

IHL-675A

Phase 1 clinical trial to assess safety and pharmacokinetics as a potential anti-inflammatory drug candidate

ASX Ticker: IHL | NASDAQ Ticker: IXHL



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Results Summary

IHL-675A Phase 1 clinical trial

The 36 patient clinical trial demonstrates IHL-675A to be well tolerated, with no serious adverse events of concern.











IHL-675A

IHL-675A is a cannabinoid combination drug comprising hydroxychloroquine sulphate ('HCQ') and cannabidiol ('CBD').

HCQ is a disease-modifying anti-rheumatic drug (DMARD) that works by calming a person's immune system.

CBD is a non-psychoactive phytocannabinoid derived from the cannabis plant, associated with anti-inflammatory and analgesic activity.



Incannex has demonstrated that IHL-675A components, HCQ and CBD act synergistically to inhibit production of inflammatory cytokines and reduce disease severity in animal models of:

Rheumatoid arthritis

Inflammatory lung conditions

 \rightarrow

Inflammatory bowel diseases



Performance Results

IHL-675A Reducing disease severity in animal models

IHL-675A outperformed HCQ and CBD administered alone at reducing inflammatory disease scores – a strong efficacy signal demanding clinical assessment.









Clinical development

IHL-675A

- Animal disease model results were a major commercial signal: targeting the disruption of incumbent multi-billion dollar markets for diseases of inflammation.
- The addressable target markets exceed \$125B per annum globally and include rheumatoid arthritis, COPD, asthma, bronchitis, colitis and Crohn's disease.
- IHL-675A Phase 2 clinical trial launched for patients with rheumatoid arthritis.
- Phase 2 trials for inflammatory lung conditions and inflammatory bowel disease are currently in planning.



Addressable Market AS125B per annum globally

Including; Rheumatoid arthritis, COPD, Asthma, Bronchitis, Colitis and Crohn's disease



Phase 1 clinical trial

IHL-675A First assessment in humans

Aim

To assess the safety, tolerability and pharmacokinetics of IHL-675A compared to reference listed drugs for CBD and HCQ, marketed as Epidiolex and Plaquenil respectively, in healthy volunteers.







IHL-675A —→ Safety/tolerability results

- No adverse events of concern.
- Adverse events were consistent with public reports for Epidiolex and Plaquenil.
- Treatment-related treatment emergent adverse events (TEAEs) included abdominal pain, dizziness, fatigue, frequent bowel movements, headache and somnolence.
- The number of TEAEs for IHL-675A was the same as Epidiolex.
- All TEAEs were mild in severity with the exception of one incident of abdominal cramps of moderate severity in the IHL-675A group, which resolved soon after onset.
- No cardiac related TEAEs were reported.







Pharmacokinetics:

- Compared to Epidiolex, CBD dosed in IHL-675A:

- Reached a greater maximum concentration (C_{max}), 1.57 times higher
- Was taken up more rapidly (T_{max}), 26 % faster
- Was cleared more quickly (T_{1/2}), 13 % faster
- Had a similar level of total exposure (AUCinf)
- These differences are only trends at this point (p>0.05).
- Similar patterns were observed for major CBD metabolites
 7-COOH-CBD and 7-OH-CBD.







Pharmacokinetics:

- Compared to Plaquenil, HCQ from IHL-675A was:

- Taken up more slowly (T_{max}), 46% slower
- Reached a similar maximum concentration (C_{max})
- Had a similar rate of clearance (T_{1/2})
- Had a similar total exposure (AUCinf)
- These differences are only trends at this point (p>0.05).
- Only low (average < 2 ng/mL) concentrations of HCQ metabolites desethylhydroxychloroquine, bisdesethylhydroxychloroquine and desethylchloroquine were detected at all points in the study.







Conclusions

01.

IHL-675A is well tolerated in healthy volunteers.

O2. Adverse events for IHL-675A were consistent with what was observed, and has been publicly reported for Epidiolex and Plaquenil.

03.

Both active pharmaceutical ingredients, CBD and HCQ, are absorbed from IHL-675A.

04.

Trends in PK profiles indicate that the uptake of CBD may be more rapid for IHL-675A than Epidiolex and the uptake of HCQ may be slower for IHL-675A than Plaquenil.



05.

This could be advantageous for IHL-675A. CBD provides immediate relief for inflammation and pain whereas HCQ is a slower acting molecule and provides extended relief.



Next Steps

Phase 2 Clinical Trials



Incannex has commenced a phase 2, blinded, placebo controlled clinical trial to determine the safety and effect on pain and function of IHL-675A in patients with rheumatoid arthritis. The trial is engaging up to 10 trial sites and recruiting 120 patients in total.



Planning of Phase 2 studies in patients with inflammatory bowel disease and lung inflammation is underway. The treatment of these three indications has a combined global addressable annual market size exceeding US\$125B per annum.











CBD and metabolite PK results

	IHL-675A					Epidiolex				
		Cmax	T _{max}	AUCinf	T _{1/2}	Cmax	T _{max}	AUCinf	T _{1/2}	
		(ng/mL)	(hr)	(hr*ng/mL)	(hr)	(ng/mL)	(hr)	(hr*ng/mL)	(hr)	
CBD	Mean	207.04	2.13	841.08	220.17	131.89	2.88	725.9	231.22	
	SD	117.44	0.91	358.63	53.85	61.92	1.21	223.98	56.45	
	Min	72.6	1.02	391	113.84	45.6	1.5	355	144.41	
	Max	472	4	1699	301.17	241	6	1121	305.88	
7-OH-CBD	Mean	55.24	2.17	389.18	40.54	21.06	3	262.27	21.15	
	SD	34.58	0.94	214.49	52.79	9.15	1.22	103.95	10.05	
	Min	14.9	1.02	220	10.78	7.7	1.5	149	10.54	
	Max	116	4	950	202.58	38.4	6	448	49.36	
7-COOH-CBD	Mean	479.75	2.83	18753.9	167.87	362.17	4.97	16268	153.68	
	SD	218.74	1.2	8979.02	95.47	299.63	1.3	11069.2	92.41	
	Min	209	1.5	11445	46.03	116	2.5	4475	18.47	
	Max	921	6	43714	332.65	1180	6.05	42018	317.68	







HCQ and metabolite PK results

		IHL-675A				Epidiolex				
		Cmax	T _{max}	AUCinf	T _{1/2}	Cmax	T _{max}	AUCinf	T _{1/2}	
		(ng/mL)	(hr)	(hr*ng/mL)	(hr)	(ng/mL)	(hr)	(hr*ng/mL)	(hr)	
HCQ	Mean	54.71	5.59	2986	182.62	55.52	3.46	3430.8	251.6	
	SD	23.85	2.51	1244.46	93.7	24.81	1.94	1104.38	73.65	
	Min	22	2	800	35.68	26.1	1	2073	163.92	
	Max	105	12.03	4217	311.57	124	6	5888	421.51	
DESETHYL- HYDROXY- CHLOROQUINE	Mean	1.38	81.08	NA	NA	1.29	17.46	NA	NA	
	SD	1.24	183.01	NA	NA	1.04	35.04	NA	NA	
	Min	0	0	0	0	0	0	0	0	
	Max	4.4	673.83	0	0	3.3	123.93	0	0	
THYL- CHLOROQUINE	Mean	0.8	7.77	NA	NA	0.42	5.59	NA	NA	
	SD	0.72	13.03	NA	NA	0.84	13.58	NA	NA	
	Min	0	0	0	0	0	0	0	0	
	Max	2	49.05	0	0	2.9	49.07	0	0	
BISDESETHYL- HYDROXY- CHLOROQUINE	Mean	0	0	NA	NA	0	0	NA	NA	
	SD	0	0	NA	NA	0	0	NA	NA	
	Min	0	0	0	0	0	0	0	0	
	Max	0	0	0	0	0	0	0	0	













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