19th March 2026

Dear members of SMA Europe,

Following your request for updates about our SMA clinical development programme, today I share the news that we have made the difficult decision not to advance emugrobart (an investigational anti-myostatin antibody, also known as GYM329) into Phase III development for SMA.

The decision to stop clinical development of emugrobart in SMA follows a comprehensive assessment of the totality of the evidence from Part 1 of the MANATEE (NCT05115110) study – a two-part, global Phase II/III study evaluating the safety and efficacy of emugrobart (GYM329) in combination with risdiplam. Unfortunately, emugrobart did not consistently deliver the improvements we hoped for in muscle growth and motor function compared to treatment with risdiplam alone in people living with SMA. This decision was not the result of any safety findings.

We recognise this news will be disappointing to the SMA community. We are profoundly grateful to the study participants, their caregivers, and study sites for their contributions to this important research. We would also like to use this opportunity to express our sincere thanks to SMA Europe for your support and ongoing advice regarding the clinical development of emugrobart in SMA. Your expertise has been invaluable on this journey.

Roche remains committed to advancing quality care for people living with SMA and we plan to share the data from MANATEE Part 1 at an upcoming medical conference so that this research can also help to inform the development of future treatments.

If you have any questions about the information provided, please do not hesitate to reach out.

Sincerely,

Louisa Danielle Townson

Louisa Townson, on behalf of the Roche Global SMA Team
Global Patient Partnership

Frequently Asked Questions

What did the MANATEE study investigate?

- The MANATEE clinical study was designed as a two-part Phase II/III study to evaluate the safety, efficacy, tolerability, pharmacokinetics and pharmacodynamics of emugrobart, an investigational anti-myostatin antibody, in combination with risdiplam for the treatment of people aged 2-25 years with SMA.
    - Part 1, the Phase II first part of the study, was the dose-finding part in children with SMA who are either ambulant (aged 2-10 years) or non-ambulant (aged 5-10 years).
    - Part 2 of the study (the pivotal Phase III part) had not been started, as it was designed to follow a successful Part 1.

Why has the MANATEE study been discontinued? Is it due to safety concerns?

- The MANATEE trial is not being discontinued due to any safety findings; emugrobart was well tolerated, with no serious adverse events that led to withdrawals
- The MANATEE clinical study is being discontinued following a rigorous analysis of Part 1 results which showed that emugrobart in combination with risdiplam did not meaningfully improve motor function across the ambulant and non-ambulant cohorts compared to treatment with risdiplam alone.

What will happen to participants who were involved in the MANATEE trial?

- If you are the caregiver of a MANATEE participant, we encourage you to reach out to your study physician for more information and detailed next steps.
- We are working with study doctors to ensure a smooth and safe transition - this will involve discontinuation of emugrobart and safety follow-up assessments. For participants for whom risdiplam is not reimbursed in their country, we may also support continued access to risdiplam as per the MANATEE-study protocol.
- We recognise the valuable contribution study participants made to advancing medical science and while this decision was not made lightly, we will ensure it is handled with care and responsibility.

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