# VYN202 Phase 1b Moderate-to-Severe PsO July 2025



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### VYN202: A Novel BD2-Selective BET Inhibitor for Immune-Mediated Diseases

- VYN202 is an innovative, oral BD2-selective BET inhibitor
- VYN202 is believed to be the most potent and BD2-selective BET Inhibitor in clinical development<sup>1</sup> which is designed to improve efficacy and tolerability
- Program supported by robust preclinical data across multiple diverse models of immune-mediated disease
- Phase 1 SAD and MAD studies in healthy volunteers complete:
  - VYN202 demonstrated a favorable safety and tolerability profile with no drug-related adverse events historically associated with earlier generation, less selective BET inhibitors
  - Favorable PK profile demonstrated for VYN202, supporting once-daily dosing regimen
  - VYN202 demonstrated robust pharmacodynamic activity including evidence of target engagement and significant inhibition of inflammatory biomarkers relevant to several immune-mediated disorders in ex vivo stimulation assays, consistent with preclinical disease models
- Phase 1b study in moderate-to-severe plaque psoriasis designed to serve as potential gateway to other strategically attractive indications

<sup>&</sup>lt;sup>3</sup> 1. Based on readily available public information such as clintrials.gov, academic publications and corporate websites/presentations.

### VYN202 Phase 1b Study Design in Moderate-to-Severe Plaque Psoriasis

N = up to 80 subjects with moderate-to-severe plaque psoriasis



# VYN202 Phase 1b Study: 7 Patients Enrolled

### **Demographic and Patient Characteristics**

Parameter	Value
Mean Age, yr (min-max)	47.1 (30-59)
Sex, M/F	5/2
Race	White (7)
Ethnicity, HL / nHL	3/4
Mean PASI at Baseline (min-max)	18.3 (12.1-36.7)
Mean PSSI at Baseline (min-max)	20.0 (3-54)
Mean sPGA at Baseline (min-max)	3.1 (3-4)
Mean %BSA at Baseline (min-max)	20.8 (10-37)

### **Duration of treatment**

Subject ID	Dose (mg)	BL	Week 1	Week 2	Week 4	Week 6	Week 8	Week 12	Week 16
A	Pbo		Days						
в	0.25		64 Days						
с	0.50	14 Days							
D	0.50	7 Days							
E	1.00	65 Days							
F	1.00		15 Days						
G	1.00	2 Days							



Treatment period visits

Safety follow-up visits

### Subject A, Male (Placebo) - Efficacy

Visit	Baseline	Week 1	Week 2	Week 4	Week 6	Week 8	Week 12
Dosing Duration	10MAR			03APR (24 days)			
PASI Score	26.7	26.7	26.7	26.7	26.7	-	-
PSSI Score	24	24	24	24	24	-	-
sPGA Score	3	3	3	3	3	-	-
BSA	34	34	34	34	34	-	-
Itch NRS	8	10	9	9	9	-	-
Joint Pain NRS	8	8	8	9	9	-	-



### **Comments:**

- Subject on placebo for 24 days
- No improvement in PASI, sPGA, Itch or Joint pain NRS



### Subject A, Male (Placebo) – Serum IL19, IL17A, IL17F & IL22 Biomarkers

16



IL17F, pg/ml



IL22, pg/ml



0 2 4 6 8 10 12 14 Study Week

No appreciable effect on any biomarkers during treatment

30

25

5 0

1217F, pg/ml 12 10

### Subject A, Male (Placebo) – Safety & Key Labs



• Sinus infection, moderate severity, drug related, dose not changed, Augmentin (500mg), resolved.

## Subject B, Female (0.25mg) - Efficacy



### Subject B, Female (0.25mg) - Serum IL19, IL17A, IL17F & IL22 Biomarkers





IL17F, pg/ml





### Subject B, Female (0.25mg) – Safety & Key Labs



### Safety:

Urinary tract infection, moderate severity, not drug related, dose not changed, Ciprofloxacin (500mg), resolved prior to treatment discontinuation.

# Subject C, Male (0.5mg) - Efficacy

Visit	Baseline	Week 1	Week 2	Week 4	Week 6	Week 8	Week 12
Dosing Duration	19MAR		02APR (14 days)				
PASI Score	23	14.1	13.5	22	19.6	21.7	20.8
PSSI Score	12	3	3	10	10	10	10
sPGA Score	3	2	2	3	4	4	4
BSA	37	27	26	29	28.5	34	35
Itch NRS	6	3	3	3	5	8	8
Joint Pain NRS	7	5	3	3	7	8	8



### **Comments:**

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- Subject on active drug for 14 days
- Clear positive response to treatment followed by a worsening of disease after treatment withdrawal. >PASI40 at Week 2.
- 4-point improvement in joint pain NRS scale by week 2 which corresponded with a -48% reduction in serum c-reactive protein level.



### C-Reactive Protein, µg/ml

# Subject C, Male (0.5mg) - Serum IL19, IL17A, IL17F & IL22 Biomarkers



IL17A, pg/ml







IL17F, pg/ml



### Subject C, Male (0.5mg) – Safety & Key Labs



- No AEs
- 14 ---- Treatment withdrawal date ---- Baseline visit

### Subject D, Male (0.5mg) - Efficacy



### **Comments:**

- Subject on active drug for 7 days
- Safety follow up visit 4-weeks post-last dose showing improvement in PASI score
- Inflammatory biomarkers pending

### Subject D, Male (0.5mg) – Safety & Key Labs



### Subject E, Female (1.0mg) - Efficacy

Visit	Baseline	Week 1	Week 2	Week 4	Week 6	Week 8	Week 12	Week 16
Dosing Duration	18FEB					24APR (65 days)		
PASI Score	12.1	9.9	5.1	3.4	2	1.6	3	3
PSSI Score	21	18	6	0	0	0	0	0
sPGA Score	3	3	1	1	1	1	1	1
BSA	10	10	6	4	3	3	4	4
Itch NRS	3	0	2	0	1	2	3	6
Joint Pain NRS	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A



# Comments: Subject on active drug for 65 days Marked overall clinical response to treatment by PASI (Approx. PASI90 at 2 months of treatment) followed by worsening of disease after treatment withdrawal.

3-Jun-25

10-Jun-25

- sPGA0/1 treatment success.
- Positive impact on scalp psoriasis in addition to psoriasis on the body (PSSI100, fully resolved).

### Subject E, Female (1.0mg) - Serum IL19, IL17A, IL17F & IL22 Biomarkers





IL22, pg/ml



IL17F, pg/ml



18 **Treatment withdrawal date** Percent change from baseline: 1-[Lowest value during treatment / Baseline value] \* 100%

### Subject E, Female (1.0mg) - Safety & Key Labs



• Sinus infection, moderate severity, not drug related, dose not changed, Doxycycline (200mg)/Mucinex DM, resolved prior to treatment discontinuation; Diarrhea, moderate severity, drug related, dose not changed, Imodium/peptobismol, resolved

19 ---- Treatment withdrawal date ---- Baseline visit

### Subject F, Male (1.0mg) - Efficacy



### Subject F, Male (1.0mg) - Serum IL19, IL17A, IL17F & IL22 Biomarkers





IL22, pg/ml







### Subject F, Male (1.0mg) - Safety & Key Labs



### Subject G, Male (1.0mg) - Efficacy



# Subject G, Male (1.0mg) - Serum IL19, IL17A, IL17F & IL22 Biomarkers



IL17A, pg/ml 2 1.5 pg/ml 1 0.5 No change 0 2 8 10 12 14 16 0 6 Δ Study Week

### IL17F, pg/ml







change

### Subject G, Male (1.0mg) - Safety & Key Labs







# **Visual Improvements in Psoriasis in 6 weeks**

## Visual Improvements in Psoriasis in 6 weeks Subject B (0.25mg)

**Back Scalp** 

**Day 1** (PSSI 14)



Week 6 (PSSI 4)





**Week 12** 



# **Visual Improvements in Psoriasis in 6 weeks**



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# **Data Summary**

### Safety and Tolerability

- No TESAEs or discontinuation due to a clinical TEAE
- No treatment interruptions due to a clinical TEAE
- No grades of thrombocytopenia, neutropenia or lymphocytopenia

### **Exploratory Efficacy**

- All subjects receiving VYN202 had an improvement in signs and symptoms of disease, including scalp psoriasis:
  - Improvement in PASI scores ranged from ~27% reduction after 1 week of treatment to ~90% reduction at week 8
- Improvements (reduction) in serum cytokine levels observed in subjects treated with VYN202 for greater than 1 week, including IL17A, IL17F, IL19, and IL22 ranging from -17% to -83%. There was no change in these serum cytokines for the subject receiving placebo.
- Two subjects enrolled co-presented with psoriatic arthritis (n=1 treated with VYN202 0.5 mg; n=1 treated with placebo)
  - Subject treated with VYN202 0.5 mg reported a four-point improvement in joint pain NRS scale by week 2 which corresponded with a -48% reduction in serum c-reactive protein level, a biomarker associated with psoriatic arthritis and other rheumatic diseases.
  - Subject treated with placebo had no improvement in joint pain NRS and no change in serum c-reactive protein levels.





### **Individual PASI Score Changes**



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# **Serum Inflammatory Biomarkers**



-A (Placebo) - 24 days

-B (0.25 mg) - 64 days

— D (0.5 mg) - 7 days — E (1 mg) - 65 days

- Reduction in serum cytokine levels observed in subjects treated with VYN202 for greater than 1 week ranging from -17% to -83%. No change in these serum cytokines for the subject receiving placebo (Subj. A).
- Subject C treated with VYN202 0.5 mg with a medical history of psoriatic arthritis reported a four-point improvement in joint pain NRS scale by week 2 corresponding with a -48% reduction in serum c-reactive protein level. Subject A treated with placebo with a medical history of psoriatic arthritis had no improvement in joint pain NRS and no change in serum c-reactive protein levels.

<sup>34</sup> Preliminary Data available as of 6/30; N/A – Data not available; N/C – No change; Percent change from baseline: 1-[Lowest value during treatment / Baseline value] \* 100%

### **Selected Laboratory Data**



Study Week

- All data within Upper and Lower Limits of Normal (ULN/LLN) ٠
- No grades of thrombocytopenia and trends in platelet counts reach a nadir between 4 and 6 weeks and increase during treatment
- No grades of Neutropenia •
- No grades of lymphopenia

