RESULTS FROM RESOLVE, AN ONGOING PHASE 1B/2A STUDY OF EP-104GI (LONG-ACTING FLUTICASONE PROPIONATE INJECTABLE SUSPENSION) FOR EOSINOPHILIC ESOPHAGITIS: DOSE ESCALATION COHORTS 3 THROUGH 6

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EP-104GI, a long-acting injectable fluticasone propionate suspension, demonstrated dose-dependent improvements in histology and symptoms in a Phase 1b/2a open-label dose-escalation study of adults with active eosinophilic esophagitis.

KEY POINTS

- At the highest dose tested (64 mg total; Cohort 6), all three participants showed 59-91% reduction in peak eosinophil count by Week 12, with 62% of biopsy sites achieving histological remission (≤6 eosinophils per high-power field).
- Histology scores and patient-reported dysphagia symptoms improved progressively with increasing dose; in Cohort 6, mean reductions at Week 12 were 65-66% for EoEHSS grade and stage and 47% for the Straumann Dysphagia Index.
- Treatment-emergent adverse events were mild to moderate and mostly judged unlikely related to EP-104GI; serum glucose and cortisol remained stable with no candidiasis or adrenal suppression observed.
- EP-104GI is injected at multiple esophageal sites and releases fluticasone propionate at a pre-defined rate via diffusion, maintaining stable low plasma levels after an initial peak.
- This material is relevant to gastroenterologists and researchers interested in novel therapeutic approaches for eosinophilic esophagitis, particularly locally delivered corticosteroid formulations.

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