



Discovery and optimization of the first-in-class TDP-43 PET tracer

Tamara Seredenina, PhD | AAIC 2023 | July 17th



Disclaimer

This presentation contains statements that constitute “forward-looking statements” within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Forward-looking statements are statements other than historical fact and may include statements that address future operating, financial or business performance or AC Immune’s strategies or expectations. In some cases, you can identify these statements by forward-looking words such as “may,” “might,” “will,” “should,” “expects,” “plans,” “anticipates,” “believes,” “estimates,” “predicts,” “projects,” “potential,” “outlook” or “continue,” and other comparable terminology. Forward-looking statements are based on management’s current expectations and beliefs and involve significant risks and uncertainties that could cause actual results, developments and business decisions to differ materially from those contemplated by these statements. These risks and uncertainties include those described under the captions “Item 3. Key Information – Risk Factors” and “Item 5. Operating and Financial Review and Prospects” in AC Immune’s Annual Report on Form 20-F and other filings with the Securities and Exchange Commission. These include: the impact of Covid-19 on our business, suppliers, patients and employees and any other impact of Covid-19. Forward-looking statements speak only as of the date they are made, and AC Immune does not undertake any obligation to update them in light of new information, future developments or otherwise, except as may be required under applicable law. All forward-looking statements are qualified in their entirety by this cautionary statement.

This presentation is strictly confidential, is being distributed to a limited range of invited persons solely for their own information, may not be distributed to the press or any other person, and may not be reproduced or published, in whole or in part, in any form.

Disclosures

Tamara Seredenina is an employee of AC Immune entitled to stock options

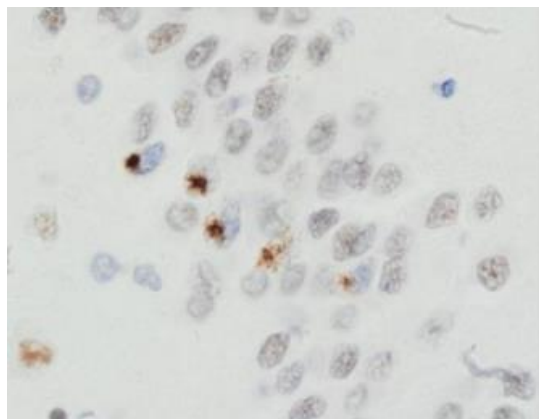
Funding

Grant from the Michael J Fox Foundation



TDP-43 PET¹ tracers can improve the diagnosis and treatment of NDD²

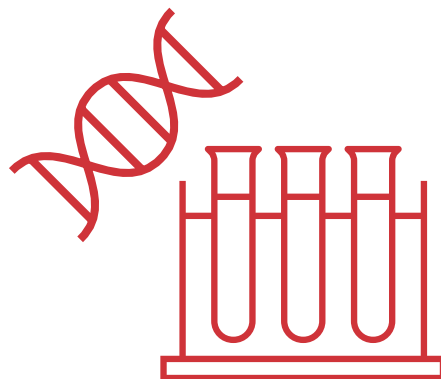
TDP-43 pathology is present in multiple neurodegenerative disorders



Neumann et al., Acta Neuropath 2023

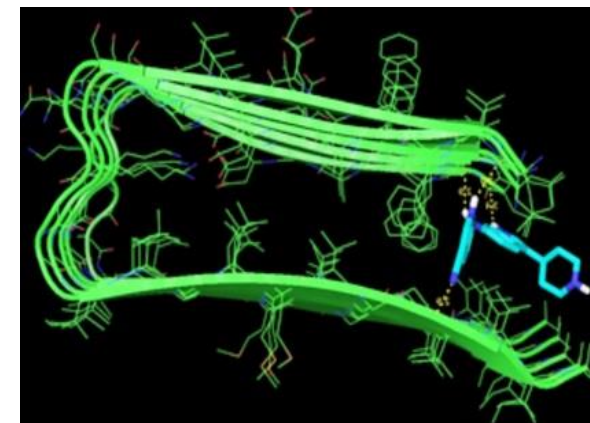
- Primary pathology in ALS³, FTLD-TDP⁴ and LATE⁵
- Co-pathology in AD⁶, PD⁷, HD⁸ and CTE⁹

Early diagnosis of TDP-43 proteinopathies is currently not available



- Low abundance of pathological TDP-43 species limits utility of fluid biomarkers
- Seed amplification assay holds promise

AC Immune's Morphomer® platform enables precision medicine approach



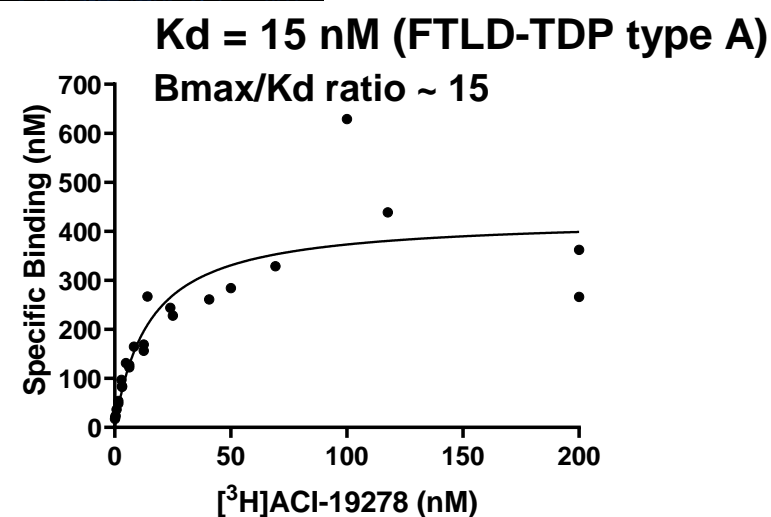
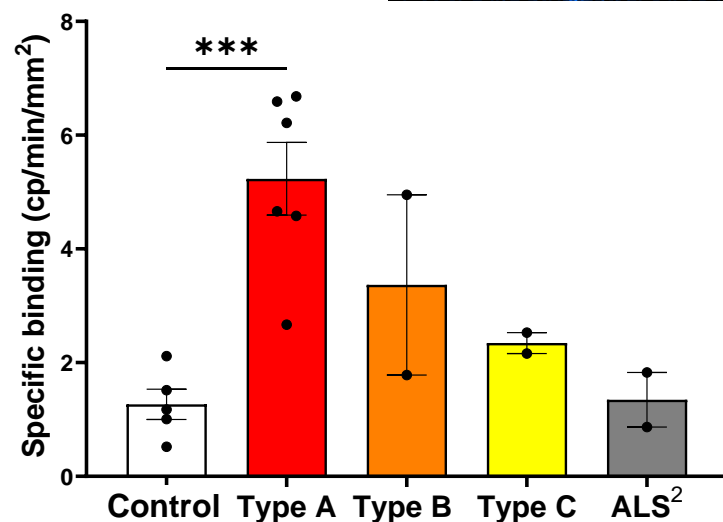
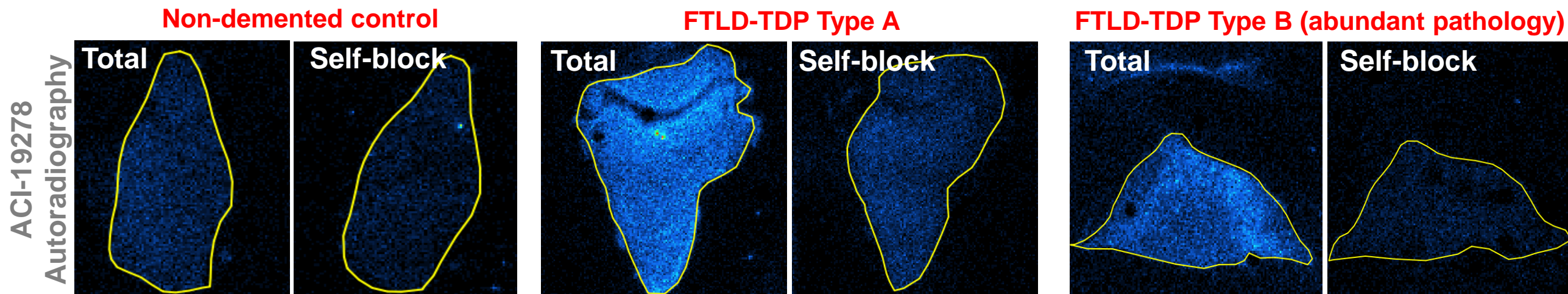
- Non-peptidic, small molecules with CNS-drug properties binding to misfolded proteins
- Delivered Tau tracer PI-2620 and a-syn tracer ACI-12589

- ACI-19278, first-in-class TDP-43 PET tracer, identified using ACI Morphomer® platform

(1) Positron emission tomography; (2) Neurodegenerative disease; (3) Amyotrophic lateral sclerosis; (4) Frontotemporal lobar degeneration with TDP-43 pathology; (5) Limbic-predominant age-related TDP-43 encephalopathy; (6) Alzheimer's disease; (7) Parkinson's disease; (8) Huntington's disease; (9) Chronic traumatic encephalopathy

[³H]ACI-19278 target engagement and binding affinity

Classical autoradiography on FTLD-TDP¹ brain sections

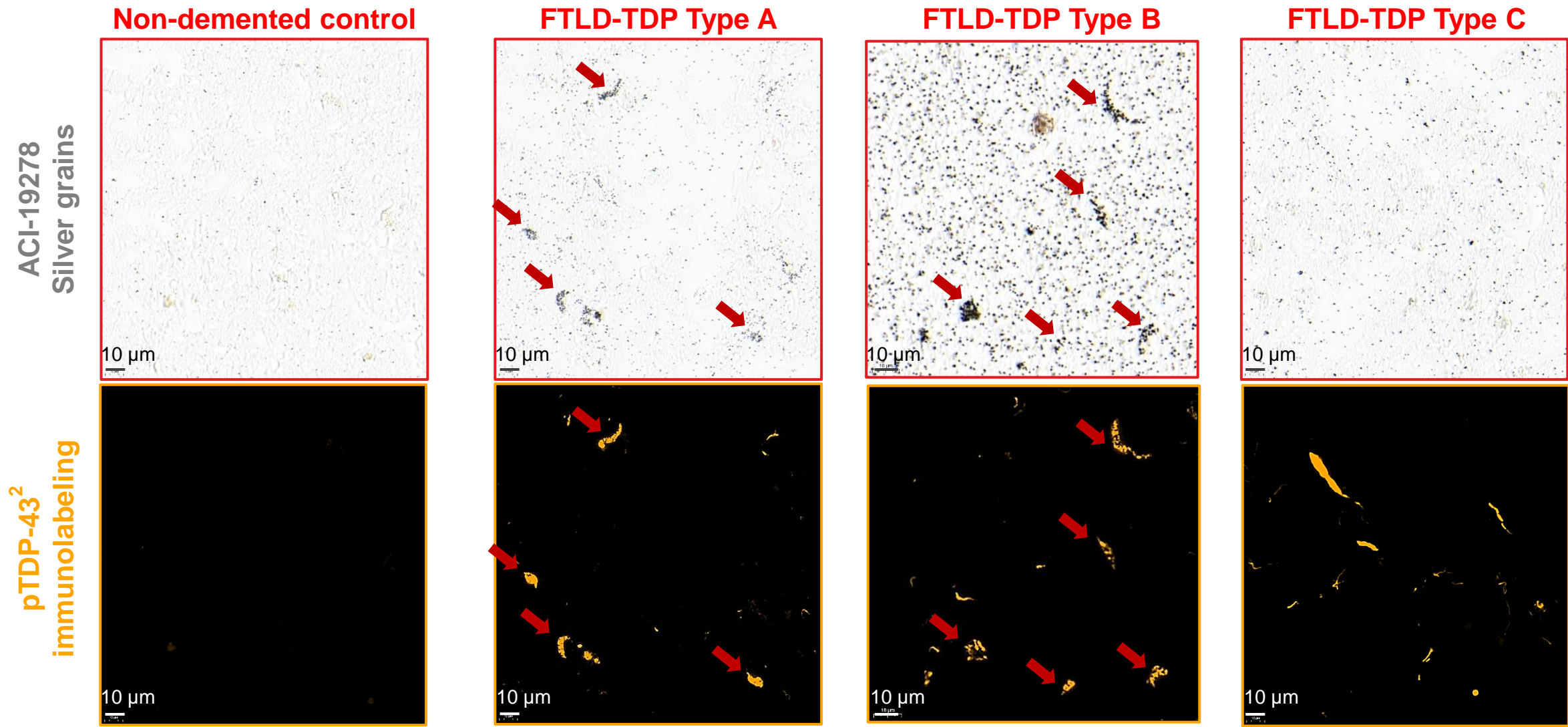


- Low nanomolar binding affinity and the first proof of target engagement on brain samples with FTLD-TDP type A pathology by a method with the resolution translatable to human PET
- FTLD-TDP type A pathology is commonly found in brains of FTLD-TDP GRN³, LATE⁴ and AD⁵

(1) Frontotemporal lobar degeneration with TDP-43-immunoreactive pathology; (2) Amyotrophic lateral sclerosis; (3) mutation in the progranulin gene; (4) limbic-predominant age-related TDP-43 encephalopathy; (5) Alzheimer's Disease

[³H]ACI-19278 target engagement on FTLD-TDP¹ pathology types

Specific binding to TDP-43 pathological aggregates by high resolution autoradiography



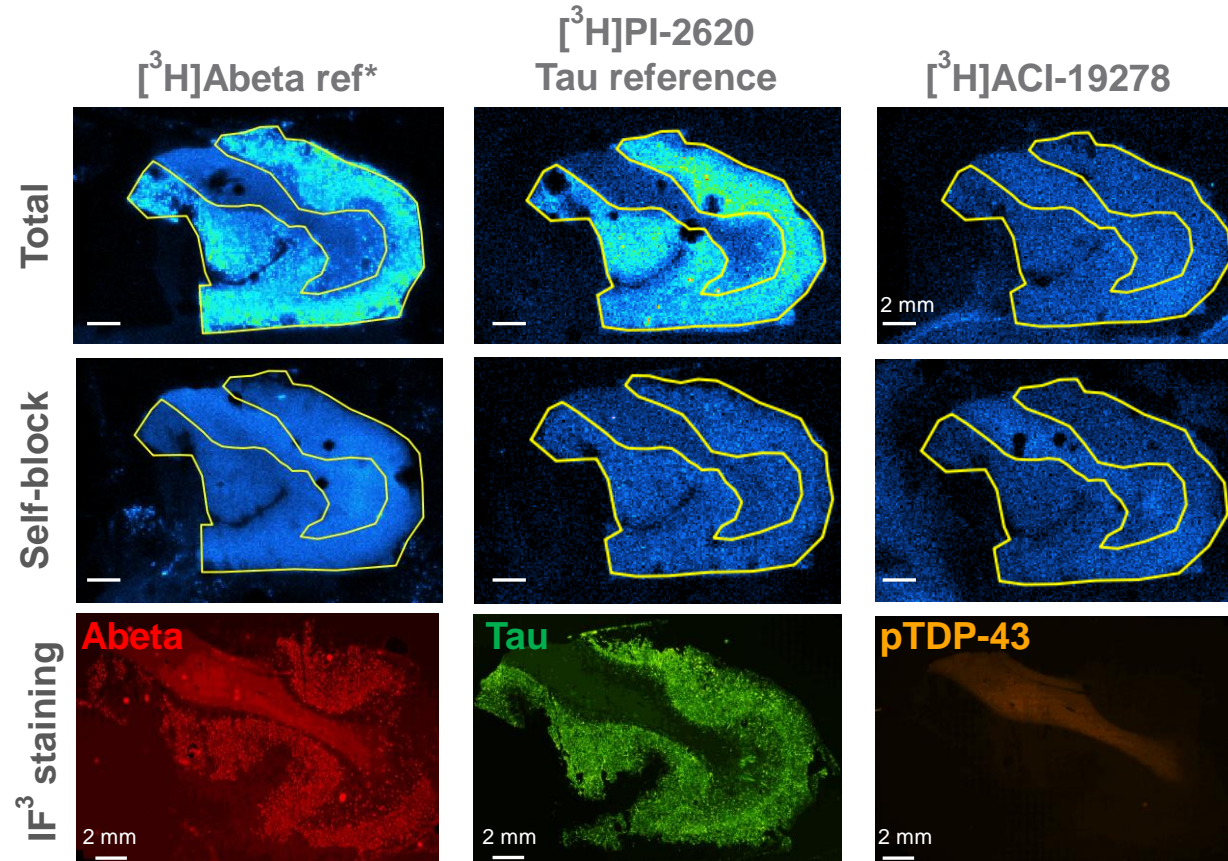
- Strong target engagement on human brain samples with FTLD-TDP type A and B pathology, showing compound co-localization with pTDP-43 antibody labeling

(1) Frontotemporal lobar degeneration with TDP-43-immunoreactive pathology; (2) phospho-TDP-43 pS409/410 antibody

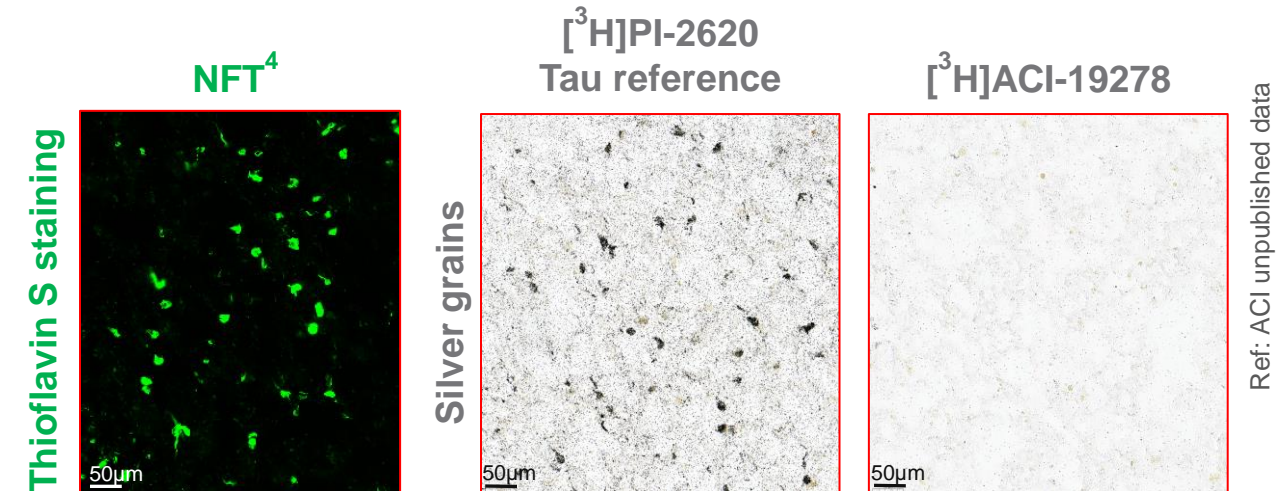
[³H]ACI-19278 is selective over Abeta and pathological Tau

Selectivity on tissue sections from brains of Alzheimer's disease

Autoradiography in AD¹ tissue sections



High-resolution ARG² in Tau-rich AD sections



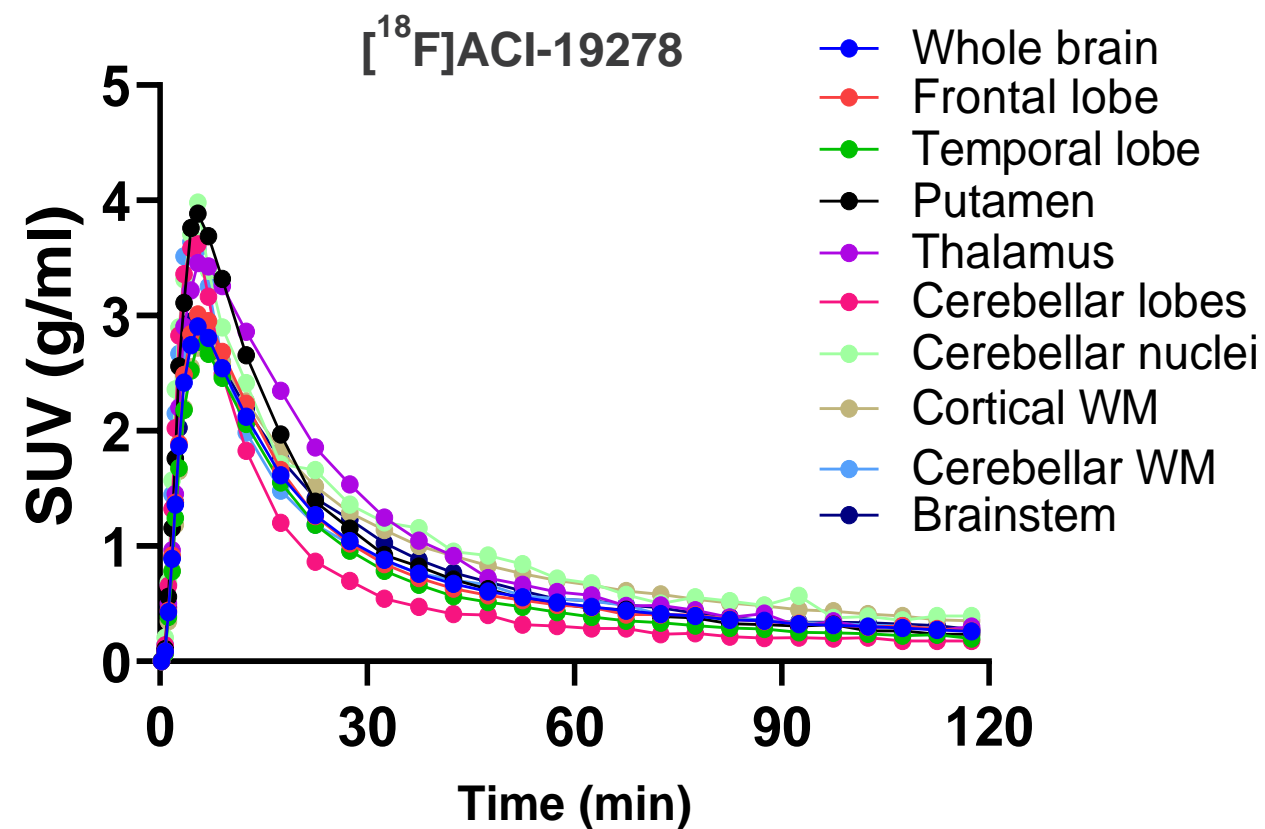
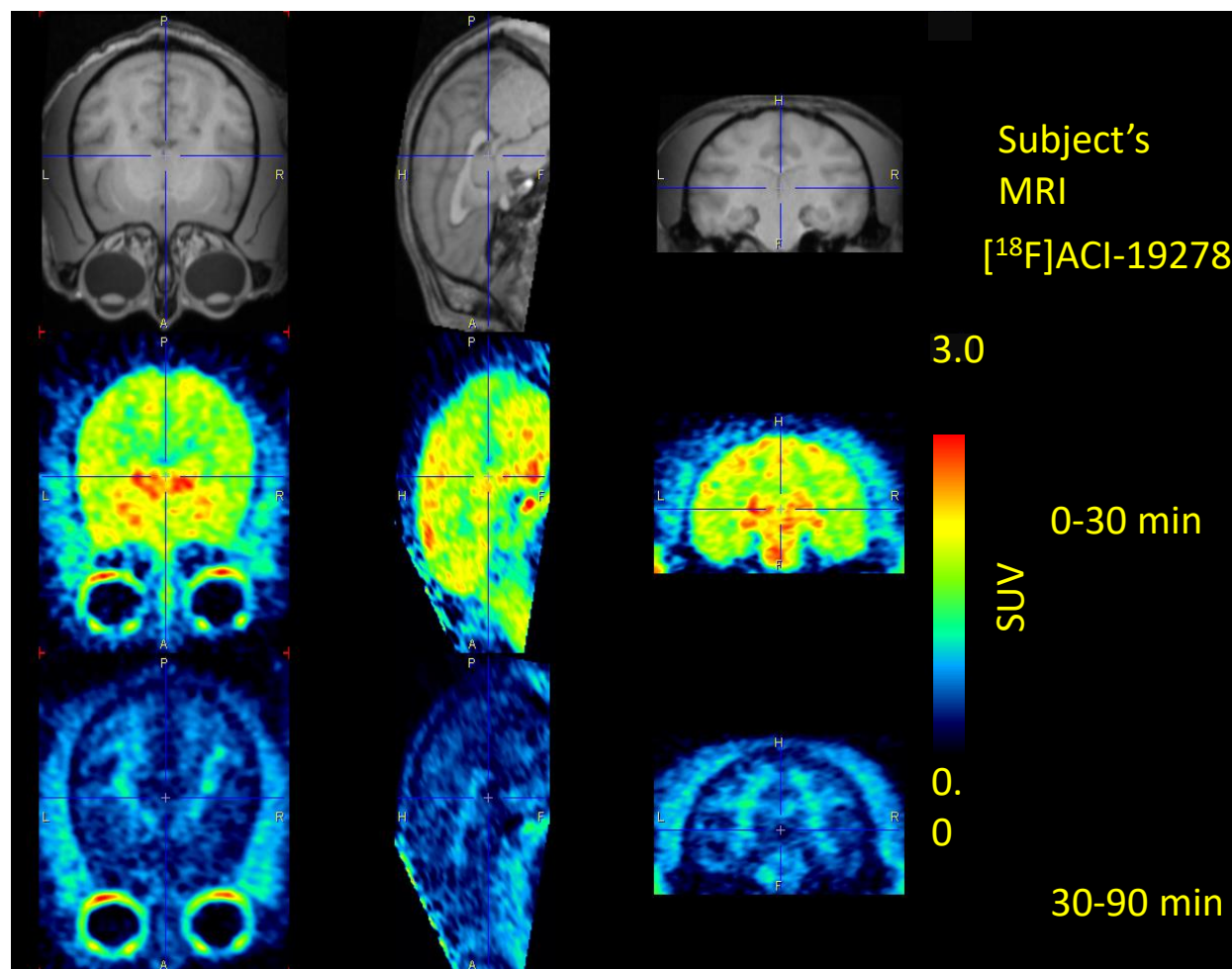
Ref: ACI unpublished data

- ACI-19278 displays selectivity over co-pathologies such as Abeta and Tau in AD brain tissue sections

(1) Alzheimer's disease; (2) Autoradiography; (3) Immunofluorescence; (4) neurofibrillary tangles; *visualization scale for Abeta ref was set differently from the other compounds

[¹⁸F]ACI-19278 pharmacokinetic profile

[¹⁸F] PK profile in brain after intravenous administration in non-human primates



Ref: ACI unpublished data

- [¹⁸F]ACI-19278 readily entered NHP brain upon intravenous administration
- Peak whole-brain standardized uptake value (SUV) > 2.5 % injected dose
- Fast washout suitable for human PET

AC Immune's first-in-class TDP-43 PET tracer

Conclusions

1

- Building on our extensive experience in tracer development, several series with distinct chemical scaffolds identified that bind specifically to pathological TDP-43 aggregates

2

- First-in-class TDP-43 ligand ACI-19278 shows:
 - Low nM Kd on FTLD-TDP brain tissue
 - Potential to detect TDP-43 pathology in various indications, including FTLD-TDP, ALS, AD and LATE
 - Selectivity over common co-pathologies including Abeta, Tau and a-synuclein
 - Robust brain uptake and fast washout in non-human primates
 - Analogs with similar binding profile available

3

- First-in-human evaluation to start in Q2 2024

4

- Medicinal chemistry optimization continues to explore SAR and enrich our TDP-43 PET tracer library with additional candidates

Ref: ACI unpublished data

Acknowledgements



Brain banks

- **Neurodegenerative Disease Brain Bank UCSF, Prof. William Seeley** (funding support from NIH grants P01AG019724 and P50AG023501, the Consortium for Frontotemporal Dementia Research, and the Tau Consortium).
- **Netherlands Brain Bank**, Netherlands Institute for Neuroscience, Amsterdam. All Material has been collected from donors from whom a written informed consent for brain autopsy and the use of the material and clinical information for research purposes had been obtained by the NBB.
- **Queen Square Brain Bank for Neurological Disorders, UCL, Prof. Tammaryn Lashley**
- **NeuroResource**, UCL Queen Square Institute of Neurology, **Dr. Jia Newcombe**

Efthymia Vokali
Nicolas Dreyfus
Elodie Chevalier
Tariq Afroz
Monisha Ratnam
Tania Melly
Mathieu Clavel
Dorian Charmey
Thomas Jaquier
Myriam Ravache
Christophe Delgado
Jacqueline Kocher
Andreia Serra
Heiko Kroth
Jerome Molette
Viktoria Gerasymchuk
Just Genius
Ruth Luthi-Carter
Francesca Capotosti
Andrea Pfeifer
Johannes Streffer
Marie Kosco-Vilbois



Prof. John Trojanowski



Dr. Harro Seelaar



We continue to shape the future of neurodegeneration by discovering and developing breakthrough therapies through pioneering science and precision medicine



Web:

<https://www.acimmune.com/>



Social media:

www.linkedin.com/company/ac-immune



Presenter:

tamara.seredenina@acimmune.com

Business development: bd@acimmune.com

Investors and Media: communications@acimmune.com