Combination Oxylanthanum Carbonate and Tenapanor Synergistically Lowers **Urinary Phosphate Excretion in Rats**

BACKGROUND

- End-stage kidney disease (ESKD) affects >7 million people worldwide¹ and \sim 70% of patients with ESKD have hyperphosphatemia²
- Tenapanor is a sodium/hydrogen exchanger (NHE3) inhibitor that reduces paracellular phosphate absorption by inducing conformational changes in intestinal epithelium³
- Oxylanthanum carbonate (OLC) is an investigational new phosphate binder being developed for the treatment of hyperphosphatemia under FDA's 505 (b)(2) regulatory pathway
- If approved, OLC will share substantially the same product label and prescribing information as reference-listed drug Fosrenol[®] (lanthanum carbonate), although OLC tablets are smaller in size and swallowed whole with water and not chewed

OBJECTIVE

This study evaluated effects of OLC+tenapanor on urinary phosphate excretion in rats on a high phosphorus diet

METHODS

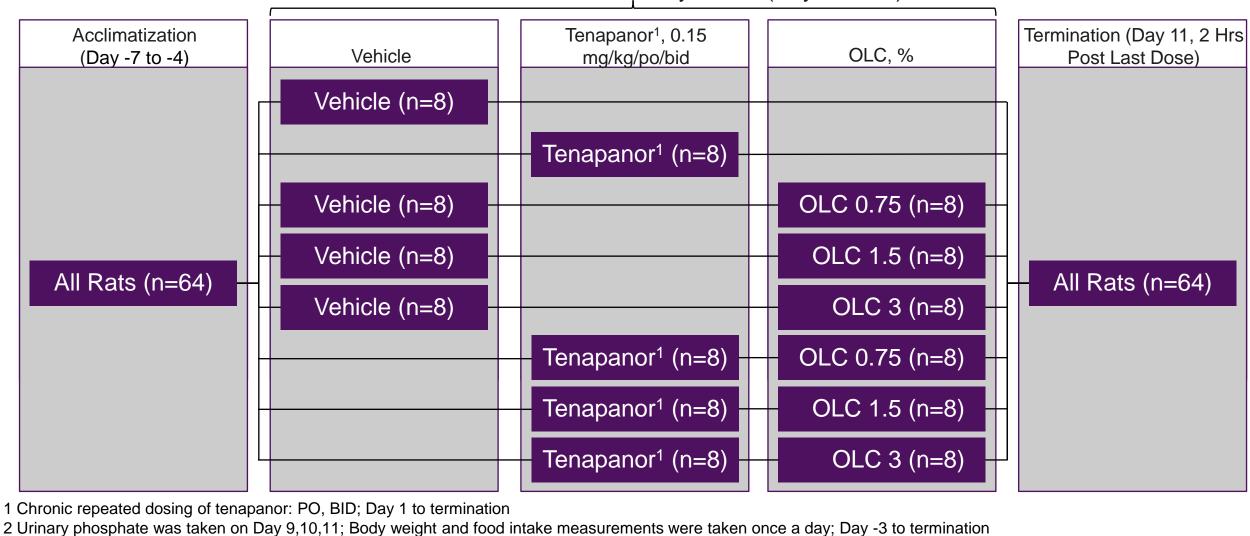
- 75 64 male Sprague Dawley rats were fed standard chow for 1 week prior to study start Excl 70 and then spiked with additional 0.4% inorganic phosphorus [1:1 sodium:potassium salt, 65 1.1% (wt/wt) total phosphorus content] for rest of the study³ (Figure 1) /day) nary 60 On study Day -1, animals were randomized into 8 groups (n=8 in each): 55 Uri (mg/ Vehicle Tenapanor 0.15 mg/kg 50

- OLC 0.75%
- OLC 1.5%

- OLC 0.75%+tenapanor 0.15 mg/kg
- OLC 1.5%+tenapanor 0.15 mg/kg
- OLC 3%
 OLC 3%+tenapanor 0.15 mg/kg
 Vehicle and tenapanor were dosed PO twice daily whereas OLC was incorporated into the diets
- 24-hour urine samples were collected using metabolic cages on day 9, 10, and 11 for urinary phosphate measurements
- OLC efficacy data are presented as average of all OLC doses (0.75%, 1.5%, and 3%)

Figure 1. Study Design – OLC+Tenapanor¹ Combo Study

Randomization and In Vivo Study Period (Day -3 to 11)²



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RESULTS

only (Figure 2)

and 11

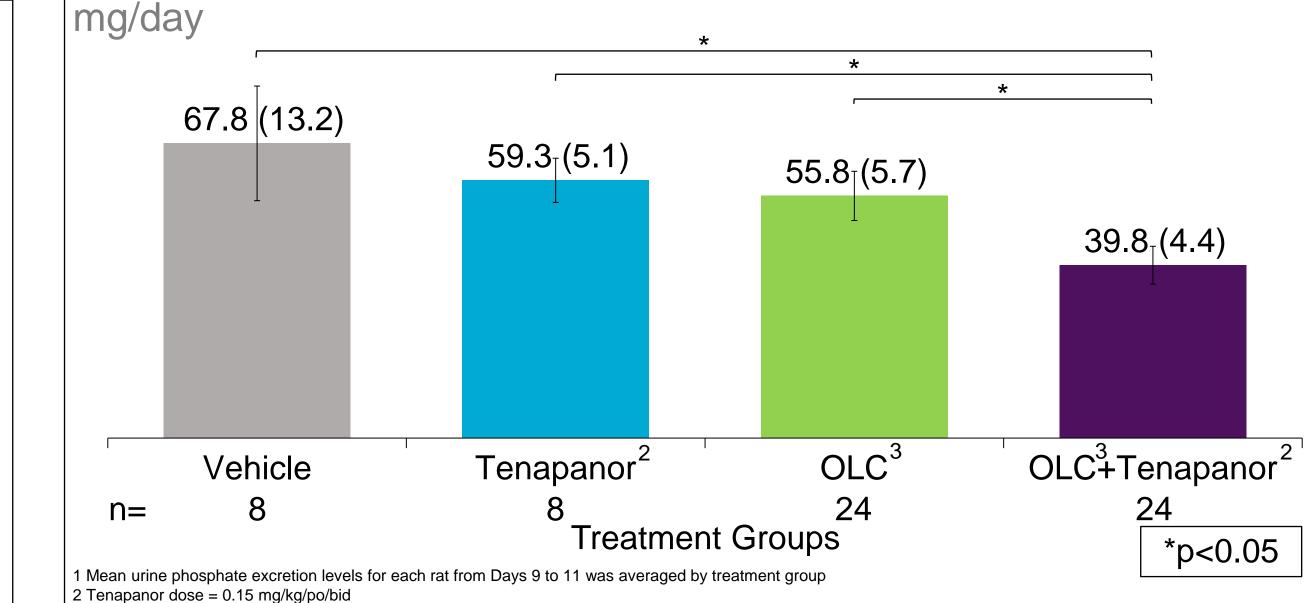
mg/day

compared to vehicle (Figure 3)

Ш 45 ົ 40 Mean 35 30 10 Average of all OLC doses (0.75%, 1.5%, 3%) in chow Days 2 Tenapanor dose = 0.15 mg/kg/po/bid

12.0 mg/day lower, respectively, compared to vehicle (Figure 3)

Figure 3. Mean¹ (95% CI) Urinary Phosphate Excretion by **Treatment Group – Days 9 to 11**



³ Average of all OLC doses (0.75%, 1.5%, 3%) in chow



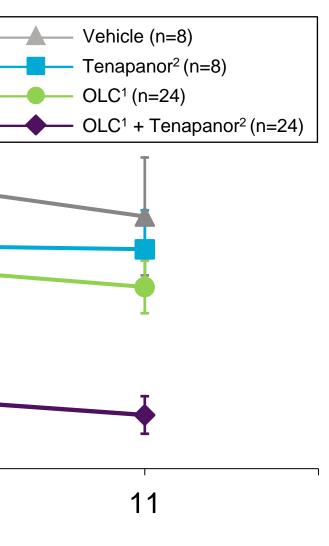
OLC reduced 24-hour urinary phosphate excretion, with OLC + tenapanor showing lower phosphate excretion compared to vehicle, OLC only, and tenapanor

In tenapanor alone and OLC only groups, urinary phosphate excretion was 8.5 and

In OLC+tenapanor groups, urinary phosphate excretion was 28 mg/day lower

The observed reduction in urinary phosphate excretion for the OLC+tenapanor groups (0.75% and 1.5% OLC doses) was significantly larger than the predicted reduction based on the single-agent effects in accordance with the Bliss model (Figure 4)

Figure 2. Mean ± SE Urinary Phosphate Excretion – Days 9, 10,



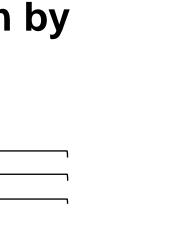
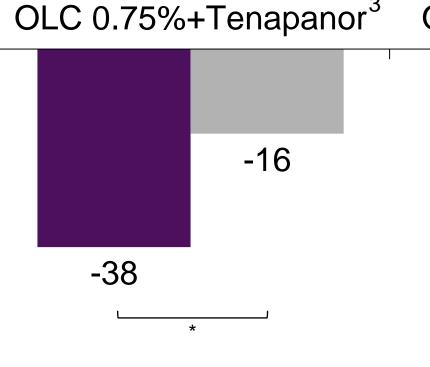
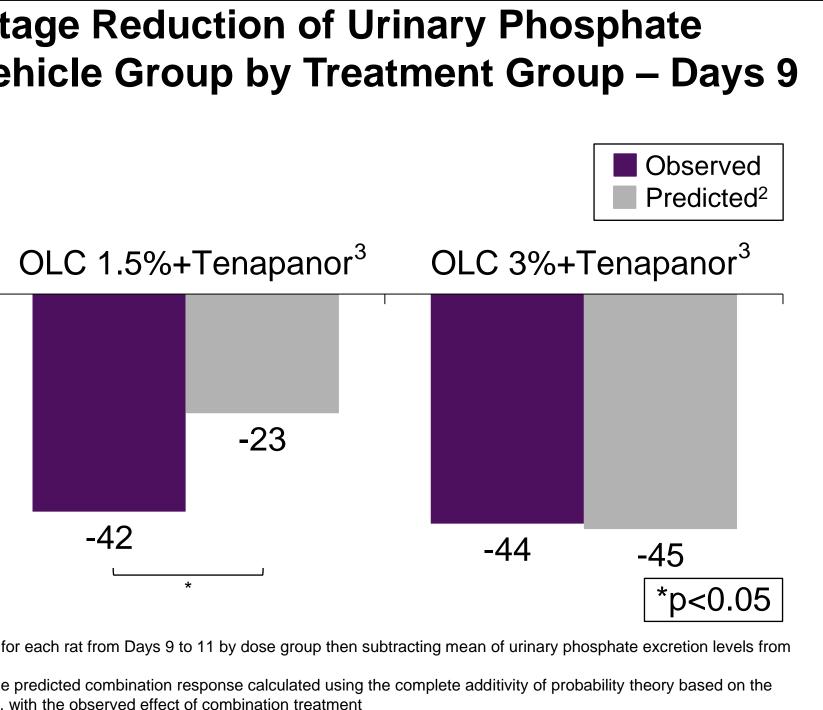


Figure 4. Mean¹ Percentage Reduction of Urinary Phosphate **Excretion Relative to Vehicle Group by Treatment Group – Days 9** to 11

Percent





Davs 9 to 11 of Vehicle

observed effect of each individual agent administered alone, with the observed effect of combination treatmer Tenapanor dose = 0.15 mg/kg/po/bid

CONCLUSIONS

- This study demonstrated that tenapanor alone modestly decreased urinary phosphate excretion
- OLC alone offered slightly better effects compared to tenapanor alone
- OLC+tenapanor combination achieved a much more pronounced reduction (3.3x) greater vs tenapanor alone)
- We demonstrated the potent effects of the novel lanthanum-based phosphate binder OLC and found through Bliss Model analysis that OLC+tenapanor has synergistic, rather than additive, effects in rats

DISCUSSION

- OLC+tenapanor combination exhibited four- to seven-fold more synergistic effects compared to the sevelamer+tenapanor combination⁴
- The combination of OLC and tenapanor may support a pronounced inhibition of intestinal phosphate absorption by leveraging two distinct mechanisms of action;
 - OLC: an intestinal phosphate binder
- Tenapanor: an NHE3 blocker that diminishes transcellular phosphate absorption
- Future studies should evaluate this promising treatment combination in humans with chronic kidney disease
- Additional studies in patients with ESKD and hyperphosphatemia will be required to understand the most effective and best tolerated OLC-containing regimens, as we aim to improve long-term control of hyperphosphatemia and prevent its myriad associated complications

References:

1 Lv JC, Zhang LX. Adv Exp Med Biol. 2019. 2 Am J Kidney Dis. 2003. 3 King AJ, et al. Sci Transl Med. 2018.

4 King AJ, et al. Am J Physiol Renal Physiol. 2021.

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