Expanded Access to Sodium Phenylbutyrate and Taurursodiol Coformulation in Amyotrophic Lateral Sclerosis: Updates and Initial Learnings

Sandy Morris, BA, BS, MBA[1]; Machelle Manuel, PhD[2]; Philip Green, BS[1]; Robert Hebron, JD[1]; Cali Orsulak, BscPharm, BCPS, CDE[1]; Emily Engel, BS[2]; Jamie Timmons, MD[2]; Sabrina Paganoni, MD, PhD[3,4]

[1]I AM ALS, Washington, DC; [2]Amylyx Pharmaceuticals, Inc., Cambridge, MA; [3]Sean M. Healey and AMG Center for ALS & the Neurological Clinical Research Institute, Massachusetts General Hospital, Harvard Medical School, Boston, MA; [4]Spaulding Rehabilitation Hospital, Harvard Medical School, Boston, MA

BACKGROUND

- Despite the breadth of trials evaluating investigational therapies for amyotrophic lateral sclerosis (ALS), a recent analysis suggests that the majority of people living with ALS may be ineligible for these trials[1]
- In addition to innovations in ALS clinical trial design that have resulted in trials being more inclusive, implementation of expanded access programs (EAPs) can provide access to investigational therapies for people who are not eligible for clinical trials
- In early 2022, an intermediate-sized US EAP for sodium phenylbutyrate and taurursodiol (PB and TURSO) in ALS (NCT05286372) was implemented in parallel with the ongoing phase 3 PHOENIX trial in ALS (NCT05021536; EudraCT 2021-000250-26)
- Here, we provide an update on the implementation and execution of the PB and TURSO US ALS EAP along with initial learnings and best practices

UPDATES ON THE US PB and TURSO ALS EAP

As of October 2022

22 active sites

332 participant requests received

182 participants have consented

168 participants have been dosed

- On September 29, 2022, the US Food and Drug Administration approved PB and TURSO for the treatment of ALS in adults
- Individuals participating in the US EAP will work with their clinician to determine if they wish to remain on treatment
- **PB and TURSO is not approved for use by European Medicines Agency**

METHODS

Select enrollment criteria

- Diagnosis by a physician experienced in ALS management
- >36 months from symptom onset

Select exclusion criteria

- Current eligibility for or enrollment in a therapeutic study currently offered at the site
- Dependence on invasive mechanical ventilation

In addition to expanding PB and TURSO access for people living with ALS, the program aims to collect safety data in a broader population of people living with ALS, beyond those included in clinical trials

INITIAL LEARNINGS FROM AN ALS COMMUNITY PARTNERSHIP

Unique challenges of company-sponsored EAPs

- ✓ Legal and regulatory considerations may complicate reimbursement of costs incurred by EAP sites
- ✓ Administrative processes and complex requirements can create confusion for potential participants and sites
- ✓ Start-up timelines ranged for each site. Centralized institutional review board can streamline

Feedback from ALS community

- ✓ Open and clear communication is key
- ✓ Address areas of uncertainty in the process of EAP participation (eg, timeframe when sites are still undergoing activation)
- ✓ For future EAPs:
  - Make entry criteria as inclusive as possible
  - Expand data collection to capture comprehensive long-term efficacy and safety data

CONCLUSIONS

ALS EAPs can be designed to successfully launch without adversely impacting clinical trial enrollment

People living with ALS provide critical input and feedback in the development and ongoing implementation of EAPs, particularly as challenges and new opportunities arise

"What you allow is what will continue."

In memory of
Sandy Morris
July 2, 1966–August 28, 2022

"Please take my baton and run faster and farther."

For more information on the **Morris ALS Principles**
https://morrisalsprinciples.org

Acknowledgements
Funding support was provided by Amylyx Pharmaceuticals.

Reference
1. van Eijk RPA, et al. *Neurology*. 2019;92(5):e451-e460.

Disclosures
MM, JT, and EE are employees of Amylyx; PG, RH, and CO have nothing to disclose; SP reports research grants from Amylyx, Revalesio Corporation, Ra Pharma, Biohaven, UCB, Seelos, Alector, Target ALS, Tambourine, Columbia University, the Cullen Education and Research Fund, Clene, Prilenia, The ALS Association, the American Academy of Neurology, the Centers for Disease Control, ALS Finding a Cure, the Salah Foundation, the Spastic Paraplegia Foundation, the Muscular Dystrophy Association, and I AM ALS and consulting fees from Orion, Arrowhead, Orthogonal Neuroscience, Cytokinetics, Medscape, and Amylyx.

Presented at the 33rd International Symposium on ALS/MND; December 6–9, 2022