



Rhythmia: Syncing Hearts, Saving Lives

Presentation Scientific Project Design in Drug Discovery 2023



CardioSync Pharmaceuticals

Virtual screening



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In-Vitro studies



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Preclinical Assays



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Clinical Trials



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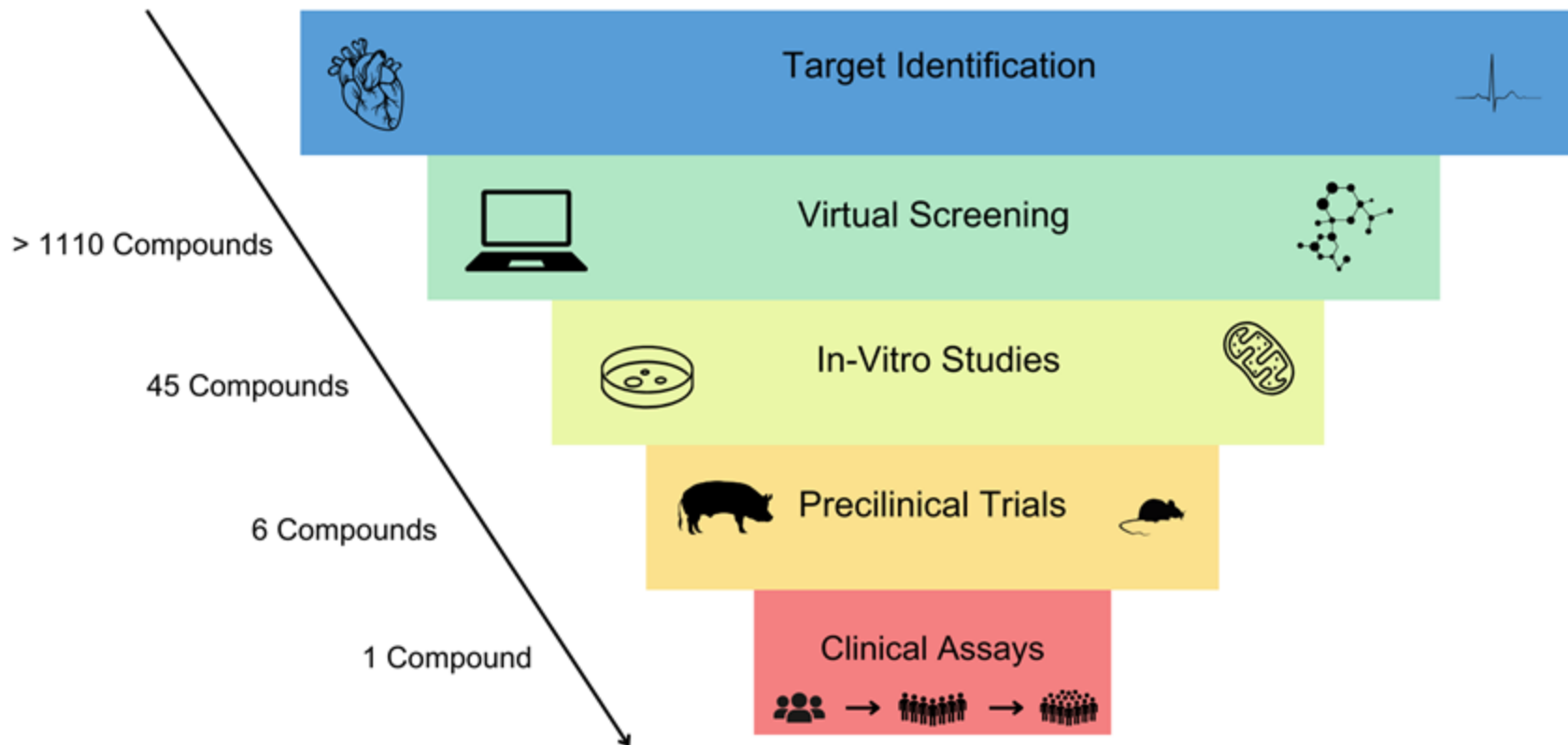
Danja Zengaffinen



Alexandra Preda



Rhythmiar's development





Atrial Fibrillation



Increased costs, hemodynamic instability
stroke risk, morbidity, mortality

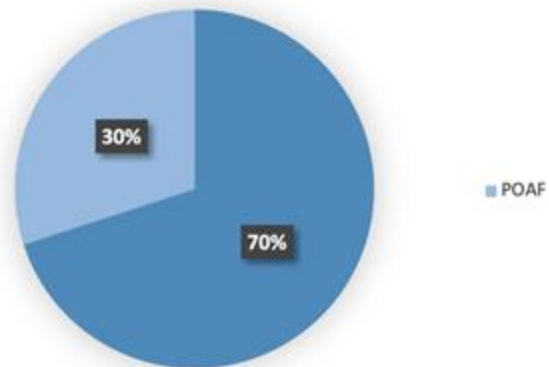


Cardiac ischemia, inflammation and
comorbidities linked to POAF

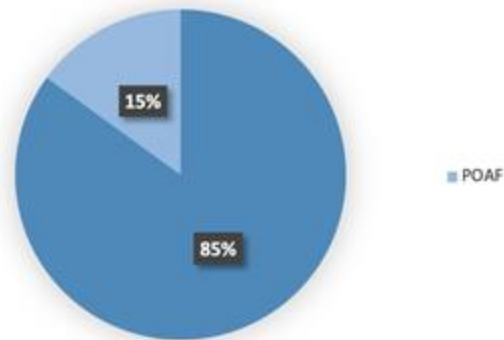


Current treatments: prophylaxis and rate
control, i.e. β -blockers

Cardiac procedures

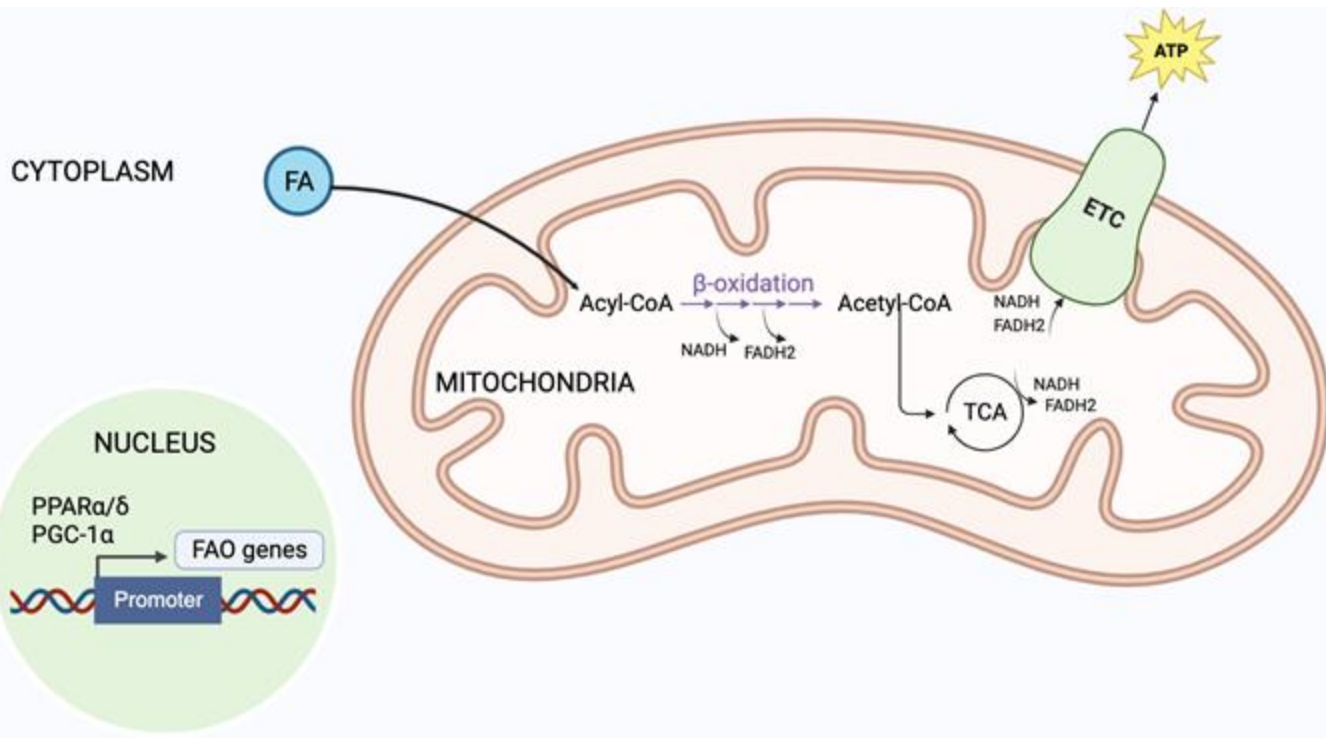


Non-cardiac procedures





Mitochondria and Fatty acid oxidation



- Primary source of energy for the myocardium
- ATP production
- Anti-inflammatory effects

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**Target
identification**

Virtual
screening

In-vitro

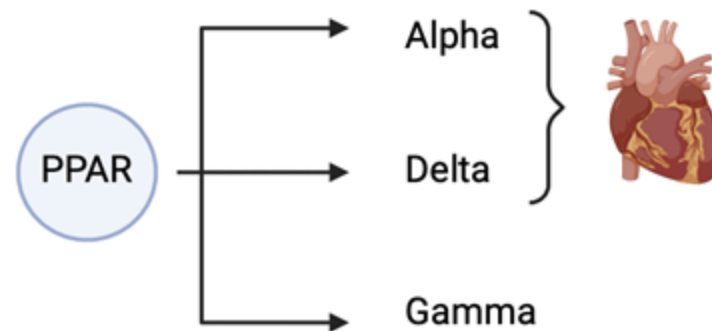
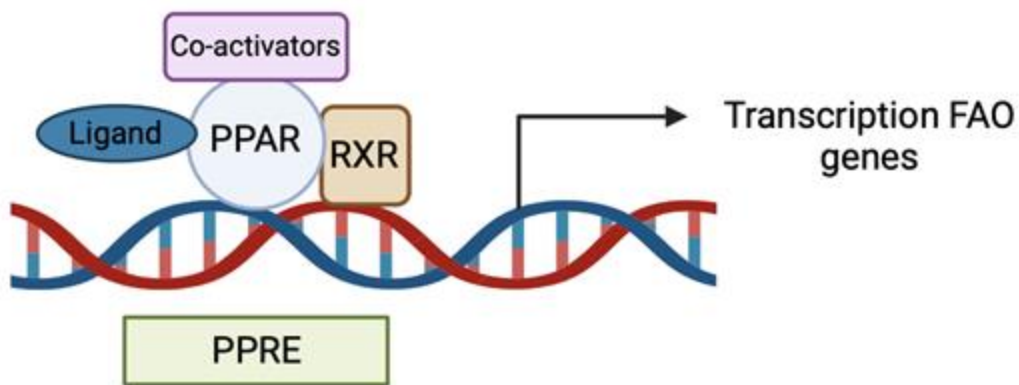
Preclinical
Assays

Clinical
Assays

Business plan



PPARs as Potential Targets



PPAR: Peroxisome proliferator-activated receptor.

PPRE: Peroxisome Proliferator Response Element.

RXR: retinoid X receptor is a type of nuclear receptor that is activated by 9-cis retinoic acid.

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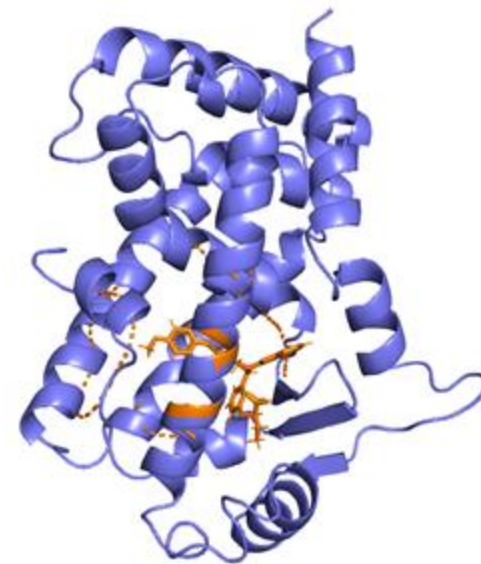


Rythmiar as a Drug Choice

- PPAR α and PPAR δ dual agonist
- Activates PPAR to promote FAO in cardiomyocytes

Delivery Method:

- Intravenous administration
 - Precise dosing and rapid onset
- Continuous infusion pre- and post-surgery
 - Optimal drug levels



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Target product profile

Parameter	Essential Profile	Extended Profile
Indications	Post-operative, acute phase AF	Expansion to AKI and CAF
Patient Population	40+ years old, undergoing bypass surgery	Expansion to other cardiac surgeries, AKI and CAF
Therapeutic modality	Nuclear Receptor Ligand	
Efficacy	$\geq 70\%$ decrease in AF occurrence	TBD
Safety	$\leq 20\%$ incidence of side effects	
Dosing and Administration	Continuous infusion Start of treatment: 1 day pre-operatively Duration of treatment: 6 days post-surgery	Oral, one-daily administration
Mechanism of Action	Activation of PPAR α / δ resulting in increased mitochondrial FA metabolism	

AKI : acute kidney injury
be defined

CAF : chronic atrial fibrillation

TBD : to

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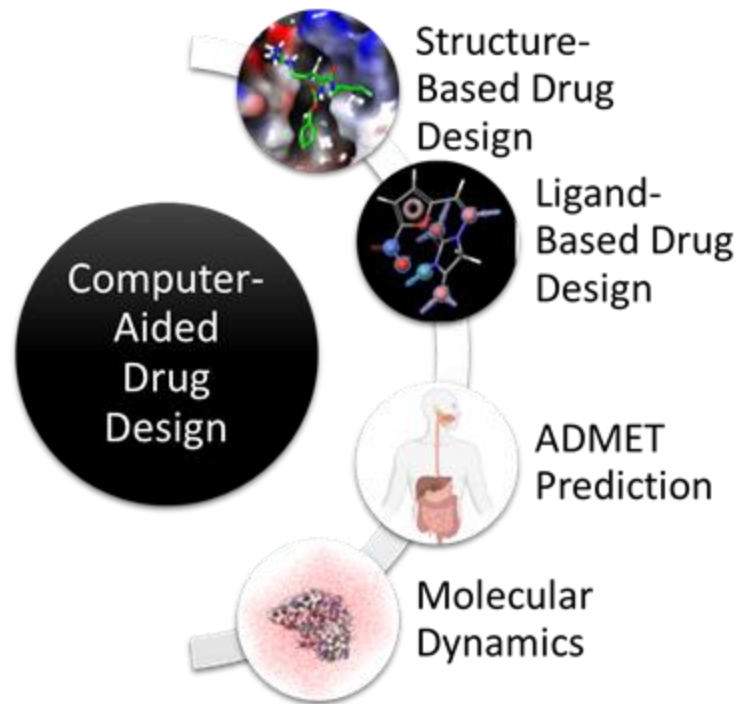
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Streamlining Drug Discovery with In Silico Screening – Reducing Compounds, Saving Resources



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Chang, Y. et al. A guide to in silico drug design. *Pharmaceutics*, 2022, 15(1), 49.

Target identification

**Virtual
screening**

In-vitro

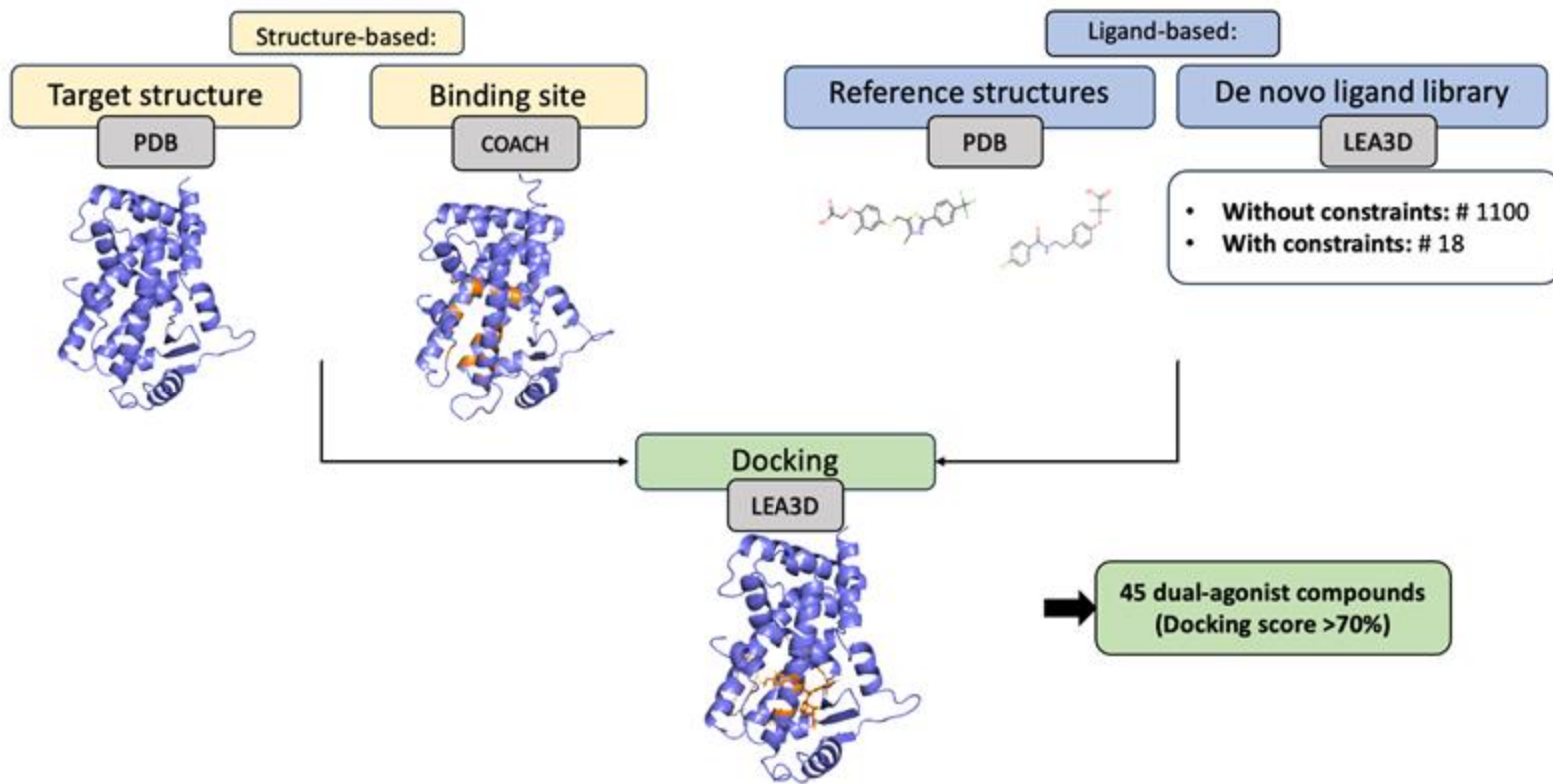
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In silico



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Target identification

**Virtual
screening**

In-vitro

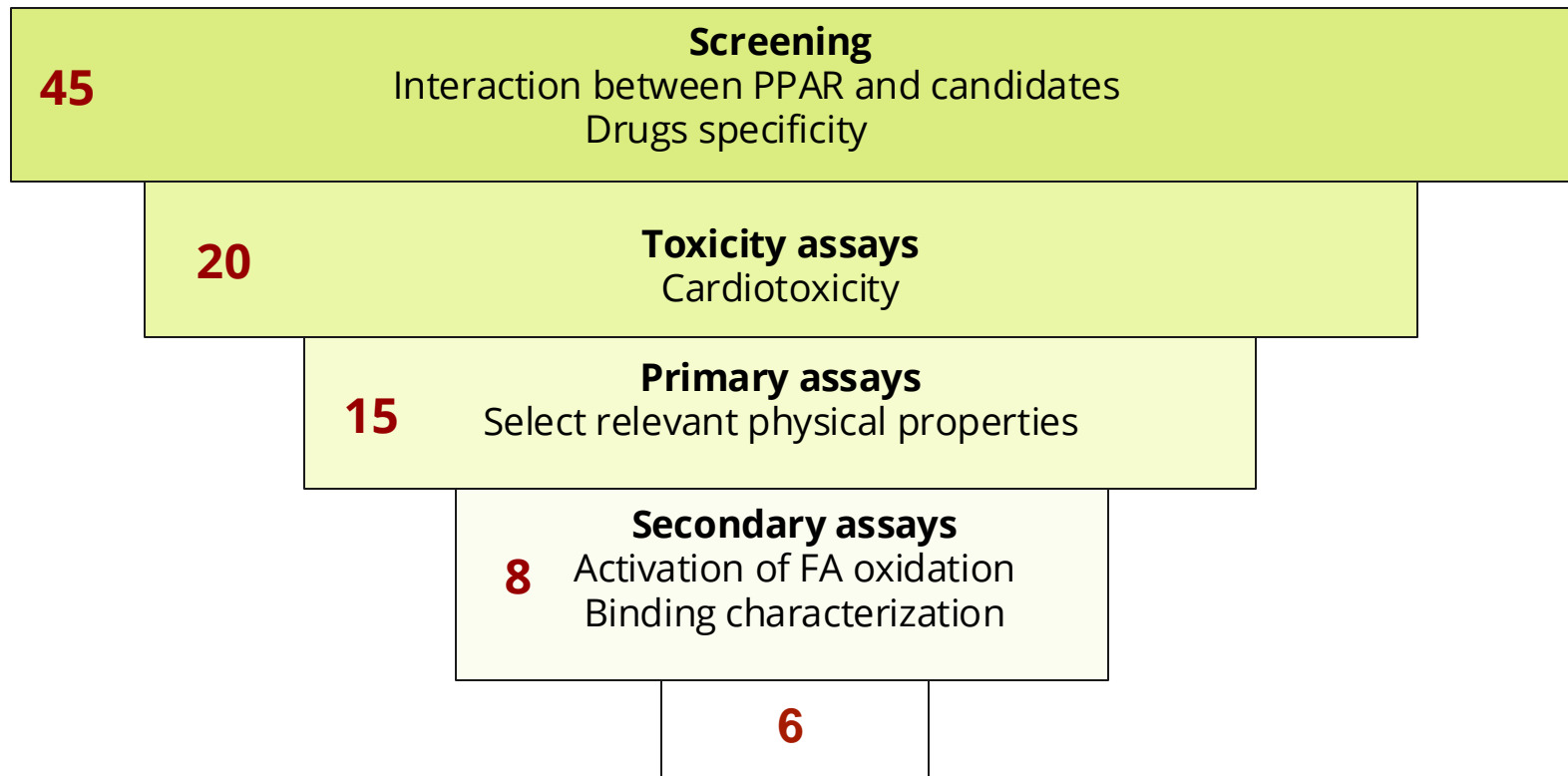
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In Vitro assays

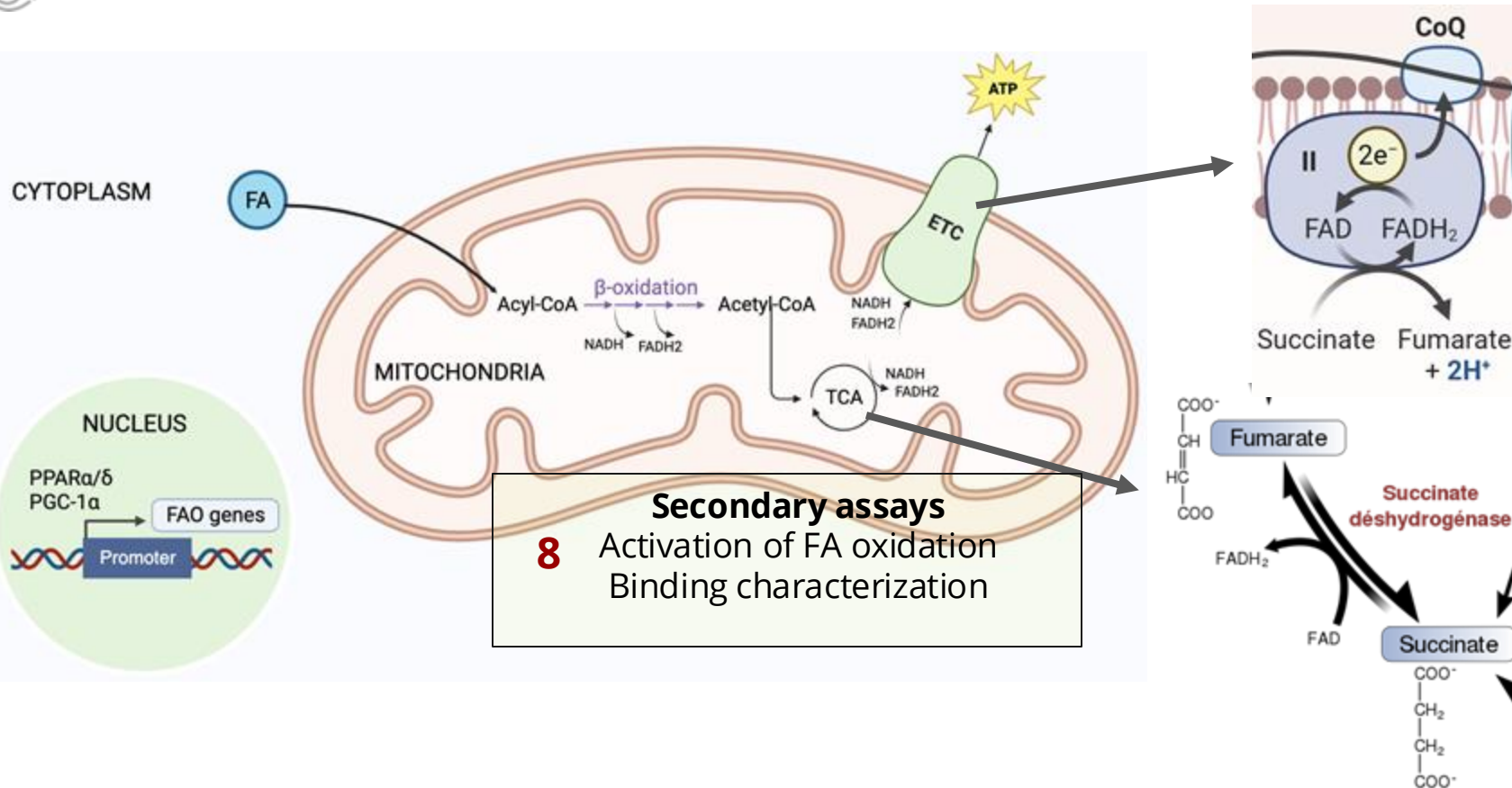


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Verification of the activation of the fatty acid oxidation pathway



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Target identification

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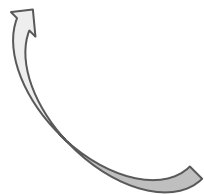


Verification of the activation of the fatty acid oxidation pathway

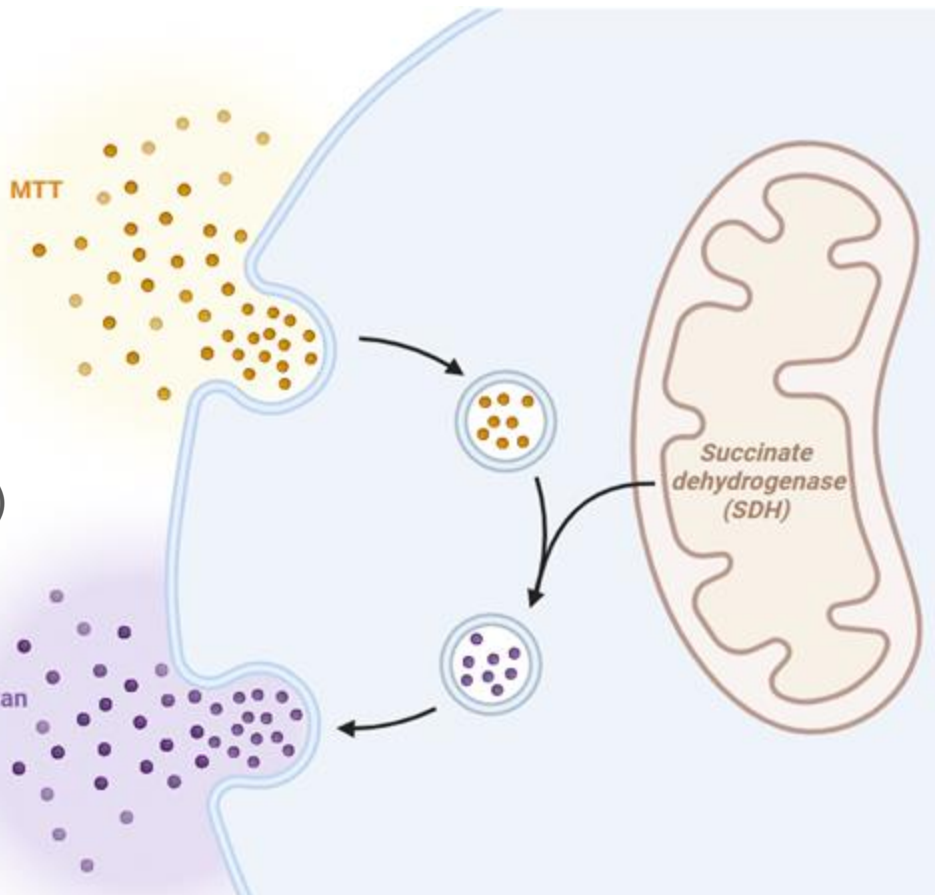


MTT Assay

Absorbance reading (570nm)



MTT formazan crystal



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Target identification

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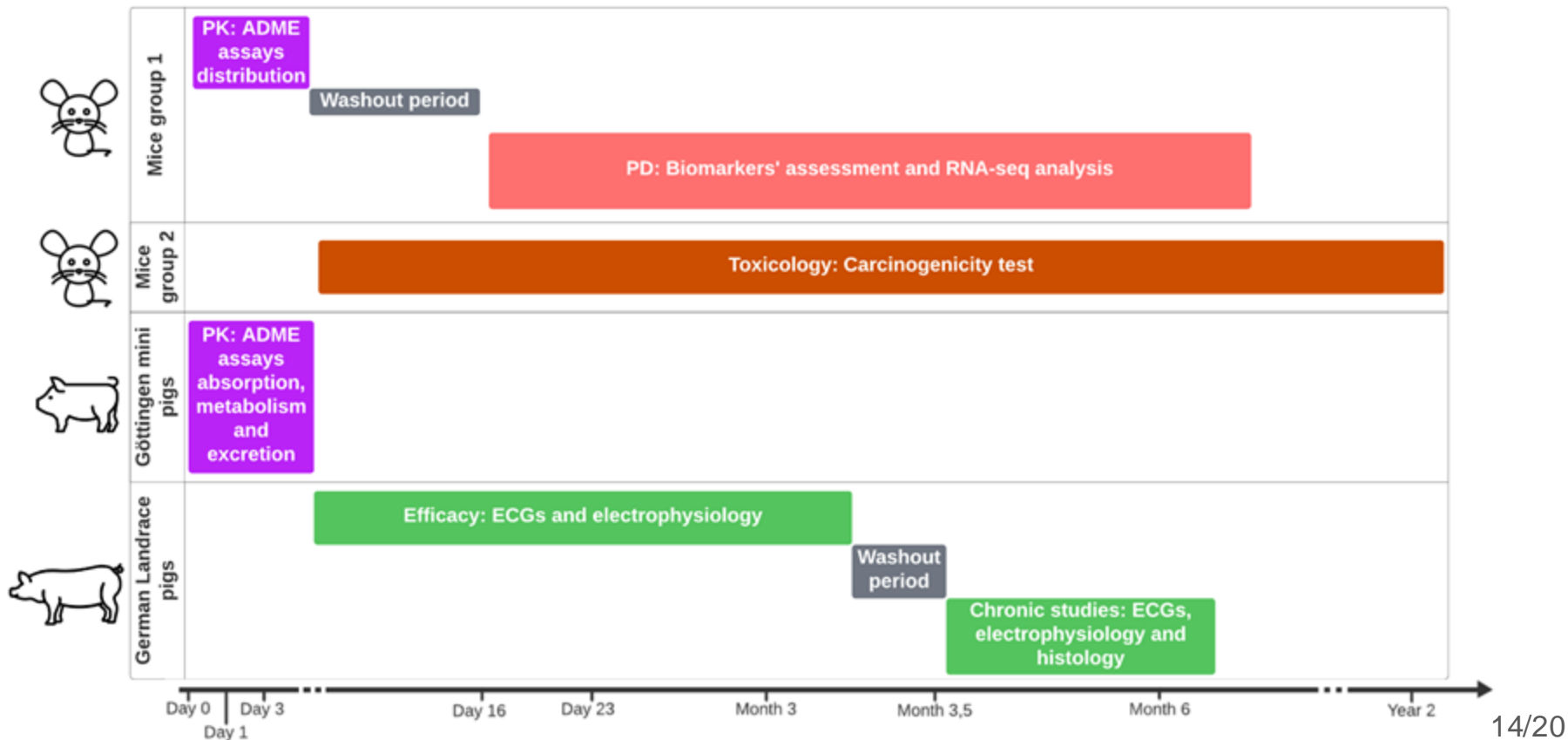
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In Vivo Validation: Investing in CardioSync Pharma's bright future



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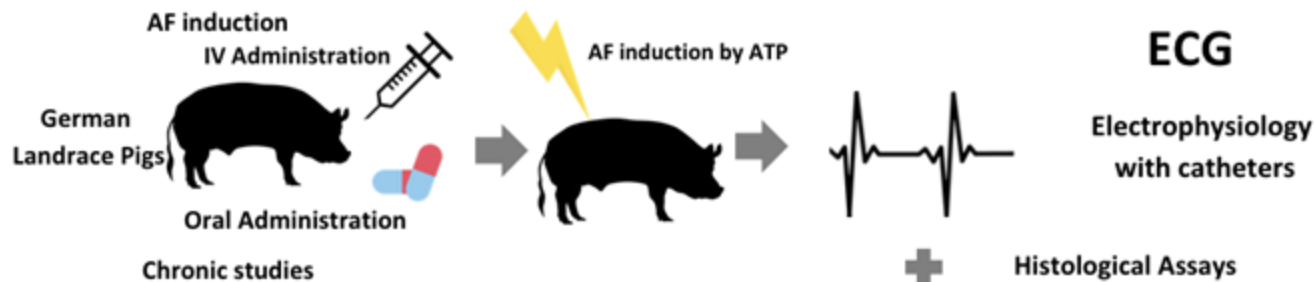
In vivo testing

Pharmacokinetics in-vivo

Pharmacodynamics in-vivo



Efficacy testing in-vivo



Toxicity in-vivo

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Target identification

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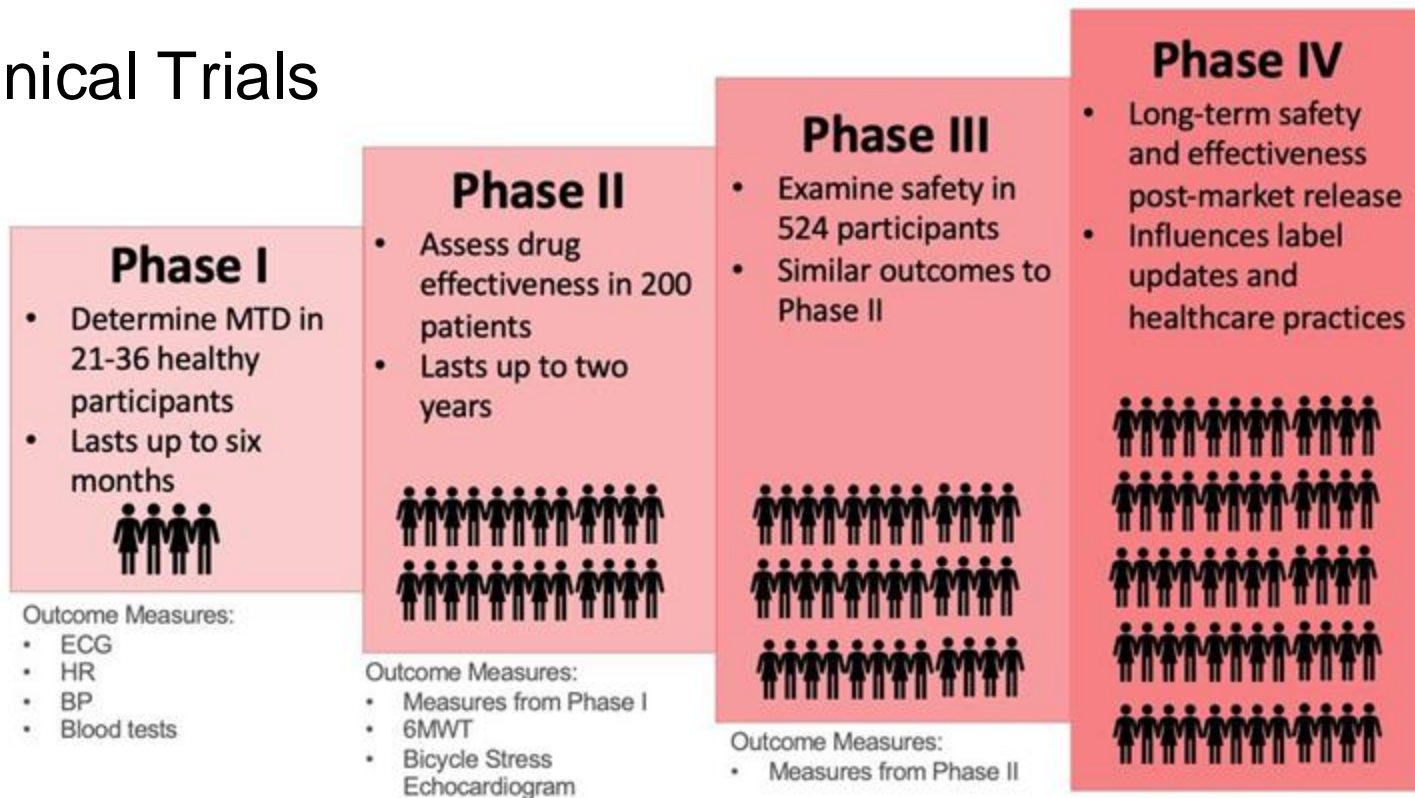
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Clinical Trials



MTD = Maximum Tolerated Dose, 6MWT = 6 Minute Walking Test

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Target identification

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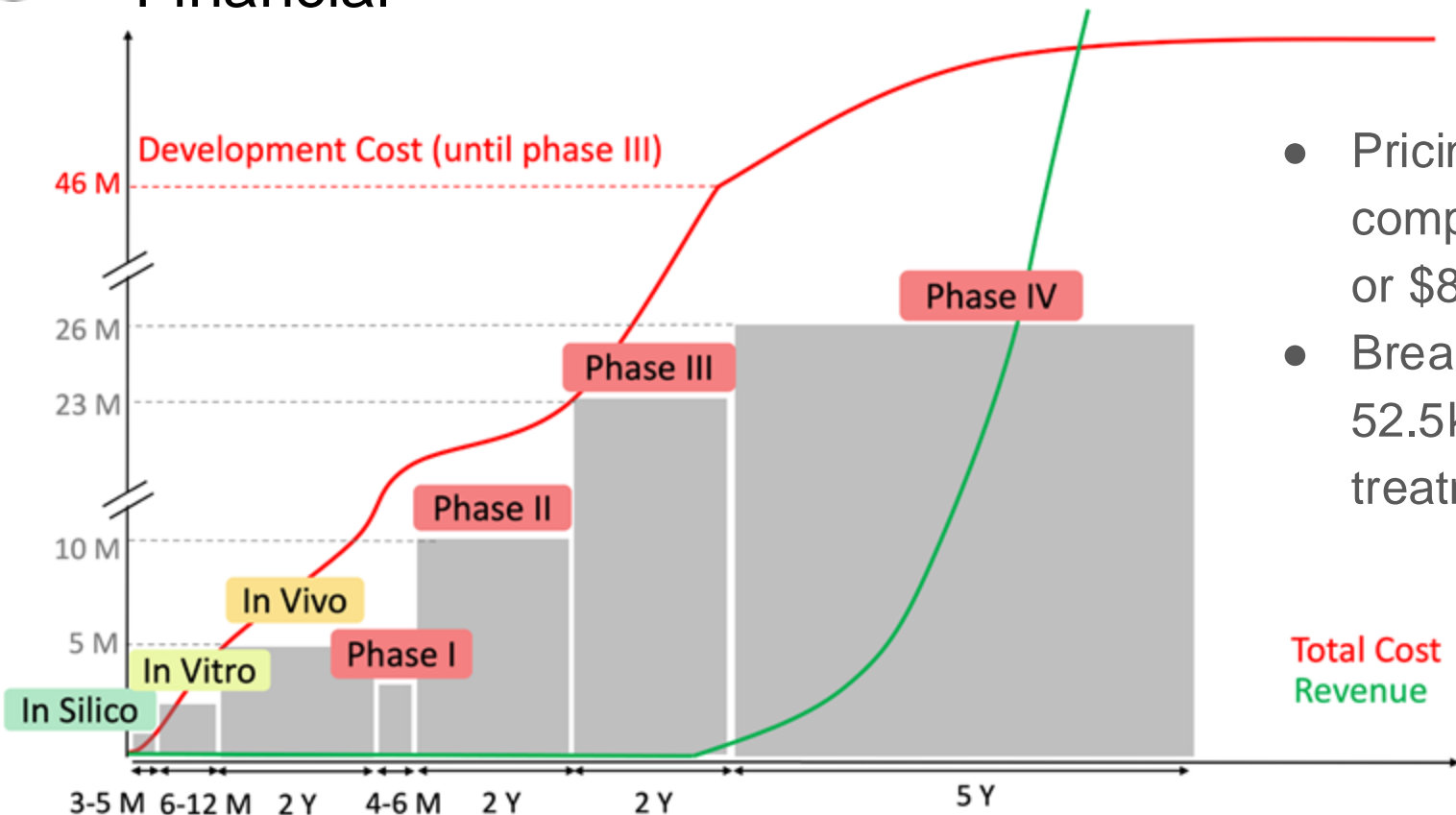
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Financial

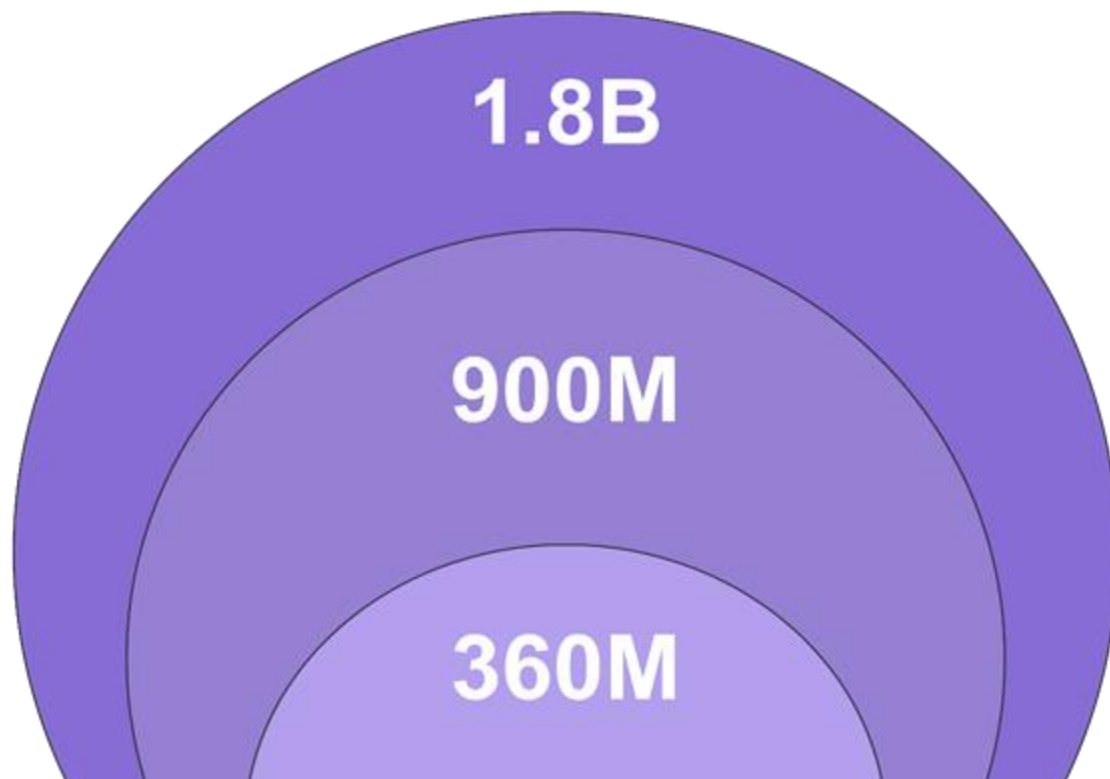


- Pricing: \$7k for the complete treatment, or \$875 per dose
- Break-even point: 52.5k doses or 6.5k treatment courses





Size of the Market



TAM = Total Available Market

SAM = Serviceable Adressable Market
Market Penetration = 0.5

SOM = Serviceable Obtainable Market

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Why Rhythmia?

Highly effective & safe drug .

Reduction of hospital stay and treatment costs



High Profit Potential

Low production cost, high profit margin



Big Market

400k annual cardiac surgeries in USA.
No effective alternatives



Potential of Expansion

The applications of the drug can be expanded to a even bigger market

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Target identification

Virtual screening

In-vitro

Preclinical Assays

Clinical Assays

Business plan



Join the Rhythmiar Revolution



More than just a drug



High impact on patients



Step forward in cardiac healthcare



Commitment to a better future

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Target identification

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Thank you





Supplementary Slides

1

Target Identification

Disease

- Post-operative atrial fibrillation's acute phase
- 8-day once-daily in-hospital IV administration
- Possible subsequent expansion to chronic treatment through oral delivery and other diseases (post-operative acute kidney injury)

Drug Target

PPAR- α and PPAR- δ

Intellectual Property

Screening for novel compounds → no existing patent

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Lead Identification & Optimization

Virtual Screening (1100)

- Identify PPAR- α and PPAR- δ structures via PDB database
- Determine a library of agonist molecules using LEA3D
- Evaluate ligand-receptor docking with LEA3D (PLANTS tool)
- Optimization of the screening by conducting ADMET *in silico* testing (Drug Sniffer pipeline)
- Library narrowed down from **1118** to **45** compounds (Docking score > 70%)

In-Vitro (45)

Screening: 45 compounds

- Specificity screen (SPA)

Toxicity: 20 compounds

- Cytotoxicity (LDH-release assay, micronucleus test)
- Genotoxicity test (Ames test)
- Drug interference (cell-based)
- Cardiotoxicity

Primary Assays: 15 compounds

- Solubility (shake-flask)
- Interaction (HPAC)
- Lipophilicity (shake-flask)
- Permeability (PAMPA)

Secondary Assays: 8 compounds

- Verification of the activation of the FA oxidation pathway (MTT assay)
- Specific characterization of the binding between our drugs and PPAR (ITC)

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Predclinical Assays

Pharmacokinetics (6)

ADME studies on Göttingen pigs and on mice

Pharmacodynamics (5)

- Investigation of each compound's effects on mice
- RNA-seq analysis

Efficacy (4)

AF induced by sustained ATP, test for:

- ECG
- Electrophysiology

Chronic in vivo studies: Sustain AF for 7 days on pigs, and check for ECG and histological assay

Toxicology (3)

- Tumorigenesis in mice
- Drug interference test

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Clinical Assays (1)

Phase 1

Assessment of:

- safety
- pharmacokinetics
- maximum tolerated dose on 21-36 healthy individuals.

Phase 2

Determine efficacy, optimal dose and safety on 200 patients.
Primary outcome: reduced incidence of AF by 70%

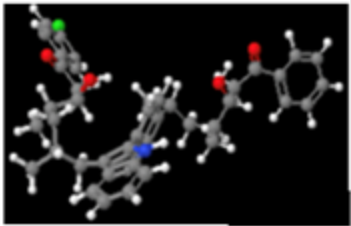
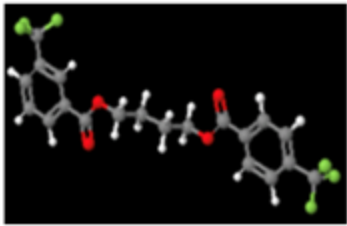
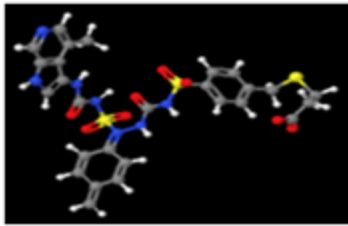
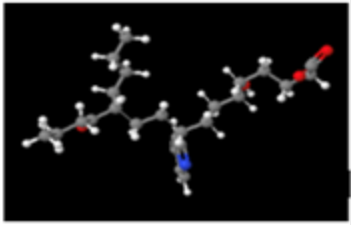
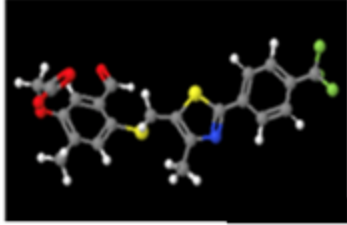
Phase 3

Proof of efficacy and safety in a population of 524 people and longer time period.

Phase 4

Post market release surveillance for rare or long-term adverse effects.



Synthetic Compounds	Fibrates		GW501516		Elafibranor	
	Score	Ball-and-Stick Model	Score	Ball-and-Stick Model	Score	Ball-and-Stick Model
Without Constraints	98.80%		75.62%		82.30%	
With Constraints	76.85%		71.60%		70.32%	