# Bentracimab Immediately and Significantly Reverses the Antiplatelet Effects of Ticagrelor in Older People

Deepak L. Bhatt, MD, MPH; Charles V. Pollack, Jr., MD; Subodh Verma, MD, PhD; C. David Mazer, MD; Rohit Ramnath, PhD; Susan E. Arnold, PhD; Michael C. Mays, BS; Bret R. Umstead, MS; Lisa K. Jennings, PhD; Benjamin J. Curry, PhD; John S. Lee, MD, PhD



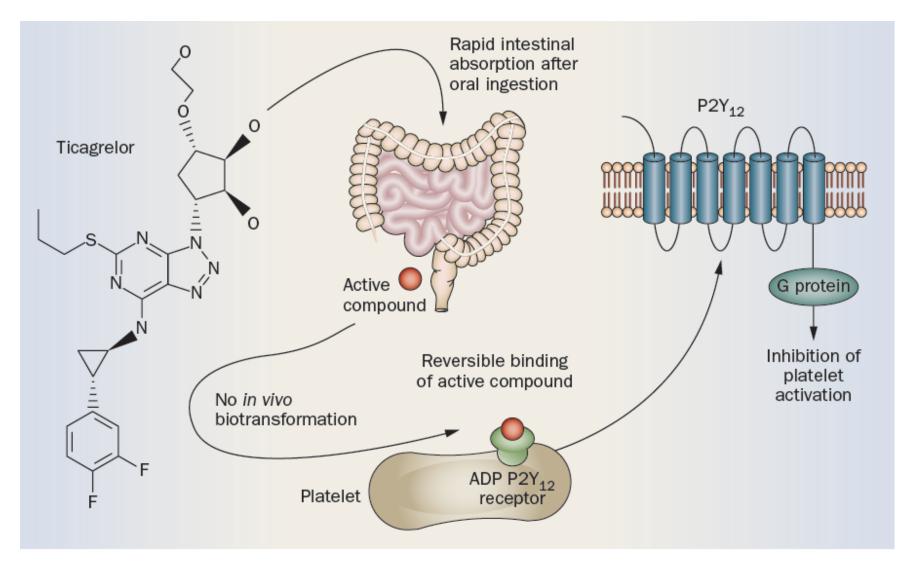
# **Disclosures**

**Dr. Bhatt discloses the following relationships**: Advisory Boards – Bayer, Boehringer Ingelheim, Cardax, CellProthera, Cereno Scientific, Elsevier Practice Update Cardiology, Janssen, Level Ex, Medscape Cardiology, Merck, MyoKardia, NirvaMed, Novo Nordisk, PhaseBio, PLx Pharma, Regado Biosciences, Stasys; Boards of Directors – Boston VA Research Institute, DRS.LINQ (stock options), Society of Cardiovascular Patient Care, TobeSoft; Chairships – Inaugural Chair, American Heart Association Quality Oversight Committee; Data Monitoring Committees – Acesion Pharma, Assistance Publique-Hôpitaux de Paris, Baim Institute for Clinical Research (formerly Harvard Clinical Research Institute, for the PORTICO trial, funded by St. Jude Medical, now Abbott), Boston Scientific (Chair, PEITHO trial), Cleveland Clinic (including for the ExCEED trial, funded by Edwards), Contego Medical (Chair, PERFORMANCE 2), Duke Clinical Research Institute, Mayo Clinic, Mount Sinai School of Medicine (for the ENVISAGE trial, funded by Daiichi Sankyo; for the ABILITY-DM trial, funded by Concept Medical), Novartis, Population Health Research Institute; Rutgers University (for the NIH-funded MINT Trial); Honoraria – American College of Cardiology (Senior Associate Editor, Clinical Trials and News, ACC.org; Chair, ACC Accreditation Oversight Committee), Arnold and Porter law firm (work related to Sanofi/Bristol Myers Squibb clopidogrel litigation), Baim Institute for Clinical Research (formerly Harvard Clinical Research Institute; RE-DUAL PCI clinical trial steering committee funded by Boehringer Ingelheim; AEGIS-II executive committee funded by CSL Behring), Belvoir Publications (Editor in Chief, Harvard Heart Letter), Canadian Medical and Surgical Knowledge Translation Research Group (clinical trial steering committees), Cowen and Company, Duke Clinical Research Institute (clinical trial steering committees, including for the PRONOUNCE trial, funded by Ferring Pharmaceuticals), HMP Global (Editor in Chief, Journal of Invasive Cardiology), Journal of the American College of Cardiology (Guest Editor; Associate Editor), K2P (Co-Chair, interdisciplinary curriculum), Level Ex, Medtelligence/ReachMD (CME steering committees), MJH Life Sciences, Piper Sandler, Population Health Research Institute (for the COMPASS operations committee, publications committee, steering committee, and USA national co-leader, funded by Bayer), Slack Publications (Chief Medical Editor, Cardiology Today's Intervention), Society of Cardiovascular Patient Care (Secretary/Treasurer), WebMD (CME steering committees); Other – Clinical Cardiology (Deputy Editor), NCDR-ACTION Registry Steering Committee (Chair), VA CART Research and Publications Committee (Chair); Research Funding – Abbott, Afimmune, Aker Biomarine, Amarin, Amgen, AstraZeneca, Bayer, Beren, Boehringer Ingelheim, Bristol Myers Squibb, Cardax, CellProthera, Cereno Scientific, Chiesi, CSL Behring, Eisai, Ethicon, Faraday Pharmaceuticals, Ferring Pharmaceuticals, Forest Laboratories, Fractyl, Garmin, HLS Therapeutics, Idorsia, Ironwood, Ischemix, Janssen, Javelin, Lexicon, Lilly, Medtronic, Merck, Moderna, MyoKardia, NirvaMed, Novartis, Novo Nordisk, Owkin, Pfizer, PhaseBio, PLx Pharma, Recardio, Regeneron, Reid Hoffman Foundation, Roche, Sanofi, Stasys, Synaptic, The Medicines Company, 89Bio; Royalties – Elsevier (Editor, Cardiovascular Intervention: A Companion to Braunwald's Heart Disease); Site Co-Investigator – Abbott, Biotronik, Boston Scientific, CSI, St. Jude Medical (now Abbott), Philips, Svelte; Trustee – American College of Cardiology; Unfunded Research – FlowCo, Takeda.

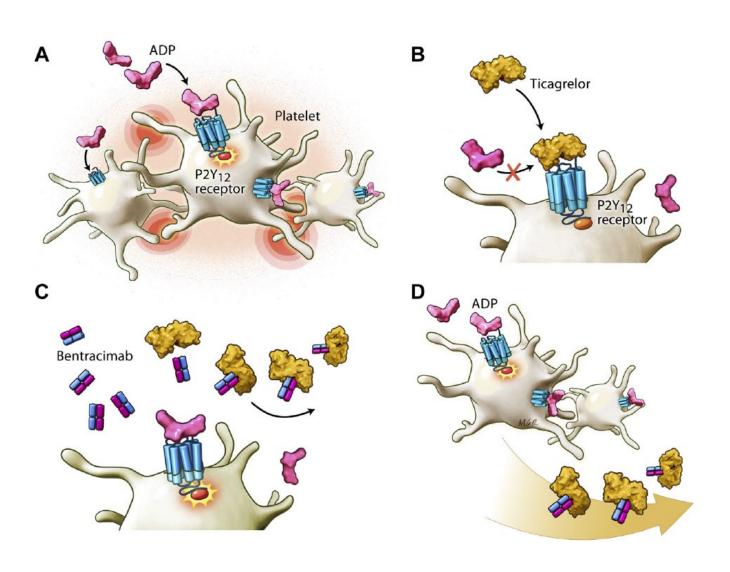
This trial was funded by PhaseBio.

This presentation includes the off-label and investigational uses of drugs.

# Ticagrelor: Reversible Mechanism of Action



# Bentracimab: An Intravenous Monoclonal Antibody

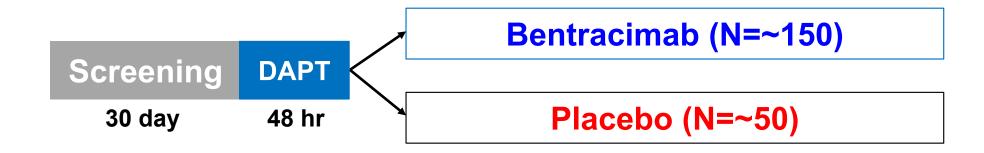


The P2Y12 receptor is activated by adenosine diphosphate (ADP) (A)

Ticagrelor reversibly binds to the P2Y12 receptor on platelets. This induces a conformational change that prevents ADP from signaling through to the P2Y12 receptor, inhibiting platelet activation (B)

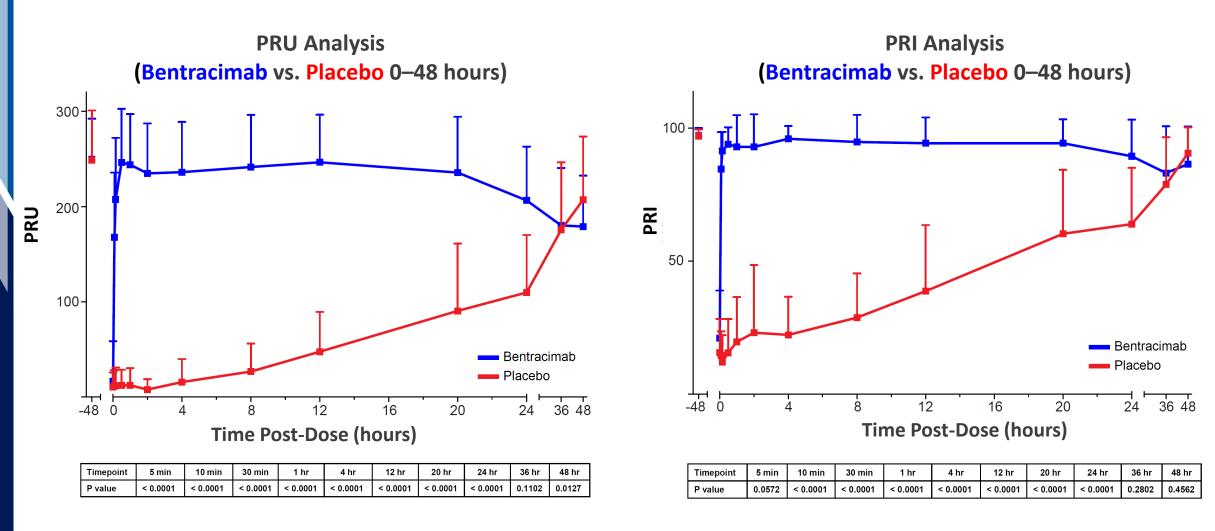
Bentracimab is a recombinant human IgG1 monoclonal antibody fragment that binds to free ticagrelor with high affinity and specificity. This allows ADP to activate platelets while the bentracimabticagrelor complex is eliminated from the bloodstream (C&D)

# Phase 2B Study Design



- Randomized, double-blind, placebo-controlled trial (3 active:1 placebo)
  - 50–80-year-old volunteers pretreated with ticagrelor and aspirin for 48 hours
  - Primary endpoint inhibition of PRU

# Immediate, Sustained Ticagrelor Reversal with Bentracimab (VerifyNow PRU and VASP PRI Assays)

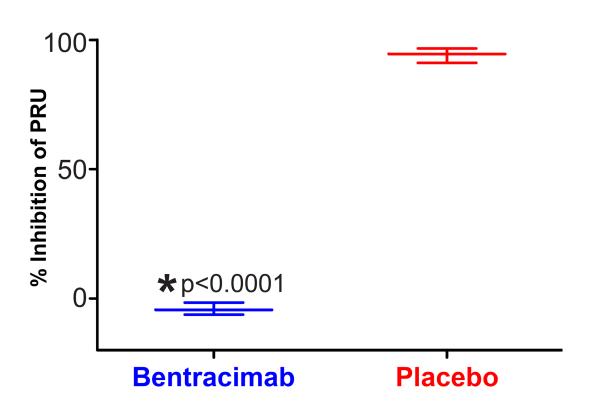


Bentracimab achieved immediate and sustained reversal in 50–80 year olds pretreated with DAPT

# **Primary Endpoint and Subgroup Analysis**

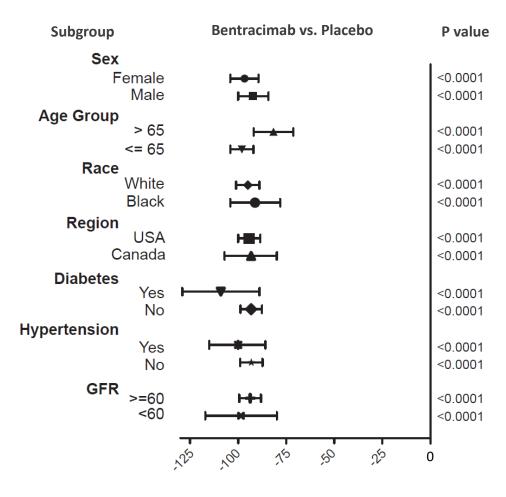
#### **Primary Endpoint Analysis**

(Minimum % inhibition of PRU within 4 hr)

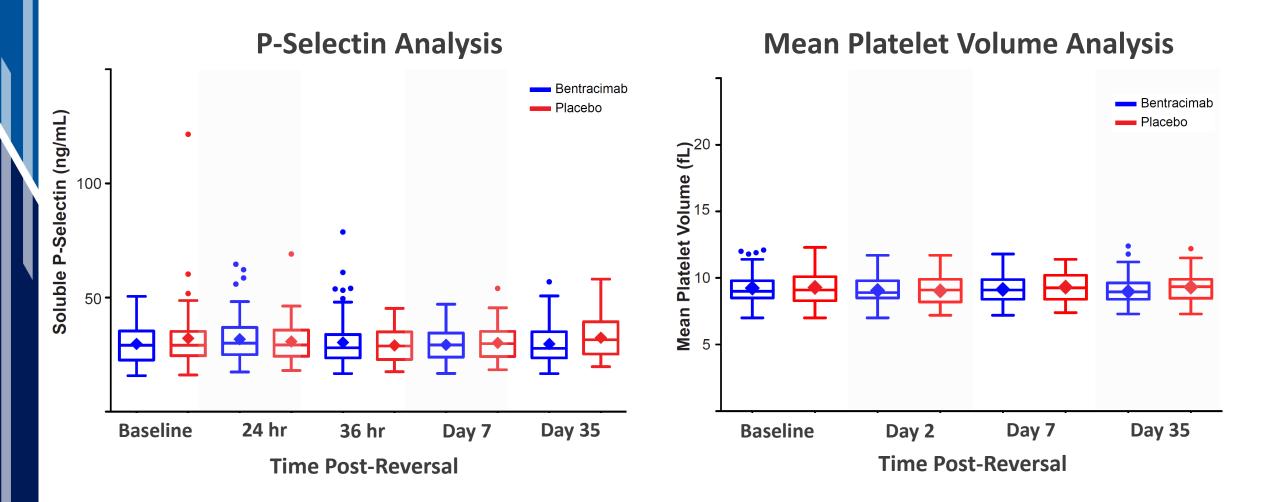


#### **Forest Plot of Treatment Difference**

(Mean change in minimum % inhibition of PRU)



## **Markers of Platelet Activation**



No evidence of elevated platelet activation post-reversal in Bentracimab or Placebo groups

# **Bentracimab Safety Profile**

#### **Treatment Emergent Adverse Events in >1 Subject**

	Placebo	Bentracimab*
TEAEs	N=51	N=154
	n (%)	n (%)
Headache	4 (7.84)	6 (3.90)
Ecchymosis	2 (3.92)	6 (3.90)
Contusion	2 (3.92)	5 (3.25)
Vessel puncture bruise	1 (1.96)	4 (2.60)
Nausea	2 (3.92)	3 (1.95)
Diarrhea	1 (1.96)	3 (1.95)
Edema	1 (1.96)	2 (1.30)
Dizziness	1 (1.96)	2 (1.30)
Infusion site extravasation	0	2 (1.30)
Pain in extremity	0	2 (1.30)
Asymptomatic COVID-19	0	2 (1.30)
Catheter site bruise	1 (1.96)	1 (0.65)
Constipation	1 (1.96)	1 (0.65)
Occult blood	1 (1.96)	1 (0.65)
Hematochezia	2 (3.92)	0
Hyperglycemia	2 (3.92)	0

#### **All Serious Adverse Events**

Preferred Term	Placebo (N=51) n (%)	Bentracimab (N=153) n (%)
Total SAEs	1	0
Drug-related SAEs	0	0
Unrelated SAEs	1	0
Car accident	1	0

- No drug-related SAEs
- No thrombotic events

<sup>\*</sup>There was no significant difference between Bentracimab and Placebo for any TEAE, P=0.52

### Conclusions

- Compared with placebo, bentracimab significantly restored platelet function, as measured by multiple assays, by binding and eliminating free ticagrelor and ticagrelor active metabolite
- No thrombotic events and no SAEs reported in volunteers randomized to bentracimab, confirming the safety profile
- Based on these data, bentracimab appears to be a very promising option for ticagrelor reversal
- Assessment of clinical effect of bentracimab on patients with bleeding awaits completion of the REVERSE-IT study