Programa Cooperación Farma-Biotech Neurociencias

NT-KO-003

A new oral treatment for Multiple Sclerosis based on a novel mechanism of action



Barcelona, 15 de febrero 2011





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1. Who we are

Neurotec Pharma S.L. is a spin-off of the University of Barcelona

founded in 2006 and located in the Bioincubator PCB-Santander

in the Barcelona Science Park, Spain.



* Current status after the capital increase (300K) made in December 2010









1.What we do

Our business model is to develop **new treatments for CNS diseases** related with inflammation and neurodegeneration from **its Preclinical Phase up to Clinical Phase II** with the aim to **increase their values and transferring** them to third parties by either commercialization or out licensing.



1. Organization chart



1. Our partnership

BAPS

D'Investigacions Biomèdiques August Pi i Sunyer

Hospital Clinico San Carlos

UNIVERSITAT DE BARCELONA

B

Ruhr-Universität

Bochum

Institut

all d'Hebron

ID

ADVISORY BOARD

Dr. Pablo Villoslada, Neuroimmunology Group, IDIBPAS, Barcelona.

Dr. Xavier Montalban, Hospital Vall d'Hebron, Barcelona.

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Dr. Ralph Gold, St. Josef-Hospital/Ruhr-University Bochum

Dra. Nicole Mahy, Neurochemistry Group, UB-IDIBAPS, Barcelona

Dr. Manuel Rodríguez, Neurochemistry Group, UB-IDIBAPS, Barcelona

Dr. Eduardo Cunchillos Innoqua, Barcelona





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JANUS DEVELOPMENTS Bridging the gap °





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2.a Objectives 2011-2013

Development of a **new oral treatment** for **MS** and **ALS** based on **reprofiling of the drug (NT-KO-003)** with **a novel mechanism of action**.

STRATEGIC OBJECTIVES:

- Successful completion of a clinical phase (IIa) in patients with MS.
- Successful completion ALS preclinical studies: CTA/Orphan drug application.



Co-development agreement December 2010





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2.b Therapeutic focus: MS

 \sqrt{MS} is a **common neurological disease of unknown aetiology** affecting more than 2 million people worldwide, including 30-40,000 in Spain.

 \sqrt{MS} is primarily an inflammatory disorder of the brain and spinal cord in which focal lymphocytic infiltration leads to damage of myelin and axons that produces significant disability.

 \sqrt{MS} is the commonest cause of neurological disability in young and middleaged adults and has a major physical, psychological, social and financial impact on patients and their families, friends and bodies responsible for health care.

 $\sqrt{}$ At present, one of the major challenges in the treatment of the disease is the lack of effective strategies to slow disease progression.







2.c Innovative mechanism of action



2.d Differential features facing the market

v Authorized products with limited efficacy and significant side-effects (Different forms of Interferon beta; Chemotherapeutic agents; Glatiramer acetate, a random polymer; Monoclonal antibodies).

v Other methods of treatment under research in MS with higher efficacy but significant sideeffects (Fingolimod (approved in USA), Cladribine, Fumaric acid; Monoclonal antibodies)

WHAT IS NECESSARY

1) Developing **more efficacious** drug products (targeting inflammation but also neurodegeneration) to slow or block disease progression.

2) **Safer** drug products (avoiding life-threatening adverse events (fatal infections, cancer) and nonserious adverse events that impairs quality of life (e.g. flu-like symptoms).

3) Oral administration and with good profile for an eventually combination therapy.

NEUROTEC PROPOSAL

NT-KO-003 AS SAFE, EFFICACIOUS AND EASILY ADMINISTERED TREATMENT FOR RR-MS









Drug substance and manufacturing

• NT-KO-003 is a generic compound (small molecule) used systemically (IV and oral) for more than 25 years for acute and chronic treatment of peripheral diseases.

• NT-KO-003 has been used for a long time in patients and thus well documented clinical experience in humans exist to establish its safety profile with oral doses. Consistent preclinical and clinical safety package available.

 $\sqrt{\text{API with CEP available: Indukern S.A, Barcelona, Spain}}$

 $\sqrt{10}$ Pharmaceutical development of the formulation and development of analytical methods.

 $\sqrt{\rm GMP}$ manufacturing of clinical batches and logistics management of medication for the trial.

Idifarma SA, Noáin, Navarra, Spain







Preclinical in vitro studies



100['] M

50

100µM





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Anti-inflammatory effects of NT-KO-003 on microglial cell line and primary culture





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Preclinical in vivo studies: Efficacy of NT-KO-003* on EAE C57BL/6J mice





* Doses used are between 50 and 750 times lower than the current marketed drugs





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Histological studies: NT-KO-003 reduces demyelinization and cell infiltration



Histological studies:

NT-KO-003 decreases microglial reactivity and induces neuroprotection



REGULATORY

 $\sqrt{}$ June 2010: SCIENTIFIC ADVICE to Health Authority in Spain

 $\sqrt{}$ January 2011: CTA to Ethical Committees of Hospitals and Health Authorities in Spain and Germany



NT-KO-003 oral treatment for RR-MS. Duration: 6 months.

Multicenter, Double Blind, Randomized, Placebo-controlled study.

Patients: 105 patients with RR-MS Centers: 11 Spain hospitals + 3 German Hospitals Start of subject enrolment: April 2011 End of subject enrolment: March 2012 End of study: December 2012 Report : First semester 2013



Catalonia Bio





2.f Second application: ALS

ALS is a progressive, fatal, **neurodegenerative disease** caused by the degeneration of **motor neurons**, the nerve cells in the central nervous system that control voluntary muscle movement. The median survival is 3 to 4 years, and 50% of patients die within the first three years after onset of symptoms.

THERE IS NO CURE FOR ALS:

The FDA granted the orphan drug status for RILUTEK in 1995

NEUROTEC STUDIES: COMPLETED

a) In vitro NT-KO-003 efficacy in SOD1 transgenic mice cell culture (Anti-inflammatory effects)

b) In vivo pilot study in ALS animal model (Delay Onset, increase survivor and motor responses)

Pre-clinical regulatory dossier to perform CTA/Orphan drug application





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2.g IPR Protection

$\sqrt{\rm Patent}\ {\rm protection}\ {\rm in}\ {\rm a}\ {\rm specific}\ {\rm environment}$

A) NT-KO-003 for use in the treatment of a CNS autoimmune demyelinating disease

 $\sqrt{10}$ January 2010: European Patent application $\sqrt{10}$ January 2011: PCT Application

 $\sqrt{100}$ December 2010: Study of the freedom to operate for a NT-KO-003 - containing composition for use in the treatment of multiple sclerosis

B) NT-KO-003 for use in the treatment of Amyotrophic Lateral Sclerosis

 $\sqrt{10}$ August 2010: European Patent Application

 $\sqrt{10}$ Differentiation of generic and off-label use per dose and formulation

The efficacy of NT-KO-003 is between 50 and 750 times lower than the current marketed drugs





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2.h Pitfalls & Risks to be considered

RISK

- Risk related to intellectual property.
- Recruitment of patient.
- Limited or no detectable efficacy in patients.
- Off label use.

CONTINGENCE PLAN

- Generation of new data to support the efficacy and safety of doses protected.
- The proposed schedule is realistic. Contract milestones with the CRO.
- More information using other variables (eg. PET study).
- The concentration of effective doses of NT-KO-003 makes it impossible to carry out cross- prescription.











3. Availability for cooperation





1) Out Licensing EM and ALS projects

2) Collaboration to perform Phase IIa clinical trial in ALS

3) Collaboration to perform Phase IIb clinical trial in MS



4) Availability of our technology platform to test molecules for its use in CNS diseases







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THANK YOU !!

GRACIAS !!

GRAZIE !!



QUESTIONS?





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