



Cloudbreak Influenza

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Influenza – prophylaxis and treatments are available, but have limitations

Vaccines

- **Vaccines are strain-specific, providing variable coverage**
 - 10%-60% effective (2004-2018)¹
 - Less effective in elderly & immune compromised
- **~2-week lag time to achieve full protection²**
- **Long, complex manufacturing cycle**
 - Difficult to scale, low antigen yields can limit production capacity

• **Desired Target Product Profile:**

- Long-acting prophylactic agent with full seasonal/pandemic coverage
- Coverage of immune compromised subjects

Antiviral Treatments

- **Short administration window**
 - 48 hours from symptom onset³
- **Drug resistance**
- **Effectiveness poorly defined, particularly in high-risk patients**
 - Current treatments provide modest effects in reducing symptoms, infectivity
 - Insufficient data to demonstrate that they reduce complications

• **Desired Target Product Profile:**

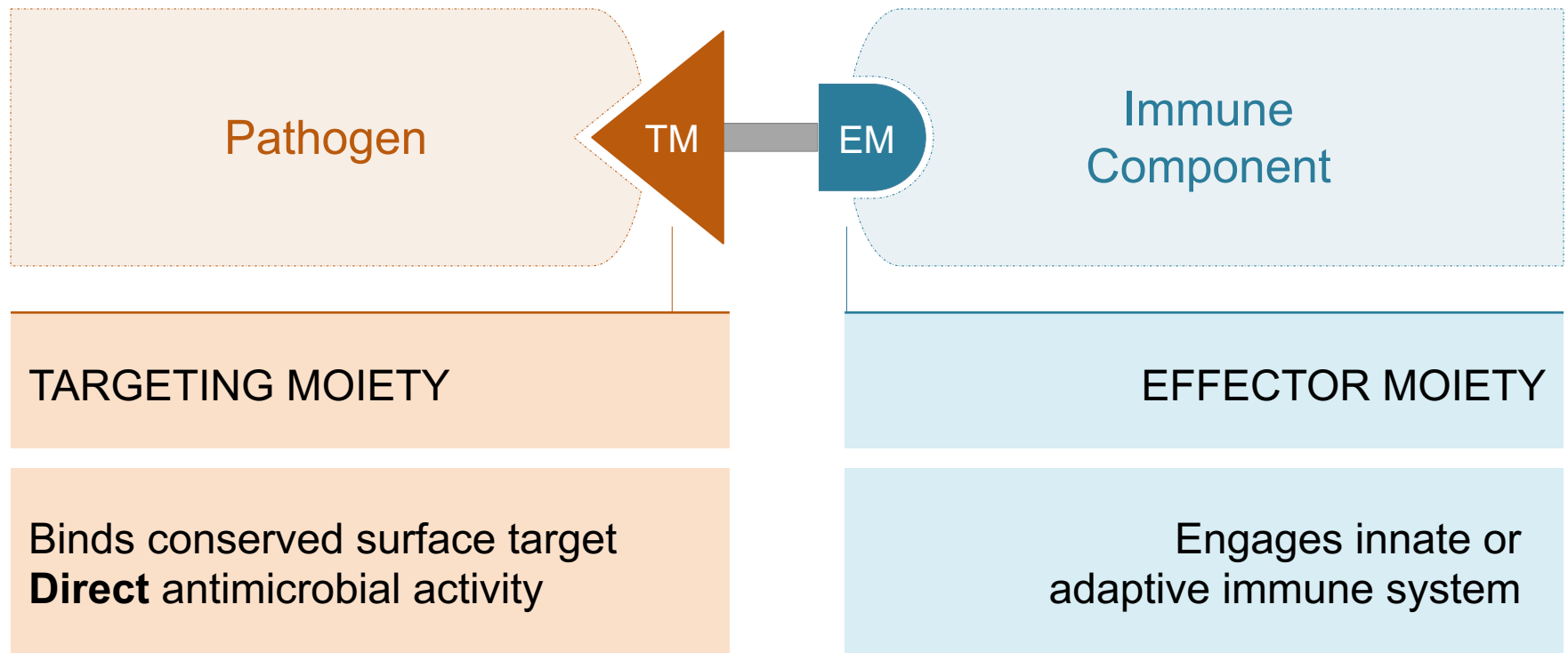
- Broad-spectrum activity, extended treatment window
- Minimize probability of resistance emergence

¹<https://www.cdc.gov/flu/professionals/vaccination/effectiveness-studies.htm>

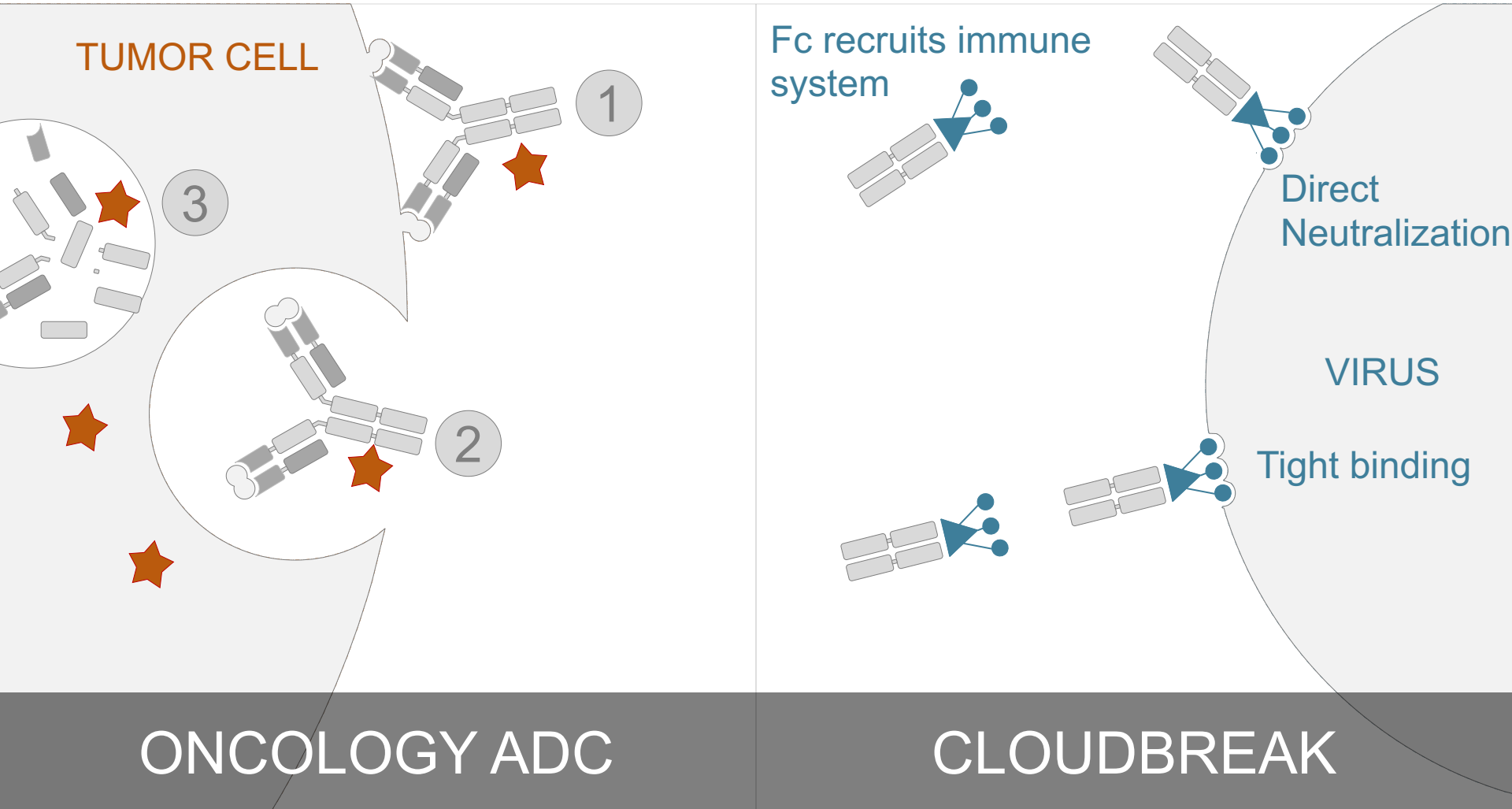
²<https://www.cdc.gov/flu/protect/keyfacts.htm>

³<https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>

Cloudbreak platform – multimodal mechanism of action: intrinsic antimicrobial activity & immune engagement

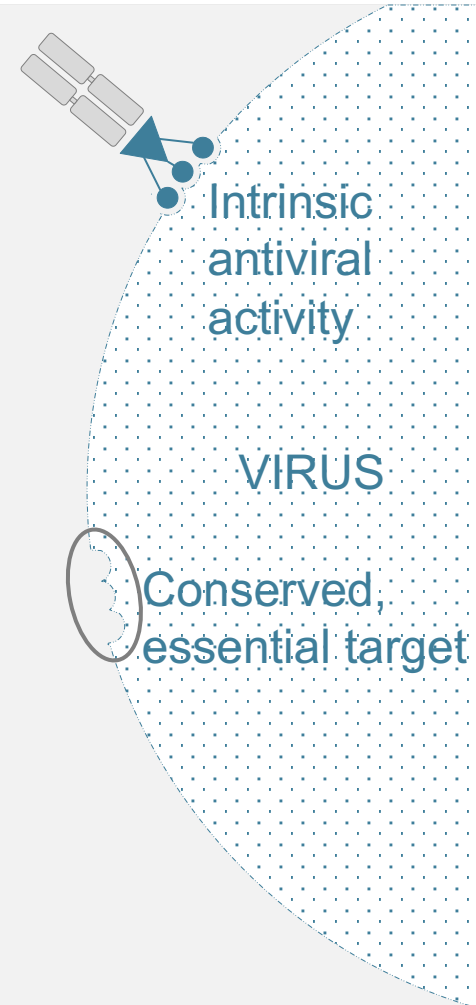


Cloudbreak Antiviral Conjugates (AVCs) are not conventional Antibody-Drug Conjugates (ADCs)

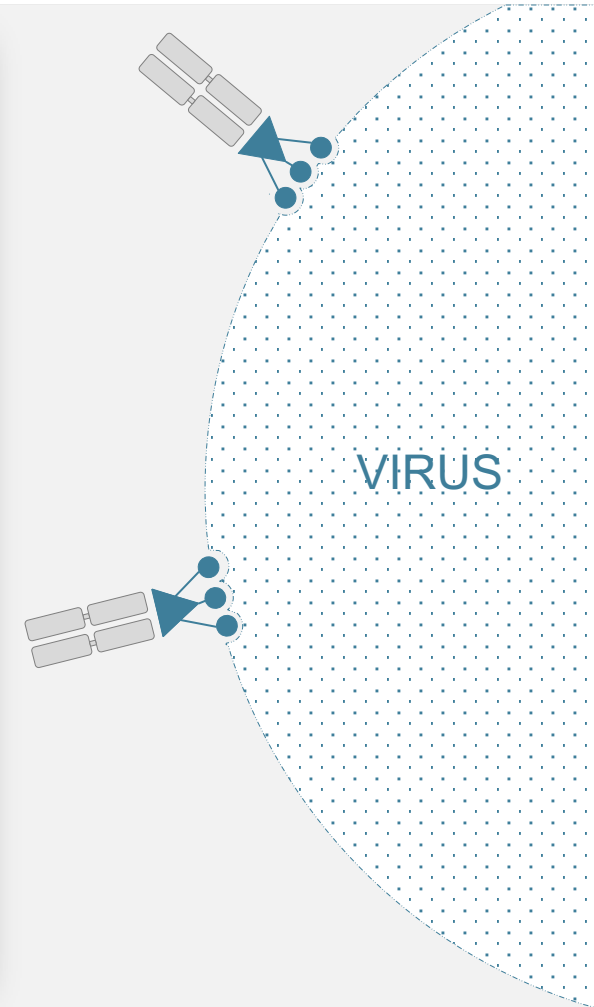
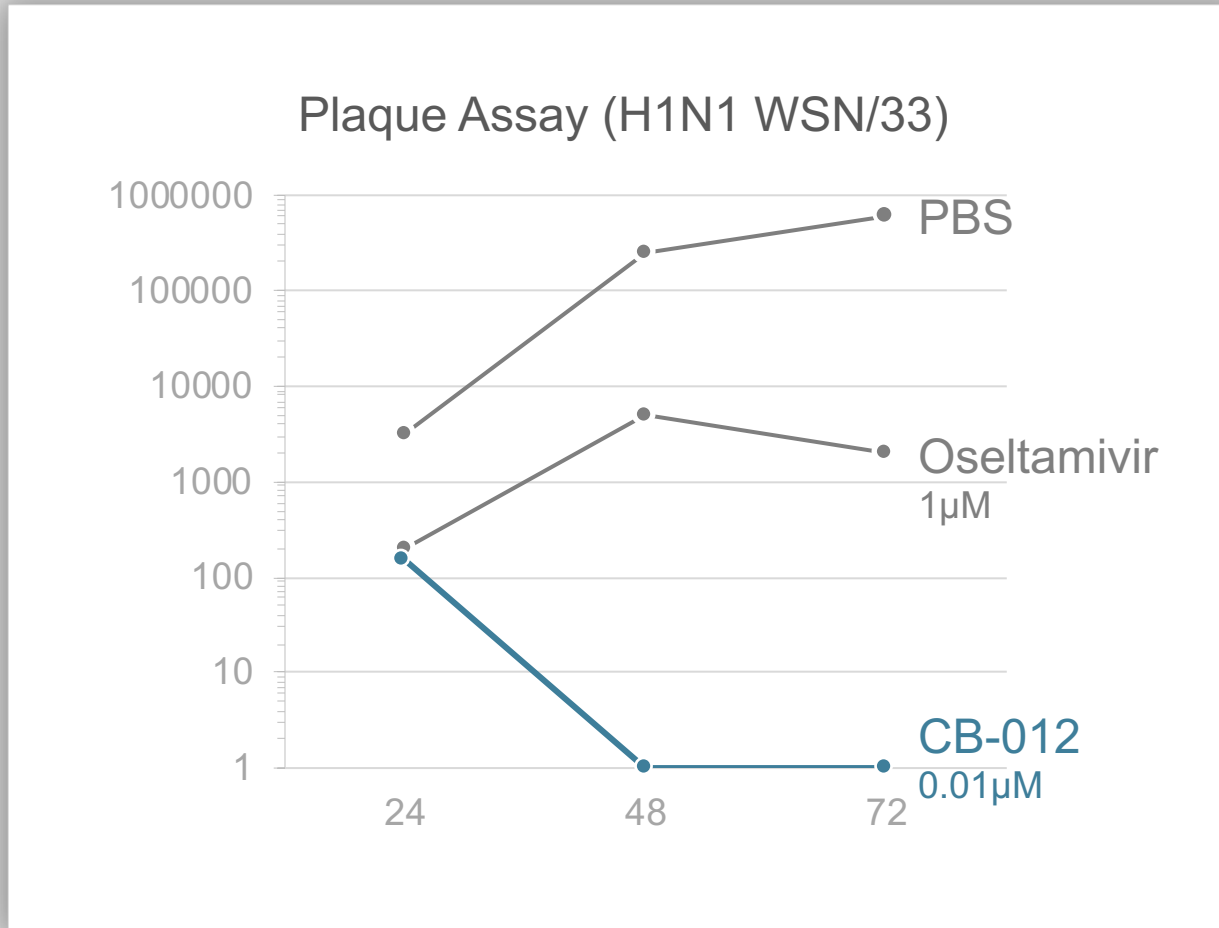


Cloudbreak AVCs combine the power of small molecules (SMs) and monoclonal antibodies

- High potency SMs
- Extended half-life
- Broad spectrum (influenza A&B)
- Combining multiple MOAs

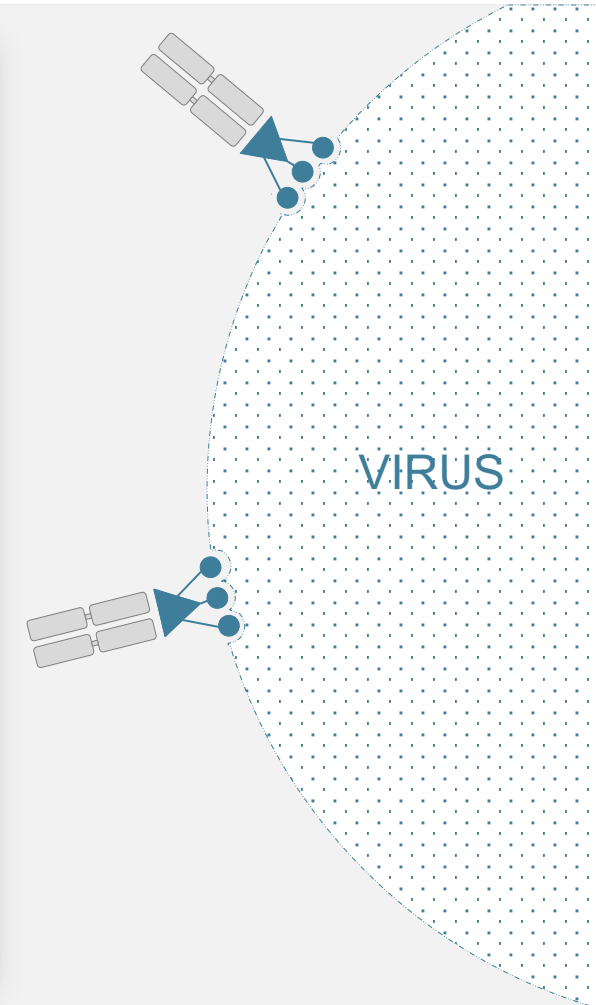
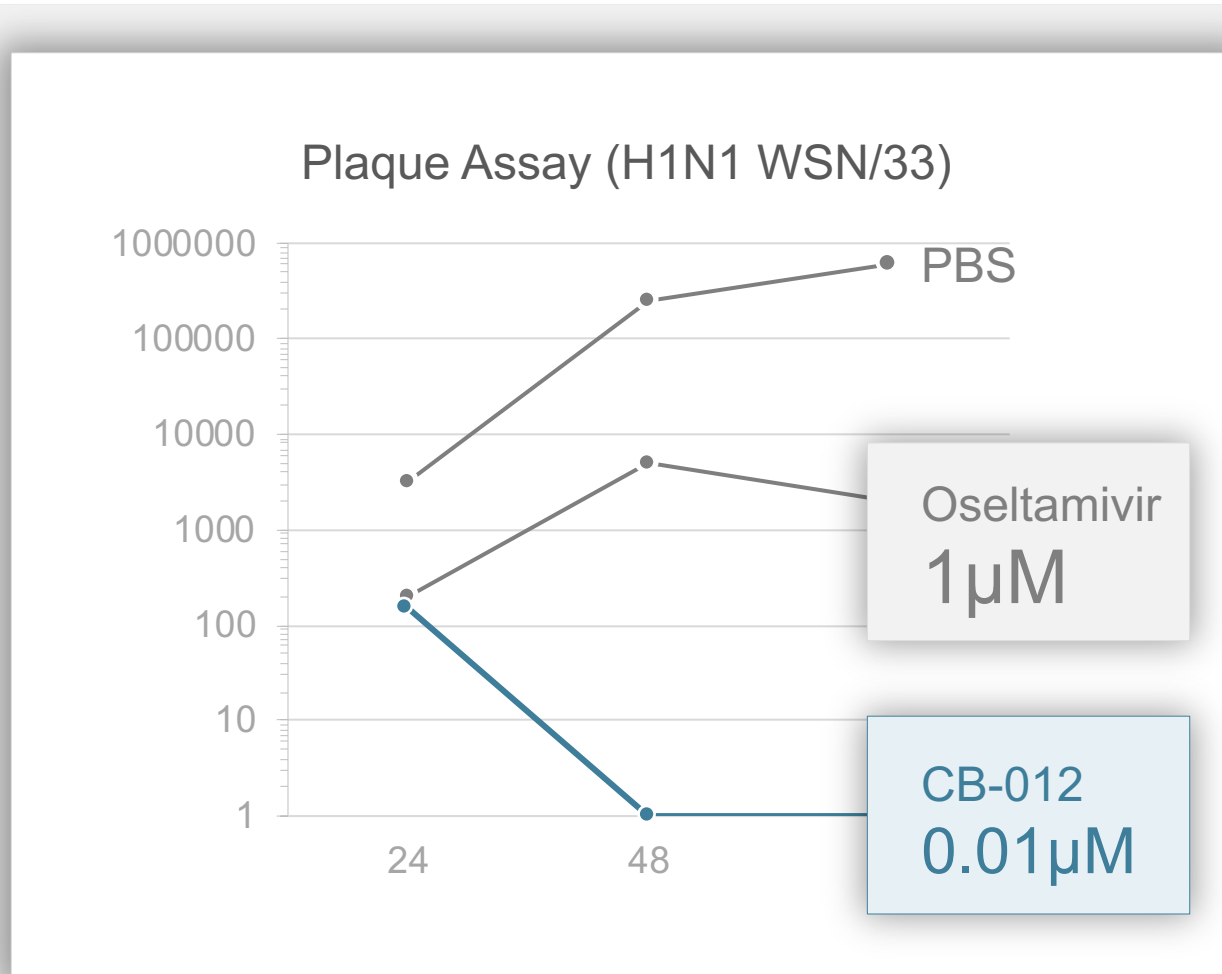


Cloudbreak AVCs are highly potent *in vitro*



Cloudbreak AVCs are highly potent *in vitro*

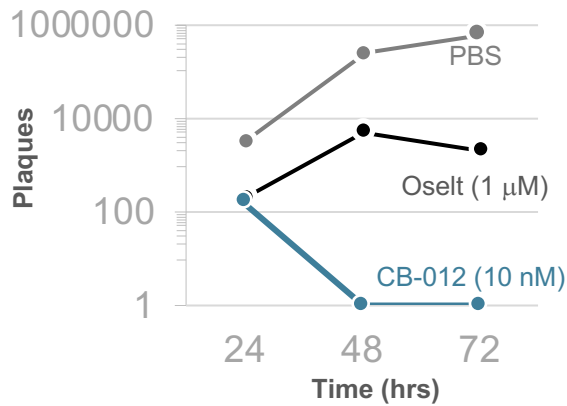
3,000-fold greater reduction in viral replication at 1/100 the concentration of oseltamivir



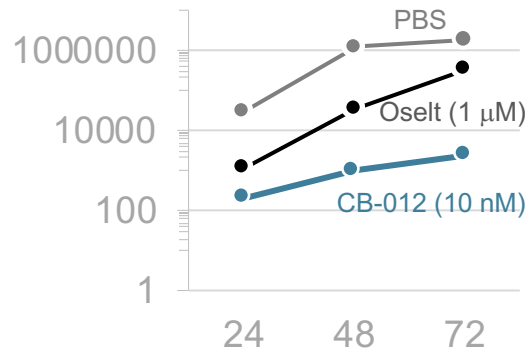
CB-012 outperforms oseltamivir *in vitro*

Plaque reduction in infected A549 cells

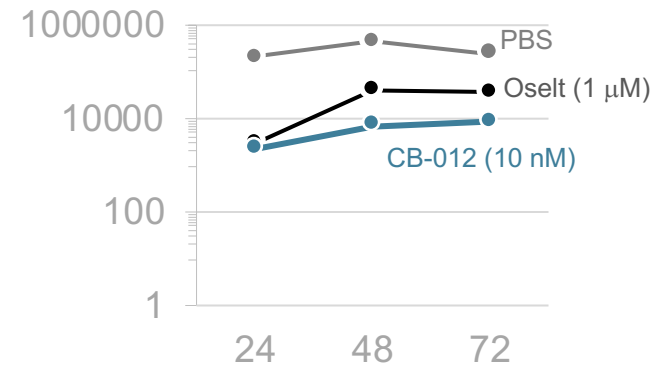
H1N1 (A/WSN/33)



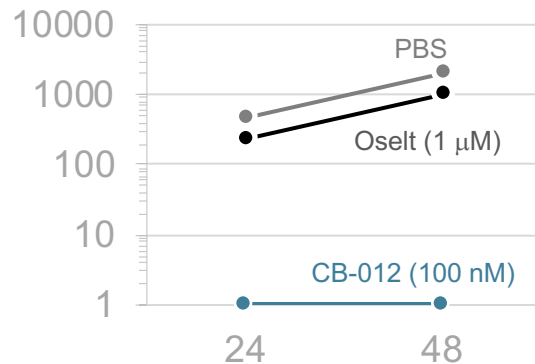
H1N1 (A/09/pandemic)



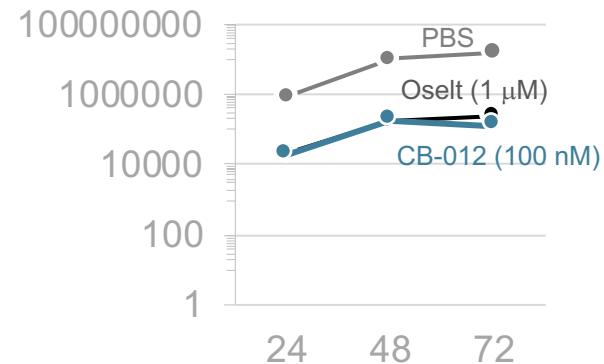
H3N2 (A/Wyoming)



B (Lee/40/Victoria)



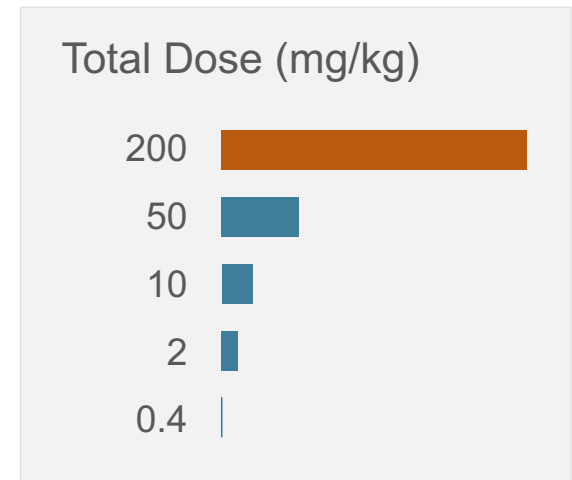
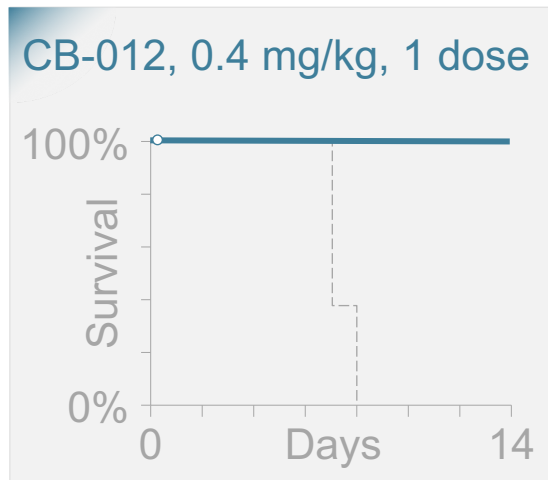
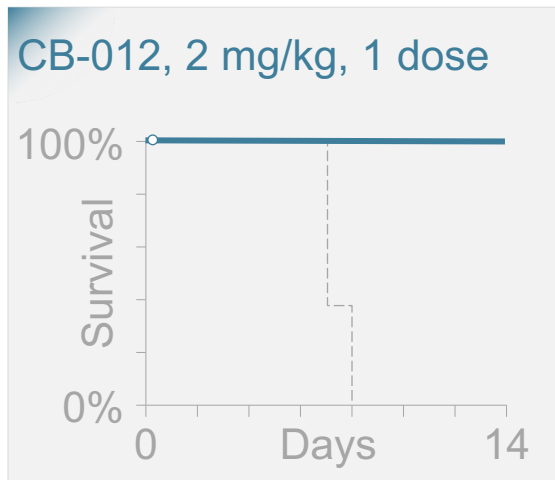
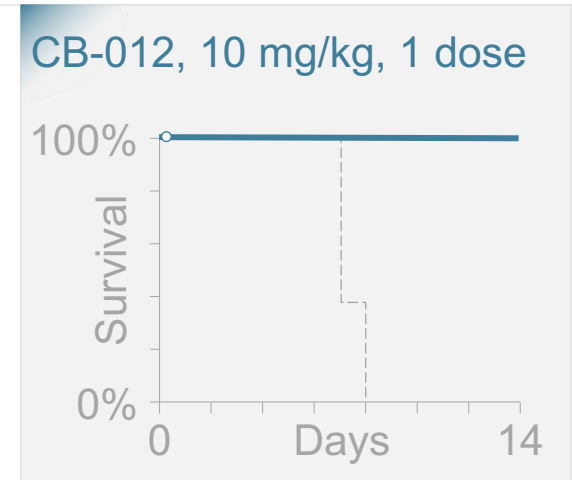
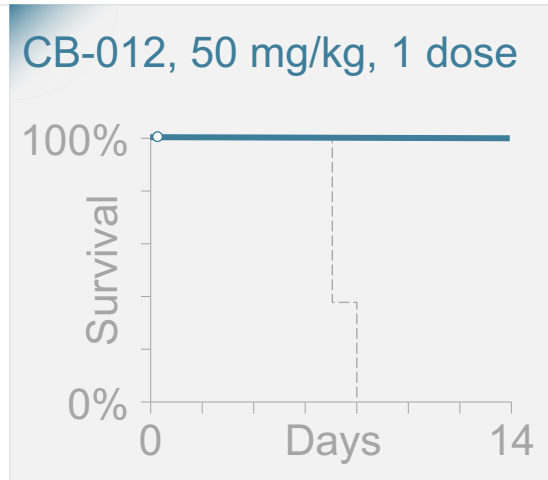
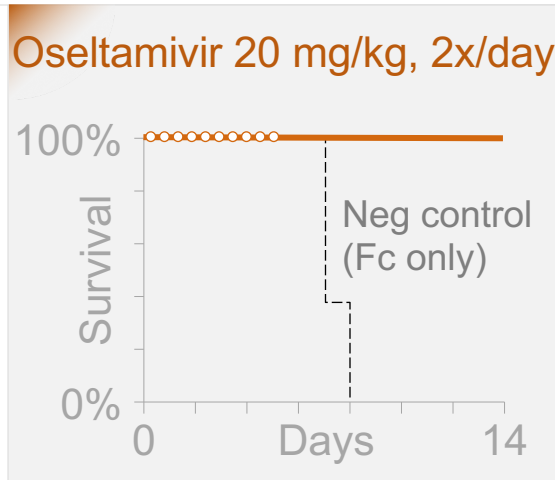
H5N1 (A/Vietnam/04 HALo)



CB-012 has highly potent *in vivo* activity

Lethal influenza model (H1N1: TX/36/91 in mice)

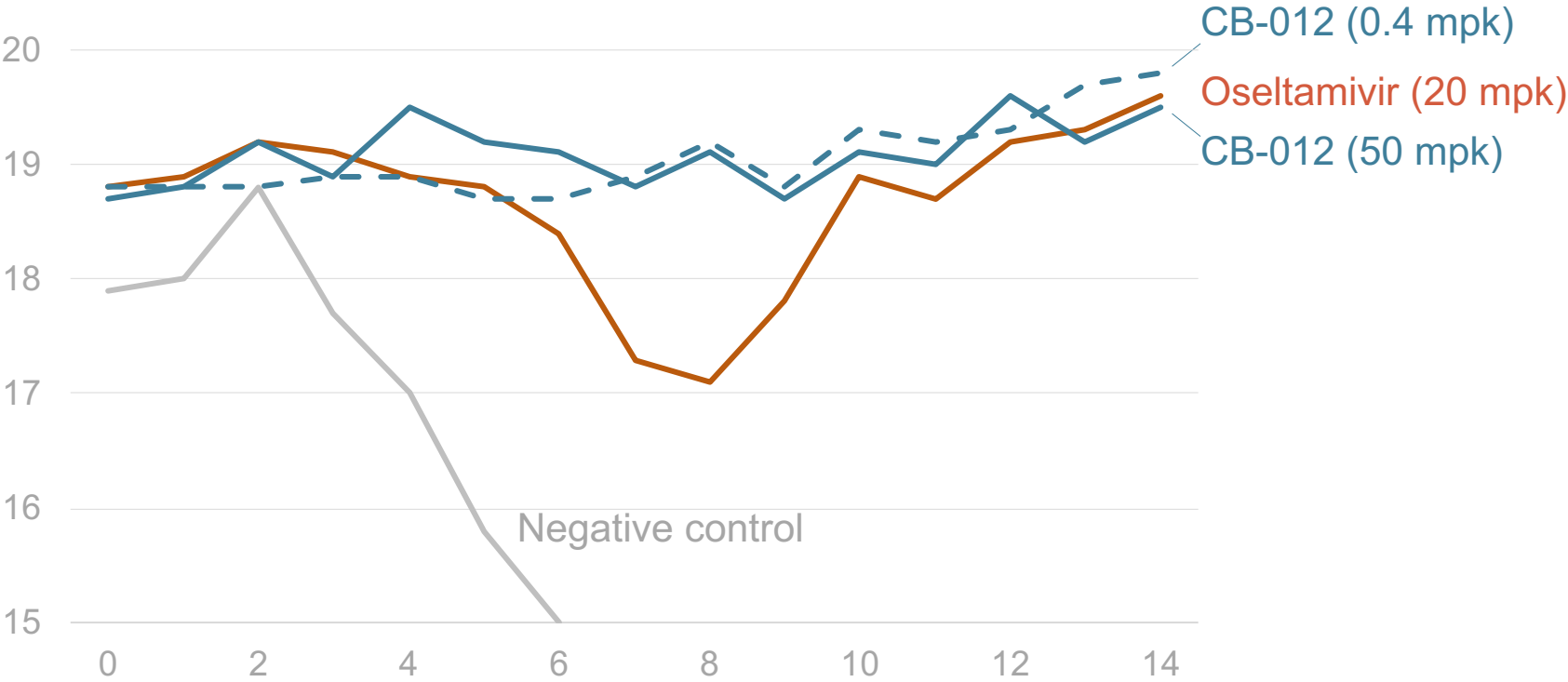
Equivalent protection to oseltamivir at 1/500th the dose



5 mice per cohort CB-012 dosed 4 hours prior to infection, oseltamivir dosed 8 hrs post infection

Body weight data supports robust efficacy & safety

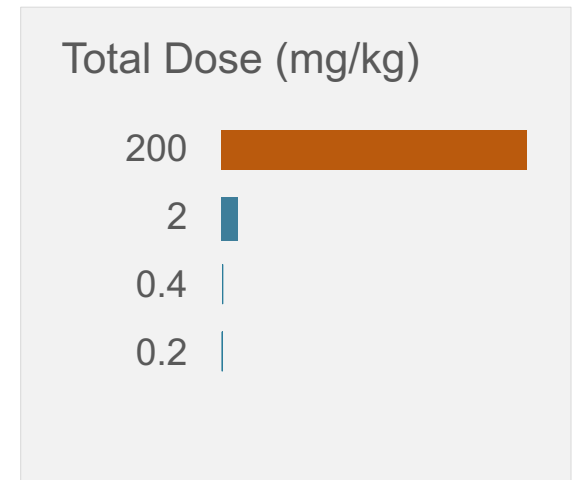
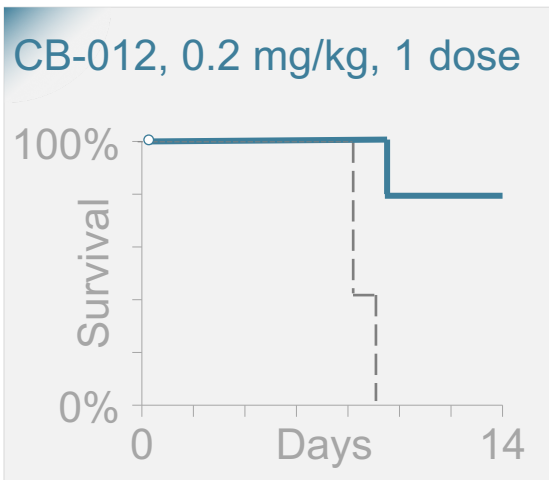
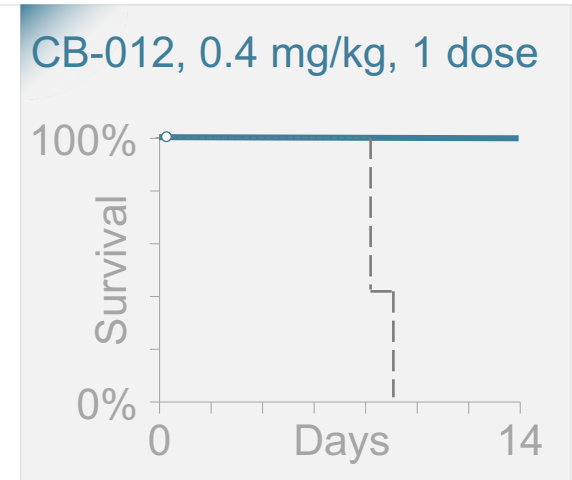
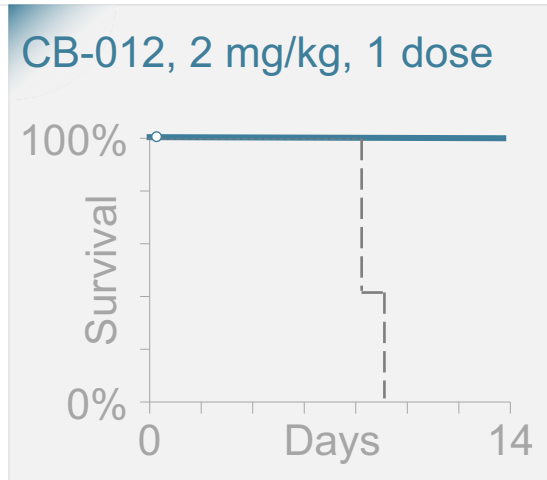
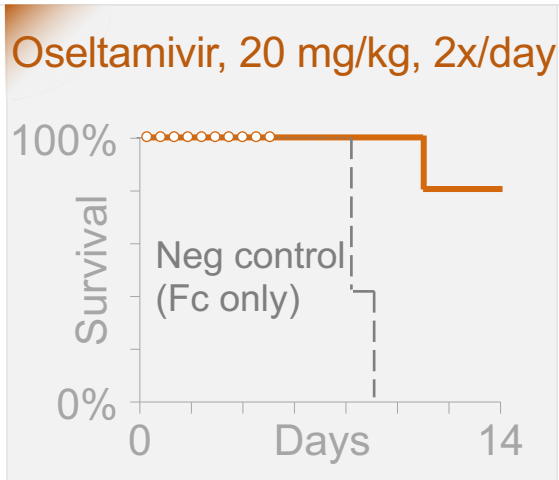
CB-012 Average Body Weights
Influenza A (H1N1; TX/36/91)



CB-012 has highly potent *in vivo* activity

Lethal influenza model (H3N2: HK/1/68 in mice)

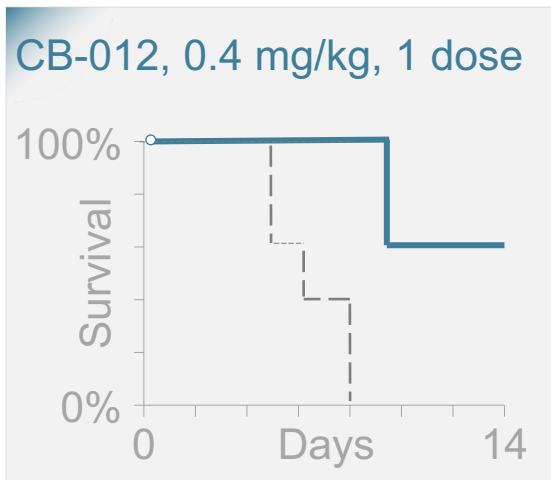
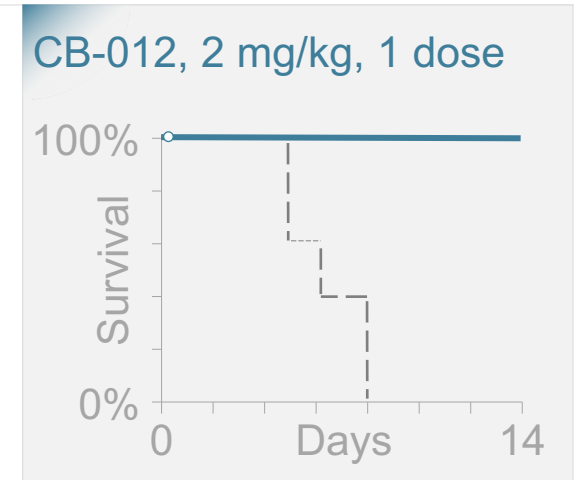
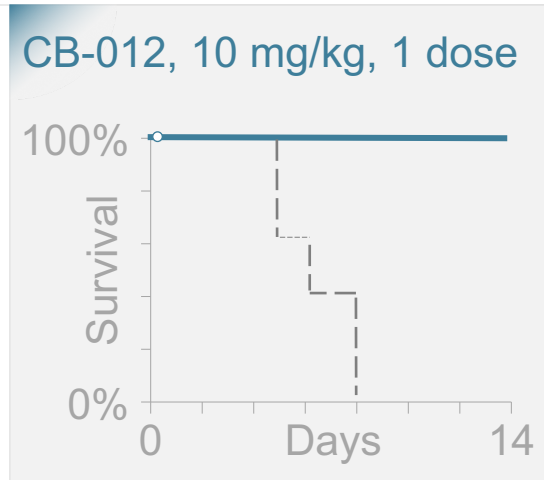
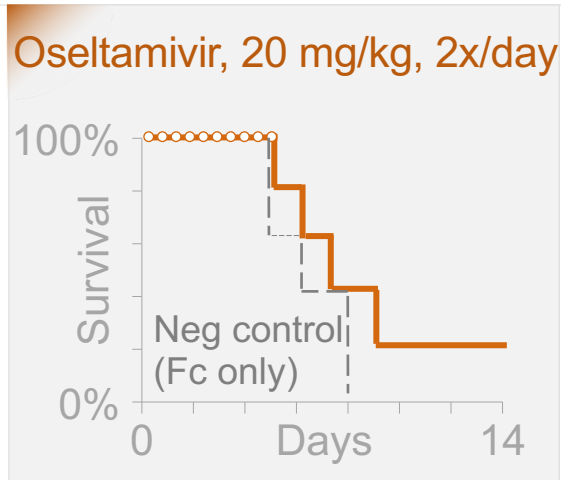
Equivalent protection to oseltamivir at 1/1000th the dose



5 mice per cohort CB-012 dosed 4 hours prior to infection, oseltamivir dosed 8 hrs post infection

CB-012 has potent *in vivo* activity against the dominant oseltamivir^R strain

Lethal influenza model (*H1N1*: A/Perth/261/2009 (H275Y))



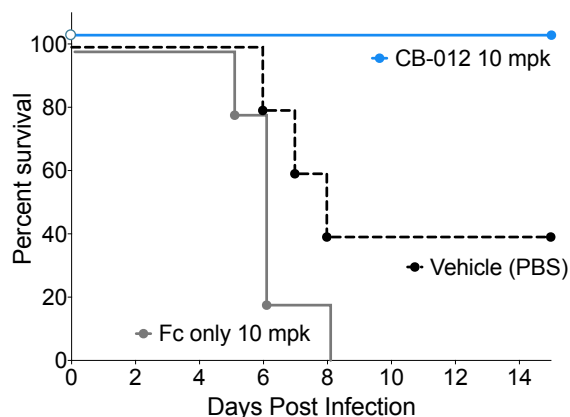
5 mice per cohort CB-012 dosed 4 hours prior to infection, oseltamivir dosed 8 hrs post infection

CB-012 improves treatment window versus oseltamivir

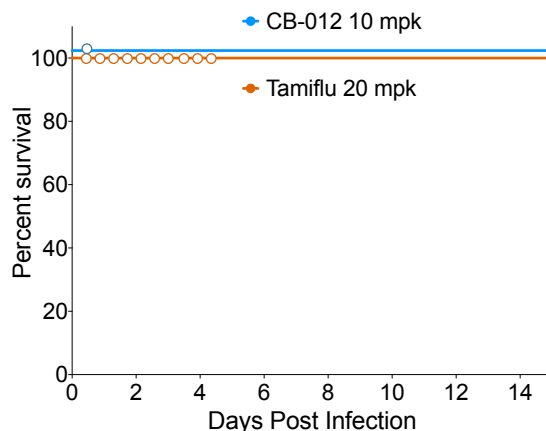
Lethal influenza model (H1N1: TX/36/91 in mice)

Single dose of CB-012 improves treatment window vs 10 doses (BID) of oseltamivir

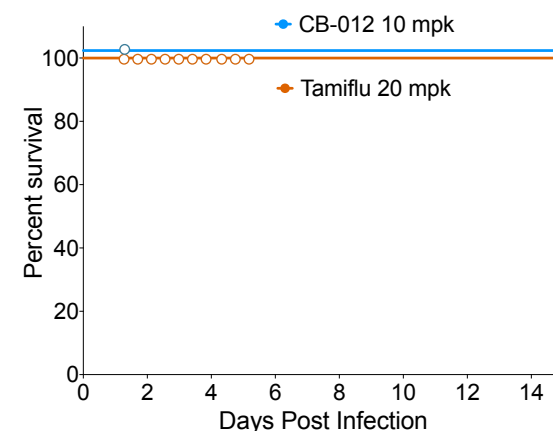
Controls (dosed 4 hrs prior to infection)



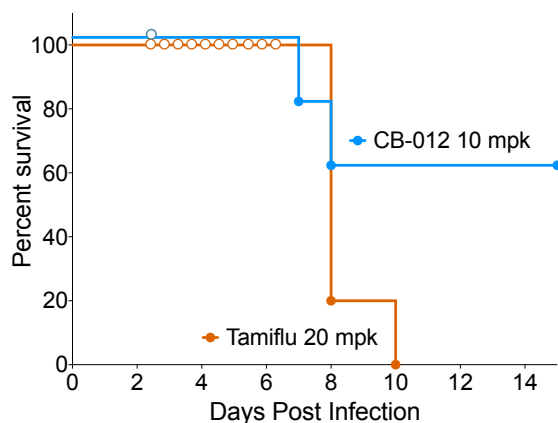
Dosed 8 hrs post infection



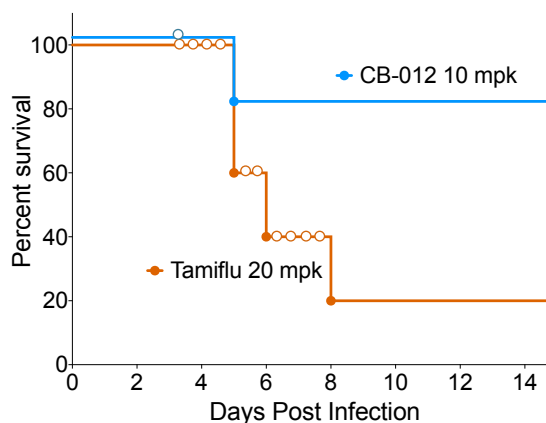
Dosed 24 hrs post infection



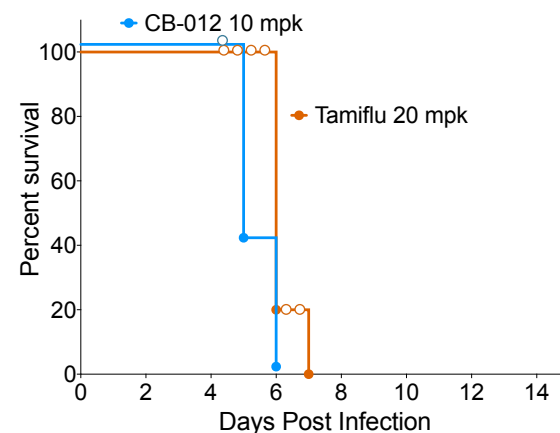
Dosed 48 hrs post infection



Dosed 72 hrs post infection



Dosed 96 hrs post infection

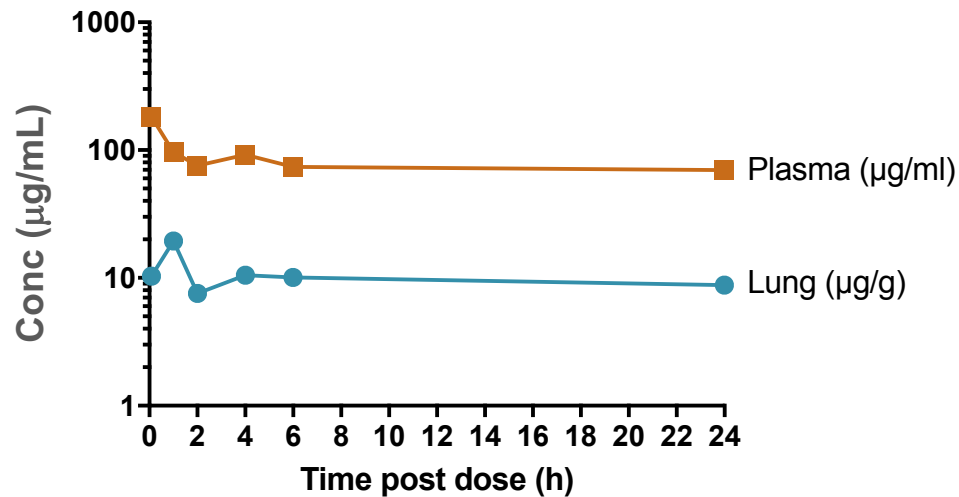


5 mice per cohort oseltamivir dosed BID for 5 days in each cohort

CB-012 rapidly distributes to lung, supporting treatment applications

10 mg/kg IV dose, evaluation of levels in whole lung

CB-012 plasma and lung levels

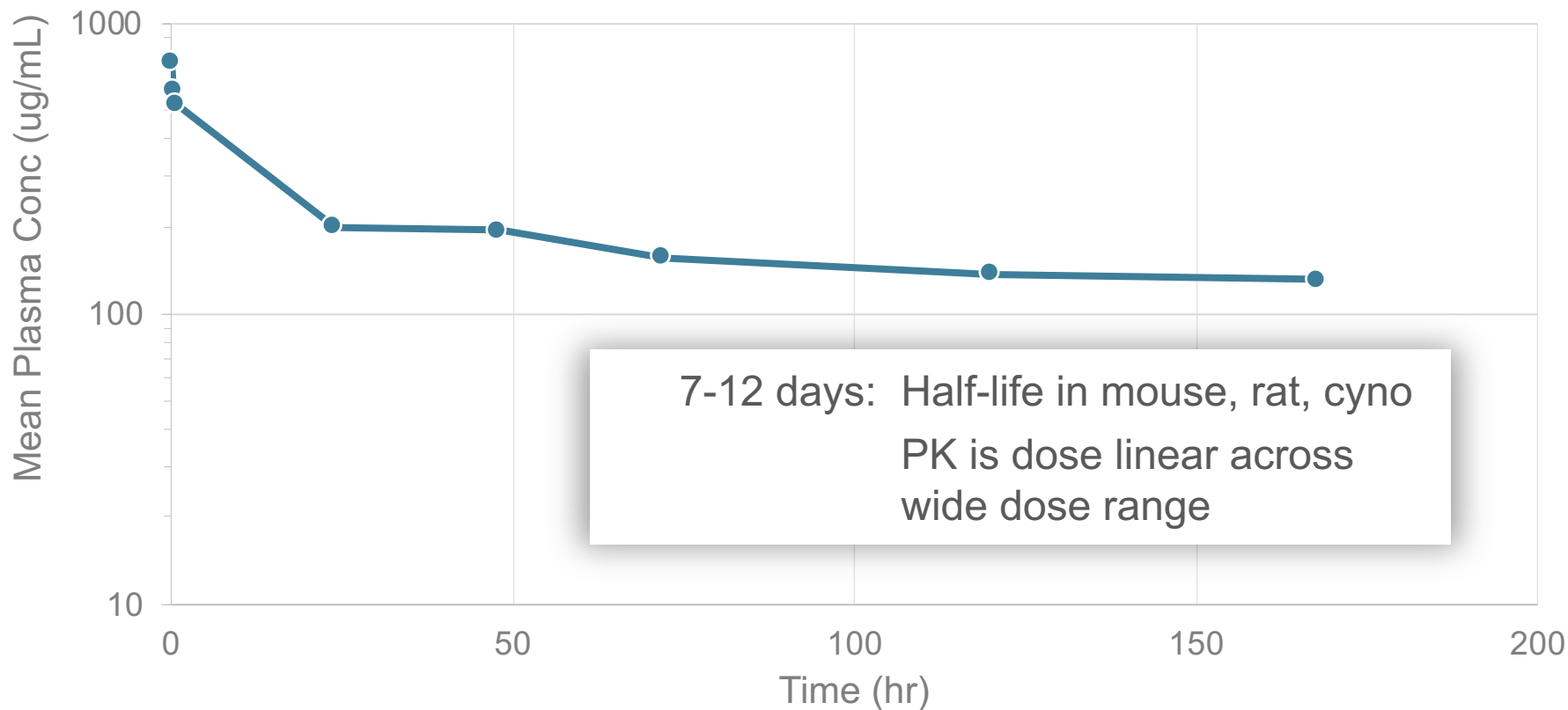


Reaches C_{max} in lung by 1 hr

Lung levels track with plasma levels at ~10% relative to plasma

CB-012 demonstrates extended half-life

Mouse PK 50 mg/kg IV injection

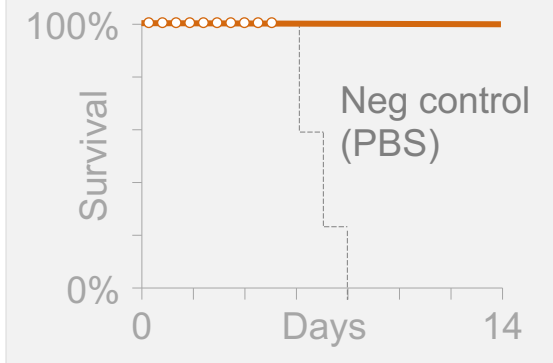


Extended half-life translates to long duration of action

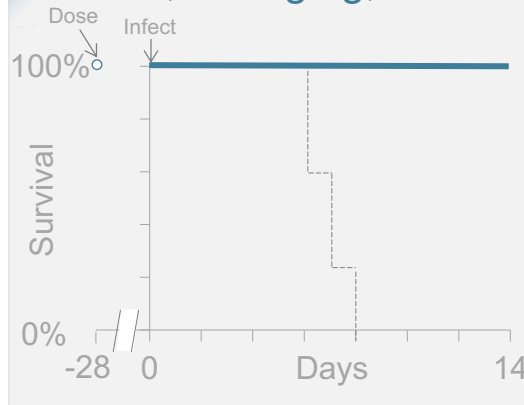
Lethal influenza model (*H1N1: TX/36/91* in mice)

CB-012 dosed once 28 days prior to viral challenge

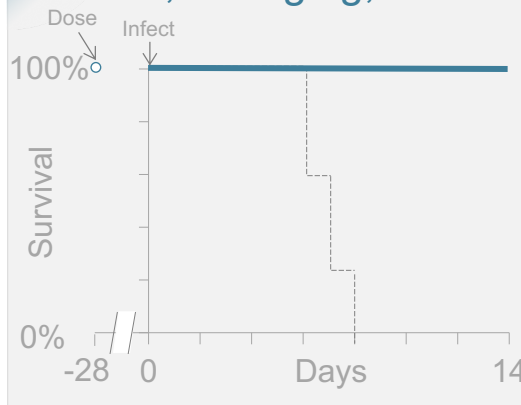
Oseltamivir 20 mg/kg, 2x/day starting 8 hrs post infection



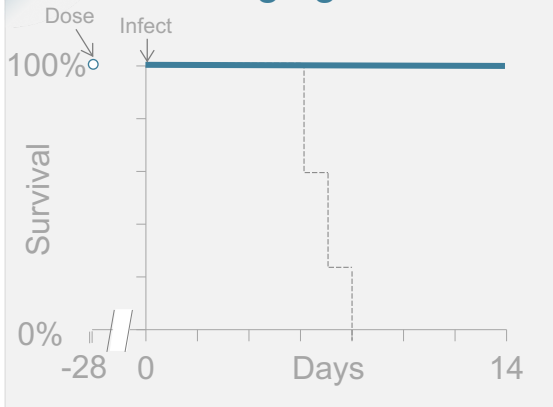
CB-012, 50 mg/kg, 1 dose



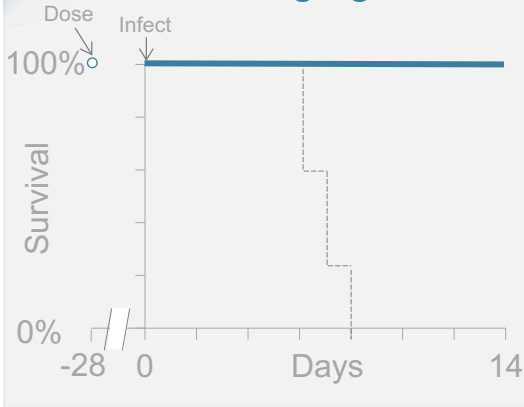
CB-012, 10 mg/kg, 1 dose



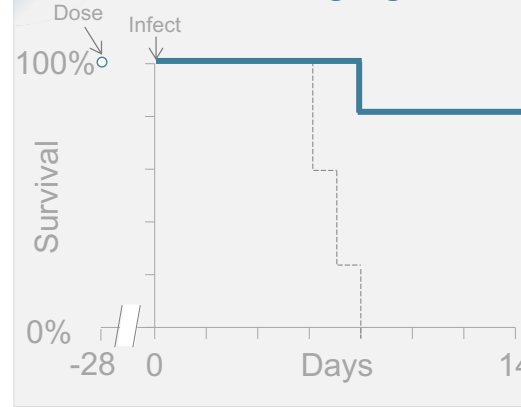
CB-012, 5 mg/kg, 1 dose



CB-012, 2.5 mg/kg, 1 dose



CB-012, 1.25 mg/kg, 1 dose



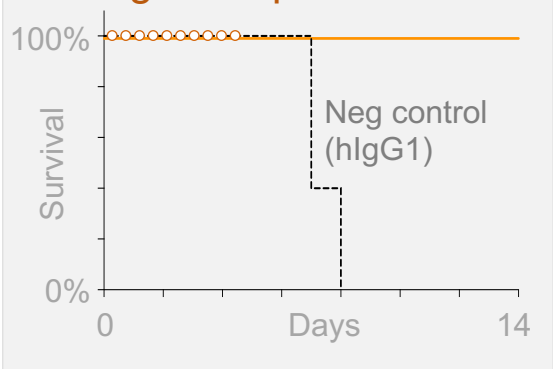
5 mice per cohort

Efficacy is observed using multiple dosing routes

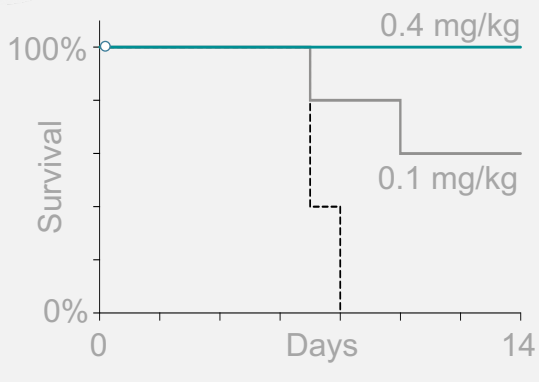
Lethal influenza model (H1N1: TX/36/91 in mice)

CB-012 dosed once 4 hours prior to viral challenge

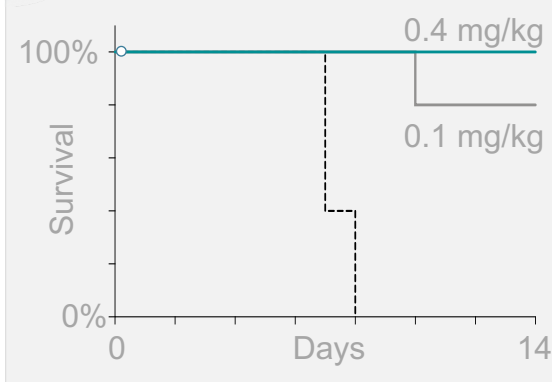
Osetamivir 20 mg/kg, 2x/day starting 8 hrs post infection



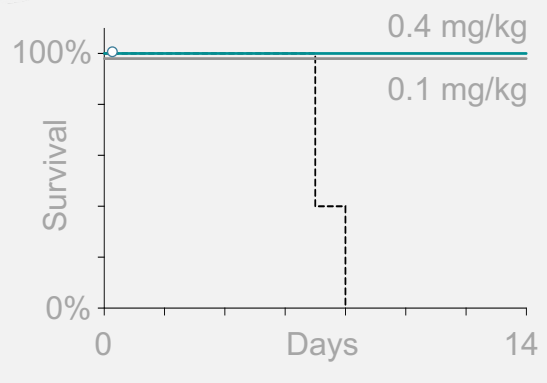
CB-012, 1 dose, IV



CB-012, 1 dose, IM



CB-012, 1 dose, SC

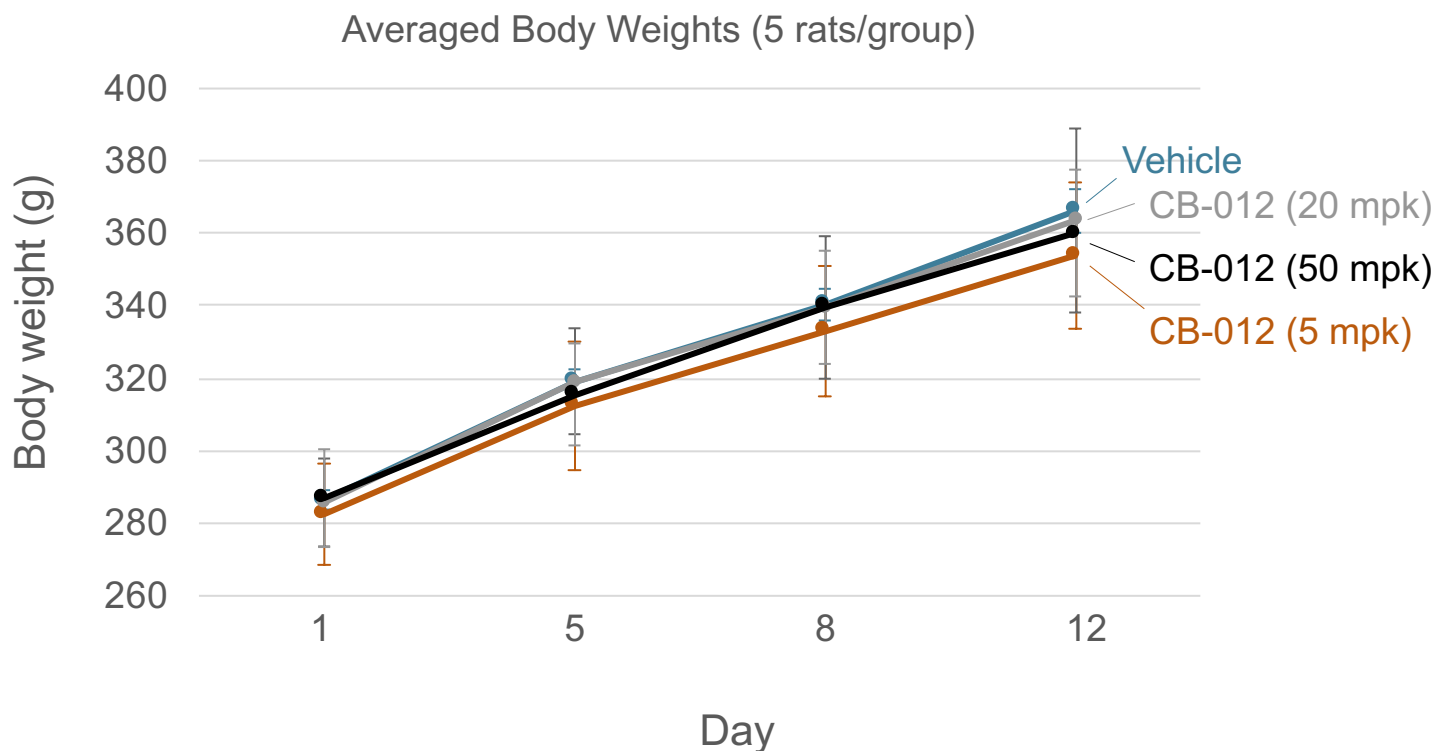


5 mice per cohort

Preclinical safety results consistent with a high therapeutic index

CB-012 14-day, dose-range finder toxicity study in rat

- Compounds dosed twice - day 0 & day 7
- 5, 20 and 50 mpk doses tested (IV)
- No significant effects on body weight gain, organ weights or food consumption at any dose



Preclinical safety results consistent with a high therapeutic index

Summary: CB-012 14-day, dose-range finder toxicity study in rat

- TK: Plasma exposures/AUC increase proportionally with dose, and PK scales from mouse to rat to cyno approximately by BW
- Exposure margins >15X - based on 28 day mouse prophylaxis model

| Parameter | Findings at highest dose (50 mpk) vs vehicle |
|-----------------------|--|
| Clinical observations | No findings |
| Hematology | No change from vehicle |
| Clinical Chemistry | No change from vehicle |
| Coagulation | No change from vehicle |
| Urinalysis | No change from vehicle |
| Histopathology | No observations |

14-day dose-range finder toxicity study in cyno complete

Cloudbreak AVCs are being advanced to IND-enabling studies

CB-012 has demonstrated robust proof of concept

- Superior *in vitro* activity vs standard of care antivirals & coverage of Inf A and Inf B strains
- Activity with single, low doses in efficacy models vs multiple strains
- Efficacy via IV, SC and IM dosing
- 28-day protection with a single 2.5 mg/kg dose in mice
- Expanded treatment window in mice vs oseltamivir
- Exposure margins (rat) >15X - based on 28-day mouse prophylaxis model

Optimized molecules are being advanced

- 1-2 log improvements in *in vitro* potency (CB-038)
- Fc engineering underway to extend half-life
- **Goal:** Extend protection to entire flu season with a single dose

Cytopathic Effect based microneutralization assay (H1N1 CA/09) in MDCK cells

| Molecule | EC ₅₀ (nM) |
|-------------|-----------------------|
| Oseltamivir | 390 |
| CB-012 | 4.0 |
| CB-038 | 0.6 |

Acknowledgements

Cidara Research Team

Allen Borchardt

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Jeff Locke

Amanda Almaguer

Joanna Donatelli

James Levin

Karin Amundson

Grayson Hough

Voon Ong

Suzanne Akers-Rodriguez

Joanne Fortier

Makia Nakamura

Dan Bensen

Jim Balkovec

Sanford Burnham

Sumit Chanda

Paul De Jesus

Laura Martin-Sancho





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