



# Higher proportion of responders with Hepatitis B (HepB) Antibody (Ab) levels $\geq 100$ mIU/mL with the tri-antigenic HepB vaccine, Sci-B-Vac<sup>®</sup>, compared to Engerix-B<sup>®</sup>

## Results from the Phase 3 double-blind, randomized study comparing immunogenicity and safety (PROTECT)



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### Introduction

- Although currently licensed HepB vaccines are effective in preventing Hepatitis B virus (HBV) infection in children and healthy young adults, there is reduced vaccine efficacy in older persons, smokers, and those with immunocompromising co-morbidities, including diabetes and obesity<sup>1</sup>
- While HBsAb levels  $\geq 10$  mIU/mL are considered a correlate of vaccine-induced protection (seroprotection), research has found that breakthrough infections have occurred in vaccinees whose anti-HBs titres are low,  $< 100$  mIU/mL<sup>2</sup>
- Sci-B-Vac<sup>®</sup> is a tri-antigenic HepB vaccine that contains all three HBV surface antigens (HBsAg) – S, pre-S1, and pre-S2 – is adjuvanted with alum, and is manufactured in mammalian CHO cells
- The pre-S1 antigen induces key neutralizing antibodies that block virus-receptor binding. T cell response to pre-S1 and pre-S2 antigens could further boost responses to the S antigens, resulting in a more immunogenic response<sup>3,4</sup>
- Two Sci-B-Vac<sup>®</sup> phase 3 studies were recently completed in Europe, the U.S., and Canada, including the PROTECT study presented here [NCT03393754]

### Study Design & Objectives

**Study Overview:**  
PROTECT was designed to assess immunogenicity and safety of Sci-B-Vac<sup>®</sup> vs. Engerix-B<sup>®</sup>

- 1,607 adults, age 18+, healthy or with controlled chronic condition, negative serology (HBV, HCV, HIV), and no severe renal impairment, were randomized 1:1 to receive:
  - Sci-B-Vac<sup>®</sup>: 10 µg, 1mL injection at 0, 4, 24 wks; or
  - Engerix-B<sup>®</sup>: 20µg, 1mL injection at 0, 4, 24 wks
- Safety follow up of 12 months from the 1<sup>st</sup> vaccination

### Study Objectives:

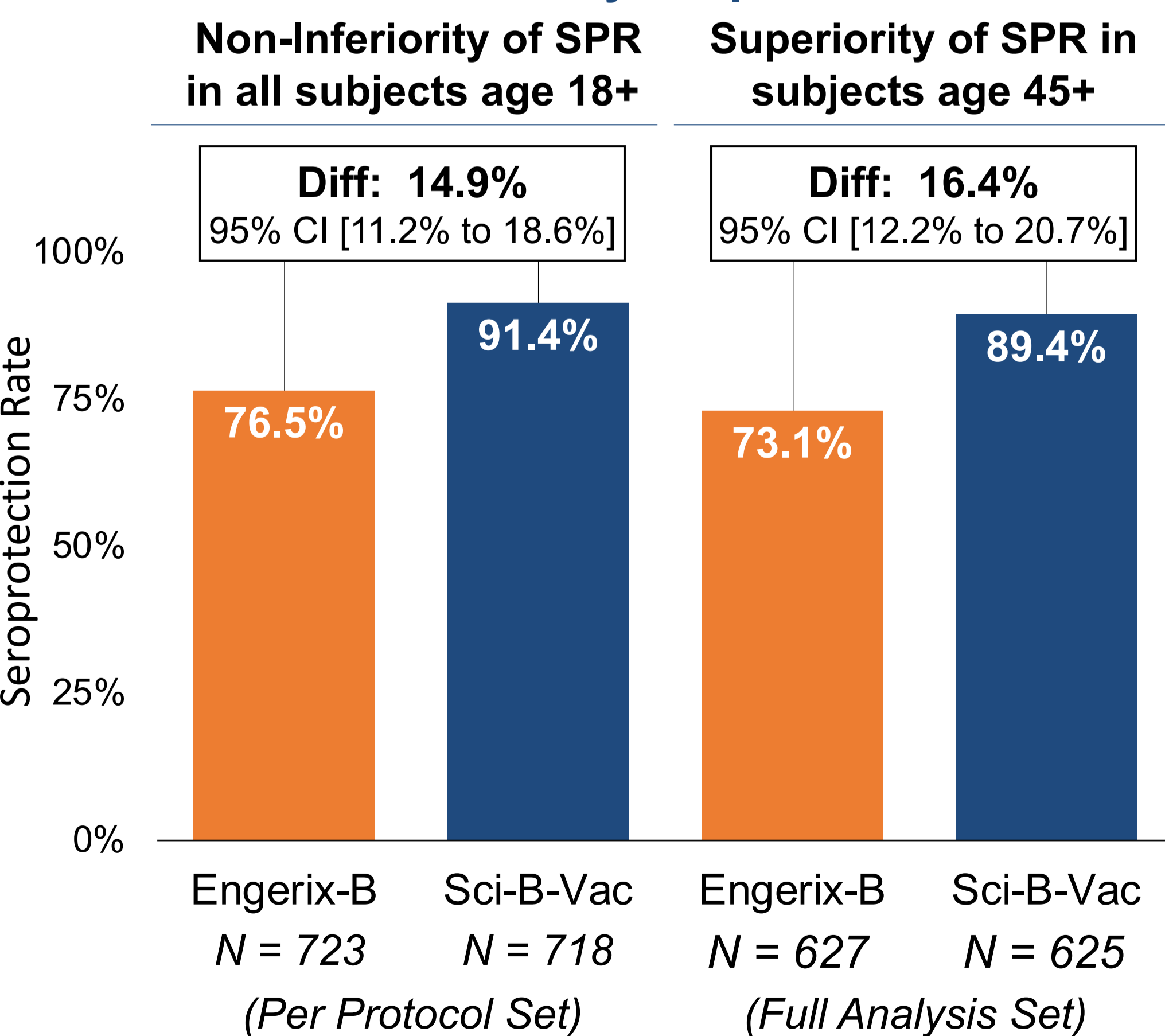
- Co-Primary:**
  - Non-inferiority of seroprotection rate (SPR) of Sci-B-Vac<sup>®</sup> vs. Engerix-B<sup>®</sup> in all participants age 18+, 4 weeks after the 3<sup>rd</sup> vaccination (at day 196)
  - Superiority of SPR of Sci-B-Vac<sup>®</sup> vs. Engerix-B<sup>®</sup> in participants age 45+, 4 weeks after the 3<sup>rd</sup> vaccination (at day 196)
- Secondary and Exploratory** (not a complete list):
  - Comparison of Geometric Mean Concentration (GMC) of HBsAb at day 196
  - Comparison of HBsAb titers  $\geq 100$  mIU/mL
  - Reactogenicity, adverse events (AEs), serious AEs (SAEs), medically-significant AEs and new onset of chronic illness (NOCI)

### PROTECT Study Subject Disposition

Subjects Screened	2,472	
- Screened Failure	865 (35%)	
<b>Subjects Randomized</b>	1,607 at 28 study sites	
<b>Clinical Study Arms</b>	<b>Engerix-B<sup>®</sup></b>	<b>Sci-B-Vac<sup>®</sup></b>
<b>Subjects Randomized (Full Analysis Set)</b>	811	796
<b>Mean Age</b>	56.6	56.6
<b>Age Segmentation (%)</b>		
- 18-44 years	154 (19%)	145 (18%)
- 45-64 years	361 (45%)	355 (45%)
- 65+ years	296 (37%)	296 (37%)
<b>Gender</b>		
- Male	303 (37%)	315 (40%)
- Female	508 (63%)	481 (60%)
<b>Mean BMI</b>	29.1	29.4
<b>Diabetic Status</b>		
- Diabetic	65 (8%)	60 (8%)
- Non-diabetic	746 (92%)	736 (93%)
<b>Smoking Status</b>		
- Current Smoker	113 (14%)	104 (13%)
- Former Smoker	224 (28%)	203 (26%)
- Non-smoker	474 (58%)	489 (61%)
<b>Country/Region</b>		
- Europe	336 (41%)	332 (42%)
- United States	342 (42%)	338 (43%)
- Canada	133 (16%)	126 (16%)
<b>Withdrew</b>	42 (5.2%)	40 (5.0%)
<b>Completed Study (All Enrolled Set)</b>	769	756

### Results : Co-Primary Endpoints

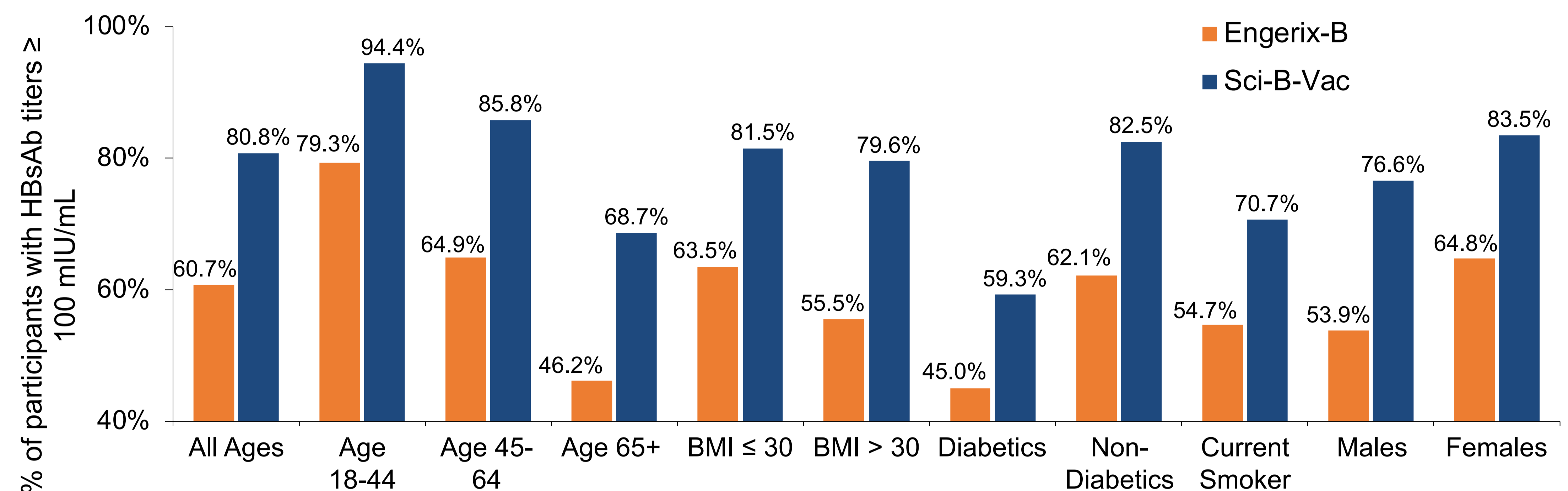
**FIGURE 1: Both Co-Primary Endpoints were met**



\*Non-inferiority: If the lower bound of the 95% confidence interval (CI) of the difference between the SPR in the Sci-B-Vac arm minus the SPR in the Engerix-B arm is  $> -5\%$   
 \*Statistical superiority: The lower bound of the same 95% CI is greater than 0%  
 \*Clinical superiority: The lower bound of the same 95% CI is  $> 5\%$

### Results : GMC and % of Subjects with HBsAb titers $\geq 100$ mIU/mL

**FIGURE 2 : Higher proportion of subjects vaccinated with Sci-B-Vac<sup>®</sup>, regardless of demographics, achieved HBsAb titers  $\geq 100$  mIU/mL compared to those vaccinated with Engerix-B<sup>®</sup>, 4 weeks after the 3<sup>rd</sup> vaccination (day 196)**



**TABLE 1: Higher GMC of HBsAb titers were observed in patients vaccinated with Sci-B-Vac<sup>®</sup> compared to those vaccinated with Engerix-B<sup>®</sup>, regardless of demographics, 4 weeks after the 3<sup>rd</sup> vaccination (day 196)**

GMC mIU/mL	All Ages	Age 18-44	Age 45-64	Age 65+	BMI $\leq 30$	BMI $> 30$	Diabetics	Non-Diabetics	Current Smokers	Males	Females
<b>Engerix-B<sup>®</sup></b>	192.6	720.6	276.5	63.7	260.9	109.9	41.3	221.5	161.9	106.6	273.5
<b>Sci-B-Vac<sup>®</sup></b>	1148.3	4570.6	1577.4	410.2	1343.0	884.1	222.4	1312.3	449.5	761.1	1498.3
<b>GMC Ratio</b>	<b>6.0X</b>	<b>6.3X</b>	<b>5.7X</b>	<b>6.4X</b>	<b>5.1X</b>	<b>8.0X</b>	<b>5.4X</b>	<b>5.9X</b>	<b>2.8X</b>	<b>7.1X</b>	<b>5.5X</b>

### Results : Safety & Tolerability

**TABLE 2 : The most common AEs were local reactogenicity symptoms, mostly of mild-to-moderate severity, which resolved without intervention within 2-3 days – there was no increase of reactogenicity with subsequent dosing**

		Sci-B-Vac <sup>®</sup> (N=796)	Engerix-B <sup>®</sup> (N=811)
<b>Local AEs – Injection Site</b>			
Pain	Mild or Moderate	502 (63.1%)	293 (36.1%)
	Severe+	1 (0.1%)	1 (0.1%)
Tenderness	Mild or Moderate	376 (47.2%)	279 (34.4%)
	Severe+	8 (0.9%)	3 (0.4%)
Itchiness	Mild or Moderate	75 (9.4%)	54 (6.6%)
	Severe+	1 (0.4%)	2 (0.2%)
Redness	Mild or Moderate	16 (2.1%)	8 (1.0%)
	Severe+	0 (0.0%)	0 (0.0%)
Swelling	Mild or Moderate	16 (2.0%)	8 (1.0%)
	Severe+	0 (0.0%)	3 (0.4%)

- Systemic AEs within 7 days of vaccination (headache, fatigue, nausea and diarrhea) were comparable between Sci-B-Vac<sup>®</sup> and Engerix-B<sup>®</sup> except for myalgia which was more common in Sci-B-Vac<sup>®</sup> (34.7% vs 24.3%)
- Unsolicited AEs within 28 days of vaccination were comparable between Sci-B-Vac<sup>®</sup> (46.4%) and Engerix-B<sup>®</sup> (48.0%)
- SAEs during the study were comparable between Sci-B-Vac<sup>®</sup> (4.0%) and Engerix-B<sup>®</sup> (2.6%)
- Medically-attended AEs during the study were comparable between Sci-B-Vac<sup>®</sup> (25.4%) and Engerix-B<sup>®</sup> (28.5%)
- NOCI during the study was comparable – Sci-B-Vac<sup>®</sup> (3.3%) and Engerix-B<sup>®</sup> (3.7%)

### Conclusions

- PROTECT study met both co-primary endpoints – SPR for Sci-B-Vac<sup>®</sup> was non-inferior to Engerix-B<sup>®</sup> in adults age  $\geq 18$  years and superior in adults age  $\geq 45$  years
- Sci-B-Vac<sup>®</sup> induced a more robust immune response as measured by both SPR and GMC of HBsAb titers, compared to Engerix-B<sup>®</sup>, reducing the proportion of non- or low-responders
- Both vaccines were well tolerated with  $>95\%$  completion of the 3-dose course of vaccination
- Sci-B-Vac<sup>®</sup> had higher rates of mild or moderate injection site pain and tenderness, and myalgia compared to Engerix-B<sup>®</sup>
- No new or unexpected safety signals were observed, and safety and tolerability were consistent with the known profile of Sci-B-Vac<sup>®</sup>

### References

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### Acknowledgements

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### Disclosure

Dr. Vesikari was the Principal Investigator of this study and his institution received financial support for the services performed for conducting the study at his study center(s)

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