

BIO89-100 Demonstrated Robust Reductions in Liver Fat, Improved Metabolic Parameters, Favorable Tolerability and Potential for Weekly (QW) or Every 2 Weeks (Q2W) Dosing in a Phase 1b/2a Placebo-Controlled, Double-Blind, Multiple Ascending Dose Study in NASH.

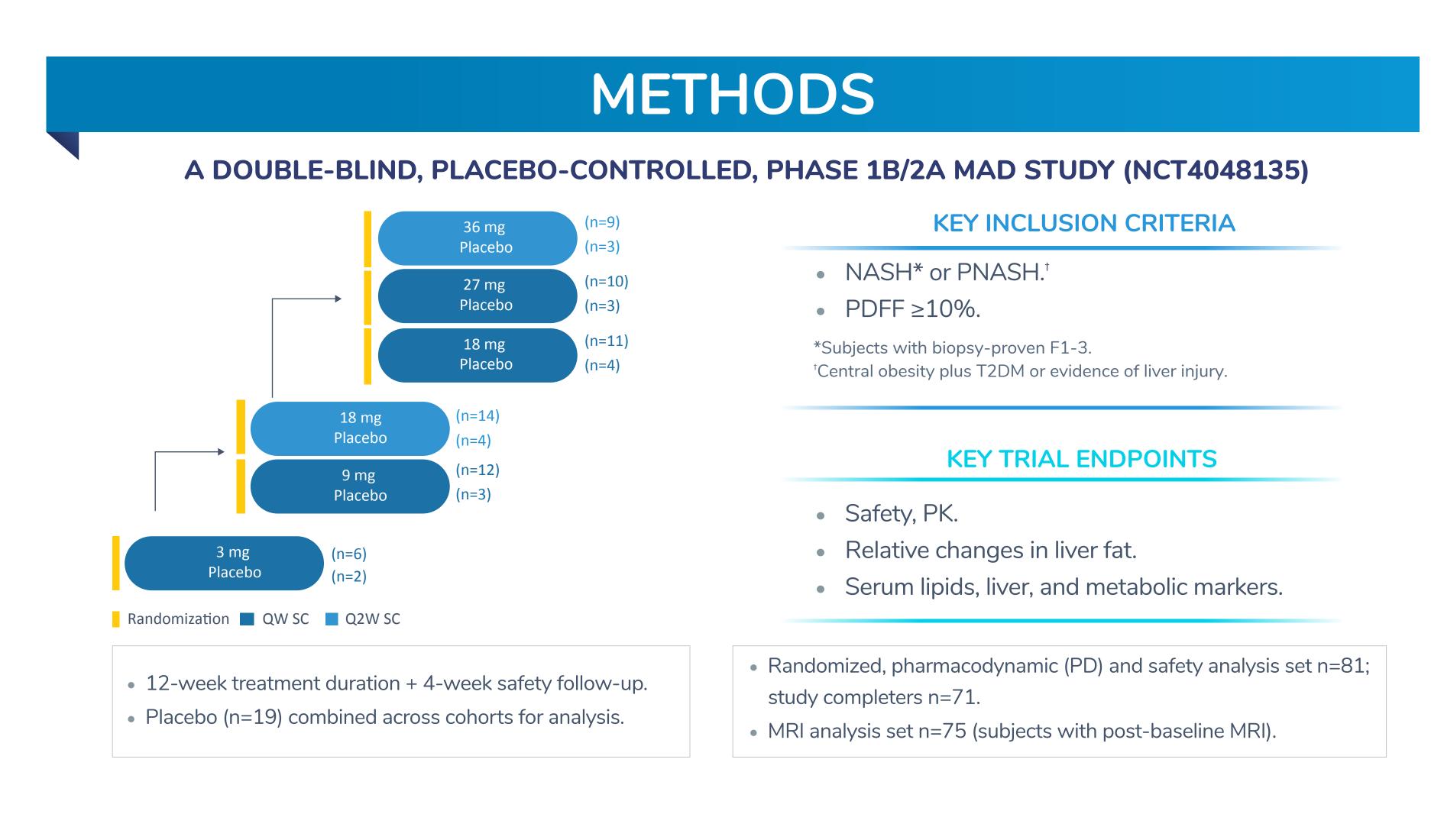
JUAN PABLO FRIAS, MD¹, GRISELL ORTIZ-LASANTA, MD², CYNTHIA L HARTSFIELD, PHD³, R WILLIAM CHARLTON, MD³, HANK MANSBACH, MD3, MAYA MARGALIT, MD⁴, ROHIT LOOMBA, MD⁵. ¹National Research Institute, Los Angeles, CA, USA; ²FDI Clinical Research, San Juan, PR, USA; ³89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California at San Diego, La Jolla, CA, USA; ⁴89bio, Herzliya, Israel; ⁵NAFLD Research Center, University of California, ¹NAFLD, ¹NAFL

INTRODUCTION

- FGF21 is an endogenous hormone that regulates carbohydrate, lipid, and energy metabolism. FGF21 analogs improve liver and metabolic abnormalities in non-alcoholic steatohepatitis (NASH), and show reductions in triglycerides (TG) that offer promise for treatment of patients with TG \geq 500 mg/dL.
- BIO89-100 is a long-acting glycoPEGylated FGF21 analog, with promising tolerability and pharmacodynamic effects, and potential for weekly (QW) or every 2 week (Q2W) dosing.¹ ¹Loomba et al., Abstract #2138, AASLD 2019.

OBJECTIVE

To evaluate the effect of administration of multiple, ascending doses (MAD) of BIO89-100 on safety, tolerability, pharmacokinetics, liver fat as measured by MRI-PDFF, and other liver-related and metabolic parameters in subjects with NASH or with non-alcoholic fatty liver disease (NAFLD) and at high risk of NASH (phenotypic NASH [PNASH]).



RESULTS

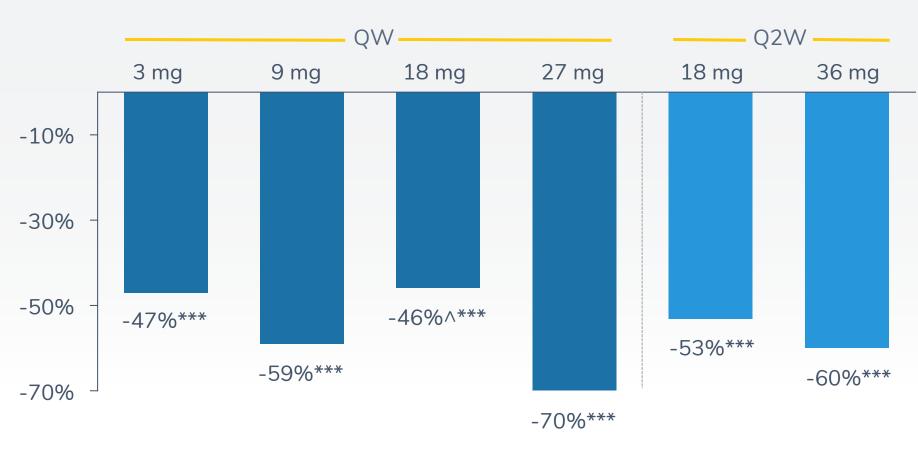
Baseline Characteristics

PARAMETER MEAN OR %	PLACEBO (n=19)	POOLED BIO89-100 (n=62)	3 mg QW (n=6)	9 mg QW (n=12)	18 mg QW (n=11)	27 mg QW (n=10)	18 mg Q2W (n=14)	36 mg Q2W (n=9)
Age (years)	52.6	51.7	56.1	49.5	51.5	52.0	51.2	52.5
Male	36.8%	38.7%	16.7%	50%	27.3%	20%	28.6%	88.9%
Weight (kg)	93.6	93.6	87.9	87.2	87.1	94.0	101.5	101.1
BMI (kg/m²)	33.8	34.8	34.3	32.7	32.8	36.8	37.0	34.8
Type 2 Diabetes	63.2%	40.3%	83.3%	33.3%	63.6%	40.0%	21.4%	22.2%
ALT (U/L)	38.8	42.3	45.0	32.8	38.4	53.3	39.1	50.4
AST (U/L)	29.0	31.5	34.5	22.8	30.9	39.0	28.8	38.1
MRI-PDFF (%)	21.8	21.2	22.4	21.4	19.3	22.0	21.6	20.9

Randomized Analysis Set

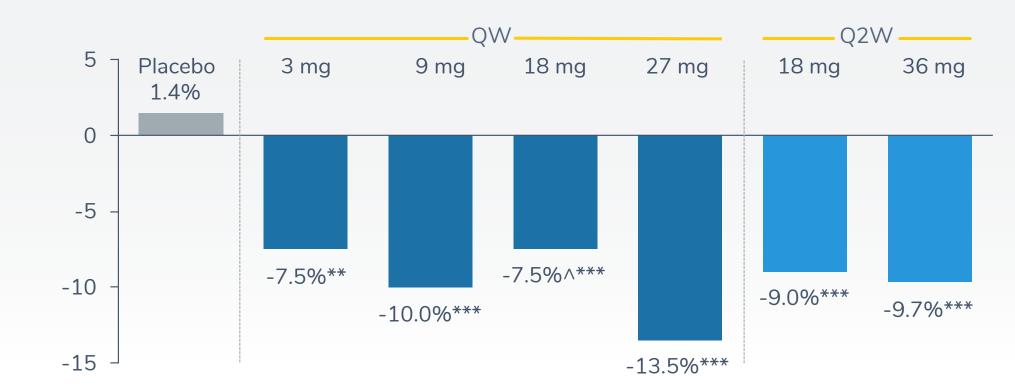
Baseline characteristics were similar between NASH (n=15) and PNASH (n=66) subjects.

ROBUST REDUCTION IN LIVER FAT IN ALL DOSE GROUPS Placebo Adjusted Relative Change in Liver Fat at Week 13



MRI Analysis Set; MMRM LS Mean; *P<0.05; **P<0.01; ***P<0.001 versus placebo; placebo relative increase of 10% from baseline. ^60% relative reduction in liver fat vs. placebo when final 2 patients from this dose group were excluded in a post hoc analysis. These 2 patients came from 2 separate newly activated sites that came online just before the study closed enrollment in the midst of the COVID pandemic.

Absolute Change in Liver Fat (%) From Baseline at Week 13

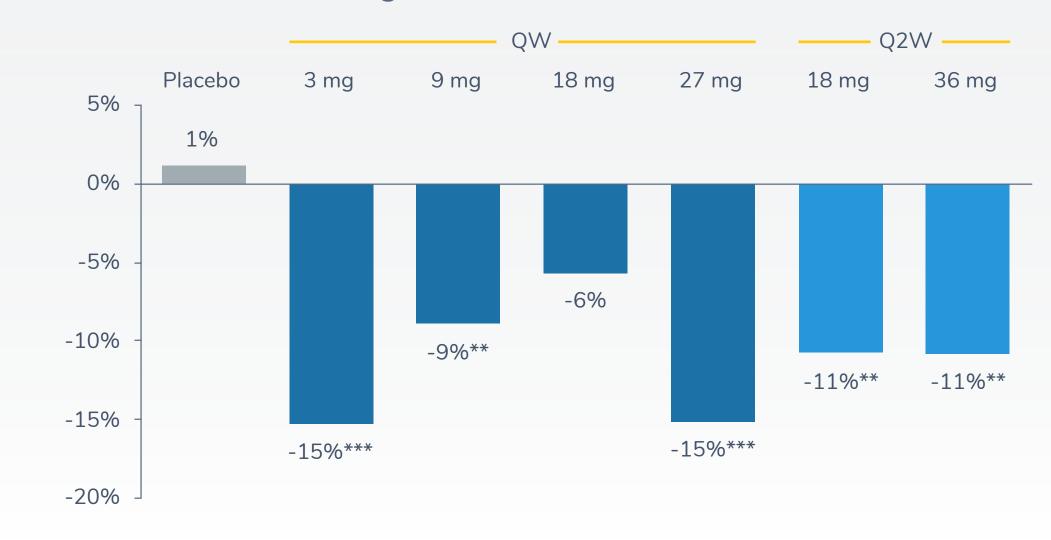


• 43% of subjects at 27mg QW normalized liver fat (<5%).

MRI Analysis Set: MMRM LS Mean: *P<0.05: **P<0.01; ***P<0.001 versus placebo ^10% absolute reduction in liver fat from baseline when final 2 patients from this dose group were excluded in a post hoc analysis. These 2 patients came from 2 separate newly activated sites that came online just before the study closed enrollment in the midst of the COVID pandemic

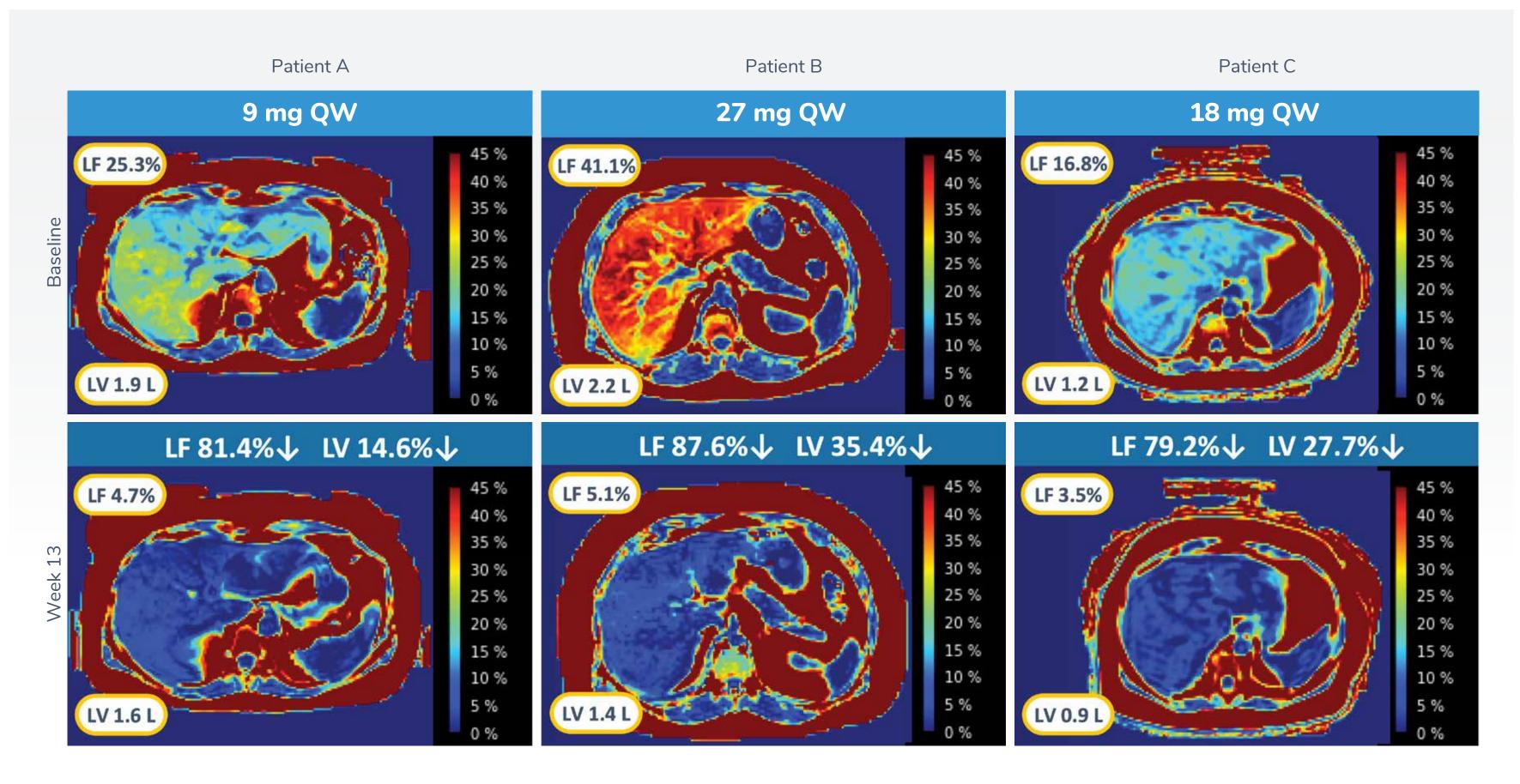
BIO89-100 Significantly Reduces Liver Volume

Percent Change in Liver Volume From Baseline at Week 13



MRI Analysis Set; MMRM LS Mean; *P<0.05; **P<0.01; ***P<0.001 versus placebo.

Examples of Substantial Reductions in Liver Fat and Liver Volume by MRI-PDFF From Individual Subjects



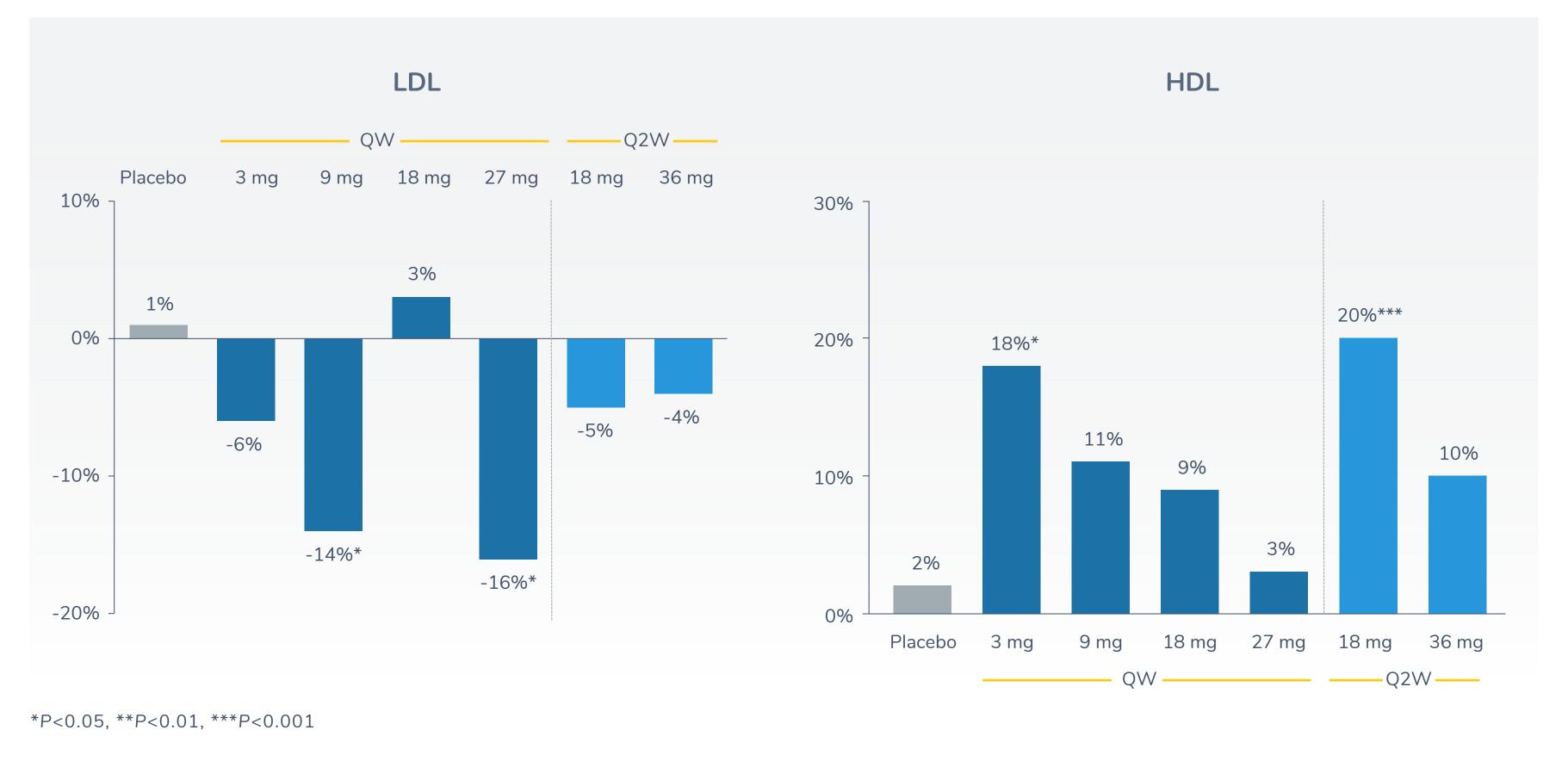
RESULTS

SIGNIFICANT REDUCTIONS IN INFLAMMATION AND FIBROSIS MARKERS **Percent Change From Baseline at Week 13**



*P<0.05, **P<0.01, ***P<0.001

Percent Change From Baseline in Blood LDL Cholesterol (LDL-c) and HDL Cholesterol (HDL-c) Across BIO89-100 Dosing Regimens at Week 13



FAVORABLE SAFETY AND TOLERABILITY

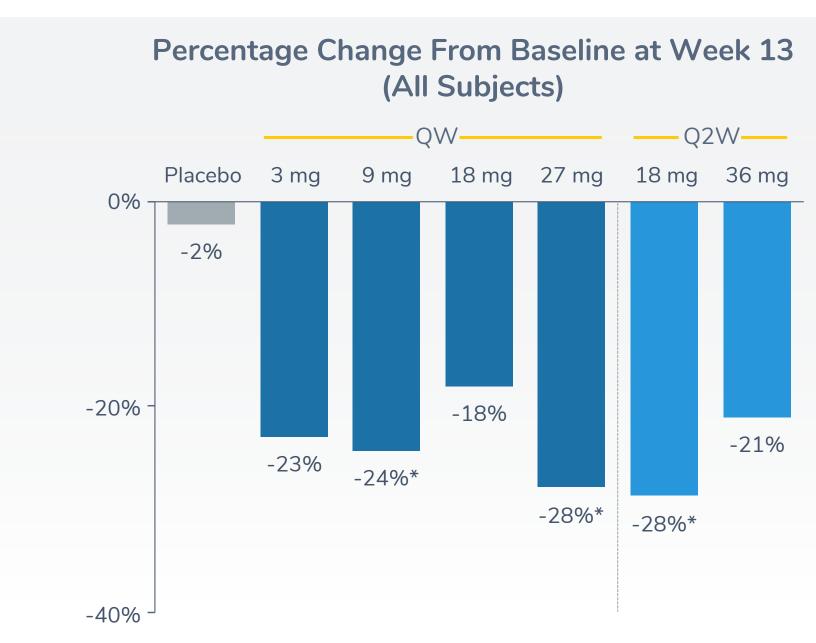
- There were 2 discontinuations due to adverse events (1 skin rash and 1 event of hyperglycemia that was not considered treatment related); and 2 serious adverse events, both were Covid-19 infections that were not considered treatment related.
- No hypersensitivity AE reported with a few mild ISR (injection site reactions) reported.
- No adverse effects on blood pressure or heart rate.

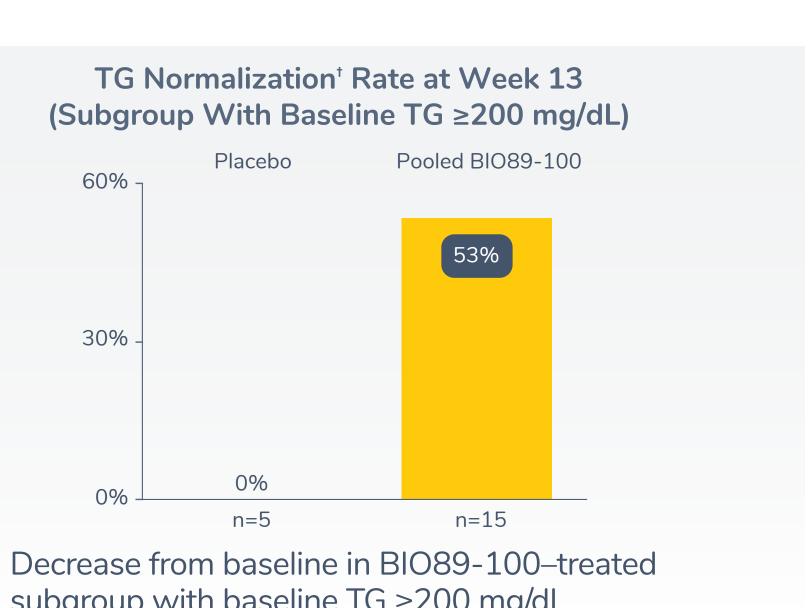
CONCLUSIONS

- In subjects with NASH, BIO89-100 led to robust, significant, and clinically meaningful reductions in liver fat and liver volume in conjunction with reductions in markers of inflammation and fibrosis. Concurrent beneficial effects on lipids (significant decreases in TGs and LDL, increase in HDL) and other metabolic parameters were observed.
- These effects were observed in both QW and Q2W dosing.
- A favorable safety and tolerability profile.
- The promising clinical profile of BIO89-100 supports further development in NASH and severe hypertriglyceridemia.

LIPID EFFECTS

BIO89-100 Significantly Reduces Triglycerides, With Greater Benefit Observed in Subjects With High Triglycerides

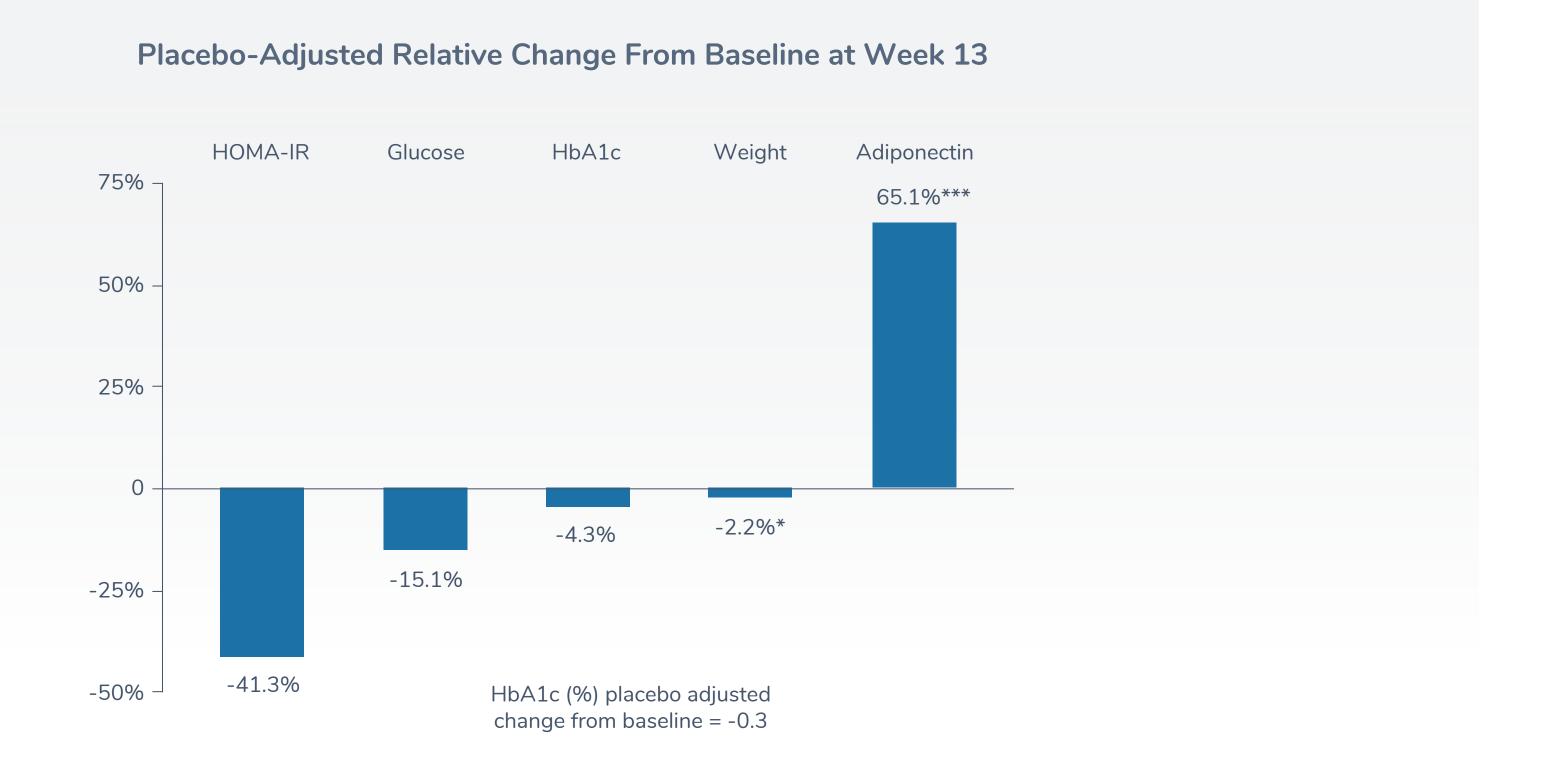




subgroup with baseline TG \geq 200 mg/dL • TG: 33%-49%. • Non-HDL: 8%-29%.

PD Analysis Set; MMRM LS Mean; *p<0.05; **p<0.01; ***p<0.001 versus placebo; 'TG<150 mg/dL.

Improvements in Metabolic Markers With BIO89-100 27mg QW



PD Analysis Set: MMRM LS Mean: *P<0.05; **P<0.01; ***P<0.001 versus placebo. Placebo HOMA-IR: -0.1%; Glucose: +7.9%; HbA1c +0.61%; Weight: +1.4%; Adiponectin: -4.3%.

Treatment-Related Emergent AEs in ≥10% of Pooled BIO89-100 Group
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Preferred Term n (%)	Placebo (n=18)	Pooled BIO89-100 (n=63)	3 mg QW (n=7)	9 mg QW (n=12)	18 mg QW (n=11)	27 mg QW (n=10)	18 mg Q2W (n=14)	36 mg Q2W (n=9)
Increased Appetite	0.0%	15.9%	4	2	0	2	2	0

Safety Analysis Set; one placebo subject received one dose of BIO89-100 3mg and is summarized in 3mg QW group.

• GI-related AEs were similar to placebo:

- 9.5% of subjects reported diarrhea in pooled BIO89-100 vs 11.1% in placebo.

- 4.8% of subjects reported nausea in pooled BIO89-100 vs 11.1% in placebo.
- 0.0% of subjects reported vomiting in pooled BIO89-100 vs 0.0% in placebo.

