

# AXSOME

## THERAPEUTICS

GEMINI Phase 3 Trial of AXS-05 in MDD

Topline Results

Conference Call

December 16, 2019

# AXS-05 in Major Depressive Disorder (MDD)

## GEMINI Phase 3 Trial Topline Results

<b>Introduction</b>	<b>Mark Jacobson</b> , Senior Vice President, Operations
<b>Overview and Summary</b>	<b>Herriot Tabuteau, MD</b> , Chief Executive Officer
<b>GEMINI Trial Design &amp; Results</b>	<b>Cedric O’Gorman, MD</b> , Senior Vice President, Clinical Development & Medical Affairs
<b>Q&amp;A</b>	<b>Presenters, Nick Pizzie</b> , Chief Financial Officer and <b>Dave Marek</b> , Chief Commercial Officer
<b>Concluding Remarks</b>	<b>Herriot Tabuteau, MD</b> , Chief Executive Officer

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# Overview and Summary

**Herriot Tabuteau, MD**

Chief Executive Officer  
Axsome Therapeutics, Inc.

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# Summary of Topline Results:

## Rapid and Durable Effects with AXS-05

- AXS-05: a novel, oral, investigational NMDA receptor antagonist with multimodal activity
- Rapid, durable, substantial, and significant improvement in symptoms of depression
- Met primary endpoint—highly statistically significant improvement on MADRS versus placebo at Week 6
- Rapid reduction in depressive symptoms at Week 1, earliest timepoint assessed
- Consistent effects—statistically significant improvement on multiple secondary endpoints versus placebo at Week 1 and thereafter
- AXS-05 was safe, well tolerated, and not associated with psychotomimetic effects
- Positive GEMINI trial, together with previously completed positive ASCEND trial, sufficient to support NDA filing of AXS-05 in MDD
  - Granted Breakthrough Therapy Designation for MDD earlier this year
  - NDA filing anticipated in 2H 2020

# Major Depressive Disorder (MDD): Need for New, Innovative Treatments

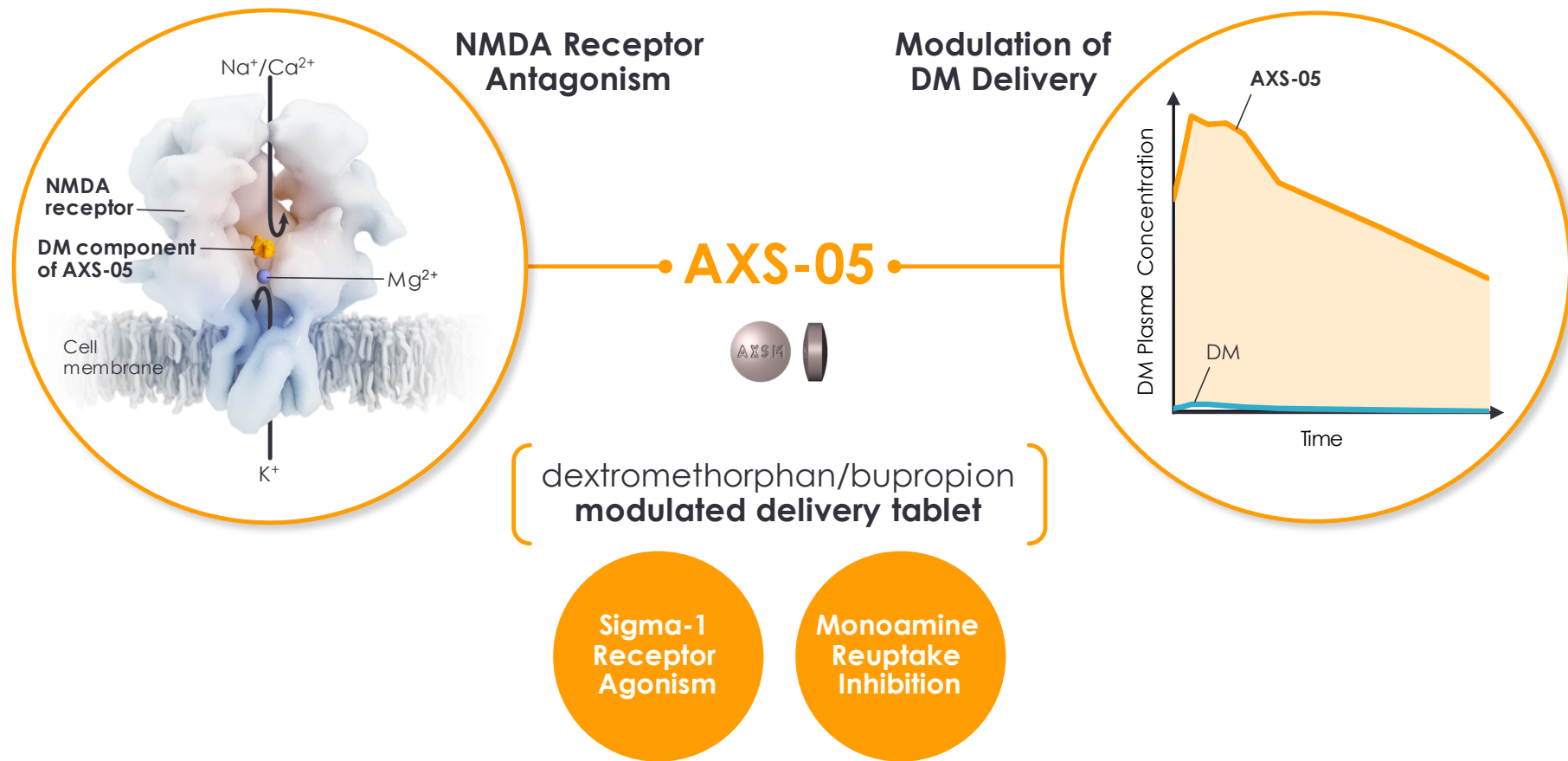
- Major depressive disorder (MDD) is a disabling and potentially life-threatening, biologically-based disorder
- Majority of patients experience inadequate response to current treatments: 63% fail to achieve remission to initial therapy, and of those 69% fail second line therapy<sup>2</sup>
- Current antidepressants are associated with prolonged time to clinical response: up to 6-8 weeks for those who respond
- All currently approved oral MDD agents work primarily through monoaminergic mechanisms
- Urgent need exists for new treatments with novel mechanisms of action, and faster onset of action, that are orally administered

**17** million

U.S. adults experience major depressive episodes each year<sup>1</sup>

1. National Survey on Drug Use and Health (NSDUH), (2017).  
2. Rush AJ, et al. *Am J Psychiatry* 2006;163:1905-1917.

# AXS-05: Novel, Oral, NMDA Receptor Antagonist with Multimodal Activity



Abbreviations: DM = Dextromethorphan; Mg<sup>2+</sup>=magnesium ion; Na<sup>+</sup>=sodium ion; Ca<sup>2+</sup>=calcium ion; K<sup>+</sup>=potassium ion. Axsome data on file



# GEMINI Phase 3 Trial Design & Results

**Cedric O’Gorman MD, MBA**

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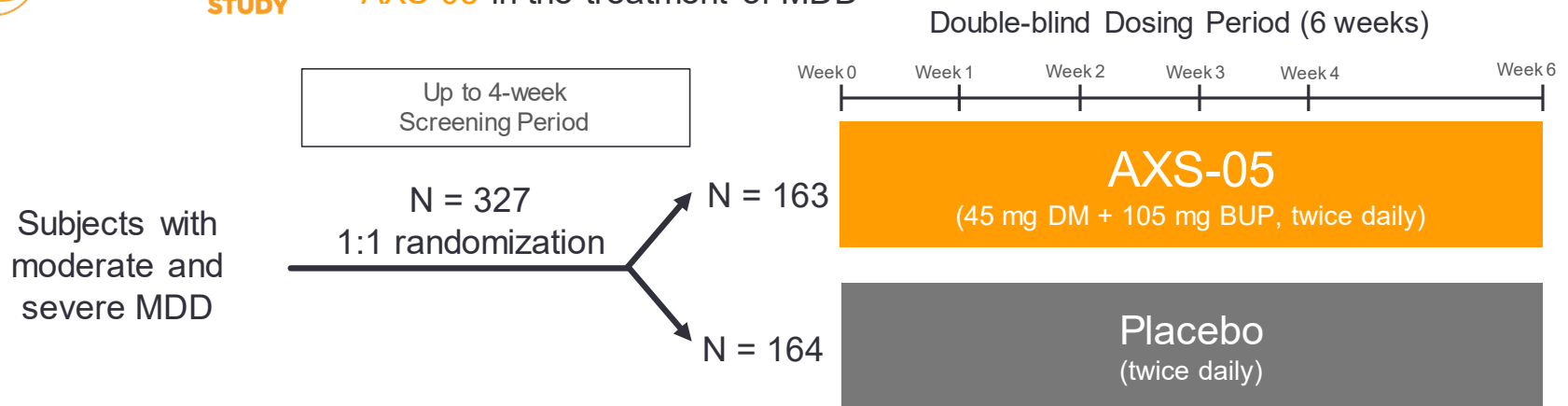
Senior Vice President, Clinical Development and Medical Affairs  
Axsome Therapeutics, Inc.



# GEMINI Phase 3 Trial: Design Summary



A Phase 3 trial to assess the efficacy and safety of  
**AXS-05** in the treatment of MDD



BUP = Bupropion; DM = Dextromethorphan

- **Primary Endpoint:**

- Change from baseline in the Montgomery-Åsberg Depression Rating Scale (MADRS) total score at Week 6

- **Key Secondary Endpoints:**

- MADRS change at Week 1 and Week 2; MADRS remission ( $\leq 10$ ) at Week 6; MADRS response ( $\geq 50\%$ ) at Week 6

- **Secondary Endpoints:**

- Clinical Global Impression of Improvement (CGI-I), Clinical Global Impression of Severity (CGI-S), Patient Global Impression of Improvement (PGI-I), Quick Inventory of Depressive Symptomatology-Self-Report (QIDS-SR-16), Sheehan Disability Scale (or SDS), Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q-SF)

# GEMINI Phase 3 Trial:

## Key Entry Criteria

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### **Inclusion criteria included:**

- Male or female 18-65 years of age inclusive
- DSM-5 criteria for current MDD without psychotic features
- Montgomery-Åsberg Depression Rating Scale (MADRS) total score of  $\geq 25$
- CGI-S score of  $\geq 4$  at baseline

### **Exclusion criteria included:**

- History of electroconvulsive therapy, vagus nerve stimulation, transcranial magnetic stimulation or any experimental central nervous system treatment during the current episode or in the past 6 months
- Schizophrenia, bipolar disorder, obsessive compulsive disorder
- Psychiatric symptoms secondary to any other general medical condition

# GEMINI Phase 3 Trial:

## Demographics and Baseline Characteristics

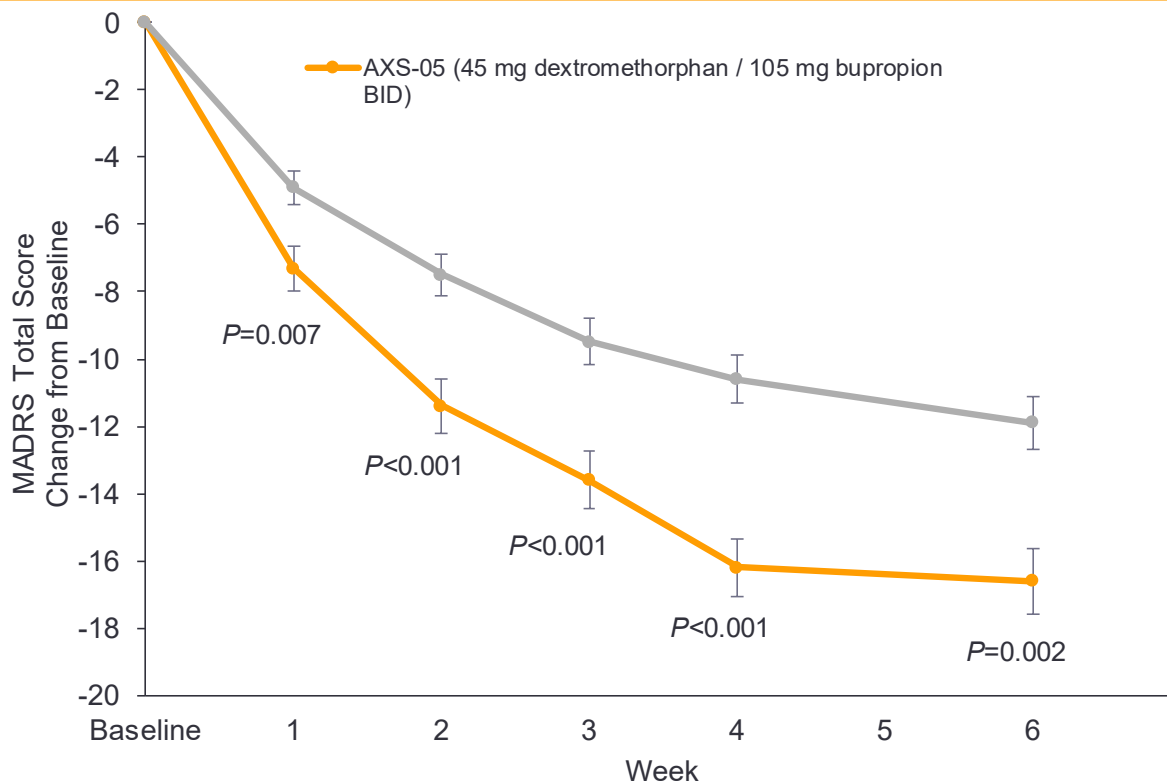
	<b>AXS-05</b> <b>(45 mg DM / 105 mg BUP)</b>	<b>Placebo</b>
<b>Age (years)</b>	42.1 (12.71)	41.1 (13.78)
<b>Female Gender, n (%)</b>	98 (60.1%)	117 (71.3%)
<b>Race, n (%)</b>		
<b>White</b>	88 (54.0%)	92 (56.1%)
<b>Black or African American</b>	61 (37.4%)	55 (33.5%)
<b>Asian</b>	9 (5.5%)	8 (4.9%)
<b>Other or Not Reported</b>	5 (3.1%)	9 (5.5%)
<b>BMI (mg/kg<sup>2</sup>)</b>	29.2 (5.59)	29.4 (5.66)
<b>MADRS Total Score</b>	33.6 (4.43)	33.2 (4.36)
<b>CGI-S Score</b>	4.6 (0.59)	4.6 (0.57)

Data are mean (SD) unless otherwise stated.

Abbreviations: BMI = Body Mass Index; BUP = bupropion; CGI-S = Clinical Global Impression – Severity; DM = dextromethorphan; MADRS = Montgomery-Åsberg Depression Rating Scale

- Demographics and baseline characteristics were similar across both treatment groups
- Study completion rates were greater than 75% in both treatment groups

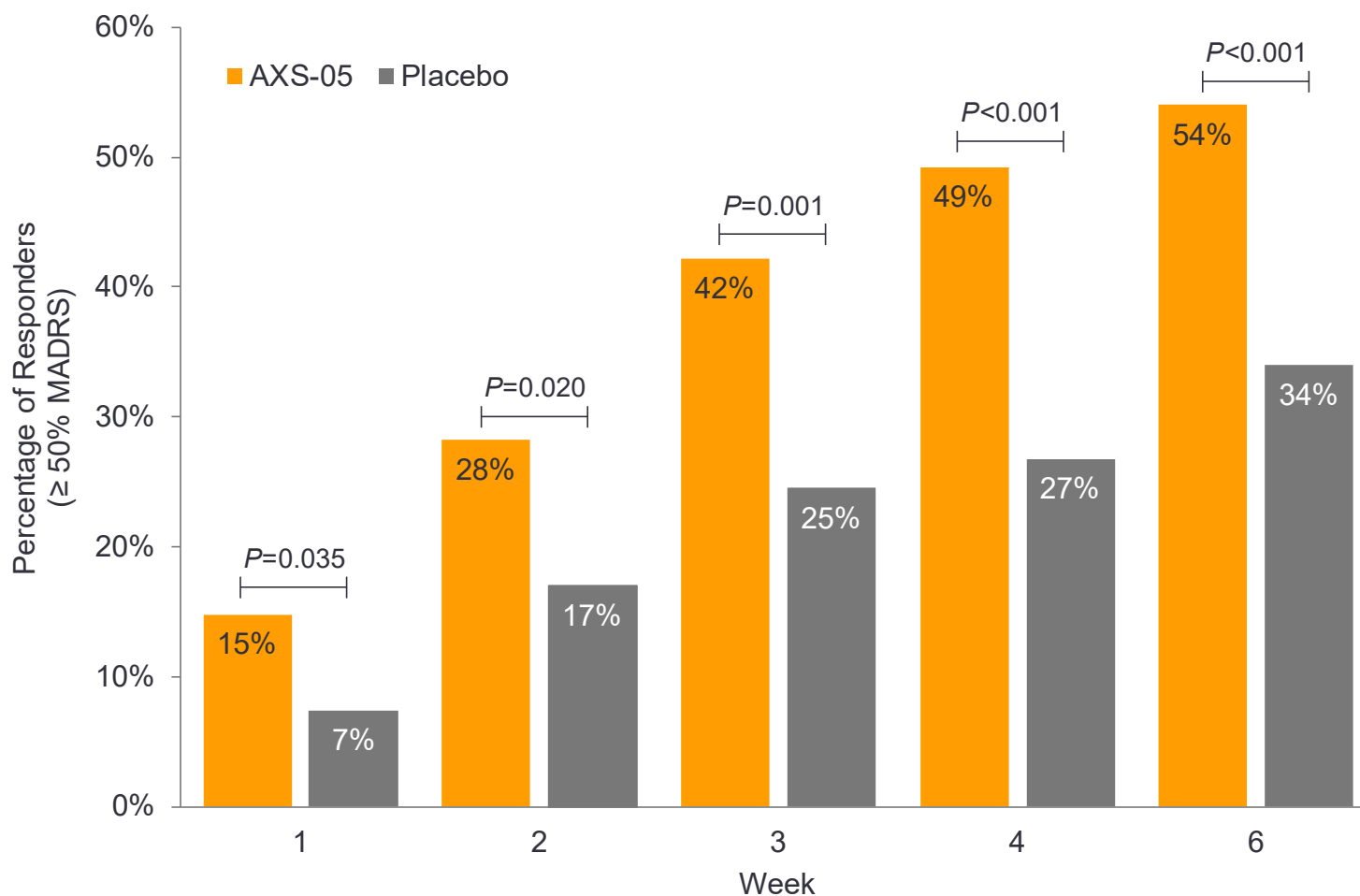
# Improvement in Depressive Symptoms: Primary Endpoint – Change in MADRS Total Score



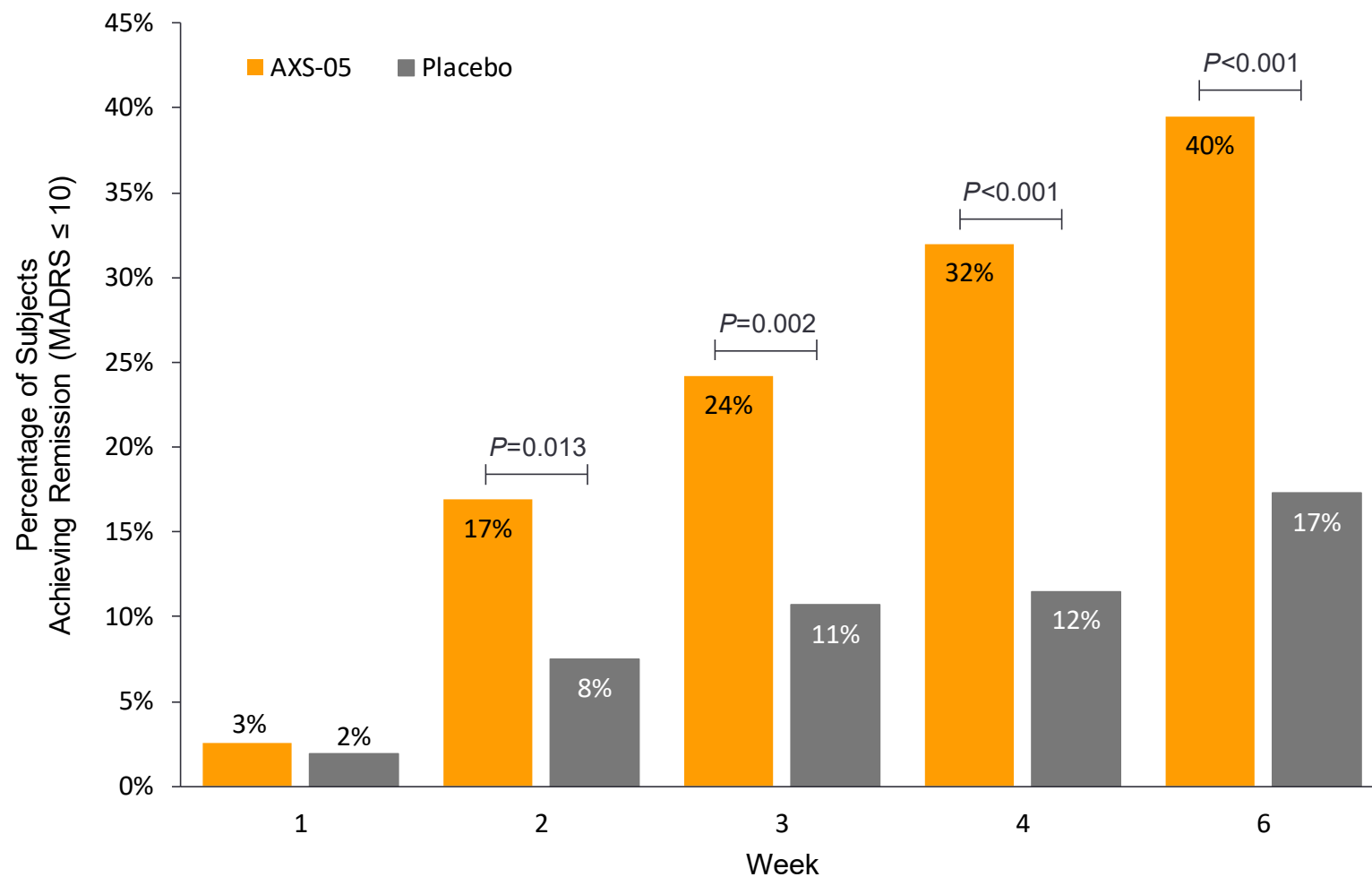
	AXS-05 (n=156)	Placebo (n=162)	Difference	P-Value
<b>Primary Endpoint</b>				
Change in MADRS Total Score at Week 6	-16.6	-11.9	-4.7	0.002
<b>Key Secondary Endpoint</b>				
Change in MADRS Total Score at Week 1	-7.3	-4.9	-2.4	0.007

Notes: P-values calculated from LSMean. Abbreviations: BID = twice daily; MADRS = Montgomery-Åsberg Depression Rating Scale

# Improvement in Depressive Symptoms: Clinical Response ( $\geq 50\%$ MADRS improvement)



# Improvement in Depressive Symptoms: Achievement of Remission (MADRS $\leq 10$ )



# Rapid and Durable Improvements: Treatment Effects with AXS-05

	<i>P</i> -value		
	Week 1	Week 2	Week 6
<b>Depressive Symptom Improvement</b>			
MADRS Total Score Change from Baseline	0.007	<0.001	0.002
Clinical Response ≥50% Reduction in MADRS from Baseline	0.035	0.020	<0.001
Remission MADRS Score of ≤10	ns	0.013	<0.001
Core Symptoms Change from Baseline in MADRS-6	0.019	0.014	0.011
QIDS-SR-16 Change from Baseline	0.016	<0.001	0.001
CGI-I % with Marked / Moderate Improvement	0.035	<0.001	0.016
CGI-S Change from Baseline	0.013	<0.001	0.002
PGI-I % Reporting Very Much / Much Improved	0.008	0.015	0.007
<b>Quality of Life and Functional Improvement</b>			
Q-LES-Q-SF Change from Baseline in % of Maximum Possible Score	0.031	0.017	0.011
SDS Total Score Change from Baseline	ns	0.003	0.002

Abbreviations: CGI-I = Clinical Global Impression–Improvement; CGI-S = Clinical Global Impression–Severity; MADRS = Montgomery-Åsberg Depression Rating Scale; ns = p-value not significant; PGI-I = Patient Global Impressions–Improvement; QIDS-SR-16 = Quick Inventory of Depressive Symptomatology–Self- Rated; Q-LES-Q-SF = Quality of Life Enjoyment and Satisfaction Questionnaire – Short Form; SDS = Sheehan disability scale.

# Safety of AXS-05 in MDD:

## Adverse Events Occurring in $\geq 5\%$ of Subjects

	<b>AXS-05</b> (N = 162)	<b>Placebo</b> (N = 164)
<b>Any Treatment-Emergent AE</b>	<b>100 (61.7%)</b>	<b>74 (45.1%)</b>
Dizziness	26 (16.0%)	10 (6.1%)
Nausea	21 (13.0%)	14 (8.5%)
Headache	13 (8.0%)	6 (3.7%)
Diarrhea	11 (6.8%)	5 (3.0%)
Somnolence	11 (6.8%)	5 (3.0%)
Dry mouth	9 (5.6%)	4 (2.4%)

Data presented as number of subjects (% of subjects)

- Rates of discontinuation due to adverse events were low in both groups, 6.2% and 0.6%, for AXS-05 and placebo, respectively
- One serious adverse event in the AXS-05 arm, which was not related to study drug



# GEMINI Phase 3 Trial Results:

## Summary

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- AXS-05 resulted in rapid, durable, substantial, and statistically significant improvements in depressive symptomatology across multiple efficacy endpoints
- Symptomatic benefits translated into statistically significant improvements on validated measurements of daily functioning and quality of life
- AXS-05 was safe and well tolerated in this trial



# Q&A

# Concluding Remarks

**Herriot Tabuteau, MD**

Chief Executive Officer  
Axsome Therapeutics, Inc.

# AXS-05: Clinical Programs in Psychiatry

	Clinical Program				
	ASCEND	GEMINI	STRIDE-1	AXS-05 / OL	ADVANCE-1
<b>Indication</b>	MDD	MDD	TRD	MDD/TRD	Alzheimer's Agitation
<b>Phase</b>	Pivotal Phase 2	Pivotal Phase 3	Pivotal Phase 3	Open-label Phase 3	Pivotal Phase 2/3
<b>Objectives</b>	Efficacy of AXS-05 vs. BUP	Efficacy of AXS-05 vs. PBO	Efficacy of AXS-05 vs. BUP	Long-term safety of AXS-05	Efficacy of AXS-05 vs. BUP and PBO
<b>Status</b>	Completed	Completed	Enrollment complete	Ongoing	Ongoing

Abbreviations: BUP = bupropion; MDD = Major Depressive Disorder; OL = Open-label; PBO = placebo; TRD = Treatment Resistant Depression

- FDA Breakthrough Therapy designation granted for AXS-05 in MDD
- Positive results from GEMINI and ASCEND trials sufficient to support NDA filing of AXS-05 in the treatment of MDD, targeted for 2H 2020

# Our CNS Candidates and Pipeline

- Four differentiated clinical-stage CNS assets targeting significant and growing markets
- Patent protection to 2034-2036, worldwide rights

Product Candidate	Preclinical	Phase 1	Phase 2	Phase 3
AXS-05 (DM + BUP)	Treatment Resistant Depression: Fast Track Designation			Ongoing
	Major Depressive Disorder: Breakthrough Therapy Designation			
	Agitation in Alzheimer's Disease: Fast Track Designation			Ongoing
	Smoking Cessation			
AXS-07 (MoSEIC™ Mx + Riz)	Migraine: Special Protocol Assessment			Ongoing
AXS-12 (Reboxetine)	Narcolepsy; U.S. Orphan Designation			Phase 3 planned
AXS-09 (DM + S-BUP)	CNS Disorders			

Abbreviations: BUP = Bupropion; CNS = Central Nervous System; DM = Dextromethorphan; Mx = Meloxicam; Riz = Rizatriptan; S-BUP = Esbupropion.

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Thank you.

For more information, please contact

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