# ZYN002 Cannabidiol Transdermal Gel in Children and Adolescents With Fragile X Syndrome: Role of Methylation Status as a Correlate to Disease Severity and as a Prognostic Biomarker

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# **BACKGROUND**

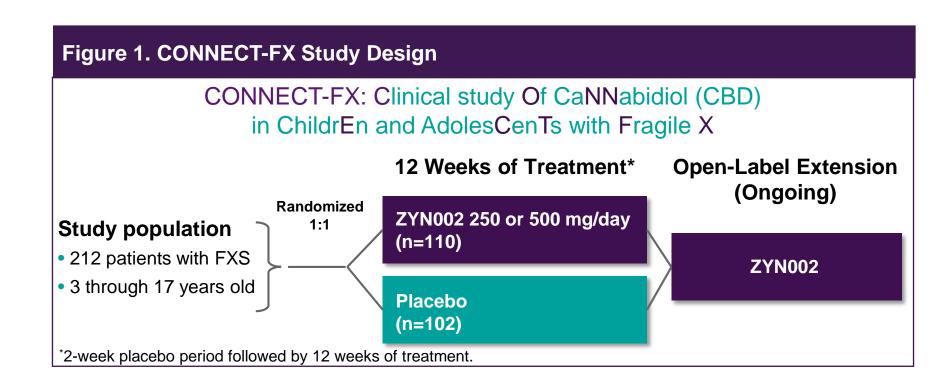
- ZYN002 is a pharmaceutically manufactured transdermal cannabidiol (CDB) gel in development for the treatment of behavioral symptoms in Fragile X syndrome (FXS)
- CONNECT-FX is a randomized, double-blind, multinational, 14-week pivotal study to evaluate the efficacy and safety of ZYN002 in children/adolescents aged 3 through 17 years with a full *FMR1* gene mutation (**Figure 1**)
  - ZYN002 did not statistically significantly separate from placebo on the primary or key secondary endpoints in the full analysis set
- Building on current scientific evidence, a pre-planned ad hoc analysis of patients having at least 90% methylation ("full methylation" or FMet) of the impacted FMR1 gene<sup>a</sup> was performed
  - The results suggest that ZYN002 may have benefit in patients with full methylation of the FMR1 gene

# **OBJECTIVE**

• To describe the results of the CONNECT-FX (ZYN2-CL-016) study in children/adolescents with FXS with full methylation of their *FMR1* gene

# **METHODS**

- Patients were randomized to 12-weeks of ZYN002 (250 mg or 500 mg daily [weight-based]) or placebo, as add-on to standard of care
- The primary endpoint was change in the Social Avoidance subscale of the Aberrant Behavior Checklist–Community FXS (ABC–C<sub>FXS</sub>)
- Key secondary endpoints
  - Change from baseline to end of the treatment in
    - ABC-C<sub>FXS</sub> Irritability subscale score
  - ABC-C<sub>FXS</sub> Socially Unresponsive/Lethargic subscale score
  - Improvement in Clinical Global Impression (CGI-I) at end of treatment, anchored to FXS behaviors
- Safety assessments included adverse events, laboratory tests, and electrocardiograms in the full study population
- Efficacy results are reported for the FMet group



### RESULTS

#### **BASELINE DEMOGRAPHICS**

- The FMet group represented 80% of the total study population
- Baseline characteristics of the FMet group are shown in **Table 1**

| Table 1. Baseline Demographics, FMet Group |             |            |             |  |  |  |  |  |  |
|--|-------------|------------|-------------|--|--|--|--|--|--|
|  | Placebo     | ZYN002     | Total       |  |  |  |  |  |  |
| n  | 77          | 92         | 169         |  |  |  |  |  |  |
| Age (years)                                | 9.6         | 9.2        | 9.4         |  |  |  |  |  |  |
| Sex – Males                                | 54 (70%)    | 65 (71%)   | 119 (70%)   |  |  |  |  |  |  |
| Weight (kg)                                |             |            |             |  |  |  |  |  |  |
| Median                                     | 33.9        | 35.7       | 35.0        |  |  |  |  |  |  |
| Range (Min, Max)                           | 15.6, 104.7 | 14.6, 87.0 | 14.6, 104.7 |  |  |  |  |  |  |
| >35 kg, %                                  | 46%         | 53%        | 50%         |  |  |  |  |  |  |
| Baseline psychoactive medications,* %      | 65%         | 54%        | 59%         |  |  |  |  |  |  |

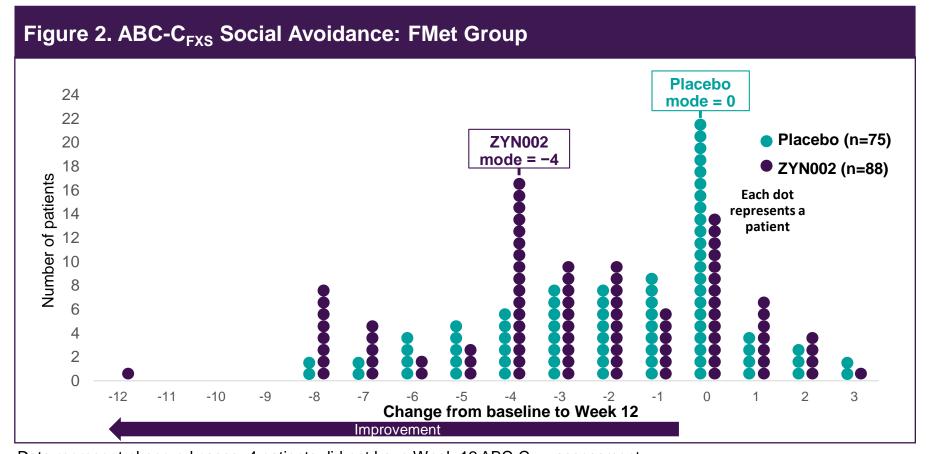
\*Did not include sleep medications.

#### **EFFICACY RESULTS**

The FMet group achieved statistically significant improvement in the primary endpoint of ABC-C<sub>FXS</sub> Social Avoidance at Week 12 (*P*=0.020, Table 2 and Figure 2)

| Table 2. (             | Table 2. CONNECT-FX Results: FMet Group |                       |                      |  |                       |                      |  |  |        |  |  |  |
|------------------------|---|-----------------------|----------------------|--|-----------------------|----------------------|--|--|--------|--|--|--|
|                        |   | Placebo<br>N=76       |                      | ZYN002<br>N=91                         |                       |                      |  |  |        |  |  |  |
|                        | Endpoints                               | Baseline<br>Mean (SE) | Week 12<br>Mean (SE) | Week 12<br>Median<br>Percent<br>Change | Baseline<br>Mean (SE) | Week 12<br>Mean (SE) | Week 12<br>Median<br>Percent<br>Change | Treatment<br>Difference /<br>Odds Ratio <sup>†</sup> |        |  |  |  |
| Primary<br>Endpoint    | Social<br>Avoidance                     | 7.18<br>(0.32)        | 5.41<br>(0.42)       | -21.1                                  | 7.12<br>(0.29)        | 4.32<br>(0.33)       | -40.0                                  | -1.00  | 0.020* |  |  |  |
|                        | Irritability                            | 28.0<br>(1.56)        | 24.11<br>(1.56)      | -11.6                                  | 29.36<br>(1.37)       | 22.69<br>(1.42)      | -24.3                                  | -2.30  | 0.091  |  |  |  |
| Secondary<br>Endpoints | Socially<br>Unresponsive<br>/Lethargic  | 13.17<br>(0.85)       | 10.29<br>(0.80)      | -20.5                                  | 13.30<br>(0.68)       | 9.03<br>(0.67)       | -30.8                                  | -1.17  | 0.135  |  |  |  |
|                        | CGI-I                                   | -                     | 35.7%                |  | -                     | 51.1%                |  | 1.88 <sup>†</sup>                                    | 0.056  |  |  |  |

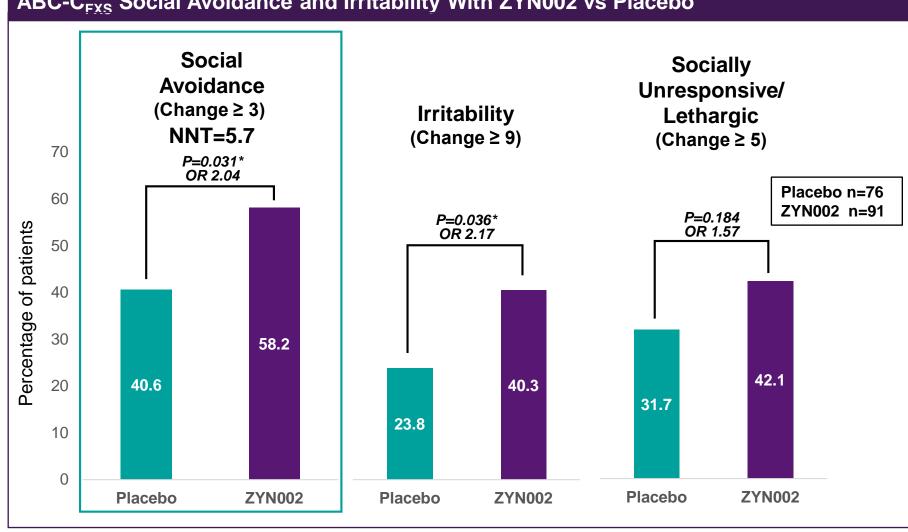
\*Statistically significant.



Data represent observed cases: 4 patients did not have Week-12 ABC- $C_{\text{FXS}}$  assessment.

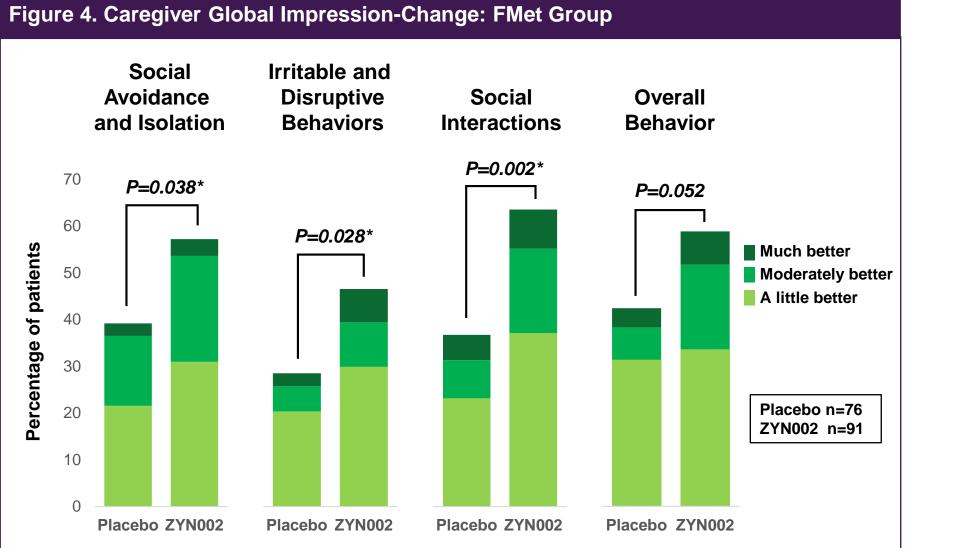
- Clinically meaningful within-subject change was determined by psychometric analyses
- Significantly more ZYN002-treated FMet patients had a meaningful change in ABC-C<sub>FXS</sub> subscales for Social Avoidance and Irritability (P=0.031 and P=0.036, respectively) (Figure 3)
- The number needed to treat (NNT) for Social Avoidance was 5.7 (Cohen's d of 0.52)

Figure 3. Greater Percentages of Participants Achieved Meaningful Change in ABC-C<sub>EXS</sub> Social Avoidance and Irritability With ZYN002 vs Placebo



NNT=number needed to treat; OR= odds ratio \*Statistically significant, LS means.

 The FMet group achieved statistically significant improvements in Caregiver Global Impression-Change in Social Avoidance and Isolation, Irritable and Disruptive Behaviors, and Social Interactions (*P*=0.038, *P*=0.028, and *P*=0.002) (**Figure 4**)



\*Statistically significant; P-values indicate "betterment" on ZYN002 vs "betterment" on placebo.

#### SAFETY RESULTS

- ZYN002 was very well tolerated in CONNECT-FX
- There were no serious or severe adverse events reported during the study
- All treatment-emergent adverse events (TEAEs) (any event, whether unrelated or related to study drug) were mild or moderate
- The most common treatment-related TEAE was application site pain (ZYN002: 6.4%; placebo: 1.0%)
- Laboratory values for chemistry and hematology were comparable between the placebo and ZYN002 treatment groups, and there were no clinically relevant abnormalities in either group
- There were no clinically significant changes to liver function tests

# CONCLUSIONS

- To our knowledge, CONNECT-FX is the largest controlled study ever performed in FXS
- ZYN002 was well tolerated
- In the FMet group, ZYN002 was superior to placebo in multiple analyses
  - 1. Statistically significant mean change in Social Avoidance vs placebo
- 2. Proportion of patients attaining threshold of clinically meaningful change in Social Avoidance and Irritability
- 3. Caregiver reported improvements including Social Avoidance, Social Interaction, and Irritable behaviors
- Zynerba will be meeting with the FDA in Q4 2020
- These results may represent an important step forward in biomarkerdriven prediction of response in FXS and neuroscience

# **ACKNOWLEDGEMENTS**

Editorial/medical writing support under the guidance of the authors was provided by *p*-value communications, and was funded by Zynerba Pharmaceuticals, Devon, PA, USA, in accordance with Good Publication Practice (GPP3) guidelines (*Ann Intern Med.* 2015;163:461-464).

Disclosures: TS, DG, N Tich, and JP are employees of Zynerba Pharmaceuticals. TD is a contractor for Zynerba Pharmaceuticals. EBK, CE, RH, N Tartaglia, and JC have received research support from Zynerba Pharmaceuticals. The study was funded by Zynerba Pharmaceuticals.