

# THE ANTI-IL-33 ANTIBODY, ITEPEKIMAB, POTENTLY BLOCKS AIRWAY INFLAMMATION POST A SINGLE DOSE IN MICE

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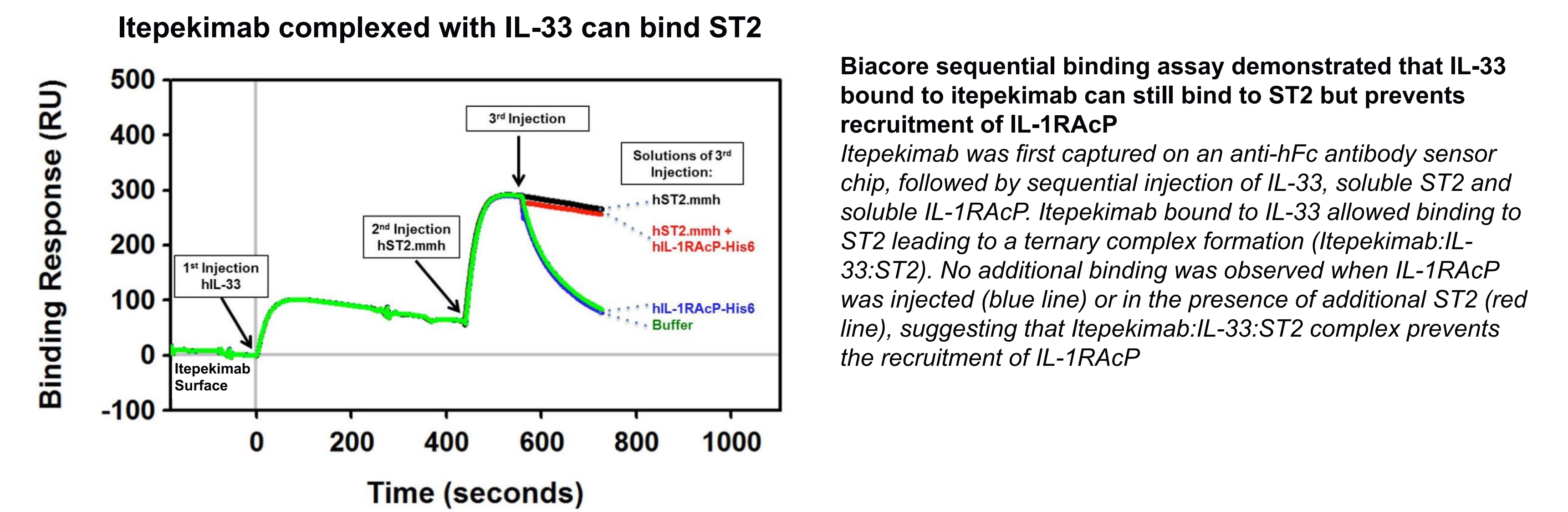
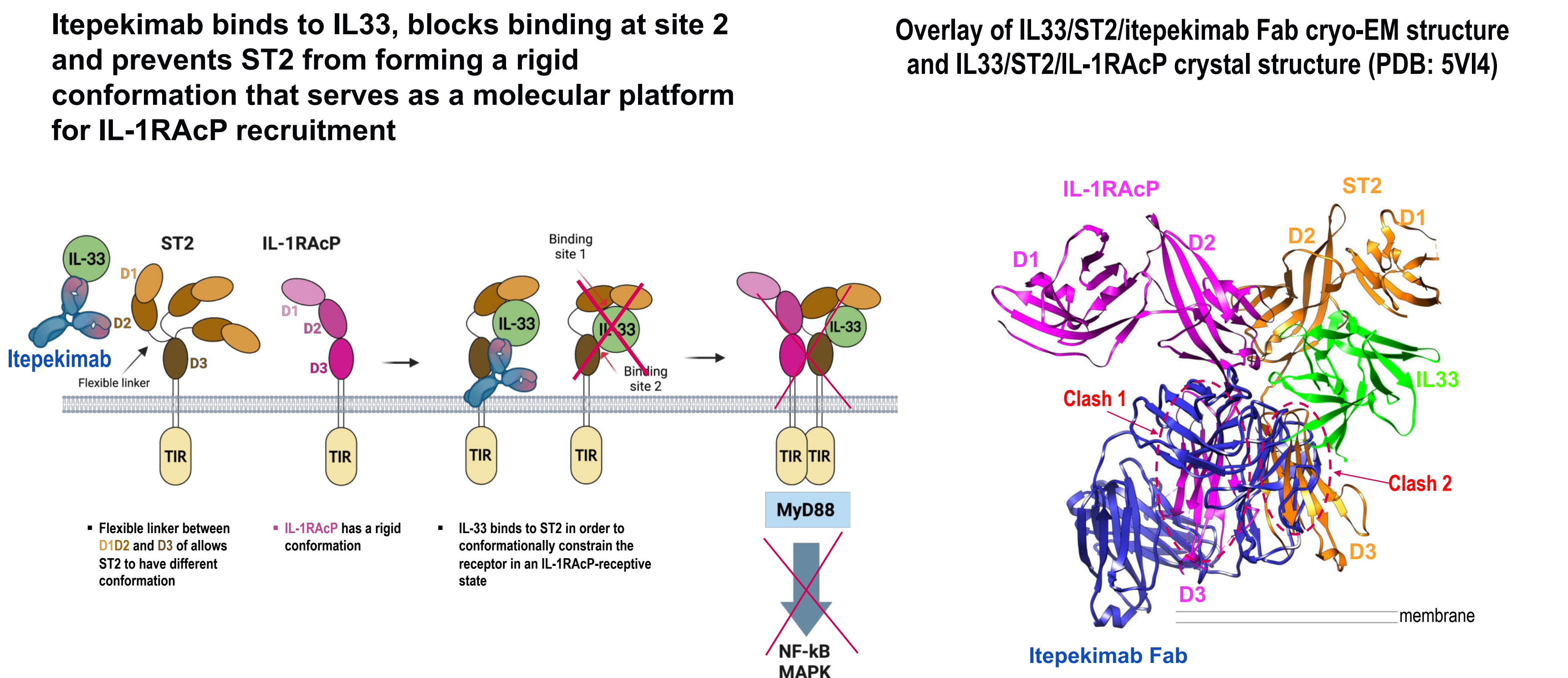
<sup>1</sup>Regeneron Pharmaceuticals, Inc., Tarrytown, NY, USA. 1,2

## INTRODUCTION

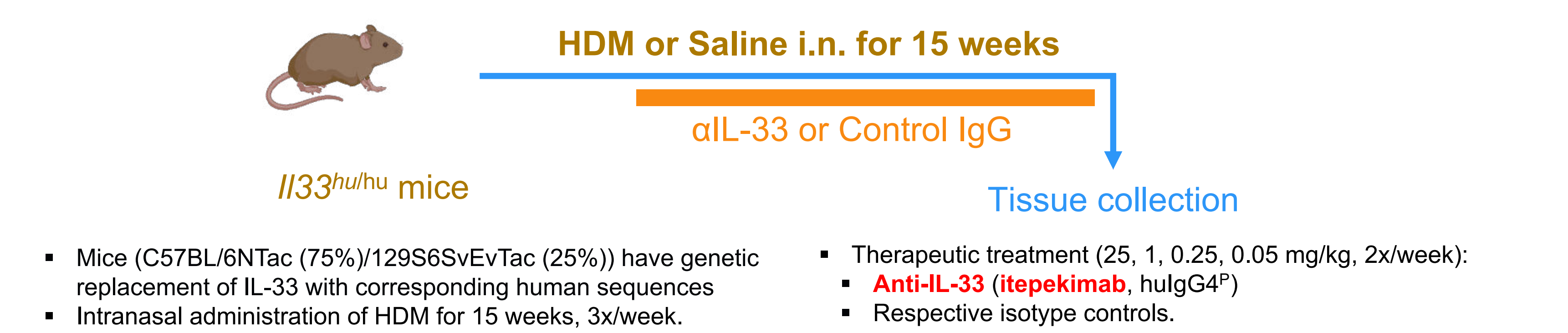
The proinflammatory cytokine, IL-33, signals through a heterodimer of ST2 and IL-1RAcP, and induces MyD88-dependent NF-κB signaling. Blockade of IL-33 using itepekimab, a high affinity fully human IgG4 monoclonal antibody, has shown benefit in early asthma and COPD clinical studies. Here, we assessed the binding kinetics of itepekimab to human IL-33 and performed pharmacokinetic (PK) and pharmacodynamic (PD) assessment in a house dust mite (HDM)-driven lung inflammation mouse model.

## RESULTS

### ITEPEKIMAB-BOUND IL-33 CAN BIND TO ST2 BUT PREVENTS TRANSITION TO ACTIVE CONFORMATION REQUIRED FOR RECRUITMENT OF IL-1RAcP & SIGNALLING



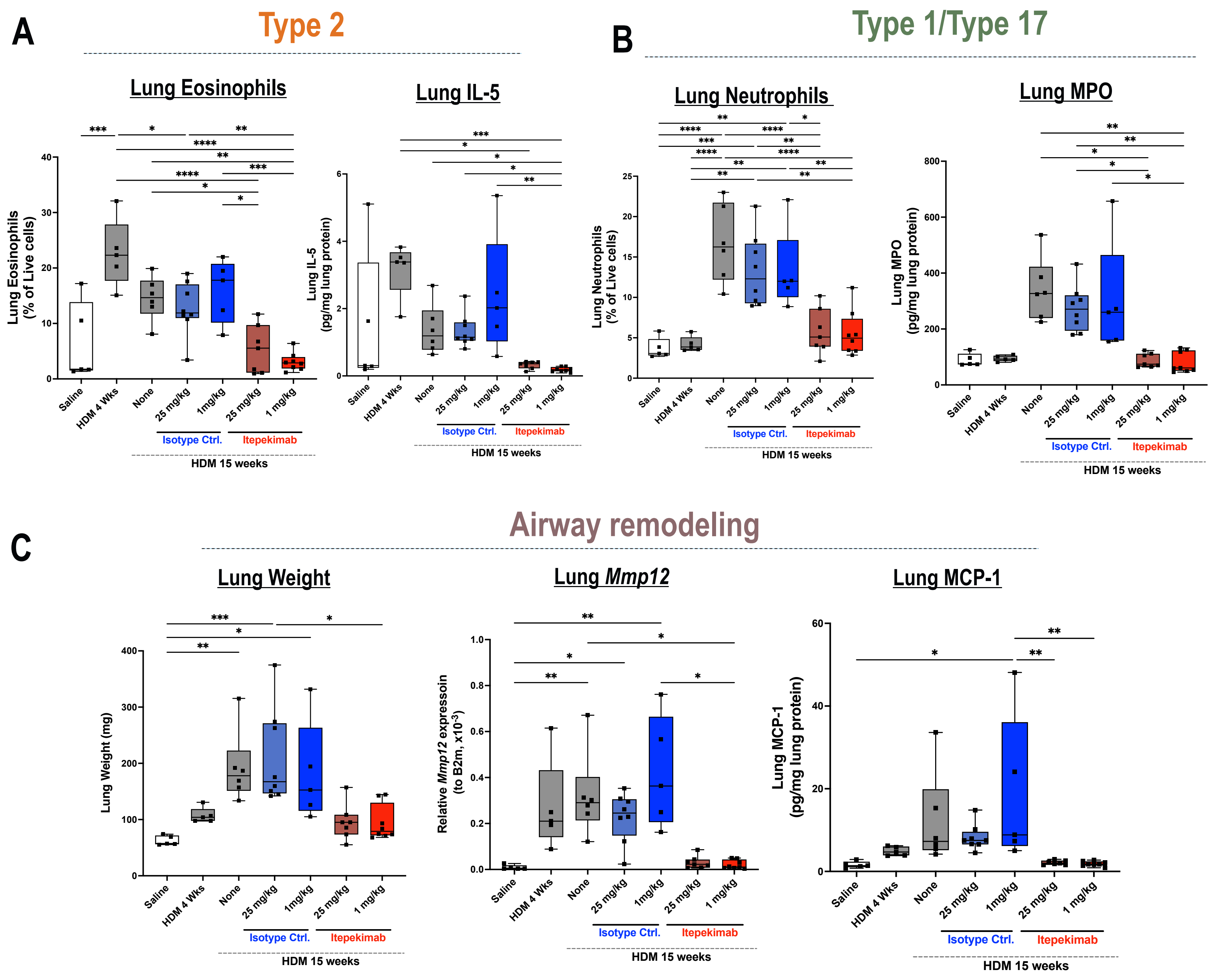
### CHRONIC HOUSE DUST MITE (HDM) DRIVEN AIRWAY INFLAMMATION MODEL



### DISCLOSURE

Research sponsored by Sanofi and Regeneron Pharmaceuticals, Inc. Seblewongel Asrat, Randi Foster, George Scott, Yi Zhou, Vishal Kamat, Ashique Rafique, Dylan Birchard, Li-Hong Ben, Jeanne Allinne, Andrew J. Murphy, Matthew C. Franklin, Pamela Krueger, Matthew A. Sleeman and Jamie M. Orengo are current and former employees of Regeneron Pharmaceuticals, Inc and may hold stock or stock options

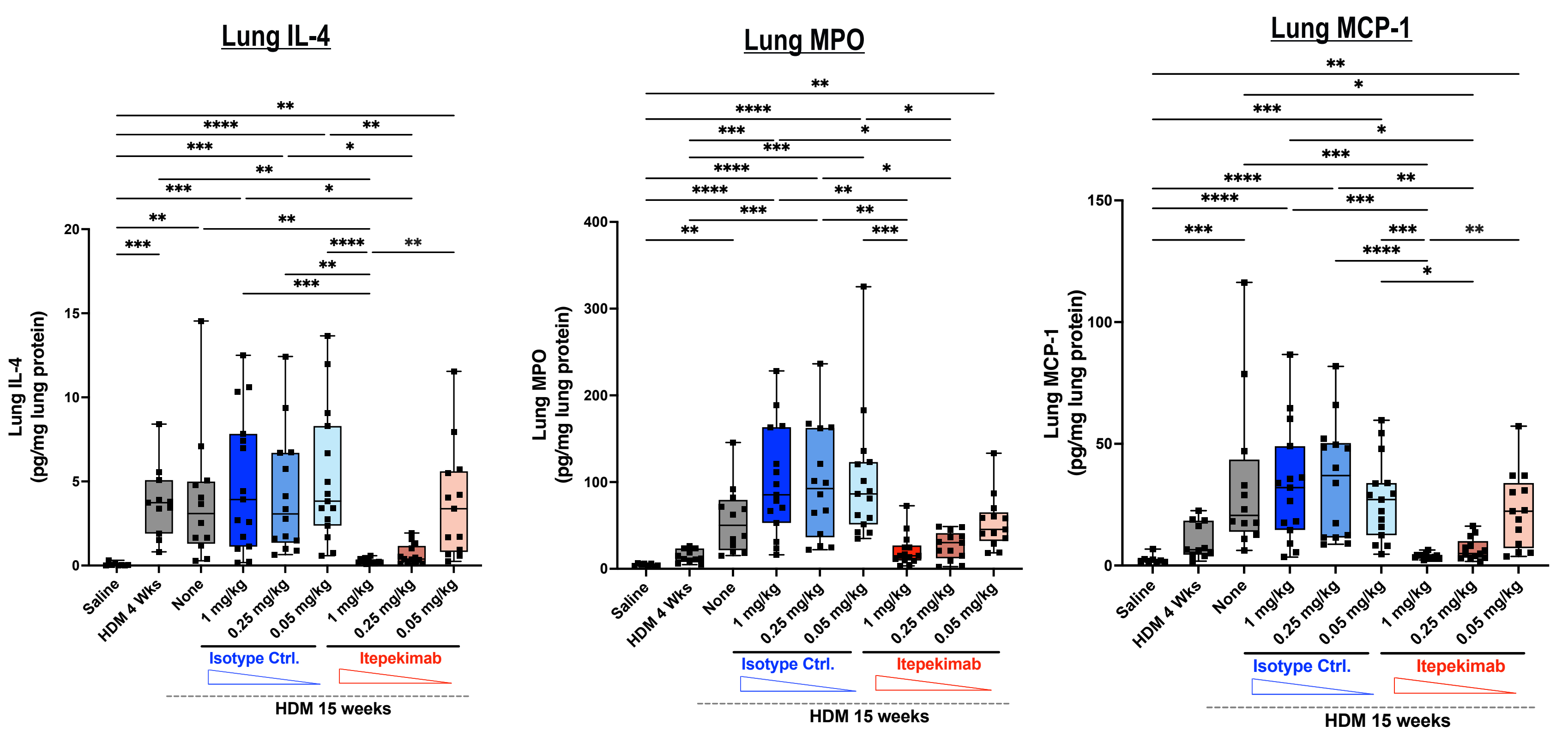
### ITEPEKIMAB POTENTLY BLOCKS TYPE 2 AND TYPE 1/TYPE 17 AIRWAY INFLAMMATION AND PREVENTS LUNG REMODELING AT HIGH (25 MG/KG) AND LOW (1 MG/KG) DOSES IN MICE



**Itepekimab reduced type 2 and type 1/17 airway inflammation and lung remodeling in mice at high (25mg/kg) and low doses (1mg/kg)**

A-C. II33<sup>hu/hu</sup> mice were exposed to HDM for 15 weeks with therapeutic treatment of itepekimab or isotype control at 25mg/kg and 1mg/kg. A. Type 2 airway inflammation was analyzed by looking at lung eosinophilia and lung IL-5 levels. B. Type 1/Type 17 airway inflammation was assessed by looking at lung neutrophilia and lung MPO levels. C. Airway remodeling was assessed by looking at overall lung weight, lung Mmp12 expression and lung MCP-1 levels. Flow cytometry was used to analyze eosinophils and neutrophils. MSD or ELISA was used to analyze lung IL-5, MPO and MCP1 levels. TaqMan was used to measure Lung Mmp12 expression. Each point reflects a single mouse.

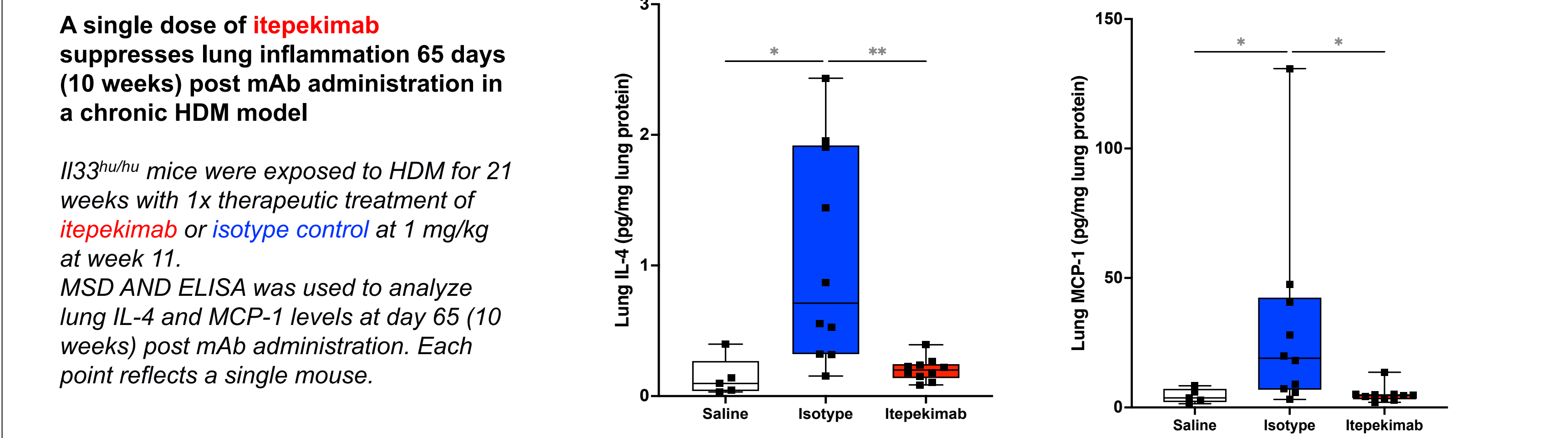
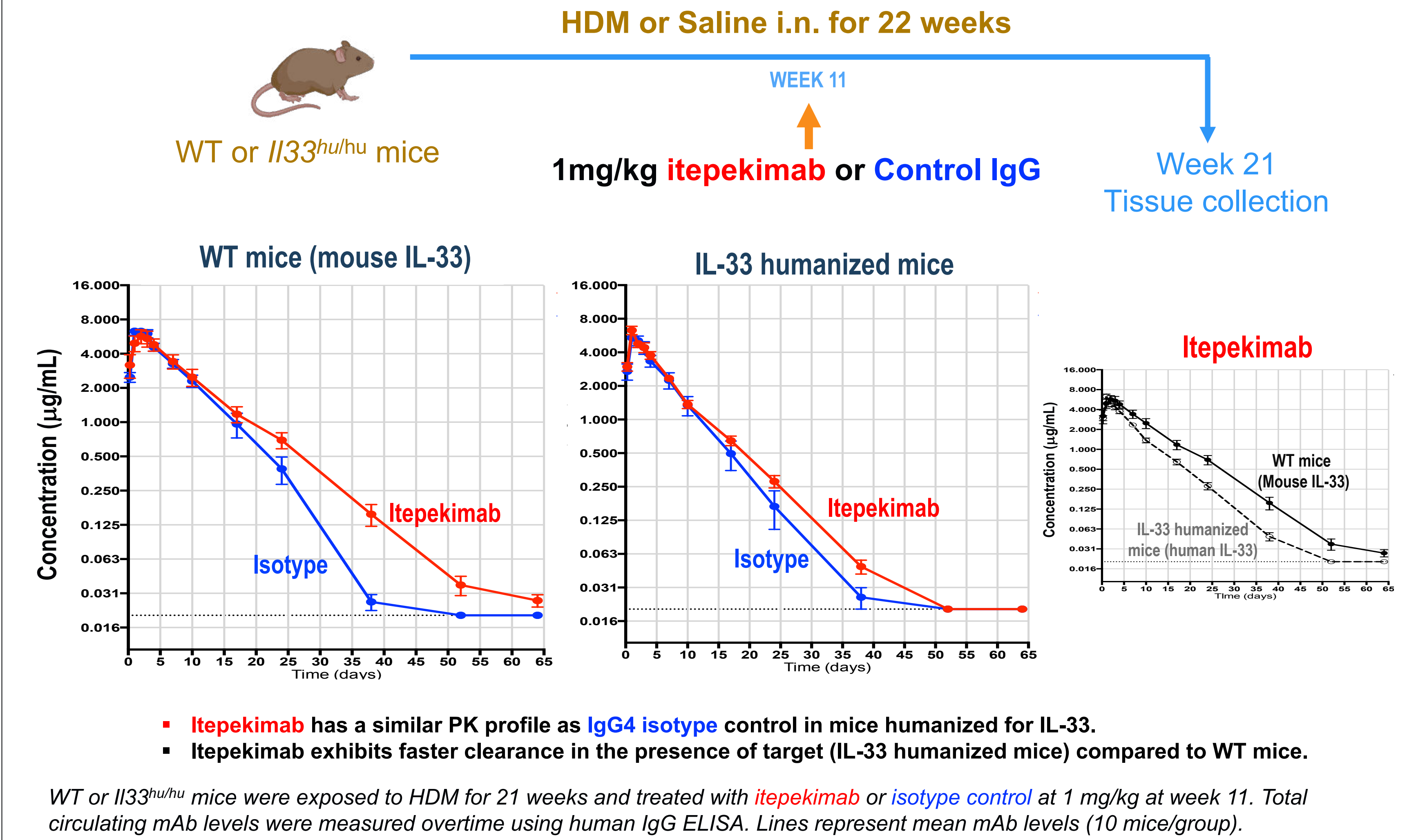
### FURTHER DOSE TITRATION HIGHLIGHTS BLOCKING EFFICACY OF ITEPEKIMAB



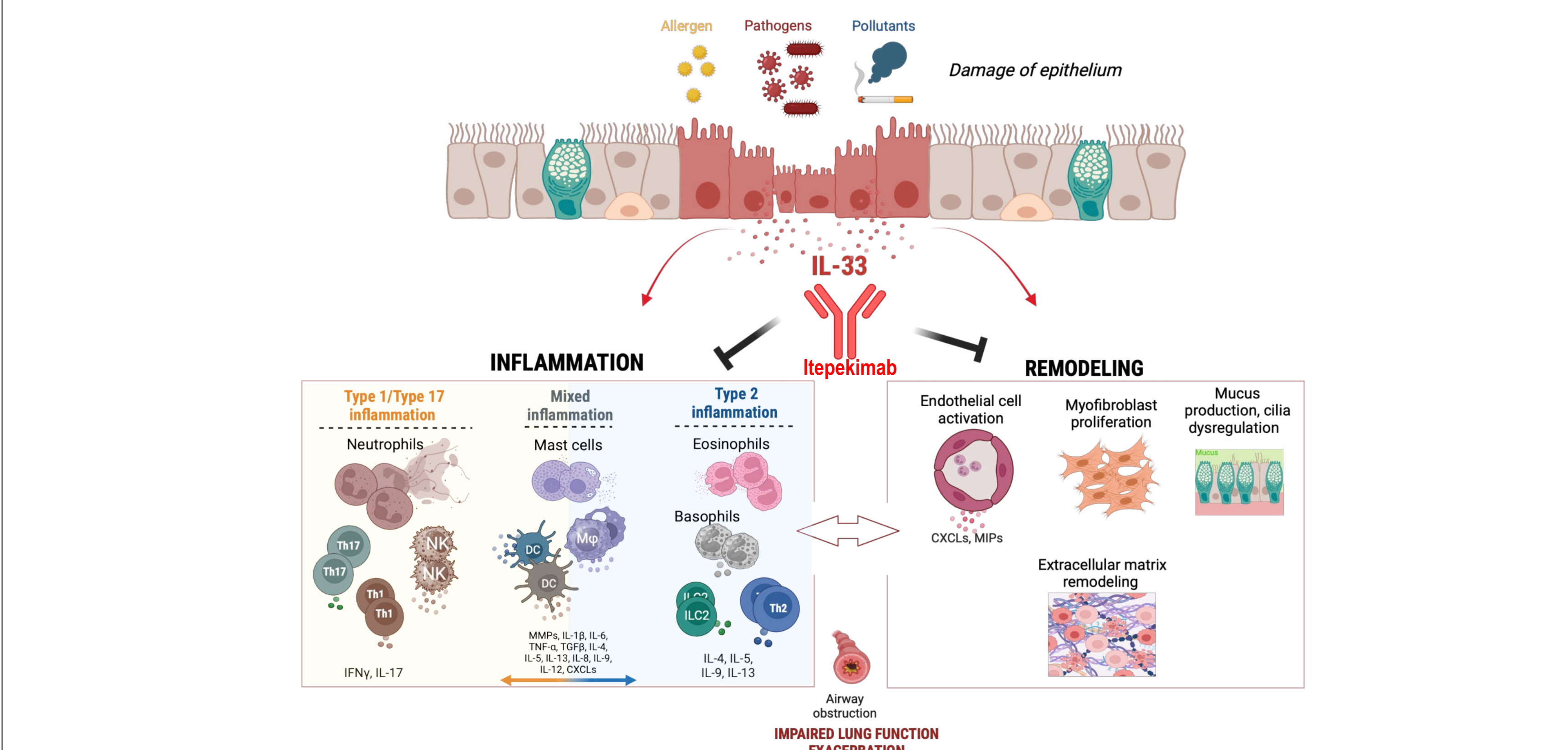
**Itepekimab reduced mixed airway inflammation and remodeling even at low doses (1 and 0.25 mg/kg)**

II33<sup>hu/hu</sup> mice were exposed to HDM for 15 weeks with therapeutic treatment of itepekimab or isotype control at 1mg/kg, 0.25mg/kg or 0.05mg/kg. MSD or ELISA was used to analyze lung IL-4, MPO and MCP1 levels. Each point reflects a single mouse.

### A SINGLE THERAPEUTIC DOSE OF ITEPEKIMAB (1MG/KG) SHOWS A COMPARABLE PK PROFILE TO ISOTYPE CONTROL AND SUPPRESSES LUNG CYTOKINES 65 DAYS POST A SINGLE DOSE



### SUMMARY: IL-33 INITIATES AND AMPLIFIES MIXED AIRWAY INFLAMMATION AND LUNG REMODELING, WHICH IS POTENTLY BLOCKED BY ITEPEKIMAB



IL-33 is a key driver of mixed airway inflammation and remodeling. By its high affinity interaction with IL-33, itepekimab prevents IL-33 from forming an active signaling complex. Intervention with itepekimab, even at doses as low as 1mg/kg, results in reduction of type 1/type 17 and type 2 airway inflammation as well as lung remodeling in a mouse model of chronic progressive lung inflammation