

# ARE HIF STABILIZERS A VIABLE ALTERNATIVE TO ESAS IN THE MANAGEMENT OF ANEMIA IN CKD? PRO

lain C Macdougall King's College Hospital, London, UK

### DISCLOSURES

- GlaxoSmithKline ASCEND program steering committee member – Consultancy fees
- Vifor Pharma Consultancy fees



### DISCLOSURES

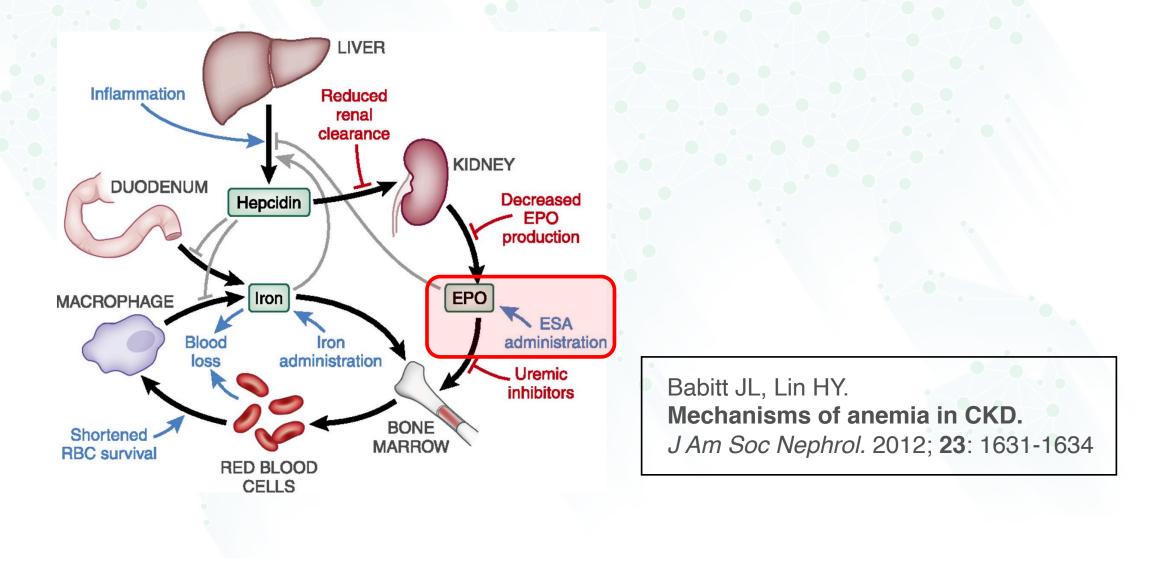
• I am intentionally adopting an extreme position for the purposes of making an interesting debate and do not necessarily fully subscribe to this position myself

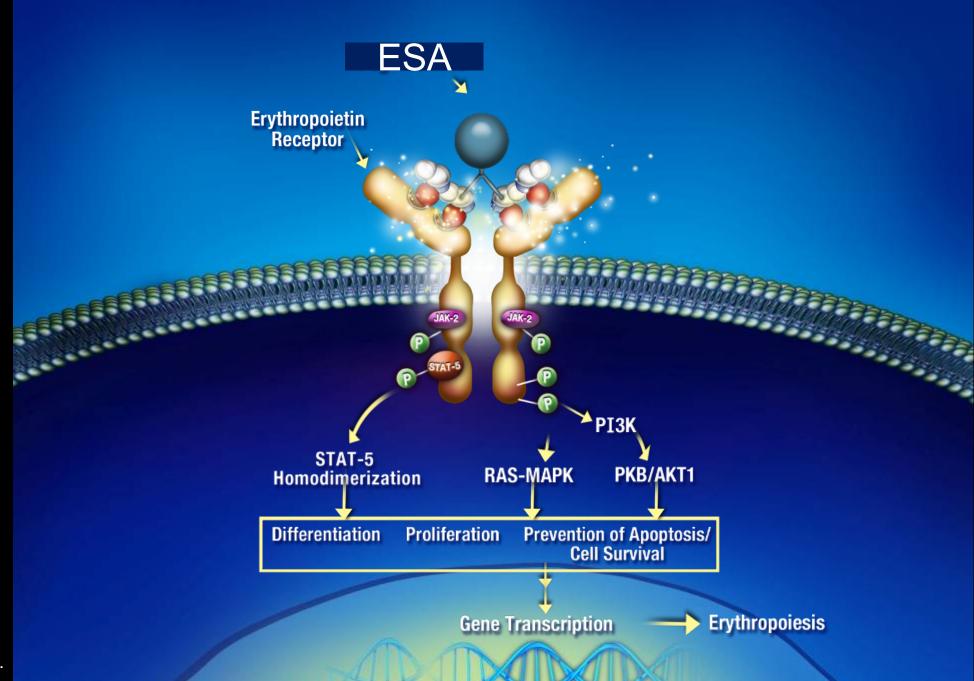


## ARE HIF STABILIZERS A VIABLE ALTERNATIVE TO ESAS IN THE MANAGEMENT OF ANEMIA IN CKD?

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capable of working successfully; feasible. "the proposed investment was economically viable"					

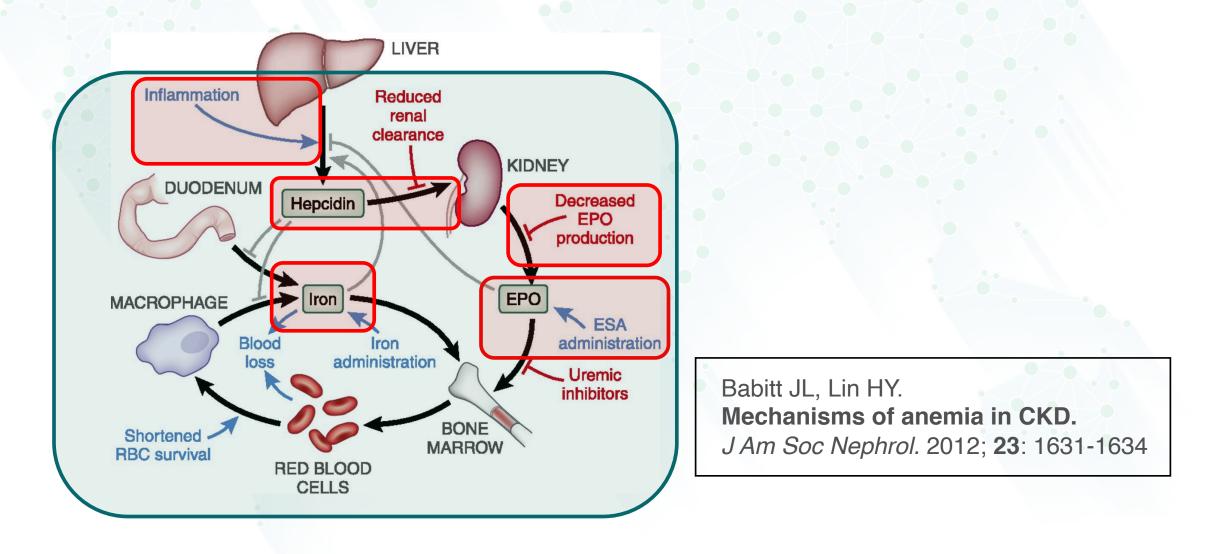
# MECHANISMS OF ANEMIA IN CKD



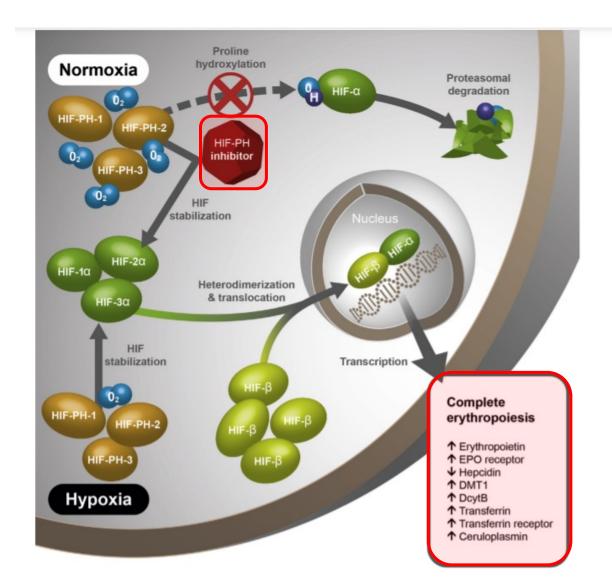


Leu K, et al. ASN 2009. Poster SA-PO2431. Fan Q, et al. *Exp Hematol*. 2006;34:1303-1311.

# MECHANISMS OF ANEMIA IN CKD



# THE ERYTHROPOIETIC RESPONSE IS MEDIATED BY HIF



**Special Report** 

Hypoxia-Inducible Factor Stabilization as an Emerging Therapy for CKD-Related Anemia: Report From a Scientific Workshop Sponsored by the National Kidney Foundation

Jay B. Wish, Kai-Uwe Eckardt, Csaba P. Kovesdy, Steven Fishbane, Bruce S. Spinowitz, and Jeffrey S. Berns

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Wish JB et al. **NKF Scientific Workshop Report on HIF.** *Am J Kidney Dis* 2021 Nov; 78: 709-718.

# LONDON TO BERLIN BY LAND

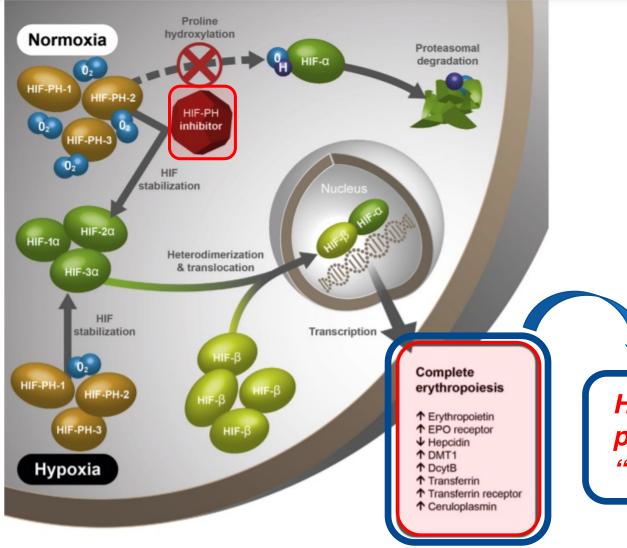


### **ESA therapy**

### **HIF stabilizers**



# THE ERYTHROPOIETIC RESPONSE IS MEDIATED BY HIF



**Special Report** 

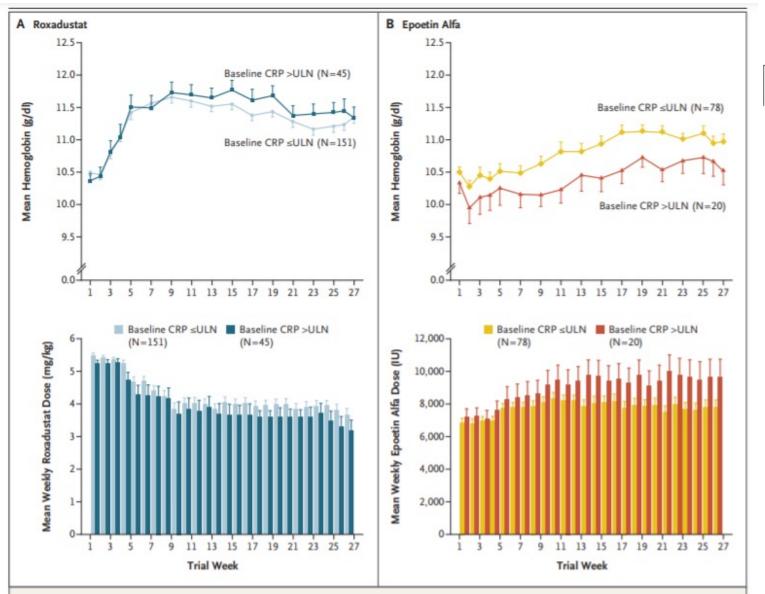
Hypoxia-Inducible Factor Stabilization as an Emerging Therapy for CKD-Related Anemia: Report From a Scientific Workshop Sponsored by the National Kidney Foundation

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HIF-PHIs more likely to improve anemia in patients resistant to or hyporesponsive to "conventional" ESA therapy



#### Figure 2. Mean Doses of Roxadustat and Epoetin Alfa and Hemoglobin Levels over Time, According to C-Reactive Protein Subgroup (Per-Protocol Population).

The upper limit of the normal range (ULN) for C-reactive protein (CRP) was 4.9 mg per liter. I bars (top graphs) and T bars (bottom graphs) indicate the standard error of the mean.

#### The NEW ENGLAND JOURNAL of MEDICINE

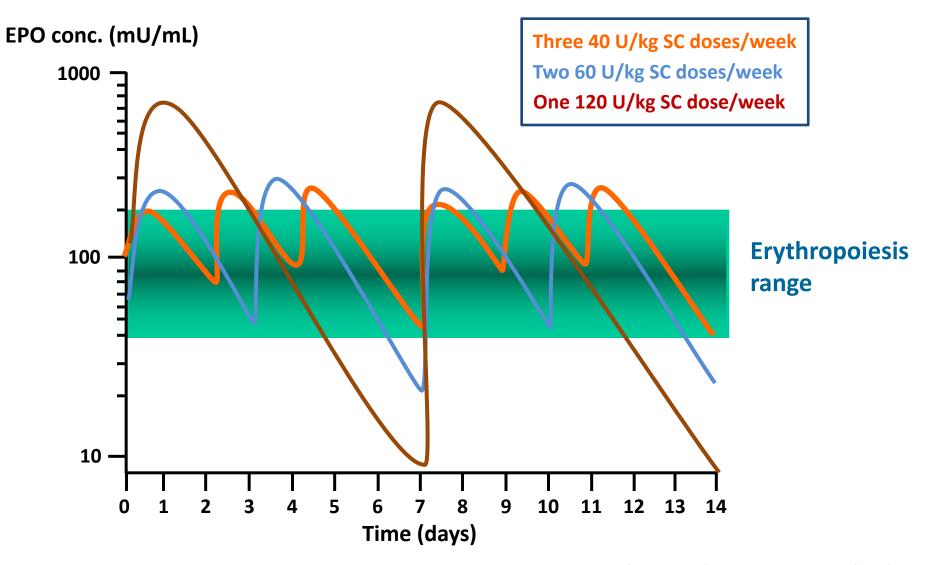
ORIGINAL ARTICLE

#### Roxadustat Treatment for Anemia in Patients Undergoing Long-Term Dialysis

N. Chen, C. Hao, B.-C. Liu, H. Lin, Caili Wang, C. Xing, X. Liang, G. Jiang, Zhengrong Liu, X. Li, L. Zuo, L. Luo, J. Wang, M. Zhao, Zhihong Liu, G.-Y. Cai, L. Hao, R. Leong, Chunrong Wang, C. Liu, T. Neff, L. Szczech, and K.-H.P. Yu

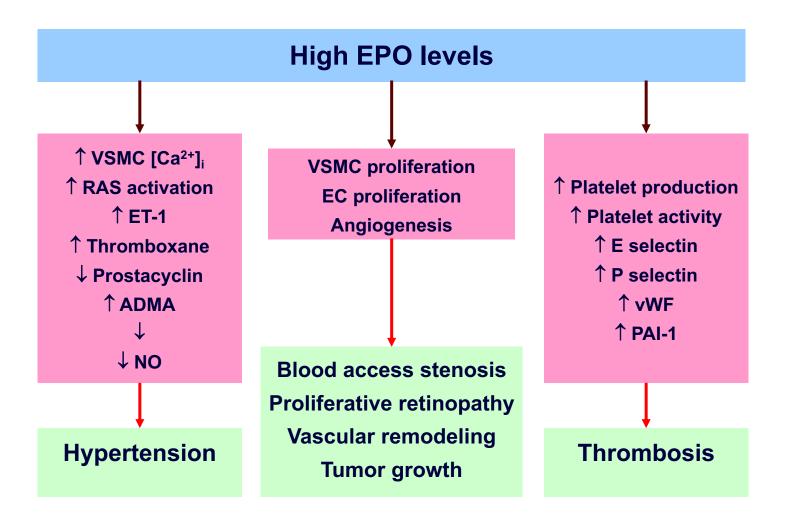
Chen et al. N Engl J Med 2019; 381: 1011-1022.

### **ERYTHROPOIETIN CONCENTRATION-TIME PROFILES**



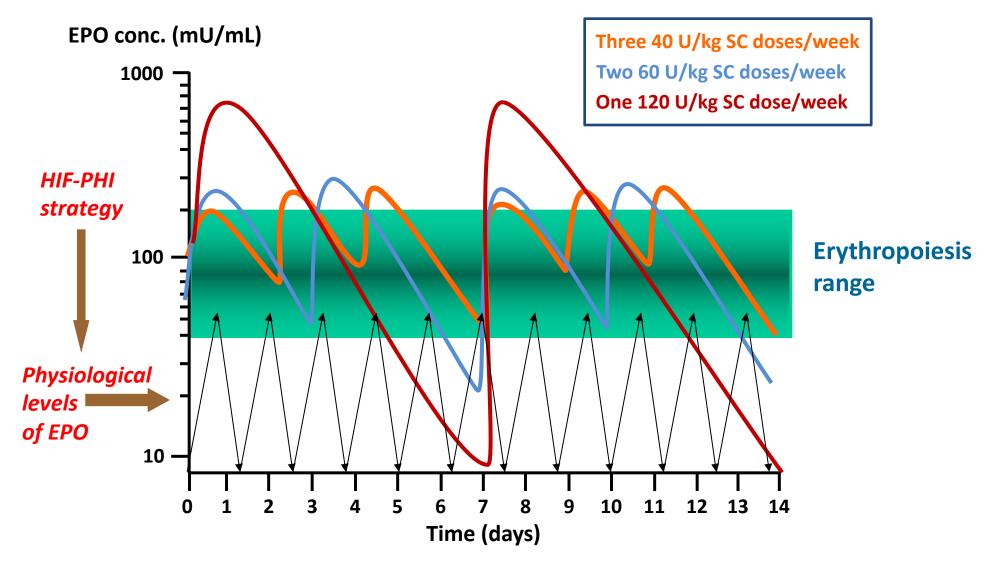
Besarab A et al. J Am Soc Nephrol 1992; 2: 1405-16.

## EPO HAS NON-ERYTHROPOIETIC ACTIONS



Vaziri ND & Zhou X. Nephrol Dial Transplant 2009; 24: 1082–1088.

### **ERYTHROPOIETIN CONCENTRATION-TIME PROFILES**



Besarab A et al. J Am Soc Nephrol 1992; 2: 1405-16.

Special Report

AJKD

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#### Table 1. Pharmacokinetic properties of Daprodustat, Roxadustat, and Vadadustat

Compound	Effective Daily Oral Doses in Phase 2 Trials	Dosing Schedule	Half- Life, h	Plasma EPO, IU/L	Metabolism
Daprodustat (GSK-12278863)	5-25 (also examined 50 and 100 mg)	1×/d	~1-7	24.7ª and 34.4 <sup>b</sup>	CYP2C8 with minor CYP3A4
Roxadustat (FG-4592, ASP1517)	0.7-2.5 mg/kg	3×/wk	12-15	113° and 397d	CYP2C8
Vadadustat (AKB-6548, MT-6548)	150-600 mg	1×/d (3×/wk)	4.7-9.1	32	NR

Adapted with permission from Sanghani and Haase<sup>11</sup>; original content ©2019 National Kidney Foundation. Abbreviations: CKD, chronic kidney disease; CYP, cytochrome P450; EPO, erythropoietin; HIF, hypoxia-inducible factor; NR not reported/not published.

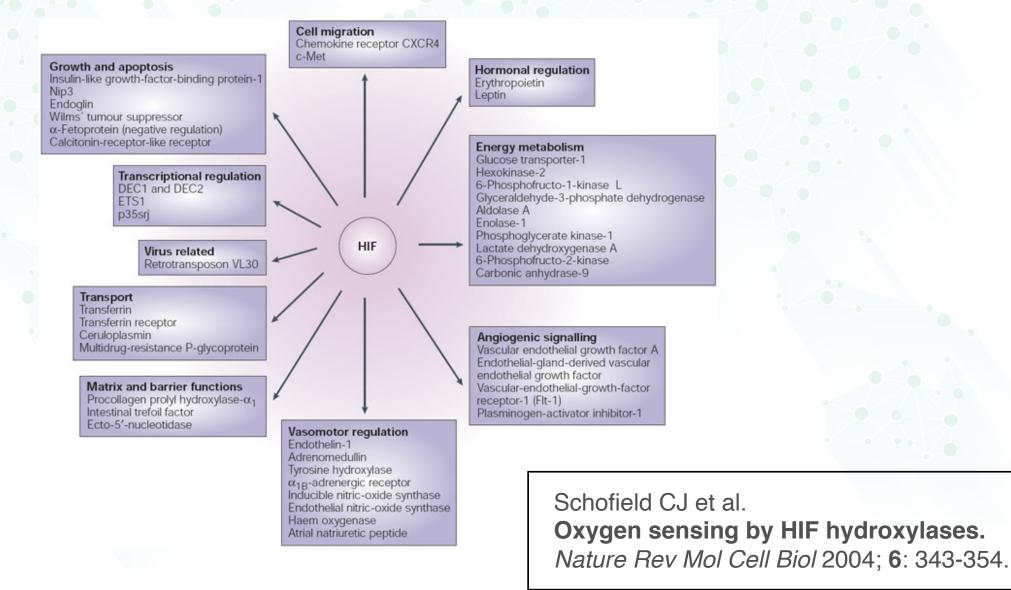
<sup>a</sup>CKD patients receiving dialysis.

<sup>b</sup>CKD patients not requiring kidney replacement therapy.

<sup>c</sup>For 1 mg/kg dose.

dFor 2 mg/kg dose.

## DIRECT TRANSCRIPTIONAL TARGETS OF HIF



#### **Special Report**

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#### Box 1. Summary of Recommendations for Future Research

- Further evaluation of potential adverse effects of HIF-PHI therapy
  - Evidence examined in phase 3 clinical trials
    - Major adverse cardiovascular events
    - Thrombotic events
    - Effects on blood lipids and their consequences
  - Evidence not sufficiently examined in phase 3 clinical trials
    - Malignancies
    - Diabetic retinopathy
    - · Pulmonary arterial hypertension
    - Infection risk
    - Kidney fibrosis
    - · Cyst growth in polycystic kidney disease
  - Hyperkalemia

Further evaluation of potential benefits of HIF-PHI therapy

- Effects in ESA-hyporesponsive patients
- ◊ Effects on iron metabolism
- ◊ Effects on quality of life
- Reduced rate of loss of kidney function
- Protection against ischemic events
- ◊ Lowering of blood pressure
- ◊ Glucose tolerance
- Practical considerations for implementation of HIF-PHI into

#### clinical practice

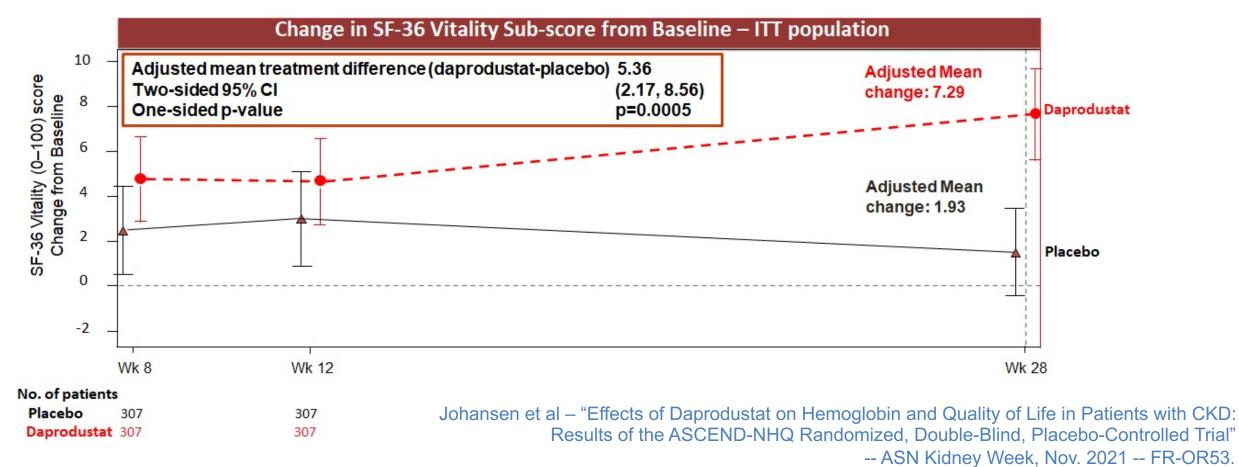
- Potential normalization of hemoglobin concentration
- Combination therapy with ESAs
- Heterogeneity of treatment effects
- Patient and provider education
- Cost, formulary, and treatment protocol barriers
- · Key recommendations for future studies
  - Patient-level meta-analyses to better define adverse effect profile
  - Patient-level meta-analyses to better define adverse therapeutic response phenotypes
  - Postapproval monitoring (registry) of rare adverse effects
  - Use of data from phase 3 clinical trials to inform design and focus of future clinical trials

### <u>AJKD</u>

# HIF STABILIZERS ON QUALITY-OF-LIFE



- 614 ND-CKD randomized to dapro vs. placebo (Baseline Hb 9.73 g/dL dapro, 9.71 g/dL placebo)
- Adjusted mean difference in Hb change = 1.40 g/dL (95% CI 1.23, 1.56; *P<0.0001*).
- Adjusted mean (SE) SF-36 Vitality score increased by 7.29 (1.1) points (dapro) vs 1.93 (1.2) points (placebo); Adjusted mean difference at Wk 28 was 5.36 (95% CI 2.17, 8.56; P=0.0005).





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## HIF STABILIZERS IN OTHER PARTS OF THE WORLD

AstraZeneca								AstraZeneca Websites	6
What science can do	R&D -	Our therapy areas •	Our company •	Careers	Investors -	Media •	Sustainability -	Partnering -	

Roxadustat approved in China for the treatment of anaemia in chronic kidney disease patients on dialysis

PUBLISHED 18 December 2018

18 December 2018 09:00 GMT

China is the first country to approve roxadustat

AstraZeneca today announced that its partner FibroGen (China) Medical Technology Development Co., Ltd. (FibroGen China) has now received formal marketing authorisation from the National Medical Products Administration (NMPA) for roxadustat, a first-in-class hypoxia-inducible factor prolyl hydroxylase inhibitor (HIF-PHI) and new oral treatment for patients with anaemia caused by chronic kidney disease (CKD) that are on dialysis. The medicine can be prescribed to patients who use haemodialysis or peritoneal dialysis.

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<ul> <li>Overview</li> <li>Authorisation details</li> <li>Product information</li> <li>Assessment history</li> </ul>	

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Astellas Receives Approval of EVRENZO® (roxadustat) in Japan for the Treatment of Anemia of Chronic Kidney Disease in Adult Patients Not on Dialysis



Approval by MHLW provides new HIF-PH inhibitor treatment option for healthcare providers and adult patients with anemia of CKD not on dialysis

#### GSK's Duvroq, Akebia's Vafseo win global first nods in Japan to challenge Astellas' anemia drug

by Angus Liu Jun 30, 2020 12:05pm



## DARBEPOETIN ALFA IN INDIA

Darbepoetin alfa Injection

Cresp<sup>40</sup>

For Subcutaneous Use Only

6 x 40 mcg/0.4 mL Single Use Prefilled Syringe



### Darbepoetin Alfa (40mcg) Cresp 40 Injection, Dr Reddy's Laboratories Ltd, Treatment: Anemia

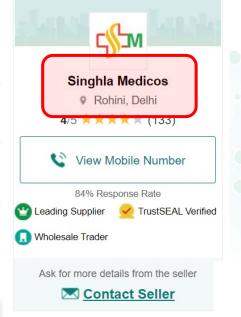
#### ₹ 1,250/ prefilled syringe Get Latest Price

Packaging Size	6 X 40 mcg/0.4 ml single use pre- refilled syringe
Brand	Cresp 40
Manufacturer	Dr Reddy's Laboratories Ltd
Composition	Darbepoetin alfa (40mcg)
Treatment	Anemia
Prescription/Non prescription	Prescription

#### View Complete Details

DR.REDDY'S

40 µg



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# CASE REPORT (2026)

- 82-year-old Financier in New Delhi
- Advanced CKD due to diabetes and HTN eGFR 16 ml/min
- Extreme physical fatigue and exhaustion
- Hb 6.4 g/dL (adequate iron status; no other cause for anemia)
- Severe needle phobia
- HIF-PHI cheaper than all injectable ESAs

## SUMMARY

- HIF-PHIs have a more "rounded" and complete approach to erythropoiesis
- HIF-PHIs avoid very high circulating levels of EPO
- Possible positive transcriptional benefits of HIF-PHIs, e.g. improving QoL (vital capacity)
- Japanese, Chinese, and European regulators have all approved HIF-PHIs
- In most of the world, HIF-PHIs will be more affordable than conventional ESA therapy

# CONCLUSIONS

• We should not throw the baby out with the bathwater



• HIF stabilizers are indeed a viable alternative to ESAs in the management of CKD anemia