Zilucoplan in pediatric patients with acetylcholine receptor autoantibodypositive generalized myasthenia gravis: ziMyG (MG0014) and ziMyG+ (MG0015) clinical study designs

Presented by Sigrid Nilius on behalf of:

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Conflicts of interest

Anna Kostera-Pruszczyk has received honoraria for advisory boards and speaking at educational events for CSL Behring, Kedrion, Baxter/Shire/Takeda, argenx, Medison Pharma, UCB Pharma and AstraZeneca.

Ibironke Addy, Ann Cleverly, Caroline Legendre, Elke Muehlegger-Leers, Sigrid Nilius and **Frank Tennigkeit** are employees and shareholders of UCB Pharma.

Anna Nordmark is a contractor for UCB Pharma.

John Brandsema is a consultant for Alexion, Audentes, AveXis/Novartis, Biogen, Cytokinetics, Dyne, Edgewise, Fibrogen, Genentech/Roche, Janssen Pharmaceuticals, Marathon, Momenta (now Johnson and Johnson), NS Pharma, PTC Therapeutics, Sarepta, Scholar Rock, Takeda, UCB Pharma and WaVe, a Speaker for AveXis and Biogen, a Medical Advisory Council member for Cure SMA, and a Site Investigator for clinical trials with Alexion, Astellas, AveXis/Novartis, Biogen, Catabasis, CSL Behring, Cytokinetics, Fibrogen, Genentech/Roche, Ionis, Pfizer, PTC Therapeutics, Sarepta, Scholar Rock, Summit, UCB Pharma and WaVe.

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Zilucoplan: Pediatric-centric drug development to address pediatric therapeutic needs

High and specific therapeutic needs in pediatric MG:

Approved drugs with appropriate dosing and safety information needed **as fast as possible**

How are we addressing these needs?

Pediatric-centric drug development, including customized, integrated and innovative study designs

Zilucoplan in adults with AChR Ab+ gMG: Phase 3, double-blind, placebo-controlled trial (RAISE)*1

Zilucoplan showed rapid, statistically significant and clinically meaningful improvements in MG-specific efficacy outcomes, had a favorable safety profile, and was well tolerated, with no major safety findings¹

MG-ADL score (primary endpoint)



Adapted from Howard JF Jr., et al. Lancet Neurol. 2023;22:395-406.

*NCT04115293; [†]p<0.01 vs placebo (*post-hoc*, not multiplicity-controlled); [†]p<0.001 vs placebo (*post-hoc*, not multiplicity-controlled).

AChR Ab+, positive for autoantibodies against the acetylcholine receptor; CFB, change from baseline; CI, confidence interval; (g)MG, (generalized) myasthenia gravis; IVIg, intravenous immunoglobulin; LS, least squares; MG-ADL, Myasthenia Gravis Activities of Daily Living; PLEX, plasma exchange; SC, subcutaneous.

1. Howard JF Jr., et al. Lancet Neurol. 2023;22:395-406.

Self-administration by

daily SC injection

zimg * and zimg + studies



BL, baseline; E1, extension study day 1; EOT, end of treatment; IMP, investigational medicinal product; OLE, open-label extension; PD, pharmacodynamics; PK, pharmacokinetics; SC, subcutaneous.

Study design: Endpoints and dose confirmation

Primary endpoints

- PK: Week 4 zilucoplan plasma concentrations
- PD: CFB in sRBC lysis and C5 levels at Week 4
- TEAEs*
- Treatment-emergent SAEs*
- TEAEs leading to permanent withdrawal of IMP*
- Treatment-emergent infections*

Key clinical outcome measures

- MG-ADL
- QMG
- MGFA-PIS
- PedsQL[™]
- NeuroQoL[™]
- CGI-S

zimyG+

ZlMyG

ZIMuG

ZlmuG+

Dose confirmation

- PK/PD datasets from the first two adolescent participants will be analyzed before:
 - **Continuing** Cohort A recruitment
 - **Starting** Cohort B recruitment



*Collected during the course of the study.

C5, component 5; CFB, change from baseline; CGI-S, Clinical Global Impression-Severity; IMP, investigational medicinal product; MG-ADL, Myasthenia Gravis Activities of Daily Living; MGFA-PIS, Myasthenia Gravis Foundation of America Post-intervention Status; NeuroQoL[™], Quality of Life in Neurological Disorders; PD, pharmacodynamics; PedsQL[™], Pediatric Quality of Life Inventory; PK, pharmacokinetics; QMG, Quantitative Myasthenia Gravis; SAE, serious adverse event; sRBC, sheep red blood cell; TEAE, treatment-emergent adverse event.

Study design: Eligibility criteria

Key inclusion criteria

- Aged ≥ 2 to <18 years
- AChR Ab+ gMG
- MGFA Disease Class II to IV
- At time of screening:
 - >12 years: MG-ADL total score of ≥6
 - <12 years: weakness in ≥1 limb, neck or bulbar muscle
- Received existing conventional treatment for gMG prior to screening
- Received meningococcal vaccine prior to first dose of zilucoplan

Key exclusion criteria

- MuSK Ab+ gMG
- Prior history of meningococcal disease
- Systemic infection or infection requiring IV antibiotics prior to baseline
- Thymectomy or rituximab therapy received in the last 6 months

AChR Ab+, positive for autoantibodies against the acetylcholine receptor; gMG, generalized myasthenia gravis; IV, intravenous; MG-ADL, Myasthenia Gravis Activities of Daily Living; MGFA, Myasthenia Gravis Foundation of America; MuSK Ab+, positive for autoantibodies against muscle-specific tyrosine kinase.

Summary: Zilucoplan zime and zime+pediatric-centric studies to address pediatric needs

Adolescent patient council:

- Patient journey
- PRO selection
- Study design
- Drug administration

Input from pediatric MG experts

Pediatric MG RWE data to gain insights into:

- Epidemiology
- Population characteristics
- Treatment pathways



Optimized/reduced assessments and blood sampling

Family-friendly assistance with:

- Option for overnight stays
- Transportation
- Digital engagement app

Extrapolation of efficacy from adult studies \rightarrow

 Small PK/PD and safety study supported by modeling and simulation for dose confirmation

Rozanolixizumab **Myg Myg** + studies: AANEM Poster 204

