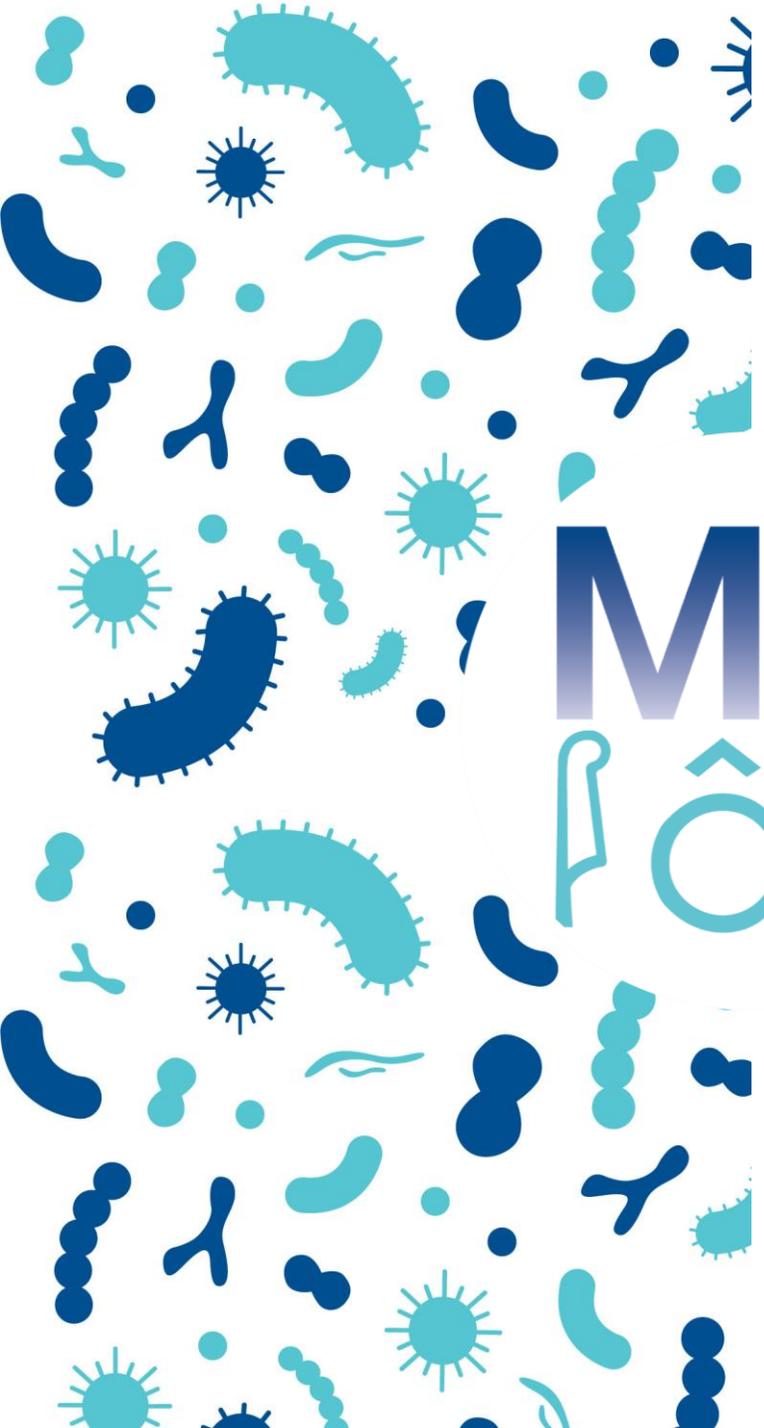


MaaT Rôle

MaaT Pharma Microbiota as a Therapy

SEPTEMBER 16th 2021

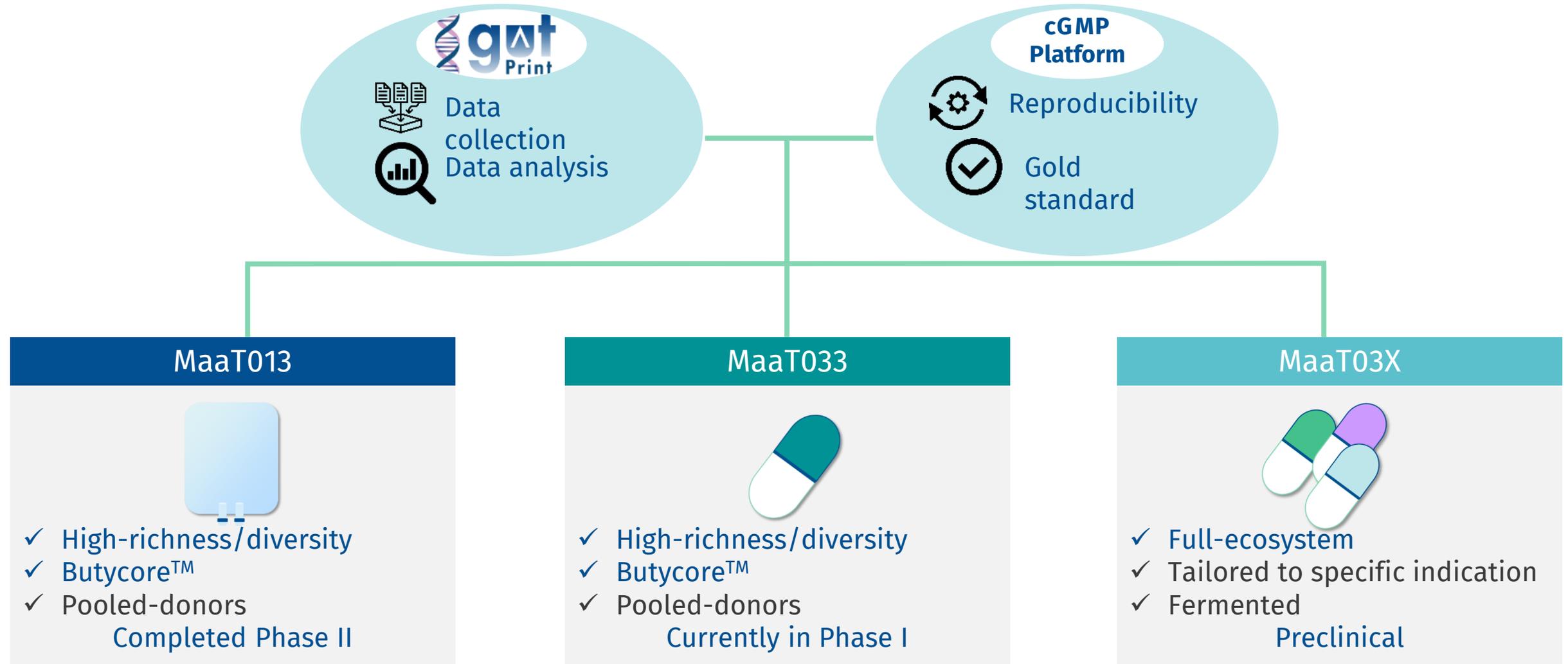
Approches innovantes en santé humaine, animale et
environnementale dans la lutte contre l'antibiorésistance



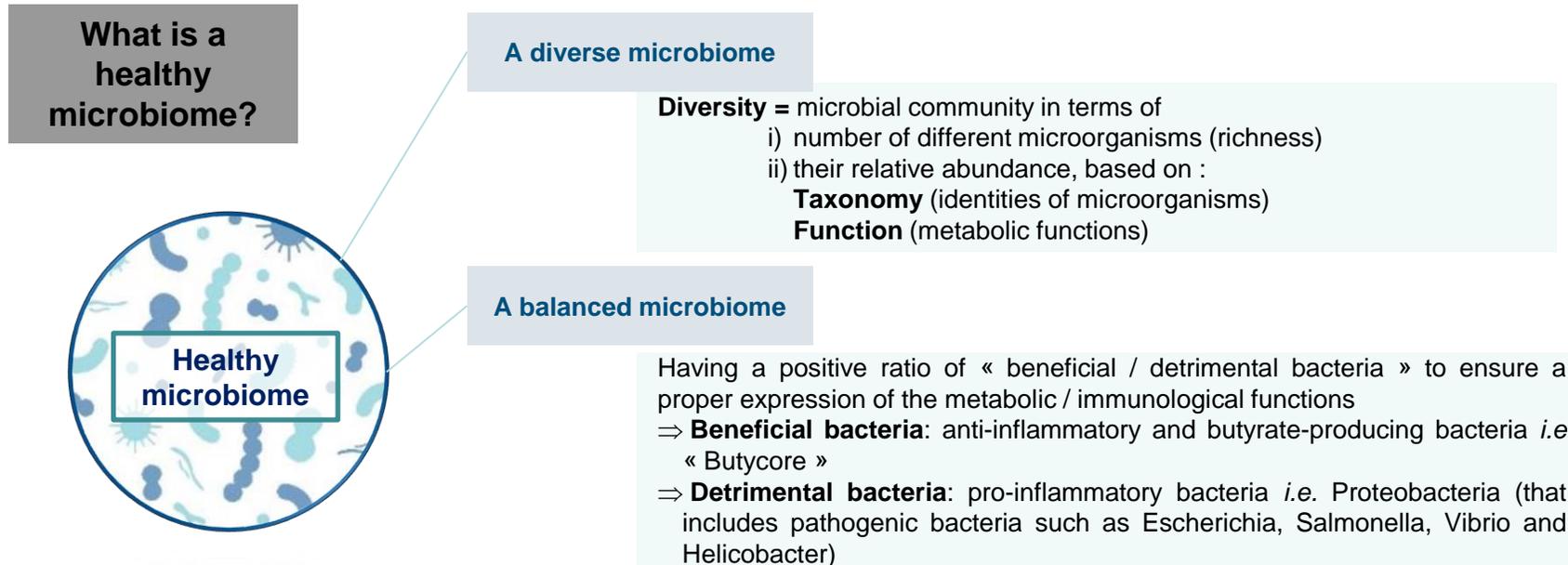
MaaT
Pharma

MaaT Pharma's
Microbiome Ecosystem
Therapy Platform

MaaT Pharma's MET Platform has generated a diverse line of product candidates



Both diversity and functionality matter

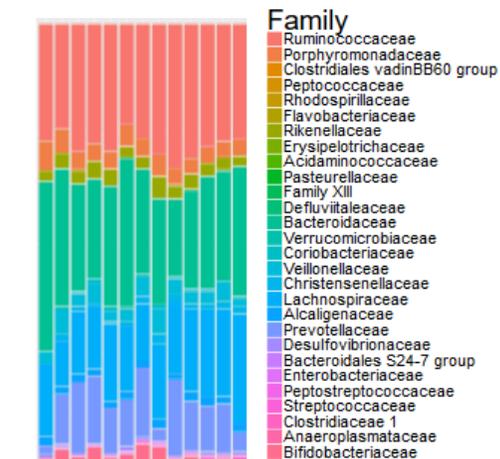
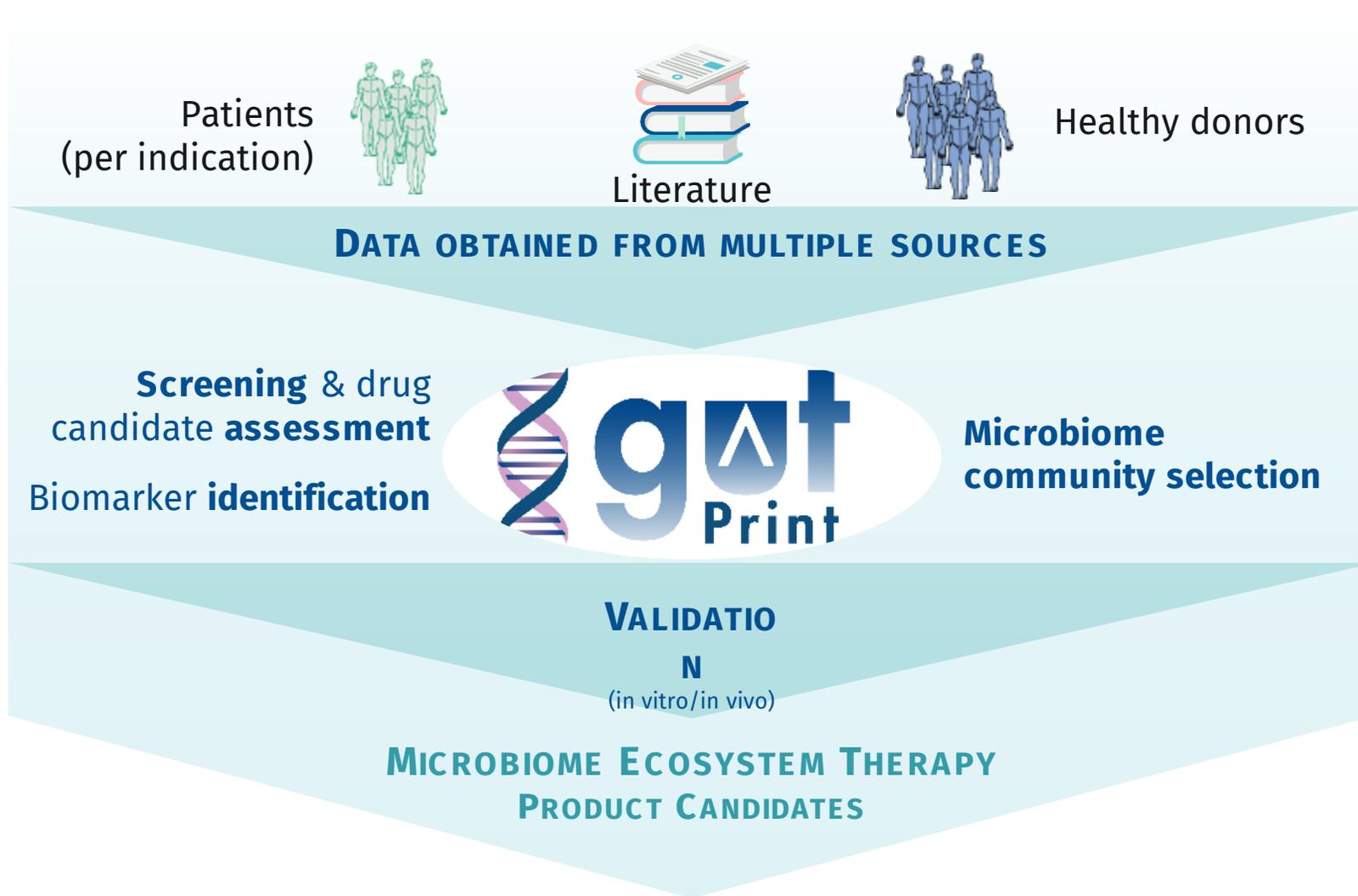


Looking only at diversity will not allow to restore the full functionality of the microbiome.

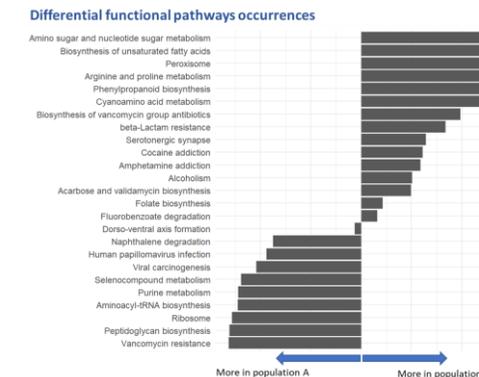
Combination of diversity and balanced microbiome composition ensures the full therapeutic effect.

We ensure through GutPrint® that our drugs will fulfill all these characteristics

Our Integrated Drug Discovery Platform to Develop Microbiome Ecosystem Therapies



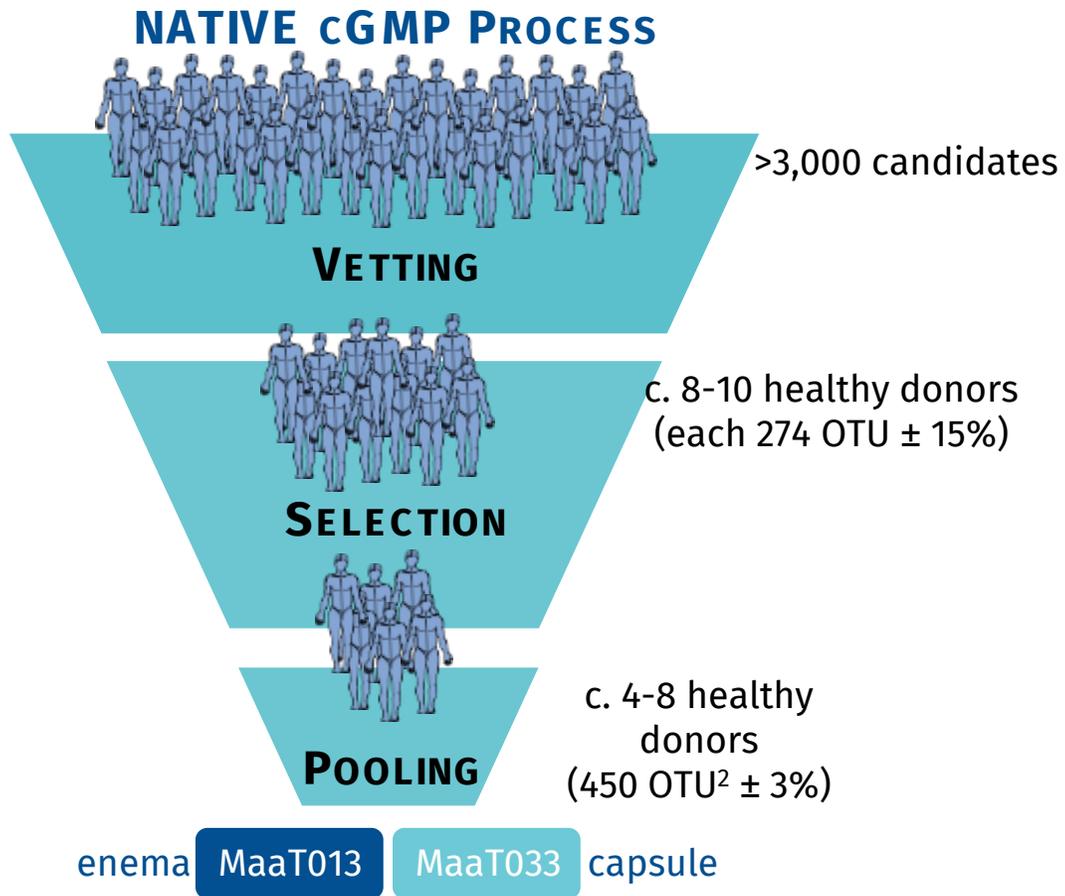
Supportive ecosystems



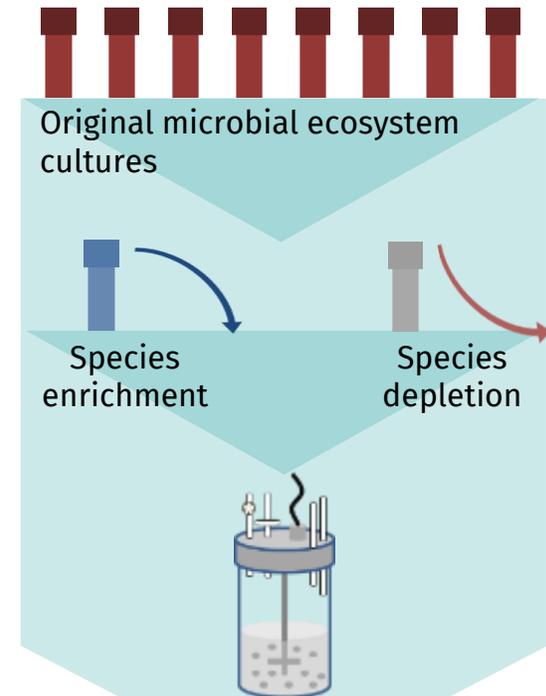
Functional analysis

cGMP MANUFACTURING & CLINICAL TESTING

MaaT Pharma's differentiated process creates product versatility with production adhering to the highest pharmaceutical standards (cGMP)



FERMENTED cGMP PROCESS



CO-FERMENTING A FULL ECOSYSTEM

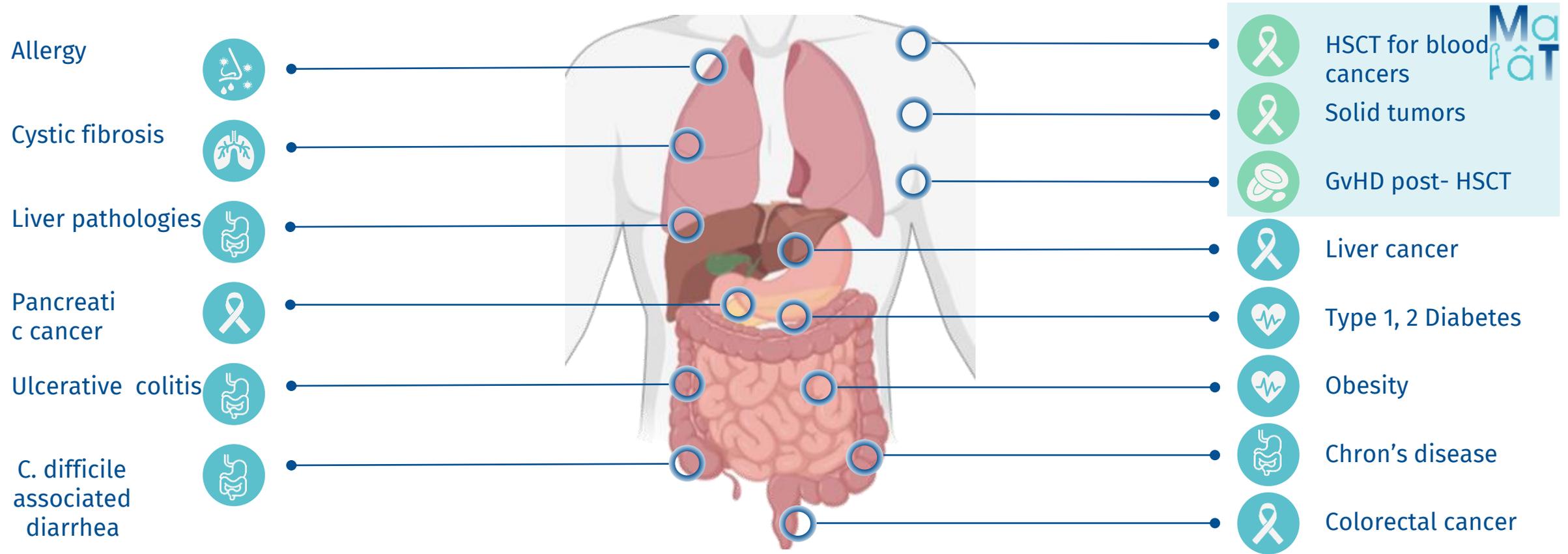
capsule **MaaT03X**

- ✓ Standardized, off-the shelf, full ecosystem
- ✓ High, consistent richness and diversity
- ✓ Preserved Butycore¹



- ✓ Designable
- ✓ High scalability
- ✓ Donor-independent

The gut microbiome has broad potential implications in a variety of diseases

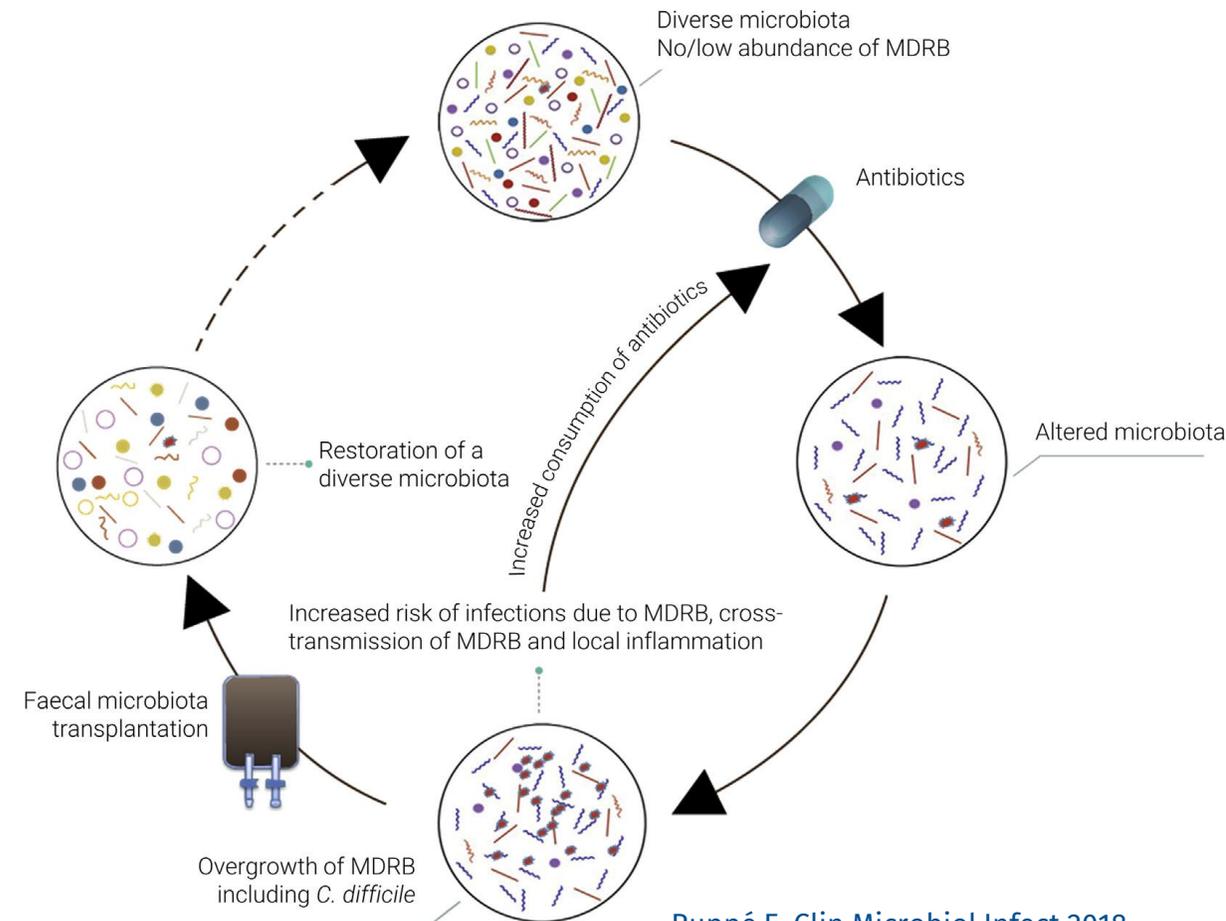


¹Abrahamsson, JACI 2012; ²Han, Thorax 2012; ³Rea, J Clin Microbiol 2012; ⁴Le Chatelier, Nature 2013; ⁵Qin, Nature 2014; ⁶Qin, Nature 2010; ⁷Gevers, Cell Host Microbe 2014; ⁸Lepage, Gastroenterology 2011; ⁹Kostic, Cell Host Microbes 2015; ¹⁰Forslund, Nature 2015; ¹¹Tap, Gastroenterology 2017; ¹²Ma et al, Science 2018; ¹³Gao et al, Eur J Clin Microbiol Infect Dis 2017; ¹⁴Taur, Blood 2014; ¹⁵Galloway-Pena, Cancer, 2016; ¹⁶Wargo J L. Science 2018; ¹⁷Zitvogel. Science 2018

MaaT Pharma is focusing on life-threatening diseases in oncology and hematology with high unmet need

The gut microbiome has broad potential implications in a variety of diseases

- Several case reports and retrospective cohorts describe FMTs performed in MDR bacteria-carrying patients
- Many clinical trials are ongoing (FMT/eradication/decolonization / antibiotic resistance > 20 studies in clinicaltrials.gov)
- Fecal microbiota transfer (FMT) could eradicate the digestive carriage of MDR bacteria via colonization resistance mechanism.

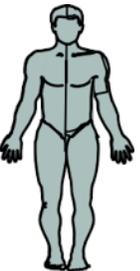


Ruppé E, Clin Microbiol Infect 2018

Acute Graft versus Host Disease (aGvHD) is an Unmet Medical Emergency

Treatment of patients with hematological malignancies often results in microbiome dysbiosis, leading to aGvHD

Hematological malignancy patients



Chemotherapy
Antibiotics
Irradiation
Immunosuppressants

Allogenic Hematopoietic Stem Cell Transplantation (allo-HSCT) c. 22,000 (c. 20,500 primary procedures and 7%-10% recurrent)¹ patients/year

Acute Graft-versus-Host Disease

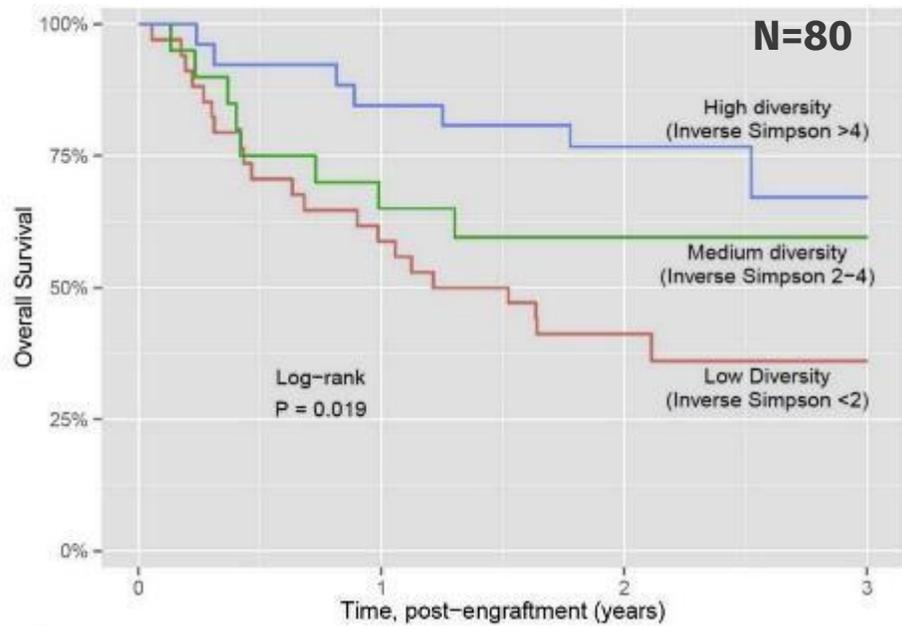
Dysbiosis

- Pathogen colonization
- Sepsis
- Neutropenic fever
- Multi-drug resistant bacteria

Approx. 10,000 patients/yr¹
50% Steroid Resistant
70-90% 1-yr mortality
c. 60% with GI involvement

Gut Microbiota Diversity Drives Survival in Leukemia Patients Following Allogeneic-Hematopoietic Stem Cell Transplant

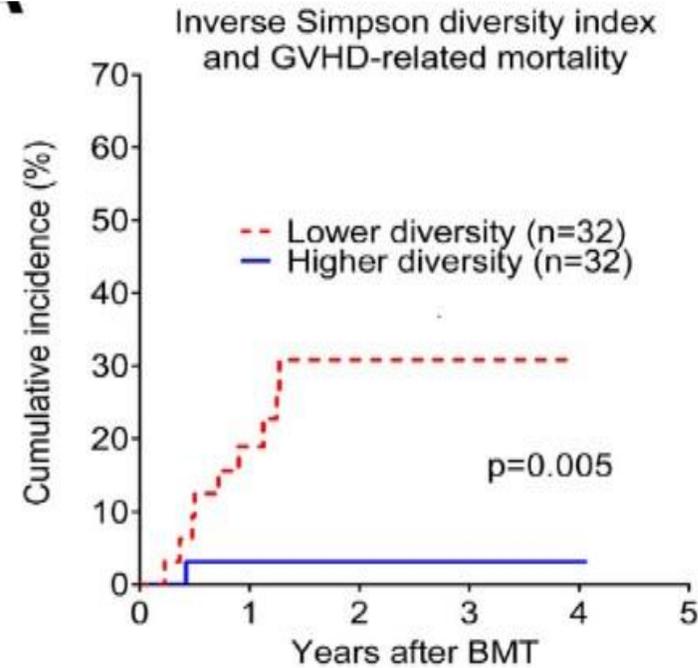
OVERALL SURVIVAL (OS) IN PEOPLE RECEIVING ALLO-HSCT



High diversity leads to 2x OS

Taur et al, Blood 2014; Taur et al, Best Pract Res Clin Haematol, 2014; Jenq et al, BBMT 2015; Holler et al, BBMT 2016; Simms-Waldrip et al, BBMT 2017; Weber et al, BBMT 2017; Malard et al, BBMT 2018

INCIDENCE OF GVHD IN PEOPLE RECEIVING ALLO-HSCT



-30% GvHD-related mortality

MaaT Pharma Microbiome Ecosystem Therapeutic
Inverse Simpson (mean): 24

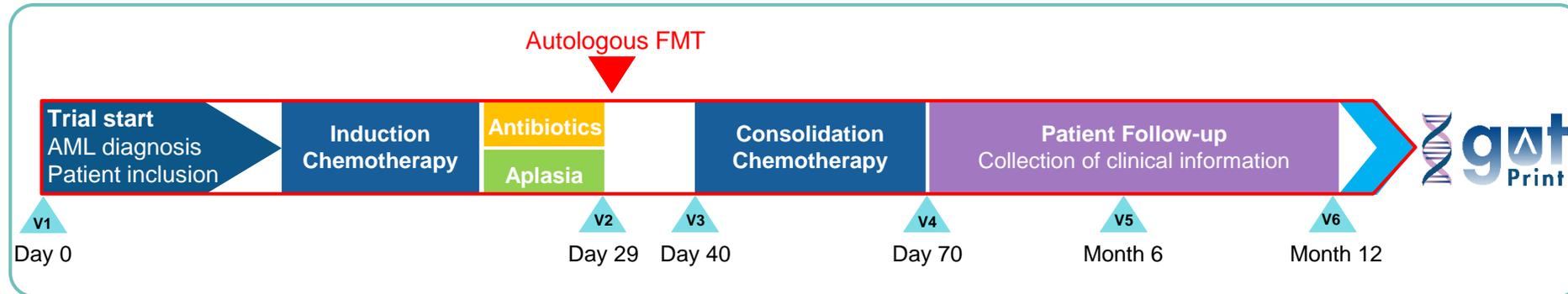


The ODYSSEE Study: a POC study to demonstrate microbiome recovery in AML patients



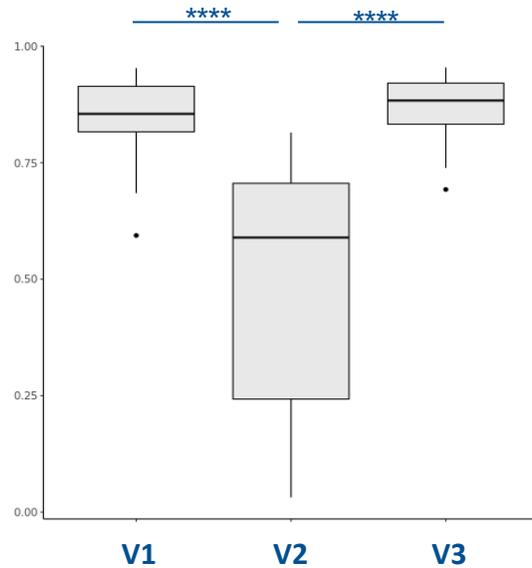
25 patients with **Acute Myeloid Leukemia** treated with MaaT011 (autologous FMT) with **12 months** follow up

7 sites in France



- **Primary objective: Impact of auto-FMT on recovery of microbiota diversity and correction of dysbiosis**
- Main secondary objectives:
 - ✓ Safety and feasibility of auto-FMT
 - ✓ Evaluation of auto-FMT on patient-related outcomes (clinical status, immune status and recovery)
 - ✓ Exploratory assessment of a dysbiosis biosignature

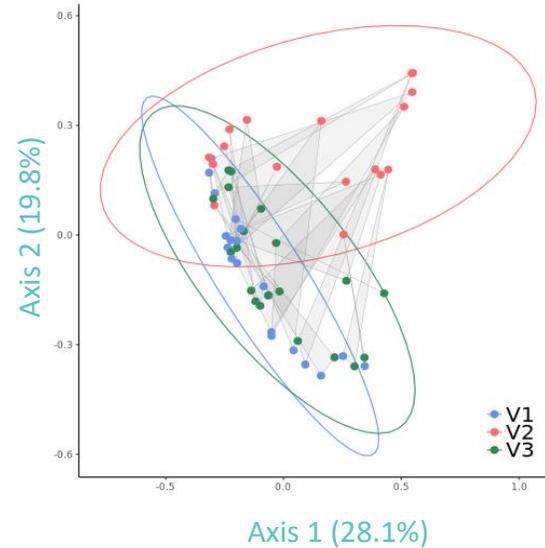
The ODYSSEE study: Demonstrated Microbiome Recovery in AML Patients



Simpson Index

Induction chemotherapy and antibiotics induce significant diversity decrease

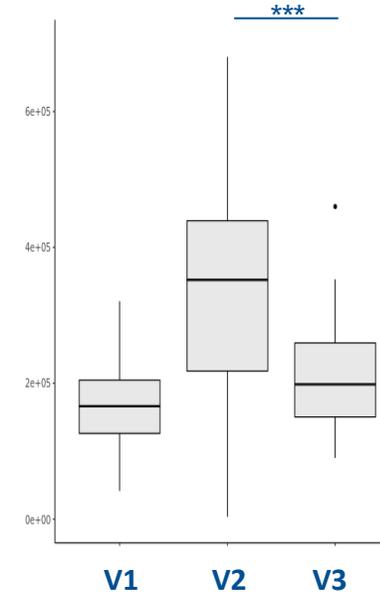
Auto-FMT restores >90% of baseline diversity



PCoA of Bray-Curtis Indexes

Dramatic microbiome structure shift after Induction Chemotherapy (V2)

Auto-FMT restores baseline taxonomic composition (V3 co-localized with V1)

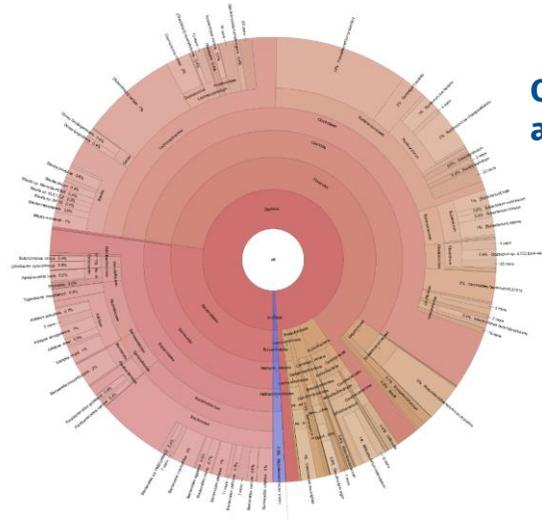


ABR copycount

43% reduction of antibiotic resistance gene copycount between V2 and V3

The ODYSSEE study: Demonstrated Microbiome Recovery in AML Patients

V1: AML diagnosis



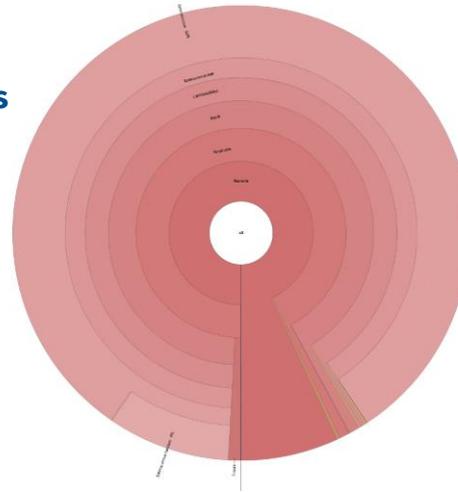
Simpson Index: 0.91



Chemo /
antibiotics



V2 (D29): impact of IC + ATB on microbiota, before FMT administration



Simpson Index: 0.05

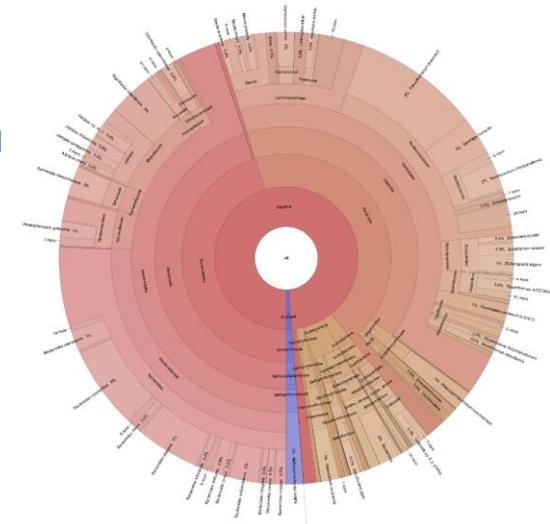


Enterococcus domination (90%)

MaaT011



V3 (D40): Evaluation of microbiota restoration, 10 days after dosing



Simpson Index: 0.95



Bray-Curtis similarity

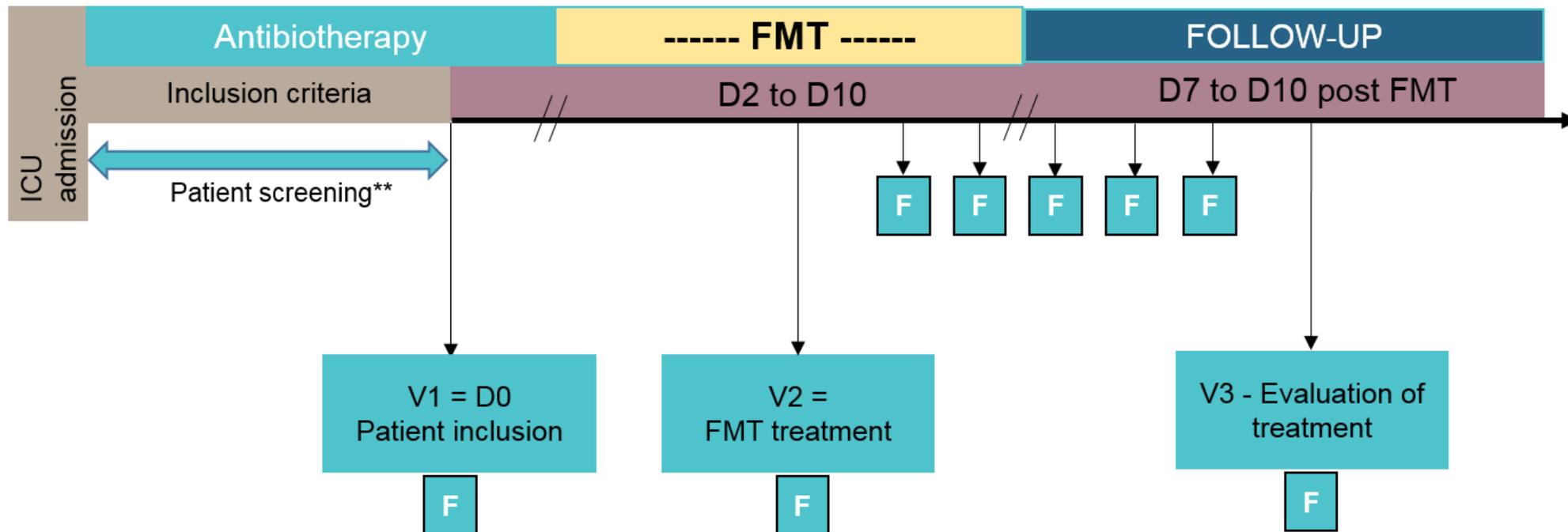
V1/V3:

Species level 70%

Genus level: 80%



The HAPY Study: “Evaluation of Heterologous fecal microbiota transfer in ICU Patients: A Feasibility and Safety Study”



F Fecal swab Collection: V1, V2, daily between 2 and 6 days after V2, V3

** Screening of the patient start after study information and signed consent form

The HAPY Study: a POC study to demonstrate safety, feasibility and microbiome recovery in ICU patients

Single-arm prospective exploratory study (Lille, Paris)

- Inclusion criteria
- ICU patient under mechanical ventilation
- **MDR bacteria digestive carriage (rectal swab)**
- Expected antibiotic duration < 10 days

Exclusion criteria

- Intestinal ischemia, toxic megacolon or gastrointestinal perforation
- Gastro-intestinal bleeding, abdominal surgery <3 months
- History of chronic digestive disease or gastro-intestinal resection
- Neutropenia, thrombopenia
- Immunosuppressive therapy

Intervention: frozen FMT (150 mL, 30g stool) by enema (Foley catheter)



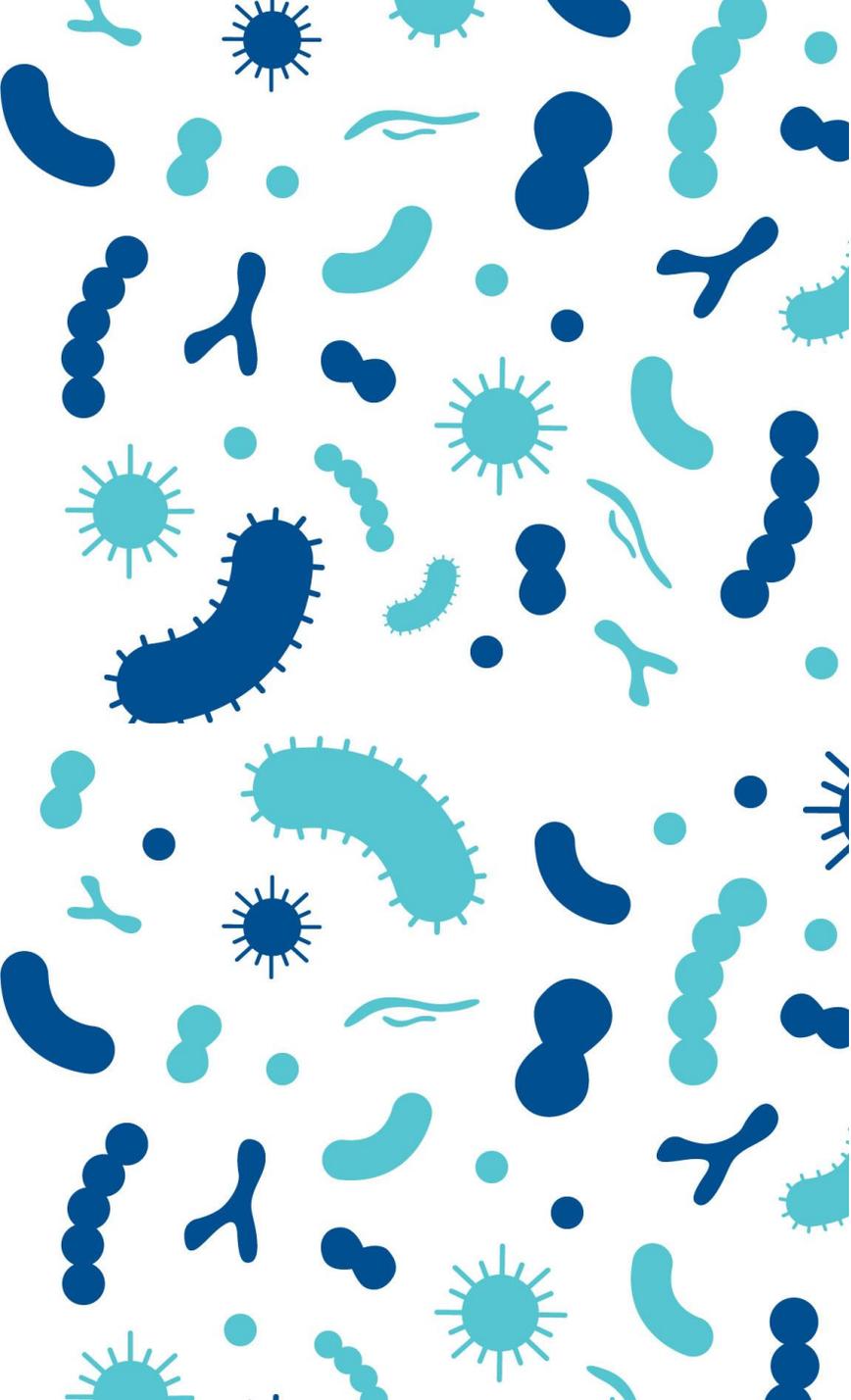
Conclusion: To be continued...

- Donors selection/vetting/safety
- Patients/donor match?
- Patients safety
- Resistome from sequencing data in complement to cultures
- Route of administration, dose regimen?
- Target? Which MDRB are resistant/sensitive to ecological exclusion?

How Contaminated Stool Stored in a Freezer Left a Fecal Transplant Patient Dead



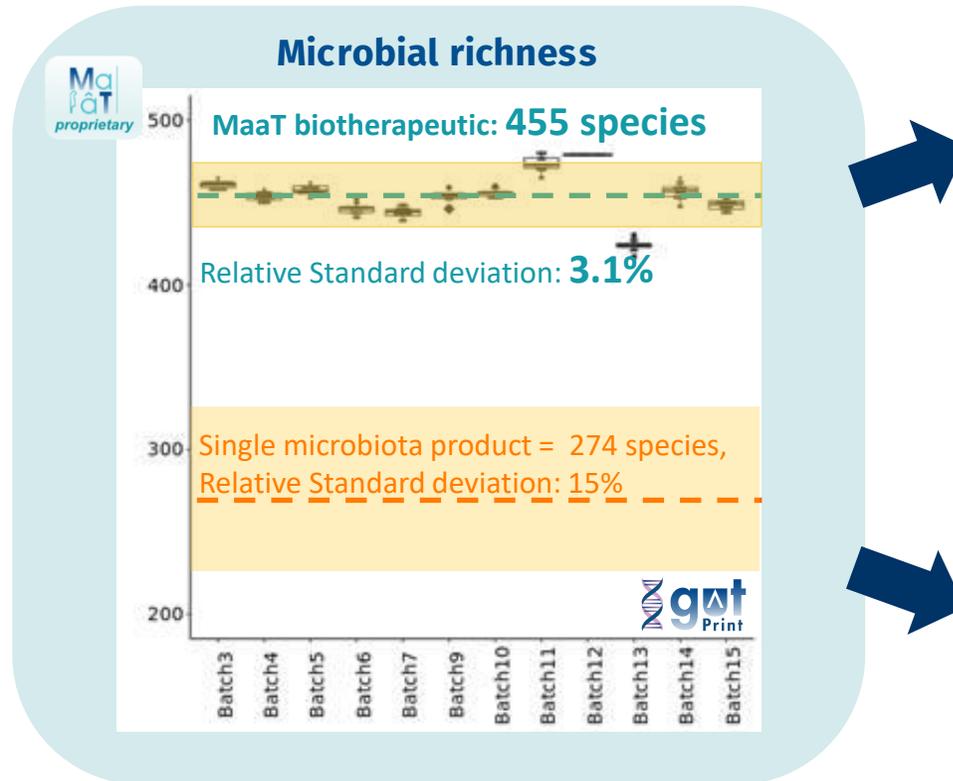
Fecal bacterial colonies at a lab in Cambridge, Mass. Fecal microbiota transplants have proven effective in treating the deadly infection *Clostridium difficile*, but have not been approved by the F.D.A. Kayana Szymczak for The New York Times



THANK
YOU

Reproducible high microbial diversity biotherapeutics

A single active substance
characterized by high diversity and richness



in two formulations

MaaT013



- Enema for direct colonic delivery
- 80% restoration
- 1 bag > 10^{11} CFU
- 18 months stability

MaaT033



- Capsule for ileocolic delivery
- 1 capsule > 10^{10} CFU
- Ease of administration

Well-characterized, potent, highly stable biotherapeutics manufactured via **reproducible batch methods under cGMP conditions from pooled donors**