



Boston Obesity Course

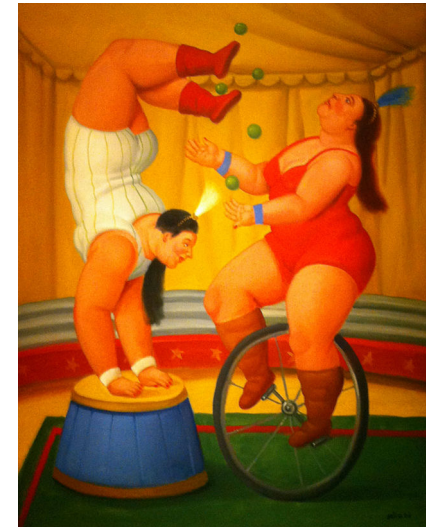
Emerging Nutrient-stimulated Hormone Receptor Dual and Tri-agonists

Lee M. Kaplan, MD, PhD

The Obesity and Metabolism Institute
Boston, Massachusetts

LMKaplan0@gmail.com

17 May 2023



Fernando Botero, 1932-

What Matters to Patients: Metabolic Health Beyond Weight Loss

Disclosures

I am currently or have recently been a paid consultant to the following companies and organizations:

Altimune

Amgen

Boehringer Ingelheim

Gelesis

Gilead Sciences

Eli Lilly & Company

Novo Nordisk

Pfizer

Rhythm Pharmaceuticals

Sidekick Health

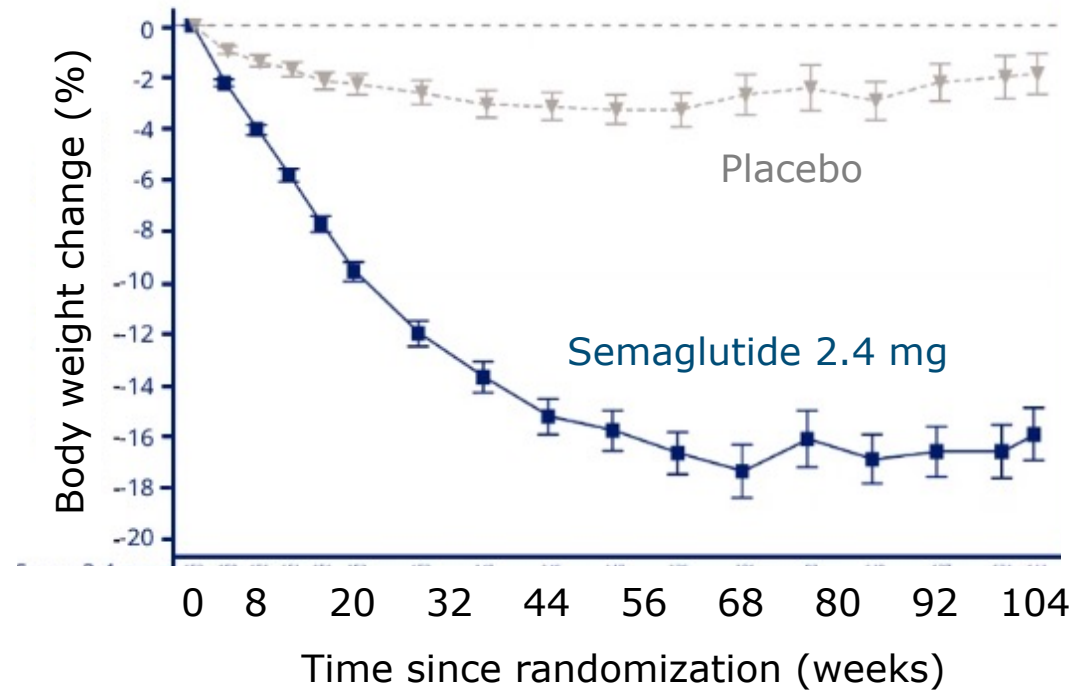
The Obesity and Nutrition Institute

twenty30.health

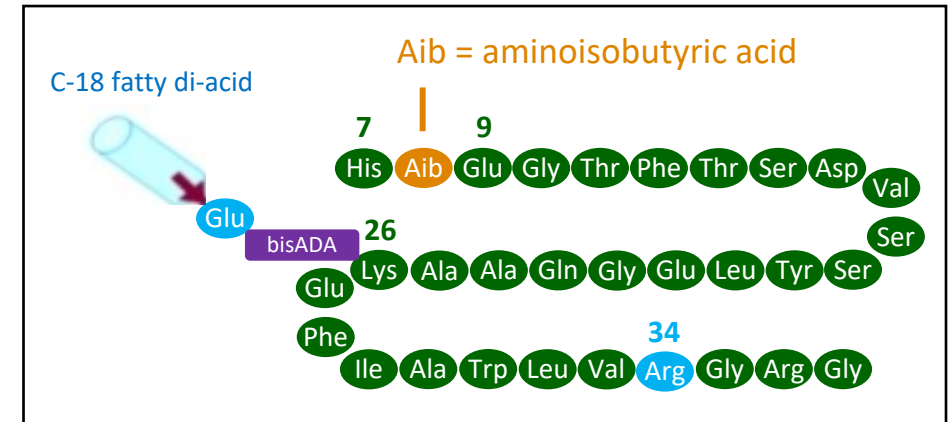
Xeno Biosciences

Semaglutide induces profound, sustained weight loss

STEP 5 Trial Subjects without diabetes

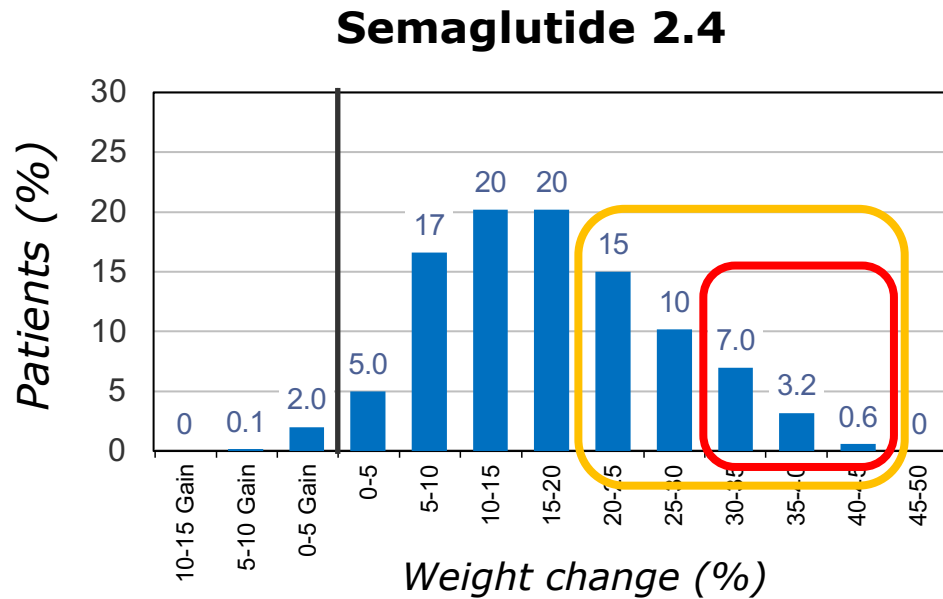


Lessons of semaglutide



- GLP-1 receptor activity may not be necessary to prevent obesity, but it is **sufficient to overcome** the pathophysiological lesions of many types of obesity
- Despite the complexity of body fat regulation, there is at least one mechanism (GLP-1 signaling) that can substantially **re-regulate the whole system**

Implications of profound weight loss with semaglutide 2.4



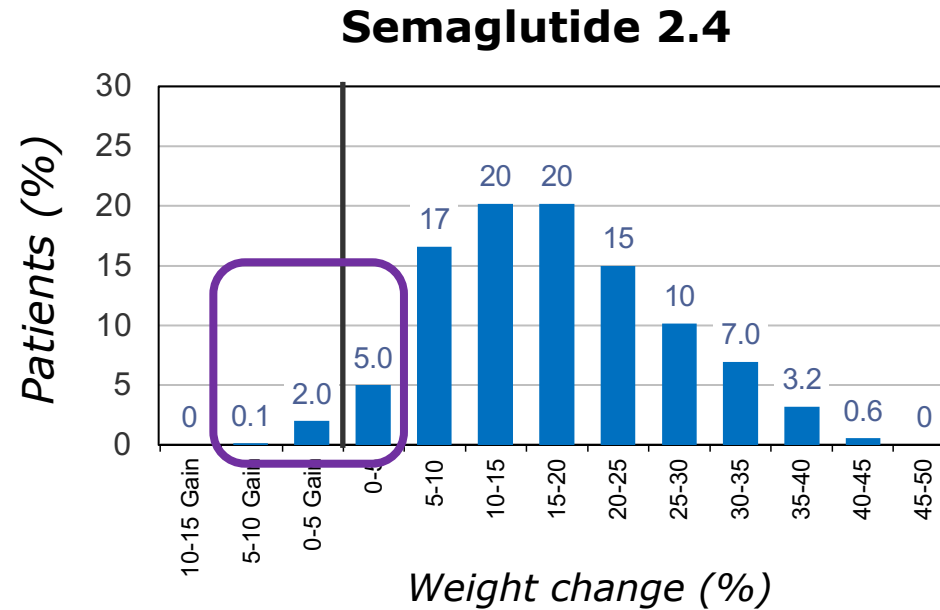
35% of patients lose more than 20% body weight

11% of patients lose more than 30% body weight

Adapted from Wilding JPH *et al.*, *NEJM* 2021
STEP 1 Obesity Trial

Implications of variable responses to semaglutide 2.4

7-13% of patients lose less than 5% body weight (31% if have T2D)



Adapted from Wilding JPH *et al.*, *NEJM* 2021 STEP 1 Obesity Trial

Is GLP-1 a unicorn?



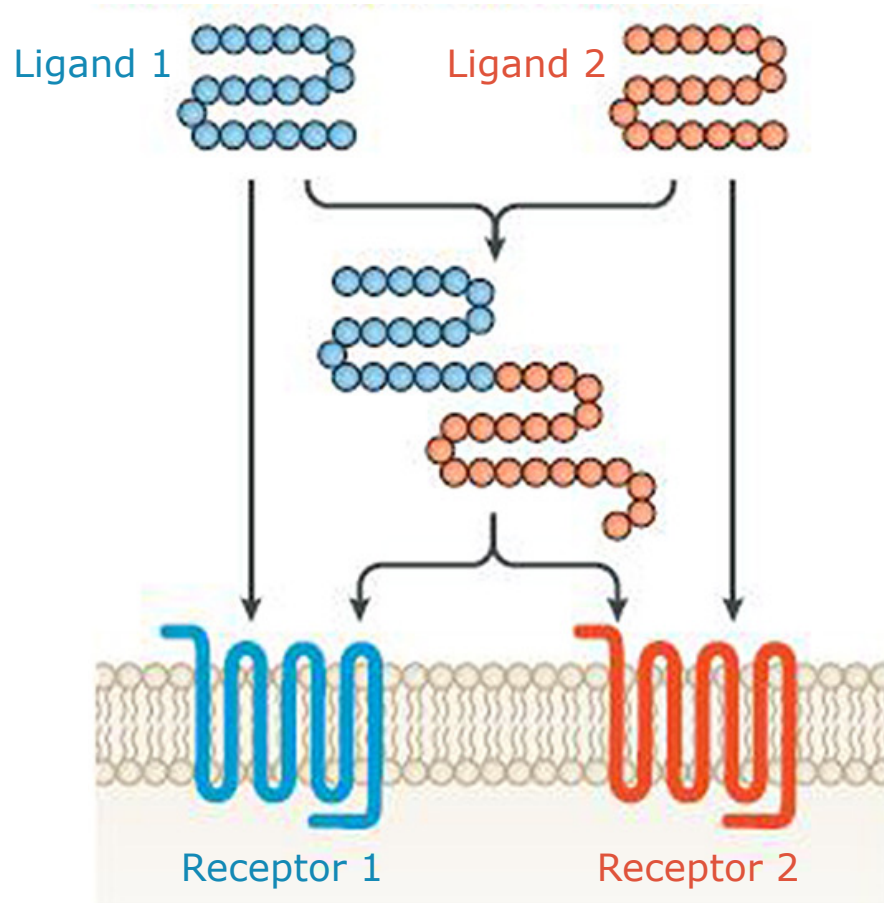
- Are there mechanisms other than GLP-1 that can exert **widespread, beneficial influence** on fat mass regulation?
- Identifying other mechanisms **sufficient to normalize body fat regulation** will determine future opportunities in managing and preventing obesity

Potential complements to GLP-1 receptor agonists

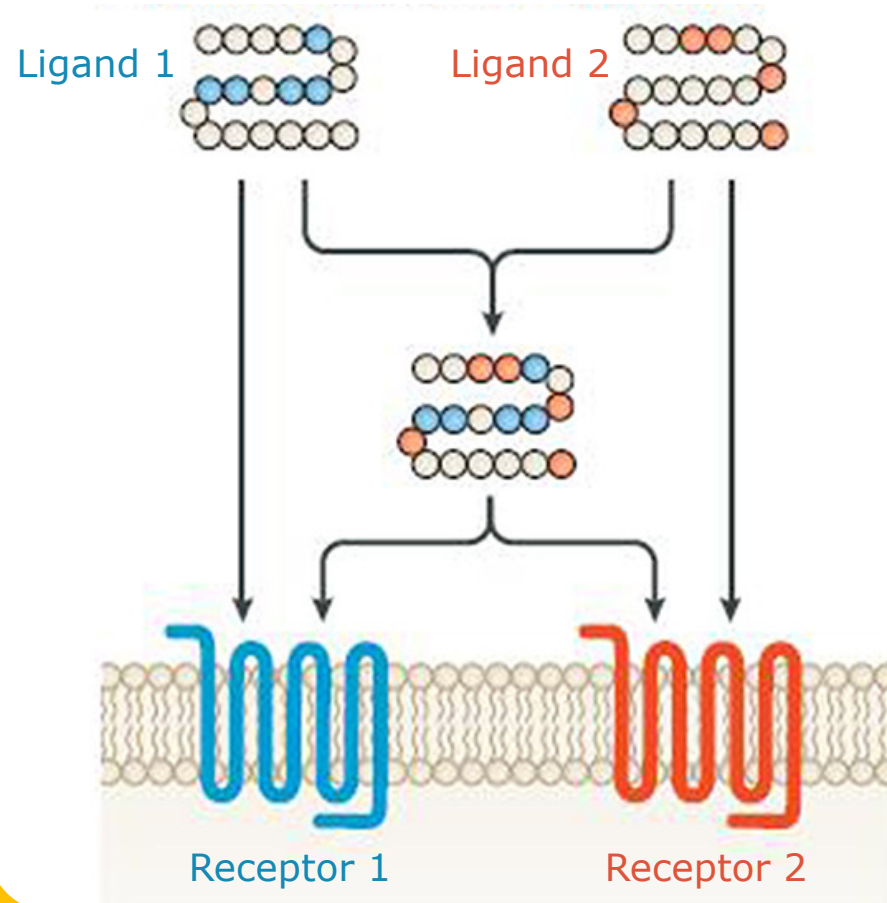
- **GIP** – like GLP-1, an incretin secreted from gut enteroendocrine cells
 - reduces food intake, delays gastric emptying, increases meal-stimulated insulin secretion, and inhibits glucagon secretion
 - decreases body weight in some studies, but effect debated
- **Anti-GIP receptor antibodies** – GIP receptor antagonist
- **Amylin** – co-secreted with insulin by pancreatic β -cells
 - promotes satiety and weight loss; slows gastric emptying; inhibits meal-induced glucagon secretion
- **Glucagon** – part of peptide precursor of GLP-1, GLP-2, oxyntomodulin; secreted by pancreatic α -cells
 - promotes decreased food intake, weight loss, hyperglycemia
- **Oxyntomodulin** – activates both GLP-1 and glucagon receptors
- **PYY** – gut peptide secreted from gut enteroendocrine cells; promotes weight loss

Design of dual agonists

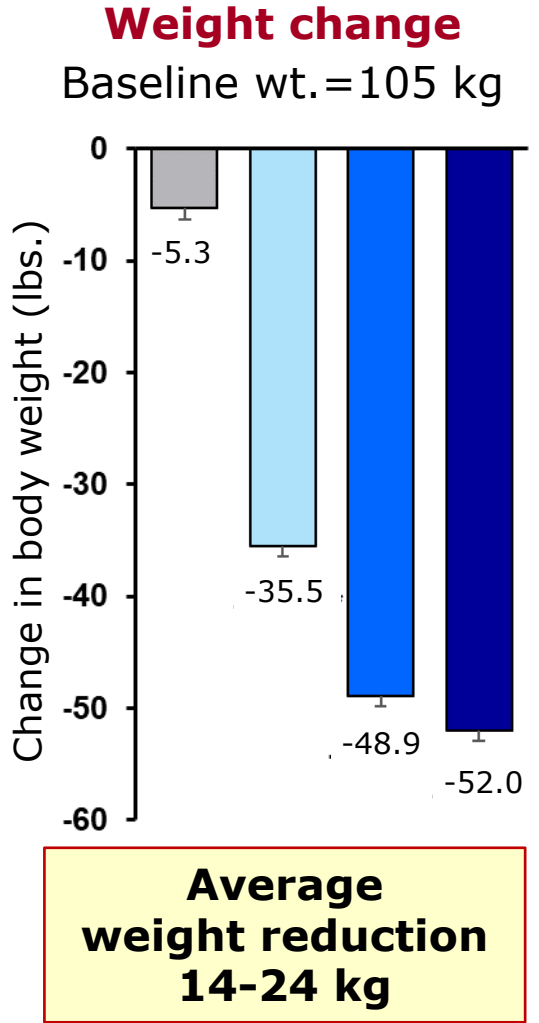
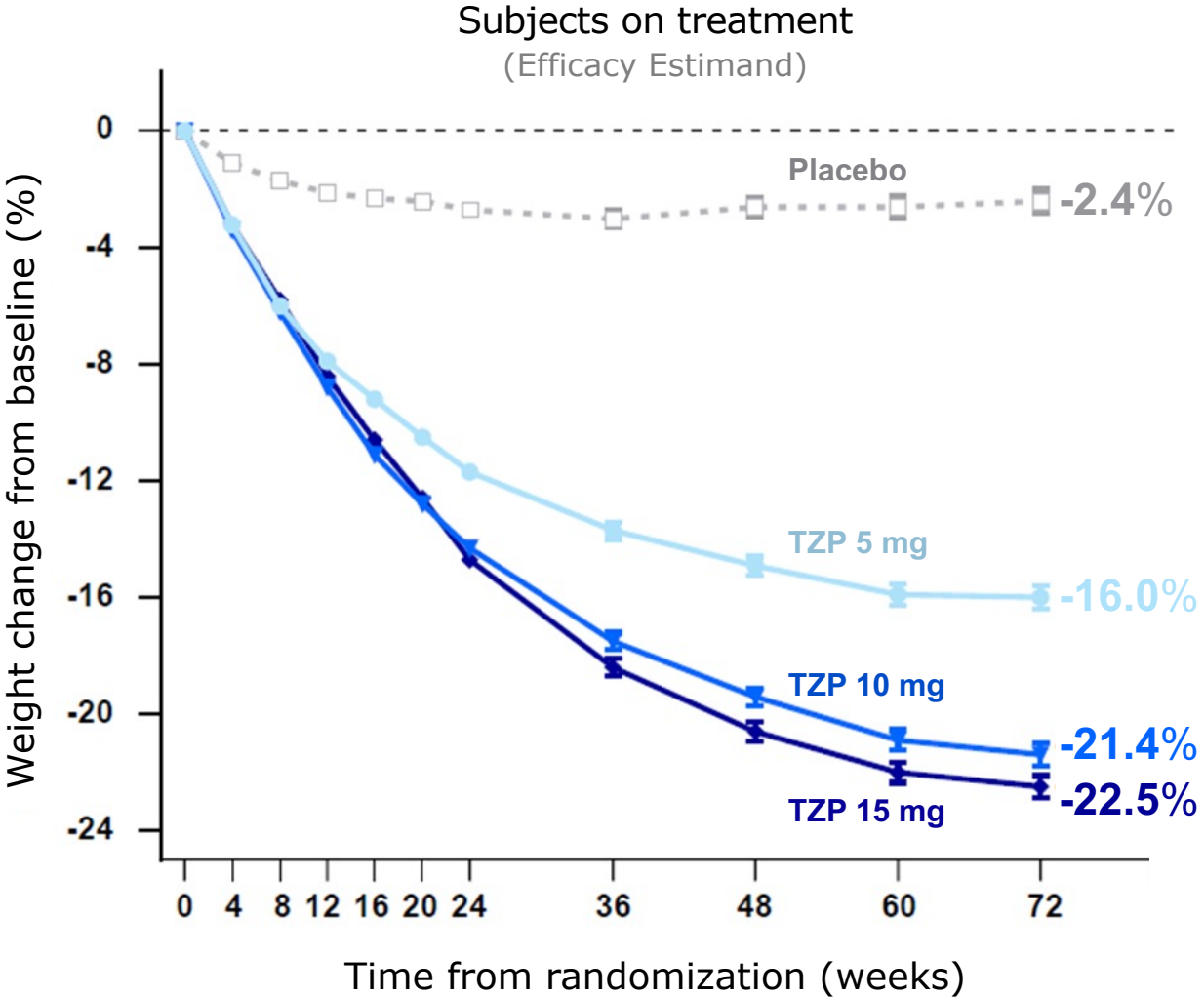
Peptide fusion



Peptide chimera



Weight reduction on tirzepatide* – subjects without diabetes



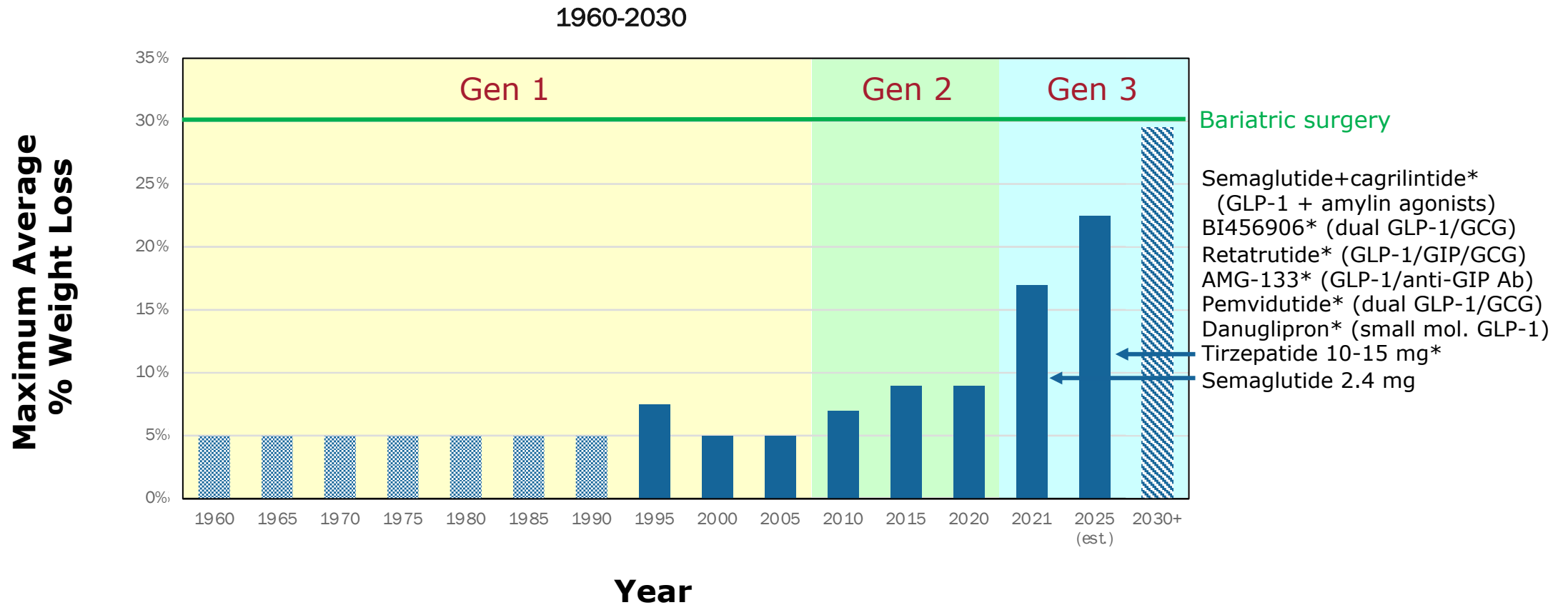
Jastreboff AM et al., NEJM 2022

*Tirzepatide is not approved for the treatment of obesity

Dual agonists

- Designer molecules that activate two receptors
- Effective when there is a benefit to activating both receptors in the same cell
- Because of the success of GLP-1 agonists for the treatment of diabetes, obesity and NASH, GLP-1 agonism is the most common component of dual agonists
- The existence of **oxyntomodulin**, a **natural GLP-1/glucagon receptor dual agonist that promotes weight loss**, makes this combination an attractive mechanism

The 3rd generation of AOMs includes dual and triple agonists



*This medication is not approved for the treatment of obesity



Boston Obesity Course

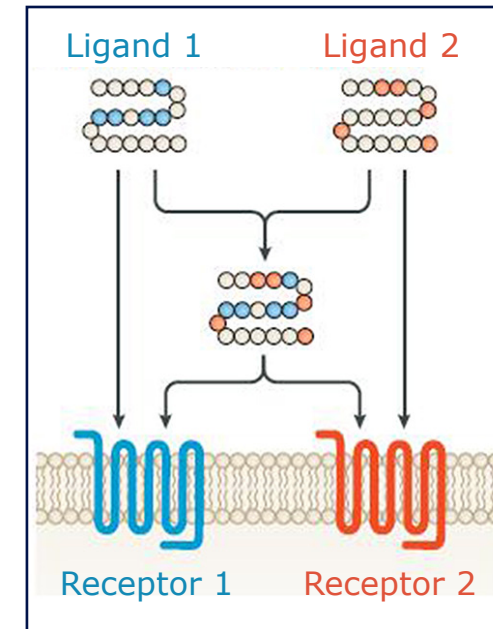
Emerging Nutrient-stimulated Hormone Receptor Dual and Tri-agonists

Lee M. Kaplan, MD, PhD

The Obesity and Metabolism Institute
Boston, Massachusetts

LMKaplan0@gmail.com

17 May 2023



What Matters to Patients: Metabolic Health Beyond Weight Loss