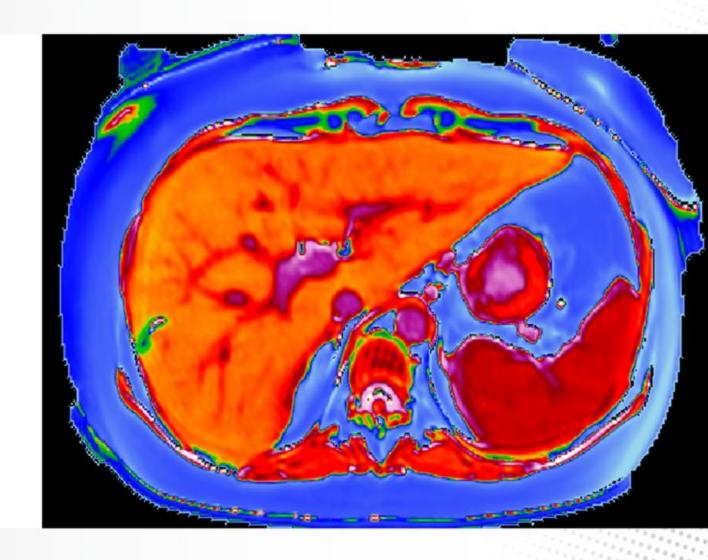
Liver*MultiScan* for monitoring treatment

response

June 2020

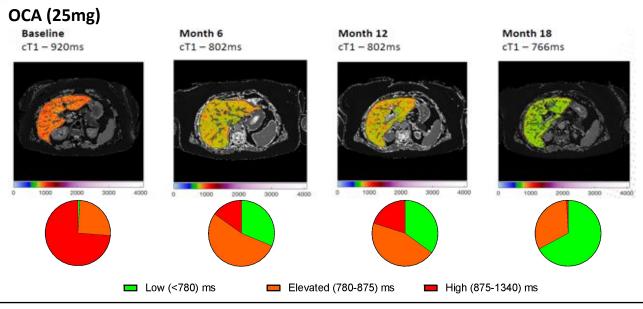


## **REGENERATE NASH Phase III Trial**

**Intercept Pharmaceuticals** 

### Measuring OCA response with Liver MultiScan

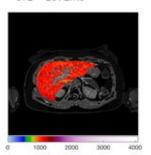
### Quantitative imaging enables definitive assessment of treatment response



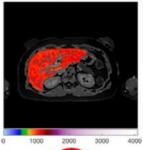
cT1 (ms)	Baseline	Month 18
Low <780)	1%	67%
Elevated (780-875)	25%	32%
High (875-1340)	73%	<1%

#### **Placebo**

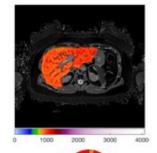
Baseline cT1 - 1072ms



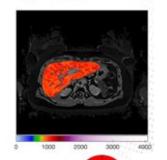
Month 6 cT1 – 1065ms



Month 12 cT1 - 951ms



Month 18 cT1 - 1000ms



cT1 (ms)	Baseline	Month 18
Low <780)	<1%	<1%
Elevated (780-875)	1%	3%
High (875-1340)	>98%	>97%

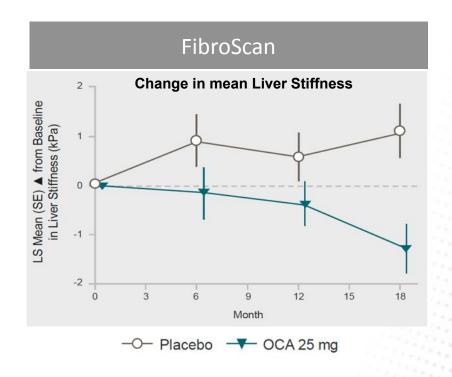


# Measuring OCA response with LiverMultiScan vs. FibroScan LiverMultiScan shows NASH resolution within 6 months

Month 18 interim analysis from Intercept Phase III NASH study (REGENERATE)



Liver*MultiScan* detects response within **6 months** 



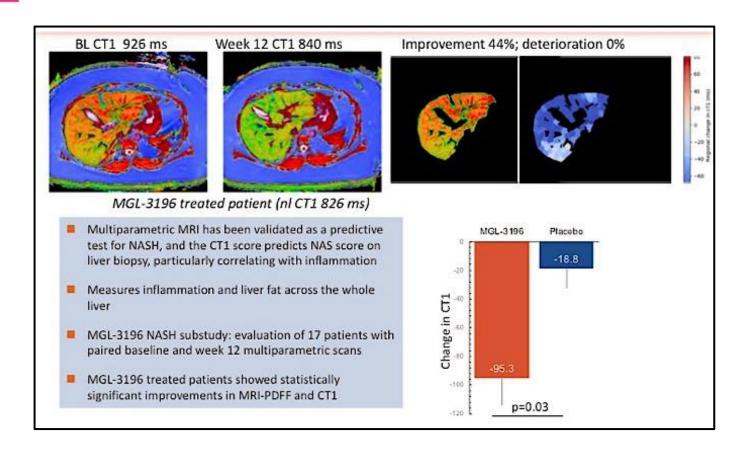
FibroScan requires **18 months** to detect difference



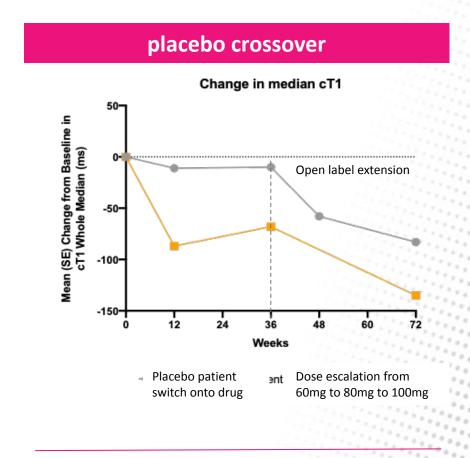
## Resmetirom (MGL-3196) NASH Phase II Trial

Madrigal Pharmaceuticalss

# Measuring treatment change in 12 weeks Phase II NASH study with MGL-3196 and open label extension



Significant decrease in fibroinflammatory disease (cT1), after 12 weeks (n=17)



cT1 detected efficacy at Week 12 in a placebo crossover

## **NGM282 Phase II NASH Trial**

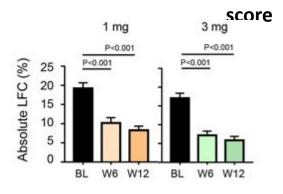
NGM Bio

### Measuring treatment change in 6 weeks

### Liver MultiScan as an endpoint in drug development NGM-282

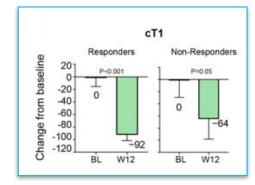
#### Change in cT1 and LFC correlated with reduction in NAS

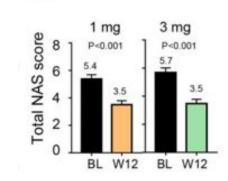
3 mg



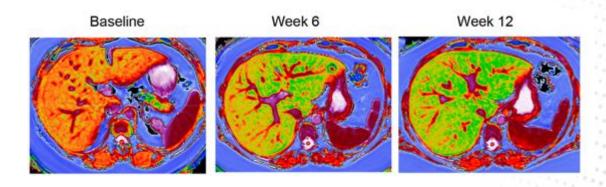
1 mg

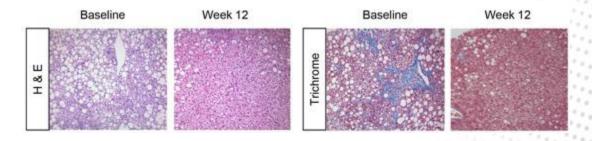
cT1 (msec) 900 850





#### Improvement in cT1 observed in 6 weeks

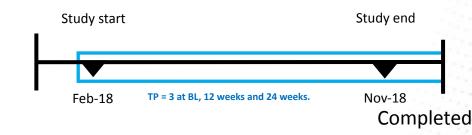




In NGM-282 Phase 2 study, cT1 has been shown to detect changes in 6 weeks that correlated with histological response.

## **NAFLD LiLi**

# **NAFLD LiLi** Lifestyle Induced Weight loss and Liraglutide in the Treatment of Non-Alcoholic Steatohepatitis



**Study design:** Interventional study assessing the effects of either lifestyle management Vs GLP1RA (Liraglutide) upon NASH over a 12-week period.

#### **Enrolment criteria:**

- Non-diabetic (HbA1c < 48mmol/mol)</li>
- Aged 18-75 years
- BMI of 25-40 kg/m<sup>2</sup>
- Diagnosis of NAFLD (imaging, histology)

#### **Objectives:**

• To assess the effects of either lifestyle management or Liraglutide on liver health.

Primary endpoints are measures of weight and steatosis as assessed by:

- Liver fat content (<sup>1</sup>H-MRS)
- Weight loss

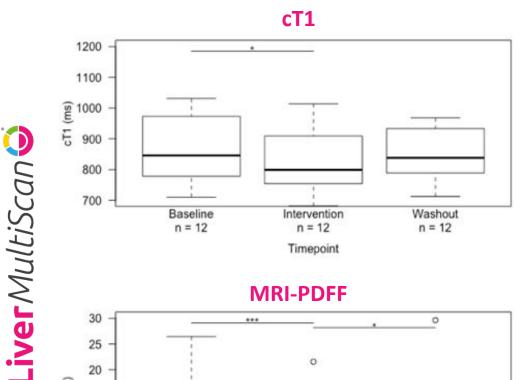
Analysis: data has not been published:

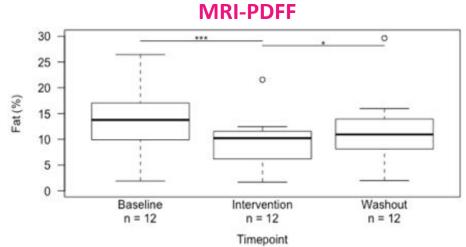
- Weight significantly impacts changes to cT1.
- Age has small but significant effect whilst gender and lifestyle do not.

**Status:** Study complete.

### **GLP1-RA** intervention reduces liver cT1 and PDFF

Monitoring liver-specific response to diabetic treatment





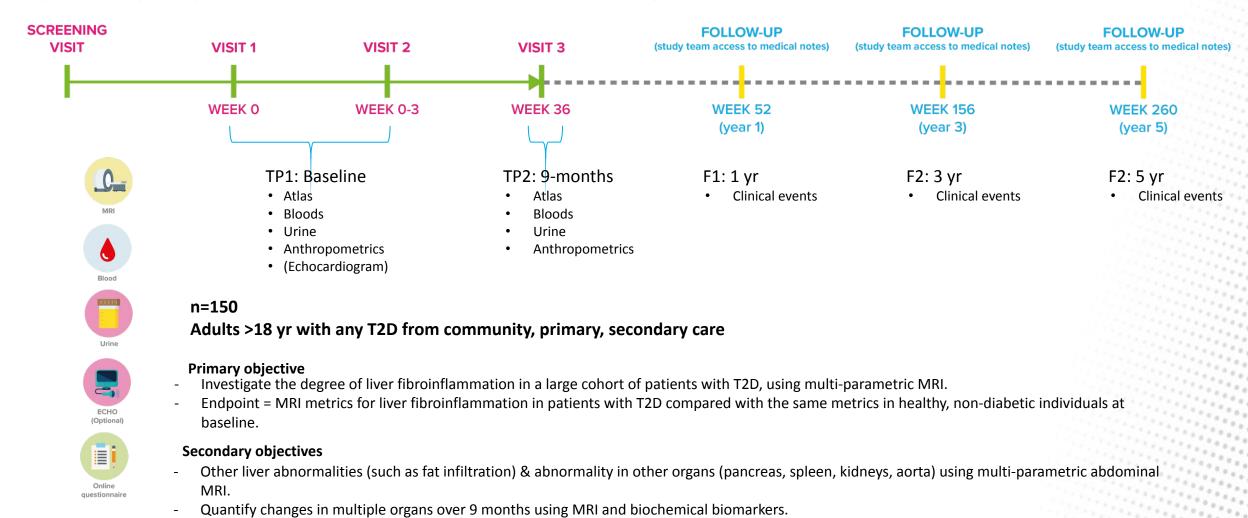
- Non-diabetic patients with NAFLD (HbA1c <48 mmol/mol)</li>
- 12-week treatment with a GLP1-RA
- Both liver fibroinflammation and steatosis significantly reduced and partially restored if treatment discontinued

## **MODIFY**

### Longitudinal Assessment of Multiple Organs in Patients With **Type 2 Diabetes (MODIFY)**

Investigating the utility of ATLAS metrics in monitoring T2D and ability to predict outcomes

Impact of multi-parametric abdominal MRI on type 2 diabetes management.



Prognostic information provided by abdominal imaging for longer-term evaluation of clinical outcomes (after 1, 3 5 years).

https://clinicaltrials.gov/ct2/

show/NCT04114682

# Liver*MultiScan* can be used to screen for steatohepatitis in T2D

- Scans from 48 patients with confirmed T2D compared to 100 healthy UK Biobank participants
- T2D had significantly higher values for
  - Liver PDFF
  - Liver cT1
- Prevalence of steatohepatitis in 50% of T2D
- BMI positively associated with cT1 and PDFF

