Antag Therapeutics initiates Phase 1a trial of AT-7687, a first-in-class GIPR antagonist designed to address key gaps in obesity treatment

- *First subjects dosed in double-blind, placebo-controlled trial assessing AT-7687's safety, tolerability, pharmacokinetics, and metabolic effects in healthy lean subjects and subjects living with obesity*
- *With strong genetic and clinical validation, AT-7687 aims to induce weight loss without gastrointestinal side effects, a major challenge in obesity management*

Copenhagen, Denmark, 2 April 2025 – Antag Therapeutics ("Antag" or "the Company"), a biopharmaceutical company pioneering novel treatments for obesity, today announces the initiation of its first-in-human Phase 1 clinical trial evaluating AT-7687, a first-in-class Glucose-Dependent Insulinotropic Polypeptide Receptor (GIPR) antagonist. AT-7687 is designed to offer a new approach to obesity treatment by targeting the GIPR, a mechanism with strong genetic and clinical validation for its potential to improve weight loss efficacy and tolerability of incretin-based therapies.

Despite recent advances in obesity treatment, a substantial number of patients are unable to reach their weight loss targets on existing therapies, in addition to struggling with gastrointestinal side effects such as nausea and vomiting. Clinical studies indicate that these side effects are a leading cause of treatment discontinuation,[1] limiting the long-term health benefits of therapy – such as cardiovascular risk reduction – and ultimately leaving many people living with obesity without effective, sustainable treatment options. AT-7687 is uniquely designed to address these challenges by offering a targeted, well-tolerated obesity treatment, either as a monotherapy or in combination with other treatments such as the GLP-1 and amylin-based therapies. Moreover, AT-7687 has the potential to deliver additional cardiometabolic benefits such as improved glycemic control and body composition.

The Phase 1a trial is a double-blind, randomized, placebo-controlled study designed to evaluate the safety, tolerability, and pharmacokinetics of AT-7687. It will be conducted in healthy lean and healthy subjects living with obesity, with topline results expected in Q4 2025.

Following this study, the Company plans to investigate AT-7687 as a combination therapy in patients treated with a GLP-1 receptor agonist, with the study expected to commence at the end of 2025.

Jörg Möller, Chief Executive Officer of Antag Therapeutics, commented: *''The initiation of this Phase 1 trial represents a pivotal milestone for Antag and in advancing the chronic weight management paradigm for people living with obesity. While GLP-1-based therapies have transformed treatment options, many patients continue to face challenges with tolerability and long-term adherence. AT-7687 is uniquely designed to address these gaps, with remarkable potential both as a standalone therapy and as a powerful complement that may be flexibly combined with existing and future treatment options for more individualized therapy. By leveraging a novel mechanism of action, AT-7687 aims to deliver not only sustained and healthier weight loss, but comprehensive long-term benefits across a range of indications."*

1. Rodriguez PJ, Zhang V, Gratzl S, et al. Discontinuation and Reinitiation of Dual-Labeled GLP-1 Receptor Agonists Among US Adults With Overweight or Obesity. *JAMA Netw Open*. 2025;8(1):e2457349. doi:10.1001/jamanetworkopen.2024.57349

Richard Nkulikiyinka, Chief Medical Officer of Antag Therapeutics, added: *"AT-7687's mechanism targets key metabolic pathways that influence not only weight loss and maintenance, but also broader cardiometabolic health. By improving tolerability and addressing underlying metabolic drivers, AT-7687 has the potential for more sustainable and clinically meaningful outcomes in a much broader patient population than served by currently approved therapies. This Phase 1 trial will provide essential insights into how GIPR antagonism can enhance the current treatment paradigm."*

AT-7687 has demonstrated potential in preclinical models, achieving a profound body weight reduction in non-human primates over six weeks. Notably, when combined with a GLP-1 agonist, its weight loss effects were enhanced, suggesting a synergistic benefit for patients requiring combination therapy. Additionally, AT-7687 has shown excellent tolerability, with substantially lower gastrointestinal side effects than existing therapies, potentially improving long-term adherence and treatment outcomes.

-ENDS-

About Antag Therapeutics

Antag Therapeutics is a biopharmaceutical company committed to discovering and developing novel therapies for obesity and cardiometabolic diseases through GIP receptor antagonism. As a pioneer in exploring the potential of GIP receptor antagonists, the company is dedicated to advancing science and improving patient outcomes by delivering groundbreaking solutions that address unmet medical needs. For more information, please visit https://antagtherapeutics.com.

About AT-7687

The development of AT-7687 builds on the groundbreaking discovery of an endogenous GIPR antagonist by Professors Jens Holst, renowned for his discovery of GLP-1, and Mette Rosenkilde. In addition to promising preclinical data, the therapeutic potential of AT-7687 is further supported by robust human genetic validation, demonstrating that reducing GIP receptor activity is associated with leanness.

Contacts

Antag Therapeutics

Joerg Moeller, MD, PhD

CEO, Antag Therapeutics

Email: antag@antagtherapeutics.com

Antag Therapeutics Media Contacts

1. Rodriguez PJ, Zhang V, Gratzl S, et al. Discontinuation and Reinitiation of Dual-Labeled GLP-1 Receptor Agonists Among US Adults With Overweight or Obesity. *JAMA Netw Open.* 2025;8(1):e2457349. doi:10.1001/jamanetworkopen.2024.57349

ICR Healthcare

Davide Salvi, Lucy Featherstone

Email: antagtx@icrhealthcare.com

1. Rodriguez PJ, Zhang V, Gratzl S, et al. Discontinuation and Reinitiation of Dual-Labeled GLP-1 Receptor Agonists Among US Adults With Overweight or Obesity. *JAMA Netw Open*. 2025;8(1):e2457349. doi:10.1001/jamanetworkopen.2024.57349