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Overview of mRNA-1647: Investigational CMV Vaccine

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May 15, 2025

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Impact and Global Burden of Congenital CMV

Congenital CMV: A Major Public Health Burden

- Most common congenital viral infection and non-genetic cause of sensorineural hearing loss¹
- Major under-recognized cause of miscarriage, stillbirth, preterm birth, and infant death²⁻⁵

Annual Birth Prevalence

Global



1 in 70 to
1 in 208
births⁶

US



~1 in 200
births⁷

Economic & Clinical Impact

- \$6-7 billion annual healthcare costs in US (as of 2018)⁸
- Management of congenital CMV challenging due to limited prevention, inconsistent screening, and lack of treatment options¹



Significant Unmet Medical Need
High Priority for Vaccine Development by WHO & NAM

1. Boppana SB, et al. Vaccine. 2023;41:553-575. 2. Song X, et al. Front Pediatr. 2022;10:803568. 3. Iwasenko JM, et al. J Infect Dis. 2011;203(11):1526-1533. 4. Byrne J, et al. Am J Obstet Gynecol. 2015;213(6):905-906. 5. Kimberlin DW, et al. 2021. Red Book: 2021-2024 Report of the Committee on Infectious Diseases. American Academy of Pediatrics; doi:10.1542/9781610025782-53_037. 6. Ssentongo P, et al. JAMA Netw Open. 2021;4(8):e2120736. 7. CDC. CMV in Newborns. Updated January 7, 2025. <https://www.cdc.gov/cytomegalovirus/congenital-infection/index.html>. 8. Grosse SD, et al. Perinatol. 2021;45(3):151393.

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Clinical Manifestations of Congenital CMV (cCMV)

May be present at birth & may develop or progress throughout childhood

Infants with Congenital CMV (cCMV)

10%-15% Symptomatic at Birth

- CMV-associated **death** occurs during in ~5% of these infants
- **40%-58%** develop long-term disability
 - Symptoms include hearing loss, cognitive impairment, developmental delay, and seizures

85%-90% Asymptomatic at Birth

- **10%-15%** develop long-term disability, most commonly sensorineural hearing loss

~1 in 5 infants with cCMV (symptomatic or asymptomatic at birth) develop long-term disability

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CMV Vaccine Development Objective: Prevent CMV Infection in CMV-seronegative Women

Current Focus

- Prevent CMV infection during pregnancy to reduce congenital CMV
- Vaccinate women of child-bearing potential prior to pregnancy

**Women of
Childbearing Age**

**Pregnant
Women**

**Fetus Infected
with CMV**

mRNA-1647 vaccination
interrupts causal chain leading
to congenital infection

CMV infection in first
trimester presents highest
risk of congenital disease

Indication

- Prevention of CMV infection in females, 16-40 years of age, regardless of CMV serostatus

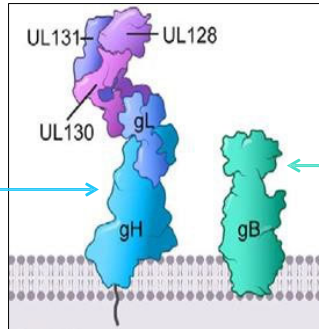
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Moderna's Investigational CMV Vaccine (mRNA-1647) Composed of 6 mRNAs Designed to Elicit Humoral and Cellular immunity to CMV Infection

Pentamer

- 5 mRNAs encode the pentamer subunits
- Required for CMV entry into most cell types, including epithelial and endothelial cells



gB

- 1 mRNA encodes glycoprotein B
- Mediates fusion of virus and host membranes during cell entry
- Necessary for viral infectivity in all cell types

- **Antigen selection chosen to:**
 - Prevent CMV infection and subsequent fetal transmission
 - Induce both humoral and cellular immune responses²⁻⁵
- **43-50% efficacy for CMV infection in 2 previous trials of recombinant gB candidate vaccine¹**

mRNA-1647 is an investigational vaccine, and the above diagram is for illustrative purposes only

CMV, cytomegalovirus; gB, glycoprotein B.

1. Diamond DJ, et al. Expert Rev Vaccines. 2018;17:889-911. 2. John S, et al. Vaccine. 2018;36:1689-1699. 3. Plotkin SA and Boppa SB. Vaccine. 2019;37:7437-7442.

4. Kabanova A, et al. PNAS. 2014;111:17965-17970. 5. Scarpani S, et al. Vaccines. 2021;9:1-26. 6. Pass et al. N Engl J Med 2009;360:1191-9. 7. Bernstein, et al. Vaccine 2016; 34:313-319.

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CMV Vaccine (mRNA-1647) Clinical Trials in Adults

Completed and ongoing trials

Population	Study	Phase	Age (Years)	mRNA-1647 Dose Levels (µg)	Objectives	Study Start	Status
Healthy Adults	101	1	18-49	30-300	Safety and immunogenicity	Nov 2017	Completed
	202	2	18-40	50-150	Safety, immunogenicity, and dose selection	Jan 2020	Completed
	202-Extension	2	18-40	50-150	Safety and immune persistence	May 2021	Ongoing
	301	3	16-40	100	Efficacy, safety, and immunogenicity in females	Oct 2021	Ongoing

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Summary: mRNA-1647 Phase 1 Trial in Adults (18-40 Years)

Design

- Randomized, observer blind, placebo-controlled trial
- 154 healthy participants, 18-49 years of age (13-19 per treatment group)
- 80 CMV-seronegative and 74 CMV-seropositive
- Followed for 12 months after last dose

Safety

- Generally well tolerated; no new safety concerns identified

Immunogenicity

- Neutralizing antibody responses
- Exploratory analysis of cell mediated immunity

- Data from Phase 1 allowed evaluation of an optimized dose range in Phase 2

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CMV mRNA-1647 Phase 2 Dose Selection Trial in 18-40 Year Olds

Design

- Randomized (3:1), observer blind, placebo-controlled trial
- 315 adult participants 18-40 years of age (63-109 per treatment group)
- 218 CMV-seronegative and 97 CMV-seropositive participants
- Followed for 12 months after last dose

Dosing 3-Dose Series (Month 0, 2 & 6)

Part 1: Dose Selection

- | | | |
|------------------|----|---------|
| mRNA-1647 50 µg | or | Placebo |
| mRNA-1647 100 µg | or | Placebo |
| mRNA-1647 150 µg | or | Placebo |

Part 2: Safety Expansion

- | | | |
|------------------|----|---------|
| mRNA-1647 100 µg | or | Placebo |
|------------------|----|---------|

Objectives

- **Primary:** Safety and neutralizing antibody responses
- **Secondary:** Binding antibody responses

- Focus of today's presentation on 100 ug dose selected for further study

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Neutralizing Antibody Response to mRNA-1647 Based on Both Epithelial and Fibroblast Cell Assays

Neutralizing Antibody	Vaccine Antigen	Biological Relevance
Epithelial cell infection	Pentamer	<ul style="list-style-type: none"> CMV infection of epithelial, endothelial, myeloid cells requires pentameric complex
Fibroblast infection	gB	<ul style="list-style-type: none"> Essential for viral entry and cell fusion Used to assess antibody responses to gB and other viral antigens Pentamer-specific antibodies <u>not</u> effectively measured by this assay

- Today we will present neutralizing antibody data
- Analysis of T-cell data is ongoing

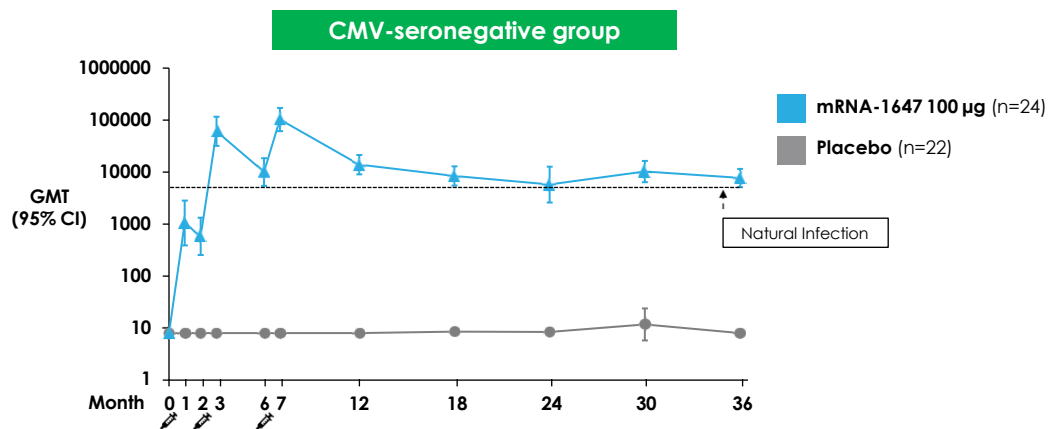
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Persistence of Neutralizing Antibodies Against Epithelial Cell Infection Demonstrated Through 3 Years After Vaccination

Interim analysis of participants followed for 36 months

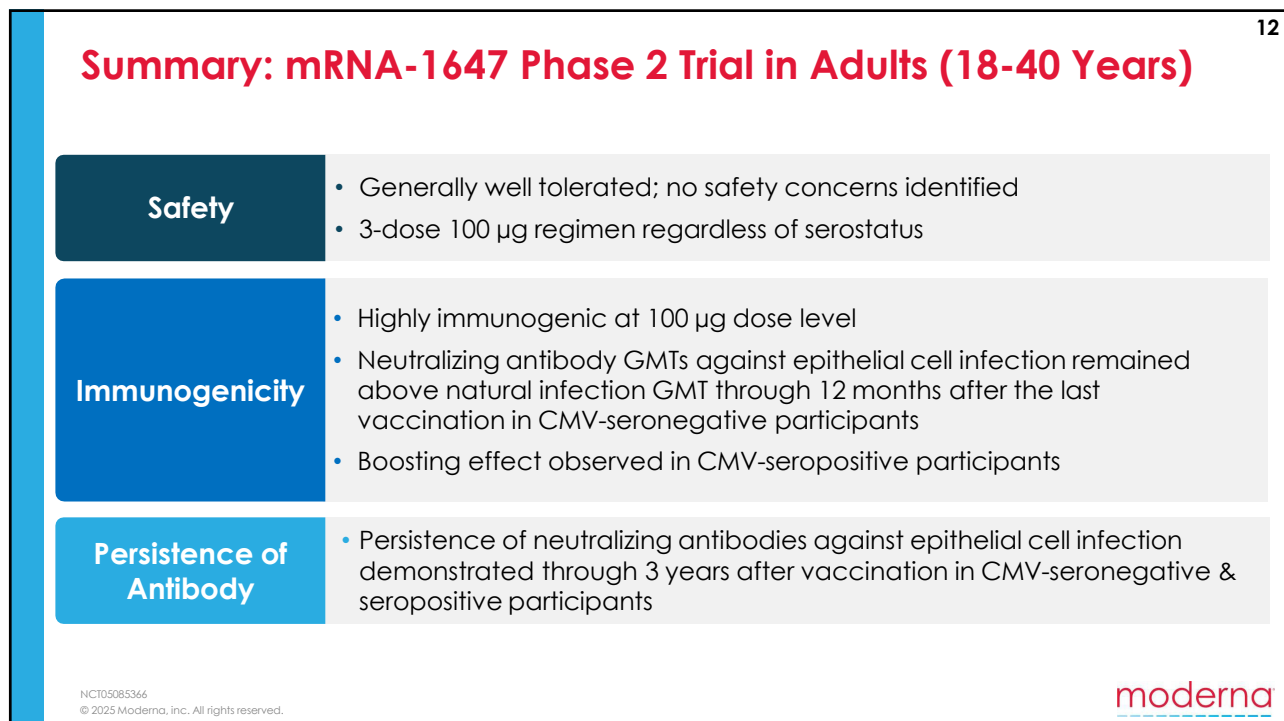
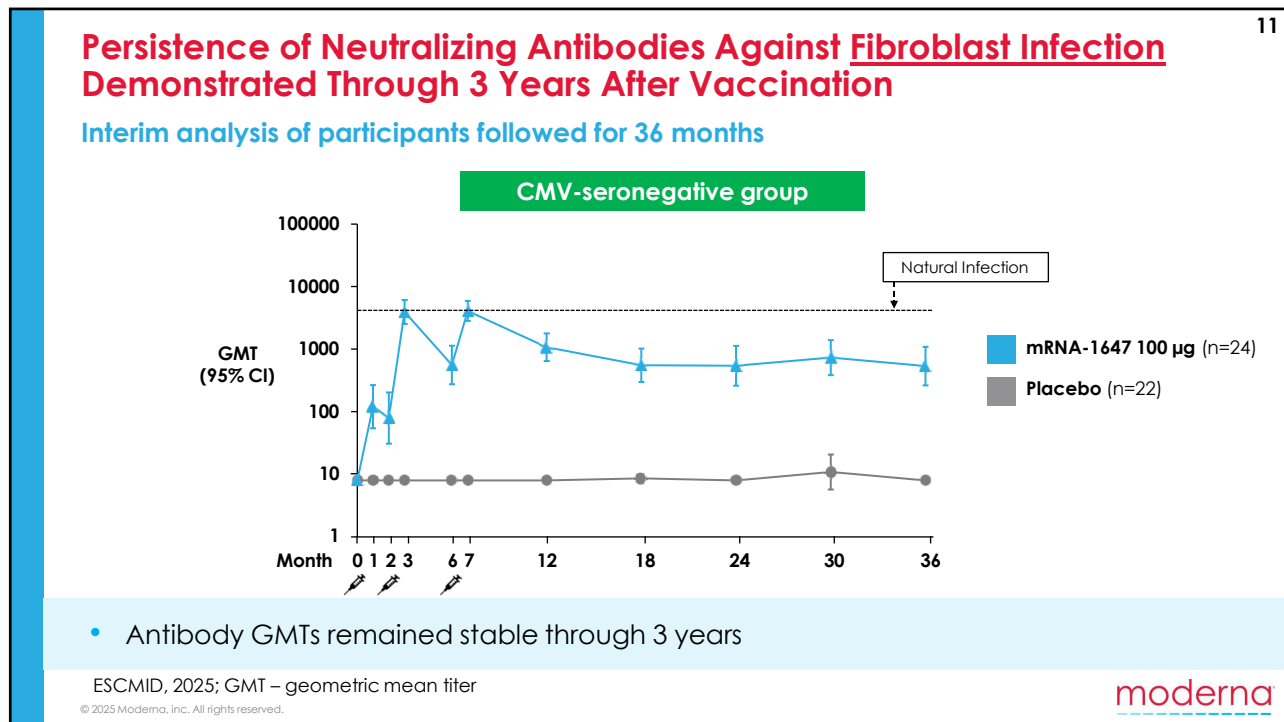


- Antibody GMTs remained stable
- nAb GMTs in CMV-seronegatives continued to exceed natural infection GMT through 3 years

ESCMID, 2025; GMT – geometric mean titer

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Design of mRNA-1647 Phase 3 Pivotal Efficacy Trial

Design	<ul style="list-style-type: none"> Randomized, observer-blind, placebo-controlled study
Study Population	<ul style="list-style-type: none"> CMV-seronegative (80%) and CMV-seropositive females (20%), 16 - 40 years of age Participants ≥ 20 years of age expected to have direct exposure in the home, socially, or occupationally to at least one child ≤ 5 years of age Pregnancy was exclusionary
Treatment Groups	<ul style="list-style-type: none"> Randomized 1:1 to receive 100 μg mRNA-1647 or placebo Doses at 0, 2, 6 months
Duration of Follow-up	<ul style="list-style-type: none"> 30 months

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mRNA-1647 Phase 3 Trial: Key Objectives and Endpoints

Objective		CMV Seronegatives	CMV Seropositives
Primary	<ul style="list-style-type: none"> Efficacy: Seroconversion from negative to positive serum CMV IgG starting 28 days after 3rd injection 	✓	
	<ul style="list-style-type: none"> Safety: Reactogenicity, adverse events 	✓	✓
Secondary	<ul style="list-style-type: none"> Immunogenicity: Neutralizing and binding antibody 	✓	✓
Additional	<ul style="list-style-type: none"> CMV Viral Shedding: Kinetics of CMV shedding in seronegatives who seroconverted 	✓	
	<ul style="list-style-type: none"> CMV Viral Shedding: Longitudinal shedding in urine of CMV seropositives 		✓

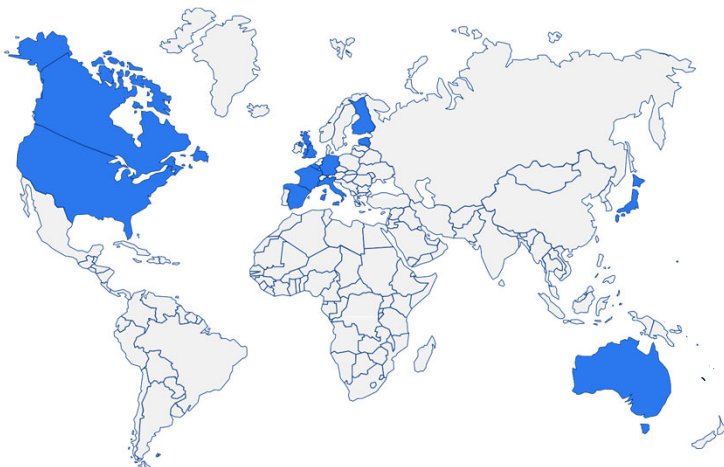
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Phase 3 Pivotal Efficacy Trial in 16–40-Year-Old Females is Ongoing

- 290 sites, 13 countries
- Enrollment completed Oct 2023
- 7,484 participants enrolled
 - 5,987 (80%) CMV-seronegative
 - 1,497 (20%) CMV-seropositive



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mRNA-1647 Phase 3 Efficacy Trial: Two Planned Analyses

Interim Efficacy Analysis

- Independent Data Safety Monitoring Board (DSMB) conducted comprehensive safety and efficacy evaluation, Dec 2024
- Notified Moderna that:
 - No safety concerns identified
 - Study should continue as planned in blinded manner

Final Efficacy Analysis

- Data anticipated late 2025

DSMB – Data Safety Monitoring Board
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Summary: Investigational CMV Vaccine mRNA-1647 in Adults

Safety

- Vaccine generally well tolerated in adults, 18-40 years, regardless of CMV serostatus, in Phase 1 & 2 trials
- No safety concerns identified from DSMB review of unblinded data in Phase 3 efficacy trial.

Immunogenicity

CMV Seronegatives:

- Vaccination elicited antibody-mediated immunogenicity that exceeded levels observed in natural infection
- Immune persistence observed through 3 years after vaccination

CMV Seropositives:

- Vaccination boosted immune responses above baseline after first dose

Efficacy

- Trial ongoing in seronegative and seropositive females, 16-40 years of age

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THANK YOU

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

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