

# 24hr and Random Spot Urine Collections Were Comparable in Assessing Oxalate Excretion and Response to Treatment in Primary Hyperoxaluria Type 1

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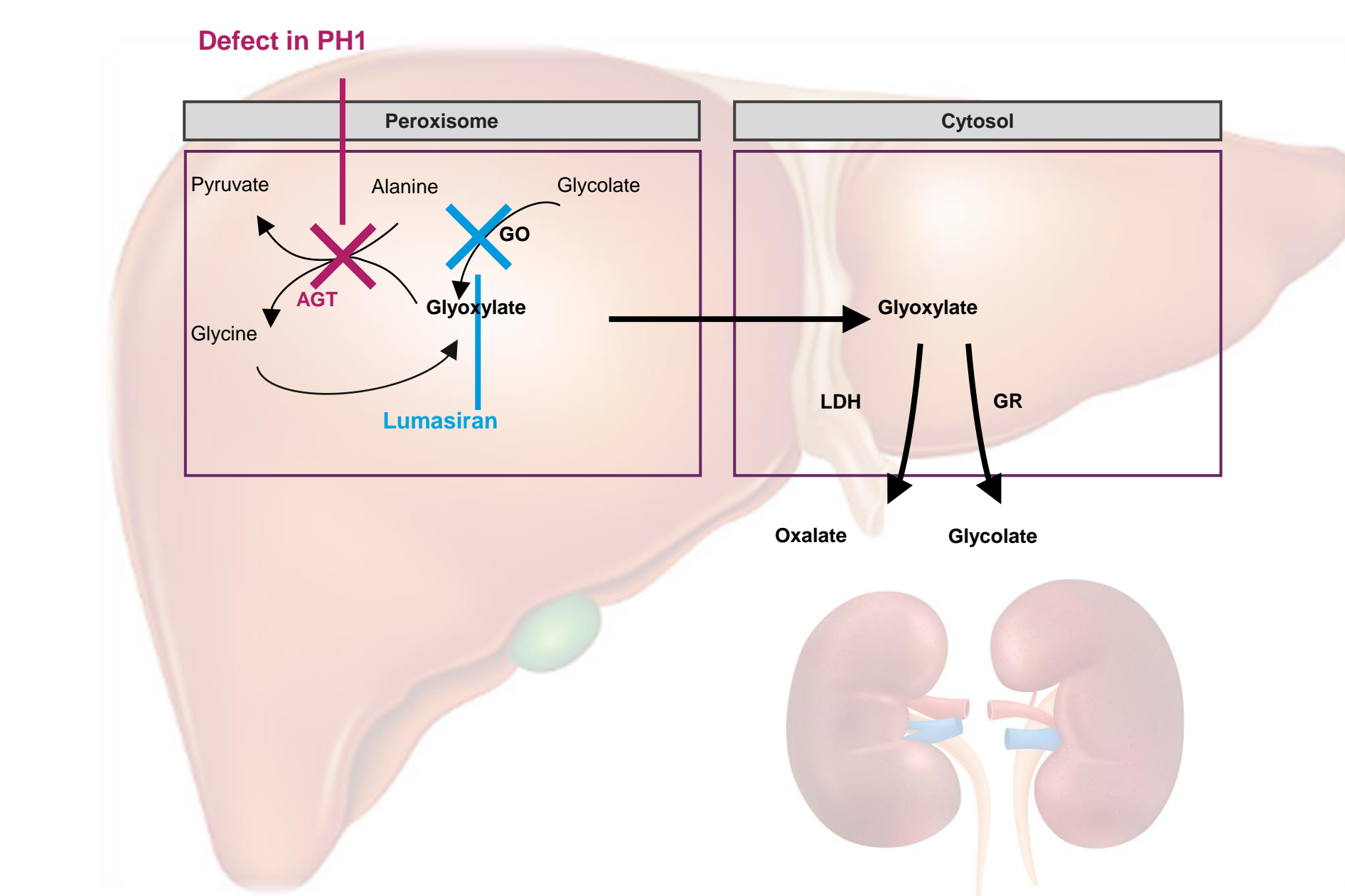
## Conclusions

- Pooled data from lumasiran clinical trials demonstrated a positive correlation with similar intra-patient variability between spot urinary oxalate:creatinine ratio and 24-hour urinary oxalate excretion
- The response to lumasiran as measured by the two methods of quantifying urinary oxalate excretion was comparable in patients with PH1
- These results indicate that spot urinary oxalate:creatinine ratio is a reliable parameter for assessing oxalate excretion and response to treatment in patients with PH1, serving as an alternative to 24-hour urine collection

## Introduction

- PH1 is characterized by increased oxalate production due to a deficiency in the hepatic peroxisomal enzyme AGT<sup>1,2</sup> (Figure 1)
- Excess oxalate can lead to recurrent kidney stones, nephrocalcinosis, progressive kidney failure, and multiorgan damage from systemic oxalosis<sup>1,2</sup>
- 24-hour urine collections are the gold standard for evaluating urinary oxalate excretion; however, they are time-consuming, require a high commitment, and are not always feasible in children
- Spot urine collections may serve as an alternative to quantify urinary oxalate levels in the absence of 24-hour samples<sup>3-5</sup>
- Lumasiran is an RNAi therapeutic approved by the FDA for the treatment of PH1 to lower urinary oxalate levels in pediatric and adult patients<sup>6</sup>
  - Lumasiran decreases hepatic oxalate production by inhibiting the production of GO<sup>7</sup> (Figure 1)
- Using data from lumasiran clinical trials, we evaluated the comparability of 24-hour and spot urine collection methods in assessing pretreatment oxalate excretion and response to lumasiran in patients with PH1

**Figure 1. Defect in Glyoxylate Metabolism in Hepatocytes of Patients With Primary Hyperoxaluria Type 1 and Lumasiran Therapeutic Hypothesis**



## Methods

- Lumasiran data used in this analysis were derived from 4 studies: a phase 1/2 study and its phase 2 open-label extension, and the phase 3 studies ILLUMINATE-A and ILLUMINATE-B (Table 1)

**Table 1. Summary of Lumasiran Clinical Studies That Contributed Data in the Current Analysis**

Study	Phase 1/2 Study Part B (NCT03350451) N=20	Phase 2 Open-Label Extension Study (NCT03350451) N=20	Phase 3 ILLUMINATE-A Study (NCT03681184) N=39	Phase 3 ILLUMINATE-B Study (NCT03905694) N=18
Study design	Multiple ascending doses	Long-term extension study up to 54 months of dosing	6-month double-blind, placebo-controlled period followed by a long-term extension period of up to 54 months	Single-arm, open-label study with a 6-month primary analysis period followed by a long-term extension period of up to 54 months
Patient population	<ul style="list-style-type: none"> <li>• Patients with PH1</li> <li>• 6–64 years old</li> <li>• eGFR &gt;45 mL/min/1.73m<sup>2</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Patients with PH1 who completed phase 1/2 study, part B</li> </ul>	<ul style="list-style-type: none"> <li>• Patients with PH1</li> <li>• ≥26 years old</li> <li>• eGFR ≥30 mL/min/1.73m<sup>2</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Patients with PH1</li> <li>• &lt;6 years old</li> <li>• eGFR &gt;45 mL/min/1.73m<sup>2</sup></li> </ul>

\*Normal serum creatinine if <12 months old.

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**Abbreviations:** AGT, alanine-glyoxylate aminotransferase; BL, baseline; BSA, body surface area; CI, confidence interval; CV, coefficient of variation; eGFR, estimated glomerular filtration rate; FDA, Food and Drug Administration; GO, glycolate oxidase; GR, glyoxylate reductase/hydroxypyruvate reductase; LDH, lactate dehydrogenase; PH1, primary hyperoxaluria type 1; R, Pearson's correlation coefficient; RNAi, ribonucleic acid interference; SEM, standard error of the mean.

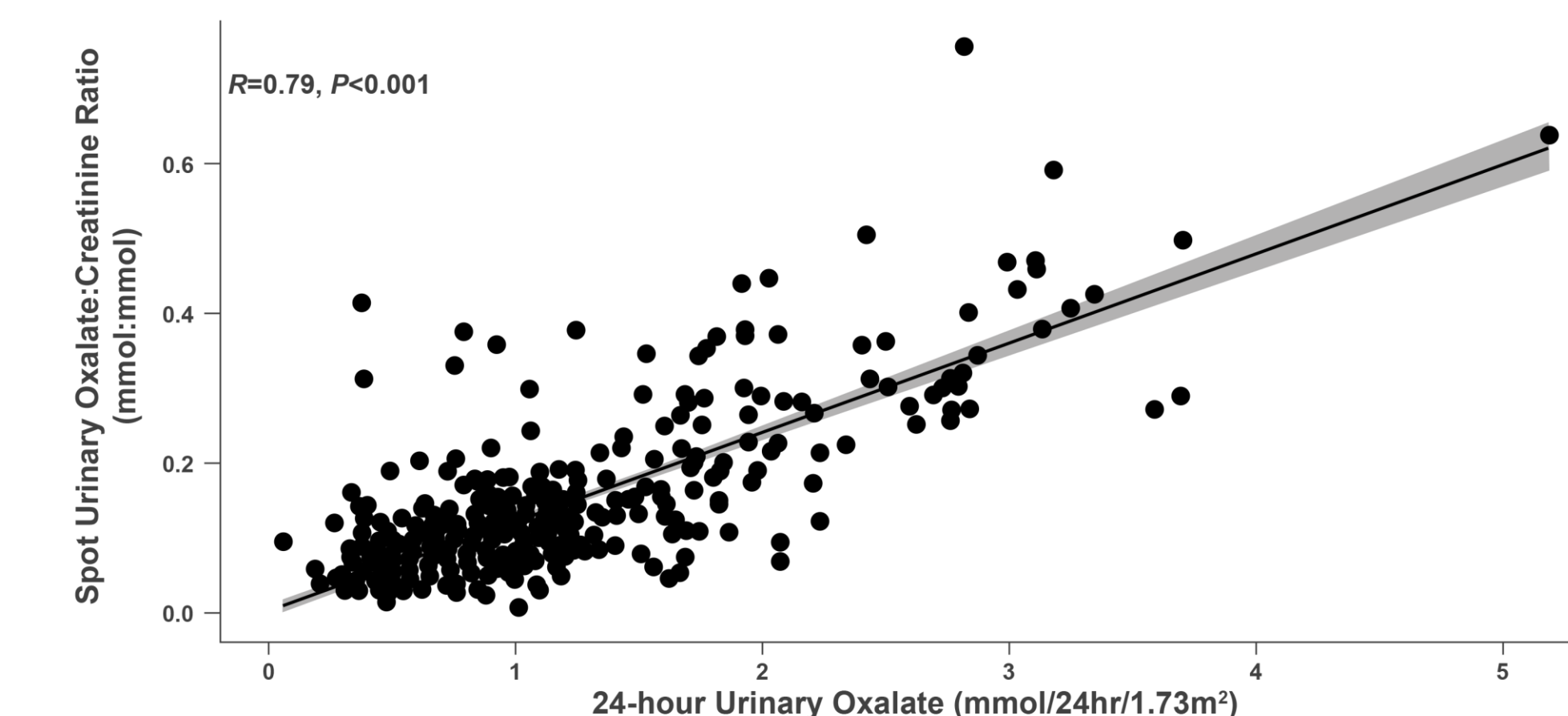
**References:** 1. Cochat P, Rumsby G. *N Engl J Med.* 2013;369:649-58. 2. Milliner et al. *GeneReviews*. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK1283>. 3. Clifford-Mobley O, et al. *Ann Clin Biochem.* 2015;52:113-21. 4. Hong YH, et al. *Urology.* 2010;75:1294-8. 5. Reusz GS, et al. *Pediatr Nephrol.* 1995;9:39-44. 6. OXLUMO (lumasiran) [prescribing information]. Cambridge, MA: Alnylam Pharmaceuticals, Inc.; 2020. 7. Liebow et al. *J Am Soc Nephrol* 2017;28:494-503.

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## Results

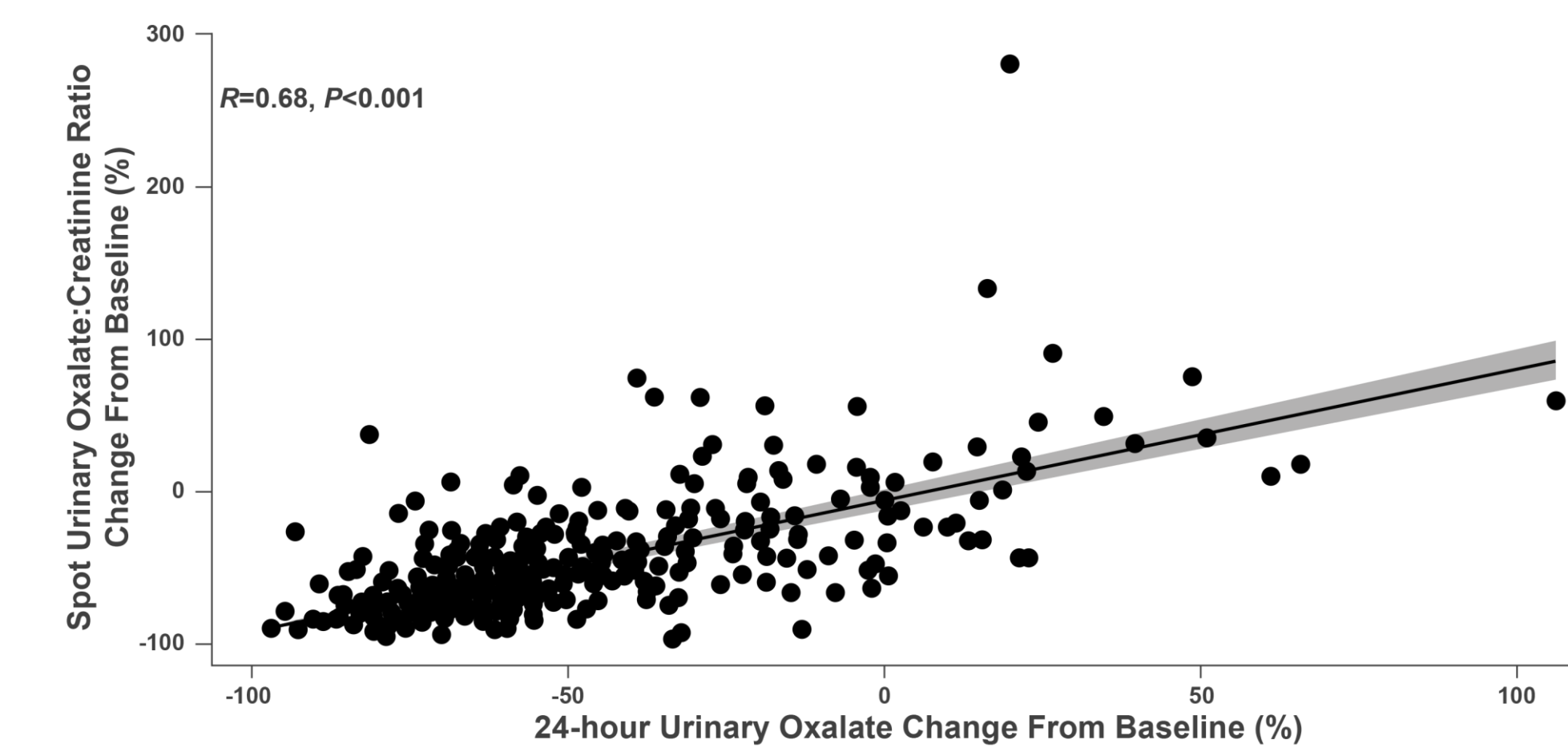
- Pooled analyses showed a statistically significant, positive correlation between 24-hour urinary oxalate and spot urinary oxalate:creatinine ratio for absolute values (Figure 2) and percent change from baseline (Figure 3)

**Figure 2. Correlation Between Absolute Values of BSA-Corrected 24-hour Urinary Oxalate and Spot Urinary Oxalate:Creatinine Ratio**



The line and shaded area represent the linear regression line and its 95% CI.

**Figure 3. Correlation Between Percent Change From Baseline Values of BSA-Corrected 24-hour Urinary Oxalate and Spot Urinary Oxalate:Creatinine Ratio**



The line and shaded area represent the linear regression line and its 95% CI.

- Intra-patient variabilities were similar between 24-hour urinary oxalate excretion and spot urinary oxalate:creatinine ratio (Table 2)

**Table 2. Intra-patient Variability Comparison of Spot Urinary Oxalate:Creatinine Ratio and 24-hour Urinary Oxalate Excretion**

Data Used for Comparison	Method of Urine Collection	N <sup>a</sup>	Within-patient Variability (%CV)	
			Mean	95% CI
Placebo	Spot oxalate:creatinine ratio	14	30.18	23.55, 36.8
	24-hour oxalate BSA-corrected	14	29.11	21.9, 36.32
	CV difference (%)	14	1.07	-6.05, 8.18
Lumasiran steady-state	Spot oxalate:creatinine ratio	42	30.90	23.76, 38.03
	24-hour oxalate BSA-corrected	42	24.83	21.3, 28.35
	CV difference (%)	42	6.07	-1.14, 13.28

<sup>a</sup>Total N=55. One patient contributed placebo data in the phase 1/2 study and lumasiran steady-state data in the phase 2 open-label extension study.

- The time course and magnitude of response to lumasiran in patients with PH1 were comparable between the 24-hour urinary oxalate and spot urinary oxalate:creatinine ratio methods
  - The mean (SEM) percent reduction in urinary oxalate from baseline of phase 1/2 study to month 6 of the phase 2 open-label extension study was comparable between 24-hour urinary collections (70.7% [3.8]) and spot urinary oxalate:creatinine ratio (74.5% [4.1]) (Table 3)
  - The least-squares mean reduction from months 3 to 6 in urinary oxalate was comparable between 24-hour urinary oxalate (65.4%) and spot urinary oxalate:creatinine ratio (63.6%) in the lumasiran arm of the ILLUMINATE-A study (Table 3; Figure 4)
  - These results were similar to those observed using spot urinary oxalate:creatinine ratio (72.0%) from younger children enrolled in the ILLUMINATE-B study (Table 3; Figure 4)
  - Two patients in ILLUMINATE-B had 24-hour urine collections at baseline and month 6; the mean (SEM) percent reduction from baseline in those patients was 68.4% (5.6)

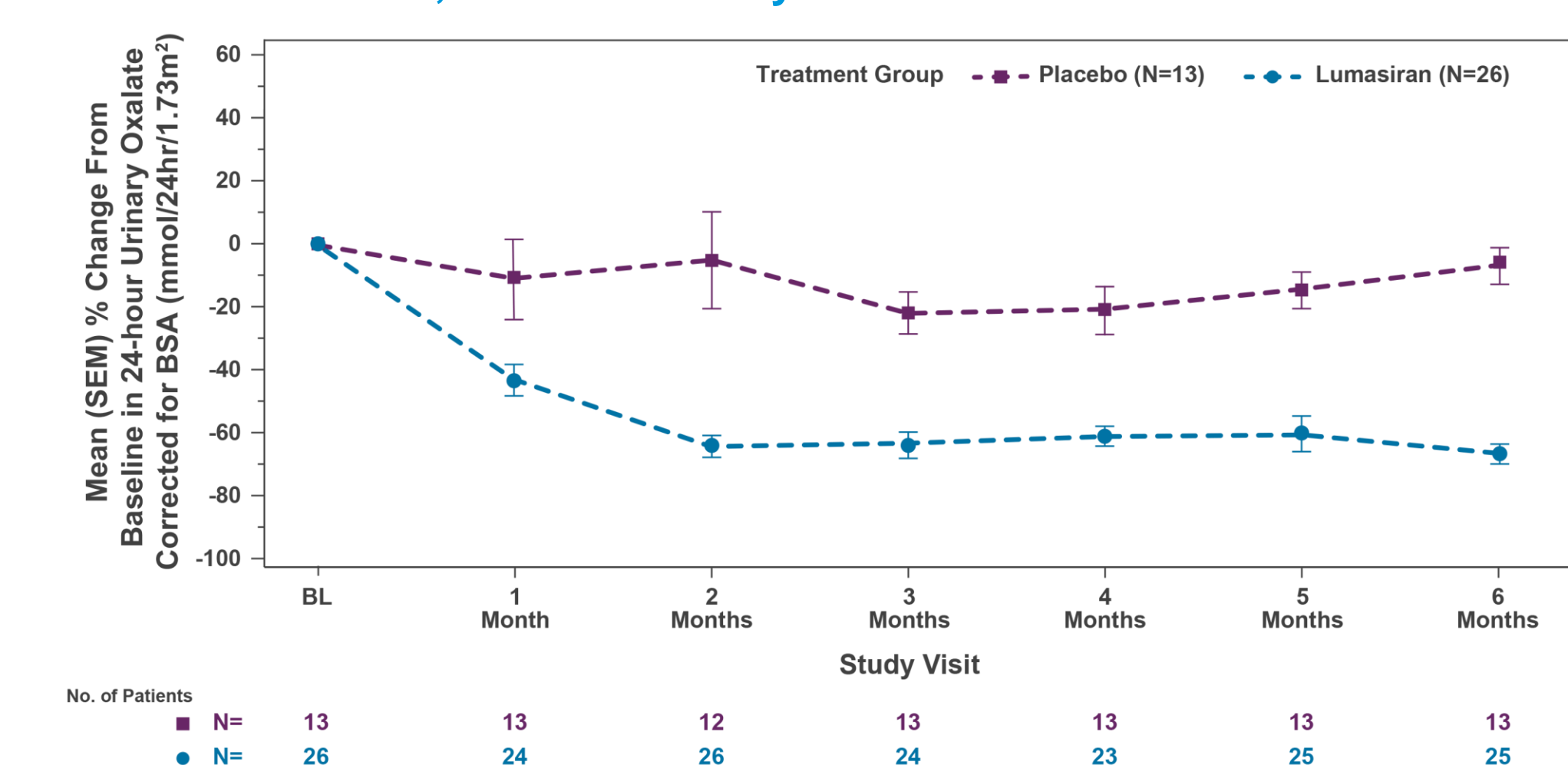
**Table 3. Mean Percent Reduction From Baseline to Month 6 in Urinary Oxalate Measured by 24-hour Urinary Oxalate and Spot Urinary Oxalate:Creatinine Ratio**

Study and Treatment	N	24-hour Urinary Oxalate BSA-corrected	Spot Urinary Oxalate:Creatinine Ratio
<b>Mean (SEM) Percent Reduction From Baseline to Month 6</b>			
Phase 2 OLE Lumasiran	20	-70.7% (3.8) <sup>a</sup>	-74.5% (4.1) <sup>b</sup>
ILLUMINATE-B Lumasiran	18	-68.4% (5.6) <sup>c</sup>	-71.7% (3.4)
<b>Least-squares Mean (95% CI) Percent Reduction From Baseline to Month 6 (Average of Month 3 Through 6)</b>			
ILLUMINATE-A Placebo	13	-11.8% (-19.5, -4.1)	-4.5% (-15.9, 6.8)
ILLUMINATE-A Lumasiran	26	-65.4% (-71.3, -59.5)	-63.6% (-72.2, -55.0)
ILLUMINATE-B Lumasiran	18	Not calculated	-72.0% (-77.5, -66.4)

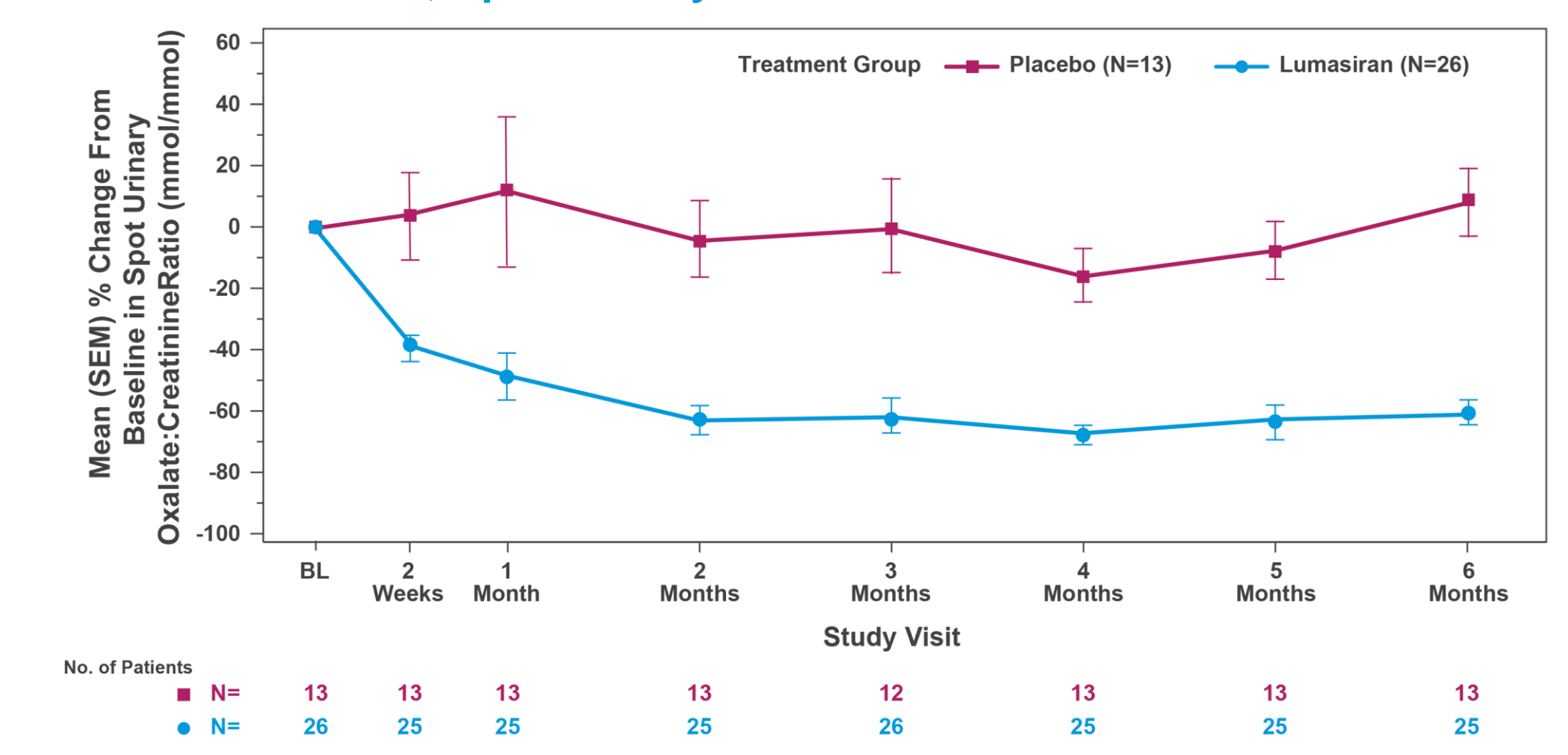
<sup>a</sup>N=14; <sup>b</sup>N=19; <sup>c</sup>N=2.

**Figure 4. Response to Lumasiran and Placebo**

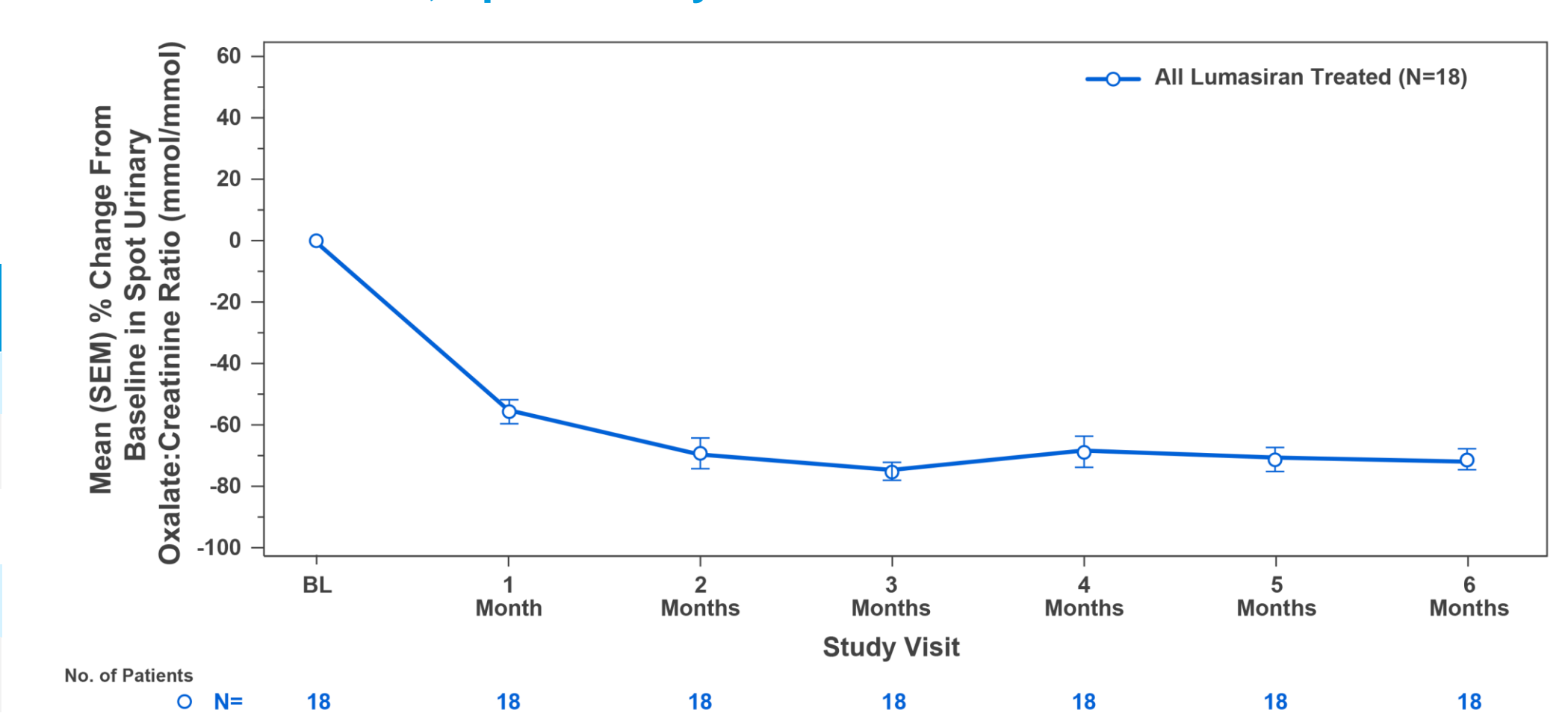
### A. ILLUMINATE-A, 24-hour Urinary Oxalate



### B. ILLUMINATE-A, Spot Urinary Oxalate:Creatinine Ratio



### C. ILLUMINATE-B, Spot Urinary Oxalate:Creatinine Ratio



### D. ILLUMINATE-A and ILLUMINATE-B, 24-hour Urinary Oxalate and Spot Urinary Oxalate:Creatinine Ratio

