

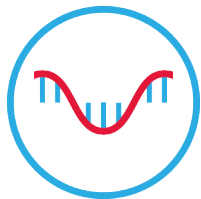
RSV Vaccine (mRNA-1345) Update:

- *Safety & Immunogenicity in 18-59 Year Olds at increased Risk for RSV Disease**
- *Revaccination of Adults at 12 or 24 Months**

ACIP

Frances Priddy, MD MPH

April 16, 2025



* mRESVIA has not been authorized for these indications

RSV Vaccine (mRNA-1345) Clinical Development

Efficacy, Immunogenicity, Safety, and Correlate of Protection

Adults ≥ 60 years
Study 301

**Concomitant Administration
with Standard Dose Influenza or
COVID-19**

Adults ≥ 50 years
Study 302 - Part A and B

**Concomitant Administration
with High Dose Influenza**

Adults ≥ 65 years
Study 304

**Safety and Immunogenicity in
Adults at Increased Risk**

Adults 18-59 years
Study 303 – Part A

12 Month Revaccination

Adults ≥ 50 years
Study 302 – Part C

24 Month Revaccination

Adults ≥ 60 years
Study 301 – Part B

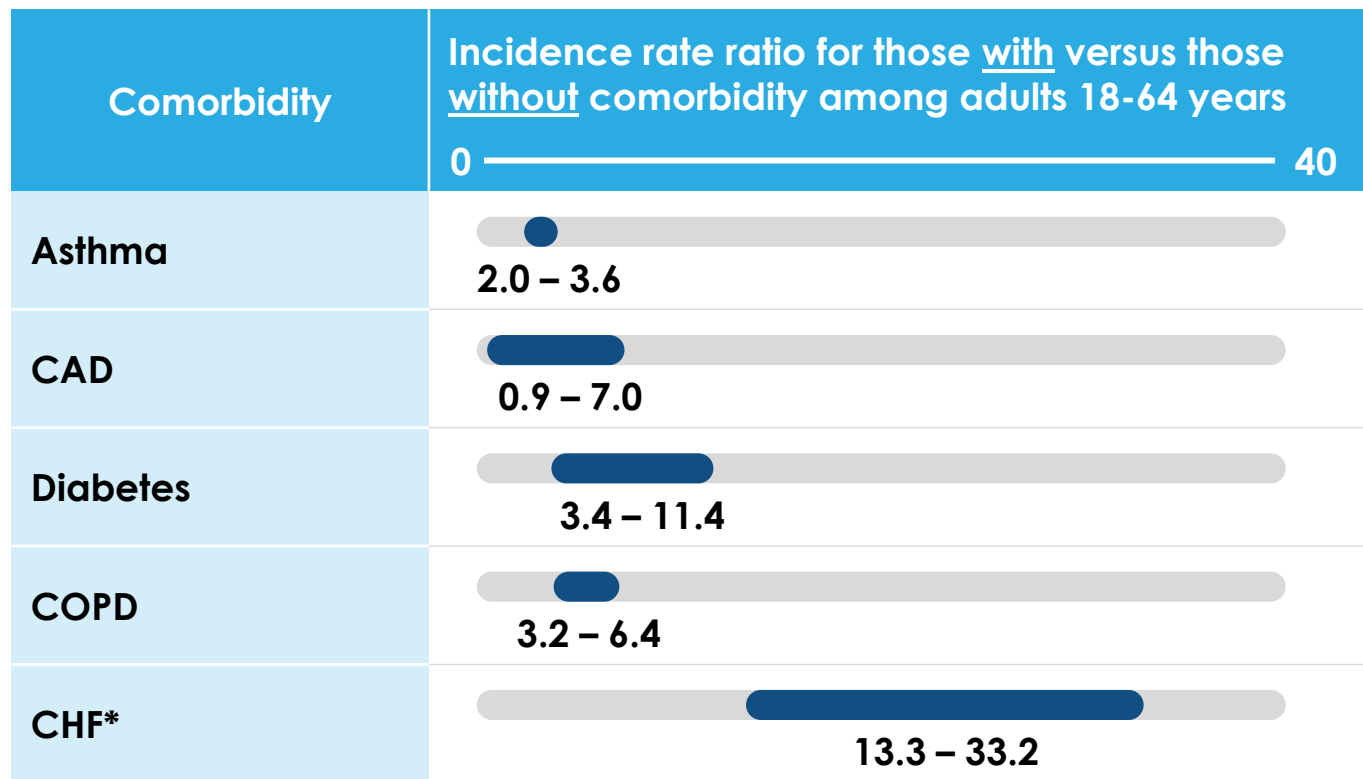
**Safety and Immunogenicity in
Immunocompromised**

Adults with SOT ≥ 18 years
Study 303 – Part B

US Hospitalization Rates for RSV in 18-64 Year Olds with Underlying Conditions



Estimated incidence of RSV-associated Hospitalization in 2 Regions of New York State, US, 2017-2020 (N=1099)



RSV-NET Analysis –Adults Hospitalized with Laboratory Confirmed RSV 2016-2023 (N=16,575)

Adult RSV hospitalizations

- 37% in 18-64-year-olds
- 24% in 50-64-year-olds
 - 22% required ICU admission
 - 3% in-hospital mortality

CAD - coronary artery disease; CHF - congestive heart failure; COPD - chronic obstructive pulmonary disease; RSV - respiratory syncytial virus

*CHF age 20-59 years

Branche AR, et al. *Clin Infect Dis*. 2022.

Havers FP, et al. *JAMA Netw Open*. 2024.

mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease

Study 303, Part A

ISIRV 2025

Study Design – Randomized Double-Blind Study in 18-59-Year-Old Adults at Increased Risk of RSV Disease

Study 303, Part A



United States



Canada



United Kingdom

Underlying Disease Category

mRNA-1345 Dose

Coronary Artery Disease (CAD)
and/or
Congestive Heart Failure (CHF)

50 µg
N ~ 150

COPD, Persistent Asthma, Pulmonary
Fibrosis, and/or Other Chronic
Respiratory Diseases

50 µg
N ~ 150

Diabetes Mellitus 1 or 2

50 µg
N ~ 200

- Day 29 immunogenicity compared between this population and adults ≥60 years in pivotal efficacy trial
- Participants followed for 24 months

Key Study Objectives

Study 303, Part A

Primary Objectives

1. Safety and tolerability of the vaccine in high-risk 18-59-year-olds
2. Compare RSV-A and RSV-B GMTs at Day 29 after a single dose of 50 µg in high-risk adults, 18-59 years, versus adults ≥60 years in the pivotal phase 2/3 efficacy trial
 - *Criteria for Noninferiority: 95% CI of GMR LB > 0.667*

Secondary Objective

Comparison of seroresponse rates (SRR) of 50 µg high-risk 18-59 years olds vs 50 µg ≥ 60-year-olds in pivotal efficacy study

- *Criteria for Noninferiority: 95% CI of SRR difference LB > -10%*

Underlying Medical Conditions of Study Participants

Physician-documentation required for all underlying medical conditions

- **CAD**
- **CHF***
- **Chronic respiratory disease**
 - COPD*
 - Persistent asthma – requiring ≥ 1 maintenance medication
 - Pulmonary fibrosis
 - Other chronic lung disease
- **Stable type 1 or type 2 diabetes mellitus**
 - Controlled with ≥ 1 medication started 90 days prior to Day 1

CAD, coronary artery disease; CHF, congestive heart failure; COPD, chronic obstructive pulmonary disease; RSV, respiratory syncytial virus.

*Severity of CHF and COPD assessed at baseline using NYHA Functional Classification for CHF (stage I, II, III, IV), or modified MRC Dyspnea Scale for COPD (stage 0,1,2,3,4)

Demographics of Study Participants

Study 303, Part A, Safety Set

Medical History Category	mRNA-1345 (50 µg)	
	18-59 years N = 502	50-59 years N = 306
Median Age, years (range)	53 (19-59)	56 (50-59)
Female, n (%)	269 (54%)	158 (52%)
Race/Ethnicity, n (%)		
White	401 (80%)	238 (78%)
Black or African American	85 (17%)	64 (21%)
Asian	4 (1%)	2 (1%)
Hispanic / Latino Ethnicity	140 (28%)	88 (29%)

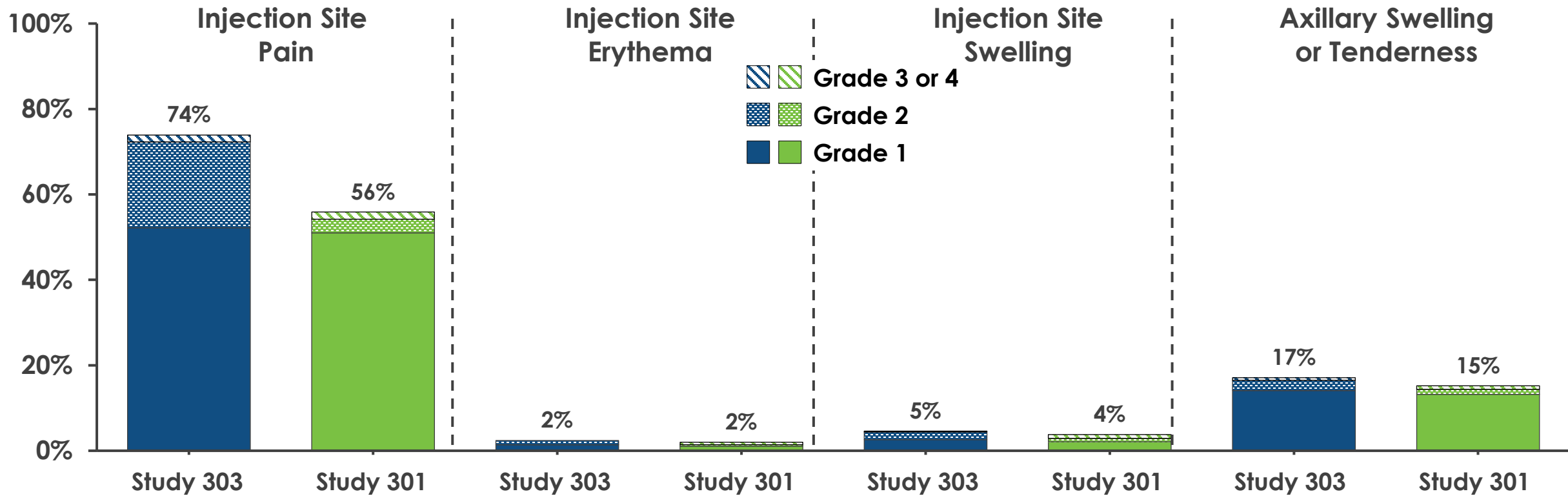
- Study population was racially/ethnically diverse

Safety – mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease

Study 303, Part A

Local Reactions - Vaccine Generally Well Tolerated in Adults, 18-59 Years, at Increased Risk for RSV Disease

Solicited Local Reactions within 7 Days of Injection compared to Older Adults ≥ 60 Years
Solicited Safety Set – Studies 303 Part A (N = 502) & 301 (N = 18,160)

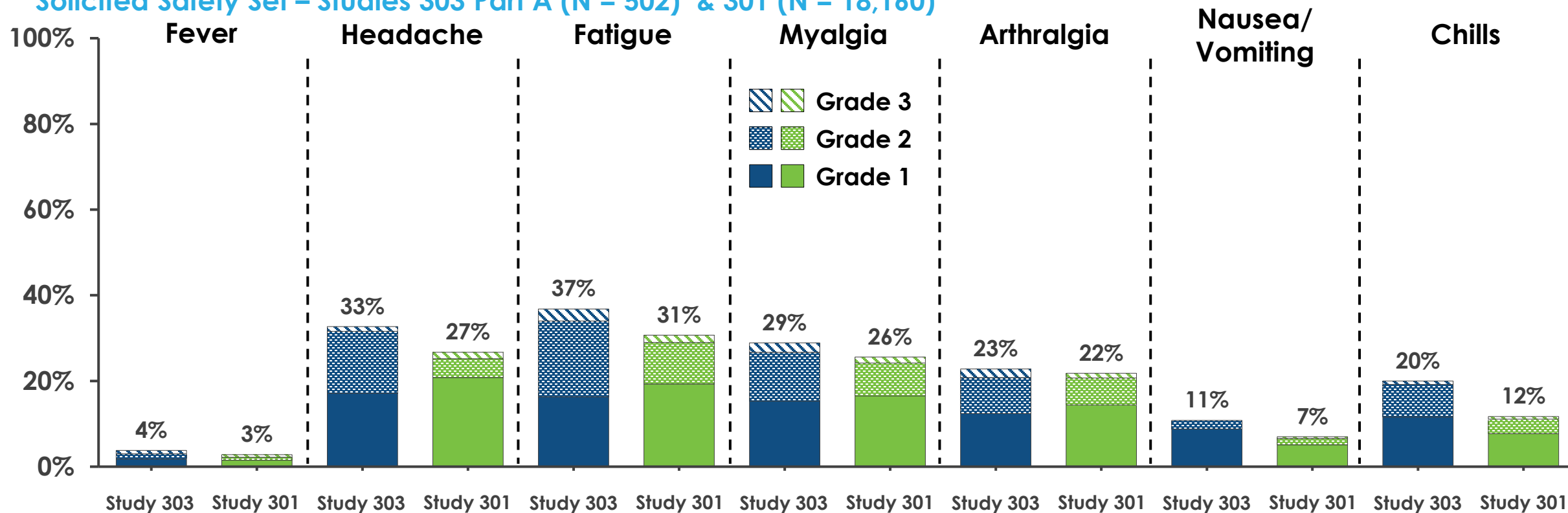


- Injection site pain was more common among high-risk adults, 18-59 years, than adults ≥ 60 years
- Rates of other local reactions generally similar across age groups
- Mostly grade 1-2, onset days 1-2; median duration of 2 days; 1 grade 4 pain

Systemic Reactions - Vaccine Generally Well Tolerated in Adults, 18-59 Years, at Increased Risk for RSV Disease

Solicited Systemic Reactions within 7 Days of Injection compared to Older Adults ≥ 60 Years

Solicited Safety Set – Studies 303 Part A (N = 502) & 301 (N = 18,160)



- Rates of systemic reactions generally similar or slightly higher among 18-59-year-olds vs adults ≥ 60 years old
- Mostly grade 1-2, onset days 1-2; median duration of 2 days; no grade 4 reactions

Unsolicited Adverse Events Within 28 Days After mRNA-1345 Regardless of Relationship to Study Vaccination

Study 303, Part A - Adults at Increased Risk of RSV – Safety Set

	mRNA-1345 18-59 years Total = 999	mRNA-1345 50-59 years N = 607
All, n (%)	226 (22.6%)	131 (21.6%)
Non-Serious	224 (22.4%)	129 (21.3%)
Serious	2 (0.2%)*	2 (0.3%)*
Fatal	0	0
Medically-Attended	117 (11.7%)	68 (11.2%)
Leading to Study Discontinuation	0	0
Severe	2 (0.2%)*	2 (0.3%)*
Any Adverse Event of Special Interest (AESI)	0	0

- No anaphylaxis, thrombocytopenia, Guillain-Barré syndrome, acute disseminated encephalomyelitis (ADEM), or acute myocarditis or acute pericarditis

Sept 18, 2024 data cutoff
30 µg, N=497; 50 µg, N=502

* 30 µg group, 50-59 year olds, unrelated to study injection by investigator: one case of pneumonia, one case of asthma exacerbation, both RSV RT-PCR negative

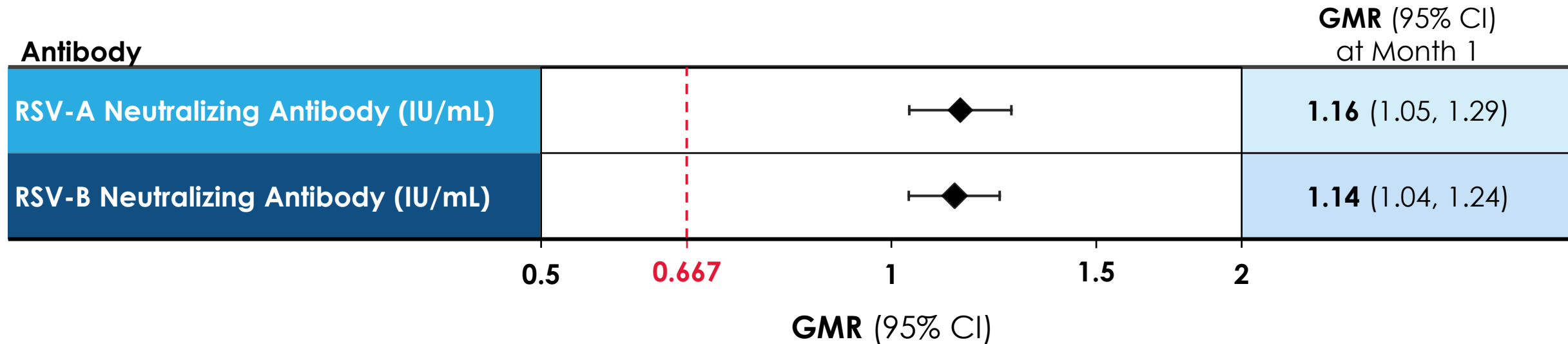
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Immunogenicity – mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease

Study 303, Part A

mRNA-1345 Vaccination (50 µg) in Adults, 18-59 Years at Increased Risk of RSV Disease Meets Pre-Specified Noninferiority Criteria - RSV-A and RSV-B

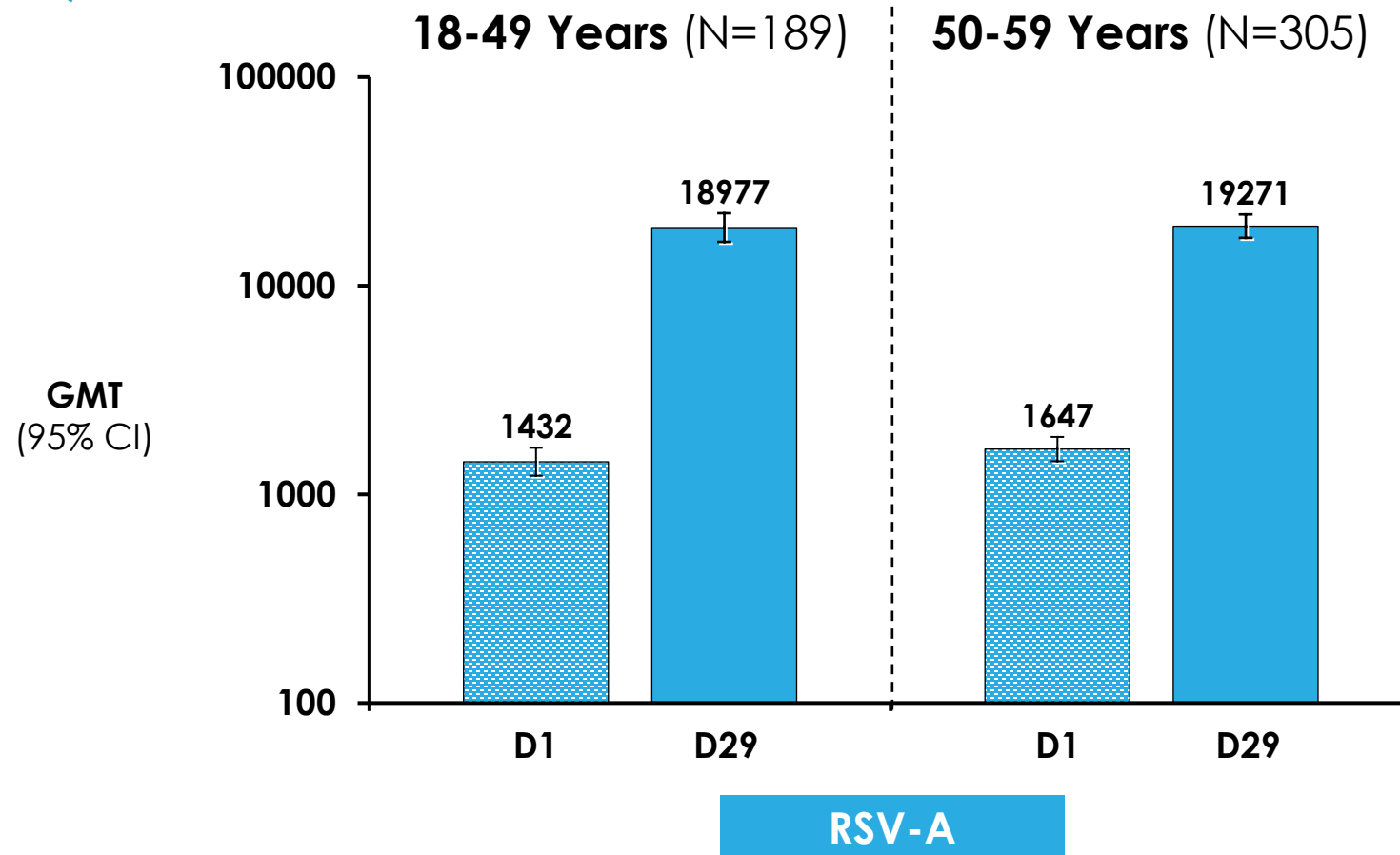
Study 303, Part A & Study 301



- All GMR non-inferiority criteria met (LB of the 2-sided 95% CI of GMR > 0.667) comparing 18-59-year-olds vs ≥60-year-olds in efficacy trial

RSV-A Neutralizing Antibody GMT after 50 µg of mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease, by Age

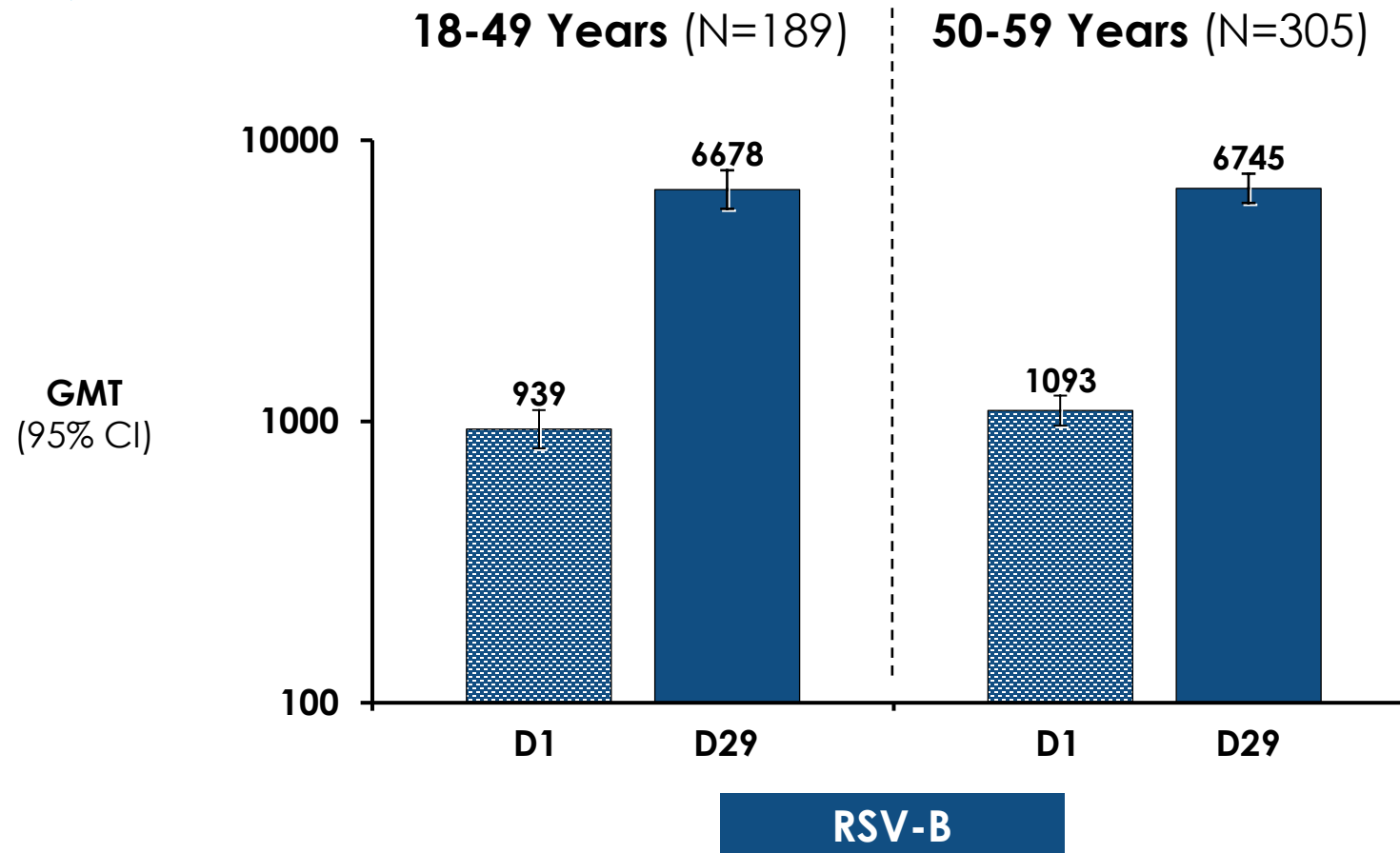
Study 303, Part A



RSV-A GMT comparable between 18-49 and 50-59 year olds

RSV-B Neutralizing Antibody GMT after 50 µg of mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease, by Age

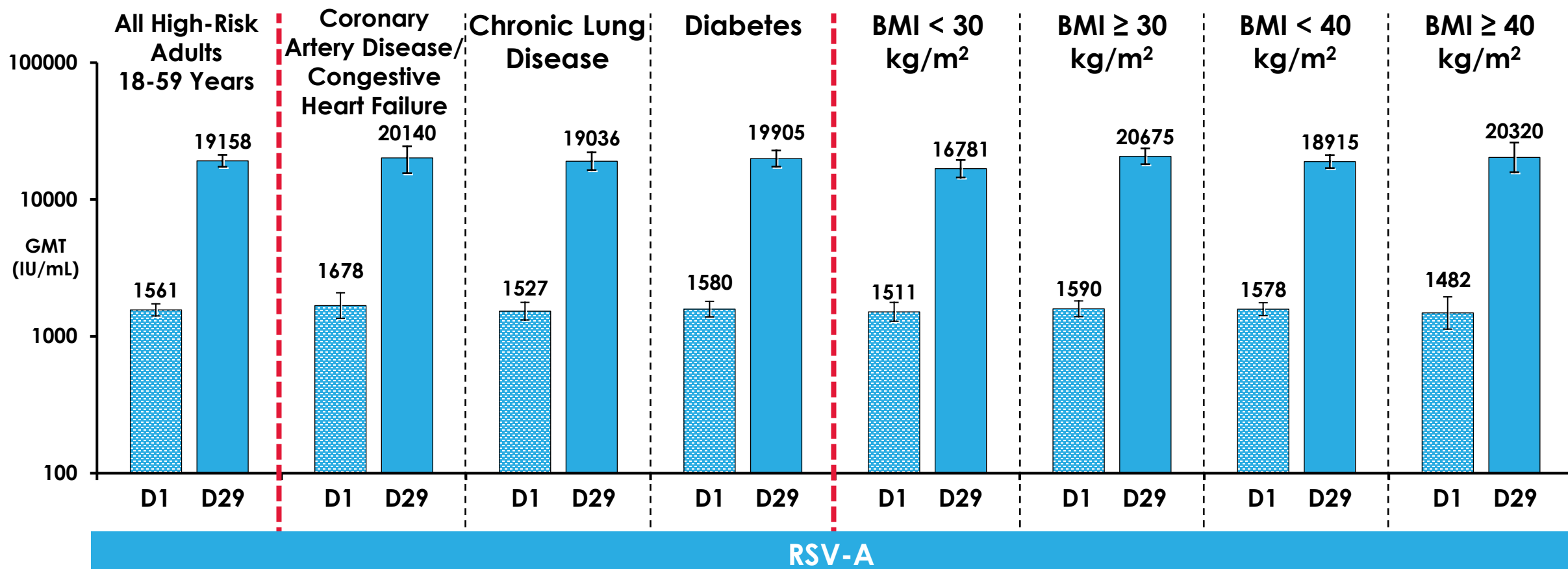
Study 303, Part A



RSV-B GMT comparable between 18-49 and 50-59 year olds

RSV-A Neutralizing Antibody GMT after 50 μ g of mRNA-1345 in Adults, 18-59 Years, at Increased Risk of RSV Disease by Primary Risk Factor and BMI

Study 303, Part A



- Individuals with medical risk factors for RSV show consistent RSV-A neutralizing antibody responses compared to entire study population; no impact of BMI on antibody response
- Similar results for RSV-B

Summary – RSV Vaccine (mRNA-1345) in Adults, 18-59 Years, at Increased Risk of RSV Disease

Safety

- Vaccine generally well tolerated across all ages
- No safety concerns identified (no reports of thrombocytopenia, GBS, ADEM, acute myocarditis and/or pericarditis)

Immunogenicity

- RSV-A & RSV-B immune responses non-inferior to adults ≥ 60 years in pivotal efficacy trial; similar efficacy inferred
- Immunogenicity consistent across age groups, including 50-59 years, and underlying medical conditions

Public Health Impact

- Substantial burden of RSV-associated hospitalizations in adults, 18-59 years
- mRNA-1345 has the potential to also protect adults, 18-59 years, at increased risk of severe RSV disease
- Data under review by FDA; PDUFA date June 12, 2025

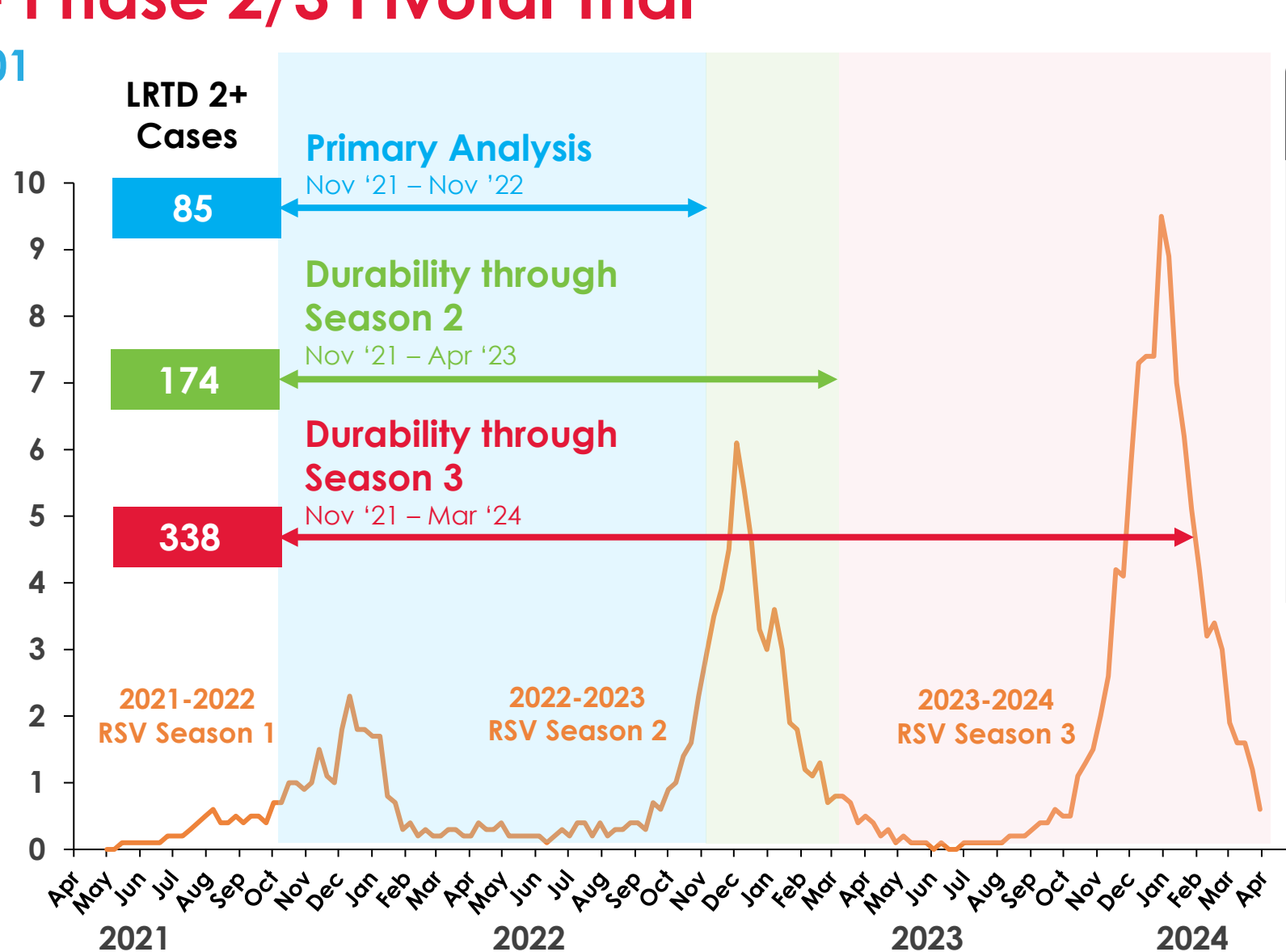
Revaccination of Healthy Adults at 12 or 24 Months

ESCMID 2025

RSV Case Accrual and Efficacy Analyses through 3 Seasons in the Phase 2/3 Pivotal Trial

Study 301

Overall US
2021-2023 RSV
Hospitalization
Rate per
100,000 Adults
≥ 65 Years¹



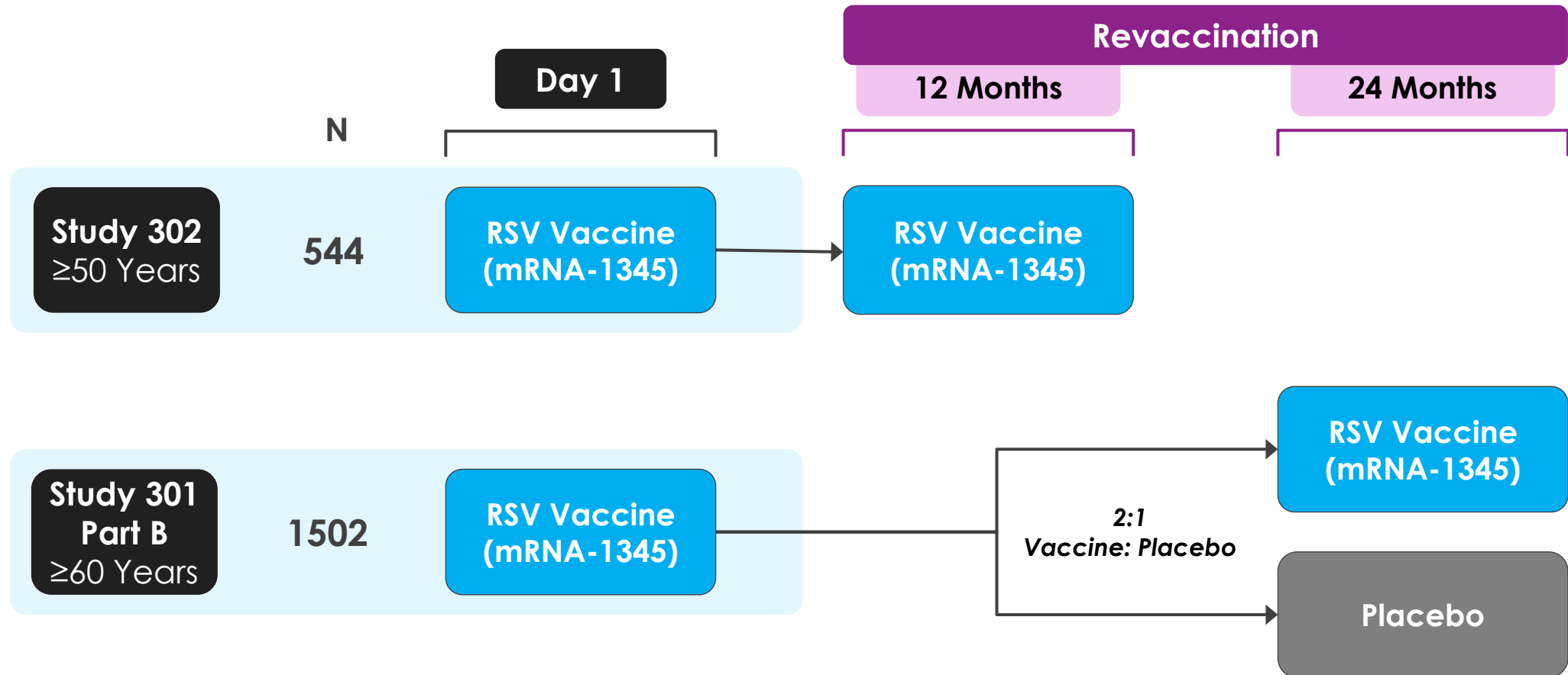
Efficacy²

LRTD 2+	Severe RSV (shortness of breath)
78.7% (62.8%, 87.9%)	86.7% (41.9%, 97.0%)
62.5% (47.7%, 73.1%)	74.6% (50.7%, 86.9%)
50.3% (37.5%, 60.7%)	56.7% (33.1%, 72.6%)

1. CDC. Respiratory Syncytial Virus Hospitalization Surveillance Network (RSV-NET). <https://www.cdc.gov/respiratory-viruses/data-research/dashboard/most-impacted-hospitalizations.html> 2. Based on final FDA Package Insert

Vaccination Regimens – Revaccination Studies in Adults

Study 302 & Study 301 (50 µg)

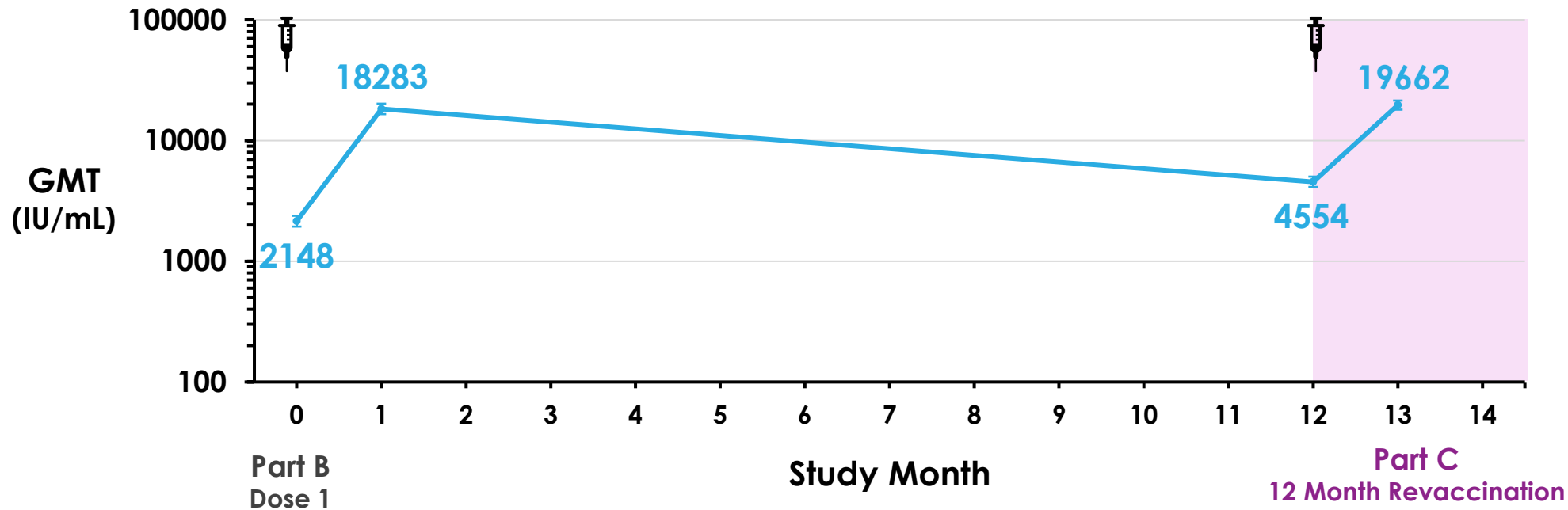


12-month data presented at June 2024 ACIP meeting

Revaccination at 12 Months with mRNA-1345 Meets Pre-Specified Noninferiority Criteria - RSV-A

Study 302C – Adults ≥50 Years – Per Protocol Set (N=524)

RSV-A Neutralizing Antibody



- RSV-A neutralizing antibodies detectable at 12 months post-vaccination
- Revaccination 1 year after primary vaccination elicits responses similar to those following primary dose
- Revaccination met non-inferiority success criteria for RSV-A & RSV-B (LB of 95% CI of GMR > 0.667)

24 Month Revaccination – Demographics of Study Participants

Study 301, Part B, Safety Set

		mRNA-1345 (50 µg) N = 998
Age (Years)	Median (range)	68.0 (60-91)
Sex, n (%)	Female	508 (51%)
Race/Ethnicity, n (%)	White	798 (80%)
	Black or African American	161 (16%)
	Asian	14 (1%)
	Hispanic / Latino Ethnicity	234 (23%)
Comorbidities, n (%)	≥1 Comorbidity	321 (32%)
	Diabetes (Type 1 or 2)	194 (19%)
	Asthma	85 (9%)
	Chronic Obstructive Pulmonary Disease (COPD)	54 (5%)
	Advanced Liver or Renal Disease	11 (1%)
	Chronic Heart Failure (CHF)	13 (1%)
Body Mass Index, n (%)	Chronic Respiratory Disease	2 (0.2%)
	≥30 kg/m²	317 (32%)

Safety – Revaccination at 24 Months

Safety - Revaccination at 24 Months with mRNA-1345

Study 301B, Adults ≥60 Years (N=998)

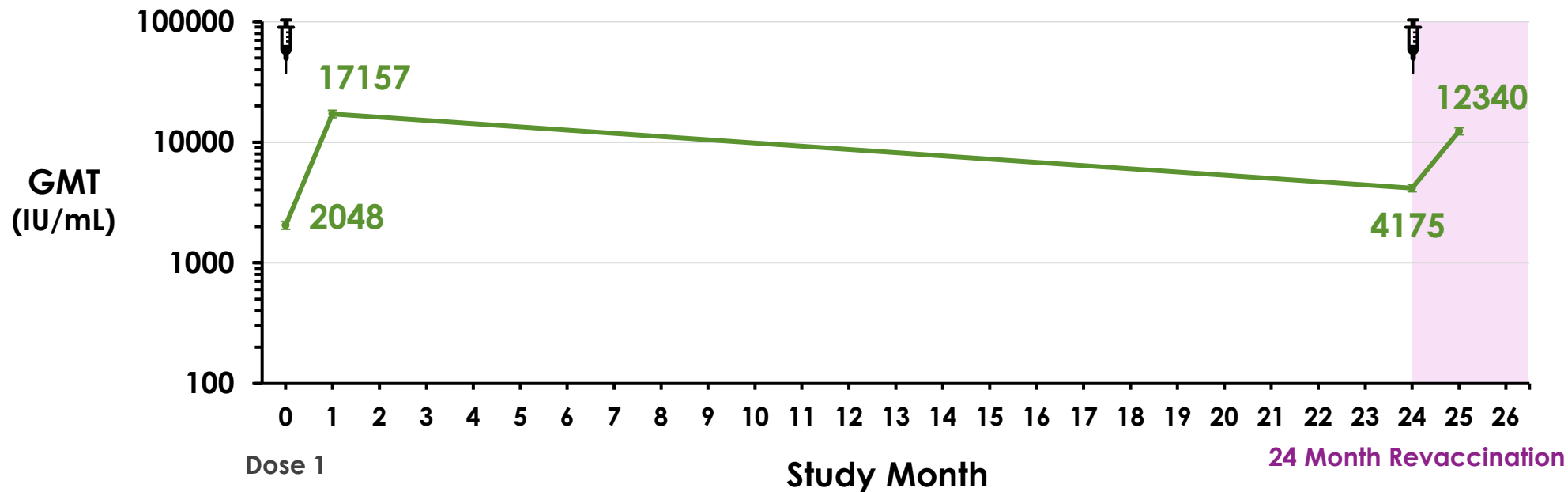
- **Revaccination generally well tolerated**
 - Local and systemic reactions were mainly Grade 1-2, with median onset on Day 2, and median 2-day duration
 - Comparable to reactogenicity after primary dose
- **No safety concerns identified**
- **No reports of:**
 - Deaths, SAEs, or AESIs as assessed as vaccine-related by the investigator
 - Anaphylaxis
 - Guillain Barre Syndrome
 - Acute disseminated encephalomyelitis (ADEM)
 - Acute myocarditis or acute pericarditis

Immunogenicity – Revaccination at 24 Months

Revaccination at 24 Months with mRNA-1345 Meets Pre-Specified Noninferiority Criteria - RSV-A

Study 301B – Adults ≥ 60 Years – Per Protocol Set (N=956)

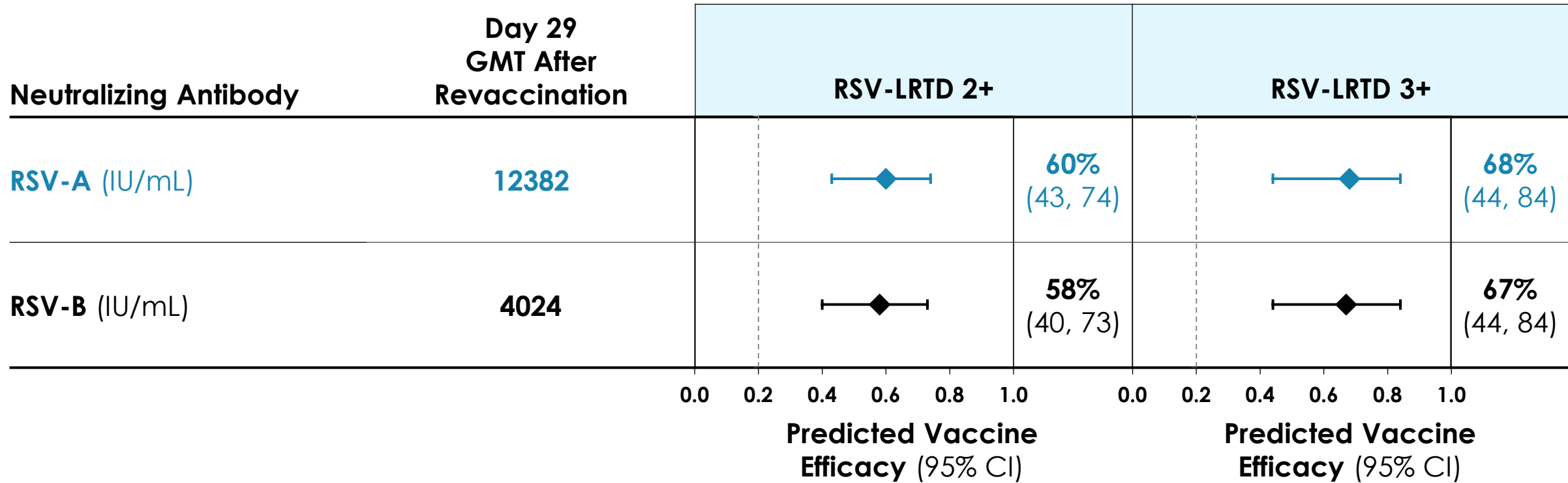
RSV-A Neutralizing Antibody



- RSV-A neutralizing antibodies detectable at 24 months post-vaccination
- Revaccination at 24 months after primary vaccination elicits responses similar to those following primary dose
- Revaccination met non-inferiority success criteria for RSV-A & RSV-B (LB of 95% CI of GMR > 0.667)

Predicted Vaccine Efficacy for the 12-Month Period Following 24 Month Revaccination with mRNA-1345

Study P301 Part B Per-Protocol Set ≥ 60 Years, N = 956



Correlate of protection model suggests revaccination restores vaccine efficacy

Summary – RSV Vaccine (mRNA-1345) Revaccination

Safety & Immunogenicity

- Revaccination generally well tolerated; no safety concerns identified
- No reports of GBS, ADEM, acute myocarditis and/or pericarditis
- Durability of immune response demonstrated out to 24 months
- Revaccination at 12 or 24 months:
 - Restores immune response; met noninferiority criteria
 - Expected to provide comparable vaccine efficacy to that after primary dose

Public Health Impact of Revaccination

- Revaccination has the potential to provide sustained protection against RSV

?????

GBS – Guillain-Barré syndrome, ADEM – acute disseminated encephalomyelitis

THANK YOU!

- Investigators
- Study site personnel
- Laboratory personnel
- **Most importantly, the individuals who participated in these trials**