

Assessment of the safety and tolerability of Gelesis100 in subjects who reached a body mass index below 27 kg/m² in the pivotal GLOW study

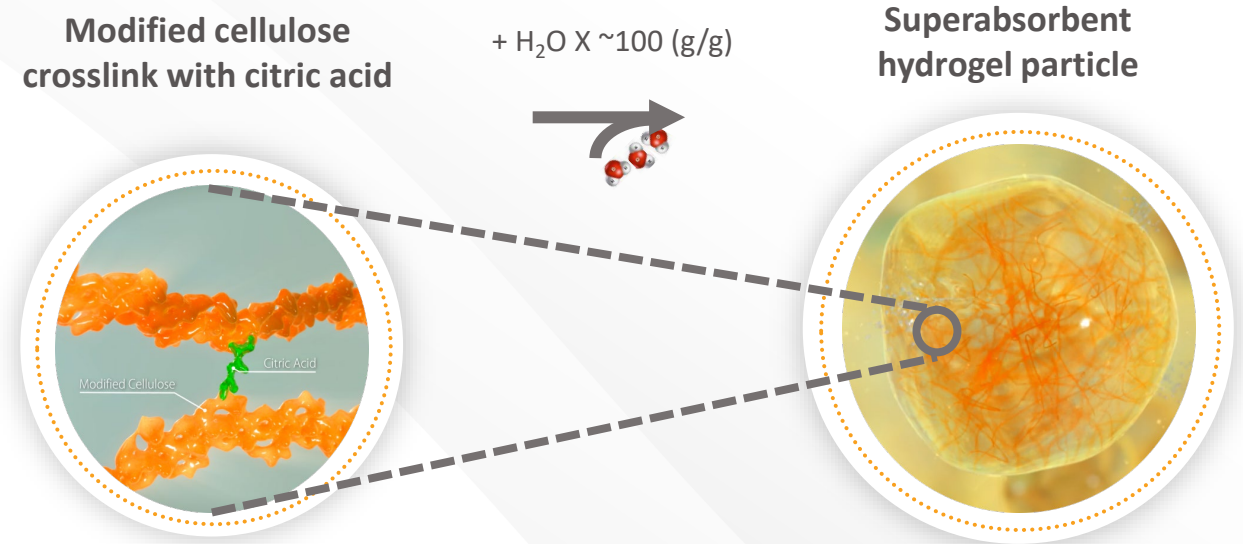
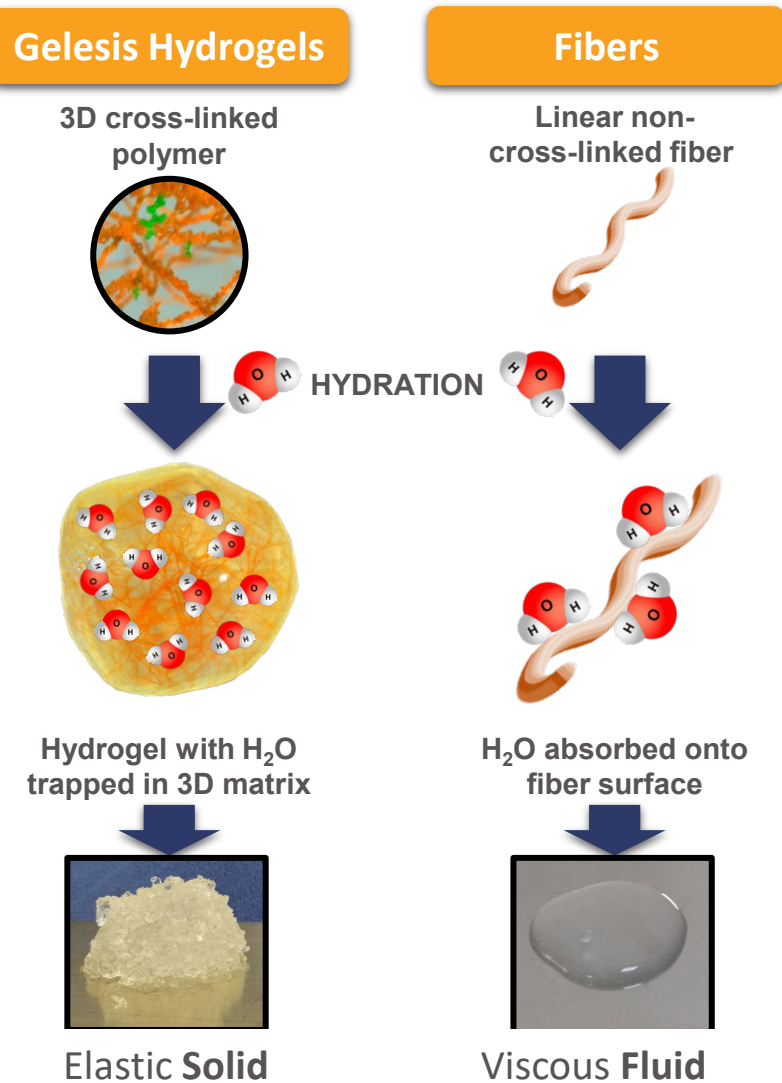
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Disclosures

- Funding/grant support/honorarium
 - Gelesis
 - Allurion
 - Aspire Bariatrics, Inc.
 - Astra Zeneca
 - BMIQ
 - Eisai, Inc.
 - ERX
 - Jamieson Wellness
 - Janssen
 - Myos Corporation
 - Novo Nordisk
 - Pfizer
 - Sanofi
 - United Heath Group
 - Zafgen
- Owns Gelesis stock options as a scientific advisor

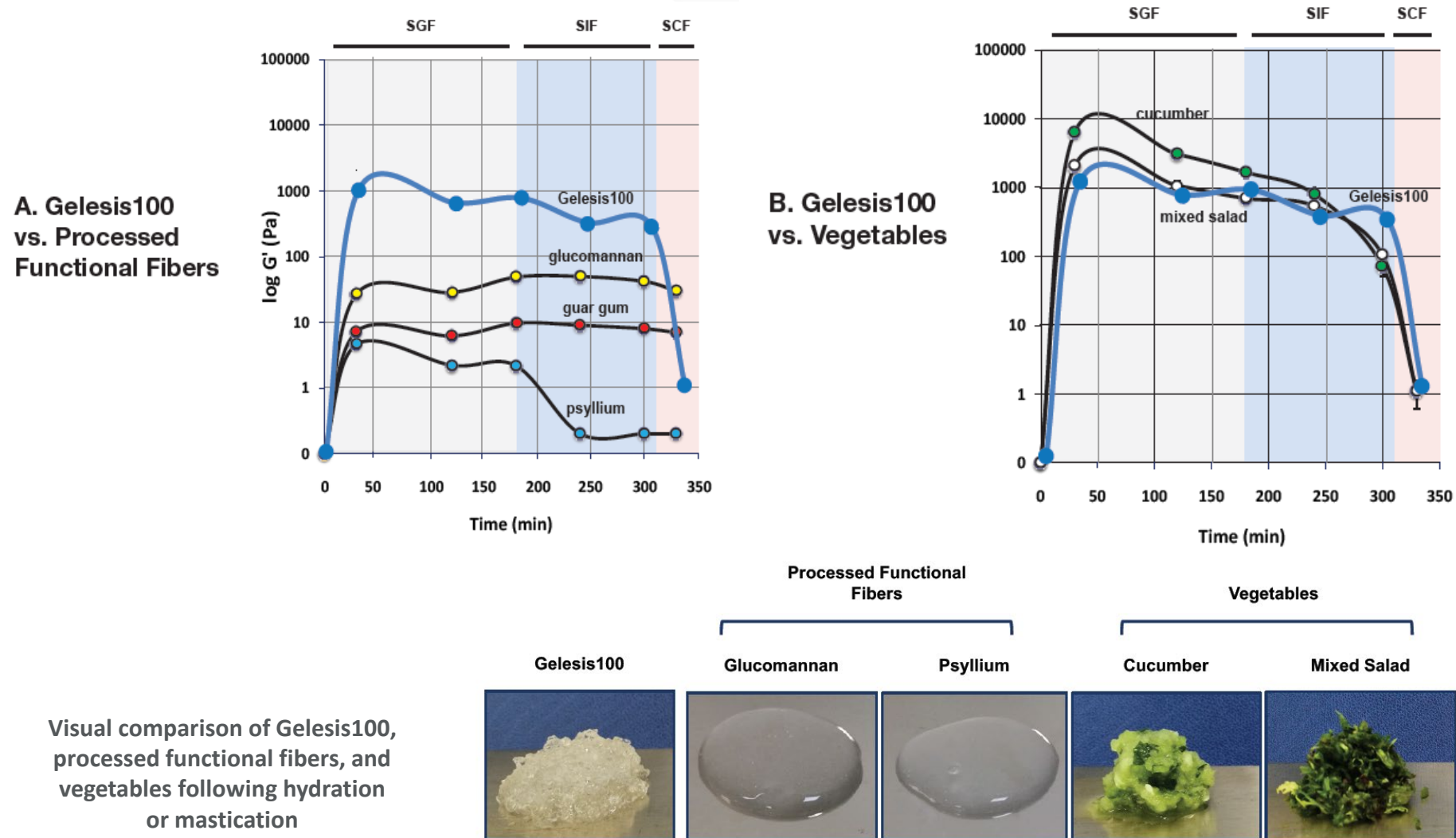
Gelesis Hydrogel Platform Technology...and how it is different than functional fibers



- Only superabsorbent made from **food-grade building blocks**
- **Biocompatible and biodegradable**
- Able to **absorb** amount of **water ~100x** its dry weight (superabsorbent)
- In fully hydrated state, ~1-2mm diameter with **elasticity/firmness** like leafy vegetables (eg, **lettuce**)
- Particles **don't cluster** and **maintain their 3D structure** in upper GI tract; however, partially **degrade in the large intestine**

Gelesis Hydrogels have similar mechanical properties to cellulosic vegetables

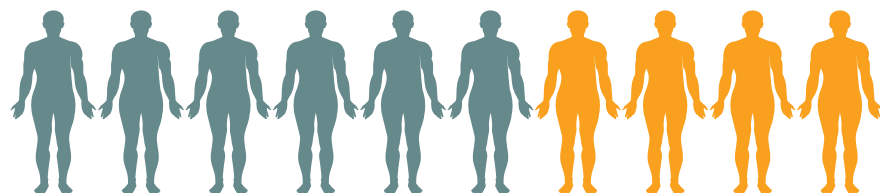
Comparison of elastic modulus between Gelesis100 and processed functional fibers (A) and vegetables (B)



GLOW: Key Findings

RESPONDERS

Adults achieving 5% or greater weight loss



6 in 10 adults

- 59% of adults with overweight or obesity had a clinically meaningful response to Gelesis100, losing on average 10% of their weight (22 pounds) or ~3.5 inches from their waist
- Gelesis100 doubled the odds of achieving 5% or greater weight loss compared with placebo

SUPER RESPONDERS

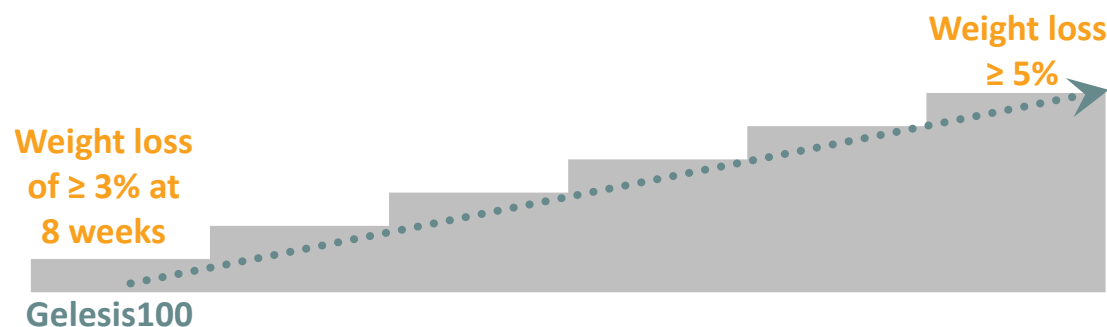
Adults achieving 10% or greater weight loss

26% of adults with overweight or obesity were super responders to **Gelesis100**, losing on average 14% of their weight (30 pounds)

Coprimary endpoint – Study results demonstrated statistically superior weight loss with Gelesis100 compared with the placebo group (–6% vs –4%, respectively; $P = 0.0007$) and did not meet the predefined super-superiority margin of 3%

Safety – Gelesis100 had no overall increased risks vs placebo, no serious adverse events, and a lower dropout rate

IN A POST HOC ANALYSIS, EARLY WEIGHT LOSS PREDICTED LONGER-TERM BENEFIT



- Clear and early separation between responders and nonresponders may allow for an early prediction of response
- Weight loss of $\geq 3\%$ as early as after 8 weeks' treatment predicted weight loss $\geq 5\%$ at 6 months, with sensitivity and specificity levels exceeding 80%

Gelesis100 [package insert]. Gelesis. Boston, MA; 2019. Greenway FL, et al. *Obesity*. 2019;27:205-216.

Gelesis100 (Plenity™): A novel, superabsorbent hydrogel for weight management

- Made from GRAS (**G**enerally **R**ecognized **A**s **S**afe) and food-grade building blocks
- Defined by FDA as a device
 - Not absorbed
 - Not metabolized
 - Mechanical MOA
- No significant difference in tolerability or safety profile with Placebo in GLOW Pivotal trial

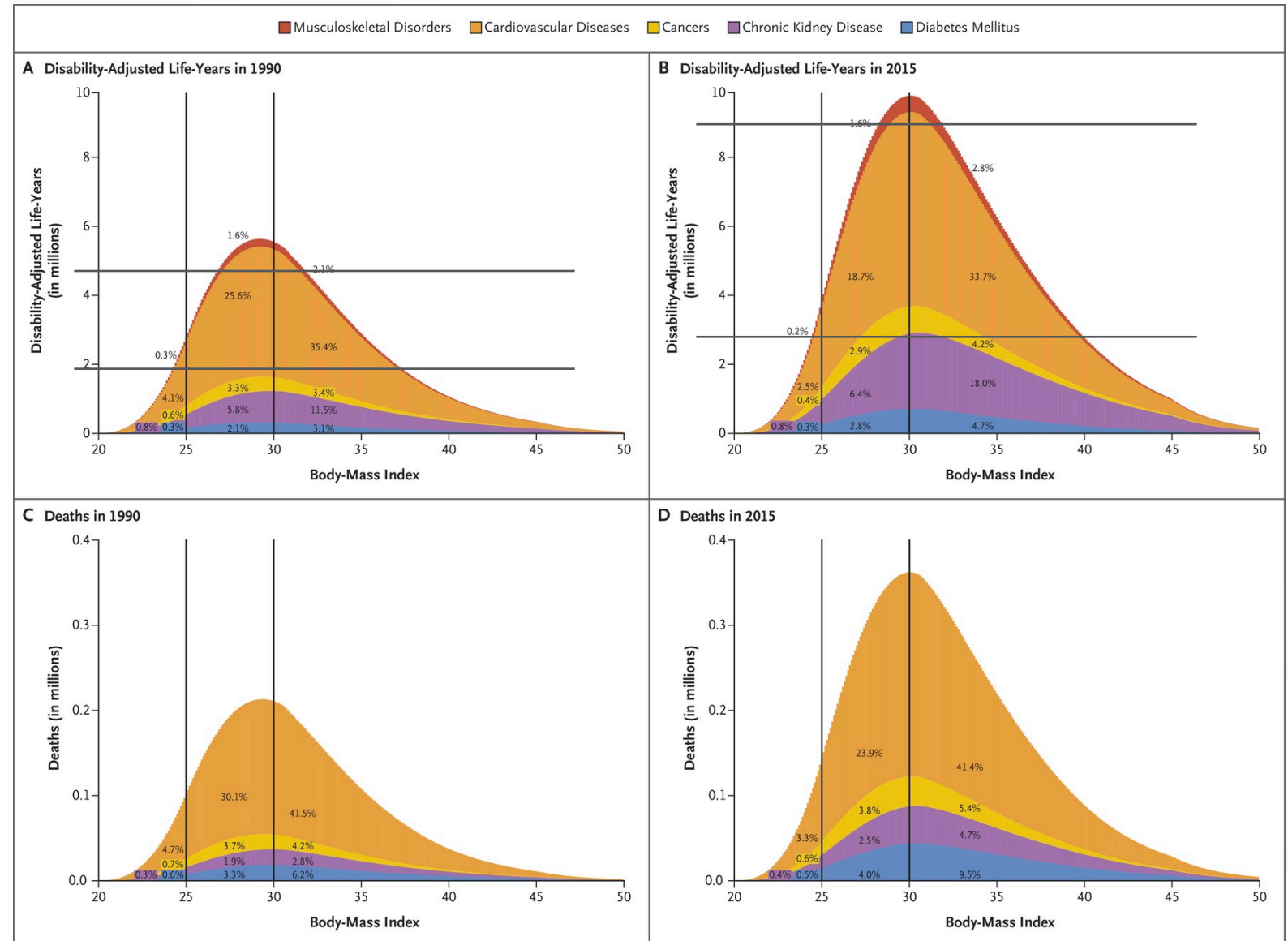
FDA cleared as an aid in weight management in adults with a BMI of **25–40 kg/m²**, when used in conjunction with diet and exercise.

Disease burden is significant in overweight (BMI 25 – 30 kg/m²), not just obesity

From 1990 through 2015, there was a relative increase of 28.3% in the global rate of death related to high BMI, from 41.9 deaths per 100,000 population in 1990 to 53.7 deaths per 100,000 population in 2015

37% of disability adjusted life years occurred in **overweight**

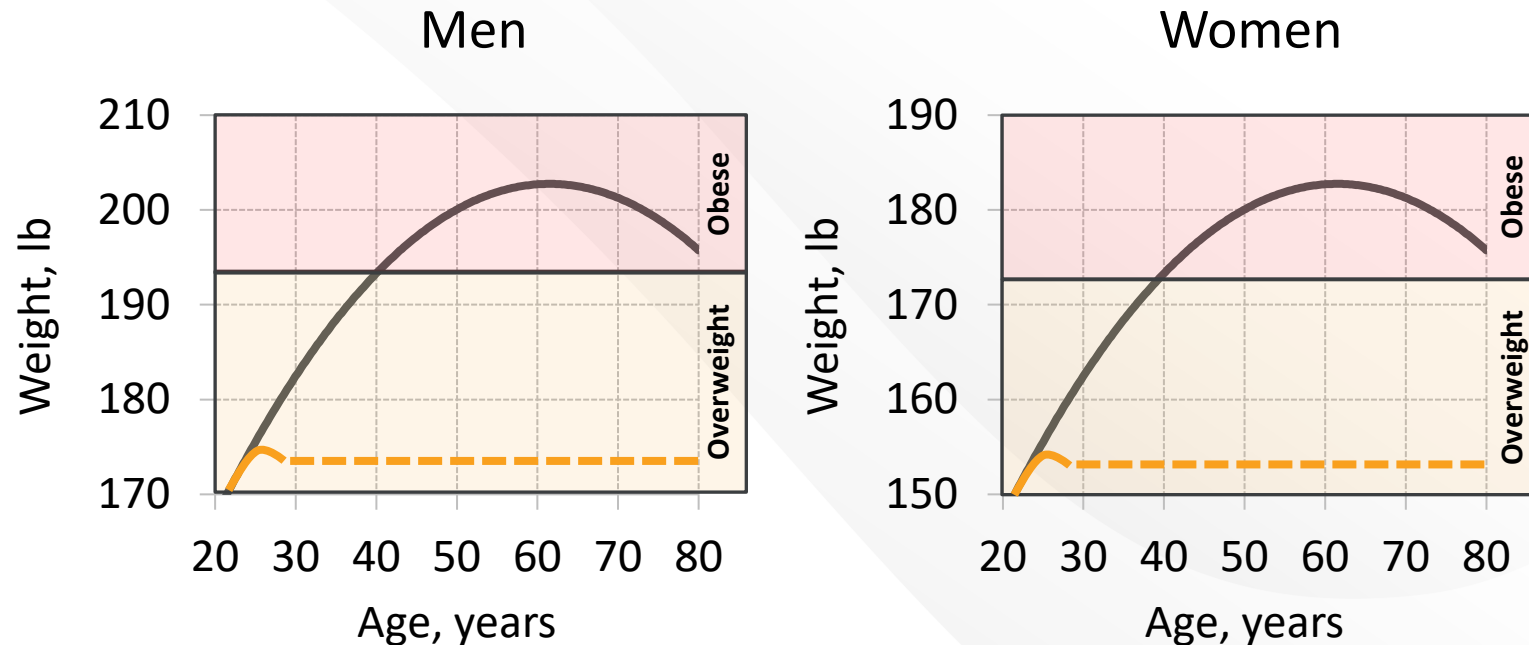
39% of deaths occurred in **overweight**



Should we break the cycle of weight gain in adults before they reach obesity?

- 120,877 US women and men who were free of chronic diseases followed from 1986 to 2006¹
 - Within each 4-year period, participants gained an average of 3.35 lb (5th to 95th percentile, -4.1 to 12.4)
 - Corresponds to a weight gain of 16.8 lb over a period of 20 years
- Weight gain at ages between 18 to 35 years is strongly associated with critical outcomes such as cancer risk and mortality²
- *Should we treat overweight early, before presence of co-morbidities, just like treating hypertension at 140/90³*

Average Weight by Age for American Men and Women



2007-2010 National health and Nutrition Examination Survey (CDC):
https://www.cdc.gov/nchs/data/series/sr_11/sr11_252.pdf

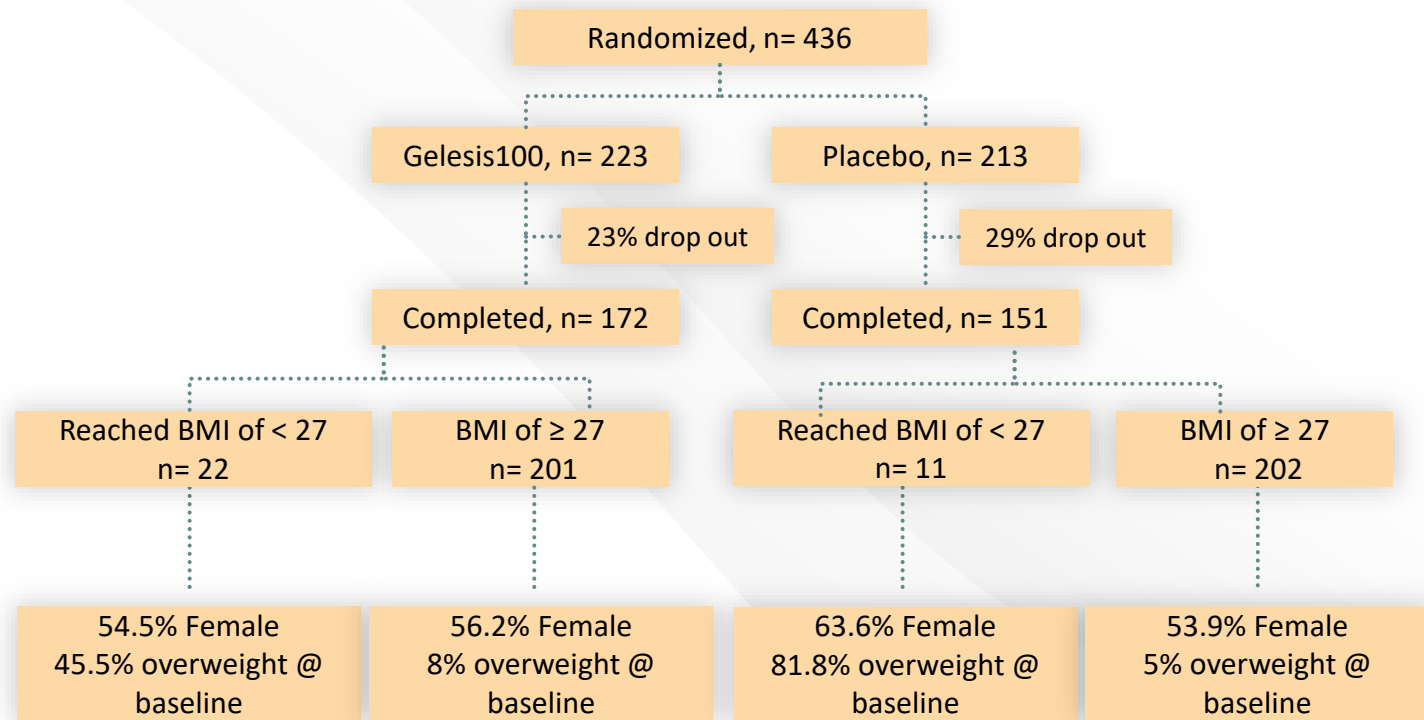
Subgroup Analysis: BMI < 27 kg/m²

- Rationale

- No prescribed options can address individuals who have BMI 25-27 kg/m² or have BMI 27-30 kg/m² without comorbidities

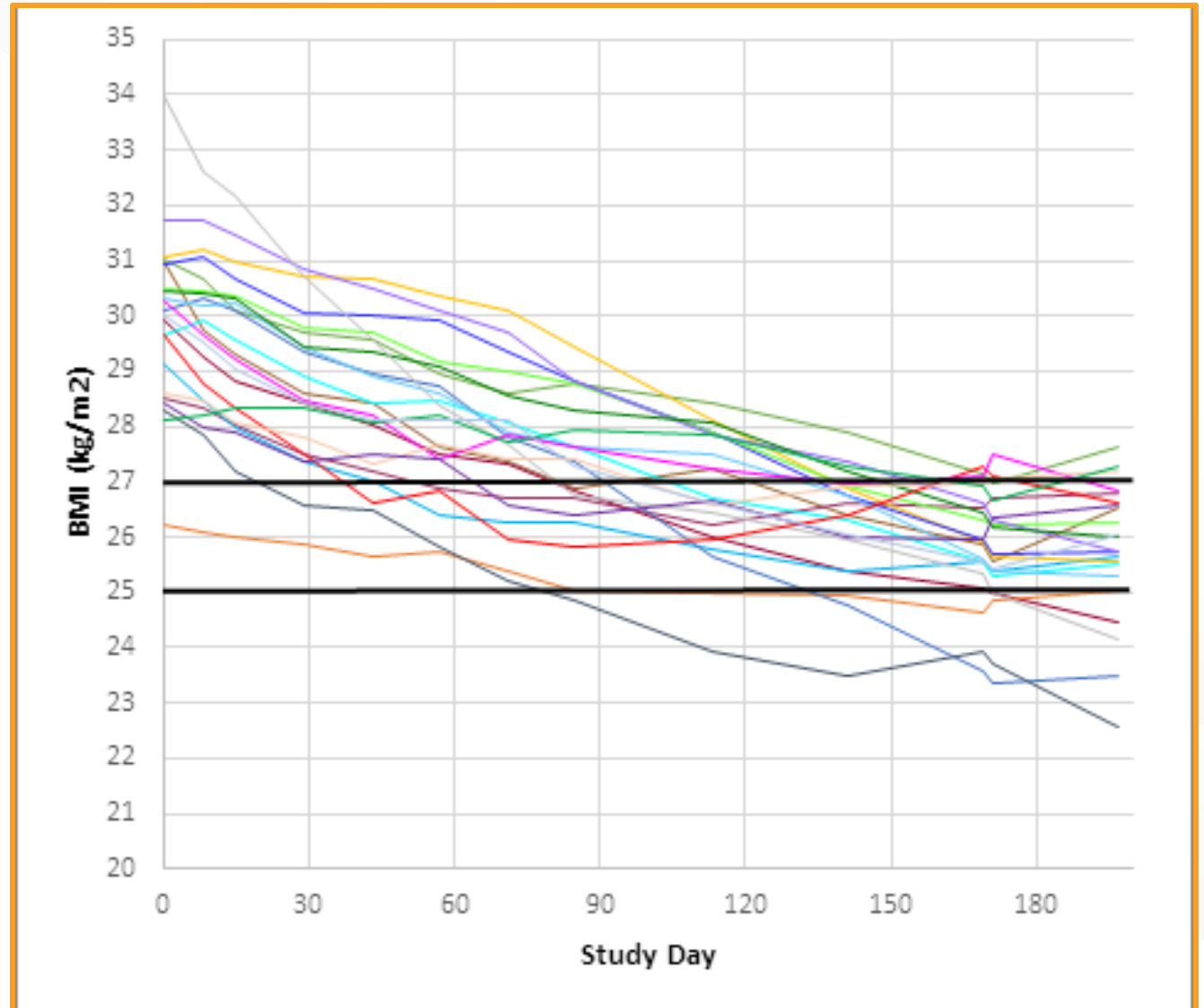
- Subgroup analysis

- Assess safety of Gelesis100 administration in subjects who reached BMI<27 kg/m² during the study



Weight loss over time for Gelesis100-treated subjects who reached BMI < 27 kg/m²

- Average time for subjects to reach BMI threshold of < 27 kg/m²: 106 ± 49 days
- Average time exposed to Gelesis100 once subjects reached BMI < 27 kg/m²: 60 days
- Total weight loss of 13.5% (95% CI -16% to -11%) while on Gelesis100
- Rate of weight loss tapered as it reached “normal BMI” goal



Gelesis100 Subjects With BMI <27 kg/m²: No Increased Safety Risk

All AEs vs. GI-Related AEs – Safety Population

AEs	Gelesis100 Subjects with BMI < 27 kg/m ²		Placebo Subjects with BMI ≥ 27 kg/m ²		Difference		Gelesis Subjects with BMI ≥ 27 kg/m ²		Difference	
	# Events	#Subjects with Event [% (n/N)]	# Events	#Subjects with Event [% (n/N)]	95% CI ^a	p-value ^a	# Events	# Subjects with Event [% (n/N)]	95% CI ^a	p-value ^a
All	32	72.7% (16/22)	26	81.8% (9/11)	-9.1% (-36.7%, 28.4%)	0.69	404	71.1% (143/201)	1.6% (-22.4%, 18.7%)	1
GI-Related	10	31.8% (7/22)	7	27.3% (3/11)	4.6% (-33.0%, 35.0%)	1	176	44.3% (89/201)	-12.5% (-31.0%, 11.6%)	0.36

a. Difference taken for comparability between the 2 groups (T - C). 95% Newcombe Corrected CI and Fisher's Exact p-value for the difference in proportions.

Mostly Mild GI Adverse Events of Short Duration

- All AEs resolved without complications

Subject	Adverse Event Description	Severity	Relatedness	Duration
1	Flatulence	Mild	Possibly	4 months
2	Abdominal pain after intake for 10 min with looser stools than normal	Mild	Most probably	10 days
3	Bloating for 30min after meal	Mild	Most probably	5 months
4	Bloating without pain	Mild	Possibly	4 days
5	Diarrhea	Mild	Probably not	3 days
6	Bloating for 1 week	Moderate	Possibly	7 days
7	Inguinal Hernia	Mild	Not related	UNKN

Conclusions

- Consistent with the larger GLOW Cohort, Gelesis100 demonstrated no safety signal in this smaller subgroup who reached lower BMI. The tolerability and safety profile was no different from placebo
- There was no difference in GI-related adverse effects between groups
- Gelesis100 is FDA-cleared as an aid in weight management for patients who have a BMI as low as 25 kg/m² with or without co-morbidities
- A post-marketing registry is planned to prospectively collect more data on efficacy and safety in this population to further support these findings



Thank you

Back-up slides

Gelesis100 Subjects With BMI <27: No Increased Safety Risk

No difference in safety when compared to placebo subject who reached BMI <27 (n=11) or for the entire placebo cohort (n=211)

		Gelesis100 Subjects with BMI < 27 kg/m ²		Gelesis100 Subjects with BMI > 27 kg/m ²		Difference	
		Number Events	Number Subjects with Event [% (n/N)]	Number Events	Number Subjects with Event [% (n/N)]	95% CI ^a	p-value ^a
	All AEs	32	72.7% (16/22)	404	71.1% (143/201)	1.6% (-22.4%, 18.7%)	1
	Blood and lymphatic system disorders	1	4.5% (1/22)	0	0.0% (0/201)	4.5% (-0.4%, 24.9%)	0.0987
	Eye disorders	0	0.0% (0/22)	6	3.0% (6/201)	-3.0% (-6.7%, 15.6%)	1
	GI disorders	10	31.8% (7/22)	176	44.3% (89/201)	-12.5% (-31.0%, 11.6%)	0.3649
	General disorders	1	4.5% (1/22)	8	4.0% (8/201)	0.6% (-5.3%, 21.0%)	1
	Hepatobiliary disorders	0	0.0% (0/22)	1	0.5% (1/201)	-0.5% (-3.2%, 18.0%)	1
	Infections and infestations	11	36.4% (8/22)	83	32.8% (66/201)	3.5% (-16.1%, 27.2%)	0.8125
	Injury, poisoning and procedural complications	2	9.1% (2/22)	21	10.0% (20/201)	-0.9% (-10.0%, 21.0%)	1
	Investigations	0	0.0% (0/22)	12	5.0% (10/201)	-5.0% (-9.2%, 13.7%)	0.6036
	Metabolism and nutrition disorders	0	0.0% (0/22)	3	1.5% (3/201)	-1.5% (-4.7%, 17.0%)	1
	Musculoskeletal and connective tissue disorders	4	18.2% (4/22)	34	13.4% (27/201)	4.7% (-8.7%, 28.0%)	0.52
	Neoplasms benign, malignant, and unspecified (incl cysts and polyps)	0	0.0% (0/22)	1	0.5% (1/201)	-0.5% (-3.2%, 18.0%)	1
	Nervous system disorders	2	9.1% (2/22)	34	12.4% (25/201)	-3.3% (-12.7%, 18.6%)	1
	Psychiatric disorders	0	0.0% (0/22)	4	2.0% (4/201)	-2.0% (-5.3%, 16.6%)	1
	Renal and urinary disorders	0	0.0% (0/22)	3	1.5% (3/201)	-1.5% (-4.7%, 17.0%)	1
	Reproductive system and breast disorders	0	0.0% (0/22)	4	2.0% (4/201)	-2.0% (-5.3%, 16.6%)	1
	Respiratory, thoracic, and mediastinal disorders	0	0.0% (0/22)	7	3.0% (6/201)	-3.0% (-6.7%, 15.6%)	1
	Skin and subcutaneous tissue disorders	0	0.0% (0/22)	5	2.5% (5/201)	-2.5% (-6.0%, 16.1%)	1
	Vascular disorders	1	4.5% (1/22)	2	1.0% (2/201)	3.6% (-1.7%, 23.9%)	0.2688

AE = adverse event, CI = confidence interval, GI = gastrointestinal.

a. Difference taken for comparability between the 2 groups (T - C). 95% Newcombe Corrected CI and Fisher's Exact p-value for the difference in proportions.