

NTP42, an antagonist of the thromboxane receptor, attenuates experimentally-induced pulmonary arterial hypertension

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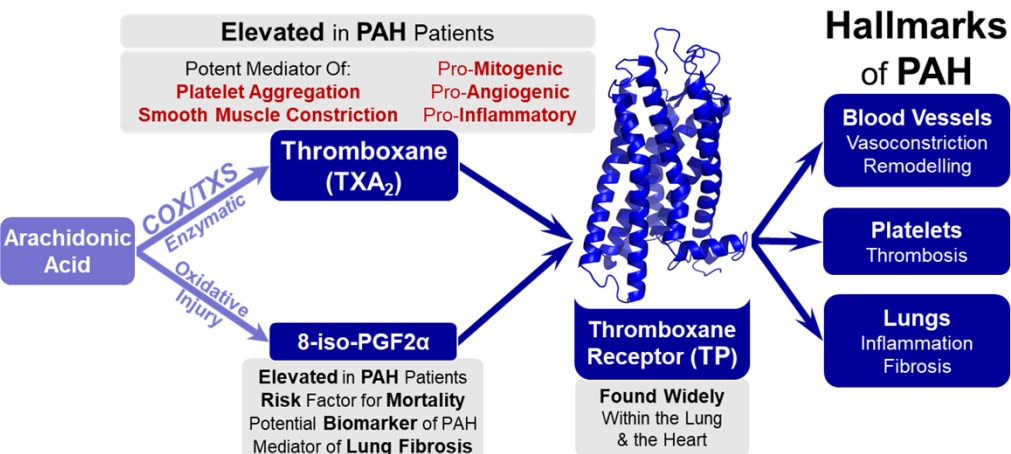
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Background & Aims

NTP42 is a **novel antagonist** of the thromboxane (TX)_{A2} receptor (TP), currently in development for the treatment of pulmonary arterial hypertension (PAH).

The TP is a Key Driver of PAH



Mechanistically, **TP antagonists** should treat many of the hallmarks of PAH, including inhibiting the excessive vasoconstriction and pulmonary artery remodelling, *in situ* thrombosis, fibrosis and inflammation.

NTP42 has been confirmed to display **potent antagonist** activity; it also has excellent target **specificity**, **pharmacokinetic & drug safety/toxicology** profiles.

The **aim** of this study was to investigate the **efficacy** of **NTP42** in a monocrotaline (MCT)-induced PAH model in rats (Wistar Kyoto), comparing its effects to the standard-of-care (SoC) drugs Sildenafil and Selexipag.

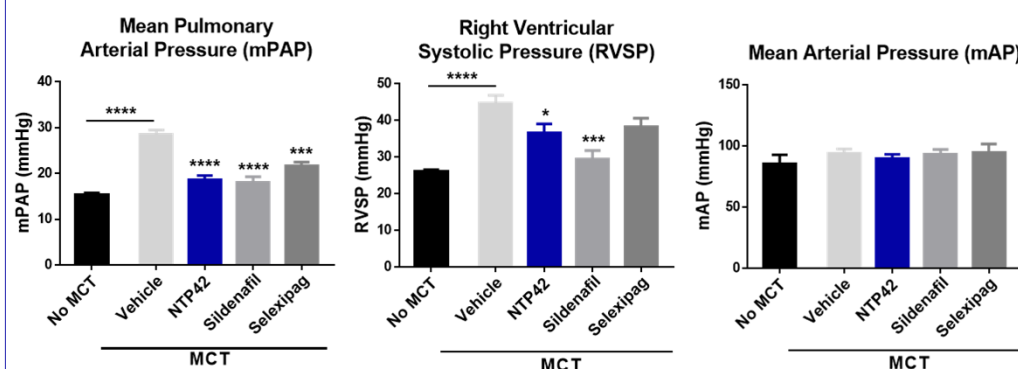
Methods

PAH was induced by bolus injection of 60 mg/kg MCT (s.c). Rats were randomly assigned to 5 groups: (1) No MCT; (2) MCT Only; (3) MCT+NTP42 (0.25 mg/kg PO, BID); (4) MCT+Sildenafil (50 mg/kg PO, BID); (5) MCT+Selexipag (1 mg/kg PO, BID), where treatment was initiated 24hr post-MCT & was continued for 28 days.

Results

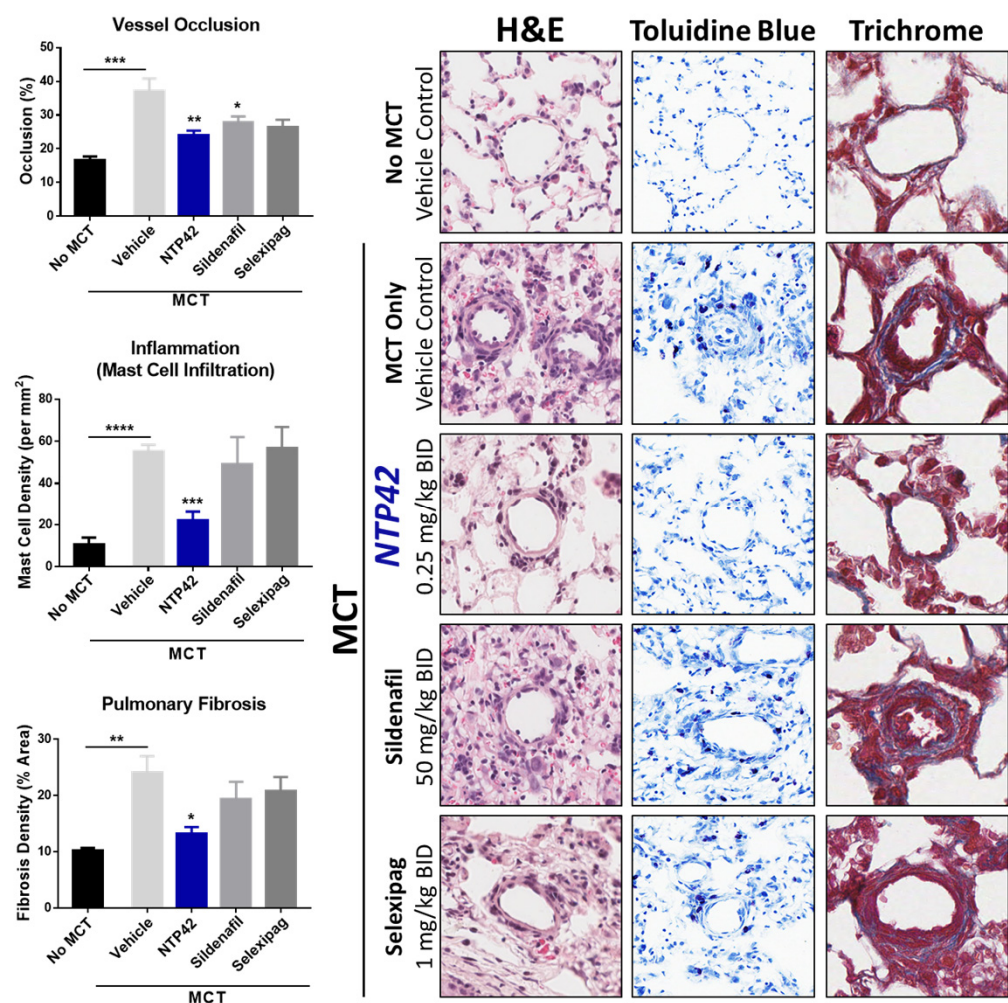
Pulmonary & Cardiac Haemodynamics

- NTP42** reduced the severity of MCT-induced PAH as determined from hemodynamic measurements, including reductions in mean pulmonary arterial pressure (mPAP) and right systolic ventricular pressure (RVSP).
- NTP42** (0.25 mg/kg BID) was at least comparable to the SoC drugs Sildenafil (50 mg/kg BID) or Selexipag (1 mg/kg BID) in these effects.
- NTP42** or the SoC drugs had **no effect on systemic arterial pressure** (mAP).



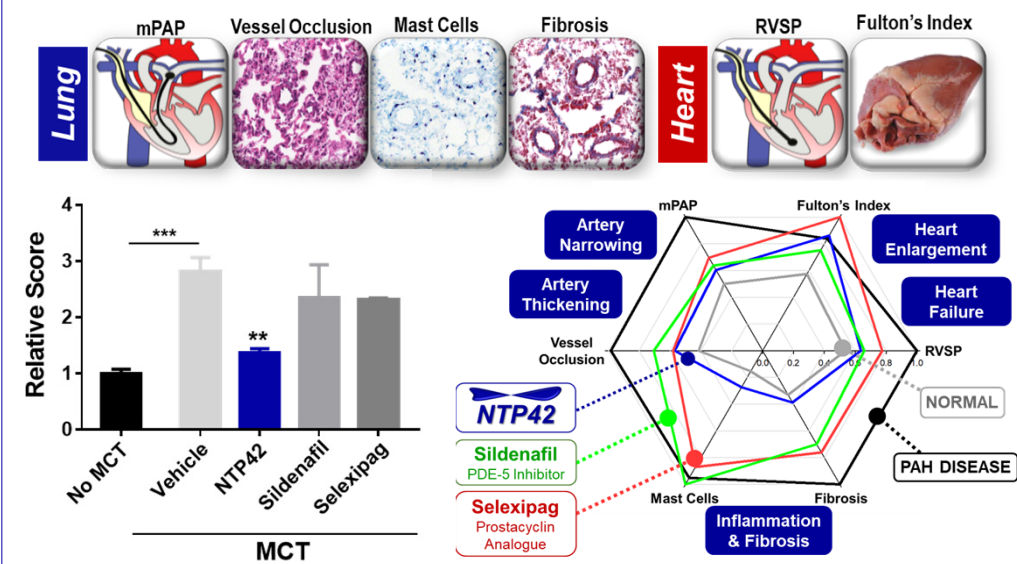
Pulmonary Histology

- NTP42** was **superior to the SoC** drugs Sildenafil or Selexipag in significantly **reducing pulmonary vascular remodeling** in the MCT-treated animals. Notably **NTP42-treated** animals displayed remarkably similar histology to the sham (No MCT) control animals across all morphometric parameters analyzed.
- NTP42**, unlike the SoCs, was **the only drug therapy** that significantly reduced pulmonary inflammation (mast cell infiltration) and pulmonary fibrosis.



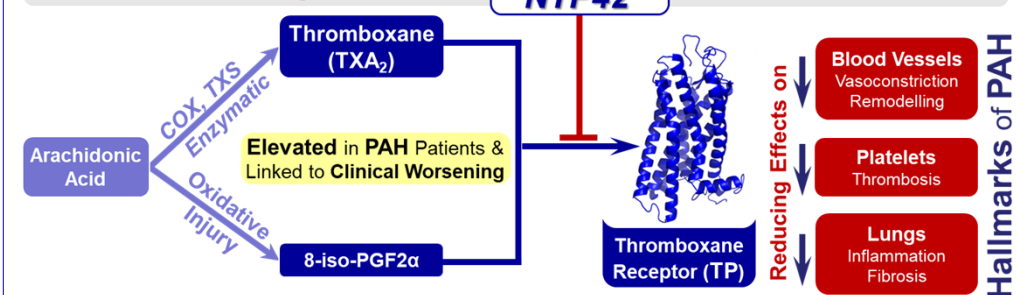
Multiparameter Disease Efficacy

A **multiparameter score** of key PAH disease indices, *incl.* mPAP, RVSP, Fulton's index, vessel remodelling, inflammation & fibrosis, shows that **NTP42** has **significant treatment benefits**, and is superior to the SoCs Sildenafil & Selexipag.



Conclusions

NTP42 is a **Potent Antagonist** of the TP & **Blocks** the TP Pathway



This study shows that **NTP42**, through its antagonism of TP signaling, **alleviates PAH pathophysiology** and, therefore, represents a **novel therapeutic drug & target pathway** displaying marked **benefits over existing SoC therapies**.

About ATXA Therapeutics Limited

- Headquartered in Dublin, Ireland, ATXA Therapeutics Ltd is a drug-development company developing novel, *first-in-class* small molecule drugs to the TP. Spun out from UCD, it has pipeline of TP antagonists, *incl.* **NTP42**, protected by 9 granted in the US (7) & Europe (2).
- In 2018, ATXA secured Orphan Designation from both the EMA and the FDA for its lead drug **NTP42** for its primary target disease indication PAH.
- During 2018, ATXA was successful in winning €2.5 million in grant aid from the EU Horizon 2020 SME Instrument funding scheme. This project, dubbed **PAH-HOPE**, will fast-track ATXA's **NTP42** into clinical development in the disease indication PAH.