

Single-dose GLP-1-based Pancreatic Gene Therapy Maintains Weight Loss After Semaglutide Withdrawal and Reduces Hepatic Triglycerides in a Murine Model of Obesity

Harith Rajagopalan, Alice Liou Fitzpatrick,
Suya Wang, Emily Cozzi, Randy Seeley,
Timothy Kieffer, Jay Caplan



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Disclosure Statement

We disclose the following financial relationship(s) with a commercial interest:

Harith Rajagopalan, Alice Liou Fitzpatrick, Suyu Wang, Emily Cozzi, Timothy Kieffer, and Jay Caplan are employees and shareholders of Fractyl Health, Inc. Randy Seeley is a paid consultant for and received research support from Novo Nordisk, Fractyl Health, Congruence, and Eli Lilly; is a paid consultant for CinRx and Crinetics; and received research support from Amgen, Astra Zeneca, and Bullfrog AI.

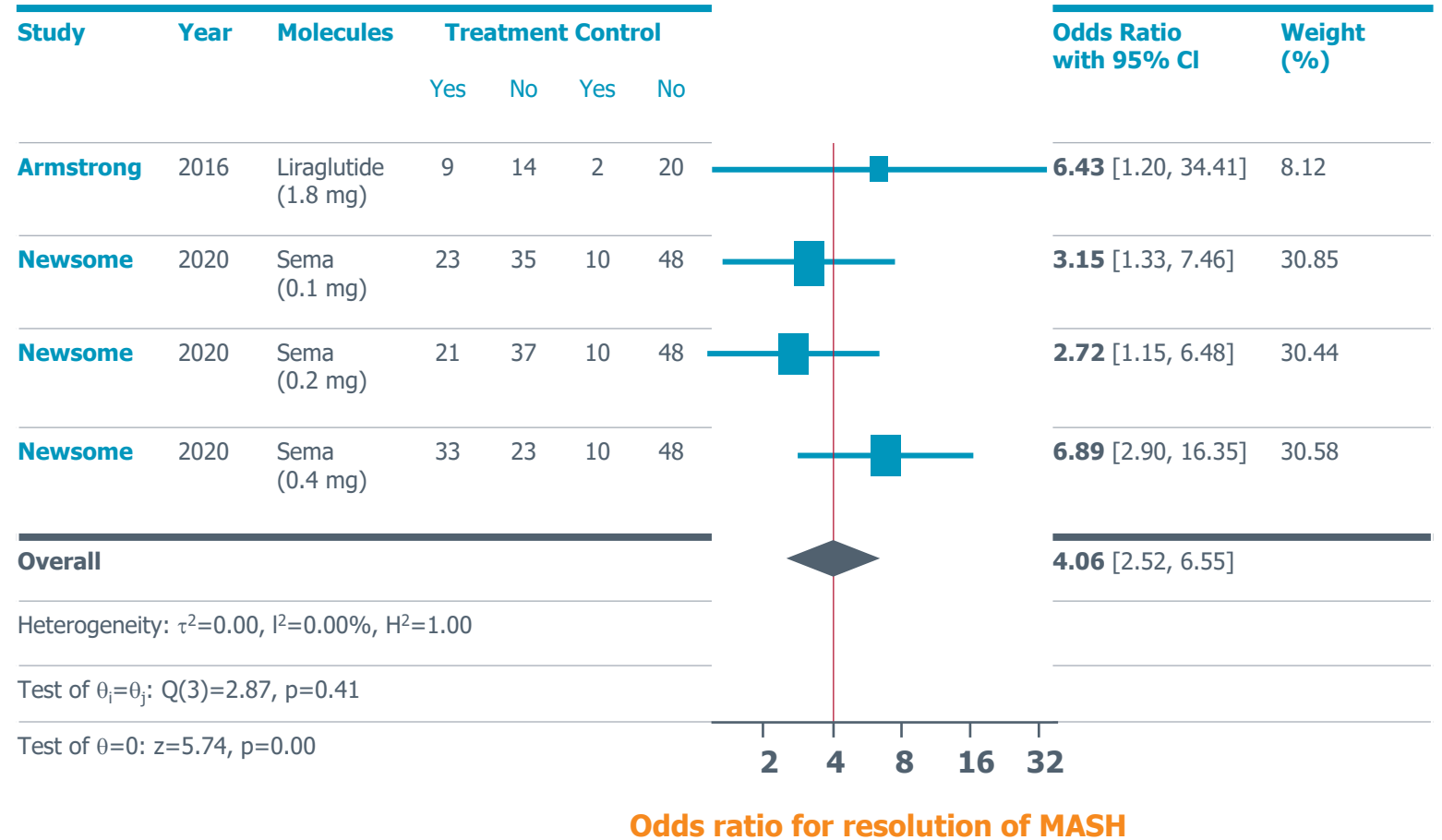
Pancreatic Gene Therapy (PGTx) is in early development and has not been assessed by any regulatory body for investigational or commercial use.

Incretin Therapies: Type 2 Diabetes, Obesity, and Beyond

Emerging benefit in MASLD and MASH

Clinical studies suggest that GLP-1RAs can **improve steatohepatitis, liver function, and fibrosis biomarkers**¹

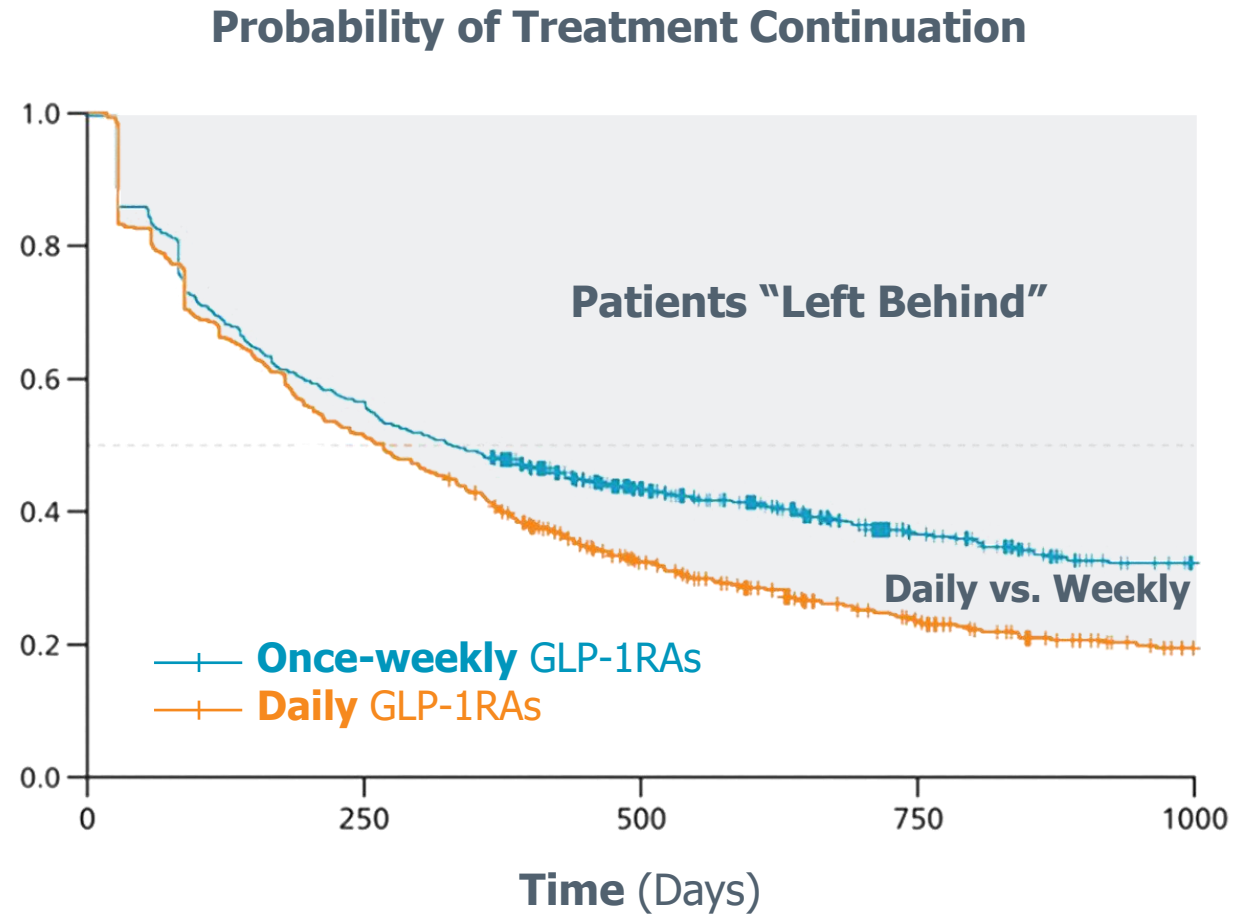
GLP-1RAs can **resolve MASH without worsening fibrosis** in individuals with biopsy-proven MASH and fibrosis²



Incretin Therapies: Real-world Discontinuation Rates are High

Majority of patients discontinue therapy within first year

Despite proven clinical efficacy in metabolic disease,^{1,2} **up to 2/3 of patients discontinue** weekly GLP-1RA therapy within 1 year³⁻⁶



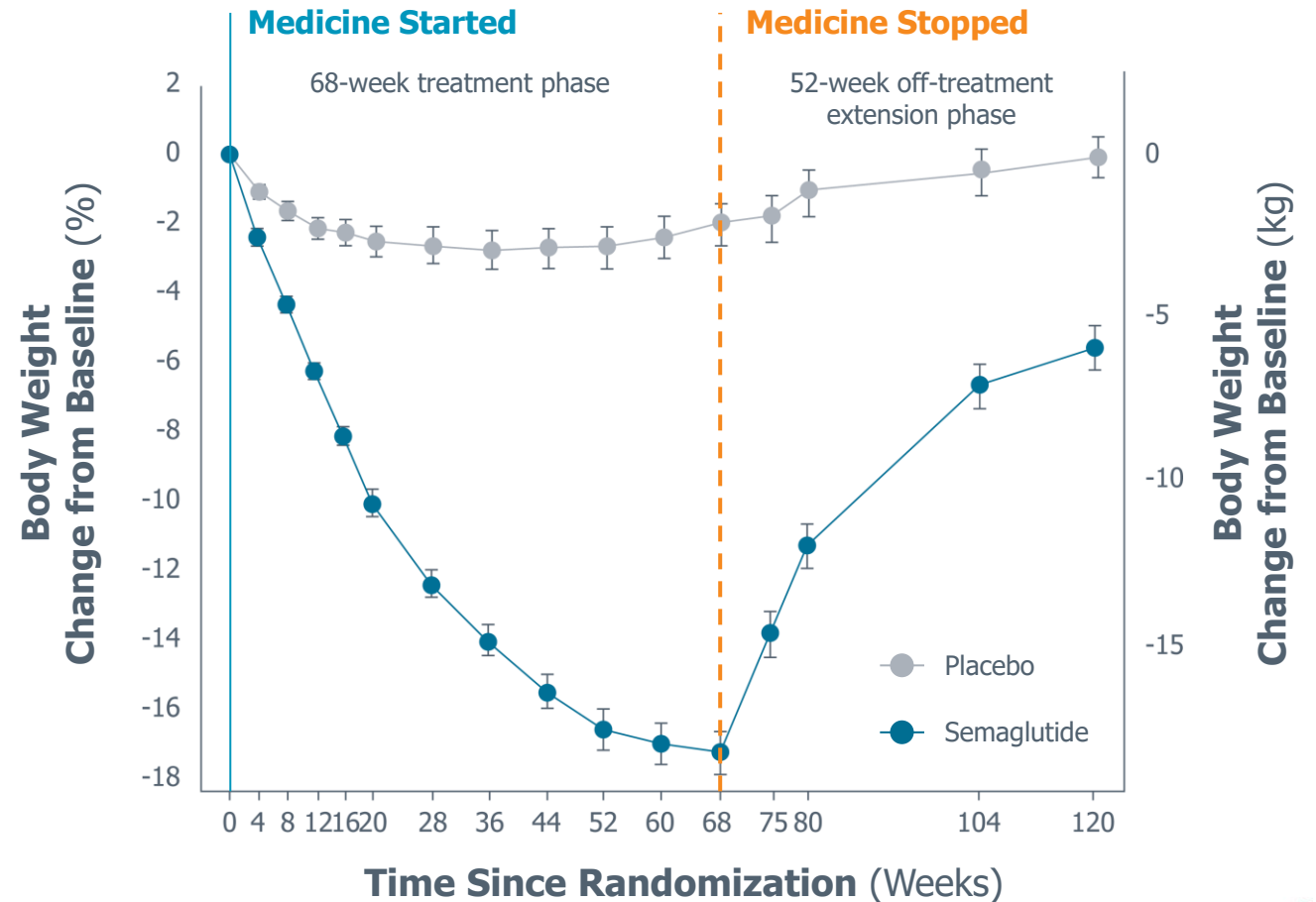
Incretin Therapies: Metabolic Rebound Now Well Described

Current GLP-1RAs do not durably alter metabolic setpoint

Discontinuation of therapy leads to **near total loss of metabolic benefit**¹

GLP-1RA therapies support weight loss and glucose control, **but how do we maintain these effects?**

STEP-1 Trial Extension – Semaglutide 2.4 mg



Pancreatic Gene Therapy (PGTx) to Modify Islet Function

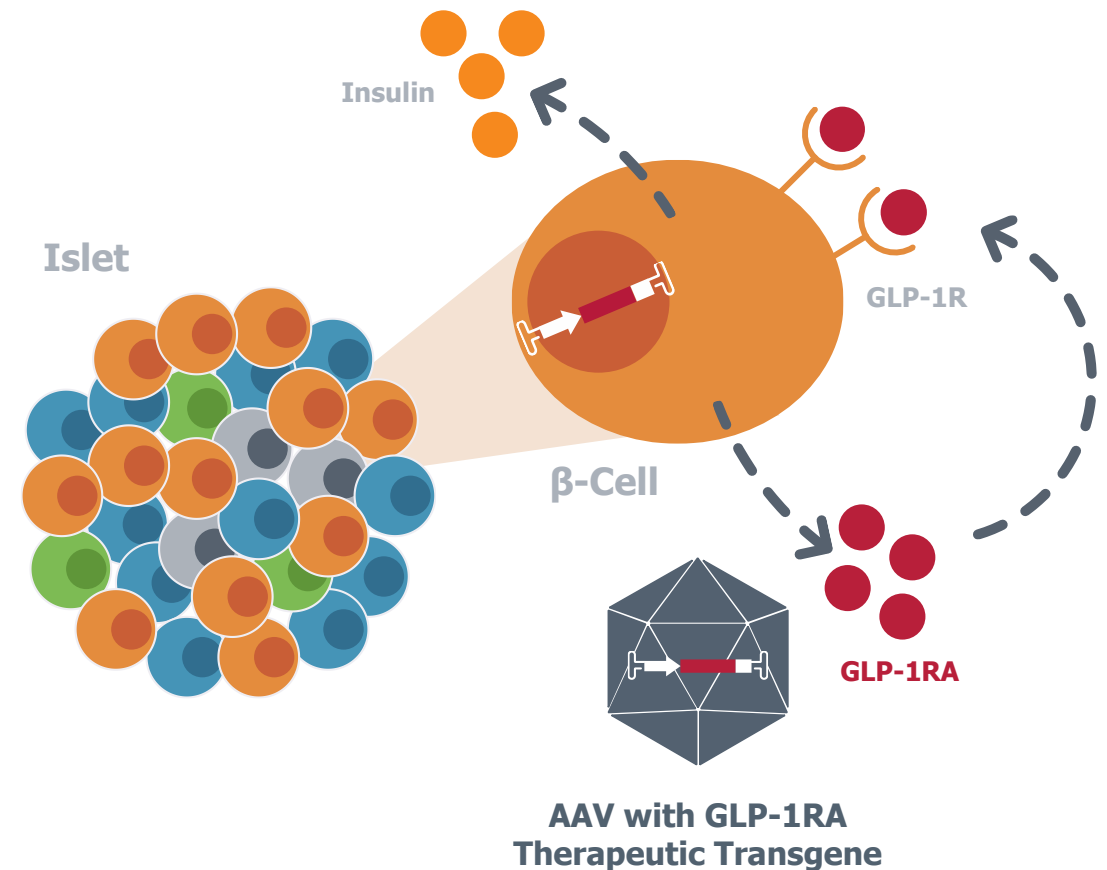
Potential for durable improvement in metabolic health

Islet cells are terminally differentiated,¹ making adeno-associated virus (AAV) a suitable means of durable genetic modification

Pancreas is readily accessible via endoscopic ultrasound, and local delivery enables PGTx feasibility and safety

β -cell machinery can be leveraged to produce nutrient-stimulated hormones that modify systemic metabolic function^{2,3}

GLP-1RA PGTx, driven by the insulin promoter, may offer differentiated benefit via durable local production of GLP-1RA



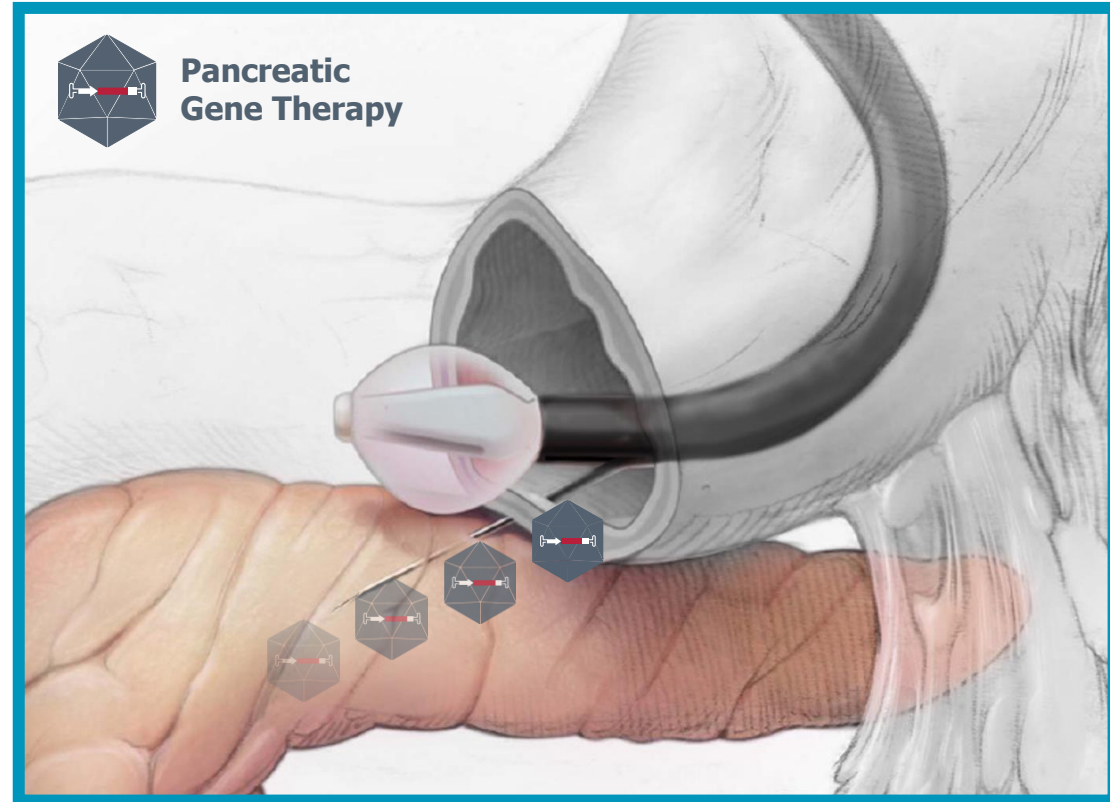
Gene Therapy Route of Administration to Pancreas

Islets are most easily accessed via endoscopic ultrasound

Islets are predominantly in body and tail of pancreas, most easily accessible via endoscopic ultrasound (EUS)^{1,2}

Upper EUS is routine and straightforward (~300K patients per year in US³)

Procedural risk can be mitigated with device and procedure steps



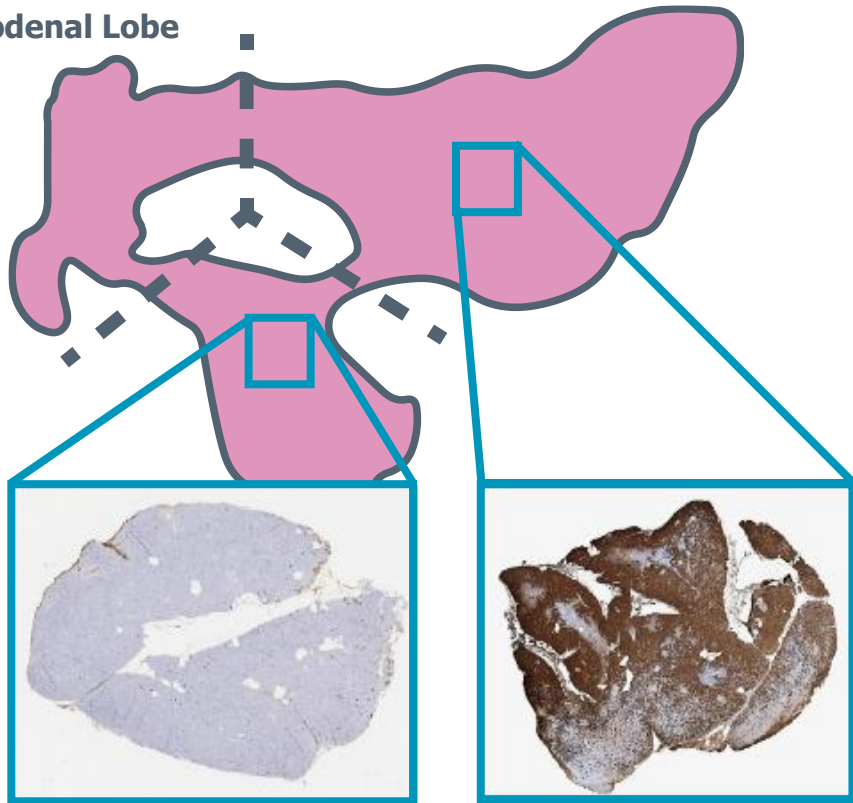
Endoscopic Procedure & AAV Delivery

Proprietary Local Endoscopic Delivery System Extensively Tested

Dose-dependent transduction throughout porcine splenic lobe

A) Extensive GFP in Splenic Lobe

Duodenal Lobe

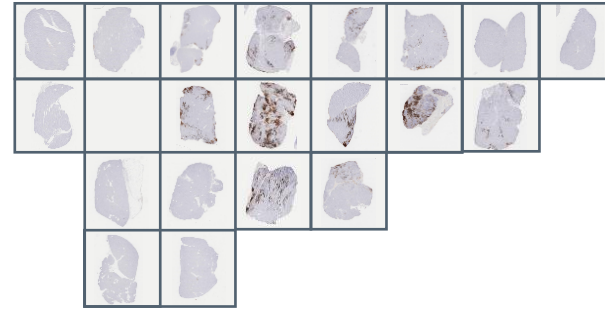


Connecting Lobe

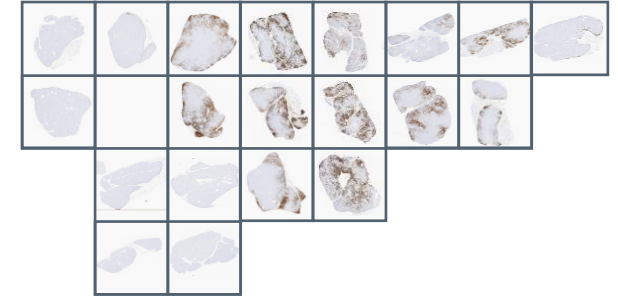
Splenic Lobe

B) VG Dose-dependent GFP in Pancreas

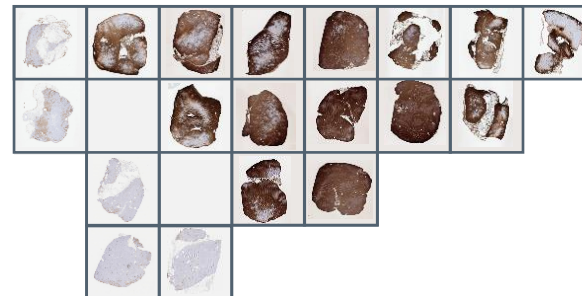
5e12 VG



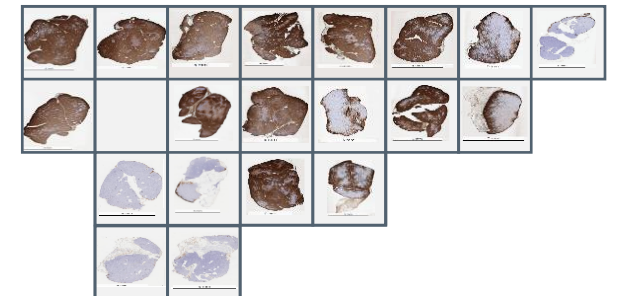
1e13 VG



5e13 VG



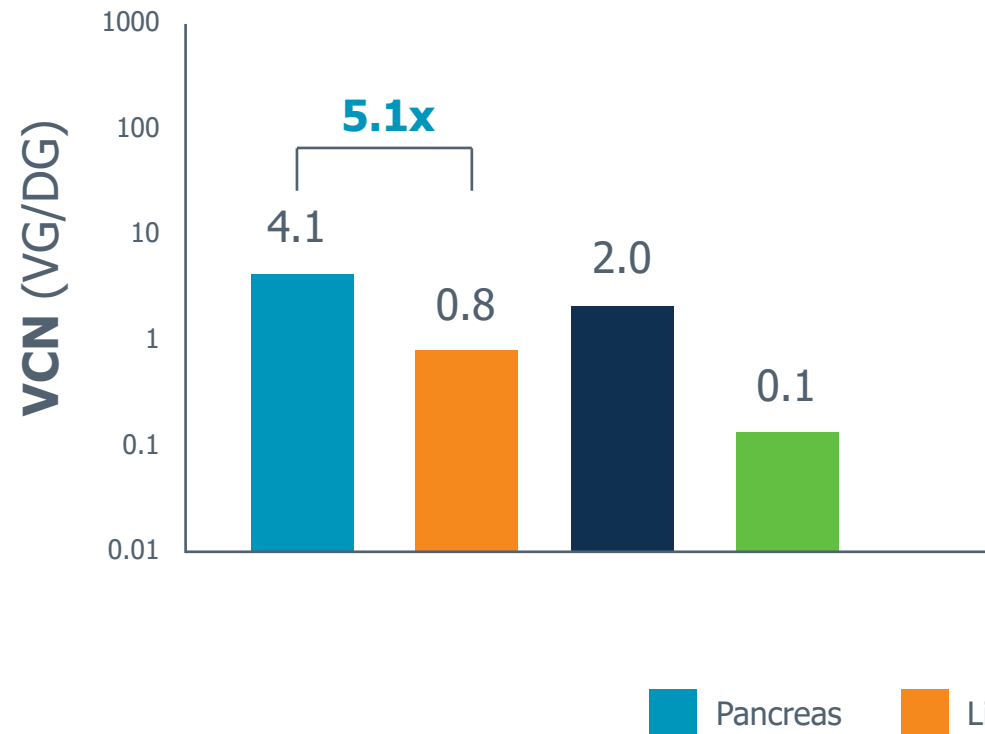
1.5e14 VG



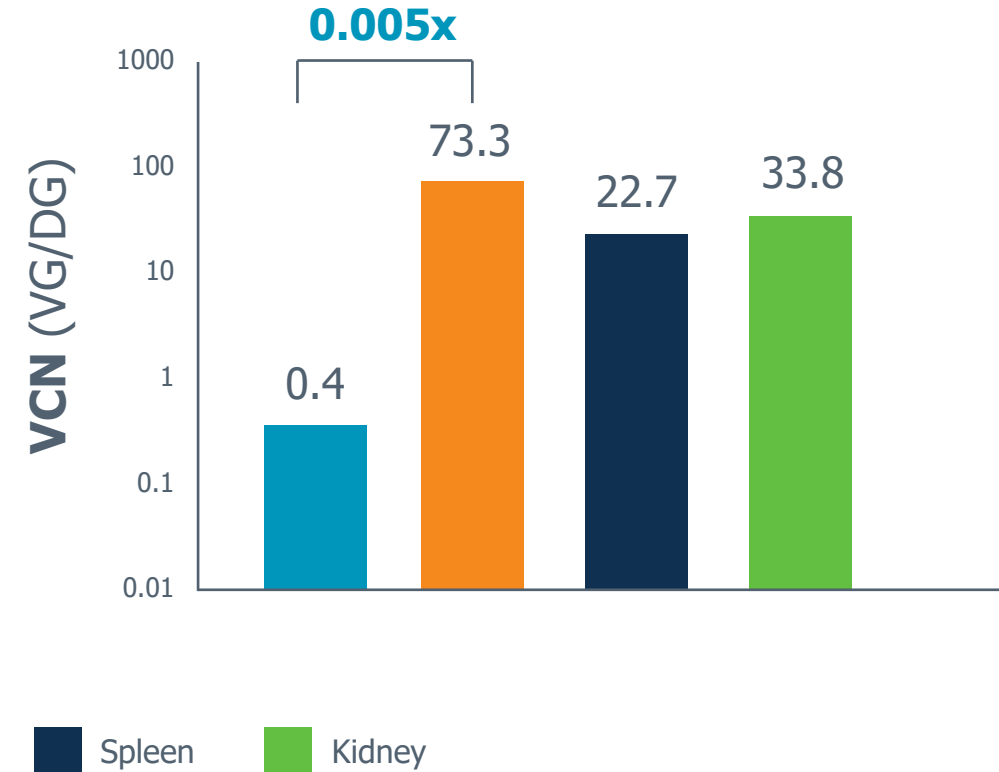
Local Endoscopic Delivery Allows High Expression

Dramatically limits systemic exposure to AAV in porcine model

A) Local Delivery¹ (4.2e12 VG/kg)



B) I.V.² (8.3e12 VG/kg)

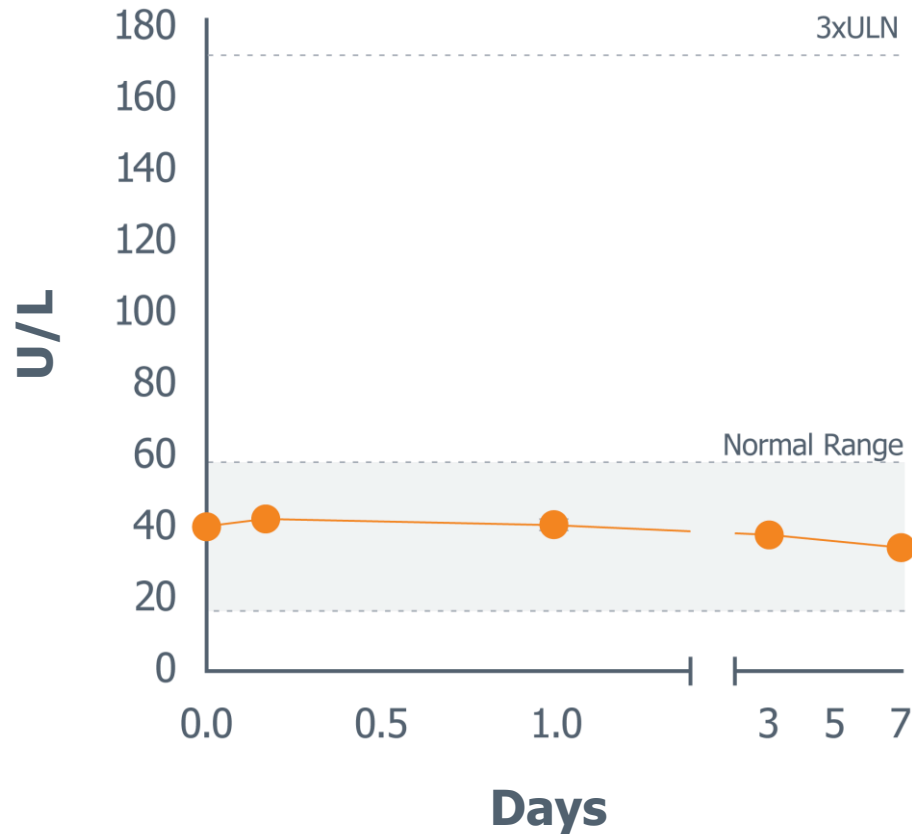


Pancreas Liver Spleen Kidney

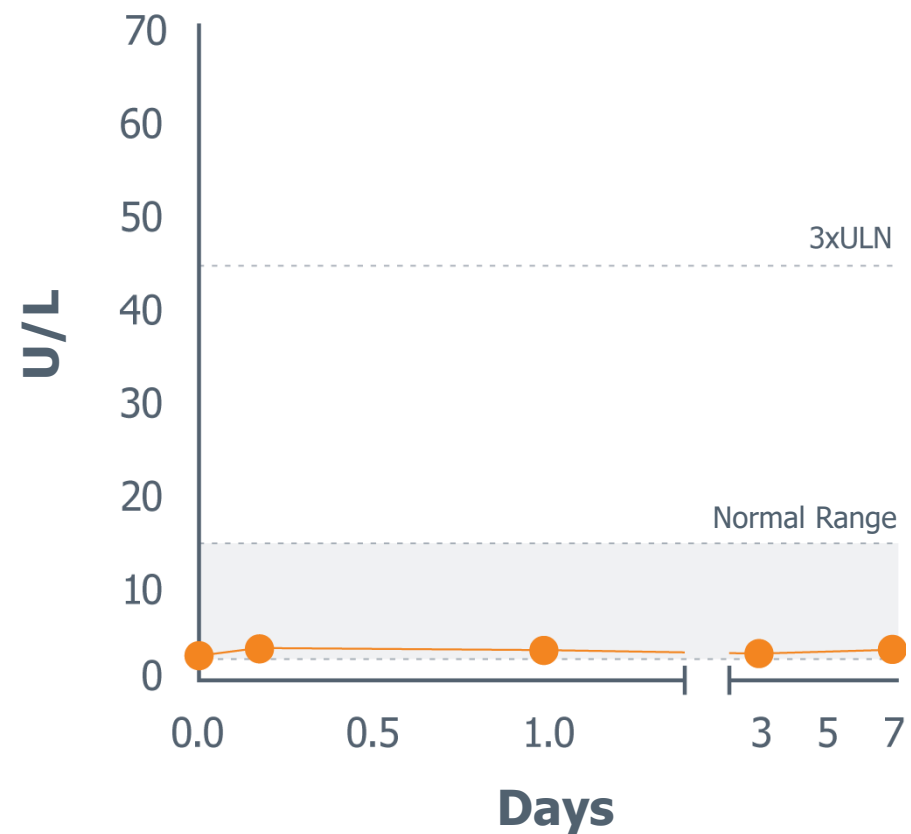
Proof-of-principle Safety with Local Endoscopic Delivery System

Mean ALT and lipase levels remained within normal range across all timepoints

A) 7-day ALT



B) 7-day Lipase

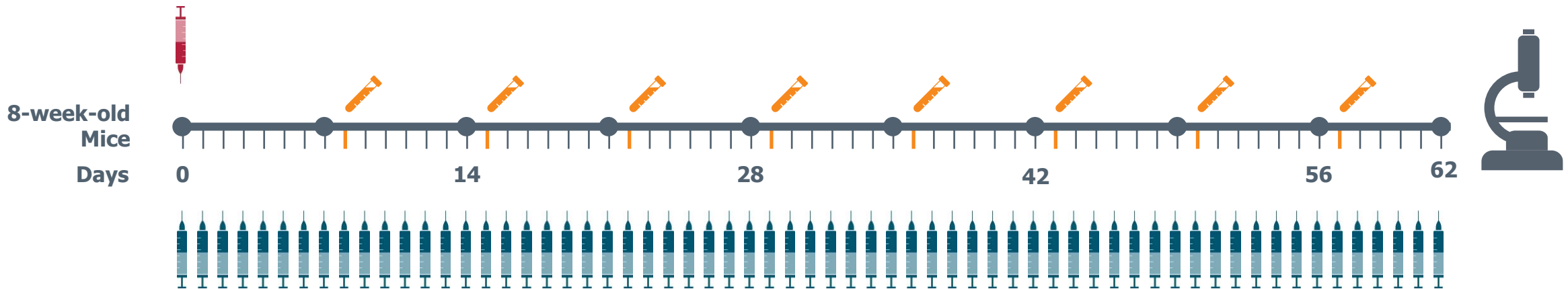


GLP-1RA PGTx T2D Efficacy Study: Head-to-head vs. Semaglutide

db/db murine model is *de facto* standard for T2D development



Single I.P. Injection
(5e12 VG GLP-1RA PGTx or Vehicle)



Daily S.C. Injections
Semaglutide (10 nmol/kg/d)
or Vehicle

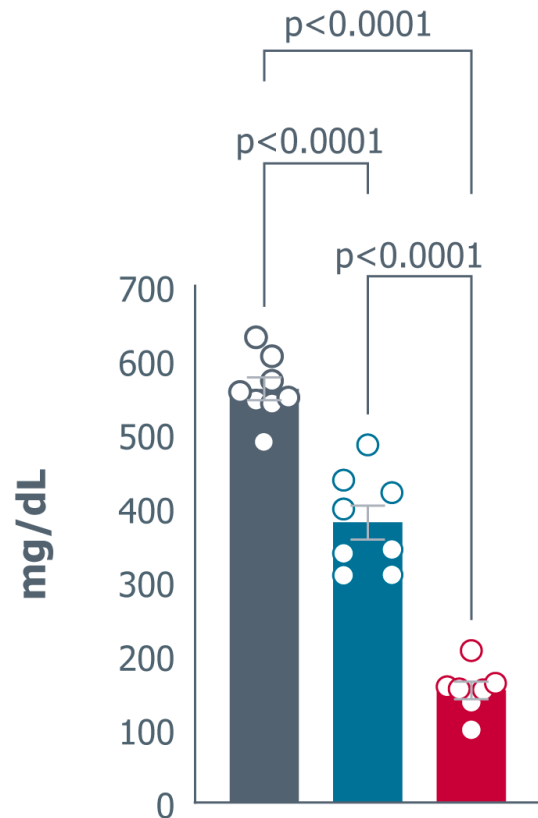
Efficacy/MOA (Day 0-62)
Weekly Fasting Blood Glucose
Biweekly Insulin
Weight

Sacrifice (Day 62)
Organ Histology
Pancreatic GLP-1RA Protein
Serum GLP-1RA Protein

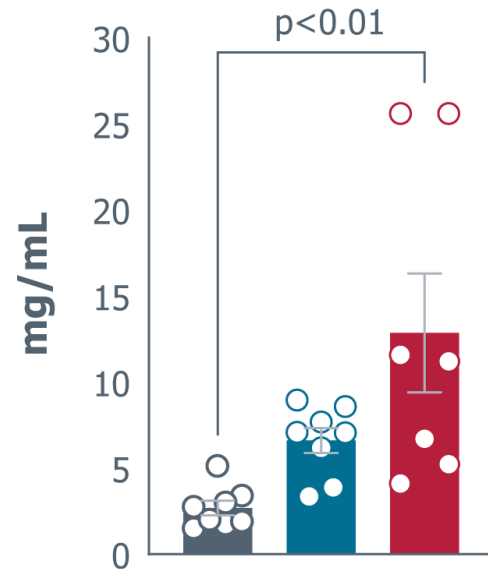
Glucose-lowering Efficacy in *db/db* Murine Model

GLP-1RA PGTx improves glucose, insulin, and weight vs. daily semaglutide

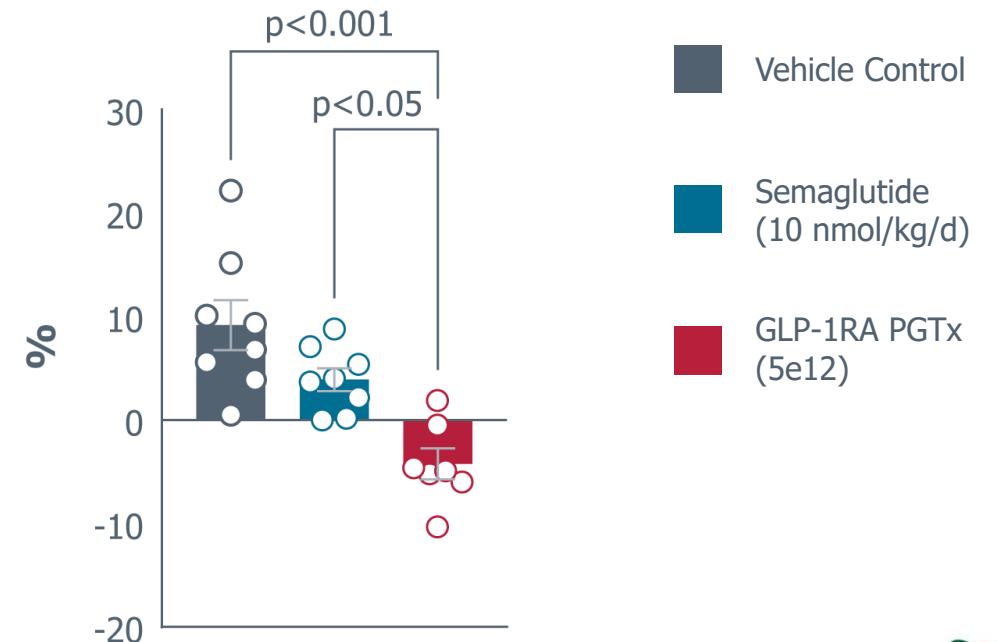
A) Fasting Blood Glucose
(Day 29, 4-6 Hours Fasted)



B) Fasting Plasma Insulin
(Day 29, 4-6 Hours Fasted)



C) Body Weight Change from Baseline
(Day 29, 4-6 Hours Fasted)



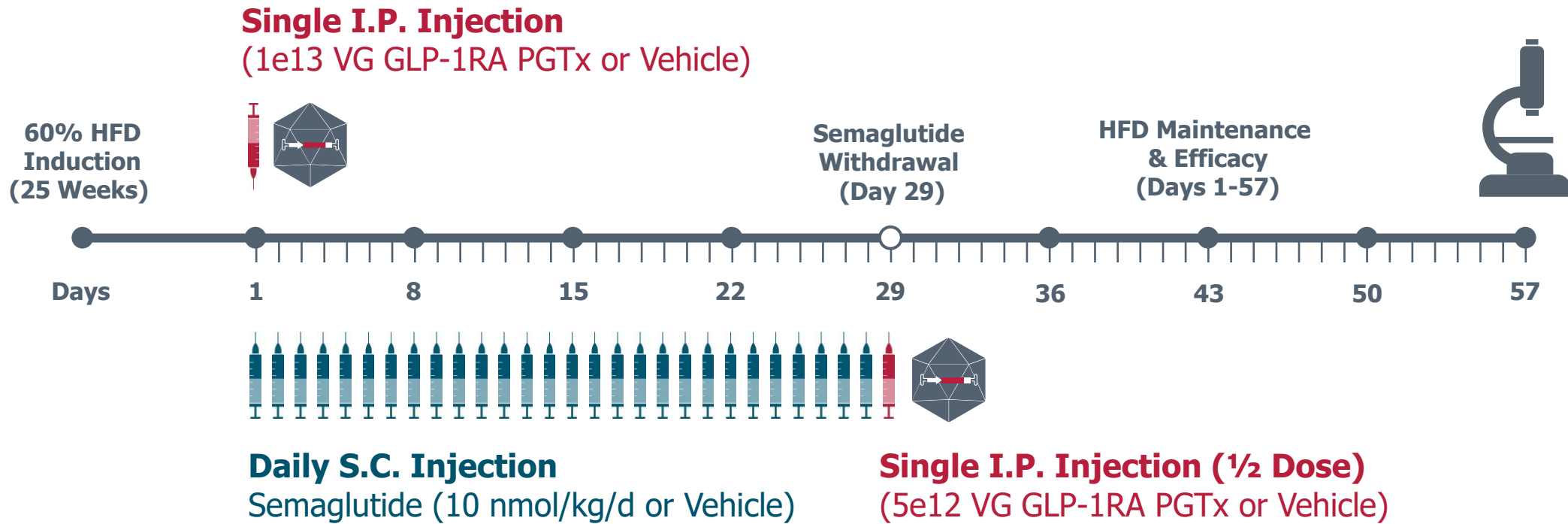
■ Vehicle Control
■ Semaglutide (10 nmol/kg/d)
■ GLP-1RA PGTx (5e12)

**In Diet-induced
Obesity, Compared to
Chronic Semaglutide,
Can One-time GLP-1-
based PGTx:**

**Improve body weight?
Improve MASLD?**

GLP-1RA PGTx Obesity Efficacy Study: Head-to-head vs. Semaglutide

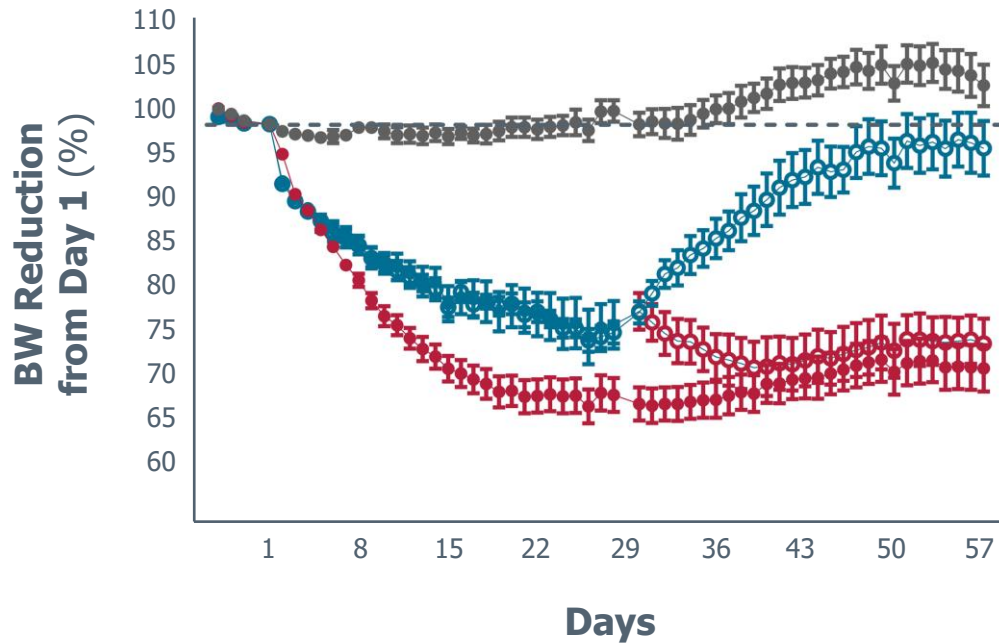
DIO murine model is *de facto* standard for obesity development



Body Weight Change in DIO Murine Model

Single-dose GLP-1RA PGTx sustains weight loss after semaglutide withdrawal

A) Change in BW Over Time

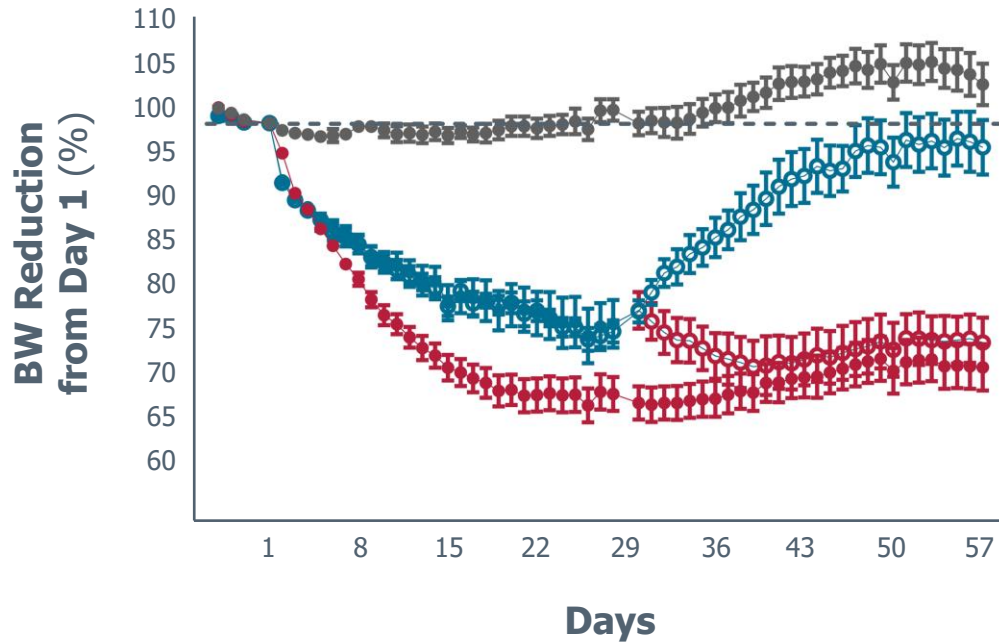


B) End of Study BW Change

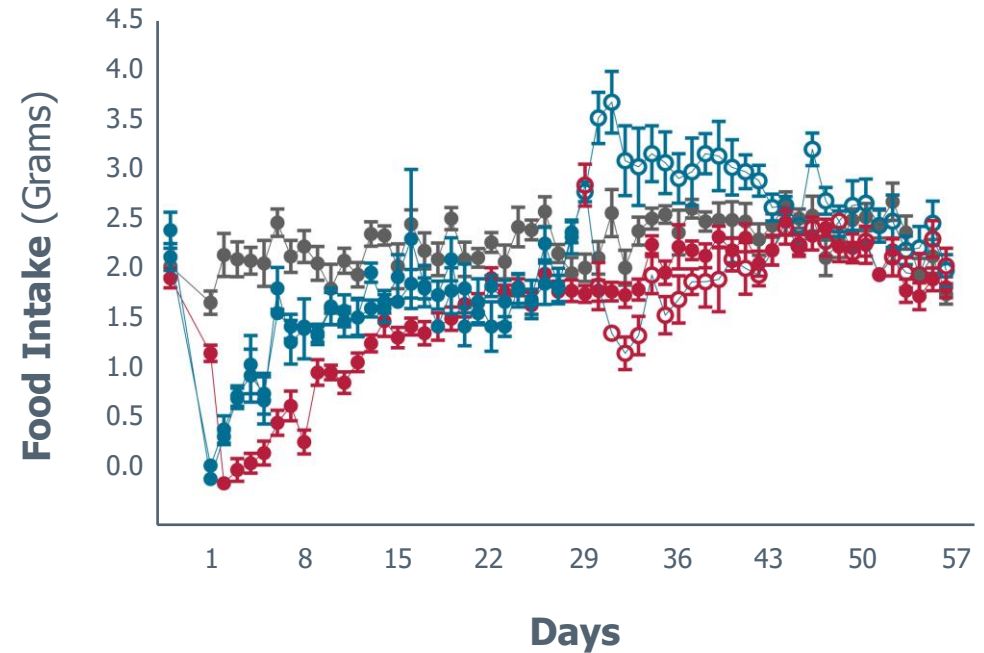
Food Intake Change in DIO Murine Model

Body weight changes are reflected by alterations in food intake

A) Change in BW Over Time



B) Food Intake Over Time



Liver Weight and Triglyceride Change in DIO Murine Model

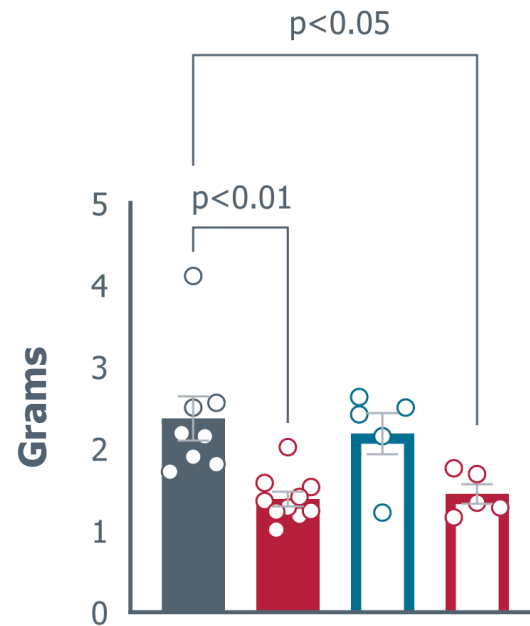
Single-dose GLP-1RA PGTx reduced liver weight and triglycerides

42% lower liver weight with PGTx compared to vehicle

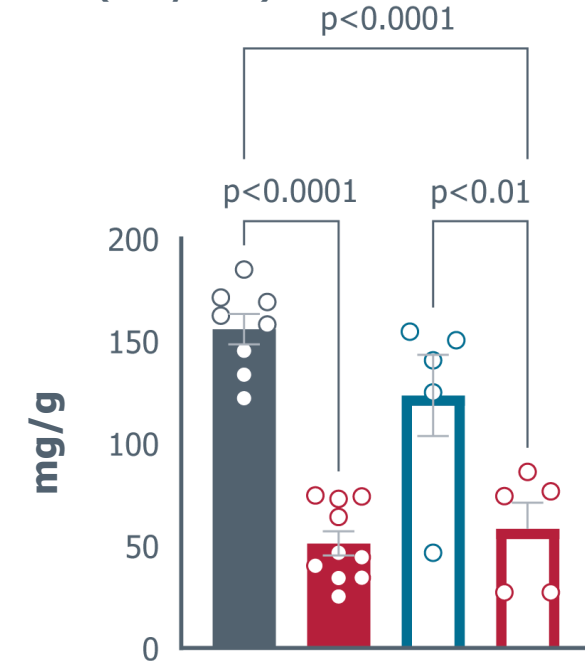
67% lower liver triglycerides with PGTx compared to vehicle

Sema withdrawal consistent with vehicle control

A) Liver Weight (Day 57)



B) Liver Triglycerides (Day 57)



Vehicle Control

Sema Withdrawal + Vehicle

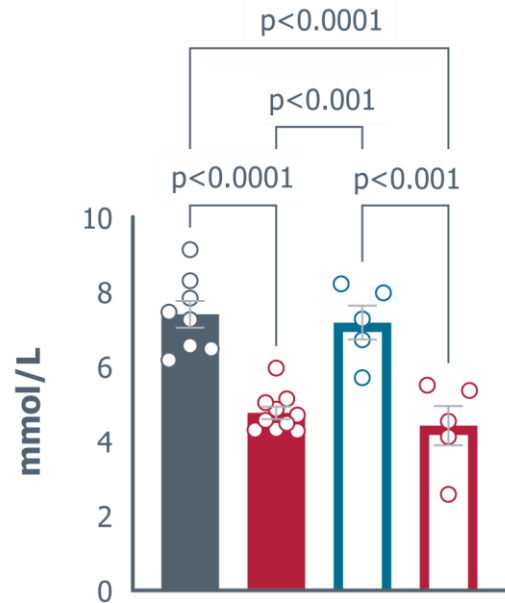
GLP-1RA PGTx (1e13 VG)

Sema Withdrawal + GLP-1RA PGTx (5e12 VG)

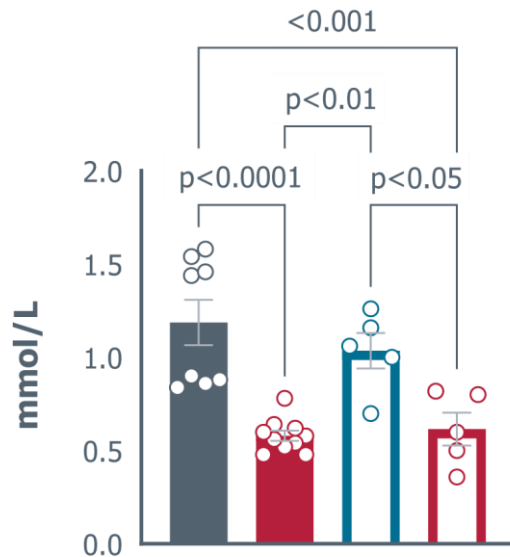
Plasma Cholesterol and Triglyceride Change in DIO Murine Model

Single-dose GLP-1RA PGTx reduced total cholesterol

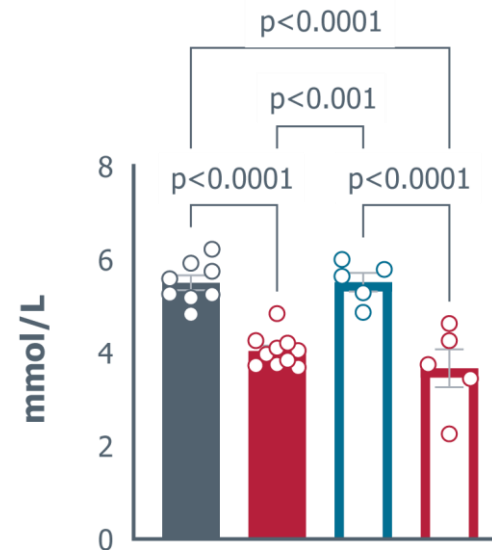
A) Total Cholesterol



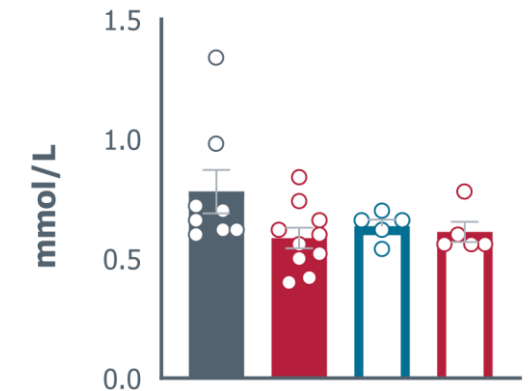
B) LDL



C) HDL



D) Triglycerides



■ Vehicle Control

□ Sema Withdrawal + Vehicle

■ GLP-1RA PGTx (1e13 VG)

□ Sema Withdrawal + GLP-1RA PGTx (5e12 VG)

GLP-1RA PGTx Safety and Feasibility Studies in Model Systems

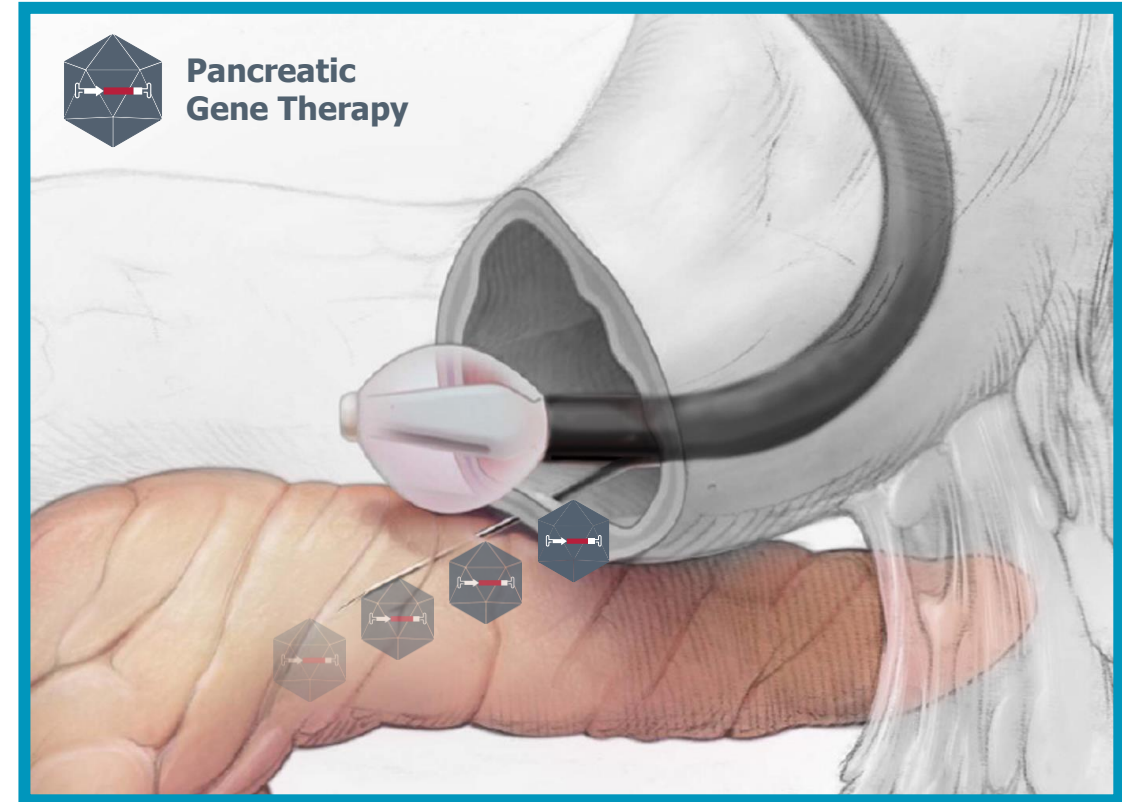
Conclusions to date

Early safety and feasibility observations in *db/db* and DIO mice and Yucatan pigs are encouraging

Compared to chronic semaglutide, single-dose PGTx **improves fasting glucose and prevents weight gain in the *db/db* model of T2D**

Single-dose PGTx can lead to **durable weight loss and maintenance of weight loss** after semaglutide withdrawal in DIO mice

PGTx can **improve steatohepatitis and systemic lipid profile** in DIO mice



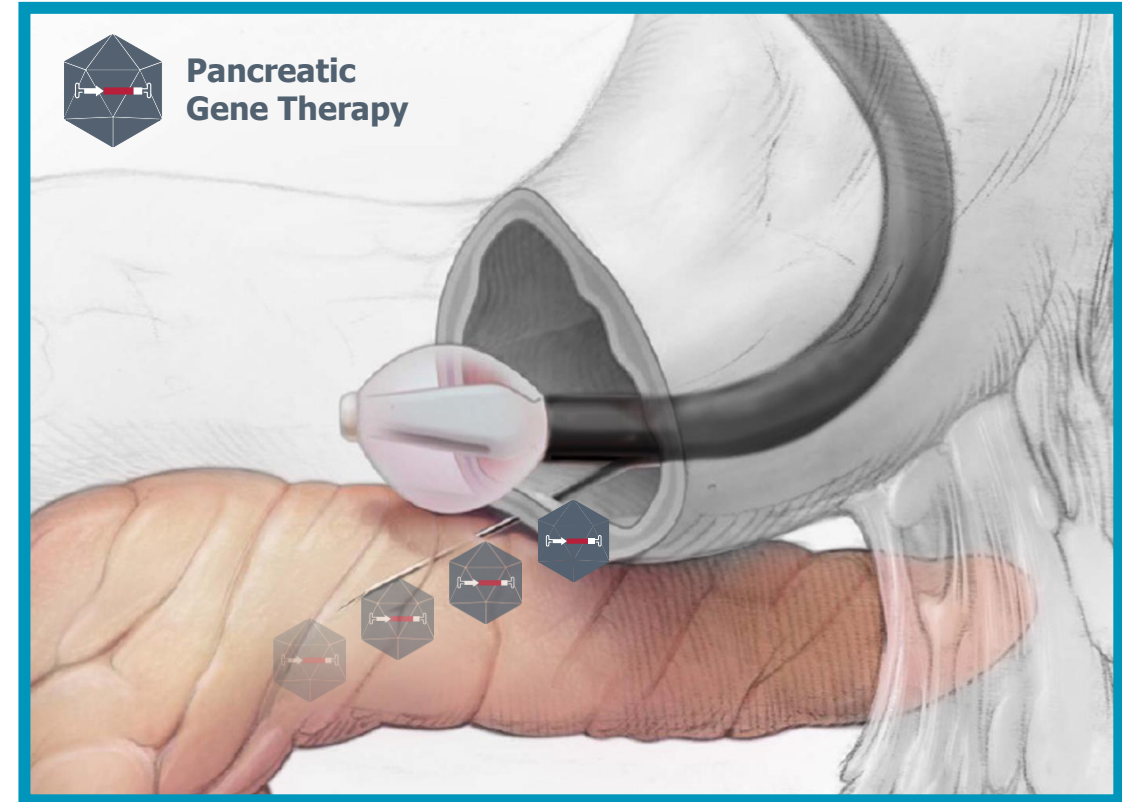
GLP-1RA PGTx Safety and Feasibility Studies

Next Steps

First GLP-1 PGTx, RJVA-001, nominated as development candidate

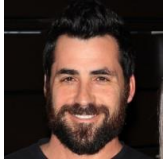
IND-enabling, preclinical studies are underway

Anticipate initiating **first-in-human trial in type 2 diabetes** in the first half of 2025



Thank You

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Design and *in vitro* screening



Lin Quek, PhD
Assoc. Director



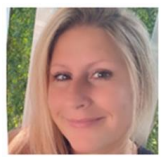
Gary White, MS
Sr. Scientist



Suya Wang, PhD
Scientist II



Keiko Ishida, BS
Sr. Assoc. Scientist



Lindsay Schulman, MS
Senior Associate Scientist

ex vivo and animal studies



Alice Fitzpatrick, DVM, PhD
Director



Rebecca Reese, Assoc. Scientist I



Camila Lubaczeuski, PhD
Scientist II



Nicole Picard, BS
Assoc. Scientist

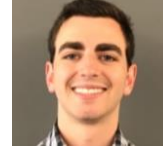


Abdul Alhamood, MS
Senior Associate Scientist

Device Engineering

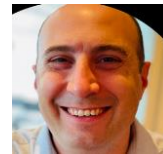


Mike Biasella, BS
Sr. Engineer Manager



Jake Wainer, BS
Sr. Biomedical Engineer

Tech Ops and Research Ops



Eric Horowitz, PhD
Exec. Director



Bill Monahan, BS
Assoc. Director

Advisors

Chris Thompson, MD
Brigham and Women's Hospital

Linda Lee, MD
Brigham and Women's Hospital

Randy Seeley, PhD
Michigan School of Medicine

Dave D'Alessio, MD
Duke University School of Medicine

Jon Campbell, PhD
Duke University School of Medicine

