Deflazacort Expanded Access Program for the Treatment of Patients with Duchenne Muscular Dystrophy

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Duchenne Muscular Dystrophy and Deflazacort

Background Information

- **Duchenne Muscular Dystrophy (DMD)**
  - Recessive X-linked form of muscular dystrophy which results in muscle degeneration, difficulty walking, breathing, and eventually, death
  - The incidence is approximately 1 in 3,500 live male births
  - Prevalence in U.S. approximately 15,000 boys (Orphan drug)
  - No approved therapies (high unmet medical need)

- **Deflazacort**
  - Glucocorticoid with anti-inflammatory and immunosuppressive effects
  - Approved in the EU for a variety of diseases but not for DMD
  - Used off-label in the EU and imported into the US for use by patients with DMD based on findings from small academic studies
  - Formal clinical pharmacology studies and safety studies never conducted in the DMD patient population and adequate and well controlled efficacy studies never published
Deflazacort U.S. Development & Registration Program: Studies and Timeline

2013
- Orphan Drug Designation
- Fast Track Designation

2014
- IND
- Drug-Drug Interaction Study

2015
- Pre NDA
- Pediatric Rare Disease Designation
- PK Study-DMD
- Hepatic Study
- BA/Suspension BE/Food Study
- Renal Study
- Calcort BE Study
- DMD Safety Extension Study

2016
- File NDA
- DMD Expanded Access Program
- Phase 3b Study in Infants & Young Children
- Phase 3b Pulmonary Study in Non-Ambulatory Patients
- TQT Study

2017
- Expected Approval
- Post-approval

Licensed: Two Phase 3 Efficacy Studies (Children & Adolescents)

Genetic Tox Studies (6)
- Monkey 9 month Tox Study
- Rat 6 month Tox Study
- Rat Juvenile Tox Study

Carcinogenicity (mice & rats)

Black: Regulatory
Red: Pre-Clinical
Blue: Clinical

DEFRAZACORT®
Deflazacort® U.S. Development & Registration Program
Produced for MARATHON PHARMACEUTICALS, LLC

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Deflazacort EAP
(Protocol MP-104-CL-037)
Marathon’s Goals for Expanded Access

Access DMD Program (Protocol MP-104-CL-037)

- Ensure access to deflazacort for every patient with DMD in the U.S.
  - Knew patient access would be dependent on site participation
  - Site participation dependent on awareness of EAP and willingness to take on challenges of participation
  - Had to identify/mitigate barriers to site participation

- Create positive experience for patients participating in the program
  - Minimize number of patients visits; reduce patient burden
  - Home delivery of drug; ensure precise and timely delivery
  - Ensure patient interactions with specialty pharmacy are positive
Challenges to Implementation - Sites

Access DMD Program (Protocol MP-104-CL-037)

- How do we get sites already participating in multiple trials to take on a less lucrative, time consuming EAP?
  - Insufficient resources to handle IRB submissions, regulatory document completion, contracts, etc.
  - Compensation less that typical clinical trial

- How to overcome false perceptions from sites unfamiliar with EAPs?
  - EAP a drain on resources
  - Will IRB approve?
  - Patients don’t need EAP to get access to deflazacort
To address the challenge of administrative burden on sites, Marathon created an EAP portal (MyMAPs®) for sites:

- Through MyMAPs®, sites able to:
  - Complete CDAs
  - Complete Regulatory Documents
  - Conduct GCP training
  - Order drug
  - Report AEs/SAEs
- “One stop shop” of services
- MyMAPs® accessible through website
Challenges to Implementation – Sites (continued)

Access DMD Program (Protocol MP-104-CL-037)

- To address misconceptions of EAPs, Marathon:
  - Conducted one on one presentations about the program with physicians and site staff
  - Addressed the challenges faced by sites
  - Described efforts by Marathon to support sites through startup (i.e. MyMAPs®, other site support)
  - Provide assurance that sites would be reimbursed for startup costs

- Instituted one time start-up fee to compensate sites for startup work
  - One time fee streamlined contracts, little negotiation
  - Offered incentive to commit staff to EAP
Continuing Site Challenges

Access DMD Program (Protocol MP-104-CL-037)

- **IRB misunderstandings**
  - Research vs. access
  - Some IRBs insist on more procedures/monitoring than what’s in the EAP protocol

- **Contracts/budgets**
  - Institutions insistence on including overhead, higher budgets
  - Failure to understand this is for the benefit of the patient, not the company

- **Despite efforts to minimize site effort, some sites don’t want to take on even minimal administrative burden**
Patient Outreach

Access DMD Program (Protocol MP-104-CL-037)

- In order to ensure patients had a positive experience, had to ensure EAP message was communicated effectively

- accessdmd.com
  - Describes what an EAP is and how to participate
  - Informs patient of all centers participating in EAP
  - Addresses frequently asked questions

- Extensive training of specialty pharmacy staff
  - On-site pharmacy staff training
  - Same call-center representative for each patient
  - Call-center fields calls from patients and sites
    - Script and triage tree to assist call-center staff
ACCESS DMD™

An open-label, expanded access protocol intended to provide treatment with MF-104 (deflazacort®) to U.S. children, adolescents, and/or adults with Duchenne muscular dystrophy is now available.

Welcome to ACCESS DMD™, an expanded access program that is now available for children, adolescents, and adults in the U.S. diagnosed with Duchenne muscular dystrophy (DMD).

The intent of an expanded access program is to provide patients with access to investigational medication for serious diseases or conditions where there is no comparable or satisfactory alternative therapy available. The ACCESS DMD™ program will enable participating physicians to obtain and provide deflazacort®, an investigational medication for eligible U.S. patients diagnosed with DMD while it is under development.

While participating in ACCESS DMD™, deflazacort® will be provided to eligible U.S. patients at no cost, and it will be sent directly to patients or their caregivers. To learn more about ACCESS DMD™, please follow one of the links below.

Please click below if you are a:

- PATIENT
- PROSPECTIVE PHYSICIAN
- PARTICIPATING PHYSICIAN

*Deflazacort is an investigational medication that has not been approved by the Food and Drug Administration (FDA) and is therefore not proven to be safe and effective.

ACCESSDMD is a trademark of Marathon Pharmaceuticals, LLC.
Protocol MP-104-CL-037

An open label, expanded access protocol intended to provide treatment with MP-104 (deflazacort) to U.S. children, adolescents, and/or adults with Duchenne muscular dystrophy
Protocol Objectives

- To provide access to treatment with deflazacort in children, adolescent, and adult patients with DMD in the U.S. who are ineligible, unable, or otherwise unwilling to enroll in a clinical study examining the efficacy of deflazacort while a new drug application is under preparation and review.
- Number of treatment-emergent and treatment-related adverse events during treatment with deflazacort in children, adolescent, and adult patients with DMD.
- Number of dose reductions related to adverse events.
Implementation

Access DMD Program (Protocol MP-104-CL-037)

- Program awareness campaign
  - Patient advocacy groups

- Integrated portal (PAREXEL MyMAP®)
  - Seamless physician and patient registration
  - Online deflazacort ordering
  - Limited data collection

- Specialty Pharmacy (Dohmen Life Science Service)
  - Call center
  - Direct to patient deflazacort delivery within 24 hours

- Transition to commercial product upon NDA approval
  - Same call center/specialty pharmacy
  - Transition services
Physician Responsibilities

Access DMD Program

- Become an ACCESS DMD registered physician via MyMAP
  - Regulatory documentation
  - Training
  - Execute contract

- Enroll patients in MyMAP

- Order deflazacort in MyMAP

- Follow standard of care for managing patient’s DMD
  - No protocol required visit schedule
  - Data collection limited to safety information

- AE/SAE outcome reporting in MyMAP

- Update deflazacort orders in MyMAP

- Discontinue patients in MyMAP
Access DMD Enrollment

Currently enrolling approximately 20 DMD patients per week
Q&A