ViiV Healthcare to present data for its next generation of ultra long-acting treatments for HIV

PUBLISHED FEB 28, 2024
BY GSK

For media and investors only

- Other key data to be presented from ViiV Healthcare's innovative pipeline and portfolio include the exploration of different mechanisms of action through broadly neutralising antibodies as well as real-world insights from established long-acting and 2-drug regimens

GSK plc (LSE/NYSE: GSK) announced that ViiV Healthcare, the global specialist HIV company majority owned by GSK, with Pfizer and Shionogi as shareholders, today announced the presentation of 64 abstracts that includes highlights of the company's next-generation pipeline advancements, alongside data from its diverse portfolio of marketed HIV treatment and prevention options at the Conference on Retroviruses and Opportunistic Infections (CROI 2024) being held in Denver, Colorado, from 3 – 6 March 2024.

Kimberly Smith, M.D., MPH, Head of Research & Development at ViiV Healthcare, said:

As leaders in developing long acting injectables for the treatment of HIV, we're excited to present new data setting the stage for ViiV's next generation of medicines and demonstrating how key pipeline assets will target HIV in different ways. These findings, as well as the breadth of data we'll present on our marketed products, including new interim results from the LATITUDE study, reflect a portfolio and future-looking pipeline focused on ending the HIV epidemic. We look forward to sharing them with the scientific and HIV communities at CROI 2024.

Key abstracts to be presented at CROI 2024 by ViiV Healthcare and its study partners will include:

Data introducing our next generation of potential ultra long-acting medicines for HIV: ViiV Healthcare will share findings from a phase I study evaluating different formulations of cabotegravir and their potential for dosing every four months. The ongoing, open-label, single-dose, dose-escalation phase I study in 70 healthy adults assessed both the 200 mg/mL formulation of cabotegravir in combination with recombinant human hyaluronidase PH20 (rHuPH20), as well as a new formulation of cabotegravir (CAB-ULA) administered by itself.1 Researchers will share safety and pharmacokinetic findings from both ultra long-acting approaches and their potential for future clinical development.

Findings advancing different mechanisms of action in HIV research: New phase IIa findings from the BANNER study of VH3810109 (N6LS), an investigational, broadly neutralising antibody (bNAb), will be presented. Researchers will share findings of the bNAb administered intravenously and the first efficacy findings of its subcutaneous administration.2 Findings from the SPAN study of N6LS, examining the safety and tolerability of the highest subcutaneous and intravenous N6LS doses administered to date, with and without PH20, will also be presented.3 Additionally, efficacy and safety data from a non-ViiV owned bNAb asset, VRC07-523LS, in a phase II, open-label clinical trial used in combination with long-acting CAB for maintenance antiretroviral therapy (ART) will be presented.4

New data on long-acting therapy vs daily oral standard of care, in traditionally non-adherent populations: Interim analysis of the LATITUDE phase III trial will be presented showing that, considering the totality of all the study endpoints, the injectable antiretroviral treatment for HIV, Cabenuva (cabotegravir and rilpivirine [CAB+RPV LA]), demonstrates superior efficacy compared to daily oral standard of care (SOC) in individuals with a history of antiretroviral adherence challenges. The NIAID/ACTG also announced a modification to the study, where further randomisation has been stopped and participants in the SOC arm are being given the option to switch to the long-acting therapy arm.5

Real-world evidence from across our treatment and prevention portfolios: New findings from SEARCH, a randomised study evaluating the real-world impact of the inclusion of long-acting cabotegravir for PrEP in an HIV prevention coverage package compared to the standard-of-care of oral PrEP and PEP alone in rural Uganda and

Kenya, will also be presented.6 Real-world evidence findings for the complete long-acting HIV treatment regimen Cabenuva will be presented from the OPERA cohort examining ART-experienced, virally suppressed adults living with HIV who switched to CAB+RPV LA or to an oral regimen.7

Findings for the 2-drug regimen, Dovato (dolutegravir, lamivudine [DTG/3TC]), will include the InfCare HIV study, which presents three-year switch data, from 3-drug regimen to Dovato, in a long-term real-world Swedish cohort.8 This study adds to the body of real-world evidence to date that includes more than 40,000 people living with HIV.9

Here is a list of ViiV Healthcare-sponsored or supported studies to be

| Title | First Author | Presentation Number | Presentation |
| Dolutegravir | | | |
| A single once-daily ABC/DTG/3TC tablet predicts safe and effective exposures in children 3 to
| Population pharmacokinetics of ABC/DTG/3TC FDC to support dosing in peds with HIV-1 (IMPAACT 2019) | H. Chandasana | 03110 | Poster
| Dolutegravir and growth in pediatric populations with HIV-1: IMPAACT P1093 and IMPAACT 2019 | M. McKenna | 01783 | Poster | Switching to DTG+3TC vs 3-drug

long-term Swedish data | E. Sörstedt | 01838 | Poster

| Temporal trends of cardiovascular disease incidence in people with HIV from 2001-2021 | N. Jaschinski | 02263 | Poster

| Increased cancer risk with low CD4 counts persists despite over 2 years of virological suppression | J. Hoy | 01462 | Poster

| Cabotegravir for Treatment | | | |

regimens in routine clinical care:

presented at CROI 2024:

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| Long-acting Injectable CAB/RPV is Superior to Oral ART in PWH with
adherence challenges: ACTG A5359 | A. Rana | 03579 | Oral
| Real-world utilization of cabotegravir + rilpivirine in the US: data
from Trio Health cohort | J. J. Eron | 01374 | Poster
| Real-world effectiveness of cabotegravir + rilpivirine vs. standard of
care oral regimens in the US | R. K. Hsu | 01952 | Poster
| HIV-1 RNA blips and low-level viral replication: SOLAR (CAB+RPV
LA vs. BIC/FTC/TAF) | C. Latham | 00138 | Poster
| Model based comparison of cabotegravir pharmacokinetics following
thigh and gluteal injections | K. Han | 03157 | Poster
| Cabotegravir for PrEP | | | |
| SEARCH Randomized trial of Dynamic Choice HIV Prevention
including injectable cabotegravir (CAB-LA) | J. Kabami | 03405 | Late-
Breaker Oral
Tuesday, March 5 10:00-12:00pm
| Pre-exposure prophylaxis with cabotegravir long-acting injectable in
the OPERA cohort | A. Mills | 01400 | Poster
| Real-world use of cabotegravir long acting for pre-exposure
prophylaxis: TRIO cohort | K. Mayer | 01907 | Poster
| Cabotegravir PopPK analysis of adults and adolescents living with
HIV or at risk for HIV receiving PrEP| Y. Lin | 03038 | Poster
| Interest in long-acting injectable PrEP among transgender women in
the United States | E. E. Cooney | 00621 | Poster
| Healthcare staff acceptability and feasibility of telehealth delivery of
cabotegravir for PrEP | A. Liu | 03080 | Poster
| Fostemsavir | | | |
Temsavir treatment enhances bNAb recognition and subsequent
clearance of HIV-1 infected cells | R. Ferris | 02971 | Poster
| Pipeline: Ultra Long-Acting Cabotegravir | | | |
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| Phase I study of cabotegravir long-acting injectable formulations
supports ≥4-monthly dose interval | K. Han | 00251 | Oral
| Pipeline: Broadly Neutralising Antibodies | | | |
| VH3810109 (N6LS) in antiretroviral therapy—naive adults with HIV-1:
phase IIa BANNER efficacy data | P. Leone | 01911 | Oral
| Safety and efficacy of VRC07-523LS plus long-acting cabotegravir in
the phase 2 ACTG A5357 Trial. | B. Taiwo | 02254 | Oral
| High-dose VH3810109 (N6LS) ± recombinant human hyaluronidase
PH20: phase I SPAN study safety results | B. Win | 01988 | Poster
| Pipeline: Maturation Inhibitors | | | |
| Next-generation maturation inhibitor GSK3640254 showed broad
spectrum potency without MI resistance | B. McAuliffe | 03095 | Poster
| The preclinical profile of maturation inhibitor VH3739937 | J. Jeffrey |
02819 | Poster
| General HIV | | | |
Resistance in young children newly diagnosed with HIV in Western
Cape, South Africa | K. Anderson | 01012 | Poster
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Dovato is indicated as a complete regimen to treat HIV-1 infection in adults with no antiretroviral (ARV) treatment history or to replace the current ARV regimen in those who are virologically suppressed (HIV-1 RNA

Please consult the full Prescribing Information: https://gskpro.com/content/dam/global/hcpportal/en-US/Prescrib...

About Cabenuva (cabotegravir + rilpivirine)

Cabenuva is indicated as a complete regimen for the treatment of HIV-1 infection in adults to replace the current antiretroviral regimen in those who are virologically suppressed (HIV-1 RNA

The complete regimen combines the integrase strand transfer inhibitor (INSTI) cabotegravir, developed by ViiV Healthcare, with rilpivirine, a non-nucleoside reverse transcriptase inhibitor (NNRTI) developed by

Janssen Sciences Ireland Unlimited Company. Rilpivirine tablets are approved in the US as a 25mg tablet taken once a day to treat HIV-1 in combination with other antiretroviral agents in antiretroviral treatment-naïve patients 12 years of age and older and weighing at least 35kg with a viral load ≤100,000 HIV RNA c/ml.

INSTIs inhibit HIV replication by preventing the viral DNA from integrating into the genetic material of human immune cells (T-cells). This step is essential in the HIV replication cycle and is also responsible for establishing chronic disease. Rilpivirine is an NNRTI that works by interfering with an enzyme called reverse transcriptase, which stops the virus from multiplying.

Please consult the full Prescribing Information: https://gsksource.com/pharma/content/dam/GlaxoSmithKline/US/en...

Rukobia, in combination with other antiretrovirals, is indicated for the treatment of adults with multidrug resistant HIV-1 infection for whom it is otherwise not possible to construct a suppressive anti-viral regimen. Recommended dose is 600mg fostemsavir twice daily.

Please consult the full Prescribing Information: https://gskpro.com/content/dam/global/hcpportal/en_US/Prescrib...

Apretude is a medicine used for preventing sexually transmitted HIV-1 infection (pre-exposure prophylaxis or PrEP) in adults and adolescents weighing at least 35 kg who are at high risk of being infected. It should be used in combination with safer sex practices, such as using condoms. Apretude contains the active substance cabotegravir.

Please consult the full Prescribing Information: https://gskpro.com/content/dam/global/hcpportal/en_US/Prescrib...

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ViiV Healthcare is a global specialist HIV company established in November 2009 by GSK (LSE: GSK) and Pfizer (NYSE: PFE) dedicated to delivering advances in treatment and care for people living with HIV and for people who are at risk of acquiring HIV. Shionogi became a ViiV shareholder in October 2012. The company's aims are to take a deeper and broader interest in HIV and AIDS than

any company has done before and take a new approach to deliver effective and innovative medicines for HIV treatment and prevention, as well as support communities affected by HIV.

For more information on the company, its management, portfolio, pipeline, and commitment, please visit <u>viivhealthcare.com</u>.

GSK is a global biopharma company with a purpose to unite science, technology, and talent to get ahead of disease together. Find out more at <u>gsk.com</u>.

Cautionary statement regarding forward-looking statements

GSK cautions investors that any forward-looking statements or projections made by GSK, including those made in this announcement, are subject to risks and uncertainties that may cause actual results to differ materially from those projected. Such factors include, but are not limited to, those described under Item 3.D "Risk factors" in the company's Annual Report on Form 20-F for 2022, and Q4 Results for 2023.

Han, et al. Phase I Study of Cabotegravir Long-Acting Injectable Formulations Supports ≥4-Monthly Dose Interval. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Leone, et al. VH3810109 (N6LS) in Antiretroviral Therapy-Naive Adults With HIV-1: Phase IIa BANNER Efficacy Data. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Win, et al. High-Dose VH3810109 (N6LS) ± Recombinant Human Hyaluronidase PH20: Phase I SPAN Study Safety Results. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Taiwo, et al. Safety and Efficacy of VRC07-523LS plus Long-Acting Cabotegravir in the Phase 2 ACTG A5357 Trial. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Rana, et al. Long-acting Injectable CAB/RPV is Superior to Oral ART in PWH with adherence challenges: ACTG A5359. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Kamya, et al. SEARCH Randomized trial of Dynamic Choice HIV Prevention including injectable cabotegravir (CAB-LA). Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Hsu, et al. Real-World Effectiveness of Cabotegravir + Rilpivirine vs. Standard of Care Oral Regimens in the US. Presented at 31st Conference on Retroviruses and Opportunistic

Infections (CROI). March 2024. Sörstedt, et al. Switching to DTG+3TC vs 3-drug regimens in routine clinical care: long-term Swedish data. Presented at 31st Conference on Retroviruses and Opportunistic Infections (CROI). March 2024. Data on File

Press release distributed by Wire Association on behalf of GSK, on Feb 28, 2024. For more information subscribe and follow us.

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