

An overview of the PrecISE Trial

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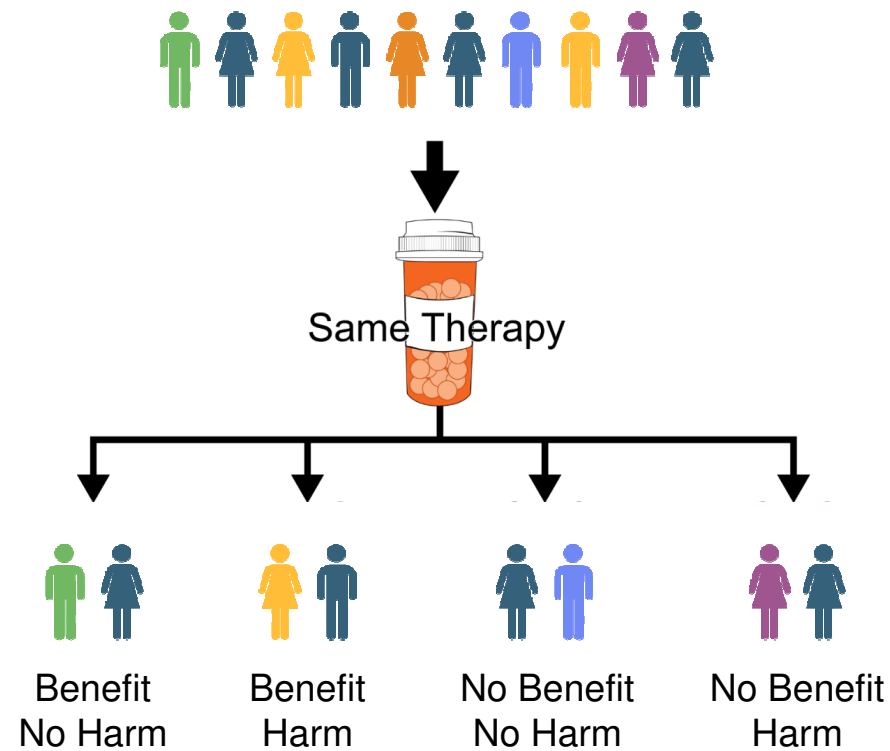
University of Rochester Medical Center

Rochester, NY

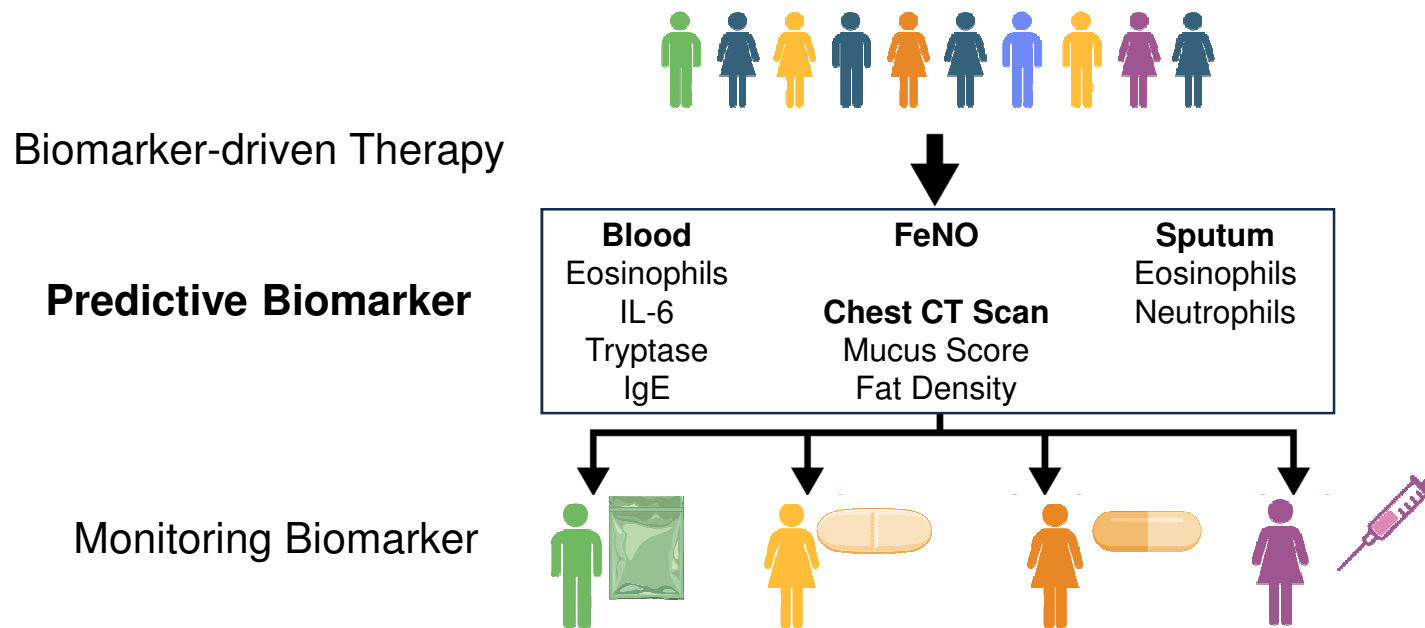
on behalf of PrecISE investigators



Without Precision Medicine



The Promise of Precision Medicine



Precision Interventions for Severe and/or Exacerbation Prone Asthma (PrecISE)

Request for Applications issued 2017 by NHLBI

- Biomarker-driven precision medicine study (2018-2025)
- Interventions inspired by mechanistic asthma research
- Key principles and objectives:

Innovative trial design

Use predictive and monitoring biomarkers

**Platform Trial with Master Protocol
Biomarker-driven Adaptive Enrichment**

Innovative interventions

**Five interventions
3 first in asthma**

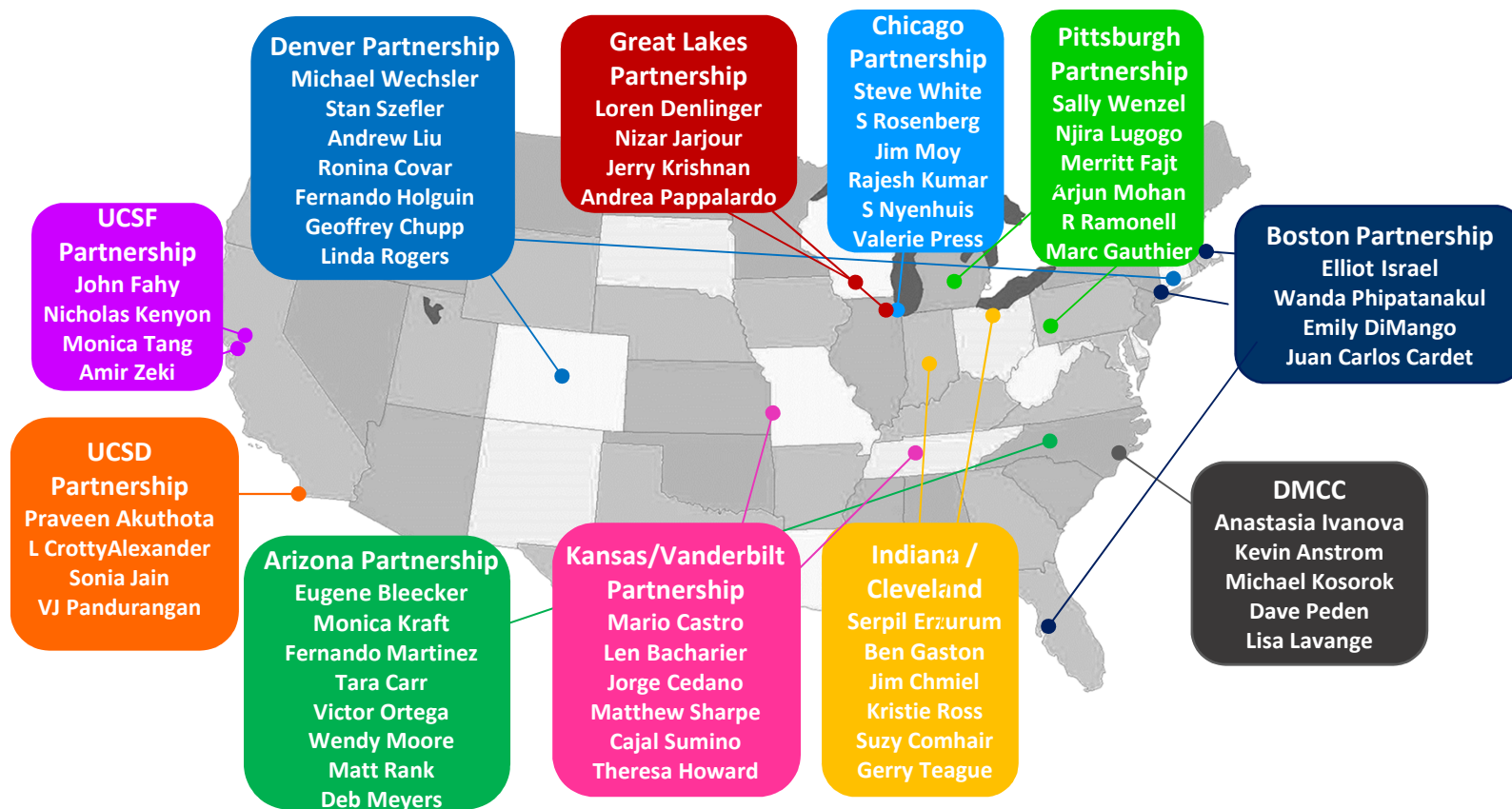


Patricia Noel



Jim Kiley

PrecISE Network



PrecISE Protocol: Initial Design



- Platform trial with Master Protocol
- Cross-over design with biomarker-driven randomizations
 - 16 week treatment, 8 week washout
- Chance to demonstrate efficacy on **any one of three outcomes:**

FEV₁
(percent predicted,
pre-albuterol)

ACQ-6

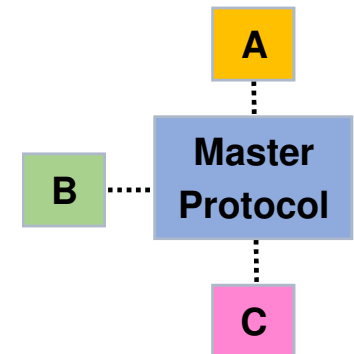
**CompEx
events**

PrecISE Design

Ivanova et al, *J Biopharm Stat*, 2020

Israel et al, *J All Clin Immunol*, 2021

Severe exacerbations or acute worsening
events based on symptoms, rescue
medication use, and peak expiratory flow
(CompEx: Fuhlbrigge et al, 2017)



Inclusion and Exclusion Criteria

Inclusion

- Male or female, age ≥ 12 years
- Verification of asthma by MBR $> 12\%$ or hyperresponsiveness to methacholine
- On stable therapy x2 months, at least medium dose ICS + 2nd controller
- Meet ERS/ATS guideline criteria for severe asthma

Exclusion

- Investigational drug administration within the past 60 days OR < 5 half-lives
- Diagnosis of other chronic pulmonary disorders
- Daily systemic corticosteroids above 10 mg prednisone / day
- Smoking history (age related cut-offs; 5 to 15 pack-years)
- Additional safety criteria to mitigate risk while supporting recruitment

Uniform single consent

First
in
asthma

Medium Chain Triglycerides

Mitochondrial metabolism

Biomarker: FeNO ≥ 15 ppb

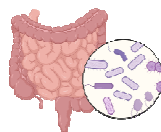
Partner: Vitaflo/Nestle

WG Chair: S. Erzurum

Mitochondrial
Metabolism



Immune
Modulation



Broncho-Vaxom

Immune modulation

Biomarker: Eos $\geq 300/\mu\text{l}$

Partner: OM Pharma

WG Chair: F. Martinez

First in asthma

Cavosonstat

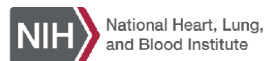
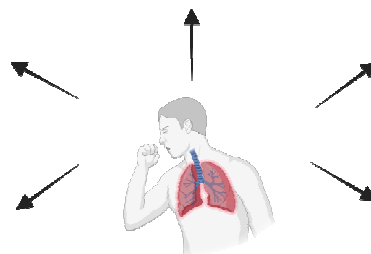
S-nitrosoglutathione reductase

Biomarker: GSNOR SNP

Partner: Laurel Therapeutics

WG Chair: B. Gaston

S-Nitrosothiols



Imatinib

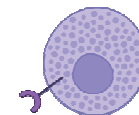
Mast cell c-Kit tyrosine kinase

Biomarker: Eos $< 300/\mu\text{l}$

Partner: Sun Pharma

WG Chair: E. Israel

Mast Cell c-Kit



Systemic
Inflammation



Clazakizumab

Anti-IL-6

Biomarker: IL-6 > 3.1 pg/ml

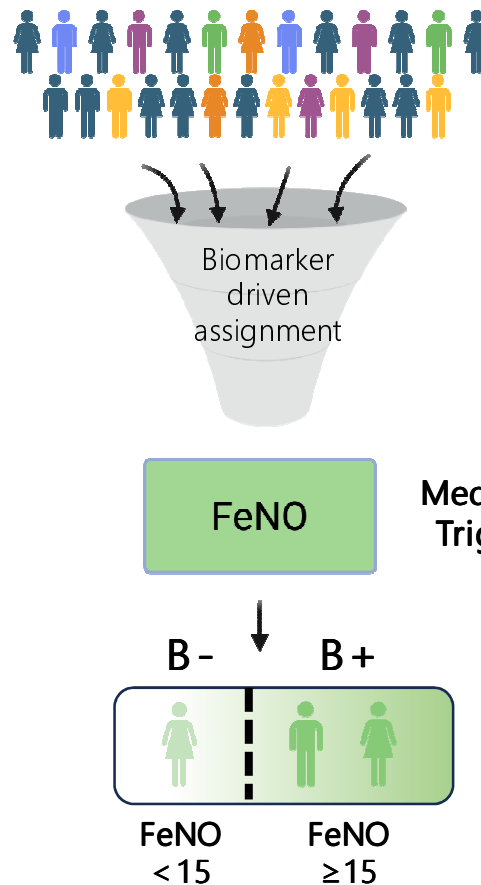
Partner: CSL Behring

WG Chair: J. Fahy

First
in
asthma

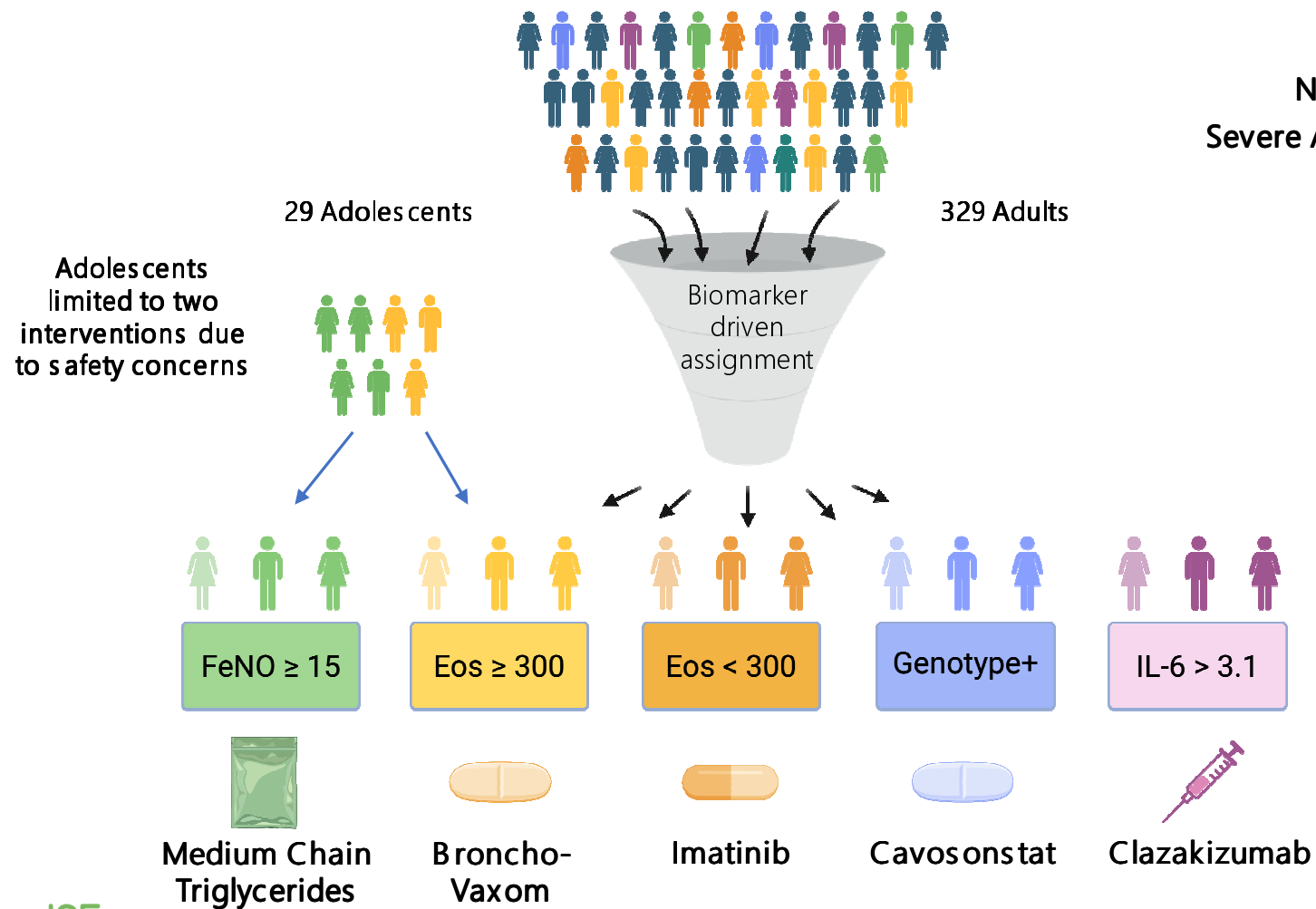
Because of uncertainty about cut-off values, Biomarker Positive (B+) and Biomarker Negative (B-) included in all interventions

Oversample B+, and adjust after interim analyses

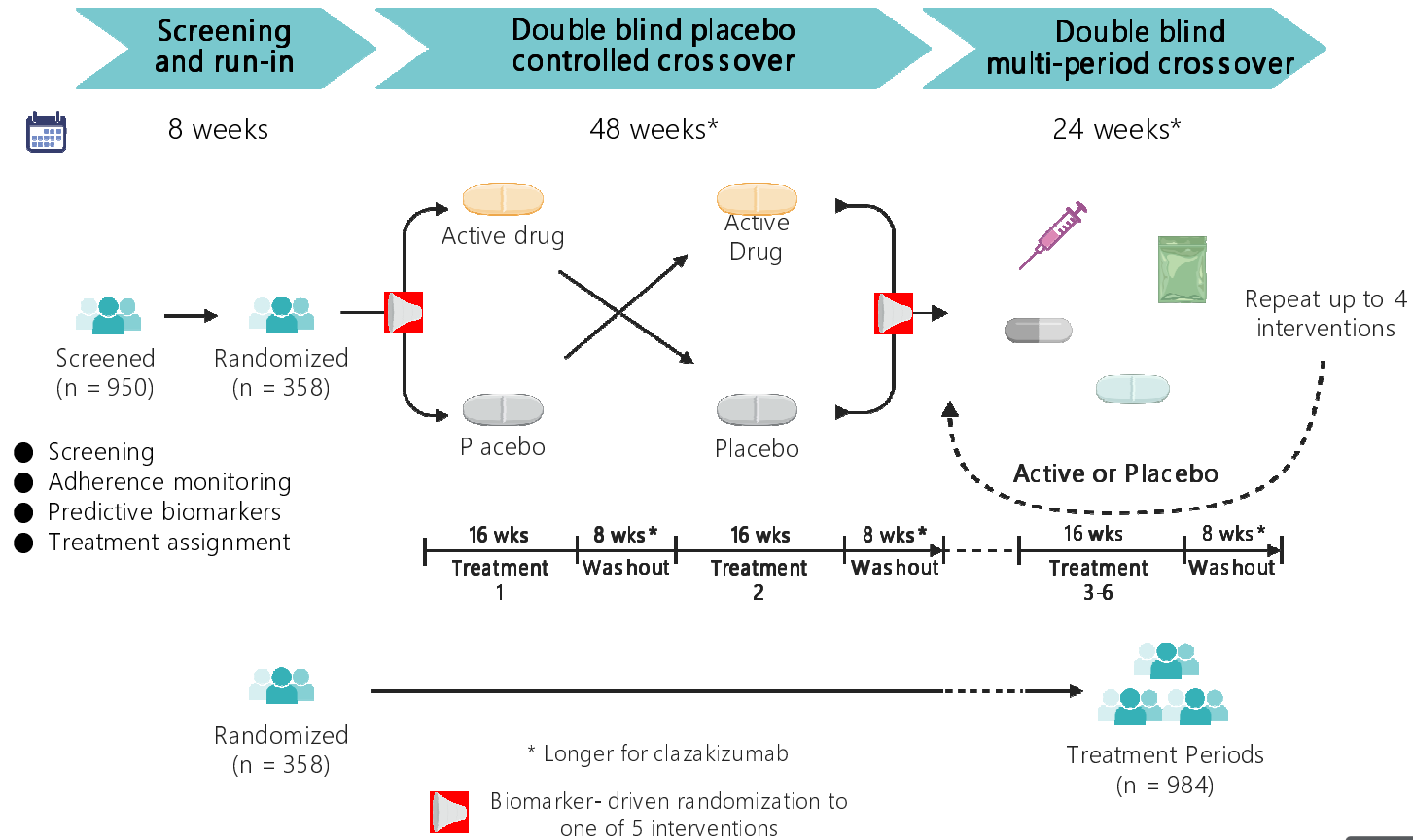


Example for MCT

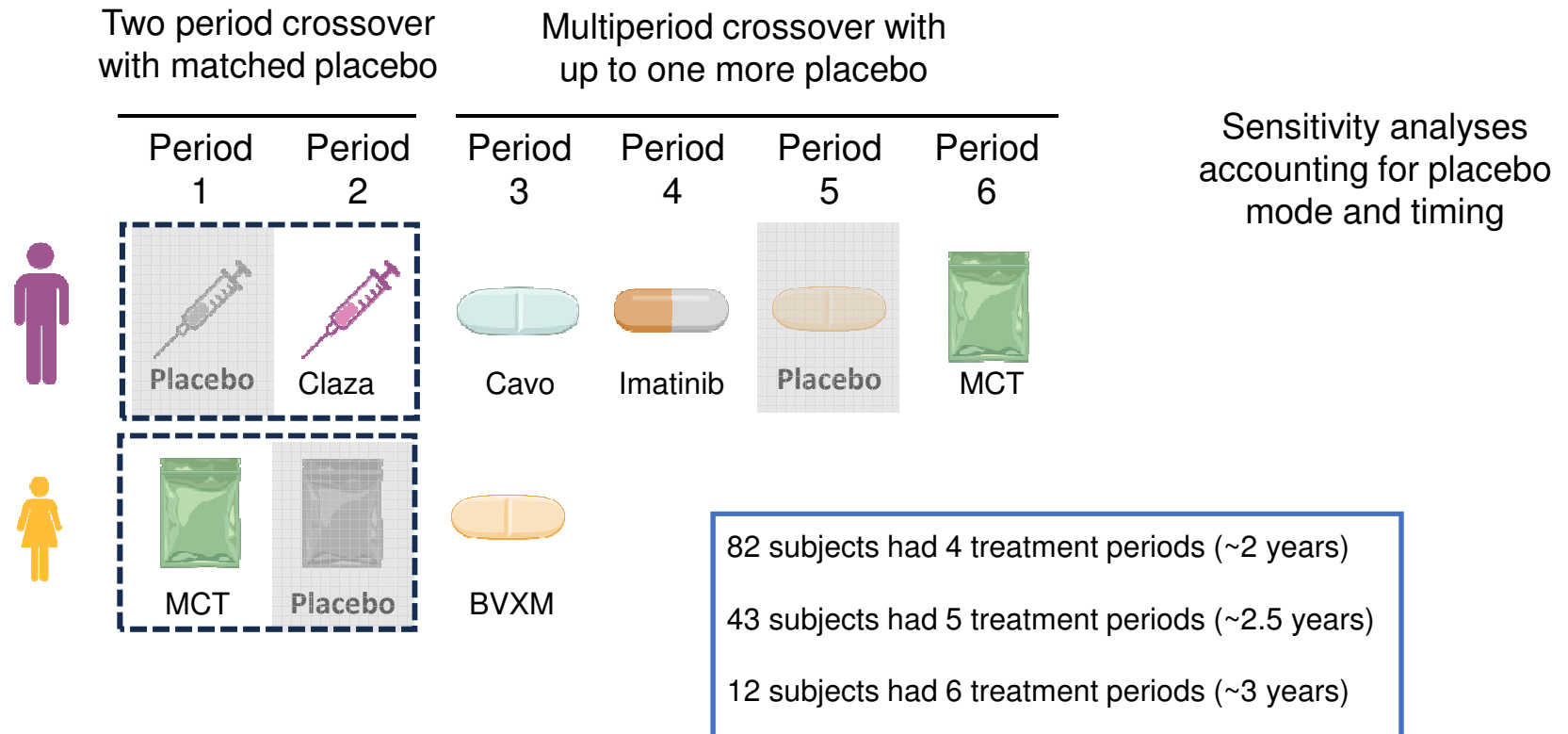
N=358
Severe Asthmatics



Multiperiod Crossover with Adaptive Enrichment

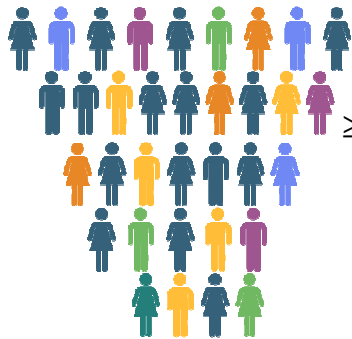


Examples of multi-period cross-over allocations in PrecISE



PrecISE: Baseline Characteristics total cohort

Adults n=329



Age = 52 ± 13 yrs
66% female, 25% Black
 ≥ 2 exacerbations/yr = 29%
Biologic use = 28%
BMI = 33.0
Pre-BD FEV1 = 70%
ACQ=1.8

Blood Eos = 164
FeNO = 23
IL-6 = 3.5

Adolescents n=29



Age = 15 ± 2 yrs
55% female, 41% Black
 ≥ 2 exacerbations/yr = 35%
Biologic use = 21%
BMI = 29.3
Pre-BD FEV1 = 94%
ACQ = 1.2

Blood Eos = 159
FeNO = 37
IL-6 = 2.2

PrecISE Accomplishments

- Evaluated five novel interventions in phase II proof-of-concept biomarker-driven precision medicine trial
 - Three first in asthma
- Developed a master protocol protocol with biomarker-driven adaptive enrichment
 - Novel trial design in severe asthma
- Efficient multiperiod cross-over design and feasibility of retaining subjects for up to three years
 - From 358 subjects to almost 1000 treatment periods
- Accomplished key RFA objectives despite reduced sample size
 - COVID adaptations including remote spirometry
- Eleven (11) publications to-date