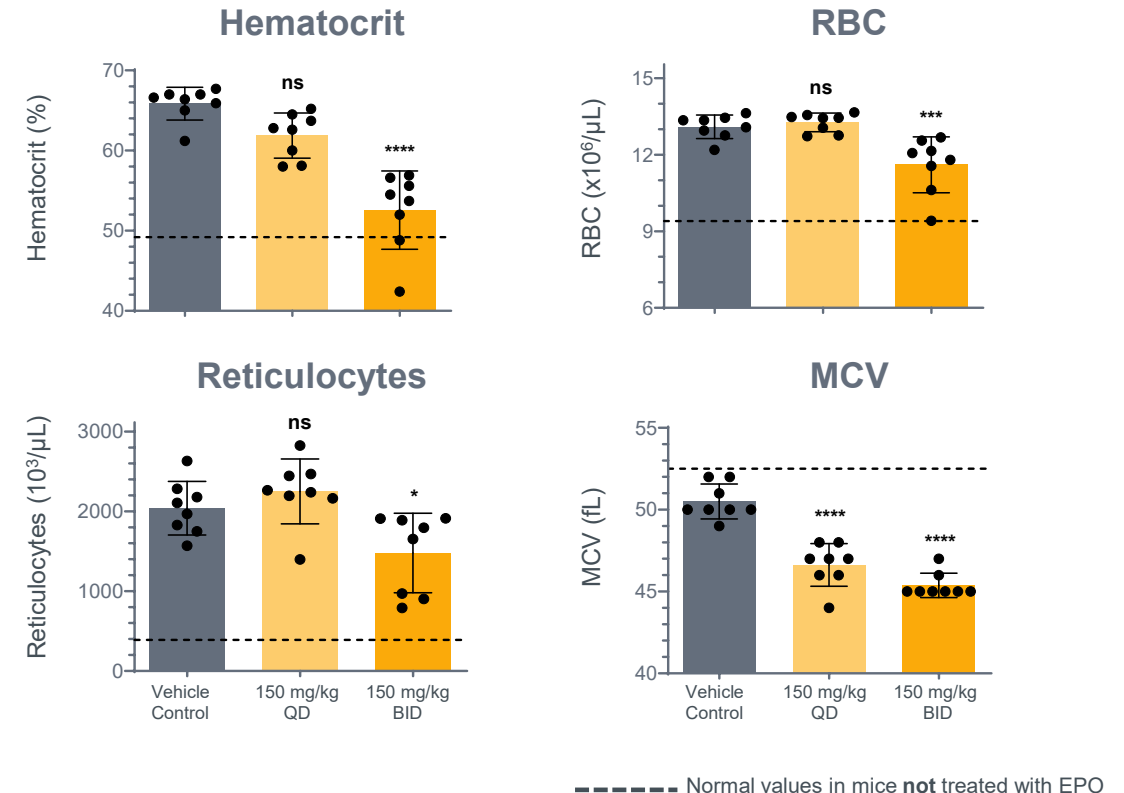


# Preclinical POC in Mouse Model for Secondary Erythrocytosis

## Oral Hepcidin Peptidomimetic, Peptide# B, Reduced Hematocrit, RBC, Reticulocytes and MCV

- Animals that received BID dosing showed
  - Reductions in hematocrit and hemoglobin (data not shown), with values close to normal levels
  - Reductions in RBC and Reticulocyte counts, although still higher than normal values
  - Reductions in Mean Corpuscular Volume (MCV) and Mean Corpuscular Hemoglobin (data not shown) indicating iron restricted erythropoiesis
- Further optimization of oral hepcidin peptides is ongoing to improve potency and permeability.

### Oral dosing of Peptide# B at 150 mg/kg in EPO Model



Statistical analysis: One-way ANOVA with Dunnet's Comparisons; \*\*\*\*  $p < 0.0001$ , \*\*\*  $p < 0.001$ , \*\*  $p < 0.01$ , \*  $p < 0.05$ , ns non-significant

# Conclusions

- We have described the discovery of hepcidin peptidomimetics with oral stability and systemic pharmacodynamic activity (serum iron reduction) in mice.
- Further, in proof-of-concept pre-clinical studies we have demonstrated efficacy of oral hepcidin peptidomimetics in conditions where systemic iron restriction/sequestration is sufficient
  - to prevent liver iron overload in a mouse model of hereditary hemochromatosis (HFE2<sup>-/-</sup>)
  - to control erythropoiesis in a mouse model of EPO-driven secondary erythrocytosis
- Further optimization of oral hepcidin peptidomimetics and treatment paradigm is on-going.
- Early pre-clinical data are indicative of the potential of our oral hepcidin peptidomimetics for hereditary hemochromatosis, polycythemia vera and other conditions that can benefit from modulating iron homeostasis.
- Oral hepcidin mimetics with systemic activity will allow broader access to the treatment of current and new disease indications