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Safety, tolerability, and clinical effects of ZP8396, a novel long-acting amylin analog: A single ascending dose trial



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INTRODUCTION

ZP8396 is a long-acting amylin analog designed for once-weekly dosing that has demonstrated the potential to reduce body weight and improve glycemia in animal models of obesity and diabetes

OBJECTIVES & ENDPOINTS

Objectives

• A first-in-human trial to evaluate safety, tolerability, pharmaco-kinetics (PK), and pharmacodynamics (PD) of ZP8396

Primary Endpoint

Adverse events (AEs)

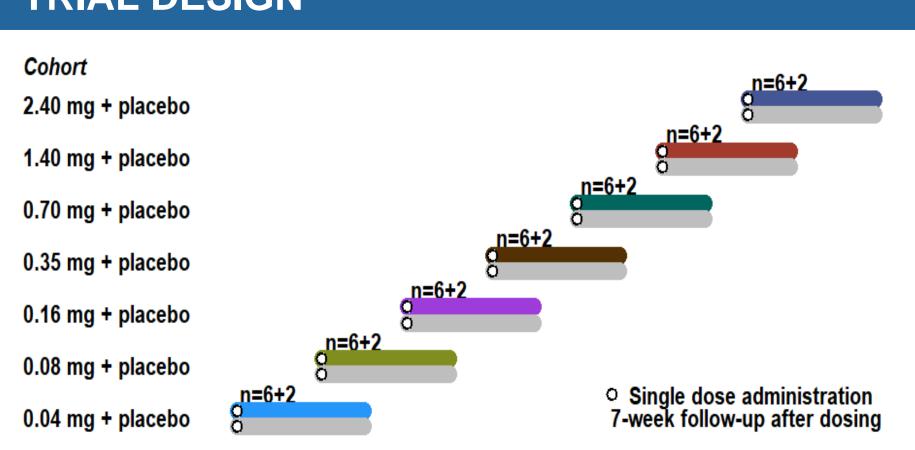
Secondary Endpoints

 PK parameters of ZP8396 and PD parameters in relation to a Mixed Test Meal (MTM)

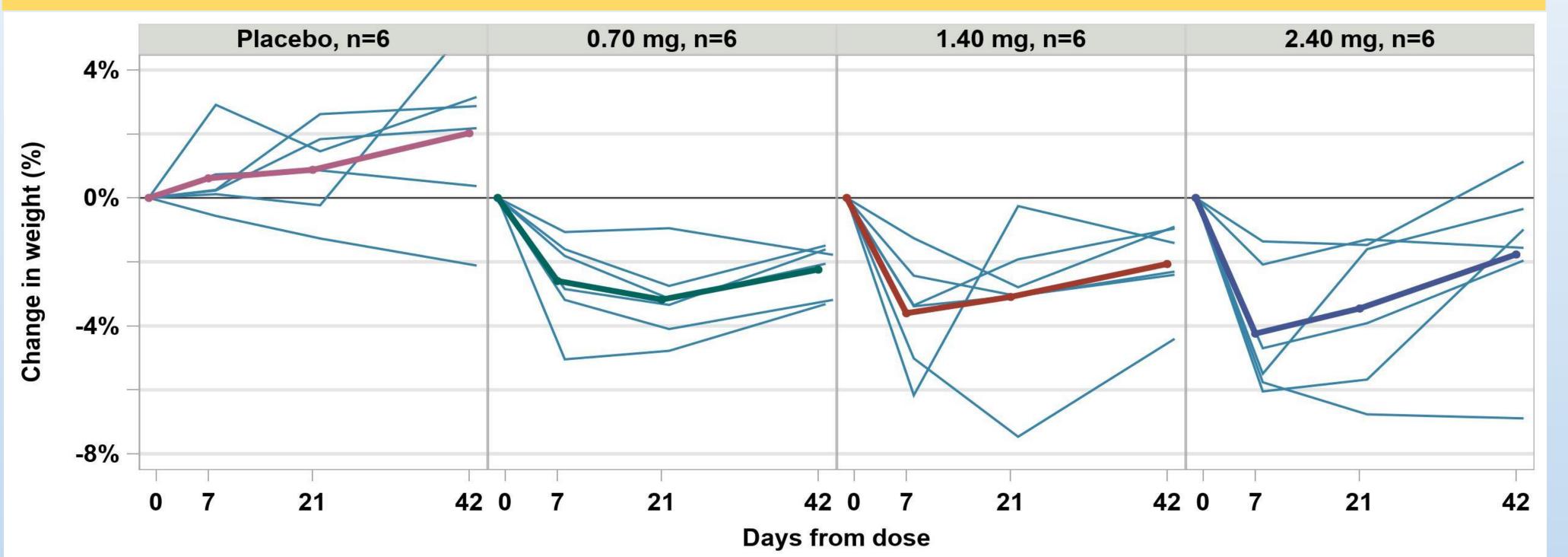
METHODS

- A randomized, double-blind, placebo-controlled trial was performed to assess safety, PK, and PD of a single subcutaneous injection of ZP8396 in healthy, lean and overweight male subjects
- A total of 56 subjects (mean age 38.1 years; mean BMI 25.6 kg/m²) were randomized to ZP8396 or placebo (6:2) within seven dose cohorts ranging from 0.04 to 2.4 mg

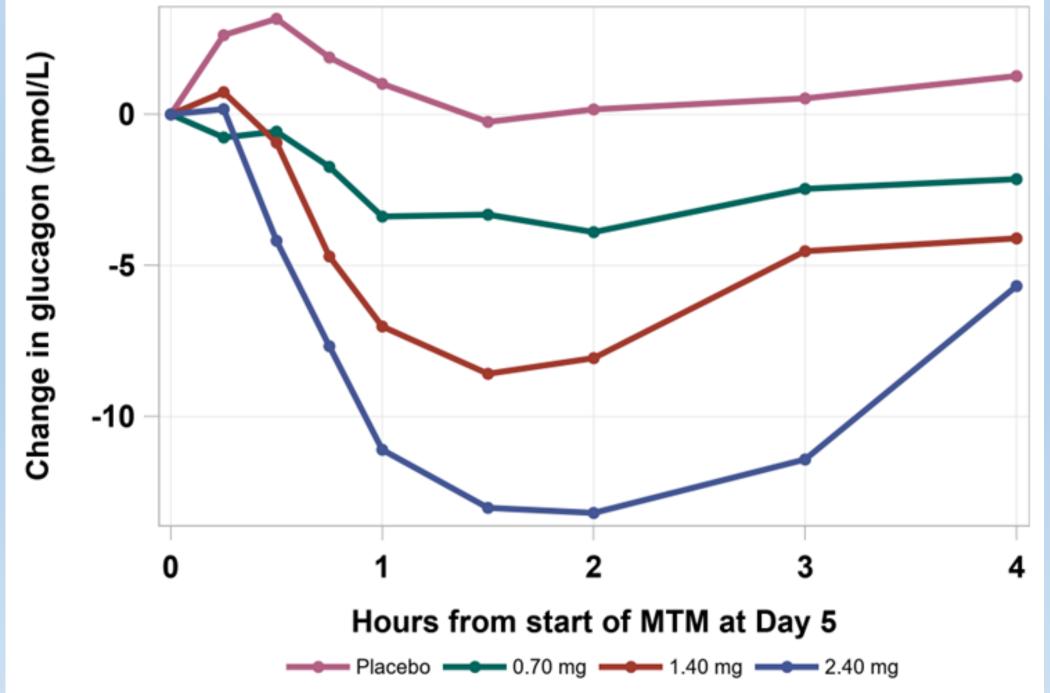
TRIAL DESIGN



DOSE-DEPENDENT AND CONSISTENT WEIGHT LOSS



DOSE RESPONSE IN GLUCAGON SECRETION



TREATMENT EMERGENT ADVERSE EVENTS (TEAEs)

No. of subjects (events)

n=14	0.04 mg n=6	0.08 mg n=6	0.16 mg n=6	0.35 mg n=6	0.70 mg n=6	1.40 mg n=6	2.40 mg n=6
10 (15)	3 (5)	3 (7)	2 (3)	1 (3)	5 (11)	6 (23)	6 (27)
8 (8)	3 (3)	3 (6)	1 (2)	1 (3)	5 (10)	6 (18)	6 (16)
5 (7)	2 (2)	1 (1)	1 (1)	0	1 (1)	5 (5)	5 (11)
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	1 (2)	0	1 (1)	2 (2)	5 (9)	5 (12)
0	0	0	0	0	2 (2)	5 (5)	6 (8)
	n=14 10 (15) 8 (8) 5 (7) 0 0	n=14 n=6 10 (15) 3 (5) 8 (8) 3 (3) 5 (7) 2 (2) 0 0 0 0 0 0	n=14 n=6 n=6 10 (15) 3 (5) 3 (7) 8 (8) 3 (3) 3 (6) 5 (7) 2 (2) 1 (1) 0 0 0 0 0 0 0 0 1 (2)	n=14 n=6 n=6 n=6 10 (15) 3 (5) 3 (7) 2 (3) 8 (8) 3 (3) 3 (6) 1 (2) 5 (7) 2 (2) 1 (1) 1 (1) 0 0 0 0 0 0 0 0 0 0 1 (2) 0	n=14 n=6 n=6 n=6 n=6 10 (15) 3 (5) 3 (7) 2 (3) 1 (3) 8 (8) 3 (3) 3 (6) 1 (2) 1 (3) 5 (7) 2 (2) 1 (1) 1 (1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 (2) 0 1 (1)	n=14 n=6 n=6 n=6 n=6 n=6 10 (15) 3 (5) 3 (7) 2 (3) 1 (3) 5 (11) 8 (8) 3 (3) 3 (6) 1 (2) 1 (3) 5 (10) 5 (7) 2 (2) 1 (1) 1 (1) 0 1 (1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 (2) 0 1 (1) 2 (2)	10 (15) 3 (5) 3 (7) 2 (3) 1 (3) 5 (11) 6 (23) 8 (8) 3 (3) 3 (6) 1 (2) 1 (3) 5 (10) 6 (18) 5 (7) 2 (2) 1 (1) 1 (1) 0 1 (1) 5 (5) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 (2) 0 1 (1) 2 (2) 5 (9)

RESULTS

- After 7 days observation, mean body weight decreased by -0.6%, 2.6%, 3.6%, and 4.2% from baseline following a single dose of placebo, 0.7, 1.4 and 2.4 mg, respectively
- ZP8396 was well tolerated, with no serious or severe TEAEs and no withdrawals
- Most common related TEAEs were decreased appetite, nausea and vomiting, most events were mild and transient. Nausea and vomiting only occurred in two highest dose groups
- Number and severity of gastrointestinal TEAEs increased with dose
- The mean half-life of ZP8396 was approximately 10 days
- Dose-dependent reduction in glucagon release was observed
- No anti-drug antibodies were detected

CONCLUSIONS

- ZP8396 was well-tolerated in single doses of up to 2.4 mg
- A half-life of approximately 10 days is suitable for once weekly dosing
- A single dose of ZP8396 resulted in a dose-dependent, consistent and sustained reduction in body weight, supporting the potential as a treatment for obesity
- The first part of MAD (Multiple Ascending Dose) trial results will be released in later half of 2023