

# **ONCE MONTHLY HEMATIDE MAINTAINS HB IN HD PTS WITH DIFFERENT BASELINE IRON AND CRP STATUS.**

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Hematide, a novel synthetic PEGylated peptidic ESA, is being developed for treatment of anemia associated with CKD. We investigated the impact of ferritin, TSAT and CRP, levels at entry into Phase 2 studies on the Hb response over time to a once monthly dose of Hematide. HD pts previously treated with epoetin who completed one of two 6 month studies, (relevant inclusion criteria serum ferritin $\geq$ 100ng/ml and TSAT $\geq$ 20%, exclusion: CRP  $>$ 30 $\mu$ /L) continued in two ongoing extension studies. Iron supplementation was administered throughout. Of 98 pts participating 38 have reached 23 months (6 months short term plus 17 months long term). The influence of baseline ferritin, TSAT and CRP on Hb over 23 months was assessed. The parameters at baseline were divided into 'normal' and 'high' categories.

		Hb (g/dL) - mean (95% CI)											
		Ferritin ( $\mu$ g/L)				TSAT (%)				CRP ( $\mu$ g/L)			
		$\leq$ 500		$>$ 500		$\leq$ 50		$>$ 50		$<$ 5		$\geq$ 5	
mos	mean	Hb	n	Hb	n	Hb	n	Hb	n	Hb	n	Hb	n
1 - 23	95% CI	11.7	30	11.4	68	11.5	68	11.4	30	11.5	49	11.5	49
		11.4, 12.0		11.2, 11.6		11.3, 11.7		11.1, 11.7		11.3, 11.7		11.2, 11.7	
Last Dose (mg/kg)		0.08 $\pm$ 0.04		0.11 $\pm$ 0.03		0.10 $\pm$ 0.03		0.11 $\pm$ 0.04		0.09 $\pm$ 0.03		0.11 $\pm$ 0.03	

Seven pts had AEs possibly related to Hematide.

Seventeen pts had 44 transfusions

Though not designed to compare efficacy by baseline cohorts, these studies indicate stable Hb can be maintained by Hematide over approx 2 years in HD pts with different baseline iron and inflammation status.