



Clinical trial results:

An Open-label Study to Evaluate the Long-term Safety of BCX9930 Monotherapy in Subjects with Paroxysmal Nocturnal Hemoglobinuria Who Previously Received BCX9930 in a BioCryst-sponsored Study Summary

EudraCT number	2021-006776-17
Trial protocol	HU FR ES
Global end of trial date	31 January 2025

Results information

Result version number	v1 (current)
This version publication date	10 August 2025
First version publication date	10 August 2025

Trial information

Trial identification

Sponsor protocol code	BCX9930-205
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT05741346
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	BioCryst Pharmaceuticals Inc.
Sponsor organisation address	4505 Emperor Boulevard Nottingham Hall, Suite 200, Durham, North Carolina, United States, 27703
Public contact	Study Director, BioCryst Pharmaceuticals Inc., +001 919859 1302, clinicaltrials@biocryst.com
Scientific contact	Study Director, BioCryst Pharmaceuticals Inc., +001 919859 1302, clinicaltrials@biocryst.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:

Results analysis stage

Analysis stage	Final
Date of interim/final analysis	31 January 2025
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	31 January 2025
Was the trial ended prematurely?	Yes

Notes:

General information about the trial

Main objective of the trial:

To provide continued access to BCX9930 for participants with Paroxysmal Nocturnal Hemoglobinuria (PNH) who had benefited from treatment with BCX9930 in another BioCryst-sponsored study and who, in the opinion of the investigator, would benefit from continued treatment with BCX9930, and who did not have access to other effective treatment options and to monitor the safety of BCX9930 in participants continuing to receive BCX9930 for the treatment of PNH.

Protection of trial subjects:

The trial was conducted in compliance with International Conference on Harmonisation (ICH) Good Clinical Practice (GCP) guidelines for conducting, recording, and reporting trials, and in accordance with the Declaration of Helsinki.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	18 January 2023
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Spain: 2
Country: Number of subjects enrolled	France: 2
Country: Number of subjects enrolled	Hungary: 1
Country: Number of subjects enrolled	Malaysia: 1
Country: Number of subjects enrolled	South Africa: 14
Country: Number of subjects enrolled	Korea, Republic of: 1
Country: Number of subjects enrolled	United Kingdom: 7
Worldwide total number of subjects	28
EEA total number of subjects	5

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)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	25
From 65 to 84 years	3
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

The study was conducted in France, Hungary, Malaysia, South Africa, South Korea, Spain, and the United Kingdom.

Pre-assignment

Screening details:

A total of 28 participants were enrolled. The participants were enrolled from previous studies BCX9930-201 (2020-000501-93), BCX9930-202 (2020-004438-39), or BCX9930-203 (2020-004403-14).

Period 1

Period 1 title	Overall (overall period)
Is this the baseline period?	Yes
Allocation method	Not applicable
Blinding used	Not blinded

Arms

Arm title	BCX9930
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Arm description:

Participants who had completed at least 12 weeks of treatment with BCX9930 in studies BCX9930-201, BCX9930-202, or BCX9930-203, and in the opinion of the investigator, had benefited from treatment with BCX9930 and were expected to continue benefiting from BCX9930, with no other effective treatment options, continued to receive BCX9930 tablets at a dose of 400 mg twice daily (BID) for up to 96 weeks. For participants who were permanently discontinuing BCX9930, in the absence of alternative complement inhibitor therapy, and if medically appropriate, the dose of BCX9930 was tapered based on investigator medical judgement.

Arm type	Experimental
Investigational medicinal product name	BCX9930
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

Administered 400 mg tablets orally BID.

Number of subjects in period 1	BCX9930
Started	28
Completed	0
Not completed	28
Withdrawn due to termination of study	28

Baseline characteristics

Reporting groups

Reporting group title	Overall
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Reporting group description: -

Reporting group values	Overall	Total	
Number of subjects	28	28	
Age categorical			
Units: Subjects			

Age continuous			
Units: years			
arithmetic mean	41.1		
standard deviation	± 14.51	-	
Gender categorical			
Units: Subjects			
Female	13	13	
Male	15	15	
Race			
Units: Subjects			
Asian	5	5	
Black or African American	13	13	
White	9	9	
Other	1	1	
Ethnicity			
Units: Subjects			
Not Hispanic or Latino	25	25	
Not Reported	1	1	
Unknown	2	2	

End points

End points reporting groups

Reporting group title	BCX9930
Reporting group description: Participants who had completed at least 12 weeks of treatment with BCX9930 in studies BCX9930-201, BCX9930-202, or BCX9930-203, and in the opinion of the investigator, had benefited from treatment with BCX9930 and were expected to continue benefiting from BCX9930, with no other effective treatment options, continued to receive BCX9930 tablets at a dose of 400 mg twice daily (BID) for up to 96 weeks. For participants who were permanently discontinuing BCX9930, in the absence of alternative complement inhibitor therapy, and if medically appropriate, the dose of BCX9930 was tapered based on investigator medical judgement.	

Primary: Number of Participants with Treatment-emergent Events (TEAEs)

End point title	Number of Participants with Treatment-emergent Events (TEAEs) ^[1]
End point description: An adverse event (AE) is any untoward medical occurrence in a clinical study participant. No causal relationship with study drug or with the clinical study itself is implied. An AE could be an unfavorable and unintended sign, symptom (including an abnormal laboratory finding), syndrome, or illness that developed or worsened during the clinical study. A serious adverse event (SAE) is defined as any untoward medical occurrence that results in death, is life-threatening, requires inpatient hospitalization or prolongation of existing hospitalization, results in persistent or significant disability/incapacity, is congenital anomaly/birth defect, or other medically important event. An AE is considered treatment-emergent if its start date was on or after the date of first dose of study treatment in Study 205 or if the AE was on-going from the prior study. TEAEs included both serious TEAEs and non-serious TEAEs. Safety Population was defined as all participants who received at least 1 dose.	
End point type	Primary
End point timeframe: From Day 1 up to 30 days after last dose (up to approximately 100 weeks)	

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: There was no formal hypothesis testing in this long-term treatment access study and only descriptive analyses were performed.

End point values	BCX9930			
Subject group type	Reporting group			
Number of subjects analysed	28			
Units: participants	27			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From Day 1 up to 30 days after last dose (up to approximately 100 weeks)

Adverse event reporting additional description:

Safety Population was defined as all participants who received at least 1 dose of study drug.

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	24.0
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Reporting groups

Reporting group title	BCX9930
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Reporting group description:

Participants who had completed at least 12 weeks of treatment with BCX9930 in studies BCX9930-201, BCX9930-202, or BCX9930-203, and in the opinion of the investigator, had benefited from treatment with BCX9930 and were expected to continue benefiting from BCX9930, with no other effective treatment options, continued to receive BCX9930 tablets at a dose of 400 mg BID for up to 96 weeks. For participants who were permanently discontinuing BCX9930, in the absence of alternative complement inhibitor therapy, and if medically appropriate, the dose of BCX9930 was tapered based on investigator medical judgement.

Serious adverse events	BCX9930		
Total subjects affected by serious adverse events			
subjects affected / exposed	16 / 28 (57.14%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events			
Investigations			
Blood lactate dehydrogenase increased			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
C-reactive protein increased			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Vascular disorders			
Hypotension			

subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Thrombophlebitis			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Blood and lymphatic system disorders			
Haemolysis			
subjects affected / exposed	10 / 28 (35.71%)		
occurrences causally related to treatment / all	0 / 10		
deaths causally related to treatment / all	0 / 0		
Anaemia			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Intravascular haemolysis			
subjects affected / exposed	3 / 28 (10.71%)		
occurrences causally related to treatment / all	0 / 5		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			
Diarrhoea			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Hypoxia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Pulmonary embolism			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	5 / 28 (17.86%)		
occurrences causally related to treatment / all	0 / 6		
deaths causally related to treatment / all	0 / 0		
Tubulointerstitial nephritis			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Escherichia urinary tract infection			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Urinary tract infection			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Pneumonia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Frequency threshold for reporting non-serious adverse events: 0 %

Non-serious adverse events	BCX9930		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	27 / 28 (96.43%)		
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Squamous cell carcinoma of skin			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Vascular disorders			
Thrombophlebitis			

subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	5 / 28 (17.86%)		
occurrences (all)	5		
Pain			
subjects affected / exposed	3 / 28 (10.71%)		
occurrences (all)	3		
Pyrexia			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Asthenia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Inflammation			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Reproductive system and breast disorders			
Breast mass			
subjects affected / exposed ^[1]	1 / 13 (7.69%)		
occurrences (all)	1		
Vaginal haemorrhage			
subjects affected / exposed ^[2]	1 / 13 (7.69%)		
occurrences (all)	2		
Erectile dysfunction			
subjects affected / exposed ^[3]	1 / 15 (6.67%)		
occurrences (all)	1		
Respiratory, thoracic and mediastinal disorders			
Cough			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Dyspnoea			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		

Oropharyngeal pain subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Respiratory disorder subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Epistaxis subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Pulmonary embolism subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Psychiatric disorders Insomnia subjects affected / exposed occurrences (all)	2 / 28 (7.14%) 2		
Major depression subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Investigations Blood cholesterol increased subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Blood lactate dehydrogenase increased subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Heart rate increased subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Lung diffusion test decreased subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
SARS-CoV-2 test positive subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Injury, poisoning and procedural complications			

Epicondylitis subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Overdose subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Skin laceration subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Cardiac disorders Tachycardia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Nervous system disorders Headache subjects affected / exposed occurrences (all)	5 / 28 (17.86%) 6		
Dizziness subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Hypersomnia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Multiple sclerosis subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Radiculopathy subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Blood and lymphatic system disorders Haemolysis subjects affected / exposed occurrences (all)	9 / 28 (32.14%) 15		
Anaemia subjects affected / exposed occurrences (all)	2 / 28 (7.14%) 3		
Splenomegaly			

subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	2		
Thrombocytopenia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Ear and labyrinth disorders			
Vertigo			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Gastrointestinal disorders			
Diarrhoea			
subjects affected / exposed	4 / 28 (14.29%)		
occurrences (all)	4		
Nausea			
subjects affected / exposed	4 / 28 (14.29%)		
occurrences (all)	5		
Abdominal pain			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Toothache			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Vomiting			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	4		
Abdominal pain upper			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Dyspepsia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Glossodynia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Dysphagia			

subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Oesophageal spasm			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Skin and subcutaneous tissue disorders			
Pruritus			
subjects affected / exposed	3 / 28 (10.71%)		
occurrences (all)	3		
Acne			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Alopecia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Rash pruritic			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Skin lesion			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Rash			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	4 / 28 (14.29%)		
occurrences (all)	5		
Haemoglobinuria			
subjects affected / exposed	3 / 28 (10.71%)		
occurrences (all)	5		
Haematuria			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Chronic kidney disease			

subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Micturition urgency			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Pollakiuria			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Sterile pyuria			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Urinary tract pain			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Dysuria			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Musculoskeletal and connective tissue disorders			
Back pain			
subjects affected / exposed	4 / 28 (14.29%)		
occurrences (all)	5		
Pain in extremity			
subjects affected / exposed	3 / 28 (10.71%)		
occurrences (all)	3		
Arthralgia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Muscle spasms			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Myalgia			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Gouty arthritis			

subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Muscle fatigue			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Musculoskeletal pain			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Infections and infestations			
Upper respiratory tract infection			
subjects affected / exposed	6 / 28 (21.43%)		
occurrences (all)	11		
Nasopharyngitis			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Urinary tract infection			
subjects affected / exposed	2 / 28 (7.14%)		
occurrences (all)	2		
Acute sinusitis			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
COVID-19			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Candida infection			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Folliculitis			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Herpes simplex reactivation			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		
Influenza			
subjects affected / exposed	1 / 28 (3.57%)		
occurrences (all)	1		

Periorbital cellulitis subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 2		
Pulmonary tuberculosis subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Rhinovirus infection subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Viral upper respiratory tract infection subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Metabolism and nutrition disorders			
Gout subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Hypercalcaemia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Hyperuricaemia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Hypoglycaemia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		
Hypomagnesaemia subjects affected / exposed occurrences (all)	1 / 28 (3.57%) 1		

Notes:

[1] - The number of subjects exposed to this adverse event is less than the total number of subjects exposed for the reporting group. These numbers are expected to be equal.

Justification: This is a gender specific event occurring only in female participants therefore, the total number of participants vary.

[2] - The number of subjects exposed to this adverse event is less than the total number of subjects exposed for the reporting group. These numbers are expected to be equal.

Justification: This is a gender specific event occurring only in female participants therefore, the total number of participants vary.

[3] - The number of subjects exposed to this adverse event is less than the total number of subjects exposed for the reporting group. These numbers are expected to be equal.

Justification: This is a gender specific event occurring only in male participants therefore, the total number of participants vary.

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
05 August 2022	<p>Rationale for Study, Population, and Design</p> <ul style="list-style-type: none">• The rationale for the study, population, and design was updated to reflect that: Collection of long-term safety and effectiveness data in a controlled study was considered critical, as PNH is a condition requiring lifelong therapy. The study population was chosen to allow for the evaluation of the benefit-risk profile of long-term treatment with BCX9930 in participants who had already taken BCX9930 for up to 52 weeks. The study features (eg, endpoints, withdrawal criteria, assessments, etc.) aligned closely with previous PNH studies of BCX9930 to allow for the continued assessment of risks and benefits in participants previously exposed to BCX9930. <p>Study Duration and Visit Frequency</p> <ul style="list-style-type: none">• The study duration was changed from a maximum of 5 years to 48 weeks. The visit schedule was changed from every 12 weeks to every 8 weeks. <p>Dose and Dosing Regimen</p> <ul style="list-style-type: none">• The dose of BCX9930 was changed from 500 mg BID to 400 mg BID for all participants. Dosage forms of BCX9930 were added to the protocol. <p>Data Collection and Analysis</p> <ul style="list-style-type: none">• The pharmacodynamic (PD) and complement biomarker secondary endpoint was changed to a PD endpoint. The timing of pharmacokinetic (PK) and PD blood sample collection (sparse sampling) was clarified to be at baseline and at every study visit to the investigative site thereafter, including unscheduled visits where feasible. For sparse PK sample collection, investigators were requested to vary the time of collection between visits when possible. The collection of an optional blood sample to be stored for potential pharmacogenomic (PG) analysis was added.• Changes included other non-substantial updates.
08 February 2023	<ul style="list-style-type: none">• Study Design <p>The original study design had provided treatment with BCX9930 for up to 48 weeks, or until the drug became available by another mechanism (eg., expanded or market access), or until the sponsor discontinued development of the product for PNH, whichever occurred first. As amended, treatment under the protocol was to be provided for up to 96 weeks, as long as the investigator believed it was in the participant's best interest to continue treatment, or until the participant gained access to other effective treatment options for PNH, whichever occurred first. Treatment was discontinued for participants who were deriving no meaningful clinical benefit, who experienced an unacceptable drug-related adverse event, or who were otherwise intolerant of the study intervention. The last on-treatment visit completed for the prior study still served as the baseline visit for BCX9930-205 (Study 205); however, participants were no longer required to complete treatment in their prior study before enrolling in Study 205. For participants who had completed at least 24 weeks of treatment with BCX9930 in their prior study, visits occurred every 8 weeks through Week 48. After Week 48, visits were scheduled every 12 weeks until Week 96. Participants who had not completed 24 weeks of treatment prior to enrolling in Study 205 returned to the clinic every 4 weeks until they had completed 24 weeks of cumulative treatment with BCX9930.</p> <ul style="list-style-type: none">• Study Objectives and Endpoints <p>The objectives and endpoints of the study were simplified to focus on providing continued access to BCX9930 and monitoring safety in participants who continued treatment with the drug.</p> <ul style="list-style-type: none">• Number of Participants <p>The number of potential participants was changed from approximately 200 to up to 30 participants.</p>

08 February 2023	<ul style="list-style-type: none"> • Inclusion Criteria As amended, to be eligible for the study, participants needed to have completed at least 12 weeks of treatment with BCX9930 in a prior study for PNH (i.e., Study BCX9930-201, BCX9930-202, or BCX9930-203) and, in the opinion of the investigator, had benefited from that treatment, were expected to continue benefiting from treatment, wished to continue treatment, and had no other effective treatment options available. • Study interventional Product and Study intervention Administration The text describing the study intervention product was revised to refer only to the 100 mg tablets. References to the 200 mg and 250 mg tablets were deleted. • Study Procedures/Assessments The protocol was revised to reflect a shift away from prescribed measures of effectiveness, allowing investigators discretion to manage individual participant PNH disease based on their medical judgment and institutional standards of care. • Sections describing effectiveness assessments—including PK, PD, PG, iron testing, and patient reported outcome (PRO) measurements—were deleted. Additionally, 12-lead electrocardiograms (ECGs) were no longer performed as part of the prescribed safety assessments, and body weight was no longer measured at each study visit. • Adverse Events and Toxicity Management The definition of an adverse event (AE) was revised to remove explicit references to reporting events of alcoholic steatohepatitis (ASH) and major adverse vascular events (MAVEs) as AEs. Events of ASH or severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection (symptomatic or asymptomatic) were no longer reported as End of Study Measures (EOSMs). • Study Populations and Statistical Analyses The text describing planned study populations and statistical analyses was revised. • Changes included other non-substantial updates.
27 July 2023	<ul style="list-style-type: none"> • Clinical trial identification codes (EudraCT, European Union Clinical Trials [EU CT], and Universal Trial Number [UTN] numbers) were added to the synopsis. • The background information from the previous version (version 3.0) of the protocol was rewritten to streamline content. • The text was focused to update on a brief discussion of the complement system, PNH, and the therapeutic rationale for BCX9930. • Changes included other non-substantial updates.

Notes:

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.

The sponsor decided to prematurely terminate the study due to business reasons. The decision to stop the development of BCX9930 was not due to safety reasons or due to lack of efficacy.

Notes: