## Meeting of the Advisory Committee on Immunization Practices (ACIP) Centers for Disease Control and Prevention October 24, 2024 Susan Gerber, MD Medical Director GSK



AREXVY is indicated for active immunization for prevention of lower respiratory tract disease (LRTD) caused by RSV in

- Individuals ≥ 60 YOA
- Individuals 50-59 YOA at increased risk for LRTD caused by RSV
- ~ 9 million AREXVY doses administered in US to date

### RSV-OA=ADJ-023: Immune response and safety among adult lung and kidney transplant recipients ≥ 18 years of age Preliminary results

A Phase 2b, randomized, controlled, open-label study to evaluate the immune response and safety of the RSVPreF3 + AS01<sub>E</sub> vaccine in adults ( $\geq$ 18 years of age) when administered to lung and kidney transplant recipients comparing a 1 versus a 2-dose schedule and compared to adults ( $\geq$ 50 years of age) receiving 1 dose NCT 05921903

### CO-4

### **RSV-OA=ADJ-023: Phase 2b Study Design**

Descriptive immunogenicity and safety study in lung and kidney transplant recipients ≥ 18 YOA versus adults ≥ 50 YOA



\*Only in subset of study population, ~30% of participants; \*\*Blood sample for CMI analysis collected at each visit only in subset of study population (~30% of participants); \*\*\*Allowed interval range: 30-60 days; \*\*\*\*For Adults with SOT 1-dose group and Adults ≥ 50 YOA, Visit 4 refers to 1-month post-Visit 3; AE, adverse event; AESI, adverse event of special interest; CMI, cell-mediated immunity; HI, humoral immunity; pIMD, potential immune-mediated disorder; SAE, serious adverse event; SOT, solid organ transplant; YOA, years of age

## **Key Inclusion and Exclusion Criteria**

### Adults with SOT (kidney & lung) ≥ 18 YOA

#### Inclusion criteria:

- ABO compatible allogeneic kidney or lung transplant (allograft)
   > 12 months prior to first study intervention
- Receiving maintenance immunosuppressive therapy for prevention of allograft rejection

#### **Exclusion criteria:**

- Allograft rejection in 3 months prior to first dose
- Current diagnosis of malignancy
- Use of anti-CD20 or other B-cell mAb agents for prevention of allograft rejection within 9 months of first dose

### Adults ≥ 50 YOA

#### Inclusion criteria:

- Medically stable in investigator's opinion
- Participants with chronic stable conditions with or without specific treatment (e.g., diabetes mellitus, hypertension, cardiac disease)

#### **Exclusion criteria:**

- Immunosuppressive or immunodeficient conditions
- Unstable chronic illness

ABO, ABO blood group system; CD, cluster of differentiation; mAb, monoclonal antibody; SOT, solid organ transplant; YOA, years of age ClinicalTrials.gov. NCT05921803. <u>https://www.clinicaltrials.gov/study/NCT05921903</u> (accessed September 2024)



#### Exclusion criteria:

- Previous allograft loss secondary to recurrent primary kidney disease
- Significant proteinuria/albuminuria

Inclusion criteria: Stable lung function Exclusion criteria:

- Acute pulmonary infection with 2 weeks of study intervention visit
- Diagnosis of chronic lung allograft dysfunction

Kidney

Lung

## Demographic Characteristics Generally Balanced Between Groups (Exposed Set) Adults with SOT ≥ 18 YOA

		301 2 16 TUA		
Charactoristic	1-dose group	2-dose group	1-dose group	Total
Age (years) at vaccination, mean (SD)	61.9 (9.3)	61.4 (8.4)	63.8 (8.2)	62.4 (8.7)
Age category, n (%)				
18–49 YOA	9 (6.9)	8 (6.2)	0 (0.0)	17 (4.4)
50–59 YOA	37 (28.2)	41 (31.5)	44 (35.2)	122 (31.6)
≥ 60 YOA	85 (64.9)	81 (62.3)	81 (64.8)	247 (64.0)
Sex, n (%)				
Female	54 (41.2)	50 (38.5)	66 (52.8)	170 (44.0)
Ethnicity, n (%)				
Hispanic or Latino	12 (9.2)	5 (3.8)	22 (17.6)	39 (10.1)
Race, n (%)				
American Indian or Alaska Native	0 (0.0)	1 (0.8)	0 (0.0)	1 (0.3)
Asian	26 (19.8)	33 (25.4)	10 (8.0)	69 (17.9)
Black or African American	11 (8.4)	8 (6.2)	4 (3.2)	23 (6.0)
White	89 (67.9)	79 (60.8)	95 (76.0)	263 (68.1)
Not reported or unknown	4 (3.1)	9 (6.9)	15 (12.0)	28 (7.3)
Multiple	1 (0.8)	0 (0.0)	1 (0.8)	2 (0.5)
SOT type, n (%)				
Lung transplant	39 (29.8)	36 (27.7)	-	-
Kidney transplant	92 (70.2)	94 (72.3)	-	-
Interval between last transplantation and Visit 1 (months), median (min, max)	67 (12, 386)	60 (14, 450)	-	-

Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); SD, standard deviation; SOT, solid organ transplant; YOA, years of age

## Worldwide Study Including 8 Countries





## Immunogenicity

Preliminary results

# Co-primary Endpoints: RSV-A and RSV-B NAbs Higher at 1 Month Post-Dose 2 vs Post-Dose 1 in Adults with SOT $\ge$ 18 YOA Receiving 2 Doses of RSVPreF3 + AS01<sub>E</sub>\*



\*Adults with SOT ≥ 18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1) CI, confidence interval; MGI, mean geometric increase; NAb, neutralizing antibody; SOT, solid organ transplant; YOA, years of age

### RSV-OA=ADJ-023

## RSVPreF3 + AS01<sub>E</sub> Elicits Robust Humoral Immune Responses in Kidney and Lung Transplant Recipients



\*In participants with results available at all timepoints; \*\*For Adults with SOT 1-dose group and Adults ≥50 YOA, Visit 4 refers to 1 month post-Visit 3

Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); CI, confidence interval; ED60, estimated dilution 60; GMT, geometric mean titer; NAb, neutralizing antibody; SOT, solid organ transplant; YOA, years of age

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### RSV-OA=ADJ-023

### RSVPreF3 + AS01<sub>E</sub> Induced Similar RSV-A and RSV-B Neutralizing Antibody Responses in Kidney and Lung Transplant Recipients



\*For Adults with SOT 1-dose group, Visit 4 refers to 1 month post-Visit 3; Adults with SOT 1-dose group: adults with kidney and lung transplant ≥18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant ≥18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1);CI, confidence interval; ED60, estimated dilution 60; GMT, geometric mean titer; SOT, solid organ transplant; YOA, years of age

### Differences in RSV-A and RSV-B Neutralizing Antibody Responses Induced by RSVPreF3 + AS01<sub>E</sub> by Presence or Absence of Mycophenolate



\*For Adults with SOT 1-dose group and Adults ≥50 YOA, Visit 4 refers to 1 month post-Visit 3; Adults with SOT 1-dose group: adults with kidney and lung transplant ≥18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant ≥18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant ≥18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant ≥18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant ≥18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); CI, confidence interval; ED60, estimated dilution 60; GMT, geometric mean titer; MC, mycophenolate; SOT, solid organ transplant; YOA, years of age

### RSV-OA=ADJ-023

## RSVPreF3 + AS01<sub>E</sub> Induces Robust CD4+ T-cell Responses in Kidney and Lung Transplant Recipients



\*Expressing ≥ 2 activation markers including ≥1 cytokine among CD40L, 4-1BB, IL-2, TNF-α, IFN-γ, IL-13, and IL-17

Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$  18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$  18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 3 (30–60 days post-Dose 1); Adults  $\geq$  50 YOA group: adults  $\geq$  50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$  50 YOA group: adults  $\geq$  50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$  50 YOA group: adults  $\geq$  50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); CD, cluster of differentiation; IFN, Interferon; IL, interleukin; SOT, solid organ transplant; TNF, tumor necrosis factor; V, Visit; YOA, years of age

CO-13



## Safety

Preliminary results

### RSV-OA=ADJ-023

## Solicited AEs Broadly Similar Between SOT Groups and ≥ 50 YOA Group (Within 7 Days Post-Vaccination)



Incidence of solicited Grade 3 AEs were low across groups (≤ 3% for any AE in any group)

Grade 3 AEs were defined as administration-site erythema or swelling with a diameter >100 mm, fever with a temperature >39.0°C/102.2°F, and administration-site pain, headache, fatigue, myalgia, and arthralgia that prevented normal activity. Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); AE, adverse event; CI, confidence interval; SOT, solid organ transplant; YOA, years of age

CO-15

RSV-OA=ADJ-023

## Related Unsolicited AEs Similar Between Groups (Within 30 Days Post-Vaccination)



Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); AE, adverse event; CI, confidence interval; SOT, solid organ transplant; YOA, years of age

CO-16

## SAEs Similar Between Dose 1 and Dose 2 SOT Groups (Up to Safety Data Lock Point)



- No specific pattern or clustering of SAEs
- No cases of GBS or atrial fibrillation

Adults with SOT 1-dose group: adults with kidney and lung transplant  $\geq$ 18 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); Adults with SOT 2-dose group: adults with kidney and lung transplant  $\geq$  18 YOA receiving 2 doses of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1) and Visit 3 (30–60 days post-Dose 1); Adults  $\geq$ 50 YOA group: adults  $\geq$ 50 YOA receiving 1 dose of RSVPreF3 + AS01<sub>E</sub> at Visit 1 (Day 1); CI, confidence interval; GBS, Guillain-Barré syndrome; pIMD, potential immune-mediated disease; SAE, serious adverse event; SOT, solid organ transplant; YOA, years of age



## AReSVi-006 Pivotal Efficacy Study: Preliminary Updates from Season 3

Phase 3, Randomized, Placebo-Controlled, Multi-Country Study to Demonstrate Efficacy & Safety of Single & Annual Revaccination Doses in Adults 60 Years & Older

NCT04886596

## AReSVi-006 Phase 3 Trial Design<sup>1-4</sup>



**Primary endpoint:** To demonstrate efficacy of RSVPreF3 + AS01<sub>E</sub> in prevention of RSV LRTD<sup>\*\*</sup> in adults  $\geq$  60 YOA during first season<sup>2</sup> **Confirmatory secondary endpoints:** To demonstrate efficacy of RSVPreF3 + AS01<sub>E</sub> in the prevention of RSV LRTD<sup>\*\*</sup> in adults  $\geq$  60 YOA over three seasons, following a single dose and annual revaccination of RSVPreF3 + AS01<sub>E</sub>, and for each RSV subgroup (A and B) separately<sup>2</sup> All RSV-LRTD<sup>\*\*</sup> cases adjudicated by independent external adjudication committee

Figure adapted from Ison MG et al. Clin Infect Dis 2024. under the terms of the CC BY 4.0 Attribution License (<u>https://creativecommons.org/licenses/by/4.0/</u>); \*Some participants in NH who came at their Pre-season 3 visit before the approval of protocol amendment 5 received Dose 3; \*\*LRTD defined as  $\geq$ 2 lower respiratory symptoms/signs for  $\geq$ 24 hours including  $\geq$ 1 lower respiratory sign OR  $\geq$ 3 lower respiratory symptoms for  $\geq$ 24 hours. All cases of RSV were RT-PCR confirmed; D, day; LRTD, lower respiratory tract disease; N, number of participants in the modified exposed set (S1), dose 2-modified exposed set (S2), participants in the dose 2-modified exposed set who did not receive dose 3 (RSV annual group); NH, Northern Hemisphere; RT-PCR, reverse transcription-polymerase chain reaction; S, season; SH, Southern Hemisphere; YOA, years of age; 1. ClinicalTrials.gov, 2024. NCT04886596.; 2. Papi A et al. N Engl J Med 2023;388:595–608; 3. Ison MG et al. Clin Infect Dis 2024;78:1732–1744; 4. Unpublished data

## ~25,000 Participants Randomized in 17 Countries



RSVPreF3 Vaccine for Respiratory Syncytial Virus (RSV) in Older Adults. Presented at VRBPAC Meeting, March 1, 2023; FDA.gov (URL accessed August 2024); NA, North America; UK, United Kingdom; VRBPAC, Vaccines and Related Biological Products Advisory Committee

### **AReSVi-006 Case Definitions**<sup>1,2</sup>

Signs and symptoms in addition to  $\geq$  1 RSV-positive swab detected by qRT-PCR

ARI ≥ 2 respiratory symptoms or signs <u>OR</u> ≥ 1 respiratory and 1 systemic symptom or sign for at least 24 hours Systemic ■ Fever ■ Fatigut ■ Body = ■ Heada	Systemic symptoms or signs		Respiratory symptoms or signs	
	<ul> <li>Fever/feverishness</li> <li>Fatigue</li> <li>Body aches</li> <li>Headache</li> <li>Decreased appetite</li> </ul>	<ul> <li>Upper respiratory symptoms or signs</li> <li>Nasal congestion</li> <li>Sore throat</li> </ul>	Lower respiratory symptoms Sputum Cough Dyspnea	<ul> <li>Lower respiratory signs</li> <li>Wheezing</li> <li>Crackles/rhonchi</li> <li>Tachypnea</li> <li>Hypoxemia</li> <li>O<sub>2</sub> supplement</li> </ul>
	LRTD* ≥ 2 lower re signs (≥ 1 si <u>OR</u> ≥ 3 lower re least 24 hou	spiratory symptoms or ign) spiratory symptoms for at urs	Lower respiratory symptoms Sputum Cough Dyspnea	<ul> <li>Lower respiratory signs</li> <li>Wheezing</li> <li>Crackles/rhonchi</li> <li>Tachypnea</li> <li>Hypoxemia</li> <li>O<sub>2</sub> supplement</li> </ul>
		Severe LR ≥ 2 lower re <u>OR</u> episode pre everyday a	a <b>TD*</b> espiratory signs eventing normal, activities	<ul> <li>Lower respiratory signs</li> <li>Wheezing</li> <li>Crackles/rhonchi</li> <li>Tachypnea</li> <li>Hypoxemia</li> <li>O<sub>2</sub> supplement</li> </ul>

\*USPI case definitions; ARI, acute respiratory infection; LRTD, lower respiratory tract disease; qRT-PCR, quantitative reverse transcription-polymerase chain reaction; 1. GSK's RSVPreF3 OA Vaccine (AREXVY). Presented at ACIP, 21 June 2023 <u>https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2023-06-21-23/03-RSV-Adults-Friedland-508.pdf</u> (URL accessed August 2024); 2. Papi A et al. N Engl J Med 2023;388:595–608

### Single Dose of RSVPreF3 + AS01<sub>E</sub> Demonstrates Clinically Meaningful Vaccine Efficacy Against RSV-LRTD\* Over 3 RSV Seasons<sup>1-4</sup>

	RSVPreF3 +			% VE (	CI)****
Season	AS01 <sub>E</sub>	Placebo		W/ season	W/o seeson
(median follow-up time)	Number of events (n/N)		Vaccine Efficacy (CI)*****	covariate cov	covariate
<b>Season 1</b> ** (end of NH S1; 6.7m) <sup>1</sup>	<b>7</b> / 12,466	<b>40</b> / 12,494	<b>⊢−−−−−</b> 1	n/a	<b>82.6</b> (57.9, 94.1)
<b>Season 1 + 2***</b> (end of NH S2; 17.8m) <sup>2</sup>	<b>30</b> / 12,469	<b>139</b> / 12,498	<b>⊢−−−−−</b> 1	<b>67.2</b> (48.2, 80.0)	<b>74.5</b> (60.0, 84.5)
<b>2 calendar years</b> **** (end of SH S2; 23.3m) <sup>3</sup>	<b>32</b> / 12,468	<b>154</b> / 12,498	<b>⊢−−−−</b> 1	<b>67.7</b> (52.3, 78.7)	<b>73.3</b> (60.7, 82.4)
<b>Season 1–3</b> *** (end of NH S3; 30.6m) <sup>4</sup>	<b>48</b> / 12, 468	<b>215</b> / 12,498	<b>⊢−−−−</b> +	<b>62.9</b> (46.7, 74.8)	<b>69.1</b> (55.8, 78.9)
		00	%     20%    40%    60%    80%    10	0%	

\*VE is maintained up to end of Season 3 NH. Confirmatory secondary endpoint is demonstrated with LL >20%; \*\*96.95% CI; \*\*\*97.5% CI; \*\*\*\*95% CI; \*\*\*\*VE was estimated using a Poisson model adjusted for age, region, and season ("with season as a covariate") or for age and region ("without season as a covariate"; post-hoc analyses). For Season only VE, season could not be considered a covariate, so data are presented in the "without season as a covariate" column; CI, confidence interval; LRTD, lower respiratory tract disease; m, month; n/a, not applicable; NH, Northern Hemisphere; S, Season; SH, Southern Hemisphere; VE, vaccine efficacy.

1. Papi A et al. N Engl J Med 2023;388:595–608; 2. Ison MG et al. Clin Infect Dis 2024;78:1732–1744; 3. Gerber S. AREXVY (Adjuvanted RSVPreF3) 2-Year Update. Presented at ACIP 26 June 2024. https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2024-06-26-28/03-RSV-Adult-Gerber-508.pdf (accessed August 2024); 4. Unpublished data

## Vaccine Efficacy of Single Dose of RSVPreF3 + AS01<sub>E</sub> Against Severe RSV-LRTD Over 3 RSV Seasons<sup>1-4</sup>

	RSVPreF3 +			% VE (9	95% CI)*
Season	AS01 <sub>E</sub>	Placebo		W/ season	W/o season
(median follow-up time)	Number of e	events (n/N)	Vaccine Efficacy (95% CI)	covariate	covariate
<b>Season 1</b> (end of NH S1; 6.7m) <sup>1</sup>	<b>1</b> / 12,466	<b>17</b> / 12,494	• • • • • • • • • • • • • • • • • • •	n/a	<b>94.1</b> (62.4, 99.9)
<b>Season 1 + 2</b> (end of NH S2; 17.8.m) <sup>2</sup>	<b>7</b> / 12,469	<b>48</b> / 12,498	<b>⊢−−−−−</b> 1	<b>78.8</b> (52.6, 92.0)	<b>82.7</b> (61.6, 93.4)
<b>2 calendar years</b> (end of SH S2; 23.3m) <sup>3</sup>	<b>9</b> / 12,468	<b>54</b> / 12,498	<b>⊢−−−−−</b> 1	<b>74.9</b> (48.4, 89.2)	<b>78.6</b> (56.3, 90.7)
<b>Season 1–3</b> (end of NH S3; 30.6m) <sup>4</sup>	<b>15</b> / 12,468	<b>75</b> / 12,498	<b></b>	<b>67.4</b> (42.4, 82.7)	<b>72.3</b> (51.3, 85.2)
		0	% 20% 40% 60% 80% 100	0%	

\*VE estimated using Poisson model adjusted for age, region, and season ("with season as a covariate") or for age and region ("without season as a covariate"; post hoc analyses). For Season only VE, season could not be considered a covariate, so data are presented in the "without season as a covariate" column; CI, confidence interval; LRTD, lower respiratory tract disease; m, month; n/a, not applicable; NH, Northern Hemisphere; S, Season; SH, Southern Hemisphere; VE, vaccine efficacy; 1. Papi A et al. N Engl J Med 2023; 2. Ison MG et al. Clin Infect Dis 2024; 3. Gerber S. AREXVY (Adjuvanted RSVPreF3) 2-Year Update. Presented at ACIP 26 June 2024. https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2024-06-26-28/03-RSV-Adult-Gerber-508.pdf (accessed August 2024); 4. Unpublished data

## Single Dose of RSVPreF3 + AS01<sub>E</sub> Shows Consistent Vaccine Efficacy for Subgroups Over 3 RSV Seasons



\*COPD, asthma, any chronic respiratory/pulmonary disease, diabetes type 1 or type 2, chronic heart failure, advanced liver or renal disease; \*\*97.5% CI for confirmatory secondary endpoint; 95% CI for other endpoints; \*\*\*Vaccine efficacy was estimated using a Poisson model adjusted for age, region, and season ("with season as a covariate");

COPD, chronic obstructive pulmonary disease; CI, confidence interval; LL, lower limit; LRTD, lower respiratory tract disease; VE, vaccine efficacy; YOA, years of age. Unpublished data

## Vaccine Efficacy of Single Dose of RSVPreF3 + AS01<sub>E</sub> Against RSV-LRTD by RSV Season<sup>1-4</sup>

Season	RSVPreF3 + AS01 <sub>E</sub>	Placebo			
(median follow-up time)	Number of events (n/N)		Vaccine Efficacy (CI)*	% VE (CI)*	
<b>Season 1</b> (end of NH S1; 6.7m) <sup>1</sup>	<b>7</b> / 12,466	<b>40</b> / 12,494		<b>82.6</b> (57.9, 94.1)	
Season 2 only (end of NH S2; 6.3m) <sup>2</sup>	<b>20</b> / 4991	<b>91</b> / 10,031	<b>⊢−−−−−</b> †	<b>56.1</b> (28.2, 74.4)	
Season 2 only (end of SH S2; 11.9m) <sup>3</sup>	<b>22</b> / 4988	<b>106</b> / 10,031	<b>⊢−−−−−</b> 1	<b>58.5</b> (33.9, 75.0)	
Season 3 only (end of NH S3; 7m) <sup>4</sup>	<b>16</b> / 4988	<b>61</b> / 10,031	• • • • • • • • • • • • • • • • • • •	<b>48.0</b> (8.7, 72.0)	
		0	% 20% 40% 60% 80% 100 <sup>°</sup>	%	

\*96.95% CI for the primary endpoint (S1 RSV-LRTD, overall); 95% CI for other endpoints; CI, confidence interval; LRTD, lower respiratory tract disease; m, month; n/a, not applicable; NH, Northern Hemisphere; S, Season; SH, Southern Hemisphere; VE, vaccine efficacy

1. Papi A et al. N Engl J Med 2023;388:595–608; 2. Ison MG et al. Clin Infect Dis 2024;78:1732–1744; 3. GSK. Data on File; 2024N557587\_00; 4. Unpublished data



Season	RSVPreF3 + AS01 <sub>E</sub>	Placebo		
(median follow-up time)	Number of e	events (n/N)	Vaccine Efficacy (95% CI)	<b>% VE</b> (95% CI)
<b>Season 1</b> (end of NH S1; 6.7m) <sup>1</sup>	<b>1</b> / 4937	<b>18</b> / 4861		<b>94.6</b> (65.9, 99.9)
Season 2 only (end of NH S2; 6.3m) <sup>2</sup>	<b>12</b> / 1981	<b>48</b> / 3895	• • • • • • • • • • • • • • • • • • •	<b>51.5</b> (7.4, 76.6)
Season 2 only (end of SH S2; 11.9m) <sup>3</sup>	<b>13</b> / 1990	<b>55</b> / 3916		<b>54.2</b> (15.1, 77.1)
Season 3 only (end of NH S3; 7m) <sup>4</sup>	<b>8</b> / 2000	<b>37</b> / 3924		<b>57.8</b> (8.0, 83.0)
		0	0% 20% 40% 60% 80% 100%	

\*Conditions of interest included any chronic respiratory/pulmonary disease (including chronic obstructive pulmonary disease and asthma) and chronic heart failure (cardiorespiratory), and diabetes mellitus type 1 or type 2 and advanced liver or renal disease (endocrine or metabolic); CI, confidence interval; COPD, chronic obstructive pulmonary disease; LRTD, lower respiratory tract disease; m, month; NH, Northern Hemisphere; S, Season; SH, Southern Hemisphere; VE, vaccine efficacy; YOA, years of age

1. Papi A et al. N Engl J Med 2023;388:595–608; 2. Ison MG et al. Clin Infect Dis 2024;78:1732–1744; 3. GSK. Data on File; 2024N557587\_00; 4. Unpublished data

## Safety Profile Remains Consistent and Acceptable Over 3 Seasons

- ~ 25,000 participants in pivotal efficacy trial
  - Cumulative follow-up occurred across all groups for median of 31.7 months
  - Safety profile of vaccine in adults ≥ 60 YOA remains acceptable and consistent with label<sup>1</sup>
- Frequency of SAEs/pIMDs remained low and similar across groups
  - No reports of GBS, ADEM

### Public Health Benefits with RSVPreF3 + AS01<sub>E</sub> Vaccination Over 3 Years

Potential RSV outcomes averted with vaccination vs no vaccination over 3 years based on 30.6-month follow up from Study 006 and over 2 years based on 23.3-month follow-up from Study 006 among US adults aged 50-59 years with COPD



Assuming same vaccination coverage as influenza vaccines from 2022-2023 season (https://www.cdc.gov/flu/fluvaxview/interactive-general-population.htm); Analysis includes 3,299,241 US adults with COPD aged 50-59 years, with 1,652,920 (50.1%) receiving RSVPreF3 + AS01<sub>E</sub>; Estimated health outcomes over 2 years based on vaccine efficacy estimates using 23.3-month follow-up data from RSV OA=ADJ-006 Phase 3 Trial; Estimated health outcomes over 3 years based on vaccine efficacy estimates using 30.6-month follow-up data from RSV OA=ADJ-006 Phase 3 Trial; Estimated health outcomes over 3 years based on vaccine efficacy estimates using 30.6-month follow-up data from RSV OA=ADJ-006 Phase 3 Trial

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## **Overview of Clinical Development Program**

### **Overview of Clinical Development**

### **Co-administration**

Safety, reactogenicity, and Immunogenicity



FLU-aQIV: adjuvanted quadrivalent influenza vaccine; FLU-QIV: quadrivalent influenza vaccine; FLU-QIV-HD: high-dose quadrivalent influenza vaccine; HZ/su: herpes zoster recombinant subunit; M: month; PCV20, 20-valent pneumococcal conjugate vaccine; RSV-LRTD: respiratory syncytial virus lower respiratory tract disease; YOA: years of age All studies ClinicalTrials.gov; All URLs accessed October 2024



## Summary

### Conclusions

1

One dose of RSVPreF3 + AS01<sub>E</sub> provides robust RSV-A and RSV-B neutralizing antibody responses and high CD4+ T-cell responses; acceptable safety profile in kidney and lung transplant recipients  $\geq$  18 YOA



For solid organ transplant recipients on mycophenolate, a second dose of RSVPreF3 + AS01<sub>E</sub> resulted in RSV-A and RSV-B neutralizing antibody responses close to levels observed in adults  $\geq$  50 YOA at same time point



RSVPreF3 + AS01<sub>E</sub> provides clinically meaningful efficacy over 3 seasons (median follow up time 30.6 months) in  $\geq$  60 YOA, with a continued acceptable safety profile



Estimated public health benefits of RSVPreF3 + AS01<sub>E</sub> are increased given its efficacy over 3 seasons as compared to previous efficacy estimates



Ahead of this year's RSV season, it is important to protect vulnerable individuals ≥ 50 YOA who are at high-risk for severe RSV disease

## Meeting of the Advisory Committee on Immunization Practices (ACIP) Centers for Disease Control and Prevention October 24, 2024 Susan Gerber, MD Medical Director GSK