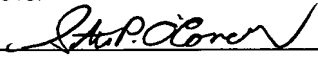


Certificate of Hand Delivery

I hereby certify that this correspondence is being filed with the United States Patent and Trademark Office to the Commissioner for Patents via hand delivery to the Office of Legal Administration, Room MDW 7B85, 600 Dulany Street (Madison Building), Alexandria, VA 22314, Attention: Mary Till on this 14 day of November 2016.

Signature of person delivering: 

Typed or printed name of person: STEVEN P. O'CONNOR 41,225

Docket No.: AVN-008CN25
(Patent)

RECEIVED

NOV 14 2016

PATENT EXTENSION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Stephen Donald WILTON *et al.*

Approved Product:
EXONDYS 51™ (eteplirsen)
NDA No.: 206488

Patent No.: 9,018,368 B2

U.S.F.D.A. Approval Date:
September 19, 2016

Issued: April 28, 2015

Assignee:
University of Western
Australia

For: ANTISENSE OLIGONUCLEOTIDES FOR
INDUCING EXON SKIPPING AND
METHODS OF USE THEREOF

Mail Stop HATCH-WAXMAN PTE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

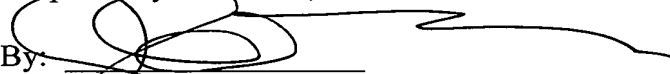
05/30/2017 SKOHAMN2 00000004 14316603
Exhibit N 1120.00 DA
01 FC:1457

CERTIFICATION

I, AMY E. MANDRAGOURAS, ESQ., do hereby certify that this accompanying application for extension of term of U.S. Patent No. 9,018,368 B2 under 35 U.S.C. §156 including its attachments and supporting papers is being submitted as one original and two (2) copies thereof, pursuant to 37 C.F.R. §1.740(b).

Dated: November 11, 2016


Respectfully submitted,

By: 

Amy E. Mandragouras, Esq.
Registration No.: 36,207
NELSON MULLINS RILEY & SCARBOROUGH LLP
One Post Office Square
Boston, Massachusetts 02109-2127
(617) 217-4626
(617) 742-4214 (Fax)
Attorney/Agent For Applicants

Certificate of Hand Delivery

I hereby certify that this correspondence is being filed with the United States Patent and Trademark Office to the Commissioner for Patents via hand delivery to the Office of Legal Administration, Room MDW 7B85, 600 Dulany Street (Madison Building), Alexandria, VA 22314, Attention: Mary Till on this 14 day of November 2016.

Signature of person delivering: 

Typed or printed name of person: STEVEN P. O'CONNOR 41,225

RECEIVED

NOV 14 2016

PATENT EXTENSION

OPLA
Docket No.: AVN-008CN25

(Patent)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Stephen Donald Wilton *et al.*

Patent No.: 9,018,368 B2

NDA No.: 206488

Issued: April 28, 2015

Assignee: University of Western
Australia

For: ANTISENSE OLIGONUCLEOTIDES FOR
INDUCING EXON SKIPPING AND
METHODS OF USE THEREOF

U.S. F.D.A. Approval Date:
September 19, 2016

Mail Stop HATCH-WAXMAN PTE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**APPLICATION FOR EXTENSION OF PATENT TERM
UNDER 35 U.S.C. §156**

Dear Sir:

The University of Western Australia hereby requests an extension of the patent term of the above-identified patent under 35 U.S.C. §156. The instant request for patent term extension is timely because it is being submitted within the sixty-day period beginning on the date the product received permission under the provision of law under which the applicable regulatory review period occurred for commercial marketing or use. 35 U.S.C. §156(d)(1). Applicants represent that The University of Western Australia is empowered to request the instant patent term extension because The University of Western Australia is the sole owner of the instant patent, as evidenced by the assignment recorded at: Reel 035009 and Frame 0811 on February

23, 2015 from inventors Stephen Donald Wilton, Sue Fletcher, and Graham McClorey to The University of Western Australia.

I, Amy E. Mandragouras, represent that I am a registered practitioner appointed by the patent owner of record, The University of Western Australia, and am filing this Application for Extension of Patent Term on behalf thereof. A Power of Attorney, authorizing me to act on behalf of The University of Western Australia is attached hereto as Exhibit A.

Sarepta Therapeutics, Inc. and Sarepta International CV (collectively, "Sarepta") are the exclusive licensees of U.S. Patent No. 9,018,368 by virtue of an Amended and Restated Exclusive License Agreement effective as of November 24, 2008 and restated as of April 10, 2013. Sarepta was the marketing applicant of the approved product, EXONDYS 51™ (eteplirsen) injection, before the Food and Drug Administration. Applicants submit that there has been an agency relationship between The University of Western Australia and Sarepta during the regulatory review period of EXONDYS 51™ (eteplirsen) injection. To show that The University of Western Australia is authorized to rely upon the activities of Sarepta before the Food and Drug Administration, a copy of a letter from Sarepta specifically authorizing The University of Western Australia to rely upon such activities and file this Extension of Patent Term based on the regulatory review period of EXONDYS 51™ (eteplirsen) injection is attached as Exhibit B. 37 C.F.R. § 1.730 and M.P.E.P. 2752.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

(1) The approved product, EXONDYS 51™ (eteplirsen) injection, is an antisense oligonucleotide of the phosphorodiamidate morpholino oligomer (PMO) subclass.

The chemical names of eteplirsen include:

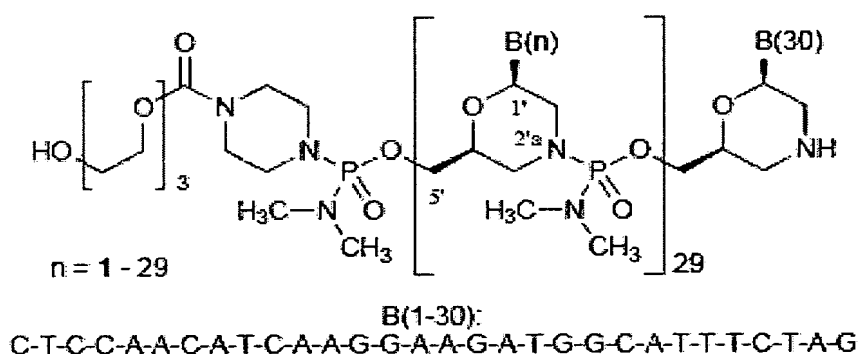
RNA, [*P*-deoxy-*P*-(dimethylamino)](2',3'-dideoxy-2',3'-imino-2',3'-seco)(2'a→5')(C-m5U-C-C-A-A-C-A-m5U-C-A-A-G-G-A-A-G-A-m5U-G-G-C-A-m5U-m5U-m5U-C-m5U-A-G), 5'-[*P*-[4-[[2-[2-(2-hydroxyethoxy)ethoxy]ethoxy]carbonyl]-1-piperazinyl]-*N,N*-dimethylphosphonamidate]

and

P,2',3'-trideoxy-*P*-(dimethylamino)-5'-*O*-{*P*-[4-(10-hydroxy-2,5,8- trioxadecanoyl)piperazin-1-yl]-*N,N*-dimethylphosphonamidoyl}-2',3'-imino-2',3'- secocytidylyl-(2'a→5')-*P*,3'-dideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')- *P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,3'-dideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoguanilyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoguanilyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoguanilyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-*P*,3'-dideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-2',3'-imino-2',3'-secoguanilyl-(2'a→5')-*P*,2',3'-trideoxy-*P*-(dimethylamino)-

2',3'-imino-2',3'-secoguanlyl-(2'a→5')-P,2',3'-trideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')-P,2',3'-trideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secoadenylyl-(2'a→5')-P,3'-dideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-P,3'-dideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-P,3'-dideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secothymidylyl-(2'a→5')-P,2',3'-trideoxy-P- (dimethylamino)-2',3'-imino-2',3'-secocytidylyl-(2'a→5')-P,3'-dideoxy-P-(dimethylamino)- 2',3'-imino-2',3'-secothymidylyl-(2'a→5')-P,2',3'-trideoxy-P-(dimethylamino)-2',3'-imino- 2',3'-secoadenylyl-(2'a→5')-2',3'-dideoxy-2',3'-imino-2',3'-secoguanosine.

The chemical structure of eteplirsen is:



(2) The approved product, EXONDYS 51™ (eteplirsen), was subject to regulatory review under the Federal Food, Drug, and Cosmetic Act (FDCA), Section 505(b).

(3) The approved product, EXONDYS 51™ (eteplirsen), received permission for commercial marketing or use under Section 505(b) of the Federal Food, Drug and Cosmetic Act (FDCA) on September 19, 2016. A copy of the Approval Letter from the Food and Drug Administration is attached as Exhibit C.

(4) The active ingredient in EXONDYS 51™ is eteplirsen, which on information and belief, has not been approved for commercial marketing or use under Section 505 of the Federal

Food, Drug, and Cosmetic Act prior to the approval of NDA 206488 for EXONDYS 51™ by the Food and Drug Administration on September 19, 2016. A copy of the package insert describing the approved product is attached as Exhibit D.

(5) This application for extension of patent term under 35 U.S.C. §156 is being submitted within the sixty-day period pursuant to 37 C.F.R. 1.720(f), said period will expire on November 17, 2016, if September 19, 2016, is day one (1) of the sixty (60) day period.

(6) The complete identification of the patent for which a term extension is being sought is as follows:

| | |
|------------------|--|
| Inventors: | Stephen Donald Wilton; Sue Fletcher; Graham McClorey |
| Patent No.: | 9,018,368 |
| Issue Date: | April 28, 2015 |
| Expiration Date: | June 28, 2025 (subject to a terminal disclaimer over U.S. Patent Nos: 7,807,816, 7,960,541, and 8,486,907) |

(7) A true and complete copy of the patent for which an extension is being sought is attached as Exhibit E.

(8) No reexamination certificate or certificate of correction has been issued on this patent. A copy of the terminal disclaimer filed on February 26, 2015 over U.S. Patent Nos. 7,807,816, 7,960,541, and 8,486,907 is attached as Exhibit F. A copy of the maintenance fee statement indicating payment of the four-year maintenance fee is due by April 29, 2019 is attached as Exhibit G.

(9) Claims 1 and 2 of U.S. Patent No. 9,018,368 claim the active ingredient of the approved product, which is EXONDYS 51™. A complete claim chart that lists each applicable claim of U.S. Patent No. 9,018,368 and demonstrates the manner in which each applicable claim reads on the approved product is attached as Exhibit H.

(10) The relevant dates and information pursuant to 35 U.S.C. §156(g) to enable the Secretary of Health and Human services to determine the applicable regulatory review period are as follows:

Investigational New Drug Application (IND 77,429) for EXONDYS 51™ was submitted on August 2, 2007 and became effective on June 25, 2010. A copy of the IND submission letter and a copy of the letter from the Food and Drug administration establishing the effective date of the IND are attached as Exhibits I and J, respectively.

New Drug Application (NDA 206488) for EXONDYS 51™ was submitted to FDA on a rolling basis, and the submission of the NDA was completed on June 26, 2015. A copy of the NDA submission letter and a copy of the letter from the Food and Drug Administration confirming the completion of the application and submission of the NDA on this date are attached as Exhibits K and L, respectively.

New Drug Application (NDA 206488) for EXONDYS 51™ was approved on September 19, 2016. A copy of the Approval Letter from the Food and Drug Administration is attached as Exhibit C.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

(11) A brief description of the significant activities undertaken by the marketing applicant, Sarepta Therapeutics, Inc., during the applicable regulatory review period with respect to EXONDYS 51™ and the dates applicable to these significant activities are set forth in a chronology of events at Exhibit M.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

(12)(i) U.S. Patent No. 9,018,368 is eligible for extension of the patent term under 35 U.S.C. §156 because it satisfies all of its requirements for such extension. For the convenience of the Patent and Trademark Office, the requirements for extension of a patent under 35 U.S.C. §156 are presented in a format which follows Section 156 of Title 35 of the United States Code.

(a) 35 U.S.C. §156 - U.S. Patent No. 9,018,368 claims the product EXONDYS 51™.

(b) 35 U.S.C. §156(a)(1) - U.S. Patent No. 9,018,368 has not expired before submission of the instant application.

(c) 35 U.S.C. §156(a)(2) – The term of U.S. Patent No. 9,018,368 has never been extended under 35 U.S.C. §156(e)(1).

(d) 35 U.S.C. §156(a)(3) – The application for extension is submitted by the owner of record of the patent in accordance with the requirements of paragraph (1) through (4) of 35 U.S.C. §156(d) and the rules of the Patent and Trademark Office.

(e) 35 U.S.C. §156(a)(4) – The product EXONDYS 51™ has been subject to a regulatory review period before its commercial marketing or use.

(f) 35 U.S.C. §156(a)(5)(A) – The permission for the commercial marketing or use of the product EXONDYS 51™ after the regulatory review period is the first permitted commercial marketing or use of the product EXONDYS 51™ under the provision of the Federal Food, drug, and Cosmetic Act (i.e., Section 505) under which such regulatory review period occurred.

(g) 35 U.S.C. §156(c)(4) – No other patent has been extended under 35 U.S.C. §156(e)(i) for the same regulatory review period for any product, including the product EXONDYS 51™. Applicants draw the Office's attention to the "Notice Regarding Multiple Applications" herein below.

(12)(ii) The length of the extension of patent term of U.S. Patent No. 9,018,368 claimed by Applicants is that period authorized by 35 U.S.C. §156(c), which has been calculated to be 481 days. The length of the extension was determined pursuant to Section 1.775 of Title 37 of the Code of Federal regulations as follows:

(a) The length of the regulatory review period under 37 C.F.R. 1.775(c) is calculated as beginning on June 25, 2010 and ending on September 19, 2016, which is a total of 2,279 days, which is the sum of (1) and (2) below:

(1) The number of days in the "Testing Phase" under 35 U.S.C. §156(g)(1)(B)(i), which is calculated to be 1,827 days, which is the period beginning on the date an exemption under subsection (i) of Section 505 of the Federal Food, drug, and Cosmetic Act became effective for the approval of EXONDYS 51™, which is June 25, 2010, and ending on the date an application was initially submitted for the product EXONDYS 51™ under such section, which is June 26, 2015; and

(2) The number of days in the "Approval Phase" under 35 U.S.C. 156(g)(1)(B)(ii), which is calculated to be 452 days, which is the number of days in the period beginning on the date the application was initially submitted for the approved product EXONDYS 51™ under subsection (b) of Section 505 of the Federal Food, Drug, and Cosmetic Act, which is June 26, 2015, and ending on the date such application was approved under such section, which is September 19, 2016.

(b) The term of the patent as extended is determined by:

(1) Subtracting from the length of the regulatory review period under 37 C.F.R. §1.775(c) calculated according to sub-paragraph (12)(ii)(a) above (2,279 days), the sum of the periods (A) to (C) below, which is calculated to be 1,798 days, to arrive at a period of 481 days:

(A) The number of days in the regulatory review period which were on and before the date on which the patent issued (April 28, 2015), which is calculated to be 1,769 days; and

(B) The number of days in the regulatory review period during which applicant did not act with due diligence, which is zero (0) days; and

(C) One-half the number of days remaining in the regulatory review period determined by sub-paragraph (12)(ii)(a)(1) (i.e., the Testing Phase) after that period is reduced in accordance with the determinations of sub-paragraphs (12)(ii)(b)(1)(A) and (12)(ii)(b)(1)(B) immediately above ignoring any half-days (one-half of 58 (i.e., 1,827 days-1,769 days)), which is 29 days.

(c) The number of days as determined in sub-paragraph (12)(ii)(b) (481 days) when added to the expiration date of the original term of U.S. Patent No. 9,018,368 (June 28, 2025) would result in the date of October 22, 2026.

(d) Adding fourteen (14) years to the date of approval of the application under subsection (b) of Section 505 of the Federal Food, Drug, and Cosmetic Act (September 19, 2016) is determined to be September 19, 2030.

(e) Comparing the date for the end of the period obtained pursuant to sub-paragraph (12)(ii)(c), which is October 22, 2026, with the date for the end of the period obtained pursuant to sub-paragraph (12)(ii)(d), which is September 19, 2030, the earlier of October 22, 2026 is selected.

(f) Because U.S. Patent No. 9,018,368 was issued after September 24, 1984, the dates under sub-paragraphs (12)(f)(1) and (12)(f)(2) are determined:

(1) the date obtained by adding five (5) years to the original expiration date of U.S. Patent No. 9,018,368 as shortened by any terminal disclaimer, which is June 28, 2030; and

(2) the date obtained in sub-paragraph (12)(ii)(e), which is October 22, 2026.

(g) Comparing the date determined under sub-paragraph (12)(ii)(f)(1) and (12)(ii)(f)(2) and selecting the earlier date results in a selection of October 22, 2026.

(h) In summary, Applicants' calculation of the extension of the patent term under 35 U.S.C. 156 for U.S. Patent No. 9,018,368 results in a period of extension of 481 days, thereby extending the patent term from June 28, 2025 to October 22, 2026.

(13) Applicants acknowledge a duty to disclose to the Director of the United States Patent and Trademark Office and the Secretary of Health and Human Services any information which is material to the determination of entitlement to the extension sought.

Notice Regarding Multiple Applications

Applicants are contemporaneously filing an application for term extension on one additional patent that it owns (U.S. Patent No. 7,807,816; Reissue Application No. 15/349,535) based on the same regulatory review period for EXONDYS 51™. Applicants will make an election of only one patent in accordance with 37 C.F.R. §1.785(b) upon receipt of notice of final determination in these applications from the U.S. Patent and Trademark Office.

(14) The Commissioner is hereby authorized by this paper to charge the required fee of \$1,120.00 under 37 C.F.R. 1.20(j)(1) or any additional amount due or credit any overpayment to Deposit Account 12-0080.

(15) All correspondence and inquiries may be directed to the undersigned, whose address, telephone number, and fax number are as follows:

Amy E. Mandragouras, Esq.

NELSON MULLINS RILEY & SCARBOROUGH LLP

One Post Office Square

Boston, Massachusetts 02109-2127

Phone: 617-217-4626

Fax: 617-742-4214

Customer Number 123147

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

(16) Applicants hereby certify that the instant application for extension of patent term under 35 U.S.C. §156 including all exhibits and supporting papers is being submitted as one original and two (2) additional copies thereof at Exhibit N pursuant to 37 C.F.R. §1.740(b).

Dated: November 11, 2016

Respectfully submitted,

By: 

Amy E. Mandragouras, Esq.

Registration No.: 36,207

NELSON MULLINS RILEY & SCARBOROUGH LLP

One Post Office Square

Boston, Massachusetts 02109-2127

(617) 217-4626

(617) 742-4214 (Fax)

Attorney/Agent For Applicants

EXHIBIT A

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

Exhibit A

Doc Code: PA.
 Document Description: Power of Attorney

PTO/AIA/82A (07-13)
 Approved for use through 11/30/2014. OMB 0651-0051
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FOR POWER OF ATTORNEY TO ONE OR MORE REGISTERED PRACTITIONERS

NOTE: This form is to be submitted with the Power of Attorney by Applicant form (PTO/AIA/82B) to identify the application to which the Power of Attorney is directed, in accordance with 37 CFR 1.5, unless the application number and filing date are identified in the Power of Attorney by Applicant form. If neither form PTO/AIA/82A nor form PTO/AIA/82B identifies the application to which the Power of Attorney is directed, the Power of Attorney will not be recognized in the application.

| | |
|------------------------|--|
| Application Number | 14/316,603 |
| Filing Date | June 26, 2014 |
| First Named Inventor | Stephen Donald WILTON |
| Title | ANTISENSE OLIGONUCLEOTIDES FOR INDUCING EXON SKIPPING AND METHODS OF USE THEREOF |
| Art Unit | 1674 |
| Examiner Name | K. Chong |
| Attorney Docket Number | AVN-008CN25 |

SIGNATURE of Applicant or Patent Practitioner

| | | | |
|--|-----------------------------|---------------------|-------------------|
| Signature | /Amy E. Mandragouras, Esq./ | Date (Optional) | February 23, 2015 |
| Name | Amy E. Mandragouras, Esq. | Registration Number | 36,207 |
| Title (if Applicant is a juristic entity) | | | |
| Applicant Name (if Applicant is a juristic entity) | | | |

NOTE: This form must be signed in accordance with 37 CFR 1.33. See 37 CFR 1.4(d) for signature requirements and certifications. If more than one applicant, use multiple forms.

*Total of 1 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.6(a)(4).

Dated: February 23, 2015

Electronic Signature for Amy E. Mandragouras, Esq.: /Amy E. Mandragouras, Esq./

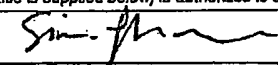
| POWER OF ATTORNEY BY APPLICANT | | | | | |
|---|--|-------------|--------------------------------------|-----------------|------------|
| I hereby revoke all previous powers of attorney given in the application identified in either the attached transmittal letter or the boxes below. | | | | | |
| Application Number | | Filing Date | | | |
| | | | | | |
| (Note: The boxes above may be left blank if information is provided on form PTO/AIA/82A.) | | | | | |
| <input checked="" type="checkbox"/> | I hereby appoint the Patent Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s), and to transact all business in the United States Patent and Trademark Office connected therewith for the application referenced in the attached transmittal letter (form PTO/AIA/82A) or identified above: 123147 | | | | |
| OR | | | | | |
| <input type="checkbox"/> | I hereby appoint Practitioner(s) named in the attached list (form PTO/AIA/82C) as my/our attorney(s) or agent(s), and to transact all business in the United States Patent and Trademark Office connected therewith for the patent application referenced in the attached transmittal letter (form PTO/AIA/82A) or identified above. (Note: Complete form PTO/AIA/82C.) | | | | |
| Please recognize or change the correspondence address for the application identified in the attached transmittal letter or the boxes above to: | | | | | |
| <input checked="" type="checkbox"/> | The address associated with the above-mentioned Customer Number | | | | |
| OR | | | | | |
| <input type="checkbox"/> | The address associated with Customer Number: | | | | |
| OR | | | | | |
| Firm or Individual Name | Amy E. Mandragouras, Esq. NELSON MULLINS RILEY & SCARBOROUGH LLP | | | | |
| Address | One Post Office Square | | | | |
| City | Boston | State | MA | Zip | 02109-2127 |
| Country | US | | | | |
| Telephone | (800) 237-2000 | Email | ipboston.docketing@nelsonmullins.com | | |
| I am the Applicant (if the Applicant is a juristic entity, list the Applicant name in the box): | | | | | |
| The University of Western Australia | | | | | |
| <input type="checkbox"/> Inventor or Joint Inventor (title not required below) | | | | | |
| <input type="checkbox"/> Legal Representative of a Deceased or Legally Incapacitated Inventor (title not required below) | | | | | |
| <input checked="" type="checkbox"/> Assignee or Person to Whom the Inventor is Under an Obligation to Assign (provide signer's title if applicant is a juristic entity) | | | | | |
| <input type="checkbox"/> Person Who Otherwise Shows Sufficient Proprietary Interest (e.g., a petition under 37 CFR 1.46(b)(2) was granted in the application or is concurrently being filed with this document). (provide signer's title if applicant is a juristic entity) | | | | | |
| SIGNATURE of Applicant for Patent | | | | | |
| The undersigned (whose title is supplied below) is authorized to act on behalf of the applicant (e.g., where the applicant is a juristic entity). | | | | | |
| Signature |  | | | Date (Optional) | 16 May 14 |
| Name | Simon J. Handford | | | | |
| Title | Associate Director, Research Development and Innovation | | | | |
| NOTE: Signature - This form must be signed by the applicant in accordance with 37 CFR 1.33. See 37 CFR 1.4 for signature requirements and certifications. If more than one applicant, use multiple forms. | | | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | | | |

EXHIBIT B

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



SAREPTA

November 10, 2016

Via First Class Mail

The University of Western Australia
35 Stirling Highway
Crawley, WA 6009
Australia

Attn: Director, Office of Industry and Innovation

Re: U.S. Patent No. 7,807,816 B2 Issued: October 5, 2010
U.S. Patent No. 9,018,368 B2 Issued: April 28, 2015
Inventor(s): Stephen Donald Wilton et al.
Assignee: The University of Western Australia
Titled: Antisense Oligonucleotides for Inducing Exon Skipping and Methods of Use Thereof

Dear Sir:

As you know, Sarepta Therapeutics, Inc. ("Sarepta") received approval of its NDA for EXONDYS 51™ (eteplirsén) on September 19, 2016 from the U.S. Department of Health and Human Services, Food and Drug Administration ("FDA"). In addition, The University of Western Australia ("UWA") will timely file an Application for Patent Term Extension Under 35 U.S.C. §156 in the United States Patent and Trademark Office in connection with the above-identified patents.

This letter serves to acknowledge the "agency relationship" (as defined in section 2752 of the Manual of Patent Examining Procedure) between UWA as the owner of the above-identified patents and Sarepta as the marketing applicant before the FDA during the regulatory review period. This letter further specifically authorizes UWA as the applicant for Patent Term Extension to rely on the activities of Sarepta as the marketing applicant before the FDA.

If you have any questions, please do not hesitate to contact me.

Very Truly Yours,

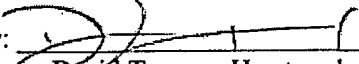
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SAREPTA

Sarepta Therapeutics, Inc.

Sarepta International C.V.,
by ST International Holdings, Inc., its general
partner

By: 
Name: ~~David~~ Tyronne Howton, Jr.
Title: Senior Vice President, General Counsel and
Corporate Secretary

By: _____
Name: Heidi Abreu King-Jones
Title: Vice President
Date: November 10, 2016
Location: Bermuda

cc: Amy E. Mandragouras, Esq.
Erika L. Wallace, Ph.D.

[Sarepta Letter of Authorization to UWA]

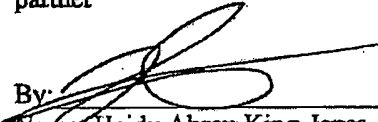


SAREPTA

Sarepta Therapeutics, Inc.

Sarepta International C.V.,
by ST International Holdings, Inc., its general
partner

By: _____
Name: David Tyrone Howton, Jr.
Title: Senior Vice President, General Counsel and
Corporate Secretary

By: 
Name: Heidi Abreu King-Jones
Title: Vice President
Date: November 10, 2016
Location: Bermuda

cc: Amy E. Mandragouras, Esq.
Erika L. Wallace, Ph.D.

[Sarepta Letter of Authorization to UWA]

EXHIBIT C

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



NDA 206488

ACCELERATED APPROVAL

Sarepta Therapeutics, Inc.
Attention: Shamim Ruff, MSc.
Sr. Vice President, Regulatory Affairs and Quality
215 First Street, Suite 415
Cambridge, MA 02142

Dear Ms. Ruff:

Please refer to your New Drug Application (NDA) dated June 26, 2015, received June 26, 2015, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Exondys 51 (eteplirsen) Injection, 50 mg per mL.

We acknowledge receipt of your major amendment dated January 8, 2016, which extended the goal date by three months.

This new drug application provides for the use of Exondys 51 (eteplirsen) Injection, 50 mg per mL, for the treatment of Duchenne muscular dystrophy (DMD) in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved under the provisions of accelerated approval regulations (21 CFR 314.500), effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text. Marketing of this drug product and related activities must adhere to the substance and procedures of the referenced accelerated approval regulations.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling (text for the package insert). Information on submitting SPL files using eLIST may be found in the guidance for industry titled "SPL Standard for Content of Labeling Technical Qs and As" at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND IMMEDIATE CONTAINER LABELS

Submit final printed carton and container labels that are identical to the carton and immediate container labels submitted on March 28, 2016, as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled "Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008)." Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission "**Final Printed Carton and Container Labels for approved NDA 206488.**" Approval of this submission by FDA is not required before the labeling is used.

Marketing the product(s) with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

In addition, we refer to your June 10, 2016, submission in which you commit to implement the carton container label revisions requested in our June 6, 2016, correspondence. Specifically, you agree to remove the reference to the compendial grades from the carton labels at the time of next printing, but no later than 120 days post-approval, and to notify us of this change via submission of a "Changes Being Effected" supplemental application.

PRODUCT QUALITY

Based on evaluation of the stability data provided, an expiration dating period of 18 months is established for eteplirsen injection when stored refrigerated (5°C).

RARE PEDIATRIC DISEASE PRIORITY REVIEW VOUCHER

We also inform you that you have been granted a rare pediatric disease priority review voucher, as provided under section 529 of the FDCA. This priority review voucher (PRV) has been assigned a tracking number: PRV NDA 206488. All correspondences related to this voucher should refer to this tracking number.

This voucher entitles you to designate a single human drug application submitted under section 505(b)(1) of the FDCA or a single biologic application submitted under section 351 of the Public Health Service Act as qualifying for a priority review. Such an application would not have to meet any other requirements for a priority review. The list below describes the sponsor responsibilities and the parameters for using and transferring a rare pediatric disease priority review voucher:

- The sponsor who redeems the priority review voucher must notify FDA of its intent to submit an application with a priority review voucher at least 90 days before submission of the application, and must include the date the sponsor intends to submit the application. This notification should be prominently marked, "Notification of Intent to Submit an Application with a Rare Pediatric Disease Priority Review Voucher."
- This priority review voucher may be transferred, including by sale, by you to another sponsor of a human drug or biologic application. There is no limit on the number of

times that the priority review voucher may be transferred, but each person to whom the priority review voucher is transferred must notify FDA of the change in ownership of the voucher not later than 30 days after the transfer. If you retain and redeem this priority review voucher, you should refer to this letter as an official record of the voucher. If the priority review voucher is transferred, the sponsor to whom the priority review voucher has been transferred should include a copy of this letter (which will be posted on our Web site as are all approval letters) and proof that the priority review voucher was transferred.

- FDA may revoke the priority review voucher if the rare pediatric disease product for which the priority review voucher was awarded is not marketed in the U.S. within 1 year following the date of approval.
- The sponsor of an approved rare pediatric disease product application who is awarded a priority review voucher must submit a report to FDA no later than 5 years after approval that addresses, for each of the first 4 post-approval years:
 - the estimated population in the U.S. suffering from the rare pediatric disease for which the product was approved (both the entire population and the population aged 0 through 18 years),
 - the estimated demand in the U.S. for the product, and
 - the actual amount of product distributed in the U.S.
- You may also review the requirements related to this program at <http://www.gpo.gov/fdsys/pkg/PLAW-112publ144/pdf/PLAW-112publ144.pdf> (see Section 908 of FDASIA on pages 1094-1098 which amends the FD&C Act by adding Section 529). Formal guidance about this program will be published in the future.

ACCELERATED APPROVAL REQUIREMENTS

Products approved under the accelerated approval regulations, 21 CFR 314.510, require further adequate and well-controlled clinical trials to verify and describe clinical benefit. You are required to conduct such clinical trials with due diligence. If postmarketing clinical trials fail to verify clinical benefit or are not conducted with due diligence, we may, following a hearing in accordance with 21 CFR 314.530, withdraw this approval. We remind you of your postmarketing requirement specified in your submission dated August 4, 2016. This requirement, along with required completion dates as agreed upon on September 16, 2016, is listed below.

- 3095-1 In order to verify the clinical benefit of eteplirsen, conduct a 2-year randomized, double-blind, controlled trial of eteplirsen in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping. Patients should be randomized to the approved dosage of eteplirsen (30 mg/kg weekly) or to a dosage that provides significantly higher exposure, e.g., 30 mg/kg daily. The primary endpoint will be the North Star Ambulatory Assessment.

Draft Protocol Submission: 10/2016
Final Protocol Submission: 04/2017
Trial Completion: 11/2020
Final Report Submission: 05/2021

You should allow sufficient time for the Agency to review, provide feedback, and come to concurrence on the protocol prior to initiation of the trial.

Submit clinical protocol to your IND 077429 for this product. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each requirement in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial.

Submit final reports to this NDA as a supplemental application. For administrative purposes, all submissions relating to this postmarketing requirement must be clearly designated “**Subpart H Postmarketing Requirement(s)**.”

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because this drug product for this indication has an orphan drug designation, you are exempt from this requirement.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the FDCA authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to identify an unexpected serious risk of carcinogenicity or an unexpected serious risk of immunogenicity.

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following:

3095-2 A two-year carcinogenicity study of intravenously administered eteplirsen in rat.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

| | |
|----------------------------|---------|
| Draft Protocol Submission: | 12/2016 |
| Final Protocol Submission: | 03/2017 |
| Study Completion: | 04/2020 |
| Final Report Submission: | 06/2020 |

- 3095-3 A 26-week carcinogenicity study of eteplirsen, administered by a clinically relevant route, in an appropriate transgenic mouse model.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

Draft Protocol Submission: 10/2016
Final Protocol Submission: 01/2017
Study Completion: 05/2018
Final Report Submission: 06/2018

You should allow sufficient time for the Agency to review, provide feedback, and come to concurrence on these protocols prior to beginning the studies.

- 3095-4 A study to evaluate:

1. patient immune responses, including IgM and IgG isotypes, to eteplirsen, its induced dystrophin protein, and full length dystrophin;
2. the impact of immune responses on product PK and clinical efficacy and safety.

The assays for antibodies to eteplirsen, the induced dystrophin, and full length dystrophin should be performed with sampling times optimized to detect early, peak, and late antibody responses, and should be fully validated.

3. for subjects whose serum screens positive for antibodies, the samples should be tested for neutralizing activity, to product activity, and/or product uptake. Antibody titer and persistence should be monitored throughout the duration of the study.
4. in patients who seroconvert, antibody levels should be monitored until they return to baseline.
5. for patients developing hypersensitivity responses, assays to evaluate IgE responses including skin testing or RAST assays should be developed and employed.

Until these assays have been fully validated and reviewed by FDA, sufficient samples should be banked and stored under appropriate conditions so as to allow for re-testing if deemed necessary.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

Draft Protocol Submission: 01/2017
Final Protocol Submission: 08/2017
Study Completion: 12/2017
Final Report Submission: 02/2018

Additional guidance for immunogenicity assay development, though more specific for therapeutic protein products, may be found in the draft guidance: "Assay Development and Validation for Immunogenicity Testing of Therapeutic Protein Products"

<http://www.fda.gov/downloads/Drugs/.../Guidances/UCM192750.pdf>. You should allow sufficient time for the Agency to review, provide feedback, and come to concurrence on the protocols prior to initiation of the studies.

Submit the protocols to your IND 077429, with a cross-reference letter to this NDA. Submit all final reports to your NDA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate: **“Required Postmarketing Protocol Under 505(o),” “Required Postmarketing Final Report Under 505(o),” “Required Postmarketing Correspondence Under 505(o).”**

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 314.81(b)(2)(vii) requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 314.81(b)(2)(vii) to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 314.81(b)(2)(vii). We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

- 3095-5 Conduct a 2-year controlled trial in patients who have a confirmed mutation of the DMD gene that is amenable to exon 45 or 53 skipping with a phosphorodiamidate morpholino oligomer (PMO) designed to bind to a regulatory site governing splicing of the corresponding exon. The trial should include at least two well-separated doses of each PMO, with the high dose designed to provide the greatest dystrophin response possible, based upon preliminary dose-finding, with an expectation of acceptable tolerability. The primary objective of this study will be to evaluate the effect of the two PMO doses (combined-active group) compared to control on the North Star Ambulatory Assessment. The secondary objective will be to evaluate dystrophin levels as percent of normal by Western blot, with tissue to be obtained by needle biopsy.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

Draft Protocol Submission: 12/2016
Final Protocol Submission: 04/2017
Trial Completion: 04/2021
Final Report Submission: 10/2021

A double-blind, placebo-controlled trial design should be used, if feasible, as this would be most informative. If it is not feasible to include a placebo group, an untreated concurrent control group may be considered, with appropriate care to reduce bias in outcome assessments given the lack of randomization and blinding. You should allow sufficient time for the Agency to review, provide feedback, and come to concurrence on the protocol prior to initiation of the trial.

POSTMARKETING COMMITMENTS NOT SUBJECT TO THE REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

- 3095-6 Evaluate possible reasons for the upward trend in assay results from drug product stability studies. Initial investigations are expected to focus on any potential degradants that could co-elute with the main peak, re-authentication of the concentration of the reference standard solution, and quality attributes of the IP-HPLC reagents. Identify any other potential causes for the upward trend observed in the drug product stability.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

Final Protocol Submission: 11/2016
Study Completion: 06/2017
Final Report Submission: 08/2017

If you believe proposed changes to your manufacturing and control procedures are warranted based on the data derived from this study, we request that you submit the final report for this study as a supplement to your approved NDA.

- 3095-7 Revalidate the suitability in-process (b)(4) used during drug product manufacture with respect to the accuracy of the method and the robustness of the method in terms of (b)(4). Explore additional possible root causes for the bias in the in-process (b)(4) results and the release (b)(4) results that were observed at lot release.

The timetable you submitted on September 16, 2016, states that you will conduct this study according to the following schedule:

Final Protocol Submission: 11/2016
Study Completion: 06/2017
Final Report Submission: 08/2017

If you believe proposed changes to your manufacturing and control procedures are warranted based on the data derived from this study, we request that you submit the final report for this study as a supplement to your approved NDA.

Submit clinical protocols to your IND 077429 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “**Postmarketing Commitment Protocol,**” “**Postmarketing Commitment Final Report,**” or “**Postmarketing Commitment Correspondence.**”

PROMOTIONAL MATERIALS

Under 21 CFR 314.550, you are required to submit, during the application pre-approval review period, all promotional materials, including promotional labeling and advertisements, that you intend to use in the first 120 days following marketing approval (i.e., your launch campaign). If you have not already met this requirement, you must immediately contact the Office of Prescription Drug Promotion (OPDP) at (301) 796-1200. Please ask to speak to a regulatory project manager or the appropriate reviewer to discuss this issue.

As further required by 21 CFR 314.550, submit all promotional materials that you intend to use after the 120 days following marketing approval (i.e., your post-launch materials) at least 30 days before the intended time of initial dissemination of labeling or initial publication of the advertisement. We ask that each submission include a detailed cover letter together with three copies each of the promotional materials, annotated references, and approved package insert (PI)/Medication Guide/patient PI (as applicable).

Send each submission directly to:

OPDP Regulatory Project Manager
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotions (OPDP)
5901-B Ammendale Road
Beltsville, MD 20705-1266

Alternatively, you may submit promotional materials for accelerated approval products electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft Guidance for Industry (available at: <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf>).

REPORTING REQUIREMENTS

We remind you that you must comply with the reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>.

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biologics qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

PDUFA V APPLICANT INTERVIEW

FDA has contracted with Eastern Research Group, Inc. (ERG) to conduct an independent interim and final assessment of the Program for Enhanced Review Transparency and Communication for NME NDAs and Original BLAs under PDUFA V ('the Program'). The PDUFA V Commitment Letter states that these assessments will include interviews with applicants following FDA action on applications reviewed in the Program. For this purpose, first-cycle actions include approvals, complete responses, and withdrawals after filing. The purpose of the interview is to better understand applicant experiences with the Program and its ability to improve transparency and communication during FDA review.

ERG will contact you to schedule a PDUFA V applicant interview and provide specifics about the interview process. Your responses during the interview will be confidential with respect to the FDA review team. ERG has signed a non-disclosure agreement and will not disclose any identifying information to anyone outside their project team. They will report only anonymized results and findings in the interim and final assessments. Members of the FDA review team will be interviewed by ERG separately. While your participation in the interview is voluntary, your feedback will be helpful to these assessments.

FDA BENEFIT-RISK FRAMEWORK APPLICANT INTERVIEW

FDA has also contracted with Eastern Research Group, Inc. (ERG) to conduct an assessment of FDA's initial phase implementation of the Benefit-Risk Framework (BRF) in human drug review. A key element of this evaluation includes interviews with applicants following FDA approval of New Molecular Entity (NME) New Drug Applications (NDAs) and original Biologic

License Applications (BLAs). The purpose of the interview is to assess the extent to which the BRF provides applicants with a clear understanding of the reasoning behind FDA's regulatory decisions for NME NDAs and original BLAs.

ERG will contact you to schedule a BRF applicant interview and provide specifics about the interview process. Your responses during the interview will be confidential with respect to the FDA review team. ERG has signed a non-disclosure agreement and will not disclose any identifying information to anyone outside their project team. They will report only anonymized results and findings in the interim and final reports. Members of the FDA review team will be interviewed by ERG separately. While your participation in the interview is voluntary, your feedback will be helpful to this evaluation.

If you have any questions, contact Fannie Choy, Regulatory Project Manager, by phone or email at (301) 796-2899 or fannie.choy@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

Janet Woodcock, M.D.
Director
Center for Drug Evaluation and Research

ENCLOSURE(S):
Content of Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

JANET WOODCOCK
09/19/2016

EXHIBIT D

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

Exhibit D

HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use EXONDYS 51™ safely and effectively. See full prescribing information for EXONDYS 51.

EXONDYS 51 (eteplirsen) injection, for intravenous use
Initial U.S. Approval: 2016

INDICATIONS AND USAGE

EXONDYS 51 is an antisense oligonucleotide indicated for the treatment of Duchenne muscular dystrophy (DMD) in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping. This indication is approved under accelerated approval based on an increase in dystrophin in skeletal muscle observed in some patients treated with EXONDYS 51 [see *Clinical Studies (14)*]. A clinical benefit of EXONDYS 51 has not been established. Continued approval for this indication may be contingent upon verification of a clinical benefit in confirmatory trials. (1)

DOSAGE AND ADMINISTRATION

- 30 milligrams per kilogram of body weight once weekly (2.1)

- Administer as an intravenous infusion over 35 to 60 minutes (2.1, 2.3)
- Dilution required prior to administration (2.2)

DOSAGE FORMS AND STRENGTHS

Injection:

- 100 mg/2 mL (50 mg/mL) in single-dose vial (3)
- 500 mg/10 mL (50 mg/mL) in single-dose vial (3)

CONTRAINDICATIONS

None (4)

ADVERSE REACTIONS

The most common adverse reactions (incidence \geq 35% and higher than placebo) were balance disorder and vomiting (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Sarepta Therapeutics, Inc. at 1-888-SAREPTA (1-888-727-3782) or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Revised: 09/2016

FULL PRESCRIBING INFORMATION: CONTENTS*

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*Sections or subsections omitted from the full prescribing information are not listed.

FULL PRESCRIBING INFORMATION

1 INDICATIONS AND USAGE

EXONDYS 51 is indicated for the treatment of Duchenne muscular dystrophy (DMD) in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping. This indication is approved under accelerated approval based on an increase in dystrophin in skeletal muscle observed in some patients treated with EXONDYS 51 [see *Clinical Studies (14)*]. A clinical benefit of EXONDYS 51 has not been established. Continued approval for this indication may be contingent upon verification of a clinical benefit in confirmatory trials.

2 DOSAGE AND ADMINISTRATION

2.1 Dosing Information

The recommended dose of EXONDYS 51 is 30 milligrams per kilogram administered once weekly as a 35 to 60 minute intravenous infusion.

If a dose of EXONDYS 51 is missed, it may be administered as soon as possible after the scheduled time.

2.2 Preparation Instructions

EXONDYS 51 is supplied in single-dose vials as a preservative-free concentrated solution that requires dilution prior to administration. Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit. Use aseptic technique.

- a. Calculate the total dose of EXONDYS 51 to be administered based on the patient's weight and the recommended dose of 30 milligrams per kilogram. Determine the volume of EXONDYS 51 needed and the correct number of vials to supply the full calculated dose.
- b. Allow vials to warm to room temperature. Mix the contents of each vial by gently inverting 2 or 3 times. Do not shake.
- c. Visually inspect each vial of EXONDYS 51. EXONDYS 51 is a clear, colorless solution that may have some opalescence. Do not use if the solution in the vials is discolored or particulate matter is present.
- d. With a syringe fitted with a 21-gauge or smaller non-coring needle, withdraw the calculated volume of EXONDYS 51 from the appropriate number of vials.
- e. Dilute the withdrawn EXONDYS 51 in 0.9% Sodium Chloride Injection, USP, to make a total volume of 100-150 mL. Visually inspect the diluted solution for particulates.
- f. EXONDYS 51 contains no preservatives and should be administered immediately after dilution. Complete infusion of diluted EXONDYS 51 solution within 4 hours of dilution. If immediate use is not possible, the diluted solution may be stored for up to

24 hours at 2°C to 8°C (36°F to 46°F). Do not freeze. Discard unused EXONDYS 51.

2.3 Administration Instructions

Application of a topical anesthetic cream to the infusion site prior to administration of EXONDYS 51 may be considered.

EXONDYS 51 is administered via intravenous infusion. Flush the intravenous access line with 0.9% Sodium Chloride Injection, USP, prior to and after infusion.

Infuse the diluted EXONDYS 51 solution over 35 to 60 minutes. Do not mix other medications with EXONDYS 51 or infuse other medications concomitantly via the same intravenous access line.

3 DOSAGE FORMS AND STRENGTHS

EXONDYS 51 is a clear and colorless solution that may have some opalescence, and is available as follows:

- Injection: 100 mg/2 mL (50 mg/mL) solution in a single-dose vial
- Injection: 500 mg/10 mL (50 mg/mL) solution in a single-dose vial

4 CONTRAINDICATIONS

None.

6 ADVERSE REACTIONS

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice.

In the EXONDYS 51 clinical development program, 107 patients received at least one intravenous dose of EXONDYS 51, ranging between 0.5 mg/kg (0.017 times the recommended dosage) and 50 mg/kg (1.7 times the recommended dosage). All patients were male and had genetically confirmed Duchenne muscular dystrophy. Age at study entry was 4 to 19 years. Most (89%) patients were Caucasian.

EXONDYS 51 was studied in a double-blind, placebo-controlled study for 24 weeks (Study 1), followed by an open label extension (Study 2). In Study 1, 12 patients were randomized to receive weekly intravenous infusions of EXONDYS 51 (n=8) or placebo (n=4) for 24 weeks. All 12 patients continued in Study 2 and received open-label EXONDYS 51 weekly for up to 208 weeks.

In Study 1, 4 patients received placebo, 4 patients received EXONDYS 51 30 mg/kg, and 4 patients received EXONDYS 51 50 mg/kg (1.7 times the recommended dosage). In Study 2, 6

patients received EXONDYS 51 30 mg/kg/week and 6 patients received EXONDYS 51 50 mg/kg/week [see *Clinical Studies (14)*].

Adverse reactions that occurred in 2 or more patients who received EXONDYS 51 and were more frequent than in the placebo group in Study 1 are presented in Table 1 (the 30 and 50 mg/kg groups are pooled). Because of the small numbers of patients, these represent crude frequencies that may not reflect the frequencies observed in practice. The 50 mg/kg once weekly dosing regimen of EXONDYS 51 is not recommended [see *Dosage and Administration (2.1)*].

The most common adverse reactions were balance disorder and vomiting.

Table 1. Adverse Reactions in DMD Patients Treated with 30 or 50 mg/kg/week¹ EXONDYS 51 with Incidence at Least 25% More than Placebo (Study 1)

| Adverse Reactions | EXONDYS 51 (N=8) | Placebo (N=4) |
|--------------------|------------------|---------------|
| | % | % |
| Balance disorder | 38 | 0 |
| Vomiting | 38 | 0 |
| Contact dermatitis | 25 | 0 |

¹ 50 mg/kg/week = 1.7 times the recommended dosage

In the 88 patients who received ≥ 30 mg/kg/week of EXONDYS 51 for up to 208 weeks in clinical studies, the following events were reported in $\geq 10\%$ of patients and occurred more frequently than on the same dose in Study 1: vomiting, contusion, excoriation, arthralgia, rash, catheter site pain, and upper respiratory tract infection.

There have been reports of transient erythema, facial flushing, and elevated temperature occurring on days of EXONDYS 51 infusion.

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Risk Summary

There are no human or animal data available to assess the use of EXONDYS 51 during pregnancy. In the U.S. general population, major birth defects occur in 2 to 4% and miscarriage occurs in 15 to 20% of clinically recognized pregnancies.

8.2 Lactation

Risk Summary

There are no human or animal data to assess the effect of EXONDYS 51 on milk production, the presence of eteplirsen in milk, or the effects of EXONDYS 51 on the breastfed infant.

The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for EXONDYS 51 and any potential adverse effects on the breastfed infant from EXONDYS 51 or from the underlying maternal condition.

8.4 Pediatric Use

EXONDYS 51 is indicated for the treatment of Duchenne muscular dystrophy (DMD) in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping, including pediatric patients [see *Clinical Studies (14)*].

Intravenous administration of eteplirsen (0, 100, 300, or 900 mg/kg) to juvenile male rats once weekly for 10 weeks beginning on postnatal day 14 resulted in renal tubular necrosis at the highest dose tested and decreased bone densitometry parameters (mineral density, mineral content, area) at all doses. The kidney findings were associated with clinical pathology changes (increased serum urea nitrogen and creatinine, decreased urine creatinine clearance). No effects were observed on the male reproductive system, neurobehavioral development, or immune function. An overall no-effect dose was not identified. Plasma eteplirsen exposure (AUC) at the lowest dose tested (100 mg/kg) was similar to that in humans at the recommended human dose (30 mg/kg).

8.5 Geriatric Use

DMD is largely a disease of children and young adults; therefore, there is no geriatric experience with EXONDYS 51.

8.6 Patients with Renal or Hepatic Impairment

EXONDYS 51 has not been studied in patients with renal or hepatic impairment.

10 OVERDOSAGE

There is no experience with overdose of EXONDYS 51.

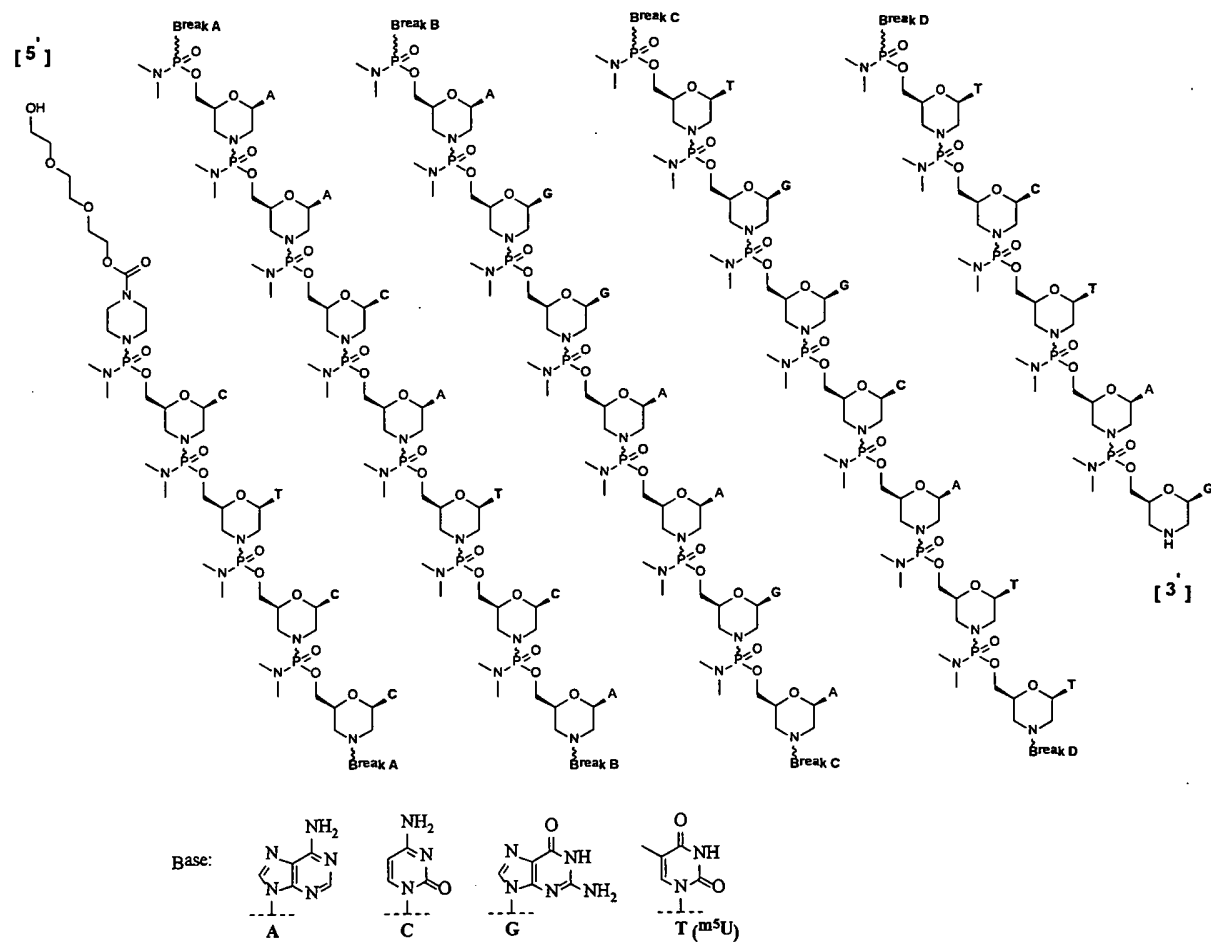
11 DESCRIPTION

EXONDYS 51 (eteplirsen) injection is a sterile, aqueous, preservative-free, concentrated solution for dilution prior to intravenous administration. EXONDYS 51 is clear and colorless, and may have some opalescence. EXONDYS 51 is supplied in single dose vials containing 100 mg or 500 mg eteplirsen (50 mg/mL). EXONDYS 51 is formulated as an isotonic, phosphate buffered saline solution with an osmolality of 260 to 320 mOsm and a pH of 7.5. Each milliliter of EXONDYS 51 contains 50 mg eteplirsen; 0.2 mg potassium chloride, 0.2 mg potassium phosphate monobasic, 8 mg sodium chloride, and 1.14 mg sodium phosphate dibasic, anhydrous, in water for injection. The product may contain hydrochloric acid or sodium hydroxide to adjust pH.

Eteplirsen is an antisense oligonucleotide of the phosphorodiamidate morpholino oligomer (PMO) subclass. PMOs are synthetic molecules in which the five-membered ribofuranosyl rings

found in natural DNA and RNA are replaced by a six-membered morpholino ring. Each morpholino ring is linked through an uncharged phosphorodiamidate moiety rather than the negatively charged phosphate linkage that is present in natural DNA and RNA. Each phosphorodiamidate morpholino subunit contains one of the heterocyclic bases found in DNA (adenine, cytosine, guanine, or thymine). Eteplirsen contains 30 linked subunits. The molecular formula of eteplirsen is $C_{364}H_{569}N_{177}O_{122}P_{30}$ and the molecular weight is 10305.7 daltons.

The structure and base sequence of eteplirsen are:



The sequence of bases from the 5' end to the 3' end is:
CTCCAACATCAAGGAAGATGGCATTCTAG

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

Eteplirsen is designed to bind to exon 51 of dystrophin pre-mRNA, resulting in exclusion of this exon during mRNA processing in patients with genetic mutations that are amenable to exon 51 skipping. Exon skipping is intended to allow for production of an internally truncated dystrophin protein, which was evaluated in Study 2 and Study 3 [see *Clinical studies* (14)].

12.2 Pharmacodynamics

All EXONDYS 51-treated patients evaluated (n=36) were found to produce messenger ribonucleic acid (mRNA) for a truncated dystrophin protein by reverse transcription polymerase chain reaction.

In Study 2, the average dystrophin protein level in muscle tissue after 180 weeks of treatment with EXONDYS 51 was 0.93% of normal (i.e., 0.93% of the dystrophin level in healthy subjects). Because of insufficient information on dystrophin protein levels before treatment with EXONDYS 51 in Study 1, it is not possible to estimate dystrophin production in response to EXONDYS 51 in Study 1.

In Study 3, the average dystrophin protein level was 0.16% of normal before treatment, and 0.44% of normal after 48 weeks of treatment with EXONDYS 51 [see *Clinical studies (14)*]. The median increase in truncated dystrophin in Study 3 was 0.1% [see *Clinical Studies (14)*].

12.3 Pharmacokinetics

Following single or multiple intravenous infusions of EXONDYS 51 in male pediatric DMD patients, plasma concentration-time profiles of eteplirsen were generally similar and showed multi-phasic decline. The majority of drug elimination occurred within 24 hours. Approximate dose-proportionality and linearity in PK properties were observed following multiple-dose studies (0.5 mg/kg/week [0.017 times the recommended dosage] to 50 mg/kg/week [1.7 times the recommended dosage]). There was no significant drug accumulation following weekly dosing across this dose range. The inter-subject variability for eteplirsen C_{max} and AUC range from 20 to 55%.

Following single or multiple intravenous infusions of EXONDYS 51, the peak plasma concentrations (C_{max}) of eteplirsen occurred near the end of infusion (i.e., 1.1 to 1.2 hours across a dose range of 0.5 mg/kg/week to 50 mg/kg/week).

Distribution

In vitro investigation suggested that plasma protein binding of eteplirsen in human ranges between 6 to 17%. The mean apparent volume of distribution (V_{ss}) of eteplirsen was 600 mL/kg following weekly intravenous infusion of EXONDYS 51 at 30 mg/kg.

Twenty-four hours after the end of the infusion, mean concentrations of eteplirsen were 0.07% of C_{max} . Accumulation of eteplirsen during once weekly dosing has not been observed.

Elimination

The total clearance of eteplirsen was 339 mL/hr/kg following 12 weeks of therapy with 30 mg/kg/week.

Metabolism

Eteplirsen did not appear to be metabolized by hepatic microsomes of any species tested, including humans.

Excretion

Renal clearance of eteplirsen accounts for approximately two-thirds of the administered dose within 24 hours of intravenous administration. Elimination half-life ($t_{1/2}$) of eteplirsen was 3 to 4 hours.

Specific Populations

Age:

The pharmacokinetics of eteplirsen have been evaluated in male pediatric DMD patients. There is no experience with the use of EXONDYS 51 in patients 65 years of age or older.

Sex:

Sex effects have not been evaluated; EXONDYS 51 has not been studied in female patients.

Race:

Potential impact of race is not known because 89% of the patients in studies were Caucasians.

Renal or Hepatic Impairment:

EXONDYS 51 has not been studied in patients with renal or hepatic impairment.

Drug Interaction Studies

In vitro data showed that eteplirsen did not significantly inhibit CYP1A2, CYP2B6, CYP2C8, CYP2C9, CYP2C19, CYP2D6, or CYP3A4/5. Eteplirsen did not induce CYP2B6 or CYP3A4, and induction of CYP1A2 was substantially less than the prototypical inducer, omeprazole. Eteplirsen was not a substrate nor did it have any major inhibitory potential for any of the key human transporters tested (OAT1, OAT3, OCT1, OCT2, OATP1B1, OATP1B3, P-gp, BCRP, MRP2 and BSEP). Based on *in vitro* data on plasma protein binding, CYP or drug transporter interactions, and microsomal metabolism, eteplirsen is expected to have a low potential for drug-drug interactions in humans.

13 NONCLINICAL TOXICOLOGY

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

Carcinogenesis

Carcinogenicity studies have not been conducted with eteplirsen.

Mutagenesis

Eteplirsen was negative in *in vitro* (bacterial reverse mutation and chromosomal aberration in CHO cells) and *in vivo* (mouse bone marrow micronucleus) assays.

Impairment of Fertility

Fertility studies in animals were not conducted with eteplirsen. No effects on the male reproductive system were observed following intravenous administration of eteplirsen (0, 5, 40, or 320 mg/kg) to male monkeys once weekly for 39 weeks. Plasma eteplirsen exposure (AUC)

in monkeys at the highest dose tested was 20 times that in humans at recommended human dose (30 mg/kg).

14 CLINICAL STUDIES

EXONDYS 51 was evaluated in three clinical studies in patients who have a confirmed mutation of the DMD gene that is amenable to exon 51 skipping.

In Study 1, patients were randomized to receive weekly infusions of EXONDYS 51 (30 mg/kg, n=4); EXONDYS 51 (50 mg/kg, n=4), or placebo (n=4) for 24 weeks. The primary endpoint was dystrophin production; a clinical outcome measure, the 6-minute walk test (6MWT), was also assessed. The 6MWT measures the distance that a patient can walk on a flat, hard surface in a period of 6 minutes. Patients had a mean age of 9.4 years, a mean 6-minute walk distance (6MWD) at baseline of 363 meters, and were on a stable dose of corticosteroids for at least 6 months. There was no significant difference in change in 6MWD between patients treated with EXONDYS 51 and those treated with placebo.

All 12 patients who participated in Study 1 continued treatment with open-label EXONDYS 51 weekly for an additional 4 years in Study 2. The 4 patients who had been randomized to placebo were re-randomized 1:1 to EXONDYS 30 or 50 mg/kg/week such that there were 6 patients on each dose. Patients who participated in Study 2 were compared to an external control group. The primary clinical efficacy outcome measure was the 6MWT. Eleven patients in Study 2 had a muscle biopsy after 180 weeks of treatment with EXONDYS 51, which was analyzed for dystrophin protein level by Western blot. Study 2 failed to provide evidence of a clinical benefit of EXONDYS 51 compared to the external control group. The average dystrophin protein level after 180 weeks of treatment with EXONDYS 51 was 0.93% of the dystrophin level in healthy subjects. Because of insufficient information on dystrophin protein levels before treatment with EXONDYS 51 in Study 1, it is not possible to estimate dystrophin production in response to EXONDYS 51 in Study 1.

In Study 3, 13 patients were treated with open-label EXONDYS 51 (30 mg/kg) weekly for 48 weeks and had a muscle biopsy at baseline and after 48 weeks of treatment. Patients had a mean age of 8.9 years and were on a stable dose of corticosteroids for at least 6 months. Dystrophin levels in muscle tissue were assessed by Western blot. In the 12 patients with evaluable results, the pre-treatment dystrophin level was $0.16\% \pm 0.12\%$ (mean \pm standard deviation) of the dystrophin level in a healthy subject and $0.44\% \pm 0.43\%$ after 48 weeks of treatment with EXONDYS 51 ($p < 0.05$). The median increase after 48 weeks was 0.1%.

Individual patient dystrophin levels from Study 3 are shown in Table 2.

Table 2. Western Blot Results: EXONDYS 51-Treated (Week 48) vs Pre-treatment Baseline (% Normal Dystrophin) (Study 301)

| Patient Number | Baseline % normal dystrophin | Week 48 % normal dystrophin | Change from Baseline % normal dystrophin |
|----------------|---------------------------------|--------------------------------|---|
|----------------|---------------------------------|--------------------------------|---|

| | | | |
|------|------|------|-----------------|
| 1 | 0.13 | 0.26 | 0.13 |
| 2 | 0.35 | 0.36 | 0.01 |
| 3 | 0.06 | 0.37 | 0.31 |
| 4 | 0.04 | 0.10 | 0.06 |
| 5 | 0.17 | 1.02 | 0.85 |
| 6 | 0.37 | 0.30 | -0.07 |
| 7 | 0.17 | 0.42 | 0.25 |
| 8 | 0.24 | 1.57 | 1.33 |
| 9 | 0.11 | 0.12 | 0.01 |
| 10 | 0.05 | 0.47 | 0.43 |
| 11 | 0.02 | 0.09 | 0.07 |
| 12 | 0.18 | 0.21 | 0.03 |
| Mean | 0.16 | 0.44 | 0.28; $p=0.008$ |

16 HOW SUPPLIED/STORAGE AND HANDLING

16.1 How Supplied

EXONDYS 51 injection is supplied in single-dose vials. The solution is clear and colorless, and may have some opalescence.

- Single-dose vials containing 100 mg/2 mL (50 mg/mL) eteplirsen NDC 60923-363-02
- Single-dose vials containing 500 mg/10 mL (50 mg/mL) eteplirsen NDC 60923-284-10

16.2 Storage and Handling

Store EXONDYS 51 at 2°C to 8°C (36°F to 46°F). Do not freeze. Protect from light and store EXONDYS 51 in the original carton until ready for use.

Manufactured for:
Sarepta Therapeutics, Inc.
Cambridge, MA 02142 USA

EXHIBIT E

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



(12) **United States Patent**
Wilton et al.

(10) **Patent No.:** US 9,018,368 B2
(45) **Date of Patent:** *Apr. 28, 2015

(54) **ANTISENSE OLIGONUCLEOTIDES FOR INDUCING EXON SKIPPING AND METHODS OF USE THEREOF**

(71) Applicant: **The University of Western Australia, Crawley (AU)**

(72) Inventors: **Stephen Donald Wilton, Applecross (AU); Sue Fletcher, Bayswater (AU); Graham McClorey, Bayswater (AU)**

(73) Assignee: **The University of Western Australia, Crawley (AU)**

(*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 0 days.

This patent is subject to a terminal disclaimer.

(21) Appl. No.: **14/316,603**

(22) Filed: **Jun. 26, 2014**

(65) **Prior Publication Data**
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Related U.S. Application Data

(63) Continuation of application No. 13/741,150, filed on Jan. 14, 2013, which is a continuation of application No. 13/168,857, filed on Jun. 24, 2011, now abandoned, which is a continuation of application No. 12/837,359, filed on Jul. 15, 2010, now Pat. No. 8,232,384, which is a continuation of application No. 11/570,691, filed as application No. PCT/AU2005/000943 on Jun. 28, 2005, now Pat. No. 7,807,816.

(30) **Foreign Application Priority Data**
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(52) U.S. Cl.
CPC **C12N 15/113** (2013.01); **C12N 2310/11** (2013.01); **C12N 2310/3519** (2013.01); **C12N 2320/33** (2013.01)

(58) **Field of Classification Search**
None
See application file for complete search history.

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Primary Examiner — Kimberly Chong
(74) *Attorney, Agent, or Firm* — Nelson Mullins Riley & Scarborough LLP; Amy E. Mandragouras, Esq.; Erika L. Wallace

(57) **ABSTRACT**

An antisense molecule capable of binding to a selected target site to induce exon skipping in the dystrophin gene, as set forth in SEQ ID NO: 1 to 202.

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GlaxoSmithKline, Prosensa regains rights to drisapersen from GSK and retains rights to all other programmes for the treatment of Duchenne muscular dystrophy (DMD), (Exhibit 2040 in Interferences 106007, 106008, and 106013 on Nov. 18, 2014) press release, 4 pages, dated Jan. 13, 2014.

Standard Operating Procedure FPLC Desalting, pp. 6, Exhibit No. 1144 filed in Interferences 106,007 and 106,008 on Feb. 16, 2015.

* cited by examiner

FIGURE 1

| | | | |
|----|-------------|----------------|--|
| bp | Acceptor | ESE | Donor |
| uc | gacacugagug | accucuuucucgag | gCGCUAGCUGGAGCA////CCGUGCAGACUGACGGgucucau |

SEQ ID NO:213

SEQ ID NO:214

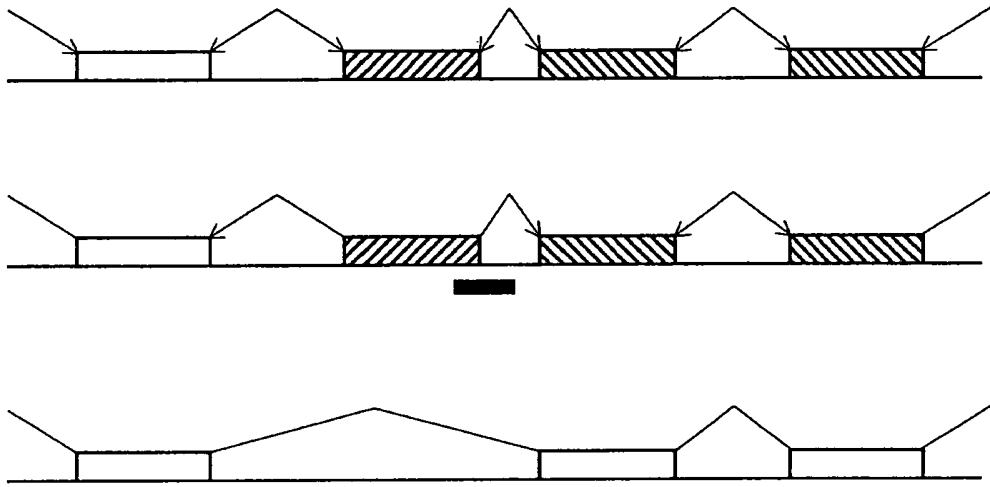


FIGURE 2

H8A(-06+14) | H8A(-06+18)
M 600 300 100 50 20 UT 600 300 100 50 20 UT M

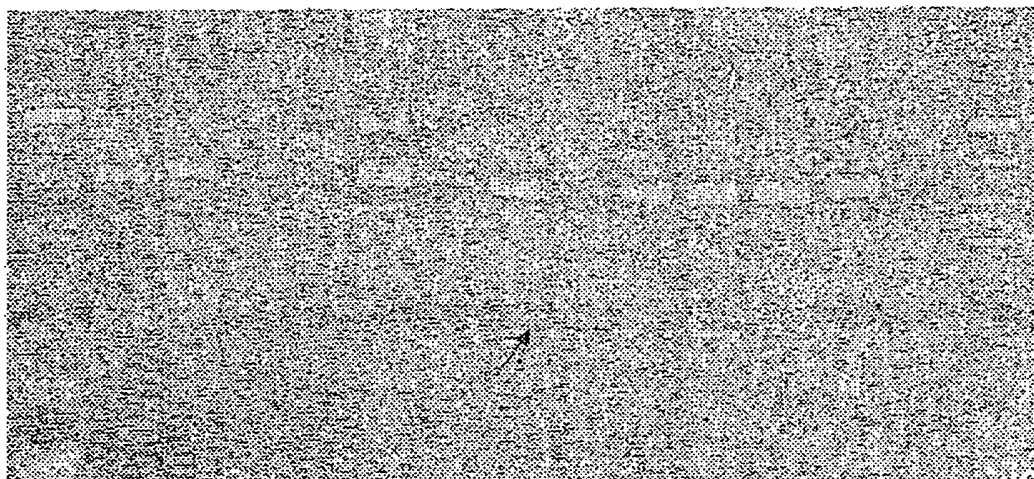


FIGURE 3

H7A(+45+67)

H7A(+2+26)

M 600 300 100 50 20 600NM 600 300 100 50 20 600N M

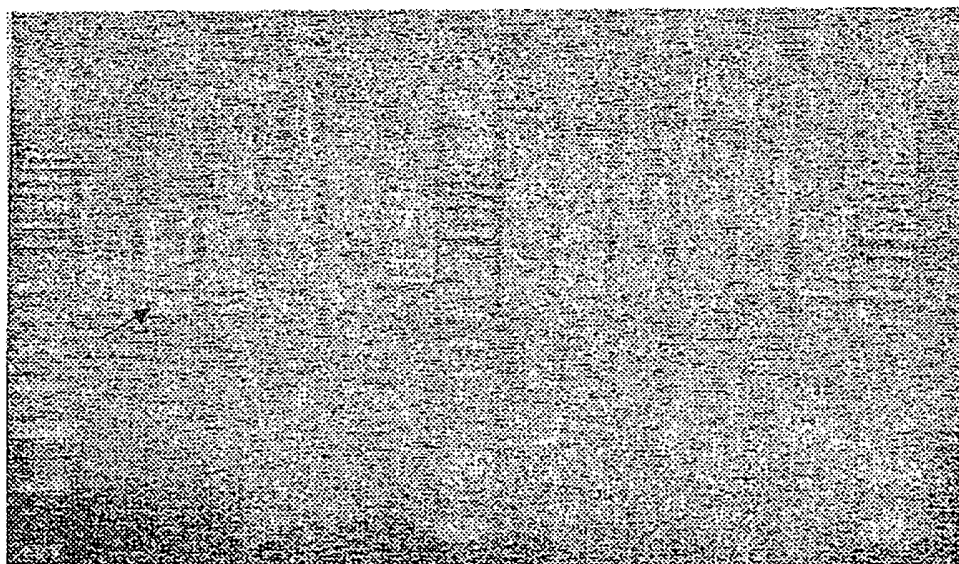


FIGURE 4

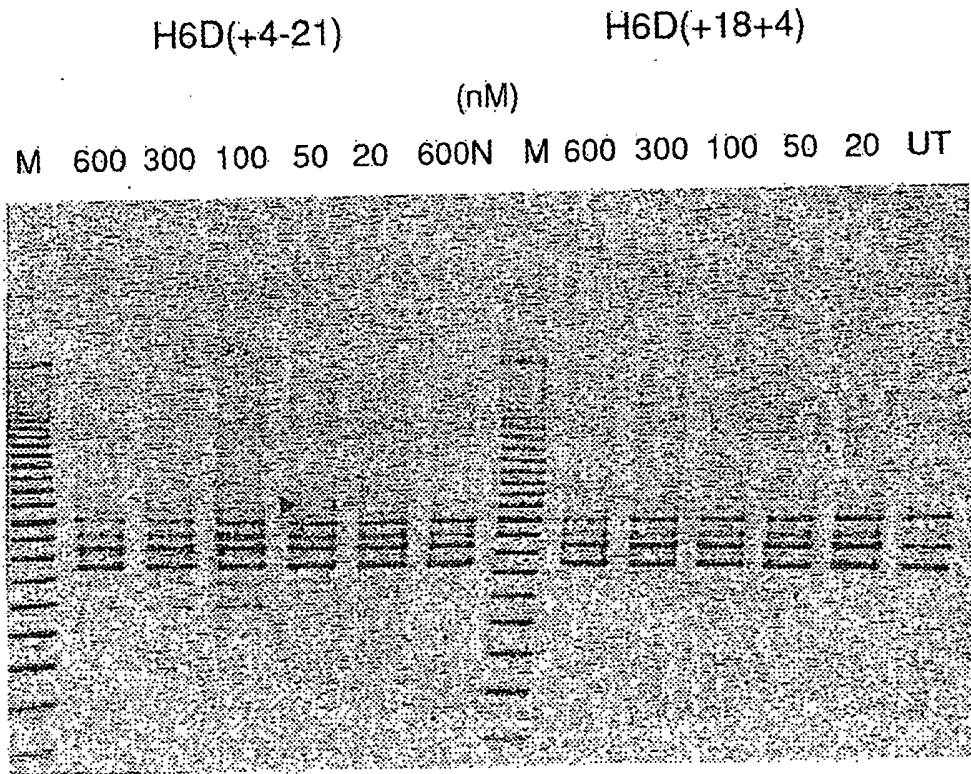


FIGURE 5

6A(+69+91)

M 600 300 200 100 50 20 UT

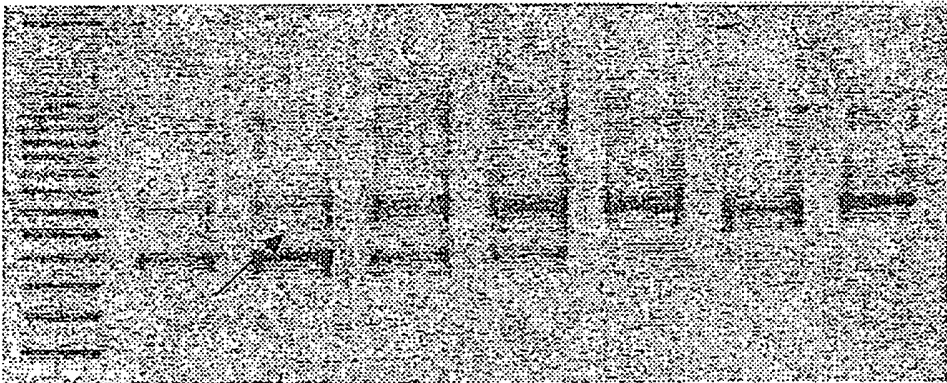


FIGURE 6.

H4A(+13+32)

M 600 300 100 50 20 UT Neg M

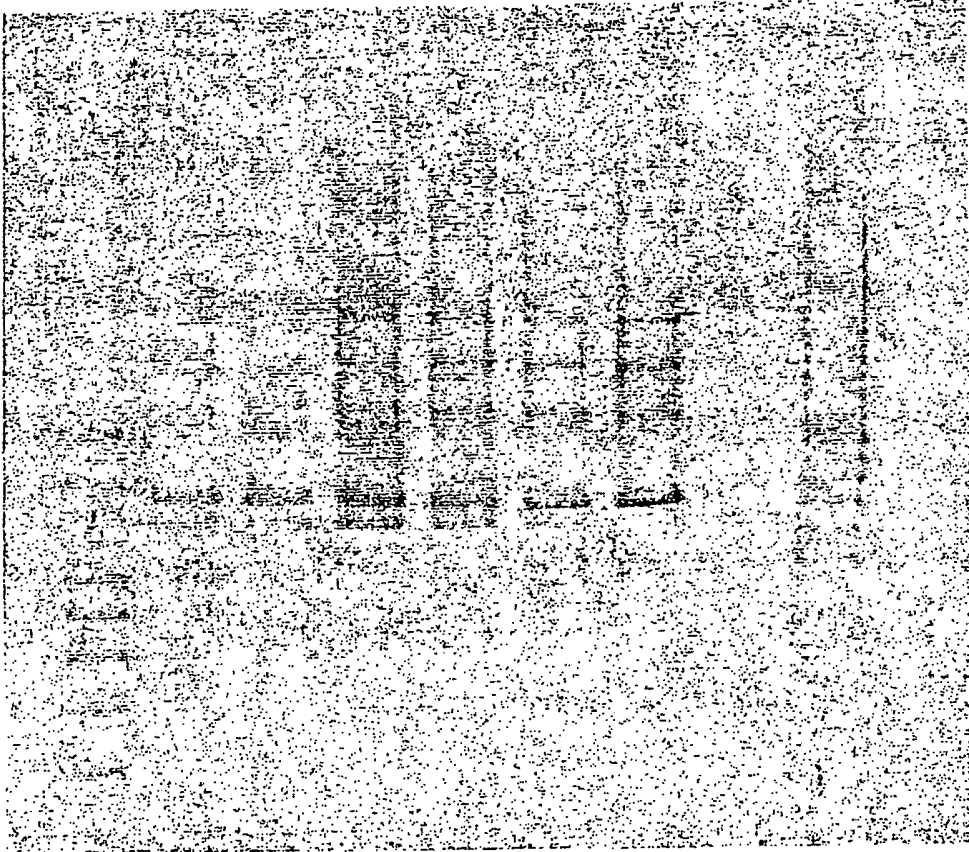


FIGURE 7

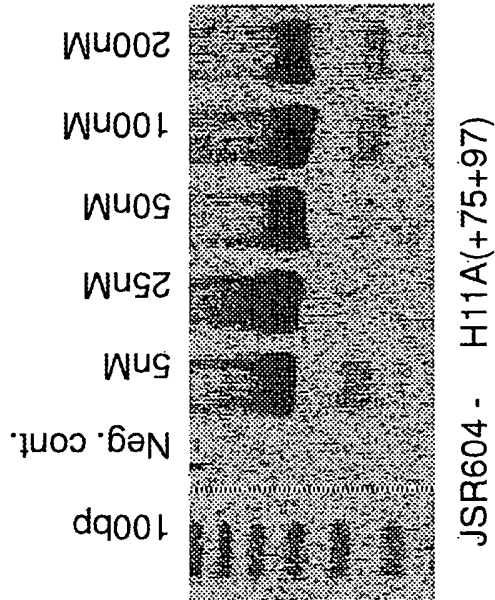


FIGURE 8B

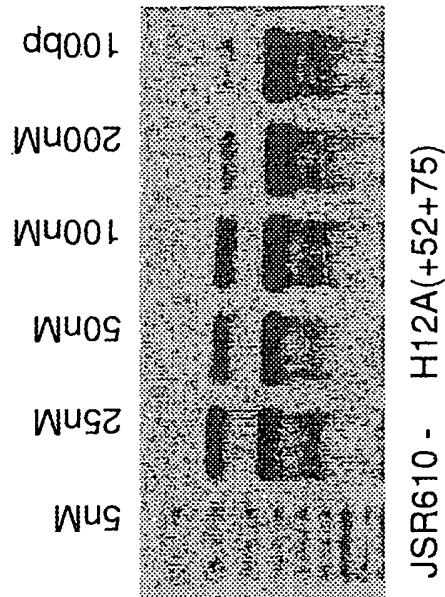


FIGURE 8A

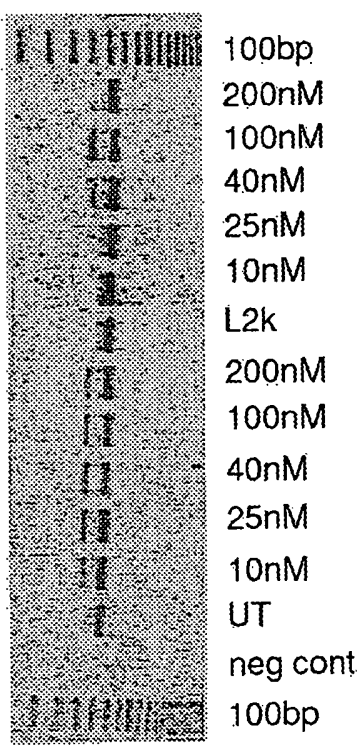


FIGURE 9A

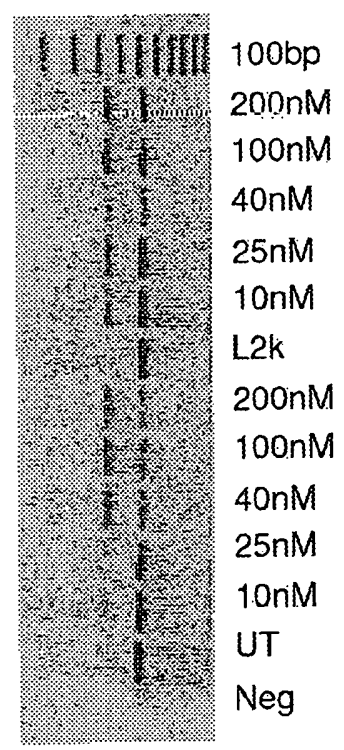


FIGURE 9B

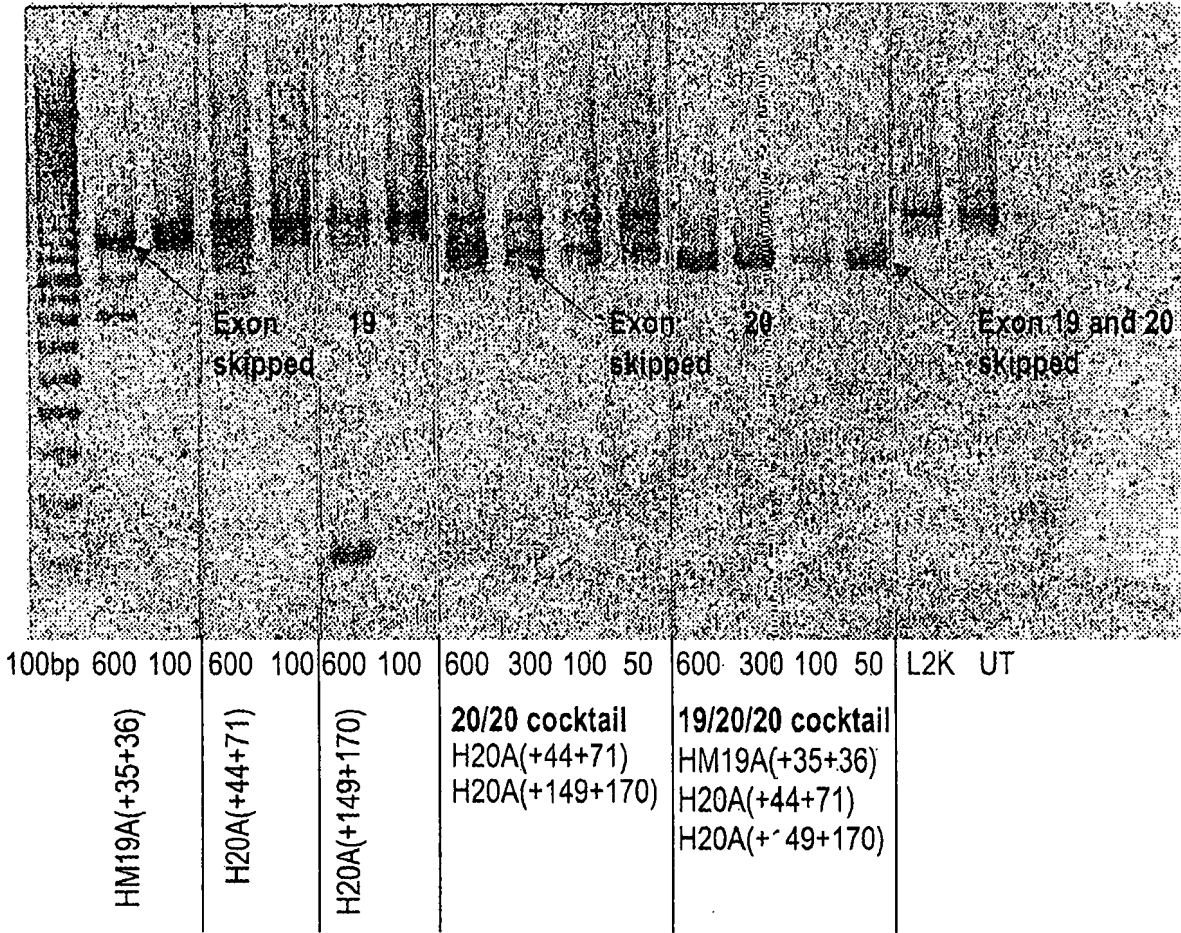
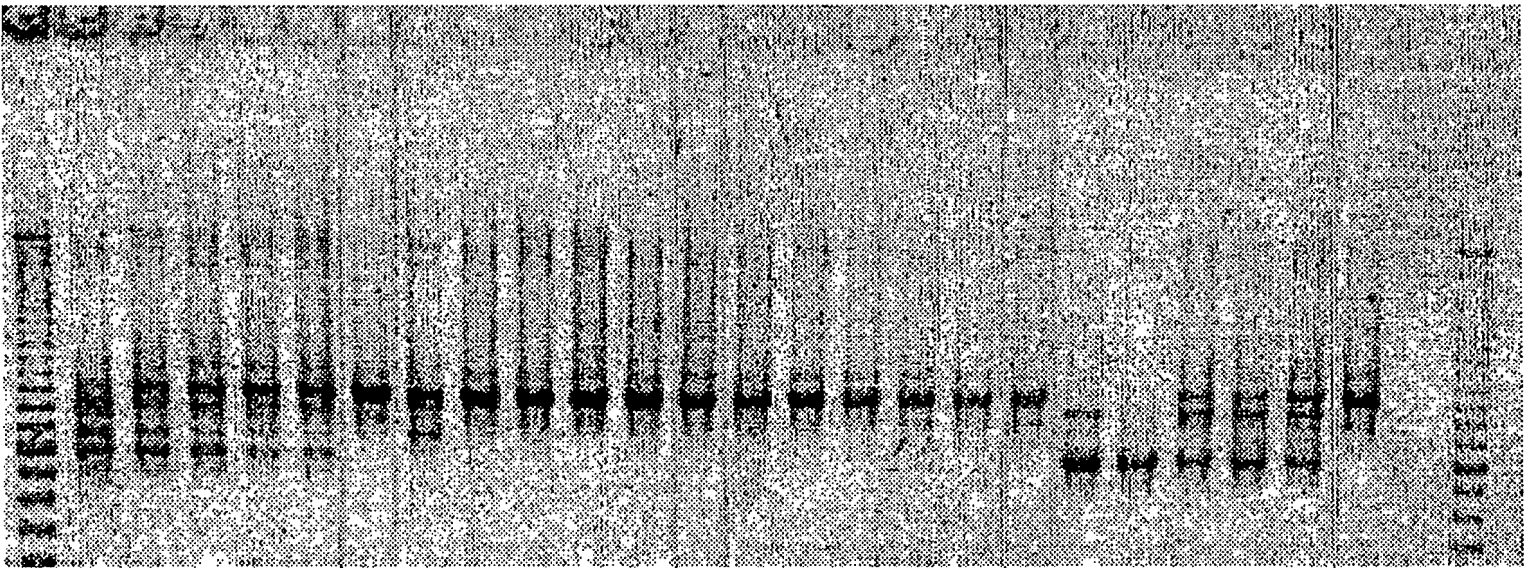


FIGURE 10



Weasel19/20/20
H19A(+35+53)-aa-
H20A(+44+63)-aa-
H20A(+149+168)

Weasel19/20
H19A(+35+53)-
aa-
H20A(+44+63)

Weasel19/20
H19A(+35+53)-
aa-
H20A(+149+168)

19/20/20 cocktail
HM19A(+35+36)
H20A(+44+71)
H20A(+149+170)

FIGURE 11

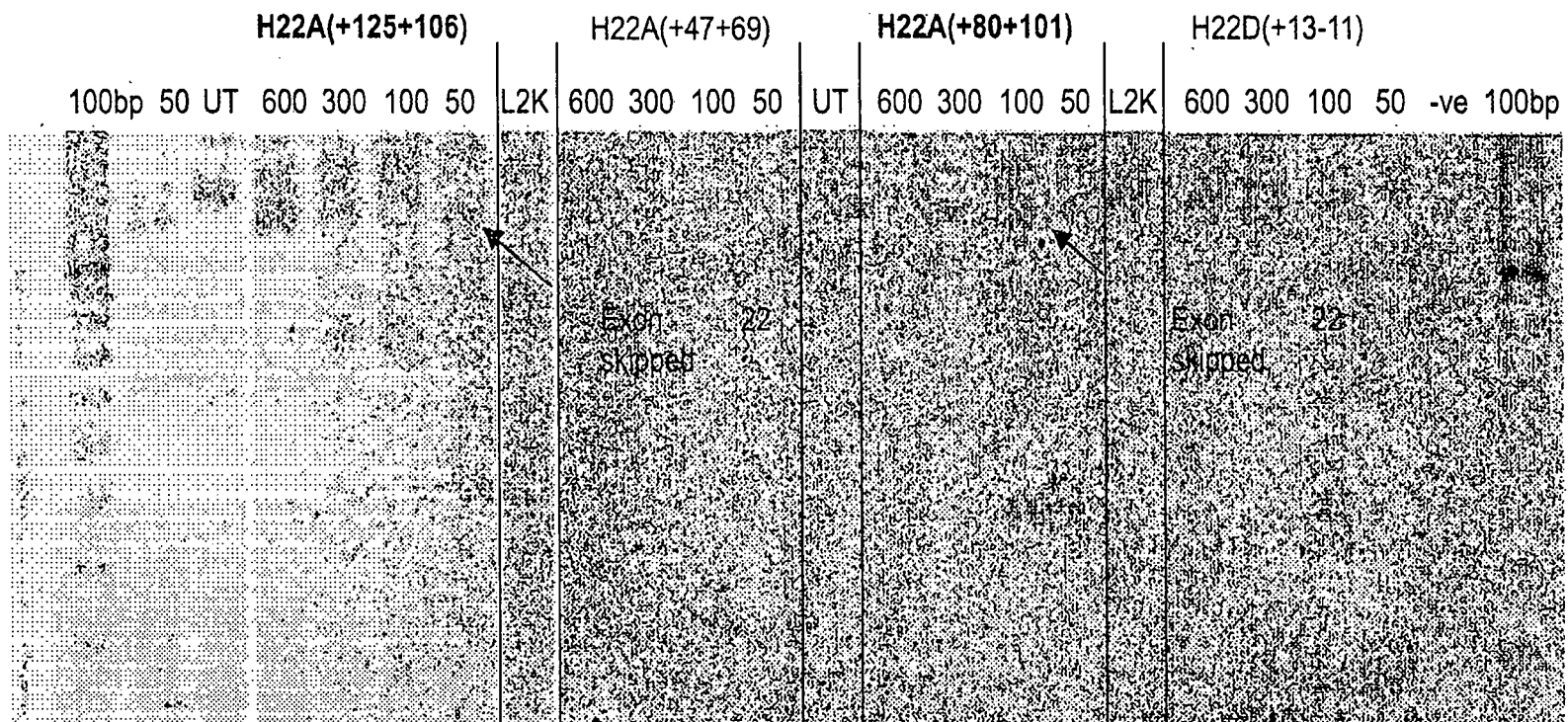


FIGURE 12

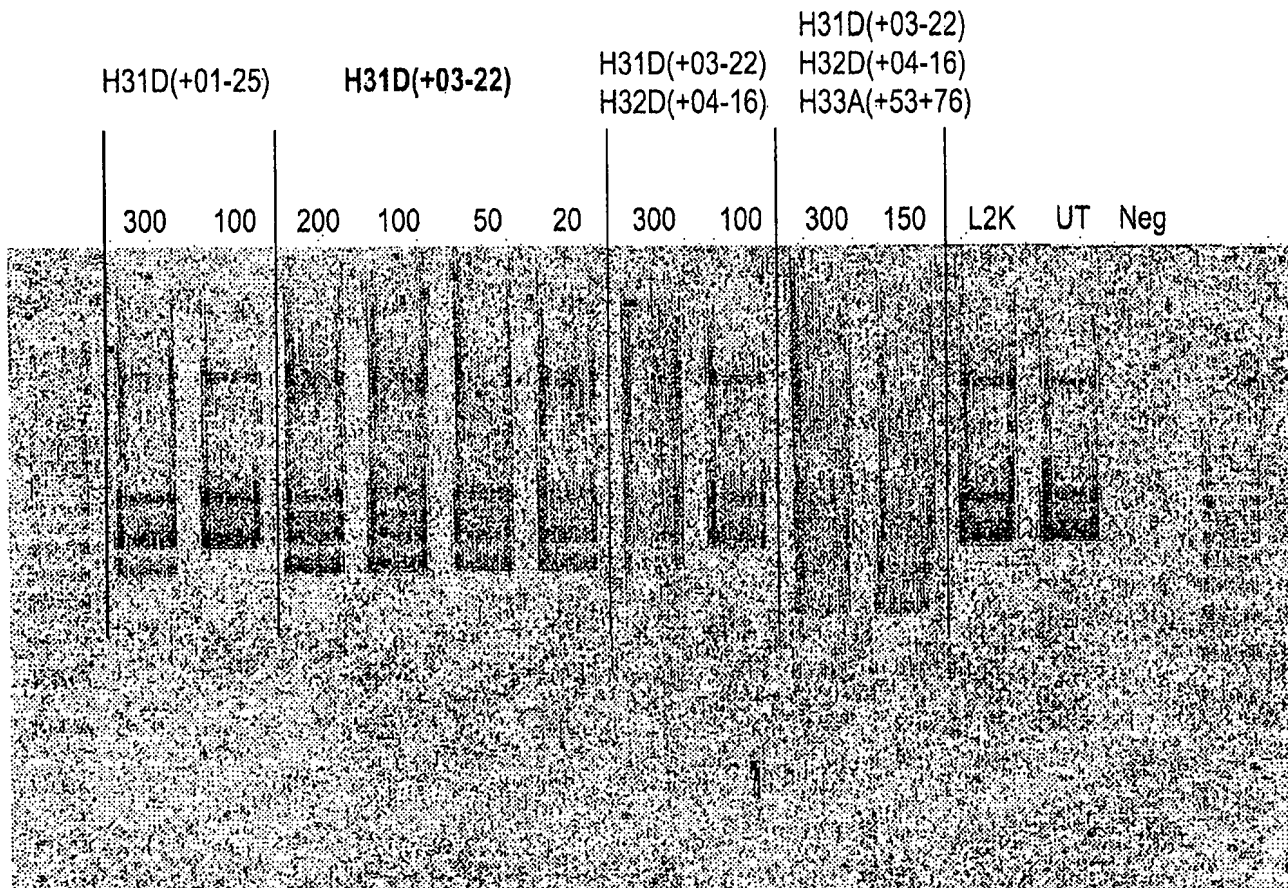


FIGURE 13

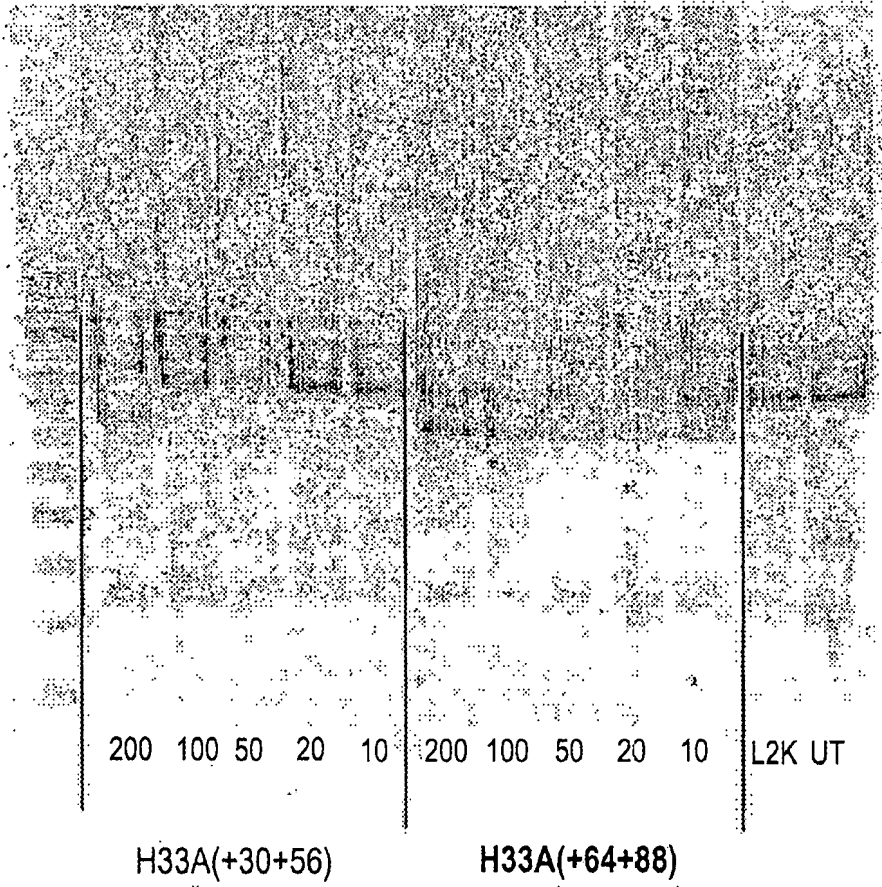


FIGURE 14

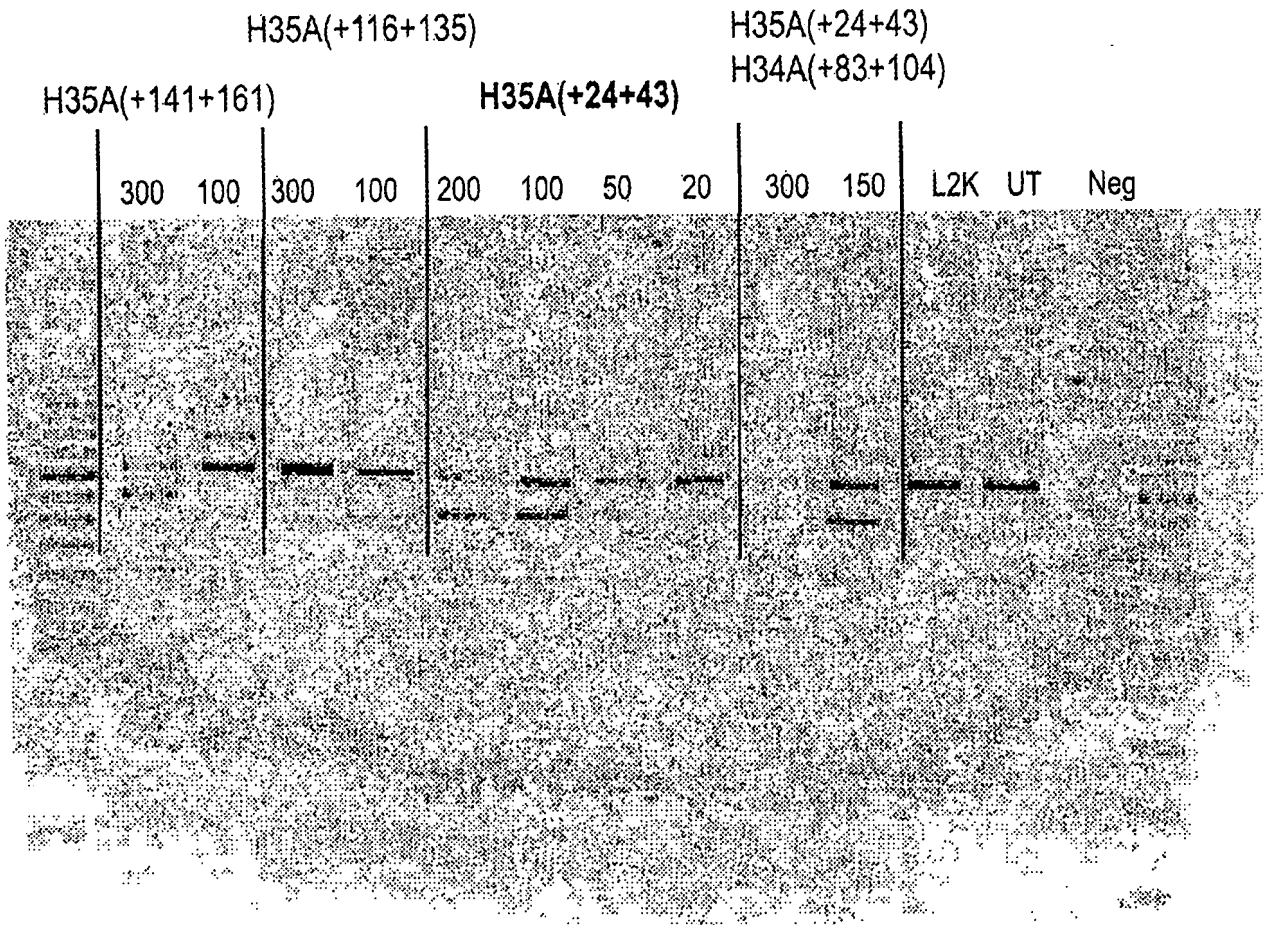


FIGURE 15

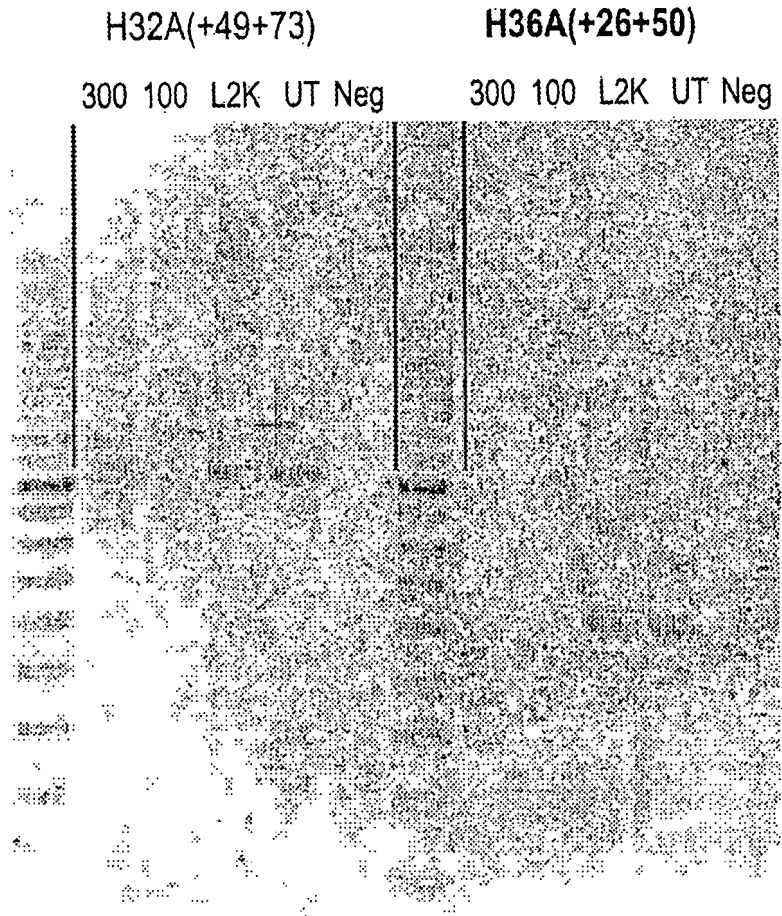


FIGURE 16

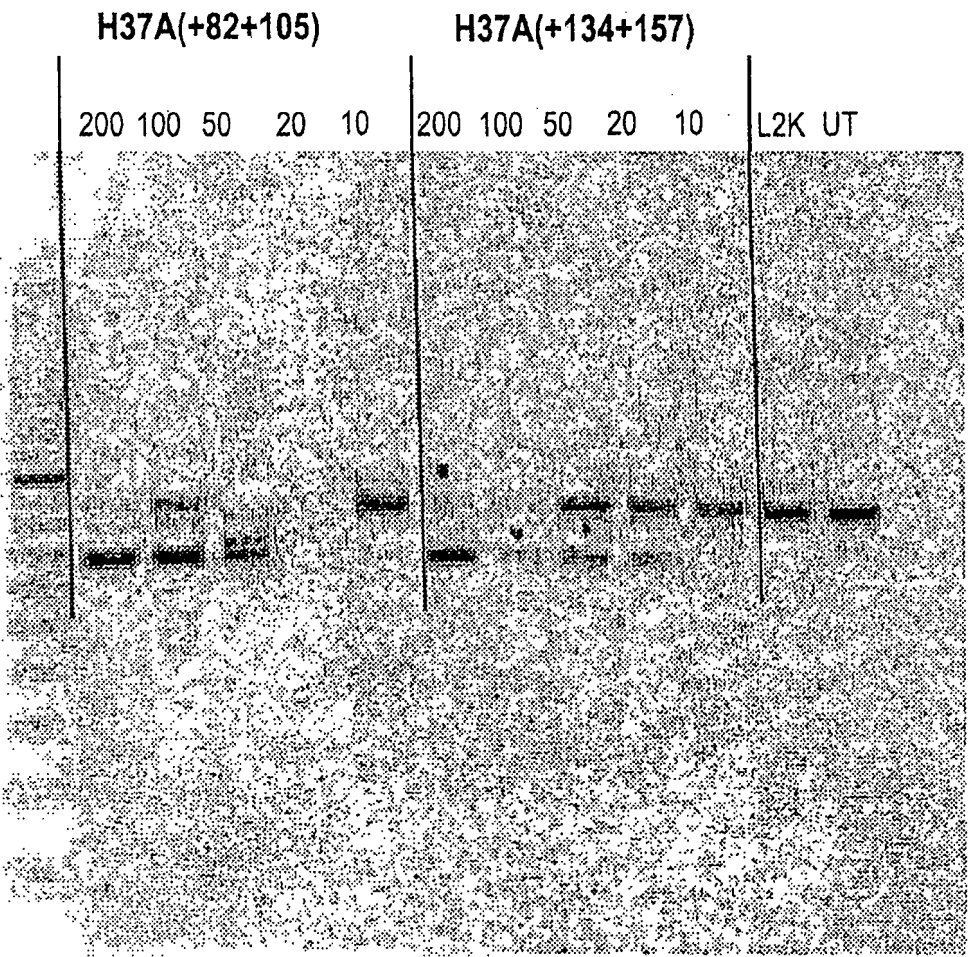


FIGURE 17

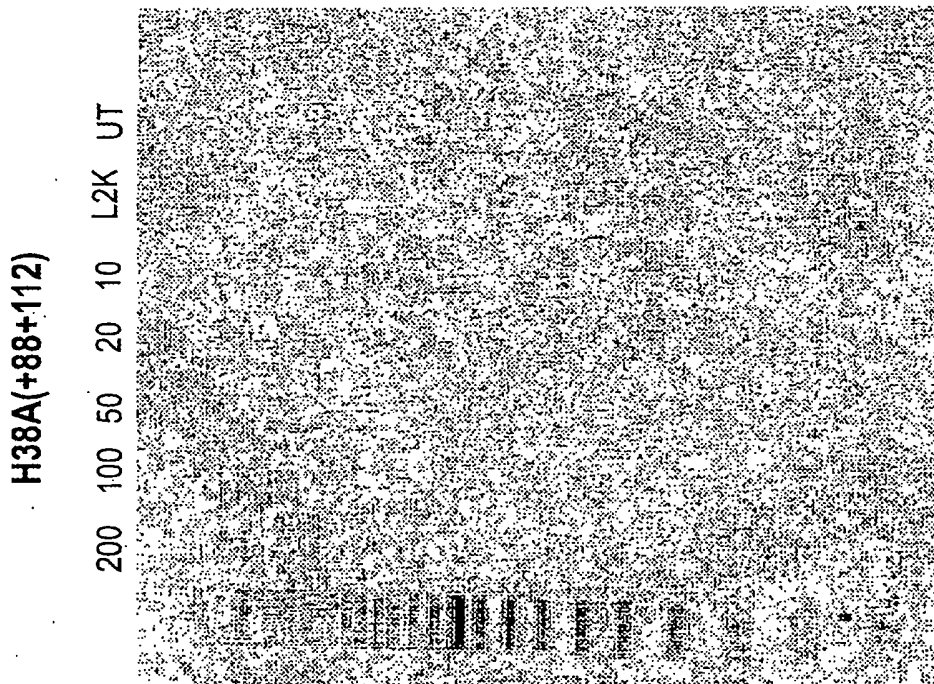


FIGURE 18

H40A(-05+17)

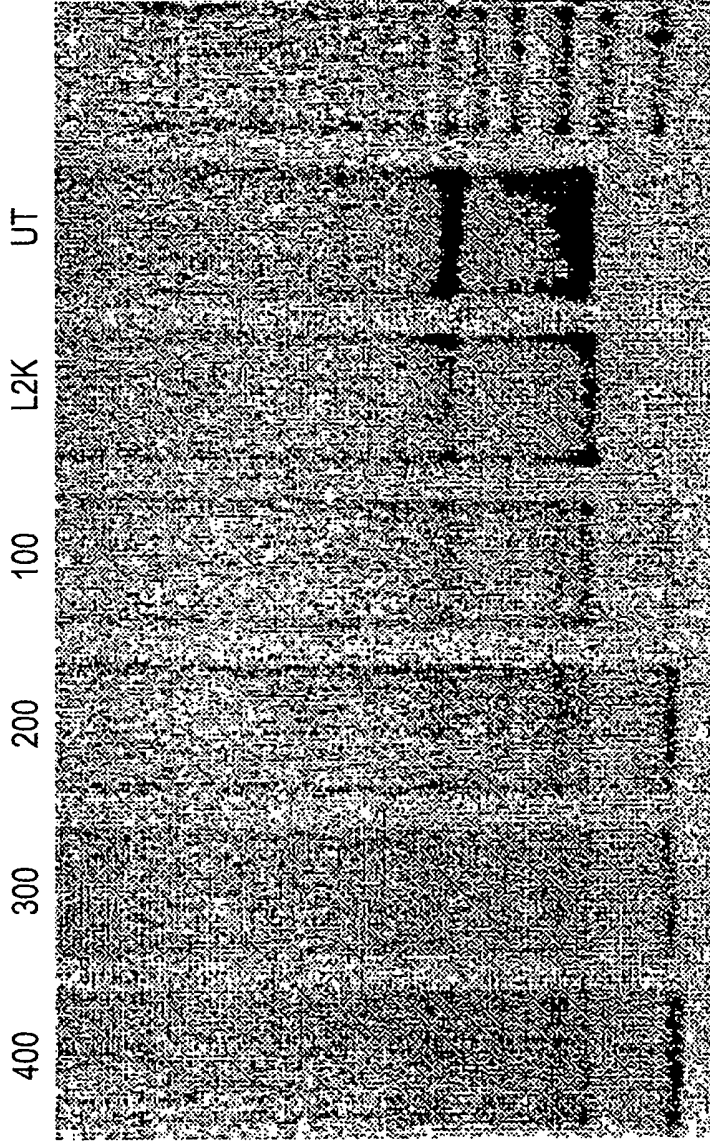


FIGURE 19

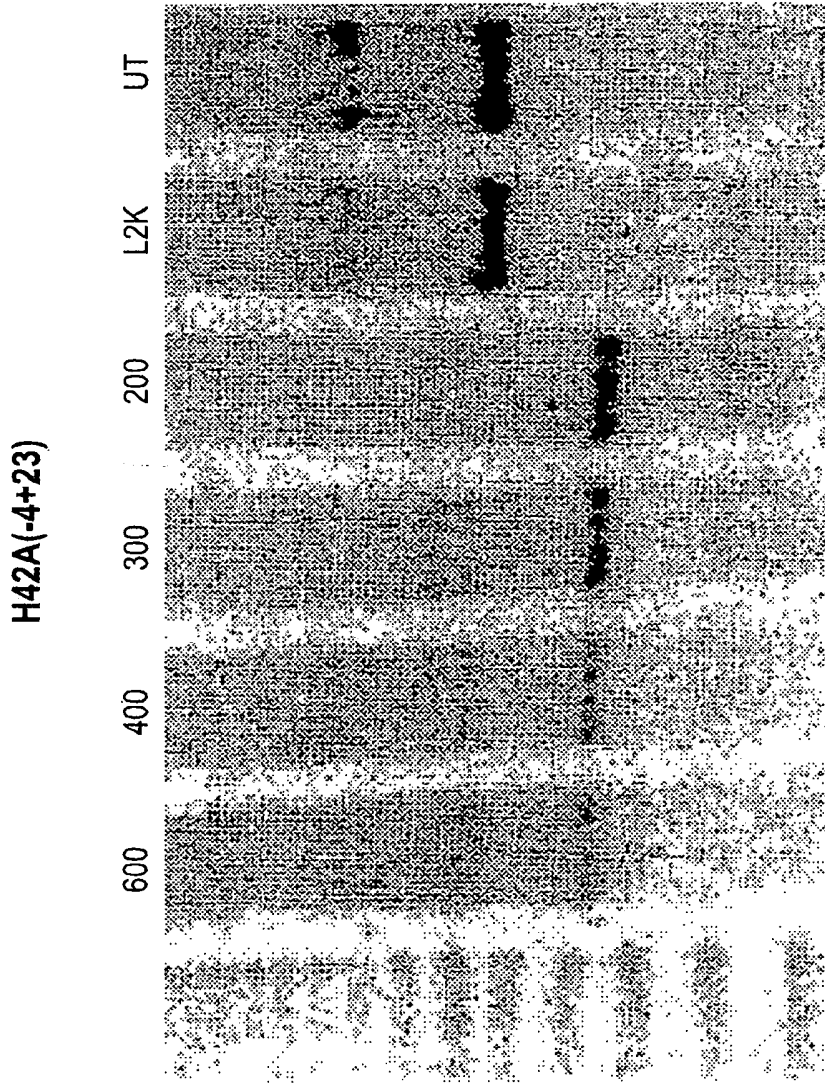


FIGURE 20

H46A(+86+115)

600 300 200 100 L2K UT

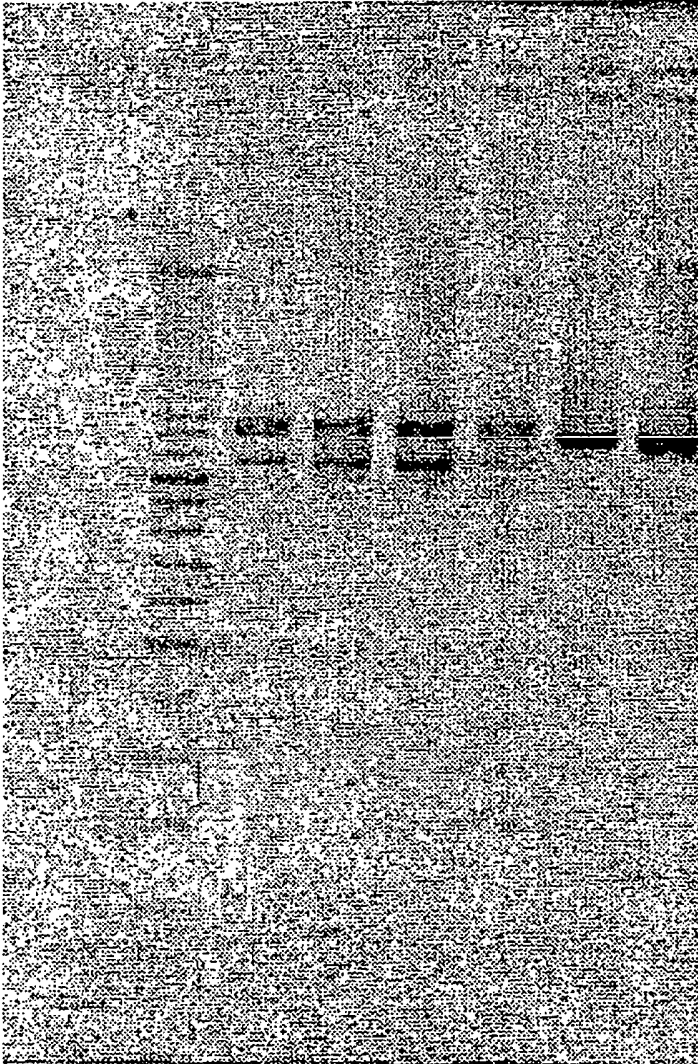


FIGURE 21

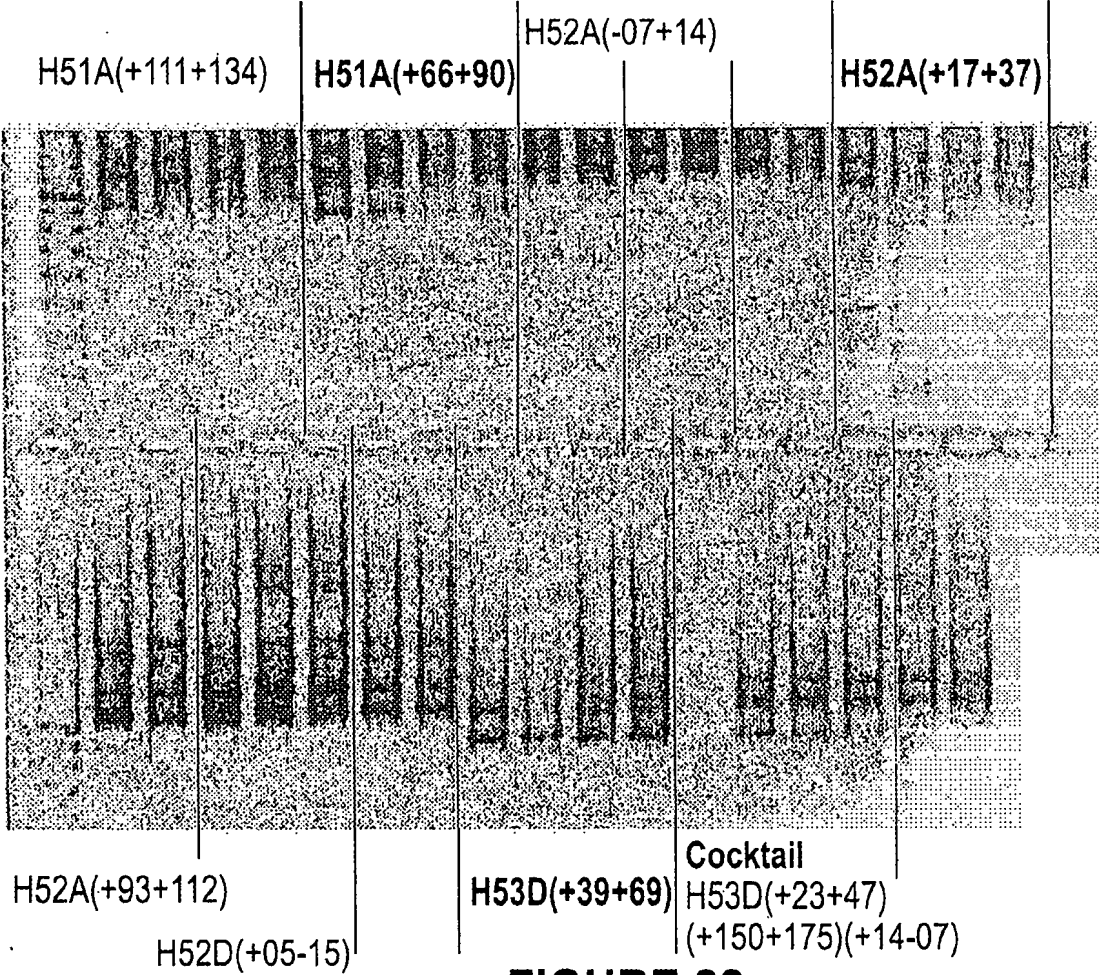


FIGURE 22

ANTISENSE OLIGONUCLEOTIDES FOR INDUCING EXON SKIPPING AND METHODS OF USE THEREOF

CROSS-REFERENCE TO RELATED APPLICATIONS

This application is a continuation of U.S. patent application Ser. No. 13/741,150, filed Jan. 14, 2013, now pending, which application is a continuation of U.S. patent application Ser. No. 13/168,857, filed Jun. 24, 2011, abandoned, which application is a continuation of U.S. patent application Ser. No. 12/837,359, filed Jul. 15, 2010, now issued as U.S. Pat. No. 8,232,384, which application is a continuation of U.S. patent application Ser. No. 11/570,691, filed Jan. 15, 2008, now issued as U.S. Pat. No. 7,807,816, which application is a 35 U.S.C. §371 National Phase Application of PCT/AU2005/000943, filed Jun. 28, 2005, which claims priority to Australian Patent Application No. 2004903474, filed Jun. 28, 2004; which applications are each incorporated herein by reference in their entireties.

STATEMENT REGARDING SEQUENCE LISTING

The Sequence Listing associated with the application is provided in text format in lieu of a paper copy, and is hereby incorporated by reference into the specification. The name of the text file containing the Sequence Listing is SequenceListing.txt. The text file is 61 Kilobytes, was created on Jun. 26, 2014 and is being submitted electronically via EFS-Web.

FIELD OF THE INVENTION

The present invention relates to novel antisense compounds and compositions suitable for facilitating exon skipping. It also provides methods for inducing exon skipping using the novel antisense compounds as well as therapeutic compositions adapted for use in the methods of the invention.

BACKGROUND ART

Significant effort is currently being expended researching methods for suppressing or compensating for disease-causing mutations in genes. Antisense technologies are being developed using a range of chemistries to affect gene expression at a variety of different levels (transcription, splicing, stability, translation). Much of that research has focused on the use of antisense compounds to correct or compensate for abnormal or disease-associated genes in a myriad of different conditions.

Antisense molecules are able to inhibit gene expression with exquisite specificity and because of this many research efforts concerning oligonucleotides as modulators of gene expression have focused on inhibiting the expression of targeted genes such as oncogenes or viral genes. The antisense oligonucleotides are directed either against RNA (sense strand) or against DNA where they form triplex structures inhibiting transcription by RNA polymerase II. To achieve a desired effect in specific gene down-regulation, the oligonucleotides must either promote the decay of the targeted mRNA or block translation of that mRNA, thereby effectively preventing de novo synthesis of the undesirable target protein.

Such techniques are not useful where the object is to up-regulate production of the native protein or compensate for mutations which induce premature termination of translation

such as nonsense or frame-shifting mutations. Furthermore, in cases where a normally functional protein is prematurely terminated because of mutations therein, a means for restoring some functional protein production through antisense technology has been shown to be possible through intervention during the splicing processes (Sierakowska H, et al., (1996) *Proc Natl Acad Sci USA* 93, 12840-12844; Wilton S D, et al., (1999) *Neuromusc Disorders* 9, 330-338; van Deutekom J C et al., (2001) *Human Mol Genet* 10, 1547-1554). In these cases, the defective gene transcript should not be subjected to targeted degradation so the antisense oligonucleotide chemistry should not promote target mRNA decay.

In a variety of genetic diseases, the effects of mutations on the eventual expression of a gene can be modulated through a process of targeted exon skipping during the splicing process. The splicing process is directed by complex multi-particle machinery that brings adjacent exon-intron junctions in pre-mRNA into close proximity and performs cleavage of phosphodiester bonds at the ends of the introns with their subsequent reformation between exons that are to be spliced together. This complex and highly precise process is mediated by sequence motifs in the pre-mRNA that are relatively short semi-conserved RNA segments to which bind the various nuclear splicing factors that are then involved in the splicing reactions. By changing the way the splicing machinery reads or recognises the motifs involved in pre-mRNA processing, it is possible to create differentially spliced mRNA molecules. It has now been recognised that the majority of human genes are alternatively spliced during normal gene expression, although the mechanisms invoked have not been identified. Using antisense oligonucleotides, it has been shown that errors and deficiencies in a coded mRNA could be bypassed or removed from the mature gene transcripts.

In nature, the extent of genetic deletion or exon skipping in the splicing process is not fully understood, although many instances have been documented to occur, generally at very low levels (Sherrat T G, et al., (1993) *Am J Hum Genet* 53, 1007-1015). However, it is recognised that if exons associated with disease-causing mutations can be specifically deleted from some genes, a shortened protein product can sometimes be produced that has similar biological properties of the native protein or has sufficient biological activity to ameliorate the disease caused by mutations associated with the target exon (Lu Q L, et al., (2003) *Nature Medicine* 9, 1009-1014; Aartsma-Rus A et al., (2004) *Am J Hum Genet* 74: 83-92).

This process of targeted exon skipping is likely to be particularly useful in long genes where there are many exons and introns, where there is redundancy in the genetic constitution of the exons or where a protein is able to function without one or more particular exons (e.g. with the dystrophin gene, which consists of 79 exons; or possibly some collagen genes which encode for repeated blocks of sequence or the huge nebulin or titin genes which are comprised of ~80 and over 370 exons, respectively).

Efforts to redirect gene processing for the treatment of genetic diseases associated with truncations caused by mutations in various genes have focused on the use of antisense oligonucleotides that either: (1) fully or partially overlap with the elements involved in the splicing process; or (2) bind to the pre-mRNA at a position sufficiently close to the element to disrupt the binding and function of the splicing factors that would normally mediate a particular splicing reaction which occurs at that element (e.g., binds to the pre-mRNA at a position within 3, 6, or 9 nucleotides of the element to be blocked).

For example, modulation of mutant dystrophin pre-mRNA splicing with antisense oligonucleotides has been reported both in vitro and in vivo. In one type of dystrophin mutation reported in Japan, a 52-base pair deletion mutation causes exon 19 to be removed with the flanking introns during the splicing process (Matsuo et al., (1991) *J Clin Invest.*, 87:2127-2131). An in vitro minigene splicing system has been used to show that a 31-mer 2'-O-methyl oligonucleotide complementary to the 5' half of the deleted sequence in dystrophin Kobe exon 19 inhibited splicing of wild-type pre-mRNA (Takeshima et al. (1995), *J. Clin. Invest.*, 95, 515-520). The same oligonucleotide was used to induce exon skipping from the native dystrophin gene transcript in human cultured lymphoblastoid cells.

Dunckley et al., (1997) *Nucleosides & Nucleotides*, 16, 1665-1668 described in vitro constructs for analysis of splicing around exon 23 of mutated dystrophin in the mdx mouse mutant, a model for muscular dystrophy. Plans to analyse these constructs in vitro using 2' modified oligonucleotides targeted to splice sites within and adjacent to mouse dystrophin exon 23 were discussed, though no target sites or sequences were given.

2'-O-methyl oligonucleotides were subsequently reported to correct dystrophin deficiency in myoblasts from the mdx mouse from this group. An antisense oligonucleotide targeted to the 3' splice site of murine dystrophin intron 22 was reported to cause skipping of the mutant exon as well as several flanking exons and created a novel in-frame dystrophin transcript with a novel internal deletion. This mutated dystrophin was expressed in 1-2% of antisense treated mdx myotubes. Use of other oligonucleotide modifications such as 2'-O-methoxyethyl phosphodiester are described (Dunckley et al. (1998) *Human Mol. Genetics*, 5, 1083-90).

Thus, antisense molecules may provide a tool in the treatment of genetic disorders such as Duchenne Muscular Dystrophy (DMD). However, attempts to induce exon skipping using antisense molecules have had mixed success. Studies on dystrophin exon 19, where successful skipping of that exon from the dystrophin pre-mRNA was achieved using a variety of antisense molecules directed at the flanking splice sites or motifs within the exon involved in exon definition as described by Errington et al. (2003) *J Gen Med* 5, 518-527".

In contrast to the apparent ease of exon 19 skipping, the first report of exon 23 skipping in the mdx mouse by Dunckley et al., (1998) is now considered to be reporting only a naturally occurring revertant transcript or artefact rather than any true antisense activity. In addition to not consistently generating transcripts missing exon 23, Dunckley et al., (1998) did not show any time course of induced exon skipping, or even titration of antisense oligonucleotides, to demonstrate dose dependent effects where the levels of exon skipping corresponded with increasing or decreasing amounts of antisense oligonucleotide. Furthermore, this work could not be replicated by other researchers.

The first example of specific and reproducible exon skipping in the mdx mouse model was reported by Wilton et al., (1999) *Neuromuscular Disorders* 9, 330-338. By directing an antisense molecule to the donor splice site, consistent and efficient exon 23 skipping was induced in the dystrophin mRNA within 6 hours of treatment of the cultured cells. Wilton et al, (1999), also describe targeting the acceptor region of the mouse dystrophin pre-mRNA with longer antisense oligonucleotides and being unable to repeat the published results of Dunckley et al., (1998). No exon skipping, either 23 alone or multiple removal of several flanking exons,

could be reproducibly detected using a selection of antisense oligonucleotides directed at the acceptor splice site of intron 22.

While the first antisense oligonucleotide directed at the intron 23 donor splice site induced consistent exon skipping in primary cultured myoblasts, this compound was found to be much less efficient in immortalized cell cultures expressing higher levels of dystrophin. However, with refined targeting and antisense oligonucleotide design, the efficiency of specific exon removal was increased by almost an order of magnitude (see Mann C J et al., (2002) *J Gen Med* 4, 644-654).

Thus, there remains a need to provide antisense oligonucleotides capable of binding to and modifying the splicing of a target nucleotide sequence. Simply directing the antisense oligonucleotides to motifs presumed to be crucial for splicing is no guarantee of the efficacy of that compound in a therapeutic setting.

SUMMARY OF THE INVENTION

The present invention provides antisense molecule compounds and compositions suitable for binding to RNA motifs involved in the splicing of pre-mRNA that are able to induce specific and efficient exon skipping and a method for their use thereof.

The choice of target selection plays a crucial role in the efficiency of exon skipping and hence its subsequent application of a potential therapy. Simply designing antisense molecules to target regions of pre-mRNA presumed to be involved in splicing is no guarantee of inducing efficient and specific exon skipping. The most obvious or readily defined targets for splicing intervention are the donor and acceptor splice sites although there are less defined or conserved motifs including exonic splicing enhancers, silencing elements and branch points.

The acceptor and donor splice sites have consensus sequences of about 16 and 8 bases respectively (see FIG. 1 for schematic representation of motifs and domains involved in exon recognition, intron removal and the splicing process).

According to a first aspect, the invention provides antisense molecules capable of binding to a selected target to induce exon skipping. For example, to induce exon skipping in exons 3 to 8, 10 to 16, 19 to 40, 42 to 44, 46, 47, and 50 to 53 in the Dystrophin gene transcript the antisense molecules are preferably selected from the group listed in Table 1A.

In a further example, it is possible to combine two or more antisense oligonucleotides of the present invention together to induce multiple exon skipping in exons 19-20, and 53. This is a similar concept to targeting of a single exon. A combination or "cocktail" of antisense oligonucleotides are directed at adjacent exons to induce efficient exon skipping.

In another example, to induce exon skipping in exons 19-20, 31, 34 and 53 it is possible to improve exon skipping of a single exon by joining together two or more antisense oligonucleotide molecules. This concept is termed by the inventor as a "weasel", an example of a cunningly designed antisense oligonucleotide. A similar concept has been described in Aartsma-Rus A et al., (2004) *Am J Hum Genet* 74: 83-92).

According to a second aspect, the present invention provides antisense molecules selected and/or adapted to aid in the prophylactic or therapeutic treatment of a genetic disorder comprising at least an antisense molecule in a form suitable for delivery to a patient.

According to a third aspect, the invention provides a method for treating a patient suffering from a genetic disease wherein there is a mutation in a gene encoding a particular

protein and the affect of the mutation can be abrogated by exon skipping, comprising the steps of: (a) selecting an antisense molecule in accordance with the methods described herein; and (b) administering the molecule to a patient in need of such treatment.

The invention also addresses the use of purified and isolated antisense oligonucleotides of the invention, for the manufacture of a medicament for treatment of a genetic disease.

The invention further provides a method of treating a condition characterised by Duchenne muscular dystrophy, which method comprises administering to a patient in need of treatment an effective amount of an appropriately designed antisense oligonucleotide of the invention, relevant to the particular genetic lesion in that patient. Further, the invention provides a method for prophylactically treating a patient to prevent or at least minimise Duchene muscular dystrophy, comprising the step of: administering to the patient an effective amount of an antisense oligonucleotide or a pharmaceutical composition comprising one or more of these biological molecules.

The invention also provides kits for treating a genetic disease, which kits comprise at least an antisense oligonucleotide of the present invention, packaged in a suitable container and instructions for its use.

Other aspects and advantages of the invention will become apparent to those skilled in the art from a review of the ensuing description, which proceeds with reference to the following figures.

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 Schematic representation of motifs and domains involved in exon recognition, intron removal and the splicing process (SEQ ID NOS: 213 and 214).

FIG. 2. Diagrammatic representation of the concept of antisense oligonucleotide induced exon skipping to by-pass disease-causing mutations (not drawn to scale). The hatched box represents an exon carrying a mutation that prevents the translation of the rest of the mRNA into a protein. The solid black bar represents an antisense oligonucleotide that prevents inclusion of that exon in the mature mRNA.

FIG. 3 Gel electrophoresis showing differing efficiencies of two antisense molecules directed at exon 8 acceptor splice site. The preferred compound [H8A(-06+18)] induces strong and consistent exon skipping at a transfection concentration of 20 nanomolar in cultured normal human muscle cells. The less preferred antisense oligonucleotide [H8A(-06+14)] also induces efficient exon skipping, but at much higher concentrations. Other antisense oligonucleotides directed at exon 8 either only induced lower levels of exon skipping or no detectable skipping at all (not shown).

FIG. 4 Gel electrophoresis showing differing efficiencies of two antisense molecules directed at internal domains within exon 7, presumably exon splicing enhancers. The preferred compound [H7A(+45+67)] induces strong and consistent exon skipping at a transfection concentration of 20 nanomolar in cultured human muscle cells. The less preferred antisense oligonucleotide [H7A(+2+26)] induces only low levels of exon skipping at the higher transfection concentrations. Other antisense oligonucleotides directed at exon 7 either only induced lower levels of exon skipping or no detectable skipping at all (not shown).

FIG. 5 Gel electrophoresis showing an example of low efficiency exon 6 skipping using two non-preferred antisense molecules directed at human exon 6 donor splice site. Levels of induced exon 6 skipping are either very low [H6D(+04-

21]] or almost undetectable [H6D(+18-04)]. These are examples of non-preferred antisense oligonucleotides to demonstrate that antisense oligonucleotide design plays a crucial role in the efficacy of these compounds.

FIG. 6 Gel electrophoresis showing strong and efficient human exon 6 skipping using an antisense molecules [H6A(+69+91)] directed at an exon 6 internal domain, presumably an exon splicing enhancer. This preferred compound induces consistent exon skipping at a transfection concentration of 20 nanomolar in cultured human muscle cells.

FIG. 7 Gel electrophoresis showing strong human exon 4 skipping using an antisense molecule H4A(+13+32) directed at an exon 6 internal domain, presumably an exon splicing enhancer. This preferred compound induces strong and consistent exon skipping at a transfection concentration of 20 nanomolar in cultured human muscle cells,

FIG. 8 Gel electrophoresis showing (8B) strong human exon 11 skipping using antisense molecule H11A(+75+97) directed at an exon 11 internal domain; and (8A) strong human exon 12 skipping using antisense molecule H12A(+52+75) directed at exon 12 internal domain.

FIG. 9 Gel electrophoresis showing (9A) strong human exon 15 skipping using antisense molecules H15A(+48+71) and H15A(-12+19) directed at an exon 15 internal domain; and (9B) strong human exon 16 skipping using antisense molecules H16A(-12+19) and H16A(-06+25).

FIG. 10 Gel electrophoresis showing human exon 19/20 skipping using antisense molecules H20A(+44+71) and H20A(+149+170) directed at an exon 20 and a "cocktail" of antisense oligonucleotides H19A(+35+65, H20A(+44+71) and H20A(+149+170) directed at exons 19/20.

FIG. 11 Gel electrophoresis showing human exon 19/20 skipping using "weasels" directed at exons 19 and 20.

FIG. 12 Gel electrophoresis showing exon 22 skipping using antisense molecules H22A(+125+106), H22A(+47+69), H22A(+80+101) and H22D(+13-11) directed at exon 22.

FIG. 13 Gel electrophoresis showing exon 31 skipping using antisense molecules H31D(+01-25) and H31D(+03-22); and a "cocktail" of antisense molecules directed at exon 31.

FIG. 14 Gel electrophoresis showing exon 33 skipping using antisense molecules H33A(+30+56) and H33A(+64+88) directed at exon 33.

FIG. 15 Gel electrophoresis showing exon 35 skipping using antisense molecules H35A(+141+161), H35A(+116+135), and H35A(+24+43) and a "cocktail of two antisense molecules, directed at exon 35.

FIG. 16 Gel electrophoresis showing exon 36 skipping using antisense molecules H32A(+49+73) and H36A(+26+50) directed at exon 36.

FIG. 17 Gel electrophoresis showing exon 37 skipping using antisense molecules H37A(+82+105) and H37A(+134+157) directed at exon 37.

FIG. 18 Gel electrophoresis showing exon 38 skipping using antisense molecule H38A(+88+112) directed at exon 38.

FIG. 19 Gel electrophoresis showing exon 40 skipping using antisense molecule H40A(-05+17) directed at exon 40.

FIG. 20 Gel electrophoresis showing exon 42 skipping using antisense molecule H42A(-04+23) directed at exon 42.

FIG. 21 Gel electrophoresis showing exon 46 skipping using antisense molecule H46A(+86+115) directed at exon 46.

FIG. 22 Gel electrophoresis showing exon 51, exon 52 and exon 53 skipping using various antisense molecules directed at exons 51, 52 and 53, respectively. A "cocktail" of antisense molecules is also shown directed at exon 53.

BRIEF DESCRIPTION OF THE SEQUENCE
LISTINGS

TABLE 1A

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------------------|--|
| 1 H8A(-06 + 18) | GAU AGG UGG UAU CAA CAU CUG UAA |
| 2 H8A(-03 + 18) | GAU AGG UGG UAU CAA CAU CUG |
| 3 H8A(-07 + 18) | GAU AGG UGG UAU CAA CAU CUG UAA G |
| 4 H8A(-06 + 14) | GGU GGU AUC AAC AUC UGU AA |
| 5 H8A(-10 + 10) | GUA UCA ACA UCU GUA AGC AC |
| 6 H7A(+45 + 67) | UGC AUG UUC CAG UCG UUG UGU GG |
| 7 H7A(+02 + 26) | CAC UAU UCC AGU CAA AUA GGU CUG G |
| 8 H7D(+15 - 10) | AUU UAC CAA UCU UCA GGA UCG AGU A |
| 9 H7A(-18 + 03) | GGC CUA AAA CAC AUA CAC AUA |
| 10 C6A(-10 + 10) | CAU UUU UGA CCU ACA UGU GG |
| 11 C6A(-14 + 06) | UUU GAC CUA CAU GUG GAA AG |
| 12 C6A(-14 + 12) | UAC AUU UUU GAC CUA CAU GUG GAA AG |
| 13 C6A(-13 + 09) | AUU UUU GAC CUA CAU GGG AAA G |
| 14 CH6A(+69 + 91) | UAC GAG UUG AUU GUC GGA CCC AG |
| 15 C6D(+12 - 13) | GUG GUC UCC UUA CCU AUG ACU GUG G |
| 16 C6D(+06 - 11) | GGU CUC CUU ACC UAU GA |
| 17 H6D(+04 - 21) | UGU CUC AGU AAU CUU CUU ACC UAU |
| 18 H6D(+18 - 04) | UCU UAC CUA UGA CUA UGG AUG AGA |
| 19 H4A(+13 + 32) | GCA UGA ACU CUU GUG GAU CC |
| 20 H4D(+04 - 16) | CCA GGG UAC UAC UUA CAU UA |
| 21 H4D(-24 - 44) | AUC GUG UGU CAC AGC AUC CAG |
| 22 H4A(+11 + 40) | UGU UCA GGG CAU GAA CUC UUG UGG AUC CUU |
| 23 H3A(+30 + 60) | UAG GAG GCG CCU CCC AUC CUG UAG GUC ACU G |
| 24 H3A(+35 + 65) | AGG UCU AGG AGG CGC CUC CCA UCC UGU AGG U |
| 25 H3A(+30 + 54) | GCG CCU CCC AUC CUG UAG GUC ACU G |
| 26 H3D(+46 - 21) | CUU CGA GGA GGU CUA GGA GGC GCC UC |
| 27 H3A(+30 + 50) | CUC CCA UCC UGU AGG UCA CUG |
| 28 H3D(+19 - 03) | UAC CAG UUU UUG CCC UGU CAG G |
| 29 H3A(-06 + 20) | UCA AUA UGC UGC UUC CCA AAC UGA AA |
| 30 H3A(+37 + 61) | CUA GGA GGC GCC UCC CAU CCU GUA G |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------------------|--|
| 31H5A(+20 + 50) | UUA UGA UUU CCA UCU ACG AUG UCA GUA CUU C |
| 32H5D(+25 - 05) | CUU ACC UGC CAG UGG AGG AUU AUA UUC CAA A |
| 33H5D(+10 - 15) | CAU CAG GAU UCU UAC CUG CCA GUG G |
| 34H5A(+10 + 34) | CGA UGU CAG UAC UUC CAA UAU UCA C |
| 35H5D(-04 - 21) | ACC AUU CAU CAG GAU UCU |
| 36H5D(+16 - 02) | ACC UGC CAG UGG AGG AUU |
| 37H5A(-07 + 20) | CCA AUA UUC ACU AAA UCA ACC UGU UAA |
| 38H5D(+18 - 12) | CAG GAU UGU UAC CUG CCA GUG GAG GAU UAU |
| 39H5A(+05 + 35) | ACG AUG UCA GUA CUU CCA AUA UUC ACU AAA U |
| 40H5A(+15 + 45) | AUU UCC AUC UAC GAU GUC AGU ACU UCC AAU A |
| 41H10A(-05 + 16) | CAG GAG CUU CCA AAU GCU GCA |
| 42H10A(-05 + 24) | CUU GUC UUC AGG AGC UUC CAA AUG CUG CA |
| 43H10A(+98 + 119) | UCC UCA GCA GAA AGA AGC CAC G |
| 44H10A(+130 + 149) | UUA GAA AUC UCU CCU UGU GC |
| 45H10A(-33 - 14) | UAA AUU GGG UGU UAC ACA AU |
| 46H11D(+26 + 49) | CCC UGA GGC AUU CCC AUC UUG AAU |
| 47H11D(+11 - 09) | AGG ACU UAC UUG CUU UGU UU |
| 48H11A(+118 + 140) | CUU GAA UUU AGG AGA UUC AUC UG |
| 49H11A(+75 + 97) | CAU CUU CUG AUA AUU UUC CUG UU |
| 50H12A(+52 + 75) | UCU UCU GUU UUU GUU AGC CAG UCA |
| 51H12A(-10 + 10) | UCU AUG UAA ACU GAA AAU UU |
| 52H12A(+11 + 30) | UUC UGG AGA UCC AUU AAA AC |
| 53H13A(+77 + 100) | CAG CAG UUG CGU GAU CUC CAC UAG |
| 54H13A(+55 + 75) | UUC AUC AAC UAC CAC CAC CAU |
| 55H13D(+06 - 19) | CUA AGC AAA AUA AUC UGA CCU UAA G |
| 56H14A(+37 + 64) | CUU GUA AAA GAA CCC AGC GGU CUU CUG U |
| 57H14A(+14 + 35) | CAU CUA CAG AUG UUU GCC CAU C |
| 58H14A(+51 + 73) | GAA GGA UGU CUU GUA AAA GAA CC |
| 59H14D(-02 + 18) | ACC UGU UCU UCA GUA AGA CG |
| 60H14D(+14 - 10) | CAU GAC ACA CCU GUU CUU CAG UAA |
| 61H14A(+61 + 80) | CAU UUG AGA AGG AUG UCU UG |
| 62H14A(-12 + 12) | AUC UCC CAA UAC CUG GAG AAG AGA |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------------------|--|
| 63H15A(-12 + 19) | GCC AUG CAC UAA AAA GGC ACU GCA AGA CAU U |
| 64H15A(+48 + 71) | UCU UUA AAG CCA GUU GUG UGA AUC |
| 65H15A(+08 + 28) | UUU CUG AAA GCC AUG CAC UAA |
| 66H15D(+17 - 08) | GUA CAU ACG GCC AGU UUU UGA AGA C |
| 67H16A(-12 + 19) | CUA GAU CCG CUU UUA AAA CCU GUU AAA ACA A |
| 68H16A(-06 + 25) | UCU UUU CUA GAU CCG CUU UUA AAA CCU GUU A |
| 69H16A(-06 + 19) | CUA GAU CCG CUU UUA AAA CCU GUU A |
| 70H16A(+87 + 109) | CCG UCU UCU GGG UCA CUG ACU UA |
| 71H16A(-07 + 19) | CUA GAU CCG CUU UUA AAA CCU GUU AA |
| 72H16A(-07 + 13) | CCG CUU UUA AAA CCU GUU AA |
| 73H16A(+12 + 37) | UGG AUU GCU UUU UCU UUU CUA GAU CC |
| 74H16A(+92 + 116) | CAU GCU UCC GUC UUC UGG GUC ACU G |
| 75H16A(+45 + 67) | G AUC UUG UUU GAG UGA AUA CAG U |
| 76H16A(+105 + 126) | GUU AUC CAG CCA UGC UUC CGU C |
| 77H16D(+05 - 20) | UGA UAA UUG GUA UCA CUA ACC UGU G |
| 78H16D(+12 - 11) | GUA UCA CUA ACC UGU GCU GUA C |
| 79H19A(+35 + 53) | CUG CUG GCA UCU UGC AGU U |
| 80H19A(+35 + 65) | GCC UGA GCU GAU CUG CUG GCA UCU UGC AGU U |
| 81H20A(+44 + 71) | CUG GCA GAA UUC GAU CCA CCG GCU GUU C |
| 82H20A(+147 + 168) | CAG CAG UAG UUG UCA UCU GCU C |
| 83H20A(+185 + 203) | UGA UGG GGU GGU GGG UUG G |
| 84H20A(-08 + 17) | AUC UGC AUU AAC ACC CUC UAG AAA G |
| 85H20A(+30 + 53) | CCG GCU GUU CAG UUG UUC UGA GGC |
| 86H20A(-11 + 17) | AUC UGC AUU AAC ACC CUC UAG AAA GAA A |
| 87H20D(+08 - 20) | GAA GGA GAA GAG AUU CUU ACC UUA CAA A |
| 88H20A(+44 + 63) | AUU CGA UCC ACC GGC UGU UC |
| 89H20A(+149 + 168) | CAG CAG UAG UUG UCA UCU GC |
| 90H21A(-06 + 16) | GCC GGU UGA CUU CAU CCU GUG C |
| 91H21A(+85 + 106) | CUG CAU CCA GGA ACA UGG GUC C |
| 92H21A(+85 + 108) | GUC UGC AUC CAG GAA CAU GGG UC |
| 93H21A(+08 + 31) | GUU GAA GAU CUG AUA GCC GGU UGA |
| 94H21D(+18 - 07) | UAC UUA CUG UCU GUA GCU CUU UCU |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|----------------------|-------------------------------------|
| 95 H22A(+22 + 45) | CAC UCA UGG UCU CCU GAU AGC GCA |
| 96 H22A(+125 + 106) | CUG CAA UUC CCC GAG UCU CUG C |
| 97 H22A(+47 + 69) | ACU GCU GGA CCC AUG UCC UGA UG |
| 98 H22A(+80 + 101) | CUA AGU UGA GGU AUG GAG AGU |
| 99 H22D(+13 - 11) | UAU UCA CAG ACC UGC AAU UCC CC |
| 100 H23A(+34 + 59) | ACA GUG GUG CUG AGA UAG UAU AGG CC |
| 101 H23A(+18 + 39) | UAG GCC ACU UUG UUG CUC UUG C |
| 102 H23A(+72 + 90) | UUC AGA GGG CGC UUU CUU C |
| 103 H24A(+48 + 70) | GGG CAG GCC AUU CCU CCU UCA GA |
| 104 H24A(-02 + 22) | UCU UCA GGG UUU GUA UGU GAU UCU |
| 105 H25A(+9 + 36) | CUG GGC UGA AUU GUC UGA AUA UCA CUG |
| 106 H25A(+131 + 156) | CUG UUG GCA CAU GUG AUC CCA CUG AG |
| 107 H25D(+16 - 08) | GUC UAU ACC UGU UGG CAC AUG UGA |
| 108 H26A(+132 + 156) | UGC UUU CUG UAA UUC AUC UGG AGU U |
| 109 H26A(-07 + 19) | CCU CCU UUC UGG CAU AGA CCU UCC AC |
| 110 H26A(+68 + 92) | UGU GUC AUC CAU UCG UGC AUC UCU G |
| 111 H27A(+82 + 106) | UUA AGG CCU CUU GUG CUA CAG GUG G |
| 112 H27A(-4 + 19) | GGG GCU CUU CUU UAG CUC UCU GA |
| 113 H27D(+19 - 03) | GAC UUC CAA AGU CUU GCA UUU C |
| 114 H28A(-05 + 19) | GCC AAC AUG CCC AAA CUU CCU AAG |
| 115 H28A(+99 + 124) | CAG AGA UUU CCU CAG CUC CGC CAG GA |
| 116 H28D(+16 - 05) | CUU ACA UCU AGC ACC UCA GAG |
| 117 H29A(+57 + 81) | UCC GCC AUC UGU UAG GGU CUG UGC C |
| 118 H29A(+18 + 42) | AUU UGG GUU AUC CUC UGA AUG UCG C |
| 119 H29D(+17 - 05) | CAU ACC UCU UCA UGU AGU UCC C |
| 120 H30A(+122 + 147) | CAU UUG AGC UGC GUC CAC CUU GUC UG |
| 121 H30A(+25 + 50) | UCC UGG GCA GAC UGG AUG CUC UGU UC |
| 122 H30D(+19 - 04) | UUG CCU GGG CUU CCU GAG GCA UU |
| 123 H31D(+06 - 18) | UUC UGA AAU AAC ADA UAC CUG UGC |
| 124 H31D(+03 - 22) | UAG UUU CUG AAA UAA CAU AUA CCU G |
| 125 H31A(+05 + 25) | GAC UUG UCA AAU CAG AUU GGA |
| 126 H31D(+04 - 20) | GUU UCU GAA AUA ACA UAU ACC UGU |
| 127 H32D(+04 - 16) | CAC CAG AAA UAC AUA CCA CA |
| 128 H32A(+151 + 170) | CAA UGA UUU AGC UGU GAC UG |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|---------------------|--|
| 129H32A(+10 + 32) | CGA AAC UUC AUG GAG ACA UCU UG |
| 130H32A(+49 + 73) | CUU GUA GAC GCU GCU CAA AAU UGG C |
| 131H33D(+09 - 11) | CAU GCA CAC ACC UUU GCU CC |
| 132H33A(+53 + 76) | UCU GUA CAA UCU GAC GUC CAG UCU |
| 133H33A(+30 + 56) | GUC UUU AUC ACC AUU UCC ACU UCA GAC |
| 134H33A(+64 + 88) | CCG UCU GCU UUU UCU GUA CAA UCU G |
| 135H34A(+83 + 104) | UCC AUA UCU GUA GCU GCC AGC C |
| 136H34A(+143 + 165) | CCA GGC AAC UUC AGA AUC CAA AU |
| 137H34A(-20 + 10) | UUU CUG UUA CCU GAA AAG AAU UAU AAU GAA |
| 138H34A(+46 + 70) | CAU UCA UUU CCU UUC GCA UCU UAC G |
| 139H34A(+95 + 120) | UGA UCU CUU UGU CAA UUC CAU AUC UG |
| 140H34D(+10 - 20) | UUC AGU GAU AUA GGU UUU ACC UUU CCC CAG |
| 141H34A(+72 + 96) | CUG UAG CUG CCA GCC AUU CUG UCA AG |
| 142H35A(+141 + 161) | UCU UCU GCU CGG GAG GUG ACA |
| 143H35A(+116 + 135) | CCA GUU ACU AUU CAG AAG AC |
| 144H35A(+24 + 43) | UCU UCA GGU GCA CCU UCU GU |
| 145H36A(+26 + 50) | UGU GAU GUG GUC CAC AUU CUG GUC A |
| 146H36A(-02 + 18) | CCA UGU GUU UCU GGU AUU CC |
| 147H37A(+26 + 50) | CGU GUA GAG UCC ACC UUU GGG CGU A |
| 148H37A(+82 + 105) | UAC UAA UUU CCU GCA GUG GUC ACC |
| 149H37A(+134 + 157) | UUC UGU GUG AAA UGG CUG CAA AUC |
| 150H38A(-01 + 19) | CCU UCA AAG GAA UGG AGG CC |
| 151H38A(+59 + 83) | UGC UGA AUU UCA GCC UCC AGU GGU U |
| 152H38A(+88 + 112) | UGA AGU CUU CCU CUU UCA GAU UCA C |
| 153H39A(+62 + 85) | CUG GCU UUC UCU CAU CUG UGA UUC |
| 154H39A(+39 + 58) | GUU GUA AGU UGU CUC CUC UU |
| 155H39A(+102 + 121) | UUG UCU GUA ACA GCU GCU GU |
| 156H39D(+10 - 10) | GCU CUA AUA CCU UGA GAG CA |
| 157H40A(-05 + 17) | CUU UGA GAC CUC AAA UCC UGU U |
| 158H40A(+129 + 153) | CUU UAU UUU CCU UUC AUC UCU GGG C |
| 159H42A(-04 + 23) | AUC GUU UCU UCA CGG ACA GUG UGC UGG |
| 160H42A(+86 + 109) | GGG CUU GUG AGA CAU GAG UGA UUU |
| 161H42D(+19 - 02) | A CCU UCA GAG GAC UCC UCU UGC |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "I".

| SEQ ID SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|---------------------------------|--|
| 162H43D(+10 - 15) | UAU GUG UUA CCU ACC CUU GUC GGU C |
| 163H43A(+101 + 120) | GGA GAG AGC UUC CUG UAG CU |
| 164H43A(+78 + 100) | UCA CCC UUU CCA CAG GCG UUG CA |
| 165H44A(+85 + 104) | UUU GUG UCU UUC UGA GAA AC |
| 166H44D(+10 - 10) | AAA GAC UUA CCU UAA GAU AC |
| 167H44A(-06 + 14) | AUC UGU CAA AUC GCC UGC AG |
| 168H46D(+16 - 04) | UUA CCU UGA CUU GCU CAA GC |
| 169H46A(+90 + 109) | UCC AGG UUC AAG UGG GAU AC |
| 170H47A(+76 + 100) | GCU CUU CUG GGC UUA UGG GAG CAC U |
| 171H47D(+25 - 02) | ACC UUU AUC CAC UGG AGA UUU GUC UGC |
| 172H47A(-9 + 12) | UUC CAC CAG UAA CUG AAA CAG |
| 173H50A(+02 + 30) | CCA CUC AGA GCU CAG AUC UUC UAA CUU CC |
| 174H50A(+07 + 33) | CUU CCA CUC AGA GCU CAG AUC UUC UAA |
| 175H50D(+07 - 18) | GGG AUC CAG UAU ACU UAC AGG CUC C |
| 176H51A(-01 + 25) | ACC AGA GUA ACA GUC UGA GUA GGA GC |
| 177H51D(+16 - 07) | CUC AUA CCU UCU GCU UGA UGA UC |
| 178H51A(+111 + 134) | UUC UGU CCA AGC CCG GUU GAA AUC |
| 179H51A(+61 + 90) | ACA UCA AGG AAG AUG GCA UUU CUA GUU UGG |
| 180H51A(+66 + 90) | ACA UCA AGG AAG AUG GCA UUU CUA G |
| 181H51A(+66 + 95) | CUC CAA CAU CAA GGA AGA UGG CAU UUC UAG |
| 182H51D(+08 - 17) | AUC AUU UUU UCU CAU ACC UUC UGC U |
| 183H51A/D(+08 - 17) & (-15+) | AUC AUU UUU UCU CAU ACC UUC UGC UAG GAG CUA AAA |
| 184H51A(+175 + 195) | CAC CCA CCA UCA CCC UCU GUG |
| 185H51A(+199 + 220) | AUC AUC UCG UUG AUA UCC UCA A |
| 186H52A(-07 + 14) | UCC UGC AUU GUU GCC UGU AAG |
| 187H52A(+12 + 41) | UCC AAC UGG GGA CGC CUC UGU UCC AAA UCC |
| 188H52A(+17 + 37) | ACU GGG GAC GCC UCU GUU CCA |
| 189H52A(+93 + 112) | CCG UAA UGA UUG UUC UAG CC |
| 190H52D(+05 - 15) | UGU UAA AAA ACU UAC UUC GA |
| 191H53A(+45 + 69) | CAU UCA ACU GUU GCC UCC GGU UCU G |
| 192H53A(+39 + 62) | CUG UUG CCU CCG GUU CUG AAG GUG |
| 193H53A(+39 + 69) | CAU UCA ACU GUU GCC UCC GGU UCU GAA |

TABLE 1A-continued

Description of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA. Since these 2'-O-methyl antisense oligonucleotides are more RNA-like, U represents uracil. With other antisense chemistries such as peptide nucleic acids or morpholinos, these U bases may be shown as "T".

| SEQ ID | SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|---------------------|----------|---|
| | | GGU G |
| 194H53D(+14 - 07) | | UAC UAA CCU UGG UUU CUG UGA |
| 195H53A(+23 + 47) | | CUG AAG GUG UUC UUG UAC UUC AUC C |
| 196H53A(+150 + 176) | | UGU AUA GGG ACC CUC CUU CCA UGA CUC |
| 197H53D(+20 - 05) | | CUA ACC UUG GUU UCU GUG AUU UUC U |
| 198H53D(+09 - 18) | | GGU AUC UUU GAU ACU AAC CUU GGU UUC |
| 199H53A(-12 + 10) | | AUU CUU UCA ACU AGA AUA AAA G |
| 200H53A(-07 + 18) | | GAU UCU GAA UUC UUU CAA CUA GAA U |
| 201H53A(+07 + 26) | | AUC CCA CUG AUU CUG AAU UC |
| 202H53A(+124 + 145) | | UUU GCU CUG GCC UGU CCU AAG A |
| 203H46A(+86 + 115) | | CUC UUU UCC AGG UUC AAG UGG GAU ACU AGC |
| 204H46A(+107 + 137) | | CAA GCU UUU CUU UUA GUU GCU GCU CUU UUC C |
| 205H46A(-10 + 20) | | UAU UCU UUU GUU CUU CUA GCC UGG AGA AAG |
| 206H46A(+50 + 77) | | CUG CUU CCU CCA ACC AUA AAA CAA AUU C |
| 207H45A(-06 + 20) | | CCA AUG CCA UCC UGG AGU UCC UGU AA |
| 208H45A(+91 + 110) | | UCC UGU AGA AUA CUG GCA UC |
| 209H45A(+125 + 151) | | UGC AGA CCU CCU GCC ACC GCA GAU UCA |
| 210H45D(+16 - 04) | | CUA CCU CUU UUU UCU GUC UG |
| 211H45A(+71 + 90) | | UGU UUU UGA GGA UUG CUG AA |

TABLE 1B

Description of a cocktail of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the dystrophin pre-mRNA.

| SEQ ID | SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------|------------------|--|
| 81 | H20A(+44 + 71) | CUG GCA GAA UUC GAU CCA CCG GCU |
| 82 | H20A(+147 + 168) | GUU C CAG CAG UAG UUG UCA UCU GCU C |
| 80 | H19A(+35 + 65) | GCC UGA GCU GAU CUG CUG GCA UCU |
| 81 | H20A(+44 + 71) | UGC |
| 82 | H20A(+147 + 168) | AGU U CUG GCA GAA UUC GAU CCA CCG GCU GUU C CAG CAG UAG UUG UCA UCU GCU C |
| 194 | H53D(+14 - 07) | UAC UAA CCU UGG UUU CUG UGA |
| 195 | H53A(+23 + 47) | CUG AAG GUG UUC UUG UAC UUC AUC C |

TABLE 1B-continued

Description of a cocktail of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the *dystrophin pre-mRNA*.

| SEQ ID | SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------|------------------|--|
| 196 | H53A(+150 + 175) | UGU AUA GGG ACC CUC CUU CCA UGA CUC |

TABLE 1C

Description of a "weasel" of 2'-O-methyl phosphorothioate antisense oligonucleotides that have been used to date to study induced exon skipping during the processing of the *dystrophin pre-mRNA*.

| SEQ ID | SEQUENCE | NUCLEOTIDE SEQUENCE (5'-3') |
|--------|-------------------------------|--|
| 81 | H20A(+44 + 71) - | CUG GCA GAA UUC GAU CCA CCG GCU GUU C- |
| 82 | H20A(+147 + 168) | CAG CAG UAG UUG UCA UCU GCU C |
| 80 | H19A(+35 + 65) - | GCC UGA GCU GAU CUG CUG GCA UCU UGC AOU U |
| 88 | H20A(+44 + 63) - | -AUU CGA UCC ACC GGC UGU UC- |
| 79 | H20A(+149 + 168) | CUG CUG GCA UCU UGC AGU U |
| 80 | H19A(+35 + 65) - | GCC UGA GCU GAU CUG CUG GCA UCU UGC AGU U |
| 88 | H20A(+44 + 63) | -AUU CGA UCC ACC GGC UGU UC- |
| 80 | H19A(+35 + 65) - | GCC UGA GCU GAU CUG CUG GCA UCU UGC AGU U |
| 79 | H20A(+149 + 168) | -CUG CUG GCA UCU UGC AGU U |
| 138 | H34A(+46 + 70) - | CAU UCA UUU CCU UUC GCA UCU UAC G- |
| 139 | H34A(+94 + 120) | UGA UCU CUU UGU CAA UUC CAU AUC UG |
| 124 | H31D(+03 - 22) - UU- | UAG UUU CUG AAA UAA CAU AUA CCU G- UU- |
| 144 | H35A(+24 + 43) | UCU UCA GGU GCA CCU UCU GU |
| 195 | H53A(+23 + 47) - AA- | CUG AAG GUG UUC UUG UAC UUC AUC C- |
| 196 | H53A(+150 + 175) - AA- | UGU AUA GGG ACC CUC CUU CCA UGA CUC- AA- |
| 194 | H53D(+14 - 07) | UAC UAA CCU UGG UUU CUG UGA |
| - | Aimed at exons 21219/20/20 | CAG CAG UAG UUG UCA UCU GCU CAA CUG GCA GAA UUC GAU CCA CCG GCU GUU CAA GCC UGA GCU GAU CUG CUC GCA UCU UGC AGU |

DETAILED DESCRIPTION OF THE INVENTION

General

Those skilled in the art will appreciate that the invention described herein is susceptible to variations and modifications other than those specifically described. It is to be understood that the invention includes all such variation and modifications. The invention also includes all of the steps, features, compositions and compounds referred to or indicated in the

specification, individually or collectively and any and all combinations or any two or more of the steps or features.

The present invention is not to be limited in scope by the specific embodiments described herein, which are intended for the purpose of exemplification only. Functionally equivalent products, compositions and methods are clearly within the scope of the invention as described herein.

Sequence identity numbers (SEQ ID NO:) containing nucleotide and amino acid sequence information included in

this specification are collected at the end of the description and have been prepared using the programme PatentIn Version 3.0. Each nucleotide or amino acid sequence is identified in the sequence listing by the numeric indicator <210> followed by the sequence identifier (e.g. <210>1, <210>2, etc.). The length, type of sequence and source organism for each nucleotide or amino acid sequence are indicated by information provided in the numeric indicator fields <211>, <212> and <213>, respectively. Nucleotide and amino acid sequences referred to in the specification are defined by the information provided in numeric indicator field <400> followed by the sequence identifier (e.g. <400>1, <400>2, etc.).

An antisense molecules nomenclature system was proposed and published to distinguish between the different antisense molecules (see Mann et al., (2002) *J Gen Med* 4, 644-654). This nomenclature became especially relevant when testing several slightly different antisense molecules, all directed at the same target region, as shown below:

H#A/D(x:y).

The first letter designates the species (e.g. H: human, M: murine, C: canine) “#” designates target dystrophin exon number.

“A/D” indicates acceptor or donor splice site at the beginning and end of the exon, respectively.

(x y) represents the annealing coordinates where “-” or “+” indicate intronic or exonic sequences respectively. As an example, A(-6+18) would indicate the last 6 bases of the intron preceding the target exon and the first 18 bases of the target exon. The closest splice site would be the acceptor so these coordinates would be preceded with an “A”. Describing annealing coordinates at the donor splice site could be D(+2-18) where the last 2 exonic bases and the first 18 intronic bases correspond to the annealing site of the antisense molecule. Entirely exonic annealing coordinates that would be represented by A(+65+85), that is the site between the 65th and 85th nucleotide from the start of that exon.

The entire disclosures of all publications (including patents, patent applications, journal articles, laboratory manuals, books, or other documents) cited herein are hereby incorporated by reference. No admission is made that any of the references constitute prior art or are part of the common general knowledge of those working in the field to which this invention relates.

As used necessarily herein the term “derived” and “derived from” shall be taken to indicate that a specific integer may be obtained from a particular source albeit not directly from that source.

Throughout this specification, unless the context requires otherwise, the word “comprise”, or variations such as “comprises” or “comprising”, will be understood to imply the inclusion of a stated integer or group of integers but not the exclusion of any other integer or group of integers.

Other definitions for selected terms used herein may be found within the detailed description of the invention and apply throughout. Unless otherwise defined, all other scientific and technical terms used herein have the same meaning as commonly understood to one of ordinary skill in the art to which the invention belongs.

Description of the Preferred Embodiment

When antisense molecule(s) are targeted to nucleotide sequences involved in splicing in exons within pre-mRNA sequences, normal splicing of the exon may be inhibited causing the splicing machinery to by-pass the entire mutated exon from the mature mRNA. The concept of antisense oligonucleotide induced exon skipping is shown in FIG. 2. In many genes, deletion of an entire exon would lead to the

production of a non-functional protein through the loss of important functional domains or the disruption of the reading frame. In some proteins, however, it is possible to shorten the protein by deleting one or more exons, without disrupting the reading frame, from within the protein without seriously altering the biological activity of the protein. Typically, such proteins have a structural role and or possess functional domains at their ends. The present invention describes antisense molecules capable of binding to specified dystrophin pre-mRNA targets and re-directing processing of that gene.

Antisense Molecules

According to a first aspect of the invention, there is provided antisense molecules capable of binding to a selected target to induce exon skipping. To induce exon skipping in exons of the Dystrophin gene transcript, the antisense molecules are preferably selected from the group of compounds shown in Table 1A. There is also provided a combination or “cocktail” of two or more antisense oligonucleotides capable of binding to a selected target to induce exon skipping. To induce exon skipping in exons of the Dystrophin gene transcript, the antisense molecules in a “cocktail” are preferably selected from the group of compounds shown in Table 1B. Alternatively, exon skipping may be induced by antisense oligonucleotides joined together “weasels” preferably selected from the group of compounds shown in Table 1C.

Designing antisense molecules to completely mask consensus splice sites may not necessarily generate any skipping of the targeted exon. Furthermore, the inventors have discovered that size or length of the antisense oligonucleotide itself is not always a primary factor when designing antisense molecules. With some targets such as exon 19, antisense oligonucleotides as short as 12 bases were able to induce exon skipping, albeit not as efficiently as longer (20-31 bases) oligonucleotides. In some other targets, such as murine dystrophin exon 23, antisense oligonucleotides only 17 residues long were able to induce more efficient skipping than another overlapping compound of 25 nucleotides.

The inventors have also discovered that there does not appear to be any standard motif that can be blocked or masked by antisense molecules to redirect splicing. In some exons, such as mouse dystrophin exon 23, the donor splice site was the most amenable to target to re-direct skipping of that exon. It should be noted that designing and testing a series of exon 23 specific antisense molecules to anneal to overlapping regions of the donor splice site showed considerable variation in the efficacy of induced exon skipping. As reported in Mann et al., (2002) there was a significant variation in the efficiency of bypassing the nonsense mutation depending upon antisense oligonucleotide annealing (“Improved antisense oligonucleotide induced exon skipping in the mdx mouse model of muscular dystrophy”. *J Gen Med* 4: 644-654). Targeting the acceptor site of exon 23 or several internal domains was not found to induce any consistent exon 23 skipping.

In other exons targeted for removal, masking the donor splice site did not induce any exon skipping. However, by directing antisense molecules to the acceptor splice site (human exon 8 as discussed below), strong and sustained exon skipping was induced. It should be noted that removal of human exon 8 was tightly linked with the co-removal of exon 9. There is no strong sequence homology between the exon 8 antisense oligonucleotides and corresponding regions of exon 9 so it does not appear to be a matter of cross reaction. Rather the splicing of these two exons is inextricably linked. This is not an isolated instance as the same effect is observed in canine cells where targeting exon 8 for removal also resulted in the skipping of exon 9. Targeting exon 23 for removal in the mouse dystrophin pre-mRNA also results in

the frequent removal of exon 22 as well. This effect occurs in a dose dependent manner and also indicates close coordinated processing of 2 adjacent exons.

In other targeted exons, antisense molecules directed at the donor or acceptor splice sites did not induce exon skipping while annealing antisense molecules to intra-exonic regions (i.e. exon splicing enhancers within human dystrophin exon 6) was most efficient at inducing exon skipping. Some exons, both mouse and human exon 19 for example, are readily skipped by targeting antisense molecules to a variety of motifs. That is, targeted exon skipping is induced after using antisense oligonucleotides to mask donor and acceptor splice sites or exon splicing enhancers.

To identify and select antisense oligonucleotides suitable for use in the modulation of exon skipping, a nucleic acid sequence whose function is to be modulated must first be identified. This may be, for example, a gene (or mRNA transcribed from the gene) whose expression is associated with a particular disorder or disease state, or a nucleic acid molecule from an infectious agent. Within the context of the present invention, preferred target site(s) are those involved in mRNA splicing (i.e. splice donor sites, splice acceptor sites, or exonic splicing enhancer elements). Splicing branch points and exon recognition sequences or splice enhancers are also potential target sites for modulation of mRNA splicing.

Preferably, the present invention aims to provide antisense molecules capable of binding to a selected target in the dystrophin pre-mRNA to induce efficient and consistent exon skipping. Duchenne muscular dystrophy arises from mutations that preclude the synthesis of a functional dystrophin gene product. These Duchenne muscular dystrophy gene defects are typically nonsense mutations or genomic rearrangements such as deletions, duplications or micro-deletions or insertions that disrupt the reading frame. As the human dystrophin gene is a large and complex gene with the 79 exons being spliced together to generate a mature mRNA with an open reading frame of approximately 11,000 bases, there are many positions where these mutations can occur. Consequently, a comprehensive antisense oligonucleotide based therapy to address many of the different disease-causing mutations in the dystrophin gene will require that many exons can be targeted for removal during the splicing process.

Within the context of the present invention, preferred target site(s) are those involved in mRNA splicing (i.e. splice donor sites, splice acceptor sites or exonic splicing enhancer elements). Splicing branch points and exon recognition sequences or splice enhancers are also potential target sites for modulation of mRNA splicing.

The oligonucleotide and the DNA or RNA are complementary to each other when a sufficient number of corresponding positions in each molecule are occupied by nucleotides which can hydrogen bond with each other. Thus, "specifically hybridisable" and "complementary" are terms which are used to indicate a sufficient degree of complementarity or precise pairing such that stable and specific binding occurs between the oligonucleotide and the DNA or RNA target. It is understood in the art that the sequence of an antisense molecule need not be 100% complementary to that of its target sequence to be specifically hybridisable. An antisense molecule is specifically hybridisable when binding of the compound to the target DNA or RNA molecule interferes with the normal function of the target DNA or RNA to cause a loss of utility, and there is a sufficient degree of complementarity to avoid non-specific binding of the antisense compound to non-target sequences under conditions in which specific binding is desired, i.e., under physiological conditions in the case of in

vivo assays or therapeutic treatment, and in the case of in vitro assays, under conditions in which the assays are performed.

While the above method may be used to select antisense molecules capable of deleting any exon from within a protein that is capable of being shortened without affecting its biological function, the exon deletion should not lead to a reading frame shift in the shortened transcribed mRNA. Thus, if in a linear sequence of three exons the end of the first exon encodes two of three nucleotides in a codon and the next exon is deleted then the third exon in the linear sequence must start with a single nucleotide that is capable of completing the nucleotide triplet for a codon. If the third exon does not commence with a single nucleotide there will be a reading frame shift that would lead to the generation of truncated or a non-functional protein.

It will be appreciated that the codon arrangements at the end of exons in structural proteins may not always break at the end of a codon, consequently there may be a need to delete more than one exon from the pre-mRNA to ensure in-frame reading of the mRNA. In such circumstances, a plurality of antisense oligonucleotides may need to be selected by the method of the invention wherein each is directed to a different region responsible for inducing splicing in the exons that are to be deleted.

The length of an antisense molecule may vary so long as it is capable of binding selectively to the intended location within the pre-mRNA molecule. The length of such sequences can be determined in accordance with selection procedures described herein. Generally, the antisense molecule will be from about 10 nucleotides in length up to about 50 nucleotides in length. It will be appreciated however that any length of nucleotides within this range may be used in the method. Preferably, the length of the antisense molecule is between 17 to 30 nucleotides in length.

In order to determine which exons can be connected in a dystrophin gene, reference should be made to an exon boundary map. Connection of one exon with another is based on the exons possessing the same number at the 3' border as is present at the 5' border of the exon to which it is being connected. Therefore, if exon 7 were deleted, exon 6 must connect to either exons 12 or 18 to maintain the reading frame. Thus, antisense oligonucleotides would need to be selected which redirected splicing for exons 7 to 11 in the first instance or exons 7 to 17 in the second instance. Another and somewhat simpler approach to restore the reading frame around an exon 7 deletion would be to remove the two flanking exons. Induction of exons 6 and 8 skipping should result in an in-frame transcript with the splicing of exons 5 to 9. In practise however, targeting exon 8 for removal from the pre-mRNA results in the co-removal of exon 9 so the resultant transcript would have exon 5 joined to exon 10. The inclusion or exclusion of exon 9 does not alter the reading frame. Once the antisense molecules to be tested have been identified, they are prepared according to standard techniques known in the art. The most common method for producing antisense molecules is the methylation of the 2' hydroxyribose position and the incorporation of a phosphorothioate backbone produces molecules that superficially resemble RNA but that are much more resistant to nuclease degradation.

To avoid degradation of pre-mRNA during duplex formation with the antisense molecules, the antisense molecules used in the method may be adapted to minimise or prevent cleavage by endogenous RNase H. This property is highly preferred as the treatment of the RNA with the unmethylated oligonucleotides either intracellularly or in crude extracts that contain RNase H leads to degradation of the pre-mRNA: antisense oligonucleotide duplexes. Any form of modified

antisense molecules that is capable of by-passing or not inducing such degradation may be used in the present method. An example of antisense molecules which when duplexed with RNA are not cleaved by cellular RNase H is 2'-O-methyl derivatives. 2'-O-methyl-oligoribonucleotides are very stable in a cellular environment and in animal tissues, and their duplexes with RNA have higher T_m values than their ribo- or deoxyribo-counterparts.

Antisense molecules that do not activate RNase H can be made in accordance with known techniques (see, e.g., U.S. Pat. No. 5,149,797). Such antisense molecules, which may be deoxyribonucleotide or ribonucleotide sequences, simply contain any structural modification which sterically hinders or prevents binding of RNase H to a duplex molecule containing the oligonucleotide as one member thereof, which structural modification does not substantially hinder or disrupt duplex formation. Because the portions of the oligonucleotide involved in duplex formation are substantially different from those portions involved in RNase H binding thereto, numerous antisense molecules that do not activate RNase H are available. For example, such antisense molecules may be oligonucleotides wherein at least one, or all, of the inter-nucleotide bridging phosphate residues are modified phosphates, such as methyl phosphonates, methyl phosphorothioates, phosphoromorpholidates, phosphoropiperazidates and phosphoramidates. For example, every other one of the internucleotide bridging phosphate residues may be modified as described. In another non-limiting example, such antisense molecules are molecules wherein at least one, or all, of the nucleotides contain a 2' lower alkyl moiety (e.g., C₁-C₄, linear or branched, saturated or unsaturated alkyl, such as methyl, ethyl, ethenyl, propyl, 1-propenyl, 2-propenyl, and isopropyl). For example, every other one of the nucleotides may be modified as described.

While antisense oligonucleotides are a preferred form of the antisense molecules, the present invention comprehends other oligomeric antisense molecules, including but not limited to oligonucleotide mimetics such as are described below.

Specific examples of preferred antisense compounds useful in this invention include oligonucleotides containing modified backbones or non-natural inter-nucleoside linkages. As defined in this specification, oligonucleotides having modified backbones include those that retain a phosphorus atom in the backbone and those that do not have a phosphorus atom in the backbone. For the purposes of this specification, and as sometimes referenced in the art, modified oligonucleotides that do not have a phosphorus atom in their internucleoside backbone can also be considered to be oligonucleosides.

In other preferred oligonucleotide mimetics, both the sugar and the inter-nucleoside linkage, i.e., the backbone, of the nucleotide units are replaced with novel groups. The base units are maintained for hybridization with an appropriate nucleic acid target compound. One such oligomeric compound, an oligonucleotide mimetic that has been shown to have excellent hybridization properties, is referred to as a peptide nucleic acid (PNA). In PNA compounds, the sugar-backbone of an oligonucleotide is replaced with an amide containing backbone, in particular an aminoethylglycine backbone. The nucleo-bases are retained and are bound directly or indirectly to aza nitrogen atoms of the amide portion of the backbone.

Modified oligonucleotides may also contain one or more substituted sugar moieties. Oligonucleotides may also include nucleobase (often referred to in the art simply as "base") modifications or substitutions. Certain nucleobases are particularly useful for increasing the binding affinity of

the oligomeric compounds of the invention. These include 5-substituted pyrimidines, 6-azapyrimidines and N-2, N-6 and O-6 substituted purines, including 2-aminopropyladenine, 5-propynyluracil and 5-propynylcytosine. 5-methylcytosine substitutions have been shown to increase nucleic acid duplex stability by 0.6-1.2° C. and are presently preferred base substitutions, even more particularly when combined with 2'-O-methoxyethyl sugar modifications.

Another modification of the oligonucleotides of the invention involves chemically linking to the oligonucleotide one or more moieties or conjugates that enhance the activity, cellular distribution or cellular uptake of the oligonucleotide. Such moieties include but are not limited to lipid moieties such as a cholesterol moiety, cholic acid, a thioether, e.g., hexyl-S-tritylthiol, a thiocholesterol, an aliphatic chain, e.g., dodecandiol or undecyl residues, a phospholipid, e.g., di-hexadecyl-rac-glycerol or triethylammonium 1,2-di-O-hexadecyl-rac-glycero-3-H-phosphonate, a polyamine or a polyethylene glycol chain, or adamantane acetic acid, a palmityl moiety, or an octadecylamine or hexylamino-carbonyl-oxycholesterol moiety.

It is not necessary for all positions in a given compound to be uniformly modified, and in fact more than one of the aforementioned modifications may be incorporated in a single compound or even at a single nucleoside within an oligonucleotide. The present invention also includes antisense compounds that are chimeric compounds. "Chimeric" antisense compounds or "chimeras," in the context of this invention, are antisense molecules, particularly oligonucleotides, which contain two or more chemically distinct regions, each made up of at least one monomer unit, i.e., a nucleotide in the case of an oligonucleotide compound. These oligonucleotides typically contain at least one region wherein the oligonucleotide is modified so as to confer upon the increased resistance to nuclease degradation, increased cellular uptake, and an additional region for increased binding affinity for the target nucleic acid.

Methods of Manufacturing Antisense Molecules

The antisense molecules used in accordance with this invention may be conveniently and routinely made through the well-known technique of solid phase synthesis. Equipment for such synthesis is sold by several vendors including, for example, Applied Biosystems (Foster City, Calif.). One method for synthesizing oligonucleotides on a modified solid support is described in U.S. Pat. No. 4,458,066.

Any other means for such synthesis known in the art may additionally or alternatively be employed. It is well known to use similar techniques to prepare oligonucleotides such as the phosphorothioates—and alkylated derivatives. In one such automated embodiment, diethyl-phosphoramidites are used as starting materials and may be synthesized as described by Beaucage, et al., (1981) *Tetrahedron Letters*, 22:1859-1862.

The antisense molecules of the invention are synthesized *in vitro* and do not include antisense compositions of biological origin, or genetic vector constructs designed to direct the *in vivo* synthesis of antisense molecules. The molecules of the invention may also be mixed, encapsulated, conjugated or otherwise associated with other molecules, molecule structures or mixtures of compounds, as for example, liposomes, receptor targeted molecules, oral, rectal, topical or other formulations, for assisting in uptake, distribution and/or absorption.

Therapeutic Agents

The present invention also can be used as a prophylactic or therapeutic, which may be utilised for the purpose of treatment of a genetic disease.

Accordingly, in one embodiment the present invention provides antisense molecules that bind to a selected target in the dystrophin pre-mRNA to induce efficient and consistent exon skipping described herein in a therapeutically effective amount admixed with a pharmaceutically acceptable carrier, diluent, or excipient.

The phrase "pharmaceutically acceptable" refers to molecular entities and compositions that are physiologically tolerable and do not typically produce an allergic or similarly untoward reaction, such as gastric upset and the like, when administered to a patient. The term "carrier" refers to a diluent, adjuvant, excipient, or vehicle with which the compound is administered. Such pharmaceutical carriers can be sterile liquids, such as water and oils, including those of petroleum, animal, vegetable or synthetic origin, such as peanut oil, soybean oil, mineral oil, sesame oil and the like. Water or saline solutions and aqueous dextrose and glycerol solutions are preferably employed as carriers, particularly for injectable solutions. Suitable pharmaceutical carriers are described in Martin, *Remington's Pharmaceutical Sciences*, 18th Ed., Mack Publishing Co., Easton, Pa., (1990).

In a more specific form of the invention there are provided pharmaceutical compositions comprising therapeutically effective amounts of an antisense molecule together with pharmaceutically acceptable diluents, preservatives, solubilizers, emulsifiers, adjuvants and/or carriers. Such compositions include diluents of various buffer content (e.g., Tris-HCl, acetate, phosphate), pH and ionic strength and additives such as detergents and solubilizing agents (e.g., Tween 80, Polysorbate 80), anti-oxidants (e.g., ascorbic acid, sodium metabisulfite), preservatives (e.g., Thimersol, benzyl alcohol) and bulking substances (e.g., lactose, mannitol). The material may be incorporated into particulate preparations of polymeric compounds such as polylactic acid, polyglycolic acid, etc. or into liposomes. Hylauronic acid may also be used. Such compositions may influence the physical state, stability, rate of *in vivo* release, and rate of *in vivo* clearance of the present proteins and derivatives. See, e.g., Martin, *Remington's Pharmaceutical Sciences*, 18th Ed. (1990, Mack Publishing Co., Easton, Pa. 18042) pages 1435-1712 that are herein incorporated by reference. The compositions may be prepared in liquid form, or may be in dried powder, such as lyophilised form.

It will be appreciated that pharmaceutical compositions provided according to the present invention may be administered by any means known in the art. Preferably, the pharmaceutical compositions for administration are administered by injection, orally, or by the pulmonary, or nasal route. The antisense molecules are more preferably delivered by intravenous, intra-arterial, intraperitoneal, intramuscular, or subcutaneous routes of administration.

Antisense Molecule Based Therapy

Also addressed by the present invention is the use of antisense molecules of the present invention, for manufacture of a medicament for modulation of a genetic disease.

The delivery of a therapeutically useful amount of antisense molecules may be achieved by methods previously published. For example, intracellular delivery of the antisense molecule may be via a composition comprising an admixture of the antisense molecule and an effective amount of a block copolymer. An example of this method is described in US patent application US 20040248833.

Other methods of delivery of antisense molecules to the nucleus are described in Mann C J et al., (2001) [*Antisense-induced exon skipping and the synthesis of dystrophin in the*

mdx mouse". Proc., Natl. Acad. Science, 98(1) 42-47J and in GebSKI et al., (2003). Human Molecular Genetics, 12(15): 1801-1811.

A method for introducing a nucleic acid molecule into a cell by way of an expression vector either as naked DNA or complexed to lipid carriers, is described in U.S. Pat. No. 6,806,084.

It may be desirable to deliver the antisense molecule in a colloidal dispersion system. Colloidal dispersion systems include macromolecule complexes, nanocapsules, microspheres, beads, and lipid-based systems including oil-in-water emulsions, micelles, mixed micelles, and liposomes or liposome formulations.

Liposomes are artificial membrane vesicles which are useful as delivery vehicles *in vitro* and *in vivo*. These formulations may have net cationic, anionic or neutral charge characteristics and are useful characteristics with *in vitro*, *in vivo* and *ex vivo* delivery methods. It has been shown that large unilamellar vesicles (LUV), which range in size from 0.2-4.0.µm can encapsulate a substantial percentage of an aqueous buffer containing large macromolecules. RNA, and DNA can be encapsulated within the aqueous interior and be delivered to cells in a biologically active form (FraleY, et al., Trends Biochem. Sci., 6:77, 1981).

In order for a liposome to be an efficient gene transfer vehicle, the following characteristics should be present: (1) encapsulation of the antisense molecule of interest at high efficiency while not compromising their biological activity; (2) preferential and substantial binding to a target cell in comparison to non-target cells; (3) delivery of the aqueous contents of the vesicle to the target cell cytoplasm at high efficiency; and (4) accurate and effective expression of genetic information (Mannino, et al., Biotechniques, 6:682, 1988).

The composition of the liposome is usually a combination of phospholipids, particularly high-phase-transition-temperature phospholipids, usually in combination with steroids, especially cholesterol. Other phospholipids or other lipids may also be used. The physical characteristics of liposomes depend on pH, ionic strength, and the presence of divalent cations.

Alternatively, the antisense construct may be combined with other pharmaceutically acceptable carriers or diluents to produce a pharmaceutical composition. Suitable carriers and diluents include isotonic saline solutions, for example phosphate-buffered saline. The composition may be formulated for parenteral, intramuscular, intravenous, subcutaneous, intraocular, oral or transdermal administration.

The routes of administration described are intended only as a guide since a skilled practitioner will be able to determine readily the optimum route of administration and any dosage for any particular animal and condition. Multiple approaches for introducing functional new genetic material into cells, both *in vitro* and *in vivo* have been attempted (Friedmann (1989) Science, 244:1275-1280).

These approaches include integration of the gene to be expressed into modified retroviruses (Friedmann (1989) supra; Rosenberg (1991) Cancer Research 51(18), suppl.: 5074S-5079S); integration into non-retrovirus vectors (Rosenfeld, et al. (1992) Cell, 68:143-155; Rosenfeld, et al. (1991) Science, 252:431-434); or delivery of a transgene linked to a heterologous promoter-enhancer element via liposomes (Friedmann (1989), supra; Brigham, et al. (1989) Am. J. Med. Sci., 298:278-281; Nabel, et al. (1990) Science, 249: 1285-1288; Hazinski, et al. (1991) Am. J. Resp. Cell Molec. Biol., 4:206-209; and Wang and Huang (1987) Proc. Natl. Acad. Sci. (USA), 84:7851-7855); coupled to ligand-specific,

cation-based transport systems (Wu and Wu (1988) *J. Biol. Chem.*, 263:14621-14624) or the use of naked DNA, expression vectors (Nabel et al. (1990), *supra*); Wolff et al. (1990) *Science*, 247:1465-1468). Direct injection of transgenes into tissue produces only localized expression (Rosenfeld (1992) *supra*); Rosenfeld et al. (1991) *supra*; Brigham et al. (1989) *supra*; Nabel (1990) *supra*; and Hazinski et al. (1991) *supra*). The Brigham et al. group (*Am. J. Med. Sci.* (1989) 298:278-281 and *Clinical Research* (1991) 39 (abstract)) have reported in vivo transfection only of lungs of mice following either intravenous or intratracheal administration of a DNA liposome complex. An example of a review article of human gene therapy procedures is: Anderson, *Science* (1992) 256:808-813.

The antisense molecules of the invention encompass any pharmaceutically acceptable salts, esters, or salts of such esters, or any other compound which, upon administration to an animal including a human, is capable of providing (directly or indirectly) the biologically active metabolite or residue thereof. Accordingly, for example, the disclosure is also drawn to prodrugs and pharmaceutically acceptable salts of the compounds of the invention, pharmaceutically acceptable salts of such pro-drugs, and other bioequivalents.

The term "pharmaceutically acceptable salts" refers to physiologically and pharmaceutically acceptable salts of the compounds of the invention: i.e., salts that retain the desired biological activity of the parent compound and do not impart undesired toxicological effects thereto.

For oligonucleotides, preferred examples of pharmaceutically acceptable salts include but are not limited to (a) salts formed with cations such as sodium, potassium, ammonium, magnesium, calcium, polyamines such as spermine and spermidine, etc.; (b) acid addition salts formed with inorganic acids, for example hydrochloric acid, hydrobromic acid, sulfuric acid, phosphoric acid, nitric acid and the like; (c) salts formed with organic acids such as, for example, acetic acid, oxalic acid, tartaric acid, succinic acid, malefic acid, fumaric acid, gluconic acid, citric acid, malic acid, ascorbic acid, benzoic acid, tannic acid, palmitic acid, alginate, polyglutamic acid, naphthalenesulfonic acid, methanesulfonic acid, p-toluenesulfonic acid, naphthalenedisulfonic acid, polygalacturonic acid, and the like; and (d) salts formed from elemental anions such as chlorine, bromine, and iodine. The pharmaceutical compositions of the present invention may be administered in a number of ways depending upon whether local or systemic treatment is desired and upon the area to be treated. Administration may be topical (including ophthalmic and to mucous membranes including rectal delivery), pulmonary, e.g., by inhalation or insufflation of powders or aerosols, (including by nebulizer, intratracheal, intranasal, epidermal and transdermal), oral or parenteral. Parenteral administration includes intravenous, intra-arterial, subcutaneous, intraperitoneal or intramuscular injection or infusion; or intracranial, e.g., intrathecal or intraventricular, administration. Oligonucleotides with at least one 2'-O-methoxyethyl modification are believed to be particularly useful for oral administration.

The pharmaceutical formulations of the present invention, which may conveniently be presented in unit dosage form, may be prepared according to conventional techniques well known in the pharmaceutical industry. Such techniques include the step of bringing into association the active ingredients with the pharmaceutical carrier(s) or excipient(s). In general the formulations are prepared by uniformly and intimately bringing into association the active ingredients with liquid carriers or finely divided solid carriers or both, and then, if necessary, shaping the product.

Kits of the Invention

The invention also provides kits for treatment of a patient with a genetic disease which kit comprises at least an antisense molecule, packaged in a suitable container, together with instructions for its use.

In a preferred embodiment, the kits will contain at least one antisense molecule as shown in Table 1A, or a cocktail of antisense molecules as shown in Table 1B or a "weasel" compound as shown in Table 1C. The kits may also contain peripheral reagents such as buffers, stabilizers, etc.

Those of ordinary skill in the field should appreciate that applications of the above method has wide application for identifying antisense molecules suitable for use in the treatment of many other diseases.

EXAMPLES

The following Examples serve to more fully describe the manner of using the above-described invention, as well as to set forth the best modes contemplated for carrying out various aspects of the invention. It is understood that these Examples in no way serve to limit the true scope of this invention, but rather are presented for illustrative purposes. The references cited herein are expressly incorporated by reference.

Methods of molecular cloning, immunology and protein chemistry, which are not explicitly described in the following examples, are reported in the literature and are known by those skilled in the art. General texts that described conventional molecular biology, microbiology, and recombinant DNA techniques within the skill of the art, included, for example: Sambrook et al. *Molecular Cloning: A Laboratory Manual*, Second Edition, Cold Spring Harbor Laboratory Press, Cold Spring Harbor, N.Y. (1989); Glover ed., *DNA Cloning: A Practical Approach*, Volumes I and II, MRL Press, Ltd., Oxford, U.K. (1985); and Ausubel, F., Brent, R., Kingston, R. E., Moore, D. D., Seidman, J. G., Smith, J. A., Struhl, K. *Current Protocols in Molecular Biology*. Greene Publishing Associates/Wiley Intersciences, New York (2002).

Determining Induced Exon Skipping in Human Muscle Cells

Attempts by the inventors to develop a rational approach in antisense molecules design were not completely successful as there did not appear to be a consistent trend that could be applied to all exons. As such, the identification of the most effective and therefore most therapeutic antisense molecules compounds has been the result of empirical studies.

These empirical studies involved the use of computer programs to identify motifs potentially involved in the splicing process. Other computer programs were also used to identify regions of the pre-mRNA which may not have had extensive secondary structure and therefore potential sites for annealing of antisense molecules. Neither of these approaches proved completely reliable in designing antisense oligonucleotides for reliable and efficient induction of exon skipping.

Annealing sites on the human dystrophin pre-mRNA were selected for examination, initially based upon known or predicted motifs or regions involved in splicing. 2OMe antisense oligonucleotides were designed to be complementary to the target sequences under investigation and were synthesised on an Expedite 8909 Nucleic Acid Synthesiser. Upon completion of synthesis, the oligonucleotides were cleaved from the support column and de-protected in ammonium hydroxide before being desalted. The quality of the oligonucleotide synthesis was monitored by the intensity of the trityl signals upon each deprotection step during the synthesis as detected

in the synthesis log. The concentration of the antisense oligonucleotide was estimated by measuring the absorbance of a diluted aliquot at 260 nm.

Specified amounts of the antisense molecules were then tested for their ability to induce exon skipping in an in vitro assay, as described below.

Briefly, normal primary myoblast cultures were prepared from human muscle biopsies obtained after informed consent. The cells were propagated and allowed to differentiate into myotubes using standard culturing techniques. The cells were then transfected with the antisense oligonucleotides by delivery of the oligonucleotides to the cells as cationic lipoplexes, mixtures of antisense molecules or cationic liposome preparations.

The cells were then allowed to grow for another 24 hours, after which total RNA was extracted and molecular analysis commenced. Reverse transcriptase amplification (RT-PCR) was undertaken to study the targeted regions of the dystrophin pre-mRNA or induced exonic re-arrangements.

For example, in the testing of an antisense molecule for inducing exon 19 skipping the RT-PCR test scanned several exons to detect involvement of any adjacent exons. For example, when inducing skipping of exon 19, RT-PCR was carried out with primers that amplified across exons 17 and 21. Amplifications of even larger products in this area (i.e. exons 13-26) were also carried out to ensure that there was minimal amplification bias for the shorter induced skipped transcript. Shorter or exon skipped products tend to be amplified more efficiently and may bias the estimated of the normal and induced transcript.

The sizes of the amplification reaction products were estimated on an agarose gel and compared against appropriate size standards. The final confirmation of identity of these products was carried out by direct DNA sequencing to establish that the correct or expected exon junctions have been maintained.

FIG. 3 shows differing efficiencies of two antisense molecules directed at exon 8 acceptor splice site. H8A(-06+18) [SEQ ID NO:1], which anneals to the last 6 bases of intron 7 and the first 18 bases of exon 8, induces substantial exon 8 and 9 skipping when delivered into cells at a concentration of 20 nM. The shorter antisense molecule, H8A(-06+14) [SEQ ID NO: 4] was only able to induce exon 8 and 9 skipping at 300 nM, a concentration some 15 fold higher than H8A(-06+18), which is the preferred antisense molecule.

This data shows that some particular antisense molecules induce efficient exon skipping while another antisense molecule, which targets a near-by or overlapping region, can be much less efficient. Titration studies show one compound is able to induce targeted exon skipping at 20 nM while the less efficient antisense molecules only induced exon skipping at concentrations of 300 nM and above. Therefore, we have shown that targeting of the antisense molecules to motifs involved in the splicing process plays a crucial role in the overall efficacy of that compound.

Efficacy refers to the ability to induce consistent skipping of a target exon. However, sometimes skipping of the target exons is consistently associated with a flanking exon. That is, we have found that the splicing of some exons is tightly linked. For example, in targeting exon 23 in the mouse model of muscular dystrophy with antisense molecules directed at the donor site of that exon, dystrophin transcripts missing exons 22 and 23 are frequently detected. As another example, when using an antisense molecule directed to exon 8 of the human dystrophin gene, all induced transcripts are missing both exons 8 and 9. Dystrophin transcripts missing only exon 8 are not observed.

Table 2 below discloses antisense molecule sequences that induce exon 8 (and 9) skipping.

TABLE 2

| Antisense SEQ ID name | Oligonucleotide Sequence | Ability to induce skipping |
|-----------------------|---|--------------------------------|
| 1 H8A(-06 + 18) | 5'-GAU AGG UGG UAU CAA CAU CUG UAA | Very strong skipping to 20 nM |
| 2 H8A(-03 + 18) | 5'-GAU AGG UGG UAU CAA CAU CUG | Very strong skipping to 40 nM |
| 3 H8A(-07 + 18) | 5'-GAU AGG UGG UAU CAA CAU CUG UAA G | Strong skipping to 40 nM |
| 4 H8A(-06 + 14) | 5'-GGU GGU AUC AAC AUC UGU AA | Skipping to 300 nM |
| 5 H8A(-10 + 10) | 5'-GUA UCA ACA UCU GUA AGC AC | Patchy/weak skipping to 100 nm |

Once efficient exon skipping had been induced with one antisense molecule, subsequent overlapping antisense molecules may be synthesized and then evaluated in the assay as described above. Our definition of an efficient antisense molecule is one that induces strong and sustained exon skipping at transfection concentrations in the order of 300 nM or less.

Antisense Oligonucleotides Directed at Exon 8

Antisense oligonucleotides directed at exon 8 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

Antisense Oligonucleotides Directed at Exon 7

Antisense oligonucleotides directed at exon 7 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 4 shows the preferred antisense molecule, H7A(+45+67) [SEQ ID NO: 6], and another antisense molecule, H7A(+2+26) [SEQ ID NO: 7], inducing exon 7 skipping. Nested amplification products span exons 3 to 9. Additional products above the induced transcript missing exon 7 arise from amplification from carry-over outer primers from the RT-PCR as well as heteroduplex formation.

Table 3 below discloses antisense molecule sequences for induced exon 7 skipping.

One antisense oligonucleotide that induced very efficient exon 6 skipping in the canine model, C6A(+69+91) [SEQ ID

TABLE 3

| Antisense SEQOligonucleotide ID name | Sequence | Ability to induce skipping |
|--------------------------------------|---------------------------------------|----------------------------|
| 6 H7A(+45 + 67) | 5'- UGC AUG UUC CAG UCG UUG UGU GG | Strong skipping to 20 nM |
| 7 H7A(+02 + 26) | 5'- CAC UAU UCC AGU CAA AUA GGU CUG G | Weak skipping at 100 nM |
| 8 H7D(+15 - 10) | 5'-AUU UAC CAA CCU UCA GGA UCG AGU A | Weak skipping to 300 nM |
| 9 H7A(-18 + 03) | 5'- GGC CUA AAA CAC AUA CAC AUA | Weak skipping to 300 nM |

Antisense Oligonucleotides Directed at Exon 6

Antisense oligonucleotides directed at exon 6 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 5 shows an example of two non-preferred antisense molecules inducing very low levels of exon 6 skipping in

NO: 14], would anneal perfectly to the corresponding region in human dystrophin exon 6. This compound was evaluated, found to be highly efficient at inducing skipping of that target exon, as shown in FIG. 6 and is regarded as the preferred compound for induced exon 6 skipping. Table 4 below discloses antisense molecule sequences for induced exon 6 skip-

TABLE 4

| Antisense SEQOligo ID name | Sequence | Ability to induce skipping |
|----------------------------|---------------------------------------|------------------------------|
| 10 C6A(-10 + 10) | 5' CAU UUU UGA CCU ACA UGU GG | No skipping |
| 11 C6A(-14 + 06) | 5' UUU GAC CUA CAU GUG GAA AG | No skipping |
| 12 C6A(-14 + 12) | 5' UAC AUU UUU GAC CUA CAU GUG GAA AG | No skipping |
| 13 C6A(-13 + 09) | 5' AUU UUU GAC CUA CAU GGG AAA G | No skipping |
| 14 CH6A(+69 + 91) | 5' UAC GAG UUG AUU GUC GGA CCC AG | Strong skipping to 20 nM |
| 15 C6D(+12 - 13) | 5' GUG GUC UCC UUA CCU AUG ACU GUG G | Weak skipping at 300 nM |
| 16 C6D(+06 - 11) | 5' GGU CUC CUU ACC UAU GA | No skipping |
| 17 H6D(+04 - 21) | 5' UGU CUC AGU AAU CUU CUU ACC UAU | Weak skipping to 50 nM |
| 18 H6D(+18 - 04) | 5' UCU UAC CUA UGA CUA UGG AUG AGA | Very weak skipping to 300 nM |

cultured human cells. Targeting this exon for specific removal was first undertaken during a study of the canine model using the oligonucleotides as listed in Table 4, below. Some of the human specific oligonucleotides were also evaluated, as shown in FIG. 5. In this example, both antisense molecules target the donor splice site and only induced low levels of exon 6 skipping. Both H6D(+4-21) [SEQ ID NO: 17] and H6D(+18-4) [SEQ ID NO: 18] would be regarded as non-preferred antisense molecules.

Antisense Oligonucleotides Directed at Exon 4

Antisense oligonucleotides directed at exon 4 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 7 shows an example of a preferred antisense molecule inducing skipping of exon 4 skipping in cultured human cells. In this example, one preferred antisense compound, H4A(+13+32) [SEQ ID NO: 19], which targeted a presumed exonic

splicing enhancer induced efficient exon skipping at a concentration of 20 nM while other non-preferred antisense oligonucleotides failed to induce even low levels of exon 4 skipping. Another preferred antisense molecule inducing skipping of exon 4 was H4A(+111+40) [SEQ ID NO:22],⁵ which induced efficient exon skipping at a concentration of 20 nM.

Table 5 below discloses antisense molecule sequences for inducing exon 4 skipping.

TABLE 5

| Antisense SEQOligonucleotide ID name | Sequence | Ability to induce skipping |
|--|---|----------------------------------|
| 19 H4A(+13 + 32) | 5' GCA UGA ACU CUU GUG GAU CC | Skipping to 20 nM |
| 22 H4A(+11 + 40) | 5' UGU UCA GGG CAU GAA CUC UUG UGG AUC CUU | Skipping to 20 nM |
| 20 H4D(+04 - 16) | 5' CCA GGG UAC UAC UUA CAU UA | No skipping |
| 21 H4D(-24 - 44) | 5' AUC GUG UGU CAC AGC AUC CAG | No skipping |

Antisense Oligonucleotides Directed at Exon 3

Antisense oligonucleotides directed at exon 3 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H3A(+30+60) [SEQ ID NO:23] induced substantial exon 3 skipping when delivered into cells at a concentration of 20 nM to 600 nM. The antisense molecule, H3A(+35+65) [SEQ ID NO: 24] induced exon skipping at 300 nM.

Table 6 below discloses antisense molecule sequences that induce exon 3 skipping.

TABLE 6

| Antisense SEQOligonucleotide ID name | Sequence | Ability to induce skipping |
|--|--|---|
| 23 H3A(+30 + 60) | UAG GAG GCG CCU CCC AUC CUG UAG GUC ACU G | Moderate skipping to 20 to 600 nM |
| 24 H3A(+35 + 65) | AGG UCU AGG AGG CGC CUC CCA UCC UGU AGG U | Working to 300 nM |
| 25 H3A(+30 + 54) | GCG CCU CCC AUC CUG UAG GUC ACU G | Moderate 100-600 nM |
| 26 H3D(+46 - 21) | CUU CGA GGA GGU CUA GGA GGC GCC UC | No skipping |
| 27 H3A(+30 + 50) | CUC CCA UCC UGU AGG UCA CUG | Moderate 20-600 nM |
| 28 H3D(+19 - 03) | UAC CAG UUU UUG CCC UGU CAG G | No skipping |
| 29 H3A(-06 + 20) | UCA AUA UGC UGC UUUCCA AAC UGA AA | No skipping |
| 30 H3A(+37 + 61) | CUA GGA GGC GCC UCC CAU CCU GUA G | No skipping |

Antisense Oligonucleotides Directed at Exon 5

Antisense oligonucleotides directed at exon 5 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H5A(+20+50) [SEQ ID NO:31] induces substantial exon 5 skipping when delivered into cells at a concentration of 100

nM. Table 7 below shows other antisense molecules tested. The majority of these antisense molecules were not as effective at exon skipping as H5A(+20+50). However, H5A(+15+45) [SEQ ID NO: 40] was able to induce exon 5 skipping at 300 nM.

Table 7 below discloses antisense molecule sequences that induce exon 5 skipping.

TABLE 7

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---------------------------------------|--|----------------------------|
| 31 H5A(+20 + 50) | UUA UGA UUU CCA UCU ACG AUG UCA GUA CUU C | Working to 100 nM |
| 32 H5D(+25 - 05) | CUU ACC UGC CAG UGG AGG AUU AUA UUC CAA A | No skipping |
| 33 H5D(+10 - 15) | CAU CAG GAU UCU UAC CUG CCA GUG G | Inconsistent at 300 nM |
| 34 H5A(+10 + 34) | CGA UGU CAG UAC UUC CAA UAU UCA C | Very weak |
| 35 H5D(-04 - 21) | ACC AUU CAU CAG GAU UCU | No skipping |
| 36 H5D(+16 - 02) | ACC UGC CAG UGG AGG AUU | No skipping |
| 37 H5A(-07 + 20) | CCA AUA UUC ACU AAA UCA ACC UGU UAA | No skipping |
| 38 H5D(+18 - 12) | CAG GAU UCU UAC CUG CCA GUG GAG GAU UAU | No skipping |

TABLE 7-continued

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---------------------------------------|--|----------------------------|
| 39 H5A(+05 + 35) | ACG AUG UCA GUA CUU CCA AUA UUC ACU AAA U | No skipping |
| 40 H5A(+15 + 45) | AUU UCC AUC UAC GAU GUC AGU ACU UCC AAU A | Working to 300 nM |

Antisense Oligonucleotides Directed at Exon 10

Antisense oligonucleotides directed at exon 10 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H10A(-05+16) [SEQ ID NO:41] induced substantial exon 10 skipping when delivered into cells. Table 8 below shows other antisense molecules tested. The antisense molecules ability to induce exon skipping was variable. Table 8 below discloses antisense molecule sequences that induce exon 10 skipping.

TABLE 8

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---------------------------------------|---|----------------------------|
| 41 H10A(-05 + 16) | CAG GAG CUU CCA AAU GCU GCA | Not tested |
| 42 H10A(-05 + 24) | CUU GUC UUC AGG AGC UUC CAA AUG CUG CA | Not tested |
| 43 H10A(+98 + 119) | UCC UCA GCA GAA AGA AGC CAC G | Not tested |
| 44 H10A(+130 + 149) | UUA GAA AUC UCU CCU UGU GC | No skipping |
| 45 H10A(-33 - 14) | UAA AUU GGG UGU UAC ACA AU | No skipping |

Antisense Oligonucleotides Directed at Exon 11

Antisense oligonucleotides directed at exon 11 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 8B shows an example of H11A(+75+97) [SEQ ID NO:49] antisense molecule inducing exon 11 skipping in cultured human cells. H11A(+75+97) induced substantial exon 11 skipping when delivered into cells at a concentration of 5 nM. Table 9 below shows other antisense molecules tested. The antisense molecules ability to induce exon skipping was observed at 100 nM.

TABLE 9

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---------------------------------------|------------------------------------|----------------------------|
| 46 H11D(+26 + 49) | CCC UGA GGC AUU CCC AUC UUG AAU | Skipping at 100 nM |
| 47 H11D(+11 - 09) | AGG ACU UAC UUG CUU UGU UU | Skipping at 100 nM |

TABLE 9-continued

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---|------------------------------------|----------------------------------|
| 48 H11A(+118 + 140) | CUU GAA UUU AGG AGA UUC AUC UG | Skipping at 100 nM |
| 49 H11A(+75 + 97) | CAU CUU CUG AUA AUU UUC CUG UU | Skipping at 100 nM |
| 46 H11D(+26 + 49) | CCC UGA GGC AUU CCC AUC UUG AAU | Skipping at 5 nM |

Antisense Oligonucleotides Directed at Exon 12 15

Antisense oligonucleotides directed at exon 12 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H12A(+52+75) [SEQ ID NO:50] induced substantial exon 12 skipping when delivered into cells at a concentration of 5 nM, as shown in FIG. 8A. Table 10 below shows other antisense molecules tested at a concentration range of 5, 25, 50, 100, 200 and 300 nM. The antisense molecules ability to induce exon skipping was variable.

TABLE 10

| Antisense SEQ ID name | Sequence | Ability to induce skipping |
|--------------------------|---------------------------------|----------------------------------|
| 50 H12A(+52+75) | UCU UCU GUU UUU GUU AGC CAG UCA | Skipping at 5 nM |
| 51 H12A(-10+10) | UCU AUG UAA ACU GAA AAU UU | Skipping at 100 nM |
| 52 H12A(+11+30) | UUC UGG AGA UCC AUU AAA AC | No skipping |

Antisense Oligonucleotides Directed at Exon 13 40

Antisense oligonucleotides directed at exon 13 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H13A(+77+100) [SEQ ID NO:53] induced substantial exon 13 skipping when delivered into cells at a concentration of 5 nM. Table 11 below includes two other antisense molecules tested at a concentration range of 5, 25, 50, 100, 200 and 300 nM. These other antisense molecules were unable to induce exon skipping.

TABLE 11

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---|--------------------------------------|----------------------------------|
| 53 H13A(+77+100) | CAG CAG UUG CGU GAU CUC CAC UAG | Skipping at 5 nM |
| 54 H13A(+55+75) | UUC AUC AAC UAC CAC CAC CAU | No skipping |
| 55 H13D(+06-19) | CUA AGC AAA AUA AUC UGA CCU UAA G | No skipping |

Antisense Oligonucleotides Directed at Exon 14

Antisense oligonucleotides directed at exon 14 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H14A(+37+64) [SEQ ID NO:56] induced weak exon 14 skipping when delivered into cells at a concentration of 100 nM. Table 12 below includes other antisense molecules tested at a concentration range of 5, 25, 50, 100, 200 and 300 nM. The other antisense molecules were unable to induce exon skipping at any of the concentrations tested.

TABLE 12

| SEQ ID | Antisense Oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 56 | H14A(+37+64) | CUU GUA AAA GAA CCC AGC GGU CUU CUG U | Skipping at 100 nM |
| 57 | H14A(+14+35) | CAU CUA CAG AUG UUU GCC CAU C | No skipping |
| 58 | H14A(+51+73) | GAA GGA UGU CUU GUA AAA GAA CC | No skipping |
| 59 | H14D(-02+18) | ACC UGU UCU UCA GUA AGA CG | No skipping |
| 60 | H14D(+14-10) | CAU GAC ACA CCU GUU CUU CAG UAA | No skipping |
| 61 | H14A(+61+80) | CAU UUG AGA AGG AUG UCU UG | No skipping |
| 62 | H14A(-12+12) | AUC UCC CAA UAC CUG GAG AAG AGA | No skipping |

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Antisense Oligonucleotides Directed at Exon 15

Antisense oligonucleotides directed at exon 15 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H15A(-12+19) [SEQ ID NO:63] and H15A(+48+71) [SEQ ID NO:64] induced substantial exon 15 skipping when delivered into cells at a concentration of 10 Nm, as shown in FIG. 9A. Table 13 below includes other antisense molecules tested at a concentration range of 5, 25, 50, 100, 200 and 300 Nm. These other antisense molecules were unable to induce exon skipping at any of the concentrations tested.

TABLE 13

| SEQ ID | Antisense Oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 63 | H15A(-12+19) | GCC AUG CAC UAA AAA GGC ACU GCA AGA CAU U | Skipping at 5 Nm |
| 64 | H15A(+48+71) | UCU UUA AAG CCA GUU GUG UGA AUC | Skipping at 5 Nm |
| 65 | H15A(+08+28) | UUU CUG AAA GCC AUG CAC UAA | No skipping |
| 63 | H15A(-12+19) | GCC AUG CAC UAA AAA GGC ACU GCA AGA CAU U | No skipping |
| 66 | H15D(+17-08) | GUA CAU ACG GCC AGU UUU UGA AGA C | No skipping |

Antisense Oligonucleotides Directed at Exon 16

Antisense oligonucleotides directed at exon 16 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H16A(-12+19) [SEQ ID NO:67] and H16A(-06+25) [SEQ ID NO:68] induced substantial exon 16 skipping when delivered into cells at a concentration of 10 nM, as shown in FIG. 9B. Table 14 below includes other antisense molecules tested. H16A(-06+19) [SEQ ID NO:69] and H16A(+87+109) [SEQ ID NO:70] were tested at a concentration range of 5, 25, 50, 100, 200 and 300 nM. These two antisense molecules were able to induce exon skipping at 25 nM and 100 nM, respectively. Additional antisense molecules were tested at 100, 200 and 300 nM and did not result in any exon skipping.

TABLE 14

| Antisense SEQ Oligonucleotide ID name | Sequence | Ability to induce skipping |
|---|--|----------------------------------|
| 67 H16A(-12+19) | CUA GAU CCG CUU UUA AAA CCU GUU AAA ACA A | Skipping at 5 nM |
| 68 H16A(-06+25) | UCU UUU CUA GAU CCG CUU UUA AAA CCU GUU A | Skipping at 5 nM |
| 69 H16A(-06+19) | CUA GAU CCG CUU UUA AAA CCU GUU | Skipping at 25 nM |
| 70 H16A(+87+109) | CCG UCU UCU GGG UCA CUG ACU UA | Skipping at 100 nM |
| 71 H16A(-07+19) | CUA GAU CCG CUU UUA AAA CCU GUU AA | No skipping |
| 72 H16A(-07+13) | CCG CUU UUA AAA CCU GUU AA | No skipping |
| 73 H16A(+12+37) | UGG AUU GCU UUU UCU UUU CUA GAU CC | No skipping |
| 74 H16A(+92+116) | CAU GCU UCC GUC UUC UGG GUC ACU G | No skipping |
| 75 H16A(+45+67) | G AUC UUG UUU GAG UGA AUA CAG U | No skipping |
| 76 H16A(+105+126) | GUU AUC CAG CCA UGC UUC CGU C | No skipping |
| 77 H16D(+05-20) | UGA UAA UUG GUA UCA CUA ACC UGU G | No skipping |
| 78 H16D(+12-11) | GUA UCA CUA ACC UGU GCU GUA C | No skipping |

Antisense Oligonucleotides Directed at Exon 19

Antisense oligonucleotides directed at exon 19 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H19A(+35+65) [SEQ ID NO:79] induced substantial exon 19 skipping when delivered into cells at a concentration of 10 nM. This antisense molecule also showed very strong exon skipping at concentrations of 25, 50, 100, 300 and 600 nM.

FIG. 10 illustrates exon 19 and 20 skipping using a "cocktail" of antisense oligonucleotides, as tested using gel electrophoresis. It is interesting to note that it was not easy to induce exon 20 skipping using single antisense oligonucleotides H20A(+44+71) [SEQ ID NO:81] or H20A(+149+170) [SEQ ID NO:82], as illustrated in sections 2 and 3 of the gel shown in FIG. 10. Whereas, a "cocktail" of antisense oligo-

nucleotides was more efficient as can be seen in section 4 of FIG. 10 using a "cocktail" of antisense oligonucleotides H20A(+44+71) and H20A(+149+170). When the cocktail was used to target exon 19, skipping was even stronger (see section 5, FIG. 10).

FIG. 11 illustrates gel electrophoresis results of exon 19/20 skipping using "weasels". The "weasels" were effective in skipping exons 19 and 20 at concentrations of 25, 50, 100, 300 and 600 nM. A further "weasel" sequence is shown in the last row of Table 3C. This compound should give good results.

Antisense Oligonucleotides Directed at Exon 20

Antisense oligonucleotides directed at exon 20 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

None of the antisense oligonucleotides tested induced exon 20 skipping when delivered into cells at a concentration of 10, 25, 50, 300 or 600 nM (see Table 15). Antisense molecules H20A(-11+17) [SEQ ID NO:86] and H20D(+08-20) [SEQ ID NO:87] are yet to be tested.

However, a combination or "cocktail" of H20A(+44+71) [SEQ ID NO: 81] and H20(+149+170) [SEQ ID NO:82] in a ratio of 1:1, exhibited very strong exon skipping at a concentration of 100 nM and 600 nM. Further, a combination of antisense molecules H19A(+35+65) [SEQ ID NO:79], H20A(+44+71) [SEQ ID NO:81] and H20A(+149+170) [SEQ ID NO:82] in a ratio of 2:1:1, induced very strong exon skipping at a concentration ranging from 10 nM to 600 nM.

TABLE 15

| SEQ ID | Antisense Oligonucleotide name | Sequence | Ability to induce skipping |
|-------------|--|---|----------------------------|
| 81 | H20A(+44+71) | CUG GCA GAA UUC GAU CCA CCG GCU GUU C | No skipping |
| 82 | H20A(+147+168) | CAG CAG UAG UUG UCA UCU GCU C | No skipping |
| 83 | H20A(+185+203) | UGA UGG GGU GGU GGG UUG G | No skipping |
| 84 | H20A(-08+17) | AUC UGC AUU AAC ACC CUC UAG AAA G | No skipping |
| 85 | H20A(+30+53) | CCG GCU GUU CAG UUG UUC UGA GGC | No skipping |
| 86 | H20A(-11+17) | AUC UGC AUU AAC ACC CUC UAG AAA GAA A | Not tested yet |
| 87 | H20D(+08-20) | GAA GGA GAA GAG AUU CUU ACC UUA CAA A | Not tested yet |
| 81 & 82 | H20A(+44+71) & H20A(+147+168) | CUG GCA GAA UUC GAU CCA CCG GCU GUU C CAG CAG UAG UUG UCA UCU GCU C | Very strong skipping |
| 80, 81 & 82 | H19A(+35+65); H20A(+44+71); H20A(+147+168) | GCC UGA GCU GAU CUG CUG GCA UCU UGC AGU U; CUG GCA GAA UUC GAU CCA CCG GCU GUU C; CAG CAG UAG UUG UCA UCU GCU C | Very strong skipping |

Antisense Oligonucleotides Directed at Exon 21

Antisense oligonucleotides directed at exon 21 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above. ³⁵

H21A(+85+108) [SEQ ID NO:92] and H21A(+85+106) [SEQ ID NO:91] induced exon 21 skipping when delivered into cells at a concentration of 50 nM. Table 16 below includes other antisense molecules tested at a concentration range of 5, 25, 50, 100, 200 and 300 nM. These antisense molecules showed a variable ability to induce exon skipping ⁴⁰

TABLE 16

| SEQ ID | Antisense Oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|------------------------------------|----------------------------|
| 90 | H21A(-06+16) | GCC GGU UGA CUU CAU CCU GUG C | Skips at 600 nM |
| 91 | H21A(+85+106) | CUG CAU CCA GGA ACA UGG GUC C | Skips at 50 nM |
| 92 | H21A(+85+108) | GUC UGC AUC CAG GAA CAU GGG UC | Skips at 50 nM |
| 93 | H21A(+08+31) | GUU GAA GAU CUG AUA GCC GGU UGA | Skips faintly to |
| 94 | H21D(+18-07) | UAC UUA CUG UCU GUA GCU CUU UCU | No skipping |

Antisense Oligonucleotides Directed at Exon 22

Antisense oligonucleotides directed at exon 22 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above. ⁶⁵

FIG. 12 illustrates differing efficiencies of two antisense molecules directed at exon 22 acceptor splice site. H22A(+125+106) [SEQ ID NO:96] and H22A(+80+101) [SEQ ID NO: 98] induce strong exon 22 skipping from 50 nM to 600 nM concentration.

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H22A(+125+146) [SEQ ID NO:96] and H22A(+80+101) [SEQ ID NO:98] induced exon 22 skipping when delivered into cells at a concentration of 50 nM. Table 17 below shows other antisense molecules tested at a concentration range of 50, 100, 300 and 600 nM. These antisense molecules showed a variable ability to induce exon skipping.

TABLE 17

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|---------------------------------|----------------------------|
| 95 | H22A(+22+45) | CAC UCA UGG UCU CCU GAU AGC GCA | No skipping |
| 96 | H22A(+125+146) | CUG CAA UUC CCC GAG UCU CUG C | Skipping to 50 nM |
| 97 | H22A(+47+69) | ACU GCU GGA CCC AUG UCC UGA UG | Skipping to 300 nM |
| 98 | H22A(+80+101) | CUA AGU UGA GGU AUG GAG AGU | Skipping to 50 nM |
| 99 | H22D(+13-11) | UAU UCA CAG ACC UGC AAU UCC CC | No skipping |

Antisense Oligonucleotides Directed at Exon 23

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Antisense oligonucleotides directed at exon 23 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

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Table 18 below shows antisense molecules tested at a concentration range of 25, 50, 100, 300 and 600 nM. These antisense molecules showed no ability to induce exon skipping or are yet to be tested.

TABLE 18

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|------------------------------------|----------------------------|
| 100 | H23A(+34+59) | ACA GUG GUG CUG AGA UAG UAU AGG CC | No skipping |
| 101 | H23A(+18+39) | UAG GCC ACU UUG UUG CUC UUG C | No Skipping |
| 102 | H23A(+72+90) | UUC AGA GGG CCG UUU CUU C | No Skipping |

Antisense Oligonucleotides Directed at Exon 24

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Antisense oligonucleotides directed at exon 24 were prepared using similar methods as described above. Table 19 below outlines the antisense oligonucleotides directed at exon 24 that are yet to be tested for their ability to induce exon skipping.

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TABLE 19

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|------------------------------------|----------------------------|
| 103 | H24A(+48+70) | GGG CAG GCC AUU CCU CCU UCA GA | Needs testing |
| 104 | H24A(-02+22) | UCU UCA GGG UUU GUA UGU GAU UCU | Needs testing |

Antisense Oligonucleotides Directed at Exon 25

Antisense oligonucleotides directed at exon 25 were prepared using similar methods as described above. Table 20 below shows the antisense oligonucleotides directed at exon 25 that are yet to be tested for their ability to induce exon 25 skipping. ¹⁵

TABLE 20

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 105 | H25A(+9+36) | CUG GGC UGA AUU GUC UGA AUA UCA CUG | Needs testing |
| 106 | H25A(+131+156) | CUG UUG GCA CAU GUG AUC CCA CUG AG | Needs testing |
| 107 | H25D(+16-08) | GUC UAU ACC UGU UGG CAC AUG UGA | Needs testing |

Antisense oligonucleotides Directed at Exon 26

Antisense oligonucleotides directed at exon 26 were prepared using similar methods as described above. Table 21 below outlines the antisense oligonucleotides directed at exon 26 that are yet to be tested for their ability to induce exon 26 skipping. ³⁵

TABLE 21

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|---------------------------------------|----------------------------|
| 108 | H26A(+132+156) | UGC UUU CUG UAA UUC AUC UGG AGU U | Needs testing |
| 109 | H26A(-07+19) | CCU CCU UUC UGG CAU AGA CCU UCC AC | Needs testing |
| 110 | H26A(+68+92) | UGU GUC AUC CAU UCG UGC AUC UCU G | Faint skipping at 600 nM |

Antisense oligonucleotides Directed at Exon 27

Antisense oligonucleotides directed at exon 27 were prepared using similar methods as described above. Table 22 below outlines the antisense oligonucleotides directed at exon 27 that are yet to be tested for their ability to induce exon 27 skipping. ⁵⁵

TABLE 22

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------------|----------------------------|
| 111 | H27A(+82+106) | UUA AGG CCU CUU GUG CUA CAG GUG G | Needs testing |

TABLE 22-continued

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------|--------------------------------------|
| 112 | H27A(-4+19) | GGG CCU CUU CUU UAG CUC UCU GA | Faint skipping at 600 and 300 nM |
| 113 | H27D(+19-03) | GAC UUC CAA AGU CUU GCA UUU C | v. strong skipping at 600 and 300 nM |

Antisense Oligonucleotides Directed at Exon 28

Antisense oligonucleotides directed at exon 28 were prepared using similar methods as described above. Table 23 below outlines the antisense oligonucleotides directed at exon 28 that are yet to be tested for their ability to induce exon 28 skipping.

TABLE 23

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|------------------------------------|--------------------------------------|
| 114 | H28A(-05+19) | GCC AAC AUG CCC AAA CUU CCU AAG | v. strong skipping at 600 and 300 nM |
| 115 | H28A(+99+124) | CAG AGA UUU CCU CAG CUC CGC CAG GA | Needs testing |
| 116 | H28D(+16-05) | CUU ACA UCU AGC ACC UCA GAG | v. strong skipping at 600 and 300 nM |

Antisense Oligonucleotides Directed at Exon 29

Antisense oligonucleotides directed at exon 29 were prepared using similar methods as described above. Table 24 below outlines the antisense oligonucleotides directed at exon 29 that are yet to be tested for their ability to induce exon 29 skipping.

TABLE 24

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|-----------------------------------|--------------------------------------|
| 117 | H29A(+57+81) | UCC GCC AUC UGU UAG GGU CUG UGC C | Needs testing |
| 118 | H29A(+18+42) | AUU UGG GUU AUC CUC UGA AUG UCG C | v. strong skipping at 600 and 300 nM |
| 119 | H29D(+17-05) | CAU ACC UCU UCA UGU AGU UCC C | v. strong skipping at 600 and 300 nM |

Antisense Oligonucleotides Directed at Exon 30

Antisense oligonucleotides directed at exon 30 were prepared using similar methods as described above. Table 25 below outlines the antisense oligonucleotides directed at exon 30 that are yet to be tested for their ability to induce exon 30 skipping.

TABLE 25

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|---------------------------------------|---|
| 120 | H30A(+122+147) | CAU UUG AGC UGC GUC CAC CUU GUC UG | Needs testing |
| 121 | H30A(+25+50) | UCC UGG GCA GAC UGG AUG CUC UGU UC | Very strong skipping at 600 and 300 nM. |
| 122 | H30D(+19-04) | UUG CCU GGG CUU CCU GAG GCA UU | Very strong skipping at 600 and 300 nM. |

Antisense Oligonucleotides Directed at Exon 31 15

Antisense oligonucleotides directed at exon 31 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 13 illustrates differing efficiencies of two antisense molecules directed at exon 31 acceptor splice site and a "cocktail" of exon 31 antisense oligonucleotides at varying concentrations. H31D(+03-22) [SEQ ID NO:124] substantially induced exon 31 skipping when delivered into cells at a concentration of 20 nM. Table 26 below also includes other antisense molecules tested at a concentration of 100 and 300 nM. These antisense molecules showed a variable ability to induce exon skipping.

TABLE 26

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------------|----------------------------|
| 123 | H31D(+06-18) | UUC UGA AAU AAC AUA UAC CUG UGC | Skipping to 300 nM |
| 124 | H31D(+03-22) | UAG UUU CUG AAA UAA CAU AUA CCU G | Skipping to 20 nM |
| 125 | H31A(+05+25) | GAC UUG UCA AAU CAG AUU GGA | No skipping |
| 126 | H31D(+04-20) | GUU UCU GAA AUA ACA UAU ACC UGU | Skipping to 300 nM |

Antisense oligonucleotides Directed at Exon 32 45

Antisense oligonucleotides directed at exon 32 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H32D(+04-16) [SEQ ID NO:127] and H32A(+49+73) [SEQ ID NO:130] induced exon 32 skipping when delivered into cells at a concentration of 300 nM. Table 27 below also shows other antisense molecules tested at a concentration of 100 and 300 nM. These antisense molecules did not show an ability to induce exon skipping.

TABLE 27

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|-----------------------------------|----------------------------|
| 127 | H32D(+04-16) | CAC CAG AAA UAC AUA CCA CA | Skipping to 300 nM |
| 128 | H32A(+151+170) | CAA UGA UUU AGC UGU GAC UG | No skipping |
| 129 | H32A(+10+32) | CGA AAC UUC AUG GAG ACA UCU UG | No skipping |

TABLE 27-continued

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------------|----------------------------|
| 130 | H32A(+49+73) | CUU GUA GAC GCU GCU CAA AAU UGG C | Skipping to 300 nM |

Antisense Oligonucleotides Directed at Exon 33

Antisense oligonucleotides directed at exon 33 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 14 shows differing efficiencies of two antisense molecules directed at exon 33 acceptor splice site. H33A(+64+88) [SEQ ID NO:134] substantially induced exon 33 skipping when delivered into cells at a concentration of 10 nM. Table 28 below includes other antisense molecules tested at a concentration of 100, 200 and 300 nM. These antisense molecules showed a variable ability to induce exon skipping.

TABLE 28

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 131 | H33D(+09-11) | CAU GCA CAC ACC UUU GCU CC | No skipping |
| 132 | H33A(+53+76) | UCU GUA CAA UCU GAC GUC CAG UCU | Skipping to 200 nM |
| 133 | H33A(+30+56) | GUG UUU AUC ACC AUU UCC ACU UCA GAC | Skipping to 200 nM |
| 134 | H33A(+64+88) | GCG UCU GCU UUU UCU GUA CAA UCU G | Skipping to 10 nM |

Antisense Oligonucleotides Directed at Exon 34

Antisense oligonucleotides directed at exon 34 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

Table 29 below includes antisense molecules tested at a concentration of 100 and 300 nM. These antisense molecules showed a variable ability to induce exon skipping.

TABLE 29

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 135 | H34A(+83+104) | UCC AUA UCU GUA GCU GGC AGC C | No skipping |
| 136 | H34A(+143+165) | CCA GGC AAC UUC AGA AUC CAA AU | No skipping |
| 137 | H34A(-20+10) | UUU CUG UUA CCU GAA AAG AAU UAU AAU GAA | Not tested |
| 138 | H34A(+46+70) | CAU UCA UUU CCU UUC GCA UCU UAC G | Skipping to 300 nM |
| 139 | H34A(+95+120) | UGA UCU CUU UGU CAA UUC CAU AUC UG | Skipping to 300 nM |
| 140 | H34D(+10-20) | UUC AGU GAU AUA GGU UUU ACC UUU CCC CAG | Not tested |

TABLE 29-continued

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|---------------------------------------|----------------------------|
| 141 | H34A(+72+96) | CUG UAG CUG CCA GCC AUU CUG UCA AG | No skipping |

Antisense Oligonucleotides Directed at Exon 35 10

Antisense oligonucleotides directed at exon 35 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 15 shows differing efficiencies of antisense molecules directed at exon 35 acceptor splice site. H35A(+24+43) [SEQ ID NO:144] substantially induced exon 35 skipping when delivered into cells at a concentration of 20 nM. Table 30 below also includes other antisense molecules tested at a concentration of 100 and 300 nM. These antisense molecules showed no ability to induce exon skipping.

TABLE 30

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|-----------------------------|----------------------------|
| 142 | H35A(+141+161) | UCU UCU GCU CGG GAG GUG ACA | Skipping to 20 nM |
| 143 | H35A(+116+135) | CCA GUU ACU AUU CAG AAG AC | No skipping |
| 144 | H35A(+24+43) | UCU UCA GGU GCA CCU UCU GU | No skipping |

Antisense Oligonucleotides Directed at Exon 36 35

Antisense oligonucleotides directed at exon 36 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

Antisense molecule H36A(+26+50) [SEQ ID NO:145] induced exon 36 skipping when delivered into cells at a concentration of 300 nM, as shown in FIG. 16.

Antisense Oligonucleotides Directed at Exon 37 45

Antisense oligonucleotides directed at exon 37 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 17 shows differing efficiencies of two antisense molecules directed at exon 37 acceptor splice site. H37A(+82+105) [SEQ ID NO:148] and H37A(+134+157) [SEQ ID NO:149] substantially induced exon 37 skipping when delivered into cells at a concentration of 10 nM. Table 31 below shows the antisense molecules tested.

TABLE 31

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------------|----------------------------|
| 147 | H37A(+26+50) | CGU GUA GAG UCC ACC UUU GGG CGU A | No skipping |
| 148 | H37A(+82+105) | UAC UAA UUU CCU GCA GUG GUC ACC | Skipping to 10 nM |
| 149 | H37A(+134+157) | UUC UGU GUG AAA UGG CUG CAA AUC | Skipping to 10 nM |

Antisense Oligonucleotides Directed at Exon 38

Antisense oligonucleotides directed at exon 38 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 18 illustrates antisense molecule H38A(+88+112) [SEQ ID NO:152], directed at exon 38 acceptor splice site. H38A(+88+112) substantially induced exon 38 skipping when delivered into cells at a concentration of 10 nM. Table 32 below shows the antisense molecules tested and their ability to induce exon skipping.

TABLE 32

| Antisense SEQ ID name | Sequence | Ability to induce skipping |
|--------------------------|--------------------------------------|-------------------------------|
| 150 H38A(-01+19) | CCU UCA AAG GAA UGG AGG CC | No skipping |
| 151 H38A(+59+83) | UGC UGA AUU UCA GCC UCC AGU GGU U | Skipping to 10 nM |
| 152 H38A(+88+112) | UGA AGU CUU CCU CUU UCA GAU UCA C | Skipping to 10 nM |

Antisense Oligonucleotides Directed at Exon 39

Antisense oligonucleotides directed at exon 39 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H39A(+62+85) [SEQ ID NO:153] induced exon 39 skipping when delivered into cells at a concentration of 100 nM. Table 33 below shows the antisense molecules tested and their ability to induce exon skipping.

TABLE 33

| Antisense SEQ ID name | Sequence | Ability to induce skipping |
|--------------------------|------------------------------------|-------------------------------|
| 153 H39A(+62+85) | CUG GCU UUC UCU CAU CUG UGA UUC | Skipping to 100 nM |
| 154 H39A(+39+58) | GUU GUA AGU UGU CUC CUC UU | No skipping |
| 155 H39A(+102+121) | UUG UCU GUA ACA GCU GCU GU | No skipping |
| 156 H39D(+10-10) | GCU CUA AUA CCU UGA GAG CA | Skipping to 300 nM |

Antisense Oligonucleotides Directed at Exon 40

Antisense oligonucleotides directed at exon 40 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 19 illustrates antisense molecule H40A(-05+17) [SEQ ID NO:157] directed at exon 40 acceptor splice site. H40A(-05+17) and H40A(+129+153) [SEQ ID NO:158] both substantially induced exon 40 skipping when delivered into cells at a concentration of 5 nM.

Antisense Oligonucleotides Directed at Exon 42

Antisense oligonucleotides directed at exon 42 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above. 5

FIG. 20 illustrates antisense molecule H42A(-04+23) [SEQ ID NO:159], directed at exon 42 acceptor splice site. H42A(-4+23) and H42D(+19-02) [SEQ ID NO:161] both induced exon 42 skipping when delivered into cells at a concentration of 5 nM. Table 34 below shows the antisense molecules tested and their ability to induce exon 42 skipping. 10

TABLE 34

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 159 | H42A(-4+23) | AUC GUU UCU UCA CGG ACA GUG UGG UGC | Skipping to 5 nM |
| 160 | H42A(+86+109) | GGG CUU GUG AGA CAU GAG UGA UUU | Skipping to 100 nM |
| 161 | H42D(+19-02) | A CCU UCA GAG GAC UCC UCU UGC | Skipping to 5 nM |

Antisense Oligonucleotides Directed at Exon 43

Antisense oligonucleotides directed at exon 43 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above. 30

H43A(+101+120) [SEQ ID NO:163] induced exon 43 skipping when delivered into cells at a concentration of 25 nM. Table 35 below includes the antisense molecules tested and their ability to induce exon 43 skipping. 35

TABLE 35

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--------------------------------------|----------------------------|
| 162 | H43D(+10-15) | UAU GUG UUA CCU ACC CUU GUC GGU C | Skipping to 100 nM |
| 163 | H43A(+101+120) | GGA GAG AGC UUC CUG UAG CU | Skipping to 25 nM |
| 164 | H43A(+78+100) | UCA CCC UUU CCA CAG GCG UUG CA | Skipping to 200 nM |

Antisense Oligonucleotides Directed at Exon 44

Antisense oligonucleotides directed at exon 44 were prepared using similar methods as described above. Testing for the ability of these antisense molecules to induce exon 44 skipping is still in progress. The antisense molecules under review are shown as SEQ ID Nos: 165 to 167 in Table 1A. 50

Antisense Oligonucleotides Directed at Exon 45

Antisense oligonucleotides directed at exon 45 were prepared using similar methods as described above. Testing for the ability of these antisense molecules to induce exon 45 skipping is still in progress. The antisense molecules under review are shown as SEQ ID Nos: 207 to 211 in Table 1A. 60

Antisense Oligonucleotides Directed at Exon 46

Antisense oligonucleotides directed at exon 46 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 21 illustrates the efficiency of one antisense molecule directed at exon 46 acceptor splice site. Antisense oligonucleotide H46A(+86+115) [SEQ ID NO:203] showed very strong ability to induce exon 46 skipping. Table 36 below includes antisense molecules tested. These antisense molecules showed varying ability to induce exon 46 skipping.

TABLE 36

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 168 | H46D(+16-04) | UUA CCU UGA CUU GCU CAA GC | No skipping |
| 169 | H46A(+90+109) | UCC AGG UUC AAG UGG GAU AC | No skipping |
| 203 | H46A(+86+115) | CUC UUU UCC AGG UUC AAG UGG GAU ACU AGC | Good skipping to 100 nM |
| 204 | H46A(+107+137) | CAA GCU UUU CUU UUA GUU GCU GCU CUU UUC C | Good skipping to 100 nM |
| 205 | H46A(-10+20) | UAU UCU UUU GUU CUU CUA GCC UGG AGA AAG | Weak skipping |
| 206 | H46A(+50+77) | CUG CUU CCU CCA ACC AUA AAA CAA AUU C | Weak skipping |

Antisense Oligonucleotides Directed at Exon 47

Antisense oligonucleotides directed at exon 47 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

H47A(+76+100) [SEQ ID NO:170] and H47A(-09+12) [SEQ ID NO:172] both induced exon 47 skipping when delivered into cells at a concentration of 200 nM. H47D(+25-02) [SEQ ID NO: 171] is yet to be prepared and tested.

Antisense Oligonucleotides Directed at Exon 50

Antisense oligonucleotides directed at exon 50 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

Antisense oligonucleotide molecule H50A(+02+30) [SEQ ID NO: 173] was a strong inducer of exon skipping. Further,

H50A(+07+33) [SEQ ID NO:174] and H50D(+07-18) [SEQ ID NO:175] both induced exon 50 skipping when delivered into cells at a concentration of 100 nM.

Antisense Oligonucleotides Directed at Exon 51

Antisense oligonucleotides directed at exon 51 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 22 illustrates differing efficiencies of two antisense molecules directed at exon 51 acceptor splice site. Antisense oligonucleotide H51A(+66+90) [SEQ ID NO:180] showed the stronger ability to induce exon 51 skipping. Table 37 below includes antisense molecules tested at a concentration range of 25, 50, 100, 300 and 600 nM. These antisense molecules showed varying ability to induce exon 51 skipping. The strongest inducers of exon skipping were antisense oligonucleotide H51A(+61+90) [SEQ ID NO: 179] and H51A(+66+95) [SEQ ID NO: 181].

TABLE 37

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 176 | H51A(-01+25) | ACC AGA GUA ACA GUC UGA GUA GGA GC | Faint skipping |
| 177 | H51D(+16-07) | CUC AUA CCU UCU GCU UGA UGA UC | Skipping at 300 nM |
| 178 | H51A(+111+134) | UUC UGU CCA AGC CCG GUU GAA AUC | Needs re-testing |
| 179 | H51A(+61+90) | ACA UCA AGG AAG AUG GCA UUU CUA GUU UGG | Very strong skipping |

TABLE 37-continued

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|---|----------------------------|
| 180 | H51A(+66+90) | ACA UCA AGG AAG AUG GCA UUU CUA G | skipping |
| 181 | H51A(+66+95) | CUC CAA CAU CAA GGA AGA UGG CAU UUC UAG | Very strong skipping |
| 182 | H51D(+08-17) | AUC AUU UUU UCU CAU ACC UUC UGC U | No skipping |
| 183 | H51A/D(+08-17) & (-15+?) | AUC AUU UUU UCU CAU ACC UUC UGC UAG GAG CUA AAA | No skipping |
| 184 | H51A(+175+195) | CAC CCA CCA UCA GCC UCU GUG | No skipping |
| 185 | H51A(+199+220) | AUC AUC UCG UUG AUA UCC UCA A | No skipping |

Antisense Oligonucleotides Directed at Exon 52

Antisense oligonucleotides directed at exon 52 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 22 also shows differing efficiencies of four antisense molecules directed at exon 52 acceptor splice site. The most effective antisense oligonucleotide for inducing exon 52 skipping was H52A(+17+37) [SEQ ID NO:188].

Table 38 below shows antisense molecules tested at a concentration range of 50, 100, 300 and 600 nM. These antisense molecules showed varying ability to induce exon 50 skipping. Antisense molecules H52A(+12+41) [SEQ ID NO:187] and H52A(+17+37) [SEQ ID NO:188] showed the strongest exon 50 skipping at a concentration of 50 nM.

TABLE 38

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|----------------------------|
| 186 | H52A(-07+14) | UCC UGC AUU GUU GCC UGU AAG | No skipping |
| 187 | H52A(+12+41) | UCC AAC UGG GGA CGC CUC UGU UCC AAA UCC | Very strong skipping |
| 188 | H52A(+17+37) | ACU GGG GAC GCC UCU GUU CCA | Skipping to 50 nM |
| 189 | H52A(+93+112) | CCG UAA UGA UUG UUC UAG CC | No skipping |
| 190 | H52D(+05-15) | UGU UAA AAA ACU UAC UUC GA | No skipping |

Antisense Oligonucleotides Directed at Exon 53

Antisense oligonucleotides directed at exon 53 were prepared and tested for their ability to induce exon skipping in human muscle cells using similar methods as described above.

FIG. 22 also shows antisense molecule H53A(+39+69) [SEQ ID NO:193] directed at exon 53 acceptor splice site. This antisense oligonucleotide was able to induce exon 53 skipping at 5, 100, 300 and 600 nM. A "cocktail" of three exon 53 antisense oligonucleotides: H53A(+23+47) [SEQ ID NO:195], H53A(+150+176) [SEQ ID NO:196] and H53D(+14-07) [SEQ ID NO:194], was also tested, as shown in FIG. 20 and exhibited an ability to induce exon skipping.

Table 39 below includes other antisense molecules tested at a concentration range of 50, 100, 300 and 600 nM. These antisense molecules showed varying ability to induce exon 53 skipping. Antisense molecule H53A(+39+69) [SEQ ID NO:193] induced the strongest exon 53 skipping.

TABLE 39

| SEQ ID | Antisense oligonucleotide name | Sequence | Ability to induce skipping |
|--------|--------------------------------|--|------------------------------|
| 191 | H53A(+45+69) | CAU UCA ACU GUU GCC UCC GGU UCU G | Faint skipping at 50 nM |
| 192 | H53A(+39+62) | CUG UUG CCU CCG GUU CUG AAG GUG | Faint skipping at 50 nM |
| 193 | H53A(+39+69) | CAU UCA ACU GUU GCC UCC GGU UCU GAA GGU G | Strong skipping to 50 nM |
| 194 | H53D(+14-07) | UAC UAA CCU UGG UUU CUG UGA | Very faint skipping to 50 nM |
| 195 | H53A(+23+47) | CUG AAG GUG UUC UUG UAC UUC AUC C | Very faint skipping to 50 nM |
| 196 | H53A(+150+176) | UGU ADA GGG ACC CUC CUU CCA UGA CUC | Very faint skipping to 50 nM |
| 197 | H53D(+20-05) | CUA ACC UUG GUU UCU GUG AUU UUC U | Not made yet |
| 198 | H53D(+09-18) | GGU AUC UUU GAU ACU AAC CUU GGU UUC | Faint at 600 nM |
| 199 | H53A(-12+10) | AUU CUU UCA ACU AGA AUA AAA G | No skipping |
| 200 | H53A(-07+18) | GAU UCU GAA UUG UUU CAA CUA GAA U | No skipping |
| 201 | H53A(+07+26) | AUC CCA CUG AUU CUG AAU UC | No skipping |
| 202 | H53A(+124+145) | UUG GCU CUG GCC UGU CCU AAG A | No skipping |

SEQUENCE LISTING

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<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic Human 2'-O-methyl phosphorothioate antisense oligonucleotide

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<213> ORGANISM: Artificial Sequence

<220> FEATURE:

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oligonucleotide

<400> SEQUENCE: 7

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Human 2'-O-methyl phosphorothioate antisense
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<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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oligonucleotide

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 oligonucleotide

<400> SEQUENCE: 17

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<210> SEQ ID NO 18
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 oligonucleotide

<400> SEQUENCE: 18

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 oligonucleotide

<400> SEQUENCE: 19

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 oligonucleotide

<400> SEQUENCE: 20
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<210> SEQ ID NO 21
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 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 23
 uaggagcgc cucccauccu guaggucac u g 31

<210> SEQ ID NO 24
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 24
 aggucaagga ggcgccuccc auccguagg u 31

<210> SEQ ID NO 25
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

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<400> SEQUENCE: 25

gcgccuccca uccuguaggu cacug

25

<210> SEQ ID NO 26

<211> LENGTH: 26

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 26

cuucgaggag gucuaggagg cgccuc

26

<210> SEQ ID NO 27

<211> LENGTH: 21

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 27

cucccauccu guaggucacu g

21

<210> SEQ ID NO 28

<211> LENGTH: 22

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 28

uaccaguuuu ugcccuguca gg

22

<210> SEQ ID NO 29

<211> LENGTH: 26

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 29

ucaauaugcu gcuucccaaa cugaaa

26

<210> SEQ ID NO 30

<211> LENGTH: 25

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 30

cuaggaggcg ccucccaucc uguag

25

<210> SEQ ID NO 31

<211> LENGTH: 31

<212> TYPE: RNA

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<213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 31
 uuaugauuuc caucuacgau gucaguacuu c 31

<210> SEQ ID NO 32
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 32
 cuuaccugcc aguggaggau uauauccaa a 31

<210> SEQ ID NO 33
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 33
 caucaggauu cuuaccugcc agugg 25

<210> SEQ ID NO 34
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 34
 cgauucagau acuucaaaua uucac 25

<210> SEQ ID NO 35
 <211> LENGTH: 18
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 35
 accauucauc aggauucu 18

<210> SEQ ID NO 36
 <211> LENGTH: 18
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 36
 accugccagu ggaggauu 18

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<210> SEQ ID NO 37
 <211> LENGTH: 27
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 37
 ccaauuuca cuaaaaucaac cuguuaa 27

<210> SEQ ID NO 38
 <211> LENGTH: 30
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 38
 caggauucu accugccagu ggaggauuu 30

<210> SEQ ID NO 39
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 39
 acgaugucag uacuuccaau auuacuaaa u 31

<210> SEQ ID NO 40
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 40
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<210> SEQ ID NO 41
 <211> LENGTH: 21
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 41
 caggagcuuc caaauugcugc a 21

<210> SEQ ID NO 42
 <211> LENGTH: 29
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense

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oligonucleotide

<400> SEQUENCE: 42

cuugucuuca ggagcuucca aaugcugca 29

<210> SEQ ID NO 43
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 43

uccucagcag aaagaagcca cg 22

<210> SEQ ID NO 44
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 44

uuagaaaucu cuccuuguc 20

<210> SEQ ID NO 45
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 45

uaaaugggu guacacaau 20

<210> SEQ ID NO 46
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 46

cccugaggca uucccaucuu gaau 24

<210> SEQ ID NO 47
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 47

aggacuuacu ugcuuuuuu 20

<210> SEQ ID NO 48
 <211> LENGTH: 23

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<212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 48
 cuugaaauua ggagaucau cug 23

<210> SEQ ID NO 49
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 49
 caucuucuga uauuuuccu guu 23

<210> SEQ ID NO 50
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 50
 ucuucuguuu uuguuagcca guca 24

<210> SEQ ID NO 51
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 51
 ucuauguaaa cugaaaauuu 20

<210> SEQ ID NO 52
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 52
 uucuggagau ccauuaaaac 20

<210> SEQ ID NO 53
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 53

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cagcaguugc gugaucucca cuag 24

<210> SEQ ID NO 54
<211> LENGTH: 21
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 54

uucaucaacu accaccacca u 21

<210> SEQ ID NO 55
<211> LENGTH: 25
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 55

cuaagcaaaa uaaucugacc uuaag 25

<210> SEQ ID NO 56
<211> LENGTH: 28
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 56

cuuguaaaag aaccagcgg ucuucugu 28

<210> SEQ ID NO 57
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 57

caucuacaga uguuugccca uc 22

<210> SEQ ID NO 58
<211> LENGTH: 23
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 58

gaaggauguc uguuaaaga acc 23

<210> SEQ ID NO 59
<211> LENGTH: 20
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic

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Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 59

accuguucuu caguaagacg 20

<210> SEQ ID NO 60
<211> LENGTH: 24
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 60

caugacacac cuguucuuca guaa 24

<210> SEQ ID NO 61
<211> LENGTH: 20
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 61

cauuugagaa ggaugucuug 20

<210> SEQ ID NO 62
<211> LENGTH: 24
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 62

aucucccaau accuggagaa gaga 24

<210> SEQ ID NO 63
<211> LENGTH: 31
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 63

gccaugcacu aaaaaggcac ugcaagacau u 31

<210> SEQ ID NO 64
<211> LENGTH: 24
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 64

ucuuuaaagc caguugugug aauc 24

<210> SEQ ID NO 65

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<211> LENGTH: 21
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 65
 uuucugaaag ccaugcacua a 21

<210> SEQ ID NO 66
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 66
 guacauacgg ccaguuuuug aagac 25

<210> SEQ ID NO 67
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 67
 cuagaucgcg uuuuaaaacc uguuaaaaca a 31

<210> SEQ ID NO 68
 <211> LENGTH: 31
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 68
 uuuuuucug auccgcuuuu aaaaccuguu a 31

<210> SEQ ID NO 69
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 69
 cuagaucgcg uuuuaaaacc uguua 25

<210> SEQ ID NO 70
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 70

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cggucuuucg ggucacugac uua 23

 <210> SEQ ID NO 71
 <211> LENGTH: 26
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 71

 cuagauccgc uuuuaaaacc uguuaa 26

 <210> SEQ ID NO 72
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 72

 ccgcuuuuaa aaccguuaa 20

 <210> SEQ ID NO 73
 <211> LENGTH: 26
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 73,

 uggauugcuu uuucuuuucu agaacc 26

 <210> SEQ ID NO 74
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 74

 caugcuuccg ucuucugggu cacug 25

 <210> SEQ ID NO 75
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 75

 gaucuuguuu gagugaauc ag 23

 <210> SEQ ID NO 76
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:

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<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 76

guuauccagc caugcuuccg uc 22

<210> SEQ ID NO 77
<211> LENGTH: 25
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 77

ugauaaaugg uaucacuaac cugug 25

<210> SEQ ID NO 78
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 78

guaucacuaa ccugugcugu ac 22

<210> SEQ ID NO 79
<211> LENGTH: 19
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 79

cugcuggcau cuugcaguu 19

<210> SEQ ID NO 80
<211> LENGTH: 31
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 80

gccugagcug aucugcuggc aucuugcagu u 31

<210> SEQ ID NO 81
<211> LENGTH: 28
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 81

cuggcagaau ucgauccacc ggcuguuc 28

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<210> SEQ ID NO 82
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 82

cagcaguagu ugucaucugc uc 22

<210> SEQ ID NO 83
 <211> LENGTH: 19
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 83

ugauggggug guggguugg 19

<210> SEQ ID NO 84
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 84

aucugcauaa acaccucua gaaag 25

<210> SEQ ID NO 85
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 85

ccggcuguuc aguuguucug aggc 24

<210> SEQ ID NO 86
 <211> LENGTH: 28
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 86

aucugcauaa acaccucua gaaagaaa 28

<210> SEQ ID NO 87
 <211> LENGTH: 28
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

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<400> SEQUENCE: 87

gaaggagaag agauucuuac cuuacaaa

28

<210> SEQ ID NO 88

<211> LENGTH: 20

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 88

auucgaucca ccggcuguuc

20

<210> SEQ ID NO 89

<211> LENGTH: 20

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 89

cagcaguagu ugucaucugc

20

<210> SEQ ID NO 90

<211> LENGTH: 22

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 90

gccgguugac ucauccugu gc

22

<210> SEQ ID NO 91

<211> LENGTH: 22

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 91

cugcauccag gaacaugggu cc

22

<210> SEQ ID NO 92

<211> LENGTH: 23

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 92

gucugcaucc aggaacaugg guc

23

<210> SEQ ID NO 93

<211> LENGTH: 24

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

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<220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 93

guugaagauc ugauagccgg uuga 24

<210> SEQ ID NO 94
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 94

uacuuacugu cuguagcucu uuuc 24

<210> SEQ ID NO 95
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 95

cacucauggu cuccugauag cgca 24

<210> SEQ ID NO 96
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 96

cugcaauucc cggagucucu gc 22

<210> SEQ ID NO 97
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 97

acugcuggac ccauguccug aug 23

<210> SEQ ID NO 98
 <211> LENGTH: 21
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 98

cuaaguugag guauggagag u 21

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<210> SEQ ID NO 99
<211> LENGTH: 23
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 99

uauucacaga ccugcaauuc ccc 23

<210> SEQ ID NO 100
<211> LENGTH: 26
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 100

acaguggugc ugagauagua uaggcc 26

<210> SEQ ID NO 101
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 101

uaggccacuu uguugcucuu gc 22

<210> SEQ ID NO 102
<211> LENGTH: 19
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 102

uucagagggc gcuuucuc 19

<210> SEQ ID NO 103
<211> LENGTH: 23
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 103

gggcaggcca uuccucuc agc 23

<210> SEQ ID NO 104
<211> LENGTH: 24
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

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<400> SEQUENCE: 104

ucucacaggu uuguauauga uucu

24

<210> SEQ ID NO 105

<211> LENGTH: 27

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 105

cugggcugaa uugucugaau aucacug

27

<210> SEQ ID NO 106

<211> LENGTH: 26

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 106

cuguuggcac augugaucac acugag

26

<210> SEQ ID NO 107

<211> LENGTH: 24

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 107

gucuauaccu guuggcacau guga

24

<210> SEQ ID NO 108

<211> LENGTH: 25

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 108

ugcuuucugu aaucaucug gaguu

25

<210> SEQ ID NO 109

<211> LENGTH: 26

<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 109

ccuccuuucu ggcauagacc uuccac

26

<210> SEQ ID NO 110

<211> LENGTH: 25

<212> TYPE: RNA

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<213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 110

 ugugucaucc auucgugcau cucug 25

 <210> SEQ ID NO 111
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 111

 uuaaggccuc uugugcuaca ggugg 25

 <210> SEQ ID NO 112
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 112

 gggccucuc uuuagcucuc uga 23

 <210> SEQ ID NO 113
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 113

 gacuccaaa gucugcauu uc 22

 <210> SEQ ID NO 114
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 114

 gccacaugc ccaaacuucc uaag 24

 <210> SEQ ID NO 115
 <211> LENGTH: 26
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 115

 cagagauuc cucagcuccg ccagga 26

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<210> SEQ ID NO 116
<211> LENGTH: 21
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 116

cuuacaucua gcaccucaga g 21

<210> SEQ ID NO 117
<211> LENGTH: 25
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 117

uccgccaucu guuagggucc gugcc 25

<210> SEQ ID NO 118
<211> LENGTH: 25
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 118

auuuggguua uccucugaau gugcc 25

<210> SEQ ID NO 119
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 119

cauaccucu cauguaguuc cc 22

<210> SEQ ID NO 120
<211> LENGTH: 26
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 120

cauuugagcu gcuuccaccu ugucug 26

<210> SEQ ID NO 121
<211> LENGTH: 26
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense

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oligonucleotide

<400> SEQUENCE: 121

uccugggcag acuggaugcu cuguuc 26

<210> SEQ ID NO 122
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 122

uugccugggc uuccugaggc auu 23

<210> SEQ ID NO 123
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 123

uucugaaaa acauauaccu gugc 24

<210> SEQ ID NO 124
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 124

uaguucuga auaacauau accug 25

<210> SEQ ID NO 125
 <211> LENGTH: 21
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 125

gacuugucua aucagauugg a 21

<210> SEQ ID NO 126
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 126

guucugaaa uaacauaac cugu 24

<210> SEQ ID NO 127
 <211> LENGTH: 20

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<212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 127
 caccagaaau acauaccaca 20

<210> SEQ ID NO 128
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 128
 caaugauuuu gcugugacug 20

<210> SEQ ID NO 129
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 129
 cgaaacuca uggagacauc uug 23

<210> SEQ ID NO 130
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 130
 cuuguagacg cugcucaaaa uggc 25

<210> SEQ ID NO 131
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 131
 caugcacaca ccuuugcucc 20

<210> SEQ ID NO 132
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 132

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ucuguacaau cugacgucca gucu 24

<210> SEQ ID NO 133
 <211> LENGTH: 27
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 133

gucuuuauca ccauuuccac uucagac 27

<210> SEQ ID NO 134
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 134

ccgucugcuu uuucuguaca aucug 25

<210> SEQ ID NO 135
 <211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 135

uccauaucug uagcugccag cc 22

<210> SEQ ID NO 136
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 136

ccaggcaacu ucagaaucca aau 23

<210> SEQ ID NO 137
 <211> LENGTH: 30
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 137

uuucuguuac cugaaaagaa uuauaugaa 30

<210> SEQ ID NO 138
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic

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Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 138

caucauuuc cuuucgcauc uaacg 25

<210> SEQ ID NO 139
<211> LENGTH: 26
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 139

ugaucucuuu gucaauucca uaucg 26

<210> SEQ ID NO 140
<211> LENGTH: 30
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 140

uucaguguaa uagguuuuac cuuucccag 30

<210> SEQ ID NO 141
<211> LENGTH: 26
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 141

cuguagcugc cagccauucu gucaag 26

<210> SEQ ID NO 142
<211> LENGTH: 21
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 142

ucuucugcuc gggaggugac a 21

<210> SEQ ID NO 143
<211> LENGTH: 20
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 143

ccaguuaqua uucagaagac 20

<210> SEQ ID NO 144

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<211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 144
 ucuucaggug caccuucugu 20

<210> SEQ ID NO 145
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 145
 ugugaugugg uccacauucu ggua 25

<210> SEQ ID NO 146
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 146
 ccauguguuu cugguauucc 20

<210> SEQ ID NO 147
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 147
 cguguagagu ccaccuuugg gcgua 25

<210> SEQ ID NO 148
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 148
 uacuaauuuc cugcaguggu cacc 24

<210> SEQ ID NO 149
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 149

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uucuguguga aauggcugca aauc 24

<210> SEQ ID NO 150
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 150

ccucaaagg aauggaggcc 20

<210> SEQ ID NO 151
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 151

ugcugaauiu cagccuccag ugguu 25

<210> SEQ ID NO 152
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 152

ugaagucuuc cucuuucaga uucac 25

<210> SEQ ID NO 153
 <211> LENGTH: 24
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide
 <400> SEQUENCE: 153

cuggcuuucu cucaucugug auuc 24

<210> SEQ ID NO 154
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense oligonucleotide
 <400> SEQUENCE: 154

guuguaaguu gucuccucu 20

<210> SEQ ID NO 155
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic

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Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 155

uugucuguaa cagcugcugu 20

<210> SEQ ID NO 156
<211> LENGTH: 20
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 156

gcucuaauac cuugagagca 20

<210> SEQ ID NO 157
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 157

cuugagacc ucaaaucug uu 22

<210> SEQ ID NO 158
<211> LENGTH: 25
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 158

cuuuuuuuc cuuucaucuc ugge 25

<210> SEQ ID NO 159
<211> LENGTH: 27
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 159

aucguuucu cacggacagu gugcugg 27

<210> SEQ ID NO 160
<211> LENGTH: 24
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 160

gggcuuguga gacaugagug auuu 24

<210> SEQ ID NO 161

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<211> LENGTH: 22
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 161

accuucagag gacuccucuu gc 22

<210> SEQ ID NO 162
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 162

uauguguuac cuacccuugu eggc 25

<210> SEQ ID NO 163
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 163

ggagagagcu uccuguagcu 20

<210> SEQ ID NO 164
 <211> LENGTH: 23
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 164

ucacccuuc cacaggcguu gca 23

<210> SEQ ID NO 165
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 165

uuugucuu ucugaaaac 20

<210> SEQ ID NO 166
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 166

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aaagacuuac cuuaagauac 20

<210> SEQ ID NO 167
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 167

aucugucaaa ucgccugcag 20

<210> SEQ ID NO 168
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 168

uuaccuugac uugcucaagc 20

<210> SEQ ID NO 169
 <211> LENGTH: 20
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 169

uccagguuca agugggauac 20

<210> SEQ ID NO 170
 <211> LENGTH: 25
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 170

gcucuucugg gcuuauugga gcacu 25

<210> SEQ ID NO 171
 <211> LENGTH: 27
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 171

accuuuaucc acuggagauu ugucugc 27

<210> SEQ ID NO 172
 <211> LENGTH: 21
 <212> TYPE: RNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:

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<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 172

uuccaccagu aacugaaaca g 21

<210> SEQ ID NO 173
<211> LENGTH: 29
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 173

ccacucagag cucagauuu cuaacuucc 29

<210> SEQ ID NO 174
<211> LENGTH: 27
<212> TYPE: RNA
<213> ORGANISM: Artificial Sequence
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Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 174

cuuccacuca gagcucagau cuucuaa 27

<210> SEQ ID NO 175
<211> LENGTH: 25
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<400> SEQUENCE: 175

gggauccagu auacuuacag gcucc 25

<210> SEQ ID NO 176
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oligonucleotide

<400> SEQUENCE: 176

accagaguaa cagucugagu aggagc 26

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<220> FEATURE:
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Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 177

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 <220> FEATURE:
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 oligonucleotide

 <400> SEQUENCE: 178

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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 179

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<210> SEQ ID NO 180
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 180

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<210> SEQ ID NO 181
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 <220> FEATURE:
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

 <400> SEQUENCE: 181

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<210> SEQ ID NO 182
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 oligonucleotide

 <400> SEQUENCE: 182

 aucauuuuuu cucauaccuu cugcu 25

<210> SEQ ID NO 183
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

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<400> SEQUENCE: 183
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<210> SEQ ID NO 184
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 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 184
 cacccaccau cacccucugu g 21

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 <213> ORGANISM: Artificial Sequence
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 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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 oligonucleotide

<400> SEQUENCE: 185
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<210> SEQ ID NO 186
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 <212> TYPE: RNA
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 186
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<210> SEQ ID NO 187
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 <212> TYPE: RNA
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 187
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<210> SEQ ID NO 188
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 oligonucleotide

<400> SEQUENCE: 188
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<210> SEQ ID NO 189
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 <212> TYPE: RNA
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<220> FEATURE:
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 oligonucleotide

<400> SEQUENCE: 189
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 Human 2'-O-methyl phosphorothioate antisense
 oligonucleotide

<400> SEQUENCE: 190
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<210> SEQ ID NO 191
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 oligonucleotide

<400> SEQUENCE: 191
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 oligonucleotide

<400> SEQUENCE: 192
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 <213> ORGANISM: Artificial Sequence
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<400> SEQUENCE: 193
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<210> SEQ ID NO 194
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 <220> FEATURE:
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<400> SEQUENCE: 194
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<210> SEQ ID NO 195
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 <212> TYPE: RNA
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 <223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
 Human 2'-O-methyl phosphorothioate antisense
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<400> SEQUENCE: 195

cugaaggugu ucuuguacuu caucc 25

<210> SEQ ID NO 196
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<400> SEQUENCE: 196

uguaauagggga cccuccuucc augacuc 27

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 oligonucleotide

<400> SEQUENCE: 197

cuaaccuugg uuucugugau uuuc 25

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<400> SEQUENCE: 198

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 oligonucleotide

<400> SEQUENCE: 199

auucuuucaa cuagaauaaa ag 22

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gauucugaau ucuuuaacu agaau

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oligonucleotide

<400> SEQUENCE: 201

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<210> SEQ ID NO 202

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<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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<400> SEQUENCE: 202

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22

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<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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oligonucleotide

<400> SEQUENCE: 203

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<210> SEQ ID NO 204

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<212> TYPE: RNA

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<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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oligonucleotide

<400> SEQUENCE: 204

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31

<210> SEQ ID NO 205

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<212> TYPE: RNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
Human 2'-O-methyl phosphorothioate antisense
oligonucleotide

<400> SEQUENCE: 205

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30

<210> SEQ ID NO 206

<211> LENGTH: 28

<212> TYPE: RNA

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<213> ORGANISM: Artificial Sequence
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 oligonucleotide

 <400> SEQUENCE: 206

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 oligonucleotide

 <400> SEQUENCE: 207

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 oligonucleotide

 <400> SEQUENCE: 208

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 oligonucleotide

 <400> SEQUENCE: 209

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 oligonucleotide

 <400> SEQUENCE: 210

 cuaccuuuu uuucugucug 20

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 oligonucleotide

 <400> SEQUENCE: 211

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      oligonucleotide

<400> SEQUENCE: 212

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gcugaucugc ucgcaucuug cagu                                             84

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<211> LENGTH: 44
<212> TYPE: RNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 213

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<210> SEQ ID NO 214
<211> LENGTH: 22
<212> TYPE: RNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 214

ccgugcagac ugacggucuc au                                              22

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What is claimed is:

1. An antisense oligonucleotide of 30 bases comprising the base sequence CUCCAACAUC AAGGAAGAUG GCAU-³⁵UUCUAG (SEQ ID NO: 181), in which the uracil bases are thymine bases, wherein the antisense oligonucleotide is a morpholino antisense oligonucleotide, and wherein the antisense oligonucleotide is chemically linked to a polyethylene glycol chain.⁴⁰

2. A pharmaceutical composition comprising an antisense oligonucleotide of 30 bases comprising the base sequence

CUCCAACAUC AAGGAAGAUG GCAUUCUAG (SEQ ID NO: 181), in which the uracil bases are thymine bases, wherein the antisense oligonucleotide is a morpholino antisense oligonucleotide, and wherein the antisense oligonucleotide is chemically linked to a polyethylene glycol chain, and a pharmaceutically acceptable carrier.

* * * * *

EXHIBIT F

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

| | |
|---|--|
| <p style="text-align: center;">SUPPLEMENTAL SHEET FOR TERMINAL DISCLAIMER TO OBIATE A DOUBLE PATENTING REJECTION OVER A "PRIOR" PATENT</p> | <p>Docket Number (Optional) AVN-008CN25</p> |
|---|--|

Prior patent Nos. applicable to this terminal disclaimer (referenced on first page):

7,807,816

7,960,541

8,486,907

EXHIBIT G

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



Exhibit G

United States Patent and Trademark Office

Office of the Commissioner for Patents

ANTISENSE OLIGONUCLEOTIDES FOR INDUCING EXON SKIPPING AND METHODS OF USE THEREOF

| | | | |
|----------------------------|----------------------------------|----------------------------------|---------------------------------|
| PATENT # 9018368 | APPLICATION # 14316603 | FILING DATE 06/26/2014 | ISSUE DATE 04/28/2015 |
|----------------------------|----------------------------------|----------------------------------|---------------------------------|

Payment Window Status

| | | |
|---------------------------|---------------------------|------------------------|
| WINDOW 3.5 Year | STATUS Not Open | FEES Not Due |
|---------------------------|---------------------------|------------------------|

No maintenance fees are due at this time. 3.5 year window opens on 04/28/2018.

| Window | First Day to Pay | Surcharge Starts | Last Day to Pay | Status | Fees |
|-----------|------------------|------------------|-----------------|----------|---------|
| 3.5 Year | 04/28/2018 | 10/30/2018 | 04/29/2019 | Not Open | Not Due |
| 7.5 Year | 04/28/2022 | 10/29/2022 | 04/28/2023 | Not Open | Not Due |
| 11.5 Year | 04/28/2026 | 10/29/2026 | 04/28/2027 | Not Open | Not Due |

Patent Holder Information

| | |
|----------------------|---|
| Customer # | 123147 |
| Entity Status | SMALL |
| Phone Number | 6175734700 |
| Address | Nelson Mullins Riley & Scarborough LLP/Sarepta One Post Office Square Boston, MA 02109 UNITED STATES |

EXHIBIT H

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

EXHIBIT H
CLAIMS 1 and 2 OF U.S. PATENT NO. 9,018,368
READ ON EXONDYS 51™ (eteplirsen)

| Claims | EXONDYS 51™ Properties and Description |
|--|--|
| <p>1. An antisense oligonucleotide of 30 bases comprising the base sequence CUCCAACAUC AAGGAAGAUG GCAUUUCUAG (SEQ ID NO: 181), in which the uracil bases are thymine bases, wherein the antisense oligonucleotide is a morpholino antisense oligonucleotide, and wherein the antisense oligonucleotide is chemically linked to a polyethylene glycol chain.</p> | <p>Claim 1 reads on the approved product.</p> <p>Claim 1 claims an antisense oligonucleotide that is the active ingredient of EXONDYS 51™, which is eteplirsen. Eteplirsen is an antisense oligonucleotide that contains 30 phosphorodiamidate morpholino subunits that has a sequence of bases CUCCAACAUC AAGGAAGAUG GCAUUUCUAG SEQ ID NO: 181 in which the uracil bases are thymine bases. Eteplirsen is chemically linked to a polyethylene glycol chain at the 5' end.</p> |
| <p>2. A pharmaceutical composition comprising an antisense oligonucleotide of 30 bases comprising the base sequence CUCCAACAUC AAGGAAGAUG GCAUUUCUAG (SEQ ID NO: 181), in which the uracil bases are thymine bases, wherein the antisense oligonucleotide is a morpholino antisense oligonucleotide, and wherein the antisense oligonucleotide is chemically linked to a polyethylene glycol chain, and a pharmaceutically acceptable carrier.</p> | <p>Claim 2 reads on the approved product.</p> <p>Claim 2 claims a pharmaceutical composition comprising an antisense oligonucleotide that is the active ingredient of EXONDYS 51™, which is eteplirsen. Eteplirsen is an antisense oligonucleotide that contains 30 phosphorodiamidate morpholino subunits that has a sequence of bases CUCCAACAUC AAGGAAGAUG GCAUUUCUAG SEQ ID NO: 181, in which the uracil bases are thymine bases. Eteplirsen is chemically linked to a polyethylene glycol chain at the 5' end. The approved product, EXONDYS 51™ (eteplirsen) injection is formulated with a pharmaceutically acceptable carrier.</p> |

EXHIBIT I

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



Exhibit I

August 2, 2007

Russell Katz, M.D.
Director, Division of Neurology Products
Center For Drugs Research and Evaluation
Food and Drug Administration
5901-B Amundson Rd.
Beltsville, MD 20705-1266

Re: IND 77,427 SN 000 and Fast-Track Designation Request

Dear Dr. Katz:

AVI BioPharma, Inc. (AVI), Portland, OR, is pleased to provide you with an Investigational New Drug Application for the clinical development of AVI-4658, a phosphorodiamidate Morpholino oligomer (PMO) in patients with Duchenne Muscular Dystrophy (DMD) a frame-shift mutation upstream of or just after exon 51. This mutation leads to either a profound reduction or absence of dystrophin in striated and cardiac muscles in DMD patients. Frame-shift mutations in one or more of 12 exons account for $\geq 65\%$ of the causes for this disease. Those with deletions of exons 50, 45-50, 48-50, 49-50, 52, and 52-63 could benefit from skipping exon 51, and account for the the majority (~12 to 18%) of all genetic causes in DMD. A drug able to induce skipping of exon 51 is the initial focus of AVI's experimental therapeutic program to manage this disease.

AVI-4658 has been studied in muscle explants from DMD patients and confirmed to elicit *de novo* dystrophin production in this *ex vivo* model. The ability of other similar PMOs to elicit *de novo* dystrophin production in the *mdx* mouse DMD model and golden retriever and beagle dog models of DMD by a putative exon skipping mechanism have definitively been demonstrated by multiple investigators throughout the world. Therefore, AVI-4658 is a rational target in this DMD patient subpopulation. As you know, DMD is a severely debilitating and lethal disease afflicting males: death typically occurs by the early twenties.

Background:

Duchenne Muscular Dystrophy (DMD) is the most common X-linked lethal pediatric disease worldwide. It is exclusively a human disease without an identical correlate in animals. Dystrophin is a 427 kD protein that is an essential component of the sarcolemma and pivotal for overall striated muscle cell function. A mutation is located in the gene for dystrophin, and causes either nonsense or frame shift errors, resulting in early termination of the protein production pathway. Frame-shift mutations are the predominant cause of DMD, with duplications and a premature stop codon accounting for the remainder. These errors result in early termination of dystrophin production pathway. Frame-shift mutations in one or more of 12 exons account for $\geq 65\%$ of the causes for this disease. Those with deletions of exons 50, 45-50, 48-50, 49-50, 52, and 52-63 could benefit from skipping exon 51, and account for the the majority (~ [REDACTED] %) of all genetic causes in DMD. A drug able to induce skipping exon 51 is the initial focus of AVI's experimental therapeutic program to manage this disease.

The consequence of a frame-shift mutation upstream of or just after exon 51 leads to prematurely aborted dystrophin production. This leads to either a profound reduction or absence of dystrophin in

striated and cardiac muscles in DMD patients. The lack of functional dystrophin production leads to membrane leakage and fiber damage, ultimately leading to degeneration and death of the muscle fiber. This occurs despite the fact that there is a corresponding over-production of another plasma-membrane-bound protein (viz., utrophin) that performs similar tasks as dystrophin at the neuromuscular junction. The end result of a frame-shift mutation in exon 51 in the dystrophin gene is the same as all other causes of DMD: muscle wasting, progressive debilitation and early death.

The pathogenesis and natural course of DMD is relevant in rational clinical protocol design to assess potential therapeutically valuable experimental modalities. There is continuous striated muscle injury (inclusive of cardiac muscle cells) due to a lack of functional dystrophin within the sarcolemma. This causes on-going dystrophic changes in muscle cells: fat infiltration, fibrosis and death of affected muscle cells. Once the fatty infiltration has occurred, there is presumptively permanent muscle dysfunction and ultimately muscle wasting. Many early diagnoses of DMD occur in infancy due to the observation of weak neck muscle function. Thereafter, other DMD diagnoses occur because of muscle weakness of the legs and pelvis by the age of 5 years. There is also a relative "honeymoon" period among boys with DMD between early detection of the disease and until 7 years of age due to hypertrophy of viable muscle cells and bellies. It is assumed that this apparent improvement in muscle function relates to the effect of muscle conditioning due to mechanical stress. This phenomenon wanes as greater muscle wasting occurs.

There is eventually a progressive decline in the ability to walk independently, inability to run, difficulty getting out of a chair, and reduced physical stamina. By age 10 years, DMD patients are usually unable to walk well unless supported by braces and by age 12 years most (69%) are confined to a wheelchair. Even the function of hands and fingers is eventually impaired such that the patients are unable to use a "joy" stick to maneuver their automated wheelchairs or to use other electronic devices. This is a well-recognized major quality of life problem that requires novel approaches to modulate this impairment. By or during the third decade, a fatal outcome will occur as a consequence of respiratory failure unless mechanical ventilation is utilized and/or cardiac causes. In summary, there is progressive muscle wasting in boys with DMD that is manifested over time in incremental muscle function decline. Proper design of clinical trials to provide benefit to the major subgroups of boys with DMD will entail different strategies.

These data provide the scientific basis to use a PMO to target a specific-exon in DMD patients with a specific mutation. It may provide benefit by reducing the functional and respiratory decline and early death in this patient population. Ultimately, it may be prudent and therapeutically desired to use a PMO or PMOs to target multiple exons in a single patient, based on their specific genetic deletions. This strategy would set the stage for a personalized therapeutic approach for DMD patients.

The drug, AVI-4658, is a PMO and has a sequence designed to "skip" exon 51, thus theoretically enabling dystrophin production to occur in human striated muscle in DMD patients with a corresponding exon defect. A PMO platform process, in which the arrangement and number of the subunits affixed to the backbone vary, is used to produce AVI-4658. This PMO drug class has been the subject of three successful IND applications in the USA and a series of clinical studies in the United States and EU (see Table 1, below). A total of 19 studies in over 400 subjects have been performed in both healthy and patient populations. In general, this class of drugs has been well-tolerated without evidence of clinically significant toxicity.

Table 1: Summary of PMO Drugs used in Human Clinical Studies

| IND Number | Drug Name | Indication | Sequence | Length |
|------------|-----------|---|---|--------|
| 59,255 | AVI-████ | Restenosis (target: <i>c-myc</i>) | ████████████████████ | ██ |
| 66,219 | AVI-████ | West Nile virus (encephalopathy) | ████████████████████ | ██ |
| 69,015 | AVI-████ | Hepatitis C Virus | ████████████████████ | ██ |
| N/A | AVI-████ | Metabolic Redirection (CYP3A4 or P450) | ████████████████████ | ██ |
| 77,429 | AVI-4658 | DMD (Exon 51 of dystrophin [+66+95]) | CTC GAA CAT GAA GGA AGA TGG CAT TTC TAG | 30 |

FAST-TRACK DESIGNATION REQUEST

In addition to submitting this IND, we are also seeking Fast-Track Designation of AVI-4658 to induce exon skipping patients with due to a frame shift mutation upstream of or just after exon 51 of the dystrophin gene. We believe that AVI-4658 meets the requirements for Fast-Track Designation, as indicated below.

Duchenne Muscular Dystrophy is a Serious Life-Threatening Condition

Duchenne Muscular Dystrophy (DMD) is a devastating X-linked degenerative and lethal muscle disease in males due to mutation(s) of the dystrophin gene. Dystrophin is encoded by the largest gene in the human body. It has a long half-life and is required for proper muscle function. Without dystrophin, the connections between the muscle fibers and cell membrane are not properly aligned. This leads to uncontrolled leakage at the plasma membrane, eventually causing rupture of the muscle cell. Once rupture has occurred, calcium easily enters the muscle cell resulting in contraction at the damaged sites and continued muscle fiber breakage. As this process is repeated, the muscle deteriorates, eventually becoming fibrotic and replaced by fat.

Therefore, DMD is a serious disease consistent with 21 CFR 312.81(a), in that patients with DMD experience a gradual loss of the ability to move their muscles starting early in life, ultimately resulting in early death. Patients are usually diagnosed between the ages of 2 to 5. By age 12, 69% of DMD patients solely rely on a wheel chair for mobility. There is no cure for DMD and there are no approved treatments to address the underlying cause of DMD at a genetic level. As such, care is palliative in nature, e.g., mechanical ventilation. These patients experience continued decline through their lives; death is usually due to respiratory or cardiac failure.

AVI-4658 is Intended to Treat a Serious Condition

AVI-4658 is to be used only in DMD patients with a mutation at or upstream of exon 51 of the dystrophin gene. The subunit sequence in AVI-4658 has been designed to "bridge" the missing exon (+66+95) thus enabling the mRNA to read the message, resulting in the expression of a truncated, yet functional dystrophin. Multiple animal model studies have shown that PMOs ██████████ effectively skip targeted exons and result in truncated dystrophin production. The intent of the AVI-4658 clinical development program is to demonstrate that the induction of exon 51 skipping will allow truncated, yet functional dystrophin to be produced in these DMD patients. Thus, we believe the development program meets the definition of demonstrating "an effect on a serious aspect of the condition."

AVI-4658 has the Potential to Address an Unmet Medical Need

Although a variety of disease mitigating modalities have been tried, care remains palliative in nature. There are no therapeutic approaches that address the underlying genetic defect. The current standard of care consists of prednisone (up to 40 mg/day) and physical therapy. Although

prednisone aids in addressing the inflammation associated with DMD, it does not ameliorate the continued decline of muscle activity over the course of the patient's life. As the disease progresses, supplemental oxygen and other respiratory treatments, mechanical ventilation, and cardiac therapeutics are required.

A number of approaches have attempted to address correction of the errant gene in DMD through myogenic or stem cell transplant, viral vector delivery of the gene correction, and PTC 124 which is a stop codon drug designed to address nonsense mutation in certain DMD patients. Preclinical research (see below) suggests that a PMO-based exon skipping approach to DMD has potential to address the fundamental genetic problem of this disease.

AVI-4658 has the Potential to Address DMD

As the understanding of Duchenne Muscular Dystrophy (DMD) has grown, a variety of approaches to therapeutically address the underlying genetic basis for this lethal disease have advanced with technology. This has evolved from the understanding of the dystrophin gene, the concept of exon skipping, the application of antisense compounds to effect an exon skip in cell cultures of muscle explants from DMD patients, proof of concept in animal models of DMD, and finally, to conclusive evidence of the ability of antisense compounds to lead to a robust production of a functional truncated dystrophin.

[REDACTED]

The *mdx* mouse carries a nonsense mutation in exon 23 of its dystrophin gene. The skipping of this exon restores the reading frame and is associated with functional dystrophin production. The first studies were carried out in cultured myoblasts from the *mdx* mice. Subsequently, antisense compounds were administered intramuscularly to *mdx* mice. This administration was followed by the restoration of dystrophin expression at sarcolemma. A number of different antisense chemistries, including PMOs, have been used in these studies.

More recently, studies have been performed in the *mdx* mouse following the systemic administration of antisense via the intraperitoneal or intravascular route. For example, Alter *et al.*, repeated intravenous administration of a PMO at weekly intervals in the *mdx* mouse, resulting in dystrophin expression in dystrophin-deficient skeletal muscles and improvement in muscle function without

evidence of adverse experiences. Intravenous administration of 2OMe antisense targeting the abnormal exon 23 in this *mdx* mouse model has resulted in dystrophin-deficient muscle fibers maintaining dystrophin expression for at least 2 months after the last dose of drug administration. However the longevity of *de novo* dystrophin production was significantly improved following the administration of a PMO when compared to a 2OMe-based antisense, with levels of expression that only start to decline after 14 weeks following a single intramuscular injection. A recent study reported similar results of antisense directed exon skipping to induce dystrophin expression in cultured myoblast cultures in a canine model of DMD (viz., golden retriever muscular dystrophy [GRMD]). Unlike the *mdx* mouse, which develops only limited weakness and does not die from the consequences of limited muscle weakness, GRMD dogs suffer a rapidly accelerated death due to muscle wasting with eventual fibrosis, contractures and weakness in all muscle groups. This DMD dog model is clinically more similar to DMD although there are a minimum of three defect dystrophin exons to account for this disease. In these experiments, relevant exon skips were followed by expression of dystrophin protein. Immunohistochemistry techniques were used to confirm dystrophin localized within the sarcolemma. Table 2 summarizes the results of these various published preclinical studies.

| [REDACTED] | | [REDACTED] | | [REDACTED] | | [REDACTED] | |
|------------|------------|------------|------------|----------------|----------------|------------|------------|
| mdx-Mouse | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | Systemic | X ¹ | X ² | [REDACTED] | [REDACTED] |

In summary, it has been established in primary cell cultures both from animal models and DMD patients that antisense administration is effective at promoting exon skipping, resulting in significant *de novo* dystrophin production that is correctly localized at the sarcolemma. The efficacy by local and systemic delivery has been established in the *mdx* mouse including significant functional improvement of previously diseased affected muscle groups. The evidence from the preclinical studies suggests that the CTC CAA CAT CAA GGA AGA TGG CAT TTC TAG sequence (which targets nucleotides +66+95 of the dystrophin gene and is the sequence of AVI-4658), is a good choice for effectively skipping exon 51.

Experiments performed by groups in the United Kingdom and Australia comparing the relative efficacy of the 2OMe modified phosphorothioate and PMO have been performed in cultured cells, and *in vivo* in a transgenic mouse model. The results of these experiments clearly indicate that the PMO was significantly more potent than the 2OMe modified phosphorothioate antisense chemistry.

References

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Fast-Track Designation Contact:

Janet R. Christensen, M.S.P.H., R.A.C.
Vice President, Regulatory Affairs and Quality
AVI BioPharma, Inc.
One SW Columbia Street, Ste 200
Portland, OR 97258

██████████ (office)

██████████ (fax)

██████████ (e-mail)

Should you have any questions, please contact me using the same contact information provided above for the Fast-Track Designation. Should I not be available, please contact ██████████ at the same telephone and fax numbers.

Best regards,



Janet R. Christensen, M.S.P.H., R.A.C.
Vice President, Regulatory Affairs and Quality

EXHIBIT J

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

IND 77,429

REMOVE FULL CLINICAL HOLD

AVI Biopharma
Attention: Jacqueline A. Dombroski, Ph.D.
Vice President, Regulatory Affairs and Quality Assurance
3450 Monte Villa Parkway
Bothell, WA 98021

Dear Dr. Dombroski:

Please refer to your Investigational New Drug Application (IND) submitted under section 505(i) of the Federal Food, Drug, and Cosmetic Act for AVI-4658.

We also refer to your amendment dated May 21, 2010 which provide a complete response to our January 29, 2008, letter which cited the reasons for placing this IND on clinical hold and the information needed to resolve the clinical hold issues.

We have completed the review of your submission, and have concluded that your clinical trial may be initiated.

A letter providing non-hold comments and recommendations, regarding your study protocol, will follow in a separate communication.

As sponsor of this IND, you are responsible for compliance with the Federal Food, Drug, and Cosmetic Act and the implementing regulations (Title 21 of the Code of Federal Regulations).

Those responsibilities include (1) reporting any unexpected fatal or life-threatening adverse experience associated with use of the drug by telephone or fax no later than 7 calendar days after initial receipt of the information [21 CFR 312.32(c)(2)]; (2) reporting any adverse experience associated with use of the drug that is both serious and unexpected in writing no later than 15 calendar days after initial receipt of the information [21 CFR 312.32(c)(1)]; and (3) submitting annual progress reports [21 CFR 312.33].

IND 77,429
Page 2

If you have any questions, contact Stephanie N. Keefe, Regulatory Project Manager, at (301) 796-4098.

Sincerely,

{See appended electronic signature page}

Russell Katz, MD
Director
Division of Neurology Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

Application
Type/Number

Submission
Type/Number

Submitter Name

Product Name

IND-77429

ORIG-1

AVI BIOPHARMA
INC

AVI 4658

**This is a representation of an electronic record that was signed
electronically and this page is the manifestation of the electronic
signature.**

/s/

RUSSELL G KATZ
06/25/2010

EXHIBIT K

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

Exhibit K



SAREPTA
THERAPEUTICS

26 June 2015

Billy Dunn, MD
Director, Division of Neurology Drug Products, ODE I
Food and Drug Administration
Center for Drug Evaluation and Research
Central Document Room
5901-B Ammendale Road
Beltsville, MD 20705-1266

NDA-Number: NDA 206488
Product: EXONDYS 51™ (eteplirsen) Injection
Proposed Indication: EXONDYS 51™ is an exon skipping phosphorodiamidate morpholino oligomer (PMO) which restores the mRNA reading frame to produce dystrophin protein and is indicated for the treatment of Duchenne muscular dystrophy (DMD) in patients who have a confirmed mutation of the *DMD* gene that is amenable to exon 51 skipping. This indication is approved on an intermediate endpoint demonstrating delayed disease progression as measured by the 6 minute walk test. Continued benefit will be evaluated through confirmatory trials.

NDA Sequence Number: 0001

Subject: FINAL SUBMISSION OF ROLLING NDA

For the Attention of Fannie Choy, RPh, Regulatory Project Manager

Dear Dr. Dunn,

Pursuant to 21 CFR 314.50, Sarepta Therapeutics, Inc., (Sarepta) is submitting a New Drug Application for EXONDYS 51™ (eteplirsen) Injection. The active pharmaceutical ingredient of EXONDYS 51 Injection is eteplirsen, an exon skipping phosphorodiamidate morpholino oligomer which restores the mRNA reading frame to induce the production of dystrophin protein.

An application for Priority Review Designation (Module 1.2) is included as part of this NDA submission. Investigation of eteplirsen (code name: AVI-4658) for DMD was designated as a Fast Track development program on 27 November 2007.

As agreed by Sarepta and the Division at the 19 May 2015 Type B pre-NDA meeting (Memorandum of Meeting Minutes dated 09 June 2015, Reference ID 3776938), this NDA is being submitted for rolling review; this submission provides the complete clinical content contained in Modules 2 and 5. Sequence No. 0000, dated 20 May 2015, contained the complete nonclinical and chemistry, manufacturing and controls content. This submission therefore completes the NDA.

As requested by the FDA at the meeting, we plan to amend this NDA [REDACTED]. The Division agreed that these items of data are not necessary for filing this NDA, but should be submitted as available.

The additional clinical items will be submitted on the following schedule:

Table 1: Planned Amendments to NDA 206,488

| NDA Amendment | Approximate Submission Date |
|---------------|-----------------------------|
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |

This NDA also contains reviewer's guides for the following topics:

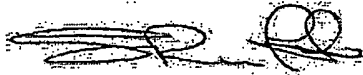
- Clinical information
- Nonclinical information
- Chemistry, manufacturing, and controls information

As discussed at the pre-NDA meeting, we also plan to hold an orientation meeting with the Agency to facilitate navigation of the NDA contents in [REDACTED].

In parallel with this eCTD submission, we are sending an external hard drive containing [REDACTED] as requested at the 18 September 2014 Type B pre-NDA meeting (Memorandum of Meeting Minutes dated 20 October 2014, Reference ID 3645985). The drive is navigable via a hyperlinked table of contents, contained on the drive in both PDF and Excel format. The drive also contains a reviewer's guide for [REDACTED].

Please do not hesitate to contact me by telephone at [REDACTED] or by electronic mail at [REDACTED] if you have any questions about this submission. If ESUB or the Division has any technical issues with this electronic submission or the external drive, please contact [REDACTED] by telephone at [REDACTED] or by electronic mail at [REDACTED].

Yours sincerely,



Shamim Ruff
Vice President, Regulatory Affairs and Quality
Sarepta Therapeutics, Inc.

Electronic Submission Specifications

This submission is compliant with FDA's Guideline for Industry: Providing Regulatory Submissions in Electronic Format - Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008).

All files were checked and verified to be free of viruses prior to transmission through the electronic submission gateway. This eCTD has been generated by Accenture, LLP (formerly Octagon Research Solutions Inc.), who has filed an acceptable eCTD pilot with the Center (Pilot Number 900777).

| | |
|------------------------------|--------------------------------------|
| Anti-Virus Program | Symantec Endpoint Protection Edition |
| Program Version | 11.0.5002.333 |
| Virus Definition Date | 06/22/2015 rev. 41 |
| Submission Size | Approx. 2375.9 MB |

The IT point of contact for this submission is:

| | |
|------------|------------|
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] |

EXHIBIT L

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA206488

PRIORITY REVIEW DESIGNATION

Sarepta Therapeutics, Inc.
Attention: Shamim Ruff, MSc.
Vice President, Regulatory Affairs and Quality
215 First Street, Suite 415
Cambridge, MA 02142

Dear Ms. Ruff:

Please refer to your New Drug Application (NDA) dated June 26, 2015, received June 26, 2015, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA), for Exondys 51 (eteplirsen) injection, 50 mg/mL.

We also refer to your submissions dated June 25, 2015, July 13, 2015, July 24, 2015, and July 31, 2015.

We have completed our filing review and have determined that your application is sufficiently complete to permit a substantive review. Therefore, this application is considered filed 60 days after the date we received your application in accordance with 21 CFR 314.101(a). The review classification for this application is **Priority**. Therefore, the user fee goal date is February 26, 2016.

We are reviewing your application according to the processes described in the Guidance for Review Staff and Industry: Good Review Management Principles and Practices for PDUFA Products. Therefore, we have established internal review timelines as described in the guidance, which includes the timeframes for FDA internal milestone meetings (e.g., filing, planning, mid-cycle, team and wrap-up meetings). Please be aware that the timelines described in the guidance are flexible and subject to change based on workload and other potential review issues (e.g., submission of amendments). We will inform you of any necessary information requests or status updates following the milestone meetings or at other times, as needed, during the process. If major deficiencies are not identified during the review, we plan to communicate proposed labeling and, if necessary, any postmarketing requirement/commitment requests by January 25, 2016.

While conducting our filing review, we identified potential review issues that were communicated to you on August 6, 2015, by email.

If you have any questions, contact Fannie Choy, Regulatory Project Manager, by phone or email at (301) 796-2899 or fannie.choy@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

Billy Dunn, M.D.
Director
Division of Neurology Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

LAURIE A KELLEY
08/20/2015

WILLIAM H Dunn
08/20/2015

EXHIBIT M

**In re patent of Stephen Donald Wilton et al.
USP 9,081,368 B2
Approved Product: EXONDYS 51™ (eteplirsen)
Application for Patent Term Extension
Customer No. 123147**

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD) | | | | |
|--|----------|--------|---|------------------------|
| Date | Doc From | Doc To | Document Description | Application Identifier |
| 18-May-2007 | AVI | FDA | Letter: Type B IND meeting request | IND 077429 |
| 31-May-2007 | FDA | AVI | Email: Pre-IND# assigned, meeting confirmation for 24-Jul-07 | IND 077429 |
| 4-Sep-2007 | AVI | FDA | RoC: Not to proceed | IND 077429 |
| 17-Sep-2007 | AVI | FDA | Email: AVI has not received follow-up letter from 4-Sep-2007 telecon | IND 077429 |
| 20-Sep-2007 | FDA | AVI | Email: FDA is actively working on follow-up letter | IND 077429 |
| 27-Nov-2007 | FDA | AVI | Letter: Fast track designation is granted | IND 077429 |
| 29-Jan-2008 | FDA | AVI | Letter: Proposed study is under full clinical hold; request for information | IND 077429 |
| 18-Apr-2008 | AVI | FDA | JRR informed Complete Response had been sent 4/17/08 | IND 077429 |
| 16-May-2008 | FDA | AVI | Email: Serial 0002 is not a complete response, letter forthcoming | IND 077429 |
| 16-May-2008 | AVI | FDA | Email: Thanks | IND 077429 |
| 22-May-2008 | FDA | AVI | Email/Letter: Serial 0002 is not a complete response; CMC and nonclinical comments | IND 077429 |
| 22-May-2008 | AVI | FDA | Email: Safety pharm draft report and DP CoA were provided in serials 0001 and 0002 respectively | IND 077429 |
| 23-May-2008 | FDA | AVI | Email: Request for clarification on CoA; agree that safety pharm draft report was provided | IND 077429 |
| 23-May-2008 | AVI | FDA | Email: Clarification on CoA | IND 077429 |
| 10-Feb-2009 | AVI | FDA | RoC: Discussion with FDA on how to make a complete response to the clinical hold; | IND 077429 |
| 26-Feb-2009 | AVI | FDA | RoC: Extra copies requested for upcoming submission | IND 077429 |
| 23-Mar-2009 | FDA | AVI | RoC: Response to serial 0006 will be verbal only; desk copies of serial 0008 and IND volume 1 requested | IND 077429 |
| 24-Mar-2009 | AVI | FDA | Email: Tcon arrangements for serial 0006 discussion and desk copies | IND 077429 |
| 24-Mar-2009 | FDA | AVI | Email: Thanks | IND 077429 |
| 24-Mar-2009 | AVI | FDA | Email: Request for clarification on whether post-meeting call will be a group discussion | IND 077429 |
| 24-Mar-2009 | FDA | AVI | Email: Telecon will be informal; AVI team should be available for questions and clarifications | IND 077429 |
| 24-Mar-2009 | AVI | FDA | Email: Dial-in information for telecon | IND 077429 |
| 25-Mar-2009 | FDA | AVI | Email: Desk copies received; Internal FDA meeting to discuss IND will be rescheduled | IND 077429 |
| 3-Apr-2009 | AVI | FDA | Email: Dial-in information for telecon | IND 077429 |
| 24-Apr-2009 | AVI | FDA | Email/RoC: Taking over as RPM of IND | IND 077429 |
| 1-May-2009 | AVI | FDA | Email: Dial-in and follow-up instructions for tcon | IND 077429 |
| 6-May-2009 | FDA | AVI | RoC: Minutes of tcon with FDA re AVI questions in serial 0006 | IND 077429 |
| 8-Jun-2009 | FDA | AVI | Email: S. Keefe taking over as RPM of IND | IND 077429 |
| 28-Mar-2010 | FDA | AVI | Fax: CD-ROM for serial 0008 is blank/unreadable | IND 077429 |
| 2-Apr-2010 | FDA | AVI | Fax: CD-ROM for serial 0009 is blank/unreadable | IND 077429 |
| 6-Apr-2010 | FDA | AVI | Email: Stephanie Keefe contact information; desk copy CD-ROM is blank/unreadable | IND 077429 |
| 6-Apr-2010 | AVI | FDA | Email: Replacement CD will be sent | IND 077429 |
| 6-Apr-2010 | FDA | AVI | Email: Replacement CD will also need to be submitted archivally to the IND, marked "Complete Response to Full Clinical Hold"; 30-day review clock will start upon receipt | IND 077429 |
| 6-Apr-2010 | AVI | FDA | Email: Request for clarification on requirement for archive CD and stopping of review clock | IND 077429 |
| 6-Apr-2010 | FDA | AVI | Email: CDs for serials 0008 and 0009 both blank, 30-day clock cannot proceed until nonclin study reports received | IND 077429 |
| 7-Apr-2010 | AVI | FDA | Email: CDs will be resubmitted | IND 077429 |
| 8-Apr-2010 | AVI | FDA | RoC: Serials 0008 and 0009 inadvertently sent on DVDs rather than CD-ROMs; AVI will resubmit readable CDs | IND 077429 |
| 25-May-2010 | FDA | AVI | Email: Request desk copies of serial 0011 | IND 077429 |
| 21-Jun-2010 | FDA | AVI | Email: Inquiry into AVI availability to discuss complete response to clinical hold | IND 077429 |
| 21-Jun-2010 | AVI | FDA | Email: Availability to discuss complete response to clinical hold | IND 077429 |
| 24-Jun-2010 | FDA | AVI | Email: Response letter being drafted | IND 077429 |
| 24-Jun-2010 | AVI | FDA | Email: Acknowledgement of status update on response letter | IND 077429 |
| 24-Jun-2010 | AVI | FDA | Email: Letter is in final stages of sign-off, PDF will be emailed | IND 077429 |
| 25-Jun-2010 | FDA | AVI | FDA letter to remove full clinical hold on IND for AVI-4658 | IND 077429 |
| 30-Jun-2010 | AVI | FDA | Email: Request for update on response letter | IND 077429 |
| 30-Jun-2010 | FDA | AVI | Email: Response letter was mailed 25-Jun-2010 | IND 077429 |
| 6-Jul-2010 | AVI | FDA | Email: Acknowledgement of receipt of remove full clinical hold letter; request update on status of "non-hold comments and recommendations" letter | IND 077429 |
| 6-Jul-2010 | FDA | AVI | Letter: Remove full clinical hold on IND | IND 077429 |
| 8-Jul-2010 | FDA | AVI | Email: Second letter with comments will be sent | IND 077429 |
| 8-Jul-2010 | AVI | FDA | Email: Request second letter as soon as possible | IND 077429 |
| 19-Jul-2010 | FDA | AVI | Email: Clinical Hold comments in final stages, will be sent ASAP | IND 077429 |
| 19-Jul-2010 | AVI | FDA | Email: Acknowledgement of response re comments | IND 077429 |
| 29-Jul-2010 | FDA | AVI | Email: Nonclinical team adding comments to letter, hope to have update by 2-Aug-2010 | IND 077429 |
| 29-Jul-2010 | AVI | FDA | Email: Acknowledgement of update | IND 077429 |
| 5-Aug-2010 | FDA | AVI | Email/Letter: Non-hold clinical and nonclinical comments | IND 077429 |
| 5-Aug-2010 | AVI | FDA | Email: Acknowledge receipt of letter; inquiry whether hard copy will be sent also | IND 077429 |
| 29-Oct-2010 | AVI | FDA | Email: Inquiry whether there are comments re new clinical protocol 4658-us-201; in the absence of comments AVI plans to start the study within the next month | IND 077429 |
| 4-Nov-2010 | AVI | FDA | Email: Electronic copy of serial 0014 as requested | IND 077429 |
| 4-Nov-2010 | FDA | AVI | Email: Comments are in process, request follow-up from AVI in 1 week | IND 077429 |
| 4-Nov-2010 | FDA | AVI | Email: Request for PDF of serial 0014 | IND 077429 |
| 4-Nov-2010 | AVI | FDA | Email: Will send PDF of serial 0014; delegated to sign forms on behalf, inquiry whether IND amendment should be filed reflecting this change | IND 077429 |
| 9-Nov-2010 | AVI | FDA | Email: is no longer with AVI, is now regulatory contact; request for update on serial 00014 | IND 077429 |
| 10-Nov-2010 | FDA | AVI | Email: Confirmation of change on sponsor authorized contact, request for amendment to IND reflecting change | IND 077429 |
| 16-Nov-2010 | AVI | FDA | Email: Follow-up on email from 29-Oct-2010 re forthcoming FDA response to serial 0014 | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 16-Nov-2010 | FDA | AVI | Email: FDA nonclinical team working on the response; request for AVI to wait for response before proceeding with study | IND 077429 |
| 29-Nov-2010 | FDA | AVI | Email: FDA will meet internally to discuss serial 0014; inquiry re AVI availability for telecon with FDA during meeting; request for contact number | IND 077429 |
| 29-Nov-2010 | AVI | FDA | Email: Contact number for [REDACTED] | IND 077429 |
| 1-Dec-2010 | FDA | AVI | Email: FDA meeting changed to today, request [REDACTED] availability | IND 077429 |
| 1-Dec-2010 | AVI | FDA | Email: [REDACTED] will be out of office, [REDACTED] will be contact for telecon | IND 077429 |
| 2-Dec-2010 | AVI | FDA | Email: Follow-up to email that [REDACTED] will be telecon contact, not [REDACTED] 4658-us-201 remains on hold until FDA comments are received | IND 077429 |
| 3-Dec-2010 | FDA | AVI | Email: FDA will issue a letter with comments, in next couple weeks; 4658-us-201 may proceed at any time | IND 077429 |
| 3-Dec-2010 | AVI | FDA | Email: Acknowledgement of FDA decision | IND 077429 |
| 29-Dec-2010 | AVI | FDA | Email: Inquiry re when comments from FDA meeting on 1-Dec-2010 can be expected | IND 077429 |
| 2-Jan-2011 | FDA | AVI | Email: [REDACTED] will follow up with review team | IND 077429 |
| 14-Jan-2011 | AVI | FDA | Email: Follow-up to voicemail inquiry re when comments from FDA meeting on 1-Dec-2010 can be expected | IND 077429 |
| 18-Jan-2011 | FDA | AVI | Email: Director was out of the office, should be reviewing response letter for finalization this week | IND 077429 |
| 21-Jan-2011 | FDA | AVI | Letter: Nonclinical and clinical comments on 4658-us-201 | IND 077429 |
| 6-Apr-2011 | AVI | FDA | Email: Inquiry re status of meeting request | IND 077429 |
| 6-Apr-2011 | FDA | AVI | Email: [REDACTED] has meeting request, will be in touch | IND 077429 |
| 8-Apr-2011 | AVI | FDA | Email: Inquiry re status of meeting request | IND 077429 |
| 8-Apr-2011 | FDA | AVI | Email: Goal date for responding to meeting request is 11-Apr-2011 | IND 077429 |
| 11-Apr-2011 | AVI | FDA | Email: Inquiry re status of meeting request | IND 077429 |
| 11-Apr-2011 | FDA | AVI | Email: Meeting request granted 14-Jun-2011; teleconference only | IND 077429 |
| 15-Apr-2011 | AVI | FDA | Email: Inquiry re status of meeting request | IND 077429 |
| 15-Apr-2011 | FDA | AVI | Email: Request for EOP1 meeting on 14-Jun-2011 granted; meeting package due 17-May-2011 | IND 077429 |
| 24-May-2011 | FDA | AVI | Email: Acknowledgement of receipt of serial 0019 | IND 077429 |
| 9-Jun-2011 | AVI | FDA | Email: Notification of submission of serial 0020; request for feedback on serial 0019 | IND 077429 |
| 12-Jun-2011 | FDA | AVI | Email: FDA's preliminary responses on EOP1 meeting package | IND 077429 |
| 14-Jun-2011 | FDA | AVI | Email: EOP1 meeting FDA attendees list | IND 077429 |
| 29-Jul-2011 | FDA | AVI | Letter: FDA 14-Jun-2011 EOP1 meeting minutes | IND 077429 |
| 7-Feb-2012 | AVI | FDA | Email: Electronic copy of serial 0027 | IND 077429 |
| 8-Feb-2012 | FDA | AVI | Email: F. Choy taking over as RPM of IND | IND 077429 |
| 29-Feb-2012 | AVI | FDA | Email: Electronic copy of serial 0029; 3674 | IND 077429 |
| 5-Mar-2012 | FDA | AVI | Email: Forwarding serial 0029 to nonclinical review team; contact information for F. Choy | IND 077429 |
| 2-Apr-2012 | AVI | FDA | Email: Request update on status of serial 0029 review | IND 077429 |
| 2-Apr-2012 | FDA | AVI | Email: Serial 0029 still under review | IND 077429 |
| 25-Apr-2012 | AVI | FDA | Email: 15-day IND safety report forthcoming; request method of transmission | IND 077429 |
| 25-Apr-2012 | FDA | AVI | Email: Paper amendment with electronic copy sent by email is fine | IND 077429 |
| 26-Apr-2012 | AVI | FDA | Email: Electronic copy of serial 0031 | IND 077429 |
| 1-May-2012 | AVI | FDA | Email: Inquiry regarding existence of formal letter assigning IND number | IND 077429 |
| 2-May-2012 | FDA | AVI | Email: No such letter issued | IND 077429 |
| 3-May-2012 | AVI | FDA | Email: Cover letter for serial 0032 | IND 077429 |
| 3-May-2012 | FDA | AVI | Email: Thanks | IND 077429 |
| 1-Jun-2012 | AVI | FDA | Email: Further follow-up on IND safety report is forthcoming; draft histology subreport for 4658-tox-001 will be submitted by [REDACTED] | IND 077429 |
| 1-Jun-2012 | FDA | AVI | Email: Request IND number for reference | IND 077429 |
| 4-Jun-2012 | AVI | FDA | Email: IND number is 077429 | IND 077429 |
| 6-Jun-2012 | AVI | FDA | Email: Serial 0033 electronic copy | IND 077429 |
| 19-Jun-2012 | AVI | FDA | Email: Request update on status of serial 0029 review | IND 077429 |
| 20-Jun-2012 | FDA | AVI | Email: PK studies under INDs are reviewed by clinical pharmacology team; Serial 0029 review is underway | IND 077429 |
| 21-Jun-2012 | AVI | FDA | Email: Thanks | IND 077429 |
| 12-Jul-2012 | SRPT | FDA | Email: Sponsor name change | IND 077429 |
| 12-Jul-2012 | FDA | SRPT | Email: Thanks | IND 077429 |
| 27-Jul-2012 | SRPT | FDA | Email: Request update on status of serial 0029 review | IND 077429 |
| 13-Aug-2012 | FDA | SRPT | Email: Inquiry on status of serial 0029 review will be forwarded to team | IND 077429 |
| 16-Aug-2012 | SRPT | FDA | Email: Electronic copy of serial 0035 | IND 077429 |
| 16-Aug-2012 | FDA | SRPT | Letter: Acknowledgement of sponsor name change | IND 077429 |
| 20-Aug-2012 | FDA | SRPT | Email: Serial 0029 still under review | IND 077429 |
| 23-Aug-2012 | SRPT | FDA | Email: Serial 0036 electronic copy | IND 077429 |
| 24-Aug-2012 | SRPT | FDA | Email: Notification of serial 0037 | IND 077429 |
| 5-Nov-2012 | SRPT | FDA | Email: Request update on status of serial 0029 review | IND 077429 |
| 6-Nov-2012 | FDA | SRPT | Email: Inquiry on status of serial 0029 review will be forwarded to team | IND 077429 |
| 13-Nov-2012 | FDA | SRPT | RoC: Inquiry re [REDACTED] | IND 077429 |
| 14-Nov-2012 | FDA | SRPT | Email: Request teleconference to discuss next steps in development of eteplirsen | IND 077429 |
| 14-Nov-2012 | SRPT | FDA | Email: Propose 1:1 call between [REDACTED] and [REDACTED] | IND 077429 |
| 15-Nov-2012 | FDA | SRPT | Email: 1:1 discussion is acceptable; available times | IND 077429 |
| 15-Nov-2012 | SRPT | FDA | Email: Request clarification on time zone | IND 077429 |
| 15-Nov-2012 | FDA | SRPT | Email: Times are EST; 2-3:30 pm time slot is available | IND 077429 |
| 15-Nov-2012 | SRPT | FDA | Email: 3:00 pm EST is acceptable; [REDACTED] | IND 077429 |
| 15-Nov-2012 | FDA | SRPT | Email: R. Katz will call now | IND 077429 |
| 15-Nov-2012 | SRPT | FDA | Email: Acknowledgement of receipt of previous email | IND 077429 |
| 15-Nov-2012 | FDA | SRPT | Email: Call between [REDACTED] and [REDACTED] to clarify comments in [REDACTED] next steps in development of eteplirsen | IND 077429 |

Exhibit M

Etepirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 28-Nov-2012 | SRPT | FDA | Email: Serial 0038 electronic copy | IND 077429 |
| 5-Dec-2012 | SRPT | FDA | Email: [REDACTED] on leave of absence; [REDACTED] is primary sponsor's authorized representative until further notice | IND 077429 |
| 6-Dec-2012 | FDA | SRPT | Email: Thanks | IND 077429 |
| 11-Dec-2012 | SRPT | FDA | Email: Serial 0039 cover letter | IND 077429 |
| 14-Dec-2012 | FDA | SRPT | Email: Request call to discuss EOP2 meeting request | IND 077429 |
| 14-Dec-2012 | FDA | SRPT | RoC: Inquiry into plans for clinical development and EOP2 meeting request | IND 077429 |
| 17-Dec-2012 | SRPT | FDA | Email: Targeting late February to early March for clinical EOP2 meeting | IND 077429 |
| 18-Dec-2012 | FDA | SRPT | Email: Thanks | IND 077429 |
| 27-Dec-2012 | SRPT | FDA | Email: Serial 0040 electronic copy | IND 077429 |
| 27-Dec-2012 | SRPT | FDA | Email: 4658-us-202 v02 protocol in serial 0038 contained errors; request corrective action | IND 077429 |
| 2-Jan-2013 | FDA | SRPT | Email: Protocol should be resubmitted with new serial number and explanation of cause of errors | IND 077429 |
| 4-Jan-2013 | FDA | SRPT | Email: Propose 13-Mar-2013 4:00-5:00 pm EST as date for EOP2 meeting | IND 077429 |
| 4-Jan-2013 | FDA | SRPT | Email: Request that the meeting package for the EOP2 meeting be submitted one week in advance of the usual deadline, i.e. sometime Feb 4-8 | IND 077429 |
| 8-Jan-2013 | FDA | SRPT | Email: Request confirmation of 13-Mar-2013 EOP2 meeting date | IND 077429 |
| 8-Jan-2013 | SRPT | FOA | Email: Confirm 13-Mar-2013 EOP2 meeting date | IND 077429 |
| 8-Jan-2013 | FDA | SRPT | Letter: Type B clinical EOP2 meeting request granted 13-Mar-2013 | IND 077429 |
| 8-Jan-2013 | SRPT | FDA | Email: Acknowledge receipt of Meeting Request Granted letter | IND 077429 |
| 9-Jan-2013 | SRPT | FDA | Email: Serial 0041 electronic copy | IND 077429 |
| 10-Jan-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 16-Jan-2013 | SRPT | FDA | Email: Inquiry if 3 CD-ROMs would be needed for the meeting briefing document or only 1 | IND 077429 |
| 17-Jan-2013 | FDA | SRPT | Email: Only 1 disc necessary | IND 077429 |
| 17-Jan-2013 | SRPT | FDA | Email: Inquiry if all CD-ROM-based submissions require only 1 disc to be submitted | IND 077429 |
| 18-Jan-2013 | FDA | SRPT | Email: Only 1 disc necessary | IND 077429 |
| 18-Jan-2013 | SRPT | FDA | Email: Serial 0042 electronic copy | IND 077429 |
| 6-Feb-2013 | SRPT | FDA | Email: Serial 0043 electronic copy; EOP2 meeting attendees and questions | IND 077429 |
| 7-Feb-2013 | FDA | SRPT | Email: Acknowledge receipt of EOP2 BD electronic copy and attendees and questions Word document | IND 077429 |
| 7-Feb-2013 | SRPT | FDA | Email: FedEx unable to deliver desk copy package on first attempt | IND 077429 |
| 7-Feb-2013 | FDA | SRPT | Email: Inform FedEx that FDA follows operation status of federal government and insist they re-deliver the desk copy package ASAP | IND 077429 |
| 8-Feb-2013 | SRPT | FDA | RoC: FedEx delivery issues | IND 077429 |
| 8-Feb-2013 | SRPT | FDA | Email: Request confirmation of desk copy address | IND 077429 |
| 8-Feb-2013 | FDA | SRPT | Email: Desk copy address is correct | IND 077429 |
| 11-Feb-2013 | SRPT | FDA | Email: FedEx tracking number | IND 077429 |
| 11-Feb-2013 | FDA | SRPT | Email: Package not yet received | IND 077429 |
| 11-Feb-2013 | SRPT | FDA | Email: Request acknowledgement of receipt of desk copy package | IND 077429 |
| 11-Feb-2013 | FDA | SRPT | Email: Confirmation of receipt | IND 077429 |
| 11-Feb-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 13-Feb-2013 | FDA | SRPT | Email: First set of comments on serial 0043 (EOP2 BD); request response by morning 18-Feb-2013 | IND 077429 |
| 13-Feb-2013 | SRPT | FDA | Email: Acknowledge receipt of comments on serial 0043 | IND 077429 |
| 15-Feb-2013 | SRPT | FDA | Email: Unable to submit response to 13-Feb-2013 comments until 19-Feb-2013 | IND 077429 |
| 18-Feb-2013 | FDA | SRPT | Email: Provide response to 13-Feb-2013 comments by 19-Feb-2013 10am EST | IND 077429 |
| 18-Feb-2013 | SRPT | FDA | Email: Response to 13-Feb-2013 comments will be emailed by 19-Feb-2013 10am EST | IND 077429 |
| 18-Feb-2013 | SRPT | FDA | Email: Serial 0044 electronic copy | IND 077429 |
| 19-Feb-2013 | SRPT | FDA | Email: Serial 0045 electronic copy | IND 077429 |
| 19-Feb-2013 | FDA | SRPT | Email: Meeting preliminary comments typically emailed 24-48 hours in advance | IND 077429 |
| 19-Feb-2013 | SRPT | FDA | Email: Serial 0046 electronic copy | IND 077429 |
| 25-Feb-2013 | SRPT | FDA | Email: New sponsor phone numbers | IND 077429 |
| 6-Mar-2013 | FDA | SRPT | Email: Comments on serial 0044 | IND 077429 |
| 6-Mar-2013 | FDA | SRPT | Email: Scheduled visit notification form | IND 077429 |
| 7-Mar-2013 | FDA | SRPT | Email: Request confirmation of receipt of 06-Mar-2013 comments | IND 077429 |
| 7-Mar-2013 | SRPT | FDA | Email: Request method of follow-up to DMEPA reviewer's comment on serial 0044 | IND 077429 |
| 7-Mar-2013 | FDA | SRPT | Email: Submit response as IND amendment | IND 077429 |
| 7-Mar-2013 | SRPT | FDA | Email: Serial 0047 electronic copy | IND 077429 |
| 8-Mar-2013 | SRPT | FDA | Email: Updated attendee list for 13-Mar-2013 meeting | IND 077429 |
| 8-Mar-2013 | FDA | SRPT | Email: Internal meeting to discuss serial 0043 rescheduled | IND 077429 |
| 11-Mar-2013 | FDA | SRPT | Email: Second set of comments on serial 0043 (EOP2 BD); request response by 12-Mar-2013 noon EST | IND 077429 |
| 11-Mar-2013 | SRPT | FDA | Email: Acknowledge receipt of 11-Mar-2013 comments on serial 0043 | IND 077429 |
| 11-Mar-2013 | FDA | SRPT | Email: Request regarding serial 0043 page 24 forthcoming | IND 077429 |
| 11-Mar-2013 | SRPT | FDA | Email: Serial 0043 page 24 request coming today? | IND 077429 |
| 11-Mar-2013 | FDA | SRPT | Email: Serial 0043 page 24 request will come today | IND 077429 |
| 11-Mar-2013 | FDA | SRPT | Email: Serial 0043 page 24 request will come tomorrow | IND 077429 |
| 12-Mar-2013 | SRPT | FDA | Email: When to expect serial 0043 page request? | IND 077429 |
| 12-Mar-2013 | FDA | SRPT | Email: Third set of comments on serial 0043 (EOP2 BD); request prompt response | IND 077429 |
| 12-Mar-2013 | FDA | SRPT | Email: Internal FDA follow-up meeting scheduled at 3pm | IND 077429 |
| 12-Mar-2013 | SRPT | FDA | Email: Acknowledge receipt of 12-Mar-2013 comments on serial 0043 | IND 077429 |
| 12-Mar-2013 | SRPT | FDA | Email: Responses to 11-Mar-2013 comments | IND 077429 |
| 12-Mar-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 12-Mar-2013 | SRPT | FDA | Email: Responses to 12-Mar-2013 comments | IND 077429 |

Exhibit M

Etepirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 12-Mar-2013 | FDA | SRPT | Email: Acknowledge receipt; plan to send preliminary comments on serial 0043 today | IND 077429 |
| 12-Mar-2013 | FDA | SRPT | Letter: Preliminary responses to 13-Mar-2013 EOP2 meeting questions (serial 0043) and list of FDA participants | IND 077429 |
| 13-Mar-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 13-Mar-2013 | SRPT | FDA | Email: 13-Mar-2013 EOP2 meeting slides | IND 077429 |
| 19-Mar-2013 | SRPT | FDA | Email: Serial 0048 electronic copy | IND 077429 |
| 22-Mar-2013 | SRPT | FDA | Email: Serial 0049 electronic copy | IND 077429 |
| 25-Mar-2013 | FDA | SRPT | Email: FDA attendees at 13-Mar-2013 EOP2 meeting | IND 077429 |
| 4-Apr-2013 | SRPT | FDA | RoC: FDA 13-Mar-2013 EOP2 meeting minutes expected around 12-Apr-2013; request general correspondence amendment with Sarepta's new address | IND 077429 |
| 4-Apr-2013 | SRPT | FDA | Email: Serial 0050 electronic copy | IND 077429 |
| 5-Apr-2013 | SRPT | FDA | Email: Study 4658-us-202 | IND 077429 |
| 11-Apr-2013 | SRPT | FDA | Email: Request data format for study 4658-us-201/202 | IND 077429 |
| 12-Apr-2013 | FDA | SRPT | Letter: Memorandum of 13-Mar-2013 Clinical EOP2 meeting minutes | IND 077429 |
| 12-Apr-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 15-Apr-2013 | SRPT | FDA | Email: Serial 0051 cover letter | IND 077429 |
| 15-Apr-2013 | FDA | SRPT | Email: Still on track to submit [redacted] by end of week? | IND 077429 |
| 16-Apr-2013 | SRPT | FDA | Email: Targeting [redacted] submission by end of April | IND 077429 |
| 17-Apr-2013 | FDA | SRPT | Email: [redacted] data should be submitted both SAS and CSV format | IND 077429 |
| 19-Apr-2013 | FDA | SRPT | Email: Fannie Choy OOD 4/22-24 and 5/1-3; Interim contact is Susan Daughtery | IND 077429 |
| 19-Apr-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 23-Apr-2013 | SRPT | FDA | Email: Serial 0052 electronic copy | IND 077429 |
| 23-Apr-2013 | FDA | SRPT | Email: Serial 0052 will be forwarded to nonclinical reviewer | IND 077429 |
| 26-Apr-2013 | FDA | SRPT | Letter: Acknowledge address change | IND 077429 |
| 29-Apr-2013 | SRPT | FDA | Email: Target date for role of [redacted] is week of May 6 | IND 077429 |
| 29-Apr-2013 | FDA | SRPT | Email: Request expected submission date for [redacted] | IND 077429 |
| 29-Apr-2013 | SRPT | FDA | Email: Will follow up on submission date for [redacted] | IND 077429 |
| 6-May-2013 | SRPT | FDA | Email: [redacted] to be submitted 15-May-2013; request follow-up EOP2 meeting by end of June | IND 077429 |
| 9-May-2013 | SRPT | FDA | RoC: EOP2 follow-up meeting aimed for mid-July | IND 077429 |
| 24-May-2013 | SRPT | FDA | Email: Serial 0053 electronic copy | IND 077429 |
| 24-May-2013 | SRPT | FDA | Email: Request confirmation of 22- or 23-Jul-2013 follow-up meeting date | IND 077429 |
| 28-May-2013 | FDA | SRPT | Email: Meeting tentatively scheduled for 23-Jul-2013 | IND 077429 |
| 29-May-2013 | SRPT | FDA | Email: Serial 0054 electronic copy | IND 077429 |
| 4-Jun-2013 | FDA | SRPT | Email: Comments on serial 0052 (4658-pkd-006 outline) | IND 077429 |
| 4-Jun-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 13-Jun-2013 | FDA | SRPT | Email: Request that briefing package desk copies for 23-Jul-2013 meeting be sent with or soon after meeting request | IND 077429 |
| 13-Jun-2013 | SRPT | FDA | Email: Meeting request will be sent next week in order to include desk copies | IND 077429 |
| 13-Jun-2013 | FDA | SRPT | Email: Send meeting request tomorrow in order to confirm date | IND 077429 |
| 13-Jun-2013 | SRPT | FDA | Email: Meeting request will be sent tomorrow | IND 077429 |
| 14-Jun-2013 | SRPT | FDA | Email: Serial 0055 electronic copy; 3 references missing from CD-ROM | IND 077429 |
| 17-Jun-2013 | SRPT | FDA | Email: Desk copies should arrive 18-Jun-2013; included CD-ROM of references is complete | IND 077429 |
| 17-Jun-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 26-Jun-2013 | FDA | SRPT | Etax: 23-Jul-2013 Type C EOP2 followup meeting request granted | IND 077429 |
| 9-Jul-2013 | SRPT | FDA | Email: Serial 0056 electronic copy | IND 077429 |
| 10-Jul-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 16-Jul-2013 | FDA | SRPT | Email: CMC EOP2 meeting request should be submitted to IND; meeting scheduling will be managed by ONDQA project manager | IND 077429 |
| 16-Jul-2013 | SRPT | FDA | Email: Request contact info of ONDQA PM | IND 077429 |
| 17-Jul-2013 | FDA | SRPT | Email: ONDQA PM Teshara Boule contact info | IND 077429 |
| 22-Jul-2013 | FDA | SRPT | Etax: 23-Jul-2013 Type C EOP2 followup meeting preliminary comments | IND 077429 |
| 22-Jul-2013 | SRPT | FDA | Email: Acknowledge receipt of preliminary comments | IND 077429 |
| 22-Jul-2013 | SRPT | FDA | Email: Meeting attendees and question in Word format | IND 077429 |
| 23-Jul-2013 | FDA | SRPT | Email: [redacted] and [redacted] removed from attendees list; request meeting slides | IND 077429 |
| 23-Jul-2013 | SRPT | FDA | Email: 23-Jul-2013 EOP2 followup meeting slides | IND 077429 |
| 24-Jul-2013 | FDA | SRPT | Email: Request copy of backup slide on study 4658-301 design | IND 077429 |
| 29-Jul-2013 | FDA | SRPT | Email: Request teleconference to discuss proposed trade name for etepirsen [redacted] | IND 077429 |
| 29-Jul-2013 | SRPT | FDA | Email: Availability for teleconference | IND 077429 |
| 30-Jul-2013 | FDA | SRPT | Email: Confirm teleconference time and date | IND 077429 |
| 31-Jul-2013 | SRPT | FDA | RoC: Trade name [redacted] not acceptable | IND 077429 |
| 6-Aug-2013 | FDA | SRPT | Email: Decision reached re regulatory options for trade name review? | IND 077429 |
| 6-Aug-2013 | SRPT | FDA | Email: Serial 0057 electronic copy | IND 077429 |
| 7-Aug-2013 | FDA | SRPT | Email: 31-Jul-2013 teleconference FDA attendees | IND 077429 |
| 12-Aug-2013 | SRPT | FDA | Email: 23-Jul-2013 EOP2 followup meeting minutes; request timing of feedback to serial 0056 | IND 077429 |
| 14-Aug-2013 | FDA | SRPT | Email: Will forward request to Quality RPM [redacted] | IND 077429 |
| 14-Aug-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 14-Aug-2013 | FDA | SRPT | Email: Will have responses to serial 0056 by end of week | IND 077429 |
| 15-Aug-2013 | FDA | SRPT | Etax: Responses to serial 0056 | IND 077429 |
| 16-Aug-2013 | FDA | SRPT | Letter: Proprietary name request unacceptable | IND 077429 |
| 16-Aug-2013 | FDA | SRPT | Email: Request Sarepta attendees at 31-Jul-2013 teleconference | IND 077429 |
| 16-Aug-2013 | SRPT | FDA | Email: 31-Jul-2013 teleconference Sarepta attendees | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 16-Aug-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 22-Aug-2013 | FDA | SRPT | Email: Propose 02-Oct-2013 for CMC EOP2 meeting (2 emails) | IND 077429 |
| 22-Aug-2013 | SRPT | FDA | Email: Propose week of 07-Oct-2013 for CMC EOP2 meeting | IND 077429 |
| 23-Aug-2013 | FDA | SRPT | Email: Available 09-Oct-2013 | IND 077429 |
| 23-Aug-2013 | SRPT | FDA | Email: Will get back ASAP | IND 077429 |
| 23-Aug-2013 | SRPT | FDA | Email: Confirm 09-Oct-2013 for CMC EOP2 meeting | IND 077429 |
| 23-Aug-2013 | FDA | SRPT | Email: Meeting request granted letter will be issued next week | IND 077429 |
| 23-Aug-2013 | SRPT | FDA | Email: Serial 0058 electronic copy | IND 077429 |
| 27-Aug-2013 | SRPT | FDA | Email: Include serial 0035 with paper desk copies? | IND 077429 |
| 27-Aug-2013 | FDA | SRPT | Email: Request serial 0035 be provided as appendix with BD desk copies | IND 077429 |
| 29-Aug-2013 | SRPT | FDA | Email: Request number of desk copies needed | IND 077429 |
| 29-Aug-2013 | FDA | SRPT | Efax: 7 desk copies of BD needed; CMC EOP2 meeting request granted | IND 077429 |
| 30-Aug-2013 | FDA | SRPT | Email: CMC EOP2 meeting tentatively rescheduled to 17-Oct-2013 | IND 077429 |
| 10-Sep-2013 | SRPT | FDA | Email: Request confirmation of 17-Oct-2013 meeting date | IND 077429 |
| 10-Sep-2013 | SRPT | FDA | Email: Serial 0059 electronic copy | IND 077429 |
| 12-Sep-2013 | FDA | SRPT | Email: Confirm 17-Oct-2013 CMC EOP2 meeting date and desk copy address for [REDACTED] | IND 077429 |
| 12-Sep-2013 | SRPT | FDA | Email: Request BD due date | IND 077429 |
| 12-Sep-2013 | FDA | SRPT | Email: BD due 17-Sep-2013 | IND 077429 |
| 13-Sep-2013 | SRPT | FDA | Email: Serial 0035, 0056, and 0060 electronic copies | IND 077429 |
| 13-Sep-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 15-Sep-2013 | FDA | SRPT | Email: Acknowledge receipt of Type C meeting request | IND 077429 |
| 25-Sep-2013 | FDA | SRPT | Email: Type C meeting tentatively scheduled 09-Dec-2013; requested planned date for enrolling patients in [REDACTED] | IND 077429 |
| 25-Sep-2013 | SRPT | FDA | Email: Accept 09-Dec-2013 Type C meeting date | IND 077429 |
| 25-Sep-2013 | FDA | SRPT | Efax: Type C meeting request granted letter | IND 077429 |
| 25-Sep-2013 | SRPT | FDA | Email: Planning to start [REDACTED] | IND 077429 |
| 27-Sep-2013 | FDA | SRPT | Email: Rescheduled Type C meeting 07-Nov-2013 | IND 077429 |
| 27-Sep-2013 | SRPT | FDA | Email: Confirm Type C meeting as teleconference and 08-Nov-2013 meeting date | IND 077429 |
| 2-Oct-2013 | FDA | SRPT | Email: Confirm 08-Nov-2013 Type C meeting date; request BD submission by 08-Oct-2013 | IND 077429 |
| 2-Oct-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 4-Oct-2013 | SRPT | FDA | Email: 17-Oct-2013 CMC EOP2 meeting attendees and questions | IND 077429 |
| 8-Oct-2013 | SRPT | FDA | Email: Updated attendees for 17-Oct-2013 CMC EOP2 meeting; request status of meeting in light of government shutdown | IND 077429 |
| 8-Oct-2013 | FDA | SRPT | Email: 17-Oct-2013 CMC EOP2 will be held as scheduled | IND 077429 |
| 8-Oct-2013 | FDA | SRPT | Email: Government shutdown auto-reply | IND 077429 |
| 8-Oct-2013 | FDA | SRPT | Email: Request electronic copy of serial 0061 | IND 077429 |
| 8-Oct-2013 | SRPT | FDA | Email: Serial 0061 electronic copy | IND 077429 |
| 8-Oct-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 8-Oct-2013 | FDA | SRPT | Email: Information request re serial 0061 | IND 077429 |
| 8-Oct-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 9-Oct-2013 | SRPT | FDA | Email: Will send 4658-us-201/202 [REDACTED] data today | IND 077429 |
| 9-Oct-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 9-Oct-2013 | SRPT | FDA | Email: Serial 0062 electronic copy | IND 077429 |
| 9-Oct-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 10-Oct-2013 | FDA | SRPT | Email: 2nd Information request re serial 0061 | IND 077429 |
| 10-Oct-2013 | SRPT | FDA | Email: Will have requested graphs today | IND 077429 |
| 10-Oct-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 10-Oct-2013 | SRPT | FDA | Email: Serial 0063 electronic copy | IND 077429 |
| 10-Oct-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 11-Oct-2013 | SRPT | FDA | Email: Updated attendees for 17-Oct-2013 CMC EOP2 meeting | IND 077429 |
| 11-Oct-2013 | FDA | SRPT | Email: LobbyGuard notification coming soon | IND 077429 |
| 14-Oct-2013 | SRPT | FDA | Email: Request FDA attendees and preliminary comments ETA for 17-Oct-2013 CMC EOP2 meeting | IND 077429 |
| 15-Oct-2013 | FDA | SRPT | Email: Tentative list of FDA attendees | IND 077429 |
| 15-Oct-2013 | FDA | SRPT | Efax: 17-Oct-2013 Type B CMC EOP2 meeting preliminary comments | IND 077429 |
| 15-Oct-2013 | FDA | SRPT | Email: LobbyGuard form | IND 077429 |
| 15-Oct-2013 | SRPT | FDA | Email: Confirm 17-Oct-2013 CMC EOP2 meeting date | IND 077429 |
| 16-Oct-2013 | FDA | SRPT | Email: Meeting agenda? | IND 077429 |
| 17-Oct-2013 | SRPT | FDA | Email: 17-Oct-2013 CMC EOP2 meeting slides v1 | IND 077429 |
| 17-Oct-2013 | SRPT | FDA | Email: 17-Oct-2013 CMC EOP2 meeting slides v2 | IND 077429 |
| 17-Oct-2013 | FDA | SRPT | Email: Request laptop to project slides | IND 077429 |
| 21-Oct-2013 | FDA | SRPT | Email: 17-Oct-2013 CMC EOP2 meeting attendees | IND 077429 |
| 28-Oct-2013 | FDA | SRPT | Letter: 17-Oct-2013 Type B CMC EOP2 meeting minutes | IND 077429 |
| 1-Nov-2013 | FDA | SRPT | Email: 08-Nov-2013 Type C teleconference extended to 4:00-5:30 pm | IND 077429 |
| 1-Nov-2013 | SRPT | FDA | Email: 08-Nov-2013 Type C teleconference attendees and questions | IND 077429 |
| 1-Nov-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 4-Nov-2013 | SRPT | FDA | Email: 17-Oct-2013 Type B CMC EOP2 meeting minutes | IND 077429 |
| 5-Nov-2013 | SRPT | FDA | Email: Additional agenda item for 08-Nov-2013 Type C teleconference: update on [REDACTED] | IND 077429 |
| 6-Nov-2013 | FDA | SRPT | Efax: 08-Nov-2013 Type C teleconference preliminary comments | IND 077429 |
| 6-Nov-2013 | FDA | SRPT | Email: [REDACTED] may attend 08-Nov-2013 teleconference | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 7-Nov-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 7-Nov-2013 | SRPT | FDA | Email: Updated attendees and dial-in | IND 077429 |
| 7-Nov-2013 | SRPT | FDA | Email: [redacted] calling into 08-Nov-2013 meeting | IND 077429 |
| 8-Nov-2013 | SRPT | FDA | Email: 8 in-person Sarepta attendees | IND 077429 |
| 8-Nov-2013 | FDA | SRPT | Email: Meeting room | IND 077429 |
| 8-Nov-2013 | FDA | SRPT | Email: Building 22 entry instructions | IND 077429 |
| 8-Nov-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 8-Nov-2013 | SRPT | FDA | RoC: 08-Nov-2013 Type C meeting transcript | IND 077429 |
| 8-Nov-2013 | FDA | SRPT | Email: Propose 15-Nov-2013 for follow-up meeting | IND 077429 |
| 8-Nov-2013 | SRPT | FDA | Email: Will confirm availability of personnel by Monday | IND 077429 |
| 11-Nov-2013 | SRPT | FDA | Email: Confirm 15-Nov-2013 follow-up meeting date | IND 077429 |
| 12-Nov-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 12-Nov-2013 | SRPT | FDA | Email: Request list of FDA attendees | IND 077429 |
| 12-Nov-2013 | FDA | SRPT | Email: Will try to send today | IND 077429 |
| 12-Nov-2013 | SRPT | FDA | Email: 15-Nov-2013 teleconference dial-in | IND 077429 |
| 13-Nov-2013 | FDA | SRPT | Email: 08-Nov-2013 Type C meeting attendees | IND 077429 |
| 15-Nov-2013 | SRPT | FDA | PPT: 15-Nov-2013 teleconference slides | IND 077429 |
| 15-Nov-2013 | SRPT | FDA | RoC: 15-Nov-2013 teleconference transcript | IND 077429 |
| 18-Nov-2013 | FDA | SRPT | Email: Information request re 4658-us-202 [redacted] Site 01 contact info | IND 077429 |
| 18-Nov-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 19-Nov-2013 | SRPT | FDA | Email: Propose dates for follow-up meeting/teleconference | IND 077429 |
| 19-Nov-2013 | FDA | SRPT | Email: Will follow up on teleconference date today; request prompt response on 18-Nov-2013 information request | IND 077429 |
| 19-Nov-2013 | SRPT | FDA | Email: Will call today | IND 077429 |
| 19-Nov-2013 | SRPT | FDA | Email: Follow-up teleconference BD will be submitted 01-Dec-2013 | IND 077429 |
| 19-Nov-2013 | SRPT | FDA | Email: Responses to 18-Nov-2013 information request | IND 077429 |
| 19-Nov-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 20-Nov-2013 | SRPT | FDA | RoC: OSI to inspect 4658-us-202 Site 01 next month; request additional info on site [redacted] | IND 077429 |
| 21-Nov-2013 | SRPT | FDA | Email: Response to information request on 4658-us-202 Site 01 [redacted] | IND 077429 |
| 21-Nov-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 22-Nov-2013 | FDA | SRPT | Email: Propose 19-Dec-2013 for follow-up meeting | IND 077429 |
| 22-Nov-2013 | SRPT | FDA | Email: Will confirm ASAP | IND 077429 |
| 22-Nov-2013 | SRPT | FDA | Email: Confirm 19-Dec-2013 Type A meeting date | IND 077429 |
| 22-Nov-2013 | SRPT | FDA | RoC: 19-Dec-2013 Type A teleconference BD logistics | IND 077429 |
| 26-Nov-2013 | SRPT | FDA | Email: Questions regarding 4658-us-202 Site 01 inspection (2 emails) | IND 077429 |
| 26-Nov-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 27-Nov-2013 | FDA | SRPT | Email: Responses to information request re 4658-us-202 Site 01 inspection | IND 077429 |
| 27-Nov-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 2-Dec-2013 | SRPT | FDA | Email: 08-Nov-2013 and 15-Nov-2013 Type C meeting minutes | IND 077429 |
| 2-Dec-2013 | SRPT | FDA | Email: Serial 0065 electronic copy | IND 077429 |
| 2-Dec-2013 | FDA | SRPT | Email: Request confirmation that 19-Dec-2013 Type A meeting will be teleconference | IND 077429 |
| 2-Dec-2013 | SRPT | FDA | Email: Thanks | IND 077429 |
| 9-Dec-2013 | FDA | SRPT | Email: Clinical information request re [redacted] data | IND 077429 |
| 9-Dec-2013 | SRPT | FDA | RoC: Clinical information requests | IND 077429 |
| 9-Dec-2013 | SRPT | FDA | Email: Will be able to send [redacted] data on 12/11 | IND 077429 |
| 11-Dec-2013 | SRPT | FDA | Email: Unmonitored [redacted] data | IND 077429 |
| 11-Dec-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 12-Dec-2013 | FDA | SRPT | Efax: 19-Dec-2013 Type A meeting granted | IND 077429 |
| 12-Dec-2013 | SRPT | FDA | Email: Request 19-Dec-2013 teleconference be arranged as face-to-face meeting | IND 077429 |
| 12-Dec-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 13-Dec-2013 | SRPT | FDA | Email: 19-Dec-2013 Type A meeting attendees | IND 077429 |
| 13-Dec-2013 | FDA | SRPT | Email: Clinical pharmacology information request | IND 077429 |
| 13-Dec-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 16-Dec-2013 | FDA | SRPT | Email: Clin pharm information request re CK data | IND 077429 |
| 16-Dec-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 16-Dec-2013 | SRPT | FDA | Email: Request ETA of 08-Nov and 15-Nov-2013 meeting minutes | IND 077429 |
| 17-Dec-2013 | FDA | SRPT | Efax: 19-Dec-2013 Type A meeting preliminary comments | IND 077429 |
| 17-Dec-2013 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 18-Dec-2013 | FDA | SRPT | Email: LobbyGuard form | IND 077429 |
| 18-Dec-2013 | FDA | SRPT | Email: LobbyGuard form | IND 077429 |
| 18-Dec-2013 | SRPT | FDA | Email: Meeting slides tomorrow | IND 077429 |
| 18-Dec-2013 | FDA | SRPT | Email: Thanks | IND 077429 |
| 19-Dec-2013 | FDA | SRPT | Email: Clinical information request re [redacted] data | IND 077429 |
| 19-Dec-2013 | SRPT | FDA | Email: Meeting slides today | IND 077429 |
| 19-Dec-2013 | SRPT | FDA | Email: 19-Dec-2013 Type A meeting slides | IND 077429 |
| 24-Dec-2013 | FDA | SRPT | Email: Clin pharm information request re CK data | IND 077429 |
| 30-Dec-2013 | FDA | SRPT | Email: Clin pharm information request re CK data (resent) | IND 077429 |
| 30-Dec-2013 | SRPT | FDA | Email: [redacted] data | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMO)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 30-Dec-2013 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 3-Jan-2014 | FDA | SRPT | Email: Clinical information request re CK data | IND 077429 |
| 3-Jan-2014 | SRPT | FDA | Email: Request 19-Dec-2013 FDA attendees; problem with LobbyGuard form | IND 077429 |
| 6-Jan-2014 | FDA | SRPT | Email: Reiteration of recent clinical and clin pharm information requests | IND 077429 |
| 6-Jan-2014 | SRPT | FDA | Email: [redacted] CK data with time of day | IND 077429 |
| 7-Jan-2014 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 8-Jan-2014 | SRPT | FDA | RoC: Sarepta will resubmit 02-Dec-2013 Type A request in order to schedule follow-up meeting; FDA requests Sarepta to provide estimated dates for responses to recent information requests ASAP | IND 077429 |
| 8-Jan-2014 | FDA | SRPT | Email: 19-Dec-2013 FDA meeting attendees | IND 077429 |
| 8-Jan-2014 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 10-Jan-2014 | SRPT | FDA | Email: Request identity of FDA scientist who offered 1:1 with [redacted] | IND 077429 |
| 13-Jan-2014 | FDA | SRPT | Email: [redacted] reminder to respond to outstanding IRs | IND 077429 |
| 13-Jan-2014 | SRPT | FDA | Email: Table of projected response dates to outstanding IRs | IND 077429 |
| 13-Jan-2014 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 14-Jan-2014 | SRPT | FDA | Email: Serial 0067 electronic copy | IND 077429 |
| 17-Jan-2014 | SRPT | FDA | Email: Serial 0072 shipment info; [redacted] timing update | IND 077429 |
| 21-Jan-2014 | SRPT | FDA | Email: Status of 08-Nov-2013, 15-Nov-2013, and 19-Dec-2013 meeting minutes? | IND 077429 |
| 24-Jan-2014 | FDA | SRPT | Email: Available for phone call today? | IND 077429 |
| 24-Jan-2014 | SRPT | FDA | Email: Request phone call topic | IND 077429 |
| 24-Jan-2014 | FDA | SRPT | Email: Topic is review of pending issues | IND 077429 |
| 24-Jan-2014 | FDA | SRPT | Email: Expecting responses to clin-pharm IRs this week | IND 077429 |
| 24-Jan-2014 | SRPT | FDA | Email/RoC: Sarepta available to meet with FDA 14 and 26-Feb-2014 | IND 077429 |
| 24-Jan-2014 | SRPT | FDA | Email: Serial 0068 cover letter | IND 077429 |
| 3-Feb-2014 | FDA | SRPT | Email: Request [redacted] | IND 077429 |
| 3-Feb-2014 | SRPT | FDA | Email: Acknowledge receipt | IND 077429 |
| 3-Feb-2014 | FDA | SRPT | Email: Request [redacted] data | IND 077429 |
| 4-Feb-2014 | FDA | SRPT | Email: Will follow up on meeting date later this week | IND 077429 |
| 4-Feb-2014 | SRPT | FDA | Email/RoC: Will provide [redacted] graphs today | IND 077429 |
| 4-Feb-2014 | SRPT | FDA | Email: [redacted] graphs in response to 03-Feb-2014 IRs | IND 077429 |
| 4-Feb-2014 | FDA | SRPT | Email: Clarification of 03-Feb-2014 [redacted] graph IRs | IND 077429 |
| 5-Feb-2014 | SRPT | FDA | Email: Revised [redacted] graphs | IND 077429 |
| 5-Feb-2014 | FDA | SRPT | Email: Acknowledge receipt | IND 077429 |
| 6-Feb-2014 | FDA | SRPT | Email: Request [redacted] and any other endpoints | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | RoC: FDA is meeting today to discuss eteplirsen and requests responses to [redacted] data and drug supply requests beforehand | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | Email/RoC: 03-Feb-2014 CMC IR response by 20-Feb-2014 | IND 077429 |
| 6-Feb-2014 | FDA | SRPT | Email: Request update on CMC IR response | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | Email: PFTs will be provided today | IND 077429 |
| 6-Feb-2014 | FDA | SRPT | Email: Request clarification on target date for 03-Feb-2014 CMC IR response | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | Email: 03-Feb-2014 CMC IR response by 10-Feb-2014 | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | Email: Response to 06-Feb-2014 clinical IR; [redacted] | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | RoC: FDA is ok with response to 03-Feb-2014 CMC IR by 10-Feb-2014 morning | IND 077429 |
| 6-Feb-2014 | SRPT | FDA | Email: Sarepta attendees to 07-Feb-2014 ad hoc teleconference | IND 077429 |
| 7-Feb-2014 | FDA | SRPT | Email: FDA attendees to 07-Feb-2014 ad hoc teleconference | IND 077429 |
| 7-Feb-2014 | SRPT | FDA | RoC: 07-Feb-2014 ad hoc teleconference transcript | IND 077429 |
| 7-Feb-2014 | SRPT | FDA | RoC: 07-Feb-2014 ad hoc teleconference sponsor minutes; FDA clin-pharm requests for study 4658-us-201/202 [redacted] data | IND 077429 |
| 7-Feb-2014 | SRPT | FDA | Email: Timetable for delivery of [redacted] data | IND 077429 |
| 7-Feb-2014 | FDA | SRPT | Email: Thanks | IND 077429 |
| 7-Feb-2014 | SRPT | FDA | Email: Propose format for [redacted] data | IND 077429 |
| 7-Feb-2014 | FDA | SRPT | Email: Contact eSUB for instructions on [redacted] data format | IND 077429 |
| 9-Feb-2014 | SRPT | FDA | Email: Propose format for [redacted] data to eSUB | IND 077429 |
| 10-Feb-2014 | FDA | SRPT | Email: Additional specification requests from A. Rao on [redacted] submission format | IND 077429 |
| 10-Feb-2014 | FDA | SRPT | Email: Request from eSUB to submit [redacted] as compiled PDFs | IND 077429 |
| 10-Feb-2014 | SRPT | FDA | Email: [redacted] order of submissions is driven by [redacted] availability | IND 077429 |
| 10-Feb-2014 | SRPT | FDA | Email: [redacted] | IND 077429 |
| 10-Feb-2014 | FDA | SRPT | Email: Request updated date for [redacted] | IND 077429 |
| 10-Feb-2014 | FDA | SRPT | Email: Request explanation of [redacted] | IND 077429 |
| 10-Feb-2014 | SRPT | FDA | Email: [redacted] should be submitted by tomorrow; explanation of [redacted] | IND 077429 |
| 11-Feb-2014 | FDA | SRPT | Email: Request response to 03-Feb-2014 CMC IR ASAP | IND 077429 |
| 11-Feb-2014 | SRPT | FDA | Email: Response to 03-Feb-2014 CMC IR | IND 077429 |
| 11-Feb-2014 | FDA | SRPT | Email: Request status of response to 03-Feb-2014 [redacted] IR | IND 077429 |
| 11-Feb-2014 | FDA | SRPT | Email: Request serial 0069 shipping info | IND 077429 |
| 11-Feb-2014 | SRPT | FDA | Email: Serial 0069 shipping info | IND 077429 |
| 12-Feb-2014 | SRPT | FDA | Email: Serial 0069 eNDA format navigation | IND 077429 |
| 12-Feb-2014 | SRPT | FDA | Email: [redacted] reviewer's guide forthcoming | IND 077429 |
| 12-Feb-2014 | SRPT | FDA | Email: [redacted] reviewer's guide | IND 077429 |
| 12-Feb-2014 | FDA | SRPT | Email: Request status of outstanding 07-Feb-2014 clin pharm IRs | IND 077429 |
| 12-Feb-2014 | SRPT | FDA | Email: Timing of [redacted] | IND 077429 |
| 12-Feb-2014 | SRPT | FDA | Email: 03-Feb-2014 [redacted] response | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 12-Feb-2014 | FDA | SRPT | Email: Request tracking info for remainder of IR responses | IND 077429 |
| 13-Feb-2014 | SRPT | FDA | Email: submission updated target dates | IND 077429 |
| 14-Feb-2014 | FDA | SRPT | Email: Request status of submission | IND 077429 |
| 14-Feb-2014 | SRPT | FDA | Email: submission timing and submission challenges | IND 077429 |
| 14-Feb-2014 | FDA | SRPT | Email: Delays in submissions will impact timing of follow-up meeting | IND 077429 |
| 19-Feb-2014 | FDA | SRPT | Email: Acknowledge receipt of serial 0072 | IND 077429 |
| 20-Feb-2014 | FDA | SRPT | Email: Request status of data etc. | IND 077429 |
| 20-Feb-2014 | SRPT | FDA | Email: Serials 0073 and 0074 status updates | IND 077429 |
| 20-Feb-2014 | SRPT | FDA | Email: Serials 0073 and 0074 going out today | IND 077429 |
| 20-Feb-2014 | FDA | SRPT | Email: Thanks | IND 077429 |
| 20-Feb-2014 | SRPT | FDA | Email: Serials 0073 and 0074 cover letters and shipping info | IND 077429 |
| 25-Feb-2014 | SRPT | FDA | RoC: Follow-up meeting won't be held 26-Feb-2014; meeting is likely to be held by second week of March | IND 077429 |
| 27-Feb-2014 | SRPT | FDA | Email: Available dates in March | IND 077429 |
| 27-Feb-2014 | FDA | SRPT | Email: Will follow up by 07-March-2014 | IND 077429 |
| 3-Mar-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 3-Mar-2014 | SRPT | FDA | Email: new contact info | IND 077429 |
| 10-Mar-2014 | FDA | SRPT | fd Email: confirm 19mar14 mtg date | IND 077429 |
| 10-Mar-2014 | SRPT | FDA | Email: 19mar14 mtg attendees | IND 077429 |
| 10-Mar-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 11-Mar-2014 | SRPT | FDA | Email: ecld conversion | IND 077429 |
| 12-Mar-2014 | FDA | SRPT | Email: ackn ecld conversion | IND 077429 |
| 13-Mar-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 13-Mar-2014 | SRPT | FDA | Email: updated 19mar14 mtg attendees | IND 077429 |
| 18-Mar-2014 | FDA | SRPT | Email: 19mar14 mtg attendees | IND 077429 |
| 18-Mar-2014 | SRPT | FDA | Email: inq attendees | IND 077429 |
| 19-Mar-2014 | SRPT | FDA | roc 19mar14 brainstorming mtg transcript | IND 077429 |
| 22-Mar-2014 | SRPT | FDA | Email: eteplirsen development proposal | IND 077429 |
| 24-Mar-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 24-Mar-2014 | FDA | SRPT | Email: lobbyguard form 1 | IND 077429 |
| 24-Mar-2014 | FDA | SRPT | Email: lobbyguard form 2 | IND 077429 |
| 27-Mar-2014 | FDA | SRPT | Letter nch inspection report | IND 077429 |
| 4-Apr-2014 | FDA | SRPT | Email: thanks | IND 077429 |
| 4-Apr-2014 | SRPT | FDA | Email: natural history study authors contact info | IND 077429 |
| 10-Apr-2014 | FDA | SRPT | Email: propose round table logistics tcon | IND 077429 |
| 10-Apr-2014 | SRPT | FDA | Email: thanks | IND 077429 |
| 11-Apr-2014 | SRPT | FDA | Email: 23apr14 tcon attendees | IND 077429 |
| 15-Apr-2014 | FDA | SRPT | eFax guidance letter | IND 077429 |
| 15-Apr-2014 | FDA | SRPT | Email: 23apr14 tcon attendees | IND 077429 |
| 15-Apr-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 15-Apr-2014 | SRPT | FDA | Email: diet in | IND 077429 |
| 17-Apr-2014 | SRPT | FDA | RoC nda timing and content tcon | IND 077429 |
| 23-Apr-2014 | SRPT | FDA | RoC: 23apr14 nch visit tcon minutes | IND 077429 |
| 23-Apr-2014 | SRPT | FDA | RoC: 23apr14 nch visit tcon transcript | IND 077429 |
| 30-Apr-2014 | SRPT | FDA | Email: inq status of seq 0077 review | IND 077429 |
| 1-May-2014 | FDA | SRPT | Email: feedback by end of may | IND 077429 |
| 5-May-2014 | SRPT | FDA | RoC: nch inspection dates etc | IND 077429 |
| 6-May-2014 | SRPT | FDA | Email: nch inspection dates | IND 077429 |
| 12-May-2014 | FDA | SRPT | Email: inq time to review 1 pt data set | IND 077429 |
| 12-May-2014 | FDA | SRPT | Email: thanks | IND 077429 |
| 12-May-2014 | SRPT | FDA | Email: 1 full day needed | IND 077429 |
| 12-May-2014 | SRPT | FDA | Email: inq nch visit date | IND 077429 |
| 27-May-2014 | FDA | SRPT | eFax cmc comments on seq 0077 | IND 077429 |
| 27-May-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 27-May-2014 | SRPT | FDA | Email: ind 118088 cross referencing | IND 077429 |
| 27-May-2014 | SRPT | FDA | Email: inq cmc response to seq 0077 status | IND 077429 |
| 27-May-2014 | SRPT | FDA | RoC: nch site visit on 29may14 | IND 077429 |
| 29-May-2014 | FDA | SRPT | Email: inter ind linking is acceptable | IND 077429 |
| 29-May-2014 | SRPT | FDA | Email: thanks | IND 077429 |
| 2-Jun-2014 | FDA | SRPT | Email: thanks | IND 077429 |
| 2-Jun-2014 | SRPT | FDA | Email: clinical mtg rqt soon | IND 077429 |
| 2-Jun-2014 | SRPT | FDA | Email: cmc mtg rqt this week | IND 077429 |
| 2-Jun-2014 | SRPT | FDA | Email: response to 29may14 clin pharm questions | IND 077429 |
| 3-Jun-2014 | FDA | SRPT | Email: no comments on 4658 301 a1 | IND 077429 |
| 3-Jun-2014 | FDA | SRPT | Email: mtg topics | IND 077429 |
| 3-Jun-2014 | SRPT | FDA | Email: thanks | IND 077429 |
| 11-Jun-2014 | SRPT | FDA | Email: inq seq 0083 response | IND 077429 |
| 11-Jun-2014 | SRPT | FDA | Email: inq seq 0084 response | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 12-Jun-2014 | FDA | SRPT | Email: will get back next week | IND 077429 |
| 17-Jun-2014 | FDA | SRPT | Email: rqst update on [redacted] mtg rqst | IND 077429 |
| 18-Jun-2014 | SRPT | FDA | Email: [redacted] mtg rqst this week | IND 077429 |
| 19-Jun-2014 | FDA | SRPT | Email: no comments on 4658 us 202 06 | IND 077429 |
| 19-Jun-2014 | SRPT | FDA | Email: thanks | IND 077429 |
| 23-Jun-2014 | FDA | SRPT | Email: seq 0089 rcvd | IND 077429 |
| 23-Jun-2014 | SRPT | FDA | Email: clinical [redacted] mtg rqst today | IND 077429 |
| 24-Jun-2014 | FDA | SRPT | Email: propose 03sep14 cmc [redacted] mtg date | IND 077429 |
| 25-Jun-2014 | FDA | SRPT | Email: mtg granted letter next week | IND 077429 |
| 25-Jun-2014 | SRPT | FDA | Email: confirm cmc [redacted] mtg date | IND 077429 |
| 2-Jul-2014 | FDA | SRPT | Email: propose clinical [redacted] mtg date | IND 077429 |
| 2-Jul-2014 | SRPT | FDA | Email: 18sep14 is acceptable | IND 077429 |
| 2-Jul-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 7-Jul-2014 | FDA | SRPT | eFax clinical [redacted] mtg rqst granted and [redacted] mtg instructions | IND 077429 |
| 7-Jul-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 7-Jul-2014 | SRPT | FDA | Email: rqst cmc [redacted] mtg granted letter | IND 077429 |
| 10-Jul-2014 | FDA | SRPT | Email: rqst [redacted] data and analyses | IND 077429 |
| 10-Jul-2014 | SRPT | FDA | Email: [redacted] | IND 077429 |
| 14-Jul-2014 | FDA | SRPT | eFax 03sep14 cmc [redacted] mtg granted | IND 077429 |
| 14-Jul-2014 | SRPT | FDA | Email: rqst cmc [redacted] mtg granted letter | IND 077429 |
| 17-Jul-2014 | FDA | SRPT | Email: rqst 4658 tox 001 complement activation summary | IND 077429 |
| 17-Jul-2014 | FDA | SRPT | Email: rqst update on [redacted] data submission | IND 077429 |
| 17-Jul-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 17-Jul-2014 | SRPT | FDA | Email: will send [redacted] shortly | IND 077429 |
| 21-Jul-2014 | FDA | SRPT | Email: finalizing comments on [redacted] | IND 077429 |
| 22-Jul-2014 | FDA | SRPT | Email: rqst complement summar ascp | IND 077429 |
| 22-Jul-2014 | FDA | SRPT | Email: rqst update on 17jul14 pharm tox ir | IND 077429 |
| 22-Jul-2014 | SRPT | FDA | Email: [redacted] this week | IND 077429 |
| 22-Jul-2014 | SRPT | FDA | Email: pharm tox response this week | IND 077429 |
| 25-Jul-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 25-Jul-2014 | SRPT | FDA | Email: complement activation summary | IND 077429 |
| 29-Jul-2014 | FDA | SRPT | eFax clin pharm info rqsts [redacted] | IND 077429 |
| 31-Jul-2014 | FDA | SRPT | Email: rqst conf rcpt | IND 077429 |
| 31-Jul-2014 | FDA | SRPT | Email: thanks | IND 077429 |
| 31-Jul-2014 | SRPT | FDA | Email: [redacted] next week | IND 077429 |
| 4-Aug-2014 | SRPT | FDA | Email: [redacted] request | IND 077429 |
| 7-Aug-2014 | SRPT | FDA | Email: [redacted] and [redacted] on tuesday | IND 077429 |
| 21-Aug-2014 | FDA | SRPT | eFax 03sep14 cmc [redacted] mtg preliminary comments | IND 077429 |
| 23-Aug-2014 | SRPT | FDA | Email: [redacted] inspection rqst | IND 077429 |
| 29-Aug-2014 | SRPT | FDA | Email: nda draft toc | IND 077429 |
| 3-Sep-2014 | FDA | SRPT | Email: rqst 29may14 rfi response timelines | IND 077429 |
| 4-Sep-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 4-Sep-2014 | SRPT | FDA | Email: initial response to 29jul14 clin pharm rfi | IND 077429 |
| 5-Sep-2014 | SRPT | FDA | Email: seq 0098 cover letter | IND 077429 |
| 8-Sep-2014 | FDA | SRPT | Letter 03sep14 cmc [redacted] mtg minutes | IND 077429 |
| 15-Sep-2014 | FDA | SRPT | Email: lobbyguard form | IND 077429 |
| 15-Sep-2014 | SRPT | FDA | Email: 18sep14 mtg attendees and questions | IND 077429 |
| 17-Sep-2014 | FDA | SRPT | eFax 18sep14 [redacted] mtg preliminary comments | IND 077429 |
| 17-Sep-2014 | SRPT | FDA | Email: updated 18sep14 mtg attendees and questions | IND 077429 |
| 18-Sep-2014 | FDA | SRPT | Email: [redacted] and [redacted] | IND 077429 |
| 18-Sep-2014 | SRPT | FDA | Email: mtg slides | IND 077429 |
| 18-Sep-2014 | SRPT | FDA | RoC: 18sep14 mtg transcript | IND 077429 |
| 18-Sep-2014 | SRPT | FDA | RoC: 18sep14 type b [redacted] mtg minutes | IND 077429 |
| 19-Sep-2014 | SRPT | FDA | Email: rqst 18sep14 mtg attendees | IND 077429 |
| 23-Sep-2014 | FDA | SRPT | Email: clinical and clin pharm rfi | IND 077429 |
| 23-Sep-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 24-Sep-2014 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 24-Sep-2014 | SRPT | FDA | Email: cmc [redacted] minutes | IND 077429 |
| 24-Sep-2014 | SRPT | FDA | Email: response to 23sep14 [redacted] | IND 077429 |
| 26-Sep-2014 | SRPT | FDA | Email: clinical rfi response update | IND 077429 |
| 29-Sep-2014 | FDA | SRPT | Email: rqst outstanding responses by tomorrow | IND 077429 |
| 29-Sep-2014 | SRPT | FDA | Email: partial response to 23sep14 [redacted] | IND 077429 |
| 29-Sep-2014 | SRPT | FDA | Email: [redacted] question for dr rao | IND 077429 |
| 30-Sep-2014 | SRPT | FDA | Email: 2nd partial response to 23sep14 [redacted] | IND 077429 |
| 30-Sep-2014 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 1-Oct-2014 | FDA | SRPT | Email: clin pharm rfis | IND 077429 |
| 1-Oct-2014 | FDA | SRPT | Email: cmc [redacted] minutes revision will be accepted | IND 077429 |

Exhibit M

Eleplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 1-Oct-2014 | SRPT | FDA | Email: 18sep14 [redacted] mtg minutes | IND 077429 |
| 1-Oct-2014 | SRPT | FDA | Email: ackn rpt | IND 077429 |
| 2-Oct-2014 | FDA | SRPT | Email: agree on [redacted] | IND 077429 |
| 2-Oct-2014 | SRPT | FDA | Email: inq intent of [redacted] | IND 077429 |
| 2-Oct-2014 | SRPT | FDA | Email: one [redacted] per Email: | IND 077429 |
| 2-Oct-2014 | SRPT | FDA | Email: rqst clarification on [redacted] | IND 077429 |
| 3-Oct-2014 | FDA | SRPT | Email: rqst cd and desk copy | IND 077429 |
| 3-Oct-2014 | FDA | SRPT | Email: rqst [redacted] today | IND 077429 |
| 3-Oct-2014 | FDA | SRPT | Email: security policy blocks ftp links | IND 077429 |
| 3-Oct-2014 | SRPT | FDA | Email: images sent and tx assignment key | IND 077429 |
| 3-Oct-2014 | SRPT | FDA | Email: [redacted] to ind monday | IND 077429 |
| 3-Oct-2014 | SRPT | FDA | Email: intralinks | IND 077429 |
| 3-Oct-2014 | SRPT | FDA | Email: partial response to 01oct14 clin pharm rfs | IND 077429 |
| 3-Oct-2014 | SRPT | FDA | ReC: [redacted] | IND 077429 |
| 6-Oct-2014 | FDA | SRPT | Email: rqst clin pharm responses by tomorrow | IND 077429 |
| 6-Oct-2014 | FDA | SRPT | Email: seq 0099 not yet rcvd | IND 077429 |
| 6-Oct-2014 | SRPT | FDA | Email: seq 0099 being compiled | IND 077429 |
| 6-Oct-2014 | SRPT | FDA | Email: seq 0099 in esg | IND 077429 |
| 7-Oct-2014 | SRPT | FDA | Email: partial responses to 01oct14 clin pharm rfs | IND 077429 |
| 8-Oct-2014 | FDA | SRPT | Email: rqst update on rfi responses | IND 077429 |
| 8-Oct-2014 | SRPT | FDA | Email: responses later today | IND 077429 |
| 10-Oct-2014 | FDA | SRPT | Email: call will end at 10 | IND 077429 |
| 10-Oct-2014 | FDA | SRPT | Email: clin pharm rfs | IND 077429 |
| 10-Oct-2014 | FDA | SRPT | Email: propose dr rao tcon date | IND 077429 |
| 10-Oct-2014 | SRPT | FDA | Email: ackn rpt | IND 077429 |
| 10-Oct-2014 | SRPT | FDA | Email: confirm 15oct14 tcon | IND 077429 |
| 13-Oct-2014 | SRPT | FDA | Email: confirming responses with nch | IND 077429 |
| 15-Oct-2014 | SRPT | FDA | ReC: [redacted] protocol tcon transcript | IND 077429 |
| 16-Oct-2014 | SRPT | FDA | Email: sample [redacted] | IND 077429 |
| 20-Oct-2014 | FDA | SRPT | eFax 18sep14 [redacted] mtg minutes | IND 077429 |
| 20-Oct-2014 | FOA | SRPT | Email: ackn rpt | IND 077429 |
| 20-Oct-2014 | SRPT | FOA | Email: inq 18sep14 [redacted] mtg minutes | IND 077429 |
| 20-Oct-2014 | SRPT | FDA | Email: [redacted] protocol | IND 077429 |
| 22-Oct-2014 | SRPT | FDA | Email: [redacted] protocol corrected | IND 077429 |
| 24-Oct-2014 | FDA | SRPT | Email: protocol update monday | IND 077429 |
| 24-Oct-2014 | FDA | SRPT | Email: rescare protocol update later today | IND 077429 |
| 24-Oct-2014 | SRPT | FDA | Email: [redacted] protocol review | IND 077429 |
| 27-Oct-2014 | FDA | SRPT | Email: response tomorrow | IND 077429 |
| 27-Oct-2014 | SRPT | FDA | Email: [redacted] ready | IND 077429 |
| 27-Oct-2014 | SRPT | FDA | Email: thanks | IND 077429 |
| 28-Oct-2014 | FDA | SRPT | Email: comments on [redacted] protocol | IND 077429 |
| 28-Oct-2014 | SRPT | FDA | Email: ackn rpt | IND 077429 |
| 5-Nov-2014 | SRPT | FDA | Email: [redacted] mtg jan2015 | IND 077429 |
| 6-Nov-2014 | FDA | SRPT | Email: propose 28feb14 mtg date | IND 077429 |
| 6-Nov-2014 | SRPT | FDA | Email: will check date | IND 077429 |
| 7-Nov-2014 | FDA | SRPT | Email: [redacted] mtg rqst not yet reviewed | IND 077429 |
| 7-Nov-2014 | FDA | SRPT | Email: closed 11nov14 | IND 077429 |
| 7-Nov-2014 | SRPT | FDA | Email: revised [redacted] protocol next week | IND 077429 |
| 9-Nov-2014 | FDA | SRPT | Letter proprietary name conditional approval | IND 077429 |
| 12-Nov-2014 | FDA | SRPT | Email: rqst redline version | IND 077429 |
| 12-Nov-2014 | SRPT | FDA | Email: [redacted] protocol redline | IND 077429 |
| 12-Nov-2014 | SRPT | FDA | Email: revised [redacted] protocol | IND 077429 |
| 14-Nov-2014 | FDA | SRPT | Email: [redacted] may proceed and data quality rfs | IND 077429 |
| 14-Nov-2014 | FDA | SRPT | Email: team is reviewing [redacted] protocol | IND 077429 |
| 14-Nov-2014 | SRPT | FDA | Email: inq more changes to [redacted] protocol | IND 077429 |
| 17-Nov-2014 | SRPT | FDA | Email: ackn rpt | IND 077429 |
| 24-Nov-2014 | FDA | SRPT | Email: [redacted] protocol siats comments | IND 077429 |
| 15-Dec-2014 | FDA | SRPT | Email: rqst update on [redacted] | IND 077429 |
| 16-Dec-2014 | FDA | SRPT | Email: thanks | IND 077429 |
| 16-Dec-2014 | SRPT | FDA | Email: will update in a few days | IND 077429 |
| 17-Dec-2014 | SRPT | FDA | Email: responses to 14nov14 and 24nov14 clin pharm rfs | IND 077429 |
| 18-Dec-2014 | SRPT | FDA | Email: [redacted] update | IND 077429 |
| 22-Dec-2014 | FDA | SRPT | Email: ackn rpt | IND 077429 |
| 22-Dec-2014 | SRPT | FDA | Email: [redacted] protocol | IND 077429 |
| 23-Dec-2014 | FDA | SRPT | Email: comments on 18dec14 [redacted] response | IND 077429 |
| 23-Dec-2014 | SRPT | FDA | Email: ackn rpt | IND 077429 |
| 6-Jan-2015 | FDA | SRPT | Email: feedback on [redacted] protocol planned by friday | IND 077429 |

Exhibit M

Etepirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 6-Jan-2015 | FDA | SRPT | Email: fwded tcon rqst to team | IND 077429 |
| 6-Jan-2015 | FDA | SRPT | Email: Inq purpose of [redacted] protocol | IND 077429 |
| 6-Jan-2015 | SRPT | FDA | Email: [redacted] tcon rqst | IND 077429 |
| 6-Jan-2015 | SRPT | FDA | Email: [redacted] protocol for [redacted] | IND 077429 |
| 9-Jan-2015 | FDA | SRPT | Email: [redacted] feedback forthcoming | IND 077429 |
| 9-Jan-2015 | SRPT | FDA | Email: Inq comments by monday | IND 077429 |
| 14-Jan-2015 | SRPT | FDA | Email: serial 0067 electronic copy | IND 077429 |
| 14-Jan-2015 | SRPT | FDA | Email: additional [redacted] protocols forthcoming | IND 077429 |
| 16-Jan-2015 | FDA | SRPT | Email: comments on [redacted] protocol | IND 077429 |
| 16-Jan-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 22-Jan-2015 | SRPT | FDA | Email: Inq [redacted] tcon | IND 077429 |
| 23-Jan-2015 | FDA | SRPT | Email: will update on [redacted] tcon next week | IND 077429 |
| 25-Jan-2015 | FDA | SRPT | Email: rqst [redacted] technical contact | IND 077429 |
| 26-Jan-2015 | FDA | SRPT | Email: thanks | IND 077429 |
| 26-Jan-2015 | SRPT | FDA | Email: [redacted] technical contact is [redacted] | IND 077429 |
| 28-Jan-2015 | SRPT | FDA | Email: [redacted] protocols | IND 077429 |
| 29-Jan-2015 | FDA | SRPT | Email: [redacted] protocols fwded | IND 077429 |
| 29-Jan-2015 | FDA | SRPT | Email: [redacted] rfi | IND 077429 |
| 29-Jan-2015 | FDA | SRPT | Email: rqst [redacted] response by monday | IND 077429 |
| 10-Feb-2015 | FDA | SRPT | Email: comments on [redacted] protocols | IND 077429 |
| 10-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 10-Feb-2015 | SRPT | FDA | Email: response to 29Jan15 [redacted] questions | IND 077429 |
| 12-Feb-2015 | FDA | SRPT | Email: Inq [redacted] | IND 077429 |
| 12-Feb-2015 | FDA | SRPT | Email: rqst [redacted] results | IND 077429 |
| 12-Feb-2015 | FDA | SRPT | Email: rqst [redacted] summary table | IND 077429 |
| 12-Feb-2015 | SRPT | FDA | Email: [redacted] listing | IND 077429 |
| 12-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 13-Feb-2015 | FDA | SRPT | Email: rqst 4658 us 202 week [redacted] | IND 077429 |
| 13-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 13-Feb-2015 | SRPT | FDA | ReC: rqst [redacted] tcon | IND 077429 |
| 16-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 16-Feb-2015 | SRPT | FDA | Email: responses to 12Feb15 [redacted] rfi | IND 077429 |
| 18-Feb-2015 | FDA | SRPT | Email: rqst update on avi 4658 [redacted] protocols | IND 077429 |
| 18-Feb-2015 | SRPT | FDA | Email: Inq feedback on [redacted] protocol v2 | IND 077429 |
| 19-Feb-2015 | FDA | SRPT | Email: feedback on [redacted] protocol forthcoming | IND 077429 |
| 20-Feb-2015 | SRPT | FDA | Email: avi 4658 [redacted] response forthcoming | IND 077429 |
| 23-Feb-2015 | SRPT | FDA | Email: [redacted] data tomorrow | IND 077429 |
| 24-Feb-2015 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 24-Feb-2015 | SRPT | FDA | Email: Inq [redacted] | IND 077429 |
| 25-Feb-2015 | FDA | SRPT | Email: [redacted] rationale | IND 077429 |
| 25-Feb-2015 | FDA | SRPT | Email: disregard [redacted] question | IND 077429 |
| 25-Feb-2015 | FDA | SRPT | Email: rqst clarification on [redacted] | IND 077429 |
| 25-Feb-2015 | FDA | SRPT | Email: rqst clarification on [redacted] | IND 077429 |
| 25-Feb-2015 | SRPT | FDA | Email: [redacted] | IND 077429 |
| 25-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 25-Feb-2015 | SRPT | FDA | Email: rqst [redacted] mtg | IND 077429 |
| 25-Feb-2015 | SRPT | FDA | Email: updated timing of avi 4658 [redacted] forthcoming | IND 077429 |
| 26-Feb-2015 | FDA | SRPT | Email: [redacted] protocol v2 comments | IND 077429 |
| 26-Feb-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 4-Mar-2015 | FDA | SRPT | Email: propose 19May15 [redacted] mtg date | IND 077429 |
| 4-Mar-2015 | SRPT | FDA | Email: [redacted] mtg rqst forthcoming | IND 077429 |
| 5-Mar-2015 | SRPT | FDA | Email: [redacted] control question | IND 077429 |
| 6-Mar-2015 | FDA | SRPT | Email: [redacted] question not clear | IND 077429 |
| 6-Mar-2015 | SRPT | FDA | Email: Inq response to avi 4658 [redacted] | IND 077429 |
| 6-Mar-2015 | SRPT | FDA | Email: mtg rqst will be submitted next week | IND 077429 |
| 6-Mar-2015 | SRPT | FDA | Email: [redacted] mtg rqst | IND 077429 |
| 9-Mar-2015 | FDA | SRPT | Email: no response to [redacted] | IND 077429 |
| 9-Mar-2015 | SRPT | FDA | Email: thanks | IND 077429 |
| 10-Mar-2015 | SRPT | FDA | Email: responses to [redacted] and mtg rqst | IND 077429 |
| 16-Mar-2015 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 16-Mar-2015 | FDA | SRPT | Email: [redacted] mtg 19May15 | IND 077429 |
| 16-Mar-2015 | SRPT | FDA | Email: [redacted] clarification | IND 077429 |
| 16-Mar-2015 | SRPT | FDA | Email: confirm [redacted] mtg date | IND 077429 |
| 16-Mar-2015 | SRPT | FDA | Email: Inq [redacted] protocols rcvd | IND 077429 |
| 16-Mar-2015 | SRPT | FDA | Email: seq 0116 by tomorrow | IND 077429 |
| 20-Mar-2015 | FDA | SRPT | eFax 19May15 [redacted] mtg granted | IND 077429 |
| 20-Mar-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |

Exhibit M

Etepirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 23-Mar-2015 | FDA | SRPT | Email: investigating now | IND 077429 |
| 23-Mar-2015 | SRPT | FDA | Email: inq update on protocols | IND 077429 |
| 23-Mar-2015 | SRPT | FDA | Email: inq update on protocols 2 | IND 077429 |
| 26-Mar-2015 | FDA | SRPT | Email: protocols response by next week | IND 077429 |
| 30-Mar-2015 | FDA | SRPT | Email: may proceed | IND 077429 |
| 30-Mar-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 2-Apr-2015 | SRPT | FDA | Email: proposal and 804 protocol | IND 077429 |
| 2-Apr-2015 | SRPT | FDA | RoC: bd and 804 protocol | IND 077429 |
| 3-Apr-2015 | FDA | SRPT | Email: thanks | IND 077429 |
| 10-Apr-2015 | FDA | SRPT | Email: thanks | IND 077429 |
| 10-Apr-2015 | SRPT | FDA | Email: mtg bd in esg | IND 077429 |
| 4-May-2015 | SRPT | FDA | Email: rqst rolling review | IND 077429 |
| 8-May-2015 | SRPT | FDA | Email: inq feedback on | IND 077429 |
| 13-May-2015 | FDA | SRPT | Email: feedback in preliminary comments | IND 077429 |
| 14-May-2015 | FDA | SRPT | Letter ackn rolling review rqst | IND 077429 |
| 15-May-2015 | FDA | SRPT | eFax 19may15 mtg preliminary comments | IND 077429 |
| 15-May-2015 | FDA | SRPT | Email: inq same info in slides | IND 077429 |
| 15-May-2015 | FDA | SRPT | Email: lobbyguard form | IND 077429 |
| 15-May-2015 | SRPT | FDA | Email: slides 1 | IND 077429 |
| 15-May-2015 | SRPT | FDA | Email: slides 2 | IND 077429 |
| 15-May-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 15-May-2015 | SRPT | FDA | Email: slide content identical | IND 077429 |
| 18-May-2015 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 18-May-2015 | FDA | SRPT | Email: lobbyguard form | IND 077429 |
| 18-May-2015 | SRPT | FDA | Email: mtg slides today | IND 077429 |
| 18-May-2015 | SRPT | FDA | Email: mtg slides v1 and attendees | IND 077429 |
| 19-May-2015 | FDA | SRPT | Email: inq same slides different order | IND 077429 |
| 19-May-2015 | SRPT | FDA | Email: mtg slides v2 | IND 077429 |
| 19-May-2015 | SRPT | FDA | Email: slides substantively the same | IND 077429 |
| 19-May-2015 | SRPT | FDA | Email: slight differences in content | IND 077429 |
| 19-May-2015 | SRPT | FDA | RoC: 19may15 type c mtg transcript | IND 077429 |
| 19-May-2015 | SRPT | FDA | RoC: 19may15 type c mtg minutes | IND 077429 |
| 20-May-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 20-May-2015 | SRPT | FDA | Email: intent to submit nda | NDA 206488 |
| 21-May-2015 | FDA | SRPT | Email: include xls and pdf nat hist | IND 077429 |
| 21-May-2015 | SRPT | FDA | Email: req approval to send xls to nda | IND 077429 |
| 22-May-2015 | FDA | SRPT | Email: submit xpt as well as xls | IND 077429 |
| 26-May-2015 | FDA | SRPT | Email: mtg attendees | IND 077429 |
| 26-May-2015 | FDA | SRPT | Email: pdf legibility confirmation | IND 077429 |
| 26-May-2015 | SRPT | FDA | Email: confirm pdf legibility ok | IND 077429 |
| 26-May-2015 | SRPT | FDA | Email: confirm xpt will be sub with xls | IND 077429 |
| 26-May-2015 | SRPT | FDA | Email: inq mtg attendees | IND 077429 |
| 27-May-2015 | SRPT | FDA | Email: rqst metamorph version | NDA 206488 |
| 28-May-2015 | FDA | SRPT | Email: metamorph nx v786 | NDA 206488 |
| 28-May-2015 | SRPT | FDA | Email: thanks | NDA 206488 |
| 2-Jun-2015 | FDA | SRPT | Email: rqst updated toc | NDA 206488 |
| 2-Jun-2015 | FDA | SRPT | Email: clin pharm lrs | NDA 206488 |
| 2-Jun-2015 | SRPT | FDA | Email: inq folder structure or toc | NDA 206488 |
| 4-Jun-2015 | SRPT | FDA | RoC: nda timing and orientation | NDA 206488 |
| 5-Jun-2015 | SRPT | FDA | Email: response to 02jun15 clin lr 1 | NDA 206488 |
| 8-Jun-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 9-Jun-2015 | FDA | SRPT | eFax 19may15 type c mtg minutes | IND 077429 |
| 9-Jun-2015 | SRPT | FDA | Email: ackn rcpt | IND 077429 |
| 9-Jun-2015 | FDA | SRPT | Email: f choy on leave 10jun15 thru 23jun15 | NDA 206488 |
| 11-Jun-2015 | SRPT | FDA | Email: responses to 02jun15 clin lrs 1 2 | NDA 206488 |
| 12-Jun-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 12-Jun-2015 | FDA | SRPT | Email: missing | NDA 206488 |
| 12-Jun-2015 | SRPT | FDA | Email: avi 4658 | NDA 206488 |
| 12-Jun-2015 | SRPT | FDA | Email: screenshot | NDA 206488 |
| 16-Jun-2015 | SRPT | FDA | Email: alert to esub re external drive | IND 077429 |
| 16-Jun-2015 | SRPT | FDA | Email: pre alert external drive | NDA 206488 |
| 22-Jun-2015 | SRPT | FDA | Email: clarify drive not shipped | NDA 206488 |
| 25-Jun-2015 | SRPT | FDA | Email: alert esub external drive | NDA 206488 |
| 26-Jun-2015 | SRPT | FDA | Email: inq 07jul15 orientation date | NDA 206488 |
| 30-Jun-2015 | SRPT | FDA | RoC: confirm 07jul15 nda orientation | NDA 206488 |
| 2-Jul-2015 | FDA | SRPT | Email: bidg 22 | IND 077429 |
| 2-Jul-2015 | FDA | SRPT | Email: navigate with sarepta pcs | IND 077429 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 2-Jul-2015 | SRPT | FDA | Email: 07jul15 orientation mtg slides | IND 077429 |
| 2-Jul-2015 | SRPT | FDA | Email: lng bldg | IND 077429 |
| 2-Jul-2015 | SRPT | FDA | Email: thanks | IND 077429 |
| 5-Jul-2015 | FDA | SRPT | Email: lobbyguard form 1 | NDA 206488 |
| 5-Jul-2015 | FDA | SRPT | Email: lobbyguard form 2 | NDA 206488 |
| 7-Jul-2015 | FDA | SRPT | Email: no questions rcvd | NDA 206488 |
| 7-Jul-2015 | SRPT | FOA | Email: lng advance orientation questions | NDA 206488 |
| 8-Jul-2015 | FDA | SRPT | Email: 07jul15 nda orientation mtg attendees | NDA 206488 |
| 8-Jul-2015 | SRPT | FDA | Email: rqst attendees | NDA 206488 |
| 9-Jul-2015 | FDA | SRPT | Letter nda acknowledgement | NDA 206488 |
| 15-Jul-2015 | FDA | SRPT | Email: clinical ir [redacted] 201 202 | NDA 206488 |
| 15-Jul-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 24-Jul-2015 | SRPT | FDA | Email: [redacted] not collected | NDA 206488 |
| 27-Jul-2015 | SRPT | FDA | Email: [redacted] lo cder | NDA 206488 |
| 29-Jul-2015 | FDA | SRPT | Email: tcon today re external drive | NDA 206488 |
| 30-Jul-2015 | FDA | SRPT | Email: 31jul15 tcon scheduled | NDA 206488 |
| 30-Jul-2015 | FDA | SRPT | Email: rfrarks available for tcon | NDA 206488 |
| 30-Jul-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | Email: 31jul15 tcon screen sharing link | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | Email: navigation tcon today | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | Email: rqst [redacted] attend tcon | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | Email: will send tcon dial in | NDA 206488 |
| 30-Jul-2015 | SRPT | FDA | RoC: screen sharing | NDA 206488 |
| 31-Jul-2015 | FDA | SRPT | Email: 31jul15 tcon topics | NDA 206488 |
| 31-Jul-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 31-Jul-2015 | SRPT | FDA | Email: updated screen sharing link | NDA 206488 |
| 4-Aug-2015 | SRPT | FDA | Email: 07jul15 nda orientation mtg minutes | NDA 206488 |
| 5-Aug-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 5-Aug-2015 | SRPT | FDA | Email: 201 202 [redacted] protocol nda location | NDA 206488 |
| 5-Aug-2015 | SRPT | FDA | Email: 29 31jul15 tcon minutes | NDA 206488 |
| 5-Aug-2015 | SRPT | FDA | Email: iss [redacted] | NDA 206488 |
| 5-Aug-2015 | SRPT | FDA | Email: response to 30jul15 ri re [redacted] | NDA 206488 |
| 6-Aug-2015 | FDA | SRPT | eFax clinical irs re nda | NDA 206488 |
| 6-Aug-2015 | FDA | SRPT | Email: rqst tcon topics | NDA 206488 |
| 6-Aug-2015 | SRPT | FDA | Email: rqst tcon to discuss filing issues | NDA 206488 |
| 7-Aug-2015 | FDA | SRPT | Email: fchoy on leave tcon rqst fwded | NDA 206488 |
| 7-Aug-2015 | FDA | SRPT | Email: nda nav good issue at | NDA 206488 |
| 7-Aug-2015 | FDA | SRPT | Email: rqst discussion outline asap | NDA 206488 |
| 7-Aug-2015 | SRPT | FDA | Email: will provide responses 10aug15 | NDA 206488 |
| 10-Aug-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 10-Aug-2015 | FDA | SRPT | Email: proposed tcon times | NDA 206488 |
| 10-Aug-2015 | FDA | SRPT | Email: tcon confirmed | NDA 206488 |
| 10-Aug-2015 | FDA | SRPT | Email: tcon tentatively scheduled | NDA 206488 |
| 10-Aug-2015 | FDA | SRPT | Email: will check | NDA 206488 |
| 10-Aug-2015 | SRPT | FDA | Email: 11aug15 tcon agenda and preliminary responses | NDA 206488 |
| 10-Aug-2015 | SRPT | FDA | Email: dial in info | NDA 206488 |
| 10-Aug-2015 | SRPT | FDA | Email: propose wednesday | NDA 206488 |
| 10-Aug-2015 | SRPT | FDA | Email: responses to 06aug15 clinical irs 1 2 3 | NDA 206488 |
| 11-Aug-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 11-Aug-2015 | FDA | SRPT | Email: clinical ir [redacted] markups | NDA 206488 |
| 11-Aug-2015 | FDA | SRPT | Email: tcon attendees | NDA 206488 |
| 11-Aug-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 11-Aug-2015 | SRPT | FDA | Email: ck data in nda | NDA 206488 |
| 11-Aug-2015 | SRPT | FDA | Email: tcon attendees | NDA 206488 |
| 14-Aug-2015 | SRPT | FDA | Email: 11aug15 ad hoc tcon minutes | NDA 206488 |
| 18-Aug-2015 | FDA | SRPT | eFax nda cmc irs | NDA 206488 |
| 19-Aug-2015 | FDA | SRPT | Email: clinical ir [redacted] | NDA 206488 |
| 20-Aug-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 20-Aug-2015 | SRPT | FDA | Email: response to 19aug15 clinical ir | NDA 206488 |
| 21-Aug-2015 | FDA | SRPT | Email: clinical irs [redacted] data | NDA 206488 |
| 25-Aug-2015 | FDA | SRPT | eFax nda filed and priority review designation granted | NDA 206488 |
| 25-Aug-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 26-Aug-2015 | FDA | SRPT | Email: rqst proprietary name rqst copied to nda | NDA 206488 |
| 27-Aug-2015 | FDA | SRPT | Email: rqst proprietary name rqst copied to nda 2 | NDA 206488 |
| 27-Aug-2015 | SRPT | FDA | Email: will submit proprietary name rqst to nda | NDA 206488 |
| 2-Sep-2015 | FDA | SRPT | Email: meth val request | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 4-Sep-2015 | FDA | SRPT | eFax filing communication | NDA 206488 |
| 8-Sep-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 9-Sep-2015 | FDA | SRPT | Email: crmc info request | NDA 206488 |
| 16-Sep-2015 | FDA | SRPT | Email: c breder available tomorrow | NDA 206488 |
| 16-Sep-2015 | FDA | SRPT | Email: clinical ir | NDA 206488 |
| 16-Sep-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 17-Sep-2015 | FDA | SRPT | Email: c breder available today | NDA 206488 |
| 17-Sep-2015 | FDA | SRPT | Email: attendees | NDA 206488 |
| 17-Sep-2015 | SRPT | FDA | Email: dial in info | NDA 206488 |
| 17-Sep-2015 | SRPT | FDA | Email: sarepts attendees | NDA 206488 |
| 17-Sep-2015 | SRPT | FDA | Email: sarepts team can meet today | NDA 206488 |
| 21-Sep-2015 | FDA | SRPT | Email: agree to hold tcon re organization | NDA 206488 |
| 21-Sep-2015 | FDA | SRPT | Email: new start time | NDA 206488 |
| 21-Sep-2015 | SRPT | FDA | Email: confirm tcon | NDA 206488 |
| 21-Sep-2015 | SRPT | FDA | Email: rqt tcon re | NDA 206488 |
| 21-Sep-2015 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 23-Sep-2015 | SRPT | FDA | Email: 17sep15 tcon minutes re safety lab ranges | NDA 206488 |
| 28-Sep-2015 | FDA | SRPT | Email: clinical ir re 201 csr int table inputs | NDA 206488 |
| 28-Sep-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 29-Sep-2015 | SRPT | FDA | Email: response to 28sep15 clinical ir re table | NDA 206488 |
| 30-Sep-2015 | SRPT | FDA | Email: 08oct15 tcon dial in | NDA 206488 |
| 30-Sep-2015 | SRPT | FDA | Email: response to 17sep15 clinical ir re safety labs | NDA 206488 |
| 3-Oct-2015 | FDA | SRPT | Letter proprietary name conditionally acceptable | NDA 206488 |
| 5-Oct-2015 | FDA | SRPT | Email: mid cycle mtg 13oct15 mcc 22oct15 | NDA 206488 |
| 5-Oct-2015 | FDA | SRPT | Letter crmc rfi multi | NDA 206488 |
| 5-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 6-Oct-2015 | SRPT | FDA | Email: confirm 22oct15 mcc tcon | NDA 206488 |
| 6-Oct-2015 | SRPT | FDA | Email: esub clarify text excel | NDA 206488 |
| 7-Oct-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 8-Oct-2015 | FDA | SRPT | Email: clin pharm ir re 201 202 methodology | NDA 206488 |
| 8-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 12-Oct-2015 | SRPT | FDA | Email: response to clin pharm rfi re methods | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: available before 1pm | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: clinical ir re | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: rqt tcon re ponsdac 22jan16 mtg | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: tcon must be today | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: will dial in now | NDA 206488 |
| 15-Oct-2015 | FDA | SRPT | Email: will dial in now 2 | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: dialed in now | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: dial in | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: propose tomorrow | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: rqt start time | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | Email: will dial in later | NDA 206488 |
| 15-Oct-2015 | SRPT | FDA | ReC: mtg planning tcon | NDA 206488 |
| 16-Oct-2015 | FDA | SRPT | eFax: ponsdac mtg date and timeline | NDA 206488 |
| 16-Oct-2015 | FDA | SRPT | Email: clin pharm ir re | NDA 206488 |
| 16-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 19-Oct-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 19-Oct-2015 | SRPT | FDA | Email: response to 15oct15 clinical ir re | NDA 206488 |
| 21-Oct-2015 | FDA | SRPT | eFax 22oct15 mcc tcon preliminary comments | NDA 206488 |
| 21-Oct-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 21-Oct-2015 | FDA | SRPT | Email: b dunn will not attend mtg | NDA 206488 |
| 21-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 21-Oct-2015 | SRPT | FDA | Email: mcc tcon attendees | NDA 206488 |
| 21-Oct-2015 | SRPT | FDA | Email: mcc tcon dial in | NDA 206488 |
| 21-Oct-2015 | SRPT | FDA | Email: response to 16oct15 clin pharm ir re | NDA 206488 |
| 21-Oct-2015 | SRPT | FDA | Email: rqt b dunn at mcc tcon | NDA 206488 |
| 22-Oct-2015 | FDA | SRPT | Email: additional tcon attendee | NDA 206488 |
| 22-Oct-2015 | FDA | SRPT | Email: independent assessor | NDA 206488 |
| 22-Oct-2015 | SRPT | FDA | Email: 22oct15 mcc tcon slides | NDA 206488 |
| 22-Oct-2015 | SRPT | FDA | Email: final tcon attendees | NDA 206488 |
| 22-Oct-2015 | SRPT | FDA | ReC: 22oct15 mcc tcon mtg minutes | NDA 206488 |
| 22-Oct-2015 | SRPT | FDA | ReC: 22oct15 mcc tcon transcript | NDA 206488 |
| 23-Oct-2015 | FDA | SRPT | Email: crmc request | NDA 206488 |
| 23-Oct-2015 | FDA | SRPT | Email: post mcc mtg clin pharm ir re | NDA 206488 |
| 23-Oct-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |

Exhibit M

Etepirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 26-Oct-2015 | SRPT | FDA | Email: fu to [redacted] material request from 2sep15 | NDA 206488 |
| 27-Oct-2015 | FDA | SRPT | Email: fu to [redacted] material request from 2sep15 | NDA 206488 |
| 27-Oct-2015 | SRPT | FDA | Email: [redacted] telecon call in info | NDA 206488 |
| 28-Oct-2015 | FDA | SRPT | Email: [redacted] telecon call in recd | NDA 206488 |
| 28-Oct-2015 | SRPT | FDA | Email: q to [redacted] | NDA 206488 |
| 30-Oct-2015 | SRPT | FDA | Email: [redacted] shipment | NDA 206488 |
| 30-Oct-2015 | SRPT | FDA | Email: responses by 02nov15 | NDA 206488 |
| 2-Nov-2015 | FDA | SRPT | Email: available tomorrow | NDA 206488 |
| 2-Nov-2015 | SRPT | FDA | Email: confirm tcon | NDA 206488 |
| 2-Nov-2015 | SRPT | FDA | Email: dial in info | NDA 206488 |
| 2-Nov-2015 | SRPT | FDA | Email: rqt tcon re pensdac due dates | NDA 206488 |
| 3-Nov-2015 | FDA | SRPT | Email: confirm tcon | NDA 206488 |
| 3-Nov-2015 | SRPT | FDA | Email: investigator list | NDA 206488 |
| 3-Nov-2015 | SRPT | FDA | Email: template instructions | NDA 206488 |
| 3-Nov-2015 | SRPT | FDA | Email: thanks | NDA 206488 |
| 3-Nov-2015 | SRPT | FDA | RoC: rqt [redacted] extension | NDA 206488 |
| 4-Nov-2015 | FDA | SRPT | eFax [redacted] mtg date and timeline updated | NDA 206488 |
| 4-Nov-2015 | FDA | SRPT | Email: issue connecting nonapproved devices | NDA 206488 |
| 4-Nov-2015 | FDA | SRPT | Email: report from credo box attached | NDA 206488 |
| 4-Nov-2015 | FDA | SRPT | Email: rqt status of 23oct15 | NDA 206488 |
| 4-Nov-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 4-Nov-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 4-Nov-2015 | SRPT | FDA | Email: min from 06oct15 telecon | NDA 206488 |
| 4-Nov-2015 | SRPT | FDA | Email: was unaware there could be issue open template device | NDA 206488 |
| 4-Nov-2015 | SRPT | FDA | Email: will respond by tomorrow | NDA 206488 |
| 4-Nov-2015 | SRPT | FDA | Email: will submit bd by [redacted] | NDA 206488 |
| 5-Nov-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 5-Nov-2015 | FDA | SRPT | Email: clinical ir re [redacted] | NDA 206488 |
| 5-Nov-2015 | FDA | SRPT | Letter [redacted] received | NDA 206488 |
| 5-Nov-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 5-Nov-2015 | SRPT | FDA | Email: [redacted] letter signature good | NDA 206488 |
| 5-Nov-2015 | SRPT | FDA | Email: responses to 23oct15 clinical and clin pharm irs | NDA 206488 |
| 12-Nov-2015 | FDA | SRPT | Email: clin pharm ir re [redacted] values | NDA 206488 |
| 12-Nov-2015 | FDA | SRPT | Email: inq ad comm av vendor | NDA 206488 |
| 12-Nov-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 12-Nov-2015 | SRPT | FDA | Email: av vendor [redacted] | NDA 206488 |
| 13-Nov-2015 | SRPT | FDA | Email: response to 05nov15 clinical ir re [redacted] | NDA 206488 |
| 18-Nov-2015 | FDA | SRPT | Email: pensdac av contact | NDA 206488 |
| 18-Nov-2015 | SRPT | FDA | Email: [redacted] av contact | NDA 206488 |
| 18-Nov-2015 | SRPT | FDA | Email: [redacted] will not visit great room | NDA 206488 |
| 18-Nov-2015 | SRPT | FDA | Email: response to 12nov15 clin pharm ir re [redacted] | NDA 206488 |
| 19-Nov-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 19-Nov-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 19-Nov-2015 | SRPT | FDA | Email: replacement lot of dime | NDA 206488 |
| 20-Nov-2015 | FDA | SRPT | eFax 22oct15 mcc tcon minutes | NDA 206488 |
| 20-Nov-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 23-Nov-2015 | FDA | SRPT | Email: clin pharm ir re [redacted] | NDA 206488 |
| 23-Nov-2015 | SRPT | FDA | RoC: responses to 23nov15 clin pharm irs | NDA 206488 |
| 24-Nov-2015 | SRPT | FDA | Email: response to 23nov15 ind clin pharm ir | IND 077429 |
| 24-Nov-2015 | SRPT | FDA | Email: response to 23nov15 nda clin pharm irs | NDA 206488 |
| 27-Nov-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 27-Nov-2015 | FDA | SRPT | Email: clinical irs re [redacted] | NDA 206488 |
| 27-Nov-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 30-Nov-2015 | FDA | SRPT | Email: clinical irs re annotated [redacted] | NDA 206488 |
| 30-Nov-2015 | FDA | SRPT | Email: clin pharm ir re [redacted] | NDA 206488 |
| 30-Nov-2015 | FDA | SRPT | Email: rqt ackn rcpt | NDA 206488 |
| 30-Nov-2015 | SRPT | FDA | Email: ackn rcpt 1 | NDA 206488 |
| 30-Nov-2015 | SRPT | FDA | Email: ackn rcpt 2 | NDA 206488 |
| 30-Nov-2015 | SRPT | FDA | Email: replacement lot [redacted] | NDA 206488 |
| 1-Dec-2015 | FDA | SRPT | Email: confirm stfy resp recd | NDA 206488 |
| 1-Dec-2015 | SRPT | FDA | Email: resp to outstand [redacted] queries 27 30 nov | NDA 206488 |
| 2-Dec-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 2-Dec-2015 | SRPT | FDA | Email: response to 30nov15 clin pharm irs re [redacted] | NDA 206488 |
| 3-Dec-2015 | FDA | SRPT | Email: clinical ir re [redacted] | NDA 206488 |
| 3-Dec-2015 | FDA | SRPT | Email: recd [redacted] reagent | NDA 206488 |
| 3-Dec-2015 | FDA | SRPT | Email: pensdac breakout room | NDA 206488 |
| 3-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 3-Dec-2015 | SRPT | FDA | Email: req conf of receipt | NDA 206488 |
| 4-Dec-2015 | SRPT | FDA | Email: eteplirsen n206488 pcnsdac briefing book | NDA 206488 |
| 4-Dec-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 4-Dec-2015 | FDA | SRPT | Email: clin pharm ir re | NDA 206488 |
| 4-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 4-Dec-2015 | SRPT | FDA | Email: response to 04dec15 clin pharm ir re | NDA 206488 |
| 8-Dec-2015 | FDA | SRPT | Email: clinical ir re study 202 dates | NDA 206488 |
| 8-Dec-2015 | FDA | SRPT | Email: clin pharm ir re | NDA 206488 |
| 8-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 8-Dec-2015 | SRPT | FDA | Email: response to 03dec15 clinical irs re | NDA 206488 |
| 9-Dec-2015 | FDA | SRPT | eFax comments on carton and container | NDA 206488 |
| 9-Dec-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 9-Dec-2015 | FDA | SRPT | Email: ackn rcpt ad comm bd | NDA 206488 |
| 9-Dec-2015 | FDA | SRPT | Email: cmc change requests | NDA 206488 |
| 9-Dec-2015 | SRPT | FDA | Email: response to 08dec15 clin pharm ir re | NDA 206488 |
| 10-Dec-2015 | FDA | SRPT | Email: reason for rqt | NDA 206488 |
| 10-Dec-2015 | FDA | SRPT | Email: rqt data | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | Email: rqt reason for data rqt | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | Email: accepts change requests by | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | Email: we agree so cmc telecon unnecessary | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | Email: response to clinical ir re dates | NDA 206488 |
| 10-Dec-2015 | SRPT | FDA | RoC: 202 timing clarification | NDA 206488 |
| 11-Dec-2015 | SRPT | FDA | Email: datasets by | NDA 206488 |
| 14-Dec-2015 | FDA | SRPT | Email: clinical ir re | NDA 206488 |
| 14-Dec-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 14-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 14-Dec-2015 | SRPT | FDA | Email: date in esq by tonight | NDA 206488 |
| 15-Dec-2015 | FDA | SRPT | Email: cant locate coa | NDA 206488 |
| 15-Dec-2015 | SRPT | FDA | Email: attempting to locate coa | NDA 206488 |
| 15-Dec-2015 | SRPT | FDA | Email: response to 14dec15 clinical ir re | NDA 206488 |
| 16-Dec-2015 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 16-Dec-2015 | FDA | SRPT | Email: pcnsdac bd may be delayed | NDA 206488 |
| 16-Dec-2015 | FDA | SRPT | Email: pcnsdac mig date published 18dec15 | NDA 206488 |
| 16-Dec-2015 | SRPT | FDA | Email: 4 coas | NDA 206488 |
| 23-Dec-2015 | FDA | SRPT | Email: ackn rcpt | IND 077429 |
| 23-Dec-2015 | FDA | SRPT | Email: clin pharm ir re | IND 077429 |
| 23-Dec-2015 | SRPT | FDA | Email: response to 23nov15 clin pharm ir re | IND 077429 |
| 23-Dec-2015 | FDA | SRPT | Email: 22jan16 pcnsdac bd v1 | NDA 206488 |
| 23-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 24-Dec-2015 | FDA | SRPT | Email: thanks | NDA 206488 |
| 27-Dec-2015 | SRPT | FDA | Email: inq addendum cds and hardcopies reqd | NDA 206488 |
| 28-Dec-2015 | FDA | SRPT | Email: short document can be Email: only | NDA 206488 |
| 29-Dec-2015 | FDA | SRPT | Email: 11jan16 lcm agenda | NDA 206488 |
| 29-Dec-2015 | SRPT | FDA | Email: rqt and at lcm | NDA 206488 |
| 30-Dec-2015 | FDA | SRPT | Email: 22jan16 pcnsdac bd v2 | NDA 206488 |
| 30-Dec-2015 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 4-Jan-2016 | SRPT | FDA | Email: correction | NDA 206488 |
| 4-Jan-2016 | SRPT | FDA | Email: lcm dial in | NDA 206488 |
| 5-Jan-2016 | SRPT | FDA | Email: rqt pt level data | NDA 206488 |
| 6-Jan-2016 | FDA | SRPT | Email: reference in bd | NDA 206488 |
| 6-Jan-2016 | FDA | SRPT | Email: rqt presenters and agenda items | NDA 206488 |
| 6-Jan-2016 | SRPT | FDA | Email: pcnsdac presenters and responders | NDA 206488 |
| 6-Jan-2016 | SRPT | FDA | Email: will answer today | NDA 206488 |
| 7-Jan-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 7-Jan-2016 | FDA | SRPT | Email: rqt update on addendum | NDA 206488 |
| 7-Jan-2016 | FDA | SRPT | Email: rqt update on presentations | NDA 206488 |
| 7-Jan-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 7-Jan-2016 | SRPT | FDA | Email: finalizing addendum today | NDA 206488 |
| 7-Jan-2016 | SRPT | FDA | Email: pcnsdac bd addendum | NDA 206488 |
| 7-Jan-2016 | SRPT | FDA | Email: presentation titles and speakers | NDA 206488 |
| 8-Jan-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 8-Jan-2016 | FDA | SRPT | Email: will update lobbyguard | NDA 206488 |
| 8-Jan-2016 | SRPT | FDA | Email: ackn rcpt lobbyguard | NDA 206488 |
| 8-Jan-2016 | SRPT | FDA | Email: to attend lcm | NDA 206488 |
| 8-Jan-2016 | SRPT | FDA | Email: pcnsdac bd addendum revised | NDA 206488 |
| 11-Jan-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 11-Jan-2016 | FDA | SRPT | Email: bd and addendum | NDA 206488 |
| 11-Jan-2016 | FDA | SRPT | Email: pcnsdac breakout room logistics | NDA 206488 |
| 11-Jan-2016 | SRPT | FDA | Email: 11jan16 lcn slides | NDA 206488 |
| 11-Jan-2016 | SRPT | FDA | Email: will present slides today | NDA 206488 |
| 12-Jan-2016 | FDA | SRPT | Email: bds to be posted 15jan16 | NDA 206488 |
| 12-Jan-2016 | FDA | SRPT | Email: pcnsdac bd will post | NDA 206488 |
| 12-Jan-2016 | FDA | SRPT | Email: pcnsdac industry representative | NDA 206488 |
| 12-Jan-2016 | SRPT | FDA | Email: agree to bd posted | NDA 206488 |
| 12-Jan-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 12-Jan-2016 | SRPT | FDA | Email: thanks 2 | NDA 206488 |
| 12-Jan-2016 | SRPT | FDA | Email: will respond today | NDA 206488 |
| 14-Jan-2016 | FDA | SRPT | Email: pcnsdac bd clearances not yet rovd | NDA 206488 |
| 14-Jan-2016 | SRPT | FDA | Email: inq time bds will be posted | NDA 206488 |
| 14-Jan-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 15-Jan-2016 | FDA | SRPT | Email: clinical lr re data | NDA 206488 |
| 15-Jan-2016 | FDA | SRPT | Email: hope to post bds | NDA 206488 |
| 15-Jan-2016 | FDA | SRPT | Email: pcnsdac bds posted | NDA 206488 |
| 15-Jan-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 15-Jan-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 15-Jan-2016 | SRPT | FDA | Email: rqt estimate of pcnsdac mtg attendees | NDA 206488 |
| 15-Jan-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 18-Jan-2016 | FDA | SRPT | Email: 400 copies of slides | NDA 206488 |
| 19-Jan-2016 | FDA | SRPT | Email: 1 minute | NDA 206488 |
| 19-Jan-2016 | FDA | SRPT | Email: inq ready now | NDA 206488 |
| 19-Jan-2016 | FDA | SRPT | Email: inq telephone number | NDA 206488 |
| 19-Jan-2016 | FDA | SRPT | Email: rqt tcon today | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: ready in 5min | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: ready now | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: ready now 2 | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: ready now 3 | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: telephone number | NDA 206488 |
| 19-Jan-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 20-Jan-2016 | FDA | SRPT | Email: clinical lr re data collection | NDA 206488 |
| 20-Jan-2016 | FDA | SRPT | Email: inq security guards | NDA 206488 |
| 20-Jan-2016 | SRPT | FDA | Email: 1 security guard | NDA 206488 |
| 20-Jan-2016 | SRPT | FDA | Email: inq bldg 1 opening time | NDA 206488 |
| 20-Jan-2016 | SRPT | FDA | Email: inq pcnsdac meeting weather decision | NDA 206488 |
| 20-Jan-2016 | SRPT | FDA | Email: inq pcnsdac meeting weather decision 2 | NDA 206488 |
| 20-Jan-2016 | SRPT | FDA | Email: responses to 15jan16 clinical lr re | NDA 206488 |
| 26-Jan-2016 | SRPT | FDA | Email: response to 20jan16 clinical lr | NDA 206488 |
| 26-Jan-2016 | SRPT | FDA | RoC: ad comm tentative date acceptable | NDA 206488 |
| 27-Jan-2016 | FDA | SRPT | eFax 23feb16 pcnsdac mtg timeline | NDA 206488 |
| 27-Jan-2016 | FDA | SRPT | Email: available at 11 | NDA 206488 |
| 27-Jan-2016 | FDA | SRPT | Email: rqt tcon re pcnsdac mtg rescheduling | NDA 206488 |
| 27-Jan-2016 | FDA | SRPT | Email: will get back | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: available for tcon | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: have diald in | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: inq bd paper copies | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: will edit addendum only | NDA 206488 |
| 27-Jan-2016 | SRPT | FDA | Email: will update addendum only | NDA 206488 |
| 28-Jan-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 28-Jan-2016 | FDA | SRPT | Email: pcnsdac mtg bd paper copies due tomorrow | NDA 206488 |
| 28-Jan-2016 | SRPT | FDA | Email: 23feb16 pcnsdac mtg investigator list | NDA 206488 |
| 29-Jan-2016 | FDA | SRPT | Email: clinical lr re source docs | NDA 206488 |
| 29-Jan-2016 | FDA | SRPT | Email: rqt eta of electronic copies | NDA 206488 |
| 29-Jan-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 29-Jan-2016 | SRPT | FDA | Email: 23feb16 pcnsdac mtg bd and addendum | NDA 206488 |
| 29-Jan-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 29-Jan-2016 | SRPT | FDA | Email: cds to be delivered 01feb16 | NDA 206488 |
| 29-Jan-2016 | SRPT | FDA | Email: pcnsdac bd tracking no | NDA 206488 |
| 29-Jan-2016 | SRPT | FDA | Email: pdfs by 4pm | NDA 206488 |
| 1-Feb-2016 | FDA | SRPT | Email: inq subject ids contain pt initials | NDA 206488 |
| 1-Feb-2016 | FDA | SRPT | Email: pcnsdac fr announcement 04feb16 | NDA 206488 |
| 1-Feb-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 1-Feb-2016 | SRPT | FDA | Email: subj ids should be redacted | NDA 206488 |
| 2-Feb-2016 | FDA | SRPT | Email: pcnsdac 23feb16 mtg delayed | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 2-Feb-2016 | FDA | SRPT | Email: pnsdac bd cd copies rcvd | NDA 206488 |
| 2-Feb-2016 | FDA | SRPT | Email: pnsdac bd paper copies rcvd | NDA 206488 |
| 2-Feb-2016 | FDA | SRPT | Email: pnsdac mtg date not in fr tomorrow | NDA 206488 |
| 2-Feb-2016 | SRPT | FDA | Email: rqt conf of pnsdac mtg fr posting date | NDA 206488 |
| 3-Feb-2016 | SRPT | FDA | Email: 23feb16 mtg cancellation notice from [REDACTED] | NDA 206488 |
| 4-Feb-2016 | SRPT | FDA | Email: rqt tcon re pdufa date | NDA 206488 |
| 5-Feb-2016 | FDA | SRPT | eFax new pdufa date is 26may16 | NDA 206488 |
| 5-Feb-2016 | FDA | SRPT | Email: dnp notified of postponement before panel | NDA 206488 |
| 5-Feb-2016 | FDA | SRPT | Email: rqt shipping label for return pkg | NDA 206488 |
| 5-Feb-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 5-Feb-2016 | SRPT | FDA | Email: return label | NDA 206488 |
| 7-Feb-2016 | SRPT | FDA | Email: [REDACTED] | NDA 206488 |
| 8-Feb-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 8-Feb-2016 | FDA | SRPT | Email: very factual | NDA 206488 |
| 9-Feb-2016 | FDA | SRPT | Email: fu clinical lr re [REDACTED] inclusion dates | NDA 206488 |
| 9-Feb-2016 | FDA | SRPT | Email: propose 25apr16 pnsdac mtg date | NDA 206488 |
| 9-Feb-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 9-Feb-2016 | SRPT | FDA | Email: ackn rcpt 2 | NDA 206488 |
| 10-Feb-2016 | FDA | SRPT | eFax 11jan16 lcn minutes | NDA 206488 |
| 10-Feb-2016 | FDA | SRPT | eFax 25apr16 pnsdac mtg timeline | NDA 206488 |
| 10-Feb-2016 | FDA | SRPT | Email: pnsdac bd return status | NDA 206488 |
| 10-Feb-2016 | SRPT | FDA | Email: inq will edit pnsdac bd | NDA 206488 |
| 10-Feb-2016 | SRPT | FDA | Email: ck | NDA 206488 |
| 10-Feb-2016 | SRPT | FDA | Email: pnsdac mtg list of investigators | NDA 206488 |
| 11-Feb-2016 | FDA | SRPT | Email: wll check with dnp | NDA 206488 |
| 11-Feb-2016 | SRPT | FDA | Email: rqt tcon re 29jan16 clinical lrs | NDA 206488 |
| 12-Feb-2016 | FDA | SRPT | Email: bd return pkg tracking no | NDA 206488 |
| 12-Feb-2016 | FDA | SRPT | Email: clinical lrs re [REDACTED] | NDA 206488 |
| 12-Feb-2016 | SRPT | FDA | Email: fwded mtg rqt | NDA 206488 |
| 12-Feb-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 12-Feb-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 16-Feb-2016 | FDA | SRPT | Email: propose 18feb16 tcon date | NDA 206488 |
| 16-Feb-2016 | SRPT | FDA | Email: confirm 18feb16 tcon | NDA 206488 |
| 16-Feb-2016 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 17-Feb-2016 | FDA | SRPT | Email: dnp probably wants to know [REDACTED] | NDA 206488 |
| 17-Feb-2016 | FDA | SRPT | Email: inq pnsdac av vendor | NDA 206488 |
| 17-Feb-2016 | SRPT | FDA | Email: av vendor is [REDACTED] | NDA 206488 |
| 17-Feb-2016 | SRPT | FDA | Email: response to 12feb16 clinical lrs re [REDACTED] | NDA 206488 |
| 17-Feb-2016 | SRPT | FDA | Email: rqt fu tcon | NDA 206488 |
| 18-Feb-2016 | FDA | SRPT | Email: dnp has not decided whether to update pnsdac bd | NDA 206488 |
| 18-Feb-2016 | SRPT | FDA | Email: rqt tcon participants | NDA 206488 |
| 18-Feb-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 18-Feb-2016 | SRPT | FDA | Email: we are diald in | NDA 206488 |
| 18-Feb-2016 | SRPT | FDA | RoC: 18feb16 ad hoc tcon minutes | NDA 206488 |
| 18-Feb-2016 | SRPT | FDA | RoC: 18feb16 ad hoc tcon transcript | NDA 206488 |
| 25-Feb-2016 | FDA | SRPT | Email: clinical lr re [REDACTED] site contact info | NDA 206488 |
| 25-Feb-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 29-Feb-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 29-Feb-2016 | SRPT | FDA | Email: partial response to 25feb16 clinical lr re [REDACTED] | NDA 206488 |
| 3-Mar-2016 | FDA | SRPT | Email: leuven nmrc site inspection 25 29apr16 | NDA 206488 |
| 4-Mar-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 4-Mar-2016 | FDA | SRPT | Email: rqt update on [REDACTED] registry contact info | NDA 206488 |
| 4-Mar-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 4-Mar-2016 | SRPT | FDA | Email: contact info sent to aifa | NDA 206488 |
| 4-Mar-2016 | SRPT | FDA | Email: [REDACTED] contact info | NDA 206488 |
| 8-Mar-2016 | FDA | SRPT | Email: propose agenda for leuven inspection | NDA 206488 |
| 8-Mar-2016 | SRPT | FDA | Email: [REDACTED] availability | NDA 206488 |
| 8-Mar-2016 | SRPT | FDA | Email: proposal acceptable to [REDACTED] | NDA 206488 |
| 9-Mar-2016 | FDA | SRPT | Email: pnsdac mtg date to be published 14mar16 | NDA 206488 |
| 9-Mar-2016 | FDA | SRPT | Email: rqt status update on [REDACTED] source docs | NDA 206488 |
| 9-Mar-2016 | SRPT | FDA | Email: hope to get docs in next couple weeks | NDA 206488 |
| 9-Mar-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 10-Mar-2016 | FDA | SRPT | Email: site inspections 1 day per pl | NDA 206488 |
| 11-Mar-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 11-Mar-2016 | FDA | SRPT | Email: clinical lr [REDACTED] | NDA 206488 |
| 11-Mar-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 11-Mar-2016 | SRPT | FDA | Email: response to 11mar16 clinical lr | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 14-Mar-2016 | SRPT | FDA | Email: [redacted] site avsilability | NDA 206488 |
| 15-Mar-2016 | FDA | SRPT | eFax labeling comments | NDA 206488 |
| 15-Mar-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 17-Mar-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 17-Mar-2016 | SRPT | FDA | Email: responses to 29jan 12feb 18feb16 clinical lrs | NDA 206488 |
| 18-Mar-2016 | SRPT | FDA | Email: [redacted] data | NDA 206488 |
| 21-Mar-2016 | FDA | SRPT | Email:confirm receipt [redacted] data | NDA 206488 |
| 22-Mar-2016 | SRPT | FDA | Email: rqst pcnsdac bd extension | NDA 206488 |
| 25-Mar-2016 | SRPT | FDA | Email: 25apr16 pcnsdac mtg bd | NDA 206488 |
| 28-Mar-2016 | SRPT | FDA | Email: alert moon to fedex delivery delay | NDA 206488 |
| 29-Mar-2016 | FDA | SRPT | Email: moon oooo but confirmed receipt of pkg | NDA 206488 |
| 5-Apr-2016 | FDA | SRPT | Email: pcnsdac bd delayed | NDA 206488 |
| 5-Apr-2016 | SRPT | FDA | Email: updated pcnsdac presenters and responders | NDA 206488 |
| 7-Apr-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 7-Apr-2016 | SRPT | FDA | Email: rqst 2nd lcn | NDA 206488 |
| 12-Apr-2016 | FDA | SRPT | eFax 25apr16 pcnsdac mtg bd | NDA 206488 |
| 13-Apr-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 13-Apr-2016 | FDA | SRPT | Email: rqst logistics tcon | NDA 206488 |
| 13-Apr-2016 | FDA | SRPT | Email: tcon time | NDA 206488 |
| 13-Apr-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 13-Apr-2016 | SRPT | FDA | Email: available for call | NDA 206488 |
| 13-Apr-2016 | SRPT | FDA | Email: confirm tcon | NDA 206488 |
| 13-Apr-2016 | SRPT | FDA | Email: pcnsdac bd [redacted] rqsits | NDA 206488 |
| 13-Apr-2016 | SRPT | FDA | Email: pcnsdac mtg headcount | NDA 206488 |
| 13-Apr-2016 | SRPT | FDA | RoC: 25apr16 pcnsdac mtg logistics | NDA 206488 |
| 15-Apr-2016 | FDA | SRPT | Email: rqst update on [redacted] | NDA 206488 |
| 15-Apr-2016 | SRPT | FDA | Email: 25apr16 pcnsdac bd errata | NDA 206488 |
| 15-Apr-2016 | SRPT | FDA | Email: inq timing of response to [redacted] rqsits | NDA 206488 |
| 15-Apr-2016 | SRPT | FDA | Email: pcnsdac presentation titles and speakers | NDA 206488 |
| 18-Apr-2016 | FDA | SRPT | Email: 800 to 1000 copies | NDA 206488 |
| 18-Apr-2016 | FDA | SRPT | Email: final positions on pcnsdac bd [redacted] | NDA 206488 |
| 18-Apr-2016 | FDA | SRPT | Email: [redacted] | NDA 206488 |
| 18-Apr-2016 | FDA | SRPT | Email: pcnsdac bd reduction tcon | NDA 206488 |
| 18-Apr-2016 | FDA | SRPT | Email: unable to dial in | NDA 206488 |
| 18-Apr-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 18-Apr-2016 | SRPT | FDA | Email: inq tcon error message | NDA 206488 |
| 18-Apr-2016 | SRPT | FDA | Email: rqst no of printed copies | NDA 206488 |
| 18-Apr-2016 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 19-Apr-2016 | FDA | SRPT | Email: [redacted] data to be presented at pcnsdac | NDA 206488 |
| 19-Apr-2016 | FDA | SRPT | Email: rqst update on [redacted] | NDA 206488 |
| 19-Apr-2016 | FDA | SRPT | Email: rqst [redacted] | NDA 206488 |
| 19-Apr-2016 | SRPT | FDA | Email: [redacted] still pending | NDA 206488 |
| 19-Apr-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 20-Apr-2016 | FDA | SRPT | Email: rqst tcon | NDA 206488 |
| 20-Apr-2016 | FDA | SRPT | Email: tcon time | NDA 206488 |
| 20-Apr-2016 | SRPT | FDA | Email: rqst overview of presentation and conclusions | NDA 206488 |
| 20-Apr-2016 | SRPT | FDA | Email: tcon availability | NDA 206488 |
| 20-Apr-2016 | SRPT | FDA | Email: tcon number | NDA 206488 |
| 20-Apr-2016 | SRPT | FDA | Email: will submit [redacted] asap | NDA 206488 |
| 20-Apr-2016 | SRPT | FDA | RoC: pcnsdac mtg agenda and logistics tcon | NDA 206488 |
| 21-Apr-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 21-Apr-2016 | FDA | SRPT | Email: pcnsdac industry rep mark gordon | NDA 206488 |
| 21-Apr-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 22-Apr-2016 | FDA | SRPT | Email: you have had access to [redacted] data | NDA 206488 |
| 22-Apr-2016 | SRPT | FDA | Email: we only have access to manuscript | NDA 206488 |
| 24-Apr-2016 | FDA | SRPT | Email: wireless mic for [redacted] | NDA 206488 |
| 24-Apr-2016 | SRPT | FDA | Email: inq podium access for [redacted] | NDA 206488 |
| 25-Apr-2016 | FDA | SRPT | Email: clear 2nd row during oph | NDA 206488 |
| 3-May-2016 | FDA | SRPT | Email: clinical lrs re [redacted] | NDA 206488 |
| 3-May-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 4-May-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 4-May-2016 | SRPT | FDA | Email: response to 03may16 clin pharm lr no 2 | NDA 206488 |
| 5-May-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 5-May-2016 | FDA | SRPT | Email: clinical lrs re [redacted] | NDA 206488 |
| 5-May-2016 | FDA | SRPT | Email: rqst update on [redacted] | NDA 206488 |
| 5-May-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 5-May-2016 | SRPT | FDA | Email: response to 05may16 clinical lrs re [redacted] | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 5-May-2016 | SRPT | FDA | Email: response to [redacted] rqst by tomorrow | NDA 206488 |
| 6-May-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 6-May-2016 | FDA | SRPT | Email: clinical lr 202 | NDA 206488 |
| 6-May-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 6-May-2016 | SRPT | FDA | Email: response to 06may16 clinical lr re 202 | NDA 206488 |
| 6-May-2016 | SRPT | FDA | Email: [redacted] data by monday | NDA 206488 |
| 9-May-2016 | SRPT | FDA | Email: response to 19apr16 clinical lr re [redacted] data v1 | NDA 206488 |
| 10-May-2016 | FDA | SRPT | Email: response v1 fwded to team | NDA 206488 |
| 10-May-2016 | SRPT | FDA | Email: response to 19apr16 clinical lr re [redacted] v2 | NDA 206488 |
| 24-May-2016 | FDA | SRPT | Email: nda review will continue past pdufa date | NDA 206488 |
| 24-May-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 24-May-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 24-May-2016 | SRPT | FDA | Email: revised proposed [redacted] | NDA 206488 |
| 27-May-2016 | SRPT | FDA | Email: rqst update on [redacted] comments | NDA 206488 |
| 31-May-2016 | FDA | SRPT | Email: unable to provide [redacted] comments timeline | NDA 206488 |
| 31-May-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 1-Jun-2016 | FDA | SRPT | Email: rqst tcon to discuss [redacted] analysis | NDA 206488 |
| 1-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 2-Jun-2016 | FDA | SRPT | Email: tcon rqst 2 | NDA 206488 |
| 3-Jun-2016 | FDA | SRPT | Email: tcon 06jun16 1pm | NDA 206488 |
| 3-Jun-2016 | FDA | SRPT | Email: lhenka | NDA 206488 |
| 3-Jun-2016 | FDA | SRPT | Email: [redacted] comments pending | NDA 206488 |
| 3-Jun-2016 | FDA | SRPT | Letter clinical lr re [redacted] analysis | NDA 206488 |
| 3-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 3-Jun-2016 | SRPT | FDA | Email: confirm 1pm tcon | NDA 206488 |
| 3-Jun-2016 | SRPT | FDA | Email: rqst tcon w ash rao re [redacted] protocol | NDA 206488 |
| 3-Jun-2016 | SRPT | FDA | Email: tcon details monday morning | NDA 206488 |
| 4-Jun-2016 | SRPT | FDA | Email: tcon dial in | NDA 206488 |
| 5-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 5-Jun-2016 | FDA | SRPT | Email: rqst [redacted] protocol for tcon tomorrow | NDA 206488 |
| 5-Jun-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 5-Jun-2016 | SRPT | FDA | Email: draft interim [redacted] protocols | NDA 206488 |
| 5-Jun-2016 | SRPT | FDA | Email: [redacted] protocol tonight | NDA 206488 |
| 6-Jun-2016 | FDA | SRPT | Email: attendees | NDA 206488 |
| 6-Jun-2016 | FDA | SRPT | Email: internal discussion first | NDA 206488 |
| 6-Jun-2016 | FDA | SRPT | Email: labeling comments 3 | NDA 206488 |
| 6-Jun-2016 | FDA | SRPT | Email: rqst confirmation of [redacted] addresses | NDA 206488 |
| 6-Jun-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: 15 minutes late | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: confirm [redacted] addresses | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: rqst attendees | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: tcon slides and attendees | NDA 206488 |
| 6-Jun-2016 | SRPT | FDA | Email: will reply asap | NDA 206488 |
| 7-Jun-2016 | FDA | SRPT | Email: rqst [redacted] contacts | NDA 206488 |
| 7-Jun-2016 | FDA | SRPT | Email: rqst [redacted] and ncs | NDA 206488 |
| 7-Jun-2016 | SRPT | FDA | Email: 06jun16 ad hoc tcon minutes | NDA 206488 |
| 7-Jun-2016 | SRPT | FDA | Email: [redacted] site contact | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: ackn rcpt 2 | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: ackn rcpt 3 | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: ackn rcpt 4 | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: need [redacted] details to confirm inspections | NDA 206488 |
| 8-Jun-2016 | FDA | SRPT | Email: rqst [redacted] site contact | NDA 206488 |
| 8-Jun-2016 | SRPT | FDA | Email: 4858 us 202 [redacted] | NDA 206488 |
| 8-Jun-2016 | SRPT | FDA | Email: [redacted] site contact | NDA 206488 |
| 8-Jun-2016 | SRPT | FDA | Email: nc details preliminary response | NDA 206488 |
| 8-Jun-2016 | SRPT | FDA | Email: rqst feedback by 10jun16 | NDA 206488 |
| 8-Jun-2016 | SRPT | FDA | Email: updated [redacted] protocols | NDA 206488 |
| 9-Jun-2016 | FDA | SRPT | Email: [redacted] under review by [redacted] | NDA 206488 |
| 9-Jun-2016 | SRPT | FDA | Email: [redacted] protocols | NDA 206488 |
| 9-Jun-2016 | SRPT | FDA | Email: rqst [redacted] comments | NDA 206488 |
| 9-Jun-2016 | SRPT | FDA | Email: site visit dates | NDA 206488 |
| 9-Jun-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 9-Jun-2016 | SRPT | FDA | RoC: rqst site visit dates | NDA 206488 |
| 10-Jun-2016 | FDA | SRPT | Email: 06jun16 ad hoc tcon minutes | NDA 206488 |
| 10-Jun-2016 | FDA | SRPT | Email: edited [redacted] | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|--|------------|
| 10-Jun-2016 | FDA | SRPT | Email: signature | NDA 206488 |
| 10-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 10-Jun-2016 | SRPT | FDA | Email: ackn rcpt 2 | NDA 206488 |
| 13-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 13-Jun-2016 | FDA | SRPT | Email: adr table derivation | NDA 206488 |
| 13-Jun-2016 | FDA | SRPT | Email: carton container proposal is acceptable | NDA 206488 |
| 13-Jun-2016 | FDA | SRPT | Email: will discuss and provide response | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: ackn rcpt 2 | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: rqst adr table reference | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: rqst confirmation of Inspector at | NDA 206488 |
| 13-Jun-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 15-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 15-Jun-2016 | FDA | SRPT | Email: rqst dates of nonclin pmrs and cmc pmcs | NDA 206488 |
| 15-Jun-2016 | SRPT | FDA | Email: manual | NDA 206488 |
| 15-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 16-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 16-Jun-2016 | SRPT | FDA | Email: proposed nonclin pmr and cmc pmc dates | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: ackn rcpt 2 | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: inspector roles | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: rqst final protocol | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: rqst redline in word | NDA 206488 |
| 17-Jun-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: final 4658 protocol | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: rqst confirmation of | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: rqst inspector roles | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: thanks | NDA 206488 |
| 17-Jun-2016 | SRPT | FDA | Email: updated | NDA 206488 |
| 18-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 18-Jun-2016 | SRPT | FDA | Email: updated | NDA 206488 |
| 20-Jun-2016 | FDA | SRPT | Email: clinical lr re | NDA 206488 |
| 20-Jun-2016 | FDA | SRPT | Letter: form 482 1 | NDA 206488 |
| 20-Jun-2016 | FDA | SRPT | Letter: form 482 2 | NDA 206488 |
| 20-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 21-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 21-Jun-2016 | SRPT | FDA | Email: | NDA 206488 |
| 22-Jun-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 22-Jun-2016 | FDA | SRPT | Email: lng today | NDA 206488 |
| 22-Jun-2016 | SRPT | FDA | Email: response to 20jun16 clinical lr re | NDA 206488 |
| 22-Jun-2016 | SRPT | FDA | Email: today | NDA 206488 |
| 23-Jun-2016 | FDA | SRPT | Email: clinical lr re analysis sap | NDA 206488 |
| 23-Jun-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 23-Jun-2016 | FDA | SRPT | RoC: rqs! | NDA 206488 |
| 23-Jun-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 23-Jun-2016 | SRPT | FDA | Email: | NDA 206488 |
| 23-Jun-2016 | SRPT | FDA | Email: response to 23jun16 clinical lr re sap | NDA 206488 |
| 24-Jun-2016 | SRPT | FDA | Email: sq0042 contents | NDA 206488 |
| 26-Jun-2016 | SRPT | FDA | Email: | NDA 206488 |
| 27-Jun-2016 | FDA | SRPT | Email: rqst notification when submission is in esg | NDA 206488 |
| 27-Jun-2016 | SRPT | FDA | Email: sq0042 in esg | NDA 206488 |
| 5-Jul-2016 | FDA | SRPT | Email: him 25apr16 pcnsdac meeting minutes | NDA 206488 |
| 8-Jul-2016 | SRPT | FDA | Email: lng sponsor rep title change procedure | NDA 206488 |
| 13-Jul-2016 | FDA | SRPT | Email: rqst efficacy pmr pmc dates | NDA 206488 |
| 13-Jul-2016 | FDA | SRPT | Email: rqst revised nonclinical pmr dates | NDA 206488 |
| 13-Jul-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 13-Jul-2016 | SRPT | FDA | Email: ackn rcpt 2 | NDA 206488 |
| 14-Jul-2016 | FDA | SRPT | Email: need time for process | NDA 206488 |
| 14-Jul-2016 | FDA | SRPT | Email: revised eteplirsen pmr | NDA 206488 |
| 14-Jul-2016 | SRPT | FDA | Email: pmr pmc dates | NDA 206488 |
| 14-Jul-2016 | SRPT | FDA | Email: nonclinical revised pmr dates 1 | NDA 206488 |
| 15-Jul-2016 | FDA | SRPT | Email: nonclinical revised pmr dates acceptable | NDA 206488 |
| 15-Jul-2016 | FDA | SRPT | Email: suggest 6 mos for | NDA 206488 |
| 15-Jul-2016 | SRPT | FDA | Email: eteplirsen pmr revised dates | NDA 206488 |

Exhibit M

Eteplirsen (AVI-4658) for treatment of Duchenne muscular dystrophy (DMD)

Regulatory Chronology Log

| | | | | |
|-------------|------|------|---|------------|
| 15-Jul-2016 | SRPT | FDA | Email: nonclinical revised pmr dates 2 | NDA 206488 |
| 15-Jul-2016 | SRPT | FDA | Email: accept [redacted] pmr pmc dates | NDA 206488 |
| 22-Jul-2016 | FDA | SRPT | Email: rqst [redacted] pmr dates | NDA 206488 |
| 27-Jul-2016 | SRPT | FDA | Email: [redacted] pmr dates | NDA 206488 |
| 28-Jul-2016 | FDA | SRPT | Email: edked [redacted] | NDA 206488 |
| 29-Jul-2016 | SRPT | FDA | Email: responses to [redacted] | NDA 206488 |
| 2-Aug-2016 | FDA | SRPT | Email: [redacted] data median | NDA 206488 |
| 2-Aug-2016 | FDA | SRPT | Email: [redacted] | NDA 206488 |
| 3-Aug-2016 | FDA | SRPT | Email: [redacted] pmr dates acceptable | NDA 206488 |
| 6-Aug-2016 | FDA | SRPT | Email: eteplirsen [redacted] | NDA 206488 |
| 16-Sep-2016 | FDA | SRPT | Email: revised pmr pmc dates | NDA 206488 |
| 16-Sep-2016 | FDA | SRPT | Email: rqst submission of revised pmr pmc dates | NDA 206488 |
| 16-Sep-2016 | FDA | SRPT | Email: thanks | NDA 206488 |
| 16-Sep-2016 | SRPT | FDA | Email: accept revised pmr pmc dates | NDA 206488 |
| 16-Sep-2016 | SRPT | FDA | Email: pmrs pmcs will be submitted | NDA 206488 |
| 16-Sep-2016 | SRPT | FDA | Email: submission available in esg | NDA 206488 |
| 19-Sep-2016 | FDA | SRPT | Email:htm eteplirsen approval letter | NDA 206488 |
| 19-Sep-2016 | FDA | SRPT | Email:htm eteplirsen summary review | NDA 206488 |
| 19-Sep-2016 | FDA | SRPT | Email:htm eteplirsen uspi | NDA 206488 |
| 19-Sep-2016 | FDA | SRPT | Letter: nda206488 action letter | NDA 206488 |
| 19-Sep-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 20-Sep-2016 | FDA | SRPT | Email: rqst 4658 [redacted] demos | NDA 206488 |
| 20-Sep-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 21-Sep-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 21-Sep-2016 | FDA | SRPT | Email: rqst response today | NDA 206488 |
| 21-Sep-2016 | SRPT | FDA | Email: all 4658 [redacted] | NDA 206488 |
| 26-Sep-2016 | SRPT | FDA | Email: eudralink pre maa raop mtg slides | NDA 206488 |
| 27-Sep-2016 | FDA | SRPT | Email: rqst dmd study enrollment update | NDA 206488 |
| 27-Sep-2016 | SRPT | FDA | Email: ackn rcpt | NDA 206488 |
| 28-Sep-2016 | FDA | SRPT | Email: ackn rcpt | NDA 206488 |
| 28-Sep-2016 | SRPT | FDA | Email: dmd study [redacted] update | NDA 206488 |
| 29-Sep-2016 | FDA | SRPT | Email: E595:E1534letter acknowledgement of cbs 30 | NDA 206488 |