

# **Preclinical Profiling of ABI-6250, a Novel Orally Bioavailable Small-Molecule Therapeutic Candidate for the Treatment of Chronic Hepatitis D**

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# Presenter Disclosures

- Marc P Windisch is an employee and stockholder of Assembly Biosciences, Inc.

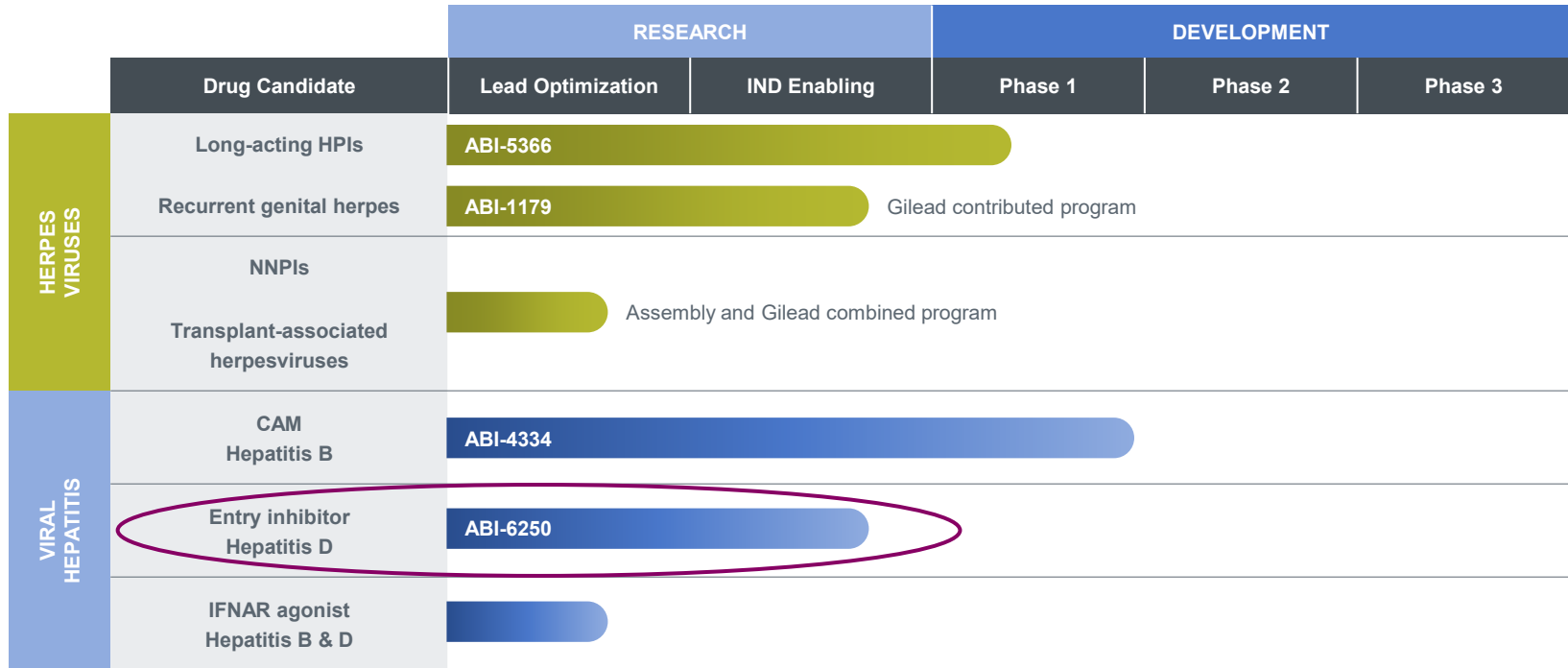


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# Assembly Biosciences' Drug Pipeline



CAM, capsid assembly modulator; HPI, helicase-primase inhibitor; IFNAR, interferon-alpha receptor; IND, investigational new drug; NNPI, non-nucleoside polymerase inhibitor.



# HDV Background



HDV is a satellite virus that requires the presence of HBsAg to infect hepatocytes.<sup>1,2</sup> Chronic HDV infection affects approximately 12 to 72 million patients worldwide<sup>3,4</sup>



HDV infection is the most severe form of viral hepatitis and accounts for approximately 18% of cirrhosis and approximately 20% of hepatocellular carcinoma associated with hepatitis B<sup>1,5</sup>



➤ There are very limited treatment options for HDV

- Peginterferon-alpha (PEG-IFN $\alpha$ ) requires weekly injections<sup>6</sup>



- Bulevirtide (BLV) is the only EMA-approved drug for HDV.<sup>7a</sup> BLV in combination with IFN $\alpha$  can result in HDV cure in some patients,<sup>8</sup> and BLV and PEG-IFN $\alpha$  require daily and weekly injections, respectively<sup>6,9</sup>

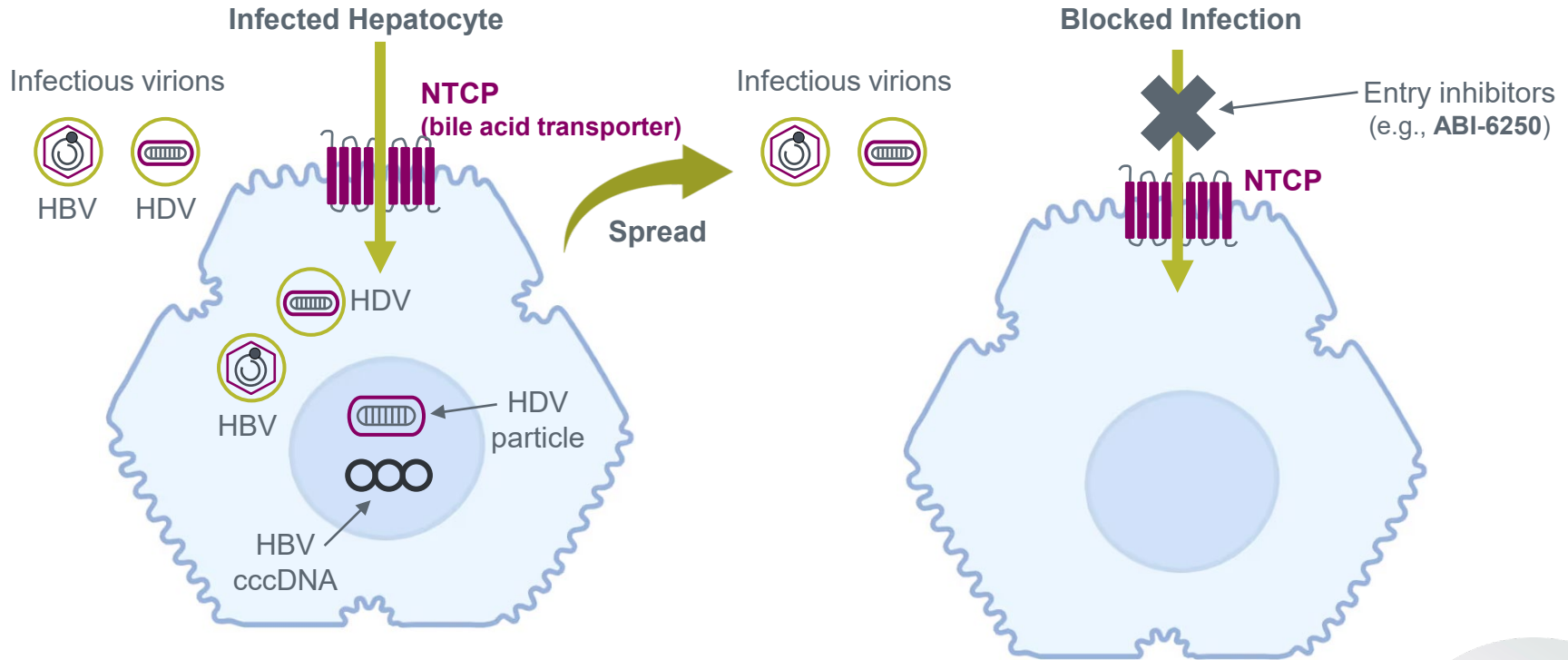


➔ **There is a need for an orally bioavailable HDV entry inhibitor**

1) World Health Organization. Hepatitis D fact sheet. Accessed June 10, 2024. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-d>.  
2) Urban S, et al. *Gut*. 2021;70:1782-94. 3) World Health Organization. Hepatitis D fact sheet. Accessed June 10, 2024. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-d>.  
4) Negro F, et al. *JAMA*. 2023;330(24):2376-87. 5) Stockdale A, et al. *J Hepatol*. 2020;73(3):523-32. 6) Pegasys. Prescribing information. Hoffmann-La Roche, Inc., c/o Genentech, Inc.; 2021. 7) Kang C, et al. *Drugs*. 2020;80:1601-5. 8) Asselah T, et al. *N Engl J Med*. 2024 (online ahead of print); DOI: 0.1056/NEJMoa2314134. 9) European Medicines Agency. Summary of product characteristics, Hepcludex 2 mg powder for solution for injection. August 2020. Accessed June 14, 2024. [https://www.ema.europa.eu/en/documents/product-information/hepcludex-epar-product-information\\_en.pdf](https://www.ema.europa.eu/en/documents/product-information/hepcludex-epar-product-information_en.pdf).

1) World Health Organization. Hepatitis D fact sheet. Accessed June 10, 2024. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-d>.  
2) Urban S, et al. *Gut*. 2021;70:1782-94. 3) World Health Organization. Hepatitis D fact sheet. Accessed June 10, 2024. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-d>.  
4) Negro F, et al. *JAMA*. 2023;330(24):2376-87. 5) Stockdale A, et al. *J Hepatol*. 2020;73(3):523-32. 6) Pegasys. Prescribing information. Hoffmann-La Roche, Inc., c/o Genentech, Inc.; 2021. 7) Kang C, et al. *Drugs*. 2020;80:1601-5. 8) Asselah T, et al. *N Engl J Med*. 2024 (online ahead of print); DOI: 0.1056/NEJMoa2314134. 9) European Medicines Agency. Summary of product characteristics, Hepcludex 2 mg powder for solution for injection. August 2020. Accessed June 14, 2024. [https://www.ema.europa.eu/en/documents/product-information/hepcludex-epar-product-information\\_en.pdf](https://www.ema.europa.eu/en/documents/product-information/hepcludex-epar-product-information_en.pdf).

# Entry Inhibitors Targeting NTCP Block HBV and HDV Infection of Hepatocytes

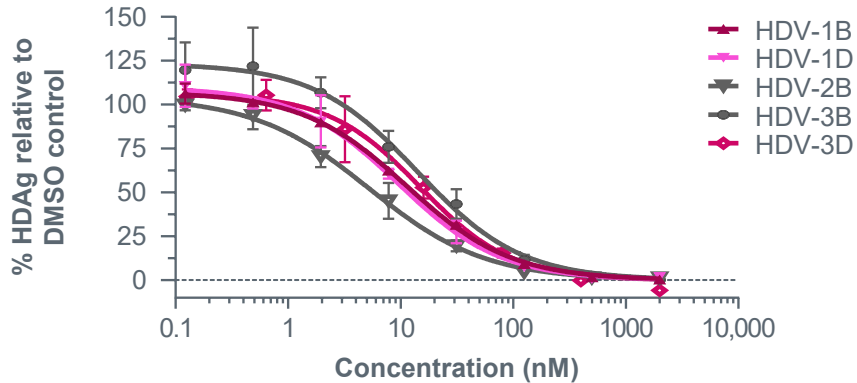


cccDNA, covalently closed circular DNA; NTCP, sodium taurocholate cotransporting polypeptide.



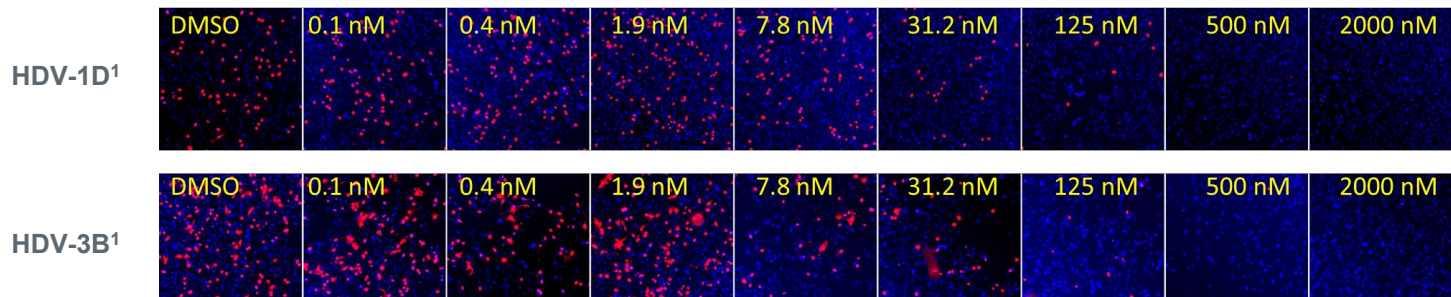
# ABI-6250 Efficiently Inhibited HDV Infection of the Most Prevalent Genotypes in HepG2-NTCP Cells

Anti-HDV Activity in HepG2-NTCP Cells<sup>2</sup>



ABI-6250 EC<sub>50</sub> Values in HepG2-NTCP Cells<sup>2</sup>

HDV/HBV genotype	EC <sub>50</sub> (nM)
1B	11.4
1D	9.6
2B	5.2
3B	14.2
3D	14.9



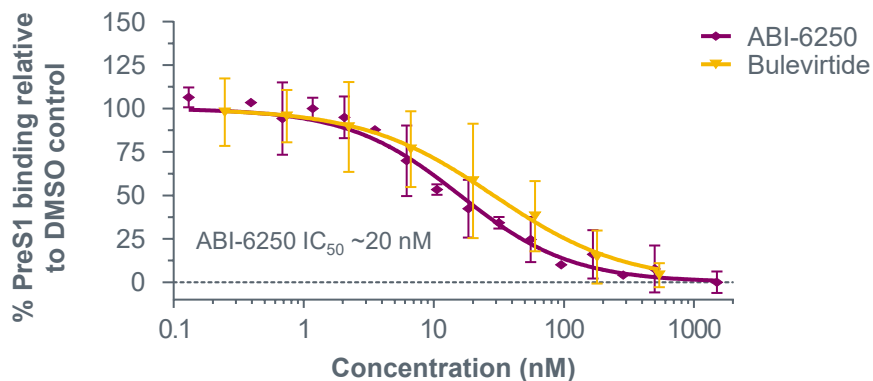
HDVAg is shown in red and cell nuclei are shown in blue.

DMSO, dimethyl sulfoxide; EC<sub>50</sub>, half-maximal effective concentration; HDVAg, hepatitis D antigen.

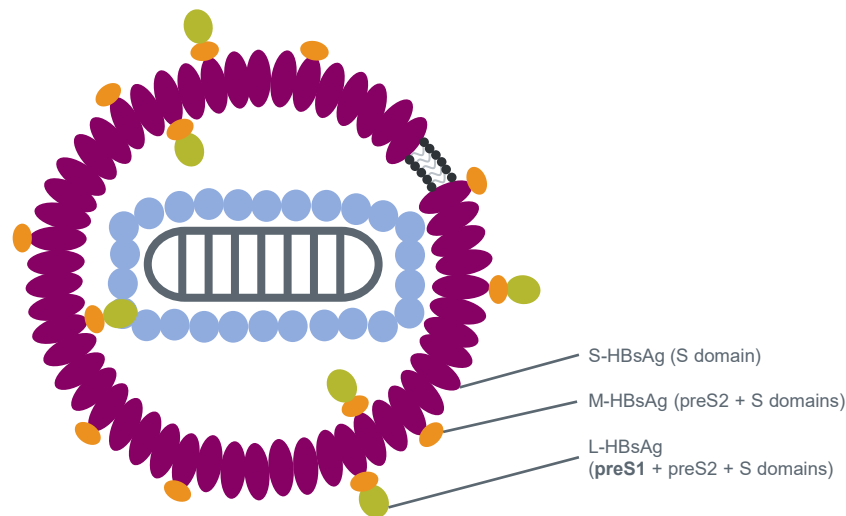


# ABI-6250 Inhibited PreS1-NTCP Binding and NTCP-Mediated Bile Acid Uptake

## PreS1-NTCP Binding Inhibition



## HDV Virion<sup>a</sup>

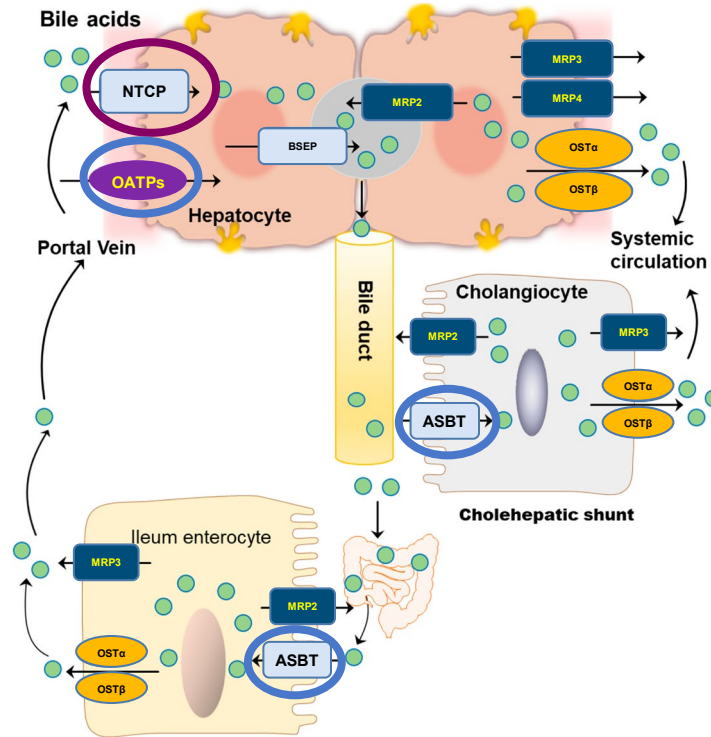


<sup>a</sup>Adapted from Tan W, et al. *World J Gastroenterol.* 2014;20:11650-70 per the terms under <https://creativecommons.org/licenses/by/4.0/>. HBsAg, hepatitis B surface antigen; IC<sub>50</sub>, half-maximal inhibitory concentration; L-, large; M-, medium; S-, small.



# Key Transporters Involved in Bile Acid Homeostasis

## ASBT and OATP

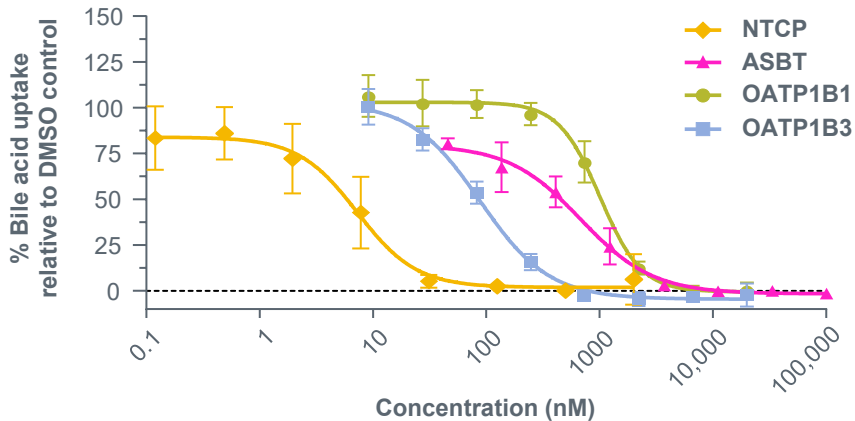


Adapted from Xue R, et al. *Cells*. 2021;10:2806 per the terms under <https://creativecommons.org/licenses/by/4.0/>.

ASBT, apical sodium-dependent bile acid transporter; OATP, organic anion-transporting polypeptide.

# ABI-6250 Selectively Inhibited NTCP *In Vitro*

## Limited OATP1B and ASBT Bile Acid Uptake Inhibition



## ABI-6250 Fold Selectivity

Transporter	ABI-6250 IC <sub>50</sub> (nM) [fold selectivity] <sup>a</sup>
NTCP	7.3
OATP1B1	1000 [>135]
OATP1B3	90 [>12]
ASBT	700 [>95]

<sup>a</sup>Numbers in brackets indicate fold selectivity calculated as the ratio of bile acid transporter IC<sub>50</sub> to NTCP IC<sub>50</sub>. IC<sub>50</sub>, half-maximal inhibitory concentration.

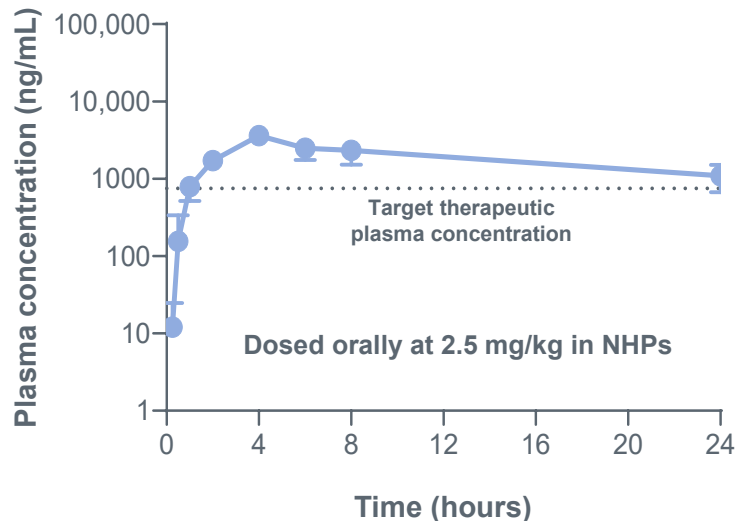


# ABI-6250 Has Favorable ADME and PK Profiles

## ABI-6250 ADME and PK Profile<sup>1,a</sup>

ADME properties			
Percentage of ABI-6250 remaining at 45 min after incubation in LMs (human   NHP   rat   mouse)	97   97   97   93		
Caco-2 A-B <sup>b</sup>   B-A <sup>b</sup>   ER	4.8   4.7   1.0		
PK properties		Rat	NHP
t <sub>1/2</sub> (hr)	4.9 <sup>c</sup>   5.4 <sup>d</sup>	6.7 <sup>c</sup>   14.8 <sup>d</sup>	
%F	100	99	

## ABI-6250 Exceeds Therapeutic Plasma Concentration<sup>2</sup>

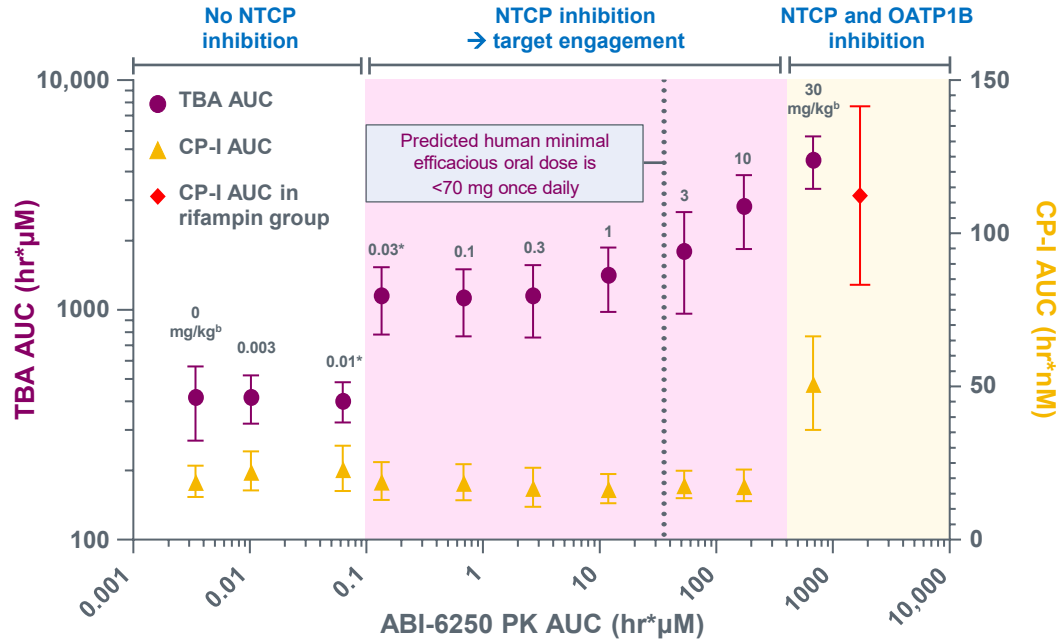


<sup>a</sup>n = 2 or 3. <sup>b</sup>10<sup>-6</sup> cm/s. <sup>c</sup>If ABI-6250 is administered intravenously. <sup>d</sup>If ABI-6250 is administered orally.

A-B, A to B permeability; ADME, absorption, distribution, metabolism, and excretion; B-A, B to A permeability; ER, efflux ratio; %F, bioavailability; LM, liver microsome; NHPs, non-human primates; PK, pharmacokinetics; t<sub>1/2</sub>, terminal half-life.

# ABI-6250 Has Favorable PK/PD Profiles

## Total Bile Acid and Coproporphyrin-I Measurements in NHPs<sup>a</sup>



<sup>a</sup>The x-axis values for vehicle, 0.003 mg/kg, and rifampin groups are arbitrarily set. <sup>b</sup>Doses of ABI-6250 in NHPs; n = 6 per dose. \*For TBA AUC P<0.01 between 0.01 mg/kg and 0.03 mg/kg. Vertical line indicates human PK projection using allometric scaling.

AUC, area under the curve; CP-I, coproporphyrin-I; PD, pharmacodynamics; TBA, total bile acid.



- **ABI-6250 is a highly potent, NTCP-selective, orally bioavailable HDV and HBV entry inhibitor**
- **At clinically relevant concentrations, ABI-6250 elevates total bile acids in NHPs, indicating target engagement without increasing CP-I plasma levels, a biomarker for OATP1B inhibition**
- **The preclinical PK profile of ABI-6250 supports low once-daily dosing in patients with chronic HDV infection**
- **ABI-6250 is expected to enter Phase 1 clinical trials by the end of 2024**



# Acknowledgements

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# Thanks for your attention!

## Questions?

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