

HBV Target Site for the RNA Interference Therapeutic Imdusiran is Highly Conserved in Chronic Hepatitis B Subjects

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BACKGROUND

Imdusiran (AB-729, IDR) is an N-Acetylgalactosamine-conjugated small interfering RNA (siRNA) currently being investigated for the treatment of chronic hepatitis B (CHB) in multiple Phase 2 combination studies with pegylated interferon-alfa 2a (AB-729-201, IM-PROVE I)¹ and the immunotherapeutic VTP-300 (AB-729-202, IM-PROVE II)². In a previous study analyzing IDR sequences from subjects enrolled in AB-729-001 (Phase 1a/1b clinical study) and the HBVdb database³, we showed the following:

- Baseline sequences from subjects enrolled in AB-729-001 had 90.9% IDR sequence conservation
- Target site variants C1587T, T1590A/G, and A1593C/G were identified in 4 subjects. These variants retained sensitivity to IDR *in vitro*
- The IDR target site is highly conserved (95.1-99%) across genotype sequences in the HBVdb database

Here we expand our next generation sequencing (NGS) analysis of the IDR target site to subjects enrolled in IM-PROVE I and IM-PROVE II, providing comprehensive data from over 100 subjects at baseline.

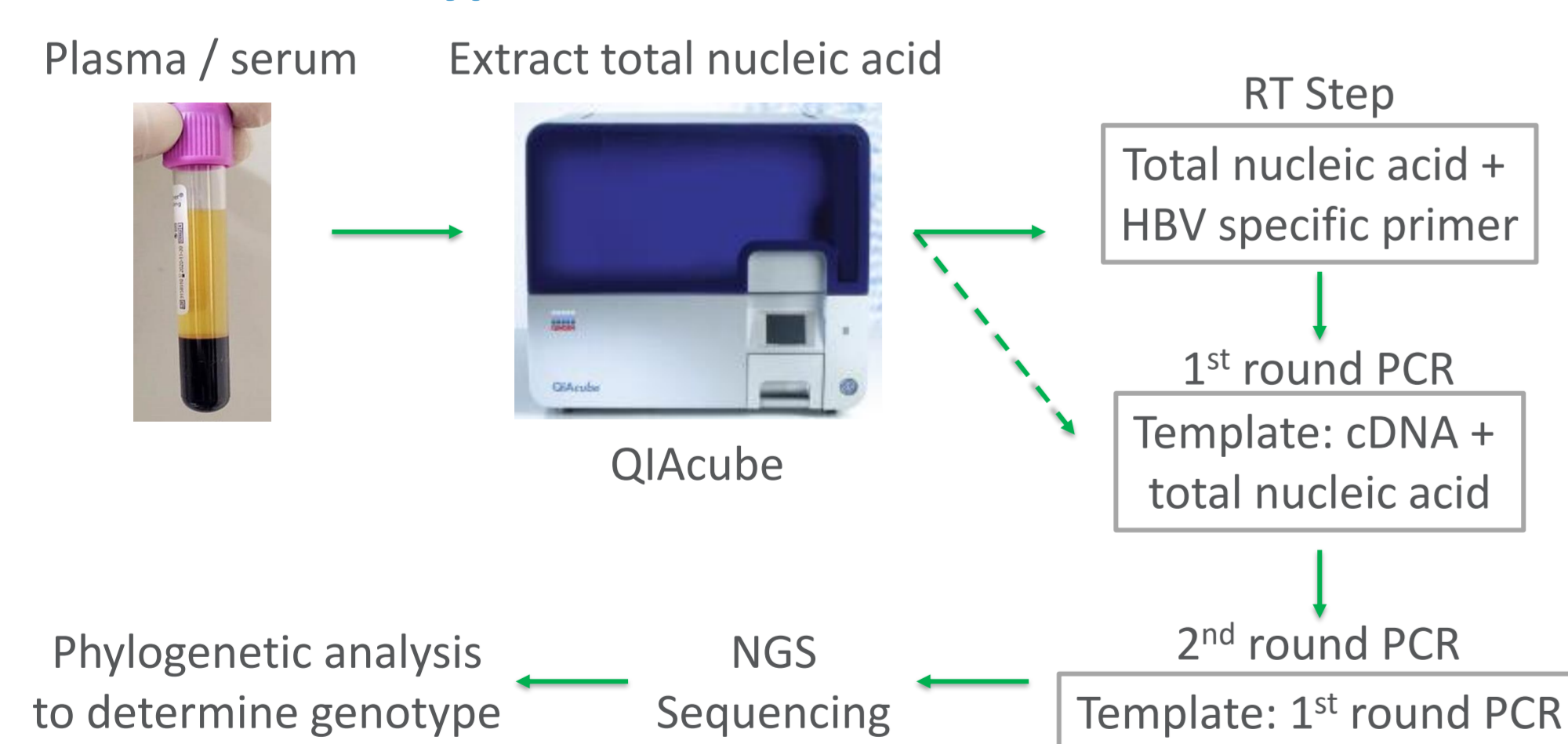
OBJECTIVES

- Characterize and report target site variants at baseline in subjects enrolled in IM-PROVE I and IM-PROVE II
- Test IDR and nucleos(t)ide analog (NA) activity against target site variants and evaluate viral fitness using an *in vitro* cell model
- Evaluate pan-genotypic activity of IDR in subjects enrolled in clinical studies

MATERIALS AND METHODS

- HBV RNA or total nucleic acid extracted from plasma of CHB subjects enrolled in clinical studies AB-729-001 (Parts 2 and 3), IM-PROVE I, and IM-PROVE II was subjected to HBV-specific PCR amplification followed by Illumina MiSeq next generation sequencing (NGS)
- Prevalence and frequency of Single Nucleotide Polymorphisms (SNPs) within the HBV sequence targeted by IDR were determined from baseline sequences
- For genotype and variant identification, NGS data were compared against genotype-specific references. Genbank accession numbers: X02763 (GtA), AB219428 (GtB), GQ924620 (GtC), AF121240 (GtD), AB106564 (GtE), AY090458 (GtF), AF160501 (GtG), FJ356716 (GtH), and EU833891 (GtI)

Figure 1: HBV Genotype Workflow



- Variant fitness and sensitivity to IDR and nucleos(t)ide analogs were determined using a cell-based *in vitro* assay. Single nucleotide changes were introduced by site-directed-mutagenesis into a genotype D HBV replicating plasmid and transfected into HepG2 cells. Extracellular HBsAg was measured by chemiluminescence immunoassay (CLIA) and intracellular rcDNA by branched DNA (bDNA) assay
- An update on the IM-PROVE I clinical study will be presented in Late Breaker Poster 5036⁴
- An update on the IM-PROVE II clinical study will be presented in Late Breaker Poster 5025⁵

RESULTS

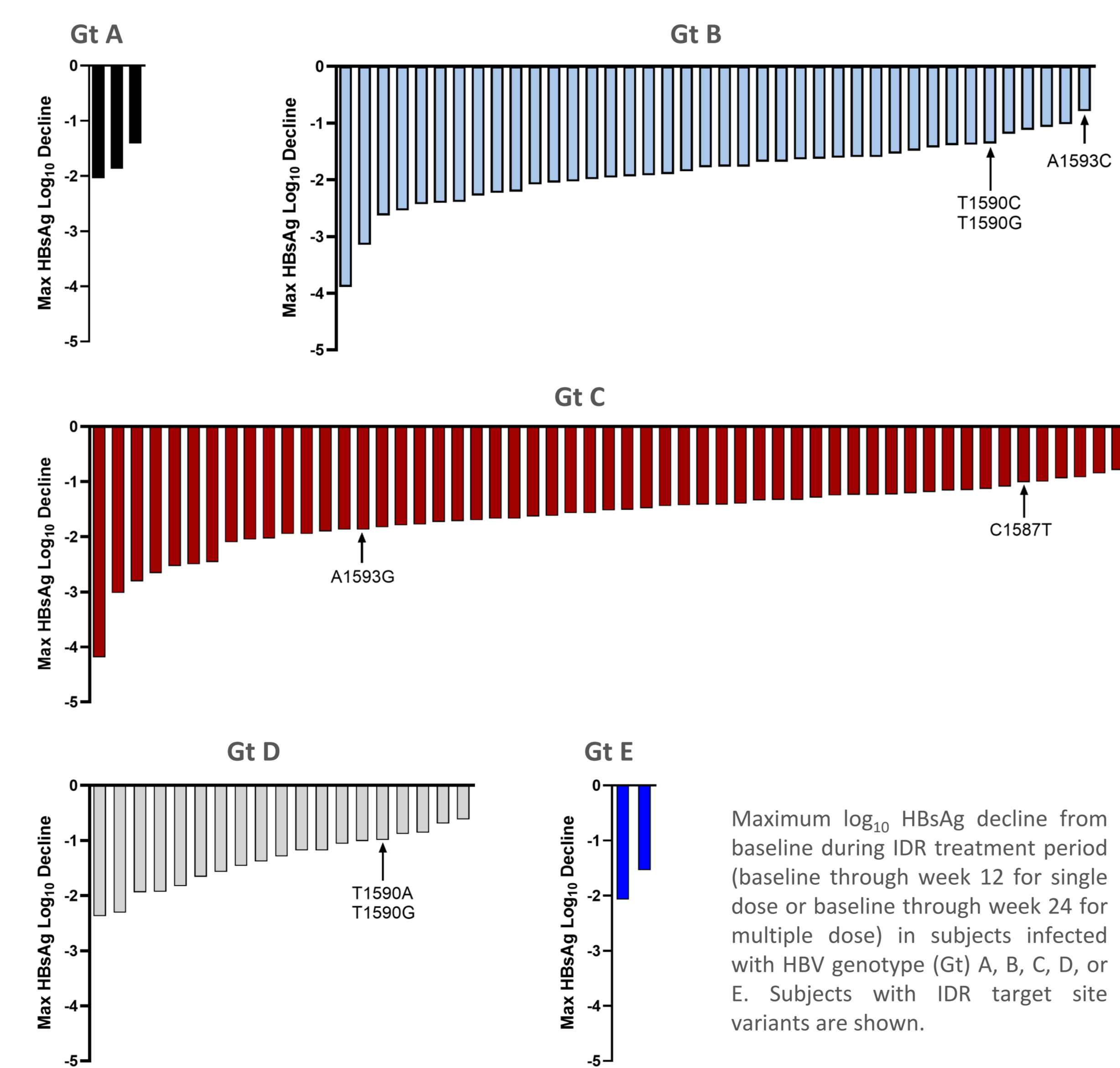
Table 1: Frequency of Baseline SNPs within the IDR Target Sequence

Study	# Sequences Submitted	# Sequences with NGS data	# Conserved Sequences (% Conserved)	Subject ID	Genotype	Variant (% Frequency)
AB-729-001 ^a	63	44	40 (90.9)	29	C	C1587T (15)
				33	B	A1593C (36)
				44	D	T1590A (31) T1590G (66)
				57	C	A1593G (37)
IM-PROVE I	43	20	20 (100)	All Subjects conserved		
IM-PROVE II	62	40	39 (97.5)	12	B	T1590C (23) T1590G (24)
Total Subjects with Conserved IDR Sequence			99 / 104 (95.2)			

168 baseline samples were submitted for NGS analysis of the IDR target site; 62% of these samples were successfully sequenced. Target site variants with total read frequencies $\geq 15\%$ were identified.
^aData previously reported³

- 95.2% of enrolled subjects had conserved IDR target site sequence
- IDR target site variants C1587T, A1593C/G, and T1590A/C/G were observed across 5 subjects infected with HBV genotype B, C, or D
- Variant T1590C was observed together with T1590G in 1 subject enrolled in IM-PROVE II at frequencies of 23 and 24%, respectively
- Prevalence of C1587T, A1593C/G, and T1590A/C variants were each observed to be 0.96%, whereas prevalence of T1590G was 1.9%

Figure 2: Individual On-Treatment HBsAg Decline in Subjects Across Genotypes A-E



- IDR has similar activity across genotypes A-E with mean HBsAg log₁₀ change from baseline of -1.75 (GtA), -1.78 (GtB), -1.55 (GtC), -1.29 (GtD), and -1.78 (GtE)
- IDR treatment is active against target site variants; HBsAg log₁₀ decline ranged from -0.79 to -1.87

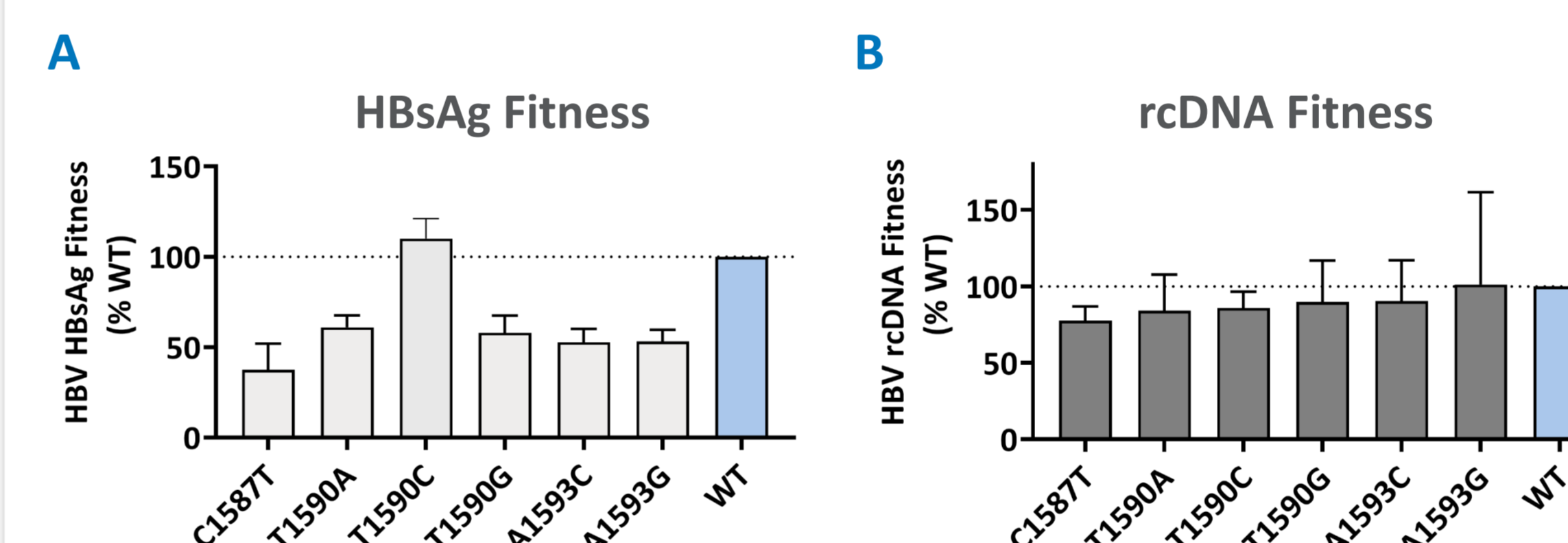
Table 2: IDR and NA Activity Against Target Site Variants

Nucleotide Position	Target Site Variant	IDR HBsAg EC ₅₀ Fold Change over WT	ETV rcDNA EC ₅₀ Fold Change over WT	TAF rcDNA EC ₅₀ Fold Change over WT
	WT	1.00	1.00	1.00
1587	C1587T	0.69 ± 0.08	1.84 ± 0.01	1.22 ± 0.01
	T1590A	1.37 ± 0.31	1.71 ± 0.02	1.55 ± 0.01
1590	T1590C	1.27 ± 0.29	0.95 ± 0.00	0.94 ± 0.00
	T1590G	1.37 ± 1.16	1.49 ± 0.03	1.56 ± 0.01
1593	A1593C	2.05 ± 1.38	0.39 ± 0.01	0.79 ± 0.01
	A1593G	1.43 ± 0.94	0.86 ± 0.01	0.79 ± 0.01

IDR HBsAg EC₅₀ activity was determined and fold change of variant over wildtype was calculated. Variant fold change of rcDNA EC₅₀ was similarly determined for entecavir (ETV) and tenofovir alafenamide (TAF). EC₅₀ activity was calculated for each experiment and mean data and standard deviation from N=3 independent experiments is shown.

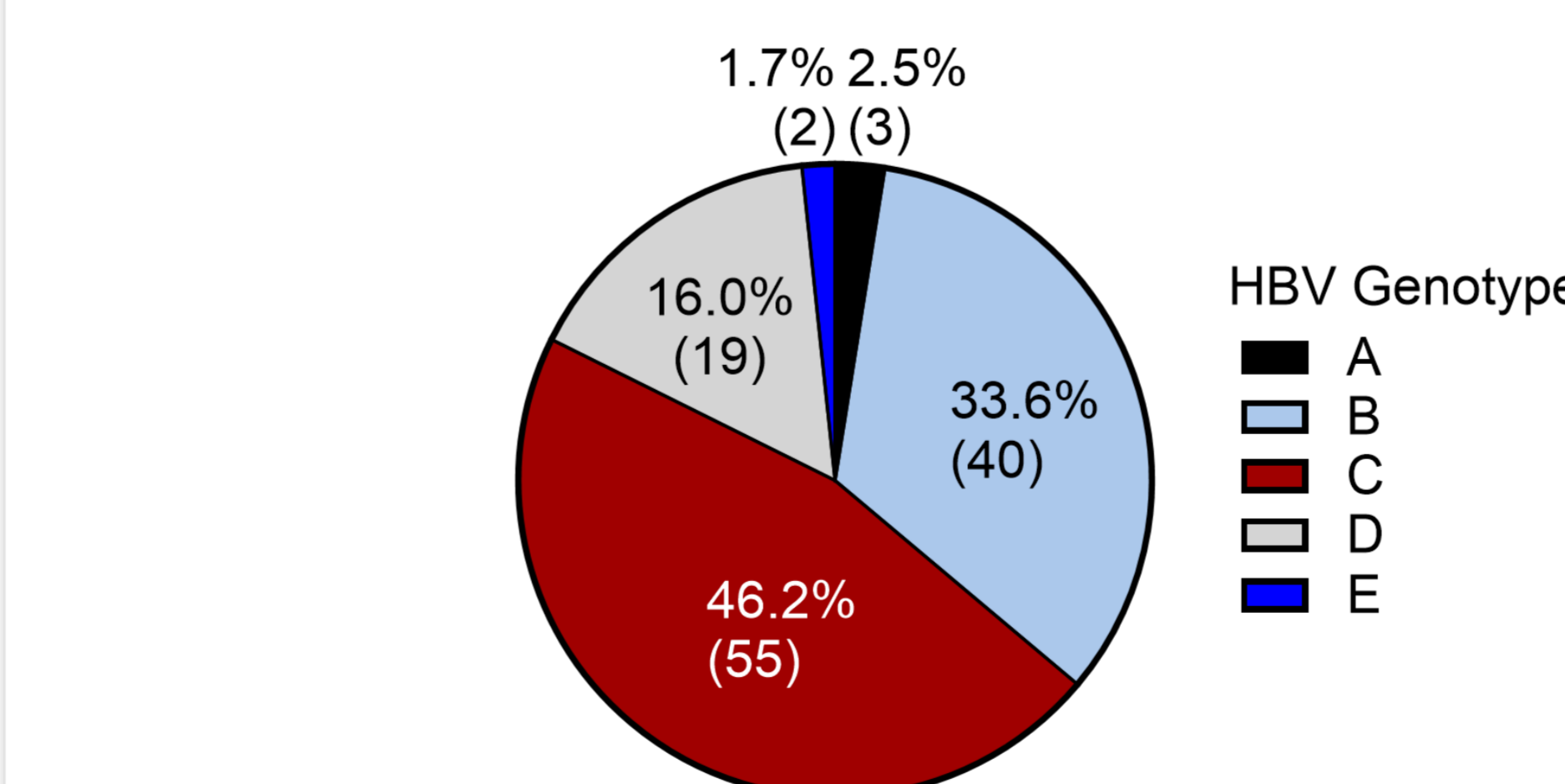
- IDR activity is similar against wild type and target site variants with variant HBsAg EC₅₀ fold change over wildtype <3-fold (range 0.69 to 2.05-fold)
- IDR target site variants remain sensitive to NAs with rcDNA EC₅₀ fold change over wild type <3-fold against ETV and TAF

Figure 3: Fitness of Target Site Variants



- Variant fitness was calculated as a percentage of wildtype extracellular HBsAg (A) or intracellular rcDNA (B). Mean and standard deviation from N=3 independent experiments is shown.
- IDR target site variants C1587T, T1590A/G, and A1593C/G have reduced fitness relative to wildtype, whereas T1590C is similarly fit as determined by HBsAg expression
- Viral replication of rcDNA in target site variants range from 77.6% to 101% of wildtype

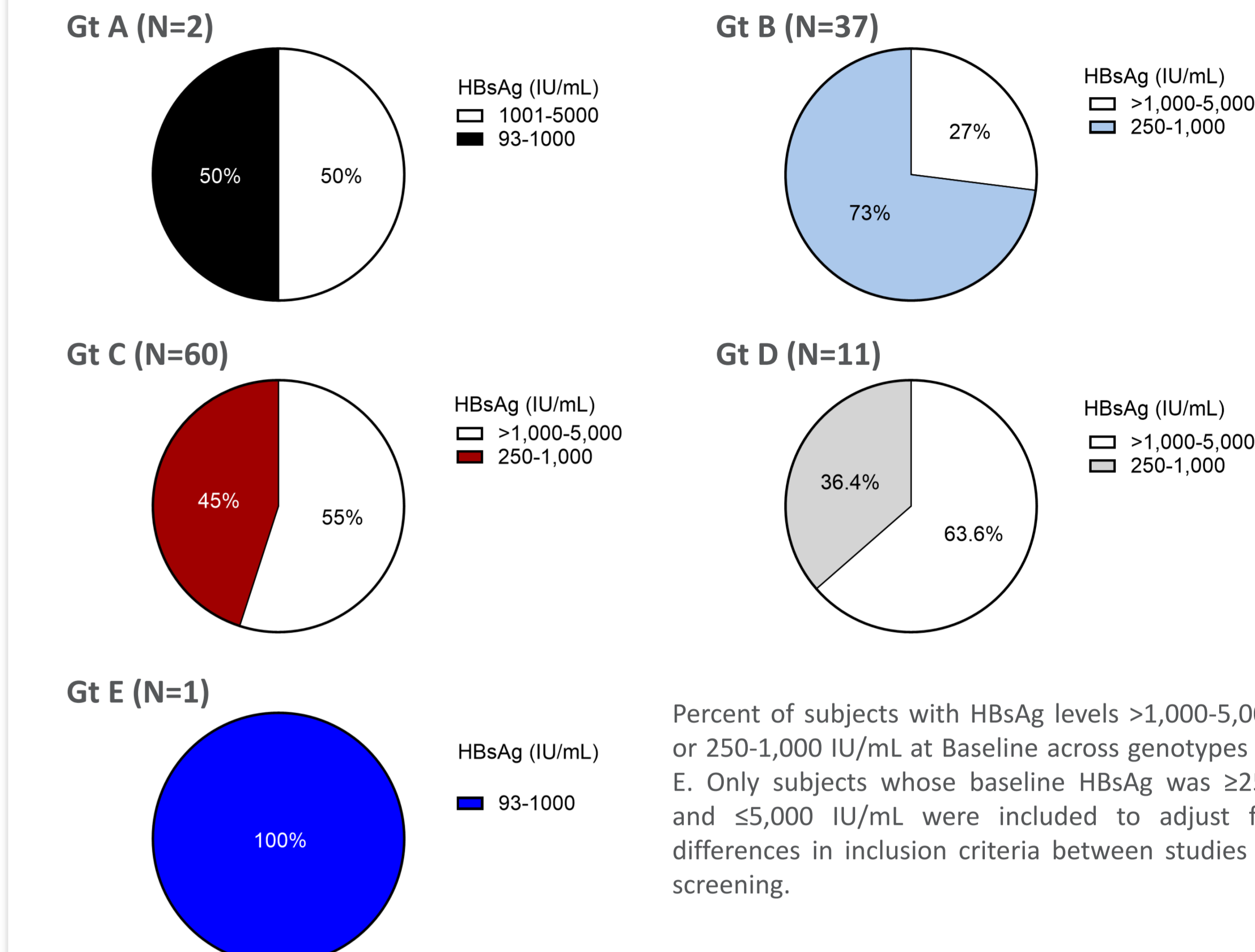
Figure 4: HBV Genotype Distribution Across Subjects Enrolled in AB-729-001, IM-PROVE I, and IM-PROVE II



Percent of subjects infected with HBV Genotype A-E. Number of subjects per genotype are indicated in parentheses. 166 baseline samples were submitted for genotype analysis by NGS: AB-729-001 (N=61, data pending for 2 subjects), IM-PROVE I (N=43), IM-PROVE II (N=62). PCR amplification failed for 47 subjects; genotype will be assessed by IMMUNIS HBV Genotype EIA

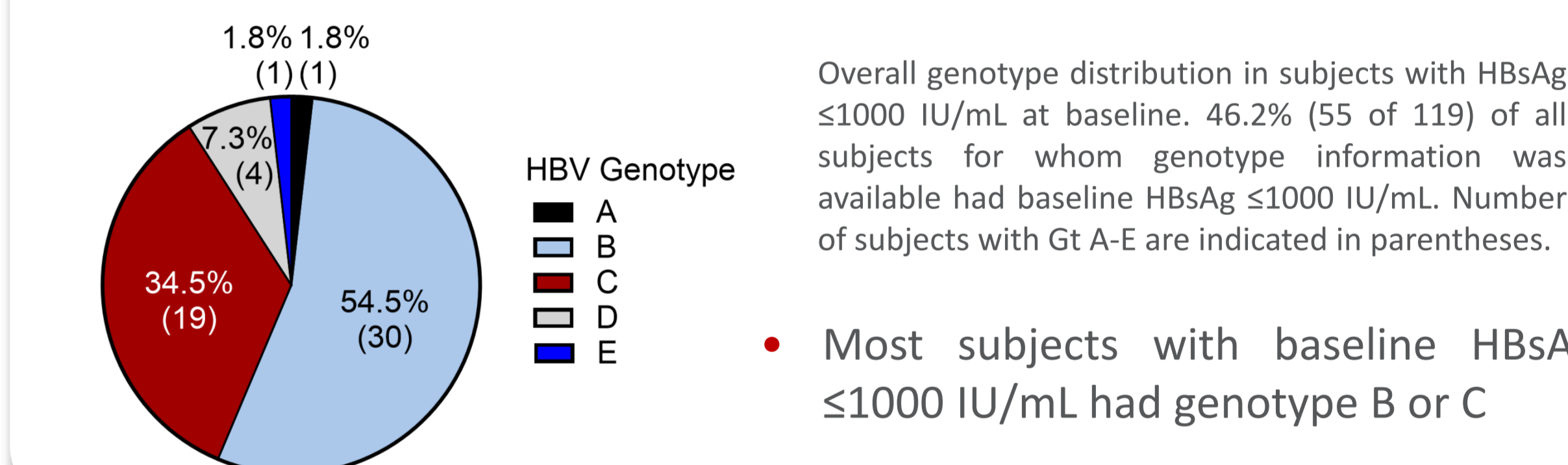
- Majority of subjects enrolled across studies were infected with HBV genotypes B, C, or D

Figure 5: Baseline HBsAg Levels Across Genotypes



- 73% of genotype B subjects had baseline HBsAg between 250-1,000 IU/mL, whereas only 36.4% of genotype D subjects had HBsAg levels in this range
- Distribution of HBsAg baseline levels across genotype C subjects was similar

Figure 6: Subjects with HBsAg ≤ 1000 IU/mL at Baseline



Overall genotype distribution in subjects with HBsAg ≤ 1000 IU/mL at baseline. 46.2% (55 of 119) of all subjects for whom genotype information was available had baseline HBsAg ≤ 1000 IU/mL. Number of subjects with Gt A-E are indicated in parentheses.

- Most subjects with baseline HBsAg ≤ 1000 IU/mL had genotype B or C

CONCLUSIONS

- The IDR target site sequence is highly conserved (95.2%) across subjects enrolled in AB-729-001, IM-PROVE I, and IM-PROVE II
- Target site variants C1587T, T1590A/C/G, and A1593C/G were identified in baseline sequences and remain sensitive to IDR treatment
- Nucleos(t)ide analogs maintain activity against IDR target site variants
- IDR variants are similarly or less fit compared to wild type HBV *in vitro*
- Most subjects with baseline HBsAg ≤ 1000 IU/mL had genotype B or C

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