Anti-drug Antibodies do not Impact Pharmacokinetics, Efficacy, and Safety of Tirzepatide: Analysis of Data from Seven Phase 3 Studies

ADA were

assessed at baseline and

throughout the

study to the

End of Treatment Period

Primary end point

Week 40

Week 40

Week 52

Week 52

Week 40

Week 52

Week 52

TZP All

(N=5119)

58.2 (10.5)

2174 (42.5)

3339 (65.3)

8.31 (0.97)

90.0 (20.5)

32.4 (6.4)

9.1 (6.9)

Comparator

Placebo QW

Semaglutide 1 mg QW

Titrated Insulin Degludec QD

Titrated Insulin Glargine QD

Placebo QW

Dulaglutide 0.75 mg QW

None

TZP 15 mg

(N=1716)

58.0 (10.7)

741 (43.2)

1141 (66.5)

8.29 (0.99)

90.1 (20.5)

32.5 (6.4)

9.2 (7.0)

ourse of the

Primary Endpoint





Abbreviations

A-Gis = alpha-glucosidase inhibitors; ADA = anti-drug antibodies; BMI = body mass index; CL/F = apparent clearance; CP = cut point; GIP = glucose-dependent insulinotropic polypeptide; GLP = glucagon-like peptide; HbA1c = glycated hemoglobin; MET = metformin; N= number of patients; NAb = neutralizing antibodies; nGIP = native GIP; nGLP = native GLP; OAM = oral antihyperglycemic medication; PK = pharmacokinetics; QD = once-daily; QW = once-weekly; R = receptor; SD = standard deviation; SGLT2i = sodiumglucose co-transporter-2 inhibitor; SU = sulfonylurea; TE = treatment emergent; TZD = thiazolidinedione; TZP = tirzepatide.

References

²Frias et al. N Engl J Med 2021;385(6):503-515 ³Ludvik et al. Lancet 2021;398(10300):583-589 ⁵Dahl et al. JAMA 2022;327(6):534-545.

Data presented as mean (SD) for c	ontinuous data or n (%) for cate	egorical data. N=tota	I number of patients	in each group. n=nur	nber of patients with	specified characteristic.
Data from SURPASS-1 to -5, SUR	PASS-Japan mono, and SURP	ASS-Japan combo tr	rials.			

Tirzepatide 15 mg QW ± Background Antihyperglycemic Medication

Placebo or Active Comparator ± Background Antihyperglycemic Medication

Treatment Period

.5 mg 10 mg 12.5 mg

(Sample Size), Randomization ratio

Background glucose lowering therap

(N=478) 1:1:1:

(N= 1878) 1:1:1:1

(N=1437) 1:1:1:

(N=1995) 1:1:1:3

± Metformin ± SU ± SGLT-2i

(N=475) 1:1:1:1

Titrated Insulin Glargine ± Metformin

(N=636) 1:1:1:1

None

(N=443) 1:1:1

± SU ± biguanides ± TZD ± a-Gis ± glinides ± SGLT-2i

TZP 5 mg

(N=1701)

58.1 (10.4)

749 (44.0)

1098 (64.6)

8.31 (0.97)

89.7 (20.5)

32.4 (6.5)

9.1 (6.9)

+ Metformin

+ Metformin ± SGLT-2

-3 -2 0 4 8 12 16 20

SURPASS-1

SURPASS-2

SURPASS-

SURPASS-4

SURPASS-5

SURPASS-Japan Mono

SURPASS-Japan Combo

Baseline Characteristics

Age, years

Sex, female

Race, white

Body weight, k

Duration of diabetes, years

BMI, kg/m²

HbA1c, %

American Diabetes Association – 82nd Annual Scientific Sessions; New Orleans, LA; 3-7 June 2022

TZP 10 mg

(N=1702)

58.5 (10.4)

684 (40.2)

1100 (64.6)

8.32 (0.95)

90.1 (20.6)

32.4 (6.4)

9.0 (6.7)

Boris Calderon¹, Garrett Mullins¹, Michael E. Hodsdon¹, Ying Grace Li¹, Greg Anglin², Shweta Urva¹, Karen Schneck¹, Jennifer N. Bardos¹, Ricardo Fonseca Martins¹, Katelyn Brown¹ ¹Eli Lilly and Company, Indianapolis, IN, USA; ²Eli Lilly Canada Inc, Toronto, ON, Canada

The top and bottom margins of the boxplot represent the 75th and 25th percentiles; the whiskers extend to ±1.5x interquartile range from median; solid circles denote individual values outside the whiskers. There were low numbers of samples with high ADA titer and clearance at the highest titers was consistent with the range seen in lower titer and TE ADA- groups.

Acknowledgments:

¹Rosenstock et al. Lancet 2021;398(10295):143-155. ⁴Del Prato et al. Lancet 2021; 398(10313): 1811–1824.

This study was sponsored by Eli Lilly and Company. Medical writing and editorial assistance was provided by Ana Hickey PhD, Eli Lilly and Company

Disclosures:

BC, GM, MEH, YGL, GA, SU, KS, JNB, RFM, and KB are employees and stockholders of Eli Lilly and Company.

KEY RESULTS INCIDENCE OF IMMUNOGENICITY

	Baseline N=5025	Postbaseline N=5025		
Pre-existing ADA	353 (7.0)			
TE ADA+		2570 (51.1)		
Median ADA titer	1:20	1:160		
ADA titer range	1:10 to 1:10240			
TE ADA+ titer range		1:20 to 1:81920		
NAb against TZP activity on GIPR	2 (<0.1)	94 (1.9)		
NAb against TZP activity on GLP-1 R	2 (<0.1)	107 (2.1)		
Cross-reactive binding ADA to nGIP	97 (1.9)	1705 (33.9)		
Cross-reactive binding ADA to nGLP-1	34 (0.7)	716 (14.2)		
Cross-reactive NAb against nGIP	0	43 (0.9)		
Cross-reactive NAb against nGLP-1	0	18 (0.4)		
nted as n (%), median, or range. N = total ADA-evaluable patients. n = number of patients with characteristic. Postbaseline defined as during the period until primary endpoint at Week 40 (SURPASS-1, -2, and -5) or Week 52 (SURPASS -3, -4, -Japan-mono, and -Japan-combo).				

Efficacy Results: HbA1c change from baseline was not affected by ADA status or titer

HbA1c change from baseline (%) by ADA status



HbA1c change from baseline for tirzepatide-treated patients with ADA titer <1:5120 vs ≥1:5120



Boxplot. The median is indicated by horizontal line in the central box

CONCLUSIONS

- patients developed TE ADA.
- at endpoint
- ADA status
- on PK, efficacy, or safety profile.
- tirzepatide PK, efficacy, or safety.

Safety Results HYPERSENSITIVITY REACTIONS



Across seven Phase 3 clinical studies, approximately 50% of tirzepatide-treated

Tirzepatide pharmacokinetic profile was not affected by ADA status or ADA titer.

TE ADA status or titer had no discernible impact on HbA1c change from baseline

More tirzepatide-treated patients who developed ADA experienced hypersensitivity or injection site reactions than those who did not develop ADA.

No pattern was detected between the time of the hypersensitivity or injection site reaction event reporting and ADA status, and the events resolved irrespective of

NAb status assessment on the low sample size showed no visual clinical impact

Overall, immunogenicity was not associated with any impact on

	Hypersensitivity reactions - n (%)			
TE ADA Status	TZP 5 mg (N=1701)TZP 10 mg (N=1702)TZP 15 mg (N=1716)TZP (N=5			
TE ADA+	32 (1.88)	31 (1.82)	43 (2.51)	106 (2.07)
TE ADA-	26 (1.53)	26 (1.53)	21 (1.22)	73 (1.43)

The events in TE ADA+ patients were mostly mild to moderate in severity.

• The majority of reactions first occurred within 16 weeks of receiving tirzepatide and resolved independent of TE ADA status or titer.

No anaphylactic reactions were observed in tirzepatide-treated patients.

INJECTION SITE REACTIONS

	Injection site reactions - n (%)				
TE ADA Status	TZP 5 mg (N=1701)TZP 10 mg (N=1702)TZP 15 mg (N=1716)TZP All (N=5119)				
TE ADA+	25 (1.47)	38 (2.23)	56 (3.26)	119 (2.32)	
TE ADA-	7 (0.41)	7 (0.41)	4 (0.23)	18 (0.35)	
Not evaluable	1 (0.06)	1 (0.06)	0	2 (0.04)	

All events were nonserious and nonsevere.

The majority of reactions first occurred within 16 weeks of receiving tirzepatide and resolved irrespective of TE ADA status or titer level.

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American Diabetes Association - 82nd Annual Scientific Sessions; New Orleans, LA, USA; 3 – 7 June 2022

Anti-drug Antibodies do not Impact Pharmacokinetics, Efficacy, and Safety of Tirzepatide: Analysis of Data from Seven Phase 3 Studies

Boris Calderon¹, Garrett Mullins¹, Michael E. Hodsdon¹, Ying Grace Li¹, Greg Anglin², Shweta Urva¹, Karen Schneck¹, Jennifer N. Bardos¹, Ricardo Fonseca Martins¹, Katelyn Brown¹

> ¹Eli Lilly and Company, Indianapolis, IN, USA; ²Eli Lilly Canada Inc, Toronto, ON, Canada





OBJECTIVE

BACKGROUND

- in body weight.¹⁻⁵

Since tirzepatide is a 39 amino acid synthetic peptide, it could generate an immune response.

¹Rosenstock et al. Lancet 2021;398(10295):143-155; ²Frias et al. N Engl J Med 2021;398(10300):583-589; ⁴Del Prato et al. Lancet 2021; 398(10313): 1811–1824; ⁵Dahl et al. JAMA 2022;327(6):534-545. Abbreviations: GIP = glucose-dependent insulinotropic polypeptide; GLP = glucagon-like peptide.

To evaluate treatment-emergent (TE) anti-drug antibodies (ADA) in tirzepatide-treated participants across seven Phase 3 trials and its potential effect on pharmacokinetics (PK), efficacy, and safety.

Tirzepatide, a once weekly GIP/GLP-1 receptor agonist, was recently approved in the US for treatment of people with type 2 diabetes (T2D).

In multiple Phase 3 clinical trials, tirzepatide improved glycemic control and resulted in significant reductions





MULT-TERED TESTING STRATEGY

- Multi-tiered immunogenicity testing strategy with 1 ligandbinding method used for several assays:
 - Tier 1. ADA screening
 - Tier 2a. ADA confirmation
 - Tier 2b. Cross-reactive binding to nGIP
 - Tier 2c. Cross-reactive binding to nGLP-1
 - Tier 3. ADA titration
- Cell-based method used for 2 NAb assays: Tier 4a. NAb on GIPR Tier 4b. NAb on GLP-1R

nGIP and nGLP-1.

Abbreviations: ADA = anti-drug antibodies; CP = cut point; GIP = glucase-dependent insulinotropic polypeptide; NAb = neutralizing antibodies; nGIP = native GIP; nGLP = native GLP; R = receptor.

In silico classifications to detect cross-reactive NAb against





The SURPASS Program Study Design

Study Design



Abbreviations: A-Gis = alpha-glucosidase inhibitors; BMI = body mass index; HbA1c = glycated hemoglobin; MET = metformin; N = number of patients; OAM = oral antihyperglycemic medication; QD = once-daily; QW = once-weekly; SD = standard deviation; SGLT2i = sodium-glucose co-transporter-2 inhibitor; SU = sulfonylurea; TZD = thiazolidinedione; TZP = tirzepatide.



Baseline Characteristics

	TZP 5 mg (N=1701)	TZP 10 mg (N=1702)	TZP 15 mg (N=1716)	TZP All (N=5119)
ars	58.1 (10.4)	58.5 (10.4)	58.0 (10.7)	58.2 (10.5)
male	749 (44.0)	684 (40.2)	741 (43.2)	2174 (42.5)
vhite	1098 (64.6)	1100 (64.6)	1141 (66.5)	3339 (65.3)
%	8.31 (0.97)	8.32 (0.95)	8.29 (0.99)	8.31 (0.97)
eight, kg	89.7 (20.5)	90.1 (20.6)	90.1 (20.5)	90.0 (20.5)
/m²	32.4 (6.5)	32.4 (6.4)	32.5 (6.4)	32.4 (6.4)
n of diabetes, years	9.1 (6.9)	9.0 (6.7)	9.2 (7.0)	9.1 (6.9)

Data presented as mean (SD) for continuous data or n (%) for categorical data. N=total number of patients in each group. n=number of patients with specified characteristic. Data from SURPASS-1 to -5, SURPASS-Japan mono, and SURPASS-Japan combo trials.



KEY RESULT

INCIDENCE OF IN

Pre-TE Med AD/ TE NAb NAŁ Cros Cros Cros Cros

R = receptor; TE = treatment emergent; TZP = tirzepatide.

Baseline N=5025	Postbaseline N=5025
353 (7.0)	
	2570 (51.1)
1:20	1:160
1:10 to 1:10240	
	1:20 to 1:81920
2 (<0.1)	94 (1.9)
2 (<0.1)	107 (2.1)
97 (1.9)	1705 (33.9)
34 (0.7)	716 (14.2)
0	43 (0.9)
0	18 (0.4)
	Baseline N=5025 353 (7.0) 1:20 1:10 to 1:10240 2 (<0.1)

Data presented as n (%), median, or range. N = total ADA-evaluable patients with characteristic. Postbaseline defined as during the planned treatment period until primary endpoint at Week 40 (SURPASS-1, -2, and -5) or Week 52 (SURPASS -3, -4, -Japan-mono, and -Japan-combo). Abbreviations: ADA = anti-drug antibodies; GIP = glucose-dependent insulinotropic polypeptide; GLP = glucagon-like peptide; NAb = neutralizing antibodies; nGIP = native GIP; nGLP = native GLP;



Pharmacokinetic Results: Tirzepatide clearance was not affected by ADA status or titer

Tirzepatide clearance by ADA status and titer



The top and bottom margins of the boxplot represent the 75th and 25th percentiles; the whiskers extend to ±1.5x interquartile range from median; solid circles denote individual values outside the whiskers. There were low numbers of samples with high ADA titer and clearance at the highest titers was consistent with the range seen in lower titer and TE ADA- groups. Abbreviations: ADA = anti-drug antibodies; CL/F = apparent clearance; N= number of patients; PK = pharmacokinetics; TZP = tirzepatide.

ADA Status

ADA Titer



Efficacy Results: HbA1c change from baseline was not affected by ADA status or titer

HbA1c change from baseline (%) by ADA status **Combined Analysis**



HbA1c change from baseline for tirzepatide-treated patients with ADA titer <1:5120 vs ≥1:5120 **Combined Analysis** Subgroup Analysis by Study









Boxplot. The median is indicated by horizontal line in the central box. Abbreviations: ADA = anti-drug antibodies; HbA1c = glycated hemoglobin; N= number of patients.

Subgroup Analysis by Study



bo		
5120		
5		
.6		
64		
50		
.2		
.1		

Safety Results

HYPERSENSITIVITY REACTIONS

INJECTION SITE REACTIONS



The majority of reactions first occurred within 16 weeks of receiving tirzepatide and resolved irrespective of TE ADA status or titer level.

Abbreviations: ADA = anti-drug antibodies; N = number of patients; TE = treatment emergent; TZP = tirzepatide.

	Hypersensitivity reactions - n (%)			
TE ADA Status	TZP 5 mg (N=1701)	TZP 10 mg (N=1702)	TZP 15 mg (N=1716)	TZP All (N=5119)
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• The majority of reactions first occurred within 16 weeks of receiving tirzepatide and resolved independent of TE ADA status or titer.

No anaphylactic reactions were observed in tirzepatide-treated patients.

	Injection site reactions - n (%)				
TE ADA Status	TZP 5 mg (N=1701)	TZP 10 mg (N=1702)	TZP 15 mg (N=1716)	TZP AII (N=5119)	
TE ADA+	25 (1.47)	38 (2.23)	56 (3.26)	119 (2.32)	
TE ADA-	7 (0.41)	7 (0.41)	4 (0.23)	18 (0.35)	
Not evaluable	1 (0.06)	1 (0.06)	0	2 (0.04)	



CONCLUSIONS

- Across seven Phase 3 clinical studies, approximately 50% of tirzepatide-treated patients developed TE ADA.
- Tirzepatide pharmacokinetic profile was not affected by ADA status or ADA titer.
- TE ADA status or titer had no discernible impact on HbA1c change from baseline at endpoint.
- More tirzepatide-treated patients who developed ADA experienced hypersensitivity or injection site reactions than those who did not develop ADA.
- No pattern was detected between the time of the hypersensitivity or injection site reaction event reporting and ADA status, and the events resolved irrespective of ADA status.
- NAb status assessment on the low sample size showed no visual clinical impact on PK, efficacy, or safety profile.

Overall, immunogenicity was not associated with any impact on tirzepatide PK, efficacy, or safety.



Disclosures BC, GM, MEH, YGL, GA, SU, KS, JNB, RFM, and **KB** are employees and stockholders of Eli Lilly and Company.

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