



Clinical trial results:

An Open Label, 1-Year Trial, including a Double-Blind Placebo-Controlled Withdrawal Period, of Setmelanotide (RM-493), a Melanocortin 4 Receptor (MC4R) Agonist, in Early Onset Leptin Receptor (LEPR) Deficiency Obesity due to Bi-Allelic Loss-of-Function LEPR Genetic Mutation

Summary

| | |
|--------------------------|-------------------|
| EudraCT number | 2017-002005-36 |
| Trial protocol | DE FR NL GB |
| Global end of trial date | 25 September 2020 |

Results information

| | |
|--------------------------------|-----------------|
| Result version number | v1 (current) |
| This version publication date | 11 January 2022 |
| First version publication date | 11 January 2022 |

Trial information

Trial identification

| | |
|-----------------------|------------|
| Sponsor protocol code | RM-493-015 |
|-----------------------|------------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT03287960 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|---|
| Sponsor organisation name | Rhythm Pharmaceuticals, Inc. |
| Sponsor organisation address | 222 Berkeley Street, Boston, United States, MA 02116 |
| Public contact | Chief Medical Officer, Rhythm Pharmaceuticals, Inc., +1 857-264-4280, EU_medinfo@rhythmtx.com |
| Scientific contact | Chief Medical Officer, Rhythm Pharmaceuticals, Inc., +1 857-264-4280, EU_medinfo@rhythmtx.com |

Notes:

Paediatric regulatory details

| | |
|--|---------------------|
| Is trial part of an agreed paediatric investigation plan (PIP) | Yes |
| EMA paediatric investigation plan number(s) | EMA-002209-PIP01-17 |
| Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial? | No |
| Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial? | Yes |

Notes:

Results analysis stage

| | |
|--|-------------------|
| Analysis stage | Final |
| Date of interim/final analysis | 24 May 2021 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 25 September 2020 |
| Global end of trial reached? | Yes |
| Global end of trial date | 25 September 2020 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

To demonstrate statistically significant and clinically meaningful effects of setmelanotide on percent body weight change in patients with LEPR deficiency obesity due to rare bi-allelic or loss-of function mutations at the end of 1 year of treatment.

Protection of trial subjects:

The IRB/IEC reviewed all appropriate study documentation in order to safeguard the rights, safety, and well-being of the patients. The study was only conducted at sites where IRB/IEC approval had been obtained. The protocol, investigator brochure (IB), informed consent, advertisements (if applicable), written information given to the patients (including diary cards), safety updates, annual progress reports, and any revisions to these documents was provided to the IRB/IEC by the Investigator.

Although the study procedures and assessments required per protocol were classified as "No or Minimal Risk" (apart from DEXA which is classified as "Minor Increase over Minimal Risk") per the 2008 Guidance Document "Ethical Considerations for Clinical Trials on Medicinal Products Conducted with the Pediatric Population", considerations for reducing pain in distress in participants younger than 18 years of age were included in the protocol.

Background therapy:

Unless concomitant medications were likely to present a strong potential safety concern, to allow as many as possible patients with this ultra-rare condition to participate in the study, patients were allowed chronic concomitant medications while participating in the study, including:

- 1) Growth hormone
- 2) Contraceptives
- 3) Hormone replacement therapy (female patients were permitted hormonal contraception as well as hormone replacement therapy)
- 4) Anti-hypertensives
- 5) Statins and other lipid-lowering therapies
- 6) Thyroxine or other thyroid supplements
- 7) Other medications commonly used in patients with obesity: endocrine therapies (e.g., estrogens, Fosamax, hydrocortisone, vitamin and calcium supplements, diabetic therapies including insulin); and other medications (e.g., carnitor, Coenzyme Q10, vitamins, anti-constipation medications, anti-allergic medications).
- 8) Except for low threshold drugs (i.e., anticonvulsants, digoxin, Coumadin, etc.), other medications were permitted if the patient was on a stable dose upon consultation with the Sponsor.

Female patients were allowed to use hormonal contraception as well as hormone replacement therapy. Medications that could impact the efficacy assessments during the study were prohibited. Anorectic agents or drugs with anorexia as a non-rare side effect were prohibited for the duration of the study.

Evidence for comparator:

No active comparator was used in the study, but the study was powered based upon natural history data. There was a double-blind randomized withdrawal period which included 4 weeks placebo and 4 weeks active treatment.

| | |
|---|-----------------------------|
| Actual start date of recruitment | 08 January 2018 |
| Long term follow-up planned | Yes |
| Long term follow-up rationale | Safety, Scientific research |
| Long term follow-up duration | 5 Years |
| Independent data monitoring committee (IDMC) involvement? | Yes |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|-------------------|
| Country: Number of subjects enrolled | Canada: 1 |
| Country: Number of subjects enrolled | Netherlands: 3 |
| Country: Number of subjects enrolled | United Kingdom: 1 |
| Country: Number of subjects enrolled | France: 6 |
| Country: Number of subjects enrolled | Germany: 4 |
| Worldwide total number of subjects | 15 |
| EEA total number of subjects | 13 |

Notes:

Subjects enrolled per age group

| | |
|---|----|
| In utero | 0 |
| Preterm newborn - gestational age < 37 wk | 0 |
| Newborns (0-27 days) | 0 |
| Infants and toddlers (28 days-23 months) | 0 |
| Children (2-11 years) | 1 |
| Adolescents (12-17 years) | 4 |
| Adults (18-64 years) | 10 |
| From 65 to 84 years | 0 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

Patients aged ≥ 6 years, with bi-allelic loss of function (LOF) LEPR genetic mutation conferring a severe obesity phenotype were eligible to participate.

If adult age ≥ 18 years, obesity with body mass index (BMI) ≥ 30 kg/m²; if child or adolescent, obesity with BMI ≥ 95 th percentile for age (by gender) on growth chart assessment.

Pre-assignment

Screening details:

At screening, a blood sample was obtained for genotyping for mechanisms considered to be possibly related to the safety or efficacy response to the study medication (e.g., other obesity related genes). Complete physical, relevant bloodwork and other standard assessments were performed. All bloodwork was collected between Study Day -28 and -14.

Period 1

| | |
|------------------------------|-----------------------------|
| Period 1 title | Baseline (overall period) |
| Is this the baseline period? | Yes |
| Allocation method | Non-randomised - controlled |
| Blinding used | Not blinded |

Blinding implementation details:

This was an open-label study with a dose titration period lasting 2 to 12 weeks (dependent upon number of dose escalations required to determine an individual's therapeutic dose) followed by a further 10 weeks of open-label treatment at that dose. This was followed by an 8-week double-blind withdrawal period (4 weeks placebo and 4 weeks on setmelanotide; timing of each was randomly assigned) then continued treatment with setmelanotide to the end of 1-year's treatment (32 weeks open-label).

Arms

| | |
|-----------|----------------------|
| Arm title | All treated patients |
|-----------|----------------------|

Arm description:

All patients treated with setmelanotide, includes a combination of 11 patients enrolled in a 'pivotal cohort' and 4 patients in a 'supplemental' cohort. All patients had the LEPR genetic mutation.

| | |
|--|------------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Setmelanotide |
| Investigational medicinal product code | RM-493-mPEG-DSPE |
| Other name | |
| Pharmaceutical forms | Solution for injection |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

Study patients were administered study drug by subcutaneous (SC) injection once daily (in the morning). The dose titration phase lasted up to 10 weeks with assessments every 2 weeks to determine if a dose should be increased. Once the patient's therapeutic dose was reached, the same dose was administered throughout the remainder of the study.

Initial doses administered were 1.0 mg (adult patients) or 0.5 mg (paediatric and adolescent patients), and the maximum potential dose following the dose titration process was 3.0 mg or 2.5 mg daily depending on the maximum approved dose in the specific participating country as well as the age of the patient.

| Number of subjects in period 1 | All treated patients |
|---------------------------------------|----------------------|
| Started | 15 |
| Completed | 13 |
| Not completed | 2 |
| Adverse event, serious fatal | 1 |
| Adverse event, non-fatal | 1 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|----------------------|
| Reporting group title | All treated patients |
|-----------------------|----------------------|

Reporting group description:

All patients treated with setmelanotide, includes a combination of 11 patients enrolled in a 'pivotal cohort' and 4 patients in a 'supplemental' cohort. All patients had the LEPR genetic mutation.

| Reporting group values | All treated patients | Total | |
|---------------------------|----------------------|-------|--|
| Number of subjects | 15 | 15 | |
| Age categorical | | | |
| Units: Subjects | | | |
| Children (2-11 years) | 1 | 1 | |
| Adolescents (12-17 years) | 4 | 4 | |
| Adults (18-64 years) | 10 | 10 | |
| Age continuous | | | |
| Units: years | | | |
| arithmetic mean | 21.67 | | |
| standard deviation | ± 8.52 | - | |
| Gender categorical | | | |
| Units: Subjects | | | |
| Female | 9 | 9 | |
| Male | 6 | 6 | |
| Body Mass Index | | | |
| Units: kg/m ² | | | |
| arithmetic mean | 49.21 | | |
| standard deviation | ± 13.02 | - | |
| Weight | | | |
| Units: kg | | | |
| arithmetic mean | 132.46 | | |
| standard deviation | ± 39.28 | - | |
| Waist circumference | | | |
| Units: cm | | | |
| arithmetic mean | 128.49 | | |
| standard deviation | ± 24.15 | - | |

End points

End points reporting groups

| | |
|--|----------------------|
| Reporting group title | All treated patients |
| Reporting group description: All patients treated with setmelanotide, includes a combination of 11 patients enrolled in a 'pivotal cohort' and 4 patients in a 'supplemental' cohort. All patients had the LEPR genetic mutation. | |

Primary: Body weight change

| | |
|-----------------|-----------------------------------|
| End point title | Body weight change ^[1] |
|-----------------|-----------------------------------|

End point description:

The primary endpoint in this study was defined as the proportion of patients who met the $\geq 10\%$ weight loss threshold (responders) after approximately 1 year of treatment with setmelanotide, compared to the proportion from historical data (at most, 5% responders in the null population). This endpoint analysis was performed solely on designated responders and therefore on the FAS population.

The proportion of patients who had at least 10% weight reduction at ~ 1 year vs baseline was analysed via the exact binomial test, at 1-sided 5% of significance level, against the null hypothesis that the proportion was less than or equal to 5% and the alternative hypothesis was that the proportion was greater than 5%. The 2-sided 90% CI of the proportion was calculated using the exact Clopper-Pearson method.

Results of the analysis: point estimate: 53.3% (90% CI 30.0, 75.63), $p < 0.0001$, indicating the primary efficacy endpoint was met.

| | |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Baseline to 1 year

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: In this non-comparator study, statistical analysis was based upon comparison with historical data. Details are included with the endpoint description since it is not possible to otherwise enter the analyses without a comparator group.

| | | | | |
|--|----------------------|--|--|--|
| End point values | All treated patients | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 15 | | | |
| Units: Subjects | | | | |
| Subjects with at least 10% weight loss | 8 | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage change in body weight

| | |
|-----------------|----------------------------------|
| End point title | Percentage change in body weight |
|-----------------|----------------------------------|

End point description:

Mean percentage of body weight change (kg) from baseline after 1 year of treatment with setmelanotide within the DUS population (defined as all patients who received any study drug, demonstrated ≥ 5 kg weight loss or 5% of body weight over 12-week open-label treatment period, and proceeded into the double-blind, placebo-controlled withdrawal period).

A linear mixed model repeated measures analysis of variance with a fixed term for time and baseline and a random effect for patients was used. An unstructured covariance matrix was used to model the expected different variances among the participants. In the event the mixed model did not converge with an unstructured covariance matrix, a compound-symmetric then Toeplitz covariance matrix was employed instead.

Results of the analysis: LS mean change: -12.37 (90% CI -15.08, -9.66), $p < 0.0001$, indicating this key secondary efficacy endpoint was met.

| | |
|---------------------------------|-----------|
| End point type | Secondary |
| End point timeframe: | |
| Change from baseline to Week 52 | |

| | | | | |
|--------------------------------------|-----------------------|--|--|--|
| End point values | All treated patients | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: kg | | | | |
| arithmetic mean (standard deviation) | -12.34 (\pm 7.534) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change in hunger score

| | |
|-----------------|------------------------|
| End point title | Change in hunger score |
|-----------------|------------------------|

End point description:

Evaluation of the mean percent change in hunger scores (weekly average hunger score of the daily worst [most] hunger score in 24 hours) in patients ≥ 12 years of age at the end of approximately 1 year of treatment within a single group of patients.

A linear mixed model repeated measures analysis of variance with a fixed term for time and baseline and a random effect for patients was used. An unstructured covariance matrix was used to model the expected different variances among the participants. In the event the mixed model did not converge with an unstructured covariance matrix, a compound-symmetric then Toeplitz covariance matrix was employed instead.

Results of analysis: LS mean change: -42.69% (90% CI -56.35, -29.02), $p < 0.0001$, indicating this key secondary efficacy endpoint was met.

| | |
|--------------------------|-----------|
| End point type | Secondary |
| End point timeframe: | |
| From baseline to Week 52 | |

| | | | | |
|--------------------------------------|----------------------|--|--|--|
| End point values | All treated patients | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: percent | | | | |
| arithmetic mean (standard deviation) | -42.7 (± 27.49) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Improvement in daily hunger score

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|-----------------|-----------------------------------|
| End point title | Improvement in daily hunger score |
|-----------------|-----------------------------------|

End point description:

Evaluation of the proportion of patients ≥ 12 years of age achieving at least 25% improvement in worst (most) hunger score following 1 year of treatment with setmelanotide. This endpoint analysis was performed solely on designated responders and therefore based on the FAS population.

The proportion of patients who had at least 25% improvement in hunger score at ~ 1 year vs baseline was analysed via the exact binomial test, at 1-sided 5% of significance level, against the null hypothesis that the proportion was less than or equal to 5% and the alternative hypothesis was that the proportion was greater than 5%. The 2-sided 90% CI of the proportion was calculated using the exact Clopper-Pearson method.

Results of the analysis: point estimate: 71.4% (90% CI 46.00, 89.60); $p < 0.0001$, indicating this key secondary efficacy endpoint was met.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From baseline to Week 52.

| | | | | |
|--|----------------------|--|--|--|
| End point values | All treated patients | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 14 | | | |
| Units: Subjects | | | | |
| Subjects with at least 25% improvement | 10 | | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From baseline to end of treatment

Adverse event reporting additional description:

The relatedness assessment was as reported by the investigator.

| | |
|-----------------|------------|
| Assessment type | Systematic |
|-----------------|------------|

Dictionary used

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|-----------------|--------|
| Dictionary name | MedDRA |
|-----------------|--------|

| | |
|--------------------|------|
| Dictionary version | 22.0 |
|--------------------|------|

Reporting groups

| | |
|-----------------------|----------------------|
| Reporting group title | All treated patients |
|-----------------------|----------------------|

Reporting group description:

All patients treated with setmelanotide, includes combination of 11 patients enrolled in a 'pivotal cohort' and 4 patients in a 'supplemental' cohort. All patients had the LEPR genetic mutation.

| Serious adverse events | All treated patients | | |
|---|----------------------|--|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 3 / 15 (20.00%) | | |
| number of deaths (all causes) | 1 | | |
| number of deaths resulting from adverse events | 1 | | |
| Injury, poisoning and procedural complications | | | |
| Road traffic accident | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 1 | | |
| Surgical and medical procedures | | | |
| Gastric banding reversal | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences causally related to treatment / all | 0 / 2 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Hepatobiliary disorders | | | |
| Cholecystitis | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Psychiatric disorders | | | |

| | | | |
|---|----------------|--|--|
| Suicidal ideation | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences causally related to treatment / all | 0 / 3 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

Frequency threshold for reporting non-serious adverse events: 5 %

| Non-serious adverse events | All treated patients | | |
|---|----------------------|--|--|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 15 / 15 (100.00%) | | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Melanocytic naevus | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 3 | | |
| Eye naevus | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Vascular disorders | | | |
| Flushing | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| General disorders and administration site conditions | | | |
| Injection site erythema | | | |
| subjects affected / exposed | 11 / 15 (73.33%) | | |
| occurrences (all) | 32 | | |
| Injection site induration | | | |
| subjects affected / exposed | 7 / 15 (46.67%) | | |
| occurrences (all) | 16 | | |
| Injection site pain | | | |
| subjects affected / exposed | 7 / 15 (46.67%) | | |
| occurrences (all) | 14 | | |
| Injection site oedema | | | |
| subjects affected / exposed | 6 / 15 (40.00%) | | |
| occurrences (all) | 13 | | |
| Injection site pruritus | | | |

| | | | |
|---------------------------------|-----------------|--|--|
| subjects affected / exposed | 8 / 15 (53.33%) | | |
| occurrences (all) | 13 | | |
| Fatigue | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 9 | | |
| Injection site bruising | | | |
| subjects affected / exposed | 5 / 15 (33.33%) | | |
| occurrences (all) | 8 | | |
| Asthenia | | | |
| subjects affected / exposed | 4 / 15 (26.67%) | | |
| occurrences (all) | 7 | | |
| Influenza like illness | | | |
| subjects affected / exposed | 3 / 15 (20.00%) | | |
| occurrences (all) | 4 | | |
| Injection site haematoma | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 3 | | |
| Injection site hypersensitivity | | | |
| subjects affected / exposed | 3 / 15 (20.00%) | | |
| occurrences (all) | 3 | | |
| Chest pain | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Malaise | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 2 | | |
| Injection site atrophy | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Injection site reaction | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Injection site urticaria | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Medical device pain | | | |

| | | | |
|--|----------------------|--|--|
| subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Medical device site erythema subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Oedema subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Pyrexia subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Xerosis subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Reproductive system and breast disorders | | | |
| Dysmenorrhoea subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 5 | | |
| Spontaneous penile erection subjects affected / exposed occurrences (all) | 4 / 15 (26.67%) 5 | | |
| Ejaculation disorder subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 2 | | |
| Metrorrhagia subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 2 | | |
| Amenorrhoea subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Ovarian cyst subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Vaginal haemorrhage | | | |

| | | | |
|--|---------------------|--|--|
| subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Oropharyngeal pain | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 3 | | |
| Asthma | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Psychiatric disorders | | | |
| Insomnia | | | |
| subjects affected / exposed | 4 / 15 (26.67%) | | |
| occurrences (all) | 7 | | |
| Anxiety | | | |
| subjects affected / exposed | 3 / 15 (20.00%) | | |
| occurrences (all) | 4 | | |
| Depression | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 4 | | |
| Depressed mood | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 2 | | |
| Suicidal ideation | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Affect lability | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Drug abuse | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Fear of injection | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Illusion | | | |

| | | | |
|---|---------------------|--|--|
| subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Investigations | | | |
| Alanine aminotransferase increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood creatine phosphokinase abnormal subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood follicle stimulating hormone increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood lactate dehydrogenase increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood luteinising hormone increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood urea decreased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Blood uric acid increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Heart rate increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Insulin tolerance test abnormal subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Neutrophil count increased subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Weight increased | | | |

| | | | |
|--|---------------------|--|--|
| subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Injury, poisoning and procedural complications | | | |
| Arthropod bite | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Foot fracture | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Joint injury | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Ligament sprain | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Cardiac disorders | | | |
| Cardiac flutter | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Nervous system disorders | | | |
| Headache | | | |
| subjects affected / exposed | 5 / 15 (33.33%) | | |
| occurrences (all) | 18 | | |
| Dizziness | | | |
| subjects affected / exposed | 4 / 15 (26.67%) | | |
| occurrences (all) | 5 | | |
| Sleep paralysis | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 3 | | |
| Presyncope | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Sciatica | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Syncope | | | |

| | | | |
|---|--|--|--|
| <p>subjects affected / exposed occurrences (all)</p> <p>Migraine subjects affected / exposed occurrences (all)</p> <p>Tic subjects affected / exposed occurrences (all)</p> | <p>1 / 15 (6.67%) 2</p> <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Blood and lymphatic system disorders</p> <p>Anaemia subjects affected / exposed occurrences (all)</p> <p>Eosinophilia subjects affected / exposed occurrences (all)</p> <p>Iron deficiency anaemia subjects affected / exposed occurrences (all)</p> | <p>3 / 15 (20.00%) 3</p> <p>1 / 15 (6.67%) 3</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Ear and labyrinth disorders</p> <p>Ear pain subjects affected / exposed occurrences (all)</p> <p>Tinnitus subjects affected / exposed occurrences (all)</p> <p>Vertigo subjects affected / exposed occurrences (all)</p> | <p>1 / 15 (6.67%) 2</p> <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Gastrointestinal disorders</p> <p>Nausea subjects affected / exposed occurrences (all)</p> <p>Abdominal pain upper subjects affected / exposed occurrences (all)</p> <p>Diarrhoea</p> | <p>8 / 15 (53.33%) 16</p> <p>4 / 15 (26.67%) 13</p> | | |

| | | | |
|--|-----------------------|--|--|
| subjects affected / exposed occurrences (all) | 7 / 15 (46.67%) 13 | | |
| Constipation subjects affected / exposed occurrences (all) | 2 / 15 (13.33%) 3 | | |
| Abdominal pain subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 2 | | |
| Gingival discolouration subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 2 | | |
| Vomiting subjects affected / exposed occurrences (all) | 2 / 15 (13.33%) 2 | | |
| Abdominal discomfort subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Abdominal distension subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Dyspepsia subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Gastrooesophageal reflux disease subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Haemorrhoids subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Hepatobiliary disorders | | | |
| Cholestasis subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Hepatocellular injury subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |

| | | | |
|--|------------------|--|--|
| Skin and subcutaneous tissue disorders | | | |
| Skin hyperpigmentation | | | |
| subjects affected / exposed | 11 / 15 (73.33%) | | |
| occurrences (all) | 20 | | |
| Erythema | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 3 | | |
| Hyperhidrosis | | | |
| subjects affected / exposed | 2 / 15 (13.33%) | | |
| occurrences (all) | 2 | | |
| Skin striae | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Urticaria | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Hair growth rate abnormal | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Hyperkeratosis | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Lentigo | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Lipodystrophy acquired | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Melanocytic naevus | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Pain of skin | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Pigmentation disorder | | | |

| | | | |
|---|---|--|--|
| <p>subjects affected / exposed occurrences (all)</p> <p>Pruritus</p> <p>subjects affected / exposed occurrences (all)</p> <p>Rash</p> <p>subjects affected / exposed occurrences (all)</p> | <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Renal and urinary disorders</p> <p>Haematuria</p> <p>subjects affected / exposed occurrences (all)</p> <p>Proteinuria</p> <p>subjects affected / exposed occurrences (all)</p> <p>Renal colic</p> <p>subjects affected / exposed occurrences (all)</p> <p>Renal failure</p> <p>subjects affected / exposed occurrences (all)</p> | <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Endocrine disorders</p> <p>Hypothyroidism</p> <p>subjects affected / exposed occurrences (all)</p> <p>Hypogonadism</p> <p>subjects affected / exposed occurrences (all)</p> | <p>2 / 15 (13.33%) 2</p> <p>1 / 15 (6.67%) 1</p> | | |
| <p>Musculoskeletal and connective tissue disorders</p> <p>Back pain</p> <p>subjects affected / exposed occurrences (all)</p> <p>Arthralgia</p> <p>subjects affected / exposed occurrences (all)</p> <p>Musculoskeletal pain</p> | <p>4 / 15 (26.67%) 7</p> <p>4 / 15 (26.67%) 4</p> | | |

| | | | |
|---|----------------------|--|--|
| subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 4 | | |
| Muscle spasms subjects affected / exposed occurrences (all) | 3 / 15 (20.00%) 3 | | |
| Musculoskeletal chest pain subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Neck pain subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Pain in extremity subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Torticollis subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 1 | | |
| Infections and infestations | | | |
| Lower respiratory tract infection subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 6 | | |
| Nasopharyngitis subjects affected / exposed occurrences (all) | 4 / 15 (26.67%) 6 | | |
| Gastrointestinal infection subjects affected / exposed occurrences (all) | 2 / 15 (13.33%) 2 | | |
| Influenza subjects affected / exposed occurrences (all) | 1 / 15 (6.67%) 2 | | |
| Pharyngitis subjects affected / exposed occurrences (all) | 2 / 15 (13.33%) 2 | | |
| Rhinitis subjects affected / exposed occurrences (all) | 2 / 15 (13.33%) 2 | | |

| | | | |
|------------------------------------|----------------|--|--|
| Arthritis viral | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Bronchitis | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Fungal infection | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Gastroenteritis | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Injection site abscess | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Otitis externa | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Metabolism and nutrition disorders | | | |
| Decreased appetite | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 2 | | |
| Dyslipidaemia | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Folate deficiency | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Glucose tolerance impaired | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Gout | | | |
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |
| Vitamin A deficiency | | | |

| | | | |
|-----------------------------|----------------|--|--|
| subjects affected / exposed | 1 / 15 (6.67%) | | |
| occurrences (all) | 1 | | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|------------------|--|
| 10 April 2018 | <p>Substantive revisions made in this amendment were as follows:</p> <ul style="list-style-type: none">• Inclusion Criterion #2 was revised to include patients ≥ 6 years of age, and provided dose titration instructions and other applicable revisions to accommodate this younger patient population.• Revised the primary endpoint to a proportion of patients who met $\geq 10\%$ weight loss rather than mean percent change from baseline.• Confirmed that more than 10 patients may have been enrolled if additional eligible patients were identified.• Clarified that OGTT was not to be performed for patients with a diagnosis of Type 1 or Type 2 diabetes.• Clarified that the schedule for obtaining samples for anti-drug antibodies was to be at Day 15 and Day 29 after initiation of dosing rather than on Day 15 and Day 29 after establishing the therapeutic dose.• Addition of QOL questionnaires SF-10, PedsQL, and C-SSRS (age-specific for patients ≥ 6 years of age).• Added bone X-rays.• Added WISC-V neurocognitive assessment.• Added an appendix that summarized blood volumes required for study assessments.• Added nutritional counselling for paediatric patients.• Clarified that for patients weighing < 100 kg at baseline, a 5% change in weight was required to continue with study treatment rather than a 5 kg change in weight for patients weighing > 100 kg at baseline. |
| 31 July 2018 | <p>Substantive revisions made in this amendment were as follows.</p> <ul style="list-style-type: none">• Clarified that all Screening blood analyses were to be collected between Day -28 and Day -14.• Provided details regarding the Safety Monitoring Board used to monitor safety throughout the study to align with the current SAP at the request of the US Food and Drug Administration (FDA).• Clarified bone assessment schedule by adding a footnote that confirmed that bone age assessment was only required at the early termination visit and not at the final visit, as requested by the German Ethics Committee. |
| 26 November 2018 | <p>The purpose of the amendment was to allow patients that experienced an adverse event or abnormal laboratory value an opportunity to be rechallenged with vehicle control (placebo) or lower doses of setmelanotide to further assess relatedness to study drug. If the Investigator wanted to further assess relatedness to study drug, the patient could have been re-challenged after approval by the Sponsor. Prior to re-challenging any patient, the Sponsor and Investigator were to define a re-challenge plan with certain parameters, specific to a particular patient. The addendum provided guidance and instructions to be followed when rechallenging a patient and assessing the data obtained during the re-challenge.</p> |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported

Online references

<http://www.ncbi.nlm.nih.gov/pubmed/3313729>