

Published efficacy and safety

ORIGINAL RESEARCH ARTICLE

Efficacy and Safety of Intravenous Tenecteplase Bolus in Acute Ischemic Stroke: Results of Two Open-Label, Multicenter Trials

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The study concludes that intravenous TNK-tPA given within 3 hours of symptom onset, is a safe, efficacious and well tolerated option in patients with acute ischemic stroke.

	TNK-tPA Study	NINDS Study rt-PA*	
Outcome	0.2 mg/kg (N=91)	(N=144, Part I; N=168, Part II)	p value
Primary outcome, MNI	20 (22)	NA	-
Primary outcome modified for comparison with NINDS trial,	53 (58.2)	67 (47)	0.083
NIHSS improvement by ≥ 4 points or a	33 (36.2)	67 (47)	0.065
score of 0 at 24 h			
Secondary outcomes			
mRS Score (at 3 months)			
0 or 1	64 (70.3)	66 (39)	< 0.001
2 or 3	13 (14.3)	35 (21)	0.24
4 or 5	9 (9.9)	39 (23)	0.01
BI Score (at 3 months)	46 (50.5)	84 (50)	1.0
95-100	33 (36.3)	27 (16)	< 0.001
50-90	33 (30.3)	27 (10)	< 0.001
Symptomatic ICH	1 (1.1)	20 (6.4)	0.05
Mortality	5 (5.5)	28 (17)	0.01

TNK-tPA study data includes patients from study-I (30 patients) and study-II (61 patients) that were administered 0.2 mg/kg TNK-tPA. Data are expressed as N (%).

BI Barthel Index, ICH intracranial hemorrhage, MNI major neurological improvement, mRS modified Rankin Scale, NA data not available, NIHSS National Institutes of Health Stroke Scale, NINDS National Institute of Neurological Disorders and Stroke, rt-PA alteplase, TNK-tPA tenecteplase.

*For the NINDS study values, the mRS and BI from part 2, NIHSS improvement from part 1 and sICH from part 1 and part 2 are shown as these were treated as the primary end points in the trial (NINDS rt-PA Stroke Study Group New Engl J Med 1995). MNI is defined as improvement of ≥ 8 points or a score of 0 on NIHSS at 24 h. NA indicates data not available.

Global Perspective:

The NEW ENGLAND JOURNAL of MEDICINE

EDITORIALS



Paving the Way for Improved Treatment of Acute Stroke with Tenecteplase

Alison E. Baird, M.B., B.S., Ph.D., M.P.H.

Emerging Therapy Critiques

Section Editors: Gustavo Saposnik, MD, and Daniel Strbian, MD, PhD

Tenecteplase Knocking on the Door
The EXTEND-IA TNK Trial

Michael D. Hill, MD, MSc, FRCPC; Patrik Michel, MD

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- ~3800 new cases of ischemic stroke every day in India
- 6.2 million deaths globally due to stroke
- About 85% of global stroke mortality which occurs in low and middle income countries

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- Administered as a single bolus
- Dose: 0.2 mg/kg body weight
- Longer half life of 18-22 min
- 14 fold greater fibrin specificity than alteplase
- 80 times lesser susceptibility to PAI-1 than alteplase

Aim: To evaluate whether routine use of TNK-tPA within 3 hours after onset of stroke symptoms is (a) safe (primary endpoint) and (b) beneficial (secondary endpoint)

Recombinant Tissue
Plasminogen Activator
(TNK-t-PA)
for Injection 20 mg Kit
TENECTASE®
Tenecteplase for Injection 20 mg



NIHSS score

10

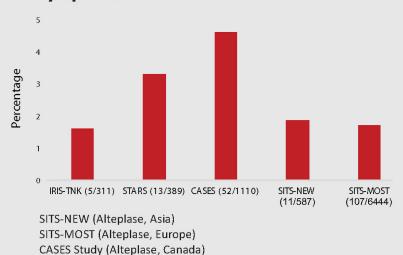
Day 7/Day of Discharge

Median (Interquartile Range, 25th-75th Percentile) Horizontal Line inside the box indicates median

IRIS-TNK (Indian Registry in Ischemic Stroke-Tenecteplase)

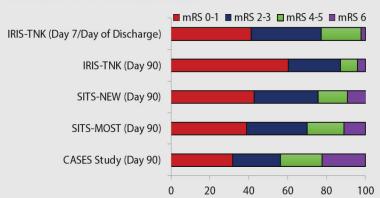
- Open-label, Prospective, Multicenter, Non Randomized, Ongoing, Observational study
- Patients (satisfying the eligibility criteria), would be followed up for three months post thrombolysis
- Primary safety outcome variable: Symptomatic ICH within 36±6 h after start of thrombolysis treatment
- Secondary efficacy outcome variable: NIHSS improvement ≥4 points or 0 at 24 h, 7 days (or day of discharge) post treatment initiation
- Modified Rankin Scale (mRS) Score 0-2 at three months (Functional Independence)
- mRS 0-1 at three months (Excellent Outcome)

Symptomatic ICH



Excellent Outcome: mRS 0-1

STARS Study (Alteplase, USA)



Global patent for the indication



Country	Patent Number	Year Granted
India	283474	2017
USA	US9943575 B2	2018
Europe	EP2654770 B1	2017
Eurasia	026017	2017
Japan	6375112	2018
Australia	2011346515	2017
Mexico	356199	2018
New Zealand	611706	2015
Malaysia	Under Examination	
Columbia	Under Examination	
Brazil	Under Examination	
Indonesia	Under Examination	
UAE	Under Examination	



Gennova Biopharmaceuticals Ltd.,

headquartered in Pune, India, is a biotechnology company dedicated to the development, production and commercialization of bio-therapeutics to address life-threatening diseases across various indications.

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