## Live attenuated Bordetella pertussis intranasal vaccine (BPZE1)

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### **Disclosures**



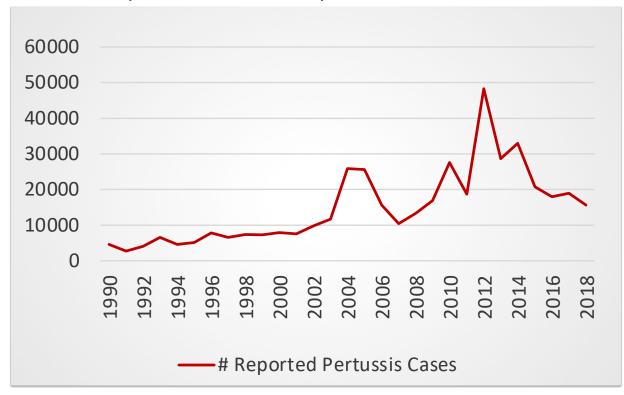
Company / Name	Honoraria / Expense	Consulting / Advisory Board	Funded Research	Royalties / Patent	Stock/ Options	Ownership / Equity Position	Employee	Other (Please specify)
ILiAD Biotechnologies					X		X	
Novartis					X		X (former)	
Bristol-Myers Squibb					X		X (former)	



## **Acellular Pertussis Vaccination and Resurgence of Pertussis in the United States**

- Relative to other vaccines, acellular pertussis (aP) vaccine immunity wanes rapidly; requiring multiple boosters
- aP vaccine introduction is associated with B. pertussis resurgence (by surveillance and modeling estimates)
- WHO recommends to continue wP vaccines if switching to aP has not yet occurred

B. pertussis Cases Reported U.S. 1990-2018

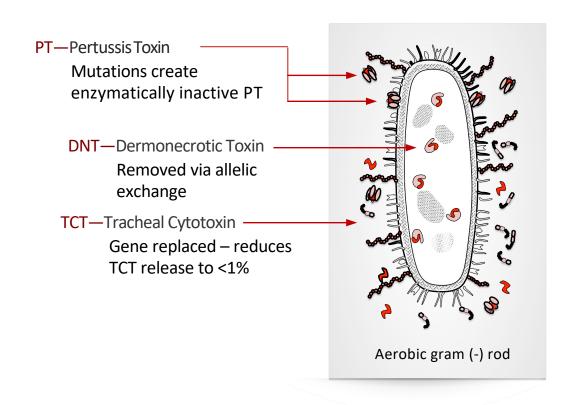


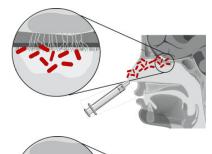
WHO Position Paper, 2015; CDC surveillance, https://www.cdc.gov/pertussis/surv-reporting/cases-by-year.html

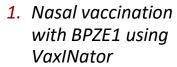


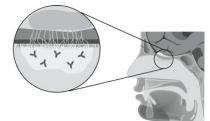
# **BPZE1: Live Attenuated Vaccine Designed to Reduce Transmission and Provide Systemic Protection**

- BPZE1, a live attenuated intranasal vaccine, is designed to stop infection and reduce transmission
- BPZE1 is B. pertussis Tohama I strain with 3 genetic mutations to induce immunity (similar to wild-type exposure)

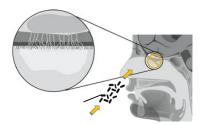








2. BPZE1 stimulates mucosal and systemic immunity

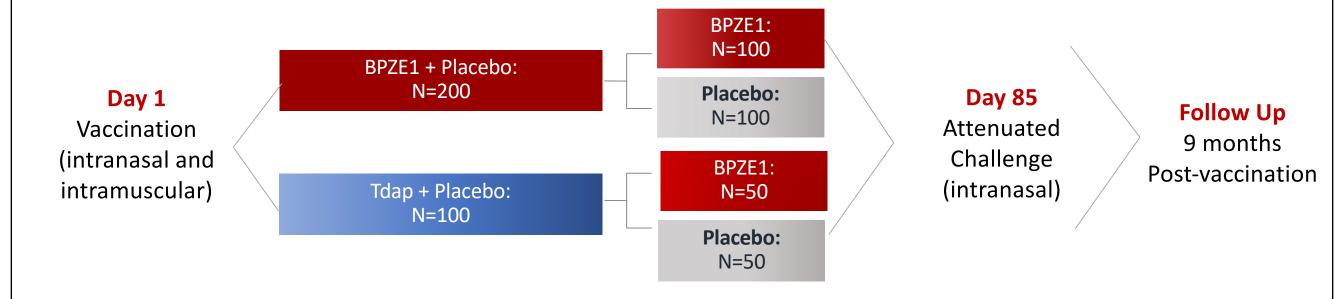


3. B. pertussis transmission is interrupted at mucosal barrier



## **BPZE1 Adult Ph2b Study Design**

- Phase 2b study was a multicenter, double-blind randomized study enrolled 300 healthy adult volunteers (18-50 years)
- First 48 subjects were randomized to BPZE1 10<sup>7</sup> CFU or 10<sup>9</sup> CFU doses in safety lead-in cohort
  - No safety issues noted by safety monitoring committee in safety lead-in
- 109 CFU analysis set used for analysis of primary and secondary endpoints



Tdap = Boostrix™



## **Clinical Protocol Endpoints\***

#### **SAFETY**

Reactogenicity (1°)

Safety Labs (cohort)

Vitals

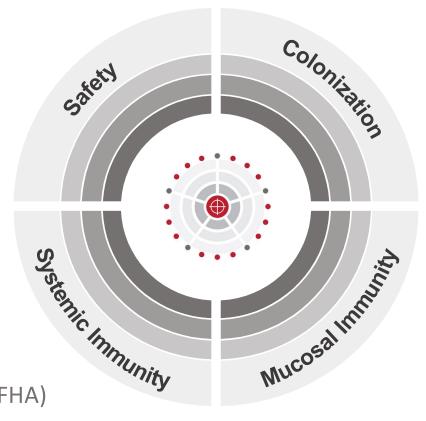
**Unsolicited AEs** 

#### SYSTEMIC IMMUNITY

IgG Whole cell extract (WCE)

Individual IgG antigens (PT, PRN, FHA)

Individual IgA antigens (PT, PRN, FHA)



#### **COLONIZATION**

Effect of BPZE1
Revaccination/Challenge

B. pertussis culture and colony counts

#### **MUCOSAL IMMUNITY**

IgA Whole cell extract (WCE) (1°)
Individual IgA antigens
(PT, PRN, FHA)

\*Descriptive only, no adjustments for multiplicity

B. pertussis whole cell extract (WCE), pertussis toxin (PT), filamentous hemagglutinin antigen (FHA), and pertactin (PRN)



## **Safety**

- BPZE1 vaccination was well tolerated
- Reactogenicity (nasal/respiratory and systemic) during 7 days after vaccination graded mainly as none to mild using the FDA toxicity scoring, with similar incidence and intensity to Tdap and placebo groups
- Majority of vaccination-related events were respiratory with similar incidence between treatment groups (7.7% vs 6.3%, BPZE1 and Tdap, respectively, Days 1-84)
- No serious adverse events related to vaccination

Adverse Events (AEs), n (%)	Vaccination	1 (Days 1-84)	Vaccination 2 (Days 85-113)		
	BPZE1	Tdap	BPZE1	Placebo	
	(n=183)	(n=96)	(n=133)	(n=146)	
Any treatment-emergent adverse events (TEAEs)	54 (29.5)	30 (31.3)	22 (16.5)	37 (25.3)	
Vaccination-related TEAEs	21 (11.5)	11 (11.5)	5 (3.8)	12 (8.2)	
Serious adverse events	3 (1.6)	0 (0)	0 (0)	1 (0.7)	
Vaccination-related SAEs	0 (0)	0 (0)	0 (0)	0 (0)	
AEs leading to study discontinuation	0 (0)	0 (0)	0 (0)	0 (0)	
Death	0 (0)	0 (0)	0 (0)	0 (0)	

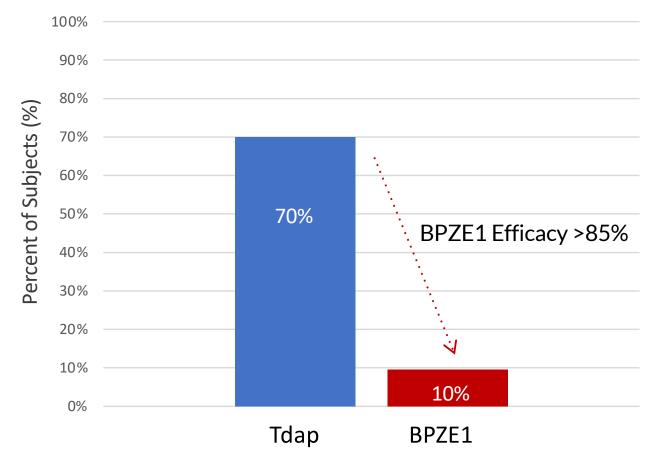
<sup>\*</sup>SAEs were bacterial sepsis and cellulitis of leg; post-procedural hemorrhage post-tonsillectomy; diabetic metabolic decompensation; all considered not related to study vaccine.



#### **Colonization Rates**

- BPZE1- and Tdap-primed subjects were challenged with attenuated B. pertussis (BPZE1) at Day 85
- BPZE1 vaccination demonstrated ability to prevent colonization in 90% of subjects
- Tdap provided minimal protection against attenuated B. pertussis challenge

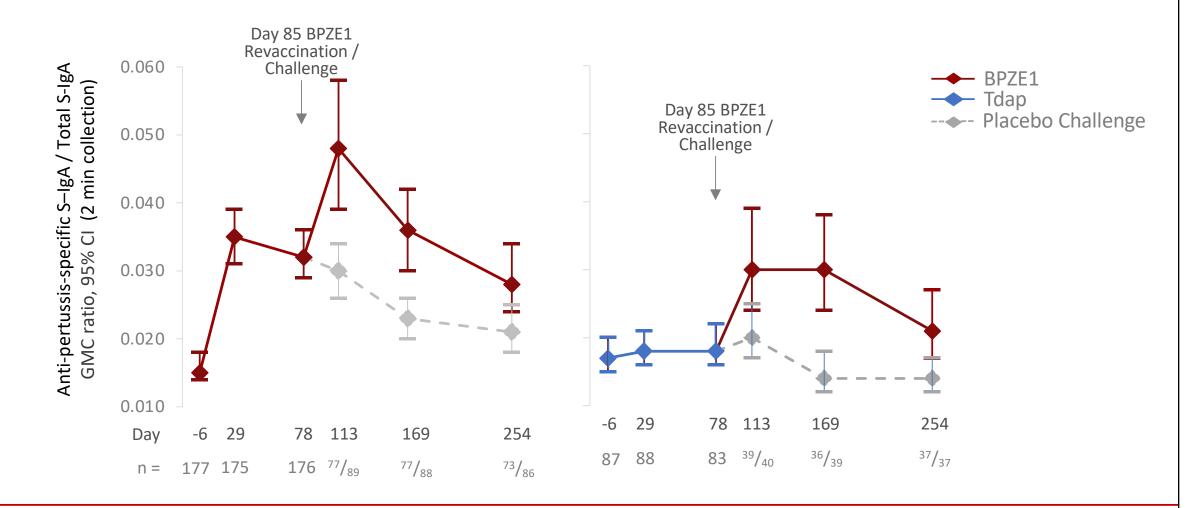
#### Colonization after attenuated challenge at Day 85





## Mucosal S-IgA Pertussis Whole Cell Antibody Responses Over Time

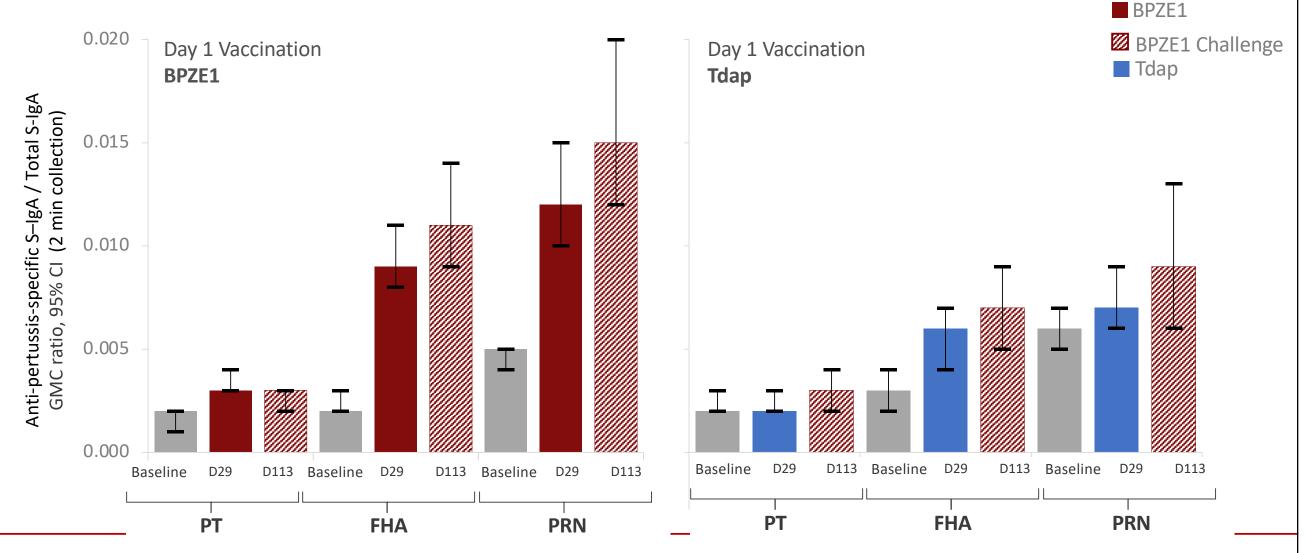
Mucosal immunity after vaccination with BPZE1 demonstrated, unlike in the Tdap group





## **Mucosal S-IgA Pertussis Protein Antibody Responses**

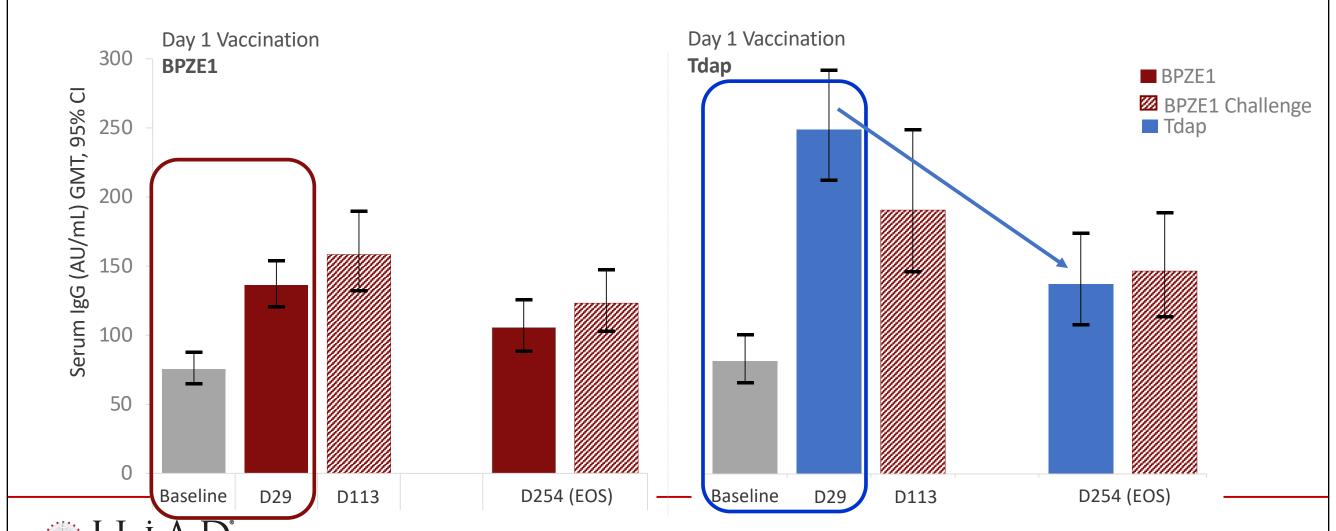
Specific antigen responses against PT, FHA and PRN were consistent with the response seen using whole cell extract demonstrating mucosal immunity after vaccination with BPZE1





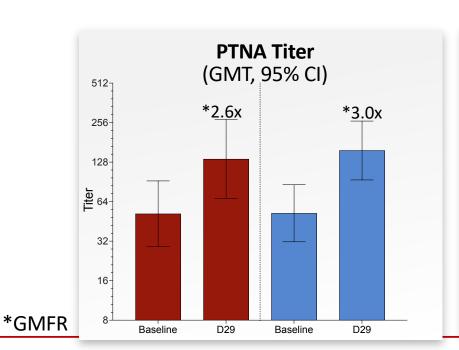
## **Serum IgG Pertussis Whole Cell Antibody Responses**

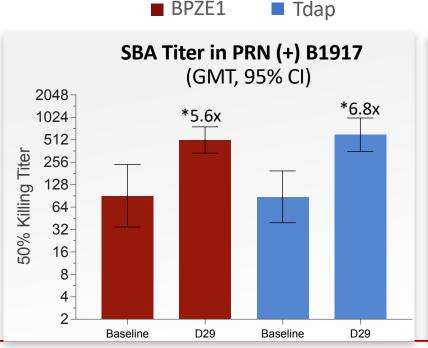
- BPZE1 induced sustained systemic IgG immunity at 28 days following vaccination to end of study
- Tdap induced significantly greater serum antibody responses, although IgG levels rapidly decayed over 9 months

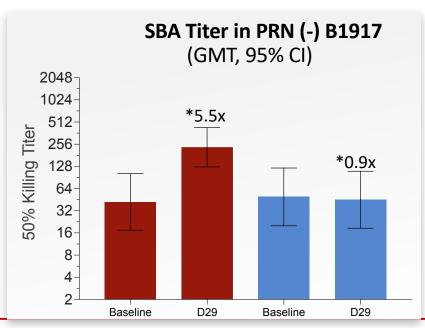


## **Functional Antibody Responses (post-hoc analysis)**

- Methods for pertussis toxin neutralizing antibody (PTNA) and serum bactericidal activity (SBA) assays
  - Randomized convenience set from 2 of 4 treatment arms: BPZE1/BPZE1 (n=13) and Tdap/Placebo (n=17)
  - Laboratory personnel blinded to treatment assignment
- Results
  - BPZE1 and Tdap induces similar functional PTNA responses
  - BPZE1 and Tdap induces comparable SBA killing in PRN (+) B. pertussis, but only BPZE1, not Tdap, induces SBA killing in PRN (-) B. pertussis









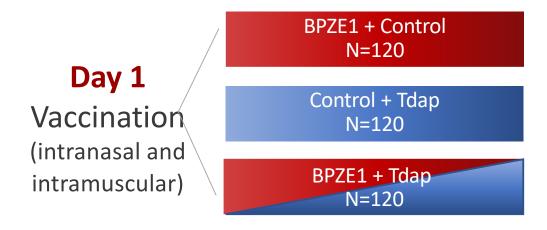
## **BPZE1 Adult Phase 2b Study Conclusions**

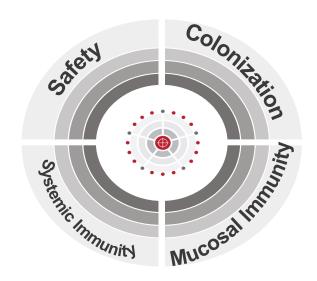
- BPZE1 vaccination was well tolerated, and no safety concerns were noted
- BPZE1 prevented colonization following attenuated challenge and induced sustained mucosal and serum immunity
  - In contrast, Tdap did not prevent colonization nor induce mucosal immunity; Tdap did induce systemic immunity as expected
- PTNA CHO assay showed comparable functional protection with BPZE1 and Tdap and SBA assay demonstrated similar 50% killing titers against PRN (+) *B. pertussis, although o*nly BPZE1 antibodies were bactericidal against PRN (-) *B. pertussis*
- BPZE1 may provide broader sustained protection against pertussis than currently achieved with acellular pertussis vaccines



## Phase 2b School Age Study Design (IB-201P)

- Study population is acellular-pertussis-vaccine-primed only (highest risk of breakthrough pertussis)
- Study population is 6-17 years of age, inclusive
  - Safety subgroup (n=45 of 11 to 17 years) reviewed by Safety Monitoring Committee
- Substudy includes up to 120 subjects receive open-label BPZE1 at Day 85 as attenuated challenge
- Safety follow-up for 6 months after Day 1 vaccination
- Study sites in UK, Australia and Costa Rica



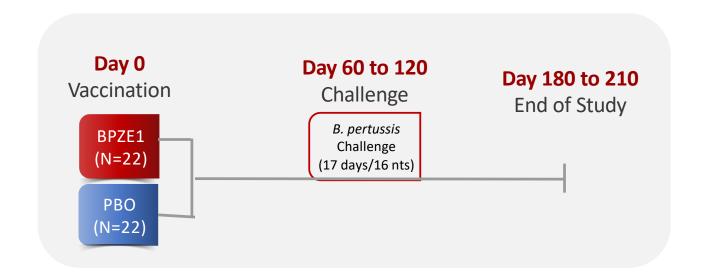


Tdap = Boostrix™



## Phase 2b Virulent Challenge Study Design (IB-202P)

- Study population is 18-50 years of age
- Study vaccine administered on Day 0
- After 60 to 120 days, 17 days/16 nights in-unit stay after virulent challenge of wild-type Bordetella pertussis (strain B1917) administered
- Safety follow-up for 6 months after Day 1 vaccination or 3 months after challenge, whichever is longer
- Study sites in UK including University of Southampton where original model was developed



<u>Primary endpoint</u>: Proportion of subjects by treatment group (BPZE1 and placebo) colonized on any day (Challenge Day 9, 11 or 14) following virulent challenge as determined by culture <u>Secondary endpoints</u>: GMFR mucosal S-IgA, serum IgA and IgG levels; safety of vaccine



## Thank you for your attention!



ILiAD Biotechnologies would like to thank the participants, investigators, study coordinators, and site staff for their participation in the BPZE1 clinical development program.

