

# A significant milestone in mental health research

Results of a phase 2b clinical trial of COMP360 psilocybin therapy for treatment-resistant depression

For any questions, or to arrange an interview, please contact [media@compasspathways.com](mailto:media@compasspathways.com) or call Amy Lawrence +44 7813 777 919

Please visit [www.compasspathways.com](http://www.compasspathways.com) for more information.

## COMP360

COMPASS's investigational, proprietary formulation of synthetic psilocybin is administered in conjunction with psychological support from specially trained therapists

**COMP360** has been designated a Breakthrough Therapy by the US FDA and has received Innovative Licensing and Access Pathway designation in the UK for treatment-resistant depression

## Treatment-resistant depression (TRD): significant unmet medical need

**100 million people** suffer with depression which is not helped by existing treatments<sup>1</sup>

Associated with longer depressive episodes, higher risk of suicide, lower productivity at work, greater economic burden<sup>2-4</sup>

## Clinical development programme

### Phase 1

Completed

**2019**

**89**

healthy participants

### Phase 2b

#### Dose-finding study

COMP360 psilocybin therapy administration completed **July 2021**

**World's largest** psilocybin therapy study

Topline data presented at American Psychiatric Association Annual Meeting in **May 2022**

Published in The New England Journal of Medicine<sup>5</sup>

**November 2022**

### Phase 3

Design of the two pivotal trials in phase 3 clinical programme announced in **October 2022**

Large-scale pivotal trials, prior to application for marketing approval

**22 sites**

**10 countries**

**233 TRD patients**

(exceeding target recruitment of 216)

## Key results:



### Rapid reduction in symptoms after single dose:

Approximately 30% of patients in the 25mg group were in remission at week three (29.1%).

Patients who received a single 25mg dose of COMP360 psilocybin, in combination with psychological support, experienced a highly statistically significant, rapid reduction in symptoms of depression at three weeks: the difference between the 25mg group and 1mg group was -6.6 on the MADRS\* depression scale at Week 3, p<0.001. These treatment group differences were observed from the day after administration.



### Sustained response:

Double the number of patients who received a 25mg dose had a sustained response at week 12, compared to those who received 1mg (20.3% of patients in the 25mg group vs 10.1% in the 1mg group).



### Generally well-tolerated:

COMP360 psilocybin was generally well-tolerated. On the day of COMP360 administration, headache, nausea, and dizziness were the most common adverse events where a dose-related increase in incidence was evident.



### Safety monitoring:

Suicidal ideation and intentional self-injury were seen in all groups, as is regularly observed in a TRD population. All patients who experienced these events during the trial had said during screening that they had had suicidal thoughts prior to the trial. Case-by-case analysis of safety data found no evidence to suggest a causal relationship between these events and administration of COMP360 psilocybin. The majority occurred more than a week after the psilocybin session.

\*MADRS = Montgomery-Åsberg Depression Rating Scale, a diagnostic questionnaire used to measure the severity of depression. Administered by blinded raters. A higher score indicates more severe depression.

Response = ≥50% decrease in MADRS total score from baseline; remission = MADRS total score ≤10; sustained response = patients meeting the MADRS response criteria from week 3 and at all subsequent visits until week 12.

Randomised, controlled, double-blinded study

Dose-finding study **comparing 25mg and 10mg with 1mg of COMP360**, administered with psychological support

Patients followed up for **12 weeks**

**Our goal is to make COMP360 psilocybin therapy accessible to patients with serious mental health illnesses**



Additional indications for COMP360 psilocybin therapy, as well as new compounds developed

**"We saw positive results in a particularly difficult to treat group of patients. We look forward to starting our phase 3 programme later this year, moving us closer to providing COMP360 psilocybin with psychological support for patients who desperately need it."**

*Dr Guy Goodwin, Chief Medical Officer, COMPASS Pathways*



1. World Health Organization. Depression and other common mental disorders: global health estimates. 2017. <https://apps.who.int/iris/handle/10665/254610>. License: CC BY-NC-SA 3.0 IGO

2. Johnston KM, Powell LC, Anderson IM, Szabo S, Cline S. The burden of treatment-resistant depression: A systematic review of the economic and quality of life literature. Journal of Affective Disorders. 2019;242:195-210.

3. Mrazek DA, Homberger JC, Altar CA, Degtjar I. A Review of the Clinical, Economic, and Societal Burden of Treatment Resistant Depression: 1996-2013. Psychiatric Services. 2014;65(8):977-987.

4. Jaffe DH, Rive B, Deneer TR. The humanistic and economic burden of treatment-resistant depression in Europe: A cross-sectional study. BMC psychiatry. 2019;19(247).

5. Goodwin G, Aaronson S, Alvarez O, et al. Single-Dose Psilocybin for a Treatment-Resistant Episode of Major Depression. New England Journal of Medicine. 2022; 387:1637-1648. <https://doi.org/10.1056/nejmoa2206443>.