

Ardelyx Announces Submission of New Drug Application to the U.S. FDA for Tenapanor for the Control of Serum Phosphorus in Adult Patients with CKD on Dialysis

June 30, 2020

Application is Supported by Three Positive Phase 3 Clinical Trials for Tenapanor for Hyperphosphatemia, a Condition which affects Approximately 85% of CKD Patients on Dialysis

ed the submission of a New Drug Application (NDA) for tenapanor to the U.S. Food and Drug Administration (FDA) for the control of se FREMONT, Calif., June 30, 2020 /PRNewswire/ -- Ardelyx, Inc. (Nasdaq: ARDX), a bio phosphorus in adult patients with chronic kidney disease (CKD) on dialysis.



of our NDA is a significant milestone for Aridelys, positioning us well to MBII our promise to offer an innovative first-in-class therapeutic for patients with CKD on dalysis with elevated serum phosphorus, "said Mile Raab, president and chief executive officer of Aridelys." The clinical results we've generated throughout the development program support the potential for the said throughout the said in the program of the p

Based on standard FDA review timelines, the company expects to receive notification from the FDA on the acceptance of the filing for substantive review in late August 2020.

The submission is supported by three successful Phase 3 trials involving over 1,000 patients that evaluated the use of tenspenor, which included: two morotherapy trials, including a long-term study, to control serum phosphorus in patients with CKD on dialysis, and one trial using a dual-mechanism approach in dialysis patients who had difficult-to-control hyperphosphatemia (25.5 mg/dL) describe chospitals bridge therapy.

About Tenapanor for Hyperphosphatemia
Tenapanor, discovered and developed by Arbleyk, is a first-in-class, proprietary, oral medicine for which the company has submitted an NDA to the FDA for the control of serum phosphorus in adult patients with CKD on dailysis. Tenapanor has a unique mechanism of action and acts locally in the gut to inhibit the sodium hydrogen exchanged 3 (NHES). This results in a conformational change of the epithetic all junctions, thereby synflicating reducing paracellular upsake of phosphate binders, have been reported.

About Hyperphosphatemia 1s aerious condition resulting in an abnormally elevated level of phosphonus in the blood that is estimated to affect more than 745,000 dalysis patients in major developed countries. The kidney is the organ responsible for regulating phosphonus levels, but when kidney function is significantly impaired, phosphonus is not adequately eliminated from the body. As a result in perphosphatemian is a neerly universal condition among people with CKD on dalysis. Despite treatment with phosphate bridge (the only approved terrapy to hyperphosphatemia), approximately 70% of CKD patients on dalysis continue to experience developed phosphonus levels at any point in time (Spriens Global Insights. Real/Vorld Dynamic, Dalysis 2015). Phosphonus levels greater than 5.7 mg/d. have been shown to be an independent fixlt factor for condivisacióus morbidly and morality in patients requiring dalysis (Book 204), and internationally recognited featment guidelines recommend towering elevated phosphotals levels toward the normal range («d fingids.).

About Affelys, Inc.
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Forward Looking Statements.
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