

SUPPLEMENTAL DATA

Etavopivat, a Pyruvate Kinase Activator in Red Blood Cells, for the Treatment of Sickle Cell Disease

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Text S1. 2,3-DPG PK/PD modeling

NHP PK and 2,3-DPG data were modeled using a simultaneous PK/PD approach utilizing Phoenix[®] NLME software (Certara, Princeton, NJ). The PK data were fit using a two-compartment model with first-order absorption. The 2,3-DPG data were fit using a basic indirect-response model (Dayneka et al., 1993; Sharma and Jusko, 1998) with a stimulation of loss function for 2,3-DPG shown in equation 1, where $2,3DPG_0$ is baseline 2,3-DPG levels, K_{out} is a first-order loss rate constant, S_{max} is the maximum ability of etavopivat to affect K_{out} , and SC_{50} is the etavopivat concentration resulting in 50% of the maximum stimulation achieved at the effect site.

$$\frac{d2,3DPG}{dt} = 2,3DPG_0 \cdot K_{out} - K_{out} \cdot \left(1 + \frac{S_{max} \cdot C}{C + SC_{50}}\right) \cdot 2,3DPG$$

The maximum 2,3-DPG suppression ($2,3DPG_{max}$) was estimated from equation 2.

$$2,3DPG_{max} = \left(\frac{2,3DPG_0}{1 + S_{max}}\right)$$

Half of the maximal 2,3-DPG response ($2,3DPG_{50}$) was estimated from equation 3

$$2,3DPG_{50} = 2,3DPG_0 - \frac{2,3DPG_0 - 2,3DPG_{max}}{2}$$

The plasma concentration resulting in half of the maximum decrease in 2,3-DPG (EC_{50}) was calculated using equation 4.

$$EC_{50} = \frac{SC_{50} \cdot (2,3DPG_0 - 2,3DPG_{50})}{2,3DPG_{50} \cdot (1 + S_{max}) - 2,3DPG_0}$$

Table S1. Etavopivat primary PK/PD parameters in non-human primates

| Parameter | Value | S.D. |
|-------------------------------------|-------|-------|
| 2,3DPG ₀ (μg/mL) | 841 | 9.79 |
| K _{out} (h ⁻¹) | 0.100 | 0.019 |
| S _{max} | 0.870 | 0.159 |
| SC ₅₀ (ng/mL) | 33.5 | 12.9 |

2,3DPG₀, baseline 2,3-DPG levels; K_{out}, first-order loss rate constant; PD, pharmacodynamic; PK, pharmacokinetic; S_{max}, maximum ability of etavopivat to affect K_{out}; SC₅₀, etavopivat concentration resulting in 50% of the maximum stimulation achieved at the effect site; S.D, standard deviation.

Table S2. Etavopivat exposure in non-human primates after single and repeated escalating doses

| Etavopivat mean (S.D.) PK parameters (oral dosing) | | | | |
|--|-----------------------------|----------------------------------|-----------------------------|----------------------------------|
| Dose (mg/kg) | Day 1 | | Day 5 | |
| | C _{max} (ng/ml) | AUC ₀₋₂₄ (h·ng/ml) | C _{max} (ng/ml) | AUC ₀₋₂₄ (h·ng/ml) |
| 3 | 94 (44) | 608 (292) | 83 (45) | 295 (52) |
| 8 | 352 (95) | 1116 (163) | 725 (198) | 1274 (86) |
| 22 | 424 (320) | 1728 (658) | 689 (200) | 2568 (803) |
| 50 | 1823 (489) | 8877 (1749) | ND | ND |

n = 4 animals per dose

AUC₀₋₂₄, area under the concentration time curve from time 0–24 hours after dosing; C_{max}, maximum plasma concentration; ND, not determined; PK, pharmacokinetic; S.D, standard deviation.

Table S3. Change in P₅₀ following etavopivat treatment in healthy subjects and ex vivo RBC from donors with SCD

| | P₅₀ Pre-dose (mmHg) | P₅₀ 24 hours post- dose (mmHg) | Change in P₅₀ (mmHg) |
|---|---|---|--|
| Healthy subjects: single 700-mg dose (n = 6) | 26.5 (1.53) | 21.6 (2.05) | 4.85 (0.68) |
| | P₅₀ - vehicle (DMSO) Treatment (mmHg) | P₅₀ - etavopivat Treatment (mmHg) | Change in P₅₀ (mmHg) |
| Ex vivo SCD RBC (HbSC disease) (n = 6) | 26.3 (1.24) | 24.8 (1.58) | 1.47 (0.63) |
| Ex vivo SCD RBC (HbSS disease) (n = 13) | 26.1 (1.99) | 24.8 (1.82) | 1.27 (0.76) |

Data are mean (S.D.)

DMSO, dimethyl sulfoxide; P₅₀, the partial pressure of dissolved oxygen at which Hb is 50% saturated with oxygen; RBC, red blood cell; SCD, sickle cell disease; S.D., standard deviation.