## Subject Impression Data for STS101 From the Ongoing Phase 3 Open-Label ASCEND Study

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Figure 1. STS101 Administration

### Introduction

- Dihydroergotamine mesylate (DHE) exerts anti-migraine effects via a unique multi-modal mechanism of action involving interactions with both serotonergic and adrenergic receptors, has been used since 1946 for the acute treatment of migraine, and is recognized as a first-line treatment option. 1-3
- STS101 is a novel investigational DHE nasal powder formulation delivered via an easy-to-use, easy-to-carry, pre-filled, single-use device for intranasal administration that is currently being evaluated in phase 3 efficacy (SUMMIT, NCT04940390) and safety (ASCEND, NCT04406649) trials for the acute treatment of migraine (with or without aura).

Exclusion criteria included a diagnosis of non-migraine

Subjects must have an intact nasal mucosa at baseline

(i.e., no ulceration or bleeding; no or mild erythema,

Interim analysis results of self-reported assessments

are presented and include subject global impression,

ease-of-use impression, subject likelihood of use, and

comparison of STS101 with previously used migraine

medication for the 3-month and 6-month timepoints.

Likert scale, with response options dependent on the

When asked at the 3-month and 6-month assessments

– 68.9% and 75.5% of subjects agreed or strongly

67.8% and 69.1% of subjects agreed or strongly

71.6% and 76.3% of subjects agreed or strongly

faster than their usual medication (Figure 3)

agreed that STS101 helped them return to normal

agreed that STS101 worked faster than their usual

agreed that STS101 worked more consistently than

to compare STS101 to their usual migraine

medication, respectively:

medication (Figure 3)

(Figure 3).

their usual medication (Figure 3)

Subjects' ratings were assessed using a 5-point

headache, history of cerebrovascular disease, and

≥2 cardiovascular risk factors.

swelling, and rhinorrhea).

Outcomes and analyses

question (Table 1).

## Objective

• To report the subject impression and satisfaction questionnaire data from the ongoing, long-term (12 months), open-label, phase 3 ASCEND study, through 6 months of treatment with STS101 5.2 mg for the acute treatment of migraine attacks.

## Methods

#### Study design and treatment intervention

- The ASCEND study is an ongoing, multi-center, multiple-dose, open-label, 12-month study of STS101 for the acute treatment of migraine in adults aged 18–65 years with migraine.
- This interim analysis was conducted with a data cutoff date of June 30, 2021, and includes data reported for study drug exposure periods of up to 6 months
- After establishing eligibility, subjects could self-administer STS101 5.2 mg as needed (PRN), using up to 2 doses within 24 hours to treat a single migraine attack, and up to 12 doses/month (Figure 1).

#### **Subjects**

Results

Month 6 (Figure 2).

- Study subjects must have ≥1-year history of migraine (with or without aura) according to the International Classification of Headache Disorders, 3<sup>rd</sup> edition,<sup>4</sup> including:
- Migraine onset before age of 50 years
- 4–12 migraine attacks/month in each of the 3 months prior to screening
- <15 headache days/month in each of the 3 months</p> prior to screening

Overall, large percentages of subjects had favorable

STS101 was considered "good" or "very good" by

At Month 3, 89.5% of subjects considered STS101

easy or very easy to use, increasing to 92.5% at

After 3 and 6 months of use, 75.7% and 81.6% of

subjects, respectively, indicated they were likely or

very likely to use STS101 if it was available (Figure 2).

after 6 months of use (Figure 2).

impressions of STS101, which was consistent across

the assessments at Month 3 and Month 6 of treatment.

82.4% of subjects after 3 months of use and by 86.4%

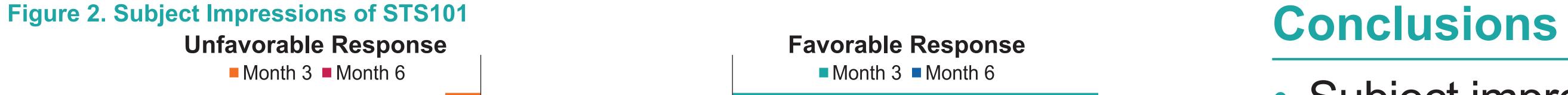
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SQUEEZE TO DELIVER

Table 1. Response Options for the 5-point Likert Scales

	Response Options		
	Unfavorable	Neutral	Favorable
Subject Global Impression	Very Poor, Poor	No Opinion	Good, Very Good
Subject Likelihood of Use	Very Unlikely, Unlikely	No Opinion	Likely, Very Likely
Ease of Use Impression	Not Easy at All, Not Easy	No Opinion	Easy, Very Easy
Return to Normal Faster Than Usual Medication	Strongly Disagree, Disagree	Neutral	Agree, Strongly Agree
Works Faster Than Usual Medication			
More Consistently Works Than Usual Medication			

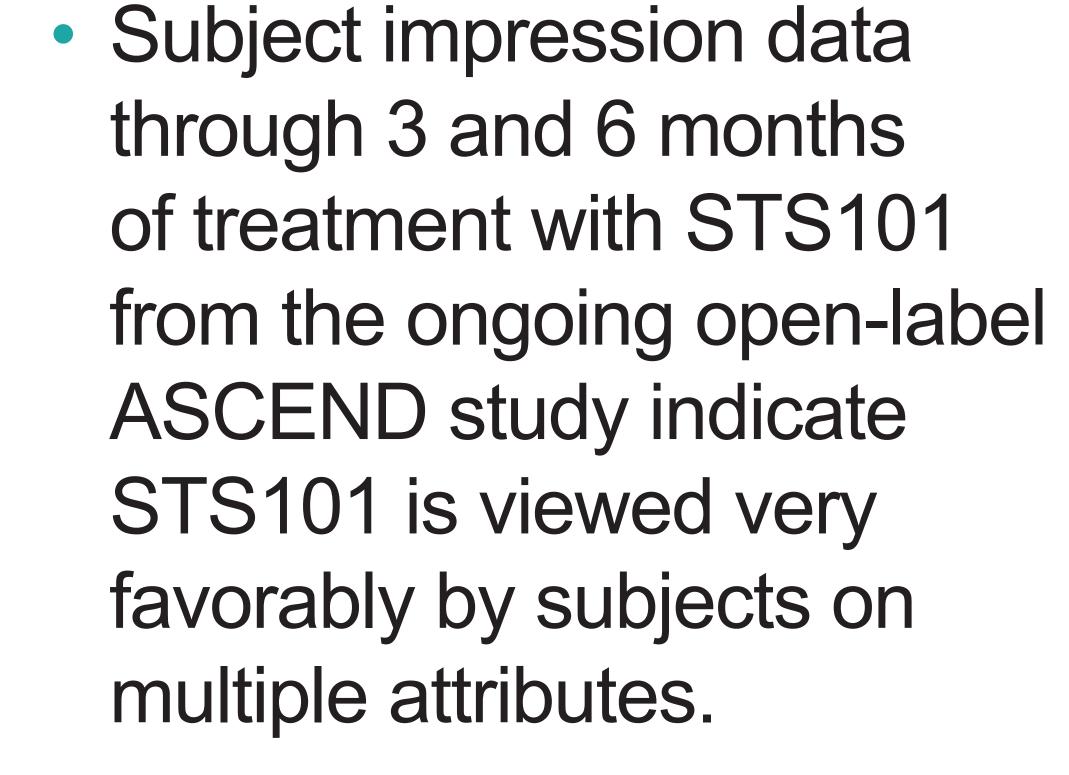


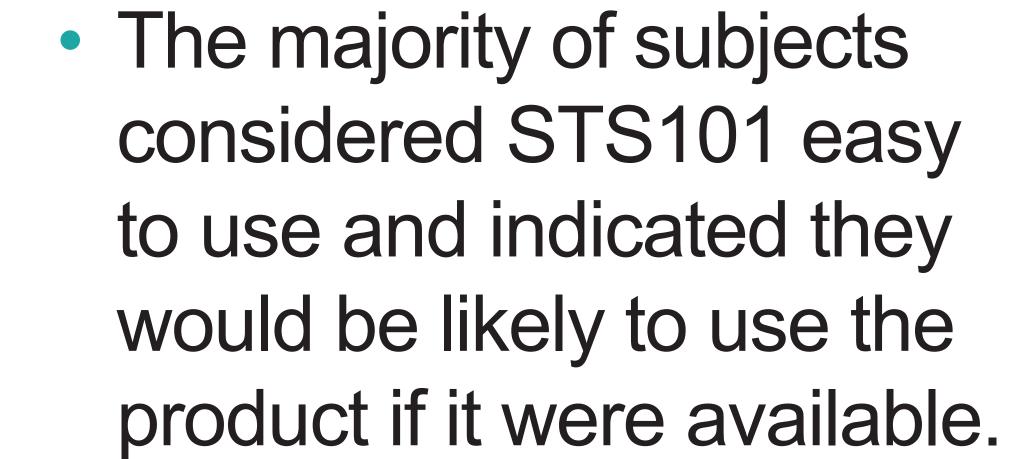
**Percent of Subjects** 

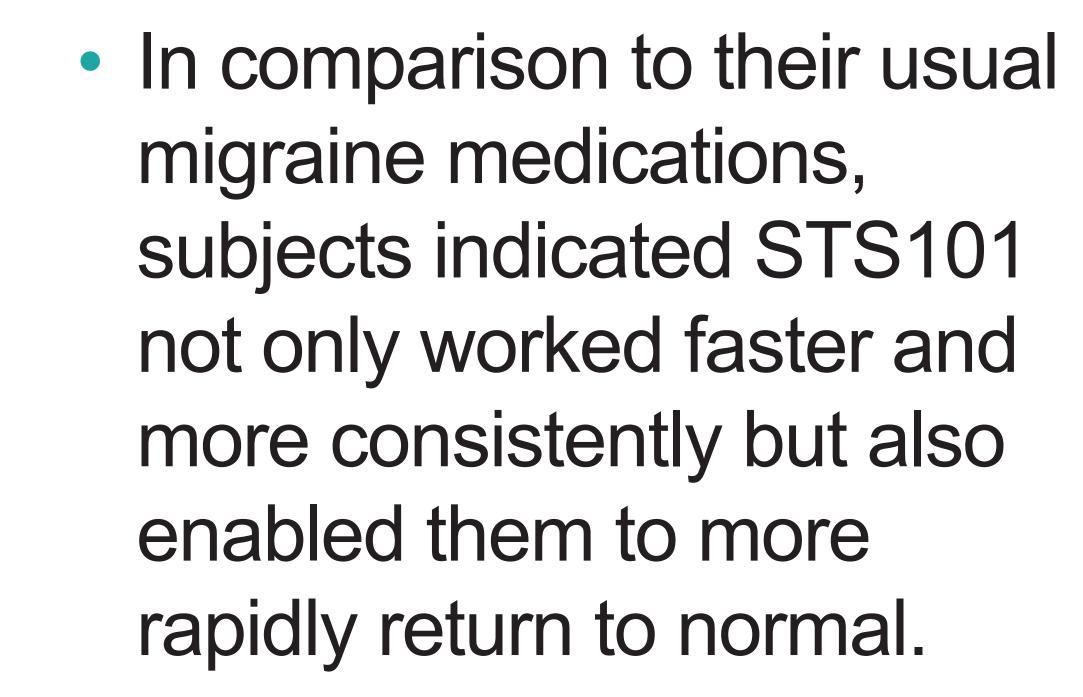
82.4%

81.6%

89.5%









Sample sizes ranged 146–148 at Month 3 and were 139 at Month 6 across assessments

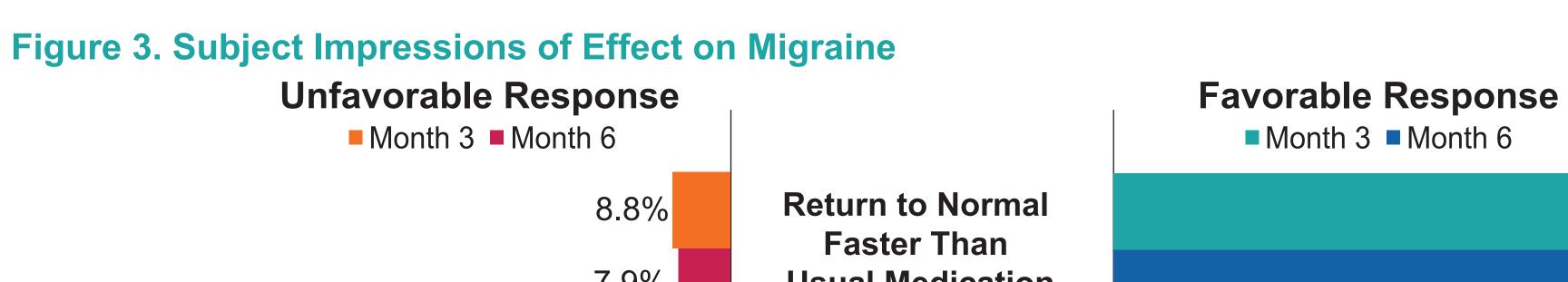
7.8%

8.2%

3.9%

4.8%

13.8%



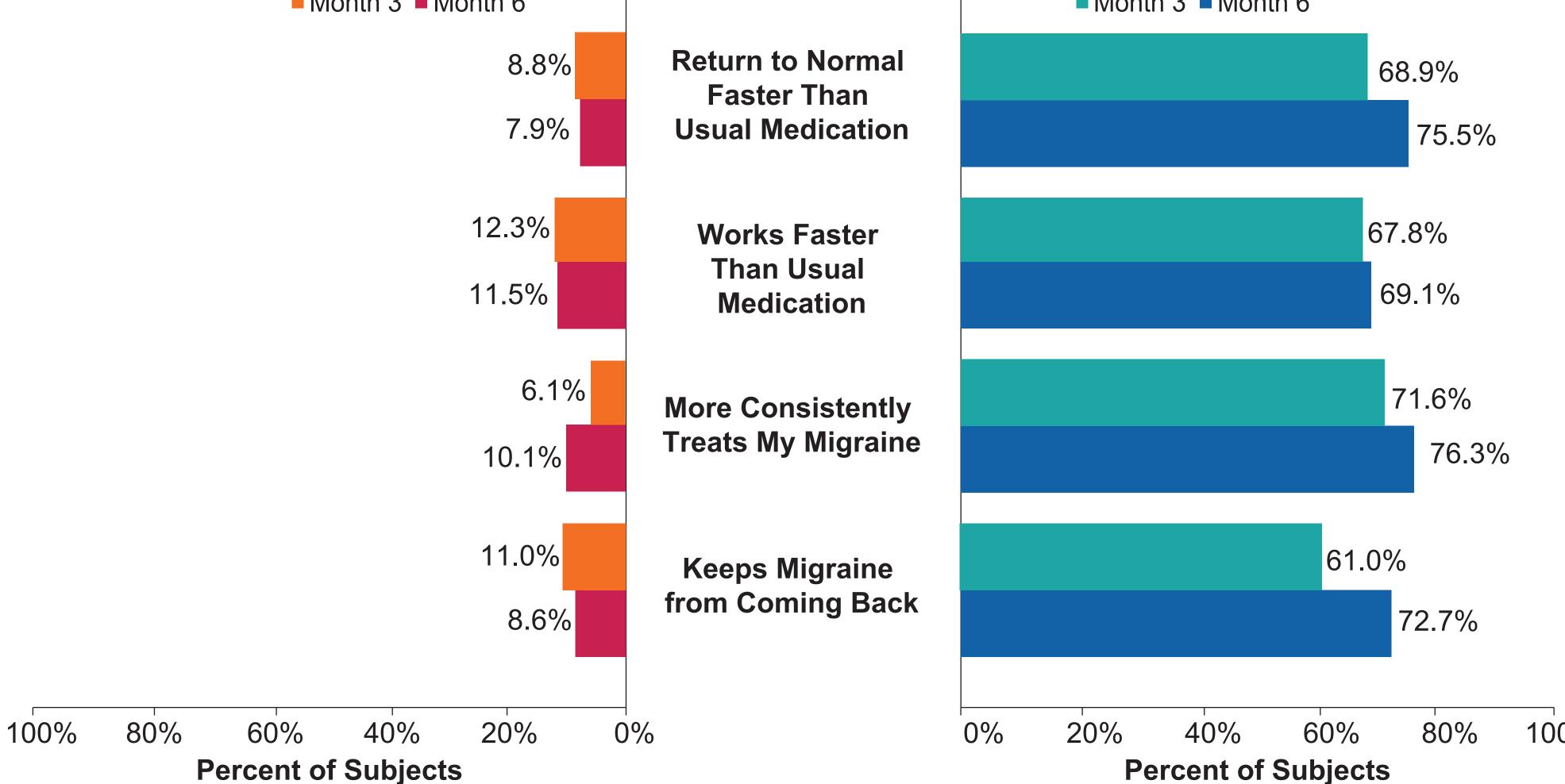
Subject Global

**Impression** 

Subject Likelihood

Ease of Use

**Impression** 



### Keeps Migraine From Coming Back

At the 3-month and 6-month assessments, respectively, 1. Horton BT, et al. Proc Staff Meet Mayo Clin. 1945;241-248. 61.0% and 72.7% of subjects agreed or strongly agreed 2. Silberstein SD, et al. Headache. 2003;43(2). 3. Steiner TJ, et al. J Headache and Pain. 2015;16(1). that STS101 kept their migraines from coming back 4. Headache Classification Committee of the International Headache Society (IHS).

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