

# **MEETING ABSTRACT**

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# P02-026 - Model-based characterization of the PKPD relationship for canakinumab in CAPS: a step towards personalized

A Gautier, P Lowe, A Skerjanec, P McKernan, O Luttringer, M Fink\*

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### Introduction

Canakinumab is a high-affinity fully human monoclonal antibody of the IgG1/k isotype, designed to bind and functionally neutralize the bioactivity of  $IL-1\beta$ , which is recognized as one of the principal pro-inflammatory cytokines in cryopyrin associated periodic syndromes (CAPS).

### **Objectives**

The objectives of the study were to describe the kinetics of canakinumab and dynamics of binding IL-1β in CAPS patients; to determine if these are different in 2- and 3-year-old children versus older children and adults; and to explore the impact of CAPS phenotype (Muckle-Wells Syndrome [MWS], Familial Cold Autoinflammatory Syndrome [FCAS], Neonatal-Onset Multisystem Inflammatory Disease [NOMID]) on the kinetics of canakinumab and dynamics of binding to IL-1β.

### Methods

A pharmacokinetics (PK)-binding model was used to describe the kinetic and binding parameters of canakinumab and IL-1 $\beta$  in CAPS patients, and in other populations relative to CAPS. The subgroup of 7 CAPS patients who were 2 and 3 years of age at baseline was also compared to the overall CAPS population.

## **Results**

The 7 CAPS patients did not show any difference in terms of PK. However, they showed a higher IL-1 $\beta$  turnover including IL-1 $\beta$  clearance and production. IL-1 $\beta$  levels were linked with the severity of the CAPS phenotype. In the pediatric population, MWS and especially NOMID patients had higher concentrations of the inert

canakinumab/IL-1 $\beta$  complexes after administration of canakinumab, indicating more cytokine in the body to be captured.

### **Conclusion**

Correlation with clinical responses suggested that these increased levels of IL-1 $\beta$  may explain why younger and NOMID phenotype patients require higher doses or escalation to higher doses.

### **Disclosure of interest**

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