



photon

Extension

Three-Year Outcomes of Aflibercept 8mg in Diabetic Macular Edema: Safety and Efficacy Results From the PHOTON Extension Study

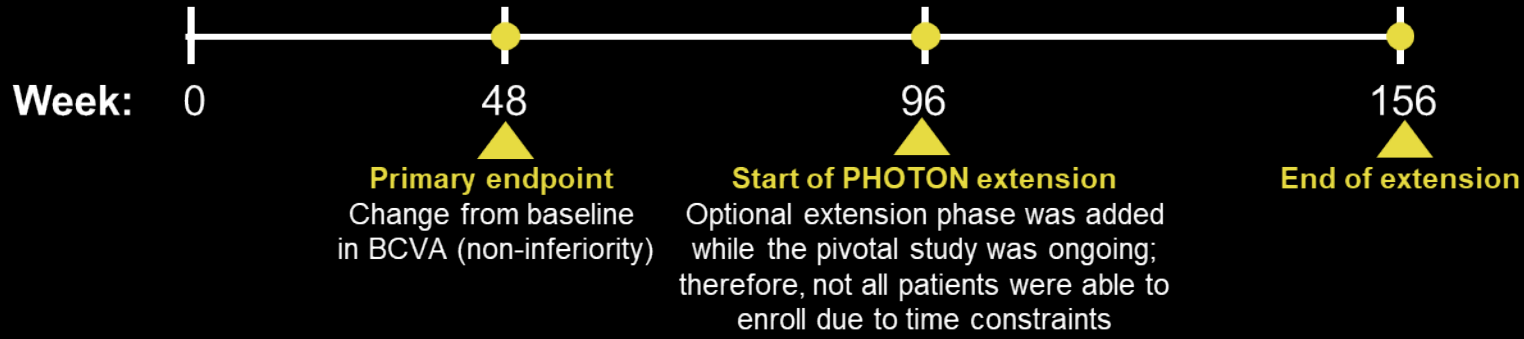
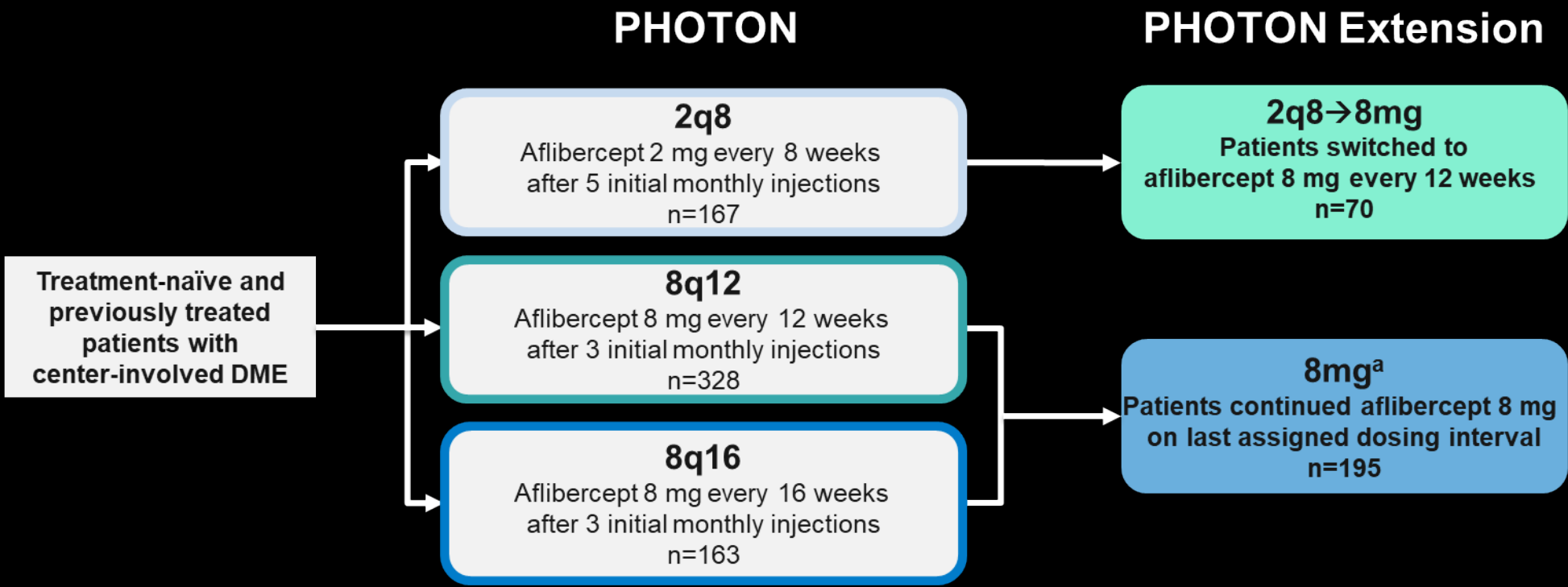
W. Lloyd Clark, MD,¹ on behalf of the PHOTON extension study investigators

¹Palmetto Retina, West Columbia, SC, USA

Disclosures

- W. Lloyd Clark has received consultant fees from Genentech and Regeneron Pharmaceuticals, Inc; research funds from Genentech; lecturer fees from Bayer, Genentech, and Regeneron Pharmaceuticals, Inc; and travel support from Bayer, Genentech, and Regeneron Pharmaceuticals, Inc.
- This study was sponsored by Regeneron Pharmaceuticals, Inc. (Tarrytown, NY) and co-funded by Bayer AG (Leverkusen, Germany). The sponsors participated in the design and conduct of this study, data interpretation, and preparation of this presentation
- This study includes research conducted on human patients. Institutional Review Board approval was obtained prior to initiation of the study

PHOTON Extension Study Design



^aPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study. BCVA, best-corrected visual acuity; DME, diabetic macular edema.

PHOTON Extension Study Design

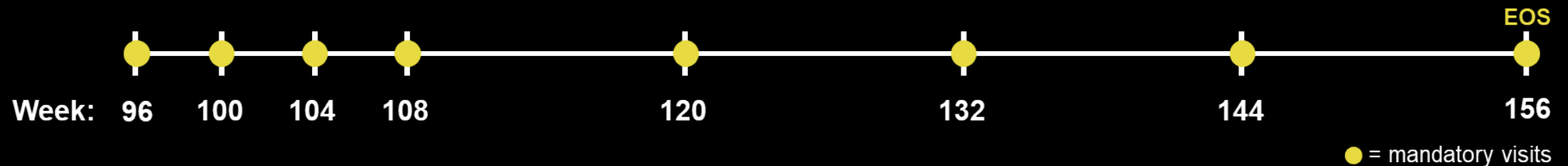
photon

Extension

2q8→8mg
n=70

8mg^a
n=195

- All patients received aflibercept 8 mg through Week 156
 - Patients who were treated with aflibercept 2q8 were switched to aflibercept 8 mg at Week 96 and immediately assigned to a 12-week dosing interval
- Mandatory visits were every 4 weeks through Week 108, then were quarterly through Week 156
- Dosing visits were scheduled as necessary based on individual dosing interval assignment



E-DRM: Interval Shortening During Year 3

- Patients were assessed at **any visit** beginning at Week 100
- **Criteria for interval shortening:**
 - >10-letter loss in BCVA from N-BL due to persistent or worsening DME **AND** >50- μ m increase in CRT from N-BL
 - OR**
 - \geq 15-letter loss from N-BL due to worsening DME
- Dosing intervals shortened by **2-week** increments
- Minimum interval was Q8

E-DRM: Interval Extension During Year 3

- Patients were assessed at **dosing visits** beginning at Week 100
- **Criteria for interval extension:**
 - <5-letter loss in BCVA from N-BL **AND**
 - CRT <300 μ m (or <320 μ m on Spectralis)
- Dosing intervals extended by **2-week** increments
- Maximum interval was Q24

^aPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study.
N-BL defined as an average of values from Week 84, 88, and 92.
CRT, central retinal thickness; EOS, end of study; N-BL, new baseline.

Patient Disposition and Baseline Characteristics

	PHOTON	PHOTON Extension		
	Total	2q8→8mg	8mg ^a	Total
Patients entering PHOTON study (FAS)	658	-	-	-
Patients entering PHOTON extension (eFAS)	-	70	195	265
Completion rate at Week 96 (%)	80.9	100	100	100
Completion rate at Week 156 (%)	-	82.9 ^b	77.9 ^b	79.2 ^b
Age (years)	62.3 (10.4)	62.7 (8.5)	61.5 (11.3)	61.8 (10.7)
Female (%)	39.1	40.0	36.4	37.4
Race (%)				
White	71.6	65.7	77.4	74.3
Black or African American	9.4	8.6	6.7	7.2
Asian	15.3	21.4	14.4	16.2
Other ^c	3.7	4.3	1.5	2.3
Hemoglobin A1c (%)	8.0 (1.5)	8.2 (1.4)	7.9 (1.5)	8.0 (1.5)
History of hypertension (%)	78.1	70.0	77.4	75.5
BCVA (ETDRS letters)	62.5 (10.9)	61.6 (11.3)	62.8 (11.1)	62.5 (11.1)
CRT (µm)	454.0 (129.5)	472.3 (160.7)	460.2 (137.7)	463.4 (143.9)
Prior treatment for DME (%)	43.8	51.4	43.1	45.3

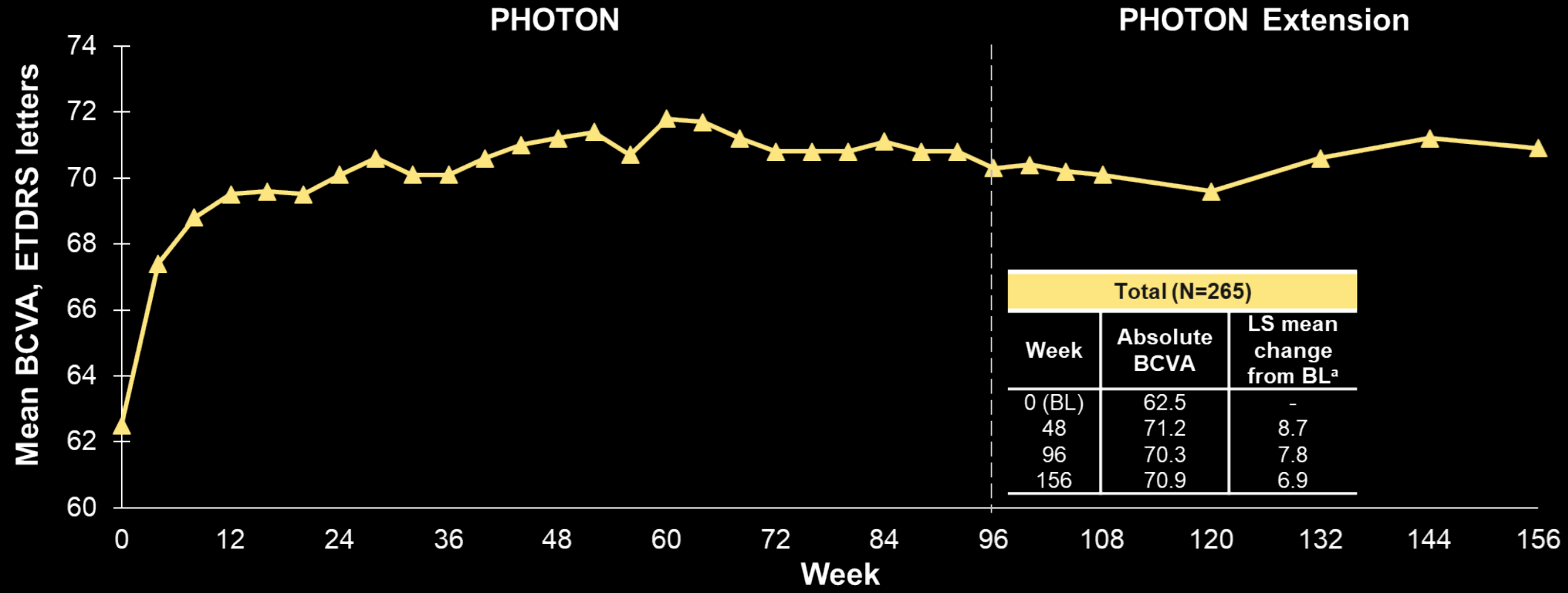
^aPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study.

^bCompletion rate for PHOTON extension study based on eFAS. ^cOther includes American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, multiple races, and unreported race. Data are mean (SD) unless otherwise indicated.

eFAS, PHOTON extension full analysis set; ETDRS, Early Treatment Diabetic Retinopathy Study; FAS, full analysis set.

Mean BCVA Through Week 156

All Patients in PHOTON Extension



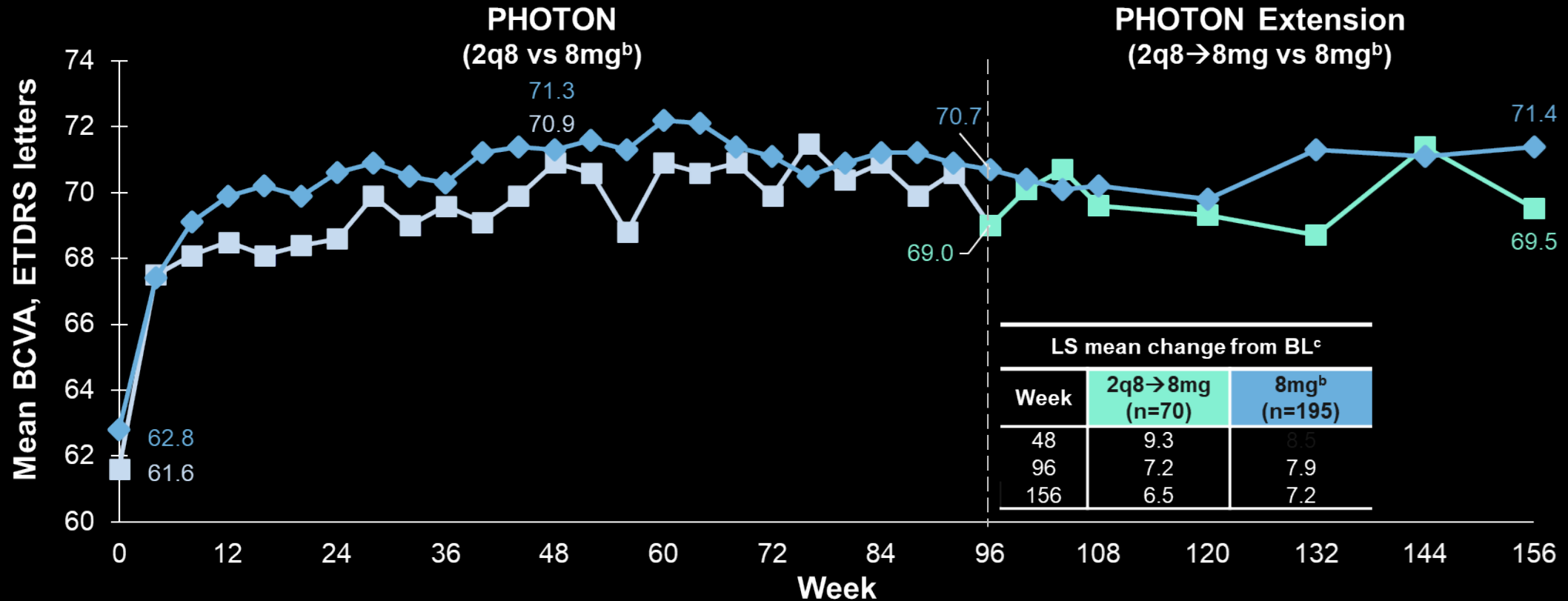
eFAS, observed cases.


^aLS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit.

BL, baseline; CI, confidence interval; LS, least square; MMRM, mixed model for repeated measurements.

Mean BCVA^a Through Week 156


2q8 → 8mg^b and 8mg^b Patients



 Mean number of injections from baseline to Week 96^d

2q8: 13.8

8mg^b: 8.9

 Mean number of injections from Week 96 to Week 156^d

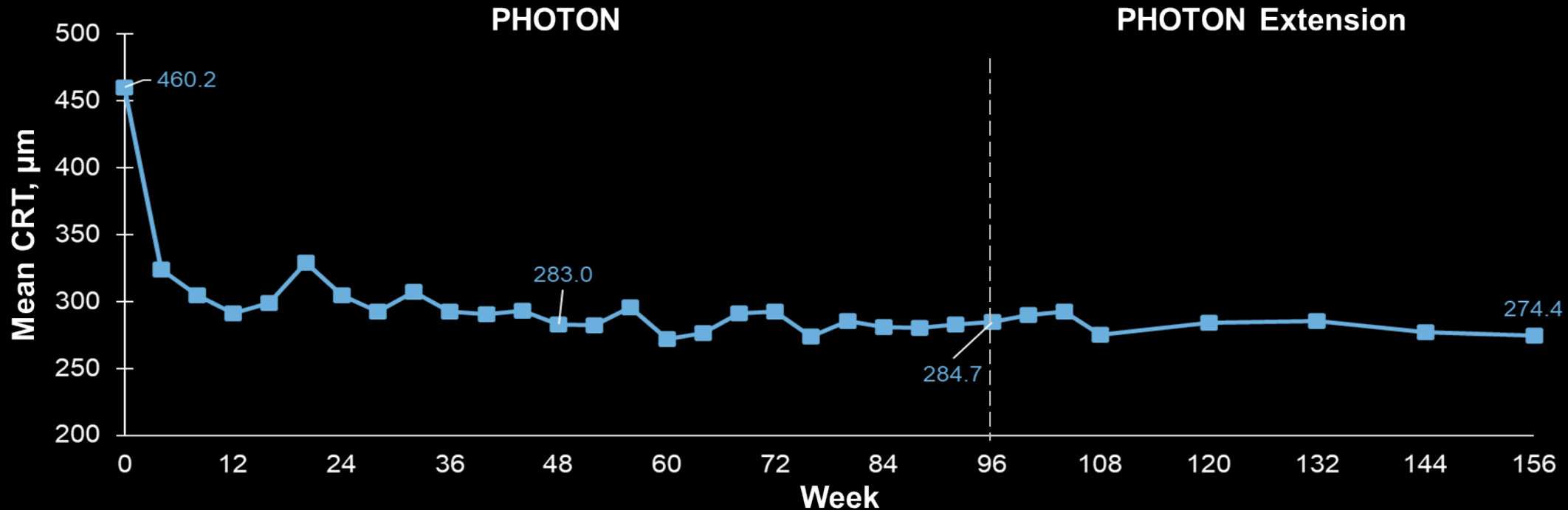
2q8 → 8mg: 4.4

8mg^b: 3.3

^aeFAS, observed cases. ^bPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study. ^cLS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit. ^deFAS.

Mean CRT Through Week 156

8mg^a Patients

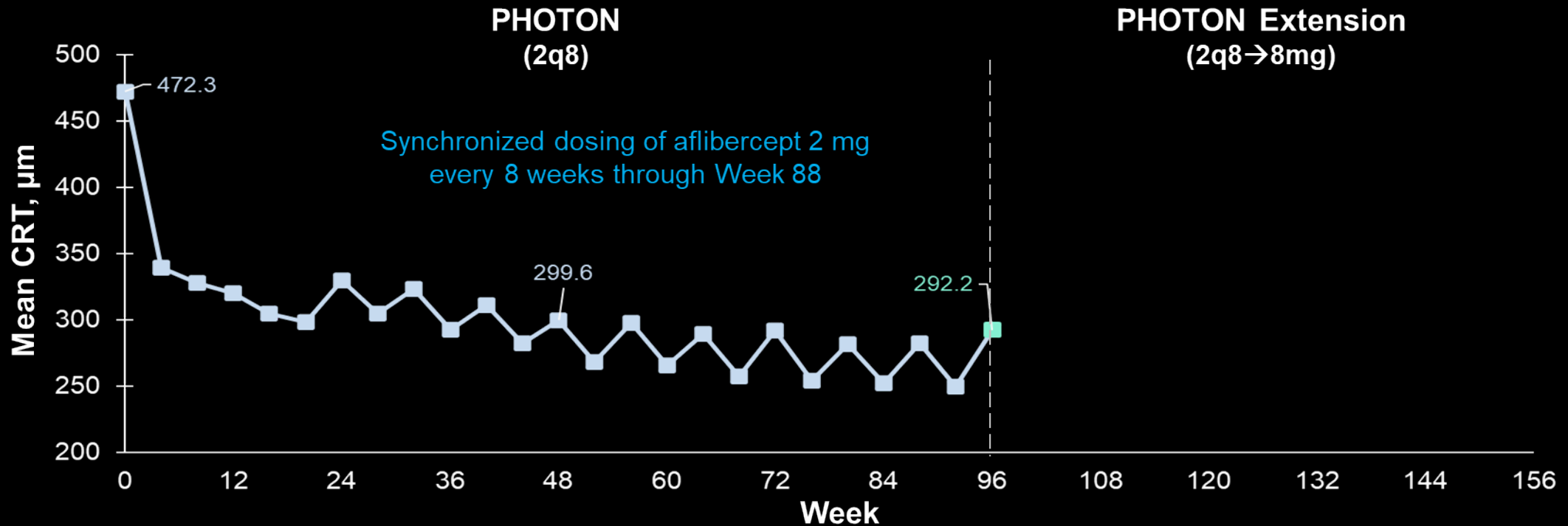


	LS mean change from baseline (µm)		
	Week 48	Week 96	Week 156
8mg ^a (n=195)	-180.6	-178.4	-192.4

^aPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study. LS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit.
eFAS, observed cases.

Mean CRT Through Week 156

2q8 → 8mg Patients



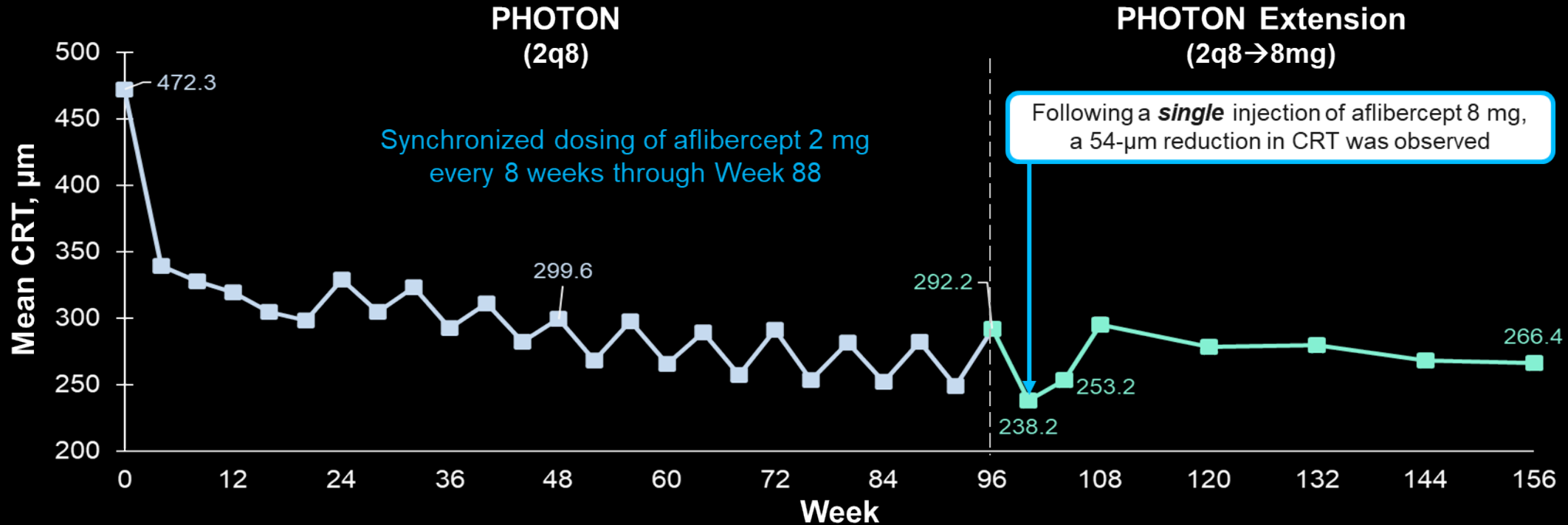
	LS mean change from baseline (µm)	
	Week 48	Week 96
2q8 → 8mg (n=70)	-161.7	-169.7

eFAS, observed cases.

LS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit.

Mean CRT Through Week 156

2q8 → 8mg Patients



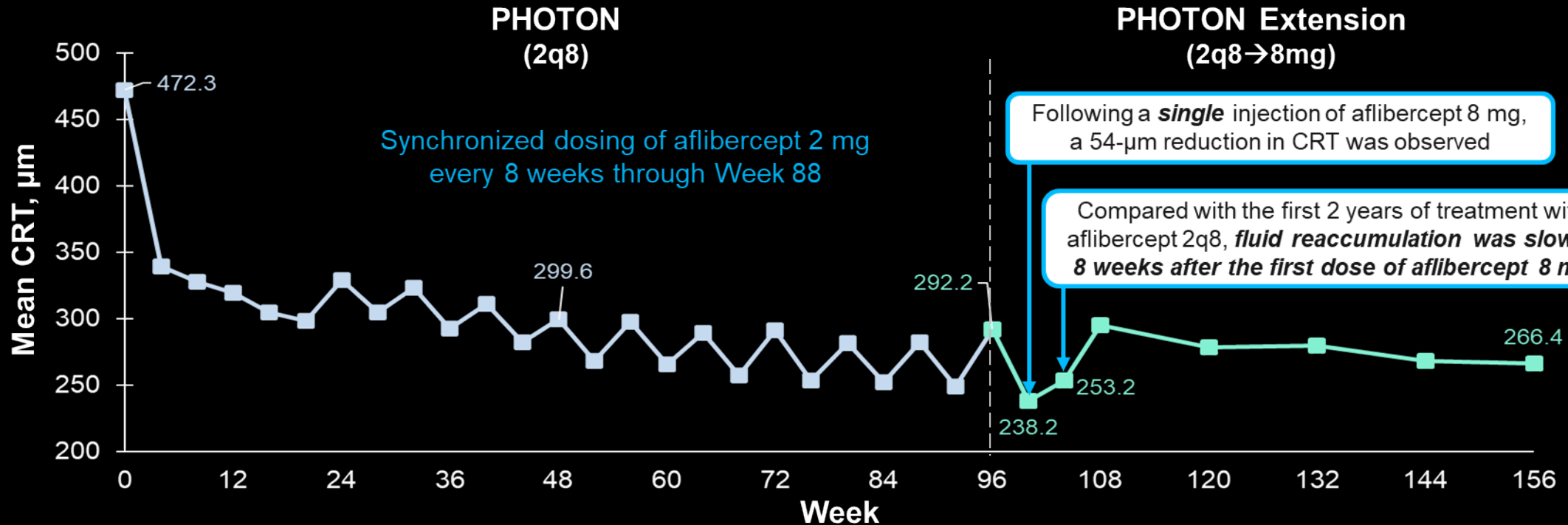
	LS mean change from baseline (μm)	
	Week 48	Week 96
2q8 → 8mg (n=70)	-161.7	-169.7

eFAS, observed cases.

LS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit.

Mean CRT Through Week 156

2q8 → 8mg Patients



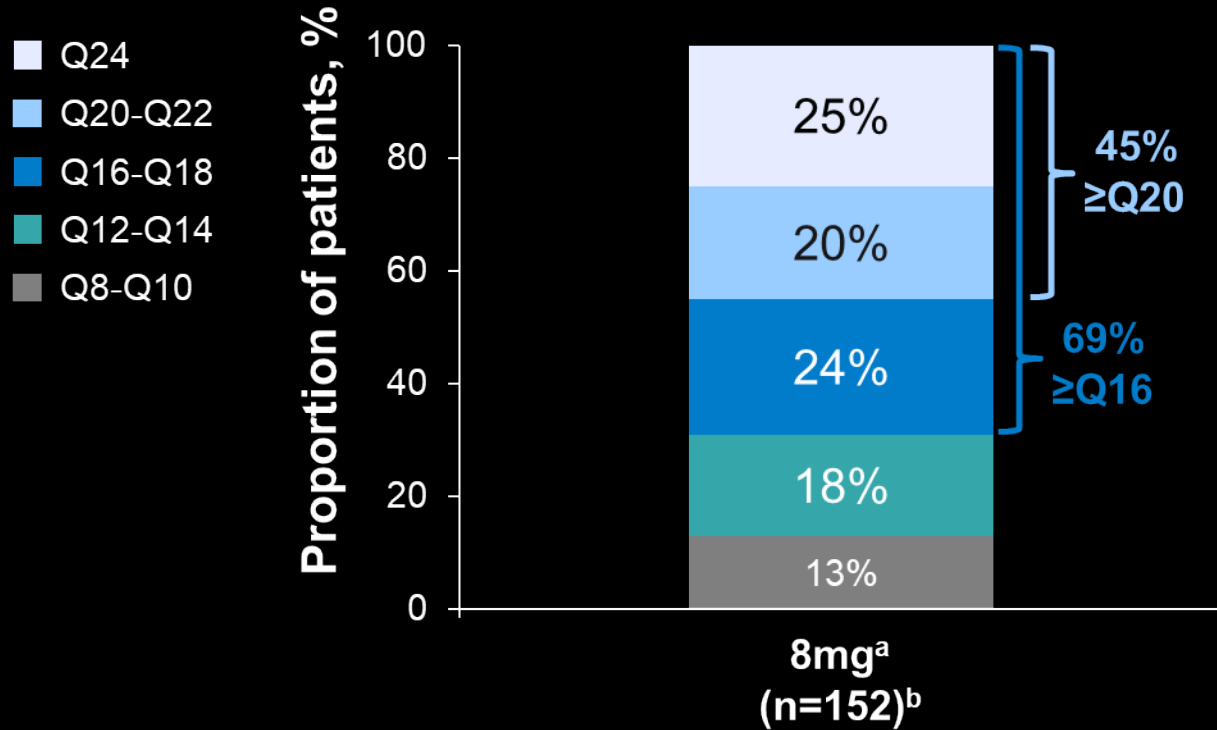
	LS mean change from baseline (µm)		
	Week 48	Week 96	Week 156
2q8 → 8mg (n=70)	-161.7	-169.7	-197.4

Numerically greater reduction in CRT was observed at Week 156 after switching to aflibercept 8 mg compared with aflibercept 2q8

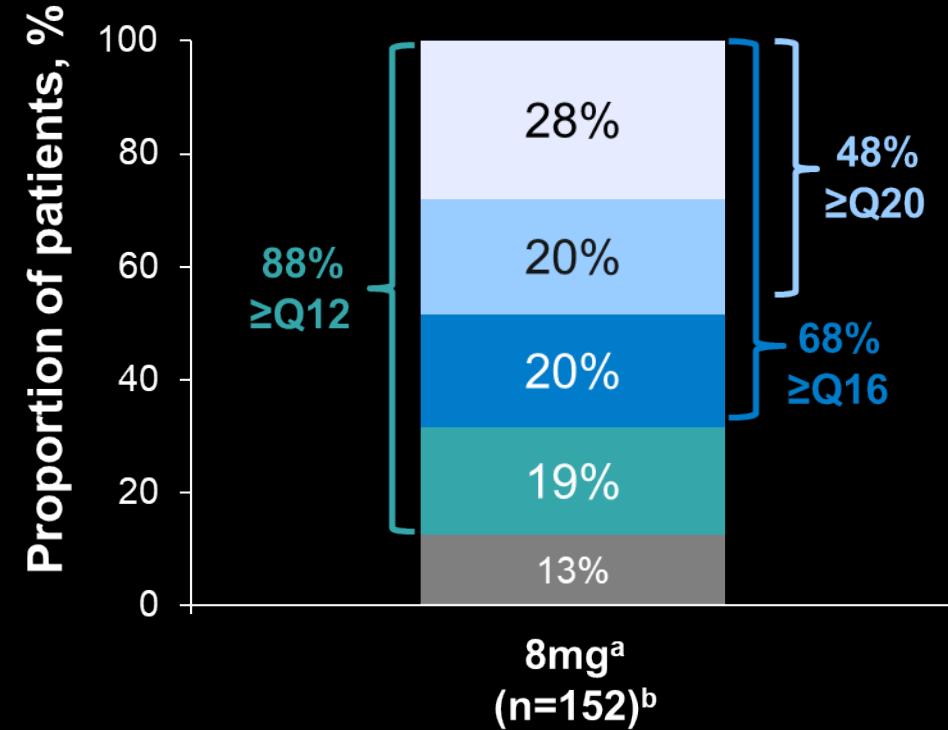
eFAS, observed cases. LS mean values were generated using MMRM and a weighting scheme based on observed margins, with baseline BCVA measurement as a covariate, treatment group, visit and the stratification variables (geographic region [Japan vs rest of the world]; baseline CRT [$<400 \mu\text{m}$ vs $\geq 400 \mu\text{m}$], prior treatment for DME (per EDC) [yes vs. no]) as fixed factors, and terms for the interaction between baseline and visit and the interaction between treatment and visit.

Majority of Aflibercept 8 mg-treated Patients Achieved Extended Dosing Intervals at Week 156

Last Completed Dosing Interval



Last Assigned Dosing Interval



2q8→8mg group:
83% of patients had a last assigned dosing interval of ≥12 weeks at Week 156

^aPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study.

^beFAS, patients completing Week 156.

Values may not add up to 100% due to rounding.

Ocular and Non-ocular Safety Through Week 156^a

	2q8→8mg	8mg ^b	Total
N (eSAF)	70	195	265
Ocular AEs, n (%) ^c	37 (52.9)	108 (55.4)	145 (54.7)
Ocular SAEs, n (%) ^c	3 (4.3)	4 (2.1)	7 (2.6)
Intraocular inflammation, n (%) ^c	1 (1.4)	3 (1.5)	4 (1.5)
Iritis	0	2 (1.0)	2 (0.8)
Iridocyclitis	1 (1.4)	0	1 (0.4)
Uveitis	1 (1.4)	0	1 (0.4)
Endophthalmitis	0	1 (0.5)	1 (0.4)
Non-ocular SAEs, n (%) ^c	24 (34.3)	58 (29.7)	82 (30.9)
APTC events, n (%) ^c	5 (7.1)	14 (7.2)	19 (7.2)
Deaths, n (%) ^d	2 (2.9)	10 (5.1)	12 (4.5)

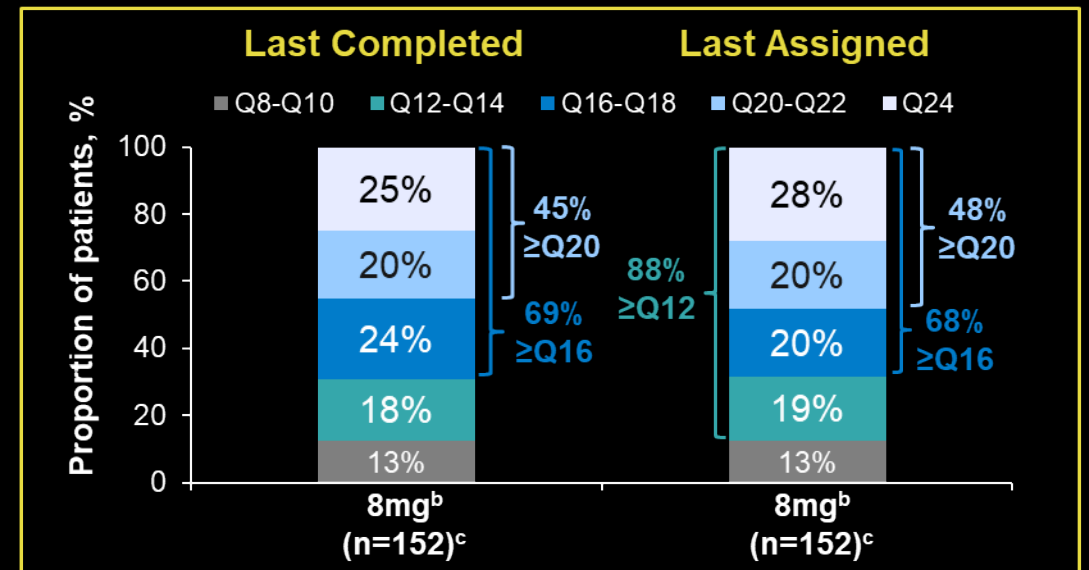
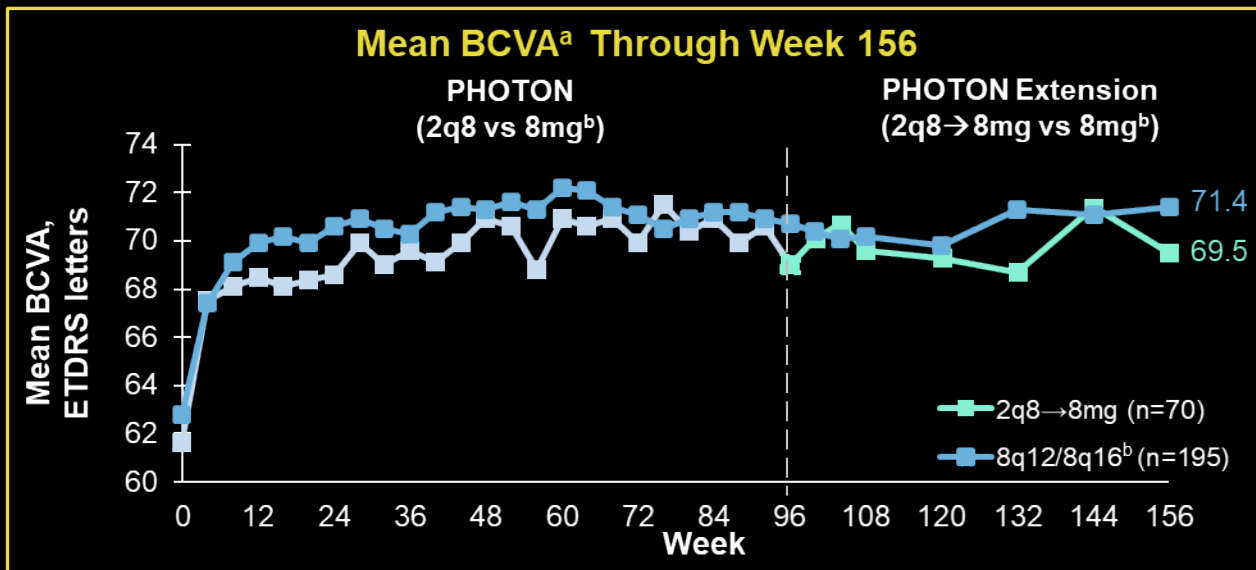
- Ocular TEAEs reported in >4% of all patients included cataract, vitreous floaters, vitreous detachment, and diabetic retinal edema
- No cases of occlusive vasculitis were reported

^aCumulative events in the study eye from baseline through Week 156. ^bPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study. ^cTreatment emergent. ^dAll events.

AE, adverse event; APTC, Anti-Platelet Trialists' Collaboration; SAE, serious adverse event; eSAF, PHOTON extension safety analysis set.

PHOTON Extension: Key Week 156 Results

- Patients in the **8mg group** maintained visual and anatomic improvements achieved in the first 2 years, with the majority of patients on extended dosing intervals
 - 45% completed ≥ 20 -week dosing intervals and 48% had a last assigned dosing interval of ≥ 20 weeks at Week 156
- In the **2q8 \rightarrow 8mg group**, visual and anatomic improvements achieved with fixed 2q8 dosing were maintained with aflibercept 8 mg
 - 83% of patients achieved ≥ 12 -week dosing intervals at Week 156
 - **Longer duration of action with aflibercept 8 mg** vs 2 mg was **further supported by slower fluid reaccumulation** following the first aflibercept 8-mg injection
- No new safety signals were reported with aflibercept 8 mg through Week 156



^aeFAS, observed cases.

^bPatients who were randomized to the 8q12 or 8q16 groups at the beginning of the PHOTON study and continued treatment with aflibercept 8 mg through the PHOTON extension study.

^ceFAS, patients completing Week 156.