

# Setmelanotide in Patients With Obesity Due to Heterozygous Variants in *POMC*, *LEPR*, *NCOA1*, or *SH2B1* Genes: Design of EMANATE— a Placebo-Controlled Phase 3 Trial

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\* Potential conflict of interest may exist. Refer to the Meeting App.

## Summary

- EMANATE (NCT05093634) is a Phase 3, randomized, double-blind, placebo-controlled trial of setmelanotide in patients with obesity and *POMC*, *PCSK1*, *LEPR*, *NCOA1*, or *SH2B1* variants
- The trial will provide evidence for setmelanotide treatment for potential weight management in an expanded population of patients with rare genetic diseases of obesity

## Introduction

- Variants of genes in the melanocortin-4 receptor (MC4R) pathway, including variants in the leptin receptor gene (*LEPR*), proopiomelanocortin gene (*POMC*), proprotein convertase subtilisin/kexin type 1 gene (*PCSK1*), nuclear receptor coactivator 1 gene (*NCOA1*; also referred to as *SRC1*), and SH2B adaptor protein 1 gene (*SH2B1*), are associated with dysregulation of food intake and energy expenditure<sup>1-3</sup>
- In a Phase 2 trial, the MC4R agonist setmelanotide led to ≥5% reduction in body weight after 3 months in 34% of patients with heterozygous *POMC*, *PCSK1*, or *LEPR* insufficiency<sup>4</sup>; 30% with obesity due to *SRC1* deficiency caused by a variant in *NCOA1*<sup>5</sup>; and 37% with *SH2B1* deficiency (including chromosomal 16p11.2 deletion encompassing *SH2B1*)<sup>6</sup>
- EMANATE is a Phase 3, randomized, double-blind, placebo-controlled trial of setmelanotide in patients with obesity and *POMC*, *PCSK1*, *LEPR*, *NCOA1*, or *SH2B1* variants with 4 similar independent substudies based on genetic variant (NCT05093634)

## Objective

- To evaluate the safety and efficacy of setmelanotide for reducing body weight and hunger in patients with obesity and genetic variants in the MC4R pathway

## Methods

### Patient Population

- The trial will enroll ~400 eligible patients (Table and Box)

**Table.** Key Eligibility Criteria

Key inclusion criteria	Key exclusion criteria
Preidentified genetic variant in the MC4R pathway Aged 6-65 years Current obesity defined as <ul style="list-style-type: none"> <li>BMI ≥30 kg/m<sup>2</sup> in patients ≥18 years old</li> <li>BMI ≥95th percentile in patients 6-17 years old</li> </ul> Reported history of <ul style="list-style-type: none"> <li>Childhood obesity</li> <li>Hyperphagia</li> <li>Lifestyle intervention of diet and exercise</li> </ul>	≥2% weight loss in the prior 3 months and/or recent bariatric surgery Reported history of significant liver or kidney disease Significant psychiatric disorder(s) or suicidal ideation, attempt, or behavior Clinically significant pulmonary, cardiac, or oncologic disease and/or HbA <sub>1c</sub> >10% at screening

BMI, body mass index; HbA<sub>1c</sub>, glycated hemoglobin; MC4R, melanocortin-4 receptor.

### Box. Gene Variants in MC4R Pathway Eligible for Enrollment

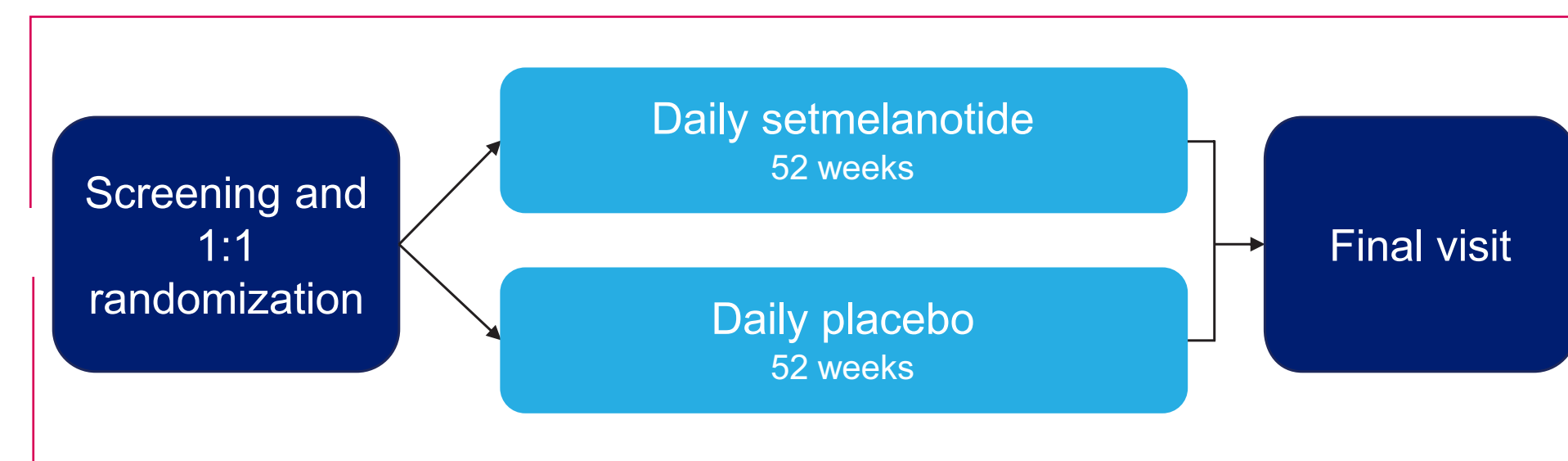
Substudy	Variant type	Included genes	ACMG classification
035a	Heterozygous	<i>POMC</i> <i>PCSK1</i>	Pathogenic, likely pathogenic, suspected pathogenic
035b	Heterozygous	<i>LEPR</i>	Pathogenic, likely pathogenic, suspected pathogenic
035c	Heterozygous, homozygous, or compound heterozygous	<i>NCOA1</i>	Pathogenic, likely pathogenic, VUS <sup>a</sup>
035d	Heterozygous, homozygous, or compound heterozygous	<i>SH2B1</i> Chromosomal 16p11.2 deletion encompassing <i>SH2B1</i>	Pathogenic, likely pathogenic, VUS

<sup>a</sup>No *NCOA1* variants are deemed pathogenic or likely pathogenic because of the gene being classified as a "gene of uncertain significance" clinically.  
ACMG, American College of Medical Genetics; MC4R, melanocortin-4 receptor; VUS, variant of uncertain significance.

### Trial Design

- Within each substudy, patients will be randomized 1:1 to receive daily subcutaneous injections of setmelanotide or placebo for 52 weeks (Figure)

**Figure.** Trial design for EMANATE, a Phase 3, randomized, double-blind, placebo-controlled trial.



### Outcome Measures

- The primary outcome is the mean change in body weight, assessed as percent change in body mass index, in patients who receive setmelanotide compared with placebo
- Key secondary outcomes include additional measurements of effects on weight-related, hunger, and hyperphagia endpoints
- Safety will be assessed by frequency and severity of adverse events

### Current Status

- The EMANATE trial is currently ongoing and enrolled the first patient in April 2022

## Conclusions

- This placebo-controlled Phase 3 trial will generate evidence for setmelanotide treatment for potential improvements in weight- and hunger-related measures in an expanded population of patients with obesity and rare genetic variants in the leptin-melanocortin pathway

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