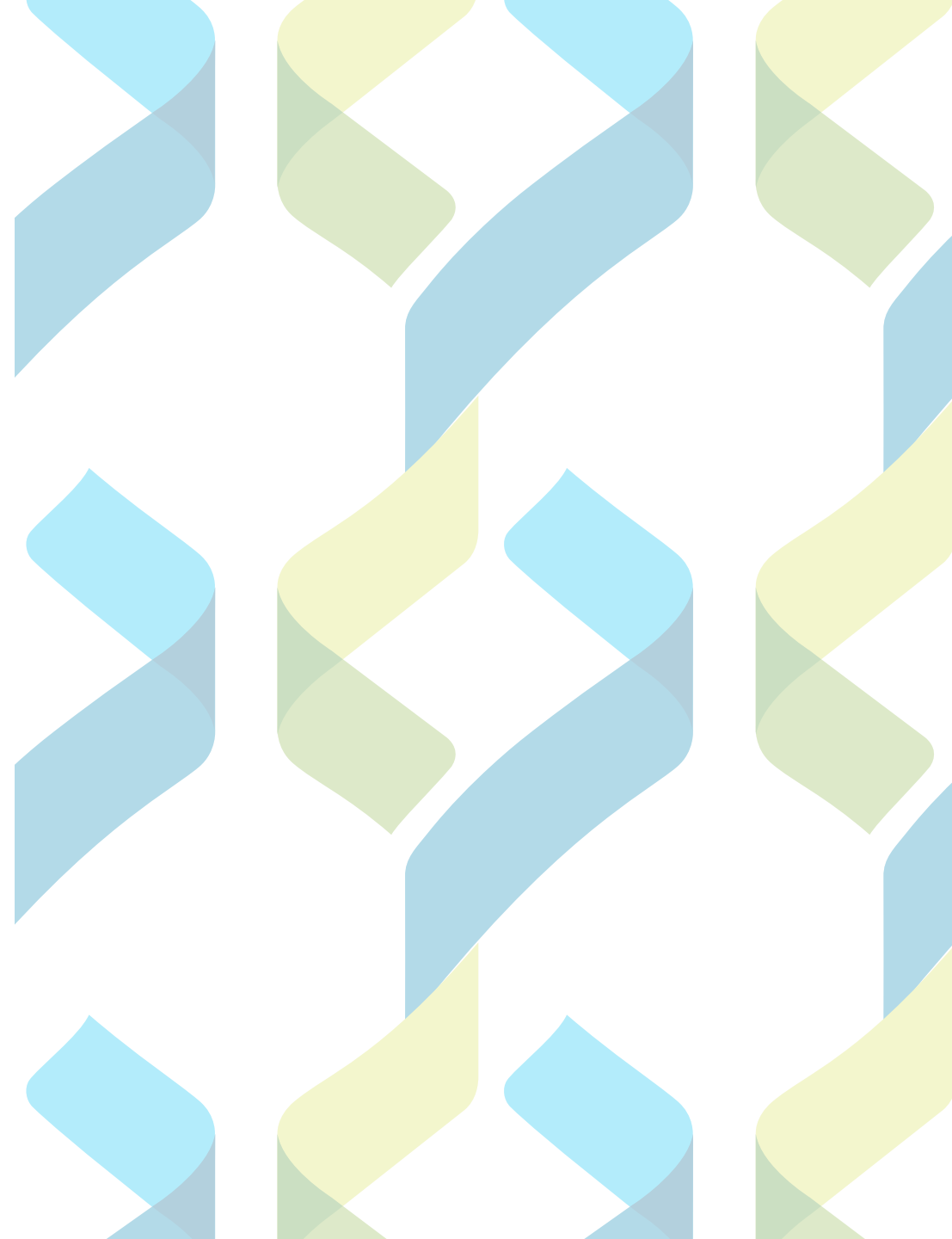


Topline Safety and Efficacy Data Analysis of Phase 1/2 Clinical Trial Evaluating AOC 1001 in Adults with Myotonic Dystrophy Type 1: MARINA™

Nicholas Johnson¹, John Day², Johanna Hamel³,
Charles Thornton³, S.H. Subramony⁴, Payam Soltanzadeh⁵,
Jeffrey Statland⁶, Matthew Wicklund⁷, W. David Arnold⁸,
Miriam Freimer⁸, Carrie Heusner⁹, Chao-Yin Chen⁹,
Brad McEvoy⁹, Yiming Zhu⁹, Li-Jung Tai⁹, Elizabeth Ackermann⁹

¹Virginia Commonwealth University, ²Stanford University Medical
Center, ³University of Rochester, ⁴University of Florida, ⁵University of
California, Los Angeles, ⁶University of Kansas Medical Center,
⁷University of Colorado, Denver, ⁸The Ohio State University,
⁹Avidity Biosciences

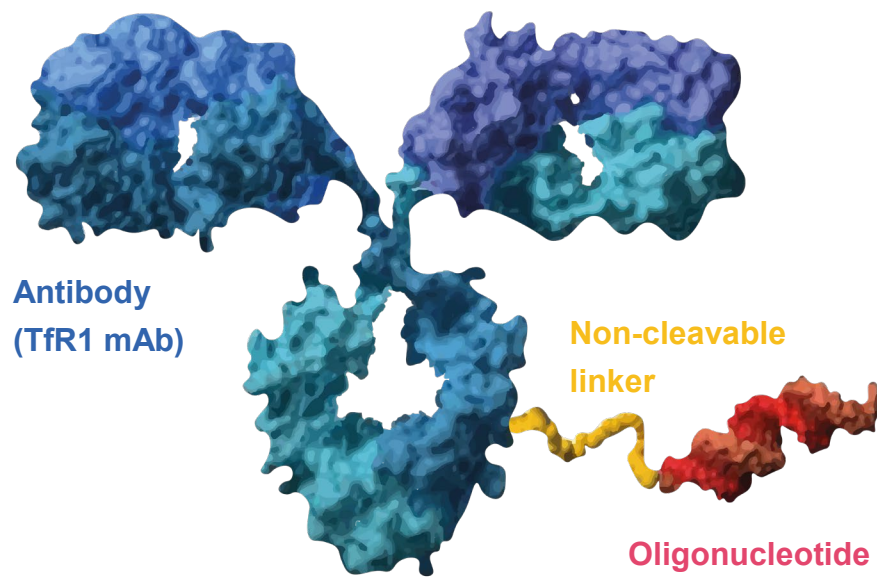




Disclosures

- Dr. Johnson has received personal compensation for serving as a consultant for Arthex Biotech, Avidity Biosciences, Dyne Therapeutics, Juvena Therapeutics, Kate Therapeutics, Pepgen, Rgenta Therapeutics, Sarepta Therapeutics, Takeda Pharmaceuticals, and Vertex Pharmaceuticals
- He has received personal compensation for serving on data safety monitoring board for Biogen
- He has stock or an ownership in Juvena Therapeutics
- He has received research support paid to his institution from AMO Pharma, AveXis, Dyne Therapeutics, Fulcrum Therapeutics, ML Bio, Novartis, Pepgen, Sarepta Therapeutics, Sanofi, Takeda Pharmaceuticals, and Vertex Pharmaceuticals

The Underlying Mechanism of DM1 is Well Suited to an siRNA Approach Using an Antibody Oligonucleotide Conjugate (AOC)



- DM1 is caused by the mutant *DMPK* mRNA with CUG expansion sequestering CUG binding proteins which leads to mis-splicing of downstream genes^{1,2}
- Decreasing the amount of mutant *DMPK* mRNA has the potential to free up the CUG binding proteins and reverse mis-splicing³

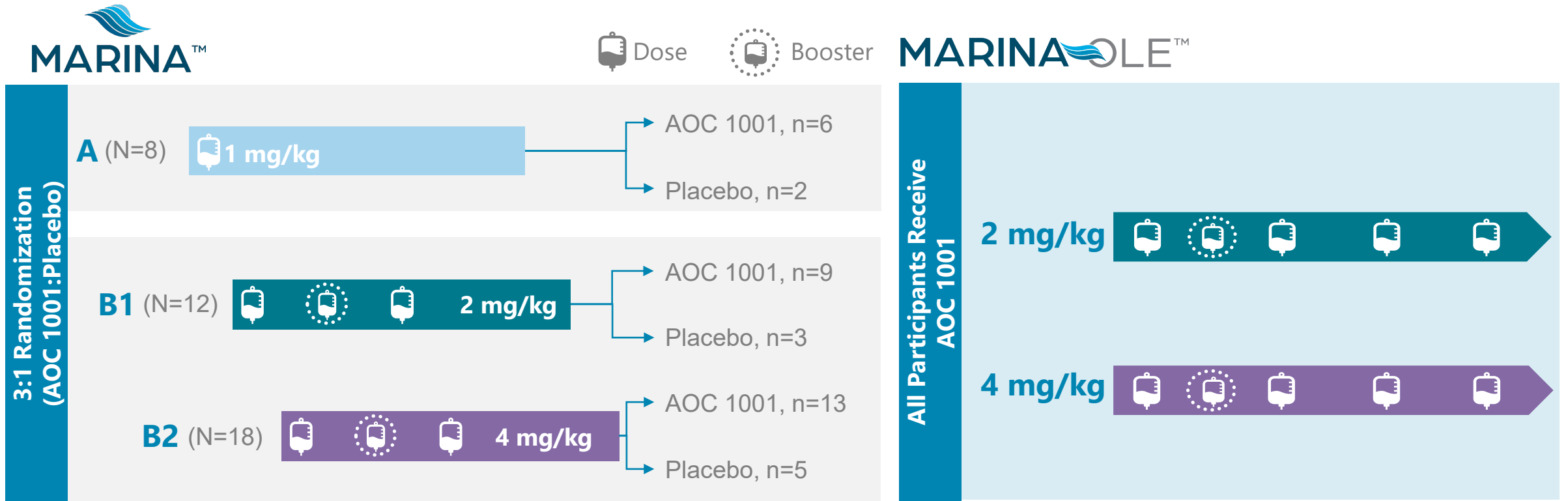
AOC 1001 includes⁴:

- **Antibody:** human TfR1-targeting, effector function-null, humanized IgG1 antibody (TfR1 mAb)
- **Non-cleavable linker**
- **Oligonucleotide:** double-stranded siRNA oligonucleotide complementary to both wild-type and mutant *DMPK* mRNA

AOC, antibody oligonucleotide conjugate; DM1, myotonic dystrophy type 1; DMPK, DM1 protein kinase; IgG, immunoglobulin G; mAb, monoclonal antibody; MBNL, muscleblind-like RNA-binding protein; mRNA, messenger ribonucleic acid; siRNA, small inhibitory ribonucleic acid; TfR1, transferrin receptor 1.

1. Brook JD, et al. *Cell*. 1992;68(4):799-808; 2. Lin X, et al. *Hum Mol Genet*. 2006;15(13):2087-2097; 3. Lee JE, Cooper TA. *Biochem Soc Trans*. 2009;37(Pt 6):1281-1286; 4. Johnson N. A Phase 1/2 Clinical Trial Evaluating the Safety and Pharmacokinetics of AOC 1001 in Adults with Myotonic Dystrophy Type 1 (DM1): MARINA™ Study Design. Poster presented at Muscular Dystrophy Association Clinical & Scientific Conference, Nashville, TN; March 13-15, 2022.

MARINA™ Trial Designed to Evaluate Safety and Tolerability of AOC 1001*



- One participant receiving 4 mg/kg AOC 1001 discontinued treatment due to SAE
- All eligible participants (N=37) have enrolled in the MARINA-OLE™

Generally Favorable Safety and Tolerability



Summary of Treatment Emergent Adverse Events

Subjects with ≥ 1 AE n (%)	MARINA				MARINA-OLE
	Placebo N=10	1 mg/kg N=6	2 mg/kg N=9	4 mg/kg N=13	Total N=37
Any AE	8 (80%)	6 (100%)	9 (100%)	13 (100%)	30 (81%)
AE related to study drug	2 (20%)	1 (17%)	3 (33%)	10 (77%)	7 (19%)
Serious AE (SAE)*	0	0	1 (11%)	1 (8%)	1 (3%) [‡]
SAE related to study drug	0	0	0	1 (8%)	0
AE leading to study discontinuation*	0	0	0	1 (8%)	0
AE leading to death	0	0	0	0	0

10 participants treated with placebo in MARINA were newly treated with AOC 1001 in MARINA-OLE

Over 200 infusions of AOC 1001 totaling 46.2 patient-years of exposure[#]

Most treatment emergent adverse events (AEs) were mild or moderate[†]

- MARINA: Most common AEs
 - procedural pain (36%), anemia[†] (32%), COVID-19 (23%), headache (23%), nausea (23%)
 - 1 discontinuation due to an SAE
- MARINA-OLE: Most common AEs
 - Procedural pain (22%)
 - Pain in extremity and headache (16%)
 - No discontinuations



*1 SAE considered related to AOC 1001 4 mg/kg: resulted in a partial clinical hold & patient discontinuing from treatment; 1 SAE considered unrelated to treatment: reaction to opioid pain medication after an elective surgery

[‡]2 SAEs in same patient, considered unrelated to treatment (cholelithiasis which resulted in pancreatitis; resolved by cholecystectomy)

[#]As of August 2023

[†]Anemia was asymptomatic except for 1 participant who did not require medical intervention

Update on FDA Partial Clinical Hold on AOC 1001

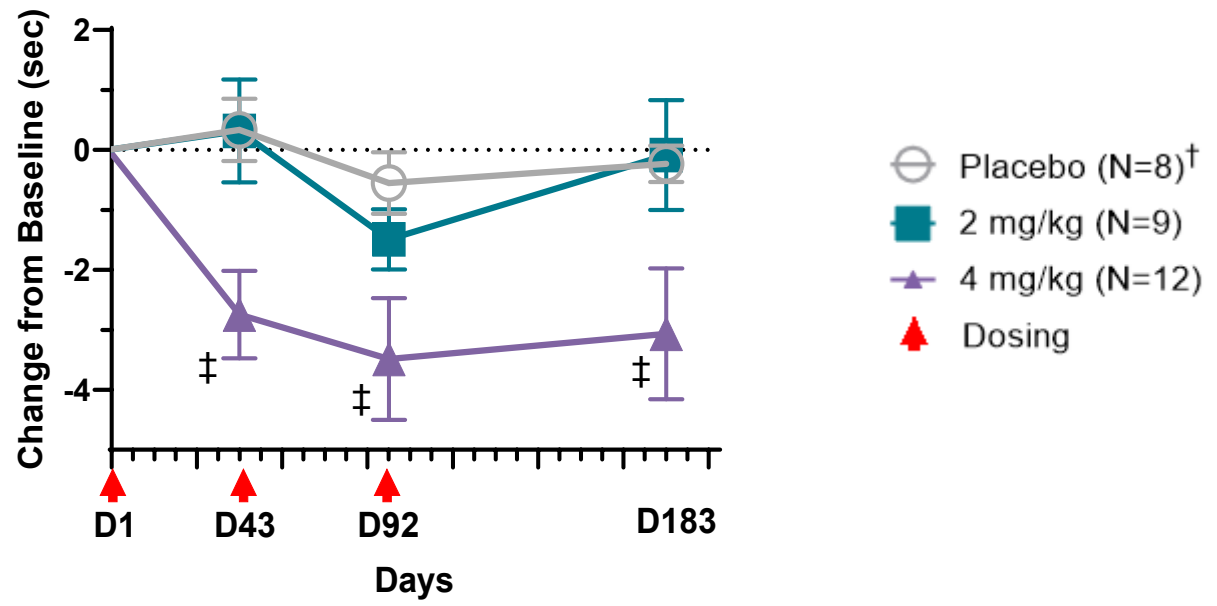


- In September 2022, the FDA placed a partial clinical hold on new participant enrollment in the MARINA™ study in response to a serious adverse event reported in a single participant in the 4 mg/kg cohort comprising bilateral ischemia in the region of the lateral geniculate nuclei in the thalamus with subsequent hemorrhagic transformation. This was described as thalamic hemorrhage
- Comprehensive investigation by Avidity found no plausible biological link to any component of AOC 1001, the AOC platform, the transferrin receptor delivery mechanism or reduction of DMPK
- In May 2023, partial hold was eased to allow enrollment of new participants at the 2 mg/kg dose and to dose escalate 12 participants from 2 mg/kg to 4 mg/kg

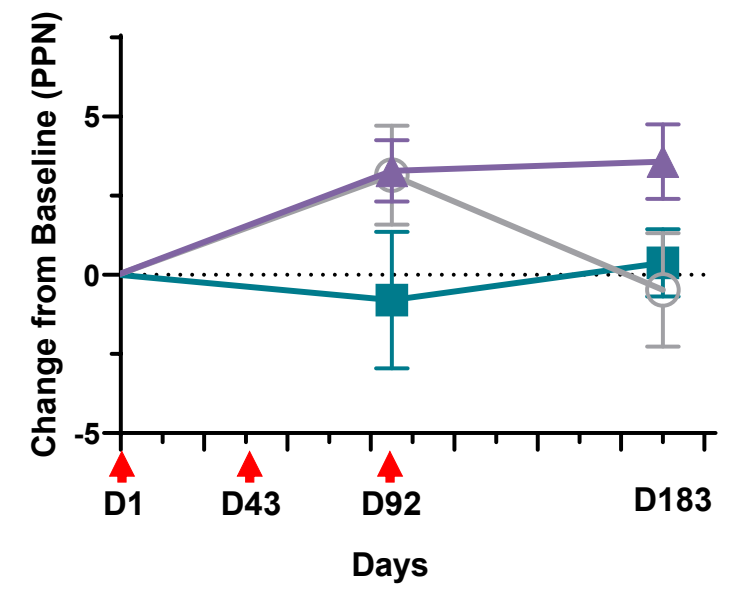
Participants Treated With AOC 1001 Demonstrated Improvements in Myotonia and Hand Strength



Video Hand Opening Time (vHOT)*



Hand Grip



Error bars = standard error of the mean (SEM)
 *Measurements for vHOT are based on middle finger opening time. Statistical analysis was post-hoc.
[†]Placebo group combined from Cohort B1 (2 mg/kg) and Cohort B2 (4 mg/kg).
[‡]Post-hoc statistical analysis show $p < 0.05$.
 DM1, myotonic dystrophy type 1; vHOT, video hand opening time.

AOC 1001 Demonstrates Myotonia Reduction Across 4 mg/kg Cohort*

vHOT is measuring hand flexor myotonia and hand extensor muscle strength

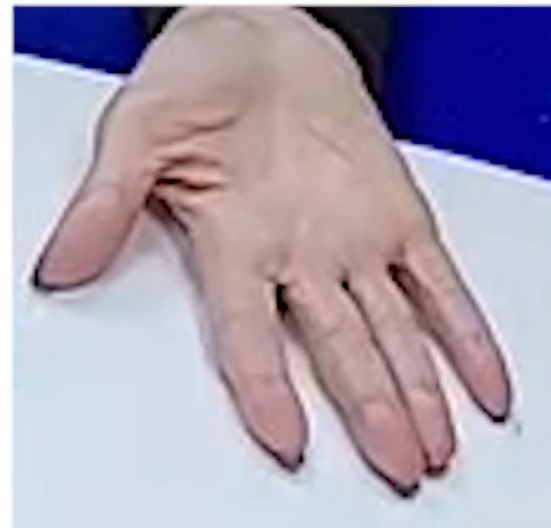


Participant from
4 mg/kg Multidose

Baseline vHOT



Day 183 vHOT
12 weeks after third dose

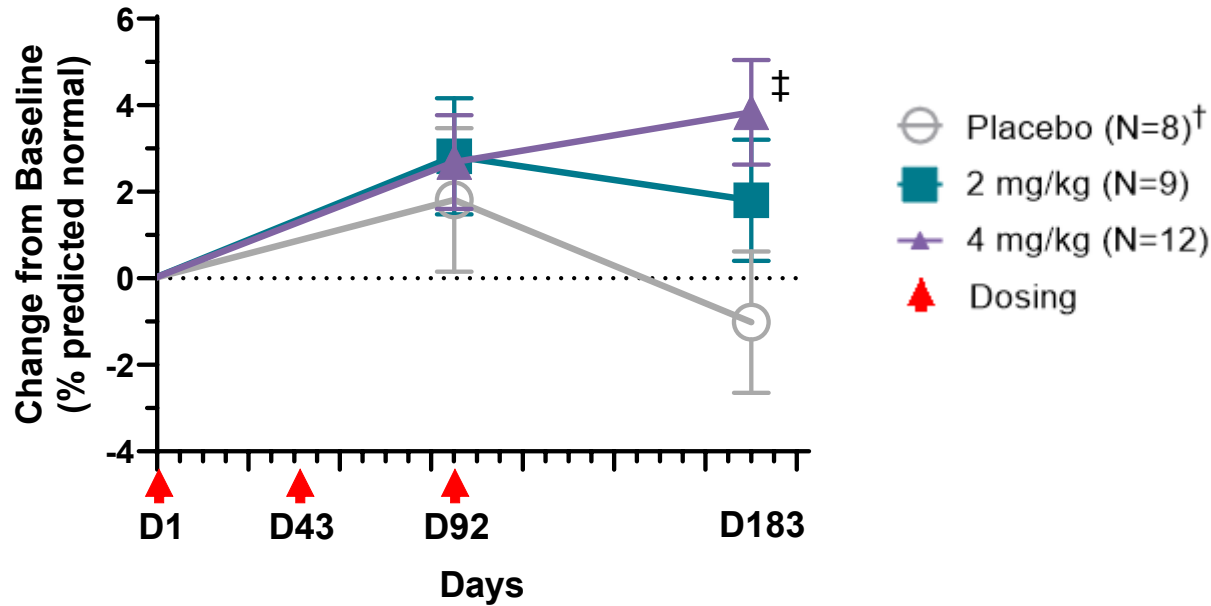


Improvement visible 12 weeks following the third dose at 4 mg/kg

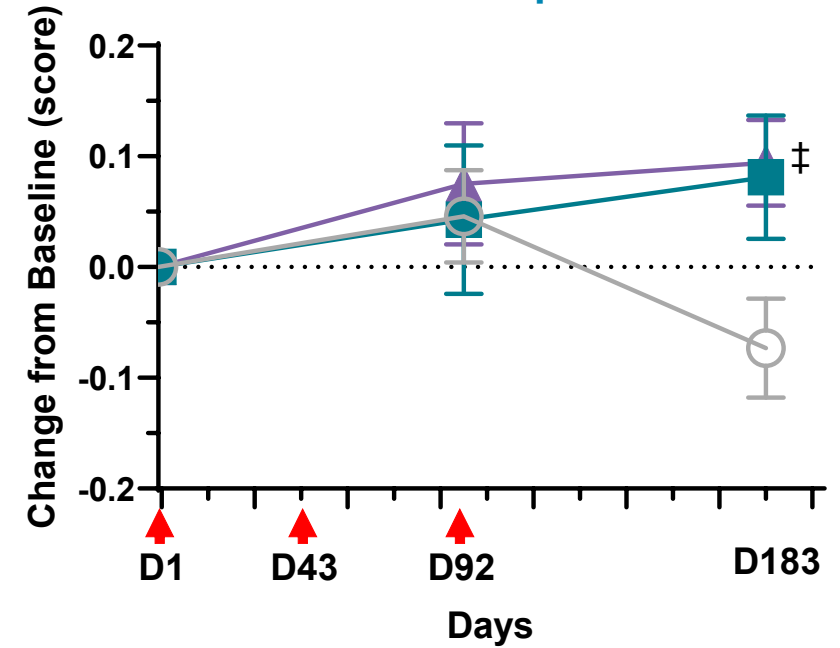
Improvements in Strength Measured by Quantitative Muscle Testing (QMT) Total and Manual Muscle Testing (MMT) Composite Scores



QMT Total Score*



Total MMT Composite Score



Error bars = standard error of the mean.

*QMT Total Score is based on 6 muscle groups from both upper and lower body: Ankle dorsiflexion, hand grip, elbow flexion, elbow extension, knee flexion, knee extension

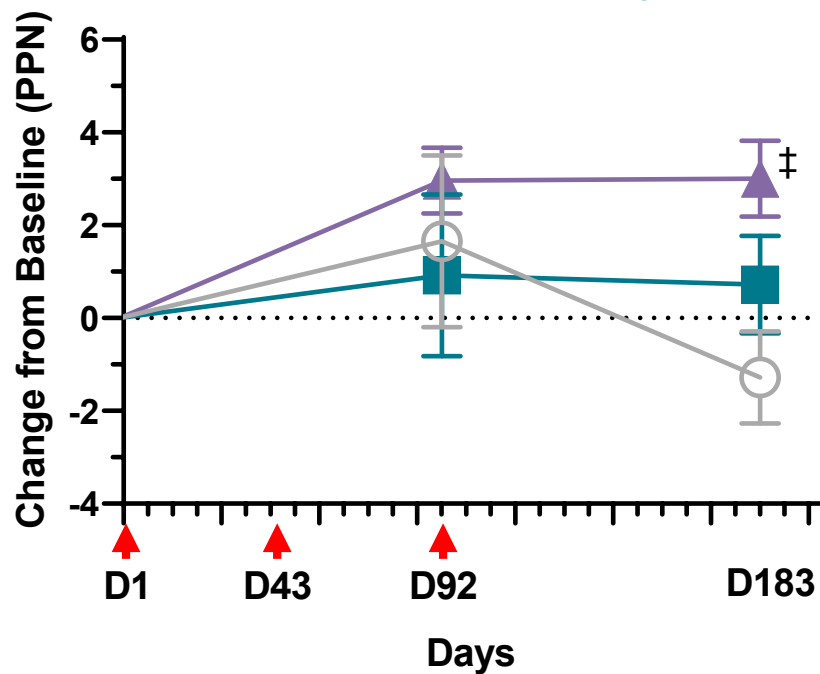
[†]Placebo group combined from Cohort B1 (2 mg/kg) and Cohort B2 (4 mg/kg).

[‡]Post hoc statistical analysis show $p < 0.05$ for Cohort B2 (4 mg/kg)

MMT, manual muscle testing; QMT, quantitative muscle testing.

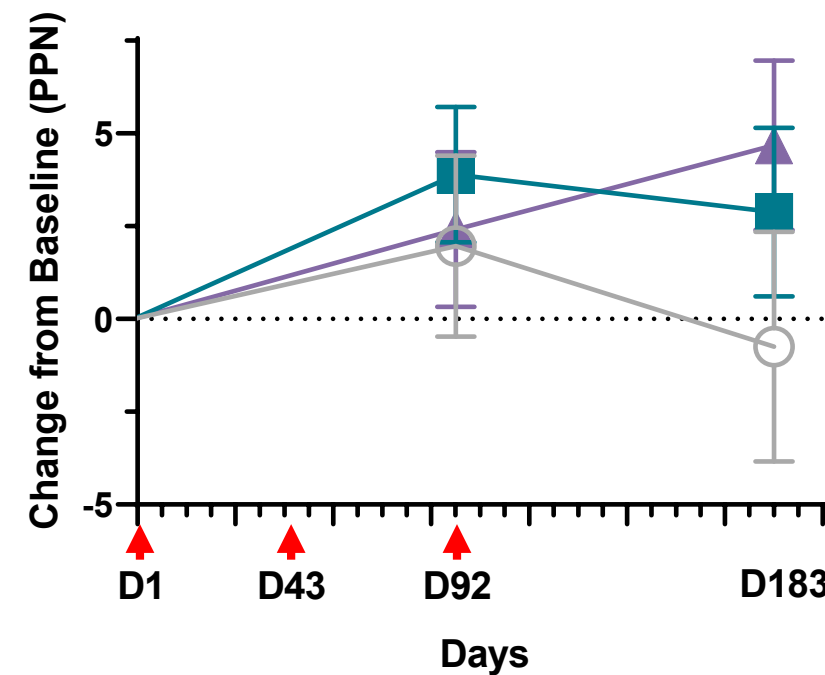
Consistent with Improvement in Total QMT Score, Improvements also Demonstrated in Both Upper and Lower Extremities

QMT Upper Extremity



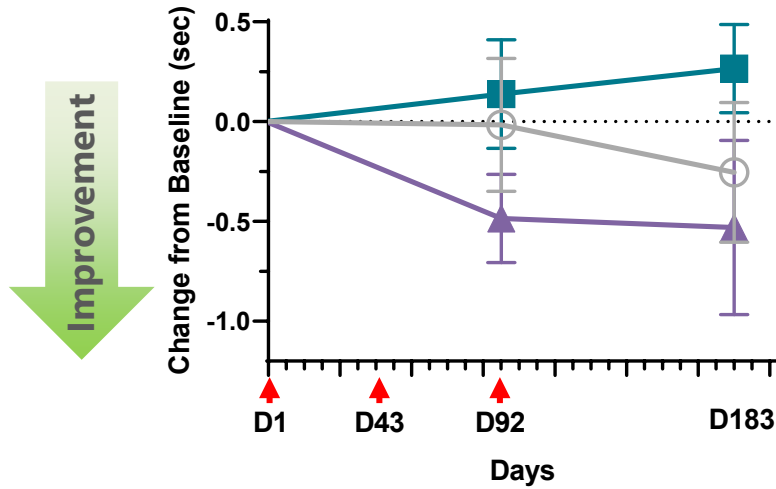
- Placebo (N=8)[†]
- 2 mg/kg (N=9)
- ▲ 4 mg/kg (N=12)
- ▲ Dosing

QMT Lower Extremity

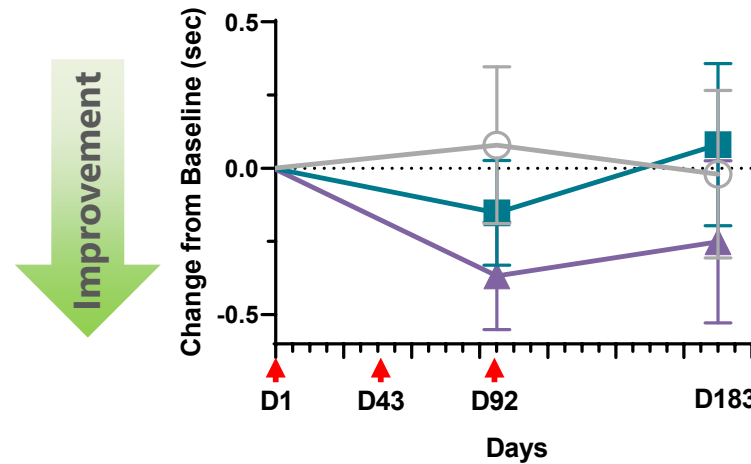


Directional Improvements Were Observed in Functional & Patient Reported Measures: 10-Meter Walk Run Test (10mWRT), Timed Up and Go (TUG), and the DM1-Activ Patient Reported Outcome (PRO)

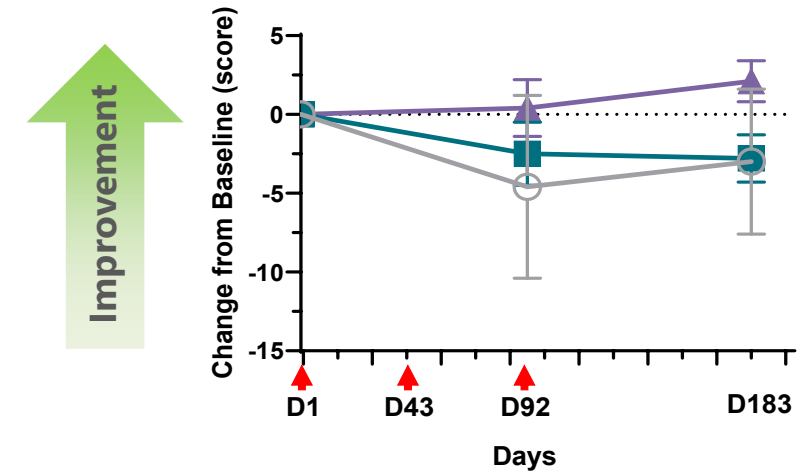
10mWRT



TUG



DM1-Activ



- Placebo (N=8)†
- 2 mg/kg (N=9)
- ▲ 4 mg/kg (N=12)
- ▲ Dosing

MARINA™ Phase 1/2 Trial Demonstrates AOC 1001 Impacts Disease Mechanism and Demonstrates Functional Improvement



- AOC 1001 consistently demonstrated directional improvement across multiple aspects of DM1 including measures of myotonia, strength, function and patient reported outcome
- MARINA™ trial concluded with 38 participants enrolled and treated with study drug
 - All 37 participants that completed MARINA™ have rolled into the MARINA-OLE™ at 2-4 mg/kg of AOC 1001 and remain ongoing
- Generally favorable safety and tolerability profile
 - ~46 total patient years of exposure accumulated with over 200 doses of AOC 1001 administered*
- Discussions with the FDA on resolving the partial clinical hold are ongoing
- Based on the solid data package from MARINA™, Avidity is now finalizing the AOC 1001 pivotal dose and Phase 3 design
- First look at data from the MARINA-OLE™ study in the first-half of 2024