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Reducing Heterogeneity in OA Clinical Trials: Data from a Phase 2 Study of SM04690, a Novel, Intra-Articular, Wnt Pathway Inhibitor in Knee Osteoarthritis

Program Book Publication:

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Abstract Supplement and Online Publication:

These authors will be published in a supplement of the [Arthritis & Rheumatology](#) journal as well as the abstracts section of the ACR/ARHP Meeting Abstract website ([acrabstracts.org](#)).

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Abstract Text

Character count for abstract text: 2321 (429 Characters Remaining)

Background/Purpose: Kellgren-Lawrence [KL] radiographic grading is used to classify knee osteoarthritis (OA), but may not accurately reflect disease progression. Classifying subjects by baseline medial joint space width (mJSW) may be a more specific measure. This hypothesis was assessed in a post-hoc analysis of data from a phase 2, multicenter, 52-week, randomized controlled trial of SM04690, a small molecule Wnt pathway inhibitor in development as a potential disease modifying drug in knee OA.

Methods: In the trial, subjects with KL grade 2-3 knee OA were randomized to a single, 2 mL, intra-articular injection of 0.03 mg, 0.07 mg, 0.23 mg SM04690 or placebo (PBO) into their target (most painful) knee at Day 0. WOMAC Pain and Function were assessed at 0, 4, 13, 26, 39 and 52 weeks, with fixed location radiographic assessment of mJSW at Weeks 0, 26 and 52. Exploratory analysis of clinical outcomes in the intention to treat (ITT) population was conducted by analysis of covariance adjusted for baseline mJSW with multiple imputation. This post-hoc analysis examined a group with baseline mJSW of 2-4 mm in comparison to the full ITT population.

Results: 455 subjects (mean age 60.3 [\pm 8.7] years, BMI 29.9 [\pm 4.6] kg/m², 268 [58.9%] female, 293 [64.4%] KL Grade 3) were enrolled. Contralateral knee KL grade was equal or worse than target knee in 91% of ITT population. 258 subjects had baseline mJSWs of 2-4 mm. At week 52, in the placebo group, imputed mean mJSW change from baseline was -0.14 [SE 0.06] mm. In the ITT population, compared to placebo, imputed mean mJSW changes from baseline were positive for 0.03 mg and 0.07 mg SM04690 doses (**Table, figure**). In the post-hoc analysis of the smaller 2-4mm mJSW subgroup, heterogeneity was similar to ITT for all doses compared to PBO and for the 0.03 mg and 0.07 mg doses changes beyond measurement error (>0.13 mm)¹ were observed. In addition, improvement in WOMAC Function compared to placebo was seen in the 0.07 mg SM04690 group at Week 52 within the mJSW subgroup (change compared to placebo -13.6, 95% CI (-25.5, -1.7), P=0.025).

Conclusion: Stricter inclusion criteria for mJSW provided a less heterogenous baseline group, reducing sample size by 42% without increasing standard error. When applied to this dataset, meaningful radiographic changes were demonstrated with 0.03 mg and 0.07 mg SM04690 groups compared to placebo. Future trials of structure modification in knee OA should consider specific mJSW inclusion criteria.

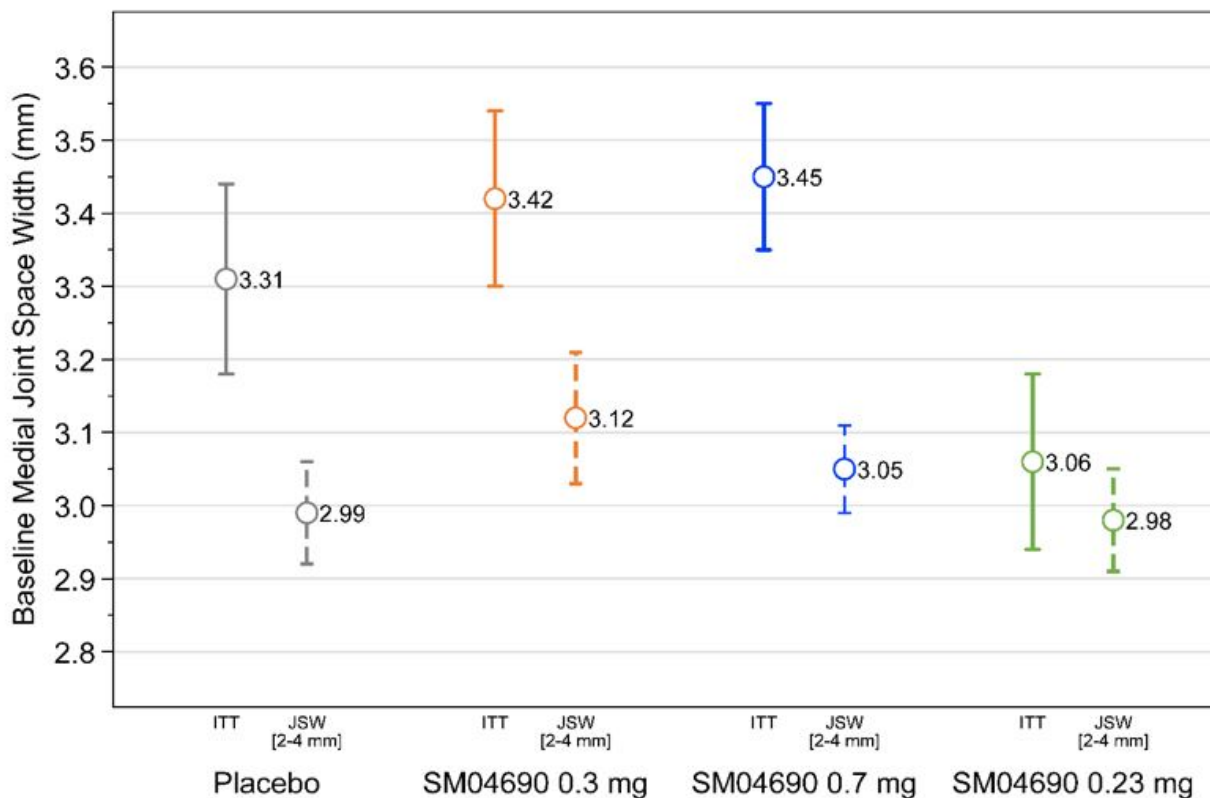
¹Dupuis et al. OAC 2003

Table. mJSW Measurements for ITT and Baseline mJSW 2-4 mm subgroup

ITT				
mJSW*	0.03 mg	0.07 mg	0.23 mg	PBO
N	112	117	110	116
Baseline (mm) Mean (SE)	3.42 (0.12)	3.45 (0.10)	3.06 (0.12)	3.31 (0.13)
Change at Week 52	-0.04 (0.06)	-0.09 (0.06)	-0.16 (0.07)	-0.14 (0.06)
Change compared to Placebo	0.10 (0.09)	0.06 (0.09)	-0.02 (0.09)	
P-value	P=0.259	P=0.529	P=0.807	

Baseline mJSW 2-4 mm				
mJSW*	0.03 mg	0.07 mg	0.23 mg	PBO
N	56	72	65	65
Baseline	3.12 (0.09)	3.05 (0.06)	2.98 (0.07)	2.99 (0.07)
Change at Week 52	-0.03 (0.08)	-0.03 (0.08)	-0.16 (0.09)	-0.22 (0.09)
Change compared to Placebo	0.19 (0.13)	0.19 (0.12)	0.06 (0.13)	
P-value	P=0.144	P=0.121	P=0.624	

*Mean (SE) mJSW reported.



Disclosure: P. G. Conaghan, AbbVie, BMS, Eli Lilly, Novartis, Pfizer, Roche, 5; AbbVie, BMS, Eli Lilly, Novartis, Pfizer, Roche, 8; A. DiFrancesco, Samumed, LLC, 3; Samumed, LLC, 1; C. J. Swearingen, Samumed, LLC, 3; Samumed, LLC, 1; S. Kennedy, Samumed, LLC, 3; Samumed, LLC, 1; I. Simsek, Samumed, LLC, 3; Samumed, LLC, 1; J. Tambiah, Samumed, LLC, 3; Samumed, LLC, 1; Y. Yazici, Samumed, LLC, 3; Samumed, LLC, 1.

Topic Selection:

Osteoarthritis – Clinical Aspects

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Preferred Presentation Format:

No Preference

Study Sponsors:

- Samumed: Samumed, LLC designed, funded and monitored the study. Samumed also conducted data management, and statistical analysis.

Keywords:

Knee, WNT Signaling, clinical trials, osteoarthritis and radiography

Additional Information:**Research Method:**

Clinical

Trial Type:

Treatment

*This abstract reports the results of a clinical trial not yet approved by a regulatory agency.***Trial Phase:**

Phase II

Payment Received:[printable receipt](#)**Confirmation Number:**

acr-2017-6078-1547-8612-2355

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