
Clinical Trial Conference Series
A Joint Venture Between GlomCon & NephCure
Emerging Therapies for IgA Nephropathy
Atrasentan and BION-1301 – An Interim Analyses from ERA 2022
Speaker
Dr. Dana Rizk
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University of Alabama at Birmingham
Panelists
Dr. Sreedhar Mandayam
Professor of Medicine
University of Texas
MD Anderson Cancer Center
Dr. Andrew King
Chief Scientific Officer
Chinook Therapeutics
Moderator
Dia Waguespack, MD
Associate Professor of Medicine
McGovern Medical School, UTHealth
Program Director Nephrology Fellowship
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12, 2022
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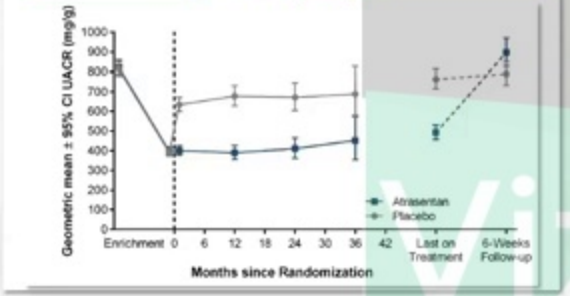
Atrasentan Reduces Proteinuria and Slows Kidney Disease Progression in Diabetic Kidney Disease (DKD) – SONAR Trial[1]

3,668 high-risk DKD patients randomized. Median follow-up of 2.2 years*

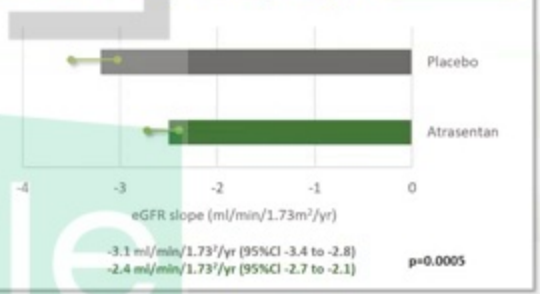
35% decreased risk of ESKD or doubling of S.Cr in responders* (28% in all randomized)

Safety profile consistent with known effects of ET-1 antagonists; clinically manageable fluid retention

Proteinuria (UACR)*



Kidney Function (eGFR Slope)*



*In Responders (patients who achieved >30% reduction in proteinuria)

1: Heerspink et al., SONAR Trial, Lancet 2019. eGFR: estimated glomerular filtration rate; ESKD: end stage kidney disease; ET-1: endothelin; SCr: serum creatinine; UACR: urine albumin to creatinine ratio

Patient Disposition, Interim Safety and PK/PD

Demographics (n=10)		
Age, years	*Median (min, max)*	39 (27, 59)
Sex, male	*n (%)*	9 (90)
Race, white	*n (%)*	10 (100)
Ethnicity, Hispanic	*n (%)*	2 (20)
Country, US	*n (%)*	10 (100)

Baseline Characteristics	*Median (min, max)*
Time from biopsy, years	2.0 (0.2, 3.4)
Blood pressure (mmHg) – Systolic	127 (113, 133)
– Diastolic	83 (69, 88)
eGFR (mL/min/1.73 m^2)*	69 (30, 122)
24-hour urine protein excretion (g/day)†	1.22 (0.74, 6.47)
24-hour UPCR (g/g)†	0.52 (0.41, 4.55)
Renin-angiotensin system inhibitor use	100 %

Safety

- BION-1301 well tolerated in IgAN patients to date*, with no serious AEs and no treatment discontinuations due to AEs
- 3 patients experienced mild (grade 1) treatment-related AEs, including 1 injection site reaction
- 4 patients experienced mild infections (grade 1), considered not related to treatment
- IgG level below the study defined threshold occurred in one patient, necessitating protocol-mandated withholding of study drug. There have been no infections reported in this patient.

PK/PD

- Rapid reductions in free APRIL confirm durable target neutralization sustained through 1 year
- No anti-drug antibodies observed in patients with IgAN to date
- All patients have transitioned to SC administration for a mean SC treatment duration of 22 weeks (range 5 to 28 weeks)

*Data cut-off May 6, 2022, with exception of biomarker data cut-off March 10, 2022. AEs, adverse events

* eGFR by CKD-EPI, Chronic Kidney Disease Epidemiology Collaboration, n=8; †n=8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