

KDDF-201502-11 / KDDF-201509-12

GX-H9 Long-Acting rhGH

Hybrid Fc (hyFc) technology based long-acting recombinant human Growth Hormone (rhGH-hyFc).

hyFc technology

hyFc technology enables weekly & semi-monthly dosing of rhGH to address unmet needs for less frequent injections.

Phase II in AGHD (EU/KR)

Phase II in Adult Growth Hormone Deficiency (AGHD) in EU/KR to be completed in 2H 2016

Phase II in PGHD (EU/KR)

First top-line data of Phase II in Pediatric Growth Hormone Deficiency (PGHD) to be available in 2H 2016

hyFc technology

hyFc (Hybrid Fc), Genexine's proprietary platform technology consists of IgD & IgG4 and generates a Fc fusion protein which is long-acting and safe.



- Wide & flexible hinge
 - No Fc-binding site for phagocytes (no ADCC)
 - No binding site for complement C1q (no CDC)
 - Long acting via FcRn-mediated recycling
1. ADCC: Antibody-Dependent Cellular Cytotoxicity
2. CDC: Complement-Dependent Cytotoxicity
3. FcRn: Neonatal Fc Receptor

Human IgG isotype	IgD1	IgG4	IgD
Hinge flexibility	++	+	++++
Binding of Fcγ3 of phagocytes (ADCC)	++++	-	-
Activation of C1q (CDC)	++	-	-
Binding of FcRn	++++	++++	-
In vivo serum half-life (days)	21	21	3

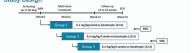
Interim PK/PD data for Phase II of GX-H9 in AGHD

Subjects with AGHD (Adult Growth Hormone Deficiency) received 0.1 mg/kg GX-H9 weekly (Group 1) or 0.3 mg/kg GX-H9 semi-monthly (Group 2) for 12 weeks subcutaneously. The PK/PD (Pharmacokinetics/Pharmacodynamics) results suggest a potential for both weekly and semi-monthly dosing of GX-H9. No SAE (Serious Adverse Effects), lipodystrophy and ADA (Anti-Drug Antibodies) have been reported to date. Phase II study in PGHD (Pediatric Growth Hormone Deficiency) is also on-going to investigate safety, efficacy and PK/PD of GX-H9.

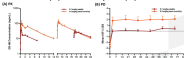
Objective

- 1) Evaluate the change in insulin-like growth factor 1 (IGF-1) levels in relation to time and dose strength
- 2) Assess the PK and PD profiles of GX-H9 in the treatment of AGHD
- 3) To evaluate the safety and tolerability of GX-H9 in the treatment of AGHD

Study Design



Pharmacokinetics (PK) and Pharmacodynamics (PD)



PK and PD of GX-H9 in AGHD: Subjects received 0.1 mg/kg GX-H9 weekly or 0.3 mg/kg GX-H9 semi-monthly for 12 weeks subcutaneously. (A) Serum IGF-1 concentration (ng/mL) profiles following GX-H9 administration. (B) Mean change from baseline in IGF-1 SDS for GX-H9 dosing groups. Each point indicates C_{max} value of IGF-1 SDS measured at 3 days of post-injection. Baseline was defined as the Day 1 pre-dose value.