



Second-generation hepatitis B virus core inhibitors ABI-H2158 and ABI-H3733 have enhanced potency and target coverage for both antiviral inhibition and covalently closed circular DNA establishment activities

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Disclosures

• William Delaney is an employee and stockholder of Assembly Biosciences, Inc.

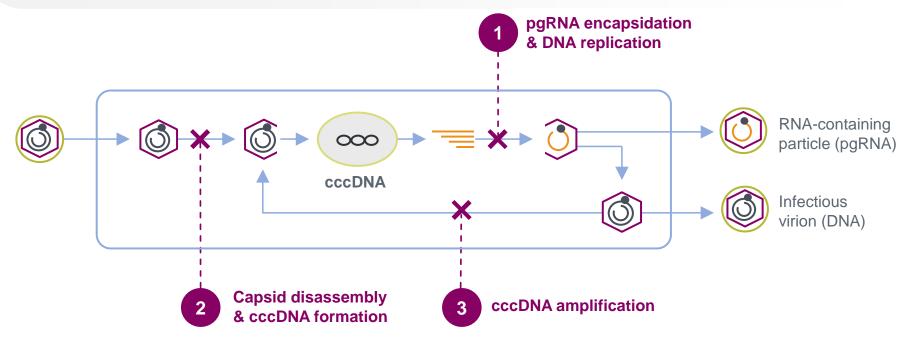
Introduction

- Core inhibitors are a new class of HBV antivirals with the potential to improve treatment of cHBV patients
- Core inhibitors interfere with multiple steps in the HBV replication cycle and result in enhanced antiviral suppression when used with Nrtls
- Assembly has three structurally-distinct core inhibitors in clinical development^{1–3}
 - Vebicorvir: Being tested in two Phase 2 triple-combination studies
 - ABI-H2158: Being tested in a Phase 2 study in combination with NrtIs
 - ABI-H3733: Recently completed Phase 1a PK study in healthy adults

1. Huang Q, et al. Antimicrob Agents Chemother. 2020; AAC.01463-20. 2. Huang Q, et al. Hepatol. 2017; 66(1 Suppl): 493A. 3. Huang Q, et al. EASL 2019. Oral Presentation.

cHBV, chronic hepatitis B virus; HBV, hepatitis B virus; Nrtl, nucleos(t)ide analog reverse transcriptase inhibitor; PK, pharmacokinetic.

Core Inhibitors Target Multiple Steps of the HBV Replication Cycle



- Core inhibitors are more potent against viral replication (1) vs cccDNA formation (2,3)
- Potent activity against both replication and cccDNA formation may be crucial for optimal patient responses

cccDNA, covalently closed circular DNA; HBV hepatitis B virus; pgRNA, pregenomic RNA.

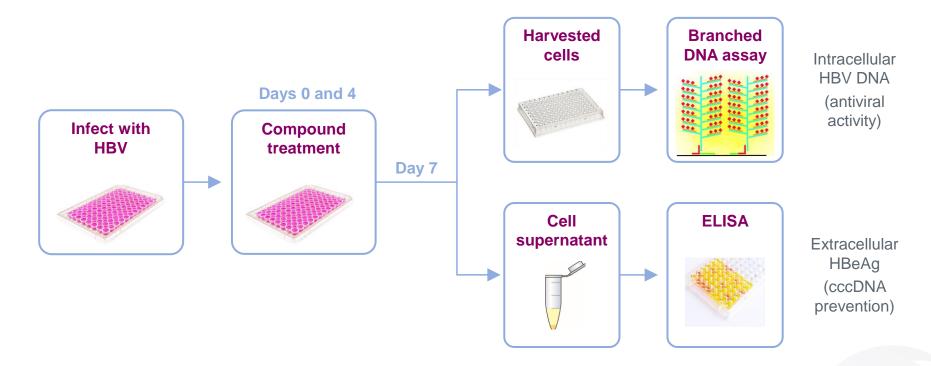
Objective

- To evaluate human plasma and estimated liver concentrations of VBR, 2158, and 3733 relative to their respective protein-adjusted EC₅₀ values for
 - Assembly and release of new viral particles (antiviral activity)
 - Prevention of formation of new cccDNA (cccDNA prevention)

The clinical efficacy of antivirals depends not only on <u>intrinsic potency</u> but also on <u>protein binding</u> and the <u>drug exposure</u> achieved

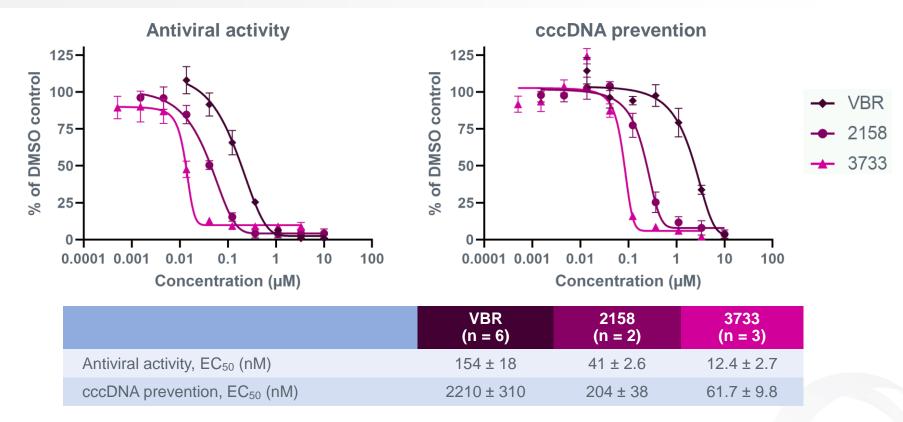
cccDNA, covalently closed circular DNA; EC₅₀, half maximal effective concentration; VBR, vebicorvir.

Determining EC₅₀ in Primary Human Hepatocytes



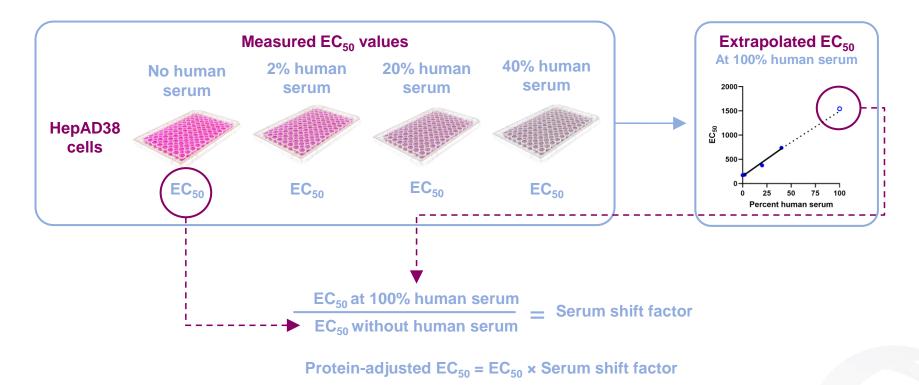
cccDNA, covalently closed circular DNA; EC₅₀, half maximal effective concentration; ELISA, enzyme-linked immunosorbent assay; HBeAg, hepatitis B "e" antigen; HBV, hepatitis B virus.

Potency of VBR, 2158, and 3733 in PHH

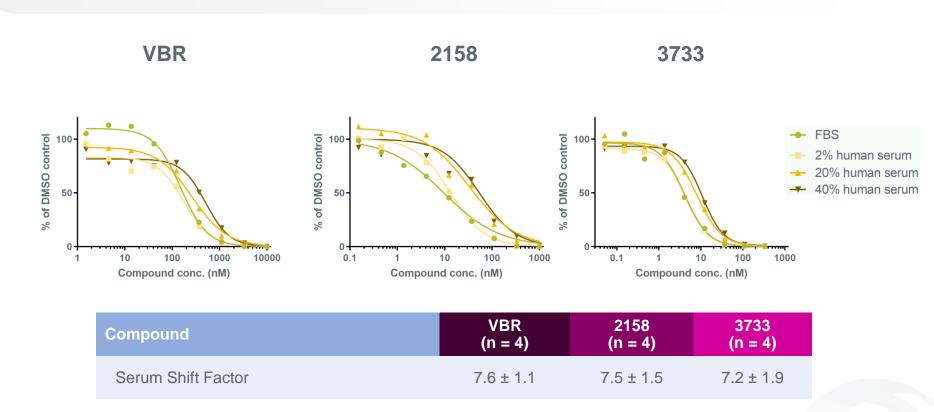


cccDNA, covalently closed circular DNA; DMSO, dimethyl sulfoxide; EC₅₀, half maximal effective concentration; PHH, primary human hepatocyte; VBR, vebicorvir.

Assay to Measure Effect of Human Serum on EC₅₀ (Serum Shift Assay)



Serum Shift Values for VBR, 2158, and 3733



DMSO, dimethyl sulfoxide; FBS, fetal bovine serum; VBR, vebicorvir.

PK Values Determined From Phase 1 Studies

- Pharmacokinetic values, including steady state minimum concentration (C_{min}; 300 mg QD dosing), were calculated from Phase 1 studies
 - VBR: Study ABI-H0731-101 (cHBV patients, NCT02908191)¹
 - 2158: Study ABI-H2158-101 (cHBV patients, NCT03714152)²
 - 3733: Study ABI-H3733-101 (healthy adults, NCT04271592)³

PK parameter	VBR 300 mg QD	2158 300 mg QD	3733 300 mg QD
C _{min} (nM)	3081	5852	2454
T _{1/2} (h)	24	19	25
C _{max} (nM)	8536	18146	5609
AUC (h·ng/mL)	22700	112700	40020

1. Yuen et al. *Lancet Gastroenterol Hepatol.* 2020;5:152-66; 2. Agarwal et al. EASL 2020 poster presentation; 3. Data on file.

AUC, area under the curve; cHBV, chronic hepatitis B; C_{max}, steady state peak concentration; C_{min}, steady state minimum concentration; PK, pharmacokinetic; QD, once daily; T_{1/2}, half-life; VBR, vebicorvir.

Plasma C_{min} and Protein-Adjusted EC₅₀ Comparisons

Mechanism	Plasma parameter	VBR 300 mg QD	2158 300 mg QD	3733 300 mg QD
Antiviral activity	C _{min} /EC ₅₀	20	143	204
	C _{min} /paEC ₅₀	3	19	28
cccDNA prevention	C _{min} /EC ₅₀	1	29	40
	C _{min} /paEC ₅₀	0.2	3.8	5.5

- After 300 mg QD doses in humans, all core inhibitors achieved trough (minimum) plasma concentrations several fold above their antiviral activity protein-adjusted EC₅₀s (paEC₅₀)
- 2158 and 3733 achieved trough plasma concentrations several fold above their cccDNA prevention paEC₅₀

cccDNA, covalently closed circular DNA; C_{min}, steady state minimum concentration; EC₅₀, half maximal effective concentration; pa, protein-adjusted; QD, once daily; VBR, vebicorvir.

Liver C_{min} and Protein-Adjusted EC₅₀ Comparisons

Mechanism	Liver Parameter	VBR 300 mg QD	2158 300 mg QD	3733 300 mg QD
	Liver:plasma ratio	18	5	6
Antiviral activity	C _{min} /EC ₅₀	360	714	1227
	C _{min} /paEC ₅₀	47	95	170
cccDNA prevention	C _{min} /EC ₅₀	25	143	237
	C _{min} /paEC ₅₀	3	19	33

- Estimated liver concentrations for VBR, 2158, and 3733 were several fold above both antiviral activity and cccDNA prevention $paEC_{50} s$

cccDNA, covalently closed circular DNA; C_{min}, steady state minimum concentration; EC₅₀, half maximal effective concentration; pa, protein-adjusted; QD, once daily; VBR, vebicorvir.

Conclusions

- Core inhibitors are more potent against the formation of new virions (antiviral activity) vs generation of new cccDNA; we believe both activities are likely to be important for maximal impact in patients
- Plasma C_{min} values for VBR, 2158, and 3733 at safe and well-tolerated doses are significantly above protein-adjusted EC₅₀ values for antiviral activity
- 2158 and 3733 have plasma C_{min} values significantly above protein-adjusted EC_{50} values for cccDNA prevention
- Liver C_{min} values for VBR, 2158, and 3733 are predicted to be significantly above the protein-adjusted EC₅₀ for both antiviral activity and cccDNA prevention
- Assembly has a fourth core inhibitor program moving into development in mid-2021
 - Targeted plasma C_{min} concentrations are >25-fold above protein-adjusted EC₅₀ for cccDNA



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