

# **ARS-2 (*neffy*), Low-Dose Intranasal Epinephrine, Improves Urticaria Scores in Patients with Frequent Urticaria Flares: Phase 2 Study Results**

David Bernstein MD<sup>1</sup>, Neetu Talreja, MD<sup>2</sup>, Thomas Casale MD<sup>3</sup>, H. Henry Li, MD, PhD<sup>4</sup>, Wayne G Shreffler MD, PhD<sup>5</sup>, Richard Lowenthal MSc<sup>6</sup>, Sarina Tanimoto MD, PhD<sup>6</sup>

<sup>1</sup>University of Cincinnati college of medicine, Cincinnati, OH. <sup>2</sup>The Allergy Group and Treasure Valley Medical Research, Boise, ID, <sup>3</sup>Morsani College of Medicine, University of South Florida, Tampa, FL. <sup>4</sup>Institute of Asthma and Allergy, Chevy Chase, MD. <sup>5</sup>Food Allergy Center and Center for Immunology and Inflammatory Disease, Massachusetts General Hospital/Harvard Medical School, Boston, MA. <sup>6</sup>ARS Pharmaceuticals, San Diego, CA.

**American Academy of Allergy Asthma & Immunology, Washington, DC.  
February 23-26, 2024**

# RATIONALE

- Urticaria, or hives, is a common skin condition characterized by rapid appearance of wheals, ranging from small to large, often accompanied by itching or burning sensations, typically resolving within one to twenty-four hours.
- While chronic spontaneous urticaria symptoms are usually managed with antihistamines or anti-IgE antibodies, some patients still have occasional acute exacerbations. IM epinephrine is effective in relieving urticarial flares.
- A low-dose intranasal epinephrine spray (*neffy*) is being developed as a needle-free option for the treatment of severe allergic reactions and is expected to be a highly effective, safe, and easy-to-use option for the rapid treatment of urticaria exacerbations.

# STUDY DESIGN

## Patient Population

- Diagnosed urticaria subjects (CSU) who experience acute flares at least two (2) times a week while on a chronic treatment regimen
- Patient-rated pruritus and hive severity score  $\geq 2$  were enrolled

## Primary Outcomes

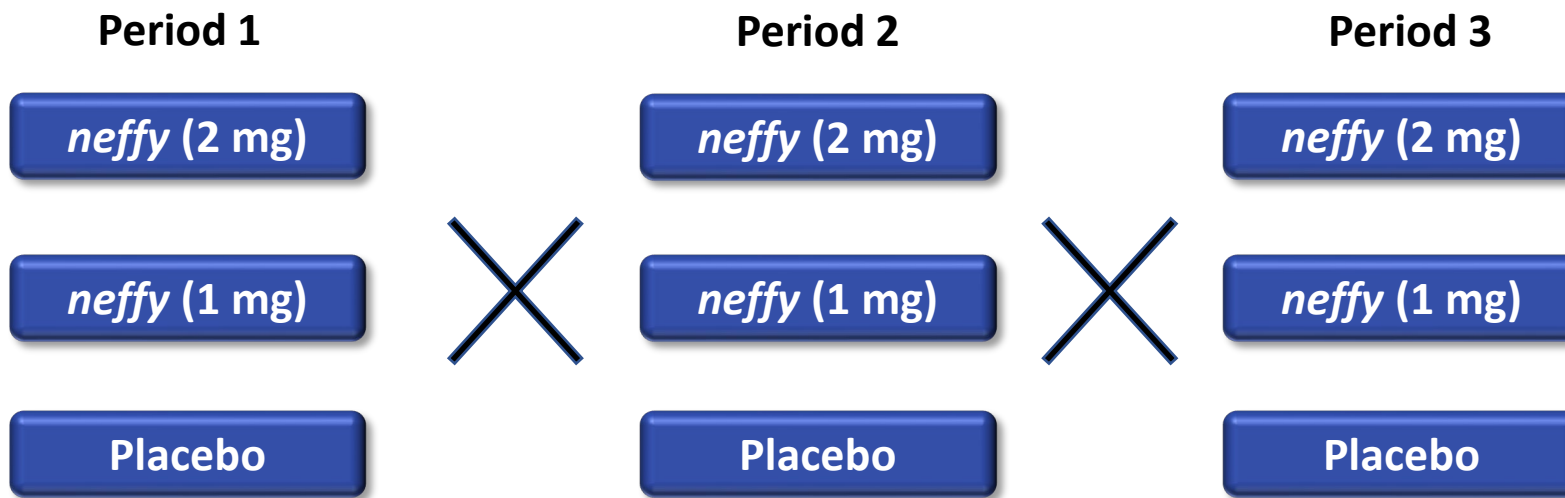
### Patient-reported (UAS twice-daily)

- Pruritus score from 0 to 3
- Hives score from 0 to 3
- Pain score (VAS) from 0 to 100

### Investigator-reported

- Extent of urticaria based on % of body area (1: <10%, 2: 10 to 30%, 3: >30%)
- Erythema score from 0 to 4

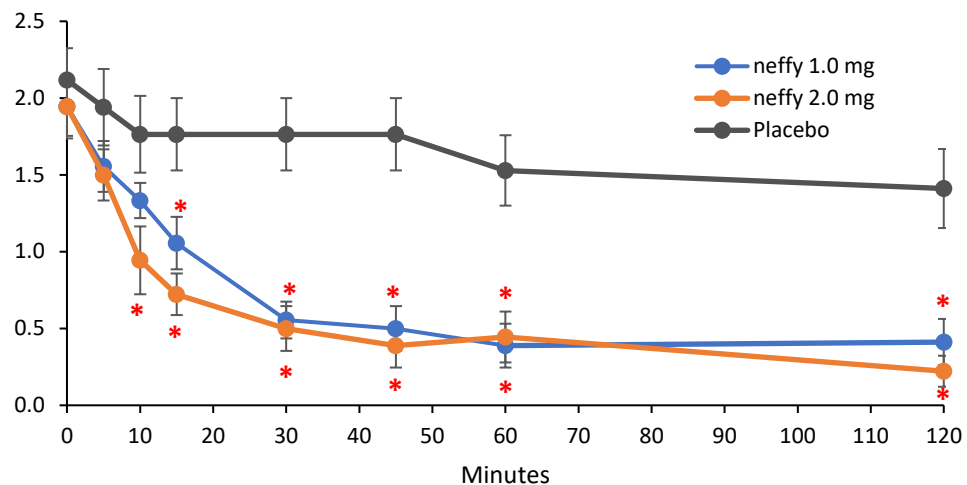
## Crossover Trial Design – Each Patient Receives Each Treatment Arm



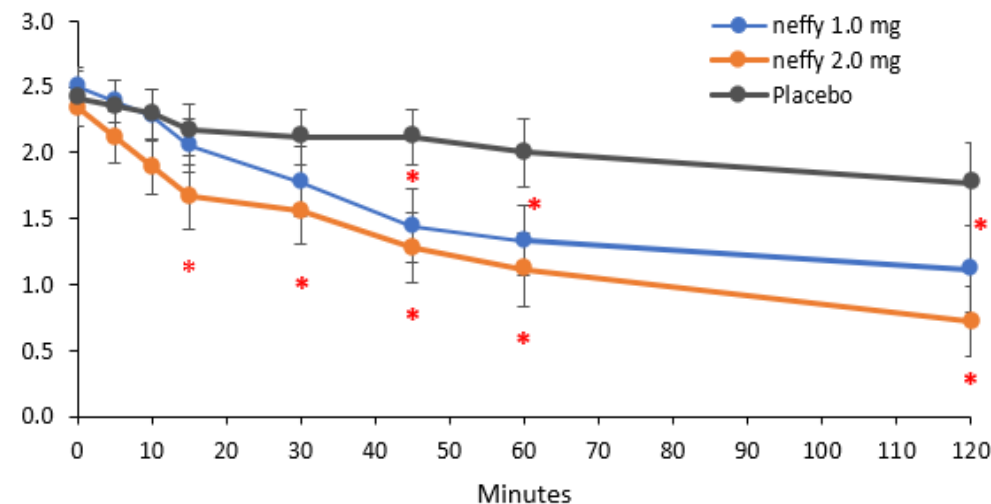
Window between the Periods: Average 12 days (range 2-88 days)

# PATIENT REPORTED PRURITUS, HIVE SEVERITY SCORE & VAS FOR PAIN (n=18)

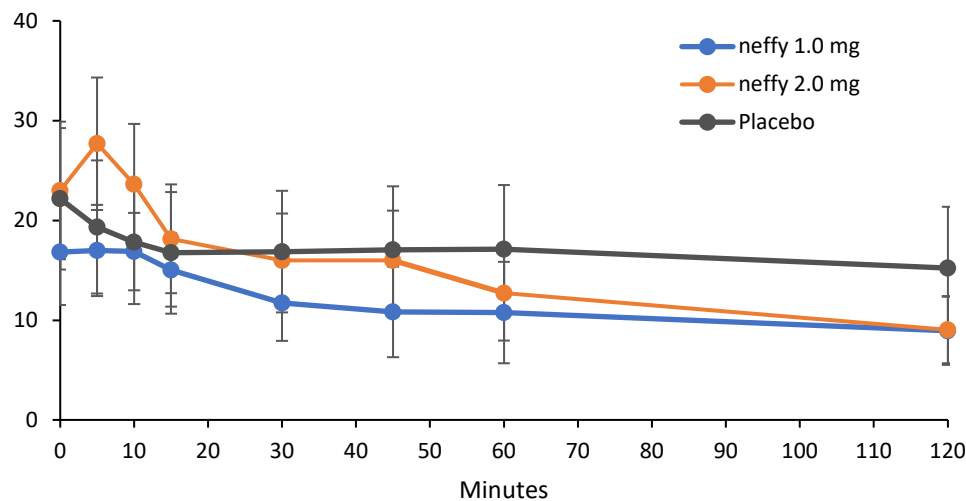
## Patient-Reported Itch Severity Score (Grade 0-3)



## Patient-Rated Hives Severity Score (Grade 0-3)



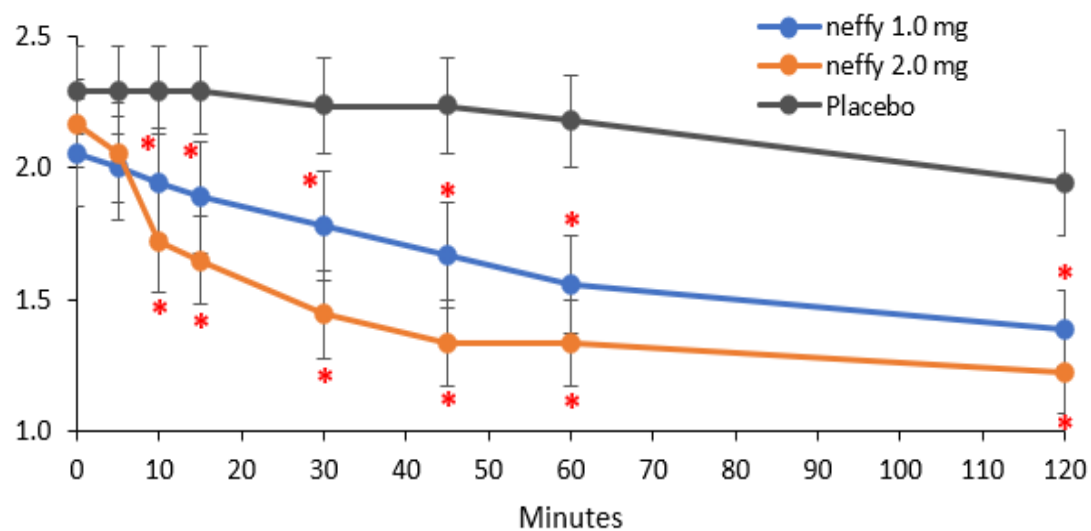
## Patient-Rated VAS for Pain (0-100)



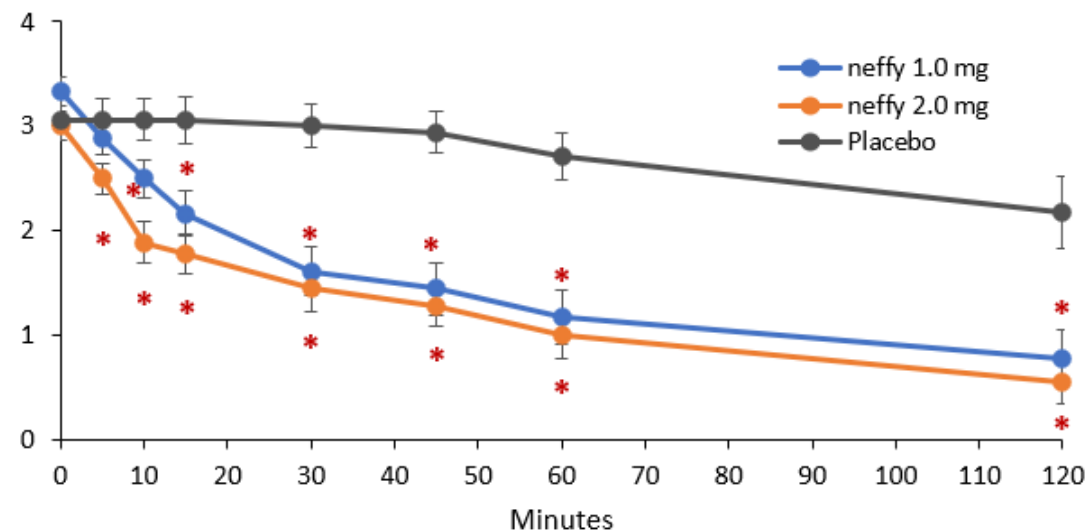
\* p<0.05 based on pair t-test of 1mg vs. placebo and 2 mg vs. placebo  
 Statistical Analysis based on n=17

# INVESTIGATOR-RATED EXTENT OF URTICARIA & ERYTHEMA SCORE

## Investigator-Rated Extent of Urticaria (Grade 1-3)



## Investigator-Rated Erythema Score (Grade 0-4)

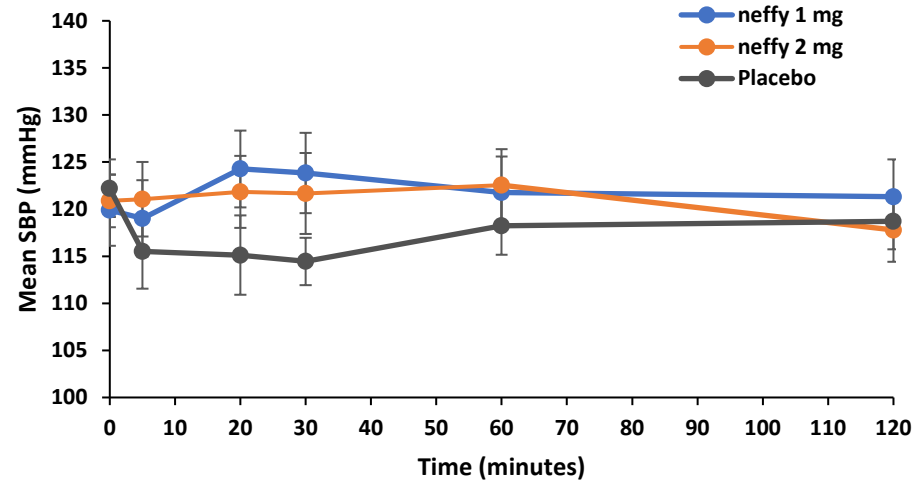


\* p < 0.05 based on pair t-test of 1mg vs. placebo and 2 mg vs. placebo  
Statistical Analysis based on n=17

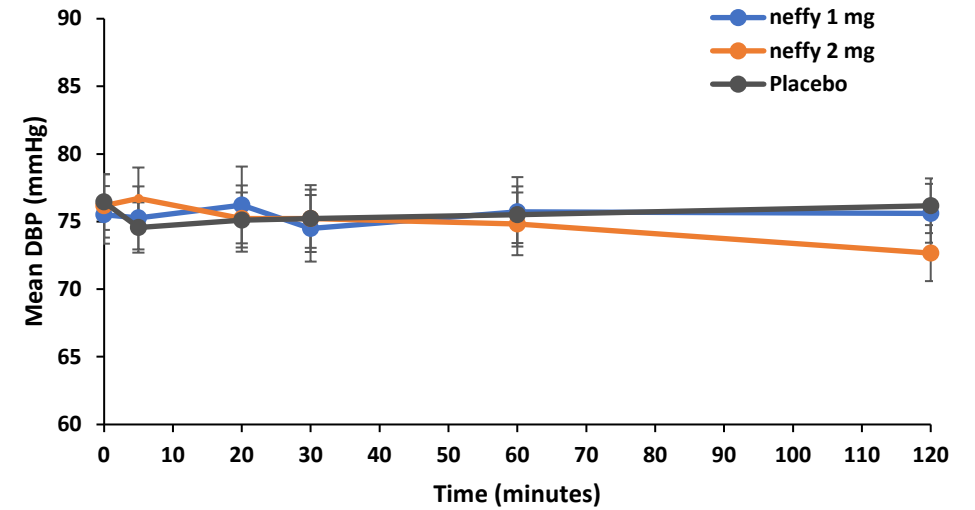
# PHARMACODYNAMICS



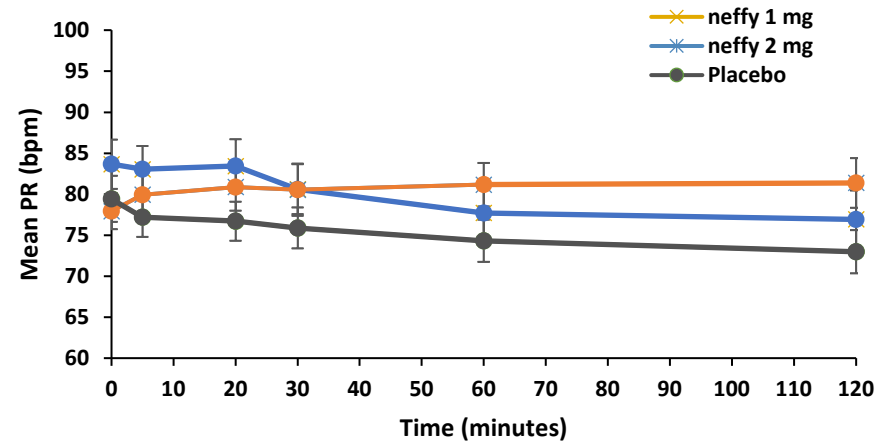
### Mean SBP vs Time



### Mean DBP vs Time



### Mean PR vs Time



# SAFETY

- All adverse events were graded mild or moderate.
- Adverse events were observed in 8 patients.
- The most common adverse event was nasal discomfort reported in 5 patients.
- No serious events were observed during the study.

# CONCLUSION

- Both 1.0 mg and 2.0 mg doses of *neffy* resulted in improvement starting at 5 minutes and persisting for 120 minutes post-dose; no changes were observed following the placebo spray.
- These results demonstrate that the needle-free, *neffy*, may be a safe and effective option for the treatment of urticaria exacerbations (flares).
- Given the similarities between the pathophysiology and clinical management of urticaria and anaphylaxis, these findings also support the effectiveness of low-dose intranasal epinephrine for treating severe allergic reactions, including anaphylaxis.