



# Full-field Stimulus Test (FST) as a Clinical Endpoint in a Phase 1/2 Study of ATSN-101

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# Financial Disclosures

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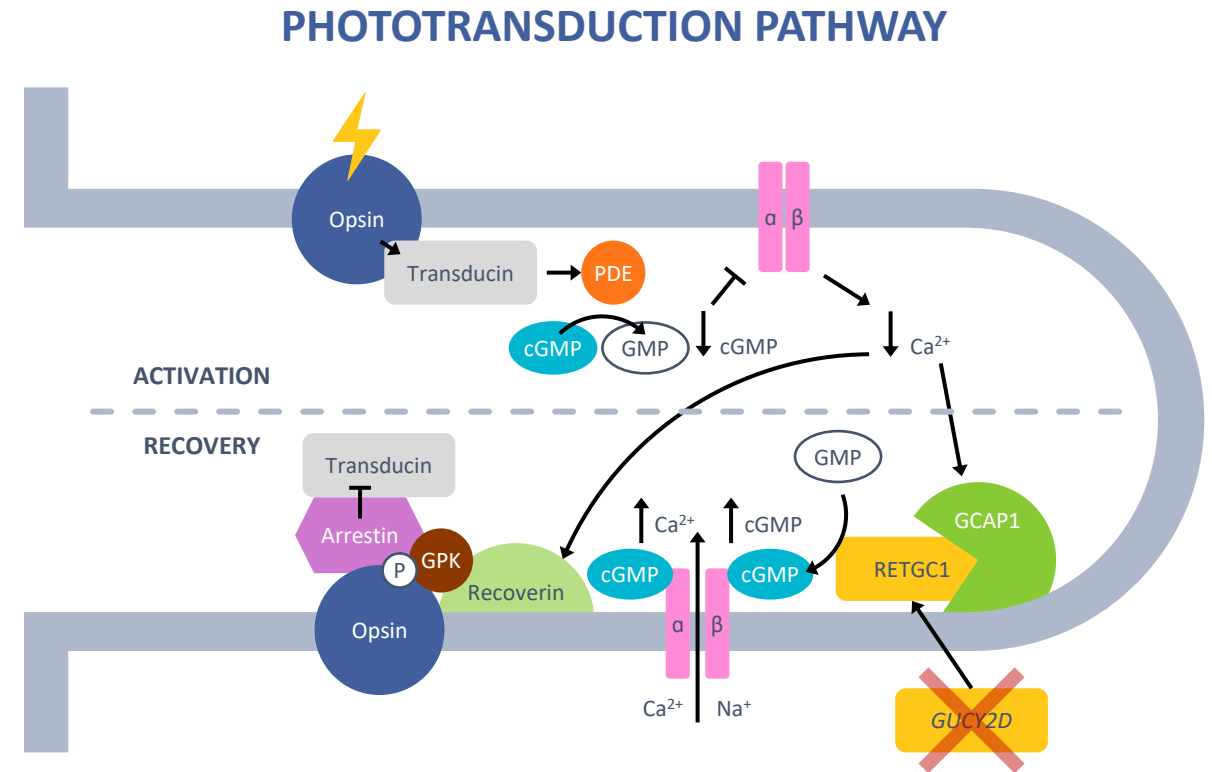
- Atsena Therapeutics



# LCA1: Leber congenital amaurosis caused by mutations in *GUCY2D*

Leber congenital amaurosis (LCA) is a group of monogenic, autosomal recessive diseases that are the leading cause of blindness in children

- **LCA1 is caused by mutations in the *GUCY2D* gene**
  - Causes up to 20% of LCA cases
- ***GUCY2D* mechanism of action**
  - Encodes retinal guanylate cyclase-1 (**RetGC1**), a protein expressed in photoreceptor outer segments
  - RetGC1 is a **key enzyme in the phototransduction cascade** responsible for the recycling of cGMP during the recovery phase
  - Without functional RetGC1, photoreceptors are “stuck” and **cannot recover from a light stimulus**

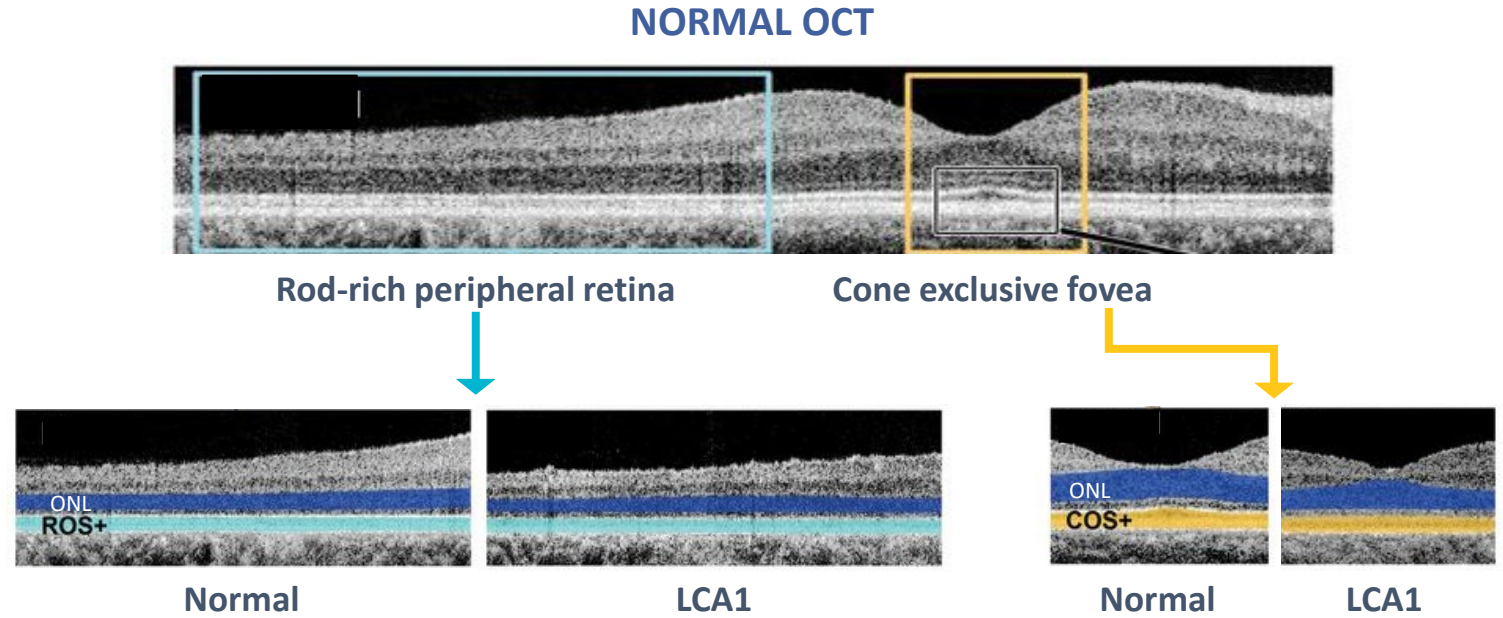


Modified from Jacobson et al., 2021



# LCA1: Clinical characteristics

- Severely reduced visual acuity from infancy
  - 20/80 to no light perception
- Reduced or non-recordable electroretinogram (ERG)
- **Nystagmus**
- Digito-ocular sign
- Normal fundus appearance
- **Relatively normal retinal thickness on optical coherence tomography (OCT)**



*Modified from Jacobson et al., 2013*

**The majority of LCA1 patients retain retinal structure over their lifetime**

High likelihood of successful outcomes with gene replacement therapy

**Low vision and nystagmus make use of common clinical endpoints challenging**

(eg, microperimetry, standard automated perimetry)



# Full-field stimulus test (FST)

- Specifically developed for patients with low vision and nystagmus
- Full-field stimuli presented to determine the dimmest light level perceived
- Chromatic FST (eg, red and blue stimuli) can assess whether thresholds are primarily rod- or cone-mediated
- Test-retest variability is approximately  **$\pm 3$  dB**
  - Similar for normal controls and patients with retinal degeneration

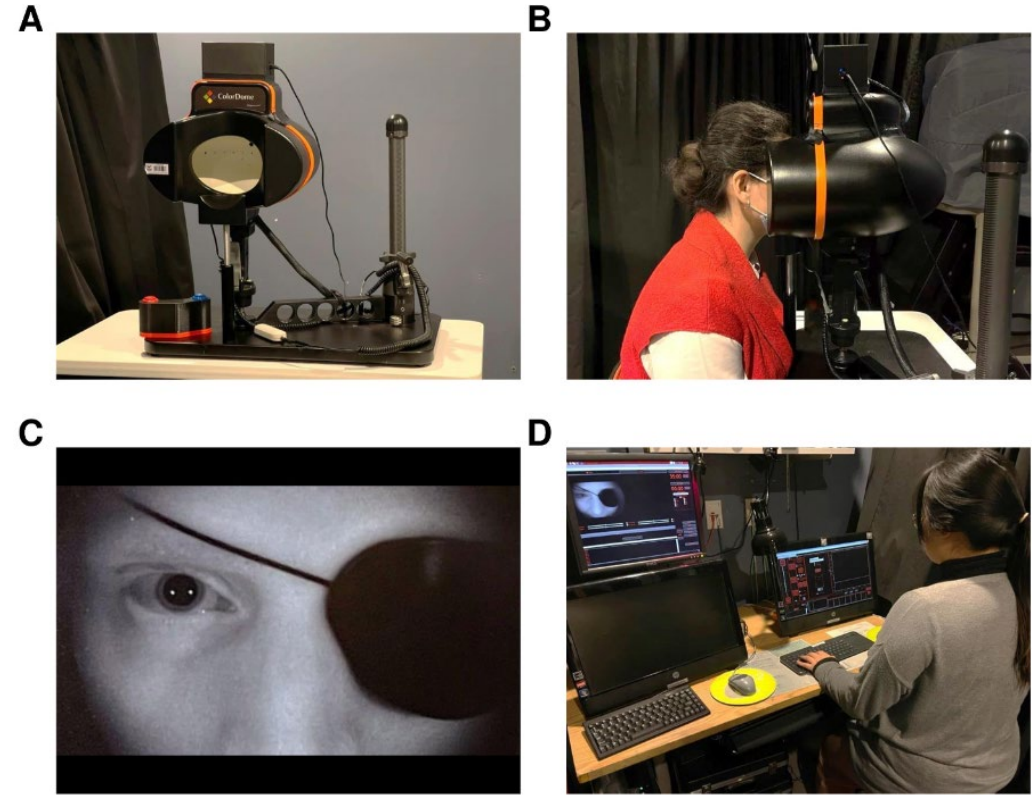


Image from Roman AJ et al., *Prog Retin Eye Res.* 2022

# LCA1 Phase 1/2 Clinical Trial Design (NCT03920007)

**ATSN-101 (AAV5-hGRK1-*GUCY2D*)** is a gene therapy developed to introduce the functional human *GUCY2D* to photoreceptors (*administered as a single 300  $\mu$ L subretinal injection*)

## ENROLLED COHORT PART A: Dose Escalation

|   |   |                            |               |
|---|---|----------------------------|---------------|
| ✓ | 1 | Low dose (N=3), >18 years  | 1.0E10 vg/eye |
| ✓ | 2 | Mid dose (N=3), >18 years  | 3.0E10 vg/eye |
| ✓ | 3 | High dose (N=3), >18 years | 1.0E11 vg/eye |

## PART B: Expansion

|   |   |                             |               |
|---|---|-----------------------------|---------------|
| ✓ | 4 | High dose (N=3), >18 years  | 1.0E11 vg/eye |
| ✓ | 5 | High dose (N=3), 6-18 years | 1.0E11 vg/eye |

### Key inclusion criteria:

- Male or female with biallelic mutations of *GUCY2D*
- Best-corrected visual acuity (BCVA):
  - Cohorts 1-3: 20/200 or worse
  - Cohorts 4-5: 20/80 or worse
- Outer nuclear layer identifiable on macular OCT

### Primary endpoint:

- The incidence of adverse events (AEs, SAEs) over a 12-month period

### Secondary endpoints:

- BCVA
- FST
- Multi-luminance mobility test (MLMT)
- Visual Function Questionnaire (VFQ-25)



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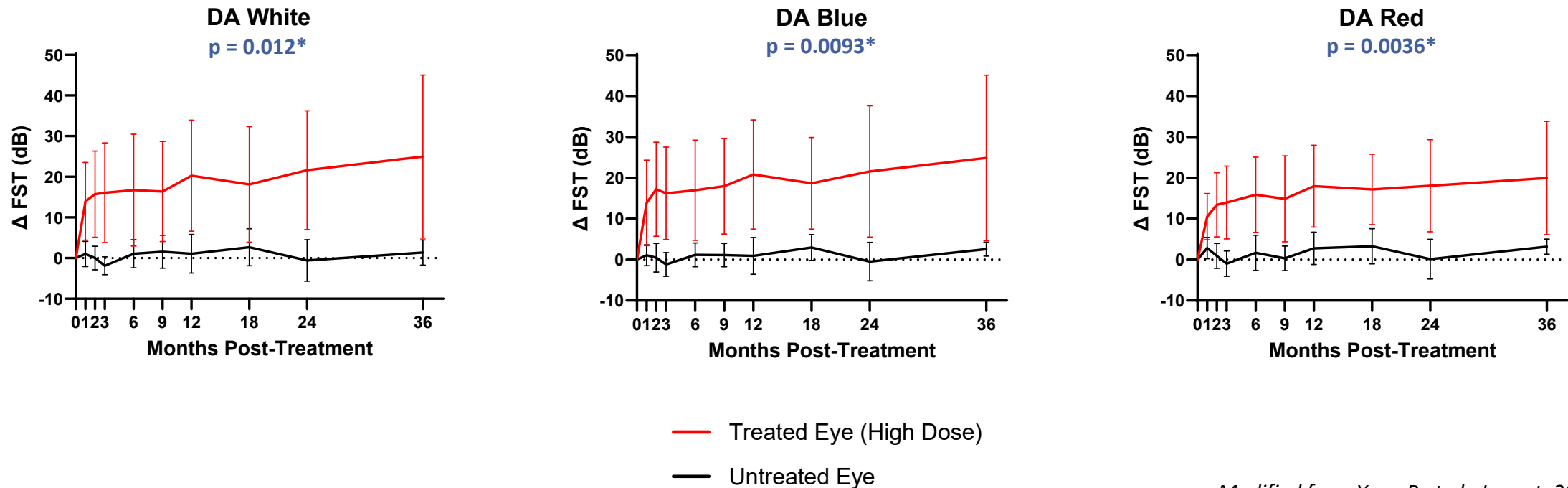
### Secondary endpoints:

- BCVA
- ➔ • FST
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# High-dose cohorts demonstrate durable improvement in FST

Significant differences between treated and untreated eyes were observed for **both white and chromatic stimuli**



*Modified from Yang P et al., Lancet, 2024*

*6 of 9 patients treated at the high dose have completed Month 36*

**\*Based on area under the curve (AUC) analysis comparing treated and untreated eyes**  
*Statistical analysis performed from Baseline through Month 12 (end of Main Study Period)*



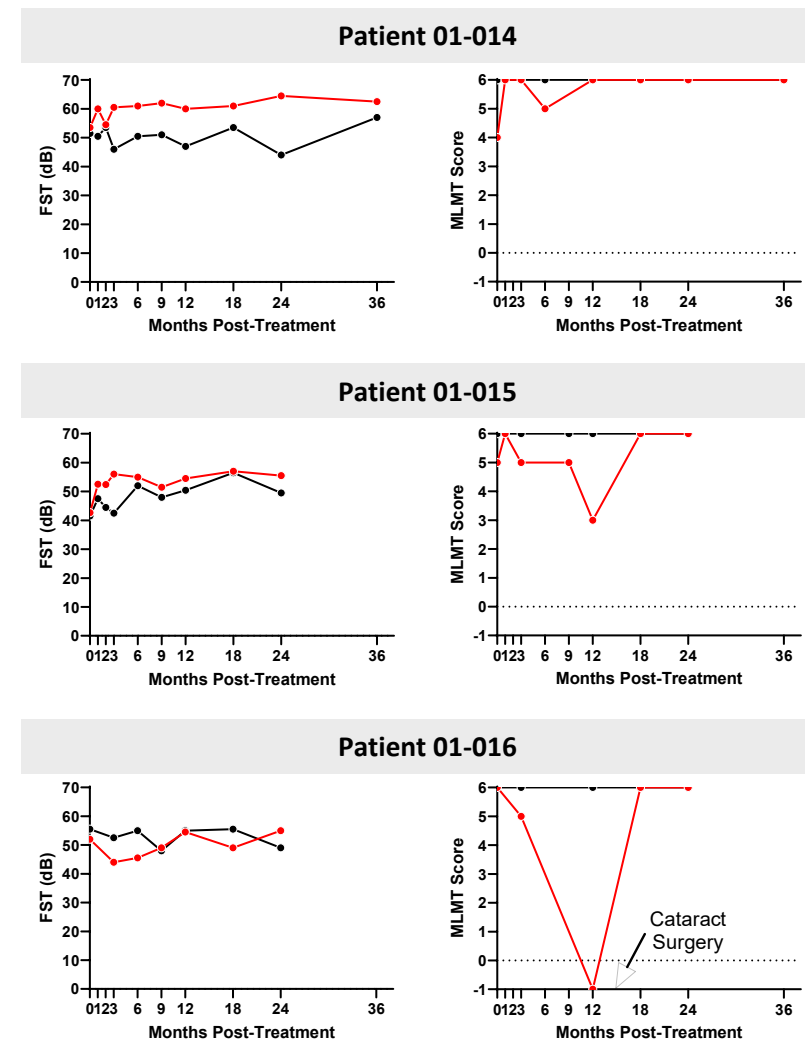
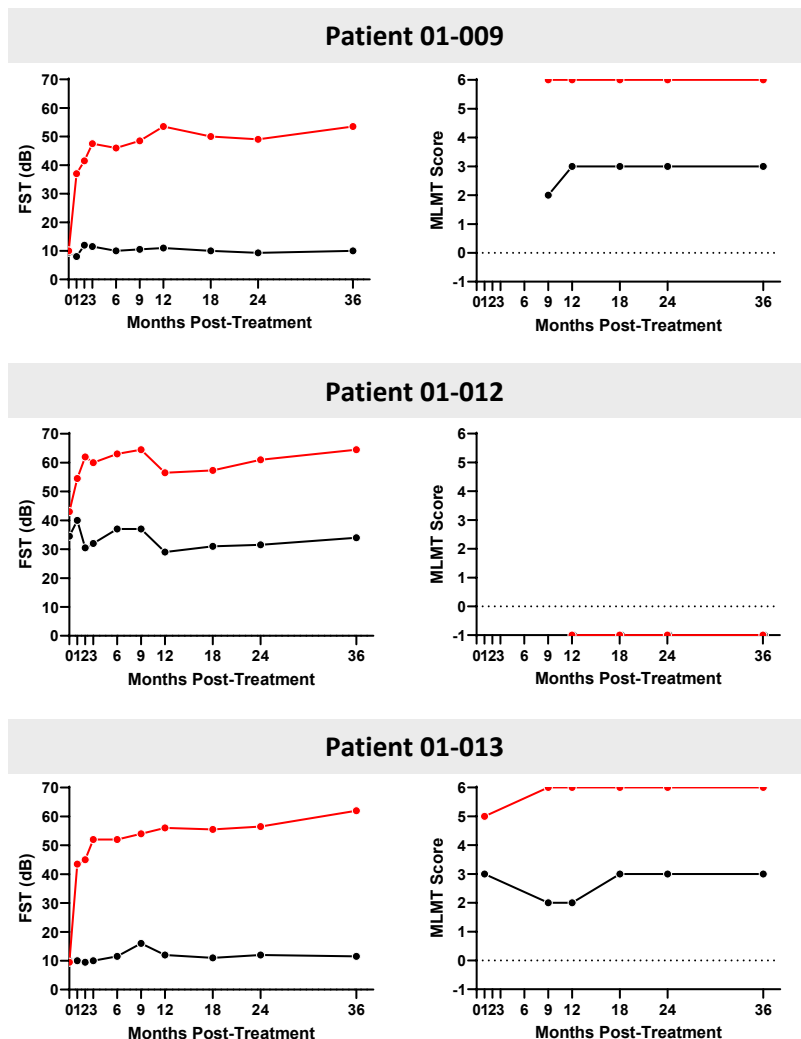
# FST is consistent with performance on a multi-luminance mobility test (MLMT)

MLMT was added as an exploratory endpoint midway through the trial

Six high-dose patients performed both FST and MLMT

4 of 6 completed Month 36

—●— Treated Eye  
—●— Untreated Eye



Modified from Yang P et al., Lancet, 2024



# FST is correlated with patient reported outcomes (NEI VFQ-25)

- The NEI VFQ-25 measures the dimensions of self-reported, vision-targeted health status important for patients with chronic eye diseases
- Scores range from 0-100
- 10-point improvement in VFQ-25 is correlated with a significant improvement in BCVA in age-related macular degeneration
- Meaningful score differences in FST (ROC analysis, anchored to 10-point change in VFQ-25 score):
  - Composite score: **6.7 dB**
  - Near activities subscale: **6.9 dB**
  - Distance activities subscale: **9.5 dB**
  - Dependency subscale: **11.5 dB**

| VFQ-25 Scale or Subscale            | FST DA White |                   |
|-------------------------------------|--------------|-------------------|
|                                     | Coefficient  | P-value           |
| <b>Composite Score</b>              | <b>0.186</b> | <b>&lt; 0.001</b> |
| General Health Rating               | -0.156       | 0.028             |
| General Vision Subscale             | 0.212        | 0.067             |
| Ocular Pain Subscale                | -0.098       | 0.554             |
| <b>Near Activities Subscale</b>     | <b>0.707</b> | <b>0.009</b>      |
| <b>Distance Activities Subscale</b> | <b>0.290</b> | <b>0.007</b>      |
| Social Functioning Subscale         | 0.301        | 0.048             |
| Mental Health Subscale              | 0.234        | 0.295             |
| Role Difficulties Subscale          | 0.289        | 0.030             |
| <b>Dependency Subscale</b>          | <b>0.495</b> | <b>0.002</b>      |
| Color Vision Subscale               | 0.254        | 0.366             |
| Peripheral Vision Subscale          | 0.014        | 0.924             |



# Conclusions

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- ATSN-101 subretinal gene therapy leads to improvements in retinal sensitivity
  - On average, **~20 dB (100-fold)** improvement
  - 2 patients improved by **> 40 dB (10,000-fold)**
  - Similar magnitude of improvement observed in Phase 3 trial of voretigene neparvovec
- Treatment effect is durable
  - Improvements in FST were maintained over the 12-month Main Study Period
  - Effect persists through **at least 36 months post-treatment**
- FST is a clinically meaningful endpoint
  - Consistent with performance on a mobility test used as a primary endpoint for an approved retinal gene therapy
  - Correlates with patient-reported, vision-related outcomes
  - Observed improvements in FST exceed:
    - Test-retest variability (**~3 dB**)
    - Meaningful score differences based on changes in VFQ-25 score (**~10 dB**)



# Thank You!

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## Atsena Therapeutics

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- Sanford L. Boye, MSc – U of Florida
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- Rachel Smith, PhD

## Collaborators

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- Alexander Sumaroka, PhD – UPenn
- Malgorzata Swider, PhD – UPenn
- Iryna Viarbitskaya, BS – UPenn
- Tomas S. Aleman, MD – UPenn/CHOP
- Sarah McCague, MS – CHOP
- Mark E. Pennesi, MD, PhD – OHSU/RFSW
- Lee McDaniel, PhD – JCHR

