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Reference

Regeneron Pharmaceuticals Press Release 2008, September 28

Title

VEGF Trap-Eye final phase II results in age-related macular degeneration presented at 2008 Retina Society Meeting

Aflibercept (303153)

Regeneron and Bayer announce that VEGF Trap-Eye achieved durable improvements in visual acuity and in biologic measures of neovascular disease, including retinal thickness and active choroidal neovascularization lesion size, for up to one year in a phase II study in neovascular (wet) age-related macular degeneration (AMD). In this double-blind trial, patients were initially treated with either fixed monthly or quarterly dosing for 12 weeks and then continued to receive treatment for another 40 weeks on a PRN (as needed) dosing schedule. Patients receiving monthly doses of VEGF Trap-Eye of either 2.0 or 0.5 mg for 12 weeks followed by PRN dosing achieved mean improvements in visual acuity versus baseline of 9.0 letters and 5.4 letters, respectively, at the end of one year. The proportion of patients with vision of 20/40 or better increased from 23% at baseline to 45% at week 52 in patients initially treated with 2.0 mg monthly and from 16% at baseline to 47% at week 52 in patients initially treated with 0.5 mg monthly. During the week 12 to week 52 PRN dosing period, patients initially dosed on a 2.0 mg monthly schedule received, on average, only 1.6 additional injections and those initially dosed on a 0.5 mg monthly schedule received, on average, 2.5 injections. Patients receiving monthly doses of VEGF Trap-Eye of either 2.0 or 0.5 mg for 12 weeks followed by PRN dosing also achieved mean decreases in retinal thickness versus baseline of 143 microns and 125 microns at week 52, respectively. While PRN dosing following a fixed quarterly dosing regimen (with dosing at baseline and week 12) also yielded improvements in visual acuity and retinal thickness versus baseline at week 52, the results generally were not as robust as those obtained with initial fixed monthly dosing. VEGF Trap-Eye was also associated with a reduction in the size of the total active choroidal neovascular membrane (CNV). Patients initially receiving either a 2.0 mg or 0.5 mg monthly fixed dose of VEGF Trap-Eye for 12 weeks followed by PRN dosing experienced statistically significant 3.41 mm² and 1.42 mm² reductions in mean CNV size at 48 weeks (the final one-year analysis from the independent reading center) versus baseline, respectively. Patients in the 2.0 mg monthly cohort also achieved a statistically significant 1.75 mm² reduction in total lesion size. A reduction in total lesion size was not seen in the cohort initially dosed with 0.5 mg monthly. VEGF Trap-Eye was generally well tolerated and there were no drug-related serious adverse events. Regeneron and Bayer HealthCare initiated a phase III global development program for VEGF Trap-Eye in wet AMD in August 2007. In two phase III trials, the companies are evaluating VEGF Trap-Eye dosed 0.5 mg every 4 weeks, 2 mg every 4 weeks, or 2 mg every 8 weeks (following three monthly doses) in direct comparison with ranibizumab (Lucentis[R]) administered 0.5 mg every 4 weeks. PRN dosing will be evaluated during the second year of each study. The VIEW1 study is currently enrolling patients in the U.S. and Canada and the VIEW2 study is currently enrolling patients in Europe, Asia Pacific, Japan, and Latin America. The VEGF Trap-Eye is a fully human, soluble VEGF receptor fusion protein that binds all forms of VEGF-A along with the related placental growth factor (PlGF).

Mylan v. Regeneron
IPR2021-00881
U.S. Pat. 9,254,338
Exhibit 2007

Regeneron Exhibit 2007