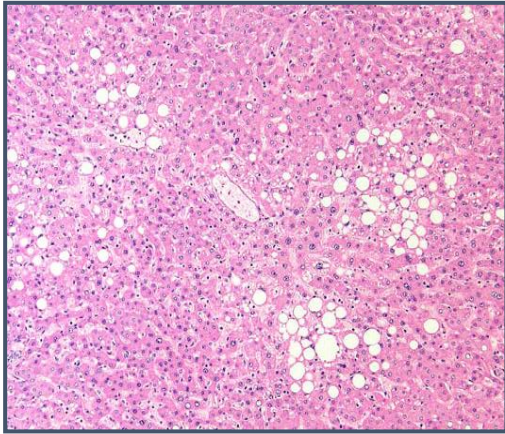




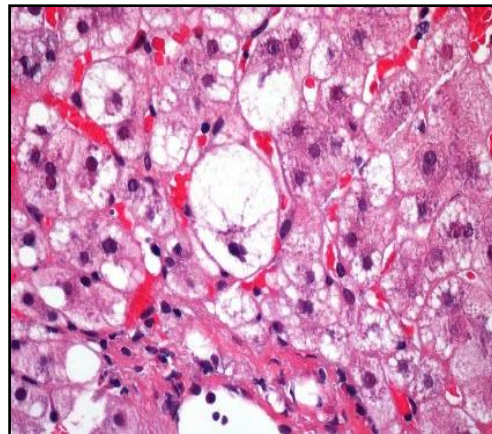
# Using Digital Pathology to untangle assessment of fibrosis change in clinical trials of NASH



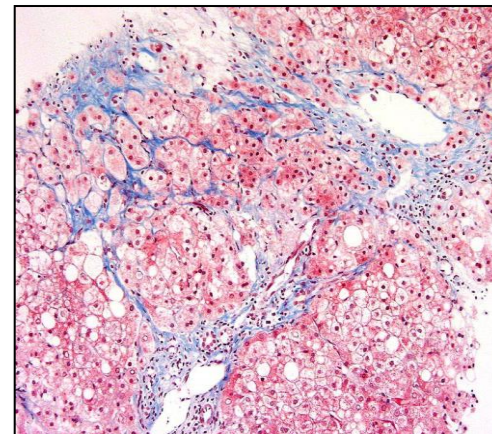
NAFL



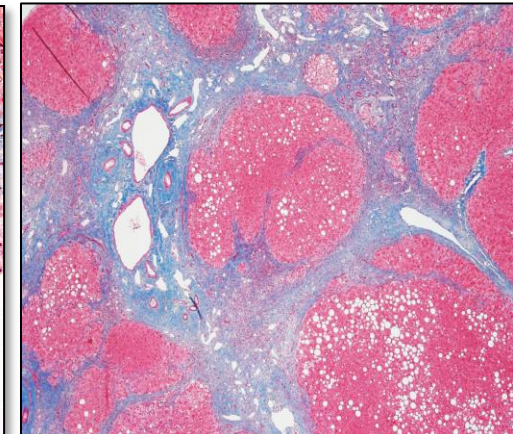
NASH



NASH with fibrosis



NASH Cirrhosis



**Arun J. Sanyal** MBBS, MD

Z Reno Vlahcevic Professor of Medicine

Virginia Commonwealth University School of Medicine

Richmond, VA

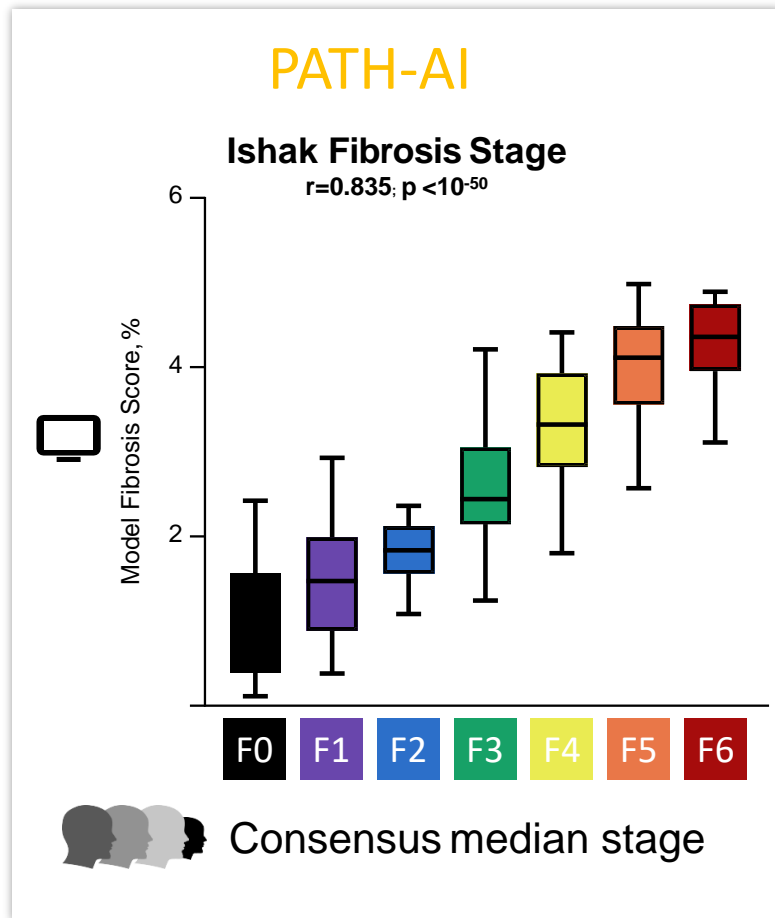
# Disclosures

## **[Arun J. Sanyal]**

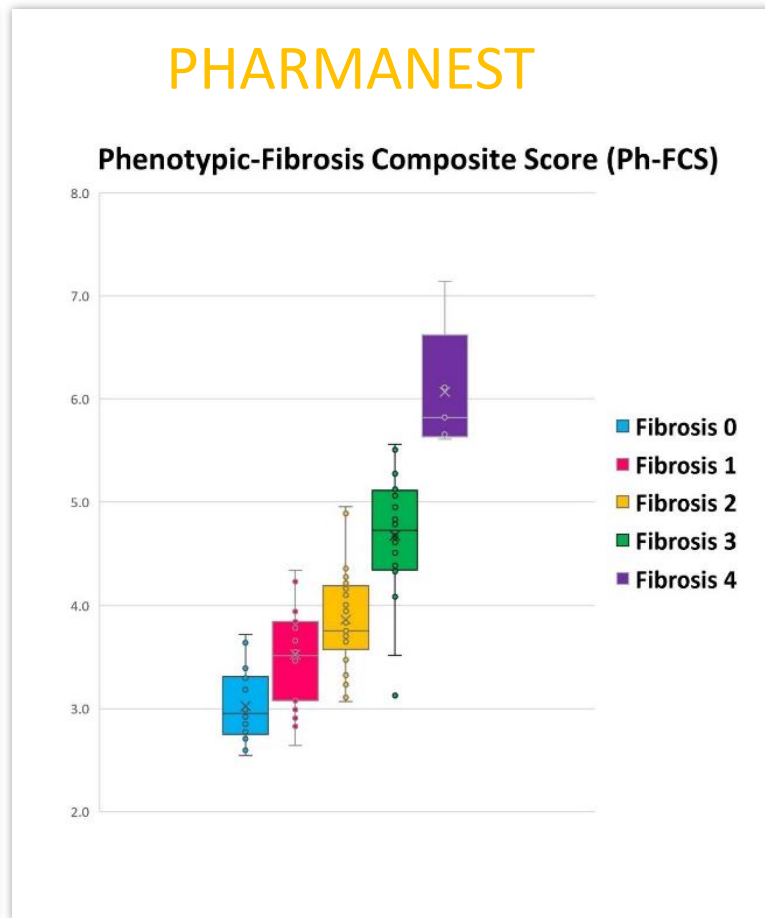
I disclose the following financial relationship(s) with a commercial interest:

- Ownership interests: Sanyal Bio, Durect, Tiziana, Genfit, Exhalenz
- Consultant: Gilead, Intercept, Novartis, Novo Nordisk, Inventiva, Merck, Pfizer, Boehringer Ingelhiem, Bristol Myers Squibb, Eli Lilly, Genentech, Amgen, Alnylam, Regeneron, Thera Technologies, Madrigal, Salix, Malinckrodt, Gatehouse, Rivus, Siemens, Lipocine
- Grant support to school: Gilead, Intercept, Novartis, Novo Nordisk, Inventiva, Eli Lilly, Genentech, Boehringer Ingelhiem, Bristol Myers Squibb

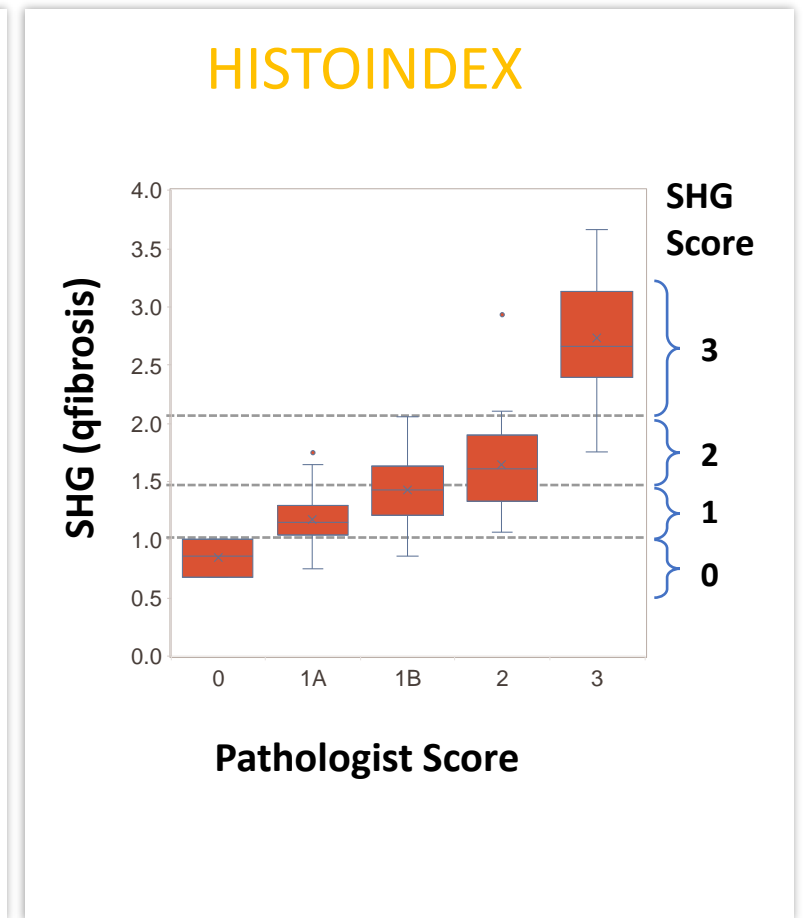
# Machine learned tools can evaluate fibrosis with relative precision



Younossi et al., AASLD 2019



Chen et al., AASLD 2019



Harrison et al., AASLD 2018

# Application of digital pathology to assess changes in fibrosis in NASH trials

- Gaining certainty about the reproducibility of the histological analysis
- Phase 2B and 3- assessment of fibrosis trajectory within the time-frame of such trials

# Machine learned algorithms may increase robustness of histological grading and staging

Kappa statistic (95% CI, bootstrap)\*

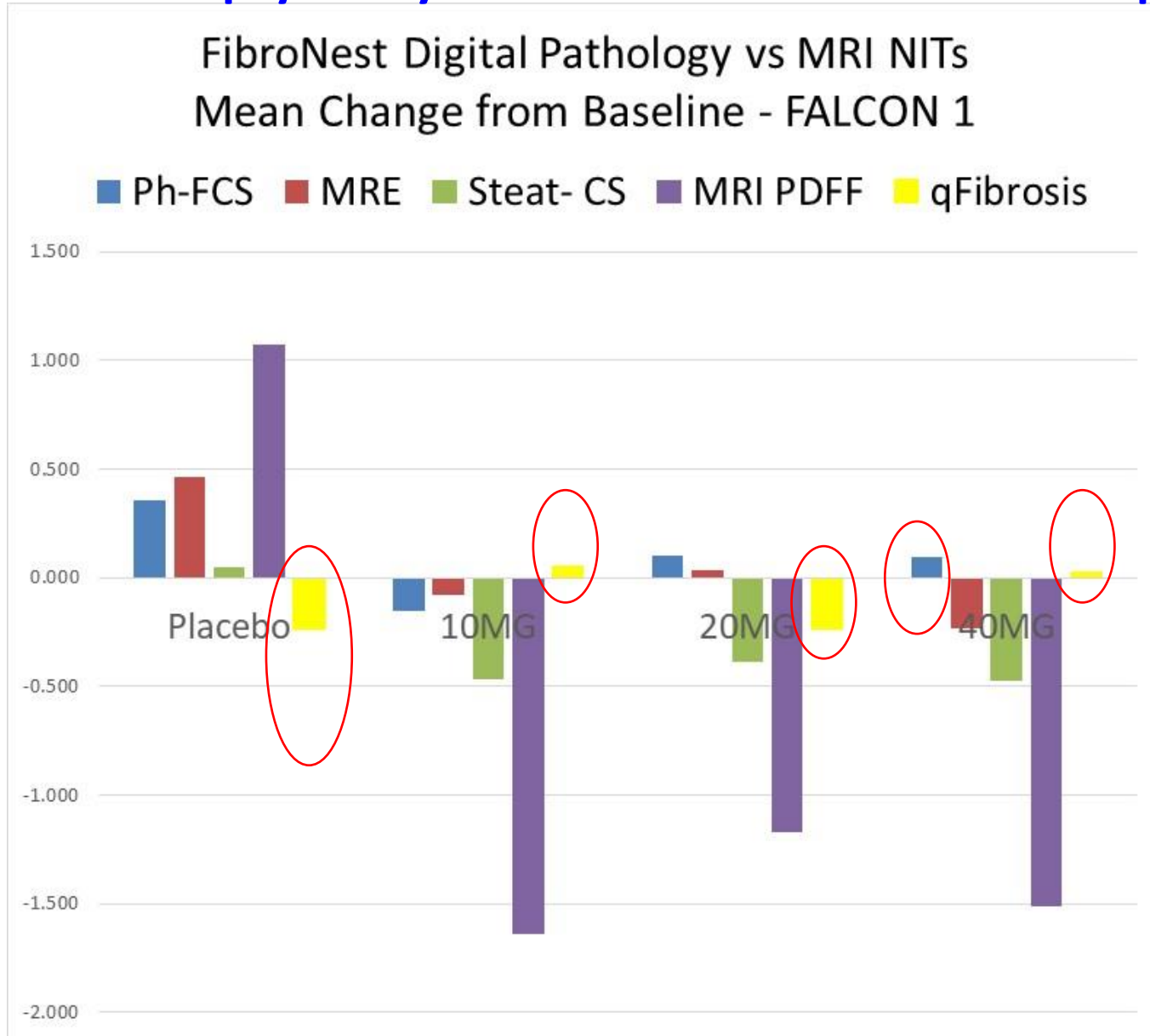
| Histologic feature   | Kappa statistic (95% CI, bootstrap)* |                           |
|----------------------|--------------------------------------|---------------------------|
|                      | ML vs consensus                      | Mean pairwise pathologist |
| Lobular inflammation | 0.50 (0.45, 0.55)                    | 0.33 (0.29, 0.37)         |
| Ballooning           | 0.58 (0.53, 0.63)                    | 0.48 (0.44, 0.52)         |
| Steatosis            | 0.71 (0.67, 0.74)                    | 0.60 (0.56, 0.63)         |
| Fibrosis             | 0.58 (0.54, 0.62)                    | 0.50 (0.47, 0.53)         |

- Pilot analytic validation data using 631 biopsies from a phase 2 clinical trial, read by ML models and 3 expert hepatopathologists
- Agreement of ML with consensus reads was superior to agreement amongst pathologists
- \* Linearly weighted kappa statistic. Unpublished data (kindly provided by Path-AI).

# AI-assisted reads can improve intra and interobserver variability

|                | Liver Fibrosis Scoring       | Unassisted Read | Assisted Read |
|----------------|------------------------------|-----------------|---------------|
| Inter-Observer | Mean Percentage Agreement    | 89.37%          | 92.92%        |
|                | Mean Linearly Weighted Kappa | 0.72            | 0.82          |
| Intra-observer | Mean Percentage Agreement    | 92.08%          | 96.46%        |
|                | Mean Linearly Weighted Kappa | 0.79            | 0.91          |

# Paired Biopsy Study Results – MRI vs FibroNest vs qFibrosis



FibroNest Digital Pathology scores for fibrosis and steatosis correlated with MRI non invasive Tests and establish similar drug effect detection performance

# Assessment of the multidimensional evolution of fibrosis

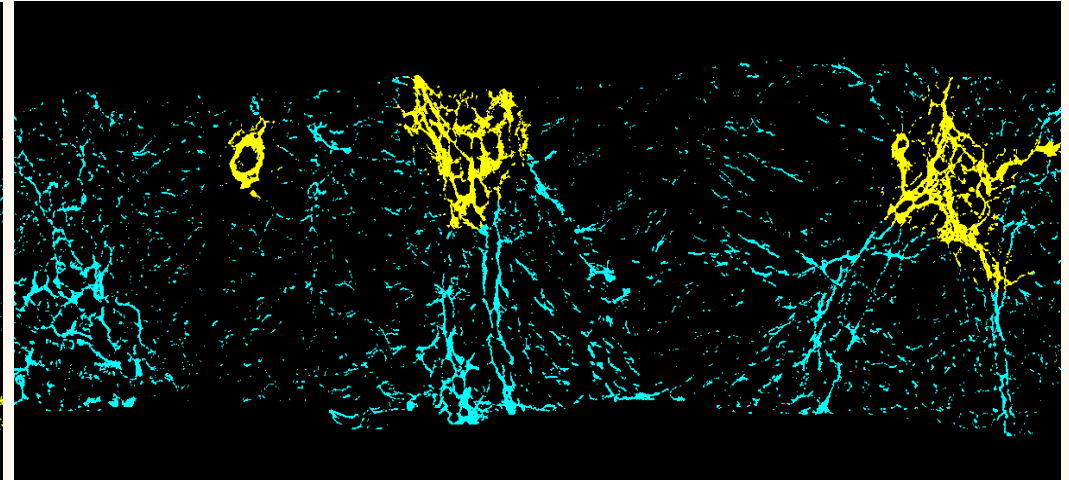
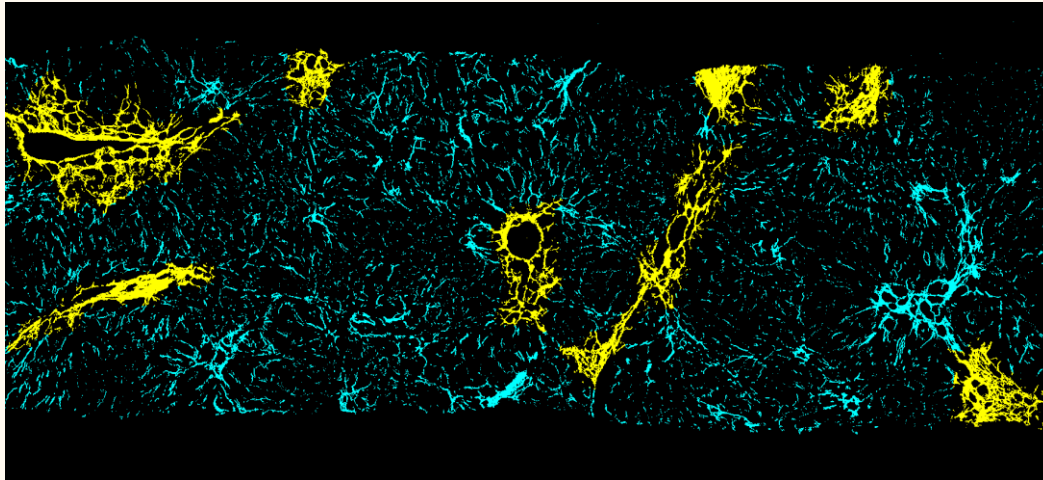


# Closer Look at the Collagen Fibrosis

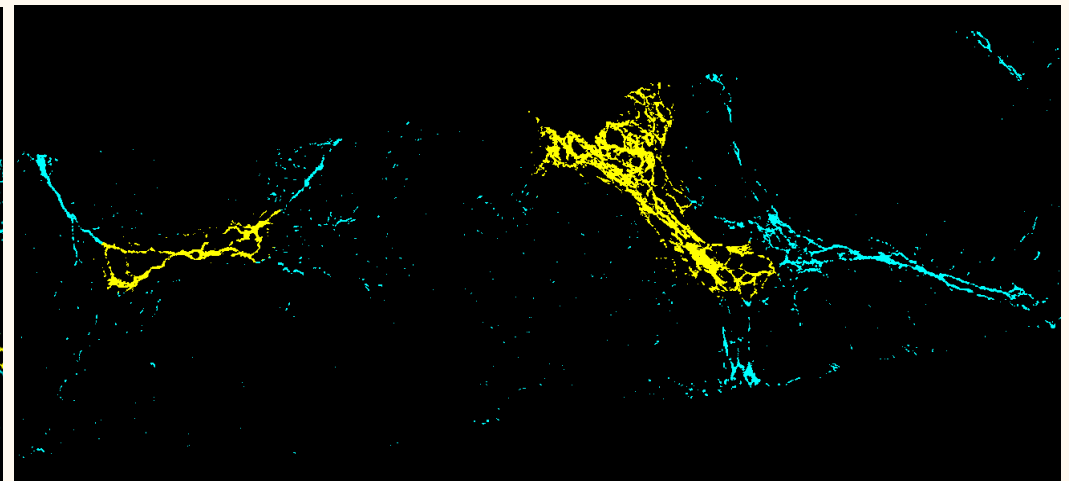
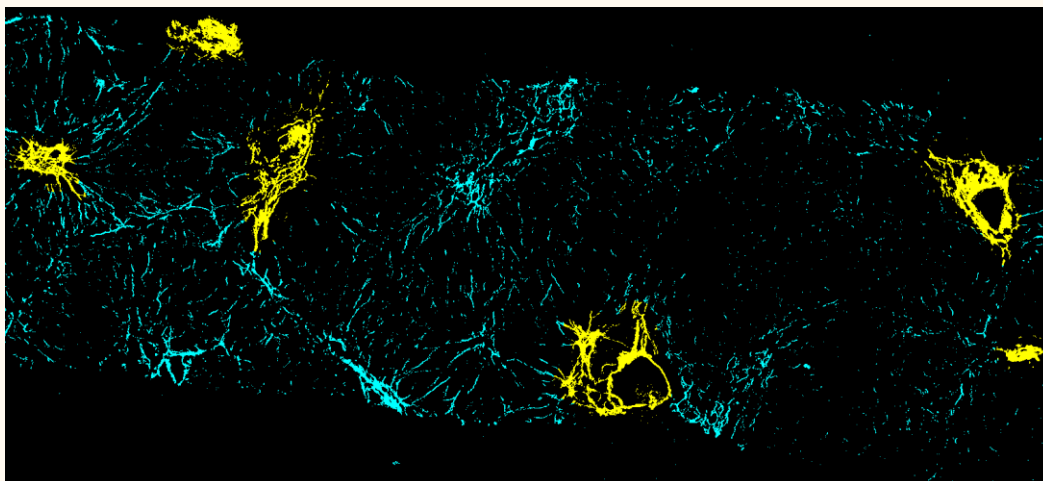
Baseline F2 → End of Treatment F2



Baseline F3 → End of Treatment F3

Before  
Treatment

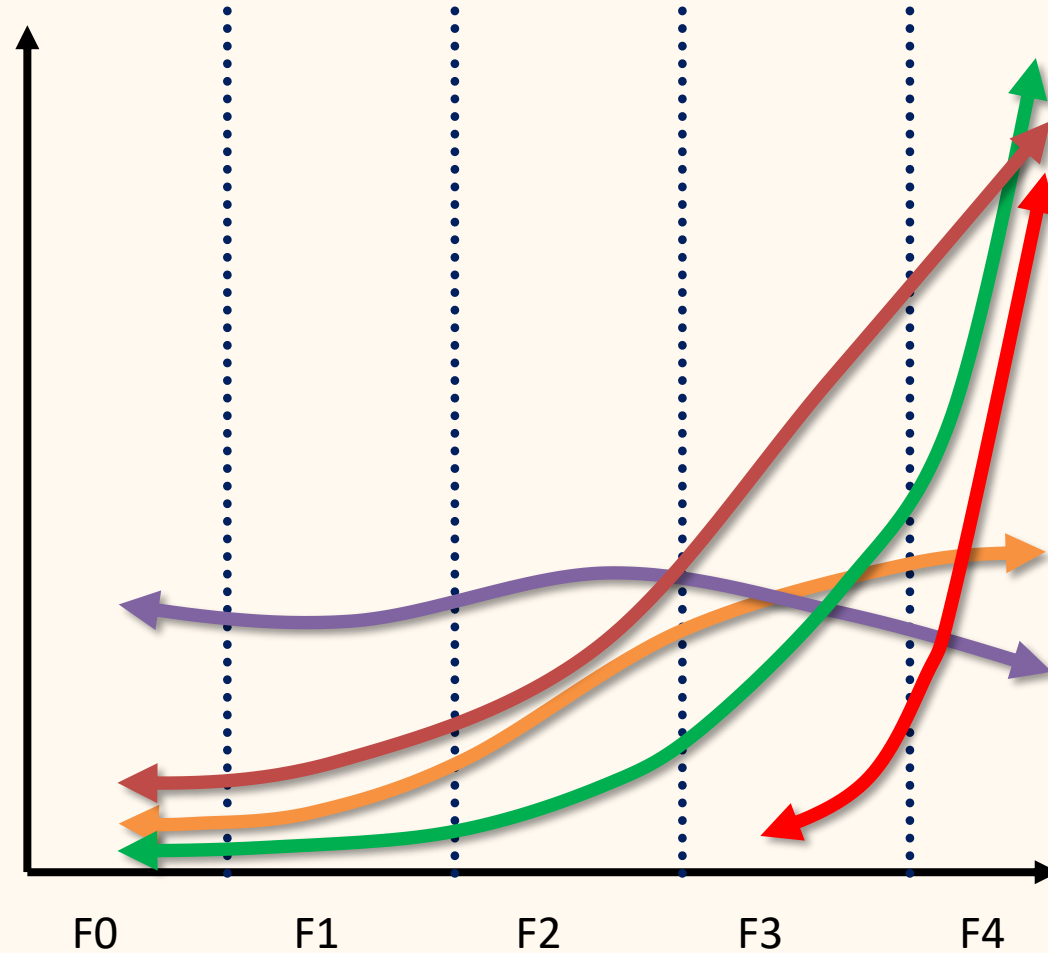


End of  
Treatment



 PT/CV collagen  
 PS collagen

# Fibrosis is a Multi-dimensional Activity



**Portal Fibrosis**

**Peri Portal Fibrosis**

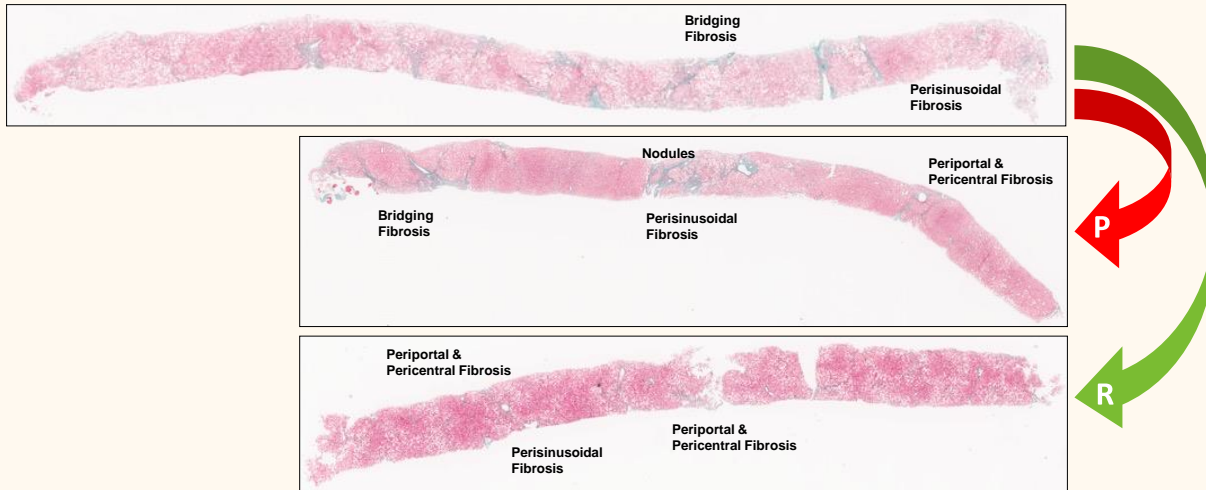
**Bridging Fibrosis**

**Peri-sinusoidal Fibrosis**

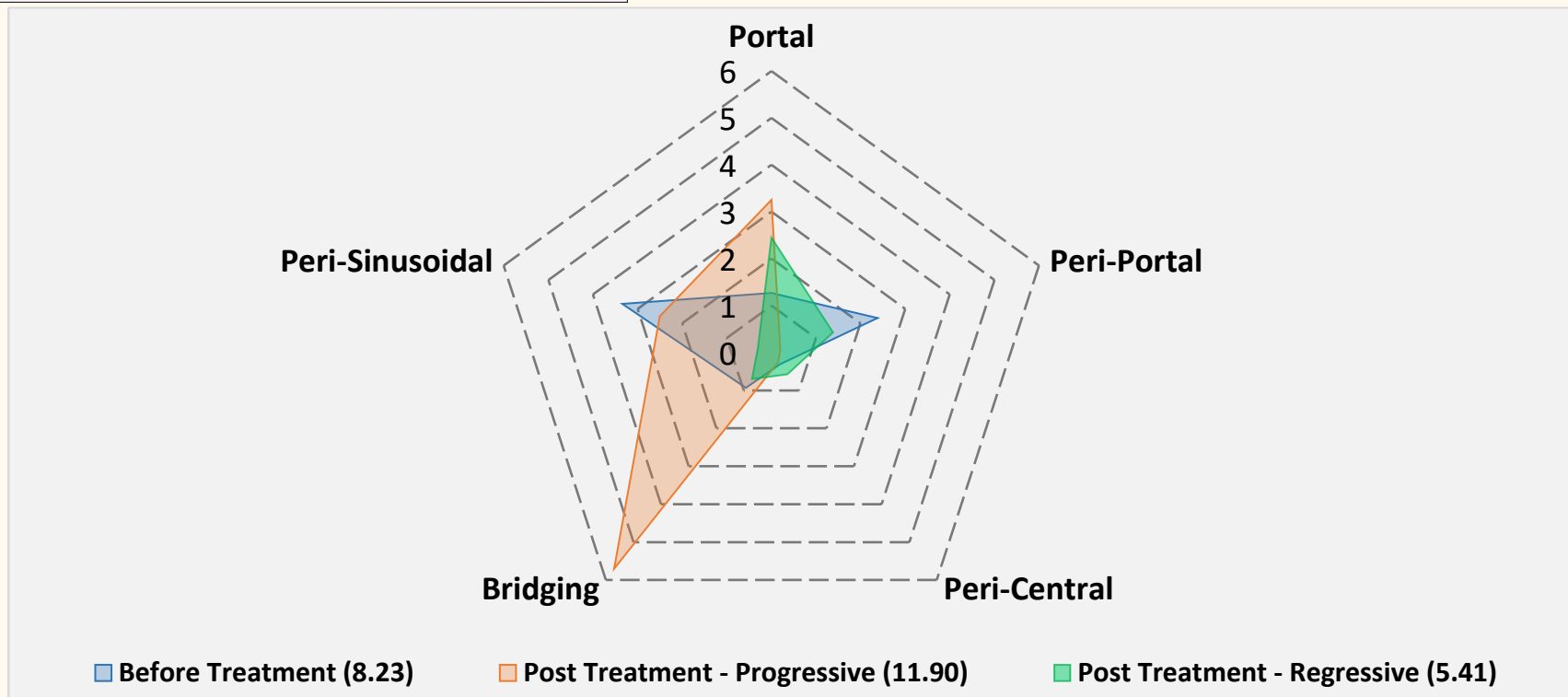
**Nodule**

*Graph is plotted based on data obtained from clinical projects*

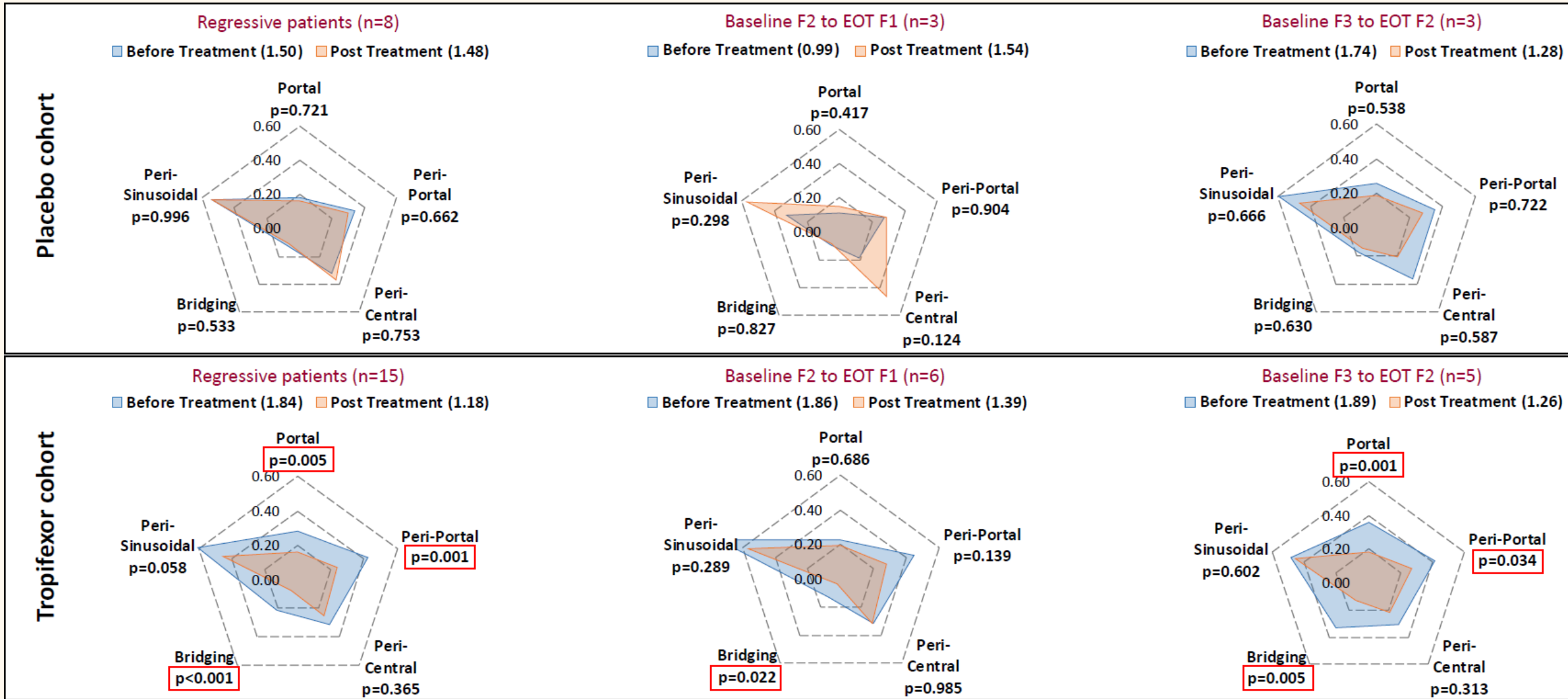
# Use of Radar Map for Comparison Between Paired Biopsies



|                             | Before Treatment | Post Treatment (Progressive) | Post Treatment (Regressive) |
|-----------------------------|------------------|------------------------------|-----------------------------|
| Portal Fibrosis             | 1.27             | 3.25                         | 2.45                        |
| Peri-Portal Fibrosis        | 2.38             | 0.2                          | 1.38                        |
| Peri-Central Fibrosis       | 0.31             | 0.25                         | 0.58                        |
| Bridging Fibrosis           | 0.93             | 5.7                          | 0.7                         |
| Peri-Sinusoidal Fibrosis    | 3.34             | 2.5                          | 0.3                         |
| <b>Total Weighted Score</b> | <b>8.23</b>      | <b>11.9</b>                  | <b>5.41</b>                 |



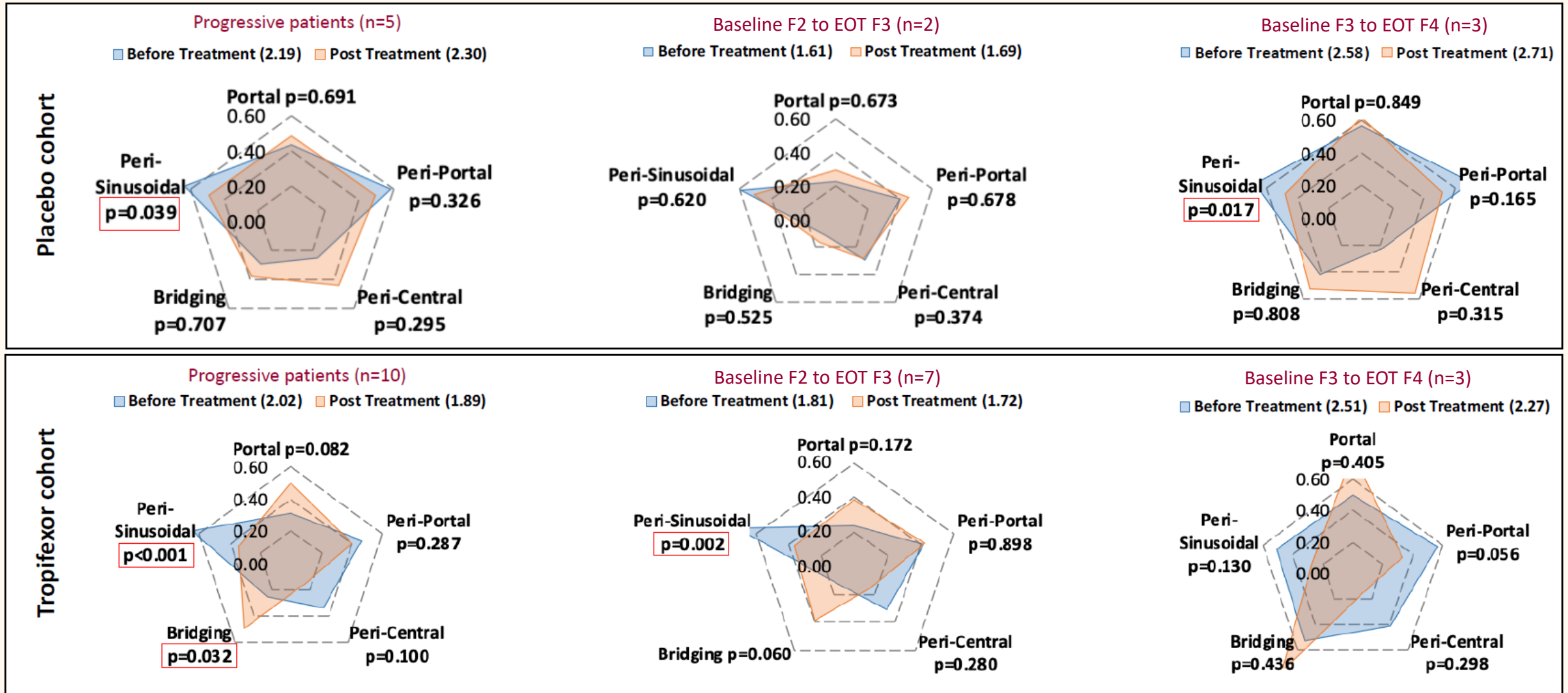
# From Baseline to EOT: Decrease in Fibrosis Staging



*p values were calculated by the paired-sample t-test.*

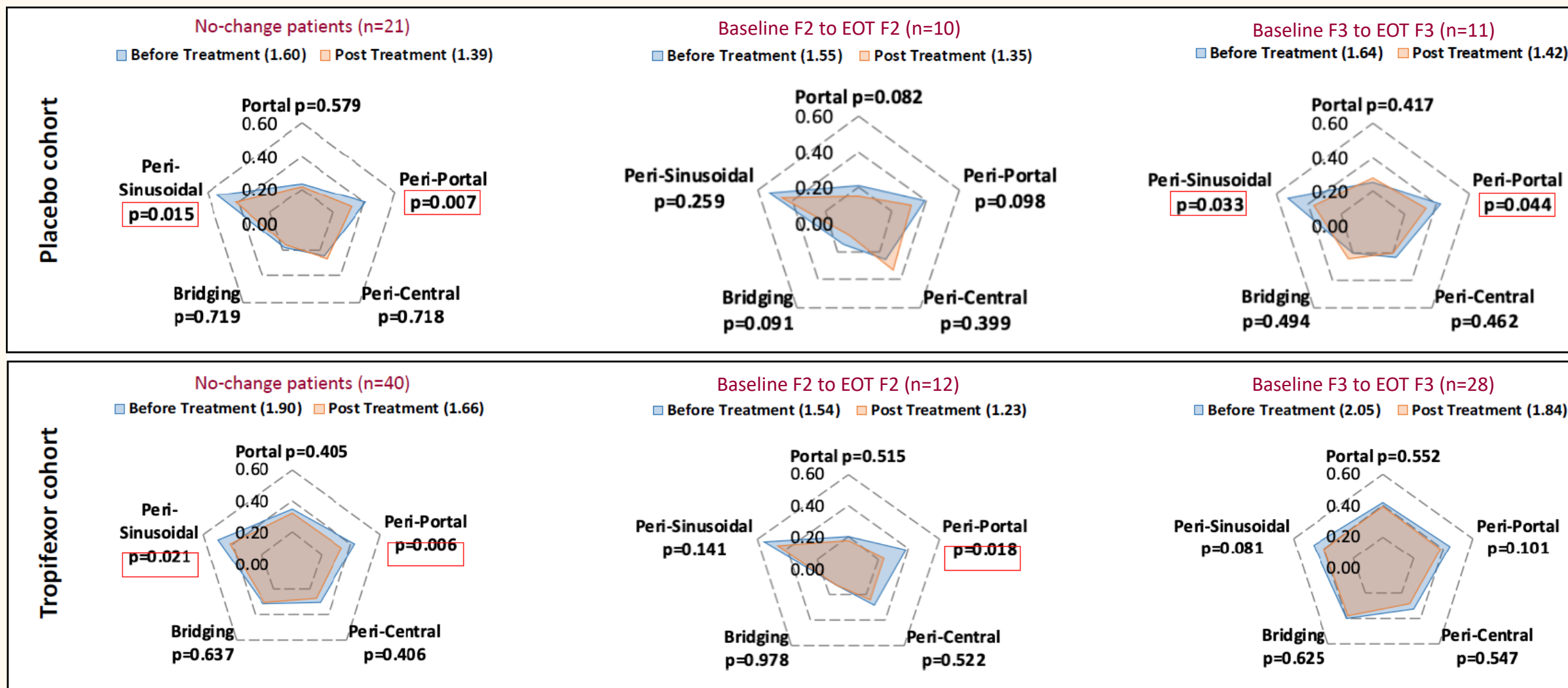
*The radar maps indicate the mean value of %collagen in different regions for samples*

# From Baseline to EOT: Increase in Fibrosis Staging



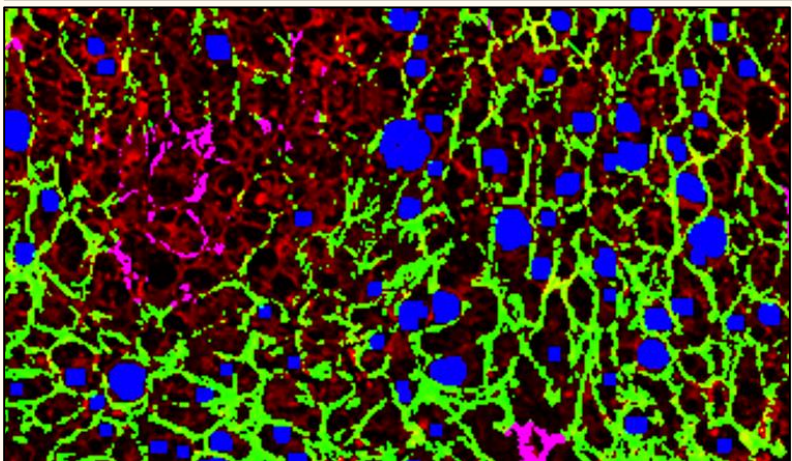
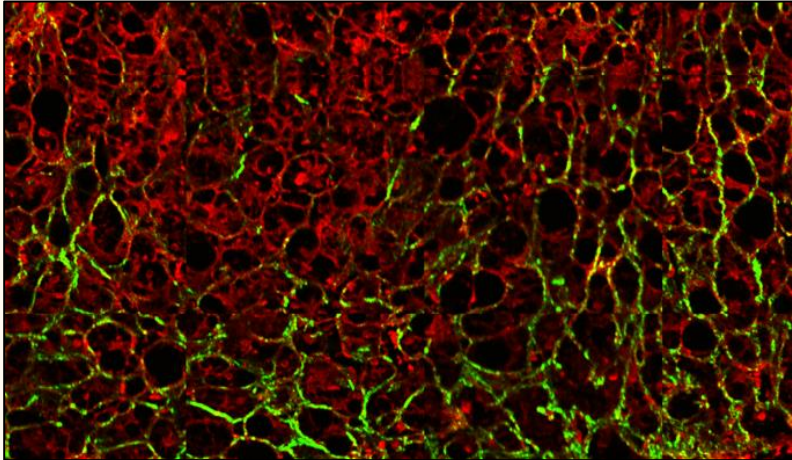
*p values were calculated by the paired-sample t-test.  
The radar maps indicate the mean value of %collagen in different regions for samples*

# From Baseline to EOT: No-change in Fibrosis Staging






*p values were calculated by the paired-sample t-test.  
The radar maps indicate the mean value of %collagen in different regions for samples*

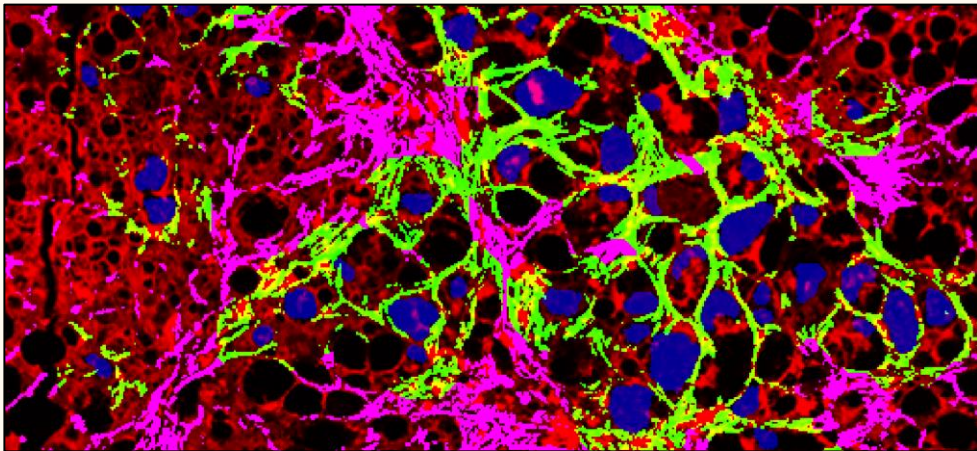
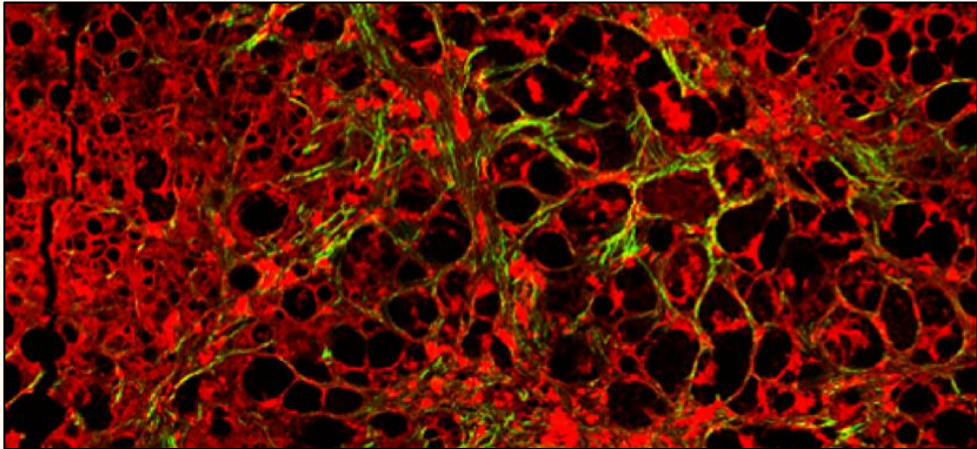
# Additional Research Use Only Tools: qFibrosis/qSteatosis Co-localisation






qFibrosis/qSteatosis co-localization can reveal treatment-induced steatosis changes and fibrosis dynamics from simultaneous quantitation of qSteatosis and qFibrosis in selected areas.

|   |                           |
|---|---------------------------|
|  | Steatosis                 |
|  | Collagen around steatosis |
|  | Other collagen            |

# Additional Research Use Only Tools: qFibrosis/qBallooning Co-localisation



qFibrosis/qBallooning co-localization can reveal treatment-induced changes in ballooned hepatocytes and fibrosis dynamics in selected areas

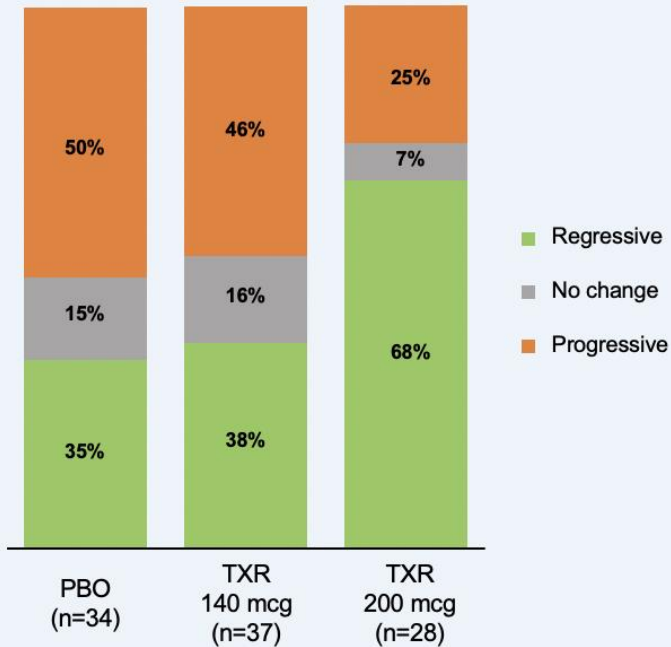
|   |                                |
|---|--------------------------------|
|  | Ballooned cell                 |
|  | Collagen around ballooned cell |
|  | Other collagen                 |



# Use of AI Digital Pathology for Quantitative Assessment

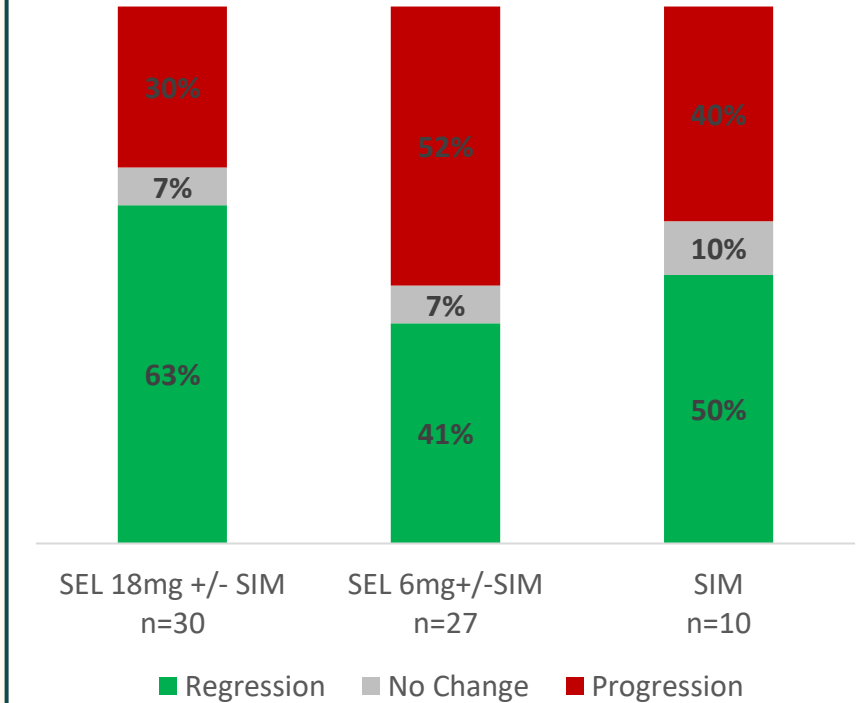
## Phase 2 FLIGHT-FXR (NCT02855164)

c) Digital quantitation of qFibrosis#  
P/N/R analysis with qFibrosis  
As a continuous value



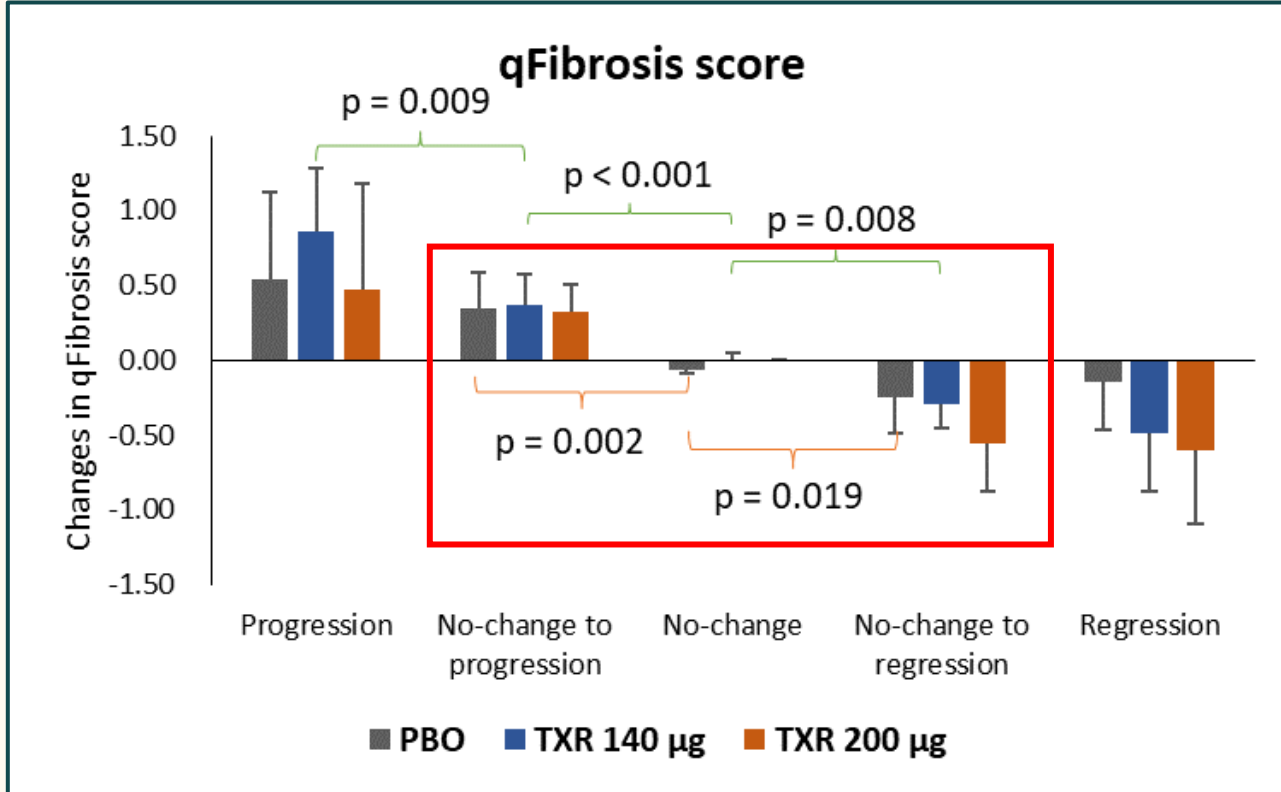
EASL 2021 PO-889

## qFibrosis Index

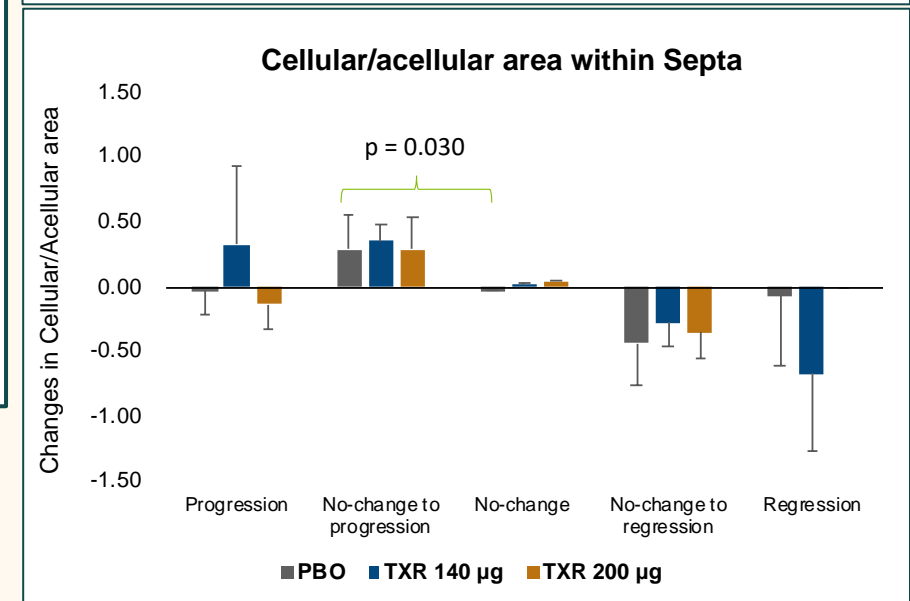
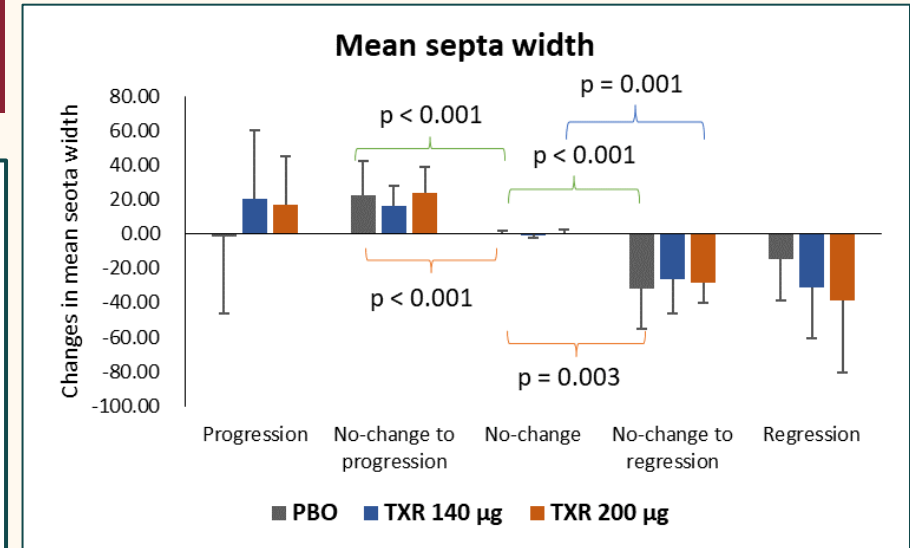


Data Source: Gilead Sciences

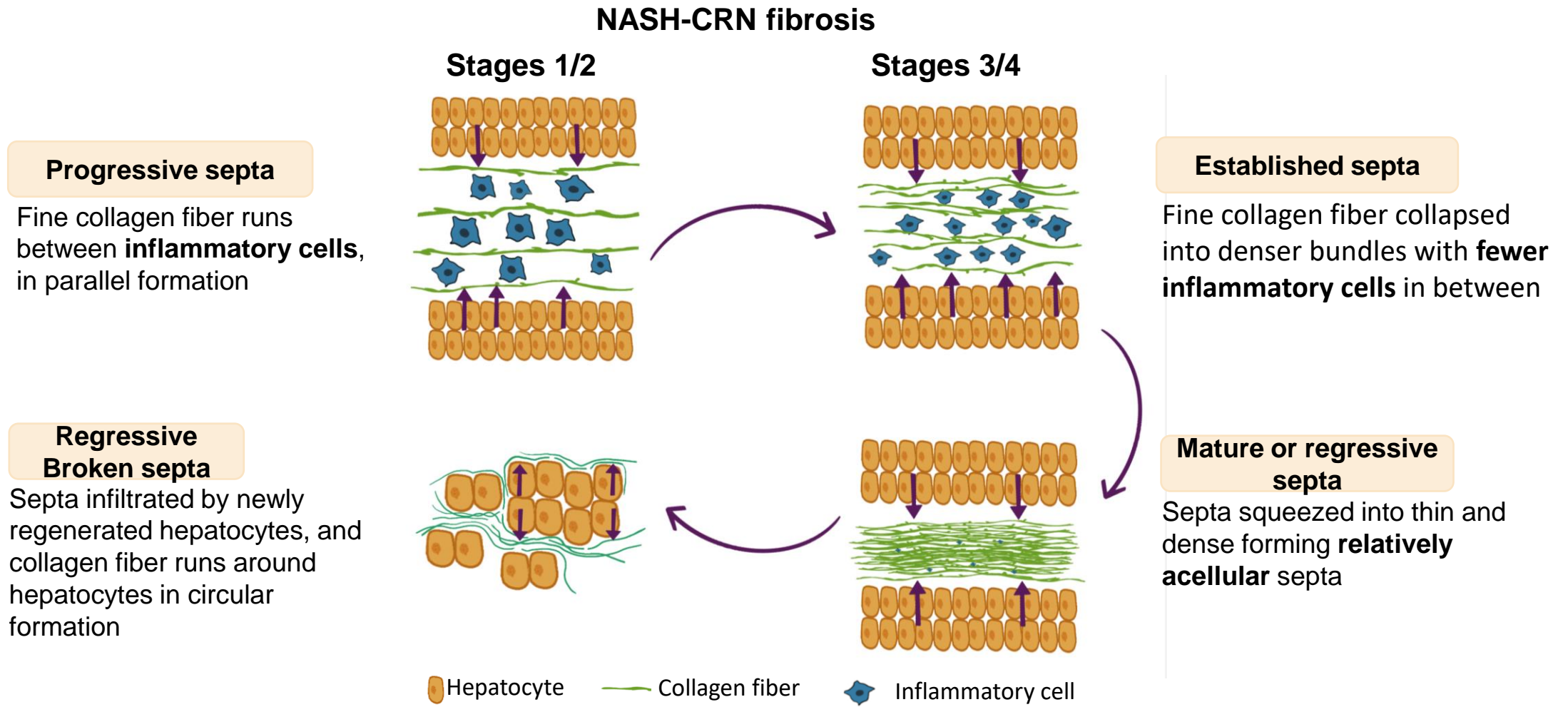
# Changes Observed for Intra-stage Patients



*Manuscript in preparation*



# A dynamic model of fibrosis in NASH



# Summary and future directions

- Digital approaches allow more robust read out of fibrosis stage
- A combination of collagen burden and distribution and characteristics of collagen fibrillar properties in different regions of the liver section allow one to assess if fibrosis is progressing or regressing in the context of clinical trials
- These can also be used to develop a fibrosis scoring system along a continuous range that is sensitive to change
- Long term studies are needed with third biopsy to see if the changes seen in the short term translate in to altered rates of progression to cirrhosis.