

High Lung Levels of Active Triphosphate Predicted with Oral AT-527 in COVID Patients

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Disclosure: ¹Employees, ²Contractor of Atea Pharmaceuticals, Inc.

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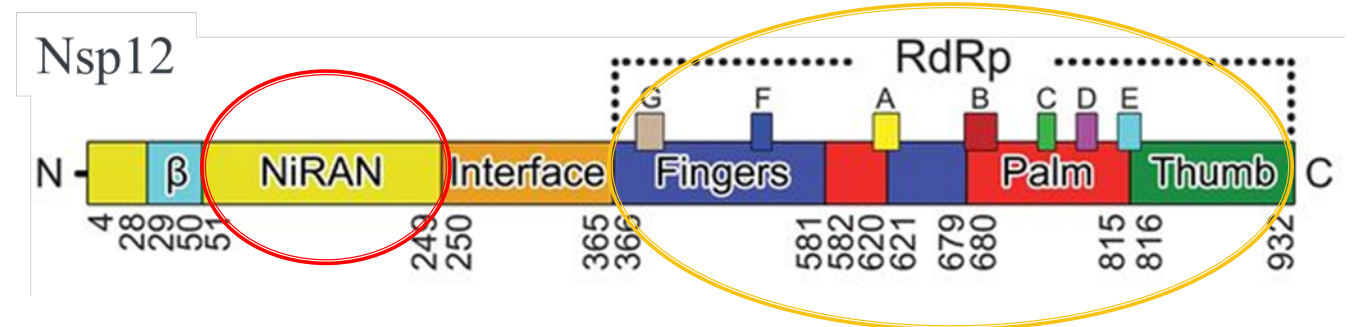
AT-527, Oral Direct-Acting Antiviral, Potential Transformative Treatment for COVID-19

- Novel guanosine nucleotide prodrug; potent *in vitro* antiviral activity against SARS-CoV-2, virus of COVID-19
- Targets SARS-CoV-2 RNA polymerase (nsp12), a highly conserved gene with potential to limit Impact of naturally-evolving mutants
- Safety and efficacy demonstrated in HCV participants prompted clinical evaluation for COVID-19
- Phase 1 results show favorable PK profile, safety and confirm dosing regimen
- High lung levels of active triphosphate predicted with oral AT-527 in COVID patients; clinical dosing (550 mg BID) selected to achieve effective concentrations in lungs against SARS-CoV-2

- Non-structural protein (nsp) 12/7/8 polymerase complex is responsible for both viral RNA replication and transcription

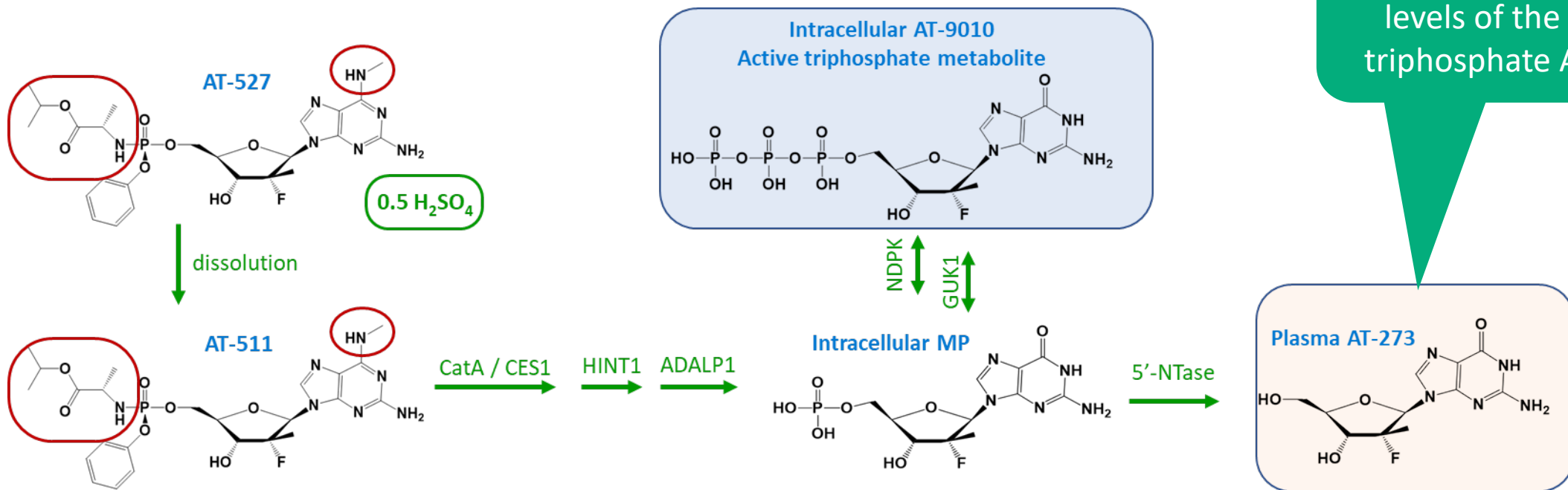
- Nsp12 has two functional domains
 - RdRp = RNA-dependent RNA polymerase
 - NiRAN = Nidovirus RdRp-Associated Nucleotidyltransferase

- Impairment of NiRAN function leads to viral growth inhibition



Metabolism of AT-527 to Active Triphosphate

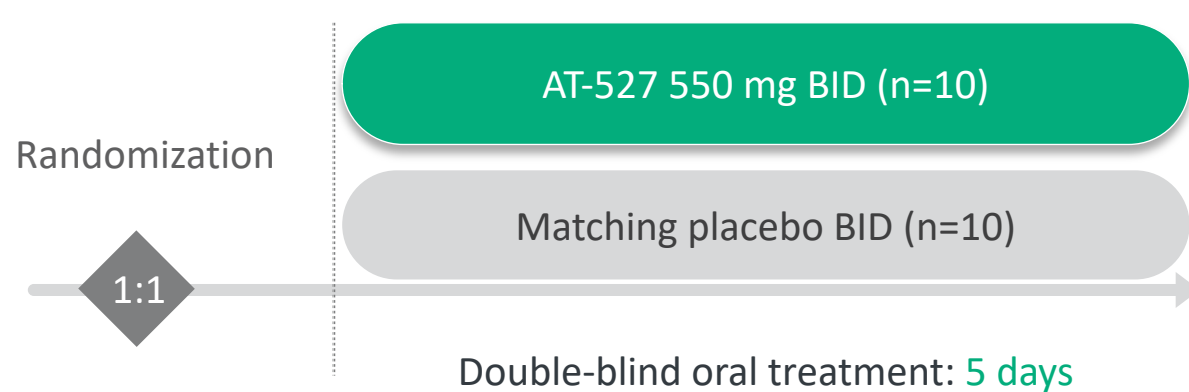
- AT-527, a hemisulfate salt with improved pharmaceutical properties, is rapidly solubilized to AT-511
- AT-511 undergoes multistep activation to the intracellular active triphosphate metabolite AT-9010, inhibiting viral RNA synthesis via the dual mechanism of action
- The plasma metabolite AT-273 is a surrogate marker for AT-9010



AT-527 Phase 1 Results Demonstrate Favorable PK, Safety and Confirm Dosing Regimen

Inclusion Criteria: healthy male and female (N=20) participants 18-65 years of age

Country: Canada
NCT04711187

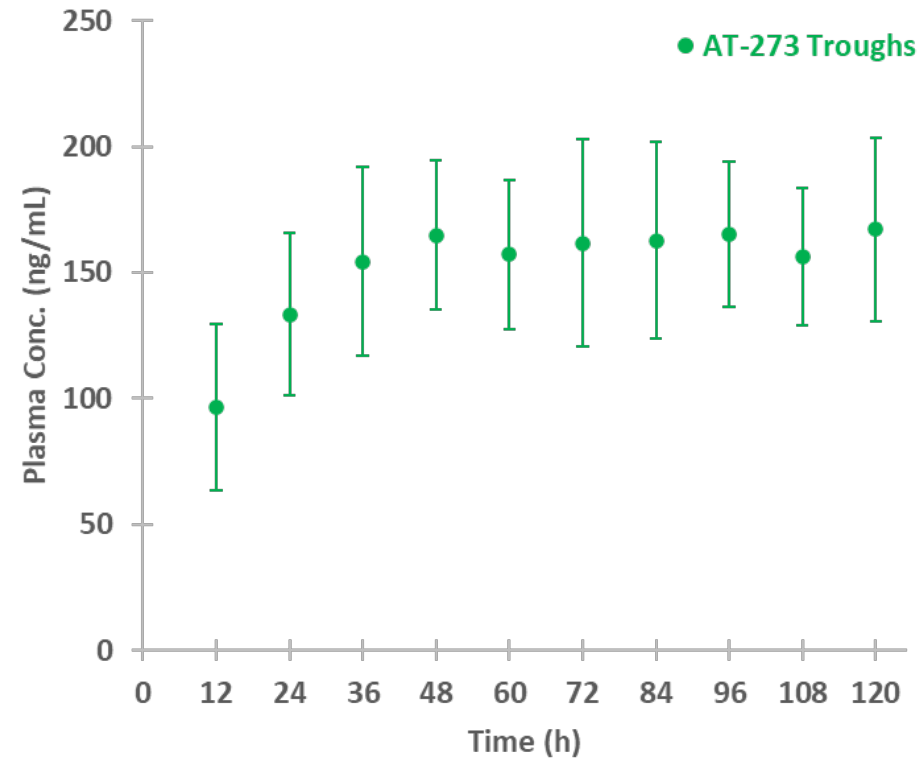
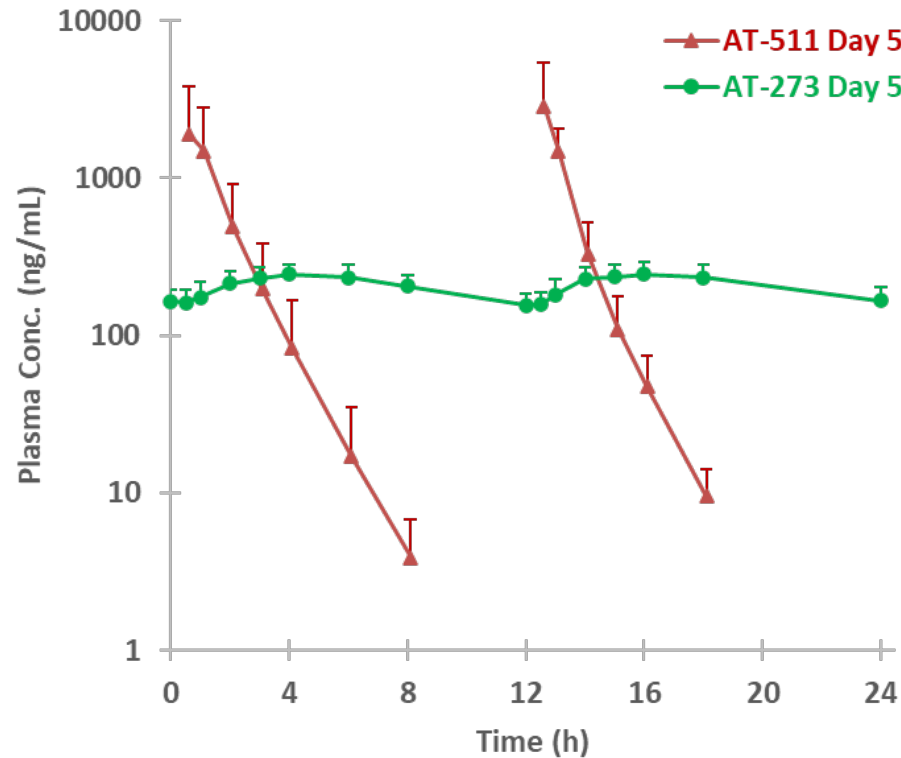


Study objectives: Safety and PK of 550 mg BID dosing regimen

Population and Safety Summary

- Healthy volunteers were mostly male (80%), white (95%), with mean age of 47.3 years old
- All participants completed study
- AT-527 was well-tolerated
- No SAEs/discontinuations
- Four participants (two in each arm) reported non-serious AEs
 - None were treatment-related; all resolved
- No clinically significant laboratory or ECG abnormalities

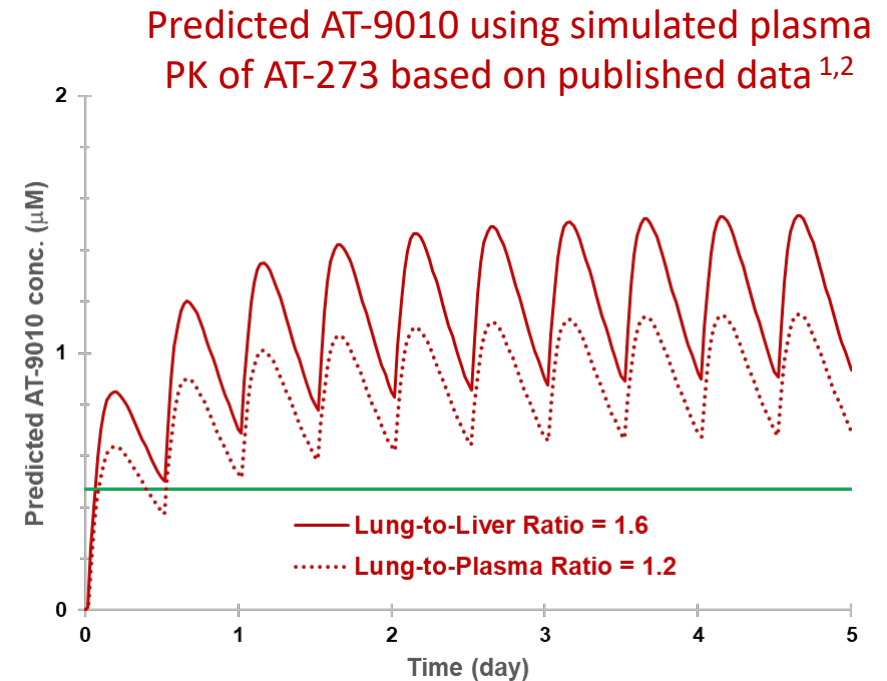
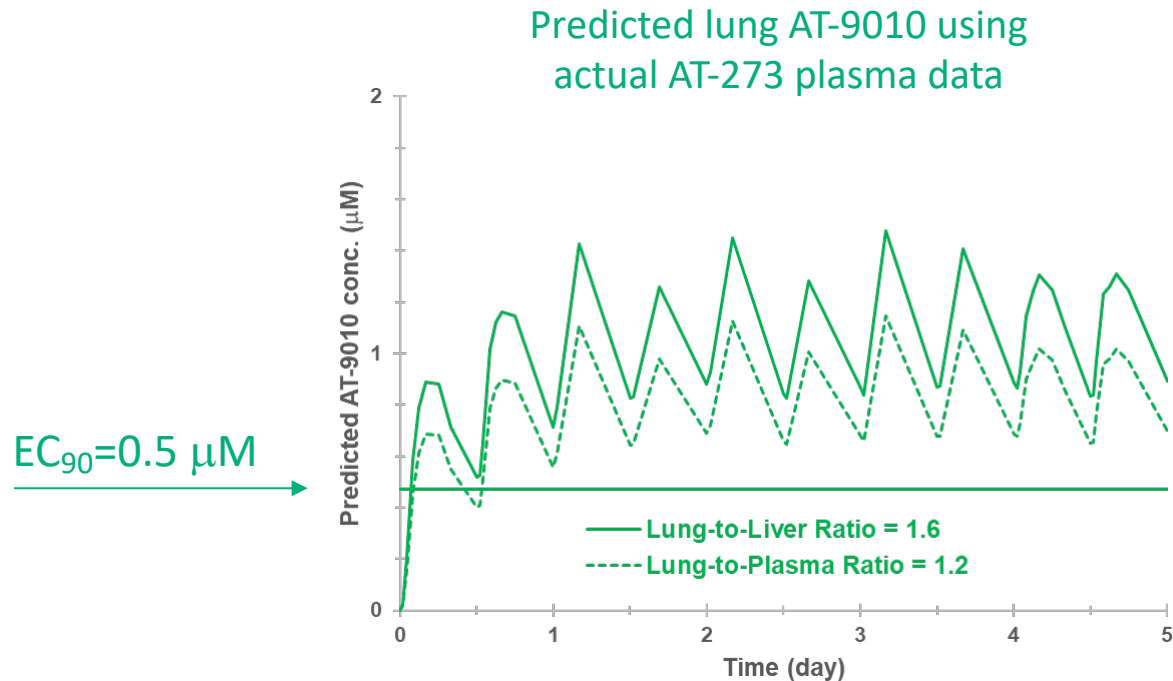
Plasma Pharmacokinetics of AT-511 and AT-273, Surrogate of Intracellular TP



Following Oral Dosing of AT-527 550 mg BID for 5 days in Healthy Volunteers (n=10)

- AT-511 was rapidly absorbed and metabolized
- Plasma AT-511 levels were typically BLQ after 8 h; no accumulation following BID dosing
- Steady state reached with 4th dose based on trough levels of AT-273
- As expected, BID regimen quickly achieved high and sustained trough AT-273 levels

550 mg BID Regimen Selected to Achieve Effective Concentrations in Lungs Against SARS-CoV-2



Human plasma AT-273 PK (surrogate for active TP) was used to predict lung AT-9010 concentrations using scaling factors determined in NHP lung vs. liver (1.6x) and lung vs. plasma (1.2x)²

- Predicted AT-9010 lung levels consistently exceed the *in vitro* EC₉₀ of 0.5 µM of drug inhibiting SARS-CoV-2 replication in HAE cells
- Favorable PK with rapid steady state attainment and fast build-up of trough levels of AT-273, predicting efficacious levels of the active TP in lungs
- AT-527 550 mg BID regimen currently being evaluated in Phase 2 studies for the treatment of COVID-19 (NCT04396106, NCT04709835)

¹ <https://aac.asm.org/content/63/12/e01201-19>

² <https://aac.asm.org/content/early/2021/02/02/AAC.02479-20.long>