



# Overview of Moderna's COVID-19 Vaccine (mRNA-1273)

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### Outline of Presentation

- Brief review of :
  - mRNA platform
  - Preclinical studies
  - Phase 1 & 2 trials
- Phase 3 safety & efficacy trial
- Brief review of vaccine storage & handling
- Summary
- Q & A



### mRNA Platform

## A Known DNA (or RNA) Sequence Can Serve as the Basis for an mRNA Vaccine, Which is then Formulated with Lipid Nanoparticles (LNPs)





### mRNA-1273 encodes for the full-length Spike Protein in the Prefusion Conformation (S-2P)







### mRNA-1273 Preclinical & Clinical Programs

- Immunogenic
  - Drives robust SARS-CoV-2 specific antibody and Th1-directed CD4+ and CD8+ T-cell responses
- Nonclinical animal challenge studies demonstrate
  - Full protection of mice, hamsters and non-human primates from SARS-CoV-2
  - Does not lead to vaccine-associated enhanced respiratory disease
- No safety concerns identified in developmental and reproductive toxicology study (DART)

Studies were performed in young and aged mice, Golden Syrian Hamster, and rhesus macaque (NHP) animal models



# mRNA-1273 Full Development Program Supports the 100-µg Dose





### Summary of Studies 101 and 201 mRNA-1273 Immunogenicity Data

- Neutralizing antibody titers observed in all participants following 2<sup>nd</sup> dose
- GMTs across age strata numerically higher than in pool of convalescent sera
- Neutralizing antibodies persisted for at least 3 months after 2<sup>nd</sup> dose and remained numerically higher than convalescent sera
- Strong Th-1 dominant, CD4+ T-cell response observed
  - Consistent results with preclinical studies





## Study 301 – Large Scale Safety & Efficacy Trial

Study 301: Pivotal, Randomized, Placebo-Controlled Evaluation of Efficacy and Safety



### Study 301: Scheduled Visits and Safety Calls



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# Study 301 Primary Objective: Case Definition of Symptomatic COVID-19 Disease

- Symptoms
  - ≥ 2 systemic: fever, chills, myalgia, headache, sore throat, new olfactory and taste disorder(s)

### OR

 ≥ 1 respiratory: cough, shortness of breath / difficulty breathing, clinical or radiographical evidence of pneumonia

### AND

Confirmed SARS-CoV-2 infection via RT-PCR

Primary analysis: adjudicated cases occurring ≥ 14 days after dose 2



### Study 301 Key Secondary Objective: Case Definition of Severe COVID-19

- Confirmed COVID-19 as per the Primary Endpoint definition, plus <u>any one</u> of the following:
  - Clinical signs indicative of severe systemic illness, RR ≥ 30 per minute, HR ≥ 125 BPM, SpO<sub>2</sub> ≤ 93% on room air at sea level or PaO<sub>2</sub>/FIO<sub>2</sub> < 300 mm Hg</li>
  - Respiratory failure or ARDS, evidence of shock (SBP < 90 mm Hg, DBP < 60 mm Hg or requiring vasopressors)</li>
  - Significant acute renal, hepatic or neurologic dysfunction
  - Admission to ICU or death

RR: respiratory rate; HR: heart rate; BPM: beats per minute; SpO<sub>2</sub>: oxygen saturation; PaO<sub>2</sub>/FIO<sub>2</sub>: arterial oxygen partial pressure over fractional inspired oxygen; mm Hg: pressure measured by millimeters of mercury; ARDS: acute respiratory distress syndrome; SBP: systolic blood pressure; DBP: diastolic blood pressure; ICU: intensive care unit

### Study 301: Representation of Participants with Risk Factors Full Analysis Set

	mRNA-1273 N=15,181		Placebo N=15,170	
	n	%	n	%
Age and health risk for severe COVID-19				
18 to < 65 without comorbid conditions	8,888	59%	8,886	59%
18 to < 65 with comorbid conditions	2,530	17%	2,535	17%
≥ 65 with and without comorbid conditions	3,749	25%	3,749	25%

Comorbid conditions included chronic lung disease or moderate to severe asthma, significant cardiac disease, severe obesity, diabetes, liver disease, stable HIV infection

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### Race/Ethnicity Enrollment Distribution Compared to US Population Full Analysis Set

	Study 301 (N=30,351)	US Population
Race	%	%
White	79.2%	75.0%
Black or African American	10.2%	14.2%
Asian	4.6%	6.8%
More than one race	2.1%	3.4%
American Indian or Alaska Native	0.8%	1.7%
Hawaiian or other Pacific Islander	0.2%	0.4%
Other	2.1%	5.5%
Not reported or unknown	0.9%	0%
Ethnicity		
Hispanic or Latino	20.5%	18.4%



# Study 301: 23% of Participants Reported ≥ 1 Pre-Existing Medical Risk Factor

Full Analysis Set

	mRNA-1273 N=15,181		Plac N=1	ebo 5,170
Medical Risk Factor	n	%	n	%
Diabetes	1,435	9%	1,440	9%
Severe obesity (BMI >40 kg/m²)	1,025	7%	1,021	7%
Chronic lung disease	710	5%	744	5%
Significant cardiac disease	752	5%	744	5%
Liver disease	100	< 1%	96	< 1%
HIV	92	< 1%	87	< 1%

## Study 301: Participants with Occupational Risk Factors Under Consideration for Priority Vaccination

Full Analysis Set – Primary Efficacy Analysis

	mRNA-1273 N=15,181		Placebo N=15,170	
	n	%	n	%
Healthcare workers	3,790	25%	3,831	25%
Educators and students	1,543	10%	1,552	10%
Pastoral, social, or public health workers	533	4%	503	3%
Transportation and delivery services	482	3%	473	3%
Personal care and in-home services	469	3%	469	3%
Manufacturing and production operations	425	3%	421	3%
Emergency response	302	2%	297	2%
Warehouse shipping and fulfillment centers	191	1%	175	1%
Border protection and military personnel	69	0.5%	68	0.4%



### Study 301: Primary Efficacy Objective Met, VE Against Confirmed, Symptomatic COVID-19 Cases is > 94% Per Protocol

Confirmed, Symptomatic COVID-19 Cases	Primary Effica mRNA-1273 N=14,134	acy Analysis Placebo N=14,073		
Number of cases, n (%)	11 (< 0.1%)	185 (1.3%)		
Vaccine efficacy based on hazard ratio (95% CI)	94.1% (89.3%, 96.8%)			
p-value	< 0.0001			
Incidence rate per 1000 person-years	3.3	56.5		

### Study 301: Subgroup Analyses of Efficacy are Consistent with Primary Analysis Per Protocol – Primary Efficacy Analysis

	# Eve	nts / N		
Subgroup	mRNA-1273 N=14,134	Placebo N=14,073	Vaccine Efficacy (95% Cl)	Vaccine Efficacy (95% CI)
Overall	11 / 14,134	185 / 14,073	ю	<b>94.1%</b> (89.3%, 96.8%)
Age and risk				
18 to < 65 without <b>comorbidities</b>	5 / 8,396	121 / 8,403	н <mark>о</mark>	<b>95.9% (</b> 90.0%, 98.3%)
18 to < 65 with <b>comorbidities</b>	2 / 2,155	35 / 2,118	<b>⊢</b> H	<b>94.4% (</b> 76.9%, 98.7% <b>)</b>
≥ 65 with or without comorbidities	4 / 3,583	29 / 3,552		<b>86.4%</b> (61.4%, 95.2%)
65 to < 70 with or without <b>comorbidities</b>	4 / 2,953	22 / 2,864		<b>82.4%</b> (46.9%, 93.9%)
≥ 70 with or without comorbidities	0 / 630	7 / 688	$\bigcirc$	<b>100%</b> (NE, 100)
Sex				
Male	4 / 7,366	87 / 7,462	н	<b>95.4% (</b> 87.4%, 98.3%)
Female	7 / 6,768	98 / 6,611	<b>⊢○</b>	<b>93.1% (</b> 85.2%, 96.8%)
Participants with comorbidities (all ages)				
Yes	4 / 3,206	43 / 3,167	<u>н о</u> н	<b>90.9%</b> (74.7%, 96.7%)
No	7 / 10,928	142 / 10,906	н <mark>о</mark>	<b>95.1%</b> (89.6%, 97.7%)
Race and Ethnicity				
Non-Hispanic White	10 / 9,023	144 / 8,916	н <mark>о</mark>	<b>93.2%</b> (87.1%, 96.4%)
Communities of Color	1 / 5,088	41 / 5,132	<b>└──</b> ○	<b>97.5%</b> (82.2%, 99.7%)

### Study 301 Secondary Efficacy Endpoint: Cases of Confirmed Severe COVID-19 Per Protocol

	Primary Efficacy Analysis				
Confirmed, Severe COVID-19 Cases	mRNA-1273 N=14,134	Placebo N=14,073			
Number of cases, n (%)	0 (0%)	30 (0.2%)			
Vaccine efficacy based on hazard ratio (95% CI)	<b>100%</b> (NE, 100%)				
Incidence rate per 1000 person-years	0	9.1			
<ul> <li>One participant death due to COVID-19 in the placebo group</li> <li>Given the high efficacy against severe disease, no evidence for was observed</li> </ul>	vaccine-associated er	nhanced disease			

One potential case of severe disease was reported in the mRNA-1273 group after data cut-off for the primary efficacy analysis, this case has yet to be adjudicated.

**NE: not estimable** 



### Kaplan-Meier Estimates of Time to First Occurrence of COVID-19 Starting After Randomization

mITT – Interim Analysis



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### Study 301: Summary of COVID-19 Cases Within 6 Weeks After Randomization Based on CDC Case Definition<sup>1</sup> mITT Population – Interim Analysis

	mRNA-1273 N=14,550	Placebo N=14,598
	n	n
From randomization to 14 days post 1 <sup>st</sup> dose	5	11
From 14 days post 1 <sup>st</sup> dose to 2 <sup>nd</sup> dose	3	34
From 2 <sup>nd</sup> dose to 14 days post 2 <sup>nd</sup> dose	0	17
Total	8	62

Data suggest protection may begin prior to dose 2

<sup>1</sup> One clinical symptom from an expanded list and a nasopharyngeal swab positive for SARS-CoV-2 virus



# Study 301: Summary of Asymptomatic SARS-CoV-2 Infections as Measured by Scheduled NP Swabs Prior to 2<sup>nd</sup> Dose *Per Protocol – Primary Efficacy Analysis*

	mRNA-1273		Placebo	
	N=14,134		N=14,073	
RT-PCR NP Swab Results	n	%	Ν	%
No documented COVID-19 symptoms between 1 <sup>st</sup> dose and 2 <sup>nd</sup> dose	14	0.1%	38	0.3%

Data suggestive of efficacy for prevention of asymptomatic infection





### Study 301: mRNA-1273 100 µg Safety 9-Week Median Follow-up



### Solicited Adverse Reactions

Study 301 Safety Set (N=30,351)

# Study 301: Most Solicited Local Adverse Reactions Were Mild-to-Moderate (1st Injection)

Safety Set, 9-Week Median Follow-up



Note: Includes reports within 7 days of injection. \*Localized axillary swelling or tenderness ipsilateral to the vaccination arm.



### Study 301: Most Solicited Local Adverse Reactions Were Mild-to-Moderate (2nd Injection)

Safety Set, 9-Week Median Follow-up



Note: Includes reports within 7 days of injection. \*Localized axillary swelling or tenderness ipsilateral to the vaccination arm.



### Study 301: Most Solicited Systemic Adverse Reactions Were Mild-to-Moderate (1<sup>st</sup> Injection)

Safety Set, 9-Week Median Follow-up



Note: Solicited Systemic ARs include reports within 7 days of injection

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# Study 301: Most Solicited Systemic Adverse Reactions Were Mild-to-Moderate (2<sup>nd</sup> Injection)

Safety Set, 9-Week Median Follow-up



Note: Solicited Systemic ARs include reports within 7 days of injection

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## Study 301: Any Solicited Adverse Reaction by Baseline SARS-CoV-2 Status

Safety Set, 9-Week Median Follow-up



Missing baseline SARS-CoV-2 assessment for 288 mRNA-1273 and 235 Placebo participants



### Unsolicited Adverse Events

Study 301 Safety Set (N=30,351)

### Study 301: Summary of Unsolicited AEs Safety Set, 9-Week Median Follow-up

	mRNA-1273 N=15,185		Pla N=1	cebo 5,166
Unsolicited Adverse Events	n	%	n	%
Any Adverse Event	4,058	27%	3,888	26%
Any Medically-Attended Adverse Event (MAAE)	1,745	11%	1,958	13%
Any Serious Adverse Event (SAE)	147	1%	153	1%
Any death (reported through December 3, 2020)	6	< 0.1%	7	< 0.1%

### Study 301: Rates of Medically-Attended AEs Were Comparable Between Groups

Safety Set, 9-Week Median Follow-up



System Organ Class (SOC) occurring at rate > 0.6%

### Study 301: Rates of SAEs Were Comparable Between Groups Safety Set, 9-Week Median Follow-up



System Organ Class (SOC) occurring at rate > 0.05%



## Study 301: Deaths Through December 3, 2020

Preferred Term	mRNA- 1273 n=6	Placebo n=7	Relationship to Treatment
Abdominal injury (intra-abdominal perforation)	0	1	Not related
Cardio-respiratory arrest	1	1	Not related
Completed suicide	1	0	Not related
COVID-19	0	1	Not related
Head injury	1	0	Not related
Myocardial infarction	1	2	Not related
Multisystem organ failure	1	0	Not related
Not otherwise specified	1	1	Not related
Systemic inflammatory response syndrome (dermatitis bullous)	0	1	Not related

Investigations Unable to Identify Cases Suggestive of Anaphylaxis Associated with mRNA-1273

- No participants excluded for history of anaphylaxis, urticaria, or other significant hypersensitivity
- 2 anaphylactic reactions reported as unsolicited AEs
  - 1 placebo occurring 10 days after 1<sup>st</sup> dose
  - 1 mRNA-1273 occurring 63 days after 2<sup>nd</sup> dose
- Conducted anaphylaxis Standardized MedDRA Query (SMQ), including review of events within 48 hours
  - 0 met Brighton Collaboration Anaphylaxis Case Definition



### Moderna Committed to Collecting Additional Data in a Broader Range of Patients

- Pediatric studies ongoing
- National Cancer Institute collaboration
- Post-authorization active surveillance and safety study
- Global pregnancy registry under development
- Post-authorization effectiveness study

Moderna will continue to collaborate with NIH, FDA, CDC and other agencies





### Vaccine Storage & Handling

### mRNA-1273 Shipping, Storage and Administration



Able to ship a single carton (100 doses)



Administration



Multiple-dose vial

Use within 6 hours after first entry

No dilution required

Local transportation under controlled condition at 2 to 8°C



# Summary: mRNA-1273 Offers Potential to Address the Public Health Crisis of COVID-19

- Efficacy
  - 94.1% efficacy demonstrated in primary analysis on 196 cases
  - Primary efficacy hypothesis was met
    - o Lower limit of 95% CI was 89.3%, exceeding pre-specified 30% margin
  - Reduced severe COVID-19 disease
    - o 0 vs 30 cases in vaccine and placebo groups, respectively
  - Other secondary, sensitivity and subgroup analyses support primary efficacy analysis results
- Safety
  - Acceptable tolerability profile was observed with >96% of subjects having received second dose
    - More solicited events were reported after the second dose
    - Majority of reported solicited adverse events were mild-to-moderate in severity and short-lived in duration
  - Overall safety profile is clinically acceptable
- Vaccine has the potential to address the SARS-CoV-2 pandemic and has been authorized for Emergency Use



### Thank you to our collaborators, investigators and subjects

#### P101

- Division of Microbiology and Infectious Diseases, NIAID
- Vaccine Research Center (VRC), NIAID
- Coalition for Epidemic Preparedness
   Innovation
- Principal Investigators, Drs. Lisa Jackson (Kaiser Permanente Washington), Evan Anderson (Emory University School of Medicine), Nadine Rouphael (Emory University School of Medicine), Alicia Widge (VRC)
- The Emmes Company
- Denison Lab, Vanderbilt University
- Baric Lab, University of North Carolina
- Suthar Lab, Emory University
- Vaccine Immunology Program, NIAID
- Study sites, investigators and subjects

#### P201

- BARDA
- Study sites, investigators, and subjects

### COVE Study (P301)

- BARDA
- Operation Warp Speed
- NIAID and the COVID-19 Prevention Network
- Members of Diversity and Inclusion Panel
- Principal Investigators, Drs. Brandon Essink (Meridian Clinical Research), Lindsey Baden (Brigham and Women's Hospital), Hana El Sahly (Baylor College of Medicine)
- Study sites, investigators, and subjects