

Diabetes therapy of tomorrow: Beyond glycemic control

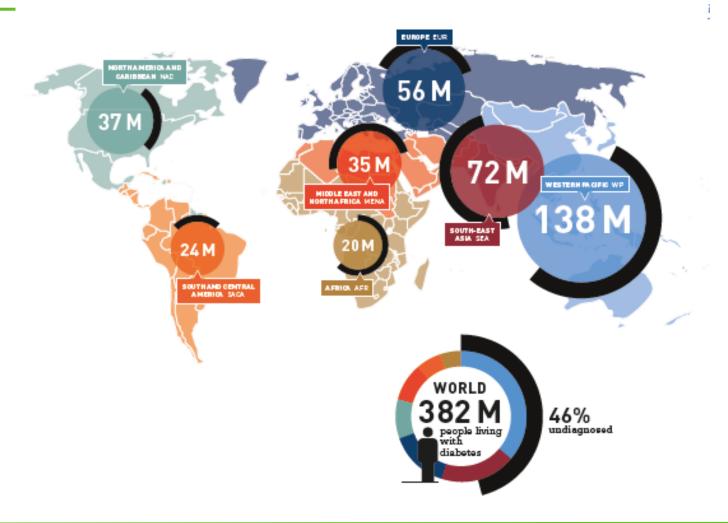
IMI JDRF Joint Symposium, Bruxelles, Belgium

May 20th 2014

Philip J Larsen, Sanofi Diabetes

Prevalence of Diabetes by IDF Region







Diabetes comes in two major flavors with plenty of nuances



- Type 1 diabetes (autoimmune disorder)
 - Latent autoimmune diabetes of the adult (LADA) could be considered etiologically and therapeutically categorized as T1DM variant

- Type 2 diabetes (heterogeneous disease with strong heritability)
 - Characterized by insulin resistance and impaired insulin secretion
 - Often macrovascular disease at time of diagnosis



But a person living with diabetes may find this classification of lesser relevance

54 years¹

Male, 83 - 85 kgs Overweight,

Blue collar laborer, No time for exercice

 $BMI > 25 \text{ kg/m}^2$

HbA_{1c} 8%²





Is not only worried about his HbA1c



Diminishment of Self Guilty, social stigma...

Lack of energy, irritability, erectile dysfunction

Blood pressure, Lipid, depression, CV issues

Only 14% meet glycemic, BP & Lipid Control

Underestimate the risk of complications



Cost¹

...failure, self blame, alone

HCP threat, Bad connotation, Amputation ...

Hypoglycemia, Titration, fear of Mistake

... don't see the short term benefit

You don't cope with the disease ruling, your existence you want to live a normal life²



Diabetes double the risk of dying compared to anyone at the same age¹

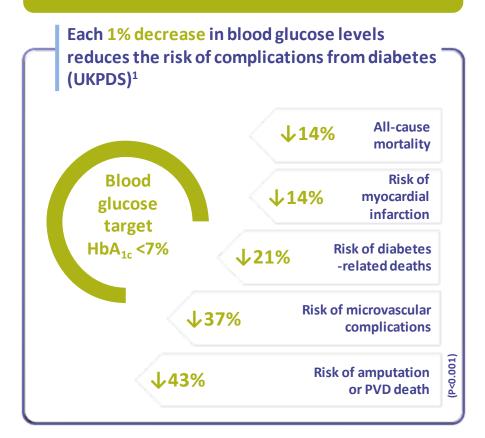


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- 2 to 4 times higher risk for stroke
- 2 to 4 times higher risk for heart disease death
- 10 times more lower limb amputations
- Risk of blindness and kidney failure
- > 50% chance of dying from CV disease

...Your physician will tell you to decrease your HbA1C²

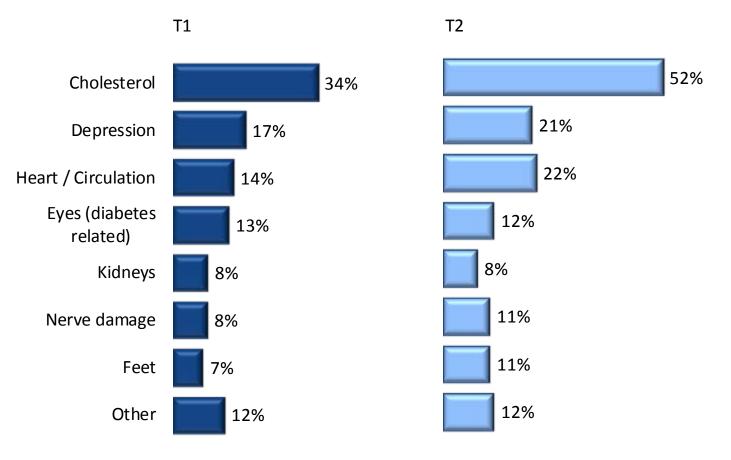






Diabetes care should not focus only on hyperglycemia

Complications are frequent

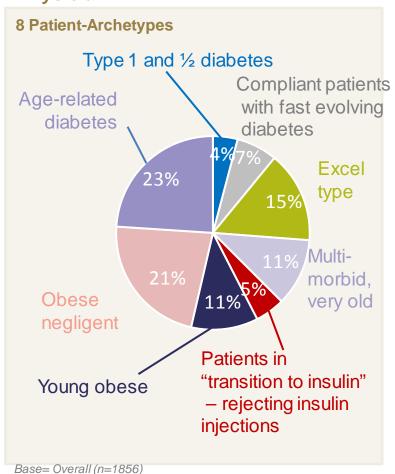




THE PHYSICIAN- & PATIENT-**ARCHETYPES**

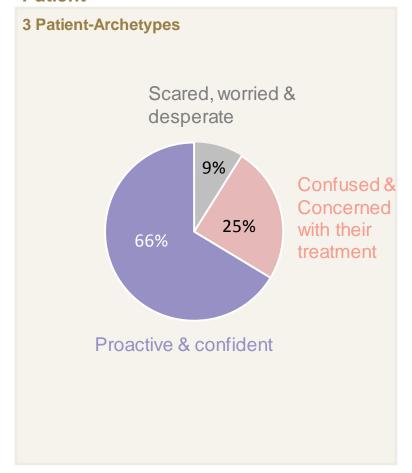


Physician



*T2D patients profiling, A+A, 2013, Base= Overall (n=1856)

Patient



*SANOFI AVENTIS Diabetic Patients GALLILEO panel, November 2010

Base=Overall (n=864)





Diabetes pharmacotherapy is a step wise approach and falls in three categories



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Disease modification
Insulin sensitization, β cell regeneration, anti-inflammatory

Glucose PLUS

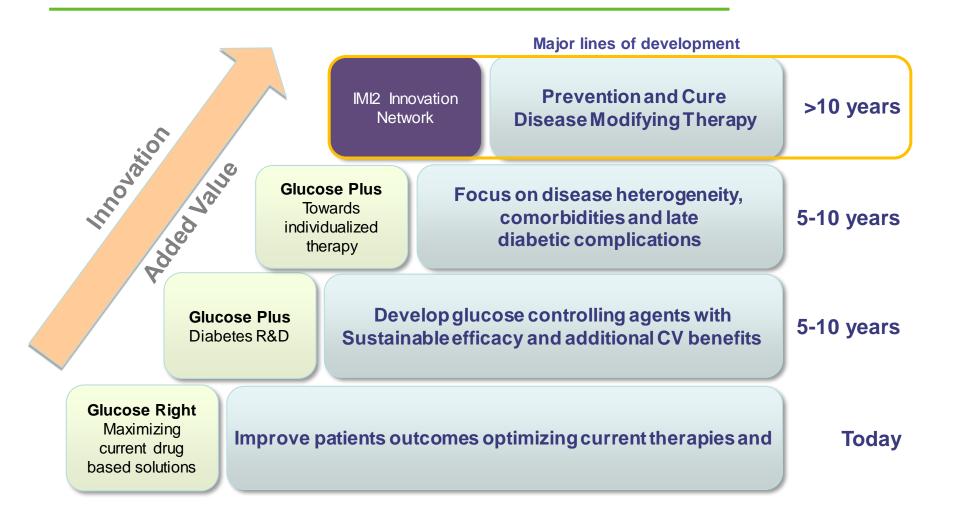
Weight management
Macrovascular disease modification
BP, lipids, inflammation
Complications management (eg. renal)

Glucose RIGHT

Insulins (various modalities)
Non-insulin super efficacious drugs
Devices
Adherence improvers



R&D efforts: Prevention and Cure is the ultimate goal but several short-term achievable goals will help ease the disease burden





The most important decision to make



Choice of target & link to disease segment

High Confidence **Target** Rationale Human Pharmacological Evidence **Human Genetics or** translational animal model Mechanistic rationale or unproven animal model

Low Confidence

Truly innovative, GLP1 agonism example hereof

Must increase focus in this tier - PCSK9 the prototype

Unfortunately, the majority of the industry discovery portfolio is in this tier. Aim should be to improve translatability or deprioritize the effort



Thank you



