



Right Patient, Right Therapy

Symposium on Systemic Lupus Erythematosus

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Key Considerations For A Successful Study

Response Rate:

Controlling the placebo rate is critical

Background Medication:

Large potential to confound the outcome

Endpoint:

Must be robust and clinically meaningful

Patient Selection:

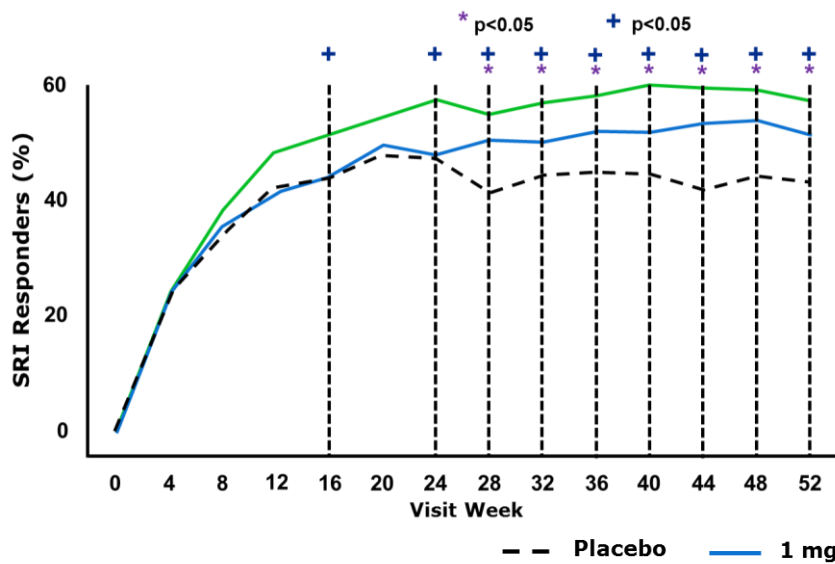
Ability to discern a positive signal
Demonstration of clinical benefit

The Chablis-SC1 Trial

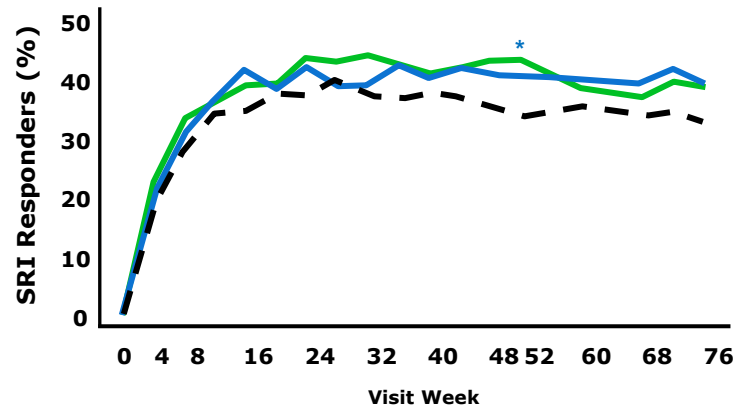
Background Medication: Large Impact On Placebo Response

Belimumab – Less Non-Steroid Background Medication, Better Discrimination

SRI-4 Response in BLISS-52

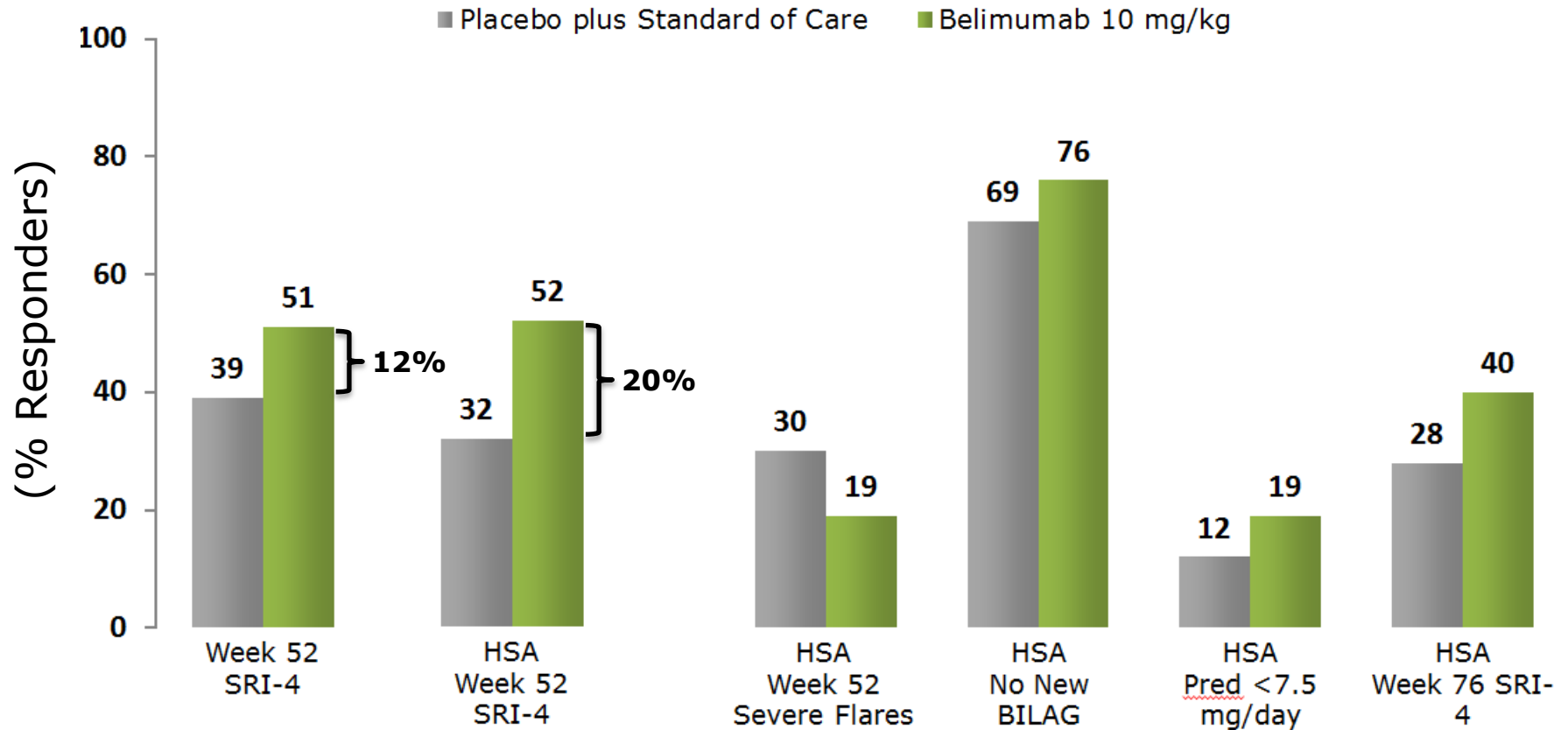


SRI-4 Response in BLISS-76



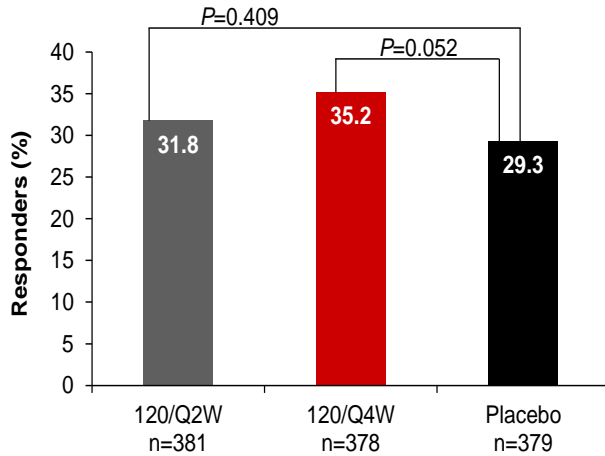
	BLISS-52	BLISS-76
> 7.5 PRED, %	69	46
AZA MTX MMF, %	40.1	55.9
Response over Placebo, %	14.4	9.8

Greater Benefit in Patients with High Serological Activity: BLISS studies

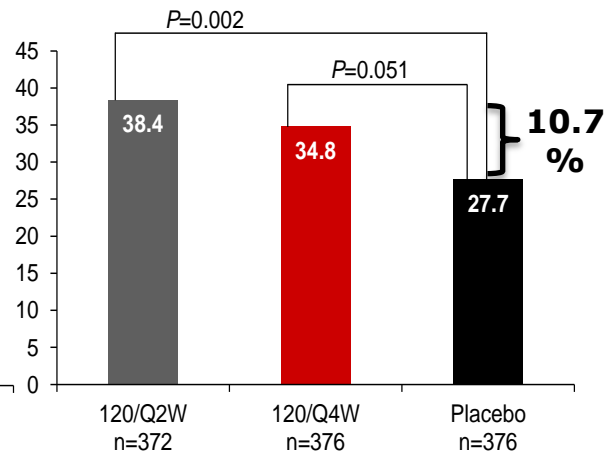


Greater Benefit in Patients with High Serological Activity: ILLUMINATE studies

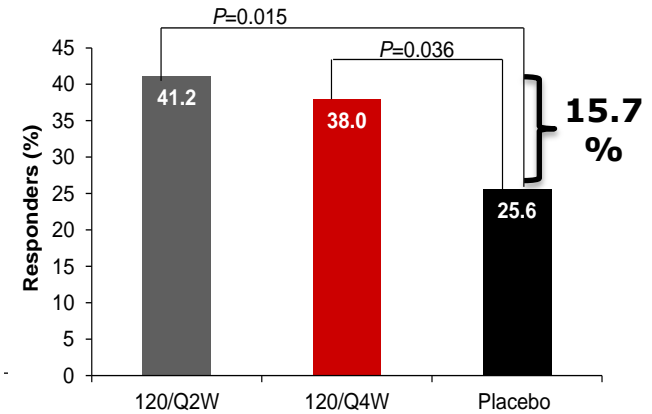
SRI-5 Response in ILLUMINATE-1



SRI-5 Response in ILLUMINATE-2

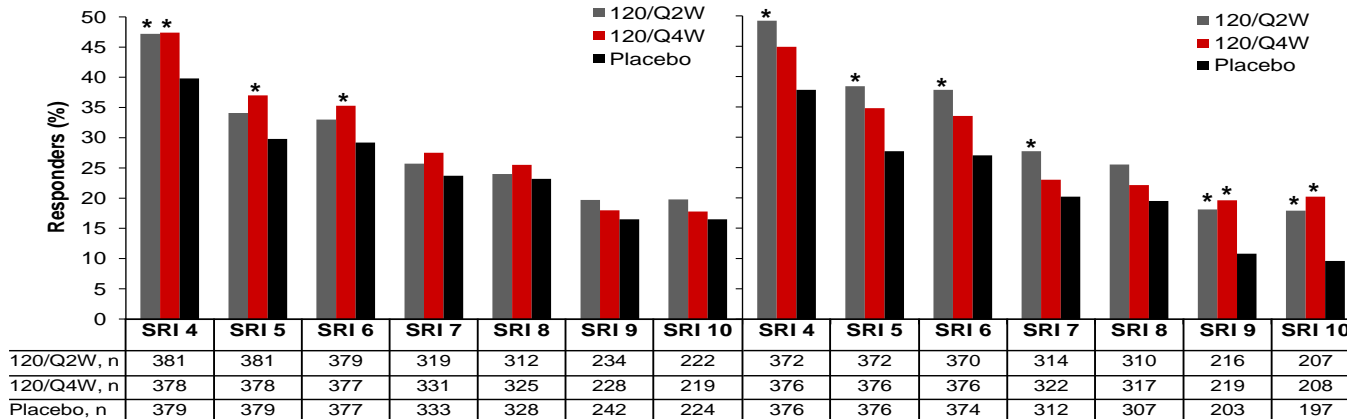


Subset with High Serological Activity: ILLUMINATE-2



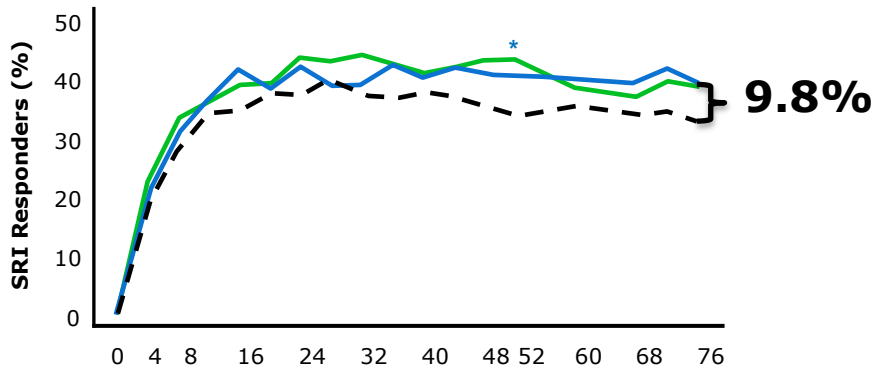
Trial 1

Trial 2

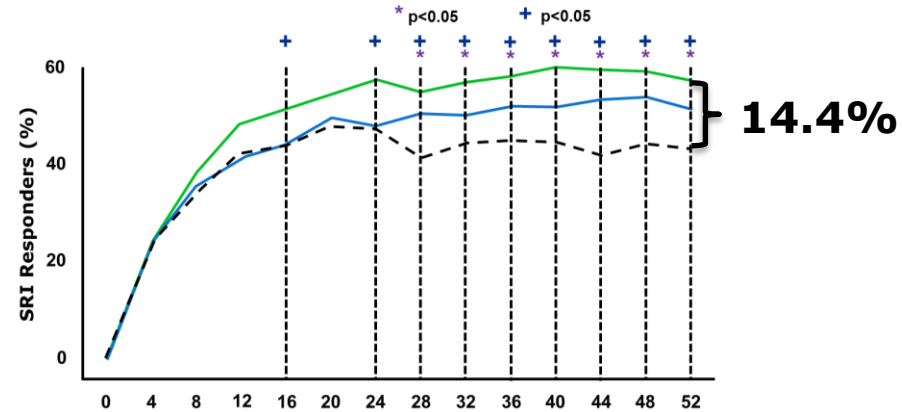


Greater Benefit in Patients with Higher Disease Activity: BLISS studies

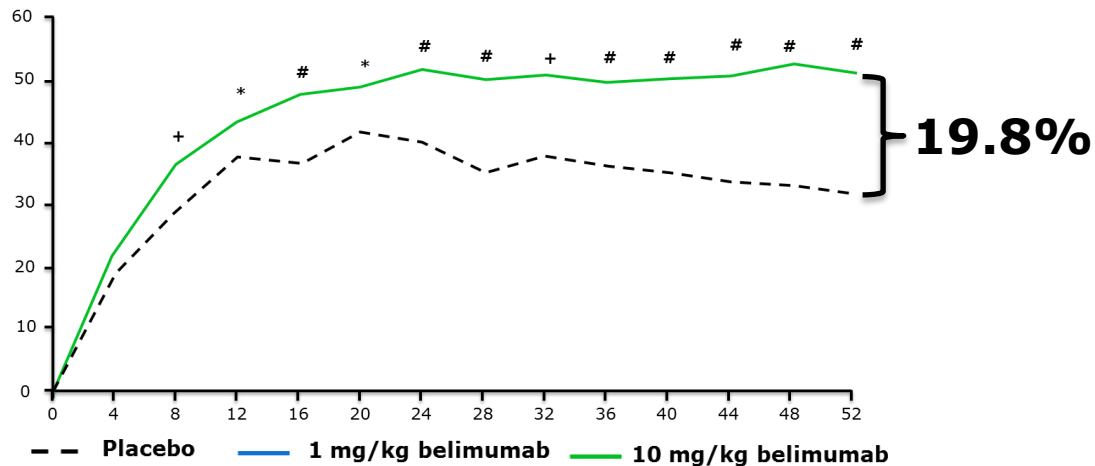
SRI-4 Response in BLISS-76
All Patients



SRI-4 Response in BLISS-52
All Patients

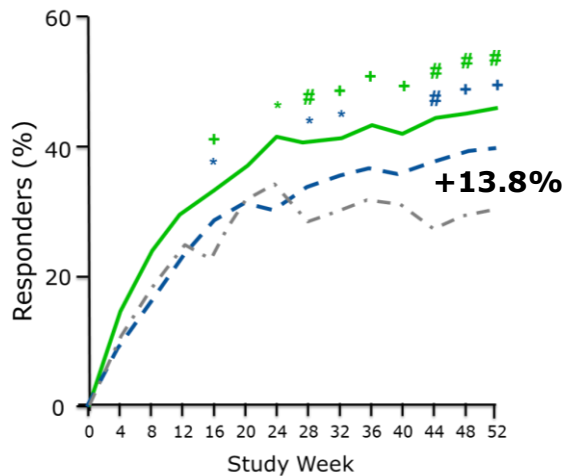


SRI-4 Response in -52 and -76 Patients
with **Higher Baseline Disease Activity**



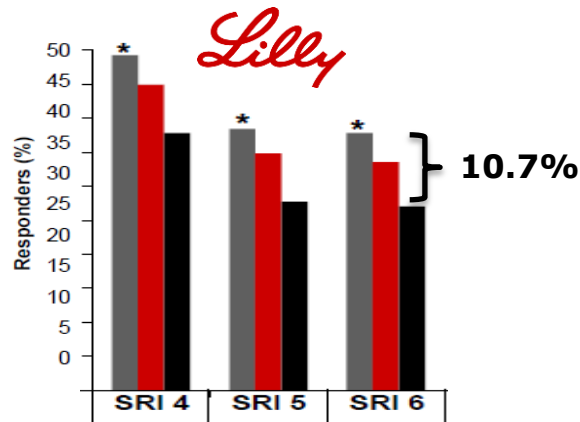
SRI-6: A Consistent Clinical Response

SRI-6 Response Over Time in BLISS-52

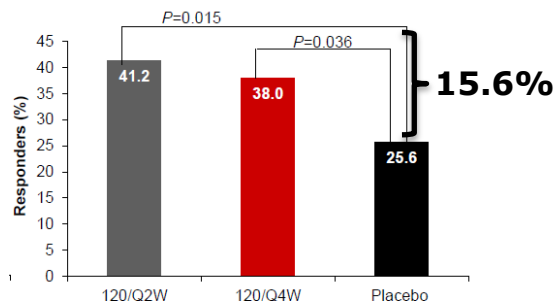


SRI-6 demonstrates greatest response differentiation

SRI-4, 5, 6 Response Rates at Week 52

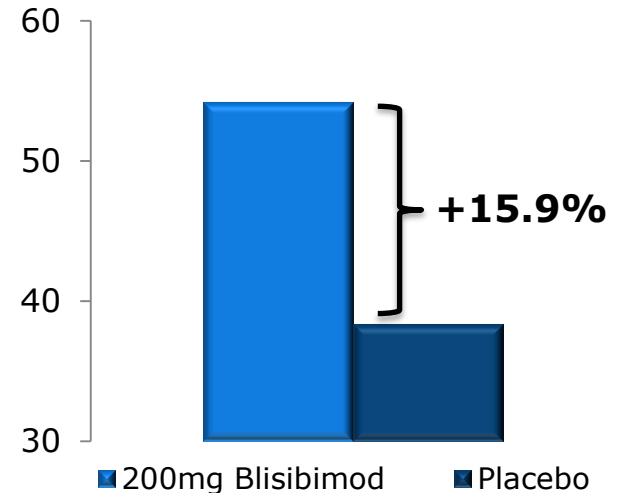


Enriched Lupus Response (C3/C4 + dsDNA)



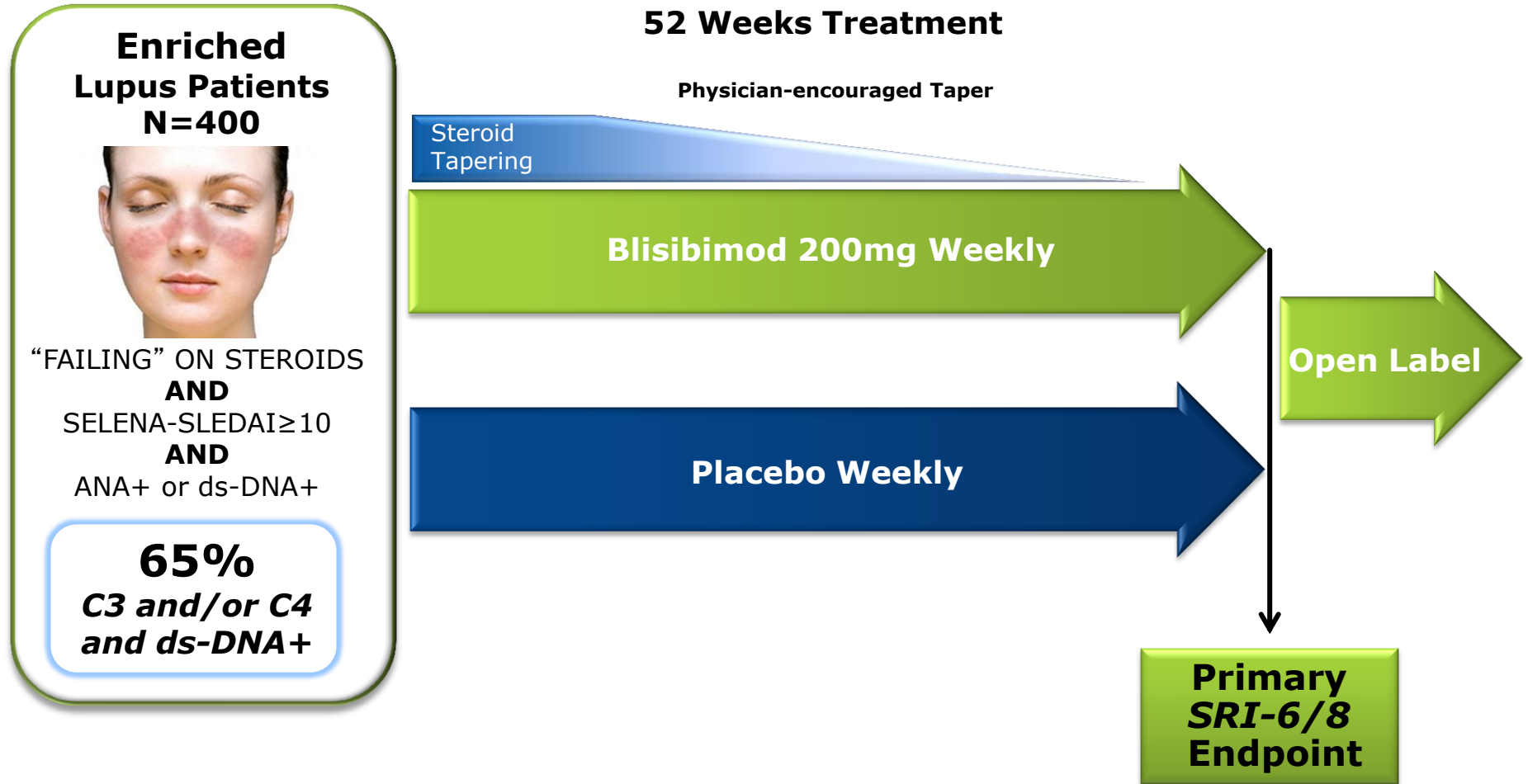
(Chablis-SC1: 65% | Tabalumab: 44%)

SRI-6 Response in PEARL-SC Phase 2



Separation greater than SRI-8 in PEARL-SC patient population

Based on previous experience with BAFF inhibition, an **SRI-6 endpoint offers an increased likelihood of success.**



*Systemic Lupus Responder Index (SRI) is a composite endpoint comprised of a ≥ 6 point improvement in the SELENA-SLEDAI clinical assessment instrument AND no new BILAG 1A or 2B organ domain flares AND no worsening in Physician’s Global Assessment (PGA) (< 0.3 increase)