

# Evidence of target engagement in a multiple ascending dose study with BNC210, an $\alpha 7$ nAChR NAM in development for the treatment of anxiety disorders



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**BACKGROUND** BNC210 is a negative allosteric modulator (NAM) of the  $\alpha 7$  nAChR in development for the treatment of anxiety disorders. Single ascending doses of BNC210 administered to 148 humans, have been safe, well tolerated and lacked the side effects seen with standard of care drugs for anxiety such as benzodiazepines and SSRIs.

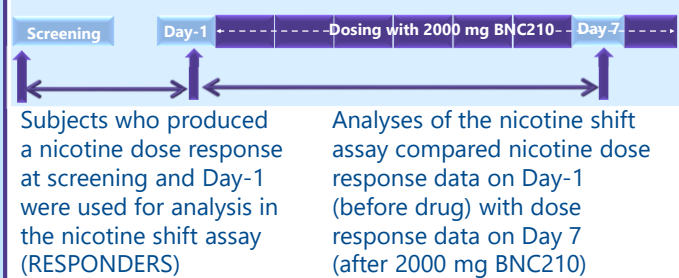
**STUDY DESIGN** Randomised, double-blind, placebo-controlled, single site, multiple ascending dose study with 4 cohorts. Cohorts 1-3 (300, 600 and 1200 mg/day) had 6 subjects on drug and 2 on placebo; Cohort 4 (2000 mg/day) was expanded to 24 drug/6 placebo for the nicotine shift assay. Doses were administered b.i.d for 8 days (D1 morning to D8 morning).

**STUDY OBJECTIVES** **PRIMARY:** Safety, tolerability of multiple ascending doses (MAD) of BNC210 in healthy male adult subjects **SECONDARY: (1)** Effects of MAD of BNC210 on cognitive functions **(2)** Effects of multiple doses of 2000 mg/day of BNC210 on nicotine shift assay (Figures 3 & 4) **(3)** PK of MAD oral doses of BNC210

## TARGET ENGAGEMENT METHOD - NICOTINE SHIFT ASSAY

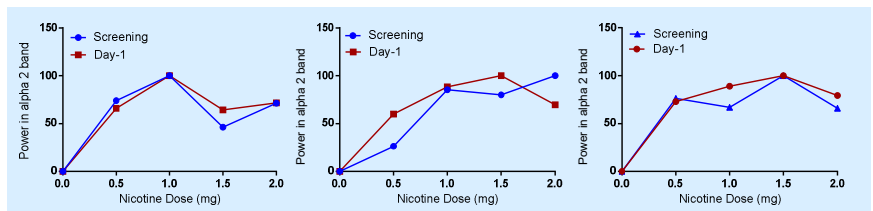
In EEG recordings, the alpha-2 band (10-12.5 Hz) responds to nicotine in a dose dependent manner when administered by inhalation, i.v. infusion or cigarette smoking (Lindgren et al; Psychopharmacology (1999)145:342-350). Cohort 4: 24 subjects were randomised to receive 2000 mg of BNC210 and 6 to receive placebo. Quantitative EEG (qEEG) recordings were performed on 3 occasions: (1) at screening (2) D-1 before dosing (3) D7, after 7 days dosing with 2000 mg BNC210 (Figure 1). Recordings were taken 6h after dosing during 2' eyes-closed intervals. Dose titrations of nicotine (from 0.5 to 2 mg) were administered by nasal spray (Nicorette®)10' prior to recordings. Each inhalation=0.5 mg nicotine.

**FIGURE 1:** Nicotine Shift Assay Schedule



**RESULTS: RESPONDERS** Thirteen subjects showed dose responses to nicotine at screening and on Day-1 (Figure 2). Un-blinding showed that 12 were randomized to received BNC210 and 1 to receive placebo making a drug versus placebo comparison not possible. As a consequence, within-subject analyses were done on the 12 subjects who received drug. **Statistics:** Nicotine dose response data for D-1 and D7 was log transformed and normalised to the zero-nicotine response. Unpaired t-test, Mean±SEM

**FIGURE 2:** Examples of RESPONDER nicotine dose responses at Screening and on Day-1

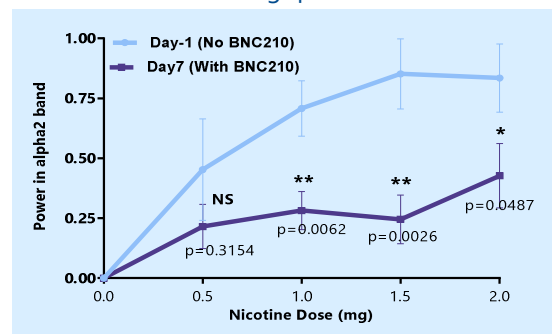


**RESULTS: NICOTINE SHIFT** The EEG response to nicotine at 10-12.5 Hz is predominantly achieved via activation of  $\alpha 4\beta 2$  and  $\alpha 7$  nAChRs in the CNS. Their relative contributions are not known but  $\alpha 4\beta 2$  nAChRs ( $EC_{50}$  *in vitro*=0.35-5  $\mu$ M) are more sensitive to nicotine than  $\alpha 7$  ( $EC_{50}$  *in vitro*=49-113  $\mu$ M; Wonnacott & Barik, 2007) and may therefore contribute more to the peak amplitude.

Figure 3 shows nicotine dose responses in subjects before and after dosing with BNC210, with significant inhibition occurring after BNC210 administration (Figure 4). This inhibition is partial because only the  $\alpha 7$  component is suppressed by BNC210 through its  $\alpha 7$ -specific negative allosteric modulation.

In subjects dosed with BNC210 (2000 mg/day), the amplitude of responses to 0.5, 1 and 1.5 mg of nicotine is reduced to ~0.25 power, which suggests that full inhibition of the  $\alpha 7$  contribution is occurring at this dose. Inhibition of the response to 2 mg nicotine is not as strong, perhaps because the contribution from the  $\alpha 4\beta 2$  receptors is higher in proportion to  $\alpha 7$  when the level of nicotine in the brain increases.

**FIGURE 3:** Multiple doses of 2000 mg/day of BNC210 significantly reduced the peak height of nicotine responses on the  $\alpha 2$  band measured using qEEG



## CONCLUSIONS

**Nicotine shift assay indicated target engagement at the  $\alpha 7$  nAChR by BNC210**

**Multiple ascending doses of BNC210, b.i.d for 8 days:**

- Produced no detrimental effects on cognitive functions
- Were safe and well tolerated
- All doses reached steady state; 1200 mg/day gave highest exposure

**FIGURE 4:** After dosing with BNC210 for 7 days, subjects showed a significant reduction in  $\alpha 2$  power amplitude on Day 7 compared to Day-1 (no BNC210)

