



**84<sup>TH</sup> SCIENTIFIC  
SESSIONS**

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# **Single-Dose GLP-1-Based Pancreatic Gene Therapy Durably Maintains Body Composition and Glycemia after Semaglutide Withdrawal in a Murine Model of Obesity**

[Harith Rajagopalan](#), Alice Liou Fitzpatrick, Suyu Wang, Rebecca Reese, Nicole Picard, Emily Cozzi, Timothy Kieffer, Jay Caplan

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# Disclosure Statement

## Authors

Harith Rajagopalan, Alice Liou Fitzpatrick, Suyu Wang, Rebecca Reese, Nicole Picard, Emily Cozzi, Timothy Kieffer, and Jay Caplan are employees and shareholders of Fractyl Health, Inc. Harith Rajagopalan is a board member of Fractyl Health, Inc.

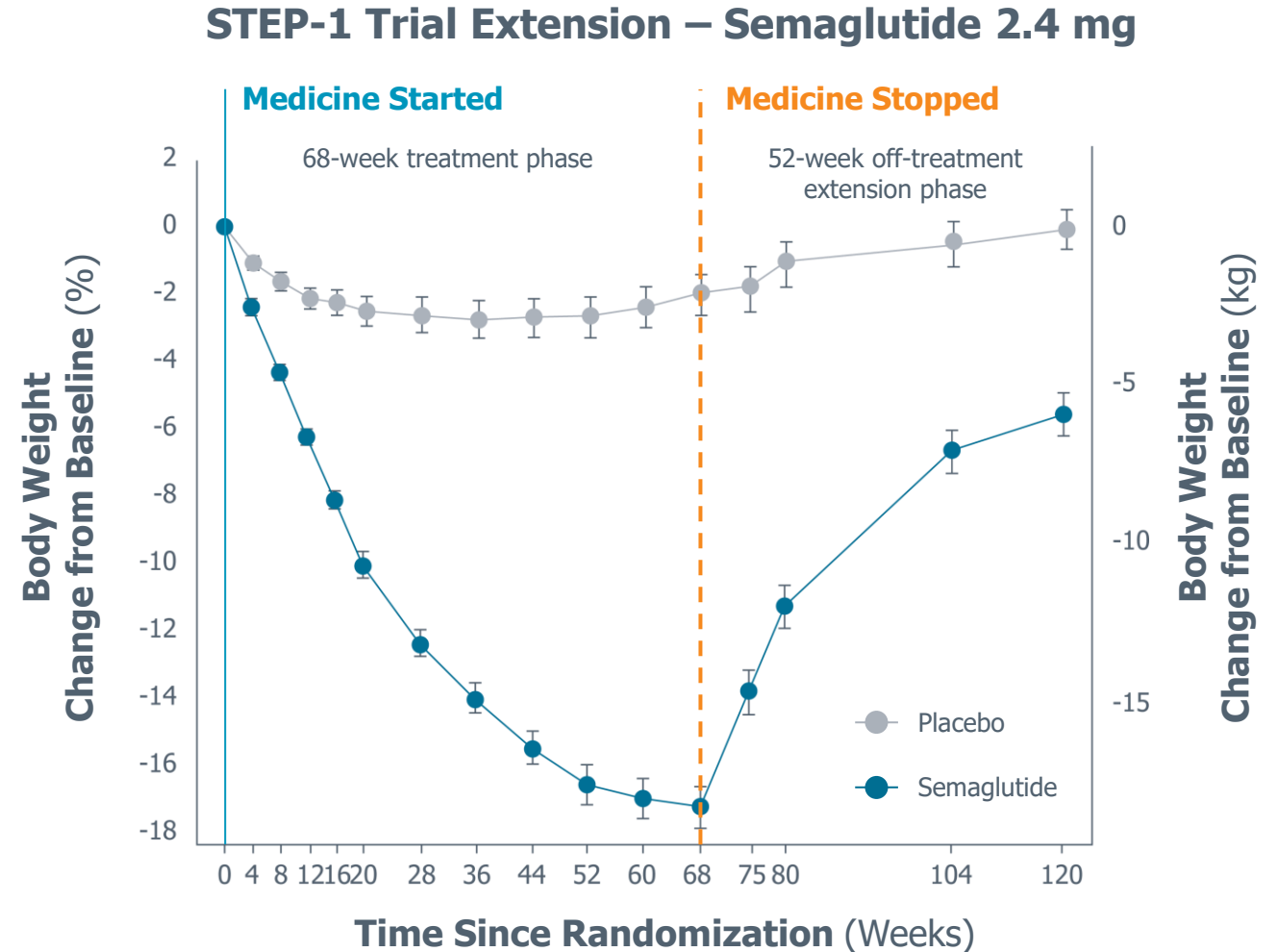
**The Pancreatic Gene Therapy (PGTx) platform is in early development and has not been assessed by any regulatory body for investigational or commercial use.**

# GLP-1 Drugs: Weight Rebound is a Significant Problem

Current GLP-1 drugs do not durably alter metabolic setpoint

Discontinuation of therapy leads to **near total loss of metabolic benefit<sup>1</sup>**

GLP-1 therapies support weight loss and glucose control, **but weight maintenance has become a critical challenge**



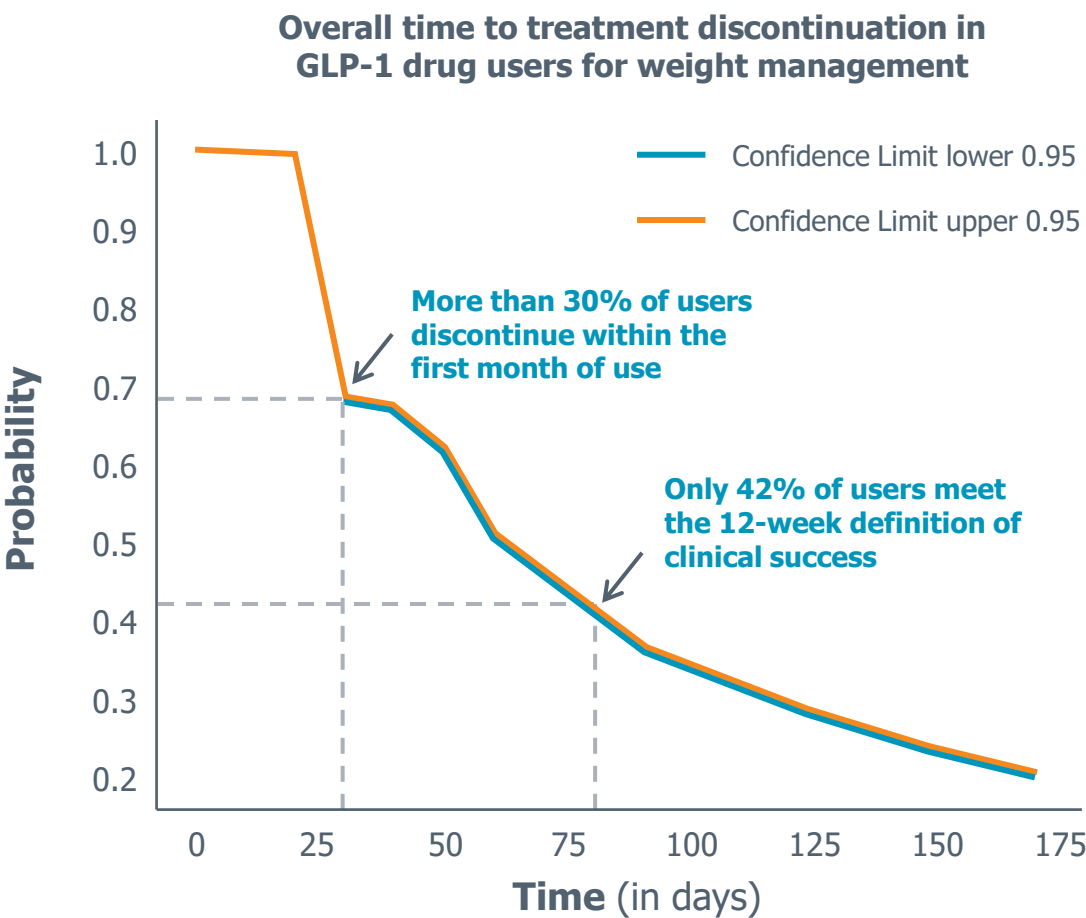
# Real-World Evidence Shows High Discontinuation Rates

## BCBS data show 50% GLP-1 drug discontinuation within 3 months

Private insurer **survey of ~170K unique GLP-1 drug users** for weight loss from January 2014 to December 2023<sup>1</sup>

Early discontinuation is often due to tolerability, but medium-term discontinuation rates still remain high across a range of tested variables:

- Cost (out of pocket expense)
- Type of prescriber (PCP vs endocrinologist)
- Age of patient
- Comorbidity index



# Pancreatic Gene Therapy (PGTx) to Modify Islet Function

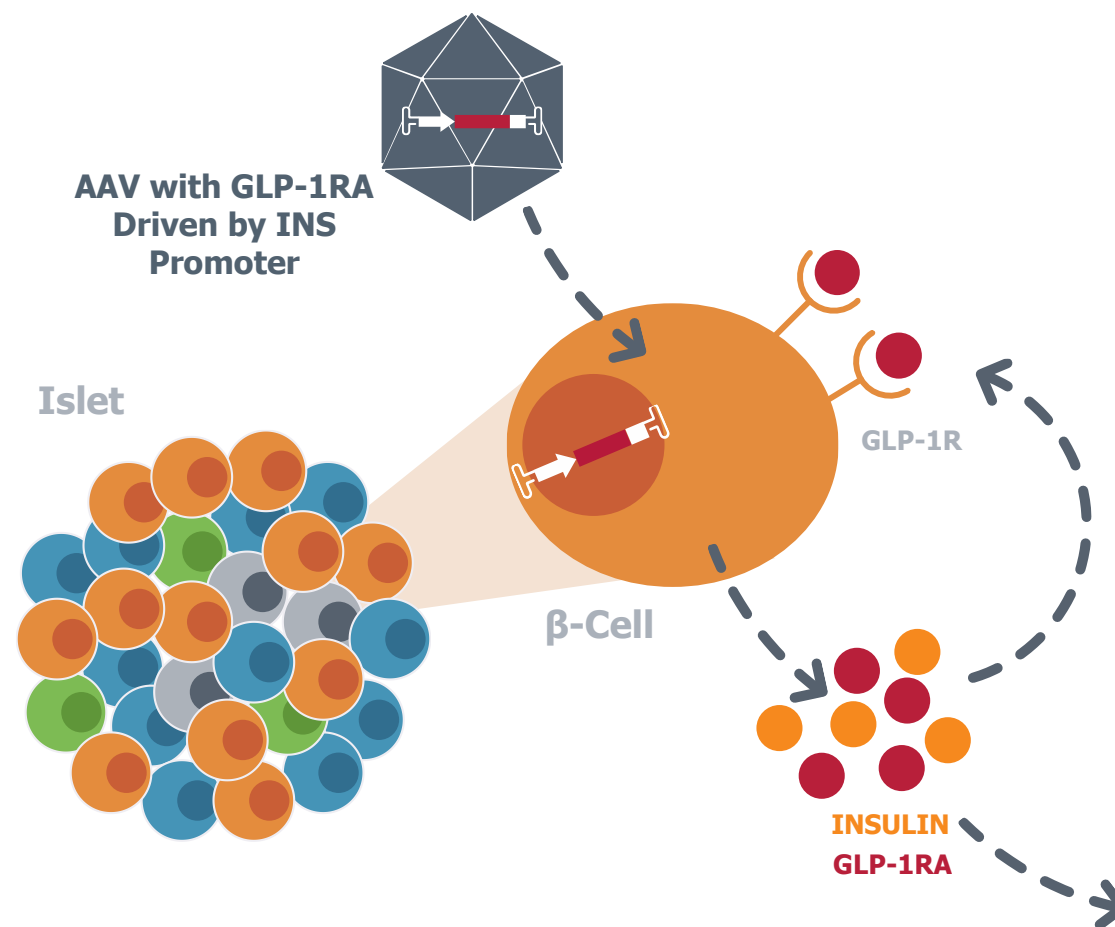
Potential for durable improvement in metabolic health

**GLP-1 gene therapy, targeted to pancreatic islets, may offer differentiated benefit**

**$\beta$ -cell machinery can be leveraged** to produce nutrient-stimulated hormones<sup>1,2</sup>

**Islet cells are terminally differentiated,<sup>3</sup>** making adeno-associated virus (AAV) suitable for durable effect

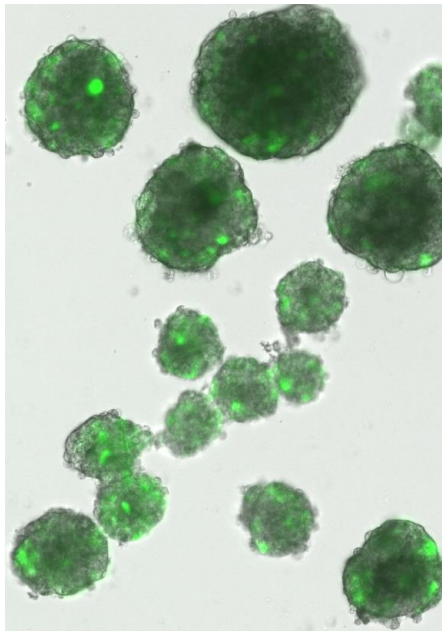
**Opportunity to amplify islet GLP-1 signaling to improve  $\beta$ -cell health**



# GLP-1RA PGTx in Human Islets and Human $\beta$ -Cell Line

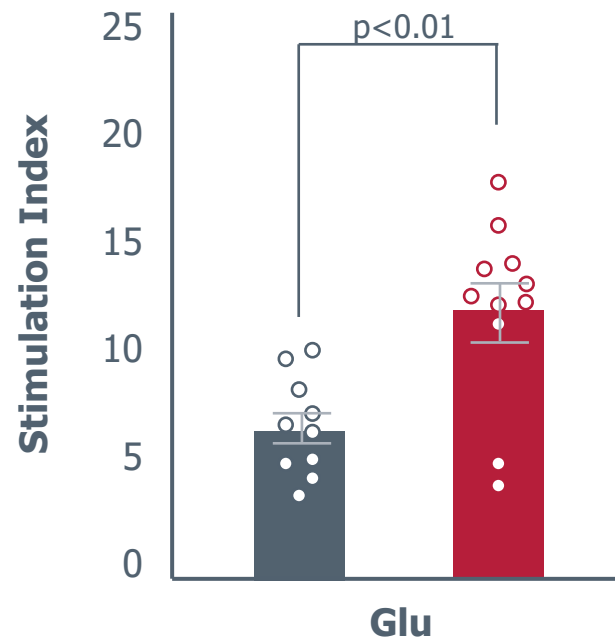
## Improves glucose-stimulated insulin secretion via GLP-1R

### A) Human Islet Transduction

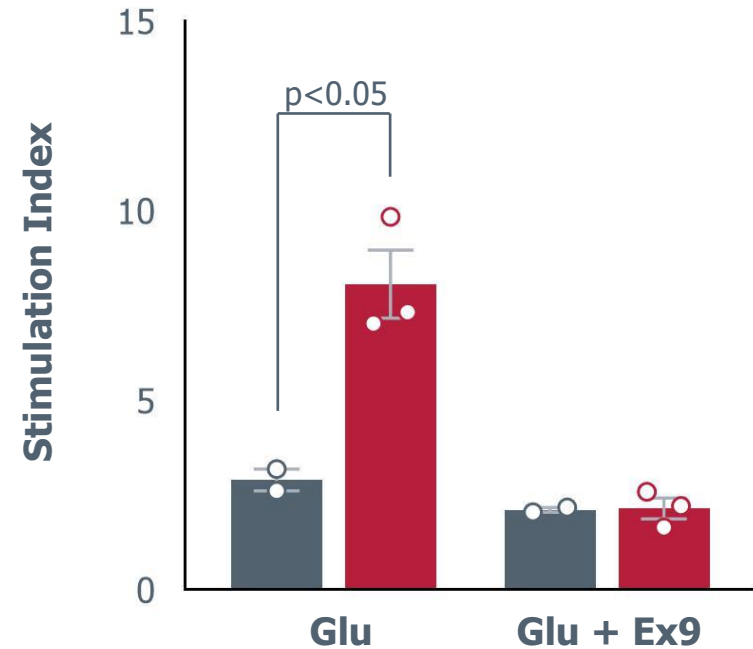


GFP Expression

### B) Human Islet GSIS



### C) Human $\beta$ -cell Line GSIS $\pm$ Ex9 (GLP-1R Antagonist)



Untransduced GLP-1RA PGTx

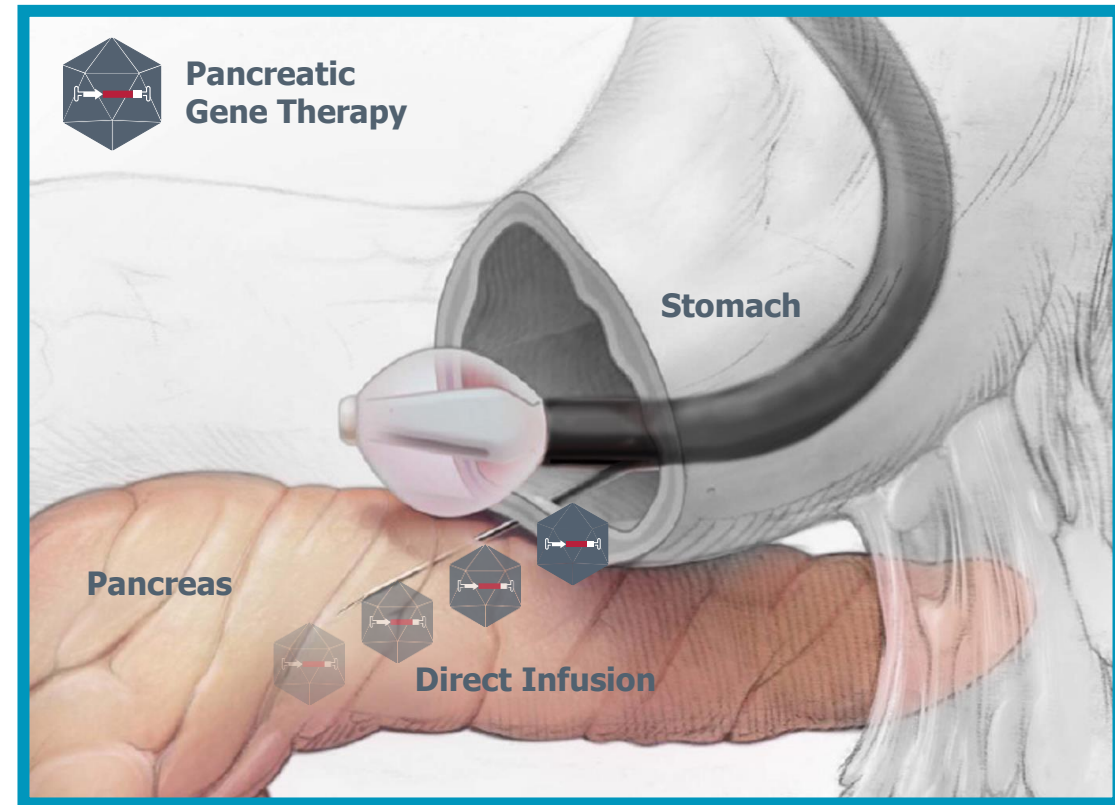
# Gene Therapy Route of Administration to Pancreas

Proprietary, automated, endoscopic delivery device

**Local delivery enables low viral genome dosing** with limited systemic virus exposure<sup>1</sup>

**Islets are readily accessible<sup>2,3</sup>** via already established, routine, upper endoscopic ultrasound procedures,<sup>4</sup> performed in ~300K patients per year in US<sup>5</sup>

**Procedural risk is further mitigated with device design** (e.g., needle size, volume, controlled infusion rate)



**Endoscopic Procedure & PGTx Delivery**

# Dose-Dependent Viral Transduction in Yucatan Pig Model

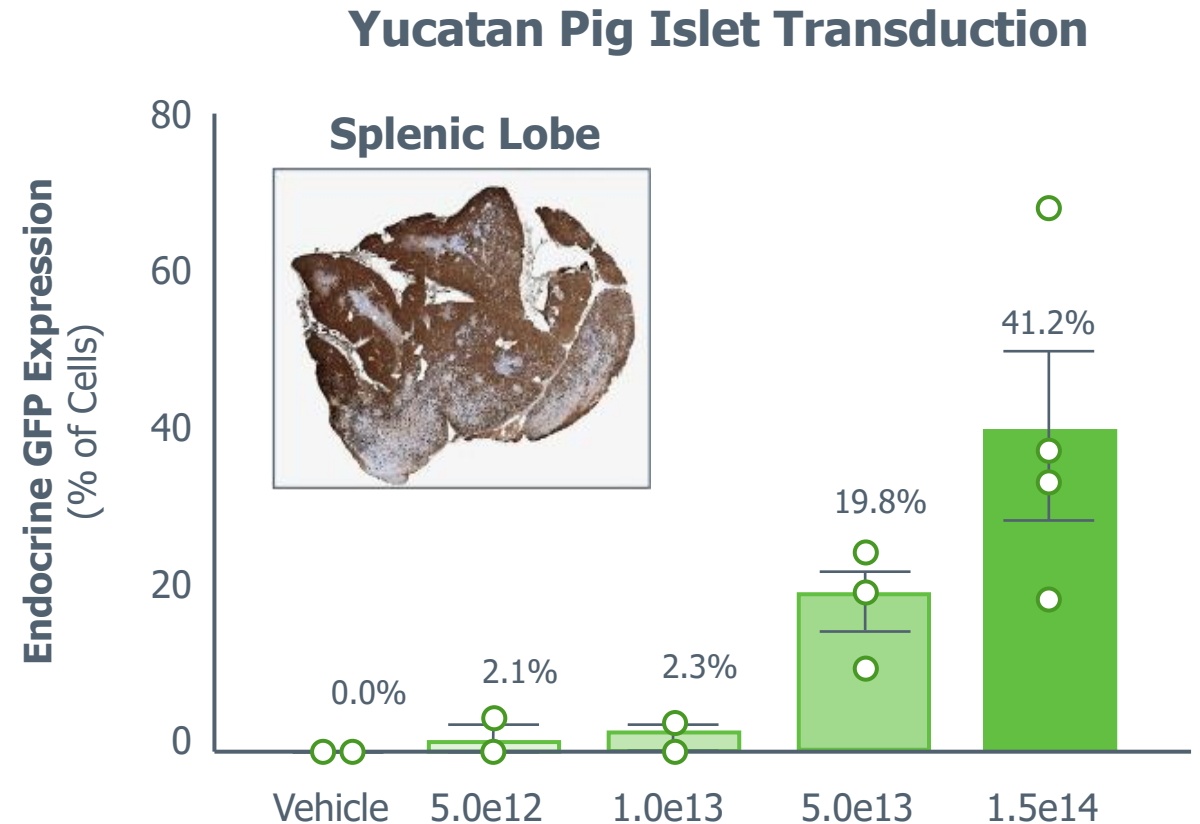
Local delivery effectively and reliably targets islets

Yucatan pig model **anatomy similar to humans<sup>1</sup>**

**Dose-dependent AAV-GFP expression** in targeted pancreatic lobe<sup>2,3</sup>

**>60 animals treated** with 100% technical success

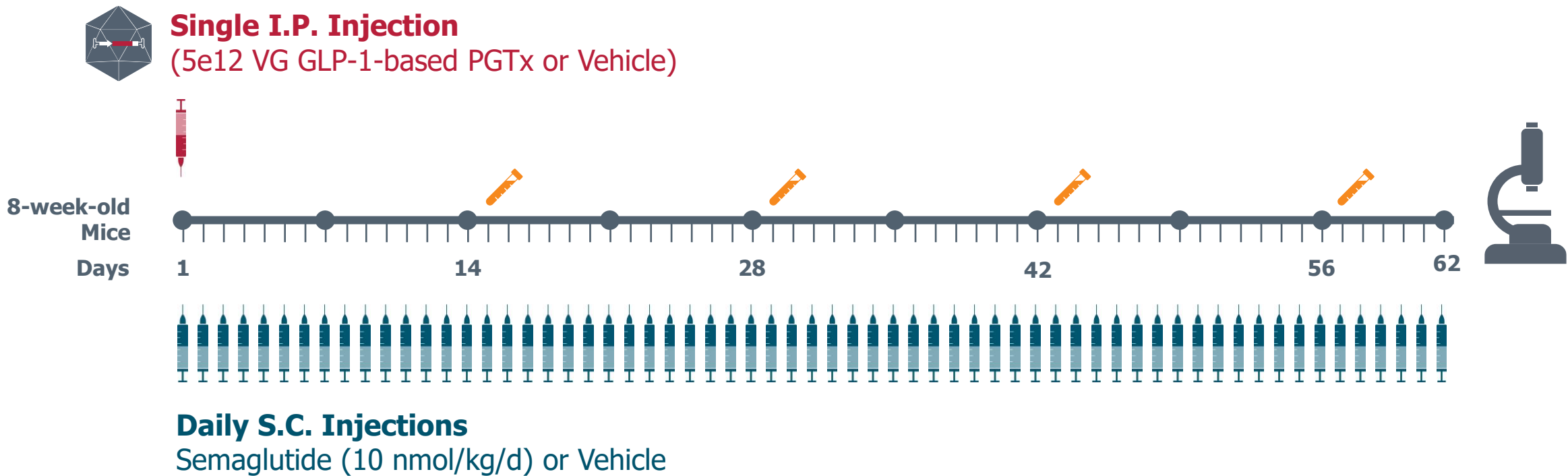
**No adverse safety signals to date** (e.g., pancreatitis)





# GLP-1RA PGTx T2D Efficacy Study: Head-to-Head vs. Semaglutide

*db/db* murine model is *de facto* standard for T2D development



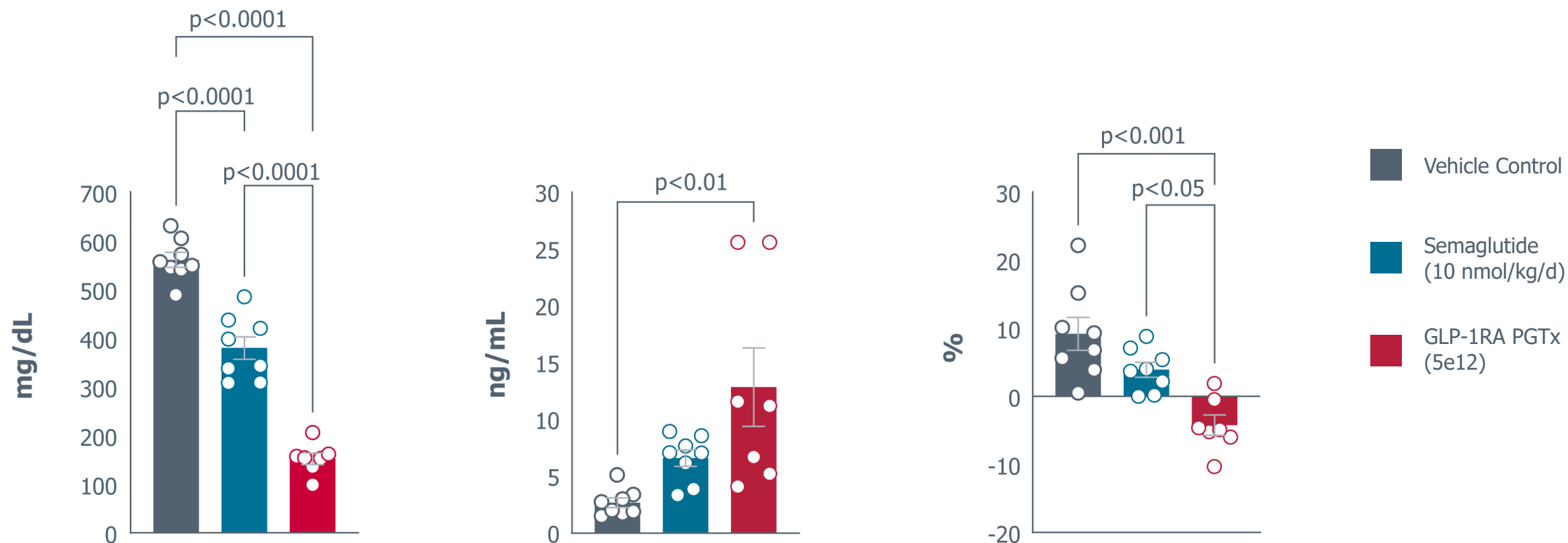
# Glucose-Lowering Efficacy in *db/db* Murine Model

GLP-1RA PGTx improves glucose, insulin, and weight vs. daily semaglutide

## A) Fasting Blood Glucose

## B) Fasting Plasma Insulin

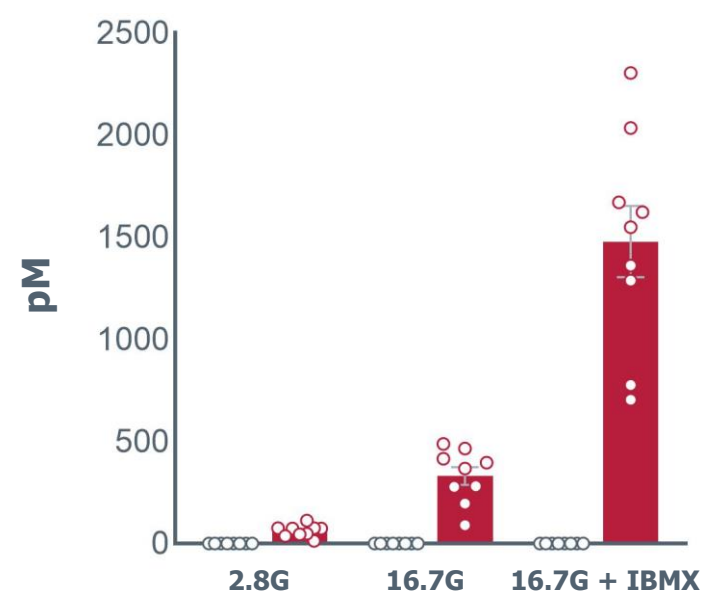
## C) Body Weight Change from Baseline



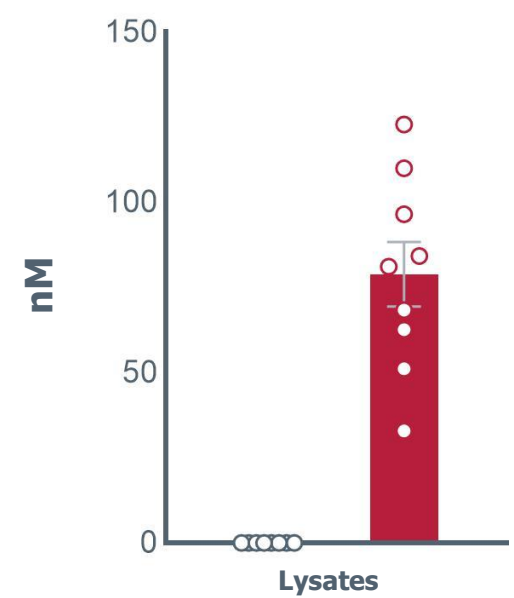
# GLP-1RA PGTx Secretion in Isolated *db/db* Islets

## Glucose-dependent GLP-1RA release with ample secretory reserve

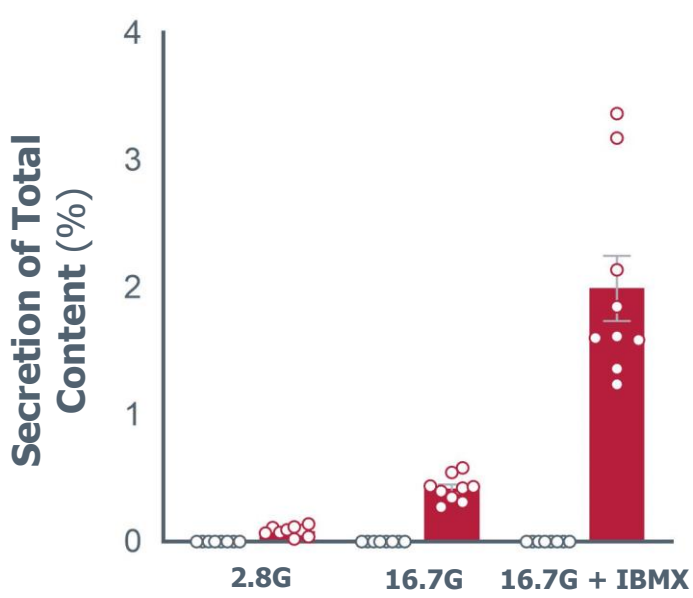
**A) GLP-1RA Released**



**B) GLP-1RA Total Content**



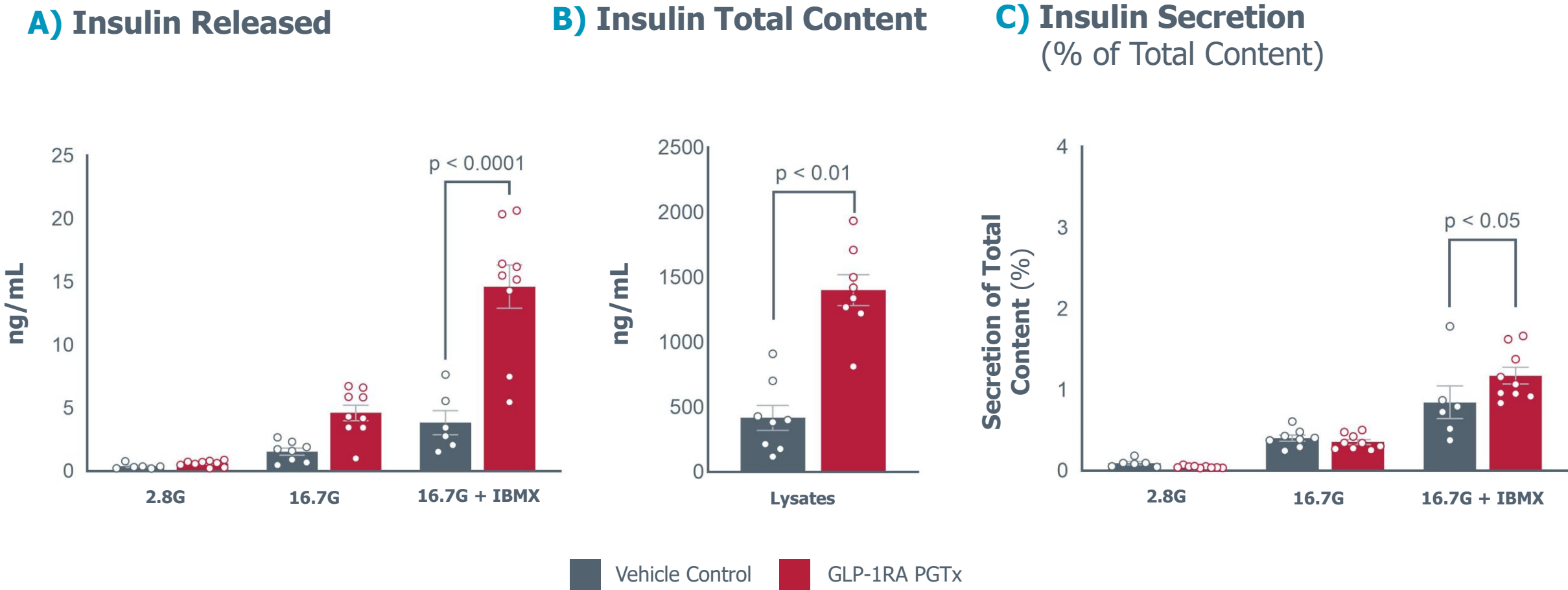
**C) GLP-1RA Secretion (% of Total Content)**



■ Vehicle Control ■ GLP-1RA PGTx

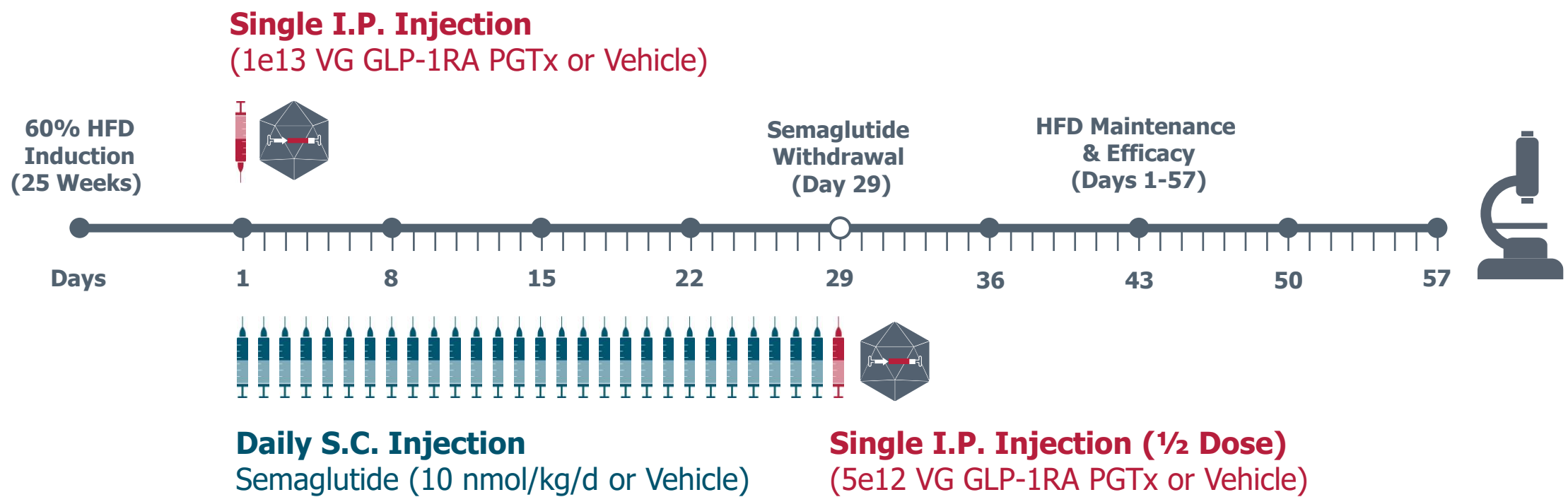
# GLP-1RA PGTx-Induced Insulin Secretion in Isolated *db/db* Islets

Increases insulin content and secretion with ample secretory reserve



# GLP-1RA PGTx Obesity Efficacy Study: Head-to-Head vs. Semaglutide

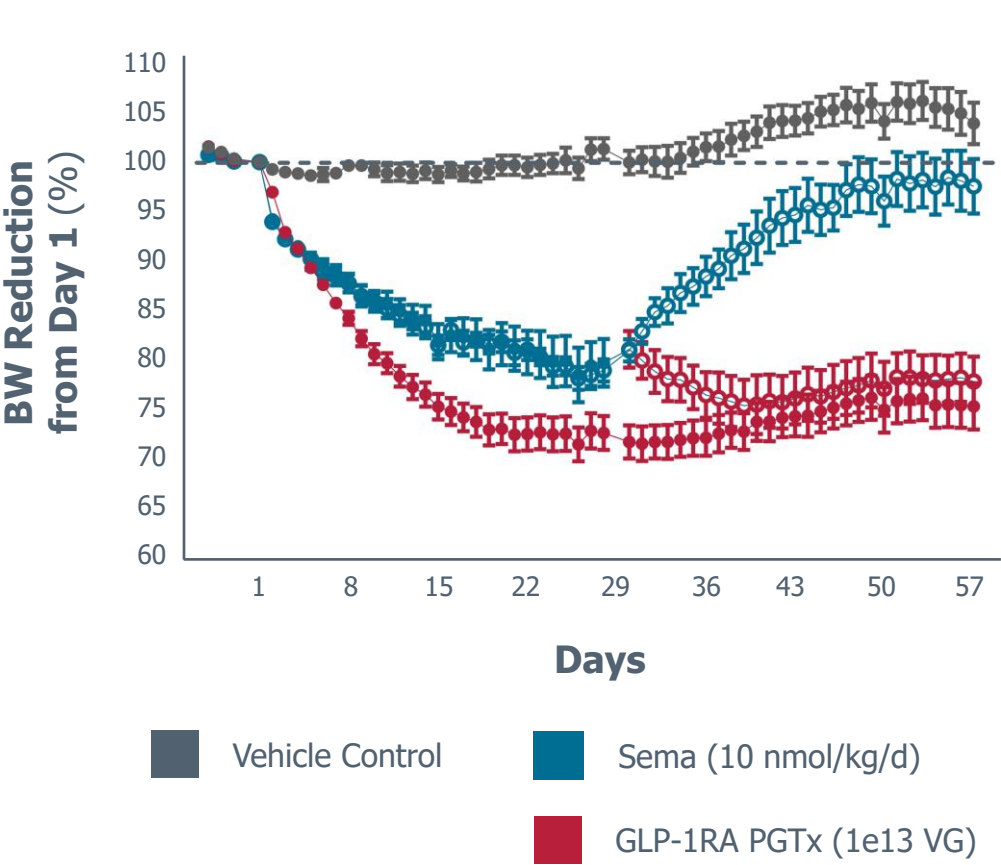
DIO murine model is *de facto* standard for obesity development



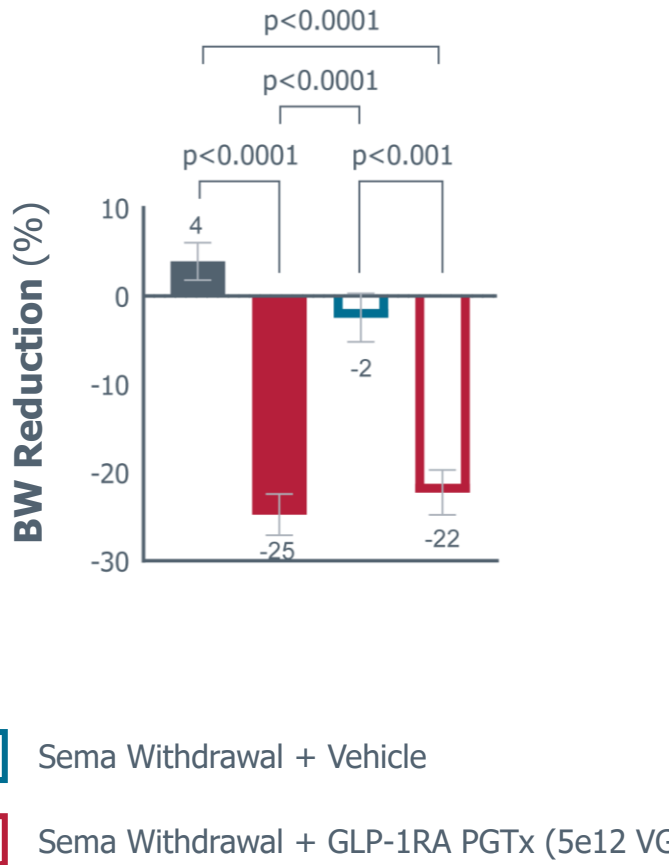
# Body Weight Change in DIO Murine Model

## Single-dose GLP-1RA PGTx sustains weight loss after semaglutide withdrawal

**A) Change in BW Over Time**



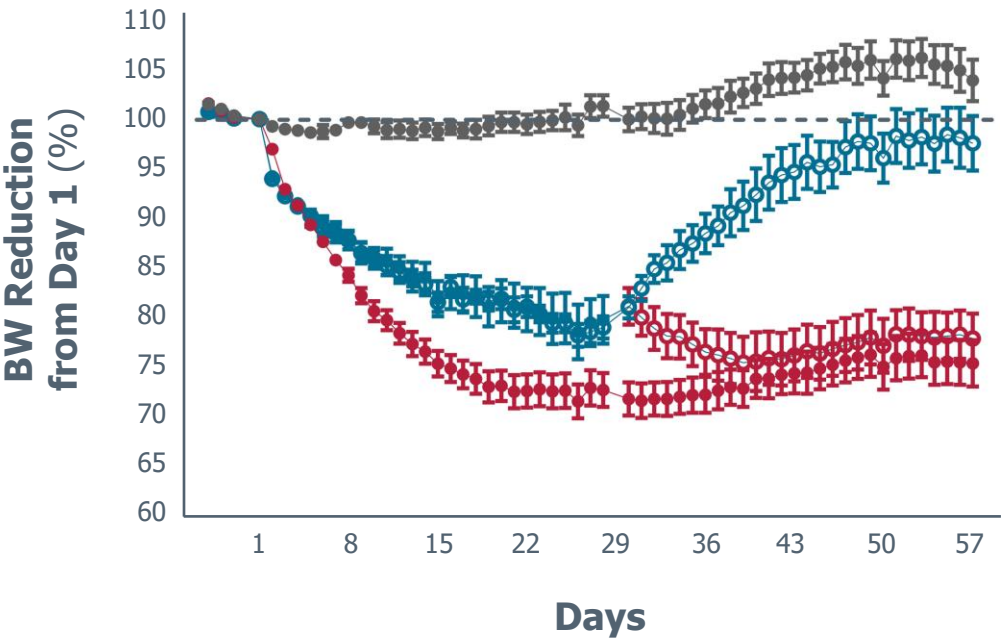
**B) End of Study BW Change**



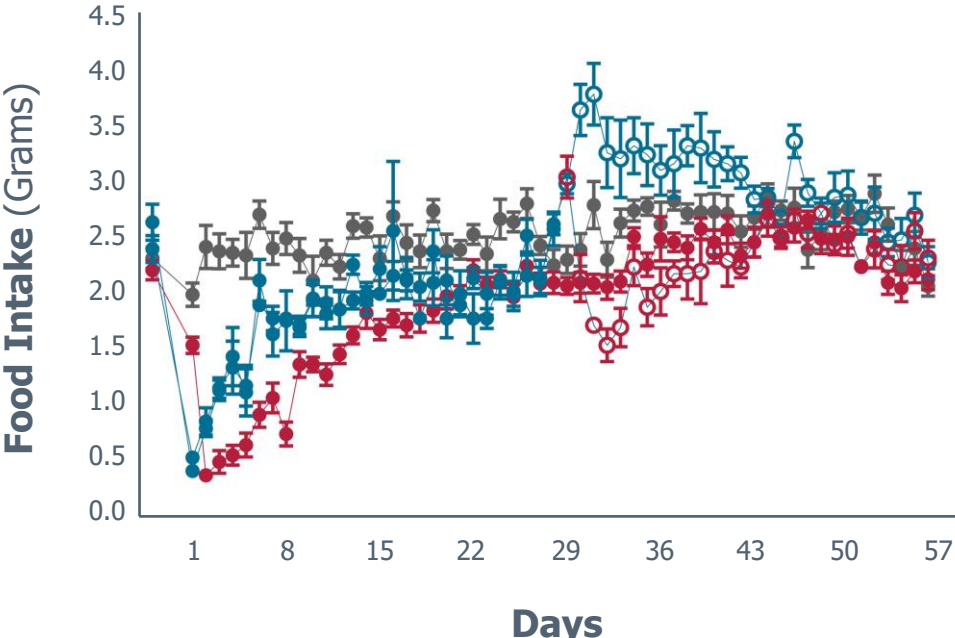
# Food Intake Change in DIO Murine Model

Body weight changes are reflected by alterations in food intake

A) Change in BW Over Time



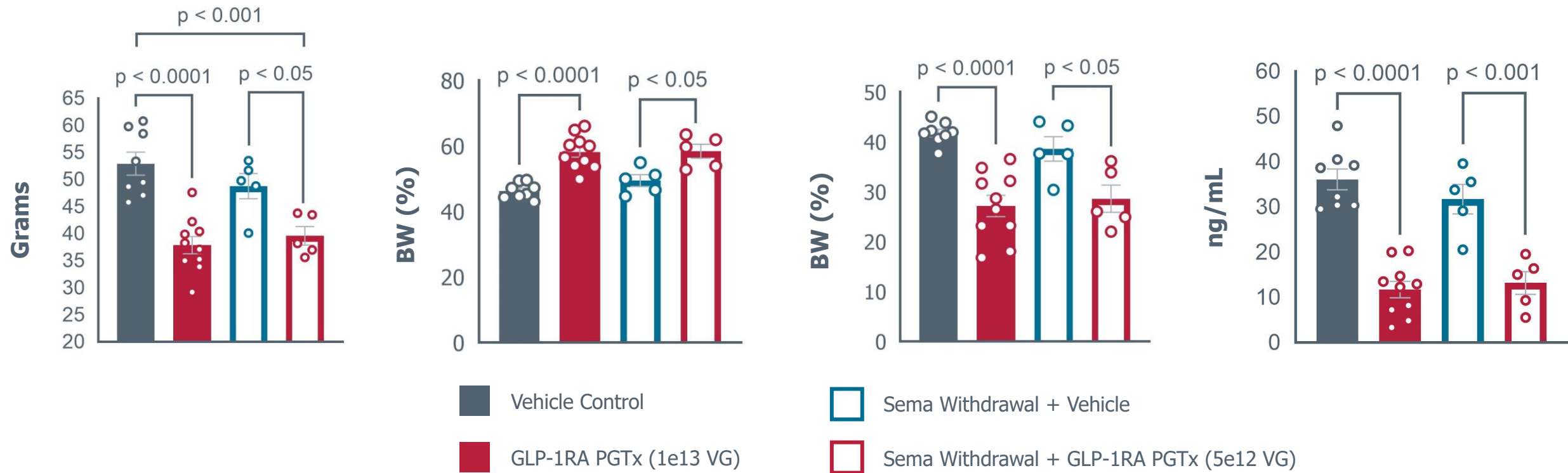
B) Food Intake Over Time



# Body Composition Change in DIO Murine Model

Preservation of lean mass: body weight loss primarily from fat mass

**A) Body Weight**                      **B) Lean Mass**                      **C) Fat Mass**                      **D) Plasma Leptin**

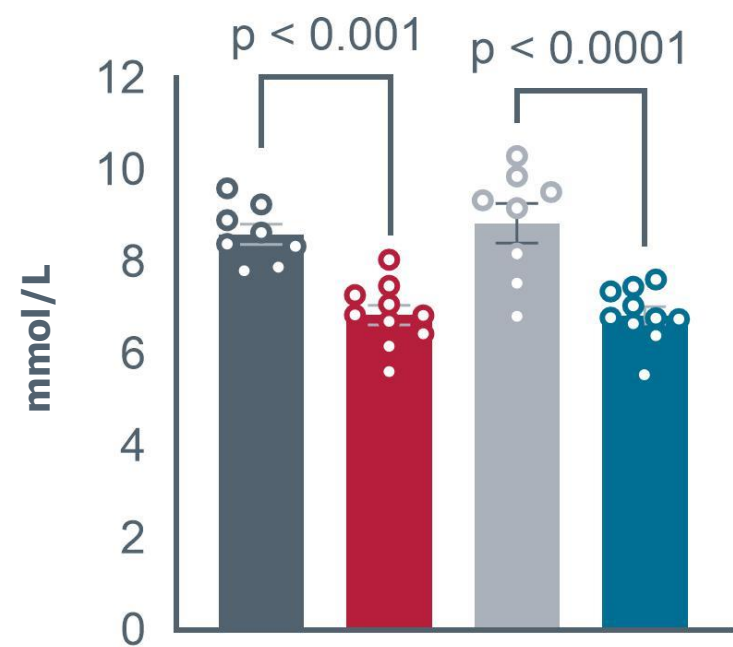




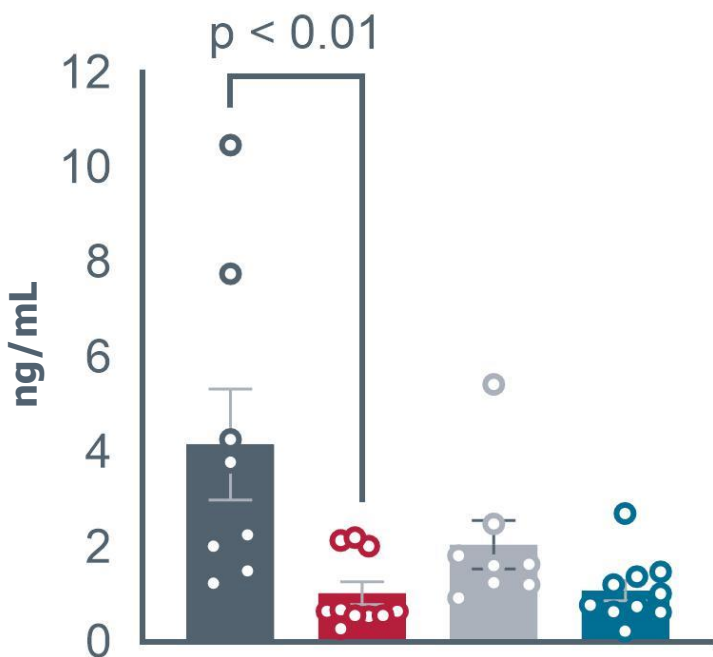
# Fasting Blood Glucose and Insulin Changes in DIO Murine Model

## Single-dose GLP-1RA PGTx improves FBG and insulin at 4 weeks

**A) Fasting Blood Glucose**



**B) Fasting Plasma Insulin**

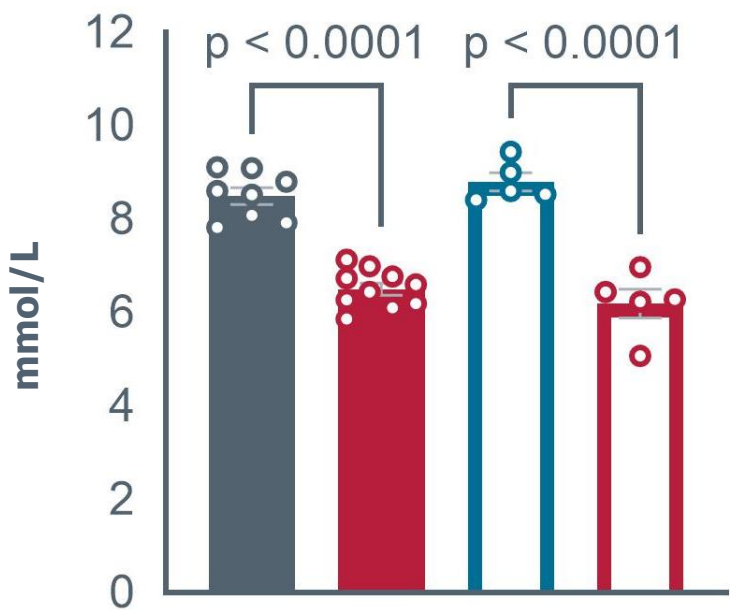


AAV Vehicle Control GLP-1RA PGTx (1e13 VG) Sema Vehicle Sema (10 nmol/kg/d)

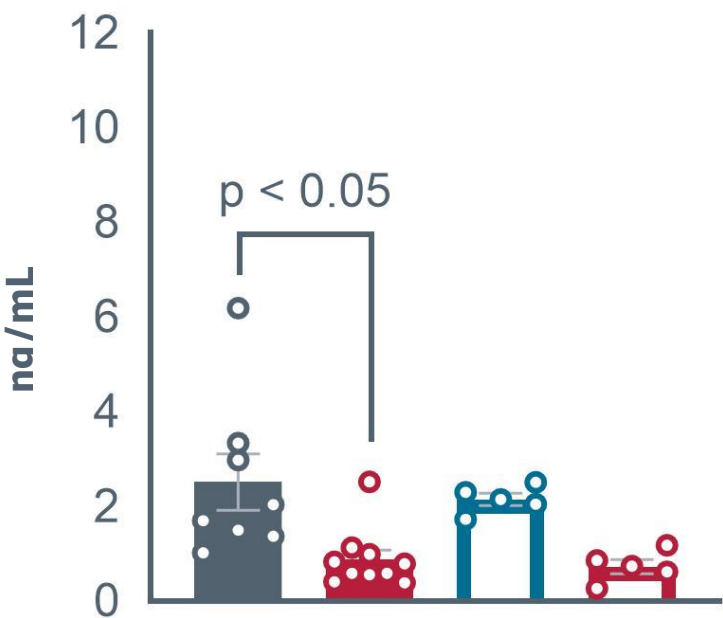
# Fasting Blood Glucose and Insulin Changes in DIO Murine Model

## Single-dose GLP-1RA PGTx improves FBG and insulin at 8 weeks

A) Fasting Blood Glucose



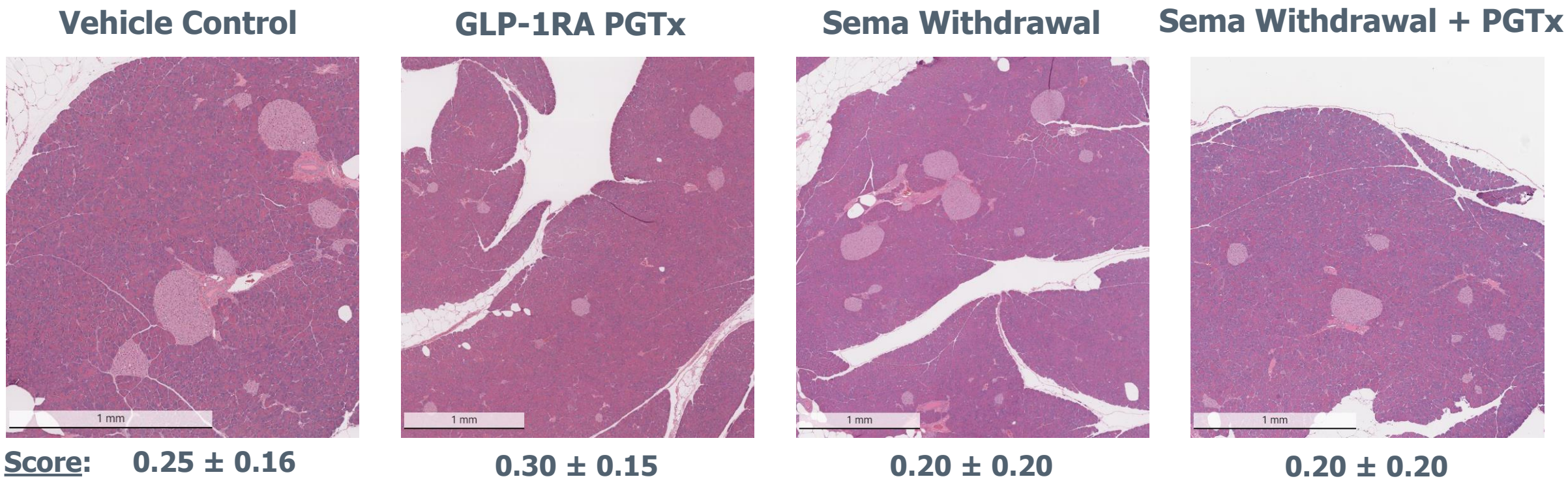
B) Fasting Plasma Insulin



AAV Vehicle Control GLP-1RA PGTx (1e13 VG) Sema Withdrawal + Vehicle Sema Withdrawal + GLP-1RA PGTx (5e12 VG)

# Pancreatic Islet Histopathology in DIO Murine Model

GLP-1RA PGTx was not associated with inflammation



| Histopathology Scorecard <sup>1</sup>            |                                                                                                         |
|--------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| 0 – No cellular infiltrates                      | 4 – Extensive infiltrations = 50% islet, cellular, destruction, prominent cytoarchitectural derangement |
| 1 – Infiltrates in small foci at islet periphery | 5 – Islet atrophy because of beta cell loss                                                             |
| 2 – Infiltrates surround islets [peri-insulitis] |                                                                                                         |
| 3 – Intra-islet infiltration <50% islet          |                                                                                                         |

There were no significant differences between groups

# GLP-1RA PGTx Safety and Feasibility Studies in Model Systems

## Conclusions to date and next steps

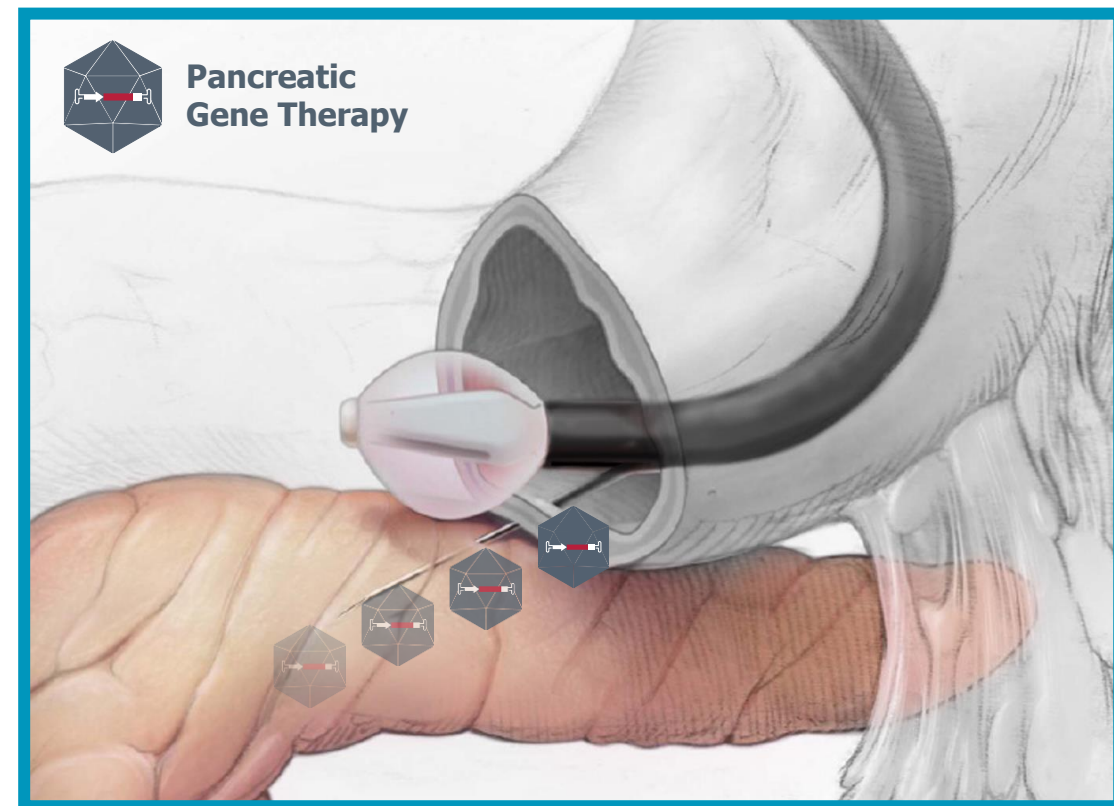
Early safety and feasibility observations in *db/db* and DIO mice and Yucatan pigs are encouraging

First demonstration of **nutrient-responsive GLP-1RA secretion in islets**

PGTx **improves fasting glucose and insulin** in *db/db* and DIO models of T2D and obesity

PGTx leads to **durable weight loss and weight and body composition maintenance after semaglutide withdrawal** in DIO mice

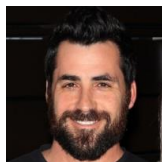
**RJVA-001 IND-enabling studies are underway**





# Thank You

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**Lin Quek, PhD**  
Assoc. Director



**Gary White, MS**  
Sr. Scientist



**Suyu Wang, PhD**  
Scientist II



**Keiko Ishida, BS**  
Sr. Assoc. Scientist

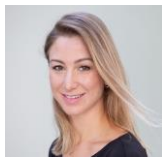


**Abdul Alhamood, MS**  
Sr. Assoc. Scientist

### *ex vivo* and animal studies



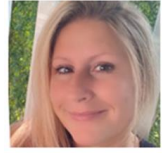
**Alice Fitzpatrick, DVM, PhD**  
Director



**Camila Lubaczeuski, PhD**  
Scientist II



**Rebecca Reese, Assoc.**  
Scientist I



**Lindsay Schulman, MS**  
Sr. Assoc. Scientist

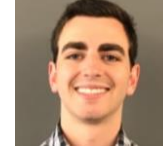


**Nicole Picard, BS**  
Assoc. Scientist

### Device Engineering

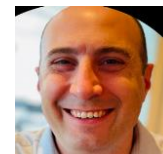


**Mike Biasella, BS**  
Sr. Engineer Manager



**Jake Wainer, BS**  
Sr. Biomedical Engineer

### Tech Ops and Research Ops



**Eric Horowitz, PhD**  
Exec. Director



**Bill Monahan, BS**  
Assoc. Director

## Advisors

**Alan Cherrington, PhD**  
Vanderbilt University School  
of Medicine

**Geltrude Mingrone, MD,  
PhD**  
King's College, London;  
Catholic University of Rome

**Randy Seeley, PhD**  
Michigan School of Medicine

**Dave D'Alessio, MD**  
Duke University School of  
Medicine

**Jon Campbell, PhD**  
Duke University School  
of Medicine