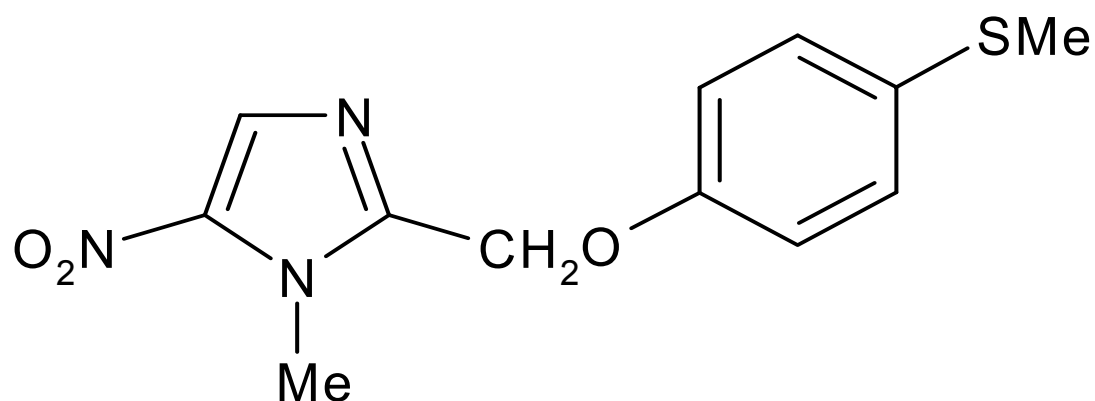


# Fexinidazole a new oral treatment for sleeping sickness – update of development



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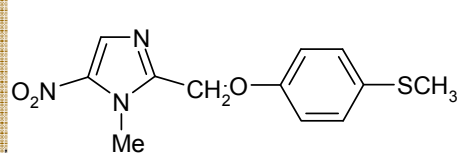
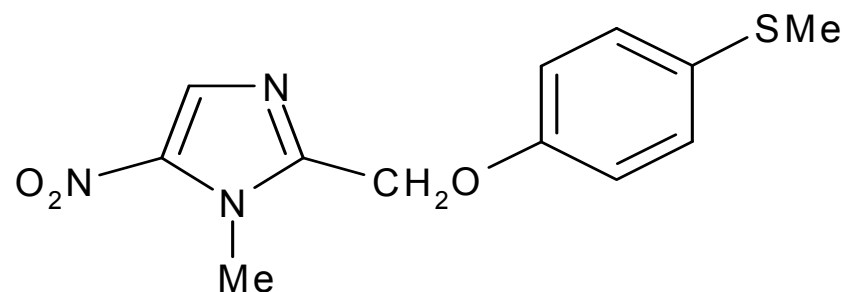
**DNDi**

Drugs for Neglected Diseases *initiative*

**September 2011**

# Fexinidazole

- Discovery : 1970 HOE 239, discontinued 1980
- Chemical Name: 1H-imidazole,1-methyl-2-[[4-methylthio) phenoxy] methyl] 5-nitro-imidazole
- PM = 279.31 g/mol
- Metabolism

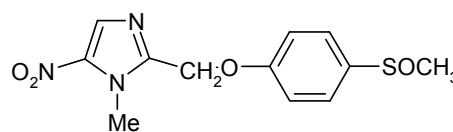


Fexinidazole

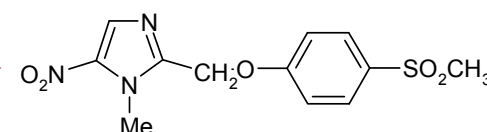
CYP



FMO



Fexinidazole sulfoxide (M1)



Fexinidazole sulfone (M2)

## In vitro activity of fexinidazole

IC<sub>50</sub> values (µg/ml)

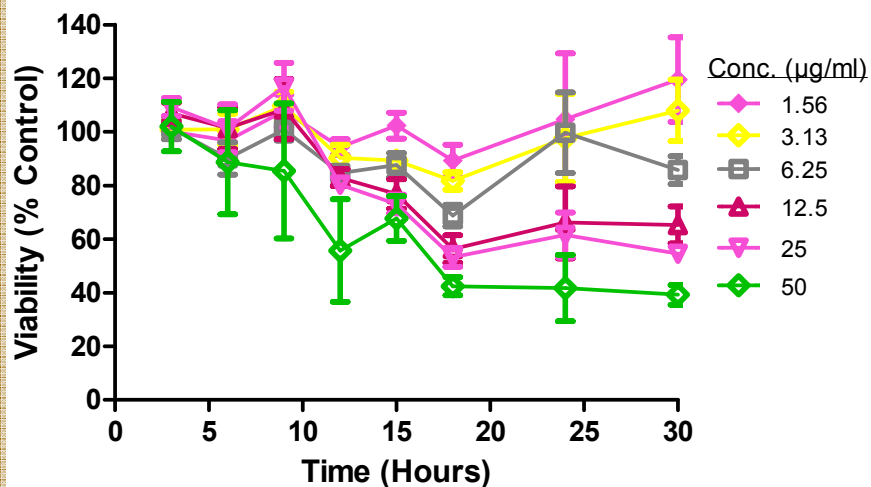
| Compound Tested        | <i>T.b. rhodesiense</i> *<br>(IC <sub>50</sub> ) | <i>T. b. brucei</i> **<br>(IC <sub>50</sub> ) | <i>T. b. brucei</i> **<br>(MIC) |
|------------------------|--|---|---------------------------------|
| Fexinidazole (Batch 1) | 1.265  | 2.86  | 5.00                            |
| Fexinidazole (Batch 2) | 0.719  | ND  | ND                              |
| Fexinidazole sulfoxide | 0.487  | 1.96  | 4.74                            |
| Fexinidazole sulfone   | 0.354  | 0.89  | 2.20                            |

\*Data from STI

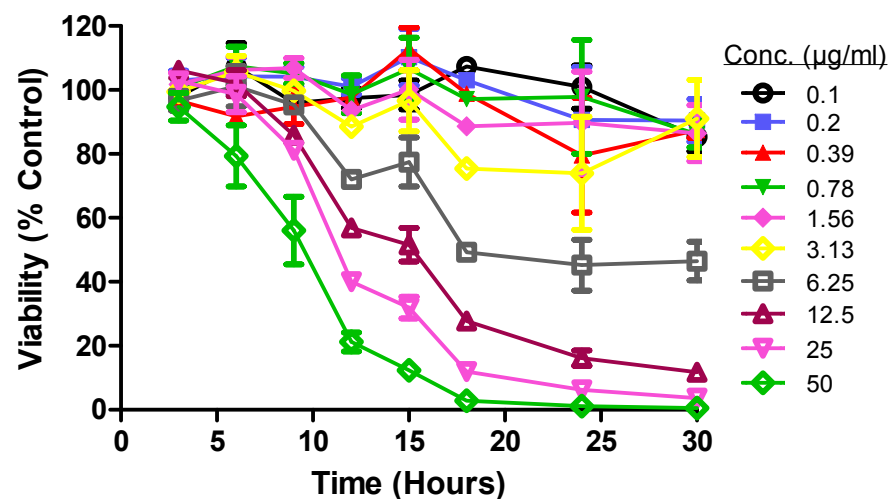
\*\*Data from SCYNEXIS

# Time Kill Assays - Fexinidazole and Metabolites

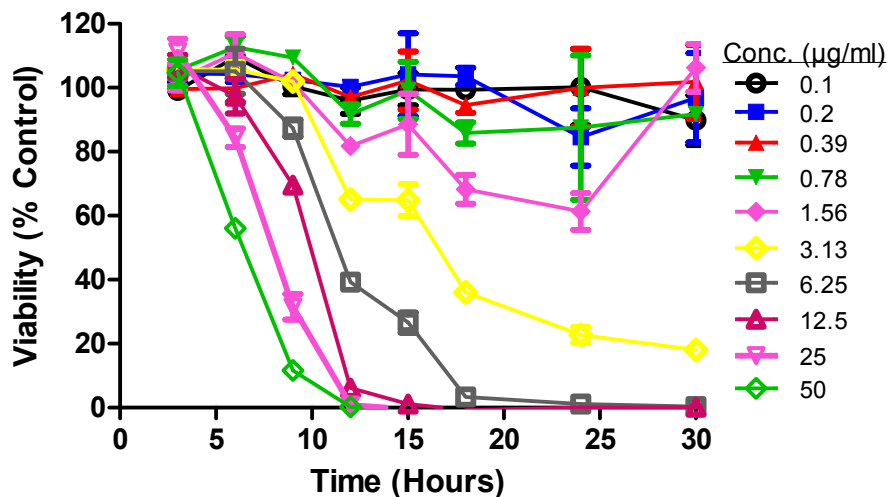
Fexinidazole ( $IC_{50} = 2.86 \mu\text{g/ml}$ )



Fexinidazole-Sulfoxide ( $IC_{50} = 1.96 \mu\text{g/ml}$ ).



Fexinidazole sulfone ( $IC_{50} = 0.89 \mu\text{g/ml}$ )



Wash-out  $IC_{50}$  Values

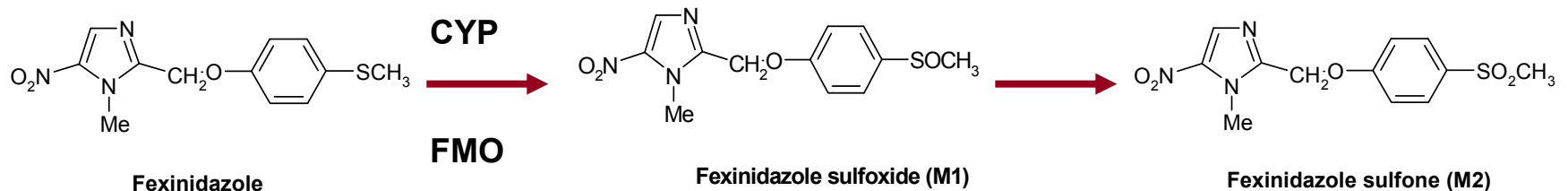
# General pharmacology

- **Standard genotoxicity battery**
  - Ames Ames -ve
  - In vivo micronucleus + test negative
  - In vitro chromosomal aberration negative
- **Enzymes, Radioligand Binding Assay:  $0 < 10\mu\text{M}$**
- **hERG : partially + for M2**
- **Telemetry in Dog: negative**
  - NOEL CV parameters and ECG intervals  $\geq 1000$  mg/kg
- **Irwin test in rat:** general behavior and body temperature
  - NOEL  $\geq 1000$  mg/kg.
- **Respiratory Parameters in rat:**
  - NOEL  $\geq 1000$  mg/kg.

# General pharmacology(2)

- Good intestinal permeability (Caco-2)  
no limiting factor for absorption
- Good potential for BBB permeability (MDR1-MDCK)
- High plasma protein binding  
Fexinidazole 95% (human); 93% (mouse)

- Metabolism



# Toxicology

**NOAEL Rat + Dog: 200 mg/kg/Day**

with a MTD at 800 mg/kg/d based on general toxicity, not hepatic effect

**Reprotox : NOAEL 200mg/kg/day**

RAT :NOAEL for the pregnant mother = 200 mg/kg/day

- NOAEL for the FO= 200 mg/kg/day
- NOAEL for the F1= 200 mg/kg/day

**Phototox: Negative**

# Fexinidazole Clinical Studies



## Phase I studies

- So far 96 subjects have been dosed
- Part 1 (SAD) Study Design
  - oral suspension escalation from 100 up to 3600 mg
- Part 2 Cross-over bioequivalence and food effect Study
  - 1200 mg single dose
- Part 3 (MAD) Study Design
  - Three cohorts of 8 subjects (6 active, 2 placebo)
  - Oral tablet (600 mg) once a day for 14 days 1200mg,2400mg &3600mg
- Field food effect study ( cross-over study )
  - Three cohorts of 12 subjects
- Multiple dose in fed conditon (on going)
  - Randomized , double- blind versus placebo
  - Two cohorts of 18 subjects ( 12active, 6 placebo)
  - Pop pk analysis

# PK Results

## **Bioavailability**

- Fexi : rapidly absorbed: median T<sub>mx</sub>: 3 – 4 H; mean T<sub>1/2</sub>: 9-15H
- M1 : occurred rapid : median T<sub>mx</sub>: 2-5 H; mean T<sub>1/2</sub>: 18-20H
- M2 : occurred slowly: median T<sub>mx</sub>: 18-24 H; mean T<sub>1/2</sub>: 18-25H

## **Exposure increased linearly**

**but not proportional** to dose administered

## **No saturation of the metabolism**

**Steady state : D4 for fexi and M1, D9 for M2**

**Free fraction in human : fexi 3 % M1 and M2 > 40%**

## Safety results

### SAD

- No serious nor severe Aes, no discontinuation
- No trends nor relevant changes vs baseline in VS, ECG, safety lab tests
- Few mild transient AES ( headache )

### MAD

- Some  $\Delta$ QTcB increases in the 3600 mg - Holter results to com
- Headaches and Gastro intestinal disorders (mild or moderate) mostly transient – no pattern
- Liver enzymes increase
- 2 SAEs

# Frequency of ALT/AST increases

| ALAT          | cohort 1 | cohort 2 | cohort 3 |
|---------------|----------|----------|----------|
| dose          | 1200 mg  | 2400 mg  | 3600 mg/ |
| nb volunteers | 8        | 9*       | 8**      |
| ≤1N           | 3        | 8        | 6        |
| 1N<x≤2N       | 4        | 1        |          |
| 2N<x≤3N       | 1        |          | 1        |
| 3N<x≤30N      |          |          |          |
| 30N<x≤40N     |          |          | 1        |

| ASAT          | cohort 1 | cohort 2 | cohort 3 |
|---------------|----------|----------|----------|
| dose          | 1200 mg  | 2400 mg  | 3600 mg  |
| nb volunteers | 8        | 9*       | 8**      |
| ≤1N           | 6        | 5        | 6        |
| 1N<x≤2N       | 1        | 2        | 1        |
| 2N<x≤5N       |          |          |          |
| 5N<x≤6N       |          | 1        |          |
| 6N<x≤9N       |          |          |          |
| 9N<x≤10N      | 1        |          |          |
| 10N<x≤30N     |          |          |          |
| 30N<x≤40N     |          |          | 1        |

\*one subject dropped on D9 with follow up until D28

\*\* one subject stopped on D6 with follow up until D28

# ECG QT/QTc Results

## Categorical analysis for triplicate holter QTc

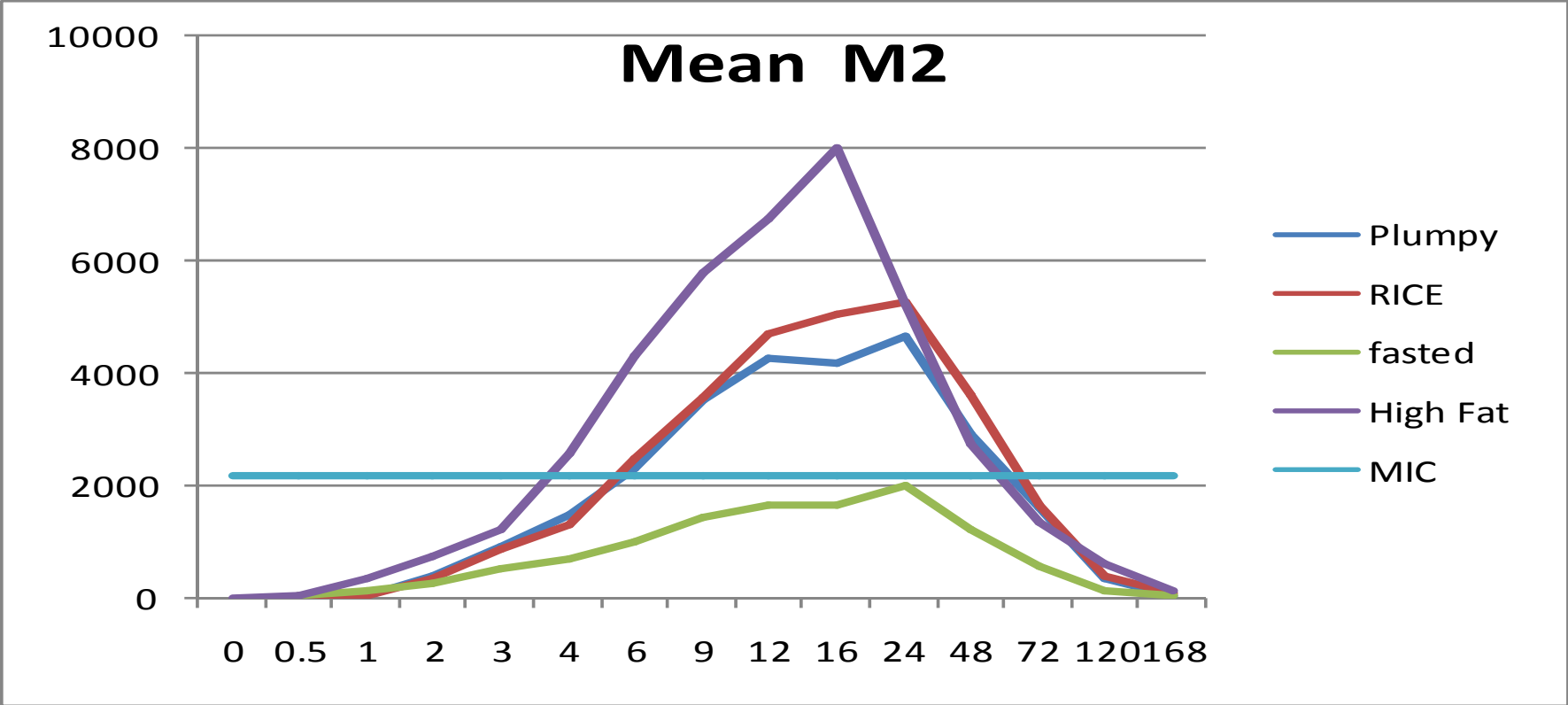
|                      |                    | Fexinidazole     |                  |                  |                  |
|----------------------|--------------------|------------------|------------------|------------------|------------------|
|                      |                    | Placebo<br>(N=6) | 1200 mg<br>(N=6) | 2400 mg<br>(N=6) | 3600 mg<br>(N=6) |
|                      |                    | n (%)            | n (%)            | n (%)            | n (%)            |
| Changes in QTcF (ms) |                    |                  |                  |                  |                  |
|                      | $\Delta$ QTc>30 ms | 0 (0.0)          | 2 (33.3)         | 2 (33.3)         | 2 (33.3)         |
|                      | $\Delta$ QTc>60 ms | 0 (0.0)          | 0 (0.0)          | 0 (0.0)          | 0 (0.0)          |

## PK Food effect

### Food effect 1200mg (2X600mg ) single dose

- relative bioavailability  $C_{max}$  and  $AUC_{0-t}$ :
  - 4 fold increase in the extend of absorption of fexinidazole
- -  $M1$  &  $M2$  increased proportionally
- - intra-individual variability:
  - $C_{max}$  and  $AUC_{0-t}$  markedly reduced ( 10 – 15%)

# M2 Mean Plasma levels

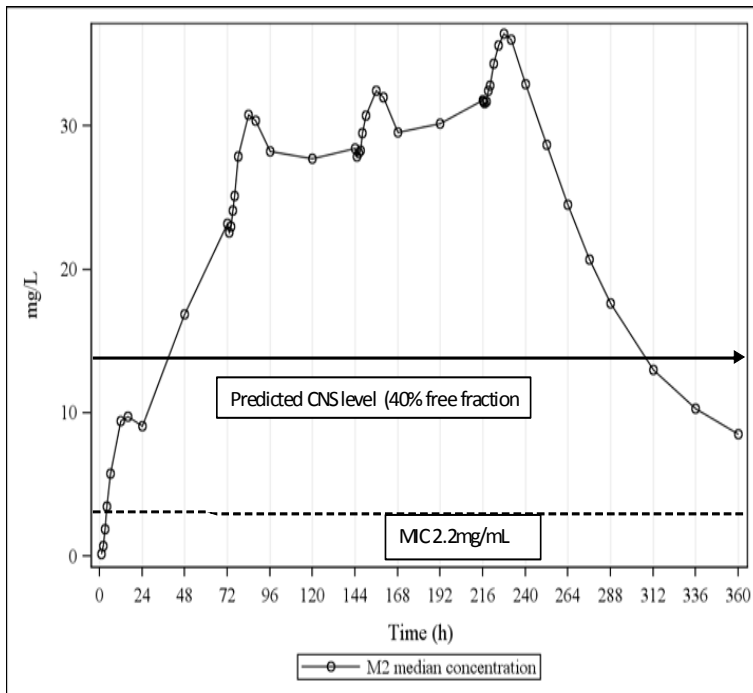


# POP PK calculations

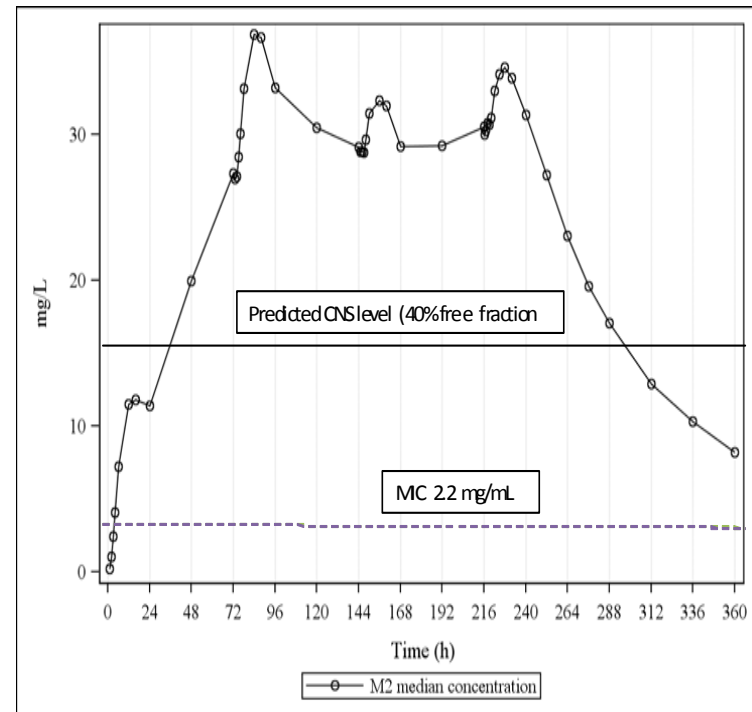
Dose regime 1= 1800mg(QD) for 4 days +1200 mg (QD) for 6 days

Dose regime 2= 2400mg(QD) for 4 days +1200 mg (QD) for 6 days

Dose regimen 1800 mg (D1-D4)+1200 mg (D6-D10)



Dose regimen 2400 mg (D1-D4)+1200 mg (D6-D10)





# Fexinidazole Next Steps

## NEXT studies

- Validation of the highest safety and efficacy dose
- Phase II/III study 2012
- Study in stage 1 of HAT with the same dose

## Vision for FEXINIDAZOLE

- Having oral efficacy and safety dose
- Available as once a day dosing
- Treatment for all stages of the disease

**DNDi**

Drugs for Neglected Diseases Initiative

Thank you