

RAPID CONVERSION OF PRIMARY TO SECONDARY BILE ACIDS IN SUBJECTS WITH RECURRENT *CLOSTRIDIOIDES DIFFICILE* INFECTION (CDI) FOLLOWING SER-109, AN INVESTIGATIONAL MICROBIOME THERAPEUTIC

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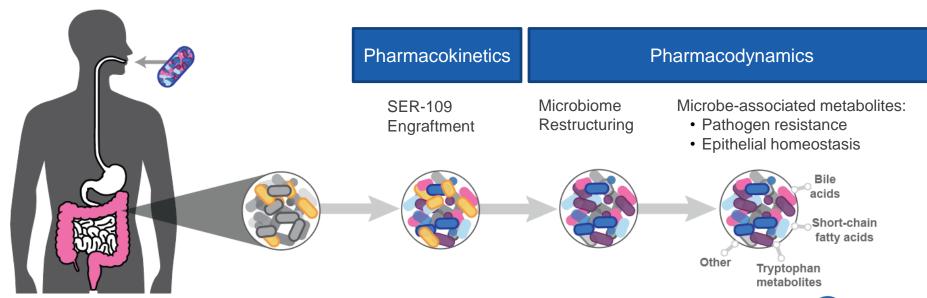
Disclosures

Employee and share-holder of Seres Therapeutics



Pharmacology of SER-109

- Pharmacokinetics: SER-109 spores germinate into metabolically-active bacteria that colonize the GI tract, a process called engraftment
- Pharmacodynamics: Engraftment induces broad compositional and functional changes associated with a clinical response



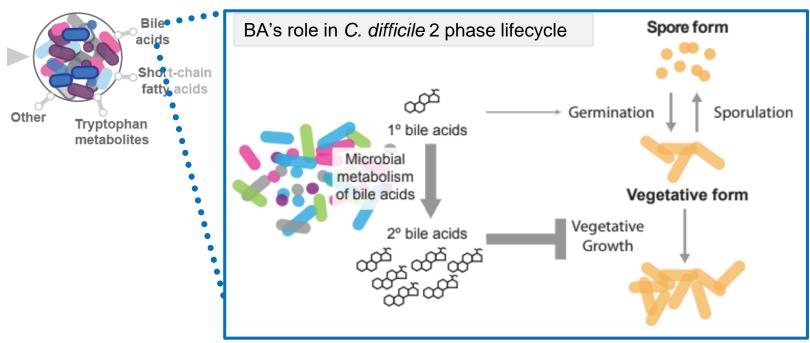


Primary & secondary bile acids are likely biomarkers

Potential MoA to reduce CDI recurrence



Key Firmicutes drive secondary BA metabolism



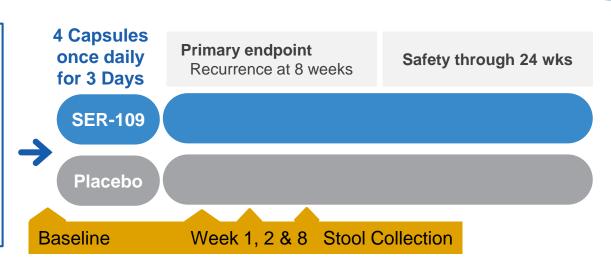


ECOSPOR-III

Ph3 Double-blind, placebo-controlled trial of SER-109 for multiply recurrent CDI

182 toxin+ adult subjects symptom resolution on antibiotics for 10 – 21 days

Subjects stratified by age and antibiotic received



Endpoints

Primary: Superiority of SER-109 compared to placebo for reduction of recurrence of CDI

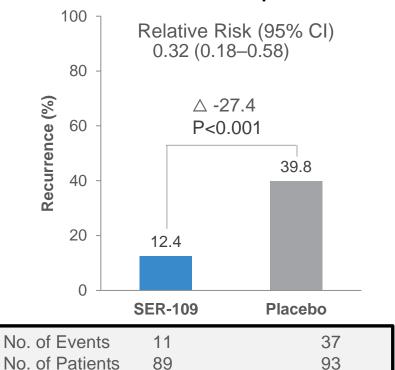
Exploratory: Compositional and functional changes in the microbiome in SER-109 vs Placebo participants



SER-109 demonstrated superiority versus placebo in the reduction of CDI recurrence rates in ITT population through Week 8



Recurrence In Overall Population



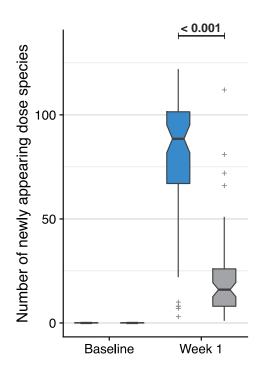
Most recurrence events occurred rapidly

 Of 48 total recurrences in the overall population that occurred by week 8, 36 (75%) occurred within two weeks.



SER-109 engrafted rapidly and durably after dosing





Treatment SER-109 Placebo

Peak engraftment achieved rapidly;

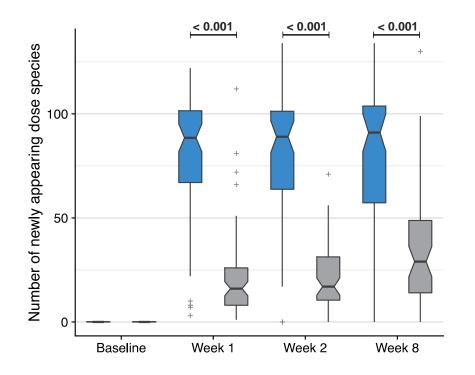
SER-109 subjects had significantly greater engraftment vs placebo at week 1 (p<0.001)

 Significance differences were maintained in subpopulation analyses (i.e. vancomycin vs fidaxomicin and under vs over 65 years old)



SER-109 engrafted rapidly and durably after dosing





Peak engraftment achieved rapidly; durable through 8 weeks

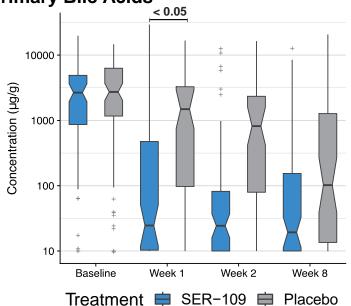
- SER-109 subjects had significantly greater engraftment at all postdosing timepoints (p<0.001)
- Significance differences were maintained in subpopulation analyses (i.e. vancomycin vs fidaxomicin and under vs over 65 years old)



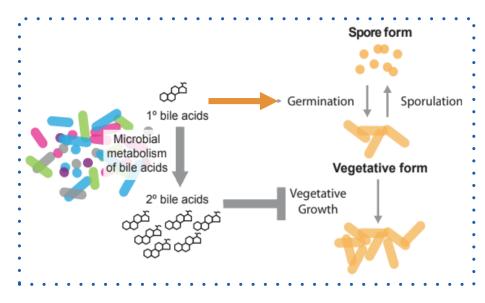
SER-109 engraftment resulted in rapid reduction in primary bile acids



Primary Bile Acids



Primary bile acids are a C. difficile germinate

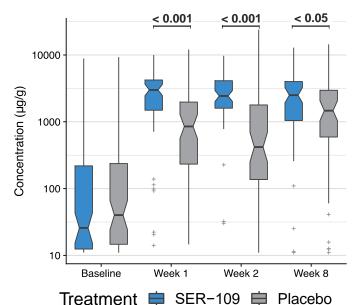


SER-109 subjects had a significantly greater decrease in primary BAs from baseline at week 1 (p=0.038)

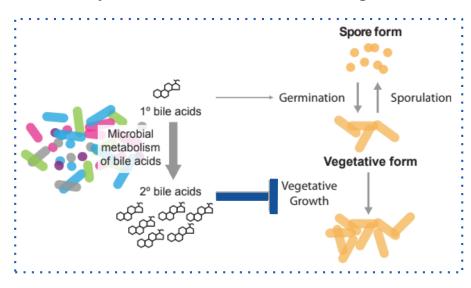


SER-109 engraftment resulted in rapid increase in secondary bile acids

Secondary Bile Acids



Secondary bile acids inhibit C. difficile growth

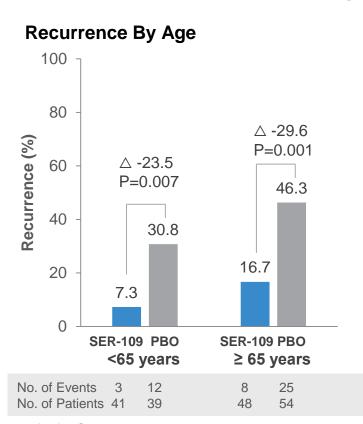


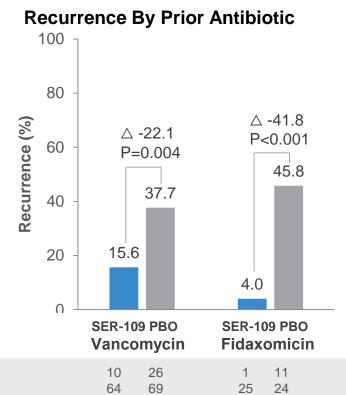
SER-109 subjects had a significantly greater increase in secondary BAs from baseline SER-109 subjects had less variability in bile acid response than placebo



Efficacy is higher at week 8 with SER-109 vs placebo in agestratified and antibiotic-stratified groups



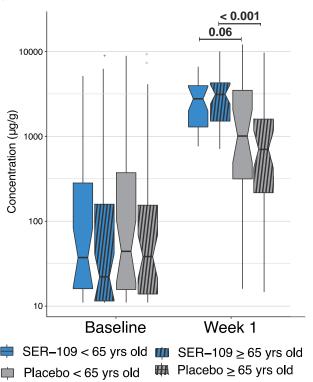




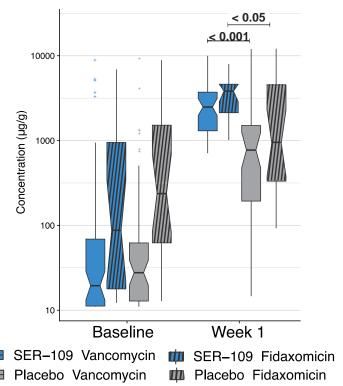


SER-109 increases secondary bile acids in both subpopulations

Age stratification



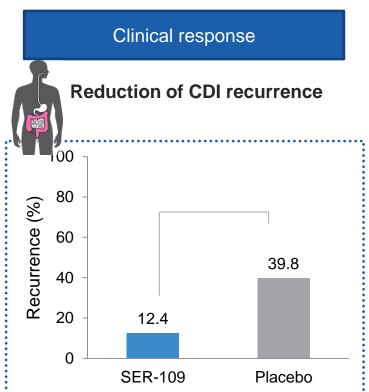
Antibiotic stratification



SER-109 species engraftment leads to rapid pharmacodynamic response associated with reduced CDI recurrences



Pharmacokinetics Pharmacodynamics Microbe-associated **Engraftment** metabolites 10000 appearing dose Number of newly 100 Baseline Week 1 Baseline Week 1







Thank You

We are indebted to the patients and investigators of ECOSPOR-III for their participation in the trial. Without them none of this would be possible.

Seres R&D, Manufacturing, Quality, Clinical & Regulatory Teams

Funders:



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