# Tyrosine Kinase Inhibitors: A Suprachoroidal Perspective

Innovate Retina 2024 Roger A. Goldberg, MD, MBA Bay Area Retina Associates, Walnut Creek, CA

On behalf of the ODYSSEY investigators

# Financial Disclosures

# **Straightforward Suprachoroidal Injection Technique**



REVIEW

#### SUPRACHOROIDAL SPACE INJECTION TECHNIQUE

#### **Expert Panel Guidance**

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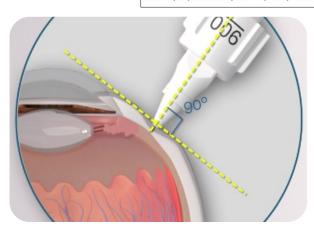
# RETINA SPECIALIST

#### A beginner's guide to suprachoroidal injections

They require a different skill set than intravitreal injections. Here's a description of the technique.

By Carol Villafuerte-Trisolini, MD, and Glenn Yiu, MD, PhD

**DECEMBER 23, 2023** 

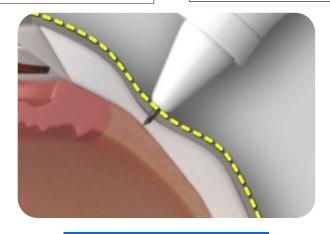


# Perpendicular

Hold the microinjector

perpendicular

to the ocular surface



# Dimple

Ensure firm contact with sclera by maintaining a dimple throughout injection



### Slow

Inject **slowly** over 5 – 10 seconds

Source: Clearside July 24, 2024 KOL Webinar

### **ODYSSEY Phase 2b Clinical Trial**



Trial Objectives:
Evaluate safety, efficacy & duration of CLS-AX in participants with wet AMD

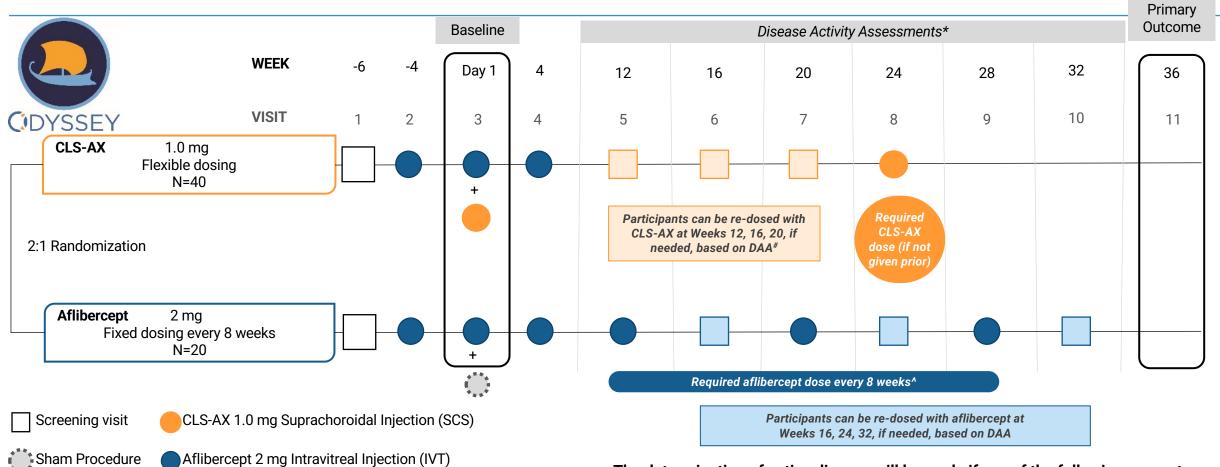
- Primary Outcomes: Mean change in BCVA from Baseline to Week 36; Safety & tolerability
- Secondary Outcomes: Other changes in visual function and retinal imaging, including CST; Need for supplemental treatment; Treatment burden as measured by total injections



Participant Profile:
60 total with 2:1 randomization
(40 in CLS-AX arm & 20 in
aflibercept arm)

- Treatment experienced participants with reading center confirmation of persistent active disease
- Protocol required re-dosing with CLS-AX in study arm
  - Participants received at least 2 doses of CLS-AX
  - Provides important data to plan Phase 3 in chronic disease

# **ODYSSEY Trial Design**



\*Participants can be re-dosed with CLS-AX up to every 12 weeks; All arms are sham controlled

#### The determination of active disease will be made if any of the following are met:

- BCVA reduction of > 5 letters from Visit 3 (Baseline, Day 1) AND increase in CST of >75 microns on SD-OCT from Visit 3 (Baseline, Day 1)
- BCVA reduction of >10 letters from Visit 3 (Baseline, Day1)
- Increase in CST of >100 microns on SD-OCT from Visit 3 (Baseline, Day 1)
- Presence of new or worsening vision-threatening hemorrhage

<sup>\*</sup> Disease Activity Assessments (DAA): Conducted at Week 12 through 32 to determine need for supplemental treatment. # In CLS-AX arm, following 3 loading doses of aflibercept and initial dose of CLS-AX at Baseline, participants will receive CLS-AX at least every 24 weeks unless more frequently required based on DAA;

 $if\ disease\ is\ active\ and\ participant\ is\ \verb|<|12| weeks|\ since\ last\ CLS-AX|\ injection,\ participant\ receives\ dose\ of\ aflibercept;$ 

if disease is active and participant is >12 weeks since last CLS-AX injection, participant receives dose of CLS-AX.

<sup>^</sup> In aflibercept arm, following 3 loading doses of aflibercept, participants will receive aflibercept on fixed dosing regimen every 8 weeks unless more frequently required based on DAA;

if disease is active, participant receives dose of aflibercept.

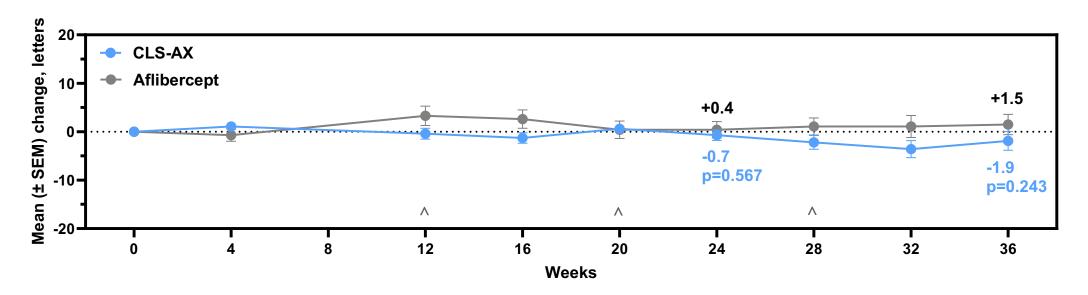
# **Demographics and Baseline Characteristics**

Characteristics	CLS-AX	Aflibercept	Overall
No. of participants	40	20	60
Mean age (range), years	76.9 (51-90)	80.3 (54-96)	78.0 (51-96)
Women, no. (%)	25 (62.5)	14 (70.0)	39 (65.0)
Race, no. (%) White Asian	37 (92.5) 3 (7.5)	20 (100) 0	57 (95.0) 3 (5.0)
Median duration of wet AMD diagnosis (range), months	9.65 (1.4-31.1)	10.2 (1.4-20.8)	9.9 (1.4-31.1)
Mean BCVA (range) at screening, ETDRS letters	69.1 (37-80)	69.1 (51-80)	69.1 (37-80)
Mean CST (range) at screening, µm	266.8 (175-378)	294.3 (209-592)	276.0 (175-592)
Mean Total Area of CNV (range) at screening, mm <sup>2</sup>	6.8 (1.6-26.9)	6.5 (0.5-20.8)	6.7 (0.5-26.9)
Bilateral wet AMD, n	17	6	23
Mean annualized number of prior wet AMD treatments (injections/year) <sup>a</sup> (range)	9.5 (3.2-17.2)	9.2 (4.1-17.2)	9.4 (3.2-17.2)

Abbreviations: AMD = age-related macular degeneration; BCVA = best corrected visual acuity; CNV = choroidal neovascularization; CST = central subfield thickness; ETDRS = Early Treatment Diabetic Retinopathy Study. 
<sup>a</sup>Annualized number of prior wet AMD treatments defined as the total number of prior wet AMD treatments divided by the duration of wet AMD diagnosis in years.

# Stable Best Corrected Visual Acuity (BCVA) Over 36 Weeks

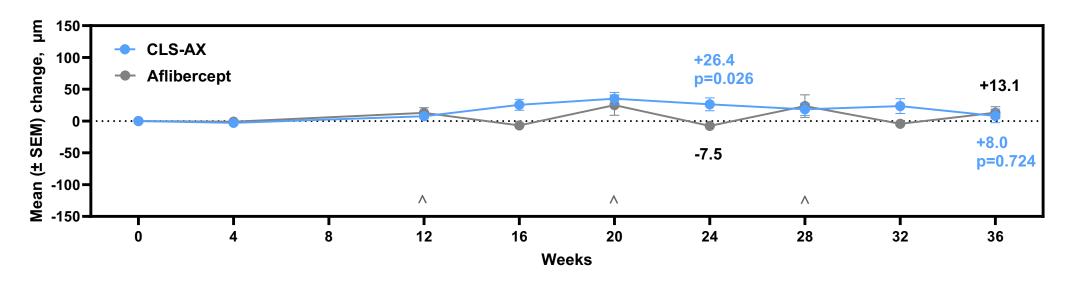
#### BCVA Within 2 Letters From Baseline at Both Week 24 and Week 36 in CLS-AX Arm



CLS-AX results do not include supplemental therapy with aflibercept

# Stable Central Subfield Retinal Thickness (CST) Over 36 Weeks as Verified by Independent Reading Center

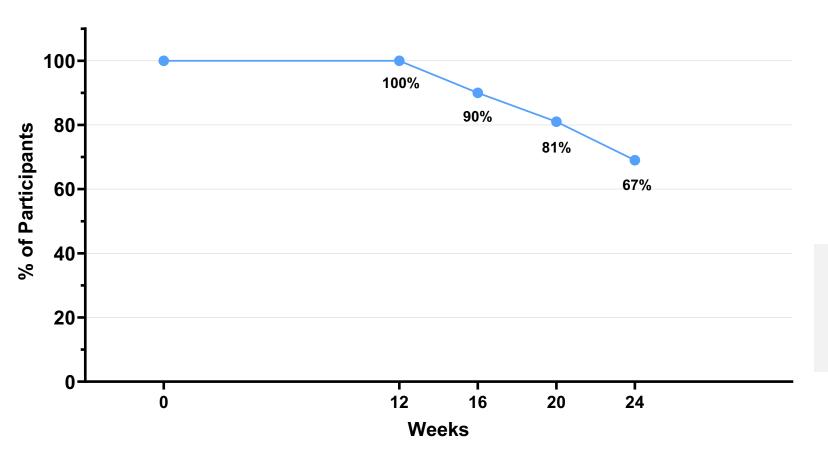
#### **CLS-AX Demonstrates Stable Anatomical Control and Reduces Fluctuation**



CLS-AX results do not include supplemental therapy with aflibercept

# Two-Thirds of Participants Dosed with CLS-AX Reached Six Months Without Additional Treatment

### **Intervention-Free Rates By Week Up to Each Visit**



Week 12: 40/40 (100%)

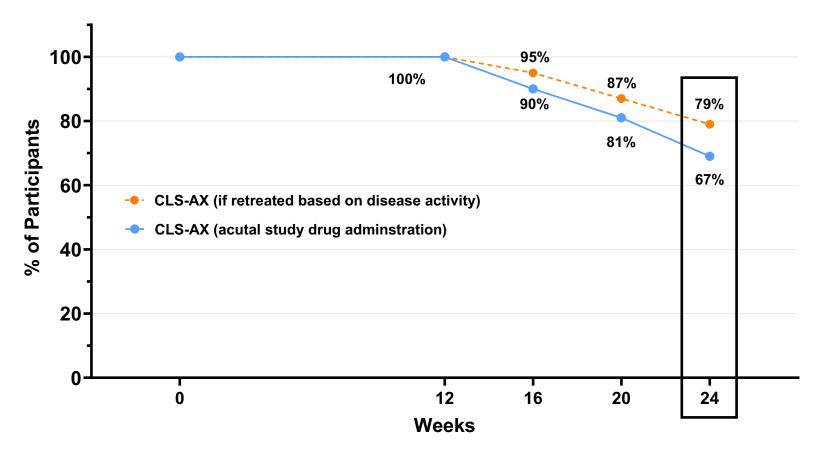
Week 16: 35/39 (89.7%)

Week 20: 30/37 (81.1%)

Week 24: 26/39 (66.7%)

# More Participants May Have Been Intervention Free at Every Time Point if DAA Criteria Strictly Applied

# No Participants Met the DAA Criteria Per Reading Center Confirmation at Week 24, but They Received Mandatory Re-Dosing Per the Protocol



Based on disease activity

Week 12: 40/40 (100%)

Week 16: 37/39 (94.9%)

Week 20: 32/37 (86.5%)

Week 24: 30/38 (78.9%)

# **CLS-AX Consistently Reduced the Frequency of Injections**

### **Comparison of Wet AMD Treatments Pre- and Post- Randomization**

#### 24 Weeks Before and After

Average number of treatments 24 Weeks prior to Screening Visit: 2.95 injections

Average number of treatments up to 24 Weeks after Baseline Visit: **0.475 injections** 

Reduced injection frequency by

84%

# **CLS-AX Demonstrated Positive Safety Profile**

#### No Ocular SAEs and No Treatment-Related SAEs

- No drug or procedure-related ocular SAEs
- No reported drug or procedure-related systemic SAEs
- No endophthalmitis
- No retinal vasculitis
- Four cases of intraocular inflammation all deemed clinically mild by the Safety Review Committee
  - Two cases had minimal clinical signs that resolved
  - Two cases were potentially related to drug administration
  - In all four cases, the inflammation was no longer detected at or before Week 36

# **CLS-AX Now Phase 3 Ready Based on Positive ODYSSEY Data**



Achieved Primary Objective: <u>Stable BCVA to Week 36</u>
Difficult-to-treat Wet AMD participants with confirmed activity



Compelling injection free rates up to 6 months Injection frequency reduced by nearly 84%



Positive safety profile
No ocular SAEs or treatment-related SAEs
CLS-AX was well-tolerated after re-dosing



Only Phase 2 trial in wet AMD with <u>repeat TKI dosing data</u> to better inform and potentially de-risk Phase 3 design

# Thank You ODYSSEY Investigators!

**Retinal Research Institute - Phoenix Retina Consultants of Orange County** Northern California Retina Vitreous Associates **Retina Research Institute of Texas** Texas Retina Associates - Plano **Southeast Retina Center Western Carolina Retinal Associates Vitreo-Retinal Associates Retinal Consultants Medical Group Retina Consultants of Texas** California Retina Consultants **Austin Retina Tennessee Retina PC** Retina Group of Florida **Associated Retina Consultants Sierra Eye Associates** Illinois Retina Associates **Spokane Eye Clinical Research Retinal Consultants of Southern California** Georgia Retina **Retina Specialty Institute** Retina Associates of Florida Florida Retina Consultants **Texas Retina Associates - Dallas** Retina Consultants San Diego **Retina Group of Washington Envision Ocular Wolfe Eye Clinic Retina Consultants of Texas - Katy Retina Consultants of Texas** 

