

Addressing beta-cell depletion in diabetes with icovamenib

Progressive decline in beta-cell function in T2D

Characterized by a decrease in beta-cell mass and function over time

Role of menin in glucose homeostasis

Menin is a scaffold protein that regulates glucose homeostasis

Inhibiting menin promotes beta-cell proliferation thereby enhancing insulin secretion

Icovamenib: an oral covalent small molecule menin inhibitor

Currently in clinical development for T2D and T1D

COVALENT-111: Multiple Ascending Dose

Participants with T2D maintained glycemic control up to 22 weeks after 4 weeks of daily icovamenib

COVALENT-111: Phase 2 Expansion

Design and methods of the trial (NCT05731544)

COVALENT-111 Expansion: Study Overview

Study Design

- 52-week randomized, double-blind, placebo-controlled study
- First major data readout at Week 26
- Ongoing study in US and Canada

Key Eligibility Criteria

- Age 18-65
- Diagnosed with T2D duration ≤ 7 years
- HbA1c 7-10.5%
- BMI 25-40 kg/m²
- Treated with diet/exercise \pm up to 3 antidiabetic medications (insulin secretagogues and insulin excluded)
- At least 75% treated with lifestyle intervention \pm MET



Treatment Groups

- Dosing: 8-12 weeks of icovamenib with follow up until Week 52
- Targeting 72 patients in each arm (54 active: 18 placebo)
 - Group 1:** 100mg QD for 8 weeks, then placebo for 4 weeks (redosing at Week 22 for 4 weeks, if necessary)
 - Group 2:** 100mg QD for 12 weeks
 - Group 3:** 100mg QD for 8 weeks, then 100mg BID for 4 weeks

Endpoints

Primary Objective

- Assess the effect on HbA1c at Week 26

Secondary Objective




- Assess safety and tolerability
- Assess the effect on fasting plasma glucose

COVALENT-111: Advancing diabetes treatment with icovamenib

Icovamenib targets the root cause of T2D

- Addresses progressive decline in beta-cell function

COVALENT-111 study overview

-  Once-daily orally-dosed icovamenib therapy
-  Assesses long-term efficacy and safety
-  Duration:
 - Short-term therapy: Up to 12 weeks
 - Long-term assessment: Follow-up until 52 weeks

Potentially addresses unmet need in T2D treatment

Aligns with FDA's 2023 guidance on the necessity for new therapies to address the unmet medical needs in diabetes