

Trial design for the Phase 2 FORGE study evaluating apitegromab in adults with facioscapulohumeral muscular dystrophy

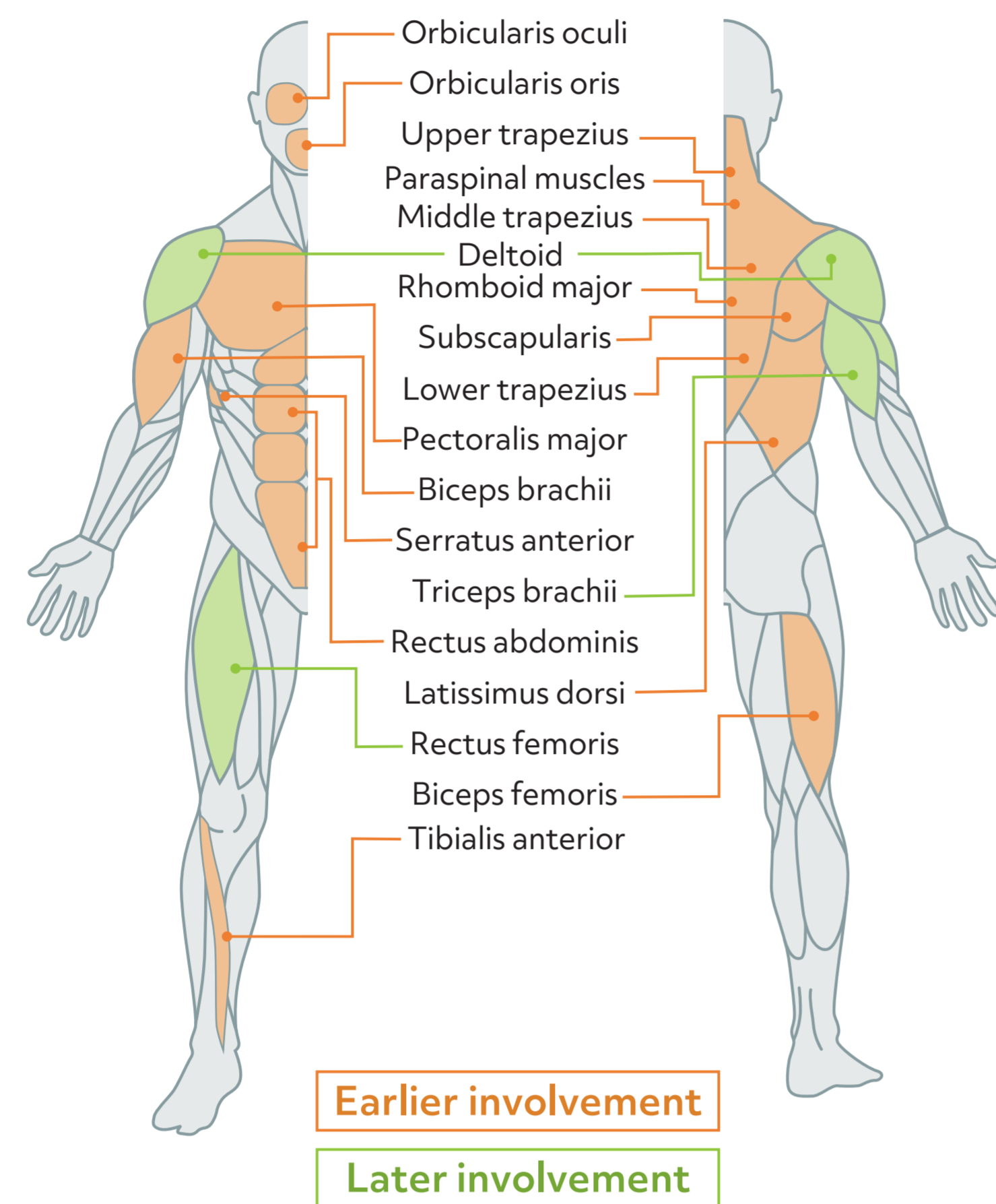
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INTRODUCTION

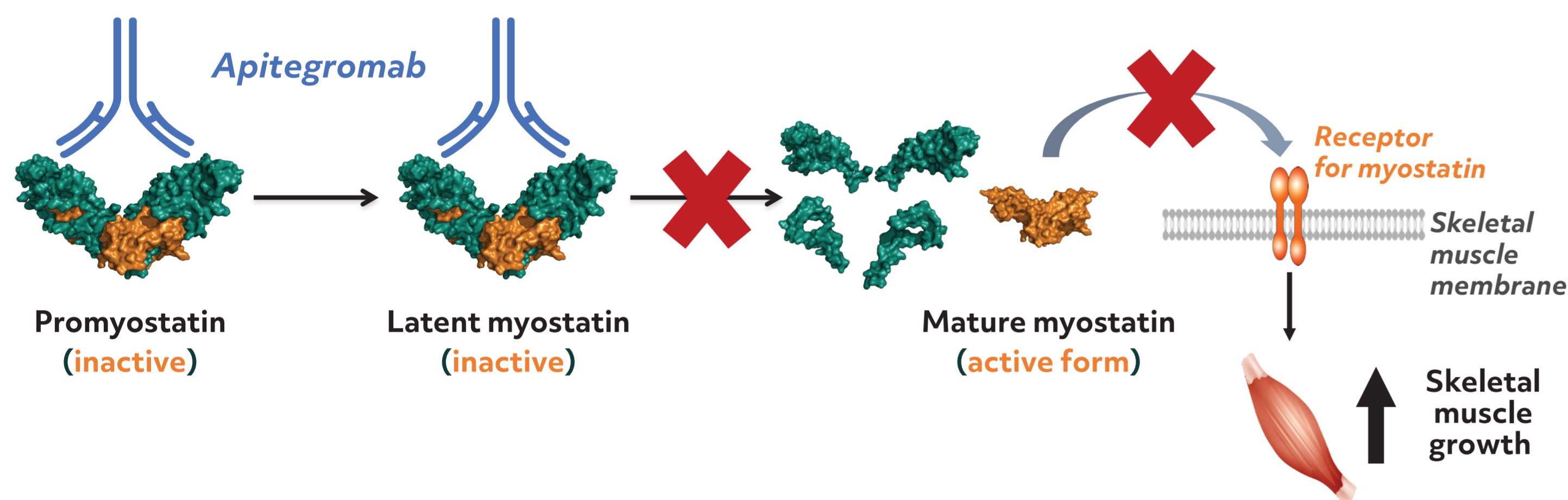
- Facioscapulohumeral muscular dystrophy (FSHD) is a rare primary myopathy characterized by progressive and often asymmetric weakness of the facial, shoulder, and lower limb muscles (**Figure 1**)^{1,2}
- Apitegromab is an investigational, fully human monoclonal antibody that inhibits the activation of mature myostatin, a negative regulator of muscle mass, by selectively binding with high affinity to promyostatin and latent myostatin (**Figure 2**)³⁻⁵
- In clinical studies for patients with spinal muscular atrophy (SMA) (Phase 2 TOPAZ, NCT03921528; Phase 3 SAPPHERE, NCT05156320), apitegromab was generally well tolerated and provided substantial motor function gains across a broad range of patients who were concurrently receiving survival motor neuron-targeted treatment⁵⁻⁷
- Preclinical studies of the apitegromab murine analog (muSRK-015) in a FLExD model of FSHD demonstrated significant increases in skeletal muscle mass, muscle force, and endurance⁸

Figure 1. Early and late skeletal muscle involvement in FSHD^{1,2}



FSHD, facioscapulohumeral muscular dystrophy. Modified from Banerji CRS, et al. *EMBO Mol Med.* 2021;13(8):e13695. Figure reused with permission under Creative Commons Attribution 4.0 International (CC BY 4.0) license.

Figure 2. Apitegromab mechanism of action³⁻⁵



OBJECTIVE

- The planned Phase 2 FORGE trial (NCT07435129) aims to assess the efficacy, pharmacokinetics (PK), pharmacodynamics (PD), safety, and tolerability of apitegromab monotherapy in ambulatory adults with FSHD

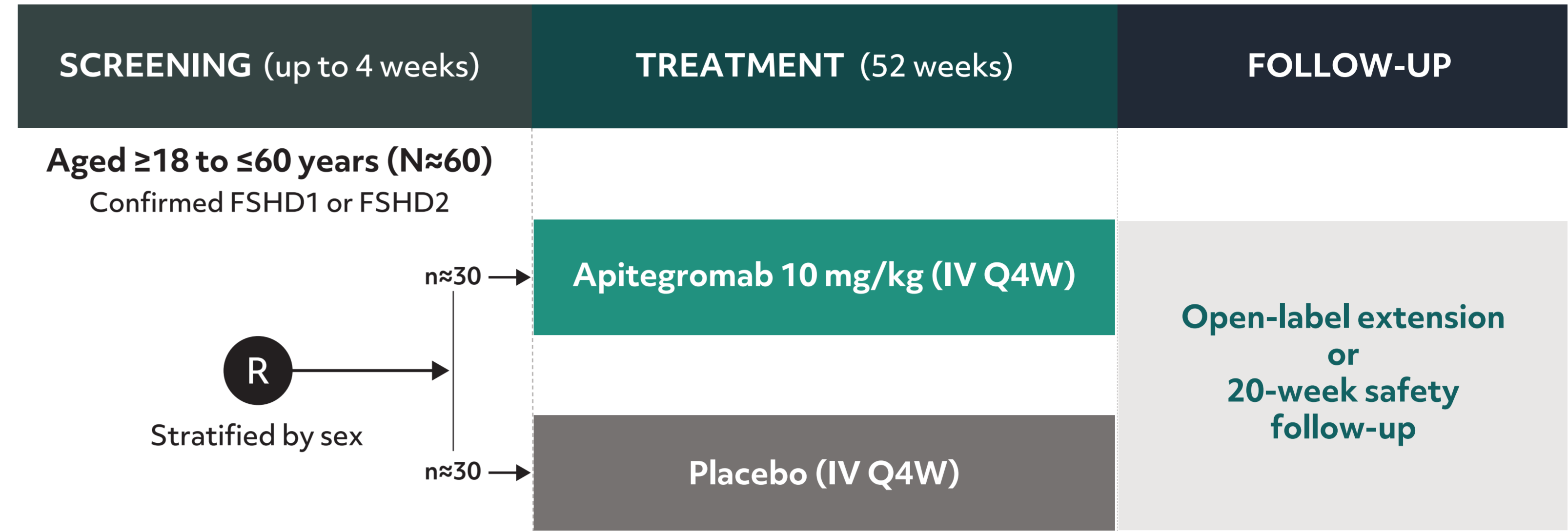
METHODS

- FORGE is a Phase 2, double-blind, randomized, placebo-controlled, multicenter trial of apitegromab treatment in ambulatory adults with FSHD (**Figure 3**)
 - This trial will include a screening period of up to 4 weeks and a 52-week treatment period (13 doses), followed by either participation in an open-label extension trial or a 20-week safety follow-up period
- Approximately 60 participants will be randomized 1:1 to receive 10 mg/kg apitegromab monotherapy or placebo by intravenous infusion every 4 weeks (Q4W)
 - The clinical dose of apitegromab 10 mg/kg Q4W is supported by clinical efficacy and safety data in SMA⁵ and PK/PD and exposure-response modeling in healthy participants and patients with SMA⁹⁻¹¹
- This trial is expected to be conducted across 20 sites in North America and Europe
- Key eligibility criteria include age ≥ 18 to ≤ 60 years, confirmed genetic diagnosis of FSHD1 or FSHD2, a Ricci clinical severity score of 1.5 to 3.0, and a baseline 10-meter walk/run test time of ≤ 5 seconds (**Table 1**)
- Primary, secondary, and select exploratory endpoints are listed in **Table 2**
- The second half of the study (Week 24 to Week 52) will include a standardized at-home strength training regimen

References

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Figure 3. Trial design



FSHD, facioscapulohumeral muscular dystrophy; IV, intravenous; Q4W, every 4 weeks; R, randomization.

Table 1. Key eligibility criteria

Key inclusion criteria	Key exclusion criteria
<ul style="list-style-type: none"> ✓ Male or female participants aged ≥ 18 to ≤ 60 years ✓ Genetically confirmed diagnosis of FSHD1 or FSHD2 ✓ Clinical severity score of 1.5 to 3.0 (Ricci score: range 0-5) ✓ Baseline 10MWRT time ≤ 5 seconds 	<ul style="list-style-type: none"> ✗ Any medical condition, clinically significant laboratory result, or ECG value that may compromise safety, interfere with study compliance, or confound the interpretation of results ✗ Current or prior use of anabolic steroids, growth hormones, GLP-1 receptor agonists, or other substances with known effects on muscle ✗ Use of systemic corticosteroids or therapies with potentially significant muscular or neuromuscular effects within 60 days of screening ✗ Previous treatment with apitegromab or with other antimyostatin therapies, including activin receptor antagonists ✗ Treatment with other investigational drugs in a clinical study within 3 months or 5 half-lives, whichever is longer, before screening

10MWRT, 10-meter walk/run test; ECG, electrocardiogram; FSHD, facioscapulohumeral muscular dystrophy; GLP-1, glucagon-like peptide-1.

Table 2. Primary, secondary, and select exploratory endpoints

Primary endpoint	Secondary endpoints	Select exploratory endpoints
<ul style="list-style-type: none"> • Percent change from baseline in total LMV (as measured by full-body MRI) at Week 52 	<ul style="list-style-type: none"> • Percent change from baseline in total LMV (as measured by full-body MRI) at Week 24 • Change from baseline in additional muscle parameters at Week 24 and Week 52 • Serum concentrations of apitegromab (PK) and total latent myostatin (PD) • Incidence of AEs and SAEs • Incidence of antidrug antibodies 	<ul style="list-style-type: none"> • Change from baseline in QMT • Change from baseline in RWS • Change from baseline in FSHD-COM

AE, adverse event; FSHD-COM, Facioscapulohumeral Muscular Dystrophy-Composite Outcome Measure; LMV, lean muscle volume; MRI, magnetic resonance imaging; PD, pharmacodynamics; PK, pharmacokinetics; QMT, quantitative muscle testing; RWS, reachable workspace; SAE, serious adverse event.

CONCLUSIONS

- The Phase 2 FORGE trial will be the first to evaluate apitegromab, a muscle-targeted treatment, in adults with FSHD

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Disclosures

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