

Plain Language Study Summary



SRP-9004-102 (DISCOVERY): A study to evaluate the safety, tolerability, and efficacy of SRP-9004 administered by systemic infusion in limb girdle muscular dystrophy Type 2D/R3 participants in the United States

Sarepta would like to thank the study participants and their families for taking part in this study.

This study was discontinued earlier than originally planned. Because the study ended early, the data were not able to be fully analyzed in the way that was initially planned.

Sarepta created this summary to share with the participants, their family members, and the general public. The goals of this summary are to help explain why and how the study was done and to share what researchers learned from the study participants. Sarepta hopes this helps people understand the important role that the study participants played in helping researchers find better ways to treat limb girdle muscular dystrophy, Type 2D/R3.

If you have questions about this summary, please feel free to email Sarepta (advocacy@sarepta.com) or, if you were a participant, you may talk to your study doctor.

What are limb girdle muscular dystrophies?

Limb girdle muscular dystrophies, or **LGMDs** for short, are a group of rare diseases that affect the muscles. LGMDs are caused by **genetic mutations**. These genetic mutations cause errors in the instructions our bodies have for making proteins that are important for muscle health. Without these proteins, people with LGMD have muscle loss and weakness that get worse with time.

One type of LGMD is called **LGMD Type 2D/R3**, or

LGMD2D/R3 for short. People with LGMD2D/R3 have a genetic mutation that prevents them from making a protein called alpha-sarcoglycan. **Alpha-sarcoglycan** helps protect muscles from damage during everyday use.

What are genetic mutations?

Genes are like tiny instruction manuals contained in the body's cells. Genes tell the cells how to make different kinds of proteins. Proteins play lots of different roles in keeping the body healthy and strong. If someone has a genetic mutation, it means there is a problem with the instructions for making a protein.

Why was this study done?

This study was done to learn about a possible treatment for LGMD2D/R3 called **patidistrogene bexoparvovec** (also known as **SRP-9004**). It is given as a one-time **intravenous (IV) infusion** (through a needle in the vein).

Each infusion of patidistrogene bexoparvovec contains many copies of a gene that has instructions for how to make alpha-sarcoglycan. Each copy of the gene is delivered using a special carrier called a **vector**. The vector, which is called **rAAVrh74**, acts like a delivery vehicle that helps get the gene to the right place in the body's cells. Once the new gene is inside the cell, the body can use it as an instruction manual to help make alpha-sarcoglycan.

Who took part?

This study included 4 people with LGMD2D/R3 (2 males and 2 females). There were 3 participants who were **ambulatory** (able to walk without assistance) and 1 participant who was not ambulatory. The ages of the participants ranged from 11 to 51 years old. All of the participants were from the United States.

What was the study plan?

Everyone who joined the study received 1 dose of patidistrogene bexoparvovec. The participants also took a type of medication called a **steroid**. Participants took a steroid orally (by mouth), starting the day before treatment with patidistrogene bexoparvovec and for about 2 months afterward.

Why did participants take a steroid?

Some gene therapies can trigger an unwanted immune system response. Steroids are sometimes given with gene therapies like patidistrogene bexoparvovec because they can help prevent this unwanted immune response.

After treatment, the participants were initially asked to stay in the study for up to 5 years so that the study team could keep track of their long-term health outcomes.

The participants in the study also agreed to have up to 3 muscle **biopsies**, including one before treatment, a second about 2 months after treatment, and a third about 2 years after treatment. (Many of these biopsies did not occur because the study ended early.)

This study started in January 2025. The decision was made to end the study early in July 2025. The last participant visit occurred in June 2025.

What are biopsies?

A biopsy is a procedure in which doctors collect a small amount of tissue. In this study, doctors collected samples of muscle tissue before and after treatment with patidistrogene bexoparvovec. This let them measure how alpha-sarcoglycan levels changed in the participants' muscle cells after treatment.

What were the main goals of the study?

The main goal of this study was to learn about the safety of patidistrogene bexoparvovec as a possible treatment for LGMD2D/R3. When researchers study the safety of a new treatment, they look at any new or worsening medical events that participants have after they receive the treatment, including possible side effects.

Other (secondary) goals of the study included learning about the effects of patidistrogene bexoparvovec on:

- Alpha-sarcoglycan levels in muscle cells
- Physical function
- Levels of an enzyme called **creatine kinase**, or **CK** for short (high levels of CK in the blood may be a sign of muscle damage – people with LGMD often have high levels of CK)
- Important stages in the progression of LGMD2D/R3, such as losing the ability to walk without assistance
- Muscle volume and overall muscle health
- Lung function

How has this study helped?

Even though this study ended early, the participants helped doctors, researchers, and health authorities learn more about patidistrogene bexoparvovec as a possible treatment for LGMD2D/R3. From the participants in this study, we learned:

- All 4 participants had side effects of treatment (new or worsening medical events that happened during the study that study doctors thought might be related to the study treatment). Most side effects were not serious and were mild or moderate.
 - 2 participants had a serious side effect. Both of these serious side effects were related to liver problems. One of these side effects was fatal.
 - Non-serious side effects included less severe liver problems, as well as nausea and fatigue.
- At 2 months after treatment, alpha-sarcoglycan levels had increased (as seen in biopsies), particularly among the 3 ambulatory participants.
- At 3 months after treatment, CK levels had decreased in the 3 participants who had available measurements (all 3 ambulatory participants).

Some side effects are considered “serious”. Examples of **serious side effects** are those that are life threatening, need hospital care for treatment, or cause long-term medical complications or death.

These findings were shared with the medical community at a recent scientific conference.

Where can I learn more about this study?

You can find more information about this study on the website listed below.

ClinicalTrials.gov: <http://www.clinicaltrials.gov> → On this website, type **NCT06747273** into one of the search boxes and click “Search”.

Full study title: A Phase 1b, Multicenter, Single Dose Gene Transfer Study to Evaluate the Safety, Tolerability, and Efficacy of SRP-9004 Administered by Systemic Infusion in Limb Girdle Muscular Dystrophy Type 2D/R3 Subjects in the United States (DISCOVERY)

Protocol number: SRP-9004-102

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Thank you!

Sarepta is grateful for the participants who helped make this study happen. Clinical study participants help researchers and health authorities find answers to important health questions and discover new treatments for disease.