PIRFENIDONE (ESBRIET)

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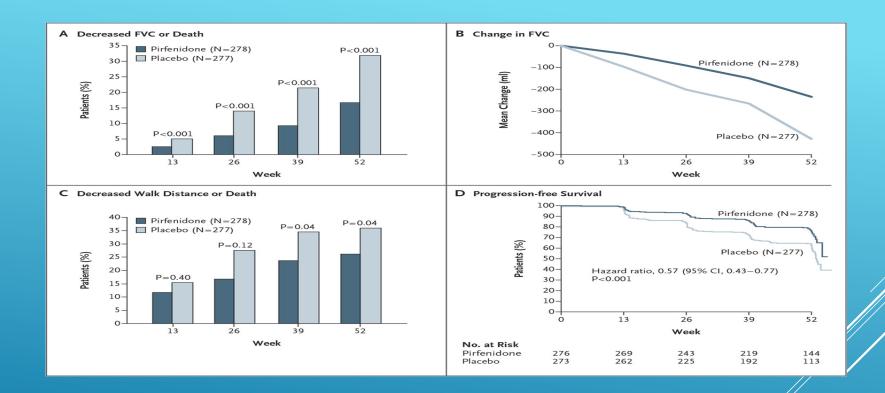
Beth Israel Deaconess Medical Center

- First recognized as an anti-fibrotic agent in 1994 by SB Margolin
- ► Initial data supporting a role for pirfenidone in IPF
 - Raghu et al, 1999 54 patients with severe IPF
 - Study design suboptimal
 - Many dropouts
 - Possible signal suggesting stabilization/equivalence with more toxic therapies
- Development rights purchased by Intermune in 2007
 - ► First American Phase III Trials completed in 2009
 - "Tie Breaker "Trial reported in May 2014
- ▶ Approval for clinical use by FDA 1 year ago

HISTORY



15 YEARS FROM CONCEPT TO APPROVAL



DOES IT WORK?

- After 52 weeks, only half as many patients receiving pirfenidone had a significant decline in FVC (≥10% predicted) as did placebo patients (46 vs. 88 respectively). More than twice as many subjects taking pirfenidone lost no lung function (63 vs. 27), and slightly fewer patients taking pirfenidone had a decline in 6 minute walk distance by ≥50 meters.
- Pirfenidone did not reduce mortality compared to placebo in the ASCEND trial. However, when ASCEND's results were pooled with those from CAPACITY and the Japan trial, patients taking pirfenidone had half the risk of death from all causes, and one-third the risk of death from idiopathic pulmonary fibrosis (0.52 and 0.32 hazard ratios respectively, compared to placebo). The pooled numbers (n=1,247) showed:
- > 22 deaths of any cause on pirfenidone, vs. 42 on placebo
- > 7 deaths attributable to IPF (pirfenidone) vs. 22 (placebo

DOES IT WORK?

- ► All patients had IPF
- Mild to Moderate Disease
- No data for severe patients
- > Ascend Criteria
 - ► FEV1/FVC ratio > 80%
 - ► FVC > 50%

WHO SHOULD TAKE IT?

- How do I know if it is working for me?
 - We rely on study data
- ► How long will I have to take it?
 - ▶ RECAP lasted 7 years!

DOES IT WORK?



SIDE EFFECTS

- Photosensitivity
 - ▶ Use SPF 50 > whenever you go outside
 - Wide brim hat
 - Can possibly occur on exposure to strong artificial light

SIDE EFFECTS

- ▶ GI toxicity
 - Nausea, vomiting, diarrhea
 - Must take with food
 - Divide pills at meals
 - Improves over time
 - Liver function abnormalities
- Dose adjustment and re-titration

SIDE EFFECTS

- ► Why do I have to take 9 pills a day?
- Can I take a lower dose?
- Can I take this drug if I have a disease related to IPF
 - ► Rheumatoid Arthritis?
- Can I take it with other drugs for IPF

QUESTIONS I'VE BEEN ASKED



THANKS

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THANKS