### PIVOT-HD Interim Results

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### Week 12 Interim Readout Met Key Objectives





PTC518 treatment resulted in dose-dependent lowering of HTT mRNA and protein levels in blood cells



PTC518 demonstrated desired CSF exposure with higher concentrations of free drug in the CSF than plasma



with no treatment-related serious adverse events and no reports of peripheral neuropathy



**CSF NfL levels remained stable** after 12 weeks of treatment with no treatment-related spikes



### **Key Objectives for Month 12 Interim Results**





Demonstrate durability of HTT protein lowering with PTC518 in blood cells



Demonstrate evidence of activity on disease biomarkers



Demonstrate evidence of CNS activity on functional clinical scales



Demonstrate continued safety and tolerability of PTC518 over 12 months



### Evidence of Durability of Effect, Safety and **Dose-Dependent Benefit on Clinical Measures**





**Dose-dependent and** durable lowering of HTT protein in blood at 12 months



**Dose-dependent** lowering of CSF mHTT levels



**Dose-dependent trends** of improvement on key clinical measures including TMS and cUHDRS



PTC518 was well tolerated with no evidence of treatment-related **NfL spikes** at 12 months

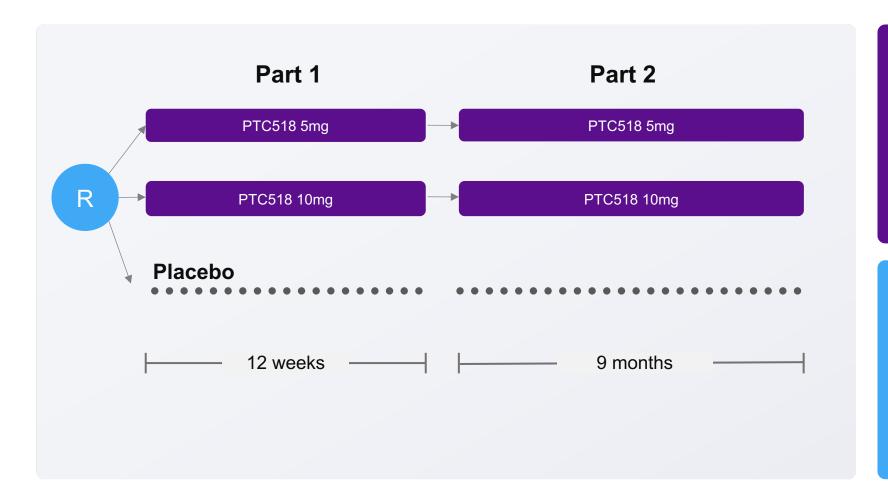


**FDA Partial Clinical Hold Lifted** 



### **PIVOT-HD Study Design**





#### **Week 12 Endpoints**

- Safety and tolerability
- Blood HTT mRNA and protein lowering
- CNS exposure

#### **Month 12 Endpoints**

- CSF HTT protein lowering
- CNS biomarkers
- HD clinical scales



### **Cohort of Month 12 Patient Characteristics**



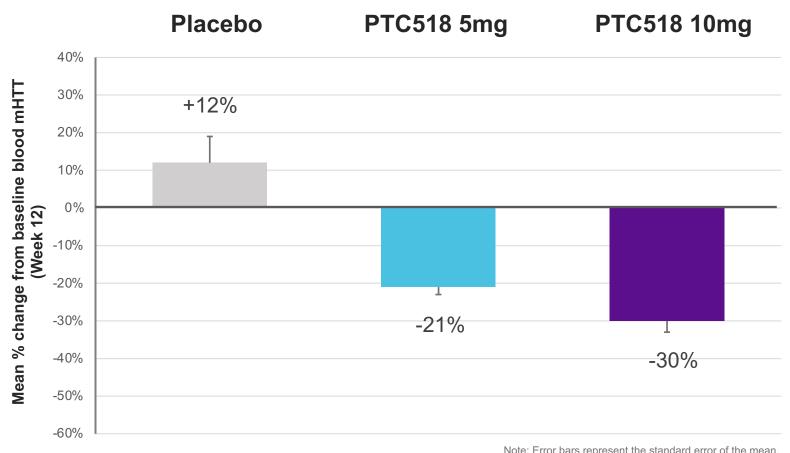
Category	Placebo (N=10)	PTC518 5mg (N=10)	PTC518 10mg (N=12)	Overall (N=32)
Age (years) mean	47.4	45.3	46.9	46.6
Gender, n (%)				
Male	7 (70.0%)	4 (40.0%)	7 (58.3%)	18 (56.3%)
Female	3 (30.0%)	6 (60.0%)	5 (41.7%)	14 (43.8%)
CAG length				
Mean (SD)	44.3 (2.00)	44.1 (2.13)	43.7 (2.31)	44.0 (2.11)
Min – Max	42 – 47	42 – 49	42 – 50	42 – 50
TFC (Total Functional Capacity) Score				
Mean	13	13	13	13

# Blood HTT Protein Lowering Results



### PTC518 Treatment Resulted in Dose-Dependent Blood mHTT Protein Lowering at Week 12 (June 2023)

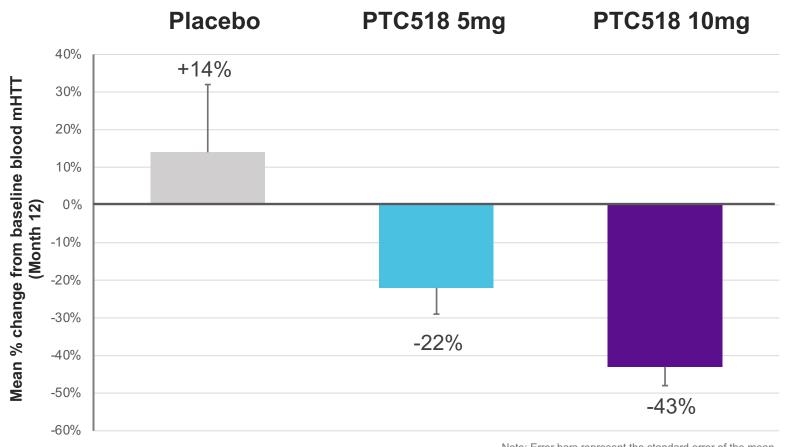




Dosedependent lowering of HTT protein



### PTC518 Treatment Results in Durable, Dose-Dependent Blood mHTT Protein Lowering at Month 12



Dose-dependent lowering of HTT protein with steady state reached at 6-9 months

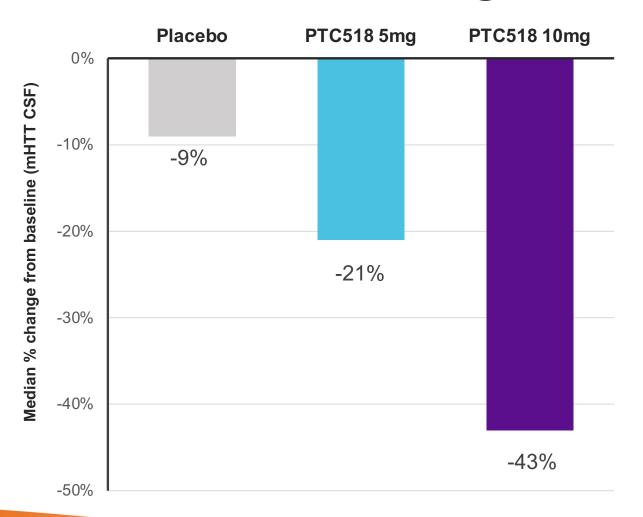


# Biomarker and Clinical Scale Results



# PTC518 Treatment Results in Dose-Dependent CSF mHTT Protein Lowering at Month 12



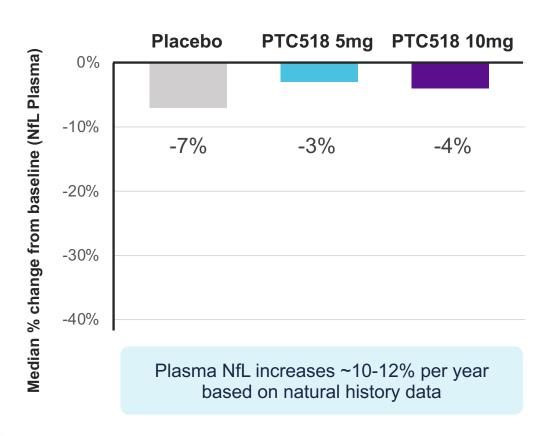


CSF protein
lowering
consistent with
protein lowering
in blood

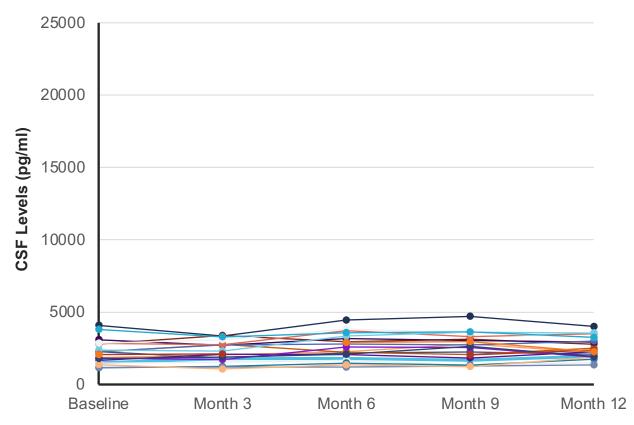
# NfL Levels Consistent Across Treatment Groups With No Evidence of Treatment-Related Spikes



Change in Plasma NfL Levels from Baseline to Month 12



#### **Individual Subject CSF NfL Trajectories**



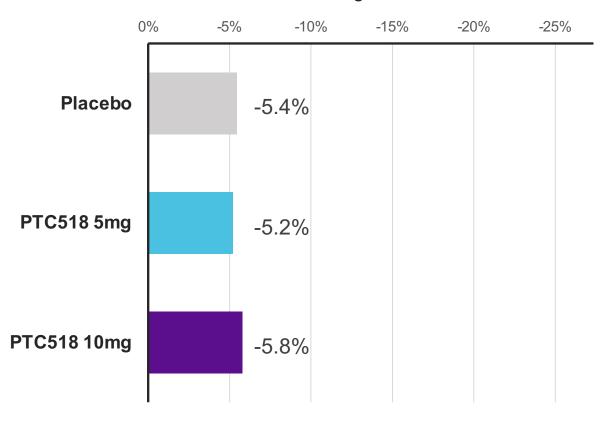
Note: One patient excluded due to non-treatment related viral syndrome



# Change in Striatum Brain Volume Consistent Across Treatment Groups



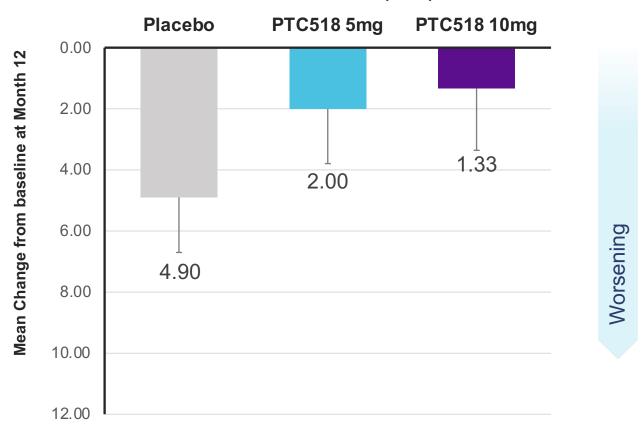
#### Median striatum % change from baseline to Month 12





# PTC518 Treatment Demonstrated Trend of PIVO Dose-Dependent Improvement of Total Motor Score



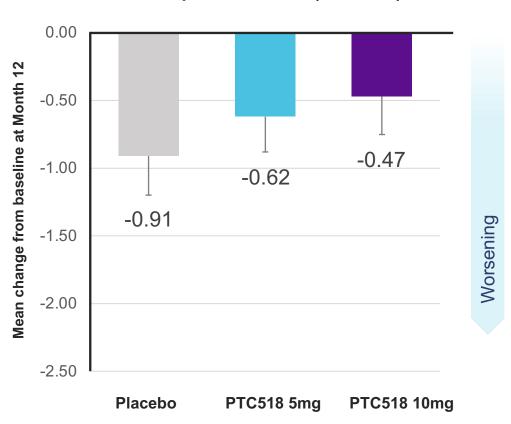




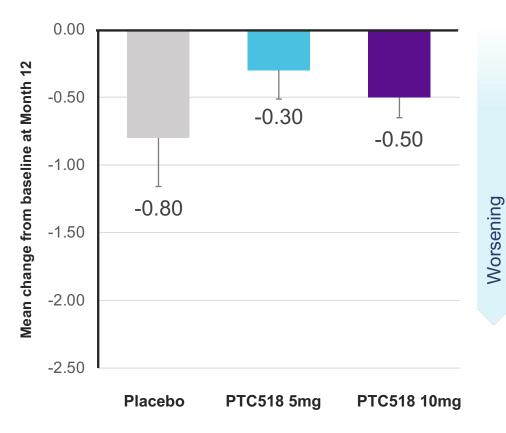
# PTC518 Treatment Demonstrated Trends of Improvement on Other Key Clinical Measures



#### **Composite UHDRS (cUHDRS)**



#### **Total Functional Capacity (TFC)**







### Safety



### PTC518 Treatment Continues to be Well Tolerated At Month 12





PTC518 was well tolerated, with no dose-limiting toxicities



Most common adverse events were nasopharyngitis, influenza, headache, and falls



Similar adverse event profile across all treatment groups, including placebo



## PTC518 Treatment Continues to be Well Tolerated at Month 12



Category	Placebo (N=10)	PTC518 5mg (N=12)	PTC518 10mg (N=10)
Subjects with at least one TEAE	8 (80.0)	9 (90.0)	11 (91.7)
Subjects with at least one serious TEAE	2 (20.0)	0	1 (8.3)
Subjects with at least one TEAEs leading to study treatment discontinuation	0	0	0
Subjects with at least one TEAE leading to death	0	0	0
Subjects with at least one treatment related AE#	1 (10.0)	5 (50.0)	6 (50.0)
Subjects with at least one TEAEs by maximum severity N (%)	8 (80.0)	9 (90.0)	11 (91.7)
Grade 1	5 (50.0)	4 (40.0)	3 (25.0)
Grade 2	1 (10.0)	4 (40.0)	7 (58.3)
Grade 3	2 (20.0)	1 (10.0)	1 (8.3)
Grade 4/5	0	0	0



# Judged by the investigator to be probably or possibly related to treatment

### Evidence of Durability of Effect, Safety and **Dose-Dependent Benefit on Clinical Measures**





**Dose-dependent and** durable lowering of HTT protein in blood at 12 months



**Dose-dependent** lowering of CSF mHTT levels



**Dose-dependent trends** of improvement on key clinical measures including TMS and cUHDRS



PTC518 was well tolerated with no evidence of treatment-related **NfL spikes** at 12 months



**FDA Partial Clinical Hold Lifted** 



# Additional Week 12 Data



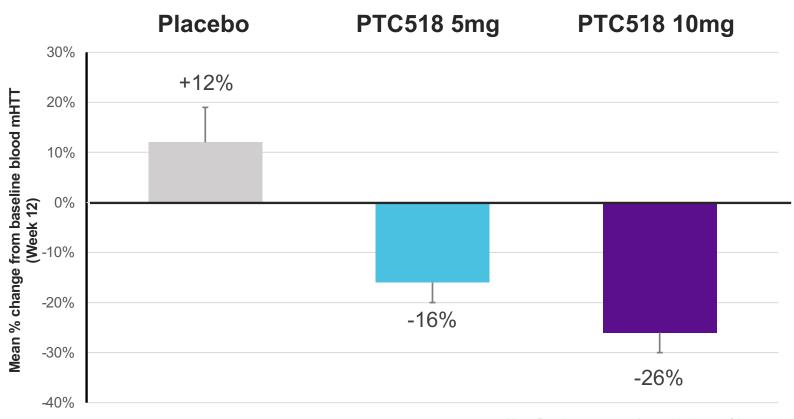
# Patient Characteristics of Additional Week 12 Subjects



Category	Placebo (Stage 2 N=18) (Stage 3 N=11)	PTC518 5mg (Stage 2 N=13) (Stage 3 N=13)	PTC518 10mg (Stage 2 N=14) (Stage 3 N=12)	Overall (Stage 2 N=45) (Stage 3 N=36)
Age (years) mean	48.6	48.7	47.0	48.1
Gender, n (%)				
Male	20 (69.0%)	12 (46.2%)	14 (53.8%)	46 (56.8%)
Female	9 (31.0%)	14 (53.8%)	12 (46.2%)	35 (43.2%)
CAG length				
Mean (SD)	43.7 (2.46)	43.9 (2.76)	44.4 (2.80)	44.0 (2.65)
Min – Max	40 - 49	40 – 50	41 – 50	40 – 50
TFC (Total Functional Capacity) Score				
Mean	12.5	12.4	12.4	12.4

# PTC518 Treatment Resulted in Dose-Dependent Blood mHTT Protein Lowering at Week 12





Dose-dependent lowering of HTT protein



## PTC518 Safety Profile Consistent for Additional Week 12 Subjects





PTC518 was well tolerated, with no dose-limiting toxicities



Most common adverse events were nasopharyngitis, influenza, headache, and falls



Similar adverse event profile across all treatment groups, including placebo



### Summary and Next Steps





Evidence of favorable CNS activity with trends of improvement on key clinical measures and continued safety



Continue PIVOT-HD and PIVOT-HD Open Label Extension studies



Begin preparations for Phase 3 clinical trial

