

Disclosures

• I have acted as a speaker or member of a speaker bureau for Bayer, BioMarin, CSL Behring, Roche, Takeda and Viatris Pharmaceuticals, and as a consultant or ad hoc speaker/consultant for Bayer, BioMarin, Pfizer, Takeda and Viatris Pharmaceuticals



Hemophilia A



People with hemophilia A lack the blood clotting protein FVIII because the gene is faulty



Low factor VIII (FVIII) levels can result in **excessive bleeding** or bleeding with no apparent cause

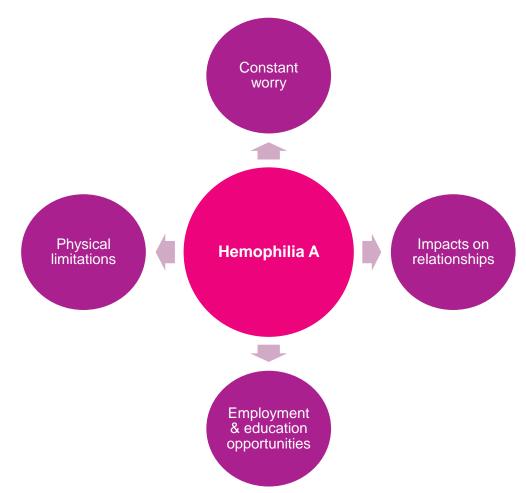


Current treatments are regular injections with clotting FVIII concentrate or non-factor therapies (emicizumab)



Hemophilia A can **negatively affect mental health, relationships, employment, and overall well-being**^{1,2}

Hemophilia A can negatively affect health-related quality of life (HRQOL)





Valoctocogene roxaparvovec and HRQOL outcomes

Valoctocogene roxaparvovec is a gene therapy for severe hemophilia A that delivers functional genetic instructions for producing FVIII

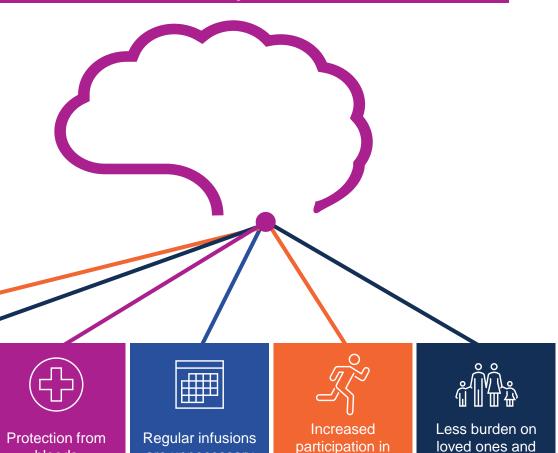


Valoctocogene roxaparvovec provides **protection from bleeding with a single infusion**, with the potential to reduce the burden and consequences of living with hemophilia A

GENEr8-1 is a phase 3 trial to test how safe valoctocogene roxaparvovec treatment is and how well it protects against bleeding¹⁻³

Potential to reduce disease burden of hemophilia A⁴

are unnecessary



physical activity

Confidence in

treatment efficacy

Travel without

worry

bleeds



caregivers

^{1.} Ozelo M, et al. *N Engl J Med.* 2022;386(11):1013-25. **2.** Mahlangu J, et al. *N Engl J Med.* 2023;388:694-705.

^{3.} Madan B, et al. J Thromb Haemost. 2024;22:1880-1893. 4. Krumb E, et al. Res Pract Thromb Haemost. 2021;5:e12567.

GENEr8-1 study design



Eligibility:

- Adult men with severe hemophilia A (FVIII ≤1 IU/dL)
- Previously receiving FVIII prophylaxis
- No history of FVIII inhibitors or antibodies against the capsid
- No significant liver dysfunction



134 participants enrolled and received an infusion of valoctocogene roxaparvovec

The modified intention-to-treat (mITT) population included the **132 participants** who were HIV-negative



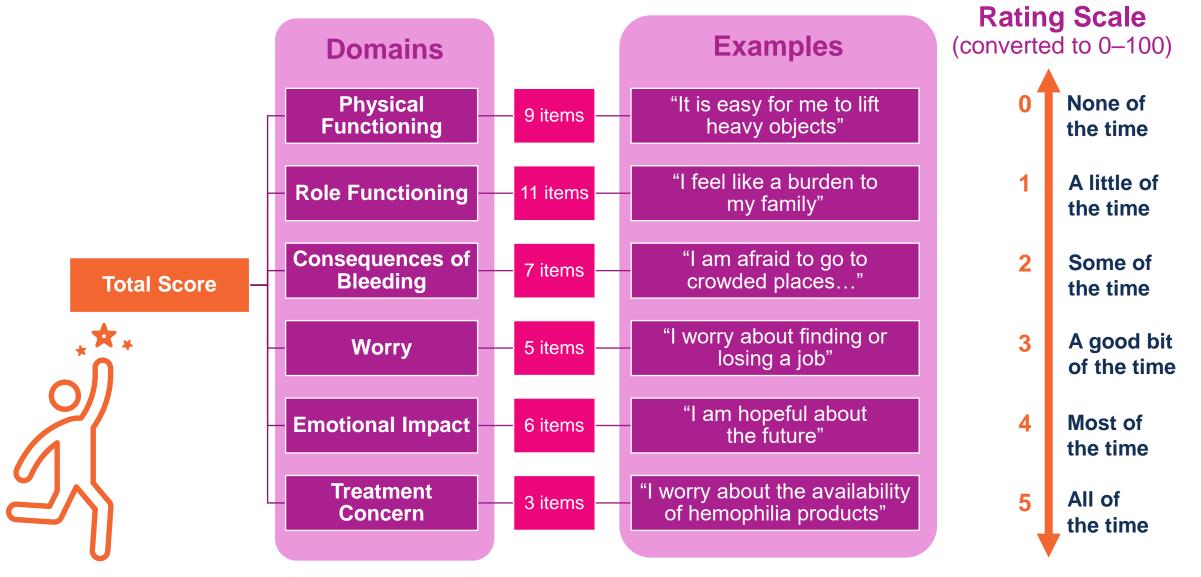
To ensure results are based only on the effects of valoctocogene roxaparvovec, **HRQOL** data were analyzed by excluding data after participants restarted prophylaxis with FVIII or emicizumab

Results with those data included were similar





Haemo-QOL-A measures HRQOL in people with hemophilia



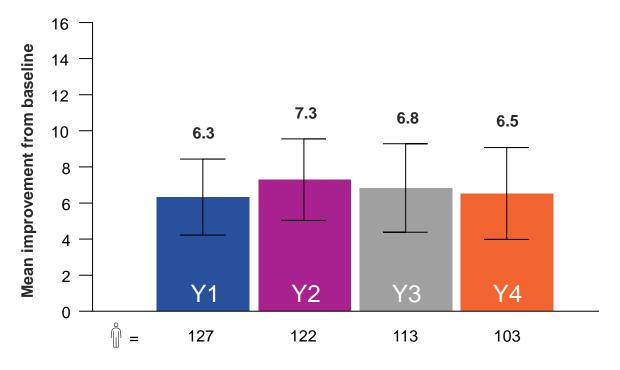


Valoctocogene roxaparvovec improved Haemo-QOL-A Total Score across 4 years

mITT population



The improvements at the end of each year were deemed clinically meaningful¹



^{1.} Quinn J, et al. Patient Relat Outcome Meas. 2022;13:169-80.

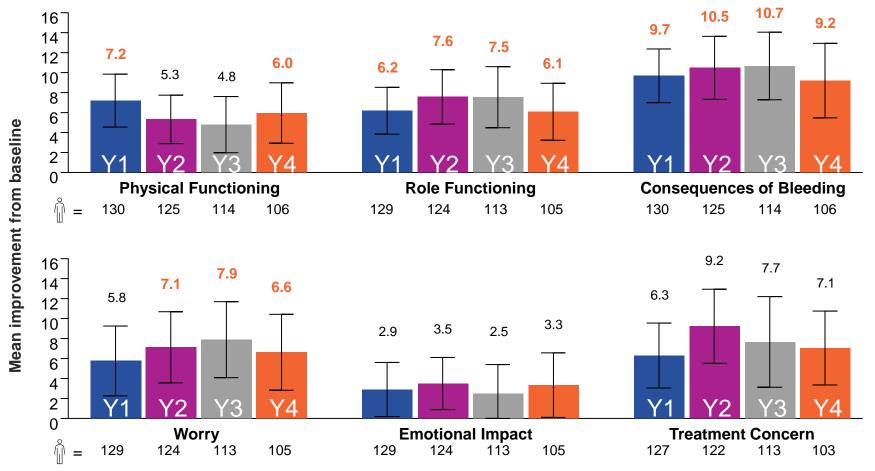
Change from baseline results are based on available data at each time point. Error bars represent 95% confidence intervals. Data after participants resumed prophylaxis were not included.





Consistent improvements for Haemo-QOL-A domain scores

mITT population





Improvements ≥6.0 points are considered clinically meaningful¹

A CID for the Treatment Concern domain has not yet been estimated. Change from baseline results are based on available data at each time point. Error bars represent 95% confidence intervals. Data after participants resumed prophylaxis were not included.





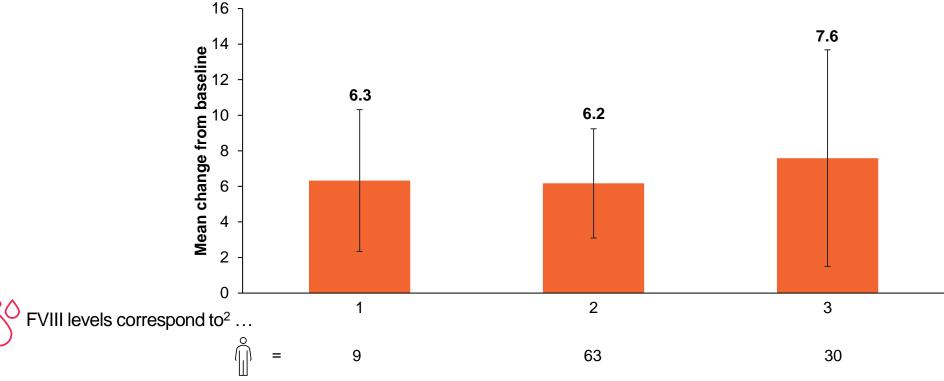
^{1.} Quinn J, et al. Patient Relat Outcome Meas. 2022;13:169-80.

HRQOL improvements were partly independent of FVIII activity

mITT population



Improvement in Haemo-QOL-A Total Score at the end of year 4 was deemed clinically meaningful for participants with FVIII levels below 5%¹

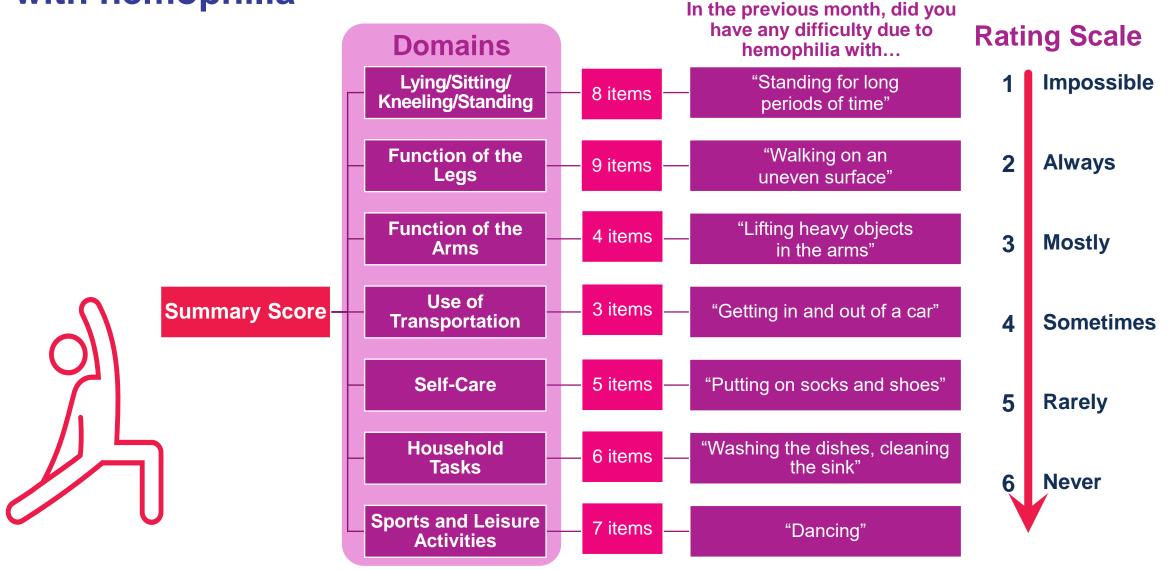


^{1.} Quinn J, et al. *Patient Relat Outcome Meas*. 2022;13:169-80. **2.** Srivastava A, et al. *Haemophilia*. 2020;26:1-158.

Results are based on available data at each time point. Error bars represent 95% confidence intervals. Participants who resumed prophylaxis were excluded. FVIII, factor VIII; Haemo-QOL-A, Haemophilia-Specific Quality of Life Questionnaire for Adults; mITT, modified intention-to-treat.

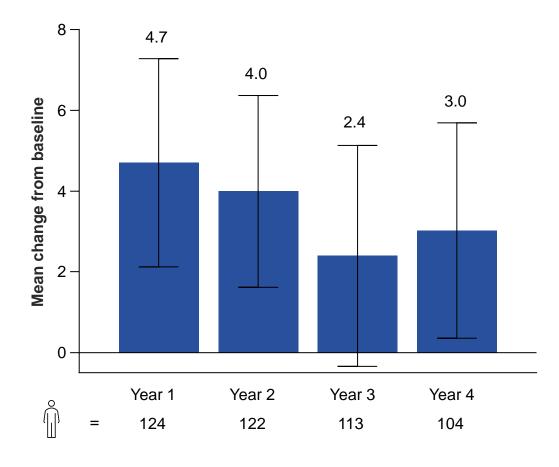


HAL measures self-reported functional ability for people with hemophilia



HAL Summary Score improved over 4 years

mITT population



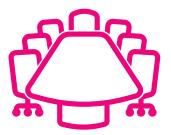


The WPAI+CIQ:HS measures impairment at work and school

due to hemophilia

"In general, how many hours per week do you usually work/attend classes?"

Hemophilia had no effect on my work/classwork





"During the past seven days, how many hours did you miss from work/class or school because of problems associated with your hemophilia?"

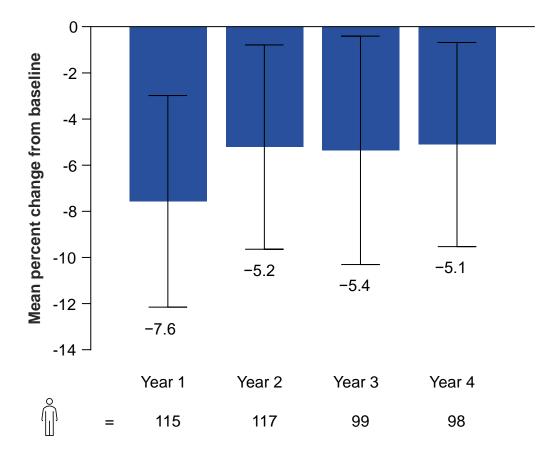
"During the past seven days, how much did hemophilia affect your productivity while you were working/while at school or attending classes in an academic setting?"

"During the past seven days, how much did your hemophilia affect your ability to perform your normal daily activities, other than your job or attending classes?" Hemophilia completely prevented me from working/doing my classwork



WPAI+CIQ:HS activity impairment was reduced over 4 years

mITT population





Conclusions

Haemo-QOL-A



- Valoctocogene roxaparvovec provides clinically meaningful HRQOL improvements over 4 years
- The meaningful improvements also apply to participants with FVIII activity below 5% at year 4



HAL

 Participants reported improved ability to perform daily activities over 4 years



WPAI+CIQ:HS

 Work and school activity impairment scores were reduced over 4 years



In general, HRQOL questionnaires try to capture the highly individual experiences
of each person — as with any study, average values do not necessarily reflect the
results of all participants



Acknowledgments

- Thank you to all trial participants, their families, study site personnel, and investigators
- Funding for this study was provided by BioMarin Pharmaceutical Inc.
- Medical writing support was provided by Amin Ghane, PhD, of AlphaBioCom, a Red Nucleus company, and funded by BioMarin Pharmaceutical Inc.
- Project management support was provided by Gillian Clague, CMPP, of BioMarin Pharmaceutical Inc.



Scan for a digital copy of this presentation

