



**News Release**

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**Janssen Seeks Expanded Use of DARZALEX<sup>®</sup>▼ (daratumumab)  
Subcutaneous Formulation for the Treatment of Patients with Light  
Chain (AL) Amyloidosis**

*AL amyloidosis is a rare, multi-system disease with a high unmet medical need  
as there are currently no approved therapies<sup>1,2</sup>*

**BEERSE, BELGIUM, 05 November, 2020** – The Janssen Pharmaceutical Companies of Johnson & Johnson today announced the submission of a Type II variation application to the European Medicines Agency (EMA) seeking approval to expand the use of the DARZALEX<sup>®</sup>▼ (daratumumab) subcutaneous (SC) formulation to include the treatment of patients with light chain (AL) amyloidosis.

AL amyloidosis is a rare and potentially fatal disease that occurs when an insoluble protein called amyloid builds up in tissues and organs, interfering with healthy tissue and organ function.<sup>3,4</sup> There are currently no therapeutic options approved by regulatory bodies such as the EMA or the U.S. Food and Drug Administration (FDA) for treatment of the disease.<sup>1,2</sup>

The submission is based on data from the Phase 3 ANDROMEDA study, presented during the [2020 European Hematology Association \(EHA\) Annual Congress](#). The study evaluated the efficacy and safety of daratumumab SC in combination with

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bortezomib, cyclophosphamide, and dexamethasone (D-VCd) compared with bortezomib, cyclophosphamide, and dexamethasone (VCd) alone in the treatment of patients with AL amyloidosis. The study data showed a significantly higher haematologic complete response rate for patients with the addition of daratumumab compared with patients treated with VCd alone.<sup>5</sup> Overall, the safety profile of D-VCd demonstrated a consistent safety profile compared to the VCd regimen and the known safety profile of daratumumab.<sup>5</sup>

“The current management of AL amyloidosis focuses on slowing production of amyloid protein and controlling symptoms; however, there are no EMA-approved therapies for this difficult-to-treat, rare disease,” said Dr Catherine Taylor, VP, Medical Affairs Therapeutic Area Strategy, Europe, Middle East and Africa (EMEA), Janssen-Cilag Ltd. Middle East. “If approved, adding daratumumab to this combination could address a significant unmet need and offer new hope to patients with AL amyloidosis, who have poor prognoses and have long been waiting for therapeutic options.”

“Daratumumab is an important foundational therapy in the treatment of multiple myeloma and now, on the basis of the ANDROMEDA study results, has shown that it can improve outcomes in a related plasma cell disorder, AL amyloidosis,” said Craig Tandler, M.D., Vice President, Late Development and Global Medical Affairs, Janssen Research & Development, LLC. “We are excited about the potential for daratumumab, as part of a regimen for newly diagnosed patients with AL amyloidosis to alter the poor prognosis of their disease and reduce organ damage, which is an unfortunate life-threatening complication of this serious disease.”

In September 2020, Janssen submitted a supplemental Biologics Licence Application (sBLA) to the U.S. FDA seeking approval of the subcutaneous formulation of daratumumab for the treatment of patients with AL amyloidosis.<sup>6</sup>

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**About the ANDROMEDA Study<sup>5,7</sup>**

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ANDROMEDA ([NCT03201965](#)) is an ongoing Phase 3, randomised, open-label study investigating the safety and efficacy of daratumumab SC in combination with bortezomib, cyclophosphamide and dexamethasone (D-VCd), compared to VCd alone, in the treatment of patients with newly diagnosed AL amyloidosis.<sup>5,7</sup> The study includes 388 patients with newly diagnosed AL amyloidosis with measurable haematologic disease and one or more organs affected. The primary endpoint is overall complete haematologic response rate by intent-to-treat (ITT). Secondary endpoints include major organ deterioration, progression-free survival, major organ deterioration event free survival, organ response rate, overall survival, and time to haematologic response, among others.<sup>5,7</sup>

### **About AL Amyloidosis**

Light chain (AL) amyloidosis is a rare and potentially fatal haematologic disorder that can affect the function of multiple organs.<sup>1,2</sup> The disease occurs when bone marrow produces abnormal antibodies called light chains, which clump together to form a substance called amyloid. These clumps of amyloid are deposited in tissues and vital organs and interfere with normal organ function, eventually causing organ deterioration.<sup>1,2</sup> AL amyloidosis is the most common type of amyloidosis. It frequently affects the heart, kidneys, digestive tract, liver and nervous system.<sup>1,2</sup> Diagnosis is often delayed and prognosis is poor due to advanced, multi-organ, particularly cardiac, involvement. Approximately 30,000 to 45,000 patients in the European Union and the United States have AL amyloidosis.<sup>8</sup>

### **About daratumumab and daratumumab SC**

Daratumumab is a first-in-class biologic targeting CD38, a surface protein that is highly expressed across multiple myeloma (MM) cells, regardless of disease stage.<sup>9,10</sup> Daratumumab is believed to induce tumour cell death through multiple immune-mediated mechanisms of action, including complement-dependent cytotoxicity (CDC), antibody-dependent cell-mediated cytotoxicity (ADCC) and antibody-dependent cellular phagocytosis (ADCP), as well as through apoptosis, in which a series of molecular steps in a cell lead to its death.<sup>10</sup> A subset of myeloid derived suppressor cells (CD38+ MDSCs), CD38+ regulatory T cells (Tregs) and CD38+ B cells (Bregs) are decreased by daratumumab-mediated cell lysis.<sup>10</sup>

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In [August 2012](#), Janssen Biotech, Inc. and Genmab A/S entered a worldwide agreement, which granted Janssen an exclusive licence to develop, manufacture and commercialise daratumumab.<sup>11</sup> Since launch, it is estimated that more than 154,000 patients have been treated with daratumumab worldwide.<sup>12</sup> In [June 2020](#), daratumumab SC (daratumumab and hyaluronidase human-fihj) was approved by the European Commission as the only subcutaneous CD38-directed antibody approved to treat patients with multiple myeloma.<sup>13</sup> Daratumumab SC is co-formulated with recombinant human hyaluronidase PH20 (rHuPH20), Halozyme's ENHANZE® drug delivery technology.<sup>13</sup>

Daratumumab is being evaluated in a comprehensive clinical development programme across a range of treatment settings in MM, such as in frontline and relapsed settings.<sup>14,15,16,17,18,19,20,21</sup> Additional studies are ongoing or planned to assess the potential of daratumumab SC in other malignant and pre-malignant haematologic diseases in which CD38 is expressed, such as smouldering myeloma and AL amyloidosis.<sup>22,23</sup> For more information, please see <https://www.clinicaltrials.gov/>.

For further information on daratumumab, please see the Summary of Product Characteristics at <https://www.ema.europa.eu/en/medicines/human/EPAR/darzalex>.

### **About the Janssen Pharmaceutical Companies of Johnson & Johnson**

At Janssen, we're creating a future where disease is a thing of the past. We're the Pharmaceutical Companies of Johnson & Johnson, working tirelessly to make that future a reality for patients everywhere by fighting sickness with science, improving access with ingenuity, and healing hopelessness with heart. We focus on areas of medicine where we can make the biggest difference: Cardiovascular & Metabolism, Immunology, Infectious Diseases & Vaccines, Neuroscience, Oncology, and Pulmonary Hypertension.

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Development, LLC, Janssen-Cilag Limited Middle East, and Janssen Biotech, Inc. are part of the Janssen Pharmaceutical Companies of Johnson & Johnson.

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### **Cautions Concerning Forward-Looking Statements**

*This press release contains "forward-looking statements" as defined in the Private Securities Litigation Reform Act of 1995 regarding the benefits of daratumumab subcutaneous formulation for the treatment of patients with light chain amyloidosis. The reader is cautioned not to rely on these forward-looking statements. These statements are based on current expectations of future events. If underlying assumptions prove inaccurate or known or unknown risks or uncertainties materialise, actual results could vary materially from the expectations and projections of Janssen Pharmaceutica N.V., Janssen Pharmaceutical Companies and/or Johnson & Johnson. Risks and uncertainties include, but are not limited to: challenges and uncertainties inherent in product research and development, including the uncertainty of clinical success and of obtaining regulatory approvals; uncertainty of commercial success; manufacturing difficulties and delays; competition, including technological advances, new products and patents attained by competitors; challenges to patents; product efficacy or safety concerns resulting in product recalls or regulatory action; changes in behaviour and spending patterns of purchasers of health care products and services; changes to applicable laws and regulations, including global health care reforms; and trends toward health care cost containment. A further list and descriptions of these risks, uncertainties and other factors can be found in Johnson & Johnson's Annual Report on Form 10-K for the fiscal year ended December 29, 2019, including in the sections captioned "Cautionary Note Regarding Forward-Looking Statements" and "Item 1A. Risk Factors," and in the company's most recently filed Quarterly Report on Form 10-Q, and the company's subsequent filings with the Securities and Exchange Commission. Copies of these filings are available online at [www.sec.gov](http://www.sec.gov), [www.jnj.com](http://www.jnj.com) or on request from Johnson & Johnson. None of the Janssen Pharmaceutical Companies nor Johnson & Johnson undertakes to update any forward-looking statement as a result of new information or future events or developments.*

ENHANZE® is a registered trademark of Halozyme.

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