

Evaluation of the Clinical Stage FXR Agonist FXR314 in Human Primary Cell 3D Models of Crohn's Disease and Ulcerative Colitis

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ONVO 3D Disease Models Can Enable Better Clinical Outcomes

- Organovo creates exceptional 3D models using bioprinting and other 3D tissue technologies
- Models created with cells isolated directly from IBD patients (Crohn's Disease or Ulcerative Colitis, biologic naïve or exposed, varying disease severity)
- Models faithfully replicate various aspects of the IBD disease process and human biology
- Models can be used to identify new mechanisms of action, validate novel targets via testing of various entities (chemicals, SiRNAs, ...), and study the effects of clinically approved treatment paradigms
- Testing of broad donor sets from a biobank allows to understand population response to a drug or to target modulation





ONVO Bioprinting Inflammatory Bowel Disease Model

Cell expansion







- **Proprietary Media** •
- Matrix •







- Reproducible •
- **Scalable** •
- Cell dense •
- **Physiologically accurate** • biology

- **Intestinal Crypts** ٠
- **Endothelial cells** •
- Smooth muscle cells ۲
- Fibroblasts ٠

- **Cell Mixture** •



- Multimodal •
- **Biocompatible** •
- **Spatial control** •
- **Complex Geometries** ٠

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3D Bioprinting Recapitulates Cellular Organization of Diseased and Healthy Intestinal Cell Donors

- Polarized epithelium with functional tight junctions, transporters (P-gp, BCRP)
- Specialized epithelial cell types
- Physiological barrier function





3D Models from IBD Patients Demonstrate Impaired Epithelial Barrier Function and Increased Inflammation and Fibrosis







FXR Agonism Is An Important Effector in IBD

- FXR is a nuclear hormone receptor critical for maintaining bile acid, lipid and intestinal homeostasis
- Studies in null mice demonstrate a protective role of FXR in IBD
- Human genetics studies have reported the existence of FXR SNP associated with intrahepatic cholestasis of pregnancy and IBD
 - FXR SNP rs56163822 (FXR-1G->T) leads to reduces protein expression
 - Patients with Crohn's disease (CD) carrying the FXR-1G->T variant exhibit greater disease severity and earlier progression to surgery
- The biomarker of intestinal FXR activity, FGF19, is reduced in CD patients



FXR314 Potential Role in IBD – Study Design

- Evaluation of FXR314, a potent and selective non-bile acid FXR agonist
- Conducted in 3D models of IBD:
 - Crohn's disease: 5 human diseased donors
 - Ulcerative colitis: 3 human diseased donors
- Endpoints:
 - Target engagement: intestinal biomarker FGF19
 - Barrier permeability: FITC-Dextran 4 kDa (FD-4)
 - Fibrosis: Procollagen type I N-terminal propeptide (P1NP)





Demonstrated Target Engagement by FXR314 in CD and UC

- Evaluated FGF19 a direct biomarker of intestinal FXR activity
- Potent and dose-dependent activation of FGF19 by FXR314 in all CD and UC donors
- Degree of activation varies between the different donors



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FXR314 Improves Barrier Integrity in CD and UC donors

- Intestinal permeability is determined by FD4 assay
- Diseased tissues (CD and UC) have intrinsically different baseline permeability values reflective of the disease state
- FXR314-induced decrease in barrier permeability observed in a subset of CD donors, and all UC donors



Baseline Barrier Integrity



FXR314 Treated Donors

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FXR314 Improves Fibrosis in CD and UC donors

- Evaluated P1NP as a marker of fibrosis
- FXR314-induced decrease in fibrotic marker observed in all CD and UC donors



CD Donors



UC Donors

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FXR314 MOA Linked to Epithelial Repair and Fibrosis Resolution Upstream of Anti-inflammatory Treatments



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Conclusions

- Organovo 3D models (bioprinting and other tissue technologies) replicate various aspects of the IBD disease process and human biology
- 3D Models can be used to identify new mechanisms of action, validate novel targets, study the effects of clinically approved treatment paradigms and understand population response
- The potent non-bile acid FXR agonist FXR314 is effective in 3D models of Crohn's Disease and Ulcerative Colitis:
 - Demonstrated target engagement (FGF19) in all CD and UC donors
 - Improvement of intestinal barrier function in a subset of CD donors, and all UC donors
 - Improvement of fibrosis (P1NP marker) in all CD and UC donors
- A Phase 2 trial in Ulcerative Colitis is being planned

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