

Intraocular Pressure Outcomes With Aflibercept 8 mg and 2 mg in Patients With Diabetic Macular Edema Through Week 96 of the Phase 2/3 PHOTON Trial

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Disclosures



DME

- Dr. Grewal is a consultant for Apellis, Priovant, Zeiss, Astellas, Regeneron Pharmaceuticals, Inc., and Roche
- The PHOTON study was sponsored by Regeneron Pharmaceuticals, Inc. (Tarrytown, New York) and co-funded by Bayer AG (Leverkusen, Germany). This analysis was funded by Regeneron Pharmaceuticals, Inc. (Tarrytown, New York). The sponsors participated in the design and conduct of this analysis, interpretation of the data, and preparation of this presentation
- Study disclosures: This study includes research conducted on human patients. Institutional review board approval was obtained prior to study initiation
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Background



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• As aflibercept 8 mg is administered in a 70-µL injection volume versus a 50-µL injection volume for aflibercept 2 mg, the potential effect of a higher injection volume on IOP should be further explored

This analysis evaluated IOP and glaucoma-related outcomes in eyes receiving aflibercept 8 mg or 2 mg for DME through 96 weeks

PHOTON Study Design



DME

Multicenter, randomized, double-masked study in patients with DME^a Randomized 1 (2q8) : 2 (8q12) : 1 (8q16)

2q8
Aflibercept 2 mg every 8 weeks after 5 initial monthly injections (50 μL) n=167

8q12 8 mg every 12 weeks after 3 initial monthly injections (70 μL) n=328 8q16 8 mg every 16 weeks after 3 initial monthly injections (70 μL) n=163

Fellow eyes could receive aflibercept 2 mg at the discretion of the investigator

Primary endpoint at Week 48
Mean change in BCVA (non-inferiority)

End of study at Week 96 with optional 1-year extension through Week 156

Methods



IOP Assessment in the PHOTON Trial

- Bilateral IOP was measured at all study visits; the same method of measurement was used in each patient throughout the study^a
 - On days when the study drug was administered, sites were permitted to follow their usual post-injection monitoring routine. The study protocol recommended that IOP be measured at approximately 30 minutes post-dose

Post Hoc Analysis

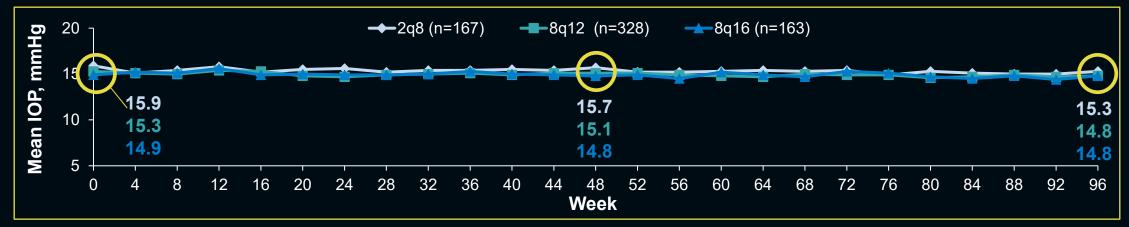
- IOP outcomes for study eyes and fellow eyes in the safety analysis set were evaluated through Week 96
- In this analysis, fellow eyes were grouped based on study eye randomization. Both untreated and treated (only aflibercept 2 mg was permitted) fellow eyes were included
 - Through Week 96, fellow eye injections with aflibercept 2 mg were reported in 70.1%, 67.1%, and 67.5% of patients in the 2q8, 8q12, and 8q16 study eye randomization groups, respectively

Mean Pre-Dose IOP Values in Study and Fellow Eyes Were Similar Through Week 96

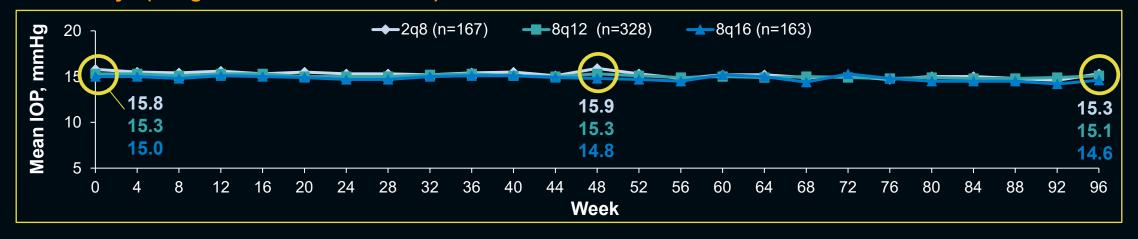
photon

DME

Study Eye



Fellow Eye (2-mg Treated and Untreated)

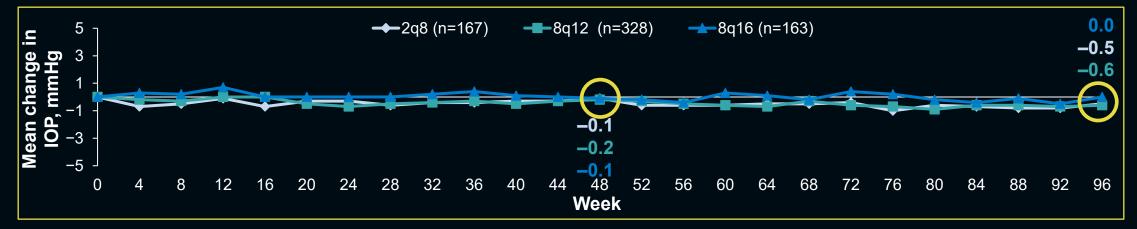


Mean Change in Pre-Dose IOP Values in Study and Fellow Eyes Were Similar Through Week 96

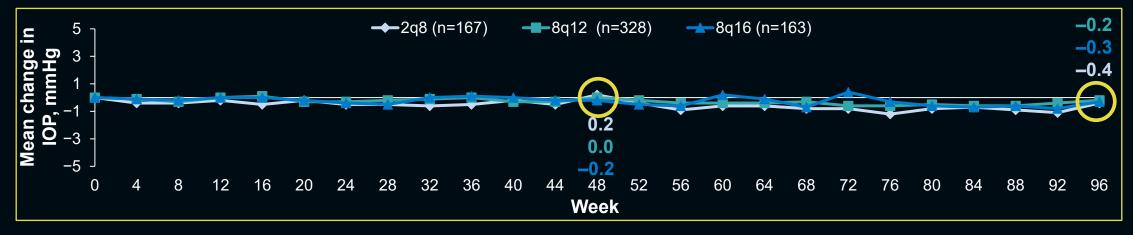


DME

Study Eye



Fellow Eye (2-mg Treated and Untreated)

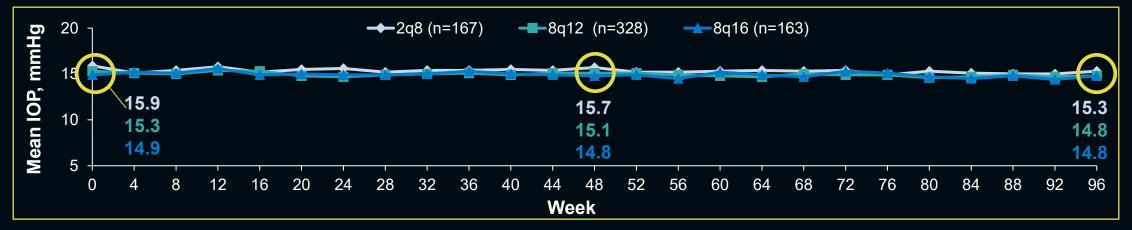


Mean Pre-Dose IOP Values in Study and Untreated Fellow Eyes Were Similar Through Week 96

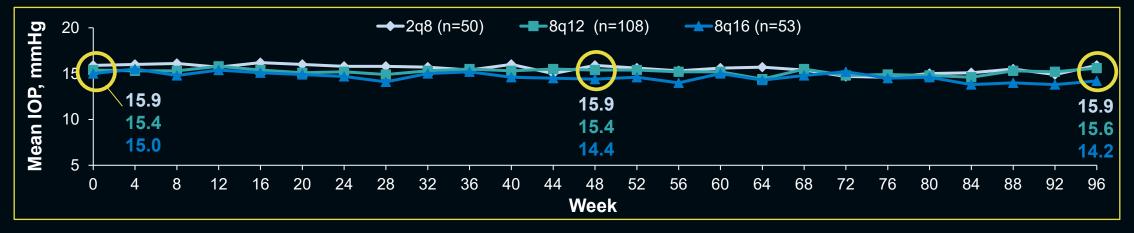
photon

DME

Study Eye



Fellow Eye (Untreated)

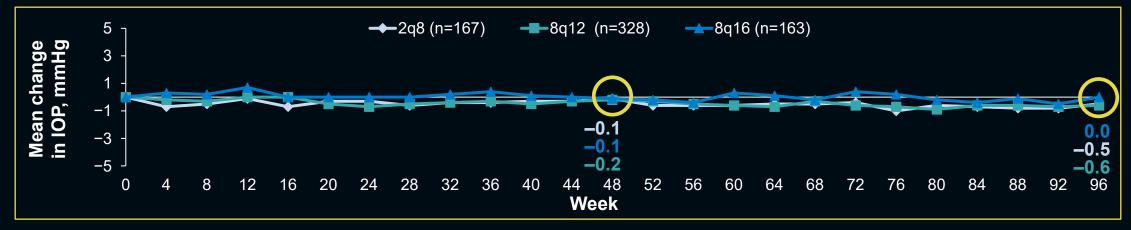


Mean Change in Pre-Dose IOP Values in Study and Untreated Fellow Eyes Were Similar Through Week 96

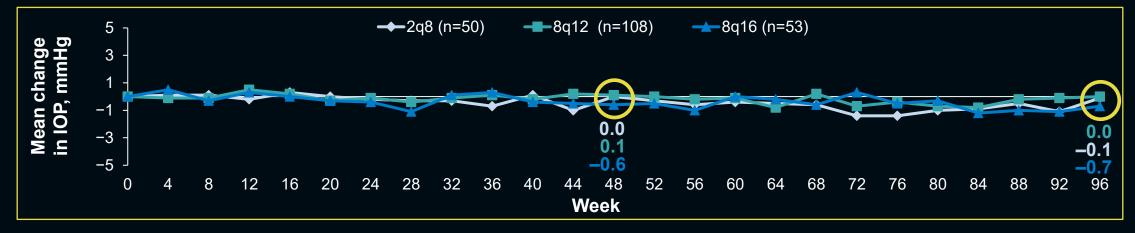


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Study Eye



Fellow Eye (Untreated)



Cumulative Incidence of Patients Meeting IOP Criteria Through Week 96



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Pre-dose IOP ≥25 mmHg at 2 consecutive visits, %
Pre-dose IOP ≥30 mmHg at any visit, %

Study Eye			
2q8 (n=167)	8q12 (n=328)	8q16 (n=163)	
0.0	0.0	0.7	
0.0	0.7	0.0	

Fellow Eye ^a		
2-mg Treated (n=447)	Untreated (n=211)	
0.9	0.5	
0.3	0.5	

Safety analysis set.

Kaplan-Meier methodology was used to generate the data. If an assessment was missing at a specific visit, the visits preceding and following this visit were treated as consecutive visits. Eyes were counted only once in this analysis.



2q8

Study Eye

8q12

8q16



DME

(n=167)(n=328)(n=163)IOP ≥35 mmHg pre- or post-injection (1.2)(0.6)(0.0)

Fellow Eye ^a			
2q8	8q16		
(n=167)	(n=163)		
0	1	0	
(0.0)	(0.3)	(0.0)	

at any visit, n (%)





DME

<u> </u>				
Glau	icom	ıa-re	lated	history:

Eyes with a medical history of glaucoma/ glaucoma suspect^b

AND/OR

Receiving ≥1 IOP-lowering agent^c at baseline, n (%)

Study Eye			
2q8	8q12	8q16	
(n=167)	(n=328)	(n=163)	
13	26	13	
(7.8)	(7.9)	(8.0)	

Fellow Eye ^a			
2q8	8q12	8q16	
(n=167)	(n=328)	(n=163)	
13	33	16	
(7.8)	(10.1)	(9.8)	

The proportions of eyes with glaucoma-related history were comparable across treatment groups

Safety analysis set.

^a2-mg treated and untreated fellow eyes, all study eye randomization arms combined.

^bMedical history of glaucoma/glaucoma suspect and/or receiving an IOP-lowering agent(s) at baseline: glaucoma/glaucoma suspect terms – glaucoma, open-angle glaucoma, borderline glaucoma, ocular hypertension, angle-closure glaucoma, glaucomatous optic disc atrophy, optic nerve cupping, trabeculoplasty, IOP increased.

[°]IOP-lowering agents: beta blocking agents, prostaglandin analogues, carbonic anhydrase inhibitors, or other antiglaucoma preparations; there was 1 patient on an IOP-lowering agent at baseline without a recorded history of glaucoma/glaucoma suspect.

IOP-Lowering Medications in Eyes Without Glaucoma-Related History Through Week 96

2q8



DME

	(n=167)	(n=328)	(n=163)
es with no glaucoma-related history,	154	302	150
%) ^b	(92.2)	(92.1)	(92.0)

Fellow Eye ^a			
2q8 8q12		8q16	
(n=167) (n=328)		(n=163)	
154	295	147	
(92.2)	(90.0)	(90.2)	

Eyes with no glaucoma-related history that received a new IOP-lowering agent(s) through Week 96, n/N (%)

5/154	8/302	5/150
(3.3)	(2.6)	(3.3)

Study Eye

8q12

8q16

3/154	6/295	2/147
(1.9)	(2.0)	(1.4)

The proportions of study and fellow eyes without glaucoma-related history requiring a new IOP-lowering agent were low and comparable across treatment groups

Safety analysis set.

^a2-mg treated and untreated fellow eyes, all study eye randomization arms combined.

bNo medical history of glaucoma/glaucoma suspect and not receiving an IOP-lowering agent(s) at baseline: glaucoma/glaucoma suspect terms – glaucoma, open-angle glaucoma, borderline glaucoma, ocular hypertension, angle-closure glaucoma, glaucomatous optic disc atrophy, optic nerve cupping, trabeculoplasty, intraocular pressure increased; IOP-lowering agents: beta blocking agents, prostaglandin analogues, carbonic anhydrase inhibitors, or other antiglaucoma preparations.

IOP-Lowering Medications in Eyes With Glaucoma-Related History Through Week 96



DME

2q8 (n=167)(n=328)(n=163)13 26 13 Eyes with glaucoma-related history, (7.8)(7.9)(8.0)

Fellow Eyea 8q12 **2q8** 8q16 (n=167)(n=328)(n=163)13 33 16 (7.8)(10.1)(9.8)

Eyes with glaucoma-related history that received a new IOP-lowering agent(s) through Week 96, n/N (%)

3/13	3/26	2/13
(23.1)	(11.5)	(15.4)

Study Eye

8q12

8q16

1/13	4/33	2/16
(7.7)	(12.1)	(12.5)

The proportions of study and fellow eyes with glaucoma-related history requiring a new IOP-lowering agent were low and comparable across treatment groups

Safety analysis set.

n (%)b

^a2-mg treated and untreated fellow eyes, all study eye randomization arms combined

bMedical history of glaucoma/glaucoma suspect and/or receiving an IOP-lowering agent(s) at baseline: glaucoma/glaucoma suspect terms – glaucoma, open-angle glaucoma, borderline glaucoma, ocular hypertension, angle-closure glaucoma, glaucomatous optic disc atrophy, optic nerve cupping, trabeculoplasty, IOP increased; IOP-lowering agents: beta blocking agents, prostaglandin analogues, carbonic anhydrase inhibitors, or other antiglaucoma preparations.

Anterior Chamber Paracentesis Procedures^a in All Patients Through Week 96



DME

Fellow Eyeb

8q12

(n=328)

(0.3)

8q16

(n=163)

(0.0)

2q8

(n=167)

(0.6)

	Study Eye	
2q8	8q12	8q16
(n=167)	(n=328)	(n=163)
0	3	1
(0.0)	(0.9)	(0.6)

	Study Eye	
2q8	8q12	8q16
(n=167)	(n=328)	(n=163)
0	3	1
(0.0)	(0.9)	(0.6)

Eyes receiving anterior chamber
paracentesis through Week 96, n (%)

- Two patients in the 8q12 group received 1 paracentesis in the study eye only
- One patient in the 8q12 group received multiple paracentesis in both the study and fellow eyes
- One patient in the 8q16 group received 1 paracentesis in the study eye only
- One patient in the 2q8 group received 1 paracentesis in the fellow eye only

Conclusions

- In patients with DME, pre-dose IOP values in the study eye were similar through Week 96 across treatment groups
- Pre-dose IOP values were similar through Week 96 between study eyes and fellow eyes (treated with aflibercept 2 mg and untreated)
- The proportions of study and fellow eyes with and without glaucoma-related history requiring IOP-lowering medications were low across all treatment groups through Week 96
- Only 4 study eyes receiving aflibercept 8 mg and 2 fellow eyes required anterior chamber paracentesis through Week 96

Despite a 70-μL injection volume, no long-term IOP adverse effects were seen through Week 96 with aflibercept 8 mg versus 2 mg (50 μL)