Transdermal Cannabidiol (CBD) Gel for the Treatment of Fragile X Syndrome (FXS)

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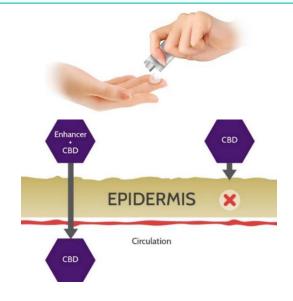


ZYN002: Cannabidiol (CBD) Gel

First and only patent-protected permeation-enhanced pharmaceutically-produced cannabidiol (CBD) gel formulated for transdermal delivery

CBD binds to multiple receptors and may mediate a number of pathways, including the endocannabinoid pathway

Patented formulation increases the delivery of CBD through the layers of the epidermis and into the circulatory system





Fragile X Syndrome (FXS) and the Endocannabinoid System

- The Endocannabinoid system
 - Cannabinoid receptors (G protein-coupled receptors)
 - Endogenous cannabinoid receptor ligands
- Dysregulation of the endocannabinoid system appears central to the behavioral phenotype seen in FXS¹
- CBD has been shown to increase levels of:
 - 2-Arachidonoylglycerol (2-AG)²
 - Anandamide (AEA)³
- Independent of the above associations, CBD has consistently been demonstrated as an anxiolytic⁴



Fragile X Syndrome Open-Label Phase 2 Objectives and Efficacy Measures

Objectives

- Primary: To evaluate the safety and tolerability of ZYN002 in children and adolescents with FXS
- Secondary: To evaluate the efficacy of ZYN002 in the treatment of symptoms of FXS

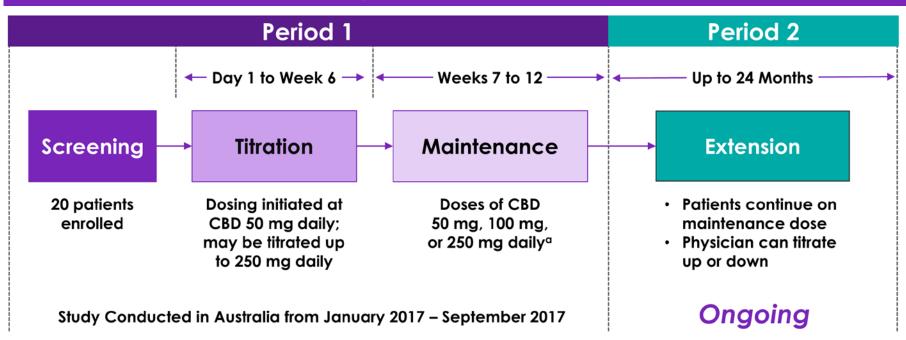
Efficacy Measures

- Anxiety, Depression, and Mood Scale (ADAMS)
- Aberrant Behavior Checklist (ABC-C_{FXS})
- Clinical Global Impression Scale Improvement (CGI-I)
- Pediatric Anxiety Rating Scale Revised (PARS-R)
- Pediatric Quality of Life Inventory (PedsQL)
- Visual Analogue Scales (VAS)
- Vineland Adaptive Behavior Scale 3rd edition (VABS-III)



Fragile X Syndrome Open-Label Phase 2 Trial Design

Treatment of Fragile X Syndrome Anxiety and Behavioral Challenges with CBD (FAB-C)





FAB-C Key Inclusion/Exclusion Criteria

Key Inclusion

- Molecular documentation of full mutation of FMR1 gene
- PARS-R score ≥ 11
- CGI-S score ≥ 3

Key Exclusion

- Any progressive neurological disorder other than FXS
- Use of more than one anti-psychotic and one anxiolytic medication
- Exposure to cannabidiol (CBD) or delta-9-tetrahydrocannabinol
 (THC) in the four weeks prior to Screening

FAB-C Demographics

Females, n (%)	5 (25)
Males, n (%)	15 (75)
Age (median [range]), years	9 (6-17)
Weight (median [range]), kg	33 (20-93)
BMI (median [range]), kg/m ²	17 (13-35)



FAB-C Week 12 Efficacy Data: ADAMS

Scale: ADAMS	Baseline (n=20)	Week 12 (n=18)	Week 12 % Improvement Group Mean	P-value vs Baseline
Total Score	33.4	18.1	45.8	< 0.0001
General Anxiety	10.0	4.6	54.0	< 0.0001
Social Avoidance	10.2	4.8	52.9	0.0002
Compulsive Behavior	2.8	1.4	50.0	0.0262
Manic/Hyperactive Behavior	9.4	6.1	35.1	0.0003
Depressed Mood	2.8	2.0	28.6	0.1417



FAB-C Week 12 Efficacy Data: ABC-C_{FXS}

Scale: ABC-C _{FXS}	Baseline (n=20)	Week 12 (n=18)	Week 12 % Improvement Group Mean	P-value vs Baseline
Stereotypy	7.9	3.2	59.5	0.0006
Social Avoidance	5.1	2.3	54.9	0.0005
Socially Unresponsive/ Lethargic	8.7	4.1	52.9	0.0034
Inappropriate Speech	6.1	3.5	42.6	0.0018
Irritability	18.2	10.6	41.8	0.0096
Hyperactivity	14.5	9.8	32.4	0.0237



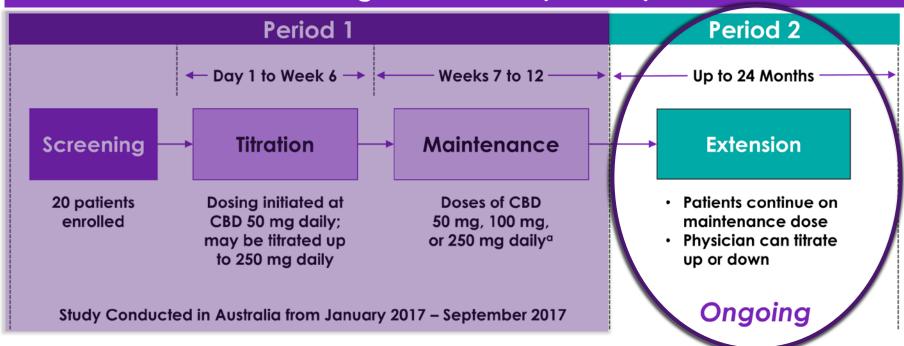
FAB-C Week 12 Efficacy Data: CGI, PARS-R, PedsQL, VAS, and Vineland

Scales	Baseline (n=20)	Week 12 (n=18)	Week 12 % Improvement Group Mean	P-value vs Baseline
CGI Improvement (7-point scale)	n/a	2.5*	n/a	n/a
Pediatric Anxiety Rating Scale – Revised (5-item used for Clinical Trials)	15.6	10.6	32.1	0.0006
Pediatric Quality of Life Inventory: Total	57.3	67.7	18.2	0.0100
VAS Hyperactivity/Impulsivity	6.2	3.6	41.9	0.0002
VAS Tantrum/Mood Lability	5.0	3.2	36.0	0.0023
VAS Anxiety	6.2	3.8	38.7	0.0005
Vineland III: Overall Adaptive Behavior	48.3	48.9	1.2	0.0472



Fragile X Syndrome Open-Label Phase 2 Trial Design

Treatment of Fragile X Syndrome Anxiety and Behavioral Challenges with CBD (FAB-C)



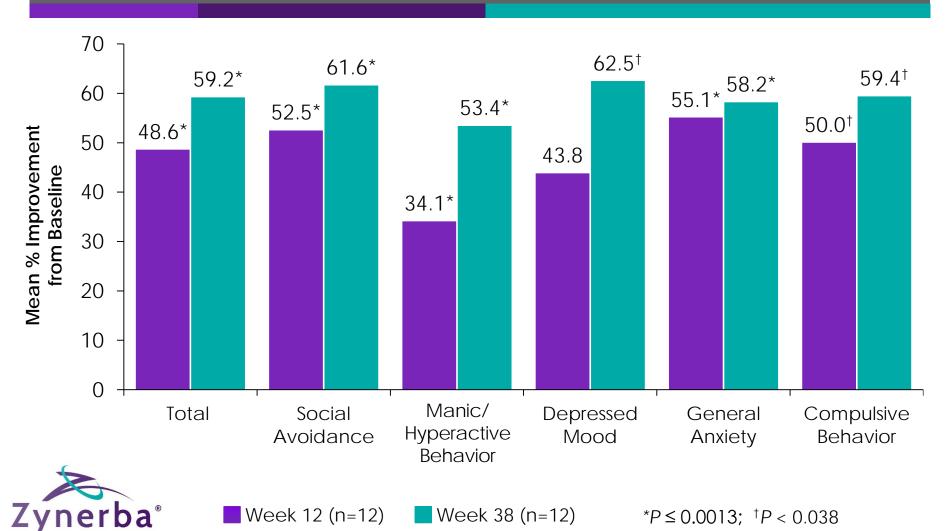


FAB-C Patient Disposition: Week 38 - Extension Phase

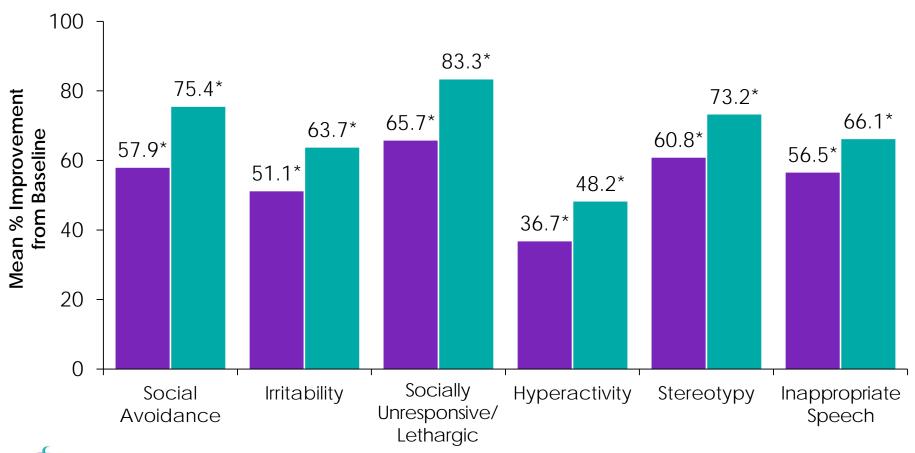
Patients Completing Week 12	18
Patients Continuing into the 24-month Extension	13
Patients at Week 38 (as of June 2018)	12



FAB-C Week 38 - Extension Phase Data: ADAMS Mean Percent Improvement From Baseline



FAB-C Week 38 - Extension Phase Data: ABC-C_{FXS} Percent Improvement from Baseline





FAB-C Treatment-Emergent Adverse Events

- Through Week 38, patients have reported 43 treatmentemergent adverse events (TEAEs)
 - TEAEs were mild or moderate
 - Most were unrelated to treatment with CBD
- Most common TEAEs (all considered not related and resolved during study period):
 - Gastroenteritis (14%)
 - Upper respiratory tract infection (12%)
- One patient, who continues in the trial, developed moderate application site rash – resolved



FAB-C Safety Summary

- Well tolerated, consistent with previously reported clinical data¹
- No SAEs
- No clinically meaningful trends in vital signs, ECG, or clinical safety laboratories, including liver function tests
- No THC was detected in the plasma



FAB-C Safety Summary

- Two sibling patients discontinued within the first 12 weeks of the study
 - One patient for worsening of pre-existing eczema (not considered treatment related)
 - One patient (sibling of the patient with eczema) discontinued due to administrative reasons
- Application site assessment scores showed little to no redness in most patients
 - One patient developed moderate application site rash, which resolved and did not recur
 - Patient remains in the study



FAB-C Conclusions

- Efficacy
 - Improvement in behavioral symptoms across multiple measures
 - Improvement sustained through week 38 of the study
- Safety
 - Well tolerated
 - TEAEs
 - Mild or moderate
 - Most unrelated to treatment with CBD
 - No SAEs



CONNECT-FX Study Initiated July 2018

Double-blind, placebo-controlled trial initiated

- Approximately 200 patients age 3-17 years
- Approximately 20 sites
 - USA
 - Australia
 - New Zealand
- Efficacy endpoints
 - ABC-C_{FXS}
 - CGI-Improvement, Severity

