From: Siguru Medical Affairs <medicalaffairs@siguru.ai>
To: Dr A. Reviewer <a.reviewer@example.nhs.uk>
Sent: Tuesday 6 October 2026 09:12
Subject: **A quick update you may have missed**

This email is intended for UK healthcare professionals only. FICTIONAL DRUG - FOR DEMONSTRATION PURPOSES ONLY.

Adverse events should be reported. Reporting forms and information can be found at **https://yellowcard.mhra.gov.uk/** or search for MHRA Yellow Card in the Google Play or Apple App Store. Adverse events should also be reported to Siguru Limited via the **Siguru Reporting Tool** or on 0800 987 6543.

DEMOZUMAB▼ (vigilanafine): SPRING-1 primary results now published[1]

Dear Doctor,

The primary results of SPRING-1, the Phase III trial of DEMOZUMAB in moderate-to-severe allergic rhinitis, are now published in the *Journal of Allergy and Clinical Immunology*.[1] DEMOZUMAB is the first monoclonal antibody to block IL-47, an upstream epithelial cytokine in type 2 inflammation.[2]

DEMOZUMAB gives your patients their lives back.

> DEMOZUMAB is indicated for add-on maintenance treatment of moderate-to-severe allergic rhinitis in adults and adolescents 12 years and older whose disease is inadequately controlled despite treatment with intranasal corticosteroids.[3]

PRIMARY ENDPOINT

−1.84

mean change from baseline in daily TNSS (Weeks 12–24) vs −0.87 with placebo
(difference −0.97; 95% CI −1.28 to −0.66; p<0.001)[1]



Figure: least-squares mean change in daily TNSS from baseline, DEMOZUMAB vs placebo, Weeks 0–24.[1]

What SPRING-1 showed

782 adults and adolescents randomised 1:1 to DEMOZUMAB 300 mg or placebo every 4 weeks, added to intranasal corticosteroids.[1]

Statistically significant improvement in Rhinoconjunctivitis Quality of Life Questionnaire score vs placebo ($p<0.001$).[1]

Treatment-emergent adverse events in 62.0% of DEMOZUMAB-treated and 58.7% of placebo-treated patients.[1]

The most common adverse events with DEMOZUMAB were injection-site reactions (8.9%), nasopharyngitis (7.4%) and headache (5.6%).[1]

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The recommended dose is 300 mg administered by subcutaneous injection once every 4 weeks, available as a pre-filled syringe or pre-filled pen.[3]

Read the SPRING-1 summary

Prescribing information for DEMOZUMAB (vigilanafine) 300 mg solution for injection. Please refer to the Summary of Product Characteristics before prescribing.

References

1. Mitchell PD, et al. Efficacy and safety of vigilanafine in adults and adolescents with moderate-to-severe allergic rhinitis: Results from the SPRING-1 randomised controlled trial. *J Allergy Clin Immunol*. 2025;155(3):687-696.
2. Zhang H, Rahman S. IL-47 blockade in allergic disease: Mechanisms and therapeutic implications. *Nat Rev Immunol*. 2024;24(9):623-638.
3. DEMOZUMAB (vigilanafine) Summary of Product Characteristics. Siguru Limited. December 2025.

DEMOZUMAB (vigilanafine)

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You are receiving this email because you registered your interest in DEMOZUMAB on the Siguru HCP portal. Read our privacy policy.

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