

Classification of Porphyria

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Porphyria—A Rare Disease of Clinical Consequence

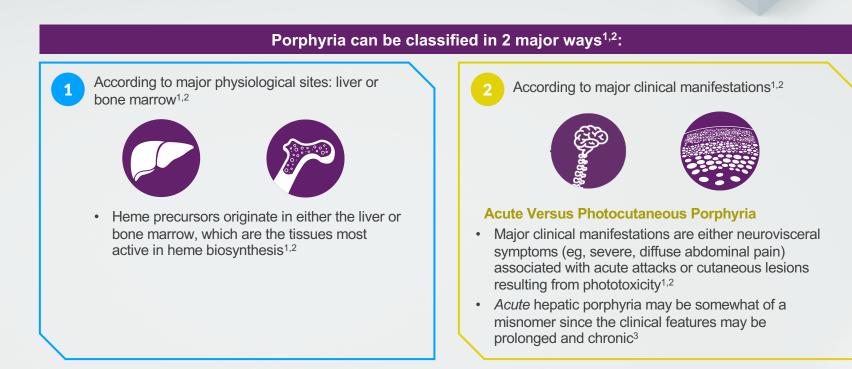
- Porphyria is a group of at least 8 metabolic disorders^{1,2}
 - Each subtype of porphyria involves a genetic defect in a heme biosynthesis pathway enzyme^{1,2}
 - The subtypes of porphyria are associated with distinct signs and symptoms in patient populations that can differ by gender and age^{1,3}
- Prevalence of some subtypes of porphyria may be higher than generally assumed³

Subtype of Porphyria	Estimated Prevalence Based on European and US Data
Porphyria cutanea tarda (PCT)	1/10,000 (EU) ¹
Acute intermittent porphyria (AIP)	0.118-1/20,000 (EU) ^{1,4} 5/100,000 (US) ¹
Erythropoietic protoporphyria (EPP)	1/50,000-75,000 (EU) ¹

Estimated Prevalence of Most Common Subtypes of Porphyria^{1,4}

1. Ramanujam V-MS, Anderson KE. *Curr Protoc Hum Genet*. 2015;86:17.20.1-17.20.26. 2. Puy H et al. *Lancet*. 2010;375:924-937. 3. Bissell DM et al. *N Engl J Med*. 2017;377:862-872. 4. Elder G et al. *J Inherit Metab Dis*. 2013;36:848-857.

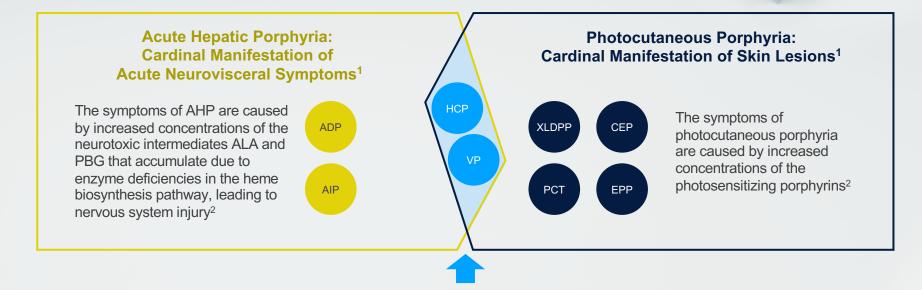
Classification of Porphyria



1. Bonkovsky HL. Hematology Am Soc Hematol Educ Program. 2005:24-30. 2. Ramanujam V-MS, Anderson KE. Curr Protoc Hum Genet. 2015;86:17.20.1-17.20.26. 3. Anderson KE et al. Ann Intern Med. 2005;142:439-450.

3

Using Major Clinical Manifestations for Classification of 8 Porphyria Subtypes

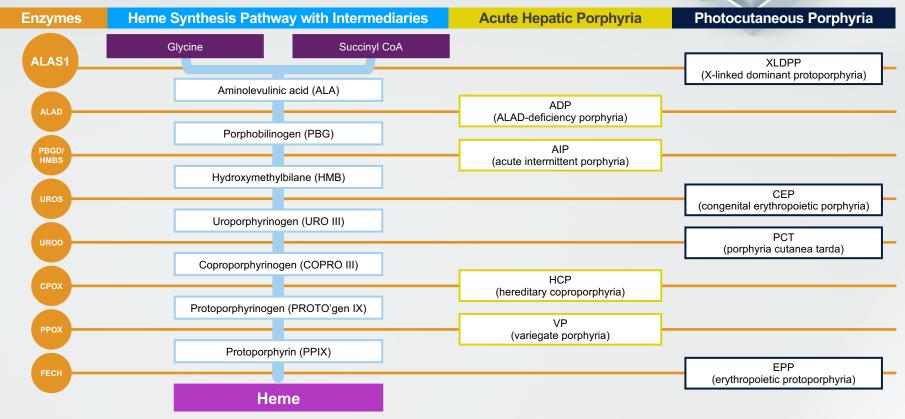


HCP and VP are associated with both acute neurovisceral symptoms and skin lesions¹

ADP=aminolevulinic acid dehydratase-deficiency porphyria; AIP=acute intermittent porphyria; ALA=aminolevulinic acid; CEP=congenital erythropoietic porphyria; EPP=erythropoietic porphyria; HCP=hereditary coproporphyria; PBG=porphobilinogen; PCT=porphyria cutanea tarda; VP=variegate porphyria; XLDPP=X-linked dominant protoporphyria.

1. Bissell DM, Wang B. J Clin Transl Hepatol. 2015;3:17-26. 2. Bissell DM et al. N Engl J Med. 2017;377:862-872.

Heme Biosynthesis Pathway, Defective Enzymes, and Related Porphyria¹ The Rate-Limiting Step for the Pathway is the Formation of ALA, Catalyzed by ALAS1²



1. Bissell DM et al. N Engl J Med. 2017;377:862-872. 2. Bissell DM, Wang B. J Clin Transl Hepatol. 2015;3:17-26.

The Prevalence of the Four Different Subtypes of AHP

Subtype of AHP ¹	Prevalence
AIP (Acute Intermittent Porphyria)	0.118-1/20,000 (EU*) ^{2,3} 5/100,000 (US*) ³
HCP (Hereditary Coproporphyria)	2/1,000,000 (Denmark*) ³
VP (Variegate Porphyria)	3.2/1,000,000 (EU*) ²
ADP (Aminolevulinic Acid Dehydratase- Deficiency Porphyria)	6 cases of ADP reported worldwide at time of publication ³

- AIP accounts for about 80% of AHP cases⁴
- The prevalence of AIP may be underreported due to estimates based on patients with symptomatic disease only rather than an enzyme mutation⁵
 - There is even less information about the other subtypes of AHP

*Prevalence data from these particular countries were cited due to ongoing research and relatively high prevalence.

1. Anderson KE et al. Ann Intern Med. 2005;142:439-450. 2. Elder G et al. J Inherit Metab Dis. 2013;36:848-857. 3. Ramanujam V-MS, Anderson KE. Curr Protoc Hum Genet. 2015;86:17.20.1-17.20.26. 4. Simon A et al. Patient. 2018;11(5):527-537. 5. Bissell DM, Wang B. J Clin Transl Hepatol. 2015;3:17-26.

6

AHP is a Genetic Disease with a Combination of Hormonal and Environmental Precipitating Factors

- Acute attacks in genetically predisposed patients are frequently preceded by environmental or hormonal precipitating factors¹⁻⁴
 - When manifested, the disease can be debilitating and even life threatening⁵
- Signs and symptoms are predominant in women of reproductive age but can occur in men as well³
 - It is rare to experience AHP symptoms before puberty⁶
 - Attacks are less likely after menopause²
- There is higher prevalence in Caucasians, especially northern Europeans, but AHP can occur in all races and ethnic groups^{4,7}

- Hormonal and environmental precipitating factors of AHP attacks^{1,2,4}:
 - Woman's menstrual cycle
 - Many drugs metabolized by CYP450 enzymes (eg, barbiturates, synthetic progestins, sulfonamide antibiotics)

7

- Crash dieting
- Cigarette smoking
- Excessive alcohol use
- Infections and surgery
- Psychological stress

Anderson KE et al. Ann Intern Med. 2005;142:439-450.
Bissell DM et al. N Engl J Med. 2017;377:862-872.
Bissell DM, Wang B. J Clin Transl Hepatol. 2015;3:17-26.
Bylesjö I et al. Scand J Clin Lab Invest. 2009;69:612-618.
Ventura P et al. Eur J Intern Med. 2014;25:497-505.
Ramanujam V-MS, Anderson KE. Curr Protoc Hum Genet. 2015;86:17.20.1-17.20.26.
Besur S et al. Metabolites. 2014;4:977-1006.

Summary

Definition and classification of porphyria

- Porphyria is a group of at least 8 metabolic disorders caused by alterations in enzymes involved in the heme biosynthesis pathway¹
- Categorized as AHP or photocutaneous porphyria based on clinical manifestations²
 - The signs and symptoms of AHP are due to increased levels of the neurotoxic intermediates ALA and PBG, leading to nervous system injury²
 - The signs and symptoms of photocutaneous porphyria are caused by increased levels of photosensitizing porphyrins²

AHP associated with debilitating and life-threatening signs and symptoms

- The cardinal presentation of AHP is severe, diffuse abdominal pain and other signs and symptoms (eg, nausea/vomiting, limb pain/weakness) that can progress to neurologic damage and even death³
- The term *acute* hepatic porphyria does not capture the frequent prolonged and chronic clinical features of this disease³

Is the prevalence of AHP higher than thought?

- The combined prevalence of AHP subtypes has been estimated to be approximately 5 cases/100,000³
- However, the prevalence of AHP may be higher than current estimates because these estimates are usually limited to those with symptomatic disease⁴
- AHP is also associated with delayed diagnosis and misdiagnosis³

1. Ramanujam V-MS, Anderson KE. Curr Protoc Hum Genet. 2015;86:17.20.1-17.20.26. 2. Bissell DM et al. N Engl J Med. 2017;377:862-872. 3. Anderson KE et al. Ann Intern Med. 2005;142:439-450. 4. Bissell DM, Wang B. J Clin Transl Hepatol. 2015;3:17-26.