The Anti-Myostatin Antibody SRK-439 Promotes Healthy Body Composition in Combination with GLP-1RAs in a Mouse Model of Obesity

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Melissa Fulham

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Maintaining weight loss is challenging



A Calorie restriction

B Appetite suppressing drug



Christoffersen, B.Ø., et al. Obesity (Silver Spring). 2022. PMID: 35333444

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Lean mass is reduced during weight loss regardless of intervention



Chaston, T. B., et al. Int J Obes. 2007. PMID: 17075583 Sargeant, J. A., et al. Endocrinol Metab. 2019. PMID: 31565876 Wilding J.P.H., et al. Diabetes Obes Metab. 2022. PMID: 35441470

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Muscle is critical for overall health



Increase basal metabolic rate (BMR)¹

Enhance glucose homeostasis² and better insulin sensitivity and lower risk of prediabetes³

Signal to other systems as an endocrine organ impacting overall health⁴

Reduce visceral fat⁵

Increase caloric expenditure post-exercise⁶

Increase bone density, strength, function, and longevity and decreased risk of injury and disability⁷⁻⁹

Aristizabal, J.C., et al. Eur J Clin Nutr. 2015.
 Lindegaard, B., et al. J Clin Endocrinol Metab. 2008.
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 Volpi, E., et al. Curr Opin Clin Nutr Metab Care.
 2004.

GLP-1RA withdrawal leads to weight regain and loss of cardiometabolic benefits

STEP 1 trial extension: Participants regained weight after semaglutide withdrawal

	² 68-week treatment phase			52-week off-treatment extension phase				I	0				
	Base	Baseline (week 0)				Week 68				Week 120			
	Semaglutide arm		Placebo arm		Semaglutide arm		Placebo arm		Semaglutide arm		Placebo arm		
	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean	
Body weight (kg), mean ± SD	228	105.6 ± 21.8	99	105.4 ± 25.6	228	87.5 ± 21.4	99	103.2 ± 25.6	197	99.0 ± 22.5	93	105.5 ± 26.2	
Body mass index (kg/m²), mean ± SD	228	37.6 ± 7.0	99	37.7 ± 8.0	228	31.2 ± 7.2	99	36.9 ± 8.0	197	35.0 ± 7.1	93	37.6 ± 8.2	
Systolic blood pressure (mmHg), mean ± SD	228	129 ± 14	99	130 ± 15	228	121 ± 14	99	128 ± 13	197	131 ± 15	93	132 ± 15	
Diastolic blood pressure (mmHg), mean ± SD	228	81 ± 10	99	80 ± 10	228	78 ± 11	99	79 ± 9	197	82 ± 10	93	81 ± 11	
HbA1c (%), mean ± SD -1	228 5.7 ± 0.3 99 5.7 ± 0.3 227 5.2 ± 0.3 98 5.5 ± 0.4 196 5.6 ± 0.4 196									5.6 ± 0.3	91	5.7 ± 0.5	
-1	18 - [— Placebo arm				+		1	1				
0 4 8 12 16 20 28 36 44 52 60 68 75 80 104 120 Time since randomization (wk)													

Wilding J.P.H., et al. Diabetes Obes Metab. 2022. PMID: 35441470

Can we mitigate weight regain and loss of metabolic benefit?

- This is not unique to GLP-1RAs; weight is regained with all weight loss methods
- How can we maintain or increase lean mass during weight loss?



 Mstn^{-/-} mice

Selectively targeting myostatin is challenging but critical

- Developing an anti-myostatin agent is difficult due to a high degree of similarity with Activin A and GDF-11
- Selectively targeting myostatin is important:
 - ActRIIB/Activin A/GDF11 KO mice all have perinatal lethality due to developmental defects in multiple organ systems
 - GDF11 LOF variants are associated with severe craniofacial, neurological, and skeletal phenotypes in humans
 - Inhibition of ActRII or Activin A in adult humans is associated with several health risks, including significant reduction in follicle-stimulating hormone levels



Oh, S.P. and Li, E. *Genes Dev*. 1997.; Matzuk, M. M., *et al. Nature*. 1995.; McPherron, A.C., *et al. Nat Genet*. 1999.; Garito, T., *et al. Clin Endocrinol (Oxf)*. 2018.; Bloise, E. *et al. Physiol Rev*. 2019.; Ravenscroft, T.A., *et al.* Genet Med. 2021.

SRK-439 binds to pro- and latent myostatin and enables muscle growth



- SRK-439 binds to pro- and latent myostatin and blocks the conversion of the latent form to mature myostatin
- By inhibiting the release of mature myostatin, SRK-439 prevents myostatin from interacting with receptors which results in the inhibition of signaling and promotes muscle growth



ActRIIB

Skeletal Muscle

Muscle growth \downarrow

Muscle atrophy \uparrow

SRK-439 is exquisitely selective for pro-and latent-myostatin



Inhibiting myostatin, a negative regulator of muscle mass, during GLP-1RAinduced weight loss will maintain lean mass and result in a favorable body composition after GLP-1RA withdrawal

Administering SRK-439-mlgG1 to DIO mice during semaglutide treatment and after discontinuation



Semaglutide discontinuation caused weight regain



- Chow + IgG
- HFD + IgG
- ← HFD + IgG +Sema
- ---- HFD + 439 + Sema

SRK-439 maintained lean mass in combination with semaglutide administration



Absolute Lean Mass

- Chow + IgG
- + HFD + IgG
- --- HFD + IgG +Sema

SRK-439 increased relative lean mass and skeletal muscle weight



SRK-439 administration in combination with and after withdrawal of semaglutide results in lean mass composition similar to chow-fed animals

SRK-439 attenuated fat mass regain after discontinuation of semaglutide







- --- HFD + IgG +Sema
- ---- HFD + 439 + Sema

SRK-439 treatment improved body composition



SRK-439 administration in combination with and after withdrawal of semaglutide lowers percent fat mass and reduces adipose depot size

SRK-439 improved circulating metabolic biomarkers

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SRK-439 administration in combination with and after withdrawal of semaglutide reduces circulating leptin which confirms reduced adiposity

Summary

- Lean mass decreases during weight loss, regardless of the intervention
- Selectively inhibiting myostatin increases lean mass without the potential liabilities of nonselective targeting of the broader family
- SRK-439-mlgG1 administration prevented lean mass loss during semaglutide-induced weight loss and increased lean mass after semaglutide discontinuation
- SRK-439-mIgG1 administration resulted in lower body fat composition and lower circulating leptin during weight regain

SRK-439-mIgG1 maintains a healthy body composition during GLP-1RA-induced weight loss and subsequent regain following discontinuation

Scholar Rock, Inc.

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- SRK-439 Program Team
- Adam Fogel
- Ryan Frieler
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Thank you!

