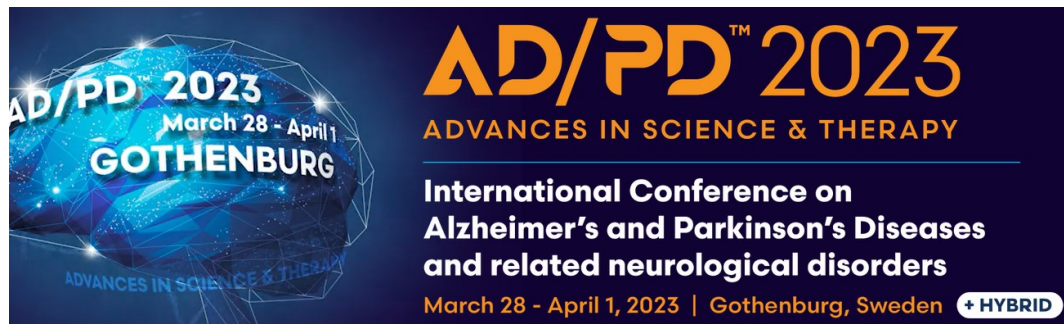


# ABATE study – utilizing biomarker-based development for optimized ACI-24, a novel candidate vaccine for the treatment and prevention of Alzheimer's disease

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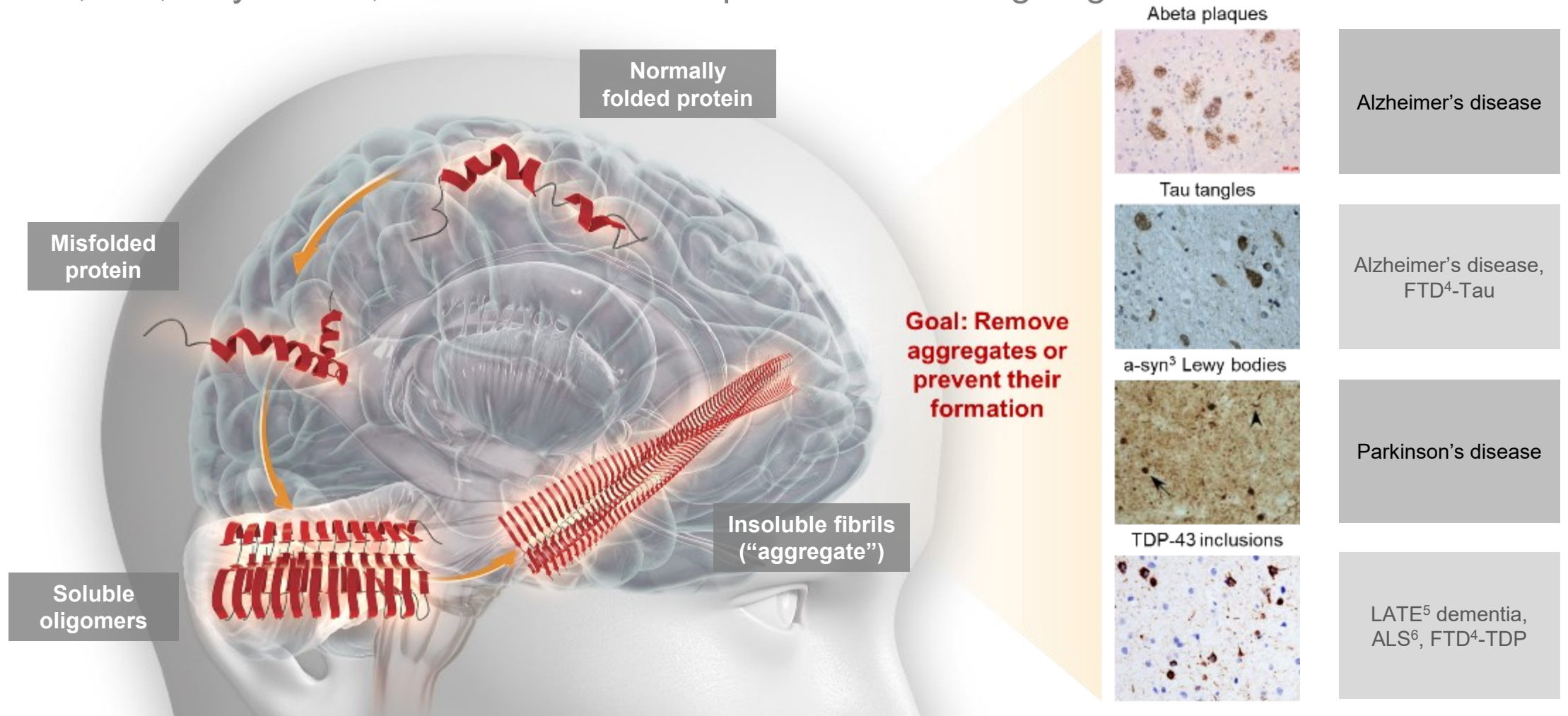
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## Conflict of interest disclosure

*Johannes Streffer is an employee and shareholder of AC Immune and participates in the stock incentive plan.*

# Misfolded proteins: Leading causes of neurodegenerative diseases

Abeta, Tau, a-synuclein, and TDP-43<sup>1</sup> are important NDD<sup>2</sup> drug targets



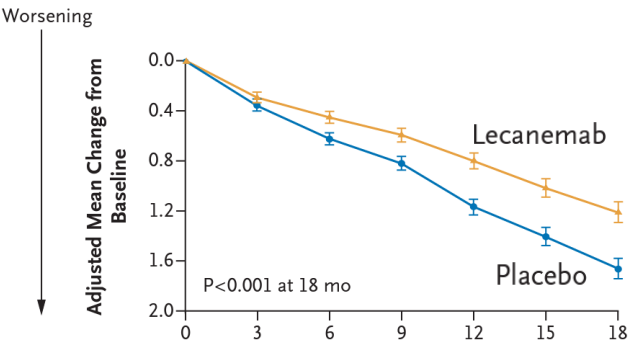
Refs: Soto 2003, <http://www.alz.org/brain>; Nag *et al.* Acta Neuropathologica Communications (2018) 6:33;

(1) TAR DNA-binding protein 43; (2) Neurodegenerative disease; (3) a-synuclein; (4) Fronto Temporal Dementia (5) Limbic-predominant age-related TDP-43 encephalopathy; (6) Amyotrophic lateral sclerosis

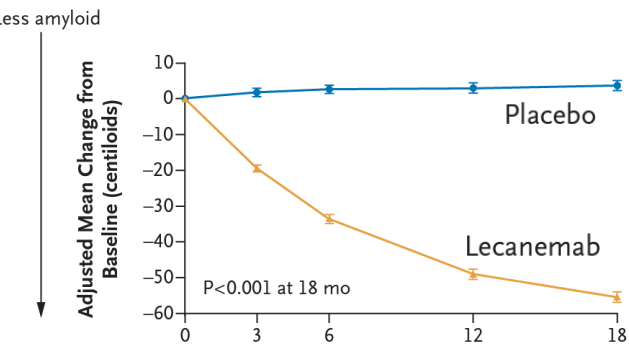
# Successful Immune therapy for early intervention in Alzheimer's Disease

Demonstration that lowering of Amyloid PET burden is valid as a biomarker for clinical effect

A CDR-SB Score

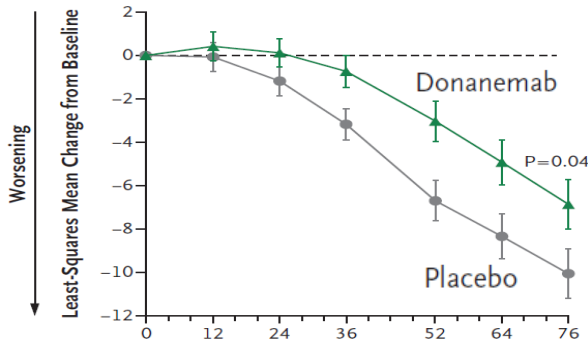


B Amyloid Burden on PET

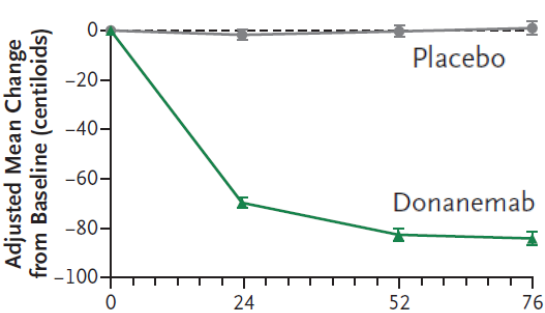


Visit (mo) *van Dyck et al., NEJM 2022*

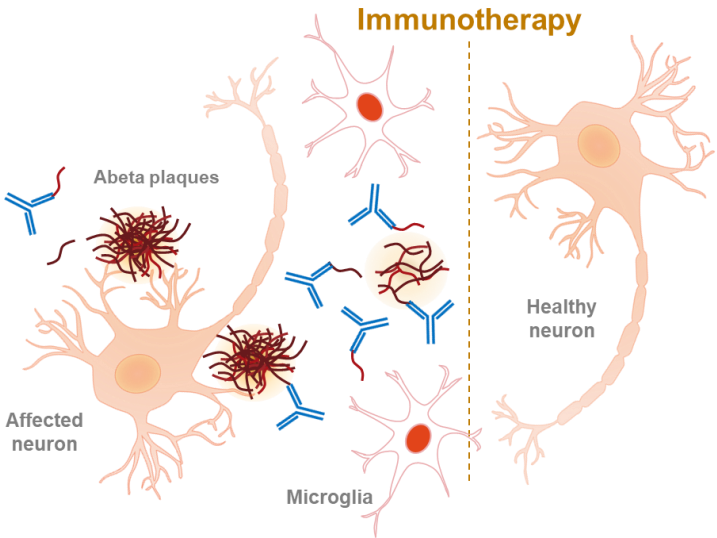
A Primary Outcome: iADRS Score



A Amyloid Plaque Level on Florbetapir PET



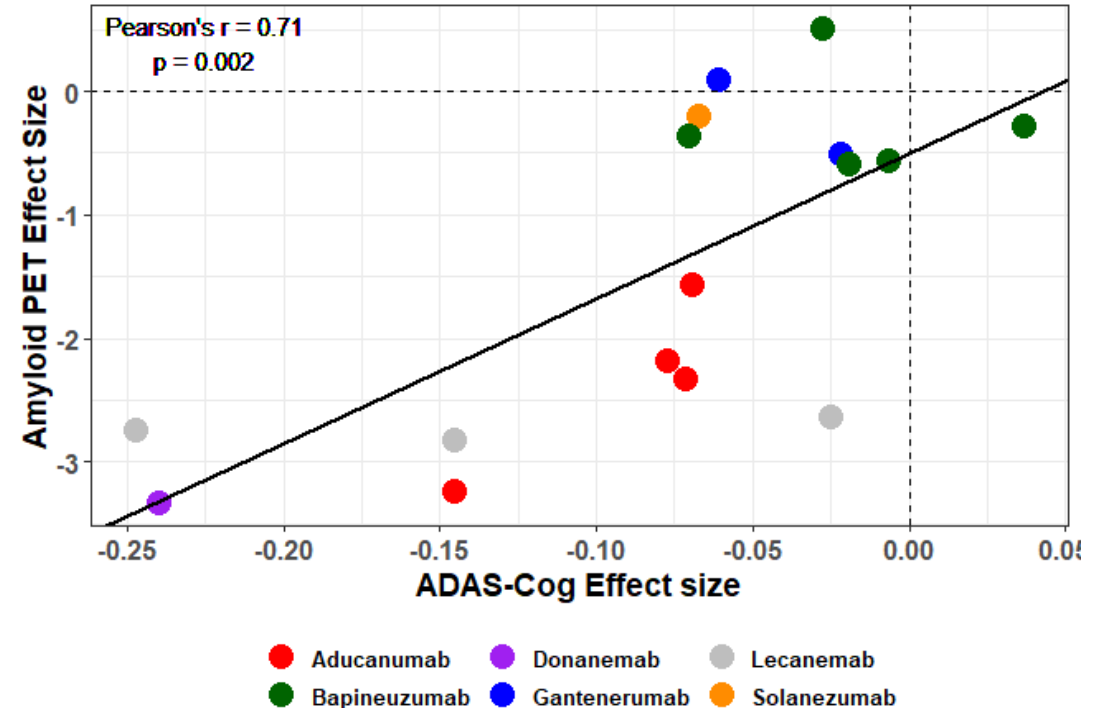
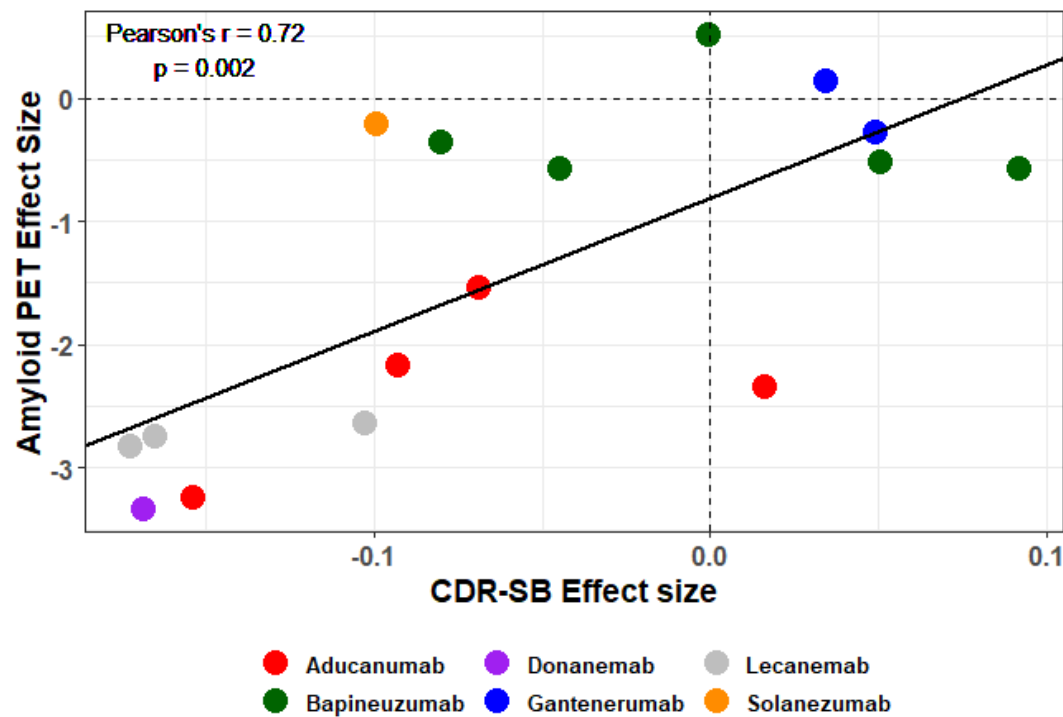
Weeks *Mintun et al., NEJM 2021*



- Targeting small aggregates such as Abeta oligomers or fragments such as Abeta 1-42 and pyroglutamate Abeta3-42 (pGlu-Abeta3-42) has demonstrated clinical utility
- Building on recent clinical proof-of-concept for Abeta mAbs

# Amyloid PET as a surrogate biomarker for clinical effect

Correlations between amyloid PET and ADAS-Cog and CDR-SOB effect sizes (across studies)



Note that data for amyloid PET SUVR were reported only for sub-populations of the original Studies. Each correlation relies on the assumption that effect sizes for PET in these sub-populations are representative of those for the entire populations.

- NIH meta-analysis<sup>1</sup> updated with data from Trailblazer (Phase 2: Donanemab), Clarity (Phase 3: Lecanemab) and Study 201 (Phase 2: Lecanemab) trials
- Clinical improvements apparent - amyloid PET reductions correlate with small effect sizes

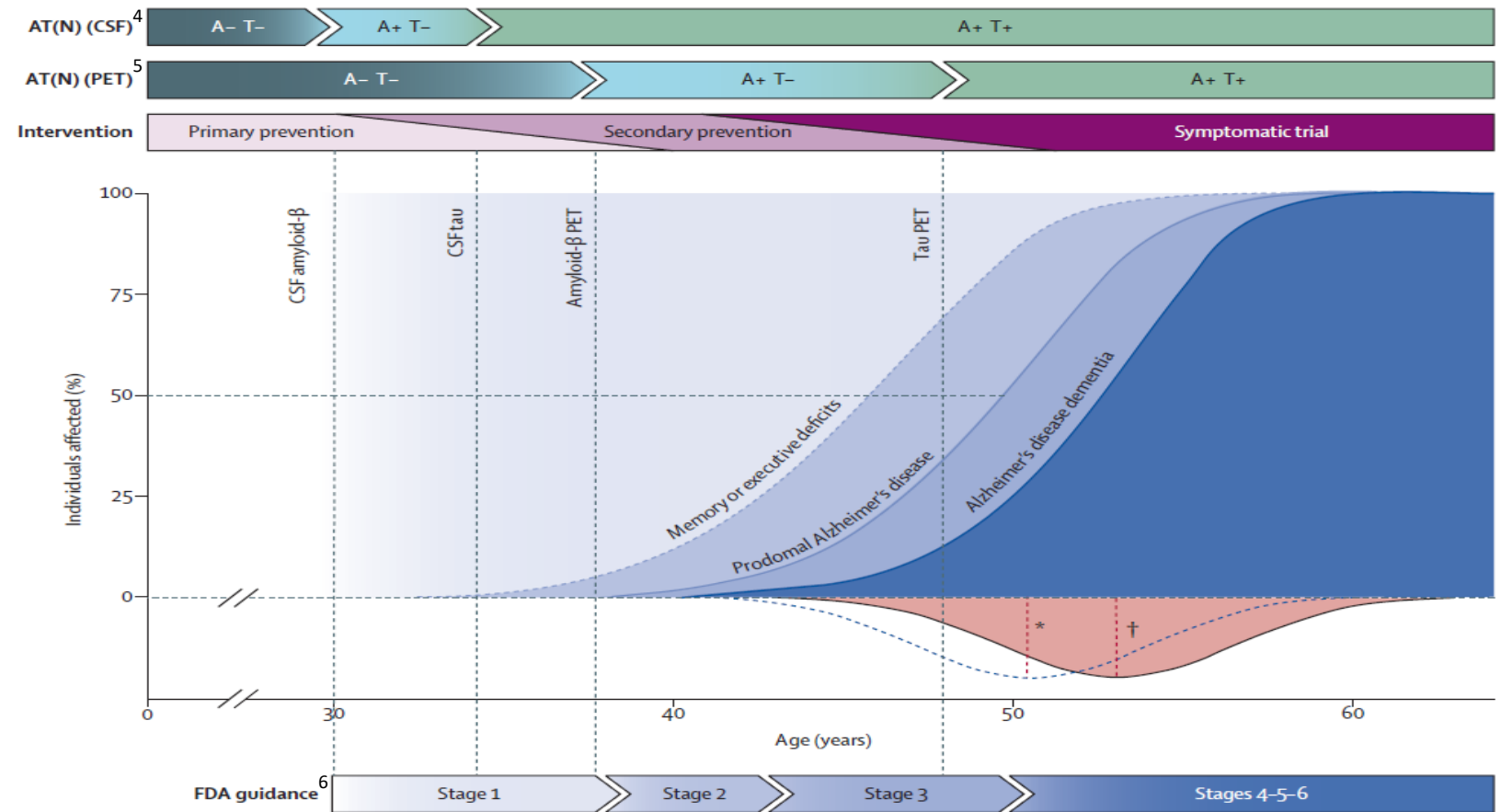
1: Avgerinos et al, Aging Research Reviews, 68 (2021). National Institute on Aging, NIH Study. Meta-analysis based on reported outcomes for 12 Phase III parallel double-blind Placebo-controlled Trials of mAbs targeting Abeta.



# Lifelong accumulation of AD<sup>1</sup> neuropathology in people with DS<sup>2</sup>

AD biomarker patterns in people with DS closely resemble patterns of sporadic AD and ADAD<sup>3</sup>

- AD associated with DS is a genetic form of dementia
  - 75-100% of people with DS have AD like symptoms by age 60.
  - neuropathologic hallmarks of AD also present in AD associated with DS
  - similar pathophysiology and biomarkers as compared to autosomal dominant AD
- Predictive, age-associated biomarker pattern supports prevention studies

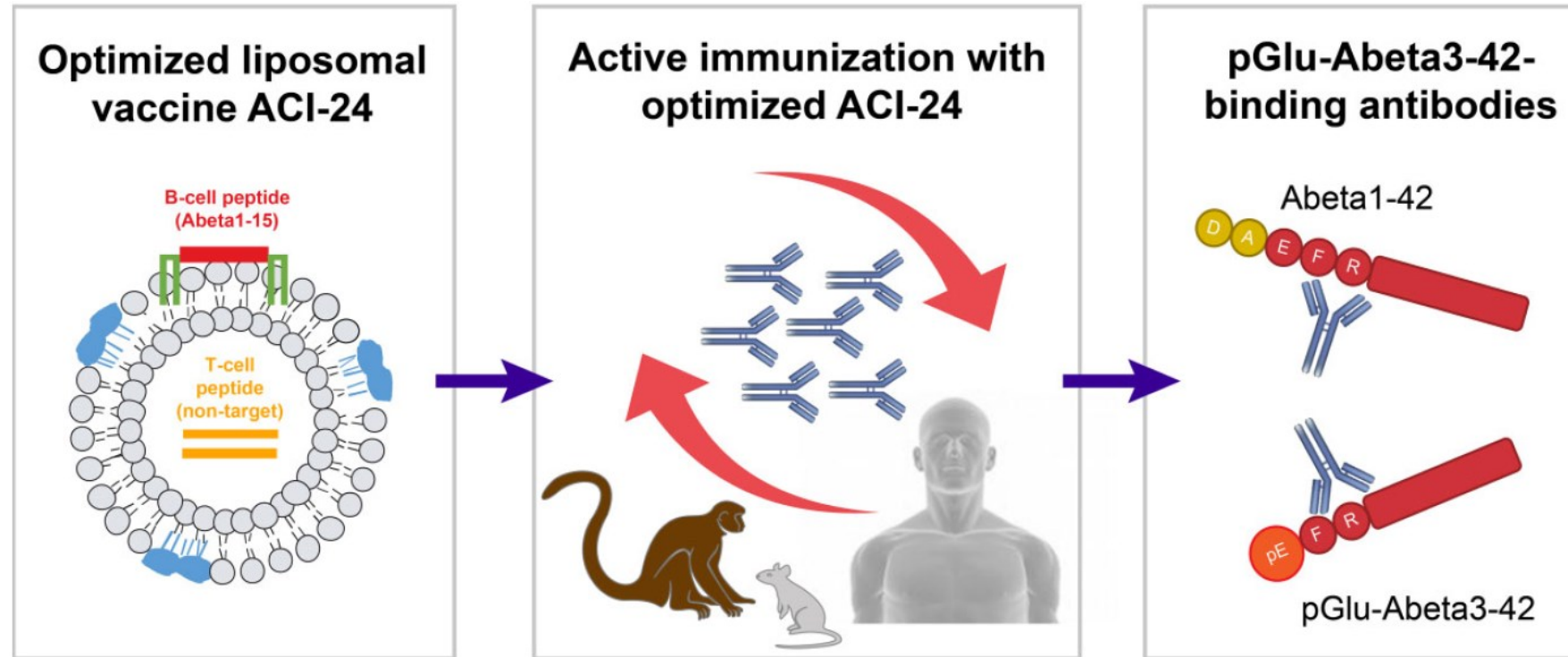


Fortea et al., 2021

(1) Alzheimer's disease; (2) Down syndrome; (3) autosomal dominant AD; (4) A; Amyloid biomarker; T; Tau biomarker; N; Neurodegeneration biomarker; CSF; Cerebro Spinal Fluid; (5) PET; Positron Emission Tomography (6) FDA; Food and Drug Administration

# ACI-24 – Active immunization for early intervention in Alzheimer's Disease

An amyloid beta vaccine that safely drives immunity to key pathological species in Alzheimer's disease: pyroglutamate and amyloid beta



*M. Vukicevic et al., Brain Communications, 2022*

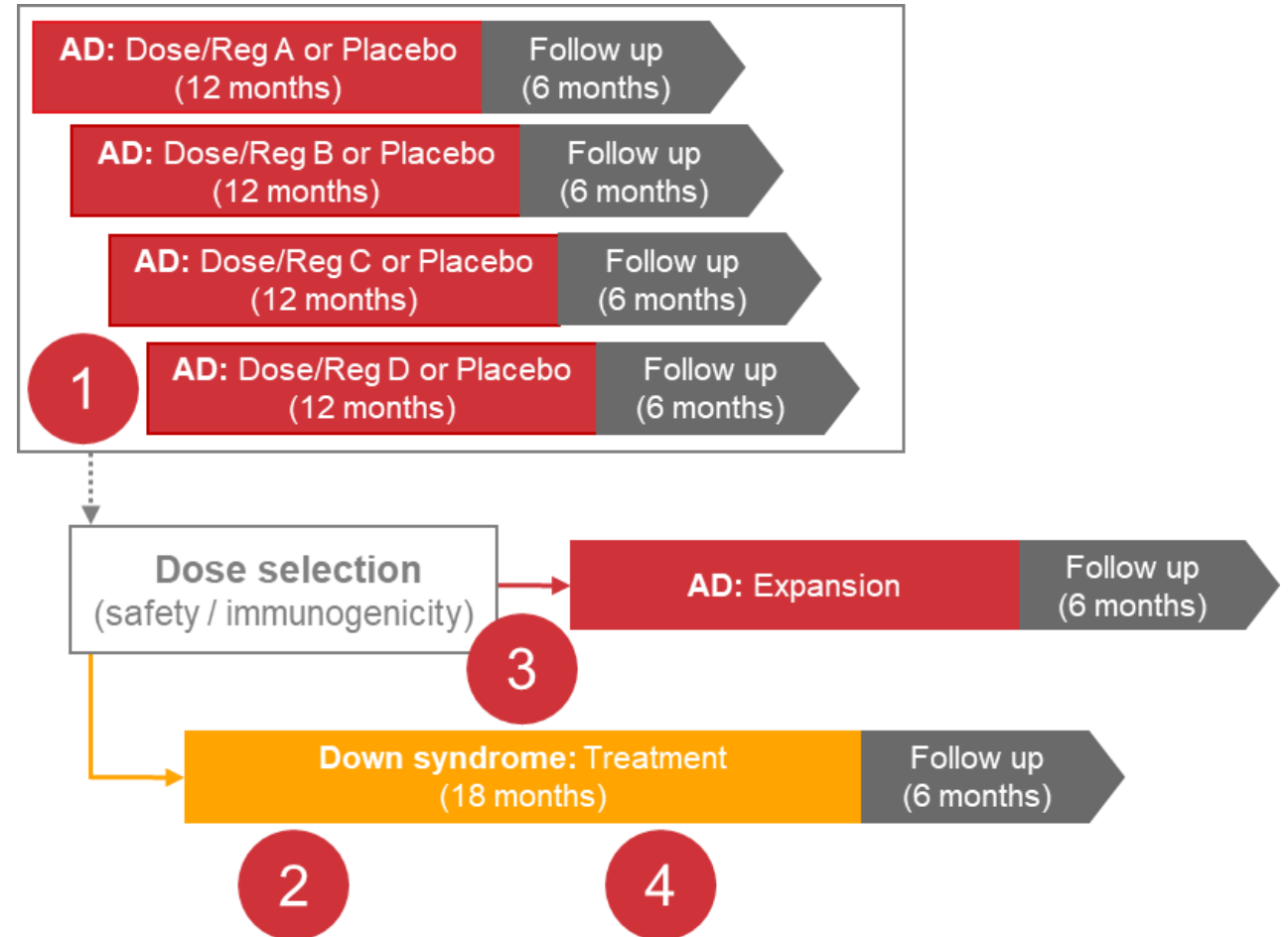
- Initial clinical data have demonstrated safety and encouraging pharmacodynamic response, both in sporadic AD and adults with DS, a specifically vulnerable population predisposed to developing AD.
- ACI-24 has strong immunogenicity against key toxic species including oligomers, Abeta 1-42 and pGlu-Abeta3-42

# ABATE study – clinical trial design in sporadic AD and in people with DS

Biomarker based design allows de-risking and acceleration

## Trial Design features

- Innovative, translational clinical trial design evaluating ACI-24.060 in sporadic AD and in people with DS to understand:
  - immunogenic properties
  - pharmacodynamic effects
- Staggered inclusion of prodromal sporadic AD and people with DS
- Amyloid PET positivity used as a biomarker for study inclusion in both populations
- Possibility to expand one initial cohort with prodromal AD
- Early assessment of safety and immunogenicity
- Trial design supports parallel development in sporadic AD and in people with DS



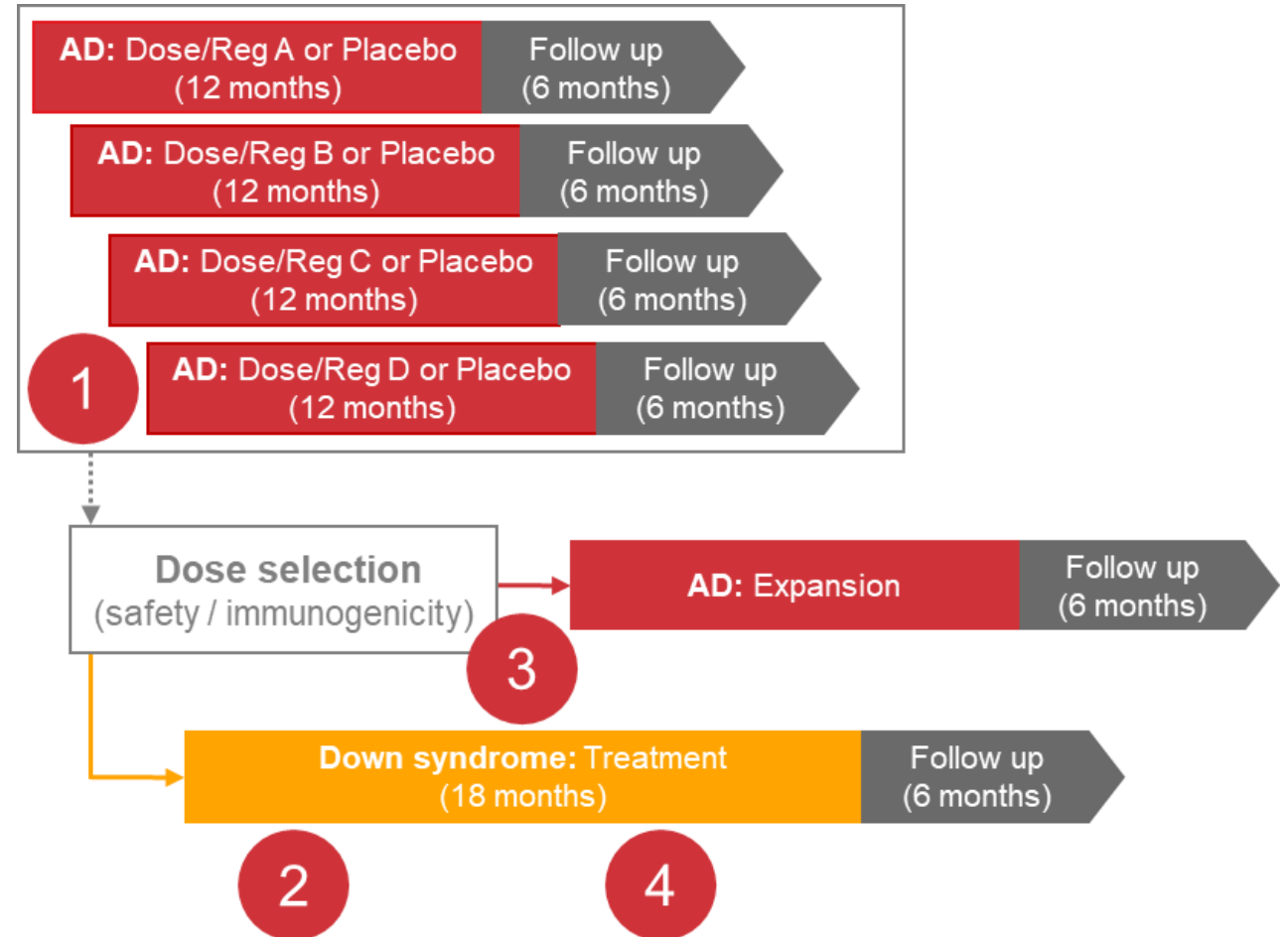


# ABATE study – clinical trial design in sporadic AD and in people with DS

Biomarker based design allows de-risking and acceleration

## Interim analyses and decision points

- Biomarker-based design includes multiple interim analyses, enabling early, informed decision making
- Delivering four distinct decision points:
  1. Safety and Antibody titers in AD
  2. Safety and Antibody titers in DS
  3. Amyloid PET lowering in AD
  4. Amyloid PET lowering in DS
- Multiple opportunities for acceleration:
  - expansion of the study
  - initiation of pivotal trials, and/or
  - initiation of prevention trials

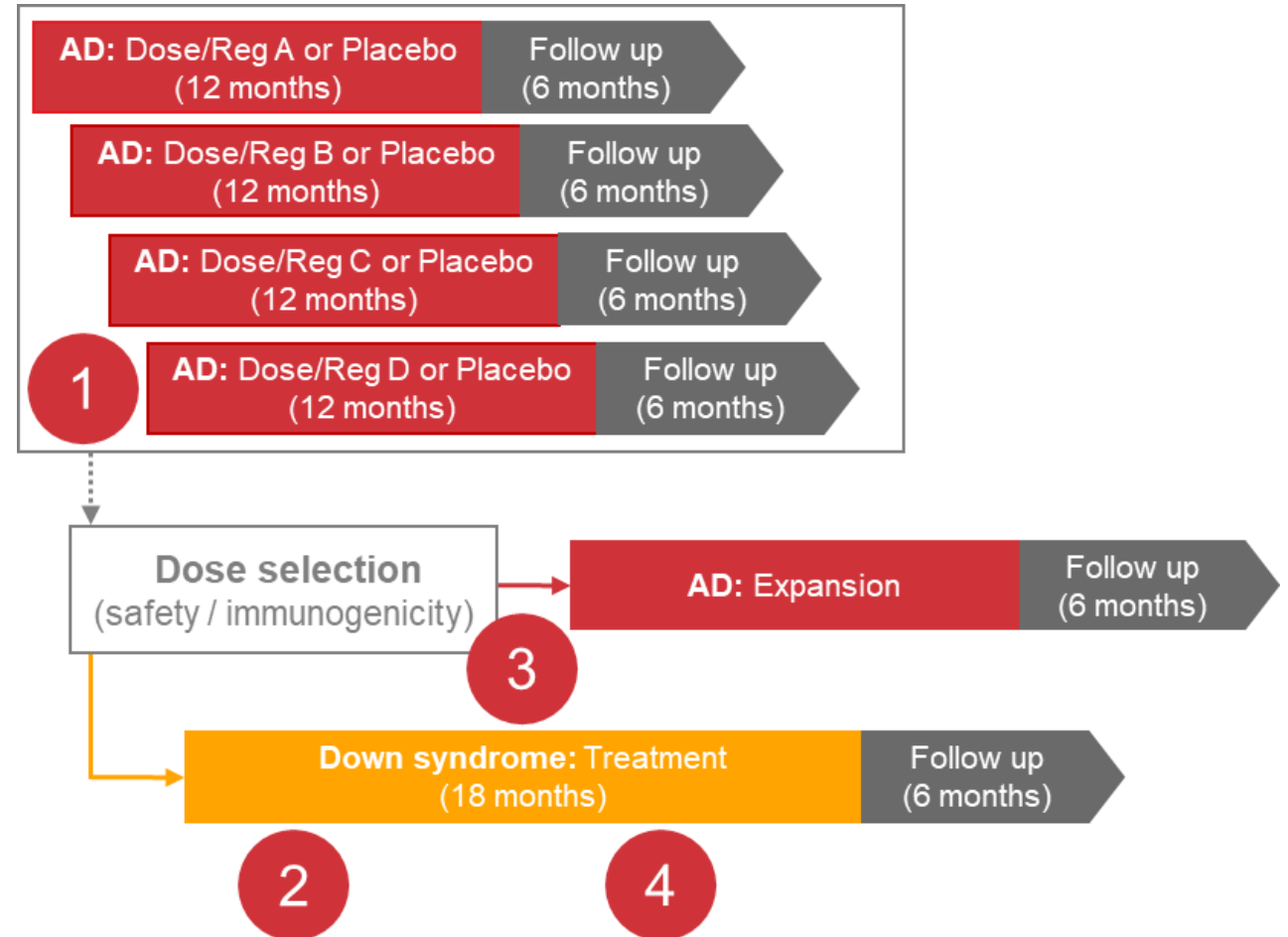


# ABATE study – clinical trial design in sporadic AD and in people with DS

Biomarker based design allows de-risking and acceleration

## Study status and progress

- ACI-24.060 elicited an anti-Abeta antibody response in ABATE's first, low-dose cohort
- ACI-24.060 was generally well tolerated with no safety concerns observed
- Started dosing in a second, higher dose Alzheimer's cohort is ongoing
- Screening of cohort of study participants with DS cleared to begin
- Further safety and immunogenicity findings from ABATE cohorts expected in H2 2023
- Initial data on amyloid plaque reduction measured via PET imaging anticipated in 2024



# ABATE study – biomarker-based development for ACI-24.060

Novel candidate vaccine for the treatment and prevention of Alzheimer's disease

## Biomarker-based design

- Biomarker-based translational medicine benefits from improved clinical evaluation of targeting of toxic Abeta fragments and aggregates in mAb trials

## Precision Medicine

- Clearly defined populations with predictable biomarkers and progression patterns, like prodromal AD and AD in DS, allow Precision Medicine approach

## Treatment and Prevention

- Abeta is now validated as a target
- Amyloid PET burden is established as surrogate biomarker to evaluate treatment effect and inform prevention studies

## ACI-24.060 vaccine

- ACI-24.060 has added non-target T-helper peptides
- Vaccines may provide significant benefits with fewer administrations, better compliance and lower costs

## Acceleration and de-risking

- Innovative trial design for ACI-24.060 enables an efficient evidence-based translational medicine approach with potential rapid entry into pivotal testing and prevention studies



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