

Quantitative Muscle Analysis in FSHD using Whole-Body MRI: Composite Muscle Measurements for Cross-Sectional Analysis

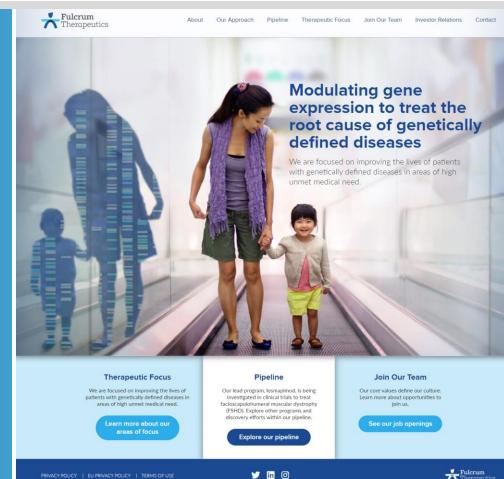
Per Widholm¹, Markus Karlsson¹, André Ahlgren¹, Olof Dahlqvist-Leinhard¹, Rabi Tawil², Kathryn Wagner³, Jeffrey Statland⁴, Leo Wang⁵, Perry Shieh⁶, Baziel Van Engelen⁷, Diego Cadavid⁸, Lucienne Ronco⁸, Adefowope Odueyungbo⁸, Jay Han⁹, Maya Hatch⁹, Michelle L. Mellion⁸

¹AMRA Medical AB ²University of Rochester ³Kennedy Krieger Institute, JHU ⁴University of Kansas, ⁵University of Washington, ⁶UCLA, ⁷Radboud University ⁸FulcrumTherapeutics, ⁹University of California Irvine



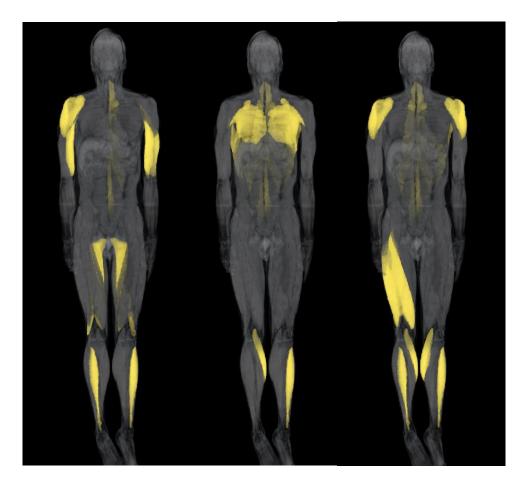
Michelle Mellion, M.D.

- Sr. Medical Director, FSHD **Fulcrum Therapeutics**
- Board Certified Neurologist with subspecialty training in **Neuromuscular Disease**
- I am not presenting any data related to **ReDUX4** and cannot take any questions related to the recently concluded randomized controlled ReDUX4 clinical trial.



Whole-Body MSK MRI Evaluation of FSHD Disease Heterogeneity and Progression

- WB-MSK-MRI Captures
 - Wholistic evaluation of skeletal musculature
 - Small quantitative changes in muscle health that correlate with functional measures
 - Disease Heterogeneity
- Non-invasive
- Minimal burden on patient participation
- Changes in MSK MRI may be detected earlier than changes in clinical outcome assessments (COAs)





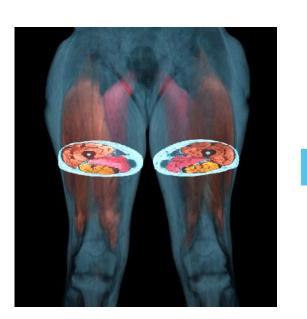
Objective

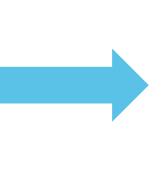
 Develop a whole-body MR imaging protocol and analysis algorithms to volumetrically measure fat replacement of skeletal muscle in FSHD feasible to use in multi-site clinical trials

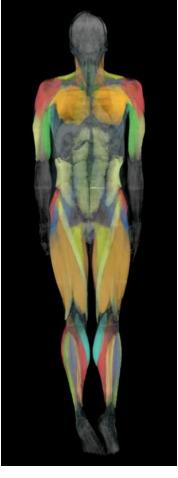
 Generate a regional composite measurement that can correlate with clinical outcome measures



New Paradigm of Image analysis in NMD







Imaging of whole muscle, proximal to distal, in the whole body



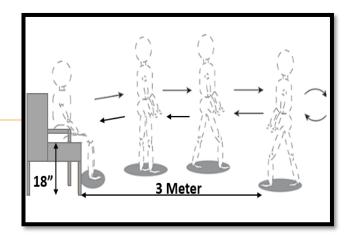
Personalized set of muscles to follow over time

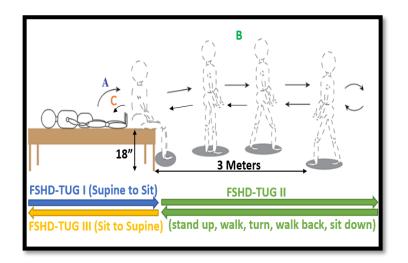
Imaging a slice(s) of select muscles in lower limbs

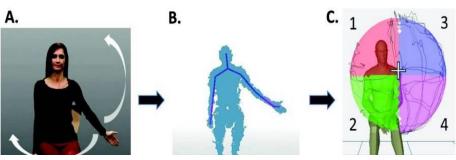
Study Design

- Two Visits 4-12 weeks apart
- Assessments included
 - WB-MSK-MRI
 - Muscle Biopsy
 - Results presented in Ronco, et al. A Biomarker of DUX4 Activity to Evaluate Losmapimod Treatment Effect in FSHD Phase 2 Trials. At 2020 Virtual MDA Clinical and Scientific Congress.
 - Clinical Outcome Assessments
 - TUG
 - FSHD TUG
 - Reachable Work Space









FULCRUM THERAPEUTICS

(

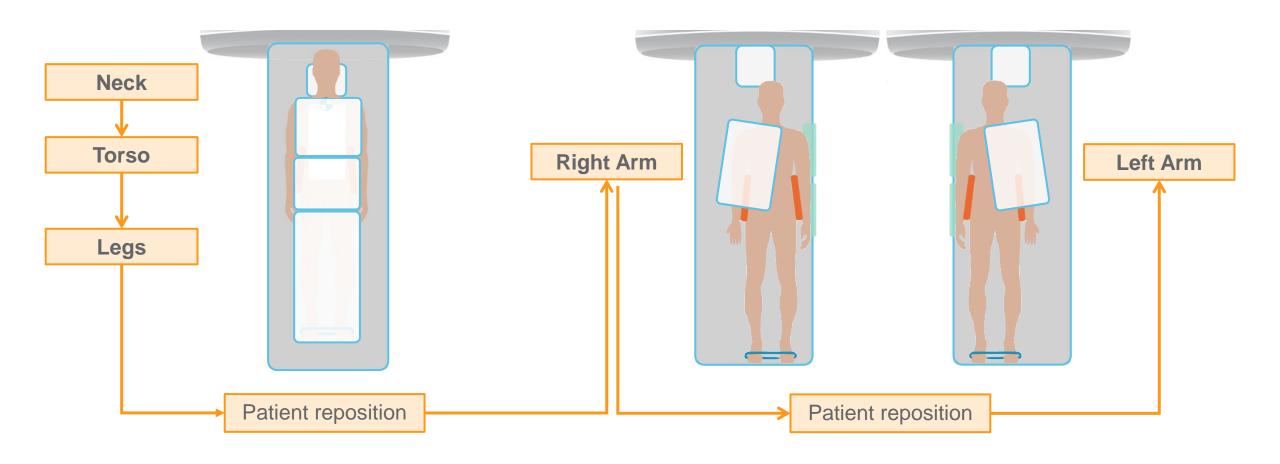
Main Inclusion Criteria

- Age 18-65 years old
- Confirmed diagnosis of FSHD1 with 1-7 repeats
- CSS 2 to 4 on Ricci's scale (range 0-5)
- Presence of STIR positive signal in at least one leg muscle eligible for muscle biopsy

Subject Demographics (N=17)

Variable	Mean(SD);
	range
Age	49.4 (13.02);
	23-65
Gender (Female) %	29.4%
Clinical Severity Score (CSS)	3.0 (0.71);
	2-4
Average Repeats	5.2 (1.46);
	3-7

Imaging Protocol for Whole Body MRI



Skeletal Muscle MRI Muscles Studied- 18 muscles bilaterally; 36



Neck

- Supraspinatus
- Infraspinatus
- Subscapularis
- Teres Minor

Legs

- Quadriceps
- Hamstrings
- Adductors
- Tibialis Anterior
- Gastrocnemius Medialis

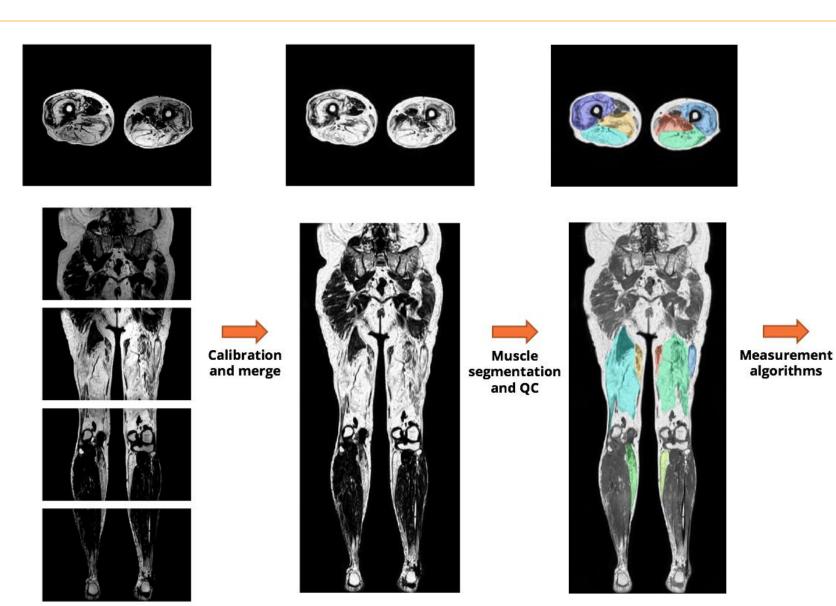
Torso

- Pectoralis Major
- Rhomboideus
- Latissimus Dorsi & Teres Major
- Trapezius
- Serratus Anterior
- Paraspinal (C3-Sacrum)

Arm

- Deltoid
- Biceps Brachii
- Triceps Brachii

Image Analysis

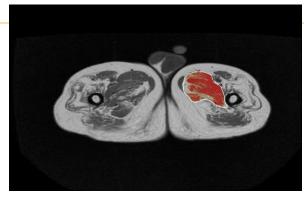


Quantitative Muscle Measurement

LEAN MUSCLE VOLUME (cL)



A measurement of the amount of lean/contractile muscle tissue



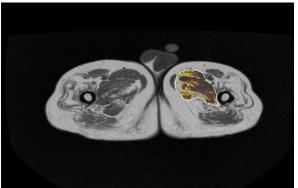
= Lean

= Fatty

MUSCLE FAT INFILTRATION (%)



A measurement of the diffuse fatty infiltration in the leaner/functioning parts of the muscle definition.



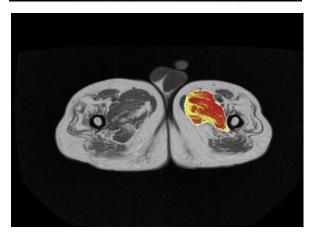
MUSCLE FAT FRACTION (%)







A measurement of the overall fattiness of the muscle. Used to identify affected muscles or follow a muscle-to-fat replacement progress in muscle dystrophy

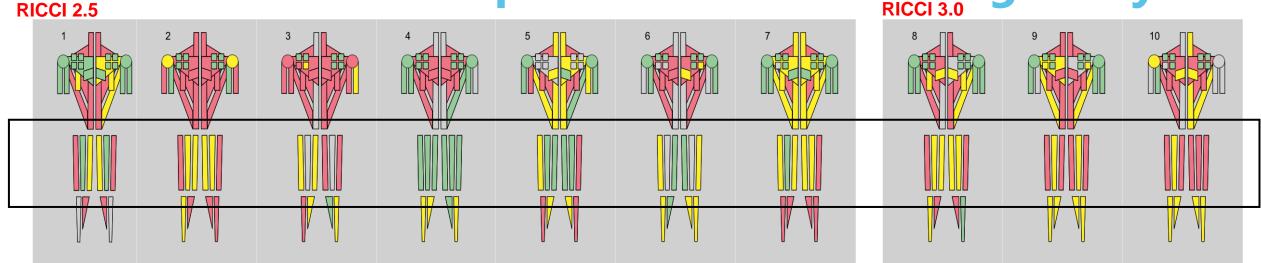


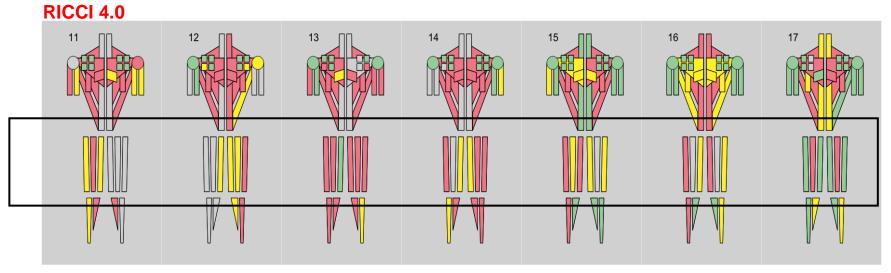
Muscles Analyzed

- 478 out of 612 muscles analyzed
- 134 not analyzable
 - 64 Image Artifacts
 - Technical issues; e.g. streak artifact
 - 70 due to complete fat replacement



WB-MSK-MRI Captures Disease Heterogeneity RICCI 3.0







Normal

 Muscles do not appear to be affected by disease
 MFF ≤ 10%



Intermediate

- Muscles clearly affected by disease, but not so severely fat replaced to have lost all function
- MFI≥10%: MFF≤50%



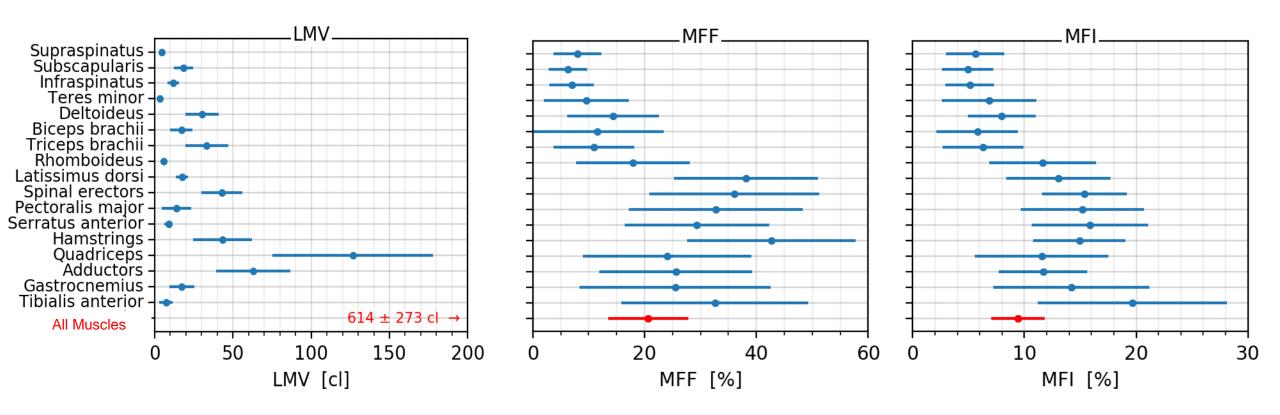
End-Stage

- Muscles severely fat replaced and have likely lost a most if not all function
- MFF≥50%



Excluded due to image artefacts

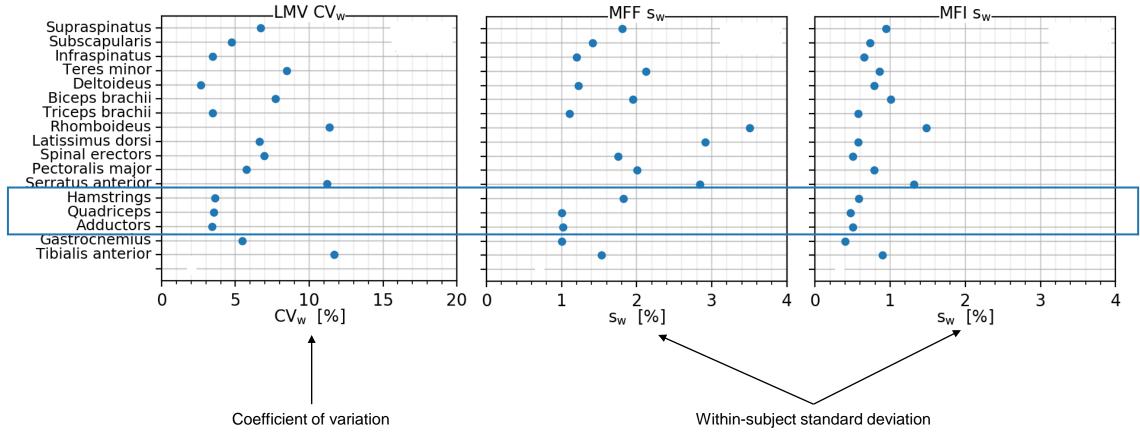
Quantitative Muscle Measurement is Consistent with FSHD Pattern



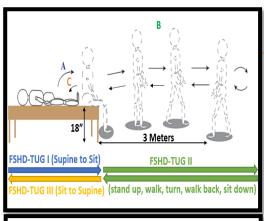
Circle and lines correspond to mean ± one standard deviation

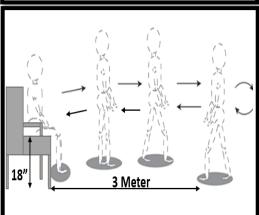
Good Reproducibility for All Muscle Measurements

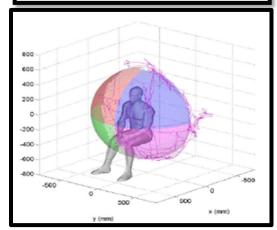
- Good reproducibility across all muscles
- Higher reproducibility in larger muscles



Regional Composite Measurement (MFF_{tot} & MFI_{tot})

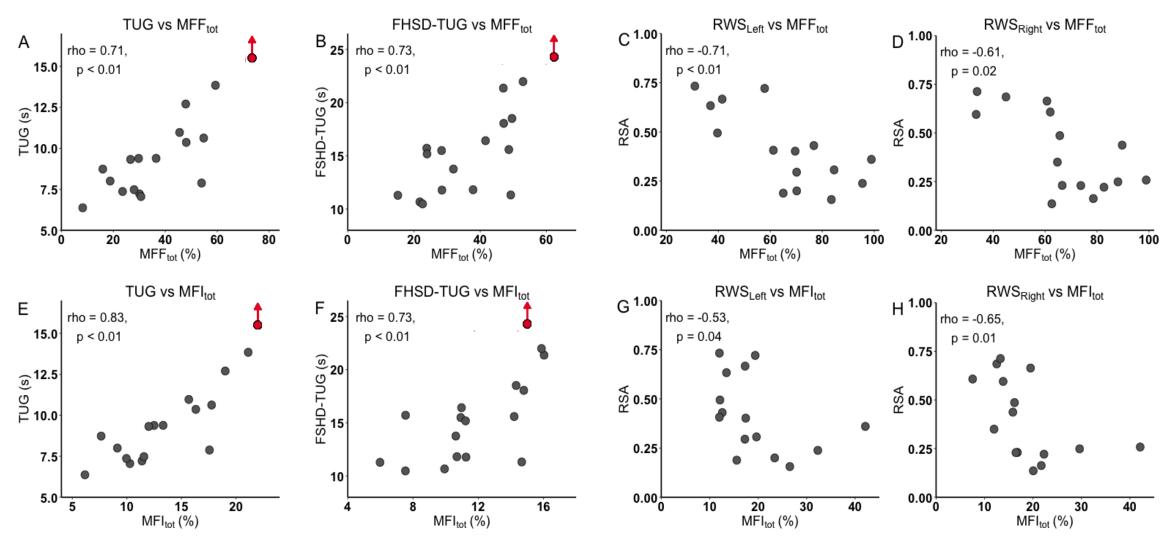






		, (01	totz
Test	Muscles		
	Upper Extremity	<u>Trunk</u>	Lower Extremity
FHSD TUG	Supraspinatus Infraspinatus Subscapularis Teres Minor Deltoid Biceps Brachii Triceps Brachii	Pectoralis Major Rhomboideus Latissimus Dorsi & Teres Major Trapezius Serratus Anterior Paraspinal (C3-Sacrum)	Quadriceps Hamstrings Adductors Tibialis Anterior Gastrocnemius Medialis
Classic TUG	N/A	N/A	Quadriceps Hamstrings Adductors Tibialis Anterior Gastrocnemius Medialis
RWS	N/A	Pectoralis Major Rhomboideus Latissimus Dorsi & Teres Major Trapezius Serratus Anterior	N/A

Regional Composite Measurements (MFF_{tot} & MFI_{tot}) Show Strong Correlations with TUG, FSHD TUG and Moderate Correlations with RWS



Summary

- Developed WB-MSK- MRI protocol
 - Currently being performed in all Phase 2 clinical trials of losmapimod
- Reproducibility of quantitative muscle measurements was excellent
- Strong cross-sectional correlation between Regional Composite Measurement (MFF_{tot} & MFI_{tot}) and TUG, FSHD-TUG and RWS.
- Whole Body-MSK MRI can capture the <u>heterogeneity</u> and provide important information about <u>disease severity</u> as it correlates with FSHD relevant clinical endpoints.

Thank you!





ALL PATIENTS WITH FSHD

Participating Sites













Collaborators

