AAV-SLB101: A Next-Generation Rationally Designed Capsid Demonstrates Highly Potent Cardiac Tropism and Initial Clinical Safety

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This presentation contains "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995, including statements regarding future expectations, plans and prospects for the company; the ability to successfully achieve and execute on the company's goals, priorities and achieve key clinical milestones; the company's SGT-003 programs, including expectations for additional CTA filings, site activations, expanded clinical development, production of additional SGT-003 GMP batches, initiation and enrollment in clinical trials, dosing, and availability of clinical trial data; and other statements containing the words "anticipate," "believe," "continue," "could," "estimate," "expect," "intend," "may," "plan," "potential," "predict," "project," "should," "target," "would," "working" and similar expressions. Any forward-looking statements are based on management's current expectations of future events and are subject to a number of risks and uncertainties that could cause actual results to differ materially and adversely from those set forth in, or implied by, such forward-looking statements. These risks and uncertainties include, but are not limited to, risks associated with the company's ability to advance SGT-003 and other programs and platform technologies (e.g., AAV-SLB101 capsid technologies) on the timelines expected or at all; obtain and maintain necessary and desirable approvals from the FDA and other regulatory authorities; replicate in clinical trials positive results found in preclinical studies and early-stage clinical trials of the company's product candidates; obtain, maintain or protect intellectual property rights related to its product candidates; compete successfully with other companies that are seeking to develop Duchenne and other neuromuscular and cardiac treatments and gene therapies; manage expenses; and raise the substantial additional capital needed, on the timeline necessary, to continue development of SGT-003 and other candidates, achieve its other business objectives and continue as a going concern. For a discussion of other risks and uncertainties, and other important factors, any of which could cause the company's actual results to differ from those contained in the forward-looking statements, see the "Risk Factors" section, as well as discussions of potential risks, uncertainties and other important factors, in the company's most recent filings with the Securities and Exchange Commission. In addition, the forward-looking statements included in this presentation represent the company's views as of the date hereof and should not be relied upon as representing the company's views as of any date subsequent to the date hereof. The company anticipates that subsequent events and developments will cause the company's views to change. However, while the company may elect to update these forward-looking statements at some point in the future, the company specifically disclaims any obligation to do so.

This presentation contains estimates and other statistical data made by independent parties and by us relating to market size and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such data and estimates. In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.



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Solid Biosciences

Preclinical and clinical development departments



SGT-003 Is Solid's Next-Generation, Investigational Microdystrophin Gene Transfer Therapy That Uses AAV-SLB101



AAV-SLB101 is a proprietary, rationally designed muscle-tropic capsid used in Solid Biosciences' investigational gene therapy, SGT-003



SGT-003 is currently being evaluated in the INSPIRE DUCHENNE (NCT06138639) phase 1/2 clinical study for the treatment of Duchenne muscular dystrophy (Duchenne)



AAV-SLB101—mediated transduction and expression of reporter and therapeutic transgenes were compared with first-generation vectors in wild-type and Duchenne mouse models



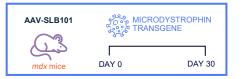
SGT-003 transduction and microdystrophin expression were evaluated in muscle biopsies collected from INSPIRE DUCHENNE study participants



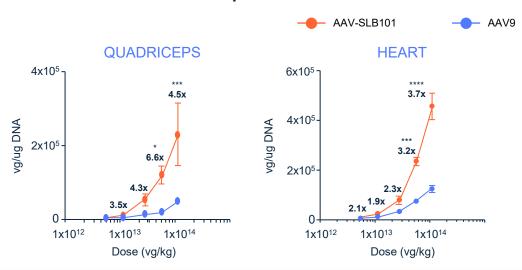
Cardiac structure and function, and biomarkers of cardiac injury, were monitored

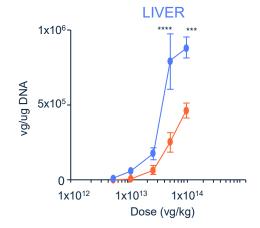


AAV-SLB101 Showed Improved Muscle Transduction and Lower Liver Distribution Compared With AAV9



Head-to-Head Comparison of Biodistribution in mdx Mouse Model of Duchenne^a



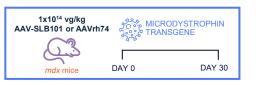


Higher biodistribution following AAV-SLB101 vs AAV9 treatment of *mdx* mice in disease-relevant tissues was observed in the quadriceps and heart

Decreased biodistribution of AAV-SLB101 vs AAV9 was observed in the liver

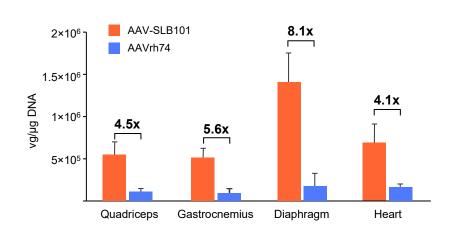


AAV-SLB101 Resulted in Higher Biodistribution and Expression Compared With AAVrh74



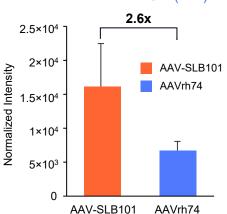
Head-to-Head Comparison in *mdx* Mouse Model of Duchenne

BIODISTRIBUTION



Higher biodistribution following AAV-SLB101 vs AAVrh74 treatment of *mdx* mice was observed in quadriceps, gastrocnemius, diaphragm, and heart

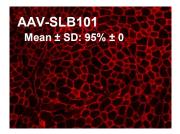
MICRODYSTROPHIN EXPRESSION (WB)



Higher microdystrophin expression was observed in quadriceps of AAV-SLB101 vs AAVrh74-treated mdx mice

Immunofluorescence

QUADRICEPS

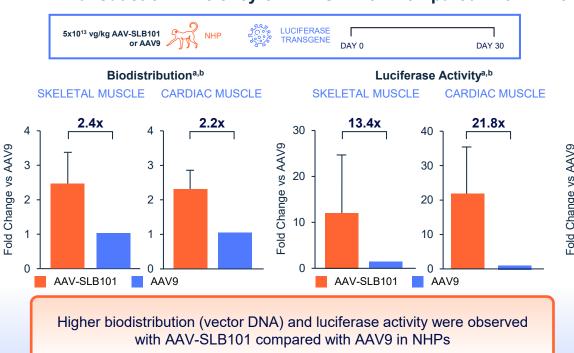






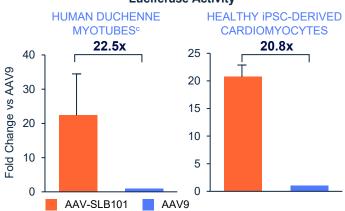
AAV-SLB101 Transduction Efficiency Was Maintained in NHP Studies and Human Cell Lines Compared With Initial Results in Mice

Transduction Efficiency of AAV-SLB101 Compared With AAV9 in NHPs and Human Cell Models









Increased luciferase activity was observed with AAV-SLB101 vs AAV9 in both Duchenne myotubes and healthy iPSC cardiomyocytes



NHP=non-human primate.

an=2 per group. Average fold differences calculated from the five skeletal muscle tissues sampled and three regions of cardiac tissue sampled. n=3 cell lines per treatment. Data on file. Solid Biosciences. 2025.

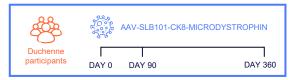
INSPIRE DUCHENNE Clinical Study of SGT-003: AAV-SLB101-CK8-Microdystrophin

Cohort	Eligible Age Range (years)	Ages at Enrollment (years)	Weights for Dosing (kg)	Participants Enrolled (n)
1	4 to <7	4 to 6	≤27.8	13
2	7 to <12	7 to 10	≤39.7	8
3	0 to <4	1 to 3	≤17.0	2
Total	0 to <12	1 to 10	≤39.7	23

SGT-003 Treatment-Relate	n (%)	
Serious Adverse Events (SAE	1 (4.3)ª	
	Nausea	17 (73.9)
Most common	Vomiting	16 (69.6)
treatment-related	Decreased appetite	11 (47.8)
adverse events (AEs)	Thrombocytopenia/platelet count decreased	11 (47.8)
	Headache	6 (26.1)



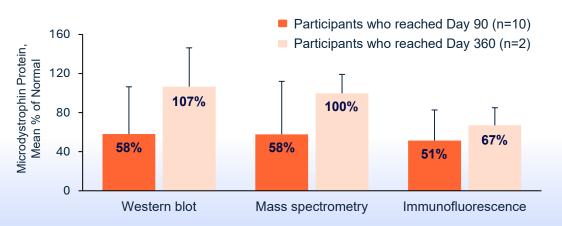
Data From INSPIRE DUCHENNE Clinical Trial of SGT-003

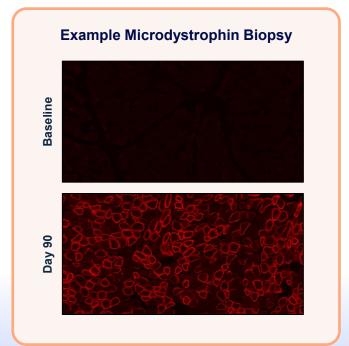


Vector Genome Copies/Nucleus

Dose	Day 90 (n=10)	Day 360 (n=2)
1x10 ¹⁴ vg/kg	13	12

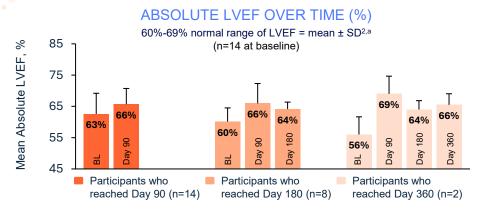
SGT-003 Microdystrophin Expression



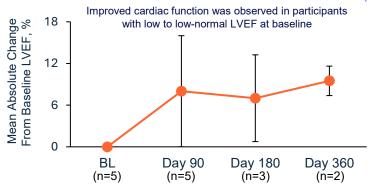




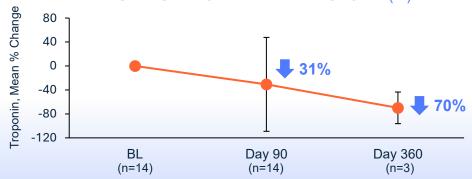
Reassuring-to-Promising Cardiac Function After SGT-003 Dosing¹



ABSOLUTE CHANGE FROM BASELINE LVEF (%)



CHANGE FROM BASELINE TROPONIN (%)



- Observations of improved cardiac function driven by participants with low to low-normal baseline LVEF
- Troponin reductions may indicate early signals of SGT-003 cardiac treatment effect



AAV-SLB101 Overcomes the Challenges of First-Generation Capsids



Higher biodistribution and transgene expression were achieved with AAV-SLB101 compared with AAV9 in animal (*mdx* mice, NHPs) and human cell models in key tissues for Duchenne, including skeletal muscle and heart



Reductions in AAV-SLB101 liver biodistribution were observed compared with that of AAV9 in both mice and NHPs



High levels of biodistribution and microdystrophin expression were observed in muscle biopsies collected from participants treated with SGT-003 in INSPIRE DUCHENNE



Though collected for safety, early data from INSPIRE DUCHENNE study may indicate signals of potential benefit through reduction in cardiac troponin and increased systolic function, as measured by LVEF using echocardiography

