

ORION-11

Inclisiran for subjects with ACSVD or ACSVD-risk equivalent and elevated low-density lipoprotein cholesterol

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On behalf of the ORION-11 investigators

ORION-11: Acknowledgements Contributions from 7 countries at 70 sites



Country	Lead enrolling investigators				
Czech Republic	J Malecha	A Dufka			
Germany	M Licka	C Contzen	K Arelin		
Hungary	K Nagi	C Hajdå	K Wittmann		
Ukraine	R Stets	A Kulyk	H Myshanych		
South Africa	N Fourie	E Van Nieuwenhuizen			
UK	N Sulli	Y Huong	M Blagden		
Poland	A S-Bialynik	D Knychas			



Since low density lipoprotein cholesterol (LDL-C) is cumulative and causal:

• Low lifelong levels are essential

For patients and practitioners:

• Interventions need to be safe, convenient and produce assured results

ORION-11: Background and rationale Harnessing the natural process of RNAi





Small interfering double-stranded RNA

- Harnesses the natural process of RNAi
- Nucleotides modified for durability and low immunogenicity
- Distributed to liver due to GalNAc conjugation
- Inhibits production of PCSK9 specifically, durably and potently

ORION-11: Background and rationale Phase I-II inclisiran studies identified 2x/year dose potential

Dose-finding¹ and PD modeling² showed durable, potent effects on LDL-C

- 300mg led to 53% lowering of LDL-C
- Tested schedules gave durable responses
- PD models described effect-time course
- Extension studies affirmed long-term effect



1. Ray et al. N Engl J Med 2017; 376: 1430-40 2. ORION-1 and ORION-3 presented at NLAAnnual Meeting, Miami 2019 by JP Kastelein

Selected data from ORION-1 dose finding study

ORION-11: Study design Eighteen months treatment and observation

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Randomized 1:1 inclisiran 300 mg vs. placebo – with maximally tolerated statins



ORION-11: Entry criteria ASCVD and risk equivalent patients not at LDL-C goal



Inclusion criteria

Age \geq 18 years

- ASCVD or risk equivalent patients¹
- ASCVD
 - LDL-C ≥70 mg/mL LDL-C ≥100 mg/mL Risk equivalent

Statin treatment Maximally tolerated doses Documented intolerance

Ezetimibe allowed

Informed consent required

Exclusion criteria

Prior or planned use of PCSK9 mAbs MACE within 3 months of randomization NYHA class III-IV HF — or LVEF 30% Uncontrolled severe hypertension

Severe concomitant non CV disease

Prior/planned other investigational drug

Fasting TG >4.52 mmol/L (400 mg/mL)

1. ASCVD-risk equivalents - comprising type 2 diabetes, familial hypercholesterolemia, or a 10-year risk of ≥20% by Framingham Risk Score or equivalent that had a target LDL-C of <100 mg/dL.

ORION-11: Objectives To confirm inclisiran efficacy and safety over 18 months



Study endpoints

1. Effectiveness

Primary

- Percent LDL-C change vs. placebo
 - At day 510
 - Average over days 90 540

Secondary

- LDL-C change over time
- Changes in PCSK9 and other lipids

2. Safety and tolerability

Treatment emergent adverse events

Laboratory parameters

3. Exploratory

Cardiovascular events¹



Sample size assumptions

- Mean LDL-C reduction will be no less than 30 mg/dL (SD 20 mg/dL) with 5% drop out rate
- >90% power to detect 30% lowering of LDL-C level with one-sided α = 0.025

Primary endpoints

• Family-wise type I error rate controlled using a sequential testing procedure

Sensitivity analysis for primary efficacy endpoints

- Missing data assumptions will be assessed
- Pre-specified imputation and analysis methods will be used to account for missing data

Safety observation of ~3000 inclisiran injections and 1125 years patient exposure

ORION-11: Patient disposition High proportion of patients completed 18 month study



1. Safety population comprises any subject given any study medication

ORION-11: Patients Representative high risk cohort balanced by randomization

Patient characteristic	Placebo	Inclisiran
ITT population ¹	N = 807	N = 810
Age median (range) - years	65 (34-87)	66 (20-88)
Male gender	581 (72%)	579 (72%)
ASCVD	702 (87%)	712 (88%)
Risk equivalent	105 (13%)	98 (12%)
Statin use	766 (95%)	766 (95%)
Of which high intensity statins given	729 (95%)	734 (96%)
Ezetimibe use	62 (8%)	52 (6%)
Baseline LDL-C mg/dL (SEM)	104 (1)	107 (1)



ORION-11 Efficacy results

ORION-3 for NLA Version 8.0

Efficacy Highly significant lowering of LDL-C relative to placebo



Treatment group	N (ITT)) Percent change LDL-0			
	Mean at				
		day	510		
		Observed	Imputed ¹		
Placebo	807	+ 4	+ 4		
Inclisiran	810	- 49 - 49			
Difference (1º endpoint)		- 54	- 53		
P-value		<0.0001			

1. Accounting for randomly missing values using mixed model repeated measures

ORION-11: Efficacy Highly significant lowering of LDL-C relative to placebo



Treatment group	N (ITT)	Percent change LDL-C			
		Mean at day 510		Time-av day 90	veraged) - 540
		Observed	Imputed ¹	Observed	Imputed ¹
Placebo	807	+ 4	+ 4	+3	+3
Inclisiran	810	- 49	- 49	- 48	- 47
Difference (1 ^o er	ndpoint)	- 54	- 53	- 50	- 50
P-value		<0.0	0001	<0.00	0001

1. Accounting for randomly missing values using mixed model repeated measures

ORION-11: Efficacy Durable, potent and consistent effect over 18 months

Percent change in LDL-C over time – observed values ITT patients



1. All 95% confidence intervals are less than $\pm 2\%$ and therefore are not visible outside data points

ORION-11: Efficacy Potent, consistent response to inclisiran



Individual patient responses contributing to primary endpoint -- 17 months





ORION-11 Safety results

ORION-3 for NLA Version 8.0

ORION-11: Safety and tolerability Adverse event profile similar to placebo



Treatment emergent adverse event (TEAE)	Placebo	Inclisiran
Safety population ¹ – AEs in \geq 5% patients	N = 807	N = 810
Patients with at least one TEAE	655 (82%)	671 (83%)
Diabetes mellitus adverse events	94 (12%)	88 (11%)
Nasopharyngitis	90 (11%)	91 (11%)
Hypertension	54 (7%)	53 (7%)
Upper respiratory tract infection	49 (6%)	52 (6%)
Arthralgia	32 (4%)	47 (6%)
Osteoarthritis	40 (5%)	32 (4%)

1. Safety population includes all patients who received at least 1 dose of study medication 2. Other TEAEs reported with lower frequencies than 5% in any group had no clinically meaningful differences

ORION-11: Safety and tolerability Injection site AEs localized, mostly mild and transient



Injection site TEAEs	Pla	acebo	Incli	siran	Difference
Safety population ¹	Ν	= 807	N =	810	
Protocol-defined skin event	4	(0.50%)	38 (4.69%)	4.19%
(Reaction, erythema, rash, pruritus, hypersensitivity)					
Mild	3	(0.37%)	23 (2.84%)	2.46%
Moderate	1	(0.13%)	15 (1.85%)	1.73%
Severe	0	()	0 ()	
Persistent	0	()	0 ()	

1. Safety population includes all patients who received at least 1 dose of study medication

ORION-11: Safety and tolerability No evidence of liver, kidney, muscle or platelet toxicity



Laboratory tes Safety population ^{1,2}	ts	Placebo N = 804		Inclisiran N=811	
Liver function	ALT >3x ULN	4	(0.5%)	4	(0.5%)
	AST >3x ULN	4	(0.5%)	2	(0.2%)
	ALP >2x ULN	2	(0.2%)	1	(0.1%)
	Bilirubin >2x ULN ³	8	(1.0%)	6	(0.7%)
Kidney function	Creatinine >2 mg/dL	11	(1.4%)	5	(0.6%)
Muscle	CK >5x ULN	9	(1.1%)	10	(1.2%)
Hematology	Platelet count <75x10 ⁹ /L	1	(0.1%)	0	(0.0%)

1. Safety population includes all patients who received at least 1 dose of study medication 2. Patients may be counted in more than one category 3. No cases met Hy's Law

ORION-11: Safety and tolerability No difference in serious adverse events



Serious TEAEs	Placebo		Incli	siran
Safety population ^{1,2}	N = 804		N = 811	
Patients with at least one serious TEAE	181	(22.5%)	181	(22.3%)
All cause death	15	(1.9%)	14	(1.7%)
Cardiovascular	10	(1.2%)	9	(1.1%)
Cancer	3	(0.4%)	3	(0.4%)
New, worsening or recurrent malignancy	20	(2.5%)	16	(2.0%)

1. Safety population includes all patients who received at least 1 dose of study medication 2. Patients may be counted in more than one category

ORION-11: Exploratory endpoint Adverse cardiovascular events



Cardiovascular TEAEs	Placebo		Incli	siran
Safety population ^{1,2}	N = 804		N =	811
Pre-specified exploratory CV endpoint ³	83	(10.3%)	63	(7.8%)
Cardiovascular death	10	(1.2%)	9	(1.1%)
Fatal or non-fatal MI and stroke ⁴	30	(3.7%)	12	(1.5%)
Fatal or non-fatal MI	22	(2.7%)	10	(1.2%)
Fatal or non-fatal stroke	8	(1.0%)	2	(0.2%)

1. Safety population includes all patients who received at least 1 dose of study medication 2. Patients may be counted in more than one category 3. MedDRA-defined cardiovascular basket of nonadjudicated terms including those classified within cardiac death, and any signs or symptoms of cardiac arrest, non-fatal MI and/or stroke 4. Post hoc analysis of hard endpoints



Efficacy

- ORION-11 met all primary and secondary endpoints
- Inclisiran reduced the primary LDL-C endpoint by 54% at 17 months, 50% time averaged
- Inclisiran resulted in potent, consistent PCSK9 knock down

Safety and tolerability

- Inclisiran safety profile was similar to placebo
- No adverse changes in laboratory markers
- Injection site events 4.2% predominantly mild and none persistent

Exploratory endpoint

• Numerically fewer CV events were reported for inclisiran than placebo

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Inclisiran achieves durable and potent LDL-C reduction with only 2x yearly injection

Excellent safety profile in a high cardiovascular risk population

Administration by HCP potentially coincides with typical six-monthly patient visits

- Lends itself to routine clinical practice
- Enables provider control over medication adherence
- May offer patients meaningful new choices
- Offering safe, convenient and assured results