

## INTRODUCTION

- It has been confirmed that weight reduction is an effective therapy for T2D.
- However, few patients achieve that reduction only through diet and therefore weight reduction remains an area of unmet medical need for these patients.
- Tesofensine, a serotonin, norepinephrine, and dopamine reuptake inhibitor has previously been investigated in a Phase 2 study in patients with obesity and showed clinically and statistically significant weight loss at all three administered doses [Astrup et al., 2008].
- However, a dose-related increase in HR and to smaller extent BP were observed, which raised the question of a potential elevated CV risk of this compound.
- Given the need for neutral or beneficial CV safety profile in these patients, it has been decided to combine tesofensine with metoprolol, a selective  $\beta_1$ -adrenergic blocker, in order to deliver a product with a favorable benefit/risk profile.

## OBJECTIVES

- The objectives of this trial were to compare the effects of co-administration of tesofensine/metoprolol treatment vs. placebo on 24-hour mean heart rate, blood pressure, body weight, glycaemic endpoints and body composition in patients with T2D.
- This poster focuses on the results related to the changes in body weight, glycaemic endpoints and body composition.
- Regarding results related to the effects on 24-hour mean heart rate and blood pressure you are kindly requested to visit poster #851.

## STUDY DESIGN AND PATIENTS

- Double-blind, randomized, placebo-controlled, multi-dose, parallel study in subjects with T2D.
- Study conducted at two sites in Germany (Profil Neuss and Profil Mainz).
- 12 visits, including two in-house visits and seven out-patient visits.
- Each subject was randomized to one of two parallel treatment arms, 0.5 mg/d tesofensine + 100 mg/d metoprolol or placebo tablets in the morning over 90 consecutive days.
- Heart rate was monitored by telemetry over 24 hours and through a quiet hour during in-house visits at baseline and at the end of treatment.
- 24-hour heart rate as the primary endpoint was measured every minute and the mean was recorded every hour.
- Comparison of systolic and diastolic blood pressure were done as three measurements at each of six different time points (morning, pre-breakfast, noon, pre-dinner, evening, and midnight). For each of the six time points the mean value was calculated.
- Body weight was measured with calibrated scales at baseline (two measurements) and at the end of treatment.
- Waist circumference was measured using a tape measure.
- Liver fat content was measured in a subset of patients (Profil Neuss) using MRS at the German Diabetes Center, Düsseldorf.

## STATISTICAL ANALYSIS

- Statistical analysis was done with an analysis of covariance (ANCOVA) model with fixed effects of treatment and study site and baseline as co-variate.
- Safety endpoints were analysed by means of descriptive statistics.

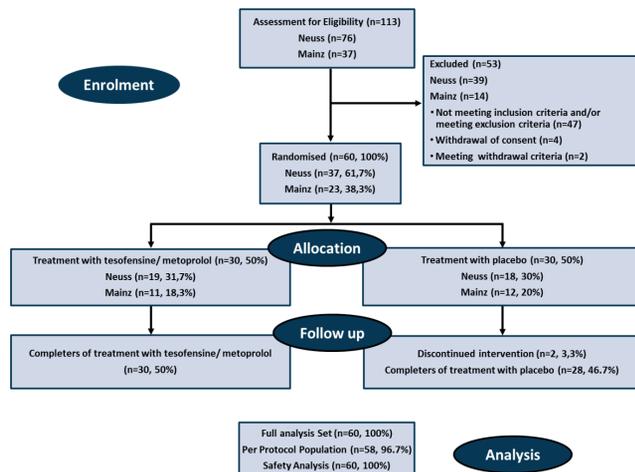


Figure 1. Patient flow and distribution diagram.

## RESULTS

Both groups had very similar baseline and demographic characteristics. The difference between treatment arms in bodyweight, BMI and waist was driven by a single individual with weight=157 kg in the active treatment arm.

Most subjects were of Caucasian origin (59, 98.3%) and one subject was of African origin (1.7%). Twenty-one (21) subjects (35.0%) were female and 39 subjects (65.0%) were male. Female/male gender distribution was 15/15 in the TESO+MET arm, 6/24 in the placebo arm, 15/22 at Profil Neuss and 6/17 at Profil Mainz.

Parameter [Unit]	Statistics	TESO+MET (N=30)	Placebo (N=30)	Overall (N=60)
Age [Years]	Mean (SD)	62 (7)	64 (5)	64 (6)
	Median (min-max)	63 (44-70)	66 (52-70)	65 (44-70)
Weight [kg]	Mean (SD)	99.2 (19.3)	93.7 (12.6)	96.4 (16.4)
	Median (min-max)	94.1 (73.5-174.4)	89.8 (75.8-125.6)	91.0 (73.5-174.4)
Height [cm]	Mean (SD)	170 (8)	174 (9)	172 (9)
	Median (min-max)	172 (158-190)	174 (154-194)	172 (154-194)
BMI [kg/m <sup>2</sup> ]	Mean (SD)	34.2 (6.1)	31.0 (3.8)	32.6 (5.3)
	Median (min-max)	34.4 (27.3-59.0)	30.2 (27.0-44.1)	31.5 (27.0-59.0)
Waist Circumference [cm]	Mean (SD)	114 (13)	109 (9)	111 (12)
	Median (min-max)	113 (95-154)	107 (94-140)	110 (94-154)
Pulse [b/min]	Mean (SD)	67 (7)	65 (9)	66 (8)
	Median (min-max)	66 (56-87)	65 (50-85)	66 (50-87)
SBP [mmHG]	Mean (SD)	132 (7)	136 (5)	134 (7)
	Median (min-max)	134 (118-140)	138 (120-140)	136 (118-140)
DBP [mmHG]	Mean (SD)	84 (5)	83 (5)	84 (5)
	Median (min-max)	85 (72-90)	83 (70-90)	85 (70-90)

Table 1. Patient characteristics at baseline.

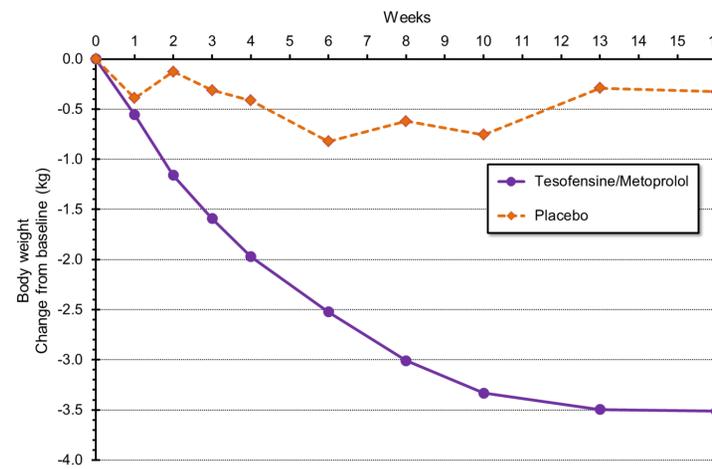


Figure 2. Treatment with TESO+MET showed a progressive and statistically significant reduction in body weight compared to subjects in the placebo group.

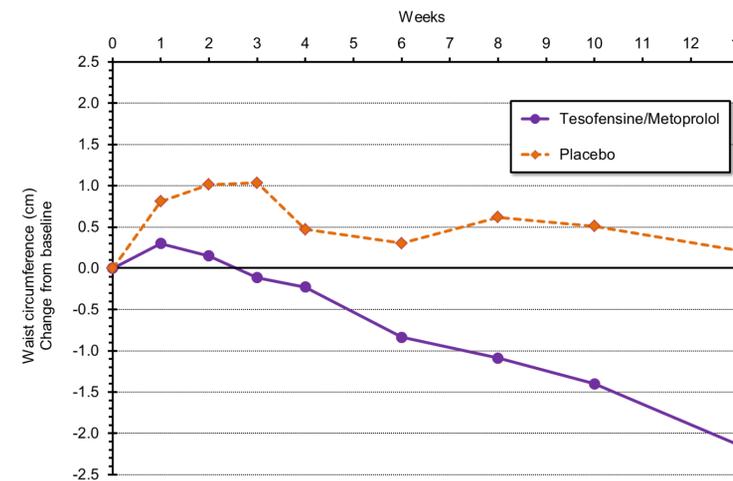


Figure 3. Treatment with TESO+MET led to a significant reduction in mean waist circumference compared to placebo.

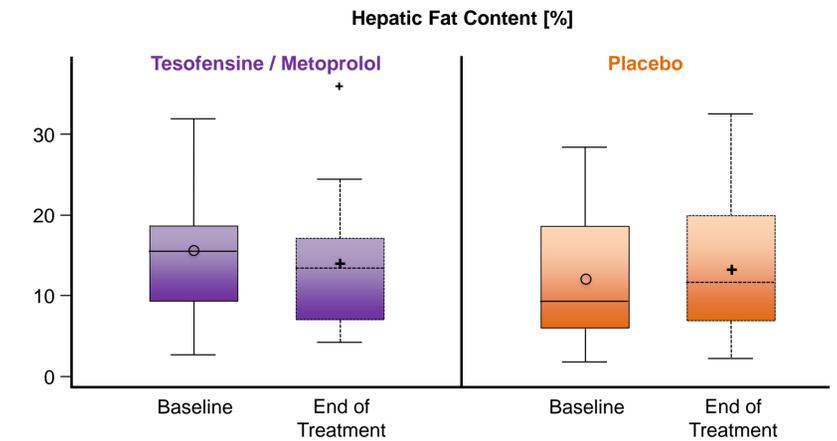


Figure 4. Treatment with TESO+MET led to a numerically decrease in liver fat content, whereas an increase was observed with placebo.

Parameter [Unit]	TESO+MET		Placebo		Difference in change from baseline (95% CI)	p-value
	Baseline	EOT	Baseline	EOT		
Body weight [kg]	99 ± 19	96 ± 20	94 ± 12	93 ± 13	-3.5 (-4.7; -2.3)	<.0001
Waist circumference [cm]	114 ± 13	112 ± 13	109 ± 9	108 ± 9	-2.3 (-3.9; -0.7)	0.0070
HbA1c [%]	7.5 ± 0.5	7.3 ± 0.6	7.7 ± 0.4	7.4 ± 0.7	0.05 (-0.2; 0.3)	0.7240
1.5-Anhydroglucitol [mg/L]	9.8 ± 6.0	11.8 ± 6.1	6.7 ± 3.6	8.2 ± 5.0	0.8 (-0.9; 2.5)	0.3290
FGP [mg/dL]	161 ± 30	158 ± 34	163 ± 28	157 ± 25	2 (-10; 14)	0.7331
Liver fat content [%]	16 ± 8	14 ± 8	12 ± 8	13 ± 9	-2.7 (-5.5; 0.1)	0.0625
Cholesterol [mmol/L]	5.2 ± 1.0	4.9 ± 0.8	4.7 ± 0.8	4.5 ± 0.7	0.08 (-0.2; 0.4)	0.5920
HDL [mmol/L]	1.2 ± 0.4	1.1 ± 0.3	1.2 ± 0.3	1.1 ± 0.3	-0.02 (-0.1; 0.1)	0.6613
LDL [mmol/L]	3.4 ± 0.9	3.3 ± 0.7	2.9 ± 0.6	2.9 ± 0.5	0.13 (-0.1; 0.4)	0.2537
Triglycerides [mmol/L]	2.2 ± 1.0	1.8 ± 0.8	2.0 ± 0.7	1.8 ± 0.7	-0.07 (-0.3; 0.2)	0.5722

Table 2. Summary table of efficacy results.

## SAFETY

- For safety results please refer to Poster #851

## CONCLUSION

- Co-administration of TESO+MET over 90 consecutive days compared to placebo resulted in a statistically significant reduction in both body weight and waist circumference.
- Co-administration of TESO+MET trended to improve liver fat content.
- Co-administration of TESO+MET had no effect on glycaemic endpoints or lipids.
- Co-administration of TESO+MET showed favorable tolerability and safety profile.
- This study demonstrates that a tesofensine/metoprolol co-administration significantly reduces body weight as well as waist circumference and trends to improve liver fat in patients with T2D without any negative effects on heart rate and blood pressure.

## REFERENCES

Astrup et al., 2008. Lancet 372:1906-1913

## SPONSOR

This study was sponsored by Saniona A/S, Denmark and registered at clinicaltrials.gov under the number NCT02737891.