Roche/Genentech Anti-Myostatin Adnectin
RG6206 Development Program in Duchenne

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This compound and its uses are investigational and have not been approved by the U.S. FDA. This information is presented only for purposes of providing a general overview of clinical trials and should not be construed as a recommendation for use of any product for unapproved uses.
Disclaimer

This session contains general information about our Duchenne program as is not intended as specific medical advice.

RG6206 is an investigational (not approved) medicine that is being studied for the treatment of people with Duchenne. RG6206 has not been approved by the Food and Drug Administration (FDA). The effectiveness and safety of RG6206 are currently being studied.

You should talk with your healthcare provider for information and advice about your condition, including any current or potential treatments.
Agenda

• Introduction to Roche/Genentech

• What is Myostatin?

• Overview of our anti-myostatin development program:
  • What is RG6206?
  • Overview of RG6206 Clinical Studies
  • Status to date and next steps

• Q&A
What is Myostatin?

- Myostatin is a naturally occurring protein that is produced primarily in skeletal muscle cells.
- Its function is usually to **stop muscles growing too large**.
- **Limiting myostatin** has been shown in some studies to increase muscle size.
- We hypothesize that blocking myostatin could increase muscle growth and muscle strength in children with Duchenne.
Introduction to RG6206 program

• In early 2017, Bristol-Myers Squibb (BMS) entered into an agreement to fully license BMS-986089 (now RG6206) to Roche

• RG6206 is an investigational anti-myostatin adnectin

• Phase 2/3 study is underway in boys with ambulatory Duchenne

• Recruitment has now restarted following a temporary pause due to an issue with study drug availability

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What is RG6206?

• RG6206 is an investigational molecule being developed for people with Duchenne

• RG6206 is designed to bind to a protein called myostatin and to potentially limit its function

• Per study protocol, RG6206 is administered at home once weekly by subcutaneous injection (injection under the skin) into the abdomen (tummy) after initial training at the site

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Clinical Studies of RG6206

**Phase I**
- Study WN40225: Studied the safety of RG6206 in healthy adults.1,2

**Phase 1b/2**
- Study WN40226: Safety and tolerability of RG6206 in ambulatory boys with Duchenne.3
- Recruitment completed. 103 adult volunteers

**Phase 2/3**
- Study WN40227: Safety, tolerability and efficacy of RG6206 in ambulatory boys with Duchenne.4
- Recruiting
- Study WN40228: Recruitment completed. 43 ambulatory boys with Duchenne

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Phase 1b/2 Study of RG6206 in Boys With Duchenne
Assessing the Safety and Tolerability of RG6206

Current status:

• 43 ambulatory boys with Duchenne (5-10 yrs old) enrolled in the study

• Over 24 weeks, each received a weekly subcutaneous dose of either RG6206 or placebo

• Multiple Ascending Subcutaneous Dose Study

• Participants in this study are now all receiving RG6206 in an open-label phase

• Data from the WN40226 study were first presented at the British Pediatric Neurology Association conference earlier in 2018

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Phase 2/3 Study Investigating RG6206
Assessing the Safety, Tolerability and Efficacy of RG6206

Approximately 159 boys with Duchenne who are ambulatory

Double-blind period
48 weeks

- Patients will be randomly allocated to a treatment
- Neither the patient, not the investigator will know if they are receiving RG6206 or placebo
- 2:1 randomization means that twice as many people receive RG6206 versus placebo
- Two doses of RG6206

Open label period
48 weeks

RG6206 is given to all participants

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Phase 3 Study Investigating RG6206
WN40227: Study Rationale & Objectives

A Randomized, Double Blind, Placebo-Controlled, Study to Assess the Efficacy, Safety, and Tolerability of RG6206 in Ambulatory Boys with Duchenne Muscular Dystrophy

Primary Objective
Compare the change from baseline in 4 Stair Climb (4SC) velocity at Week 48 in RG6206 vs placebo treated participants

Secondary Objectives
Compare the change from baseline at Week 48 in RG6206 vs placebo treated participants in:
- North Star Ambulatory Assessment (NSAA) total score
- Stand from supine velocity
- 10 m walk/run velocity
- Pediatric Outcomes Data Collection Instrument (PODCI) transfers & basic mobility subscale score
- Proximal lower extremity flexor strength measured using manual myometry
- 6 Minute Walk Distance

Compare number of new or worsening lab abnormalities, Serious Adverse Event AEs, & AE leading to discontinuation

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Phase 2/3 Study Investigating RG6206
WN40227: Key Inclusion & Exclusion Criteria

Key Inclusion

• All DMD mutations are eligible
• Diagnosis of Duchenne, confirmed by medical history and by genotyping
• Ambulatory without assistance
• Boys 6–11 years of age, inclusive
• Weight ≥ 33 lbs
• Corticosteroid use
• 4 stair climb ≤ 8 seconds

Key Exclusion

• Any behaviour or mental issue that will affect the ability to complete the required study procedures
• Previously or currently taking medications like androgens or human growth hormone
• Use of a ventilator during the day
• Unable to have blood samples collected or receive an injection under the skin

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Phase 3 Study Investigating RG6206
WN40227: Countries Planned

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Phase 3 Study Investigating RG6206  
**WN40227: US sites**

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We would like to thank the patients and their families who take part in clinical trials

For more information about the ongoing RG6206 trial
Visit Clinicaltrials.gov
Q & A
Doing now what patients need next