



AHA Scientific Sessions 2024 | Chicago, Illinois | November 16-18th, 2024

Novel Precision Cardiology Treatment for PRKAG2 Cardiomyopathy, a Subset of Patients with Wolff-Parkinson-White Syndrome

Maria Azzurra Missinato, PhD, Kellie Lemoine, MS, Giang Ho, BS, Joshua Fong, BS, Jie Wang, MD/PhD, Sami Abdulkadir, PhD, Aaron Yu, M.S, Maryam Jordan, MS, Sydney Kasmer, BS, Nathan Delos Santos, PhD, Qingying Meng, PhD, Maria Hedlund, PhD, Son Lam, PhD, Yiming Zhu, PhD, Sharon Paige, MD/PhD, Eileen Blasi, PhD, <u>Georgios Karamanlidis, PhD</u>





Georgios Karamanlidis and the rest of the authors are employees of Avidity Biosciences, Inc. who receive stock and stock options.

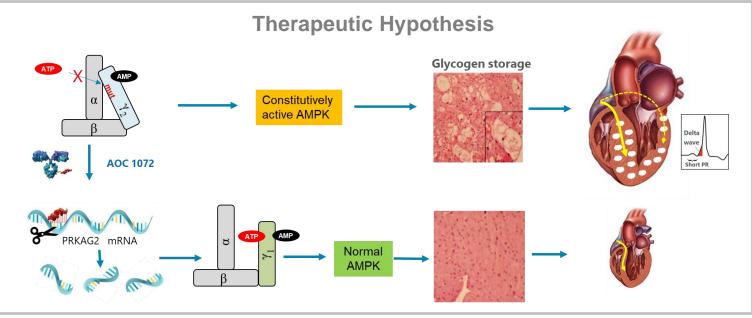


Precision Treatment for the PRKAG2 Syndrome

>5,000 Carriers of a pathogenic PRKAG2 variant (US)

DISEASE MODIFYING APPROVED THERAPIES

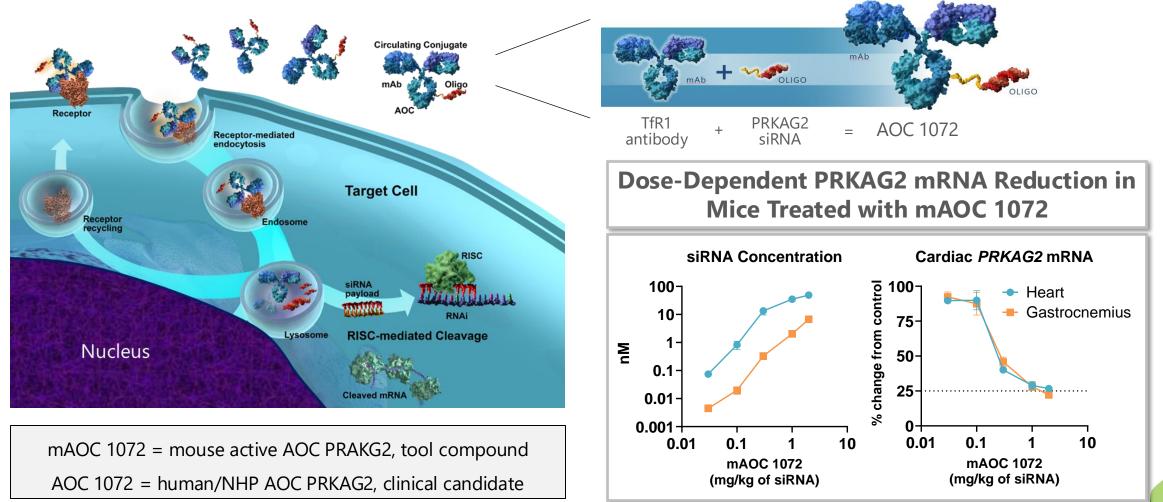
- Underdiagnosed, progressive cardiac disease associated with increased risk of sudden cardiac death (up to 10%*)
- Caused by mutations in the PRKAG2 gene that result in increased AMPK activity
- Patients with PRKAG2 syndrome can develop HCM, Wolff-Parkinson White syndrome, conduction disease and arrhythmia





* Circ Arrhythm Electrophysiol . 2016;9(1):e003121. AOC, antibody oligonucleotide conjugate; AMP, adenosine monophosphate; AMPK, 5' adenosine monophosphate-activated protein kinase; ATP, adenosine triphosphate; HCM, hypertrophic cardiomyopathy; PRKAG2, protein kinase adenosine monophosphate-activated non-catalytic subunit gamma 2; WPW, Wolff-Parkinson-White syndrome.

Antibody Oligonucleotide Conjugate (AOC)-Mediated siRNA Delivery for Reduction of Target mRNA

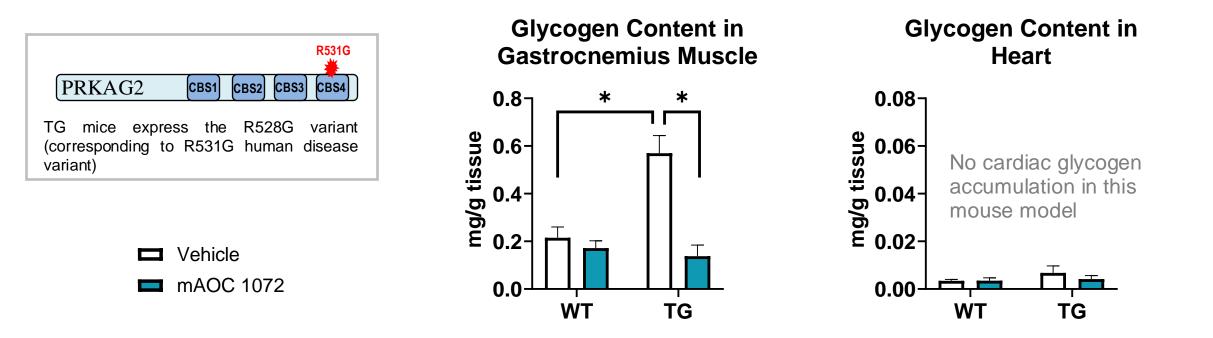




AOC, antibody oligonucleotide conjugate; mAb, monoclonal antibody; mRNA, messenger ribonucleic acid; PRKAG2, protein kinase adenosine monophosphate-activated non-catalytic subunit gamma 2; RISC, ribonucleic acid-induced silencing complex; RNAi, ribonucleic acid interference; siRNA, small interfering ribonucleic acid

CONFIDENTIAL

mAOC 1072 Reverses Glycogen Accumulation in Skeletal Muscle in a Mouse Model of PRKAG2 Syndrome





8-12-week-old mice were treated with mAOC 1072 (at 3 mg/kg) of vehicle for 24 weeks (2 doses 12 weeks apart), n=16-20/group, * indicates *p*<0.05 mAOC, mouse active antibody oligonucleotide conjugate; PRKAG2, protein kinase adenosine monophosphate-activated non-catalytic subunit gamma 2; TG, transgenic; WT, wild-type.

mAOC 1072 Improves Diastolic Dysfunction in a Mouse Model of the PRKAG2 Syndrome

Normal Systolic Reduction of Atrial Improvement in Diastolic Function Function Enlargement **Doppler flow Ejection Fraction Diastolic Function** WT-Vehicle **TG-Vehicle** P wave Amplitude 100-0.20-3. 80· 0.15-⊂2 E/A ratio 60 % ≥ 0.10-**TG-mAOC 1072** WT-mAOC 1072 40 0.05 20 0.00 тĠ WΤ TG WΤ WΤ TG

Vehicle

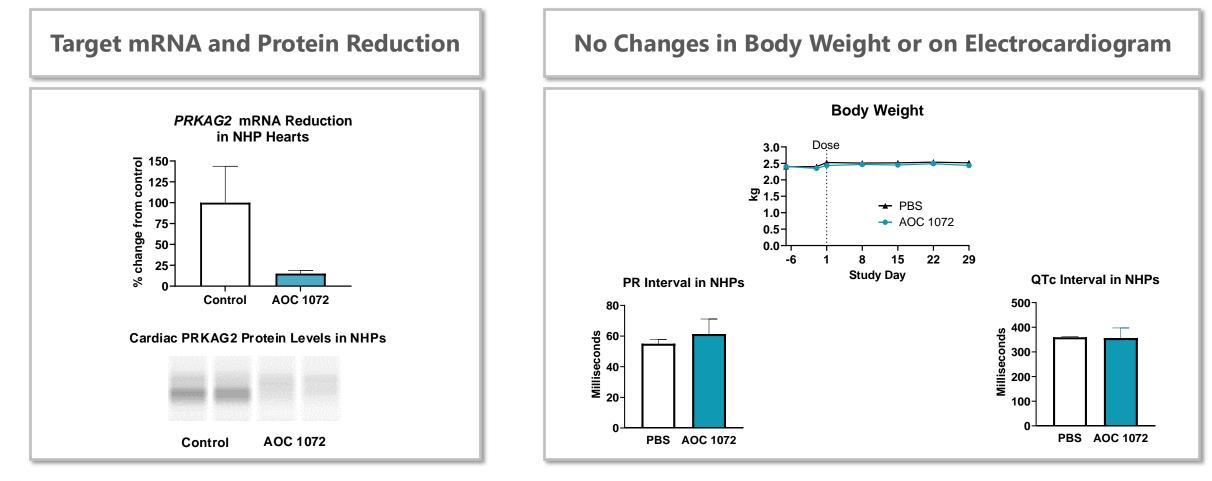
mAOC 1072



8-12-week-old mice were treated with AOC (at 3 mg/kg) of vehicle for 32 weeks (3 doses 12 weeks apart) For diastolic function n=5-7 for WT and for n=9 for TG. For P wave n=16-20/group, * indicates *p*<0.05

mAOC, mouse active antibody oligonucleotide conjugate; PRKAG2, PRKAG2, protein kinase adenosine monophosphate-activated non-catalytic subunit gamma 2; TG, transgenic; WT, wild-type.

AOC 1072 Resulted in >75% Reduction of *PRKAG2* mRNA in Non-Human Primates





Single dose of AOC 1072 at 3 mg/kg (of siRNA) with evaluation 28 days post-dose. n=2 for the PBS group and n=3 for the AOC 1072 group, Mean +SD mAOC, mouse active antibody oligonucleotide conjugate; mRNA, messenger ribonucleic acid; NHP, non-human primate; PBS, phosphate-buffered saline; PRKAG2, PRKAG2, protein kinase adenosine monophosphate-activated non-catalytic subunit gamma 2.

AOC 1072: The Potential for a New Class of Precision Therapeutics for Patients with PRKAG2 Syndrome

Treatment with AOC 1072:

- Resulted in potent PRKAG2 reduction in mice and NHPs
- Reversed skeletal muscle glycogen accumulation
- Improved diastolic function in a PRKAG2 disease model
- > Was well-tolerated in NHPs after a single dose

