



## Clinical trial results:

### DP13 – A Phase II Study in Patients with Primary Aldosteronism to Evaluate the Efficacy, Safety and Tolerability of the Aldosterone Synthase Inhibitor, DP13, over an 8-week Treatment Period

#### Summary

EudraCT number	2019-000919-85
Trial protocol	NL IT
Global end of trial date	02 May 2022

#### Results information

Result version number	v1 (current)
This version publication date	21 December 2023
First version publication date	21 December 2023

#### Trial information

##### Trial identification

Sponsor protocol code	DP13C201
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT04007406
WHO universal trial number (UTN)	-

Notes:

##### Sponsors

Sponsor organisation name	DAMIAN Pharma AG
Sponsor organisation address	Haltli 6, Walchwil, Switzerland, 6318
Public contact	Teresa Gerlock, DAMIAN Pharma AG, 041 0616010978, teresa.gerlock@damiapharma.com
Scientific contact	Christoph Schumacher, DAMIAN Pharma AG, 041 0616010978, christoph.schumacher@damiapharma.com

Notes:

##### Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
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?	No

Notes:

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## Results analysis stage

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Analysis stage	Final
Date of interim/final analysis	11 January 2023
Is this the analysis of the primary completion data?	Yes
Primary completion date	02 May 2022
Global end of trial reached?	Yes
Global end of trial date	02 May 2022
Was the trial ended prematurely?	No

Notes:

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## General information about the trial

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Main objective of the trial:

- To determine the efficacy of daily oral dexfandrostat phosphate (DP13) treatment (all dose arms combined) to decrease the plasma aldosterone-to-renin ratio (ARR) from baseline in patients with primary aldosteronism (PA) following 8 weeks of treatment
- To determine the efficacy of daily oral dexfandrostat phosphate (DP13) treatment (all dose arms combined) to reduce 24-hour ambulatory systolic blood pressure (aSBP) from baseline in patients with primary aldosteronism (PA) following 8 weeks of treatment

Protection of trial subjects:

The study was conducted in compliance with the study protocol, the recommendations on biomedical research on human subjects of the Declaration of Helsinki, International Conference of Harmonization (ICH)--Good Clinical Practice (GCP) Guidelines (ICH E6 (R2)), and all applicable laws and regulations.

Agreement to adhere to the protocol was established by Investigators signing and returning the protocol signature page.

Patient identities were kept confidential by assigning each patient a unique identifier consisting of a patient-specific numeric code, which was used throughout the study instead of the patient's name.

All study sites received the approval of the local Ethics Committee. Additionally, patients were treated to routine care by the site investigator/physician.

All patients were explained the nature and purpose of the study, the participation conditions and the risks and benefits to the patients before signing and dating the informed consent form.

Background therapy:

In order to prevent uncontrolled hypertension during the study, a fixed-dose regimen of doxazosin (1-8 mg QD), as first-line medication and, if necessary, verapamil slow release (40-120 mg BID) or diltiazem (slow release 90-360 mg daily) or amlodipine (2.5-10 mg QD) was implemented if clinically applicable 2 weeks prior to eligibility verification. Exceptionally, a calcium channel blocker could be used as first-line treatment if medically justified. Patients were not to take diagnosis-interfering medications as listed in the Endocrine Society Clinical Practice Guidelines (e.g., ACEi, ARB) for the duration of the study. Recently diagnosed patients on spironolactone were required to be washed out at least 8 weeks prior to study entry.

Evidence for comparator: -

Actual start date of recruitment	02 September 2019
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

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## Population of trial subjects

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### Subjects enrolled per country

Country: Number of subjects enrolled	Netherlands: 2
Country: Number of subjects enrolled	Italy: 23

Country: Number of subjects enrolled	Switzerland: 10
Worldwide total number of subjects	35
EEA total number of subjects	25

Notes:

<b>Subjects enrolled per age group</b>	
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)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	35
From 65 to 84 years	0
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

Patients were recruited as 'de novo' i.e., diagnosed with PA within 10 weeks of study entry or as 'recently diagnosed' i.e., diagnosed between 10 weeks and 1 year prior to study entry.

### Pre-assignment

Screening details:

Patient screening ARR and blood pressure were reviewed and approved by the Eligibility Review Panel prior to enrolling in the study.

A suppression test also needed to be performed prior to study entry to confirm diagnosis of PA. Patients underwent a 2-week placebo run-in prior to randomization.

### Pre-assignment period milestones

Number of subjects started	35
Number of subjects completed	35

### Period 1

Period 1 title	Overall trial (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator

Blinding implementation details:

IMP-containing jars were labeled/packed according to SOP based on the randomization list. The following controls were employed to maintain blinding:

1. Placebo capsules for the run-in period were identical in appearance to the DP13 capsules
2. The investigator and other members of staff involved in the study remained blinded to the treatment randomization code
3. Interim bioanalytical/hemodynamic data were provided to the central lab in a blinded manner

Emergency unblinding was possible

### Arms

Are arms mutually exclusive?	No
<b>Arm title</b>	Baseline

Arm description:

Prior to active treatment but following 2-weeks single-blind placebo run-in

Arm type	No intervention
No investigational medicinal product assigned in this arm	
<b>Arm title</b>	Active treatment

Arm description:

Values after 8 weeks of dexfadrostat phosphate treatment

Arm type	Experimental
Investigational medicinal product name	dexfadrostat phosphate
Investigational medicinal product code	
Other name	DP13
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Once daily, before meals

<b>Number of subjects in period 1</b>	Baseline	Active treatment
Started	35	35
Completed	35	35

## Baseline characteristics

### Reporting groups

Reporting group title	Overall trial
Reporting group description: -	

Reporting group values	Overall trial	Total	
Number of subjects	35	35	
Age categorical			
adults			
Units: Subjects			
Adults (18-64 years)	35	35	
Age continuous			
Units: years			
arithmetic mean	52		
standard deviation	± 9	-	
Gender categorical			
Units: Subjects			
Female	9	9	
Male	26	26	
Race			
Units: Subjects			
White	32	32	
Black or African American	2	2	
Asian	1	1	
Body mass index			
Vital signs at baseline all dose groups combined			
Units: kg/m <sup>2</sup>			
arithmetic mean	28		
standard deviation	± 3.5	-	
Office systolic blood pressure			
Units: mm Hg			
arithmetic mean	148		
standard deviation	± 12	-	
Potassium			
Units: mmol/L			
arithmetic mean	3.5		
standard deviation	± 0.4	-	
Office diastolic blood pressure			
Units: mm Hg			
arithmetic mean	92		
standard deviation	± 10	-	
24-hour ambulatory systolic blood pressure			
Units: mm Hg			
arithmetic mean	143		
standard deviation	± 14	-	
Aldosterone-to-renin ratio			
Units: ng*L/d?*mU			

arithmetic mean	17.6		
standard deviation	± 15	-	
24-hour ambulatory diastolic blood pressure			
Units: mm Hg			
arithmetic mean	88		
standard deviation	± 8	-	

### Subject analysis sets

Subject analysis set title	Baseline
Subject analysis set type	Full analysis
Subject analysis set description:	
Baseline values after 2 weeks of placebo run-in	
Subject analysis set title	DP13 active treatment
Subject analysis set type	Full analysis
Subject analysis set description:	
Values following 8 weeks of once daily treatment with dexfadrostat phosphate	

Reporting group values	Baseline	DP13 active treatment	
Number of subjects	35	35	
Age categorical			
adults			
Units: Subjects			
Adults (18-64 years)	35	35	
Age continuous			
Units: years			
arithmetic mean	52	52	
standard deviation	± 9	± 9	
Gender categorical			
Units: Subjects			
Female	9	9	
Male	26	26	
Race			
Units: Subjects			
White	32	32	
Black or African American	2	2	
Asian	1	1	
Body mass index			
Vital signs at baseline all dose groups combined			
Units: kg/m <sup>2</sup>			
arithmetic mean	28	28	
standard deviation	± 3.5	± 3.5	
Office systolic blood pressure			
Units: mm Hg			
arithmetic mean	148	148	
standard deviation	± 12	± 12	
Potassium			
Units: mmol/L			
arithmetic mean	3.5	3.5	
standard deviation	± 0.4	± 0.4	

Office diastolic blood pressure Units: mm Hg arithmetic mean standard deviation	92 ± 10	92 ± 10	
24-hour ambulatory systolic blood pressure Units: mm Hg arithmetic mean standard deviation	143 ± 14	143 ± 14	
Aldosterone-to-renin ratio Units: ng*L/d?*mU arithmetic mean standard deviation	17.6 ± 15	17.6 ± 15	
24-hour ambulatory diastolic blood pressure Units: mm Hg arithmetic mean standard deviation	88 ± 8	88 ± 8	

## End points

### End points reporting groups

Reporting group title	Baseline
Reporting group description: Prior to active treatment but following 2-weeks single-blind placebo run-in	
Reporting group title	Active treatment
Reporting group description: Values after 8 weeks of dexfirostat phosphate treatment	
Subject analysis set title	Baseline
Subject analysis set type	Full analysis
Subject analysis set description: Baseline values after 2 weeks of placebo run-in	
Subject analysis set title	DP13 active treatment
Subject analysis set type	Full analysis
Subject analysis set description: Values following 8 weeks of once daily treatment with dexfirostat phosphate	

### Primary: 24-hour ambulatory systolic blood pressure (SBP)

End point title	24-hour ambulatory systolic blood pressure (SBP)
End point description:	
End point type	Primary
End point timeframe: Change from baseline to end of active treatment (8 weeks) in ambulatory SBP	

End point values	Baseline	Active treatment	Baseline	DP13 active treatment
Subject group type	Reporting group	Reporting group	Subject analysis set	Subject analysis set
Number of subjects analysed	35	35	35	35
Units: mm Hg				
arithmetic mean (standard deviation)	143 (± 14)	132 (± 13)	143 (± 14)	132 (± 13)

### Statistical analyses

Statistical analysis title	24-hour ambulatory SBP
Statistical analysis description: Change in mean 24-hour ambulatory systolic blood pressure (SBP) from baseline to the end of the 8-week DP13 treatment period for all dose arms combined	
Comparison groups	Baseline v DP13 active treatment

Number of subjects included in analysis	70
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.05
Method	t-test, 2-sided
Parameter estimate	Mean difference (final values)
Confidence interval	
level	95 %
sides	2-sided
Variability estimate	Standard deviation

### Primary: Aldosterone-to-renin ratio (ARR)

End point title	Aldosterone-to-renin ratio (ARR)
End point description:	
End point type	Primary
End point timeframe:	
Change from baseline to end of active treatment (8 weeks), all dose groups combined	

End point values	Baseline	Active treatment		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	35		
Units: ng*L/dL*mU				
arithmetic mean (standard deviation)	17.6 (± 15)	2.2 (± 3.3)		

### Statistical analyses

<b>Statistical analysis title</b>	Aldosterone-to-renin ratio (ARR)
Statistical analysis description:	
Change in plasma ARR from baseline to the end of the 8-week DP13 treatment period for all dose arms combined	
Comparison groups	Active treatment v Baseline
Number of subjects included in analysis	70
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.05
Method	ANOVA
Parameter estimate	Mean difference (final values)
Confidence interval	
level	95 %
sides	2-sided
Variability estimate	Standard deviation

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**Secondary: Potassium**

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End point title	Potassium
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End point description:

End point type	Secondary
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End point timeframe:

Change from baseline to end of active treatment (8 weeks)

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End point values	Baseline	Active treatment	Baseline	DP13 active treatment
Subject group type	Reporting group	Reporting group	Subject analysis set	Subject analysis set
Number of subjects analysed	35	35	35	35
Units: mmol/L				
arithmetic mean (standard deviation)	3.5 ( $\pm$ 0.4)	4.0 ( $\pm$ 0.3)	3.5 ( $\pm$ 0.4)	4.0 ( $\pm$ 0.3)

**Statistical analyses**

<b>Statistical analysis title</b>	Plasma potassium
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Statistical analysis description:

Change in plasma potassium concentration from baseline to the end of the 8-week DP13 treatment period

Comparison groups	Baseline v DP13 active treatment
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Number of subjects included in analysis	70
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Analysis specification	Pre-specified
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Analysis type	superiority
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P-value	< 0.05
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Method	t-test, 2-sided
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Parameter estimate	Mean difference (final values)
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Confidence interval

level	95 %
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sides	2-sided
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Variability estimate	Standard deviation
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**Other pre-specified: 24-hour ambulatory diastolic blood pressure (aDBP)**

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End point title	24-hour ambulatory diastolic blood pressure (aDBP)
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End point description:

End point type	Other pre-specified
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End point timeframe:

Change from baseline to the end of the 8-week DP13 treatment period, all dose groups combined

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<b>End point values</b>	Baseline	Active treatment		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	35		
Units: mm Hg				
arithmetic mean (standard deviation)	88 (± 8)	82 (± 7)		

### Statistical analyses

<b>Statistical analysis title</b>	4-hour ambulatory diastolic blood pressure (aDBP)
Statistical analysis description:	
Change in mean 24-hour ambulatory DBP from baseline to the end of DP13 treatment period (8 weeks)	
Comparison groups	Baseline v Active treatment
Number of subjects included in analysis	70
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.05
Method	ANOVA
Parameter estimate	Mean difference (final values)
Confidence interval	
level	95 %
sides	2-sided
Variability estimate	Standard deviation

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Adverse events were collected throughout the study including during the placebo run-in and withdrawal phases.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
Dictionary version	24.0

### Reporting groups

Reporting group title	Safety analysis set
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Reporting group description:

All randomized patients who received at least one dose of active study drug

<b>Serious adverse events</b>	Safety analysis set		
Total subjects affected by serious adverse events			
subjects affected / exposed	0 / 35 (0.00%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events	0		

Frequency threshold for reporting non-serious adverse events: 1 %

<b>Non-serious adverse events</b>	Safety analysis set		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	16 / 35 (45.71%)		
Investigations			
Amylase increased			
subjects affected / exposed	1 / 35 (2.86%)		
occurrences (all)	1		
Blood lactate dehydrogenase increased			
subjects affected / exposed	1 / 35 (2.86%)		
occurrences (all)	1		
Blood pressure diastolic increased			
subjects affected / exposed	1 / 35 (2.86%)		
occurrences (all)	1		
Blood pressure increased			

subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Cardiac disorders Palpitations subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Nervous system disorders Headache subjects affected / exposed occurrences (all)	4 / 35 (11.43%) 4		
General disorders and administration site conditions Fatigue subjects affected / exposed occurrences (all)	2 / 35 (5.71%) 2		
Ear and labyrinth disorders Vertigo subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Gastrointestinal disorders Abdominal pain upper subjects affected / exposed occurrences (all)  Constipation subjects affected / exposed occurrences (all)  Dental caries subjects affected / exposed occurrences (all)  Diarrhoea subjects affected / exposed occurrences (all)  Duodenitis subjects affected / exposed occurrences (all)  Gastritis	1 / 35 (2.86%) 1  1 / 35 (2.86%) 1  1 / 35 (2.86%) 1  2 / 35 (5.71%) 2  1 / 35 (2.86%) 1		

subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Gastroesophageal reflux subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Nausea subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Reproductive system and breast disorders Amenorrhoea subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Breast tenderness subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Polymenorrhoea subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Respiratory, thoracic and mediastinal disorders Cough subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Dyspnoea subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Skin and subcutaneous tissue disorders Pruritus subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Psychiatric disorders Sleep disorder subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Renal and urinary disorders Cystitis			

subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Renal colic subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		
Infections and infestations Nasopharyngitis subjects affected / exposed occurrences (all)	1 / 35 (2.86%) 1		

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? No

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

None
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Notes:

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### Online references

<http://www.ncbi.nlm.nih.gov/pubmed/36914591>