Summary of Clinical Trial Results

A study to look at the long-term safety of a medicine, efmarodocokin alfa, in people with ulcerative colitis

See the end of the summary for the full title of the study.

About this summary

This is a summary of the results of a clinical trial (called a "study" in this document).

This summary is written for:

- Members of the public
- People who took part in the study

This summary is based on information known at the time of writing.

The study started in January 2019 and finished in July 2022. This summary was written after the study had ended.

No single study can tell us everything about the risks and benefits of a medicine. It takes many people in several studies to find out everything we need to know. The results from this study may be different from other studies with the same medicine.

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Contents of the summary

Thank you to the people who took part in this study

The people who took part have helped researchers answer important questions about ulcerative colitis – and efmarodocokin alfa, the study medicine.

Key information about this study

- This study was done to find out if the study medicine was safe and could be tolerated when used long-term.
- Everyone in this study was given the same dose of the study medicine, efmarodocokin alfa.
- This study included 128 people in 14 countries.
- The main finding was that side effects from efmarodocokin alfa were at an acceptable level.
- One person (1%) had a serious side effect caused by the study medicine.
- Forty-three people (34%) had side effects that were not serious but thought to be caused by the study medicine.
- This study stopped early because the medicine being studied did not work as well as expected for UC.

1. General information about this study

Why was this study done?

Ulcerative colitis (UC) affects the colon. It is an example of inflammatory bowel disease (IBD) – where inflammation lasts long-term.

UC is associated with bleeding through the rectum, stomachache, diarrhea, and bloody diarrhea. Many medicines are available for treating UC – some of which are corticosteroids, immuno-suppressants (azathioprine, 6-mercaptopurine, and methotrexate), anti-tumor necrosis factor (TNF), and anti-integrin therapy.

Several of the medicines work by suppressing the immune system. While this is useful for controlling UC, unfortunately, people can get side effects from a suppressed immune system.

Researchers are working to find safer medicines that do not suppress the immune system. Medicines that can stop the disease from getting worse will be especially useful so that patients do not require surgery.

Efmarodocokin alfa is a new medicine undergoing testing. It has been given to people with UC in other studies. It does not suppress the immune system.

This study was done to find out how safe was it – for people to use efmarodocokin alfa over a long term. This study enrolled people who had already used efmarodocokin alfa for a short term in another study.

What was the study medicine?

A medicine called “efmarodocokin alfa” was the focus of this study.

- This medicine is also known as “UTTR1147A”.
- Efmarodocokin alfa is a medicine made by connecting (fusing) two different proteins – one of which is IL22 – that has anti-inflammatory properties.
- Efmarodocokin is being tested to find out if it could be useful for people with UC.

What did researchers want to find out?

Researchers had previously done a study to compare efmarodocokin alfa with an existing medicine (vedolizumab) and a placebo.

Many people from the previous study joined the current study – after the previous study had ended.

The main question that researchers wanted to answer was:

1. How safe was it to use efmarodocokin alfa over a long term?

What kind of study was this?

This was an **open-label extension study.**

Researchers and the people in the study (**study participants**) knew what treatment the study participants were getting in this study. Because everyone knew, that made it an "**open-label study**".

Researchers had looked at the safety of efmarodocokin alfa in people with UC in a previous study. The current study was an "**extension study**" because researchers wanted to continue to look at the effects of efmarodocokin alfa in the people from the previous study. People from the previous study (GA39925) joined this study (GA40209).

When and where did the study take place?

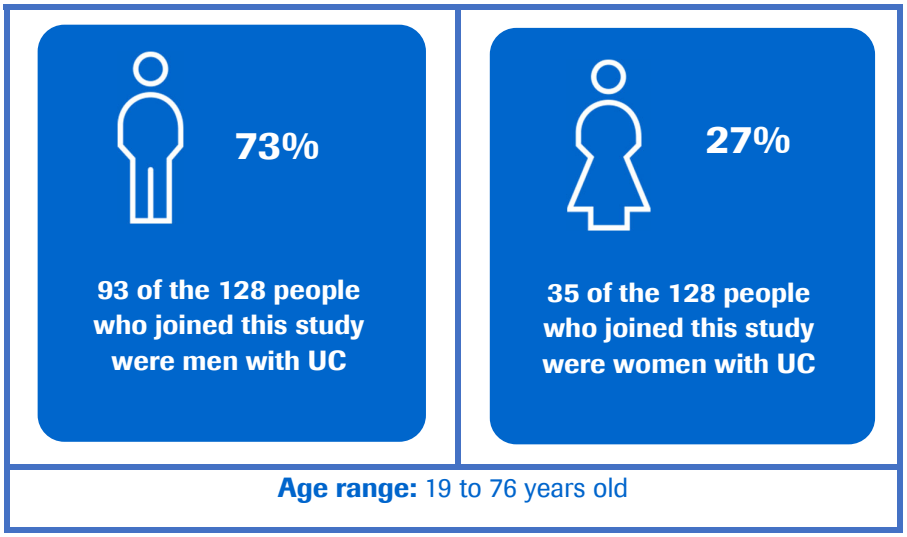
The study started in January 2019 and finished in July 2022. This summary was written after the study had ended.

The study took place at 66 study centers – across 14 countries:

- Poland (17 study centers)
- Ukraine (17 study centers)
- Serbia (7 study centers)
- Germany (5 study centers)
- Russia (5 study centers)
- Italy (4 study centers)
- Greece (3 study centers)
- Bulgaria (2 study centers)
- Georgia (1 study center)
- Ireland (1 study center)
- Moldova (1 study center)
- Spain (1 study center)
- United Kingdom (1 study center)
- United States (1 study center)

2. Who took part in this study?

One hundred and twenty-eight people with UC received at least one dose of the study medicine.



People could take part in the study if they met all of the following conditions:

- They had participated in a previous study for efmarodocokin alfa – Study GA39925.
- They were able to meet the requirements of the current study. One of the requirements was using birth control while taking the study medicine.

People could not take part in the study if they met any of the following conditions:

- They met conditions for stopping the study treatment in the previous study.
- They stopped the study treatment and withdrew from the previous study (GA39925) – before they could become eligible for this study.
- They did not follow what was required of them in Study GA39925. For example,
  - they did not visit the study center on the scheduled date
  - they did not keep up with taking required medicines
- Women who were pregnant or breastfeeding, on intended to become pregnant within a certain period after study treatment.
- Any changes to one's health status after joining Study GA39925.
- Use of therapies not allowed in this study.

3. What happened during the study?

Did everyone receive the treatment?

- People in this study could show "**clinical remission**" - when the UC disease was not causing any major symptoms or signs.
- Only people without clinical remission were allowed to receive the study treatment.
- Clinical remission could be present in people at the start of this study – or at any time during the study.
- Researchers saw people at different times during the study – to find out if they had achieved clinical remission.

What was the treatment?

- People in this study received efmarodocokin alfa at a dose of 60 micrograms per kilogram body weight (60 µg/kg), given once every 4 weeks. It was given intravenously – through an IV tube into a vein – at the study center.

How long was the treatment?

- Researchers planned to observe people in this study for about two years – through Week 104.
- Treatment could be stopped at any time if:
    - there was clinical remission
    - the disease became worse
    - the sponsor, the researchers, or the people in the study decided to stop treatment

The study stopped early because the sponsor decided to stop the development of efmarodocokin alfa for UC. After people got their last treatments, they were asked to go back to their study center for more visits – to check their overall health.

4. What were the results of the study?

Out of 128 people who received at least one dose of the study treatment, 28 people (22%) completed the study.

One hundred people stopped the study treatment. The main reason was "lack of efficacy", which means the medicine was not useful. This was the case for 53 people (41%). Another 21 people stopped the study treatment because the sponsor stopped the study.

Question 1: How safe was it to use efmarodocokin alfa over a long term?

Researchers looked for side effects resulting from the study treatment. They examined the study participants at the study center. They asked questions and collected blood samples for laboratory tests.

The results of this study showed side effects from efmarodocokin alfa were at an acceptable level. People in the study tolerated efmarodocokin alfa at an acceptable level.

- One person (1%) experienced a serious side effect that researchers thought was caused by the study treatment.
- Forty-three people (34%) experienced non-serious side effects that researchers thought were caused by the study treatment.

This section only shows the key results from this study. You can find information about all other results on the websites at the end of this summary (see Section 8).

5. What were the side effects?

Side effects are medical problems (such as feeling dizzy) that happened during the study.

- They will be described in this summary if the study doctor believed the side effects to be related to the treatments in the study.
- Not all of the people in any one study have all of the side effects.
- Side effects may be mild to very serious and can be different from person to person.
- It is important to be aware that the side effects reported here are from this single study. Therefore, the side effects shown here may be different from those seen in other studies, or those that appear on the medicine leaflet.
- If serious and common side effects were seen in this study, they will be listed in the following sections.

Serious side effects

A side effect is considered "serious" if it is life-threatening, needs hospital care, or causes lasting problems.

During the study, one person (1%) had serious side effects – thought to be caused by the study treatment. The person had an increase in two different blood protein levels – indicated in blood test results (amylase increase and lipase increase). The side effects suggested there was a problem in the pancreas. The side effects went away (resolved) during the study.

Nobody in this study died as a result of side effects that may have been related to the study medicines.

During the study, two people (2%) decided to stop efmarodocokin alfa treatment because of side effects thought to be caused by this study medicine.

Most common side effects

During this study, 43 people (34%) had a side effect that was not serious – but was thought to be caused by the study treatment.

The most common side effects – those that happened in two or more people – are shown in the following table. Some people had more than one side effect – this means that they are included in more than one row in the table.

Common side effects	Number of people with side effect
Dry skin	30 people (23%)
Itchy skin (pruritus)	7 people (6%)
Skin peeling (exfoliation)	1 people (2%)
Dry lip	4 people (3%)
Increased protein in blood (alanine aminotransferase increased)	2 people (2%)
Increased protein in blood (lipase increased)	2 people (2%)
Fever (pyrexia)	2 people (2%)
Dry eyes, mucus membrane, or skin (xerosis)	2 people (2)
Headache	2 people (2%)

Other side effects

You can find information about other side effects (not shown in the sections above) on the websites listed at the end of this summary – see Section 8.

6. How has this study helped research?

The information presented here is from a single study of 128 people with UC. These results helped researchers learn more about UC and efmarodocokin alfa.

There were serious and non-serious side effects – thought to be caused by efmarodocokin alfa. The side effects were at an acceptable level. People in the study tolerated efmarodocokin alfa at an acceptable level.

The study was stopped early because the sponsor decided not to develop efmarodocokin alfa for UC. The medicine being study did not work as well as expected for UC.

No single study can tell us everything about the risks and benefits of a medicine. It takes many people in several studies to find out everything we need to know. The results from this study may be different from other studies with the same medicine.

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7. Are there plans for other studies?

At the time of writing this summary, no more studies looking at efmarodocokin alfa as a single agent in ulcerative colitis were planned.

8. Where can I find more information?

You can find more information about this study on the websites listed below:

https://clinicaltrials.gov/ct2/show/results/NCT03650413

https://www.clinicaltrialsregister.eu/ctr-search/trial/2017-004997-32/results

https://forpatients.roche.com/en/trials/autoimmune-disorder/ulcerative-colitis/an-extension-study-to-evaluate-the-long-term-safety-and-37359.html

Who can I contact if I have questions about this study?

If you have any further questions after reading this summary:

- Visit the ForPatients platform and fill out the contact form – https://forpatients.roche.com/en/About.html
- Contact a representative at your local Roche office.

If you took part in this study and have any questions about the results:

- Speak with the study doctor or staff at the study hospital or clinic.

If you have questions about your own treatment:

- Speak to the doctor in charge of your treatment.

Who organized and paid for this study?

This study was organized and paid for by Genentech, Inc., South San Francisco, CA, USA. Genentech is part of F. Hoffmann-La Roche Ltd., with headquarters in Basel, Switzerland.

Full title of the study and other identifying information

The full title of this study is:

A phase 2 open-label extension study to evaluate the long-term safety and tolerability of UTTR1147A in patients with moderate to severe ulcerative colitis or Crohn's disease

- The study is known as "SERENGETI".
- The protocol number for this study is GA40209.
- The ClinicalTrials.gov identifier for this study is NCT03650413.
- The EudraCT number for this study is 2017-004997-32.