A 12-week Phase 2/3 Double-masked, Randomized, Multicenter Study of OCS-01 OPTIREACH® Technology Topical Dexamethasone Eye Drops in Subjects with Diabetic Macular Edema (DME): Efficacy and Safety Findings

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Relevant Financial Disclosures

Study Disclosures

- Study funded by Oculis
- Study includes research conducted on human subjects
- Institutional Review Board approval was obtained prior to study initiation
 - Abbvie / Allergan

- Iveric Bio
- Alcon Novartis
- Apellis
- Bayer
- Boehringer Ingelheim •
- Genentech

- Oculis
- Roche
- Thea
- Zeiss

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DIAMOND (DX-219) Evaluated OCS-01 in Patients With DME

Stage 1 of a multicenter, randomized, double-masked, vehicle-controlled, two-stage phase 2/3 study of OCS-01 (OPTIREACH®-dexamethasone 15 mg/mL ophthalmic formulation) conducted at 39 US and European sites



BCVA, best corrected visual acuity; CMT, central macular thickness; CST, central subfield thickness; DM, diabetes mellitus; DME, diabetic macular edema; ETDRS, Early Treatment Diabetic Retinopathy Study; SD-OCT, spectral domain optical coherence tomography. ClinicalTrials.gov. NCT05066997. https://classic.clinicaltrials.gov/ct2/show/NCT05066997. Accessed September 22, 2023.

Baseline Demographics Were Well-Balanced Between the 2 Arms

Parameter	OCS-01 (n =100)	Vehicle (n=48)
Age, mean (SD), years	61.9 (9.0)	63.9 (7.3)
Male, n (%)	53 (53.0)	26 (54.2)
Duration of DME, mean (SD), years	2.0 (2.6)	1.9 (2.7)
BCVA, mean (SD), ETDRS letter score	57.5 (9.3)	58.3 (7.5)
CST, mean (SD), μm	453.0 (131.8)	445.3 (112.5)
IOP, mean (SD), mm Hg	15.3 (3.0)	14.7 (3.0)

BCVA, best corrected visual acuity; CST, central subfield thickness; DME, diabetic macular edema; ETDRS, Early Treatment Diabetic Retinopathy Study; Hg, mercury; IOP, intraocular pressure; SD, standard deviation.

Patients on OCS-01 Had a Significant Improvement in Mean BCVA from Baseline at Weeks 6 and 12 vs Vehicle

ITT population



Imputation rules are applied based on a pattern-mixture model approach.

BCVA, best corrected visual acuity; CI, confidence interval; ETDRS, Early Treatment Diabetic Retinopathy Study; ITT, intention-to-treat; LS, least squares; SE, standard error.

Significantly More Patients on OCS-01 Had a ≥3-line ETDRS Improvement vs Vehicle

ITT population



^a There was no loss of ≥3 lines (>15 ETDRS letters) from baseline to Week 6 in either treatment group.

P-value is based on difference in marginal effects.

Imputation rules are applied based on a pattern-mixture model approach.

ETDRS, Early Treatment Diabetic Retinopathy Study; ITT, intention-to-treat.

Effects of OCS-01 on Retinal Thickness (CST) Were Observed Early and Maintained Throughout the Study

Significant reductions in CST measured at weeks 6 and 12 for OCS-01 vs vehicle in the ITT population



Mean (SD) baseline CST: OCS-01, 453.0 (131.81) µm; vehicle, 445.3 (112.46) µm. Imputation rules are applied based on a pattern-mixture model approach. Data, analysis, and conclusions are preliminary, and subject to change as full analysis is ongoing. CST, central subfield thickness; ITT, intention-to-treat; LS, least squares; SE, standard error.

BCVA Change From Baseline to Week 6 According to Lens Status for OCS-01

ITT population (post-hoc analysis)



OCS-01 Was Well-tolerated With No Unexpected AEs

Safety population

Treatment Emergent Adverse Events

> 2.0% in the OCS-01 Arm or > 4.0% in the Vehicle Arm	OCS-01 (n=100) n (%)	Vehicle (n=48) n (%)
AnyTEAE	70 (70.0)	30 (62.5)
Diabetic retinal edema	10 (10.0)	9 (18.8)
Intraocular pressure increased	14 (14.0)	1 (2.1)
Hypertension	10 (10.0)	1 (2.1)
Ocular hypertension	8 (8.0)	o (o.o)
Macular edema	2 (2.0)	4 (8.3)
COVID-19	2 (2.0)	2 (4.2)
Dry eye	3 (3.0)	1 (2.1)
Diabetes mellitus	3 (3.0)	o (o.o)
Dizziness	3 (3.0)	o (o.o)
Dysgeusia	3 (3.0)	o (o.o)
Nasopharyngitis	2 (2.0)	1 (2.1)
Type 2 diabetes	2 (2.0)	1 (2.1)
Vitreous hemorrhage	2 (2.0)	1 (2.1)
Arthralgia	2 (2.0)	0 (0.0)
Blood glucose increased	2 (2.0)	o (o.o)
Visual acuity reduced	1 (1.0)	2 (4.2)

Treatment Emergent Serious Adverse Events

	OCS-01 (n=100) n (%)	Vehicle (n=48) n (%)
Any ocular SAE	1 (1.0)	o (o.o)
Vitreous hemorrhage	1 (1.0)	0 (0.0)
Any non-ocular SAE	4 (4.0)	3 (6.3)
Death	1 (1.0)	0 (0.0)

- None of the SAEs reported were deemed related to study drug
- No evidence of cataract formation up to 12 weeks
- IOP increase consistent with literature
- Minimal mean IOP increase was similar across loading and maintenance phases

AE, adverse event; COVID-19, coronavirus disease 2019; IOP, intraocular pressure; SAE, serious adverse event; TEAE, treatment-emergent adverse event.

Mean Change in IOP Over Time

Safety population



Mean (SD) baseline IOP: OCS-01, 15.3 (3.1) mm Hg; vehicle, 14.7 (3.0) mm Hg. IOP, intraocular pressure; SD, standard deviation.

Summary OCS-01 Holds the Potential to Address the Current Treatment Gap and Provide a Non-invasive Therapeutic Approach for DME

Stage 1 of the DIAMOND Phase 3 study **met its prespecified objective** to enable the selection of a dosing regimen for stage 2

Loading with 6 and Maintenance with 3 drops/day is an effective **dosing regimen** as proven by analysis at Weeks 6 and 12

6 times a day dosing of OCS-01 was a highly effective Loading Dose:

- Improved visual acuity
- Increased rate of patients with a clinically relevant ≥3-line improvement in BCVA
- Reduced macular edema
- 3 times a day dosing of OCS-01 was found to be an effective **Maintenance Dose**

No unexpected safety findings were observed







