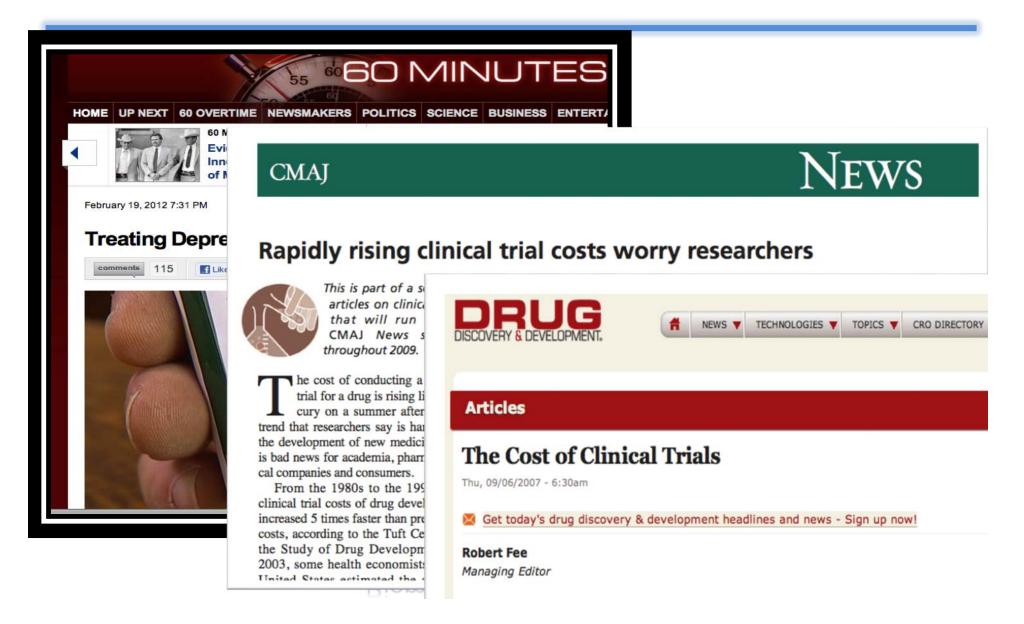


Executive Summary

- 1. We identified a biomarker for placebo response.
- 2. Subjects with COMT met/met polymorphism have predisposition for significantly higher placebo response.
- 3. Approximately 25% of the population is of the met/met type. Subjects can be easily tested for this polymorphism.
- 4. Pre-identification and exclusion of placebo responders can significantly reduce clinical trial size, cost and time-to-market.
- 5. The FDA has expressed interest in this technology.



High Cost of New Drug Development is of Concern to the Industry, Researchers and Patients Alike



The Challenge with High Placebo Rates in Clinical Studies

- Placebo controlled studies are standard for registration of most new drugs.
- The higher the placebo response rate in an indication the larger the clinical study needs to be to demonstrate efficacy.
- The industry is wasting billions of dollars every year in oversized clinical trials to beat the odds of high placebo rates.
- Enrichment strategies such as "Run In Phases" or "Sequential Parallel Comparison Design" have been applied with poor results.

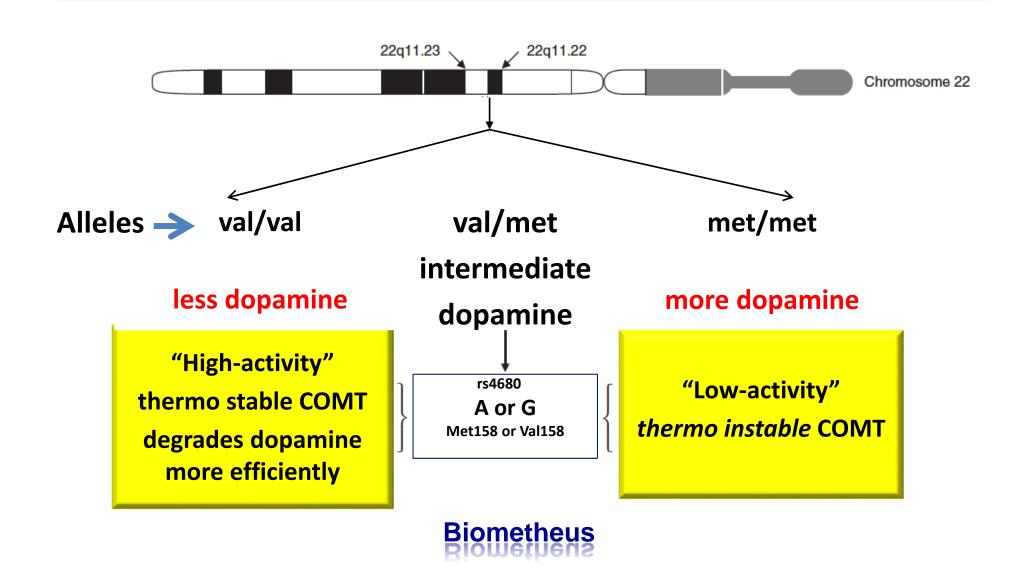


Discovery of Genetic Predictors of Placebo Response

- The enzyme Catechol-O-Methyl Transferase (COMT) degrades catecholamines including dopamine, epinephrine and norepinephrine.
- This process is critical for the prevention of accumulation of these neurotransmitters.
- Polymorphism of COMT gives rise to an inefficient form of COMT (Met/Met) leading to increased dopamine concentration in the brain.

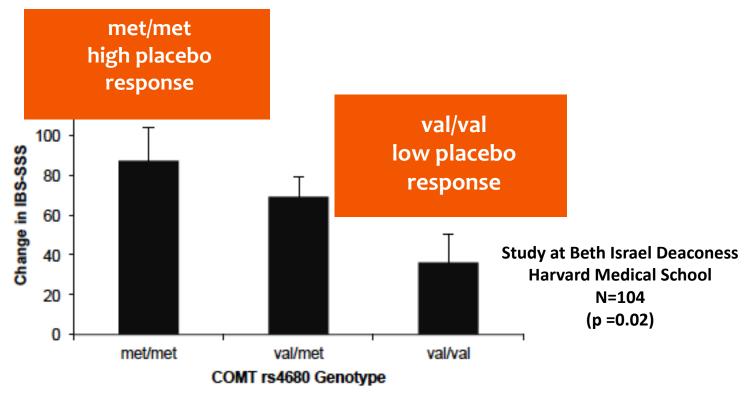


Catechol-O-methyl transferase polymorphism COMT val158met



COMT Genotype is Associated With Placebo Response in Clinical Trial - Example IBS

Patients respond to placebo according to their genotype

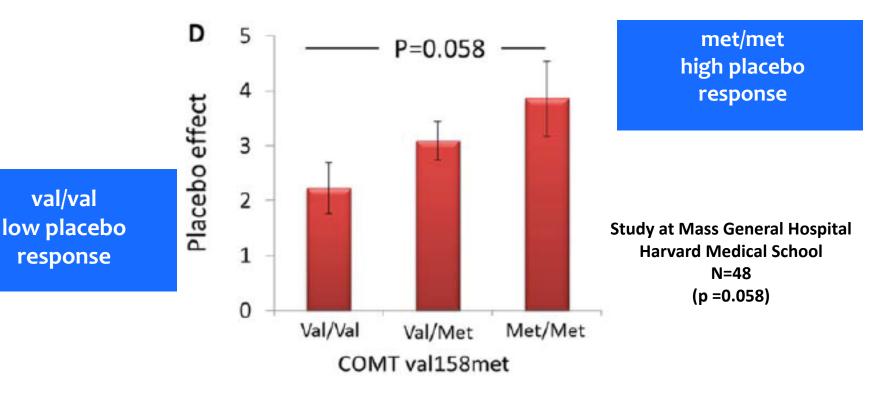


Hall KT, Lembo AJ, Kirsch I, Ziogas DC, et al. (2012) Catechol-O-Methyltransferase val158met Polymorphism Predicts Placebo Effect in Irritable Bowel Syndrome. PLoS ONE 7(10): e48135. doi:10.1371/journal.pone.0048135



COMT Genotype is Associated With Placebo Response in Clinical Trial - Example Pain

Patients respond to placebo according to their genotype



Rongjun Yu, Randy L. Gollub, Mark Vangel, Ted Kaptchuk, Jordan W. Smoller and Jian Kong (2014), Placebo Analgesia and Reward Processing: Integrating Genetics, Personality, and Intrinsic Brain Activity, Human Brain Mapping



The FDA Expressed Support for Technology That Reduces Placebo Response Rates

FDA has expressed interest in technology that allows prescreening and exclusion of patients with predisposition for a high placebo response

- Technologies aiding the reduction in clinical trial size, cost and speed fit with FDA's Critical Path initiative
- Exclusion of placebo responders from proof-of-concept studies is an immediate, viable and acceptable strategy
- In discussions with the FDA our Harvard consultants learned that this technology fits with FDA priorities and they were asked to consider convening a working group of industry representatives and FDA policy makers to discuss the implementation in confirmatory registration studies



Placebo Responder Identification Summary

- 1. COMT is associated with placebo responders.
- Subjects with COMT met/met polymorphism have predisposition for significantly higher placebo response.
- 3. Pre-screening of subjects for COMT polymorphism holds promise for enrichment of low placebo responders in clinical studies.



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